

KITSAP PUBLIC HEALTH BOARD MEETING AGENDA

February 2, 2021
12:30 p.m. to 1:45 p.m.

**** Please note that this is a virtual / online meeting due to the COVID-19 pandemic.
Electronic connection and viewing information for the meeting is provided at the end of the
Agenda. ****

- 12:30 p.m. 1. Call to Order
Commissioner Charlotte Garrido, Chair

ACTION ITEMS

- 12:31 p.m. 2. Approval of January 5, 2021 Regular Meeting Minutes
Commissioner Charlotte Garrido, Chair *Page 4*
- 12:32 p.m. 3. Approval of Consent Items and Contract Updates
Commissioner Charlotte Garrido, Chair *External Document*

INFORMATION AND DISCUSSION ITEMS

- 12:34 p.m. 4. Chair Comments
Commissioner Charlotte Garrido, Chair
- 12:36 p.m. 5. Public Comment – PLEASE SEE NOTES AT END OF AGENDA
Commissioner Charlotte Garrido, Chair
- 12:46p.m. 6. Health Officer and Administrator Reports
Dr. Gib Morrow, Health Officer & Keith Grellner, Administrator
- 12:53 p.m. 7. 2021 Legislative Session Update for Public Health
Keith Grellner, Administrator *Page 14*
Megan Moore, Healthy Communities Specialist
- 1:00 p.m. 8. COVID-19 Update
Dr. Gib Morrow, Health Officer *Page 21*
Keith Grellner, Administrator
- 1:45 p.m. 9. Adjourn

*All times are approximate. Board meeting materials are available online at
www.kitsappublichealth.org/about/board-meetings.php*

kitsappublichealth.org



Instructions for virtual attendance at Kitsap Public Health Board meetings**

Health Board Meetings Via Zoom

The Kitsap Public Health Board will be held via Zoom webinar, broadcast live on Comcast channel 12, WAVE channel 3, the [BKAT website](#) and Facebook (please note: there is no physical location for this meeting. Board members and staff will all participate remotely). The Health Board and presenters are **panelists**, members of the public are **attendees**.

Webinar **attendees** do not interact with one another; they join in listen-only mode, and the host will unmute one or more attendees as needed.

How to Provide Public Comment

We apologize, but verbal public comment *during* the meeting may only be made through a Zoom connection. The public may make verbal comments during the Public Comment agenda item if they are attending the meeting via Zoom. To sign up for public comment in advance (recommended, not required), email: april.fisk@kitsappublichealth.org.

Written comments may be submitted *prior* to the meeting via regular mail or email to:

Regular Mail:

Kitsap Public Health Board
Attention: Executive Secretary
345 6th Street, Suite 300
Bremerton, WA 98337

Email:

keith.grellner@kitsappublichealth.org

Written comments must be received by midnight, Monday, February 1, 2021, to be included during the February 2, 2021, meeting.

How to Join the Zoom Meeting

To join the meeting online, please click the link:

<https://us02web.zoom.us/j/86186052497?pwd=TXcrQU1PRWVGVHgyWERXRFluTWloQT09>

Password: 109118

Or join by telephone:

Dial: +1 (253) 215-8782

Webinar ID: 861 8605 2497

*Zoom meeting is limited to the first 500 participants. A recording of the meeting will be made available on our website within 48 hours of the meeting.

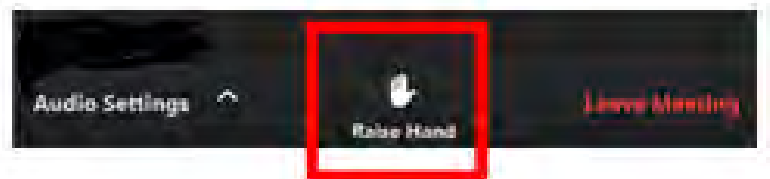
Instructions for virtual attendance at Kitsap Public Health Board meetings**

Public Participation Guidelines

Below are recommendations for use by members of the public in meetings conducted via Zoom Webinar.

Identification: Upon entering the webinar, please enter your name, number or other chosen identifier, so that the host can call upon you during the public comment period.

Raise Hand (pictured below): You have the ability to virtually raise your hand for the duration of the meeting but you will not be acknowledged until you are called on during the public comment period. NOTE: If you have used your telephone to access the Zoom meeting, **you may press *9** to “raise your hand”. The host will unmute you when it’s your turn to speak.



Public Comment Period: Use “Raise Hand” to be called upon by the host. The host will announce your name when it’s your turn.

Mute/Unmute: Attendees will be muted and not audible to the Board except during times they are designated to speak. When you are announced, you will be able to unmute yourself.

Time Limit: Each speaker testifying or providing public comment will be limited to three (3) minutes.

Use Headphones/Mic for better sound quality and less background noise, if possible.

**KITSAP PUBLIC HEALTH BOARD
MEETING MINUTES
Regular Meeting
January 5, 2021**

The meeting was called to order by Board Chair, Mayor Rob Putaansuu at 10:32 a.m.

REVIEW AND APPROVE AGENDA

There were no changes to the agenda.

2021 HEALTH BOARD OFFICER ASSIGNMENTS – ELECTION OF CHAIR, VICE CHAIR, AND COMMITTEE ASSIGNMENTS

Mayor Putaansuu called for nominations for Board Chair and Vice Chair.

Deputy Mayor Joe Deets moved and Commissioner Ed Wolfe seconded the motion to nominate Commissioner Charlotte Garrido as Board Chair and Mayor Greg Wheeler as Vice Chair. Commissioner Garrido abstained. The motion was approved by majority.

Commissioner Garrido assumed the role of Chair for the remainder of the meeting.

Mayor Putaansuu recommended maintaining the committee roles from 2020. Deputy Mayor Deets said he will continue serving in the committee roles that Councilmember Medina held, but noted the Bainbridge Island City Council will be voting on elected positions tonight and assigning roles to various boards. Therefore, he may not be the Bainbridge Island representative on the Health Board moving forward.

Mayor Becky Erickson moved and Deputy Mayor Deets seconded the motion to adopt the committee assignments as written with the understanding that the Bainbridge Island representative for the Health Board has yet to be determined.

Mayor Putaansuu noted the Health Officer recruitment committee is no longer needed. Mr. Grellner agreed this committee can sunset now that the Health Officer position has been filled.

The motion was approved unanimously.

2021 Kitsap Public Health Board Officers and Committee Assignments are as follows: Board Chair is Commissioner Charlotte Garrido and Vice Chair is Mayor Greg Wheeler; Finance and Operations Committee members are Mayor Becky Erickson, Commissioner Charlotte Garrido and Mayor Greg Wheeler; Policy Committee members are Mayor Becky Erickson, Commissioner Rob Gelder and Mayor Rob Putaansuu; Personnel Committee members are Mayor Greg Wheeler, Commissioner Ed Wolfe and a Bainbridge Island representative yet to be determined.

There was no further comment.

BOARD MEETING MINUTES

Commissioner Rob Gelder moved and Mayor Erickson seconded the motion to approve the minutes for the December 1, 2020, regular meeting. The motion was approved unanimously.

CONSENT AGENDA

The January consent agenda included the following contracts:

- 1869 Amendment 2 (2123), *Olympic Community of Health, Change Plan*
- 2054 Amendment 1 (2124), *Peoples Harm Reduction Alliance, Secondary Syringe Exchange*
- 2120, *Kitsap County, Nurse Family Partnership*
- 2125, *Kitsap County, Therapeutic Court Tax Programs*
- 2126, *Clallam County, Communicable Disease/Opioid Dashboard*
- 2127, *Jefferson County Public Health, Mental Health / Substance Abuse*
- 2129, *Kitsap County, Clean Water Kitsap*
- 2131, *Kitsap County, Nurse Family Partnership*
- 2132, *Olympic Community of Health, Medicaid Transformation*

Mayor Putaansuu moved and Mayor Erickson seconded the motion to approve the consent agenda, including the Contracts Update and Warrant and Electronic Funds Transfer Registers.

Mayor Erickson asked for clarification on some of the contracts and asked if some of these contracts are being amended. Mr. Grellner confirmed.

The motion was approved unanimously.

There was no further discussion.

LEGISLATIVE & RULEMAKING PRIORITIES FOR 2021 STATE LEGISLATIVE SESSION

Mr. Keith Grellner, Administrator, reminded the Board that each year, the Health District brings legislative and rulemaking priorities to the Board for approval. He noted that this year's legislative session will be very different from previous years for several reasons: it will be done remotely for the first time, it is a biennium budget year, and we are experiencing the COVID-19 pandemic. He said most of these priorities are the same as 2020.

2021 Legislative and Rulemaking Priorities:

1. Support Funding Foundational Public Health Services (FPHS)
2. Support Coronavirus Response and Recovery Efforts
3. Oppose Efforts to Reduce or Eliminate Local Public Health Authority
4. Oppose Reductions or Limitations on Funding for Local Health Jurisdictions

5. Oppose Bills which would Allow Potentially Hazardous Food (PHF) to be Prepared and Sold from Residential Kitchens

Commissioner Gelder noted there has been discussion of forced consolidation of health districts or health departments based on population size for smaller jurisdictions. There are a lot of details yet to come out. He said since Kitsap has a population over 250,000, it could be required to take over the smaller jurisdictions in our region.

Mr. Grellner said this would regionalize public health systems and well as move the local health officer from reporting to the board to reporting directly to the state secretary of health. Kitsap has operated as a local health jurisdiction for over 70 years. As soon as Mr. Grellner receives more information on this, he will forward it to the Board.

Commissioner Garrido said this should be discussed frequently. She suggested a work group may need to be formed to keep up to date with legislation developments and information.

Mayor Erickson said this seems to be happening in a lot of places and it is concerning. She said she would be interested in joining the work group.

Commissioner Gelder and Mayor Putaansuu also said they would like to join the work group.

Mr. Grellner noted some members out of a private company in California are lobbying to allow individuals to prepare and sell food out of their individual kitchens to the public. The state has rigorous rules in place to protect public health from foodborne illness but requiring that food sold to the public is only prepared in a designated facility.

Commissioner Garrido asked where these bills usually come from. Mr. Grellner said these bills usually come from legislators in King County who are interested in the economic value of this. He noted that residential home kitchens do not have the same safety measures in place to protect from foodborne illness that food service establishments have.

Commissioner Gelder moved and Mayor Erickson seconded the motion to adopt Legislative and Rulemaking Priorities for 2021 State Legislative Session. The motion was approved unanimously.

Mayor Erickson requested that the workgroup begin meeting in the next few weeks to prepare for the legislative session.

Commissioner Garrido said the rest of the Board should be informed as well. Commissioner Gelder noted WSALPHO should be putting out a bill watch document, which will help inform the Board's direction.

There was no further comment.

PUBLIC COMMENT

Mr. Grellner said he received six public comments via email which will be included in the post meeting packet materials. Written public comments regarding the opening of public schools were received from Shelley Simcox, Matt Hebard, Kristine Lange, and Lisa Birkenfeld.

Mr. Grellner said the Washington State Department of Health (DOH) updated the school reopening guidance and changed the metric from less than 75 cases/100k population to 350 cases/100k. These commenters were concerned that this was moving the case count too high to safely move children back into schools. Mr. Grellner said he and Dr. Gib Morrow, Health Officer, feel that the data have found that schools, following social distancing and screening guidelines, with small cohorts, have a small risk of disease transmission. It is the Health District's understanding that most Kitsap schools will begin welcoming pre-k through third grade in small cohorts back to in person education. The Health District will continue to support and work with schools to reopen under state guidance. Health District staff will be watching the local situation carefully, and if things change, the Health District has the authority to scale back criteria for reopening.

Additionally, Mr. Grellner noted that written comments were received from Cheri McCorckle Gale Ann MacLeod regarding vaccines. All of these will be answered in today's presentation.

There was no further comment.

HEALTH OFFICER/ADMINISTRATOR'S REPORT

Mr. Grellner and Dr. Gib Morrow, Health Officer, deferred their main comments to the next agenda item.

Mr. Grellner said the Health District partnered with city staff and Peninsula Community Health Services on a vaccine clinic Saturday for Phase 1a healthcare providers. He said it went well and the clinic vaccinated nearly 700 people in six hours. He said it was a good model for future vaccination clinics.

Deputy Mayor Deets asked what the Health District's position is on having air purification systems installed in schools to help combat COVID-19 spread. Dr. Morrow said the Centers for Disease Control and Prevention (CDC) released a lot of specific information about the importance of ventilation and ways to improve it, as of December 21, 2020. The Health District has been meeting with school superintendents regularly and has recommended improved ventilation systems, though he cannot confirm if Kitsap schools have implemented this recommendation.

There was no further comment.

COVID-19 UPDATE, VACCINE EFFORTS AND DISCUSSION

Dr. Morrow introduced the COVID-19 presentation. He acknowledged how difficult the past year has been with the pandemic, school closures, working from home, financial struggles, job loss and mental health difficulties. He said everyone working in public health and healthcare is working hard to minimize further damage from this pandemic.

Dr. Morrow said Kitsap is currently experiencing the highest volume of cases yet and is waiting to see what the aftermath of the holidays brings. He noted that recent testing has been impacted by holiday lab and testing location closures. He said Kitsap is still seeing upwards of 30 new cases daily and had over 100 new cases yesterday. Case rates appear to be trending down but there is still widespread community transmission. Currently, there are 15 patients hospitalized with COVID-19 at St. Michael's Medical Center, three of whom are on ventilators.

Since the pandemic reached Kitsap in March, we have had approximately 4,000 COVID cases in the county, two-hundred hospitalizations, and 40 deaths. Since the pandemic began, the Health District has identified and managed 126 outbreaks (and is seeing an average of one new outbreak per day since mid-December, some involving dozens of people). There have been about 90,000 COVID-19 tests run at over 40 testing sites in Kitsap since the pandemic began.

Dr. Morrow said a new variant of COVID-19 has emerged in England and has been found in Colorado, California, Florida, and New York. This variant is about one and a half times more transmissible than earlier viruses, but it does not appear to cause more severe or more lethal disease and does not appear to be resistant to vaccines or natural immunity. He said it is important to continue doing the "Three W's": wear masks, watch distance and wash hands. These work to prevent transmission of all respiratory infections and all strains of COVID-19.

Dr. Morrow said this is why we need to get the safe and effective COVID-19 vaccines administered as soon as they arrive in town. It is important to remember that these vaccines were granted Emergency Use Authorizations (EUA) for the Pfizer vaccine on December 11, 2020 and for the Moderna drug on December 18, 2020. The vaccines are being shipped directly from the manufacturers to hospitals, pharmacies, nursing homes, and doctors' offices if they have enrolled with DOH to administer them. Not all Kitsap providers have enrolled, and the Kitsap health district is working hard to make sure they all do. The federal and state vaccination plans are for healthcare providers like pharmacies, and clinics, and hospitals to administer the vaccines. Under the state's vaccine plan, the Health District's primary roles are to support providers in the vaccination roll-out, aggressively push their involvement and participation, and work with providers to promote equitable access to vaccination. While vaccines are being produced and distributed as soon as available, they are still limited. Certified medical personnel are required to obtain informed consent and administer the shots.

Dr. Morrow said, thus far, there has been no funding for public health vaccination programs, although staff are hearing that the new federal COVID bill that was just passed will allow entities who did not spend all their CARES Act funds by the December 30 deadline to be able to use these funds up through June 30, 2021. The Health District is working on getting clarification, and if true, we plan to use this funding to help with public/private vaccination clinics in Kitsap.

While some may be included in the \$900 billion stimulus bill, healthcare workers are difficult to find and hire, even if funding existed. The Health District enrolled early as a vaccine provider but has not yet received any vaccines. He said Health District staff are developing a plan which includes volunteer recruitment and collaboration with the Kitsap Emergency Operations Center, the Medical Reserve Corps, and other provider groups to administer vaccines when they arrive. Staff anticipate this will help to accelerate the pace of getting everyone immunized. He said the Health District is working to get the community vaccinated as soon as possible.

Dr. Morrow introduced Jessica Guidry, Public Health Emergency Preparedness and Response Program Manager, and Liz Davis, COVID Vaccine Public Health Nurse.

Ms. Davis discussed Washington State's Interim Plan for vaccine distribution. She noted there is a big focus on equity in this plan, so that those who have been most disproportionately affected by this pandemic are able to access the vaccine. The DOH enrolls providers to receive vaccine, decides on allocation, manages the immunization information system, and decided when to move to the next phase. The state has not yet released guidance for Phases 1b and 1c.

Ms. Davis explained that we are currently in Phase 1a, which includes high risk workers in healthcare settings, emergency first responders, and long-term care facility staff and residents. The Health District estimates at least 9,500 Kitsap residents are eligible for Phase 1a vaccination.

The CDC partnered with CVS and Walgreens pharmacies to provide onsite COVID-19 vaccines to nursing homes, assisted living facilities, and other congregate living facilities with residents over 65 years old. Seventy-nine long term care facilities in Kitsap are enrolled in this program, which launched last week.

Ms. Davis shared a graph showing the percentage of vaccine administered by county in the state as of December 27, 2020. Kitsap is fifth out of 39 counties, with 40.2% of vaccine administered of the allocation received.

As of January 2, 12 Kitsap County healthcare organizations are enrolled in the state's vaccination program. Five providers have received and administered the vaccine. An additional 10 providers in Kitsap County have completed the enrollment process and their application is pending and 17 providers have initiated applications.

Ms. Davis thanked the enrolled COVID-19 vaccine providers for their hard work to administer vaccines quickly in Kitsap.

She noted the challenges providers are experiencing:

- Not enough providers are enrolled
- Inconsistent and abrupt allocations
- 2 different vaccines
- Adverse reaction monitoring
- Liability concerns
- Data entry

- Access to data
- Communications, information-sharing, coordination
- Competing priorities (healthcare, testing, vaccines, etc.)

The Health District's long-term goal is to get 271,000 Kitsap County residents immunized. DOH's goal is to have most people in Washington vaccinated by mid-summer, which will take a large community-wide effort. Ms. Davis said we need the help of healthcare partners and our entire community to reach these goals.

Ms. Davis introduced Amanda Tjemsland, Epidemiologist. Ms. Tjemsland said the Health District's Assessment and Epidemiology team created a comprehensive dashboard of COVID-19 data at the start of the pandemic and recently introduced a new vaccine data dashboard to the Health District website. Ms. Tjemsland shared how to find the new dashboard and understand the vaccine data in Kitsap.

Ms. Guidry shared the Health District's role in vaccination rollout. The Health District provides technical assistance to enrolled providers and providers wanting to enroll; connects Phase 1a recipients to enrolled providers to ensure coverage; monitors and administer data and identifies gaps; coordinates healthcare community emergency vaccination response efforts; stays informed of local, state, and federal efforts; and shares information with public and partner agencies.

She said there is also a local focus on equity. The Health District is doing outreach and updating its website with information frequently and has a dedicated provisional Community Outreach Specialist whose priority role is to focus on equity and to establish a community advisory board. Ms. Guidry noted community engagement is important to this process and encompasses a community advisory board, local equity related meetings, key informant interviews and encouraging participation in the DOH collaborative.

Ms. Guidry shared a variety of ways the Board can help: stay informed; share accurate information and help curb the spread of misinformation; advocate for local funding and ways to address challenges; and encourage local healthcare providers to enroll as vaccine providers.

Ms. Guidry also shared ways local Kitsap agencies can help: continue to prevent the spread of COVID-19 by following public health guidelines – wear masks, stay home when sick, avoid large gatherings and gatherings with people outside our household, get tested if you have symptoms; and continue being patient with public health.

Commissioner Gelder asked if provider enrollment depends on their ability to handle each kind of vaccine, such as ultra-cold storage for the Pfizer vaccine. Ms. Davis explained providers are enrolling to be COVID-19 vaccine providers in general. DOH will determine which vaccine providers will get, how much and when they will receive it. DOH asks about storage capabilities during enrollment.

Commissioner Gelder asked if that 9,500 number for Phase 1a in Kitsap refers to individuals or doses, since two doses are recommended per person. Ms. Davis said that refers to the number of

individuals needing the vaccine, not the total number of doses needed. She also said DOH is automatically ordering second doses for facilities that have already received and administered first doses.

Commissioner Gelder asked how the Health District knows which pharmacies are receiving vaccines and when. Dr. Morrow said DOH informed the Health District on January 4 that they will provide notification this week about which pharmacies will be receiving vaccines and when. Commissioner Gelder asked if the Health District is receiving the notification at the same time as providers. Ms. Guidry said DOH provides an allocation spreadsheet that the Health District has access too, but DOH does not notify the Health District at the same time as providers. The Health District finds out about deliveries from the providers.

Commissioner Gelder said there still seems to be a lack of communication from the state. He said the system for vaccine distribution should have been built from the bottom up rather than the top down. He also said the state should have been enrolling providers far in advance to be prepared for vaccine rollout. He added that it seems like it is falling on local public health to get providers enrolled, which is frustrating.

Mayor Erickson said she is also frustrated. She said we don't know who is getting vaccines and when, so elected officials are unable to share this information with their constituents. She said she doesn't understand why it is confidential which providers get vaccines and when. She asked why the decision to move to Phase 1b can't be made locally. Mr. Grellner explained that vaccine administration is bottlenecked because the number of enrolled providers who are receiving vaccine is low. He noted the only counties who are providing more vaccines than Kitsap have a smaller population than Kitsap. He also added that Ms. Guidry and Ms. Davis's constant communication and coordination with providers is why Kitsap is ahead of other counties similar in population size to us in vaccine distribution. He said the state is running the vaccine program right now. He said the lack of help at the federal level is creating difficulties at the local level. Mr. Grellner said the Health District can ask the state for support to move to the next phase but noted if the District strays from the state plan, there is a chance the state may not provide as much vaccine to us down the road.

Deputy Mayor Deets asked if there is a timeline for when young people can be vaccinated. Ms. Davis said her understanding is that clinical trials are underway for those under 16. She said we should have more information on this soon.

There was no further comment.

ADDITIONAL BOARD DISCUSSION AND ADJOURN

Mayor Erickson asked if the Board could meet twice a month for a while. Commissioner Garrido agreed that this is valuable information to get more frequently.

Mayor Putaansuu said he was concerned that pulling public health staff off their work to present to the Board more frequently may be a disservice to the community.

There was no further business; the meeting adjourned at 11:59 p.m.

Charlotte Garrido
Kitsap Public Health Board

Keith Grellner
Administrator

Board Members Present: *Deputy Mayor Joe Deets; Mayor Becky Erickson; Commissioner Charlotte Garrido; Commissioner Robert Gelder; Mayor Robert Putaansuu; Mayor Greg Wheeler; Commissioner Ed Wolfe.*

Board Members Absent: *None.*

Community Members Present: *See attached.*

Staff Present: *Amy Anderson, Public Health Educator, Public Health Emergency Preparedness and Response; Sarah Beers, COVID Emergency Operations Coordinator, Public Health Emergency Preparedness and Response; Angie Berger, Administrative Assistant, Administration; Holly Bolstad, COVID Community Outreach Specialist, Public Health Emergency Preparedness and Response; Elizabeth Davis, COVID Vaccine Public Health Nurse, COVID-19 Program; April Fisk, Program Coordinator 2, Communicable Disease; Yolanda Fong, Director, Community Health Division; Keith Grellner, Administrator; Jessica Guidry; Program Manager, Public Health Emergency Preparedness and Response; Grant Holdcroft, Program Manager, Pollution Identification and Correction; Karen Holt, Program Manager, Human Resources; Lyndsey Kellum, Program Coordinator, COVID-19 Program; Melissa Laird, Manager, Accounting and Finance; Anne Moen, Public Health Educator, Public Health Emergency Preparedness and Response; Megan Moore, Community Liaison, Chronic Disease Prevention; Michael Moore, Disease Investigation Specialist, COVID-19 Program; Dr. Gib Morrow, Health Officer, Administration; Crystal Nuno, Environmental Health Specialist 2-RS, Solid and Hazardous Waste; Tatiana Rodriguez, Communications Specialist, COVID-19 Program; Kelsey Stedman, Program Manager, COVID-19; Amanda Tjemsland, Epidemiologist, Assessment and Epidemiology; Denise Turner, Senior Accounting Assistant, Payroll.*

Kitsap Public Health Board Meeting (Virtual Attendance)

Webinar ID **Actual Start Time**
 813 4256 1697 1/5/2021 9:50

First Name	Last Name	First Name	Last Name
Ross	Abbott	Kim	Marzano
Rick	Alway	Jessica	Mielke
Amy	Anderson	Joe	Minore
Kris	Avery	Anne	Moen
Lynn	Beeman	Michael	Moore
Sarah	Beers	Megan	Moore
Lisa	Birkenfeld	E	Moore
Holly	Bolstad (she/her)	Pat	Neumann
Lisa	CKESP	Diana	Noonan
John	Clauson	Crystal	Nuno
Douglas	Dance	Jessie	Palmer
Katherine	Dickerson	Warren	Penny
Marcia	Dokken	Abby	Phenix
Ivy	Edmonds-Hess	KIRO	Radio
Bremerton	Fire	Kevin	Ransier
Yolanda	Fong	Tatiana	Rodriguez
Madelyn	Fox	Jennifer	Roger
P	Genaux	Lisa	Salisbury
Karen	Goon	Katharine	Shaffer
Tammy	Green	Stacey	Smith, Kitsap Aging
Sheila	Guizzetti	Sheila	Spiker
Jennifer	Haro	Sandra	Starnes
Matt	Hebard	Kelsey	Stedman
D	Hermoso	Anna	Stenwick
Dan	Hinmon	Richard	Stoll
Grant	Holdcroft	Helen	Stoll
Karen	Holt	Norma	Summer
Lyndsey	Kellum	Wendy	Tedford
Maggie	Kizer	Denise	Turner
J	Knapp	Diane	Van Summern Bachen
John	Koch	Pat	W
Melissa	Laird	Raedelle	Wallace
Nancy	Langwith	Doug	Washburn
Monte	Levine	Linette	Zimmerman
Kristine	Libby	Sandra	
Barb	Lindstrom	Liz	
Joshua	Loomis	Leeann	
T	M	Pierre	
Austen	MaCalus (Kitsap Sun)	Jill	
Richard	Neumann		

MEMO

To: Kitsap Public Health Board

From: Keith Grellner, Administrator and Megan Moore, Healthy Communities Specialist

Date: February 2, 2021

Re: 2021 Legislative Session Update for Public Health

Attached, please find an updated *Legislative & Rulemaking Priorities – 2021 State Legislative Session* document for your review. This document, approved by the Health Board during the January 5, 2021, meeting, has been updated with applicable bill numbers for tracking and advocacy purposes.

Also attached, please find a “Public Health Week Two 2021” summary of public health-related bills that we are tracking through with the Washington State Association of Local Public Health Officials (WSALPHO), for which Keith Grellner is currently the President-Elect.

During today’s meeting, Megan Moore, Healthy Communities Specialist for the Health District will provide the Health Board with a brief summary of our bill tracking work. Megan is assisting Keith this year with bill tracking and legislative liaison work on behalf of the Health Board and Health District.

If you have any comments or questions, please contact me at keith.grellner@kitsappublichealth.org or (360) 728-2284.

LEGISLATIVE & RULEMAKING PRIORITIES

2021 STATE LEGISLATIVE SESSION

Updated January 29, 2021

Support Funding Foundational Public Health Services (FPHS)

Stable and ongoing funding for local health jurisdictions is essential and necessary not only to continue a local response to the COVID-19 pandemic, but to also address critical funding shortcomings in most public health programs and legally mandated services. The current [FPHS](#) funding gap for state, local, and tribal public health is \$450 million each biennium. **Support Department of Health's FPHS funding request of \$285 million for the 2021-23 biennium. Support FPHS funding bills.**

Bills to Track: [SB 5149/HB 1201](#), [SB 5371](#)

Support Coronavirus Response and Recovery Efforts

Local governments and local health jurisdictions serve key roles in our nation's response efforts to the COVID-19 pandemic. These roles include, but are not limited to: case and contact investigations, isolation & quarantine services, case management support, and vaccine planning and mass vaccination efforts. This work is still not fully funded.

Support "Contain the Spread" funding request of \$387 million GFS and \$50.5 million General Fund – Federal.

Oppose Efforts to Reduce or Eliminate Local Public Health Authority

Washington is a local control state, and RCW [70.05](#) and [70.46](#) have mandated the county legislative authority to establish and maintain a local health officer and administrator, local health board, and local health department or district for decades. Bills proposals are being considered that would reduce or eliminate local authority over public health. **Oppose efforts to reduce or eliminate local public health authority.**

Bills to Track: [HB 1152/SB 5173](#)

Oppose Reductions or Limitations on Funding for Local Health Jurisdictions

The Legislature continues to consider proposals to reduce or eliminate funding for mandated public health services. **Oppose bills that will reduce funding to local health jurisdictions.**

Oppose Bills which would Allow Potentially Hazardous Food (PHF) to be Prepared and Sold from Residential Kitchens

Existing food safety rules prohibit the preparation or selling of PHF from residential kitchens due to the lack of sanitation and time-temperature controls required to keep PHF safe. **Oppose bills which would weaken sanitation and time-temperature controls for PHF.**

Bills to Track: [HB 1258](#)



KITSAP PUBLIC
HEALTH DISTRICT

345 6th Street
Suite 300
Bremerton, WA 98337

360-728-2235 t.

kitsappublichealth.org

Public Health Week Two

[HB 1194](#) - Strengthening parent-child visitation during **child welfare proceedings**. Requires that the first visit after a child is placed outside the home of parent, guardian, or legal custodian must take place within 72 hours of removal, unless the court finds that extraordinary circumstances exist. Establishes a presumption that if the court previously ordered that visitation between a parent and a child be supervised or monitored, such supervision will no longer be necessary at certain stages of child welfare proceedings. Requires that visitation occur in the least restrictive setting and be unsupervised unless the presence of threats or danger to the child requires the constant presence of an adult to ensure the safety of the child. Scheduled for executive session in the House Committee on Children, Youth & Families at 10:00 AM on Jan 28.

[HB 1227](#) - Protecting the rights of families responding to allegations of abuse or neglect of a child. Modifies the standard used by hospitals, law enforcement, and courts to authorize **detention or removal of a child from a parent**. Requires the Department of Children, Youth, and Families to make continuing efforts to place children with relatives and requires such placement unless there is no relative capable of ensuring the basic safety of the child. Requires the court to release a child to a parent unless the court finds by a preponderance of the evidence that removal of the child is necessary to prevent imminent physical harm and that the evidence show a causal relationship between the conditions in the home and imminent physical harm to the child. Scheduled for executive session in the House Committee on Children, Youth & Families at 10:00 AM on Jan 28.

[HB 1213/SB 5237](#) - Public Hearing - Expanding accessible, **affordable child care** and early childhood development programs. Increases eligibility and decreases copayments in the Working Connections Child Care Program and expands eligibility in the Early Childhood Education and Assistance Program. Provides for increased rates, training, grants, and services for child care and early learning providers. Establishes a new account for child care and early learning purposes and includes a non-exhaustive list of allowable fund uses. Increases supports for families of children from birth to age 3 as well as their providers. HB 1213 is scheduled for executive session for exec session on Jan 27th. SB 5237 was heard in the Senate Committee on Early Learning & K-12 Education on Jan 22.

[HB 1258](#) The state department of health shall develop and begin a pilot program to allow for **microenterprise home kitchen operations**. The state department of health is authorized to permit up to 100 microenterprise home kitchen operations during the first year of the program, and up to 200 additional microenterprise home kitchen operations each year after the first year. The permit must be issued by the state department of health, in partnership with the local health jurisdiction. Scheduled for public hearing in the House Committee on Local Government at 8:00 AM on Jan 29.

[SB 5141](#) - Implementing the recommendations of the **environmental justice task force**. (Hearing January 20 was on the Proposed Substitute.) Establishes environmental justice strategic plan incorporation, equitable community engagement and public participation, tribal consultation, assessment, and budget and funding obligation requirements for the departments of Health, Ecology, Agriculture, Natural Resources, Commerce, and Transportation, and the Puget Sound Partnership. Establishes the Environmental Justice Council to adopt guidelines and provide technical assistance to support agency environmental justice work, review agency implementation of environmental justice obligations, and make recommendations on existing laws and proposed legislation to further environmental justice goals.

[HB 1161](#) - Modifying the requirements for **drug take-back programs**. The legislature intends to clearly authorize the department of health to approve and allow the operation of multiple drug take-back programs that meet other statutory requirements. Scheduled for public hearing in the House Committee on Health Care & Wellness at 8:00 AM on Jan 27.

[HB 1182](#) Enhancing and expanding **behavioral health and suicide prevention crisis response** services. Scheduled for public hearing in the House Committee on Health Care & Wellness at 10:00 AM on Jan 28.

[HB 1184](#) - Requires the Department of Health to adopt rules for **risk-based water quality standards** for the on-site treatment and reuse of nonpotable alternative water sources for nonpotable end uses. Scheduled for public hearing in the House Committee on Local Government at 10:00 AM on Jan 26 and exec session on Jan 29.

[HB 1139](#) Taking action to address **lead in drinking water**. Scheduled for public hearing in the House Committee on Education at 8:00 AM on Jan 26.

[SJM 8001](#) Requests various entities assist state and local governments in Washington with monitoring and mitigating **PFAS contamination** of surface water and groundwater. Scheduled for public hearing in the Senate Committee on Environment, Energy & Technology at 10:30 AM on Jan 26.

[HB 1152/SB 5173](#) A Gov. Inslee proposal, this bill would dismantle the current local health structure and begin work to create regionalized models. It creates a work group to develop and recommend to the DOH Secretary a public health system that provides foundational public health services to all people in Washington through **comprehensive public health districts**. HB 1152 had a public hearing in the House Committee on Health Care & Wellness on January 21.

[HB 1196](#) Requires reimbursement for **audio-only telemedicine** services. Scheduled for public hearing in the House Committee on Health Care & Wellness at 1:30 PM Jan 25 and exec session Jan 27

[HB 1201/SB 5149](#) A Gov. Inslee proposal that would **fund foundation public health services**. Beginning in fiscal year 2023, the insurance commissioner would assess health carriers, Medicaid managed care organizations, and third-party administrators for a per covered life member per month assessment of \$3.25. This assessment would generate approximately \$285M/biennium and be deposited into an account identified to fund FPHS in comprehensive public health districts. SB 5149 is expected to be the vehicle for this proposal. Scheduled for public hearing in the Senate Committee on Health & Long Term Care at 8:00 AM on Jan 27

[HB 1110](#) Concerning the **composition of local boards of health**. This proposal requires the member composition of local boards of health to expand to include four additional non-elected official members from the health care, public health, or community partner sectors. Scheduled for public hearing in the House Committee on Health Care & Wellness at 1:30 PM on Jan 25.

[SB 5114](#) Under this act businesses, facilities, institutions, and all other places or organizations whose activities would be limited or restricted under the governor's "**Healthy Washington-Roadmap to Recovery**" plan, which was announced on January 5, 2021, must be allowed to immediately and safely reopen or resume under the provisions of "Phase 2" of the "Healthy Washington Roadmap to Recovery" plan. Public hearing in the Senate Committee on State Government & Elections on January 20.

[SB 5037](#) Directs school districts and charter schools to use certain metrics during COVID-19 to determine the **education modality** for the schools in each county. Requires in-person learning in certain circumstances. Requires the Secretary of Health, State Board of Health, and local health officers to act in accordance with the education modality requirements. Prohibits emergency orders by the Governor from superseding, waiving, or suspending statutory and regulatory obligations concerning education modalities. Hearing in Senate Committee on Early Learning & K-12 Education on January 18.

[SB 5052](#) Requires the Department of Health to designate **health equity zones** based on health disparity data and work with community groups to develop projects to address inequalities. Scheduled for public hearing in the Senate Committee on Health & Long-Term Care on January 18.

[SB 5105](#) Implements recommendations of the **office of equity task force** such as requiring the Office report on barriers for community participation on boards and commissions in its October 31, 2022 report and requiring state agencies to: designate a diversity, equity, and inclusion liaison; apply an equity lens to agency decision-making; develop plans for diversity, equity, and inclusion and for language access; provide data and information to the Office; and collaborate with the Office to develop performance measures. Scheduled for public hearing in the Senate Committee on State Government & Elections at 8:00 AM on Jan 27 and exec session Jan 29.

[SB 5068](#) Extend Medicaid health care coverage from 60 days **postpartum** to one year postpartum for pregnant or postpartum persons who, on or after the expiration date of the federal public health emergency declaration related to COVID-19, are receiving postpartum coverage. Public hearing held in the Senate Committee on Health & Long Term Care on January 20.

[SHB 1074](#) Allows local health departments to establish **overdose and suicide fatality review** teams to review overdose or suicide deaths and develop strategies to prevent future overdose and suicide deaths. Substitute bill reported out of the House Committee on Health Care & Wellness on January 20 with a do pass recommendation.

[HB 1086](#) Eliminates regional behavioral health ombuds services and establishes the State Office of **Behavioral Health Consumer Advocacy** (SOBHCA) to coordinate the activities of behavioral health advocates across the state. Directs the SOBHCA to certify and coordinate the activities of behavioral health advocates throughout the state. Requires Medicaid managed care organizations to contract with the SOBHCA to reimburse it for behavioral health consumer advocacy services provided to their enrollees. Scheduled for executive session in the House Committee on Health Care & Wellness at 8:00 AM on January 27.

[HB 1256](#) - Relating to direct **sales of milk**. Exempts small producers of milk. Referred to Rural Development, Agriculture & Natural Resources.

[HB 1345/SB 5266](#) - Concerning the regulation of **products sold to adults age 21** and over. SB 5266 is scheduled for executive session in the Senate Committee on Labor, Commerce & Tribal Affairs at 9:30 AM, but this seems in error because the bill has not been heard.

[HB 1264](#) - Requires that, by November 15, 2021, the Office of Financial Management (OFM) establish procedures, guidelines, and content and format requirements for the **Equity Impact Statement** (EIS). Requires that, by January 1, 2022, the OFM provide an EIS on certain legislative proposals that create or amend housing or health care policies. Requires that, by January 1, 2024, the OFM provide an EIS on

certain legislative proposals in six additional policy areas. Requires that, by January 1, 2025, the OFM provide an EIS on any legislative proposal on which a fiscal note is requested or at the request of a legislator. Scheduled for public hearing in the House Committee on State Government & Tribal Relations at 1:30 PM on Jan 25 and exec session on Jan 28.

[SB 5023](#) Prohibits the Department of Children, Youth, and Families from counting recent federal unemployment benefits when determining eligibility and co-payment for the **Working Connections Child Care program**. Public hearing was held in the Senate Committee on Early Learning & K-12 Education on January 15.

[SB 5204](#) Institutes a **capital gains tax** to establish the “Whole Washington Health Trust to ensure all Washington residents can enroll in nonprofit health insurance coverage providing an essential set of health benefits, including medical, dental, vision, and prescription drug benefits. Referred to the Senate Health & Long Term Care Committee.

[SB 5020](#) Requires the HCA to assess a penalty against a drug manufacturer on revenue generated from a price increase on a prescription drug that is not supported by clinical evidence and deposits the fines into the **Foundational Public Health Services Account**.

[SB 5129](#) Concerning the **possession of vapor, vapor products, tobacco, and tobacco products by minors**. Repeals civil infractions prohibiting the purchase or possession of tobacco products or vapor products by a person under the age of 18. Removes authority of a peace officer or Liquor and Cannabis Board (LCB) enforcement officer to detain a person purchasing or possessing tobacco products or vapor products to determine if they are under the age of 18. Removes authority of a peace officer or LCB enforcement officer to seize tobacco products or vapor products from a person under the age of 18. Public hearing in the Senate Committee on Human Services, Reentry & Rehabilitation January 21.

[HB 1091/SB 5231](#) Reducing greenhouse gas emissions by reducing the carbon intensity of transportation fuel (**Clean Fuels Program**). The virtual hearing was held on Thursday. This legislation is part of the Governor’s climate action agenda. Numerous environmental and business organizations testified in support of the policy, while numerous business and agricultural organizations testified against the proposal. HB 1091 executive session in the House Energy and Environment Committee on January 21.

[HB 1099](#) This bill is aimed at improving the state's **climate response** through updates to the state's comprehensive planning framework. Adds a goal of climate change mitigation to the listed goals of the Growth Management Act (GMA).

- Adds a climate change and resiliency element to the list of elements that must be included within the comprehensive plans that certain counties and cities must adopt under the GMA.
- Requires the climate change and resiliency element of the comprehensive plan of certain counties and cities to result in reductions in greenhouse gas emissions and vehicle miles traveled within the city or county adopting the comprehensive plan.
- Requires the climate change and resiliency element of the comprehensive plan of certain counties and cities to address the adverse impacts of climate change on people, property, and ecological systems.
- Requires the Department of Commerce, in consultation with other state agencies, to publish guidelines that specify proportionate greenhouse gas emissions reductions associated with

passenger cars and light trucks that must be made in certain areas of the state to achieve statewide greenhouse gas emissions reductions set forth in state law.

- Specifies the process by which the greenhouse gas emissions reduction sub-element of the climate change and resiliency element takes effect.

Requires Commerce to adopt guidance that creates a model climate change and resiliency element.

- Requires certain Regional Transportation Planning Organizations to adopt a regional greenhouse gas emissions and vehicle miles traveled reduction plan.
 - Requires the Department of Ecology to update its Shoreline Master Program guidelines to require Shoreline Master Programs to address the impact of sea level rise and increased storm severity.
- Jan 28 Scheduled for executive session in the House Committee on Environment & Energy at 1:30 PM.

[SB 5126](#) By request of Governor Inslee The **Climate Commitment Act** will cap greenhouse emissions for the largest emitting industries and direct the proceeds from the sale of greenhouse gas emission allowances to a new climate investment account. Funds from the account would go towards clean transportation, natural climate resilience solutions, clean energy transition and assistance, and emissions reduction projects. The hearing occurred on January 19 and has not been scheduled for executive session.

[HB 1084](#) - Reducing statewide greenhouse gas emissions by achieving greater **decarbonization of residential and commercial buildings**. Requires residential and nonresidential construction permitted under the 2027 State Energy Code to achieve at least a 70 percent reduction in annual net energy consumption and eliminate on-site fossil fuel combustion for space heating and water heating. Requires the Department of Commerce to adopt a state energy management and benchmarking requirement for tier 2 and tier 3 covered commercial buildings by November 1, 2021. Prohibits a natural gas utility from offering new service to any customer located outside of the area authorized in its approved certificate of public convenience and necessity as of July 1, 2021. Establishes a Statewide Clean Heat Standard for the purpose of limiting the expansion of the natural gas system for residential and commercial space and water heating and advancing the use of high-efficiency electric equipment, the production and distribution of clean fuels, and the safe and equitable transition of the natural gas system. Requires the Utilities and Transportation Commission (UTC) to establish a uniform climate protection surcharge for natural gas utilities by January 1, 2023. Jan 22 -Public hearing in the House Committee on Environment & Energy.

MEMO

To: Kitsap Public Health Board

From: Keith Grellner, Administrator

Date: February 2, 2021

Re: COVID-19 Update

During today's meeting, Dr. Morrow and I will provide the Health Board with an update on COVID-19 activity and work efforts in Kitsap County.

Attached for the Health Board's information are an email and associated materials from the state Department of Health's "Roadmap to Recovery" Phase Information Report for the week of February 1, 2021. We will discuss this report as part of our presentation for today.

Due to the Health District's extensive work to open our first community-based vaccination clinic over the past several weeks, presentation materials were not available to include in the meeting packet for today which were sent and posted on Friday, January 29, 2021. The Health Board's Meeting Materials page our [website](#) will be updated with today's presentation materials following today's meeting.

Thank you for your understanding.

If you have any comments or questions, please contact Dr. Morrow at gib.morrow@kitsappublichealth.org , or (360) 728-2260 or me at keith.grellner@kitsappublichealth.org or (360) 728-2284.

Keith Grellner

From: DOH COVID-19 External Affairs <CovidExternalAffairs@doh.wa.gov>
Sent: Thursday, January 28, 2021 1:13 PM
To: Lopiccolo, Kevin (DOHi); Unthank, Allison (DOHi); vkirkpatrick@co.jefferson.wa.us; Tom Locke; Keith Grellner; Gib Morrow; Windom, David (DOHi); Stein, Daniel (DOHi)
Cc: Fehrenbach, Lacy M (DOH)
Subject: EMBARGOED: Heads Up Roadmap to Recovery Changes and Region Phase Information
Attachments: RTR_map_SummaryTable_2021JAN28.pdf; RoadmapToRecovery-NorthwestRegion1-28-21.pdf

[CAUTION]: This email originated from outside Kitsap Public Health District. **Do not click links or open attachments** unless you are expecting this email. If you are unsure please contact IT.

Greetings,

This is an heads up that this afternoon at 2:30, the Governor will announce that regions now need to meet any **three of the four metrics** outlined in the Roadmap to Recovery plan in order to move from Phase 1 into Phase 2. The four metrics have not changed and include:

- Trend in 14-day rate of new COVID-19 cases per 100k population
- Trend in 14-day rate of new COVID-19 hospital admissions per 100k population
- Average 7-day percent occupancy of ICU staffed beds
- 7-day percent positive of COVID-19 tests

In addition, **DOH will calculate regions' metrics to determine phase status every two weeks** from now on.

DOH is releasing region status today, Thursday, to coincide with the Governor's announcements. Going forward, DOH will reassess the metrics for all eight (8) regions every two weeks and announce any phase adjustments on Friday. The next announcement will be Friday, February 12, 2021.

Please see the attached letter for your county's phase determination effective Monday, February 1, 2021 in accordance with [Governor Inslee's Healthy Washington – Roadmap to Recovery plan](#). A summary map and table with statewide metrics for this week is also attached. Please see the link above for additional details on the metrics. **This information is embargoed until the publicly announced by DOH and the Governor's office this afternoon.**

Thank you.

COVID-19 Guidance & External Affairs Team

Washington State Department of Health

CovidExternalAffairs@doh.wa.gov

360-236-4501 | www.doh.wa.gov

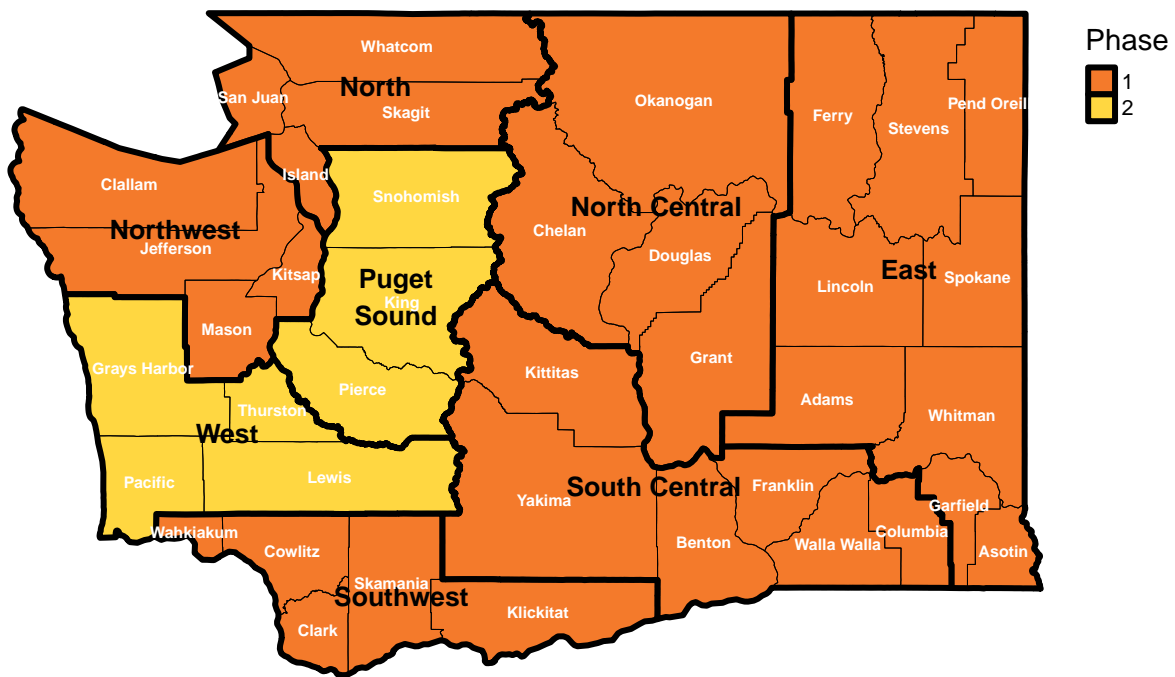


Roadmap to Recovery Report

Washington State Department of Health

January 29, 2021

Phases by Region as of February 01, 2021



Metrics by Region



Metric:		Trend in 14-day rate of new COVID-19 cases per 100K population ^{1, 4}	Trend in 14-day rate of new COVID-19 hospital admissions per 100K population ^{2, 4}	Average 7-day percent occupancy of ICU staffed beds ^{2, 5}	7-day percent positive of COVID-19 tests ^{1, 3, 6}
Time period:		2020-12-20 to 2021-01-02 vs. 2021-01-03 to 2021-01-16	2020-12-27 to 2021-01-09 vs. 2021-01-10 to 2021-01-23	2021-01-17 to 2021-01-23	2021-01-03 to 2021-01-09
Region	Phase as of 2021-02-01				
East	Phase 1	+22%	-16%	76%	18%
North	Phase 1	+69%	+16%	58%	9%
North Central	Phase 1	-2%	+41%	84%	14%
Northwest	Phase 1	+20%	+16%	71%	9%
Puget Sound	Phase 2	+4%	-16%	84%	9%
South Central	Phase 1	-1%	-29%	87%	22%
Southwest	Phase 1	+13%	+17%	66%	21%
West	Phase 2	+15%	-10%	82%	9%
Statewide		+9%	-12%	80%	10%

1. Data source: Washington Disease Reporting System

2. Data source: WA HEALTH

3. Data source: WA Department of Health negative labs dataset

4. Decrease is -10% or more; flat is between 0% to less than -10%; and increase is more than 0%

5. Low is less than 90%, high is 90% or more

6. Low is less than 10%, high is 10% or more



STATE OF WASHINGTON
DEPARTMENT OF HEALTH

PO Box 47901 • Olympia, Washington 98504-7901
Tel: (360) 236-4500 • FAX: (360) 586-2655 • TDD Relay Service: 711

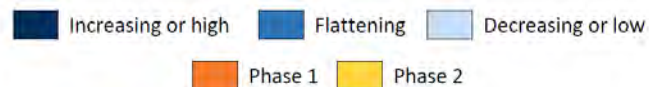
January 28, 2021

Northwest Region Public Health Leadership,

The purpose of this email is to inform you that your counties will be in Phase 1 of Washington's Roadmap to Recovery plan effective February 1, 2021. This information is embargoed until publicly released by the Department of Health and the Governor's office.

Your regional metrics as of January 28, 2021 are as follows:

Metric:		Trend in 14-day rate of COVID-19 cases per 100K population	Trend in 14-day rate of new COVID-19 hospital admissions per 100K population	Average 7-day percent of ICU staffed bed occupancy	7-day percent of positive COVID-19 tests
Time period:		12/20/20–1/2/21 vs. 1/3/21–1/16/21	12/27/20–1/9/21 vs. 1/10–1/23/21	1/17–1/23/21	1/3–1/9/21
Northwest Region	Phase 1	+20%	+16%	71%	9%



Please visit [Governor Inslee's website](#) to learn which activities are permitted in your current phase. You can also refer to the most current [Healthy Washington – Roadmap to Recovery report](#), which includes details on how these metrics are calculated. If you have any questions about these activities, the metrics, or need technical assistance, please email CovidExternalAffairs@doh.wa.gov.

The Department of Health will reassess the metrics every two weeks and will inform you of any changes to your current phase status. As a reminder, three of the four metrics must be met in order to move forward from Phase 1 to Phase 2. In order to remain in Phase 2, a region must continue to meet at least three of the four metrics. If your region is in Phase 2 and no longer meets at least three of the metrics, you will move back to Phase 1.

Thank you for your continued partnership and dedication to public health.

Lacy M. Fehrenbach, MPH, CPH

Gender Pronouns: She/Her

Deputy Secretary

COVID-19 Response

Washington State Department of Health

lacy.fehrenbach@doh.wa.gov