COMMUNITY HEALTH AND EQUITY COUNCIL COMMITTEE MEETING OCTOBER 26, 2017 2:00 P.M. MUNICIPAL PLAZA BUILDING

Members Present:	Councilmember Ana Sandoval, Chair, <i>District 7</i> Councilmember William Cruz Shaw, <i>District 2</i> Councilmember Rey Saldaña, <i>District 4</i> Councilmember Greg Brockhouse, <i>District 6</i>		
Members Absent:	Councilmember Manny Pelaez, District 8		
Staff Present:	Rod Sanchez, Assistant City Manager; Maria Villagómez, Assistant City Manager; Ed Guzman, Assistant City Attorney; Douglas Melnick, Chief Sustainability Officer; Melody Woosley, Director, Department of Human Services; Mike Shannon, Director, Development Services Department; Colleen Bridger,		
	Director, Metro Health; Anita Kurian, Assistant Director, Metro Health; Jennifer Herriott, Assistant Director, Metro Health;		
	Rebecca Flores, Education Policy and Services Administrator;		
	Denice F. Treviño, Office of the City Clerk		
Others Present:	Dan Deane, M.D., Pediatric Pulmonologist; Terry Burns, Chair,		
	Alamo Sierra Club; Kaitlyn Murphy, American Heart		
	Association; Greg Harman, Alamo Sierra Club		

Call to order

Chairperson Sandoval called the meeting to order.

1. Approval of the Minutes for the September 28, 2017 Community Health and Equity Committee Meeting.

Councilmember Saldaña moved to approve the minutes of the September 28, 2017 Community Health and Equity Council Committee Meeting. Councilmember Shaw seconded the motion. Motion carried unanimously by those present.

Citizens to be Heard

Chairperson Sandoval called upon the citizens registered to speak.

Daniel Deane spoke in support of the Tobacco 21 Initiative.

Jennifer Cofer spoke in support of the Tobacco 21 Initiative.

Claudia Rodas spoke in support of the Tobacco 21 Initiative.

Jerry Seevedra spoke in support of the Tobacco 21 Initiative.

Comarissa Keely Petty spoke in support of the Tobacco 21 Initiative.

Briefing and Possible Action on:

2. A Briefing by the San Antonio Metropolitan Health District on Tobacco 21. [Erik Walsh, Deputy City Manager; Colleen M. Bridger, MPH, PhD, Director, Health]

Dr. Colleen Bridger stated that tobacco was the leading cause of preventable disease, disability, and death in the United States. She noted that each year, nearly half a million Americans die prematurely of smoking or exposure to secondhand smoke. She stated that the United States spends \$170 billion a year in medical costs associated with smoking. She noted that in Texas, 28,000 adults per year die as the result of smoking. She stated that every day, 2,100 youth and young adults which were occasional smokers become daily cigarette smokers and more than 3,800 youth younger than 18 years will smoke their first cigarette. She described the prevalence of tobacco use and its effect on economics and health. She noted that for the first time in decades, overall tobacco use increased among High School Students. She stated that individuals who had not used tobacco by age 21 were unlikely to ever start. She cited the following reasons for raising the age for the purchase of tobacco:

- 95% of adult smokers began smoking before turning 21
- Many smokers transition to regular use during the ages of 18-21
- Approximately 3 out of 4 teen smokers continue smoking into adulthood
- The adolescent brain is more susceptible to nicotine
- Using nicotine can rewire the teenage brain to become more easily addicted to other drugs
- Older youth smokers (18-19 years) were a major supplier of cigarettes for younger teens
- More 18-19 year olds in High School meant that younger teens have daily contact with students which could legally purchase tobacco

She noted the following benefits of raising the age for the purchase of tobacco:

- Delay the age when individuals first use tobacco and reduce the risk of becoming a regular smoker
- Help keep tobacco out of schools
- Younger adolescents would have a harder time passing themselves off as 21 year-olds
- Would simplify ID checks for retailers

Dr. Colleen Bridger stated that electronic or e-cigarettes were the most popular tobacco product utilized by youth. She noted that Tobacco Companies market smokeless tobacco, little cigars, and e-cigarettes in youth-friendly flavors such as cotton candy, gummy bear, cherry, and watermelon. She noted that 18-20 year-olds purchase only 2% of cigarettes sold but are 90% of the supply of addictive tobacco to younger youth. She noted that in the Military, smoking was not allowed during basic training. She stated that tobacco takes a toll on troop readiness and places a financial burden on the Military Health Care System. She added that Military leaders were actively taking steps to reduce tobacco use. She pointed out that the following were not legal at age 18:

- Drink or purchase alcohol
- Gamble in casinos
- Obtain Concealed Weapon Permit
- Rent a car
- Check into a hotel
- Foster/adopt a child

Dr. Bridger reviewed statistics from the Institute of Medicine and noted that the Tobacco 21 Initiative was in place in five states and over 260 communities. She stated that in a survey, 5,447 individuals responded to the question of: "Do you believe that the minimum tobacco sales age should be raised from 18 to 21?" She reported that 77.5% responded "yes" and 22.3% responded "no" to the question. She noted that the current Texas Health and Safety Code addressed the sale, purchase, and possession of tobacco products to persons under 18 years of age. She stated that State Law included e-cigarettes and electronic smoking devices within the provisions and permits a political subdivision to create stricter standards regarding these provisions. She reviewed the draft ordinance and the penalties for violation of same. She stated that Metro Health and any other authority having jurisdiction to enforce city ordinances shall have the authority to enforce and unannounced compliance checks would be conducted annually. She reviewed the timeline and stated that this would be brought before the full City Council for consideration in December 2017.

Chairwoman Sandoval asked if there were any other cities in Texas with a similar initiative. Dr. Bridger replied that there were not.

Councilmember Saldaña spoke in support of the Tobacco 21 Initiative. He stated that unintended consequences related to prosecution should be avoided. Ed Guzman said that prosecution would equal the level of the violation.

Councilmember Brockhouse spoke of the effects on 18-21 year-olds who currently smoke. He requested more information from cities which have passed an ordinance regarding Tobacco 21.

Councilmember Shaw asked of negative effects of the Tobacco 21 Initiative. Dr. Bridger stated that there were none with regard to the science data. Councilmember Shaw noted that he would prefer the dissemination of education versus penalties for violators.

Councilmember Saldaña moved to forward the Tobacco 21 Initiative to the full City Council at B and A Sessions. Councilmember Shaw seconded the motion. The motion carried unanimously by those present.

3. A Briefing by the San Antonio Metropolitan Health District on the Status of the Affordable Care Act. [Erik Walsh, Deputy City Manager; Colleen M. Bridger, MPH, PhD, Director, Health]

Dr. Colleen Bridger stated that the Affordable Care Act (ACA) was created in 2010 and was intended to make healthcare more affordable and accessible. She noted that insurance companies

no longer could deny coverage due to preexisting conditions. She stated that currently, Americans were confused due to many attempts to repeal and replace the ACA. She noted that a Presidential Executive Order was issued on October 12, 2017 which would eliminate cost-sharing reduction payments for insurance companies and would create lower cost insurance options with less coverage. She stated that on October 17, 2017, a bipartisan group of U. S. Senators agreed to a two-year solution to preserve cost-sharing reduction payments. She noted that the U.S. House of Representatives want to repeal and replace the ACA. She stated that the EnrollSA Coalition was a major force in ACA enrollment. She outlined the following challenges to the ACA:

- Shorter enrollment period
- Six weeks to enroll instead of three months
- Less Federal support for marketing and resources
- Confusion among the public regarding the status of the ACA

Dr. Bridger reviewed the local ACA Stakeholders and stated that the following were the Coalition's key messages:

- 1. ACA was still the law of the land and open to enrollment
- 2. Open enrollment would be held from November 1, 2017 through December 15, 2017
- 3. Financial assistance available to those who qualify
- 4. Free in-person application assistance available
- 5. Schedule an appointment by calling 211, 311, or by visiting www.enrollsa.com

She reviewed the outreach and promotion for EnrollSA. She stated that staff would be cross trained for enrollment in the ACA and noted that a kick-off press conference would be held on October 30, 2017 at the Central Library.

No action was required for Item 3.

4. Briefing and Possible Action on a Council Consideration Request by Councilmember Clayton Perry, District 10, Regarding Commercial Corridor Code Enforcement Sweeps. [Roderick J. Sanchez, Assistant City Manager; Michael Shannon, Director, Development Services]

Mike Shannon stated that in June, Councilmember Perry submitted a Council Consideration Request (CCR) to establish annual code enforcement sweeps on commercial corridors including for those:

- In Tax Increment Reinvestment Zones (TIRZ)
- Targeted for revitalization
- With high rate of code violations

He stated that code enforcement conducted sweeps in the Perrin Beitel and Nacogdoches commercial corridor in Spring 2017. He noted that there were 422 violations noted; of which

92% were corrected in 45 days. He stated that the Neighborhood Enhancement Team (NET) had 10 Code Enforcement Officers which were currently conducting sweeps identified by:

- Neighborhood Associations
- City Council
- City prioritized areas
- Areas of high profile events

He reviewed the process for conducting the sweeps and noted that the sweeps would focus on: 1) Zoning; 2) Illegal signs; and 3) Overgrown weeds/trash. He presented information on the Fiscal Year (FY) 2018 proposed corridors for sweeps. He distributed a handout with the corridors for the sweeps.

Chairwoman Sandoval asked of fiscal resources required to conduct the sweeps. Mr. Shannon replied that existing resources would be utilized.

Councilmember Brockhouse expressed support for the sweeps.

No action was required for Item 4. However, the Committee approved the proposed Code Enforcement Sweeps noted in the handout.

5. Briefing on Head Start Program Items and Fiscal Activities for August 2017. [Maria Villagómez, Assistant City Manager; Melody Woosley, Director, Department of Human Services]

Rebecca Flores reviewed the following 2017-2018 enrollment plans:

District/Program	Funded	# sites
	Enrollment	
Head Start (HS)/Edgewood ISD	777	2
HS/San Antonio ISD	2,243	19
Early Head Start (EHS)-Child Care	216	6
Partnership		
TOTAL	3,236	27

Ms. Flores provided the following 2017 community assessment update:

Estimates within	2016	2017	+/-
HS/EHS service area			
Children served by HS/EHS	3,265	3,532	+
Eligible children not served by HS/EHS programs	4,852	7,037	+
Pre-school programs (0-2 yrs)	103	97	-
Pre-school programs (3-4 yrs)	112	106	-
Children with disabilities (0-2 yrs)	1,585	1,596	+
Children with disabilities (3-4 yrs)	1,091	1,153	+

Ms. Flores provided the following school readiness goals:

- Approaches to learning
- Social and emotional development
- Language and literacy
- Cognition
- Perceptual, motor, and physical development

Ms. Flores presented the 2016-2017 program information report. She reviewed the Pre-K 4 SA and HS professional development plan and the program and fiscal report for EHS and HS.

Councilmember Shaw moved to approve the HS and EHS enrollment plan, the HS and ES community assessment update, the 2017-2018 HS and EHS school readiness goals, the HS and EHS program information report, and the fiscal monthly activity report for August 2017.. Councilmember Brockhouse seconded the motion. The motion carried unanimously by those present.

Adjourn

There being no further discussion, the meeting was adjourned at 3:42 p.i	There	being no	further	discussion.	the meeting	was adjourned	d at 3:42 p.
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Ana Sandoval, Chair	
Respectfully Submitted	
Denice F. Trevino, Office of the City Clerk	