



***Snohomish Health District  
Board of Health Minutes  
Regular Meeting  
June 9, 2015***

**Members Present**

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  
Donna Wright, Councilmember, Marysville

**Members Absent**

Adrienne Fraley-Monillas, Councilmember, Edmonds  
Suzie Ashworth, Councilmember, Granite Falls  
Scott Murphy, Councilmember, Everett  
Dave Somers, County Councilmember  
Brian Sullivan, County Councilmember  
Terry Ryan, County Councilmember  
Stephanie Wright, County Councilmember, Chair

**Call to Order**

The June meeting of the Board of Health was convened at 3:05 p.m. by Chair Sam Low in the Auditorium of the Snohomish Health District Rucker Building. Roll call was taken by Lorie Ochmann, who reported there was not a quorum present.

The agenda was rearranged to delay voting items as no quorum was present. Mr. Joplin arrived at 3:06, making a quorum.

**Public Comment**

There was no public comment.



## Chair's Report

Chair Low informed the Board that he had participated in the interviews for the Environmental Health Division Director position. Jeff Ketchel has been selected to fill the vacancy and will begin work on July 13.

## Health Officer's Report

As of May 29, 169 County residents had been hospitalized for influenza and 12 died during this influenza season. Both numbers greatly exceed those for every year since the 2009 H1N1 pandemic. The Centers for Disease Control & Prevention will review the vaccine June 25; formal recommendations could be issued this summer.

As of May 29, there have been 90 cases of pertussis reported to us since the beginning of 2015. This is more than were reported for the entire years in 2014 and 2013, but less than the 291 reported year to date in 2012. Thus, pertussis is continuing to circulate widely and the relatively low efficacy of the current vaccine is hampering efforts to prevent exposure to our most vulnerable, newborns. Letters have been sent to classrooms, and in some cases, entire schools. For the foreseeable future, staff will focus on assuring that all pregnant women are vaccinated with every pregnancy.

Per the schedule approved by the Board, the Immunization Clinic will close on June 30. Notices have been issued to six affected employees. Through collaborative efforts with all the divisions, some positions have been reorganized or repurposed in which to move several affected employees. This leaves two employees who will be laid off when the clinic closes on June 30.

Snohomish County residents seeking travel medicine consultations and vaccinations will have options. Pacific Medical Clinic in Bothell will serve all ages, while those who are 18 months and older have increased access to services through pharmacy-based clinics throughout Snohomish County. Additionally, a collaboration with the Tulalip Pharmacy is yielding a new travel clinic service for all County residents, ages two and up. Given all of these options, staff does not believe closure of the Health District clinic will pose significant hardship to Snohomish County residents.

## Minutes

It was moved by Ms. Guzak and seconded by Mr. Richards to approve the minutes of the regular meeting held May 12, 2015. The motion carried unanimously.

## Consent Agenda

It was moved by Ms. Fraley-Monillas and seconded by Mr. Roberts to approve the following items on the Consent Agenda: (a) vouchers 60567-60706 totaling \$1,241,350.02 for May 2015; and



(b) Resolution 15-09 authorizing May 2015 expenditures for Health District and PHEPR funds. The motion carried unanimously.

### **Action Item**

Pete Mayer, SHD Deputy Director gave a presentation to the Board on the status of the 2015-2017 State Budget. Mr. Mayer reviewed the progress at the state level. The first 30-day special session ended on May 28 with no budget deal. Governor Inslee immediately called legislators back to work on May 29. Starting Monday, June 1, the Governor also directed budget negotiators to meet daily in his conference room, until a deal is worked out. There is high confidence that agreement will be reached prior the new biennium which begins July 1. However, Office of Financial Management has directed state agencies to begin implementing contingency plans. Most DOH services would be suspended, while a few others would be exempted, including WIC services. Most federal and State funds to SHD total \$26,000 per day in services suspended. Staff seeks authorization to utilize \$350,000 in unallocated fund balance to sustain programs for approximately 2 ½ weeks should a shutdown occur. After 2 ½ weeks, at the July 14<sup>th</sup> BOH meeting, the Board would be asked to identify programs and services to reduce, suspend or eliminate due to continued lack of a 2015 – 2017 State Budget.

Board Member Klein informed Chair Low that he and one other County Council Member would not be present for the July 14 Board Meeting and therefore unable to participate in further discussions on the State Budget.

It was moved by Ms. Guzak and seconded Mr. Roberts to authorize the expenditure of no greater than \$350,000 of unassigned fund balance to sustain District programs and services for the period July 1<sup>st</sup> to July 17<sup>th</sup>, 2015, should a state biennial budget not be enacted by July 1<sup>st</sup>. The motion carried unanimously.

Mr. Mayer presented an overview of the 2015 SHD Budget Process. The schedule will follow the same process as in the previous years, beginning in July with a meeting between SHD staff and the County Executive's Office and a budget call. SHD programs and divisions will develop operating budgets throughout July, August, and September. After some fine-tuning, staff will present a Preliminary Budget to the Board at the October 6 Board Meeting. A public hearing is scheduled for the November Board Meeting, followed by Final Budget Adoption in December. The planning process will include attention to federal, state, and county budgets; the SHD Strategic Plan; as well as updates to the Six year Capital Plan; and SHD Annual Work Plans. Staff request creation of 2016 SHD Budget Ad-Hoc Committee. Committee Members would be asked to attend the July 28 budget meeting with the County Executive as well as two or three Committee Meetings in August or September. The Committee would also provide updates to the full Board.



Board Members Joplin and Guzak volunteered to serve on the 2015 SHD Budget Ad-Hoc Committee. Board Member Grafer suggested that those Board Members not present should be provided the opportunity to participate. Mr. Klein indicated that he would discuss participation with the other County Council Members. Mr. Klein will serve on the Committee if no other County Council Member wishes to serve.

## **Briefings**

### **Smoking in Public Places- Phase 2 Vaping**

Health Policy Analyst, Margaret Shield gave a presentation on Smoking in Public Places (SIPP) Phase 2 Vaping. Vaping devices, or electronic cigarettes, contain a battery and a heating element which heats the nicotine liquid to a vapor that is then inhaled. Some of the devices are pre-loaded with a nicotine fluid, others may be refilled. Public health concerns include potential health effects from use and/or exposure; rapidly increasing use by teens and young adults; high poisoning risk to children; and the potential for vaping other drugs in the devices, including marijuana and illegal drugs. At present, there are over 500 brands on the market, over 7,000 flavors, and zero regulations. Vapor products contain concentrated nicotine dissolved in solvents and often flavorings are added. When heated these solvents release chemicals including formaldehyde, acrolein, acetaldehyde, metals, and others. Some of these are known carcinogens and lung irritants. Unlike conventional tobacco products, electronic drug devices are not subject to product review by the FDA, are not taxed, are not restricted for sale to minors, are not required to provide health warning labels, and are not subject to restrictions on advertising or health claims that apply to cigarettes. The FDA regulates tobacco products under Tobacco Control Act, but this law does not currently apply to e-cigarettes and vaping products that heat rather than burn. The FDA also regulates smoking cessation products like nicotine patches and gum; but there are no vapor products or e-cigarettes currently approved as smoking cessation products. The only federal regulation in effect is no use on airplanes. The only Washington State regulation in effect is no sales to minors under 18. In April 2014, the FDA released a proposed "deeming rule" to extend its regulatory authority under the Tobacco Control Act to electronic nicotine delivery devices and other tobacco products. The draft rule proposes a number of measures to restrict sales of vapor products containing nicotine to minors, similar to tobacco. The proposed federal rule does not address vaping in public places or chemical flavorings in "e-juices". The timeframe for finalization and adoption of the federal deeming rule is uncertain, but is likely to take several years. Sixteen states have some type of restriction on public indoor use of vapor products. Three states prohibit vaping in all places where smoking is prohibited.

House Bill 1645 (Governor's Request) is targeted at preventing youth access to e-cigarettes and vaping products; requires child-proof packaging, warning labels, and ingredient disclosure; requires products behind counter and restricts sampling, coupons, and vending machines; and prohibits possession by minors and use on school property. House Bill 2211 address e-cigarette taxation. Neither address vaping in public places.



Staff Recommends formation of a SIPP Phase II Subcommittee to evaluate options and facilitate stakeholder engagement on including vaping in the list of prohibited activities within the Smoking in Public Places ordinance.

Heather Thomas, SHD Communication and Public Relations Strategist discussed the schedule and stakeholder outreach.

Board Members asked a number of questions regarding vaping.

Board Members S. Low, D. Wright, Grafer, Roberts, and Guzak volunteered to participate on the Subcommittee. County Council Members will be contacting regarding participation.

### **Community Health Assessment and Improvement Plan**

Brant Wood, Public Health Advisory Council (PHAC) Chair provided an update of the May Council Meeting. Margaret Shield was introduced to the group as the Health District's new Policy Analyst.

Carrie Mc Lachlan provided an update on the Community Health Improvement Plans – Youth Physical Abuse, Obesity, and suicide.

The PHAC was given a briefing on Pharmaceutical Take Back programs. The update included the existing Snohomish County Partnership for Secure Medicine Disposal program, its limitations, and an overview of other programs in different parts of the US and Washington. The existing program is very successful; however, it cannot grow due to funding and limitation in both staffing and space limitations. The goal would be to create a more sustainable program funded by the drug manufacturers similar to the program planned in King County. The PHAC agreed in principal to the concept of moving the program to one funded by drug manufacturers; however, would like further discussion on best practices, most efficient programs, and the liability associated with lawsuits from drug companies.

The Council was also given a briefing on SIPP Phase II related to Vaping and Vapor Devices. The presentation covered some of the reasons why public health should be concerned, current regulations at a Federal and State level, what other health districts in the State have chosen to do about vapor devices, and the proposed schedule proposed to move forward with a potential policy change that would incorporate “vaping and vaping devices” into the current Smoking in Public Places ordinance. The group was supportive of the process outlined to move forward and also noted that they would like more data on the dangers associated with vaping.

The PHAC briefly discussed rainwater catchment as an alternative drinking water source. Next steps are to form a subcommittee of BOH and PHAC members to review options, issues, concerns related to developing a framework that would allow a pilot project to occur in Snohomish County. Chair Wood and Vice-Chair Brent Hackney both volunteered to be involved in the process.

Carrie McLachlan, SHD Program Manager, discussed the Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP) process. Public health facilitates the CHA and CHIP



processes that enables community partners to agree upon and work together toward the common goals. Then public health supports the monitoring and sharing of progress toward achieving those goals. During the assessment phase, staff compare local, state and national data, review trends and prioritize by: size and seriousness of problem; intervention effectiveness; and community values. As a result of the first step, 27 indicators with the worst risk scores were further evaluated, in terms of their size, seriousness, the existence of evidence-based practices and community interventions, and whether there are community values attached to the issue. Using these criteria, the members of the Council chose six health issues that need community attention and action, the first three needing immediate action: youth physical abuse, suicide, and obesity. SHD is focusing on these top three priority issues, and partner agencies are addressing other priority issues. The over-arching goal is community action resulting in collective impact. The Health District has purchased an online tool, InsightVision, that allows multiple partners to provide data and share strategies and showcases numerous efforts all impacting health issues.

Dr. Goldbaum informed the Board that the Providence Institute is interested in making InsightVision a centerpiece of their efforts to measure the progress that is made in the community, especially in the areas of physical activity and nutrition.

Board Member Guzak asked if the data was available online. Dr. Goldbaum responded that it will be in the future, but not yet.

Board Member D. Wright inquired whether the suicide CHIP group is working with the Marysville Pilchuck group. Ms. McLachlan indicated they were working together.

### **Update on Snohomish County Partnership for Medicine Disposal**

Snohomish County Sheriff's Office Bureau Chief Mark Richardson and Jonelle Fenton-Wallace, SHD Environmental Health Specialist gave a presentation on the Snohomish County Partnership for Medicine Disposal. The program is an innovative partnership providing secure disposal of unwanted medicines to Snohomish County households. Unintentional poisonings are the number one cause of unintentional injury deaths in Snohomish County; most involve opioid prescription drugs. Many teens think prescription medicines are safer to abuse than street drugs, and 73% of teens say it is easy to get prescription drugs from parents' medicine cabinets. Poisonings and ER visits are common from household medicines, especially in kids and seniors. There are also environmental concerns regarding disposal. Wastewater treatment plants & septic systems not designed to remove or treat medicines when flushed and pharmaceutical waste is not accepted via Snohomish County solid waste system. Prescription drug abuse continues to be the fastest growing substance abuse problem in the country. A comprehensive approach to the problem is needed, as outlined for many years in the National Drug Control Strategy for Prescription Drug Abuse. Washington State has one of the nation's strongest laws on provider education for opioid painkiller prescribing, a prescription monitoring program, and ongoing enforcement actions.





However, a comprehensive system for safe disposal of unwanted prescription and over-the-counter drugs from residents does not exist at this time in Washington State, or nationally. The current program model is not sustainable due to: inadequate resources to grow the program to pharmacy and hospital collection sites; no resources for program promotion; and no current capacity to manage uncaptured amounts of waste medicines. Last October, the DEA issued a long-awaited rule to implement a change in the federal Controlled Substances Act. Prior to this rule, law enforcement agencies were the only ones able to collect prescription drugs that are controlled substances. Now pharmacies, hospitals and some others may also host secure drop boxes for controlled substances, along with all other medicines. This change in federal regulations is a great opportunity to expand the drug take-back program beyond law enforcement offices to convenient pharmacy collection sites. However, the rule change doesn't come with any new funding. Retail pharmacies are interested in hosting secure drop boxes, but thus far haven't started collecting due to financial and logistical concerns. Laws in five counties require drug companies selling medicines to provide a secure take-back program for all county residents. King County's Board of Health passed a law in 2013. These laws are becoming more common in California. This pharmaceutical stewardship model is also used in some other countries. The manufacturer of the product can include the costs of the take-back in their product costs. Staff recommends exploring how best to maintain and expand the program; working with the Public Health Advisory Council and partner agencies to review and refine policy options; and returning to the Board with recommendations.

Chief Richardson spoke about the heroin epidemic in Snohomish County. National-wide, the experts agree that getting prescription drug out of the hands of youth is the key to getting the heroin problem under control.

Chair Low complimented the program for taking 25,000 pounds of medications off the streets, out of waterways, and out of kid's hands.

Vice-Chair Klein asked about requiring pharmacies to educate clients on medication disposal. Mr. Klein also asked about an increase in medication sharing. Ms. Shield responded that the current inappropriate message from pharmaceutical companies is that unused medications should be mixed with kitty litter or coffee ground and placing it in the trash. There are some agencies focusing on improved messaging to educate about the dangers of sharing medications.

Mr. Klein asked if the district is in a position to defend a lawsuit. Ms. Fenton-Wallace indicated that the Supreme Court has declined hearing the case. The Ninth Circuit Court of Appeals decision stands. Ms. Shield indicated that a number of agencies nation-wide are adopting these rules. SHD may choose to wait and watch how the situation unfolds in other areas.

Chief Richardson reminded the Board that the costs incurred by the Sherriff's Department and corrections are very high and the human cost is unacceptable. Commander Pat Slack of the Snohomish Regional Drug and Gang Task Force explained to the Board that he would be presenting at an international conference in Oklahoma in the near future and he would be encouraging all agencies throughout the county to implement this type of legislation.



Ms. Guzak asked for clarification on the pharmacies participating in the take-back program. Ms. Fenton-Wallace responded that there are a number of Bartell Pharmacies participating, but they are not currently accepting controlled substances.

## **Committee and Standing Reports**

### **Finance Report**

There were no questions on the finance report.

### **Information Items**

A calendar for scheduled meetings in June and July 2015 was provided to Board Members in their packets.

### **Adjournment**

The meeting was adjourned at 4:37PM.

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Sam Low, Chair

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