

KITSAP PUBLIC HEALTH BOARD

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

MEETING AGENDA

July 5, 2022

** Please note that this is a virtual / online meeting held pursuant to the COVID-19 State of Emergency (Proclamation 20-05 by the Governor) and Engrossed Substitute House Bill 1329, Open Public Meetings – Various Provisions. Electronic connection and viewing information for the meeting is provided at the end of the agenda. **

10:30 a.m.	1.	Call to Order Mayor Greg Wheeler, Chair	
10:31 a.m.	2.	Approval of June 7, 2022, Meeting Minutes <i>Mayor Greg Wheeler, Chair</i>	Page 5
10:33 a.m.	3.	Approval of Consent Items and Contract Updates Mayor Greg Wheeler, Chair	External Document
10:35 a.m.	4.	Public Comment – PLEASE SEE NOTES AT ENI Mayor Greg Wheeler, Chair	O OF AGENDA
10:45 a.m.	5.	Health Officer and Administrator Reports Dr. Gib Morrow, Health Officer & Keith Grellner, A	dministrator

INFORMATION & DISCUSSION ITEMS

10:55 a.m.	6.	Update on Nonelected/Non-Tribal Board Member Position Keith Grellner, Administrator	on Recruitment
11:00 a.m.	7.	Food Safety & Living Environment Program Dayna Katula, Program Manager	Page 13
11:35 a.m.	8.	Nurse-Family Partnership Program Nancy Acosta, Program Manager	Page 30
11.45	0	. 11	

11:45 a.m. 9. Adjourn

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



Instructions for virtual attendance at Kitsap Public Health Board meetings**

Health Board Meetings Via Zoom

The Kitsap Public Health Board will be held via Zoom webinar, broadcast live on Comcast channel 12, WAVE channel 3, the <u>BKAT website</u> and Facebook (please note: there is no physical location for this meeting. Board members and staff will all participate remotely). The Health Board and presenters are **panelists**, members of the public are **attendees**.

Webinar **attendees** do not interact with one another; they join in listen-only mode, and the host will unmute one or more attendees as needed.

How to Join the Zoom Meeting

To join the meeting online, please click the link below from your smartphone, tablet, or computer:

https://us02web.zoom.us/j/86186052497?pwd=TXcrQU1PRWVVVHgyWERXRFluTWloQT09

Password: 109118

Or join by telephone: Dial: +1 (253) 215-8782

Webinar ID: 861 8605 2497

Information & Directions for Public Comment

We apologize, but verbal public comment *during* the meeting may only be made through a **Zoom connection.** The public may make verbal comments during the Public Comment agenda item <u>if they are attending the meeting via Zoom</u>.

As this meeting is a regular business meeting of the Health Board, verbal public comment to the board will have a time limit so that all agenda items will have the opportunity to occur during the meeting. Each public commenter will receive a specific amount of time to speak to the board as determined by the Chair based on the number of public commenters for the meeting.

^{*}Zoom meeting is limited to the first 500 participants. A recording of the meeting will be made available on our website within 48 hours of the meeting.

Kitsap Public Health Board – Meeting Agenda (continued) July 5, 2022 Page 3

Written comments may be submitted via regular mail or email to:

Regular Mail:

<u>Email:</u>

Kitsap Public Health Board

Attention: Executive Secretary

345 6th Street, Suite 300 Bremerton, WA 98337 HealthBoard@kitsappublichealth.org

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

Public Participation Guidelines

Below are recommendations for use by members of the public in meetings conducted via Zoom Webinar.

Identification: Upon entering the webinar, please enter your name, number or other chosen identifier, so that the host can call upon you during the public comment period.

Raise Hand (pictured below): You have the ability to virtually raise your hand for the duration of the meeting but you will not be acknowledged until you are called on during the public comment period. NOTE: If you have used your telephone to access the Zoom meeting, you may press *9 to "raise your hand". The host will unmute you when it is your turn to speak.



Public Comment Period: Use "Raise Hand" to be called upon by the host. The host will announce your name when it is your turn.

Mute/Unmute: Attendees will be muted and not audible to the Board except during times they are designated to speak. When you are announced, you will be able to unmute yourself. NOTE: If you have used your telephone to access the Zoom meeting, **you may press *6** to mute/unmute yourself.

Time Limit: Each speaker testifying or providing public comment will be limited to a time period specified by the Chair.

Use Headphones/Mic for better sound quality and less background noise, if possible.

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Closed Captions/Live Transcripts are available. On the bottom of your zoom window, click the cc button to turn on/off captions. You can adjust the way captions appear on your screen in settings. Please be aware, captions are auto-generated by Zoom and may contain errors.

This is a public meeting of the Health Board. It is expected that people speaking to the board will be civil and respectful. Thank you for your cooperation.

KITSAP PUBLIC HEALTH BOARD MEETING MINUTES

Regular Meeting June 7, 2022

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

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

REVIEW AND APPROVE AGENDA

There were no changes to the agenda.

EXECUTIVE SESSION

At 12:32 p.m., Chair Wheeler announced the board would exit for Executive Session for approximately 20 minutes.

At 12:50 p.m., the Chair Wheeler closed the Executive Session. No decisions were made.

BOARD MEETING MINUTES

Commissioner Charlotte Garrido moved, and Mayor Becky Erickson seconded the motion, to approve the minutes for the May 3, 2022 regular meeting. The motion was approved unanimously.

CONSENT AGENDA

The June consent agenda included the following contracts:

- 1511, Clallam, Jefferson, Kitsap and Mason Counties, Hood Canal Regional Septic Loan Program
- 2246, OSPI, Summer Food Inspections
- 2262, Jefferson County Public Health, Youth Cannabis & Commercial Tobacco Prevention Program (YCCTPP)
- 2262, Kitsap County, Youth Cannabis & Commercial Tobacco Prevention Program (YCCTPP)

Mayor Rob Putaansuu moved and Commissioner Rob Gelder seconded the motion to approve the consent agenda, including the Contracts Update and Warrant and Electronic Funds Transfer Registers. The motion was approved unanimously.

PUBLIC COMMENT

Chair Wheeler allowed each person two minutes for public comment.

Kitsap Public Health Board Regular Meeting June 7, 2022 Page 2 of 7

There were no public comments.

HEALTH OFFICER/ADMINISTRATOR'S REPORT

Administrator Update:

Mr. Keith Grellner, Administrator, informed the board that 31 applications have been received so far for the three open positions on the board within three required categories: public health, healthcare facilities and healthcare providers; consumers of public health; and other community stakeholders. The Health District has shared information about the recruitment process with tens of thousands of Kitsap County residents through email blasts, social media posts and news stories. Additionally, the recruitment team has reached out to over 100 local organizations, including healthcare and social services, providers, businesses, industry associations, nonprofit groups, grassroots organizations and civic clubs. An extensive webpage dedicated to this recruitment can be found at https://kitsappublichealth.org/about/board expansion.php.

At this time, the interview team has 6 hours of available interview time on June 21 and 24, which allows time to interview the top two candidates from each category. Mr. Grellner noted the Personnel Committee may wish to add additional interview times to interview more candidates in July or August. The law does not require the board to interview every candidate. The administrative code stipulates that the board may interview a smaller number of applicants if the total number of applicants is substantial, which it is. The only stipulation in the administrative code is that the smaller group of interviewees shall include diversity of expertise and lived experience.

The application submittal period closes Monday, June 13. Thereafter, the recruitment team will compile applicant packets for the Personnel Committee's review. Mr. Grellner said he will share more information at the July 5 board meeting.

There were no further comments.

Health Officer Update:

Dr. Gib Morrow, Health Officer, provided updates on COVID-19, wildfire smoke and air quality issues, monkeypox, and notifiable conditions.

Dr. Morrow said COVID-19 transmission rates are currently high. Seven-day case rates have plateaued below 200 cases. He said cases are likely 5-6 times higher than what is being reported to public health due to at-home testing. He noted that the number of weekly hospitalizations of Kitsap residents increased from 17 to 30 in the most recent week and noted that some of these are incidentally positive for COVID-19 rather than the cause of their hospitalization. Additionally, there were 10 COVID-19 fatalities in Kitsap County in May. Dr. Morrow said vaccination continues to be the single most important intervention for everyone. The pediatric vaccine for children 6 months and older is expected to become available at the end of June. He also noted that we continue to see significant collateral damage from this disease in terms of

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mental health issues, with the most profound impacts seen in children and adolescents. He said mental health assistance is available for those who need it.

Dr. Morrow said the COVID-19 after action survey received about 350 responses, which dwarfs numbers seen in larger and more populous counties. This after-action review is geared to assess our response and prepare for future events. Response analysis along with interviews will be used to compile a final report to suggest changes to improve our response to future emergencies in Kitsap County.

Next, Dr. Morrow discussed wildfire smoke and air quality. The Washington State Department of Health (DOH) and Environmental Protection Agency have aligned their air quality scales to improve clarity and consistency to recommendations to protect our health as air quality becomes impaired. Dr. Morrow said we can expect poor air quality in the warmer months and encouraged families to begin planning clear air spaces within their home environments. Health District communications will include very specific instructions for how this can be done effectively and affordably. He said from June 13-17, the Health District will be providing Smoke Ready information along with local partners, including the Puget Sound Clean Air Agency, throughout the region. The Kitsap County Department of Emergency management is making plans to identify and provide clean air centers in the community as smoke becomes severe in the county.

Next, Dr. Morrow said the Health District's Communicable Disease (CD) team is aware of confirmed monkeypox in our region and is working closely with DOH and the Centers for Disease Control and Prevention (CDC) to be prepared to monitor exposed cases and to obtain and administer vaccines from the Strategic National Stockpile, if necessary. Monkeypox is a serious disease and the virus is similar to the viruses that cause smallpox. Typical symptoms of monkeypox are fever, headache, muscle ache, back ache, swollen lymph nodes, exhaustion, and rash. The rash is unique and identifiable as monkeypox. This particular strain comes from West Africa and has a case fatality rate estimated at between 1 to 10 %. As of May 21, there were 92 confirmed cases in 12 countries. As of June 2, the CDC has reported 19 confirmed cases in nine states in the United States. The Health District sent out provider advisories to help local providers be aware and know what to look for. Dr. Morrow said the Health District is taking this issue seriously but noted the disease does not currently present a major threat to the general public.

Dr. Morrow also noted that the CD and Epidemiology teams are doing a fantastic job managing a highly complex tuberculosis outbreak. These cases are presenting clinical and social challenges due to antibiotic resistance patterns. He added that gonorrhea remains elevated throughout the Olympic region. There were 141 cases in the region between January and April, with majority being in Kitsap County. There has been a 50 percent increase from last year in gonorrhea cases and cases have been increasing since 2017.

Next, Dr. Morrow said foodborne illness is more common this year. Campylobacter, a foodborne illness, has had a 68% increase in Kitsap cases compared to last year.

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Lastly, Dr. Morrow said the Health District is increasing communications about avian influenza again this year. It is not a significant human health concern, but has been detected in domestic and wild birds in the U.S. including Washington state.

Mayor Erickson noted there was recently a Jif peanut butter recall for salmonella. She asked if the Health District tracks these food recalls locally and shares information with the community and medical providers about it. Dr. Morrow confirmed that the Health District does track these and post them on their website. He said the Health District posts recalled lot numbers on their website and takes calls from the public regarding recalls. He said the recall was issued through the FDA on May 20 and said there have been 16 cases of salmonella in 12 states.

Dr. Morrow said these recalls happen frequently and said the Health District could send out more health advisories but cautioned about alarm fatigue.

There were no further comments.

RESOLUTION 2022-07, APPROVING UPDATES TO KITSAP PUBLIC HEALTH BOARD BYLAWS

Mr. Grellner approached the health board regarding Resolution 2022-07, Approving Updates to Kitsap Public Health Board Bylaws. The purpose of the revised Bylaws is to incorporate required changes related to Health Board membership composition in response to the state Legislature's passing of Engrossed Second Substitute House Bill 1152 (mostly codified in RCW 70.46.031 for single county health districts), and the Kitsap County Board of Commissioner's approval of revisions to Kitsap County Code Chapter 9.52, Kitsap Public Health District, via adoption of Kitsap County Ordinance No. 614-2022 on May 23, 2022 (also attached).

The draft updates to the Bylaws have been reviewed and commented on by the Health Board's Policy and Personnel committees; legal counsel to the Health District; the Health District; and the full Health Board. Mr. Grellner noted the resolution has an effective date of today, June 7, but said the board may want to consider changing that to September 1.

Commissioner Gelder recommended an August 1 effective date to have the updated bylaws in place by the time the County Board of Commissioners appoints the new board members.

Commissioner Ed Wolfe asked what the reimbursement rate is for non-electeds. Mr. Grellner said the reimbursement rate for non-electeds, who are not being reimbursed by an employer or other organization, is \$85 per meeting. This applies to regular meetings, committee meetings and other approved board activities.

Mayor Putaansuu moved and Commissioner Gelder seconded the motion to approve Resolution 2022-07, Approving Updates to Kitsap Public Health Board Bylaws with an amended effective date of August 1, 2022.

Common\Admin\Board-KPHD\2022\06 June\Board Minutes June 2022 DRAFT

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Mayor Erickson asked for more information about the recruitment process. Mr. Grellner said the Health District has done extensive outreach to the public and local community groups, employers and civic groups. He said the board appointed the Personnel Committee, along with Dr. Morrow and Mr. Grellner, to review applications and conduct interviews. The Committee currently has 3 hours of interview times scheduled on June 21 and again on June 24. If the Personnel Committee would like, the Health District will schedule additional interview dates. Mr. Grellner will report back an update on the process at the July 5 meeting.

Mayor Erickson asked how and when individuals will be sworn into the board and when they will be educated about their responsibilities, etc. Mr. Grellner said the Personnel Committee will make a recommendation to the full board on new members. The Health Board will approve or not approve these recommendations and then will make a referral to the Board of County Commissioners, as the county legislative authority for final approval and appointment. Additionally, Mr. Grellner said staff are updating the board orientation materials that Dr. Morrow and Mr. Grellner will use to orient new board members. The State Board of Health and DOH are also working on an orientation process, but details haven't been shared yet about that. New members will be oriented about ethics and rules like the Open Public Meetings Act (OPMA), the Public Records Act, etc.

Commissioner Wolfe asked if all board members will get information about applications. Mr. Grellner said he could provide more information to board members who would be interested. Councilmember Kirsten Hytopoulos asked about OPMA in respect to the full board weighing in on candidates. Commissioner Wolfe clarified that he intended for board members just receive the candidate information but not to make any decisions.

Mr. Grellner said any board members who would like to review applications should reach out to him in the next few days. He said will follow up with legal counsel.

The motion was approved unanimously.

There was no further comment.

EQUITY PROGRAM UPDATE

Ms. Jessica Guidry, Equity Program Manager, approached the board with an Equity Program update.

Ms. Guidry said the Kitsap Public Health District's Equity Program was launched after the Kitsap Public Health Board approved Resolution 2021-01, Declaring Racism a Public Health Crisis. She said she would provide the Health Board with an update on the progress the Health District has made in implementing several of the deliverables identified in the approved resolution.

Today's presentation focused on the following Equity Program activities:

Common\Admin\Board-KPHD\2022\06 June\Board Minutes June 2022 DRAFT

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- Our definition of "equity": Equity is the guarantee of fair treatment, advancement, opportunity, and access for all individuals. To achieve equity, we strive to identify and eliminate barriers that have prevented the full participation of some groups and ensure that all community members have access to community conditions and opportunity to reach their full potential and to experience optimal well-being and quality of life.
- The Equity Program guides and supports agencywide and program initiatives to advance health equity and the use of a public health approach to advancing racial equity.
- The Equity Program collaborates with the Human Resources Program and Health District employees to build an inclusive and antiracist workplace culture that is continuously improving and that provides services that are accessible, culturally appropriate, and equitable.
- Current Equity Program priorities are organizational assessment, employee training, internal policy review, and community partnerships.
- The Equity Program uses a layered employee training approach by training directors, managers, and then employees and uses the social ecological model. The first employee training will occur in June through September 2022.
- The Equity Program strives to center the voices of our communities experiencing health inequities in our equity work.
- Equity outreach activities include:
 - o 8 presentations at community meetings and public events since September 2021
 - o Public events:
 - Kitsap Human Rights Conference
 - Bremerton "Getting to Racial Equity" conversation
 - UFSI Race and Equity Summit
 - o Participation in several community groups including:
 - Kingston Citizens Advisory Committee
 - Bainbridge Island Senior Group
 - NAACP Unit 1134
 - League of Women Voters of Kitsap County
 - Kitsap County Human Rights Council
 - Kitsap Equity Race and Community Engagement (ERACE) Coalition
 - o Participation in Kitsap Community Resources (KCR) Community Partnerships Committee, NAACP Vital Information Group, and other groups
 - o One-on-ones with community leaders and organizations
 - o Participation in events, e.g.,
 - NAACP Juneteenth Resource Fair
 - Juneteenth Freedom Festival

There was no further comment.

ADJOURN

There was no further business; the meeting adjourned at 1:46 p.m.

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Greg Wheeler
Kitsap Public Health Board
Keith Grellner
Administrator

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

Board Members Absent: None.

Community Members Present: See attached.

Staff Present: Amy Anderson, Public Health Educator, Public Health Emergency Preparedness and Response; Angie Berger, Administrative Assistant, Administration; Kelly Dowless, Human Resources Analyst, Human Resources; April Fisk, Program Coordinator, Contracts Manager, Public Records & Safety Officer, MAC, Administration; Keith Grellner, Administrator, Administration; Jessica Guidry; Program Manager, Equity; Gabrielle Hadly, Program Manager, Public Health Emergency Preparedness and Response; Grant Holdcroft, Program Manager, Pollution Identification and Correction; Karen Holt, Program Manager, Human Resources; Wendy Inouye, Epidemiologist 2, Assessment and Epidemiology; Kimberly Jones, Program Manager, Drinking Water and Onsite Sewage Systems; Dayna Katula, Manager, Food and Living Environment; Sarah Kinnear, Community Liaison, Chronic Disease Prevention; Anne Moen, Public Health Educator, Public Health Emergency Preparedness and Response; Gib Morrow, Health Officer, Administration; Carin Onarheim, Disease Intervention Specialist, Communicable Disease; Kelsey Stedman, Program Manager, Communicable Disease; Amanda Tjemsland, Epidemiologist, Assessment and Epidemiology.

Kitsap Public Health Board Meeting (Virtual Attendance)

Webinar ID Actual Start Time Attendee Count

861 8605 2497 6/7/2022 12:12 28

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NAME JOINED BY PHONE

Amanda Tjemsland

Amy Anderson

Angie Berger (she / her)

Anne Moen - KPHD

April Fisk

Becky Erickson

BKAT

Carin Onarheim (Bremerton# WA)

Charlotte Garrido

Dave

Dayna Katula

Denise Greer

Ed Wolfe

Gib Morrow

Grant Holdcroft

Greg Wheeler

Irene Moyer

Jessica Guidry (she/her)

John Clauson

Karen Holt

Keith Grellner

Kelly Dowless

Kelsey Stedman (she/her)# KPHD

Kenneth Klein

Kimberly Jones

Kirsten Hytopoulos

Mandy Meigs

Pat Mcganney

Patty Lyman

PHEPR Team

Rebecca Pirtle

Rob Putaansuu

Robert Gelder

Sarah Kinnear# KPHD

Shannon Schroeder

Steve Powell

Wendy Inouye (Kitsap Public Health)



MEMO

To: Kitsap Public Health Board

From: John Kiess, Environmental Health Director

Date: July 5, 2022

Re: Food and Living Environment Program Overview and Updating Ordinance 2014-01 *Food*

Service Regulations

At the July 5th regular meeting, Dayna Katula, Food and Living Environment Program Manager, will provide a brief program overview. We would also like to make the Board aware of our work to update our local food ordinance. The Health Board has a current <u>Ordinance 2014-01 Food Service Regulations</u>, adopted December 2, 2014. The existing ordinance contains some outdated language and is in need of an update for several local requirements. Primarily, this ordinance adopts <u>Chapter 246-215 WAC Food Service</u> as amended, however, the ordinance also provides some local food service permitting requirements and provides an enforcement framework for program staff. Examples of substantive changes to update the existing 2014 ordinance include:

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

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

Recommended Action

None at this time, informational only.

Please feel free to contact me at any time regarding this ordinance update. I can be reached at (360) 728-2290, or john.kiess@kitsappublichealth.org with any questions or comments.



Food & Living Environment Program Overview

Dayna Katula



Food & Living Environment staff includes nine full time employees

Jodie Holdcroft 23 years



Paul Giuntoli 16 years



Susan Van Ort
9 years



Layken Winchester
3 years





Harrison Forte
1 year



Rosalie Howarth
1 month



Melissa O'Brien 2 years



Nolan Simmons 1 year

What do we spend our time doing?



Junk drawe

Bed bugs









CAMPS

- WAC 246-376
- Inspect for general sanitation& safety
- Challenges





WATER RECREATION FACILITY SAFETY

- WAC 246-260 and WAC 246-262
- Goal: Minimize waterborne illnesses, injuries, and drownings
- General safety inspections
- Water chemistry inspections
- 121 permits





Our goal is to minimize foodborne illness in Kitsap County.

Plan review

Inspections

Education & partnerships

FOODBORNE ILLNESS STATS

About 65 foodborne illness reports in Kitsap year-to-date

United States	Washington			
48 million illnesses	960,000			
128,000 hospitalizations	2,500			
3,000 deaths	60			

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FOOD RECALLS

- 2-10 products per week
- Recall process
- Public notification





FOOD SAFETY

- KPHB Ordinance 2014-01
- WAC 246-215
- WAC 246-217
- RCW 43.20.149

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• Ordinance update





Food handling procedures

- Are the procedures safe?
- Does the flow work?



Facility & menu requirements

Does the facility & menu meet Food Code requirements?



KITSAP'S FOOD ESTABLISHMENT STATS SO FAR THIS YEAR

• ~ 1,400 permanent permits

• ~ 175 temporary permits issued

Over 1,600 inspections performed

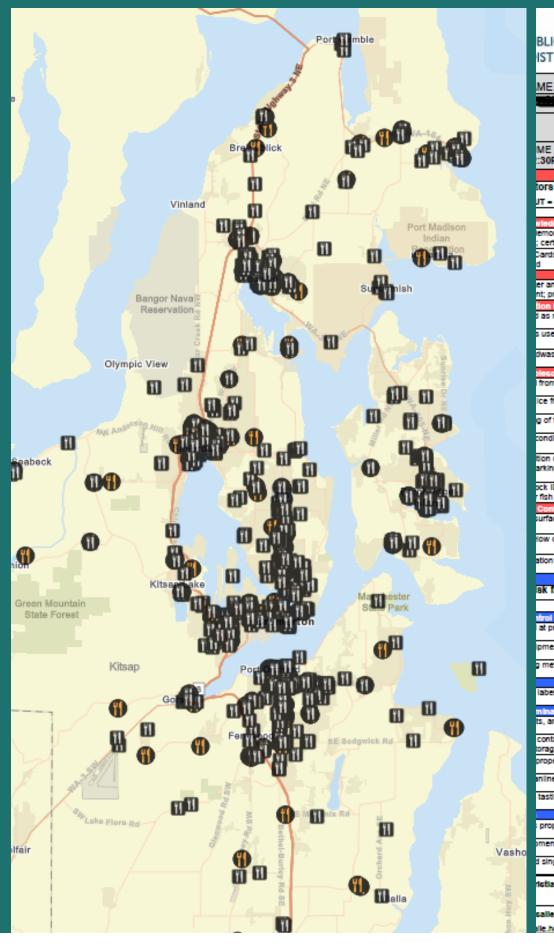
~175 complaints received



FOOD INSPECTION REPORTS

All inspection reports for food establishments are on our website.

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THIS REPORT MUST BE POSTED IN THE ESTABLISHMENT WITHIN 48 HOUR

ISTRICT

FOOD ESTABLISHMENT INSPECTION REPORT

WE OF ESTABLISHMENT.					ļ						
						EMAIL:					
			REST	TATE	RANT						
PURPOSE OF INSPECTION	ON:		KLOI	40	IX-ANI						
ME IN ELAPSED TIME :30PM 45 mln	TOTAL PO	DINTS		RE	D PC 25	DINTS REPEAT RED 93.75					
RED HIGH RISK FACTO	ORS - FOOD	BORN	FILLNES	s mis	X FAC	TORS & INTERVENTIONS					
RED HIGH RISK FACTORS — FOODBORNE ILLNESS RISK FACTORS & INTERVENTIONS ORS are improper practices or procedures identified as the most prevalent contributing factors of foodborne illi											
IT = not in compliance N/O = not observed			licable			rected during inspection R = repeat violation					
	CDI R	PT8				fiance Status					
viedge						perature Control for Safety Food					
emonstrates knowledge and performs duties to certified manager on staff unless exempt	° 🗆 🗆	5				Proper cooling procedures					
ands current for all food workers; new food		5		17	OUT	(5 pts. If 130°F to 134°F)					
	<u> </u>		: I	18	N/O	Proper cooking time and temperature; proper use					
er and conditional employee practices; no III nt; proper reporting of liness		25		19	N/O	No room temperature storage; proper use of time					
ion by Hands			·	_		control					
as required		25			N/O	Proper reheating procedures for hot holding					
used to prevent bare hand contact with ready		25		21	N/O	Froper cold holding temperatures (5 pts. If 42°F to 45°F)					
dwashing facilities		10		22	N/O	Accurate thermometer provided and used to evalu- temperature of TCS foods					
lesome, Not Adulterated				Cor	Gume	r Advisory					
from approved source		15		23	N/O	Proper Consumer Advisory posted for raw or under foods					
ce from approved source		15			hly Su N/O	sceptible Populations Pasteurized foods used as required; prohibited fo					
g of fruits and vegetables		10			miosi	offered					
ondition, safe and unadulterated; approved	. 🗆 🗆	10		_	N/O	Toxic substances properly identified, stored, used					
ion of returned, unsafe, or contaminated food; arking procedures for food at high risk for		10		Cor	iforma	ance with Approved Procedures					
ck ID; wild mushroom ID; parasite destruction		Ш	.	26	N/O	Compliance with valid permit, operating and risk or plans, and required written procedures					
fish		5	.	27	N/O	Compliance with variance; specialized process; HACCP plan					
Contamination		_				•					
urfaces cleaned and sanitized; no cross		15	l			Red					
low or away from ready-to-eat food; species		5									
ation of raw shell eggs		5	•								
BLUE -	OW RISK	FACT	ORS - GO	non	RETAI	IL PRACTICES					
						ns, chemicals, and physical objects into f					
ok lactors are preventive incapares to				_							
	CDI R	PT8	# Co	_	ince St						
froi				Ute	nelle :	and Equipment					
at proper temperature		5	.		N/O	Food and nonfood surfaces properly used and co- cleanable					
pment for temperature control		5		41	N/O	Warewashing facilities properly installed, maintain					
methods used		3	·	42	N/O	sanitizer concentration; test strips available and u Food-contact surfaces maintained, cleaned, sanit					
labeled; proper date marking		5		43	N/O	Non food-contact surfaces maintained and clean					
				Phy	/sloal	Facilities					
nination		-		44	N/O	Plumbing properly sized, installed and maintained					
s, animals not present; entrance controlled		5	.		N/O	backflow devices, indirect drains, no cross-connel Sewage, wastewater properly disposed					
contamination prevented during delivery, orage, display		5	l l								
property used, stored; sanitizer concentration		. 5	l l		N/O	Tollet facilities properly constructed, supplied, cie.					
nliness and hygiene		3		41	NIO						
tasting, drinking, or tobacco use		3			N/O	Physical facilities properly installed, maintained, of unnecessary persons excluded from establishmen					
			: [49	N/O	Adequate ventilation, lighting; designated areas u					
properly stored		. 3		50	N/O	Posting of permit; mobile establishment name eas					
		-									

Signatur



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KITSAP FOOD ADVISORY COUNCIL

Thank you to our members!





FDA Voluntary Retail Program Standards

- 1. Regulatory foundation
- 2. Trained regulatory staff
- 3. Inspection program based on HACCP principles
- 4. Uniform inspection program
- 5. Foodborne illness & food defense preparedness& response
- 6. Compliance and enforcement
- 7. Industry and community relations
- 8. Program support and resources
- 9. Program assessment



THANK YOU



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MEMO

To: Kitsap Public Health Board

From: Yaneisy Griego, LPN; Karina Mazur, RN, BSN, Supervisor Nurse Family Partnership;

Nancy Acosta, RN, BSN, Manager Parent Child Health

Date: July 5, 2022

Re: Nurse-Family Partnership Presentation

Kitsap Public Health District houses our local Nurse-Family Partnership program via the Parent Child Health Program. Nurse-Family Partnership pairs low-income, first-time mothers with a Public Health Nurse. Public Health Nurses support families by providing education, support, and resources to help them be the best parents they can be. Our team uses an evidence-based approach to give families the tools to find self-efficacy, bond with their babies and break cycles of abuse and neglect.

Today's presentation will provide information about the Nurse-Family Partnership model:

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

Kitsap Public Health District began implementing NFP in July 2012 as part of a regional team with Jefferson County Public Health.

Recommended Action

None --- for information and discussion only.

Please contact me with any questions or comments at (360) 536-7784, or yaneisy.griego@kitsappublichealth.org or Nancy Acosta at (360) 731-6144, or nancy.acosta@kitsappublichealth.org.

Attachment: Information sheet, program overview and Nurse-Family Partnership video and social media flyer.

kitsappublichealth.org



FACT

OVERVIEW

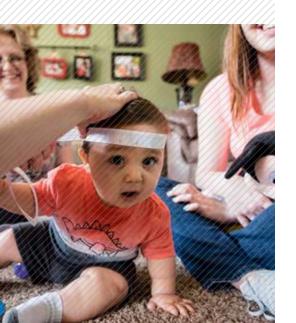
GENERAL INFORMATION

Nurse-Family Partnership®
is an evidence-based,
community health program
with 45 years of research
showing significant
improvements in the health
and lives of first-time moms
and their children affected by
social and economic inequality.

66 22 -

CHILDREN'S PROGRAMS
ARE SUCCESSFUL
WHEN THEY LEVERAGE
THE MOST DIFFICULT
JOB IN THE WORLD:
PARENTING.

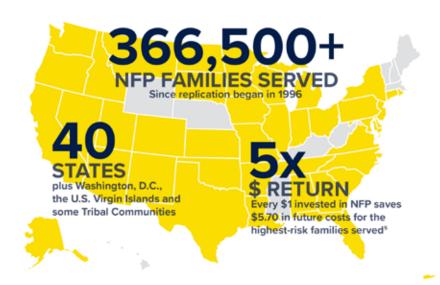
NICHOLAS KRISTOF
PULITZER PRIZE-WINNING JOURNALIST



Better Worlds Start with Great Families

Nurse-Family Partnership succeeds by having specially educated nurses regularly visit first-time moms, starting early in the pregnancy and continuing until the child's second birthday. Research consistently proves that the partnership between a nurse and the mom is a winning combination that makes a measurable, long-term difference for the whole family.

Moms enrolled in Nurse-Family Partnership benefit by getting the care and support they need in order to have a healthy pregnancy. At the same time, families develop a close relationship with the nurse who becomes a trusted resource they can rely on for advice on everything from safely caring for their child to taking steps to provide a stable, secure future for their new family.



Nurse-Family Partnership Goals

- 1. Improve pregnancy outcomes by partnering with moms to engage in good preventive health practices, including thorough prenatal care from their healthcare providers, improving their diets and reducing any use of habit-forming substances;
- 2. Improve child health and development by assisting families provide responsible and competent care; and
- 3. Improve the economic self-sufficiency of the family by supporting parents to develop a vision for their own future, plan additional pregnancies, continue their education and find work.



THERE IS A MAGIC WINDOW DURING PREGNANCY... A TIME WHEN THE DESIRE TO BE A GOOD MOTHER AND RAISE A HEALTHY, HAPPY CHILD CREATES MOTIVATION TO OVERCOME INCREDIBLE OBSTACLES INCLUDING POVERTY WITH THE HELP OF A WELL-EDUCATED NURSE.

DAVID OLDS, PHD
FOUNDER OF NURSE-FAMILY PARTNERSHIP
AND PROFESSOR OF PEDIATRICS AT THE
UNIVERSITY OF COLORADO



1900 Grant Street, 4th Floor Denver, Colorado 80203 NurseFamilyPartnership.org 866.864.5226

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Proven Results

The Nurse-Family Partnership program has been independently reviewed and evaluated, and is ranked as the Gold Standard of home visiting programs.

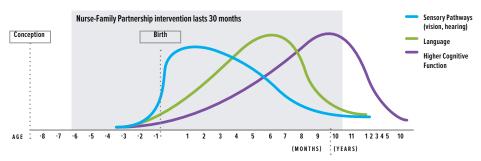


Early Intervention

A report from the Center on the Developing Child at Harvard University shows the extent to which very early childhood experiences influence later learning, behavior and health. The Harvard report shows basic brain functions related to vision, hearing and language development during the first 30 months of a child's life. It is during this timeframe that the early and intensive support by a Nurse-Family Partnership nurse can have a huge impact on the future of the mom, child and family.

Human Brain Development

Synapse formation dependent on early experiences



Source: Nelson, C.A., In Neurons to Neighborhoods (2000).

- 1. Olds, D.L., et al. (1997). Long-Term Effects of Home Visitation on Maternal Life Course and Child Abuse and Neglect Fifteen-Year Follow-up of a Randomized Trial. JAMA 1997
- 2. Olds DL, et al. Effects of nurse home visiting on maternal life-course and child development: age-six follow-up of a randomized trial. Pediatrics 2004
 3. Olds DL, Henderson CRJ, Tatelbaum R, Chamberlin R. Improving the life-course development of socially disadvantaged mothers: a randomized trial of nurse home visitation. American
- Journal of Public Health 1988

 4. Kitzman H, et al. Effect of prenatal and infancy home visitation by nurses on pregnancy outcomes, childhood injuries, and repeated childbearing. A randomized controlled trial. Journal
- 4. Kitzman H, et al. Effect of prenatal and infancy home visitation by nurses on pregnancy outcomes, childhood injuries, and repeated childbearing. A randomized controlled trial. Journal of the American Medical Association 1997
- 5. Karoly, L., Kilburn, M. R., Cannon, J. Proven results, future promise. RAND Corporation 2005.
- 6.0lds DL, et al. Preventing child abuse and neglect: a randomized trial of nurse home visitation. Pediatrics. 1986 Page 32

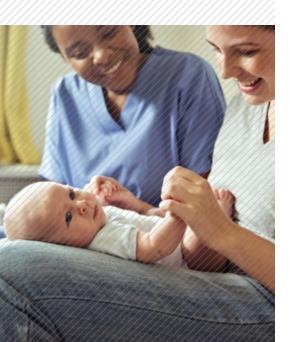
WASHINGTON



Nurse-Family Partnership® is an evidence-based. community health program with over 40 years of evidence showing significant improvements in the health and lives of first-time moms and their children living in poverty.

5x **\$ RETURN**

EVERY \$1 INVESTED IN NFP SAVES \$5.00 IN **FUTURE COSTS FOR THE HIGHEST-RISK FAMILIES** SERVED1



Nurse-Family Partnership works by having specially trained nurses regularly visit young, first-time moms-tobe, starting early in the pregnancy, continuing through the child's second birthday. Mothers, babies, families and communities all benefit.

WASHINGTON MOMS

23 Median age at intake

68% Unmarried at intake

Clients enrolled in Medicaid provided by the at intake NSO. Includes \$6,000 -\$9,000

01/01/2019 to

Annual median household income

Race

55% White 14% Black or African American

4% Asian

*Aggregate dat

5% American Indian or Alaska Native

1% Native Hawaiian or Pacific Islander

9% Multi-racial 10% Declined

provided by the Ethnicity NSO. Includes

33% Hispanic 01/01/2019 to 61% Non-Hispanic 5% Declined

OUTCOMES FOR WASHINGTON

*Aggregate data provided by the NSO. Includes state data from 01/01/2019 to 12/31/2021

*Babies born at term are those who reached 37 weeks gestation

89% BABIES BORN AT TERM

95% MOTHERS INITIATED BREASTFEEDING

89% BABIES RECEIVED ALL IMMUNIZATIONS BY 24 MONTHS

47% OF CLIENTS 18+ WERE EMPLOYED AT 24 MONTHS

WASHINGTON

Nurse-Family Partnership Goals

- Improve pregnancy outcomes by helping women engage in good preventive health practices.
- Improve child health and development by helping parents provide responsible and competent care; and
- Improve the economic selfsufficiency of the family by helping parents develop a vision for their own future.



ESTABLISHED: 1999

FAMILIES SERVED SINCE 1999: 14,619

CURRENT FUNDED CAPACITY: 2,589

NETWORK PARTNERS

- Benton-Franklin Health District
- Clark County Public Health Department
- Chelan-Douglas Health District
- ChildStrive Everett Program Office
- Jefferson County Health Department
- Kitsap Public Health District
- Seattle and King County Public Health Department
- Skagit County Family Health Department
- Spokane Regional Health District
- Tacoma-Pierce Public Health Department
- Thurston County Public Health & Social Services Department
- Whatcom County Health Department
- Yakima Valley Memorial Hospital



Matthew Richardson 360.764.0991

matthew.richardson@nursefamilypartnership.org



Learn more about how a FREE, personal nurse can help you for your first baby





BETTER WORLDS START WITH GREAT FAMILIES

AND GREAT FAMILIES START WITH US





Nurse-Family Partnership® is an evidence-based, community health program with over 40 years of evidence showing significant improvements in the health and lives of first-time moms and their children living in poverty.



"There is a magic window during pregnancy...it's a time when the desire to be a good mother and raise a healthy, happy child creates motivation to overcome incredible obstacles including poverty, instability or abuse with the help of a well-trained nurse."

David Olds, PhD Founder of Nurse-Family Partnership Professor of Pediatrics at University of Colorado

OUR VISION

A future where all children are healthy, families thrive, communities prosper, and the cycle of poverty is broken.



\$ RETURN

EVERY \$1 INVESTED IN NFP SAVES \$5.00 IN **FUTURE COSTS FOR THE HIGHEST-RISK FAMILIES** SERVED'



provided by the

NSO Includes

state data from

WASHINGTON MOMS

23

Median age at intake

68%

Unmarried at intake

77%

Clients enrolled in Medicaid at intake

\$6,000 -\$9,000 Annual median household income

at intake

*Aggregate data provided by the

Race

55% White

14% Black or African American

4% Asian

5% American Indian or Alaska Native

1% Native Hawaiian or Pacific Islander

9% Multi-racial

10% Declined

Ethnicity

33% Hispanic

61% Non-Hispanic

5% Declined

WE KNOW how to positively transform the lives of vulnerable babies and mothers—family by family. Day in and day out.

Changing FAMILIES...
Changes COMMUNITIES...
Changes ZIP CODES...
Changes STATES...

CHANGES THE COUNTRY!

If ONE family can break the cycle, then so can 100,000 FAMILIES!





KEY GOALS

- Improve Pregnancy Outcomes
- Improve Child Health and Development
- Improve Economic Self-Sufficiency of the Family

HOW IT HAPPENS

EXPERTS:

Specially-trained nurses

PROVEN:

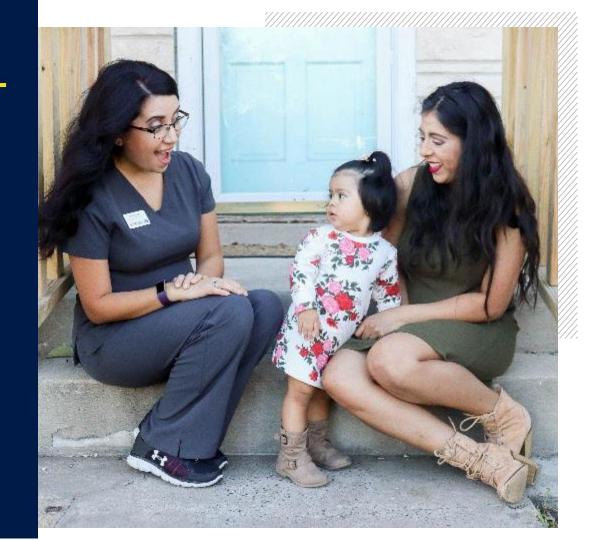
Extensive and compelling evidence

INTENSIVE:

Pregnancy through age 2

TIMELY:

First 1000 days



THE FIRST 1,000 DAYS

- Early experiences influence the developing brain
- Toxic affects of chronic stress
- Adversity can lead to lifelong problems
- Early intervention can prevent consequences
- Stable, caring relationships essential for development





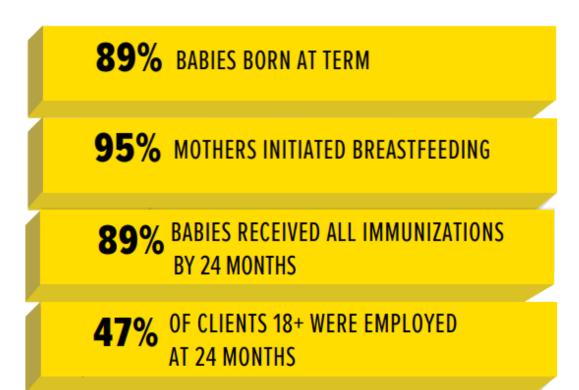
The following outcomes have been observed among participants in at least one of the trials of the program:

48% reduction in child abuse and neglect **56%** reduction in ER visits for accidents and poisonings 50% reduction in language delays of child age 21 months 67% less behavioral/intellectual problems at age 6 **79%** reduction in preterm delivery for women who smoke **32%** fewer subsequent pregnancies **82%** increase in months employed

OUTCOMES FOR WASHINGTON

*Aggregate data provided by the NSO. Includes state data from 01/01/2019 to 12/31/2021

*Babies born at term are those who reached 37 weeks gestation

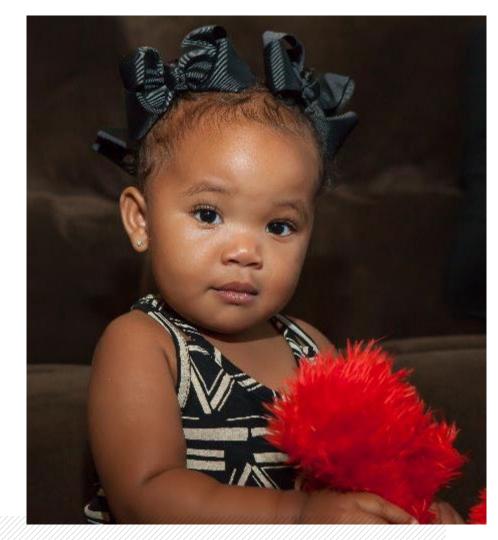


FUNDING SOURCES

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

Local In-Kind Partnerships Include:

- Eastside Baby Corner
- Stitch N Serve



WASHINGTON STATE

- 2179 Mothers participating in the workforce at 24 months
- 8410 Mothers initiated breastfeeding
- 2831 Toddlers up to date for immunizations at 24 months

*As of 2019

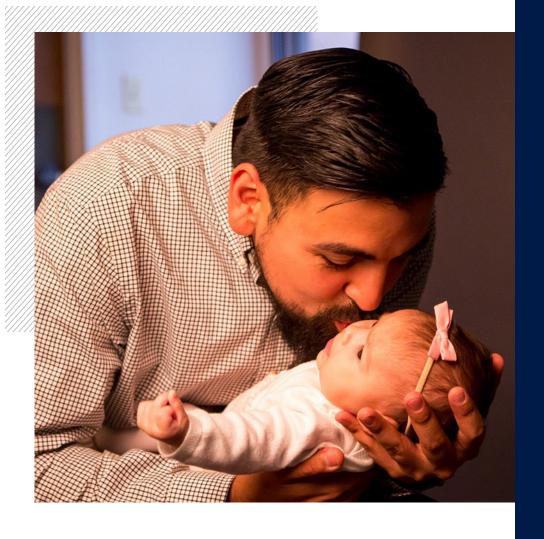


Kitsap County

Clients served since 2012: 264

• Graduates since 2012: 74





QUESTIONS?

THANK YOU!

Yaneisy "Jen" Griego, LPN
Karina Mazur, RN, BSN, NFP Supervisor
Parent Child Health
Yaneisy.griego@kitsappublichealth.org

