

INSTRUCTIONS FOR VIEWING MEETINGS AND PROVIDING PUBLIC COMMENT

Attending/viewing Health Board meetings

Members of the public can attend Kitsap Public Health Board meetings **in person** at the time and location listed at the top of the agenda.

Health Board meetings will broadcast **live on Comcast channel 12, WAVE channel 3, and on the BKAT website at <https://www.bremertonwa.gov/402>**. A video recording of the meeting will be made available at <https://kitsappublichealth.org/about/board-meetings.php>, typically within 48 hours of meeting adjournment.

Providing public comment

Verbal public comment: Members of the public can provide spoken public comment to the Health Board by attending the meeting in person at the time and location listed at the top of the agenda.* Members of the public who attend in person can make verbal comments during the Public Comment agenda item or as specified by the Health Board Chair.

As this meeting is a regular business meeting of the Health Board, the Chair will establish a time limit for public comment to ensure enough time is allowed for all agenda items to occur prior to adjournment. Each public commenter will receive a specific amount of time to address the board as determined by the Chair.

Written comments may be submitted by mail or email to:

Mail:

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

Email:

healthboard@kitsappublichealth.org

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

**If you are unable to attend a meeting in person and need to request an accommodation to provide verbal public comment, please email healthboard@kitsappublichealth.org or call 360-728-2235.*

Health Board meeting notifications and materials

To sign up to receive Kitsap Public Health Board meeting notifications by email or text message, go to kitsappublichealth.org/subscribe, email pio@kitsappublichealth.org, or call 360-728-2330. Notifications are typically sent on the Thursday prior to each regular Tuesday meeting.

A schedule of regular Health Board meetings is posted at <https://kitsappublichealth.org/about/files/board-meeting-schedule.pdf>

Materials for each meeting, including an agenda, minutes from the prior Health Board meeting, and informational meeting packet, are posted prior to each scheduled meeting at <https://kitsappublichealth.org/about/board-meetings.php>. Printed materials are available for meeting attendees. A video recording and copies of presentations are posted to the board meetings website after each meeting.

MEMO

To: Kitsap Public Health Board
From: Yolanda Fong, Administrator
Date: January 2, 2024
Re: Election of 2024 Health Board Officers

In accordance with [RCW 70.05.040](#) and Article VI of the Kitsap Public Health Board [Bylaws](#), the members of the Health Board shall elect a Chair from their membership at the first meeting of the new year. Article VI of the Bylaws also requires the election of a Vice Chair. The election shall occur by a majority vote of the members present at the first meeting of the year. The term of office for the Chair and Vice Chair is one year, and no member of the Health Board shall serve as Chair or Vice Chair for more than two (2) consecutive terms unless the Health Board votes to extend their terms due to special circumstances.

The Health Board has a long history of electing the previous year's Vice Chair to the post of Chair. The Vice Chair serves as the Chair's replacement if for any reason the Chair cannot participate in a meeting or continue their assignment as Chair. Recent past Chairs (2019 – 2023) were:

- 2019 – Commissioner Robert Gelder
- 2020 – Mayor Robert Putaansuu
- 2021 – Commissioner Charlotte Garrido
- 2022 – Mayor Greg Wheeler
- 2023 – Commissioner Robert Gelder (January-May)
- 2023 – Mayor Erickson (May-December)

Please contact me with any questions or concerns about this matter at (360) 535-9290, or yolanda.fong@kitsappublichealth.org.

MEMO

To: Kitsap Public Health Board
From: Yolanda Fong, Administrator
Date: January 2, 2024
Re: 2024 Health Board Committee Assignments

In accordance with Article X of the [Bylaws](#), Committees, requires the Health Board to make committee assignments by calling for volunteers from the membership during the first meeting of the new year. The Bylaws establish three standing committees: Finance and Operations, Policy, and Personnel. Each committee shall contain at least two, but no more than five, board members.

Attached for reference are the Health Board's 2023 Officers and Committee Assignments. During this action item, Health Board members will work with the Chair to fill-out the three standing committees.

Committees meet as needed, and meetings are typically initiated at the request of the Chair, full Board, Health Officer, or Administrator. Topics/items which may, or will, come to committees during 2024 are shown below:

Finance & Operations (potentially meeting 2 to 3 times)

- 2025 Budget

Policy (potentially meeting monthly)

- Community Health Improvement Plan Priorities
- Healthcare Access Recommendations
- Opioid and Behavioral Health Issues
- Maternal-Infant Health and Early Childhood Development topics

Personnel (potentially meeting 4 or 5 times)

- Union Contract Negotiations

Please contact me with any questions or concerns about this matter at (360) 535-9290, or yolanda.fong@kitsapublichealth.org.

Attachment (1)

2024 KITSAP PUBLIC HEALTH BOARD
DRAFT COMMITTEE ASSIGNMENTS

2023	Member Interest 2024
<p>Finance & Operations</p> <ul style="list-style-type: none"> • Chair Becky Erickson • Mayor Greg Wheeler • Member Drayton Jackson 	<p>Finance & Operations</p> <ul style="list-style-type: none"> • Mayor Greg Wheeler (1st Choice) • Member Dr. Tara Sell (1st Choice) • Member Jolene Sullivan (1st Choice) • Member Drayton Jackson (Last year) • Mayor Erickson (2nd Choice) • Mayor Rob Putaansuu (2nd Choice)
<p>Policy</p> <ul style="list-style-type: none"> • Chair Becky Erickson • Mayor Rob Putaansuu • Member Dr. Tara Sell • Member Dr. Michael Watson 	<p>Policy</p> <ul style="list-style-type: none"> • Commissioner Rolfes (1st Choice) • Mayor Becky Erickson (1st Choice) • Stephen Kutz (1st Choice) • Member Dr. Michael Watson (1st Choice) • Member Jolene Sullivan (1st Choice)
<p>Personnel</p> <ul style="list-style-type: none"> • Chair Becky Erickson • Member Stephen Kutz • Member Jolene Sullivan • Councilperson Kirsten Hytopoulos 	<p>Personnel</p> <ul style="list-style-type: none"> • Member Dr. Tara Sell (if space) • Mayor Rob Putaansuu (1st Choice) • Councilperson Kirsten Hytopoulos (1st Choice)

**KITSAP PUBLIC HEALTH BOARD
MEETING MINUTES
Regular Meeting
December 5, 2023**

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

Chair Erickson with the City of Poulsbo, Mayor Greg Wheeler with the City of Bremerton, public health representative Member Dr. Tara Sell, Mayor Rob Putaansuu with the City of Port Orchard, Commissioner Christine Rolfes with Kitsap County, Member Stephen Kutz with the Suquamish Tribe, healthcare representative Member Dr. Michael Watson, and community representative Member Drayton Jackson.

APPROVAL OF MINUTES

Commissioner Rolfes moved and Dr. Watson seconded the motion to approve the minutes for the November 7, 2023, regular meeting. The motion was approved unanimously.

CONSENT AGENDA

The December consent agenda included the following contracts:

- 2233 Amendment 3, *Kitsap County, GIS Services*
- 2372, *Kitsap County, Clean Water Kitsap*

Member Kutz moved and Member Jackson seconded the motion to approve the consent agenda. The motion was approved unanimously.

PUBLIC COMMENT

There was no public comment.

HEALTH OFFICER/ADMINISTRATOR'S REPORT

Health Officer Update:

Dr. Gib Morrow, Health Officer, said he will hold his comments for his presentation later in the meeting.

Administrator Update:

Yolanda Fong, incoming Administrator, gave an update on the Community Health Director and Assistant Director recruitments. She noted that Jessica Guidry, Equity Program Manager, was selected as the new Assistant Director for Community Health. The Division Director position is still open and the recruitment process is underway.

Next, Ms. Fong acknowledged that this is the last Board meeting for outgoing Administrator, Keith Grellner. She thanked him for his 34 years of service on behalf of the Health District and

the community, noting that both have benefited from Mr. Grellner's leadership and dedication. Mr. Grellner thanked Ms. Fong and Health District staff for their comments. He went on to recognize former Health Officer Dr. Willa Fisher and former Director of Nursing Roberta Leonardy for their mentorship throughout his career. Mr. Grellner said the Health District is in good hands going into the future and that he is incredibly proud of the organization. He expressed his appreciation for the Board's support, which allowed the organization to operate smoothly, and thanked everyone he worked with for making each day a joy to come to work.

Mr. Grellner continued the Administrator update by apologizing to the public for the lack of a virtual option for today's meeting due to technical issues in the Chambers Room. The system was repaired late yesterday, so next month's Board meeting will be held both in-person and virtually.

Next, Mr. Grellner reminded the Board that in January, new Board officers for Chair and Vice Chair will be elected and committee assignments will be designated. Historically, the Vice Chair for the previous year moves to Chair, then a new Vice Chair is elected. Mr. Grellner noted that the various committees will likely be busy next year due to projects like the Kitsap healthcare assessment and union negotiations.

Chair Erickson explained that she has been on the Kitsap Public Health Board since 2010 and during that time, she has worked with several Administrators and three Health Officers. She said that without Mr. Grellner's work, the Health District and Board would not be where they are today. He has worked through several challenges throughout his years of service, especially during the COVID-19 pandemic, but each time, he did the right thing for the Health District and community. Chair Erickson went on to say that Mr. Grellner is an incredible human being, a kind and compassionate man, and a great leader. His work at the state level led to a large amount of Foundational Public Health Services funding to be granted to local health jurisdictions throughout Washington. Chair Erickson said she is deeply grateful that she had the opportunity to work with him and thanked him for his years of service.

Member Jackson said that as a newer Board member, he appreciated Mr. Grellner's acceptance and assistance throughout his time on the Board. Member Jackson said that based on the length of time Mr. Grellner has worked at the Health District, it is clear that he has done great work as a leader and a coworker.

Member Kutz emphasized that public health would not be where it is today, especially environmental health, if it were not for Mr. Grellner's work at the state level. He said he will miss working with Mr. Grellner and wished him well.

Dr. Sell said nationally, we often see public health struggling. However, in Kitsap County, the Health District is a shining example of what public health should be in this country. Dr. Sell said she believes this is a result of Keith's leadership and decision-making capabilities. She thanked him for all the work he has done, noting that a lot of trust has been built with the community, providing a great foundation for future public health work.

Mr. Grellner went around the dais and shook hands with each Board member.

There was no further comment.

RESOLUTION 2023-07, APPROVING 2024 BUDGET FOR KITSAP PUBLIC HEALTH DISTRICT

Mr. Grellner directed the Board's attention to the memo regarding the 2024 budget for the Health District, the full budget document, and the draft for Resolution 2023-07. He noted that no changes have been made since November and the budget is just under \$19.2M for 2024. The budget includes the use of reserve funds to maintain Environmental Health fees for Drinking Water and Onsite Sewage and Solid and Hazardous Waste. The budget contains a little over 136 full-time equivalents, aligning with the staffing levels for the last three years. Environmental Health fees include a 6% increase in Food and Living Environment fees while other program fees are the same as they were in 2022 and 2023.

Member Jackson said that Mr. Grellner and the Health District did a great job on the budget.

Member Jackson moved and Commissioner Rolfes seconded the motion to approve Resolution 2023-07, approving the 2024 budget for the Health District. Initially, the motion was approved with one abstention, but after clarification of laws surrounding the voting capabilities of non-elected Board members, the abstention was withdrawn, and the motion was approved unanimously.

There was no further comment.

APPROVING 2024 MEETING SCHEDULE FOR KITSAP PUBLIC HEALTH BOARD

Ms. Fong displayed the proposed meeting schedule for the Board for 2024, noting that the schedule was a result of the coordination of various agencies that the elected officials sit on.

Commissioner Rolfes moved and Dr. Watson seconded the motion to approve the 2024 Board meeting schedule. The motion was approved unanimously.

Commissioner Rolfes asked that there continue to be no Board meetings in August.

There was no further comment.

SCHOOL ENVIRONMENTAL HEALTH & SAFETY INSPECTIONS

John Kiess, Environmental Health Director, started the presentation by providing an overview of school inspections. Mr. Kiess said that the Health District conducts school inspections under Washington Administrative Code (WAC) 246-366, propagated in 1971. The statewide rule requires local health jurisdictions to conduct periodic inspections for public and private schools in their community. Mr. Kiess said that over the last few decades, the Health District has been

able to do those inspections to some degree, but due to a lack of capacity and funding, the work was not as sustained and structured as is ideal. He said this began to change in 2015 when the Health District and the Board made the decision to build out the local school inspection program. An advisory committee of school partners was formed to evaluate and revise the program's policies, procedures, and inspections in order to provide meaningful outcomes. When the COVID-19 pandemic occurred, the work was put on hold. Since then, the Health District has reconnected with local schools and continued building the relationships fostered during the pandemic. With the end of the pandemic and additional funding for Foundational Public Health Services, the Health District is reestablishing the school health and safety inspections.

Mr. Kiess then explained that another rule, WAC 246-366A, was propagated in 2009 but has never been implemented due to a funding proviso within the rule. Each year the State Board of Health has had to delay the implementation due to the budget proviso. WAC 246-366A is helpful as it provides more specific requirements and details, rather than the less nuanced rules found in WAC 246-366. The Health District hopes in the future that the rule will be implemented.

Steve Brown, Solid and Hazardous Waste Program Manager, gave a brief overview of the program, noting that the work does not include early learning programs or daycares. Mr. Brown explained that WAC 246-366 requires the Health District to conduct construction reviews for school building plans to ensure they comply with the code, as well as conduct health and safety inspections to identify potential hazards. Additionally, the program provides technical assistance to schools to address emerging health and safety concerns and works with the Department of Ecology to provide pollution prevention assistance.

Next, Mr. Brown explained that WAC 246-366 is short on requirements for health and safety, however it does refer to the Washington State Department of Health's (DOH) *Health and Safety Guide for K-12 Schools in Washington*. He noted that this guide is a foundational document for the program's work as it provides a comprehensive collection of regulatory requirements and best practices.

Mr. Brown said school construction plan review is required for any new education facilities or additions and alterations to existing facilities. The plans are reviewed to ensure the building site does not pose health risks for students or staff; to ensure that WAC 246-366 standards for sound control, ventilation, and light levels are met; and to verify the facility was constructed in accordance with the approved plans. Schools are responsible for initiating construction review by submitting a plan review application and paying the associated fee. The goal of plan review is to ensure that school construction plans meet relevant standards before construction begins, avoiding the need for costly retrofits.

Rudy Baum, Environmental Health Specialist, then explained school health and safety inspections. He noted that the goals for the inspections are to identify immediate health and safety issues, provide guidance on best practices, address issues not covered by other agencies, and help school boards identify health and safety priorities when budgeting for capital projects. Mr. Baum said inspections are conducted in cooperation with school facilities staff, noting that schools are inspected at regular intervals. Schools can also contact the Health District to schedule

an inspection for insurance or accreditation purposes. The inspection program is not fee based and inspections are paid for using Foundational Public Health Services funds.

Next, Mr. Baum discussed the most frequent issues that are seen during school health and safety inspections. The most common issue is unsecured chemical supplies, as they are frequently stored in unlocked cabinets under classroom sinks. Other common issues include inadequate light levels, inadequate playground surfacing, unsecured shelving or furniture, and indoor air quality problems. Part of the inspection program is providing an inspection report that is informative and easy to understand. The reports provide a thorough explanation of findings, including health and safety standards, inspector observations, and corrective actions. WAC 246-366 does not list specific enforcement protocols, so the Health District addresses issues by collaborating with school administrators and facilities teams.

Mr. Brown continued the presentation by explaining the technical assistance aspect of the program. Schools can contact the Health District for advice about student health and safety topics not covered in the state DOH's school health and safety guide. These topics can include wildfire smoke, ventilation and respiratory viruses, best practices for asthmagens, and chemical compatibility and storage. The Health District also partners with the Department of Ecology to provide resources and education to schools about hazardous material disposal through the Pollution Prevention Assistance program.

Next, Mr. Brown explained that the Health District believes the best way to protect the health and safety of Kitsap's students is to build close, effective partnerships with both school districts and individual schools. To do this, the agency builds relationships and lines of communication with school officials, offers technical advice and resources to address issues, and provide informative and user-friendly inspection reports.

Mr. Brown thanked the Board for their time and offered to answer any questions.

Dr. Sell said that after the pandemic, there are a lot of new developments surrounding indoor air quality. Regarding respiratory illnesses and how they relate to absenteeism and the community disease burden, Dr. Sell asked what schools can do to improve indoor air quality. Mr. Brown said WAC 246-366 provides recommendations, rather than requirements. As a result, there are no enforcement capabilities for local health jurisdictions. In an effort to improve indoor air quality, DOH has been strongly recommending the removal of things like asthmagens and fragranced products from the classroom. If the Health District sees issues that affect indoor air quality, it is noted in the inspection report and recommendations are made to school administrators and facilities teams. Dr. Sell then asked if the inspectors look for issues affecting indoor air exchange and air filtration. Mr. Brown said there are currently no requirements for air filters, but they hope the implementation of WAC 246-366A will provide specific requirements. Mr. Baum added that building codes have standards for air filtration, but that it is based on occupant comfort or perception of smells. He said the regulatory environment has not caught up to air filtration and its relationship to the spread of communicable diseases.

Member Kutz said despite the lack of standards, there are best practices for indoor air exchange. He said schools may not maintain or may actively modify their air quality equipment, affecting the equipment's ability to work properly. He asked if the Health District if they are making recommendations to upgrade school air quality equipment. Mr. Brown said that they work closely with other local health jurisdictions and DOH to discuss the need to modify rules and regulations to allow jurisdictions the ability to require these types of solutions or corrective actions.

Member Jackson asked if this type of policy is in place throughout the United States (US). Mr. Brown said he is only aware of the Washington code, but noted other states may have something similar. Member Jackson asked if there have been discussions between schools and the Health District to emphasize the importance of improving school health and safety. Mr. Brown said many school districts have staff who prioritize school health and safety. Those staff often look to the Health District to reinforce the proposed solutions. Additionally, the inspection report disseminates the findings of the inspection to the individuals or groups who can make the decision to address any issues. Member Jackson said a state-level discussion about the importance of school health and safety would be beneficial. Mr. Grellner added that after the COVID-19 pandemic, it became clear that the HVAC systems could limit the spread of communicable disease. In order to enforce these recommendations, the Health District is working with DOH and the Legislature to remove the budget proviso that prevents the implementation of WAC 246-366A. Mr. Grellner said he has been told schools did not want the WAC to be implemented because they did not have the funding to take corrective actions. Schools have several competing needs and not enough funding to address all of them. The Health District hopes to come to an agreement with schools and the Legislature to remove the budget proviso and develop a code that works for all agencies involved. Commissioner Rolfes added that schools have an obligation to small class sizes and must consider school safety in terms of active shooters and seismic retrofits. She said there are a huge number of safety issues that schools are dealing with, and voters are not approving school bonds.

Member Kutz noted that teachers are employees and OSHA and WSHA have rules that may apply to keep teachers safe. Mr. Grellner said Labor and Industries addresses employee safety issues, rather than local health jurisdictions. He noted that schools are doing a good job despite the lack of resources and a vague regulatory environment.

There was no further comment.

PUBLIC HEALTH: YEAR IN REVIEW AND A LOOK FORWARD

Dr. Morrow thanked Mr. Brown and Mr. Baum for their presentation on school health and safety. He noted that Johns Hopkins developed a toolkit for clean air standards in public places to be adopted at the state level. Dr. Morrow then explained that he will be providing a high-level overview of the Health District's past year and a preview of the upcoming year.

Dr. Morrow dedicated his presentation to his father who died one week ago at his home, surrounded by family. He said he believes his father suffered, as many people have, from the

isolation, stress, social unrest, and general upheaval that resulted from the COVID-19 pandemic. Dr. Morrow said his father's superpower was an intrinsic kindness and caring, which are important public health tools. He thanked everyone for their outpouring sympathy.

Next, Dr. Morrow explained that in October 2021, the Health District highlighted the Center for Disease Control (CDC) study that showed more than 140,000 children in the US lost a primary or secondary caregiver to the COVID-19 pandemic. Additionally, one in four COVID-19 deaths were a parent or custodial grandparent, leaving a child an orphan and taking away their critical support system. The CDC study said, "Effective action to reduce health disparities and protect children from direct and secondary harms from COVID-19 is a public health and moral imperative." It also recommended key strategies to improve childhood resiliency, including strengthening economic support for families, quality childcare and school support, and using evidence-based programs to improve parenting skills and family relationships.

Dr. Morrow said in May 2023, the Surgeon General published an advisory that underlined the devastating impact of the loneliness and isolation epidemic in the US. The advisory says that due to the devastating health impacts of this epidemic, the nation should prioritize connections with others, similar to the way it prioritizes tobacco use and obesity. Dr. Morrow said the Health District does a great job of supporting connection, both internally and externally throughout the community. Internally, the agency has a committee to support staff and wellness. Externally, the agency supports connection using the Kitsap Health Equity Collaborative, HEAL Coalition, HIV support group, Peninsula Harm Reduction Network, various healthcare coalitions, and meetings with schools at several levels.

Dr. Morrow went on to say that the Health District started an initiative during the pandemic, which continues today, that includes a monthly all-staff meeting. Disaster psychologist Dr. Kira Mauseth presented at an all-staff meeting to explain the way disasters, cascading disasters, and traumatic events can combine to affect physiological brain development. The issues of social isolation and socioeconomic inequity, in combination with cascading disasters, have a profound impact on public health outcomes. Dr. Morrow said that life expectancy in the US in the 1980s was at the same level as the average of countries who were part of the Organization for Economic Cooperation and Development. Over the ensuing forty years, life expectancy has dropped significantly. The US life expectancy is currently six years shorter than countries who are economically comparable to the US.

Next, Dr. Morrow shared data on the probability of dying in the US and other countries, sorted by age. Premature deaths at all ages, except the oldest, have increased. The data shows that the US exceeds all the other countries displayed on the graph when it comes to the probability of dying. He said that while Washington and Kitsap both have life expectancy that's better than national average, Hawai'i is the state with the longest life expectancy. Dr. Morrow displayed a graphic that showed root causes of health outcomes. Public health often focuses on downstream effects, such as healthcare systems and disease. However, it is political context, governance, social and economic conditions, and education that drive most health outcomes. Dr. Morrow said he hopes this graphic is helpful in explaining why the Health District has focused so much on

maternal and child Health, mental health, substance use, and social inequities as they are the primary drivers of suboptimal health outcomes.

Dr. Morrow said that 2023 was the year of assessments, which include the development of a strategic plan, reaccreditation through the Public Health Accreditation Board, the Health District's COVID-19 After-Action Report, Kitsap Community Resources' Community Assessment, St. Michael Medical Center's Community Health Needs Assessment, the Health District's Community Health Assessment, and the Johns Hopkins Healthcare Systems Assessment. He thanked staff at the Health District for their effort, passion, and commitment to this work.

Next, Dr. Morrow explained some of the new work that the Health District did in 2023, such as the Child Death Review (CDR) panel. The panel includes representatives from both local tribes, mental health organizations, schools, fire departments and emergency medical services, the Medical Examiner's office, and others. Thus far, the panel has held four reviews, tackling topics such as pediatric accidents, overdoses, suicides, and homicides. The CDR panel collaborated to target prevention efforts in Kitsap to keep children safe and healthy, published specific recommendations and actions to reduce child deaths, and worked to communicate the panel's findings and recommendations. Additionally, the Substance Use Prevention and Response program was established, and the Health District partnered with the City of Poulsbo to help them achieve a grant to set up the North Kitsap Recovery Resource Center.

Dr. Morrow said that in July, the Health District partnered with Kitsap County and Virginia Mason Franciscan Health (VMFH) to host the Kitsap Maternal and Infant Health Forum. The Health District is looking forward to implementing the recommendations that resulted from the forum. The agency will also be participating in the development of the 2024 Behavioral Health Forum, working with VMFH to explore the option of a Postpartum Wellness and Recovery Program, and exploring strategies to centralize the referral system to connect families to the services they need. Dr. Morrow said he is hopeful that these activities will begin to fill the gaps in services in Kitsap.

Next, Dr. Morrow underlined the importance of making health data easily accessible, both internally and externally, to allow it to be utilized effectively. He noted that in 2023, the Health District worked with the Department of Defense to prepare for the highly unlikely event of a radiation disaster. Additionally, the agency collaborated with the Kitsap County Department of Emergency Management to determine the most effective way to deploy the Medical Reserve Corps.

In discussing the challenges faced by the Health District in 2023, Dr. Morrow said the fluid job market has led to a strained workforce, particularly for managers who have to frequently recruit for vacant positions and onboard new staff. The Health District hopes to improve data systems and integration and healthcare capacity. He said that while the agency is well-resourced, additional funding would allow a lot more work to be done to address issues.

Dr. Morrow explained the Health District's goals for 2024. The agency hopes to implement the recommendations that resulted from the various assessments conducted in 2023, increase partnerships and collaboration, modernize data, stabilize and develop the workforce, strengthen communication channels, increase policy and advocacy activities, and build trust with the community. He said he is looking forward to the new year.

Commissioner Rolfes thanked Dr. Morrow for his presentation and referenced a previous slide that noted the new work the Health District did in 2023 that will carry over into 2024. She said Dr. Morrow gave more specific examples of that work and asked him to share those activities with the Board in an email. Dr. Morrow explained that the activities mentioned are just a small part of the work that has been done. In terms of the radiation response exercise with the Navy, he explained that the Health District does not have a formal radiation response plan.

Mayor Wheeler referenced the part of the presentation that discussed the brain chemistry of adolescents who lived through a disaster like the pandemic. He said this is very important work and explained how effective it would be to focus public health efforts on the earlier stages of development, leading to better outcomes. Dr. Morrow agreed that those are critical stages of development and traumatic events cause neurological biochemical changes that lead to poor health outcomes, driving the Health District to focus on the earlier stages of life. Mayor Wheeler said the Health District has his support if the agency changes their focus to address issues that affect young children, infants, and new mothers.

Commissioner Rolfes said she would like to follow up on her earlier comment, when she asked for an email containing specific examples of new work done in 2023 that will carryover into 2024. Ms. Fong confirmed an email with this information will be sent to the Board.

Chair Erickson said she would like to see a new website that contains the publications resulting from the various assessments, particularly the Johns Hopkins healthcare system assessment.

Dr. Watson asked if there was a plan to disseminate the healthcare system assessment results to community stakeholders prior to the presentation at the Board's February meeting. Dr. Morrow said once he receives it, he plans to send it to members of the Board, the Health District's Executive Leadership Team, and key stakeholders in the community who are mentioned in the report. In mid-to-late January, the report will be published, and the Johns Hopkins team will present the findings to the Board in February. Mayor Wheeler said that when the healthcare assessment is completed, the next step is to develop action items to improve healthcare systems and access. He noted that he believes the study will be utilized effectively.

Member Kutz referenced the part of the presentation that showed the trajectory of poor health outcomes and asked how Kitsap compared to that data. Dr. Morrow said they may be able to find Kitsap life expectancy data through the county's health rankings website but is unsure if the Health District tracks that. He went on to say that in 2020, Kitsap's life expectancy was 83 years old.

Member Jackson said that Dr. Morrow's presentation shows growth as everything is listed as new. He said that this is evidence that the Health District is taking feedback from the community and using it to inform their work. Member Jackson also welcomed Ms. Fong to her new position and said he looks forward to working with her.

Mayor Wheeler said goodbye to Mr. Grellner, noting that he appreciates his years of service.

There was no further comment.

ADJOURN

There was no further business; the meeting adjourned at 11:50 a.m.

Becky Erickson
Kitsap Public Health Board

Yolanda Fong
Administrator

Board Members Present: *Mayor* Becky Erickson; *Member* Drayton Jackson; *Member* Dr. Tara Kirk Sell; *Mayor* Robert Putaansuu; *Commissioner* Christine Rolfes; *Member* Dr. Michael Watson; *Mayor* Greg Wheeler.

Board Members Absent: *Councilperson* Kirsten Hytopoulos; *Member* Jolene Sullivan.

Community Members Present: Dr. Willa Fisher, *Community Member*; Roberta Leonardy, *Community Member*; Roy Runyon, *Community Member*.

Staff Present: Leslie Banigan, *Senior Environmental Health Specialist, Pollution Identification and Correction*; Rudy Baum, *Environmental Health Specialist 1, Solid and Hazardous Waste*; Angie Berger, *Management Analyst, Administration*; Dana Bierman, *Program Manager, Chronic Disease and Injury Prevention*; Steve Brown, *Program Manager, Solid and Hazardous Waste*; Margo Chang, *Administrative Assistant, Administration*; Yolanda Fong, *Incoming Administrator, Administration*; Keith Grellner, *Outgoing Administrator, Administration*; Jessica Guidry, *Assistant Director, Community Health Division*; Gabriel Hammond, *Epidemiologist 1, Assessment and Epidemiology*; Karen Holt, *Program Manager, Human Resources*; Kimberly Jones, *Program Manager, Drinking Water and Onsite Sewage Systems*; John Kiess, *Director, Environmental Health Division*; Siri Kushner, *Director, Public Health Infrastructure Division*; Melissa Laird, *Program Manager, Accounting and Finance*; Dr. Gib Morrow, *Health Officer, Administration*; Brian Nielson, *Program Manager, Public Health Emergency Preparedness and Response*; Gabreiel Outlaw-Spencer, *Public Health Educator/Community Liaison, Parent Child Health*; Quynh Sample, *Community Liaison, Public Health Emergency Preparedness and Response*; Tad Sooter, *Public Information Officer, Program Manager, Communications*; Laura Westervelt, *Environmental Health Specialist 1, Pollution Identification and Correction*; Erica Whares, *Community Liaison, Chronic Disease and Injury Prevention*;

MEMO

To: Kitsap Public Health Board
From: Siri Kushner, Public Health Infrastructure Division Director
Date: Jan. 2, 2024
Re: Community Health Assessments Update

At today's meeting we will provide an update on Kitsap Public Health District's community health assessment and prioritization process.

Many Kitsap County organizations have requirements or follow best practices for assessing community needs and developing implementation plans. These may be called community needs assessments (CNA), community health needs assessments (CHNA), landscape or gap analyses or other names.

Since 2011, the Health District has facilitated a multi-year, collaborative community health assessment and prioritization process called Kitsap Community Health Priorities (KCHP). The process identifies community health priorities based on engagement with community partners and leaders who review key data findings and community input from interviews, focus groups and/or surveys. Differences over time, differences compared to Washington state and differences by sub-group (age, race/ethnicity, sex, education or income levels and sub-county areas) are examined. A community health assessment (CHA) report and a community health improvement plan (CHIP) are outputs of this process. Both are best practices for public health and required elements of public health accreditation.

Over the last year, the Health District worked with Kitsap Community Resources (KCR) and Virginia Mason Franciscan Health (VMFH) to develop assessments for their respective organizations. This involved gathering community input through focus groups, key informant interviews and a community survey, as well as compiling more than 100 quantitative data indicators. The final reports can be viewed using these links — VMFH [CHNA](#) and [Implementation Plan](#); KCR [CNA](#) — or by visiting kitsappublichealth.org/data.

Health District epidemiologists drew from information gathered in these assessments to build the Health District's CHA. We presented key findings from our CHA on Sept. 26, 2023, to about 70 community partners. During October and November, we shared those findings at four community open houses, an online virtual open house and in a display in the lobby of the Norm Dicks Government Center. At each of those settings, participants were asked to provide input on top priorities.

Our final [CHA](#) report was published on the KPHD website on Friday, Dec. 29, 2023, alongside an addendum with the process and key themes from input on top priorities. A link is available at kitsappublichealth.org/data.

We invite you to participate in our community prioritization meeting on Thursday, Jan. 11, 2024 here at the Norm Dicks Government Center, where we will use a voting process to identify the top health priorities for our community to address over the next five years. We will invite everyone back on Feb. 8 to participate in developing improvement plans with strategies to address top priorities.

Contact me with any questions, siri.kushner@kitsappublichealth.org or 360-633-9239.

Update on our Community Health Assessment and Priorities

Siri Kushner, Public Health Infrastructure Division Director

January 2, 2024

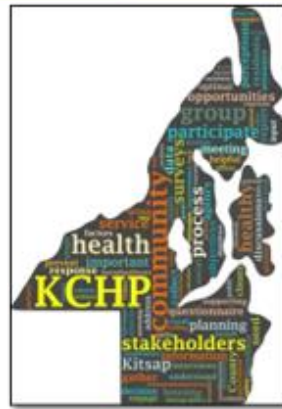


KITSAP PUBLIC HEALTH DISTRICT

Topics:

- Assessment History and Landscape
- Prioritization Process
- Key Findings, Themes and Potential Priorities

Timeline



2011

- May-September: community assessments
- November: priorities selected

2014

- Jan-July: community assessments
- September: priorities selected

2019

- Summer: community assessments
- November: priorities selected

2022-24

- Fall 2022-23: community assessments
- Jan-February 2024: priorities selected



Priorities

TOPIC AREA	2011	2014	2019
Access to Care	Ensure access to affordable medical, behavioral health, and dental care		Unmet health needs and access to dental care
Healthy Eating & Active Living	Make it easy for all residents to be physically active and have healthier food options	Obesity	Obesity/healthy eating & active living, food access
Youth Supports	Ensure all children and youth receive the support necessary to be healthy throughout life	Adverse Childhood Experiences (ACEs)	
Economic Well-being	Promote economic development with living wage jobs and benefits		
Well-being			Suicide prevention and mental health
Substance Use		Behavioral Health	Substance use prevention and treatment
Housing		Housing	Affordable, market stability, livable wages

Assessments Landscape

	Community Needs Assessment	Community Health Needs Assessment	Community Health Assessment	Health Systems Assessment
Lead organization:	Kitsap Community Resources	St Michael Medical Center	KPHD	KPHD
Scope:	Identifies community needs for strategy development for a specific sector or issue	An overview of community health status with a focus on healthcare to identify priority issues	An overview of community health status to identify priority issues	A comprehensive review of health systems and health care delivery
Follow-up:	Strategic Plan	Implementation Plan	Improvement Plan	Implementation Plan (TBD)

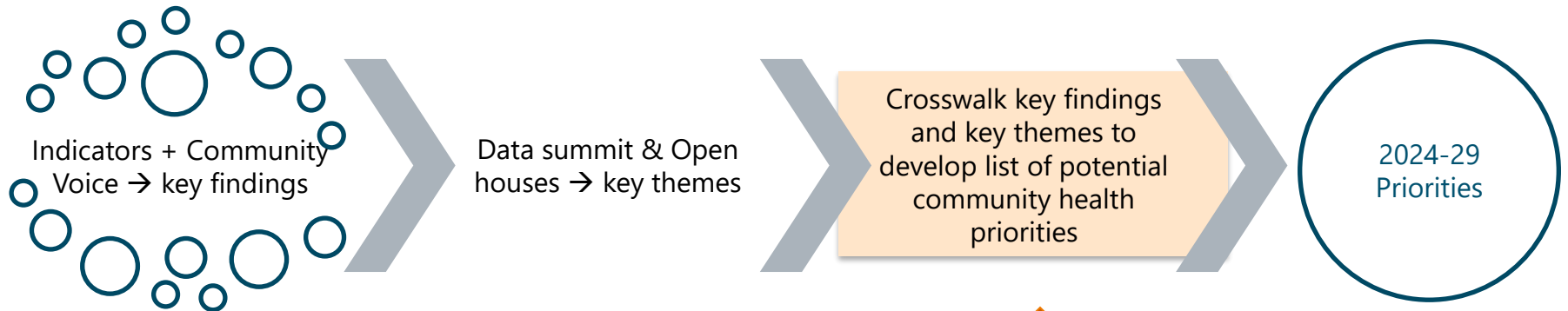


2023 Assessment Key Findings/Priorities

	Community Needs Assessment	Community Health Needs Assessment	Community Health Assessment	Health Systems Assessment
Lead organization:	Kitsap Community Resources	St Michael Medical Center	KPHD	KPHD
Scope:	Identifies community needs for strategy development for a specific sector or issue	An overview of community health status with a focus on healthcare to identify priority issues	An overview of community health status to identify priority issues	A comprehensive review of health systems and health care delivery
Follow-up:	Strategic plan	Implementation Plan	Improvement Plan	TBD Implementation Plan
Key Findings/Priorities:	<ul style="list-style-type: none"> ○ Challenges meeting basic needs ○ Disconnect between services and the people they serve ○ Barriers to accessing healthcare 	<ul style="list-style-type: none"> ○ Behavioral Health ○ Access to Health Care ○ Pregnancy and Births ○ Chronic Disease ○ Basic Needs 	Scheduled for Jan. 11 th	Scheduled for February 2024



Moving from Key Findings to Priorities



 **We are here!**

Findings organized within topic areas:

- Demographics and Social Determinants of Health
- Environmental Health
- Access to Health Care
- Pregnancy and Births
- Mental Health & Wellbeing
- Health Related Behaviors
- Communicable Disease
- Chronic Disease
- Injuries, Hospitalizations and Deaths

15 
**potential
priorities**

January 11th –Vote on Potential Priorities

Improve strategies and systems to ensure basic needs are met.

Ensure affordable and safe housing.

Address and prevent homelessness.

Improve opportunities for education.

Expand strategies to increase and improve options for healthy eating.

Expand strategies for community design to increase and improve options for active living and non-motor vehicle transportation.

Prepare for and minimize the impacts of climate change.



Potential Priorities, slide 2

Address gaps in healthcare access.

Implement strategies to recruit and retain healthcare workforce.

Train healthcare workforce to provide culturally relevant and inclusive services.

Expand number of OB providers and options for prenatal and postnatal care.

Expand care options for mental health and substance use disorder.

Address and prevent suicide and depression, especially for populations disproportionately impacted.

Expand care options and prevention strategies for communicable diseases, especially sexually transmitted infections.

Potential Priorities, slide 3

Increase awareness of chronic disease prevention strategies especially for populations disproportionately impacted.

Increase awareness of injury prevention strategies especially for populations disproportionately impacted.

Increase awareness of accidental poisoning (drug overdose) strategies especially for populations disproportionately impacted.

Next steps

- At kitsappublichealth.org you can access the final CHA report as well as an Addendum with the key themes from community input on the CHA findings.
- Join our Community Prioritization meeting from 9 a.m. to noon, Thursday, **Jan.11, 2024** at the Norm Dicks Government Center, to help identify the top health priorities for our community to address over the next five years.
- Join us from 9 a.m. to noon on **Feb. 8, 2024**, at the Norm Dicks Government Center to participate in developing improvement plans with key strategies to impact those priorities.

Acknowledgments

- At KPHD –
 - Epidemiology team, especially Kari Hunter
 - Equity team, especially Jessica Guidry
 - Communications team
 - The many reviewers from KPHD programs
- Community –
 - KCR, SMMC and other assessment collaborators
 - Community members and partners participating in interviews, focus groups, surveys, data summit, and data open houses

MEMO

To: Kitsap Public Health Board

From: John Kiess, Environmental Health Director
Grant Holdcroft, PIC Program Manager

Date: January 2, 2024

Re: **2023 Water Quality Annual Report**

Each year, the Health District's Pollution Identification and Correction Program (PIC) releases an annual report summarizing the previous year's water quality monitoring and clean-up work results. The *2023 Annual Water Quality Report* has recently been completed and is now available on our website at www.kitsappublichealth.org/environment/water_reports.php. The majority of the Health District's water quality monitoring and clean-up work is funded through [Clean Water Kitsap](#), Kitsap County's storm water utility, along with supplemental funds from local, state, and federal sources.

At the January 2nd regular meeting, Grant Holdcroft will present the background and notable findings of the *2023 Annual Water Quality Report*, including but not limited to the following:

- A description of the PIC program functions - monitoring, investigation, education, and correction; and
- An overview of stream water quality status - Of the 66 streams monitored, only 9 failed both parts of the bacteria standard; and
- Highlighting that there are no streams that are so polluted with bacteria as to require a Public Health Advisory; and
- Highlighting the PIC program's continued protection of our shellfish harvesting areas in partnership with the Washington State Department of Health.

Recommended Action

None at this time --- for information and discussion only.

Please contact me at (360) 728-2290, or john.kiess@kitsappublichealth.org with any questions or comments.

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