#### KING COUNTY BOARD OF HEALTH

999 Third Avenue, Suite 1200 Seattle, Washington 98104-4039

Carolyn Edmonds, Board of Health Chair

#### **BOH Members:**

Richard Conlin George W. Counts Jan Drago Carolyn Edmonds Ava Frisinger Larry Gossett Steve Hammond David Hutchinson David Irons Kathy Lambert Frankie T. Manning Bud Nicola Julia Patterson Alonzo Plough Tom Rasmussen

#### BOH Staff:

Wendy Roark

# King County Board of Health Friday, February 20, 2004 King County Council Chambers MEETING PROCEEDINGS

**Members Present:** Richard Conlin, Carolyn Edmonds, Ava Frisinger, David Irons, Kathy Lambert, Frankie Manning, Julia Patterson, Steve Hammond, Tom Rasmussen, Jan Drago, and David Hutchinson

Members Absent: Larry Gossett, Bud Nicola, and George Counts

**Staff:** Alonzo Plough and Lisa Werlech

## I. Subject Call to Order

The meeting was called to order at 9:40 a.m. by Board Chair, Carolyn Edmonds

### II. Subject Announcement of Alternates

Chair Edmonds: No alternates present.

### III. Subject Approval of Minutes

A motion was made to approve the minutes of January 23, 2004. The motion was seconded and the minutes were approved.

# IV. Subject General Public Comments

Sharron Shariff, Issaguah, Washington

Mr. Shariff sought the Board's comments regarding a shift in disease epidemiology from children contracting certain diseases to a higher rate of adults contracting these diseases, such as measles. He also commented on the increased health risks to adults, as opposed to children, contracting measles.

Dr. Plough referred Mr. Shariff to the Public Health – Seattle & King County website, specifically the epidemiology section, which lists historical trends



related to infectious diseases. Dr. Plough assured Mr. Shariff that the Health Department can provide additional information if needed.

## V. Subject Chair's Report

Chair Edmonds reported that there was no meeting of the State Board of Health in the past month, but that the Executive Director, Don Soma, retired.

Chair Edmonds will be participating in the search for the new Executive Director of the State Board of Health. Chair Edmonds also announced that Joe Finkbiner, who represented the tribes on the State Board of Health, retired and that his vacated position has been filled. At the March 19, 2004 meeting, Chair Edmonds will identify the individual who filled this vacancy.

Chair Edmonds indicated that the legislative session is proceeding. The smoking ban in public places bill is dead in both houses, but Chair Edmonds stated she was pleased regarding the amount of attention this bill received and is hopeful this bill will pass in a future session. Chair Edmonds updated the Board on the status of the smoking ban in Pierce County. On February 26<sup>th</sup> the Court of Appeals Commissioner Ernetta Skerlec will consider the Tacoma-Pierce County Health Department's request for an emergency stay of Judge Culpepper's decision to overturn the ban. The Tacoma-Pierce County Health Department expects legal fees to be in the neighborhood of \$200,000.

Chair Edmonds stated that the Mental Health Parity bill passed the house but is not expected to pass out of the Senate. There is an effort, through the supplemental budget, to restore \$5.8 million to mental health funding. Not all of this funding will come to King County, but a large portion will. The word from both chambers is that this funding will be restored.

# VI. Subject Board Member's Updates

Board Member Patterson raised the issue of diverting non-violent offenders into alternatives to incarceration, such as work crews, drug programs, and mental health treatment. Board Member Patterson expressed dismay that over 400 heroin addicts in King County are on a waiting list for methadone treatment. The treatment is not available due to a lack of federal funding. Methadone treatment has proven to be very successful in helping individuals overcome their heroin addiction and become contributing members of society. Board Member Patterson asked that the Board be briefed on this subject this year. Other Board members concurred that a briefing on the methadone treatment issue would be valuable. Board Member Drago stated that the Seattle City Council has worked diligently to increase accessibility in methadone treatment programs for heroin addicts. Board Member Manning commented that the Veteran's Administration has a large methadone treatment program that is available to veterans. There are partnerships in place with jails and other correctional institutions, but many people who could benefit from this program, are falling through the cracks.

Dr. Plough assured the Board that department staff would present a briefing on methadone treatment, as well as the needle exchange program and mental health issues, which are closely tied to drug addiction. The needle exchange program helps reduce infectious diseases such as HIV/AIDS and Hepatitis C. Mental illness is often a cause of drug addiction, since the addict is often trying to self-medicate.

# VII. Subject Director's Report

## Avian Influenza

Dr. Plough updated the Board on avian influenza in the United States. One incident involving chickens was noted in Delaware, but there have been no documented human cases in the United States. The strain being seen in Delaware is the less virulent A5 strain rather than the A7 strain being seen in Thailand and other parts of Asia.

This is an important public health situation both locally and globally, since this is the first stage of monitoring for pandemic influenza. The CDC has five stages in their warning system, and we are in the "novel virus alert phase," because the H5N1 strain going around parts of Asia has infected humans. There have been no human-to-human transmissions, which would be characterized as a pandemic alert phase.

According to Dr. Plough, there were waves of pandemic influenza in 1918, 1957, and 1968. Preliminary estimates indicate that if there was a pandemic influenza outbreak now there would be 88,000 to 227,000 deaths and the economic impact would be between \$71 and \$166,000 billion. Public Health is monitoring this situation closely. There has been no human disease in this country, but as we learned with SARS, we are inextricably linked with the global epidemiology of these emerging infections. Dr. Plough reiterated that good public health practice is safe handling of live poultry.

#### Institute of Medicine

Dr. Plough stated that the May 24<sup>th</sup> Board of Health meeting will focus on the Institute of Medicine briefing presented by Kathy Cahill, a chief strategic planner for the Center for Disease Control (CDC), and Patrick Libby, the Executive Director of the National Association of City and County Health Officials. These individuals will discuss the emerging role of "metropolitan health departments" and the CDC's desire to have a stronger programmatic relationship with these departments to address health disparities, preparedness, issues, funding strategies, etc. Chair Edmonds stated that Dr. Nicola has been very involved in the development of this report and encouraged all Board members to attend the May 21 meeting.

## VIII. Subject Childhood Immunizations Briefing

Dr. Plough introduced David Bibus, Administrator of the Immunization Program at Public Health, and Dr. Ed Marcuse, a pediatrician and Associate Medical Director at Children's Hospital and Regional Health Center; professor of Pediatrics at University of Washington School of Medicine; and member of the National Advisory Committee on Immunization Practice. Mr. Bibus and Dr. Marcus presented a briefing on the current issues and challenges for childhood immunizations.

Mr. Bibus stated that the CDC's publication, MMWR, reported that immunizations are among the top ten greatest public health achievements in the 20<sup>th</sup> century. Vaccines protect children and adults against 15 life threatening or debilitating diseases and have reduced diseases by more that 97% from peak levels before vaccines were available. As an example, the number of measles cases have diminished from approximately 10,000 cases in Washington during the 1950s and 1960s to just a handful of cases currently.

Mr. Bibus described the immunization schedule for children and noted two benchmarks for immunization rates: (1) the 19-35 months of age group; (2) school entry. The number of immunizations among school entry children has decreased from 88.8% in 1998-99 to 82.5% in the 2002-03 school year. The number of parents claiming exemptions has increased from 3.2% to 4.2% for the same school years. Mr. Bibus cited some possible reasons for decreased immunization rates in King County:

- High unemployment;
- High numbers of uninsured families;
- Vaccine hesitancy among parents (may be due to an increase in perceived risk of immunizations in conjunction with a decreased in perceived risk of disease);
- Complexity of immunization schedule/numerous injection
- Vaccine shortages;
- Health care provider practices.

There are an average of 45,000 visits per year to the Seattle – King County Department of Public Health's nine immunization clinics. The Health Department also distributes state and federally funded vaccine to 300 clinics throughout King County. The Training on Immunization for Practitioners and Staff (TIPS) program works with health care providers to improve immunization rates. Mr. Bibus stated that federal funding for the immunization program has fluctuated in the last nine years from a high of \$1,217,647. in 1996 to a low of \$326,189 in 2000. Federal funding for immunizations has decreased as funds have shifted to other health priorities. State contribution for vaccines has actually increased.

Dr. Marcuse discussed three key issues: (1) sustaining societal consensus for immunizations; (2) immunization exemptions, and (3) support for school entry laws. Dr. Marcuse stated that the number of vaccines currently recommended for children has increased dramatically over the last 10 or 12 years, because science and technology have combined to make it possible to prevent many diseases that were previously part of childhood.

Overall there is broad support for immunizations, but there are a significant number of parents who misunderstand some issues regarding immunizations and choose to opt out. Dr. Marcuse stated that the health community gets nervous when the immunization exemption rate approaches 5%. Individuals who opt out of immunizations are not evenly distributed throughout any state or community. Approximately one quarter of the public believes that too many immunizations weaken the immune system, that children receive too many shots, or that vaccines are not safe.

Dr. Marcuse explored some of the reasons for vaccine hesitancy. There has been a decline in vaccine preventable diseases such as polio that may have been a concern to older generations, but is no longer of concern. There is also a recognition of the limits of science and technology, a resurgence of complementary and alternative medicine, a growth of consumerism, and issues of malpractice and product liability litigation.

## IX. Subject Environmental Health Briefing

Chair Edmonds introduced Dr. Ngozi Oleru, Environmental Health Division Manager, Seattle-King County Department of Public Health. The national Association of County and City Health Officials defines environmental public health as "the discipline that focuses on the health interrelationship between people and their environment." According to Dr. Oleru, environmental public health monitoring, regulation, and education has contributed to a 30-year increase in life expectancy from 1900 to 1998 as published by the CDC. As a result of sanitation, more than 80% of human disease has been eliminated.

Dr. Oleru addressed how CTV is helping to put public health into practice by publicizing a series of informational issues intending to educate and empower people about environmental health in the community. The "Spotlight on Environmental Health" series has featured dangers of wood smoke, West Nile Virus, septic systems, food safety, and bioterrorism. The Health Department has mobilized community partnerships to identify and solve environmental health problems by regulating standardized inspection processes and enforcing laws related to public health.

Dr. Oleru discussed the Local Hazardous Waste program, which has phone lines that residents and businesses may call regarding questions and resources. Dr. Oleru promotes a competent work force by providing staff with continuing education opportunities through workshops and conferences. All inspectors must be registered sanitation inspectors through a certification process.

Dr. Oleru described evaluating the effectiveness, accessibility, and quality of personal and population-based services through communication with various stakeholder groups such as schools, and food and meat programs.

The Environmental Health Division also conducts research for new insights and innovation regarding environmental health problems and issues. An example is the Tacoma Smelter Plume project for which the Health Department developed the procedures that the state is using for current activities at the site.

Dr. Oleru reminded the Board that attention must be focused on continuous environmental health monitoring of such issues as pollutants, toxic chemicals, air quality, hazardous waste, bio-monitoring (measuring the amount of contaminants in the human body), lead poisoning, food safety, vector nuisance concerns, water quality, biotoxins in shellfish, and noise from industrial sources. These issues pose significant

concer	ns to	the	health	of	communities	and	extend	into	land	use	planning	and	region	ıa
develo	pmen	t., sı	uch as	trar	sportation.									

Dr. Oleru emphasized the importance of working cooperatively with community partners to identify environmental health risks and implement effective measures to prevent illness and promote prevention of diseases.

Χ.	Subject	Adjournment	
Chair	Edmonds adjourned	the meeting at 12:05 p.m.	
KING	COUNTY BOARD O	F HEALTH	
CARC	DLYN EDMONDS, CH		DATE