



**Snohomish Health District
Board of Health Minutes
September 10, 2019**

The meeting was held at Snohomish Health District, 3020 Rucker Ave., first floor Auditorium.

Members Present

Scott Bader, Councilmember, Everett
Christine Cook, Councilmember, Mukilteo (via phone)
Adrienne Fraley-Monillas, Councilmember, Edmonds
Kurt Hilt, Councilmember, Lake Stevens – BOH Vice Chair
Kyoko Matsumoto Wright, Mayor, Mountlake Terrace
Nate Nehring, County Councilmember
Liam Olsen, Councilmember, Bothell (via phone)
Dan Rankin, Mayor, Darrington
Linda Redmon, Councilmember, Snohomish
Terry Ryan, County Councilmember
Brian Sullivan, County Councilmember
Shirley Sutton, Councilmember, Lynnwood
Jeff Vaughan, Councilmember, Marysville

Members Absent

Stephanie Wright, County Councilmember – BOH Chair
Sam Low, County Councilmember

Call to Order

The regular meeting of the Board of Health was called to order at 3:02 p.m. by Vice Chair Kurt Hilt in the auditorium of the Snohomish Health District Rucker Building.

Roll Call

Roll call was taken by Ms. Linda Carl who reported there was not a quorum present.

Arrivals/Departures

Dan Rankin arrived at 3:03p.m., Terry Ryan arrived at 3:05 p.m., Scott Bader arrived at 3:06 p.m., Chris Cook and Liam Olsen joined via phone at 3:07 p.m., Brian Sullivan arrived at 3:17 p.m.

Public Comment

There were no volunteers to speak during public comment. Public comment was closed.

Special Business

Sen. Marko Liias participated via phone for a discussion regarding the proposed Mariner Community Campus in south Everett. Sen. Liias began the conversation and noted there's a lack of community institutions in the unincorporated areas around Mariner High School. Having vibrant community institutions, recreational opportunities, healthcare access, and educational access would bring opportunity to this area. Sno-Isle Libraries (Library) has a small branch in the Albertson's parking lot, which has been very successful; they expressed a more permanent presence in the area and were enthusiastic about a vibrant community institution. Two years ago, Sen. Liias obtained funds from the legislature to complete feasibility work. The Library and the Pomegranate Center then completed a report showing a huge need and enthusiasm from community members for a community campus. Sen. Liias secured additional funding in this year's capital



funding for the next phase of property acquisition and defining what this institution will be. He thanked the Health District for stepping forward to be the custodian of the next step. All the partners can work together to determine a vision and think about where all these organizations align and how the neighborhoods can be served. There are about 35,000 people in the greater Mariner area; light rail is coming to this area in the not-too-distant future. Discussions around governance and what community partners and facilities are a part of the campus are still open. Land isn't getting cheaper, and the sooner we can move on this, the better we can build something for the community that meets their needs, addresses challenges, and invests in the neighborhood.

Vice Chair Kurt Hilt expressed that he likes the idea of supporting the Mariner area. He asked the Senator for a few points addressing what the institution would look like. Sen. Liias responded that the key mission would include a library as an anchor partner, as well as more access to healthcare and nutritional and human services, educational opportunities, and access to recreational/active living services or opportunities. The community needs assessment also mentioned a community meeting space, cultural opportunities or gatherings, and a small-business component. Vice Chair Hilt then mentioned that the Health District is deliberating what it will be doing in the next five to 10 years, and our potential mission may not align with being the custodian for the Mariner project. Sen. Liias said the Library is very interested in this project, but by statutory can't be the custodian. He noted that the County could be an option, as well as the Health District, if missions align. Because this area doesn't have a city governance that provides these services, this is an opportunity for us to be creative and bring people and partners together.

Ms. Linda Redmon asked what funding sources and how much are available to support the building as well as the services, once they're in place. Sen. Liias responded that the Library has funding mechanisms; the community colleges have as well to construct satellite facilities; in the state capital budget there are funding "pots" that this project could qualify for, such as a building community fund, building for the arts, and a variety of grant programs. Mukilteo School District is also engaged for learning opportunities, and the Boys & Girls Club and the YMCA are also engaged in discussions. There would be shared space, but partners would have their own mission and qualify for different funding stream and grant programs. The Library has taken the lead on discussions regarding federal funding opportunities.

Mr. Scott Bader noted that Mariner is in Everett's UGA, and that area may be annexed into the city of Everett in the future. Could this arrangement unravel if annexation occurs and the Library or County are no longer involved? Sen. Liias is not familiar with what happens to a library if the area is annexed nor knows when the annexation could take place. However, the community is struggling now, so how do we provide them with services and how do we create a sustainable vibrant community? We need to think about governance and agreements with partners, then build in an understanding with the partners on what annexation would look like and how services will continue to be provided. We also need more engagement with the city team.

Ms. Adrienne Fraley-Monillas noted that we don't have the immunization program any longer and the Health District is facing a budget problem in 2020 that likely won't allow us to have staff to assign to extra projects. She likes the idea of the Mariner Campus; however, she questions the benefit to the Health District in providing the pass-through for funding, particularly in the middle of a budget crisis. Sen. Liias said the way the state grant is structured, costs of the RFP and seeking and obtaining property would be reimbursable. There shouldn't be any additional cost to the District for staffing. It's up to the Board to define community health; from his perspective, obesity-prevention, suicide-prevention, stopping the opioid crisis, and preventing gun violence fall under public health and not what the private healthcare system is suited to address. So a facility that encourages people to be more active and to build relationships in their community that are critical to suicide-prevention and mental health, as well as addresses substance-use disorder and violence, feel like a public health mission to him. But it's the Board's job to define the District's focus and priorities are; if they don't align, then it's understandable. From his perspective, the District is a great partner because it's at the center of creating a healthy community. Ms. Fraley-Monillas mentioned that we're working on a strategic plan and noted



we don't have a capital manager on staff. She's concerned about us taking on another project that may or may not benefit the Health District; however, through the strategic plan we may learn what we need to do to sustain public health. She added that public health didn't receive all the funding that was requested from the legislature. Public health encompasses a lot in our community, and if we had enough money we could take on more of these challenges; however, we have to pick and choose where we place our time and effort. This is an exciting idea, but how do we, as the pass-through agency, manage it?

Sen Lias stated that there's never been a desire to place an undue cost on any of the agency partners, which is why the feasibility work was paid for by state capital budget appropriation. If there's a concern regarding costs that aren't accounted for, then it would be valuable to bring that forward. It will take some staff time and resources to support the next step, but they are reimbursable activities and hopefully no net cost to the District.

Approval of agenda

With the arrival of several Board members, there was now a quorum present.

It was moved by Ms. Adrienne Fraley-Monillas and seconded by Mr. Nate Nehring to approve the agenda contents and order. The motion passed unanimously.

Approval of Minutes

It was moved by Mr. Terry Ryan and seconded by Ms. Fraley-Monillas to approve the minutes of the regular meeting of August 13, 2019, and the special meeting on August 13, 2019. The motion passed unanimously.

Division Update

Public health nurse Felicia Cain presented on the Compact of Free Association (COFA) Island health fair on Nov. 2 from 11 a.m. to 5 p.m.

Written Reports

Committee reports are provided in the Board packet.

Consent

It was moved by Ms. Linda Redmon and seconded by Ms. Fraley-Monillas to approve the following consent agenda items:

- a. Approve vouchers and Res. 19-19 authorizing August 2019 expenditures for the Health District and PHEPR fund
- b. Approve corrected minutes for the Jan. 8 and Feb. 12, 2019, Board meetings to fully comply with OPMA requirements and the State Auditor's recommendation
- c. Approve request to reclassify a 1.0 Disease Intervention Specialist position to a lead position (SR 19-089; N. Furness)

The motion passed unanimously.

Briefings

Finance Manager's report for June 2019 (SR 19-093)

Mr. Shawn Frederick reported that revenues are 8.5% above projections and expenditures are 3.9% above projections, which includes payouts and software-implementation costs. Currently the total fund balance is just over \$9.5M.



Environmental Health proposed fee schedule (no staff report)

Mr. Bruce Straughn presented the proposed fee schedule; it will go to committees again later this month and to the Board for final approval in October. Staff recommends an across-the-board 5.5% fee increase, reflective of the last two year's COLAs (2.75% each year). The last time the fees increased was in 2017. Overall, fees cover all direct costs and all but 14% of indirect costs in EH. Fees in the drinking water program, however, don't cover 40% of indirect costs. Mr. Straughn is proposing higher fees in that program. The new fees won't cover the full indirect cost but will cover more than is currently.

Many of EH feels have a base rate plus an hourly rate; the new electronic system doesn't allow for that type of invoicing, so these fees will now be a flat rate based on the average number of hours spent on those projects. There's a new fee for bed and breakfasts, which are required by our code to be permitted; this new fee was added based on a low-risk bakery inspection. New onsite sewage report submittal fees were also added.

After Board and committee input, the new fees will be brought to the Board next month for approval. There will also be a public hearing at the October Board meeting. After approval, the food program invoices will be mailed no later than the middle of November.

Mr. Bader asked if there's a policy related to fee increases and, if not, should we look at a policy that addresses full-cost recovery. Vice Chair Hilt suggested this topic be addressed at the committee level.

Draft Res. 19-20 regarding the Division of Responsibilities for Board consideration and input (SR 19-092)

Legal Counsel Grant Weed reported that in 2016 the executive committee started to review the division of responsibilities document, and the task force has been working on it this year. The document is a blueprint for the operations of the Health District and is intended as a guide now and into the future. The document is divided into four categories: organization, expenditures, revenues, and labor relations. The document better defines who plays what role in this area. It now includes the executive committee's role as well, along with Health District leadership and the Board of Health. The task force will meet again this month to review input from committees and the Board and will bring it back to the Board in October for consideration and adoption by resolution. Mr. Frederick added that the org chart in the Board packet represents current agency structure, and the org chart that was distributed at the meeting reflects the agency based on the proposed changes in the division of responsibilities. The primary difference is that previously there was an administrative services division separate from other administration functions, whereas with the new division of responsibilities, all of administration is combined and the administrative services director position has been eliminated.

Narcan funding in the County (SR 19-095)

Ms. Heather Thomas reported that the County will end the Narcan program at the end of the year due to the end of grant funding. The County notified police departments that standing orders are in place; the state health officer also recently put in place a blanket statewide order. Police departments are able to purchase naloxone kits, which include two doses of Narcan and cost approximately \$75. The Health District reached out to the state DOH regarding their leave-behind program. It's possible the Health District could be a distribution hub; however, we cannot give Narcan to law enforcement or first responders to give to patients; through DOH, Narcan can only be given to a family member or the patient. Ms. Thomas introduced Kyle Wansing an AmeriCorps Vista member who is a federal employee housed at the Health District in partnership with Housing Hope and Hope Works. Our cost for Mr. Wansing is \$5,000, which is funded through our opioid grant. Mr. Wansing is providing opioid outreach and working with community partners. There's a possibility he could provide data tracking and coordination with Narcan distribution.

Ms. Fraley-Monillas commented that the bigger issue is training and tracking, including expiration dates. She expressed concerns of the smaller communities and their ability to pay for Narcan. Ms. Thomas stated that the County paid for approximately \$50,000 per year for the naloxone, not including staff time. The grants through CDC cannot be used for the purchase of naloxone; Health District has met with a federal delegation and discussed this limitation, but this likely won't change soon. Ms. Fraley-Monillas would like the Board to make a



decision fairly quickly and then get the information out to the cities so they can move forward. She doesn't want to see the death rate increase because cities can't afford the antidote. Ms. Fraley-Monillas asked staff to reach out to the cities to see what their plan is for supplying Narcan to law enforcement after the end of the year.

Ms. Thomas noted that Mr. Wansing and the medical reserve corps could become train-the-trainers. We could also partner with DOH to set up a distribution program as a leave-behind. The County was tracking expiration dates (each dose is good for 12-18 months); officers would then fill out a request to have it replaced.

Ms. Fraley-Monillas asked what fire districts did since Narcan was provided only to law enforcement through the County. Ms. Thomas stated that she knew the South County Regional Fire Authority purchased Narcan separately, partially through grant funding. She offered to take a poll of EMS and fire districts to see how it's funded and how much is used. Mr. Hilt added that for fire districts, what's given to the public is grant-funded; what's used on patients is included in medical billing.

Ms. Fraley-Monillas asked staff to come back to the October meeting with options of what the Health District can do, including training and coordination, and options for funding it.

Communications and outreach update (no staff report)

Ms. Thomas reviewed what the communications division is doing to communicate with the public, including a new website with themed pages, a blog, electronic newsletters, social media (Facebook, Twitter, YouTube), and community events. The website includes a "notify me" option to keep people updated. They're working on a monthly toolkit to send to partners and PIOs at school districts and cities, with information that can be dropped into e-newsletters or on a TV channel. We also have an Instagram account and are looking at other platforms for targeted audiences, and we're developing a newsletter for elected officials. Ms. Matsumoto Wright stated that she had difficulty finding information on our website regarding a recent restaurant closure; Ms. Thomas said there's an "inspections results" tab on the homepage but acknowledged that it's not always easy to navigate because it connects to an outside platform.

Action Items

Approve 2019 budget amendments (SR 19-094)

The 2019 budget appropriations need to be adjusted from \$16.3M to \$17.1M. The increase of about \$783,000 is partially offset by revenues of about \$344,000; the net result is a deficit in the 2019 budget of about \$440,000. As of June 30, the unreserved fund balance—where this money is likely to come from—is at \$4.2M. Mr. Frederick reviewed several factors in the budget amendment, including the Kresge grant, the NSACH revenue, employee leave payouts, software implementation, unbudgeted expense to purchase budgeting software, and a placeholder of \$40,000 for a performance audit. Pending adjustments are \$75,000 for health officer and administrator recruitment and appropriating HVAC funds from the approved capital budget to the operating budget.

It was moved by Mr. Ryan and seconded by Mr. Bader to approve the 2019 budget amendments. The motion passed unanimously.

Ms. Fraley-Monillas added that for health officer recruitment, the executive committee recommended we do this internally; then, if we're not successful in finding a qualified candidate, use a professional recruiter.

Executive Session

The Board convened into executive session for the purpose of a personnel matter pursuant to RCW 42.30.110(1)(g). The Vice Chair announced that executive session is expected to last up to 20 minutes, unless extended, and the Board will reconvene into regular session at 4:50 p.m. and may or may not take action. The Board reconvened at 4:50 p.m. and took no action.



Interim Administrator's Report

Mr. Frederick started with three words: transparency, clarity, and structure. He meets weekly with Chair Wright, and her direction is to center his work on creating those three concepts within the Health District. This is reflected in the work being done on the budget. He met with Health District staff and briefed them on the current status of the budget and next steps. Staff provided suggestions such as hiring a grant writer, early retirements, and going from full- to part-time for some employees. Mr. Frederick also engaged with PTE and AFSCME. The next budget ad hoc meeting is tomorrow morning, and Mr. Frederick will provide another update to the Board next week. He presented to the Mukilteo city council last week and will present to Everett city council tomorrow regarding the per capita request. He's scheduled to present to the other cities this fall. He's heard that we're not communicating enough with the cities, so he intends to visit the cities twice a year.

Additionally we're establishing a performance measure throughout the agency so we can address the business of public health, and we're working with staff on a performance evaluation tool. This tool is intended to keep us accountable and good stewards. The leadership team established a quarterly meeting with all directors, managers, and supervisors to create a common operating picture of the agency. This will be a springboard to develop future leaders to improve agency efficiency and effectiveness.

The finance audit is nearing the end; we unfortunately will receive a finding based on single-source policy. There are allotments in the federal code for single-source procurements; however, our procurement policy does not allow it, resulting in a finding. Our work on policy is dependent on completion of the division of responsibilities; once adopted, our procurement policy will be one of the first to be addressed.

Through the Kresge grant, Mr. Frederick and Chair Wright will attend a week-long program this month titled Driving Government Performance. On Sept. 30, Kresge representatives will be here for a site visit, which will include a tour of urban and rural areas. Kresge has expressed interest in investing more in the Pacific Northwest. We intend to have a discussion on what cross-jurisdictional work looks like moving into the future.

We had an RFQ out for a leasing agent for the Rucker Building but received no submittals. Because we don't have a single-source procurement option, the RFQ will have to go out again. Mr. Frederick reported that the HVAC project is complete and we're moving on to the parapet project. Road construction on Rucker includes removing trees and repairing the sidewalk; this will save \$19,000 that was budgeted in our 2019 budget for sidewalk repair. A meeting for the Rucker Building task force will be scheduled soon.

Interim Health Officer's Report

Dr. Chris Spitters updated the Board on a TB case he reported on last month in which the person refused treatment. We got a court order for the individual to comply and provided short-term housing; the individual is now cooperating. There were about a dozen cases in the recent statewide measles outbreak; Snohomish County had one case. Measles is a rash illness that's highly contagious; it starts with a fever and is spread through coughing. It was introduced by an unvaccinated population in our state and transmitted through sites at the airport and Seattle Children's Hospital. The last case happened several months ago. Comparatively, New York had 700 cases that cost the health department \$6M to investigate and control thorough vaccinations. There's an ongoing outbreak in the Ukraine with 100,000 cases over the last two years and 40 deaths. For migration purposes, they must be immune or receive the vaccination.

Hepatitis A (inflammation of the liver) continues to be a problem; it generally spreads where hygiene is low and is associated with homelessness and drug-injection. Two dozen cases were seen recently, mostly in King and Spokane Counties and one case in Snohomish County. Nationwide there have been 25,000 cases with 250 deaths and several thousand hospitalized. We're trying to provide vaccine information to affected groups through needle exchanges and places that serve homeless individuals, such as Mercy Watch.

Severe pulmonary disease associated with vaping is growing; nationwide we've seen over a hundred cases with several deaths, including one in Oregon. Most are in California and the Midwest. The common characteristic is vaping; however, no single product is evident. Most of the products appear to be those obtained outside the legal vaping market; in Washington State, stores are more regulated. We sent a message



to Healthcare providers to be on the lookout for this issue and to let us know if vaping is a factor. For the general community, we encourage those who vape to not purchase products outside what's legally available, and if you don't vape, don't start.

Information Items

Vice Chair announced that there will be a special meeting of the Board at 2 p.m. on Oct. 8 for strategic planning, followed by the regular meeting of the Board at 3 p.m.

Adjournment

The meeting was adjourned at 5:10 p.m.

Stephanie Wright, Chair

Shawn Frederick, Interim Administrator / Secretary