

**Meeting Minutes**  
**May 26, 2022**

The meeting was held via Zoom conference call.

**Committee members present**

Megan Dunn  
Anji Jorstad  
Kyoko Matsumoto Wright  
Stephanie Vignal  
Stephanie Wright

**Staff present**

Chris Spitters, Pam Aguilar, Sara Centanni, Katie Curtis, Nicole Thomsen, Ragina Gray, JR Myers, Tony Colinas, Carrie Parker, Rhonda Smids-Osborne, Grant Weed, Sarah de Jong

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**Call to Order**

The special meeting of the Executive Committee was called to order by Ms. Stephanie Wright at 12:01 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**

Approval of minutes of the regular meeting of April 28, 2022

It was moved by Ms. Anji Jorstad and seconded by Ms. Stephanie Vignal to approve the minutes of the regular meeting of April 28, 2022. The motion passed unanimously.

**Public Comment**

Ms. Wright noted that no public comment was received.

**Action**

*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 Ms. Jorstad and seconded by Ms. Vignal to approve Res. 22-14 approving the 2022 budget amendment #1 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 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 Ms. Jorstad and seconded by Ms. Vignal to authorize the Administrative Officer to execute the 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 Ms. Jorstad and seconded by Ms. Vignal 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 approved by the Board two years ago, and in that policy was the requirement for all approved policies to be reviewed on an ongoing two-year cycle. This version with some revisions 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 Ms. Vignal and seconded by Ms. Jorstad 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)*

Ms. Pamela Aguilar briefed the Committee on this item. 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 was included in this years' budget. While no single vehicle would exceed the Administrative Officer's purchasing limit, the total amount to be spent would. Staff would be able to purchase nine to twelve vehicles, depending on if they were electric, hybrid, or gas powered.

It was moved by Ms. Jorstad and seconded by Ms. Kyoko Matsumoto Wright 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.

*Proclamation honoring MRC volunteers (SR 22-045; P. Aguilar)*

The Medical Reserve Corp (MRC) is coming up on its 20-year anniversary. There will be an event at the District in the back parking lot on a Saturday in July and this proclamation is being presented to be approved so it can be shared during that event with MRC volunteers. Since January 2020 MRC volunteers have provided more than 49,000 hours of service for the vaccination and testing sites during our COVID response and this event is to recognize and honor them.

It was moved by Ms. Vignal and seconded by Ms. Jorstad to approve and sign a proclamation recognizing and honoring the Medical Reserve Corp volunteers of Snohomish County and forward to the full Board for action. 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. Mr. Grant Weed, legal counsel to the District, spoke in favor of the proposed risk assessment and contract policy.

*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 for the last week. One important thing to note is it's estimated that our 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. Snohomish County is seeing a gradual increase in COVID-related hospitalizations with a current rate of nine cases per 100,000 residents for the week ending May 21. A far smaller proportion of cases are ending up in the ICU or on mechanical ventilation than in previous waves.

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 mild but 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. Some of the cases have been among men who have sex with men and they've actually presented in STD clinics, without the generalized rash or the fever or other symptoms. Although not generally as severe or spreadable as smallpox, it can still cause severe illness 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 that has accelerated the past couple of years. Congenital syphilis has also seen a high increase as well. Congenital syphilis can cause stillbirth, premature birth, or permanent and severe neurological deficits but is very preventable by screening and treating pregnant women before delivery.

**Vaccinations.** During the pandemic, the number of doses administered to children declined greatly. Efforts are currently underway to have healthcare providers, schools, and parents-and-guardians on the same page in getting children up to date on their vaccinations.

### **Information Items**

Chair Wright announced upcoming meetings, noting a special meeting of the full Board of Health would take place immediately following this meeting. Chair Wright also noted that the next Committee meeting is currently set to take place on June 23 but that Sarah de Jong would be sending a poll out to Committee members to try to find a better time where more members were available.

### **Adjournment**

The meeting was adjourned at 12:53 p.m.

DRAFT