

KITSAP PUBLIC HEALTH BOARD

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

MEETING AGENDA

September 6, 2022 12:30 p.m. to 1:45 p.m. Norm Dicks Government Center – Chambers Room 345 6th Street, Bremerton, Washington 98337

To help reduce the spread of COVID-19, the Kitsap Public Health Board is conducting a hybrid meeting. Board members and staff may participate in the meeting in-person or remotely via Zoom. The public is invited to view and/or participate in the meeting by attending in-person or by remote/virtual connection (please see remote/virtual meeting connection information at the end of the meeting agenda. If planning to attend in person, please be aware of the following:

- Do not enter the building or meeting room if you are positive for COVID-19 or have COVID-19 symptoms.
- Face masks and hand sanitizer will be available at the meeting location and are encouraged to be used.
- Maintain adequate spacing between others when possible.

12:30 p.m.	1.	Call to Order Mayor Greg Wheeler, Chair	
12:31 p.m.	2.	Welcome Steve Kutz, Suquamish Tribe Representative Kitsap Public Health Board Mayor Greg Wheeler, Chair	e, to Page 5
12:33 p.m.	3.a. 3.b.	Approval of May 31, 2022, Special Meeting Minutes Approval of July 5, 2022, Meeting Minutes Mayor Greg Wheeler, Chair	Page 8
12:35 p.m.	4.	Approval of Consent Items and Contract Updates Mayor Greg Wheeler, Chair	External Document
12:36 p.m.	5.	Public Comment – PLEASE SEE NOTES ON PAGE Mayor Greg Wheeler, Chair	E 3 OF AGENDA
12:45 p.m.	6.	Health Officer and Administrator Reports Dr. Gib Morrow, Health Officer & Keith Grellner, Add	ministrator

ACTION ITEMS

12:50 p.m. 7. Public Hearing: Ordinance 2022-02, Food Service Regulations

John Kiess, Environmental Health Division Director

Dayna Katula, Food & Living Environment Program Manager

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1:10 p.m. 8. Resolution 2022-08: Approving Personnel Committee Recommendations For Nonelected/Non-Tribal Health Board Member Nominees Dr. Michael Watson, Drayton Jackson, and Dr. Tara Kirk Sell Councilperson Kirsten Hytopoulos, Personnel Committee Page 46

DISCUSSION ITEMS

1:25 p.m. 9. Monkeypox & Other Diseases of Concern Update *Dr. Gib Morrow, Health Officer*

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 via Zoom

Health Board Meetings Via Zoom

The Kitsap Public Health Board will provide a virtual option to view/participate in the meeting via Zoom webinar, broadcast live on Comcast channel 12, WAVE channel 3, the <u>BKAT website</u> and Facebook Live. When participating via Zoom, 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

^{*}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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Information & Directions for Public Comment

We apologize, but virtual 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 or a public hearing item if they are attending the meeting via Zoom.

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 (generally 3 minutes) 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.

Virtual Public Participation Guidelines

Below are recommendations for use by members of the public in virtual 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

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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.

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 cc 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.



MEMO

To: Kitsap Public Health Board

From: Keith Grellner, Administrator

Date: September 6, 2022

Re: Welcome and Introduction of Stephen Kutz, MPH, BSN, LTC USA (Retired), Suquamish Tribe

Representative to Kitsap Public Health Board

It is my pleasure to introduce Mr. Stephen Kutz, MPH, BSN, LTC USA (Retired), as the newest member of the Kitsap Public Health Board. Attached, please find the approved resolution from the Suquamish Tribal Council appointing Mr. Kutz as their representative to the Health Board (See attached The Suquamish Tribe, Port Madison Reservation Resolution #2022-136).

Mr. Kutz is a member of Southwest Washington's Cowlitz Indian Tribe and served on its Tribal Council for approximately 20 years. He is currently employed by the Suquamish Tribe, where he serves as the Health Clinic Director.

Mr. Kutz received his Bachelor of Science degree in Nursing from Eastern Washington University in 1974 and has worked as a nurse for nearly 47 years. He received his master's degree in public health from Tulane University School of Public Health and Tropical Medicine in 1993. He served 20 years on active duty as a nurse in the U.S. Army in most all facets of their health care system, with 13 of those years spent in preventive medicine and community health. He also worked for more than 12 years in a county health department in Washington as director of public health nursing, while also serving as the health department director for eight years. He served the Cowlitz Tribe for almost 16 years as the Clinic Manger, Deputy Director, and Executive Director of Health and Human Services. Mr. Kutz served as the Suquamish Tribal delegate to the Northwest Portland Area Indian Health Board and has been its delegate to the Health and Human Services American Indian/Alaskan Native Health Research Advisory Council 2008 until 2016, as well as serving as a delegate to the IHS budget formulation committee, Indian Health Care Improvement advisory committee, one term as the alternate to the HHS Secretaries Advisory committee, and one term as the delegate to the CDC and NIH Tribal advisory committee. He is active in health policy issues at the national, state, and local levels.

He also served as a delegate to the Washington State American Indian Health Commission for almost 20 years and currently serves as their Chair. He works on the State Mental Health Committee that is



Memo to Kitsap Public Health Board September 6, 2022 Page 2

advising the state in its efforts to redesign how Medicaid mental health services are delivered to American Indians and Alaskan Natives. He currently serves as the State Board of Health's delegate to the Governors Interagency Council on Health Disparities.

Mr. Kutz and I have served together on the Washington State Board of Health since 2011.

If you have any questions or comments, please call Keith Grellner at (360) 728-2284, or email him at keith.grellner@kitsappublichealth.org.

Attachment (1)

THE SUQUAMISH TRIBE PORT MADISON INDIAN RESERVATION

RESOLUTION # 2022-136 KITSAP PUBLIC HEALTH DISTRICT- BOARD OF HEALTH REPRESENTATIVE APPOINTMENT

WHEREAS, the Suquamish Tribal Council ("Council") is the duly constituted governing body of the Port Madison Indian Reservation by authority of the Constitution and Bylaws for the Suquamish Tribe of the Port Madison Indian Reservation, Washington as approved on July 2,1965, by the Under-Secretary of the United States Department of the Interior; and

WHEREAS, under the Constitution and Bylaws of the Suquamish Tribe, the Council is charged with the general governance of the Port Madison Reservation and to this end, has the power, right and authority under the Tribe's Constitution to take all actions necessary to carry such duties into effect, including furthering health services and health benefits, which serve the needs of the government and its people; and

WHEREAS, the Suquamish Tribal Council hereby appoints Steve Kutz, the Suquamish Tribe's Health Clinic Director as the Suquamish Tribe's representative to the Kitsap Public Health District- Board of Health; shall remain in effect until rescinded or modified by a vote of Suquamish Tribal Council.

NOW THEREFORE BE IT RESOLVED THAT:

The Suquamish Tribal Council appoints Steve Kutz as the Suquamish Tribe's representative for the Kitsap Public Health District – Board of Health.

BE IT FURTHER RESOLVED THAT:

The Chairman and other officers of the Suquamish Tribal Council are hereby authorized and directed to take any further actions necessary to accomplish the purpose and intent of this resolution.

CERTIFICATION

The foregoing resolution was duly adopted on August 15, 2022, at a regular meeting of the
Suquamish Tribal Council at which a quorum was present, by a vote offor and against, with
abstention(s), in accordance with and pursuant to the authority vested in it by
the Constitution and Bylaws of the Suquamish Tribe.

By:

Leonard Forsman, Chairman

Attested to by:

Windy Anderson, Secretary

KITSAP PUBLIC HEALTH BOARD MEETING MINUTES Special Meeting May 31, 2022

The meeting was called to order by Board Chair Mayor Greg Wheeler at 10:30 a.m.

Chair Wheeler acknowledged that the Kitsap Peninsula is home of sovereign Indian nations, namely the Suquamish and Port Gamble S'Klallam Tribes.

CONSIDERATION OF HEALTH BOARD MEETING FORMAT FOR THE DURATION OF THE DECLARED STATE OF EMERGENCY FOR COVID-19

Mr. Keith Grellner, Administrator, said the purpose of this meeting is to discuss the board meeting format for the remaining duration of the declared state of emergency for COVID-19. Mr. Grellner provided an overview of the state of emergency guidelines, Open Public Meetings Act rules and Governor Proclamation 20-28.15, which prohibited in-person public meetings during the state of emergency. He noted a new proclamation 20-28.16 will go into effect tomorrow that rescinds the allowance of public meetings to occur fully remotely. He said, if the Kitsap Public Health Board wishes to continue meeting remote-only, they will need make a formal action statement to adopt a remote-only meeting schedule contingent upon the existence of the state of emergency still being in effect.

Mr. Grellner said there is still community spread of COVID-19 in Kitsap County. The current documented rate of infection in Kitsap is 200 cases per 100,000 over the last 7 days, though it is widely acknowledged that public health is likely only capturing 20% of cases or less due to athome testing. Most people do not report results from these tests.

Dr. Gib Morrow, Health Officer, and Mr. Grellner recommend the board continue to meet remote-only in virtual format through the June 7 regularly scheduled board meeting and as long as the state of emergency is still in effect, to protect the health and safety of board members, guests and Health District employees.

Commissioner Rob Gelder said he is fine extending the remote-only format through the regular June meeting, but feels it is the board's responsibility to be more accessible at future meetings.

Mayor Becky Erickson said she agrees with Commissioner Gelder and said it is time to send a message of positivity to the public and offer more ways of public engagement. She said offering in-person meetings and testimony is necessary.

Councilperson Kirsten Hytopoulos said she supports the public health's recommendation to continue meeting remotely. She added that the Bainbridge Island City Council is meeting in person.

Mayor Rob Putaansuu said he supports the board not being gathered but allowing a public space for public testimony.

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Chair Wheeler said the Bremerton City Council decided to wait until July 20 to meet in person. He said he will follow the recommendation provided by the Health District.

Commissioner Gelder said the motion is too open ended and would like it to be more specific. He noted the public can mask and socially distance at their own discretion.

Councilperson Hytopoulos said she feels the board is more accessible to the public online, though she noted there are some equity issues that arise by only meeting virtually.

Commissioner Charlotte Garrido said this is the health board being advised by public health professionals and she supports professional health expertise.

Commissioner Ed Wolfe said he also supports the public health recommendation.

Mayor Erickson moved and Mayor Putaansuu seconded the motion to allow the Kitsap Public Health Board to meet in a hybrid (in-person and virtual) format beginning August 1, 2022, and meet remote-only until that point. Mayors Erickson, Putaansuu and Wheeler and Commissioners Garrido, Gelder and Wolfe voted yea. Councilperson Hytopoulos voted nay. There were no abstentions. The motion passed.

Commissioner Gelder noted the first hybrid meeting would be in September, since the board doesn't meet in August.

There were no further comments.

ADJOURN

There was no further business; the meeting adjourned at 10:58 a.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; Mayor Greg Wheeler; Commissioner Ed Wolfe.

Board Members Absent: None.

Community Members Present: See attached.

Staff Present: Angie Berger, Administrative Assistant, Administration; Keith Grellner, Administrator, Administration; Sarah Kinnear, Community Liaison, Chronic Disease Prevention; Gib Morrow, Health Officer, Administration.

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Kitsap Public Health Board Meeting (Virtual Attendance)

Webinar ID Actual Start Time Attendee Count

861 8605 2497 5/31/2022 10:15 21

none

NAME JOINED BY PHONE

Angie Berger (she / her)

Becky Erickson

BKAT

Charlotte Garrido

Cheryl Klotz

Ed Wolfe

Gib Morrow

Greg Wheeler

June Swinney

Keith Grellner

Kenneth Klein

Kirsten Hytopoulos

marci burkel (she/her)

Michele Moen - Kitsap Emergency Management

Mychal Walz

Rob Putaansuu

Robert Gelder

Sarah Kinnear

Stephanie Browning

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KITSAP PUBLIC HEALTH BOARD MEETING MINUTES

Regular Meeting July 5, 2022

The meeting was called to order by Board Chair Mayor Greg Wheeler at 10:31 a.m.

Chair Wheeler acknowledged that the Kitsap Peninsula is home of sovereign Indian nations, namely the Suquamish and Port Gamble S'Klallam Tribes.

BOARD MEETING MINUTES

Mayor Rob Putaansuu moved, and Commissioner Charlotte Garrido seconded the motion, to approve the minutes for the June 7, 2022 regular meeting. The motion was approved unanimously.

CONSENT AGENDA

The July consent agenda included the following contracts:

- 2170, Peninsula Community Health Services, COVI-19 Mass Vaccination Plan
- 2178, Kitsap County (KCDEM), COVID-19 Mass Vaccination Plan
- 2251, Kitsap County, Aging and Long Term Care Services
- 2275, City of Poulsbo, Illicit Discharge Detection and Elimination

Commissioner Rob Gelder moved and Mayor Putaansuu 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

There were no public comments.

HEALTH OFFICER/ADMINISTRATOR'S REPORT

Health Officer Update:

Dr. Gib Morrow, Health Officer, provided updates on pediatric COVID-19 vaccines, avian influenza, monkeypox and access to healthcare and reproductive healthcare services.

Dr. Morrow reminded the public that COVID-19 vaccines are now available for all persons six months of age and older. These vaccines were approved by the Federal Drug Administration (FDA), Centers for Disease Control and Prevention (CDC) and Western States Safety Group a couple of weeks ago. Approved vaccines include Moderna (2 shot series) and Pfizer (3 shot series) for children six months to five years of age. Clinical trials showed pediatric COVD-19 vaccines are safe and effective with no serious side effects thus far. Kitsap Public Health is partnering with Kitsap Children's Clinic to vaccinate children. Dr. Morrow acknowledged that some parents may have concerns about vaccinating their children and assured them that these

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vaccines are the best way to protect your loved ones. On June 29, the Washington State Department of Health (DOH) published a report on COVID-19 cases among children and youth in Washington state. The report showed that there were 6,700 cases in children between June 5-19, with the highest rates in the 0-3 year old range, though he noted case rates in children are declining. According to the report, there were 48 hospitalizations in children and hospitalizations are increasing. To date since the start of the pandemic, 17 children/youth have died from COVID-19 in the state. Dr. Morrow encouraged parents to get themselves and their children vaccinated this summer for COVID-19 and to ensure that children are up to date on other routine vaccinations.

Next, Dr. Morrow addressed avian influenza (bird flu). He noted that this is an animal and agricultural disaster, not a human health emergency. Last week, the US and Washington State Departments of Agriculture tested a backyard flock of chickens in Bremerton for avian influenza (H5N1 variant). Results were positive for this diagnoses. He noted this variant does not transmit between humans. He said it causes severe illness in poultry and wild birds but does not readily transmit to or between humans. The Department of Agriculture depopulates entire flocks when avian influenza is present in the flock. He said only one human case has been identified in the U.S this year and reiterated that the risk to humans is low, but said Kitsap Public Health is asking people to avoid contact with birds right now, take extra effort to keep backyard flocks separate from wild birds, report ill wild birds to Washington State Department of Fish and Wildlife, and report ill domestic birds and poultry to the Washington State Department of Agriculture. Kitsap Public Health's Communicable Disease team is tracking human exposures to avian influenza and coordinating treatment options should they be needed.

Next, Dr. Morrow provided an update on monkeypox, which is in the same family as smallpox. As of July 1, there were six known cases in Washington state. The federal response to containing this disease includes releasing more of the smallpox vaccine from the national stockpile. This vaccine is reserved for individuals who are in a short window post exposure to known monkeypox. He noted that a limited number of individuals working in labs or who have direct contact with this virus are receiving vaccine for pre-exposure, but most of the vaccines are being reserved for those at highest risk of exposure. Most of the cases in Washington have been in King County. Kitsap Public Health has been involved in administering these vaccines to exposed individuals in Kitsap County. Cases of monkeypox tend to be mild and self-limited, however immunocompromised people, children and people who are breastfeeding and those with severe disease may be eligible for immunoglobulin and other investigational anti-viral medications.

Lastly, Dr. Morrow discussed access to healthcare and reproductive health care services in Kitsap County. He said, though COVID-19 is dwindling, the effects continue to linger. He said hospital capacity in Washington state is at an all-time high and hospitals continue to struggle with staffing issues. Additionally, he said there is pent up demand for delayed care during the pandemic. St. Michael Medical Center is seeing a roughly 30% increase in emergency department visits on a monthly basis. Kitsap Public Health urges individuals to utilize primary care providers, when appropriate and available, and avoid risky behavior to prevent overburdening the emergency department.

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Dr. Morrow said maintaining access to comprehensive health services is a core function of all public health agencies, including Kitsap Public Health District. Kitsap Public Health's mission is to prevent disease and protect and promote the health of all persons in Kitsap County. Ensuring equitable access to a full range of reproductive health is essential to Kitsap Public Health's mission. He said the District understands that abortion is a highly charged and emotional topic in our society, and respects and understands that the members of our community have widely ranging views on this matter. From a public health perspective, efforts to restrict access to comprehensive reproductive services create unnecessary health risks, increase mental health and economic burdens on families, and disproportionately impact people of color, transgender people and historically marginalized and underrepresented populations, worsening the types of longstanding health inequities that Kitsap Public Health is committed to address.

Dr. Morrow said the Health District is thankful, and wants to remind residents, that Washington law continues to protect comprehensive reproductive rights, including the legal right to make individual decisions regarding pregnancy. The Health District understands that deciding whether to keep a pregnancy is a difficult and deeply personal choice and supports and defends the right of individuals to make this decision with their healthcare providers. He added that Kitsap Public Health is also committed to ensuring equitable access to health care and social services in our community, including contraception, prenatal care and primary care that can prevent unwanted and unintended pregnancies.

There were no further comments.

Administrator Update:

Mr. Keith Grellner, Administrator, updated the board on two items:

First, he said the Health District is transitioning back to a normal agenda format while coming out of the pandemic. Today's agenda features two program updates from the Health District's Food and Living Environment program and the Nurse-Family Partnership program.

Mr. Grellner reminded the board that there will be no August meeting. The next meeting is September 6, 2022.

There were no further comments.

UPDATE ON NONELECTED/NON-TRIBAL BOARD MEMBER POSITION RECRUITMENT

Mr. Grellner approached the health board regarding nonelected/non-tribal board member position recruitment. He said the recruitment has been going very well and the team has received several fantastic applicants. He said, as of May, the board had received 39 applications for nonelected/non-tribal positions. The Personnel Committee screened applicants and interviewed top five candidates in the public health/health care category on June 24. The interviews went very well. The Personnel Committee will interview top candidates in the

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community/stakeholders category on July 19. The Health District is working to set up additional interview dates in July as needed.

The Committee has also reopened the application period for the consumers of public health category. The original posting only received two qualified candidates. The Committee indicated they wanted a larger pool of candidates and reopened the job posting for that position only. This posting will close on July 14th. Mr. Grellner said the board is on track to have new board members join the board at the September meeting.

Mr. Grellner talked to the American Indian Health Commission (AIHC) and said they are working to recruit two tribal members for the health board but have not made selections yet. He said he hopes to have the two tribal members join the September board meeting as well.

Commissioner Gelder asked if the Personnel Committee's recommendations will come back to the full health board before going to the Board of County Commissioners. Mr. Grellner confirmed this and noted a special meeting may need to be called prior to the September 6 meeting. However, he noted this could also occur at the September board meeting if the interview process takes longer than currently planned.

There was no further comment.

FOOD SAFETY & LIVING ENVIRONMENT PROGRAM

Ms. Dayna Katula, Food Safety & Living Environment (FLE) Program Manager, approached the board with a presentation on the program and informed the board of the Health District's work to update the local food ordinance.

The FLE program works with food safety, camps, smoking and vaping in public places, water recreation facility safety, bed bugs, mold and a variety of other issues. A primary goal of the FLE program is to prevent foodborne and waterborne illnesses. One of the ways the Health District does this is through plan review. Plan review ensures the facilities use safe procedures and that they are in compliance with local and state regulations. Then, the Health District regularly inspects facilities to ensure continued health and safety. Food inspectors are also coordinators, liaisons and educators. Ms. Katula reminded the board that all food inspection scores are public and can be located on the Health District website.

At the June Health Board meeting, a question arose about how the Health District handles food recalls. Ms. Katula explained that food recalls are very common. Recalls are voluntary by the company providing the food and can be due to foreign objects found in a food product, or allergens not accurately labeled, or reported illnesses. She said most recalls start at a national level and the Health District tracks guidance at the state level to see how the recalls are being handled in the state and to what degree Washington residents will be affected. Washington State Department of Health (DOH) typically works with distributors to ensure contaminated products are removed from shelves before reaching the customer. Locally, the Health District often doesn't need to do anything further unless DOH and requests assistance from the Health District

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to work with local stores and restaurants. The Centers for Disease Control and Prevention (CDC) shares bigger recalls with the national media centers to get news of the recall disseminated quickly to the public. In these instances, the Health District helps spread the word by sharing information on social media. Additionally, Ms. Katula noted DOH sends out a weekly bulletin of food recalls and said anyone can subscribe to this notification list to receive updates.

Next, Ms. Katula said the Health Board has a current ordinance, 2014-01 Food Service Regulations, adopted December 2, 2014. The existing ordinance contains some outdated language and is in need of an update for several local requirements. Primarily, this ordinance adopts Chapter 246-215 WAC Washington State Retail Food Code as amended, however, the ordinance also provides some local food service permitting requirements and provides an enforcement framework for program staff. Examples of substantive changes to update the existing 2014 ordinance include:

- Removing duplicative language between the ordinance and WAC 246-215;
- Adding some local definitions of terms like "seasonal food establishment";
- Adding a requirement for Health District review if an operator changes food service equipment in their establishment;
- The addition of an appeals section to the ordinance.

The Health District plans to present the Board with an updated ordinance later this fall after a public comment period. The new ordinance will have received full legal review from the Kitsap County Prosecuting Attorney's office.

Ms. Katula said the Kitsap Food Advisory Council (KFAC) was established in 2019 and is comprised of people who run food establishments as well as community stakeholders. The Health District works with the KFAC to discuss issues and receive feedback on things like fees, policies, and the Food Code changes that went into effect in March, 2022.

Lastly, Ms. Katula talked about the Food and Drug Administration (FDA) Voluntary Retail Program Standards. There are nine standards that the FDA has determined constitutes a food program that is highly effective at reducing the risks at food establishments that are known to cause illness or death. The FLE program has met or is currently working to meet over half of the standards. Ms. Katula noted that some of the standards take years to meet, so this is a big accomplishment for the program.

Commissioner Gelder said the education aspect of inspection creates more of a partnership with establishments than a heavy-handed approach. He said he has witnessed these inspections in person and noted Health District inspectors work with establishments to be successful rather than focus solely on enforcement.

Mayor Erickson noted there had been a cooperative approach for uniform standards for food trucks across county lines in process a few years ago and asked what happened with that. Ms. Katula said that cooperative food truck process did occur but not in the way originally presented. She said a state law was passed, Mobile Food Units – Reciprocity, that changed the way this

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would work. This new law allows mobile food units to undergo a plan review in one county which is transferrable when they apply for a food permit in another county. She said this process seems to be going well. She also noted that the Health District works closely with other counties to ensure consistency between jurisdictions.

Mayor Erickson asked about fencing regulations for pools and whether local zoning regulations effect this issue. Specifically, she inquired if fencing regulations for pools are uniform or if they vary. Ms. Katula said the state pool code is modeled on the national standards, the Model Aquatic Health Code (MAHC) from CDC. She said, as long as all counties are implanting the state pool codes the same way, the regulations should not vary from county to county. She added that inspectors check the fencing each year to ensure it is still intact and structurally sound.

There was no further comment.

NURSE-FAMILY PARTNERSHIP PROGRAM

Ms. Nancy Acosta, Parent Child Health Program Manager, approached the board with an update on the Nurse-Family Partnership (NFP) program. Kitsap Public Health District houses supervision for the local regional (Clallam, Jefferson and Kitsap Counties) NFP program via the Parent Child Health Program. The Health District began implementing NFP in July 2012 as part of a regional team with Jefferson County Public Health that has, in the last year, expanded to also include services in East Clallam County. Ms. Acosta introduced Karina Mazur, NFP Supervisor, and Yaneisy (Jen) Griego, Health Educator, who provided a presentation on the NFP program.

Nurse-Family Partnership pairs low-income, first-time mothers with a Public Health Nurse. Public Health Nurses support families by providing education, support, and resources to help them be the best parents they can be. The NFP team uses an evidence-based approach to give families the tools to find self-efficacy, bond with their babies and break cycles of abuse and neglect during the crucial time of pregnancy (beginning at 28th week) through the child's second birthday. Ms. Griego explained that every \$1 invested in the NFP program saves \$5 in future costs for the highest-risk families served. The NFP demographic is congruent with the local population.

The presentation provided information about the Nurse-Family Partnership model:

- The science behind the program
- Washington data
- Kitsap data
- Client impact

Key goals of the NFP program are to improve pregnancy outcomes, improve child health and development, and improve economic self-sufficiency of the family. Parents receive a referral to their local NFP program where they receive care, information and advice from nurses specially trained in pregnancy, early development and the unique NFP proven model. The NFP model has

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some of the most extensive and compelling outcomes in this field, based on pilot groups and trials.

Funding sources for the NFP program include:

- WA Department of Children, Youth & Families
- Maternal Child Health Block Grant
- Kitsap County 1/10 of 1% Sales Tax
- Healthy Start Kitsap
- Kitsap County Department of Behavioral Health and Rehabilitation
- Local Dollars

Local in-kind partnerships include:

- Eastside Baby Corner
- Stitch N Serve

Ms. Mazur explained the importance of supporting the parents in their goals and endeavors too, such as finding employment, advancing their education, or getting help for substance abuse. She noted building trust and connection with families became difficult during the pandemic when nurses couldn't meet face-to-face with clients. She said the program found creative ways to connect with families, including telehealth visits, porch drop offs of needed supplies, and outdoor masked interactions.

Commissioner Gelder asked what the main referral source is for this program. He also asked if the program has capacity requirements and ever has to turn anyone away. Ms. Griego said NFP works with quite a few community partners for referrals, including WA Department of Social and Health Services (DSHS), Peninsula Community Health Services (PCHS), schools, the justice community and healthcare providers. Ms. Mazur added that a recent referral came from the police department. Additionally, Ms. Mazur said the program is in high demand and does have a robust waitlist right now. The program is currently recruiting for another nurse and is seeking additional funding and expansion opportunities to meet the needs of the community.

Mayor Erickson asked how individuals are selected off the waitlist. Ms. Mazur said the team evaluates who the program can best serve, which tends to be the youngest mothers. The team looks at age of referral, number of referrals, level of risk, and other factors to determine who is selected from the waitlist. Additionally, the providers share stories with NFP staff that help inform the decision.

Mayor Erickson asked if any of the funding was federal and if the funding will be limited with the changes occurring federally. Ms. Mazur said the program would certainly be affected if federal funding was reduced or cut and said the program is always looking for additional sources of funding. Ms. Acosta added that majority of the program funding comes from the state Department of Children, Youth and Families which also releases expansion grants from time to time.

Kitsap Public Health Board Regular Meeting July 5, 2022 Page 8 of 8

Mr. Grellner noted that the agency is working with the county to obtain more funding for NFP through 2024.

There was no further comment.

ADJOURN

There was no further business; the meeting adjourned at 11:47 a.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; Mayor Greg Wheeler; Commissioner Ed Wolfe.

Board Members Absent: None.

Community Members Present: See attached.

Staff Present: Nancy Acosta, Program Manager, Parent Child Health; Amy Anderson, Public Health Educator, Public Health Emergency Preparedness and Response; Angie Berger, Administrative Assistant, Administration; Eric Evans, Program Manager, Drinking Water and Onsite Sewage; April Fisk, Program Coordinator, Contracts Manager, Public Records & Safety Officer, MAC, Administration; Anna Gonzalez, Public Health Nurse, Communicable Disease; Keith Grellner, Administrator, Administration; Yaneisy Griego, Bilingual Community Health Worker, Parent Child Health; Karen Holt, Program Manager, Human Resources; Rosalie Howarth, Environmental Health Specialist, Food and Living Environment; Dayna Katula, Manager, Food and Living Environment; John Kiess, Director, Environmental Health Division; Sarah Kinnear, Community Liaison, Chronic Disease Prevention; Siri Kushner, Assistant Director, Community Health Division; Karina Mazur, Public Health Nurse Supervisor, Parent Child Health; Anne Moen, Public Health Educator, Public Health Emergency Preparedness and Response; Megan Moore, Community Liaison, Chronic Disease Prevention; Dr. Gib Morrow, Health Officer, Administration; Carin Onarheim, Disease Intervention Specialist, Communicable Disease; Layken Winchester; Environmental Health Specialist, Food & Living Environment; Janet Wyatt, Public Health Nurse, Parent Child Health.

Kitsap Public Health Board Meeting (Virtual Attendance)

Webinar ID Actual Start Time Attendee Count

861 8605 2497 7/5/2022 10:05 40

NAME JOINED BY PHONE

Amy Anderson 13607282301

Angie Berger (she / her)

Anna Gonzalez

Anne

Anne Moen

April Fisk

Becky Erickson

BKAT

Carin Onarheim

Charlotte Garrido

Dave

Dayna Katula

Ed Wolfe

Eric Evans

Gib Morrow

Greg Wheeler

Janet wyatt (she/her)

John Clauson - Kitsap Transit

John Kiess

Karen Holt

Karina Mazur (she/her)

Keith Grellner

KIRO News Radio

KIRO Radio

Layken

Marc Miller

Megan Moore (she/her)

Nancy Acosta

Rob Putaansuu

Robert Gelder

Rosalie

Sarah Kinnear

siri kushner

Stacey Smith

Yaneisy (Jen) Griego



MEMO

To: Kitsap Public Health Board

From: John Kiess, Environmental Health Director

Date: September 6, 2022

Re: Proposed Ordinance 2022-02, Food Service Regulations

<u>Background</u>

The Health Board has a current <u>Ordinance 2014-01</u>, <u>Food Service Regulations</u>, adopted December 2, 2014. The existing ordinance contains some outdated language and is in need of an update to incorporate several local requirements. At the July 5, 2022, Board meeting, the Board was made aware of the Health District's plans and efforts to update this ordinance.

Summary of Proposed Ordinance 2022-02

Attached for your review, please find proposed Ordinance 2022-02, Food Service Regulations. Primarily, this ordinance adopts <u>Chapter 246-215 Washington Administrative Code (WAC) Food Service</u> as amended, however, the ordinance also provides some local food service permitting requirements and provides an enforcement framework for program staff (see the attached comparison summary document, Attachment 2). Examples of substantive changes proposed in Ordinance 2022-02 as compared to Ordinance 201-01 include:

- Removing duplicative language between the ordinance and WAC 246-215;
- Adding some local definitions of terms like "seasonal food establishment";
- Adding a requirement for Health District review and approval if an operator changes food service equipment in their establishment; and
- The addition of an appeals section to the ordinance.

Health District staff solicited comments about this proposed ordinance through the Health District's electronic notification system and social media outlets and held an in-person open house on August 4th (see announcement, Attachment 3). Notification was also sent to all existing food service permit holders and a reminder message was attached to all electronic inspection reports during the comment period (see Attachment 4). Comments on the proposed changes were welcomed through the Health District website, phone, or mail during the period of July 5 - August 12. The proposed ordinance has been reviewed by the Kitsap County Prosecutor's Office and public notice of today's possible action on the changes was posted in the Kitsap Sun on August 26, 2022.



Memo to Kitsap Public Health Board – *Food Service Regulations* September 6, 2022 Page 2

The Health District received one written comment about the ordinance with some questions and suggested grammatical edits, some of which have been incorporated into the document.

Recommended Action

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

The Board moves to approve Ordinance 2022-02, Food Service Regulations and to repeal Ordinance 2014-01, effective immediately.

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:

- 1. Proposed Ordinance 2022-02, Food Service Regulations
- 2. Comparison Summary of Food Service ordinance changes
- 3. Food Service Regulations update announcement
- 4. Inspection attachment reminder for permitted establishments



FOOD SERVICE REGULATIONS

An Ordinance Updating Food Service Regulations Adopting and Implementing Chapter 246-215 WAC and Repealing Ordinance 2014-01

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, food safety inspections of restaurants, grocery stores, school cafeterias, caterers, food delivery services, farmers market food vendors, bakeries, meat and fish markets, and taverns are a proven and effective means of ensuring safe food handling techniques and preventing foodborne disease; and

WHEREAS, education and training of food service employees and persons in charge of food establishments are also a proven and effective means of ensuring safe food handling techniques and preventing foodborne disease; and

WHEREAS, certain sections of existing Ordinance 2014-01 are obsolete, need clarification and/or restructuring.

NOW, THEREFORE, BE IT ORDAINED, that the Kitsap Public Health Board does authorize and approve Ordinance 2022-02, *Food Service Regulations*, as set forth in the attached, effective immediately and until further notice. Kitsap Public Health Ordinance 2014-01, effective December 2, 2014, is hereby repealed.

APPROVED: September 6, 2022	EFFECTIVE DATE: September 6, 2022
Mayor Greg Wheeler, Chair	
Kitsap Public Health Board	

KITSAP PUBLIC HEALTH BOARD

ORDINANCE 2022-02

FOOD SERVICE REGULATIONS

EFFECTIVE
September 6, 2022

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1. AUTHORITY, PURPOSE AND OBJECTIVES

- A. Pursuant to Chapters 43.20.050(5), 70.05.060, 70.46.060 Revised Code of Washington (RCW), and Chapter 246-215 Washington Administrative Code (WAC), the purpose of these regulations is to safeguard public health and provide to consumers food that is safe, unadulterated, and honestly presented.
- B. It is expressly the purpose of these regulations to provide for, and promote the health of, the general public and not to create or otherwise establish or designate any particular class or group of persons who will, or should be, especially protected or benefited by the terms of these regulations.
- C. Nothing contained in these regulations is intended to be, nor shall be construed to create or form, the basis for any liability on the part of the Kitsap Public Health Board or the Kitsap Public Health District or its officers, employees, or agents, for any injury or damage resulting from the failure of any person subject to these regulations to comply with these regulations, or by reason or in consequence of any act or omission in connection with the implementation or enforcement of these regulations on the part of the Kitsap Public Health District.
- D. These regulations are intended to coordinate with other applicable state and local rules for water supply; sewage conveyance, treatment, and disposal; solid and hazardous waste handling; smoking in public places; and building, plumbing, and mechanical.
- E. It is the specific intent of this ordinance to place the obligation of complying with its requirements upon the owner or operator of a food establishment. 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.

2. ADMINISTRATION

- A. The Health Officer shall administer and enforce these regulations under the authority of 70.05.070 RCW.
- B. The Health Officer is authorized to take other such actions as he or she deems necessary to maintain public health and sanitation and to carry out the purpose of this ordinance.
- C. Through the authority of the Kitsap Public Health Board as granted in RCW 70.05.060, the Health Officer may charge fees for the administration of this ordinance. Fees will be charged in accordance with the fee schedule approved by the Kitsap Public Health Board.

3. DEFINITIONS

The definitions in WAC 246-215, *Washington State Retail Food Code*, are hereby adopted by reference. Unless specified herein, all words and terms shall be defined by their common dictionary definition.

Change of Ownership --- When the owner of a food establishment changes to a different individual, partnership, corporation, association, or other legal entity; neither the menu nor equipment within the establishment have changed from the time the previous owner was operating the establishment; and there is no interruption of the ongoing operation of the establishment.

Health Board --- The Kitsap Public Health Board, formed under, and subject to, Chapters 70.05 and 70.46 RCW to protect the public health of Kitsap County.

Health District --- The Kitsap Public Health District.

Health Officer --- The Health Officer of the Kitsap Public Health District, or their designee.

Menu --- A list of food prepared by and served at a food establishment, the style of food served at a food establishment, and the method of preparation to serve that style of food.

Permanent Food Establishment Permits --- The type of permit issued when the food service operation does not qualify for a Temporary Food Establishment Permit.

Seasonal Food Establishment --- A permanent food establishment that operates not more than nine consecutive months within a twelve-month period.

Valid Permit --- Current, written approval to operate a food establishment by the Health Officer.

4. JURISDICTION AND APPLICABILITY

- A. These regulations shall apply to all territory contained within the boundaries, and under the supervision, of the Kitsap Public Health Board.
- B. The requirements of these regulations apply to an operation that meets the definition of a "food establishment" or "temporary food establishment" as defined in WAC 246-215.

5. LOCAL POLICIES - ADOPTION BY REFERENCE

- A. The Health Officer shall have the authority to interpret these regulations and may develop and implement policy, within the scope of these regulations, as they determine necessary to protect public health.
- B. Local Standards and Policies, as they now exist or are hereafter amended, are hereby adopted by reference and expressly made part of these regulations.

6. MINIMUM STANDARDS FOR FOOD SERVICE

The rules and regulations of the Washington State Board of Health for food service, as set forth in WAC 246-215, or as amended, are hereby adopted and incorporated herein by reference.

A. Permanent Food Establishment Permits

1. Permit required

- a. A valid permit from the Health Officer is required to operate a food establishment. No person shall operate a food establishment without a valid permit from the Health Officer unless specifically exempted by these regulations, or the Health Officer.
- b. A food establishment shall not be remodeled (i.e., altered, modified, or expanded) without review and approval by the Health Officer. A person proposing the remodel of a food establishment shall apply for a permit in accordance with these regulations.
- c. The menu for a food establishment shall not be changed without review and approval by the Health Officer. An applicant shall apply for a menu change in accordance with these regulations unless otherwise approved by the Health Officer.

d. The equipment for a food establishment shall not be changed without review and approval by the Health Officer. An applicant shall apply for an equipment review in accordance with these regulations unless otherwise approved by the Health Officer.

2. Permit issuance

A permit to operate a food establishment shall be issued to the applicant by the Health Officer when the Health Officer has determined that:

- a. A complete, accurate, and factual application has been received by, and is on file with, the Health District;
- b. The permit applicant has demonstrated compliance with these regulations; and
- c. The permit applicant has made payment to the Health District for any and all fees required by these regulations. Permit application fees are non-refundable.

3. Period of permit validity

- a. A permit is valid for up to one calendar year, generally July 1 through June 30, and all permits shall expire on June 30th of each calendar year. In extenuating circumstances, the Health Officer may alter the date of the permit expiration date.
- b. The Health Officer may, at their discretion, prorate permit application fees on a semi-annual basis depending on the date of submittal.

4. Conditions for permit retention

- a. Upon acceptance of the permit issued by the Health Officer, the permit holder shall comply with these regulations and WAC 246-215.
- b. It is the permit holder's responsibility to notify the Health District of changes in contact information, ownership, or food preparation and service.

5. Permit transfer

Permits are not transferable from person-to-person nor location-to-location.

6. Permit renewal

- a. A permit holder may apply to renew an expiring permit by submitting the appropriate and designated permit fee to the Health District prior to the expiration of the valid permit.
- b. The Health Officer may renew a permit in accordance with Section 6.A.2.

7. Denial of a permit application

The Health Officer may deny a permit application in accordance with these regulations and WAC 246-215.

8. Changes of ownership

- a. The new permit holder shall submit an application for a permit, and other forms required by the Health Officer, made on forms, or by means, specified by the Health Officer within 30 days of the change of ownership effective date. An applicant shall submit the designated fee(s) with the application(s).
- b. After the effective date of a change of ownership, the food establishment will be reviewed to ensure compliance with these regulations, WAC 246-215, and other applicable environmental regulations under the authority of the Health District.
- c. The Health Officer will submit in writing to the person-in-charge of the food establishment a summary of renovations, menu changes, or equipment changes necessary for the food establishment to be brought into compliance with current rules and regulations per Section 6.A.8.b. Changes cannot be made without Health Officer review and approval. An applicant shall apply for plan review, menu change, or equipment review in accordance with these regulations unless otherwise approved by the Health Officer.

B. Temporary Food Establishment Permits

1. Permit required

- a. A valid permit from the Health Officer is required to operate a temporary food establishment. No person shall operate a temporary establishment without a valid permit from the Health Officer unless specifically exempted by these regulations, or the Health Officer, to do so.
- b. A menu for a temporary food establishment shall not be changed without review and approval by the Health Officer.
- c. A temporary food establishment shall operate only at locations, times, and public events approved by the Health Officer.

2. Application for permit

An applicant shall a submit an application for a permit to the Health Officer at least 14 calendar days before the date planned for operating a temporary food establishment. Application for a permit shall be made on forms, or by means, specified by the Health Officer. An applicant shall submit the designated fee with an application for permit.

3. Permit issuance

A permit to operate a temporary establishment shall be issued to the applicant by the Health Officer when the Health Officer has determined that:

- a. A complete, accurate, and factual application has been received by, and is on file with, the Health District;
- b. The permit applicant has demonstrated compliance with these regulations; and
- c. The permit applicant has made payment to the Health District for any and all fees required by these regulations. Permit application fees are non-refundable.

4. Period of permit validity

A permit for a temporary food establishment is valid until the expiration date noted by the Health Officer.

5. Conditions for permit retention

Upon acceptance of the permit issued by the Health Officer, the permit holder shall comply with these regulations and WAC 246-215.

6. Permit transfer

Permits are not transferable from person-to-person nor location-to-location.

7. Denial of permit application

The Health Officer may deny a permit application in accordance with these regulations and WAC 246-215.

C. Access and inspection required

Plan Review Site Inspection

A plan review site inspection by the Health Officer shall be completed before the plan review approval is issued. The Health Officer may, at their discretion, waive the requirement for a plan review site inspection.

2. Pre-operational Inspection

A pre-operational inspection by the Health Officer shall be completed before a permit is issued to operate a food establishment. The Health Officer may, at their discretion, waive the requirement for a pre-operational inspection.

3. Reinspection

A reinspection may be required by the Health Officer, or requested by the permit holder, in accordance with these regulations.

7. ENFORCEMENT

- A. The Health Officer may suspend or revoke any permit to operate a food establishment for failure to submit required fees.
- B. Any person whose food establishment permit has been suspended or revoked may make written application to the Health Officer for reinspection, a hearing, or a new application in accordance with WAC 246-215. The written application for reinspection, hearing, or new

- application shall be made on forms, or by other means, specified by the Health Officer and shall include the applicable fee.
- C. As an alternative to the enforcement provisions set out above, the Health Officer may determine that the violation of any provision of these regulations is designated as a Class 1 civil infraction pursuant to RCW 7.80, Civil Infractions.
- D. The Health Officer may issue a notice of civil infraction if he or she has reasonable cause to believe that a person has violated any provision of these regulations or has not corrected a 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.
- E. Violations, Notice, Remedies, and Penalties.
 - 1. Violations.
 - a. Violations of these regulations may be addressed through the remedies and penalties provided in these regulations.
 - 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 food establishment owner, or to any person causing, allowing, or participating in the violation.
 - b. Content. The notice and order to correct violation shall contain:
 - The name and address of the food establishment owner or other persons to whom the notice and order to correct violation is directed;

- ii. 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;
- iii. A description of the violation and a reference to that provision of these regulations which has been, or is being, violated;
- iv. 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;
- v. 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;
- vi. 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
- vii. 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 documentation 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 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 the 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:
 - i. Utilize any remedy or penalty specified within these regulations; and/or
 - ii. Abate the health violation using the procedures of these regulations; and/or
 - iii. Pursue any other appropriate remedy at law or equity.

3. Remedies.

- a. Written Assurance of Compliance. The Health Officer may accept a written assurance of compliance with the remedies outlined in the notice of order to correct violation. Failure to comply with the written assurance of compliance without pursuing an alternative remedy shall be a further violation of these regulations.
- b. 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.
- c. 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.
- d. 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.

- i. The violation of any provision of these regulations is designated as a Class 1 civil infraction pursuant to RCW 7.80, *Civil Infractions*.
- ii. 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.

- i. 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.
- ii. 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 7.E.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.
- iii. Any person who fails, neglects, or refuses to comply with a written assurance of discontinuance or a voluntary correction agreement pursuant to Section 7.E.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.

- i. 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 performed to determine compliance with its permit, applicable regulations, or correction/compliance specified in a notice and order to correct violation, civil infraction, misdemeanor, or court ordered compliance date.
- ii. 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.

8. 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. A written application for administrative review shall be submitted to the Health Officer within 10 business days of the enforcement action.
- b. 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.
- c. The Environmental Health Director may extend this timeline, for good cause, for up to an additional 15 days.

- d. 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. 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.
 - b. 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.
 - c. The Health Officer may extend this timeline, for good cause, for up to an additional 15 days.
 - d. 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 the Health Board.
 - a. 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.
 - b. 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.
 - c. 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.

9. 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.

10. SEVERABILITY

If any provision of these regulations or its application to any person or circumstance is held invalid, the remainder of these regulations, or the application of the provision to other persons or circumstances shall not be affected.



Attachment 2

SUMMARY AND COMPARISON OF MAJOR ELEMENTS BETWEEN EXISTING AND PROPOSED FOOD SERVICE REGULATIONS

Existing KPHB Ordinance 2014-01	Proposed 2022 Ordinance Amendment	Notes
Document is formatted in old style.	Document was reformatted in current style.	Reformatting occurred to ensure consistent formatting between KPHD ordinances.
Unnecessarily includes language from Chapter 246- 215 Washington Administrative Code (Washington State Retail Food Code).	Unnecessary language from the Washington State Retail Food Code was eliminated.	The Food Service Regulations ordinance adopts the Washington State Retail Food Code (Food Code); therefore, language already included in the Food Code is extraneous to the ordinance.
 Definition section A definition for "Permanent Food Establishment Permits" is not included. "Public Health Board" definition is simplistic. "Seasonal Food Establishment" definition was unclear during application instances. 	 A definition of "Permanent Food Establishment Permits" was added. The definition of "Public Health Board" was expanded. The definition of "Seasonal Food Establishments" was clarified. 	Definitions do not differ from how they are currently implemented.
A "Local Policies- Adoption by Reference" section is not included.	A "Local Policies- Adoption by Reference" section was added.	Adding this section explicitly states that local policies and standards are included as part of these regulations.
A rule that existing structures cannot be converted to a food establishment until the Health Officer has reviewed and approved the conversion proposal was included.	This rule was omitted.	All proposed food establishments must be reviewed and approved by the Health Officer, even it was a food establishment in the past. This rule was extraneous.
The requirement for an operator to go through review and gain approval from the Health Officer prior to changing equipment is not included.	The requirement for an operator to go through review and gain approval from the Health Officer prior to changing equipment was added.	This requirement is standard and in written policy already.
All permits shall expire on June 30 th of each calendar year.	A statement granting the Health Officer flexibility to alter the permit expiration date during an extenuating circumstance was added.	The current ordinance does not allow us to extend permit expiration dates when needed.
The requirement for a plan review site inspection is not included.	The requirement for a plan review site inspection was added.	This requirement is in written policy already.
The "Enforcement" section did not include language regarding violations, notice, remedies, and penalties.	Language to expand on enforcement steps was added.	The enforcement steps do not differ from how they are currently implemented.
An "Appeals" section is not included.	An "Appeals" section was added.	Adding this section explicitly states the appeal process.





July 5, 2022

Kitsap Public Health District seeks comment on Food Service Regulations Ordinance

Public hearing planned for the September 6 Kitsap Public Health Board meeting.

KITSAP COUNTY, WA — The Kitsap Public Health District is seeking public comment on a proposed update to the Food Service Regulations Ordinance, which provides a structure for Health District staff to enforce Washington state food safety laws and rules.

The proposed ordinance would replace existing Food Service Regulations <u>Ordinance 2014-01</u>. See the question and answer section below for additional information.

An open house is scheduled for anyone to attend who has questions or concerns about the current or proposed ordinance. Heath District staff will be present at the open house to accept comments, answer questions, and address concerns. Information about the ordinance update process will be presented to the <u>Kitsap Public Health Board</u> on July 5. A public hearing will be held during the Health Board's next regular meeting, scheduled for 12:30-1:45 p.m. on Tuesday, September 6.

Documents:

- Draft 2022 Food Service Regulations
- Current (2014) Food Service Regulations
- Summary and Comparison of Major Elements Between Existing and Proposed Food Service Regulations

Submitting comments:

Comments on the proposed ordinance update will be accepted through Friday, August 5, 2022. Please submit comments or questions via:

- **Email:** pio@kitsappublichealth.org
- Mail: Kitsap Public Health District, ATTN: Food Ordinance, 345 6th Street Suite 300, Bremerton, WA 98337
- **Open house (in-person):** August 4, 2022, from 5:00 to 6:00 pm in the Chambers Room at the Norm Dicks Government Center.

For additional information, call Dayna Katula at 360-728-2301.

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QUESTIONS AND ANSWERS

Why does the Health District need this ordinance?

The Kitsap Public Health Board, who governs the Health District's work, adopted the local ordinance to prevent and respond to foodborne illnesses in Kitsap County. The Food Service Regulations ordinance provides a clear framework for Health District staff to enforce state rules at the local level.

To whom does this ordinance apply?

All food establishments in Kitsap County. A section in the ordinance adopts the rules in the Food Code, meaning that both the state and local regulations apply.

How has the Health District used this ordinance in the past?

The Food Safety Regulations ordinance has been used to give Health District staff the authority to inspect food establishments and enforce food safety rules outlined in the Food Code. It also allows them to issue citations in situations that endanger public health.

Why does the Health District need to update the ordinance?

The current Food Safety Regulations ordinance was adopted eight years ago and is outdated. The Food Code, which is adopted by the ordinance, was recently updated and went into effect on March 1, 2022. The proposed 2022 ordinance has incorporated language to align with more modern environmental health ordinances used by the Health District and to ensure no conflicting rules were present.





PROPOSED 2022 FOOD SERVICE REGULATIONS ORDINANCE

We want your feedback. Questions or comments will be accepted through August 5, 2022

GO TO:

kitsappublichealth.org/FoodRegs

Or use your phone camera to scan this code:



QUESTIONS OR CONCERNS?

Call Dayna Katula at 360-728-2301.





PROPUESTA DE ORDENANZADE REGULACIONES DEL SERVICIO DE ALIMENTOS DE 2022

Queremos sus comentarios. Se aceptarán preguntas o comentarios hasta el 5 de agosto de 2022

VAYA A:

kitsappublichealth.org/FoodRegs

O use su la cámara de su teléfonopara escanear este código:



PARA PREGUNTAS O INQUIETUDES:

Llame al Distrito de Salud Pública de Kitsap al 360-728-2235.



MEMO

To: Kitsap Public Health Board

From: Keith Grellner, Administrator, on behalf of Personnel Committee

Date: September 6, 2022

Re: Resolution 2022-08, Approving Personnel Committee Recommendations for Nonelected /

Non-Tribal Health Board Nominees Dr. Michael Watson, Mr. Drayton Jackson, and Dr. Tara

Kirk Sell

Attached, please find proposed Resolution 2022-08 for the Health Board's review, consideration, and approval. Through the resolution, the Personnel Committee (Chair/Mayor Wheeler, Councilperson Hytopoulos, and Commissioner Wolfe) is recommending Health Board approval of the following persons as nominees to fill three new nonelected/non-Tribal Health Board member positions required by RCW 70.46.031 and WAC 246-90:

- 1. Dr. Michael Watson, MD for the Public Health, Health Care Facilities, and Health Care Providers category (Initial term of two years). Dr. Watson is the Program Director for the Northwest Washington Family Medicine Residency, an active attending physician for CHI-Franciscan Health Medical Center, and a clinical assistant professor appointee for the Department of Family Medicine at the University of Washington School of Medicine. Dr. Watson graduated from Texas Tech Health Sciences Center School of Medicine in 2001, completed family medicine residency training in 2004 at Naval Hospital Jacksonville, and served on active duty in the Navy until 2008. Dr. Watson is a resident of Kitsap County and has one child attending Central Kitsap High School and one child studying at the University of San Diego.
- 2. Mr Drayton Jackson for the Consumers of Public Health category (Four-year term). Mr. Jackson, who has experienced poverty and homelessness and whose family has lived experience with the Women, Infants, and Children (WIC) and Supplemental Nutrition Assistance Program (SNAP), is the Executive Director of Foundation for Homelessness & Poverty Management, the current president of the Central Kitsap School District School Board, and an advisory board member of the Urban Institute for the Center for Consumer Engagement in Health Innovation. Mr. Jackson is a resident of Kitsap County.



Memo to Kitsap Public Health Board September 6, 2022 Page 2

3. <u>Dr. Tara Kirk Sell, PhD, for the Other Community Stakeholder category (Four-year term).</u> Dr. Sell is a senior scholar for Johns Hopkins Bloomberg School of Public Health at the Johns Hopkins University Center for Health Security and an assistant professor in the Department of Environmental Health and Engineering at Johns Hopkins, as well as an advisory council member for the Bremerton YMCA and a member of the Bremerton Schools and Alumni Foundation. Dr. Sell is a native of Bremerton and currently resides in Bremerton with her two elementary school-age children and husband. Dr. Sell received her PhD in Health Policy Management from the Johns Hopkins Bloomberg School of Public Health and was a silver medalist in swimming for the U.S.A. in the 2004 Olympic games.

Following direction from the Health Board and its Policy Committee (Mayors Becky Erickson and Rob Putaansuu, and Commissioner Gelder), the Personnel Committee and Health District <u>actively started soliciting</u> for applicants to the three nonelected/non-Tribal member categories in May 2022. A total of sixty-three applications were received for the three positions. The Personnel Committee reviewed and selected 15 applicants (<u>see WAC 246-90-020(6)</u>) from the group to interview. Interviews were conducted over several dates in June and July, and selections of the nominees were completed on August 9, 2022.

If the recommended nominees are approved by the full Health Board via approval of Resolution 2022-08, the next step in the selection and appointment process is to forward Resolution 2022-08 to the Kitsap Board of County Commissioners for formal approval and official appointment (see RCW 70.46-031(1)(b) and WAC 246-90-030(1)). If approved by the Health Board and approved by the County Commissioners, the new members may be available to join the Health Board for its October 4, 2022, meeting.

As a reminder, in accordance with the <u>Bylaws</u> update the Health Board approved in June 2022 (See Article IV(7), the Public Health / Health Care position will serve an initial term of two years, and the Consumers of Public Health and Other Community Stakeholders positions will serve a term of four years) in order to stagger the appointments to provide board member continuity during times of transition to new members.

Recommended Action:

The Health Board may wish to consider making and taking the following action:

The Board moves to approve Resolution 2022-08, Approving Personnel Committee Recommendations for Nonelected / Non-Tribal Health Board Member Nominees Dr. Michael Watson, Mr. Drayton Jackson, and Dr. Tara Kirk Sell, and directs the Board's Executive Secretary to forward to, and coordinate with, the Kitsap Board of County Commissioners for formal approval and appointment of the nominees to the Kitsap Public Health Board.

If you have any questions or comments, please call Keith Grellner at (360) 728-2284, or email him at keith.grellner@kitsappublichealth.org.

Attachment (1)





Approving Personnel Committee Recommendations for Nonelected / Non-Tribal Health Board Member Nominees Dr. Michael Watson, Mr. Drayton Jackson, and Dr. Tara Kirk Sell

WHEREAS, on May 10, 2021, Governor Inslee signed into law <u>Engrossed Second Substitute</u> <u>House Bill 1152</u>, Supporting measures to create comprehensive public health districts; and

WHEREAS, Engrossed Second Substitute House Bill 1152 (E2SHB 1152) amended Revised Code of Washington (RCW) Chapter 70.46.031 to modify the required membership structure of single county district boards of health to include nonelected and Tribal representatives and to ensure that the number of elected officials on the local board of health equals the number of the sum of nonelected and Tribal members; and

WHEREAS, on April 13, 2022, the Washington State Board of Health adopted Washington Administrative Code (WAC) Chapter 246-90, Local Board of Health Composition, to administratively enact the amendments to RCW 70.46.031; and

WHEREAS, on May 23, 2022, the Kitsap Board of County Commissioners approved Ordinance No. 614-2022 to amend Kitsap County Code Chapter 9.52, Kitsap Public Health District, to modify its membership structure and other related details to comply with E2SHB 1152 and WAC 246-90; and

WHEREAS, on June 7, 2022, the Kitsap Public Health Board approved amendments to its Bylaws to modify its membership structure and other related details to comply with E2SHB 1152 and WAC 246-90; and

WHEREAS, Kitsap County Code Chapter 9.52 and the Bylaws established a revised membership structure to consist of ten members comprised of the following: five elected members (one county commissioner plus four city mayors or city council persons), two Tribal members (one representative from each federally recognized tribe that holds reservation, trust lands, or has usual and accustomed areas within Kitsap County), and three nonelected members from the three categories specified in E2SHB 1152 and WAC 246-90; and

WHEREAS, E2SHB 1152 and WAC 246-90 provides for the American Indian Health Commission to select Tribal representatives to serve on a local board of health; and

WHEREAS, the Kitsap Public Health Board's Personnel Committee was tasked with and conducted an extensive recruitment and interview process to identify nonelected member nominees that included 63 applications and 15 interviews for the three membership categories of public health, health care facilities, and health care providers; consumers of public health; and other community stakeholders; and



KITSAP PUBLIC HEALTH BOARD RESOLUTION 2022-08

Continued...

WHEREAS, the Personnel Committee has selected the following individuals as its recommended nominees to the full Health Board for the three nonelected and non-Tribal member category positions:

- 1. **Dr. Michael Watson, MD**, for the public health, health care facilities, and health care provider position. Dr. Watson is the Program Director for the Northwest Washington Family Medicine Residency, an active attending physician for CHI-Franciscan Health Medical Center, and a clinical assistant professor appointee for the Department of Family Medicine at the University of Washington School of Medicine. Dr. Watson will serve a term of two years.
- 2. **Mr. Drayton Jackson** for the consumers of public health position. Mr. Jackson, who has experienced poverty and homelessness and whose family has lived experience with the Women, Infants, and Children (WIC) and Supplemental Nutrition Assistance Program (SNAP), is the Executive Director of Foundation for Homelessness & Poverty Management, the current president of the Central Kitsap School District School Board, and an advisory board member of the Urban Institute for the Center for Consumer Engagement in Health Innovation. Mr. Jackson will serve a term of four years.
- 3. **Dr. Tara Kirk Sell, PhD**, for the other community stakeholder position. Dr. Sell is a senior scholar for Johns Hopkins Bloomberg School of Public Health at the Johns Hopkins University Center for Health Security and an assistant professor in the Department of Environmental Health and Engineering at Johns Hopkins, as well as an advisory council member for the Bremerton YMCA and a member of the Bremerton Schools and Alumni Foundation. Dr. Sell will serve a term of four years.

NOW, THEREFORE, BE IT RESOLVED that the Kitsap Public Health Board hereby approve and nominate Dr. Michael Watson, Mr. Drayton Jackson, and Dr. Tara Kirk Sell to the Kitsap Board of County Commissioners for formal appointment as the nonelected/non-Tribal Health Board positions on the Kitsap Public Health Board effective October 1, 2022.

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Mayor Greg Wheeler, Chair
Kitsap Public Health Board

APPROVED: September 6, 2022