



MINUTES
July 18, 2022

Members Present:			
Jordan Singleton, Chair	excused	Ryan Schooley	X
Carl Hanson, Vice-chair	Phone	Shane Farnsworth	excused
Gaye Ray	excused	Ann Anderson	excused
Mark Donaldson	X	Michael Kennedy	X
Amelia Powers Gardner	X	Julie Fullmer	excused
Jeffrey Ogden	excused	NOTE: We did not have a quorum at this meeting	

Others present:

Eric Edwards, MPA, MCHES	UCHD Executive Director
Julie Dey	UCHD Secretary
Dr. David Flinders	UCHD Medical Director
Number of people in attendance 19	

1. Welcome by Ryan Schooley, Board of Health Member in place of Dr. Jordan Singleton
2. Approval of the minutes from May 23, 2022

Tabled until September 26, 2022. We did not have a quorum at this meeting.

3. WIC – Service Needs: Eagle Mountain, Saratoga Springs, and North Lehi

Jillian Porto, WIC Division Director at UCHD, shared the mission statement of the Utah WIC Program. “The Women, Infants, and Children (WIC) program is a nutrition program that helps families with healthy eating through nutrition education, providing nutritious foods, breastfeeding support and provides help accessing health care. These services are provided to low and moderate income women, infants, and children through the Special Supplemental Nutrition Program, popularly known as WIC.”

Jillian explained recent accomplishments in the WIC program over the last two years. This includes a new mobile WIC clinic van that is used consistently on a monthly basis in Eagle

Mountain, UT. The mobile WIC clinic is also used to host a 'baby rest stop' at the Utah County fair so that moms have a clean and private place to feed and clean their babies. The van is also used at South Franklin community events and at Kid's on the Move events.

Jillian reviewed WIC client data, including total caseloads at clinics located in Provo, Payson, Orem, and American Fork. She pointed out that the WIC clinic in American Fork is steadily increasing the number of clients each month from the northwest part of the county (Lehi, Eagle Mountain, Saratoga Springs). Clients from all over the northwest struggle to travel all the way to the American Fork location. In fact, 681 families (clients) living west of Interstate 15 are known to travel to the American Fork office. This area of Utah County is exploding with growth and is where so much of Utah County's maternal child health and infant needs are located. It is anticipated that service needs for young and large families will continue to grow for the next 20 plus years.

Jillian explained UCHD WIC is currently looking for options to establish a WIC clinic in northwest Utah County. Currently the lease at the Orem WIC clinic is expiring in November 2022 making it the optimal time and opportunity to relocate a WIC office in this part of the valley. Requirements for retail office space for a WIC Clinic would be approximately 2,600 – 2,800 square feet. Jillian and Tyler Plewe, Deputy Director UCHD, are exploring buildings that would suit the needs for WIC. The Orem WIC staff may move to the American Fork WIC clinic. Staff working in American Fork would shift to Saratoga Springs. All furniture, fixtures and scales will be reused and moved to the new location, eliminating the need to purchase new equipment (eliminating unnecessary costs associated with this change).

WIC is 100% federally funded. It is anticipated that there will be no fiscal impact on our budget for this proposed relocation.

Amelia Powers Gardner reviewed the Utah County job listing of a WIC Certified Lactation Consultant and the pay rate for this position currently starts at \$13 per hour. She asked, "Is the hourly wage set by Utah County Government or by the Federal Government?" Amelia pointed out that people can be hired at a fast-food restaurant for \$14 per hour. Jillian concurred that the pay is very low at UCHD for Lactation Consultants and all WIC staff; even WIC Medical Assistant position's starting pay is \$14 per hour. Jillian answered Amelia's question by saying that, Utah County WIC's salaries are set by Utah County Government. Amelia then asked, "Would federal monies pay for salary increases or would Utah County Government need to fill a gap for the increased salaries?" Jillian explained that the WIC program will 'fill the gap.'

August is 'World Breast Feeding Month,' and Amelia will be sponsoring a resolution for the Utah County Commission to recognize that. Amelia asked if the Utah County WIC Lactation program is currently doing any outreach to other organizations to promote breast feeding in areas such as universities, churches, malls, etc. Jillian answered that the WIC Breast Feeding Coordinator does go to UVU and BYU and presents to the nursing programs each semester. There are WIC staff that go and present at dietetic classes too. When WIC attends

community events, they pass out information about breast feeding and the WIC program. Amelia suggested educating BYU on providing improved areas for breast feeding such as at the BYU Football Stadium as well as providing facilities to pump or nurse. Amelia offered to help with outreach if needed.

4. Monkeypox Update

Eric Edwards reported that the Monkeypox outbreak is a good example of seeing public health in action. We are doing all we can to prevent the spread. As of July 15th, there were 13 cases in the state of Utah. Large U.S. cities have higher rates. Infections have been detected in 58 countries. On UCHD's website www.health.utahcounty.gov the recommendations change each week to match updated disease prevention protocols. The sources of our Monkeypox information comes from Utah Department of Health and the CDC. We are following the protocol as set by the state of Utah as well as under the expertise of our medical director, Dr. David Flinders. To date, the state of Utah received a scarce supply of Monkeypox vaccine (approx. 200 doses). The vaccine has been found to prevent up to 85% of Monkeypox cases if it is administered with four days of exposure.

Curtis Jones, Bureau Director, Epidemiology UCHD, reported that currently there has been one case of Monkeypox in Utah County. The Epidemiology division conducts investigations with all close contacts of the infected person. Close contacts are considered: as individuals sharing bedding, towels, sexual relationships, and other close skin to skin contact. An exposed person then comes to the health department to get vaccinated. For confirmed cases of Monkeypox, the Epi staff will ask them to isolate and stay home until all lesions have crusted over and fallen off to the point there is new skin underneath the lesions. The vaccine is administered on a case-by-case basis. If an individual wants to be vaccinated, they first call us, we screen them and see if they meet the qualifying guidelines. We also determine if they are compromised with HIV infection.

Dr. Michael Kennedy asked, "Is there collaboration between the county and local health providers to say, 'If you think someone may be at risk for monkeypox', let's get them the vaccine rather than waiting until they are exposed." He also asked and requested that the Health Department send messages to local physicians regarding the high-risk determinants, and that there is vaccine available at the health department.

5. Body Art Regulation Update

Eric Edwards explained that UCHD has a Body Art Regulation that was passed in 1999; and it hasn't been updated in the past 23 years. Many things in the Body Art industry have changed over the years. All local health departments across the state have their own version, and all regulations differ between counties. We have been hopeful for a uniform state rule for the Body Art industry; and one has been drafted, however, the draft is less effective in our opinion than UCHD's 23-year-old regulation. At May's Board of Health meeting, we asked board members to participate in a sub-committee meeting. The meeting

will be held in between board of health meetings to provide input on updating the regulation. After the subcommittee meets, the recommendations will then be presented to the rest of the board at July's meeting.

Dr. Carl Hanson and Ryan Schooley were able to join our county's legal team and our experts in Environmental Health to discuss recommendations for updating the Body Art Regulation.

Ryan Schooley explained that it is a much more complicated issue than anticipated. The current regulation hasn't been updated. There are several parts that are not even applicable. The subcommittee collectively agreed that at the very minimum, it should be changed with the outdated portions removed. There was discussion about the financial impacts. For example, if we draft an amazing regulation without the financial backing, we will not have the resources to enforce it. We also spoke about health-related issues, for example, a tattoo establishment being a certain distance away from a school. Is there a real health related question there or is it a policy related issue that may be regulated by the individual cities? There are a lot of moving parts in body art and body piercing. The point was made, the higher the regulatory burden, it might motivate people to go to underground establishments for tattoos or piercings. This will happen if we make the burden too difficult or burdensome. Because there is no funding to track or enforce the current regulation, there is no real data on a lot of this stuff.

Carl Hanson asked about minors and parental permission. Where does the board sit regarding their attitude towards this type of thing? Even with temporary events, they have run into issues with the Stadium of Fire at BYU. They had to turn down body art businesses for events like this, which created a lot of turmoil over it. What is the board's attitude regarding some of these issues?

Carl mentioned another issue. With Environmental Health staff trying to monitor over 100 tattoo establishments, body piercing places, and microblading places with each establishment having several technicians working at their place of business, that could potentially take up a lot of Environmental Health staff time. The amount of resources the health department must dedicate to that sort of objective is very limited and there are not a lot of funds coming through permit fees to cover the costs. The fees won't cover the actual costs of monitoring and enforcing some of these policies. This is the pinch point that Ryan has referred to in the complexity of the situation. There is not strong support from the industry themselves to uphold better practices, but now, there is a lot going on (underground) and there is less support to monitor themselves. This makes it difficult for the Environmental Health staff to deal with as they have so many other programs to monitor. The potential for a public health issue is large and then you have all these policy questions that are floating around out there; and so how do we balance the demand and the need with the potential public health threat?

Ryan said one of the options in the discussion was 'Do we even need a regulation?' 'Can it be a complaint-based regulation?'

Where is the line between medical procedures and body art? Does it matter how far away the business is from a school? Could it be approached like the cosmetology regulation which is done on a complaint basis where we then provide education and determine if there is a need for more regulatory action?

Dr. Mark Donaldson reported there have been allergic reactions and photo allergic reactions to the different tattoo inks. The European Union in January passed a law that prohibited 4,000 different chemicals from being in tattoo inks. There is no regulation in Canada or the United States. One option may be: If the tattoo parlor is liable for what they are doing or injecting into people, then perhaps that is the best we can do. Maybe we need to do a bit of education in letting the public know that inks are not regulated, and you don't know what is being put in your body. If we found a way to make the public aware, it might help them understand that this might not be a safe thing to be doing.

Amelia Powers Gardner commented that we do not have the right to ban tattooing or body piercing if that is part of their religious or cultural ceremony. Amelia also went on to say, that it is not necessarily the job of the board of health to regulate the moral standpoint. I would have a hard time with someone who doesn't work in the body art industry making rules for someone that does.

Jason Garrett, Division Director, Environmental Health UCHD, said, we don't want to approach this naively because there is a significant health risk. The body art industry is the hardest to regulate out of all our programs. Because of the nature of this industry, it has a high risk to its clientele. Jason mentioned one more thing for the board to consider. He clarified that the local health department is the sole entity that regulates body art in Utah County. They aren't regulated by DOPL (Utah Division of Occupational and Professional Licensing). If we sunset updating the regulation, UCHD could potentially have the body art industry come knocking on our door because there is a certain element of body art parlors who want legitimacy with a permit issued by the health department.

Eric Edwards said, "We do have some pending homebased tattoo shops that are waiting for a decision. Additionally, a local charter school board said they were ok with the location of it next to their school. However, the city has still not decided what they will do." This requires the UCHD to use the current outdated policy from 1999 which contains a clause that is not very related to public health safety. We are currently examining the old body art regulation, trying to determine if we should remove all of the portions that aren't public health oriented but are morality based. Should the health department be telling parents what they can and can't do with their kids? If at least for that reason, we should update the regulation to where it makes sense.

Jason recommended providing the board of health with a proposed draft (red lined version of the 1999 body art regulation) removing the irrelevant moral issues and simplifying it to contain only the public health and safety issues for the next board of health meeting.

Dr. Kennedy recommended resolving the body art issue with the charter school and local tattoo parlor and then refine a few other components in the 1999 body art regulation components.

6. Employee Changes

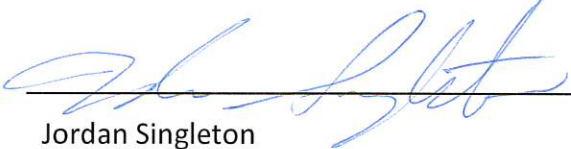
Eric Edwards reviewed the employee changes which are routine.

7. Other Items

There were no additional items at this meeting.

MOTION: Mark Donaldson made the motion to adjourn the meeting which was seconded by Amelia Powers Gardner and passed unanimously.


Eric Edwards, MPA, MCHES
Executive Director / Local Health Officer
Utah County Health Department


Jordan Singleton
Chair
Utah County Board of Health