

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22

ILLINOIS DEPARTMENT OF PUBLIC HEALTH
STATE BOARD OF HEALTH MEETING

Thursday, December 13, 2007
11:00 a.m.

Michael A. Bilandic Building
160 North LaSalle Street
Conference Room N505, 5th Floor
Chicago, Illinois

Reported by: Donna T. Wadlington, C.S.R.

1 BOARD MEMBERS:

- 2 DR. JAVETTE C. ORGAIN, CHAIRMAN
- MR. DAVID B. McCURDY
- 3 MR. STEVEN M. DERKS
- DR. CASWELL A. EVANS
- 4 DR. JORGE A. GIROTTI
- MR. KEVIN D. HUTCHISON
- 5 DR. JANE JACKMAN (via phone)
- DR. JERRY KRUSE
- 6 MS. KAREN PHELAN
- DR. PETER ORRIS
- 7 MS. ANN O'SULLIVAN
- DR. TIM J. VEGA (via phone)
- 8 DR. HERBERT E. WHITELEY

9

10

11 ALSO PRESENT:

- 12 MR. DAVID CARVALHO

13

14 Present by telephone:

- 15 MS. CLEATIA BOWEN
- MS. SUSAN MEISTER
- 16 MS. JOSIE CADEN

17

18

19

20

21

22

1 CHAIRMAN ORGAIN: Good morning,
2 everyone.

3 RESPONSE: Good morning.

4 CHAIRMAN ORGAIN: How is everybody?

5 RESPONSE: Good.

6 CHAIRMAN ORGAIN: Okay, good.

7 MR. McCURDY: And you?

8 CHAIRMAN ORGAIN: Fine. Thank you.

9 David, is the Director going
10 to be here?

11 MR. CARVALHO: He will be -- he hopes
12 to be able to come in. I mentioned to everyone
13 before the meeting started that he is briefing
14 the Governor on a press conference at 1:00 about
15 violence, preventing violence.

16 We don't hear you very well in
17 Springfield.

18 RESPONSE: We're here.

19 MR. CARVALHO: Great. Okay.

20 CHAIRMAN ORGAIN: Thank you.

21 The meeting summary, what we
22 have -- does everyone have a meeting summary?

1 Okay. Cleatia?

2 MS. BOWEN: Yes.

3 CHAIRMAN ORGAIN: The meeting summary.

4 MS. BOWEN: Well, I thought it was
5 attached in there.

6 CHAIRMAN ORGAIN: We got the full
7 transcript.

8 MR. McCURDY: The summary came
9 electronically.

10 CHAIRMAN ORGAIN: And the summary came
11 electronically.

12 MR. McCURDY: It wasn't in the packet.

13 CHAIRMAN ORGAIN: And so did -- for
14 those of you who had an opportunity to read the
15 summary, do you have any additions or
16 corrections?

17 MS. PHELAN: Are you talking about the
18 minutes?

19 CHAIRMAN ORGAIN: The meeting summary
20 that did come electronically. What you
21 additionally have is the full transcript.

22 DR. WHITELEY: I was present at that

1 meeting, but I was not reported at the meeting,
2 so I want to amend that.

3 CHAIRMAN ORGAIN: All right.

4 MS. PHELAN: I have a change on Page
5 34. I just would like to add Senator
6 Cullerton's name.

7 MR. CARVALHO: I suspect that everyone
8 will need to speak up for the phone since
9 historically, we have had -- did you hear that
10 in Springfield?

11 RESPONSE: No, we didn't.

12 MS. PHELAN: I'm sorry. On Page 34 --

13 CHAIRMAN ORGAIN: On Page 34 of the
14 full transcript.

15 MS. PHELAN: Correct. I would just
16 like to make a correction and it's John
17 Cullerton, C-u-l-l-e-r-t-o-n.

18 CHAIRMAN ORGAIN: Of the full
19 transcript.

20 MS. PHELAN: That's Senator John
21 Cullerton.

22 MS. BOWEN: Senator John Cullerton.

1 Okay.

2 CHAIRMAN ORGAIN: And that's just for
3 the full transcript.

4 And so the meeting summary is
5 a one-page document and so any additions or
6 corrections to the meeting summary. And I don't
7 hear anything with the exception of --

8 DR. WHITELEY: I was here in the
9 meeting summary but not on the transcript.

10 CHAIRMAN ORGAIN: Okay.

11 MR. CARVALHO: May I make a
12 suggestion, Madam Chairman?

13 CHAIRMAN ORGAIN: Yes.

14 MR. CARVALHO: If we -- if everyone
15 goes around and announces their name, it will
16 inform people on the call, but they are also
17 added to the transcript so that in the future we
18 can get the attendance correctly, if everybody
19 doesn't sign in.

20 CHAIRMAN ORGAIN: So for all of you
21 who are in Springfield, if you can please say
22 your name from a board perspective and from

1 staff perspective, etc., so that we can get that
2 attendance correct. So we will let you start.

3 MS. BOWEN: Cleatia Bowen.

4 MS. MEISTER: Susan Meister, Rules
5 Coordinator.

6 MS. CADEN: Josie Caden (phonetic),
7 Legal Counsel.

8 DR. VEGA: Tim Vega from the Board.

9 DR. GIROTTI: Jorge Girotti.

10 MR. McCURDY: Dave McCurdy.

11 DR. KRUSE: Jerry Kruse.

12 MS. O'SULLIVAN: Pam O'Sullivan.

13 DR. WHITELEY: Herb Whiteley.

14 CHAIRMAN ORGAIN: Javette Orgain.

15 MR. CARVALHO: Dave Carvalho from the
16 Department.

17 MS. PHELAN: Karen Phelan.

18 DR. EVANS: Caswell Evans.

19 MR. DERKS: Steve Dirks.

20 MR. HUTCHISON: Kevin Hutchison.

21 MR. CARVALHO: And Madam Chair as
22 well, for people in Springfield you know that we

1 have a court reporter who will not be able to
2 discern who you are unless each time you speak
3 you indicate your name. Thank you.

4 CHAIRMAN ORGAIN: And so with that we
5 definitely do have a quorum and we can begin
6 with -- I see no additional changes to the
7 meeting summary and, therefore, we have a
8 consensus, and we can approve the meeting
9 summary as so.

10 We'll move to Item No. 5 on
11 the agenda. No, we can move to Item No. 4 on
12 the agenda in terms of the State Board of Health
13 meeting and rules schedule for 2008.

14 Simply approve that schedule
15 which came in your packet, proposed meeting
16 schedule for 2008, for the most part.

17 MR. McCURDY: Move to approve.

18 DR. KRUSE: Second.

19 CHAIRMAN ORGAIN: It's been moved and
20 seconded to approve the meeting schedule for
21 2008. If there is no objection, then consensus.

22 Okay. Thank you. So that's

1 done. Item No. 4 on the agenda is complete and
2 we can go to Item No. 5, the Rules Committee
3 Report. David.

4 MR. McCURDY: The Rules Committee
5 report -- actually, the minutes of the Rules
6 Committee Meeting are being passed around as we
7 speak. Hopefully, everybody has a copy by now
8 and also, as you will see, there are three
9 legislative or three sets of rules that we acted
10 upon.

11 And, Susan, are you prepared
12 to address these, if needed, as we go along?

13 MS. MEISTER: Well, I'm probably
14 reading from the program would be here. Maybe I
15 can go through Carbondale today. (Inaudible.)

16 MR. McCURDY: So we -- and that's
17 talking to Susan Meister down there.

18 But in any case, we can -- I
19 think we can proceed. These rules were not --
20 were fairly straightforward when we went through
21 them in the Rules Committee, I believe so.

22 Let me just start with -- I'm

1 not even seeing on the agenda. Let me start
2 with 665, which is the Child Health Examination
3 Code. If you had a chance to review the
4 synopsis, the synopsis basically says that this
5 is meant to align this with physical examination
6 requirements and a piece of legislation and a
7 couple of other things having to do with
8 definitions and particular kinds of vaccines.

9 And I think the last item may
10 be in some ways the most important, that this
11 establishes rules that will govern vaccinations
12 for pneumococcal conjugate vaccine. And by the
13 way, this rule is also companioned by the next
14 one on your agenda, which is the Immunization
15 Code. So those two together have considerable
16 material that overlaps.

17 And at least my suggestion
18 would be because the changes were minor, I have
19 not had a chance to review the minutes and the
20 changes. But the changes that we recommended
21 were minor and I would suggest to the Committee
22 that unless there are questions we proceed from

1 these two.

2 The third item -- well, let's
3 see. Are there any questions about these two?

4 Otherwise, I would move that
5 we approve the child -- that we recommend to
6 JCAR the Child Health Examination Code rules as
7 they are and the Immunization Code rules as they
8 are. I would move that.

9 MR. DERKS: Second.

10 CHAIRMAN ORGAIN: Any discussion or
11 questions from anyone in Springfield?

12 MS. MEISTER: As David stated, the
13 changes were minor and they have been made and
14 these rules do implement legislation that passed
15 last year. So we would like to move forward
16 with them and get them out for public comment.

17 MR. CARVALHO: And that's Susan
18 Meister.

19 MS. MEISTER: I'm Susan Meister.

20 DR. KRUSE: I have one question
21 regarding pneumococcal conjugate vaccine. On
22 page 11 of 13 under point I No. 1 it --

1 CHAIRMAN ORGAIN: Which document?

2 DR. KRUSE: I'm sorry. It's 665.

3 MR. McCURDY: Okay. Go ahead.

4 DR. KRUSE: It lists a rule for
5 children less than two years of age. I just
6 wanted to know if the child has not met the
7 immunization standards in the table does that
8 mean that they can't start in these nursery
9 schools and pre-school programs until they have
10 met that? It doesn't say that specifically.

11 MS. MEISTER: No, I don't think that
12 that prohibits them. It's not like the public
13 school rules where there is a certain date by
14 which the child has to comply for the vaccine to
15 be prohibited for a child entering a daycare or
16 preschool. But there is no statement that they
17 can't enter if they don't have it.

18 CHAIRMAN ORGAIN: Do you have comment
19 on that?

20 DR. KRUSE: No. It just said you
21 shall present evidence. It doesn't say --

22 CHAIRMAN ORGAIN: Any mandatory

1 requirement.

2 DR. KRUSE: No, I think they should
3 have a certain period of time they should have
4 the immunization, but I don't think they should
5 be prohibited from starting. That is just my
6 opinion.

7 CHAIRMAN ORGAIN: Okay. Thank you.

8 Being -- if there are no --
9 did I hear a question from Springfield?

10 RESPONSE: No.

11 CHAIRMAN ORGAIN: If there are no
12 other questions or concerns, it's been moved and
13 seconded to approve of the two rules and
14 consensus on that and we can move on to the
15 next.

16 MR. McCURDY: Okay. And the third
17 rule that we considered Structural Pest Control
18 Code revisions and these amendments all have to
19 do with changes in continuing education
20 requirements for recertification and they were
21 minor.

22 And, again, I would move that

1 we recommend those -- that we go ahead and
2 recommend those to JCAR.

3 DR. KRUSE: Second.

4 CHAIRMAN ORGAIN: It's been moved and
5 seconded. Any discussion or questions?

6 Hearing none, then we can
7 proceed by consensus. Thank you, Dave.

8 MR. McCURDY: I don't have any
9 other -- anything else to report, Madam Chair.

10 CHAIRMAN ORGAIN: Okay, great.

11 Okay. Item No. 6 on the
12 agenda. And Dr. Peter Orris of the Board has
13 joined us.

14 DR. ORRIS: Sorry to be late.

15 CHAIRMAN ORGAIN: We appreciate you
16 coming.

17 MS. O'SULLIVAN: The Policy Committee
18 has not met. I apologize for not being able to
19 get together. My assumption is the annual
20 report to the Governor has been approved. There
21 it is right there.

22 MR. CARVALHO: And Madam Chair, given

1 your time, which is to say you have a lot of it
2 this morning, I printed out the revised -- or
3 the copy of the annual report after the
4 revisions from the last go round. There were
5 just a few tweaks to take into account a little
6 passage of time and then a handful of editorial
7 suggestions. I had them red lined and I have
8 them to distribute, if you would like, and you
9 can go through them. I think there are,
10 perhaps, ten changes. You can probably knock
11 them off in five, ten minutes and then we can
12 call this one done.

13 CHAIRMAN ORGAIN: Do they have them in
14 Springfield?

15 MR. CARVALHO: They were e-mailed to
16 everybody who said they were going to
17 participate -- well, actually they were e-mailed
18 to everybody. Piggybacking the e-mail about how
19 to participate by phone, Dr. Vega, you were
20 probably in transit so you may not have it.

21 If there is someone in the
22 meeting there who could print it out off the

1 e-mail, it went to all the board members.

2 MS. BOWEN: We will get it printed
3 out.

4 MR. CARVALHO: Thank you. But they
5 are relatively minor so by virtue of just the
6 conversation we can probably make clear. In
7 fact, with your permission, I will just walk
8 through it.

9 The footnote keeps changing
10 because of the date. On Page 3, it just revised
11 to indicate that IDPH funded this activity
12 relating to the Community Capacity Development
13 Center, but it doesn't change the substance
14 otherwise.

15 On Page 4 I suggested changing
16 lack of responsiveness to data users to delays
17 in responding. I do believe we respond to
18 everybody. I think there has just been an issue
19 about how quickly and that's what we have been
20 working on is improving the speed.

21 On Page 5 that's just an
22 editorial change. We have already defined the

1 agency as IDPH, so I thought it would be best to
2 use it.

3 On Page 6 is just the addition
4 of a comma. On Page 7 the top paragraph notes
5 that there are several national groups launching
6 an effort to establish state and local health
7 department accreditation, and I thought I should
8 note that it's a voluntary system that they are
9 seeking to establish and that should probably be
10 made clear.

11 On Page 8 the first change is
12 just grammatical. The second change just takes
13 into account the passage of time, and it
14 originally said that we were planning training
15 sessions and, in fact, we have been holding
16 training sessions. So that just changes the
17 verb sense.

18 In the consumer guide the law
19 originally said 30 and it was changed to say at
20 least 30, so I inserted at least. And then the
21 bottom change is, again, just a stylistic.

22 On Page 9 with the passage of

1 time made a change about what was the actual
2 effect of House Bill 1254. There was an
3 amendatory veto. The legislature declined to
4 consider it and, therefore, the bill died.

5 On Page 10 it's just fixing a
6 grammatical error. On Page 11, just
7 grammatical, calling something constant
8 perpetual. It's a continued source of funding.

9 And anybody who thinks
10 anything in the statute is perpetual is not a
11 careful observer of the process.

12 Page 12, nothing. Thirteen
13 is -- the next change, I believe, is on Page 19.
14 This is, perhaps, the only substantive change.
15 There are several instances where the
16 legislature or the Governor did something and
17 you urged this legislature and/or the Governor
18 to keep doing it or you applauded them doing it.

19 And so I thought given your
20 concerns about access and the discussion here
21 about the various efforts on access, this might
22 be a spot where you wanted to applaud the

1 efforts to expand access and urge that they
2 continue. I am not suggesting you weigh in on
3 the tax source for doing it. Leave that to
4 another day. So that is for your consideration.

5 On Page 20, it, in fact,
6 became law, so I changed it to say so.

7 And on Page 22, there are
8 several spots where you urge the Governor to
9 veto any amendment to Senate Bill 500. Since
10 Senate Bill 500 is now law, I thought the
11 easiest way to deal with that is just to say if
12 any revision to Senate Bill 500 that we would --
13 it wouldn't normally be an amendment. It would
14 be a new bill that would revise the statute or
15 revise the bill. So that is just mostly
16 stylistic.

17 And then in the cover letter,
18 which I will distribute now, too, which
19 basically is kind of the executive summary cover
20 to what you have just looked at, there is only
21 one style change and that is the same idea about
22 the concern about efforts to revise Senate Bill

1 500 to make accommodations for casinos.

2 So those are offered for your
3 consideration.

4 MR. McCURDY: Say that part again,
5 please, about casinos.

6 MR. CARVALHO: Certainly. The letter
7 has the same language that is in the full
8 bill -- I'm sorry, your full report, which is to
9 oppose efforts to revise the new law to
10 accommodate requests from casinos, that smoking
11 be permitted onboard ships. You are coming out
12 in favor of one vice at a time. Or two,
13 actually. I guess there's a lot of alcohol on
14 boats.

15 MS. SULLIVAN: From my recollection
16 you've taken the -- added some changes that you
17 suggested were fairly minor at the last meeting
18 and added them in?

19 MR. CARVALHO: Yes.

20 MS. O'SULLIVAN: And this looks pretty
21 similar to what we have been e-mailing back and
22 forth.

1 MR. CARVALHO: This is exactly what we
2 have been e-mailing except for the several that
3 I noted.

4 On the record, I would like to
5 apologize to the Chair for not getting this to
6 her sooner.

7 MR. DERKS: So if I could be clear --
8 Steve Derks.

9 The request on the table,
10 Madam Chairman, is that you are taking input on
11 this letter and this report before it's
12 finalized; is that correct?

13 CHAIRMAN ORGAIN: Yes.

14 MR. DERKS: May I make one suggestion
15 on the bullet point in the letter on Senate Bill
16 500 and that, perhaps, the Board and you, Madam
17 Chair, might consider stronger language even to
18 the Governor in that he -- I think the notion
19 that Senate Bill 500 is, perhaps, under threat
20 of being eroded, not necessarily in eminent
21 danger. But David may know of something that I
22 don't.

1 MR. CARVALHO: No. This was drafted
2 several months ago.

3 MR. DERKS: Under threat of being
4 eroded by proposals that would make exemptions
5 for casinos and other entities also.

6 But then I wonder whether the
7 next sentence the Board would feel comfortable
8 urging the Governor to express his opposition to
9 any such measures in a proactive way as well as
10 to ask, if necessary, to veto or amendatorily
11 veto any legislation that includes such
12 exemptions.

13 MR. CARVALHO: In the interest of
14 making this final today, because this is how we
15 got to today last time, well some delay on my
16 part, why don't you make -- if I could, Madam
17 Chair, if you could make specific exact wording,
18 suggestions, I will write them down.

19 CHAIRMAN ORGAIN: That the State Board
20 urges the Governor to voice his opposition and
21 to veto any revisions to Senate Bill 500 that
22 weakens this important piece of legislation. Is

1 that satisfactory?

2 DR. ORRIS: Considering the current
3 situation, could we ask the Governor and
4 leadership of the legislature to express
5 themselves?

6 MR. DERKS: Well, I think --

7 CHAIRMAN ORGAIN: This goes directly
8 to the Governor.

9 MR. DERKS: This goes to the Governor.

10 MR. CARVALHO: Yes.

11 MR. DERKS: But I certainly encourage
12 that, too.

13 CHAIRMAN ORGAIN: We certainly
14 encourage the legislature.

15 MR. CARVALHO: So the two sentences
16 would read with the suggestions that I have
17 captured so far that Senate Bill 500, the Smoke
18 Free Illinois Act, is under threat of being
19 eroded by proposals to include exemptions for
20 casinos and other entities.

21 The State Board of Health
22 urges the Governor to voice his opposition and

1 to veto -- to voice his opposition to and to
2 veto any -- well, I guess we don't need the
3 second to. To voice his opposition and to veto
4 any revision to Senate Bill 500 that weakens
5 this important piece of legislation. Is that
6 it?

7 MR. DERKS: And veto and amendatorily
8 veto and/or amendatorily veto. Would that be an
9 appropriate request to the Governor or not,
10 David? I defer to you.

11 MR. CARVALHO: Veto probably captures
12 it.

13 MR. DERKS: That's fine.

14 MR. CARVALHO: Sometimes they issue a
15 press release saying he's vetoed something and
16 it turns out it was really an amendatory veto.
17 So it probably captures both ideas. Whatever is
18 necessary. Lay down in front of a truck. I
19 have got that if that meets the body's pleasure.

20 CHAIRMAN ORGAIN: Go ahead.

21 DR. GIROTTI: You seem to use the word
22 "urge" a lot. Are we not permitted to recommend

1 something?

2 MR. CARVALHO: You may do either.
3 You, in fact, have applauded, recommended,
4 urged.

5 DR. GIROTTI: Okay.

6 CHAIRMAN ORGAIN: What about strongly
7 urges?

8 MR. CARVALHO: We have done that, too.

9 CHAIRMAN ORGAIN: Strongly urges on
10 this one. Okay. I don't mind putting that one
11 in there. Does that help you any?

12 MR. CARVALHO: Where did you want that
13 to go in?

14 CHAIRMAN ORGAIN: The State Board
15 strongly urges the Governor.

16 MR. CARVALHO: Okay. Got it.

17 When we are done with this, by
18 the way, one of the things that I was going to
19 do in the update was tell you the status of the
20 rules on this Act. So I will do that later.

21 CHAIRMAN ORGAIN: That's fine. We've
22 got strongly in here a lot of different places

1 so that they know how we feel about it.

2 MR. CARVALHO: Is there anything you'd
3 like to gently suggest?

4 CHAIRMAN ORGAIN: No.

5 MR. CARVALHO: It wouldn't be in here.

6 CHAIRMAN ORGAIN: That's right. You
7 have got too much talent on the board to gently
8 suggest.

9 Okay. With those changes
10 please why don't -- if you can just take a
11 minute, if you have the opportunity, I know this
12 is -- we do have some time.

13 Have you had an opportunity to
14 get the copy in Springfield?

15 MS. BOWEN: Not yet. She's going to
16 bring it over to me.

17 MR. CARVALHO: It would be perfectly
18 fine with me if you just hold this off until the
19 end. And if there is anybody that's seen
20 anything else while they're perhaps
21 multi-tasking during the rest of the meeting, we
22 can capture that.

1 DR. EVANS: There's a typo in the
2 second paragraph you didn't catch.

3 MR. CARVALHO: Of the letter or the
4 report?

5 DR. EVANS: Of the letter. It's
6 every.

7 CHAIRMAN ORGAIN: So as you see typos
8 if you can write them down and you can forward
9 them to -- circle them and we can give them to
10 David.

11 DR. EVANS: Four lines from the bottom
12 of the paragraph, second word.

13 CHAIRMAN ORGAIN: And so what we are
14 going to do to allow Springfield an opportunity
15 to get the copy and for those of us who have a
16 copy to multi-task and what we will do is we'll
17 come to the end of the meeting and deal with the
18 approval of at least the letter and, hopefully,
19 the full document.

20 MR. CARVALHO: And then I will make
21 arrangements with the Chair to get this signed
22 and done promptly.

1 CHAIRMAN ORGAIN: That being said, I
2 think we can move on to the next item on the
3 agenda really which is --

4 DR. VEGA: Madam Chairman.

5 CHAIRMAN ORGAIN: Yes.

6 DR. VEGA: This is Tim Vega.

7 I just -- in the minutes and I
8 just wanted to add regarding the annual report
9 for next year Dr. Kruse brought something up
10 regarding medical home and the development of
11 medical homes.

12 And I think this is becoming
13 an increasing concept nationally and at the
14 state. So I think just for staff and for the
15 rules -- for the subcommittee next year, I just
16 want to keep that thread of thought for next
17 year's annual report and development of that
18 idea. I think we are kind of chasing our -- you
19 know, I think we are kind of -- the private
20 sector and even Medicaid is developing this. So
21 in that respect we are behind the times on this,
22 but I just wanted to keep that thought for next

1 year's staff.

2 CHAIRMAN ORGAIN: And we can pass that
3 on to the Chair of the Policy Committee in
4 regards to medical home. Thank you, Tim.

5 That being said, why don't we
6 go on with the report that David is suggesting.

7 MR. CARVALHO: Sure. As I mentioned
8 at the beginning, Dr. Arnold hopes to be able to
9 come in between his briefing and press
10 conference.

11 CHAIRMAN ORGAIN: Is he in Chicago or
12 Springfield?

13 MR. CARVALHO: He's here.

14 CHAIRMAN ORGAIN: Thank you.

15 MR. CARVALHO: He's next door.

16 But is -- when he comes there
17 is some substantive details about what's
18 happening in the last several months that he was
19 going to ask me to do anyway, so why don't I do
20 those now.

21 As you know, Dr. Arnold became
22 the Health Department Director in October. He

1 was confirmed by the Senate for his four-year
2 term, and he has hit the road. I believe he's
3 visited seventeen or more local health
4 departments since he started.

5 And part of that, as both
6 reported to you previously and as captured in
7 your report, the Governor has moved ahead with
8 various elements of access expansion efforts
9 under Illinois Covered and all of the Cabinet
10 Members and especially the Chief Medical Officer
11 for the State have been part of promoting those
12 efforts.

13 Several of them relate to
14 expansions in the programs administered by the
15 Department of Health Care and Family Services,
16 what people on the street refer to as Medicaid,
17 but these are not strictly speaking Medicaid
18 programs.

19 But one of them does involve
20 the Department of Public Health and that's an
21 expansion of the Breast and Cervical Cancer
22 Screening Program. Most of you are probably

1 familiar with that program, but it's a program
2 that starts with screening efforts that are
3 promoted by the Department of Public Health
4 through grants to lead agencies and then is
5 rounded out by programs administered by Health
6 Care and Family Services to provide treatment to
7 women who are uninsured and have been found to
8 need treatment by virtue of the screenings.

9 So the Governor announced a
10 plan to extend the Breast and Cervical Cancer
11 Screening Program to all women who are
12 uninsured, not just women who are uninsured and
13 under the income thresholds that theretofore
14 prevailed. And so we have been working -- we at
15 the Department have been working with our lead
16 agencies to implement those new criteria as well
17 as to add additional lead agencies so that more
18 women can be provided screenings.

19 So we had, I believe, a
20 hundred and twenty-five percent increase in a
21 time period to time period comparison in the
22 number of screenings done and we are excited by

1 that. I believe the number Dr. Arnold actually
2 will know and can be able to address this -- I
3 think the rule of thumb is something like one
4 percent of the screenings lead to someone who
5 needs follow up. So the Department of Health
6 Care and Family Services is prepared for that.

7 So you probably know that this
8 is not without controversy. There were certain
9 rules that were required or at least certain
10 rules that were presented to the Joint Committee
11 on Administrative Rules relating to the
12 expansions at the Health Care and Family
13 Services side of things, and those rules were
14 rejected by JCAR, and the Department of Health
15 Care and Family Services is proceeding with
16 those rules notwithstanding. And a lawsuit has
17 been filed on the matter and I believe a hearing
18 on the lawsuit is tomorrow.

19 The Breast and Cervical Cancer
20 Screening Program expansion did not require
21 rules; however, the lawsuits filed have sought
22 to enjoin that program as well. So that will

1 also, I believe, be the subject of a hearing
2 tomorrow.

3 On the Smoke Free --

4 DR. ORRIS: Can we ask questions on
5 that or do you want to --

6 MR. CARVALHO: Well, if there is no
7 JCAR, I can take a break. I've got one other
8 JCAR thing.

9 Also on the JCAR front is the
10 Smoking Act, the Smoke Free Illinois Act.

11 The Department -- when the Act
12 was signed, the time period between the
13 enactment of the law and the January 1 deadline
14 was remarkably short. And as you know, the
15 Department worked feverishly to get rules put
16 together and you at the Board worked feverishly
17 to have special meetings to approve them.

18 Those rules were submitted to
19 JCAR for consideration at their meeting last
20 week, I believe, earlier this month. And JCAR
21 declined to take action and deferred action to a
22 future date, which if they do it at their

1 regular meeting would be January 9.

2 So we are left in the
3 situation where the statute goes into effect
4 January 1. The rules to clarify aspects of the
5 statute will not have received even their first
6 JCAR approval at that time. There are some
7 issues that are holding up JCAR and that's the
8 status.

9 Is there anything to add to
10 that, Susan?

11 MS. BOWEN: Susan has already left.
12 She just -- after the last three rules, after
13 the Rules Committee Report, she moved on.

14 MR. CARVALHO: That's fine. Because
15 she probably would have told me not to even say
16 what I have already said. But there are some
17 issues that JCAR has concerns about.

18 Apparently, there are some
19 implications to the statute as written that some
20 members of the legislature are having second
21 thoughts about, and so they are advocating that
22 the rules say that black is gray or white is

1 pink, rather than just black is black and white
2 is white. And we will see whether JCAR makes
3 that explicit or not as these rules proceed, but
4 there is some -- in effect, there is some
5 exceptions they would like to have the rules
6 make that are not provided for in the statute,
7 and we will see, as I say, how that proceeds.

8 So those are my two JCAR
9 issues. Do you have a question on the first
10 one?

11 DR. ORRIS: On the expansion of the
12 mammography program, is there a required
13 evaluation quality assurance aspect of the state
14 funding?

15 One of the issues that I know
16 you are aware we are becoming more concerned
17 about is the quality of the mammogram screening
18 and whether or not that contributes
19 substantially to some of the racial and economic
20 differential we see in that.

21 There has been some recent
22 work in Chicago comparing with elsewhere that

1 gives us an identification rate of between two
2 and I think it's ten. And, in general, you
3 would expect about six on the screening, I'm
4 told, per thousand and then on a follow-up
5 diagnostic it may be 50 or something.

6 So the question I had is, are
7 we looking at those statistics and what process
8 are we doing to evaluate the recipients.

9 MR. CARVALHO: Let me find the answer
10 to that. I could speculate that we are, but I
11 would rather talk to the person who administers
12 the program.

13 DR. ORRIS: Maybe it's an ongoing
14 issue. So maybe succeeding the meeting we might
15 inquire.

16 DR. JACKMAN: This is Jane Jackman on
17 the phone and I just had a question about the
18 smoking rules.

19 MR. CARVALHO: Yes.

20 DR. JACKMAN: If the law goes into
21 effect January 1, there are no rules. Does this
22 mean then no enforcement of the rule is possible

1 until we get the rules settled?

2 MR. CARVALHO: No, the law is the law.
3 The rules are intended to make clear the things
4 that are clear in the law and definitions of
5 what exactly is a -- what do you call it, the
6 beer garden. What they call it, the beer garden
7 and things like that.

8 DR. JACKMAN: Right.

9 MR. CARVALHO: But the law is the law
10 and so it will be the law that smoking is
11 prohibited in the places that the statute says
12 effective January 1. It may complicate
13 enforcement if there are no rules, but it
14 doesn't diminish the fact that the prohibition
15 is in effect.

16 DR. JACKMAN: Okay, thank you.

17 DR. EVANS: I guess though, does that
18 period of -- under certain specificity delay the
19 process or the law open to any particular
20 vulnerability? That might not be the case where
21 the rules are in place at the same time all
22 these are instituted.

1 MR. CARVALHO: Well, the law is not
2 vulnerable in the sense that enforcement can be
3 enjoined, I don't believe. It will certainly be
4 the case that things that are less than clear in
5 the statute that the rules might have clarified
6 will be less than clear out there in the
7 population as to okay, well, what are we
8 supposed to do about this or that situation.
9 That is a consequence of the rules not being in
10 place.

11 Although I'm probably diluting
12 myself to think that the rules will replace all
13 the clarity would -- needed to be there. But it
14 certainly -- it would be better if the rules
15 were in place earlier to do that. Yes.

16 CHAIRMAN ORGAIN: Yes.

17 DR. KRUSE: I have one other question
18 about the Breast and Cervical Cancer Screening
19 Program. Will the new Illinois programs when
20 they implement the primary case management, your
21 Health Care Plus, the Illinois Covered effect
22 this program in any way?

1 One specific question being
2 that if providers accept a permit care
3 coordination fee for the PCCM will they indeed
4 then be required to accept patients through this
5 program as well if that patient is already on
6 their panel?

7 MR. CARVALHO: I don't know. I
8 understand the question. I will check into that
9 as well. I believe the person who would be able
10 to answer both the questions is preparing for
11 trial. So I will look into that and I will
12 e-mail the answer. There is no reason to wait
13 for three months for you to get an answer to
14 those questions. So I'll track the answer down.

15 DR. KRUSE: Do you know what JCAR's
16 objections are, what their problem is?

17 MR. CARVALHO: Which one? Smoking or
18 --

19 DR. KRUSE: No, with the Breast and
20 Cervical Cancer Program.

21 MR. CARVALHO: Yes. It is beyond the
22 authority of the Governor to do what he's doing

1 and, therefore, it is a separation of powers,
2 delegation of powers dispute. It is not, as
3 near as I can tell, a dispute over -- at least
4 for most of the people involved -- a dispute
5 over whether the government should be in the
6 business of promoting access to mammography
7 services for women. There may be members of the
8 panel who also were not happy with the idea that
9 the income threshold has been raised to all
10 income levels, but that has not been a part of
11 the discussion that I have heard. They have
12 been trained in terms of power and authority.

13 MR. HUTCHINSON: I had a question,
14 Dave, regarding the Smoke Free Illinois. I
15 think part of the original plan was that IDPH
16 would be launching a 1-800 number and
17 information and for reporting and questions. Is
18 that still on schedule to roll out?

19 MR. CARVALHO: One step at a time. I
20 believe yesterday we posted on our website, and
21 if not yesterday it will be today, a model sign,
22 which would have corresponded to the sign called

1 for in the rules that would include information
2 about a website and a number to call. So at
3 least as of yesterday that was the plan and I
4 don't know -- I think it would be fair to say we
5 were surprised at JCAR's actions, and so we
6 really didn't plan around that happening.

7 So I think we are planning to
8 offer, as I say, for example a model sign even
9 now before the rule goes into effect and that
10 would include a website and a phone number.

11 CHAIRMAN ORGAIN: Again, when the
12 revisions are made, if we can get a notification
13 to make comment, that would be really important,
14 since we don't have a full explanation of what
15 the concerns are about the language currently
16 from the legislative perspective.

17 MR. HUTCHINSON: I had one other
18 question, follow-up, Dave.

19 As I understand it, some of
20 the key partners in this effort, namely, the
21 Cancer Society and the Lung Association, were
22 working with the Department on an educational

1 awareness campaign. I would assume that these
2 organizations are not precluded or inhibited to
3 move forward because of JCAR so -- and I know in
4 the St. Louis metropolitan area we have seen
5 some media spots on this.

6 Is there still a coordinated
7 campaign going to be moving forward? I mean, if
8 people think the rules are hung up, will they
9 think, well, the law doesn't go into effect. So
10 how do we continue to educate the public. And I
11 think our assumption and our experience in other
12 matters that most times when the public
13 understand what the rules are there will be
14 voluntary compliance for the large -- at a large
15 proportion at least. So are those coordinated
16 efforts moving forward?

17 MR. CARVALHO: To be candid, Steve,
18 you know better than I the answer to that.

19 MR. DERKS: Well, I would say that,
20 yeah, we are working. I mean, we are out there
21 very aggressively trying to work -- partnering
22 with local health departments and working with

1 the Department where they want to be involved in
2 that with us and also with local health
3 departments if there is, you know, if they can't
4 be for some reason. So we are definitely moving
5 ahead.

6 And, you know, I guess one
7 thing perhaps to ask the Department is -- that
8 might be helpful to local health departments and
9 in the whole entire enforcement activity post,
10 you know, midnight, December 31st, is whether
11 the Department and the Governor would be willing
12 to be sort of more proactive and sort of -- in
13 the absence of rules clarify to people the law
14 is the law.

15 Otherwise, to your point
16 earlier, I think -- and to your question, Dr.
17 Evans, I mean, in the absence of clarity and --
18 there will be people who will take the
19 opportunity to suggest that this is a very
20 confused situation; that there are changes that
21 need to be made; that, you know, let's not
22 enforce the law. Those who would be sort of

1 opposed to the implementation of law I believe,
2 and again my opinion, will take the opportunity
3 to potentially confuse the situation and cause
4 problems.

5 And I think the Department has
6 an opportunity and the Governor have an
7 opportunity to step forward and to rely on the
8 law that's been passed and signed and be very
9 aggressive about educating people over these
10 next few weeks, even in the absence of rules.

11 MR. CARVALHO: Our press person, who's
12 our spokesman, said yesterday, and it was in the
13 papers, I saw it, that the law supersedes any
14 rules. The law is the law. The law goes into
15 effect January 1. That will be our message.

16 It occurs to me too, since you
17 are probably interested, I don't think that I
18 can't tell you what I think or what I have been
19 told are the issues. Which is that, A, by
20 virtue of prohibiting smoking, there are two
21 types of smoking that some legislators want to
22 see permitted. One is the manufacturers of

1 tobacco want to do quality control of their
2 product, testing of their product. Apparently,
3 that involves people smoking it and, apparently,
4 that involves doing it indoors. And so the
5 concern is that the law will prohibit smoking of
6 tobacco indoors in connection with doing quality
7 control on tobacco products.

8 And then the second relates to
9 research. Apparently, there are universities in
10 the state who in connection with research they
11 are doing about smoking want to be able to have
12 smoking done indoors in connection with that
13 research. Neither of those are exemptions that
14 are in the statute and so I believe there is an
15 effort on the part of some to advocate that the
16 rules create those exceptions.

17 DR. VEGA: David, this is Tim Vega.

18 MR. CARVALHO: Yes.

19 DR. VEGA: Is there really a quality
20 control program in Illinois?

21 MR. CARVALHO: I don't know. I
22 suppose the Latin Kings probably have one for

1 their heroin, too.

2 Yes. Apparently, there is
3 quality control on tobacco products.

4 CHAIRMAN ORGAIN: What did you say,
5 Tim, please?

6 DR. VEGA: I could see if we were in
7 Virginia or something or, you know, a tobacco
8 growing state or manufacturing state. But I am
9 not aware of any manufacturing programs or
10 facilities in Illinois.

11 MR. CARVALHO: Well, there's an
12 expression I used to use at my former employer,
13 which is everything is the way it is for a
14 reason. You won't know the reason until you try
15 to change it.

16 So when this law was enacted
17 heretofore, not well-known, manufacturing
18 process being conducted in the state came to the
19 attention of their legislators.

20 Yes. There is apparently a
21 manufacturing facility of some sort in the state
22 that does engage in product testing of some

1 nature.

2 DR. VEGA: Okay.

3 MS. O'SULLIVAN: I was just making a
4 comment that in our small town newspaper this
5 week there was a report of the City Council
6 meeting where they were discussing the law going
7 into effect and all the bars and restaurants and
8 the ashtrays out, putting signs up and
9 everything. And owners were there saying no,
10 no, no. We don't have to do that yet because
11 the rules aren't in effect. And the City
12 Council said yes, yes, yes. The law is the law.

13 And, you know, when I read
14 that I thought, well, no, why aren't the rules
15 going. We acted on that and we had them going
16 there. But they really -- they really had a big
17 conversation about, well, the rules aren't in
18 effect. We don't have to do it, we don't have
19 to do it. We don't have to do this and we don't
20 have to do that. And this is just a very small
21 community. So, apparently, the word is out
22 there. Well, it only makes common sense. The

1 law is the law. Then it has to be enforced to
2 whatever local rule it is.

3 MR. CARVALHO: But on Steve's specific
4 question about what more proactively could the
5 Department or the Governor do to make clear that
6 the law is the law, I will take that back and
7 bring that inquiry to the right people.

8 CHAIRMAN ORGAIN: Anything else that
9 you needed to share?

10 MR. CARVALHO: Just as you know, the
11 legislature -- you've heard the expression the
12 "continuous campaign." You know, at the
13 national level the presidents in office sort of
14 treat life as a continuous campaign. We now
15 have sort of a continuous budget -- or the
16 continuous session. The legislature remains in
17 session on other matters.

18 The budget has been put to
19 rest since your last meeting. However, the
20 Budget Implementation Act as of early this week
21 had not been signed by the Governor. There are
22 only a couple of impacts on the State Department

1 of Public Health. One relates to the funding of
2 our identified offender program, which you will
3 recall is where we do background checks on every
4 resident of every nursing home to ascertain
5 whether because of some criminal activity in
6 their past they should be put in a single room
7 rather than the double room. And that program
8 costs us \$2 million a year and the funding
9 source that the budget provided for the \$2
10 million is a fund that the statute does not
11 currently allow to be spent in that way. So
12 until the Budget Implementation Act is signed,
13 we don't technically have the authority to spend
14 the money that's been budgeted for the program.

15 Other than that, the update on
16 the House Bill 1254, electronic health records,
17 because of the report, you know, has to finalize
18 on some day kind of leaves the pregnant
19 question, okay, well then what. Because the
20 report just stops where the bill died.

21 And I should tell you the then
22 what, is that the Department of Health Care and

1 Family Services and the Department of Public
2 Health are working together to promote at the
3 state level the activities that would have been
4 promoted by a separate entity under House Bill
5 1254. So it is now a Governor-directed
6 interagency activity and a stakeholder committee
7 will be formed and the State will not just stop
8 its efforts on electronic health records. Those
9 will move forward. And I can stop there.

10 Yes.

11 MS. O'SULLIVAN: What's going on with
12 the Patient Safety Division and working in that
13 area?

14 MR. CARVALHO: Okay. The Patient
15 Safety Division Chief has been hired and has
16 started. Her name is Mary Driscoll. She was an
17 administrator, nurse by training, but was an
18 administrator at Cook County Bureau of Health
19 Services for many years.

20 I knew her then. Since I
21 hired her I now discovered that everybody knows
22 her because everywhere I go people say, oh, Mary

1 Driscoll. That's great. Except for Peter over
2 here who said --

3 DR. ORRIS: You're making a tape.
4 It's on the record.

5 MR. CARVALHO: I know. I'm making
6 that up. Peter was delighted, too. Just sad
7 for the loss at the Bureau of Health Services.

8 We have authority in the new
9 budget to spend money for the patient safety
10 division, which is nice, and so we are in the
11 process of assembling what we hope to be a staff
12 of five multi-disciplinary persons to bring to
13 conclusion several projects that have been
14 ongoing, notwithstanding their lack of funding,
15 those being the Hospital Report Card Act and the
16 Consumer Guide to Health. And then we will also
17 bring about the Adverse Health Care Event
18 Reporting Law.

19 The rules, you'll recall,
20 because you approved them, went into effect
21 earlier this year to lead the data collection
22 for the Hospital Report Card Act and the

1 Consumer Guide to Health. But now the affected
2 facilities have to actually collect the data and
3 send it to us and we have to clean it up and
4 make sure that it's correct with those entities,
5 and then we will put it on the website in the
6 formats prescribed.

7 So the ASTCs and the hospitals
8 have begun providing data in the new format as a
9 pilot and test phase these last -- the last and
10 the current quarter. It will be live data
11 provided starting January 1. So the first
12 quarter data will be to us in April. We will
13 work with the facilities to make sure that it's
14 accurate in May. And we will go final in June
15 and the reports should be available in July or
16 August.

17 Thereafter, every quarter we
18 will have hospital record cards and Consumers
19 Guide to Health information on our website, and
20 then it will go to the public and we will be
21 thinking about what new things to do there.

22 In addition to staffing up the

1 division and completing those projects, we will
2 also be working with the Governor's office and
3 HFS on electronic prescribing initiatives, and
4 those should be announced in the first quarter
5 of next year.

6 So personally since that
7 division reports to me, I am very happy to see
8 that we now have staff and the funds, and we
9 will be able to complete those projects.

10 CHAIRMAN ORGAIN: Peter.

11 DR. ORRIS: Two little items in the
12 environment end of the world. Representative
13 Nekritz had a bill for monitoring environmental
14 toxins, similar to some of the stuff going on
15 nationally. It passed but it lost in the
16 Governor's amendatory vetoes in the switching of
17 the funding. So I'm wondering if we couldn't at
18 some point know where that's going or if it's
19 going or if there is any thinking about the
20 funding on that?

21 MR. CARVALHO: Certainly. I could
22 find out from my legislative affairs person the

1 bill number if you don't know it.

2 DR. ORRIS: I don't know.

3 MR. CARVALHO: And that's Nekritz's
4 bill?

5 DR. ORRIS: Yes. It's on
6 bio-monitoring.

7 And then the one other one
8 was -- I think it's Representative May has a
9 bill about the Department of Public Health
10 getting funding for a staff person responsible
11 for child environmental health in the state and
12 there were a lot of different discussions about
13 defining that, where, etc., and I would just
14 like to know what's going on from the other end
15 of that at some point.

16 MR. CARVALHO: Okay. As I said, Madam
17 Chair, if it's okay with the Board, what I would
18 like to do for the several questions that I have
19 received that I don't know answers to is to try
20 to put something together and distribute it to
21 you by e-mail rather than wait for the next
22 meeting because it would be stale by then.

1 CHAIRMAN ORGAIN: Thank you.

2 MR. DERKS: Madam Chair, I know this
3 group is advisory to the Director, but I guess a
4 comment maybe and a question to David.

5 First in the comment,
6 regarding Senate Bill 500 and the Smoke Free
7 Illinois Act, other state departments of public
8 health have taken the opportunity when the
9 law -- has run up to the law and post
10 implementation of those laws taken the
11 opportunity to be in a position of strength in
12 terms of data and monitoring the impact of the
13 law so that when people would step forward and
14 make claims that are unsubstantiated in terms
15 of, you know, perhaps economic harm and/or lack
16 of public health benefits of the law that the
17 Department is in a position to be able to
18 respond on behalf of the State of Illinois and
19 the General Assembly regarding the law.

20 So one comment would be, I
21 guess, and maybe it's also a question, would
22 this body be comfortable encouraging the

1 Director to, in fact, find the resources or set
2 aside the resources to conduct and put in place
3 economic impact research as well as, you know,
4 public health benefit research that can be
5 relied upon. Because this law will be under
6 attack for, I'm sure, this next General Assembly
7 session as well as, perhaps, sessions to come.
8 So that would be one thing.

9 And then, perhaps, related to
10 that, David, is I guess what resources does the
11 Department have available for education
12 implementation under the law at this point in
13 your understanding of it?

14 MR. CARVALHO: I will try to be my
15 usual circumspect self because you hit an
16 enormous hot button of mine today with the
17 phrase "find the resources." Because -- I guess
18 I won't be circumspect. I am so tired of people
19 telling us to find the resources to do
20 something. When we get an appropriation budget
21 from the General Assembly, it's very specific.
22 It says here what you have to do, XYZ, and then

1 the legislators and everybody else tells us to,
2 quote, find the resources to do something else.

3 We already asked for the money
4 that we were allowed to ask for to do what we
5 have already been told to do and when something
6 new gets added on, quote, to find the resources
7 is, you know, short of --

8 MR. DERKS: I'll rescind the phrase.
9 I didn't mean to hit a hot button.

10 What I meant was did the
11 Department request and was it granted I guess
12 would be more appropriate. And if not, are
13 there any resources available and if there are
14 not, you know, perhaps this is another thing we
15 put in a letter to the Governor encouraging him
16 to find the resources for the Department.

17 MR. CARVALHO: In terms of what we do
18 have, that I don't know and that's something
19 that I can find out.

20 In terms of additional
21 resources, I think I have been fairly
22 straightforward with the Board that we do not

1 make a public dissemination wish list request
2 for our budget. We have an internal dialogue
3 that we ask for, what we agree to ask for. So I
4 don't want to go into what have we asked for.
5 The only thing I can go into is what we -- what
6 you see us ask for. That is just a reality of
7 how budgeting is done within state government.

8 So -- as with much of what's
9 in your -- I'm not -- clearly, your letter is
10 your letter. I am not trying to make a
11 suggestions. Certainly not a suggestion that
12 you don't ask this be done. If you would like
13 to ask that funds be identified for these types
14 of activities, I think that's entirely within
15 the role of the Board to do.

16 I would like an opportunity to
17 find out what we do have. I don't know. That's
18 just not my area. But if you would like us
19 to -- if you would like that -- if you would
20 like to make an -- if you would like to urge,
21 strongly urge, recommend that additional
22 resources be provided to the Department for XYZ

1 activity, I think that's the type of advice you
2 are historically given and you just need to put
3 a number on it and put some nouns on it what do
4 you want to do.

5 CHAIRMAN ORGAIN: I would have to
6 comment that this body is advisory to the
7 Department, and so as the budget is being
8 developed, it would be useful for us to have an
9 idea about that time frame.

10 There's an enormous amount of
11 resource persons on this Board in regards to
12 health issues, etc., that could be utilized. I
13 would just recommend that the Department make
14 use of the resources that we have at the Board.

15 Having said that, I think we
16 probably can go on to item number -- the next
17 item on the agenda, seven and eight, which would
18 speak to that in regards to -- in regards to the
19 current member bios who you have --

20 DR. ORRIS: Could we stay with this
21 just for a moment before we get to the next?

22 Would it be acceptable at this

1 point, since we have asked either to look into
2 what's available, to express our opinion that
3 monitoring of this law both economically and
4 health-wise would be important, staying out of
5 the financial aspects of it, and then we get the
6 report back and we might want to be more
7 specific. Is that -- I would hate to move out
8 of this area without expressing that from the
9 Board.

10 MR. CARVALHO: I don't want to be
11 misunderstood. I think monitoring the impact of
12 economic health is a good thing. I don't know
13 what we currently have the resources to do. So
14 I am not advocating against it. I just want to
15 be cautious about saying we are going to do
16 something that we currently don't have the
17 resources to do. I just don't -- we may have.
18 I just don't know.

19 CHAIRMAN ORGAIN: So at the point in
20 which there is a significant amount of
21 discussion for budgetary items at the department
22 level, when does that occur?

1 Because maybe at our next
2 meeting we can get an idea and that could be
3 brought and we can make some suggestions and
4 recommendations in regards to use of funds,
5 where we see some needs as we are in our area.
6 So I think that might be useful for us to
7 participate in at some level.

8 MR. CARVALHO: I think because of the
9 extraordinarily delayed budget from this last
10 fiscal year we are in an unusual situation this
11 fiscal year that we are not -- we have not
12 already submitted a budget. Historically, we
13 would have already submitted a budget by now and
14 we have just begun the preliminary discussion
15 with the budget office.

16 This being a public meeting,
17 it wouldn't surprise you that the departments
18 are not encouraged to discuss all the in's and
19 outs of how that budget process works in public.
20 But I can say as a general matter that the
21 Office of Budget is interested in what would
22 your budget look like if it had the same amount

1 of money this year as last year. What would
2 your budget look like if it had a fraction of
3 what it had last year. What would you be
4 looking for if you were able to have a fraction
5 more than last year.

6 And then I think Dr. Whitaker
7 has always indicated and Dr. Arnold will
8 probably indicate the same that notwithstanding
9 those rules we have always come in with and
10 here's a list of some other things that we might
11 be interested in seeing funded for your
12 consideration. So that's the process that
13 usually has already taken place and is just
14 beginning now because of the delays in getting
15 the last budget done.

16 CHAIRMAN ORGAIN: Kevin.

17 MR. HUTCHINSON: It seems, obviously,
18 that the smoke free issue has been an important
19 policy issue for the Board for many years. And
20 based on our discussion this morning, the two
21 possible approaches that we may have in lieu or
22 in view of the recent action by JCAR we may want

1 to amend our language on the cover letter to our
2 report and really drill into this issue of
3 encouraging IDPH to move forward and some of the
4 things that Mr. Derks brought forward.

5 Another option may be that
6 this Board authorize our Chair, in consultation
7 with Mr. Derks, to prepare a stand-alone letter
8 to the Director and to the Governor saying in
9 view of this -- and really punch it out with a
10 little bit more specificity in view of this
11 anticipated and probable confusion on the part
12 of the public because of this delay in the
13 rulemaking process and that would give it a
14 little bit more specificity.

15 CHAIRMAN ORGAIN: I would like to move
16 that. I can't move it but move that, please.

17 MR. HUTCHINSON: I move that a letter
18 be prepared by our Chairperson in consultation
19 with Mr. Derks and Mr. Carvalho, as necessary,
20 to address the concerns that were expressed
21 during our meeting.

22 DR. ORRIS: Second.

1 CHAIRMAN ORGAIN: Consensus. Any
2 discussion?

3 MR. CARVALHO: I have got one question
4 on the resolution.

5 Steve, what is ACS' position
6 on those exemptions that the legislature is
7 seeking us to add to the rules?

8 MR. DERKS: Well, we just heard about
9 them at the Rules Committee meeting, so I am not
10 sure I can speak for my Board. You know, I
11 don't think when it comes to manufacturing
12 activities that we would be in opposition to
13 that. And I think the universities are looking
14 for the opportunity to do research, I think, in
15 the right controlled environments and limiting
16 exposure to secondhand smoke that ACS could, I'm
17 sure, be neutral on these items.

18 MR. CARVALHO: I just want to make
19 sure we weren't putting you in an awkward
20 position. If the Board wrote a rule saying
21 don't make any changes and, in fact, ACS is okay
22 with the changes here.

1 MR. HUTCHINSON: Just to clarify, my
2 intent was not for the Board to make comment on
3 the issues of the rules but what -- because the
4 rules have been delayed that we encourage IDPH
5 and the Governor to continue to clarify that the
6 law is in effect and to perhaps redouble
7 educational efforts because now we have an
8 impediment to clarity on the part of the public
9 because of the rulemaking. So this segregates
10 the idea of the rules and commenting on these
11 proposed rules, which we frankly don't know. We
12 haven't seen what the objections are and they
13 may be well-founded and -- but I don't know.

14 But what we do know and
15 there's good reason to believe that they are
16 based on comments from Ms. O'Sullivan and others
17 that there's already some confusion that's going
18 to be emerged. That's what I would think the
19 letter would address.

20 DR. ORRIS: You didn't mean to leave
21 out the monitoring aspect.

22 MR. HUTCHINSON: No, sir. That would

1 be included, too.

2 CHAIRMAN ORGAIN: Jerry.

3 DR. KRUSE: One word about the
4 monitoring. You know, you mentioned earlier
5 about us making a recommendation to the
6 department regarding the budget needed to be
7 done in an orderly process. I would agree with
8 that. Because there are many things that are in
9 the interest of the public's health and we
10 probably ought to prioritize those things.

11 When we think about the
12 suggestion that was -- that Mr. Derks made,
13 obviously, proving economic benefit is going to
14 take a long, long time, it's going to be very,
15 very expensive if we do it in a real scientific
16 way.

17 And quite frankly, this bill
18 was passed. It's not a demonstration project.
19 It's the law for the entire state. So the state
20 has already done a review of the health benefits
21 of this and has made a strong statement about
22 that already.

1 Now the economic benefits or
2 detriments, as the case may be, is a bit of a
3 different story, and it might be useful
4 information. But I think we could only -- only
5 might get ourselves in some trouble if we don't
6 go down the road of trying to prove the health
7 benefits, which again if we did it properly
8 would be very, very expensive, I think.

9 CHAIRMAN ORGAIN: Okay. If I could
10 comment that -- one, if there is any additional
11 discussion on that.

12 DR. ORRIS: I think a Board like this
13 ought to express itself positively towards
14 evidence based evaluation of public health
15 initiatives in general. I think we are making a
16 general statement about monitoring here. I
17 don't disagree with you at all on your estimate
18 about if you did it entirely, etc., etc. But I
19 think somebody ought to evaluate that. There
20 might be other ways of assessing it and I think
21 we ought to in general pledge ourselves toward
22 monitoring public health initiatives because we

1 do so much just on our own gut without having
2 that space.

3 DR. VEGA: Madam Chair.

4 CHAIRMAN ORGAIN: Yes, Tim.

5 DR. VEGA: I think in kind of
6 listening to the discussion I would think that
7 the Illinois Chamber of Commerce would be very
8 interested in monitoring and doing some of this
9 leg work. So even just -- I agree with -- well,
10 I'm sure folks here said we want to be as
11 evidence based as possible and perhaps just
12 again sending them a letter saying we are very
13 interested in the impact of this as it goes
14 forward. Is it something that you monitor or
15 you would be able to do and maybe utilize their
16 resources, that is in their best to know whether
17 this is beneficial on that also.

18 MR. DERKS: Just as a point of
19 transparency that the Illinois State Chamber of
20 Commerce opposed the law.

21 CHAIRMAN ORGAIN: Well, thank you.

22 DR. EVANS: I would want to comment --

1 just following up on something I was thinking
2 about and Dr. Vega put it in terms. I too would
3 support the evaluation just in terms of its
4 value and the concept of it. I think the Board
5 ought to avoid though expressing its interest in
6 evaluation to the extent that it in any way
7 implies doubts about the value.

8 CHAIRMAN ORGAIN: Okay.

9 DR. EVANS: And I think that that has
10 to be done because you don't want to stress
11 evaluation implying that there is some concern
12 that it might not prove beneficial. So I think
13 that that wording needs to be done very
14 carefully. Peter, I certainly ascribe to your
15 terminology, but I think the way the concern is
16 expressed is very important.

17 CHAIRMAN ORGAIN: Okay. If there is
18 no more discussion, definitely take into
19 consideration the comments that have been made
20 in regards to the stand-alone letter ensuring
21 that what the language reflects that it's a
22 public health benefit and that we should monitor

1 those public health benefits and ensuring that
2 the public is aware of the fact that the law
3 goes into effect on January 1st. Even though
4 the rules are not there, I think those are the
5 key points that we want to make. Did I sum it
6 up?

7 MR. DERKS: Yes.

8 CHAIRMAN ORGAIN: Then if there are no
9 objections, then let's -- then there's a
10 consensus on those points.

11 Okay. Thank you.

12 MR. DERKS: Madam Chair, I'm sorry to
13 delay.

14 Point of personal privilege, I
15 just would like to thank you, Madam Chair, as
16 well as the members of the Board for your
17 support on this law throughout this process and
18 the Department also. And would ask for your
19 continued vigilance to the extent that that's
20 appropriate from an advocacy perspective of this
21 body.

22 But we are on the precipice

1 now of implementation of the most comprehensive
2 law in the nation, and it's a tremendous
3 opportunity for this state to sort of -- and the
4 public health community to stand up and be proud
5 of something and to have it be a model for the
6 rest of the country. And I thank you for your
7 tremendous support of the whole campaign and
8 effort and your personal interest in it and all
9 the advocacy organizations and I hope we can see
10 it stay in place and strong. Thank you.

11 CHAIRMAN ORGAIN: Thank you. And I do
12 want to make an additional comment because as we
13 do the -- as we monitor how the rules come out,
14 I would certainly want to make sure that we
15 monitor the ethical basis, which they want to do
16 this research in regards to the tobacco products
17 and its impact on those persons who may be
18 involved in that testing and research, etc. So
19 thank you.

20 MR. McCURDY: Madam Chairperson,
21 that's a point well made.

22 MR. DERKS: From an ethicist.

1 MR. CARVALHO: It should also be
2 noted, however, that all of us involved in
3 health and public health realize that all of our
4 good intentions, good arguments, good data, all
5 of that would not have led to this far without a
6 huge financial commitment by the American Cancer
7 Society and other advocates. Because oftentimes
8 just being right isn't enough. So I think we
9 need to thank ACS and others who contributed in
10 a financial way to the advocacy to get this
11 funded.

12 CHAIRMAN ORGAIN: Absolutely. Thanks
13 for the continued vigilance from them.
14 Particularly the ads are wonderful.

15 MR. HUTCHINSON: Just a question or
16 comment just directed to Dave and it does
17 tangentially relate to our discussion on
18 monitoring.

19 But Dave, I know that IDPH was
20 successful in getting a significant grant from
21 CDC, I believe, on data and data analysis and if
22 maybe you could generally update us on that.

1 That was part of our SHIP legislation. It's an
2 identified concern that the Board had. I think
3 IDPH took that and seized on an opportunity and
4 leveraged that into, I think, a pretty
5 comprehensive project.

6 And related to that there may
7 be -- or I would -- again, I would already
8 expect and just encourage you to continue as we
9 look at the structure of that project and
10 looking at various databases that there may be
11 opportunities to look in the various disease
12 registries and other things to this issue of
13 tobacco and wellness.

14 And some of the things that we
15 are talking about monitoring I don't know if
16 it's too far a stretch but there may be some
17 existing data systems that we could have that
18 filter on where we are looking at possible
19 impact associated with admission rates or other
20 things with that data project. That's a stretch
21 but what is true is that there is a big project
22 that's underway in looking at our data system

1 here in Illinois.

2 MR. CARVALHO: All right. I can
3 handle that in about sixty seconds.

4 CHAIRMAN ORGAIN: Good.

5 MR. CARVALHO: As much as I hate the
6 phrase "find the resources," sometimes we do
7 find resources. And in particular, we apply for
8 grants and we get them. We got a grant from the
9 CDC for five years for \$250,000 a year.

10 But we called it the Health
11 Data Dissemination Initiative. It's an effort
12 to compliment what we ultimately will be doing
13 under Senate Bill 547 to look at the various
14 data streams that we and other agencies within
15 the state generate or collect and improve the
16 way that we disseminate them and the basic query
17 systems.

18 Obviously, this is -- you
19 know, in addition to the other ways we
20 disseminate data, we will continue to
21 disseminate data to researchers and to MOUs.
22 But a web-based query system with publicly

1 available data would be of great use to a lot in
2 the public health community.

3 Elissa Bassler and IDPHI is
4 assisting us with this grant, and I don't think
5 she likes it when I describe it this way, but
6 the idea is IPLAN data set on steroids just
7 really improved a web-based query access to our
8 and other agency's health data. And we
9 anticipate having an advisory committee and we
10 anticipate having a State Board of Health
11 representative on that advisory committee.

12 CHAIRMAN ORGAIN: Thank you, David.

13 MR. HUTCHINSON: Yes. Thank you,
14 David.

15 CHAIRMAN ORGAIN: If there are no
16 other additional questions, then we certainly
17 can then now move to Item No. 7 and 8. We can
18 take them together in regards to the agenda.

19 So I would have to ask. We
20 are not at our full complement of Board members,
21 and we also have to make clear the terms of
22 office for the current Board members.

1 So if you have not had an
2 opportunity to do your own individual bio, get
3 them to Cleatia. I would ask you to -- if you
4 could do that, and then David, if you could
5 address that issue.

6 MR. CARVALHO: Sure. Yes.

7 MS. SULLIVAN: On the bio issue, could
8 she please send us the old ones we sent.

9 CHAIRMAN ORGAIN: Okay.

10 MS. O'SULLIVAN: Or that's the
11 problem, that we don't have them. I mean, I got
12 all confused on the e-mail that came out on
13 that.

14 MR. CARVALHO: Well, I will address
15 that and then Cleatia, if you want to add.

16 There's two things going on.
17 As you know, we have been in transition in the
18 custodial -- custodian of the records. But
19 also, every time that we seek to have one of you
20 reappointed we do need a new form, and we need
21 to submit it. We met recently to go over the --
22 where we stood in terms of vacancies and in

1 terms of carryover positions.

2 As you know all too well from
3 your past service, unless you actually resign
4 you continue to be a member of the board, even
5 if your term is expired unless and until someone
6 is appointed to succeed you. And you also know
7 that we have various statutory silos in which
8 you each are to be put. And some of them even
9 involve -- some of you change jobs. Some of you
10 have gotten older.

11 We at all times need to make
12 sure there is somebody over 60 regardless. They
13 aren't appointed because they are over 60 but
14 somebody has to be over 60 so...

15 DR. ORRIS: You're safe.

16 MR. CARVALHO: We appreciate you all
17 continuing both to age and live and that
18 requirement has been met.

19 We put that all together in a
20 grid so that we can identify who we needed what
21 from in order to process them and to continue
22 the staggered nature of the Board.

1 And we also wanted to give the
2 new Director an opportunity to look it over and
3 to make some recommendations on the vacant
4 positions. And it has been our recommendation
5 to reappoint everybody whose position has been
6 expired. There may be some shifting of the
7 categories to keep that in sync with the
8 statute.

9 Now, it's just a matter of
10 collecting the paperwork. I think I have said
11 this to you all before but just another
12 reminder. The part that asks for information
13 relating to your voter registration is just part
14 of the form that the Governor's office has for
15 us.

16 As you know, Illinois is not a
17 declare a party registration state like some
18 other states. So there's a request for
19 information that you have registered to vote. I
20 don't honestly know the reason, but I know it's
21 not to ascertain what your party is because
22 that's already -- that is not part of the

1 registration process. Maybe it's just inspired
2 by civics. Want to make sure everybody on the
3 Board is a participant in the civic parlance of
4 their community.

5 In any event, that is why
6 we're asking for it and then we want to process
7 those so that we can get everybody's terms
8 renewed.

9 DR. KRUSE: Have those been sent to
10 us?

11 MR. CARVALHO: Cleatia, have those
12 been sent to the Board members?

13 MS. BOWEN: Not all of the bios have
14 been sent. In order for us to keep our records
15 current and in the event there is ever a review,
16 it would be good policy to have current bios on
17 file. I only have about -- I think I have
18 received -- I've received four or five bios. So
19 I am asking everyone to please e-mail me your
20 current bio and I'll put it in the file.

21 MR. CARVALHO: There's two different
22 questions, Cleatia. And I don't disagree that

1 it's nice to have a current bio on everybody.
2 But I think the specific question was for
3 everybody for whom we need a form in order to
4 process the membership, have they received a
5 form to fill out?

6 MS. BOWEN: No. They have not
7 received a form. I still have the old forms
8 that they had filled out under their previous
9 stay on the Board.

10 MR. CARVALHO: And that's useful for
11 bio information but I mean for processing people
12 going forward we are going to need new forms,
13 aren't we?

14 MS. BOWEN: I haven't been informed of
15 that, but I will check into that, David, to see
16 if we need new forms. I wasn't told not to use
17 the old forms, so I will make note of that.

18 MR. CARVALHO: We'll clarify and we'll
19 send out new forms for anybody we need to get
20 new forms from.

21 MS. O'SULLIVAN: And so could we get a
22 copy of our old bios?

1 MS. BOWEN: If I have a copy of your
2 old bio in your file, I will e-mail it or I'll
3 put it in the mail to you.

4 MR. CARVALHO: And their old forms,
5 too.

6 MS. BOWEN: And the old forms also.

7 DR. ORRIS: I took that request to
8 mean just -- this is Peter -- just for the last
9 year or so changes. Can I just send you my CV?
10 Is that okay?

11 CHAIRMAN ORGAIN: One pager.

12 DR. ORRIS: Thank you.

13 MR. CARVALHO: I think -- am I the
14 only lawyer here?

15 It's funny. One of the things
16 that they say at law school is your resume
17 should never be more than one page long until
18 you have been appointed to the Supreme Court.
19 So I'm always amused at the CVs that we get in
20 that are longer than most of the papers I wrote
21 in college. But yeah. For this purpose we are
22 looking for a one pager.

1 At some point if you'd like --
2 by the way, do we have that on our website and
3 if we don't is that something the Board would be
4 interested in where we have the membership of
5 the Board that we also have a little blurb about
6 who each of you are and what you do. I don't
7 know if we do that now. Do we, Cleatia?

8 MS. BOWEN: I don't believe we do. I
9 believe we just list who is on the Board.

10 MR. CARVALHO: Okay. So if you would
11 like that, we can do that and that probably
12 should again be relatively short.

13 CHAIRMAN ORGAIN: The additional
14 thing -- I'm glad you mentioned that in terms of
15 the website. The website is cumbersome in terms
16 of just going directly from IDPH to the Board.
17 And so if that could somehow be easier to go in
18 terms of a link from IDPH to State Board, if you
19 can look into that, that would be useful. I
20 have done that so many times. I have to go
21 circuitously to try to find the Board, if
22 someone can take a look at that.

1 MR. CARVALHO: Okay. I should say, as
2 you know, we have 205 programs and so the
3 compromise we have made, except with rare
4 exceptions, there's four or five kind of hot
5 buttons on the front page. But with rare
6 exception everything is the alpha list, the A to
7 Z list. And so almost anything you want to find
8 in the Department you click on A to Z. Then you
9 click on the letter of the alphabet and then you
10 see your choices. That's pretty much across the
11 board.

12 Is that the cumbersome part
13 you're talking about?

14 CHAIRMAN ORGAIN: It's not there.

15 MR. CARVALHO: Oh, it's even harder.

16 CHAIRMAN ORGAIN: When you click on A
17 to Z, it's not there.

18 MR. CARVALHO: Okay. Well, let's -- I
19 will doublecheck it. You know, it may be
20 something as simple that you are under B instead
21 of S or you're under S instead of B.

22 DR. KRUSE: It should be in both

1 places and under T, actually.

2 MR. CARVALHO: Okay.

3 CHAIRMAN ORGAIN: Okay. I would like
4 to -- in terms of the new items, in terms of new
5 things, just go back over some things that we
6 may have done earlier that need to be refined,
7 and the first thing I would like to go to is the
8 health summary.

9 The health summary does not
10 include all of the changes that we made to the
11 bylaws. We also made a change to Article 5,
12 Section 55 --

13 MR. CARVALHO: I'm sorry. What was
14 the health summary?

15 CHAIRMAN ORGAIN: The State Board of
16 Health summary.

17 MR. CARVALHO: Oh, the meeting
18 summary.

19 CHAIRMAN ORGAIN: So we also made a
20 change in Section 5 -- Article 5, Section 55
21 that needs to be reflected. And you do actually
22 have that in your revised bylaws. That needs to

1 be reflected in the meeting summary.

2 MR. CARVALHO: Can you make that
3 change, Cleatia?

4 MS. BOWEN: Okay. What of -- Section
5 55 --

6 CHAIRMAN ORGAIN: Article 5, Section
7 55.

8 MS. BOWEN: What do you want to add in
9 there?

10 CHAIRMAN ORGAIN: The change we made
11 in the bylaws indicates the member is present to
12 conduct business if attending a meeting in
13 person or by video -- or by audio or by video
14 conference.

15 MS. BOWEN: Audio or video.

16 CHAIRMAN ORGAIN: It's there already,
17 Cleatia.

18 MR. CARVALHO: It's in the bylaw
19 change. It just needs to be in the summary of
20 what -- if they made that change at the meeting,
21 the meeting summary should note that they made
22 that change at the meeting.

1 MS. BOWEN: Okay.

2 CHAIRMAN ORGAIN: The additional thing
3 that is in our bylaws we have one committee that
4 is regularly mentioned and that is the Rules
5 Committee. We know that we also have a Policy
6 Committee. So the question that we would need
7 to ask for 2008 of what additional committees --
8 what additional committees you would like and
9 then we need to constitute membership of those
10 committees.

11 Tim, we can hear you.

12 DR. VEGA: Oh, that's not me.

13 DR. JACKMAN: That's not me.

14 MR. CARVALHO: Have we got a crossed
15 wire here?

16 CHAIRMAN ORGAIN: Yes. Sorry, Tim.

17 DR. VEGA: I did have a chance to
18 reflect though. I thought, you know, with the
19 state -- I thought it was Peter who was talking
20 about quality of mammography but the quality and
21 safety are very -- they are synonymous in the
22 real world, and I thought a Quality Safety

1 Committee to interface with a new position that
2 Steve was talking about would be a good idea to
3 kind of say as we go through these agendas
4 looking at things from a quality or -- the
5 quality of the providers and the safety of our
6 citizenship.

7 CHAIRMAN ORGAIN: Some of that was
8 discussed in the Policy Committee, Tim.

9 DR. VEGA: Okay.

10 CHAIRMAN ORGAIN: Ann.

11 MS. O'SULLIVAN: I just had a
12 question. It seems to me like it would help the
13 Policy Committee to work if we had regularly
14 scheduled meetings also like we discuss at the
15 beginning of the year. We get -- I get to the
16 point where it's time to schedule it and then it
17 takes a month to get it scheduled and then they
18 just don't happen.

19 So could I work with Cleatia
20 to set up something similar to the Rules
21 Committee. Like survey the group. I could
22 suggest a couple -- like a sequence or

1 something. I think that would help us get our
2 work done because it's too hard to schedule
3 meetings off the cuff.

4 CHAIRMAN ORGAIN: What I would like to
5 do is take the Rules Committee first. Raise
6 your hand if you're on the Rules Committee and
7 would like to remain.

8 MR. CARVALHO: Why don't you read off
9 the names so it's in the transcript.

10 CHAIRMAN ORGAIN: That's David
11 McCurdy, Caswell Evans, Karen Phelan and Peter
12 Orris are the Rules Committee, and I'm on the
13 Rules Committee. That's the Rules Committee.

14 Anybody interested? Are all
15 of you willing to remain?

16 RESPONSE: Yes.

17 CHAIRMAN ORGAIN: Thank you.

18 Now, the Policy Committee.

19 Anybody who is on the Policy Committee?

20 That's Jerry Kruse, Jorge
21 Girotti, Ann O'Sullivan, Kevin Hutchison and
22 Karen Phelan.

1 Tim, are you on the Policy
2 Committee?

3 DR. VEGA: No, but I would be glad to
4 join.

5 CHAIRMAN ORGAIN: Okay.

6 MR. McCURDY: That makes ten.

7 CHAIRMAN ORGAIN: All right. So those
8 are the two committees that we currently have.

9 Are there any ideas about --
10 we did have tobacco. We're sort of -- we have
11 accomplished a goal in that regard. It was a
12 standing committee for the time period.

13 And so what I would like to do
14 is give some thought to that, if there is any
15 additional -- any additional subcommittees that
16 we should need from the Board's perspective.

17 Kevin.

18 MR. HUTCHINSON: I am not clear. If
19 Dr. Vega's suggestion for a Patient Safety
20 Committee, is that going to be covered under the
21 auspices of the Policy Committee or do we --
22 would that be stand -- I mean, we have certainly

1 been concerned under the policy level.

2 But if, Tim, you could clarify
3 it. I was getting the impression that you were
4 interested in more ongoing dialogue and
5 interplay with the new Division of Patient
6 Safety at IDPH.

7 DR. VEGA: Well, I think the whole
8 safety issue is very important. So it's -- for
9 me it's not so much -- it's not so important to
10 have a freestanding committee as long as the
11 function is there and that we review it
12 quarterly with our meetings. That's all I was
13 trying to achieve.

14 MR. HUTCHINSON: That's great. I
15 don't think we need more committees if we don't
16 need more committees here. But I didn't know if
17 our intent here was meeting your suggestion.

18 DR. VEGA: Appreciate it.

19 CHAIRMAN ORGAIN: All right. Okay.

20 And then I would just like to
21 reiterate our request, if it's acceptable, that
22 maybe if we could see the last year's budget

1 while the new one is in process from IDPH. That
2 would be useful to make some recommendations, at
3 least.

4 And then, again, Dr. Whiteley
5 from a transcript perspective was at the
6 meeting -- last meeting. So that not only in
7 the meeting summary but also in our transcript
8 that Dr. Whiteley was present.

9 Now are there any -- Ann.

10 MS. O'SULLIVAN: The report to the
11 Governor and the letter.

12 CHAIRMAN ORGAIN: Okay. Thank you.

13 So the letter with its
14 changes, if you can repeat the changes.

15 MR. CARVALHO: Sure. The changes in
16 the letter, the typo in the second paragraph and
17 then the SB 500 paragraph would read. SB 500,
18 the Smoke Free Illinois Act is under threat of
19 being eroded by proposals to include exemptions
20 for casinos and other entities. The SBOH
21 strongly urges the Governor to voice his
22 opposition and to veto any revision to SB 500

1 that we can support in this piece of legislation
2 and then the last sentence remains the same.

3 MS. O'SULLIVAN: I move.

4 DR. ORRIS: Second.

5 CHAIRMAN ORGAIN: Been moved and
6 seconded. Any additional discussion?

7 Okay. So the letter goes out.
8 Thank you very much. And we will work together
9 to get it signed.

10 MS. O'SULLIVAN: Thank you, David, for
11 getting that all finalized and everything. We
12 are still ahead of time.

13 MR. CARVALHO: Yes.

14 CHAIRMAN ORGAIN: Is there any new
15 business? Karen.

16 MS. PHELAN: I would like to make an
17 adjustment to the summary Rules Committee
18 meeting announced on November 15 to note that I
19 was present at the meeting.

20 CHAIRMAN ORGAIN: Thank you.

21 MR. HUTCHINSON: Kevin, Madam
22 Chairperson, I have a very, very small comment,

1 and it was just as a result of my own nubilant
2 (phonetic) and idle moment, and it may not be
3 the problems of this Board.

4 But I was looking at the
5 Department's letterhead and I came down to the
6 bottom of the page and it said "Improving Health
7 One Community At A Time."

8 And I just -- at some point I
9 would be curious as to how the Department got
10 there because it seems to me the role of a state
11 health department is not to necessarily improve
12 health one community at a time. It seems to me
13 the mission is a little larger than that. So I
14 leave that as a comment.

15 I don't want to open that to a
16 discussion. I just found that a little curious
17 when I was -- you know, sometimes you read
18 something and you just read it and you pass over
19 it. Other times you look at it and say, now
20 what does that mean.

21 MR. CARVALHO: I can handle it in 30
22 seconds.

1 CHAIRMAN ORGAIN: All right.

2 MR. CARVALHO: When Dr. Whitaker came,
3 he asked that the letterhead be changed to say
4 that to reflect his approach that he was going
5 to be a state public health director that got
6 into every community. It didn't just pronounce
7 from Springfield.

8 DR. ORRIS: Good lead. I was going to
9 suggest to refer that to the new director.

10 MR. McCURDY: There you go.

11 CHAIRMAN ORGAIN: Any additional items
12 for the Board to consider?

13 MS. BOWEN: Just one other thing I
14 guess for David --

15 CHAIRMAN ORGAIN: Who's speaking?

16 MS. BOWEN: This is Cleatia --

17 CHAIRMAN ORGAIN: Thank you.

18 MS. BOWEN: -- Bowen in Springfield.

19 Dave, I got a memo from Mark
20 Gibbs, and he wanted me to bring to your
21 attention about the alternative health care
22 delivery model report and ask that you get it

1 signed by Dr. Orgain today.

2 MR. CARVALHO: That is what she has
3 been doing. Thank you.

4 MS. BOWEN: Okay.

5 MR. CARVALHO: She's been
6 multi-tasking.

7 MR. McCURDY: This is actually not new
8 business but it's a follow-up to your comment
9 earlier about that kind of ethical basis for the
10 research by universities.

11 I probably out of order said
12 to the side to Dr. Girotti I wonder what IRB
13 approved that. At the local level I mean that's
14 only jaw boning. But the other aspect of it is,
15 you know, we also, I should think, would have a
16 public health interest in the question of why
17 would we permit people to be put at risk for the
18 sake of that research and, again, there's
19 probably more to the research than we know
20 about.

21 MR. CARVALHO: I do not know about the
22 specific research, but I can imagine, for

1 example, if you were running a research trial on
2 smoking cessation and so you had people who were
3 smokers come in and, you know, try different
4 products that may be smoking involved.

5 I do not know at all the
6 specifics, but I can envision why someone might
7 be thinking they need more smoking in connection
8 with research.

9 MR. McCURDY: As long as it's not
10 about impacts of smoking. I suspect that would
11 be the question.

12 CHAIRMAN ORGAIN: If I could take the
13 personal privilege to say if you -- whatever you
14 celebrate during the season, hopefully, it's
15 with your friends and loved ones and enjoy your
16 time off and we will see each other next year,
17 Lord willing. Thank you.

18

19 (WHICH WERE ALL THE PROCEEDINGS HAD
20 IN THE ABOVE-ENTITLED MATTER.)

21

22

1 STATE OF ILLINOIS)
)
2 COUNTY OF C O O K)

3

4

5

I, DONNA T. WADLINGTON, a

6

Certified Shorthand Reporter, doing business in

7

the County of Cook and State of Illinois, do

8

hereby certify that I reported in machine

9

shorthand the proceedings in the above entitled

10

cause.

11

I further certify that the

12

foregoing is a true and correct transcript of

13

said proceedings as appears from the

14

stenographic notes so taken and transcribed by

15

me this 14th day of February, 2008.

16

17

18

19

DONNA T. WADLINGTON

20

CSR #084-002443

21

22

