

The regular meeting of the Spokane Regional Health District Board of Health held on Thursday, **April 27, 2017** was called to order by Mayor Kevin Freeman, Chair, at 12:30 p.m. in room 140 of the Public Health Center, 1101 West College Avenue, Spokane, Washington.

**PRESENT**

Mayor Kevin Freeman, Chair  
Commissioner Josh Kerns  
Councilmember Lori Kinnear  
Councilmember Breean Beggs (departed at 1:47 p.m.)  
Councilmember Karen Stratton  
Councilmember Sam Wood  
Councilmember Mike Munch  
Board Member Chuck Hafner  
Board Member Susan Boysen, EdD, RN  
Board Member Bob Lutz, MD, MPH

**ABSENT**

Commissioner Al French  
Commissioner Shelly O'Quinn, Vice Chair

**CITIZEN INPUT**

- Jacklyn Gallion, Spokane Valley, WA – Spoke on the school exclusions that she felt compounded the pressure on son's friend that led him to suicide. She will be addressing the school as well. The Board of Health (BOH) heard testimony from parents and students about the pressures of being excluded from school. She feels the exclusions were intentional to discourage exemptions by making it as difficult as possible on non-vaccinated students.
- Carolyn Gallion, Otis Orchards, WA – Spoke on the health district's choice to exclude non-vaccinated students without considering how it affected students. The student who recently committed suicide left a note that stated it was due to his declining grades. Some students at Central Valley High School who have been excluded for months. The health district didn't heed warnings about exclusions impacting students. The health district has placed other students at risk for suicide.
- Bonita Ott, Spokane County, WA – Spoke about the presentation by Dr. Luber from the March 30, 2017 Board of Health meeting where he stated no fetal tissue was being used in vaccines. She stated the MMR insert explains that the Rubella virus was isolated in an aborted fetus and she believes Dr. Luber may have just repeated what he has been told instead of researching the evidence himself. Her son, who was allowed to make the choice to vaccinate, chose not to due to the evidence he researched. Packets of information were shared with the BOH and members were invited to a conference on vaccines on May 20.
- Josh Karnitz, Spokane Valley, WA – Spoke about the student who committed suicide while being excluded from school. He stated it is not certain how big the impact from exclusion was on the student, but it is known it did not benefit the student. The critical health objective of protecting students was not achieved since 97% of the mumps cases have been in vaccinated students. Seventy-five percent of the vaccinated infections are in a specific social group who don't exempt and therefore have unrestricted attendance at school. The group is infecting each other off school grounds in social and family exposures. This same situation is happening state and nation-wide. He stated he feels the exclusions were to harass exempting families to get them to stop using exemptions. Exempted

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students now back in school not only have to deal with trying to correct their school careers, but must also face the grief of losing a friend.

- Dena Tucker, Spokane Valley, WA – Spoke about the mumps exclusions that affected her daughter. She asked why the health officer has not been responsive to public questions. She also asked about the communication between the health officer and school superintendent. The school superintendent stated there has been no communication directly with the health officer. She also asked why non-vaccinated students are being excluded when vaccinated students are contracting and spreading the disease.
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## **CHAIR REPORT – Mayor Kevin Freeman**

### Health Officer Update

Four health officer candidates were interviewed. On May 5, 2017, the two finalists will have a second interview. After input from the hiring committee, Torney Smith will make the decision to hire. The new health officer will be part of BOH meetings after taking the position.

### Vice Chair Vacancy

Commissioner O’Quinn will relinquish her chair position in May. Nominations will take place at the next meeting. The Vice Chair is expected to take the Chair position in 2018.

### Administrator Evaluation Plan and Process

The Executive Committee of the BOH (ECBOH) is reviewing an evaluation plan and process for the administrator. The plan will be brought forward for consideration at the May BOH meeting.

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## **ADMINISTRATOR REPORT**

### Influenza/Mumps Update – Mark Springer, Epidemiologist

There is continuing influenza B activity, which is not unusual through May. There have been no institutional outbreaks at this point.

There are still 4-8 mumps cases per week. Two schools have current exclusions (Central Valley and East Valley). Those will end by the end of the week.

### Emerging Leaders in Public Health Grant – Torney Smith, Administrator

The Kresge Foundation has awarded a grant to SRHD. The grant provides an 18-month training on how to strengthen public health in communities to a new emerging leader and a health department leader. Heleen Dewey, Health Promotion Division, and Torney Smith, Administrator, begin next month with a two-day training focusing on health equity. The grant presents the opportunity for a \$125,000 grant for the community. The grant award was announced in the *Journal of Business* today.

### Done My Way Campaign – Torney Smith Administrator

The program was launched on April 6, 2017 with more than 1,000 hits to the website. The campaign shares stories of those who successfully quit smoking. The campaign is focusing on communities with higher rates of tobacco use. Campaign materials are being distributed to libraries, clinics, and community centers. Five hundred former users paid by the campaign have submitted stories on how they quit tobacco, and approximately 600 unpaid former users have submitted stories.

### Weed to Know Campaign – Torney Smith, Administrator

The campaign has received 6,900 hits to its website in a year. The *Weed to Know-Baby and You* campaign is addressing marijuana use during pregnancy. Materials will be delivered to OB/Gyn offices and to providers who work with small children. The effort is also reaching out to 9 of the 33 marijuana retailers.

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Public Health Code of Ethics – Torney Smith, Administrator

A link to the Stanford Encyclopedia of Philosophy article on public health ethics will be placed on the BOH website. The article discusses ethics and challenges of balancing population risk with personal risk. Board members were encouraged to review the article.

Agency Chiller Replacement – Torney Smith, Administrator

A contract has been awarded to Johnson Controls, who was the lowest bidder meeting the request for qualifications (RFQ) to replace the agency chiller system. Work will start in the next several weeks and is expected to be completed in September. The unit will sit behind the building and will require the removal of two trees.

Violence Report Delay – Torney Smith, Administrator

Agency staff have met with Sherriff Ozzie Knezovich about data in the report. Data appeared to show certain criminal activity accelerated over the last ten years; however, looking at data over the last twenty years showed that activity decreased with Crime Check. The report is now reflecting data over the last twenty years. Councilmember Kinnear requested a comparison of city and county police department data.

Quality of Life Survey – Torney Smith, Administrator

Partnering with Spokane City and County, Empire Health Foundation, and Providence, the health district has completed a Quality of Life survey. The report is available online at: [www.qol.spokane.org](http://www.qol.spokane.org). The survey had a 28% survey response with 3,200 surveys being returned. Of those who say they have good health, 68% report a good quality of life. Of those who say they are in poor health, 31% report they have a good quality of life. Data shows only 47% of Pacific Islanders, Alaska natives and 20% of African Americans report quality of life as excellent or very good. The survey will be completed again this year and every two years thereafter.

**LEGISLATIVE UPDATE** – Linda Graham, Health Policy Specialist

Regular session ended April 3 and the special session began the next day. The goal of the special session is to pass the operating budget.

The House version of the Foundational Public Health Services (FPHS) bill has stalled in the Ways and Means Committee. There is \$40 million dollars in the House budget, which public health will pursue instead of the \$60 million previously requested.

Accompanying the Tobacco 21 bill is a tax on vaping products. It is unlikely that the Tobacco 21 bill will pass unless the revenue is offset from the tax on the vaping products. While these bills didn't make it out of the House, they are still alive because of impacts to the state budget.

HB 1427 Opioids Treatment Programs now has provisions from other bills included (prescription restriction provisions and the prescription monitoring program and data access.) HB1411 Dental licensure and residency program is now with the Governor for signature. SB5540 Oral Health Pilot Program may be in play with the special session. SB5282 Distracted Driving has passed. It is now with the Governor for signature.

Councilmember Breean Beggs asked that bills that are still alive be placed on the top of the document handout for ease of reading.

**COMPTROLLER REPORT – Mike Riley, Comptroller**

The Prophix budgeting software training started last week. As of yesterday, the software is pulling data from the agency’s Great Plains financial and payroll systems and NovaTime timekeeping systems. Records from 2013 to present have been loaded.

The lead auditor arrived April 3 and was sent to another audit. The auditors have rescheduled and will start May 1 for the first half of the audit and may return in late July for the second half of the audit. The exit report is expected in late summer.

**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: April 27, 2017  
2017 Vouchers paid: April 1-30, 2017

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Voucher Numbers:	#242364 - #242590 and EFT B&OFeb2017	\$ 719,260.00
Payroll Warrants:	#960035- #960042	
	Advice Numbers: #DD38715 - #DD38924	\$719,755.23
Payroll Warrants:	#961539 - #961557 #961796 - #961804	
	Advice Numbers: #DD38925- #DD39134	\$705,841.54
	<b>TOTAL</b>	<b>\$2,144,856.77</b>

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

***Motion/Second: Hafner/Beggs***

***Approved: Unanimously***

**ACTION ITEMS**

Resolution #17-03 - Adopting the Board of Health Communication Policy

The policy states that BOH members will not text agency business between themselves or SRHD staff. Emails sent between members will be captured by each jurisdiction’s system and a system for email retention will be developed for appointed board members. Capturing of voice calls is not required by state law.

***Motion: To approve Resolution #17-03 adopting the Board of Health Communication Policy.***

***Motion/Second: Kinnear/Boysen***

***Approved: Unanimously***

Resolution #17-04 Approving of SRHD Title VI (Non-Discrimination) Plan and Authorizing the Board of Health Chair to Sign Title VI (Non-Discrimination) Certificate

Agencies that receive federal funds as a recipient or sub-recipient must have in place the Civil Rights Act Title VI requirements. As part of the requirements, a Title VI (Non-Discrimination) Plan must be created.

***Motion: To approve Resolution #17-04 Approving of the SRHD Title VI (Non-Discrimination) Plan and Authorizing the Board of Health Chair to Sign Title VI (Non-Discrimination) Certificate.***

***Motion/Second: Hafner/Wood***

***Approved: Unanimously***

## **REPORTS**

What are “We” Doing About the Opioid Epidemic? -- Julie Albright, Treatment Services Program Manager  
Dr. Layton was not available for the report due to an emergency. In 2008, the Treatment Services program had 256 patients with 156 using Medicaid. Today, the program has 920 patients with 750 on Medicaid. The program opens at 5:30 a.m. for clients who work and 8:00 a.m. for other clients. There are two medications used: methadone and buprenorphine. Clients are required to receive substance abuse counseling. All counselors have bachelors and master’s degrees and carry a chemical dependency professional (CDP) license.

To address the epidemic, psychiatry services are being offered and 2.5 FTE ARNP’s, 13 counselors and dispensary assistants are on staff. The program is regulated by the DEA, Spokane County, the State of Washington, the Pharmacy Board and the federal government.

Any clients that receive medication from their physician or the hospital are required to report it to the program. The program assures clients are taking their prescriptions as prescribed and that there are not conflicts in medicines prescribed. To assure medications are not dispersed in the community, the program uses a red, cherry-flavored liquid. Methadone received from physicians are received in a pill form. Deaths from methadone have been reported in the pill form, but none from the liquid form.

Clients allowed to take carries are given doses in sealed bottles. These clients are on a call-back system that requires them to bring all bottles of medication, plus medications received in the community and provide a urinalysis if called back. The seals on the bottles must not be opened.

The Treatment Services program is working with the jail system. Any pregnant woman in the jail system receives an assessment and intake. Any patients on the program that go to jail also receive dosing. Program staff also go to the hospitals to dose and provide intakes.

Despite the Spokesman Review article today, there have been 85 opioid deaths in 2015 and 104 in 2016. The Surgeon General reports that 40% of individuals with a substance abuse disorder also have a mental health condition. Fewer than half receive treatment for either disorder. The program will be getting its mental health license to address clients that have mental health and opioid issues.

The average age of clients on the program in 2006 was forty. Currently, the program typically has people in their early 20’s and 30’s. Clients usually start with pain medication and then go to heroin. Deaths from pain medication are going down, but heroin deaths are increasing.

Some clients will be able to taper down and off methadone, while others will stay on the medication for the rest of their life. For those who taper down and off, the programs offers a relapse prevention plan. Methadone is a managed addiction that prevents people from receiving a high from the drug and allows a functional life for clients.

## **EXECUTIVE SESSION**

The BOH adjourned at 1:35 p.m. for 15 minutes for an executive session pursuant to RCW §42.30.110(1)(i). The Chair requested Michelle Fossum, Torney Smith, and Ray Byrne remain for the session.

## **MEETING RECONVENED**

The meeting reconvened at 1:50 p.m. No action was taken.

**BOARD MEMBER CHECK IN**

There was no Board check-in.

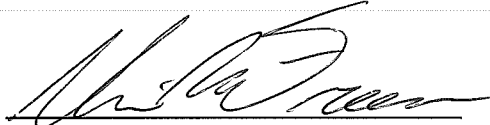
**NEXT BOARD OF HEALTH MEETING**

The next Board of Health meeting is scheduled at 12:30 p.m. on May 25, 2017.


**ADJOURNMENT**

There being no further business before the Board, the meeting was adjourned at 1:53 p.m.

APPROVED:

  
Board Member Name and Title *Mayor*

Date: *5/25/17*

  
Recording Secretary