

***Snohomish Health District
Board of Health Minutes
Regular Meeting
August 9, 2011***

Members Present

Dave Gossett, County Councilman
Linda Grafer, Councilwoman, Mukilteo
Karen Guzak, Mayor, Snohomish
John Koster, County Councilman
Mark Lamb, Mayor, Bothell, Chair
Drew Nielsen, Councilman, Everett
Michelle Robles, Councilwoman, Mountlake Terrace
Brian Sullivan, County Councilman
Dianne White, Mayor, Stanwood
Donna Wright, Councilwoman, Marysville

Members Absent

Patsy Cudaback, Councilwoman, Monroe
Adrienne Fraley-Monillas, Councilwoman, Edmonds
Jim Smith, Councilman, Lynnwood
Dave Somers, County Councilman, Vice Chair
Stephanie Wright, County Councilwoman

Others Present

John Amos, Snohomish County Council
Jeff Clarke, SHD Deputy Director
Randy Darst, SHD Environmental Health Division Director
Nancy Furness, SHD Special Assistant for Public Health and Emergency Preparedness
Gary Goldbaum, MD, SHD Health Officer and Director
Tim McDonald, SHD Communicable Disease Division Director
Suzanne Pate, SHD Communications Specialist
Karen Halpin, SHD Administration Specialist
Charlene Shambach, SHD Community Health Division Director
Steve Uberti, SHD Legal Counsel
Rita Mell, SHD Communicable Disease Program Manager
Donna Moore, SHD Community Health Office Supervisor
Gina Veloni, SHD Community Health Program Manager
Nancy Blevins, SHD Community Health Information Manager
Barb Taylor, SHD Administration Financial Analyst
Gayle Lanier, SHD Communicable Disease Program Manager
Peter Scontrino, Consultant
Michael Whitney, Everett Tribune

Call to Order

The regular monthly meeting of the Board of Health was convened at 3:02 p.m. by Chair Lamb in the Board Room of the Snohomish Health District Rucker Building. Roll call was taken by Karen Halpin, who reported there was a quorum present.

Executive Session

At 3:04 p.m. the Board went into Executive Session for 55 minutes to discuss the Health Officer's performance review. At 3:59 p.m. the meeting reconvened.

Chair's Report

Chair Lamb recommended a Board of Health protocol manual be developed. The manual would clearly define the respective roles and responsibilities of the Board and SHD leadership, as well as when SHD leadership should consult with the Board. Jeff Clarke is looking at different models for the protocol. The Board concurred with the recommendation.

Chair Lamb also reported that with the exception of extraordinary items that come up, presentations at the Board meetings will be directed more towards dealing with reorganization and Board governance issues and less instructional or background information.

Health Officer's Report

Dr. Goldbaum reported that at a recent NACCHO national meeting, Snohomish Health District was one out of 40 local health jurisdictions honored for developing and implementing a model public health practice. Snohomish Health District was recognized for the extraordinary efforts in collaborating with private-public partners in vaccinating over 25,000 children and adults for H1N1 influenza.

In July a summary was presented on the first in a series of reports about creating an aging-friendly Snohomish County. The first report, *Voices from the Community: Focus Groups*, has been published and can be reviewed on the SHD website.

Dr. Goldbaum reported that during the 2009 H1N1 influenza outbreak, researchers discovered Twitter was a unique tool to track rapidly-evolving public sentiment with respect to H1N1, and to measure disease activity. Snohomish Health District is looking at new technology to be able to communicate with a larger population in the county.

Potential District reorganization. Jeff Clarke presented a draft proposal for restructuring and realigning SHD to meet future challenges. Jeff reported the District has made no dramatic changes over the past ten years, despite losing 1 in 4 employees since 2008; additional staff will be retiring before the end of the year. In addition to our shrinking resources the County population continues to increase, demographics are changing, new diseases are emerging, and new technologies are demanding that we redirect efforts to make most effective use of shrinking resources. Snohomish Health District needs to build its capacities to monitor the

health status of the community, to prevent chronic disease, and to more effectively communicate with community partners and the public.

Minutes

It was moved by Ms. White and seconded by Mr. Koster to approve the minutes of the regular meeting held July 12, 2011. The motion carried unanimously.

Public Comment

There was no public comment.

Committee Reports

Included in today's meeting packet were the monthly standing reports. There were no questions regarding these reports.

Consent Agenda

It was moved by Mr. Gossett and seconded by Ms. Robles to approve the following item: a) Resolution 11-20, authorizing July 2011 expenditures for Health District, AIDS and PHEPR funds. The motion carried unanimously.

Action Agenda

Approval of Access to Baby and Child Dentistry (ABCD) grant. The Washington State Health Care Authority has made \$46,000 in grant funding available for Snohomish Health District to support outreach, case management and coordination with dental providers to increase dental care to Medicaid eligible children from birth through five years of age for the period of July 1, 2011 through June 30, 2012. The incentive for providers is a slight increase in Medicaid reimbursement. Hours of part-time employees will be increased to perform this work, so no new staff will be added, and full overhead and indirect costs will be covered. The Administration Committee has reviewed and approved this grant. Following discussion, it was moved by Ms. White and seconded by Ms. Robles to approve this ABCD grant from the Washington State Health Care Authority. The motion carried unanimously.

Approval of Resolution 11-21, authorizing 2011 General Fund Budget Change No. 1. Jeff Clarke went over a worksheet in this meeting's packet showing all of the line items included in the 2011 General Fund budget change. These changes are relative to: modifications in awards from several funding sources; a shift in timing of certain expenditures between budget years; midyear trends that indicate under expenditures in personnel, supplies and services; and reallocation of spending to the appropriate expense categories.

| | <u>Initial 2011 Budget</u> | <u>2011 Budget Change #1</u> | <u>Revised 2011 Budget</u> |
|--|----------------------------|------------------------------|----------------------------|
|--|----------------------------|------------------------------|----------------------------|

General Fund

| | | | |
|--------------------|--------------|-------------|--------------|
| Total Revenues | \$17,714,731 | (\$77,383) | \$17,637,348 |
| Total Expenditures | \$17,413,301 | (\$491,000) | \$16,922,301 |

The Administration Committee has reviewed and approved this budget change. It was moved by Mr. Nielsen and seconded by Mr. Gossett to approve Resolution 11-21, modifying the 2011 General Fund budget. The motion carried unanimously.

Approval of Resolution 11-22, authorizing 2011 AIDS Fund Budget Change No. 1. AIDS fund balance at the end of 2010 is being used as a revenue resource for 2011. New activities have been identified and the indirect/overhead rate has been changed, impacting the 2011 AIDS Fund budget. The \$320 in revenues is interest generated on fund balance.

| | <u>Initial 2011 Budget</u> | <u>2011 Budget Change #1</u> | <u>Revised 2011 Budget</u> |
|--|----------------------------|------------------------------|----------------------------|
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AIDS Fund

| | | | |
|--------------------|-----------|-------------|-----------|
| Total Revenues | \$254,250 | (\$253,930) | \$320 |
| Total Expenditures | \$85,221 | \$52,584 | \$137,805 |

The Administration Committee has reviewed and approved this budget change. It was moved by Ms. White and seconded by Mr. Koster to approve Resolution 11-22, modifying the 2011 AIDS Fund budget. The motion carried unanimously.

Approval of Resolution 11-23, authorizing 2011 PHEPR Fund Budget Change No. 1. New grants funds have been awarded in 2011, increasing the PHEPR Fund by \$225,337.

| | <u>Initial 2011 Budget</u> | <u>2011 Budget Change #1</u> | <u>Revised 2011 Budget</u> |
|--|----------------------------|------------------------------|----------------------------|
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PHEPR Fund

| | | | |
|--------------------|-----------|-----------|-----------|
| Total Revenues | \$774,519 | \$225,337 | \$999,856 |
| Total Expenditures | \$774,519 | \$225,337 | \$999,856 |

The Administration Committee has reviewed and approved this budget change. It was moved by Mr. Gossett and seconded by Ms. Robles to approve Resolution 11-23, modifying the 2011 PHEPR Fund budget. The motion carried unanimously.

Discussion Items

Proposed early retirement program. At the July Board meeting, Jeff Clarke summarized four major options for the Board to consider: 1) approve an early retirement program without participation limits; 2) approve an early retirement program with program-by-program limits (either programs or job classifications); 3) delay final consideration of options until August or September, when the 2012 budget can be projected; or 4) end consideration of an early retirement program at this time. Following discussion at that meeting, it was agreed to move this item forward for further discussion at the September Board of Health meeting, when a projection of the 2012 Budget will be available. At today's meeting discussion included putting the retirement proposal in a format the Board is comfortable with, and could be adopted in a short time frame if needed. Chair Lamb recommended, and the Board concurred, that an early retirement resolution be prepared for adoption with the exception of the dates filled in.

Executive Session

At 4:37 p.m. the Board went into Executive Session for 22 minutes to discuss labor negotiations. At 4:59p.m. The meeting reconvened.

Information Items

A calendar for scheduled meetings in August and September was provided to Board members in their packets.

Other Business

No other business was held.

Adjournment

The meeting was adjourned at 5:00 p.m.

Mark Lamb, Chair

Gary Goldbaum, MD, MPH, Secretary