Our Early Years

Staff like Monte Kyle, a nurse in the 1950s, have dedicated their careers to the people of Snohomish County.

Whether it was teaching kids healthy habits or working to curb the tuberculosis and Spanish flu epidemics, public health has been a cornerstone of Snohomish County for more than 100 years.

The American Red Cross was a key partner from the beginning. We believe this picture is of one of our first county nurses in 1916.

First graders in Monroe were given toothbrushes during Dental Health Week in 1969.

The Spanish flu epidemic in 1918 led to masks being required in public.

Milk sanitarians inspected dairies throughout the county in the 1940s and 1950s.

Always there

Whether it was teaching kids healthy habits or working to curb the tuberculosis and Spanish flu epidemics, public health has been a cornerstone of Snohomish County for more than 100 years.
With tuberculosis spreading across the country like wildfire, organizations like the Anti-Tuberculosis League of Snohomish County and the American Red Cross came together to help their communities. Working out of a small office in the old American Bank Building in downtown Everett, Mrs. Lavinia Gordon became our first public health nurse in 1913. Realizing one nurse was not enough, the Red Cross of Snohomish County paid for Miss Frances Harcus to join Lavinia in 1920. Lavinia and Frances worked together for decades giving county residents skin tests, running the mobile x-ray clinic and providing support at the Aldercrest Tuberculosis Sanatorium in Snohomish. Over the years other diseases and priorities came and went, but tuberculosis remains one of our key responsibilities even to this day.
WHAT’S OLD IS NEW AGAIN

As you can see from the many pictures and stories in this report, public health has played a critical role protecting the health of Snohomish County residents for more than 100 years. This is not a job we take lightly, but it is one that every single employee of the Snohomish Health District is passionate about.

Some things haven’t changed much in the last century. We’re still working to prevent the spread of diseases like tuberculosis, whooping cough and measles. While collecting historical references for this publication, we came across this statement from H. L. Tibbals, Jr., former chairman for the Washington State Board of Health:

“…vessels arrive here daily from all parts of the world, and careful inspection in the future as in the past is all that will prevent, not only in this city but the cities of the sound and state, a spread of diseases which are epidemic in foreign countries.”

That could very easily have been written last year, but it was actually from December 16, 1890. As we have been experiencing with the Ebola and zika viruses, any disease can be carried to our communities in a matter of hours. Many of the recommendations for preventing the spread of illness from 1915 still held true in 2015: wash your hands, cover your cough, get vaccinated and stay home if you don’t feel well.

Public health employees have been at the forefront of some groundbreaking work over the years. We became the county registrar of birth and death certificates in 1907 to ensure accurate and consistent reporting. We also administered Rubella vaccines to more than 33,000 children in 1971, adopted a local sanitary code in 1957, opened a glaucoma clinic in 1964, and in 1966, created a program where cities contributed directly to public health funding. All of these were considered the first of their kind in the state.

In 2015, Snohomish County became the fifth county in the state to pass a law prohibiting vaping in public places. Looking ahead to 2016, we are poised to be second in the state and one of only a dozen in the United States to adopt a pharmaceutical stewardship program.

Our predecessors struggled with how to fund public health, what form local public health should take, the role of the Board of Health, and balancing growing needs with available resources. These issues continue today. During the last two years, the Board and Health District staff have struggled with a series of complex decisions, many of which will continue to unfold in 2016 and beyond.

I’m honored to continue the work of the many health officers before me, and I look forward to seeing many more of the extraordinary efforts by our staff to keep Snohomish County at the forefront of health and wellness into the future.

My sincerest thanks to our employees and the community for your continued support of public health in Snohomish County.
PUBLIC HEALTH IS YOUR . . .

In 2015, we set out to find clearer ways to describe the work that we do every day to make Snohomish County safer and healthier. The result was the six themes described below and further highlighted in the pages that follow.

ADVOCATE
Affecting change across local, state and federal levels

BEST DEFENSE
Monitoring and preventing diseases

COACH
Assessing local issues and developing strategic actions

FIRST RESPONDER
Preparing for emergencies of any kind

HEALTHY START
Providing the best start possible for our youth and community

PEACE OF MIND
Ensuring your food, water, land, air and environment are safe
HEALTHY CHOICES MADE EASIER

Advocating on your behalf for health in all policies

Ensuring you have clean air

While smoking in public places laws were enacted at the state level in 2005, new drugs and devices started emerging over the last decade. That’s why we led the charge in 2015 to adopt countywide laws prohibiting the use of marijuana, hookahs, electronic cigarettes and vaping devices in public spaces. Not only do these laws help protect the general public in places like restaurants, shopping malls and movie theaters, they also ensure all employees are able to enjoy smoke-free work places. Staff will work in the months ahead to align the vaping regulations with new statewide laws enacted in early 2016.

Working together to spread the word

Leveraging a national campaign already in place, staff have been promoting the message of 5 fruits or vegetables, 2 hours or less of screen time, 1 hour of physical activity and 0 sugary beverages for every body, every day. Community Transit partnered with us in 2015 to include this campaign on the interior and exterior signage of their buses.

Making sure our kids have safe routes to walk or bike to school

We all know how important it is to get our kids moving, but some schools are more conducive to that than others. Carrie Parker and Keri Moore in the Healthy Communities team have spent the better part of a year walking the routes of every single elementary school in our county. Detailed reports and recommendations are then shared with the individual schools and school districts to help them with capital project planning efforts. A summary of the work will also be shared mid-2016.

Ensuring you have clean air
Recognizing the need to coordinate efforts, the Snohomish Health District and Snohomish County Department of Human Services partnered in the release of comprehensive statistics on heroin and opioid usage, addictions and deaths. The January 2015 publication garnered local and national media attention, furthering a broader conversation on what resources were needed to curb the epidemic throughout our community.

In addition to county-specific 2014 Healthy Youth Survey fact sheets, we also released an emerging issue report on heroin.

Sixth graders who reported being bullied within the past 30 days: 29%
Eighth graders who had been physically hurt on purpose by an adult: 24%
Sophomores reporting depression significantly affects their daily activities: 36%
High school seniors currently using medicines not prescribed to them: 10%

2015 Healthy Communities Awards

- City of Arlington, the first parks department to go tobacco-free and vape-free
- Whitehorse Meadows Farm outside of Darrington for promoting tobacco-free and vape-free environments
- Monroe Youth Coalition for their work on youth suicide awareness and prevention
- Sultan School District for helping students to make healthy choices, from healthy nutrition to increased physical activity

We also presented our very first Lifetime Achievement Award to Terry Clark, Executive Director at Child Strive, for her work with healthy families and healthy youth, as well as her service to public health as past chair of the Public Health Advisory Council.
TUBERCULOSIS IN 1915

Early in the 20th century, being diagnosed with tuberculosis usually meant either a death sentence or being committed to a local treatment hospital.

Patients in Snohomish County would either be sent to Firland Sanatorium in the Shoreline area or Aldercrest Sanatorium in Snohomish, where they would typically be wheelchair-bound or confined to beds.
A LIFE INTERRUPTED IN 2015

Meet John.

John was likely infected with the tuberculosis bacteria as a child, but it went unnoticed until years later when the infection started making him sick. John had been experiencing symptoms for several months, but he felt too busy to seek care.

Instead, John ended up in the hospital with doctors ordering CT scans and collecting lung fluid. He tested positive for tuberculosis and started on a combination of four different antibiotics. John must remain in isolation at home until he's no longer infectious. He's no longer able to go to work, visit friends or family not currently living with him, or even go grocery shopping for himself. Most people with active TB start to feel better soon after starting treatment, only remaining in isolation for a few weeks.

Unfortunately, John is now in month four of isolation. His TB is severe, slow to respond to treatment, and has likely spread to other parts of his body. John experiences nausea, light-headedness and pain in his legs.

Health District staff closely monitor his medicine regime, directly observing him taking each dose of medication every day. He takes eight antibiotic pills and two injections daily, as well as several vitamins to help ease the nausea, and drinks protein shakes to gain weight. Infected family members living with John are also on medication to treat the latent infection before it becomes active.

Stories like John’s are unfortunately not uncommon. Treatment costs for tuberculosis can range from $10,000 to $400,000 or more in drug-resistant cases. Public health will respond, but we cannot do it alone. Please join us in raising awareness and uniting to end tuberculosis worldwide.
Your best defense against disease

While some communicable diseases, such as scarlet fever or the plague, have largely been wiped out over the years, staff in our communicable disease programs work to prevent the spread of more recent diseases in our community. This requires monitoring, responding to outbreaks and watching for emerging diseases like Ebola. In 2015, staff saw significant increases in cases of HIV, chlamydia, gonorrhea, hepatitis and pertussis.

11 lives saved thanks to naloxone kits. Working with the syringe exchange, 67 kits were distributed to clients at no charge.

Peace of mind

Power outages affected 51 county clinics. Quick action by staff limited vaccine inventory loss to less than $3,300.

Vaccine rates are one of our primary focuses, especially ensuring all teenagers receive the full human papillomavirus (HPV) vaccine series.

Hepatitis C is increasing among Baby Boomers and young injection drug users. One-third of tests given in 2015 came back positive.
Highly educated professors from Iraq were forced to flee their home in Baghdad after being targeted by terrorists because of their support to American troops. In hopes of creating better futures and a safe home for their three children, the couple received visas to come to Snohomish County as refugees. Our Refugee Health program is one of the first stops for refugees and asylees after entering the country. Here they receive a series of screenings that are required by U.S. Immigration Services.

Nurse Christina Griffiths helped this couple complete a comprehensive health assessment, which included TB tests, lab work and reviewing medical records from Iraq. Christina helped connect the family with medical care, as well as resources for language skills, job placement and school needs for their children.

Due to increased political and civil unrest around the world, our program saw a significant increase in the number of clients seen last year. In 2015 alone, we screened 298 refugees or asylees, up from 132 in 2014. Our goal is ensuring each of these new residents gets off to a healthy start in Snohomish County.
HEALTHY STARTS FOR KIDS

In investing time and resources in the early years of a child’s life pays dividends down the road

Parenting is hard, whether it’s your first child or fifth. It becomes even more complicated if there are special health care needs, financial stressors, unstable housing, mental health issues or addiction problems. Our job in public health is to connect families with the care and resources they need, invest in strategies that make the biggest impacts where we are uniquely positioned to do so, and develop programs and partnerships that help kids so they’re ready and able to learn.

Oral health
Oral health affects how you look, speak, eat, and socialize, as well as impacts your overall physical and mental health. Unfortunately, only 31 percent of those eligible for Apple Health dental coverage are actually using it. In 2015, we completed a report looking at oral health in youth and adults. In addition to identifying areas where there are a shortage of dentists, this data will be used to help prioritize efforts to ensure that all children and low-income families have access to dental care.

Safe sleep
The “back to sleep” campaign has been around for more than 20 years, and parents are taught the importance of safe sleep. But what if your family is homeless? Thanks to a recent partnership with the Everett Gospel Mission, our public health nurses have been working with families in the shelter and realized some of these babies had no crib. The problem was quickly remedied so now homeless parents can put safe sleep practices into action.

Child care outreach
There are over 17,000 kids in child care facilities throughout Snohomish County. Our team works directly with child care providers on illness prevention, disease investigation, health policy reviews and consulting on best practices. Through the Department of Early Learning’s continuing education program, we awarded more than 1600 credit hours of health and safety education through 12 different classes. We investigated cases of salmonella, Giardia, pertussis, E.coli, Shigella, and campylobacter in child cares and schools to prevent the spread of disease.

Helping families thrive
Whether it was in the clinic, out in the community or working with partners, our staff makes a lasting impact on the clients they serve. Some of the highlights from 2015 include:

• Serving 3,980 Medicaid-eligible pregnant and parenting moms in our First Steps program
• Making 64,966 referrals to medical, behavioral, social and financial resources through our Women, Infants and Children (WIC) program
• Funnelling almost $4M of WIC food dollars into the local economy
• Helping 60% of our clients to breastfeed for six months or longer
• Creating new programs customized to meet the needs of families at Therapeutic Health Services, Everett Gospel Mission and Cocoon House

Moving forward, we plan to expand community-based programs with partnerships like those mentioned above. This work will include a continued focus on improving nutrition and physical activity, increasing access of developmental screenings for all children, and preventing injuries (intentional and unintentional) and chronic illnesses.
Two out of three people in a 2010 CDC study reported having at least one adverse childhood experience (ACEs). Whether it’s witnessing violence, being abused, living in poverty, being homeless, or having a family member with a mental illness or addiction, these ACEs take an emotional toll on kids.

Frequent and/or prolonged exposure to toxic stress leads to lowered educational achievement, economic success and social success in adulthood. It also leads to poor physical and mental health, including increased risk of chronic diseases and addictions.

To help raise awareness about this important issue, our staff worked with local partners to host a number of screenings and workshops. Targeted at policy-makers, community leaders, health care providers and educators, the sessions featured “The Raising of America: Wounded Places” and “Paper Tigers,” two groundbreaking documentaries about trauma-informed care. These were so well-received that a number of school districts stepped up to have private screenings for staff, and host public events for students and families.
A young woman visited the happiest place on earth, only to become unknowingly infected with measles. She then flew to Washington, traveling through SeaTac Airport, then several places in King, Snohomish and Skagit Counties, and up to British Columbia. Here in Snohomish County, she visited a nursing home to see her grandparents, enjoyed dinner at a popular restaurant, then went to Swedish Edmonds Hospital once her symptoms started showing up. Unfortunately, it wasn’t until she got home to California that test results confirmed that she had measles. Due to its highly contagious nature, our Communicable Disease Surveillance and Response team mobilized in a matter of minutes of receiving the call. Over 100 hours were spent interviewing employees of the places she went, reviewing immunization records and opening up a clinic for testing. Of the 156 exposed, 45 were tested for immunity and 10 restaurant employees were restricted from returning to their jobs for up to 21 days as a precaution. The moral of the story: get vaccinated!
READY AT A MOMENT’S NOTICE

Our staff work hard to ensure that we are ready for any event that comes our way. In 2015, we were asked by the state to take on a large role within the Region 1 Healthcare Coalition (Whatcom, Skagit, San Juan, Island and Snohomish Counties). The coalition’s goal is to work with health care facilities to increase their ability to plan for, and respond to, disasters and emergencies. This is an exciting opportunity for us to do more comprehensive outreach and partnership-building with our health care partners across the region.

It takes a nimble and well–trained workforce to respond to emerging diseases. In 2015, our staff were involved with monitoring eight low–risk individuals who entered the United States from countries at the epicenter of the Ebola epidemic.

Our Medical Reserve Corps volunteers are active year-round. Whether it was staffing First Aid tents at 11 community events or helping with the wildfires in Eastern Washington, they’re working to help our communities become more resilient.

Safety kits were assembled and placed in all Health District vehicles and offices, so staff are prepared if an emergency arises for employees or customers.

Outreach worker Konstantin Setiaev witnessed a car burst into flames near the City of Snohomish. He was presented a community hero award by Fire Chief Ron Simmons and Mayor Karen Guzak for his quick–thinking and help putting out the fire before emergency crews arrived.
Thanks in large part to the staff in our Food Safety Program, you can enjoy your favorite meal while out on the town without having to worry about disease. This team protects you from food-related illness through plan reviews, regular inspections and foodborne-illness investigations. We’re responsible for working with the 2,715 restaurants, grocery stores, espresso stands, caterers and mobile food trucks around the county.

The Land Use Program is involved with the permitting and inspection of septic systems, small drinking water systems, and solid waste facilities. This includes ensuring septic systems are installed correctly and kept in good working condition, and an adequate and safe potable source of water is available to all proposed residences before construction. We also permit, inspect and ensure compliance of the solid waste handling facilities like composters and recyclers.

Schools, pools and complaint investigations are the cornerstone of our Safe Environments Program. We regulate pool water quality and safety features at parks, hotels, athletic clubs, apartment complexes, and schools. Our team also inspects every K-12 school in the county, public and private, every two years. We check for air quality, lighting levels, and general sanitation in every classroom. We also work to eliminate public health threats through the secure medicine disposal program, and respond to reports of solid waste and sewage problems.
Congratulations to our 2015 Food Safety Excellence Award recipients

Full Menu:
Shawn O’Donnell’s Restaurant in Everett

Fast Service:
Arby’s Roast Beef #6291 on Everett Mall Way

Limited Menu:
Buffalo Espresso II in Mill Creek

Large Grocery Chains:
Trader Joe’s on Everett Mall Way

Schools/Industrial/Institutions:
Mukilteo Elementary Kitchen

Temporary Food Service:
Big Dog’s Mobile in Monroe

Restaurant Chains:
Kentucky Fried Chicken on Evergreen Way in Everett

As the local economy rebounds and construction picks up, so does our plan review and inspection workload. For instance, the increasing number of apartments being built means more pools and spas to review and inspect. Here are some of the highlights from 2015:

- **Food Service Permits Issued**: 3,298
- **Food Service Inspections**: 4,204
- **Construction Site Plans Reviewed**: 1,094
- **Complaints Investigated**: 1,105
- **Septic Applications Processed**: 1,156
- **Pool/Spa Inspections**: 1,480
- **Food Service Permits Issued**: 3,298
- **Food Service Inspections**: 4,204

Chipotle Restaurants in Snohomish County impacted by the E.coli outbreak because we had corrected potential issues in advance.

Food booths at the Evergreen State Fair that were inspected at least twice during the 11-day fair.

Total pounds of unused medications collected in partnership with the Snohomish Regional Drug and Gang Task Force.

Public and private schools with kitchen permits and/or required safety inspections.

New septic systems reviewed and permitted.
OUR GREATEST ASSETS

In the face of increasing uncertainty, new and emerging concerns, and diminishing resources, our employees are true public health ambassadors. They care greatly about the health and well-being of every resident and visitor in Snohomish County, which shows in the work they do every day.

OUR PEOPLE
Just as our community is changing, so is our workforce. With employees born from 1945 to 1992, we currently have four generations represented and a fifth anticipated in the near future.

OUR COMMUNITY
The top five languages other than English spoken in Snohomish County are Spanish, Korean, Vietnamese, Chinese and Tagalog. We are working to ensure that our workforce is inclusive and representative of the people we serve. We currently have 19 employees on staff who speak most of these languages, plus several others.

OUR RESOURCES
We rank 34th out of 35 local health jurisdictions in Washington in terms of per capita public health funding. As the third largest county in the state, our residents deserve better funding. Our focus in the year ahead is to continue efforts to secure sustainable and dedicated funding needed to protect the health of our communities.
WHAT OUR FUTURE HOLDS

1. Securing funding for public health at the local and state levels
   We have seen a 22 percent decrease from our 2005 funding levels, yet the population has increased by 14 percent in the same 10-year period. We rely heavily on federal, state and county revenue to support public health services, but revenues have remained static, or in the case of local funding, continually declining. Stable funding will ensure that programs, services and partnerships remain strong and in place.

2. Transforming the delivery of public health services countywide
   In response to a growing and changing county population, declining revenues to support public health, and a larger health system transformation at the state and national level, we’re working to become more agile and innovative. These moves include streamlining processes and forming new partnerships with health care providers and nonprofits as we seek to provide foundational public health services.

3. Defining public health’s role in Snohomish County
   Moving forward, it’s imperative that we’re aligned—internally and externally—on what our role is with the issues facing Snohomish County. While direct one-on-one care will always be essential, many of these services are best provided by other agencies and organizations in the community.

4. Evaluating organizational and governance options
   Our initial charter was first crafted in 1959, with the most recent amendments made in 1997. We’re in the midst of an organizational assessment to determine how public health is best structured in Snohomish County. As part of this, as well as the exploration of new or expanding funding sources, it may be that a different governance structure could service the District’s need more effectively.

STATISTICS

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*Approximate totals due to incomplete record-keeping during that time period.
2015 Board of Health
Sam Low, City of Lake Stevens, Chair
Ken Klein, Snohomish County Council, Vice Chair

Suzie Ashworth (Granite Falls) ● Adrienne Fraley-Monillas (Edmonds) ● Linda Grafer (Mukilteo) ● Karen Guzak (Snohomish) ● John Joplin (Brier) ● Scott Murphy (Everett) ● Seaun Richards (Mountlake Terrace) ● Sid Roberts (Lynnwood) ● Terry Ryan (Snohomish County) ● Dave Somers (Snohomish County) ● Brian Sullivan (Snohomish County) ● Donna Wright (Marysville) ● Stephanie Wright (Snohomish County)