

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

Thursday, July 15, 2021

The Philadelphia Board of Health held a special public meeting on Thursday July 15, 2021. The meeting was held virtually using the GoToWebinar platform in light of restrictions related to the ongoing COVID-19 pandemic, allowing access to the public via computer or other device and via a toll-free phone number.

Board Members Present

Dr. Ismail Amid, Dr. Cheryl Bettigole, Dr. Tyra Bryant-Stephens, Dr. Ana Diez-Roux, Dr. Marla Gold, Dr. Jennifer Ibrahim, Dr. Scott McNeal, Dr. John Rich

WELCOME AND INTRODUCTIONS

Acting Health Commissioner and Acting Board President Cheryl Bettigole, MD, MPH called the meeting to order at 6:35 PM.

MINUTES

The Board unanimously approved the minutes from May 14, 2021.

REGULATION RELATING TO THE CLEAN INDOOR AIR WORKER PROTECTION LAW AND TO EVIDENCE-BASED HEALTH INFORMATIONAL MESSAGES AND SIGNS REQUIRED IN ESTABLISHMENTS WHERE INDOOR HOOKAH OR E-HOOKAH USE IS PERMITTED

Ben Hartung, Public Policy Advisor at the Philadelphia Department of Public Health, presented on a proposed Board of Health regulation for establishments offering hookah and e-hookah. This presentation reviewed definitions and health risks of hookah and e-hookah.

Mr. Hartung showed research showing that members of the public believe that smoking hookah is “safer” than traditional tobacco smoking, while public health literature shows that hookah exposes 20 times the tar found and 10 times the carbon monoxide found in one cigarette. Secondhand smoke is a health risk as well. It was also presented that “nontobacco” hookah products are seen as not harmful but often contain tobacco. Air sampling shows high levels of carbon monoxide and other toxic agents when “nontobacco” hookah is used.

E-hookah devices were defined by the Health Department as a type of e-cigarette, offering many of the same risks as e-cigarettes.

Surveys into hookah use have found that nearly 1 in 13 high school students in the United States had used a hookah to smoke tobacco in the previous year. It was noted that the highest prevalence of use was found in large cities in the Northeast, where nearly 1 in 5 young adults reported past year use.

Mr. Hartung turned to describing knowledge deficits of the health risks of hookah and e-hookah, as the City Council amendment to the City Code provides that if the Board of Health finds that there is a knowledge deficit regarding the health risks, it can require health warning signs and language. Studies have shown that 70% of college students believe that hookah is less dangerous than cigarettes, 85% believe it to be less addictive than cigarettes, and 74% believe switching from cigarettes to hookah would reduce health risks.

Contrary to those beliefs, studies have shown that hookah smoke contains many of the same harmful components found in cigarette smoke, includes highly addictive nicotine, that these toxic agents persist even after passing through water, and hookah smokers inhale orders of magnitude more smoke than a cigarette smoker. Significant deficits in knowledge are also found with regards to e-hookah.

The Health Department believes that, based on these findings, there is a demonstrated lack of public knowledge of the health risks of hookah and e-cigarettes extend to e-hookah.

Mr. Hartung then presented the proposed regulation to the Board. The regulation would require establishments offering hookah and e-hookah for sale and use on premises to display signs and include menu warnings about health risks of smoking and vaping and secondhand smoke and vapor.

Literature has shown that health risk signs are effective for increasing knowledge around unhealthy products.

Mr. Hartung then displayed the proposed health risk signs and menu warnings.

The Health Department will make the signs available to establishments subject to this Regulation. Establishments would be required to modify their own menus. Sanitarians will be trained on compliance checking during the 60-day period before the Regulation becomes effective. After the Regulation is effective, Sanitarians will inspect sites for proper implementation and can levy a \$300 ticket for non-compliance. A ticket would be issued for missing any signs or menu warnings.

Ms. Rosenberger-Altman of the Law Department mentioned that the Board can approve the regulation and give the Health Commissioner discretion to make administrative changes to the signs in order to address impact of the colors

Dr. Amid moved for this addition; Dr. Ibrahim seconded.
Motion for regulation change approved unanimously.

Dr. Bettigole noted that there is no research into if this type of information posting would drive hookah users to other, potentially more dangerous products.

No comments were received on this regulation.

Dr. Gold moved for this addition; Dr. Ibrahim seconded.
Motion for regulation change approved unanimously.

**SECOND CONSOLIDATED AND RESTATED SUPPLEMENTAL EMERGENCY
REGULATION GOVERNING THE CONTROL AND PREVENTION OF COVID-19
(CONSOLIDATED SAFETY MEASURES FOR FULL REOPENING AND
DELEGATION OF AUTHORITY)**

Mr. Josh Roper of the Health Department described the Regulation. The Regulation would adopt the Mayor and Health Commissioner's June 15 Reopening Order. Certain COVID related emergency Regulations are not affected by this Regulation. The Board of Health is again delegating authority to the Health Commissioner allowing that person to issue, interpret, relax, or otherwise modify emergency disease control and prevention orders, and to delegate this authority as needed.

Mr. Roper then described the Mayor and Health Commissioner's June 15 Reopening Order. This Order allows certain Orders to continue in force and are not affected by this Order. Masks continue to be required on public transit (under CDC Orders), healthcare settings, congregate facilities, and indoors at schools, camps, early childhood education, and other childcare settings. Individuals are allowed to wear masks if they choose to do so. There are certain exceptions to the masking requirement.

A number of requirements to facilitate contact tracing and isolation and quarantine are covered in this Order. Businesses are required, to the extent possible, to identify workers and customers who were in close contact with a COVID-positive person. Businesses shall permit any COVIDpositive worker to remain absent from work during isolation in accordance with guidance. Businesses shall also permit any worker who is a close contact of a COVID-positive person to remain absent from work during quarantine in accordance with guidance, unless that person is fully vaccinated.

No comments were received on this regulation.

Dr. Bryant-Stephens moved; Dr. Ibrahim seconded.
Motion for approval of regulation approved unanimously.

ADJOURNMENT

Dr. Bettigole adjourned the meeting at 7:28 PM.