

KITSAP PUBLIC HEALTH BOARD MEETING AGENDA

The Kitsap Peninsula is home of sovereign Indian nations, namely the Suquamish and Port Gamble S'Klallam Tribes

May 3, 2022 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 Mayor Greg Wheeler, Chair	
12:31 p.m.	2.	Approval of April 5, 2022, Meeting Minutes Mayor Greg Wheeler, Chair	Page 5
12:32 p.m.	3.	Approval of Consent Items and Contract Updates <i>Mayor Greg Wheeler, Chair</i>	External Document
12:34 p.m.	4.	Public Comment – PLEASE SEE NOTES ON PAG Mayor Greg Wheeler, Chair	GE 2 OF AGENDA
12:44 p.m.	5.	Health Officer and Administrator Reports Dr. Gib Morrow, Health Officer & Keith Grellner, Administrator	dministrator

DISCUSSION ITEMS

12:50 p.m.	6.	2022 County Health Rankings Amanda Tjemsland, Epidemiologist	Page 15
1:05 p.m.	7.	Chronic Disease Program Spotlight Dana Bierman, Chronic Disease Program Manager	Page 29

ACTION ITEMS

1:20 p.m. 8. Resolution 2022-06, Declaring May 2022 as "Kitsap Moves Month" and Supporting the Kitsap Moves Campaign

Dana Bierman, Chronic Disease Program Manager Page 41



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1:25 p.m. 9. Public Hearing: Ordinance 2022-01, Environmental Health

Enforcement Ordinance Amendment

John Kiess. Environmental Health Director

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1:45 p.m. 10. Adjourn

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

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 <u>BKAT website</u> 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 Join the Zoom Meeting

To join the meeting online, please click the link below from your smartphone, tablet, or computer:

https://us02web.zoom.us/j/86186052497?pwd=TXcrQU1PRWVVVHgyWERXRFluTWloQT09

Password: 109118

Or join by telephone: Dial: +1 (253) 215-8782

Webinar ID: 861 8605 2497

Information & Directions for 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 <u>if they are attending the meeting via Zoom</u>.

^{*}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.

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As this meeting is a regular business meeting of the Health Board, verbal public comment to the board will have a time limit so that all agenda items will have the opportunity to occur during the meeting. Each public commenter will receive a specific amount of time to speak to the board as determined by the Chair based on the number of public commenters for the meeting.

Written comments may be submitted via regular mail or email to:

Regular Mail: Email:

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

healthboard@kitsappublichealth.org

All written comments submitted will be forwarded to board members and posted on the Health Board's meeting materials webpage at https://kitsappublichealth.org/about/board-meetings.php.

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 is 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 is 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. NOTE: If you have used your telephone to access the Zoom meeting, **you may press *6** to mute/unmute yourself.

Time Limit: Each speaker testifying or providing public comment will be limited to a time period specified by the Chair.

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

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

Closed Captions/Live Transcripts are available. On the bottom of your zoom window, click the button to turn on/off captions. You can adjust the way captions appear on your screen in settings. Please be aware, captions are auto-generated by Zoom and may contain errors.

This is a public meeting of the Health Board. It is expected that people speaking to the board will be civil and respectful. Thank you for your cooperation.

KITSAP PUBLIC HEALTH BOARD MEETING MINUTES Regular Meeting April 5, 2022

The meeting was called to order by Board Vice Chair Commissioner Robert Gelder at 10:30 a.m.

REVIEW AND APPROVE AGENDA

There were no changes to the agenda.

BOARD MEETING MINUTES

Commissioner Charlotte Garrido moved, and Mayor Rob Putaansuu seconded the motion to approve the minutes for the March 1, 2022, regular meeting. The motion was approved unanimously.

CONSENT AGENDA

The April consent agenda included the following contracts:

- 2054 Amendment 2 (2232), People's Harm Reduction Alliance, Secondary Syringe Exchange
- 2170 Amendment 2 (2230), Peninsula Community Health Services, COVID-19 Mass Vaccination Plan
- 2178 Amendment 2 (2237), Kitsap County DEM (KCDEM), COVID-19 Mass Vaccination Plan
- 2203 Amendment 2 (2238), WA State Department of Health, Consolidated Contract
- 2203 Amendment 3 (2249), WA State Department of Health, Consolidated Contract

Commissioner Ed Wolfe moved and Commissioner Garrido seconded the motion to approve the consent agenda, including the Contracts Update and Warrant and Electronic Funds Transfer Registers. The motion was approved unanimously.

PUBLIC COMMENT

Vice Chair Gelder allowed each person 2 minutes for public comment.

Shannon Shroeder, a member of the Kitsap ERACE (Equity, Race, And Community Engagement) Coalition, shared that she is following up on a letter that was sent to the board last month. She said the ERACE coalition calls on the Health Board to take advantage of requirements of House Bill 1152 to equip the board with diversity of expertise and lived experience through the addition of non-elected board members. She said she is glad to see this discussion is on the agenda for today's meeting and would like to thank the Policy Committee members for actively seeking applicants for the non-elected board members and looks forward to seeing a race and equity lens used in this recruitment process. Ms. Schroeder said she expects the board to have representation by individuals who have experienced health disappearances and

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inequity. Lastly, she said, if completed correctly, this process will ensure communities that have been traditionally and systemically underserved will have an equal voice on the Kitsap Public Health Board.

There were no further public comments.

HEALTH OFFICER/ADMINISTRATOR'S REPORT

Health Officer Update:

Dr. Gib Morrow, Health Officer, shared with the board that he appreciated the public comment. Dr. Morrow also shared that this meeting marks the first meeting in two years where there is not an exclusive COVID-19 update on the agenda. He shared that the Kitsap Public Health Weekly Outlook, which was focused on COVID-19, had its last edition on Friday.

Dr. Morrow shared that the Health District and Emergency Operations Center are planning a thank you event for vaccination volunteers later this month. He said volunteers collectively logged thousands of hours of vaccination work over the past two years. Dr. Morrow also shared that, within the first year of availability, 70% of Kitsap residents have gotten vaccinated. For the past year, Kitsap County and all their vaccinators have delivered about 1,000 doses a day to Kitsap residents. Dr. Morrow expressed his thanks to those who got shots, gave shots, helped with testing work and many other COVID-19 related efforts.

Dr. Morrow said the Health District's Emergency Preparedness team is working with the Emergency Operations Center to perform an after-action assessment of local agencies' response efforts to the pandemic to provide an understanding of what we should learn from our response. He asked the Health Board and Kitsap Public Health District's partners to keep an eye out for the surveys and to please take the time and effort to respond. He shared that he anticipates the lessons learned will create a springboard for the assessment of our health systems, health care, access to social support networks and the ability to meet the needs of all residents in Kitsap County. These surveys will help inform the District's strategic planning that they hope to initiate later this year once a new health board is established.

Dr. Morrow urged the board to look at board member recruitment through an equitable lens. He let the board know that this pandemic, like other infectious diseases impacted our most vulnerable populations disproportionately.

Dr. Morrow reminded the board that this week is National Public Health Week and extended his gratitude to the members of the Health Board and the Kitsap Public Health employees. He shared that yesterday's Public Health Week theme was racism as a public health crisis. Dr. Morrow thanked the health board for unanimously passing Resolution 2021-01, Declaring Racism a Public Health Crisis, and let the board know that they would be hearing from Ms. Jessica Guidry, the Kitsap Public Health Equity Program Manager, later in the meeting. He said the board would hear about the Equity Program which is geared toward disparities in health. Dr. Morrow shared that he understands that relationships and partnerships are key components in public health and in government in general. He said these partnerships need to be grounded in effective

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communications and noted widespread and timely distribution of accurate information is integral to everything done in public health. This pandemic pushed the Health District to expand and improve these efforts. Dr. Morrow explained that Kitsap Public Health learned that communication is much more than just messaging and requires active public listening and engagement along with open lines of communication.

Dr. Morrow said the Equity and Emergency Preparedness programs within the Health District are working closely and are embedded in the long-term environmental health and community health services at the Health District. These programs work on training and assist efforts in partnerships, development and in communication as well as provide technical expertise. The Epidemiology program also does work in this area. Dr. Morrow is looking forward to tackling the major challenges of working toward improved containment, and potentially the ultimate elimination, of chronic endemic to infectious diseases such as Tuberculosis, Hepatitis and Syphilis. Additionally, the Epidemiology team has done a lot of work to improve sentinel surveillance systems for early detection of COVID-19. Dr. Morrow said the Epidemiology team also monitors trends in mental health, substance abuse, chronic disease, injury, and other disorders of public health importance.

Next, Dr. Morrow congratulated the City of Poulsbo, who was awarded \$600,000 and the City of Port Orchard who was awarded \$650,000 for the Complete Streets Funding geared towards safety and public transportation in their cities. He shared that these amounts exceeded other county amounts. Dr. Morrow shared that the Health District's Chronic Disease Prevention Program worked with the city planners to develop an application for these packages. He noted that the City of Bremerton received this funding previously and wasn't eligible this time.

Dr. Morrow concluded with information on the recently released 2021 Healthy Survey data. This data shows ongoing high stress and depression levels in our middle and high school students. He said that on the upside, youth has reported using substances at a much lower rate than previous years. He explained that these drops were due to different variables, with the most significant variable being the social distancing that occurred during the pandemic. He noted that policy may have contributed to this change, such as the state law bringing the Tobacco use age up to 21 and the Kitsap Public Health Ordinance in 2016 regarding vaping in public places.

Administrator Update:

Mr. Keith Grellner, Administrator, addressed the public comment from Ms. Schroeder and the ERACE coalition. He shared that the email that Ms. Schroeder referred to was sent to the Board of County Commissioners and that he would send the email out to the full Health Board as soon as the meeting concludes.

Mr. Grellner shared that in the board packet there is a memo from Environmental Health Director, John Kiess. This memo concerns an update to Ordinance 1996-9, which is a catch all ordinance for Environmental Health to allow investigation and enforcement for state rules that are not locally codified. The Health District is going through the public notification and comment process and will bring an updated ordinance to the board next month.

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Mr. Greller said the Board's Policy Committee has been meeting regarding E2SHB 1152, concerning comprehensive health districts and health boards. He said another Policy Committee meeting is scheduled to follow up on the results of today's discussion.

2021 WATER QUALITY REPORT

Mr. Grant Holdcroft, Pollution Identification and Correction Program (PIC) Manager, approached the Board with a presentation regarding the 2021 Water Quality Report along with some highlights from his department in the past year. He said the primary program functions include monitoring streams, lakes and beaches; investigating complaints of pollution from septic systems and farms; and finding pollution in Puget Sound directly. PIC uses water samples to evaluate the quality of surface water and notify the public with information on public health risks as needed. These functions keep our streams, swimming beaches, and shellfish for use by the public.

Mr. Holdcroft explained that a majority of program work revolves around responding to reports of pollution. The program works to educate property owners on how to address pollution issues as soon as possible. Mr. Holdcroft also said the PIC program conducts regular sampling of our streams and has a shoreline survey program that collects water samples from shoreline discharges to find and correct sources of E Coli bacteria.

Mr. Holdcroft then shared the 2021 Water Quality Report. This report covers 2021 PIC program highlights, health advisories for streams, water quality monitoring results and standards, lake water quality results, and pollution prevention information. He shared information about Kitsap County shellfish harvesting area improvements to show how the PIC program work has historically improved water quality which has resulted in a significant increase in approved shellfish harvest acreage. He said the Health District posts public health advisories for streams which have unsafe bacteria levels. The advisory standard has changed this year to incorporate changes in the State water quality standards. Mr. Holdcroft also shared the standards for freshwater streams, which are based on "primary contact", waters where people participate activities such as wading or swimming. He shared that this standard changed in phases over the last several years from monitoring fecal coliform r to monitoring E coli in order to be more health-based in keeping everyone safe in the water.

Mayor Erickson asked why the state now tests for E Coli instead of Fecal Coliform. She also asked what differences are made to understand if something is doing better over time. She said it is difficult to see the historical trend if the standards are continually changed. Mr. Holdcroft replied that it was changed because Environmental Protection Agency adopted new rules a few years ago for a unified standard across the whole nation and noted Washington State had been using a different standard until this year. Mr. Holdcroft also explained that there is data that shows a correlation between E Coli and adverse health effects.

Mayor Erickson asked if the change in standards makes our standards more rigorous. Mr. Holdcroft replied that it was the same, in a different way. He let her know that she is correct and

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that we are not able to analyze our data for trends at this time, however, with this bacteria standard, the program is establishing a new data set and he hopes that next year he can provide trends. Mr. Holdcroft explained that the PIC program had many discussions about this standard with several different entities and is hopeful that the Health District can start establishing a new data set.

Mr. Holdcroft explained that more streams met standards in 2021 for Kitsap County than in 2020. Mr. Holdcroft shared anecdotes about helping people fix their septic systems and address pollution sources in the Chico Bay Watershed. Mr. Holdcroft explained the lake water quality monitoring program, and explained how the Health District issues advisories for lakes during the summer that are unsafe to swim in due to high bacteria counts. Mr. Holdcroft explained that some of this pollution comes from wildlife waste and pet waste. He explained the educational attributes of the programs along with aiding homeowners, such as checking to make sure their septic tanks were properly maintained.

Mr. Holdcroft concluded by letting the board know that the 2021 Water Quality Report is available on the Kitsap Public Health website for this year and all previous years.

There was no further comment.

LOCAL BOARD OF HEALTH MEMBERSHIP CHANGES IN RESPONSE TO E2SHB 1152 POLICY COMMITTEE REPORT AND RECOMMENDATIONS

Mr. Grellner shared a presentation to provide an overview of the work that the Board and Health District have completed on implementation of E2SHB 1152 so far. He shared that E2SHB 1152 was requested by the Office of the Governor and was passed in during the 2021 legislative session. Mr. Grellner explained that when this passed through the legislative system it created new requirements for the local board of health memberships. He said the Governor and legislators intended to expand local boards of health to get more community engagement.

Mr. Grellner went on to explain that the new law requires equal representation by elected and non-elected members. It also requires representation from federally recognized Indian tribe(s) within the Health Board's jurisdiction. Mr. Greller explained that the bill requires the non-elected/non-tribal members to come from a prescribed list of categories which include health care, consumers of public health and community groups. He said most health boards in Washington have been comprised of only elected board members was as specified in the original statute. Mr. Grellner explained that the state Board of Health is still working on the administrative code for this and are considering adopting WAC 246-90 at their May meeting. He explained that the tribal representation will be determined by the American Indian Health Commission.

Mr. Grellner explained that the bill, the new statue, and the WAC are prescriptive. Mr. Grellner listed out the requirements for Kitsap County. The health board will be required to amend the board bylaws which are in the packet today. It requires that the Board of County Commissioners and Board of Health work together to recruit new members. This will become effective on July

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1, 2022. He noted Health District staff and the board are making good progress to meet the timeline.

Mr. Grellner updated the board on the progress to date and explained the next steps, which are based around interviews and deciding how to do those interviews. Mr. Grellner also explained the next steps outside of interviews and position descriptions. He explained that there will likely be two orientations for the new board members: one from the State of Washington and one from Kitsap Public Health.

Mayor Putaansuu asked if there will be geographic equity of the new board members within the county. Mr. Grellner said that is the goal and the Health District is trying to put the pieces together based on the law and the specifics of the code. Mayor Putaansuu asked about if there was a hierarchy for the non-elected members. Mr. Grellner explained that there is no hierarchy and categories are specifically listed in the bill and code. Appointments to fill each category will come down to the interaction between the Board of County Commissioners and Health Board.

Mayor Erickson requested an explanation on how the existing board is being paired down. Commissioner Gelder explained that there must be equal numbers between elected members. He explained that, as the board currently stands, this would make a new board of 14 members, which he considers too large for a good working board.

Mayor Putaansuu agreed with the idea of a manageable board. He compared it to the Kitsap 911 board which he said was too big and he doesn't want to go down that path creating an awkward board composition.

Mr. Grellner explained that the Policy Committee recommended the Personnel Committee do the interviews. Commissioner Gelder reminded the group that the Personnel Committee will change once the Health Board membership changes.

Commissioner Gelder asked if the board wants other people to help with the interviews. Mayor Erickson thought that Mr. Grellner and Dr. Morrow should help with the interviews. She suggested as the new board is convened, the board can review how it's structured.

Councilwoman Hytopoulos inquired if the Mayor of Bainbridge or another councilmember could sub in for her if there are scheduling difficulties with Personnel Committee. She explained that she works a full-time job, separate from her council duties, and wants to make sure she is available. Mr. Grellner stated that the board bylaws allow a sub for committees or board meetings, however he noted that the proxy or substitute don't an additional vote, there is only one vote per jurisdiction.

Commissioner Wolfe said he strongly feels that the administrator and health officer should be involved, and said he would like Ms. Guidry on hand to provide her equity expertise to the committee. Mr. Grellner let the board know that Ms. Guidry has put together some suggestions to look at applicants through an equity lens.

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Commissioner Gelder asked the board if they would like to do virtual or in person interviews. Mayor Erickson would prefer virtual interviews to remove barriers. Mr. Grellner agreed with this decision because it provided a better opportunity with the tight timeline that we are working with.

Commissioner Gelder asked if we need to wait for the changes in county and bylaws to be changed before we begin moving forward. Mr. Greller commented that he had been thinking about this also and suggested that they work to get some appointment holders on calendars. He does not think there is anything preventing the board from moving forward with the interviews before the county code and bylaws are completed. He suggested scheduling interviews for days in mid to end of May and early June.

Councilwoman Hytopoulos said a mental health professional would be a great aspect to the new board. Commissioner Gelder agreed, and Mr. Grellner let the board know that mental health professionals are included under the health care category. Mr. Greller stated that he thinks this is a great suggestion.

Mr. Grellner asked if there were any comments on any of the bylaws or position descriptions that were provided to the board. Mr. Grellner encouraged board members to email him any feedback and said staff will work it through the policy committee. Commissioner Gelder asked for any edits be to Mr. Grellner by noon tomorrow.

Councilwoman Hytopoulos would like to see the mental health professional called out in the description of the board member.

There was no further comment.

RESOLUTION 2022-05: ADOPTING LAND ACKNOWLEDGEMENT STATEMENT FOR KITSAP PUBLIC HEALTH BOARD MEETINGS

Ms. Guidry shared that the Kitsap Public Health District executive leadership team proposes board adoption of a Tribal Land Acknowledgement statement. Mrs. Guidry said this was outlined in the memo included in their meeting packets. The Health Board Policy Committee met in March to discuss this matter and recommended that the full health board consider adopting a land acknowledgement statement. Commissioner Gelder reached out to the Port Gamble S'Klallam Tribe and Suquamish Tribe and both tribal chairs support the statement. Ms. Guidry presented draft resolution 2022-05, Adopting Land Acknowledgement Statement for Kitsap Public Health Board Meetings. Ms. Guidry thanked the board for their consideration of this resolution.

Mayor Erickson moved to approve resolution 2022-05, Adopting Land Acknowledgement Statement for Kitsap Public Health Board Meetings. Commissioner Garrido seconded the motion.

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Commissioner Gelder added that the language in the acknowledgement statement recognizes that while there are two tribes with reservations within our county boundaries, other tribes also have usual and accustomed areas within our county boundaries as well.

There was no further discussion, the resolution was approved unanimously.

BOARD COMMENTS

Mayor Erickson said she has been reviewing the Open Public Meeting Act (OPMA) for the City of Poulsbo. She commented that there are meetings which require a physical location. Mayor Erickson was wondering if the Health District staff had begun to consider where we will go to have in-person public testimony in meetings. She let the board know that she is not expecting an answer today, but they needed to begin thinking in this direction.

Commissioner Gelder commented that Mayor Wheeler indicated the City of Bremerton has the ability to hold these meetings at the Norm Dicks Government Center to support a hybrid formatted meeting. Mr. Gelder asked Mayor Erickson if she had seen any information on the Governor moving to enforce this act. Mr. Grellner let the board know that he has been looking for some guidance and stated that the State Board of Health is still planning virtual meetings. Mayor Erickson stated that she has not seen any guidance but was advised by the legal counsel of the City of Poulsbo that meetings where public comment is taken must be held in a physical place. Mr. Grellner explained that it was his understand that this part of the act had been suspended during the proclamations by the Governor. Mr. Grellner is going to double check on this. He stated that Mayor Wheeler is a critical component to this as the City of Bremerton operates all of that technology in the Chambers at the Norm Dicks Building.

Mayor Putaansuu concurs with Mr. Grellner, but said Port Orchard is waiting until the Government has rescinded their proclamation. Council Member Hytopoulos let the board know that they do hybrid meetings in Bainbridge Island.

There was no further discussion.

ADJOURN

There was no further business; the meeting adjourned at 11:42 p.m.

Greg Wheeler
Kitsap Public Health Board
Keith Grellner
Administrator

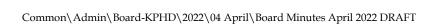
Board Members Present: *Mayor* Becky Erickson; *Commissioner* Charlotte Garrido; *Commissioner* Robert Gelder; *Councilperson* Kirsten Hytopoulos; *Mayor* Robert Putaansuu; *Commissioner* Ed Wolfe.

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Board Members Absent: *Mayor* Greg Wheeler **Community Members Present:** *See attached.*

Staff Present: Kandice Atismé-Bevins, Program Manager, Case and Contact Investigation, COVID-19; Angie Berger, Administrative Assistant, Administration; Windie Borja, Secretary Clerk 2, Support Services; Steve Brown, Program Manager, Solid and & Hazardous Waste; Stephanie Byrd, Confidential Secretary, COVID-19; Elizabeth Davis, COVID Vaccine Public Health Nurse, COVID-19; April Fisk, Program Coordinator, Contracts Manager, Public Records & Safety Officer, MAC, Administration; Keith Grellner, Administrator, Administration; Jessica Guidry; Program Manager, Equity; Grant Holdcroft, Program Manager, Pollution Identification and Correction; Karen Holt, Program Manager, Human Resources; Jakob Hughes, Environmental Health Specialist 1, Solid and Hazardous Waste; John Kiess, Director, Environmental Health Division; Siri Kushner, Assistant Director, Community Health Division; Victoria Lehto, Environmental Health Specialist 1, Pollution Identification & Correction; Dr. Gib Morrow, Health Officer, Administration; Melissa O'Brien, Environmental Health Specialist 1, Food and Living Environment.



Kitsap Public Health Board Meeting (Virtual Attendance)

Webinar ID Actual Start Time Attendance Count

861 8605 2497 04/07/2022 9:28 47

NAME NAME JOIN BY PHONE

Angie Berger (she / her) Michele 861 8605 2497
Anne Monte Levine

April Fisk Nancy Langwith
Becky Erickson Patty Lyman
BKAT Rob Putaansuu

Caroline Raganit Megan Moore (she/her)

Charlotte Garrido Michele
Curtis Woods Monte Levine
Dave Nancy Langwith
Dee Patty Lyman
Earl Smith Rob Putaansuu
Ed Wolfe Robert Gelder

Gib Morrow Sarah Kinnear# KPHD
Grant Holdcroft Shannon Schroeder

Ireland Burch# KPHD siri kushner
Irene Moyer Stephanie Byrd

Jakob steve
Jessica Guidry (she/her) Steve Brown

John Kiess - KPHD Ted Schroeder

Kandice Atismé-Bevins Venus Pettersen (she/her)

Karen Goon Victoria L.
Karen Holt Windie Borja

Keith Grellner (Keith

Grellner)

Kirsten Hytopoulos KPHD/Mel O'Brien Laura Westervelt (PIC)

Liz Davis

marci burkel (she/her) Megan Moore (she/her)



MEMO

To: Kitsap Public Health Board

From: Kari Hunter, Program Manager, Assessment and Epidemiology Program

Date: May 3, 2022

Re: 2022 County Health Rankings Released April 27

Each year since 2010, the University of Wisconsin Population Health Institute, with funding from the Robert Wood Johnson Foundation, releases County Health Rankings & Roadmaps (CHR&R) (https://www.countyhealthrankings.org/reports/2022-county-health-rankings-national-findings-report). This report and online dashboard provide health outcomes (length of life and quality of live) and health factors (health behaviors, clinical care, social and economic factors, and physical environment) data for all U.S. counties. Counties are ranked within each state by indicator, section and overall, and comparison between counties, the state and the top 10% of U.S. counties is allowed.

The CHR&R are like Kitsap Public Health District's Community Health Indicators, which were presented to you in March, in that they help raise awareness of community health, present a call to action and identify areas for more in-depth analysis, but there are some important differences. Our Community Health Indicators currently have predominantly 2020 data and will be updated as new data becomes available, while the CHR&R are updated once a year and only use data that are final, mostly 2019 for the 2022 release. Our Indicators use a combination of local, state and national data sources, while the CHR&R uses only data sources that have data for all, or almost all, counties across the U.S.

2022 Ranking:

- Kitsap's health outcomes (health of today) ranking increased from 13th to 9th in Washington state.
- Kitsap's health factors (health of tomorrow) ranking stayed the same at 4th in Washington state

Improving Trends in Kitsap:

- Decrease in those without health insurance
- Decrease in air pollution

Strengths in Kitsap:

- Low rate of adult physical inactivity
- High percentage of adults completing high school and with some college education

Worsening Trends in Kitsap:

- Increase in number of sexually transmitted infections
- Increase in number of injury deaths (all causes, all intents, including homicide, suicide, motor vehicle, falls, and poisonings)



Memo to Kitsap Public Health Board – 2022 County Health Rankings Released April 27 May 3, 2022 Page 2

New in 2022 for the CHR&R:

In addition to the data that goes into the health rankings, CHR&R publishes data on additional health outcomes and health factors that are considered important. This year, the CHR&R focused on the importance of pursuing economic security for everyone and all communities, addressing equity in the wake of the COVID-19 pandemic. This additional data focused on COVID-19 mortality, school segregation, school funding adequacy, gender pay gap, living wage, residential segregation, and childcare cost burden.

Recommended Action

None – informational only.

Please contact me with any questions or concerns about this matter at (360) 900-7025, or kari.hunter@kitsappublichealth.org.



About the County Health Rankings & Roadmaps

About the County Health Rankings & Roadmaps

- http://www.countyhealthrankings.org/
- Developed by the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute
- First released in 2010 for all U.S. counties, updates released annually but not comparable over time due to changes in definitions and sources
- Counties ranked within each state by indicators and section to allow comparison
- Data sources are national and must have data for almost all counties across the U.S.

Rankings & Roadmaps Contents:

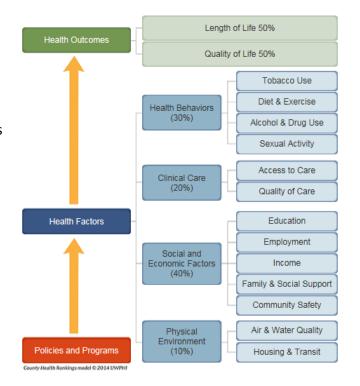
- 35 indicators in 2 sections and 6 sub-sections:
 - ➤ Health Outcomes
 - Length of life and Quality of life
 - Health Factors
 - Health Behaviors, Clinical Care, Social and Economic Factors, Physical Environment

• County Health Rankings are:

- Generated from national-level data sources
- Ranks based on comparison to other counties in the state; statistical trend over time for some measures; comparison to WA State and top 10% of U.S. counties

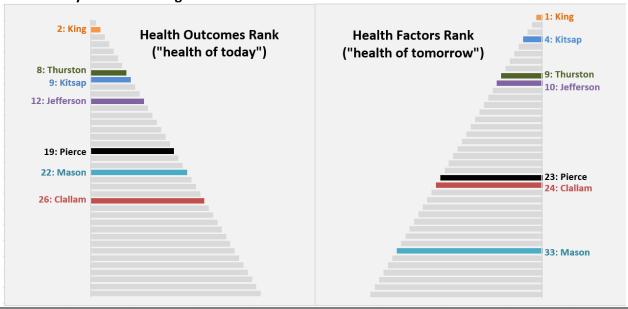
County Health Rankings and Kitsap Public Health Indicators both:

- Raise awareness of community health
- Present a call to action
- Identify areas for more in-depth analysis





2022 County Health Rankings:



Comparison to 2021 Rankings:

- Kitsap County's <u>health outcomes</u> ranking <u>increased</u> from 13th (2021) to 9th (2022) in Washington state.
- Kitsap County's <u>health factors</u> ranking <u>stayed the same</u> from 4th (2021) to 4th (2022) in Washington state.

2022 County Health Rankings Summary for Kitsap County

HEALTH OUTCOMES – KITSAP RANKS 9TH

TILALITI OOTCO		ADEAS OF	INADDOMANO	ADEAC TO	MODCENING					
	RANK	AREAS OF STRENGTH	IMPROVING TRENDS	AREAS TO EXPLORE	WORSENING TRENDS					
Length of Life	13 th		 Decrease in years of potential life lost. 							
Quality of Life	5 th									
HEALTH FACTORS – KITSAP RANKS 4 TH										
	RANK	AREAS OF STRENGTH	IMPROVING TRENDS	AREAS TO EXPLORE	WORSENING TRENDS					
Health Behaviors	7 th	 Low rate of physical inactivity 	 Decrease in alcohol- impaired driving deaths 	Adult smokingAdult obesity	 Increase in number of sexually transmitted infections (chlamydia) 					
Clinical Care	6 th	 Low rate of uninsured Access to primary care physicians Access to mental health providers Low rate of preventable hospital stays 	 Decrease in percent uninsured Decrease in ratio of population to dentists Decrease in rate of preventable hospital stays Increase in flu vaccinations 		 Increase in ratio of population to primary care physicians Decrease in percent of eligible population receiving their annual mammography screening 					
Social and Economic Factors	7 th	 High percentage of adults completing high school and with some college Low income inequality 	 Decrease in number of violent crimes 		 Increase in number of injury deaths 					
Physical Environment	7 th	 Low average daily density of fine particulate matter Low percentage of workforce that drives alone to work 	 Decrease in air pollution (PM2.5) 							

County Health Rankings website: http://www.countyhealthrankings.org/

County Health Rankings 2022

Amanda Tjemsland, MPH
Epidemiologist
Assessment & Epidemiology Program
May 3, 2022



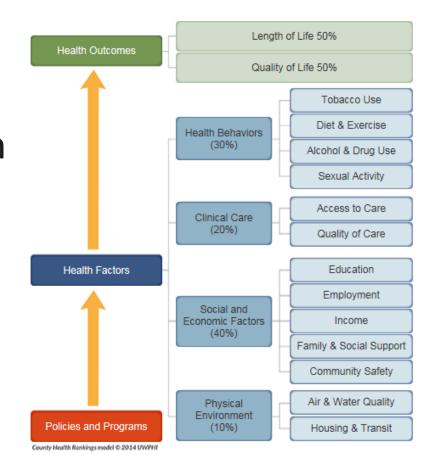


Agenda

- Overview of County Health Rankings
- Comparison of County Health Rankings and KPHD Indicators
- County Health Rankings Data

County Health Rankings

- http://www.countyhealthrankings.org
- Developed by Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute
- First released in 2010
- Data sources are national
- Rankings include 35 indicators
- Website includes additional indicators



County Health Rankings compared to KPHD Indicators

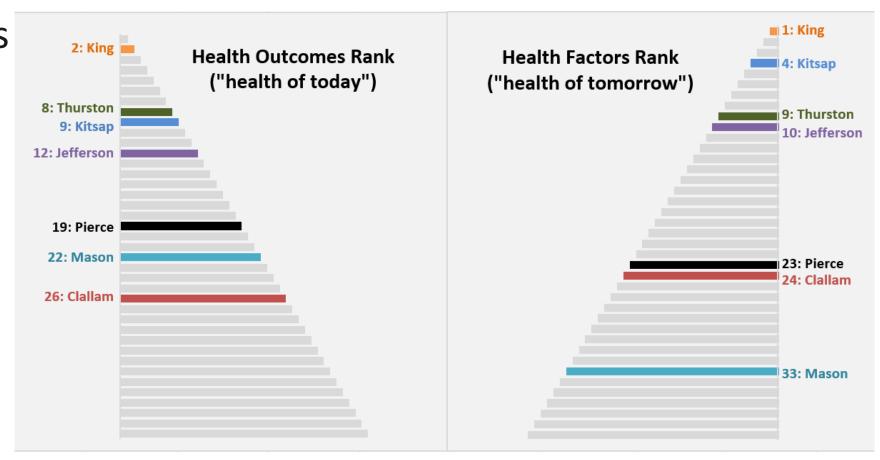
- https://kitsappublichealth.org/information/data Indicators.php
- KPHD Indicators are generated from national, state, and local data using most current data. Updated as more current data released.
- KPHD Indicators show trend over time and compare to WA state
- County Health Rankings use national-level data. Updated annually.
- Ranks based on comparison other counties, trend over time for certain measures, and comparison to WA state and top 10% US counties

County Health Rankings and KPHD Indicators

- Raise awareness of community health
- Present a call to action
- Identify areas for more in-depth analysis

Kitsap County - 2022 Health Rankings

- Health Outcomes
 Rank increased
 from 13th (2021)
 to 9th (2022)
- Health Factors
 Rank stayed the
 same at 4th



County Health Rankings Data

Improving Trends

- Decrease in percent uninsured (2019)
- Decrease in air pollution (PM 2.5) (2018)

Areas of Strength

- Adults Completing High School and with Some College (2016 20)
- Low Percent of Adults Reporting No Physical Activity (2019)

Worsening Trends

- Increase in number of sexually transmitted infections (2019)
- Increase in number of injury deaths (2016 20)

Sample of New Indicators Added in 2022

- COVID-19 Age Adjust Mortality Rate (2020)
 - Kitsap: 12 per 100,000, WA: 37 per 100,000
- Living Wage (2021)
 - Kitsap: \$39.48 hourly wage, WA: \$40.51 hourly wage
- Gender Pay Gap (2016 2020)
 - Kitsap: 0.78 cents per dollar, WA: 0.79 cents per dollar
- Childcare Cost Burden (2020, 2021)
 - Kitsap: 23% of household income, WA: 27% of household income

Questions?

Chronic Disease Prevention Program

Dana Bierman, Program Manager Megan Moore, Community Liaison

Kitsap Board of Health May 3, 2022





Agenda

- Introduction
- Programmatic Overview
 - Youth Cannabis Prevention & Commercial Tobacco Prevention Program
 - Healthy Eating & Active Living Coalition
 - Kitsap Moves Campaign

Chronic Disease Prevention Team

Dana Bierman



Sarah Kinnear









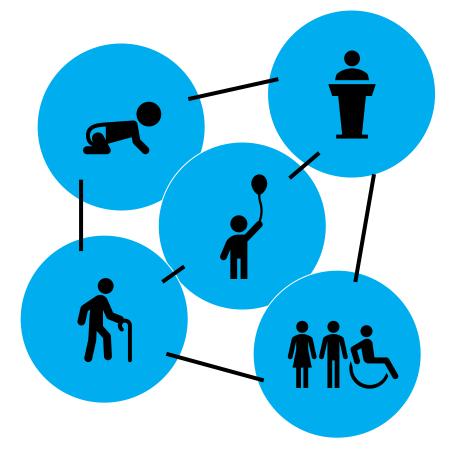


Karen Boysen-Knapp

Jill Guerrero

Chronic Disease Prevention

We work with statewide partners and community programs to provide equitable opportunities for Kitsap residents to live a healthy life.



Program Overview

Supplemental Nutrition Assistance Program Education (SNAP-Ed)



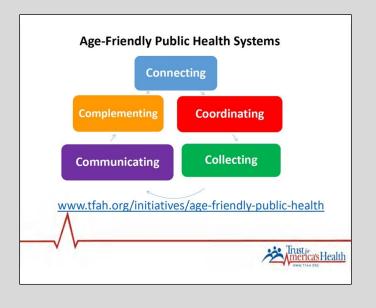
Local Strategies on Physical Activity and Nutrition (LSPAN)



Kitsapsupportsbreastfeeding.com

Program Overview, continued

Age-Friendly Public Health Systems (AFPHS)



Commercial Tobacco Prevention Program



Youth Cannabis & Commercial Tobacco Prevention Program

Goal: Create healthy environments where youth can choose NOT to use substances.

Why: Data show that youth often use substances to cope with stress, adversity, family challenges, or community pressures.

Youth Empowerment

Build youth skills, confidence, and knowledge to talk to policymakers about youth substance use, mental health, and other topics important to them.

Youth have ideas that matter. We want to amplify them to policymakers.



Healthy Eating & Active Living

Goals

- Increase equitable access to healthy foods and opportunities for active living.
- Cultivate a community that prioritizes healthy eating and active living.



kitsapheal.org

Kitsap Moves

A workgroup of the HEAL coalition focused on developing strategies that support physical activity.



OUR GOAL

Encourage Kitsap County residents to increase their movement

STRATEGY

A multi-sector approach to promote physical activity

OBJECTIVE

Increase physical activity opportunities in Kitsap County.

Join us May 2022

Campaign will run Spring and Summer of 2022.

Check out the website for free and fun physical activity events and resources.



FEATURED EVENTS







Thank you



kitsapheal.org/kitsap-moves



MEMO

To: Kitsap Public Health Board

From: Dana Bierman, Program Manager, Chronic Disease Prevention

Date: May 3, 2022

Re: Resolution 2022-06, Declaring May 2022 as "Kitsap Moves Month" and Supporting

The Kitsap Moves Campaign

Attached, please find proposed Resolution 2022-06, Declaring May 2022 as "Kitsap Moves Month" and Supporting the Kitsap Moves Campaign, for your review and consideration.

Resolution 2022-06 asks the Health Board to support a Health District campaign to encourage all Kitsap County residents to increase movement and physical activity in spring 2022 and beyond, and to declare May 2022 as "Kitsap Moves Month" to kick-off the campaign. Many community partners have come together to create "Kitsap Moves," a community events and social marketing campaign to promote increased movement among Kitsap residents. Kitsap Moves will provide information about events and opportunities for physical activity and messaging to support for physical activity.

During the pandemic, Kitsap residents participating in a Community Health and Well-Being survey reported decreased physical activity. Additionally, Healthy Youth Survey and Behavioral Risk Factor Surveillance System survey data show unhealthy rates of physical activity and overweight/obesity among youth and adults in our community. Physical activity is critical in helping improve wellbeing as it impacts risk factors that may reduce incidence of chronic disease.

The website <u>kitsapheal.org/kitsap-moves</u> will have information throughout the next couple of months on opportunities and tips to increase movement. By encouraging movement, we can help support Kitsap residents in living a healthy lifestyle. Thank you in advance for your commitment to making Kitsap County a healthy place.

Recommended Action

The Health District recommends Health Board approval of Resolution 2022-06.

Please contact me with any questions or concerns about this matter at (360) 900-8091, or dana.bierman@kitsappublichealth.org.





Declaring May 2022 as "Kitsap Moves Month" and Supporting the Kitsap Moves Campaign

WHEREAS, healthy eating and active living are identified as a <u>Kitsap Community Health</u> <u>Priority</u>; and

WHEREAS, three in four (75%) of 6th, 8th, 10th and 12th grade youth and three in five (60%) of adults in Kitsap County reported getting less than 60 minutes of physical activity every day, and one in four (25%) of 6th, 8th, 10th and 12th grade youth and two in three (67%) of adults in Kitsap County were classified as overweight or obese*; and

WHEREAS, in a 2021 online Kitsap County Community Health and Well-Being Survey, over half (52%) of the survey respondents (total 6,111) reported worsening physical fitness over the pandemic; and

WHEREAS, physical activity is important for overall health and wellbeing as it impacts risk factors that may reduce incidence of chronic disease among both children and adults; and

WHEREAS, The Centers for Disease Control and Prevention (CDC) recommends a variety of community-wide strategies from many organizations for best practices in increasing physical activity and supporting physical health; and

WHEREAS, the Kitsap Healthy Eating and Active Living Coalition developed a campaign with various community partners to encourage Kitsap residents to increase movement for overall health and wellbeing for spring 2022.

NOW, THEREFORE, BE IT RESOLVED that the Kitsap Public Health Board declares May 2022 as Kitsap Moves Month and encourages all Kitsap residents to join the campaign to increase their movement and physical activity this spring and into the future.

APPROVED: May 3, 2022

Mayor Greg Wheeler, Chair Kitsap Public Health Board

*See Chronic Disease Program Fact Sheet here.



MEMO

To: Kitsap Public Health Board

From: John Kiess, Environmental Health Director

Date: May 3, 2022

Re: Proposed Ordinance 2022-01: Updating Ordinance 1999-6 Environmental Health

Enforcement Regulations

Background

The Health Board has a current Environmental Health Enforcement Regulation, Ordinance 1996-9, originally promulgated as Ordinance 1992-15. The existing ordinance is antiquated and in need of an update. At the April 5, 2022, Board meeting, the Board was made aware of the Health District's efforts to update this ordinance.

Summary of Proposed Ordinance 2022-01

This ordinance is relevant to enable Health District staff to enforce Washington State public health laws and rules that have not been codified locally, pursuant to RCW 70.05.060(1). The proposed enforcement language in this ordinance has already been incorporated into other, more modern Health Board ordinances: *Drinking Water Supply Regulations, Solid Waste Regulations, Food Service Regulations*, etc. This ordinance provides a clear enforcement process for the Health District if Washington State public health laws or rules need to be enforced.

Health District staff solicited comments about this proposed ordinance through the Health District's electronic notification system and social media outlets. Comments on the proposed fee changes were welcomed through the Health District website, phone, or mail. Public notice of today's possible action on the changes was posted in the Kitsap Sun on April 25, 2022.

The Health District received four (4) comments about the ordinance, one in support, one with general concerns, one with grammatical edit suggestions, and one with concerns about horse boarding facilities and their regulation, please see the attached emails.

Recommended Action

The Board may wish to make and approve the following motion:

The Board moves to approve Ordinance 2022-01, Environmental Health Enforcement Regulations, effective immediately.



Memo to Kitsap Public Health Board – *Environmental Health Enforcement Regulations*May 3 2022
Page 2

Please feel free to contact me at any time regarding this ordinance update. I can be reached at (360) 728-2290, or john.kiess@kitsappublichealth.org with any questions or comments.

Attachments (4)

From: William Riplinger < BillRip@hotmail.com>

Sent: Tuesday, April 12, 2022 10:15 AM

To: Tad Sooter < <u>Tad.Sooter@kitsappublichealth.org</u>> **Subject:** proposed environmental health regulation

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The proposed regulation will establish an incredibly complex administrative and enforcement framework within the Health Department that the Department was never designed nor funded to do. Enforcement and judgements relating to it are well beyond the knowledge, scope of work and training that Health Department staff is qualified to perform.

This thing is a bad idea that is well beyond Kitsap County Health Department as we know it. When the State puts in place laws that require local administration and enforcement it is vital that the State also put in place funding, training and structures to carry the burdens of intended administration and enforcement across Washington State. The idea that every County develop its own implementing regulation and enforcement apparatus will produce inconsistent and irregular results, therefore; such is a very bad idea.

Consideration of my comments will be appreciated. Should you wish further discussion or explanation, please, do not hesitate to contact me.

Regards, William Riplinger Seabeck From: Tom Coleman < tom@ckschools.org > Sent: Tuesday, April 19, 2022 7:34 AM

To: Tad Sooter < <u>Tad.Sooter@kitsappublichealth.org</u>> **Subject:** Environmental Health Enforcement Regulations

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I support the update of health regulations to better enforce the codes protecting our waterways.

Thanks!

Tom Coleman 360-271-637

From: zeff317@gmail.com>

Sent: Tuesday, April 19, 2022 7:51 AM

To: Tad Sooter < Tad.Sooter@kitsappublichealth.org>

Subject: Environmental Health Enforcement Regulations ordinance

You don't often get email from <u>zeff317@gmail.com</u>. <u>Learn why this is important</u>

|WARNING|: Were you expecting this email? It originated from outside the Health District and <u>contains a link or attachment</u>. **Do not click links or open attachments** unless you have been waiting to receive this email. If you are unsure please contact IT.

Greetings,

Attached are my comments to the Environmental Health Enforcement Regulations ordinance.

Additions are in blue, deletions are in red.

Looks like a good start, I do not have a background in public health so some of my comments may not be valid.

If you have any questions about my comments please feel free to contact me at 360.473.6616 or e-mail me.

Respectfully,

Mike Krier

From: Joanne Corey < <u>Colenjoannecorey@q.com</u>>

Sent: Friday, April 22, 2022 4:52 PM

To: Tad Sooter < Tad.Sooter@kitsappublichealth.org>
Cc: colenjoannecorey@q.com < colenjoannecorey@q.com>
Subject: KPHD environmental enforcement update comments

[You don't often get email from colenjoannecorey@q.com. Learn why this is important at http://aka.ms/LearnAboutSenderIdentification.]

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Comments:

1. CUPs for Horse Boarding Facilities to regulate the impact and protect surrounding properties in critical areas.

Such as:

A. Animal waste, disposal and containment of, enforcement if discharged into a creek during seasonal flow and flushed onto down stream properties/farms.

- B. Storm water runoff into critical areas, especially from parking lots, barns, manure holding areas or roads.
- C. Environmental impact of quality vs. quantities of the amount of horses vs. land use and any effect on the health of surrounding properties or critical areas.
- D. Notification, Regulations and enforcement to quarantine during outbreaks of infectious disease and the effect of these outbreaks to neighbors/farms.
- E. Wash racks: enforced and required to not! be allowed to directly discharge into critical areas or onto neighboring properties/farms.
- 2. Horse Boarding Facilities should be regulated and enforced with CUPs the same or close to Pet Lodging Commercial Businesses. Even if they use "Agriculture" as a way to breed and stable, these are commercial businesses for profit, not hobby farms.

Thank you for reviewing our comments. Please let us know what the outcome is. Respectfully,

Joanne and Colen Corey

Joanne Corey

360.633.6699

Sent from my iPhone



Approving An Ordinance Updating Environmental Health Enforcement Regulations and Repealing Ordinance 1996-9

WHEREAS, the Kitsap Public Health Board has the authority and responsibility to supervise all matters pertaining to the preservation of the life and health of the people within its jurisdiction and to enforce through the local health officer or administrative officer the public health statutes of the state and rules promulgated by the state board of health and secretary of health in accordance with Chapter 70.05.060 Revised Code of Washington (RCW); and

WHEREAS, RCW 70.05.060 also authorizes the Kitsap Public Health Board to enact such local rules and regulations as are necessary in order to preserve, promote and improve the public health and provide for the enforcement thereof; and

WHEREAS, regulations governing environmental health exist to provide for and promote the health, safety and welfare of the general public, and to prevent pollution; and

WHEREAS, existing regulations are not always enforceable in a timely manner nor provide for adequate enforcement procedures; and

WHEREAS, all violations of public health regulations are detrimental to the public health, safety, and welfare.

WHEREAS, certain sections of existing ordinance 1996-9 are obsolete, need clarification or restructuring.

NOW, THEREFORE, BE IT ORDAINED, that the Kitsap Public Health Board does authorize and approve Ordinance 2022-01, *Environmental Health Enforcement Regulations*, as set forth in the attached and is hereby incorporated by reference, effective immediately, and until further notice. Bremerton-Kitsap County Board of Health Ordinance 1996-9, Environmental Health Enforcement Regulations, May 1, 1996, is hereby repealed.

APPROVED: May 3, 2022	EFFECTIVE: May 3, 2022
Mayor Greg Wheeler, Chair Kitsap Public Health Board	-
•	

KITSAP PUBLIC HEALTH BOARD ORDINANCE 2022-01

ENVIRONMENTAL HEALTH ENFORCEMENT REGULATIONS

EFFECTIVE May 3, 2022

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SECTION 1. AUTHORITY, PURPOSE, AND OBJECTIVES

- A. These regulations are promulgated under the authority of Section 70.46.060 and Chapter 70.05.060 of the Revised Code of Washington (RCW).
- B. Violations of public health regulations are detrimental to the public health, safety, and welfare and are hereby declared to be nuisances. All conditions which are (as determined by the Health Officer) to be in violation of any public health regulation may be subject to the provisions of these regulations and may be corrected by any reasonable and lawful means as provided herein.
- C. The purpose of this ordinance is to protect, preserve, promote, and improve the public health and safety and prevent disease by:
 - 1. Establishing procedures for Kitsap Public Health District enforcement of Washington State public health laws and rules;
 - 2. Provide enforcement procedures for other local public health regulations with enforcement procedures that do not provide adequate public health protection.
- D. These regulations are intended to coordinate with other applicable state and local regulations for water system design; well construction; water resources; sewage control; solid waste; food handling; building; land use; and critical areas.
- E. This ordinance requires persons, businesses, or companies to meet the provisions of local and State health regulations. No provision and no term used in this ordinance is intended to impose any duty whatsoever upon the Kitsap Public Health District (Health District) or any of its officers or employees, for whom the implementation or enforcement of this ordinance shall be discretionary and not mandatory.
- F. It is the intent of this ordinance to provide for fair, equal, and reasonable treatment of all persons that are subject to these regulations, and to allow for Health Officer discretion in the application of these regulations as they deem necessary to protect public health. Nothing in these regulations is intended to abridge or alter the rights of action by the state, or by persons that exist in equality, common law, or other statutes, to abate pollution or a nuisance.

SECTION 2. DEFINITIONS

Unless specified herein, all words and terms shall be defined by their common dictionary definition.

District: The Kitsap Public Health District.

Health Officer: The Health Officer of the Kitsap Public Health District, or his or her designee.

Permit: An authorization by the Health Officer that provides for a specific activity under provisions of public health regulations.

Person: An individual, firm, association, partnership, political subdivision, government agency, municipality, industry, public or private corporation, or any other entity whatsoever.

Nuisance: Consists in unlawfully doing an act, or omitting to perform a duty, which act or omission either annoys, injures, or endangers the comfort, repose, health or safety of others, or in any way renders other persons insecure in life, or in the use of property.

SECTION 3. GENERAL ADMINISTRATION AND ENFORCEMENT

A. Right of Entry

- 1. Whenever necessary to inspect to enforce or determine compliance with the provisions of these regulations, and other relevant laws and regulations, or whenever the Health Officer has cause to believe that a violation of these regulations has or is being committed, the Health Officer may, in accordance with federal and state law, seek entry of any building, structure, property, or portion thereof, at reasonable times to inspect the same.
- 2. Prior to entering any building, structure, property, or portion thereof, the Health Officer shall attempt to secure the consent of the owner, occupant, or other person having apparent charge, or control, of said building, structure, property, or portion thereof.
 - a) In attempting to contact the owner, occupier, or other persons having apparent control of said building, structure, property, or portion thereof, the Health Officer may approach said building or structure by a recognizable access route leading to said building or structure.

- b) If such building, structure, property, or portion thereof is occupied, the Health Officer shall present identification credentials, state the reason for the inspection, and request entry.
- 3. If consent to enter said building, structure, property, or portion thereof is not provided by the owner, occupier, or other persons having apparent control of said building, structure, property, or portion thereof, the Health Officer may enter said building, structure, property, or portion thereof only to the extent permitted by federal and state law.
- 4. If consent to enter said building, structure, property, or portion thereof is not provided by the owner, occupier, or other persons having apparent control of said building, structure, property, or portion thereof, the Health Officer shall also have recourse to any other remedies provided by law to secure entry, including but not limited to search warrants.

B. Violations, Notice, Remedies, and Penalties

1. Violations

- a) Violations of these regulations may be addressed through the remedies and penalties provided in this section.
- b) Each violation of these regulations shall be a separate and distinct offense and in the case of a continuing violation, each day's continuance shall be a separate and distinct violation.
- c) The Health Officer may investigate alleged or apparent violations of these regulations. Upon request of the Health Officer, the person allegedly or apparently in violation of these regulations shall provide information identifying themselves.

2. Notice and Order to Correct Violation

- a) Issuance. Whenever the Health Officer determines that a violation of these regulations has occurred or is occurring, they may issue a written notice and order to correct violation to the property owner, or to any person causing, allowing, or participating in the violation.
- b) Content. The notice and order to correct violation shall contain:
 - (1) The name and address of the property owner or other persons to whom the notice and order to correct violation is directed;

- (2) The street address, tax assessor account number, or other description for identification of the building, structure, or land upon or within which the violation has occurred or is occurring;
- (3) A description of the violation and a reference to that provision of these regulations which has been, or is being, violated;
- (4) A statement of the action, or actions, required to be taken to correct the violation and a date or time by which the correction is to be completed;
- (5) A statement that each violation of this regulation shall be a separate and distinct offense, and in the case of a continuing violation that each day's continuance shall be a separate and distinct violation;
- (6) A statement that the failure to obey this notice may result in the issuance of a notice of civil infraction, and/or the assessment of an administrative remedy, and/or, if applicable, the imposition of criminal penalties; and
- (7) A statement that the person to whom the notice and order is directed can appeal the order to the Health Officer in accordance with the appeal procedures of these regulations.
- c) Receipts and/or Reports of Corrective Actions Completed. The notice and order to correct violation may also include a statement requiring the person to whom the notice and order to correct violation is directed to produce receipts and/or reports to demonstrate compliance with an order issued by the Health Officer.
- d) Service of Order. The notice and order to correct violation shall be served upon the person to whom it is directed, either personally, via electronic mail, physical posting, or by mailing a copy of the order by first class and/or certified mail postage prepaid, return receipt requested, to such person at his/her last known address.
- e) Extension. Upon written request received prior to the correction date or time, the Health Officer may extend the date set for corrections for good cause. The Health Officer may consider completed or proposed mitigation measures, substantial completion of the necessary correction, and/or unforeseeable circumstances that render completion of correction impossible by the date or time established as a good cause.

- f) Supplemental Order to Correct Violation. The Health Officer may at any time add to, rescind in part, or otherwise modify a notice and order to correct violation. The supplemental order shall be governed by the same procedures applicable to all notice and order to correct violations procedures contained in these regulations.
- g) Enforcement of Order. If, after order is duly issued by the Health Officer, the person to whom such order is directed fails, neglects, or refuses to obey such order, the Health Officer may:
 - (1) Utilize any remedy or penalty specified within these regulations; and/or
 - (2) Abate the health violation using the procedures of these regulations; and/or
 - (3) Pursue any other appropriate remedy at law or equity.

3. Remedies

- a) Written Assurance of Discontinuance. The Health Officer may accept a written assurance of discontinuance of any act in violation of these regulations from any person who has engaged in such act. Failure to comply with the written assurance of discontinuance shall be a further violation of these regulations.
- b) Written Voluntary Correction Agreement/Compliance Schedule.
 - (1) The Health Officer may accept a written voluntary correction agreement/compliance schedule to attempt to secure voluntary correction of the violation from the person committing, or responsible for, the violation. Failure to comply with the written voluntary correction agreement/compliance schedule shall be a further violation of these regulations.
 - (2) The written voluntary correction agreement/compliance schedule is a contract between the Health Officer and the persons responsible for the violation in which such person agrees to abate the alleged violation within a specified time frame and according to specific conditions.
 - (3) The written voluntary correction agreement/compliance schedule will be in lieu of the issuance of further citations, or other actions as allowed by these regulations, so long as the written voluntary

- correction agreement/compliance schedule is adhered to as determined by the Health Officer.
- (4) By entering into a written voluntary correction agreement/compliance schedule, the person responsible for the alleged violation shall waive the right to a hearing before the Health Officer under these regulations or otherwise, regarding the alleged violation.
- (5) The Health Officer may grant an extension in time, or a modification in the terms, of the agreement if the person responsible for the alleged violation has shown progress towards correction of the violation and no threat to public health is determined to exist.
- (6) The Health officer may abate the alleged violation in accordance with these regulations if all the terms of the written voluntary correction agreement/compliance schedule are not met, except that the person responsible for the violation shall not have the right to appeal the abatement order.
- (7) If all the terms of the written voluntary correction agreement/compliance schedule are not met, the person responsible for the alleged violation shall be assessed all costs and expenses of abatement, as set forth in these regulations.
- (8) Content. The written voluntary correction agreement/compliance schedule shall include the following:
 - (a) The name and address of the person responsible for the alleged violation;
 - (b) The street address, assessor's tax identification number, or other description sufficient for identification of the building, structure, premises, or land upon which, or within, the alleged violation has occurred or is occurring;
 - (c) A description of the alleged violation and a reference to the regulation that has been violated;
 - (d) The specific actions to be taken, and a date or time by which each action shall be completed;
 - (e) An agreement by the responsible person that the Health Officer may enter the property, building, structure, or premises and

- inspect as necessary to determine compliance with the written voluntary correction agreement/compliance schedule;
- (f) An agreement by the responsible person that the Health Officer may enter the property, building, structure, or premises to abate the violation and recover its costs and expenses from the responsible person if the terms of the written voluntary correction agreement/compliance schedule are not satisfied; and
- (g) An agreement that by entering into the written voluntary correction agreement/compliance schedule, the responsible person waives the right to a hearing before the Health Officer under these regulations or otherwise, regarding the matter of the alleged violation and/or required corrective action(s).
- c) Stop Work Orders. The Health Officer may cause a Stop Work order to be issued whenever the Health Officer has reason to believe that a violation of this regulation is occurring. The effect of the Stop Work order shall be to require the immediate cessation of such work or activity that has contributed to the violation until such time that the Health Officer has removed the order.
 - (1) Content. A Stop Work order shall include the following:
 - (a) The name and address of the property owner or other persons to whom the notice and order to correct violation is directed;
 - (b) The street address, tax assessor account number, or other description for identification of the building, structure, or land upon or within which the violation has occurred or is occurring;
 - (c) A description of the violation and a reference to that provision of these regulations which has been, or is being, violated;
 - (d) A statement of the action, or actions, required to be taken to correct the violation and a date or time by which the correction is to be completed;
 - (e) A statement that each violation of this regulation shall be a separate and distinct offense, and in the case of a continuing violation that each day's continuance shall be a separate and distinct violation;

- (f) A statement that the failure to obey this notice may result in the issuance of a notice of civil infraction, and/or the assessment of an administrative remedy, and/or, if applicable, the imposition of criminal penalties; and
- (g) A statement that the person to whom the Stop Work order is directed can appeal the order to the Health Officer in accordance with the appeal procedures of these regulations.
- (h) Service of Order. The Health Officer shall serve the Stop Work order upon the property owner of the property where the alleged violation occurred or is occurring, or to any person causing, allowing, or participating in the violation, either personally or by mailing a copy of the notice by regular and/or certified mail, to the violator at their last known address. A copy of the order shall also be posted on the property where the alleged violation occurred, or is occurring.
- (i) Posting of Order. In addition to the service of order as described above, an additional notice shall be posted on the property in substantially the following form:

Under the authority of the Kitsap Public Health Board Ordinance 2022-01,

Environmental Health Enforcement Regulations, you are hereby required to immediately

STOP WORK

This order is in effect at this property for all work and activities that relate to violations of (applicable public health rule), and remains in effect until removed by the Health Officer. It is a violation of these regulations to remove, deface, destroy, or conceal a posted Stop Work Order. FAILURE TO COMPLY WITH THIS ORDER MAY RESULT IN THE ISSUANCE OF A CIVIL INFRACTION.

- d) Abatement Orders.
 - (1) When the Health Officer has determined that a violation of these regulations has occurred or is occurring, or a public nuisance exists, in accordance with RCW 7.48, they may issue an abatement order to the person responsible for the alleged violation. The abatement order shall require the responsible person to abate the violation or public nuisance within a reasonable period of time as determined by the Health Officer.

- (2) If the abatement order is not commenced or complied with within the specified time period, the Health Officer may proceed to abate the violation and cause work to be done in this regard.
- (3) Absent conditions that pose an immediate threat to the public's health, safety, or welfare, abatement orders shall be utilized by the Health Officer only after the civil penalties process under these regulations has been attempted as a means to correct the alleged violations, but the violations have not been adequately corrected as determined by the Health Officer.
- (4) Content. The abatement order shall include the following:
 - (a) The name and address of the person responsible for the alleged violation;
 - (b) The street address, assessor's tax identification number, or other description sufficient for identification of the building, structure, premises, or land upon which, or within, the alleged violation has occurred or is occurring;
 - (c) A description of the alleged violation and a reference to the regulation that has been violated;
 - (d) The specific actions to be taken, and a date or time by which each action shall be completed;
 - (e) A statement that the costs and expenses incurred by the Health Officer, pursuant to these regulations, may be assessed against a person to whom the abatement order is directed; and
 - (f) A statement that the person to whom the abatement order is directed can appeal the abatement order to the Health Officer in accordance with these regulations.
- (5) Service of Order
 - (a) The Health Officer shall serve the abatement order upon the owner of the property where the alleged violation occurred, or is occurring, either personally or by mailing a copy of the order by regular and/or certified or registered mail, with a five (5)-day return receipt requested, to the owner at their last known address.

- (b) The order shall also be served on each of the following if known to the Health Officer or disclosed from public records:
- (c) The holder of any mortgage or deed of trust or other lien or encumbrance of record;
- (d) The owner or holder of any lease of record and the holder of any other estate or legal interest of record in, or to, the property or any structures on the property.
- (e) The failure of the Health Officer to serve any person as required herein shall not invalidate any proceedings hereunder as to any other person duly or relieve any such person form any duty or obligation imposed by the provision of this section.
- (f) A copy of the abatement order shall also be posted on the property where the alleged violation occurred or is occurring.
- (6) Authorized Action by the Health Officer. Using any lawful means, the Health Officer may enter the subject property and may remove or correct the condition that is subject to the abatement.
- (7) Recovery of Costs and Expenses. The costs of correcting a condition which constitutes a violation of these regulations, including all incidental expenses, shall be billed to the owner of the property upon which the alleged violation occurred or is occurring, and shall become due within 30 calendar days of the date of mailing the billing for abatement.
- (8) Collection of Costs and Expenses. The costs and expenses of correcting a condition, which constitutes a violation of these regulations, shall constitute a personal obligation of the person to whom the abatement order was/is directed. After determining the final cost of the abatement, the Health Officer shall send to the person named in the abatement order a bill that details the work performed, materials used or removed, labor used, and the costs and expenses related to those tasks as well as any other costs and expenses incurred in abating the violation.
- e) Notice to Vacate. When a condition constitutes a violation of these regulations and poses an immediate threat to health, safety, or property of the public or persons residing on the property, the Health Officer may issue a notice to vacate.

- (1) Content. A notice to vacate shall include the following:
 - (a) The name and address of the person responsible for the alleged violation;
 - (b) The street address, tax assessor account number, or description sufficient for identification of the building, structure, premises, or land upon which the alleged violation has occurred or is occurring;
 - (c) A description of the violation constituting an immediate threat to health, safety, or property of the public or persons residing on the property and a reference to the provision of these regulations that is being violated;
 - (d) A date, determined by the Health Officer and commensurate with the severity of violation and threat to public health, by which any persons shall vacate the premises in order to mitigate/eliminate the violation. In cases of an extreme threat to health or safety to persons or property, immediate vacation of the premises may be required;
 - (e) The corrective actions required to be completed prior to reoccupancy of the premises; and a statement that the person to whom the notice to vacate is directed can appeal the order to the Health Officer in accordance with these regulations.
- (2) Service of Notice. The Health Officer shall serve the notice to vacate order upon the owner of the property, where the alleged violation occurred or is occurring, or the person responsible for the alleged violation, either personally or by mailing a copy of the notice by regular and/or certified mail, to said person at their last known address.
- (3) Posting of Notice. In addition to providing service of notice as described above, notice shall also be posted conspicuously on the property where the alleged violation occurred or is occurring.
- (4) Compliance. No person shall remain in or enter any building, structure, or property which has been posted for vacation except to make the specified corrective actions listed in the notice to vacate. No person shall remove or deface a vacate notice posting without the permission of the Health Officer. Health Officer review, inspection,

- and approval of the completed corrective action is required before the vacate order shall be removed.
- f) Other Legal or Equitable Relief. Notwithstanding the existence or use of any other remedy, the Health Officer may seek legal or equitable relief to enjoin any acts or practices or abate any conditions that constitute or will constitute a violation of these regulations, or rules and regulations adopted under them, or any state health law or regulation, or that otherwise threatens public health.
- g) Notice of Violation or Order Failure to Respond or Appear. Unless contested or appealed in accordance with these regulations, any notice of violation or order issued by the Health Officer represents a determination that the person to whom the notice or order was issued committed the violation.

4. Penalties

a) Civil Penalties

- (1) The violation of any provision of these regulations is designated as a Class 1 civil infraction pursuant to RCW 7.80, *Civil Infractions*.
- (2) The Health Officer may issue a notice of civil infraction pursuant to RCW 7.80 if the Health Officer has reasonable cause to believe that the person has violated any provision of these regulations, or has not corrected the violation as required by a written notice and order to correct violation. Civil infractions shall be issued, heard, and determined as described in RCW 7.80, and any applicable court rules.

b) Criminal Penalties

- (1) Except as otherwise provided for in these regulations or under State law, any person violating any provision of these regulations is guilty of a misdemeanor, and upon conviction thereof shall be subject to a fine of not less than twenty-five dollars (\$25), nor more than one-thousand dollars (\$1,000), or to imprisonment in the county jail not to exceed ninety (90) days, or to both fine and imprisonment.
- (2) Any person who fails, neglects, or refuses to comply with an order of the Health Officer to correct a violation of these regulations pursuant to Section 12.B.2. shall be, upon conviction, guilty of a misdemeanor and shall be subject to a fine of not more than one-thousand dollars (\$1,000), or imprisonment in the county jail not to exceed ninety (90) days, or both. The court may also impose restitution.
- (3) Any person who fails, neglects, or refuses to comply with a written assurance of discontinuance or a voluntary correction agreement pursuant to Section 12.B.3. shall be, upon conviction, guilty of a misdemeanor and shall be subject to a fine of not more than one-thousand dollars (\$1,000), or imprisonment in the county jail not to exceed ninety (90) days, or both. The court may also impose restitution.

c) Noncompliance Fees

(1) Pursuant to the most current Health District fee schedule as adopted by the Health Board, the Health Officer may assess an hourly noncompliance fee to any person who has been found guilty of committing a violation of these regulations for Health Officer oversight, review, and/or inspections of a property to determine compliance with its permit, applicable regulations, or correction/compliance dates specified in a notice and order to correct violation, civil infraction, misdemeanor, or court ordered compliance date.

(2) Whenever a noncompliance fee is assessed by the Health Officer, the fee shall be due and payable 30 days after receipt of the invoice by the violator.

SECTION 4. APPEALS

- A. Appeal of Health District Action Administrative Review Conference with Environmental Health Director.
 - 1. Any person aggrieved by the contents of a notice and order to correct violation issued under this regulation, or by any inspection or enforcement action conducted by the Health District under this regulation, may submit a written request for an Administrative Review Conference with the Environmental Health Director, or their designee. The request shall be submitted on forms designated for use by the Health Officer along with the applicable fee, and shall detail and specify the reason why the appellant is assigning error to the Health District and requesting the action to be reviewed.
 - 2. Timelines for Appeal. A written application for administrative review shall be submitted to the Health Officer within 10 business days of the enforcement action, except for suspensions or revocations of a Health Officer-granted certification. A request for administrative review of a certification suspension or revocation shall be submitted to the Health Officer within five (5) business days of the action. Upon receipt of such request together with hearing fees, the Environmental Health Director shall notify the person of the time, date, and location of such hearing, which shall be set at a mutually convenient time not less than five (5) business days or more than 15 business days from the date the request was received. The Environmental Health Director may extend this timeline, for good cause, for up to an additional 15 days. The Environmental Health Director will issue a written decision concerning the disposition of the administrative review within 10 business days of the conference date, and may require additional actions as part of the decision.
 - 3. A request for administrative review is at the option of the aggrieved person. A request for administrative review shall in effect constitute a stay of the appeal process for the Health Officer Administrative Hearing and preserve all

rights and timelines associated with the appeal process. The timelines for appeal shall become effective upon issuance of the written decision from the administrative review conference.

- B. Appeal of Health District Action Health Officer Administrative Hearing.
 - 1. Any person aggrieved by the contents of a notice and order to correct violation issued under this regulation, or by any inspection or enforcement action conducted by the Health District under this regulation, may submit a written request for a hearing before the Health Officer, or their designee. The request shall be submitted on forms designated for use by the Health Officer along with the applicable fee, and shall detail and specify the reason why the appellant is assigning error to the Health District action being appealed.
 - 2. Timelines for Appeal. A written application for appeal shall be submitted to the Health Officer within 10 business days of the action appealed for all Health District actions, except for suspensions or revocations of a Health Officer-granted certification. An appeal of a certification suspension or revocation shall be submitted to the Health Officer within five (5) business days. Upon receipt of such request together with hearing fees, the Health Officer shall notify the person of the time, date, and location of such hearing, which shall be set at a mutually convenient time not less than five (5) business days or more than 15 business days from the date the request was received. The Health Officer may extend this timeline, for good cause, for up to an additional 15 days. The Health Officer will issue a written decision concerning the disposition of the appeal within 10 business days of the hearing date, and may require additional actions as part of the decision.
 - 3. Incomplete or Untimely Appeals. Incomplete appeal requests, or appeal requests that do not meet the specified timelines for appeal, shall not constitute a legal appeal under these regulations.
- C. Appeal of Administrative Hearing Decision Health Board Hearing.
 - 1. Any person aggrieved by the findings, decision, or required actions of an administrative hearing shall have the right to appeal the matter by requesting a hearing before the Health Board. The appellant shall submit specific statements in writing of the reason why error is assigned to the decision of the Health Officer, and shall be accompanied by the applicable hearing fee. The appellant and the Health Officer may submit additional information to the Health Board for review and consideration.

- 2. Timelines for Appeal to Health Board. A written application of appeal shall be presented to the Health Officer within five (5) business days of the findings and actions from the administrative hearing. Upon receipt of a timely written notice of appeal together with hearing fees, the Health Officer shall set a time, date, and location for the requested hearing before the Health Board, and shall give the appellant written notice thereof. Such hearing shall be set at a mutually convenient time not less than five (5) business days or more than 30 business days from the date the appeal request was received by the Health Officer. Any decision of the Health Board shall be final and may be reviewed by an action filed in superior court. Any action to review the Health Board's decision shall be filed within 21 business days of the date of the decision.
- 3. Stay of Action. Any orders issued concerning the alleged violation shall remain in effect during the appeal to the Health Board. Any person affected by an order to correct violation may make a written request for a stay of the decision to the Health Officer within five (5) business days of the Health Officer's decision. The Health Officer shall notify the appellant in writing of their decision to grant or deny the stay request within five (5) business days of receipt of the request.
- D. Judicial Review. All decisions of the Health Board shall be final unless review is sought by filing an action in any court of competent jurisdiction, as provided by the laws of this State.

SECTION 5. IMMUNITY FROM LIABILITY

Inspections, rules, and orders of the Health Officer resulting from the exercise of the provisions of these regulations shall not in any manner be deemed to impose liability upon the Health District, or its employees, for any injury or damage resulting from the administration and enforcement of these regulations. All actions of the Health Officer shall be deemed an exercise of the police power of the state.

SECTION 6. SEVERABILITY

Should any part of these rules and regulations be declared unconstitutional or invalid for any reason, such declaration shall not affect the validity of the remainder.