

**Meeting Minutes**  
**May 25, 2022**

The meeting was held via Zoom conference call.

**Committee members present**

Neil Tibbott (Chair)  
Mark James (Vice Chair)  
Sam Low

**Committee members absent**

Nate Nehring  
Joe Neigel

**Staff present**

Shawn Frederick, Chris Spitters, Pamela Aguilar, Sara Centanni, Nicole Thomsen, Katie Curtis, Ragina Gray, JR Myers, Rhonda Smids-Osborne, Sarah de Jong

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**Call to Order**

The regular meeting of the Administration Committee was called to order by Mr. Neil Tibbott 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.

**Special Business**

**Elect Chair and Vice Chair**

Mr. Nate Nehring is unable to Chair this meeting due to some recurring meeting conflicts. Mr. Tibbott opened the floor for nominations for the chair of the Committee. Mr. Sam Low nominated Neil Tibbott. There were no other nominations, and Mr. Tibbott becomes the Chair of the Administration Committee.

Mr. Tibbott opened the floor for nominations for the vice chair of the Committee. Mr. Low nominated Mark James. There were no other nominations, and Mr. James becomes the Vice Chair of the Administration Committee.

**Approval of Minutes**

It was moved by Mr. James and seconded by Mr. Low to approve the minutes for the regular meeting of April 27, 2022. The motion passed unanimously.

**Public Comment**

Mr. Tibbott noted that no public comment was received.

**Action**

*Approve Finance Manager's Report for March 2022, and forward to the full Board as a written report (SR 22-030; S. Centanni)*

Ms. Sara Centanni reviewed the Finance Manager's report, which can be found in the meeting packet.

It was moved by Mr. James and seconded by Mr. Low to approve the Finance Manager's Report for March 2022, and forward to the full Board as a written report. The motion passed unanimously.

*Approve vouchers and Res. 22-15 authorizing Health District expenditures from April 16, 2022, to May 15, 2022, and forward to the full Board on consent (no staff report; S. Centanni)*

It was moved by Mr. James and seconded by Mr. Tibbott to approve vouchers and Res. 22-15 authorizing Health District expenditures from April 16, 2022, to May 15, 2022, and forward to the full Board on consent. The motion passed unanimously.

*Res. 22-14 approving the 2022 budget amendment #1 (SR 22-043; S. Centanni)*

Ms. Sara Centanni briefed Committee members on the proposed 2022 budget amendment #1 which can be found in the meeting packet.

It was moved by Mr. Tibbott and seconded by Mr. James to approve Res. 22-14 approving the 2022 budget amendment #1 as shown in Exhibit A, and forward to the full Board for action. The motion passed unanimously.

*Amendment to the master services agreement with the North Sound Accountable Community of Health for participation in the collaborative action network (SR 22-038; K. Curtis)*

Since 2018, the Health District has been a part of the North Sound Accountable Communities of Health (ACH) and Medicaid transformation program that provides funding for some programs in the Prevention Services department. This partnership offers a way to collaborate with other organizations on programs the District is also performing. This amendment changes the structure of the funding in that it's groups in cohorts and each participant under the program is able to choose the level of participation in the program, with set funding for each level.

It was moved by Mr. Tibbott and seconded by Mr. James to authorize the Administrative Officer to sign an amendment to the master services agreement with the North Sound Accountable Community of Health for participation in the collaborative action network, and forward to the full Board on consent. The motion passed unanimously.

*Agreement with Ideal Option to provide sexually-transmitted disease testing and treatment to Health District clients (SR 22-040; K. Curtis)*

The Health District recently submitted a request for proposal for a new healthcare provider for the District's sexually-transmitted disease services. Identified needs were for a provider that can perform full body exams and provide injectable medications and treatments for STDs. Only one bid was received and so staff are requesting to move forward with signing a one-year contract with Ideal Option to provide for these services. After a year, the partnership will be evaluated and determined whether to continue at that time.

It was moved by Mr. Tibbott and seconded by Mr. James to authorize the Administrative Officer to sign an agreement with Ideal Option to provide sexually-transmitted disease testing and treatment to Health District clients, and forward to the full Board on consent. The motion passed unanimously.

*Policy POL 100.001 concerning policies and procedures (SR 22-042; N. Thomsen)*

This policy was presented to Board of Health committees last month. The only feedback received at those meetings was to leave in the policy coordinating committee. This draft policy reflects that change and all other parts of the policy remain the same as when last reviewed by this Committee.

It was moved by Mr. James and seconded by Mr. Low to approve Policy POL 100.001 concerning policies and procedures, and forward to the full Board on consent. The motion passed unanimously.

*Fleet vehicle purchasing (SR 22-039; S. Frederick)*

Vehicle manufacturing supply shortages have resulted in a highly competitive vehicle market. Staff are requesting to obtain preauthorization to purchase vehicles and report back to the Board after the

purchase. This would allow faster movement in securing the vehicles needed to add to the Health District's fleet. The priority for obtaining vehicles would be hybrid with a few electric. \$400,000 for vehicle purchases were included in this year's budget. While no single vehicle would exceed the Administrative Officer's purchasing limit, the total amount to be spent would. There is also the need for at least two specialized vehicles to store emergency supplies and that could respond to any mass-vaccine or testing scenario that could arise because of COVID. Historically, those trailers have existed with supplies for other public health emergency preparedness responses.

It was moved by Mr. James and seconded by Mr. Low to authorize the Administrative Officer to purchase vehicles within the allocated limits of the 2022 Adopted Budget, and forward to the full Board on consent. The motion passed unanimously.

## Briefings

*Policy POL 130.004 concerning contracts (SR 22-041; N. Thomsen)*

This policy has been in the works for a little over two years and has gone through multiple committee meetings. The most notable change from the last time it was presented to this Committee is the addition of a risk assessment that would evaluate a contract's level of risk and determine whether to send the agreement to legal for further review. Staff have been testing the assessment while sending agreements to legal and have found that it identifies the same risks that are found by legal counsel.

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

**COVID.** COVID cases appear to be flattening through the end of last week with a case rate of 263 per 100,000. That case rate reflects about 2,200 reported cases in the last week. One important thing to note is it's estimated this surveillance system is picking up only 10-20% of actual cases that are occurring, due to either people being symptomatic and not getting tested or testing and home and the results not making its way into the notifiable condition database.

Protecting the health care system remains the major goal and hospital metrics are used as a solid measure of COVID activity. For the week ending May 21, there were nearly 80 Snohomish County resident COVID-19 admissions to area hospitals. This is up from about 50 the week prior, which takes the rate of new hospitalizations just over 9 per 100,000. Around 7.5% of total staffed and available beds in county facilities are occupied by COVID patients.

Looking at outbreak-associated cases shows a slight flattening for schools and an increase in long-term care facilities.

Snohomish County remains in the medium risk category but the numbers have been climbing the past couple weeks and if trends continue, will eventually be reclassified in the high risk category. Because these metrics are mainly focused on hospitalizations and hospitalizations lag behind cases reported by a couple of weeks, it is possible that the hospitalization rate may begin to flatten as cases have recently done.

Recommendations remain unchanged at this time, encouraging public indoor masking as well as outdoors where crowding occurs or where you can't stay socially distanced from others.

Paxlovid, a treatment for COVID that reduces hospitalization by 80-90% when administered on time, has been found to occasionally result in rebound infection but are not as sick and there's no evidence of having developed mutations that give resistance to the drug.

**Avian influenza.** A strain of flu that isn't effective at infecting humans has infected birds in North America, resulting in the culling of around 40 million commercial poultry. This is predominantly in the central and eastern U.S. but has recently begun cropping up in the western U.S. as well. For now, the goal is to maintain surveillance and try to protect the poultry industry and food supply.

From a public health viewpoint, the concern is if the virus mixed with a human influenza virus and swapped genes which could result in a new virus that can enter humans.

**Monkeypox.** Monkeypox is a milder but still sometimes severe rash illness similar to smallpox, which has been eradicated. It is endemic in Central and Western Africa and has an animal reservoir that has not been defined but is believed to be rodents and not monkeys. The virus occasionally finds its way

out of Africa in travelers, which is what happened recently with just over 100 cases. Although not as severe as smallpox or as spreadable, it could still cause havoc in its own right and so public health is working to contain and stop the spread. This is done by isolating infected individuals, performing contact tracing, and monitoring their close contacts.

**Syphilis.** There's an increase in infectious syphilis cases, a sexually-transmitted infection that leads to skin lesions either in the genital area or in later stages elsewhere on the body. The infection can stay in a dormant state but cause long-term damage to the heart and nervous system and be transmitted to infants prenatally through the placenta from their mother. Syphilis was almost eliminated in Washington State in the mid-1990s. Then it was reintroduced and has gradually picked up pace and really accelerated in the last couple of years. Congenital syphilis has also seen a high increase as well. The Health District is working with healthcare partners to make sure pregnant women get screened and treated to get this resurgence under control.

**Vaccinations.** During the pandemic, the number of doses administered to children declined greatly, particularly in the older age groups. The coverage, meaning the proportion of kids who are up to date with all the recommended vaccinations also dipped. About half of all first grade children in Snohomish County have all the recommended vaccinations. Statewide, about 75% of preschool-aged children are protected against measles, mumps, and rubella. The Health District has been communicating with health care providers to ensure there are active efforts by the healthcare system to increase childhood vaccinations.

### **Information Items**

Mr. Tibbott announced the upcoming meetings and noted a special meeting of the full Board of Health would take place the next day, May 26 at 1:00 p.m. There would also be another special meeting of the full Board on Tuesday, May 31 at 3:00 p.m.

### **Adjournment**

The meeting was adjourned at 4:45 p.m.