



BOARD OF HEALTH
CODE OF CONDUCT

2025

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Purpose

In alignment with [Snohomish County Board of Health Code 1.10.110](#), “a code of conduct that provides ethical standards and expectations for Board of Health members, including grounds for removal” will be established.

A code of conduct is essential for maintaining public trust, ensuring ethical decision-making, and promoting transparency and accountability. It provides a clear framework for acceptable behavior, preventing conflicts of interest and fosters a culture of integrity.

Values

Professional

As stewards of the public trust, each member of the Board of Health is expected to:

- Conduct themselves with self-awareness, self-respect, and professionalism;
- Treat all others with respect, dignity, and civility, regardless of status or position; and
- Refrain from engaging in hostile, intimidating, offensive, or unlawful activities or behaviors that may include discrimination, harassment, sexual harassment, or bullying.¹

From [Snohomish County Code 2.46.010](#), “Prejudice, intolerance, bigotry, and discrimination occasioned thereby threaten the rights and privileges of the county’s inhabitants and menace the institutions and foundation of a free democratic state. It is the policy of the county to reject discrimination which denies equal treatment to any individual because of his or her race, creed, color, national origin, families with children, sex, marital status, sexual orientation, age, honorably discharged veteran or military status, or the presence of any sensory, mental, or physical disability or the use of a trained dog guide or service animal by a person with a disability, as provided in the law against discrimination, chapter [49.60](#) RCW, and this chapter.”

Public Health

Public health is the science and art of promoting health and preventing disease and premature death of a population by systematic efforts of society, communities, or individuals. Our work strives to do that through a blend of health protection, health promotion, and disease prevention efforts. Board members come from a variety of disciplines and represent numerous scientific and technical areas of study and lived experiences. The values and standards of public health apply to board members.

¹ Washington State Legislature. Legislative Code of Conduct. Accessed 7/18/2025 from <https://leg.wa.gov/about-the-legislature/senate/administration/legislative-code-of-conduct/>

The American Public Health Association² established a set of core values and related obligations for public health practitioners. These values are multi-faceted and are to be actualized at every level of public health practice, including the Board of Health.

- **Professionalism and Trust.** The effectiveness of public health policies, practices, and actions depends upon public trust gained through decisions based on the highest ethical, scientific, and professional standards. Public health gains public trust in part because its practices are informed by evidence. When the needed evidence is lacking, public health seeks it, and when the evidence reveals faulty or inadequate practices, public health seeks to improve those practices. At times public health practitioners must respond to a situation in the absence of complete scientific information, which highlights the importance of having an ethical framework to drive decision making. Public health practitioners and organizations promote competence, honesty, and accuracy and ensure that their work is not unduly influenced by secondary interests. Public health decision makers need to be transparent and honest about disclosing conflicting interests and influences.
- **Health and Safety.** Health and safety are essential conditions for human flourishing. Public health practitioners and organizations have an ethical responsibility to prevent, minimize, and mitigate health harms and to promote and protect public safety, health, and well-being.
- **Health Justice and Equity.** Human flourishing requires the resources and social conditions necessary to secure equal opportunities for the realization of health and other capabilities by individuals and communities. Public health practitioners and organizations have an ethical obligation to use their knowledge, skills, experience, and influence to promote equitable distribution of burdens, benefits, and opportunities for health, regardless of an individual's or a group's relative position in social hierarchies. Health justice and equity also extend to ensuring that public health activities do not exacerbate health inequities. In addition, health justice does not pertain only to the distribution of scarce resources in transactions among individuals; it also involves remediation of structural and institutional forms of domination that arise from inequalities related to voice, power, and wealth. It is difficult for public health to promote health justice at the transactional level if it does not take steps to promote it at the structural and institutional levels as well.
- **Interdependence and Solidarity.** The health of every individual is linked to the health of every other individual within the human community, to other living creatures, and to the integrity and functioning of environmental ecosystems. Public health practitioners and organizations have an ethical obligation to foster positive—and mitigate negative—relationships among individuals, societies, and environments in ways that protect and promote the flourishing of humans, communities, nonhuman animals, and the ecologies in which they live. Attention to potential intergenerational conflicts over resources can sometimes be essential.
- **Human Rights and Civil Liberties.** While coercive legal measures limiting behavior can be ethically justified in certain circumstances, overall the effective and ethical practice of public health depends upon social and cultural conditions of respect for personal autonomy, self-

² American Public Health Association. [Public Health Code of Ethics Issue Brief](#). 2002

determination, privacy, and the absence of domination in its many interpersonal and institutional forms. Contemporary public health respects and helps sustain those social and cultural conditions.

- **Inclusivity and Engagement.** Preventing adverse health outcomes and protecting and promoting the flourishing of individuals, societies, and ecosystems require informed public decision-making processes that engage affected individuals and communities. Public health practitioners and organizations have an ethical responsibility to be transparent, to be accountable to the public at large, and to include and engage diverse publics, communities, or stakeholders in their decision making.

Appearance of Fairness Doctrine

Established in Washington State in 1969 and codified in 1982, appearance of fairness doctrine is a rule of law requiring government decision-makers to conduct non-court hearings and proceedings in a way that is fair and unbiased in both appearance and fact. Though not required for legislative actions conducted by the Board of Health, it provides a solid foundation that if followed, protects the legislative process and board members from suspicion of fairness.

Guidelines as provided by Municipal Research and Services Center (MRSC)³ are:

- become familiar with fair-hearing procedures;
- be aware of personal and employment situations that might form the basis for a challenge;
- strive to preserve an atmosphere of fairness and impartiality – even if a given decision may seem to be a foregone conclusion;
- evaluate whether a financial interest or bias would limit ability to function as an impartial decision-maker;
- make sure decisions are made solely on the basis of matters of record;
- make sure that contacts with those involved in or who can benefit from the action are avoided; and
- make sure the information about the contact is placed on the record.

Conflict of Interest⁴

No member of the Board of Health shall derive any personal profit or gain, directly or indirectly, by reason of his or her service as a Board member. Members of the board shall conduct their personal affairs in such a manner as to avoid any possible conflict of interest with their duties and responsibilities as members of the Board.

³ Municipal Research and Services Center. [The Appearance of Fairness Doctrine in Washington State](#); 2011

⁴ National Council of Nonprofits. [Sample Conduct Policies for Board Members](#). 2022

- When there is a decision to be made or an action to be approved that will result in a conflict between the best interests of the Board of Health and the Board member's personal interests, the Board member has a duty to immediately disclose the conflict of interest so that the rest of the Board's decision making will be informed about the conflict.
- It is every board member's obligation, in accordance with this policy, to ensure that decisions made by the Board reflect independent thinking. For any board member that receives compensation from persons or organizations related to the Board's business such compensation will be determined by and approved by the full Board in advance.
- Any conflicts of interest, including, but not limited to financial interests, on the part of any board member, shall be disclosed to the Board when the matter that reflects a conflict of interest becomes a matter of Board action, and through an annual procedure for all Board members to disclose conflicts of interest.
- Any board member having a conflict of interest shall not vote or use his or her personal influence to address the matter, and he or she shall not be counted in determining the quorum for the meeting.
- All conflicts disclosed to the Board will be made a matter of record in the minutes of the meeting in which the disclosure was made, which shall also note that the board member with a conflict abstained from the vote and was not present for any discussion, as applicable, and was not included in the count for the quorum for that meeting.

Confidentiality

Board members are reminded that confidential financial, personnel and other matters concerning the Snohomish County Health Department, staff, or clients/consumers may be included in executive session or discussed from time to time ([Snohomish County Code 2.50.130](#)). Executive sessions consistent with [RCW 42.30.110](#) are permitted for focused discussion on specific matters including legal matters.

Board members should not disclose such confidential information to anyone.

Open Public Meetings

Board members are reminded that meetings of the Board of Health shall be open to the public, and all persons shall be permitted to attend such meetings, except executive sessions and non-quorum working groups as authorized by the laws of the state of Washington. ([42.30 RCW](#) and [Snohomish County Code 2.48.070](#))

Conduct Outside General Board Meetings

Board members may not speak on behalf of the board in public, except to reiterate stated board decisions or when authorized by the board.

County Resources

Assets

The County and Department has an inherent responsibility to safeguard its assets and guard against improper or unauthorized use of resources intended for public benefit. No appointed official shall sell, divert, convert, give away, or use any county equipment, vehicles, or other county property, real or personal, other than in the performance of his/her official duties in behalf of the county ([Snohomish County Code 2.50.140](#)).

Compensation

Board of health members shall serve without compensation and may receive reimbursement for mileage to and from meetings and for such other expenses as approved by the health department director as limited by budgetary constraints. ([Snohomish County Code 2.30.150](#))

Email

Board members will be issued a Snohomish County e-mail address to support public records compliance. This will be the primary method for communications between staff and board members. Board of Health e-mails sent and received using personal devices and e-mails, are considered and are eligible for public records requests.

Applicability

Any new board member will be advised of this policy during board orientation and all board members will be reminded of the Code of Conduct and of the procedures for disclosure of conflicts and for managing conflicts on a regular basis, at least once a year.

This policy shall also apply to any board member's immediate family or any person acting on his or her behalf.

Removal

[Snohomish County Code 2.03.080](#) states, "Members of boards or commissions may be removed subject to rules promulgated by the particular body. In addition, members may be removed by the county council for misfeasance."

Points of Contact

Board of Health Chair: The Chair position is elected annually and is a Snohomish County Councilmember. The Chair is responsible for determining the agenda and workplan in consultation with the Board Administrator and Public Health Department Director. Any inquiries about workplan, potential board action, and requests for specific agenda ideas should be directed to the Board Chair and their staff.

Board Administrator: Nicole Thomsen is the BOH administrator. She can assist with policy questions, background, and requests for information on agenda items, Public Health Department information, etc. Email: nicole.thomsen@snoco.org

Board Clerk: Sarah de Jong supports members on any questions related to technical assistance, stipends, reimbursements, and other administrative supports. Email: sarah.dejong@snoco.org

APPENDICES

Definitions