

**NATIONAL CONVERSATION ON PUBLIC HEALTH AND CHEMICAL EXPOSURES
LEADERSHIP COUNCIL**

**Meeting #4 Summary
Washington Plaza Hotel
10 Thomas Circle, NW, Washington, DC
June 1, 2010**

Meeting Objectives:

- Learn about and provide input on topics of interest being considered by the work groups, drawing on work group discussions to date and ideas from the Web Dialogues, Association of State and Territorial Health Officials (ASTHO) needs assessment, and National Association of County and City Health Officials (NACCHO) forums.
- Discuss models and approach to preparing action agenda and plan next steps.

Upcoming Call	When and Where	Suggested Agenda Items
<i>National Conversation on Public Health and Chemical Exposures Leadership Council (Leadership Council)</i>	July 27, 2010, 1:00 p.m.–5:00 p.m. Eastern, Teleconference	<ul style="list-style-type: none"> ○ Draft Action Agenda outline ○ Process options for integrating work group reports into an Action Agenda ○ Options for tracking implementation of recommendations in Action Agenda

I. Action Items

Welcome, Introductions, Meeting Objectives and Agenda	Who	Completed by
<ul style="list-style-type: none"> • Invite Gail Shibley to join the <i>Leadership Council</i> 	Gail Bingham	June 11, 2010
<ul style="list-style-type: none"> • Fill <i>Leadership Council</i> Co-chair position 	Gail Bingham (in consultation with <i>Leadership Council</i>)	July 9, 2010

ASTHO, NACCHO, and Web Dialogue Contributions	Who	Completed by
<ul style="list-style-type: none"> • Finalize Web Dialogue report and post to Web Dialogue Web site 	NCEH/ATSDR staff and WestEd	July 1, 2010
<ul style="list-style-type: none"> • Finalize ASTHO report and post to ASTHO Web site 	ASTHO staff	July 16, 2010

<ul style="list-style-type: none"> Finalize NACCHO report and post to NACCHO Web site 	NACCHO staff	July 9, 2010
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Preliminary Look at Potential Recommendations from Work Groups	Who	Completed by
<ul style="list-style-type: none"> Communicate <i>Leadership Council</i> feedback to work group members for use in refining recommendations and drafting work group report 	Work group chairs, Senior Liaisons, RESOLVE facilitators, NCEH/ATSDR staff	Next work group calls (June and July 2010)
<ul style="list-style-type: none"> Provide information to <i>Leadership Council</i> on instances where ATSDR has found a public health hazard 	Dr. Henry Falk	July 27, 2010

Looking Ahead to the Action Agenda	Who	Completed by
<ul style="list-style-type: none"> Develop draft Action Agenda outline 	Gail Bingham	Prior to July 27, 2010 call
<ul style="list-style-type: none"> Resend Federal Coordination Team charge to <i>Leadership Council</i> 	Gail Bingham	Attached to email with this summary
<ul style="list-style-type: none"> Consider options for tracking implementation of recommendations that emerge 	<i>Leadership Council</i> members	Ongoing

II. Meeting Summary

Welcome, Introductions, Meeting Objectives and Agenda

Gail Bingham, RESOLVE, called the meeting to order. Nsedu Witherspoon, Children's Environmental Health Network and Leadership Council Co-chair, welcomed Leadership Council members and the public. Ms. Witherspoon thanked the Leadership Council members for their investment in the *National Conversation on Public Health and Chemical Exposures (National Conversation)* and noted that many, particularly at the community level, wish that more change were already in place. However, the broadly scoped nature of the *National Conversation*, open and transparent to many participants, was conceived in order to ensure significant action would happen.

Gail Bingham reviewed the meeting agenda, noting the importance of the Leadership Council considering the input from the National Association of County and City Health Officials (NACCHO) and Association of State and Territorial Health Officials (ASTHO) Web Dialogues and having two way communication with work groups about their preliminary recommendations. Ms. Bingham noted that following the meeting, RESOLVE staff would begin drafting a framework for the action agenda.

Gail Bingham noted that Cal Baier-Anderson resigned from the Leadership Council and Policies and Practices work group after taking a new position at the U.S. Environmental Protection Agency (EPA). The intent was to have several people from work groups also serve on the Leadership Council. Policies and Practices chair Richard Jackson, University of California Los Angeles School of Public Health, suggested adding Policies and Practices work group member Gail Shibley, Oregon Public Health Division, to the Leadership Council. Positive comments were offered by those who know Ms. Shibley, and no concerns were voiced.

Dr. Henry Falk, National Center for Environmental Health/Agency for Toxic Substances and Disease Registry (NCEH/ATSDR), provided an update on the search for a new director. Dr. Falk, not a candidate for the position, hopes that the results of the *National Conversation* process will inform the new director. He stated that he will work with Ms. Witherspoon and Ms. Bingham to fill the Leadership Council co-chair position this summer. Dr. Falk also urged members of the Leadership Council to generate concrete recommendations for CDC/ATSDR as part of the broader scope of this project.

ASTHO, NACCHO, and Web Dialogue Contributions

Ben Gerhardstein, NCEH/ATSDR, presented an overview of three *National Conversation* inputs on which the Leadership Council will draw in developing recommendations.

- A report from ASTHO compiling the results of a state needs assessment and forum held with state health and environmental officials
- A report from NACCHO compiling the results of two forums with local health officials
- A report with summary highlights from the first *National Conversation* Web Dialogue

He described the following state needs and recommendations as outlined in the ASTHO report. State needs:

- Better scientific understanding
- Increased funding for biomonitoring and training
- Integration of life-cycle principles
- Increased resources for communication and outreach to the public
- Updated federal legislation to reflect current scientific understanding of chemicals

State recommendations:

- Utilize existing federal databases to advance scientific understanding
- Improve the communication infrastructure
- Fund all states to collect biomonitoring data
- Improve training and coordination across governmental levels
- Place burden to prove safety on industry

Paul Jarris, ASTHO, emphasized the need to rely on the best science and consider ways to translate complex information on the health consequences of chemical exposures to the media and elected officials.

Mr. Gerhardstein also described the themes and related recommendations outlined in the NACCHO report, noting that local health officials want:

- More information on the health effects of chemical exposures
- Access to monitoring data through a central repository
- Greater communication and coordination with state, federal agencies
- Funding to build local chemical exposure mitigation & response capacity

- Stronger federal policies focused on preventing harmful exposures

Robert Pestronk, NACCHO, highlighted the importance of chemical exposure issues to local health departments. He commented on the need to consider providing greater access to information, building the local health workforce through training and funding, and putting stronger laws in place to prevent harmful exposures.

Mr. Gerhardstein reviewed selected themes that emerged during the April 2010 Web Dialogue and that were also discussed during the April 2010 Leadership Council call.

While currently labeled “draft,” each of these inputs will be finalized soon. Mr. Gerhardstein suggested that members consider two questions in reviewing these inputs: (1) whether they underscore ideas that work groups are developing already, and (2) whether they address gaps in the work group recommendations. Mr. Gerhardstein reminded the Leadership Council that they will receive input from community conversations later this summer.

Preliminary Look at Potential Recommendations from Work Groups

Work group chairs commented on recommendations currently under consideration by each group. Members discussed and offered feedback on each set of recommendations.

Scientific Understanding

Dr. Kevin Teichman, EPA, chair, reviewed the Scientific Understanding work group’s potential recommendations, noting that while 17 are included in the briefing paper, 24 have been developed by subgroups, all of which under consideration by full work groups. He has asked the group to make their recommendations specific and actionable and focus on science rather than policy recommendations. Dr. Teichman addressed several areas of particular interest to his work group, including access to and management of databases, scientific approaches to applying the precautionary principle, improving risk assessment, cumulative exposures and non-chemical stressors, and adoption of modern technologies to assess risks. Some disagreement exists among his group members about some recommendations; these disagreements are being addressed. Leadership Council members suggested that the group consider ways to utilize and provide access to both governmental and non-governmental databases. Members also discussed options for reconciling risk-based and precautionary approaches and noted that precaution had informed several recent high-profile publications (e.g. the President’s Cancer Panel report). Finally, a member suggested that with respect to recommendations on responding to exposed persons, the group consider the full public health workforce rather than focusing on physicians.

Education and Communication

Dr. Kathleen Rest, Union of Concerned Scientists, chair, summarized the Education and Communication work group’s progress and potential recommendations. She noted that at the outset, the group put significant effort into information collection and had only recently begun to develop recommendations. The next step is to prioritize and hone them. The group is interested in ways to build trust and credibility between the public, researchers, and government officials. Crafting a model for multi-directional communication has been a focus of the group’s work, as has building environmental health literacy. Several of the group’s recommendations seek to promote health professional training on chemical exposure issues. On that topic, Leadership Council members offered suggestions related to faculty champions, fellowships, credentialing, certification, and other mechanisms for building health professional capacity to address

chemical exposures. Suggestions included adding chemical exposure content to existing programs, working with non-traditional partners (e.g., college and university, chemistry departments), and groups whose expertise could be better leveraged (e.g. the American College of Medical Toxicology, and Pediatric Environmental Health Speciality Units). A member suggested that the group consider recommendations for building tribal capacity in this area and offered ideas on several existing workforce related programs that might be models or mechanisms for doing so.

Members also made suggestions regarding curricula to promote environmental health literacy (e.g. University of Washington's "Tox in a Box"). A member questioned whether the group had considered training for industry workers. Dr. Rest noted that the group had not addressed industry workforce issues, given the already broad scope of their efforts.

Serving Communities

Peggy Shepard, WE ACT for Environmental Justice, chair, outlined the Serving Communities work group's activities and draft recommendations. She noted that the group is on track in drafting its report. They have developed and are refining 15 initial recommendations. The work group's recommendations include ideas for building community capacity, involving community residents in government decision making, providing greater access to health care in environmentally burdened communities, reviewing ATSDR's mandate, collecting health information, improving risk assessment processes, establishing standard processes for assessing community health impacts from environmental exposures, and enforcing environmental laws. The group's recommendation on training (No. 15) contained in the briefing document is being integrated into its second recommendation regarding providing funding and resources to communities to become self advocates. Ms. Shepard said that this revised recommendation would be more specific than recommendation No. 2 in the briefing document.

Several members asked questions and offered ideas for the work group to consider. A member noted that because of health reform legislation, this may be an opportune moment to address health care issues. Members discussed how the group arrived at its recommendation on Federally Qualified Health Centers (FQHCs), suggesting that the work group investigate the extent to which FQHCs are currently located in environmentally burdened communities and adjust their recommendation based on that information. Some members suggested that the work group develop a definition of "community."

Leadership Council members discussed how ATSDR determines when a public health hazard exists at a site, and Dr. Falk offered to provide information on such instances.

Chemical Emergencies

Dr. Andrea Kidd Taylor, Morgan State University School of Community Health and Policy, chair, reviewed the work group's progress. Dr. Taylor noted that the group's Systems and Coordination subgroup had identified several vision areas and is working toward recommendations related to information management and outreach, provision of resources for community-based planning, and preparedness among the first responder and receiver workforces. The Training and Capacity Building subgroup has several draft recommendations on establishing a training program on chemical emergencies, developing a database to help local planning efforts, and providing guidance on exposure standards on which to rely during emergency response, among others. Dr. Taylor noted that the group would draw on members' recent experiences with the Gulf of Mexico oil spill in its report.

Members offered comments and asked questions. One member suggested that the group define "emergency." Others noted that the Department of Homeland Security and others offer

many training programs and that the group might propose ways to use possible redundancies in current programs to their advantage. A member suggested that the group look at California's efforts on transportation-related emergencies as a possible model. Another noted some confusion about how community concerns are addressed within the Incident Command System and suggested the the work group look into that. Members suggested that the group address public health work force issues beyond first responders. Members also discussed industry roles in reducing the use and storage of hazardous chemicals and training employees and community members. A member suggested the group consider a recommendation about integrating the emergency response infrastructure to be inclusive of bioterrorism and chemical incidents. Another member noted that it would be desirable to conduct immediate medical surveillance on exposed populations after a chemical spill, potentially funded by the responsible party.

Monitoring

Dr. John Balbus, National Institute of Environmental Health Sciences, chair, explained that the Monitoring group was operating with three subgroups divided according to monitoring and surveillance related to (1) chemical use and emissions, (2) measurement in humans, and (3) health outcomes. The group has generated nine draft recommendations, of which five entail an expansion of current activities. He noted that the recommendations included ideas for better integrating data collection activities vertically among local, state and federal governmental units and horizontally at the federal level. The group's recommendations also included expanded biomonitoring programs and the CDC's Environmental Public Health Tracking program. Dr. Balbus noted that the group has highlighted monitoring of indoor environments as an important gap in our current system. He explained that the group is interested in the tradeoffs involved with expanding public access to data while addressing privacy and confidentiality concerns. Dr. Balbus noted that the group has discussed monitoring of food, particularly fish, but does not have specific recommendations on that issue.

A member noted that gathering baseline chemical exposure measures on vulnerable populations would be desirable. One member suggested that the United States Geological Survey's toxics monitoring program ought to be expanded. Another proposed that the group consider how to allow local data to be added to larger datasets, potentially using a central electronic submission node that provides guidance on the kinds of information that can be entered. Dr. Balbus requested additional guidance from Leadership Council members. A member suggested that the group include examples of health endpoints that should become reportable conditions. Another member offered strong support for addressing access to data, stating that it has been difficult in her experience to gain access to community level data on health outcomes. The member also supports recommendations on an understandable format for reporting of results of individual testing – as was done with a recent New York State study of health outcomes among Love Canal residents.

Policies and Practices

Dr. Jackson reviewed the work group's progress and draft recommendations that have been developed by the three subgroups focusing on primary, secondary, and tertiary prevention. Generally, the primary group is looking to the future, secondary is addressing current needs, and tertiary is redressing past problems. The full group has developed a set of principles that are guiding its recommendations. The work group has too many recommendations currently. Dr. Jackson noted several areas of interest to the work group, including the use of predictive toxicology, the adoption of safer chemical alternatives, biomonitoring, right to know issues, Toxic Substances Control Act reform, transparency in federal decision-making, and ATSDR's health assessment process, among others.

Leadership Council members asked why the work group chose not to invoke the precautionary principle. Dr. Jackson noted that the principle was embedded in the recommendations, albeit not by name. Several members thought that it would be helpful for the work group to be explicit if it recommends adoption of the precautionary principle and in what circumstances and how it might be applied. One member suggested that the group consider how new toxicological testing methods would help address known problems. Another offered a preference for adding rather than substituting new toxicological tests to those already being conducted, as many new tests have not been verified.

Cross Work Group Issues

A member was concerned that databases were being viewed as a silver bullet that would solve many problems. He suggested that work groups and the Leadership Council work backward from the problem that needs to be addressed to ensure that a database will help solve it. Members discussed how to address overlapping work group recommendations. Gail Bingham noted that overlaps might be helpful to the Leadership Council in determining high priority actions and that work groups should attempt to address the issue from their particular areas of expertise.

Public Comment

Two members of the public offered public comment to the Leadership Council. Thoughts and suggestions included:

- Developing recommendations that specifically address the needs of persons with chemical sensitivities as a vulnerable subpopulation
- Ensuring that all states health agencies have adequate environmental health expertise
- Establishing regional mechanisms to continue this conversation and consider regional actions

Looking Ahead to the Action Agenda and National Conversation Process Updates

Gail Bingham reviewed the revised process map and milestones for developing an action agenda, noting that the timeline had been compressed to finalize the action agenda by the end of January 2011. This revised process includes a series of three Leadership Council meetings, two in the fall of 2010 and one in January, requiring substantial work between meetings. The process includes a Web Dialogue for members of the public to discuss the draft action agenda in early December 2010. Members noted that the timeline is ambitious and that continued strong staff support will be necessary to meet the milestones. In advance of the July Leadership Council conference call Ms. Bingham and staff will work on a draft action agenda outline and options for ways to integrate the various inputs.

Bingham requested Leadership Council guidance on several questions regarding the action agenda, including how many recommendations to include, format for recommendations, level of specificity (e.g., action by whom, by when), degree of context to explain the recommendation's importance, and criteria for choosing recommendations.

Several members noted that prioritizing will be difficult and requested that work groups help them by prioritizing their own recommendations. A member also suggested that the Federal Coordination Team could help by providing feedback on the ideas that could be actionable by the respective agencies. Members noted it would be helpful to learn what CDC would find most useful. Members suggested that both long term and short term recommendations be included in the action agenda. Members discussed several organizing principles for the action agenda,

including grouping recommendations by actor, under the policies and practices levels of prevention framework, and under long term high level recommendations that include shorter term components. Members also noted the importance of clearly identifying audiences for the action agenda.

Members raised concerns about how the Leadership Council will track implementation of recommendations and hold agencies and other actors accountable. One member suggested that the CDC director speak to the group about this issue. Dr. Falk explained that CDC/ATSDR had committed funding through the development of the action agenda. A member suggested that the group might consider looking for other sources of funding to ensure a Leadership Council meeting occurs in 2011 to check in on implementation progress. Ms. Bingham noted that members also can provide leadership on this issue.

Members expressed appreciation for the effort that work groups and staff have contributed to the process. One member noted a high level of positive collaborative energy and hoped that all would build on that energy in the months ahead.

III. Participation

Members Present:

- George Alexeeff, California Environmental Protection Agency
- Henry "Andy" Anderson, Wisconsin Division of Public Health
- Tina Bahadori, American Chemistry Council
- John Balbus, National Institute of Environmental Health Sciences
- Scott Becker, Association of Public Health Laboratories
- Stacy Bohlen, National Indian Health Board
- Lisa Conti, Florida Department of Health
- Henry Falk, National Center for Environmental Health/Agency for Toxic Substances and Disease Registry, U.S. Centers for Disease Control and Prevention
- Lois Gibbs, Center for Health, Environment and Justice
- Daniel Goldstein, Monsanto
- Rick Hackman, Procter and Gamble
- Richard Jackson, University of California Los Angeles School of Public Health
- Paul Jarris, Association of State and Territorial Health Officials
- Elise Miller, Collaborative on Health and the Environment
- Franklin Mirer, Hunter College, City University of New York
- Robert Peoples, American Chemical Society, Green Chemistry Institute
- Robert "Bobby" Pestronk, National Association of County and City Health Officials
- Susan Polan, American Public Health Association
- Kathleen Rest, Union of Concerned Scientists
- Alan Roberson, American Water Works Association
- Jennifer Sass, Natural Resources Defense Council
- Peggy Shepard, WE ACT for Environmental Justice
- Rosemary Sokas, U.S. Occupational Safety and Health and Administration
- Martha Stanbury, Michigan Department of Community Health
- Andrea Kidd Taylor, School of Community Health and Policy, Morgan State University
- Kevin Teichman, U.S. Environmental Protection Agency
- Marilyn Wind, U.S. Consumer Product Safety Commission

- Nsedu Witherspoon, Children's Environmental Health Network (Co-chair)

Regrets:

- Linda Birnbaum, National Institute of Environmental Health Sciences and National Toxicology Program
- John Bresland, U.S. Chemical Safety and Hazard Investigation Board
- Ken Cook, Environmental Working Group
- Jesse Goodman, U.S. Food and Drug Administration
- Jim Jones, U.S. Environmental Protection Agency
- John Peterson Myers, Environmental Health Sciences
- Robert Rickard, DuPont
- Roger Rivera, National Hispanic Environmental Council
- David Wegman, University of Massachusetts Lowell
- Beverly Wright, Deep South Center for Environmental Justice , Dillard University

Facilitation and Staff Team Members Present:

- Gail Bingham, RESOLVE
- Abby Dilley, RESOLVE
- Ben Gerhardstein, NCEH/ATSDR
- Kathy Grant, RESOLVE
- Carolyn Harper, ATSDR
- Jennifer Peysor, RESOLVE
- Montrece Ranson, NCEH/ATSDR
- Jenny Van Skiver, NCEH/ATSDR

Others Present:

- Jeane Covington, Macedonia Freehold Church
- Andrew Elligers, National Association of County and City Health Officials
- Peter Hanes
- Ashley Hopkins
- Mary Lamielle, National Center for Environmental Health Strategies
- Megan Latshaw, Association of Public Health Laboratories
- Jennifer Li, National Association of County and City Health Officials
- Jennifer Lynette, ETA
- Karen Miller, Huntington Breast Cancer Action Coalition
- JR Pegg, Pesticide and Toxic Chemical News
- Anne Pollock, CDC
- Lindsay Realmuto, Association of State and Territorial Health Officials
- Pat Rizzuto, BNA
- Richard Sedlak, The Soap and Detergent Association
- Victoria Swilley
- Lauren Weir, American Water Works Association
- Kerry Williams, Association of State and Territorial Health Officials