

**KITSAP PUBLIC HEALTH BOARD  
MEETING MINUTES  
Regular Meeting  
September 3, 2019**

The meeting was called to order by Board Chair, Commissioner Robert Gelder at 12:30 p.m.

**REVIEW AND APPROVE AGENDA**

There were no changes to the agenda.

**BOARD MEETING MINUTES**

Commissioner Charlotte Garrido moved and Mayor Becky Erickson seconded the motion to approve the minutes for the July 2, 2019, regular meeting. The motion was approved unanimously.

**CONSENT AGENDA**

The September consent agenda included the following contracts:

- 1749 Amendment 9 (1926), *Washington State Department of Health, Consolidated Contract*
- 1749 Amendment 10 (2023), *Washington State Department of Health, Consolidated Contract*
- 1893, *Mason County Public Health, Nightingale Notes Sublicense*
- 2002, *Clallam County Health and Human Services, Tobacco & Vapor Product Prevention & Control Program and YMPEP*
- 2003, *Jefferson County Public Health, Tobacco & Vapor Product Prevention & Control Program and YMPEP*
- 2004, *Kitsap County, Tobacco & Vapor Product Prevention & Control Program and YMPEP*
- 2016, *Washington State Department of Ecology, Local Source Control*
- 2024, *Washington State Department of Ecology, Solid Waste Management Local Solid Waste Financial Assistance Agreement*

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

**PUBLIC COMMENT**

There was no public comment.

**HEALTH OFFICER/ADMINISTRATOR'S REPORT**

Health Officer Update:

Dr. Susan Turner, Health Officer, provided the Board with two updates:

Firstly, Dr. Turner provided an overview of a recent outbreak of gastrointestinal illness at a Kitsap senior living facility. Dr. Turner said Health District investigators responded rapidly. The Health District used an Incident Command Structure to provide rapid response and prevent the spread of illness in the facility and community. Thirty-six people became ill during the outbreak. Stool samples collected tested positive for norovirus. Based on epidemiological analysis, the Health District believes one ill individual brought the virus to the facility and it spread quickly from person to person. The response took about one week and required 250 staff hours by 23 employees and an estimated cost of just under \$15,000.

Next, Dr. Turner gave an update on a multi-state outbreak of lung disease related to vaping. The Health District recently issued a health advisory related to the outbreak and the Centers for Disease Control and Prevention (CDC) also sent an advisory. The CDC reported 215 cases in 25 states as of Friday. State investigations are ongoing. One person was reported to have died from the illness. No known cases have been identified in Washington. The state Department of Health has held weekly calls with the CDC and passed on information to the Health District. The cause of the illness has not been identified. All the reported cases involved e-cigarette use or vaping. No specific product has been linked to all the cases. In many cases there was a gradual onset of symptoms, including difficulty breathing, shortness of breath and chest pain. All cases have been hospitalized. Some experienced gastrointestinal illness. Antibiotics have not proven effective in treating the illness, but some cases have responded to steroids. Many, but not all, of the people involved in the cases acknowledged using THC. The CDC is reiterating its guidance that e-cigarettes shouldn't be used by adults not already using tobacco products, youth, or pregnant women or The CDC provided guidance for health care providers and coroners, which the Health District passed on to providers and the coroner in Kitsap.

Mayor Becky Erickson said news media reported the products involved in the cases contained THC. She asked if Dr. Turner had also heard this from formal sources.

Dr. Turner confirmed that most, but not all, the cases involved THC products, but no specific product had been identified.

There was no further comment.

Administrator Update:

Mr. Keith Grellner, Administrator, provided the Board with several updates:

First, Mr. Grellner commented on the accounting of costs associated with the norovirus outbreak response. Mr. Grellner said the Health District is making an effort to better track these costs to keep track of expenses related to Foundational Public Health Services (FPHS) and to advocate for funding for the work the Health District does. Also, with budget season approaching, the Health District can provide examples to show the kind of work the Health District does in board members' jurisdictions. Mr. Grellner noted the 250 hours dedicated to the response was in

addition to staffs' regular daily workload. The Health District had to figure out how to continue serving clients and balance other work.

Second, Mr. Grellner said the Health District's 2018 Annual Report had been distributed to the board.

Mr. Grellner said the Health District struggled in past years to produce an annual report. The Health District has a broad breadth of services and didn't have a system in place for recording achievements from year to year. The 2018 report is the first report produced through the Health District's performance management system. Mr. Grellner said the Health District has gotten better at setting up this system to track outcomes of the work the district does and track which achievements are connected to strategic goals and which are related to Foundational Public Health services, so the Health District can tell that story in a concise manner. He welcomed feedback from the board and thanked staff for their work on the report.

Commissioner Gelder commented that the infographics in the report were a helpful way to understand the facts provided. He noted that if it's not fast, you're not going to get anyone reading it.

Mr. Grellner agreed and said the Health District's previous annual reports were too long, which is one reason the Health District didn't produce reports over the past two years.

Mayor Erickson said she would like to borrow the design for the City of Poulsbo.

Mr. Grellner said the Health District credited Peninsula Community Health Services for some of the design elements.

Next, Mr. Grellner said the Health District would be holding an all-staff meeting on Wednesday, September 18<sup>th</sup>. The meeting will focus on the health indicator and health disparity reports and would include a presentation from Kody Russell of Kitsap Strong on trauma-informed care. Mr. Grellner said the meeting would keep staff informed, help them learn about the community they serve and improve the Health District's services. He invited board members to stop by the meeting.

Next, Mr. Grellner reported that Health District clients would soon be receiving information about environmental health fee changes. The board adopted a new fee schedule in 2017 (Resolution 2017-03) with increases in 2018, 2019 and consumer price index increases for 2020 through 2026 to keep fees current and avoid another large increase. The Health District will begin updating the public and industry about the increases. Mr. Grellner said the Health District has identified a few fees that don't need further adjustment and is reviewing whether a separate resolution is needed to make those changes to the schedule.

Finally, Mr. Grellner highlighted recognition Health District programs had received over the previous month.

- The Community Health division and Chronic Disease Prevention program hosted a team from the CDC, to learn more about the District's work in increasing physical activity and healthy eating to reduce chronic diseases. The team was also interested in the Health District's collaboration with the City of Bremerton on Complete Streets projects.
- The Environmental Health Division and the Food and Living Environment program were recognized by the Food and Drug Administration for meeting two national standards in the Voluntary National Retail Food Regulatory program.
- The Community Health Division and the Kitsap Connect hosted the National Academy of Medicine's Future of Nursing 2030 committee. The committee is studying how nurses can help address social determinants of health and was interested in how Kitsap Connect nurses have reduced the use of emergency care services among high utilizers by linking clients to housing and health care services. Mr. Grellner said the program has succeeded in reducing costs for emergency services providers. The program is mostly funded by a Kitsap County 1/10<sup>th</sup> of 1 Percent grant, but is becoming more difficult to sustain. Mr. Grellner noted the program was started as a pilot project started three years ago and the Health District has been unsuccessful in finding an organization to take over the program. The Health District will have to decide if it can sustain the program beyond 2020.

Mayor Greg Wheeler thanked the Health District for keeping Kitsap Connect going. He said the program was an example of helping people with mental health and substance use conditions. Mayor Wheeler said a lack of stable housing can create public health hazards due to unsanitary conditions.

Mayor Wheeler asked what funding sources the Health District has looked for to sustain Kitsap Connect.

Mr. Grellner said the Health District has applied for several grants but has not heard back yet. The District has also considered requesting funding from emergency service providers benefiting from the program.

Mayor Wheeler asked if the Health District has considered 1/10<sup>th</sup> of 1 Percent funding again.

Mr. Grellner said the Health District has applied again for 1/10<sup>th</sup> of 1 Percent funding, but he noted the grant program was not intended as a long-term funding source, potentially making it more difficult for Kitsap Connect to qualify. Kitsap Connect is also expensive to operate. The Health District will know in October if the program will receive grant funding. Based on the level grant funding, the Health District will have to decide whether to scale back the program, continue to fully fund it with general health fund money or end the program.

Mayor Wheeler asked if Kitsap Connect funding would be brought up at future Health Board committee meetings.

Mr. Grellner said the topic would be on the agenda of upcoming finance and policy committee meetings, but any discussion will be preliminary until the level of 1/10<sup>th</sup> of 1 Percent funding is determined.

Commissioner Gelder commented that, without the state fully funding FPHS, a burden is shifted to local resources.

Mr. Grellner said that if the state fully funded FPHS, local health agencies would have more flexibility to use local funding to pay for programs like Kitsap Connect.

Commissioner Gelder said this was something to keep in mind for the 2020 Legislative agenda.

There were no further comments.

### **QUALITY IMPROVEMENT PROGRAM UPDATE**

Ms. Jessica Guidry, Public Health Emergency Preparedness & Response and Performance Management Manager, and Ms. Dayna Katula, Food and Living Environment Program Manager, approached the Board to present an overview of the Health District's quality improvement (QI) program.

Ms. Guidry explained that the Health District's Performance Management System consists of structures, roles, and processes that:

1. Link and coordinate our planning, performance monitoring, and continuous quality improvement (CQI) efforts so they will be efficient and effective; and
2. Standardize how the Health District establishes goals and measures, monitor and evaluate performance, identify and implement improvement strategies, and report results.

Ms. Guidry said local, state, and federal influencers help shape to the Health District's work. The Health District's Community Health Improvement Plan, also known as Kitsap Community Health Priorities or KCHP, is the county's set of priority health issues, developed using a collaborative health improvement process involving a wide range of community sector representatives and stakeholders. Standards include those from the Public Health Accreditation Board and Foundational Public Health Services. Mandates include legal requirements, such as local codes, the Washington Administrative Code, and grant requirements.

Ms. Guidry said the Health District considers all these influencers as it develops and updates its strategic plan. To achieve the goals of the strategic plan, each program develops work plans and logic models that describe what the programs do, and the short-, mid-, and long- term outcomes of their activities. The Health District improves its processes through quality improvement projects or by implementing quality improvement practices. Throughout these various stages, The Health District uses strategic partnerships, best practices, staff engagement, and embraces a learning culture.

Ms. Guidry described quality improvement as the use of a deliberate and defined improvement process in a continuous and ongoing effort to achieve measurable improvements in the efficiency, effectiveness, performance, accountability, and outcomes of services or processes. Ms. Guidry discussed the Health District's Quality Council, which advises the Executive Leadership team, leads quality improvement projects and provides staff training, among other functions.

Ms. Katula provided an overview of the Health District's quality improvement training efforts. She said the Health District now requires staff to take quality improvement training based on the Lean Six Sigma methodology in order to broaden participation and buy-in on quality improvement efforts. All non-management staff must complete a basic White Belt training, which provides an overview of what Lean Six Sigma is and why organizations use it. Managers and QI Council members are required to take higher levels of training.

Ms. Katula said some Quality Council members had completed the 32-hour online Green Belt training, which provides participants with the information needed to lead QI projects. She said 97% of eligible staff are currently trained in White Belt or higher and the Health District has had experienced a positive shift in attitudes toward quality improvement efforts.

Ms. Katula provided examples of in-person trainings of training and tools provided to staff to apply quality improvement principles to their workflow and workplaces. She informed the board that the QI Council is developing a Lean Six Sigma demonstration for staff called "Jurassic Pork," which will walk staff through an entire quality improvement project using a fictional scenario involving food truck permitting in "Jurassic County."

Ms. Katula said staff have worked on 10 quality improvement projects so far, some of which were still underway. Projects addressed processes like performance evaluations, medical provider messaging, use of technology, and how public inquiries from the website were handled. She described three examples of successful quality improvement projects:

- A 2012 project that streamlined and improved the Health District's process for preparing and sending health alerts to medical providers.
- A project that simplified staff performance evaluations and gave staff greater opportunity to participate.
- A project to capture feedback from customers and improve customer service. This work will be piloted by the Emergency Preparedness and Response program, Drinking Water & Onsite Sewage System program, and Food & Living Environment program.

Ms. Katula said the QI council keeps staff updated on quality improvement work through meetings, email updates and a SharePoint site, and is looking for additional ways to keep staff informed.

Commissioner Gelder said the County also embraced a formal quality improvement process in 2010 or 2011, in response to the economic recession. He said the County had to make sure its

processes were streamlined. He said quality improvement was a great investment and it was interesting to see how ideas for projects came up.

Commissioner Garrido agreed that county staff were excited about quality improvement. Commissioner Gelder said one benefit was staff felt ownership of process improvements.

There was no further comment.

### **RESOLUTION 2019-04, SUPPORTING KITSAP PUBLIC HEALTH DISTRICT'S REACCREDITATION EFFORTS**

Mr. Grellner approached the Board regarding Resolution 2019-04, Supporting Kitsap Public Health District's Reaccreditation Efforts. Mr. Grellner said the initial process of becoming accredited by the Public Health Accreditation Board (PHAB) was transformational for the Health District because it provided a framework for continually improving the agency. The original accreditation was good for five years and will expire in May 2020. Health District leadership must decide whether to pursue reaccreditation or let it lapse.

Mr. Grellner said the Health District first attained accreditation through PHAB in 2015 with the goal of improving the agency. The Health District was undergoing changes in leadership and needed structure to improve its work. When it first earned accreditation, the Health District was one of three agencies public health agencies in Washington and 75 nationwide (out of 3,000) to become accredited. It is now one of 275 public health agencies that is accredited, including five in Washington (including the state Department of Health, Spokane, Tacoma-Pierce and Benton Franklin).

Mr. Grellner said Health District leadership feels seeking reaccreditation will help the agency build on its quality improvement efforts hold itself to the highest standards. He noted the Health District has experienced significant leadership turnover since 2015 and the reaccreditation process offers an opportunity to strengthen its management team and enhance cooperation across divisions and programs.

Mr. Grellner provided examples of outcomes and benefits from the initial PHAB accreditation process:

- The 2011–2021 Strategic Plan and Mission and Vision Statements
- Kitsap Community Health Priorities and Improvement Plan
- The QI Council and Program and the Health District's "quality culture"
- The Performance Management System and annual work plans
- Resolution 2015-03: Appointing Deputy Health Officers
- Resolution 2016-08: Approving a Line of Succession for the District Administrator
- Health District branding for internal and external communications

Mr. Grellner said some of these items may have been accomplished independent of accreditation, but the PHAB process helped the Health District achieve these milestones quickly and to a high

standard. He said the Executive Leadership Team had voted unanimously to pursue reaccreditation, but Health Board approval was appropriate because of the costs involved. Mr. Grellner explained the costs of reaccreditation include a \$12,000 application fee, annual fees of \$8,400 for four years and staff costs for documentation estimated at \$30,000. He said much of the staff work involved would be necessary whether the district applied for reaccreditation or not. Mr. Grellner requested the Health Board's support for the Health District's plan to pursue PHAB reaccreditation.

Commissioner Gelder asked how the application fee for 2020 compared with the fee the Health District paid when it was originally accredited.

Mr. Grellner said the application fee paid by the district in 2014 was \$36,000. The fee is lower now because the Health District has already participated in the process and PHAB has restructured its fees based on feedback. PHAB now charges a lower application fee as well as annual reaccreditation fees, for a lower overall cost.

Commissioner Gelder asked how the \$30,000 in estimated staff cost is "over and above" the Health District's typical costs, if the work required is work the Health District would do anyway.

Mr. Grellner explained PHAB staff will have to compile about 100 narratives explaining how the Health District's work meets PHAB standards. Each narrative will take about three to five hours to produce and vet. The Health District expects it will need to put in additional work to meet two or three of PHAB's standards, accounting for about \$20,000 of the estimated staff cost.

Commissioner Gelder asked if PHAB offered a library of best management practices as a resource outside of its accreditation process. Dr. Turner responded, saying PHAB had initially considered offering such a resource but had decided it could present the appearance of a conflict. Instead, the National Association of County and City Health Officials offers those resources to help members seek accreditation.

Dr. Turner recalled a Health Board member wondering why so few public health agencies had become accredited and whether it was an indicator of the value of the process. Dr. Turner said she feels that fact is mostly related to the average size and capacity of local public health agencies, which is very small. Kitsap Public Health is a comparatively large public health agency. Dr. Turner said PHAB is aware it needs to address this issue and ensure more public health agencies are able to meet standards and thereby better protect the public they serve.

Commissioner Garrido said she was supportive of the process but wondered how the accomplishments Mr. Grellner attributed to PHAB accreditation have improved public health.

Commissioner Gelder said it boiled down to having metrics to measure outcomes.

Dr. Turner replied that PHAB had recognized the need to tie its accreditation standards to evidence-based practices for improving public health. PHAB is collecting data to help with that effort.



Mr. Grellner said the Health District is also working to improve its messaging and has made strides in that direction with the hiring of a new public information officer. He noted the Health District, as with many public agencies, is still rebuilding from the economic recession and communications work was one of the areas sacrificed during the recession.

Additionally, Mr. Grellner said when the Health District initially applied for accreditation, there was a hope that accredited agencies would be better positioned for funding opportunities. That has not been the case. The Health District hopes that at some time in the future, high-performing agencies will be eligible for funding.

Commissioner Gelder noted the county Public Works department went through a similar accreditation process. Accreditation didn't necessarily make the department more eligible for funding but did improve the quality of the department overall.

There was no further comment.

Commissioner Garrido moved and Mayor Kol Medina seconded the motion to approve Resolution 2019-04, Supporting Kitsap Public Health District's Reaccreditation Efforts. The motion was approved unanimously.

## **BOARD DISCUSSION & ANNOUNCEMENTS**

Prior to adjournment, Mayor Erickson asked if there was any update on the syringe exchange restructuring. She said she had talked to Peninsula Community Health Services (PCHS) CEO Jennifer Kreidler-Moss and was told PCHS was just waiting for contracts. Mayor Erickson said she wanted to have the process wrapped up by the end of the year.

Dr. Turner said the Health District has provided PCHS with supplies to help PCHS roll out its service, without a contract in place. The Health District also shared its draft syringe exchange procedure with PCHS. Dr. Turner said she did not know what date PCHS would begin providing services at its five pharmacy locations but expected it to begin shortly.

Mayor Erickson said Kreidler-Moss also told her PCHS has many openings for its medication-assisted treatment program and had expanded counseling services for opioid treatment. Mayor Erickson asked when Baymark (opioid treatment program) was expected to open.

Dr. Turner said she understood Baymark was expected to open in Kitsap in October and the Port Angeles location would open in September.

Mayor Erickson said the county had medication-assisted treatment services available and Medicaid dollars to support those services. She said now is the time to get people into those services and she looked forward to getting the syringe exchange modified.

Commissioner Gelder remarked it was unclear what could happen with Medicaid funding next year after the change to managed care.

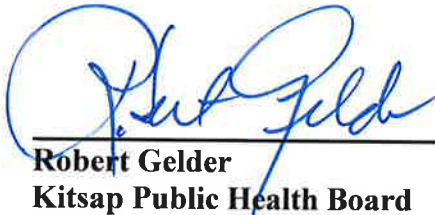
Mayor Erickson said PCHS had more than 1,700 available slots for treatment with relatively few being used.

Commissioner Garrido announced the county would mark World Suicide Prevention Day on September 10<sup>th</sup> at the administrative building.

Dr. Turner thanked Kitsap County Human Services for its work on that issue.

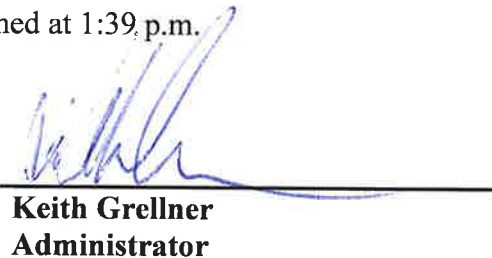
### ADJOURN

There was no further business; the meeting adjourned at 1:39 p.m.



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**Robert Gelder**  
Kitsap Public Health Board



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**Keith Grellner**  
Administrator

**Board Members Present:** *Mayor* Becky Erickson; *Commissioner* Charlotte Garrido; *Commissioner* Robert Gelder; *Mayor* Kol Medina; *Mayor* Robert Putaansuu; *Mayor* Greg Wheeler

**Board Members Absent:** *Commissioner* Ed Wolfe.

**Community Members Present:** Roger Gay, *South Kitsap Taxpayers*; Monte Levine, *People's Harm Reduction Alliance*; Lauren Funk, *People's Harm Reduction Alliance*; Dan Pedelaborde, *Troop 1539*; Pam Hamon, *League of Women Voters – Kitsap*.

**Staff Present:** Amy Anderson, *Public Health Educator, Public Health Emergency Preparedness and Response*; Karen Boysen-Knapp, *Community Liaison, Chronic Disease Prevention*; April Fisk, *Program Coordinator, Contracts Management/Public Records Officer*; Keith Grellner, *Administrator*; Jessica Guidry, *Manager, Public Health Emergency Preparedness and Response*; Karen Holt, *Manager, Human Resources*; Siri Kushner; *Assistant Director, Community Health Division*; Melissa Laird, *Manager, Finance and Accounting*; Megan Moore, *Community Liaison, Chronic Disease Prevention*; Tad Sooter, *Public Information Officer*; ; Susan Turner, *MD, Health Officer*.