

KITSAP PUBLIC HEALTH BOARD

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

MEETING AGENDA

May 7, 2024

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

Chambers Room, Bremerton Government Center

345 6th Street, Bremerton WA 98337

(Health Board members may participate remotely via Zoom)

- | | | | |
|-------------------------|-----|---|---------|
| 10:30 a.m. | 1. | Call to Order
<i>Commissioner Rolfes, Vice Chair</i> | |
| 10:31 a.m. | 2. | Approval of April 2, 2024, Meeting Minutes
<i>Commissioner Rolfes, Vice Chair</i> | Page 4 |
| 10:32 a.m. | 3. | Approval of Consent Items and Contract Updates
<i>Commissioner Rolfes, Vice Chair</i> External Document | |
| 10:34 a.m. | 4. | Public Comment – <u>Please See Notes at End of Agenda</u>
<i>Commissioner Rolfes, Vice Chair</i> | |
| 10:44 a.m. | 5. | Health Officer and Administrator Reports
<i>Dr. Gib Morrow, Health Officer & Yolanda Fong, Administrator</i> | Page 9 |
| ACTION ITEMS | | | |
| 10:50 a.m. | 6. | Health Board Letter Concerning Military Health Strategy
<i>Dr. Gib Morrow, Health Officer</i> | Page 16 |
| DISCUSSION ITEMS | | | |
| 10:55 a.m. | 7. | Healthcare Access Update
<i>Dr. Gib Morrow, Health Officer</i> | |
| 11:00 a.m. | 8. | Proposed Food Service Establishment Food Safety Rating System
<i>John Kiess, Environmental Health Director</i>
<i>Dayna Katula, Food and Living Environment Program Manager</i> | Page 21 |
| 11:25 a.m. | 9. | Onsite Sewage System (OSS) Ordinance Revision
<i>John Kiess, Environmental Health Director</i> | Page 42 |
| 11:45 a.m. | 10. | Adjourn | |

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

Attending/viewing Health Board meetings

Members of the public can attend Kitsap Public Health Board meetings **in person** at the time and location listed at the top of the agenda.

Health Board meetings will broadcast **live on Comcast channel 12, WAVE channel 3, and on the BKAT website at <https://www.bremertonwa.gov/402>**. A video recording of the meeting will be made available at <https://kitsappublichealth.org/about/board-meetings.php>, typically within 48 hours of meeting adjournment.

Providing public comment

Verbal public comment: Members of the public can provide spoken public comment to the Health Board by attending the meeting in person at the time and location listed at the top of the agenda.* Members of the public who attend in person can make verbal comments during the Public Comment agenda item or as specified by the Health Board Chair.

As this meeting is a regular business meeting of the Health Board, the Chair will establish a time limit for public comment to ensure enough time is allowed for all agenda items to occur prior to adjournment. Each public commenter will receive a specific amount of time to address the board as determined by the Chair.

Written comments may be submitted by mail or email to:

Mail:

Kitsap Public Health Board
Attention: Executive Secretary
345 6th Street, Suite 300
Bremerton, WA 98337

Email:

healthboard@kitsappublichealth.org

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

**If you are unable to attend a meeting in person and need to request an accommodation to provide verbal public comment, please email healthboard@kitsappublichealth.org or call 360-728-2235.*

Health Board meeting notifications and materials

To sign up to receive Kitsap Public Health Board meeting notifications by email or text message, go to kitsappublichealth.org/subscribe, email pio@kitsappublichealth.org, or call 360-728-2330. Notifications are typically sent on the Thursday prior to each regular Tuesday meeting.

A schedule of regular Health Board meetings is posted at <https://kitsappublichealth.org/about/files/board-meeting-schedule.pdf>

Materials for each meeting, including an agenda, minutes from the prior Health Board meeting, and informational meeting packet, are posted prior to each scheduled meeting at <https://kitsappublichealth.org/about/board-meetings.php>. Printed materials are available for meeting attendees. A video recording and copies of presentations are posted to the board meetings website after each meeting.

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

The meeting was called to order by Chair Tara Sell at 10:30 a.m.

Board members each provided a brief introduction.

APPROVAL OF MINUTES

Mayor Becky Erickson moved and Commissioner Christine Rolfes seconded the motion to approve the minutes for the March 5, 2024, regular meeting. The motion was approved unanimously.

CONSENT AGENDA

The April consent agenda included the following contracts:

- 2203, Amendment 17, *Washington State Department of Health, Consolidated Contract*

Dr. Michael Watson moved and Mayor Erickson seconded the motion to approve the consent agenda. The motion was approved unanimously.

PUBLIC COMMENT

1. Tom Slyter, Alliance for Equitable Healthcare, commended the Board for the efforts and resources being used to address homelessness, substance use disorder, and mental health. He asked the Board if there is one office coordinating the efforts of various agencies. Chair Sell noted that an answer will be provided at a later time.

HEALTH OFFICER/ADMINISTRATOR'S REPORT

Administrator Update:

Yolanda Fong, Administrator, shared three updates:

- The request for proposals for classification system design and salary schedule research has been completed. The Health District selected Compensation Connections, a Washington-based firm who has worked with other public agencies throughout the state. The contract is being developed and the work will begin soon.
- This month's meeting materials contain three submissions for written public comment and are available for the Board's reference.
- The National Association of Local Boards of Health (NALBOH) will be holding another annual conference this year in Nashville, Tennessee. Member Drayton Jackson attended the conference in 2023 and discussed the valuable information he gleaned from the experience.

There was no further comment.

Health Officer Update:

Dr. Gib Morrow, Health Officer, provided the Board with several updates:

- It is National Public Health Week and the 2024 theme is, “Protecting, Connecting, and Thriving. We are all public health.” Dr. Morrow noted that public health is not a specific agency or program but all of society working collectively to keep communities healthy.
- The Health District is beginning the Community Health Improvement Plan (CHIP) process, a community-driven planning process which aims to address the three priority areas identified through the Community Health Assessment (CHA): healthcare, mental and behavioral health, and housing and homelessness.
- Dr. Morrow emphasized the importance of collaboration between partners to reach the mutual objective of a healthy public. He acknowledged the work that is being done throughout the community to advance that goal.
- The Health District is launching a healthcare action collaborative to improve funding, map assets, identify gaps, implement key strategies, and track progress on the recommendations brought forth by the Johns Hopkins healthcare assessment. The Board will receive regular reports on the collaborative’s progress.
- The number of emergency department (ED) visits by Medicaid beneficiaries is still higher in Kitsap than across Washington State. EDs are the most expensive place to receive care, but they are where people go when they do not have other options. This data highlights the importance of community paramedic programs, as well as expanding and funding primary care, mental health services, and substance treatment services.
- There is increasing national recognition that communities need better integration and funding of primary care, public health, and community-based organizations. Policy-related work is ongoing to strengthen each of those components, which has positively impacted the work of Peninsula Community Health Services, Kitsap Mental Health Services, and other primary care and preventative clinics.

Board members discussed Dr. Morrow’s update and asked clarifying questions.

There was no further comment.

HEALTHCARE SYSTEM CHALLENGES AND OPPORTUNITIES IN KITSAP REPORT

Board members were given the opportunity to discuss the Johns Hopkins presentation regarding the Healthcare System Challenges and Opportunities in Kitsap report.

Several Board members agreed that the report is a tool that will be used to develop and implement strategies to address the report’s findings. The response will need to be community-driven and collaboration among partners will be crucial.

There was no further comment.

KITSAP MENTAL HEALTH SERVICES PRESENTATION

Monica Bernhard, Chief Executive Officer of Kitsap Mental Health Services (KMHS), shared a presentation that outlined the services provided by KMHS and highlighted areas of improvement:

- Comprehensive recovery-oriented services, including mental health services for youth and adults, wrap-around services, school-based programs, housing and employment support, 24/7 programs, and designated crisis responder (DCR) services.
- KMHS served 4,005 non-duplicated clients from across Kitsap County in 2023 and there has been a steady increase in average annual occupancy rate for 24/7 programs.
- Clinical staff are compassionate, committed, and highly trained. KMHS has seen a steady improvement in staff retention.
- A 29% increase in overall employee growth since 2021.
- Diverse clients and staff which accurately represent the county's demographics.
- General and specialized evidence-based practices and training.
- KMHS faces several challenges, including staff recruitment, high acuity cases, high caseloads, the voluntary nature of mental health services, a historically underfunded system, significant administrative burdens due to legal and insurance requirements, and the lack of licensing to provide care to medically acute individuals.

Ms. Bernhard outlined the future of KMHS, including expansion plans, the launch of Transcranial Magnetic Stimulation Services, the launch of a community education series, the offer of free or low-cost community training in mental health topics, the transition to a Certified Community Behavioral Health Center, and facility accreditation efforts that will allow 24/7 programs to serve Medicare and commercial insurance clients.

After discussing Ms. Bernhard's presentation and asking clarifying questions, the Board thanked her for the work KMHS does in Kitsap.

There was no further comment.

CONNECTING COMMUNITY MEMBERS TO CARE REPORT

Bonnie Obremski, Communications Specialist with Olympic Community of Health (OCH), provided the Board with a presentation outlining OCH's Connecting Community Members to Care report. Ms. Obremski explained that OCH aims to improve individual and population health and advance equity by addressing the determinants of health. During her presentation, Ms. Obremski noted:

- Strategies employed by OCH include convening, funding, coordinating, advocacy, engagement, data sharing, transparency, communication, and place-based approaches.
- The report demonstrates the value and impact of local programs, elevates creative ideas, advocates for sustainable solutions, provides a tool for partners and decision-makers, and

supports regional efforts to meet the needs of individuals. Local programs include community paramedicine, co-response, and mobile-integrated health care.

- The role of first responders has moved from acute intervention for emergent needs to a high volume of non-emergent calls. This is resulting in increased costs and taxation on limited emergency resources. Additionally, ED utilization is high due to limited resources in primary care, specialty care, behavioral health, and resources for aging adults.
- Community paramedicine programs are gaining popularity and, as of 2023, there were more than 400 programs across 40 states. Similar programs in Kitsap were able to reduce stress on emergency services, increase collaboration across disciplines and programs, and tailor services to fit the skills of the available workforce. Program challenges included an increased administrative burden; high caseloads; limited and insecure funding; and inconsistent standards, training, and measures of success across programs.
- OCH suggests that programs invite elected officials to see the work first-hand, track quantitative and qualitative data, collaborate with partners, coordinate with similar programs to standardize data collection and analysis, conduct community assessments, use a broad spectrum of data to inform program planning, plan for program expansions over time to meet increasing referrals, and consider incorporating telehealth.

Ms. Obremski concluded her presentation by calling to action community partners, elected officials, and the state Department of Health and she shared the specific strategies recommended by OCH to help connect community members to care.

Mayor Wheeler thanked Ms. Obremski and OCH for focusing on the efforts of first responders, noting that the strain on first responders is the biggest challenge experienced by elected officials.

There was no further comment.

ST. MICHAEL MEDICAL CENTER SERVICES PRESENTATION

Chad Melton, President of St. Michael Medical Center (SMMC), provided the Board with information on SMMC services:

- SMMC is a 336-bed medical center that has a level two trauma center, cancer center, and medical pavilion. They are expanding access to primary care with new programs and clinics, as well as 24/7 hybrid care through their ED and urgent care facilities.
- The hospital is expanding the medical tower, providing 74 additional acute care beds to support more acute services in Kitsap and decompress emergency room boarding.
- Operational improvements are evidenced by the “A” Leapfrog safety grade, 4-star rating by Centers for Medicare and Medicaid Services, improved patient experience, addition of 100 new registered nurses in 2023, and decreased staff turnover.
- SMMC has invested in Kitsap by providing \$2.5 million in charity care and \$37.5 million in uncompensated care, as well as partnering with community-based organizations to provide or donate services to the community.
- Olympic College and Kitsap County have partnered with SMMC to help increase the healthcare workforce. SMMC is also working to advance health equity.

In discussing the challenges faced by SMMC, Mr. Melton noted that staffing, workforce development, post-acute care, increasing costs of care, inadequate reimbursements, and physician recruitment all pose significant challenges. He concluded his presentation by emphasizing his appreciation of the Board.

The Board then discussed aspects of Mr. Melton’s presentation and thanked him for his time.

There was no further comment.

ADJOURN

There was no further business; the meeting adjourned at 11:47 a.m.

Christine Rolfes
Kitsap Public Health Board

Yolanda Fong
Administrator

Board Members Present: *Mayor Becky Erickson; Member Drayton Jackson; Member Stephen Kutz; Councilperson Ashley Mathews; Mayor Rob Putaansuu; Commissioner Christine Rolfes; Member Dr. Tara Sell; Member Jolene Sullivan; Member Dr. Michael Watson; Mayor Greg Wheeler.*

Board Members Absent: None.

Community Members Present: *Monica Bernhard, Kitsap Mental Health Services; Stephanie Christensen, Virginia Mason Franciscan Health; Casey Jinks, Kitsap County Sheriff’s Office; Chad Melton, SMMC; Bonnie Obremski, Olympic Community of Health; Tom Slyter, Alliance for Equitable Healthcare.*

Scribe: *Margo Chang, Management Analyst, Kitsap Public Health District.*

Staff Present: *Angie Berger, Management Analyst, Administration; Yolanda Fong, Administrator, Administration; Adrienne Hampton, Policy, Planning, and Innovation Analyst, Administration; Siri Kushner, Director, Public Health Infrastructure Division; Dr. Gib Morrow, Health Officer, Administration; Gabreiel Outlaw-Spencer, Public Health Educator, Parent Child Health; and Laura Westervelt, Environmental Health Specialist 2-RS, Pollution Identification and Correction.*

Kitsap Public Health Board Health Officer Update

Gib Morrow, MD, MPH
Health Officer, Kitsap Public Health District
May 7, 2024



KITSAP PUBLIC HEALTH DISTRICT

Topics



**Millions of Americans
are living with
viral hepatitis.
Many don't know it.**

- May is National Hepatitis Awareness Month
- Communicable Disease Update
- Highly Pathogenic Avian Influenza
- Military Health Agency Strategic Plan
- Healthcare Access and KCHP



Communicable Disease Update

- Measles
- Pertussis
- Mpox

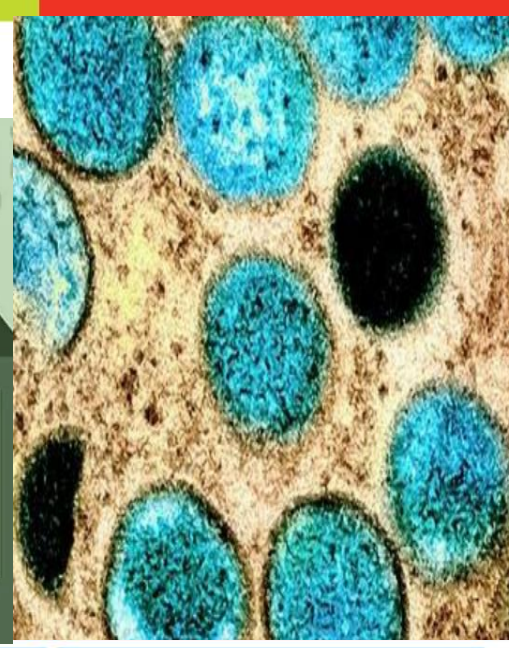


WHOOPING COUGH CAN BE DANGEROUS

Especially for newborns and babies

Whooping cough can lead to...

- PNEUMONIA**
(A SERIOUS LUNG INFECTION)
- CONVULSIONS**
- BRAIN DAMAGE**
- APNEA**
- DEATH**



State Summary

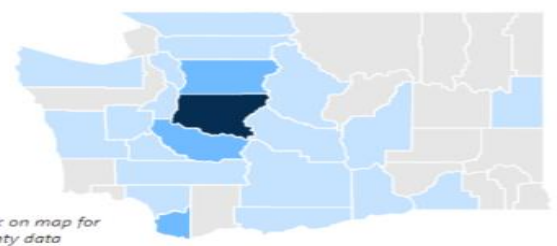
741 TOTAL CASES

21 TOTAL HOSPITALIZATIONS

0 TOTAL DEATHS

Map View Table View

TOTAL CASES



Click on map for county data

Zero >0-10 >10-100 >100-200 >200-300 >300-400 400+

0 of the 741 total cases do not have an assigned county.

TOTAL WEEKLY CASE COUNTS



Peak in July/August 2022

“Blip” of cases in Fall of 2023

Week of Symptom Onset (or Specimen Collection Date)
0 of 741 cases do not have a symptom onset or specimen collection date.

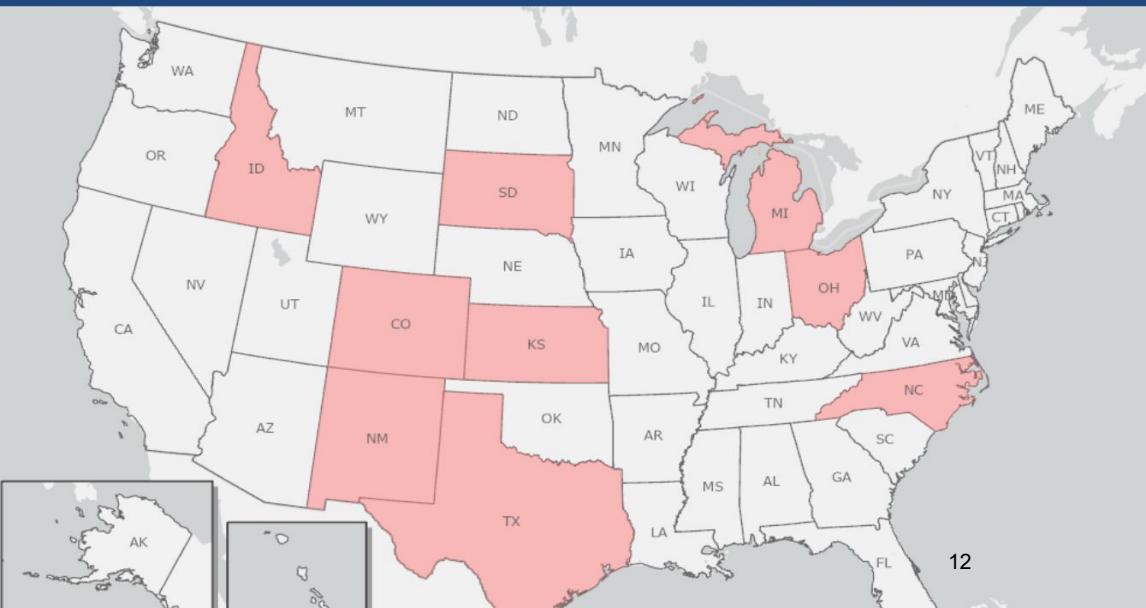
Many US states are experiencing this “blip”



Highly Pathogenic Avian Influenza- “Bird Flu” -H5N1

- Backyard Poultry Flocks in Kitsap in summer '22
- >90 million cases in poultry
- Spillover into multiple mammal species – seal in Jefferson Co., sea lions, cats, polar bears, etc.
- 36 dairy herds in 9 states
- 13 humans globally, including 2 US cases

USDA United States Department of Agriculture
HPAI in Domestic Livestock – Affected States



The NEW ENGLAND
JOURNAL of MEDICINE

SPECIALTIES ▼ TOPICS ▼ MULTIMEDIA ▼ CURRENT ISSUE ▼ LEARNING/CME ▼ AUTHOR CENTER PUBLICATIONS ▼

CORRESPONDENCE

f X in

Highly Pathogenic Avian Influenza A(H5N1) Virus Infection in a Dairy Farm Worker

Published May 3, 2024 | DOI: 10.1056/NEJMc2405371



KITSAP PUBLIC HEALTH DISTRICT

Military Health System Strategy



U.S. Department of Defense

News

Spotlights

About

Military Health System Stabilization: Rebuilding Health Care Access Is Critical to Patient's Well-Being

Jan. 22, 2024 | By [Robyn Mincher, MHS Communications](#) | [f](#) [X](#) [↻](#)



Healthcare Access – A Brief Update



- Kitsap Public Health
- Kitsap Community Health Improvement Priorities
- Participating Community Partners



To read more: <http://journal.lww.com/jphmp/toc/publishahead>



Resources

- [Military Health System Stabilization: Rebuilding Health Care Access Is Critical to Patient's Well-Being](#)
- [Military Health System Strategy](#)
- [After downsizing health care for years, Pentagon says medical readiness was a casualty](#)
- [Mass Mortality of Sea Lions Caused by Highly Pathogenic Avian Influenza A\(H5N1\) Virus](#)
- [Bridging the gap: Doula services as a solution to WA maternal health crisis](#)
- [Pertussis \(Whooping Cough\)](#)
- [Highly Pathogenic Avian Influenza A\(H5N1\) Virus Infection in a Dairy Farm Worker](#)
- [Health Advisory: H5 Avian Influenza Updates](#)
- [Weekly Pertussis Update for Washington State](#)



MEMO

To: Kitsap Public Health Board
From: Gib Morrow, MD, MPH, Health Officer
Date: May 7, 2024
Re: Health Board Letter Concerning Military Health Strategy

Background and Introduction

In July 2023, Kitsap Public Health Board unanimously passed [Resolution 2023-04](#) declaring high costs and insufficient healthcare access are public health crises in Kitsap, specifically committing to:

- Use the results of the KPHD Local Healthcare System Needs Assessment to formulate and implement initiatives that address and reduce deficiencies in healthcare services in Kitsap; and
- Support and champion public-private partnerships and multi-sector models for innovative work for maternity, mental health, substance abuse, and sexually transmitted infections; and
- Promote strategic partnerships between federal, state, and local governmental public health agencies, federally qualified health centers, healthcare systems, mental health and addiction treatment services, and academia; and
- Support opportunities to strengthen the healthcare workforce, including, but not limited to, support for loan repayment and career advancement programs, increased educational opportunities especially for local students from underrepresented communities and with diverse lived experiences, and recruitment and retention incentives; and
- Champion policy and system level change that increases funding for public health, additional important services, and preventive services.

In February of 2024, Johns Hopkins Center for Health Security published their healthcare systems assessment, [“Healthcare System Challenges and Opportunities in Kitsap County, Washington,”](#) with specific recommendations to:

- Kitsap County should prioritize recruiting new healthcare providers working in mental and behavioral health, primary care, and reproductive health; and
- State and county elected officials should continue to lobby the Defense Health Agency to reopen labor and delivery services at Naval Hospital Bremerton.

In January of 2024, the Assistant Secretary of Defense for Health Affairs published the new strategic plan for 2024-2029 entitled [Military Health System Strategy](#), committing to, “pursuing a change agenda that supports and strengthens the (healthcare) workforce, stabilizes our integrated system of readiness and health, and strengthens a culture of innovation ready to meet Service and Combatant Commander requirements anywhere, anytime.”

Memo re: Health Board Letter Concerning Military Health Strategy

May 7, 2024

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To strengthen availability of health services for military personnel, their families, and beneficiaries in Kitsap County, we have drafted the attached letter requesting that the Military Health System prioritize rebuilding and reinvesting in Kitsap's military health infrastructure, including eight specific requests which align KPHB priorities listed above with those specified in the Military Health Strategy.

Recommendation

Discuss, approve, amend (if necessary), sign, and send the attached letter and continue efforts to include federal and state elected officials in advocating for prioritizing the strengthening of Kitsap's health services through all available channels.

Please contact me at gib.morrow@kitsappublichealth.org with any questions or comments.

Attachment (1)

May 7, 2024

Lloyd J. Austin III, Secretary of Defense
1000 Defense Pentagon,
Washington, DC 20301-1000

Dr. Lester Martinez-López, Assistant Secretary of Defense for Health Affairs
1000 Defense Pentagon,
Washington, DC 20301-1000

Lt. Gen. Telita Crosland, Director, Defense Health Agency
7700 Arlington Blvd
Falls Church, VA 22042

Rear Admiral Guido F. Valdes, Director, Defense Health Network Pacific Rim
Attn: US Navy, 1200 Navy Pentagon
Washington, DC 20350

Dear Secretary Austin and Assistant Secretary Dr. Martinez- López:

The Kitsap Public Health Board commends the deputy secretary of defense signed memo directing the stabilization of the Military Health System and the release of the MHS Strategic Plan. The Board requests urgent prioritization of rebuilding and strengthening the healthcare workforce and services available in Washington State, specifically at Naval Hospital Bremerton and Navy Medicine Readiness and Training Command Bremerton.¹

As outlined in the background information below, our community, including those employed by and affiliated with the Department of Defense, faces an ongoing health crisis.² Our Health Board urges immediate restoration and expansion of these critical medical services at Naval Hospital Bremerton. Specifically, we request that the Military Health System and Defense Health Agency prioritize the following actions:

1. Reinvest in Naval Hospital Bremerton to revive needed services as a center of excellence to facilitate these efforts. (MHS Strategic Goals 2.1, 2.2, 3.4, 4.4)
2. Invest in the workforce by increasing numbers of primary care, obstetrical, behavioral health, and specialty providers at Kitsap military health facilities. (MHS Strategic Goals 1.1, 1.3)
3. Pursue efforts to attract and reattract beneficiaries to military treatment facilities through increased service availability and internal and public communication about available services. (MHS Strategic Goal 2.3)

¹ Military Health System Strategy Fiscal Years 2024-2029 (https://www.health.mil/Reference-Center/Publications/2023/12/15/MHS_Strategic_Plan_FY24_29)

² Resolution 2023-04 (https://kitsappublichealth.org/about/files/board/KPHB_Resolution_2023_04.pdf)

4. Modernize military health data systems to allow interoperability and secure data sharing with Kitsap Public Health and civilian health systems, granting local and state public health agencies access to vaccination, laboratory, and surveillance data and allowing interoperability of clinical data with community health information exchanges. (MHS Strategic Goal 3.1)
5. Integrate military health capabilities with Kitsap Public Health and civilian health systems through work agreements and formalized partnerships with civilian health organizations. (MHS Strategic Goal 4.2)
6. Commit to maintaining Tricare reimbursements at cost recovery levels to prevent adverse financial impact on Kitsap providers caring for military beneficiaries. (MHS Strategic goal 4.3)
7. Review partnerships and provide financial subsidies to Kitsap organizations caring for significant numbers of military beneficiaries. (MHS Strategic goal 4.3)
8. Contribute to workforce development and educational programs like Olympic College's healthcare expansion to support career development of needed frontline healthcare professionals and the career transition of military corpsmen into advanced health professions. (MHS Strategic goals 1.1, 1.3, 2.1, 4.3)

Background

Kitsap County, Washington, is home to Puget Sound Naval Shipyard and Naval Base Kitsap. The Navy is integral to our county's history, economy, and community. Active-duty service members, their families, and military retirees total about 70,000 people who live or work in Kitsap, and an additional 26,000 civilians are employed by the Naval Base Kitsap-Bangor. Together, these residents comprise over one third of Kitsap's total population of approximately 280,717 people and have significant public service needs, including general and medical specialty care.³ Crews of nuclear-powered aircraft carriers arriving for extensive overhauls at the west coast's largest and only carrier-capable dry dock in Bremerton can cause rapid increases in our local population, which add considerable additional demand on available services.

Since the establishment of the Defense Health Agency in 2013 and the resulting downsizing and outsourcing of medical care, Naval Hospital Bremerton has experienced closure of emergency, critical care, labor and delivery, and other service lines, requiring Navy members and beneficiaries to receive care in the civilian medical sector. This shift has exacerbated longstanding and worsening capacity concerns within Kitsap County's existing hospital, emergency, primary, and obstetrical care services at a time when the health system workforce capacity in Kitsap County is insufficient to meet the needs of the community.

In July of 2023, Kitsap Public Health Board passed Resolution 2023-04 declaring high costs and insufficient access of healthcare services in Kitsap County public health crises.⁴ The resolution details how the inadequacy and inaccessibility of these needed services have been compounded by the closure of Naval Hospital Bremerton birthing center in 2022. Recruitment and retention of a robust healthcare workforce has been further challenged by a high cost of living and low reimbursement rates for Medicare, Medicaid, and Tricare beneficiaries.

Details of Kitsap's strained healthcare system and the impact of this strain on the people who live here are described at length in Kitsap Public Health District's 2023 Community Health

³ Kitsap County Total Population 2022

(https://public.tableau.com/app/profile/kitsap.public.health.district.assessment.and.epi.team/viz/KitsapCountyTotalPopulation/Population_Kitsap)

⁴ KPHD Improving Healthcare access (<https://kitsappublichealth.org/information/data.php>)

May 7, 2024

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Assessment and in a report commissioned by the Health Board and published in February of 2024 by the Center for Health Security at the Johns Hopkins School of Public Health entitled “Healthcare System Challenges in Kitsap County, Washington.”^{5 6} Our community, including individuals employed by or otherwise affiliated with the Department of Defense, has experienced frequent bottlenecks in emergency department admissions and frequent lengthy wait times for emergency medical services.⁷ According to data abstracted from birth certificates, nearly 50% of Kitsap residents who gave birth in 2021 did *not* receive adequate prenatal care; this was 1.6 times higher than the overall state average.⁸

Based on the urgent healthcare crisis, we urge efforts on the 8 actions outlined above. We believe that these requests are aligned with our mutual goals of healthcare service readiness and appreciate your attention and effort to improve the continuum of care for military members and all who live in Kitsap.

Sincerely,

Commissioner Christine Rolfes
Kitsap Public Health Board, Vice Chair

On behalf of the Kitsap Public Health Board:

Becky Erickson, Mayor of Poulsbo; Drayton Jackson, Member; Stephen Kutz, Suquamish Tribe; Ashley Mathews, Councilperson of the City of Bainbridge Island; Rob Putaansuu, Mayor of Port Orchard; Dr. Tara Sell, Member; Jolene Sullivan, Port Gamble S’Klallam Tribe; Dr. Michael Watson, Member; Greg Wheeler, Mayor of Bremerton.

Cc: Senator Murray, Senator Cantwell, and Representative Kilmer, and Kitsap Legislative Delegation

⁵ 2023 Kitsap Community Health Assessment (kitsapublichealth.org/information/cha.php)

⁶ John’s Hopkins Health Access Assessment
(https://kitsapublichealth.org/information/files/JHU_Report_Healthcare_System_Challenges_and_Opportunities.pdf)

⁷ 2023 Kitsap Community Health Assessment Healthcare Chapter
(<https://kitsapublichealth.org/information/files/cha2023healthcareaccess.pdf>)

⁸ 2023 Kitsap Community Health Assessment Pregnancy and Birth Chapter
(<https://kitsapublichealth.org/information/files/cha2023pregnancybirth.pdf>)

MEMO

To: Kitsap Public Health Board
From: John Kiess, Environmental Health Director
Dayna Katula, Food and Living Environment (FLE) Program Manager
Date: May 7, 2024
Re: Proposed Food Service Establishment Food Safety Rating System

Background and Introduction

During the regular Board meeting on May 7th, a detailed presentation will be provided to update the Board on the Health District’s proposed food service establishment (FSE) safety rating system. The Board’s policy committee was provided this presentation during their February 20, 2024, meeting and provided their support and recommendations during that meeting.

Currently, the Health District provides permitted FSE inspection scores to the public through a mapping tool on our website. These inspection scores are provided to educate the public about food safety when considering patronage at an FSE. However, due to their technical nature, the scoring system, and an overall lack of public awareness of this system, we believe the public is largely unaware and lack understanding of FSE inspection findings.

In order to increase awareness about food safety and inspection scores, the Health District’s Food and Living Environment Program is planning to implement a food safety rating system that will require permitted establishments to publicly post their rating, which will be based on an average of their inspection scores. This new rating system will be similar to the programs found in neighboring King and Pierce Counties, which use an easily understood grading system to communicate food safety scoring to the public.

We have been working closely with our existing local Food Advisory Council to prepare this system and plan to initiate its implementation by educating permit holders over the next permit year (July 1, 2024 to June 30, 2025) about the new system. In the 2025-2026 permit year, the safety ratings will be required to be publicly posted.

Recommendation

None at this time – for information and discussion only.

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

Food Safety Rating System

Dayna Katula



KITSAP PUBLIC
HEALTH DISTRICT

Food & Living Environment staff includes nine full time employees



Paul Giuntoli
17 years



Layken Winchester
5 years



Jodie Holdcroft
24 years



Susan Van Ort
11 years



Melissa O'Brien
4 years



Albert Lawver
10 months



Jacob Wimpenny
10 months



Heather Fucini
7 months

What do we spend our time doing?





FOODBORNE ILLNESS STATS

About 100 foodborne illness reports in Kitsap in 2023

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



Food safety rating signs



Food Safety Inspection

Food Grade Rating



Needs Significant Improvement



S.C. Department of Health and Environmental Control



For more information, visit: www.scdhec.gov/food

Based on last 4 routine inspections.

See full inspection results at:

Vea los resultados completos de la inspección en:

다음에서 전체 검사 결과물보십시오 :

Tingnan ang buong mga resulta ng inspeksyon sa:

Xem kết quả kiểm tra đầy đủ tại:

Смотрите полные результаты проверки на:

tncbd.org/rating



Name of Establishment _____

Address _____

Date _____

Jane Doe
Anthony Chen, MD, MPH
Director of Health



NEEDS TO IMPROVE



OKAY



GOOD



EXCELLENT





ABOUT 6 YEARS AGO...

- Policy Committee discussed it
- Decided to hold off
- Posted entire inspection reports
+ report interpretation guidance





FOOD INSPECTION REPORTS

All inspection reports for food establishments are on our website.



THIS REPORT MUST BE POSTED IN THE ESTABLISHMENT WITH PUBLIC DISTRICT **FOOD ESTABLISHMENT INSPECTION**

NAME OF ESTABLISHMENT: [REDACTED]

TYPE OF INSPECTION:	PURPOSE OF INSPECTION: SUPERMARKET			
ROUTINE	ROUTINE			
TIME IN: 12:50PM	ELAPSED TIME: 20 min	TOTAL POINTS: 0	RED POINTS: 0	RE: F

RED HIGH RISK FACTORS – FOODBORNE ILLNESS RISK FACTORS & INTERVENTIONS
 Risk factors are improper practices or procedures identified as the most prevalent contributing factors to foodborne illness.

OUT = not in compliance N/O = not observed N/A = not applicable CDI = corrected during inspection

Item #	CDI	R	PTS	#	Compliance Status
Knowledge					
16	N/O		5	16	Time/Temperature Control: Proper cooling procedure
17	N/A		5	17	Time/Temperature Control: Proper hot holding (5 pts. if 130°F to 165°F)
18	N/A		5	18	Time/Temperature Control: Proper cooking time and temperature
19	N/A		25	19	Time/Temperature Control: No room temperature control
20	N/A		25	20	Time/Temperature Control: Proper reheating
21	IN		25	21	Time/Temperature Control: Proper cold holding (5 pts. if 42°F to 45°F)
22	IN		10	22	Time/Temperature Control: Accurate thermometer temperature of T
Handwashing by Hands					
23			25	23	Handwashing: Proper handwashing as required
24			25	24	Handwashing: Gloves used to prevent bare hand contact with ready-to-eat food
25			10	25	Handwashing: Adequate handwashing facilities
Harmless, Not Adulterated					
26			15	26	Food Safety: Food obtained from approved source
27			15	27	Food Safety: Ice, ice cream, and soft drinks from approved source
28			10	28	Food Safety: Washing of fruits and vegetables
29			10	29	Food Safety: Food in original condition, safe and unadulterated; approved
30			10	30	Food Safety: Proper disposition of returned, unsafe, or contaminated food; marking procedures for food at high risk for recall
31			5	31	Food Safety: Proper identification of stock ID; wild mushroom ID; parasite destruction for fish
Food Contamination					
32			15	32	Food Contamination: Food contact surfaces cleaned and sanitized; no cross-contamination
33			5	33	Food Contamination: Food stored below or away from ready-to-eat food; species separation
34			5	34	Food Contamination: Separation of raw shell eggs
BLUE - LOW RISK FACTORS – GOOD RETAIL PRACTICES Risk factors are preventive measures to control the addition of pathogens, chemicals, and allergens.					
Item #	CDI	R	PTS	#	Compliance Status
Food Control					
35			5	35	Food Control: Food stored at proper temperature
36			5	36	Food Control: Proper equipment for temperature control
37			3	37	Food Control: Proper labeling methods used
38			5	38	Food Control: Properly labeled; proper date marking
Food Contamination					
39			5	39	Food Contamination: No insects, rodents, animals not present; entrance controlled
Utensils and Equipment					
40	IN			40	Utensils and Equipment: Food and nonfood contact surfaces cleanable
41	IN			41	Utensils and Equipment: Warewashing facility with sanitizer concentration
42	IN			42	Utensils and Equipment: Food-contact surfaces
43	IN			43	Utensils and Equipment: Non food-contact surfaces
Physical Facilities					
44	IN			44	Physical Facilities: Plumbing proper backflow devices
					Sewage, wastewater



SINCE THEN...

- Watching and waiting
- **Lessons learned**
- More data

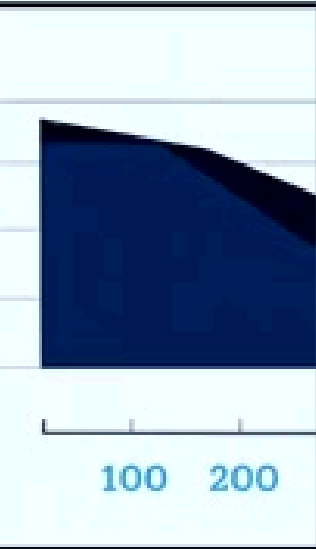
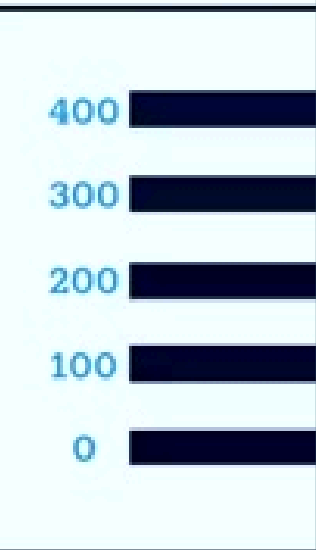
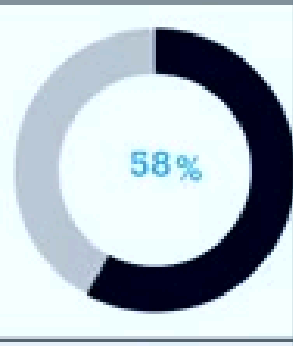
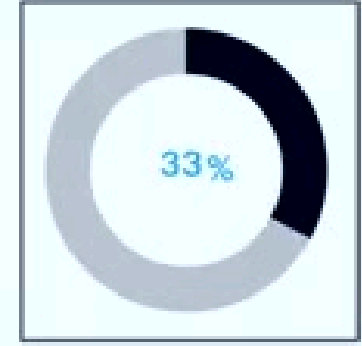
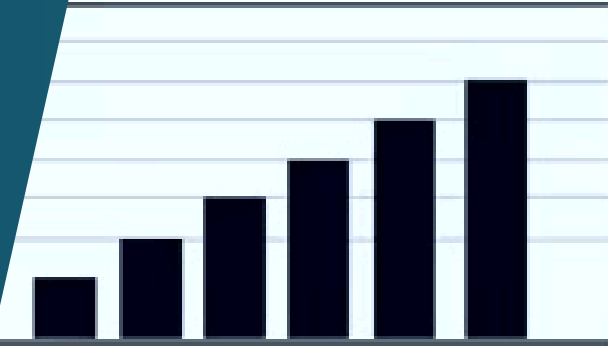




DATA SHOWS...

- Consumers want inspection information posted.
- Fewer outbreaks.
- Fewer complaints.
- Fewer reinspections.

	12.41	13.20
	17.25	19.36
	29.48	25.12
4	12.54	12.54
9	17.85	10.25
25	16.58	4.29
.69	64.12	58.69
7.21	70.54	36.54
2.69	17.85	10.25
10.36	17.25	19.36



GOING FORWARD

o o o o

Food Safety
Rating System



WHY?

**Positive
reinforcement**

**Communicate
risk to the
consumer**

**Incentivize
operators to
improve sanitary
conditions**

**Reduce
number of
outbreaks,
reinspections,
& complaints**



Food Safety Inspection

Inspección de Seguridad Alimentaria



No violations observed over the last 2 years.

See full inspection results at:

Consulte todos los resultados de inspección en:
전체 검사 결과 보기:
Xem toàn bộ kết quả kiểm tra tại:
Tingnan ang buong resulta ng pagsusuri sa:
См. полные результаты проверки по адресу:



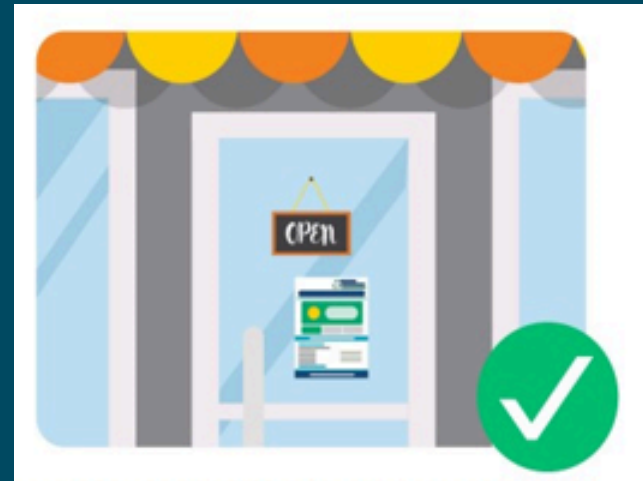
Name of Establishment _____
Permit Category _____
Address _____
Inspector Signature/Date _____

kitsappublichealth.org/scores

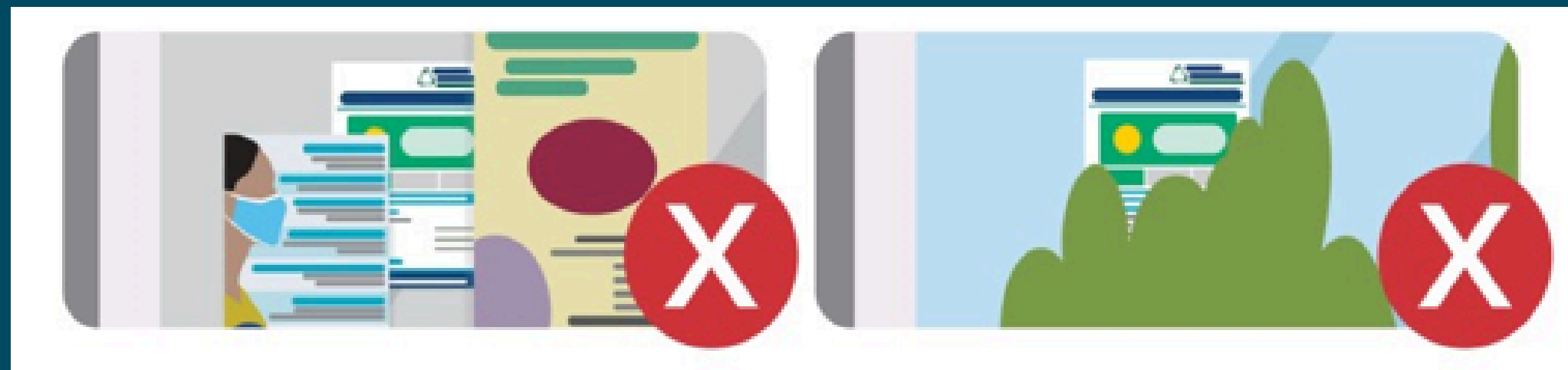
Report food safety concerns and illnesses.
Contact us at (360) 728-2235, food@kitsappublichealth.org
or kitsappublichealth.org/report.



HOW IT WILL WORK



SIGN PLACEMENT





NEW ESTABLISHMENTS

- “We are still new” signs
- Includes recent changes of ownership
- Receives regular sign:
 - After 1st routine inspection- Low risk food establishments
 - After 2nd routine inspection- Med and high risk food establishments

KITSAP PUBLIC HEALTH DISTRICT

Food Safety Inspection

Inspección de Seguridad Alimentaria

WE ARE STILL NEW

We don't have a rating yet.

BEST GREAT OKAY NEEDS TO IMPROVE

Find inspection results on kitsappublichealth.org/scores

See full inspection results at:

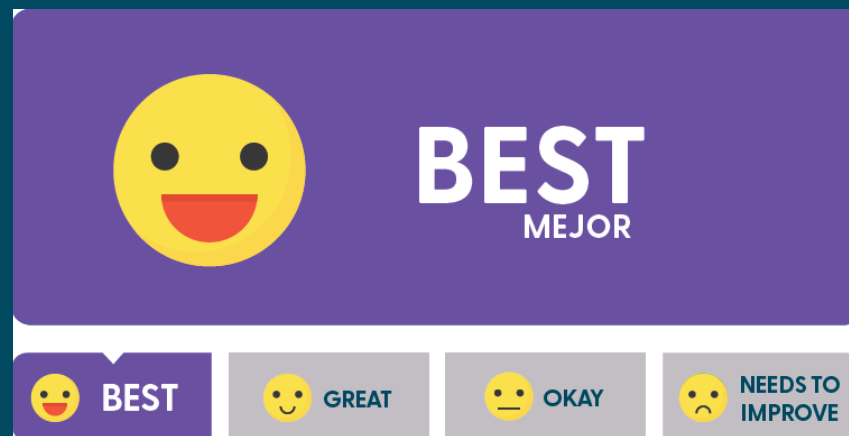
Consulte todos los resultados de inspección en:
전체 검사 결과 보기:
Xem toàn bộ kết quả kiểm tra tại:
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См. полные результаты проверки по адресу:

Name of Establishment _____
Permit Category _____
Address _____
Inspector Signature/Date _____

kitsappublichealth.org/scores

Report food safety concerns and illnesses.
Contact us at (360) 728-2235, food@kitsappublichealth.org
or kitsappublichealth.org/report.

SIGN CATEGORIES



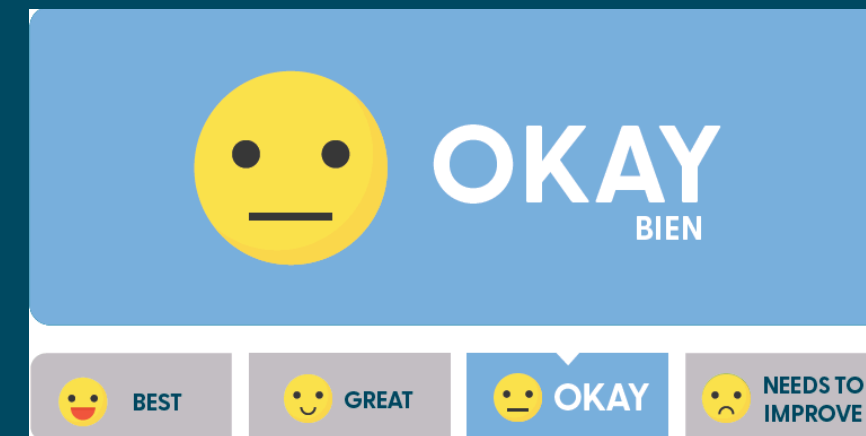
No violations observed over the last 2 years

25%



A few violations observed over the last 2 years

52%



A number of violations observed over the last 2 years

4%



Establishments on probation

4%



BIGGEST CHALLENGES

- Keep current on routine inspections.
- Inspector pressure to not write violations.



Messaging

- Social media posts
- Email messaging to operators
- Dedicated informational webpage
- Health Board meeting
- Inspection reports
- Explainer video

COMMUNICATION PLAN

Long implementation phase

- One year
- At least one routine visit
- Familiarity with process

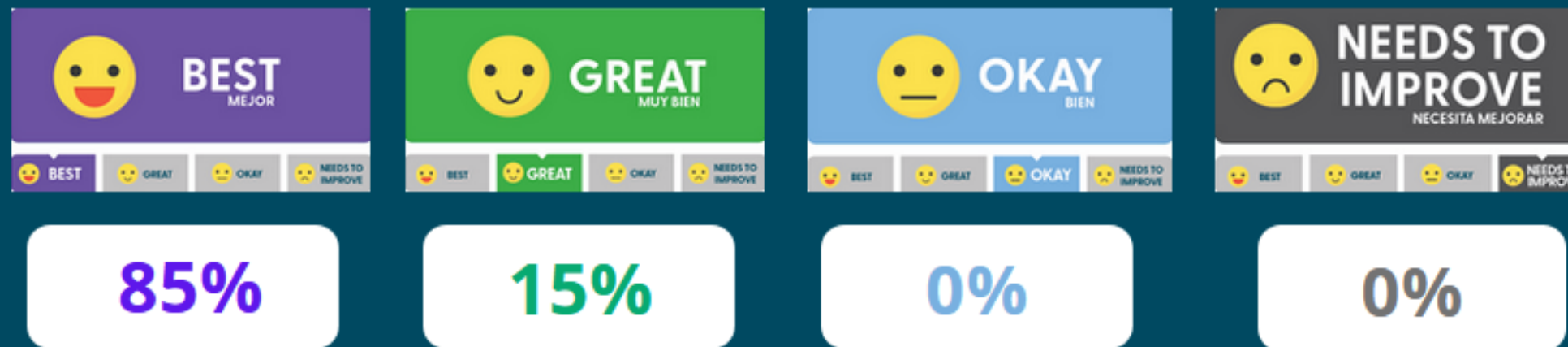
@ Inspections

- Face-to-face discussions
- Handouts



WHAT WE WANT TO SEE

- Number of complaints go down
- Number of reinspections go down
- Overall better category % shift



Improved food safety!





THANK YOU



KITSAP PUBLIC
HEALTH DISTRICT



MEMO

To: Kitsap Public Health Board
From: John Kiess, Environmental Health Director
Date: May 7, 2024
Re: Kitsap Public Health Board Onsite Sewage System (OSS) Ordinance Revision

Background and Introduction

The Kitsap Public Health District has had local OSS regulations since 1961 and the Health Board has a current OSS Regulation - [Ordinance 2008A-01, Onsite Sewage System and General Sewage Sanitation Regulations](#). The current ordinance now requires revision due to the recently adopted changes to [Chapter 246-272A Washington Administrative Code \(WAC\), Onsite Sewage Systems](#).

The State rule was adopted by the Washington State Board of Health in January 2024, with an effective date for the majority of the changes, of April 1, 2025. Our local ordinance must be revised to be consistent with, and at least as stringent as, the newly revised WAC.

During the regular Board meeting on May 7th, a brief presentation will be provided to update the Board on the Kitsap Public Health District's OSS regulatory framework and provide an overview of the ordinance revision process and general areas of revision.

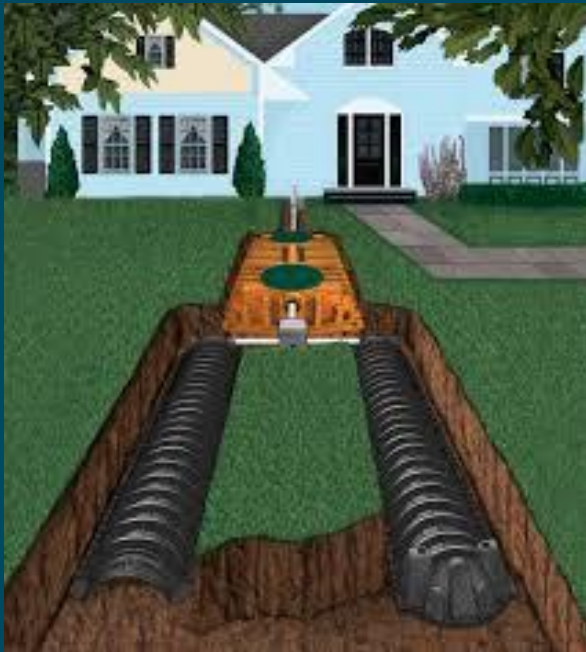
We will be working with our existing local OSS technical advisory committee to prepare a new draft ordinance and solicit public comment over the next few months. We will plan on bringing our final draft to the Board in October for review. Local OSS regulations must be approved by the Washington State Department of Health prior to their effective date, so after Board review we will submit our draft rule to the State, with the hope they will be ready to be set for a public hearing for adoption by the Health Board in early 2025.

Recommendation

None at this time – for information and discussion only.

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

Onsite Sewage System Ordinance Revision



John Kiess, RS
Environmental Health Director
May 7, 2024



KITSAP PUBLIC HEALTH DISTRICT

What is an onsite sewage system?

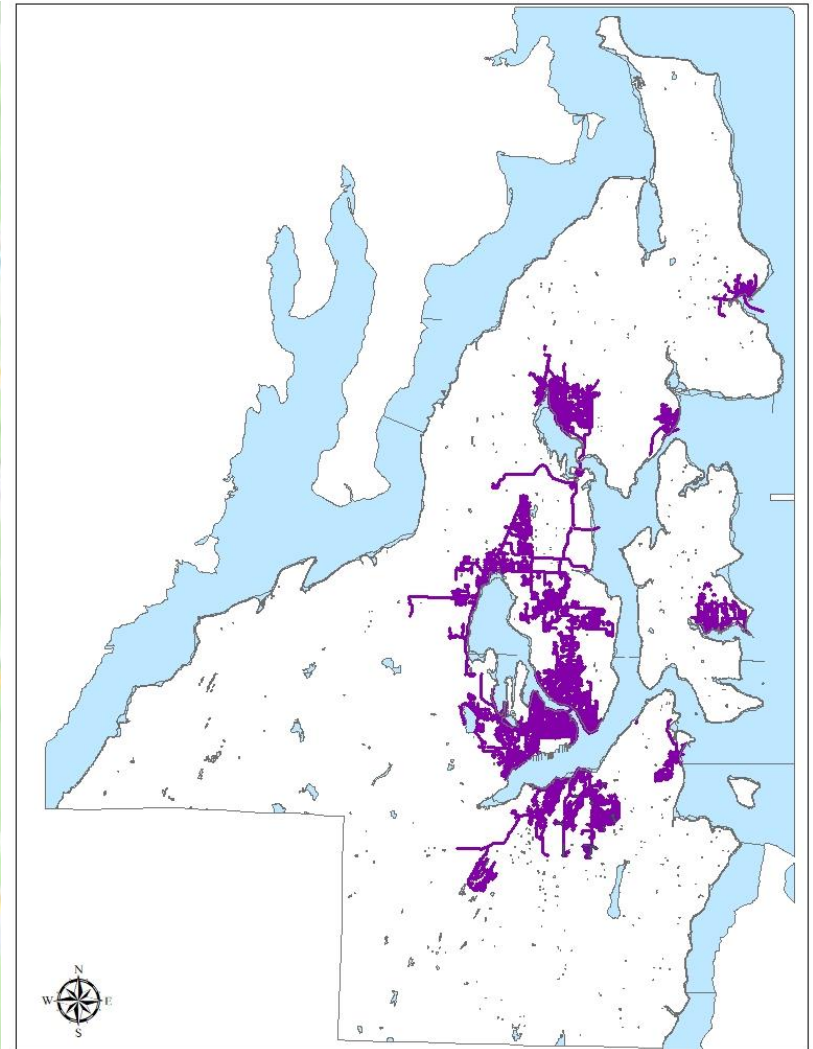
Onsite sewage systems, also known as septic systems, treat wastewater from private residences, restaurants, or other situations where flows are less than 3,500 gallons per day.



Kitsap County



Sewer Service Areas



Kitsap Public Health OSS Program

- Currently, there are more than 57,000 onsite sewage systems in Kitsap.
- 1961 - First local OSS ordinance, 15 years before a State rule
- 2011 – Last amendment to the current Kitsap Public Health Board Ordinance 2008A-01



Washington State Department of Health Rule Revision

- 2018 - WA DOH initiated the WAC 246-272A rule revision process
- January 2024 – New rule adopted by the State Board of Health with an effective date of April 1, 2025
- Local health jurisdictions can use this interim period to update their local regulations to be submitted and approved by DOH to become effective after DOH approval



Washington State Department of Health Rule Revision Key Changes

- **Requires OSS property transfer inspections at time of sale**
- **Establishes a “Minor Repair” definition and exemption to permitting**
- **For OSS repairs (replacements) establishes requirements and enforcement and reporting of OSS failures**
- **Provides support for a local OSS remediation policy**
- **Increases minimum lot size and useable land area requirements for the creation of new lots that will utilize OSS**
- **Adds new definitions and updates technical design standards**
- **Requires DOH review of local OSS management plans to determine if updates are needed**

Proposed Kitsap Public Health Ordinance Revision Process 2024-2025

- **January** – Started ordinance revision with existing OSS Technical Advisory Committee
- **May** - Kitsap Public Health Board update
- **August** – Draft ordinance completed
- Public comment period
- **October** – Kitsap Public Health Board update
- **November** – Draft rule sent to DOH for approval
- **January/February** - Kitsap Public Health Board public hearing for adoption of new ordinance