

Board of Health Administration Committee

Meeting Minutes September 22, 2021 Regular Meeting

The meeting was held via Zoom conference call.

Committee members present

Scott Bader Christine Frizzell John Joplin Sam Low Nate Nehring

Staff present

Shawn Frederick, Chris Spitters, Pamela Aguilar, Heather Thomas, Ragina Gray, Katie Curtis, Carrie Parker, Nicole Thomsen, Tracey Kellogg, Sara Centanni, Sarah de Jong

Call to Order

The regular meeting of the Administration Committee was called to order by Mr. Scott Bader at 3:31 p.m. via Zoom video conference.

Roll Call

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

Approval of Minutes

It was moved by Mr. Sam Low and seconded by Mr. Nate Nehring to approve the minutes for the regular meeting of July 28, 2021. The motion passed with 5 yes votes, 0 no votes, and 0 absent.

Due to the full agenda, action items were moved before briefing items to ensure enough time for discussion and possible action.

Action

Approve vouchers and Res. 21-19 authorizing Health District expenditures from August 16, 2021, to September 15, 2021, and forward to the full Board on consent (no staff report; S. Centanni)

It was moved by Ms. Christine Frizzell and seconded by Mr. Low to approve vouchers and Res. 21-19 authorizing Health District expenditures from August 16, 2021, to September 15, 2021, and forward to the full Board on consent. The motion passed with 5 yes votes, 0 no votes, and 0 absent.

Adopt letter requesting the Department of Health revise Chapter 2460272A WAC, section -0280(1) consistent with the intent of SB 5503, and forward to the full Board for action (SR 21-096; S. Frederick) This item was brought to staff by Councilmember Nehring and Councilmember Low and is in regard to Senate Bill 5503, signed into law April 17, 2019. It details historical responsibilities for local health jurisdictions. Specific to the nature of the letter, the Washington State Department of Health (DOH) has brought forth some proposed language that specifically states when an onsite sewage system failure or malfunction occurs, the owner shall either remediate that system in conformance with the Washington Administrative Code (WAC) or repair, remediate, or replace that system with a conforming system or component in full compliance with new construction requirements under this chapter. The concern is the proposed language is not consistent with the language in the original bill that was passed. Section

2(1)(a) of the Senate bill specifically states that the first priority to allowing repair or second priority to allowing replacement of an existing conventional onsite sewage system consisting of a septic tank and drainfield with a similar conventional system should be not imposed or allow the imposition of a more stringent performance requirement or equivalent onsite sewage system for private entities than public entities. It also states the allowance of the system to be repaired using the least expensive alternative that meets the standards and is likely to provide comparable or better long-term sewage treatment in a fluent dispersal outcomes.

It was moved by Ms. Frizzell and seconded by Mr. Nehring to adopt letter requesting the Department of Health revise Chapter 2460272A WAC, section -0280(1) consistent with the intent of SB 5503, and forward to the full Board for action. The motion passed with 5 yes votes, 0 no votes, and 0 absent.

Approve Resolution 21-18 rescinding Resolution 18-04 and authorizing the appointment of a new Auditing Officer, and forward to the full Board on consent (SR 21-093; S. Frederick)

As part of the RCW, the Health District needs to have an auditing officer for claims that are presented for payment. Historically, this role has been filled by the finance manager. With the impending departure of the current finance manager, Tracey Kellogg, staff are requesting the appointment of Sara Centanni, incoming finance manager for the Health District, to fill this role.

It was moved by Mr. Low and seconded by Ms. Frizzell to approve Resolution 21-18 rescinding Resolution 18-04 and authorizing the appointment of a new Auditing Officer, and forward to the full Board on consent. The motion passed with 5 yes votes, 0 no votes, and 0 absent.

Authorize the Administrative Officer to recruit for a 1.0 behavioral health specialist for the Child Care Health Outreach Program, and forward to the full Board on consent (SR 21-086; K. Curtis)

The childcare health outreach program currently has a vacant half time registered dietician position and a vacant half time behavioral health specialist position. Staff would like to propose removing the half time registered dietician and increasing the half time behavioral health specialist position to a full time position, as there is a much greater need for a behavioral health specialist in the community right now.

It was moved by Mr. Low and seconded by Ms. Frizzell to authorize the Administrative Officer to recruit for a 1.0 behavioral health specialist for the Child Care Health Outreach Program, and forward to the full Board on consent. The motion passed with 5 yes votes, 0 no votes, and 0 absent.

Authorize the Administrative Officer to hire a disease intervention specialist for the tuberculosis control program, and forward to the full Board on consent (SR 21-085; K. Curtis)

Right now there is 1.0 full-time employee (FTE) disease intervention specialist (DIS) that works .5 FTE in the STD program and .5 FTE in the tuberculosis control (TB) program. As cases are increasing in both STD and TB programs, staff would like to propose moving the DIS staff member to the STD fulltime and increasing the TB DIS position to full time as well.

It was moved by Ms. Frizzell and seconded by Mr. John Joplin to authorize the Administrative Officer to hire a disease intervention specialist for the tuberculosis control program, and forward to the full Board on consent. The motion passed with 5 yes votes, 0 no votes, and 0 absent.

Authorize the Administrative Officer to release a request for proposal to identify a vendor to provide after-hours emergency call services, and forward to the full Board on consent (SR 21-084; K. Curtis)

The Health District is currently contracted with the Washington Poison Center for this service. According to the purchasing policy, the contract needs to be rebid. Staff are very happy with the service WPC has provided and will encourage them to apply. This service is for healthcare providers to call about an immediately notifiable condition after hours or on the weekends, or if there is an emergency and they need to reach the director on call.

It was moved by Mr. Joplin and seconded by Mr. Low to authorize the Administrative Officer to release a request for proposal to identify a vendor to provide after-hours emergency call services, and forward to the full Board on consent. The motion passed with 5 yes votes, 0 no votes, and 0 absent.

Briefings

Employee handbook (SR 21-088; P. Aguilar)

This handbook was last presented to the Board in 2018. Ms. Pamela Aguilar reviewed the proposed changes to the handbook.

Policy POL 120.003 concerning telecommuting (SR 21-089; P. Aguilar)

This item is very similar to the interim telecommuting policy approved by the Board at the beginning of the pandemic. A supplemental document in the form of a checklist has also been created for supervisors to gauge the ability for an employee to work remotely. Ms. Aguilar requested input from Committee members regarding if environmental health specialists that work in the field can be offered as permanent telecommuting positions when the District recruits for them. This telecommuting policy could also potentially impact plans for the Rucker Building remodel, as it would change the footprint in determining how much space to dedicate towards hoteling workstations vs. dedicated cubicles vs. offices and also gives an opportunity to look at space utilization terms of other public facing meetings spaces. Mr. Scott Bader asked if there is a limit on the distance an employee can be from the physical location of the building. Ms. Aguilar said that a mileage range could be added into the policy.

Policy POL 130.007 regarding electronic funds transfer (SR 21-070; N. Thomsen, T. Kellogg)

This policy is the result of a request made during the audit process last year. This is the first policy of its kind and is in alignment with the current District policies. It speaks specifically to the roles and responsibilities, monitoring and tracking, and control measures. This policy only speaks applies to payroll eft but there is a plan to implement accounts payable paying by eft in the future. Almost every jurisdiction received this request from auditors last year because of continued fraud in this area. This item was presented to the Program Policy Committee last week and there were no comments received.

2022 Legislative agenda planning (SR 21-092; H. Thomas, N. Thomsen)

The 2022 Legislative session will begin with a short (60-day) session. The Health District aims to have the legislative agenda out for consideration for October Committee meetings. This is done for two reasons – the first, to give Board members enough time to review and provide feedback, and the second, to share with other community partners for their consideration and potential integration into their own legislative agendas. Typically, the Health District relies on the Washington State Public Health Official's and the State Public Health Association's legislative agendas for some springboard ideas. This year, however, these agendas have yet to be published so District staff have put together a tentative legislative agenda. Ms. Nicole Thomsen reviewed items currently on the draft agenda. This item was presented to the Program Policy Committee last week and those Committee members had requests to add three things for consideration – mental health support and investments, climate change, and equity. The Public Health Advisory Council also received this briefing and members spoke to the importance of climate change, equity, and housing. Mr. Nate Nehring shared that one of the items for the Snohomish County legislative agenda is marijuana revenue sharing and putting some of those funds toward behavioral health. Mr. Nehring requested for that to be added to the agenda as well. Mr. Scott Bader asked for homelessness and its effect on the health of the community be considered for addition to the agenda.

Proposed Environmental Health food safety program fee schedule (SR 21-094; R. Gray)

This item was presented to the Program Policy Committee last week as a briefing and the Committee had several technical questions so a subject matter expert has been brought to this meeting to answer any potential questions this Committee may have. In order to make January invoice billing, which is the largest to be captured by the new changes, this item includes only the food safety program fee schedule. The other Environmental Health (EH) fee schedules will be presented to this Committee next month. These proposed changes have been presented for feedback to the Health District's equity team

and the Food Advisory Committee. Feedback received from the Food Advisory Committee is that fee increases should be spread out as much as possible to lessen the individual impact on any one particular individual or group. They were also generally supportive of the idea for a 2% increase across the board, and there was no major pushback on any of the other proposals regarding plan reviews or temporary events. The Washington Hospitality Associate has been present at all the Food Advisory Committee meetings, as well having individual meetings with Environmental Health leadership. They have been generally supportive of the 2% increase. Ms. Ragina Gray outlined proposed changes in the fee schedule.

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

COVID-19 It appears the cases in this wave have probably peaked over the last couple weeks and there's a sense of a downward decline which could end up in a double peak as experienced in the third wave, but the current trend is an initial move downward. While this is good news, it's important to remember that there have still been almost 4.000 cases in the past two weeks: that translates into about 450 cases per 100,000 and is still a very high level of transmission. At this level, a gathering of 15 random people in Snohomish County has about a 20% chance of one person being contagious with COVID; because of this, messaging released by the Health District continues to discourage large gatherings. The county is starting to see an increase in deaths in the wake of this surge. Comparing the number of deaths during this wave to the third waves shows a much lower number, which can be attributed to the availability of vaccines. Dr. Cook, the Chief Medical Officer for Providence, reported that in the month of August, 71 of 72 admissions to the Providence ICU for COVID were unvaccinated. Although we are seeing decreased effectiveness of the vaccine in preventing infections, it is still showing a much reduced number of severe cases requiring intensive care. Hospitals continue to remain under duress. While the increase in COVID-related hospitalizations has crested, hospital capacity is around 90% due to shortages of staff and a stretched health care system. This attrition in healthcare workers creates a problem for the current moment in dealing with the hospital surge but also may cause a potential long-term healthcare worker shortage. The county had had almost no activity in long-term care cases for the past several months, with the exception of a single facility outbreak this past April. Cases are now starting to increase and there are over 30 facilities currently affected. This also causes problems for hospitals because it reduces the pool of facilities patients can discharged to. Providence has reported it had 100 patients in the hospital that don't really need hospitalization but could be transferred to an assisted living or skilled nursing facility, if there was any available room.

Afghan Emigrant Arrivals There are about 100,000 people who were able to leave Afghanistan. Of this, about 50-60,000 are destined for the U.S. The overwhelming majority of this number have not yet arrived and are in Department of Defense staging sites overseas or in domestic U.S. military bases. Ultimately, it's anticipated that somewhere between 1,000 to 2,500 will find Snohomish County to be their assigned destination over the next three to six months. Most of these immigrants are entering into the country as humanitarian parolees, a status that doesn't qualify for many of the healthcare, funding, and social services afforded to other refugees that immigrate to America. The Health District's role will be to help screen for imminent disease control threats that are known problems in Afghanistan, such as measles, and to a lesser extent, polio, and to verify they have received their other vaccinations at the staging sites. Dr. Spitters has had preliminary discussions with the federally qualified health care centers in the community, which have indicated their willingness and ability to accept referrals for primary care for this group.

Determine the dates of the November and December Committee meetings (No staff report)

Ms. Sarah de Jong will send a doodle poll to Committee members to determine the best dates for the November and December Committee meetings.

Information Items

Next Board of Health meeting date: Tuesday, October 12, 3 p.m. Next committee meeting date: Wednesday, October 27, 3:30 p.m.

Adjournment

The meeting was adjourned at 4:38 p.m.

