



***Snohomish Health District  
Board of Health Minutes  
Regular Meeting  
August 12, 2014***

**Members Present**

Suzie Ashworth, Councilmember, Granite Falls  
Adrienne Fraley-Monillas, Councilmember, Edmonds  
Linda Grafer, Councilmember, Mukilteo  
Karen Guzak, Mayor, Snohomish  
John Joplin, Councilmember, Brier  
Ken Klein, County Councilmember  
Sam Low, Councilmember, Lake Stevens  
Sean Richards, Councilmember, Mountlake Terrace  
Sid Roberts, Councilmember, Lynnwood  
Terry Ryan, County Councilmember  
Donna Wright, Councilmember, Marysville  
Stephanie Wright, County Councilmember, Chair

**Members Absent**

Dave Somers, County Councilmember  
Scott Murphy, Councilmember, Everett  
Brian Sullivan, County Councilmember

**Call to Order**

The regular monthly meeting of the Board of Health was convened at 3:06 p.m. by Chair Stephanie Wright 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. Fraley-Monillas and seconded by Ms. Grafer to approve the minutes of the regular meeting held July 8, 2014. The motion carried unanimously.



## **Consent Agenda**

It was moved by Mr. Joplin and seconded by Ms. Grafer to approve the following items on the Consent Agenda: (a) vouchers 58881-59051 totaling \$1,423,784.07 for July 2014; and (b) Resolution 14-10 authorizing July 2014 expenditures for Health District and PHEPR funds. The motion carried unanimously.

## **Public Comment**

There was no public comment.

## **Chair's Report**

Chair Wright had no report.

## **Health Officer's Report**

### **Ebola virus disease**

Western Africa is currently facing the largest outbreak ever of Ebola virus disease (EVD). Transmission between people is not easy, but occurs from wild animals to people and then from person to person through direct contact with bodily fluids, EVD is characterized by sudden onset of fever, intense weakness, muscle pain, headache, and sore throat, followed by vomiting, diarrhea, rash, bleeding, and multi-organ failure. There is no vaccine (although several are being tested) and treatment is supportive. The Centers for Disease Control and Prevention (CDC) has issued a warning to avoid nonessential travel to the West African nations of Guinea, Liberia, and Sierra Leone. Although ill individuals have traveled by air, there have been no reports of transmission to passengers or crew of those flights. Nonetheless, the current situation reminds us that all disease is global—new infections are only a few hours away, so constant vigilance is essential. Hospitals are prepared for the unlikely event of spread to the US.

### **Polio**

Despite international efforts to eradicate polio, wild polio virus is spreading, leading WHO to declare a public health emergency. New polio vaccine requirements have been issued for travelers to Afghanistan, Cameroon, Equatorial Guinea, Ethiopia, Iraq, Israel, Nigeria, Pakistan, Somalia, and Syria. CDC recommends that travelers to any country with wild polio virus circulation in the last 12 months protect their health by being fully vaccinated against polio, including a single lifetime polio vaccine booster for adults. SHD has sent alerts to practitioners in Snohomish County reminding them to check the current vaccination recommendations for traveling patients.



### **Gonorrhea/Syphilis/Hepatitis C**

Cases of gonorrhea, syphilis, and chronic hepatitis C have increased significantly in 2014, locally and across the state. For the year to date, SHD received reports of 201 cases of gonorrhea compared to 106 in 2013. For syphilis, the numbers are 30 in 2014 vs. 12 in 2013. For hepatitis C, the numbers are 411 vs. 361. The demographics appear to be changing for gonorrhea and syphilis. Gonorrhea cases reported this year are more likely than last year to be somewhat younger and female, whereas syphilis cases are more likely to be older and male; 2/3 of the syphilis cases are men who have sex with men. The increase in hepatitis C cases likely reflects increased testing by the medical community; over half of these cases are 50 or older. Nonetheless, hepatitis C poses a huge burden on the community; hepatitis C is responsible for the majority of liver transplants and curative medical treatment can cost over \$50,000.

### **FDA comments**

In July, the Health District submitted comments to the FDA on its proposed rules governing new tobacco products. Staff was dissatisfied with the original FDA proposal, as was the State Attorney General's Office, which submitted detailed feedback and thoughtful recommendations. Thanks to Board members who also submitted comments. A response is not expected for a year or more. The FDA expected to receive tens of thousands of comments.

### **Local public policy process**

As reported last month, over the next year staff will bring before the Board policy proposals addressing tobacco, vapor devices, and other policy issues. Prior to doing so, staff will be preparing a preliminary health policy agenda, informed by interviews with each Board Member and discussions with the Public Health Advisory Council and the Ad Hoc Policy Committee, which will identify the topics and issues the Board desires to more fully explore as policy proposals in the coming year. For the tobacco discussion, staff will pilot a process that enables more public and Board input. If the process goes smoothly, it will be used for future policy issues.

Dr. Goldbaum also reported that Governor Inslee sent a letter to the Health District, thanking SHD for our efforts supporting the SR 530 mudslide and flooding rescue and recovery activities. Board Members are reminded to visit the new SHD website. August 28<sup>th</sup> Dr. Goldbaum will be interviewed on KSER promoting back to school immunizations.

### **Executive Session**

Pursuant to RCW 42.30.110 (i) and RCW 42.30.140 (4)(b) The Snohomish Health District Board of Health convened into Executive Session at 3:25 for the purposes of discussing matters relating to agency enforcement actions and purposes of planning the agency's collective bargaining strategy. The Board anticipated the Executive Session would last thirty minutes. The Board reconvened at 3:55 to extend Executive Session for an additional twenty minutes. The Board reconvened at 4:25. Present for Executive Session were: Health Officer, Dr. Gary Goldbaum; Deputy Director, Pete Mayer; Division Directors, Charlene Shambach, Nancy



Furness, and Randy Darst; Business Manager, Judy Chapman; Human Resources Manager, Teri Smith; legal counsel Steve Uberti, Rod Younker, and Peter Altman; and TB Program Manager Patricia Yepassis-Zembrou.

## **Committee Reports**

There were no questions regarding the monthly financial standing report.

## **Action Item**

### **Growing Healthy Together Program**

As the program of the Public Hospital District No. 2, Snohomish County, the Verdant Health Commission (VHC) works to provide support and opportunities for approximately 200,000 people in communities of Brier, Edmonds, Lynnwood, Mountlake Terrace, Woodway and portions of Bothell and unincorporated Snohomish County. The VHC, governed by five independently elected Board of Commissioners, works to improve the health and well-being of the south Snohomish County community by educating and empowering residents to make healthy lifestyle choices. In doing so, it is currently accepting funding applications matching its priorities: prevention, access to health care services, education and empowerment, and policy and advocacy.

Staff seeks Board of Health approval to submit a grant request of \$341,903 to fund a new "Growing Healthy Together" program. The District has designed a health program that addresses three of the four priority areas of the VHC: prevention, access to health care services, and education and empowerment. The proposed Growing Healthy Together program strategically focuses on improving health outcomes for pregnant women, their newborns, and young children who face health disparities due to income, ethnicity or language. It will direct efforts in four zip code areas: 98026, 98036, 98037, and 98087. These demographic areas fall in the north and east section of the Verdant Health Commission's District, and represent population areas with high percentages of families and individuals who are younger, live below poverty level, have high rates of obesity, have lower rates of accessing health care, and are single parents.

The Snohomish Health District intends to submit an application to the Verdant Health Commission for the Growing Healthy Together grant. The goals for this grant are: (1) Reduce the incidence of singleton, low birth weight infants born to women participating within the program; (2) Increase the incidence of exclusively breastfeeding infants through six months of age; (3) Increase access, knowledge and use of fresh and healthy foods by low-income families; (4) Build a social marketing campaign using the 5210 strategies focused on families with children; and (5) Increase access to facilitated play groups based in best practices in child development, early learning, and parent education.

To meet these goals, the creation of a Community Wellness Team is envisioned consisting of a Public Health Nurse, Registered Dietician and Healthy Communities Specialist who will work with partners and area service providers to strengthen the social environment aimed at improving



health. Grant funds will help support these new limited term SHD staff resources for the duration of the preliminary grant cycle and any subsequent cycles that may be awarded. Upon conclusion of the grant funding cycle(s), the new FTE's will be eliminated.

It was moved by Ms. Fraley-Monillas and seconded by Ms. Wright to approve the submission of the Growing Healthy Together grant funding request to the Verdant Health Commission. The motion carried unanimously.

## **Program Briefings**

### **Open Public Meetings and Records Retention**

In March 2014, the Governor signed into law the Open Government Trainings Act (Engrossed Senate Bill 5964). The Act makes open government education a recognized obligation of public service. It is designed as a risk management requirement for public agencies, to improve trust in government, and to help prevent costly lawsuits. The Act requires basic open government training for local and statewide officials and records officers. In order to meet this requirement, staff will offer the required training for all Board Members at the September Meeting. Several Board Members indicated they had already received the training.

## **Information Items**

A calendar for scheduled meetings in August and September 2014 was provided to Board Members in their packets. The Board of Health Policy Ad-Hoc Committee meets August 20<sup>th</sup> at 2:30, and the 2015 Budget Ad-Hoc Committee meets August 26<sup>th</sup> at 3:00.

## **Adjournment**

The meeting was adjourned at 4:45 PM.

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Stephanie Wright, Chair

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