

Additional Meeting

Materials

BOARD OF HEALTH

April 17, 2025



**Signature Report**

**Resolution**

**Proposed No. 25-04.1**

**Sponsors**

1           A RESOLUTION honoring Mary Selecky for her decades  
2           of dedicated public health leadership and mentorship in  
3           Washington State, including her efforts to curb smoking,  
4           raise childhood vaccination rates, and prepare for  
5           emergencies.

6           WHEREAS, Mary Selecky devoted more than four decades to public health in  
7           Washington State, serving as Secretary of Health from 1999 to 2013 and previously as  
8           the Administrator of the Northeast Tri-County Health District, and

9           WHEREAS, Mary Selecky was appointed as Washington Secretary of Health in  
10          1999 by Governor Gary Lock and retained by Governors Christine Gregoire and Jay  
11          Inslee, becoming one of the longest-serving Cabinet members in state history, and

12          WHEREAS, in fourteen years as Secretary of Health, Mary Selecky led  
13          transformative initiatives that saved countless lives, most notably reducing the adult  
14          smoking rate in Washington by nearly one-third through a comprehensive tobacco  
15          prevention and control strategy launched in 1999, and

16          WHEREAS, under Mary Selecky's leadership, Washington State dramatically  
17          improved childhood immunization rates, climbing from 46th to 16th in the nation by  
18          strengthening statewide efforts to support vaccine confidence and access, and

19          WHEREAS, Mary Selecky prioritized emergency preparedness following events  
20          such as the 2001 Nisqually earthquake, the September 11th attacks, and the anthrax scare,

21 significantly enhancing Washington's laboratory and epidemiological capacities and  
22 ensuring that the public health systems were ready to respond to crises affecting all  
23 communities, and

24 WHEREAS, Mary Selecky's early work in rural public health included  
25 courageous leadership on HIV prevention, including implementing needle exchange  
26 programs in communities where such efforts required great care and trust building, and

27 WHEREAS, Mary Selecky helped Washington become one of the first two state  
28 health agencies in the nation to earn national accreditation, setting a standard of  
29 excellence for other states to follow, and

30 WHEREAS, Mary Selecky received numerous honors recognizing years of public  
31 service, including the Joe Hopkins Memorial Award from the Washington State Hospital  
32 Association, and left behind a public health system stronger, more resilient, and more  
33 equitable than the one that was inherited;

34 NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF HEALTH OF  
35 KING COUNTY:

36 The Board and Public Health - Seattle & King County express its deep gratitude  
37 and highest respect to Mary Selecky for a lifelong commitment to improving the health of

- 38 all Washingtonians, and affirm that Mary Selecky's impact on public health in  
39 Washington will endure for generations to come.

KING COUNTY BOARD OF HEALTH  
KING COUNTY, WASHINGTON

---

Teresa Mosqueda, Chair

ATTEST:

---

Melani Hay, Clerk of the Board

**Attachments:** None

# Streamlining Food Business Permitting

King County Board of Health

April 17, 2025

**Dr. Eyob Mazengia**

Food & Facilities - Assistant Division Director

**Dr. Atar Baer**

Food & Facilities - Section Deputy

**Ian Miller, MPH**

Food & Facilities - Technical Senior

*Environmental Health Services Division*





# Contents

- ❖ Food Safety Program goal
- ❖ Current landscape
- ❖ Food business permitting challenges
- ❖ Initiatives to improve food business permitting
- ❖ Update on the food safety rating expansion

# Food Safety Program Goal

Ensure food safety measures are in place to protect the public from foodborne illnesses

We accomplish this objective by:



Completing  
plan reviews



Conducting  
regular inspections



Providing  
food safety trainings



Responding to  
complaints



Taking  
enforcement actions

# Current Landscape

## Permitted Vending

- 12,500 permanent food businesses
- ~800 mobile food units
- ~3,500 temporary food permits
- 50 Farmers Markets



Board of Health

April 17, 2025

## Unpermitted Vending

- Mainly street food vendors selling cut fruit and food cooked on site
- Increased trend locally (109 vendors closed in 2024 vs. 27 vendors in 2023)
- Increased trend nationally
- Increased frustration among permitted street vendors
- Difficult to trace foodborne illnesses
- Increased media/public attention





# Permitting Challenges

- Financial barriers
- Difficulty navigating the permitting process across multiple agencies (City/State business licenses, PHSKC, L&I approval, street use permits, fire)
- Commissary kitchen access/cost
- Access to sanitation facilities
- Street use access/restrictions
- Language barriers
- Turnaround time to get permitted



# Initiatives to remove barriers:

## Improve access to commissary kitchens

### Completed

### Upcoming



**Project:** Offer commissary kitchen vouchers for up to 6 months to new and unpermitted street food vendors

**Benefits:** Reduces upfront cost; reduces likelihood of unsafe home preparation

**Timeline for Initiating:** Q3-Q4 of 2025

**Impacts on program:** Will require resources to manage the voucher program. We have success offering a similar kitchen access voucher during the COVID pandemic response.

[kingcounty.gov/commissary](https://kingcounty.gov/commissary)

# Initiatives to remove barriers:

## Increase permitting options

### Completed

**Expanded catering:** Created a pathway for caterers to sell food to consumers from a "pop-up" retail outlet.



### Upcoming

- **Project:** Pilot options for seasonal pop-up permits for street vendors to sell low-risk foods without having to be at a temporary event/farmers market.
- **Benefit to customers:** Provides a pathway for start-up food businesses.
- **Timeline for Initiating:** Q3-Q4 of 2025
- **Impacts on program:** We expect a significant number of requests for "pop-up" permits, requiring additional staffing to issue permits and conduct inspections. If the pilot is successful, the EH Program may propose to the Board a code change.

# Initiatives to remove barriers:

## Close knowledge/information gaps



### Completed

- **Multilingual staff**
  - **Increased access to staff:** Increased direct customer support via Environmental Health Sanitarian on Duty
  - **Publications/media**
  - **Increased community engagement:**
    - 11/19/2024 at Rainier Beach Library
    - 2/3/2025 at El Centro de la Raza
    - 3/25/2025 at El Centro de la Raza
    - Upcoming session planned for April 2025 at El Centro de la Raza
    - About 150 individual businesses supported so far
- Board of Health

### Upcoming

- **Project:** Contract with Community Based Organizations to conduct outreach and support street food vendors with the permitting process.
- **Benefits:** Reduce time and effort needed to obtain street food permits.
- **Timeline for Initiating:** Will establish contracts in Q2 of 2025, program will run through summer 2026
- **Impacts on program:** Will require establishing contracts and use of program resources.

# Initiatives to remove barriers:

## Reduce financial barriers

### Completed

**Proration of Permit Fees:** BOH Rule Change 2/15/24

Opening Date/Risk III	In 2023	In 2024
April 1 – June 30	\$927	\$927
July 1 – Sep 30	\$927	\$695
October 1 – Dec 31	\$463	\$463
Jan 1 - March 31	\$463	\$231

### Upcoming

- **Project:** Pilot a one-time 50% reduced fee for new street food vendors with carts selling low-risk foods (e.g., cut fruit, shaved ice). The reduced fee includes 50% off plan review and annual permit fees.
- **Benefits:** Reduces upfront cost (\$790 - \$1093); reduces likelihood of unsafe home preparation.
- **Timeline for Initiating:** Q2-Q3 of 2025
- **Impacts on program:** Reduced revenue (\$40,000 - \$55,000); however, the pilot will test whether the cost will be offset by reduced time/effort spent on enforcement related to unpermitted vending, which is not covered by permit fees.

# Initiatives to remove barriers:

## Reduce permitting wait time

2024/2025	Number of plans in queue	Turn around time in days
1st Quarter/2024	160	74
2nd Quarter	112	55
3rd Quarter	39	24
4th Quarter	48	26
1st Quarter/2025	68	26

# Ongoing Challenges

A multi-agency, sustained approach is needed to address:

- Lack of affordable commissary kitchens that are geographically accessible county-wide (\$800-\$1500/month)
- Costly and limited access to locations where permitted vendors are allowed to operate
- Permitting requirements from other agencies
- Staffing capacity constrained by the fee for service model
- Viable/effective options to bring unpermitted vendors into compliance

# Expansion of The Food Safety Rating System

(1) BOH rule change to expand the food safety rating system to include ~2,000 additional food establishments

Increases access to food safety information to customers and incentivizes operators to improve food handling practices



Caterers



Food trucks and carts



Bakeries



Meat/seafood shops

(2) Updated description of emojis on our placards





Board of Health

April 17, 2025

# Questions?

## Contact

[KCBOHAdmin@kingcounty.gov](mailto:KCBOHAdmin@kingcounty.gov)

# Youth Mental Health and Substance Use in King County: Needs Across a Continuum



Department of Community & Human Services and  
Public Health – Seattle & King County  
King County Board of Health  
April 17, 2025

# Agenda

- Youth behavioral health data brief
- Continuum of supports for youth mental health and substance use
- Update on policy and strategic planning efforts
- Future policy strategies
- Questions and discussion



# Future Aims

*All young people need access to the appropriate supports and services to help develop their strengths and identities, build healthy relationships with adults and peers, and access a range of developmentally and culturally appropriate supports when they experience challenges.*

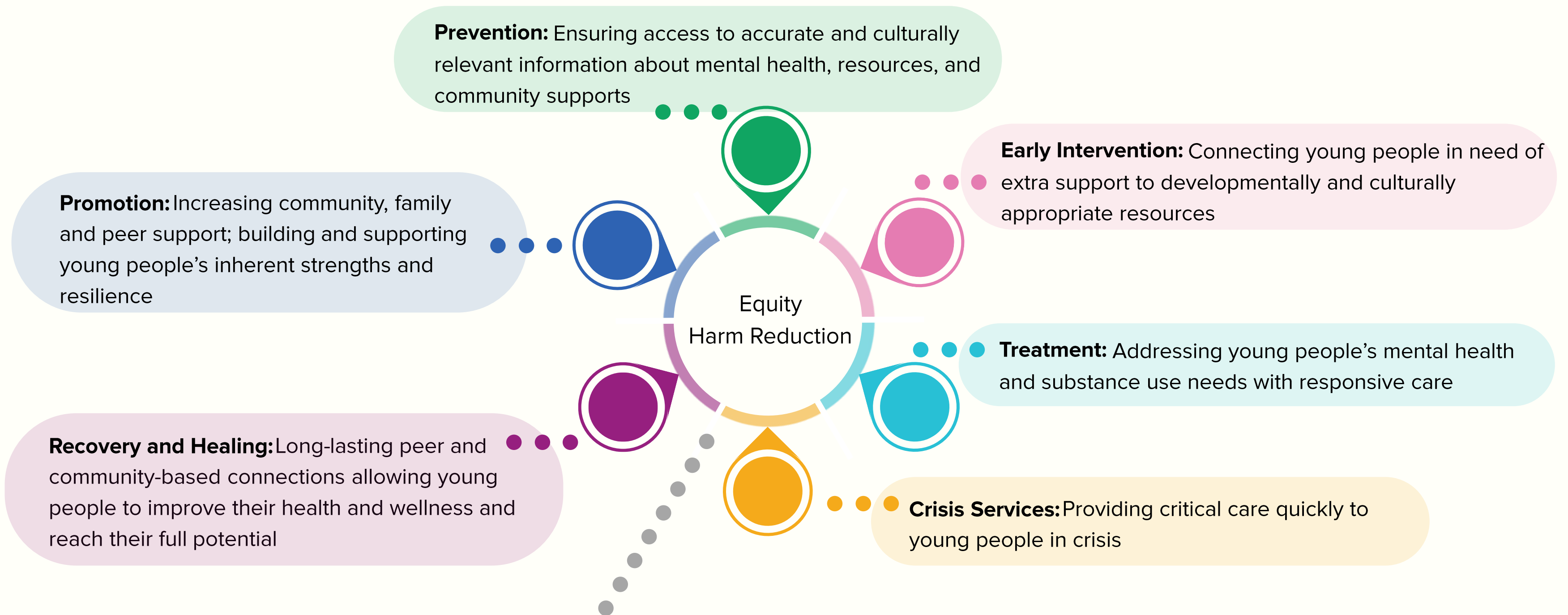
## Current reality:

Young people are still experiencing youth mental health and substance use challenges that need additional supports at the program, policy, and systems levels.

# Mood disorders are the leading cause of hospitalization for King County youth

- 788 hospitalizations each year on average for mood disorders among King County residents ages 1-17 (2017-2021)
  - This is a rate of **186 hospitalizations per 100,000** King County residents in this age group
  - This rate is **3 times higher** than the second most common cause of hospitalizations for youth (unintentional injury: 60 hospitalizations per 100,000)
  - This is about **16% of all hospitalizations** for this age group.
  - This rate is even higher among girls in this age group (277 per 100,000)

Data source



**Equity and harm reduction** are values held across each domain. Valuing equity means promoting culturally relevant approaches meeting the specific needs of diverse communities. Harm reduction means providing developmentally appropriate information and resources to help young people stay as safe as possible when experimenting, taking risks, or experiencing more significant challenges.

# Recovery and Healing

“

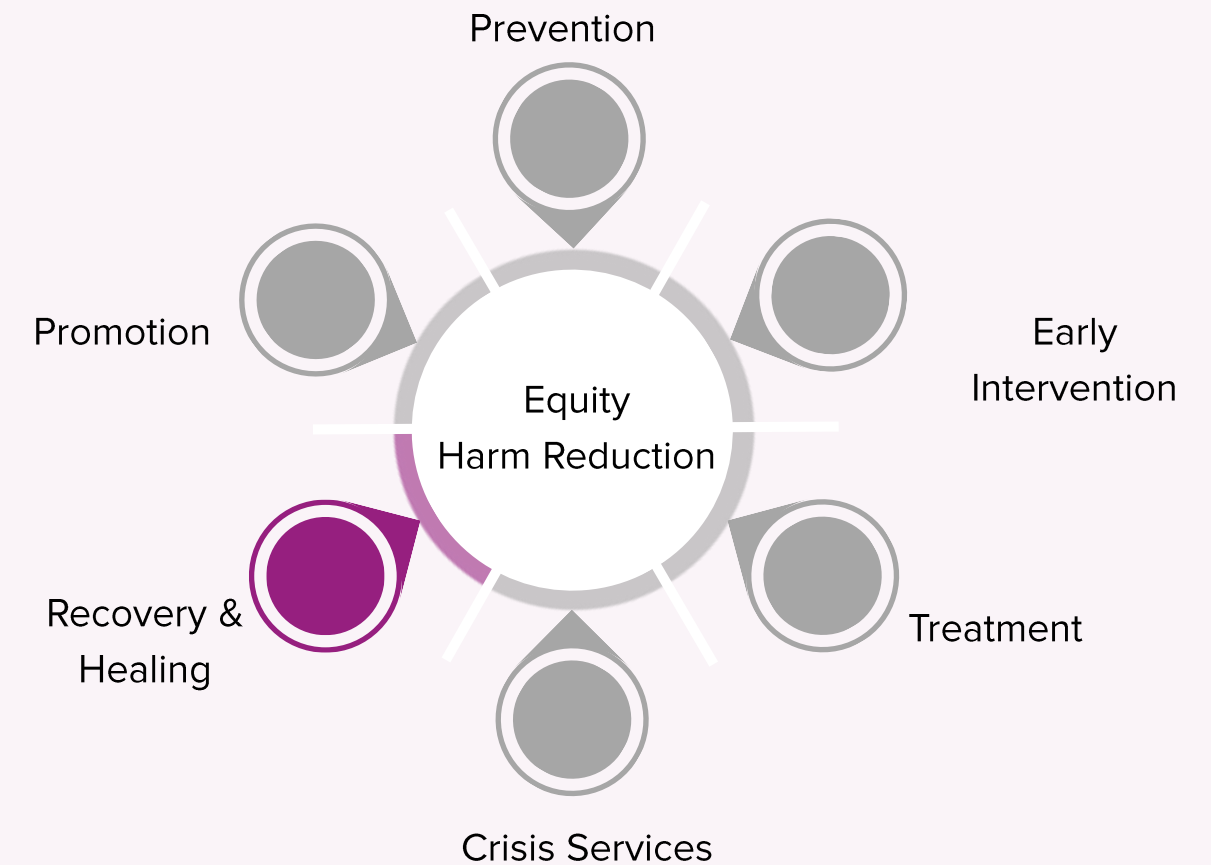
*“We believe that healing doesn’t happen in isolation. Healing happens in community, with connection, joy, art, food, and music...”*

- [Youth Healing Project](#) participant

*“The Recovery Campus gave me a place to fit in and find comfort in a sober lifestyle that not many people my age were doing. It gave me an environment **where my ideas were valued, and my problems met with solutions rather than dismissal.**”*

- Seattle Public Schools [Interagency Recovery Campus](#) student

[For full brief with citations, click here](#)





## Organizational Outcomes

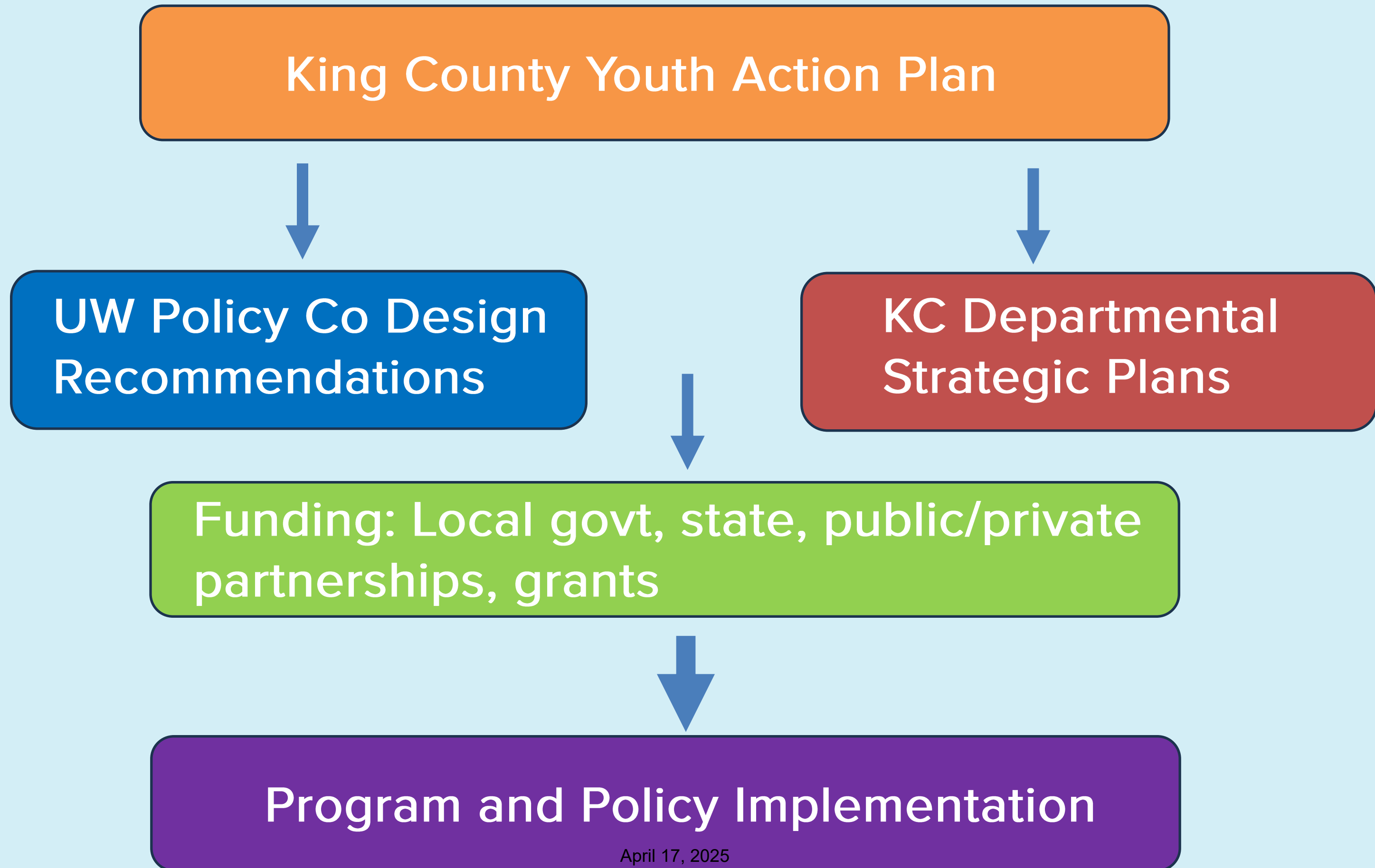
YouthCare is dedicated to achieving short, intermediate, and long-term outcomes for young people in its target population. Short-term outcomes are the small changes that occur within program as a young person engages with services. Intermediate level outcomes are the changes that show that a young person is ready to exit or graduate from YouthCare. Once a young person has achieved all their intermediate outcomes, they will enroll in Aftercare. Long-term outcomes are the long-lasting changes that participants have as the result of the YouthCare program and one year of Aftercare. YouthCare defines long-term stability as achieving housing stability, financial stability, personal support, and wellness.





Referral	<ul style="list-style-type: none"> <li>•Received from various sources, including other YC staff, the Bridge Collaborative hotline, Advocates from partner agencies, external service providers, CFJC staff,</li> <li>•Respond within ~1 business day</li> </ul>
Outreach	<ul style="list-style-type: none"> <li>•Begin getting to know the young person</li> <li>•Elevator pitch</li> <li>•Assess for eligibility and interest</li> <li>•Identify &amp; respond to immediate needs</li> </ul>
Intake	<ul style="list-style-type: none"> <li>•Complete YC intake forms</li> <li>•Continue to gather information about the young person's current circumstances and important historical context</li> <li>•Enroll in YES</li> </ul>
Service Planning	<ul style="list-style-type: none"> <li>•Identify goals &amp; action steps in key areas of safety &amp; stability</li> <li>•Identify individual needs, interests, &amp; strengths</li> <li>•Discuss timelines</li> <li>•Review every 90-days</li> </ul>
Ongoing Services & Support	<ul style="list-style-type: none"> <li>•Housing support</li> <li>•Systems navigation</li> <li>•Continuity of care &amp; community</li> <li>•Connection to resources</li> <li>•Connection to community</li> <li>•Increasing financial resources</li> </ul>

# Youth Mental Health and Substance Use Policy and Systems Components



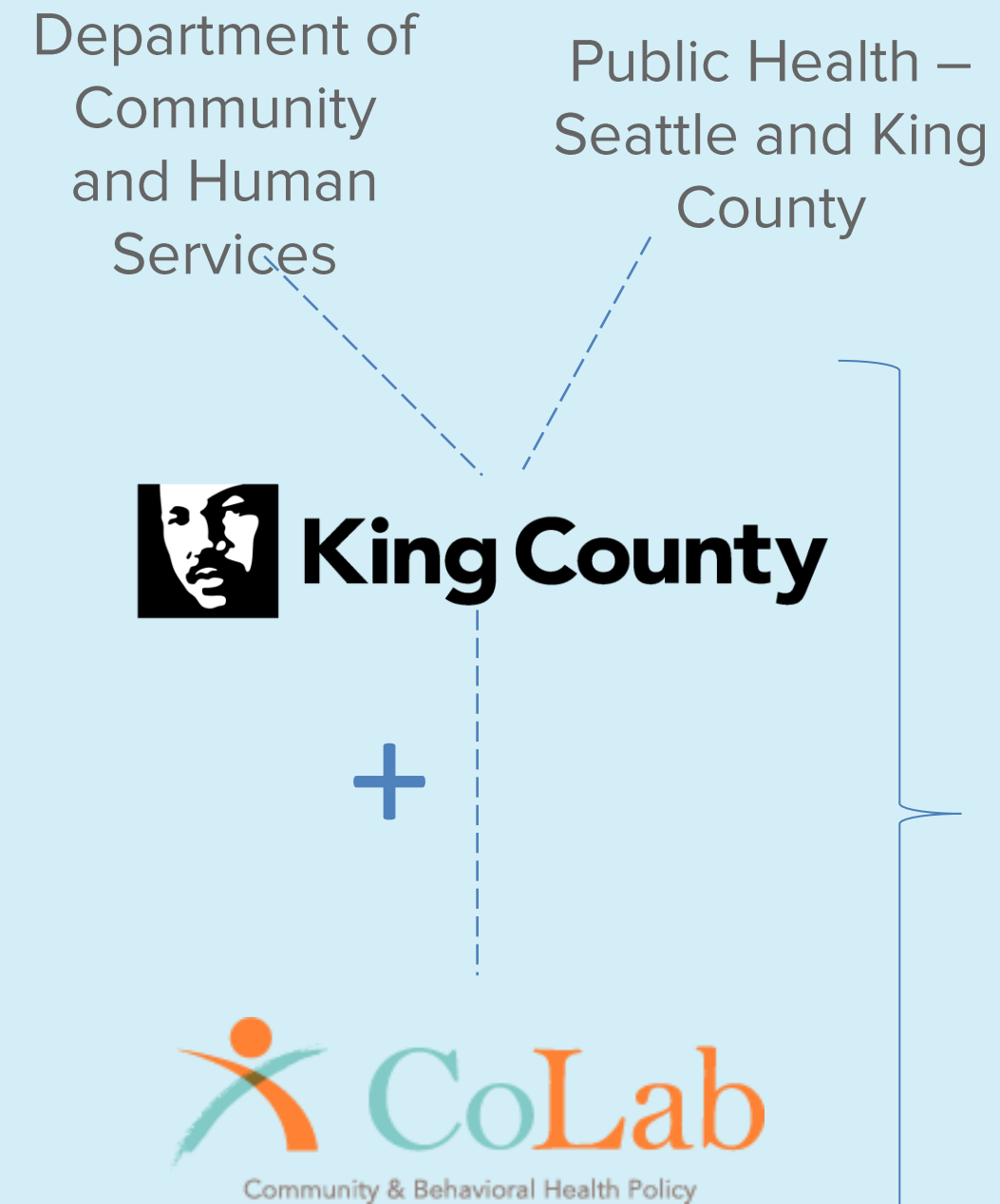
# King County Youth Action Plan

- [First iteration of the Youth Action Plan \(YAP\) was adopted in 2015](#)
- DRAFT youth behavioral health recommendations from updated YAP, to be transmitted to Council later this year:
  - Expand definition and delivery of youth behavioral health supports
  - Foster youth empowerment and leadership in behavioral health & create “By and For” opportunities for BIPOC and LGBTQ youth
  - Ensure a range of treatment options for mental health and substance use disorders are available
  - Develop and support places and services for recovery, healing, and reentry

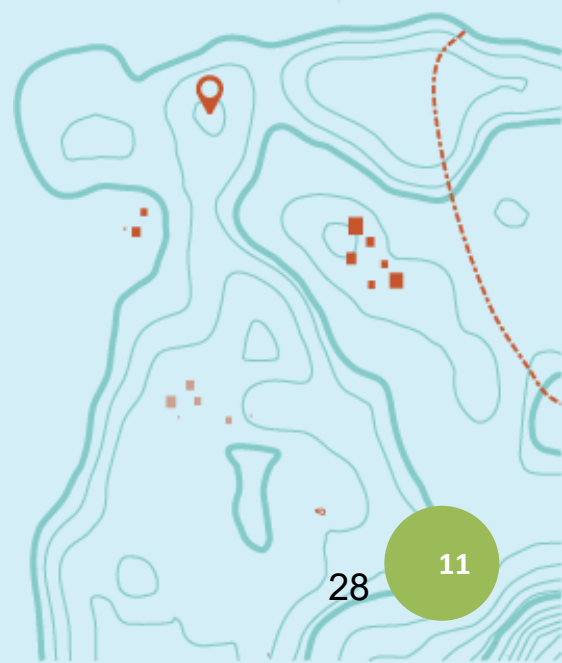
# University of Washington CoLab Policy Co-Design

## Recommendations

- Participatory, creative community policy co-design process aiming to improve youth mental health and substance use prevention
- Recommendations focused on:
  - County government strategies
  - Network contracts and relationships
  - Local programs and services
- Two-page policy brief and full report available [here](#)



**Policy  
Codesign**



# Public Health — Seattle & King County 2024 – 2029 Strategic Plan



Board of Health



Public Health  
Seattle & King County



April 17, 2025

## Community Well Being and Youth Behavioral Health

- Policy and program planning
- Communications strategy
- Workforce development
- Implement strategies

[PHSKC Strategic Plan](#)

# Funding streams: potential supports for youth behavioral health programs

- MIDD Behavioral Health Sales Tax
  - Renewal process underway through 2027 for implementation starting in 2028
- Best Starts for Kids (BSK) Levy Renewal
  - Expected on ballot 2027, implementation starting in 2028
- Seattle Families, Preschool, and Promise (FEPP) Levy
  - Expected on ballot Nov 2025, implementation starting in 2026
- State funding (ongoing)
- Private or philanthropy (ongoing)

# APPLYING POLICY RECOMMENDATIONS TO KING COUNTY INVESTMENTS

- Investment across the continuum – we need focus and resources from promotion to crisis, to meet young people where they are with the support they need
- Focused investments for BIPOC and LGBTQ young people who are disproportionately experiencing disparities
- Intentional investment in school-based health services to effectively meet young people where they are
- Flexible and youth-valued approaches to talking about substance use informed by prevention, harm reduction, and recovery

# Questions and Discussion



For any follow up questions or  
comments please email  
[KCBOHAdmin@kingcounty.gov](mailto:KCBOHAdmin@kingcounty.gov)