

Kitsap Board of Health Health Officer Update

Gib Morrow, MD, MPH
Health Officer, Kitsap Public Health District
March 5, 2024



KITSAP PUBLIC HEALTH DISTRICT

Agenda

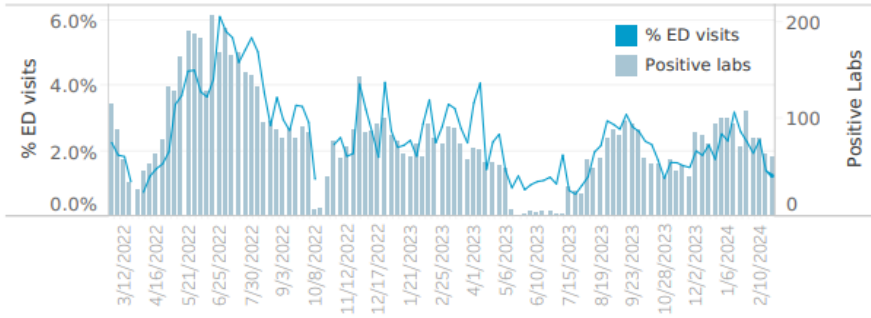


- Respiratory and Communicable Disease
- Child Fatality Reviews and Firearms
- Opioids and fentanyl
- Legislative Review
- Assessments and Access
- Partnership Projects



1 | COVID-19

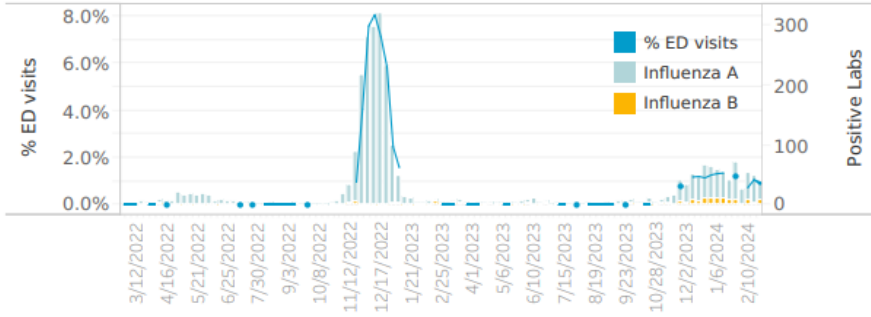
Data are shown for past 24 months.



Labs	60 of 525 (11.4%) specimens positive in past reporting week
ED Visits	19 of 1529 (1.2%) visits attributable to COVID-19 in past reporting week
Outbreaks in LTCFs	6 COVID-19 outbreaks reported in past 28 days

2 | INFLUENZA

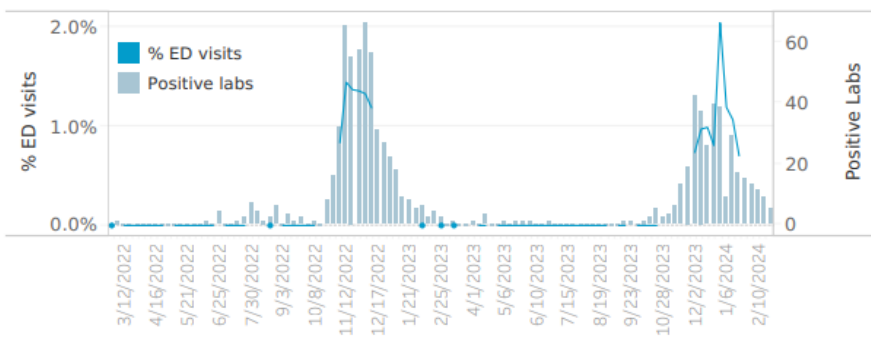
Data are shown for past 24 months.



Labs	36 of 449 (8.0%) specimens positive (29 Flu A, 7 Flu B) in past reporting week
ED Visits	14 of 1529 (0.9%) visits attributable to Influenza in past reporting week
Outbreaks in LTCFs	0 Influenza outbreaks reported in past 28 days

3 | RESPIRATORY SYNCYTIAL VIRUS (RSV)

Data are shown for past 24 months.



Labs	5 of 228 (2.2%) specimens positive in past reporting week
ED Visits	<10 of 1529 (<0.7%) visits attributable to RSV in past reporting week

- CDC says those over 65 **should** get a second Covid-19 vaccine this spring.
- New CDC isolation guidance (next page)
- At this winter's peak, there were 20,000 new hospital admissions and 2,000 deaths due to Covid-19 per week
- Vaccine effectiveness (VE) against symptomatic infection: 49% additional protection compared to those who did not get a fall vaccine



Respiratory Virus Guidance Snapshot

Core prevention strategies

Immunizations



Hygiene



Steps for Cleaner Air



Treatment



Stay Home and Prevent Spread*



Additional prevention strategies

Masks



Distancing



Tests



Layering prevention strategies can be especially helpful when:

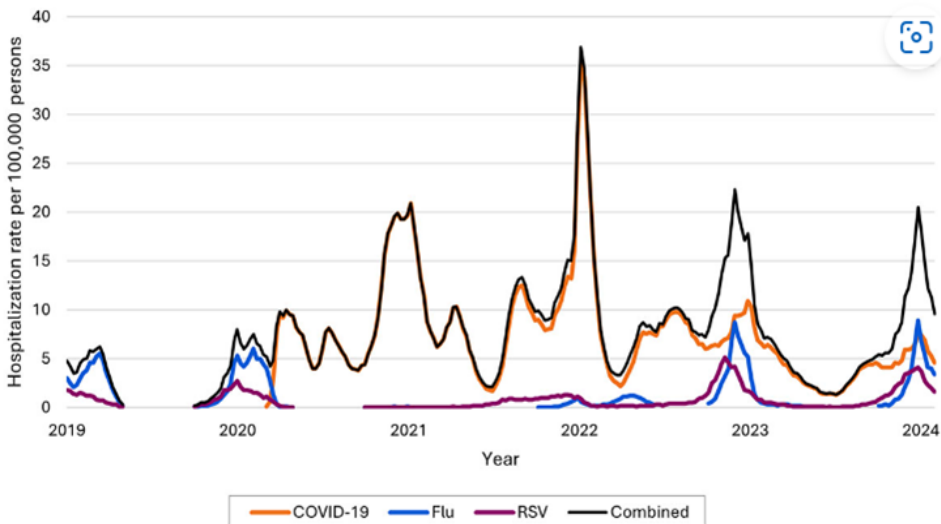
- ✓ Respiratory viruses are causing a lot of illness in your community
- ✓ You or those around you have risk factors for severe illness
- ✓ You or those around you were recently exposed, are sick, or are recovering

- * You can go back to your normal activities when, for at least 24 hours, both:
 - Your symptoms are getting better, and
 - You haven't had a fever.

When you go back to your normal activities, take **added precaution over the next 5 days**, such as taking additional steps for cleaner air and/or hygiene, masks, physical distancing, and/or testing when you will be around other people indoors.

CDC updates and simplifies respiratory virus recommendations

Stay Home and Prevent Spread



When you may have a respiratory virus...

You can return to normal activities when, for at least 24 hours, both are true:

- Your symptoms are getting better overall, **and**
- You have not had a fever (and are not using fever-reducing medication).

Take added precaution over the next 5 days, such as taking additional [steps for cleaner air](#), [hygiene, masks](#), [physical distancing](#), and/or [testing when you](#) will be around other people indoors.



Health Advisory: Update on measles activity



PUBLIC HEALTH ADVISORY

Feb. 28, 2024

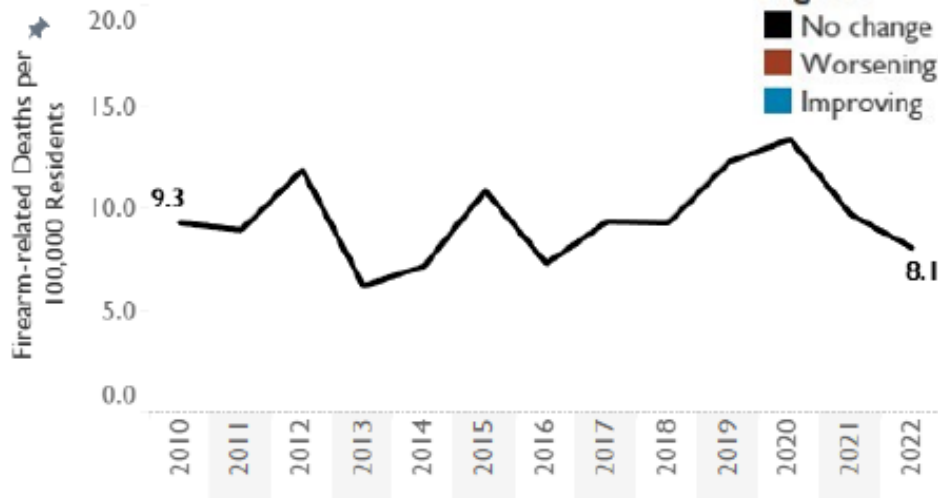
Health Advisory: Update on measles activity

- 35 Cases nationally year-to-date and rising (58 last year) in 15 states, including WA with recent cases in Clark and Spokane counties
- ~25-40% hospitalization rate – severe illness with “immune amnesia”
- Cases overwhelmingly in unvaccinated (or partially vaccinated)
- School vaccination rates in Kitsap ~97%, but clusters unvaccinated at risk
- [Estimating the impact: How much does a measles outbreak cost?](#)
- *Provider advisories go out to >2,500 recipients and are read and appreciated

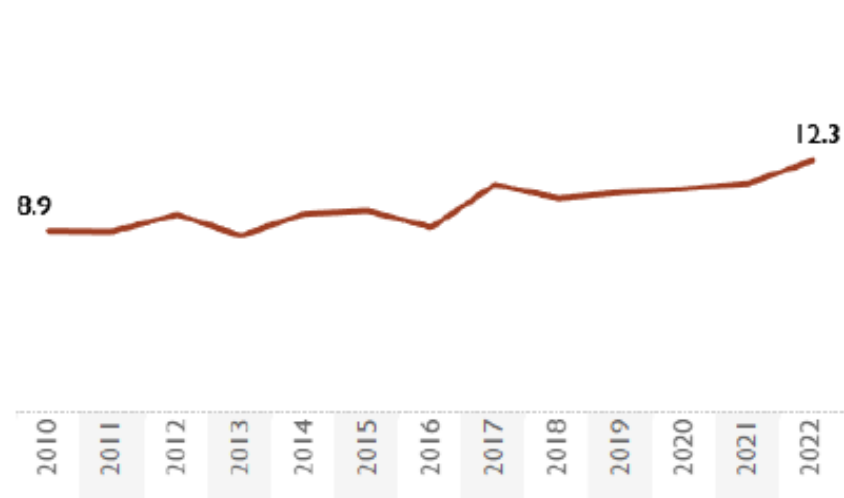
FIREARM SAFETY DATA

Although the rate of firearm-related deaths are variable between 2010 and 2022, there was **no statistically significant change detected**. By comparison, Washington State's rate has increased from 8.9 deaths per 100,000 residents in 2010 to 12.3 deaths per 100,000 residents. **Kitsap's rate of 8.1 deaths per 100,000 residents in 2022 was not statistically significantly different from Washington's rate in 2022.**

Kitsap County



Washington State



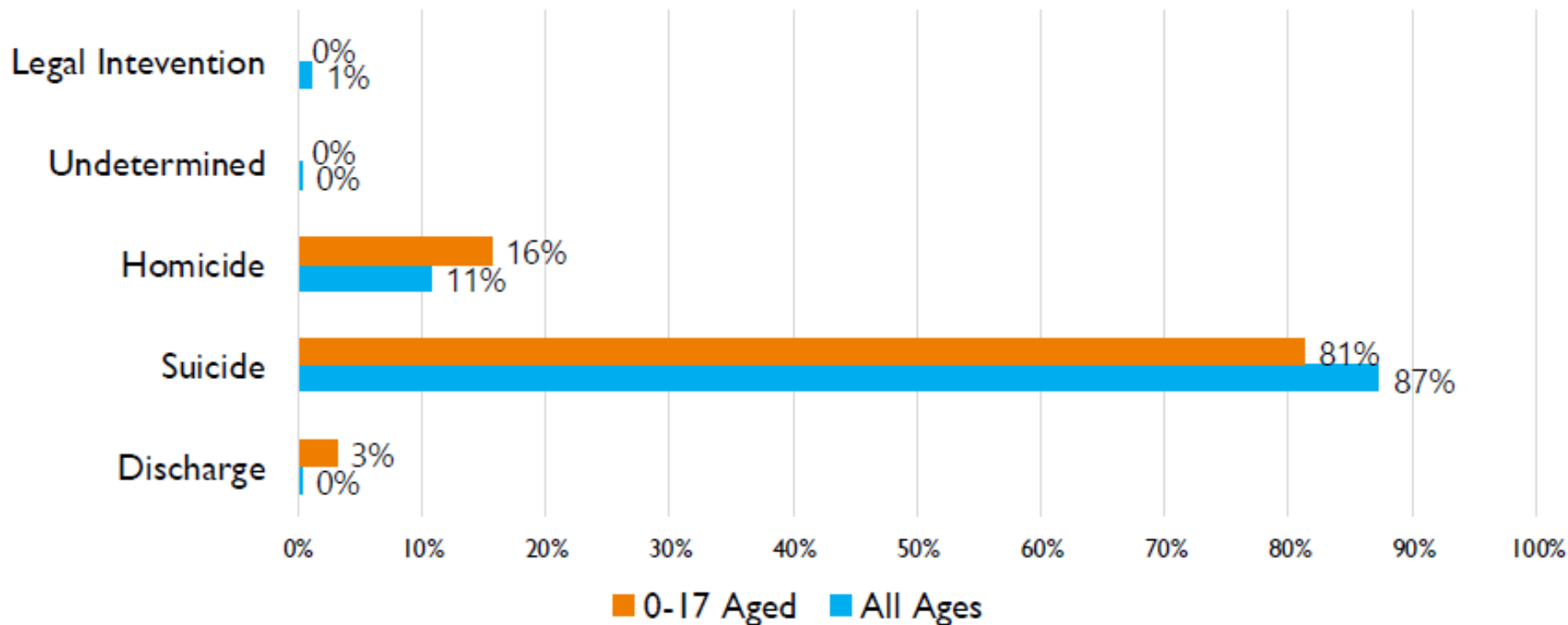
Data Source: Washington State Department of Health, Center for Health Statistics, Death Certificate data, 2010 – 2022, Community Health Assessment Tool (CHAT)



DEATHS DUE TO FIREARMS BY MANNER

2013-2022 (past 10 years) Firearm deaths by Type among all ages and 0-17 in Kitsap County.
Over 80% of all deaths for both children and adults were by suicide.

2013-2022 Firearm deaths by type and age in Kitsap County



Data Source: Washington State Department of Health, Center for Health Statistics, Death Certificate data, 2010 – 2022, Community Health Assessment Tool (CHAT)



SECURE FIREARM OWNERSHIP TRENDS

An estimated 39% of adults in Kitsap have a firearm kept in or around the home in 2022. This estimate has decreased from 42% in 2020.

27%



25%



Among adults with a firearm, **27%** have a firearm in or around the home that is loaded and **25%** have firearm which is unlocked.



Around **43%** of adults with a firearm have a firearm that is loaded or unlocked



An estimated **8%** of adults with a firearm have both a firearm that is loaded and unlocked



EXAMPLE INTERVENTION FOR SECURE FIREARM STORAGE



Protect Our Kids from Firearm Tragedies Community Safe Firearm Storage Giveaway Program

Event Planning Toolkit

- Many families feel comfortable discussing firearm safety with their child's pediatrician.
- A combination of just-in time education from a trusted provider and a free safety device to take home can increase confidence of how to use the safety device and likelihood that the safety item will be used.



EMS Opioid Responses- Kitsap and WA

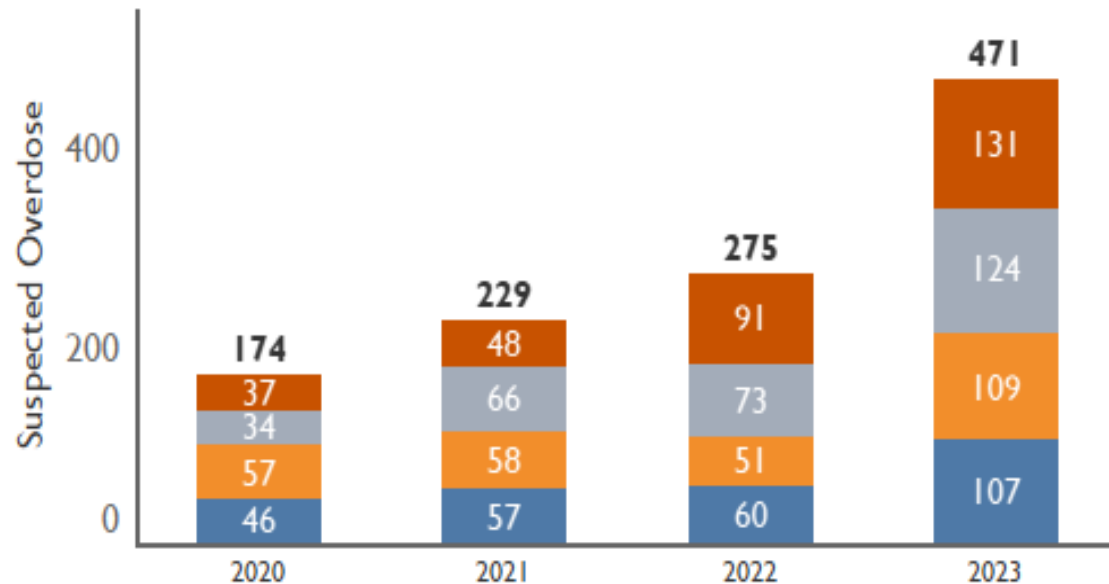
Public health uses EMS responses as a proxy for opioid nonfatal overdose trends, bearing in mind that there are missing cases for those that do not call in EMS.

The count of suspected overdoses has increased 71% in 2023, compared to 2022 (2023 totals are 1.71 times that of 2022)

Suspected Overdose:

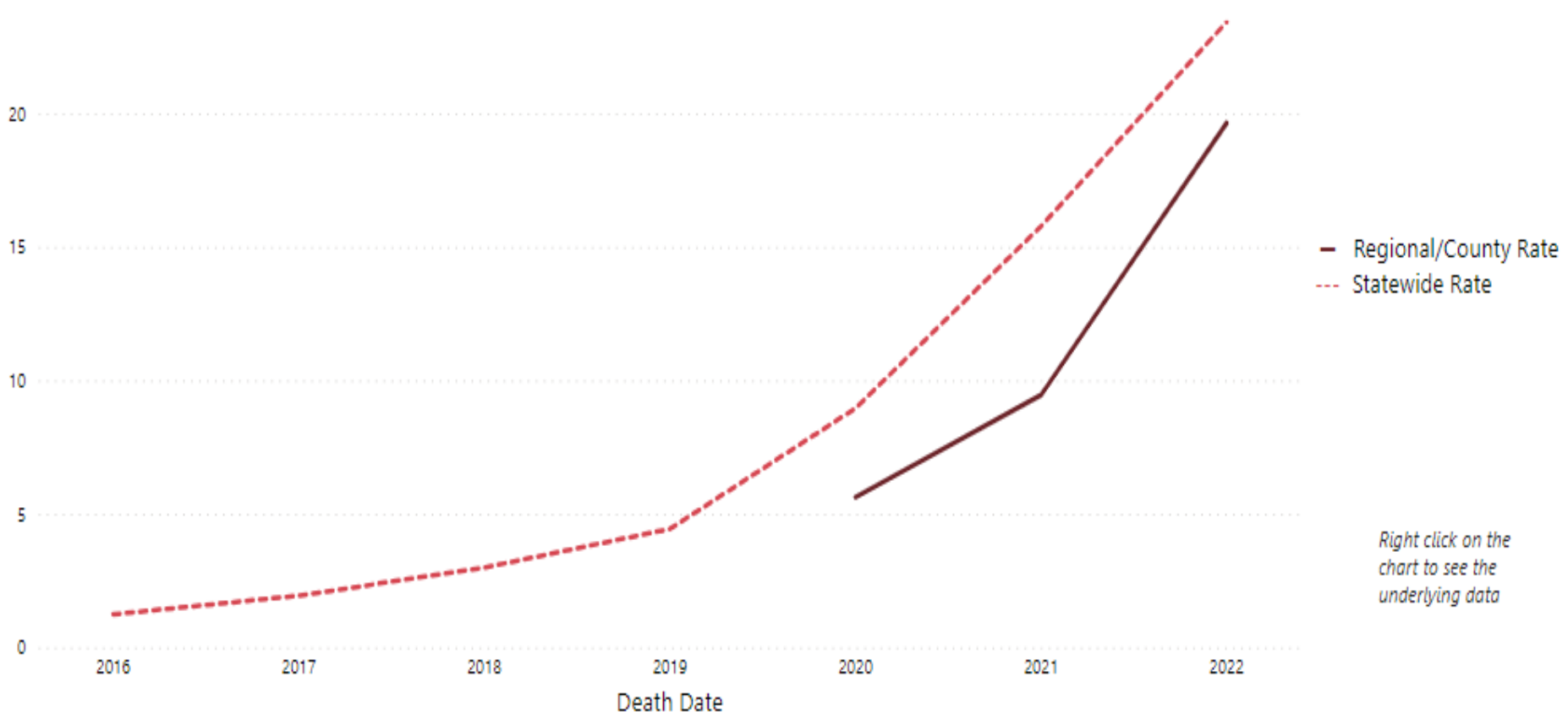
Includes improved naloxone response or opioid impression present in a single patient record. Also includes "Possible Opioid Related Incident" custom data element, adding entries of "yes" in this field to the conditions for "Suspected Opioid Overdose"

Data indicate the number of possible overdoses is **1.44 times** (44% increase) more in Q4 2023 when comparing Q4 2022.



Synthetic Opioid Overdose Deaths in Kitsap and WA

Kitsap County Age-Adjusted Rate of Synthetic Opioids Overdose Deaths per 100,000 Population



Right click on the chart to see the underlying data

Opioid Overdose Deaths – Subcounty Kitsap 2020 - 2022

Region	Count	Age Adjusted Rate* (and 95% CI)
Bainbridge Island	**	**
Bremerton	37	25.0 deaths per 100,000 people (17.4 – 35.2)
Central Kitsap	20	17.3 deaths per 100,000 people (10.4-27.1)
South Kitsap	37	21.3 deaths per 100,000 people (14.8 – 29.6)
North Kitsap	26	25.6 deaths per 100,000 people (16.4 – 38.4)

***Bainbridge Island counts are suppressed due to having counts between 1 and 10*

What's KPHD doing?

- Child Fatality Review Process
- Naloxone distribution and education
- Destigmatizing the issue as a public and personal health issue
- Enhanced communications
- Meeting with State and Federal representatives to advocate for increased funding
- Provider advisories to reduce stigma and increase prescribing of medications for Opioid Use Disorder
- Developing dashboards and sharing data and processes with EMS
- Partnering with local organizations to make resources more easily available (NKRRC, PCHS, KMHS)
- Asset mapping and navigation assistance in the future



Public Health Legislative Update

OPIOID RESPONSE



Passed: statewide drug overdose prevention and awareness campaign to address the drug overdose epidemic in addition to promising investments ([E2SHB 1956](#))

IMMUNIZATION



Passed: the definition of “vaccine” now includes all federal food and drug administration-approved immunizations recommended by the CDC ([SB 5983](#))

HEALTHCARE



Passed: DOH to adopt rules that will add hospital at-home services that a licensed acute care hospital may provide, including standards for operation of the program ([SHB 2295](#))



2024-2028 KITSAP COMMUNITY HEALTH PRIORITIES*



HEALTHCARE

- Address gaps in healthcare access
- Implement strategies to recruit and retain healthcare workforce



MENTAL & BEHAVIORAL HEALTH

- Expand care options for mental health and substance use disorders



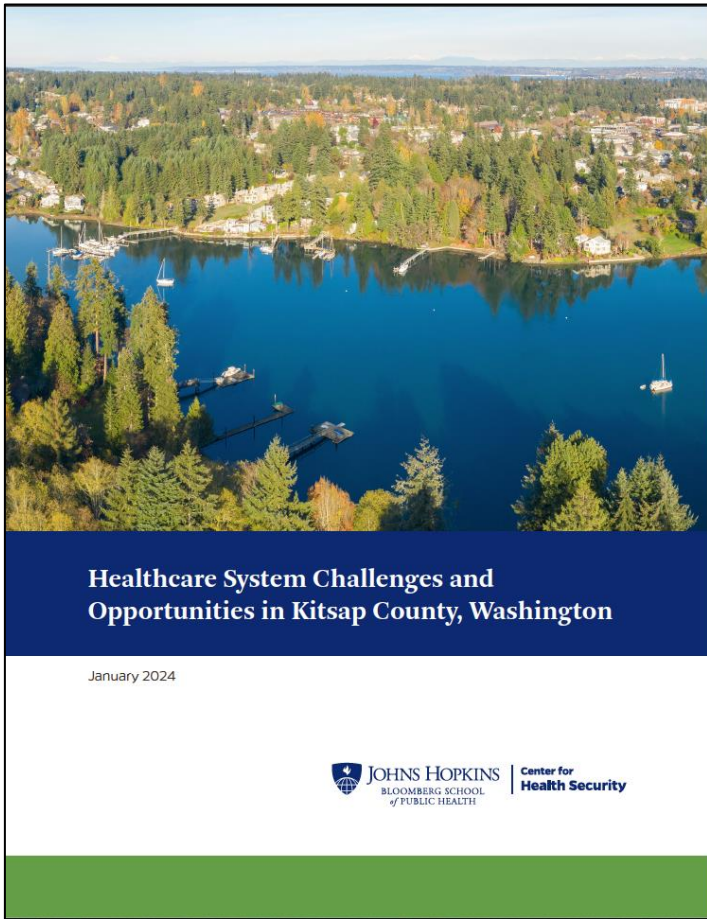
HOUSING & HOMELESSNESS

- Ensure affordable and safe housing
- Address and prevent homelessness

* Final wording will be decided at our Priority Work Group meetings this spring.

- Kitsap Public Health District. December 2023. [Community Health Assessment](#)
- Kitsap County Division of Aging and Long-Term Care. [Area Plan 2024-2027](#)
- Kitsap Community Resources. April 2023. [Community Needs Assessment](#)
- Kitsap Mental Health Services. March 2023. [Community Needs Assessment](#)
- St. Michael Medical Center. May 2023. [Community Health Needs Assessment](#) and October 2023 [Community Health Implementation Strategy](#)
- Healthcare System Challenges and Opportunities in Kitsap County





Healthcare System Challenges and Opportunities in Kitsap County, Washington

KPHD Board Meeting: March 5, 2024

Johns Hopkins University Research Team

Research Team



Tener Veenema, PhD,
MPH, MS, RN, FAAN
Senior Scholar



Diane Meyer, PhD, RN, MPH
Senior Scholar



Sanjana Ravi, PhD
Senior Scholar

Support Staff

Hannah Ottman-Feeney
Senior Program Coordinator

Erin Fink
Analyst

Alex Zhu
Analyst

Alyson Browett
Senior Editor

Julia Cizek
Website Administrator

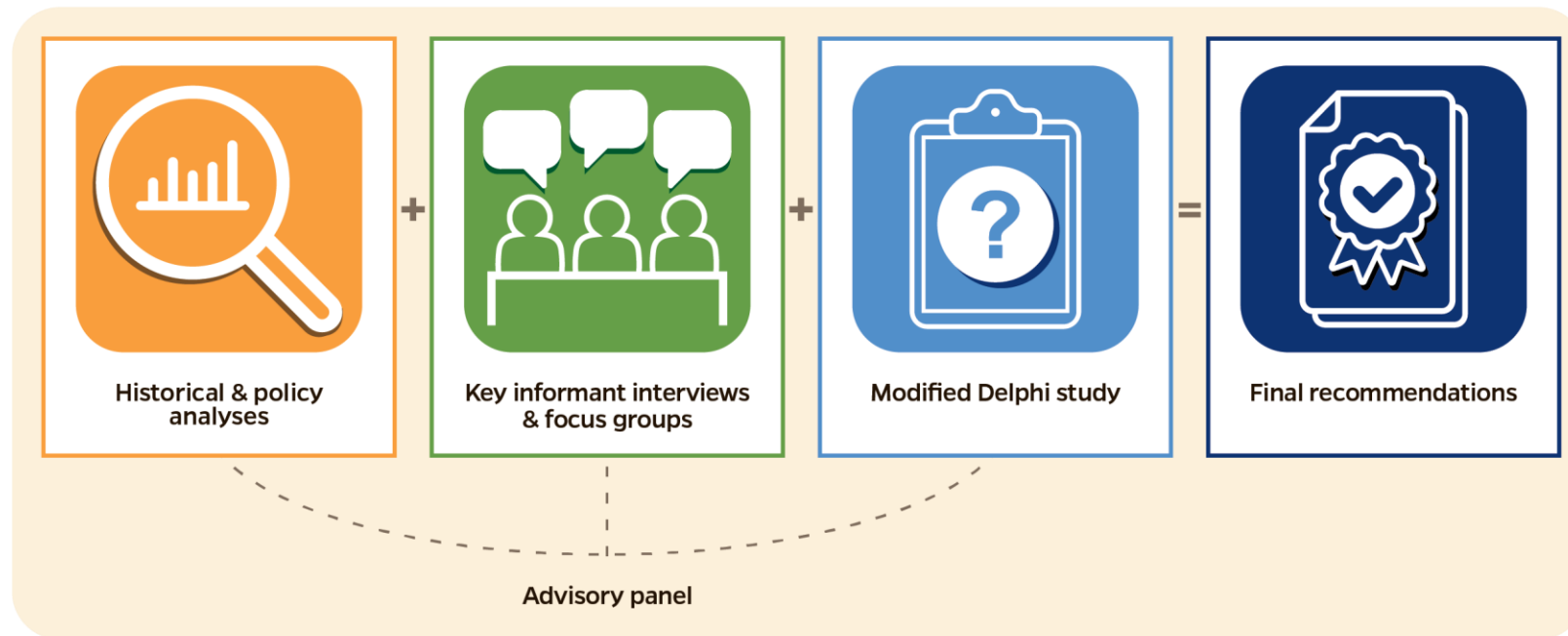
Project Overview

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

Project Overview

- We proposed conducting a comprehensive assessment and evaluation of Kitsap County's healthcare system and workforce
- Assessment and evaluation built on previous work conducted by the Kitsap Public Health District (KPHD)
- Project length: 9 months (April to December 2023)
 - No-cost extension through March 2024

Kitsap County Healthcare Analysis Methodology



Methods: Advisory Panel

- Assisted in obtaining relevant documents; identifying participants for interviews, focus groups, and Delphi study; and providing strategic guidance on participant recruitment and study trajectory
- Advisory panel included:
 - Members of the Kitsap Public Health Board
 - Representative from the Kitsap County Board of Commissioner's office
 - KPHD representatives

Methods: Document Analysis



- Historical analysis of the Kitsap County health system
 - Explored the social, economic, and political factors shaping the provision, administration, accessibility, and quality of health services available
 - Included: strategic plans, memoranda, reports, news media, peer-reviewed literature, archival materials, and quantitative data available from KPHD or other platforms
- Policy analysis
 - Reviewed relevant laws, policies, norms, and industry standards governing the administration of health services in Kitsap County and WA state
 - Sources: PubMed, US CDC, CMS, and WA State DoH, ProPublica, IRS, Association of Washington Public Hospital Districts, National Conference of State Legislatures

Methods: Interviews and Focus Groups



- Key informant interviews (n=41)
 - Purpose: to gain insight into the culture and institutional dynamics of the local health system, including strengths, barriers, and opportunities for improvement
 - Included: Kitsap Public Health Board members, public health practitioners, clinicians, hospital administrators, emergency managers, EMS and fire, long-term care facility representatives, and other local and state leaders
- Focus groups (n=4)
 - Purpose: to provide community members, local leaders, and local practitioners the opportunity to voice their opinions about the local healthcare system and recommendations for future improvements
 - Each group had a thematic focus, including child and adolescent health, health equity, sexual and reproductive health, and healthcare workforce



Methods: Delphi Study

- Purpose: to identify actionable policy recommendations for solving the healthcare system challenges identified during prior arms of data collection
- Included: representatives from local public health and healthcare organizations, members of the community, and members of the Kitsap County Board of Health (n=34)
- Three total rounds
 - Round 1: Provided 10 policy goals and were asked to provide recommendations to achieve each goal; ranked each of the 10 goals from most to least urgent
 - Round 2: Identified top 5 policy goals from round 1; ranked the feasibility of implementing each recommendation made for these 5 policy goals (n=77 recommendations)
 - Round 3: Virtual meeting where participants reviewed low-consensus recommendations from round 2

Key Findings: Overview

- Findings were informed by the policy analysis, historical analysis, interviews, focus groups, and Delphi study
- Kitsap County is a microcosm of several intersecting trends in the US
 - Hospital and health system consolidation
 - Growing prevalence of private equity
 - Healthcare monopolies
 - Catholic healthcare expansion

Key Findings

1. Hospital and health system consolidation, the growing prevalence of private equity in the health sector, the rise of healthcare monopolies, and the expansion of Catholic healthcare have contributed to many of the healthcare challenges facing Kitsap County
2. Kitsap County's healthcare crisis has been compounded by the county's unique geography, lack of affordable housing, limited public transportation options, and rapid population changes caused by the entry and departure of naval base workers and families
3. Health service provision in Kitsap County is currently fragmented across numerous public and private entities and there is a lack of choice in healthcare services
4. Many Kitsap residents harbor reservations about seeking care at St. Michael Medical Center (SMMC) due to its religious affiliation, challenges accessing financial assistance, reports of poor patient experiences, diminished workforce morale, and perceived monopolistic tendencies

Key Findings (cont.)

5. Kitsap County does not have a sufficient health workforce to meet the healthcare needs of the community, especially within the fields of primary care, behavioral and mental health, pediatrics, sexual health, and reproductive care
6. The complexity and inflexibility of health insurance coverage rules and reimbursement rates have resulted in critical gaps in care
7. New technologies and expansion of existing telehealth and outreach capabilities could potentially help bridge gaps in an overburdened healthcare system
8. Underserved, senior, and minoritized populations living in Kitsap County face unique barriers with respect to healthcare access and quality.

Delphi Study Findings



What measures should Kitsap County implement in the next year to achieve the following policy goals by 2035?

- **Mental and behavioral health:** Every Kitsap County resident has access to the resources needed to manage their emotional, psychological, and social wellbeing. They are readily able to cope with everyday stressors and receive diagnoses and treatment for mental illness and/or behavioral disorders.
- **Primary healthcare:** Every resident can easily access, within Kitsap County, an entry point into the healthcare system that connects them to essential disease prevention, treatment, rehabilitation, and palliative care services spanning the life course.
- **Health equity:** Every Kitsap County resident has a fair and just opportunity to attain their highest level of health, irrespective of age, gender identity, race, sexual orientation, ability, religious beliefs, employment status, or income level.
- **Housing:** Every Kitsap County resident has access to safe, healthy, dignified, and affordable lodging, shelter, and/or dwellings.
- **Reproductive health:** Every individual, couple, and family in Kitsap County has access to the resources needed to ensure physical, emotional, and social wellbeing in relation to obstetric and gynecological health, family planning, and maternal health.

St. Michael Medical Center: Charity Care & Community Benefit Spending

- IRS requirements for nonprofit hospitals
- Condition of SMMC's certificate of need
- Lown Hospitals Index: SMMC ranks 60th out of 69 hospitals in Washington
- Analysis of Form 990, Schedule H (2018-2021):
 - Net income: \$451.5 million
 - Tax exemptions (estimated): \$105.3 million (5.07% of total expenses)
 - \$15 million spent on community investments (0.71% of total expenses)
 - Charity care spending: 0.36%-0.76% of adjusted revenue

Study Team Recommendations

1. Kitsap County should prioritize recruiting new healthcare providers working in mental and behavioral health, primary care, and reproductive health
2. KPHD should convene a community action collaborative of local stakeholders focused on avoiding redundancies and increasing success rates of securing private, state, and federal funding to advance healthcare services in Kitsap County
3. Kitsap County should establish a transformational advanced practice nurse-based primary care model that prioritizes recruitment of primary care advanced practice nurses, nurse midwives, and mental health nurse practitioners
4. Within the next year, the Kitsap County Board of Commissioners, the Kitsap Public Health Board, and other relevant stakeholders should launch a formal commission to explore the feasibility of forming a public hospital district in Kitsap County.
5. St. Michael Medical Center should increase its spending on community investments by one percentage point per year for the next 5 years to justify its status as a nonprofit, tax-exempt hospital.

Study Team Recommendations (cont.)

6. SMMC should continue its efforts to clarify its status as a Catholic-affiliated hospital and how it impacts patient access to lawful healthcare services, consistent with best medical practices and patients' needs or interests and regardless of religious directives
7. State and county elected officials should continue to lobby the Defense Health Agency to reopen labor and delivery services at Naval Hospital Bremerton.
8. Kitsap County should increase the number of public transit routes and vehicles that connect residents to healthcare facilities
9. KPHD, in collaboration with the Kitsap County Department of Emergency Management, should convene community leadership and key stakeholders to evaluate the integrity of the 2020 Comprehensive Emergency Management Plan in light of current and projected 2024 hazards.

Study Team Recommendations (cont.)

10. KPHD should work with representatives from state agencies (Department of Social and Health Services; Department of Children, Youth and Families; Department of Commerce) to collectively develop a long-term strategy and proposed legislation to improve behavioral healthcare access in Kitsap County.
11. KPHD should resume providing infectious disease testing services (including for HIV and STIs) and make other harm reduction services, such as needle and syringe exchange programs, more easily accessible.
12. SMMC and other healthcare providers in Kitsap County should evaluate the feasibility of integrating the hospital-at-home model into the services they provide to the community.
13. Kitsap County leaders, healthcare system stakeholders, and state partners should develop a long-term strategy for petitioning Washington lawmakers to increase Medicaid reimbursement rates and continue exploring opportunities for innovation.

Next Steps

- Assess the feasibility of the proposed recommendations while continuing to seek community input & feedback
- Develop a strategic plan and monitoring framework for implementing priority recommendations

Questions?