



WHATCOM COUNTY PUBLIC HEALTH ADVISORY BOARD MEETING MINUTES

JULY 7, 2022

Present: Steve Bennett (Chair), Barry Buchanan, Edna Revey, Leah Wainman, Les Seelye, Lindsey Karas, Shamika Brooks, Sterling Chick
Absent: Therese Horan

Topic	Discussion/Outcome
Call to order	Shamika presented acknowledgments. Roll call of Public Health Advisory Board (PHAB) Members.
Approve Minutes	Les moved that the minutes from the June meeting be approved as presented, Barry seconded the motion, and the motion passed. Ayes: 8, Nays: 0, Abstain: 0
Public Comment	None.
Health Board/County Council Update	Barry presented an update on Health Board and County Council actions: <ul style="list-style-type: none"> • Last month the County Council passed a resolution to get the Child and Family Well Being fund initiative on the ballot in November. The team now has fully developed their campaign plan and have a good team established for this work. • The Stakeholder Advisory Committee (SAC) that is performing a needs assessment for a new correctional facility has their fourth meeting next week. Today there is a special SAC meeting with the behavioral health team of the Incarceration Prevention and Reduction Task Force. • There is a glitch in the EMS levy that we want to get to the voters in November. We are still going back and forth on levy rates and hope to iron that out next Tuesday.
Health Director/Health Officer Update	<p>Dr. Thompson and Dr. Harley gave updates on the following:</p> <ul style="list-style-type: none"> • Cases of monkeypox have been increasing in King County (up to nine cases), with at least one King County case presumed to be local transmission. • COVID update: we are seeing increases in the BA.4 and BA.5 variants. For the most part, in our area that is being balanced by a decrease in other cases, so we aren't seeing significant increases in cases, hospitalizations, or deaths in Whatcom County. • We are helping to screen Ukrainian humanitarian parolees for TB and make sure their vaccinations are up to date as part of their entry requirements. <p>Erika gave updates on the following:</p> <ul style="list-style-type: none"> • We are deep into work on the biennium budget, which you will be briefed on later in this meeting. We have received additional funds from the state and are working on how we would like to allocate those funds and what positions are a priority to add. • We are currently developing our strategic plan for the next five years. I'm hoping that the majority of the August 2 joint Health Board/PHAB meeting can be used getting feedback on the strategic plan draft. • To make way for the Waystation project which will be at our current State Street facility, all Health Department staff will be moving out of that location. In August and September many staff will be moving offices, so please be patient with us as we respond to your requests.

	<p>Discussion and questions:</p> <ul style="list-style-type: none"> • Should we be worried about monkeypox? What should we be looking for? Monkeypox is a pox virus similar to smallpox. It's normally endemic in a few places in Central and Western Africa, occasionally spreading to other parts of the world through travelers or exotic pets. There is an outbreak right now of several thousand cases in Europe, and travelers have brought it to the U.S. Most of these cases are spreading through close contact, specifically men who have sex with men. The current outbreak has not resulted in any international deaths, though previous outbreaks have had mortality as high as one to ten percent. With this outbreak, cases seem to be mild, with people seeing a few lesions, sometimes a fever and swollen lymph nodes, as the primary symptoms. The risk of community transmission seems to be fairly low in the U.S. right now, although that's different from what's being seen in Europe. The federal government has a supply of vaccine that is currently being distributed to the states based on the number of cases in each state. Washington State will receive several hundred doses of the vaccine which will be used mostly for post-exposure prophylaxis or potentially for occupational exposure. There are also antivirals available to treat monkeypox. • Regarding the TB work being done with refugees, what informational resources are available for these communities? I don't know of a good single source of resources, but during visits, our nurses are helping navigate applying for health insurance, connecting with providers, etc. The main refugee clinic in our area is in Snohomish County, so they may have additional resources available. Also, in Whatcom County, World Relief organizes most the work with refugee populations and are a good source of information. • Regarding health department staff moving buildings – what kind of communication is being done with the public about where to find health department services? We don't expect this to be a big issue since the State Street building that is being vacated has been mainly closed to the public since COVID, with a couple exceptions – the TB program and the Syringe Services Program. There are plans to communicate with groups that use those services, but there shouldn't be any other public impact. Environmental health and vital records, which are the services most heavily accessed in person at the health department will continue to be available at the Girard Street office.
<p>Health Department biennium budget</p>	<p>Kathleen Roy gave a presentation on the Health Department biennium budget, including an overview of the process, revenue, expenditures, and priorities. The slide presentation is appended to the minutes.</p> <p>Discussion included:</p> <ul style="list-style-type: none"> • Thanks for a great high-level overview. • Childcare is a new thing for the Health Department to be involved with. What are the plans for that? We have two positions that were funded through ARPA. One position is a Child and Family Well Being Program Manager and the other is an Early Learning and Care Program Specialist. Interviews are scheduled tomorrow for the program specialist position. The other position is still in development. The grant for child care centers will also be administered by the Health Department who will be contracting with the Opportunity Council. We hope to have a contract in place within a month or so. Those two child care positions are included in the eleven FTEs mentioned as part of FPHS funding. • You mentioned funds being used to help the department recover from the COVID response – what does that look like? Some of that is just catching up. For instance, the support the administrative and clerical staff give to the department was so focused on COVID response for so long that there is lots of catch up to do on non-COVID work. • With your building moves and limited space, how will you accommodate the increased staffing? We do have agreements in place with staff on which days they will be in the office and which days they will work from home, on a position by position basis, depending on particular job functions. We will be doubling up staff in offices. For staff who work primarily remote, there will be drop in work spaces available when they come in to the office to work with colleagues. • What was the budget like for communicable disease pre-COVID? I think it was around two million. We still have significant funding coming from the state for COVID/communicable disease for at least the next couple years. That will likely decrease significantly in 2024-2025. Though ARPA funding will wind down,

	<p>Foundational Public Health funding for communicable disease is an ongoing funding source and that has significantly increased.</p>
<p>PHAB bylaw changes, proposed Health Board/PHAB meeting structure</p>	<p>Erika gave an overview of the bylaw changes that were in the agenda packet. The changes primarily reflect the new state law requirements for PHAB that we've been discussing.</p> <p>Discussion centered on:</p> <ul style="list-style-type: none"> • I'm happy to see the stipend and the virtual option, as that will open up who might be able to participate. • Has there been additional discussion on adding PHAB to Health Board meetings? Yes, the Health Board meetings will all be joint PHAB/Health Board meetings. • For 2023, we may want to look at whether the Health Board would be willing to move their meetings to a time that is more conducive to those on PHAB with other job responsibilities during weekdays. • The plan right now is for joint Health Board/PHAB meetings to happen four times a year for an hour and a half. • The redline version of the bylaws is helpful to be able to see the exact changes in language. • I like the remote meeting option. • How is it going recruiting new members from other boards? Steve and Leah have been attending meetings of the other boards/committees to explain why PHAB is expanding and ask if they have a member who could serve on PHAB. The committees have all been receptive to the idea so far and we are going through the application/nomination process for adding some of those new members. • I have some concerns that we could have trouble keeping people committed to serving with the increase in work and number of meetings. • I'm happy to see the remote option. That allows me to be engaged and involved in meetings. • Will the Health Board joint meetings also have a remote option? The technology is in place in Council Chambers, so we request that they make that option available. • The joint meeting will be an official PHAB meeting requiring a quorum of PHAB members. • A question came up about clarifying the new bylaw rules for quorum. The new bylaws define quorum as a majority of members (half or greater). • <p>Sterling moved that the new bylaws be accepted, Les seconded the motion, and the motion passed. Ayes: 7, Nays: 0, Abstain: 0 (Steve left prior to this vote)</p>
<p>BERK Consulting after action report on COVID-19 response</p>	<p>Erika pointed out where to find the recommendations in the draft of the after action report and noted the high level categories that the recommendations fall in. It was also noted that one of the recommendations is that the Health Board change their composition which aligns with PHAB's previous recommendation.</p> <p>Discussion centered on:</p> <ul style="list-style-type: none"> • While there are things we can improve on and lessons to learn, the report shows that the county did a good job with the response. Following the recommendations will help us improve in the future. • PHAB is going through all these changes in response to new legislation. Seeing recommendation number nine in this report recommending changes to the Health Board composition, what should our next steps be? • The Health Board hasn't met since the report was released, so it's unclear what they will do next. • There was a clarification that the Health Board is made up of the same members as the County Council. • At the council meeting where the report was first discussed, former council member Rud Browne asked that some feedback he had be considered for the report. A question was raised about whether that feedback was incorporated into what was distributed to PHAB. The County Council shared the feedback with BERK, but left it up to them how it might be incorporated into the final report. That feedback was not part of the draft in the PHAB packet. <p>Barry moved that PHAB recommend that the Council adopt all recommendations in the BERK report, Sterling seconded the motion, and the motion passed. Ayes: 6, Nays: 0, Abstain: 0 (Steve and Les left prior to this vote)</p>

	Staff will draft a memo to Council for Steve to review and send.
Meeting evaluation	<ul style="list-style-type: none"> • Thanks to Leah for jumping in and doing a great job running the meeting, and thanks to Sterling for getting the meeting started. • I'm curious to hear where things will go with changes to the Health Board and PHAB, now that the consultant has recommended the Health Board change their composition. • I really appreciate that we can continue to meet virtually. That will help with regular attendance. • The BERK report was really useful to read through, to learn what worked and what could be improved upon. • I'm looking forward to learning more about the how to work with the Health Department and with the Council.
Adjourn	8:30 am
<i>Next Meeting</i>	Next regular meeting August 2 – Joint meeting with Health Board