

The special meeting of the Spokane Regional Health District Board of Health held on Thursday, November 9, 2011 was called to order by Councilmember Dave Crump, Chair, at 1:10 p.m. in room 140 of the Public Health Center, 1101 West College Avenue, Spokane, Washington.

## **PRESENT**

Commissioner Al French  
Commissioner Todd Mielke  
Commissioner Mark Richard  
Councilmember Steve Corker  
Mayor Mary Verner, Vice Chair  
Councilmember Amber Waldref  
Councilmember Bill Gothmann  
Councilmember David Crump, Chair  
Board Member Bob Lutz, MD, MPH

## **ABSENT**

Mayor Tom Towey  
Board Member Michael Fisk, DC  
Board Member Susan Norwood, EdD, RN

## **CHAIR STATEMENT**

Councilmember Crump thanked the Board Members for finding time to attend the special meeting. In the last meeting, there were several hours of citizen input and at the conclusion a motion was made for a continuation of the discussion of Resolution #11-05 and for a special meeting to be determined. The resolution is on the agenda for today's special meeting, but that will not determine whether action will be taken today.

## **ACTION ITEMS**

### **Resolution #11-05 Adoption of the 2012 Budget– Mike Riley**

Councilmember Gothmann moved for approval of Resolution #11-05 adoption of the 2012 budget. Councilmember Corker seconded the motion.

Discussion on the motion:

- Councilmember Waldref asked health district staff to give an update on the transition efforts. A) Dr. Joel explained the plan for transitioning the maxillofacial project consists of identifying entities in the community who are capable of taking over the program and seeking whether there is an interest in taking on the project. Thus far, the agency has talked with the Medical Society, Project Access, Deaconess System and will talk with Sacred Heart Medical Center next week. The Medical Society has been provided additional information because the project may be possible within their agency.
- Councilmember Waldref asked if the health district had plans to engage community stakeholders and citizens who are concerned about the transition. A) There is potential for community partners to assist in the transition. It hasn't happened thus far.
- Councilmember Waldref asked if the budget were passed today, would there be enough time to develop a transition plan and place the project within the community before

December 31<sup>st</sup>. A) The agency's goal is to transfer the project to an external entity as soon as possible. At the next BOH meeting, the agency will have a better idea of potential transition opportunities. If a potential entity is not ready by the deadline, then continuing services until the transition entity is ready could be possible.

- Councilmember Richard stated the assertions made at the last meeting that the budget determination was a computer driven decision is not accurate, but it is a computer program that allows the human process to input information as it goes forward with interaction with staff and the public. The outcome is information that staff uses to make a budget decision. As a part of every budget process for the last few years, department managers working with their teams evaluate programs for outcomes and rank their own assessment for each individual program. Those outcomes are then brought to the agency's executive team and then a peer review to cross review information and challenge each other's assumptions. Executive staff compiles the information and then works with the finance team for a few months to understand, discuss, and debate the information interactively before it is brought before the Board of Health.
- Councilmember Richard asked the comptroller what it would cost the agency to continue services for 2 to 3 months or a quarter (until the end of March) to allow a transition to the community without a disruption of services. A) To run the CSHCN components, which were not funded, not just the maxillofacial program for a quarter of the year, it would cost approximately \$125,000.
- Councilmember Richard requested either the BOH amend the budget to carry the maxillofacial project forward for 60 days in 2012 to allow the agency to formalize a transition process or consider amending the budget at the December meeting if there is still uncertainty about obtaining a transition entity before the end of 2011. He would like to direct staff to work with citizens and community stakeholders to develop a transition plan in 30 days. If that is not possible, then the Board commit to revisiting this topic in December or even on a monthly basis. He stated he would be interested in serving on a transition team to work on the issue for transition in the next 30 days.
- Commissioner Mielke shared he served on the BOH Budget and Finance Committee and his approach while reviewing the budget was to determine where there was flexible spending. After reviewing the agency's priorities and mandated programs, the list gets short quickly. In response to the public who asked why the agency didn't pursue the offer by Shriner's, he is uncertain why the message was that the agency was not interested. He agrees with earlier comments about directing staff to transition the project to a community entity.
- Councilmember Waldref stated that after hearing the cost is \$125,000 for one quarter to run the maxillofacial program, she would like to direct staff to work with community partners for a month, report back to the Board and then take other steps as needed.
- Mayor Verner stated several programs were eliminated at the City of Spokane, but by working with the community on transitioning, the programs were allowed to continue. This agency has staff that are committed to the transition of the maxillofacial project. Mayor Verner stated she is interested in serving on a transition committee to explore options for transition.
- Councilmember Crump read a statement by Board Member Susan Norwood and another by Dr. Fisk in support of the budget. Several letters from citizens were included in the agenda packet and sent to Board Members by email as well. Councilmember Crump

welcomed the idea of involving community partners and citizens to participate in the transition of the project. Additionally, having a deadline for transition motivates those involved to participate. If the Board chooses to lengthen the transition by 30 or 60 days, the cost will come from the unrestricted reserves and will put the agency in jeopardy financially. Requests for a transition by the next Board meeting on December 1st would only allow staff 22 days to complete. The next scheduled meeting after that would be January 26, 2012. If desired, a special meeting can be set after the December 1<sup>st</sup> meeting.

***Motion: To approve Resolution #11-05 adoption of the 2012 budget.***

***Motion/Second: Gothmann/Corker***

***Approved: Unanimously***

Councilmember Mielke asked to formalize the discussion on transition. He made a motion to direct staff to develop a transition plan, as well as, an implementation plan and bring it back to the Board for review at a special meeting during the middle of December. The motion was seconded by Commissioner French.

Discussion on the motion:

- Councilmember Corker stated that based on the upcoming meeting of the legislature there may be need for further discussion on the budget.

Councilmember Mielke amended the motion to direct health district staff to develop a transition and implementation plan and determine a date in the middle of December to review the plan and discuss any other pressing issues that may arise.

Commissioner Richard seconded the motion and asked for the Board to consider the date as tentative, but secure, in case a plan is developed and reported to the Board at the December 1<sup>st</sup> meeting.

Discussion on the amended motion:

- Mayor Verner requested Board Members to make themselves available on weeknights and/or weekends given the immediacy of issue. She also asked Dr. McCullough to seek help from Board Members if needed sooner than the December 1<sup>st</sup> or special meeting date.
- Councilmember Crump requested the recording secretary to send out the option of December 14<sup>th</sup> as a possible meeting date in addition to the meeting times suggested by Mayor Verner.

***Motion: To direct health district staff to develop a transition and implementation plan, determine a tentative, but secure, date during the month of December for review of the plan and discuss any other pressing issues that may arise.***

***Motion/Second: Mielke/Richard***

***Approved: Unanimously***

## **NEXT BOARD OF HEALTH MEETING**

The next Board of Health meeting is scheduled at 12:30 p.m. on December 1, 2011

**ADJOURNMENT**

There being no further business before the Board the meeting was adjourned at 2:09 p.m.

APPROVED: David A. Crump  
Board of Health Chair

Date: 12-1-11

Carly  
Recording Secretary