

**Present:**

Dr. Gary Alexander, Chair  
Brandon Hatch, Vice Chair  
Commissioner Lorene Kamalu  
Mayor Joy Petro  
Dr. Ryan Stewart  
Troy Wood  
Dr. Colleen Taylor  
Mr. Brian Hatch

**Excused:**

Neal Geddes, Attorney

**Davis County Health Department Staff:**

Rachelle Blackham, Deputy Director, Senior Services  
Dave Spence, Deputy Director, Health  
Stephanie Spens, Assistant to the Director  
Jay Clark, Environmental Health Division Director  
Ivy Melton Sales, Community Health Division Director  
Diana Reich, Administration Division Director  
Sarah Willardson, CD/Epi Division Director  
Kristen O'Flarity, Community Health Bureau Manager  
Isa Perry, Health Strategy Bureau Manager

**Guests:**

Lorna Rosenstein

**Welcome**

The meeting of the Davis County Board of Health was held Tuesday, August 8, 2023 at the Davis County Health Department, Board Room, 22 South State Street, Clearfield, Utah. The meeting was called to order at 7:32 a.m. by the Board of Health Chair, Dr. Gary Alexander.

**Minutes (Action)**

The minutes from the August 8, 2023 meeting were presented to the members and reviewed. *Dr. Gary Alexander presented a motion to approve said minutes. Mayor Joy Petro motioned for the minutes to be approved. Dr. Ryan Stewart seconded the motion. All were in favor. The vote was unanimous.*

Dr. Gary Alexander asked if there were any public comments that needed to be made. No response was given by visitors.

**Board Member Nomination/Election (Action)**

Mr. Brian Hatch brought attention to the Board members that there is a vacant spot on the Board. The bylaws require the Board to have representation from the Davis School District. The name the School Board has presented to the Board is Mr. Rich Swanson. Mr. Swanson has replaced Mr. Scott Zigich, long time Board of Health member, as the Director of Safety, Security, and Risk. Mr. Swanson is the former principal of Farmington High School. Mr. Hatch asked the Board's approval to submit Mr. Swanson's name to the commission to be appointed to the Davis County Board of Health. *Mr. Troy Wood was first to submit a recommendation for Mr. Swanson to be a member of the Davis County Board of Health. Commissioner Lorene Kamalu was second. Dr. Alexander asked if there was any discussion or questions. All were in favor. The vote was unanimous.* Proper steps will be taken to get Mr. Swanson's name submitted for commission's approval.

**Public Hearing Report - Rabies Prevention and Control Regulation (Action)**

Ms. Sarah Willardson, division director for the Communicable Disease and Epidemiology Division, provided a progress report on the Rabies Prevention and Control Regulation.

1. Original *Rabies Prevention and Control Regulation* was passed by the Davis County Board of Health on November 12, 2013.
2. The proposed changes to the regulation include:
  - Establishing rabies enforcement policies and follow-up recommendations to animal exposures county-wide;
  - Renaming *Animal Control* to *Animal Care of Davis County*;
  - Separating the regulation guidance regarding *Animal Care* and *Human Care* into two distinct sections; and
  - Updating overall formatting and grammatical changes.
3. The proposed changes to the regulation are not in conflict with Federal Law, State Statute or Rule.
4. The Board of Health provided a public hearing as required by law.
  - The hearing was held on Thursday, June 22, 2023.
  - Written comments were received until Friday, June 16, 2023.

Ms. Willardson thanked Dr. Gary Alexander for being the hearing officer. Mayor Joy Petro asked if there were any comments. Ms. Willardson stated there was one comment from Ashleigh Young, the Director of Animal Care, in support of the changes. Mr. Brian Hatch added creating this rule has helped Animal Care. There is a communicable disease rule at the state level that governs rabies, but for Davis County this is about efficiency. The state manages the animal side and the county manages the public health side. This regulation provides the authority central to the county and unifies each city's response to rabies exposures.

Dr. Alexander asked if there were any comments, questions, or concerns. *After no response, Dr. Alexander presented a motion to the Board to approve the Findings of Fact and Conclusions of Law. Mayor Joy Petro was first to approve the Findings of Fact and Conclusions of Law. Commissioner Lorene Kamalu was second. All were in favor. The vote was unanimous.*

*Dr. Alexander then put forward a motion to approve the amended changes to the Rabies Prevention and Control Regulation. Dr. Ryan Stewart was first to approve the amended changes to the regulation. Mayor Joy Petro was second. All were in favor. The vote was unanimous.*

### **Request for Public Hearing (Action)**

Ms. Ivy Melton Sales, division director for the Community Health Division, presented to the Board an overview of the Tobacco Retailer Regulation and requested a public hearing for public comments to be taken into consideration of the recommended changes.

- First adopted in 2018 to align with new legislation
- Admin Rule R384-324
  - Authorized by UCA 26B-1-213, 26B-7-508(6)
  - Establishes the process by which local health departments issue, suspend, and revoke a tobacco retail permit
  - Before this rule a tobacco retailer only needed:
    - Utah Tax Commission License
    - Business license from the city

The law now requires these businesses to gain a permit from their local health department. The administrative rule outlines this entire process.

Overview of proposed changes:

- To align with multiple updates in Utah Code since 2018
  - Renumbering of Utah Health Code
    - Title 26: Utah Health Code Chapter 62: Tobacco, Electronic Cigarette, and Nicotine Product Retail Permit to Title 26B: Utah Health and Human Services Code Chapter 7: Public Health and Prevention Part 5: Regulation of Smoking, Tobacco Products, and Nicotine Products
  - Definitions
    - “Tobacco products” to “tobacco products, electronic cigarette products, or nicotine products”
  - Violations
  - Penalties
- To increase transparency about permit expectations with tobacco retailers

The following list is recommended definitions to be added to the regulation:

**\*ELECTRONIC CIGARETTE:** Any electronic oral device that provides an aerosol or a vapor of nicotine or other substance and which simulates smoking through the use or inhalation of the device as defined in UCA Section 76-10-101(4).

**\*ELECTRONIC CIGARETTE PRODUCT:** An electronic cigarette, an electronic cigarette substance, or a prefilled electronic cigarette as defined in UCA Section 76-10-101(5).

**\*FLAVORED ELECTRONIC CIGARETTE PRODUCT:** An electronic cigarette product that has a taste or smell that is distinguishable by an ordinary consumer either before or during use or consumption of the electronic cigarette product as defined in UCA Section 76-10-101(7). A flavored electronic cigarette product includes an electronic cigarette product that has a taste or smell of any fruit, chocolate, vanilla, honey, candy, cocoa, dessert, alcoholic beverage, herb, or spice. A flavored electronic cigarette product does not include an electronic cigarette product that has a taste or smell of only tobacco, mint, or menthol.

**\*NICOTINE PRODUCT:** An alternative nicotine product or a nontherapeutic nicotine product as defined in UCA Section 76-10-101(9).

**\*PROPRIETOR:** The owner of a retail establishment, or any other place of business that sells, markets, or distributes tobacco products, electronic cigarette products, or nicotine products As defined in Utah Administrative Rule R384-324-2.

**\*RETAIL TOBACCO SPECIALTY BUSINESS:** As defined in UCA 10-8-41.6(1), a tobacco retailer in which:  
-the commercial establishment holds itself out as a retail tobacco specialty business and causes a reasonable person to believe the commercial establishment is a retail tobacco specialty business  
-any flavored electronic cigarette product is sold

**\*TOBACCO RETAILER:** A general tobacco retailer or a retail tobacco specialty business as defined in UCA Section 76-10-101(20).

**\*TOBACCO RETAILER PERMIT:** The permit issued by the local health department to general tobacco retailers and retail tobacco specialty businesses for the sale, marketing or distribution of tobacco products, electronic cigarette products, or nicotine products as defined in Utah Administrative Rule R384-324-2.

Mayor Joy Petro asked about the growing concern of marijuana vaping. Ms. Melton Sales responded that once marijuana is placed into an electronic cigarette it falls under the definition of an electronic cigarette product. Mr. Brian Hatch added unless they have a medical card. Mr. Hatch continued, there is the complexity of

constant change and adjustments. It can be very confusing, the need to clearly define this regulation helps prevent lawsuits from coming forward.

Additional suggested items to be added to the regulation

## **5.2 Permit Violations**

A tobacco retailer is in violation of the permit issued under this regulation if the tobacco retailer violates:

- 5.2.1 any provision of UCA Title 26B, Chapter 7, Part 5;
- 5.2.2 any provision of Utah Administrative Rule R384-324;
- 5.2.3 any provision of Utah Administrative Rule R384-415;
- 5.2.4 a provision of licensing laws under UCA Section 10-8-41.6 or Section 17-50-333;
- 5.2.5 a provision of UCA Title 76, Chapter 10, Part 1;
- 5.2.6 a provision of UCA Part 76, Chapter 10, Part 16; or,
- 5.2.7 any other provision of state law or local ordinance regarding the sale, marketing, or distribution of a tobacco product, an electronic cigarette product, or a nicotine product.

### **5.3.1 Oversight**

The Department may conduct inspections as part of its oversight process to determine if a tobacco retailer is in compliance with tobacco retailer permit requirements.

### **5.3.2 Notice of Violation**

A Notice of Violation may be issued for any violation of this regulation.

Ms. Melton Sales continued, to try and keep the regulation clear and transparent for those applying for a permit, the following is suggested to be added to the regulation to aid in defining what could put these businesses in jeopardy of being penalized or suspended.

A civil penalty pursuant to UCA Section 26B-7-518. The following penalties may be imposed on the tobacco retailer based on the type of tobacco retailer permit violation:

#### **Civil Penalties for Violating the Terms of a Tobacco Retailer Permit**

- 1st Violation - \$1,000 fine
- 2nd Violation (occurs within the first violation) - \$1,500 fine
- 3rd Violation (occurs within two years of second violation) - \$2,000 fine OR suspension of tobacco retailer permit for 30 consecutive business days
- 4th Violation (occurs within two years of three previous violations) - \$2,000 fine AND revoke tobacco retailer permit

#### **Civil Penalties for a General Tobacco Retailer Proprietor in a Sale to an Underage Buyer**

- 1st Violation - Proprietor Sale: \$2,000 fine
- 2nd Violation (occurs within one year of previous violation) - Proprietor Sale: \$5,000 fine AND revoke general tobacco retailer permit

#### **Civil Penalties for a Retail Tobacco Specialty Business in a Sale to an Underage Buyer (Proprietor or Employee)**

- 1st Violation - \$5,000 fine AND suspend the retail tobacco specialty business permit for 30 consecutive days
- 2nd Violation (occurs within two years of first violation) - \$10,000 fine AND revoke the retail tobacco specialty business permit

Mr. Brian Hatch wanted to point out that this is state law, Davis County did not create these fines. Some of them may appear to be pretty severe, but that is the legislative intent especially with underage sales with minors. Permits were created to reinforce these penalties. Commissioner Lorene Kamalu asked what the age was to be able to purchase tobacco. Ms. Kristen O'Flarity answered Commissioner Kamalu with the age 21. Dr. Colleen Taylor asked what the difference was between a specialty store and a general tobacco retailer store? Ms. O'Flarity answered stating a retail tobacco specialty permit allows the store to sell as much tobacco as they'd like there is no limit. An individual has to be at least 21 to enter the store. They can sell all the flavors, but there are proximity restrictions; the store can't be within 1,000 feet of a school, church, or park. There are some locations in Davis County that have been grandfathered in. Another clause is the total amount of display, floor, and shelf space has to be less than 20% for tobacco products and less than 35% of quarterly sales can come from tobacco products.

Mr. Hatch stated these regulations are put into place to keep kids from being exposed to these types of products. These laws and regulations are about protecting youth and keeping products safe on the market. Mr. Brandon Hatch asked how Davis County retailers are doing in compliance to these laws and regulations? Ms. Melton Sales stated they are doing really well. Mr. Troy Wood mentioned where there is state law, is there reason to refer to state law instead of county regulations. Mr. Hatch answered Mr. Wood by stating there are many different places in state law where tobacco is referred to. The county wanted a place to refer to as a business owner where the rules are. The regulation is an easy place to update and keep current laws documented. The county wants to be very transparent. The state law will always supersede county regulation, but the county will quickly follow. Ms. Melton Sales stated that the regulation helps answer the frequently asked questions.

Mr. Melton Sales continued the next step is to recommend the changes be brought for a public hearing.

*Dr. Gary Alexander put forward a motion for a public hearing for the Tobacco Retailer Regulation. Mr. Brandon Hatch was first to approve this motion. Dr. Ryan Stewart was second. All were in favor. The vote was unanimous. Dr. Gary Alexander volunteered to be the hearing officer for this public hearing.*

#### **Davis4Health Community Health Improvement Plan (Information)**

Mr. Brian Hatch stated the Community Health Improvement Plan (CHIP) is a component of accreditation. The Community Health Assessment (CHA) was presented at the last Board of Health meeting. That assessment springboards the creation of the CHIP. Mr. Hatch would like support behind the CHIP and promoting it throughout the community and among colleagues.

Ms. Isa Perry presented the current status of the CHIP. Ms. Perry presented the Take Action Cycle. This cycle is used for strategic prevention framework, community health improvement process, and assessing needs and resources. The next step is focusing on what is important, picking priorities, choosing effective policies and programs that are integrated into the CHA, and then implementing and evaluating.

On May 17th, the steering committee met and the CHA was presented. Many different sources of feedback were collected that day to determine priorities surrounding mental health, suicide, connection, resilience, resource access, and awareness. Health disparities, sleep, and housing were also topics mentioned as urgent needs of the county.

After this meeting, the data was taken and two priorities were created: improving mental, emotional, and social well-being; and improving access to resources and services.

Protective Factors and Prevention Science are used to address root causes.

- As people grow and develop, there are contextual variables/community conditions that promote or hinder the process
- These are frequently referred to as risk and protective factors
- The presence or absence and various combinations of risk and protective factors contribute to a person's health and well-being
- An essential principle of prevention includes efforts to identify and reduce risk factors and enhance protective factors

Protective Factors and Health Outcomes

- Health outcomes are an endpoint; they can be influenced earlier
- Historically, federal funds have been siloed to address each problem/outcome although outcomes are predicted by shared risk and protective factors across systems
- Getting at root causes (risk & protective factors) moves efforts from treatment and reaction to prevention and promotion
- Davis4Health partners are interested in working on shared risk & protective factors together
- Strategies in the CHIP will be related to community risk and protective factors

Risk Factors

- Something that is associated with a higher likelihood of problem outcomes
- Characteristics at the biological, psychological, family, community, or cultural level that are associated with a higher likelihood of problems including negative health and social outcomes
- Predictive in multiple longitudinal studies of multiple problem behaviors
- Present throughout development and across diverse racial groups
- Buffered by protective factors
- Measurable

This reiteration of the CHIP protective factors was taken into consideration when determining priorities.

Protective Factors

- Conditions or attributes in an individual, family, or community that increase health and well-being and help people deal more effectively with stress
- Decrease the likelihood of developing negative health or social outcomes
- Predictive of positive development
- Buffer people's exposure to risk
- Measureable
- The more protective factors someone has in their life, the more likely they are to be able to cope with adverse experiences

Data from the following frameworks were also taken into consideration when determining priorities.

Protective Factor Frameworks

- Student Health & Risk Prevention (SHARP) Survey
- Communities that Care (CTCs)
- Five Protective Factors for Strengthening Families

- Super Factors, Violence & Injury Prevention Program (DHHS)
- Social-Ecological Model
- Social Determinants of Health

Current work is being done with partners to decide if a framework needs to be in the CHIP or if the awareness is enough that each agency is using an evidence-based protective factor framework to guide their work.

Current work is taking place to draft the CHIP using logic models and action plans including:

- Background & approach (protective factor frameworks, trauma informed, equity approach)
- Vision
- Situation (data/community voice)
- Strategies
- Activities/Objectives
- Short/Long-term outcomes
- Agencies with responsibility
- Resources

Save the date items

- Access Priority Work Session, August 24, 2023, Davis County Admin Building, Farmington.
- Davis4Health Steering Committee Meeting, October 17, 2023, Catalyst Center, Kaysville
- Davis County Community Resilience Symposium, February 2, 2024, Davis Tech, Kaysville
- Davis4Health CHIP Celebration, February 23, 2024, Wildlife Education Center, Farmington
- Davis4Health Equity Forum, March 28th, 2024, Davis Tech, Kaysville

Mr. Brian Hatch thanked Ms. Isa Perry for the presentation. A couple key takeaways, general public health has been siloed in how it is funded. Through accreditation it was revealed Davis County needed something bigger. The hope and desire is that the system is focused upstream and protective factors help in aspects of health. A lot of credit goes to Ms. Perry, she has been very instrumental in framing this into a system. CHA informs us, but the CHIP is the system that lays the groundwork. Resources provide the backbone to that system so it can stay in place. A health strategy bureau has been created to do this work, bring the community together, and embrace the upstream philosophy.

### **Budget Report (Information)**

The budget report was handed out to the Board members.

### **UALBOH Report (Information)**

Mr. Brian Hatch commented there are no changes or updates to report. Mr. Scott Zigich was our representative. Mr. Zigich has recently retired and a volunteer is needed to fill his position on the UALBOH Board. Commitment is minimal, quarterly meetings. It is important that our Board is represented. Mr. Hatch stated that if anyone is interested to please let him know.

### **Director's Report (Information)**

Mr. Brian Hatch gave a brief report of the NALBOH conference. Mr. Hatch attended sessions that were focused on workforce. The public health workforce is a big concern across the nation, Utah not as much. Many issues involve retention, burnout, and stress. The health department has received an infrastructure grant from the

CDC that is focused on workforce. Full time efforts have been shifted to workforce development and wellness. A performance management individual was also hired with these funds to carry out these goals and rebuild our workforce.

Dr. Gary Alexander added it was a great conference. One of the sessions Dr. Alexander attended was focused on tobacco management. Tobacco is a moving target. Tobacco companies are innovative in the ways they push their product and agenda. The conference reminded Dr. Alexander how important and ubiquitous public health is. Many comments were made about some angst among Board of Health members and local health departments. Dr. Alexander expressed his thanks and gratitude that everyone is able to work together like they do.

Mr. Brian Hatch finished his report by stating the health department is in the middle of budget. Next year is the final year of funding from many federal COVID contracts. The question is asked on how to maintain the capacity that has been built. Strategic measures are taking place on where to put resources.

Mr. Brian Hatch invited the Board members to a staff appreciation event, August 23rd at 12:30. Lunch will be provided. Board members are welcome to attend if they would like.

### **Commission Report (Information)**

Commissioner Lorene Kamalu reported that she was able to NALBOH for the first time this year. Commissioner Kamalu expressed a hugely important thing for all registered voters to do is to vote. A county in Michigan had a small group take over and make giant changes. Commissioner Kamalu felt it was very sobering that something like this could happen. Dr. Ryan Stewart asked if that was in response to the pandemic and the role that public health played. Commissioner Kamalu confirmed Dr. Stewart's comment. Mr. Troy Wood asked if the group wanted more conservative or less conservative. Commissioner Kamalu stated they were very far right. Mr. Brian Hatch commented it's about bringing the parties together and keeping a balanced response. Mayor Joy Petro commented that Mr. Hatch did an excellent job in bringing everyone together in the county, took the leadership and kept everyone together. Commissioner Kamalu stated that Mr. Hatch brought education so it didn't become a political fight. Commissioner Kamalu then said it never should have been a partisan issue. Mr. Hatch said that the Board of Health isn't a political body. It has legislative authority for public health in the community. The Board of Health is appointed by the county commission. Mr. Hatch continued that Utah stood out, you don't quite understand how well you did until you compare to other areas. Commissioner Kamalu stated law in Utah requires various disciplines to be represented on this Board. That is not the same across the nation.

*Dr. Gary Alexander entered a motion to adjourn the meeting. Mayor Joy Petro was first to approve the motion. Dr. Ryan Stewart was second. All were in favor. The vote was unanimous. The Board of Health meeting was adjourned at 9:00 a.m.*