BOARD OF HEALTH MINUTES
REGULAR MEETING
Wednesday, September 21, 2016

MEMBERS PRESENT: Mike Blankenship, Lou Janke, Mike Manus, Wes McCart, Brad Miller, Steve Parker, Karen Skoog, Kathleen Turpin

MEMBERS ABSENT: Daniel Hay

STAFF PRESENT: Samuel Artzis, M.D., Dale House, Kelly LeCaire, Sandy Perkins, Matt Schanz, Logan Worley

GUESTS: Caleb Holtzer, Medical Resident; Kyle Rattray, Medical Resident; Leslie Waters, M.D., Providence Northeast Washington Medical Group

CALL MEETING TO ORDER: Chair Wes McCart called the meeting to order at 10:00 A.M. A quorum was present.

INTRODUCTIONS: Introductions were made by all.

CONSIDERATION OF MINUTES: Mike Manus moved and Brad Miller seconded the motion to approve the minutes of July 20, 2016. Motion carried.

CORRESPONDENCE & INFORMATION: There was no correspondence.

PUBLIC APPEARANCES: No public appearances were pre-registered.

ADDITIONS OR CHANGES TO AGENDA: There were no changes to the agenda.

GROUP B WATER SYSTEM TASK FORCE DISCUSSION: Matt Schanz spoke about past Board discussions regarding the best direction to take with the Group B water system program. Correspondence from Dorothy Tibbetts, Eastern Regional Manager for the Washington Department of Health (DOH), Office of Drinking Water provided an outline of the process that DOH would go through. Also included are the following Washington State dollar amounts available to support local health jurisdictions (LHJs) implementing a local Group B program:

- LHJ implementing a local ordinance: $20,000 per year
- LHJ implementing a “full” joint plan of responsibility (JPR): $10,000 per year
- LHJ implementing a “partial” JPR: $5,000 per year
It was noted that LHJs implementing their own Group B water system program through a local ordinance or JPR may issue waivers from most requirements in Chapter 246-291 WAC. A partial JPR cannot provide an LHJ the authority to issue a waiver from WAC 246-291-170 – approved treatment for a primary contaminant. If the LHJ implements a program under a partial JPR and wants the capacity to issue a waiver from WAC 246-290-170, they will need to enter into a full delegation JPR with DOH.

The grant will be made available through an amendment to the LHJ consolidated contract. Any LHJ currently operating under a local ordinance or JPR is eligible for the grant. There are no additional deliverables imposed by this grant. LHJs without a full or partial JPR or memorandum of agreement (MOA) will be grant-eligible when a JPR or MOA is signed. The MOA is implemented for LHJs that enact a local ordinance. After DOH receives a copy of the ordinance, they will issue the MOA for signatures. This will be effective on January 1, 2017. Due to uncertainties in state budgeting, DOH cannot guarantee funding beyond the two (2) year period 2017 - 2018.

Group B water system options were discussed at length at the NETCHD task force meeting on August 24, 2016. The consensus was to proceed with a local ordinance but have it substantially based on the state rule but allowing provisions for the following factors:
- Allow for treatment if a primary contaminant was detected in that water supply
- Allow non-professional engineers to submit straight forward water system packets

Under the state rule, the above described provisions are not allowed but there is flexibility built into those state rules that do allow for those provisions if there was adoption at the local level.

Lou Janke said he thought the task force also discussed the potential for doing some mandatory chemical testing for arsenic and other contaminants. Wes McCart said a decision hadn’t been made as it was put aside until we received direction from the Board. The recommendation was the task force was to go ahead and do the ordinance. Wes feels that once we get the proposal, we can look at that and what that is going to cost us compared to what we get. Matt Schanz recalls part of the conversation when the Group B ordinance was first discussed regarding non-community transient type of systems such as campsgrounds, etc. that serve population is that we proposed annual testing for the basic parameter like a bacteriological test. Wes reiterated that the recommendation from the task force was to move forward drafting an ordinance proposal and to seek direction from the Board. Steve Parker talked more about Lou’s question by saying from what he remembers, there were design criteria in the state plan that had been propagated that beside the fact that it was a licensed engineer, he asked if those things could be discussed as we begin to develop an ordinance. Wes asked Steve if he is referring to the ability to waive the requirement for an engineer if it is a simple system? Steve said Matt already addressed that but there are other parts to the fact, but he doesn’t remember the details. He said it may have been just inspection requirements but there were a couple of other pieces.
Wes McCart asked for clarification if we go with the local ordinance option, are we doing the oversight inspection? Steve Parker asked to amend his previous question. Steve said there was some discussion quite some time ago at a school meeting about the necessity for an inspector to be sent to Group B water systems and our discussion was that those should be self-reporting requirements on the Group B water system owner to not impact staff and fees and reduce cost. Matt Schanz said the state rule did not include a requirement that there be any type of site-visit or sanitary survey. In meetings with stakeholders in the beginning stages of early efforts to develop an ordinance at the local level when discussing the operating permit fee of $75 per year, that group wanted some tangible benefit from the operating permit fees. The concept of checking on the operating status of that group B water system once every five (5) years came from these discussions. Steve said these are things we can look at and discuss. Matt said the task force discussed not including it, and if we follow the directive of the task force, that would not be included in the local ordinance.

Wes said the idea is to try and operate the program for the $20,000 that we will receive from DOH. Steve said he does not want the $20,000 and if we are going to do this, we are going to do it on our own. Wes said he objects to that. Steve said that is his position. Wes said the point of going with a local ordinance is it gives us the flexibility for people to engineer on their own and to treat their systems. The other pieces do not and this is their rule. He noted that it's an unfunded mandate. Steve thinks we need to take care of it on our own. He said we have the ability and feels that it's a better position to maintain that sense of independence. Steve went on to say that $20,000 isn't going to make-or-break this operation. Brad Miller asked if we have an idea of what it will cost to implement the ordinance and doesn't think we need to answer this right now. Wes said the task force feels that we can do it for $20,000 that would be coming from the state and if we go in the direction of the ordinance, it gives us the flexibility to do the engineering and treatment waivers. Some of the concerns that Lou brought up about further testing need to be examined once we pick a direction. Wes said we will need to decide at some point if we want to require that and, if so, there is going to be a fee that is attached. Wes restated that this is the recommendation from the task force and is asking for Board direction. Brad feels that if we keep it simple it might not even cost us $20,000. Steve agreed. Brad would like to keep that idea alive. Wes said that was discussed at the task force meeting with the ordinance. He feels that it is a higher level of work upfront for us to write the ordinance but gives our citizens the most. Brad is concerned that it has been a while since we have talked about Group B systems and they cover quite a range of systems. It could simply be three (3) cabins on a mountain top with a joined water system and frankly he doesn't see a whole lot of need for us to get involved in that. Matt clarified that yes it would be 3-14 connections or serving up to twenty-five (25) individuals. Brad said there are many older systems in Ferry County that have probably been in operation for over forty (40) years with no trouble and there are many that would not need NETCHD involvement. Wes said it is only going forward with new systems and all existing systems are already grandfathered under the new rule now that they don't have to do anything which makes things simpler.
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Brad Miller asked if there is more flexibility within our local ordinance to treat systems differently depending on size. Wes McCart said this is the reason that the task force is recommending the ordinance because there is more flexibility than there would be with a JPR. Brad said he is in favor of going forward with an ordinance.

Dr. Artzis arrived at the meeting at 10:16 A.M.

Lou Janke asked if staff will come up with a proposed draft ordinance or the task force working with staff? Wes said staff will develop a draft ordinance and the task force can have more discussion and then present it to the Board. He believes that to pass an ordinance we need to have a hearing and go through the entire process.

Lou Janke moved and Steve Parker seconded the motion to proceed with a draft local Group B water systems ordinance to be prepared by NETCHD staff along with input by the task force.

Matt Schanz asked for clarification in terms of the monetary amount. If we are going to apply for the $20,000 and sign the MOA for implementation on January 1, 2017 then we will need to start working with DOH on that agreement. There will be costs incurred with development at a staff level of putting the program together, ramping ourselves up to be able to look at those water systems and investing in staff training. Not only have we not had staff trained to review water system packets, our main staff person who has dealt with public water systems has indicated an intent to retire in early 2017. Matt suggested that if it is no: the $20,000 that we would get from the state; it will come from local dollars rather than being pulled away from another program. He would advocate for utilizing state dollars.

Steve said we have a motion and a second on the floor and this is a discussion on a separate topic. Wes said he doesn’t feel that it is. Steve asked Wes how he would see it in the motion. Wes asked if there was any more discussion.

Lou Janke moved and Mike Manus seconded the motion to amend the proposed motion to include working towards applying for the $20,000 per year from the State of Washington to enable us to make this program work without tapping into other funds.

Mike Blankenship asked about strings attached to the money now and in the future. Wes said when he and Representative Shelly Short worked on the bill and had discussions with DOH there was no requirement beyond us having the ordinance and implementing it. Steve said it was a good step forward when DOH understood what we were saying and decided to add some funding. His position would still be that he prefers to use our own local dollars if we are going to accept the program and state that we will shoulder that without asking for state funding. In this instance to authorize a resolution for an LHI to accept the responsibility and then try to also incorporate approval of an MOA and $20,000, we haven’t looked at that and he thinks that is where Mike B.’s point comes in. Steve went on to say that he doesn’t feel comfortable authorizing that step until we have looked at that paper and he would rather wait until the proper time than push back later on. Lou said his intent was that we work towards it and apply for the funding and we can say no.
Matt Schanz said an example of the document that would be signed goes back to the question about what the expectations are. Matt referred to the two (2) page MOA template that states that if we were to accept the local ordinance and within the outline of what was given to us there are no additional deliverables imposed by this grant. Steve Parker said the costs that Matt is describing are one-time start-up costs and maybe some ancillary judicial expenditures on an annual basis depending on how many, but is this per year? Wes McCart noted that conversations with DOH have been very up front stating that there is no long-term commitment for us to continue with a program if the funding is discontinued. Brad Miller also added “or if they started imposing additional strings on the funding”. Wes noted that DOH said they couldn’t guarantee the funding will continue and we basically said that we can’t guarantee that we will continue the program. It is our option and we could repeal the entire program at any time. Steve said in that situation it goes back to where we are now. Wes said “which is where DOH does not want it to go”. Matt said we can terminate such agreement within thirty (30) days of notification. Wes added that DOH would have to notify us of any changes to the agreement.

Karen Skoog asked if the motion on the floor is essentially agreeing to sign the MOA. Wes stated that the initial motion was to proceed with a draft local Group B system ordinance to be prepared by staff with input by the task force. The amendment was to include working towards applying for the $20,000 per year from the state to enable us to make this program work without tapping into other funds. Lou Janke added that the intent is to get things going so everything is in place by the beginning of 2017. It is not fully committing to everything. Wes asked the Board if everyone understood what was being voted on as follows:

Lou Janke moved and Mike Manus seconded the motion to amend the proposed motion to include working towards applying for the $20,000 per year from the State of Washington to enable us to make this program work without tapping into other funds. Motion carried.

Lou Janke moved and Steve Parker seconded the motion to proceed with a draft local Group B water systems ordinance to be prepared by NETCHD staff along with input by the NETCHD task force. Motion carried.

**ADMINISTRATOR POSITION:** Dr. Artzis reported that three (3) applicants were interviewed for the administrator position (a fourth applicant withdrew early on). Because of Matt’s excellent work thus far and because it is felt that he is the best candidate, Dr. Artzis and the Personnel Committee chose Matt for the position of administrator of NETCHD. Wes said there is a recommendation from the Personnel Committee to the Board to hire Matt, but it takes formal Board approval to make that offer.

Lou Janke moved and Mike Manus seconded the motion to confirm the recommendation by the Board of Health Personnel Committee to offer the position of administrator of Northeast Tri County Health District to Matt Schanz. Motion carried.
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Wes McCart informed Matt Schanz that he is being offered the position and asked if he would accept the offer. Lou Janke said it is a bit unfair to put Matt in this position and thinks the offer should be done separately and not in an open forum as it makes him uncomfortable to vote on that when the person is in the room. Wes said “welcome to the Open Public Meetings Act Lou”. Matt said he will accept the offer. Brad Miller suggested meeting in an executive session to discuss the terms with Matt. Steve Parker said the Board has not yet had a discussion on the terms. He feels that Matt needs to wait until a formal offer is developed and presented to see if that offer is acceptable. Wes said salary discussion to present a formal offer is a personnel matter that would require executive session which is already on the agenda.

Dr. Artzis thanked Matt and Sandy Perkins for “stepping up to the plate” after Dave Windom left. He isn’t sure if the Board realizes the job that they asked Matt and Sandy to do with the documents on budget, the history of NETCHD, program descriptions, etc. He couldn’t believe the job that they did to prepare for that, along with Dale House and Kelly LeCaire and everyone else that helped. He appreciates the effort and quality job.

EXECUTIVE SESSION PER RCW 42.30.110 (g): The Board adjourned into executive session at 10:30 A.M for ten (10) minutes per RCW 42.30.110(g). The executive session concluded at 10:40 A.M.

Mike Manus moved and Steve Parker seconded the motion to develop a contract and present a formal offer to Matt Schanz for the position of administrator of Northeast Tri County Health District within the next week. Motion carried.

Matt said he is excited and appreciates the opportunity. Matt was congratulated by the Board. Steve told Matt that this was discussed long and hard and there were some good candidates. Some of the reasons Matt was chosen was locale, professionalism, commitment and his willingness to take on new things. Steve said Matt may need to attend some type of training for this new position. Steve added that this is the time to take advantage of Matt’s good qualities. Matt said he appreciates it.

BUDGET COMMITTEE REPORT FOR 2017 PRELIMINARY BUDGET: Dale House reported that the Budget Committee (Wes McCart, Mike Manus, Brad Miller) met on September 7, 2016. The 2016 budget was adopted using $247,720 of the undesignated fund balance leaving us with approximately $38,633 at the end of 2016. Due to the following positions vacated from the NETCHD Colville office: community health supervisor (retired end of April 2016), community health secretary (resigned end of May 2016), administrator (resigned end of May 2016), and a public health nurse (resigned end of August 2016) and not replacing the community health supervisor or the secretary for 2016 or 2017, as of June 2016, the undesignated fund balance is $271,668. A conservative estimate for the undesignated fund balance at the end of 2016 estimate is approximately $149,733. Replacing the administrator and public health nurse positions and the rest of the staff as is, the full-time equivalent (FTE) is 21.3.
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With adjustments for revenues and expenditures for the family planning program, early head start and the early intervention program, the 2017 budget comes in at $2,078,300. The proposed budget includes a recommended 10% increase in county contributions resulting in an additional $79,623 as follows: Ferry — $9,620, Pend Oreille — $19,382, Stevens — $50,621. At this point $123,141 of the undesignated fund balance would need to be used, potentially leaving NETCHD with a fund balance of $26,592 at the end of 2017. The proposed budget does not include an increase in medical insurance or a different salary schedule that is being considered by the Budget Committee that reduces the years that it takes an employee to reach their maximum salary in hopes of retaining newer staff. Wes McCart said the Budget Committee is looking for input from the Board regarding the preliminary budget. Wes said the Budget Committee is looking at ways to restructure the salary schedule that will be part of the overall budget decision made by the Committee when the final budget is presented to the Board for adoption. Matt Schanz said the most recent salary schedule change would impact the budget at slightly over $1,900 per month, which is comparable to a 1-1.5% typical increase on an annual adjustment that we have seen in the past. Matt said we had initially projected a 13% increase in medical insurance but based on a conversation yesterday with the Washington Counties Insurance Fund (WCIF) because of our agency size, those projections could be upwards of 18%. Matt said we are still looking at some other options. Karen Skoog said even though Premera is still negotiating, Pend Oreille County also belongs to WCIF and their rate increase is 10% and wondered why NETCHD was different. Sandy Perkins said she thinks it had to do with the fact that Premera and Providence Health and Services have reached an agreement but we may have to move from Prime to Heritage. Matt said because of our smaller size we can’t be combined with county employees. Brad Miller said NETCHD is separate from the counties when it comes to this. Karen said it seems that it is something that we could solve. Wes said they can join the same insurance pool as the counties but they fit in a different group. Brad agreed that it seems like there should be a way to incorporate NETCHD into one of the other groups to take advantage of the savings. Brad asked if this preliminary budget has the 13% increase in health insurance. Matt reiterated that this proposed budget does not include an insurance increase. Brad said so we don’t have a clue as to what that increase will look like in terms of the budget. Wes said the Budget Committee hasn’t considered anything other than the 10% increase in county allocations to the preliminary budget as this information wasn’t available to consider at the last Budget Committee meeting. Brad pointed out that even though we are talking about a 10% increase in county contributions, the overall budget is $131,300 less than last year’s budget. Steve Parker asked if that amount was on the revenue side. Dale House said the expenditures are $131,300 less. Steve said so it is on both the expenditure and revenue side. Dale said yes. There was discussion about the cost of just medical insurance in the proposed budget without the increase. Dale said medical insurance is approximately $171,000 and he can get an exact breakdown of benefits. Brad said he is trying to calculate what an 18% increase would be. Lou Janke asked about programs and services since the proposed budget is $131,300 less than the 2016 budget. Wes asked Lou exactly what he is looking for. Lou asked if we are going to try to do more with less or the same with less. Brad said there are staff reductions that aren’t going to be replaced. Wes said the family planning program that was losing money is discontinued but other than that, the programs are staying the same. With less staff, there will be some redistribution of duties and a mixed bag of what program can we transfer to somebody else and not leave someone hanging. Wes added that even with the increase in county contributions we are still not where we need to be and again asked that any ideas be passed on to a Budget Committee member. Brad feels that everyone needs to be part of this conversation.
VAPING AND SMOKING IN PUBLIC PLACES ACT: Sandy Perkins provided information on vaping, the use of electronic cigarettes. Electronic cigarettes are battery operated devices designed to allow users to inhale a vapor containing nicotine or other substances. Evidence from multiple studies, including those conducted by the United States Food and Drug Administration (FDA), indicate that the vapor (aerosol) produced by vaping devices is not safe, having been found to contain chemicals known to cause cancer, and a range of negative health effects. Sandy explained that Chapter 70.160 Revised Code of Washington (RCW) Smoking in Public Places (formerly: Washington clean indoor air act) that prohibited smoking in restaurants, public places, places of employment, etc. did not include vaping in that state law. Spokane County recently passed a resolution to enforce the use of vaping devices in the same ways that smoking cigarettes is enforced and Kitsap County approved a local vapor ordinance. Other counties making changes are Grant, King, Pierce and Snohomish. Sandy asked the Board if they are interested in NETCHD pursuing the development of an ordinance or expanding on what is already in place. Karen Skoog asked if there are statistics available on second hand vaping. Sandy said there is research available. Matt Schanz said if you go back to the origin of the Smoking in Public Places law that passed ten (10) years ago, it was all aimed at preventing the impacts of second hand smoke on people that were having to work in those environments as well as the public, so do we consider adding vaping on to what is in currently in place. Kathleen Turpin said she has already seen vaping added to existing no smoking signs. She asked if there is a problem with people vaping being asked not to and that person saying there is no law against it. Matt said effective June 2016, Washington State did pass state law Chapter 70.345 RCW banning the use of vapor products in child care facilities, elevators, schools, and school buses. Karen asked where vaping would be prohibited. Sandy said privately owned public places such as restaurants or businesses just like where smoking cigarettes are banned. Wes McCart said we would be doing it as a tri-county rather than the state law doing it. Karen asked if it is possible that they might invent some vaping that is good for you that might not be harmful. Steve Parker said they certainly could. Sandy explained that it is about the combustion that happens to create the vapor, whatever the vapor is. She noted that you don’t always know what is being vaped, it could be marijuana based or could be flavored oils. Sandy suggested having Angie Jones come to the next Board meeting and give a presentation as part of preparing to think about this. Angie has a kit that is a great educational tool that demonstrates the different kinds of vaping and effects. Sandy attended a training and was shocked with chemicals used and just the act of combustion. Karen said smoking is basic but vaping is fairly new. Since we don’t know what is going to be created out of that and it may be improving, she would rather not legislate what is done in private businesses unless there is a clear indicator that it is causing real health problems to others. Karen said she personally hasn’t seen it that much and asked the Board how many of them have been adversely affected by vaping in a restaurant or another public place. It has been very discrete whenever she has seen it. Karen said at this point this would be educational unless it became a public hazard. Sandy said she would be happy to bring back more information on the hazards of second hand vaping to provide more information. Karen said she listened to a presentation that made it clear that it is a hazard for the person vaping and is also a hazard to have that equipment around children. Karen said she would not feel comfortable making a statement about second hand vaping. Sandy reiterated that it wasn’t a request for a Board decision but rather looking for direction as to whether we should move forward in researching this further. Steve said the direction that he feels comfortable with would be to continue to bring forth information starting with the presentation at the next meeting. The Board concurred.
WASTEWATER TECHNOLOGY TO REPAIR FAILING SYSTEMS STATUS UPDATE: Matt Schanz said this is a follow up to a conversation that was initiated at the July 2016 Board meeting regarding efforts to establish some standards of use for those being employed to repair failing septic systems. As it happens right now, if your septic system fails you must go through a full replacement process of the components that are problematic. There is technology that has been developed that inserts air pellets and tries to break up the soil particles to fix that. The process isn’t cheap but there are no standards that have applied to that and under what circumstances that it should be utilized. It is our effort to try to implement a standards and guidance document based off an existing document that Washington State Department of Health (DOH) developed. Matt said this is just a Board update to say that we have not had a chance to go back and further those conversations with the people in the industry and have not yet developed a document to bring to the Board. Wes McCart noted that there have been many other things that everyone has had to deal with. Karen Skoog asked if this is an additional regulation or information available for people to decide if it’s something they may want to try. Matt said the concept and DOH guidance document gives the direction for the rest of the state is that there needs to be a preliminary review done to say is this an appropriate technology to use under these circumstances or will it continue to lead to problems down the road. There would be some type of cursory review process that says go ahead and use it and let us know if it works. As of right now the way the law is written within Washington Administrative Code (WAC) 246-271 says if your septic system is failing, those components must be replaced. This would be a waiver of state rules within this guidance document and there would be a small cost incurred for NETCHD to review that information and give approval for use. Matt gave an example of an attempt to avoid a situation where someone has a very old failing septic system that is no longer doing the job and is located twenty (20) feet from a lake and they want to use this process. This is not the right process for this situation. Wes said there will be more information to come.

WEST NILE VIRUS AND MOSQUITO ACTIVITY – NATIONAL PARK SERVICE LETTER REGARDING MOSQUITO ACTIVITY: Wes presented a letter to the National Park Service (NPS) in hopes of the Board authorizing he and Dr. Artizs to sign regarding West Nile Virus (WNV) and mosquito activity. Matt provided an overview of WNV and mosquito activity within our area. WNV has been detected in the United States (U.S.) since 1999, and made its way across the U.S. It was first detected in Pend Oreille County in a dead crow in 2001 and for the most part, in those years since there has been very low activities within the tri-county area except for this year. This year we saw the first mosquito pool that had WNV detected in it and have had horses in both Pend Oreille and Stevens County test positive for WNV. Thankfully there have been no human cases that we are aware of that have went through the detection process which doesn’t mean that we don’t have people that have had that illness but none that were confirmed. This is the first year that we have seen those numbers pick up in surveillance activities and even up until last week there was one more horse each in Pend Oreille and Stevens Counties with a total of five (5) horses in Stevens and two (2) in Pend Oreille. Mosquito surveillance around Lake Roosevelt began in 2014. We had a detection of a WNV positive pool in late July 2016. Two (2) human cases have been confirmed in Spokane County and in the Tri-Cities area. Sandy Perkins noted that a human death from WNV occurred in the Tri-Cities.
Matt Schanz said along with this have been increased numbers of mosquitoes around Lake Roosevelt specifically in the Kettle Falls area on both sides of Ferry and Stevens Counties. Just from observations in 2014 we heard from the public loud and clear that they were seeing more mosquito activity in those areas. We facilitated a conversation between DOH and NPS to request that sampling be done to determine the type of mosquitoes that are there, general numbers, when we see them and when they start to tail off. Those efforts started in earnest in 2015 and continued through 2016. The surveillance activities have shown that at certain times of the year we have some of the highest numbers detected in the state. Matt has spent a lot of time on the phone with people that are upset about the mosquitoes around Lake Roosevelt and the desire to have something done. He feels that from a public health standpoint we want to be part of that conversation so that we don’t come to this Board and say there’s people that have been impacted by WNV activity. The letter to NPS lines out the case of what we know about mosquito surveillance in that area and some of the reasons for it. When you look at those reasons, lake level elevations and that Columbia River negotiations about downstream use have an impact. Where we saw full pool elevations remain and come up the first part of July, stay there and then slowly go down, what we are seeing is a drastic decrease to meet those Columbia River irrigation demands which leaves areas with stagnant water right at the same time we are having peak temperatures that has created a perfect breeding environment for mosquitoes. The letter is intended to express to the NPS that we implore them to develop an integrated mosquito management plan for impacted areas of Lake Roosevelt. Wes McCart said the letter is addressed to Dan Foster, Lake Roosevelt National Recreation Area Superintendent of the NPS. Wes spoke with Dan Foster regarding the draft letter and Dan Foster felt the letter was a good idea because of public health reasons that would help him get a program implemented to keep the mosquito population down and reduce that risk.

Mike Blankenship thanked Matt for the analysis of why, but now let’s fix the problem. He feels that we need to be talking to the Department of Ecology (DOE) and those who maintain the lake levels because we now have a side effect to a decision that was made 5-6 years ago, to lower the lake an extra eighteen (18) inches in the fall which is from what Matt is indicating and he would concur that we have left these smaller pools all along Lake Roosevelt for breeding. This goes back to that decision to lower the lake and we are going to end up having to fight mosquitoes and possibly having to use chemicals that probably shouldn’t be around water. Wes said there is discussion about a different method other than chemicals. Mike B. added that nonetheless the cause of the problem was the drawdown of the lake. Wes doesn’t think the extra eighteen (18) inches was the main cause. Matt said a lot has to do with the Quincy Sub-Basin and trying to meet those agreements that were laid out in 1930’s. Mike B. said the change in the lake level happened just about the time you started to see the increase in mosquito population. Matt agreed. Mike B. said he would argue, especially in the Old Kettle Falls area, that we haven’t been able to use that swimming area. When he first came to the area it was a beautiful place to swim. You don’t dare go in there now because of swimmer’s itch and whatever else and it’s not a desirable place to be in the summertime because of the mosquitoes etc. He asked why it changed from 1977 until now. Those questions need to be answered. Wes said we got a one-time payment for that drawdown. Mike B. said that is his exact point and we are the only ones that got the one-time payment when everyone else got annual payments. Wes said having that discussion might forward the fact that we have issues from that decision that the state needs to take responsibility for. Mike B. said the repercussion is that you are likely going to see WNV and it will end up in humans and something drastic needs done right away.
Steve Parker asked what is involved with mosquito management. Matt Schanz said the NPS have absolutely no control over lake levels. Now that we have the Columbia River initiative agreements, they are faced with how to deal with impacts and developing the mosquito management program that may include dredging some of those stagnant areas. When you go back in time and look at the corridor from the Kettle Falls Marina out towards the Old Kettle Campground, that area used to be dredged out for vegetation management and now it is a slack water area that is a perfect breeding ground for mosquitos. Matt said the integrated management plan is to gain some funding support towards some improvements to get more water flushing through those areas using a very commonly used larvicide called bacillus thuringiensis that is applied to prevent the hatch-out of the adult mosquitos. Wes McCart said the intent of the letter is to ask the NPS to work with us to come up with something that is going to help address this issue. Wes would like a motion from the Board to authorize the Board Chair and Health Officer to sign the letter.

Brad Miller moved and Karen Skoog seconded the motion to authorize the signatures of Board Chair Wes McCart and Health Officer Dr. Artizis to sign the letter addressed to Dan Foster, Lake Roosevelt National Recreation Area Superintendent, National Park Service requesting support of an effective integrated mosquito management plan for impacted areas of Lake Roosevelt recreation areas located in Ferry and Stevens Counties.

Kathleen Turpin referred to the list of those receiving a carbon copy (cc) of the letter and asked that Pend Oreille County Commissioners be added to the list along with Ferry and Stevens. Steve said it involves Lake Roosevelt. Kathleen said we are all part of the tri-county. Wes said Pend Oreille County Board of Commissioners will be added. Wes asked if any others should be added. Mike Blankenship said the Army Corps of Engineers as they regulate lake levels. Wes said the Bureau of Reclamation and Steve suggested Bonneville Power Administration (BPA). Wes said BPA has nothing to do with this, it is not a BPA dam. If the Army Corps of Engineers gets a copy of the letter they are part of the ongoing discussion and as Mike B. said, they regulate lake levels and they are in discussions with BPA. Steve said BPA makes power requests for Southern California which does have direct impact on drawdown levels and timing etc. Mike B. suggested state legislators and Lou Janke said this needs to be elevated to include all representatives and the governor to get people’s attention. Wes suggests Environmental Protection Agency (EPA) and Mike B. suggested the Department of Ecology as well. Wes said he doesn’t have a problem adding as many cc’s as the Board wants. Karen Skoog suggested the Office of Columbia River (OCR) at DOE. Steve said you can include state senators. Mike B. said that is a good idea to let them know we are having issues and start the conversations as it goes along. Steve suggested also including Cathy McMorr’s Rodgers, Maria Cantwell and Patty Murray.

Lou said it not only impacts health potentially but it also influences tourism. Matt said the NPS locally has talked about the fifteen (15) million dollars invested in improvements just within a small area and they are seeing cancellations and a decrease in use. Steve noted that this isn’t just centered with Kettle Falls. There are huge portions at North Gorge and Evans campgrounds that have the same flooding of vegetated areas and as soon as the water is drawn down it leaves a small swamp. Matt said we tried to word the letter to include all areas by saying “impacted areas of Lake Roosevelt recreation area located in Ferry and Stevens Counties”. Wes noted that all mentioned above will receive a copy of the letter. Motion carried.
AMBULANCE SERVICES ISSUES: Mike Manus said the ambulance service in Pend Oreille County is a private nonprofit that closed about a month ago, which resulted in fire departments having to perform ambulance service including some transports to the hospital, though they are not licensed to transport. Another ambulance service cannot be brought in because there are only five (5) licenses in the county. He said the state is aware of what is happening and understands the situation. The real problem is with the way the system works with Medicaid and Medicare reimbursement rates anywhere from 11% from Medicaid to the highest at 25% and from Medicare anywhere between 25%-50%. Ambulance services are difficult at best to operate given that most are volunteers. Mike M. said Pend Oreille County may have to run a levy to subsidize ambulance services and may look at forming a county wide emergency management services (EMS) district that would be the overseers. Mike M. and Wes McCart have talked to Shelly Short about it. Mike M. brought it up at the Washington State Association of Counties (WSAC) Board meeting last week in hopes of getting WSAC involved in a fix for the payment model coming from Medicaid. Mike M. talked about issues with the healthcare system and with underfunding that is happening everywhere. Critical services in Pend Oreille County have already been impacted. Wes said the same type of discussion took place at the healthcare roundtable in Stevens County last week. One issue is the difficulty in finding volunteers, part of that is because they are paid extraordinarily low and there isn’t enough money because the reimbursement rate is so low to hire people full time. There are issues with training because the prospects of a decent wage are an issue. Brad Miller added that training costs have greatly increased. Dr. Artzis said volunteerism is down across the country. Another issue is the difficulty of testing with a 70% fail rate on the first attempt. Ten (10) years ago the cost to take the test was $300 and has increased by almost five (5) times since then. Another issue with local testing is people were cheating. The state had no part of it. He said we aren’t going to get away from testing through the National Registry of Emergency Medical Technicians (NREMT). He said there is no chance of having testing locally as in the past. Brad asked why that is as it seems like the key to the problem. Dr. Artzis suggested having everyone involved talking to the state. Another issue is that most of the ambulance service people at the state level that have been there for years just turned over and there are all new staff so they are trying to reorganize right now.

Dr. Artzis said a possible solution would be to create a district which is what Pend Oreille County maybe doing. That would result in raising taxes on the citizens and possibly run a levy, which can be difficult to pass. He talked about issues and legality of transporting in an emergency when no ambulance is available. If no other resources are available, you are legally able to transport, provided there is someone trained in the vehicle. Mike M. said they have emergency medical technicians (EMTs). Wes McCart said at the healthcare roundtable it was brought up that the state ambulance service has asked the Health Care Authority (HCA) for an increase in the Medicaid reimbursement rate. The information compares what Medicaid and Medicare pay in Washington, Idaho and Oregon. A letter from HCA basically says they realize that reimbursement from Medicaid is inadequate and they haven’t raised or even looked at the rates for more time than they should have. Wes noted that it takes the legislature to raise those rates and even that is a huge factor, he doesn’t think that simply increasing the rates is the end-all solution. Wes shared the information with Representative Shelly Short and will be talking to Representative Joe Schmick who are both on the health care committee. Wes appreciates it being brought up at WSAC and will bring it up at Council of Governments (COG) and other arenas to get some momentum behind solving this issue. Wes wants the Board and NETCHD to be aware that this is impacting our health care on every level and is something that we need to deal with.
Steve Parker said we also need to look at how many services that are tax funded can we support which ties back to discussions that NETCHD staff have already had about core services that must be taken care of for public and environmental health services versus services that have been picked up over time for various reasons. In the county-wide services, we need to rank what is an ambulance service and determine if it is a core service that must be provided for rural people. Should it be funded at the state level and if so, are there other programs that are being funded that are utilizing public dollars that should go towards what we would consider primary need for citizens. Mike Manus said it is most definitely a health, safety and welfare problem.

Brad Miller said Ferry County has a fire district that has its own ambulance and is all funded through the fire district and they also have an ambulance district that is partially funded by taxes. Mike M. asked if they have a levy. Brad said yes but only for part of the county as it is not county-wide. The other district manages to do it within their fire district levy. Brad said he started out as an EMT in 1977 and over the course of time the requirements became so onerous that he gave it up. Part of what is happening in the state and our society is our expectations have exceeded our abilities for volunteers. So basically, we have squeezed the volunteers out of this process because what used to be very functional as an EMT you could do the things that you needed to do to stabilize a patient, put them in the ambulance and transport to the hospital. In rural communities, there is still a need for volunteers but that isn't taken into consideration when laws and rules about training are developed as well as high costs. Wes reiterated that this is a huge issue that we need everybody working together and coming up with solutions.

**RESCHEDULE NOVEMBER 16, 2016 BOARD OF HEALTH MEETING:** Wes McCart said due to scheduling conflicts, the Board of Health meeting will be rescheduled to Wednesday, November 30, 2016 in Stevens County.

**CHAIRMAN REPORT:** Wes thanked Matt Schanz, Sandy Perkins and Dale House for filling in as interim.

**TASK FORCE UPDATE:** Wes reported that the task force spent some time debating whether you can update a charter asked for legal opinion. The opinion from Alison McGrane is that the NETCHD Charter is a combination of a charter and bylaws and it was our decision whether to update the charter or go ahead and adopt separate bylaws. The task force spent a great deal of time identifying things that need updating. The next task force meeting on October 5, 2016 will emphasize discussing which direction do we want to recommend and what the solutions are. The task force is going to be bring anything that requires adoption to this Board for full discussion. There was also discussion about Group B water systems.

Wes noted that the Budget Committee is moving forward trying to figure out how we keep everything afloat.

**BOARD OF HEALTH MEMBERS REPORTS:** Mike Manus thanked the team for keeping us afloat and all your efforts. He said “you are exceptional”.
Brad Miller said he appreciates Dale House, Matt Schanz, Sandy Perkins, Kelly LeCaire, Vicki Eveland and the whole crew, but especially these folks here. They have done a really great job and he appreciates it.

HEALTH OFFICER: Dr. Artzis said Matt and Sandy are very good at dealing with issues that we talked about today and have done an excellent job with WNV and vaping and other health issues that have come up. He talked about the direction public health is going as a community partner and coordinating services in the community. In the spirit of that, the first very big problem that he would like to tackle is fall prevention in the elderly. Elderly falling has a very high cost and recuperation is amazing. Governor Jay Inslee made September 22, 2016 Falls Prevention Awareness day. There are programs out there that are of no cost to us.

Dr. Artzis talked about possibly doing a “Patch Adams wellness clinic” at NETCHD that would have no financial cost or Board impact that could maybe be staffed with residency nurses. He said Dr. Waters knows nothing about it until now. There are certainly people that don’t want to go to a clinic at Providence or NEW Health Programs for that matter and it’s hard to get appointments. That is one of those gaps that we talked about and would like to see us be proactive. He doesn’t know how it’s going to look but he thinks it is one of those things that we can address in the residency program. Wes McCart said that would be a great thing to bring up at the health care roundtable. Dr. Artzis said he doesn’t want to step on NEW Health Program’s toes because they just expanded etc., but he thinks we are all busy enough and can have that conversation.

COMMUNITY HEALTH REPORT: Sandy said fall prevention is important and many health departments have taken it on as a community campaign. DOH is wanting a campaign for hepatitis C prevention.

The family planning clinics in Republic and Newport have discontinued scheduled clinic appointments and the Colville clinic will do the same at the end of September 2016. Sandy will miss seeing the medical residents. She said it is a difficult transition. The program will complete required activities that are necessary when a Title X family planning agency discontinues clinic services. These activities will be completed by the end of 2016. The staff person who has been doing the clinic scheduling, billing, etc. has been learning new duties in the WIC, maternal child health (MCH) and communicable disease investigation programs. She noted that the “Patch Adams clinic” concept is interesting.

The remaining public health nurse (PHN) in the Colville office left her position at the end of August 2016. We have advertised for either a PHN or health educator as a replacement. Of the applications received so far only is a registered nurse. As NETCHD has reduced clinical services that require a nursing license, the consideration of hiring a non-nurse has come to the forefront as the programs are changing to ones that could be done by a non-nurse such as the marijuana/tobacco youth prevention program. The problem with this type of change is that there is not the “surge capacity” available of a licensed medical professional who might be needed to administer medications/injections in an outbreak situation. PHNs have been the “utility players” in community health services divisions in local health jurisdictions for many years capable of doing many health-related activities.
ADMINISTRATION REPORT: Since the July 2016 Board of Health (BOH) meeting, Management Team and administrative staff has been engaged in the following tasks and efforts:

- Meeting with BOH Chair to coordinate activities every other week.
- Task force organization and meeting to discuss governance and Group B water systems.
- Staff and Management Team members have been actively involved in the recruitment, interview and hiring process of the administrator position.
- The Budget Committee met on September 7, 2016 to discussed current financials, expected year end balances, and began to develop a 2017 budget proposal.
- As part of the work on the 2017 budget proposal, administrative staff worked to develop a revised salary schedule proposal, reducing the current schedule of thirty (30) years to fewer steps needed to reach the top end of the salary schedule.

NETCHD Staff from all three (3) offices will be meeting in Colville from 9:30 A.M. to 2:30 P.M. on October 18, 2016 for a meeting and training session. BOH members are invited to attend.

A workgroup of NETCHD employees have been meeting and working on improving our technology resources. These discussions have demonstrated the need for updates to and development of policy/procedures for management of the NETCHD webpage; social media; texting; and computer use.

In response to Board member’s suggestions, administrative staff have continued to develop electronic site with file sharing capabilities. The intent is to develop a shared file location that Board members can log into and view the following BOH information: orientation material; member contact lists; past meeting packets; upcoming meeting packets; approved minutes; resolutions; NETCHD annual reports. This resource site will continue to be a work in progress and if there are suggestions for improvements please let staff know.

The budget package from DOH being submitted to the Office of Financial Management includes the following eight (8) areas:

- Foundational Public Health including funds for local health jurisdictions including communicable and chronic diseases as well as other pilot projects
- Healthiest Next Generation work focusing on children’s health
- Opioid use prevention and treatment
- Hepatitis C surveillance and response including case management
- Lead (Pb) initiative (water contamination)
- Climate change, health effects
- Education to health care providers to increase the use of Long-Acting Reversible Contraceptive (LARC) methods
- Data systems improvement

The Action Alliance for Suicide Prevention has begun meeting (former Administrator David Windom is the local health jurisdiction representative to this group)
ENVIRONMENTAL HEALTH REPORT: As previously discussed, the summer of 2016 marks the most WNV activity that has been detected since the virus arrived in Washington State in 2001 (which was observed first in Pend Oreille County in a crow). Our area has been impacted due to the combination of warm weather, standing water, and vegetation providing habitat for mosquitoes and birds that carry the virus. Staff at NETCHD have worked with local media sources and utilized our webpage/social media to inform the public about WNV activity and ways to prevent illness. We have also been working with NPS to request effective mosquito management in heavily impacted areas along Lake Roosevelt in both Ferry and Stevens Counties.

The construction of the collection and treatment system for the Curlew community sewer system is well under way. The treatment system is near completion and the side sewer work should be completed by October or November 2016.

Ferry County has begun to establish a Local Emergency Planning Committee (LEPC) and staff from NETCHD have been participating with this group to assist in updating the multi hazard mitigation plan and the comprehensive emergency management plan.

NETCHD has been assisting Sacheen Lake Sewer and Water District in addressing homeowners who are now connected to the community sewer system but are delinquent in paying dues. NETCHD's involvement is to ensure that public health is not jeopardized if sewer service is discontinued to these properties.

As Ecology continues to meet with stakeholders on the revision to the water availability guidance to meet RCW 19.27.097, the focus has been on the legal availability of water. Absent has been considerations towards determinations of quality. Efforts to develop information that can either be incorporated into the final guidance or added as an appendix, the Drinking Water Subcommittee of the Environmental Health Directors have been working with DOH to develop guidance on the potable water availability. A draft document has been developed and is undergoing review currently. This document can be made available upon request to Board members.

ANNOUNCEMENTS: There were no announcements

ACCOUNTS: Attached to these minutes are benefits and payroll amounts from August 5, 2016 through September 2, 2016; and voucher amounts from July 20, 2016 through September 14, 2016.

PUBLIC COMMENT: Medical Resident Caleb Holtzer said he has been working in the family planning clinic for the past year and has enjoyed the opportunity to take care of that segment of the population. He would like to do more in future.

Dr. Waters asked about public comment during Board meetings. Wes McCart stated that it is normally okay with smaller numbers of public attendees to raise your hand to comment.
ADJOURNMENT: Board Chair Wes McCart adjourned the meeting at 12:00 P.M. The next regular meeting of the Board of Health of Northeast Tri County Health District will be on Wednesday, November 30, 2016 in Stevens County.

Respectfully submitted,

Samuel A. Arizis, M.D., Health Officer

By

Kelly D. LeCaire, Executive Secretary

Wes McCart, Chair
Northeast Tri County Health District

The following voucher/warrants are approved for payment:

2016

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