

The regular meeting of the Spokane Regional Health District Board of Health held on Thursday, May 28, 2009 was called to order by Commissioner Richard, Chair, at 12:35 p.m. in rooms 320/321 of the Public Health Center, 1101 West College Avenue, Spokane, Washington.

PRESENT

Councilman Steve Corker
Councilman David Crump
Councilman Dick Denenny (arrived at 12:40)
Councilman Bill Gothmann, Vice Chair
Commissioner Mark Richard, Chair
Board Member Susan Norwood, EdD, RN

ABSENT

Councilman Michael Allen
Commissioner Bonnie Mager
Commissioner Todd Mielke
Mayor Mary Verner
Board Member Michael Fisk, DC
Board Member Bob Lutz, MD, MPH

CITIZEN INPUT

- Joyce McNamee, Colbert, welcomed the new health officer and is a community volunteer whose personal mission is the healthcare of our community. She expressed the importance of oral health.
- Carolyn Picket, Spokane, spoke against fluoride and had other issues she would like to bring forward at another time.
- Rose Waldram, Greenacres, was not present during citizen input, but was given the opportunity to read and submit her letter opposing fluoride prior to adjournment.

CHAIR REPORT – Commissioner Richard

Board Member Susan Norwood

Chair Richard welcomed Susan Norwood, the new appointment to the Board of Health from Commissioner Mielke's district. Dr. Norwood thanked the Commissioner's for her appointment. She has lived in Spokane since age two and has been a professor in the Nursing Department at Gonzaga University for the past 18 years. She previously taught nursing at WSU and has worked as a staff nurse and nurse practitioner. Her primary clinical background is in maternal and child health and she has done some work in public health and community health.

Health Officer Joel McCullough

Chair Richard formally introduced and welcomed the Health District's new health officer, Dr. Joel McCullough. Prior to his first official day, he became involved in the swine flu issue. The Board is thankful to have him here.

Dr. McCullough has a B.A. in Linguistics from Stanford University in Palo Alto, California; an M.D. from Vanderbilt University School of Medicine in Nashville, Tennessee; an M.S. in Preventive Medicine from the University of Iowa Graduate School of Preventive Medicine in

Iowa City, Iowa; and an M.P.H in Environmental Health from the University of Washington School of Public Health and Community Medicine in Seattle, Washington. During medical school, he did an infectious disease rotation at a Spokane hospital. Dr. McCullough has provided inpatient and outpatient clinical services in general medicine, internal medicine, and occupational medicine and he has provided consultation and technical assistance in environmental epidemiology to state and local public health agencies and to management and workers on workplace hazards. He is board certified with the American Board of Internal Medicine, American Board of Preventive Medicine, and Occupational and Environmental Medicine. Dr. McCullough left his position as the Assistant Commissioner and Medical Director which he held for the past seven years at the Chicago Department of Public Health to relocate to the Pacific Northwest.

SRHD 2008 Audit

Chair Richard thanked Board Members for their ongoing participation in Health District activities. He was joined by Councilman Corker and Councilman Gothmann at today's audit entrance meeting.

Publications and Other Materials

The Second Quarter 2009 NALBOH *NewsBrief* was distributed and each board member received the booklet, "Welcome to Public Health in Washington State: A Guidebook for Local Board of Health Members." Board members received a summary of the May Executive Committee meeting. A meeting comment sheet is in each Board Member's packet which can be completed to provide meeting input to staff.

Meeting Room and Seating Arrangement

Board members were reminded that the room arrangement and seating for board members may vary from meeting to meeting in order to accommodate the video recording and close any gaps when board members are absent.

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

Orientation to SRHD and the Community

Dr. McCullough thanked the Board for his welcome to Spokane. He has been at the Health District for about one month and everyone he has met has been helpful and friendly in welcoming him to the community. Since his arrival, he has met with all of the division directors and most of the program managers at the Health District. He has learned about the programs and that the employees are professional and competent and have a strong compassion for public health.

Dr. McCullough has met with community members as well. He gave a presentation to the Spokane City Council about the H1N1 flu; he has met with members of Greater Spokane Incorporated, with members of the various schools in the community, the Dean of the School of Nursing, and he met briefly with Senator Lisa Brown. He anticipates meeting with other community members in the future.

H1N1 (Swine Flu)

The H1N1 swine flu virus is believed to have begun infecting people in Mexico in March. It subsequently moved to the U.S. and other parts of the world. At this time, there are about 14 thousand confirmed cases of swine flu worldwide with about 8 thousand in the U.S., 575 in Washington state, and 4 in Spokane County.

The CDC (Centers for Disease Control and Prevention) has estimated that there are at least 100 thousand people in the U.S. who are infected with H1N1 with most illnesses being mild with typical seasonal flulike symptoms (fever, sore throat, cough and sometimes nausea and vomiting). Many people take care of their illness without seeking medical attention and therefore are not tested. Now that the virus has been identified in our community, our testing protocol changes and we no longer test everyone. Our emphasis now is to test severe cases to try to determine if the virus is changing and causing more severe illness than we expect.

An interesting aspect of this infection is that most of the cases are in young people with about two-thirds in people under the age of 20. Most of the people with complications from this flu have preexisting medical conditions. It is unclear at this time as to why the hospitalization rate is higher than we normally see with the seasonal flu, which may be due to enhanced surveillance.

So far in the U.S., there have been 11 deaths related to this flu in people who had preexisting medical conditions. Deaths from the seasonal flu are most commonly in people who are over the age of 65; however, we have had no deaths in that age group from this virus. At this time, most public health agencies are entering a transition point because most of the infections have plateaued in most communities throughout the county.

Nationally, the CDC will attempt to learn more about this virus over the next 8-10 weeks as the flu season begins in the southern hemisphere and that will help us plan for our next flu season. The CDC is updating their guidance regarding recommendations for public health and for the clinical community and will study the genetic variability of the virus. The influenza virus has the propensity to change its genetic material on a regular basis which may change what we see clinically with this infection; therefore, the CDC and WHO (World Health Organization) will monitor possible changes over the next 8-10 weeks.

Vaccine is an important issue and the U.S. government is in the early stages to produce a vaccine for the H1N1. The Department of Health and Human Services has committed to producing and possibly stockpiling a vaccine. Producing a vaccine is a very complex, multi-stage endeavor and involves government agencies, vaccine manufacturers, and researchers to determine if it is safe and effective. We will not know the recommendations for vaccination as it relates to H1N1 for some time. More information should be available in late summer or early fall.

There are many circulating strains of influenza in the normal flu season and it is possible that H1N1 will be one of those strains. At this time, however, we don't know if H1N1 will cause more illness, become a dominant strain, or if it will cause less illness. Information coming from public health is expected to change due to the nature of this virus.

West Nile Virus

As the mosquito season approaches, people begin to think about vector-borne diseases like West Nile virus (WNV). Fortunately, there has never been a WNV infection that was identified in the Spokane area. However, we do know that we have the species of mosquitoes that are capable of transmitting the disease to humans.

The Spokane Regional Health District will continue to focus on WNV prevention messages. The most effective way to prevent WNV is to eliminate standing water near homes and work and when exposed to mosquitoes to use a mosquito repellent. We will stay tuned to the potential risks in the future, but at this point prevention messages are adequate.

Dr. McCullough responded to Commissioner Richard's question on how to abate a mosquito nuisance here such as an unmaintained swimming pool, as we are not part of a Mosquito Control District. The ordinances and laws regarding mosquito control in Spokane are less stringent than in Chicago where a mosquito nuisance would be dealt with immediately by either contacting the owner to abate the mosquito problem or be ticketed, or the pool would be drained of water or a larvicide applied with expenses passed on to the owner. In Spokane, a letter would be sent to the home owner to request them to resolve the issue.

Dr. McCullough will follow up with Environmental Public Health regarding Councilman Gothmann's suggestion to involve the local municipalities in resolving these types of issues.

APPROVAL OF MINUTES

Councilman Corker made a motion to approve the April 23, 2009 Board of Health meeting minutes as submitted in writing; motion seconded by Councilman Crump. Following the motion, Councilman Gothmann said that he was absent from that meeting and was not sure if he could vote; Legal Counsel Wolkey responded that he could abstain. Councilman Denenny said that he has had two people research this issue and that the presentation of the minutes is what is being approved and not the accuracy and that anyone who was not present could vote. Chair Richard asked Counsel Wolkey to research and confirm the minutes approval process.

Motion: To approve the April 23, 2009 Board of Health meeting minutes as submitted in writing.

Motion/Second: Corker/Crump

Approved: Unanimously

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: April 1 – 30, 2009. Councilman Corker said that the Executive Committee of the Board reviewed the voucher list and all questions were answered to their satisfaction. The board, in a vote as moved by Councilman Corker and seconded by Councilman Crump, did approve for payment those vouchers included in the following list and further described in the total amount of \$2,150,323.96.

Voucher Numbers:	#90706 - #91138	\$ 857,379.13
Payroll Warrants:	#602541 -#602580	727,647.78
Advice Numbers	#DD1167 -#DD1365	
Payroll Warrants:	#605385 -#605877	565,297.05
Advice Numbers:	#DD1366 -#DD1564	
	TOTAL	\$2,150,323.96

Councilman Denenny commented that the voucher list is now available to Board Members in detail with all line items for each voucher for a more succinct review.

Motion: To approve for payment those vouchers included in the above list and further described in the total amount of \$2,150,323.96.

Motion/Second: Corker/Crump

Approved: Unanimously

ACTION ITEMS

Legislative Forum – Commissioner Richard

Commissioner Richard asked for input from the Health District’s Administrator, Torney Smith regarding this agenda item. Mr. Smith said that several times during the last legislative session there were discussions about the importance of meeting with the Spokane area legislators during the time that they would be in Spokane over the summer. He asked that the Board give direction to the agency as far as how to facilitate those meetings.

Councilman Corker would welcome the opportunity for our new medical director to meet with our area legislators and encourages the opportunity for legislators to visit with staff and members of the Board of Health. He participates on a Health District staff committee to aid communications between staff and the Board.

Councilman Denenny said that the Executive Committee of the Board determined that a legislative forum would be an action item on this agenda to convey a formal message that the Board does want the participation of our legislators in public health and to create an environment for the legislators to visit with staff and with members of the Board of Health. This agenda item could result in directing staff to put this item into action. He requested Health District staff to contact legislators to inquire about their availability and then coordinate a time for members of the Board and agency leaders to meet with legislators; Councilman Crump seconded the request in the form of a motion.

Mr. Smith responded to Chair Richard’s inquiry following the motion. Either a formal meeting or informal meetings can be coordinated, depending on what works for both the legislators and for members of the Board.

Motion: To request Health District staff to contact legislators and coordinate a time for members of the Board and agency leaders to meet with them (either formally or informally).

Motion/Second: Denenny/Crump
Approved: Unanimously approved

REPORTS

SRHD Operational Response to Swine Flu – Susan Sjoberg

Susan Sjoberg is the manager of the Communicable Disease Epidemiology (CD Epi) and Public Health Emergency Preparedness and Response (PHEPR) programs at the Health District. She thanked board members for the opportunity to present a brief overview of the Health District's response to the H1N1 swine flu. A formal after-action report will be completed within the next 60 days.

Ms. Sjoberg distributed and presented a timeline of events which occurred in the first week of the H1N1 swine flu incident which began with a presentation at the April 23, 2009 BOH meeting when swine flu was an example of a disease that was being monitored by CD Epi staff. Things moved quickly thereafter with activities each day as summarized:

Friday, April 24, 2009

- CDC issued a low level statewide alert about swine flu.

Sunday, April 26

- Washington DOH convened a conference call about swine flu.

Monday, April 27

- SRHD staff met and decided to establish a small scale Incident Command System (ICS).
- Washington DOH convened a second conference call resulting in our decision to escalate our response and ask for help from the Major Incident Support Team (MIST).
- A meeting was scheduled with first responders in the region.
- A daily news media briefing was scheduled for 3 p.m. each day.

Tuesday, April 28

- The response structure was broadened.
- Incident management objectives and action plans were established.
- A stakeholders meeting was scheduled.
- Pharmaceutical stocks were identified in Spokane County.

Wednesday, April 29

- Met with stakeholders who had participated in our pandemic influenza planning.
- Established triggers for escalating our response at SRHD.
- Met with regional emergency managers.
- Identified the first probable cases in Spokane and Seattle and held additional press conference.
- Activated our phone bank.

Thursday, April 30

- Convened a regional meeting to include first responders, hospitals, and local health jurisdictions.
- Met with school personnel to discuss disease mitigation measures.
- Requested Strategic National Stockpile (SNS) medications and Personal Protective Equipment (PPE) from DOH.
- Engaged Dr. McCullough on his first day of employment to become the face and voice of public health.

- Convened a meeting to update elected officials and senior management about the swine flu incident.

Friday, May 1

- MOUs were drafted for hospitals and pharmacies to receive SNS medications
- MIST implemented an exit strategy.
- The phone bank was discontinued for the weekend.
- New trigger points were established relative to medical surge and surveillance.

During the next week, the response continued as follows:

- Many processes became ongoing with updates to providers and regional and local partners.
- MOUs for hospitals and pharmacies to receive SNS were finalized.
- SNS medications were delivered to identified locations and PPE issues were explored.
- Convened a meeting with educational partners to learn how to best work within their systems.
- Fine tuned our ICS processes.

Ms. Sjoberg was encouraged by the number of partners who engaged in this process. An after action review process is being conducted through several debriefing meetings. Many lessons were learned regarding our partners, plans, communication and training, and a draft After Action Report (AAR) will be forthcoming. Challenges discovered in our communication and information management are being rectified even before the report is completed. The swine flu situation will continue to be monitored. Partner workgroups have been established with our first responders to determine their PPE needs and clarify expectations. The state is working with hospitals on influenza surveillance within hospitals and data sharing to facilitate quick access to potential outbreak data.

This is the time of year when the Health District begins planning and establishing strategies for our seasonal influenza. That is occurring with the expectation that we will promote regular seasonal influenza vaccination recommendations from the CDC and there may be additional recommendations from the CDC regarding a potential swine flu vaccine. The Health District's fall childhood immunization clinics include influenza vaccination and we have ongoing immunization outreach in childcare settings and interest from schools to partner in promoting influenza vaccination.

Discussion and response to questions following the report:

- The Health District experienced a problem with technology when a computer server went down during the swine flu event. The computer held some pertinent information including distribution lists. Hard copies were available, but it was recognized that the information needs to be updated and printed more frequently.
- There potentially will be two influenza vaccines in the fall, but the guidelines for prioritization have not yet been established. A swine flu vaccine may require two shots and a different age group may be targeted. All age groups are targeted to receive the seasonal flu vaccine.
- The CDC is monitoring the virus over the summer. It is not known if the current status of who gets infected and the severity of the illness will be the same.

Chief Bruce Holloway from Spokane Fire District #3, the Incident Commander from the MIST (Major Incident Support Team), presented his perspective. He had participated in a training

exercise with public health over a year ago which gave him a familiarity with the people and agency. He found it interesting to come in and help set up an ICS (Incident Command System), to organize and help establish the processes for this incident. He was impressed with the dedication and capability of the employees at the Health District including the new health officer. The Spokane community has an outstanding response capability. It was interesting to see that the NIMS (National Incident Management System) which was instituted by the president a few years ago works in any type of incident, in either an emergency or non-emergency situation. He learned that MIST needs to work to find a better methodology for information dissemination and assure all players are informed; accurate information was disseminated, but it did not get to all of the necessary players as quickly as it should have. He had a very positive experience here and was appreciative of the opportunity to help and to learn so they too can improve their communication in a response.

The Board thanked Chief Holloway and the MIST as well as all Health District staff for their work in this response.

BOARD MEMBER CONCERNS

Legislative Forum – Councilman Crump

Councilman Crump is concerned that the bill that was put forth by Senator Marr regarding the composition of the Board of Health took a lot of focus but his goal on a forum is to look at many public health issues including funding. He appreciates the Board's suggestion for Dr. McCullough to visit individually with legislators, but would also like to come forward as an entity on other topics, such as funding.

WSALPHO – Councilman Denenny

Councilman Denenny asked for clarification on the upcoming WSALPHO meeting. Mr. Smith said that any member of the Board of Health is welcome to attend the June 2 WSALPHO (Washington State Association of Local Public Health Officials) meeting which will include health officers, administrators and division directors from the various local health jurisdictions across the state. This group meets about four times a year and this next meeting is scheduled in Spokane. Dr. Kay Bender, the new CEO for the Public Health Accreditation Board, will attend this meeting and talk about public health standards and how that will lead toward accreditation on a national basis. Mr. Smith will forward the meeting agenda and encouraged any Board member to attend any part of the meeting.

Emergency Response Training – Chair Richard

Health District staff is preparing an Emergency Response Training for members of the Board of Health which is scheduled on June 4, 2009 at 9:30 – 11 a.m. at the Health District in room 320.

NALBOH (National Association of Local Boards of Health) – Chair Richard

Board Member Lutz is registered to attend the NALBOH Annual Conference scheduled on July 1-3, 2009 and Chair Richard is looking forward his report.

NEXT BOARD OF HEALTH MEETING

The next Board of Health meeting is scheduled at 12:30 p.m. on Thursday, June 25, 2009 at 1101 W. College Avenue, Spokane, Washington.

EXECUTIVE SESSION


There was no Executive Session.

ADJOURNMENT

There being no further business before the Board the meeting was adjourned at 1:45 p.m.

APPROVED: 
Board of Health Chair

Date: 6/25/09


Recording Secretary