

CITY OF PHILADELPHIA
DEPARTMENT OF PUBLIC HEALTH
MEETING OF THE BOARD OF HEALTH

Thursday, December 8, 2016

A meeting of the Philadelphia Board of Health was held on Thursday, December 8, in the Municipal Services Building, 1401 J.F.K. Boulevard, 14th Floor, Room 1450.

Board Members Present: Tyra Bryant-Stephens, MD; Ana Diez-Roux, MD, PhD, MPH; Thomas Farley, MD, MPH; Marla J. Gold, MD; Jennifer Ibrahim, Ph.D., MPH; Amid I. Ismail, BDS, MPH, DrPH, MBA; John Rich, MD, MPH

Attendees: Jane Baker; Nina Baltierra; Cheryl Bettigole, MD; Thomas Chapman; Ryan Coffman; Daniel Chung; Melissa Damast; Amory Hillengas; Charles Hodges; Jeffrey Hom, MD; Kristen Kelly; Jon Kirch; Natalie Kotkin; Michael Luna; Shannon Manette; Nellie McEntier; Jeff Moran; Robert Moran; Pilar Ocampo; Jean A. Ottis; Josh Roper; Pramiti Singh; John Stoeckus

WELCOME AND INTRODUCTIONS:

Health Commissioner and Board President Thomas A. Farley, MD, MPH, called the meeting to order at 5:40 PM, welcoming the Board and guests. Dr. Farley asked for comments or question about the minutes of the meeting of the Board of Health held on November 10, 2016. Hearing none, he entertained a motion to approve the minutes as submitted. It was moved and seconded. **Motion passed.**

MODIFICATIONS TO TOBACCO RETAIL PERMIT REGULATIONS

At the meeting of September 8, 2016, the Board considered and approved a *Regulation Relating to Tobacco Retailing*. Following submission of the regulation by the Law Department to the Department of Records, a thirty-day public comment period commenced during which time a public hearing on the regulatory changes was requested. A hearing took place on October 17, 2016 at 5:30 PM in the Municipal Services Building, 1401 John F. Kennedy Boulevard.

Dr. Farley introduced Cheryl Bettigole, MD, director of the Department of Public Health's Chronic Disease Division, to present the Board with a summary report of comments offered to the Board during the hearing as well as written statements submitted to the Board during the public comment period. The Board was also provided with a Report Concerning Public Comments on Regulation Relating to Tobacco Retailing.

Dr. Bettigole answered questions from the Board about the report. She outlined changes to the regulations proposed by the department to address issues raised by the public and businesses during the comment period:

- A business for which >75% of revenue comes from tobacco sales for past 3 years may apply for special designation within 180 days of regulation implementation allowing the next applicant at that location to qualify for a tobacco permit

- Pre-operational permits may be issued up to 24 months before business opens with properly executed sale or lease contract
- Grandfathering of permits for density cap and tobacco free school zone applies to any properly issued tobacco permit as long as the owner follows the law
- Creation of first-come, first-serve waiting list for permits
- Delay of tobacco permit density cap to Feb. 15, 2017
- Use commuter-adjusted daytime population as calculated by the US Census rather than residential population for retailer density cap calculations

Dr. Farley asked the Board to reconsider the *Regulation Relating to Tobacco Retailing* and deliberate upon the changes to the regulation proposed by the department.

Dr. Bettigole responded to questions from the Board during the discussion of the proposed changes.

The Board examined the specific proposed changes and made modifications. Dr. Farley reviewed aloud the final language of the regulation. It was moved that the modifications to the *Regulation Relating to Tobacco Retailing* be approved. Motion seconded. **Motion passed.** Final regulation attached.

It was moved that the Board formally accept the report to the Board. Motion seconded. **Motion passed.**

UPDATE ON LEAD POISONING PREVENTION

Following a recent Philadelphia Inquirer article on lead poisoning hazards and prevention efforts in Philadelphia in Philadelphia, Dr. Farley provided the Board with an overview of the problem locally.

Dr. Farley reported:

Trends in elevated blood lead levels in children in Philadelphia over the past 10 years show an approximately 80 percent decline. Lead poisoning levels are lower than they have ever been in Philadelphia.

500 children a year test with a blood lead level above 10 micrograms per deciliter.

Another 1,900 children per year have blood lead levels between 5 and 9.

When the numbers are confirmed through venous sampling, they drop to approximately 350 children with levels above 10 micrograms per deciliter, and 1500 between 5 and 9.

Over 80 percent of Philadelphia children are screened at some point in time.

The major source of lead poisoning in the city is peeling or chipping lead paint found in housing throughout the city. Because the majority of our homes were constructed before 1978 when lead was routinely used in paint, it can be assumed that lead can be found in 88% of

Philadelphia housing, an estimated 500,000 housing units.

An estimated 56,000 units citywide are home to a child under the age of six. Roughly one half of these families live in owner occupied dwellings and the other half live in rental units.

Lead in the vast majority of these housing units is not causing a problem for children. The number of children testing with high blood lead levels is comparatively low. It is when properties are not well maintained and there is wear and chipping and peeling of paint that the lead becomes a hazard.

While lead in housing is widespread, the problem is more seen in poorer neighborhoods where properties are not well maintained. Older neighborhoods also evidence somewhat greater prevalence.

Science over the years has advanced our understanding of the threat posed by lead. In the 1960's, lead poisoning was defined as blood lead levels above 70. In the 1980's, children were hospitalized with levels above 40. Later, blood lead levels above 10 were termed a "level of concern" by the CDC.

More recently, an advisory committee determined that there may be some level of risk at levels below 10, and determined that these cases should be referred to as "above reference" - meaning that they are above the median level for the nation. The term lead poisoning is not used at these levels because no acute symptoms are in evidence. Nonetheless some attention should be paid to children at these lower levels.

Since 2007, the City has seen substantial reduction in federal funding for lead programs while City funding has remained unchanged. As the number of children with high blood lead levels has declined, funding levels have been cut back severely.

Today, upwards of 80% of Philadelphia children continue to be screened for lead either at age one or two. The homes of children with blood lead levels above 10 are remediated either by homeowners or landlords, or by the City where necessary. Remediation is a secondary prevention effort that protects against a child's continued exposure to a lead hazard. In the future, the City aims to increase the number of landlords and homeowners who undertake remediation themselves. Direct mail and home visits are a part of this strengthened enforcement.

Over the past few months, the City has been working to strengthen and expand primary prevention efforts that will reduce the likelihood of a childhood exposure to lead. This will require greater interagency information sharing and coordination to identify properties and ticket landlords to promote compliance with existing laws that require certification of properties in which children reside.

Dr. Farley responded to questions from the Board. He briefly reviewed the School District of Philadelphia's system for continuing monitoring for lead hazards in schools plumbing. He said that the health department is still looking for ways to verify landlord information about occupancy and that spot checks may be utilized in the future, and that existing law allows for fines of \$75 to \$2,000, and these fines can be issued on an ongoing basis should violations persist. Hearing no further questions or comments, he adjourned the meeting at 7 PM.