



**Snohomish Health District
Board of Health Minutes
July 13, 2021**

The meeting was held via Zoom conference call/video.

Members Present

Scott Bader, Councilmember, Everett
Elisabeth Crawford, Councilmember, Mukilteo
Megan Dunn, County Councilmember
Christine Frizzell, Councilmember, Lynnwood
John Joplin, Councilmember, Brier
Anji Jorstad, Councilmember, Lake Stevens
Sam Low, County Councilmember
Kyoko Matsumoto Wright, Mayor, Mountlake Terrace
Jared Mead, County Councilmember
Nate Nehring, County Councilmember
Dan Rankin, Mayor, Darrington
Linda Redmon, Councilmember, Snohomish
Jeff Vaughan, Councilmember, Marysville
Stephanie Wright, County Councilmember – BOH Chair

Members Absent

Adrienne Fraley-Monillas, Councilmember, Edmonds – BOH Vice Chair

Call to Order

The regular meeting of the Board of Health was called to order at 3:00 p.m. via Zoom conference call by Board Chair Stephanie Wright.

Roll Call

Roll call was taken by Ms. Sarah de Jong who reported there was a quorum present.

Arrivals/Departures

Ms. Linda Redmon arrived at 3:03 p.m.

Mr. Jared Mead arrived at 3:45 p.m.

Approval of Minutes

It was moved by Mr. Scott Bader and seconded by Ms. Anji Jorstad to approve the minutes of the regular meeting of June 8, 2021. The motion passed with 11 yes votes, 0 no votes, 1 abstention (Frizzell), 3 absent (Fraley-Monillas, Mead, Redmon).

Public Comment

Public comment was accepted in writing prior to the meeting. Chair Wright reported no written comments were received.

Written Reports

Chair Wright noted that the following written reports can be found in the Board packet:

- a. Finance Manager's report for April 2021



- b. Program Policy Committee draft minutes – June 17
- c. Administration Committee draft minutes – June 23
- d. Executive Committee draft minutes – June 25

Consent

It was moved by Ms. Jorstad and seconded by Ms. Christine Frizzell to approve the following item on consent:

- a. Authorize the Administrative Officer to sign the memorandum of understanding with PROTEC17 – Allied Professional Health Unit (APHU) regarding the lead Epidemiologist position.

The motion passed with 13 yes votes, 0 no votes, 2 absent (Fralely-Monillas, Mead).

Action

Authorize the Administrative Officer to sign the supplemental work order (SWO-17-2) between Snohomish Health District and Snohomish County Department of Information Technology for the purpose of receiving information technology support services (SR 21-069; S. Frederick)

Information technology was outsourced to Snohomish County in 2016. As work has moved forward with COVID, there has also been an increase of the number of staff, technological devices, and complexity of work, resulting in a higher level of support needed. The County has been a great partner in providing these services, going above and beyond to provide a level of service that wasn't contracted and have exceeded the scope of work on the contract on the District's behalf. This supplemental work order (SWO) reflects that increased level of service and the volume of service for the various devices and licensure needed to operate in the IT environment. The terms are similar to the original terms but the cost has a significant increase; this SWO increases the cost from \$650,000 to \$800,000 per year. Over time, that number will dwindle as the District moves away from COVID response.

Ms. Stephanie Wright asked Legal Counsellor Grant Weed if County Council members should recuse themselves from voting. Mr. Weed didn't believe it was necessary because they are acting in a different role when participating as a member of the Board of Health.

It was moved by Mr. Bader and seconded by Ms. Linda Redmon to authorize the Administrative Officer to sign the supplemental work order (SWO-17-2) between Snohomish Health District and Snohomish County Department of Information Technology for the purpose of receiving information technology support services. The motion passed with 13 yes votes, 0 no votes, 2 absent (Fralely-Monillas, Mead).

Authorize the hiring of up to 6.5 FTE for the HHS Advancing Health Literacy grant (SR 21-067; H. Thomas, K. Curtis)

In February, the Board authorized staff to apply for the HHS grant for advancing health literacy in response to COVID. The grant is not limited exclusively to COVID but also includes health literacy for other diseases that could result in a pandemic and gives the District the opportunity to build capacity for processes that will benefit in the long term. As part of the application process for this grant, staff scoped out the staffing required to complete the body of work. The staff needed are:

- One graphic specialist
- One (0.50 FTE) epidemiologist
- Two health educators, delaying the hiring of one
- One healthy community specialist
- One health equity advisor, either temporary or contracted
- Two communications coordinators

All of the above positions are budgeted within the grant.

It was moved by Mr. Bader and seconded by Mr. John Joplin to authorize the hiring of up to 6.5 FTE for the HHS Advancing Health Literacy grant. The motion passed with 13 yes votes, 0 no votes, 2 absent (Fraley-Monillas, Mead).

Briefings

Local Solid Waste Financial Assistance from the Washington State Department of Ecology (SR 21-064; R. Gray, S. Frederick)

This funding comes through the Washington State Department of Ecology and is one of three funding sources used to fund solid-waste activities. The funding award is \$300,000 over two year and the application was due at the end of June. Staff received about 24-hours' notice of the application deadline and so put together the application and requested the Executive Committee approve applying for the funding. Notice of award was given two to three days after the application was submitted. These are standard funds that are received every biennium.

Termination of the well seal inspection program agreement with the Washington State Department of Ecology (SR 21-065; R. Gray, S. Frederick)

When this agreement was originally entered into with the Department of Ecology in 2015, the Environmental Health workflow was different and it was very simple to perform this body of work. Since then, the workflow has completely changed and staff are not as able to perform these inspections on short notice. As a result, the program has lost money the past two years. Notice of renewal for this agreement was received with short notice and rather than pushing this contract renewal through the process when it was known to be losing money, the decision was made to let the contract lapse.

Administrative Officer's Report

Work is beginning to wrap up on the reparation to the basement of the Rucker Building due to the flooding that occurred about two months ago. 92 sheets of drywall were brought in to do the remediation in the affected areas and we anticipate having the drywall hung and taped by the end of next week. The record storage area that held paper files required to be kept onsite (HR, finance, etc.) was impacted and those files have been temporarily relocated to the auditorium. The records will eventually be moved out as staff take appropriate steps to make the auditorium ready for in-person meetings once the Board decides it's appropriate to move forward with in-person or hybrid meetings.

Work is moving forward with the data-sharing agreement for the weekly death list. The agreement has been shared with Sound Publishing, the parent company of the Everett Herald, for their legal review.

Mr. Shawn Frederick thanked the Board of Health members for their feedback regarding the health awards. These awards are a way to create positive reinforcement in behavior we want to see in the community. This work will be moving forward and will be seen in upcoming reports.

Several weeks ago, the District made an initial ask to Snohomish County for a 2% increase over the historical amount for tuberculosis control. In the most recent legislative session, a significant increase in foundational public health services funds was awarded to the state public health system. Details are still being worked out on how funds will be allocated but a significant increase in funds is expected for Snohomish County and we are working to make plans to incorporate that into the draft budget documents as soon as they become available. Notifications have been sent out to several Board members to request their participation in the budget process.

Two vehicles have recently been surplused and there will likely be a third soon. The average mileage of the vehicles in the fleet have about 86,000 miles per vehicle. This vehicle management is a continuation of work started in 2018 with staff identifying new means of fleet management.

As of the beginning of the month, and in addition to operating the last-standing mass-vaccination site in Snohomish County, the Health District is now coordinating all mobile clinics, mass-testing sites, and other regular bodies of work surrounding COVID such as case investigation and contact tracing. We are still in a recruiting process and have recently hired a planning section chief to take on some of the high level planning for many of these operations. We are also recruiting for an incident commander, operations section chief, and a logistics section chief, to replace staff as they transition back to their regular job duties.

There have been over 240,000 hours of staff time placed into COVID response, either through permanent, temporary, or contract employees of the Health District; this equates to 120 full time positions and is a credit to Human Resources' ability to mobilize and adapt over the past 18 months.

Health Officer's Report

The sustained trend in hospital admissions, long-term care cases, and deaths is very low with minimal activity happening in those settings. There was a small increase in COVID hospitalizations during the heat wave. Although there's no known interaction between COVID and heat, there were a lot of general medical needs that drove hospital admissions. Many of the admissions were for general medical and surgical issues but not COVID or the heat, and we are now back down to a hospital COVID census of about 20 people at any one time.

Testing demand is down about 70% from the peak of prior waves as more people are vaccinated and the disease case rate is lower; however, it's still important to continue testing operations for those who can't access testing through a community clinic or private medical system and it's also an important surveillance tool. Although testing demand remains low, the positivity rate has taken a small jump. Over the past week, cases have gone up 36% over the previous week. With just around 50% of the total population fully vaccinated, there are still a lot of people who aren't vaccinated and that leaves the likelihood for this to be the first of several weeks of increase in cases and possibly hospitalizations or deaths. Unvaccinated people need to continue to wear masks.

Almost 900,000 doses delivered to Snohomish County residents. 470,000 have initiated vaccination and around 425,000 have completed their vaccination schedule. This means about 90% of everyone who started vaccination have also finished. The vaccination doses administered peaked in late April at around 65,000 and have been coming down since with about 9,000 doses administered last week and only 3,000 of those were people initiating vaccination.

The Delta strain, or B.1.617.2, that was originally detected in India, continues to gain a foothold, is making up a higher percentage of the total number of COVID cases and, is about 50% more transmissible than previously circulating dominant strains. While there is some reduced effect of human antibodies neutralizing this strain in the test tube compared to previous strains, the vaccines still protect very well in terms of and preventing illness, hospitalization and death. Until COVID is a thing of the past, at least in public health terms, we're going to keep seeing variants emerge like this that challenge us. Hopefully they don't escape immunity from vaccine-acquired or naturally-acquired immunity.

There have been about 2,500 breakthrough cases in the state since vaccination began. Breaking down those cases by strain shows the Delta strain accounts for 10% of that number, versus 4% for unvaccinated people with COVID. This is a signal that the Delta strain has some immune escape but not enough to cause a hospital surge or a widespread breakdown in prevention or control efforts.

Post-vaccination myocarditis is predominantly occurring in young men between the ages of 15 to 30 after their second dose of an mRNA vaccine. The CDC has collected available data and performed a thorough risk analysis to compare the benefits versus the risks of the vaccine. The general consensus is that the benefit of being vaccinated far outweighs the risk of myocarditis.

The ACIP reviewed CDC staff presentations on what would inform a choice to recommend an additional or booster dose. The Committee felt that recommendation for booster doses would only occur after evidence of

declining protection against illness, such as declines in vaccine effectiveness or an escape variant was detected, but there is no data to support recommendations for booster doses currently and they will continue to monitor.

The state is involving local health jurisdictions in commenting on how the K-12 school requirements are going to work. These will likely be requirements around prevention measures, such as who wears a mask and how much distancing needs to happen with different age groups. Dr. Spitters is working on that as one of the Health Officer representatives and expects the work group effort to wrap up next week and then for the schools to work on planning to implement by mid-August.

Dr. Spitters also continues to participate in the update of the Washington Administrative Code (State Board of Health rules) addressing STD/HIV investigations to harmonize the HIV investigation and control approach with that for other STDs and communicable diseases – both to reduce stigmatization of HIV-infected individuals as well as to eliminate exceptionalism for HIV.

The TB Control Program continues to have very complicated cases. The caseload itself is not particularly high but there are a lot of patients who aren't tolerating medications, which turns into multi-drug intolerant cases and is essentially the same as trying to treat a multi-drug resistant case.

Executive Session

The Snohomish Health District Board of Health convened into executive session for the purpose of pending litigation pursuant to RCW 42.30.110(1)(i). Executive session is expected to last up to 10 minutes. Unless extended to a later time, the Board will reconvene into regular session at 4:09 p.m. and is not expected to take action. The Board announced they will extend executive session 5 minutes. They reconvened at 4:14 p.m. and did not take action.

Information Items

Chair Wright announced upcoming meetings.

Adjournment

The meeting was adjourned at 4:15 p.m.

Stephanie Wright, Chair

Shawn Frederick, Administrative Officer / Secretary