

The regular meeting of the Spokane Regional Health District Board of Health held on Thursday, **July 23, 2015** was called to order by Councilmember Chuck Hafner, Chair, at 12:32 p.m. in room 140 of the Public Health Center, 1101 West College Avenue, Spokane, Washington.

**PRESENT**

Councilmember Chuck Hafner, Chair  
Commissioner Shelly O'Quinn (arrived 12:55 p.m.)  
Councilmember Jon Snyder  
Councilmember Amber Waldref (arrived at 12:47 p.m.)  
Board Member Keith Baldwin, MHA  
Board Member Susan Norwood, EdD, RN  
Board Member Bob Lutz, MD, MPH

**ABSENT**

Mayor Kevin Freeman, Vice Chair  
Commissioner Al French  
Commissioner Todd Mielke  
Councilmember Mike Fagan  
Councilmember Ed Pace

**CITIZEN INPUT**

There was no citizen input.

**CHAIR REPORT** – Councilmember Chuck Hafner

The Board of Health (BOH) Governance Committee met and discussed progress on changes the BOH was asked to consider. There will be more BOH education work and feedback from other committees to assure changes accepted are working.

BOH emergency contact cards are in member packets.

BOH and the agency's executive leadership team (ELT) were interviewed by Organizational Resources consultant, Rick Kramer, to begin work on agency leadership development and improvement.

**HEALTH OFFICER REPORT** – Torney Smith, Administrator

Organizational Development

Rick Kramer, Organizational Resources consultant, has interviewed the BOH and ELT looking to continue strategic planning work that addresses organizational development. The work will expand the knowledge of how the agency can accomplish more through the effectiveness of its staff. Dr. McCullough is the sponsor of the effort. Areas of focus will include leadership, team work, and enhanced communications. More information will follow as work moves forward.

Rabies Exposure/West Nile Virus

A seven year-old girl was recently bitten and her mom scratched by a bat. West Nile Virus has also been discovered in mosquito pools in the area. For more detailed information, Julie Awbrey, Environmental Public Health Living Environment manager, is available to speak to the BOH.

Pertussis

There has been an uptick of pertussis from last year. Pertussis is cyclical with large outbreaks every five to seven years. Since vaccines have been switched to reduce side effects, immunity has not been as long term. This is why the Tdap vaccine is in place for adolescents. Locally, there has been more activity with younger, daycare aged children over the last two months. There is an uptick with adults, as well, with lingering coughs that last 4-6 weeks. This is a concern because adults are transmitting pertussis to children.

There have been reports of Influenza B in July. There were influenza hospitalizations in June, which is unusual. Typically, hospitalizations are last reported in April or May.

#### NACCHO Annual Conference

It was reported at the National Association of County and City Health Officials (NACCHO) Annual Conference that the City of Austin, Indiana, a city of approximately 4,200, had an outbreak of 155 HIV cases within a few months. It was determined the sharing of needles of opioid addicts caused the outbreak. The conference presentation was on the political environment and public perception of HIV and opioid addiction in the country. Spokane County has a needle exchange program and an opioid treatment program that has approximately 630 people with a waiting list over 100. As a community, we have been aware and willing to address the issues. The outbreak in Indiana is costing the county approximately \$100 million.

#### Retirement of Community and Family Services (CFS) Director, Elaine Conley

Elaine Conley started at the Health District in 2007 and has been at the agency for eight years. She has demonstrated sound leadership and has been courageous and innovative with her programs to include Weaving Bright Futures (WBF) and Adverse Childhood Experiences Study (ACES). The BOH has received an invitation to attend her retirement party July 30 from 11:30am until 1:30pm.

#### **LEGISLATIVE UPDATE – Linda Graham, Health Policy Specialist and Communications Manager**

The legislative session has ended. Public health had three major priorities for the special session. Neither the regulatory nor taxing legislation passed for e-cigarette and vaping products. Health District partners throughout the state are optimistic the regulatory policy will pass next year, which will include licensing requirements for e-cigarettes, fines for sales to minors and miscellaneous provisions such as keeping products behind counters. There is less optimism for the taxing portion of the legislation. Taxing will most likely be a lower percentage than proposed this year. A little over \$7 million dollars yearly for two years was appropriated from marijuana revenues to Department of Health (DOH). DOH is currently working on plans for how the funds will be used for marijuana, tobacco, and e-cigarettes education and prevention. Efforts will include a statewide hotline and grants to local health jurisdictions (LHJs) for prevention work.

Funding was cut almost in half for the Coordinated Prevention Grants that support solid and hazardous waste efforts of LHJs. There is not a large impact expected locally because funding is based on population. It will affect LHJs located in areas with midsize populations most.

In regards to other items on the BOH legislative agenda: Rail safety regulations have been established, along with the revamping of the medical marijuana market and changes to the existing recreational marijuana market.

#### **CONSENT AGENDA**

Consists of items considered routine which are approved as a group. Any member of the board may request to remove an item from the Consent Agenda to be considered separately.

Meeting Minutes: June 25, 2015

2015 Vouchers paid: June 1-30, 2015

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Voucher Numbers:	#237124 - #237395 & EFT B&OMAY2015	\$ 651,872.51
Payroll Warrants:	#887123 - #887141 #887476 - #887481	
	Advice Numbers: #DD30321 - #DD30506	656,370.94
Payroll Warrants:	#888894 - #888919 Advice Numbers: #DD30507 - #DD30694	632,355.18
	<b>TOTAL</b>	<b>\$1,940,598.63</b>

***Motion: To approve the consent agenda including meeting minutes and vouchers as presented.***

***Motion/Second: Waldref/Snyder***

***Approved: Unanimously***

## **ACTION ITEMS**

### Resolution #15-04 – Adopting the 2016 Health District Fee Schedule – Mike Riley, Comptroller

The agency is following the 100% recovery of fees policy with most items having no changes from last year's fees. There have been a few reductions in fees. The fee schedule has been reviewed by the BOH Budget and Finance Committee and modifications were made to the wording of the resolution to allow changes to the fee schedule based upon the recommendations of the BOH Temporary Food Event (TFE) Permit Committee.

Commissioner O'Quinn added that the BOH TFE Permit Committee is close to having a recommendation for temporary food event permit fees.

Councilmember Waldref made a motion to accept the resolution as presented. Councilmember Snyder seconded the motion.

***Motion: To approve Resolution #15-04 adopting the 2016 Health District Fee Schedule.***

***Motion/Second: Waldref/Snyder***

***Approved: Unanimously***

## **REPORTS**

### Strategic Planning Update – Health Policy Specialist and Communications Manager

Under BOH Governance, the BOH is responsible for agency performance and assurance of measurable outcomes. Development and implementation of a strategic plan is central to this responsibility. Three BOH members participated in the strategic plan development. The group set goals and strategies with a total of 27 action items with three tiers of priorities focusing first on the tier one actions.

Currently, Dr. McCullough is meeting with action plan leads to assure knowledge of their roles and assuring completion. An action plan tracker has been developed for staff to track action item progress. The majority of action items in tier one are in goal one, which covers the agency work environment and organizational development mentioned previously this meeting by Torney Smith.

### Universal Developmental Screening/Community & Family Services – Colleen O'Brien, ITN/Heather Wallace

In June 2013, the Infant Toddler Network (ITN) and Dr. Kristi Rice partnered with the University of Washington and DOH to host a community asset mapping project. The intent of the event was to investigate who, in the early learning community, was conducting developmental screenings and the tools used.

Before the event, 182 providers were surveyed to determine: 1) The methods used to identify children who may have developmental concerns or delays, 2) barriers to completing developmental screening in practices 3) and knowledge of community resources to refer children with concerns or delays. Only 55% of providers surveyed used a screening tool occasionally and 27% indicated they didn't have adequate time to screen children. Only two providers used standardized screening tools routinely.

Two overarching goals were defined from the mapping project: 1) to increase community awareness of the importance of children getting early screening for developmental delays, and 2) to increase the number of children getting a screening using an evidenced-based, standardized screening tool.

In March of 2014, SRHD received a \$10,000 grant from Providence Health Care Systems to pursue the work of universal developmental screening and to develop a campaign.

After reviewing the tools available, the agency created a website that used Within Reach and ParentHelp123 information on children's development. The *Ages and Stages Questionnaire* was chosen for the developmental screening tool, which ParentHelp123 was already using. The agency worked with

ParentHelp123 to create a link from the agency's campaign material to the *Ages and Stages Questionnaire* link. With the link, ParentHelp123 collects data quarterly on utilization, which allows SRHD to follow up directly with the cases.

The ITN program developed a multi-media campaign called *Ask Now Babies Can't Wait*, which included brochures, targeted mailings to parents with children 9 months and younger, a small Facebook campaign, a web-page on the SRHD website, a paid advertising bus placard campaign, and public service announcements.

There were over 1,000 clicks to the information on the website with 17 children completing screenings. Eight of the screened children demonstrated a need that required intervention. In the second quarter, nine children were screened with three referrals for service. The last quarter, eight children were screened and four needed services. This has created a 27% increase in referrals to the ITN.

The ITN program was invited by DOH to conduct a webinar with other jurisdictions in the state. Three have requested permission to use materials for their regions. The project was also accepted as a presentation for the October 2015 WSPHA conference.

The second phase of the project goal is to have more kids screened by providers. The plan was to recruit four pediatrician providers to conduct a pilot project where all children at the nine, 18 and 30 month ages were screened and then track how that affects the referral pattern and the number of kids screened.

Dr. Kristi Rice will provide a training on how to conduct the *Ages and Stages Questionnaire* and how to implement screenings into practice. ITN will assist offices in the implementation process. ITN's goal is to replicate the process and assure all children are screened.

The first pediatrician provided 79 well child exams, completed one developmental screening, and performed two referrals that were requested by parents. The second pediatrician provided 111 well child exams, zero screenings, and several parent-requested referrals.

The legislature has approved the American Academy of Pediatrics' recommendations which requires the use of a scientifically valid screening tools, such as the *Ages and Stages Questionnaire*. Providers will receive reimbursement through Medicaid for the nine, 18 and 24-30 month screenings.

The ITN program will begin trainings with four providers in the community in August. There are three other providers who will adopt the practices. Rockwood will adopt the practice company-wide once the pilot data has been completed and ITN has a focus group that will continue reviewing the project every other month.

#### **BOARD MEMBER CHECK-IN**

##### WSU Grant/Physical Activity Survey – Councilmember Snyder

Councilmember Snyder met with Washington State University (WSU) staff who are recipients of a multi-year grant focused on the East Central neighborhood and health outcomes. He recommend WSU make connections at the Health District.

He also received a survey on physical activity, but was unable to complete the survey due to disqualification because of his household income. He requested outcome details of the survey. Kyle Unland, Health Promotion Director, commented the survey is not from the agency, but may be from DOH. Councilmember Hafner requested staff research where the survey is from and report back to Councilmember Snyder.

##### The Zone Project/Neighborhoods Matter - Councilmember Waldref

The Zone is a project in northeast Spokane that is actively working on strategies for long term changes to address poverty, economic issues, housing, and health. It is being led by the Spokane Public Schools.

Because of the Neighborhoods Matter project in the Whitman neighborhood, staff have been very engaged in *The Zone* project with the City of Spokane. She appreciated the work SRHD staff have been completing with the project.

**NEXT BOARD OF HEALTH MEETING**

The next Board of Health meeting is scheduled at 12:30 p.m. on September 24, 2015.

**ADJOURNMENT**

There being no further business before the Board, the meeting was adjourned at 1:36 p.m.

APPROVED: Charles E. Halmer  
Board Member Name and Title

Date: Sept 24, 2015

Lalana A. Strong  
Recording Secretary

