



***Snohomish Health District
Board of Health Minutes
Regular Meeting
July 8, 2014***

Members Present

Adrienne Fraley-Monillas, Councilmember, Edmonds
Karen Guzak, Mayor, Snohomish, Chair
Linda Grafer, Councilmember, Mukilteo
John Joplin, Councilmember, Brier
Ken Klein, County Councilmember
Sam Low, Councilmember, Lake Stevens
Scott Murphy, Councilmember, Everett
Sean Richards, Councilmember, Mountlake Terrace
Sid Roberts, Councilmember, Lynnwood
Donna Wright, Councilmember, Marysville

Members Absent

Suzie Ashworth, Councilmember, Granite Falls
Dave Somers, County Councilmember
Stephanie Wright, County Councilmember
Brian Sullivan, County Councilmember
Terry Ryan, County Councilmember

Call to Order

The regular monthly meeting of the Board of Health was convened at 3:01 p.m. by Vice Chair Adrienne Fraley-Monillas in the Auditorium of the Snohomish Health District Rucker Building. Roll call was taken by Lorie Ochmann, who reported there was a quorum present.

Minutes

It was moved by Ms. D. Wright and seconded by Ms. Grafer to approve the minutes of the regular meeting held June 10, 2014. The motion carried 9 in favor and 0 opposed, Mr. Richards abstained.



Consent Agenda

It was moved by Mr. Joplin and seconded by Ms. Grafer to approve the following items on the Consent Agenda: (a) vouchers for June 2014; and (b) Resolution 14-09 authorizing June 2014 expenditures for Health District and PHEPR funds. The motion carried unanimously.

Public Comment

There was no public comment.

Chair's Report

Vice Chair Fraley-Monillas had no report.

Health Officer's Report

Dr. Goldbaum recognized Board Member Donna Wright for reappointment to the State Board of Health. This will be Ms. Wright's third three-year term. Ms. Wright has served on the SHD Board for 16 years. Dr. Goldbaum also recognized Randy Darst, SHD Environmental Health Division Director for 35 years of service to SHD.

Pertussis may be resurgent in the U.S. During 2012, 48,277 cases were reported to the Centers for Disease Control & Prevention (CDC), decreasing to 24,231 in 2013. As of June 16, only 9,964 cases had been reported this year, suggesting a continued nationwide decline. However, California is reporting a significant increase, with 4,500 cases reported this year to date vs. 708 for the same period last year. In 2011, California's outbreak spread to Oregon and Washington, leading in 2012 to the highest number of cases for Snohomish County in decades. An outbreak among farm workers in Grant County was reported today.

The CDC has published an analysis of the 2013-2014 influenza season. As for most recent seasons, most cases (87%) were influenza A and only 13% were influenza B. However, of influenza A specimens that were subtyped, 90% were pH1N1 (the 2009 pandemic strain) and only 10% were H3 viruses. This is the first year since 2009 that the pandemic strain has predominated. H3 viruses usually predominate; these are the viruses that cause the greatest disease and death among the very young and the very old. The pH1N1 viruses tend to affect middle aged adults. This is a reminder that everyone should be vaccinated annually. Incidentally, the 2014-2015 influenza vaccine will include H1N1 virus, as well as an H3 virus and a B virus.

On April 25th, the Food & Drug Administration (FDA) published proposed rules to allow the agency to regulate all tobacco products. The FDA currently regulates cigarettes, cigarette and 'roll your own' tobacco, and smokeless tobacco, but does not regulate vapor devices (or e-cigarettes), cigars, 'little cigars', dissolvable products, or hookah. The new rules would extend the



FDA's jurisdiction to these other products. The FDA is requesting comments on the proposed rules and has extended the comment period until August 8th. Like many other public health and health care professionals, staff will be submitting comments. Please note that anyone may make comments; if Board Members are interested please let staff know and additional information will be provided, including how to submit on-line. Staff intend to bring to the Board a proposal to incorporate the state's Smoking in Public Places law into local code. Staff will propose to extend local code to address vapor devices. To that end, the Board will be asked to constitute an ad-hoc committee to meet during July to discuss the issues and recommend action to the full Board in August.

Executive Session

Pursuant to RCW 42.30.140 The Snohomish Health District Board of Health convened into Executive Session at 3:20 for the purposes of discussing matters relating to agency enforcement actions. The Board anticipated the Executive Session would last fifteen minutes. The Board reconvened at 3:35.

Committee Reports

There were no questions regarding the monthly financial standing report.

Action Item

Strategic Plan Update

Dr. Goldbaum presented the Board with the final version of the Strategic Plan Update and gave an overview of the planning process. Early last year, the Board endorsed a proposal to update the agency's 2009 Strategic Plan reflecting changes associated with healthcare reform, unstable federal and state funding, agency projected structural deficits, development of the Agenda for Change, and framing of Foundational Public Health Services. Consultants Margaret Norton-Arnold and Heidi Keller were contracted to lead this effort. Over the past 5 months, the consultant team facilitated an extensive planning and outreach process that engaged employees at all levels, outside partners and stakeholders, the Public Health Advisory Council, and the Board of Health. Health District employees were invited to comment on the Draft Plan during a second round of three listening sessions conducted May 28-29, while they were also invited to submit email comments on the Draft. Stakeholders were also consulted throughout this planning process. The Public Health Advisory Council weighed in on the Update during three of their monthly meetings on March 26, April 23, and May 28, 2014. Additionally, a variety of stakeholders, who were identified by both Board members and senior District management, were interviewed to gather their feedback and opinions on the draft Update. Approximately 30



additional stakeholders were provided a copy of the draft plan and invited to provide comment and feedback.

Upon approval of the 2014 SHD Strategic Plan Update by the Board of Health, efforts will move toward implementation and will require a thoughtful strategy, including identification and development of staff work groups with specified roles and responsibilities, development of tasks and timelines, and coordination with other work tasks, obligations and commitments. Agency leaders and the consultant team will collaborate in developing an implementation plan for each strategic initiative. Developing a sustainable structure for this ongoing internal and external work will be critical. Discussions with community providers and stakeholders will ascertain their willingness, readiness, and capacity to assure quality service delivery for any services or activities that may move from SHD to other locations or providers. Upon identification of willing partners, written agreements will be sought to assure mutual understanding for when, where and how changes will occur to minimize disruption to clients and staff. As noted on page 44 of the Plan Update, the Board will receive quarterly reports summarizing the progress of implementation.

As staff prepares the agency's 2015 budget proposal for Board consideration, notations will be made, where applicable, to denote work tasks, or investments associated with implementing the eight initiatives noted in the plan.

Mr. Klein acknowledged staff concerns, while noting that the Update is needed. Ms. Grafer inquired about the review process during and following implementation. Dr. Goldbaum indicated that a number of reviews are included in the implementation plan. Mr. Low expressed his appreciation regarding staff involvement. Some of the comments from staff indicated there may be a disconnect in some areas between staff and administration. Mr. Low recommends working toward bridging that gap. Mr. Roberts stated that he is glad there is a plan that is so well thought out.

Program Briefings

2015 Budget Process Overview

Judy Chapman, SHD Business Manager briefed the Board of Health on the process unfolding in developing the 2015 budget, including financial management goals, preliminary budget schedule, planning context, preliminary 2015-16 initiatives and next steps. The SHD Financial Management Goals are (1) to achieve a balanced, stable and sustainable budget; (2) to provide an extended six year planning horizon to increase awareness of future potential challenges and opportunities; (3) to set aside discrete reserves for contingencies and replacement of capital assets; (4) to plan for the capital needs of the District; (5) to increase transparency and accountability in managing District finances and operations; and (6) to seek new/expanded revenues where feasible while prudently controlling costs. The 2015 budget process began in April with a review Indirect Cost Allocation Plan and continued in May and June to develop the budget work plan and new budget management tool. In July staff and Board are being provided an overview of 2015 budget process; the six-year financial projections will be updated in August. In September, program work plans and budget requests will be reviewed and staff will seek feedback, direction, and clarification from the ad hoc Budget Committee, and will



develop a preliminary budget. On October 14 the Board will be presented with the 2015 Preliminary Budget with adoption proposed in November/December. In addition to implementing the Strategic Plan Update, preliminary initiatives in 2014-15 are (1) to expand use of social media and website tools; (2) to apply learnings from SR530 mudslide to emergency planning and response; (3) to refresh public health policy development activities; and (4) to help lead statewide efforts in developing foundational public health services framework and funding strategies. There are continued uncertainties including reduced funding at the federal level for Medicaid Administrative Claims, and state and county general fund. The impact of new and changing health policies such as The Affordable Care Act and Foundational Public Health Services also add to uncertainties. This year SHD is in labor negotiations with all three bargaining units. We also face continued challenges. Snohomish County's population has increased by 6% since 2008, but revenues have dropped by 24%. SHD staffing has been reduced by approx. 30% since 2008. Labor and benefit costs are increasing. BOH members were asked to serve on a 2015 Ad Hoc Budget Committee to meet in August and September; Board Members John Joplin, Ken Klein, and Sam Low volunteered for the Committee.

2014 Work Plan Overview

Randy Darst, SHD Environmental Health Division Director briefed the Board on the 2014 Work Plan Overview. The Work Plan was developed to help guide the Snohomish Health District. An annual work plan serves as a valuable tool to support the development, implementation, and evaluation of agency operations and activities that are consistent with the SHD Strategic Plan, Board priorities and the 2014 budget. Program and division work plans were developed as part of the 2014 budget process and served to inform agency budget development proposals and Board decisions. Judy Chapman highlighted three Administration initiatives: (1) plan and implement upgrade of agency's financial management system; (2) assess, plan, and implement workplace safety improvements; and (3) plan and implement website improvement.

Charlene Shambach, Community Health Division Director discussed three initiatives in the Community Health Division: (1) begin to implement the Community Health Improvement Plan; (2) convene the Dental Access Coalition; and (3) develop a consistent Adverse Childhood Experiences (ACEs) informed approach across Maternal and Child Health programming.

Nancy Furness, Communicable Disease Division Director presented three Communicable Disease Division initiatives: (1) expand "Taking Illness Prevention to Preschools" program; (2) increase use of the Washington State Immunization Information System (WAIS) by Snohomish County adult health care providers; and (3) work with community providers to update Emergency Support Function (ESF) 8 roles and responsibilities.

Mr. Darst briefed the Board on three Environmental Health Division initiatives: (1) increase participation in the water recreation pre-opening inspection program; (2) develop and implement the plan for consistent and standardized food safety inspections; and (3) plan and upgrade the Environmental Health Information Management system.



Environmental Health Information Management System

Geoffrey Crofoot, Environmental Health Project Manager briefed the Board on the Environmental Health Information Management System Project. The Environmental Health Division currently uses a variety of software tools for food safety management, billing, permitting, solid waste program time accounting, facility inspections, complaint tracking, septic inspections, and storing septic as-builts and maintenance reports. The Division uses a variety of commercial off-the-shelf packages that have been customized for the business functions they serve, as well as two internally developed web applications to exclusively serve septic system as-builts and septic system operation and maintenance inspection reporting for the Water & Waste Water program. The 2013 and 2014 SHD budgets included funding to resource and support planning and implementing a new Environmental Health Information Management system to replace our current disparate systems with a comprehensive and integrated software solution to manage all EH programs. The project objective is to improve service to our customers and optimize our limited resources by identifying opportunities to streamline EH workflows, improve processes, and to identify opportunities for technology improvements and software solutions. A software solution will include the ability to conduct inspections and electronically document them in the field on a remote device, track data, and run reports. This will help ensure timely and accurate data collection and quick public access. The system will allow on-line access to all applicable scanned and electronic documents including: permit applications, inspections, septic system as-builts, photographs, and permits. The system will manage permitting and all financial transactions associated with application reviews, permitting, and other fees, and will provide a public portal that allows the general public and regulated businesses to submit applications, file complaints, conduct file reviews, and pay fees on-line. Accomplishments to date include a completed project charter, formation of a project team, creating a scoring tool, and describing 70 of 235 process flows. Mr. Crofoot provided a timeline with an estimated system implementation in mid 2015.

Information Items

Dr. Goldbaum informed Board Members that training on new requirements of the Open Public Meetings Act will be made available to Board Members. Details will be announced at a later date.

The November Board of Health Meetings falls on Veterans Day this year. Members discussed alternate dates. November 4th was determined to be the best option for Board Members present. The date will be finalized with all Board Members via email.

A calendar for scheduled meetings in July and August 2014 was provided to Board Members in their packets.



Adjournment

The meeting was adjourned at 5:05 PM.

Adrienne Fraley-Monillas, Vice Chair

Gary Goldbaum, M.D., M.P.H., Secretary