

WASHINGTON STATE BOARD OF HEALTH

Final Minutes of the State Board of Health

June 9, 2021

Electronic meeting via GoToWebinar

State Board of Health members present:

Keith Grellner, RS, Chair
Thomas Pendergrass, MD, MSPH Vice-Chair
Stephen Kutz, BSN, MPH
Bob Lutz, MD, MPH
Elisabeth Crawford
Temple Lentz, MOL
Kristin Peterson, Secretary's Designee

State Board of Health members absent:

Fran Bessermin
Vazaskia Crockrell

State Board of Health staff present:

Michelle Davis, Executive Director
Melanie Hisaw, Executive Assistant
Kelie Kahler, Communication Manager
Stuart Glasoe, Health Policy Advisor

Samantha Pskowski, Health Policy Advisor
Kaitlyn Donahoe, Health Policy Advisor
Cait Lang-Perez, Health Policy Analyst
Lilia Lopez, Assistant Attorney General

Guests and other participants:

Lacy Fehrenbach, Department of Health
Michele Roberts, Department of Health
Mike Means, Department of Health
Barb Morrissey, Department of Health
Kathy Bay, Department of Health

Keith Grellner, Chair, called the public meeting to order at 9:30 a.m. and read from a prepared statement (on file). He then detailed operating procedure and ground rules for conducting a virtual meeting, and asked board members to introduce themselves.

1. APPROVAL OF AGENDA

Motion: Approve June 9, 2021 agenda, with amendments to add "Public Testimony Will Be Taken" on Item 9, Rules Hearing – Chapter 246-680 WAC, Prenatal Tests – Congenital and Heritable Disorders and remove the approval of the June 1, 2021 minutes and add public comment on Prenatal Tests.

Motion/Second: Vice Chair Pendergrass/Member Crawford. Approved unanimously.

2. ADOPTION OF NOVEMBER 9, 2020 MEETING MINUTES

Motion: Approve the April 14, 2021 minutes.

Motion/Second: Vice Chair Pendergrass/Secretary's Designee Peterson. Approved unanimously.

3. BOARD ANNOUNCEMENTS AND OTHER BUSINESS

Michelle Davis, Board Executive Director greeted the Board and directed Board members to materials in their packets under tab 3, including the CR-103 for the Notifiable Conditions rule, which the Board adopted in March, as well as notes from the most recent Health Promotion and Environmental Health committee meetings and a letter to OFM certifying concurrence by the governmental public health system for allocation of 28 million dollars to the governmental public health system.

Ms. Davis updated the Board on anticipated staff changes. She said the Health Disparities Council had received funding to support the work it was doing through the Social Equity in Cannabis Task Force, and that the Board had received funding to support community outreach efforts and conduct rulemaking regarding local board of health membership as a result of E2SHB 1152. She thanked Member Lentz for her willingness to sponsor the rulemaking required by the bill.

Ms. Davis said the Board would also be receiving additional funding, approved by the Foundational Public Health Services Steering Committee. She said this funding would cover an additional staff person for Health Impact Reviews, and funding for cross-cutting capabilities including communications and legal support. She said she would be asking Board members to share position recruitment announcements once they are posted (likely in late July).

Ms. Davis gave a brief update regarding the Preliminary Investigation of the Spokane Regional Health District (SRHD) Administrator.

She announced that the Board had received many comments expressing concern regarding COVID-19 vaccine mandates and masking. She thanked the public for their comments and indicated that the Board would not take action regarding immunization requirements, and that item 8 on the agenda is a standard update that the Board receives regarding childhood immunization rates.

4. DEPARTMENT OF HEALTH UPDATE AND NOVEL CORONAVIRUS (COVID-19) UPDATE

Lacy Fehrenbach, Deputy Secretary for COVID-19 Response and Michele Roberts, Acting Assistant Secretary, Prevention and Community Health updated the Board (see presentation on file, Tab 4a) on COVID-19 efforts. Ms. Fehrenbach provided the most recent statistics regarding COVID related deaths, and immunizations. She said that as of June 5, more than 63 percent of the population 16+ has received at least one dose, that's almost 4 million people. As of June 5, more than 3.4 million people in Washington are fully vaccinated, which is nearly 56 percent of the population ages 16 and up. As of June 5, more than 7 million doses of COVID-19 vaccine have been given out in Washington. The slides showed significant differences between vaccinated individuals and hospital visit. Over the past four months the state vaccination sites gave out more than 303,000 doses of COVID-19 vaccine. Ms. Roberts shared the "Care-a-Van" program to distribute vaccines. She said to improve accessibility, any community organization can request a mobile vaccine team through

the state Department of Health (DOH) website. She said DOH closely monitoring vaccination rates to track the inequities regarding race and ethnicity to make sure the vaccine is equitably accessible. She acknowledged there are still gaps and more work is needed. Ms. Roberts updated the Board on Myocarditis and Pericarditis and said a full safety investigation was underway. She commented that so far, cases are mild and have not resulted in deaths. She described state vaccine incentives and prizes. Ms. Fehrenbach described the goal of full reopening on or before June 30th. She said in order to meet this goal the state would need to reach the 70% fully vaccinated mark for ages 16 and older. She reviewed the updated guidance on mask wearing, school openings, camps, and public events. She talked about sequencing and mentioned B117 is the most common variant in Washington, more details are available on the Department's website.

Stephen Kutz, Board Member asked about the rates on race/ethnicity, and the American Indians rate of one percent fully vaccinated and one percent total Washington's population. Ms. Roberts said correct. Member Kutz said he thought tribes have done a good job and said gaps may be the result of tribes not being correctly identified. Ms. Roberts acknowledged the need to improve collection race and ethnicity data.

Member Kutz asked Ms. Fehrenbach about screening, especially for healthcare centers. Ms. Fehrenbach said symptom screening is still in place until DOH updates guidance. For fall school guidance, the requirement for daily symptom check entry or attestation is not currently active. The state is putting together a worker protection guidance for returning to facilities.

Chair Grellner thanked our presenters.

The Board took a break at 10:43 a.m. and reconvened at 10:53 a.m.

5. PUBLIC COMMENT (Note: Public Testimony on Item 9 Rules Hearing for Prenatal Screening, Chapter 246-680 WAC will begin at 1:30 p.m.)

Jessica Campbell commented on the mandatory vaccines for children. She commented that masks affect students' learning and mental health, and that masks aren't effective.

Bernadette Pajer, Public Policy Director of Informed Choice Washington, but speaking for herself today commented on vaccine safety studies and producers stating that she does not support adding emergency use authorization (EUA) products to vaccine cards. She commented on vaccine safety and stated her position that natural immunization is effective and said she does not support mask wearing.

Chris Stearns, Washington P.U.D. Association Water Utility Committee Chair, commented on the drinking water program workload and his concerns with staffing. He said he appreciates prioritization of the drinking water systems. He commented on issues facing future capital projects including funding and regulations.

Celesa Stevens, parent in the Anacortes school district, provided comments about vaccine safety and shared her position about the concerns she has about mask wearing

for adults and students. She provided comments about students' mental health and mask wearing in the fall.

Lisa Olson commented on vaccine safety and shared her position about concerns she has about a mask mandate for students in the fall and stated her position that she does not support vaccines or testing requirements for students. She said she believes alternative methods such as natural immunity and temperature and health checks are enough.

Lisa Templeton commented on vaccine safety and shared her position that she does not support emergency use authorization of the covid vaccine. She commented on her concerns about her child receiving a covid vaccine and said she does not support incentivizing people to get vaccinated.

Stacie Neiswanger tried to offer comment and was unable to due to technical issues with their computer's audio.

6. COVID-19 REPORTING EMERGENCY RULE, WAC 246-101-017

Kristin Peterson, Deputy Secretary of Policy & Planning and Secretary's Designee introduced the fourth emergency rule to extend designation of COVID-19 as a notifiable condition. She introduced Kaitlyn Donahoe, Board Staff to provide more information.

Ms. Donahoe provided a presentation (on file) that recapped the federal reporting requirements for COVID-19, the prior emergency rules, the proposed fourth emergency rule, and potential future emergency rules. She discussed the timeline of the release of HHS guidance which requires lab testing data to include demographic information that must be reported through existing state and local public health reporting channels. Ms. Donahoe said that the guidance stipulated every reasonable effort should be made to collect complete demographic data, including the patient's race, ethnicity, sex, and age, and that reporting must occur no later than August 1, 2020. She also discussed interim final rules released by the Centers for Medicaid and Medicare Services which imposed fiscal penalties for non-compliance. Ms. Donahoe provided a summary of the Board's previous actions on this rule as well as what future emergency rules might look like, including discussions around genomic sequencing. She noted that the motion included in today's cover memo does direct staff to file the CR-103E on July 23 due to current rule expiration falling on a Saturday.

Thomas Pendergrass, Vice Chair, asked if the new requested emergency rule is like the third emergency rule and removes items included in prior emergency rules. Ms. Donahoe confirmed that the proposed emergency rule is identical to the third emergency rule currently in effect.

Motion: The Board adopts a fourth emergency rule to extend the designation of COVID-19 as a notifiable condition and require reporting of essential testing and demographic data to improve the public health response to COVID-19. The Board directs staff to file a fourth CR-103E to extend WAC 246-101-017 without lapse, effective on July 23, 2021.

Motion/Second: Member Crawford/Vice Chair Pendergrass. Approved unanimously.

7. BRIEFING—DRINKING WATER STANDARDS FOR PER-AND POLYFLUOROALKYL SUBSTANCES (PFAS), GROUP A PUBLIC WATER SUPPLIES, CHAPTER 246-290 WAC, AND DRINKING WATER LABORATORY CERTIFICATION AND DATA REPORTING, CHAPTER 246-390 WAC

Keith Grellner, Board Chair introduced the topic. Stuart Glasoe, Board Staff gave background, reminding Board members that they accepted a petition in fall 2017 from Toxic-Free Future and other organizations to explore establishing a PFAS drinking water standard in the Group A drinking water rules. The Board followed this in early 2020 initiating rulemaking on related amendments to the companion drinking water laboratory rules. He also noted that there currently is no national Maximum Contaminant Level (MCL) for PFAS, but EPA recently initiated rulemaking to develop MCLs for two of the most prevalent PFAS chemicals, PFOA and PFOS. Mr. Glasoe introduced Mike Means and Barb Morrissey of the Department of Health, noting that the informational briefing involved no formal Board action and preceded filing the CR-102, Proposed Rules, for public review and comment and an anticipated hearing in October 2021. (See presentation on file.)

Mr. Means gave background on the nature and sources of PFAS, public health concerns, and known occurrences in Washington. He explained the status of PFAS as an unregulated drinking water contaminant, recent movement by EPA to develop an MCL, and the relationship between the Board's drinking water rulemaking and the state PFAS chemical action plan (CAP). He said key features of the Board's rulemaking included work determining the appropriate regulatory mechanism, the specific PFAS chemicals, and the corresponding standards. Ms. Morrissey followed with an explanation of the Department's approach developing the PFAS standards, including consideration of public health effects for the most sensitive populations/life stages, toxicity studies and epidemiological findings, standard setting in other states, and standard setting for PFAS mixtures. She concluded by explaining that the draft rule arrived at standards for five PFAS chemicals (PFOA, PFOS, PFNA, PFHxS, and PFBS). Mr. Means then resumed his part of the presentation highlighting rule requirements for drinking water monitoring and public notice. He explained how public input helped shape the rule and discussed outstanding issues and questions around other follow-up actions, funding, and work on cleanup standards by the Washington Department of Ecology. Mr. Means briefly summarized key revisions to the companion drinking water laboratory rules and closed with a description of the remaining timeline for the two rules, including the upcoming CR-102 filing, public review and comment, and an anticipated Board hearing in October.

Vice Chair Pendergrass asked if PFAS is found at very low levels, what's the mitigation, how is it eliminated? Mr. Means said there are a number of treatment methods. He said granulated activated carbon (GAC) is the most common and is being used in Issaquah and at Joint Base Lewis McChord. Vice Chair Pendergrass said he was aware of PFAS use at military installations and airports, and inquired about other areas, specifically wildfires. Mr. Means responded that the material used in fighting wildfires is not PFAS related. PFAS is found in firefighting foam used for fuel and other hydrocarbon fires, such as planes and fuel-traffic accidents. Mr. Means said most fire departments are phasing out PFAS and moving to replacements. Ms. Morrissey added that in 2018 Washington state passed a ban on PFAS in firefighting foam that includes four

exceptions with extended timelines for compliance. Vice Chair Pendergrass commented that PFAS is present in a variety of other things. Ms. Morrissey said that all known areas—all drinking water supplies—in Washington that are contaminated with PFAS, firefighting foam is the source. Other states have found drinking water supplies impacted by other sources such as industrial emissions and manufacturing. Vice Chair Pendergrass asked about the cost of testing and whether it is borne by the water system. Mr. Means said it is not cheap, ranging from about \$600-1200 per sample depending on the contract and lab. Costs are borne by water systems. The state has received grant funding from EPA and is working to help water systems—especially small systems—with initial testing. Member Kutz asked whether water systems pass on costs in the form of fees? Mr. Means said yes, water systems cover costs as part of their rate structure, typically the only income utilities have. For large systems like Seattle, the impact may not be a big deal, however for smaller systems it adds up fast.

Chair Grellner commented that testing for other drinking water parameters have costs too and such testing is not unique. Mr. Means concurred. Chair Grellner said part of the idea behind the rule with the monitoring is to get a better understanding of the spatial presence of PFAS and find out if there are sources other than firefighting foam common in Washington. Mr. Means said yes, we don't want to assume we know all the sources, and it's important to sample all priority systems. Member Kutz asked whether it would make sense from a cost point of view to do episodic testing to find and track contaminated areas? Mr. Means said yes, that is how it is set up with initial monitoring of all systems and once that monitoring is addressed, the most frequent you would have to monitor is once every three years for episodic testing going forward as part of the proposed framework.

8. UPDATE—CHILDHOOD IMMUNIZATION RATES

Samantha Pskowski, Board Staff, introduced the topic and said that the Board regularly receives an update on childhood immunization rates in Washington state for those immunizations that are included in chapter 246-105 WAC. She stated that while the Board received significant public comment regarding the COVID-19 vaccine, today's update would focus only on the immunizations currently required for school entry as outlined in the rule.

Kathy Bay, Department of Health, discussed efforts to catch up on ground the state has lost on childhood immunizations due to COVID-19. She shared data on doses of vaccines provided by age range and said that school reporting metrics recently wrapped up and that the Department of Health (DOH) will have more information in the next month. Ms. Bay said that immunizations have started to rebound since the start of the pandemic and have exceeded last year's immunizations. She discussed campaigns to improve vaccinations for school and general health, including a partnership with DOH and several health system, public health, and school partners to educate parents with school-age children called "Vax to School." Ms. Bay discussed additional work DOH is doing around immunizations, including ongoing campaign work with the Washington Chapter of the American Academy of Pediatrics, Office of the Superintendent of Public Instruction, school nurse administrators, the Board of Education, Department of Children, Youth, and Families, Health Care Authority, and Washington health plans.

Vice Chair Pendergrass stated that he is still distressed that cohort of children in 2020 and 2021 remain below past levels of immunization and expects progress to reflect current rates exceeding benchmark rates. He recommended engaging the American Academy of Family Physicians and associations representing advanced registered nurse practitioners and physicians' assistants.

Ms. Bay said that DOH's vaccine advisory committee does have representation from all different disciplines and practices and receives feedback on DOH's work. She said they hope that continued expansion and efforts will lead to greater uptake in immunizations.

The Board recessed for lunch at 12:55 p.m. and reconvened at 1:30 p.m.

9. RULES HEARING – PRENATAL TESTS – CONGENITAL AND HERITABLE DISORDERS, CHAPTER 246-680 WAC

Bob Lutz, Board Member, introduced the topic, provided a brief background on the Board's authority to establish standards for screening and diagnostic procedures for prenatal diagnosis of congenital disorders of the fetus, and discussed the purpose of the Board's prenatal testing rules. He summarized recent rulemaking activities, high-level changes in the proposed rules, and the Board's options for action on the proposed rules.

Samantha Pskowski, Board Staff, provided a brief background on the Board's authority and recapped recent rulemaking activities. She outlined proposed changes to the rules, including removing restrictive criteria for certain tests including amniocentesis and chorionic villus sampling, expanding the allowable timeframe for certain tests, and including new tests based on the evidence of utility in the pregnant population. Ms. Pskowski summarized feedback received on the proposed rules during the public comment period. She recommended one change to the rules for the Board's consideration regarding counseling and barriers to accessing genetic screening.

Chair Grellner opened the meeting for public testimony and read from a prepared statement (on file), allowing for four minutes per person.

Hannah Baer, Coalition for Access to Prenatal Screening, recognized Washington's Medicaid program for its coverage of non-invasive prenatal screening (NIPS). She said Washington is a leader in coverage of these tests for Medicaid plans. Ms. Baer said the American College of Obstetricians and Gynecologists (ACOG) released guidance that genetic testing should be discussed and offered early in pregnancy regardless of risk. She outlined concerns with the proposed rules regarding pre- and post-test counseling requirements specific to cell-free DNA testing and urged the Board to adopt the rules in alignment with ACOG's recommendations.

Kate White Tudor, Coalition for Access to Prenatal Screening, thanked the Board and staff for their persistent work on this rule. She said she supports the staff's recommendations to adjust language regarding counseling for cell-free DNA testing. Ms. Tudor said the cell-free DNA testing is much better for patients and has fewer false positives, which results in fewer invasive procedures and associated pregnancy loss. She urged the Board to remove requirements for post-test counseling for genetic screening. Ms. Tudor said that implementing the rule as written is administratively

burdensome and costly due to a high number of cancellations of scheduled appointments due to the accuracy of the cell-free DNA tests.

Nathan Slotnik introduced himself as a medical geneticist and obstetrician. He said that standard of care indicates that the average risk woman who has a current ongoing pregnancy is not generally considered for cell-free DNA testing. He stated that offering this new technology to all women can improve their care and assist in care management. Mr. Slotnik said the current standard of care requires ultrasound and serum testing, but that caps out at 80-85% accuracy of identifying chromosomal abnormalities. He said cell-free DNA testing is more accurate and can lead to fewer pregnancy losses associated with invasive procedures. Mr. Slotnik said coverage for non-invasive prenatal screening tests is highly value from both a clinical and equity perspective.

Chair Grellner closed public comment at 2:03 p.m. and invited Board discussion.

Member Kutz said he was unsure that the Board could address disparities in access to testing through this rule. He asked for clarity regarding unequal access to these tests depending on where the individual lives.

Member Lutz agreed, and said unequal access is a structural issue and at the end of the day we need to look at the structure of our system rather than this rule itself.

Ms. Pskowski clarified that the rule would allow cell-free DNA to be covered by insurance policies which would replace some of the current services that may not be equally available.

Member Kutz said specialty care for these rare conditions throughout the state are not equitably distributed. He suggested this issue is a result of provider resources, and that the Board should challenge the health care system to help with inequities; however, he said he is unsure the Board can address this in rule.

Chair Grellner said he appreciates these comments and said this topic certainly needs attention.

Vice Chair Pendergrass said the move to cell-free DNA testing is something that can be done throughout the state, but the follow up to the test is where we can run into issues of access.

Motion: The Board adopts the proposed amendments to chapter 246-680 WAC as published in WSR 21-10-077, with the revisions agreed upon at today's meeting, if any, and directs staff to file a CR-103 and establish an effective date of July 1, 2022.

Motion/Second: Secretary's Designee Peterson/Member Lentz. Approved unanimously.

10. EFFECTIVE DATE FOR ENVIRONMENTAL HEALTH AND SAFETY STANDARDS FOR PRIMARY AND SECONDARY SCHOOLS, CHAPTER 246-366A WAC

Chair Grellner introduced Kaitlyn Donahoe, Board Staff, to discuss the effective date for chapter 246-366A WAC, Environmental Health and Safety Standards for Primary and Secondary Schools.

Ms. Donahoe discussed the Board's authority under RCW 43.20.050 to adopt rules for minimum standards for schools and provided a brief background on the school environmental health and safety rules. She said that adoption of new sections of chapter 246-366A, intended to supersede chapter 246-366, have not been implemented due to a legislative budget proviso suspending rule implementation. Ms. Donahoe discussed the subsequent adoption of the proviso in subsequent years, including the 2021-2023 state operating budget, and the need for the Board to file a new CR-103 to extend the effective date of chapter 246-366A. Ms. Donahoe noted that the rules adopted in 2009 are continuing to age and highlighted areas that the Board may wish to consider for potential future revisions. She reminded members that changes cannot be made while the proviso is in effect.

Member Kutz commented that sometimes actions are on auto-pilot and the proviso is just included each year due to that. He inquired if substantive discussions have occurred on removing the proviso. Executive Director Davis replied that informal discussions have happened each year since the impacts of the McCleary settlement. She commented that the COVID-19 pandemic might provide an opportunity for new efforts to ensure indoor air environments are safer.

Member Kutz asked if the Board could ask the Legislature if updates could be made to the rule given what was previously adopted is already out of date. Executive Director Davis indicated that the Board could certainly make that inquiry. Member Kutz requested that be part of a motion on this item.

Vice Chair Pendergrass commented that he understands the need to delay implementation but commented that there are many students who have entered and graduated from our school systems without the benefit of the environmental and safety standards. He commented there are many places in the state where students attend school in environments are not safe in 2021 and the average age of school buildings is more than twenty-one years. He indicated he would not support an extension. Chair Grellner asked what would happen if the extension is not approved by the Board. Executive Director Davis indicated that the Board would need to explain their decision if that is the route taken.

Chair Grellner commented on the amount of time and effort put into updating the rules in 2009 and that despite hearing this is a concern, the rule languishes. He mentioned that there is no specific direction for the Board to extend the effective date each year and asked if there was a new approach to putting new attention on this rule. Assistant Attorney General Lilia Lopez responded that the Board's delay is a recognition of the Legislature's proviso and that her thinking at the moment, is not delaying the rule would not change the prohibition by the Legislature. Chair Grellner commented that this would be the seventh delay. Member Lutz commented that he finds it hard to vote for an extension and asked about abstaining from a vote. Vice Chair Pendergrass commented that the proviso is specific to schools and not budgetary or public health issues and that the Board needs to update the rules for an optimal school environment. Member

Peterson commented that there are practical implications if the effective date is not extended and that there may be confusion. Member Kutz commented that it has been ten years and waiting for something to change and that hasn't happened. Chair Grellner mentioned that two years ago he and Director Davis met with the Department of Health and the Office of the Superintendent of Public Instruction and there appeared to be progress that then stalled. He disagreed that there would be confusion if the Board opted to not extend.

Temple Lentz, Board Member, asked to clarify that these rules were adopted, but the effective date is continuously pushed out. Chair Grellner clarified that the implementation date has been extended six times, each time by two years. Executive Director Davis noted that yes, the rules are published and appear on the Code Revisor's website.

Member Lentz commented that it would be a stronger position to not adopt these rules, which would make the Board's position clearer. She asked whether the Board needs to consider making the suspended rule more current. Chair Grellner noted that the Board cannot even modernize the rules due to the proviso, we're in a total stalemate. He asked whether the Board has staff capacity to revise the rules. Executive Director Davis said the last time the rules were updated was a multi-year effort, and it would be a significant effort to modernize the rule.

Elisabeth L. Crawford, Board Member, thanked seasoned members of the Board for the discussion and asked for clarification on what confusion there would be if the extension is not approved. Chair Grellner noted that he doesn't think there would be confusion but that the rule and proviso would be out of sync.

Vice Chair Pendergrass commented that every school district is an independent legal organization, and some are routinely updating their facilities, but those tend to be bigger districts. He continued that some heating, ventilation, and air conditioning systems in facilities are from the 1950's and that it is time to get permission to update the rules.

Chair Grellner suggested that a one-year extension could be an option rather than the typical two, in conjunction with a letter from the chair on behalf of the Board to the Governor, OSPI, and legislative leaders in order to reframe attention on the issue.

Member Crawford inquired if that approach has been taken in the past. Director Davis shared that her predecessor presented to multiple legislative committees on the rule and a governor's directive from several years ago on lead asked the Department to analyze what changes would be needed to update the rule.

Member Crawford asked to clarify if the Board approves the extension is the message that they recommend the new rules or are telling schools to follow the old. Chair Grellner noted that mostly the latter, but also the former. Director Davis noted that staff are also frustrated by the prohibition and that it would be beneficial for the Board to specifically identify places that are now outdated and warrant a refresh.

Assistant Attorney General Lopez commented that the proviso language directs the Department and Board to not implement any new rules and that she did not think it precluded the Board from proceeding with a new rule.

Member Kutz commented that he interprets a prohibition of implementation does not preclude new rules and that there is confusion among parents.

Vice Chair Pendergrass proposed tabling the motion to the August meeting to allow more time to explore options and discuss with stakeholders. Chair Grellner expressed concern for engagement with partners with the proviso still in effect given the time and energy required for meaningful engagement.

Michelle Davis, Board Executive Director clarified that the current CR-103 has an effective date of August 1, 2021 and the August Board meeting occurs after that. She continued that pushing the motion to that meeting would cause administrative challenges.

Chair Grellner suggested a one-year extension and concerted effort to bring attention to the issue, to avoid burden on staff. Member Kutz suggested a six month extension and expressed his desire for substantive conversations on the topic.

Motion: The Board directs staff to amend the effective date of new sections of chapter 246-366 WAC and new chapter 246-366A WAC, as filed in WSR 19-14-107, by filing a new CR-103, order of adoption, to delay the effective date of the new rules to August 1, 2022. By doing so the Board authorizes the Chair of the Washington State Board of Health to send a formal letter to the Governor, Office of the Superintendent of Public Instruction, the Department of Health, and other interested parties to indicate we believe these chapters need to be updated.

Motion/Second: Vice Chair Pendergrass/Member Crawford. Approved unanimously

11. JULY MEETING—POSSIBLE CANCELLATION

Michelle Davis, Board Executive Director, referred the Board meeting schedule (Tab09a on file) and said that the Board typically reserves a tentative July meeting slot on its schedule. She recommended the Board cancel the meeting to afford staff greater time to prepare for the August Board meeting.

Vice Chair Pendergrass asked if we needed to meet prior to August for the investigation hearing with OAH. Ms. Davis said it is doubtful, but she does not have a time frame right now, and Lilia Lopez, AAG, said it was unlikely the hearing would occur that soon.

Motion: The Board approves the cancellation of the July 14 meeting.

Motion/Second: Vice Chair Pendergrass/ Secretary's Designee Peterson. Approved unanimously.

12. BOARD MEMBER COMMENTS

Chair Grellner, called for any comments.

Vice Chair Pendergrass moved the Board adjourn, seconded by Member Lentz.

ADJOURNMENT

Keith Grellner, Board Chair, adjourned the meeting at 3:11 p.m.

WASHINGTON STATE BOARD OF HEALTH

Keith Grellner, Chair

To request this document in an alternate format or a different language, please contact Kelie Kahler, Washington State Board of Health Communication Manager, at 360-236-4102 or by email at kelie.kahler@sboh.wa.gov TTY users can dial 711.

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