

Kitsap Public Health Board COVID Retrospective

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Kitsap Public Health District
July 11, 2023



KITSAP PUBLIC HEALTH DISTRICT

The Virus – SARS COV-2

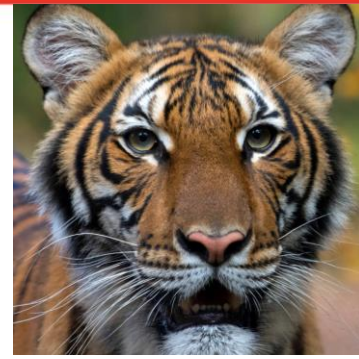


- Coronavirus family, with seven different types, all of animal origin
- ~~Four~~ (now 5) endemic – (?) Russian flu, 1889-94
- SARS (2002, CF 15%) and MERS (2012, CF 35%)
- RNA genome with spike protein envelope



The Host(s)

Bronx Zoo Tiger Is Sick With the Coronavirus April 2020



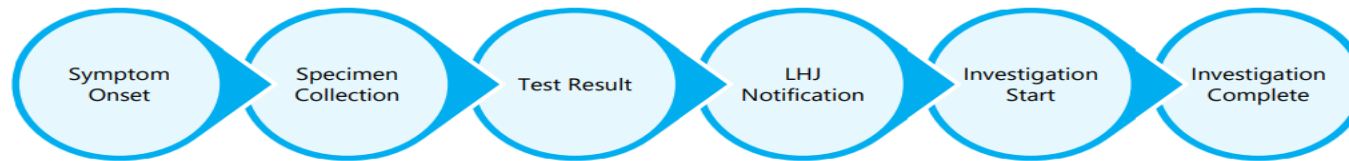
- Bats, pangolin, raccoon dogs most likely source
- Dog, cat, hamsters, deer, mink, hippo, tiger...
- First case in Kitsap March 2020

The story of Kitsap's first two known COVID-19 cases, six months later

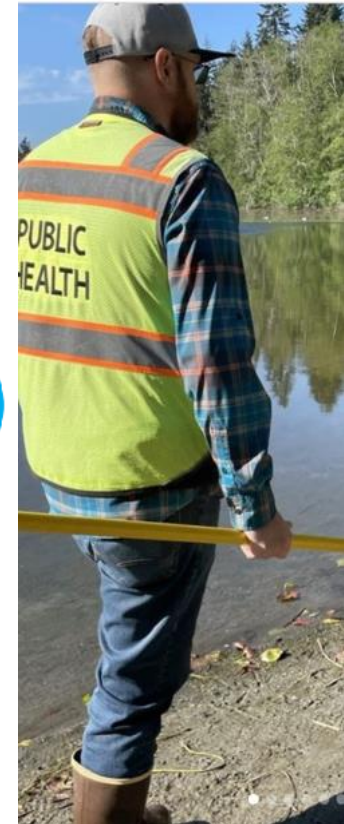


The Early Response

KPHD COVID-19 Process Metrics



Average Total Time: 7.3 Days	3.5 Days	2.3 Days	0.9 Days	0.2 Days	0.6 Days
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- Repurposed Health District staff to case/contact
- Very little testing available through fall 2020



The Response (cont.)

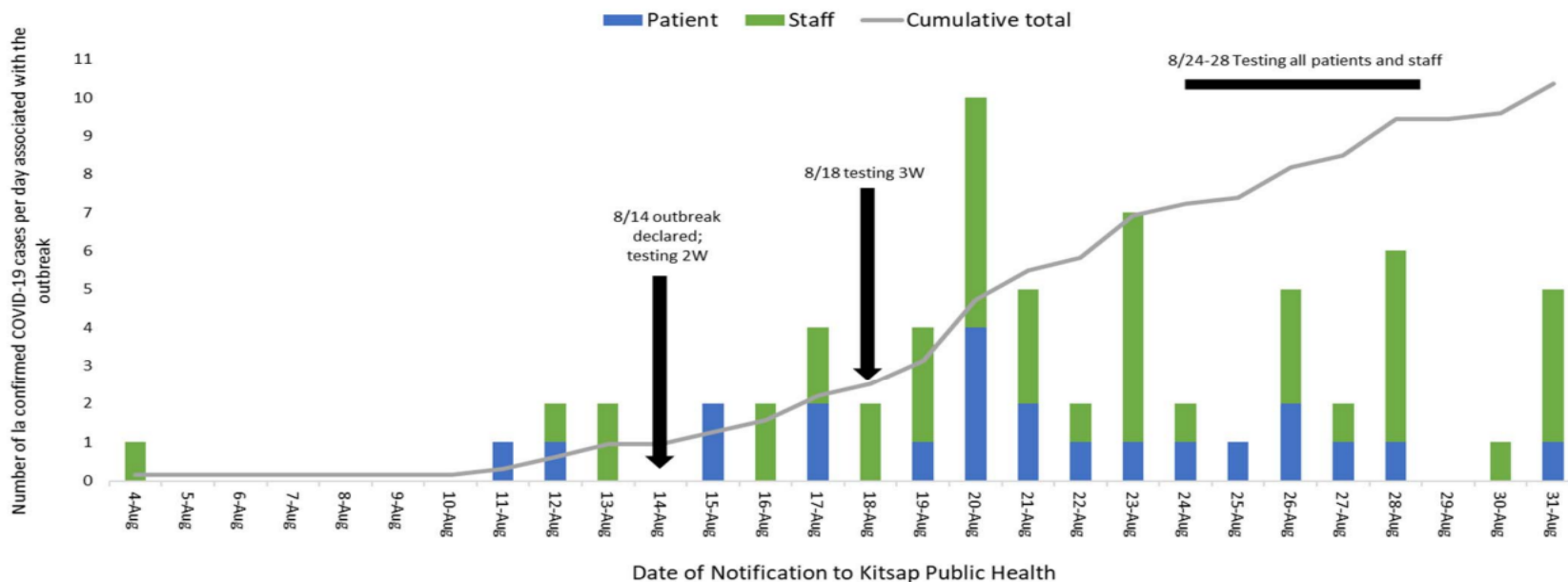
- SMMC Outbreak, August 2020
- Community-based test sites
- Who pays and gets paid?
- Organizational outreach approach

Kitsap County drive-thru COVID-19 testing



Learn more and register for testing at at kcowa.us/covidtesting

Saint Michael Medical Center COVID-19 Outbreak, Bremerton, WA
Lab-confirmed COVID-19 cases reported to Kitsap Public Health District as of 4:30pm 8/31/2020 (n=66)



Then there were vaccines!

- Who's going to get them?
- Who's going to give them?
- What are the risks?
- The benefits?

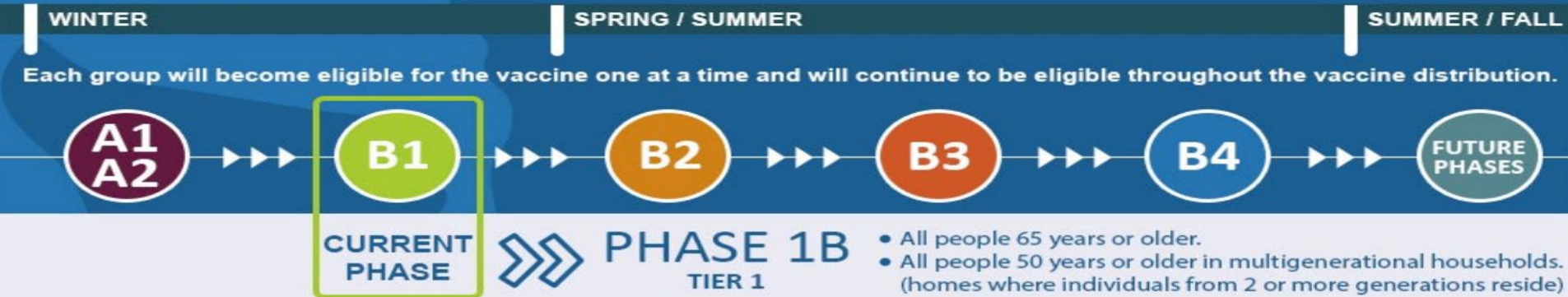
Vaccines present a community challenge



WASHINGTON'S COVID-19 VACCINE PHASES

Phase 1 Estimated Start Dates (Tiers A and B)

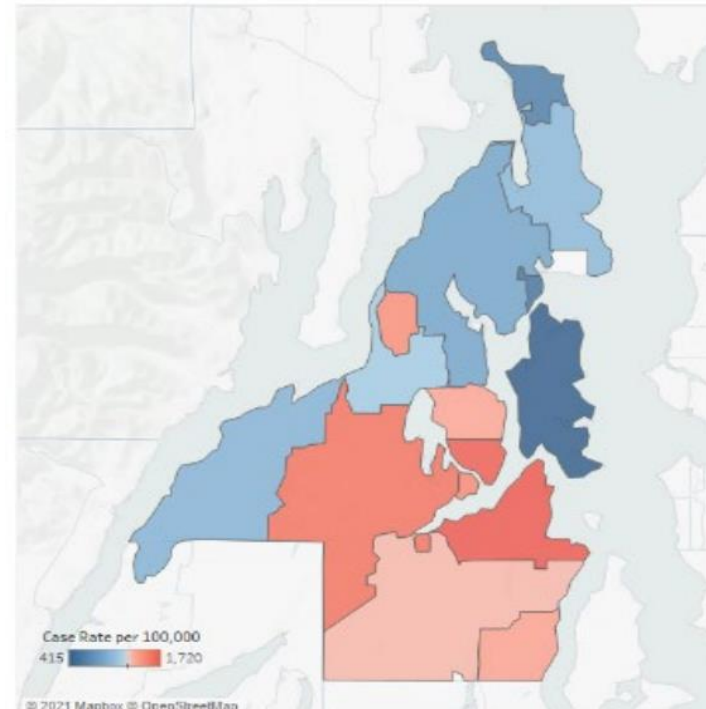
Find out if it's your turn at [FindYourPhaseWA.org](https://www.findyourphase.org)



And exacerbated inequities in Kitsap...

- Disproportionate impacts
- Access and hesitancy
- Passage equity resolution

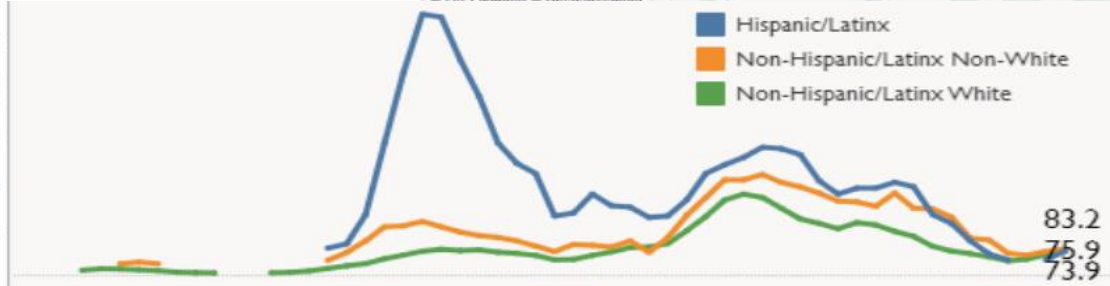
Case Rate per 100,000 of Kitsap County COVID-19 Cases in 2021 by Zip Code



By Race & Ethnicity - Case Rate per 100,000 (Past 4 Weeks)

People identifying as **Non-Hispanic and Non-White** have the highest rate in the past 4 weeks.

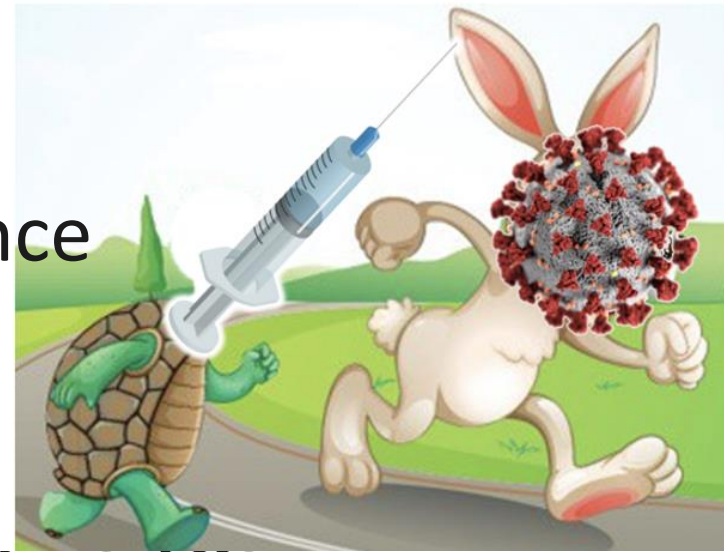
Note: 45% of race & ethnicity data is unknown. Values less than 10 not



And new variants

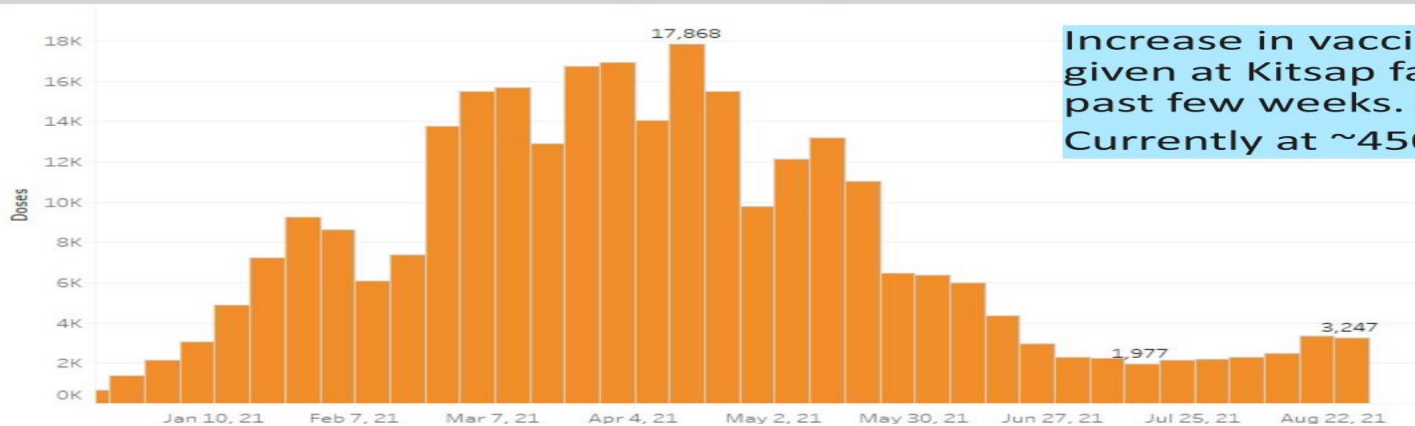
VACCINES vs VARIANTS: THE TORTOISE & THE HARE

- Cases soared
- Conflicting political guidance
- Vaccines declined
- More hospitalized/died



Vaccines Administered at Kitsap Facilities

Number of Vaccine Doses Given at Kitsap Facilities by Date **



Increase in vaccine doses given at Kitsap facilities over past few weeks. Currently at ~450 doses/day.



Conclusions



- Public health has been chronically underfunded
- PH is not the U.S. healthcare delivery system
- Payment for novel testing/treatment options for PH emergencies is not defined or equitable
- The Healthcare workforce is strained/ailing
- Cost-effective services (1* care, prevention) that save our system \$ are not valued or reimbursed
- Our healthcare system contributes to, rather than minimizes, inequities in outcomes



References



- [Vaccines present a community challenge](#)
- [Vaccination effort could use a boost](#)
- [Masking and vaccines, let's do it for the kids](#)
- [A season for celebration, but also caution and persistence](#)
- [Looking back at Kitsap's COVID response to help strengthen overall health system](#)
- [Shortchanged: The Impact of Chronic Underinvestment of Public Health](#)





TETRA TECH

COVID-19 After-Action Report Project

Board of Health Presentation

11 July 2023



KITSAP PUBLIC
HEALTH DISTRICT

Introductions

- **Gabrielle Hadly, MPH**

- Program Manager, Public Health Emergency Preparedness & Response Kitsap Public Health District

- **Michelle McMillan, MPH**

- Program Coordinator, Immunization and General Communicable Disease Kitsap Public Health District

- **Sara van der Capellen, MPH, MBCP, MEP**

- Project Manager. Tetra Tech Inc.

- **Pattijeau Hooper, Ph.D., CEM**

- Deputy Project Manager, Tetra Tech Inc.



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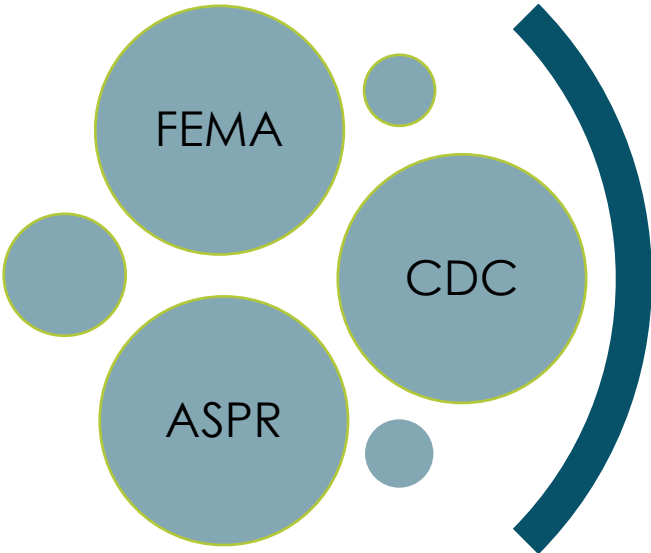


Process



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Methodology



Federal Response
Core Capabilities



Kitsap Public Health
District Response
Operations



Final AAR/IP



Themes

- Collaboration
 - Adapted quickly to the need for relationships with response partners
 - Limited pre-existing relationships
- Incident Response Roles
 - Lack of clarity among partnerships
 - Private sector and public sector
- Deferred Maintenance
 - Chronic underfunding impacts multiple systems
 - Data, staffing, training, exercises



Major Strengths

- Staff demonstrated dedication and professionalism to serve the whole community during the rapidly changing and sustained incident.
- Kitsap community volunteers displayed dedication to serving the community throughout the incident.



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Major Strengths

- Through successfully leveraging community partnership, KPHD established the Vaccine Equity Collaborative. This group informed emergency-related communications and supported equitable vaccine
- KPHD identified and implemented resources to address the stress and mental health needs of responders as a routine element of the operation.



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Primary Areas for Improvement

- The lack of an agreed-upon method for information sharing impacted responding agencies' ability to coordinate at the onset of operations. This affected coordination efforts among Fire, EMS, KPHD, and Kitsap County Department of Emergency Management (KCDEM).
- The roles and responsibilities for Emergency Support Function 8 (ESF-8) within the county response structure were unclear and should be reviewed in partnership with KCDEM to improve future responses.
- Training and exercises in multiple modalities are needed on a routine basis for all KPHD staff, those with primary positions in response operations, and just in time training to adapt to novel incidents.



Primary Areas for Improvement

- Response operations were dependent on federal funding indicating lack of sustained County support.
- Deferred maintenance to planning, training, exercise, and volunteer engagement programs impacted response operations.
- Data infrastructure systems do not reflect modern expectations of production and interoperability with stakeholders to best serve the public.
- KPHD struggled to implement local guidance and update policies based on ever-changing State and Federal Guidance.





Improvement Plan



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Improvement Plan

- Identified in the Report
 - 47 elements
 - 32 strengths
 - 15 areas for improvement
 - 64 recommendations
 - Addressed according to resources and capabilities of the KPHD
- Improvements currently underway
- ESF-8 Task Force
 - Prioritizing relationship building for operational effectiveness
- Volunteer Specialists
 - To address operational readiness and relationship support with KDEM



Questions?



Thank you



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Kitsap County Healthcare System Needs Assessment and Recommendations

KPHD Board Meeting: July 11, 2023



JOHNS HOPKINS
BLOOMBERG SCHOOL
of PUBLIC HEALTH

**Center for
Health Security**

Johns Hopkins University Research Team

Research Team



Tener Veenema, PhD,
MPH, MS, RN, FAAN
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Diane Meyer, RN, MPH
Associate Scholar



Sanjana Ravi, PhD
Senior Scholar



Erin Fink, MS
Analyst

Support Staff

Hannah Ottman-Feeney
Senior Program Coordinator

Project Overview

- COVID-19 has exposed weaknesses within local healthcare system infrastructure
 - Lack of workforce capacity, closures of health facilities, inequities in access to care
- These challenges are not unique to any one county, but systematic and tailored assessments are critical to understanding where failures are occurring and how to address gaps

Project Overview

- We proposed conducting a comprehensive assessment and evaluation of Kitsap County's healthcare system and workforce
 - Where are the strengths and weaknesses? How has the COVID-19 pandemic exacerbated weaknesses?
 - What communities are experiencing inequities in access to care?
 - What programs or policies are needed to help address weaknesses within the health system? How should these be prioritized?
- Assessment and evaluation builds on previous work conducted by the Kitsap Public Health District (KPHD)
 - 2023 St. Michael Medical Center Community Health Needs Assessment
 - KPHD After Action Review
 - Health indicators collected by KPHD
- Project length: 9 months (April to December 2023)

Study Methods

- Historical analysis of the Kitsap County health system
 - Explore social, economic, and political factors shaping the provision, administration, accessibility, and quality of health services available
- Policy analysis
 - Review of relevant laws, policies, norms, and industry standards governing the administration of health services
- Key informant interviews
 - Conduct a series of qualitative, semi-structured interviews to gain insight into the culture and institutional dynamics of the health system; identify strengths/weaknesses and opportunities for improvement
- Focus groups
 - Meet with members of the community to gather their opinions about the health system and areas for improvement

Delphi Study

- Overview of Delphi Study
- Step 1: Thematic coding of key informant interview and focus group transcripts; integration with data acquired through policy and historical analysis
- Step 2: Generate a comprehensive list of healthcare challenges and interventions
- Step 3: Recruitment of participants (approx. 25) to participate in Delphi study
 - Round 1: Open-ended questions about needed healthcare policy changes and reforms
 - Round 2: Likert-style questions asking participants to rate the feasibility of the most salient policy changes and reforms
 - Round 3: Re-rating of suggested policy changes and reforms for which there was little or no consensus in round 2
 - Final in-person working group meeting to discuss results and formulate implementation plan

Study Deliverables

- Final report of data collected during study, including:
 - Summary of key themes identified in the historical and policy analyses
 - Detailed report of themes highlighted by the interviewees and focus group members, along with poignant quotes
 - Detailed report of the findings from the Delphi study
 - Detailed list of recommendations for how to increase access to, and quality of, healthcare services in Kitsap County