

The regular meeting of the Spokane Regional Health District Board of Health held on Thursday, March 24, 2011 was called to order by Councilmember Crump, Chair, at 12:30 p.m. in room 140 of the Public Health Center, 1101 West College Avenue, Spokane, Washington.

PRESENT

Commissioner Mark Richard (arrived 12:37 p.m.)
Councilmember Steve Corker (arrived 12:38 p.m.)
Mayor Mary Verner, Vice Chair (arrived 12:47 p.m., left 2:26 p.m.)
Mayor Tom Towey
Councilmember David Crump, Chair
Board Member Michael Fisk, DC (arrived 12:40 p.m.)
Board Member Bob Lutz, MD, MPH
Board Member Susan Norwood, EdD, RN

ABSENT

Commissioner Al French
Councilmember Bill Gothmann
Commissioner Todd Mielke
Councilmember Amber Waldref

CITIZEN INPUT

Rose Waldram, Greenacres, WA spoke on fluorine and fluorides. She reported fluorides are responsible for Alzheimer's, diabetes, Parkinson's and SIDS. A handout on the subject was given to each Board Member.

CHAIR REPORT – Councilmember Crump

Map Your Neighborhood Publication

The Emergency Management Division of Washington State has released a publication entitled, "Map Your Neighborhood" (MYN). The Spokane Regional Health District is aligned and working with crisis response on these matters. The Liberty Lake Fire Department is reporting the current 72 hour emergency kit needs to be adjusted to a 2 week emergency kit. In an emergency as large as the recent events, it may take 2 weeks for responders to reach neighborhoods with cul-de-sacs and side streets.

Awards & Recognition Ceremony

The Spokane Regional Health District's 20th Annual Awards & Recognition Ceremony will be held April 14th. The event will last from 8:30 a.m. until 10:00 a.m. An invitation was sent to all Board Members.

SRHD Agency Meetings

A list of all Health District agency meetings is included in the packet. Board Members are encouraged to attend at least one meeting other than a Board of Health meeting. It would be beneficial for staff to know Board Members better and for Board Members to learn more about the agency.

City of Liberty Lake Electronic Cigarette Ordinance

An e-cigarette ordinance is on the next Liberty Lake City Council meeting agenda. Councilmember Crump appreciates the help of the SRHD attorney who has been working with the City of Liberty Lake's attorney. Councilmember Crump is hopeful that other small cities will pass similar ordinances in the future.

HEALTH OFFICER REPORT – Joel McCullough, MD, MPH, MS

Medical Marijuana Dispensaries

According to a recent article in the Pacific Northwest Inlander, Spokane has approximately 34 medical marijuana dispensaries compared to Seattle, which has 20. In 1998, voters approved Initiative 692 Medical Use of Marijuana Act which created an affirmative defense to violation of state laws related to marijuana if citizens used marijuana for medical purposes. Washington is 1 of 15 states that have passed legislation allowing the use of medical marijuana.

Under I-692, patients had to be diagnosed with terminal or debilitating medical condition. The list of qualifying conditions include: cancer, HIV, multiple sclerosis, intractable pain, glaucoma, Crohn's disease or other diseases approved by the Medical Quality Assurance Commission. Individuals had to be under a doctor's care and the prescribing doctor had to provide the patient with a list of risks and benefits of medical marijuana use. The law did not prevent citizens from being arrested, but allowed them to assert an affirmative defense at trial with proof of compliance with the state medical marijuana law.

The law was silent as it relates to marijuana dispensaries. In the current legislative session, there have been 3 bills related to the use of medical marijuana. Only Bill 5073 Washington State Medical Use of Cannabis Act is surviving at this point. There are 3 major components to this bill. The first establishes a regulatory system for producing, possessing and dispensing cannabis intended for medical use. The second calls for the protection from criminal liability and arrest of qualifying patients, health care professionals and licensed producers, processors and dispensaries. The third component establishes a voluntary registry in which qualifying patients and providers may enroll whereby receiving arrest protections.

This bill has passed the Senate and House Healthcare and Wellness Committee. There is an amendment to the bill that requires dispensaries to be licensed and approved by counties and cities in which they are located. If this bill passes, the Department of Health will write licensing rules and license dispensaries.

The American Medical Association (AMA) has broken with its long held practice of being opposed to medical marijuana use. The AMA is recommending that the medical marijuana status change from a Schedule 1 drug. Schedule 1 is the strictest category placed on drugs whereby removing the drug from legal use. These are generally drugs that have a high abuse potential, no current medical use, and lack of accepted safety for its use. The Health District is currently monitoring the progress of the proposed Washington State Bill.

Opioid Treatment Program

Earlier this month, the Board of County Commissioners approved an increase of the Opioid Treatment Programs patient capacity from 425 to 500. This increase only includes the private pay patients and will not affect patients who are on the Title 19 waiting list, which can be as long as a year.

The Title 19 waiting list is substantial and its priorities are based upon conditions and status of clients, such as those who are pregnant. There is not a lot of movement with clients in the program because treatment is usually long term or a lifelong treatment.

Washington State Standards Review

The Health District received outstanding reviews by the Washington State Standards Review Team. The official report will be received in approximately 3 weeks. In the near future, there will be accreditation for public health agencies. The agency hopes to be one of the first in the nation to be accredited.

Lab Update

Karen Crouse, Lab and Opioid Treatment Program Division Director, is retiring at the end of this month with 33 years of service with the Health District. The agency thanks her for her dedication to public health and the community.

Karen's position will not be replaced. Instead, the Lab and Opioid Treatment Programs have been restructured. Middle management in the Opioid Treatment Program will be increased to accommodate the current capacity and foreseen future capacity increases. Lab duties will be shifted to increase the use of intermittent staff and there will be an increase in middle management staff duties.

Earthquake and Tsunami in Japan

The death toll for the earthquake and tsunami in Japan was last reported at 8,000 with 11,000 still missing. There has been concern in Washington State of radiation exposure from the damaged nuclear plants. Washington State and other Western States have been concerned over the transport of radioactive materials to the continental U.S. Citizens have purchased potassium iodide hoping to be protected from radiation exposure.

The Health District, along with the Washington Department of Health and federal agencies, has tried to assure citizens that radiation exposure in Spokane will not reach levels of concern. The EPA has 124 active radiation monitors in the United States showing mostly background levels of radiation. The EPA monitors air for beta and gamma radiation including types of isotopes that may be released from a nuclear reactor. Radiation from Japan has been detected in California, Washington and Hawaii. These levels are below levels of concern.

The FDA is monitoring the safety of food. All milk products and vegetables manufactured in the four Japanese prefectures around the damaged nuclear plant have been detained upon entry to the United States and will not be allowed to enter the U.S. food supply unless radiation free. The Health District will continue to work with the Department of Health and federal authorities to monitor the radiation levels from Japan.

Budget 2010 report

The 2010 end-of-year finance report will be postponed until next month because the agency has not received all the information needed to give the report.

CONSENT AGENDA

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

Meeting Minutes February 24, 2011

Vouchers 2011 A/P paid February 1-28, 2010 and February 1-28, 2011

APPROVAL OF MINUTES

Motion: To approve the February 24, 2011 Board of Health meeting minutes.

Motion/Second: Corker/ Verner

Approved: Unanimously

Commissioner Richard requested a change to the minutes without an amendment to the motion. The recording secretary will remove Commissioner Mielke’s name as being present from the minutes and keep Commissioner Mielke’s name recorded as being absent from the meeting.

APPROVAL OF VOUCHERS

Vouchers audited and certified by the auditing officer as required by RCW 42.24.080, payroll warrants, and those other claims as required by RCW 42.24.090, have been recorded on a listing which has been made available to the Board. Time frame of claims: February 1-28, 2010 and February 1-28, 2011. The Board, in a vote as moved by Councilmember Corker and seconded by Mayor Verner, did approve for payment those vouchers included in the following list and further described in the total amount of \$28,374.47 and \$1,821,783.38.

Voucher Numbers:	#204263	-	#204277	\$28,374.47
			TOTAL	\$28,374.47
Voucher Numbers:	#210001	-	#B&O JAN11	\$521,521.37
Payroll Warrants:	#700306	-	#700337	670,710.44
Advice Numbers	#DD10237	-	#DD10443	
Payroll Warrants:	#701834	-	#701868	629,551.57
Advice Numbers:	#DD10444	-	#DD10646	
			TOTAL	\$1,821,783.38

Motion: To approve for payment those vouchers included in the above list and further described in the total amount of \$28,374.47 and \$1,821,783.38.

Motion/Second: Corker/Verner

Approved: Unanimously

ACTION ITEMS

Food Program Expiring Permit Notification Process – Ray Byrne

Ray Byrne, Food Program Manager in the Environmental Public Health Division, along with Joy Terry, Co-Chair of the Food Advisory Committee and co-owner of Spokane Bakery Supply, requested the Board of Health review the Food Program's expiring permit notification process. Dr. McCullough had presented the request before the Executive Committee of the Board of Health where the committee asked for the process to be presented before the Board of Health at a regular meeting.

The current process includes notifying food establishments 6 weeks prior to permit expiration by letter and with a prefilled application form. All expiration dates for permits are the last day of the month. The Food Program waits for late renewals for one week from the deadline honoring postmarked dates on envelopes. A certified letter is then sent notifying the establishment that they have failed to renew their permit and that the permit renewal date has been administratively extended by 21 days. On the 19th day, the receptionist notifies food inspectors of food establishments that have not paid. Food inspectors call the establishments to inform them of the deadline for renewal. If the food establishment does not renew its permit, food inspectors notify the establishment that they are operating without a valid permit that they need to close and make payment.

The Food Advisory Committee has recommended a new process for permit renewals. The new process includes a letter mailed to vendors 6 weeks before permit expiration. On the last day of the month, the permit would expire. The permits will not be administratively extended, but the postmarked date would be honored. The program will wait 2 days past the renewal date for mail to arrive then will notify food establishments to explain their permit has expired; they need to close their establishment and proceed to the Health District to renew the permit.

The extension and certified letter will be eliminated. This will reduce program costs and staff time. Without the 21 day extension, the account will go automatically into default and be subject to Operating without a Valid Permit fees. In 2010, the program issued approximately 2400 permits and 202 certified letters; this meant 8% of food establishments required a second notice. Without the tracking, the receptionist and food inspectors can consolidate time that can be used for inspections or higher risk activities.

The Food Advisory Committee, which represents most areas of Spokane's food establishments, has unanimously approved this process. The president of the Washington Restaurant Association, Spokane Chapter, who is a member of the Food Advisory Committee, has endorsed the process as well.

Discussion following the presentation included:

- Approximately 80% of the food establishments requiring the second notice letter are the same vendors each year.
- Food establishments are not currently notified that 21 day extension is available, but a letter will accompany this year's letters notifying food establishments of the change to the permit process removing the 21 day extension.

- Initial notices for permit renewal are not sent by certified mail. Only the second letter to establishments is sent by certified mail.
- A special yellow notice will be mailed to all food establishments for 1 full year and then an explanation of the renewal policy will be added to the renewal letter every year thereafter. The Food Advisory Committee and Restaurant Association's unanimous endorsement will be added to the policy change notifications. Plus, a comment regarding the decision being made in fairness to all food establishments renewing permits.
- The \$1100 savings can be used to offset increases in the future.

Motion: To approve the expiring permit notification process as proposed by Spokane Regional Health District staff.

Motion/Second: Verner/Corker

Approved: Unanimously

REPORTS

BOH Annual Evaluation- Liz Wallace

Liz Wallace, Epidemiologist in the Disease Prevention and Response Division, presented the results of the Board of Health Annual Logic Model data review. An electronic version is available upon request. Data for the presentation is based on the Board of Health logic model data collected from meeting evaluations and the annual BOH leadership and governance surveys. Meeting evaluations were started during the last half of 2010; therefore 2010 data is only for 6 months. The information in this presentation is to assist Board Members in drawing conclusions from its logic model results on lessons learned and deciding on next steps for 2011.

The social ecological model presented at a previous meeting was used to assess whether public health is being addressed at the individual, interpersonal, organizational, community and public policy levels. The logic model data review reported activity on each level; therefore, the Board is addressing each level.

Individual Level Highlights:

- An orientation manual was created by Torney Smith, Board Members Lutz and Norwood and presented to all Board members.
- Compared to 2009, 11 of 14 knowledge gaps were addressed and improved. All of the top 3 gaps were addressed and resolved.
- Knowledge regarding public health concerns was improved by 9.1%.
- Leadership and governance knowledge based on data improved by 6.7%
- Board of Health Members felt education they received met acceptable standards.

Interpersonal Level Highlights:

- In the last 6 months of 2010, there were 15 contacts with legislators.

Organizational Level Highlights

- Three resolutions impacting public health policy in the community were passed in 2010. In 2008, two policies were passed and in 2009, one policy was passed.

Community Level Highlights:

- The Board of Health formed 20 new partnerships in the last 6 months of 2010 and there were at least 7 events used to promote the Health District's mission, vision and values.

Public Policy Level Highlights

- There were .45 resolutions per Board Member promoted at local jurisdictions or place of work and .58 topics per Board Members introduced onto local agendas resulting in 1 ordinance passed in 2010.

Discussion regarding highlights:

- Commissioner Richard recommended adding to the survey a means to evaluate knowledge gained by Board Members.
- Councilmember Crump liked the Board Orientation Manual and the opportunities for new and current members to learn from that particular education tool. It should be kept current and updated.
- Even though it scored at an acceptable level, Councilmember Crump would also like to address length of presentations and gain an understanding to why it scored the lowest.
- Councilmember Crump understood that Board Member Lutz had many contacts with legislators that may not have been counted. The definition of contacts with legislators could be defined to clarify if contacts, such as, reporting to city councils would be considered legislative contact.
- Commissioner Richard suggested the purchase of broadcast email software or the development of a means to contact all Board Members with prefilled call-to-action forms on pending legislative topics that concern public health. Board Members could then contact legislators on the pending legislative bills.
- Mayor Verner has learned that comprehensive messages to state and legislative bodies and alerting representatives to all legislative action that affects public health, even if it is not directly a part of Department of Health or local health, are very important.
- Board Member Lutz shared his experience how other counties have staff members that tracks pertinent legislation and update Board Members as needed. In addition, an informational website for the Board of Health is being created, which could be a venue for Board Members to receive legislative updates.
- Commissioner Richard stated the collaborative leadership between staff, Dr. McCullough and Board Members has led to a positive effective on public health policy.
- Councilmember Crump stated the Board, as an entity, has been more comfortable making public statement and direction. He would like to see that continue.
- Board Member Fisk believes it has become a priority of the board to recognize health issues, to bring them forward as resolutions, and then take them to the proper jurisdictions to be implemented, which is exactly what the Board should be doing.
- Councilmember Corker stated a recent project, almost completed, is a series of community organizations for outreach. They are classified in 3 categories: 1) those that can advance public awareness of public health and the role it plays, 2) collaborative organizations that can improve communications about public health's function and goals, 3) and the network of key community leaders who are able to influence legislative decisions.

- Councilmember Crump would like to continue measuring the Board's partner engagement and building. He commented he has witnessed higher positive feedback from staff and partners on vital networking in the last two years.
- There are numerous items that would increase the outcome of the survey if actions taken in local jurisdictions were reported to the Board by each jurisdiction. Mayor Verner stated she will discuss this issue with Councilmembers Corker and Waldref.
- Dr. Fisk commented he supports continued work with NALBOH to influence public health policy not only in our community, but across the state as well. Collaborating with NALBOH would create a united voice to the legislators.

Community Guide – Board Member Lutz

In September of last year, Board Member Lutz was asked by NALBOH to be 1 of 3 individuals across the country to serve as consultants to introduce Boards of Health to the Community Guide and then to look at potential utility. The Community Guide is one source for evidence based approaches. It was created by a CDC commissioned task force to look at emerging issues and evidence based practices that exist. When considering practices, the task force also considers the economic impacts, identifies research gaps, informational opportunities, behavioral and social interventions, programming, environmental policies and health systems.

Board Member Lutz gave the Board an overview of the Community Guide website. There are 17 topic areas and 220 recommendations with an anticipated 700+ to be added in the upcoming years. The information can be utilized for policies, practices, programs and services funding, and economic reviews.

Discussion following the presentation:

- Commissioner Richard shared his concern with the lack of data in the Community Guide on exposure to tobacco smoke as it relates to public housing and the e-cigarette issue. Neither is discussed on the website. Without data on current issues, agencies would have to forge ahead without the data or wait for the data to assure evidence based practices are used. Board Member Lutz stated this is one of the challenges when looking at evidence based approaches. Evidence is one means to look for ways to affect change, but where it doesn't exist doesn't mean it should limit decisions.
- Mayor Verner commented that the Empire Health Foundation and Health Sciences and Services Authority are looking for opportunities to fund research based projects. There may be opportunity for the community in Spokane to partner with the Community Guide to be a definitive research site. When new policy is developed within the community, the process could have a research component to measure its impact and report to the CDC. Board Member Lutz will ask the CDC if opportunities exist for Spokane, since they are continually looking for partners.

BOARD MEMBER CONCERNS

Presentation Appreciation-Mayor Towey

Mayor Towey expressed his appreciation for the presentations at today's meeting. Being a new member to the Board, it has given him a better understanding and knowledge of public health issues and Board of Health positions.

Medical Marijuana Presentation – Councilmember Corker

Councilmember Corker expressed his appreciation for Dr. McCullough's report on medical marijuana. Information on this issue is very important especially to elected officials trying to balance the medical and legal issues by understanding legitimate medical possibilities versus exploitation of those possibilities. The issue of public health should dominate this discussion and not the issue of generating tax revenue inadvertently through public policy. This issue can have serious consequences on the mental and physical health of citizens elected officials serve.

Neighborhoods Matter Program Staff Appreciation – Mayor Verner

Mayor Verner apologized for running late and missing Dr. McCullough's presentation. She also commended staff on an event she attended at the East Central Neighborhood Library where Neighborhoods Matter program information was presented.

Board of Health Webpage – Board Member Lutz

Board Member Lutz is working with agency staff to complete a Board of Health web page by May 1st. This site will provide valuable information to the Board. He requested Board Members complete their profile biographies and to send it, along with their picture, to him for posting on the webpage.

Board Members were reminded to complete the Community Guide Post Presentation Survey and return those to Board Member Lutz.

Gonzaga Collaboration – Board Member Norwood

Board Member Norwood acknowledged staff for providing Gonzaga nursing students with an exceptional site for clinical experience. The Health District is the site of choice for nursing students. She is thankful for ways to expand collaboration.

Opioid Treatment Program and Food Program Report – Board Member Fisk

Board Member Fisk questioned the Health Officer on the financial ramifications of the 75 slot increase in the Opioid Treatment Program. Dr. McCullough stated the charge per patient will cover the cost of operating the program.

Board Member Fisk commended staff of the Health District for collaborating with local businesses on policy changes which affect them. He also appreciates Health District staff approaching the Board of Health on health and safety issues that are a concern for the agency.

Regional Support Network – Commissioner Richard

Recently, the Regional Support Network and Community Development Directors for Spokane held a forum at Gonzaga to determine if the region had an interest in collaborating to provide input on form and structure of the new health care delivery system. It was a very positive meeting with 150-200 attendees.

Discussions centered on getting ahead of upcoming healthcare reforms from the State of Washington and Federal government. The Regional Support Network has hired a consultant with its reserve funds and is embarking on having a regional discussion to formulate an outline of

health care needs for the region. The group believes there is enough flexibility in Federal policy coming forward to have input on what the new health care system should look like. If a model is not proposed, the State will certainly develop a model. At the moment, the request to the state is for Spokane to be considered 1 of 3 pilot areas throughout the state to propose and structure health care models. Commissioner Richard encouraged the Board of Health and Health District staff to engage in the upcoming forums and discussions.

National League of Cities – Councilmember Corker

Regionalization was a large topic at the recent National League of Cities conference. The Census Report covered at the meeting talked about the role that metro areas will have to assume in helping smaller communities. Agencies will need to play a larger role with the smaller communities as resources for infrastructure run out. Implementation is brought about by focusing on services instead of populations or geography. If not done that way, agencies will focus on turf wars, consolidation, and aggressive annexation that prevent cooperation and affectability. Councilmember Corker found it interesting that the two conference focal points didn't have to do with public safety, but instead dealt with food and health.

Board of Health Meetings – Councilmember Crump


Councilmember Crump stated he will do his best to start meetings at 12:30 p.m. and end them at 2:30 p.m. He asked Board Members to remember if there is an important public health matter that meetings may run long. He also reminded Board Members to look at the agency meeting schedule provided at the meeting today and to make an effort to attend 1 or more meetings this year.

NEXT BOARD OF HEALTH MEETING

The next Board of Health meeting is scheduled at 12:30 p.m. on April 28, 2011.

ADJOURNMENT

There being no further business before the Board the meeting was adjourned at 2:34 p.m.

APPROVED: 
Board of Health Chair

Date: 4-28-11


Recording Secretary