

**KITSAP PUBLIC HEALTH BOARD
MEETING MINUTES
Regular Meeting
October 6, 2020**

The meeting was called to order by Board Chair, Mayor Rob Putaansuu at 10:32 a.m.

REVIEW AND APPROVE AGENDA

There were no changes to the agenda.

BOARD MEETING MINUTES

Commissioner Ed Wolfe moved and Commissioner Charlotte Garrido seconded the motion to approve the minutes for the September 1, 2020, regular meeting. The motion was approved unanimously.

CONSENT AGENDA

The October consent agenda included the following contracts:

- 1749, Amendment 17 (2017), *Washington State Department of Health, Consolidated Contract*
- 2106, *Olympic Educational Service District, Head Start*

Commissioner Garrido moved and Councilmember Kol Medina seconded the motion to approve the consent agenda, including the Contracts Update and Warrant and Electronic Funds Transfer Registers. The motion was approved unanimously.

Mayor Becky Erickson asked if the Olympic Educational Service District's (ESD) Early Childhood Education and Assistance Program (ECEAP) is still functioning at this time. Mr. Keith Grellner, Administrator, explained that this contract has been in the works for several years to get the program up and running. With this contract in place, the Health District will assist the ESD while they get the ECEAP program going.

CHAIR COMMENTS

Chair Putaansuu said he appreciates David Shultz attending this meeting to provide an update on the hospital outbreak.

PUBLIC COMMENT

There was no public comment.

HEALTH OFFICER/ADMINISTRATOR'S REPORT

Health Officer Update:

Dr. Gib Morrow, Health Officer, deferred his comments to the next agenda item.

There was no further comment.

Administrator Update:

Mr. Grellner, expressed gratitude on behalf of the Health District to the Kitsap County Emergency Operations Center (EOC), Kitsap County, Health District staff, and community partners and volunteers for their help.

Mr. Grellner also thanked the representatives from St. Michael Medical Center for attending this meeting.

Next, Mr. Grellner shared an overview of the Draft 2021 Budget. At this time, the Health District's budget heading into 2021 is good. The Health District is proposing a budget of \$14.6M, a \$1.2M increase over 2020. This projected increase is primarily due to the Health District's intent to maintain its new COVID-19 Response Program through 2021. State and Federal COVID-19 funds committed through June 2021 support the new program. The bulk of COVID-19 program work is case and contact investigations, and isolation and quarantine care and coordination. He also noted that he and Dr. Morrow, in addition to the public information officer, Tad Sooter, continue to spend most of their time on COVID program work as well.

Personnel cost increases (\$1.5M) are the primary source of increase in expenditures. Revenues are currently projected at \$14M, approximately \$800K above 2020. Additional revenues are expected through the end of this year into next.

At this time, Board Member jurisdiction contributions to the District's General Public Health flexible funding are status quo with 2020, but work is still being done in this area. Approximately \$600K of fund balance reserves are proposed to balance the budget, about \$155K from Restricted Reserves and \$450K from undesignated and unrestricted cash and investment reserves. The budget draft includes a placeholder of \$112K in proposed market adjustments for non-represented staff; the District is working with the Finance Committee on this issue. The Kitsap Connect Program is not included for 2021 due to a lack of available revenues; however, a new model, housed under Peninsula Community Health Services, is being developed. Cash and investment fund reserves stand at \$5.1M.

The Health District is also working with Olympic College's nursing program on flu clinic work and COVID-19 work.

Mayor Putaansuu said Port Orchard stepped up to provide \$3 per capita a couple of years ago. He asked if the other cities are all contributing the \$3 per capita now or if there are still some outliers. Mr. Grellner said Kitsap County provides \$7 per capita. Last year the cities of Poulsbo and Bainbridge Island fully met the \$3 per capita. Port Orchard contributed \$2.77 per capita. The City of Bremerton was just under \$2 per capita. The request the Health District made to the cities for 2021 was at the \$3 per capita rate.

Mayor Greg Wheeler said the City of Bremerton is looking at how they can contribute more in 2021.

Commissioner Wolfe asked if all the CARES Act funds allocated to the Health District will be spent by the end of the year deadline. He noted there are significant restrictions on when the funds can be spent. The County has contacted state senators and representative to request an extension past the end of the year for use of these funds. He said, so far Kitsap County has received \$14.8M plus 5.4M for the Health District. The County is hoping to roll over the 5.4M to next year. Mr. Grellner said the Health District received 5.4M of CARES Act funds in mid-September. The Health District is working with the County to see if they can use the funds by the November 30th deadline. He noted an extension would be helpful to the entire community. The Health District will also be writing to senators Cantwell and Murray and Representative Kilmer to request an extension. Lastly, he said the Health District has non-CARES act COVID funds in the 2021 budget to cover COVID work.

Commissioner Wolfe said it would be very helpful if local jurisdictions could contact elected representatives regarding an extension.

Mayor Erickson said the City of Poulsbo got \$500k in CARES Act funds and plans to use it all by the end of November but could use more. The City found that childcare and other nonprofits need financial support. She said the City of Poulsbo would appreciate some of the extra funding if the County can't spend it down by the deadline.

Mr. Grellner will draft a letter to the senators and representative for the jurisdictions to sign requesting an extension.

There was no further comment.

COVID-19 UPDATE AND DISCUSSION

Mr. Grellner provided the Board with an update on Kitsap County COVID-19 data. He said there have been some increases in COVID-19 in our Kitsap since the third week of September. There were 16 cases reported yesterday, October 5. Currently, the highest rate of COVID-19 infection by age group is individuals over 80. The 20-49 age group continues to have high rates of infection as well.

Although there is still a statewide pause on moving forward to the next phase in the governor's safe start plan, Kitsap was meeting most of the state's criteria to move to Phase 3 for a few weeks. However, as of last week, Kitsap is only meeting about one third of the criteria to move to Phase 3. Our case rate per 100 thousand residents has risen from 29 to 39.3. Kitsap is also seeing a rise in outbreaks. Additionally, Kitsap continues to fall below testing targets for Phase 3 with only 2-300 tests done per week, short of the 550 goal. Individuals are being turned away for testing which is problematic for the entire community. The Health District and EOC are working on a community-based testing plan for Kitsap to help fill this gap.

Kitsap is meeting Phase 3 requirements for case and contact investigation capabilities and hospitalizations. The average number of contacts per lab confirmed positive case has risen to 4.3,

and may go up this week based on the information gathered from Health District case and contact investigations.

The Health District is currently managing 11 active outbreaks. There have been 50 total outbreaks since the start of the pandemic. Outbreaks are occurring in long term care facilities, military installments, hospitality businesses, healthcare, other workplaces, school/childcare, and social gatherings.

Mr. Grellner shared the percentage of positive COVID-19 cases by race and ethnicity compared to the percentage of total population. Our Hispanic and Latino population are disproportionately affected in Kitsap by COVID-19. This is also being seen statewide and nationally.

Lastly, Mr. Grellner shared the new School COVID page on the Health District website.

Commissioner Wolfe said the Health Board greatly appreciates the work the Health District does. He said Kitsap has some of the lowest COVID rates in the state, according to an article he read. He asked why Kitsap County's data does not align with the state or national data. Mr. Grellner said the Health District's data is a week newer than the State's, so the data appears different, but the state's data is just delayed. He agreed that the Governor is right that Kitsap County is doing better than a lot of the other counties in comparison, however Mr. Grellner said Kitsap still has increasing trends of transmission. He said there is room for improvement, and improvement is needed to get children back into school.

Mayor Erickson asked what current Health District recommendations for testing are. She asked if only symptomatic individuals should be tested or if anyone can get tested anytime. Dr. Morrow explained that testing is recommended for symptomatic individuals and close contacts of confirmed COVID-19 cases. He said the Health District is planning a Health Officer order for anyone in high risk settings, like healthcare workers, individuals who attended large social gatherings, racial and ethnic groups experiencing disparities related to COVID, to get tested. He said the Health District would eventually like everyone to get tested if they want to, but due to testing costs, the Health District is not yet ready to allow anyone to get tested for anything, like testing before a trip to Hawaii.

Mayor Erickson said her constituents are being refused testing even though they meet criteria. The Health District need to share this information with the Kitsap County clinicians so that individuals are not refused testing. Dr. Morrow agreed.

ST. MICHAEL MEDICAL CENTER OUTBREAK UPDATE

Dr. Morrow said no there were no new positive COVID cases in September associated with the outbreak at St. Michael Medical Center (SMMC). Dr. Morrow said he has been working closely with hospital leadership, Dr. David Weiss, and Matt Wheelus throughout this outbreak. Dr. Weiss, Dr. David Shults, and Mr. Wheelus provided an update to the Board on the outbreak and lessons learned.

Dr. Weiss, SMMC Chief Medical Officer, thanked the Health District for their collaboration before and during this outbreak. Dr. Weiss thanked the staff at SMMC for their work during this pandemic, he noted this has been the most significant healthcare event he's experienced in his lifetime.

Dr. Weiss provided a presentation on the SMMC outbreak timeline and lessons learned. He explained that because of issues with PPE shortages nationally from the beginning of the pandemic, the hospital was conservative with use of N95s and had concerns about running out. Additionally, as with many other healthcare facilities, the hospital has had staffing shortages. He said SMMC COVID testing turnaround time was 24-48 hours through the University of Washington laboratory and longer through LabCorp. Dr. Weiss explained that, due to this timeframe, patients can "become" positive after being admitted to the hospital.

The outbreak began when a patient, who had previously tested negative, exhibited COVID symptoms on their 19th day in the hospital. The patient had visitors who were seen in the patient's room not wearing masks. Additionally, the patient had been treated with nebulizer therapy. This is an aerosol generating procedure (AGP), which is a humidified oxygen treatment with medication used for respiratory issues. SMMC identified AGPs as an area of transmission and changed procedures.

Once SMMC identified spread in the hospital, they worked with the EOC and the Health District to test all 2,300 employees in four days. The hospital also increased PPE education throughout the hospital.

Dr. Weiss noted that SMMC finally got an adequate amount of testing kits in September to provide rapid testing results within 2 hours using their new Xpert machine. Previously, the hospital did not have enough test kits to test everyone inhouse and had to send tests off to other labs.

Dr. Weiss shared a document from CHI Franciscan of the lessons learned and ongoing actions that was recently shared to the Washington State Hospital Association in hopes that their experience can help prevent outbreaks in other hospitals. Lessons learned and ongoing actions include:

- Communications: immediate, comprehensive, and frequent communications to all stakeholders
 - Communications pitfall: leaders and staff become immune to the communications. There needs to be one source of truth, or funnel messaging to eliminate duplicate messaging.
- Personal Protective Equipment: assume a complaint or concern is actually worse than stated and act accordingly
 - Clearly defined PPE Status: Conventional, Contingency and Crisis; and communicate changes in stats and location of policies re COVID-19 and PPE.
 - Changes in CDC guidance was not communicated as effectively as it could have been.

- Provide tip sheet to the staff for badge buddy
- SMMC is auditing communications sent out and talking to staff.
- Working to reduce numbers of AGPs in hospital.

Mr. Schultz, SMMC Senior Vice President of Operations, reiterated his appreciation for the coordination with the Health District, EOC and Washington State Department of Health (DOH). He said it took a community effort to mitigate the effects of this outbreak. He said this outbreak impacted patients and the hospital has taken steps to prevent this in the future. He said we cannot let our guard down with this disease and need constant reinforcement and reminders of safety measures to prevent the spread.

Commissioner Wolfe thanked SMMC for their teamwork and communication with elected officials. He asked if the Silverdale location will open in November. Mr. Schultz said that date to relocate patients to the new facility has been moved from November 14 to December 12 to give the hospital time to finish preparing. He said EMS and move teams are prepared for the move. He said the original design of the hospital did not include a pandemic, but it is now designed to deal with the pandemic with private rooms.

Mayor Erickson asked if and how the WA DOH was involved. She understands this is happening in other hospitals and asked if the state has come out with statewide directives for hospitals. Mr. Shultz said the state DOH was involved from the start and did a survey of the hospital and provided written recommendations to address gaps. The state also worked to address staff knowledge and usage, specifically of PPE. SMMC shared its findings and lessons learned with Washington State Hospital Association. SMMC provided cheat sheets to staff through badge buddies and other hospitals have started to adapt similar. Mayor Erickson said she understands the communication gaps with staff. She said whenever we experience something like this, it is good to share it with our colleagues to help them in the future.

Matt Wheelus said SMMC implemented a new system through the staff safety program called Check and Coach. Management works with staff to audit what actually happens each day and coach staff on the hospital policies and protocols. He said staff want to do the right thing and SMMC leadership is working to help staff do the right thing safely.

Mayor Wheeler said he appreciated this update and would like to keep this conversation going every few meetings. He also asked about the hospital's flu vaccination plans and said we will all need to coordinate our flu messaging due to the pandemic. Mr. Shultz explained SMMC's flu plans. He said CHI Franciscan has mandatory flu vaccination and masking requirements of staff and all staff will have their flu vaccines by next week. Additionally, SMMC's flu clinics are already outfitted with vaccines. He said now is the time to get your vaccine. Flu cases generally rise significantly during the holidays,

Dr. Morrow said there has been tremendous attention paid to this outbreak event to help other hospitals and workplaces prevent outbreaks. The CDC determined their guidance to hospitals was incomplete. The Health District has worked with the CDC to use the lessons learned in this event to provide more guidance from CDC to healthcare settings.

FUTURE VACCINE UPDATE

Dr. Morrow shared a presentation on the importance of the flu vaccine this year to help minimize the illness and burden on the healthcare setting. He said if an individual gets both flu and COVID-19 at the same time, it can result in serious illness. Anyone who develops flu like symptoms will require covid testing. Individuals can find information and locations to get their flu shot at vaccinefinder.org.

He shared state level influenza vaccination rates for 2020 versus 2019. The rates decreased a little during the early stages of the pandemic but are starting to go back up.

Dr. Morrow shared the CDC COVID Vaccination Interim Playbook, released September 16, 2020. The Playbook provides a variety of information and resources regarding rollout of a COVID vaccine.

Dr. Morrow shared a COVID vaccine status tracker. There are currently 11 vaccines in phase 3 trials, five have been approved for limited use, and zero vaccines have been approved for full use.

The National Academy of Medicine, a non-governmental agency, was asked by the CDC and the National Institute of Health to develop a framework for equitable distribution of COVID vaccines. They created a modeled phased approach which initially targets healthcare workers, first responders, people with underlying health conditions and older adults living in congregate living facilities. As the vaccine becomes more available, it will be phased to include K-12 teachers and staff and childcare workers, critical workers in high risk settings, individuals in homeless shelters with disabilities, individuals in prisons and other similar facilities and older adults not included in Phase 1. Phase 3 will include young adults, children and workers in occupations important to the functioning of society and at increased risk of exposure. And in phase 4, the vaccine will be available to everyone in the United States.

Dr. Morrow reminded the board that vaccines are one more tool and don't replace what we are already doing, such as wearing masks, social distancing, and maintaining hygiene. He said Vaccines must be both safe and effective. Vaccines will initially be scarce, and their distribution needs to be thoughtful, equitable and fair.

There was no further comment.

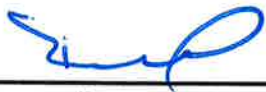
FINAL COMMENTS AND ADJOURN

Mr. Grellner introduced Jessica Guidry, Public Health Emergency Preparedness and Response Program Manager to discuss the community-based testing site.

Ms. Guidry explained that the Health District is working with the EOC to set up a community-based testing site. They will start with the introduction of one new testing site in the Bremerton

area at the end of October. This testing site will be an addition to the other testing options and will not replace anything currently being done by our medical community. This will be a drive through testing site which provides saliva-based testing in addition to nasal swabbing. This testing site will not require a doctor's visit prior to testing. Individuals do not need to have insurance to be tested. The lab will bill insurance if individuals have it, and for individuals without insurance, the lab will bill a federal grant funded by HRSA. There are plans to open additional testing sites down the road, as well as a mobile testing site.

There was no further business; the meeting adjourned at 12:02 p.m.



Robert Putaansuu
Kitsap Public Health Board



Keith Grellner
Administrator

Board Members Present: *Mayor Becky Erickson; Commissioner Charlotte Garrido; Councilmember Kol Medina; Mayor Robert Putaansuu; Mayor Greg Wheeler; Commissioner Ed Wolfe.*

Board Members Absent: *Commissioner Rob Gelder*

Community Members Present: *Attached.*

Staff Present: *Ornela Abazi, Disease Intervention Specialist, Communicable Disease; Leslie Banigan, Senior Environmental Health Specialist, Water Pollution Identification and Correction; Angie Berger, Administrative Assistant, Administration; Dana Bierman, Program Manager, Chronic Disease Prevention; Keith Grellner, Administrator, Administration; Jessica Guidry, Program Manager, Public Health Emergency Preparedness and Response; Karen Holt, Program Manager, Human Resources; Kimberly Jones, Program Manager, Drinking Water and Onsite Sewage Systems; Melissa Laird, Manager, Accounting and Finance; Anne Moen, Public Health Educator, Public Health Emergency Preparedness and Response; Dr. Gib Morrow, Health Officer, Administration; Beth Phipps, Public Health Nurse Supervisor, Communicable Disease; Denise Turner, Senior Accounting Assistant, Payroll; Garrett Whitlock, Social Worker 1, HIV Case Management.*