



ISLAND COUNTY BOARD OF HEALTH

AGENDA

REGULAR SESSION

December 19, 2023, 1:00 p.m.

Commissioners Hearing Room B102

Coupeville Annex Building

Meetings are available remotely. Those interested in attending the meetings by computer, tablet, or smartphone may use the following link: <https://tinyurl.com/IslandCountyBOH> or by telephone: 1-323-433-2396 Meeting ID 971 2319 5885 Passcode: 626749

Call to Order: December 19, 2023, Regular Session of the Island County Board of Health

Additions or Changes to the Agenda:

Approval of the Minutes:

- October 17, 2023, Minutes

Public Input/Comments: The Board values the public's input. This time is set aside to hear from the public on subjects of a health-related nature, not on the scheduled agenda. All information given is taken under advisement. Unless emergent in nature no action is taken. To ensure proper recording of comments, state your name and address clearly into the microphone. Limit your comment to two minutes. The Board may entertain public comment on specific agenda items when discussed.

Election of 2024 Chair to the Board of Health:

- Discuss the appointment of the 2024 Chair for the Island County Board of Health, Commissioner Johnson - 5 minutes

Action: Approve new Chair for Island County Board of Health

Proclamation:

- Discuss Health in All Policies (HiAP) Proclamation, presented by Public Health Director Shawn Morris - 15 minutes

HiAP recognizes that health is created by a multitude of factors beyond healthcare and, in many cases, beyond the scope of traditional public health activities. – *Attachment*.

Action: Approve Resolution

Presentation:

- Public Health Fee Schedule Update, presented by Public Health Director Shawn Morris and Environmental Health Manager, Heather Kortuem— 15 minutes

Review the proposed Fee Schedule Update for 2024, adjusting all Public Health fees based on Consumer Price Index (CPI) adjustments since the last update in 2019. – *Attachments*

Action: Approve Fee Schedule Update Resolution HD-03-2023

Presentation:

- CHAB Update: General update on CHA process, presented by Taylor Lawson, MPH, Community Health Assessment Supervisor. – *20 minutes – Attachment*

Presentation:

- Strategic Vision presentation, presented by Public Health Director Shawn Morris – *20 minutes*

Review the strategic vision document which helps us prioritize efforts and allocate resources effectively. This presentation introduces a 5-year strategic vision exercise for Board of Health input. – *Attachments*

Updates:

- Fruit and Vegetable RX Memorandum of Understanding, presented by Megan Works, Community Health Manager – *10 minutes*
- Legislative Update, presented by Shawn Morris, Public Health Director – *5 minutes – Attachment*

Board Announcements:

Adjourn: The next *Regular Session* of the Island County Board of Health will be held on **January 16th, 2024, at 1:00 p.m.** in the Commissioners Hearing Room (B102) in the Coupeville Annex Building.



ISLAND COUNTY BOARD OF
HEALTH
MINUTES
REGULAR SESSION
October 17th, 2023

The Island County Board of Health met in Regular Session on October 17th, 2023, in the Board of County Commissioners Hearing Room (Room #102B), Annex Building, 1 N.E. 6th Street, Coupeville, Washington.

Members present:

Commissioner Jill Johnson, Chair
Commissioner Melanie Bacon
Commissioner Janet St. Clair
Mayor Robert Severns
Dr. Howard Leibrand
Capt. Althoff

Member present by video:

Members Excused:

Commissioner Ron Wallin

Others present:

Dr Shawn Morris
Melissa Overbury-Howland
Lynda Austin

Taylor Lawson
Megan Works
Chris Kelley

Call to order:

Commissioner Johnson called the meeting to order at 1:04 p.m.

Approval of Agenda:

By unanimous vote, the agenda was approved.

Approval of Minutes:

By unanimous vote, the September 19th, 2023, Regular Session Minutes were approved as presented.

Public Input or Comment:

Carol Russo made several inquiries on Island County's water system review.

2023 Schedule Update:

An announcement was made that the November 2023 Island County Board of Health Regular Session meeting is cancelled.

Proclamation:

- The Health in All Policies (HiAP) Proclamation, was presented by Public Health Director Dr. Shawn Morris. The Board discussed edits and next steps, and agreed to bring back a second draft to the December 19th 2023 Board of Health session.



ISLAND COUNTY BOARD OF
HEALTH
MINUTES
REGULAR SESSION
October 17th, 2023

Presentation:

- Chris Kelley, Ph.D., LG, Hydrogeologist, presented an overview of the Island County Public Health Hydrogeology program, including a basic review of aquifer science and approaches to groundwater data and cross-team collaboration.

Public Health Updates:

- Megan Works, Community Health Manager, presented on Breast Cancer Awareness month, current screening recommendations, prevention steps, and available resources.
- Dr. Leibrand, Public Health Officer, presented an update on zoonotic diseases and the latest developments in prevention guidelines for influenza, RSV and Covid-19.
- Community Health Assessment Supervisor, Taylor Lawson, gave an update on the Community Health Assessment Board.

Nomination:

- Marian Myszkowski was introduced by Taylor Lawson as a Community Health Advisory Board nominee. The Island County Board of Health accepted the nomination.

ACTION TAKEN: By unanimous vote, the Island County Community Health approved Marian Myszkowski as a member.

Board Member Comments and Announcements:

The Regular Session adjourned at 3 p.m.

The next *Regular Session* of the Island County Board of Health will be held on December 19th, 2023, at 1:00 p.m. in the Commissioners Hearing Room (B102) in the Coupeville Annex Building.

SUBMITTED BY:

Shawn Morris ND, Public Health Director

Approved this 19th day of December, 2023.

BOARD OF HEALTH
ISLAND COUNTY, WASHINGTON

Jill Johnson, Chair

BEFORE THE BOARD OF HEALTH OF ISLAND COUNTY, WASHINGTON

PROCLAMATION

IN THE MATTER OF PROCLAIMING) A COMMITMENT TO HEALTH IN ALL POLICIES) RESOLUTION NO. HD-02-23

WHEREAS, Health in All Policies (HiAP) is an approach to public policy that recognizes the profound interconnection between public policy decisions and the health and well-being of our communities;

WHEREAS, HiAP prioritizes the stepwise consideration of health implications in all decision-making processes, across various sectors and levels of government, to promote the improvement of population health and address health disparities;

WHEREAS, HiAP recognizes that social drivers of health are instrumental in shaping health outcomes, encompassing the conditions in which people are born, grow, work, live, and age, including access to supportive housing, healthcare, nutritious foods, healthy environments, economic opportunities, education, and other vital factors;

WHEREAS, HiAP recognizes that health is not solely determined by healthcare services but is profoundly influenced by the disproportionate access to social, economic, and environmental conditions in our communities;

WHEREAS, HiAP is committed to addressing social drivers of health as key factors in promoting health equity, acknowledging that historic and current inequities in access to resources profoundly affect health outcomes;

WHEREAS, HiAP identifies opportunities to coordinate policymaking, with the goal of reducing health disparities by working with partners to expand access to the social drivers of health;

WHEREAS, HiAP strives to prevent and mitigate harmful health impacts that may result from policy decisions, emphasizing the importance of proactive planning, community engagement, and risk assessment to safeguard the health of our population;

WHEREAS, HiAP acknowledges that the health of our population is a shared responsibility that transcends the boundaries of individual departments and levels of government;

WHEREAS, HiAP promotes transparency, inclusivity, and equitable engagement in the policymaking process to ensure that the essential voices of underrepresented community members guide the development, implementation, and evaluation of policies;

NOW, THEREFORE,

BE IT HEREBY RESOLVED, we, the Island County Board of Health, do hereby proclaim our commitment to the principles and practices of Health in All Policies (HiAP); and

BE IT FURTHER PROCLAIMED, we pledge to integrate a HiAP approach into our policymaking, planning, and implementation processes, with particular attention to health equity and the conditions in which people are born, grow, work, live, and age; and

BE IT FURTHER PROCLAIMED, we instruct all governmental and public agencies within Island County to join us in this endeavor, working collaboratively to develop policies that prioritize the health and well-being of our communities, while actively advancing equity, justice, and access to social drivers of health.

APPROVED this ____ day of ____, 202____

**BOARD OF HEALTH
ISLAND COUNTY, WASHINGTON**

Jill Johnson, Chair

ATTEST:

Shawn Morris, Public Health Director



Island County

1 NE 7th St, Coupeville, WA 98239
www.islandcountywa.gov

MEMORANDUM

11/09/2023

TO: Board of Health
FROM: Shawn Morris, Public Health Director
RE: 2024 Fee Adjustment for Public Health

Background

In light of the evolving economic landscape and the need to sustain the quality of our governmental services, Public Health proposes an adjustment to our current fee structure. The Consumer Price Index (CPI) for the Western Region has been examined as a foundation for this proposed fee increase. A comprehensive communications plan has been developed and is being implemented to update our communities and provide opportunity to comment.

Metrics and Proposed Adjustment

As requested by the Board, Susan Geiger, Budget Director, provided the following information to inform a fee adjustment:

The CPI, serving as an important indicator of inflation, has seen a substantial increase of 18.7% from July 2019 to July 2023 within the Western Region. Considering its status as a lagging indicator, this upward trajectory is anticipated to persist through 2024, potentially contributing to a more substantial rise.

Considering the CPI progression, we recommend an increase in fees of 18.7% effective January 1, 2024. This fee adjustment would apply to all Public Health permitting and service fees delivered by our departments. This adjustment will help us uphold the quality and sustainability of our services amidst the current economic shifts.

See CPI and wage data on following page:

Non- Represented Wage Increases			
Year	Increase	1.00	Compounding Rate
2019	2.0%	1.0200	2.00%
2020	2.0%	1.0404	4.04%
2021	1.5%	1.0560	5.60%
2022	2.0%	1.0771	7.71%
2023	4.0%	1.1202	12.02%
2024	2.5%	1.1482	14.82%
CPI - Western Region - 12 Month July to July			
2020	1.7%		
2021	5.2%		
2022	8.3%		
2023	3.5%		18.7%

BEFORE THE BOARD OF HEALTH OF
ISLAND COUNTY, WASHINGTON

IN THE MATTER OF REVISION OF THE)
ENVIRONMENTAL HEALTH SERVICE FEE)
SCHEDULE OF THE ISLAND COUNTY) **BOH Resolution: HD-03-2023**
PUBLIC HEALTH)

WHEREAS, the Island County Board of Health is empowered pursuant to RCW70.05.060 to establish fee schedules for health services, and

WHEREAS, the Island County Board of Health has reviewed the fees for Environmental Health Services and supports a fee increase in the amount of 18.7% for 2024.

NOW THEREFORE,

BE IT HEREBY RESOLVED, that the fee schedules attached as Exhibit A shall become effective on the first day of February, 2024. Nothing herein is meant to change Health Department fees not mentioned in Exhibit A.

Resolution HD-03-2023 is adopted this ____ day of _____, 202____

BOARD OF HEALTH OF ISLAND COUNTY
WASHINGTON

Jill Johnson, Chair

Attest:

Dr. Shawn Morris
Director of Public Health



Fee Schedule - 2024

Fee

Administrative	
Appeals	
Administrative	\$ 62
Board of Health	\$ 579
Hourly Rate (unless otherwise specified)	\$ 113
Operating without a required license or permit	
double fee	
Waivers	
Administrative	\$ 62
Board of Health	\$ 579
Drinking Water Program	
Sanitary Survey	
Group A	\$ 493
Group A - Transient Non-Community (TNC)	\$ 145
Water Availability Verification (WAV)	
Public	\$ 205
Individual	\$ 341
Water System Registration	
Water System Status Letter for Loan Requirement	
Well Site Inspection	
Public	\$ 636
Individual	\$ 297
Workbook Review	
2 connections (or commercial)	\$ 513
3 - 14 connections	\$ 908
Expansion/Improvement	\$ 470
Food Program	
Food Service Establishment (FSE)	
Level 1 - Simple food services with limited or no cooking.	
Seating Capacity 0-24	\$ 856
Seating Capacity 25-50	\$ 918
Seating Capacity 51-100	\$ 978
Seating Capacity over 100	\$ 1,040
Level 2 - Same day service of food. Only reheating and/or hot holding.	
Seating Capacity 0-24	\$ 978
Seating Capacity 25-50	\$ 1,040
Seating Capacity 51-100	\$ 1,100
Seating Capacity over 100	\$ 1,162
Level 3 - Complex food handling.	
Seating Capacity 0-24	\$ 1,040
Seating Capacity 25-50	\$ 1,223
Seating Capacity 51-100	\$ 1,345

Fee Schedule - 2024

Fee

Seating Capacity over 100	\$	1,467
Groceries		
1 - 4 checkout stands	\$	793
5 or more checkout stands	\$	844
Meat/fish market (in addition to checkout stand)	\$	350
Delicatessen (in addition to checkout stands)	\$	350
Bakery (in addition to checkout stands)	\$	350
Other Food Service		
Bakery (baked goods only)	\$	616
Bed & Breakfast	\$	350
Candy Kitchen	\$	350
Caterers & Cottage Industries	\$	509
Convenience Stores (prepackaged food only)	\$	442
Convenience Stores (with food service)	\$	807
Espresso Stands/Tea Rooms (non-hazardous food only)	\$	442
Institutional Kitchen with Full Kitchen	\$	468
Institutional Kitchen with Satellite Kitchen	\$	196
Mobile Cart	\$	586
Non-Profit Permanent (must provide proof of tax exempt status)	\$	188
Retail Commercial Fishing Vessel	\$	165
Taverns (without food)	\$	564
Wineries and Breweries and Distilleries	\$	564
Vending Machine, including self-service farm stands (potentially hazardous foods)	\$	91
		\$119 minimum / \$91 per hour
Food Service Establishment Plans Review		
Semi-Annual Fee (for an annual FSE license)		
January 1 - June 30		1/2 of annual fee
July 1 - December 31		1/2 of annual fee
Miscellaneous Activities		
Late Fees	\$	122
Reprinting of lost license	\$	31
Preapplication Conference	\$	128
Preopening Inspection - Reschedule if FSE is not ready.	\$	62
Reinspection		
Temporary/Seasonal Events		
<i>Level 1 Temporary Event (baked goods, popcorn, or similar products)</i>		
1 day	\$	51
2 days	\$	91
3 days	\$	204
4-8 days	\$	265
<i>Level 3 Temporary Events</i>		
1 day	\$	94
2 days	\$	131
3 days	\$	255
4-8 days	\$	305
Samples only	\$	34
Temporary Event Late Fee (if submitted within 7 days of the event)	\$	34
Farmers Market, including on-line market (Permit to operate in the Market)	\$	442
Farmers Market Vendor only	\$	94

Fee Schedule - 2024

Fee

Food Handlers	
Food Handlers Card	\$ 12
Re-Issue Food Handlers Card	\$ 7
Food Handlers Class - Special Arrangement (12 or less people)	\$ 325
Food Handler Class - Special Arrangement (13 or more people) per person	\$ 12
CFPM Class (minimum 10 people), includes book and exam	\$ 150 per person
CFPM Retest Fee/Test Proctor	\$50
Land Use Activity	
As the fees are approved by BOH and published in the current Island County Planning Department Fee Schedule.	
Liquid Waste Activity	
Site Evaluations/Permitting	
Site Registration	\$ 546
Site Registration - Revision and/or minor corrections to existing SR (Hourly)	\$ 131
Winter Water Check	\$ 172
Standard System Permit (Includes new or repair)	\$ 431
Alternative System Permit (Includes new or repair)	\$ 650
Septic Tank/Pump Tank Permit (connection to a community drainfield) or sewage treatment plant approved as a separate process)	\$ 271
Alteration Permit	\$ 377
Commercial Permit (greater than 500 gal/max daily flow for entire system)	\$ 810
Community Drainfield Permit (more than two residences)	\$ 810
Redesign of an Approved Permit (modified design not requiring full review)	\$ 271
Owner to Install Permit (in addition to a Standard Permit)	\$ 323
Permit to connect an auxiliary building to existing septic system	\$ 214
Permit resubmittal	\$ 131
Pre-application review (Hourly)	\$ 131
Reinspection Fee for Septic Permit	\$ 139
Septic As-Built (Certification of Drawing)	\$ 103
Waiver Request-Administrative	\$ 62
Waiver Request-Class A	\$ 120
Waiver Request-Class B & C	\$ 579
Installing without a permit	Double Permit Fee
Licensing/Examination	
<i>License for Septic System Installer</i>	
New Application (includes installer exam fee and current year license)	\$ 579
Renewal (annual)	\$ 258
<i>License for Maintenance Service Provider</i>	
New Application (does not include WOSSA exam)	\$ 579
Renewal (annual)	\$ 258
<i>License for Septic Tank Pumper (Base Fee includes 1 truck inspection)</i>	
Inspection per Pumper Truck	\$ 97
Miscellaneous	
Septic 201 (In person class)	\$ 62
Exemption Fee (Homeowner to inspect an alternative system)	\$ 115

Fee Schedule - 2024**Fee****Living Environment Program**

Administrative Fees	
Late Fee	\$ 122
Plan Review (Hourly Rate)	\$ 131
Annual Mobile Home Park License	
2-30 spaces	\$ 343
31 or more spaces	\$ 507
Annual Recreational Vehicle Park	\$ 375
Annual Pool/Spa License	
Year-round Pools (2 inspections/year)	\$ 744
Year-round Spas (2 inspections/year)	\$ 223
Seasonal Pools (1 inspection/year)	\$ 404
Seasonal Spas (1 inspection/year)	\$ 151
Splash Pads or Fountains	\$ 273
Reinspection Fee	\$ 151
Annual Schools License	
Less than 100 students enrolled	\$ 210
100-500 students enrolled	\$ 558
More than 500 students enrolled	\$ 836
Outdoor Burning Permits	
Residential	\$ 50
Land Clearing	\$ 120

Solid Waste Program

Administrative Fee	
Late Fee	\$ 122
Facility Plan of Operation Review (Hourly)	\$ 131
Facility Reinspection	\$ 151
Plan Review (New applications and Solid Waste Management Plan) (Hourly)	\$ 131
Permit Type	
Anaerobic Digesters	\$ 367
Anaerobic Digesters - Exempt	\$ 184
Beneficial Use	\$ 586
Beneficial Use - Exempt	\$ 293
Bioremediation Sites (On-Site Treatment)	\$ 391
Bioremediation Sites (Off-Site Treatment)	\$ 391
Biosolids Utilization Site	\$ 586
Composting Facility (Sewage, Sludge, and/or Garbage)	\$ 391
Composting Facility (Sewage, Sludge, and/or Garbage) - Exempt	\$ 261
Composting Facility (Yard Waste and/or Animal Manure)	\$ 391
Composting Facility (Yard Waste and/or Animal Manure) - Exempt	\$ 261
Energy Recovery and Incineration	\$ 586
Land Application	\$ 367
Material Recovery Facility	\$ 306
Miscellaneous Solid Waste Facility	\$ 586
Moderate-Risk Waste Facility	\$ 586
Moderate-Risk Waste Facility - Exempt	\$ 261
Municipal Waste Recovery Facility and Association Transfer Stations	\$ 391
Piles for Storage & Treatment Facility	\$ 586

Fee Schedule - 2024**Fee**

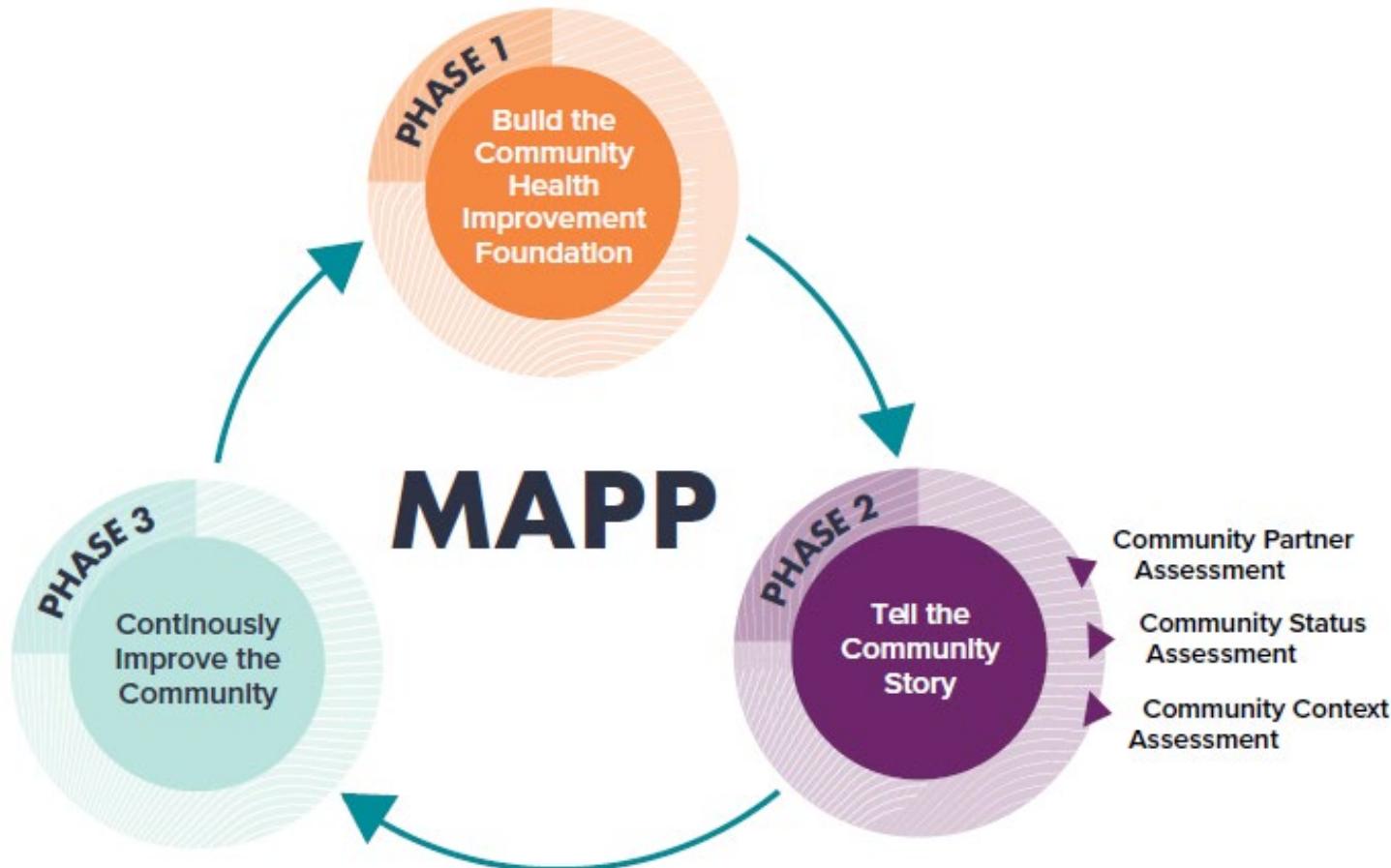
Piles for Storage & Treatment Facility - Exempt	\$	293
Recycling Facility	\$	195
Recycling Facility - Exempt	\$	196
Septage Utilization Site	\$	586
Solid Waste Facility Satellites	\$	195
Surface Impoundment Facility	\$	586
Surface Impoundment Facility - Exempt	\$	293
Transfer Station and Drop Box Facility	\$	195
Transfer Station and Drop Box Facility - Exempt	\$	134
Waste Tire Storage Sites (100 - 800 tires)	\$	99
Waste Tire Storage Sites (801 or more tires)	\$	195
Landfills		
Inert Waste Landfill	\$	586
Inert Waste Landfill - Exempt	\$	279
Limited Purpose Landfill	\$	279
Limited Purpose Landfill - Post Closure Care	\$	279
License		
Biomedical Hauler	\$	196
Refuse Hauler License	\$	195
Waste Tire Hauler	\$	196



Community Health Assessment Updates

Board of Health Meeting
December 2023

MAPP Framework: Equity & Inclusion



Phase 1: Build the MAPP Structure



- Establish and support the success of our Community Health Advisory Board (CHAB)
- Advertise, recruit, and host the Community Health Assessment Team (CHAT)
- Solicit support and participation from Island County Public Health leadership

We will often refer to CHAB & Island County Public Health Leadership as the “Core Team” or “MAPP Core Team.”

Phase 1: Build the CHIP Structure



- Currently 13 CHAB members
- Hosted three (3) CHAT meetings to orient participants to the MAPP framework, as well as future and past Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP).
- Regular updates to Public Health Leadership via email and meetings, ongoing participation in CHAB/CHAT meetings
- Alignment with Comprehensive Plan Updates

Phase 2: Tell the Community Story



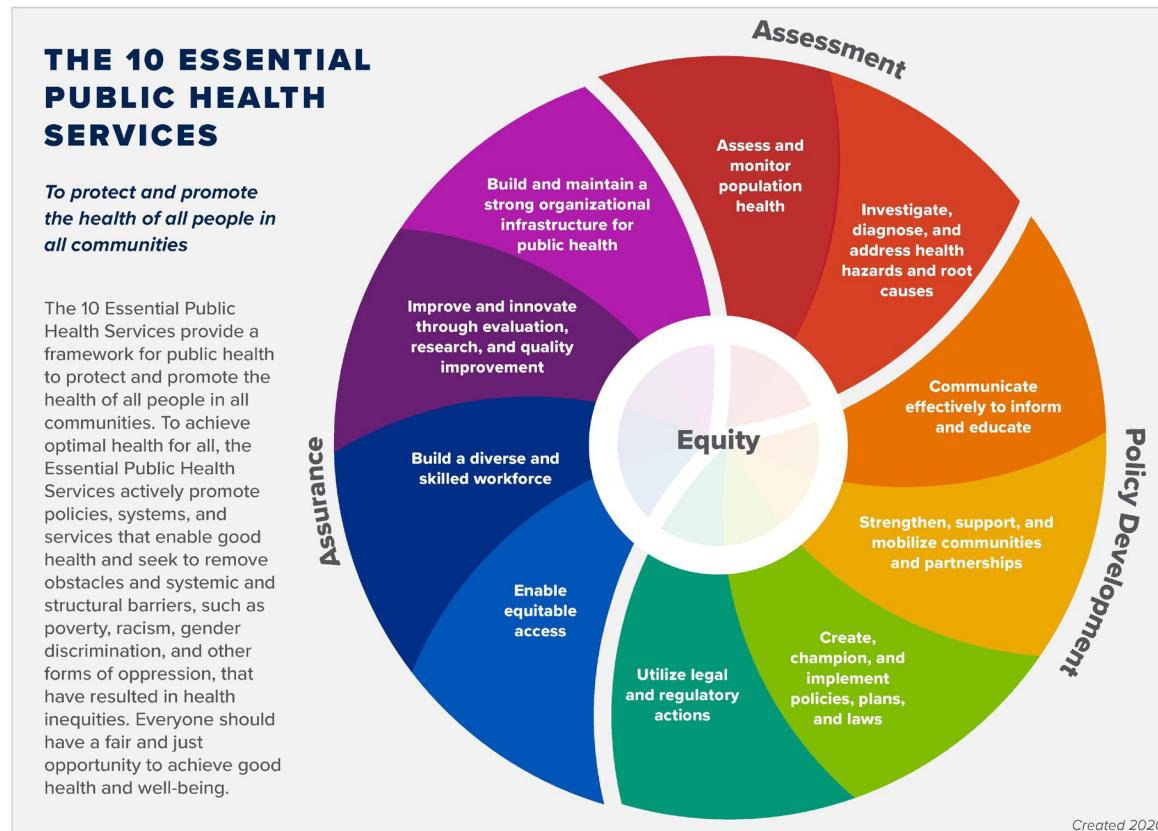
- CHAB and Public Health Leadership will act as the decision makers every step of the way
- CHA Team and CHAB will provide feedback and support outreach activities to engage our community
- Listening sessions with underrepresented groups; CHAB-facilitated informational sessions with providers and clients... others?

Phase 2: Tell the Community Story



Community Partner Assessment

Partners from the county's local public health system will participate in a survey on their involvement in community health. The partners will convene to discuss the survey results as they apply to the Model Standard Activities which serve as quality indicators aligned with the 10-essential public health service areas.



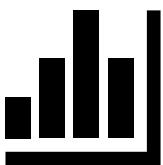
Community Partner Assessment Goals

1. Describe why community partnerships are critical to community health improvement (CHI) and how to build or strengthen relationships with community partners and organizations.
2. Name the specific roles of each community partner to support the local public health system (LPHS) and engage communities experiencing inequities produced by systems.
3. Assess each MAPP partner's capacities, skills, and strengths to improve community health, health equity, and advance MAPP goals.
4. Document the landscape of MAPP community partners, including grassroots and community power-building organizations, to summarize collective strengths and opportunities for improvement.
5. Identify whom else to involve in MAPP and ways to improve community partnerships, engagement, and power-building.

Community Partner Assessment: Survey



- Partner Surveys were collected from October 4th – October 21st.
- Collected a total of 20 surveys from leadership organizations and partners



- Assessment team received survey results and has begun analysis



- Present findings and facilitate a Community Partner discussion to review and generate deeper meaning for survey results

Phase 2: Tell the Community Story



Community Status Assessment

Informs MAPP and collects quantitative data on the status of your community such as demographics, health status, and health inequities. The CSA helps a community move “upstream” and identify inequities beyond health behaviors and outcomes, including their association with social determinants of health and systems of power, privilege, and oppression. The CSA is a community-driven assessment to help tell the community’s story.

Community Status Assessment Questions

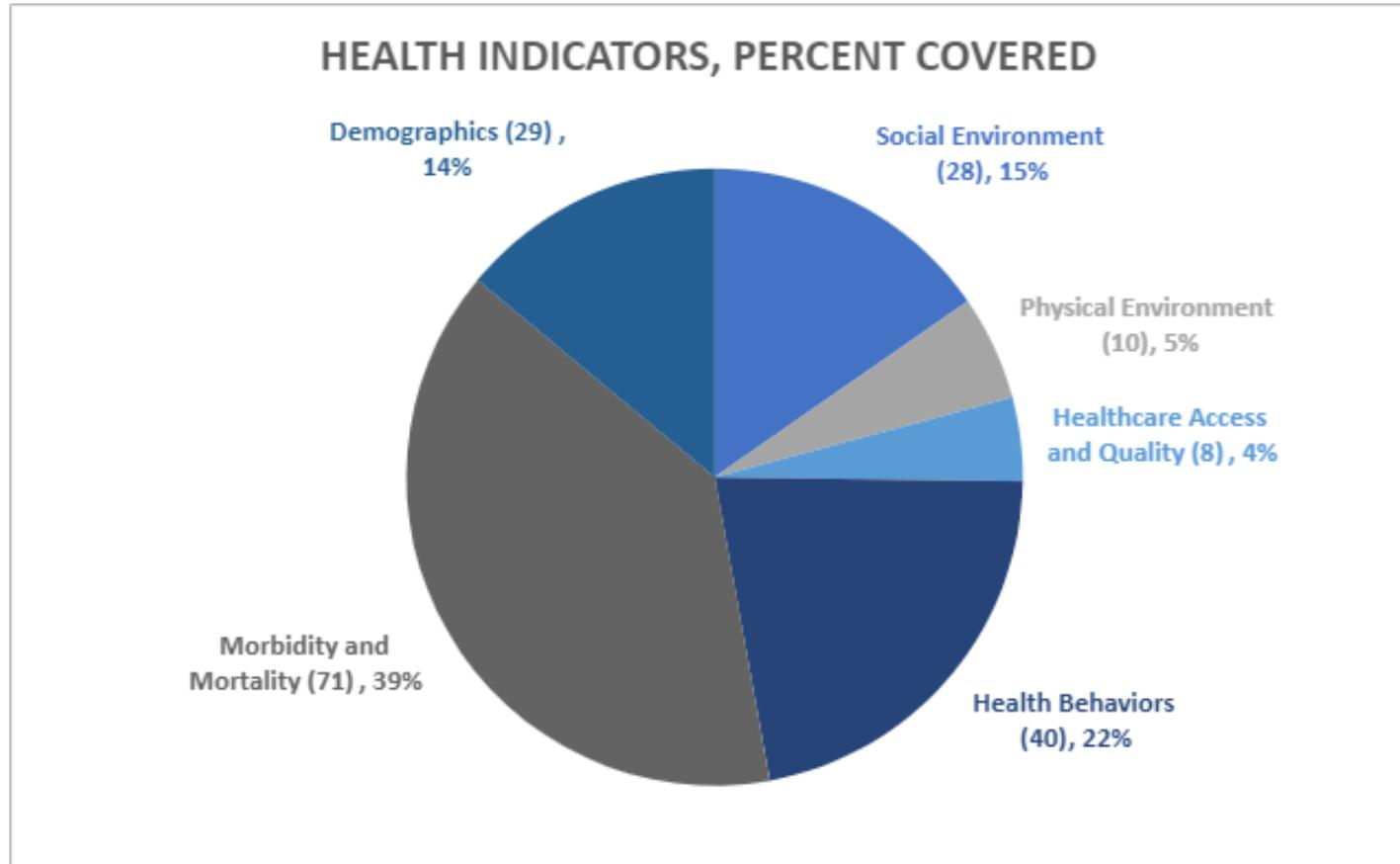
1. What does the status of your community look like, including health, socioeconomic, environmental, and quality-of-life outcomes?
2. What populations experience inequities across health, socioeconomic, environmental, and quality-of-life outcomes?
3. How do systems influence outcomes?

Data Collection Tools

Health Indicator Workbook

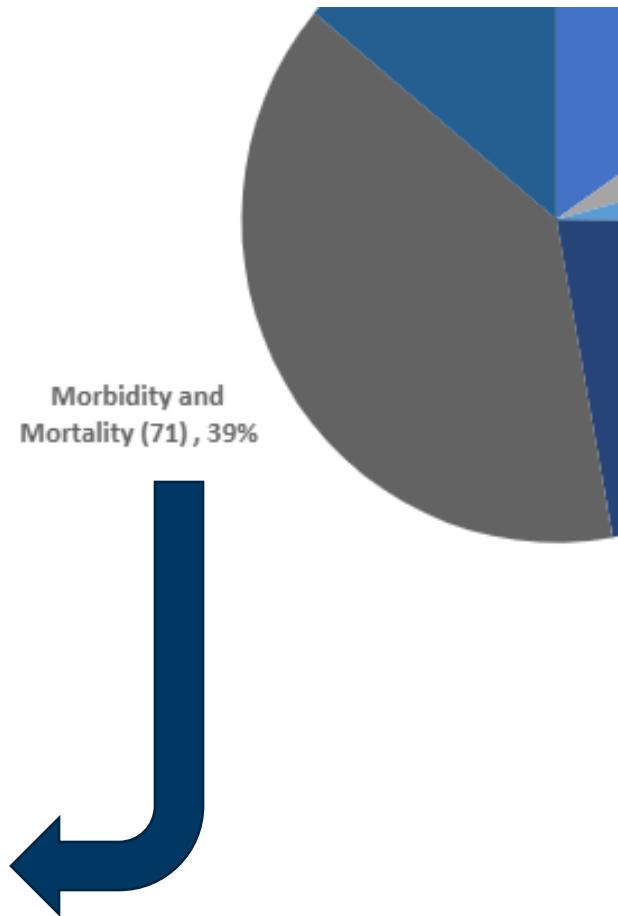
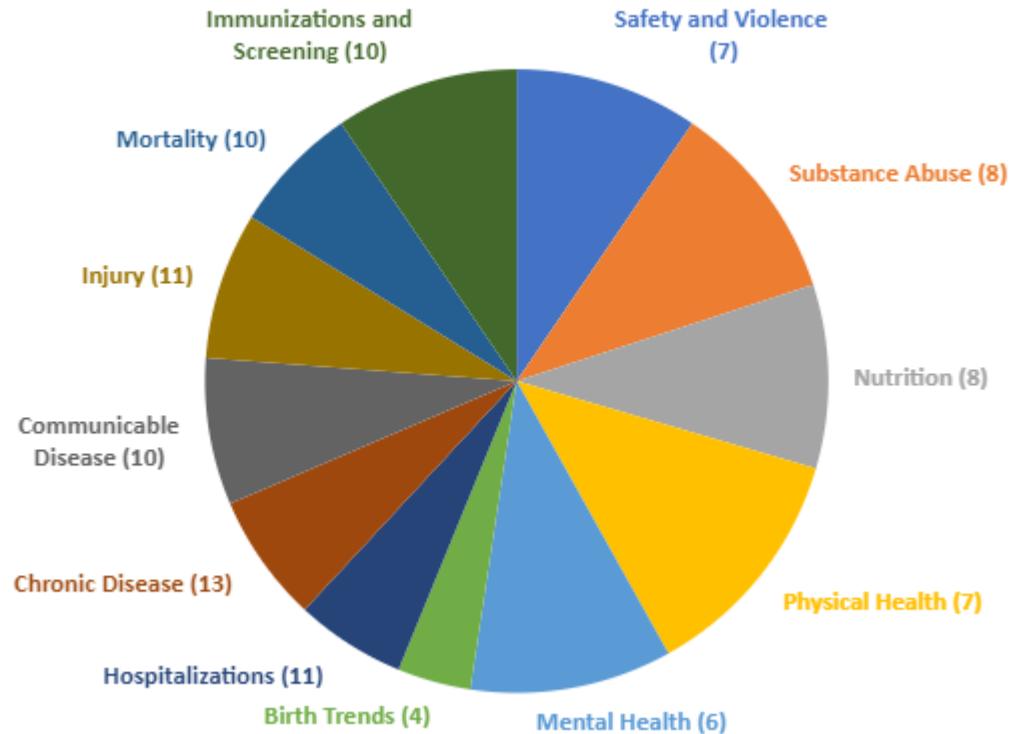
Community Health (Status) Survey

Community Status Assessment: Health Indicators

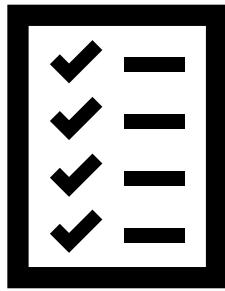


Morbidity and Mortality as Indicators of Health Inequity

MORBIDITY AND MORTALITY, PERCENTS COVERED



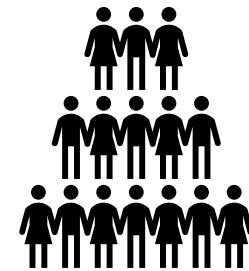
Community Health Survey



Assessment Team & CHAB
are currently reviewing the
2015 CHA Survey Tool as a
“starting point”



Outreach and guided
discussions about “what’s
missing.”



Begin survey collection in
late January 2024

Phase 2: Tell the Community Story



Community Context Assessment

A qualitative tool to assess and collect data. It collects the insights, expertise, and views of people and communities affected by social systems to improve the functioning and impact of those systems. The CCA moves beyond interventions that rely on perceived community needs to understand a community's strengths, assets, and culture.

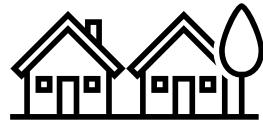
Community Context Assessment Questions

- What strengths and resources does the community have that support health and well-being?
- What current and historical forces of change locally, regionally, and globally shape political, economic, and social conditions for community members?
- What physical and cultural assets are in the built environment? How do those vary by neighborhood?
- What is the community doing to improve health outcomes? What solutions has the community identified to improve community health?

Community Context Assessment



Facilitate group discussions with identified populations underrepresented in the survey results



Bring larger community together to discuss the survey results with additional insight from group discussions



Begin the prioritization process that will serve as the foundation for the Community Health Improvement Plan

Next Steps

- Complete Community Partner Survey analysis
- Schedule and facilitate Community Partner Assessment meeting
- Finalize Community Health Survey Tool
- Draft Focus Group discussion guide
- Begin collecting surveys in January
- Present updates to Board of Health in March or April 2024

2024 Timeline

2023-2024 CHA GANTT Chart.xlsx



Strategic Vision

Discussion with Island County Board of
Health (BOH)

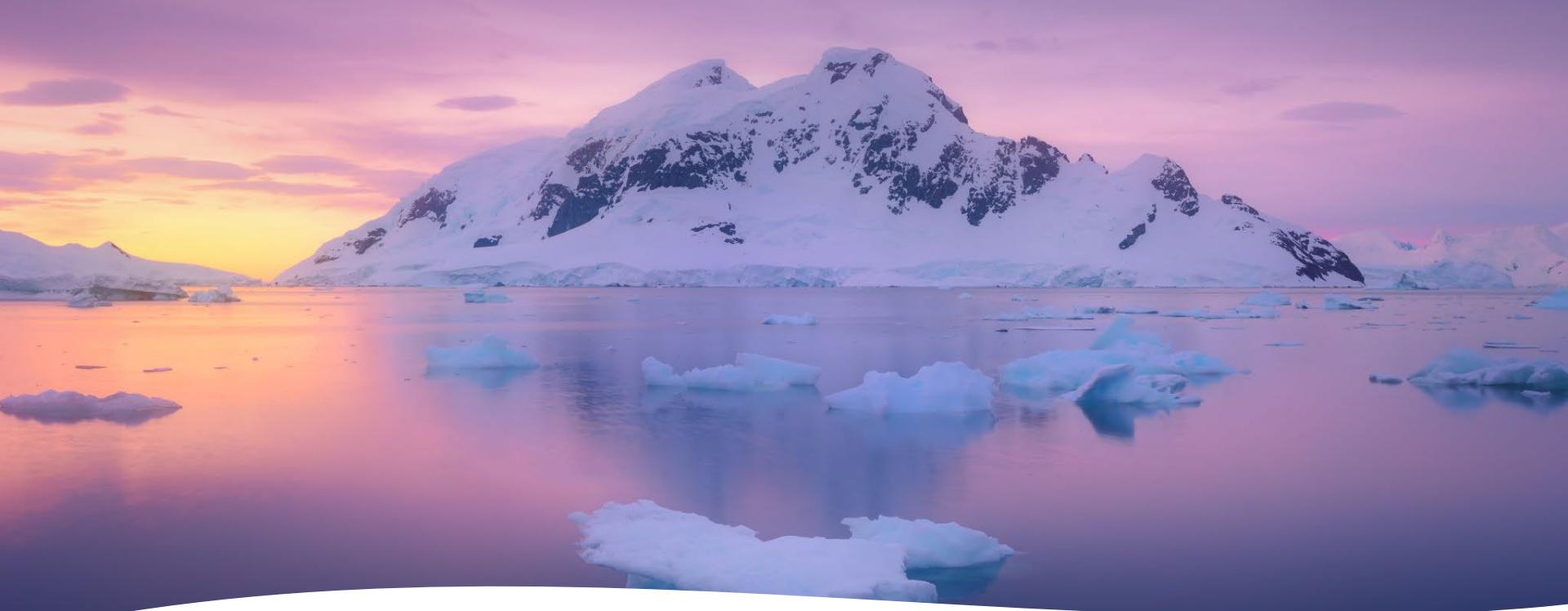


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What do you
believe about
change? About
transformation?

Defining Change

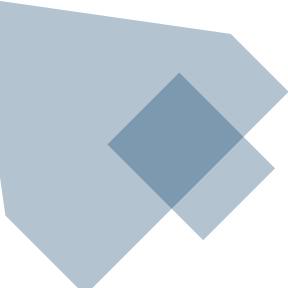
- **A theory of change from u-lab (MIT), reminds us that the quality of results in any kind of complex system is a function of the quality of relationships among the stakeholders who are enacting that system.**
- **To change the quality of this relationship, you need to change the mindsets from a silo to a systems view. Or from ego-centric to ecosystem perspective.**



Going to the Balcony

An Environmental Scan is the identification of factors from both inside and outside the organization that may impact the long-term viability of the organization. During this step you are attempting to develop the “big picture.”





SOAR

Strengths, Opportunities, Aspirations, Results

Strengths	Opportunities
Aspirations	Results

Common Assumptions About Change

- Change can be managed
- Change can be mapped as a series of steps within a certain time
- Change starts from a blank slate
- People in the organization are objective
- Change itself is always good – for everyone



Engage those Affected by Change

- People rarely support change they have not helped design
- People experiencing a problem may have the best solution
- Level the playing field



Strategic Priorities

What's missing? What's included?

Who benefits?

How can we integrate community voice?

How can we address climate health and ecosystem impacts?

How can we address structural inequities impacting health?

Are we caring for staff and considering capacity?

Can we turn priorities into measurable, achievable, and realistic goals?

A scenic coastal sunset with a winding path and a teal banner.

Thank you!

Island County Public Health

Strategic Vision

Our vision for a responsive department supporting thriving communities and ecosystems.

2024-2029



Setting the Stage

Introduction and Overview

A well-designed strategic vision helps us prioritize efforts, allocate resources effectively, and develop specific goals. After years of responding to the pandemic alongside our continuous efforts to deliver quality services, this planning exercise offers a chance to step back and gain a clear perspective. In this document, we outline the mission and vision of the Public Health Department, as well as the priorities, commitments, and strategies that guide our work. As we look ahead, our cornerstone values include a renewed emphasis on collaboration, a commitment to health equity, an emphasis on service, and a deepening appreciation of our interconnected environments. By including voices from diverse sectors, we are tailoring our approach to meet the unique needs of our population. This plan is designed to be a living document that will be adapted and revised to ensure that we remain responsive to the evolving needs of the communities we serve.

“With rare exceptions, all of your most important achievements on this planet will come from working with others—or, in a word, partnership.”

- Dr. Paul Farmer, Partners in Health

Mission Statement

Island County Public Health is committed to protecting and improving the well-being of our unique island communities and environments through innovative programs and partnerships. Working in close partnership with the communities we serve, our dedicated teams deliver essential services, advance vital conditions for well-being, and strategically plan health improvement.



10 Essential Public Health Services

1. Assess and monitor population health status, factors that influence health, and community needs and assets.
2. Investigate, diagnose, and address health problems and hazards affecting the population.
3. Communicate effectively to inform and educate people about health, factors that influence it, and how to improve it.
4. Strengthen, support, and mobilize communities and partnerships to improve health.
5. Create, champion, and implement policies, plans, and laws that impact health.
6. Utilize legal and regulatory actions designed to improve and protect the public's health.
7. Assure an effective system that enables equitable access to the individual services and care needed to be healthy.
8. Build and support a diverse and skilled public health workforce.
9. Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement.
10. Build and maintain a strong organizational infrastructure for public health.

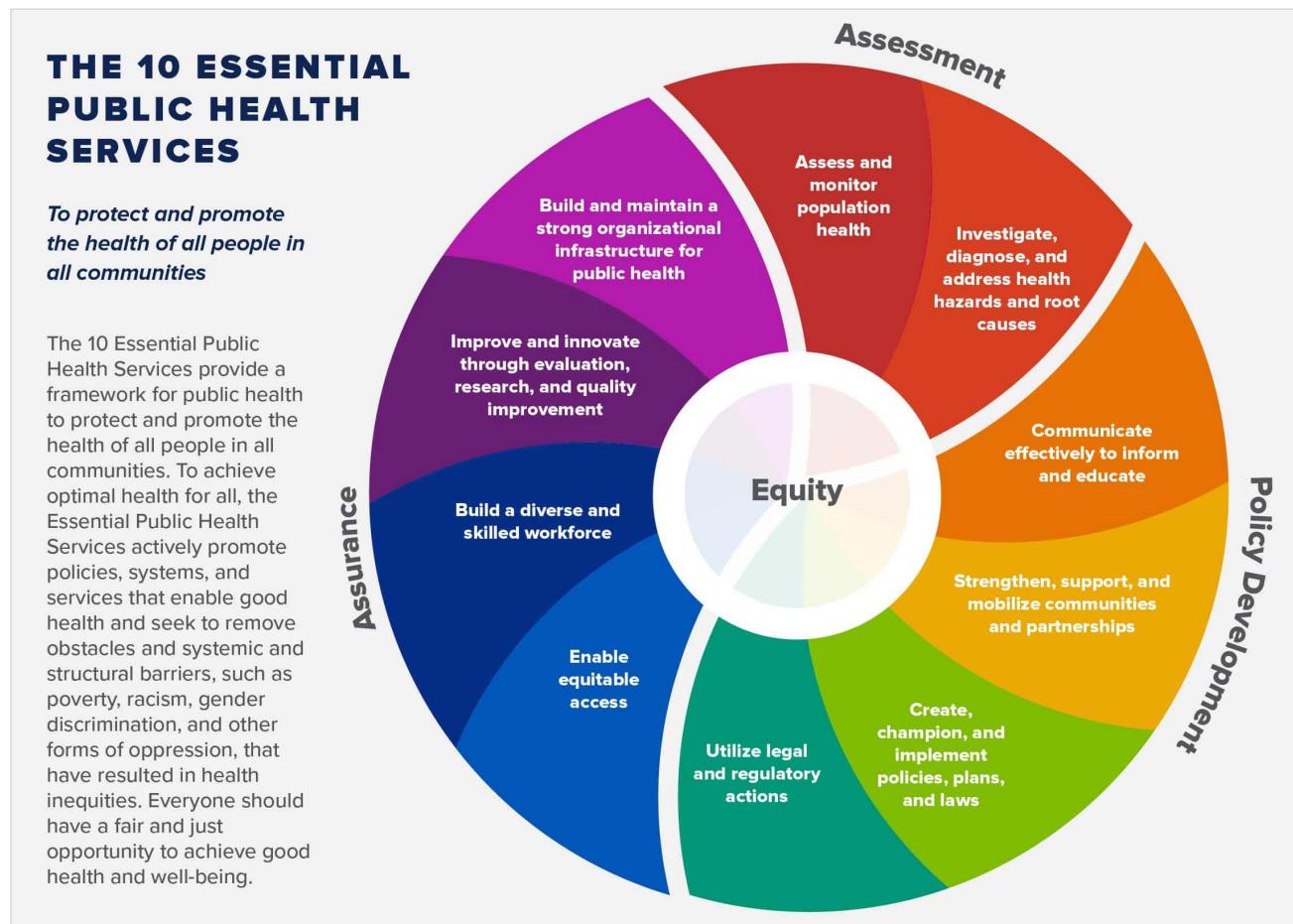


Figure 1: From CDC, 2023

Our Priorities for Thriving Communities

To deliver on our mission, prioritization through strategic planning is essential. We worked with partners to identify key priorities that span divisions and programs and reflect our core values and vision.

Foundations for Our Work



Collaborative Engagement

A cooperative process where community members and groups actively work together to achieve a shared objective, leveraging collective skills and resources.



Population Health

A focus on the overall health of a population, considering social drivers of health, health equity, and policies, strategies, and initiatives that promote health at the community scale.



Ecosystem Perspective

A holistic and interconnected view of the interactions and relationships between various systems, emphasizing interdependence and interrelatedness.



Equity Driven

Working in partnership with diverse communities to develop community-rooted initiatives, ensuring that resources, opportunities, and outcomes are distributed and allocated to address systemic inequities.

Guiding Priorities



Optimal Health Systems and Workforce Support



Vibrant Ecosystems and Healthy Built Environments



Thriving Communities Across the Lifespan



Engaged Assessment and Emergency Response

Underlying Frameworks

Learn about the frameworks guiding our approach to community health assessment and improvement.

Social Ecological Model

The **social ecological model** considers the interplay between individual, relationship, community, and societal factors. The overlapping rings in the model illustrate how factors at one level influence factors at another level.



Figure 2: From CDC, 2023

Environmental Justice

Environmental justice is a theoretical lens focused on advancing equity in the distribution of environmental benefits and burdens, and in the processes that determine those distributions.

One Health

One health is a collaborative and multisector approach with the goal of achieving optimal health outcomes recognizing the interconnection between people, animals, plants, and their shared environments.

Community-Based Participatory Approaches

Participatory approaches build on collective strengths and shared resources, engage trusted community members, facilitate partnerships, involve long-term commitment, and share information, data, and findings with all participants through inclusive practices.

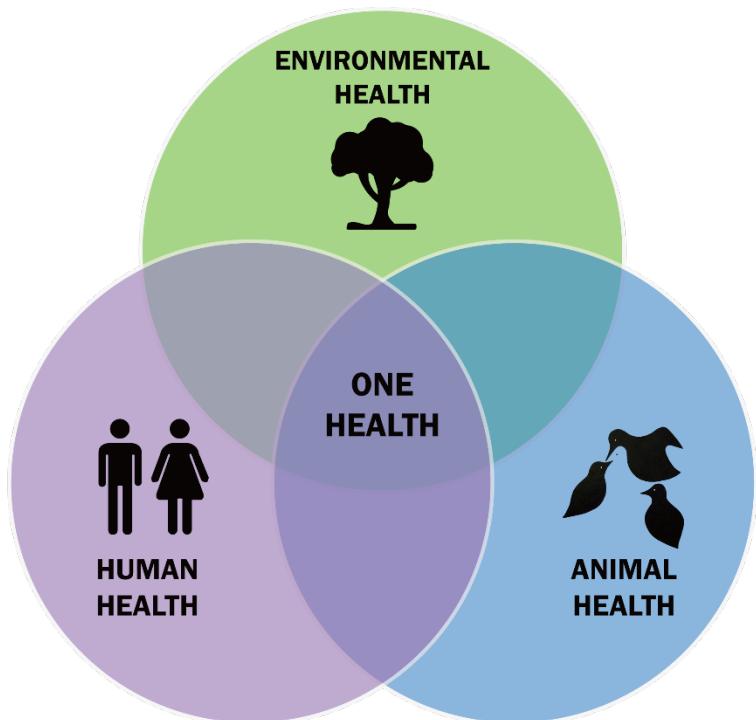


Figure 3: From CDC, 2023

Health Literacy

Health literacy is the degree to which individuals can find, understand, and use information and services to inform health-related decisions and actions for themselves and others (Healthy People 2030). Developing culturally relevant educational materials for community delivery across program areas supports health literacy.

Health in All Policies

Health in All Policies (HiAP) is an approach to public policy that systematically considers the health implications of decisions, seeks synergies, and avoids harmful health impacts to improve population health and health equity.

Priority 1. Optimal Health Systems and Workforce Support

Vision

A responsive public health system that integrates community voice into policy and practice, while promoting transparency, engagement, and trust. Our teams are made up of a diverse and skilled workforce equipped with the tools, support, and knowledge to effectively address public health challenges and drive equity.

Commitment

We will practice continual improvement, working to align skills, resources, and partnerships to strengthen our capacity to deliver responsive and innovative programs and services. We will be guided by the voices and values of our diverse communities and center health equity in all policy recommendations, planning, and service delivery. We renew our commitment to effective external and internal communication, while serving as responsible stewards of public resources. We value and prioritize developing and maintaining a diverse, engaged, and skilled workforce, recognizing that our dedicated employees are at the heart of our work.

Key Strategies

- Apply a Health in All Policies framework to policy recommendations, planning, and strategic initiatives, actively integrating community voice through participatory approaches.
- Integrate direction from the Board of Commissioners and Board of Health, informed by the Community Health Advisory Board, into all programs, services, and approaches.
- Ensure fiscal responsibility and sustainable resource management across programs through competent contract management, while prioritizing and allocating resources intentionally to communities impacted by inequities.
- Foster a healthy, resilient, and safe workplace by cultivating a culture of wellness and supporting the unique needs of our staff. Integrate diversity, equity, and inclusion principles across teams and procedures.
- Support the recruitment, development, and retention of a qualified, inclusive, and diverse public health workforce, investing in our teams and integrating best practices for organizational design.
- Provide effective public health information to stakeholders and the public. Strengthen our communications approach, applying principles of community-led design, cultural humility, and health equity to provide timely, locally relevant communications across our program areas in multimedia formats.



Priority 2. Vibrant Ecosystems and Healthy Built Environments

Vision

We support vibrant ecosystems and healthy built environments by planning initiatives, guiding policy, and delivering programs and services that achieve optimal outcomes for human, animal, and ecosystem well-being, recognizing our increasingly interconnected environments.

Commitment

We support our unique island communities by supporting climate resilience, natural resources conservation, and social drivers of health. We apply an environmental justice lens, expanding social drivers of health with attention to inequities in the distribution of environmental benefits and burdens. In all our work, we consider the interrelatedness between human, animal, and ecosystem well-being. We take a consistent and equitable regulatory approach to ensure safe and healthy built environments.

Key Strategies

- Support adaptation to climate change through conservation, outreach, regulatory programs, and multisector partnerships, centering equity and applying a one health lens.
- Revitalize community advisory boards by expanding inclusive engagement and adopting project criteria related to environmental justice and social drivers of health.
- Strengthen adaptive management approaches to water quality and habitat health, adopting best-available science and proactive practices for preventing contamination.
- Take a service-oriented approach to permitting and regulation, providing community members with resources and guidance. Consider the downstream impacts of permitting decisions while helping applicants achieve their goals, supporting sustainable development.
- Center equity and engage in effective outreach for programs that support safe communities, including food safety, solid waste compliance, mobile home inspections, and outdoor burn permitting.
- Ensure efficiency and consistency with the permitting process. For regulatory changes, involve stakeholders early and often. Improve communications and outreach related to planned changes, using participatory approaches.
- Strengthen financial assistance programs for clean water needs. Provide technical assistance to partners to expand access to supportive housing, economic opportunity, healthy environments for recreation, and other social drivers of health.



Priority 3. Thriving Communities Across the Lifespan

Vision

We practice innovative disease prevention and deliver essential health services to address critical gaps. We work across sectors to ensure community members have access to the vital conditions needed to thrive, including healthcare access, nutritious foods, health guidance, supportive housing, recreational opportunities, and other social drivers of health.

Commitment

We lead upstream initiatives that improve health outcomes by promoting behavior change, expanding access to social drivers of health, and enhancing health literacy. We commit to a holistic understanding of health outcomes, working with cultural humility while serving diverse communities. We work hand in hand with community members to design, implement, and evaluate strategies that address nutritional health, access to care, and overall physical health across the lifespan. We work with coalitions and partners, recognizing that upstream prevention and optimal outcomes requires multi-sector, community-rooted approaches that center health equity.

Key Strategies

- Advance a continuum of community-based prevention initiatives to improve health and wellness behaviors related to nutritional health, family health, chronic disease, physical activity, and injury prevention, looking upstream at key factors and applying principles of cultural humility.
- Expand our focus on health literacy and education by tailoring evidence-based curricula and resources for community delivery, using best available practices outlined by implementation science.
- Engage multi-sector partners and people who have lived experience to expand population scale strategies that improve the conditions in which people live, work, play, and age. Support sustainable, community-rooted approaches to advancing the social drivers of health.
- Proactively address emerging communicable diseases and serve as a responsive resource for community partners, including long-term care, schools, childcare, and healthcare providers, employing active surveillance and community-based prevention strategies.
- Specifically develop partnerships and collaborative models with primary care providers, using approaches outlined in “The Practical Playbook” (CDC) to develop communities of practice, cross-team coordination, and shared health improvement strategies and campaigns.
- Strengthen community partnerships and deliver essential early intervention services for children and families with cultural humility, recognizing that the well-being of our children is of the utmost importance.



Priority 4. Engaged Assessment and Emergency Response

Vision

Our communities have the information needed to advance health equity and outcomes. Community voice guides our assessment strategies and policy process. We proactively cultivate meaningful, trusted relationships with diverse populations. We envision a trained and coordinated team well-positioned to prepare for, respond to, and recover from public health emergencies.

Commitment

We commit to a community-driven approach to data collection, evaluation, and dissemination. We intentionally strengthen trusted relationships with marginalized communities to develop meaningful assessment strategies and inclusive practices. We provide locally relevant, accessible, and transparent information to guide community decision-making. To foster resilience, we apply the lessons learned from the COVID-19 pandemic to better plan for, respond to, and recover from emergencies and hazards.

Key Strategies

- Align public health assessment activities with planning driven by our partners, streamlining engagement and cross-department efforts, while integrating participatory approaches, an equity lens, and applying the social ecological model.
- Advance data-driven evaluation approaches across programs to map intended outcomes, consider potential harmful impacts, define measurable goals, track progress, and revise approaches.
- Develop visually engaging content that is accessible to a diverse range of community members when sharing data reports, including health assessments, improvement plans, and impact reports.
- Expand data sharing capacities with community partners to guide community decision-making and improve understanding of health outcomes and inequities.
- Continually improve staff readiness to prepare for, respond to, and recover from emergencies by supporting partnerships, proactive planning, and developing our workforce, focusing on responder health and safety, cross-team coordination, and administrative preparedness.
- Integrate the needs of people with disabilities, older adults, people with chronic disease, children with special healthcare needs, and pregnant mothers into all public health emergency planning.





Looking to the Horizon

Tracking Our Progress

Local public health plays an essential role in developing collaborative, creative, and community-centered solutions to complex challenges. Laying out our long-term strategic vision allows us to create specific, measurable, achievable, relevant, and time-bound (SMART) goals. Our teams will draw from this document to coordinate efforts, advance health equity, and work collaboratively to expand social drivers of health.

In all our efforts, we are committed to working in partnership with our diverse island communities. Our teams live and work in our communities, and we are guided by a shared desire to make a difference for current and future generations. Over the past few years, we have been through so much uncertainty, strain, and challenge. Already, our teams are pivoting to address emerging public health challenges, including impacts from a warming world and rising inequities related to social drivers of health. As we work to build trust, support our teams, enhance services, and improve health outcomes, we commit to acting with care, transparency, and inclusivity.

Next Steps

- Develop SMART goals to deliver on our guiding priorities, vision, and identified strategies.
- Continually share and refine our strategic vision through ongoing engagement.
- Align our day-to-day work with commitments, guiding priorities, and strategies.

We are always working for safer and healthier communities.

Washington's 35 local health jurisdictions serve as the frontline responders to public health emergencies and threats, conveners that help communities implement health promotion and disease prevention strategies, and protectors that are committed to building healthy, safe, and thriving communities.

Supplemental Budget Priorities



Septage Capacity Risk Analysis

WSALPHO supports one-time funding to study and assess septic treatment capacity in our state.

- Current comprehensive plans do not require an assessment of septic treatment capacity, under-representing the actual capacity across the state
- Understanding existing treatment capacity and future needs is critical for infrastructure planning that supports development
- Poor treatment capacity can result in illegal disposal and improper maintenance of septic systems, leading to environmental contamination and increased homeowner costs



School Environmental Justice

Our kids need safe and healthy school learning environments. Please support implementing the Environmental Justice Council's recommendations:

- Remove the budget proviso that blocks school environmental health and safety rules
- Fund localized school environmental health programs
- Dedicate state dollars for core facility upgrades in overburdened communities
- Create minimum standards for health and safety measures in schools

Foundational Public Health Services (FPHS)



Local health jurisdictions are the frontline defenders against public health threats, responding to natural disasters and emergencies, and preventing exposures to environmental hazards. Strong core programs and services assures everyone, everywhere in Washington State has a nimble and responsive public health system that works to achieve vibrant and thriving communities. **We are grateful for the ongoing support for FPHS!**

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Policy Priorities



Technical Change to WA Vaccine Association Definitions

The Department of Health and the Washington Vaccine Association (WVA) work together to publicly purchase vaccine, eliminating cost barriers for childhood vaccinations. The narrow definition of vaccine in statute prevents the WVA from purchasing immunizations developed by new and innovative technologies. WSALPHO supports the technical fix to address this language in order to:

- Supply all childhood vaccines recommended by the Advisory Committee on Immunization Practices
- Eliminate healthcare provider costs to purchasing, storing, and administering vaccines
- Reduce cost barriers to receiving childhood vaccinations for overburdened and vulnerable families



Increasing Access to Syphilis Treatment

WSALPHO supports a statutory change in RCW.18.360 to temporarily allow Medical Assistants to treat syphilis when:

- Access to care is limited and/or
- Rates of infection exceed those typically observed in an area or population by >25%

Allowing MAs to treat syphilis during telehealth visits, as part of field outreach, community events, and syringe exchange programs will improve health outcomes among high-risk populations, including pregnant people which will reduce the number of congenital syphilis cases in Washington.



Child Death Review Teams

WSALPHO supports modernizing Washington's child death review statute (RCW 70.05.170) to:

- Strengthen the language for LHJs to collect or access records and data from other sources to aid in the review process
- Provide clarification for participants who are mandated reporters
- Expand the age for reviews to include 18 years of age
- Enhance local and state collaboration to inform statewide prevention initiatives and recommendations

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