

PUBLIC HEALTH ETHICS ADVISORY COMMITTEE MEETING  
AUGUST 15, 10:00 – NOON  
MAHONING COUNTY DISTRICT BOARD OF HEALTH  
CONFERENCE ROOM

Minutes

Attendees:

Dr. Ben McGee  
Erin Bishop  
Wes Vins  
Deanna Ford  
Dr. Gabriel Palmer-Fernandez  
Atty. Tim Tusek  
Patt Sweeney

Absent:

Rev. Lewis Macklin

The meeting began with introductions and a review of the Ethics Advisory Committee’s (EAC) purpose, the importance of public health ethics and the factors which distinguish public health ethics from health care and biomedical ethics. The EAC also reviewed the MCDBOH Code of Organizational Ethics and the Public Health Leadership Society’s publication titled *Principles of Ethical Practice of Public Health*.

The EAC then discussed the process and requirements of Ohio’s Child Fatality Review (CFR) and Fetal and Infant Mortality Review (FIMR) Boards and the requirements or limitations on use of information received or discovered during those meetings. The particular ethical question identified was: What is the responsibility of the chair of the Review Board when information discussed during a CFR or FIMR case review reveals information that indicates that additional minor children may be in jeopardy due to behaviors or circumstances that create potential danger in the home?

The discussion outlined the responsibilities of mandated reporters that, during a case review, become aware of reportable conditions in a home (e.g., direct threats against a child, reported signs of child abuse or neglect). The EAC determined that mandated reporters have a duty to disclose such information to either the county’s Children’s Services Board or law enforcement agency, depending on the exigency of the harm. Whereas, if information shared during the case review does not indicate exigent circumstances, but rather demonstrates a significant potential for future risk, to prevent the future harm the CFR/FIMR team (facilitated by the chair) will request that the agency with specific responsibility to rectify the circumstances identified, keep the case open in their agency and follow up with the family.

Next, the EAC discussed the ethical questions presented when protected health information is requested by the public/media under the auspices of the public’s right to know/need to know. E.g., influenza vaccine status of children who die from influenza. The EAC concluded that such information cannot be disclosed for the following reasons:

1. The size of the population is too small to draw inferences from the information requested thus making the request invalid

2. The impact that sharing such information will have upon the parents of the deceased child
3. The information requested is protected health information under the HIPAA Privacy Rule

Lastly, the EAC discussed the roll of the Local Health Department in political advocacy. E.g., media coverage/inquiry of LHD opinion on proposed changes to the Bureau of Medically Handicapped Children Program or Medicaid Expansion.

The EAC held a lengthy discussion and review of the NACCHO Advocacy Toolkit that outlines the differences between advocacy and lobbying efforts. The EAC acknowledged that the Ohio Association of Health Commissioners engages a lobbyist to formally lobby legislators regarding particular issues of importance to local health departments and population health. Conversely, it is the opinion of the EAC that local health departments advocate for public health concerns by educating elected officials and the public about the public health impact of potential policies. The EAC further determined that it is not only the responsibility of the local health department to advocate for the public’s health it is, in fact, the DUTY of the health commissioner to do so.

The EAC suggested that local health departments and health commissioners keep the following examples in mind when conducting advocacy activities:

**EXAMPLES OF ADVOCACY VS. LOBBYING ACTIVITIES**

Advocacy	Lobbying
Meeting with a Member of Congress to educate them about the importance of Zika funding for your community.	Meeting with a member of Congress to urge them to vote for a bill to provide emergency Zika funding for your health department.
Preparing educational materials that depict success stories from your local health department programs.	Preparing materials that include information on health programs at your local health department and contain messaging for or against specific legislation.
Tweeting statistics about diabetes and descriptions of how local health departments are helping reduce diabetes rates.	Tweeting a message urging Congress to vote against cuts for diabetes prevention programs in local health departments.
Sending a weekly e-newsletter discussing factual information on opioid abuse and outlining programmatic efforts that are proven to reduce this	E-mailing a “call to action” to members of your organization to encourage them to contact their legislator in favor of opioid prevention

Source: NACCHO Advocacy Toolkit 2017. Accessed August 14, 2017 at: <http://www.naccho.org/uploads/downloadable-resources/gov-advocacy-toolkit.pdf>

**PLANS FOR NEXT MEETING:** The EAC discussed establishing a pattern of regular meetings, but declined in favor of maintaining the current, effective practice of calling the committee together when the need arises.

Respectfully submitted,

Patricia M. Sweeney, JD, MPH, RN  
 Ethics Advisory Committee, Secretary