

The regular meeting of the Spokane Regional Health District Board of Health held on Thursday, April 28, 2011 was called to order by Councilmember Dave 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 at 1:00 p.m.)
Councilmember Steve Corker
Councilmember Amber Waldref
Councilmember Bill Gothmann
Councilmember David Crump, Chair
Board Member Michael Fisk, DC (arrived at 12:35 p.m.)
Board Member Bob Lutz, MD, MPH
Board Member Susan Norwood, EdD, RN

ABSENT

Commissioner Al French
Commissioner Todd Mielke
Mayor Mary Verner, Vice Chair
Mayor Tom Towey

CITIZEN INPUT

- Lloyd Jacob, Spokane, WA spoke on fluoridation and the negative effects on the human body, fluorosis in children, and fluorides being used to treat hypothyroidism.
- Rose Waldrem, Greenacres, WA spoke on her participation in Bloomsday, fluorine based compounds and genetic engineering. A written copy of the input she presented at the March meeting was given to the agency attorney.
- Robert Foote, General Manager of Community-Minded Television, Spokane, WA spoke on his agency's service as a means to publicize health messages of the Board and Spokane Regional Health District. Councilmember Gothmann commented that Spokane Valley Council meetings are broadcast by CMTV on Channel 14. The agency has been a tremendous resource to City of Spokane Valley. Councilmember Waldref commented that the Board of Health meetings are broadcast on Channel 5. She has worked with CMTV in the past and the agency is very helpful. She hopes the Health District will partner with this agency.
- Caroline Pickett, Spokane County, WA spoke on an *Atlantic Monthly* article published November 2010 on medical abuses and fraudulent vaccines; Jeremy Oliver on Channel 4 at 8pm on Tuesday nights who speaks about nutrition; and health districts forcing vaccinations.

CHAIR REPORT – Councilmember Crump

Congratulations to Councilmember Waldref

Councilmember Crump welcomed Councilmember Waldref back from her absence in March, which was due to the birth of her daughter, Nora, on March 14th.

Employee Awards & Recognition Ceremony

Board Members were thanked for attending the Employee Awards & Recognition Ceremony at the Health District. At the ceremony, Torney Smith received an award for 20 years of service

with the Health District. The Board was well represented at the ceremony and agency staff appreciated Board Member support.

Agenda Packet Information

Included in each agenda packet is a BOH Orientation Manual By-Laws update and a SRHD Emergency Contact list. At each member's seat is a pinwheel bouquet from the Community and Family Services Division for *Our Kids, Our Business* Campaign.

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

Earthquake and Tsunami in Japan Update

The Environmental Protection Agency (EPA) released a press release in March about milk samples in Spokane testing positive with trace amounts of radiation. The discovery was due to an increase in EPA monitoring of rainwater and milk to monitor for potential increased radiation exposure related to the radiation release at the damaged nuclear reactor. The amount found in the Spokane sample was 0.8 pCi/L, which is 5,000 times below the level of concern. Subsequently to the radiation found in Spokane, there were other samples found in other parts of the country. The EPA will continue to monitor levels.

School Based Health Centers

The advisory committee for the school based health centers decided on Sunset Elementary as the pilot school for the first health center. The school in Airway Heights was selected based on the high need in the area and that a service model is available for parents and children. The advisory committee is in the process of finalizing a health care provider to service the center. The anticipated opening of the center is next school year.

Medical Reserve Corps

The Health District has been negotiating a location for the Medical Reserve Corps (MRC) of Eastern Washington with MRC founding members for the past 6 months. The Medical Reserve Corp provides structure for medical and public health professional volunteers during natural disasters and public health emergencies. The MRC will be housed at the Health District with its structure overseen by a governing board outside of this agency. The Health District is in the process of hiring a coordinator, which should be completed by the end of next week. The agency will receive local dollars from the Metropolitan Medical Response System (MMRS) to fund the position. This arrangement will be an important component in responding to emergencies.

UNC Management Academy

Dr. McCullough gave an update to last year's report about the Management Academy at the University at Chapel Hill, North Carolina. Dr. McCullough, Torney Smith, Julie Scholer, Tobacco Prevention Program, and Amy Bertoni from Sacred Heart Medical Center received scholarships to attend the academy. The objective was to develop a revenue based project for public health. The team presented its final project, an Apple iPad application targeting pregnant women who smoke, at UNC last week. The team received an award for the most innovative use of technology. A prototype is expected to be demoed by the end of next month with a provider willing to pilot the project in his office thereafter.

CONSENT AGENDA

The 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.

APPROVAL OF MINUTES

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

Motion/Second: Corker/Gothmann

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: March 1-31, 2011.

Voucher Numbers:	#210255	-	#B&OFEB11	\$ 744,278.28
Payroll Warrants:	#703823	-	#703586	\$649,618.03
Advice Numbers	#DD10647	-	#DD10852	
Payroll Warrants:	#705546	-	#705585	\$629,320.61
Advice Numbers:	#DD10853	-	#DD11059	
			TOTAL	\$2,023,216.92

Motion: To approve for payment those vouchers included in the above list and further described in the total amount of \$2,023,216.92.

Motion/Second: Gothmann/Corker

Approved: Unanimously

ACTION ITEMS

Resolution #11-01 Appointing a Claims Agent – Councilmember Crump

Councilmember Crump presented a request appointing a claims agent for the Health District. The previous claims agent was Marcia Olson who retired in January 2011. The Executive Committee of the Board of Health reviewed the resolution and discovered a named agent is required per law to be filed with the Spokane County Auditor’s Office. The duties of a claims agent are to receive all claims against the agency. The proposed new claims agent for the agency will be Ann Pitsnogle.

Motion: To approve Resolution #11-01 appointing Ann Pitsnogle as the claims agent for Spokane Regional Health District.

Motion/Second: Corker/Waldref

Approved: Unanimously

REPORTS

2010 Year End Finance Report – Mike Riley

Mike Riley, Comptroller for the Spokane Regional Health District, presented the 2010 Year-End Finance report. Every year, the state auditors ask the agency what is being done to keep the Board of Health informed about financial issues. This report to the Board, work done throughout the year with the Budget Subcommittee, and other financial reports satisfies this requirement. Mr. Riley acknowledged work by division directors, program managers, agency staff, and Administration that keep the agency financially sound by following agency policies.

As Comptroller, Mr. Riley oversees Finance, Client Services, Vital Records and the Central Reception areas. Administration is overseen by Torney Smith. He and Finance staff work very closely with the Executive Assistant, Ann Pitsnogle, and Mishelle Earley, Administrative Assistant 4, who even though is not supervised by Finance, does a large portion of the contract and purchase order work for the agency.

In Finance, Kim Kramarz, Program Manager 4, is responsible for payroll, accounts receivable and payable, inventory lists, and grant billings. In the Client Services Program, Paula Maxwell manages client based income and billing of Medicaid and Medicare. Peggy Wetmore, Registrar for birth and death records, manages deputy registrars and the central receptionist.

Most who work in Finance and Administration have been employed with the agency for many years. At the last Employee Awards & Recognition Ceremony, 2 of the staff who have worked at the agency the longest were from Administration. A month ago, Torney requested a satisfaction survey be sent to agency employees regarding work of Administration personnel. The results were between a 3.2 and 3.8 on a scale of 1 to 4. In the next 3 to 7 years, most of the Administration staff will be eligible to retire. This will result in many changes to division staff and need for replacement training.

Another change that will occur will be to the accounting financial system. Spokane County requested the Health District supply its own payroll system. The agency purchased Microsoft Great Plains as its payroll system. In the near future, Microsoft GP will be used as the agency's complete financial system. In Client Services, a new client data tracking system is being researched. The system purchased will be used agency-wide.

One survey result from the satisfaction survey was that Administration scored low on policies and procedures. A new quality improvement project to improve the policy process and employee access to policies is now being worked on.

Mr. Riley directed Board Members to their packets which contained the 2010 Budget Report and the 2004-2011 Expense/Revenue Percent of Total Report. The report to the Board planned in March was delayed in order to receive the most accurate Medicaid eligibility rate from Hansine Fisher and Associates whose own report was late. In addition, the state was in an audit process, which changed the 3rd and 4th quarter billing criteria repeatedly and the American Recovery & Reinvestment Act (ARRA) dollars had reporting requirements that affected financial reporting. Another delay which affected reporting to the Board was due to Breast, Colon and Cervical Health Program funds being shifted between state and federal monies.

The 2010 Budget Report handout shows there were \$24.2 million expected revenues. The agency obtained 97.07% of those expected revenues. All divisions were careful with expenditures and kept expenses at 92.8% of budgeted expenses.

The 2004-2011 Expense/Revenue Report requested by Councilmember Crump shows service and charge expenses ran 19% to 20% across the budget for all years. Capital outlay is 1-2%. Salaries and benefits have changed from 57% to 72% of expenditures. Most of the agency budget is salaries and benefits. Reasons salaries and benefits were lower in previous years was due to higher Public Health Emergency Preparedness and Response (PHEPR) supplies and services purchases.

The federal direct revenues from 2004 through 2011 are based on grants received. The smaller numbers are when the agency received a small dental grant and larger numbers are the Nurse Family Partnership grants. The federal indirect grant percentage in 2004 is almost identical to the percentage in 2011. The figures in 2009 through 2011 include the ARRA dollars, which increased those numbers. Overall, state grants were reduced from 24% in 2008 down to 13% of the budget in 2011.

Revenue across the years is 20 to 23 million dollars. Those figures are maintained because of the fees charged for services. At the Board's direction, the agency has a fee policy whereby fees are recovered at 100%. Intergovernmental revenues increased due to a Children with Special Health Care Needs (CSHCN) program service provided to area schools. There was a reduction in Local Government Assistance money in 2010 and another reduction is expected in 2011. Discretionary funds received in 2004 was 23.9%, but has steadily decreased to 19.2% in 2010.

Mr. Riley will present this report to Joint Management in May. If Board Members have questions, please feel free to contact Mr. Riley.

Discussion following the report included:

- Board Member Fisk commented a 5% salary and benefits increase annually, as seen in the 2010 and 2011 budget years, would consume the entire Spokane Regional Health District budget within 5 to 6 years, which is very concerning to him as a Board Member. Mike Riley responded by stating in 2004, union contracts had a minimum 2% to a cap of 4.5% for COLAS that had to be given to employees. Salary increases shown in the report were due to the agency working on a compensation project from 2004 through 2006 that compared agency staff salaries to other entities on a community level resulting in salary adjustments.
- Torney Smith further responded to Board Member Fisk's comments about future staffing needs stating there have been cuts to program and staff while maintaining a reserve budget since 2004. If the salary and benefits needs increase, the agency may have to continue to decrease staff. The experience of this agency has been if staff are not paid comparably, they will not remain with the Health District. In the future, some programs and staff may be eliminated to maintain the appropriate levels needed to provide other services adequately. At the moment, the Health District is in the best condition financially in the state compared to other LHJs.
- The unions and the agency want to provide the best services possible to the public with appropriate numbers of staff. The unions have been very reasonable in the past in

negotiations with the agency. During these tough economic times, we believe they will continue to be.

- In 5 to 10 years, upcoming retirements will help offset salary and benefit increases.
- Dr. Lutz commented that while visiting local boards of health across the state, he has seen ~~most~~ ^{some} with 40-50% funding reductions over the last 5 years. In conversations with Mr. Riley, it has become evident that because the Board has been proactive in maintaining its reserve fund and because of other sound financial decisions this agency is in a good financial condition.
- Councilmember Corker stated this agency may be asked to assume regional duties in the future. In order for counties to be able to provide services to their more rural areas, there may need to be a restructuring of services. It will require a very professional, well-organized staff in order to assume increased responsibilities. The desire of health district would be to keep staff and compensate them at a level whereby they can take on the increased responsibilities.
- Commissioner Richard commented this is an appropriate discussion for the Board to have as negotiations with unions approach. Unless a regional approach brings in new dollars, this agency will be unable to maintain salary levels and keep all staff employed. In his experience in negotiations with the county, employees are willing to forgo salary increases because they value their coworkers. Unions, who often are senior employees, sometimes have the mindset to release the new employee. As a Board, it is important to balance the interests of the employees, the interests of the community and to represent the needs of the employee.
- Mr. Riley will work very closely with Torney Smith and Barb Lorang on the financial implications from the negotiations.
- Torney Smith would welcome a BOH subcommittee willing to work with the agency during negotiations with IFPTE and WSNA. The commitment would start in mid-summer and last until negotiations are completed. Councilmember Crump asked that any board member interested in serving on that subcommittee to contact him. If he doesn't receive any responses, he will use the Board of Health Executive Committee.
- Councilmember Crump brought to the Board's attention the change in salary and benefits from 57% to 72% from 2004-2010. Previously, this agency was a service provider at 50%, now it is a human services provider at 72%. Personnel cuts will be higher when percentages are so high. He acknowledged and thanked Spokane County for the dollars given to the Health District.

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BOARD MEMBER CONCERNS

Bicycle Helmet Ordinance/Riverstone Clinic – Councilmember Waldref

Councilmember Waldref expressed appreciation for Spokane County Commissioners pursuing a helmet ordinance. She hopes that Spokane County will come to a good resolution on the issue.

She and Councilmember Corker were at the ribbon cutting for the new Riverstone-Yakima Farmworkers Clinic at the Northeast Community Center. The clinic provides both medical and dental services. The dental clinic opened in early April. Anyone seeking dental care on a sliding scale can contact the Northeast Community Center for the clinic number.

Medical and Healthcare Services Priority – Councilmember Corker

Elected officials are constantly given information regarding the state legislature and federal government. Half of those discussions involve human services and half of those relate to medical issues. He believes there will be an increased burden placed on local and regional agencies to provide services the state and federal governments had done in the past. If those services are not provided by the local government, it will fall upon the local community to provide. It is critical to emphasize medical and healthcare services issues and that no other issue has higher priority. It is an increasing responsibility on all levels—personal, corporate, government—to emphasize to decision makers that health is the number one priority.

Electronic Cigarette Ordinance – Councilmember Crump

Councilmember Crump reported that the City of Liberty Lake passed their e-cigarette ordinance. He thanked the Board, County and City lawyers, and Michelle Wolkey, who assisted greatly with information on the ordinance.

Drug Take Back Program – Board Member Lutz

Board Member Lutz would like the Health District to consider a drug take back program. He became aware of a successful county's program and then was reminded about the issue again from a recent USAA Today article. This Saturday at 2pm the DEA is sponsoring a program at the Spokane Valley Police Department. He has discussed the program with Health District staff briefly and would like to suggest this as a project for the Health District.

Drug Take Back Program – Board Member Fisk

Board Member Fisk shared concerns with the drug take back program and how drugs are disposed of after collection. The DEA disposes of drugs by incineration, but the current process for Hospice is unknown. He asked Health District staff to research how those drugs are disposed and report back to the Board.

Drug Take Back Program/Helmet Ordinance/E-Cigarette Policy –Commissioner Richard

Commissioner Richard stated the drug take back program is designed to prevent improper disposal of drugs such as in disposal in our water system. There was legislation proposed this year for such programs that didn't pass. Work had been done to engage the Washington Association of Counties to support that legislation and that work will continue. As a local community, it would be a great opportunity to educate and partner with a large organization, such as Hospice, on such a topic.

Commissioner Richard worked with Marion Lee, from Injury Prevention in the Health Promotion Division, on the advancement of the bicycle helmet ordinance. He was pleased to see that the majority of the Commissioners are interested in holding a public hearing on the topic. Since the article this week, there has been some spirited emails and conversation regarding the issue. The goal is to have a public hearing on the topic within a month. It was agreed that the ordinance would try to be in agreement with the laws of the City of Spokane and other jurisdictions, but to also visit with Health District staff to see if any ordinance changes were recommended.

Health District staff and Commissioner Richard are working together on an internal policy for the County campuses regarding electronic cigarettes. This project will have a phased approach that may stop short of creating a smoke free campus, but will at least improve enforcement of the state statute. Work is being done on signage, education for employees, and partnering with the Health District to assure compliance with the law. This policy will also affect the Health District building, so he is working with Health District staff to improve the littering issue and building appearance as well.

NEXT BOARD OF HEALTH MEETING

The next Board of Health meeting is scheduled at 12:30 p.m. on May 26, 2011.

ADJOURNMENT

There being no further business before the Board the meeting was adjourned at 1:47 p.m.

APPROVED: David R. Cressy
Board of Health Chair

Date: May 26, 2011

Ann Rye
Recording Secretary