

WASHINGTON STATE BOARD OF HEALTH

Final Minutes of the State Board of Health

January 8, 2025

Hybrid Meeting

ASL (or CART) and Spanish interpretation available

WA Department of Labor & Industries (Auditorium)

7273 Linderson Way SW

Tumwater, WA 98501-5414

Virtual meeting: ZOOM Webinar

State Board of Health Members present:

Patty Hayes, RN, MSN, Chair

Kelly Oshiro, JD, Vice Chair

Dimyana Abdelmalek, MD, MPH

Umair A. Shah, Secretary

Michael Ellsworth, JD, MPA, Secretary's Designee

Mindy Flores, MHCM

Paj Nandi, MPH

Stephen Kutz, BSN, MPH

Peter Browning, MA

State Board of Health Members absent:

Socia Love, MD

State Board of Health staff present:

Michelle Davis, Executive Director

Melanie Hisaw, Executive Assistant

Michelle Larson, Communications Manager

Anna Burns, Communications Consultant

Molly Dinardo, Health Policy Advisor

Shay Bauman, Health Policy Advisor

Ash Noble, Health Policy Advisor

Lilia Lopez, Assistant Attorney General

Hannah Haag, Community Engagement
Coordinator

Ashley Bell, Deputy Director

Cait Lang-Perez, Health Policy Analyst

Lindsay Herendeen, Health Policy Analyst

LinhPhụng Huynh, Health Disparities Council
Manager

Esmael López, Health Disparities Council
Lead Community and Tribal Engagement
Coordinator

Jasmine Alik, Health Disparities Council
Engagement Coordinator

Judith Barba Perez, Health Disparities
Council Engagement Coordinator

Andrew Kamali, School Rules Project
Manager

Nina Helpling, School Rules Project Policy
Advisor

Kelly Kramer, Newborn Screening Project
Policy Advisor

Guests and other participants:

Kelly Cooper, Department of Health

Brynn Brady, Washington State Local Public
Health Officials

Lauren Jenks, Department of Health

Annie Hetzel, Office of Superintendent and
Public Instruction

Vicki Lowe, American Indian Health
Commission

Patty Hayes, Board Chair, called the public meeting to order at 9:30 a.m. and read from a prepared statement (on file).

1. APPROVAL OF AGENDA

Motion: Approve January 8, 2025, agenda

Motion/Second: Member Kutz/Member Abdelmalek. Approved unanimously

2. ADOPTION OF NOVEMBER 13, 2024, MEETING MINUTES

Motion: Approve the November 13, 2024, minutes

Motion/Second: Member Abdelmalek/Member Kutz. Approved unanimously, Member Kutz and Member Nandi abstained.

3. PUBLIC COMMENT

Patty Hayes, Board Chair, opened the meeting for public comment and read from a prepared statement (on file).

Bill Osmunson said two minutes is insufficient to discuss fluoridation and has been denied a forum to discuss fluoride for the last 15 years. Bill referenced the National Toxicology Program systematic review linking fluoride exposure and children's IQ. Bill said this is an emergency and the Board's silence is a form of censure. Bill discussed the risks of fluorosis and lower IQ, saying it costs Washington state \$4 million per day, and that does not include the increase in incarceration, homelessness, and more.

Gerald Braude discussed a 520-page Congressional report from the Select Committee on the Coronavirus Pandemic, which found that the COVID-19 vaccine mandates caused massive collateral damage and were likely counterproductive. Gerald talked about the missing information and misinformation from the Department of Health's COVID-19 reports and the demonizing and unjust treatment of providers who prescribed alternative treatments.

Bob Runnells said this is the tenth year advocating for fully informed consent and cited a journal article on pharmaceutical product recalls and vaccine-related death. Bob discussed the distortion of clinical trial data, the 37,000 deaths from the COVID-19 vaccine, and the Florida surgeon general's recommendation against the mRNA COVID-19 vaccine.

Mariah Kunz urged the Board to deny the fluoride rulemaking petition. Mariah talked about flawed studies and biased research that undermined results. Mariah talked about safe fluoride levels, said there is no relationship between fluoride and reduced IQ, and that community water fluoridation protects health.

Erin Harnish discussed the safety and efficacy of fluoridated water and said all major medical associations have reviewed and supported fluoridation. Erin said 52 of 72 studies opposing fluoride were of high bias risk, meaning they can be dismissed, and the remaining studies did not correlate with any IQ change. Erin said this is a level issue, that without water fluoridation there would be a 25% increase in cavities that causes many problems.

Mary Long talked about concerns with fluoridation and said there is no scientific evidence that shows the benefits outweigh risks. Mary said the National Institutes of Health shows a higher level of fluoride in pregnant women leads to lower IQ in babies. Mary talked about informed consent and said many people don't know about fluoridated water and advised water systems to remove public fluoride from water.

Lisa Templeton shared a report and comments by a physician regarding a severe bird flu case. Lisa highlighted the concerns in the study and said it showed gaps in critical analysis and transparency. Lisa said the report exemplifies how sensational narratives lead to an unbalanced approach and divert critical resources. Lisa talked about the importance of health professionals balancing between vigilance and guidance.

Natalie Chavez discussed a November 2024 report on the spread of Avian Influenza by migratory fowl and the serious concerns surrounding the outbreaks. Natalie said the United State Department of Agriculture did not deny or refute these concerns and others want to debunk the study. Natalie talked about the documentary *My Biggest Battle* which tells the story of a world-class athlete that got Myocarditis. Natalie also shared the website Heikosepp.com.

Stephen Baker spoke in favor of water fluoridation. Stephen said the Food and Drug Administration has authority only over bottled water, not fluoridation. Stephen said fluoridation lowers impacts on the state budget and is safe for both children and adults. Stephen said the Centers for Disease Control considers water fluoridation as one of the top public health achievements of the 21st century.

Derek Kemppainen said fluoride is neurotoxin and shared support for the petition to amend the rule. Derek discussed the court cases and the risk of fluoride, saying the current level of fluoride is criminal.

4. ANNOUNCEMENTS AND BOARD BUSINESS

Michelle Davis, Board Executive Director, welcomed the Board and directed their attention to the meeting materials. Executive Director Davis welcomed new Board Member Peter Browning and new staff for the Board and Health Disparities Council.

Executive Director Davis provided several updates, including a new Health Impact Review request received on January 7. Executive Director Davis noted budget restrictions impacting the Board, Dr. Shah's transition, and highlighted a graphic explanation of the State Health Report.

5. DEPARTMENT OF HEALTH UPDATE

Patty Hayes, Board Chair, welcomed and thanked Secretary Shah for their work.

Umair Shah, Board Member, recognized Chair Hayes for their service on the Board. Member Shah reviewed the Department of Health's (Department) COVID-19 response, transformational plan, and various accomplishments over the last four years. Member Shah noted that the Department's work was guided by the principles of Equity, Innovation, and Engagement. Member Shah provided the Board with a two-year retrospective of the Department's transformational plan, along with a copy of the transformational plan.

Steve Kutz, Board Member, commented that they will miss working with Dr. Shah and expressed gratitude for the leadership provided.

Paj Nandi, Board Member, asked what was next for Dr. Shah. Member Shah responded that the plan is to rest and focus on family and evaluate future opportunities.

Dimyana Abdelmalek, Board Member, extended gratitude to Dr. Shah for their work.

Peter Browning, Board Member, thanked Dr. Shah and noted the positive impact that the Department has had on Skagit County.

Member Shah reminded everyone to continue to ‘find their apple’ and make choices every day toward health and wellbeing.

The Board took a break at 10:43 a.m. and reconvened at 11:01 a.m.

6. GOVERNMENTAL PUBLIC HEALTH SYSTEM PARTNER 2025 LEGISLATIVE PRIORITIES

Kelly Cooper, Department of Health, discussed legislative priorities for the Washington State Department of Health (Department). Kelly noted that the state is in a post-election transition as the Governor-elect prepares to take office and shifts continue among legislators. Kelly said that the state government is faced with a \$10 to \$12 billion deficit in the budget. Legislative priorities for this session include behavioral health, housing, public safety, and education. On the healthcare side, the Legislature will focus on access to care and affordability. For the Department, the priority is maintaining the investments in the Foundational Public Health Services (FPHS) system. Kelly shared that Governor Inslee’s budget also includes investments to sustain the Department's work including the 988 system, fruit and vegetable programs, health disparities mapping, school-based health centers, and environmental justice assessments. Kelly discussed the three bills that are agency request legislation for the Department. These include the safe medication takeback program, Women, Infants, and Children program hemoglobin testing, and updating the water recreation rules (in coordination with the Board).

Brynn Brady, Washington State Association of Local Public Health Officials (WSALPHO), discussed how WSALPHO identifies its legislative priorities. Brynn said WSALPHO will lead on two bills. The first is the child fatality review statute, with Senator Orwall and Representative Bernbaum committed to sponsoring the bill in the Senate and House, respectively. The second is related to Group B water systems, which will be coordinated with the Department and Board. Brynn stated that WSALPHO will also prioritize maintaining investments in the FPHS system. Additionally, Brynn shared that the Legislature will likely work on addressing barriers to healthcare access, and local health will prioritize these bills. Finally, Brynn highlighted several other issues, including banning flavored tobacco and nicotine products, that are also priorities for local health.

Vicki Lowe, American Indian Health Commission (AIHC), stated that the top priority for Tribes is FPHS funding. Vicki shared that Tribes currently receive \$200,000 per year to

build their infrastructure and need additional funding to continue this work. Vicki noted that AIHC will hold a Legislative Education Day on January 22 and will discuss maintaining FHPS funding with Legislators. AIHC is also working with Senator Kauffman on a bill to direct the Health Care Authority (HCA) to apply for a Traditional Indian Medicine waiver for the Apple Health (Medicaid) program. Vicki discussed the importance of obtaining the waiver for the health of Tribal people. AIHC is also working on a data protection bill with Representative Lekanoff, building on previous work with the Department to establish a data-sharing agreement. Lastly, Vicki stated that AIHC will explore the ban on flavored nicotine products, but the bill is contentious among Tribes. AIHC is also looking at bills related to housing, opioids and fentanyl, and is working with the Governor's Interagency Council on Health Disparities (Council) to expand Tribal representation on the Council.

Steve Kutz, Board Member, emphasized the need to address black market vaping products that are laced with fentanyl and other drugs. Member Kutz stated the concern is about youth receiving adulterated products.

Peter Browning, Board Member, thanked WSALPHO for bringing the child fatality review statute back again, noting its historical value and the need for its continuation. Brynn agreed and said it is a good example of how FPMS funding can restore critical services.

Patty Hayes, Board Chair, asked Vicki about supporting AIHC and the Tribes work around sovereignty and FPMS and to explain how FPMS funding supports infrastructure building. Chair Hayes stated that the FPMS system has been asked about why we can't shift the money around within FPMS.

Vicki responded that the Tribes weren't ready as FPMS was being built. Former Secretary of Health Wiesman and Tribal leaders worked to bring Tribes into the conversation. However, healthcare and public health are not primary focuses for the Tribes. Tribal leaders are often stretched thin from advocating for Tribal rights. One Tribal leader prioritized this issue and AIHC passed a resolution to work on FPMS. AIHC had obtained a Tribal set-aside for Medicaid transformation, which allowed Tribes to consider a Tribal set-aside model for FPMS. COVID changed how Tribal leaders considered public health. A set-aside for \$200,000 allows a full-time staff to work on FPMS. We needed two years to work on that and get to where we have some infrastructure built and to create health codes within Tribes. Now, we need to move into more robust public health and work more with the system. That is the story that needs to be told and why now we need more than the 10% set aside to build the infrastructure that just really hasn't been there.

Chair Hayes said that sharing the story of why the work is paced and why it is needed now is important, especially with new legislators.

Member Kutz stated that Tribal lands are public health deserts. Member Kutz said that the work we do in public health does not have applicability to Tribal lands. The federal government sends money down to the public health system but sends it to the state, not to Tribes. Indian Health Service (IHS) and the federal government did not put public health systems into place for Tribes. So, there is some work, but it is piecemeal and not

seen as public health. All people in Washington state deserve the same protections, but Tribal people do not have the same protection. Member Kutz stated that Tribes continue to get virtually no funding for public health.

Vicki said that after COVID, legislators were impressed with how the Tribes worked in communities and the way that Tribes work is public health oriented. Vicki said that there are opportunities to build on.

Brynn underscored that the governmental public health system partners have done tremendous work in the FPHS space to ensure decision-makers have an understanding. But we have a new Governor, new administration, and new legislators and they do not yet understand FPHS. There are challenges, including budget challenges, that the Legislature will have to work through. We do have advocates in the Legislature, but all of us need to talk about FPHS with the Governor's team, with the Health Care Committees (including new Chairs and Vice Chairs), and with new legislators to bring this awareness and education. We need to shift our minds to understand that we are starting from the beginning in some respects.

Paj Nandi, Board Member, asked if WSALPHO or FPHS Steering Committee could provide some consistent messaging or talking points for discussion with Legislators so that we can have a consistent voice and demonstrate the importance of this funding. Brynn responded that the FPHS Steering Committee is working on this and has used some consistent materials in the past.

7. PETITION FOR RULEMAKING [WAC 246-290-220](#), DRINKING WATER MATERIALS AND ADDITIVES

Paj Nandi, Board Member, said the Board will consider a new petition for rulemaking related to WAC 246-290-220 and turned it over to staff.

Shay Bauman, Board staff, provided an overview of previous petitions and presentations related to this topic that the Board has heard (see presentation on file). Shay invited Lauren to provide an update about the review of current and emerging research.

Lauren Jenks, Assistant Secretary for Environmental Public Health, Department of Health (Department), presented on the historical and current context of community water fluoridation and current research (see presentation on file). Lauren emphasized the need to reassess recommendations based on emerging research from the National Toxicology Program (NTP). Lauren discussed the Department's science review process which will consist of five meetings to evaluate the safety and benefits of fluoridation. The group in the science review process will bring their findings to the Board.

Michelle Davis, Board Executive Director, said that the Board briefly discussed the Department's approach to this review in November and found it helpful to see more details now.

Member Nandi thanked Lauren for the reminder about the importance of evidence-based policy, community input, and the need to dive deeper into the research and signals.

Patty Hayes, Board Chair, asked when Lauren anticipates coming back to the Board. Lauren responded that the meetings would be finalized by mid-March and the Department could then return to the Board.

Steve Kutz, Board Member, discussed being in public health for over 40 years and that we are in a time of information overload. Member Kutz said they are interested in having a deep dive into the science.

Peter Browning, Board Member, asked Lauren if the review would start with a peer-evaluated literature study. Lauren responded that several literature reviews have been published recently, including those from NTP and Cochrane Review. Lauren stated the Department will review these but may not conduct or write their own literature review.

Member Browning stated having heard discussions about dose-related benefits and asked if the analysis may include information on which dose is beneficial or if all levels are harmful. Lauren responded that NTP and JAMA look at this and do see a dose-response and that the review will look at this relationship.

Member Browning also asked if the review would look at in-utero impacts versus primary exposure and whether more specific messaging is needed. Lauren responded that there is evidence for in-utero exposures and the Department already makes recommendations about preparing formula, so they will continue to evaluate needed messaging as well.

Member Nandi asked Lauren to share more about the composition of the science review committee. Lauren responded that several epidemiologists and toxicologists will participate, including from the Department's Office of Drinking Water and Oral Health Program. Lauren said that Dr. Tao Kwan-Gett will chair the group. Lauren also stated that Shay Bauman and Lindsay Herendeen will join from the Board. Tribes will be represented, including Dr. Tom Locke. WSALPHO has recommended local environmental health directors and health officers to participate as well.

Member Kutz stated that water in our world is a collection of all our impurities. Member Kutz stated not knowing what is safe drinking water that won't have some impact on somebody. Lauren responded that there is likely not 100% safe drinking water in this world. However, our drinking water goes through a lot of purification and when we are aware of something harmful, we can remove it.

Shay provided an overview of the Board's petition process and the petition currently before the Board related to WAC 246-290-220. Shay recommended the Board decline the petition for rulemaking pending the science review and monitoring Environmental Protection Agency action. Shay suggested that, following the science review, the Board could consider a review of the policy document.

Member Kutz asked how long the science review may take and when the Board can return to this. Lauren responded at least through mid-March. Member Kutz asked if this was a reasonable amount of time. Lauren responded yes.

Kelly Oshiro, Vice Chair, asked if the Board can expect to receive recommendations or ideas about updating strategies to explore in the future that could be in the policy document. Lauren responded that the Board will receive a clear summary and interpretation of the evidence. Lauren said the Board can use the science review to inform their policy discussion and decision. Vice Chair Oshiro stated it would help to know about the innovations from the past 10 years.

Michael Ellsworth, Secretary's Designee, asked if the science review will be public or hybrid and if community members can follow along. Lauren responded that it will be on Zoom but will need to follow up with the Board about whether these will be Open Public Meetings. Member Ellsworth asked if the Board has the authority to require community water fluoridation. Shay responded that the Board does not have the authority to require community water fluoridation.

Member Nandi asked if local water systems would be represented in the science review convention. Lauren responded the Department worked with the Washington State Local Public Health Officials (WSALPHO) for local representation and WSALPHO recommended local environmental health directors and health officers.

Member Kutz asked for a review of the timeline and whether the 60 days referred to how long we could keep a rule open. Member Kutz asked if accepting a petition would require immediate action.

Executive Director Davis clarified that the 60-day timeline is for the Board to review and accept or deny a petition and does not refer to rulemaking. If the Board were to accept a petition, staff would initiate the rulemaking process. If the Board were to deny a petition, the Board has a certain amount of time to notify the petitioner.

Shay stated that, once rulemaking has been initiated, the timeline may be extended.

Member Nandi asked Lauren if there would be an opportunity for community input during the science review. Lauren responded yes, the Department wants to hear feedback from the community.

Dimyana Abdelmalek, Board Member, asked for clarification on the Board's vote today, noting that one topic is to dive into the information, and the other concerns a specific petition with recommendations. Member Abdelmalek expressed appreciation for the Department and community to discuss the science. Member Abdelmalek also expressed interest in reassessing this rule and Board policy after the science review convention. Member Abdelmalek suggested separating a vote on a specific recommendation now versus getting more information in a structured way to inform potential future recommendations.

Motion: The Board declines the petition for rulemaking to amend WAC 246-290-220 for the reasons articulated by Board Members and directs further evaluation of the scientific information at a future Board Meeting to determine if the Board wants to take any other action. The Board directs staff to notify the petitioner of the Board's decision.

Motion/Second: Member Kutz/Member Abdelmalek. Approved unanimously.

Member Nandi asked if the Board could review its policy from 10 years ago after the Department finishes its review and shares its findings.

Vice Chair Oshio stated that, despite denying the petition today, the Board will continue to evaluate and remain committed to this work. Vice Chair Oshio said that Board staff should continue to bring recommendations.

Mindy Flores, Board Member, stated that fellow Board Members summarized and articulated the discussion.

Member Ellsworth asked what are the vehicles, such as legal and policy options, to evaluate where we want to go next. Member Ellsworth asked if the Board can review policy options while the science review is occurring. Member Ellsworth asked staff to prepare a landscape view of fluoridation policy and authority in the state.

Chair Hayes asked Lauren to also consider the Australian study that was just published. Chair Hayes asked Lauren to prepare to come back to the Board to present findings from the science review convention. Chair Hayes asked that Board Members review the 2015 recommendations and asked Shay to share the 2015 report with Members. Chair Hayes also asked Shay or the Department to present at a future meeting about what language is already used to provide recommendations to people related to fluoridation (e.g., to pregnant women).

Member Kutz said the policy document should be updated following the science review to meet current understanding. Member Kutz asked how long updating the policy document may take. Shay responded that it depends on the conclusions of the science review convention and how the findings relate to the 2015 recommendations. It will be a priority for staff to update the document based on the information. Member Kutz said that communities around the state make decisions based on the information we provide, so it is important to do that update promptly.

Member Hayes directed staff to communicate with the petitioner and to share the 2015 recommendations with Board Members. Chair Hayes asked Lauren to prioritize returning to the Board in an expedited manner.

8. GOVERNOR'S INTERAGENCY COUNCIL ON HEALTH DISPARITIES (HDC) UPDATE

LinhPhung Huynh, Council Manager, and Esmael López, Council Engagement Lead, introduced themselves and provided an overview of the Governor's Interagency Council on Health Disparities (see presentation on file). LinhPhung reviewed the Council's background, membership, responsibilities, and past recommendation areas. LinhPhung also highlighted the ongoing partnership with the Board and shared updates since the

Council's last presentation in 2023, including a redesign process started in 2022 to enhance collective impact. This process involved workshops and community engagement that contributed to the 2024 State Action Plan Update. LinhPhụng emphasized that the redesign aims to support a health justice and equity approach to their work.

LinhPhụng then provided updates on upcoming activities, including the Council's Agency Request Legislation (ARL) for 2025. LinhPhụng added that on the funding side, the Council received \$1.1 million for operations from the 2024 session, marking the first budget increase since the Council's creation in 2006. This funding has allowed the Council to hire staff for administrative and community engagement roles. LinhPhụng concluded that the Council is discussing plans to create a statewide vision for health and wellbeing. LinhPhụng emphasized the need for coordination with other agencies and groups.

Esmael introduced the Council's Engagement and Partnership Coordinators, Judith Barba Perez and Jasmine Alik, who each introduced themselves to the Board. Esmael then spoke about Council staff's focus on strengthening internal capacity and developing a comprehensive engagement plan. Esmael emphasized the importance of tailoring engagement strategies to Washington's diverse communities, noting that there is no one-size-fits-all approach.

Esmael highlighted the need for co-creation through two-way conversations to foster mutual transformation. Esmael pointed out that the Council's presence in communities impacts both the communities and the way the Council operates, transforming their approach to engagement. Esmael then stressed the importance of meaningful community engagement, such as expanding opportunities for collaboration and acknowledging that many communities are seeking tangible change rather than just hearing about it.

Esmael requested the Board's support in elevating the Council's efforts by sharing engagement opportunities and called on the Board to engage authentically with communities and contribute to the Council's mission.

LinhPhụng concluded by sharing a slide with ways for the Board to connect with the Council and its work.

Patty Hayes, Board Chair, expressed excitement about the Council's work, noting that while many agencies are grappling with similar challenges, the Council is in a unique position to bring them together and avoid duplicating efforts. Chair Hayes emphasized the importance of doing this work in a new way and offered her support.

Paj Nandi, Board Member, also a former Council member, suggested that future discussions could focus on how the Council has influenced and impacted communities. Member Nandi noted the fatigue around policy recommendations and stressed that legislators are most concerned with the tangible impact at the community and family levels. Member Nandi recommended leading with this perspective in future discussions.

Esmael acknowledged Member Nandi's point, stating that the Council is actively working to highlight its impact without overselling. Esmael emphasized the importance of making the community feel welcomed and encouraged to participate.

Dimyana Abdelmalek, Board Member, asked if the Council had a key takeaway from their work that Board Members could take back to their communities, local health jurisdictions, and others they serve.

LinhPhụng responded, emphasizing the value of reaching out to the Council as the starting point for building relationships. LinhPhụng encouraged sharing information about the Council and inviting others to get involved, as it opens possibilities for collaboration.

Steve Kutz, Board Member, expressed hope that the Council could make a meaningful difference, especially in ensuring that messages are effectively communicated with communities.

The Board recessed for lunch at 12:55 p.m. and reconvened at 1:25 p.m.

9. HEALTH IMPACT REVIEW (HIR) RESOURCES

Cait Lang-Perez and Lindsay Herendeen, Board staff, introduced themselves and informed Board Members that they had received their first Health Impact Review (HIR) request from Representative Simmons regarding House Bill 1125. This bill proposes granting judicial discretion to modify sentences in the interest of justice. Cait noted that this request updates the proposal the team reviewed during the interim.

Cait shared an updated version of the HIR fact sheet and then updated the Board on new HIR resources for the HIR outreach toolkit in preparation for the 2025 legislative session. Cait encouraged Board Members to share the HIR fact sheet with legislators and their staff.

Cait also shared that the team developed an HIR Engagement guidance document in response to questions from Board Members. The document explains what Board Members can expect from HIR analysts, such as receiving email alerts about HIR activities, and details how Members can engage with and share HIR work with their networks and legislators.

Cait then highlighted a new video project developed by the HIR team in collaboration with the Board's Communications team. The video serves as an introduction to HIRs, explaining how they provide policy-specific information to decision-makers from a health equity perspective.

Patty Hayes, Board Chair, commended the HIR team for their work.

Peter Browning, Board Member, inquired about the email sent to Board Members notifying them about the team's current HIR request.

Cait explained that Board Members will receive regular alerts throughout the legislative session to keep them updated on incoming HIR requests and ongoing work from their

team. Cait encouraged Board Members to respond to these emails if they have relevant experience related to any HIR topics or if they know individuals the HIR team should connect with.

10. 2025 LEGISLATIVE STATEMENT

Michelle Davis, Board Executive Director, provided an overview of the legislative statement and how it is used. This statement guides the Board and its team during the legislative session on issues to follow. Board staff looks at bills with the legislative statement in mind and will make recommendations for action items as a team.

Executive Director Davis reviewed the draft 2025 legislative statement, its current edits, and noted that the State Health Report holds recommendations that are also included in this statement. Board staff will send weekly updates to Board Members on bills and issues staff are following. Executive Director Davis provided the next steps to the Board.

Patty Hayes, Board Chair, clarified that this statement was originally longer but has now been more streamlined. Chair Hayes praised Executive Director Davis for their work on supporting the Board and limiting the amount of bills the Board follows.

Steve Kutz, Board Member, said the Health Disparities Council (Council) is part of the Board, but agencies need to recognize that the Council belongs to other agencies too. Member Kutz suggested having conversations on how agencies can use the Council.

Kelly Oshiro, Vice Chair, commended Executive Director Davis and Board staff on their work on the statement. Vice Chair Oshiro noted looking forward to weekly updates from the team.

Dimyana, Abdelmalek, Board Member, expressed appreciation for this version and that it is strong. It leads with Foundational Public Health Services that benefit everyone in Washington, it prioritizes community engagement and being intentional about inclusion for others.

Motion: [The Board adopts the Statement of Policy on Possible 2025 Legislative Issues as discussed on January 8, 2025.](#)

Motion/Second: [Member Kutz/ Member Nandi. Approved unanimously.](#)

11. PER- AND POLYFLUOROALKYL SUBSTANCES (PFAS) EMERGENCY RE-FILE

Paj Nandi, Board Member, introduced the per- and polyfluoroalkyl (PFAS) emergency rule filing and explained that these changes need to be accepted today to be implemented in the next 120 days.

Ash Noble, Board staff, provided an update on the PFAS emergency rulemaking. The current emergency rule expires on February 19, 2025. Ash recommended to the Board to initiate a third emergency rulemaking to continue to clearly maintain the State Action Levels (SALs) and associate requirements. The anticipated effective date is February 19, 2025, and would expire June 19, 2025. Ash also reviewed the proposed language and future actions (see presentation on file).

Steve Kutz, Board Member, asked if water systems are using the emergency short-term rules to effectively manage their systems.

Shay Bauman, Board staff, clarified that these rules allow water systems to maintain their current plan of action.

Member Nandi, clarified that the permanent rule filings and the extension of rule filings are happening concurrently and are maintaining the status quo.

Lilia Lopez, Assistant Attorney General, added that the reason the emergency rule can keep going under the APA is because permanent rulemaking is taking place.

Motion: The Board directs staff to file a CR-103E to initiate rulemaking for WAC 246-290-315, to continue to clearly maintain the SALs and associated requirements until the federal standards are effective, or the Board completes its revision of the permanent rule.

Motion/Second: Member Kutz/Vice Chair Oshiro. Approved unanimously.

12. PRO-EQUITY ANTI-RACISM (PEAR) PLAN

Paj Nandi, Board Member, introduced the topic and explained why the Board created a Pro-Equity Anti-Racism (PEAR) plan (see materials on file).

Ashley Bell, Board Deputy Director, presented an overview and explained the purpose of the PEAR plan. Ashley outlined its ultimate goals of driving systemic change, dismantling oppressive systems, and promoting equity in all facets of society (see presentation on file).

Ashley provided the Board Members with themes from community member feedback. Board staff followed up with panelists and other community members with connections to their community. While we didn't get a lot of feedback this time around, it sets us up for further conversations. Feedback addressed the connectedness of Board activities, the need for budget follow-through, more interaction with the Board and the public, and better, more equitable presentation of materials.

Ashley explained that the team added a graphic to the plan to make it more accessible for those who want an overview and shared this feedback with the Office of Equity. Ashley outlined the next steps for the Board to consider, including possible action. Ashley recommended that the Board adopt the PEAR strategic action plan, and to keep in mind that this is a continuous process. Each plan should get deeper and deeper. The next equity and engagement manager will begin work on the next plan.

Member Nandi expressed appreciation for the work that went into the draft and noted reviewing and commenting on the plan. Member Nandi reminded the Board that equity is in the details, and significant elements of the plan are tangible and action-oriented. Equity should be in broad policy decisions, but also in our other processes and procedures.

Patty Hayes, Board Chair, thanked Ashley for all the work on the plan and expressed appreciation that the team grounded the plan itself in community feedback. Chair Hayes agreed with Member Nandi that it is about the details.

Chair Hayes asked about Objective 2.1 Action 2, which states that the equity and engagement team will develop a review tool in partnership with impacted communities to assess draft rule language for equity impacts. Chair Hayes asked how the Board could work together with the Health Disparities Council on this so as not to overwhelm communities. Chair Hayes then asked how we spend time considering rules and talking about who the affected communities are.

Michelle Davis, Board Executive Director, expressed that there is a problem with transparency here. Board staff has worked on a project scoping document that outlines who rules affect, how, and how to address. Executive Director Davis noted that there is a desire for the Board to actively engage in developing that tool and could make it better.

Member Nandi added that every policy has an impact on a large swath of the population, but a more important question is who is disproportionately impacted. We need to focus policy from an equity and justice standpoint on who is most adversely impacted. It might not be a single tool, but an approach that we should take.

Steve Kutz, Board Member, noted that we need to look at where the inequities are and whether we are creating any. There is work to be done, but didn't see anything within the plan that we shouldn't be working on.

Peter Browning, Board Member, noted that we must set parameters on things that can and can't be done. It makes people more mad believing things will be fixed when they can't. The Board should provide a reasonable timeframe and transparency about limitations.

Chair Hayes noted that staff has done an exemplary job of doing what has been mentioned with the school rules project, and that rule process may make a good case study.

Ashley responded that we would take note of those suggestions.

Chair Hayes asked that staff look again at the goal to better address the process, and not a tool itself. If the public sees yet another tool, people might have an adverse reaction.

Member Kutz pointed out that Health Impact Reviews (HIRs) have good tools to use. Executive Director Davis responded that we cannot do HIRs on all our rules due to staff capacity.

Mindy Flores, Board Member, stated that Chair Hayes' comment was impactful and expressed uncertainty about approving the plan if it felt incomplete. Member Nandi clarified that the adoption would be 'as discussed' and could address the questions brought up by Board Members.

Member Flores asked if we had an implementation plan for when the other things might be figured out. Ashley responded that many do have implementation plans.

Dimyana Abdelmalek, Board Member, shared appreciation for all the work that went into the plan and asked if Objective 3.2 Action 1 is something that could be available to Board Members. Ashley confirmed.

Kelly Oshiro, Vice Chair, commended the work and timelines presented in the plan and stated that a monthly or quarterly report back on accomplishments would be helpful. Vice Chair Oshiro expressed excitement to see all that would be accomplished over the next two years.

Member Nandi opened the floor up to a motion.

Executive Director Davis noted that the PEAR plan is another example of Foundational Public Health Services (FPHS) dollars in action. Without FPHS, the Board wouldn't have an equity and engagement manager position (EEM). The requirement came out two years ago, without the EEM position we were not able to comply at that time.

Chair Hayes added that the adoption of the PEAR Plan will now allow us to move forward with our future strategic planning process.

Motion: The Board adopts the PEAR Strategic Action Plan, and directs staff to finalize the Plan as discussed, notify the Office of Equity, and file the Plan as requested.

Motion/Second: Vice Chair Oshiro/Member Kutz. Approved unanimously.

13. AUDITORY SCREENING RULEMAKING UPDATE, [CHAPTER 246-760 WAC](#) Kelly Kelly Oshiro, Vice Chair, introduced the topic (see materials on file).

Molly Dinardo, Board staff, presented the purpose and scope of the auditory screening rules, including the ages and timing of testing, the reasons for the screenings, and their importance as a public health tool. Molly explained that the current Board rules only allow specific screening equipment, but the Chelan Lion's Club requested to add otoacoustic emission (OAE) screening technology. Given the research supporting its benefits, the Board initiated rulemaking to explore further. Molly also discussed the completed engagement and shared the rule alert American Sign Language (ASL) Announcement videos which were created based on discovery during the rule scoping document review.

Peter Browning, Board Member, asked for more information on OAE.

Molly shared insights from conversations with subject matter experts (SMEs), listening sessions, and outreach to other states that use OAE in their school districts. The team learned that while OAEs can be an effective tool they come with some disadvantages. These disadvantages include high training and equipment costs (\$5000- \$7000 per device), and annual maintenance fees of \$300-\$500. Some have reported that OAEs are sensitive to background noise and are delicate. Puretone remains the gold

standard. Molly explained that the rule would need to specify situations when OAEs could be used, as the outcomes are deficit-based and alternative language should be used.

Molly shared findings from the school screening staff survey, which represented 98 out of 295 Washington school districts that responded. The survey indicated overall general support for adding OAE as *an optional* method, but there are concerns about costs and training. Molly also discussed potential rule changes to chapter 246-760 WAC and provided an overview of the tentative timeline.

Patty Hayes, Board Chair, reflected on the Board's lack of authority to do anything about how schools are funded and appreciates how we look at this rule through the PEAR plan. Chair Hayes agreed it makes sense for this to be an optional provision.

Paj Nandi, Board Member, agreed that the Board should explore what this would look like and how we are being intentional about implementing equity into the process.

Chair Hayes complimented the ASL video. Chair Hayes reflected on a recent situation in the Seattle area where ASL interpretation was not provided when considering closing a school with many deaf and hard of hearing children. Chair Hayes appreciates the forethought in creating the video.

Vice Chair Oshiro encouraged Board Members to review the screening survey and noted that the Lion's Club wanted to provide screening for a school, but there was a barrier in the rule as OAEs were not on the list of acceptable devices. Vice Chair Oshiro noted that the Lion's Club reacted appropriately. This is a perfect testing ground for the PEAR plan.

Steve Kutz, Board Member, asked if we learned anything from schools that tested other students for other conditions. For example, adding to the rule that kids who are failing should have their eyesight and hearing checked. Molly clarified that the rule allows expanding screening to additional grade levels.

Annie Hetzel, Office of Superintendent of Public Instruction (OSPI), shared that students who are referred to special education services must all be screened, but not necessarily all who are failing classes. Annie noted that school staff are in tune with students that need additional help and catch when students need vision or hearing exams. Nurses try to capture new students too, especially if they don't have records of screenings.

Member Browning said a lot of rural counties are developing medical reserve corps, like the Lion's Club, and that options exist that could be encouraged. Member Browning asked about the price of OAE. Molly stated the \$5000-\$7000 cost per device and responded that districts often own and lend out to schools, and some rent from companies.

Member Browning stated that hearing issues are so incapacitating and may not get the services they need and noted that this seems actionable.

The Board took a break at 3:12 p.m. and reconvened at 3:25 p.m.

14. SCHOOL RULES PROJECT UPDATE – DRAFT LANGUAGE

Patty Hayes, Board Chair, shared that the draft proposed rule has been developed. All minimal standards have been reviewed, and the comment period has been extended through February 9. Board staff will walk through the high-level changes. A joint meeting with the TAC is planned for April and efforts are underway to prepare both the TAC and the Board Members. Chair Hayes noted that Board staff will address the controversies in the draft rules. This will be a good case study for applying the PEAR Plan. Chair Hayes shared that the TAC has worked collaboratively together. There will be some challenges with the cost of this rule.

Andrew Kamali, Board staff, provided an update of the School Rules Project (see presentation on file). The update covered Board authority, a high-level overview of the project, proviso information, the timeline, and then details about the subject matter in the rule. The draft rules are out for informal public comment. The January TAC is a two-day fiscal summit, where the focus will be on going through the rule and assessing the cost.

Nina Helpling, Board staff, discussed the project deliverables in detail (see presentation on file). In April, the TAC will discuss the recommendations and report to the Board. Board staff will need to send the report to the Legislature and Governor's office in June. Two sections, covering noise and lighting, remain unchanged after expert consultation. No new recommendations were made for these areas. Nina shared three larger sections of the rule were reformatted, retitled, and expanded on. These sections focus on site assessments, plan reviews, and routine inspections. These sections now include specific tasks and timelines for schools and local health officers. A common concern raised by schools and local health jurisdictions (LHJs) was communication. Accountability was incorporated for all parties to help create collaborative partnerships between schools and LHJs. Two sections were also removed and new topics, including indoor air quality and ventilation, were introduced. Work continues on ventilation to avoid conflicts with other laws. Additional changes include addressing special ventilation and temperature needs for specialty rooms. Instead of rewriting changes into the rule, relevant laws are now referenced. Nina shared that the Department of Health's (Department) Healthy Environment for All (HEAL) team has supported listening sessions, coordination, engagement, and funding.

Andrew shared that school funding is complex and beyond the Board's control. There are potential conflicts, such as clean building performance standards, that the Board is working to clarify and will include in the final report. The TAC is calculating costs per square foot to make the rules applicable to schools of all sizes. They are considering factors such as regional cost differences and the age of school facilities.

Andrew also updated the Board on implementation recommendations. The focus is on determining which sections of the rule should be implemented based on the greatest benefit to the health and safety of students. Funding is a key consideration, as lower-cost measures are easier to implement. Final approval from the Board is needed on

June 11 after which all reports and materials will be submitted to the Legislature and the Governor's office.

Chair Hayes, provided additional context on the conflict surrounding the clean building performance standards. The Department of Commerce (Commerce) doesn't see a conflict, but schools do. Schools are required to meet Commerce standards for energy use, and penalties may apply if the standard isn't met. Chair Hayes shared that these things can be highlighted in the report, as the Legislature may make changes. Chair Hayes reminded Board Members that the goal for Legislative Session 2026 is to lift the bar on these rules. The implementation will be phased. Some sections will provide schools with a timeline to meet the standards.

Andrew provided additional information. Business and operations people have shared insights on Radon testing and pest mitigation plans.

Steve Kutz, Board Member, asked if the proposed draft includes prescribed maintenance requirements, such as air filters.

Andrew shared that the indoor air quality management plan in the rule includes filter requirements, such as checking and replacing filters as needed. It also includes ensuring ventilation systems are working properly. They are working closely with the Department which will help develop guidance and model plans for schools to meet the rule's requirements.

Member Kutz asked if the TAC was implementing flexible standards that reflect best practices.

Andrew clarified that they are setting minimal public health and safety standards while trying to remain flexible to accommodate schools' varying needs. Andrew shared that during the TAC's presentation to the Board, it will be important to show what the TAC has asked for and how the flexibility in meeting the standards were collected, as the goal was a collaboration between the school and local public health rather than public health, coming in with a checklist. The TAC wants flexibility to meet minimum standards. Sanitation standards for janitorial staff and space requirements were other things that were considered.

Peter Browning, Board Member, asked about asthma rates, headaches, and other things that are indicative of cleaner schools over time.

Andrew shared that the measures they are implementing would be the minimum public health and safety standards and that local public health would be responsible for how their program works and the Department will develop guidance and begin to look at indicators. The Board will watch but does not set up that piece.

Chair Hayes added that in collaboration with the University of Washington and some students there in the graduate nursing program, there was a report about school environmental safety that the TAC is going through now. It discusses some of those indicators, increased rates of absenteeism, and what those causes are related to. It's being reviewed, but it's not something that will necessarily be looked at as a measure of

effectiveness. It is known that some of the rationales for absenteeism are around health indicators.

15. NEWBORN SCREENING PROJECT UPDATE

Kelly Oshiro, Board Vice Chair, introduced upcoming work, including an upcoming technical advisory committee (TAC) meeting that's occurring next week.

Kelly Kramer, Board staff, shared updates to the newborn screening (NBS) project and the process and criteria document. All conditions that are on or added to the Recommended Uniform Screening Panel (RUSP) don't need prior evidence. A TAC will automatically convene to use these criteria to evaluate whether the RUSP condition should be added to Washington's panel within two years after the Health and Human Services Secretary recommends a condition be included on the RUSP. The Board will wait until the Federal Review is completed before Washington conducts its own review. Petitions for conditions that were previously reviewed and then denied for the RUSP, Board staff will work with a petitioner to address issues or concerns that were identified in the Federal review.

Kelly continued to share that current RUSP conditions or conditions on the RUSP that are not on Washington's mandatory newborn screening panel are MPS-II, which was added to the RUSP in August 2022. Krabbe Disease was also added to the RUSP. In June of 2024, Guanidinoacetate methyltransferase deficiency (GAMT) was added to the RUSP.

Kelly stated there is currently a CR-101 for GAMT that was filed in November of 2023, with the hearing for that condition currently pending legislative action. Congenital hearing loss is also a RUSP condition. The Board has previously reviewed hearing loss for the mandatory newborn screening panel and Board staff are currently working with the Department of Health (Department) to determine appropriate next steps to address hearing loss. The conditions that the Board is already set to review are branched-chain keto acid dehydrogenase kinase deficiency (BCKDK) and congenital Cytomegalovirus (cCMV), and Wilson's Disease, as petitioned, will be reviewed later this spring. The Board has accepted the newborn screening TAC recommendation so there are now two conditions on the RUSP that must be reviewed within the two-year time frame.

Kelly asked for the Board to consider a motion. The two-year review timeline begins from the November 2024 Board recommendation date. Instead of the date of the Federal recommendations.

Steve Kutz, Board Member, asked about methodologies and confirmed that it will be a part of the TACs process.

Kelly responded that the TAC will first review the condition BCKDK deficiency, and then will conduct a review of the five NBS criteria.

Kelly pointed the Board to the newborn screening process and criteria document on page 555 of meeting materials and reviewed amended sections. Kelly stated the Board

will receive a final version of this document for formal Board approval at the March meeting.

Motion: For the conditions MPS-II and Krabbe Disease that were added to the RUSP prior to the Board's recommendations, the two-year review timeline begins from the November 2024 Board recommendation date instead of date of the federal recommendations.

- The TACs for MPS-II and Krabbe Disease must be completed by November 2026.

Motion/Second: Member Browning/Member Nandi. Approved unanimously.

16. 2025 BOARD MEETING SCHEDULE UPDATE

Michelle Davis, Board Executive Director, presented the updates to the 2025 Board Meeting Schedule. Changes reflect location and travel limitations based on the Governor's budget directive.

Motion: The Board approves meeting locations in the Olympia area, preferably state agencies, through June 2025, to reduce costs during the 2025 fiscal year.

Motion/Second: Member Kutz/Member Abdelmalek. Approved unanimously.

17. BOARD MEMBER COMMENTS

Steve Kutz, Board Member, discussed attending The National Institutes of Health (NIH), Bethesda (MD) meeting on Indian Boarding Schools and learning about the significant historical trauma and family dynamics.

Patty Hayes, Board Chair thanked Member Kutz for sharing and everyone for a full meeting today.

ADJOURNMENT

Patty Hayes, Board Chair, adjourned the meeting at 4:30 p.m.

WASHINGTON STATE BOARD OF HEALTH

Patty Hayes, Chair

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