

KITSAP PUBLIC HEALTH BOARD

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

MEETING AGENDA

February 6, 2024

10:30 a.m. to 11:45 a.m.

Chambers Room, Bremerton Government Center

345 6th Street, Bremerton WA 98337

(Health Board members may participate remotely via Zoom)

- 10:30 a.m. 1. Call to Order
Commissioner Rolfes, Vice Chair
- 10:31 a.m. 2. Approval of January 2, 2024, Meeting Minutes
Commissioner Rolfes, Vice Chair Page 4
- 10:32 a.m. 3. Approval of Consent Items and Contract Updates
Commissioner Rolfes, Vice Chair [External Document](#)
- 10:34 a.m. 4. Public Comment – **Please See Notes at End of Agenda**
Commissioner Rolfes, Vice Chair
- 10:44 a.m. 5. Health Officer and Administrator Reports
Dr. Gib Morrow, Health Officer & Yolanda Fong, Administrator

ACTION ITEMS

- 10:50 a.m. 6. Resolution 2024-01: Approving Amendment to 2015-03 Appointing Deputy
Health Officers
Dr. Gib Morrow, Health Officer Page 10
- 10:55 a.m. 7. Policy Map
Adrienne Hampton, Policy Analyst Page 17
- 11:05 a.m. 8. 2024 Legislative Priorities
Adrienne Hampton, Policy Analyst Page 21

DISCUSSION ITEMS

- 11:10 a.m. 9. Youth Substance Use Prevention 2023 Highlights *Page 23*
Dana Bierman, Chronic Disease & Injury Prevention Program Manager
- 11:30 a.m. 10. Maternal and Infant Health Update *Page 24*
Jessica Guidry, Community Health Division Assistant Director
- 11:45 a.m. 11. Adjourn

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

INSTRUCTIONS FOR VIEWING MEETINGS AND PROVIDING PUBLIC COMMENT

Attending/viewing Health Board meetings

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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

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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.

**KITSAP PUBLIC HEALTH BOARD
MEETING MINUTES
Regular Meeting
January 2, 2024**

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

2024 OFFICER ELECTIONS

Mayor Rob Putaansuu nominated Dr. Tara Sell as Board Chair and Commissioner Christine Rolfes as Vice Chair for the year of 2024. Mayor Greg Wheeler seconded the motion and it was approved unanimously.

2024 COMMITTEE ASSIGNMENTS

Newly appointed Chair Sell then moved on to committee assignments. Board interest in committee assignments for 2024 were displayed and listed the following assignments:

- Finance and Operations Committee: Mayor Greg Wheeler, Chair Dr. Tara Sell, Member Jolene Sullivan, Member Drayton Jackson, Mayor Becky Erickson, and Mayor Rob Putaansuu.
- Policy Committee: Commissioner Christine Rolfes, Mayor Becky Erickson, Member Stephen Kutz, Member Dr. Michael Watson, and Member Jolene Sullivan.
- Personnel Committee: Chair Dr. Tara Sell, Mayor Rob Putaansuu, and Councilperson Kirsten Hytopoulos.

Chair Sell offered an edit to the assignments with Mayor Erickson and Mayor Putaansuu being removed from the Finance and Operations Committee, and Mayor Erickson being added to the Personnel Committee. Mayor Putaansuu moved and Mayor Erickson seconded the motion to approve the Board committee assignments for 2024 with the changes made by Chair Sell. The motion was approved unanimously.

APPROVAL OF MINUTES

Member Kutz moved and Mayor Putaansuu seconded the motion to approve the minutes for the December 5, 2023, regular meeting. The motion was approved unanimously.

CONSENT AGENDA

The January consent agenda included the following contracts:

- 2203 Amendment 15, *Washington State Department of Health, Consolidated Contract*
- 2306 Amendment 1, *Jefferson County Public Health, Nurse Family Partnership Supervisor*
- 2327 Amendment 1, *Johns Hopkins University, Healthcare Assessment Project*

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

PUBLIC COMMENT

There was no public comment.

ADMINISTRATOR'S REPORT

Administrator Update:

Yolanda Fong, Administrator, provided an introduction and wished the Board and the public a happy new year.

Ms. Fong explained that in 2018, the Washington State Department of Health (DOH) began the revision process for Chapter 246-272A WAC, the state's rule regarding onsite sewage systems. On January 10, 2024, DOH will be holding a public hearing for the proposed rule revision and will likely adopt the revision within the next few months. The effective date will be one month after adoption. The Health District will review and update their local ordinances to ensure it is consistent with the new rules. The revision process and rule changes will be presented to the Board in the future.

Next, Ms. Fong concluded her report by providing an update on the Health District's Immunization Campaign. She noted that activities began in December and the official launch will occur this month. Advertisements have been posted throughout the Kitsap Mall. In addition to social media and digital advertisements, ads have been placed throughout Kitsap Mall, two billboards will be utilized, shopping cart ads will be placed in Safeway stores in Poulsbo and Kingston, and eight digital ads will be displayed at the Colman ferry dock in Seattle. Ms. Fong displayed examples of the graphics being used for the ads and photos of the Kitsap Mall postings, noting that campaign materials will be posted on the new website, <https://www.healthykitsap.org>.

There was no further comment.

COMMUNITY HEALTH ASSESSMENTS UPDATE

Siri Kushner, Public Health Infrastructure Director, started her update by providing the Board with a timeline of the Community Health Assessment activities conducted by the Health District and its partners between 2011 and 2023.

Next, Ms. Kushner went over the list of past Community Health Assessment priorities. She highlighted the priorities that have been selected more than once since 2011, including access to healthcare, housing, and obesity or healthy eating.

Ms. Kushner then explained the landscape of assessments that occurred throughout the community over the last year and a half. In addition to the Health District's assessments, Kitsap Community Resources and St. Michael Medical Center also conducted community assessments. The types of assessments consisted of a Community Needs Assessments, Community Health Needs Assessment, Community Health Assessment, and Health Systems Assessment. Throughout these processes, there was a significant amount of collaboration between community partners. For each assessment, Ms. Kushner described the scope, the follow-up activities, and the key findings or priorities.

Next, Ms. Kushner said that the Health District develops key themes by gathering and analyzing data from the community. After seeking and receiving community feedback on those key themes, the Health District developed a list of potential priorities for 2024 to 2029. Another community convening will be held in January to select priorities and, in turn, initiate implementation planning. Ms. Kushner gave examples from the list of 17 potential priorities that will be presented to the community for prioritization. Examples included addressing gaps in healthcare access, addressing and preventing homelessness, and increasing awareness of accidental drug poisoning strategies.

Ms. Kushner said the Community Health Assessment report can be found on the Health District website. There will be a Community Prioritization meeting on January 11th, and a session will be held on February 8th to develop improvement plans and key strategies.

To conclude her presentation, Ms. Kushner acknowledged the Health District staff, community partners, and community members who participated in the Community Health Assessment process.

When given the opportunity to ask questions, Mayor Erickson asked what the goal of the Community Health Assessment is and what the Health District will do with the report. Ms. Kushner said the purpose of the assessment is to share data and information with the community. It is also an opportunity for collaboration. Ms. Kushner added that the assessment is a requirement for reaccreditation through the Public Health Accreditation Board and is strongly recommended by DOH.

Mayor Wheeler said on January 11th when the community is asked to vote on the list of priorities and asked if the priorities will be ranked. Ms. Kushner said final details are still being developed, but participants will vote on the potential priorities to narrow down the list to a few top priorities. She added that low-ranking priorities will not be deprioritized, only that the high-ranking priorities will become a focus. Mayor Wheeler and Ms. Kushner discussed how the Health District will address the priorities using multiple lenses. Mayor Wheeler then thanked Ms. Kushner for her presentation.

Member Kutz asked what types of details will be provided during the priority selection process to demonstrate that each is a critical need. Ms. Kushner explained that the community partners can discuss what their organization is currently doing and who they are currently partnering with

to provide the Health District with a map of the work being done. She said the discussion will also decrease the chance of redundant work.

Commissioner Rolfes asked what the Health District is expecting the Community Prioritization meeting to look like, and Ms. Kushner explained the plan for the meeting and its various components. They also discussed why some of the top priorities in past assessments did not appear on the list of potential priorities for the 2023 assessment.

Mayor Wheeler said he is interested to know whether the root cause or the downstream effects of the priorities will be addressed, explaining that he hopes broader topics like homelessness will not be minimized. Ms. Kushner said she appreciates this comment and that she is looking forward to the results of the shared conversation that will occur at the health prioritization convenings in January and February. She noted that the Health District's goal is not to address everything with this process, but to select a number of strategic action areas.

Dr. Sell brought up the priority around affordable and safe housing, noting this is a critical component of public health, but that it would be difficult for health jurisdictions to address directly. Dr. Sell and Ms. Kushner discussed the Health District's plans to balance the different capabilities, scopes, and abilities that is needed by each priority. Dr. Sell thanked Ms. Kushner for her presentation.

There was no further comment.

2023 WATER QUALITY ANNUAL REPORT

John Kiess, Environmental Health Director, wished the Board a happy new year and provided them with the context surrounding the Water Quality Annual Report. He noted that Kitsap's waterways and shorelines are some of its most popular and appreciated natural features. Historically, many of Kitsap's waters did not meet water quality standards, and in the mid-1990s Kitsap County started the Surface and Stormwater Management Program (now Clean Water Kitsap). The program provided the Health District with funding for water quality monitoring and cleanup work. After decades of hard work, the water quality of Kitsap's waterways and shorelines have dramatically improved. Mr. Kiess thanked Board members and their predecessors for valuing the county's waterways and allowing the Health District to do water quality work.

Grant Holdcroft, Pollution Identification and Correction (PIC) Program Manager, explained that data collected from 2022 to 2023 was compiled into the 2023 Water Quality Annual Report to help the community understand the work his team does and to inform them on the current status of water quality in Kitsap County.

Mr. Holdcroft displayed the online report for the Board, noting that the PIC team focuses on fecal pollution. He showed an infographic to explain some of the common fecal pollution sources that PIC addresses, including septic systems, sewer systems, livestock waste, and pet waste. Mr. Holdcroft gave highlights for PIC's work in 2023, noting that 66 streams were

monitored, and 3,159 water samples were collected. He also introduced the PIC team, explaining they are typically in the field collecting water samples or investigating pollution sources.

Next, Mr. Holdcroft displayed a graph that showed the increased amount of cumulative acres of approved shellfish beds since 1995. He said the PIC team is continuously opening and reopening problematic shellfish areas in an effort to keep the community safe. The PIC team also monitors streams. If a stream has high levels of bacteria, advisories are issued and posted to protect those who many come into contact with the stream water. Mr. Holdcroft emphasized the fact that there were no stream advisories issued in 2023 and 2024.

Mr. Holdcroft then explained the state Department of Ecology's freshwater standard for surface water quality. Depending on water sample results in comparison to this standard, a stream is categorized into one of three categories: met standard, met part one of standard, and failed standard. The interactive map within the 2023 Water Quality Annual Report shows which category each stream is, allowing the public to determine if a waterway is safe to come into contact with. Mr. Holdcroft demonstrated how the map can be used and its various features.

Mr. Holdcroft said the PIC team also monitors water quality for Kitsap's lake, noting that during the summer, swimming beaches are sampled for bacteria and blue-green algae blooms. The algae blooms can cause illness and potentially death, especially for pets. Advisories are posted anytime there is an algae bloom. Mr. Holdcroft displayed the lake advisories issued in 2023. The report also contains tips the community can use to prevent water pollution.

Lastly, Mr. Holdcroft thanked Clean Water Kitsap, who partners with the Health District to fund and conduct water quality work. He also thanked the PIC team, the Communications team, and the Health District's Geographic Information System Analyst.

Councilperson Hytopoulos asked how the Health District monitors and tracks failed septic systems along the Puget Sound. Mr. Holdcroft said PIC has a shoreline monitoring program in which samples are taken from every flow off of the upland area. The samples are tested for bacteria and investigated if needed.

Member Kutz asked if a user of the interactive map clicked on a specific stream, they would be able to see the water quality data. Mr. Holdcroft confirmed. Member Kutz then asked if PIC conducts dye testing along the shorelines to test for pollution from failing septic systems. Mr. Holdcroft said yes, dye testing is a common investigative method they use.

Commissioner Rolfes asked which agency monitors the water quality at the outfall of sewage treatment plants. Mr. Kiess said each water treatment plant has a discharge permit through the Department of Ecology, who requires ongoing monitoring by the plant.

Member Kutz asked if PIC monitors water for medication compounds that might end up in septic systems. Mr. Holdcroft said the Health District has tested water for chemicals of emerging concern in the past, but do not currently do so. Additionally, the Safe Medicine Return program

through the Solid and Hazardous Waste program helps decrease the chances of residents flushing medicines down their toilets.

Mayor Erickson asked if PIC was utilizing microbial source tracking (MST). Mr. Holdcroft said yes, and Mr. Kiess said it is utilized as one of their water monitoring tools. Mayor Erickson explained concerns surrounding the dichotomy between stormwater standards and water quality. Mr. Kiess said the issue is being discussed and regulating bodies are attempting to move away from previous stormwater paradigms. Mayor Erickson and Mr. Kiess discussed the issue further. Various Board members discussed how stormwater vaults work and its effect on the environment.

There was no further comment.

ADJOURN

There was no further business; the meeting adjourned at 11:35 a.m.

Christine Rolfes
Kitsap Public Health Board

Yolanda Fong
Administrator

Board Members Present: *Mayor* Becky Erickson; *Councilperson* Kirsten Hytopoulos; *Member* Stephen Kutz; *Mayor* Robert Putaansuu; *Commissioner* Christine Rolfes; *Member* Dr. Tara Sell; *Mayor* Greg Wheeler.

Board Members Absent: *Member* Drayton Jackson; *Member* Dr. Michael Watson.

Community Members Present: Karei Asentisk, *Community Member*.

Staff Present: Leslie Banigan, *Senior Environmental Health Specialist, Pollution Identification and Correction*; Angie Berger, *Management Analyst, Administration*; Dana Bierman, *Program Manager, Chronic Disease and Injury Prevention*; Margo Chang, *Administrative Assistant, Administration*; Yolanda Fong, *Administrator, Administration*; Adrienne Hampton, *Policy, Planning, and Innovation Analyst, Administration*; Grant Holdcroft, *Program Manager, Pollution Identification and Correction*; John Kiess, *Director, Environmental Health Division*; Siri Kushner, *Director, Public Health Infrastructure Division*; Ross Lytle, *Senior Environmental Health Specialist, Pollution Identification and Correction*; Gabreiel Outlaw-Spencer, *Public Health Educator/Community Liaison, Parent Child Health*; 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: Gib Morrow, MD, MPH
Date: February 6, 2024
Re: Approving Amendment to Resolution 2015-03 to appoint Regional Medical Officer as Deputy Health Officer

The Health Officer for the Kitsap Public Health District, Gib Morrow, MD, MPH, is a licensed physician with required public health educational training and experience, who has served the Kitsap community since August 1, 2020. The duties of county health officers are described in [RCW 70.05.070](#). As the only licensed physicians within their public health agencies, these physicians need to be continuously available for emergency response and clinical issues. While Kitsap Public Health District has interlocal agreements for call coverage with the health officers from a few neighboring counties, this arrangement can put undue hardship on fellow health officers.

With the recent establishment of Regional Medical Officers by the Washington State Department of Health (DOH), one duty of these qualified physicians is to offer call coverage to county health officers, at no cost to local health jurisdictions, for temporary absences during which a county health officer may be unavailable. Effective in 2024, DOH is offering the opportunity for county health officers to receive call coverage from DOH regional medical officers, as well as other logistic and advisory services for brief, mutually acceptable periods during which a county health officer may be away on vacation, ill, or otherwise unavailable. This arrangement is at the mutual agreement of the health district and the covering physician and can be terminated or transferred to a county health officer at any time at the wish of the health district or covering physician.

The regional health officer assigned to the Northwest Water Corridor, which includes Kitsap, is Dr. Herbie Duber, a practicing emergency physician with appropriate public health education and experience, with whom Dr. Morrow and KPHD staff enjoy a collegial and respectful professional relationship. KPHD requests health board approval for Resolution 2024-01 Approving Amendment to 2015-03 to allow Dr. Morrow the opportunity to receive call coverage from the incumbent Regional Medical Officer for brief periods of unavailability in 2024. Attached is the draft Resolution, biographical profile of Dr. Duber and a draft of the contract that will be brought to the Board in the March consent agenda for review.

Recommended Action

The Health District recommends Board approval of Resolution 2024-04.

Please contact me with any questions or concerns about this matter at (360) 728-2260, or gib.morrow@kitsappublichealth.org.

Attachments (3)

Approving Amendment to 2015-03 Appointing Deputy Health Officers

WHEREAS, RCW 70.05.040 authorizes Local Boards of Health to appoint a Health Officer to carry out the powers and duties specified in RCW 70.05.070; and

WHEREAS, Kitsap Public Health District periodically requires the services of a physician qualified under RCW 70.05.050 to serve as local Health Officer during periods when the appointed Kitsap Public Health District Health Officer is not available due to such things as scheduled leave, illness, or other excused absences of relatively short duration; and

WHEREAS, public health protections and public health emergency preparedness and response plans require that Kitsap Public Health District have a local Health Officer with full legal authority to take all necessary actions for the protection of public health 24 hours a day, 7 days a week, and 365 days a year; and

WHEREAS, the Washington State Department of Health (DOH) instituted Regional Medical Offices in 2022, hired qualified public health physicians; who's role includes providing local health officer services, as need, to Local Health Jurisdictions that request back-up health officer due to emergent issues or absence; and

WHEREAS, Health Officers meeting the requirements of RCW 70.05.050, who are legally appointed in other local public health jurisdictions in Washington State are fully qualified to serve as local Health Officers anywhere in Washington State; and

WHEREAS, Health Officers in nearby local public health jurisdictions have expressed an interest and desire to serve as Deputy Health Officers for the Kitsap Public Health District during the short-term periods of Kitsap Public Health District Health Officer non-availability; and

WHEREAS, there will be times when nearby local public health jurisdictions may request the assistance of the Kitsap Public Health District Health Officer to serve as their local County Health Officer during periods when the appointed local County Health Officer is not available due to such things as scheduled leave, illness, or other excused absences of relatively short duration.

THEREFORE, BE IT RESOLVED that the Kitsap Public Health Board hereby:

1. Amends Kitsap County Board of Health Resolution 2015-03, Appointing Deputy Health Officers to include Washington State Department of Health Regional Medical Officers in addition to duly appointed Health Officers from other local health jurisdictions; and

Kitsap Public Health Board Resolution 2024-01

February 6, 2024

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2. Appoints a Washington State Department Of Health Regional Medical Officer or a Local Health Officer duly appointed by any other local public health jurisdiction, and meeting the requirements of RCW 70.05.050, to serve as Deputy Health Officer for Kitsap County during times of absence of the Kitsap Public Health District Health Officer and to act with the full legal authority of the Kitsap Public Health District Health Officer, upon the agreement of both local public health jurisdictions; and
3. Will renew annually the agreement with DOH to allow the Regional Medical Officer to provide health officer services for Kitsap Public Health District at the discretion and mutual agreement of the Administrator, Health Officer, and Regional Medical Officer.

APPROVED: February 6, 2024

Christine Rolfes, Vice Chair
Kitsap Public Health Board

Dr. Herbie Duber
Regional Medical Officer, Northwest Washington
Washington State Department of Health

Dr. Herbie Duber is the Washington State Department of Health Regional Medical Officer for Northwest Washington. In this role, he supports the development of healthcare policy and programs across the state and serves as a key liaison between local public health in Northwest WA and the Department of Health. He is also a Professor in the Department of Emergency Medicine at the University of Washington where he leads the Section of Population Health. He holds adjunct appointments in the Departments of Health Metrics and Global Health, and the Institute for Health Metrics and Evaluation. Clinically, he works in the Emergency Department at the University of Washington and Harborview Medical Centers in Seattle, WA.

Dr. Duber's prior research focused on evaluating health systems and health programs, with a particular interest in vulnerable and underserved populations domestically and internationally. He has co-authored more than 70 peer review publications. Dr. Duber is a vocal advocate, leader, and mentor at the intersection of emergency medicine and public health. He chairs the American College of Emergency Physicians' (ACEP) Public Health Committee and serves as President of ACEP's Washington chapter. He continues to mentor students, residents, and junior faculty, supporting the development of the next generation of emergency medicine and public health leaders.

Dr. Duber received his BA in Biology from Pomona College, after which he was awarded a Fulbright Fellowship. He received his MD from the NYU School of Medicine and his MPH in International Health from the Harvard School of Public Health. Dr. Duber completed his residency training at Harbor-UCLA Medical Center and a research fellowship at UCLA and the RAND Corporation.

INTERLOCAL AGREEMENT FOR ACTING HEALTH OFFICER COVERAGE BETWEEN
WASHINGTON STATE DEPARTMENT OF HEALTH
AND [REDACTED]

Agreement made by and between Washington State Department of Health (“Department”) and [REDACTED] (“LHJ”) pursuant to RCW 39.34.080.

WHEREAS, there may be periods when the position of Local Health Officer (“LHO”) for the LHJ is vacant or the incumbent LHO may be absent or incapacitated and unable to fulfill the responsibilities of the LHO, and it is imperative that the responsibilities of the LHO that require timely public health action be fulfilled for the LHJ during these periods; and

WHEREAS, in its sole discretion and per its guidelines and process, the Department may agree to the appointment of a Department Regional Medical Officer (“RMO”) or other qualified Department employee (referred to collectively as “Designee”) to serve as acting health officer for the LHJ to fulfill the responsibilities of the LHO during a vacancy or period of absence or incapacity.

NOW, THEREFORE, IT IS MUTUALLY AGREED AS FOLLOWS:

1. Designation of Authority.

- a. Pursuant to RCW 70.05.080, [insert name and title of Designee] will serve as acting health officer for the LHJ as requested by an authorized official for the LHJ, provided that:
 - i. This Agreement has been fully executed by the Department and the LHJ and is in full force and effect;
 - ii. The local board of health or official responsible for appointing the LHO has appointed the Designee to serve as acting health officer for the LHJ;
 - iii. The LHJ has complied with the Department’s guidelines and process for requesting LHO coverage;
 - iv. The Department has approved the request for LHO coverage in writing; and
 - v. The Designee has consented to serving as acting health officer as requested.
- b. This Agreement covers any and all LHJ requests for acting health officer coverage during the term of this Agreement. For acting health officer coverage to be effective, the Department must separately approve each request in writing, including the duration of coverage, and the Designee must separately consent to each request. The local board of health or official responsible for appointing the LHO must ensure that an appointment of the Designee to serve as acting health officer is in effect with respect to each request for coverage. One appointment may apply to multiple requests.
- c. The Department retains full authority and discretion to approve or deny any request for acting health officer coverage.
- d. The Designee shall have the same duties, powers, and authority as a regularly appointed LHO while serving as acting health officer and will exercise such duties, powers, and authority in accordance with applicable law and under the direction of the local board of health or, if any, the LHJ’s administrative officer.

- e. Notwithstanding anything to the contrary herein, the Designee shall have the discretion to decline to take any action that the Designee is requested or directed to take, including, but not limited to, actions that, in the Designee's judgment, can be delayed until the appointment of a permanent LHO in the case of a vacancy or return of the incumbent LHO without jeopardizing the public health or do not protect or promote the public health.
 - f. The Designee's authority to serve as acting health officer will terminate when this Agreement expires or is terminated, the Designee's appointment by the local board of health or official responsible for appointing the LHO expires or is terminated, a permanent LHO is appointed in the case of a vacancy, the incumbent LHO is no longer absent or incapacitated and is able to fulfill their responsibilities, when the Designee revokes their consent, the Department rescinds its approval, or when the Department's specified duration of coverage expires.
2. **Indemnification/Hold Harmless/Insurance.** The LHJ shall defend, indemnify, and hold harmless the Designee and the Department and its officers, officials, employees, and volunteers from any and all claims, injuries, damages, losses, or suits, including attorney fees, arising out of or in connection with the performance of this Agreement, except for injuries and damages caused by the willful and wanton negligence of the Designee or the Department or its officers, officials, employees, or volunteers. The LHJ must provide liability insurance coverage for the Designee that is equivalent to the coverage provided for the LHO.
3. **Term.** The term of this Agreement shall commence on the date this agreement is executed by all parties and shall remain in effect for one calendar year, unless terminated earlier per the terms of this Agreement. The parties may extend the term of this Agreement by written mutual agreement.
4. **Termination.** Either Party may terminate the agreement at their sole discretion. Termination shall be effective as provided in written notice provided by the terminating Party, though no earlier than upon receipt of written notice by mail or email, or within three days of the mailing of the notice, whichever occurs first.
5. **Extent of Agreement/Modification.** This Agreement, together with any attachments or addenda, represents the entire and integrated Agreement between the parties and supersedes all prior negotiations, representations, or agreements, either written or oral. This Agreement may be amended, modified, or added to only by written instrument properly signed by both parties.
6. **Notices.**

Notices to the LHJ shall be sent to:

The following mailing address:

Or the following email address:

Notices to the Department shall be sent to:

The following mailing address:

Washington State Department of Health
1610 NE 150th St
Shoreline, WA 98155

Or the following email address:

Receipt of any notice shall be deemed effective upon actual receipt or three (3) days after deposit of written notice in the U.S. mail with proper postage and address, whichever occurs first.

7. **Property and Equipment.** Upon termination or non-renewal of this agreement, all property purchased by the LHJ in furtherance of this agreement shall remain the property of the LHJ and all property purchased by the Department in furtherance of this agreement shall remain the property of the Department. All property shall be returned to its owner upon termination or non-renewal of this Agreement.
8. **Filing.** The LHJ shall be responsible for complying with the requirements of RCW 39.34.040 with respect to this agreement.
9. **Authority to Bind Parties and Enter Into Agreement.** The undersigned represent that they have full authority to enter into this Agreement and to bind the parties for and on behalf of the legal entities set forth below.

(INSERT LHJ)

Washington State Department of Health

Signature

Signature

Name

Name

Title

Title

Date Signed

Date Signed

MEMO

To: Kitsap Public Health Board
From: Adrienne Hampton, Policy, Planning, and Innovation Analyst
Date: February 6, 2024
Re: Kitsap Public Health District's Policy Map

Attached, please find a copy of the revised Kitsap Public Health Policy Map. The Health District's Policy Map reflects policy focus areas at the local level of public health significance. The Health District strives to use policy development as a way to blend health into policymaking and to improve health equity through local, state, and federal decision making alongside our community partners, data, and assessment.

The local focus areas listed below have been identified as important topics to inform local, state, and federal policy analysis, engagement, and development. Co-created alongside community stories, 2023 Community Health Assessment, Community Health Improvement Process, Health Board recommendations, as well as the strategic direction of the Health District, the following are outlined in the Policy Map:

- Optimize Foundational Public Health Services
- Promote equitable access to quality healthcare and services
- Respond to emerging public health needs to increase health equity
- Support initiatives championed by community partners

Taking feedback into consideration, the map has been revised since the 2023 November Health Board meeting. Changes to the map include the addition of an introduction page, supporting evidence, data under each local policy focus area, and related activities underway at the Health District.

The Health District aims to update the policy map on a regular basis. Pending approval, an up-to-date version will be posted to the Health Districts website.

Recommended Action

The Health District recommends Board approval of the Health District's Local Policy Focus Areas.

If you have any questions, please contact Adrienne Hampton at adrienne.hampton@kitsappublichealth.org or (360) 552-8563.

Attachment (1)

POLICY MAP

Revised January 2024

Kitsap Public Health District prevents disease and protects and promotes the health of all people in Kitsap County. To forward this mission, we:



Support policies with the objective of protecting the health of Kitsap residents.



Support efforts to maintain funding to local public health services and programs.



Oppose any policies that reduce local health authority.

POLICY MAP INTRODUCTION

What is the Policy Map?

The Health District's Policy Map reflects focus areas of public health significance for policy analysis and intersectional policy development. The Health District strives to use policy development as a way to blend health into policymaking and to improve health equity through local, state, and federal decision making with community partners. The focus areas included in this map reflect topics of high importance in our community. These topics are informed by the 2023 Community Health Assessment and ongoing efforts at the Health District.

The following focus areas are outlined in the Policy Map:

- Optimize foundational public health services.
- Promote equitable access to quality healthcare and services.
- Respond to emerging public health needs to increase health equity.
- Support collective impact championed by community partners.

2023 COMMUNITY HEALTH ASSESSMENT



Scan this code to view the full Kitsap Community Health Assessment.



WHAT IS A PUBLIC HEALTH APPROACH?

As a public health agency, we:

- Are concerned with protecting the health of entire populations.
- Recognize and define issues.
- Use data and evidence to identify and implement solutions and evaluate success.
- Emphasize collaboration and community engagement.
- Prioritize prevention.



KEY CONCEPTS

Important concepts include:

- Policy: laws, regulations, rules, and other guidelines that direct a course of action.
- Local policy: matters of policy specific to jurisdictions, community partners, and data trends in Kitsap County.
- State policy: matters of policy specific to the Washington State Legislative Session.

Continued >>

POLICY MAP

LOCAL POLICY FOCUS AREAS

OPTIMIZE FOUNDATIONAL PUBLIC HEALTH SERVICES

Continued **funding for public health** is critical to local public health programs, services, and the ability to respond to emerging health concerns.



State-level goal: Maintain and increase public health funding.

Federal-level goal: Support federal action to enhance public health such as the Public Health Infrastructure Saves Lives Act.

PROMOTE EQUITABLE ACCESS TO QUALITY HEALTHCARE & SERVICES

We are committed to all people in Kitsap having **access to affordable and culturally responsive healthcare** and services.



Support actions that align with Kitsap Public Health Board resolutions 2021-01 declaring racism a public health crisis and 2023-04 declaring high healthcare costs and inadequate access to healthcare services public health crises. This includes implementing recommendations in the 2024 Kitsap Healthcare Assessment.



Improve maternal and infant health outcomes to ensure Black, Indigenous, and communities of color have equitable access to quality perinatal care and services. One out of two Kitsap residents (52%) who gave birth in 2021 received adequate prenatal care.



Promoting access to coordinated care, mental, medical, and behavioral health services for all. Among 2022 Kitsap Community Resources survey participants (18 years or older), appointment wait times, cost, and finding a counselor represented barriers to getting needed mental healthcare.

RELATED KPHD ACTIVITIES

- The Health District looks forward to growing the Black Infant Health Program and exploring ways to implement several of the 2023 Kitsap Maternal and Infant Health Forum community recommendations.
- Increase public health representation in behavioral health activities, including support for youth, pregnant and parenting families, and partnership collaboration.

RESPOND TO EMERGING PUBLIC HEALTH NEEDS TO INCREASE HEALTH EQUITY

We promote **integrated responses** to ongoing, developing, and crisis-level public health issues.



Expand resources for opioid response and substance use disorder prevention. This includes services along the continuum of care given increasing opioid overdose deaths in Kitsap since 2018.



Support innovative and cost effective initiatives to facilitate communicable disease containment as state law directs public health to monitor and investigate more than 100 reportable conditions.



Prepare communities for health impacts caused by climate change and other environmental risks as extreme weather and changing temperatures intensify.

RELATED KPHD ACTIVITIES

- Strengthen cross-agency action through the Health District’s Substance Use Prevention and Response Program.
- Work to improve disease testing and treatment service navigation for our community as public health is mandated to control and investigate communicable disease.
- Explore assessment and engagement opportunities to increase community resilience to future impacts of climate change, disasters and emergencies.

SUPPORT INITIATIVES CHAMPIONED BY COMMUNITY PARTNERS

We support **policy development led by community partners** that leads to positive public health outcomes.



Improve the built environment and expand reliable, multimodal transportation. 49% of respondents to a 2022 Kitsap Transit survey preferred investments in high -capacity transit.



Bolster the health of existing housing options, increase low-income housing, and actions to prevent individuals and families from falling into homelessness as the rate of homelessness in Kitsap has increased since 2022.



Support policies that increase health literacy, public health education, social connectedness, and wellness to increase longevity.

RELATED KPHD ACTIVITIES

- Enhance public health participation in planning and community development activities.
- Convene and inspire new collaborative programs in the community, including Kitsap schools.
- Increase language access and communication of public health information.

MEMO

To: Kitsap Public Health Board
From: Adrienne Hampton, Policy, Planning, and Innovation Analyst
Date: February 6, 2024
Re: 2024 Kitsap Public Health District Legislative Priorities

During the November 2023 Health Board meeting, the Health Board received a preview of legislative priorities. Since then, Health District staff have worked alongside statewide public health partners, community partners, internal strategic planning efforts, the 2023 Community Health Assessment, and recent Health Board resolutions (2021-01 and 2023-04), and the Health Board's Policy Committee to finalize Kitsap Public Health's 2024 Legislative Priorities.

Kitsap Public Health coordinates and aligns legislative priorities with the Washington State Association of Local Public Health Officials (WSALPHO) and the Washington State Public Health Association (WSPHA). Attached for your review and approval are the proposed 2024 Kitsap Public Health District Legislative Priorities. Health Board approval of these legislative priorities allows Health Board Members and designated Health District staff to advocate for (or against) priority legislation/rules as described therein.

The Health District's proposed 2024 legislative priorities are:

- Support funding to sustain and strengthen behavioral health systems and supportive services for youth
- Support equitable access to affordable and quality healthcare and services
- Support and ensure access to innovative immunization technologies
- Support opioid response, prevention education, low barrier treatment programs, and resources for youth and first responders
- Support environmental public health programs and assessments
- Support modernizing Washington's child death review statute

The 2024 State Legislative Session started on January 8, 2024. The last day allowed for regular session under state constitution is March 7, 2024.

Recommended Action

The Health District recommends Board approval of the 2024 Health District's Legislative Priorities.

If you have any questions, please contact Adrienne Hampton at adrienne.hampton@kitsappublichealth.org or (360) 552-8563.

Attachment (1)

2024 STATE LEGISLATIVE PRIORITIES

We are grateful for the ongoing funding support from the legislature as public health funding is critical to local public health infrastructure and core programs. We thank the Washington State Association of Local Public Health Officials (WSALPHO) and the Washington State Public Health Association (WSPHA) for setting and monitoring public health legislative priorities.

BEHAVIORAL HEALTH



Support funding to sustain and strengthen our behavioral health system and supportive services for youth

Sustainable funding is needed for services ranging from prevention to crisis level care. The 2022 Kitsap Community Resources survey found that appointment wait times, cost, and finding a counselor represented barriers to getting needed care.

HEALTHCARE



Support equitable access to affordable and quality healthcare delivery

Improving healthcare delivery, clinical care, and workforce is a longstanding Kitsap community priority. This includes maternal and infant health, primary care delivery, communicable disease containment, and insurance coverage. Increasing access and affordability of healthcare is vital for populations with the highest health disparities.

IMMUNIZATION



Support and ensure access to innovative immunization technologies

Vaccines help protect us from serious illness. Updating and broadening the definition of vaccine in statute is critical to reducing cost barriers for childhood vaccines and increasing access for our most vulnerable populations.

OPIOID RESPONSE



Support opioid response, prevention education, low barrier treatment programs, and resources for youth and first responders

The rate of opioid overdose deaths in Kitsap has increased since 2018. The number of responses to suspected opioid use has increased by 15-20% each quarter. Funding for services along the continuum of care, including public education, is vital.

ENVIRONMENTAL HEALTH



Support environmental public health programs and assessments

Support safe and healthy schools by removing the existing budget proviso attached to the State School Rules and fund local health jurisdiction school inspection programs and local school facility upgrades. Support for a Statewide septage capacity analysis will help local health jurisdictions identify challenges related to ensuring the proper, ongoing management of septic systems within their jurisdictions.

CHILD FATALITY REVIEW TEAMS



Support modernizing Washington's child death review statute

Child fatality review teams are an important community tool in the development of child injury and death prevention strategies. Updating statute RCW 70.05.170 would strengthen language for local public health review processes, data access, and partner collaboration.

HAVE QUESTIONS?

Contact Adrienne Hampton at adrienne.hampton@kitsappublichealth.org or 360-728-2235.

MEMO

To: Kitsap Public Health Board
From: Dana Bierman, Chronic Disease and Injury Prevention Program Manager
Date: February 6, 2024
Re: Youth Substance Use Prevention 2023 Highlights

Since 2017, Kitsap Public Health District's Chronic Disease & Injury Prevention (CDIP) program has received funding from the state Youth Cannabis and Commercial Tobacco Prevention Program. The goals of the Youth Cannabis Program are to reduce initiation and use of cannabis by youth (ages 12-20), especially among populations most adversely affected by cannabis use throughout Washington state. The goals of the Tobacco Prevention Program are to assist those who use commercial tobacco quit, prevent youth and young adults from ever starting, protect people from the harmful effects of secondhand smoke and vape emissions, and take strategic steps to eliminate tobacco-related disparities. Under these goals, the CDIP team has taken a preventive approach to address some complex public health challenges.

I will provide the Kitsap Public Health Board with a presentation covering:

- An overview of our Chronic Disease & Injury Prevention Program
- An overview of the Youth Cannabis and Commercial Tobacco Prevention Program.
- An explanation of early prevention, or "upstream," factors that influence youth substance use.
- Highlights of 2023 work and upcoming work.

Recommended Action

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

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

MEMO

To: Kitsap Public Health Board
From: Jessica Guidry, Assistant Community Health Division Director
Date: February 6, 2024
Re: Maternal and Infant Health Update

On July 20, 2023, Kitsap Public Health District, in partnership with Kitsap County and Virginia Mason Franciscan Health, hosted the Kitsap Maternal and Infant Health Forum at the Marvin Williams Recreation Center in Bremerton. The goal of the forum was to foster collaboration, inspire knowledge exchange, and most importantly, share innovative solutions for protecting and improving the health of people who give birth and their infants in Kitsap County.

At today's meeting, we will provide an update on the District's activities to address the forum's recommendations. These recommendations have been outlined in a plan, which is also guided by "[The Health Impact Pyramid](#)" and the "[Washington State Maternal Mortality Review Panel Report](#)." The plan has the following objectives:

1. Increase and improve maternal and infant health services impacting populations with the highest health disparities in Kitsap County.
2. Improve service navigation for pregnant and parenting families and increase access to home visiting programs.
3. Improve funding and resources that address maternal and infant health needs in Kitsap County.

We will highlight a variety of activities to meet these objectives, including the development of a Black infant health program, hiring a care coordinator to assist parents with navigating early childhood services in Kitsap County, discussions with Suquamish Tribe community health team members about services for pregnant and parenting tribal members, and partnering with Virginia Mason Franciscan Health on strengthening local maternal and infant health services.

Recommended Action

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

Please contact me with any questions or concerns about this matter at (360) 728-2338 or jessica.guidry@kitsappublichealth.org.