KITSAP PUBLIC HEALTH BOARD MEETING MINUTES Regular Meeting July 5, 2022

The meeting was called to order by Board Chair Mayor Greg Wheeler at 10:31 a.m.

Chair Wheeler acknowledged that the Kitsap Peninsula is home of sovereign Indian nations, namely the Suquamish and Port Gamble S'Klallam Tribes.

BOARD MEETING MINUTES

Mayor Rob Putaansuu moved, and Commissioner Charlotte Garrido seconded the motion, to approve the minutes for the June 7, 2022 regular meeting. The motion was approved unanimously.

CONSENT AGENDA

The July consent agenda included the following contracts:

- 2170, Peninsula Community Health Services, COVI-19 Mass Vaccination Plan
- 2178, Kitsap County (KCDEM), COVID-19 Mass Vaccination Plan
- 2251, Kitsap County, Aging and Long Term Care Services
- 2275, City of Poulsbo, Illicit Discharge Detection and Elimination

Commissioner Rob Gelder moved and Mayor Putaansuu seconded the motion to approve the consent agenda, including the Contracts Update and Warrant and Electronic Funds Transfer Registers. The motion was approved unanimously.

PUBLIC COMMENT

There were no public comments.

HEALTH OFFICER/ADMINISTRATOR'S REPORT

Health Officer Update:

Dr. Gib Morrow, Health Officer, provided updates on pediatric COVID-19 vaccines, avian influenza, monkeypox and access to healthcare and reproductive healthcare services.

Dr. Morrow reminded the public that COVID-19 vaccines are now available for all persons six months of age and older. These vaccines were approved by the Federal Drug Administration (FDA), Centers for Disease Control and Prevention (CDC) and Western States Safety Group a couple of weeks ago. Approved vaccines include Moderna (2 shot series) and Pfizer (3 shot series) for children six months to five years of age. Clinical trials showed pediatric COVD-19 vaccines are safe and effective with no serious side effects thus far. Kitsap Public Health is partnering with Kitsap Children's Clinic to vaccinate children. Dr. Morrow acknowledged that some parents may have concerns about vaccinating their children and assured them that these

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vaccines are the best way to protect your loved ones. On June 29, the Washington State Department of Health (DOH) published a report on COVID-19 cases among children and youth in Washington state. The report showed that there were 6,700 cases in children between June 5-19, with the highest rates in the 0-3 year old range, though he noted case rates in children are declining. According to the report, there were 48 hospitalizations in children and hospitalizations are increasing. To date since the start of the pandemic, 17 children/youth have died from COVID-19 in the state. Dr. Morrow encouraged parents to get themselves and their children vaccinated this summer for COVID-19 and to ensure that children are up to date on other routine vaccinations.

Next, Dr. Morrow addressed avian influenza (bird flu). He noted that this is an animal and agricultural disaster, not a human health emergency. Last week, the US and Washington State Departments of Agriculture tested a backyard flock of chickens in Bremerton for avian influenza (H5N1 variant). Results were positive for this diagnoses. He noted this variant does not transmit between humans. He said it causes severe illness in poultry and wild birds but does not readily transmit to or between humans. The Department of Agriculture depopulates entire flocks when avian influenza is present in the flock. He said only one human case has been identified in the U.S this year and reiterated that the risk to humans is low, but said Kitsap Public Health is asking people to avoid contact with birds right now, take extra effort to keep backyard flocks separate from wild birds, report ill wild birds to Washington State Department of Fish and Wildlife, and report ill domestic birds and poultry to the Washington State Department of Agriculture. Kitsap Public Health's Communicable Disease team is tracking human exposures to avian influenza and coordinating treatment options should they be needed.

Next, Dr. Morrow provided an update on monkeypox, which is in the same family as smallpox. As of July 1, there were six known cases in Washington state. The federal response to containing this disease includes releasing more of the smallpox vaccine from the national stockpile. This vaccine is reserved for individuals who are in a short window post exposure to known monkeypox. He noted that a limited number of individuals working in labs or who have direct contact with this virus are receiving vaccine for pre-exposure, but most of the vaccines are being reserved for those at highest risk of exposure. Most of the cases in Washington have been in King County. Kitsap Public Health has been involved in administering these vaccines to exposed individuals in Kitsap County. Cases of monkeypox tend to be mild and self-limited, however immunocompromised people, children and people who are breastfeeding and those with severe disease may be eligible for immunoglobulin and other investigational anti-viral medications.

Lastly, Dr. Morrow discussed access to healthcare and reproductive health care services in Kitsap County. He said, though COVID-19 is dwindling, the effects continue to linger. He said hospital capacity in Washington state is at an all-time high and hospitals continue to struggle with staffing issues. Additionally, he said there is pent up demand for delayed care during the pandemic. St. Michael Medical Center is seeing a roughly 30% increase in emergency department visits on a monthly basis. Kitsap Public Health urges individuals to utilize primary care providers, when appropriate and available, and avoid risky behavior to prevent overburdening the emergency department.

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Dr. Morrow said maintaining access to comprehensive health services is a core function of all public health agencies, including Kitsap Public Health District. Kitsap Public Health's mission is to prevent disease and protect and promote the health of all persons in Kitsap County. Ensuring equitable access to a full range of reproductive health is essential to Kitsap Public Health's mission. He said the District understands that abortion is a highly charged and emotional topic in our society, and respects and understands that the members of our community have widely ranging views on this matter. From a public health perspective, efforts to restrict access to comprehensive reproductive services create unnecessary health risks, increase mental health and economic burdens on families, and disproportionately impact people of color, transgender people and historically marginalized and underrepresented populations, worsening the types of longstanding health inequities that Kitsap Public Health is committed to address.

Dr. Morrow said the Health District is thankful, and wants to remind residents, that Washington law continues to protect comprehensive reproductive rights, including the legal right to make individual decisions regarding pregnancy. The Health District understands that deciding whether to keep a pregnancy is a difficult and deeply personal choice and supports and defends the right of individuals to make this decision with their healthcare providers. He added that Kitsap Public Health is also committed to ensuring equitable access to health care and social services in our community, including contraception, prenatal care and primary care that can prevent unwanted and unintended pregnancies.

There were no further comments.

Administrator Update:

Mr. Keith Grellner, Administrator, updated the board on two items:

First, he said the Health District is transitioning back to a normal agenda format while coming out of the pandemic. Today's agenda features two program updates from the Health District's Food and Living Environment program and the Nurse-Family Partnership program.

Mr. Grellner reminded the board that there will be no August meeting. The next meeting is September 6, 2022.

There were no further comments.

UPDATE ON NONELECTED/NON-TRIBAL BOARD MEMBER POSITION RECRUITMENT

Mr. Grellner approached the health board regarding nonelected/non-tribal board member position recruitment. He said the recruitment has been going very well and the team has received several fantastic applicants. He said, as of May, the board had received 39 applications for nonelected/non-tribal positions. The Personnel Committee screened applicants and interviewed top five candidates in the public health/health care category on June 24. The interviews went very well. The Personnel Committee will interview top candidates in the

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community/stakeholders category on July 19. The Health District is working to set up additional interview dates in July as needed.

The Committee has also reopened the application period for the consumers of public health category. The original posting only received two qualified candidates. The Committee indicated they wanted a larger pool of candidates and reopened the job posting for that position only. This posting will close on July 14th. Mr. Grellner said the board is on track to have new board members join the board at the September meeting.

Mr. Grellner talked to the American Indian Health Commission (AIHC) and said they are working to recruit two tribal members for the health board but have not made selections yet. He said he hopes to have the two tribal members join the September board meeting as well.

Commissioner Gelder asked if the Personnel Committee's recommendations will come back to the full health board before going to the Board of County Commissioners. Mr. Grellner confirmed this and noted a special meeting may need to be called prior to the September 6 meeting. However, he noted this could also occur at the September board meeting if the interview process takes longer than currently planned.

There was no further comment.

FOOD SAFETY & LIVING ENVIRONMENT PROGRAM

Ms. Dayna Katula, Food Safety & Living Environment (FLE) Program Manager, approached the board with a presentation on the program and informed the board of the Health District's work to update the local food ordinance.

The FLE program works with food safety, camps, smoking and vaping in public places, water recreation facility safety, bed bugs, mold and a variety of other issues. A primary goal of the FLE program is to prevent foodborne and waterborne illnesses. One of the ways the Health District does this is through plan review. Plan review ensures the facilities use safe procedures and that they are in compliance with local and state regulations. Then, the Health District regularly inspects facilities to ensure continued health and safety. Food inspectors are also coordinators, liaisons and educators. Ms. Katula reminded the board that all food inspection scores are public and can be located on the Health District website.

At the June Health Board meeting, a question arose about how the Health District handles food recalls. Ms. Katula explained that food recalls are very common. Recalls are voluntary by the company providing the food and can be due to foreign objects found in a food product, or allergens not accurately labeled, or reported illnesses. She said most recalls start at a national level and the Health District tracks guidance at the state level to see how the recalls are being handled in the state and to what degree Washington residents will be affected. Washington State Department of Health (DOH) typically works with distributors to ensure contaminated products are removed from shelves before reaching the customer. Locally, the Health District often doesn't need to do anything further unless DOH and requests assistance from the Health District

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to work with local stores and restaurants. The Centers for Disease Control and Prevention (CDC) shares bigger recalls with the national media centers to get news of the recall disseminated quickly to the public. In these instances, the Health District helps spread the word by sharing information on social media. Additionally, Ms. Katula noted DOH sends out a weekly bulletin of food recalls and said anyone can subscribe to this notification list to receive updates.

Next, Ms. Katula said the Health Board has a current ordinance, 2014-01 Food Service Regulations, adopted December 2, 2014. The existing ordinance contains some outdated language and is in need of an update for several local requirements. Primarily, this ordinance adopts Chapter 246-215 WAC Washington State Retail Food Code as amended, however, the ordinance also provides some local food service permitting requirements and provides an enforcement framework for program staff. Examples of substantive changes to update the existing 2014 ordinance include:

- Removing duplicative language between the ordinance and WAC 246-215;
- Adding some local definitions of terms like "seasonal food establishment";
- Adding a requirement for Health District review if an operator changes food service equipment in their establishment;
- The addition of an appeals section to the ordinance.

The Health District plans to present the Board with an updated ordinance later this fall after a public comment period. The new ordinance will have received full legal review from the Kitsap County Prosecuting Attorney's office.

Ms. Katula said the Kitsap Food Advisory Council (KFAC) was established in 2019 and is comprised of people who run food establishments as well as community stakeholders. The Health District works with the KFAC to discuss issues and receive feedback on things like fees, policies, and the Food Code changes that went into effect in March, 2022.

Lastly, Ms. Katula talked about the Food and Drug Administration (FDA) Voluntary Retail Program Standards. There are nine standards that the FDA has determined constitutes a food program that is highly effective at reducing the risks at food establishments that are known to cause illness or death. The FLE program has met or is currently working to meet over half of the standards. Ms. Katula noted that some of the standards take years to meet, so this is a big accomplishment for the program.

Commissioner Gelder said the education aspect of inspection creates more of a partnership with establishments than a heavy-handed approach. He said he has witnessed these inspections in person and noted Health District inspectors work with establishments to be successful rather than focus solely on enforcement.

Mayor Erickson noted there had been a cooperative approach for uniform standards for food trucks across county lines in process a few years ago and asked what happened with that. Ms. Katula said that cooperative food truck process did occur but not in the way originally presented. She said a state law was passed, Mobile Food Units – Reciprocity, that changed the way this

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would work. This new law allows mobile food units to undergo a plan review in one county which is transferrable when they apply for a food permit in another county. She said this process seems to be going well. She also noted that the Health District works closely with other counties to ensure consistency between jurisdictions.

Mayor Erickson asked about fencing regulations for pools and whether local zoning regulations effect this issue. Specifically, she inquired if fencing regulations for pools are uniform or if they vary. Ms. Katula said the state pool code is modeled on the national standards, the Model Aquatic Health Code (MAHC) from CDC. She said, as long as all counties are implanting the state pool codes the same way, the regulations should not vary from county to county. She added that inspectors check the fencing each year to ensure it is still intact and structurally sound.

There was no further comment.

NURSE-FAMILY PARTNERSHIP PROGRAM

Ms. Nancy Acosta, Parent Child Health Program Manager, approached the board with an update on the Nurse-Family Partnership (NFP) program. Kitsap Public Health District houses supervision for the local regional (Clallam, Jefferson and Kitsap Counties) NFP program via the Parent Child Health Program. The Health District began implementing NFP in July 2012 as part of a regional team with Jefferson County Public Health that has, in the last year, expanded to also include services in East Clallam County. Ms. Acosta introduced Karina Mazur, NFP Supervisor, and Yaneisy (Jen) Griego, Health Educator, who provided a presentation on the NFP program.

Nurse-Family Partnership pairs low-income, first-time mothers with a Public Health Nurse. Public Health Nurses support families by providing education, support, and resources to help them be the best parents they can be. The NFP team uses an evidence-based approach to give families the tools to find self-efficacy, bond with their babies and break cycles of abuse and neglect during the crucial time of pregnancy (beginning at 28th week) through the child's second birthday. Ms. Griego explained that every \$1 invested in the NFP program saves \$5 in future costs for the highest-risk families served. The NFP demographic is congruent with the local population.

The presentation provided information about the Nurse-Family Partnership model:

- The science behind the program
- Washington data
- Kitsap data
- Client impact

Key goals of the NFP program are to improve pregnancy outcomes, improve child health and development, and improve economic self-sufficiency of the family. Parents receive a referral to their local NFP program where they receive care, information and advice from nurses specially trained in pregnancy, early development and the unique NFP proven model. The NFP model has

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some of the most extensive and compelling outcomes in this field, based on pilot groups and trials.

Funding sources for the NFP program include:

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

Local in-kind partnerships include:

- Eastside Baby Corner
- Stitch N Serve

Ms. Mazur explained the importance of supporting the parents in their goals and endeavors too, such as finding employment, advancing their education, or getting help for substance abuse. She noted building trust and connection with families became difficult during the pandemic when nurses couldn't meet face-to-face with clients. She said the program found creative ways to connect with families, including telehealth visits, porch drop offs of needed supplies, and outdoor masked interactions.

Commissioner Gelder asked what the main referral source is for this program. He also asked if the program has capacity requirements and ever has to turn anyone away. Ms. Griego said NFP works with quite a few community partners for referrals, including WA Department of Social and Health Services (DSHS), Peninsula Community Health Services (PCHS), schools, the justice community and healthcare providers. Ms. Mazur added that a recent referral came from the police department. Additionally, Ms. Mazur said the program is in high demand and does have a robust waitlist right now. The program is currently recruiting for another nurse and is seeking additional funding and expansion opportunities to meet the needs of the community.

Mayor Erickson asked how individuals are selected off the waitlist. Ms. Mazur said the team evaluates who the program can best serve, which tends to be the youngest mothers. The team looks at age of referral, number of referrals, level of risk, and other factors to determine who is selected from the waitlist. Additionally, the providers share stories with NFP staff that help inform the decision.

Mayor Erickson asked if any of the funding was federal and if the funding will be limited with the changes occurring federally. Ms. Mazur said the program would certainly be affected if federal funding was reduced or cut and said the program is always looking for additional sources of funding. Ms. Acosta added that majority of the program funding comes from the state Department of Children, Youth and Families which also releases expansion grants from time to time.

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Mr. Grellner noted that the agency is working with the county to obtain more funding for NFP through 2024.

There was no further comment.

ADJOURN

There was no further business; the meeting adjourned at 11:47 a.m.

Greg Wheeler

Kitsap Public Health Board

Keith Grellner Administrator

Board Members Present: Mayor Becky Erickson; Commissioner Charlotte Garrido; Commissioner Robert Gelder; Councilperson Kirsten Hytopoulos; Mayor Robert Putaansuu; Mayor Greg Wheeler; Commissioner Ed Wolfe.

Board Members Absent: None.

Community Members Present: See attached.

Staff Present: Nancy Acosta, Program Manager, Parent Child Health; Amy Anderson, Public Health Educator, Public Health Emergency Preparedness and Response; Angie Berger. Administrative Assistant, Administration; Eric Evans, Program Manager, Drinking Water and Onsite Sewage; April Fisk, Program Coordinator, Contracts Manager, Public Records & Safety Officer, MAC, Administration; Anna Gonzalez, Public Health Nurse, Communicable Disease; Keith Grellner, Administrator, Administration; Yaneisy Griego, Bilingual Community Health Worker, Parent Child Health; Karen Holt, Program Manager, Human Resources: Rosalie Howarth, Environmental Health Specialist, Food and Living Environment; Dayna Katula, Manager, Food and Living Environment; John Kiess, Director, Environmental Health Division: Sarah Kinnear, Community Liaison, Chronic Disease Prevention; Siri Kushner, Assistant Director. Community Health Division; Karina Mazur, Public Health Nurse Supervisor, Parent Child Health; Anne Moen, Public Health Educator, Public Health Emergency Preparedness and Response; Megan Moore, Community Liaison, Chronic Disease Prevention: Dr. Gib Morrow. Health Officer, Administration; Carin Onarheim, Disease Intervention Specialist, Communicable Disease; Layken Winchester; Environmental Health Specialist, Food & Living Environment; Janet Wyatt, Public Health Nurse, Parent Child Health.

Kitsap Public Health Board Meeting (Virtual Attendance)

Webinar ID

Actual Start Time

Attendee Count

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7/5/2022 10:05

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John Clauson - Kitsap Transit

John Kiess

Karen Holt

Karina Mazur (she/her)

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Yaneisy (Jen) Griego