

**SKAMANIA COUNTY BOARD OF HEALTH**

Agenda for June 13<sup>th</sup>, 2023

1:30 PM

Skamania County Courthouse  
240 NW Vancouver Avenue, Room 18  
Stevenson, WA 98648

**Board of Health Meetings are open to the public in person or by ZOOM using the numbers listed below.**

**1 346 248 7799 US**                      1 312 626 6799 US  
1 646 558 8656 US                      1 669 900 9128 US  
1 253 215 8782 US  
1 301 715 8592 US

**Meeting ID:** 889 0632 1210

**Join Zoom Meeting** - <https://us02web.zoom.us/j/88906321210>

**If you wish written comments to be listed on the agenda, they need to be submitted to the Clerk of the Board by noon on Wednesday preceding the Tuesday/Wednesday meeting, otherwise they will be held for the following Tuesday/Wednesday. [sackos@co.skamania.wa.us](mailto:sackos@co.skamania.wa.us) When a holiday falls on Monday, the regular meeting is held on Wednesday of that week.**

**Tuesday, June 13<sup>th</sup>, 2023**

1:30 PM                      Call to Order

Public Comment (3 minutes)

Consent Agenda - Items will be considered and approved on a single motion. Any Commissioner may, by request, remove an item from the agenda prior to approval.

1. Minutes for meeting May 9<sup>th</sup>, 2023.
2. Ratification of Interlocal agreement with Skamania County Public Hospital District for AED program.
3. Ratification of Clark County contract for FPHS Services.

Community Health Report – Tamara Cissell, Community Health Director

Health Officer Report – Dr. Steven Krager, Deputy Health Officer

Environmental Health Report – David Waymire, Community Development Director

Adjourn

**MINUTES OF SKAMANIA COUNTY BOARD OF HEALTH MEETING**

May 9<sup>th</sup>, 2023

Skamania County Courthouse  
240 NW Vancouver Avenue, Room 18  
Stevenson, WA 98648

The meeting was called to order at 1:32 p.m. on May 9<sup>th</sup>, 2023, at the Skamania County Courthouse, 1<sup>st</sup> Floor Meeting Room, 240 NW Vancouver Avenue in Stevenson, with Board of Health Elected Representatives Commissioners Asa Leckie and T.W. Lannen, Chair, present and appointed Board of Health members, Dr. Scott Yerrick, Katie Walker, and Ann Lueders present. Commissioner Richard Mahar was absent.

There was no public comment.

Ann Lueders moved, seconded by Asa Leckie and the motion carried unanimously to approve the Consent Agenda as follows:

- 1. Minutes for meeting April 11<sup>th</sup>, 2023.

Tamara Cissell, Community Health Director reported on inspection site visit related to vaccine program, field training of Stephanie, workshop scheduled, COVID -19 vaccine and employer responsibilities regarding COVID.

David Waymire, Community Development Director, reported on Environmental Health tech- Introduction of Stephanie.

Dr. Steven Krager, Deputy Health Officer reported on wildfire smoke and public health N95 or N100+ masks.

The meeting adjourned at 2:11 p.m.

**SKAMANIA COUNTY BOARD OF HEALTH**

Attest:

\_\_\_\_\_  
T.W. Lannen, Chair

\_\_\_\_\_  
Richard Mahar, Commissioner

\_\_\_\_\_  
Lisa Sackos, Clerk of the Board of Health


\_\_\_\_\_  
Asa Leckie, Commissioner

\_\_\_\_\_  
Scott Yerrick, Representative (Non-Elected)

\_\_\_\_\_  
Katie Walker, Representative (Non-Elected)

\_\_\_\_\_  
Ann Lueders, Representative (Non-Elected)

**COMMISSIONER'S AGENDA ITEM COMMENTARY**

|                                |   |   |
|--------------------------------|---|---|
| <b><u>SUBMITTED BY</u></b>     | Community Health<br>Department                        | Signature  |
| <b><u>AGENDA DATE</u></b>      | BOCC, 5/16/2023 RATIFY BOH 6/13/2023                  |   |
| <b><u>SUBJECT</u></b>          | <del>Solutions Yes Lease</del> <b>Inter local AED</b> |   |
| <b><u>ACTION REQUESTED</u></b> | Signature   |   |

**SUMMARY/BACKGROUND**

Interlocal Agreement with Skamania County Public Hospital District to manage and maintain Skamania County Community AED Program.

**FISCAL IMPACT**

EXPENSE CONTRACT - \$18,000 over 4 years

**RECOMMENDATION**

Sign

**LIST ATTACHMENTS**

- Face Sheet
- Interlocal
- Attachment A - Budget



**INTERLOCAL AGREEMENT FOR MANAGEMENT AND MAINTENANCE OF THE  
SKAMANIA COUNTY COMMUNITY AED PROGRAM**

THIS AGREEMENT is entered into between the Skamania County Public Hospital District (District) and Skamania County (County) for the purposes hereinafter mentioned.

**Witness:** It is hereby covenanted and agreed as follows:

The County desires to contract with the District to provide professional assistance related to the provision of management and maintenance of a Community AED Program, and;

The District, by and through, its service and licensed medical providers, can and is capable of providing these services, and;

The District is willing to provide to the County, on request and within reason, resources to provide these services, and;

Such contracts are authorized by the provisions of RCW 39.34.010 et seq.,

In consideration of the terms and conditions set forth below it is agreed as follows:

1. District shall provide operational staff to perform maintenance and testing of AEDs deployed in the community program, and;
2. Maintenance and testing shall occur not less than bi-monthly, and again following use, when contacted by a/the entity in control of the AED, and;
3. District shall provide for the record keeping associated with maintenance and testing, and;
4. Compensation paid for the services provided by the District shall be based on the allocated budget and fee schedule in Attachment "A" and may be amended due to unknown rate increases, or decreases. Payment shall be made not less than once per calendar quarter upon County's receipt of an invoice from District. Payment by the County will be due within thirty calendar (30) days of the receipt of the invoice.
5. Requests and reports between the County and the District shall be communicated between the Skamania County Community Health Deputy Director and Superintendent of Skamania County Public Hospital District, or their designees at their respective addresses:

To District:  
Skamania EMS  
PO Box 338  
Stevenson, WA 98648

To Skamania County:  
Skamania County Community Health  
PO Box 790  
Stevenson, WA 98648

6. This agreement shall take effect upon signature by the last party signing the same and shall be in full force for the period of April 1, 2023 through June 30, 2026, unless terminated by one of the parties. This agreement is subject to termination at the discretion of either party upon sixty (60) days written notice, mailed by certified mail or delivered in person, by either party to the other. Termination shall not release any party from liability or obligation with respect to any matter arising under this Agreement occurring prior to the effective date of said termination.
7. In agreeing to provide these services to the County, District makes no guarantee or warranty as to the services to be provided.
  - a. County agrees to indemnify, hold harmless, and defend the District, its agents and employees, from the against any and all claims, losses, or actions for any sort, including reasonable attorney's fees and costs, that are caused by, occasioned by, or arise from any negligent act, error or omissions of the emergency medical services providers and elected and appointed officials, officers, agents, or employees acting pursuant to the County's direction, while the emergency medical providers are performing services for the County.
  - b. Both parties further agree, and have specifically negotiated, to waive their immunity under the State Industrial Insurance Act (RCW Title 51) to indemnify and hold each other harmless from any claims made against their respective employees, agents, contractors, subcontractors or other representatives.
8. Each party shall maintain appropriate liability insurance or self-insured coverage to cover potential liabilities arising from this Agreement. Said insurance or self-insured coverage shall have limits of at least \$1,000,000 per occurrence and \$1,000,000 per occurrence/aggregate for property damage.
- ~~9. In accordance with the HIPAA Security Rules, the District is required to comply with federal and state regulations related to the security of their technology. Both the County and the District agree to implement and uphold the Business Associate Agreement, set forth in "Attachment B", and by this reference incorporated herein.~~
10. In the event of invalidity or irresolvable ambiguity of any provision of this contract, the remaining provisions shall nevertheless continue to be valid and enforceable.
11. No changes or modifications to this contract shall be valid or binding upon either party unless such changes/modifications be in writing and executed by both parties.
12. If any suit or action is filed by any party to enforce or interpret a provision of this contract, or otherwise with respect to the subject matter of this contract, each party shall bear its own costs and expenses, including attorney fees.
13. This contract is the entire agreement between the parties and supersedes all previous agreements or understandings between them.

14. This contract shall be governed by and construed under the laws of the State of Washington, and any action brought to enforce the terms of this contract shall be brought in a court of competent jurisdiction located in Skamania County.
15. Copies of this contract shall be filed with Skamania County through the Skamania County Auditor.
16. Intergovernmental Agreement Recitals. This is an interlocal agreement and pursuant to RCW Ch 39.34 the parties make the following representations:
  - a. Duration: see Section 6.
  - b. Organization: no new entity will be created to administer this agreement.
  - c. Purpose: see Recitals.
  - d. Manner of Financing: the District will finance this agreement through their regular budgetary process.
  - e. Termination of Agreement: see above Section 6.
  - f. Other: none.
  - g. Selection of Administrator: Skamania County EMS Superintendent Ann Lueders shall be the Administrator for this Interlocal Agreement.
  - h. No real or personal property shall be acquired in connection with this Agreement.

In Witness Whereof, the parties hereto have hereunto set their hands and seals the day and year first above written.

BOARD OF COMMISSIONERS  
SKAMANIA COUNTY  
PUBLIC HOSPITAL DISTRICT

*John P. Stone*  
Chair

*Angie Jeltis*  
Commissioner

*Robert Fair*  
Commissioner

*D. Swadlow*  
Superintendent

BOARD OF COMMISSIONERS  
SKAMANIA COUNTY

*J. M. Lannan*  
Chair

*[Signature]*  
Commissioner

*[Signature]*  
Commissioner



Attest:

*[Signature]*  
Clerk of the Board

APPROVED AS TO FORM ONLY

*[Signature]*  
Prosecuting Attorney



## ATTACHMENT A

### Personnel

The following hourly rates, per provider, apply to the provision of professional services related to the Community AED Program, provided by the District to the County. Charges are billed in thirty-minute increments with a minimum of one (1) hour billed per onsite day of work:

|                     |         |
|---------------------|---------|
| Paramedic Rate      | \$52.72 |
| EMT Rate            | \$40.64 |
| Administration Rate | \$38.15 |

Rates listed include fringe benefits.

Without further amendment to this agreement, the rates described herein may be adjusted if or when a rate adjustment to the wages or fringe benefits payable to an employee of the District are amended by order of the Board of Commissioners for the Skamania County Public Hospital District. Any such adjustment must be provided in writing to the County and shall take effect not less than thirty (30) days following such notice.

### Supplies

All supplies purchased to facilitate AED maintenance and program administration will be charged at cost.

### Budget

|                                    |         |
|------------------------------------|---------|
| Program cycle ending June 30, 2023 | \$6,000 |
| Program cycle ending June 30, 2024 | \$4,000 |
| Program cycle ending June 30, 2025 | \$4,000 |
| Program cycle ending June 30, 2026 | \$4,000 |

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 2023.

SKAMANIA COUNTY BOARD OF HEALTH

Attest:

\_\_\_\_\_  
T.W. Lannen, Chair

\_\_\_\_\_  
Richard Mahar, Commissioner

\_\_\_\_\_  
Lisa Sackos, Clerk of the Board of Health

\_\_\_\_\_  
Asa Leckie, Commissioner


\_\_\_\_\_  
Scott Yerrick, Representative (Non-Elected)

\_\_\_\_\_  
Katie Walker, Representative (Non-Elected)

\_\_\_\_\_  
Ann Lueders, Representative (Non-Elected)

\_\_\_\_\_  
Adam Kick,  
Skamania County Prosecuting Attorney

**COMMISSIONER'S AGENDA ITEM COMMENTARY**

|                                |   |   |
|--------------------------------|---|---|
| <b><u>SUBMITTED BY</u></b>     | Community Health<br>Department              | Signature  |
| <b><u>AGENDA DATE</u></b>      | BOCC 5/31/2023 <b>RATIFY BOH, 6/13/2023</b> |   |
| <b><u>SUBJECT</u></b>          | Clark County contract for FPHS Services     |   |
| <b><u>ACTION REQUESTED</u></b> | BOH Signature                               |   |

**SUMMARY/BACKGROUND**

**Amends Contract with Clark County Public Health for Communicable Disease Prevention & Control and Healthy Communities/Chronic Disease Prevention services to extend date and add language for Food Establishment training.**

**FISCAL IMPACT**

\$174,685 No Change

**RECOMMENDATION**

Sign Contract at the next BOCC meeting and ratify at 6/13/2023 BOH meeting.

**LIST ATTACHMENTS**

Face Sheet  
Contract

COUNTY FACE SHEET FOR CONTRACTS/LEASES/AGREEMENTS

1. Contract Number \_\_\_\_\_

2. Contract Status: (Check appropriate box)  Original  Renewal  Amendment #1

3. Contractor Information: Contractor: Clark County Public Health  
Contact: Holly Barnfather  
Title: Grants and Contracts Management Analyst  
Address: PO Box 9825  
Address: Vancouver, WA 98666  
Phone: 564-397-8226  
Email: cntyhealthgrantcontract@clark.wa.gov

4. Brief description of purpose of the contract and County’s contracted duties:  
**Amends Contract with Clark County Public Health for Communicable Disease Prevention & Control and Healthy Communities/Chronic Disease Prevention services to extend date and add language for Food Establishment training.**

5. Term of Contract: From: November 1, 2021 To: October 31, 2023

6. Contract Award Process: (Check appropriate box)  
General Purchase of materials, equipment or supplies - RCW 36.32.245 & 39.04.190

- Exempt (Purchase is \$2,500 or less upon order of the Board of Commissioners)
- Informal Bid Process (Formal Quotes between \$2,500 and \$25,000)
- Formal Sealed Bid Process (Purchase is over \$25,000)
- This contract was awarded under RCW 39.29 or Skamania County Code \_\_\_\_\_. Please provide a summary of the competitive process by which this contract was awarded or the exemption and why it applies. *Single source contractor for Public Health services*  
Public Works Construction & Improvements Projects – RCW 36.32.250 & 39.04.155 (Public Works, B&G, Capital Improvements Only)
- Small Works Roster (PW projects up to \$200,000)
- Exempt (PW projects less than \$10,000 upon order of the Board of Commissioners)

7. Original Contract Amount: \$ 174,685 Source: PH Contracts  
Future Budget Funds Committed: \$ Source: PH Contracts  
TOTAL FUNDS COMMITTED: \$ 174,685

8. County Contact Person: Name: Allen Esaacson  
Title: Data & Finance Manager

9. Department Approval: Allen Esaacson  
Department Head or Elected Official Signature

Special Comments:  
Please email a signed pdf to Holly at cntyhealthgrantcontract@clark.wa.gov

*Emailed Holly & cc'd Allen 6-01-2023*

**AMENDMENT ONE  
HDC.1791**

between

**CLARK COUNTY**

P.O. Box 9825, Vancouver, WA 98666

and

**SKAMANIA COUNTY**

P.O. Box 790, Stevenson, WA 98648

Project: Skamania County FPHS Services  
 Service Description: Communicable Disease Prevention & Control and Healthy Communities/Chronic Disease Prevention FPHS services to Skamania County.  
 Contract Name: CCPH Skamania County FPHS Interlocal HDC.1791  
 Contract Period: July 1, 2022 – ~~June 30, 2023~~ October 31, 2023  
 Total Contract Amount: \$174,685

| Clark Contacts           |  |  |
|--------------------------|--|--|
| Program                  | Fiscal   | Contract   |
| See Exhibit A, Section 3 | Josh Gossage<br>564.397.8102<br><a href="mailto:Josh.Gossage@clark.wa.gov">Josh.Gossage@clark.wa.gov</a> | Holly Barnfather<br>360.949.6965<br><a href="mailto:GCT@clark.wa.gov">GCT@clark.wa.gov</a> |

| Agency Contacts  |  |  |
|--|--|--|
| Program  | Fiscal   | Contract   |
| Tamara Cissell<br>509.427.3850<br><a href="mailto:tamarac@co.skamania.wa.us">tamarac@co.skamania.wa.us</a> | Allen Isaacson<br>509.427.3856<br><a href="mailto:allene@co.skamania.wa.us">allene@co.skamania.wa.us</a> | Allen Isaacson<br>509.427.3856<br><a href="mailto:allene@co.skamania.wa.us">allene@co.skamania.wa.us</a> |

This contract for governmental services, where both parties are public agencies, pursuant to RCW 39.34.080 is entered into between Clark County, hereinafter referred to as "Clark," and Skamania County, hereinafter referred to as "Agency." Clark and Agency agree to all terms and conditions, exhibits, and requirements of this contract.

**SKAMANIA COUNTY BOARD  
BOARD OF HEALTH:**

J. W. Lannon 5/31/2023  
 Commissioner Date

[Signature] 5/31/23  
 Commissioner Date

Absent 5/31/23  
 Commissioner Date

ATTEST:

[Signature]  
 Clerk of the Board

**CLARK COUNTY:**

Kathleen Otto, County Manager Date

APPROVED AS TO FORM ONLY:

Amanda Migchelbrink Date  
 Deputy Prosecuting Attorney

[Signature] 5/31/23  
 Adam Kick Date  
 Skamania County Prosecuting Attorney

## CONTRACT HISTORY

| Contract Term   | Action Amount | Total Contract Amount |
|---|---------------|-----------------------|
| Base Contract<br>Period: July 1, 2022 – June 30, 2023   | \$174,685     | \$174,685             |
| Amendment #1<br>Period: July 1, 2022 – October 31, 2023 | \$000         | \$174,685             |

### 1. MODIFICATIONS

- 1.1. The Statement of Work included in the original contract as Exhibit A, is hereby replaced in its entirety with the revised Statement of Work included as Exhibit A of this modification.
- 1.2. The Budget Summary included in the original contract as Exhibit B, is hereby replaced in its entirety with the revised Budget Summary included as Exhibit B of this modification.
- 1.3. The compensation included in the original contract in Section 3, Compensation, is hereby replaced in its entirety with the following:
  - 1.3.1. Clark will submit an invoice to Agency each quarter. The invoice will include:
    - 1.3.1.1. FPHS support services for actual costs incurred, which includes but is not limited to; salaries, benefits, services, training, supplies, travel/mileage, and indirect expenses (currently 28.4%).
    - 1.3.1.2. Environmental Public Health food establishment and foodborne illness training for a monthly fee of \$1,734.
  - 1.3.2. Agency shall pay Clark for performing said services upon receipt of an invoice. The parties mutually agree that in no event may the amount billing exceed \$174,685 without prior written approval.
- 1.4. All other terms and conditions of the original contract, as amended, remain the same.

### 2. ENTIRE CONTRACT

This modification incorporates the original Contract and any subsequent modifications by reference. The parties agree that the original Contract, subsequent modifications, and this modification are the complete expression of the terms hereto and any oral representations or understanding not incorporated herein are excluded. Further, unless allowed elsewhere in the Contract, any modifications of this Contract shall be in writing and signed by both parties. Failure to comply with any of the provisions stated herein shall constitute a material breach of contract and cause for termination. Both parties recognize that time is of the essence in the performance of the provisions of this modified Contract.

## EXHIBIT A STATEMENT OF WORK

### 1. Background/Overview

Clark County Public Health to assist in supporting additional Public Health staff which includes the following: Epidemiologist, Public Health Nurse, Program Coordinator, and Office Assistant. These positions will support Communicable Disease Prevention & Control and Chronic Disease Prevention services.

### 2. Scope of Work

#### 2.1. Communicable Disease Prevention & Control Services

##### 2.1.1. Communicable Disease Investigations (general CD, STD, COVID-19)

###### 2.1.1.1. General CD investigations.

- 2.1.1.1.1. Respond to provider disease-specific questions.
- 2.1.1.1.2. Conduct case and contact investigations as applicable.
- 2.1.1.1.3. Provide control measure recommendations to facilities where exposure occurred.
- 2.1.1.1.4. Conduct outbreak investigations and response follow-up.
- 2.1.1.1.5. Conduct facility investigations (including schools, businesses, and other congregate settings as appropriate).

###### 2.1.1.2. STI investigations (GC, CT, Syphilis, and HIV, surveillance only for herpes).

- 2.1.1.2.1. Respond to provider disease-specific questions.
- 2.1.1.2.2. Conduct case and contact investigations as applicable.
- 2.1.1.2.3. Conduct syphilis &/or HIV field testing.

###### 2.1.1.3. COVID-19 facility investigations.

- 2.1.1.3.1. Respond to COVID-specific questions.
- 2.1.1.3.2. Conduct facility investigations (schools, businesses, and other entities as appropriate).

###### 2.1.1.4. Operational support.

- 2.1.1.4.1. Review and update CD-related policies/procedures/protocols, including foodborne and waterborne illness investigation processes, in coordination with Skamania staff.
- 2.1.1.4.2. Assist with developing and implementing school STI/CD outreach and education.

##### 2.1.2. TB Case Management

- 2.1.2.1. Respond to provider questions.
- 2.1.2.2. Support suspect case evaluation including testing as needed.
- 2.1.2.3. Provide case management services for all active cases of TB disease:
  - 2.1.2.3.1. Electronic daily observed therapy (eDOT)/ daily observed therapy (DOT).
  - 2.1.2.3.2. Provide medications.

2.1.2.4. Conduct contact investigations for infectious cases.

### **2.1.3. Illness Complaint Follow-up & Outbreak Investigation**

2.1.3.1. Conduct illness-compliant interviews.

2.1.3.2. Provide recommendations to Food or Water Safety teams on the need for an Environmental Assessment or recommendation for a prioritized inspection. Coordinate with EPH division(s) as appropriate.

2.1.3.3. Provide outbreak investigation support and epidemiology services.

### **2.1.4. Epidemiology Support**

2.1.4.1. State surveillance & investigation-related systems management and data stewards (may include WDRS, PHIMS, and other data systems).

2.1.4.2. Routine data audits and data clean-up.

2.1.4.3. Routine and ad hoc epidemiology product generation.

2.1.4.4. Outbreak data management support.

## **2.2. Healthy Communities**

### **2.2.1. Health Assessment and Evaluation Services**

2.2.1.1. Program Coordinator will work with regional stakeholders to provide the following services:

2.2.1.1.1. Conduct regular, comprehensive community health assessments.

2.2.1.1.2. Identify health priorities based on information collected from the CHA, including analysis of health disparities, health inequities, and the social determinants of health.

2.2.1.1.3. Facilitate and participate in the collaborative development of a Community Health Improvement Plan (CHIP), an implementation cycle that devises, implements, and evaluates the impact of health improvement strategies for priority health issues identified in the CHA.

## **2.3. Environmental Public Health**

### **2.3.1. Food Establishment Inspection Training**

2.3.1.1. Provide food establishment inspection training to Skamania County Environmental Health Specialist.

2.3.1.1.1. Discuss various inspection types (routine, educational, follow-up, and complaints)

2.3.1.1.2. Review the importance for conducting a file review (approved plans, previous inspections, submitted complaints) prior to conducting an inspection.

2.3.1.1.3. Demonstrate how you approach planning your inspections for the week.

2.3.1.1.4. Review of necessary inspection equipment (i.e., test strips, calibrated thermometers, alcohol swabs, etc.)



- 2.3.1.1.5. Ensure trainee has printed red/blue inspection forms.
- 2.3.1.1.6. Each item in the Secondary Field Trainers section.

### **2.3.2. Foodborne Illness Investigation Training**

- 2.3.2.1. Provide foodborne illness training to Skamania County Environmental Health Specialist.
  - 2.3.2.1.1. FDA Foodborne Illness-Causing Organisms reference.
  - 2.3.2.1.2. Environmental Assessment (EA) "Field Guide" reference.
  - 2.3.2.1.3. Prioritized routine EA vs. outbreak investigation.
  - 2.3.2.1.4. Conducting an EA.
  - 2.3.2.1.5. Locating and completing EA forms.
  - 2.3.2.1.6. Outbreak investigation "go" kit.
  - 2.3.2.1.7. Illness interviews.
    - 2.3.2.1.7.1. Post interview recommendations.
  - 2.3.2.1.8. Communication during an outbreak investigation.
  - 2.3.2.1.9. NORS reporting form.

### **2.3.3. Food Establishment Plan Review Training**

- 2.3.3.1. Provide food establishment plan review training to Skamania County Environmental Health Specialist.
  - 2.3.3.1.1. Review and discuss submittal requirements.
  - 2.3.3.1.2. Demonstrate an initial submittal review.
  - 2.3.3.1.3. Demonstrate tracking tools.
  - 2.3.3.1.4. Compile & send initial review email.
  - 2.3.3.1.5. Complete hot water calculations for a facility.
  - 2.3.3.1.6. Demonstrate continuing reviews after receipt of more information.
  - 2.3.3.1.7. Discuss mitigations of commonly encountered variance requests, approvals.
  - 2.3.3.1.8. Drafting and sending approval letters.
  - 2.3.3.1.9. Review submittal requirements.
  - 2.3.3.1.10. Highlight specific code sections.
  - 2.3.3.1.11. Review submittal requirements.
  - 2.3.3.1.12. Mobile specific requirements.
  - 2.3.3.1.13. Reciprocity.
  - 2.3.3.1.14. Provide orientation - preparing for pre-opening inspection.
  - 2.3.3.1.15. Review the inspection form; discuss how each item is field assessed.
  - 2.3.3.1.16. Review pre-opening packet handouts.
  - 2.3.3.1.17. Assess field readiness (i.e., equipment; attire; shoes, etc.).
  - 2.3.3.1.18. Provide blank pre-opening inspection form.

### 3. Clark County Program Contacts

| <b>Communicable Disease Prevention &amp; Control Services</b>  |   |
|--|---|
| General CD Investigations and Operation Support, TB Case Management, Illness Complaint Follow-up & Outbreak Investigation, Epidemiology Support, Vaccine Support, Additional Nursing Support | Alyssa Carlson, MPH<br>O: 564.397.8002 C: 360.836.9086<br><a href="mailto:Alyssa.Carlson@clark.wa.gov">Alyssa.Carlson@clark.wa.gov</a>    |
| COVID-19 Facility Investigations   | Dana Nguyen BSN, RN, CIC<br>564.397.7272<br><a href="mailto:Dana.Nguyen@clark.wa.gov">Dana.Nguyen@clark.wa.gov</a>                        |
| STI Investigations   | Rachel Vinson BSN, RN<br>360.949.6146<br><a href="mailto:Rachel.Vinson@clark.wa.gov">Rachel.Vinson@clark.wa.gov</a>                       |
| <b>Healthy Communities</b>   |   |
| Health Assessment and Evaluation   | Andrea Pruett, MPH<br>564.397.8112<br><a href="mailto:Andrea.Pruett@clark.wa.gov">Andrea.Pruett@clark.wa.gov</a>                          |
| <b>Environmental Public Health</b>   |   |
| Food Establishment Inspection, Foodborne Illness Investigation, Food Establishment Plan Review   | Brigitte Holland, Food Safety Manager<br>564.397.8411<br><a href="mailto:Brigitte.Holland@clark.wa.gov">Brigitte.Holland@clark.wa.gov</a> |

**EXHIBIT B  
BUDGET SUMMARY**

| FPHS SUPPORT SERVICES   | AMOUNT    |
|---|-----------|
| Salaries, Benefits, Services, Training, Supplies, Travel/Mileage, Indirect Expense<br>(28.4%) | \$166,015 |

| ENVIRONMENTAL PUBLIC HEALTH<br>SERVICE DESCRIPTION  | MONTHLY<br>AMOUNT | TOTAL AMOUNT<br>6/1/23-10/31/23 |
|---|-------------------|---------------------------------|
| Training for food establishment inspection, foodborne<br>illness investigation, food establishment plan review. | \$1,734           | \$8,670                         |

|                               |                  |
|-------------------------------|------------------|
| <b>TOTAL CONTRACT AMOUNT:</b> | <b>\$174,685</b> |
|-------------------------------|------------------|

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 2023.

SKAMANIA COUNTY BOARD OF HEALTH

Attest:

\_\_\_\_\_  
T.W. Lannen, Chair

\_\_\_\_\_  
Richard Mahar, Commissioner

\_\_\_\_\_  
Lisa Sackos, Clerk of the Board of Health

\_\_\_\_\_  
Asa Leckie, Commissioner

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Scott Yerrick, Representative (Non-Elected)

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Katie Walker, Representative (Non-Elected)

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Ann Lueders, Representative (Non-Elected)

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Adam Kick,  
Skamania County Prosecuting Attorney