

# City of San Antonio



## Minutes Community Health, Environment, and Culture Committee

### 2021 – 2023 Council Members

Ana Sandoval, Dist. 7 | Jalen McKee-Rodriguez, Dist. 2  
Phyllis Viagran, Dist. 3 | Teri Castillo, Dist. 5

**Thursday, October 27, 2022**

**2:00 PM**

**City Hall**

The Community Health, Environment, and Culture Committee convened a regular meeting in City Hall beginning at 2:07 PM. City Clerk Debbie Racca-Sitre took the Roll Call noting a quorum with the following Committee Members present:

**Members Present:** Ana Sandoval, *Chair*  
Jalen McKee-Rodriguez, *Member*  
Phyllis Viagran, *Member*  
Teri Castillo *Member*

**Members Absent:** None

### Approval of Minutes

#### 1. Approval of minutes for the October 4, 2022, Community Health, Environment, and Culture meeting.

Councilmember Viagran moved to Approve the minutes of the October 4, 2022 Community Health, Environment and Culture Committee meeting. Councilmember McKee-Rodriguez seconded the motion. The motion carried by the following vote:

**Aye:** Sandoval, McKee-Rodriguez, Viagran  
**Absent:** Castillo

Councilmember Castillo entered the meeting after the vote.

### Public Comments

There were no Public Comments.

### Briefing and Possible Action on

2. **A briefing by the Texas Commission on Environmental Quality on planning activities for Bexar County Ozone nonattainment.** [Erik Walsh, City Manager; Claude A. Jacob, Health Director]

Mario Martinez, Assistant Director of Metro Health, introduced Allison Stokes, Texas Commission on Environmental Quality (TCEQ) State Implementation Plan Team Leader. Stokes provided information on the Ozone standard and reported that Bexar County was expected to obtain attainment by 2020. She stated that the Bexar County Emissions Inventory (EI) State Implementation Plan (SIP) revision was due by September 24, 2020. Stokes provided a chart on the San Antonio High Ozone Values over the past three years which hovered around 73 parts per billion (PPB) with the maximum of 75 PPB which was the National Ambient Air Quality Standard (NAAQS). She added that Bexar County did not meet the marginal attainment date which required a 70 PPB maximum.

Stokes provided a chart of the classifications for non-attainment beginning with Marginal, progressing to Moderate, Serious, Severe and Extreme. She stated that Bexar County was at the Moderate threshold which required a 15% Reduction in Volatile Organic Compounds (VOC) emissions in six years from 2017 through 2023. Stokes displayed a chart of the VOC Emissions Trends which indicated that emissions had increased between 2017 and 2020 with the largest amount of emissions being Area Sources which were small industrial, commercial, and residential sources that generated emissions such as surface coatings, gas stations, household products, and pesticides but not including large industrial sources such as concrete and power plants.

She reported that TCEQ required the implementation of Reasonably Available Control Technology (RACT) for Bexar County but added that since the emissions were not due to large industrial sources, the reduction was more difficult to attain and RACT did not have much impact. Stokes stated that most of Bexar County's pollution was from Nitrogen Oxide (NOx) and not VOCs so the focus should be on reducing NOx. Stokes stated that TCEQ was researching potential control strategies to help meet the 15% reduction and would analyze the effectiveness, cost and timeline for the potential strategies. Stokes requested feedback on the potential strategies and provided a list of contact persons for TCEQ.

**DISCUSSION:**

Chair Sandoval thanked Stokes for her presentation and noted that some potential strategies such as emissions testing on older vehicles, which included an additional fee and potential cost for mitigation on the vehicle, might adversely impact lower-income populations. Chair Sandoval requested a timeline for the implementation of the new mitigation effort and recommended a public assistance program. Stokes commented that there was previously a program to assist low-income residents to retrofit their vehicle, but the program was vetoed and was no longer in place.

Councilmember Viagran requested information in both English and Spanish to help provide education to residents regarding the new requirement and cost for vehicle inspections.

Chair Sandoval commented that Ozone was a harmful lung irritant that impacted all residents but especially elderly individuals and children. She closed the discussion by requesting clarification on

the timeline and recommended that the City adopt mitigation measures sooner than on the deadline.

Councilmember Castillo suggested that some areas of town had more soil contamination and noted that residents were asked to make changes while businesses could buy into environmental credits. She requested information on standards for recycling businesses. Stokes stated that she would provide the information. Martinez stated that the City did not have authority over recycling businesses so Metro Health worked with TCEQ as the State provided oversight of Ozone emissions.

Councilmember McKee-Rodriguez stated that he had met with the Director of Communications & Engagement who mentioned that acronyms were not accessible, so he appreciated the Chair's request to clarify the acronyms utilized in the presentation. Councilmember McKee-Rodriguez asked if there was research on what happened to Ozone during the pandemic when people stayed home. Stokes stated that while there were reductions from people staying home, there were more delivery trucks which caused emissions to stay level or increase. Councilmember McKee-Rodriguez commented that the City had declared racism as a public health crisis and requested a heat map of where the levels were worse within Bexar County. Stokes stated that she would see if this existed. Councilmember McKee-Rodriguez requested a follow-up presentation on recommended solutions.

Chair Sandoval requested clarification on the required reductions in VOCs since NOx actually caused more emissions. Stokes explained that VOCs and NOx's were Ozone precursors and were measured instead of the actual Ozone itself. Chair Sandoval suggested that reducing NOx's would lead to improvements and requested an updated mitigation timeline when available.

Councilmember Castillo recommended that Metro Health develop a distance requirement for industrial recycling plants and heavy industrial next to residential areas to help keep residents healthy.

No action was required for Item 2.

**3. A briefing from Metro Health on the Council Consideration Request regarding the establishment of a food access roadmap.** [Erik Walsh, City Manager; Claude A. Jacob, Health Director]

Claude Jacob, Director of Metro Health, provided background and statistics on food insecurity and the Council Consideration Request (CCR) proposing the establishment of a Food Access Plan to address food insecurity. Jacob included background on current health initiatives such as: Community Gardens, Healthy Corner Stores, Food Tree Project (Fruit Tree and CommuniTree), Health Resource Brochure for each Council District, VivaHealth program cooking classes and Tamōx Talōm which created a Food Forest at Padre Park in Council District 3. Jacob listed improvements in the Vacant Lot Initiative that would expand urban farm and food production and provided an overall timeline with milestones accomplished since January 2022.

Jacob listed key stakeholders and reported results of outreach and engagement efforts related to

the analysis of the CCR. Jacob listed the causes of food insecurity as: poverty, access to transportation, food and medical care, housing, education and racism. Jacob stated that quality, nutritious food was not universally accessible.

Jacob stated that a Food Insecurity Assessment had been completed with the University of Texas at San Antonio (UTSA) approximately 10 years ago which included an analysis of law and policy impact, lived experience and community participatory research and a data dashboard. Jacob recommended replicating the study and listed staffing needs, collaboration, policy, programming in order to oversee a new study which would be completed by an outside expert selected through a competitive request for proposals. Jacob added that the workgroup would convene partners, plan and administer the assessment, develop metrics, and support coordinated action among partners.

#### DISCUSSION:

Councilmember McKee-Rodriguez, co-author of the CCR, thanked local advocates Stephen Lucke and Jovanna Lopez for attending the meeting. He recommended that the study should result in a 10 year plan with specific goals that could include opportunities with Bond funding.

Councilmember McKee-Rodriguez moved to Refer to B Session. Councilmember Viagran seconded the motion. The motion carried by the following vote:

**Aye:** Sandoval, McKee-Rodriguez, Viagran  
**Absent:** Castillo

**4. A briefing from Metro Health on the Council Consideration Request regarding the feasibility of an insulin cost-share program.** [Erik Walsh, City Manager; Claude A. Jacob, Health Director]

Claude Jacob, Director of Metro Health, introduced the Item and provided background on Diabetes care and the Council Consideration Request (CCR) proposed program. Jacob presented a map of Diabetes hospitalization rates and compared it to the COVID-19 case fatality rate which showed a correlation. Jacob provided information on the difference between Type 1 (5-10% of the cases) which always required Insulin and Type 2 Diabetes (90-95% of the cases) which were treated by methods other than Insulin 70% of the time. Jacob described both Federal and State Legislation that had been initiated for Seniors on Medicare, individuals on Medicaid and the uninsured which did not apply to individuals on private insurance. Jacob commented that lack of insurance contributed to decreased access to Insulin and listed discount programs and Affordable Care Act Health (ACA) Insurance Plans.

Jacob outlined the following actions: 1) Increase lobbying efforts and support for legislation at the State and national level to cap Insulin prices and expand Medicaid coverage in Texas, 2) Hire or subcontract three patient navigators to help enroll more residents in the ACA, and 3) Secure general funding for diabetes prevention, self-management and education. Jacob reported on the results of community feedback efforts and described activities and partnerships that supported the national framework to guide Public Health Professionals in eliminating health inequities which was included in the SA Forward Plan.

Jacob described Metro Health's new Diabetes Care Continuum and stated that the program aligned with Metro Health Priorities and Public Health Strategies and created two patient navigation teams, a \$100,000 Insulin Safety Fund, Eastside and Westside Health Hub Pilots each serving 1,000 residents, Family Health Education Workshops, and a recommendation to host Siclovía (community bicycle days) in Council District 2 or Council District 4. Jacob outlined the plan for outreach and empowerment including additional staff to develop educational materials and guide legislative priorities to address Diabetes. Jacob provided an outline of a new Diabetes Health Education Plan.

Jacob closed the presentation by comparing a Standalone Insulin Program versus a Continuum of Options and stated that the latter would have a larger impact. Jacob listed the potential cost for the program and outlined the following options: 1) maintain current effort to provide health education through no cost workshops, 2) Support increased community partnerships and increased outreach and empowerment at a cost of \$600,000, and recommended 3) Support the comprehensive Diabetes Care Continuum model at a cost of \$1.6 million.

#### DISCUSSION:

Chair Sandoval thanked Councilmembers Rocha Garcia and McKee-Rodriguez for bringing the CCR forward and recognized Councilmember Rocha Garcia to speak on behalf of the Item.

Councilmember Rocha Garcia stated that this had been in the works for nine months and thanked Metro Health for their analysis and recommendation. She mentioned that addressing health disparities was a priority and that many residents lacked the access to quality healthcare, were uninsured or under-insured often because they could not afford the cost.

Councilmember Rocha Garcia supported the expansion of Medicaid at the State level but was not optimistic that it would occur and stressed that the local government would need to step in to help our residents and provide them access to healthy food and medication including Insulin. She declared that Insulin was a life-saving medication that needed to be accessible and affordable without requiring residents to travel to a foreign country to purchase the medication.

Councilmember Viagran expressed concern regarding the cost of the Comprehensive Diabetes Care Continuum noting that education had already been implemented and had not been successful. She commented that Latino culture needed to be considered in developing the program. Councilmember Viagran cautioned that there needed to be consideration of mental and social barriers, access to healthy foods, safe places to exercise and requested performance metrics and a return on investment.

Jacob asked Public Health Administrator Kathleen Shields to describe the partnership with the YMCA and educational programs. Shields stated that new components included the expansion of partnerships and community health hubs, patient navigation and Insulin safety net and outreach and empowerment. Councilmember Viagran requested a breakdown of the \$1.6 million Budget.

Councilmember McKee-Rodriguez acknowledged that the work was significant and declared Diabetes a global epidemic with many residents having to make difficult choices between rent, utilities, food and medicine. Councilmember McKee-Rodriguez commented that Diabetes

impacted someone that everyone knew and recommended expansion to help even more people. Jacob suggested beginning the program and to build on it and expand it in the future.

Councilmember Castillo stated that she envisioned Medicare for all in our country but that until that happened, the City needed to do everything it could to help connect families to resources and education. She stressed the importance of creating community hubs, assisting with access to healthy food and medicine.

Chair Sandoval asked about the targets adopted by the global AIDS campaign several years ago and recommended looking at metrics for Diabetes that might already have been developed. Jacob committed to aligning with national and global efforts and developing performance measures for the program. Chair Sandoval asked about the gap in the uninsured. Dr. Junda Woo stated that about half of those uninsured were eligible for a reduced premium and added that Metro Health provided free healthcare in San Antonio. Chair Sandoval recommended targeting enrollment in the Comprehensive Diabetes Care Continuum with partners and requested a strategy for outreach related to the Insulin Safety Fund. Chair Sandoval asked where Metro Health would find the money. Assistant City Manager David McCary recommended taking the Item to a B Session after vetting by the Office of Management and Budget.

Councilmember Viagran suggested that if the two Hubs were successful, there could be an expansion which would cost additional money.

Jacob noted that conditions had worsened with COVID and spoke in support of the recommendation.

Councilmember McKee-Rodriguez requested an expansion plan and cost in the B Session presentation.

Councilmember McKee-Rodriguez moved to Refer to City Council at a B Session. Councilmember Castillo seconded the motion. The motion carried by the following vote:

**Aye:** Sandoval, McKee-Rodriguez, Viagran, Castillo  
**Absent:** None

## **Adjournment**

There being no further discussion, Chair Sandoval adjourned the meeting at 4:09 PM.

**Approved**

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*Ana Sandoval, Chair*

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*Debbie Racca-Sittre, City Clerk*