

**KITSAP PUBLIC HEALTH BOARD
MEETING MINUTES
Regular Meeting
February 1, 2022**

The meeting was called to order by Board Chair, Mayor Greg Wheeler at 12:31 p.m.

REVIEW AND APPROVE AGENDA

There were no changes to the agenda.

BOARD MEETING MINUTES

Mayor Becky Erickson moved and Commissioner Ed Wolfe seconded the motion to approve the minutes for the January 4, 2022, regular meeting. The motion was approved unanimously.

CONSENT AGENDA

The February consent agenda included the following contracts:

- 1869 Amendment 3 (2231), *Olympic Community Health, Change Plan*
- 2183 Amendment 1 (2219), *Kitsap County, Youth Cannabis and Commercial Tobacco Prevention Program*
- 2203 Amendment 1 (2228), *WA State Department of Health, Consolidated Contract*
- 2216, *North Kitsap School District, Covid-19 Case Investigation Assistance*
- 2217, *South Kitsap School District, Covid-19 Case Investigation Assistance*
- 2229, *Bainbridge Island School District, Covid-19 Case Investigation Assistance*

Mayor Erickson moved and Councilperson Kirsten Hytopoulos 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

Chair Wheeler provided each member of the public three minutes to speak.

Dan Bogar said he worked at the Puget Sound Naval Shipyard for thirty-seven years. He said the VAERS system is an early warning system for vaccines, much like a radar system for symptoms. He said this radar system is alarming with the number of adverse reactions reported in the last year, which exceeded all other reports of vaccine reactions in the hundred-year history of the VAERS system. Mr. Bogar said that the gene therapy vaccinations have been shown to be among the least effective of modern vaccines at preventing breakthrough transmission and string mutations. He said that, since the start of 2021, there have been 227 deaths associated with COVID-19 vaccines in Washington State, while during the same time period there were only 4 deaths associated with any other vaccine in Washington State. Mr. Bogar stated the children 17 and younger in the VAERS system have had 44 heart disease issues reported and five serious neurological problems. He said 43 of the heart disease cases followed the second dose of the Pfizer Bio-Tech vaccine, 1 of the cases followed the first dose of the Pfizer Bio-tech vaccine, however this case was previously diagnosed with Autism. He continued stating that both

myocarditis and pericarditis were the symptoms most directly to the vaccines. He said these cases were missed in all previous testing until children began to receive the vaccine. He said that the pillar of pandemic responses is early treatment. Mr. Bogar stated that over 200 studies have shown that early treatment is more effective versus waiting to go to the hospital. He said clinical physicians that were treating patients reported a 50-80% better survival rate than standard CDC and NIH mandated protocols. He said clinicians reported that in the first 72 hours from a positive test are the most important. He went on to share an October 2021 vaccine cost-benefit analysis from Columbia University Irving Medical Center which demonstrated that mortality rates are higher in those COVID-19 vaccinated who were 25 and under. This study didn't require that primary symptom cause or death be associated to the vaccine. He encouraged the board to read all the children's reports and thanked them for their time. Chair Wheeler encouraged Mr. Bogar to send any other information to the Health Board.

Jay Huffman from Poulsbo spoke to the board regarding resources he believes the community will benefit from. He said he'd like to share his conclusion with the community members and the Board of Kitsap County regarding research that he has done so that they can have balanced information for making decisions. He said we know that from the data in our county we have virtually no risk of serious issues from COVID-19, however there is the risk of the adverse events or serious events due to the COVID-19 vaccine. He noted that some will say it's a small group who has reactions, but nobody says it's zero. He stated that it is important for Kitsap County residents to know that they can check out the national Public Health Emergency website, PHE.gov. He also noted that, when reading through the Public Readiness and Emergency Preparedness (PREP) Act declaration, which we have been under for two years, the only recourse for those who lose a family member or their ability to work is the Countermeasures Injury Compensation Program (CICP). Mr. Huffman said that this program only pays out about 6% of the time and doesn't cover many costs. He said the death benefit is just over \$300 thousand and noted that wouldn't provide for a family if they lost a working mother or father or parent who is non-working and taking care of children. He suggested that, since there is little or no risk of COVID, community members can wait for the PREP Act to be declared over and for congress to possibly add the COVID-19 vaccines to the Vaccine Injury Compensation Program. Mr. Huffman said that this program covers far more costs and pays out about 7 times the amount of the CICP. He noted, with the Vaccine Injury Compensation plan, an individual can also bypass the plan and go straight to court, which you cannot do with the CICIP. Lastly, Mr. Huffman said community members need to start informing themselves and challenged the board to promote balanced information.

There were no more public comments.

HEALTH OFFICER/ADMINISTRATOR'S REPORT

Health Officer Update:

Dr. Gib Morrow, Health Officer, provided the Board with an update regarding other work outside of the COVID-19 work that the Health District is currently involved in.

Dr. Morrow said the Kitsap Public Health HIV team met with the St. Michael Medical Center Residency Program and educated them about case management work. Dr. Morrow said it was important to train these doctors to understand that treatment is prevention and the game plan for eradication of AIDS/ HIV is getting everyone with HIV to have undetectable viral loads and that would make the HIV virus untransferable to other people (undetectable = untransmittable).

Dr. Morrow explained that Kitsap Public Health District recently met with Peninsula Community Services to discuss expedited partner treatment for sexually transmitted diseases such as Gonorrhea and Chlamydia. He explained that, with this approach, doctors would be able to provide an additional prescription to give to any partners who are likely to be infected but unlikely to seek care. Dr. Morrow shared this is a great public health opportunity that he would like to promote and drive the rate of transmission in sexually transmitted diseases down in the county.

Dr. Morrow said a grant has been received by the Residency Program that will allow the emergency departments at local hospitals to screen eligible individuals who are potentially HIV or Hepatitis C positive. He warned that this is a program that could potentially push our numbers up for a while due to the better case identification, however it will help with case investigation and better long-term control in the future.

Dr. Morrow shared some interesting information from the Kitsap Public Health Epidemiologist team. Numbers are showing that routine childhood vaccinations dropped during the COVID-19 pandemic. Kitsap Public Health's research shows that between 20-46% of students are out of vaccine compliance at schools within evaluated districts. Dr. Morrow assured the board that Kitsap Public Health was helping schools get back on track with the immunization systems for their students. He also let the board know that Kitsap Public Health District is partnering with Peninsula Community Health to obtain the goal of closing these gaps.

Lastly, Dr. Morrow shared that Kitsap Public Health District has been reviewing tuberculosis cases in the past 5 years and has found some concerning gaps in the way cases are reported to the public health system. He shared that Kitsap Public Health has developed a partnership with infectious disease specialist Dr. Kristen Lee at St. Michael Medical center who is helping with the effort to get this information out and helping with individual clinical treatments.

Administrator Update:

Mr. Keith Grellner, Administrator, provided the board with an update from Megan Moore on the Health District's adopted Legislative and Rulemaking Priorities for 2022. He shared that only two bills have been introduced that fall under the District's legislative priorities.

1. House Bill 1676 – using the taxation of vapor products to fund additional tobacco and vapor use prevention and cessation programs and services. Kitsap Public Health signed in as pro for this bill during a hearing on January 13th.
2. Engrossed 2nd Substitute House Bill (E2SHB) 1258 – concerning the operation and permitting of micro enterprise home kitchens. This is a carryover bill from the past few sessions. Kitsap Public Health remains opposed due to food safety concerns that have not

been adequately addressed. Kitsap legislator, Representative Simmons, is a co-sponsor of the bill, Kitsap Public Health has reached out to her regarding concerns with this bill.

Mr. Grellner informed the Board the Health District is diligently working to put together a packet for the scheduled March 10th Policy Committee meeting. He let the board know the focus of the meeting would be implementation of Engrossed 2nd Substitute House Bill (E2SHB) 1552, which will be forming a comprehensive local health board membership. Mr. Grellner said that the committee will also be discussing the inclusion of a land acknowledgement statement, recognizing our indigenous peoples into our health board processes. He let the board know there would be more information coming at the March 1st board meeting.

RESOLUTION 2022-01, APPROVING 2022-2024 COLLECTIVE BARGAINING AGREEMENT BETWEEN KITSAP PUBLIC HEALTH DISTRICT & PROTEC 17

Mr. Grellner approached the Board regarding negotiations for the 2022-2024 collective bargaining agreement. He noted some minor changes were made to the draft resolution yesterday and the updated version is posted to the website. Mr. Grellner said the bargaining team did a really good job collectively of addressing issues and coming to reasonable and appropriate agreements. He let the board know that there was a tentative agreement met between the Health District and PROTEC 17, the union representing Kitsap Public Health District employees, which includes the following:

- Wage Adjustments:
 - 5.5% increase in 2022
 - 2.5% in 2023
 - 2.0% increase in 2024
 - Additionally, 2.0% increase for the clerical unit for 2022. All these increases were negotiated because KPHD fell behind comparable wages and market analysis.
- Step increase effective date for the Environmental Health Specialists (EHS 1) who earn their Registered Sanitarian credential has been changed. The original hire date will remain as the anniversary date for all step increases going forward.
- Add Juneteenth (June 19th) to the list of paid holidays
- Amend Health Benefits Program to reflect current practice: The Health District will pay immunization costs for employees.
 - The Health District no longer provides adult immunizations onsite as those services are readily available through primary healthcare providers and pharmacies. Employer required tuberculin skins tests (PPD) will still be administered by the Health District. If a chest x-ray is required, the Health District will provide a referral to an outside provider and cover the cost. If any other vaccination or associated health service is required by the District, the District will provide time during the workday and reimbursement for any associated employee out-of-pocket costs. Influenza vaccinations will continue to be provided to employees onsite and at no charge.

- Children of employees will no longer be provided with free childhood immunizations by the Health District (the Health District provides medical insurance coverage for employees and their family and childhood immunizations are provided by primary healthcare providers).
- Probationary and Trial Service - Amends Article 26 (Probation and Trial Service Periods) to clarify that during the probation period, an employee may be dismissed with one day's notice.

Lastly, Mr. Grellner noted the cost of the 2022 wage adjustments will be about \$360K, this is reflected in the 2022 budget amendment on today's agenda. Mr. Grellner assured the board that this has been accounted for and the budget is still balanced. Mr. Grellner recommended that the board adopt resolution 2022-01.

Commissioner Wolfe moved, and Councilperson Hytopoulos seconded the motion to approve Resolution 2022-01, Approving 2022-2024 Collective Bargaining Agreement between Kitsap Public Health District and PROTEC 17. The motion was approved unanimously.

Commissioner Wolfe said that this is a good outcome for the team.

There was no further comment.

RESOLUTION 2022-02, APPROVING 2022-2024 SALARY ADJUSTMENTS FOR NON-REPRESENTED EMPLOYEES

Mr. Grellner approached the Board regarding approving salary adjustment for non-represented employees. He explained to the board that there is an amended 2022 salary schedule for non-represented employees that would take effect if the board approved the adjustment. He reminded the board that in December the board approved a 4% wage increase place holder while the bargaining process continued. Kitsap Public Health and PROTEC17 settled on a 5.5% increase for 2022 for represented employees. In the past the Health Board has always matched salary adjustment for non-represented staff with the union. This would add a 1.5% for non-represented staff on top of the 4% approved in December. Mr. Grellner explained that this adjustment would make non represented staff increases equal to represented staff. Mr. Grellner recommended board approval of Resolution 2022-02.

Commissioner Charlotte Garrido would like to see the cumulative increases for non-represented employees in the future. Mr. Grellner said he will include it in his presentation next time.

Mayor Erickson moved, and Commissioner Garrido seconded the motion to approve Resolution 2022-02 salary adjustments for non-represented employees. The motion was approved unanimously.

RESOLUTION 2022-03, APPROVING 2022 BUDGET AMENDMENT FOR KITSAP PUBLIC HEALTH DISTRICT

Mr. Grellner approached the Board regarding the proposed 2022 Budget Amendment. Mr. Grellner explained that this budget amendment reflects the changes the board just approved regarding wage adjustment for represented and non-represented staff. The total cost of those wage adjustments for 2022 is about \$640 thousand. He assured the board that the budget remains balanced even with adding the market adjustment and increasing staffing levels to approximately 141.3 FTE. Mr. Grellner explained that about 40 of those FTEs are COVID-19 program related with respect to the pandemic. He explained that those employees have been assigned to work in community-based testing sites, vaccination clinics, are helping to get personal protective equipment and home tests into the community, continuing to respond to PPE requests from health care and other businesses in our community, outbreak disease investigations and operating a community isolation and quarantine center for people ill with covid. Mr. Grellner let the board know that all those expenses are included in the budget amendment, which is balanced at \$18,682,535. Mr. Grellner recommends approval of Resolution 2022-03.

Mayor Erickson moved and Councilperson Hytopoulos seconded the motion to approve Resolution 2022-03, Approving the 2022 Budget Amendment for Kitsap Public Health District. The motion was approved unanimously.

Mayor Erickson asked if money had been set aside in the budget during negotiations and had been accounted for in the previously approved budget. Mr. Grellner confirmed that the District was able to move money from other categories to cover the wage increases and remain with a balanced budget.

COVID-19 UPDATE

Dr. Morrow introduced Ms. Ally Power, Epidemiologist at Kitsap Public Health, to the board.

Ms. Powers provided a presentation to the Health Board regarding COVID-19 assessment and epidemiology. She proceeded to let the board know that due to the current surge in COVID-19 cases the Washington State Department of Health (DOH) is receiving a high volume of COVID-19 testing data and experiencing substantial slowdowns within their data system. She shared that this has resulted in a backlog in Kitsap Public Health District's data and the county may see some increases in previously reported data over time. She also shared that last week, the Health District identified a large volume of duplicate cases in the Kitsap data sent by the DOH. The Health District made the decision to delay updating its dashboards until the duplication issue could be investigated and corrected, which was yesterday. Ms. Powers said that, due to the high volume of cases, the Health District has had to focus on investigating outbreaks in high-risk settings and is no longer investigating all potential outbreaks. Due to this change the Health District can no longer report the total number of outbreaks in the community and have discontinued this reporting feature on the website. Kitsap Public Health will continue to investigate, assist and respond to outbreaks within Kitsap County.

Ms. Powers said right now cases are on a slight decline, however there could be a seven-day case increase due to the DOH delay. Ms. Powers shared that in the past week, ending January 26th, there were 1,120 cases per 100,000 residents of Kitsap County. Using the most recent DOH data available the seven-day case rate for the week ending January 15th was 1,704 cases per 100,000 Washington residents. Ms. Powers explained that these rates are underestimates of the true extent of disease transmission because of the state data delay and many tests have been completed at home and are unreported.

Ms. Powers said there continues to be a steep increase in COVID-19 hospitalizations with both Kitsap and Washington State residents. Overall, she expects that hospitalizations and deaths will increase in the weeks ahead because they lag behind the case counts. During the week ending January 22nd there were 74 hospitalizations identified in Kitsap County, the same as the previous week. Ms. Powers explained this was the highest number yet. Ms. Powers said that in January, Kitsap County is currently reporting 11 deaths, however this number will continue to climb as death certificates are processed and investigated. She shared the most recent state data shows a similar pattern.

Ms. Powers shared that, with the Omicron variation, vaccination doesn't always prevent symptoms of COVID-19 if you are exposed to the virus. However, she also shared those vaccinations are effective at preventing hospitalizations and death. Those who aren't vaccinated in the 12-59-year-old age group are 8.8 times more likely to be hospitalized with COVID-19, those ages 60 and over who are unvaccinated are 4.3 times more likely to be hospitalized with COVID-19. She shared this is consistent with the risks shared by both the CDC and DOH. Unvaccinated individuals in Washington State have 5-7 times increased risk of hospitalization. She shared that those with a booster vaccination are 44 times less likely to be hospitalized than those who are unvaccinated.

Ms. Powers shared that it has been just over a year since Kitsap County administered their first doses of COVID-19 vaccine. She said some big milestones have been reached as of January 22nd:

- More than 75% of all Kitsap County residents have started their Covid-19 Vaccination
- 80% of eligible residents (ages 5+) have started their vaccination.
- 72% of Kitsap residents are fully vaccinated.
- In the 5-11 age groups, 32% of residents have initiated vaccination, which is a 2% increase in the past two weeks.

Ms. Powers finished her presentation and turned the meeting back over to Dr. Morrow.

Dr. Morrow explained that the data from the epidemiology team provides helped inform work and direct our initiatives. He said Kitsap County is seeing the highest disease rates with about 3,000 cases reported each week. He reiterated this was only the number of confirmed cases and actual numbers are much higher. He understands that everyone is struggling to keep their organizations staffed due to people being sick. The healthcare system is strained and the workforce is depleted; hospitalizations are at their highest peak for two weeks running; and hospitals continue to be operating above their license capacity and discharge is delayed because long term facilities have their own critical staffing issues. Dr. Morrow explained that Kitsap Public Health is helping with some revisions to the guidelines, allowing facilitated transfers out of hospitals and into nursing homes.

Dr. Morrow said the overall outlook right now is much brighter. While the Omicron variant infects more readily, he said it causes less severe disease and binds to the nasal tissue while less damaging to the lungs. He also shared that data out of Greece showed that hospital intubations have remained unchanged in a ten-fold spike in cases. He shared that cases in Kitsap resulting in hospitalization is nearly half of what prior waves have caused, even while large numbers go unrecognized or unreported. Dr. Morrow said people are being admitted to the hospital for unrelated to Covid issues who are testing positive while in the hospital. Dr. Morrow said this is a less severe variant. He also noted that data from other localities around the world show that, while cases do spike rapidly, these surges resolve more quickly than with prior variants and that the bottom line is that the virus has changed but we have too as hosts.

Dr. Morrow shared that our population is more immunologically competent and said four out of five Kitsap residents have started vaccination and community immunity is increasing daily. He shared that Seattle's Institute for Health Metrics and Evaluation estimates that 50% of the world's population will be infected between November of 2021 and March of 2022. He said experts expect that proportion will be similar or less locally in Kitsap. Dr. Morrow said those who have not been previously infected or vaccinated are still at a high risk for severe hospitalization and severe illness and death. While Dr. Morrow did not want to minimize the risks of his disease, he was pleased to let the board know that the actual number of people at the highest risk is dropping daily.

Dr. Morrow said COVID-19 is likely to be reduced to an endemic disease soon. He said we currently know of 4 coronaviruses that are current causes of the common cold and hopefully we are headed in that direction. He reminded the board that endemic doesn't mean harmless and noted we will see new variants and spikes of disease activity.

Dr. Morrow informed the Health Board of a few shifting strategies that are accompanying these changes:

- Case Investigation and Contact tracing efforts are going to be more focused directly on vulnerable populations, congregate settings, and high-risk individuals. The universal case investigation and contact tracing has become more challenging and less productive with Omicron due to the huge number of asymptomatic or minimally symptomatic cases and he noted many cases are going untested and unreported. Dr. Morrow said efforts are going to be focused on outbreak investigations, particularly in high-risk settings and on increasing the numbers of people up to date on their vaccination. They will also be increasing the availability of testing and improving the distribution in available therapies like antiviral drugs and monoclonal antibodies.
- Kitsap Public Health is asking all the health care providers to agree to vaccinate their own patients using the SAVE acronym: seek (reach out to patients), ask (about vaccination history and provide education), vaccinate, and empower (staff to discuss the safety and importance of vaccines). Dr. Morrow shared that Kitsap Public Health acts as a vaccine depot and can assist providers in vaccination efforts and provide the technical advice they may need.

Dr. Morrow continued to share that the Moderna vaccine has received full FDA approval under the name Spikevax. He also shared that Novavax, which is the first protein vaccine, has submitted its standard at the FDA and will likely be receiving some sort of authorization for short term use. Dr. Morrow also said we are expecting vaccinations for those 6 months and older to occur as early as this month or March. Dr. Morrow explained that there are some DOH funding initiatives available at this time which may provide financial assistance to get these programs up and going.

Dr. Morrow said the Health District appreciates all the local citizens who have relayed their concerns about COVID Control in Port Orchard. These concerns were relayed to the DOH and the operation has closed and left town. Washington State has filed a lawsuit against this company regarding invalid and false test results. Dr. Morrow explained that the Health District realizes that PCR testing is somewhat limited in South Kitsap and is working to bring a new private testing vendor into that area. Dr. Morrow also explained that Kitsap Public Health is hoping to get that up and running quickly and then integrate a testing center in Central and North Kitsap as well for additional options. He reiterated that testing is still available through Kitsap's community-based test sites and that hundreds of people are being tested daily. He noted the positivity rates at those test sites are more than 35%, meaning that over a third of those tested are positive, which is a high positivity rate. Dr. Morrow said that Northwest Labs continues to provide excellent services and provides direct notifications to patients with their results with high turnaround times. He also noted that in the past few days they have seen a small decrease of residents

being tested in Kitsap County. This is a good, optimistic sign that we are on the back side of this wave. Dr. Morrow shared that testing is moving into households and away from public health and establishments. He shared that rapid antigen tests are available free of charge from federal and state programs and encouraged all families to obtain these tests commercially or through the government programs. He encouraged the public to test themselves if they have any concerns about possible disease. He said if you test positive, stop activities and quarantine for the next five days.

Councilmember Hytopoulos asked Dr. Morrow if he wanted to address any of the concerns expressed regarding the vaccines during public comment. Dr. Morrow explained that the VAERS system is an early warning system that has been set up through the government and any concern related to a vaccine that has been administered can be entered into that system. He explained that, while this is a good system which works as a surveillance system, the data that is used in the VAERS system can then be used to evaluate and identify potential issues. He explained that there have been no COVID vaccine myocarditis deaths reported, as far as he knows, in this county. He said myocarditis basically means inflammation of the heart muscle. He said there is a small likelihood of young males who receive their second dose Moderna (more often than Pfizer) experiencing myocarditis. The few cases have all recovered. Dr. Morrow shared he reviewed those case and they have not shown significant long-term disease. He said Myocarditis is a significant concern, but noted the likelihood of getting it from the COVID-19 vaccine is much less likely versus getting it from a COVID-19 infection.

Dr. Morrow said, of the 8 million vaccinations that have been given to kids 5 to 11, there have been about 100 adverse effects that have been characterized as serious. Dr. Morrow said any complication is concerning, but zero adverse effects is simply not possible with pharmacological therapy. He said the benefits outweigh the downside. Dr. Morrow reiterated that these are important and valid concerns and Kitsap residents should speak to their doctors about their concerns for these or any issues related to COVID-19.

Dr. Morrow shared that right now we have a lot of transmission through our community with the less severe Omicron variant, which is leading to basic community immunity, however nobody knows how long that immunity is going to last. He noted that saying COVID-19 is an inconsequential disease completely disregards a million American deaths. Dr. Morrow pointed out that he has death certificates on his desk of 40-year-olds, who were otherwise healthy, who died from COVID-19.

Chair Wheeler asked Dr. Morrow what signs we would see when we are approaching, or have moved into, an endemic. Dr. Morrow reminded everyone that that endemic doesn't mean harmless. He stated with respiratory virus, no vaccine that has been able to provide sterilizing immunity. There were many people who believed if we were able to get 70% of the people vaccinated COVID-19 would completely disappear, however Dr. Morrow explained that was not possible. He said because the virus is able to live in animals and cross species, is a tough virus. He explained that four coronaviruses cause the common cold, and likely, those caused prior pandemics a lot like we are seeing now. Dr. Morrow explained this is what happens when you have a completely immunologically naïve population. He used the example of the Native Americans who were wiped out by Smallpox because they had never seen it before and did not have any immunity. Dr. Morrow explained that when people are vaccinated and as COVID-19 circulates and we are exposed to it, our immunity continues to boost due to vaccination status and small exposures of COVID-19 which will hopefully cause this virus to become the common cold. Dr. Morrow explained that this virus is going to have the potential to mutate and evolve and we will see new variants. He continued to explain that mRNA technology it allows safe and effective variant specific vaccines to be developed quickly. Dr. Morrow shared that he is optimistic that we are moving toward COVID-19 being something that we can live with a lot more successfully, however he does not feel like it's time to throw

away the masks. He shared he is optimistic that we're getting through this and we have the tools and techniques that allow us to resume our usual activities safely.

Chair Wheeler let the board know he is interested in continuing to discuss the endemic at a later date. He shared that he does not fully understand when or how we would transition from this pandemic to an endemic and what difference that would involve. Chair Wheeler shared that he would look at hospitalizations and how many workers are out sick so we can deliver services for our citizen's expectations.

Mayor Erickson said 58 people died in our county from COVID-19 in September and 275 people died from COVID-19 in Kitsap County since this all started. She said in the time period from March of 2020 to present day, someone has died every 2.5 days from COVID-19 in Kitsap County. Mayor Erickson shared that she wonders how Kitsap County would have reacted if those deaths were car fatalities where someone died on our highways every 2.5 days for 23 months. Mayor Erickson asked Dr. Morrow if there was a bright line showing us when the pandemic has reached an endemic point. She shared that looking at hospitalizations and deaths, she believes people are going to say they are going to be done with it and move on like the Spanish flu. Dr. Morrow replied that it'll be a dial versus a switch and we will continue to be aware when we are sick. He explained fatalities and hospitalization rates will be watched along with some ongoing surveillance looking at the indicators of hospital system strain and fatalities. Dr. Morrow believes that it'll look a lot like how we track influenza right now. He shared that influenza takes between 35,000 and 70,000 lives each year. He explained that if we can get it down to those levels, which would be 10% of what we are seeing with Omicron right now he believes that we will learn to live with this virus. Dr. Morrow went on to explain that different people have different risk tolerance and that being vaccinated is the safest. He noted that the people who are unvaccinated tend to participate in riskier behaviors.

Mayor Erickson commented that it used to be that you went to work whether you were sick or not now that mindset is going toward if you had sneezes or a cough you are going to stay home. She also shared that everyone has learned better hygiene habits. While she explained she is not trying to downplay COVID-19 she is optimistic we will be in a better place within the next six months.


Chair Wheeler thanked Dr. Morrow for all his work and allowing himself to be put on the spot answering questions.

ADJOURN

There was no further business; the meeting adjourned 1:42 p.m.



Greg Wheeler
Kitsap Public Health Board



Keith Grellner
Administrator

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

Board Members Absent: *Commissioner Robert Gelder.*

Community Members Present: *See Attached.*

Staff Present: Amy Anderson, *Public Health Educator, Public Health Emergency Preparedness and Response*; Jami Armstrong, *Disease Intervention Specialist, COVID-19*; Angie Berger, *Administrative Assistant, Administration*; Stephanie Byrd, *Confidential Secretary, COVID-19*; Holly Bolstad, *COVID Community Outreach Specialist, Public Health Emergency Preparedness and Response*; Eric Evans, *Program Manager, Drinking Water and Onsite Sewage*; April Fisk, *Program Coordinator, Contracts Manager, Public Records & Safety Officer, MAC, Administration*; Callie Ford, *Secretary Clerk 2, Environmental Health Permitting*; Keith Grellner, *Administrator, Administration*; Sarah Henley, *COVID Emergency Operations Coordinator, Public Health Emergency Preparedness and Response*; Grant Holdcroft, *Program Manager, Pollution Identification and Correction*; Karen Holt, *Program Manager, Human Resources*; Jakob Hughes, *Environmental Health Specialist 1, Solid and Hazardous Waste*; Kari Hunter, *Manager, Assessment and Epidemiology*; Wendy Inouye, *Epidemiologist 2, Assessment and Epidemiology*; John Kiess, *Director, Environmental Health Division*; Brandon Kindschy, *Environmental Health Specialist 1, Pollution Identification & Correction*; Sarah Kinnear, *Disease Intervention Specialist, COVID-19*; Siri Kushner, *Assistant Director, Community Health Division*; Melissa Laird, *Manager, Accounting and Finance*; Victoria Lehto, *Environmental Health Specialist 1, Pollution Identification & Correction*; Alex Moore, *Environmental Health Specialist 1, Drinking Water and Onsite Sewage Systems*; Dr. Gib Morrow, *Health Officer, Administration*; Melissa O'Brien, *Environmental Health Specialist 1, Food and Living Environment*; Carin Onarheim, *Disease Intervention Specialist, Communicable Disease*; Ally Power, *Epidemiologist 1, Assessment & Epidemiology*; Kelsey Stedman, *Program Manager, Communicable Disease*; Mindy Tonti, *Community Health Worker, HIV Case Management*; Lisa Warren, *Public Health Nurse, Parent Child Health*; Laura Westervelt, *Environmental Health Specialist 1, Water Pollution Identification and Correction*; Layken Winchester, *Environmental Health Specialist, Food & Living Environment*.