



Public Health
Prevent. Promote. Protect.

Advisory Council

June 8, 2021 meeting notes

Attendees: John Brooks, Sandy Brown, Joan Caley, Tyler Clary, Mark Collier, Heather Dekker, Remy Eussen, Adrienne Fairbanks, Dave Fuller, Charbonneau Gourde, Lawrence Neville, Stephanie Roise-Yamashita, Marla Sanger, Cassandra Sellards-Reck, Maria Swinger-Inskeep, Aru Undurti

Absent: Paul Childers, Katie Huynh

Staff: Doreen Gunderson, Jeff Harbison, Janis Koch, Alan Melnick, Andrea Pruett

Guests: N/A

(1) WELCOME/NEW MEMBERS/APPROVAL OF MEETING MINUTES *(Marla Sanger)*

- Marla opened with introductions and welcomed three new Council members: Tyler Clary, representative of Clark County water utility; Heather Dekker, representative of Legacy Salmon Creek Hospital; and Maria Swinger-Inskeep, a non-elected representative of Clark County cities and towns (other than City of Vancouver).
- The council reviewed the meeting minutes from April 13, 2021. Remy Eussen moved and Dave Fuller seconded motion to approve the meeting notes as submitted. All were in favor.

(2) COMMENTS FROM THE PUBLIC

None

(3) DEPARTMENT UPDATE:

▪ **Budget update** *(Jeff Harbison)*

The 2022 operating budget is due to be submitted on August 3rd. Our managers have done a great job of allocating their FTE to different programs and putting in their requests for controllable budget capacity (supplies, services, etc.). We will be meeting with the Clark County Council in one-on-one and one-on-two meetings to discuss the Environmental Public Health (EPH) fee schedule adjustments. Every year we bring forward adjustments to the fee schedule. We have additional funding coming from the state through Foundational Public Health Services (FPHS). \$22 million is currently allocated to the state per biennium, which ends at the end of this month. That is going up to \$140 million per biennium, but we don't know yet how much of that we will receive in Clark County. That missing piece will help us finalize our 2022 budget. We anticipate having enough funding coming through the state to balance our budget, if not expand services.

▪ **Director's report** *(Dr. Alan Melnick)*

○ **House Bill 1152: Implications for PHAC**

House Bill 1152 was passed this last legislative session after going through many changes. The bill aimed to change the organization of our state and local public health system to remove the politics from public health. There was a proposal to change the structure of local boards of health by adding non-elected officials. This became a requirement with the exception being that

a local board of health comprised solely of elected officials may retain its current composition if the local health jurisdiction had a public health advisory committee or board with its own bylaws established on January 1, 2021. We have great confidence that our current Public Health Advisory Council (PHAC) meets this requirement. By January 1, 2022, the public health advisory committee or board must meet the requirements for community health advisory boards established in the act. A community health advisory board must: provide input to the local board of health on the selection of administrative officers and local health officers, use a health equity framework to assess community health needs and review and recommend public health policies and priorities, evaluate the impact of proposed public health policies and programs, promote public participation in and identification of public health needs, provide community forums and hearings as assigned by the local board of health, establish community task forces as assigned by the local board of health, review and make recommendations on the annual budget and fees, and review and advise on the jurisdiction's progress in achieving performance measures. An advisory board must consist of nine to 21 members appointed by the local board of health. The membership must be diverse and include members with expertise in and experience with: health care access and quality; physical environment; housing, education, and employment; business and philanthropy; communities that experience inequities; government and tribal government; community members with lived experience in the above areas, consumers of public health services; and community stakeholders including nonprofit organizations, the business community, and those regulated by public health. We have an opportunity to look at our bylaws and do a comparison with the requirements of HB 1152.

○ **COVID-19 update**

- **State of Washington:** Statewide, Washington case counts continue to decline. The five largest counties are seeing declines and 31 of 39 counties had rates of less than 200 cases per 100,000 over 14 days. Case rates are declining across all age groups, except for people 70 years and older, among whom rates have stayed mostly flat since March. Hospital admission rates are similar, declining among people ages 20-69 and remaining flat but high in ages 70 and older. The number of hospital beds occupied by COVID-19 patients is declining and the number of ICU beds occupied by COVID-19 patients has remained fairly flat. While case numbers are decreasing, the level of virus transmission was still fairly high as of mid-May, with an estimated reproductive number of 0.95. The hospital admission rate in unvaccinated people ages 45-64 is about 21 times higher than people of the same age who are fully vaccinated. For people ages 65 and older, the hospital admission rate is approximately 13 times higher among people who are unvaccinated than those who are fully protected.
- **Hospitalization of adolescents:** The CDC's June 4th Mobility and Mortality Weekly Report looked at COVID-19 hospitalizations among adolescents 12-17 years old. These rates increased in March-April 2021 and exceeded historical rates of influenza hospitalizations. Adolescent COVID-19 hospitalization rates from October 2020 to April 24, 2021, were 2.5-3 times higher than influenza-associated hospitalization rates from the three previous flu seasons. 31% of adolescents hospitalized for COVID-19 from January 1 to March 31, 2021, were admitted to an ICU. 5% required invasive mechanical ventilation. There were no deaths. Among adolescents hospitalized, most were female (53%), Hispanic of Latinx (31%), Black (36%) and had at least one underlying health condition (71%). The most common health conditions being: obesity (36%); chronic lung disease, including asthma (31%); and neurologic disorders (14%). The increased hospitalization among adolescents in March and April may be attributed to circulation of more transmissible variants, more students returning to school and other in-person indoor activities, and changes in preventive measures. Vaccination of

adolescents is expected to reduce risk in these settings. Increased rates of adolescent hospitalization and potential for severe disease, reinforce the importance of continued preventative measures among adolescents, including vaccination and mask wearing.

- **Clark County:** Case numbers are decreasing with an average of 61 cases per day over the last two weeks. A month ago, we were averaging nearly 100 cases per day. Clark County's COVID-19 activity rate is decreasing, with a current rate of 194.1, the first time below 200 since late-April. The rate reached 276.6 on May 10th but has decreased each week since. Clark County continues to see 7-9% of hospital beds occupied by COVID-19 cases. That's approximately 40-60 COVID-19 cases and people suspected to have COVID-19 (awaiting test results) hospitalized. Recently, ICU beds occupied has been high in Clark County at more than 90%.
- **Variants:** The vast majority of SARS-CoV-2 infections in Washington state continue to be attributed to variants of concern. An estimated 75% of cases are attributed to B.1.1.7 and about 8% are attributed to P.1. Cases attributed to B.1.1.7 continue to grow, whereas growth in P.1 cases appear to be flattening. The state is not sequencing samples from every confirmed COVID-19 case, but the number of specimens sequenced and the percent of confirmed cases that have had sequencing performed continues to increase. During the month of April, 17.4% of all confirmed COVID-19 cases were sequenced.
- **Roadmap to Recovery – Reopening status:** Every county in the state is currently in Phase 3. On June 30th, the state will reopen, and most public spaces will return to full capacity. The reopening could happen earlier than June 30th if 70% or more of Washington residents, ages 16-years or older, have at least one dose of COVID-19 vaccine. The reopening plan could change if the state's COVID-19 data changes or if the state's ICU occupancy reaches 90% at any point.
- **Vaccine administered/Public Health vaccination efforts:** As of Saturday, June 5th, Washington state has administered 7.3 million doses. 3.9 million residents have received at least one dose (64% of residents 16+ years; 51% all ages), and 3.4 million residents are fully vaccinated (55% of residents 16+ years; 45% all ages). In Clark County, 414,483 doses have been administered. 228,763 residents have received at least one dose (58% of residents 16+ years; 46% all ages), and 195,845 residents are fully vaccinated (49% of residents 16+ years; 39% all ages). Public Health continues efforts to make COVID-19 vaccine easily accessible by hosting vaccination clinics throughout the county. Last week, we hosted vaccination clinics in Yacolt and Woodland, where nearly 250 total doses of Pfizer and Johnson & Johnson were administered. This Saturday, we will return to Hathaway Elementary School in Washougal to provide Pfizer second doses to people who received first doses on May 22nd. We will also offer Pfizer first doses and Johnson & Johnson. Public Health is also vaccinating people who are homebound (as we receive requests) and those who are unhoused. We plan to vaccinate at least 5 homebound residents this week. Next week, we will return to a local shelter providing services to people who are unhoused to offer Johnson & Johnson vaccine. Public Health continues to partner with city of Vancouver and Safeway to operate the Tower Mall vaccination site. With vaccine now readily available at local pharmacies and medical offices, we've decided to close the Tower Mall site at the end of the month. Tuesday, June 29 will be the last day of operations. We will continue to offer first and second doses of Pfizer through the last day of operations. People who receive a first dose after June 8th can go to a local Safeway or Albertsons pharmacy, or another local site offering Pfizer, for their second dose.

there are trials for children younger than 12 years of age. Pfizer will be the first approved, if approved. In K-5 schools, transmission has been very low with the precautions taking place in schools.

Q. Could you speak to using antibody titers to test for the effectiveness of the vaccine?

A. These tests do not provide any diagnostic value regarding measurement of individual immunity to infection.

Q. Is there a stronger protection for those who have had COVID-19?

A. No, there is evidence that the vaccine confers a more robust longer-term immunity than natural infection. The recommendation from the CDC, DOH and CCPH is that those who have recovered from the natural infection should also get vaccinated.

Q. Is it true that even when vaccinated, you can become infected by COVID-19 and spread the illness while remaining asymptomatic?

A. We are learning more about this all the time. The most recent data shows that the vaccine is not only effective at preventing severe disease and death but is also effective in preventing infection in general. While they are not 100% effective, they are highly effective.

Q. Should people still wear masks even if they are fully vaccinated?

A. Fully vaccinated individuals should still follow the CDC and State guidance which indicates that they do not need to be masked in public. There are exceptions to being able to go unmasked while fully vaccinated when it comes to healthcare and congregate settings.

(6) CLOSING/ADJOURN (*Marla Sanger*)

- **NEXT MEETING:** August 10, 2021 (format to be determined).
- The meeting adjourned at 7:08 pm. Remy Eussen moved, and all were in favor.