

KITSAP PUBLIC HEALTH BOARD

The Kitsap Peninsula is home of sovereign Indian nations, namely the Suquamish and Port Gamble S'Klallam Tribes

MEETING AGENDA

September 2, 2025 8:30 a.m. to 10:00 a.m.

Chambers Room, Bremerton Government Center 345 6th Street, Bremerton WA 98337

(Health Board members may participate remotely via Zoom)

8:30 a.m.	1.	Call to Order Dr. Tara Sell, Chair	
8:31 a.m.	2.	Approval of July 1, 2025, Meeting Minutes Dr. Tara Sell, Chair	Page 4
8:32 a.m.	3.	Approval of August 5, 2025, Special Meeting Minutes Dr. Tara Sell, Chair	Page 8
8:33 a.m.	4.	Approval of Consent Items & Contract Updates Dr. Tara Sell, Chair <u>External Document</u>	
8:34 a.m.	5.	Public Comment Dr. Tara Sell, Chair	
8:44 a.m.	6.	Administrator & Health Officer Reports Yolanda Fong, Administrator & Dr. Herbie Duber, Interim Health Officer	

DISCUSSION ITEMS

8:55 a.m.	7.	Parent Pregnancy Support Line & Nurse Family	Page 10
		Partnership Program	
		Jessica Smith, Parent Child Health Program Manager	
		Karina Mazur, Nurse Family Partnership Supervisor	

Kitsap Public Health Board – Meeting Agenda (continued) September 2, 2025 Page 2

9:15 a.m.	8.	Health Continuum & Access to Care for Persons	Page 28
		Using Substances	
		Lynn Pittsinger, Community Health Director	
9:40 a.m.	9.	Update to Ordinance 1999-14, Rodent Control Regulations John Kiess, Environmental Health Director	Page 49

10:00 a.m. 10. Adjourn

All times are approximate. Board meeting materials are available online at www.kitsappublichealth.org/about/boh

Attending/viewing Health Board meetings

Members of the public can attend Kitsap Public Health Board meetings **in person** at the time and location listed at the top of the agenda.

Health Board meetings will broadcast **live on Comcast channel 12, WAVE channel 3, and on the BKAT website at https://www.bremertonwa.gov/402. A video recording of the meeting will be made available at www.kitsappublichealth.org/about/boh, typically within 48 hours of meeting adjournment.**

Providing public comment

Verbal public comment: Members of the public can provide spoken public comment to the Health Board by attending the meeting in person at the time and location listed at the top of the agenda.* Members of the public who attend in person can make verbal comments during the Public Comment agenda item or as specified by the Health Board Chair.

As this meeting is a regular business meeting of the Health Board, the Chair will establish a time limit for public comment to ensure enough time is allowed for all agenda items to occur prior to adjournment. Each public commenter will receive a specific amount of time to address the board as determined by the Chair.

Written comments may be submitted by mail or email to:

Kitsap Public Health Board – Meeting Agenda (continued) September 2, 2025 Page 3

Mail: Email:

Kitsap Public Health Board healthboard@kitsappublichealth.org

Attention: Executive Secretary

345 6th Street, Suite 300 Bremerton, WA 98337

All written comments received will be forwarded to board members and posted on the Health Board's meeting materials webpage at www.kitsappublichealth.org/about/boh.

*If you are unable to attend a meeting in person and need to request an accommodation to provide verbal public comment, please email healthboard@kitsappublichealth.org or call 360-728-2235.

Health Board meeting notifications and materials

To sign up to receive Kitsap Public Health Board meeting notifications by email or text message, go to <u>kitsappublichealth.org/subscribe</u>, email pio@kitsappublichealth.org, or call 360-728-2330. Notifications are typically sent on the Thursday prior to each regular Tuesday meeting.

A schedule of regular Health Board meetings is posted on the Health District website here.

Materials for each meeting, including an agenda, minutes from the prior Health Board meeting, and informational meeting packet, are posted prior to each scheduled meeting at www.kitsappublichealth.org/about/boh. Printed materials are available for meeting attendees. A video recording and copies of presentations are posted to the board meetings website after each meeting.

KITSAP PUBLIC HEALTH BOARD MEETING MINUTES Regular Meeting July 1, 2025

The meeting was called to order by Chair Tara Sell at 8:30 a.m.

Each Board member present gave a brief introduction.

APPROVAL OF MINUTES

Member Stephen Kutz moved and Member Dr. Michael Watson seconded the motion to approve the minutes for the June 3, 2025, regular meeting. The motion was approved unanimously.

CONSENT AGENDA

The July consent agenda included the following contracts:

- 2441, Amendment 5, Washington State Department of Health, Consolidated Contract;
- 2470, Washington State Department of Ecology, Pollution Prevention Assistance Partnership; and
- 2473, Jefferson County Public Health, Nurse Family Partnership Supervisor.

Chair Sell noted the consent agenda was amended to include a Department of Ecology Pollution Prevention Assistance Partnership contract.

Member Kutz moved and Commissioner Christine Rolfes seconded the motion to approve the amended consent agenda. The motion was approved unanimously.

PUBLIC COMMENT

There was no public comment.

HEALTH OFFICER/ADMINISTRATOR'S REPORT

Administrator Report:

Yolanda Fong, Administrator, shared five updates:

Foundational Public Health Services (FPHS) funding from Washington State
Department of Health (DOH) currently makes up 22% of the Health District's 2025
budget. DOH will reduce FPHS funding by \$24 million per biennium, shared across local
health jurisdictions (LHJs) and DOH. Starting July 1, 2025, the Health District will see a
2.5% reduction – around \$91,000. DOH will provide more details as they become
available.

Kitsap Public Health Board Regular Meeting July 1, 2025 Page 2 of 4

- DOH announced that only 75% of CDC Public Health Emergency Preparedness funds will be allocated to DOH by July 1, 2025. The Health District historically received about \$300,000 annually from these funds. DOH has not yet determined how the reduced funds will be distributed, so the impact on the Health District is currently unknown.
- The Board Finance Committee will meet in early August to review the 2025 budget and discuss preparations for the 2026 budget. Ms. Fong hopes to have more funding information by then and will update the Board as needed.
- Washington State Association for Local Public Health Officials (WSALPHO) is coordinating site visits to seven LHJs for Washington State House and Senate budget staff, including representatives from the House, Senate, Governor's office, local legislators, and health boards. The Health District's visit is scheduled for August 28th in the afternoon and will last two to three hours, covering Health District operations, Kitsap County demographics, FPHS funding uses, and other local highlights. Board members interested in attending should contact Ms. Fong or Margo Chang.
- WSALPHO's annual training for local boards of health will be held October 7 through
 October 9 in Ellensburg, Washington. The training covers public health governance
 and authority. Registration, lodging, and some meals are covered by WSALPHO; the
 Health District covers additional travel costs. Board members interested in attending
 should contact Ms. Fong.

Board members discussed the report and asked clarifying questions.

There was no further comment.

Health Officer Report:

Dr. Gib Morrow, Health Officer, shared information about grief, an unacknowledged, significant personal and public health issue:

- Grief and Public Health: Dr. Morrow discussed forms and impacts of grief, noting its effects on health and the need for public health to address it through policy, equity-based approaches, and continued research.
- Wellness Efforts: Dr. Morrow recognized the Health District's Swellness Committee for promoting employee wellness.
- Personal Acknowledgements: Dr. Morrow expressed gratitude to Health District employees, community partners, and the Board, and shared reflections on personal losses.
- Resignation Announcement: Dr. Morrow announced his resignation, effective no sooner than July 31, and committed to assisting with the search for a successor.

Board members discussed the report and asked clarifying questions.

There was no further comment.

Common\Admin\Board-KPHD\2025\9 September\ Board Minutes July 2025 DRAFT

Kitsap Public Health Board Regular Meeting July 1, 2025 Page 3 of 4

WEBSITE UPDATE

Tad Sooter, Communications Program Manager, presented the new healthcare provider page on the Health District's website. The page includes contact information, notifiable condition reporting forms, resource links, recent advisories, and relevant disease data dashboards. The page will be shared with providers, and feedback will be collected to ensure it meets their needs.

Board members discussed the presentation and asked clarifying questions.

There was no further comment.

PUBLIC HEALTH EMERGENCY PREPAREDNESS AND RESPONSE PROGRAM UPDATE

Jessica Guidry, Public Health Infrastructure Assistant Director, and Quynh Sample, Resources Specialist, provided an update on the Public Health Emergency Preparedness and Response (PHEPR) program. They reviewed PHEPR's mission and how it aligns with the Health District's overall mission, described key response activities such as internal and interagency coordination, information sharing, staff safety, and continuity of operations, and highlighted additional support activities.

The presentation also covered past preparedness and response activities, PHEPR's role in supporting the Health District's readiness for emergencies, and introduced the program's three team members: Nathan Anderson, Amy Anderson, and Quynh Sample. They shared recent and current initiatives, identified community partners, and provided information on the PHEPR page of the Health District's website.

Board members discussed the update and asked clarifying questions.

There was no further comment.

PUBLIC HEALTH HEAT AND WILDFIRE SMOKE PREPAREDNESS

Nathan Anderson, PHEPR Planning Specialist, presented on heat and wildfire smoke preparedness. Mr. Anderson reviewed the health and medical impacts of extreme heat and wildfire smoke, forecasts for the coming summer, and Health District activities to address these impacts, including monitoring conditions and issuing recommendations, providing public information and community outreach, and distributing supplies when available.

Board members discussed the presentation and asked clarifying questions.

Common\Admin\Board-KPHD\2025\9 September\ Board Minutes July 2025 DRAFT

Kitsap Public Health Board Regular Meeting July 1, 2025 Page 4 of 4

There was no further comment.

ADJOURN

There was no further business; the meeting adjourned at 9:52 a.m.					
Dr. Tara Sell	Yolanda Fong				
Kitsap Public Health Board	Administrator				

Board Members Present: *Member* Stephen Kutz; *Councilperson* Ashley Mathews; *Mayor* Rob Putaansuu; *Commissioner* Christine Rolfes; *Member* Dr. Tara Sell; *Member* Dr. Jolene Sullivan; *Member* Dr. Michael Watson; *Mayor* Greg Wheeler.

Board Members Absent: Mayor Becky Erickson; Member Drayton Jackson.

Community Members Present: Kirsten Yunuba, *Community Member*; Janet Kalmen, *Community Member*.

Scribe: Margo Chang, Management Analyst, Kitsap Public Health District.

Staff Present: Amy Anderson, Community Liaison, Public Health Emergency Preparedness and Response; Nathan Anderson, Community Liaison, Public Health Emergency Preparedness and Response; Katie Baker, Public Health Educator, Communications; Angie Berger, Management Analyst, Equity & Performance Management; Dana Bierman, Program Manager, Chronic Disease and Injury Prevention; Elizabeth Davis, Program Manager, Immunizations and General Communicable Disease; Yolanda Fong, Administrator, Administration; Jessica Guidry, Director, Public Health Infrastructure Division; Adrienne Hampton, Policy, Planning, and Innovation Analyst, Administration; Martitha May, Community Health Worker, Parent Child Health; Dr. Gib Morrow, Health Officer, Administration; Quynh Sample, Community Liaison, Public Health Emergency Preparedness and Response; Jessica Smith, Program Manager, Parent Child Health; Tad Sooter, Program Manager, Communications.

KITSAP PUBLIC HEALTH BOARD MEETING MINUTES Special Meeting August 5, 2025

The meeting was called to order by Chair Dr. Tara Sell at 3:03 p.m.

EXECUTIVE SESSION PURSUANT TO RCW 42.30.110(1)(g): DISCUSSION TO EVALUATE THE QUALIFICATIONS OF AN APPLICANT FOR PUBLIC EMPLOYMENT

At 3:04 p.m., Chair Sell recessed the meeting for a 10-minute executive session to evaluate the qualifications of an applicant for public employment. She stated the Board would reconvene afterwards.

APPOINTING AN INTERIM HEALTH OFFICER FOR THE KITSAP PUBLIC HEALTH DISTRICT

The meeting reconvened at 3:16 p.m.

Mayor Rob Putaansuu moved and Mayor Becky Erickson seconded the motion to appoint Dr. Herbie Duber as Interim Health Officer for the Health District.

Member Stephen Kutz shared that the Suquamish Tribe had worked with Dr. Duber, former Regional Health Officer for the Washington State Department of Health, during the COVID-19 pandemic and found him highly competent in public health matters.

Chair Sell reminded the Board that only elected officials may vote on this item, per the bylaws.

The motion was approved unanimously among elected officials.

There was no further comment.

ADJOURN

here was no further business; the meeting adjourned at 3:19 p.m.						
Dr. Tara Sell	Yolanda Fong					
Kitsap Public Health Board	Administrator					

Kitsap Public Health Board Special Meeting August 5, 2025 Page 2 of 2

Board Members Present: Mayor Becky Erickson; Member Drayton Jackson; Member Stephen Kutz; Councilperson Ashley Mathews; Mayor Rob Putaansuu; Commissioner Christine Rolfes; Member Dr. Tara Sell; Member Dr. Michael Watson.

Board Members Absent: *Member* Dr. Jolene Sullivan; *Mayor* Greg Wheeler.

Community Members Present: None.

Scribe: Margo Chang, Management Analyst, Kitsap Public Health District.

Staff Present: Angie Berger, *Management Analyst, Equity & Performance Management;* Yolanda Fong, *Administrator.*



MEMO

To: Kitsap Public Health Board

From: Lynn Pittsinger, MSN, ARNP, CPNP, PMHS, CIC, CPHQ,

Community Health Director

Date: September 2, 2025

Re: Pregnancy & Parenting Support Line and the Nurse

Family Partnership Program

Background and Introduction

The Parent Child Health and Nurse Family Partnership (NFP) Program is one of four programs within the Community Health Division at the Health District. As of June 1, 2025, the program is managed by Jessica Smith. Karina Mazur serves as the nursing supervisor for NFP – not only at the Health District, but also for Jefferson County (through a fiscal partnership with the Department of Children and Families) and for the Suquamish Tribal Nation (through a newly contracted partnership). I have asked these public health professionals to highlight two key areas of their work that demonstrate the critical contributions of these programs.

Pregnancy and Parenting Support Line (PPSL)

The Pregnancy and Parenting Support Line (PPSL) – (360) 728-BABY – has been under active development since April 2024. It was initially launched to assist pregnant individuals who lacked access to obstetric care and pregnancy tests. Today, it supports a much broader range of needs, including parenting, pregnancy care, mental health support, infant feeding and nutrition, early learning and developmental concerns, home visiting programs, support groups, substance use, health insurance access, and referrals to NFP. Calls are handled by a collaborative team that consists of a public health nurse, community health worker, and public health educator. Together, they provide referrals, make "warm handoffs" to community partners, and follow up with families served. Program staff also track and evaluate data to identify emerging needs or concerns, which may be addressed

B PHAB Advancing Performance

Memo to Kitsap Public Health Board September 2, 2025 Page 2

through the Kitsap County Clinical Perinatal Collaborative or through policy recommendations.

The PPSL is widely promoted through provider alerts, community tabling events, a billboard, and provider practice visits. The Kitsap County Perinatal Clinical Leadership Collaborative also helps amplify awareness. Additionally, Saint Michael's Medical Center now includes a rack card about PPSL services in every discharge packet for families giving birth at its Family Center.

Nurse Family Partnership (NFP)

The Nurse Family Partnership is a nationally recognized, evidence-based home visiting model. It connects families with specially trained nurses who provide support during pregnancy and through a child's first two years of life, ensuring a holistic continuum of care.

In Kitsap County, NFP began as a community idea in 2003 after local reports of child abuse and neglect (Brian Nyquist MD, President Healthy Start Kitsap). The program was formally implemented in 2009 when Healthy Start Kitsap partnered with the Health District.

Today, the program is staffed by 2.5 specially trained public health nurses who collectively manage about 67 families at any given time. These nurses are supported by a nursing supervisor, a community health worker, the program manager, and director of the Community Health Division.

Shared Impact of PPSL and NFP

Both the PPSL and NFP provide case management services that strengthen not only the families served, but also the practices of primary care and perinatal care clinicians by fostering care integration and collaboration. The programs' ability to collect real-time, deidentified data also provides valuable insight, allowing the Health District to make timely adjustments in community systems of care and access to care.

Recommendation

None at this time – for information and discussion only.

Please contact me at (360) 689-5222, or <u>lynn.pittsinger@kitsappublichealth.org</u>, with any questions or comments.

Attachments (1)



Parent Child Health

Parenting and Pregnancy Support Line Nurse-Family Partnership



Jessica Smith

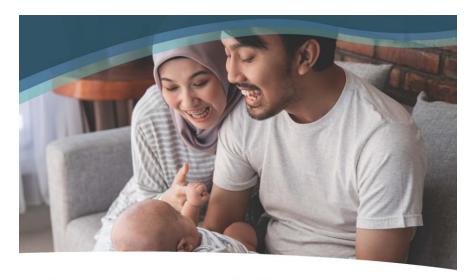
Program Manager, Parent Child Health & Nurse-Family Partnership

Karina Mazur

Public Health Nurse Supervisor, Nurse-Family Partnership

PPSL - Community Resource





Pregnancy & Parenting Support Line

Looking for pregnancy or parenting resources? We can help!

Call: 360-728-BABY



360-728-2229 Monday-Friday, 8 a.m.-4 p.m. KitsapPublicHealth.org/ParentSupport **Purpose:** Help new and expecting parents find services and resources they need.

We assist with:

- Pregnancy care
- Mental health support
- Lactation (breastfeeding/chestfeeding)
- Early learning
- Parenting
- Home visiting programs
- Support groups
- Developmental concerns

PPSL -Origins and Process



- Launched summer 2024 in response to community need
- Strategic purpose:
 - Respond to community needs
 - Collect data around current patterns of need
 - Connect with community partners around problem solving efforts



PPSL Trends Over Time

Launched: June 2024

Total # calls: 79

~ 3 calls/month in 2024

~ 7 calls/month in 2025

Most frequent requests

- Mental health support
- Children and youth with special healthcare needs referrals/support
- Interest in Nurse-Family Partnership
- Healthcare/perinatal care access
- Medicaid access

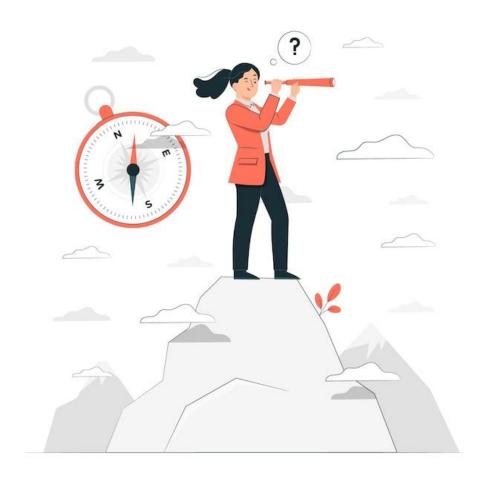




PPSL - Looking Forward



- Electronic health record integration and consolidating referral pathways
- Continued outreach and developing partnerships(e.g., telebupe)
- Enhanced ways to connect: selfschedule an online call, QR code for providers to fill out referral sheet



PPSL Case Studies

Responding to community needs

 Community member called PPSL about woman at the park with her 2 children (infant, school age)

 CHW screened client, risk factors included: unhoused, fleeing DV, no English

 CHW provided referrals for housing, immigrant services, clothes, food, and

diapers

 Client able to get shelter and CHW following up as needed

Providing specialized nursing care

- PCP called about a post partum client with suicidal ideation
- Nurse let the PCP know about key community resources
- Nurse talked to client, gave referral to Navy Fleet & Family and Mama Moves Kitsap, provided suggestions on improving sleep
 - Client felt supported and empowered!







BETTER WORLDS START WITH GREAT FAMILIES

AND GREAT FAMILIES START WITH US



NFP Key Goals





Improve pregnancy outcomes by partnering with families to engage in preventative health practices including through prenatal care from their health care providers, improving their diets and reducing the use of habit-forming substances.

Improve child health and development by assisting families to provide responsive and competent care.

Improve families' economic self-sufficiency by supporting parents to develop a vision for their future, plan additional pregnancies, continue education, and find work.

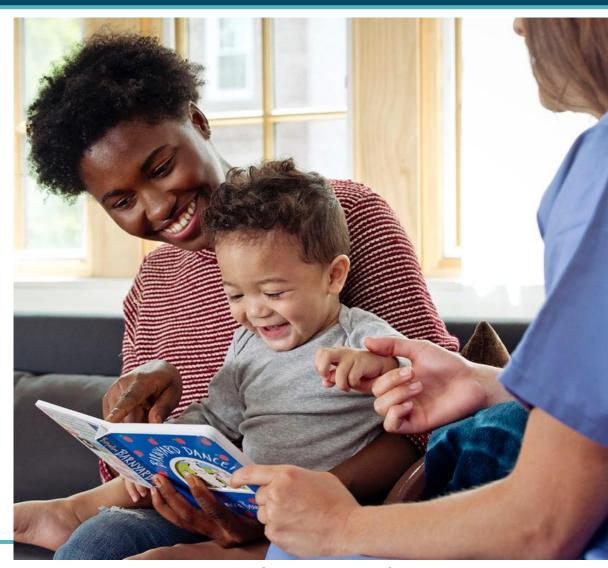
NFP Overview



Who: Specially trained nurses + vulnerable moms

What: Regular home visits, nursing expertise to address challenges and build confidence

When: First 1000 days – pregnancy through the child's second birthday



kitsappublichealth.org

NFP Outcomes - The Why





Trial outcomes demonstrate that Nurse-Family Partnership delivers against its three primary goals of better pregnancy outcomes, improved child health and development and increased economic self-sufficiency — making a measurable impact on the lives of children, families and the communities in which they live.

For example, the following outcomes have been observed among participants in at least one of the trials of the program.

48% reduction in child abuse and neglect¹

56% reduction in ER visits for accidents and poisonings²

50% reduction in language delays of child age 21 months³

67% less behavioral/intellectual problems at age 64

32% fewer subsequent pregnancies⁵

82% increase in months employed⁶

61% fewer arrests of the mother¹

59% reduction in child arrests at age 15⁷

NFP in Kitsap

By the numbers

- Launched in 2012
- 3,345 visits completed by NFP nurses in the last 5 years
- 2,827 referrals completed in the last 5 years
- 7-10 clients on the waitlist on average



Referrals come from

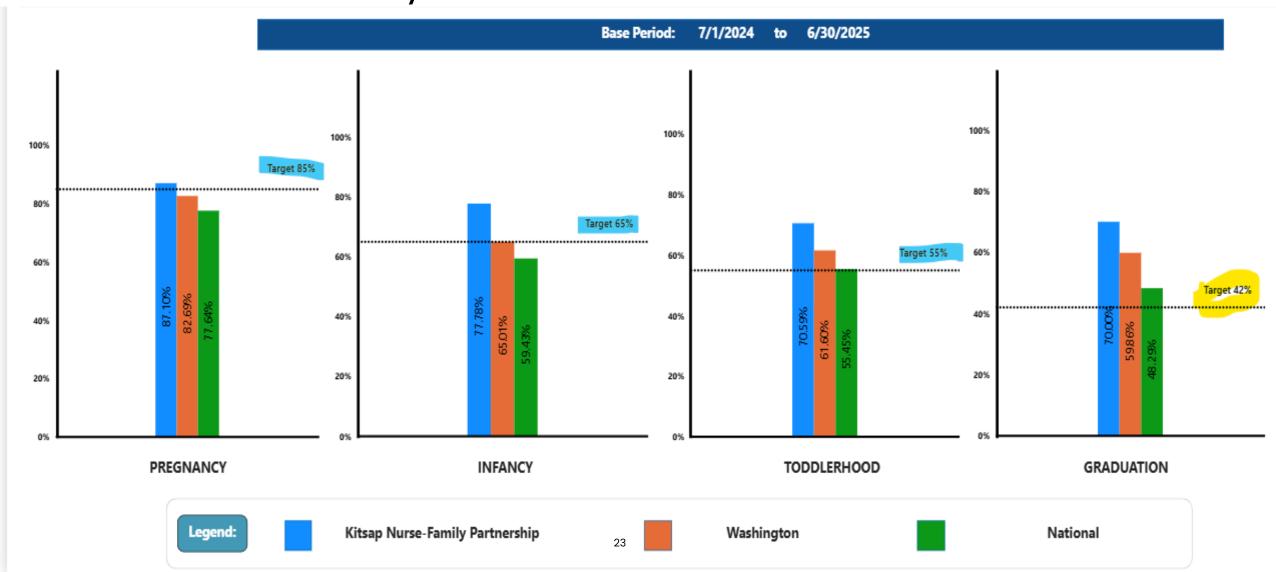
- Community Partners:
 - WIC
 - KIAC
 - Coffee Oasis
- Medical providers:
 - Local OB/GYN offices
 - Family Medicine Residency Clinic
 - PCHS
- Self/family (PPSL)



NFP in Kitsap



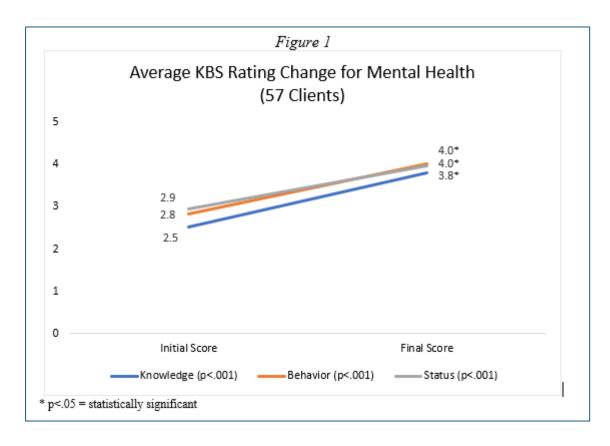
Retention Rates: July 2024 – June 2025

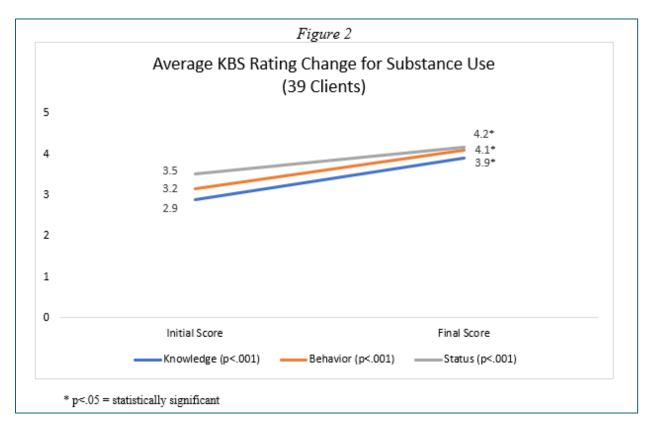


NFP in Kitsap



Improved Outcomes: July 2020 – June 2025





NFP Case Study











NFP - 2025 and Beyond



Looking forward

- Legislator visit (Fall 2025)
- Ongoing support to Suquamish start up
- Continuous quality improvement
- Funding challenges



Funding sources

- WA Dept of Children, Youth & Families
- ARPA
- Kitsap County 1/10 of 1%
 Sales Tax
- Maternal Child Health Block Grant
- Local Dollars
- Healthy Start Kitsap



THANK YOU!

Jessica Smith, RN, BSN, MPH
Program Manager
Parent Child Health, Nurse Family Partnership
jessica.smith@kitsappublichealth.org

Karina Mazur, RN, BSN, IBCLC, IMH-E®
Public Health Nurse Supervisor
Nurse-Family Partnership
karina.mazur@kitsappublichealth.org





MEMO

To: Kitsap Public Health Board

From: Lynn Pittsinger, MSN, ARNP, CPNP, PMHS, CIC, CPHQ

Community Health Director

Date: September 2, 2025

Re: Continuum of Care and Drug User Health

Background and Introduction

People with a substance use disorder (SUD) – or those at risk of developing one – may encounter points of care across our community. It is essential for service providers in these settings to understand how their specific services, and the compassion and humanity they extend, relate to the efforts of partners throughout the behavioral health system, traditional health care, public health, syringe services, and the community at large. The Health District-facilitated Opioid Response Partner Meetings revolve around these very concepts.

The Institute of Medicine's Continuum of Care Model describes four key areas: promotion, prevention, treatment, and recovery. Local syringe service programs contribute across this continuum particularly in the areas of promotion, prevention, and treatment. Consistently treating individuals who use substances with compassion and dignity can foster hope and self-compassion – often for those who have never had the opportunity to develop these life skills.

In 2023, through ongoing and positive connections with people who use substances in Kitsap County, 70 individuals participated in the University of Washington's Addictions, Drug and Alcohol Institute survey, Surveys and Interviews with People

Memo to Kitsap Public Health Board September 2, 2025 Page 2

Who Use Drugs. We are fortunate to be able to share portions of this information today in graphic format.

The goal of this presentation is threefold:

- 1. Reflect on the Health District's role in supporting care continuum across all four aspects Promotion, Prevention, Treatment, and Recovery.
- Highlight how our local syringe services programs contribute to the overall health and wellbeing of the Kitsap community as part of the broader Continuum of Care.
- Consider how we as a community can strengthen the four dimensions of recovery as described by Substance Abuse and Mental Health Services (SAMHSA):
 - Health: Overcoming or managing substance misuse and making informed healthy choices.
 - Home: Having a safe, stable living environment.
 - Purpose: Conducting meaningful daily activities and participating in society.
 - Community: Having supportive, loving relationships and social networks.

Recommendation

None at this time – for information and discussion only.

Thank you for the opportunity to facilitate this discussion. Please contact me with any questions or concerns about this matter at (360) 689-5222, or lynn.pittsinger@kitsappublichealth.org.

Attachments (1)



A PUBLIC HEALTH PRESENTATION: Drug User Health Kitsap County



Lynn Pittsinger MSN, ARNP, CPNP, PMHS, CIC, CPHQDirector
Community Health Division

About Kitsap Public Health

OUR VISION

A safe and healthy Kitsap County for all.

OUR MISSION

We prevent disease and protect and promote the health of all people in Kitsap County.





The Institute of Medicine's Continuum of Care

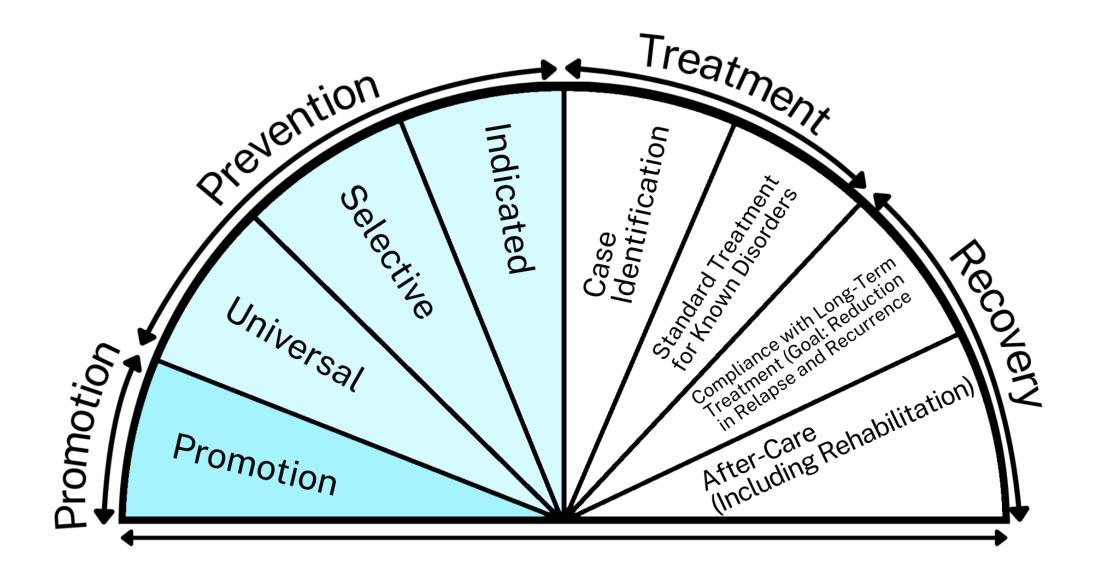
Promotion

Prevention

Treatment

Recovery





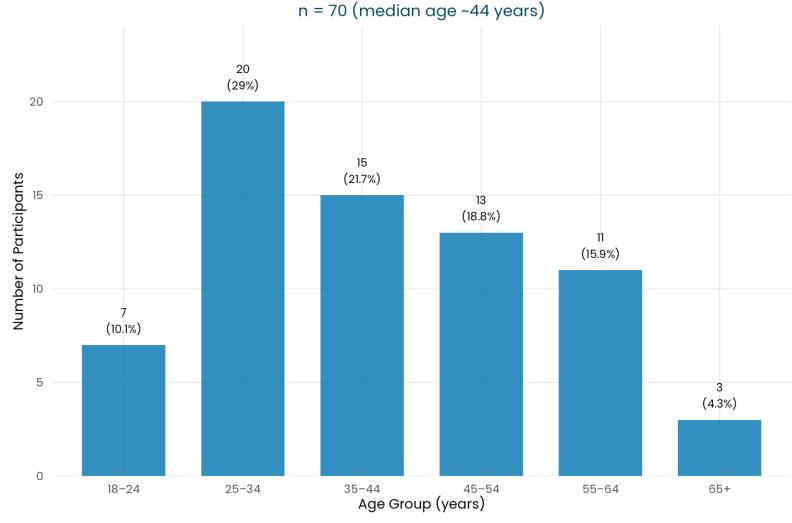


Addictions, Drug & Alcohol Institute

University of Washington Survey

Kitsap County, 2023





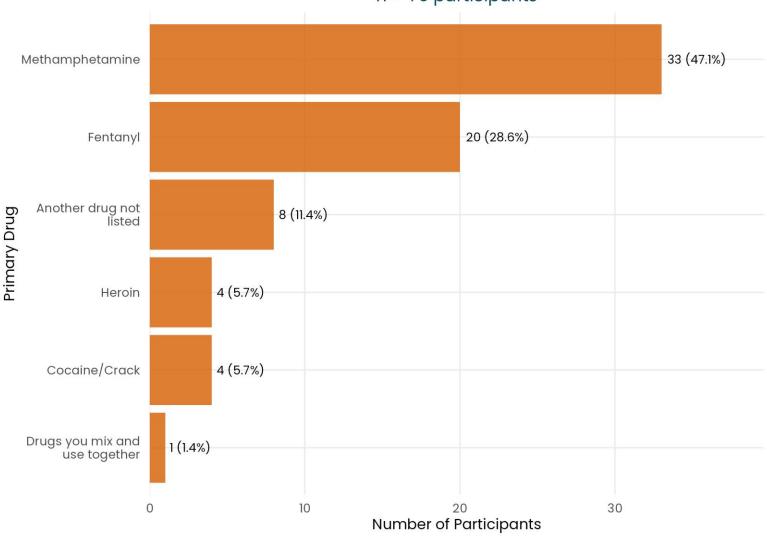


Substance Use Patterns

Methamphetamine is the most commonly reported drug of choice

Primary Drug of Choice

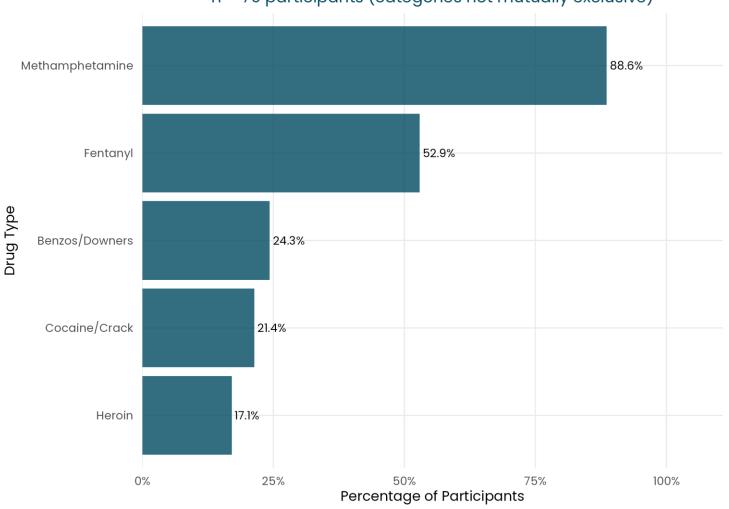






Drug Use in Past 7 Days



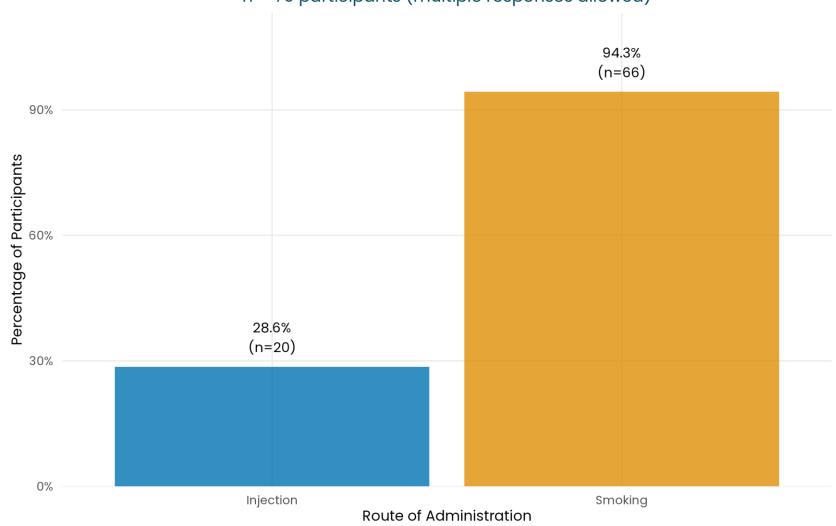






Routes of Drug Administration (Past Week)

n = 70 participants (multiple responses allowed)



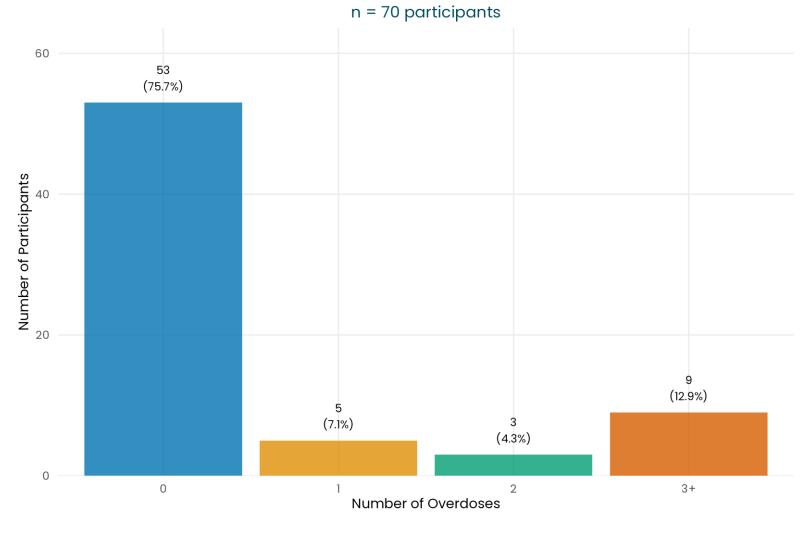
Substance Use Patterns

Smoking is the predominant route of drug administration



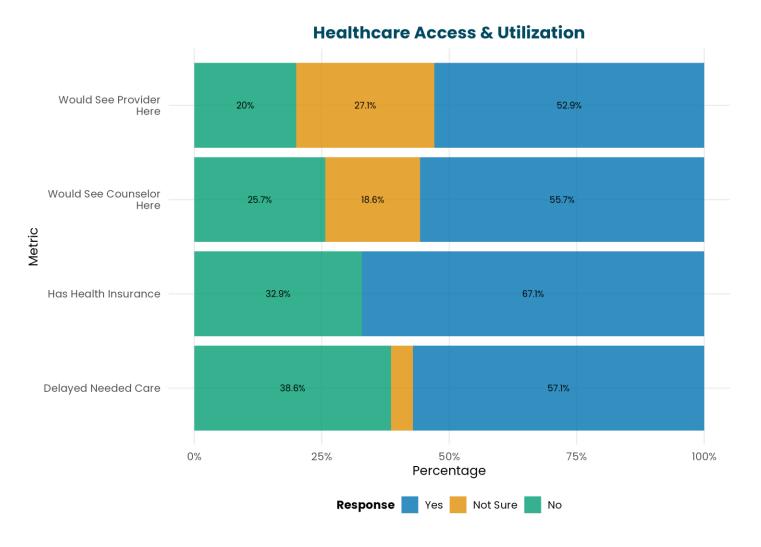
Overdose Experiences

Overdose Experiences (Past 3 Months)



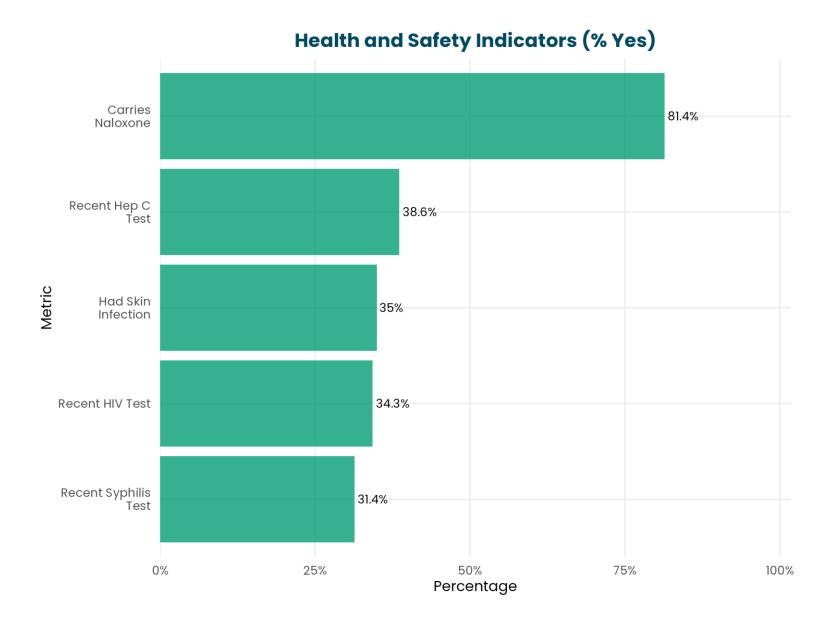


Healthcare Access and Utilization





Health and Safety Indicators



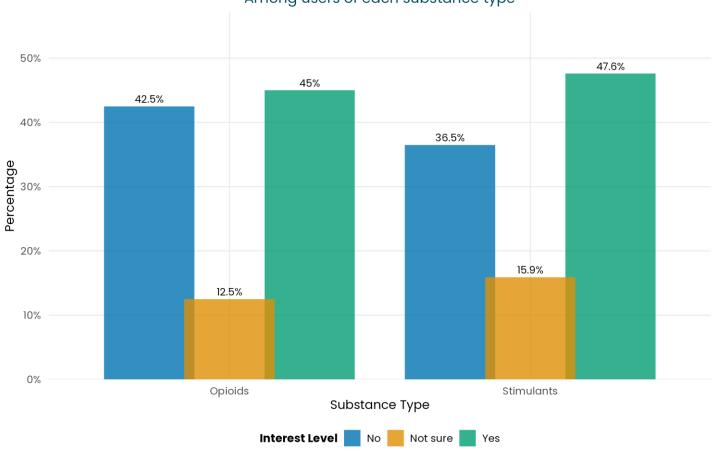


Interest in Treatment



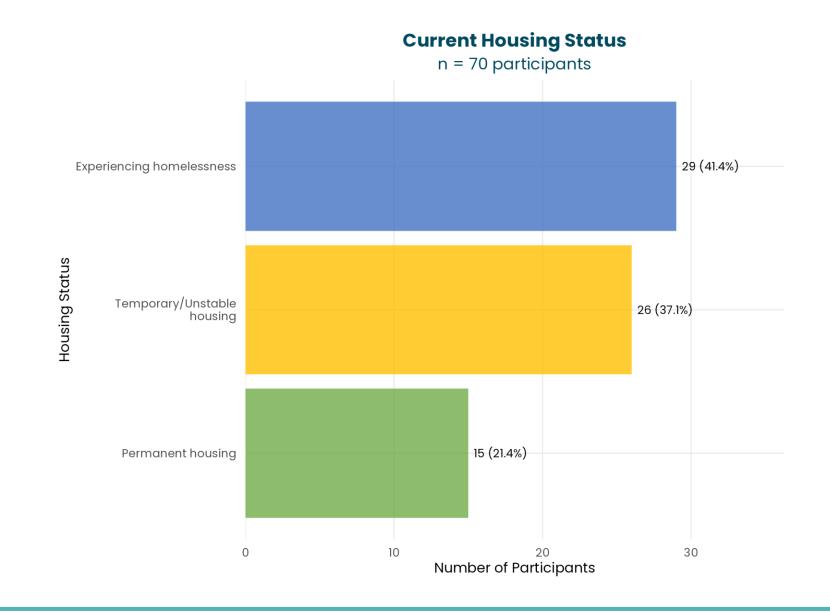
Interest in Reducing Substance Use





Housing Status

Unstable housing impacts 80% of those surveyed



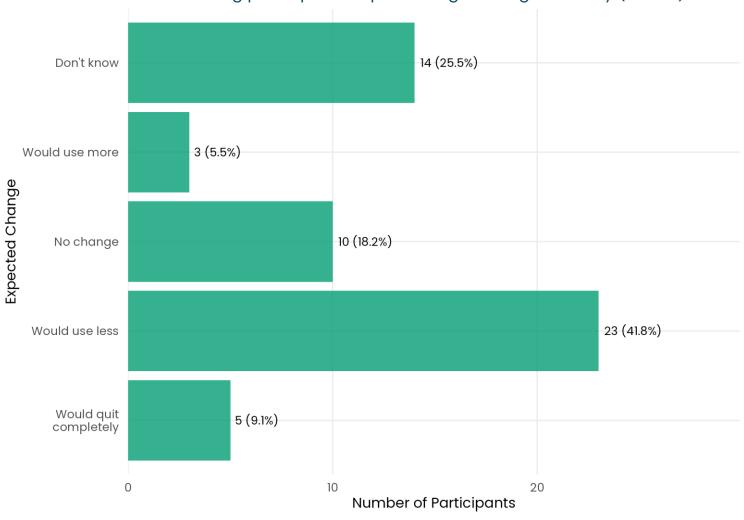


Housing Status

Approximately 50.9% of participants experiencing housing instability felt that stable housing would reduce or eliminate drug use

Expected Change in Drug Use with Stable Housing

Among participants experiencing housing instability (n = 55)





Kitsap County Syringe Service Programs

Washington State Department of Health Syringe Service Program Directory

County	Program	ACH
Kitsap	Ostrich Bay Exchange	Olympic Community of Health ACH
Kitsap	Peninsula Community Health	Olympic Community of Health ACH



KPHD Fiscal Syringe Services Support 2024-2025

PCHS Stationary Sites

- Stationary clinic sites
- \$2880 per annum

Services:

Syringe access and disposal

People's Harm Reduction Alliance (Ostrich Bay Exchange)

- Mobile services
- \$40,000 per annum

Services:

Syringe access and disposal
Overdose prevention and naloxone training
Wound care kits
Safer sex supplies and pregnancy tests
Linkage to HCV treatment
Harm reduction education
Community resources

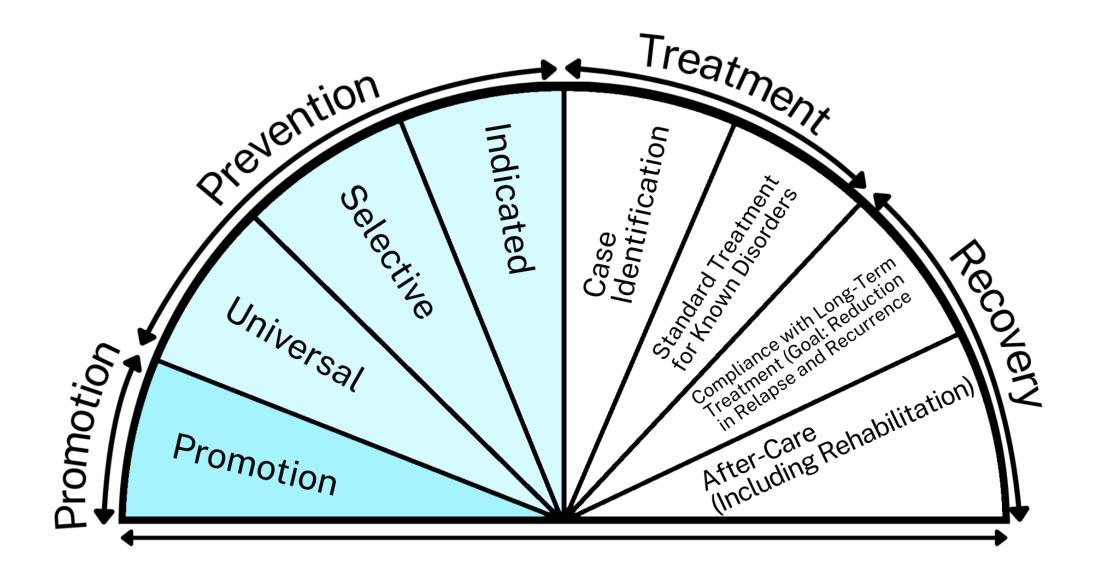


Anticipated Coordination of Services

KPHD and Syringe Service Units

- Sterile injecting supplies
- Safe syringe disposal
- Naloxone education and distribution (overdose prevention)
- HIV testing and linkage to care (confirmatory testing and treatment)
- Linkage to HIV case management and housing
- Hepatitis C testing and linkage to care (confirmatory testing and treatment)
- Linkage to hepatitis C case management
- STI testing and treatment (chlamydia, gonorrhea, syphilis)
- Hepatitis A and B vaccinations (other vaccines as available)
- Safer sex supplies and education
- Wound care (assessment, dressings and referrals)
- Education on reducing harms associated with drug use
- Drug checking in partnership with UW ADAI
- Fentanyl and xylazine test strip distribution and education
- Telebupe or Scala NW connection
- Pregnancy Supports
- · Outreach and education









THANK YOU!

lynn.pittsinger@kitsappublichealth.org



kitsappublichealth.org



MEMO

To: Kitsap Public Health Board

From: John Kiess, Environmental Health Director

Date: September 2, 2025

Re: Kitsap Public Health Board 1999-14 Rodent Control Regulations Update

Background and Introduction

The Kitsap Public Health District has maintained a rodent control ordinance since 1996, and the current version is <u>Ordinance 1999-14</u>, <u>Rodent Control Regulations</u>. The existing ordinance contains outdated language and is in need of a revision.

This ordinance enables Health District staff to enforce requirements in situations where property owners and residents must properly control access to food sources and eliminate harborage (living areas) for rodents and other disease-carrying vector insects and animals. The revision also proposes new language addressing the feeding of wildlife.

The enforcement provisions included in this draft have already been incorporated into other, more modern Health Board ordinances. Aligning this ordinance will provide a clearer and more consistent enforcement process if compliance actions are needed.

In May, Health District staff met with the Board's Policy Committee to review the proposed revisions. Based on their input, and following legal counsel's review, we have prepared a draft ordinance for the Board's consideration.

If the Board approves moving forward today, we plan to gather public input and return with a final ordinance for adoption at a public hearing during the regular October Board meeting.

Advancing Public Health Performance Performance Accreditation

Memo to Kitsap Public Health Board September 2, 2025 Page 2

Recommendation

None at this time - for information and discussion only.

Please contact me with any questions or comments about this matter at (360) 728-2290, or <u>john.kiess@kitsappublichealth.org</u>

Attachments (3)

Rodent Control Regulations Update Presentation Draft Ordinance 2025-XX Rodent Control Regulations Summary of Revisions for the Rodent Control Regulations



Rodent Control Ordinance Revision



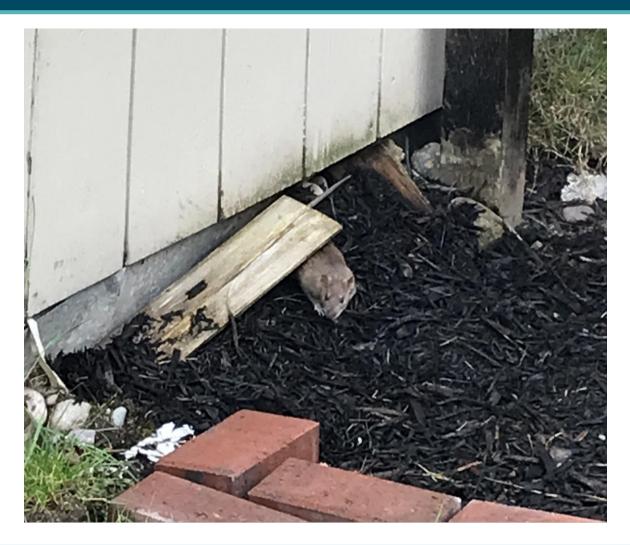
John KiessEnvironmental Health
Division Director

Rodent Control Regulations



Existing 1999-14 Ordinance needs updating for control requirements and format

Working to add language that helps address rodent attraction by human activities (feeding wildlife, pets, livestock)



Rodent Control Regulations





Poulsbo woman's home overrun by over 100 raccoons after 3 decades of feeding them



Kitsap Public Health Ordinance Revision Timeline

- March Kitsap Public Health Board update
- May Health Board policy committee update
- September Draft regulation presentation to the Kitsap Public Health Board
- Public/Stakeholder comment period
- October Kitsap Public Health Board public hearing for adoption of new ordinance





THANK YOU!

John Kiess Environmental Health Director john.kiess@kitsappublichealth.org



kitsappublichealth.org

KITSAP PUBLIC HEALTH BOARD

ORDINANCE 2025-02

Rodent Control Regulations

Effective XXXX, 2025

Table of Contents

SECTION 1: Authority, Purpose, and Objectives	3
SECTION 2: Administration	4
SECTION 3: Effective Date	5
SECTION 4: Jurisdiction and Applicability	6
SECTION 5: Definitions	7
SECTION 6: Rodent Control Standards	8
SECTION 7: Enforcement	11
SECTION 8: Appeals	22
SECTION 9: Immunity From Liability	25
SECTION 10: Severability	26

SECTION 1: Authority, Purpose, and Objectives

- A. These regulations are promulgated under the authority of Chapters 7.48 and 70.05 of the Revised Code of Washington (RCW) and Chapter 173-350 Washington Administrative Code (WAC). Other state statues, codes, and local ordinances and codes relating to these regulations are:
 - 1. Chapter 16-228 WAC, General Pesticide Rules
 - 2. Chapter 246-215 WAC, Food Service
 - 3. Chapter 59.18 RCW, Residential Landlord-Tenant Act
- B. It is the purpose of this ordinance to help prevent the spread of infectious and contagious diseases by rodents and wildlife and to prevent inflating the population numbers of these vectors which can result from the improper storage of food, solid waste and/or feeding by humans. This ordinance and the requirements herein are necessary to preserve, promote, and improve public health.
- C. These regulations are intended to coordinate with other applicable state and local regulations for pest control; sewage control; solid waste; food handling; building; land use/land use planning; and critical areas.
- D. It is the specific intent of this ordinance to place the obligation of complying with its requirements upon the owner or occupant of a property or structure. This ordinance does not protect any specific class of persons nor does it impose any duty whatsoever upon the Kitsap Public Health District (Health District) or any of its officers or employees, for whom the implementation and/or enforcement of this ordinance shall be discretionary and not mandatory.
- E. It is the intent of this ordinance to provide for fair, equal, and reasonable treatment of all persons that are subject to these regulations, and to allow for Health Officer discretion in the application of these regulations as they deem necessary to protect public health.
 Nothing in these regulations is intended to abridge or alter the rights of action by the state or by private individuals to abate pollution or a nuisance.

SECTION 2: Administration

- A. The Health Officer is authorized to promulgate and administer such regulations as are necessary in his/her judgment to carry out the provisions of these rules and regulations. Where/if state or local regulations conflict, the more stringent regulation shall apply.
- B. Through the authority of the Kitsap Public Health Board as granted in RCW 70.05.060, the Health Officer may charge fees for the administration of this ordinance. Fees will be charged in accordance with the fee schedule approved by the Kitsap Public Health Board.



SECTION 3: Effective Date

The effective date of these regulations shall be XXXX, 2025.



SECTION 4: Jurisdiction and Applicability

- A. General Requirements.
 - 1. These regulations shall apply to all territory contained within the boundaries, and under the supervision, of the Kitsap Public Health Board.
 - 2. These regulations shall apply to the owner or occupant of any premises
 - 3. These regulations shall apply to licensed and/or certified contractors, or other persons, that perform or provide rodent/pest control services.



SECTION 5: Definitions

Unless specified herein, all words and terms shall be defined by their common dictionary definition.

Harborage – any condition that provides shelter or protection or food for rodents.

Health Officer – the Health Officer of the Kitsap Public Health District or their designee.

Livestock- means domestic animals raised for use or for profit, especially on a farm, and includes horses, mules, donkeys, cattle, bison, sheep, goats, swine, rabbits, llamas, alpacas, ratites, poultry, waterfowl, and game birds.

Owner or Occupant – any agent, lessee, owner, or other person occupying or having charge or control of any premises.

Premises – any building, lot, structure, parcel, dock, real estate or land or portion of land, whether improved or unimproved, including adjacent sidewalks and parking strips.

Rodent – a mammal belonging to the order Rodentia, such as a rat, mouse, or squirrel.

Rodent Activity – the presence and behaviors of rodents that indicate an infestation or potential infestation. This activity can be observed through various signs like sightings, droppings, gnaw marks, nests, and sounds in walls or attics.

SECTION 6: Rodent Control Standards

A. General Requirements.

All premises shall be maintained in a clean and sanitary condition and rendered free from rodents. It shall be the duty of every owner or occupant to take such preventive and remedial rodent-proofing measures as shall be prescribed by the Health Officer of the Kitsap Public Health District. Food service establishments shall comply with the pest control provisions of WAC 246-215, as amended.

B. Protection of Food and Food Waste.

- All food products, whether kept for sale or consumption, or other purpose, shall be so protected as to prevent rodents from gaining access thereto or coming in contact therewith. This includes food intended for animals or humans.
- 2. Home composting shall be practiced in a manner and performed in vessels that prevent rodents or other wildlife from accessing composting material.
- Trash cans, dumpsters and compactors shall be kept in good condition, with closing lids capable of preventing vectors from accessing the contents thereof.
 These products shall be maintained/cleaned at a frequency that prevents the attraction of vectors.

C. Feeding of Pets and Wildlife.

- 1. No person shall feed wildlife or pets outdoors in such a manner that would allow the food source to attract or be accessible to rodents.
- 2. Wild birds may only be fed outdoors through the use of a feeder or device that prevents other species, such as rodents and raccoons, from accessing said food. It shall be the responsibility of all owners or occupants to remove spilled bird food at a frequency that doesn't allow said food to attract rodents.
- 3. No person shall feed, or allow to be fed, wild animals other than birds at any time, except as they are cared for at wildlife shelters or animal hospitals. The baiting/trapping of wildlife by Washington Department of Fish and Wildlife employees/contractors is exempted from this requirement.
- 4. The feeding of wildlife through natural processes such as vegetation that bears fruit, tidal ebb and flow, and other natural actions that would occur without human presence is exempted from this section.

D. Feeding of Livestock

Recognizing that the keeping and feeding of these animals, especially on farms
unavoidably attracts rodents, it shall be the responsibility of the property owner,
and/or occupant to take such rodent control measures as prescribed by the Health
Officer to control rodent infestations, to the extent possible, resulting from these
activities.

E. Rodent Proofing and Extermination.

- Basements, walls, and foundations of all premises shall be constructed or repaired by the use of screens, nettings, cement, or other material or materials approved by the Health Officer so as to prevent rodents from gaining entrance to, or harboring within.
- 2. Every owner or occupant of any premises shall take such preventative and remedial rodent proofing and rodent control measures, as shall be prescribed by the Health Officer, which may include a written plan approved by the Health Officer for continued extermination or the hiring of an independent, licensed pest control contractor in cases of severe or recurrent confirmed infestations.
- 3. No owner or occupant shall remove, or fail to restore in like condition, existing rodent proofing from any premises.
- 4. All abandoned or vacant premises shall be adequately safeguarded against rodent infestation.
- 5. No owner or occupant shall demolish, tear down, begin construction on, or alter in any way a structure or premise which is infested with rodents or other vectors until extermination is conducted and completed.
- 6. The use of pesticides must be in accordance with labeled instructions.
- F. Prevention and/or Remediation of Rodent Activity on Premises.

When the Health Officer finds there is evidence of rodent activity on any premises, the Health Officer may order the owner or occupant of the premises to take any of the following measures, including any combination of such measures, as the Health Officer deems necessary to prevent and remediate rodent activity:

 The cutting and/or removal of any vegetation or condition on the premises that the Health Officer determines to constitute harborage. All cutting and removal of vegetation shall comply with the Kitsap County Critical Areas Ordinance Title 19, as amended, or any other applicable regulation.

- 2. The placement and maintenance of rodent traps in a number and pattern as approved by the Health Officer. Said traps shall be freshly baited at such intervals as may be ordered by the Health Officer and shall be inspected by the owner or occupant daily and any rodent or rodents caught therein removed therefrom.
- 3. The placement and maintenance of poisons suitable for the extermination of rodents. It shall be the duty of each owner or occupant of such buildings or premises to comply with all orders and directives of the Health Officer regarding the placing of poisons and the type to be used. Whenever possible, traps shall be favored over poisons as a rodent control measure.



SECTION 7: Enforcement

A. Right of Entry.

- Whenever necessary to inspect to enforce or determine compliance with the
 provisions of these regulations, or whenever the Health Officer has cause to believe
 that a violation of these regulations has or is being committed, the Health Officer
 may, in accordance with federal and state law, seek entry of any building, structure,
 property, or portion thereof, at reasonable times to inspect, provided such entry is
 consistent with the constitutions and laws of the United States and the State of
 Washington.
- B. Violations, Notice, Remedies, and Penalties.
 - 1. Violations.
 - a. Violations of these regulations may be addressed through the remedies and penalties provided in this section.
 - b. Each violation of these regulations shall be a separate and distinct offense and in the case of a continuing violation, each day's continuance shall be a separate and distinct violation.
 - c. The Health Officer may investigate alleged or apparent violations of these regulations. Upon request of the Health Officer, the person allegedly or apparently in violation of these regulations shall provide information identifying themselves.
 - 2. Notice and Order to Correct Violation.
 - a. Issuance. Whenever the Health Officer determines that a violation of these regulations has occurred or is occurring, they may issue a written notice and order to correct violation to the property owner, or to any person causing, allowing, or participating in the violation.
 - b. Content. The notice and order to correct violation shall contain:
 - (1) The name and address of the property owner or other persons to whom the notice and order to correct violation is directed;
 - (2) The street address, tax assessor account number, or other description for identification of the building, structure, or land upon or within which the violation has occurred or is occurring;

- (3) A description of the violation and a reference to that provision of these regulations which has been, or is being, violated;
- (4) A statement of the action, or actions, required to be taken to correct the violation and a date or time by which the correction is to be completed;
- (5) A statement that each violation of this regulation shall be a separate and distinct offense, and in the case of a continuing violation that each day's continuance shall be a separate and distinct violation;
- (6) A statement that the failure to obey this notice may result in the issuance of a notice of civil infraction, and/or the assessment of an administrative remedy, and/or, if applicable, the imposition of criminal penalties; and
- (7) A statement that the person to whom the notice and order is directed can appeal the order to the Health Officer in accordance with the appeal procedures of these regulations.
- c. Receipts and/or Reports of Corrective Actions Completed. The notice and order to correct violation may also include a statement requiring the person to whom the notice and order to correct violation is directed to produce receipts and/or reports to demonstrate compliance with an order issued by the Health Officer.
- d. Service of Order. The notice and order to correct violation shall be served upon the person to whom it is directed, either personally, via electronic mail, physical posting, or by mailing a copy of the order by first class and/or certified mail postage prepaid, return receipt requested, to such person at his/her last known address.
- e. Extension. Upon written request received prior to the correction date or time, the Health Officer may extend the date set for corrections for good cause. The Health Officer may consider completed or proposed mitigation measures, substantial completion of the necessary correction, and/or unforeseeable circumstances that render completion of correction impossible by the date or time established as a good cause.
- f. Supplemental Order to Correct Violation. The Health Officer may at any time add to, rescind in part, or otherwise modify a notice and order to correct violation. The supplemental order shall be governed by the same procedures

- applicable to all notice and order to correct violations procedures contained in these regulations.
- g. Enforcement of Order. If, after order is duly issued by the Health Officer, the person to whom such order is directed fails, neglects, or refuses to obey such order, the Health Officer may:
 - (1) Utilize any remedy or penalty specified within these regulations; and/or
 - (2) Abate the health violation using the procedures of these regulations; and/or
 - (3) Pursue any other appropriate remedy at law or equity.

3. Remedies.

- a. Written Assurance of Discontinuance. The Health Officer may accept a written assurance of discontinuance of any act in violation of these regulations from any person who has engaged in such act. Failure to comply with the written assurance of discontinuance shall be a further violation of these regulations.
- b. Written Voluntary Correction Agreement/Compliance Schedule.
 - (1) The Health Officer may accept a written voluntary correction agreement/compliance schedule to attempt to secure voluntary correction of the violation from the person committing, or responsible for, the violation. Failure to comply with the written voluntary correction agreement/compliance schedule shall be a further violation of these regulations.
 - (2) The written voluntary correction agreement/compliance schedule is a contract between the Health Officer and the persons responsible for the violation in which such person agrees to abate the alleged violation within a specified time frame and according to specific conditions.
 - (3) The written voluntary correction agreement/compliance schedule will be in lieu of the issuance of further citations, or other actions as allowed by these regulations, so long as the written voluntary correction agreement/compliance schedule is adhered to as determined by the Health Officer.
 - (4) By entering into a written voluntary correction agreement/compliance schedule, the person responsible for the alleged violation waives the right to appeal the Notice and Order to Correct Violation and/or any

- abatement order subsequently issued regarding the violation, and any right to a hearing before the Health Officer under these regulations or otherwise, regarding the alleged violation.
- (5) The Health Officer may grant an extension in time, or a modification in the terms, of the agreement if the person responsible for the alleged violation has shown progress towards correction of the violation and no threat to public health is determined to exist.
- (6) The Health Officer may abate the alleged violation in accordance with these regulations if the terms of the written voluntary correction agreement/compliance schedule are not met.
- (7) If the terms of the written voluntary correction agreement/compliance schedule are not met, the person responsible for the alleged violation shall be assessed all costs and expenses of abatement, as set forth in these regulations.
- (8) Content. The written voluntary correction agreement/compliance schedule shall include the following:
 - (a) The name and address of the person responsible for the alleged violation;
 - (b) The street address, assessor's tax identification number, or other description sufficient for identification of the premises upon which, or within, the alleged violation has occurred or is occurring;
 - (c) A description of the alleged violation and a reference to the regulation that has been violated;
 - (d) The specific actions to be taken, and a date or time by which each action shall be completed;
 - (e) An agreement by the responsible person that the Health Officer may enter the premises and inspect as necessary to determine compliance with the written voluntary correction agreement/compliance schedule;
 - (f) An agreement by the responsible person that the Health Officer may enter the property, building, structure, or premises to abate the violation and recover its costs and expenses from the

- responsible person if the terms of the written voluntary correction agreement/compliance schedule are not satisfied; and
- (g) An agreement that by entering into the written voluntary correction agreement/compliance schedule, the responsible person waives the right to appeal the Notice and Order to Correct Violation and/or any abatement order subsequently issued regarding the violation, and any right to a hearing before the Health Officer under these regulations or otherwise, regarding the matter of the alleged violation and/or required corrective action(s).
- c. Stop Work Orders. The Health Officer may cause a Stop Work order to be issued whenever the Health Officer has reason to believe that a violation of this regulation is occurring. The effect of the Stop Work order shall be to require the immediate cessation of such work or activity that has contributed to the violation until such time that the Health Officer has removed the order.
 - (1) Content. A Stop Work Order shall include the following:
 - (a) The name and address of the property owner or other persons to whom the notice and order to correct violation is directed;
 - (b) The street address, tax assessor account number, or other description for identification of the premises upon or within which the violation has occurred or is occurring;
 - (c) A description of the violation and a reference to that provision of these regulations which has been, or is being, violated;
 - (d) A statement of the action, or actions, required to be taken to correct the violation and a date or time by which the correction is to be completed;
 - (e) A statement that each violation of this regulation shall be a separate and distinct offense, and in the case of a continuing violation that each day's continuance shall be a separate and distinct violation:
 - (f) A statement that the failure to obey this notice may result in the issuance of a notice of civil infraction, and/or the assessment of an administrative remedy, and/or, if applicable, the imposition of criminal penalties; and

- (g) A statement that the person to whom the Stop Work order is directed can appeal the order to the Health Officer in accordance with the appeal procedures of these regulations.
- (2) Service of Order. The Health Officer shall serve the Stop Work order upon the owner or occupant of the premises where the alleged violation occurred or is occurring, or to any person causing, allowing, or participating in the violation, either personally or by mailing a copy of the notice by regular and/or certified mail, to the violator at their last known address. A copy of the order shall also be posted on the property where the alleged violation occurred, or is occurring.
- (3) Posting of Order. In addition to the service of order as described above, an additional notice shall be posted on the property in substantially the following form:

Under the Authority of the Kitsap Public Health Board Ordinance 2025-02, *Rodent Control Regulations*, you are hereby required to immediately

STOP WORK

This order is in effect at this property for all work and activities that relate to violations of Kitsap Public Health Board Ordinance 2025-02, Rodent Control Regulations, and remains in effect until removed by the Health Officer. It is a violation of these regulations to remove, deface, destroy, or conceal a posted Stop Work Order. FAILURE TO COMPLY WITH THIS ORDER MAY RESULT IN THE ISSUANCE OF A CIVIL INFRACTION.

d. Abatement Orders.

- (1) When the Health Officer has determined that a violation of these regulations has occurred or is occurring, or a public nuisance exists, in accordance with RCW 7.48, they may issue an abatement order to the person responsible for the alleged violation. The abatement order shall require the responsible person to abate the violation or public nuisance within a reasonable period of time as determined by the Health Officer.
- (2) If the abatement order is not commenced or complied with within the specified time period, the Health Officer may proceed to abate the violation and cause work to be done in this regard.
- (3) Absent conditions that pose an immediate threat to the public's health, safety, or welfare, abatement orders shall be utilized by the Health

Officer only after the civil penalties process under these regulations has been attempted as a means to correct the alleged violations, but the violations have not been adequately corrected as determined by the Health Officer.

- (4) Content. The abatement order shall include the following:
 - (a) The name and address of the person responsible for the alleged violation;
 - (b) The street address, assessor's tax identification number, or other description sufficient for identification of the building, structure, premises, or land upon which, or within, the alleged violation has occurred or is occurring;
 - (c) A description of the alleged violation and a reference to the regulation that has been violated;
 - (d) The specific actions to be taken, and a date or time by which each action shall be completed;
 - (e) A statement that the costs and expenses incurred by the Health Officer, pursuant to these regulations, may be assessed against a person to whom the abatement order is directed; and
 - (f) A statement that the person to whom the abatement order is directed can appeal the abatement order to the Health Officer in accordance with these regulations.

(5) Service of Order.

- (a) The Health Officer shall serve the abatement order upon the owner of the premises where the alleged violation occurred, or is occurring, either personally or by mailing a copy of the order by regular and/or certified or registered mail, with a five (5)-day return receipt requested, to the owner at their last known address.
- (b) The order shall also be served on each of the following if known to the Health Officer or discernable from publicly available records or information:
 - The holder of any mortgage or deed of trust or other lien or encumbrance of record;

- ii. The owner or holder of any lease of record and the holder of any other estate or legal interest of record in, or to, the property or any structures on the property.
- (c) The failure of the Health Officer to serve any person as required herein shall not invalidate any proceedings hereunder as to any other person duly or relieve any such person form any duty or obligation imposed by the provision of this section.
- (d) A copy of the abatement order shall also be posted on the property where the alleged violation occurred or is occurring.
- (6) Authorized Action by the Health Officer. Using any lawful means, the Health Officer may enter the subject property and may remove or correct the condition that is subject to the abatement.
- (7) Recovery of Costs and Expenses. The costs of correcting a condition which constitutes a violation of these regulations, including all incidental expenses, shall be billed to the owner of the property upon which the alleged violation occurred or is occurring, and shall become due within 30 calendar days of the date of mailing the billing for abatement.
- (8) Collection of Costs and Expenses. The costs and expenses of correcting a condition, which constitutes a violation of these regulations, shall constitute a personal obligation of the person to whom the abatement order was/is directed. The Health Officer shall send, within 15 days of abating the violation, to the person named in the abatement order a bill that details the work performed, materials used or removed, labor used, and the costs and expenses related to those tasks as well as any other costs and expenses incurred in abating the violation.
- e. Notice to Vacate. When a condition constitutes a violation of these regulations and poses an immediate threat to health, safety, or property of the public or persons residing on the property, the Health Officer may issue a notice to vacate.
 - (1) Content. A notice to vacate shall include the following:
 - (a) The name and address of the person responsible for the alleged violation;

- (b) The street address, tax assessor account number, or description sufficient for identification of the premises upon which the alleged violation has occurred or is occurring;
- (c) A description of the violation constituting an immediate threat to health, safety, or property of the public or persons residing on the property and a reference to the provision of these regulations that is being violated;
- (d) A date, determined by the Health Officer and commensurate with the severity of violation and threat to public health, by which any persons shall vacate the premises in order to mitigate/eliminate the violation. In cases of an extreme threat to health or safety to persons or property, immediate vacation of the premises may be required; and
- (e) The corrective actions required to be completed prior to reoccupancy of the premises; and a statement that the person to whom the notice to vacate is directed can appeal the order to the Health Officer in accordance with these regulations.
- (2) Service of Notice. The Health Officer shall serve the notice to vacate order upon the owner of the premises, where the alleged violation occurred or is occurring, or the person responsible for the alleged violation, either personally or by mailing a copy of the notice by regular and/or certified mail, to said person at their last known address.
- (3) Posting of Notice. In addition to providing service of notice as described above, notice shall also be posted conspicuously on the property where the alleged violation occurred or is occurring.
- (4) Compliance. No person shall remain in or enter any building, structure, or property which has been posted for vacation except to make the specified corrective actions listed in the notice to vacate. No person shall remove or deface a vacate notice posting without the permission of the Health Officer. Health Officer review, inspection, and approval of the completed corrective action is required before the vacate order shall be removed.
- f. Other Legal or Equitable Relief. Notwithstanding the existence or use of any other remedy, the Health Officer may seek legal or equitable relief to enjoin any acts or practices or abate any conditions that constitute or will constitute

- a violation of these regulations, or rules and regulations adopted under them, or any state health law or regulation, or that otherwise threatens public health.
- g. Notice of Violation or Order Failure to Respond or Appear. Unless contested or appealed in accordance with these regulations, any notice of violation or order issued by the Health Officer represents a determination that the person to whom the notice or order was issued committed the violation.

4. Penalties.

- a. Civil Penalties.
 - (1) The violation of any provision of these regulations is designated as a Class 1 civil infraction pursuant to RCW 7.80, *Civil Infractions*.
 - (2) The Health Officer may issue a notice of civil infraction pursuant to RCW 7.80 if the Health Officer has reasonable cause to believe that the person has violated any provision of these regulations or has not corrected the violation as required by a written notice and order to correct violation. Civil infractions shall be issued, heard, and determined as described in RCW 7.80, and any applicable court rules.

b. Criminal Penalties.

- (1) Except as otherwise provided for in these regulations or under State law, any person violating any provision of these regulations is guilty of a misdemeanor, and upon conviction thereof shall be subject to a fine of not less than twenty-five dollars (\$25), nor more than one-thousand dollars (\$1,000), or to imprisonment in the county jail not to exceed ninety (90) days, or to both fine and imprisonment.
- (2) Any person who fails, neglects, or refuses to comply with an order of the Health Officer to correct a violation of these regulations pursuant to Section 6.B.2. shall be, upon conviction, guilty of a misdemeanor and shall be subject to a fine of not more than one-thousand dollars (\$1,000), or imprisonment in the county jail not to exceed ninety (90) days, or both. The court may also impose restitution.
- (3) Any person who fails, neglects, or refuses to comply with a written assurance of discontinuance or a voluntary correction agreement pursuant to Section 6.B.3. shall be, upon conviction, guilty of a misdemeanor and shall be subject to a fine of not more than one-

thousand dollars (\$1,000), or imprisonment in the county jail not to exceed ninety (90) days, or both. The court may also impose restitution.

c. Noncompliance Fees.

- (1) Pursuant to the most current Health District fee schedule as adopted by the Health Board, the Health Officer may assess an hourly noncompliance fee to any person who has been found guilty of committing a violation of these regulations for Health Officer oversight, review, and/or inspections of a premises to determine compliance with these regulations, correction/ compliance dates specified in a notice and order to correct violation, civil infraction, misdemeanor, or any other court ordered compliance deadline.
- (2) When a noncompliance fee is assessed by the Health Officer, the fee shall be due and payable 30 days after receipt of the invoice by the violator.

SECTION 8: Appeals

- A. Appeal of Health District Action Administrative Review Conference with Environmental Health Director.
 - Any person aggrieved by the contents of a notice and order to correct violation issued under this regulation, or by any inspection or enforcement action conducted by the Health Officer under this regulation, may submit a written request for an Administrative Review Conference with the Environmental Health Director, or their designee. The request shall be submitted on forms designated for use by the Health Officer along with the applicable fee, and shall detail and specify the reason why the appellant is assigning error to the Health District and requesting the action to be reviewed.
 - 2. Timelines for administrative review conference. A written application for an administrative review conference shall be submitted to the Health Officer within 10 business days of the enforcement action Upon receipt of such request, together with the hearing fee, the Environmental Health Director shall notify the person of the time, date, and location of the administrative review conference, which shall be set at a mutually convenient time not less than five (5) business days or more than 15 business days from the date the request was received. The Environmental Health Director may extend this timeline, for good cause, for up to an additional 15 days. The Environmental Health Director will issue a written decision concerning the disposition of the administrative review within 10 business days of the conference date, and may require additional actions as part of the decision.
 - 3. A request for an administrative review conference is at the option of the aggrieved person. A request for an administrative review conference shall, in effect, constitute a stay of the appeal process for the Health Officer Administrative Hearing and preserve all rights and timelines associated with the appeal process. The timelines for appeal shall become effective upon issuance of the written decision from the administrative review conference.
- B. Appeal of Health District Action Health Officer Administrative Hearing.
 - Any person aggrieved by the contents of a notice and order to correct violation issued under this regulation, or by any inspection or enforcement action conducted by the Health District under this regulation, may submit a written request for an appeal hearing before the Health Officer, or their designee. The request shall be submitted on forms designated for use by the Health Officer along with the

- applicable fee, and shall detail and specify the reason why the appellant is assigning error to the Health District action being appealed.
- 2. Timelines for Appeal. A written application for appeal shall be submitted to the Health Officer within 10 business days of the action appealed for all Health District actions. Upon receipt of such request together with hearing fees, the Health Officer shall notify the person of the time, date, and location of such hearing, which shall be set at a mutually convenient time not less than five (5) business days or more than 15 business days from the date the request was received. The Health Officer may extend this timeline, for good cause, for up to an additional 15 days. The Health Officer will issue a written decision concerning the disposition of the appeal within 10 business days of the hearing date, and may require additional actions as part of the decision.
- 3. Incomplete or Untimely Appeals. Incomplete appeal requests, or appeal requests that do not meet the specified timelines for appeal, shall not constitute a legal appeal under these regulations.
- C. Appeal of Administrative Hearing Decision Health Board Hearing.
 - Any person aggrieved by the findings, decision, or required actions of an
 administrative hearing shall have the right to appeal the matter by requesting a
 hearing before the Health Board. The appellant shall submit specific statements in
 writing of the reason why error is assigned to the decision of the Health Officer, and
 shall be accompanied by the applicable hearing fee. The appellant and the Health
 Officer may submit additional information to the Health Board for review and
 consideration.
 - 2. Timelines for Appeal to Health Board. A written application of appeal shall be presented to the Health Officer within five (5) business days of the findings and actions from the administrative hearing. Upon receipt of a timely written notice of appeal together with hearing fees, the Health Officer shall set a time, date, and location for the requested hearing before the Health Board, and shall give the appellant written notice thereof. Such hearing shall be set at a mutually convenient time not less than five (5) business days or more than 30 business days from the date the appeal request was received by the Health Officer. Any decision of the Health Board shall be final and may be reviewed by an action filed in superior court. Any action to review the Health Board's decision shall be filed within 21 business days of the date of the decision.

- D. Stay of Action. Any orders issued concerning the alleged violation shall remain in effect during the appeal to the Health Board. Any person affected by an order to correct violation may make a written request for a stay of the decision to the Health Officer within five (5) business days of the Health Officer's decision. The Health Officer shall notify the appellant in writing of their decision to grant or deny the stay request within five (5) business days of receipt of the request.
- E. Judicial Review. All decisions of the Health Board shall be final unless review is sought by filing an action in any court of competent jurisdiction, as provided by the laws of this State.

SECTION 9: Immunity From Liability

Inspections, rules, and orders of the Health Officer resulting from the exercise of the provisions of these regulations shall not in any manner be deemed to impose liability upon the Health District, or its employees, for any injury or damage resulting from the administration and enforcement of these regulations. All actions of the Health Officer shall be deemed an exercise of the police power of the State.



SECTION 10: Severability

Should any part of these rules and regulations be declared unconstitutional or invalid for any reason, such declaration shall not affect the validity of the remainder.



SUMMARY AND COMPARISON OF MAJOR ELEMENTS BETWEEN EXISTING RODENT CONTROL REGULATIONS AND PROPOSED RODENT CONTROL REGULATIONS

Existing BKCBH Ordinance 1999-14	Proposed 2025 Ordinance Amendment	Notes
Does not follow the current	Will be organized in sections similar to	Most new sections will contain standard
organization and formatting of	other recently adopted EH regulations.	template language shared with other EH regs.
contemporary EH regulations.		Examples are Administration, Enforcement,
		Appeals, Immunity and Severability.
Does not speak to human behavior	Will address some of these behaviors- in	Bird feeding is still allowed under new language
that causes or exacerbates rodent	particular, indiscriminate bird feeding.	provided it's with "a feeder or device that
infestations.		prevents other species, such as rodents or
		raccoons, from accessing the contents."
Does not address or speak to rodent	Includes passage about feeding livestock	Controlling rodent activity on farms is difficult
activity on farms.	& poultry	which is acknowledged in the new version of
		these regs. Responsibility for infestations still lies
		with the owner.
Does not address home composting	Establishes basic standards for home	Increasing numbers of Kitsap households are
as a potential source of rodent	composting.	predicted to practice home food composting in
attraction.		the future. New Regs will require they do so in a
		manner that doesn't attract rodents.
Does not address wildlife feeding	Prohibits the feeding of wildlife,	National attention focused on Kitsap County
which can attract rodents.	particularly raccoons.	recently due to one viral video of a Poulsbo
		raccoon infestation, caused by the human
		feeding of the raccoons.
Does not speak to trash cans or more	Requires trash cans, dumpster enclosures	Trash compactors are frequently sources of
particularly poorly maintained	and trash compactors be maintained to	rodent attraction. The construction of the seals
dumpster enclosures and trash	prevent rodent attraction.	on these devices are prone to failure and allow
compactors as a potential rodent		access to rodents. Dumpster areas are easier to
attractant.		keep rodent free with proper cleaning &
		maintenance.
States traps and poisons are methods	Contains language discouraging (but not	Secondary poisoning (or non-target poisoning)
of controlling rodent infestations.	outlawing) the use of poisons as a rodent	is a concern due to harmful effects on wildlife &
	control measure.	pets.

SUMMARY AND COMPARISON OF MAJOR ELEMENTS BETWEEN EXISTING RODENT CONTROL REGULATIONS AND PROPOSED RODENT CONTROL REGULATIONS

Existing BKCBH Ordinance 1999-14	Proposed 2025 Ordinance Amendment	Notes
Does not contain a Definitions	Added a Definitions section.	Content of the Definitions section is all new
section.		and important to establish common language
		and nomenclature for enforcement purposes.
Enforcement section refers to a	Enforcement procedures will be fully	Enforcement section will contain language
separate Ordinance (1996-9) for	incorporated into Enforcement section.	common with other EH Regs.
enforcement procedures.		