



Purpose



Mission and Vision

The **Kitsap Public Health District** prevents disease and protects and promotes the health of all persons in Kitsap County. We strive to make Kitsap County a healthy and safe place to live, learn, work, and play.

The programs and services of the Kitsap Public Health District directly and comprehensively address the Board of County Commissioner's mission to "protect and promote the safety, health and welfare of our citizens".



Legal Mandates

State law mandates local health jurisdictions to perform many functions. Chapter 70.05 RCW, Local Health Departments, Boards, Officers – Regulations, is the overriding law for public health, and requires each county to establish a local health board. Kitsap County has reestablished the Kitsap Public Health Board and Kitsap Public Health District through Chapter 9.52 of the County Code.

Section 70.05.060 of the Revised Code of Washington (R C W) requires our **Kitsap Public Health Board** to:

1. Enforce through the Health Officer or the Administrator public health statutes of the state.
2. Supervise the maintenance of all health and sanitary measures for the protection of the public health.
3. Enact local rules and regulations necessary to preserve, promote and improve the public health and provide for the enforcement thereof.
4. Provide for the control and prevention of any dangerous, contagious or infectious disease.
5. Provide for the prevention, control and abatement of nuisances detrimental to public health.
6. Make reports to the State Board of Health as the State Board of Health may require.
7. Establish fee schedules for issuing or renewing licenses or permits or for other services authorized by the law and the rules of the State Board of Health.



<p>Purpose</p>  <p>Continued</p>	<p>RCW 70.05.070 requires the Health Officer to do the following:</p> <ol style="list-style-type: none"> 1. <u>Enforce public health statutes</u> of the state and all local health rules, regulations and ordinances. 2. Act to <u>maintain health and sanitation</u>. 3. Control and prevent the spread of any <u>dangerous, contagious or infectious diseases</u>. 4. <u>Prevent, control or abate nuisances</u> detrimental to public health. 5. <u>Inform the public</u> as to the causes, nature, and prevention of disease and disability and the preservation, promotion and improvement of health. 6. Take measures necessary to <u>promote the public health, and to participate in the establishment of health educational or training activities</u> for staff and the community. 7. Inspect, as necessary, expansion or modification of existing <u>public water systems</u>, and the construction of new public water systems. 8. <u>Collect fees</u> established by the State Board of Health and the Kitsap Public Health Board for licenses or permits or other authorized fees. 9. <u>Attend all conferences</u> called by the Secretary of Health. <p>RCW 70.05.045 authorizes the Administrator to serve as executive secretary / administrative officer for the Health Board, and perform other administrative duties required of/by the Board. By Board direction, the Administrator is also the chief executive officer of the Health District.</p> <p>RCW's 70.05.130, 70.12.025, and 70.46.085 require the County to annually budget and appropriate a sum for public health work and to pay for all expenses incurred carrying out RCW 70.05.</p>
<p>Strategy</p> 	<p>The Health District delivers programs focused on five key strategies to make Kitsap County a safe and healthy place to live, learn, work, and play (adopted by the Health Board in our 2011-2021 Strategic Plan):</p> <ol style="list-style-type: none"> 1. We Prevent the Spread of Disease 2. We Work to Decrease Chronic Diseases and Their Impacts 3. We Prevent, and Protect the Public from, Contaminated Water, Food, Land, and Air 4. We Identify and Measure Health Problems and Track and Report Health Trends 5. We Create Policies that Protect Health and Environment and Promote Healthier Living <p><u>Our Organization and Programs</u></p> <p>The Health Board is comprised of the three Kitsap County commissioners and the mayors of the cities of Bremerton, Bainbridge Island, Port Orchard, and Poulsbo. The Health District operates throughout all of Kitsap County and the four cities.</p> <p>The Health District prevents disease and protects and promotes the health of all persons in Kitsap County through the following divisions and programs:</p>



Strategy



Continued

Community Health Division:

1. Communicable Disease Surveillance and Investigation
2. Infectious Disease Prevention
3. Assessment and Epidemiology
4. HIV/AIDS Medical Case Management
5. Tuberculosis Case Coordination
6. Nurse Family Partnership
7. Parent Child Health
8. Chronic Disease Prevention and Health Promotion
9. Marijuana and Tobacco Use Prevention
10. Kitsap Connect
11. Health Insurance Navigator

Environmental Health Division:

1. Drinking Water (Private Wells and Small Water Systems)
2. Food Service Safety
3. Onsite Sewage Systems
4. Water Pollution Identification and Correction
5. Solid and Hazardous Waste
6. School Health and Safety
7. Water Recreation (Pools, Spas, Swimming Beaches)
8. Recreational Shellfish

Administrative Services Division:

1. Administrative Services (Administration, Human Resources, Accounting and Finance, Public Information, Clerical Support, Contracting, Custodial Services, and Information Services)
2. Public Health Emergency Preparedness and Response

The coordination and execution of these strategies and programs are a unique service and responsibility of the local governmental public health system.

Guiding Principles

- Prevention:** We believe prevention is the most effective way to protect our community from disease and injury.
- Partnerships:** We work with others when collaboration will produce better and faster results.
- Effectiveness:** We make data-driven decisions and use science-based practices to produce the best possible outcomes.
- Equity:** We believe all Kitsap residents should have an equal opportunity to live healthy and safe lives.
- Quality:** We continuously improve the quality of our services and systems to better serve the community to which we are accountable.



Strategy



Continued

Performance Management and Continuous Quality Improvement

The Health District operates and delivers services through a Performance Management System to ensure linkage and coordination of our agency wide planning, performance monitoring, and continuous quality improvement efforts with our strategic plan. Performance management is overseen by the Administrator and a Performance Management Steering Committee that has representation from all three divisions of the Health District. The steering committee is currently updating our Performance Management System policy.

Continuous quality improvement is a cornerstone of our performance management system. The Health District has adopted the Lean Six Sigma method for quality improvement. A Quality Improvement Council has been established with representation from all three divisions to guide our improvement efforts.

One of the overarching goals of our quality improvement program is to have 100% of all agency staff complete White or Yellow Belt training, and 100% of all managers complete Yellow Belt Training. As time and budget resources allow, managers are encouraged to complete Green Belt training. **To date, 9% of all Health District staff have completed White Belt training and 88% of managers have completed Yellow Belt training. Five percent of staff have completed Green Belt Training.**

Over the last year, Quality Improvement Council members have provided training to staff for:

- Kanban Boards
- 5S (Sort, Set in order, Shine, Standardize, and Sustain)
- Customer Focus Service Delivery



Results



National Accreditation

In 2015, the Health District achieved national accreditation from the Public Health Accreditation Board (PHAB – see logo on Page 1)). PHAB measures a public health agency’s ability to meet a set of detailed performance standards which define a high-performing agency. The purpose of the five-year accreditation is to improve and protect the health of the public by advancing the quality and performance of the nation’s health departments. Accreditation reflects the efforts of the District to achieve the highest level of quality and performance in its work and services. Currently, only five local health jurisdictions in Washington State have demonstrated performance at this high level (Spokane in 2013, Kitsap in 2015, Tacoma-Pierce in 2016, Whatcom in 2016, and Benton-Franklin in 2016). Nationally, only 224 of 2,700 local public health jurisdictions and 26 state health departments (including Washington’s) have achieved accreditation.

Customer Service


Twice a year, the Health District conducts a week-long Customer Service Survey process at our front counter. All customers are encouraged to take the brief survey following the completion of their visit. The most recent customer service survey was conducted August 6 – 10, 2018. Out of 515 responses, we scored 93% Excellent, 5% Good, and 2% Average. There were no Fair or Poor Ratings.

Other Notable Results and Cost Savings

In addition to our quality and workload indicators (following), through our performance management, quality improvement, and customer service efforts, the following summarizes other notable quality or cost savings improvements/changes the Health District has completed over the past year:

1. **Improved/Easier Access to Restaurant Inspection Scores** – a direct link to inspection scores was added to our website’s main page, and a mobile device compatible map view display was developed and implemented to enable easier access to inspection scores for public “on the go”.
2. **Updated Environmental Health Databases and Developed/Implemented a New “Application Manager” to Link All Databases** – Databases for septic systems, drinking water systems, solid & hazardous waste, water quality, and food/pool facilities are now integrated through a common parcel format and linked with Kitsap County’s Parcel Database so that all pertinent permit-related information is obtainable through one application manager, saving time and improving application reviews.
3. **Analyzed and Updated Office 365 Subscriptions** – Revamped Microsoft Office 365 subscriptions based on level of need for each employee, saving \$1,800/year.
4. **Revamped and Rebid Copier Lease Contract** – Extended contract period from 3-years to 5-years saving \$5,450/year or \$27,350 over the term of the lease.



<p>Results</p>  <p>Continued</p>	<ol style="list-style-type: none"> 5. Added Facebook to Our Public Communication Toolbox – Created graphics and messaging compatible to Facebook and added to GovDelivery messaging, enabling us to reach over 43,200 people (more than Kitsap Sun circulation) during the Horseshoe Lake Swimming Beach Illness Outbreak (August 2018). 6. Improved Meningococcal Vaccination Rate among Teens County-Wide by 5% 7. Discontinued Blastfax Server and Infrastructure and Switched to Web-Based Fax Service – saving \$6,000/year. 8. Switched After-Hours Call Service
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Listed below are additional quality and workload indicators for the major Health District Programs:

1.A. QUALITY INDICATORS: Community Health Division

#	Quality Indicator	2019 Projected	2018 Projected	2017	2016	2015	2014
1	Percent of kindergarten children with complete immunizations.	90%	90%	89%	89%	89%	86%
2	Chlamydia rate per 100,000	450	430	418	375	363	360
3	Percent of notifiable condition cases (non-STD/TB) investigated within the time frame specified by WA State law.	100%	100%	100%	100%	100%	100%
4	Percent of civilian residents (age 18-64) with health care coverage.	91%	91%	91%	95%	94%	91%

#	Quality Indicator	2019 Projected	2018 Projected	2017	2016	2015	2014
1	Percent of civilian Medicaid-paid births with infant born at normal birth weight (greater than 5 ½ pounds).	93%	93%	93%	93%	94%	94%
2	Percent of civilian women reporting smoking during pregnancy.	11%	11%	11%	14%	10%	8%
3	Percent of civilian women starting prenatal care in the first trimester of pregnancy.	79%	78%	78%	80%	78%	76%
4	Percent of adults at a healthy weight (Body Mass Index (BMI) = 18.5-24.9).	38%	38%	NA	38%	37%	37%
5	Percent of youth (grade 8) at a healthy weight (BMI below 85 th percentile).	No Data	75%	No Data	74%	No Data	76%
6	Percent of adults who report currently smoking (in the past 30 days).	14%	14%	NA	12%	17%	14%
7	Percent of youth (grade 10) who report smoking in the past 30 days.	No Data	6%	No Data	6%	No Data	11%



1.B. QUALITY INDICATORS: Environmental Health Division

#	Quality Indicator	2019 Projected	2018 Projected	2017	2016	2015	2014
1	Percent of public water system samples meeting the bacteria standard.	94%	94%	98%	93%	93%	90%

#	Quality Indicator	2019 Projected	2018 Projected	2017	2016	2015	2014
1	Percent of alternative septic systems that meet WA State requirement for completed annual inspection.	99%	99%	99%	99%	99%	99%
2	Percent of documented onsite septic system failures with enforcement action initiated within two weeks.	100%	100%	100%	100%	100%	100%

#	Quality Indicator	2019 Projected	2018 Projected	2017	2016	2015	2014
1	Percent of routine food establishment inspections with two or more FDA "red" risk violations.	9%	9%	8%	7%	8%	10%
2	Percent of water recreation facility inspections with no critical "red" violations.	82%	82%	87%	82%	85%	91%

#	Quality Indicator	2019 Projected	2018 Projected	2017	2016	2015	2014
1	Percent of permitted solid waste handling facilities meeting standard.	100%	100%	97%	97%	97%	97%
2	Percent of active solid waste complaints resolved within the calendar year.	100%	100%	100%	97%	97%	96%

#	Quality Indicator	2019 Projected	2018 Projected	2017	2016	2015	2014
1	Percent of fresh water streams meeting standards for acceptable levels of fecal coliform bacteria.	59%	59%	32%	56%	37%	55%
2	Percent of Kitsap shoreline miles classified as "open" for shellfish harvesting.	91%	91%	91%	85%	85%	85%



2.A. WORKLOAD INDICATORS: Community Health Division

#	Workload Indicator	2019 Projected	2018 Projected	2017	2016	2015	2014
1	Number of childhood vaccines administered. ^a	65,000	63,000	65,000	65,000	65,000	61,464
2	Number of birth and death certificates issued.	12,500	12,500	12,800	11,748	12,950	13,192
3	Number of needles exchanged in the syringe exchange program.	2,200,000	2,000,000	1,853,639	1,294,619	1,076,367	914,265
4	Number of notifiable conditions reported and managed.	2,220	2,220	2,180	1,916	1,958	1,730

^a Through Vaccines for Children (VFC) program; estimated numbers for 2016 – 2018.

#	Workload Indicator	2019 Projected	2018 Projected	2017	2016	2015	2014
1	Number of community partner agencies engaged in the coordinated healthy eating and active living initiatives.	12	12 ^a	12	21	20	19
2	Number of parent and child health nurse visits (Nurse Family Partnership and Maternity Support Services) completed.	1,350	1,276 ^b	1,326	1,469	1,235	1,171
3	Number of children with special health care needs and their families who received nursing case management.	40	40	46	30	48	55
4	Number of community members engaged in the Community Health Improvement Process.	100	80	67	85	79	79

^a = Shift in focus from education-only to program development; new number represents partners in HEAL Coalition.

^b = Reduced FTE's from 6.0 to 4.0 due to budget restrictions; less staff = less work completed.

2.B. WORKLOAD INDICATORS: Environmental Health Division

#	Workload Indicator	2019 Projected	2018 Projected	2017	2016	2015	2014
1	Number of Building Site Applications reviewed for water adequacy.	750	700	810	752	569	466

#	Workload Indicator	2019 Projected	2018 Projected	2017	2016	2015	2014
1	Number of new and repair onsite sewage system permits issued.	600	536	659	530	518	453
2	Number of onsite sewage system inspections for property sales completed.	2,400	2,480	2,378	2,396	2,150	1,851



2.B. WORKLOAD INDICATORS: Environmental Health Division (Continued)

#	Workload Indicator	2019 Projected	2018 Projected	2017	2016	2015	2014
1	Number of permitted food establishments, temporary food events, and water recreational facilities.	1,850	1,840	1,823	1,828	1,791	1,846
2	Number of completed inspections for food establishments, temporary food events, and water recreational facilities.	3,870	3,800	3,770	3,317	3,552	2,801
3	Number of completed complaint investigations for food establishments, temporary food events, and water recreation facilities.	224	224	197	206	190	97
#	Workload Indicator	2019 Projected	2018 Projected	2017	2016	2015	2014
1	Number of solid waste handling facilities permitted.	36	36	35	33	33	33
2	Number of solid waste complaints investigated.	700	700	495	555	555	572
#	Workload Indicator	2019 Projected	2018 Projected	2017	2016	2015	2014
1	Number of property inspections completed to identify and correct sources of water pollution.	900	850	1072	960	684	777
2	Number of water samples collected and analyzed for pollution identification and correction.	6000	6,500	6046	8,100	6,473	6,425

2019 Budget Request of Kitsap County

The Health District’s 2019 budget request of Kitsap County is **\$1,478,420**, which represents the sum of the following items:

- General Public Health Flex Funds*: \$1,438,644
- Norm Dicks GC Mortgage Assistance**: \$ 39,776

Notes:

* Includes \$100,000 for Tuberculosis response and case management per [RCW 70.30.055](#).

** Pursuant to Kitsap Public Health Board Resolution 2016-10, Affirming Kitsap Public Health Board Commitment for Paying a Portion of the Kitsap Public Health District’s Norm Dicks Government Center Debt Service Costs.



A comparison of the approved 2018 County funding to the Health District to the 2019 budget request is shown below in Table 1. Modest funding increases are also being requested of the cities.

Table 1
Comparison of 2018 Funding to 2019 Budget Request

Funding Category	2018 Funding from County	2019 Funding Request of County	Difference
General Public Health & Tuberculosis Control	\$1,399,533	\$1,438,644	\$39,111
Norm Dicks Government Center Mortgage ^a	\$40,655	\$39,776	(\$879)
TOTALS	\$1,440,188	\$1,478,420	\$38,232

Summary and Comparison of Kitsap County Funding to Health District (2009-2018)

A summary of the amount of annual funding from the County to the Health is shown in Table 2, with a breakdown of how these funds were/are used for the 2009 – 2018 time period, along with our 2019 budget request.

Table 2
Summary and Comparison of Kitsap County Funding to Health District (In Dollars)
2009 – 2018, and 2019 Funding Request

Use	2009a	2010a	2011a	2012a	2013a	2014a	2015a	2016a	2017a	2018b	2019r
General PH	1,293,813	1,191,753	1,108,393	1,108,393	1,199,353	1,199,353	1,232,835	1,259,486	1,298,998	1,299,655	1,338,644
TB	116,613	107,648	99,868	99,868	99,868	99,867	99,868	99,868	99,868	99,868	100,000
NDGC Mort.	49,742	54,275	54,290	54,290	54,290	49,710	49,878	42,113	41,322	40,655	39,776
Total	1,460,168	1,353,676	1,262,551	1,262,551	1,353,511	1,348,930	1,382,581	1,401,467	1,440,188	1,440,178	1,478,420

a = Actuals; b = Budget; c = Request

County funding of the Health District for the 10-year period of 2009 – 2018 by Health District use shows:

- General Public Health Flexible Funding has increased by less than a half percent (0.45%)
- NDGC Mortgage Assistance has decreased by over 18%
- Total funding has decreased by 1.37%

Tuberculosis control funding is generally set at about \$100,000/year and is an annual allocation out of the General Public Health funding from the County. The 2019 NDGC mortgage assistance is \$10,000 lower from 2009 as the result of a mortgage refinance to a lower rate in 2014 and the results of amortization of the mortgage over time (the Health District is about half-way through its amortization schedule which will be completed in 2034).



Summary of Overall Agency Budget for Health District

A summary and comparison of the Health District’s approved 2018 budget versus draft 2019 budget is shown in Table 3; please note that draft 2019 budget shown below does not include any increase in funding from the County or cities at this time (2019 funding shown is the same as 2018).

**Table 3
2018 Budget vs. Draft 2019 Budget
Kitsap Public Health District**

Revenue	2018	2019	Change
Contracts & Grants	\$ 3,394,915	\$ 2,895,058	\$ (499,857)
Service Fees	\$ 6,087,855	\$ 6,836,225	\$ 748,370
State General PH Flex	\$ 997,476	\$ 997,476	\$ -
County General PH Flex	\$ 1,399,523	\$ 1,399,523	\$ -
Cities General PH Flex	\$ 110,587	\$ 110,587	\$ -
NDGC Mortgage County	\$ 40,665	\$ 39,776	\$ (889)
NDGC Mortgage Cities	\$ 20,595	\$ 20,494	\$ (101)
Miscellaneous	\$ 25,900	\$ 45,500	\$ 19,600
Total Change in Fund Balance	\$ 216,991	\$ 288,404	\$ 71,413
Total Revenues & Other Funds	\$ 12,294,507	\$ 12,633,043	\$ 338,536
Expenditure	2018	2019	Change
Salaries & Benefits	\$ 9,398,591	\$ 10,063,041	\$ 664,450
Supplies	\$ 261,940	\$ 216,812	\$ (45,128)
Professional Services	\$ 1,095,144	\$ 716,863	\$ (378,281)
NDGC Debt Principal	\$ 165,000	\$ 165,000	\$ -
NDGC Debt Interest	\$ 146,250	\$ 136,350	\$ (9,900)
NDGC O&M	\$ 326,113	\$ 341,401	\$ 15,288
Other	\$ 901,469	\$ 993,576	\$ 92,107
Total Expenses	\$ 12,294,507	\$ 12,633,043	\$ 338,536
FTE's	100.75	101.28	0.53

Also note that projected increases for salaries and benefits in 2019 are draft placeholders currently as this data is not yet available. The Health District’s current bargaining agreement for represented staff expires at the end of 2018, and contract negotiations have yet to begin. See Figures 1 and 2 for a summary of revenues and expenditures.

In summary, County General Public Health funding is 11% of total Health District revenues, and salaries and benefits are 79% of total Health District expenses.



Figure 1
Major Revenue Sources & Percentage of Total Revenues
Kitsap Public Health District – Draft 2019 Budget

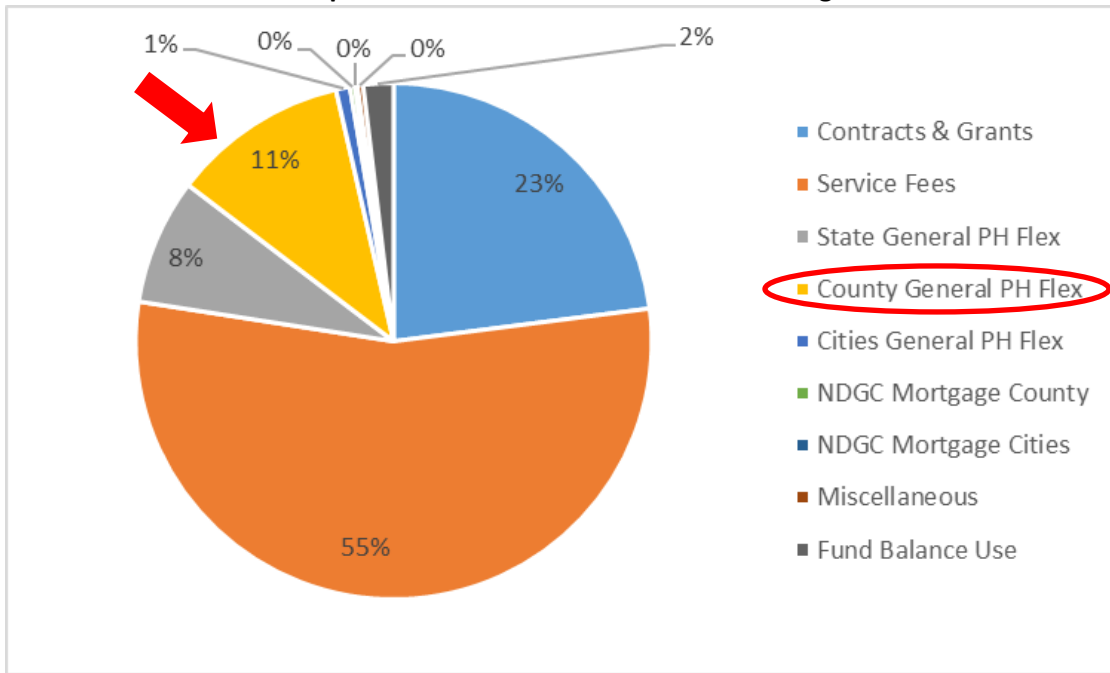
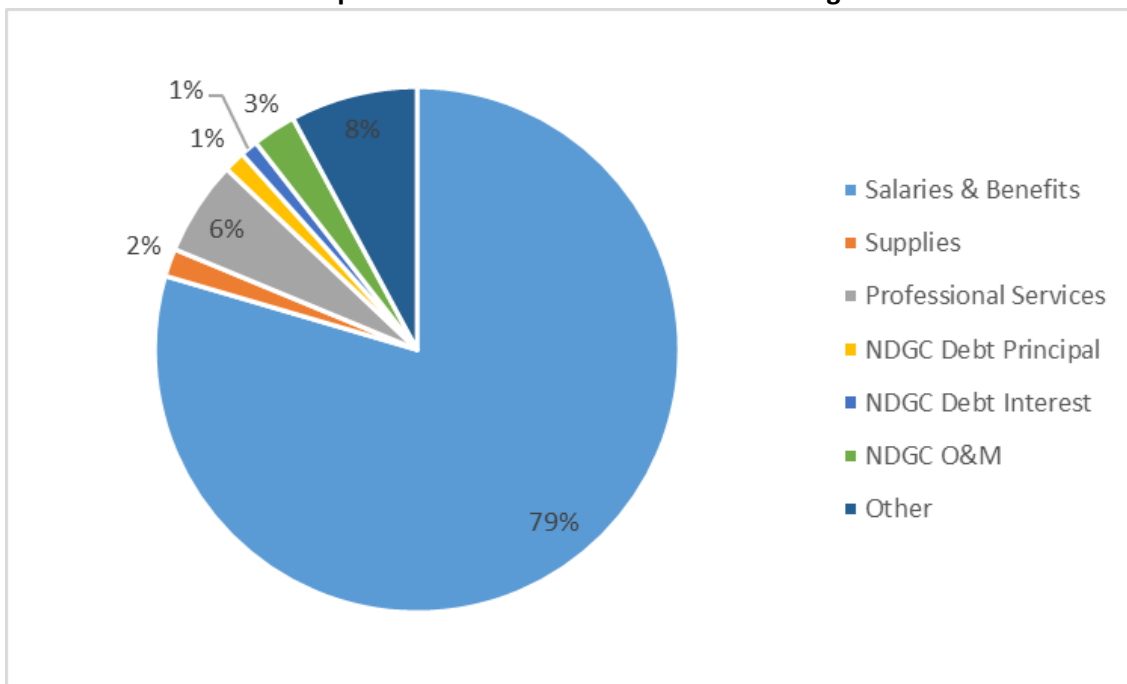


Figure 2
Major Expenditure Items & Percentage of Total Expenditures
Kitsap Public Health District – Draft 2019 Budget





A summary and comparison of annual Health District budgets and staffing is shown below in Table 4.

Table 4
Summary and Comparison of Annual Budgets and Staffing (FTEs)
2014 – 2019

	DRAFT 2019	2018 Budget	2017 Actual	2016 Actual	2015 Actual	2014 Actual
Revenues	12,344,639	12,077,516	11,225,956	13,354,533	10,311,665	10,434,056
Expenditures	12,633,043	12,294,507	11,379,344	12,929,472	10,816,122	10,072,809
Difference	(288,404)	(216,991)	(153,388)	425,061	(504,457)	361,247
# of FTEs	101.28	100.75	101.77	100.16	95.34	93.04