Attendance: Meghan Carter, Ryan Coffman, Dr. Jeff Hom, Dr. Caroline Johnson, Isaac Lief, Jean Ottis, Josh Roper, Esq., Lauren Ryder, Raynard Washington

Board Members: Dr. Ana Diez-Roux, Dr. Thomas Farley, Dr. Marla Gold, Dr. Jennifer Ibrahim, Dr. Scott McNeal, Dr. John Rich

WELCOME AND INTRODUCTIONS:

Health Commissioner and Board President Thomas A. Farley, MD, MPH called the meeting to order at 5:35 pm, welcoming the Board and guests. Dr. Farley asked for comments and questions on the minutes from the January 11, 2018 Board meeting. Hearing none, he entertained a motion to approve the minutes as submitted. It was moved and seconded. Motion passed.

MANDATORY REPORTING OF NEONATAL ABSTINENCE SYNDROME

Dr. Caroline Johnson presented on Neonatal Abstinence Syndrome (NAS); proposing mandatory reporting identified information on NAS directly to the Philadelphia Department of Public Health (PDPH).

Note: NAS is a withdrawal syndrome in infants after birth that is caused by in utero exposure to drugs of dependence. It is not specific to a particular substance, but the regulatory proposal is in relation to opioids only. (Draft regulation attached.)

Highlights:

- Rate of NAS is rapidly climbing due to opioid epidemic
- Current laws are for surveillance purposes only
- Reporting will not duplicate what is required for DHS

NAS Background

- Occurs in 55 - 94% of exposed newborns
- Signs include (but not limited to) hyperirritability, restlessness, seizures, poor feeding and fever
- Occurs 1-3 days and up to 7 days after birth
- Two management methods:
  o Non-pharmacological - swaddling, cuddling, pacifying etc.
  o Pharmacological - medication-assisted treatment

**How mandatory reporting will help:**

- Better understand the impact of the opioid epidemic on families
- Opportunity to link infants to home visiting programs and early intervention services if the mother agrees
- Offering harm reduction services, naloxone and training and link to treatment to mothers

**Board Discussion Points:**

- **How would reporting logistics be handled?**
  Proposal is that PDPH requests the list of cases from clinicians and PDPH will review records for consistency.

- **Would the proposed changes present a duplication of services with DHS, which receives reports of prenatal exposure to illicit drugs?**
  Lists will not be shared because of privacy restrictions with each entity to avoid duplication of services.

- **Should “NAS” be renamed as “Opioid-Related NAS reporting”**
  Proposal to clarify that the NAS in question is limited to opioid reporting, not all drugs, by adding “opioid-related” to the defined term.

- **Should the case definition be broadened to include: 1) prenatal opioid exposure in asymptomatic infants and 2) prenatal exposure to other drugs?**
  Reporting asymptomatic cases would need additional legal review because it may conflict with substance use treatment confidentiality laws. If better reporting that is sensitive to the bigger picture of harmful substances is the goal, PDPH could consider broadening the case definition to include non-opioid substances.

Dr. Farley noted that sensitivity in managing this issue is crucial and suggested that the case definition should be reviewed further before the regulation was put to a vote. The Board agreed to review an amendment of the original proposal in the future that will address questions raised during the meeting.

**TOBACCO CONTROL POLICY UPDATE**

Ryan Coffman and Joshua Roper Esq. co-presented on PDPH’s chronic disease prevention division’s policy updates on tobacco control.

**Smoke Free Bus Shelters**
In May 2018, City Council updated Philadelphia Code Sec. 10-602 governing smoke-free spaces to include bus shelters with a roof and at least one enclosed side.

- Request to amend the code was introduced by a Masterman High school student
- PDPH’s role is to assist with the implementation of the law and distribution of “No Smoking” signage placed in applicable locations
- Legislation covers 550 bus shelters from both the Office of Transportation and Infrastructure Systems and SEPTA

**Flavored Tobacco**

PDPH proposed legislation to City Council to prohibit the sale of candy and fruit flavored tobacco (Spring 2018). Proposal was voted favorably out of committee.

- Support was diverse and intended to protect youth in low-income communities and communities of color

**State Preemption Bill**

As part of the State budget process, language was added to the Pennsylvania Fiscal Code that preempts the City’s authority to pass certain tobacco-related policies

- Full implications of the language are unknown
- Legislation before June 1, 2018, including the City’s tobacco retailer regulations that restrict the number of retailers in low-income communities, schools and communities of color, has a grandfathering provision

There may be an effort in the Fall by the City Council to reintroduce legislation that would allow retail stores that close to transfer their tobacco sales permits, which would interfere with the key benefits of the Board of Health’s regulations on tobacco retail sales density.

**ANNOUNCEMENTS**

None

Dr. Farley adjourned the meeting at 7:07 pm.