



County of Santa Cruz

BOARD OF SUPERVISORS

701 OCEAN STREET, SUITE 500, SANTA CRUZ, CA 95060-4069

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JANET K. BEAUTZ
FIRST DISTRICT

WALTER J. SYMONS
SECOND DISTRICT

MARDI WORMHOUDT
THIRD DISTRICT

TONY CAMPOS
FOURTH DISTRICT

JEFF ALMQUIST
FIFTH DISTRICT

AGENDA: 5/9/00

May 3, 2000

BOARD OF SUPERVISORS
County of Santa Cruz
701 Ocean Street
Santa Cruz, CA 95060

RE: TOBACCO LITIGATION SETTLEMENT FUNDS

Dear Members of the Board:

Attached are copies of letters from Lynn Lauridsen, Co-Chair of the Santa Cruz County Tobacco Education Coalition; Dr. Laurie F. Draughon, President of the Santa Cruz County Medical Society; and Ron Prince, Chair of the County's Emergency Medical Care Commission, providing recommendations for the allocation of Santa Cruz County's portion of the tobacco litigation settlement monies, totaling approximately \$3 million annually, for health care services. As you know, these funds are discretionary funds which represent reimbursements for costs incurred by the County in treating patients with smoking related illnesses.

To date, the Board has taken the following actions with regard to these funds:

1. Authorized acceptance of our County's portion of the settlement funds;
2. Designated three County officials (the Auditor-Controller, the Treasurer-Tax Collector, and the County Administrative Officer) to direct the transfer of the County's settlement funds on behalf of the County; and
3. Based on anticipated cash flows, allocated \$1.065 million in the current fiscal year to the Health Services Agency for health care services.

The remaining approximately \$2 million of tobacco settlement monies are anticipated to be programmed in connection with our 2000-01 budget hearings. Accordingly, I recommend that the Board direct the County Administrative Officer to provide a report and recommendation to the Board regarding the distribution of the

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BOARD OF SUPERVISORS
May 9, 2000
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funds currently available from the allocation of Santa Cruz County's portion of the tobacco litigation funds in connection with our budget hearings in June.

Sincerely,

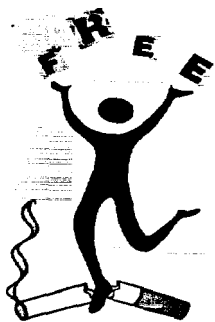
A handwritten signature in black ink that reads "Mardi Wormhoudt". The signature is written in a cursive, slightly slanted style.

MARDI WORMHOUDT, Chair
Board of Supervisors

MW:ted
Attachments

cc: Santa Cruz County Tobacco Education Coalition
Santa Cruz County Medical Society
Santa Cruz County Emergency Medical Care Commission
County Administrative Officer
Health Services Agency Administrator

201616



*Santa Cruz County
Tobacco Education
Coalition*

April 27, 2000

Mardi Wormhoudt
Board of Supervisors
701 Ocean Street
Santa Cruz, CA 95060

Dear Chairperson Wormhoudt,

Thank you for meeting with us a few weeks ago to discuss the Tobacco Master Settlement Agreement funds. Enclosed is the Santa Cruz County Tobacco Education Coalition's proposal for how the funds should be spent. Our understanding is that you will introduce this proposal to the Board.

The County will receive approximately \$3,000,000 per year from the Master Settlement and based on the attached document, we are requesting a range of between approximately \$850,000 and \$2,000,000 per year, depending on program priorities from your Board. We are requesting that this funding be secured for a minimum of four years and that after that time, your Board revisit this issue.

The Coalition has based the framework for the request on the Centers for Disease Control's (CDC) Best Practices for Comprehensive Tobacco Control Programs, August 1999 Publication. The CDC's formulas were applied to local population data to determine the magnitude of the program needed to effect a permanent reduction in tobacco use in Santa Cruz County.

It is our belief that the entire amount of the settlement should be spent on health matters and that the majority of the funds should be devoted to tobacco control issues. The funds are the result of the tobacco industry agreeing to pay for some of the health care costs associated with the use of tobacco. Only through comprehensive prevention and education programs can we hope to stem the horrendous on-going costs of tobacco use to our community.

We sincerely hope that Santa Cruz County will be among the leaders in California who recognize the wisdom in investing these funds in prevention. Please join communities such as Marin, Santa Barbara, San Diego, Santa Clara and Alameda Counties, the City of San Jose, and the City and County of San Francisco in dedicating resources to preventing the needless death and disability associated with tobacco use.

If you have any questions, please contact me at 464-3881.

Thank you for your concern for the health of our community.

Sincerely,

LYNN LAURIDSEN, Coalition Co-Chair

◆
Co-Chair
Lynn Lauridsen

Co-Chair
David Rosenthal

◆
American Cancer Society

American Heart Association

American Lung Association

Cabrillo College

Camp Fire Boys and Girls

Central Coast Tobacco-Free
Regional Project

City of Santa Cruz Parks
and Recreation

Live Oak School District

Monterey Bay
Dental Society

Pajaro Valley Prevention
& Student Assistance, Inc.

Planned Parenthood

Salud Para La Gente

Santa Cruz City
School District

Santa Cruz County
Health Services Agency

Santa Cruz County
Juvenile Justice Delinquency
Prevention Commission

Santa Cruz County
Office of Education

Santa Cruz County
Sheriff's Department

Valley Resource Center

Youth Media Network

◆
Community Members
at Large

P.O. Box 962

◆ 1070 Emeline Avenue
Santa Cruz, CA 95061 ◆

Settlement Funds Request for Tobacco Education

The following document is based upon the Centers for Disease Control (CDC), Best Practices for Comprehensive Tobacco Control Programs, August 1999 Publication. Formulas for cost estimates for each category shown below are from the CDC document and are based strictly on population figures for Santa Cruz County.

I. Community Programs to Reduce Tobacco

Recommended Fundina Ranges:

Upper Estimate: \$2.00 X 245,600 Santa Cruz County residents = \$491,200
Lower Estimate: \$.70 X 245,600 = \$171,920

Discussion:

According to CDC Best Practices, community programs should focus on prevention of the initiation of tobacco use among young people, cessation for current users of tobacco, protection from environmental tobacco smoke and elimination of disparities in tobacco use among populations.. For community programs to be successful, community-level education and training programs must be increased, media must be used to support local tobacco control initiatives, policies, formal and voluntary, must be adopted, and success must be measurable.

Proposal for Santa Cruz County:

In Santa Cruz County, community programs will be used to strengthen and build upon the successes of the Tobacco Education Coalition, The Coalition will provide technical assistance and expertise to community organizations to encourage them to incorporate tobacco prevention programs into their existing structure. Programs such as those directed at emerging trends (cigar and pipe use and bidis), programs which protect people from environmental tobacco smoke (e.g. smokefree homes and cars), and those which focus on populations which are particularly vulnerable (e.g. youth who drop out of high school) to tobacco use will be high priorities for funding in Santa Cruz County. Other areas the Coalition believes need attention are: discouraging adults from purchasing tobacco for youth, and focusing new efforts on the 18-24 year old population (where smoking uptake has been increasing).

II. School Programs

Recommended Fundina Ranges:

Upper Estimate: \$6.00 X 44,718 Santa Cruz County K-12 students = \$268,308
Lower Estimate: \$4.00 X 44,718 = \$178,872

Discussion:

According to the Surgeon General, almost 90% of adult smokers begin smoking at or before age eighteen. The 1997 *Monitoring the Future* study found that initiation of daily smoking most often begins in grades six through grade nine, and that smokers who begin at young ages find it hardest to quit. CDC Best Practices list the following as necessary components to a successful school-based anti-tobacco program: tobacco-free campus policies, teacher training, parent involvement, cessation services for students and staff, tobacco prevention curriculum for grades kindergarten through 12th (which contains social consequences of tobacco use, physiologic consequences, peer norms regarding tobacco use, and refusal skills), program specific training for teachers, and evaluation at regular intervals of the tobacco prevention program. In addition to program components recommended by the CDC, the Tobacco Education Coalition supports peer education and media literacy as effective methods to prevent youth smoking.

Proposal for Santa Cruz County:

The Tobacco Education Coalition proposes to conduct a needs assessment the first year to determine what assistance schools require to implement the CDC recommended components. The needs assessment will include evaluating the Healthy Kids survey and school compliance reviews, in addition to administering a survey to selected school staff and stakeholders (such as a sampling of administrators, teachers, students and parents). The second year will be devoted to addressing the identified gap areas and implementing CDC's recommended components through existing programs and channels wherever possible.

III. Enforcement

Recommended Fundina Ranges:

Upper Estimate: \$.80 X 245,600 Santa Cruz County residents = \$196,480
Lower Estimate: \$.43 X 245,600 = \$105,608

Discussion:

There are a number of laws enacted statewide and locally to discourage tobacco use in Santa Cruz County. Among them are laws to prohibit sales to minors prevent smoking in indoor workplaces, including bars, reduce or eliminate tobacco vending machines, and laws to restrict tobacco advertising aimed at enticing youth to smoke. Enforcement of these laws is limited. Law enforcement agencies in Santa Cruz County are cooperative but all face budget constraints that place enforcement of tobacco laws as a lower priority. Additional enforcement would further reduce tobacco use in Santa Cruz County.

Minors and Tobacco

While California law prohibits sales of tobacco products to minors, the law is rarely enforced in Santa Cruz County. Most efforts to reduce the sales of tobacco to minors have involved periodic merchant education to gain voluntary compliance. While local surveys have shown this strategy to be successful, youth are still able to illegally obtain tobacco products in Santa Cruz County. Studies have shown that youth are much less often able to obtain tobacco in communities where education is used in conjunction with law enforcement issuing citations to merchants who sell tobacco products to minors. A number of communities have adopted regulations requiring tobacco vendors to obtain a license to sell tobacco. Law enforcement may then suspend or revoke a license if the vendor sells tobacco to minors. This creates a financial incentive for merchants to ensure that illegal sales are extremely rare.

Minors are also able to obtain with relative ease, tobacco from friends, family, and by approaching strangers outside stores which sell tobacco. A survey completed recently in San Bernardino and Riverside Counties demonstrated that 33% of strangers asked outside stores were willing to purchase tobacco for children. Focus groups conducted in Santa Cruz County indicate that strangers are willing to buy tobacco for youth in our community.

Most of the jurisdictions in Santa Cruz County have taken additional measures to reduce youth access to tobacco products. Four of the five jurisdictions have adopted ordinances which reduce tobacco advertising visible to children and which require merchant-assisted sales of tobacco (no self-service displays). When successfully implemented and enforced, these ordinances reduce shoplifting of tobacco products by youth and adults, give merchants pause to consider the age of the person purchasing tobacco and reduce youth exposure to tobacco advertising.

Environmental Tobacco Smoke

California law prohibits smoking indoors with very few exceptions. Laws which restrict where smoking can occur reduce smoking-related illnesses suffered by members of the public as well as

employees of businesses where smoking until recently was permitted. While locally the vast majority of businesses are in compliance with indoor smoking regulations, a recent survey revealed that many bars are permitting smoking in violation of state law. Employees of establishments out of compliance are not enjoying the same health protection that employees of other businesses enjoy.

Enforcement enhances efficacy, yet most law enforcement agencies prioritize activities by the availability of staffing and immediacy of threat to life or property. Although local law enforcement is very supportive of laws restricting tobacco to minors or exposure to environmental smoke, other priorities consume most law enforcement resources. As a consequence, local enforcement of tobacco-related laws is in need of resources if the laws are to have a greater impact.

Strategies

In the area of reducing youth access to tobacco, greater success could be achieved with a combination of stings and education to merchants and to adults willing to purchase tobacco for youth. Such strategies as graduated penalties and licensing of vendors would discourage illegal sales and could help fund resources to enforce tobacco laws. Retailer compliance checks should be done more frequently (four times per year) than current resources permit (approximately every other year). Research shows that illegal sales to minors need to be below 5% before youth have difficulty obtaining tobacco. Local data shows that children are able to purchase tobacco products 12% of the times they try and the statistic is probably low. Self-service display bans are in place in four of five jurisdictions but ideally should be in every jurisdiction.

Implications for Santa Cruz County and Proposed Programs:

In order to enhance compliance, a part-time enforcement position should be dedicated solely to achieving compliance county-wide with tobacco regulations. This would streamline the complaint and citation process. Additionally, the position would be used to educate merchants, be a spokesperson on behalf of law enforcement about tobacco issues, and provide technical assistance and training to the other jurisdictions willing to issue citations. The position could enforce signage requirements and self-service tobacco display prohibitions, relieving the planning departments of this duty.

IV. Counter-Marketing (Alternatives to Tobacco Addiction)

Recommended Fundina Ranaes:

Upper Estimate:	$\$3.00 \times 245,600$ Santa Cruz County residents = \$736,800
Lower Estimate:	$\$1.00 \times 245,600 = \$245,600$

Discussion:

Paid tv, radio, newspaper ads, school newspapers, movie theater ads, bus ads and health promotion activities are necessary to counteract the heavy promotion of tobacco products. According to the CDC, innovative and creative media strategies should be seriously considered to reach a population bombarded by tobacco advertising. In other communities, media with school-based and community efforts proved successful at preventing or postponing adolescent tobacco use. These programs demonstrated that 50% of target population needs to be reached at least 6 times per year with message. Messages include prevention, cessation and protection from secondhand smoke. Media needs to target youth and adults.

Proposed Programs:

While Santa Cruz County has benefited in the past from media placed at the state level by the Department of Health Services, paid media has been scaled back considerably over time. The state has also not used outdoor advertising in Santa Cruz County (such as bus advertisements),

nor has there been any advertising in local newspapers, entertainment newspapers, school newspapers or movie theaters. These opportunities to reach youth and adults in Santa Cruz County should be utilized. State media has also not covered messages such as discouraging adults from purchasing tobacco products on behalf of youth.

Additional funding would give the community access to media the state's campaign isn't able to use, such as advertising developed by Florida's widely-admired media campaign. Funding would also be used to develop local media to effectively reach the unique culture of the people of Santa Cruz. Such strategies could include using web banners with anti-tobacco messages on Santa Cruz specific web sites, and placing ads in the alternative newspapers in Santa Cruz.

V. Cessation Programs

Recommended Funding Ranges:

Upper Estimate: \$2.00 X 33,812** current Santa Cruz County smokers = \$67,624 (brief interventions in clinics)
Lower Estimate: \$1 .00 X 33,812 = \$33,812 (screening only, no real help)

**Based on California Department of Health Services surveys conducted in 1996.

Discussion:

Smoking cessation is very cost effective. Even brief advice by medical providers to quit is effective. More intensive interventions such as individual, group or telephone counseling that provide social support and training in problem solving skills are more effective. FDA-approved pharmaceutical aids when combined with counseling are very effective as well.

The California Department of Health Services currently funds a free telephone counseling service. Group counseling is available to Santa Cruz County residents but costs \$40 or more and there is a large group of smokers who find the cost prohibitive. Pharmaceutical aids are not always covered by health insurance programs.

Proposed Programs:

Training of providers, such as Child Health and Disability Prevention (CHDP) providers to reach parents, should be considered as a strategy to motivate smokers to quit and to protect the health of family members from passive smoke. Other medical providers, such as general practitioners and dentists, should be trained periodically to reach smokers. Strategies to give out nicotine patches through other outreach efforts (such as people living in migrant camps) should also be considered as innovative ways to assist people who want to quit but who lack the resources to do so.

Additionally, cessation classes should be free or at minimal cost or perhaps "scholarships" could be offered to those unable to afford existing classes.

VI. Surveillance and Evaluation

Recommended Funding Ranges:

Upper Estimate: \$176,041 (10% of upper estimate)
Lower Estimate: \$ 73,582 (10% of lower estimate)

Discussion/Proposal:

Surveillance and evaluation are critical to determining program effectiveness. It will be necessary to periodically repeat youth access to tobacco surveys and stings, survey bars to see if people

are continuing to smoke indoors, and assess the media campaign with surveys. Surveys of stores to assess compliance with signage and self-service display bans will also be done. Those attempting to quit with free or minimal cost classes or nicotine patches should also be contacted to determine whether or not the assistance they are receiving is adequate for them to become smoke-free.

Evaluation assistance, in the form of workshops or technical advice will also be provided to those working in the community to reduce tobacco use. Additionally, existing evaluation tools, such as the Healthy Kids survey could be given financial assistance so that the survey could be given to more students, providing a richer and more complete picture of Santa Cruz County youth and their tobacco use.

VII. Administration and Management (CDC formula – 5% of total cost)

Recommended Funding Ranges:

Upper Estimate:	\$96,823
Lower Estimate:	\$40,470

Discussion:

Existing resources are inadequate to manage the additional programming generated by funds from the Master Settlement. Sufficient funding is needed for staffing to oversee program elements, manage contracts, hire staff, and monitor program performance.

Grand Total Comprehensive Program Annual Cost to Santa Cruz County, based on CDC Formula:	
Upper Estimate:	\$2,033,276
Lower Estimate:	\$ 849,864
Per Capital Funding Ranges	
Upper Estimate:	\$8.28 per capita
Lower Estimate:	\$3.46 per capita
Current Prop 99 Funding for Santa Cruz County Tobacco Education Programs:	
\$150,000 FY 99-00	
\$150,000 FY 00-01	
Current Prop 99 funding per Santa Cruz County resident: \$.61 (sixty-one cents)	



Santa Cruz County Medical Society

January 24, 2000

Santa Cruz County Board of Supervisors
701 Ocean Street
Santa Cruz, CA 95060

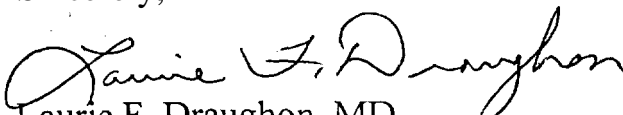
Dear Board Members:

The Santa Cruz County Board of Supervisors has a unique opportunity to improve the health of the residents of Santa Cruz County. The recent settlement of the lawsuit against tobacco companies will provide the county with millions of dollars over the next twenty-five years. Because these funds come from a lawsuit predicated on the fact that cigarette smoking leads to significant and costly health problems, the Santa Cruz County Medical Society believes that the monies should be spent on health-related programs and issues.

The Santa Cruz County Medical Society represents nearly 200 physicians in the county and has a vested interest in the continued health and well-being of our community. The medical society's Board of Governors recently adopted a position paper regarding the allocation of the county's tobacco settlement funds in our county. You will find our position outlined in the enclosed report.

We hope you will find our thoughts valuable as you and the Board of Supervisors work to develop a plan for the allocation of these funds. Thank you for your attention to this very important matter. If we can be of any assistance or provide additional information or clarification, please don't hesitate to contact either myself or Jill Foley, executive director of the medical society.

Sincerely,


Laurie F. Draughon, MD
President



Santa Cruz County Medical Society

Position Paper on the Designated Use of the County's Tobacco Settlement Funds

Santa Cruz County has a unique opportunity to improve the health of its residents. The recent settlement of the lawsuit against tobacco companies will provide the county with millions of dollars over the next twenty-five years. Because these funds come from a lawsuit predicated on the fact that cigarette smoking leads to significant and costly health problems, the Santa Cruz County Medical Society believes that the monies should be spent on health-related programs and issues.

The Board of Governors of the medical society recently adopted a position paper regarding the allocation of the county's tobacco settlement funds. You will find our position outlined below.

Major areas which should be considered are as follows:

Expand Health Care Coverage

There are high levels of uninsured and under-insured residents, most of whom are the working poor and their children. More needs to be done to ensure that those who qualify for existing Medi-Cal, Healthy Families, and other forms of assistance, access those programs. Therefore, one logical source for applying these funds is developing and implementing a local model for expanded health care coverage, a model that supports a health community at every level -- consumers, business, health care providers, and others.

Decreased Participation in Employment-Based Insurance

Despite small group and other insurance reforms at both the federal and state levels to make insurance coverage more accessible, the number of uninsured is growing. Small employers are least likely to offer coverage. Those employers who offer insurance to their employees are covering less of the cost. Low-income workers (and non-workers) simply cannot afford to make a choice of health care coverage over the basic essentials of food, clothing, transportation and housing for their families. Neither California nor Santa Cruz County have developed adequate solutions to this growing problem: a problem which diminishes our attractiveness as a home for new employees and businesses and negatively impacts our economy, quality of life, and health of our community.

Designated Use of Tobacco Settlement Funds

Inadequate Public Programs and Services

Local programs for providing health coverage, services and education are insufficient and eroding. These programs do not provide adequate funding or access to necessary preventive care, early intervention, health education, or physical, mental, or alcohol and substance abuse services. A lack of basic benefits and continuous coverage, for both workers and the unemployed, generates higher costs for the entire community and for local government.

Diminished Local Health Care System Capacity

After years of cost cutting to meet the demands of an extremely competitive marketplace and with a growing burden of uncompensated care, the capacity of Santa Cruz County's health care delivery system has been severely diminished. Reimbursement for services under almost every program (e.g., Medicare, Medi-Cal, commercial coverage, etc.), are among the lowest in the nation. In addition, funds that are allotted to provide care – emergency, primary, and tertiary care – to the county's indigent population (MediCruz), have declined or remained stagnant for many years, thus jeopardizing our care system. Santa Cruz County tobacco settlement funds could be used, in part, to augment reimbursement to emergency physicians and other specialists who provide care to MediCruz patients, thus assuring access and continuity of care to this at-risk population. This situation diminishes the private system's capacity to maintain and replace facilities and equipment; the capacity to invest in community health improvement; the capacity to handle higher-than-average demands for health services; and, the capacity to support Santa Cruz County's rising under- and uncompensated care need.

Mental Health & Substance Abuse Needs

There continues to be a substantial unmet need for mental health and substance abuse services, particularly for substance abusing youth. Even with the recent focus on youth and substance abuse in the county, more needs to be done. to prevent the long-term consequences of not meeting this critical community need.

Diminished Community Health Status

A lack of adequate health care coverage and programs result in diminished health status. Those without health care coverage are less likely to have a usual source of care, less likely to seek or practice preventive care, more likely to utilize costly emergency and hospital services, and more likely to have increased morbidity and mortality resulting from delays in access to care. Those without behavioral health and substance abuse services are more likely to enter the judicial system. The cost to the community is high

in the form of diminished quality of life, lost productivity, higher costs and strained community resources and capacity.

Recommended Actions

The Santa Cruz County Medical Society urges the Santa Cruz County Board of Supervisors to work with them to improve this situation and to:

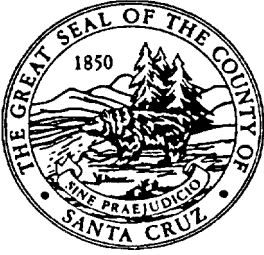
- ❖ Direct the County Administrative Officer (CAO) to create and place Santa Cruz County's tobacco suit settlement funds in a Health Trust pending the outcome of local options and statewide studies into leveraging the funds to increase them (through federal matching).
- ❖ Invest the funds in comprehensive strategies to improve the health of our community, including a focus on those needs identified as part of a committee that is represented by local health care providers. Such strategies must be developed after careful, collaborative consideration of the best return on that investment for Santa Cruz County's future through a coalition of community experts and representatives.
- ❖ Prohibit the use of future tobacco settlement funds to supplant existing net county cost (NCC) support for health care programs or to supplant current or future realignment and realignment growth revenues.

Summary

We realize that, as with the identification of any new resource, there are more requests than funds available. We also realize that the ultimate disposition of the funds will generate a great deal of debate as to the best strategies for improving health and access to care. Using these funds in areas not related to health will mean that we lose an unprecedented opportunity to improve the health of our community.

At this unique point in time, the Santa Cruz County Board of Supervisors has the opportunity to make the most fundamental decision impacting the health care safety net for all Santa Cruz County residents, Directing the recent multi-state, multi-billion dollar tobacco settlement funds to health will establish a system that will expand health care coverage and develop model programs to eliminate the long-standing, inequitable coverage of the growing uninsured and under-insured residents in Santa Cruz County. Your proactive and decisive leadership will demonstrate a commitment and vision to make Santa Cruz County a more healthy community. A commitment that we all share.





EMERGENCY MEDICAL
SERVICES

County of Santa Cruz

HEALTH SERVICES AGENCY

POST OFFICE BOX 962.1060 EMELINE AVENUE SANTA CRUZ, CA 95061-0962
(831) 454-4120 FAX: (631) 454-4272 TDD: (631) 454-4123

April 17, 2000

The Honorable Mardi Wormhoudt
Chair, Santa Cruz County Board of Supervisors
70 1 Ocean Street
Santa Cruz, CA 95060

Re: Tobacco Litigation Settlement Funds

Dear Supervisor Wormhoudt,

The Emergency Medical Care Commission urges you to allocate funds made available from the tobacco litigation settlement to improve prehospital care and first line emergency medical services in Santa Cruz County. We recognize that the County has many needs to prioritize but strongly advocate that these funds should be dedicated to providing improvements in health care for our citizens.

The EMCC noted in its 1999 Annual Report that data collection and analysis are pressing issues in order to best evaluate EMS system performance. We believe funds should be allocated to establish a trauma data registry, which would enable us to determine the measurable effects clinical interventions have on patient outcomes. We support items in the proposed EMS budget including EMS DataPro software and its consultant and a full time data analyst position..

A specific need exists for the replacement of Med-8 radios. The majority of EMS to hospital radio contact is made using this system. These radios were purchased in 1979 and are the heart of the EMS communications program but repair parts for the system can no longer be obtained.

The EMCC supports the efforts of many coordinated County departments to prepare for the next influenza pandemic. Public health officials anticipate over 200,000 deaths in the U.S. from influenza. Efforts should include immunization, especially for children and the elderly, increased health care worker personal protective practices, and flu preparedness educational material. .

April 17, 2000

The Honorable Mardi Wormhoudt

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The EMCC is providing new public education programs. This year's subject is centered on Spinal Cord Injuries for which our youthful population is particularly at risk. The EMCC also supports citizen awareness and health educational efforts about flu, stroke, and bicycle traffic safety. A booth strategically located at the Santa Cruz County Fair providing immunizations, bilingual educational materials, and participant staff would support these public education efforts.

The EMCC also supports all efforts towards the preparation of health care workers for the future to meet the prehospital, medical, and nursing needs of our community. Programs to enhance the education and training of persons in entry-level health care occupations and scholarships for school for professional preparation should be considered.

We urge the Board to dedicate the Tobacco Settlement Funds to realistic, necessary, and valuable improvements in EMS and related health care issues. Please feel free to contact your EMCC district representative, myself, or any EMCC member for more information on these important needs.

Sincerely yours,

A handwritten signature in black ink, appearing to read 'Ron Prince', with a stylized flourish at the end.

Chief Ron Prince

Chair, Emergency Medical Care Commission