



WHATCOM COUNTY COUNCIL

SPECIAL COUNCIL MEETING AS THE HEALTH BOARD

10:00 a.m. Tuesday, April 2, 2019
Council Chambers, 311 Grand Avenue

A G E N D A

<u>Meeting Topics</u>	<u>Pages</u>	<u>Time</u>
1. Director Report	no ppr	10:00-10:15
2. Proposed Public Health Advisory Board Code Revisions	1 - 5	10:15-10:30
3. Public Session	no ppr	10:30-10:50
4. Young Children and Family Resolution	6 - 14	10:50-11:30



Whatcom County
HEALTH
Department



HEALTH BOARD
Discussion Form
April 2, 2019

AGENDA ITEM #2: Proposed Public Health Advisory Board Code Revisions

PRESENTER: Regina Delahunt

BOARD ACTION: Discussion

SIGNIFICANT POINTS OR EXECUTIVE SUMMARY

At the July 17, 2018 Joint Health Board/Public Health Advisory Board (PHAB) meeting, board members reviewed the Roles and Responsibilities Matrix which outlined the roles and responsibilities of the Department, the Health Board, and the Public Health Advisory Board. This led to a discussion about the appropriateness of the PHAB member segment representation specified in the code. Health Board members agreed that it was time to revisit the code (WCC 24.01.051) and propose updates as necessary.

PHAB discussed draft code revisions including proposed changes to segment representation at the November 2018, as well as the 2019 February and March PHAB meetings. The following revisions to the code are proposed in the attached draft:

- Term length changed from 4 to 3 years
- Clarified term limits
- Language added to emphasize focus on board diversity
- Board size changed from 9 to a minimum of 9 and a maximum of 13.
- Segment descriptions updated and expanded to provide more flexibility in choosing members
- Language and structure was modified to reflect current practices and language.

BOARD ROLE / ACTION REQUESTED

Discuss and comment on proposal for PHAB segment representation. Recommend moving forward with ordinance revision process.

ATTACHMENT(S)

Draft revisions to WCC 24.01.051 redline and final markup versions.



Whatcom County
HEALTH
Department

24.01.051 Health department advisory board created.

A. The county health department advisory board, referred to in this chapter as the “public health advisory board,” is created and shall serve in an advisory capacity to the Health Board and the health department director in the following areas:

1. Recommend public health policies;
2. Recommend public health priorities;
3. Provide community forums/hearings as assigned by the Health Board;
4. Establish community task forces as assigned by the Health Board;
5. Review and make recommendations for annual budget and fees;
6. Present annual report to the Health Board.

B. 1. The public health advisory board shall consist of at least nine and not more than thirteen members who are residents of the county. Members shall be appointed by the executive, subject to confirmation by a majority of the county council, except that one member of the Health Board shall be appointed by the county council.

2. The term of office for the members appointed by the executive shall be three years; except, that four terms shall remain staggered. In accordance with WCC 2.03.030 a member may be appointed to serve up to two consecutive full terms, regardless of whether that member has served a first term of less than a full term. No board, commission or committee member shall serve more than two consecutive full terms; however, after serving two consecutive full terms a member may become eligible for reappointment to a board, commission or committee after a one-year period of separation from the respective board, commission or committee on which he or she has previously served.

3. The term of office for the member appointed by the county council shall be for one year, from the time of the council's reorganization meeting in January to the next such meeting the following year.

4. The public health advisory board shall be broadly representative of the character of the county. Board diversity is valued and shall be a factor when considering membership. Membership consideration shall be given to tribal, racial, ethnic minorities and other populations that experience health inequities. The board shall consist of a balance of persons with expertise, career experience, and consumer experience in areas impacting public health and with populations served by the health department. The public health advisory board's composition shall include at least one member in the each following areas of expertise/experience:

- Health Care Access and Quality (Health Care System, Mental Health, Substance Abuse, Health Care Provider)
- Physical Environment (Built Environment: Transportation, Parks; Natural Environment: Air, Water, Food)

- Social and Economic Factors (Housing, Basic Needs, Education, Employment)
- Business and Philanthropy (Large/Small Business, Charitable Foundations)
- Communities that experience health inequities (for example, but not limited to: Tribal, Hispanic, Immigrant, People with Disabilities or Special Health Needs, Seniors, and other communities)
- Government (City of Bellingham, Small City/Rural)
- Tribal Community Member/Tribal Government Representation.

C. At its initial meeting, or as soon thereafter as practical, the public health advisory board may elect officers, adopt bylaws and such rules and regulations of procedure as are necessary for the conduct of its business. Meetings of the public health advisory board shall be subject to the Open Public Meetings Act, Chapter 42.30 RCW et seq. (Ord. 2004-004; Ord. 99-025; Ord. 93-024; Ord. 91-040 (part)).

DRAFT

24.01.051 Health department advisory board created.

A. The county health department advisory board, referred to in this chapter as the “public health advisory board,” is created and shall serve in an advisory capacity to the ~~board of health~~Health Board and the health department director in the following areas:

- ~~1. Advisory capacity to the board of health;~~
- ~~2. Advisory capacity to the health department director;~~
- ~~31.- Recommend public health and program policies;~~
- ~~2. Recommend public health priorities;~~
- ~~43. Provide community forums/hearings as assigned by the board of health~~Health Board;
- ~~64. Establish community task forces as assigned by the board of health~~Health Board;
5. Review and make recommendations for annual budget and fees;
- ~~6. Establish community task forces as assigned by the board of health;~~
- ~~67. Present annual report to the board of health~~Health Board.

B. 1. The public health advisory board shall consist of ~~at least nine and not more than thirteen~~nine members who are residents of the county. ~~Eight m~~Members shall be appointed by the executive, subject to confirmation by a majority of the county council, ~~and except that one member shall be of the board of health~~Health Board shall be appointed by the county council.

2. The term of office for the members appointed by the executive shall be ~~four~~three years; except, that four terms shall remain staggered. In accordance with WCC 2.03.030 a member may be appointed to serve up to two consecutive full terms, regardless of whether that member has served a first term of less than a full term. No board, commission or committee member shall serve more than two consecutive full terms; however, after serving two consecutive full terms a member may become eligible for reappointment to a board, commission or committee after a one-year period of separation from the respective board, commission or committee on which he or she has previously served.

3. The term of office for the member appointed by the county council shall be for one year, from the time of the council's reorganization meeting in January to the next such meeting the following year.

4. The public health advisory board shall be broadly representative of the ~~demographic~~-character of the county. Board diversity is valued and shall be a factor when considering membership. Membership consideration shall be given to- tribal, racial, ethnic minorities and other populations that experience health inequities. The board shalland consist of a balance of persons ~~who are representative of consumers and professionals with expertise, career experience, and consumer experience in the various areas impacting public health programs and with populations underserved by the health department. It's jurisdiction, including administration/fiscal, nursing, and environmental health. However, the public health advisory board's composition shall also be comprised of the following areas of expertise/experience:-The~~

public health advisory board's composition shall include at least one member in the each following areas
withof expertise/experience in the each following areas:

1. ~~One member from the board of health;~~

2. ~~One member from natural sciences;~~

3. ~~One physician;~~

4. ~~One member from business/industry;~~

5. ~~One tribal member or a representative from an ethnic minority;~~

6. ~~One member from education;~~

7. ~~Two members from, but not limited to, the areas of administration/fiscal, nursing, or hospital affiliation;~~

8. ~~One citizen-at-large member.~~

- Health Care Access and Quality (Health Care System, Mental Health, Substance Abuse, Health Care Provider)
- Physical Environment (Built Environment: Transportation, Parks; Natural Environment: Air, Water, Food)
- Social and Economic Factors (Housing, Basic Needs, Education, Employment)
- Business and Philanthropy (Large/Small Business, Charitable Foundations)
- Communities that experience health inequities (for example, but not limited to: Tribal, Hispanic, Immigrant, People with Disabilities or Special Health Needs, Seniors, and other communities)
- Government (City of Bellingham, Small City/Rural)
- Tribal Community Member/Tribal Government Representation.

C. At its initial meeting, or as soon thereafter as practical, the public health advisory board may elect officers, adopt bylaws and such rules and regulations of procedure as are necessary for the conduct of its business. Meetings of the public health advisory board shall be subject to the Open Public Meetings Act, Chapter 42.30 RCW et seq. (Ord. 2004-004; Ord. 99-025; Ord. 93-024; Ord. 91-040 (part)).



HEALTH BOARD Discussion Form

April 2, 2019

AGENDA ITEM #4: Young Children and Families Resolution

PRESENTER: Rachel Lucy, Chair, Public Health Advisory Board

BOARD ACTION: ☒ Action Item Discussion FYI – Only

SIGNIFICANT POINTS OR EXECUTIVE SUMMARY

On February 5, 2019, the Health Board adopted a 2019 Policy Agenda that includes a focus on early childhood. The policy agenda calls for the development and adoption of a resolution which formalizes the County's commitment to young children and families in Whatcom County. As per the Policy Agenda, the resolution will:

- *Incorporate priorities established by the multi-sector Generations Forward Children's Collaborative, including development of sustainable financing mechanisms for child and family services and supports*
- *Encourage development of ongoing public-private partnerships*
- *Prioritize actions and investments that help close early childhood opportunity gaps associated with race, ethnicity, income, and family adversity*
- *Include accountability processes and measurements to track progress*

The Public Health Advisory Board working with Health Department staff was tasked with developing and bringing back a resolution for Health Board consideration. A draft resolution was submitted to Public Health Advisory Board on March 7, 2019 for initial review, comment, and edits. The resolution was also distributed to partners and community members affiliated with Generations Forward, and additional input was incorporated.

BOARD ROLE / ACTION REQUESTED

- Review and approve resolution

ATTACHMENT(S)

- Draft Resolution Affirming Commitment to Whatcom County's Young Children and their Families

RESOLUTION NO. _____

**Health Board Resolution Affirming Commitment to Whatcom County's
Young Children and their Families**

WHEREAS, mounting scientific evidence points to the first years of life as a critical time period for the healthy development of the brain and other body systems; and

WHEREAS, the Center on the Developing Child-Harvard University, a national center of excellence focused on the science of child development, identifies three necessary ingredients for healthy development in the first years of life—stable nurturing relationships; sound nutrition; and safe, supportive environments; and

WHEREAS, family adversity, such as financial hardship, homelessness, parental incarceration, substance use, or mental illness, can interfere with parent and caregiver ability to provide stable nurturing care, sound nutrition, and safe environments for young children; and

WHEREAS, a toxic stress response can occur when a child experiences strong, frequent, and/or prolonged adversity such as physical or emotional abuse, chronic neglect, caregiver substance abuse or mental illness, exposure to violence, and/or the accumulated burdens of family economic hardship—without adequate adult support; and

WHEREAS, toxic stress and emotional trauma in the first years of life impact brain development and contribute to physical and behavioral health concerns, and future social and academic challenges; and

WHEREAS, Indigenous children, children of color, children with disabilities, and children and families living in poverty are more likely to experience adversity due to historical and persistent patterns of discrimination, oppression and lack of equitable opportunities; and

WHEREAS, disproportionate levels of adversity contribute to health and social disparities and inequities; and

WHEREAS, investment in healthy development for young children is a promising cross-cutting strategy to promote lifelong physical and mental health, academic success, and future employment; to reduce criminal justice involvement and other social challenges; and to advance equity; and

WHEREAS, return-on-investment for evidence-based programs focused on young children and families is as high as 9:1; and

WHEREAS, families, community members, and organizational partners from many sectors working together in a coordinated and systematic way can create the environments and opportunities children and families need to thrive; and

WHEREAS, community leaders in Whatcom County have recognized the importance of and have come together as part of the Generations Forward initiative to envision a future where all Whatcom County children thrive; and

WHEREAS, the Whatcom County Health Department and Opportunity Council co-sponsor the Generations Forward initiative; and

WHEREAS, the Generations Forward initiative involves more than 100 families and stakeholders representing diverse sectors throughout Whatcom County; and

WHEREAS, the Generations Forward initiative focuses on young children and families, emphasizing the prenatal and early childhood periods to age 8 years; and

WHEREAS, while young children are the primary focus of Generations Forward, participants and community partners acknowledge that trauma and hardship can show up in a family at any stage and will consider that while proposing and creating solutions for young children and their families; and

WHEREAS, Generations Forward is working to achieve the following results in Whatcom County:

- **Children** are safe, healthy, and ready to learn,
- **Families** are strong, stable, and supported from the start,
- **Communities** are supportive and welcoming places for children and families to live, learn, work and play; and

WHEREAS, participants in the Generations Forward initiative have adopted a series of collective commitments focused on:

- **Equity**: honoring all families and the diversity therein
- **Parenting Education and Family Support**: expanding family support, mentoring, and education
- **Family Economic Stability**: removing barriers to upward economic mobility
- **Child Care and Early Learning**: increasing access to quality, affordable child care and early learning opportunities
- **Housing**: increasing access to safe, affordable family housing throughout the county
- **Health and Social Services**: improving access to coordinated family-centered services and integrated health care, including behavioral health services and supports
- **Neighborhoods and Communities**: building community connections and resilience
- **Funding**: developing reliable financing for child and family programs and services; and

WHEREAS, the Health Board adopted an annual focus on early childhood in 2017 and again in 2018; and

WHEREAS, the Health Board adopted a Healthy Planning Resolution in 2015 that affirms the county's commitment to incorporating a health perspective in all county planning processes and calls out consideration of children and families; and

WHEREAS, the Health Board adopted a Compassionate Communities Resolution in 2013 calling for compassionate, trauma-informed approaches to health and human services, recognizing the impacts of childhood adversity on lifelong health and well-being;

THEREFORE BE IT RESOLVED that the Health Board shall affirm the Generations Forward collective commitments and take steps to support policy and funding that align with these commitments; and

THEREFORE BE IT FURTHER RESOLVED that the Health Board shall appoint one member to participate in the Generations Forward initiative to recommend policy options and explore development of a sustainable public financing mechanism for child and family programs and services; and

THEREFORE BE IT FURTHER RESOLVED that the Health Board shall task the Public Health Advisory Board to collaborate with Generations Forward partners and Health Department staff to create a Whatcom County Child and Family Action Plan, building on Generations Forward commitments and using a public health approach; and

THEREFORE BE IT FURTHER RESOLVED that the Child and Family Action Plan shall include an accountability process that outlines desired results and key indicators of success, an approach to ongoing monitoring and evaluation of progress, and transparent mechanisms for sharing progress with the community; and

THEREFORE BE IT FURTHER RESOLVED that the Child and Family Action Plan shall be presented to the Health Board no later than January 31, 2020; and

THEREFORE BE IT FURTHER RESOLVED that the Health Board shall ensure that the needs of young children and families are included and prioritized in county plans and policies addressing: Housing, Behavioral Health, Incarceration Prevention, Economic Development, and Land Use; and

BE IT FINALLY RESOLVED that the Health Board will review this resolution on an annual basis.

APPROVED this _____ day of _____ 2019.

ATTEST:

WHATCOM COUNTY HEALTH BOARD
WHATCOM COUNTY, WASHINGTON

Dana Brown-Davis, Clerk of the Council

Rud Browne, Health Board Chair

APPROVED AS TO FORM:

Civil Deputy Prosecutor

Health Board Resolution

Affirming Commitment to Young Children & Families

Rachel Lucy, Public Health Advisory Board (PHAB) Chair

April 2, 2019



Whatcom County
HEALTH
Department



Building blocks for healthy development

- stable, nurturing relationships
- sound nutrition
- safe, supportive environments

Center on the Developing Child at Harvard University

Building momentum to act

2013	Compassionate Communities
2015	Health Planning
2017- 2018	Health Board (HB) adopted Early Childhood Focus
2017	Generations Forward Launch

**Time is
now.**

**Therefore,
be it
resolved:**

Affirm Gen Fwd collective commitments

Appoint one HB member to participate in Gen Fwd initiative to recommend policy options and explore sustainable public financing

Task PHAB and partners to create Action Plan, including accountability process, by no later than 1-31-2020

Ensure needs of young children and families are prioritized in county plans and policies for: Housing, Behavioral Health, Incarceration Prevention, Economic Development, Land Use

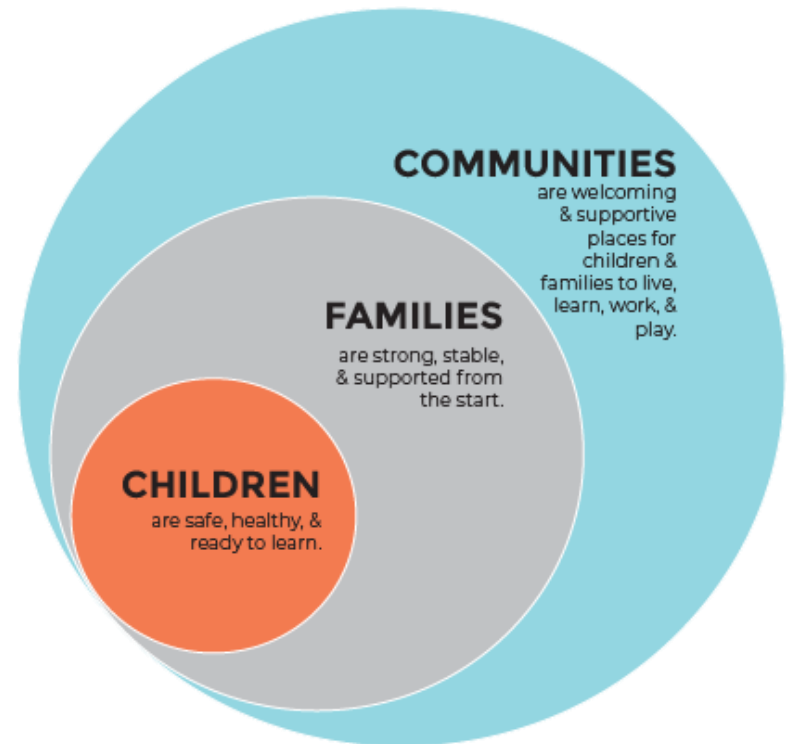
Review this resolution annually

When we make
investments that support
young children and
families early on,
we can build more

RESILIENT COMMUNITIES

and we can create a
future where

EVERYONE THRIVES.



INVESTING IN YOUNG CHILDREN & FAMILIES

Many young children and families in Whatcom County are experiencing high levels of **STRESS**



PROLONGED STRESS

IN YOUNG CHILDREN AFFECTS:

- brain development
- health outcomes
- social & emotional development
- learning ability

STRESS SHOWS UP IN OUR COMMUNITIES WHEN:

CHILDREN

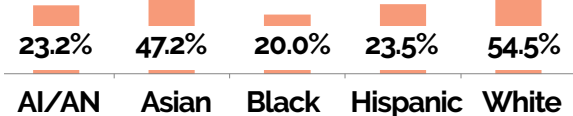
experience abuse and neglect

46
1,000

out of every Whatcom County children are referred for child abuse and neglect

don't meet school readiness goals

Children of color are least likely to be ready for kindergarten.*



FAMILIES

aren't economically stable

44%

of Whatcom County families lack economic security.

lack a safe and stable home

68

Whatcom County families were homeless in 2018.



COMMUNITIES

don't offer enough affordable childcare



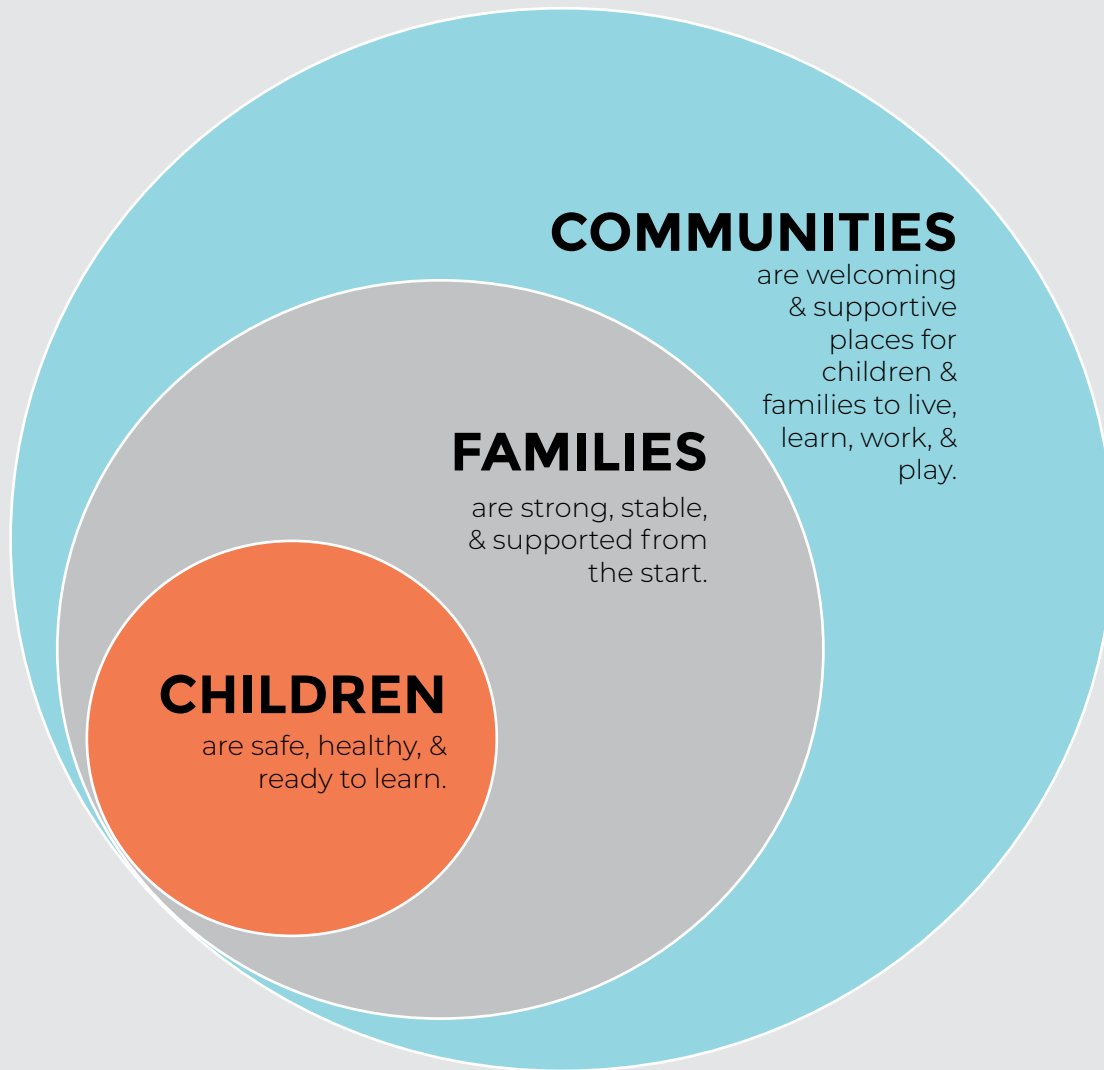
There are only **4** childcare spaces for every **10** children in Whatcom County.

have housing that is too costly

50%

of renters in Whatcom County are cost-burdened.

**Working together, we can achieve
better results:**



WHEN WE MAKE INVESTMENTS THAT SUPPORT YOUNG CHILDREN
AND FAMILIES EARLY ON,
WE CAN BUILD MORE

RESILIENT COMMUNITIES
AND CREATE A FUTURE WHERE
EVERYONE THRIVES.



Whatcom County
HEALTH
Department

