

**Meeting Minutes**  
**April 28, 2021**  
**Regular Meeting**

The meeting was held via Zoom conference call.

**Committee members present**

Scott Bader  
Christine Frizzell  
John Joplin  
Sam Low

**Committee members absent**

Nate Nehring

**Staff present**

Shawn Frederick, Chris Spitters, Heather Thomas, Ragina Gray, Katie Curtis, Nicole Thomsen, Tracey Kellogg, Sarah de Jong

**Guests present**

Amelia Vakalutukali, Community Equity Advisory Board and steering committee member; Clarence Shaw, Community Equity Advisory Board and steering committee member

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**Call to Order**

The regular meeting of the Administration Committee was called to order by Mr. Scott Bader at 3:30 p.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**

Mr. Sam Low arrived at 4:33 p.m.

**Approval of Minutes**

It was moved by Mr. John Joplin and seconded by Mr. Scott Bader to approve the minutes for the regular meeting of March 24, 2021. The motion passed with 2 yes votes, 0 no votes, 1 abstention (Frizzell) and 2 absent (Low, Nehring).

**Action**

*Approve vouchers and Res. 21-13 authorizing April 2021 Health District expenditures, and forward to the full Board on consent (no staff report; T. Kellogg)*

It was moved by Ms. Christine Frizzell and seconded by Mr. Joplin to approve vouchers and Res. 21-13 authorizing April 2021 Health District expenditures, and forward to the full Board on consent. The motion passed with 3 yes votes, 0 no votes, and 2 absent (Low, Nehring).

*Approve Finance Manager's report for February 2021, and forward to the full Board as a written report (SR 21-044; T. Kellogg)*

The overhead allocation for COVID-19 programs has been removed because the grants allow overhead staff to be billed directly. A system-generated report for COVID programs will be used for monthly reports and the custom report will be presented at the end of each quarter because of the time involved in creating the custom report.

It was moved by Mr. Joplin and seconded by Ms. Frizzell to approve the Finance Manager's report for February 2021, and forward to the full Board as a written report. The motion passed with 3 yes votes, 0 no votes, and 2 absent (Low, Nehring).

*Authorize the Environmental Health Director to restructure the Environmental Health division to separate the Land Use and Safe Environments programs, as well as reassign the health educator to serve the entire division, and forward to the full Board on consent (SR 21-025; R. Gray)*

Ms. Ragina Gray shared that no revisions have been made since this item was presented at last month's Administration Committee meeting; however, the Environmental Health Assistant Director will be resigning their position, effective Friday, and Ms. Gray may delay reassigning the health educator position until a replacement has been hired, as that position would report directly to the Assistant Director.

It was moved by Mr. Joplin and seconded by Ms. Frizzell to authorize the Environmental Health Director to restructure the Environmental Health division to separate the Land Use and Safe Environments programs, as well as reassign the health educator to serve the entire division and forward to the full Board on consent. The motion passed with 3 yes votes, 0 no votes, and 2 absent (Low, Nehring).

*Approve the Community Equity Advisory Board bylaws and forward to the full Board on consent (SR 21-029; N. Thomsen)*

This item was approved by the Community Equity Advisory Board (CEAB) a couple months ago and was presented to the Program Policy Committee last month. Ms. Nicole Thomsen introduced two members of the CEAB steering committee, Ms. Amelia Vakalutukali and Mr. Clarence Shaw, who have both been involved with the creation of the bylaws.

It was moved by Ms. Frizzell and seconded by Mr. Joplin to approve the Community Equity Advisory Board bylaws and forward to the full Board on consent. The motion passed with 3 yes votes, 0 no votes, and 2 absent (Low, Nehring).

*Approve the budget policy, and forward to the full Board on consent (SR 21-039; N. Thomsen, T. Kellogg)*

This item was brought as a briefing at last month's Administration Committee meeting. Since that time, no comments were received or changes made to the policy. It has been reviewed by legal counsel and no red flags were found.

It was moved by Mr. Joplin and seconded by Ms. Frizzell to approve the budget policy and forward to the full Board on consent. The motion passed with 3 yes votes, 0 no votes, and 2 absent (Low, Nehring).

*Approve the finance policy, and forward to the full Board on consent (SR 21-040; N. Thomsen, T. Kellogg)*

This was brought as a briefing item at last month's Administration Committee meeting. No comments were received from Board members, either at the last meeting or during the interim. A couple changes have been made to the policy since that meeting. The first was to clarify the definition of operating programs - the difference between internally-facing vs. forward-facing services. There is also a clarification in the definitions for working capital reserve and emergency reserve funds. This policy has been reviewed by the Health District's legal counsel and no red flags were found.

It was moved by Ms. Frizzell and seconded by Mr. Joplin to approve the finance policy and forward to the full Board on consent. The motion passed with 3 yes votes, 0 no votes, and 2 absent (Low, Nehring).

## **Briefings**

### *Policy Prioritization framework (SR 21-030; N. Thomsen)*

Ms. Thomsen walked through the policy prioritization framework and policy development process flowcharts and reviewed comments and feedback provided by the Program Policy Committee at its April meeting.

In the first phase of the policy development process, after a policy or revision need is identified, the proposed policy then goes through the policy prioritization process to assign a priority level. Ms. Frizzell requested a reference to be inserted into the policy development process flowchart to clearly connect the two workflows.

### *COVID Media Buys (SR 21-046; H. Thomas)*

While none of the individual agreements trigger Board approval requirements, the total sum is quite large at roughly \$250,000 and so staff are bringing this as a briefing item to inform the Board of the advertising work being done in support of COVID vaccinations. The advertisements are through a number of different mediums – such as radio, tv, digital, internet, and billboards. In addition, select ads will be translated into other languages in partnership with the CEAB and the County Community Advocate Pilot to provide advertising for underserved populations.

### *2021 legislative update (no staff report; N. Thomsen, H. Thomas)*

The legislative session ended this past Sunday. Bill 1152 passed out of the Senate and has been sent to the Governor for signature. The final version of this bill creates a Public Health Advisory Board (PHAB) at the state level that will have 23-24 members, including members from the Washington State Association of Counties (WSAC) and Washington State Association of Local Public Health Officials (WSALPHO). This bill also restructures the board of health at the local level, requiring an equal number of elected and non-elected members. However, there is a clause that local health jurisdictions with an existing Public Health Advisory Council (PHAC) are allowed to keep their current board of health structure so long as there are no changes to that current structure, at which point the board would have to restructure to meet the requirements in the bill. Some of the options of previous versions of 1152 are included as a budget proviso with an additional \$147,000,000 to be included for public health, bringing the total FPHS appropriations for 2021-2023 to just shy of \$175,000,000. Other portions of the proviso include a steering committee and shared service hubs.

An additional \$1,000,000 was added for youth tobacco and vaping outreach, in alignment with legislation passed in the last biennium.

House bill 1074 regarding opioid-fatalities and suicides didn't move out of the senate. This is the completion of the first year of a two-year cycle, which will allow this bill to move to the front at the next legislative session.

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

Case count numbers have increased and are currently at 800-900 cases per week. The rolling two-week case rate is higher than the 200 cases per 100,000 threshold, which is one of two triggers to retreat into phase two. Younger age groups continue to experience the highest case rates, with the highest rates in the 20-29 age bracket and second highest in the 30-39 age group. Hospitalizations are in sync with case rates and have increased to about six hospitalizations per 100,000 people in Snohomish County. Hospitalizations for the 40-49 and 50-59 age groups have also increased, while the 60+ age group haven't, which reflect better vaccination coverage for older adults. Long-term care cases show a dramatic decrease since mid-January with the rollout of vaccine; the death rate has also not increased since that time.

Vaccination rates remain generally equitable across populations in Snohomish County, with the exception of the Latino community, a group that is experiencing lower than average rates compared to the other groups. Outreach efforts are being performed for the Latino community to help encourage vaccinations.

Variant B.1.1.7 is estimated to be 50-70% more transmissible than previous strains and is predicted to replace most other strains over time. Washington State has not seen a higher hospitalization or death rate associated with that variant, as had been reported in other settings, such as the United Kingdom. Although globally associated with reinfection, higher hospitalizations, and death rates, variants P1 and B1.351 do not appear to have a foothold strong enough to take over as a dominant strain in Washington State. Vaccine companies are already working on updating vaccines to better combat these new variants.

To date, in Snohomish County, about 336,000 people have initiated at least one dose of vaccine and 225,000 have completed their vaccine schedule, representing about 27% of the County's total population, or a third of the adult population.

Vaccine appointments at mass-vaccination sites in Snohomish County, and other counties in the state, are beginning to go unfilled. One possible contributing factor could be hesitancy caused by the temporary pause of the Johnson & Johnson vaccine distribution. Another could be that the pool of people who would be willing to get vaccinated at a mass-vaccination site is becoming exhausted. In response, vaccine allocations are being rebalanced to healthcare systems and some mass-vaccination sites are shifting their hours to be open later in the evening and on weekends.

#### **Information Items**

Next Board of Health meeting date: Tuesday, May 11, 3 p.m.

Next committee meeting date: Wednesday, May 26, 3:30 p.m.

#### **Adjournment**

The meeting was adjourned at 5:05 p.m.