

Meeting Minutes April 1, 2021 Special Meeting

The meeting was held via Zoom conference call.

Committee members present

Megan Dunn Adrienne Fraley-Monillas – Vice Chair Kyoko Matsumoto Wright Stephanie Wright – Chair

Committee members absent Anji Jorstad

Staff present

Shawn Frederick, Chris Spitters, Heather Thomas, Pam Aguilar, Tracey Kellogg, Ragina Gray, Katie Curtis, Carrie Parker, Nicole Thomsen, Sarah de Jong, Nikki Thompson (legal counsel), Rod Younker (legal counsel)

Call to Order

The special meeting of the Executive Committee was called to order by Chair Stephanie Wright at 9:02 a.m. via Zoom video conference.

Roll Call

Roll call was taken by Ms. Sarah de Jong who reported there was a quorum present.

Arrivals/Departures

Ms. Fraley-Monillas arrived at 9:09 a.m. Ms. Dunn departed at 10:29 a.m.

Approval of Minutes

It was moved by Ms. Megan Dunn and seconded by Ms. Kyoko Matsumoto Wright to approve the minutes for the regular meeting of February 25, 2021. The motion passed with 3 yes votes, 0 no votes, 2 absent (Jorstad, Fraley-Monillas).

Action

Approve the reciprocal agreement with the Sound Foundation for Public Health, and forward to the full Board for action (SR 21-032; H. Thomas)

A draft of the reciprocal agreement between the Health District and the Sound Foundation for Public Health is complete. This version of the agreement addresses audit requirements and uses the Rucker Building as an in-kind office space for the physical address. The foundation is finalizing documentation to be submitted to the Secretary of State that will allow for it to become a nonprofit corporation. If the agreement is approved at the next full Board of Health meeting, it would not be able to become fully executed until the foundation has achieved nonprofit corporation status.

It was moved by Ms. Dunn and seconded by Ms. Matsumoto Wright to authorize the Administrative Officer to execute the reciprocal agreement with the Sound Foundation for Public Health and forward to the full Board for action. The motion passed with 3 yes votes, 0 no votes, 1 absent (Jorstad), and 1 abstention (Fraley-Monillas). Approve the agreement and memorandum of understanding between Snohomish Health District and Washington State Nurses Association, effective when fully executed, through December 31, 2022, and forward to the full Board for action (SR 21-034; P. Aguilar)

Ms. Pam Aguilar reviewed some of the highlights of the agreement:

- 2% cost-of-living adjustment (COLA), retroactive to Jan. 1, 2021, and 2% COLA in 2022
- Employees who have health insurance for themselves and dependents (children and/or spouse) would be placed on the percentage plan, same as non-represented and other bargaining units
- Employee only insurance coverage would still have a flat \$880 coverage
- The option to become a member of the association has been added due to the AFSCME Supreme Court decision

A memorandum of understanding has been drafted for two of the registered nurses with the refugee health program who requested to be moved to the public health nurse (PHN) pay range because they both have a bachelor's degree, which is a requirement for public health nurses. These nurses would then be able to be utilized as PHNs working with the TB program.

It was moved by Ms. Adrienne Fraley-Monillas and seconded by Ms. Matsumoto Wright to approve the agreement (as shown in Exhibit A) and memorandum of understanding (as shown in Exhibit B) between Snohomish Health District and Washington State Nurses Association, effective when fully executed, through December 31, 2022 and forward to the full Board for action. The motion passed with 4 yes votes, 0 no votes, and 1 absent (Jorstad).

Authorize the Administrative Officer to execute the data-sharing agreement with the Department of Health for access to vital record information through February 28, 2026, and forward to the full Board for action (SR 21-035; S. Frederick)

The need for this agreement became known during the contract work that has taken place the past couple years. The Health District had a data-sharing agreement with a local media outlet that expired and during the review process it was determined the agreement was not consistent with the RCW at the time or with the standards of data-sharing agreements in existence. Moving forward, it was determined that we would revisit the entire issue of data-sharing agreements once the new RCWs came into effect on January 1, 2021. With these changes now in effect, we're able to move forward with resuming data-sharing agreements, but first must have a data-sharing agreement in place with the Department of Health. The agreement details the requirements of handling data and reporting any changes or violations to the use or access of the data. The Executive Committee confirmed this item move to the full Board as action and for Mr. Frederick to abbreviate the report when sharing with the full Board.

It was moved by Ms. Fraley-Monillas and seconded by Ms. Megan Dunn to authorize the Administrative Officer to execute the data-sharing agreement with the Department of Health for access to vital record information through February 28, 2026 and forward to the full Board for action. The motion passed with 4 yes votes, 0 no votes, and 1 absent (Jorstad).

Confirm the appointment of Kara Briggs to fill an unexpired term on the Public Health Advisory Council through June 2021, and forward to the full Board on consent (SR 21-033; N. Thomsen)

The tribal sector position has been vacant for about a year, and appointing Ms. Kara Briggs to this position gives the opportunity to provide a different voice for the Tribal Nation in the county.

It was moved by Ms. Dunn and seconded by Ms. Fraley-Monillas to confirm the appointment of Kara Briggs to fill an unexpired term on the Public Health Advisory Council through June 2021 and forward to the full Board on consent. The motion passed with 4 yes votes, 0 no votes, 1 absent (Jorstad).

Authorize the Administrative Officer to execute the Washington State consolidated contract amendment #20 with the WA State Department of Health. [walk-on item]

Staff is requesting the Executive Committee to approve this item due to the short turnaround time. This amendment adds about \$12,000,000 to the consolidated contract, increasing the total contract

consideration from DOH to about \$35,000,000. The funding is heavily weighted for COVID response activities, specifically mass-vaccination and testing, case investigation, contact tracing, and community outreach. There is also funding for childhood early brain building, which is tied to the VROOM application approved earlier this year, and about \$18,000 for Environmental Health's work with group a water systems. The urgency for having this agreement approved is due to the short turnaround between now and the end of the first FEMA reimbursement period. In addition to this contract, the Health District will need to enter into separate contracts with the County and other participants involved in mass vaccination clinics. Ms. Wright suggested more staff be brought on to ensure there is enough capacity to be able to take on this work. Any additional staff would be able to be a reimbursable expense through this funding.

It was moved by Ms. Jorstad and seconded by Ms. Dunn to authorize the Administrative Officer to execute the Washington State consolidated contract amendment #20 with the WA State Department of Health. The motion passed with 4 yes votes, 0 no votes, 1 absent (Jorstad).

Briefings

Proposed Environmental Health division restructure (SR 21-025; R. Gray)

This item came to the Public Health Program Policy Committee meeting on March 18 and the Administration Committee meeting on March 24. During discussions, the Program Policy Committee recommended minor changes regarding budget impact, which have been updated in this report. Following that meeting, it was also recommended for this item to be changed from an action to a briefing to allow feedback from all committees and then bring through for committee approvals next month. Ms. Ragina Gray recognizes items of this nature typically come before the Board as part of the budget process; however, with starting a new role during COVID last year, there was not enough time for Ms. Gray to fully digest the structure of the Environmental Health division before the budget process in 2020.

A brief overview of the current organizational structure of the land use and safe environments programs in Environmental Health was given by Ms. Gray, who also explained the two programs are united by name only and currently operate as though they are two separate programs. Allowing supervisors discretion over their individual programs would help provide better and faster service to the community.

There is a surplus in the 2020 budget, due to solid waste work having a lower priority compared to COVID activities. Ms. Gray would like place additional emphasis on these activities in 2021 by designating special-projects pay for a staff member to have a concerted effort into redesigning the solid waste program in 2021.

Additionally, there is a .5 FTE health educator who reports to the food program, and Ms. Gray would like a reassignment for that position to report to the division assistant director, allowing all Environmental Health staff to utilize the position, instead of being exclusive to the food program. The budgeting of this position would be reassigned to multiple programs instead of one, but the actual amount budgeted would not change.

2021 Environmental Health policy work plan (SR 21-026; R. Gray)

Ms. Gray has been working with Ms. Nicole Thomsen regarding the 2021 policy workplan and three priority efforts have been identified to move forward in 2021. A chart is included with the staff report that gives step-by-step months of when items would be taken through stakeholder groups and the Board. The three main areas of focus are:

- Food safety program fee schedule This was not updated in the 2021 budget cycle and is currently not achieving full cost recovery. Staff has met, and will continue to meet with, the Food Advisory Committee and the Washington Hospitality Association to gain feedback regarding the budget and any gaps within. This feedback will be considered and incorporated in any changes with the fee schedule.
- Health District enforcement code The focus for this would be as it relates to food establishments. The code is overdue for review and staff perform these actions regularly for food establishments. This is a priority for the Health District to ensure it remains in good legal

standing. As the code is reviewed, it may be appropriate to expand the focus to other facilities (water recreation facilities, solid waste facilities, etc.), but this won't be known until the codes are looked at more closely.

3. Land use code – There are currently several unofficial and outdated documents that need to be reviewed and either reversed and eliminated or formally adopted by the Board. In the fall of 2021, a revision of the Washington State code affecting land use activities will go into effect and is a primary driver for the timeline of this code review.

Ms. Fraley-Monillas voiced concern for food establishments just beginning to reopen and the difficulties they are facing in doing so. Ms. Gray clarified that these are early conversations and any changes would not take effect until the 2022 cycle. Ms. Dunn provided feedback to have a provision for some food establishments to have amnesty from fees or a tiered approach for food service establishments that have not fully recovered from closings caused by COVID.

Finance policy (SR 21-027; N. Thomsen, T. Kellogg) Budget policy (SR-21-027; N. Thomsen, T. Kellogg)

Ms. Thomsen requested to talk about these two items in conjunction, as they both relate to each other. Last year, the Health District began to look at overall policy framework. The current version of the finance policy has been in place since 2013, with a small update in 2016. The current approved policy is very narrative-heavy and there are a lot of changes that need to be made to be in compliance with state and District policy. After staff began reviewing the policy, it became evident the policy would need to be broken into three separate policies: finance, budget, and asset management. The initial conversation to break it into three separate policies was discussed with the budget ad hoc committee last year. The plan is for the finance and budget policies to work through committees as briefings this month and to solicit feedback and direction from committee members. Staff will then meet to discuss the requested changes, incorporate them into the documents, with the goal of bringing to the full Board for approval in May or June. Many of the changes are to bring the policies in alignment with general accounting principles and firming up any definitions that were unclear in the current version. The overall goal is to provide transparency, clarity, and structure and to ensure consistency with Health District practices and goals. Ms. Thomsen requested committee members create time to review and provide feedback on the policy and Ms. Wright offered to remind Board members during the full Board meeting on the 14th to share feedback to Ms. Thomsen and Ms. Kellogg. Specifically, staff requests guidance regarding the intended business difference between the emergency reserve and working capital reserve, whether committee members want to maintain these funds separately, and if staff need to provide additional definitions about what funds are accessed at which point.

Legislative update (no staff report; N. Thomsen)

There have been many substantial changes at the State level in the past two weeks. There are two bills we are focusing heavily on this session. The first is HB 1152, related to comprehensive public health districting. This bill has undergone additional revisions, but the main structure of the bill remains the same. The bill no longer has the same language about restructuring. It establishes a couple other levels of organization and oversight, with the Public Health Advisory Board (PHAB) at the top and works with the existing steering committee. The most recent change is around Board of Health input and restructuring. Previously, jurisdictions with over 800,000 in population would be exempt from participating. With this revision, those districts that have a Public Health Advisory Council (PHAC) would be able to participate in decision-making and would be exempt from the Board of Health restructure would not need to be restructured, but the PHAC would have additional rules set in place and changes in the definition of sectors and sector seats. This revision also clarifies the allocation of funds for shared services that would be activated at a minimum of \$60,000,000.

SB 5149 is still on the table but appears to have less traction, as can be seen in the budget proposals released late last week and moving through committee this week. There are a variety of proposals with a broad range for funding of foundational public health services from the general fund.

Health Officer update (no staff report; C. Spitters)

Due to time constraints, Dr. Spitters gave an abbreviated update on the COVID response. He reported that the case rate is now going back up, which could indicate we are heading into a fourth wave. The uptick in cases is a combination of two factors: the relief people are experiencing from the vaccine rollout and the corresponding maladaptive gatherings. If the current rate continues, it will only take a couple weeks to be out of eligibility for phase 3. Hospitalizations are now up to 28, where previously they were in the mid-teens. Another contributing factor is the variants. About 9% of specimens obtained through convenience sampling (rather than a representative sampling) were sequenced in March and we are seeing continued increase in the B1.1.1 strain. Other newly recognized variants of concern, B.1.427 and B.1.429, and one notification of a P1 (similar to the B.1.351) has some in vitro immunity escape characteristics. Variant 429 appears to transmit more easily but doesn't seem to be more deadly or possess more immune escape capabilities. The B.1.1.7 strain is currently a smaller proportion of cases but is growing rapidly. These variant strains are likely to take over previously circulating strains (e.g., B.1).

In Snohomish County, 27% of residents have received at least one dose and about 16% have now completed their COVID vaccination. It's estimated that it will take from mid to late summer to achieve substantial herd immunity and possibly longer if there are supply issues. The message must be strong that there needs to be voluntary compliance to turn increasing case rates around or it will lead to involuntary compliance with further impacts on the economy. The indicators the Governor is watching for phase 3 include the rolling two-week rate (i.e., new COVID cases per 100,000 per 14 days), new COVID hospitalization rate, and statewide intensive care bed occupancy. If any of these exceeds thresholds, we would be returned to phase 2. Or if we as a county feel the case rate is out of control, we may take a step back independent of the state's direction.

Executive Session

The Snohomish Health District Board of Health Executive Committee convened into executive session for the purpose of discussion of wages for a class of employees pursuant to RCW 42.30.110(1)(g) and collective bargaining matters pursuant to RCW 42.30.141(4). Executive session is expected to last up to 5 minutes. Unless extended to a later time, the Executive Committee will reconvene into regular session at 10:35 a.m. and is not expected to take action.

The Executive Committee extended executive session for an additional 5 minutes, additional 5 minutes, additional 5 minutes. They reconvened at 10:55 a.m. and did not take action.

Information Items

Next committee meeting date: Thursday, April 29, 12 p.m. (special meeting date)

Adjournment

The meeting was adjourned at 10:55 a.m.