



# Wisconsin Division of Public Health

**PROGRAM/GROUP:** Public Health Council – Policy Committee  
**MEETING TITLE:** PHC Policy Committee Meeting  
**LOCATION:** 1-877-820-7831 / Participant Passcode: 767377#  
**DATE/ TIME:** Friday, May 31, 2019 7:30 – 9:00am

**Context: (Purpose, Vision, Mission, Goal):**

<p><i>The Public Health Council was created by 2003 Wisconsin Act 186 (Wis. Stat. §15.197[13]). By statute, the Council’s purpose is to advise the Department of Health Services, the Governor, the Legislature and the public on progress in implementing the state’s 10-year public health plan and coordination of responses to public health emergencies.</i></p>	
<p><b>Meeting Facilitator:</b> Alan Schwartzstein</p>	<p><b>Meeting Recorder:</b> Alan Schwartzstein / Maggie Northrop</p>

**Agenda:**

Time:	Topic:	Lead:	Notes/Follow-up:
7:30 am	Roll Call and Introductions		In attendance: Dr. Alan Schwartzstein, chair; Ms. Joan Theurer; Ms. Mary Dorn; Mr. Terry Brandenburg; Dr. Gary Gilmore; DHS Staff: Maggie Northrop; Mimi Johnson. Chair called the meeting to order at 7:32 AM.
7:35 am	Public Comment		There was no public comment.
7:40 –8:40 am	<p>Policy Committee Business:</p> <ol style="list-style-type: none"> <li>Review and approve March 12, 2019 Policy Committee minutes</li> <li>Review of policy criteria document approved by Council on May 3</li> <li>Consideration of current issues worthy of public comment by Council               <ol style="list-style-type: none"> <li>nutrition and physical activity</li> <li>root causes, ACEs, and trauma-informed care</li> <li>vaccination exemptions</li> <li>brainstorming other ideas</li> </ol> </li> <li>Planning for process of developing documents that ...<i>"advise the Department of Health Services, the Governor, the Legislature and the public on progress in implementing</i></li> </ol>	<p>Alan Schwartzstein ALL</p>	<ol style="list-style-type: none"> <li>Dr. Gilmore moved to approve the minutes from the March 12, 2019 Policy Committee meeting, followed by a second from Ms. Theurer. The meeting minutes were accepted without discussion.</li> <li>Dr. Schwartzstein introduced and reviewed the criteria for public policy statements approved by this committee in March and since amended and approved by the full Council. There was no comment.</li> <li>Committee members discussed the proposed issues, including vaping. Dr. Gilmore recommended that one of our first statements should be related to the growing epidemic of measles. Ms. Theurer and Mr. Brandenburg made further comments in support of this. Rationale included:           <ul style="list-style-type: none"> <li>National cases approaching 1,000 cases for a preventable illness that had been essentially eliminated 20 years ago due to (relatively) safe vaccines</li> </ul> </li> </ol>



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	<p><i>the state's 10-year public health plan and coordination of responses to public health emergencies..."</i></p> <ol style="list-style-type: none"><li>5. Discuss establishing regular future meeting routine</li><li>6. Open discussion (no action taken)</li></ol>		<ul style="list-style-type: none"><li>• Personal exemptions are a major factor in the reemergence of the illness</li><li>• The science is very good</li><li>• We are at a point that we do not have herd immunity</li><li>• Our audience may not be aware of the serious consequences of the disease, or the economic impact</li><li>• We are fortunate to have the vaccine</li></ul> <p>Mr. Brandenburg raised two issues that he considers for any public statement: one, is it related to the State Health Plan, and second, is it something that is currently being debated.</p> <p>Dr. Gilmore suggested that the committee could raise awareness of an issue even if it is not currently being debated, such as nutrition and physical activity.</p> <p>Ms. Dorn suggested using the criteria list to balance the issues at hand and the Council scope around emergency preparedness and the state health plan to help prioritize which topics should be selected going forward.</p> <p>Ms. Theurer recommended that the group considers vaping in the next call. Mr. Brandenburg commented that he believes that public sentiment is still coalescing around that issue, and therefore he feels that the committee should address the measles epidemic first.</p> <p>The group discussed that there should be a 2-3 month period between statements – if a statement is issued in June, then another one can be issued in August.</p> <p>Dr. Gilmore raised the option of the committee commenting on the protective factors that lessen disease and improve health as protective factors are shuffled off to the side. When municipalities look at their top 3 health priorities, mental health is often among those 3. When looking at the causes of death lifestyle is often at the root of them. The Council can be helpful in getting the message out. Ms. Theurer agreed that she sees more and more on the topic of social determinants of health and health equity, and also feels that weaving health equity into all Council statements could be beneficial. In some of the communities</p>
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		<p>where she has been involved in discussions, people want to hear more about the impact of these on the community.</p> <p>There then was a discussion around how to frame the statement on vaccines. Important discussion points included:</p> <ul style="list-style-type: none"><li>• Needing to address vaccination as having good science behind it.</li><li>• That explanation needs to be easily digestible by legislators and the public.</li><li>• Do not start off with a statement that vaccines are necessary, but rather help people understand the value of vaccines.</li><li>• Do not assume that safety and efficacy are understood by any of the parties; start with a better understanding</li><li>• Query: Do we zero in on personal exemptions, or just state that vaccines are good? There needs to be good context for any recommendations made in our statements.</li></ul> <p>Dr. Schwartzstein offered 3 parts to this and any public statement that we make:</p> <ul style="list-style-type: none"><li>• Area of the SHP that we are making the statement on in terms of gap or success.</li><li>• Provide context and science/public health around this area.</li><li>• Make an “ask/suggest possible ways to address this “gap”</li></ul> <p>The attendees indicated support of this overall approach.</p> <p>Mr. Brandenburg raised the fact that there already are many statements on measles and other topics that we may decide to comment on, and that these could be referenced rather than “creating a new wheel”. He also reiterated that, as part of the Council’s charge and function, the Committee can sometimes weigh in on current subjects, and sometimes could initiate the discussion.</p> <p>4. Consensus was then achieved on the following decisions:</p> <ul style="list-style-type: none"><li>• The first statement will be on the measles epidemic, and the significance that the personal exemption to measles and other vaccines plays in the consequences of the disease.</li><li>• Dr. Schwartzstein identified two individuals, Dr. Gilmore and Dr. Jon</li></ul>
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			<p>Temte, as initial drafters of the statement/bullet points to consider in the draft statement. They will be asked to develop a statement, with the assistance of Dr. Schwartzstein , policy committee chair and PHC staff, within approximately 2 weeks. Others are invited to send in current statements on this issue, or suggested verbiage for this statement</p> <ul style="list-style-type: none"> <li>• A meeting of the committee will be set up in 2-3 weeks to review this statement for consideration for referral to the Executive Committee for approval. The next committee meeting will be towards the end of the week of June 17, potentially the morning of June 21. Consideration will be confirmed at that time on whether to send out on Executive committee approval, or wait for the 8/2/2019 full council approval.</li> </ul>
8:40 – 8:50am	Wrap-up and Adjourn	Alan Schwartzstein	With there being no further business, the meeting was adjourned by the chair at 8:34 am.

*Notes: The Department of Health Services is an equal opportunity employer and service provider. If you need accommodations because of a disability or need an interpreter or translator, or if you need this material in another language or in an alternate format, you may request assistance to participate by contacting Ruth Sullivan at 608.261.0650 or [DHSPublicHealthCouncil@wisconsin.gov](mailto:DHSPublicHealthCouncil@wisconsin.gov). You must make your request at least 7 days before the activity.*