

Additional Meeting  
Materials  
BOARD OF HEALTH  
November 21, 2024



**King County**  
**King County Board of Health**  
**Director's Report**

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Date: November 21, 2024

Prepared by: Dr. Faisal Khan, Director, Public Health – Seattle & King County

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**Stay current on Public Health trends and news:**

I invite King County Board of Health Members and Alternates to stay updated on important news and local health trends through Public Health – Seattle & King County's blog and online dashboards:

The Public Health Insider blog:

[PUBLIC HEALTH INSIDER – Official insights from Public Health - Seattle & King County staff](#)

Data dashboards:

- [Respiratory virus data dashboards: COVID-19, Influenza, and RSV - King County, Washington](#)
- [Overdose data dashboards - King County, Washington](#)
- [Climate Impacts on Health - King County, Washington](#)

**H5N1 bird flu prevention**

The U.S. Centers for Disease Control and Prevention (CDC) reports that H5N1 bird flu is widespread in wild birds around the world and is causing outbreaks in the United States in poultry and dairy cows. [As of November 15, 2024](#), the CDC has reported a total of 53 human cases reported in seven states during the 2024 outbreak. This includes human cases among Washington State residents associated with an HPAI outbreak in poultry.

Fifteen states have experienced outbreaks of H5N1 in dairy cows, and 48 states have experienced outbreaks in poultry. The [Washington State Department of Agriculture](#) reports no confirmed cases of H5N1 in domestic [livestock](#) in Washington State, but [poultry](#) have been infected. Additionally, wild birds have been detected with H5N1 in King County, and recently the [Woodland Park Zoo reported detecting avian flu in a captive red-breasted goose](#) that was being housed with other geese in an exhibit that was not accessible to the public. Public Health staff are monitoring exposed zoo staff members for development of any symptoms of H5N1 infection in response to this case.

The Department of Agriculture is the lead on communicating with farms and their workers, whom they recommend should wear personal protective equipment when working with animals or in their environments.

The CDC reports the current risk to public health is low, particularly because H5N1 hasn't shown the ability so far to transmit easily from person to person. They are monitoring people with animal exposures and are using influenza surveillance systems to monitor H5N1 activity in people.

Bird flu has been found in wild birds and other animals in King County but not in pets, dairy cows or people. Public Health recommends wearing personal protective equipment if you have direct or close

(within six feet) contact with sick or dead wild and domesticated animals, their excrement, or are in environments where there are sick or dead animals.

Public Health also recommends staying up to date with recommended annual flu vaccines especially for people who may have frequent exposures to infected birds or animals. While getting a seasonal flu vaccine only prevents seasonal flu and will not protect against H5N1 bird flu, getting the seasonal flu vaccine can help reduce the prevalence of seasonal flu and might reduce the very rare risk of coinfection with a seasonal flu virus and an avian virus at the same time, and the theoretical risk that reassortment between the two could result in a new virus.

More information from the CDC is available on this webpage, which is updated regularly: [H5 Bird Flu: Current Situation | Bird Flu | CDC](#)

More information from Public Health: [Avian influenza - King County, Washington](#)

### **Please share with your networks! Request for Applications (RFA): Opioid Overdose Prevention and Response Pilot Projects**

Public Health – Seattle & King County is soliciting project Applications through a Request for Applications (RFA) for two-year pilot projects to address opioid overdose and prevention utilizing community-centered approaches in King County, WA in the following three investment areas:

1. Expand services for people who use opioids that otherwise would not receive services in traditional behavioral health or other outpatient service venues across the care continuum.
2. Address quality of life issues for people who use opioids.
3. Expand community grief, respite, and support resources for people who have lost loved ones to overdose.

Go to [kingcounty.gov/RFA/opioid](http://kingcounty.gov/RFA/opioid) to access the full document and attachments.

### **First Mobile Food Business Info Session is a success!**

On November 19, Public Health's Food Safety Program conducted the first information session in a series to support new mobile/street food vendors through the permitting process. Multilingual staff were available to provide in language assistance. The 3-hour session was extremely successful, with approximately 50 attendees – including many Spanish speakers. Attendees had a range of questions about food business permits, including how to get started with the process. After getting one-on-one support with a food permit expert, many attendees expressed gratitude to staff for putting on the event and were interested in future events. Open and accessible informational sessions is one of the many strategies the food safety program is employing to lower or remove barriers street food vendors face in navigating through the permitting process. Additional information sessions will be scheduled soon for 2025.

Learn more about food permitting online: [Food business permits - King County, Washington](#)

## **Healthcare organizations continue commitment to protect patients and healthcare workers with an update to masking guidelines**

Healthcare systems in the Puget Sound region have updated their joint guidelines for masking in hospitals and outpatient clinics during respiratory illness season. This means local healthcare facilities may require patients, visitors and employees to wear masks when respiratory illnesses such as flu and COVID-19 are circulating widely in the community.

Masking is an effective way to reduce the spread of respiratory illnesses in healthcare settings. These latest guidelines re-affirm the importance of the health and safety of patients and employees, particularly for those who are at high risk of becoming severely ill from COVID-19, influenza (flu) and other respiratory illnesses.

Public Health – Seattle & King County joins other local health jurisdictions in strongly supporting the continued commitment by healthcare organizations to encourage masking in hospitals and clinics. Masking reduces the spread of disease, protects vulnerable patients and healthcare workers, and helps ensure healthcare facilities maintain capacity to serve our communities.

In September 2023, several healthcare systems across our region joined together to adopt thresholds for requiring masking during respiratory illness season. Since that time, healthcare facilities have continued their commitment to re-evaluate and update guidelines as new data become available. The latest guidelines use the most recent data to update thresholds for the 2024-2025 season.

Learn more on the Public Health Insider: [Healthcare organizations continue commitment to protect patients and healthcare workers with an update to masking guidelines – PUBLIC HEALTH INSIDER](#)

## **2026-2031 Medic One/EMS Levy Update**

The county-wide voter-approved Emergency Medical Services (EMS) levy that supports our world-renowned Medic One/EMS system expires December 31, 2025. The region just completed an [extensive planning process](#) to develop a new Strategic Plan and levy for King County voters to consider renewing in 2025. Beginning this February, the process brought together regional leaders, decision-makers and Medic One/EMS partners to collectively develop recommendations to direct the system into the future.

As in past years, the EMS Advisory Task Force oversaw the development of the recommendations and was responsible for endorsing broad policy decisions, including the levy rate, length, and ballot timing.

In late September, the EMS Advisory Task Force endorsed running a 6-year, 25-cent EMS levy on the November 2025 general election ballot. This 25-cent levy rate means that an owner of a \$800,000 home in our region will pay \$200 in 2026 for some of the nation's most highly-trained medical personnel to arrive within minutes of an emergency – at any time of day or night, no matter where in King County.

Developing the 25-cent levy is just one of many steps to getting the levy on the November 2025 ballot. Per state law, King County must now obtain the support of those cities with 50,000 or more in population and the King County Council to put to measure to the people. Starting early next year, the EMS Division will schedule briefings for the City Councils of those 11 cities and the County Council to walk through how the levy will support the regional system. A 2025 Board of Health briefing is in the works.

If you have any questions about the levy or the levy planning process, please contact Joy Carpine-Cazzanti, Board of Health Administrator at [KCBOHAdmin@kingcounty.gov](mailto:KCBOHAdmin@kingcounty.gov).

### **Whooping cough (pertussis)**

Whooping cough is increasing in King County, across the state, and nationally. So far there have been nearly 1,200 cases reported across the state this year. Roughly half of the whooping cough cases in King County this year have been in babies and children under 5 years old. Some of the babies were hospitalized.

Whooping cough is a very contagious bacterial illness that spreads through the air when an infected person sneezes or coughs. It starts with cold-like symptoms and develops into a worsening cough that can last for several weeks or even months.

Whooping cough can be very serious for babies under 12 months old – and especially babies under 4 months old. Twelve babies have been hospitalized with whooping cough in WA (as of Nov 2nd). Antibiotics are used to treat whooping cough, but they are only helpful in the first 3 weeks of an infection.

Vaccines:

- Babies and children receive 5 doses of DTaP vaccine between 2 months old and 4-6 years old.
- Adolescents should receive a booster shot (Tdap) at 11-12 years old.
- Pregnant people are recommended to receive Tdap vaccine during every pregnancy. The vaccine produces antibodies that are transferred to the fetus; this will protect newborns before they are old enough to get vaccinated.
- Adults should get a Tdap shot every 10 years.

# Whooping cough (pertussis)

**What is it?** Whooping cough is caused by bacteria and starts between 5-21 days after exposure. At first, it can feel like a cold. Then the cough can become severe. The illness can last for many weeks. Some signs are:



## How does it spread?

It can spread person to person through the air. This happens when someone has whooping cough and talks, coughs, or sneezes around other people.



## Who is at risk?

It is most serious for babies. It can lead to hospitalization, pneumonia, breathing problems, brain damage, or even death.



## How can I avoid spreading it to others when sick?



## Vaccination is the best way to prevent whooping cough.



- The vaccine for babies and young children is called DTaP.
- The vaccine for teens and adults is called Tdap.
- Pregnant people should get the vaccine during the third trimester of each pregnancy.



Talk to your health care provider about vaccination, if you are sick, or were exposed to whooping cough. Treatment with antibiotics helps, especially when given early. To learn more visit [kingcounty.gov/cd](http://kingcounty.gov/cd).

6/12/2024

## King County's 100 Days of Action mobilizes resources to combat rise in gun violence

King County concluded its 100 Days of Action initiative after mobilizing resources to combat a rise in gun violence. County leaders directed funding toward community-led initiatives and programs that supported youth at risk for involvement in gun violence and victims and families directly impacted, in addition to increased public awareness of community violence intervention practices.

On October 30, King County Executive Dow Constantine announced the conclusion of the 100 Days of Action initiative, which launched on July 10 and ended on Oct. 18, in partnership with the City of Seattle and local community organizations. The initiative utilized various strategies to concentrate attention and mobilize resources to collectively address the rise in firearm incidents in King County, particularly the increase in firearm violence during the summer months.

Activities during the 100 Days of Action included those focused on public education and engagement, increasing public safety through community outreach and access to safe firearm storage, and collaboration with communities seeing a rise in gun violence in King County.

Learn more online: [King County's 100 Days of Action mobilizes resources to combat rise in gun violence | by Dow Constantine | KingCounty | Oct, 2024 | Medium](#)

### **New comic explains the risks of “forever chemicals”**

The Lead and Toxics Program, in Public Health’s Environmental Health Services Division, published a comic about PFAS – a group of chemicals used in a wide variety of everyday products that can lead to serious health issues. The series of three comic strips cover where PFAS are found, health impacts, and how people can reduce their exposure to the chemicals. Two comic strips are available now online, and the third will be published the week of November 25th. The Program is conducting an outreach campaign to promote the comic, including distributing over 11,000 printed copies of the comic to community partners (translated into multiple languages), paid social media in English and Spanish, and media ad buys in El Rey, Seattle Medium, and more. Please share with your networks!

Part 1: [What are PFAS and why are they harmful? A comic strip explains. – PUBLIC HEALTH INSIDER](#)

Part 2: [How can we reduce exposure to PFAS? A comic strip explains \(part 2\). – PUBLIC HEALTH INSIDER](#)



Hi I am, Jolene Williams, a member of the Snoqualmie Tribe and a Tribal Council member. I am the daughter of Caroline M. Enick Glendale of Snoqualmie and Eugene R Jack of Yakama Nation, granddaughter of James Enick of Sauk Suiattle Tribe and Evelyn M. Keenum Enick of Snoqualmie Tribe also my paternal grandparents Ella Olney and Raymond Jack both from Yakama Nation and Great Granddaughter of Chief Jerry Keenum of Snoqualmie Tribe. Who resides in Tolt known as Carnation to some. My practice and teachings have always been to introduce oneself and your family ties so those who are listening can understand the connections to why you are present.

I am a current Snoqualmie Tribal Council member for 8 years now and entering a 3rd-4-year term as of May 2024. I also sat on Snoqualmie Tribal council as an alternate council member in 2010 to 2012. I currently have master's degree in Managerial Communications, Bachelors in Business completed through an online program from Bellevue University of Nebraska. I have been in the gaming industry (aka Casino) for 20 years.

I am a wife to a wonderful man named Steve L Williams, Sr going on 25 years come February.

I am a proud parent of 5 beautiful children 3 boys and 2 girls and a grandparent to 7 great beings who steal my heart every moment I see them. I currently reside in Marysville WA. Yes I commute everyday to work for my people in the Snoqualmie Valley area. My grandparents did the same commute when I was growing up. I have many memories at the Tolt Mac Donald Park. My family still picnics there annually to keep our ancestors' stories and practices alive.

I am in hopes to add my knowledge, experience and my tribe's attributions to conversations had on King County Behavioral Health Committee.

We have to share who we are after we know who we are! Respect the grounds we walk because our ancestors laid the foundation of our existence to be who we have become now!

Jolene R Williams, MMC

Snoqualmie Tribal Councilwoman



## Bio for Angela Young

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I have worked for five years at the Snoqualmie Casino in the guest service department, and for five years in the Purchased/Referred Care (PRC) department of the Snoqualmie Tribe. I've been on Tribal Council for a year and a half, with a special interest in health and wellness. I also serve on the NW Portland Area Indian Health Board and have been working on our tribe's Purchased/Referred Care Delivery Area (PRCDA) to allow more members to access healthcare, as well as getting our own health board up and running. I have six children, and I've been an educator for over 20 years. And I'm excited to join the King County Board of Health.

# Protecting Perinatal Health Outcomes in King County with a Community-based, Culturally Responsive Approach

Dila K Perera MSW MPH  
Executive Director

[dila@openarmsps.org](mailto:dila@openarmsps.org)  
openarmsps.org

# Our Mission

**Doulas are trained community health workers who provide skilled support and education before birth, during labor, and postpartum.**

Open Arms provides community-based support during pregnancy through birth and into early parenting to nurture strong foundations that last a lifetime.

Since 1997 Open Arms has served over 4,000 low-income parents during the critical and vulnerable time surrounding the birth of a new baby. We serve nearly 500 parents and 500 children annually.



# Core Programs: Culturally Responsive, Community Driven, focus on the pregnant person, family AND infant.

**1**  
**Birth Doula Services**  
**(Since 1997)**

**2**  
**Community-based**  
**Outreach Doula Home**  
**Visting Program (Since**  
**2008)**

**5**  
**Family Support Services (Since**  
**2021) referrals to resources to**  
**address social risk factors (e.g.**  
**material needs, housing**  
**insecurity, IPV)**

**3**  
**Lactation Peer**  
**Counseling (Since 2020)**

**4**  
**Prenatal Support Groups,**  
**Childbirth Education**  
**(Since 2020)**

**6**  
**Community Education (Since**  
**2022) Professional**  
**development education for**  
**birth workers**



# Our Families

## Open Arms Serves Nearly 500 Clients Annually

- Live within 200% of FPL
- Over 90% are people of color
- 30% are recent immigrants or refugees
- Speak 33 languages
- Majority live within King County
- Face social risk factors: trauma, social isolation, poverty, food and housing insecurity, racism
- Over 11% would have otherwise been unaccompanied at birth
- Over 24% have comorbidities or factors that increase risk such as gestational diabetes, hypertension, preeclampsia, perinatal mood disorders
- 7.6% births are VBAC



*open arms*  
perinatal services

# Key Outcomes

**High Home Visiting Retention:**  
retention rate of 72% compared to 47% for other WA programs.

**Sustained Lactation:** Most parents breastfeed until 6 months or more: 60-94% breastfeeding at six months depending on ethnicity, vs. 35% for other WA programs. Our overall 2019 rate is 100% per HRSA measures.

**Improved Infant and Maternal Health:**  
Significantly lower rates of preterm infants and interventions compared to King County and State population data.  
Fewer children have developmental concerns and nearly all concerns improved with follow-up.

# Key Outcomes

Significantly fewer pre-term births overall: 4.9% vs. 9% in King County overall.

## AI/AN Indigenous Families

Preterm: 5%

*2022 State of WA = 8.9%, 2020 King County = 9.3%*

Low Birth Weight: 9.5%

Cesarean births: 25%.

*2021 State of WA = 29%, 2019 King County = 34.9%*

BF @ Birth: 100%    BF @ 6M: 64%

## Black/African American Families:

Preterm: 6.4%

*2021 CDC = 14.8% 14.8%*

Cesarean births: 28.6%

*2021 US 35.1% (Planned or Unplanned) C-Sections*

BF @ Birth: 56.5%    BF @ 6M: 71%

**Since 2016, the percentage of clients at OAPS that identify as Black/AA increased by 17.3% (from 27.1% in 2016 to over 44.4%).**



# References

Open Arms collects extensive data from our families during intake, as part of matching with service providers, as well as post partum. All data are aligned with local and national indicators and captured in a customized database. We also disaggregate by race, language, and other demographic information.

[Center for Disease Control: Washington \(2020\)](#)

[CDC Reproductive Health Preterm Birth Outcomes - 2021](#)

[March of Dimes Washington State \(2022\)](#)

[March of Dimes - Low Birth Weight in 2021](#)

[Best Starts for Kids: King County \(2020\)](#)

[Swedish First Hill Hospital: Seattle \(2020\)](#)

[Center for Disease Control: Washington \(2020\)](#)

[United Health Foundation: Washington](#)

[Washington State Department of Health \(2020\)](#)





King County

# King County 2025 Legislative Priorities

**Mac Nicholson**

Government Relations Director, King County Council

King County Board of Health

November 21, 2024



## Secure Local Government Funding for Essential Services

King County faces a severe revenue deficit because the cost of county provided essential services and programs continues to grow, and the Legislature capped revenue growth from property taxes at 1 percent and limits other revenue options for counties. To make progress on these issues, we ask the Legislature to:

- Provide counties with sustainable revenue sources, ensuring they can perform the services that the State mandates and residents desire;
- Address inadequate funding support for County roads and bridges;
- Increase state funding for state mandated public defense costs.



## Dedicated support for Public Health Clinics

**A dedicated revenue stream for King County's public health clinics is required to support the health care services delivered to 80,000 residents across King County annually.** Public Health clinics provide crucial services to meet the healthcare needs of people historically underserved by the medical system, including Black, indigenous, and people of color, those who speak a primary language other than English, those experiencing homelessness, and those who are uninsured.

Public Health has been significantly underfunded since the Legislature enacted \$30 car tabs in 2001 as the MVET supported public health. While some replacement funds were allocated, those were cut in the 2008 Great Recession. Further, the Legislature's 2007 one percent limit on the growth of property tax further limits funding available for general government, including public health. FPHS funding in the last decade does not fund public health clinics.



## Behavioral Health: Strengthen Access to Care

Adequate state support is critical to provide for people in crisis, complementing direct local investments in crisis care and stronger care delivery. Too many people are going without the mental health and substance use/recovery care they need, which can lead to a cycle of hospitalization, homelessness, and interaction with the criminal-legal system. To reverse this inequitable and costly cycle, the State must take these key actions in 2025 to support behavioral health services:

- Fund minimum behavioral health Medicaid payments based on the state's own rate study;
- Provide funding for initial operations of new behavioral health facilities that provide crisis care, including investing in the success of the first-of-its-kind crisis facility in King County;
- Fully fund state-mandated services such as evaluation and treatment, the ITA court, and designated crisis responders;
- Expand access to medications for substance use disorder, addiction and overdose recovery care, and invest in behavioral health supports for people living in affordable and supportive housing.



## Bolster Public Safety and the Legal System

The public safety and legal systems are overburdened and under-resourced. The Legislature can help offset these problems by:

- Preventing gun violence, by requiring a permit to purchase firearms, allowing Medicaid funds to be used for violence intervention programs, and removing the preemption of local firearm policies;
- Funding diversion programs and alternatives to incarceration;
- Maintaining increased correction officer academy training classes;
- Providing additional fiscal and policy resources for the King County legal system to help address the increased unlawful detainer caseload;
- Increasing funding for programs that seek to end gender based violence and support survivors of crime.





## Housing and Homelessness

Housing and homelessness continue to be critical issues. We ask the Legislature to:

- Provide robust state operating and capital investments for affordable housing, permanent supportive housing, and emergency housing and shelters;
- Build on state investments and provide stronger and ongoing state support to stabilize and provide services to refugee and immigrant populations, including recently arrived migrants and asylum seekers;
- Adopt policies and invest in programs that encourage and preserve homeownership, and help address current and future housing needs;
- Build on investments in state and local government programs that move people out of encampments and into housing.



## Protect Our Climate and Environment

We must mitigate and prepare for the climate crisis and address the ongoing environmental decline. The Legislature can take two immediate steps to counteract these crises:

- Enact the Re-WRAP Act, enhancing and growing product stewardship programs to make products safer for people and the planet, from design to disposal;
- Reduce, mitigate, and eliminate PFAS and other forever chemical pollution;
- Recognize municipal solid waste as a source of renewable energy.



## Responsible Government

- Maintain investments in WSDOT infrastructure projects, complete the Triangle project, fund the roundabout on SR 203/Tolt Hill Road, and increase funding for public transit connected to water taxis and ferries;
- Provide funding for a public awareness campaign and increase funding for respite centers for human trafficking related to major tourism generating events;
- Increase the number of available enrollment slots for Apple Health;
- Increase reestablishment expense limit for entities displaced by public works projects;
- Allow lodging tax revenue to be used to maintain and grow the tourism related workforce.





King County

## CONTACT

### **Mac Nicholson**

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# 2025 WA State Legislative Session

Simon Vila, Government Relations Officer

Ginna Hernandez, Policy Analyst

Public Health – Seattle & King County

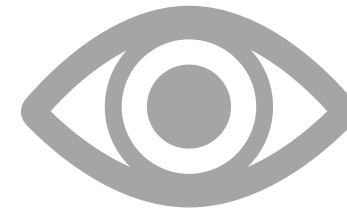
November 21, 2024

King County Board of Health

# Agenda



Calendar and Key Dates



What PHSKC is Watching in 2025

# Calendar and Key Dates

## **December**

- Assembly Days - 12/9 -12/13
- Governor's Budget Proposal
- Bill Drafting and Submissions

## **January**

- Session Kick-off – January 13th
- Committee Hearings

## **February**

- Cutoff: Policy Committee (3<sup>rd</sup> week of Feb)
- Cutoff: Fiscal Committee (4<sup>th</sup> week of Feb or 1<sup>st</sup> week of March)



# Calendar and Key Dates

## March

- Public Health Day - March 6<sup>th</sup>
- Cutoff: House of Origin (1<sup>st</sup> or 2<sup>nd</sup> week of March)
- House/Senate Budget Release
- Cutoff: Opposite Policy Committee Cutoff (last week of March)

## April

- Cutoff: Opposite Fiscal Committee Cutoff (1<sup>st</sup> or 2<sup>nd</sup> week of April)
- Cutoff: Opposite House Cutoff (2<sup>nd</sup> or 3<sup>rd</sup> week of April)
- Sine Die/Session Concludes: (\*scheduled\* last week of April)

# What we're watching in the 2025 Legislative Session

During legislative session, PHSKC weighs in on a range of public health topics. PHSKC is currently watching the following topics:

**Foundational Public Health Services (FPHS)**

**Racism as a Public Health Crisis**

**Community Health and Well Being**

**Climate Change and Health**

**Homelessness, Housing and Health**

**Overdose Prevention**

**Gun Violence Prevention**

**Healthcare Access**

**Food Access**

**Injury Prevention**

**Tobacco and Cannabis**

**Environmental Health**

...and more!



# Questions?

Contact Joy Carpine-Cazzanti, BOH Administrator  
[KCBOHAdmin@kingcounty.gov](mailto:KCBOHAdmin@kingcounty.gov)