



BOARD OF HEALTH

The Thurston County Board of Health has responsibility and authority for public health in both incorporated and unincorporated areas of the County.

Minutes for November 14, 2017

1) Call Meeting to Order

Chair Bud Blake called the meeting to order.

In Attendance:

Bud Blake, Chair; John Hutchings, Vice Chair, Gary Edwards, Commissioner; Ramiro Chavez, County Manager; Schelli Slaughter, Public Health and Social Services Department Director and Lydia Hodgkinson, Clerk of the Board of Health.

Excused Absence: Dr. Rachel Wood, Health Officer

Approval of the Board of Health Agenda:

Vice Chair Hutchings moved to approve the meeting agenda. Commissioner Edwards seconded the motion. The motion carried.

Approval of meeting minutes:

Vice Chair Hutchings moved to approve the September 12, 2017 and October 10, 2017 meeting minutes. Commissioner Edwards seconded the motion. The motion carried.

2) Proclamations

Proclamation Description: November as Movember

Schelli Slaughter, Director of the Public Health and Social Services Department (PHSS), introduced the proclamation stating the Board of Health will proclaim November as Movember to increase public understanding of the importance of men's health. Chair Blake introduced Nat Jackson a keynote speaker-jumper and trainer. Mr. Jackson set a new national jump rope speed record on the Steve Harvey Little Big Shots Show "Forever Young" in April 2017. He was certified by USA Jump Rope as "Jump rope King", the fastest seventy and over in the U.S. Mr. Jackson shared a video of his performance on the Steve Harvey show which aired on national TV in June, 2017. He also gave a brief jump rope performance. The Board thanked Mr. Jackson for performing and sharing his story. Chair Blake then introduced Jacob Bryson the Pacific Northwest representative for The Male Breast Cancer Coalition. Mr. Bryson spoke on behalf of breast cancer in men, shared his personal experience with breast cancer and encouraged all men, and their loved ones, to get screened for breast cancer. He then presented each of the Board Members with a Susan G. Komen scarf. Vice Chair Hutchings read the Proclamation proclaiming November as Movember to increase public understanding of the importance of men's health and urge all members of our community to join in recognizing this significant occasion and join the movement to change the face of men's health. A picture was taken of the Board members and all present in support of Movember and male breast cancer awareness.

3) Opportunity for the Public to Address the Board – no public comment

DEPARTMENT ITEMS

4) Thurston Thrives Update – Housing Action Team

Liz Davis, Community Coordinator with Thurston Thrives, introduced the topic and spoke on behalf of men's health. The Thurston Thrives Housing Action Team (HAT) is one of eight teams that focuses on improving the overall public health conditions in the county. There are three subcommittees contained in the HAT including the Homeless Housing HUB (HHH – Red Team)), Green Healthy Affordable Housing Rentals (GHAR – Green Team) and the Capital Construction Team (Blue Team), all focused on the development of new and rehabilitated affordable housing in the county. This effort is led by County Commissioner Bud Blake, Chair of HAT, and is supported by county and community leadership which includes the Director of PHSS, Schelli Slaughter; Derek Harris, Deputy Director of Community Youth Services, representing the HHH and Capital Construction Team; and Elisa Sparkman, the PHSS Healthy Homes Program Coordinator and GHAR Team Coordinator. Ms. Davis introduced Derek Harris, Trish Gregory, Executive Director of Family Support Services of South Sound; and Elisa Sparkman, leaders of this community wide effort all present to share the activities of the HAT subcommittees.

Mr. Harris, representing HHH, addressed the Board sharing his participation in Movember. He then discussed functions of the HHH and the Five (5) Year Planning – Guiding Principles which include best practices; person-centered service models; all roads lead to housing and increase housing; stronger together partnering with service providers, private sector developers and local government. Trish Gregory explained Coordinated Entry which consists of Intake, Standardized Assessment and referral. She then explained Coordinated Entry is not a one-stop shop, final in design or able to meet all of the shelter, rehousing and services needs that exist which will require new resources. Mr. Harris discussed a progressive Engagement Model going from diversion, coordinated entry, emergency shelter, repaid rehousing and permanent supplement housing. Ms. Gregory discussed steps in the Coordinated Entry process which includes: eligibility screening, Homeless Management Information System (HMIS); diversion, vulnerability assessment, and program matching and master list placement. She then discussed services such as access point, eligibility, diversion, assessment and master list for adults, families, youth/young adults, domestic violence survivors and veterans. Vice Chair Hutch questioned if when performing the vulnerable assessment was age, race, gender, or sexual orientation taken into account. Ms. Gregory explained sexual orientation and age are included. Mr. Harris provided additional explanation. At Ms. Slaughter's request, Ms. Gregory provided the Coordinated Entry Hotline phone number - (844) 628-7343. The Board thanked both Ms. Gregory and Mr. Harris for the presentation and the work they do for our community.

Ms. Sparkman, GHAR Team Coordinator and Chris Van Daalen, Executive Director of the Northwest Eco Building Guild and a member of GHAR Team, addressed the Board. Ms. Sparkman shared the GHAR Mission: to improve living conditions and energy efficiency of rental homes in Thurston County. She then shared organizations in the community who have member representation on the Team. Ms. Sparkman discussed the importance of improving conditions of rental housing in our community which include preventing homelessness; more effectively meet the demand of growing population; reduce missed days from work and school; reduce healthcare costs; and provide our county residents safe and comfortable housing so they can make positive contributions to our communities. She then explained in Thurston County affordability of rentals disproportionately affects low-income households and then provided statistics as per the 2015 Washington State Housing Needs Assessment for Thurston County.

Ms. Sparkman shared example pictures of unhealthy conditions in rental units. She explained the focus on landlords as they are local business owners and their ability to maintain their rental units directly affects the health of our community. The group wants to conduct research on local landlord and property management company motivations, barriers, needs and opinions; and use the research to create programs for landlords. GHAR's next steps include seeking funding to conduct this research and to continue to meet and collaborate within their current programs. Vice Chair Hutchings questioned what resources are available for renters if/when a rental residence is unlivable. Ms. Sparkman explained that through the PHSS Healthy Homes Program renters are provided with available resources and information on who to contact based on if they are located in the county or within a city to seek assistance. Mr. Van Daalen provided additional information regarding renters working with their landlord and seeking available programs. Ms. Sparkman shared her phone number, (360) 867-2674, for anyone to call if they have questions or need assistance. The Board thanked Ms. Sparkman and Mr. Van Daalen.

Chair Blake gave a back ground of the Capital Construction Team that focuses on the development of new and rehabilitated affordable housing in the county. He also introduced Zack Kosturos, president and broker for Prime Locations, Inc. and Jill Severn, a former member of the Panza Board, both members of the Capital Construction Team. Mr. Kosturos shared the Team's Mission Statement: seeking to identify incentives that could be created for barriers to be reduced or removed to help private sector developers locate, finance and profitably build low cost housing in Thurston County, to commensurate with the growing need of low income residents for people who are or are at risk of becoming homeless. He then discussed some barriers developers face to build low cost housing and potential incentives to reduce or remove these barriers. Discussion ensued around the importance of private sector involvement, housing ideas and processes. Mr. Kosturos addressed the Board Members' questions which included potential collaboration with government entities to speed up permit processes for low cost housing projects. Ms. Severn explained her involvement with affordable housing which included Camp Quixote, Quixote Village, and Community Village. She then explained the limits of the non-profit sector's available housing assistance and discussed the importance of working with the private sector to deal with homelessness. Ms. Severn then provided examples of individuals with low incomes, including those with disabilities, and the cost of housing they have to face. She and Mr. Kosturos explained and discussed micro housing; and other types of possible low-income housing solutions.

Chair Blake expressed his appreciation of the work being done by all three subcommittee teams. The Board thanked everyone for their presentations and discussion.

5) Syringe Exchange Program Update – Drug User Health

Jeanie Knight, Communicable Disease and Prevention Division Director, thanked the Board for the opportunity to discuss the complex issue of the opioid epidemic and substance abuse disorders and noted how they both adversely affect not only the users but their families, friends, and neighbors. She then introduced and gave a background for Tim Candela, a Drug User Health consultant with the Washington Department of Health Office of Infectious Disease. Mr. Candela provided information on Harm Reduction; Stigma; Trans-theoretical Theory and Stages of Change; DOH Infectious disease impact and overdose; and DOH's next steps. He explained "Harm reduction is a public health philosophy and intervention that seeks to reduce the harms associated with drug use and ineffective drug policies. A basic tenet of harm reduction is that there has never been, and will never be, a drug-free society. He then explained and provided examples of Harm Reduction: Naloxone; Syringe Service Programs (SSP); Housing First Models; shifting consumption routes from injection to smoking; Law Enforcement Assisted Diversion (LEAD); and meeting people where they are at - Motivational Interviewing. Mr. Candela

discussed Washington State 2015 Injector Survey results which asked “how interested are you in getting help to cut down or quite your drug use?” He then explained Stigma is a social process which can reinforce relations of power and control and leads to social status loss and discrimination; described forms of stigma, and explained stigma blames, criminalizes, patronizes and promotes fear and isolation. Mr. Candela then discussed stigma and harm reduction; and noted stigma is the belief – discrimination is the action. He then discussed the barriers of non-judgmental healthcare which included doctor concerns and patient concerns. Mr. Candela discussed the Trans-Theoretical Model and Stages of Change which he explained is basically how we change our behavior. He discussed DOH’s Drug User health primary role for Washington State, which includes: monitoring Syringe Service Program Contracts (SSP); manage inventory of SSP supplies: needles, cottons, and cookers; serve as Subject Matter Expert; policy development and community engagement. He explained drug user health is currently a combination of two or more simultaneous epidemics/diseases to include Viral Hepatitis; Overdose; Substance Use Disorder; HIV; Syphilis; and Social Determinants to include unstable housing; interactions w/law enforcement; stigma; and access to care. Mr. Candela provided and discussed Hepatitis C risk factors for: individuals born between 1945 – 1965 (recommends testing); those that received unscreened blood before 1992; individuals HIV infected and those who ever injected drugs. He then provided statistics for Hepatitis C cases and deaths in Washington State from 2009 – 2016; shared costs incurred by counties from 2010 – 2014 as provided by Cascade Pacific Action Alliance (CPAA); and discussed ways to deal with this silent epidemic noting a cure was developed two (2) years ago. For more information on Hepatitis C: <http://www.doh.wa.gov/Portals/1/Documents/Pubs/420-159-HCVEpiProfile.pdf> Mr. Candela discussed and provided statistics for HIV in Washington State from 1990 – 2016. He then discussed drug overdoses, noting drug overdose recently surpassed car accidents as the number one cause of accidental death in the United States and Washington State; provided opioid overdose information by counties in our State; and discussed overdose prevention to include: Naloxone – educate, distribute and data collection; pharmacies; educate on poly-drug use; and discussed a five (5) year Substance Abuse and Mental Health Services Administration (SAMHSA) grant to implement overdose prevention strategies- which include naloxone distribution through SSPs. Mr. Candela then discussed and gave statistics about Syphilis, a bacterial infection spread from contact with infection site; noting although Syphilis is curable, any damage done may or may not heal; Syphilis is primarily sexually transmitted. Mr. Candela discussed DOH strategies to impact drug user health: Syringe Service Programs; Project ECHO; Housing First; Integration of SSPs and traditional medical providers; Care Coordination/Case Management/Outreach; and Medication Assisted Treatment. He explained the DOH Office of Infectious Disease works with SSPs, infectious diseases (HIV, HCV, STI), and contract monitoring of SSPs; the Office of Injury and Prevention is responsible for overdose surveillance and the Prescription Drug Monitoring Program that works with prescribers and pharmacists. He then shared insurance coverage data as provided by CPAA for Medicaid recipients by counties in our State. For more CPAA data info: <https://www.hca.wa.gov/about-hca/healthier-washington/data-dashboard>. Mr. Candela described DOH’s next steps to include: continue to reduce HIV; Engage, screen, and treat HCV; strategically saturate the community with naloxone; diversify SSP funding and access to systems; Treatment on-demand; care coordination and harm reduction. For additional information contact Tim Candela by phone: 360-236-3456 or by email: Tim.Candela@doh.wa.gov. The Board thanked Mr. Candela for the phenomenal presentation. Schelli Slaughter thanked Mr. Candela also.

6) Board of Health Members’ Health Related Activities – none

7) Director's Report

Ms. Slaughter thanked Tim Candela, Trish Gregory, Derek Harris, Nat Jackson and Jacob Bryson for attending, their presentations and all of the work they do for our community. She then reported on:

- PHSS was awarded a \$15,000 National Association of County and City Health Officials (NACCHO) Accreditation Grant
- Community Engagement, Evidence and Partnership Team (CEEP), which includes Chris Hawkins, Elisa Sparkman, Mary Ann O'Garro and other staff; is actively engaged as the southern county region lead in the Tobacco and Vape Prevention Project funded by CPAA
- PHSS is still actively involved in:
 - Opioid Response Work Group
 - Maternal Child Health Work Group
 - Chronic Disease Prevention Work Group
- Housing Program - a multi-jurisdictional Task Force, chaired by Commissioner Blake, is developing a severe weather sheltering plan for homeless and vulnerable individuals throughout Thurston County
- State sponsored toxic algae bloom testing ended November 3rd; staff continue with bloom investigations continue and advisories will be posted as needed; toxic testing will take place only in creditable situations; in 2017 staff responded to algae blooms in ten (10) Thurston County lakes; staff is evaluating the PHSS program this winter to be more effective in 2018.
- Community engagement events:
 - City of Tumwater Clean Up and Waste Drop Off Fair
 - Nisqually Tribal Health Fair
 - South Sound Food Summit
 - Special Recreation Program Events
- Immunization Clinics – several clinics were held; 325 people served with 199 immunizations given; clinics were assisted by many partners with 389 volunteer hours at multiple sites
- Department-wide Fundraiser for Puerto Rico was held raising over \$2,000; thanked Elisa Sparkman for her efforts
- Emergency Preparedness program – reminder to everyone to be prepared for any potential emergency disaster
- Vital Records – birth and death certificates are issued at the Lilly Road office; last month 287 birth certificates and 616 death certificates were issued
- Infection Disease program:
 - Continued monitoring and investigation of reported potential and confirmed cases of mumps and pertussis in school aged children at several local schools
 - Exploring strategies to prevent a Hepatitis C outbreak in homeless and vulnerable individuals in our community
 - Hepatitis A vaccine is in short supply in our state and a request has been made for more vaccine in preparation for any potential outbreak
 - Working with partners to ensure flu vaccine is available to individuals who have issues with access to care or are low income; Free clinics are being held as follows:
 - November 20th – Drexel House, 4:00 – 6:00 pm
 - November 27th – Salvation Army, 11:00 – 1:30 and 4:30 – 6:30 pm
 - Olympia Free Medical Clinic – vaccine continues to be supplied to the clinic

8) Health Officer's Report –

In Dr. Rachel Wood's absence, Ms. Slaughter reported on:

- Dr. Wood is attending a Washington State Association of Local Public Health Officials (WSALPHO) conference with 35 other health jurisdictions across the state
- Influenza update – influenza cases, or illness with influenza type symptoms, are low at this time across the state; one (1) death from influenza has been report in the state but no deaths have been reported in Thurston County; Dr. Wood reminds everyone get a flu vaccination but notes it takes two weeks for the vaccine to be effective; it is expected to be a severe influenza season this year
- Infectious Control Disease Team continues to monitor tuberculosis (TB) cases in our community
- DOH and local health jurisdictions continue to discuss how we can share services across the region for TB, immunizations and emergency preparedness

9) Public Hearing – proposed ordinance to amend Article IV of the Thurston County Sanitary Code, the regulations governing on-site sewage systems, and extend the designation of the Henderson Watershed Protection Area.

Chair Blake opened the public hearing at 5:30 pm.

Chair Bud Blake explained the hearing is to review and receive testimony on a proposed ordinance that will amend the county septic system regulations to continue the Henderson Inlet septic system management program and make other improvements recommended by community members and staff. He then explained the process that would be used to receive oral testimony; each person has three (3) timed minutes to testify; the time is monitored by a countdown clock on the wall.

Ms. Schelli Slaughter provided an introduction explaining the hearing is to consider changes to the sanitary code needed to continue the Henderson septic system management program and make improvements recommended by community members and staff. The Board of County Commissioners adopted Ordinance No.15544 on September 12, 2017. This ordinance re-enacts the Henderson Watershed Protection Area and the rates and charges necessary to fund that program. Ms. Slaughter noted the rates and charges were not the subject of this hearing.

Ms. Slaughter then provided background information: The Henderson Inlet shellfish district formed in 2001 in response to shellfish harvesting downgrades that resulted from impaired surface water quality. A septic system monitoring and maintenance program started in 2007 based on recommendations in the *Henderson Inlet Shellfish Protection District and Nisqually Reach Shellfish Protection District Consolidated Work Program*. The program is financed by rates and charges collected via the property tax statement. The program expires Dec. 31, 2017 unless re-enacted. The septic system management program has been successful.

Ms. Slaughter provided some indicators that show the success of the program.

- Septic system inventory complete confirming there are almost 6,700 septic systems in program area.
- Some 86% of 6,703 on-site sewage systems in Henderson are current with inspections and maintenance. This is the highest level of participation in the Puget Sound region.
- More than 2,350 Henderson area residents have taken classes to learn how to inspect their own systems.

- The program has helped fund 143 classes since 2007

She then provided Inspections and Operation and Maintenance (O&M) results for 2007-2015:

- There were 311 permitted repairs - these are significant repairs to the treatment/disposal component of the system or the replacement of the septic tank.
- 1486 minor repairs - minor repairs include replacing broken fittings, connecting loose pipes, or replacing a broken septic tank baffle. They do not require a permit. These conditions can cause sewage to surface and pollute surface water. Regular system monitoring and maintenance helps find minor problems and keep them from growing into big ones.

Ms. Slaughter shared water quality Improvements:

- The program has contributed to water quality improvements that have resulted in a net gain of 366 areas of commercial shellfish harvesting area in Henderson Inlet since 2005.
- The 2017 *Henderson Inlet Fecal Coliform Total Maximum Daily Load Water Quality Effectiveness Monitoring Report* states that significant declines in pollution and improvements in water quality were seen in spite of an increase in population and an increase in development within watershed.

Ms. Slaughter provided additional information on the proposed Ordinance explaining the proposed amendments to Article IV of the Thurston County Sanitary Code:

- Extend the designation of the Henderson Watershed Protection Area as a marine recovery area and area of special concern until December 31, 2027
- Revise the frequency for dye trace evaluations for high-risk on-site sewage systems in watershed protection areas. Dye tracking high-risk (shoreline) systems will shift from every 6 years to every 9 years. These changes apply to both the Henderson Inlet and Nisqually Reach watershed protection areas. Revise requirements for reinstating an operational certificate where an on-site sewage system is non-conforming for failure to maintain a valid operational certificate. These changes apply countywide. They will protect public health and water resources while reducing the burden on septic system owners and program costs.

Ms. Slaughter explained hearing notices were published in *The Olympian*, the *Tenino Independent* and the *Nisqually Valley News*; and the hearing was publicized with news releases and posts on the Public Health and Social Services Department and Thurston County websites.

Commissioner Edwards requested clarification regarding the proposed revised requirement for reinstating an operational certificate where an on-site sewage system is non-conforming for not renewing an operational certificate. Steve Petersen, Environmental Health Program Manager, explained the current reinstatement fee of \$365 would be eliminated county-wide, with minimal impact on the overall budget. Commissioner Edwards, although in favor of the eliminating the fee, expressed concern that he did not recall this being part of the proposal. Discussion ensued with Board Members, staff, County Manager Ramiro Chavez and Ms. Slaughter. Jane Mountjoy-Venning, Supervisor Water Quality Program, and Mr. Petersen provided additional clarification. Vice Chair Hutchings questioned, and Ms. Mountjoy-Venning confirmed, the accuracy of the number of septic systems in the Henderson watershed protection area. She also provided clarification on the proposed revision to the frequency for dye trace evaluations for high-risk on-site sewage systems in watershed protection areas shifting from dye tracking high-risk (shoreline) systems from every 6 years to every 9 years which applies to both the Henderson Inlet and Nisqually Reach watershed protection areas.

Oral testimony from the following citizens was received as follows:

Lawrence Sullivan – spoke in support of the Ordinance and expressed his appreciation of the effectiveness and success of the program

Chris Carlson – spoke in support of the program and expressed his appreciation of staff and the work they have put into the program

Vice Chair Hutchings moved to close the public hearing. Commissioner Edwards seconded the motion. The Board unanimously voted. The motion carried.

Vice Chair Hutchings moved to adopt the ordinance to amend Article IV of the Thurston County Sanitary Code and extend the designation of the Henderson Watershed Protection Area. Commissioner Edwards seconded the motion. The Board unanimously voted. The motion carried.

Chair Blake noted the regular Board of Health meeting to be held on December 12, 2017 has been canceled. The next regularly scheduled meeting will be January 9, 2018.

10) Adjournment – Vice Chair Hutchings moved to adjourn the Board of Health meeting of November 14, 2017. Commissioner Edwards seconded the motion. The motion carried.

BOARD OF HEALTH

Thurston County, Washington

ATTEST:



BUD BLAKE, Chair



Lydia Hodgkinson, Clerk of the Board



JOHN HUTCHINGS, Vice Chair

Date: January 9, 2018



GARY EDWARDS, Commissioner

Thurston Community Television (TCTV)

The Board of Health meetings are aired on TCTV each week on Sundays at 3:30 p.m., Mondays at 8:00 p.m., Tuesdays at 12:30 p.m., Wednesdays at 10:00 a.m., and Fridays at 6:30 a.m. and at 5:00 p.m.