

#40

COMPLETE

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Q1 Issue Statement: [State the problem your recommendation will address. Insert links to reports where appropriate.]

As an RN poisoned by second hand smoke I am now sensitive to ALL perfumes, such as, cleaning product perfumes, body care product perfumes or anything that has, as an ingredient, 'perfume' or fragrance'. I find it most distressing to breathe in a heavily perfumed bathroom. It is choking and causes 'exposure' symptoms of burning sinuses, lungs and skin and requires a nebulizer and 2 meds to bring symptoms under control. I am not alone in this problem. More and more people are affected negatively by 'perfume' exposure'. We need Public bathrooms and offices that are safe for people with lung disabilities related to asthma and allergies to perfumes (air 'fresheners' devices) in public areas.

Q2 MPA Framework Goal #: [Check which goal/s this recommendation addresses. View MPA Framework document]

Goal 2: Livable Communities & Purpose. We will live in and be engaged in communities that are age-friendly, dementia-friendly, and disability-friendly.

Goal 3: Health & Well-being. We will live in communities and have access to services and care that optimize health and quality of life.

Master Plan for Aging (MPA) Recommendation Form

Q3 MPA Framework Objective #: [Check which objective/s this recommendation addresses. View MPA Framework document]

Objective 1.1: Californians will have access to the help we need to live in the homes and communities we choose as we age.

Objective 2.1: California's neighborhoods will have the built environment to fully and meaningfully include older adults, people with disabilities, and people of all ages.

Objective 2.2: Californians will age with lifelong opportunities for social and civic engagement, volunteering, learning, and leadership.

Objective 3.1: Californians will live in communities with policies and programs that promote well-being throughout our lifespans.

Objective 3.2: Californians will have access to quality, affordable, and person-centered health care through delivery systems that are age-friendly, dementia-friendly and disability-friendly.

Objective 4.2: Californians will be protected from abuse, neglect, and exploitation as we age.

Q4 Recommendation: [Explain your recommendation in one to two sentences.]

Legislation prohibiting any petrochemical-based air freshener in public spaces (similar to restrictions related cigarette smoking in public places as both contain toxic petrochemicals).

Q5 Target Population and Numbers: [Describe groups of Californians impacted by this recommendation, with numbers if available.]

All sentient beings including human children and adults, abled and disabled. Just because abled people don't feel distress breathing perfume it doesn't mean it is not harming them. People like me are the like the 'canary in the coalmine' scenario and can serve as a community-wide early warning system to all.

Q6 Detailed Recommendation: [Insert detailed bullet points describing your recommendation.]

Air fresheners are 'unrestricted' in terms of public safety and may have toxic chemicals included in the ingredient 'perfume' which is trade-secret protected.

Air fresheners such as all 'Glade' products and those similar may have toxic chemicals that may be endocrine disrupters which may cause infertility or hormonal imbalances among other things.

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Q7 Evidence that supports the recommendation: [Add links or summaries of research evidence that support the recommendation. Provide links or summaries of research evidence that support your recommendation]

Check out the Centers for Disease Control agency-wide guidelines for disallowed perfumes, ie, 'plug-ins', 'infusers', pot-pouri, etc. The list is quite extensive. It stands to reason that if the CDC has made such strict guidelines to protect their employees there must be a very good reason why; they are harmful to humans.

Q8 Examples of local, state or national initiatives that can be used as an example of a best practice: [Provide any available links and sources.] Local: State: National: Other:

National:

CDC Indoor Environmental Quality Policy 2009:

Appendix A

C. Building Occupants 1. & 4.

Q9 Implementation: [Insert actions state agencies, legislators, counties, local government, or philanthropy can take to move this recommendation forward. Some of the entities listed below may or may not be applicable to each recommendation.] State Agencies/Departments: [action to be taken by Governor or specific state agencies] State Legislature: [legislation needed to implement recommendation] Local Government: Federal Government: Private Sector: Community-Based Organizations: Philanthropy: Other:

State Legislature

Q10 Person-Centered Metrics: [Individual measures of inputs or outcomes that can be used to measure the recommended action's impact on people.]

Questionnaire to Asthma and Allergy patients through Pulmonology and Allergy doctors offices.

Q11 Measuring Success: [Describe specific metrics that could be used to empirically measure the effectiveness of your recommendation]

Complete prohibition of above listed CDC disallowed products OR using natural products such as Tea Tree Oil for cleaning which also has a natural antibacterial quality to it.

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Q12 Measuring Success: [How would we know that the implementation of your recommendation is successful?]

Short term: By 2020...

The first time an affected person enters a perfume free bathroom or office the success is in not having the lungs and sinuses assaulted by these toxic chemicals. It is immediate and is characterized by lack of stress and symptoms.

Mid term: By 2025...

As more and more airports, offices, retail stores, etc come into compliance with the new law people who were previously unable to use a public place/bathroom are able to co-mingle with other members of their community. The objectives described above would be successfully met.

Long term: by 2030...

same

Q13 Data Sources: [What existing data can be used to measure success or progress?]: Existing data sources: [specify datasets, variables, and data owner/location] Suggestions for data collection to evaluate implementation of this goal when no data sources exist:

As stated earlier, questionnaire of patients in allergy doctors offices.

Q14 Potential Costs/Savings: [insert any research, actuarial analysis or other evidence of the cost of this recommendation or potential savings]

The places of business would not have to buy the 'air fresheners' and people would save money by not having to take medicines, inhalers and nebulizers and might even avoid office visits or ED visits.

Q15 Prioritization: [How would you prioritize your recommendation relative to other needs/priorities?]

Medium

Q16 Contact information:

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