

State Board of Health Policy Committee

August 22, 2024

1:00 PM – 3:00 PM

Minutes

1. Call to Order – Policy Committee

Members present: Damon Arnold, Dawn Brown, Rashmi Chugh, John Herrmann, Esther Sciammarella

Members not present: Erica Salem, Susan Swider

IDPH staff present: Graham Briggs, Alma Collins, Jason Copelin, John Kniery, Matthew Leslie, Ralph Randal, Emily Spangler

Guests: Ian Brooks, Jacqueline Lowry, Karen Phelan, Anna Pinsoneault, Jaidalyn Rand, Yvette Johnson-Walker

2. Public Comment

N/A

- a. Infectious Disease Epidemiology - Matt Leslie
 - See addendum.
- b. Climate change - Graham Briggs
 - See addendum.
 - John Herrmann mentioned the 2024 Summit will be held in Urbana-Champaign, December 4th and 5th. It will focus on how the State of Illinois can address human, animal, and ecosystem health issues through a One Health perspective. Included in those topics are climate change and health equity.
- c. Upcoming vaccination season for Flu and COVID-19 – Dr. Arnold
 - Dr. Arnold tabled until the next meeting.
- d. Food allergies – Dr. Arnold
 - Dr. Arnold tabled until the next meeting.

3. Old Business – N/A

4. 2024 Meetings

- a. **STATE BOARD OF HEALTH 11:00 - 1:30 PM**
 - i. September 5
 - ii. December 12
- b. **STATE BOARD OF HEALTH RULES COMMITTEE 1:00 – 3:00 PM**
 - i. November 7
- c. **STATE BOARD OF HEALTH POLICY COMMITTEE 1:00 - 3:00 PM**
 - i. November 14

5. Adjournment



The Goings-on; Infectious Disease Epidemiology in the State of Illinois

Matthew Leslie DVM, PhD

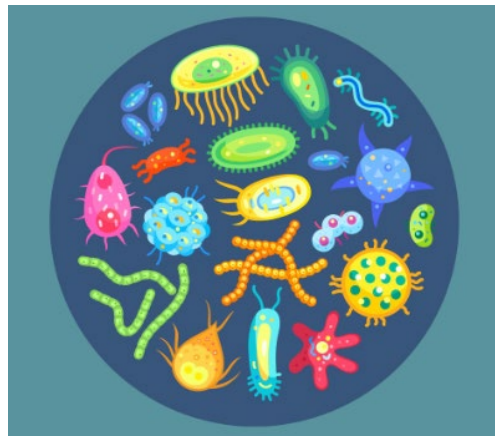
Laboratory data epidemiologist

Office of Disease Control

Illinois Department of Public Health

What we will cover today

- Brief intro/recap of the IDPH CD section
- Rabies in IL – recap and 2024 numbers
- H5N1 recap and IL preparedness
- Illinois Wastewater surveillance
- Midwest Alliance for Applied Genomic Epidemiology





IDPH – Communicable Disease section

- ~30 employees headquartered in Springfield
- ~80 reportable disease conditions
 - Broadly includes ‘other’ conditions
 - “Any suspected bioterrorist threat”
 - “Any unusual case or cluster of cases that may indicate a public health hazard”
- Broken up into 5 disease program teams
 - Enteric Disease - led by Shana Altman
 - Respiratory Disease – led Mallory Sinner
 - Vaccine Preventable Disease – led by Heather Reid
 - Vector-borne Disease – led by (departing) Debbie Freeman
 - Zoonotic Disease – led by Connie Austin
 - Overseen by Section Chief Judy Kauerauf

Stop and report poster - Illinois

- <https://dph.illinois.gov/content/dam/soi/en/web/idph/files/publications/illinois-stop-and-report-disease-poster.pdf>



STOP and Report Infectious Disease

Illinois Reportable Diseases

Mandated reporters, such as health care providers, hospitals and laboratories, must report suspected or confirmed cases of these diseases to the local health department. Diseases in **bold** are reportable within 24 hours. Diseases marked "immediate" (or in **red**) are reportable as soon as possible within 3 hours. All other conditions not in red or bold are reportable within 7 days.

Anaplasmosis Any suspected bioterrorist threat (immediate) Any unusual case or cluster of cases that may indicate a public health hazard (immediate) Anthrax (immediate) Arboviruses (including WNV) Babesiosis Botulism, foodborne (immediate) Botulism, infant, wound, other Brucellosis* California Encephalitis virus Campylobacteriosis <i>Candida auris</i>** Carbapenem-resistant Enterobacteriaceae (CRE)** Chancroid Chikungunya virus Chlamydia Cholera COVID/SARS-CoV-2 Infection Cryptosporidiosis Cyclosporiasis Dengue viruses 1-4 Diphtheria (immediate) Eastern Equine Encephalitis virus Ehrlichiosis <i>Escherichia coli</i> infections (E. coli O157:H7, and other Shiga Toxin Producing E. coli) Foodborne or waterborne outbreaks Gonorrhea <i>Haemophilus influenzae</i>, invasive	Hantavirus pulmonary syndrome Hemolytic uremic syndrome, post diarrheal Hepatitis A Hepatitis B, C, D Pregnant hepatitis B carrier Histoplasmosis HIV infection Influenza, deaths in <18 yr olds Influenza A, novel (immediate) Influenza, ICU admissions Jamestown Canyon virus Keystone virus La Crosse virus Legionellosis Leptospirosis Listeriosis Lyme disease Malaria Measles Mumps <i>Neisseria meningitidis</i>, invasive Outbreaks of public health significance Pertussis (whooping cough) Plague (immediate) Poliomyelitis (immediate) Powassan virus Psittacosis Q fever (<i>Coxiella burnetii</i>)* Rabies, human and potential human exposure and animal	Rhino encephalitis Rubella St. Louis Encephalitis virus Salmonellosis, other than typhoid Severe Acute Respiratory Syndrome (SARS) (immediate) Shigellosis Smallpox (immediate) Smallpox vaccination, complications of Snowshoe hare virus Spotted fever rickettsiosis <i>S. aureus</i> infections with intermediate or high level resistance to vancomycin Streptococcal infections, Group A, invasive including STSS and necrotizing fasciitis <i>S. pneumoniae</i>, invasive in those <5 yrs Syphilis Tetanus Toxic shock syndrome due to <i>S. aureus</i> Trichinosis Trinitatus virus Tuberculosis Tularemia* Typhoid fever Typhus Varicella (chickenpox) Vibriosis (non cholera) West Nile virus Western Equine Encephalitis virus Yellow Fever virus Zika virus
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*If bioterrorism suspected then report immediately (within three hours)

**Reportable to the Extensively Drug-Resistant Organism (XDRO) Registry by providers

Laboratories must report positive test results of these diseases to their local health department within the time frame indicated.

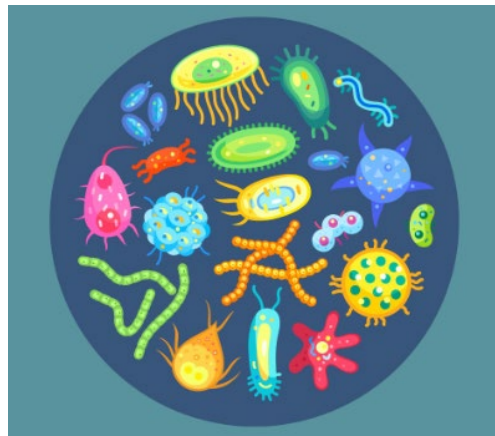
All reports are confidential and should include—

- the disease or condition being reported
- patient's name, date of birth, age, sex, race/ethnicity, address, and telephone number
- physician's name, address, and telephone number
- method of diagnosis, if available

TO REPORT A CASE
contact your local health department:

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- **Rabies in IL – recap and 2024 numbers**
- H5N1 recap and IL preparedness
- Illinois Wastewater surveillance
- Midwest Alliance for Applied Genomic Epidemiology





Rabies at a glance

- Rabies is an acute, progressive encephalomyelitis
- All mammals are susceptible to rabies virus infection
- Rabies virus is maintained in the wild in its reservoir host that sustains transmission within that species—raccoon variant, fox variant, etc.
- In the U.S., around 4,000 animal rabies cases are reported each year, with more than 90% occurring in wildlife like bats, raccoons, skunks, and foxes



Rabies medical review

- After a rabies exposure, the rabies virus must travel to the brain before it can cause symptoms (underlying the statutes for observation).
- The incubation period of rabies is both prolonged and variable, depending on the exposure site and dose of viral inoculum.
 - Highly innervated tissue is associated with a shorter incubation period
- Rabies virus infection in people is fatal if postexposure prophylaxis (PEP) is not started before symptoms begin.
- Rabies is a vaccine-preventable disease



“He’s so annoying. If you know you have rabies, just call in sick!”

Cartoon by Tim Hamilton April 29, 2022

Risk of Rabies by Species in Illinois



■ Very Low

- Small rodents
- Rabbits
- Pocket Pets (hamsters, gerbils, guinea pigs etc.)

■ Low

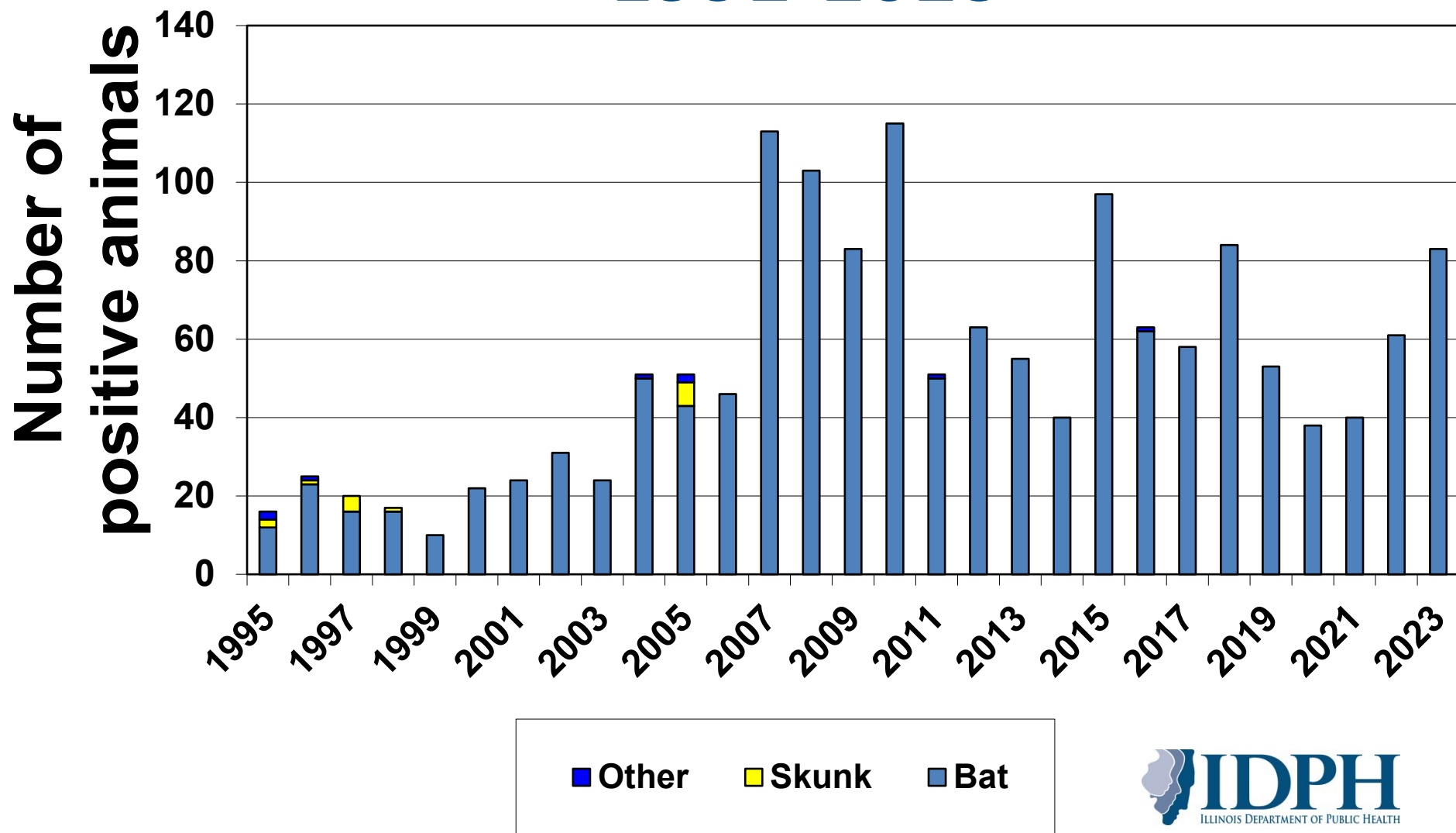
- Dogs, cats, ferrets
- Livestock

■ High

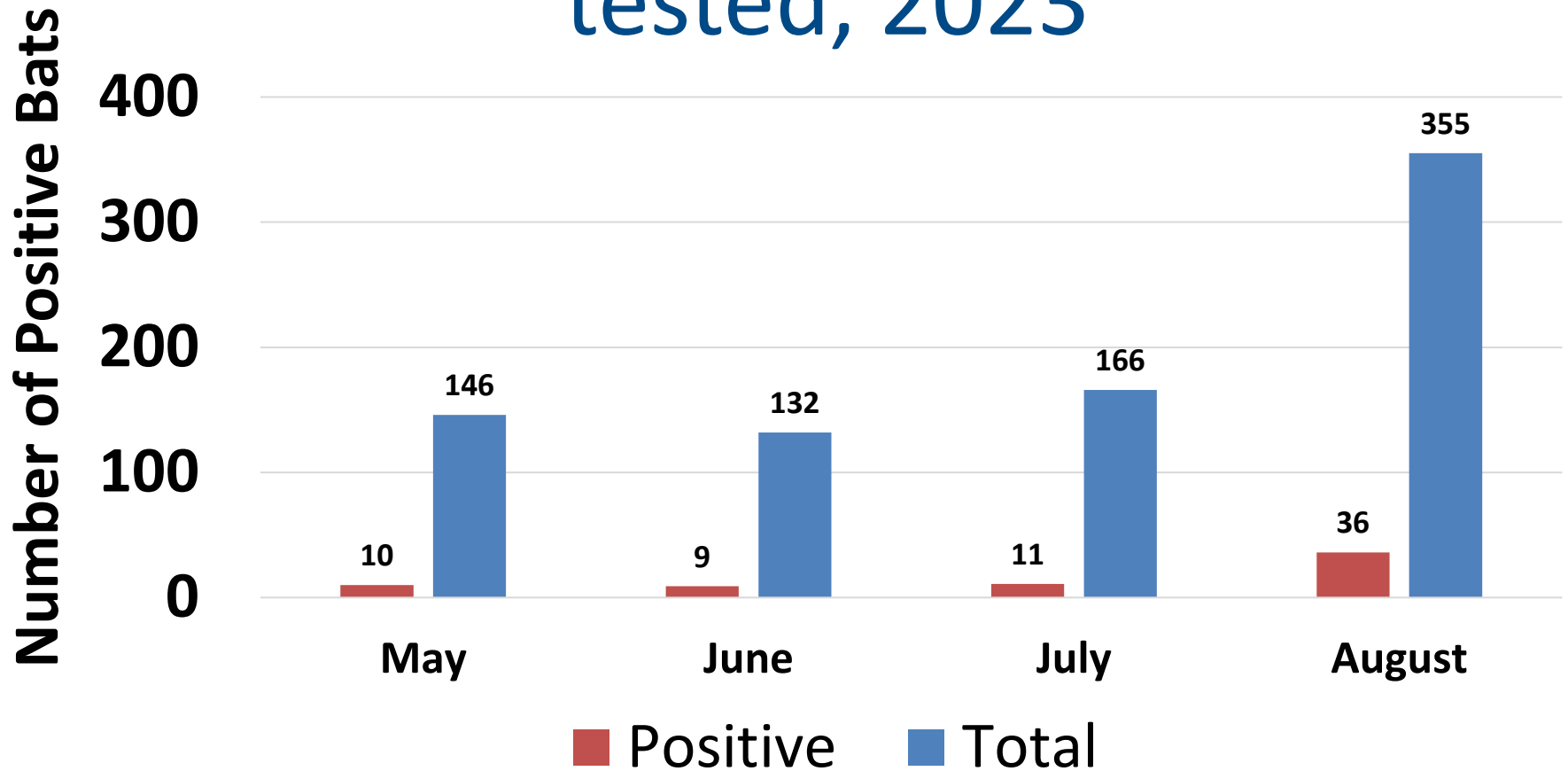
- Wild animals, e.g. raccoon, skunk, fox, coyotes
- Bats



Rabies in Illinois 1992-2023

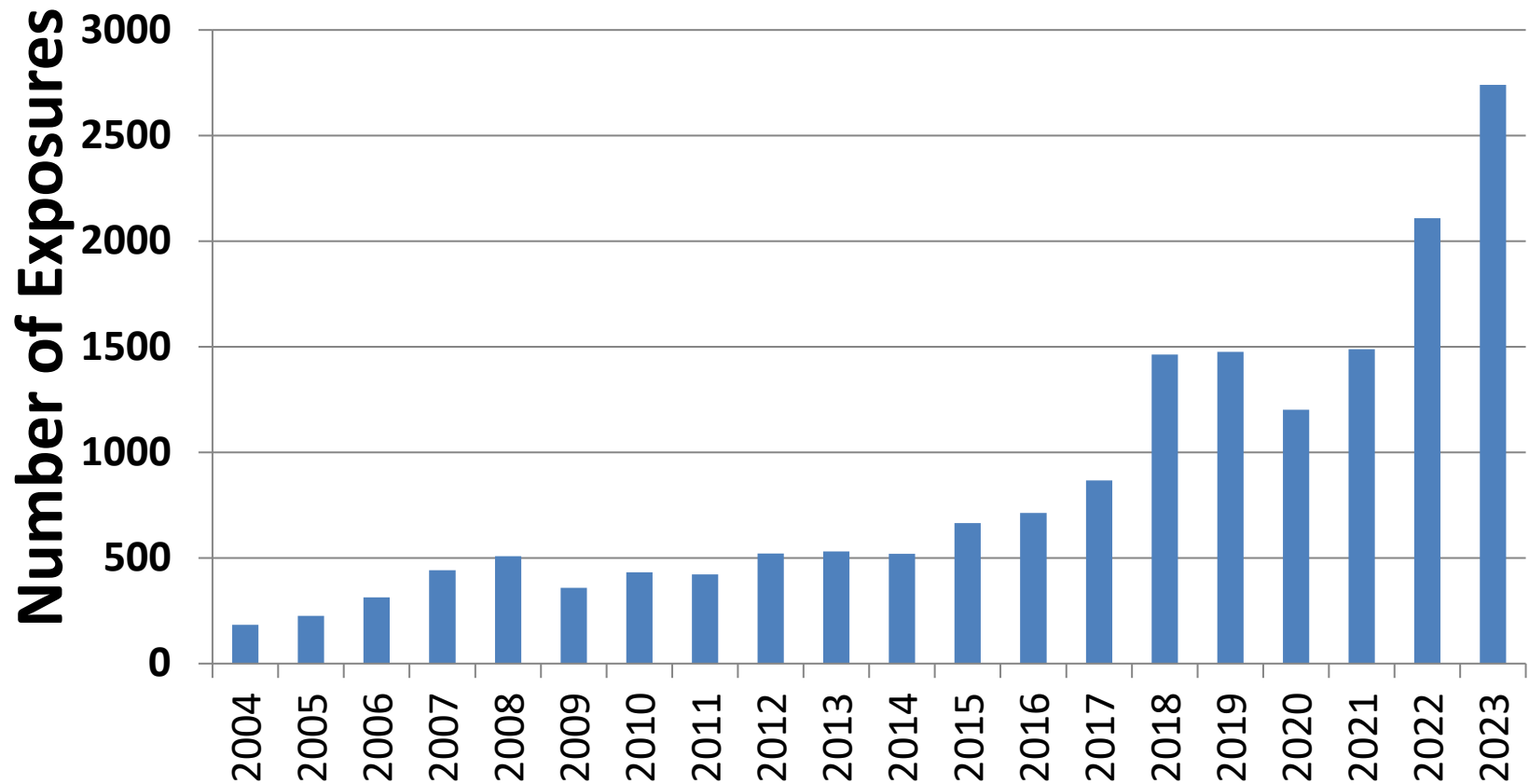


Rabies positive bats and total bats tested, 2023



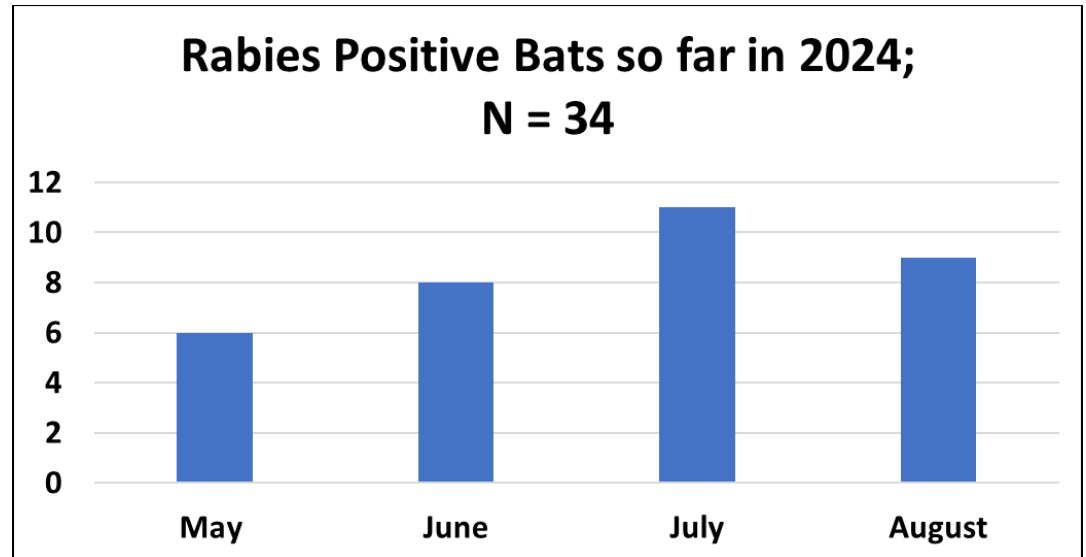


Potential human rabies exposures reported in Illinois, 2004-2023

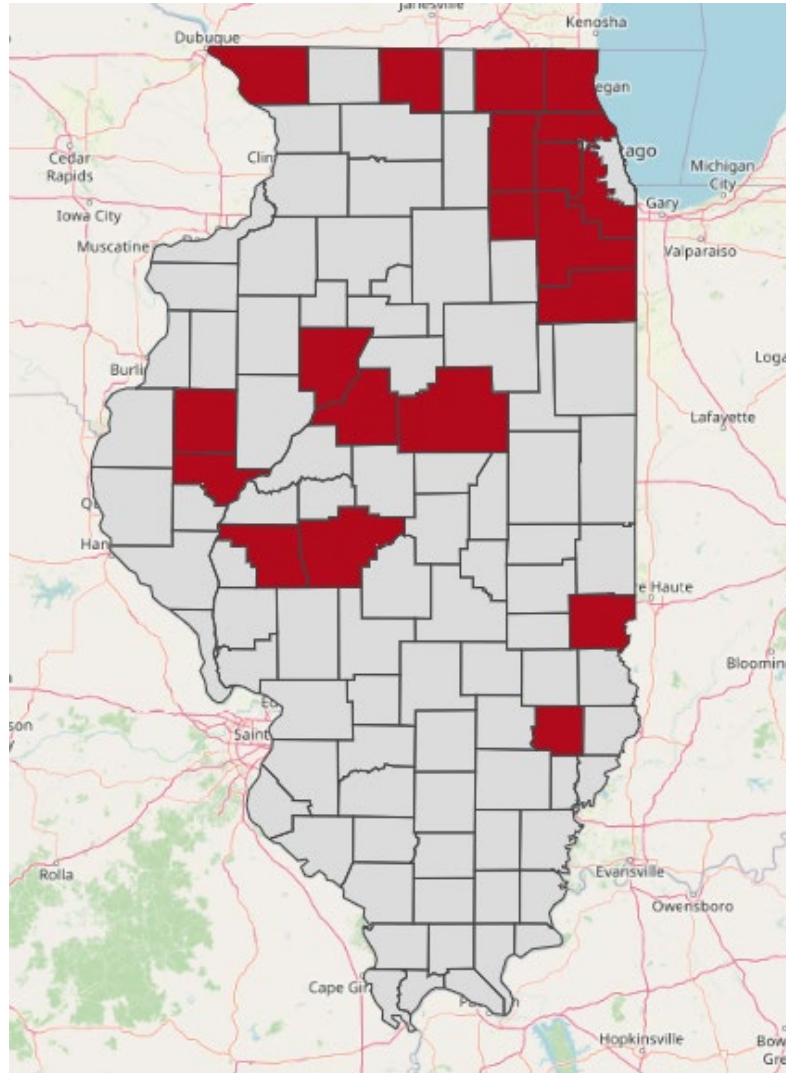


Illinois Rabies Testing 2024

- 2,021 Rabies tests conducted by the 4 testing labs
 - IDPH labs (Chicago, Springfield, Carbondale) and UIUC VetMed
- 869 Bats tested
 - 34 positive (3.9 %)
- 285 Felines – all (-)
- 703 Canines – all (-)
- 11 Livestock – all (-)
- 153 Wildlife / Other – all (-)
- Thank you to our amazing laboratorians!



Illinois Rabies Testing 2024

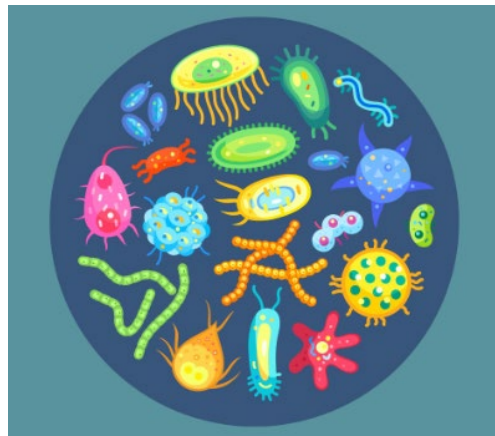


Data as of 08-21-24 at 8:00 pm



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- Rabies in IL – recap and 2024 numbers
- **H5N1 recap and IL preparedness**
- Illinois Wastewater surveillance
- Midwest Alliance for Applied Genomic Epidemiology



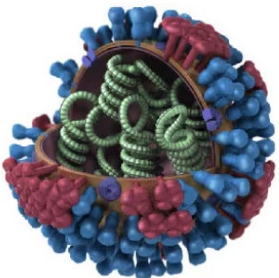
Variant influenza at a glance

- Influenza (flu) viruses constantly change and mutate - slowly (**antigenic drift**) or suddenly (**antigenic shift**).
- Reassortment of viral genes may results in novel and variant influenza viruses that spread more easily, jump species, and cause more severe disease.
- Variant influenza A viruses occur occasionally in humans, often after exposure to pigs at agricultural events.
 - 1 case of variant influenza in the US in 2023 and 3 so far in 2024.
 - Illinois has not had a case of variant influenza since 2013.



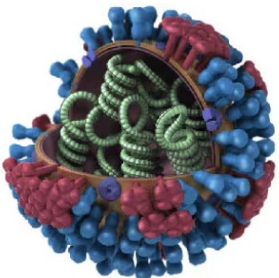
H5N1 at a glance

- 1996: “Highly pathogenic avian influenza H5N1” virus was first identified in domestic waterfowl in Southern China
 - A/goose/Guangdong/1/1996
- 2021: A new H5N1 virus belonging to clade 2.3.4.4b with a wild bird-adapted N1 NA gene emerges. Clade 2.3.4.4b H5N1 viruses became predominant by the end of 2021
- The virus is detected in wild birds in Canada and the United States in late 2021. In February 2022, the virus begins causing outbreaks in U.S. Rare, sporadic human infections with this H5N1 virus are detected



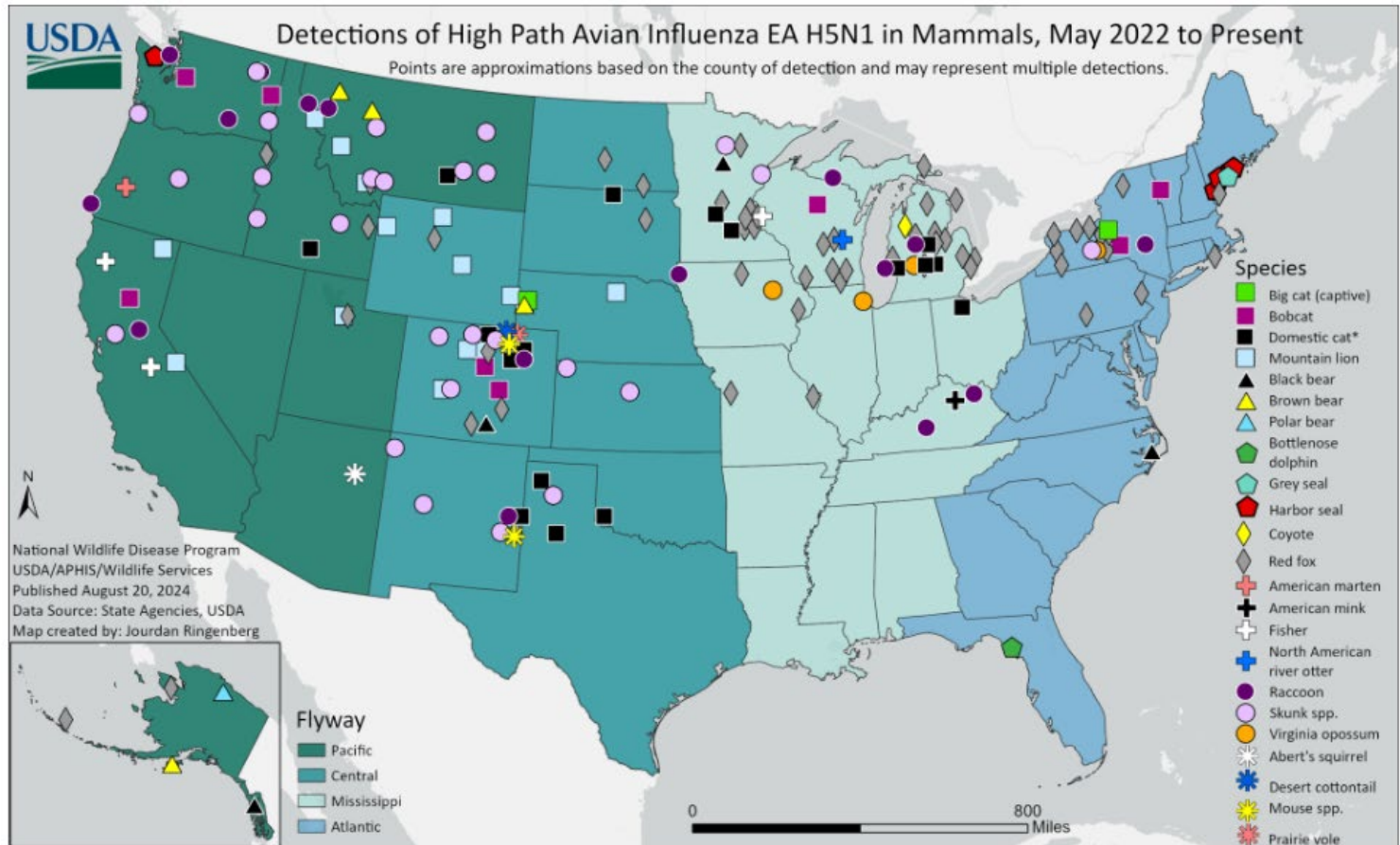
H5N1 at a glance

- CDC has confirmed 14 human H5N1 infections in the US since 2022
 - 10 following exposure to poultry (reported between 4/28/2022 and 7/25/2024)
 - 4 following exposure to dairy cows (reported between 4/1/2024 and 7/3/2024)
 - This is first instance of likely mammal-to-human transmission of H5N1 and so this is concerning
- Different experience with the virus in the US - Highly pathogenic in birds, moderately so in farm cats; much less so in cows and humans.
- As of 8/21/2024, 13 states have reported outbreaks in cattle affecting 191 dairy herds. This number continues to grow, suggesting the virus is not being contained to currently infected herds
- No dairy herds or humans have ever tested positive for influenza A (H5N1) in Illinois.



H5N1 in US mammals

May 2022 - present



- Samples tested at National Wildlife Health Center in Madison, WI
- Last IL detection pre-outbreak in February 2024
 - Crow collected in Champaign County

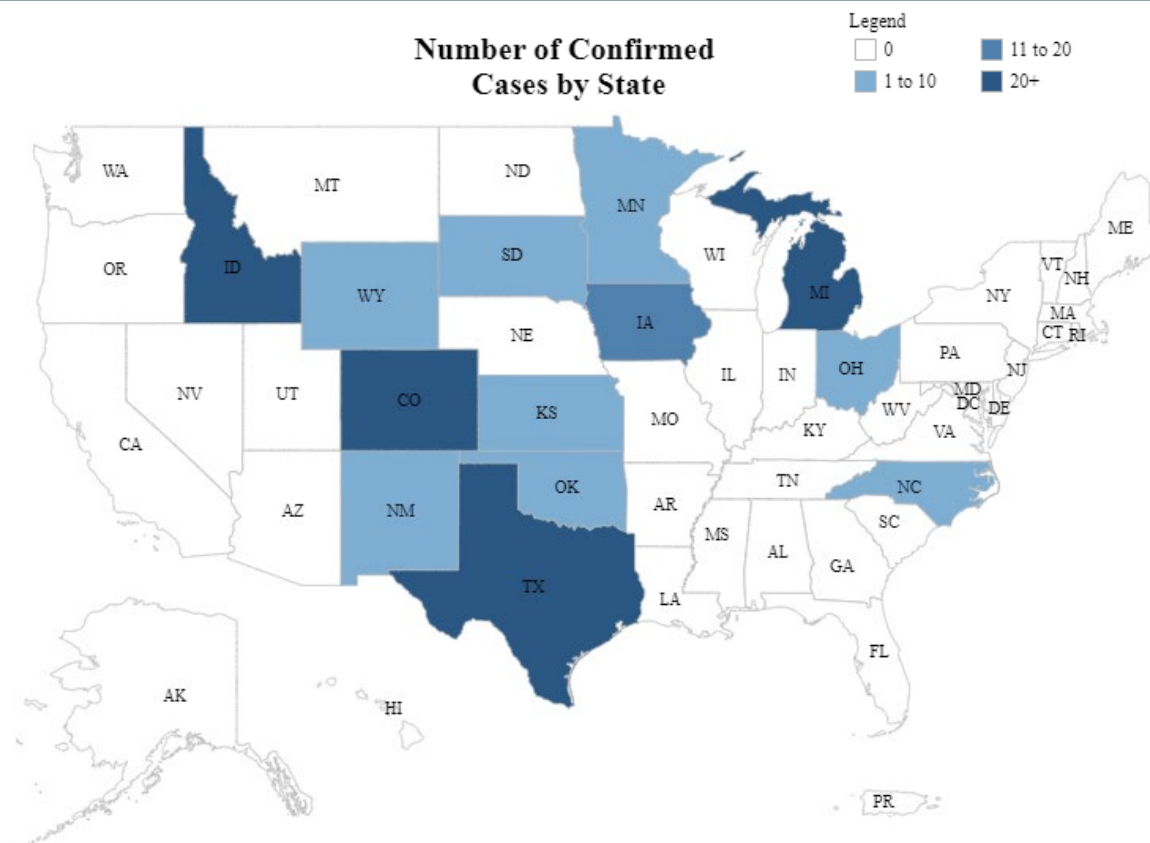
H5N1 confirmed livestock cases

Confirmed Cases Total Outbreak

192

States Affected Total Outbreak

13



- Most recently found on 08-13-24 in Colorado
- Samples tested at the National Veterinary Services Laboratories (NVSL) in Ames, IA



H5N1 Prevention on the Dairy Farm

<u>Exclude</u>	If possible, exclude sick/dying waterfowl from farm
<u>Remove</u>	Remove any dead birds using proper PPE.
<u>Report</u>	Report to IL Dept of Ag any dairy cattle suspected of having H5N1
<u>Minimize/stop</u>	Minimize/stop cattle movement onto farm
<u>Dump</u>	Do not drink raw milk or feed to other livestock or pets

How would a dairy herd be identified as H5N1 in IL?

Herd owner would see signs of H5N1 in the cattle and call vet

Required reporting of any dairy herd with suspect or confirmed H5N1

Vet would call the IL Dept of Ag for testing approval at the College of Vet Med diagnostic lab in Urbana IL

If “non-negative” would go to USDA Ames Iowa for confirmation

The Role of Public Health with H5N1 in dairy cattle



If positive herd, identify contacts who have been exposed. They are not quarantined



If it is possible to identify contacts, monitor them daily until 10 days after the last exposure. If symptomatic test and isolate them



Provide PPE information with considerations for the effects of high heat, needing breaks and water to keep cool



Offer Tamiflu to those who have been exposed without proper PPE or those exposed to a human case of H5N1

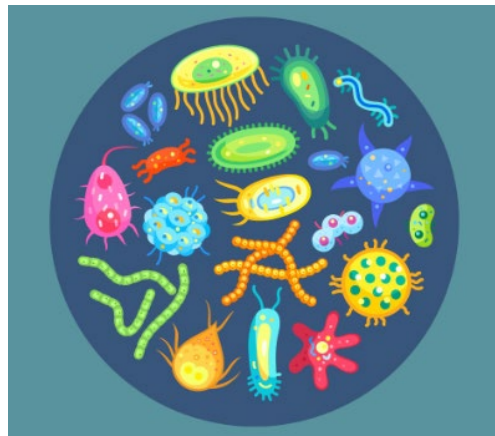


IDPH H5N1 preparedness and planning

- Generating and releasing education materials on H5N1 disease process, workplace hazards, and PPE in English and Spanish for agricultural workers
- Participating in national awareness and planning calls
- Coordinated PPE release/pre-positioning to IL dairy farms with IL farm bureau
- Maintaining very close communication with IDPH dairy program and IDoA
- Multi-Agency (IDPH, IDoA, IDNR, H5N1) preparedness tabletop exercise
- Waster water influenza surveillance – more to follow

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Illinois Wastewater Surveillance System



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ILLINOIS DEPARTMENT OF PUBLIC HEALTH

Illinois Wastewater Surveillance System

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**Wastewater Insights for Illinois:
Infectious Disease Monitoring for
Public Health**



- Overseen by The Discovery Partners Institute (DPI)
- Collaboration between the University of Illinois System and the Illinois Department of Public Health
- Aims to detect pathogens in wastewater to provide an early alert for pandemic preparedness

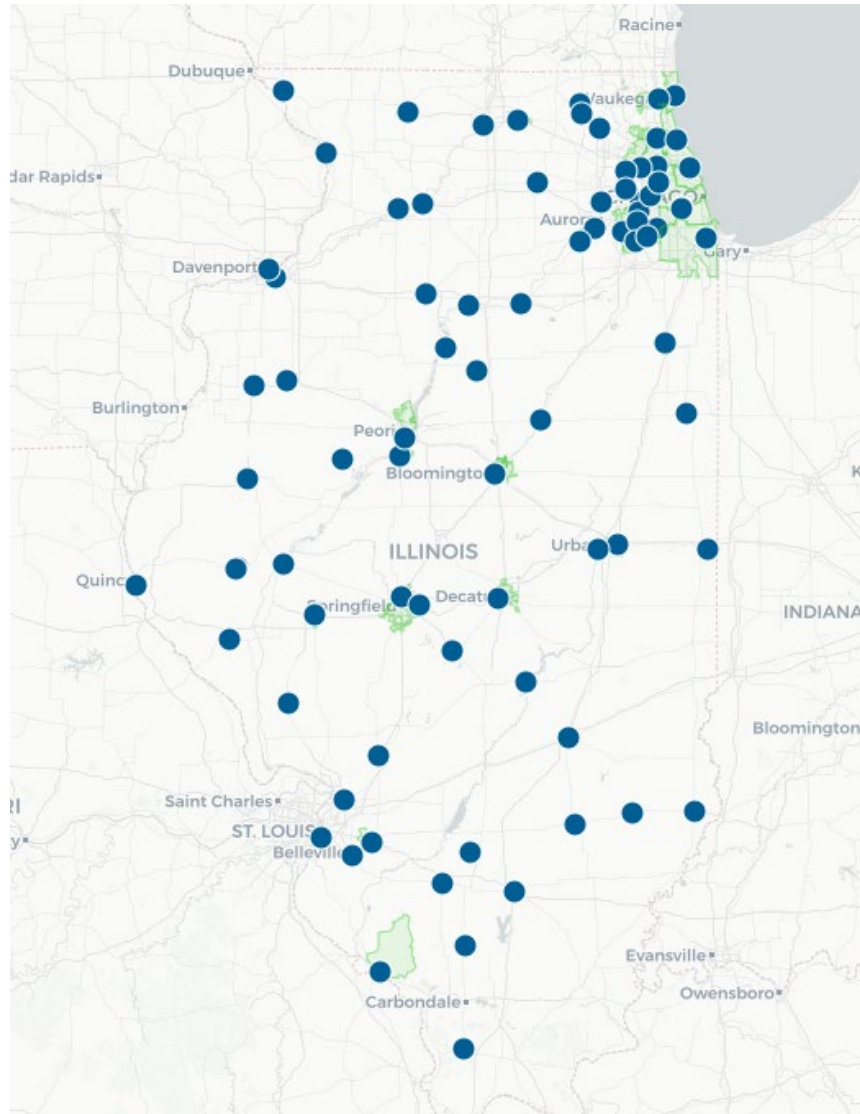
Illinois Wastewater Surveillance System

- Founded in May 2021, for state-wide monitoring of COVID-19
- Wastewater treatment plants from across the state submit samples twice weekly
- Current status: Multiplexed Digital PCR (dPCR) to monitor COVID-19, RSV, and Influenza A and B
- Samples are processed and analyzed at the University of Illinois at Chicago and then sent to Argonne National Laboratory for genetic sequencing and analysis to identify COVID variants
- DPI and Northwestern University partnering to interpret and present the data in unique ways. Meet weekly with IDPH CD surveillance staff

Illinois

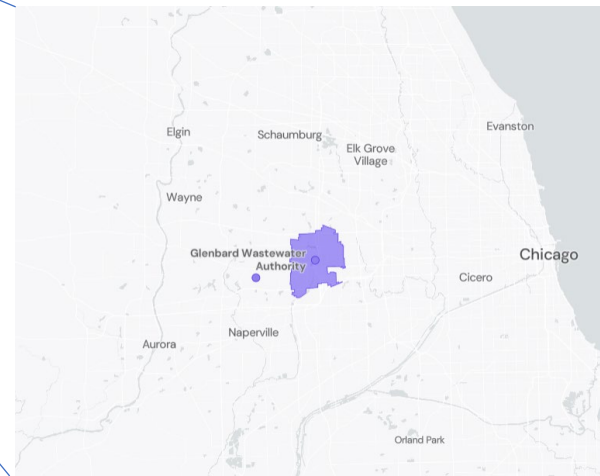
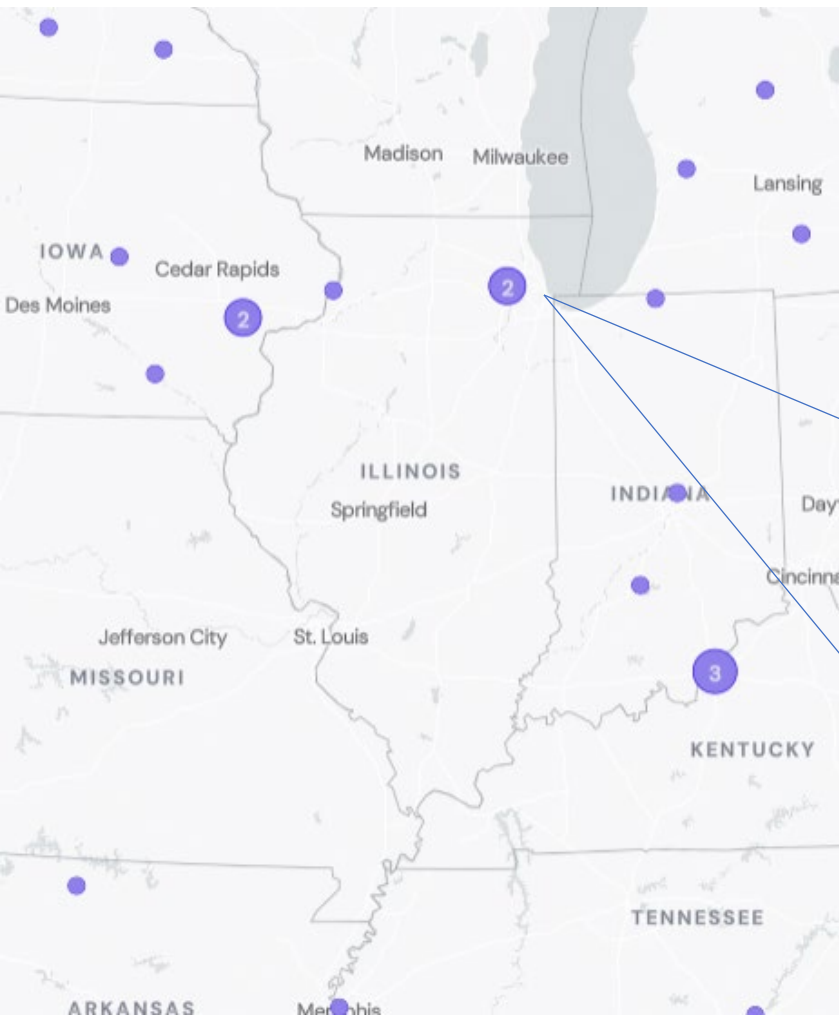
Wastewater Surveillance System

- 75 sites in IL
- Working to expand state-wide coverage



Separate effort – Wastewater SCAN

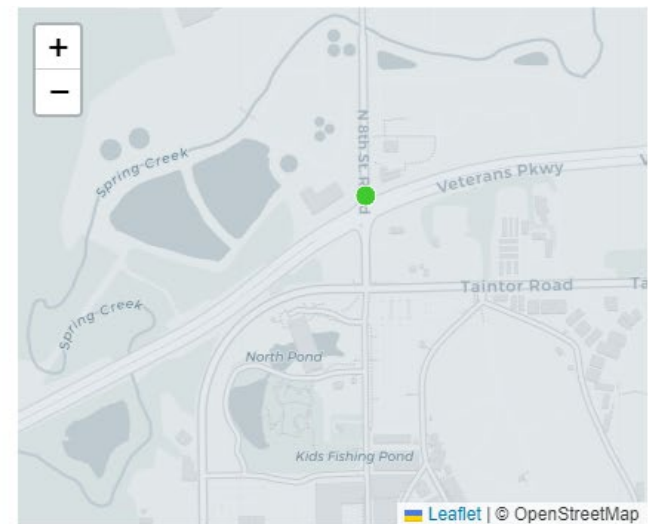
- Wastewater SCAN is based at Stanford University, in partnership with Emory University, and funded through philanthropy.
- “Goal is to show that a national wastewater monitoring system is a valuable part of our public health infrastructure, can inform public health responses.”



Spring Creek Wastewater Treatment Plant

Springfield, IL 62707

Population served: 100000



Managed by

Sangamon County Water Reclamation District

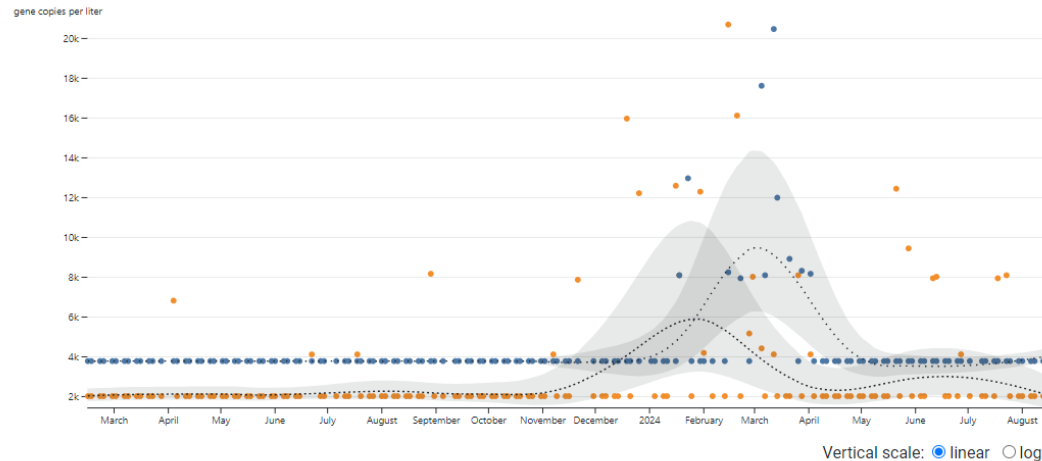
RSV SARS-CoV-2 Influenza

Influenza Measurements in Wastewater

Samples are collected at wastewater treatment plants from across the state and analyzed at our lab in Chicago. Results are posted and updated weekly. Numbers on the y-axis represent influenza A/B viral remnants in gene copies/liter. Dates on the x-axis are dates the samples were collected.

Last collected: 8/15/2024

Influenza A Influenza B



Download data

About the data



Monitoring for the threat of H5N1

NWSS (national wastewater surveillance system)

IDPH and the CDC monitors influenza trends by detecting influenza A in wastewater

CDC flags locations with Flu-A levels in the 80th percentile or higher compared to last flu season

Limitations: Detects influenza A (but not the subtype). Cannot distinguish potential human vs. animal sources

Illinois Wastewater Surveillance System

- Illinois has received a total of 7 CDC “flags” for high Flu-A counts. Each time we meet with LHD to inform and discuss
 - Increasing surveillance in localities with elevated counts -> No evidence of human or animal transmission
- “Flagged” plants have never shown sustained high signals – very intermittent and hard to interpret
 - Flagged plants often along significant bodies of water – wild birds?
- Working with academic partners to assay wastewater samples for H5 specifically instead of Influenzas-A narrowly
- Working to subsequence (H and N subtypes) out of wastewater – difficult from an analytic perspective

Illinois Wastewater Surveillance System

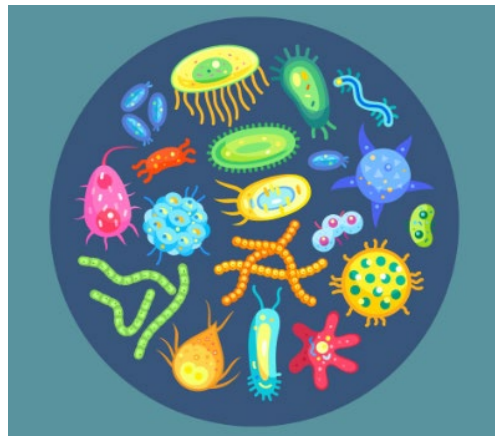
- Working with LHD partners to determine possible influenza inputs to the water system that may results in an elevated influenza-A level – Agricultural? Wild Birds? Truck Washes? Milk processing plants?
- Pending MMWR under review at CDC at this time that details these efforts: **“Wastewater surveillance for influenza A virus and H5 subtype concurrent with the highly pathogenic avian influenza (HPAI) A (H5N1) virus outbreak in animals — United States, May - July 2024”**





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Midwest Alliance for Applied Genomic Epidemiology (MAAGE)



MAAGE - Goals

The goal of the MAAGE is to improve IDPH lab's current bioinformatic workflows and capabilities to support broader and more in-depth 'omic analysis and data distribution on pathogens of public health importance in the state of Illinois.

Argonne national lab will develop a lasting bioinformatic pipeline and online platform to host IDPH data and support easier, cleaner, and more reliable genomic analysis into the future.

- 1. Provide a web-based genomics analysis platform that supports genomic epidemiology** through data management and analysis. This data scalable infrastructure with integrated search and analysis capabilities will leverage the current BV-BRC architecture.
- 2. Develop new technologies to track and assess the genomic basis of epidemiology** and relevant features across pathogens of public health concern.
- 3. Participate in community engagement outreach efforts led by UIUC**, including various activities, from education in bioinformatics in support of genomic epidemiology, to expert engagements in public health, to understanding of gaps, challenges, and opportunities.

MAAGE possible applications

- Pathogen detection
 - Bacterial and viral; genome assembly, annotation, quality assessment
- Cluster detection
 - Phylogenomic and evolutionary analysis
- Detection of emerging infectious diseases
 - Variant identification and tracking
- Monitor effects of control measures
 - Comparative analysis to identify closely related samples outside of Illinois
- Identify and track sources of disease and modes of transmission
- Antimicrobial resistance, especially in the context of HAI
 - Detection of AMR genes and plasmids
- Treatment support and guidance (ex. Malaria, STI)

MAAGE Portal

- Develop a lasting platform to support IDPH genomic epidemiological analysis
- Improve current analysis workflows for more in-depth 'omic analysis of pathogens of public health importance
- Design and deploy a robust data management framework to collect, process, analyze, share, and publish genomic data
- Develop internal facing dashboards that can support examination of sequencing data alongside traditional demographic and geospatial data to aid investigations
- Build a public facing databases that improve IDPH data availability and community engagement to aid provider outreach and future clinical sample acquisition


3.37.14

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BACTERIAL AND VIRAL BIOINFORMATICS RESOURCE CENTER

Welcome to the Bacterial and Viral Bioinformatics Resource Center (BV-BRC), an information system designed to support research on bacterial and viral infectious diseases. The BV-BRC combines the data and tools from the Legacy BRC resources: PATRIC, the bacterial BRC, and IRD and ViPR, the viral BRCs. If you are transitioning from PATRIC or IRD/ViPR, please refer to the [Quick Start Guide](#) to learn how to get started with BV-BRC. Please **contact us** if you have any questions or issues.

SEARCH

All Data Types
Find a gene, genome, microarray, etc
Q All terms

BROWSE

BACTERIA

ARCHAEA

VIRUSES

EUKARYOTIC HOSTS

ANALYZE DATA IN BV-BRC

Upload and analyze your data in the private workspace. [Register](#) or [Login](#) to get started.

SEARCH	ANALYZE	MANAGE DATA	BATCH ACCESS
Taxa	Assembly	Access Private Workspace	Command-Line Interface
Genomes	Annotation	Save Search Results	Data API
Proteins	BLAST	Upload Data	FTP
Specialty Genes	MSA	Access Analysis Jobs	
All Searches...	All Tools & Services...	Share and Publish	

QUICK START

REFERENCE GUIDES

TUTORIALS

Information for PATRIC Users

The new BV-BRC system is built on the PATRIC system. Viral data and analysis tools and services from IRD/ViPR have now been integrated into the resource.



[BV-BRC Data and Functionality Overview](#)

Information for IRD/ViPR Users

The new BV-BRC system is built on the PATRIC Bacterial BRC system and incorporates data and tools from IRD and ViPR. The following materials are designed to aid IRD and ViPR users in using BV-BRC.



[IRD/ViPR to BV-BRC Mapping](#)

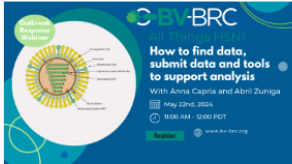
OUTBREAKS

[Influenza H5N1 2024](#)
[SARS-CoV-2](#)

NEWS & ANNOUNCEMENTS

[BV-BRC H5N1 Webinar](#)

Watch the Recording now to see BV-BRC updates in response to H5N1 Outbreak. ... [read more](#)



COMMUNITY NEWS



BV-BRC

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3d

Our H5N1 weekly report just dropped- check it out here. <https://lnkd.in/gpAH3hTp>

1

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Bacterial and Viral Bioinformatics Resource Center - BV-BRC

CBV-BRC 3.37.14

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Taxon View

Viruses » Negarnaviricota » Insthovicetes » Articulavirales » Orthomyxoviridae » Alphainfluenzavirus » Alphainfluenzavirus influenzae » **H5N1 subtype** (30859 Genomes)

Overview

Taxonomy

Strains

Genomes

Features

Proteins

Protein Structures

Domains and Motifs

Epitopes

Experiments

Surveillance

Serology

Taxonomy Summary

Genomes By Metadata

Taxon ID

102793

Taxon Name

H5N1 subtype

Taxon Rank

serotype

Strains

7040

Genomes / Segments

30859

Protein Coding Genes (CDS)

83122

Mature Peptides

21877

3D Protein Structures (PDB)

115

Reference/Representative Genomes

Type

Genome Name

Reference

Influenza A virus (A/goose/Guangdong/1/1996(H5N1))

Reference

Influenza A virus (A/goose/Guangdong/1/1996(H5N1))

Reference

Influenza A virus (A/goose/Guangdong/1/1996(H5N1))

Reference

Influenza A virus (A/goose/Guangdong/1/1996(H5N1))

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Reference

Influenza A virus (A/goose/Guangdong/1/1996(H5N1))

Reference

A/Goose/Guangdong/1/96

Reference

Influenza A virus (A/goose/Guangdong/1/1996(H5N1))

Reference

A/Goose/Guangdong/1/96

Host

Host	Count
Avian	26250
Human	2766
Environment	838
Nonhuman Mammal	575
Others	41

Isolation Country

Isolation Country	Count
Egypt	2507
Indonesia	2592
Viet Nam	5763
China	6469
2004	2619
2006	4946
2007	3700
2005	3776
Others	13210

Collection Year

Collection Year	Count
2004	2619
2006	4946
2007	3700
2005	3776
Others	15717

Questions?



IDPH communicable disease section:
(217)-782-2016; Matthew.Leslie@illinois.gov



Climate and Health in Illinois

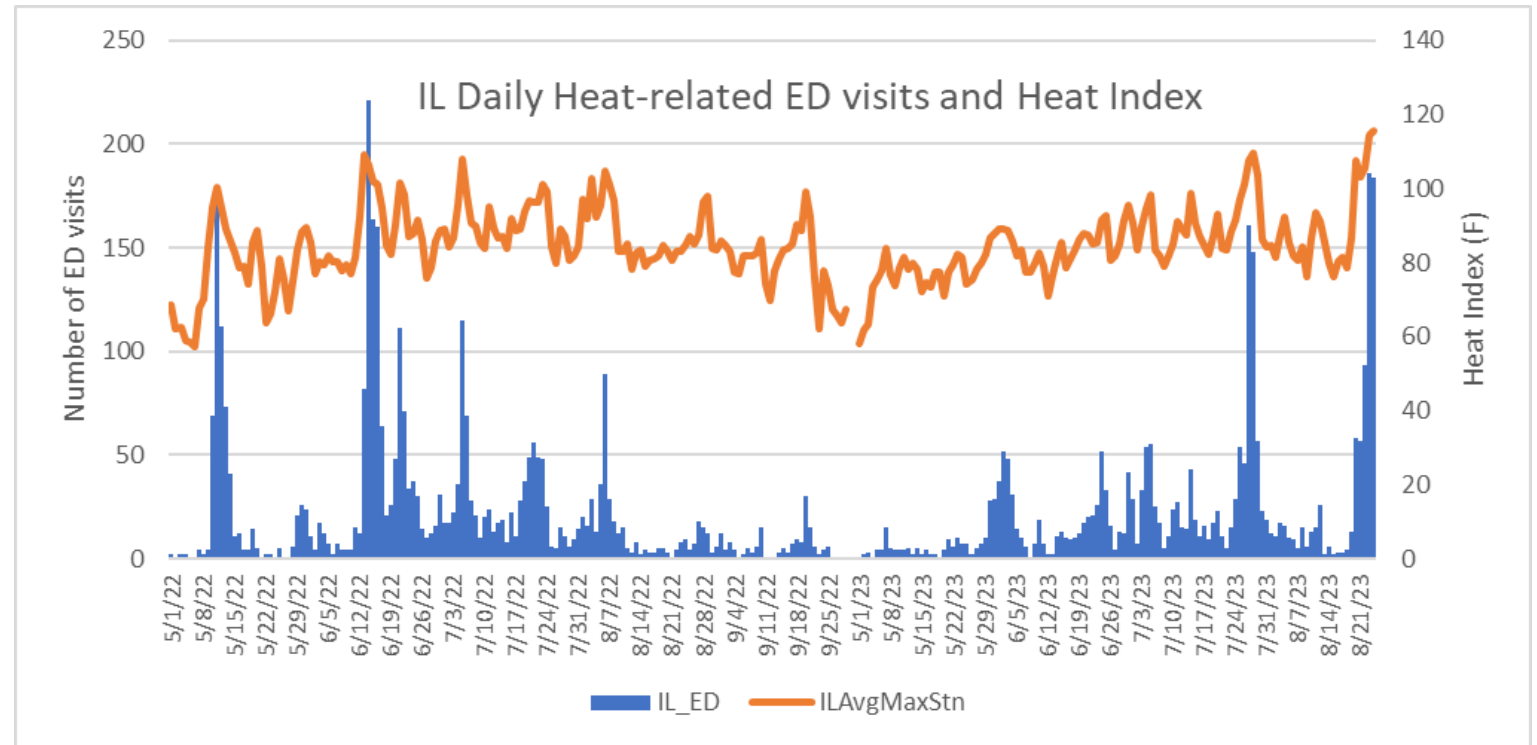
Graham Briggs, MS

State Epidemiologist

Illinois Department of Public Health

Graham.briggs@illinois.gov

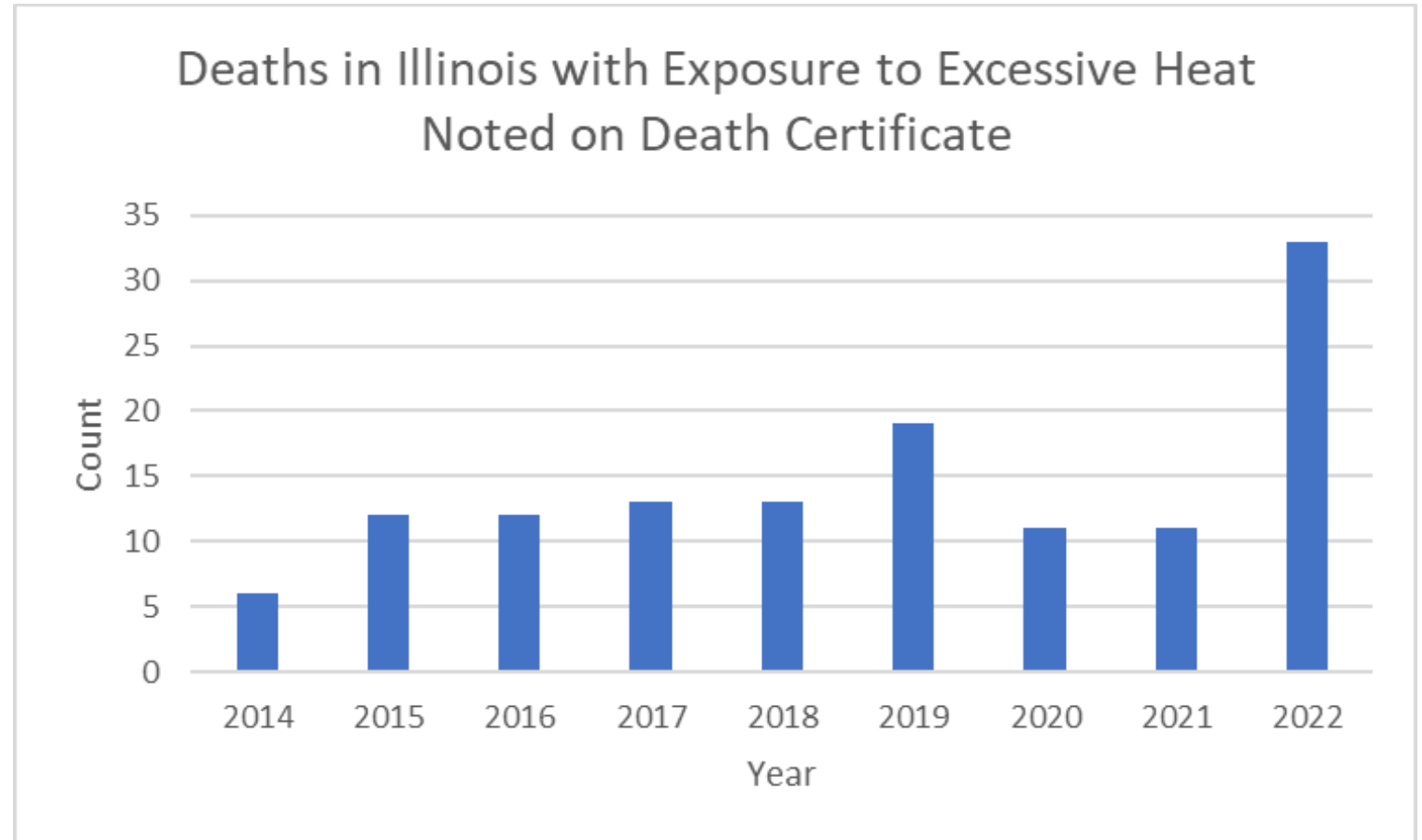
Priority #1 Increase information sharing with the public through our website



Priority #2 Increase
community
resilience and
emergency
response capacity



Priority #3 Better understand extreme weather impacts to health and develop community level strategies



Partnership with University of Illinois System

- Contract initiated with University of Illinois to partner on climate related work
- Building longer term capacity to coordinate efforts, involve internships, grow sustainability
- Current approved workplan involves:
 - Assessment of ongoing public health climate initiatives across Illinois
 - Development and production of health and climate informatics tool
 - Development and management of “Climate and Health Impact” workgroup

Assessment of ongoing public health climate initiatives across Illinois

- Create a report that includes geographic region, populations impacted, and outcomes based on current climate action plans (CAPs) created by Illinois state agencies, counties, and cities
- Identify potential public/private collaboration opportunities with organizations that could impact climate related health outcomes
- Research and produce a summary document of other state's public health related climate initiatives including description of initiative, implementation process, successes, and challenges

Development and production of health and climate informatics tool

- Create data tool containing but not limited to, heat/cold index, rain, flooding, ED visits, and other health conditions related to climate to be used for predictive modeling and communication of climate changes that may impact community health

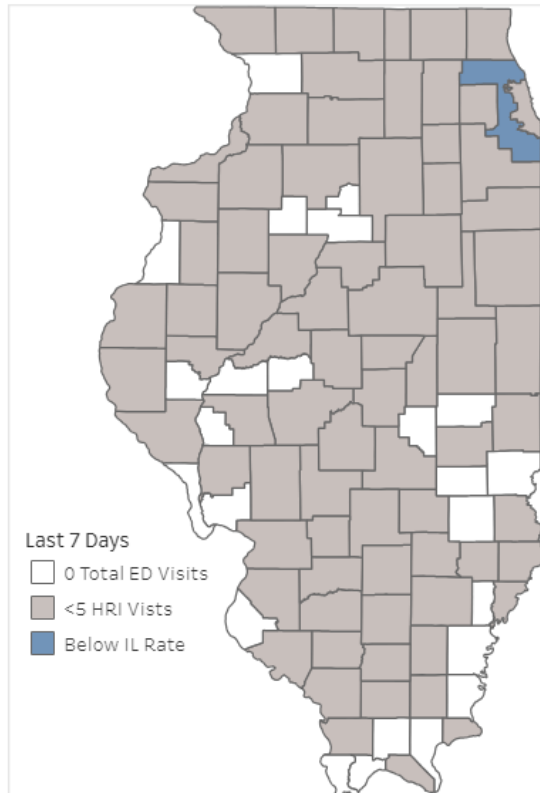
Heat/cold Surveillance and Risk Reduction

Illinois ED Visit Trends for Heat Related Illness

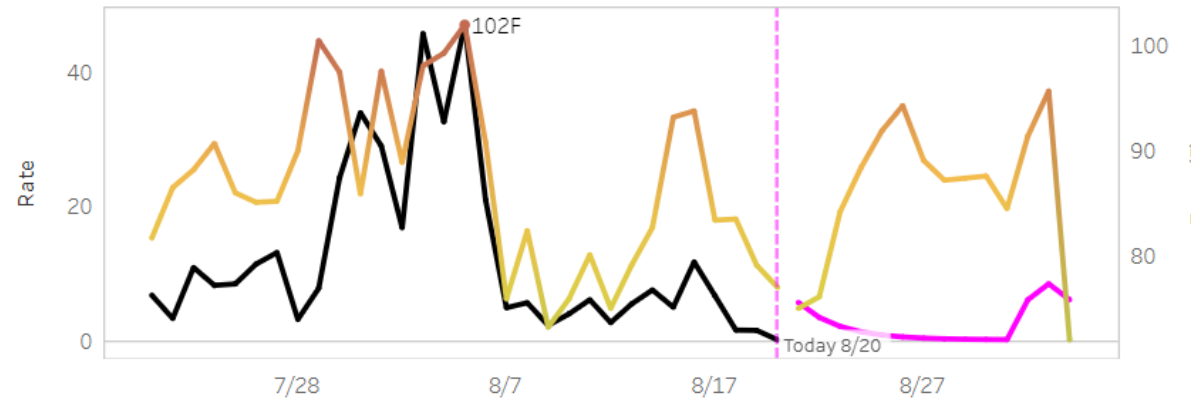
(Internal Use Only)

Last updated: 8/20/2024 5:30 AM

Rate of Heat Related Illness ED Visits
per 10k ED Visits - Last 7 Days Combined
Regions refer to location of treating hospital.
[Select regions](#) to filter graphs and table below.



Daily Rate of Heat Related Illness ED Visits, per 10k ED Visits (Left Axis)
Daily Max Feels Like Temp (F) (Right Axis)



[Line Graph Filters](#)

Show last N days

30

Filter by Sex

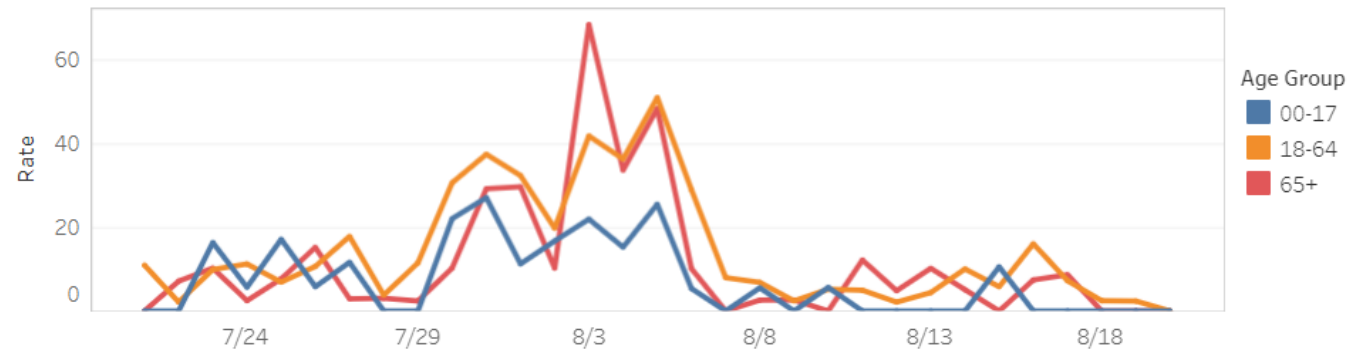
(All)

Rate
Actual
Forecast

Temp (F)

50 100

Age Trends - Daily Rate of Heat Related Illness ED Visits, per 10k ED Visits



Development and management of “Climate and Health Impact” workgroup

- Create a list of key opinion leaders from government agencies, healthcare, academia, non-profits, and private sector to be considered for the workgroup
- Develop mission, vision, and goals of workgroup
- Schedule meetings, set agendas, and provide follow up on action items of all workgroup meetings and projects
- Identify and work with partners linked to disparately impacted communities with a focus on health equity

Additional Highlights

- Collaborating with effort through Northwestern University on creation of a heat vulnerability index
- Building relationships with CDPH around their efforts on heat and climate
- Looking at options on how to consistently share timely information with the public and medical providers

Discussion and Questions

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