



# CDHD Board of Health

## Table of Contents

Board of Health Meeting Agenda  
April 20th, 2026, at 2:00 PM at the Douglas County Public Services Building  
140 19<sup>th</sup> Street NW, East Wenatchee

***This Board meeting will be a hybrid of in person and online. Participants can attend via computer, phone or in person. Meeting attendance instructions are posted on the landing page of [cdhd.wa.gov](http://cdhd.wa.gov)***

- I. General Business (5 Minutes)**
  - a. Call Meeting to Order – Roll Call
  - b. Approval of the Agenda
  
- II. Consent Agenda (5 Minutes)**
  - a. Approval of March 16, 2026, Board Meeting Minutes
  - b. Approval of March payroll in the amount of \$348,894.01
  - c. Approval of March benefits in the amount of \$108,703.46
  - d. Approval of Payment Vouchers 20260108 – 20260144 in the amount of \$47,288.29
  - e. Approval of Contract Matrix
  
- III. Public Comment**
  - a. *CDHD is providing opportunities for public comment in person, remotely, or by submitting written comment. The Chair will ask if there are any citizens wishing to address the Board. When recognized, please step up to the microphone (or unmute your screen), state your name and the county jurisdiction you reside in. The Chair will direct Citizen comments to two to three minutes each.*
  
- IV. Old Business (30 minutes):**
  - a. Update on Approval of Bylaws
  - b. Board Rules & Procedures - Review for signature
  - c. Code of Ethics – Review for signature
  
- V. Reports (20 Minutes)**
  - a. Health Officer Report – Dr. James Wallace
  - b. Health Administrator Report – Dr. Kristen Hosey
  
- VI. Board Discussion (if time allows)**
  
- VII. Adjournment**



### Table of Contents

Board of Health Meeting Agenda.....	1
Chelan-Douglas Health District Board of Health Regular Meeting Minutes March 16th, 2026.....	3
Payroll & Benefits.....	6
Payment Vouchers.....	8
Contract Matrix.....	13
Board Rules and Procedures.....	14
Board Code of Ethics.....	19
Administrator Report.....	20
Fiscal and Operations Report and Personnel.....	21
Community and Family Health Report and Personnel.....	26
Emergency Preparedness and Response Report and Personnel.....	33
Communicable Diseases & Epidemiology Report and Personnel.....	35
Communications and Outreach Report and Personnel.....	40
Environmental Health Report and Personnel.....	42
Chelan-Douglas Health Administrator’s Update.....	45
IMT Sit-Rep Report.....	48



# CDHD Board of Health

Regular Meeting Minutes

March 2026

## Chelan-Douglas Health District Board of Health Regular Meeting Minutes March 16, 2026

### Board Member Attendance

Board Member	P	V	A	E	NV	Board Member	P	V	A	E	NV
Brad Hawkins (1)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Michael Peterson (7)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shon Smith, C (2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Maggie Higgins (8)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Randy Agnew, VC (3)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Kim Newman (8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marc Straub (4)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Alma Chacon (9)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Top Rojanasthein (5)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Carin Smith (9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carmen Adonaequi (6)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Amanda Appel (10)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marissa Smith (7)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Daniel Moody (10)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>C=Chair, VC=Vice Chair</i>						Joseph Hunter (11)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Key: P = Present (In-Person), V = Virtual, A = Absent, E=Excused, NV = Non-Voting

### Chelan-Douglas Health District Staff Present

Kristen Hosey, Health Administrator  
 Erin McCool, Legal Counsel  
 Ryan Lamb, Operations Director

Corey Lawson, Deputy Health Administrator  
 Stefano SoloGallegos, Facilities & IT Assistant  
 Dr. James Wallace, Health Officer

### Public Presence

The meeting was held in person and via zoom and phone conference with members of the public attending and listening to the meeting

### Meeting

Chair Shon Smith called the meeting to order at 2:00 PM, then Chair Smith requested the Board Clerk (Corey Lawson) to take attendance.



# CDHD Board of Health

Regular Meeting Minutes

March 2026

## Approval of Agenda

Randy moved to move approve agenda while moving section 6 to follow reports. Alma seconded. Motion carried unanimously.

Marc moved to approve the consent agenda sections b through e. Randy seconded. Motion carried unanimously. Brad moved to approve the February 23<sup>rd</sup> minutes with one revision. Alma seconded. Motion carried unanimously.

## Public Comment

- Lisa Templeton, Informed Choice – King County – Voiced concerns regarding measles vaccination

## Old - Business

### **BOH Position 6 & Bylaw Resolution**

An update was provided to inform the Board that Carmen Adonaequi was appointed to the Board of Health by Douglas County Commissioners the previous week, and by Chelan County Commissioners the earlier in the day. Board welcomed Carmen into position 6.

Marc moved to recommend the updated Bylaws to the Chelan and Douglas County Commissioners. Brad seconded. Board discussion occurred regarding the updates to the Bylaws, to remove the dates from 2022, as well as the procedure for approval. Alma opposed but all others approved. Motion carried.

### **Surplus Items**

Joey moved to approve the surplus items. Randy seconded. Motion carried unanimously.

### **Board Rules & Procedures / Code of Ethics**

Board discussed these documents, which were approved last year, and asked board members to provide any recommendations for edits at the April meeting, as well as signatures.

## New - Business

### **BOH Travel Reimbursement/Stipend**

Board discussion occurred regarding Section 3.7: Mileage Reimbursement of the code. No edits were made to the code. Staff will develop a Travel Reimbursement Form.

## Reporting

**Dr. James Wallace presents the Health Officer's Report.**



# CDHD Board of Health

Regular Meeting Minutes

March 2026

Board discussion occurred regarding the Health Officer's Report.

**Dr. Kristen Hosey presents the Health Administrator's Report.**

Board discussion occurred regarding the Health Administrator's Report.

## Board Discussion

Reminder was provided to board members to complete their Public Records and Public Meetings Trainings.

## Adjournment

**Shon Smith declares the meeting adjourned at 3:25 PM.**

X

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Shon Smith  
Board Chair

X

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Corey Lawson  
Clerk of the Board



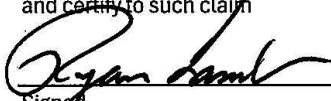
# CDHD Payroll & Benefits Approval

March 2026

Chelan-Douglas Health District  
Payroll 03-25-26 for pay period 03-01-26 to 03-15-26

Gross Pay	185,753.87
Benefits	56,246.64
<b>Total Payroll Cost</b>	<b><u>242,000.51</u></b>
Net Pay	133,266.61
Due to IRS	46,661.61
Due to ESD - SUTA	1,486.03
Due to ESD - WAFMLA	2,099.03
Due to ESD - WACares Fund	992.56
Due to L&I	2,246.44
Due to DRS for PERS	21,493.98
Due to DRS for DCP	1,845.00
Due to PEBB	30,049.94
Due to AFLAC	238.49
Due to Health Equity FSA	259.99
Due to Health Equity H.S.A	223.74
Due to Union	1,137.09
<b>Total Payroll Expenses</b>	<b><u>242,000.51</u></b>

I, the undersigned, do hereby certify under penalty of perjury, that the services rendered or the labor performed as described herein and that the \$185,753.87 in salaries and the \$56,246.64 in benefits are just, true and unpaid obligations against Chelan-Douglas Health District, and that I am authorized to authenticate and certify to such claim

  
\_\_\_\_\_  
Signed

3-20-26  
Date



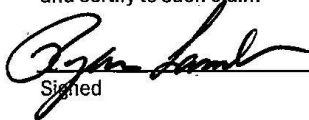
# CDHD Payroll & Benefits Approval

March 2026

Chelan-Douglas Health District  
Payroll 4/10/2026 for pay period 03-16-26 to 03-31-26

Gross Pay	174,026.55
Benefits	54,922.69
<b>Total Payroll Cost</b>	<b><u>228,949.24</u></b>
Net Pay	125,578.07
Due to IRS	42,543.51
Due to ESD - SUTA	1,392.21
Due to ESD - WAFMLA	1,966.49
Due to ESD - WACares Fund	924.55
Due to L&I	2,246.44
Due to DRS for PERS	20,210.95
Due to DRS for DCP	1,845.00
Due to PEBB	30,400.50
Due to AFLAC	238.49
Due to Health Equity FSA	259.99
Due to Health Equity H,S.A	223.74
Due to Union	1,119.30
<b>Total Payroll Expenses</b>	<b><u>228,949.24</u></b>

I, the undersigned, do hereby certify under penalty of perjury, that the services rendered or the labor performed as described herein and that the \$174,026.55 in salaries and the \$54,922.69 in benefits are just, true and unpaid obligations against Chelan-Douglas Health District, and that I am authorized to authenticate and certify to such claim

  
Signed \_\_\_\_\_

4-8-26  
Date



# CDHD Payment Vouchers

March 2026

We, the Administrator and President of the Board of the Chelan-Douglas Health District, do hereby certify that the merchandise or services hereinafter specified have been received and that vouchers **No. 20260145** through **No. 20260161** are approved for payment in the amount of \$10,176.95 this 20 day of April, 2026.

\_\_\_\_\_  
Administrator

\_\_\_\_\_  
President of the Board of Health

Voucher Number	Claimant		Description	Amount
20260145	AG Supply	16	Gas Expense	\$ 532.11
20260146	Amazon	63	Office Supplies	\$ 178.41
20260147	Cintas Corporation	16	Janitorial Supplies	\$ 123.03
20260148	Coleman Oil	16	Gas Expense	\$ 21.90
20260149	Connoisseur Media	15	Radio Advertising Expense	\$ 518.00
20260150	Consensus Cloud Solutions	60/62/63	eFax Services	\$ 108.69
20260151	Copiers Northwest	16	Copier Expense	\$ 540.28
20260152	Corporate Translation Services	23/29	Interpreting Services	\$ 45.08
20260153	Empire Record Management	16	Storage Lease Agreement for April	\$ 795.00
20260154	Language Testing International	16	Language testing-employees	\$ 630.00
20260155	NACCHO	16	Training & Conference, Membership Fee	\$ 3,270.00
20260156	ODP Business Solutions	16	Office Supplies	\$ 85.04
20260157	Ricoh	16	Copier Lease	\$ 318.08
20260158	Stericycle Inc	83	Hazardous Drug Disposal	\$ 55.13
20260159	TK Elevator Corporation	16	Quarterly Maintenance	\$ 1,357.12
20260160	VISA	15/16/63	Office Supplies, Training, & Other Expenditures	\$ 1,291.78
20260161	Waste Management of Wenatchee	16	Utilities Expense	\$ 307.30
				\$ 10,176.95



# CDHD Payment Vouchers

March 2026

We, the Administrator and President of the Board of the Chelan-Douglas Health District, do hereby certify that the merchandise or services hereinafter specified have been received and that vouchers **No. 20260162** through **No. 20260173** are approved for payment in the amount of \$14,170.95 this 20 day of April, 2026.

\_\_\_\_\_  
Administrator

\_\_\_\_\_  
President of the Board of Health

Voucher Number	Claimant	Description	Amount
20260162	Amazon	16 Office Supplies	\$ 141.29
20260163	Cintas Corporation	16 Janitorial Supplies	\$ 111.10
20260164	Douglas County Sewer District	16 Sewer Utility Services	\$ 152.60
20260165	East Wenatchee Water District	16 Utility Expense	\$ 194.44
20260166	Firefly	16 Monthly Services	\$ 9,459.73
20260167	In Print Printing	63 Referral Cards	\$ 173.92
20260168	Keyhole Security	16 Supplies	\$ 13.59
20260169	LocalTel Communications	16 Monthly Phone Expense	\$ 796.37
20260170	Parsons Photography	16 Professional Photo	\$ 119.68
20260171	Tip Top Landscaping	16 Landscaping Expense	\$ 271.00
20260172	Verizon Wireless	MISC Phone Expense	\$ 1,902.28
20260173	VISA	MISC Travel & Conference, Software Expense, and Other Expenditures	\$ 834.95
			\$ 14,170.95



# CDHD Payment Vouchers

March 2026

We, the Administrator and President of the Board of the Chelan-Douglas Health District, do hereby certify that the merchandise or services hereinafter specified have been received and that vouchers **No. 20260174** through **No. 20260186** are approved for payment in the amount of \$27,668.05 this 20 day of April, 2026.

\_\_\_\_\_  
Administrator

\_\_\_\_\_  
President of the Board of Health

Voucher Number	Claimant	Description	Amount
20260174	ADP, Inc	16 ADP Comprehensive Services	\$ 3,928.43
20260175	Amazon	MISC Office Supplies, Field Supplies	\$ 1,105.88
20260176	Berry Construction	16 Building Renovations	\$ 815.66
20260177	Canon Financial Services, Inc	16 Copier Expense	\$ 829.64
20260178	Cintas Corporation	16 Janitorial Supplies	\$ 111.10
20260179	Graybeal Signs	16 Sign Repairs	\$ 9,902.73
20260180	Odgen Murphy Wallace	16 Legal Services	\$ 9,361.83
20260181	Pilkinton, Lisa	70 Employee Reimbursement	\$ 36.77
20260182	Pure Water Partners	16 Monthly Water Dispenser	\$ 67.14
20260183	The DOH Associates, PS	16 Building Renovations	\$ 392.00
20260184	Tumwater Drilling and Pump Inc.	43 Water Drinking System	\$ 661.24
20260185	Visa	15 Monthly Services	\$ 347.30
20260186	Waxie Sanitary Supply	16 Janitorial Supplies	\$ 108.33
			\$ 27,668.05



# CDHD Payment Vouchers

March 2026

We, the Administrator and President of the Board of the Chelan-Douglas Health District, do hereby certify that the merchandise or services hereinafter specified have been received and that vouchers No. 20260187 through No. 20260203 are approved for payment in the amount of \$16,768.65 this 20 day of April, 2026.

\_\_\_\_\_  
Administrator

\_\_\_\_\_  
President of the Board of Health

Voucher Number	Claimant	Description	Amount
20260187	Cimmiyotti, Dominick	44 Employee Reimbursement	\$ 725.00
20260188	Cintas Corporation	16 Janitorial Supplies	\$ 111.10
20260189	Clarius Languages	15 Translation Services	\$ 302.12
20260190	Douglas County PUD	16 Utilities Expense	\$ 530.00
20260191	Firefly	16 Monthly Services	\$ 9,364.20
20260192	Garth, Donald	16 Employee Reimbursement	\$ 159.13
20260193	Gilley, Dominique	41 Employee Reimbursement	\$ 345.00
20260194	Hammond, Cari	16 Employee Reimbursement	\$ 33.38
20260195	Health Equity	16 Healthcare Benefit March	\$ 142.40
20260196	ODP Business Solutions LLC	16 Office Supplies	\$ 549.43
20260197	Pilkinton, Lisa	70 Employee Reimbursement	\$ 40.22
20260198	Point & Pay	16 Check and card processing fees February	\$ 1,646.85
20260199	US Postmaster	16 Annual Fee	\$ 370.00
20260200	Valvoline	16 Vehicle Maintenance	\$ 609.89
20260201	VISA	MISC Office Supplies, Software, Meal Expense, and Other Expenditures	\$ 453.20
20260202	Water Solutions	16 Monthly Water Dispenser Expense	\$ 128.27
20260203	WSALPHO	60 MAC Project 2025 Allocation	\$ 1,258.46
			\$ 16,768.65



# CDHD Payment Vouchers

March 2026

We, the Administrator and President of the Board of the Chelan-Douglas Health District, do hereby certify that the merchandise or services hereinafter specified have been received and that vouchers **No. 20260204** through **No. 20260215** are approved for payment in the amount of \$7,128.70 this 20 day of April, 2026.

\_\_\_\_\_  
Administrator

\_\_\_\_\_  
President of the Board of Health

Voucher Number	Claimant		Description	Amount
20260204	AG Supply Co	16	Gas Expense	\$ 1,206.03
20260205	Cintas Corporation	16	Janitorial Expense	\$ 134.96
20260206	Confluence Technology Center	16	Leadership Training	\$ 797.64
20260207	Connoisseur Media	15/41	Advertising Expense	\$ 518.00
20260208	Copiers Northwest	16	Copiers Expense	\$ 863.89
20260209	Empire Record Management	16	Storage Lease Agreement for May	\$ 830.00
20260210	Kenoyer, Quinn	70	Employee Reimbursement	\$ 37.55
20260211	Nash Consulting	16	Planning Call Expense	\$ 390.00
20260212	Pitney Bowes	16	Quarterly Postage Meter Lease	\$ 464.20
20260213	Sound Telecom	12	After Hour On-Call Services	\$ 176.43
20260214	Townsquare Media	15/41	Advertising Expense	\$ 960.00
20260215	Willhelm Consulting	16	Coaching Expense	\$ 750.00
				\$ 7,128.70



# Contract Matrix

Q1 2026

Contract Number	With Whom	Deliverables	New, Renew, or Replace	Term of Contract	Total Amount Of Contract	Impact or Adjustment
Interagency Agreement No. C2500167 Pollution Prevention Assistance	Department of Ecology	The purpose of the SOW is to provide technical assistance and education outreach to small businesses to prevent pollution of state waters as part of the Pollution Prevention Assistance Partnership The purpose for this Amendment is to reduce funding and modify deliverables.	Replace	07/01/25-06/30/27	\$131,074.09	-\$9,693.11
ABCD Dental Program Contract K7457 02	Health Care Authority	The purpose of the SOW is to provide outreach, linkage, and care coordination to dental care for Medicaid-eligible clients, age birth to 6 years and DDA clients 6 year to 13 years. The purpose for this Amendment is to extend contract term and increase funding.	Replace	07/01/24 – 06/30/28	\$307,984	+\$127,492



## **Rules of Procedure Chelan Douglas Health District Board of Health**

This document will guide the procedures and conduct expected of the Members of the Chelan Douglas Health District Board of Health (“Board”), to enhance our ability to meet our responsibilities, and to uphold our Vision and Mission (<https://www.cdhd.wa.gov/about-cdhd>). This document builds upon the Bylaws of the Health District Board of Health (<https://cdhd.district.codes/Bylaws>).

### **1. BOARD MEMBER ROLES AND RESPONSIBILITIES**

#### **1.1 General**

The Board is the governing body of the Chelan Douglas Health District (“the District”) and is responsible for the legislative activities or policy decisions of the District, as defined by RCW 70.05.060. The roles of the Board Chair, officers, and Board members are outlined in the Bylaws of the Chelan Douglas Health District Board of Health. The Executive Committee consists of the Chair, Vice Chair, and Administrator.

The Chair (and in the absence of the Chair, the Vice Chair) serves as the spokesperson for the District when questions concerning policies of the Board are directed to the District.

Members and Alternate members shall educate themselves about the Roles and Responsibilities of members of Local Boards of Health, and endeavor to participate in ongoing training for effective public service as their schedules allow. They shall be aware of the 10 Essential Public Health Services described by the CDC as the public health activities that all communities should undertake.

Board members have a responsibility to conduct themselves prudently, responsibly, in furtherance of, and consistent with, the Chelan Douglas Board of Health Vision, Mission, and Bylaws, and in accordance with any and all RCWs pertaining to this role.

#### **1.2 Interactions with staff of the CDHD**

Board members, acting in their capacity as Board members, shall not hold direct discussions with any staff member regarding Board matters unless authorized to do so by the Board; instead, Board members should bring questions or comments to anyone on the Executive Committee.

### **2. MEETINGS**

#### **2.1. Respect and Decorum**

Board members must maintain dignity and respect for their fellow Board members, for employees, and for members of the public. A Board member must neither substantially delay nor interrupt the proceedings of the meeting, nor disrupt or disparage anyone participating during



# Board Rules & Code of Ethics Review

Q1 2026

meetings. Board meetings shall be governed by Robert's Rules of Order. If there is a conflict between these procedures and Robert's Rules of Order, these procedures shall apply.

## **2.2. Attendance, Excused Absences**

Board members are expected to attend all meetings of the Board. If a member is unable to attend, they shall request to be excused by notifying the Board Clerk, Chair, or Administrator prior to the meeting. Board members are expected to come prepared to the meeting by reading the Board packet in advance of the meeting and be prepared to participate in discussions and decisions. Board members and their Alternates are expected to remain in communication about attendance.

Board alternate members are expected to maintain participation such that they are prepared to stand in during their primary Board member's absence.

## **2.3. Voting**

Board members (or their alternate if a Board member isn't present) should be prepared to vote on all motions. The Chair may call for a roll call vote when clarity of votes is needed. A member has an obligation to abstain if a conflict of interest exists. Members are strongly encouraged to state the reason for any vote in abstention.

## **2.4. Uphold Decisions**

Board members shall uphold decisions made by the Board both during and outside of Board meetings when presenting themselves as a Board member. Board members shall clearly distinguish personal opinions from official Board positions to avoid confusion and maintain consistency with the Board's official messaging. Nothing in these rules is meant to prevent individual members from speaking in their personal capacity but members should clearly communicate that they are speaking in their personal capacity and not on behalf of the Board.

Board members shall not delay, interrupt, or disturb proceedings of the meeting on items that are not on the agenda or aspects of such items that have been decided, unless such decision is the predetermined focus of the topic.

## **2.5. Recording of Meetings**

Except for executive sessions allowed by RCW 42.30.110 and closed sessions, the Board Clerk shall keep the minutes of all meetings of the Board. Audio and/or video recordings will be made of Board meetings and if made shall be available to the public.



# Board Rules & Code of Ethics Review

Q1 2026

## **3. BOARD ORDER OF BUSINESS AND AGENDA**

### **3.1 Preparation of Agenda**

The agenda serves to introduce items to the Board, to establish the order of business, and to give notice to the public. The agenda serves as a guide for the normal order of business for all regular meetings. In preparing the agenda, however, the Executive Committee has discretion to amend the order of business. Likewise, during a meeting, the Chair and the Board have discretion to amend the order of business.

For items to be added to the agenda, Board members or the Administrator must bring items for consideration to the Executive Committee two weeks prior to a Board meeting. Proposing a topic does not ensure it will be included on the agenda. The agenda may be amended during the regular meetings upon a motion approved by a majority of the Board.

Each agenda item may be accompanied by a time duration in minutes. This is intended to allow for essential agenda items to be addressed during the time allotted for the meeting but can be modified upon agreement by the attending Board members. The Chair shall appoint a timekeeper for each meeting whose job will be to remind the group when a time frame is exceeded. Timekeeper shall be the Vice Chair or other person appointed by the Chair.

### **3.2 Public Comment**

The Board welcomes comments from the public during the public comment period. This is an opportunity for members of the public to inform the governing body about their views. The meeting itself belongs to the governing body. The public does not participate in the decision-making. Instead, they provide input to the governing body, which takes the input into consideration in making its decisions.

The public must state their name and county of residence and then they will have three minutes of comments. The public comment period is not a time for dialogue and Board members should refrain from participating in dialogue during this time. A meeting of a public board is not a meeting of the public. It is a meeting of the board that is held in public.

The public is also encouraged to submit comments to the Board through the Board Clerk.

### **3.3 Board member discussion**

Board members and Alternates may participate in questions and discussion for any agenda topic. To ensure that all members have a chance to speak and that there is sufficient time for essential agenda items, the Chair may ask that members limit their comments to two minutes each until all members have had a chance to speak. Board members and alternates shall refrain from discussion of items in which they hold a conflict of interest.



# Board Rules & Code of Ethics Review

Q1 2026

## **3.4 New Business**

New business discussion occurs at the end of regular meetings if time allows. Such topics shall be submitted for the agenda two weeks prior to the Board meeting, but their inclusion in the meeting depends upon the Executive Committee's review and available time.

Board members will have two minutes each to present/respond to each item, with the ability to go around more than once upon discretion of the Chair and available time.

Topics should be limited to those under the Areas of Governance of the Board of Health. Topics that have been previously decided shall only be revisited for discussion upon two circumstances: the Executive Committee has approved the item for the agenda and also the majority of the Board agrees to re-visit the topic.

The Board must uphold state and federal laws governing its actions so the Board should not waste time talking about actions that they are not legally allowed to take.

## **3.5 Adjournment**

The Chair shall endeavor to adjourn all Regular and Special Board Meetings no later than 5:30 pm (or 2.5 hours after beginning). In exigent circumstances or where circumstances may require additional time, the Board meeting shall continue beyond 5:30 p.m. upon a majority vote of the Board members or alternatives present.

## **4. NEW BOARD MEMBER ORIENTATION**

The Chair shall conduct training and "onboarding" of each new Board member, to include sharing of all topics, documents and contents of the links included herein.

## **5. ADHERENCE TO AND VIOLATION OF THE RULES**

Board members may ask the Chair to enforce these procedures established by the Board. If the Chair fails to do so, a majority vote of the Board will require the Chair to do so. Board members who violate the terms of this document or the terms of the RCWs or Bylaws may be subject to censure or sanctions.

## **6. TYPES OF MEETINGS**

### **6.1 Regular meetings**

Meeting dates, times, and locations are posted on the web site. Also refer to Bylaws and RCW 42.30.080.

Study sessions and workshops, executive sessions, and closed sessions may be held in accordance with the Open Public Meetings Act RCW 42.30.110.



## 6.2 Executive Sessions

Executive sessions may be held in accordance with the provisions of RCW 42.30.110. The Board may hold an executive session during a regular or special meeting. Before convening in executive session, the Chair shall cite the purpose of the executive session and briefly describe the reason (not identifying individuals or case numbers) publicly. The Chair shall further announce the time when the Board is expected to return to open session. The Chair may extend an executive session by coming back into open session and announcing the new time when the open session will reconvene. If the executive session is concluded before the stated time, the Board must not reconvene in open session until the previously announced time. All participants in an executive session must keep confidential all information provided to them during executive sessions. Likewise, all who attend an executive session must return any documents that are distributed during the executive sessions prior to the end of the executive session. No final action can be taken during an executive session. Final action must be taken in open session, see RCW 42.30.060(2). The announced purpose of the executive session shall be entered into the meeting minutes.

## 6.3 Closed Sessions

Under RCW 42.30.140, the OPMA does not apply to certain types of meetings:

- matters under Administrative Procedure Act, and
- collective bargaining matters

Therefore, the public may be excluded from those meetings. If the public is excluded from a meeting that is not subject to the OPMA under this section, then that meeting should be referred to as a "closed" session to distinguish it from an "executive session" under the OPMA.

## 6.4 Study sessions and workshops

At the call of the Chair or of a majority of the Board, and with no less than 24 hours of notice to the public and local news media, the Board may meet informally in study sessions and workshops (open to the public). All discussions during a study session or workshop shall be informal and do not constitute official actions of the Board, and no final action will be taken during these meetings. Such meetings shall last no longer than three (3) hours. The Board may extend these adjournment times upon approval of a motion by a majority of the Board in attendance.

## 6.5 Confidentiality

Board members shall keep confidential all written materials and verbal information provided to them during executive and closed sessions to ensure that confidentiality is protected and CDHD's position is not compromised.



# Board Rules & Code of Ethics Review

Q1 2026

## Chelan-Douglas Health District Board of Health Code of Ethics

This Code of Ethics is intended to guide the conduct of board members and promote a culture of integrity, responsibility, and trust within the organization. **As a member of this Board I will...**

1. Represent the interests of the communities served by this organization;
2. Not use the organization or my service on the Board for my own personal advantage or for the individual advantage of my friends or supporters;
3. Avoid any conflicts of interest and conform to the provisions of chapters 42.20 and 42.23 RCW;
4. Disclose any potential conflicts as soon as they arise and recuse themselves from decision-making where a conflict exists;
5. Not use my position to secure anything of value or the offer or promise of anything of value that could be reasonably expected to influence any action, or inaction, of a Board member;
6. Not exercise authority as a Board member except when acting in a meeting with the full Board or as I am delegated by the Board;
7. Respect the confidentiality of sensitive information gained through Board service, including matters relating to strategy, personnel, and legal issues. Keep confidential information confidential, even after I cease to be an active member of this Board;
8. Regularly attend Board meetings and be prepared to participate in discussions and decision-making processes. Approach all Board issues with an open mind, prepared to make the best decision for the community and the whole organization;
9. Uphold the trust of the communities we serve;
10. Focus my efforts on the Mission of the organization and not on my personal goals;
11. Acknowledge the integrity of the Board's collective decisions even if I've personally disagreed with the decision; and
12. Treat fellow Board members, staff, volunteers, and stakeholders with respect and professionalism.

Violations of this Code of Ethics could result in censure or sanctions. Board members are required to sign this policy, acknowledging their understanding and commitment to upholding these ethical standards.

**Board Member Signature:** \_\_\_\_\_

\_\_\_\_\_  
**Name and Title**

**Date:** \_\_\_\_\_



# Administrator's Report Cover Page

Q1 2026

## Administrator's Report

### Highlights:

Fiscal & Operations  
Community and Family Health  
Emergency Preparedness and Response  
Communicable Disease and Epidemiology  
Communications and Outreach  
Environmental Health  
Administrator Update



## Fiscal and Operations Report and Personnel



*Ryan Lamb*

*Adeline Moralez*

*Krishna Gonzalez*

*AnaMaria Ruelas*

*Operations Director*

*Fiscal Supervisor*

*Accountant*

*Fiscal Assistant*



*Julian Moro*

*Stefano SolaGallegos*

*Contracts & Procurement  
Manager*

*Facilities & IT Assistant*

## Highlights

- CDHD continues final construction closeout activities related to recent facility improvements.
- The agency completed its copier modernization project and transitioned to enhanced secure print functionality, including badge/login access, improving confidentiality, reducing waste, and lowering operating costs.
- CDHD is implementing a new phone system to modernize communications, improve public accessibility and reduce long-term operating expenses.
- Operational reviews this quarter identified approximately **\$111,000 in potential savings** through contract optimization, billing corrections, and service consolidation.
- The Washington State Department of Health completed its FPHS fiscal monitoring visit in March; final feedback is pending.
- New process was implemented for Board of Health mileage reimbursement to improve consistency and administrative efficiency.



## Operations

- Transition to the Verizon One Talk phone platform is underway, replacing the outdated ShoreTel system and improving communication continuity. Expected benefits include improved phone tree administration, more efficient system management, enhanced staff accessibility, and potential savings through reduced reliance on separate cell phone and after-hours call costs.
- Ongoing IT and infrastructure cleanup efforts include review of obsolete devices, inactive accounts, and legacy systems to improve security, efficiency, and operational resilience.
- Secure disposal of retired technology assets is planned in alignment with data protection and records management practices.

## Fiscal Update

- Fiscal staff continue active monitoring of revenues and expenditures to ensure alignment with the adopted budget, grant requirements, and organizational priorities.
- Quarterly expenditure reviews focused on recurring contracts, subscriptions, and vendor services resulted in identified savings opportunities totaling approximately \$111,000, strengthening long-term budget sustainability.
- Upcoming renewals and agreements are being proactively reviewed to ensure competitiveness, service necessity, and fiscal value, including media services, and technology vendors.
- Internal fiscal process improvements continue in purchasing, invoice consistency, and vendor oversight to strengthen internal controls, accountability, and timely reporting.
- Staff are preparing for annual reporting requirements and ongoing state fiscal compliance activities.

## Essential Data

Through March 31<sup>st</sup>, with 25% of the year completed, the District is at 18.7% of budgeted revenue and 23.4% of budgeted expenses.



# Fiscal and Operations Report

Q1 2026

**CHELAN-DOUGLAS HEALTH DISTRICT**  
**Budget vs. Actuals 2026 Approved Budget**  
**YTD March 2026**

	Total		
	Actual	2026 Budget	% of Budget
<b>Income</b>			
640.001.32120.00.000 HEALTH - BUSINESS LICENSES AND PERMITS	332,049.25	797,638.65	41.63%
640.001.32210.00.000 BUILDINGS, STRUCTURES AND EQUIPMENT PERMITS	87,792.50	603,947.00	14.54%
640.001.33310.55.000 SPEC SUPPLEMENTAL NUTRITION PROGRAM-WIC	49,368.95	192,481.00	25.65%
640.001.33393.06.000 PUBLIC HEALTH EMERGENCY PREPAREDNESS	41,178.00	218,000.00	18.89%
640.001.33393.08.000 MEDICAL RESERVE CORP SMALL GRANT PROGRAM	0.00	5,000.00	0.00%
640.001.33393.26.000 IMMUNIZATION GRANT	7,634.92	34,505.00	22.13%
640.001.33393.32.000 EPIDEMIOLOGY/LAB CAPACITY (ELC)	5,595.69	0.00	
640.001.33393.59.000 PERINATAL MENTAL HEALTH COMMUNITY CAPACITY	3,443.99	14,000.00	24.60%
640.001.33393.77.000 MEDICAID MATCH	58,976.70	206,654.00	28.54%
640.001.33393.96.000 PH INFRASTRUCTURE GRANT	20,750.43	100,000.00	20.75%
640.001.33393.99.000 PREVENTATIVE HEALTH/MCH BLOCK GRANT	29,783.33	112,000.00	26.59%
640.001.33403.10.000 DEPARTMENT OF ECOLOGY	48,487.79	158,476.00	30.60%
640.001.33404.10.000 STATE GRANT DCYF	105,003.06	387,000.00	27.13%
640.001.33404.91.000 DEPT OF HEALTH GENERAL FUND	1,276.91	37,179.00	3.43%
640.001.33404.96.000 OHSC TBI SAFE KIDS DSHS IAR	3,423.10	0.00	
640.001.33406.90.000 HCA GENERAL FUNDS	8,618.00	31,654.00	27.23%
640.001.33604.24.000 PUBLIC HEALTH ASSISTANCE	199,817.00	399,634.00	50.00%
640.001.33604.25.000 FOUNDATIONAL PUBLIC HEALTH SERVICES	<b>0.00</b>	<b>2,498,000.00</b>	<b>0.00%</b>
640.001.33862.00.000 PUBLIC HEALTH ASSESSMENTS	114,454.71	457,817.84	25.00%
640.001.33863.00.000 INTERGOVERNMENTAL SERVICES REVENUE	<b>0.00</b>	<b>0.00</b>	
640.001.34620.00.000 PUBLIC HEALTH CLINIC	940.13	5,500.00	17.09%
640.001.34650.00.000 ENVIRONMENTAL HEALTH FEE FOR SERVICES	94,695.50	338,950.63	27.94%
640.001.34670.00.000 OTHER PUBLIC HEALTH FEES (VITAL STATS)	41,306.00	109,989.00	37.55%
640.001.35000.00.000 FINES AND FORFEITS	-4,000.00	0.00	
640.001.36111.00.000 INVESTMENT INTEREST	24,293.29	120,000.00	20.24%
640.001.36700.00.000 CONTRIBUTIONS & DONATIONS, PRIVATE	23,876.34	126,000.00	18.95%
640.001.36900.00.000 OTHER MISCELLANEOUS REVENUES	142.00	0.00	
<b>Total Income</b>	<b>\$ 1,298,907.59</b>	<b>\$ 6,954,426.12</b>	<b>18.68%</b>



# Fiscal and Operations Report

Q1 2026

**CHELAN-DOUGLAS HEALTH DISTRICT**  
**Budget vs. Actuals 2026 Approved Budget**  
**YTD March 2026**

	Actual	Total 2026 Budget	% of Budget
<b>Expenses</b>			
640.001.56200.10.000 SALARIES & WAGES	1,058,805.82	4,408,478.73	24.02%
640.001.56200.20.000 PERSONNEL BENEFITS	330,967.87	1,388,513.40	23.84%
640.001.56200.30.000 SUPPLIES	14,837.31	73,320.00	20.24%
640.001.56200.35.200 SOFTWARE	56,676.35	238,037.58	23.81%
640.001.56200.35.300 HARDWARE	314.68	11,000.00	2.86%
640.001.56200.41.100 SERVICES - LEGAL	12,819.73	105,000.00	12.21%
640.001.56200.41.200 SERVICES - AUDIT	3,713.97	40,000.00	9.28%
640.001.56200.41.300 SERVICES - INTERPRETING	504.29	2,350.00	21.46%
640.001.56200.41.450 SERVICES - ANSWERING SERVICE	1,039.62	2,500.00	41.58%
640.001.56200.41.500 SERVICES - OUTSIDE DR'S & DENTISTS	2,275.00	9,100.00	25.00%
640.001.56200.41.600 SERVICES - COMPUTER	28,668.95	120,000.00	23.89%
640.001.56200.41.900 SERVICES - CONTRACTS & MISC	2,476.59	16,560.00	14.96%
640.001.56200.41.920 SERVICES - LANDSCAPING	0.00	1,500.00	0.00%
640.001.56200.41.930 SERVICES - PARKING LOT MAINT	871.34	5,000.00	17.43%
640.001.56200.42.010 TELEPHONE	8,144.13	39,322.82	20.71%
640.001.56200.42.020 POSTAGE	834.20	6,000.00	13.90%
640.001.56200.43.000 TRAVEL/TRAINING	18,059.34	122,320.32	14.76%
640.001.56200.40.000 ADVERTISING	4,050.00	28,855.00	14.04%
640.001.56200.45.000 OPERATING RENTALS & LEASES	2,670.00	10,558.00	25.29%
640.001.56200.46.000 INSURANCE	500.00	140,000.00	0.36%
640.001.56200.47.000 PUBLIC UTILITY SERVICES	5,194.11	18,000.00	28.86%
640.001.56200.48.000 REPAIRS	5,545.24	40,827.15	13.58%
640.001.56200.49.000 PRINTING - OFFICE	317.40	5,250.00	6.05%
640.001.56200.49.001 PRINTING - COPIER	7,530.79	10,000.00	75.31%
640.001.56200.49.200 PAMPHLETS - PRINTED OR PURCHASED	0.00	610.00	0.00%
640.001.56200.49.300 DUES & MEMBERSHIPS	9,056.00	11,212.00	80.77%
640.001.56200.49.400 SUBSCRIPTIONS	0.00	2,178.00	0.00%
640.001.56200.49.500 OTHER EXPENDITURES	41,505.57	83,561.00	49.67%
640.001.56200.49.700 CONTINUING EDUCATION	0.00	7,000.00	0.00%
640.001.56200.62.030 IMPROVEMENTS TO BUILDING	12,284.69	18,000.00	68.25%
<b>Total Expenses</b>	<b>\$ 1,629,662.99</b>	<b>\$ 6,965,054.00</b>	<b>23.40%</b>
<b>Surplus / (Deficit)</b>	<b>\$ (330,755.40)</b>	<b>\$ (10,627.88)</b>	



# Fiscal and Operations Report

Q1 2026

## CHELAN-DOUGLAS HEALTH DISTRICT Cash/Investments 3/31/2026

Cash on Hand - Petty Cash	500.00	
General Account - Chelan County Treasurer	53,557.55	
Payroll Clearing Account - Key Bank	49,330.19	
Investment Account - Chelan County Treasurer	4,008,118.13	
<i>Investment broken out as follows:</i>		
Reserves		2,000,000.00
General Investment		1,704,601.96
 Total Cash/Investments	 4,111,505.87	

## CHELAN-DOUGLAS HEALTH DISTRICT Budget vs Actuals 2026 Budget YTD March 2026

	<u>YTD</u>	<u>Budget</u>	
Permits	419,841.75	1,401,585.65	30.0%
Federal Grants	216,732.01	882,640.00	24.6%
State Grants	166,808.86	614,309.00	27.2%
State Entitlements	199,817.00	2,897,634.00	6.9%
Assessments/Intergov Rev	114,454.71	457,817.84	25.0%
Fees	136,941.63	454,439.63	30.1%
Interest	24,293.29	120,000.00	20.2%
Other Revenue	20,018.34	126,000.00	15.9%
Total Revenue	<u>1,298,907.59</u>	<u>6,954,426.12</u>	18.7%
 Wages	 1,058,805.82	 4,408,478.73	 24.0%
Benefits	330,967.87	1,388,513.40	23.8%
Supplies	84,648.07	322,357.58	26.3%
Services	142,956.54	827,704.29	17.3%
Capital Outlays	12,284.69	18,000.00	68.2%
Total Expenses	<u>1,629,662.99</u>	<u>6,965,054.00</u>	23.4%
 <b>Surplus /Deficit</b>	 <b>(330,755.40)</b>	 <b>(10,627.88)</b>	



# Community and Family Health Report

Q1 2026

## Community and Family Health Report and Personnel



**Cari Hammond**

CFH Director

**Lisa Pilkinton**

Health Educator

**Emily Gilmore**

NFP/NHV

**Stephanie Snitily**

Immunization  
Coordinator

**Katie Young**

NFP Supervisor/NHV



**Veniece Ceballos**

NFP/NHV

**Brianna Rice**

Community Health  
Dietitian

**Ana Macias**

WIC Coordinator  
& Certifier

**Yanet Lozano**

WIC Certifier

**Nichole Franks**

MCH Lead



**Quinn Kenoyer**

Health Systems  
Improvement  
Coordinator

**Norma Renteria**

Program Assistant

**Lupita Espinoza**

ABCD Coordinator

**Garth Donald**

Mental Health & Substance  
Use Coordinator



## Division Highlights

- Strengthened local perinatal supports by developing outreach materials to increase awareness of Medicaid-covered doula services and by identifying service gaps in lactation support and childbirth education.
- Began introducing the HOPE (Healthy Outcomes from Positive Experiences) framework to community partners and working with the Nurse-Family Partnership program to integrate the model into client services.
- Initiated efforts to expand the local doula workforce by exploring Spanish-speaking training opportunities and connecting Wenatchee Valley College with a DONA International-certified trainer.
- Convened the first Child Fatality Review meeting in January 2026 and continue building the multidisciplinary review team and local review process.
- Established the Dementia Friendly Chelan Douglas Coalition with a formal organizational structure and six active board members. The coalition is focused on increasing awareness, community inclusion, and support for individuals living with dementia and their families.
- Held the 2nd Annual ABCD Coloring Contest in recognition of National Children’s Dental Health Month. More than 200 entries were received from children ages 3–12, with prizes donated by several community partners.
- Continued implementation of the Nurse-Family Partnership (NFP) Perinatal Mental Health Grant through several key milestones, including hosting an additional community stakeholder meeting in March and launching a New Parent Support Group in January. The weekly group has averaged 3–4 participants per session, with 10 sessions completed to date. A second session series begins April 17, 2026, at Catholic Charities and will continue through June 12, 2026. Here is a success story:

***NFP Success Story:*** A CDHD nurse home visitor (NHV) identified early in pregnancy that a Nurse-Family Partnership client’s blood pressure was increasing, creating potential health risks for both mother and baby. The client had previously struggled to take prescribed blood pressure medication consistently.

*The nurse provided education about the importance of taking medication as direction, explained the risks of uncontrolled high blood pressure during pregnancy, and helped the client overcome barriers to getting her prescription. Home visits were also increased to provide closer monitoring and additional support.*

*Because of these interventions, the client is now taking her medication daily, her blood pressure is well managed, and she has experienced no additional pregnancy complications. This success story highlights how early intervention, education, and ongoing support can improve healthy pregnancy outcomes for local families.*



# Community and Family Health Report

Q1 2026

## Maternal Child Health

Activity	Description	Count/Reach	Notes
Outreach	Presented at Interagency meeting  Doula connections  HOPE presentations	30 attendees  7 in person meetings  3 HOPE presentations	
Community partner meetings	Various topics	22 meetings	SMART and VAST team meetings, ECHO resources, and CYSHCN communication network meeting, FYSTPRT, Wenatchee Together for Youth Coalition, On Time Autism Intervention, 7 seconds, Waterville Together for Youth, NCELC regional meeting
Material Distribution	Flyers, handouts etc.	105	Care Passports, Community Connect Flyers
Email Outreach	CYSHCN support group CYSHCN Networking Doula outreach	7	
Systems Improvement	Identifying gaps in Medicaid covered services to help reduce disparities and improve services for Medicaid enrolled individuals  Identifying other challenges/barriers families face		Students often graduate without an autism diagnosis, leaving them ineligible for DDA services. Families frequently feel overwhelmed by paperwork and uncertainty about how to access services.  There is a shortage of practicing Doulas and teaching classes in the area, particularly those offered in Spanish. Medicaid does not reimburse or cover birthing classes or at-home lactation support.



# Community and Family Health Report

Q1 2026

			The middle class faces increased challenges affording childcare because subsidies do not apply to them, and costs exceed what they can afford. Some parents leave the workforce as a result. There is a need to encourage more family-friendly workplaces, as scheduling at many childcare centers and preschools is not accommodating for most families.
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## Childcare Consultation

Completed 3 childcare consultations: All infants seen were either meeting age-appropriate developmental milestones or had interventions already in place to support developmental needs. Education was provided to families on separation anxiety, transitioning from bottle feeding to whole foods, lead testing and strategies to reduce lead exposure, reflux management, and appropriate timing for transitioning out of swaddling.

## Nurse-Family Partnership

Number of Families Enrolled	Number of Families Served	Number of Children Served	New Clients Enrolled	Clients Closed	Number of Graduates	Total Completed Encounters for the period	Total Outgoing Referrals to Other Services
51	51	40	10	*5	1	177	89

*\*Dismissed from program for other reasons (moving out of area, unable to contact)*

## Women Infants & Children (WIC)

January-March CLINIC APPOINTMENTS				
TYPE OF APPTS	TOTAL	ATTENDED	CANCELLED	MISSED
Initial Certification (IC)	51	44	2	5
Subsequent Certification (SC)	191	136	21	34
Mid-Certification Assessment (Mid Cert-HA)	166	126	9	31
Nutrition Education (NE-I)	382	263	41	78



# Community and Family Health Report

Q1 2026

Nutrition Education with RD (NE-I-RD)	1	0	1	0
Food Benefits Only (FBI)	100	87	4	9
Breastfeeding Education (BFE)	4	4	0	0
High-Risk Nutrition Education (RD)	59	42	7	10
Anthropometrics (ANTHRO/LAB)	39	26	6	7

Total Number of Scheduled Clinic Appointments	993
Total Number of Missed Appointments	174
Clinic Show Rate	82%

## Immunizations

VFC Site Visits	IQIP Visits	Unannounced S & H Visits	IIS Trainings for Providers	Trainings related to regional scope of work	Vaccine Clinics
8	4	0	2	10	1 clinic at CCRJ-administered 8 flu doses and 2 Tdap doses

## Access to Baby & Child Dentistry

Number of Children Enrolled	Number of Community Outreach Events / total # reached	Total Outgoing Referrals to Other Services
28	4/310	51

## Community Connect

Number of Clients Enrolled	New Referrals Received	New Clients Enrolled	Clients Discharged	Total Outgoing Referrals to Other Services	Number of Community Outreach and/or Networking Events / total # reached
30	7	7	*	*	2/310

\*Data report not available yet



# Community and Family Health Report

Q1 2026

## Lifecourse Program

### Safety & Prevention

Event	Attendance/# of meetings and/or events
Child Fatality Review (CFR) Orientations	3 new members oriented to CFR Process
Naloxone Trainings	4 trainings, 24 participants
Community Anti-Drug Coalitions of America (CADCA) Leadership Forum- Gained knowledge on evidence-based strategies for substance misuse, prevention, community organizing and policy advocacy	N/A
Fatality Review – Coordinated first Review	8 community partners attended, 10 community recommendations created for prevention programming
Behavioral Health Community Health Improvement Plan (CHIP)	3 meetings, 12 community partners attended
Data Reviews with School Districts for Substance Use Disorder Grant Proposals	4 meetings to review Healthy Youth Survey data
Leavenworth Community Suicide Prevention Training	7 participants identified & invited 42 community leaders/ organizations

### Health Education

Event	Attendance/# of meetings and/or events
Community in Color Art Contest-	N/A
Collaboration with NCW Libraries, local school districts, Wenatchee Valley College, local artists, YMCA, Sustainable NCW, CAFE, and others to promote this opportunity	
After School Program (ASP) + YAB- 5 YAB Members facilitated SEL Lessons on Confidence & Belonging at ASP	23 middle school students



# Community and Family Health Report

Q1 2026

Dementia Friendly Chelan Douglas Coalition- Focused on increasing community awareness and support for individuals living with dementia and their families	
Dementia Data Presentation to CDHD staff	45 staff
NCW Regional Falls Coalition Facilitation	26 community partners attended

## Community Health Nutrition

Event	Attendance OR # of meetings and/or events
STEAM Activity night- Presented impacts of added sugar	186 youth & family members
Wenatchee After School Program Nutrition Education	40 students
Facilitated NCW Food Council Meeting	60 community partner attendees, led to creation of Chelan Douglas Food Council Meeting
Community Nutrition Education- Cooking classes- Teen Center @ YMCA and YWCA Enrichment Class teaching residents to cook healthy on a budget	3 events, 17 attendees
Weight Loss Support Group- 41 lbs lost in Q1	3 meetings, 15 individuals attended

### Definitions:

NFP- Nurse-Family Partnership

NSO- National Service Office

ABCD- Access to Baby and Child Dentistry

YAB- Youth Advisory Board

CADT- Center for Alcohol & Drug Treatment

WIC- Women, Infants, Children

CVP- Childhood Vaccine Program

VFC- Vaccine for Children

HCA- Health Care Authority

AVP- Adult Vaccine Program

USDA- U.S Dept of Agriculture

CHIP- Community Health Improvement Plan

VAST- Valley Autism Support Team

CD/I/V Prevention- Chronic Disease, Injury, Violence Prevention

MCH- Maternal Child Health

Lifecourse= MCH, Access & Linkage to Care, CD/I/V Prevention

CYSHCN- Children & Youth with Special Health Care Needs

S&H- Storage & Handling

FMNP- Farmers Market Nutrition Program

MCHBG- Maternal Child Health Block Grant

MOUD- Medications for Opioid Use Disorder

IQIP- Immunization Quality Improvement for Providers

CCRJ- Chelan County Regional Jail

FNS- Food and Nutrition Services

TBI- Traumatic Brain Injury

FYSPT- Family Youth System Partner Round Table



# Emergency Preparedness and Response Report

Q1 2026

## Emergency Preparedness and Response Report and Personnel



*Kaila Smith*

*Lexy Lieurance*

*Griselda Lozano*

*Regional Emergency  
Response Coordinator*

*Local Emergency  
Response Coordinator*

*Program Assistant*

### Division Highlights

The Emergency Preparedness & Response division has made large strides in strengthening community readiness and response capabilities. During the first quarter, our team has taught several stop the bleed courses, equipping community members with critical life-saving skills. The team participated in the Regional EOC/IMT exercise that helps our region further our interagency coordination. Additionally, participation in the HEMP exercise alongside local partners strengthened relationships and fostered greater coordination across jurisdictions, as well as participation in the Integrated Preparedness and Planning workshop with DOH. The EPR division hosted a Civilian Response to Active Shooter Events training to all staff and identified a need to create a critical incident stress management plan for staff. The division remains dedicated to serving the community through proactive preparedness, strong partnerships, and timely, effective response.

### Incident Management Activation

The Incident Management Team (IMT) has been stood up to support Communicable Disease and Epidemiology operations. The IMT meets twice weekly and produces regular deliverables, including weekly situation reports and Incident Action Plans. The team includes representatives from every department, ensuring coordinated, organization-wide response efforts. In addition to their core functions, IMT members have taken on a wide range of new roles and responsibilities and are actively building capacity and expertise in Incident Command System (ICS) processes. Over 200 hours have been spent on this response from CDHD staff members.



# Emergency Preparedness and Response Report

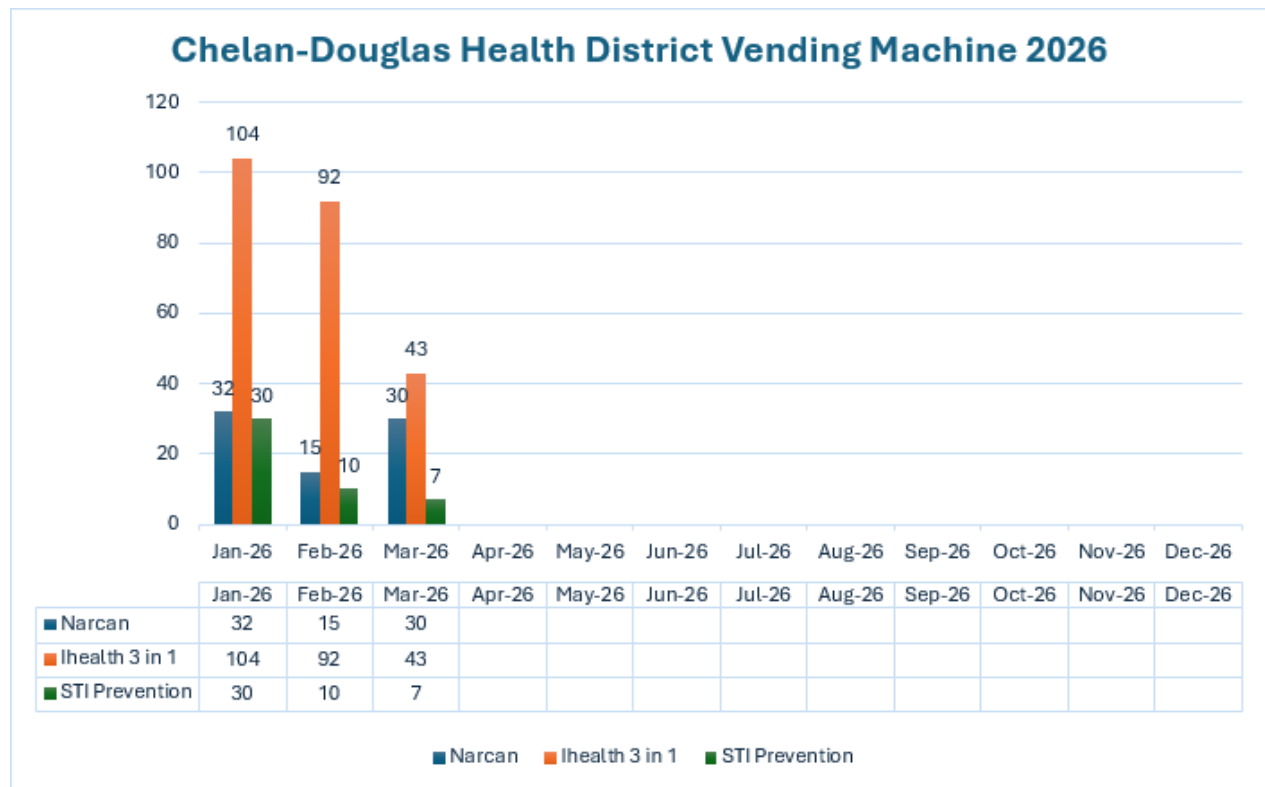
Q1 2026

## Medical Reserve Corps

This has been a very busy quarter for the Chelan-Douglas Medical Reserve Corps! Our Medical Reserve Corps Coordinator began a new life skills series in collaboration with Wenatchee Public Library. Our coordinator has worked extremely hard this quarter drafting the MRC activation guide and an outlined structure for specialized response teams with the MRC. In February, we hosted a tabletop exercise and integrated an MRC member to help our readiness team gain understanding and familiarity with volunteer support during responses. MRC members are also participating with the American Red Cross and Wenatchee Valley Fire Department for a training for Wildfire prevention that kicks off in May. This campaign will be focused on the number 2 Canyon area. Volunteers will be sharing fire prevention information, emergency applications and provide information on how to create your own go bag and what the evacuation levels mean.

## Community Medical Needs Vending Machine

During the first quarter, the Community Medical Needs vending machine experienced significant community engagement and utilization. A total of 230 iHealth test kits were distributed, along with 77 naloxone kits and 47 STI prevention materials. These numbers reflect a strong demand for accessible health resources and highlight the importance of maintaining low-barrier distribution methods within the community.





## Communicable Diseases & Epidemiology Report and Personnel



*Elizabeth Austin*

*Alissa Sindelar*

*Jenny Ezpeleta*

*Vacant*

*Vacant*

*Regional Epidemiologist & Biostatistician*

*PHN II: TB & CD Specialist*

*Regional Assessment Coordinator*

*PHN II OR III*

*PHN II or III*

### Division Highlights:

- A PHN II/III has accepted the position to work for CD-Epi, starting in May.
- We are continuing to accept applications and conduct interviews for another PHN II staff.
- The regional team proposed hosting a UW SEAL student this summer to do a landscape analysis on kratom and other drugs.
- The Regional Epidemiologist and Regional Assessment Coordinator met with the Okanogan County Public Health Department Board of Health and presented on their regional work.

### Communicable Disease and Notifiable Conditions

**About this Division:** *The Communicable Disease (CD) team plays a vital role in preventing and controlling communicable diseases in Chelan and Douglas counties by tracking and investigating outbreaks, notifiable conditions, coordinating public health lab testing, and providing locally relevant responses in accordance with the FPHS Standards.*

#### Case Investigations:

For Quarter 1 (January to March), the CD team conducted 201 investigations, which included:

- Notifiable Conditions: 70
- sexually transmitted infections (STIs): 131

See Table 1 and Table 2 on the following pages for visualization.

<b>Top 3 Notifiable Conditions (January – March, 2026)</b>	<b>Number of Cases</b>
Animal bites/suspect rabies exposures	<10
Legionella	<10
Carbapenem-Resistant Enterobacteriaceae (CRE)	<10

#### Overdose Reporting: <10

There have been <10 overdoses reported to the Chelan-Douglas Health district so far this year (between January 1-March 31st, 2026).



Table 1: Notifiable Conditions Investigated between Jan-March with 2025 data.

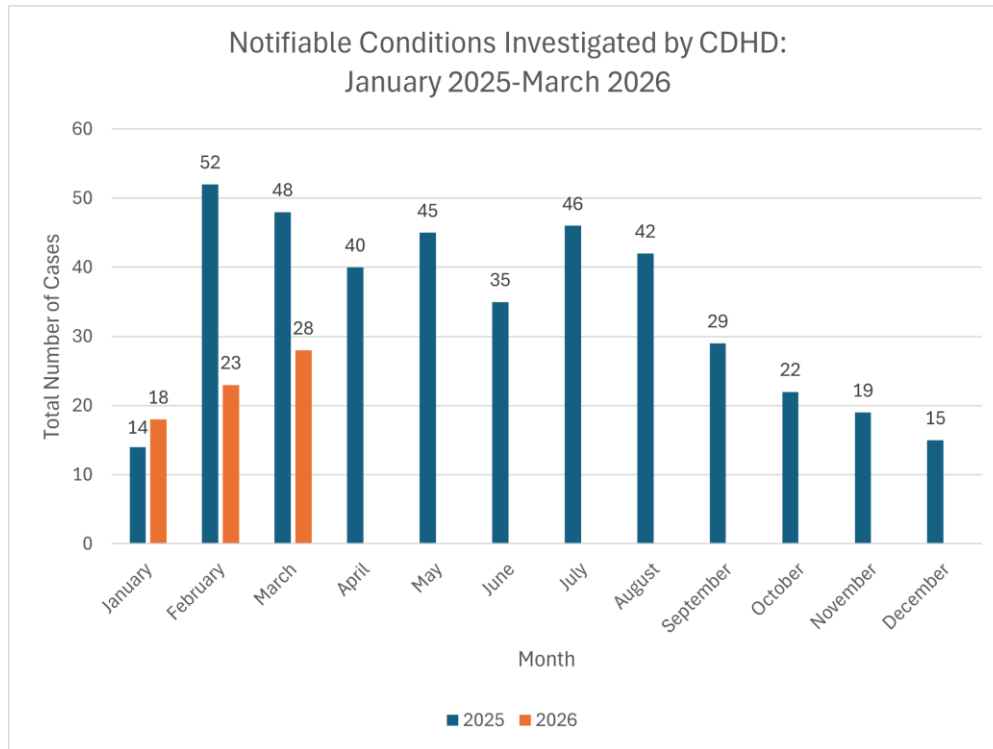
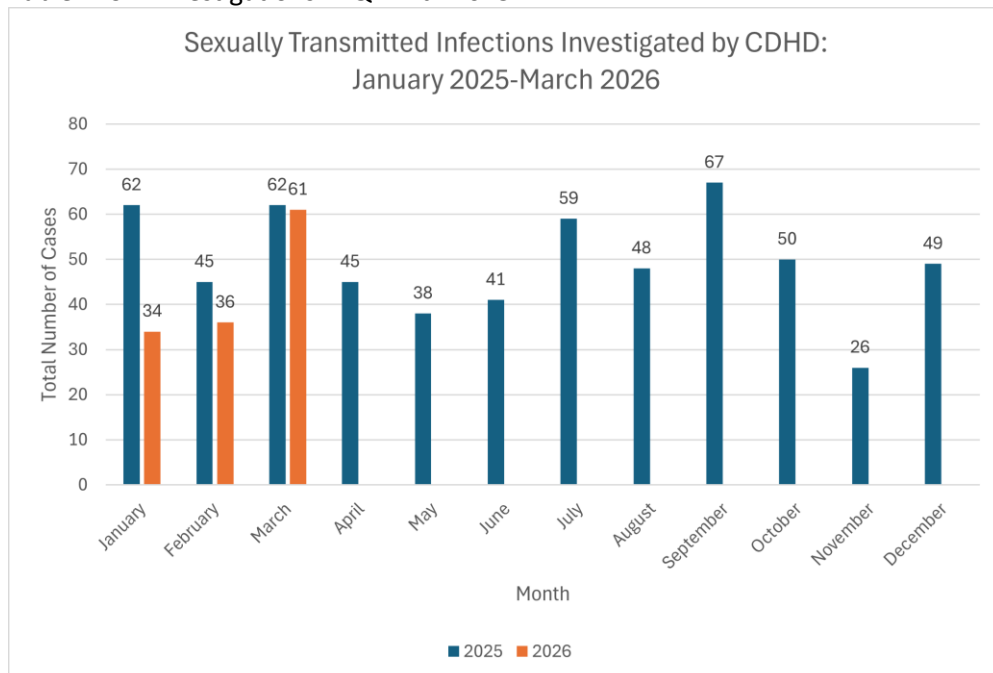


Table 2: STI investigations in Q1 with 2025





## Other Reporting:

The team responded to 8 outbreaks of viral respiratory illness and 1 outbreak of legionella in long-term care facilities. There were 26 total reports of school absenteeism (>10%) due to illness this quarter.

**Legionella Response:** The Communicable Disease team elevated their response to an outbreak of legionella in a long-term care facility to the Incident Management Team. The team collaborated with the Environmental Health Department to partner with the facility and WA DOH to ensure case investigation, infection prevention and environmental remediation measures were carried out effectively. This work supported efforts to improve the health and safety of a vulnerable population and enhanced our relationships with our community and state partners.

## Epidemiology, Assessment and Surveillance

***About this Division:** The CD-Epi team plays a critical role in assessment, surveillance and epidemiology by gathering and managing essential data, analyzing trends to identify community health priorities, and using that insight to inform planning, guide decisions and support public health actions. This work is supported in part by regional funding and staff provide epidemiology and assessment support to Chelan, Douglas and Okanogan counties.*

**Community Health Assessment (CHA):** The Regional Assessment Coordinator has worked with the Communications team to publish 5 “CHA Chapters” on the CDHD website in 2025. Information from these assessments are informing the Community Health Improvement Plan (CHIP) that is underway and will drive programming and strategic planning. Check them out here: <https://cdhd.wa.gov/health-data>

A final chapter, related to Nutrition in Chelan-Douglas Counties, will be posted in Q2. It is under final review and will be off to translation soon.

**Viral Respiratory Illness Dashboard:** The Regional Epidemiologist published the new Viral Respiratory Illness Data Dashboard to the Chelan-Douglas website (available at <https://www.cdhd.wa.gov/providers>).

Respiratory illness trends in recent weeks depict an overall decrease in respiratory disease activity at the county and regional level. During the month of March, there was an increase in RSV-associated emergency department visits and hospitalizations, primarily among patients less than four years of age. Influenza activity reached a peak in late January, largely driven by emergency department visits and hospitalizations among pediatric patients (<18 years of age). COVID-19 trends reflected a moderate level of increased activity in mid-February, particularly in emergency department visits among patients less than four years of age.

See tables 3 through 5 for more information.



# Communicable Diseases/Epi Report

Q1 2026

Table 3:

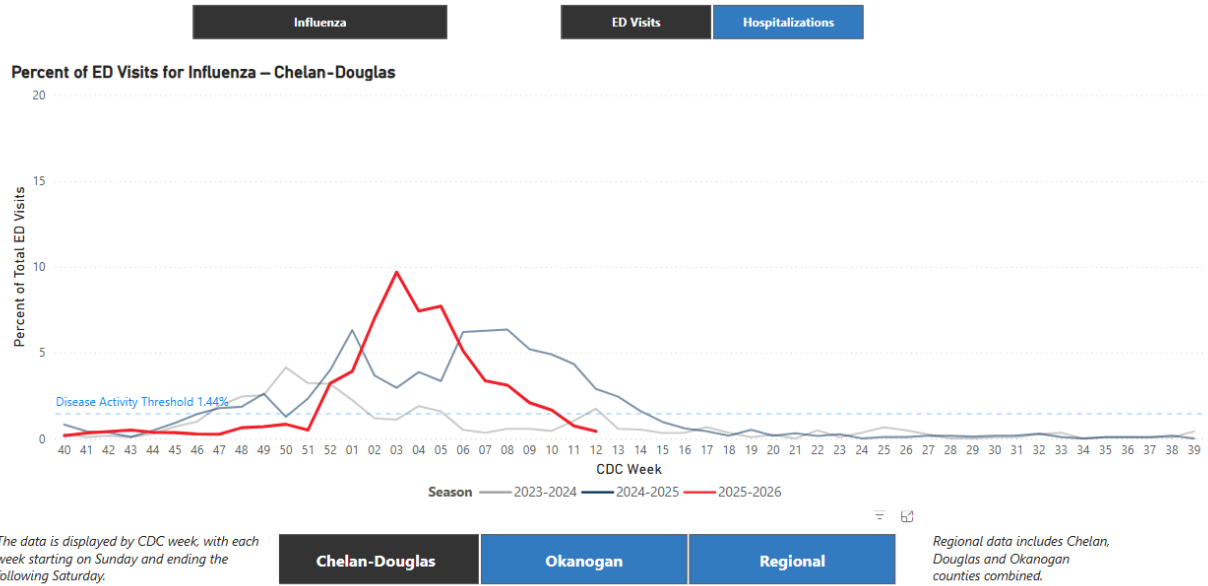
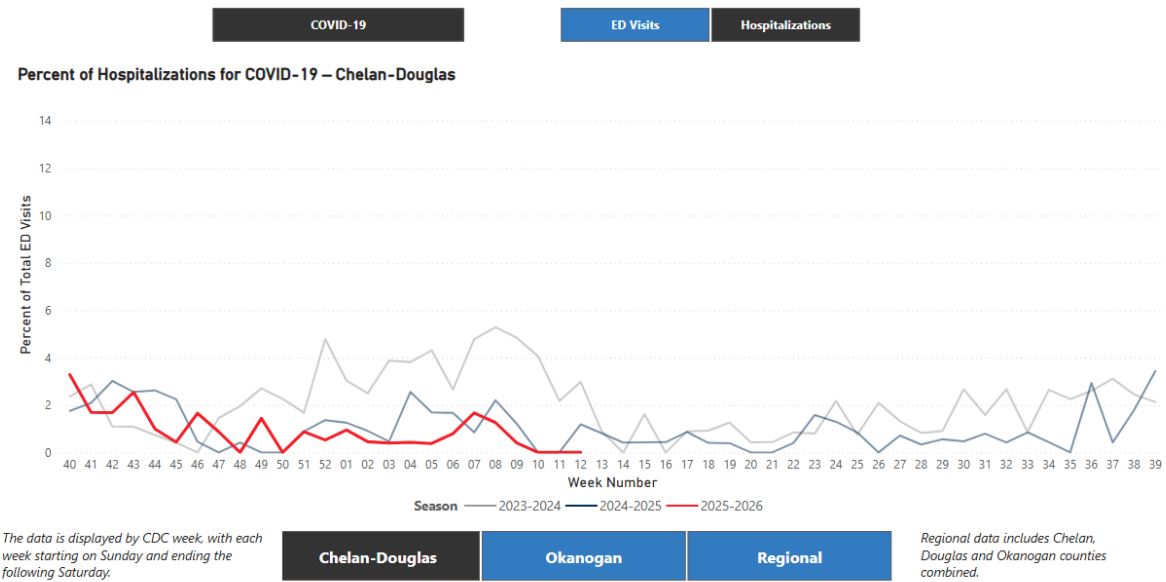


Table 4:

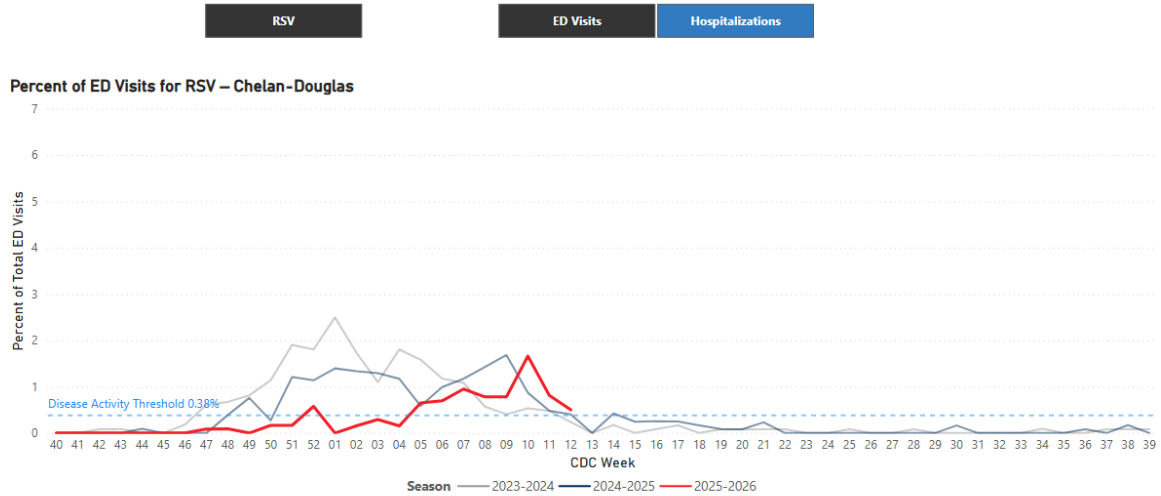




# Communicable Diseases/Epi Report

Q1 2026

Table 5:



The data is displayed by CDC week, with each week starting on Sunday and ending the following Saturday.

Chelan-Douglas
Okanogan
Regional

Regional data includes Chelan, Douglas and Okanogan counties combined.



# Communications and Outreach Report

Q1 2026

## Communications and Outreach Report and Personnel



*Maria Christina Monroe*

*Communications &  
Language Access Director*

*Miriam Pamatz*

*Public Health  
Communications &  
Outreach Coordinator*

*Adelaida Caballero*

*Outreach Worker*

### Introduction

In Quarter 1, the Communications team remained highly engaged in supporting the successful launch of the new website by ensuring all pages, documents, images, and videos met ADA compliance standards. This effort included extensive collaboration with the new website team through trainings, meetings, and the careful migration of content to the new platform, with a targeted mid-month launch. Additionally, the team provided timely promotional support for CDHD-led coloring contests to boost visibility and community engagement, while continuing to partner with internal and external stakeholders on various projects and presentations.

Outreach participated in 12 outreach events in the 1st quarter and had 1,886 different interactions with community members.

### Highlights:

- Collaborated with ABCD Program to promote 2nd Annual Coloring Contest
- Promoted Community in Color-Art Contest
- Shared reminders on Children immunizations
- Posted Press Release 2026-01: First Influenza Associated Deaths of the Season
- Sent letter to Providers on Legionella
- Communicated the New Parent Support Group via social media and flyers
- Participated in the activation of Incident Management Team, Chelan County EM Tabletop exercise, Region 7 IMT training, and CRASE training
- Updated lighting for signage outside building
- Assisted with Notifiable Condition Series-Legionella



# Communications and Outreach Report

Q1 2026

- Shared Community Health Assessment information via social media
- Completed Bilingual Staff assessments

## Partnerships:

The Communications and Language Access Director and the Public Health Communications and Outreach Coordinator collaborated and met with the following groups and agencies:

- Attended quarterly Regional PIO meeting
- FPHS: LHJ Language Access
- NCW Tech Alliance
- Kittitas Health District
- Streamline

## Outreach Events:



3/13-15:  
KPQ Home Expo Show @TTC, Wenatchee



3/31:  
Creating Community-Access to Health Services & Resources @ Bridgeport



# Environmental Health Report

Q1 2026

## Environmental Health Report and Personnel

### *Food and Living Environment*



**Dominique Gilley**

**Reid Brownlee**

**Giovanni Cervantes**

**Lisa O'Daffer**

**Ericka Bentancourt**

*Supervisor*

*Inspector*

*Inspector*

*Inspector*

*Inspector*

### *Onsite, Land-use, and Drinking Water*



**Richmond Petty**

**Juanita Garibay**

**Dom Cimmiyotti**

**Susan Baker**

*Supervisor*

*Inspector*

*Inspector*

*Program Assistant*

### *Solid Waste*



**Brian Dickey**

**Javier Ramos**

**Karina Castro**

*Supervisor*

*Technician*

*Health Educator*



## Administrative

- Hosted first ever Unpermitted Food Vendor Task Force on March 11<sup>th</sup>, 2026
- Staff compiled data and statistics to present in the annual report to be published for calendar year 2025
- The Environmental Health team continues to assist in ongoing Legionella cases during an active IMT

## Food and Living Environment

- The Food team continues to provide support, assistance, and resources for ongoing remedial measures in response to a Legionella outbreak
- Ongoing assistance and resources are being provided as it relates to drinking-water lead testing in school systems, with a new 5-year testing cycle beginning July 1, 2026
- The Food & Living Environment team continues to support continuity of operations of Communicable Diseases by supporting enteric disease investigations

## Onsite-Wastewater

- Currently developing a procedure for major plat and commercial proposals with multiple community drainfields pending legal review.
- All current SOP's transferred to SharePoint for digital access for OSS, Drinking Water, Water Recreation, and Land Use programs.
- Development of Online RME continues for progressing the upcoming Operations and Maintenance program required to be implemented by February, 2027.

## Solid Waste

- Participated in observation of Alcoa plant demo status
- Issued the Douglas County MRW facility's operational permit and attended the ribbon cutting ceremony.
- Optimized digital SharePoint operations and approximately 50% of all physical files are digitized.
- Attended Resource Recovery Facility Subgroup with the City of Wenatchee, Chelan County Public Works, Stemilt Growers, Chelan County PUD, Cascadia Conservation District, and others.



# Environmental Health Report

Q1 2026

## Statistics and Data

Food Program Essential Data				
	January	February	March	Total
<b>Routine Inspections</b>	109	40	70	<b>219</b>
<b>Pre-Opening Inspections</b>	11	2	8	<b>21</b>
<b>Plan and Menu Review</b>	9	23	9	<b>41</b>
<b>Temporary Event Permits</b>	9	23	11	<b>43</b>
<b>Exempt Temporary Event Permits</b>	0	0	0	<b>0</b>
<b>Complaints</b>	8	5	8	<b>21</b>

Water Recreation Program Essential Data				
	January	February	March	Total
<b>Routine Inspections</b>	0	4	3	<b>7</b>
<b>Pre-Opening Inspections</b>	0	0	0	<b>0</b>
<b>Complaints</b>	0	0	0	<b>0</b>
<b>Injury Investigations</b>	0	0	0	<b>0</b>
<b>Variance Reviews</b>	0	0	0	<b>0</b>

Solid Waste Essential Data				
	January	February	March	Total
<b>Facility Inspections</b>	11	3	8	<b>22</b>
<b>Solid Waste Complaints</b>	16	24	17	<b>57</b>
<b>Misc. Complaints</b>	7	17	10	<b>34</b>
<b>PPA Visits/Screening</b>	11	14	8	<b>33</b>

On-Site Wastewater Essential Data				
	January	February		Total
<b>Septic System Reviews</b>	12	27	47	<b>86</b>
<b>OSS Permits</b>	10	23	37	<b>70</b>
<b>Project Reviews</b>	2	4	10	<b>16</b>
<b>Drinking Water Reviews</b>	2	9	16	<b>27</b>
<b>Private Water Reviews</b>	1	6	9	<b>16</b>
<b>Public Water Reviews</b>	1	3	7	<b>11</b>
<b>Land Use Reviews</b>	3	10	10	<b>23</b>
<b>Plat/CUP Reviews</b>	8	10	7	<b>25</b>
<b>Mylar Reviews</b>	1	2	2	<b>5</b>
<b>Misc. Reviews</b>	3	0	10	<b>13</b>
<b>Field Inspections</b>	21	26	43	<b>90</b>
<b>Occupancy Approvals</b>	8	19	14	<b>41</b>
<b>Complaints</b>	6	7	4	<b>17</b>



## Chelan-Douglas Health Administrator's Update



*Kristen Hosey*

*Administrator  
CD/EPI Director*



*Corey Lawson*

*Deputy Administrator  
EH Director  
Clerk of the Board*



*Susan Jacques*

*Human Resources  
Director*



*Tammy Miller*

*Deputy Registrar & Public Records Officer*



*Maria Gonzalez*

*Clerk III*

### Highlights

- IMT Situational Report (SitRep) is attached.
- **National Public Health Week** was recognized **April 6–12, 2026**, with multiple internal and community activities celebrating public health staff and the essential services provided across Chelan and Douglas Counties.
- I continue to participate on the statewide Foundational Public Health Services Steering Committee during critical FY27 budget and allocation discussions affecting local public health funding.
- A new Chelan-Douglas Health District PHN II/III candidate has accepted employment, strengthening communicable disease and nursing capacity. Recruitment planning is also underway for one additional position.



- The Employee Manual update is in final review and is anticipated for future Board consideration following union review.
- Management development and workforce engagement efforts continued through recent leadership and all-staff trainings.
- Met with Our Valley Our Future to discuss opportunities for overlap between the CDHD CHIP process and OVOF Action Plan activities.

## Leadership & Workforce Development

- Supervisors and agency leaders participated in an additional Nash Leadership Training session on April 1, supporting management development, communication, and organizational leadership capacity.
- An All-Staff Meeting was held on March 26 to provide agency updates, reinforce priorities, and maintain organizational alignment.
- Recruitment efforts remain active to strengthen operational resilience and continuity in key service areas.

## Staffing Updates

We are excited to announce we have hired one PHN II/III and we are still hiring for 1 Public Health Nurse II TB and Communicable Disease Specialist (depending on experience/qualifications). The position application is located here: <https://cdhd.wa.gov/work-at-chelan-douglas-health-district>

## Statewide Leadership and Partnership

- I attended a two-day retreat of Washington State Association of Local Public Health Officials, where I currently serve as Vice President and will assume the role of President in June.
- Retreat discussions focused on governance modernization, strategic direction, and updating association bylaws and orientation materials for new members.
- This work is especially timely as approximately 80% of Washington local health jurisdiction Health Administrators have turned over in the last six years, creating a strong need for onboarding, leadership support, and statewide continuity.

## FPHS Steering Committee Update

- Additional Steering Committee meetings were held on April 2 and April 17 to address projected state budget constraints and FY27 allocation planning.
- April 17 objectives included finalizing reduction principles and strategies, determining system-level reductions, and identifying possible sector-level reductions if needed.
- I continue to advocate for sustainable foundational public health funding models that recognize the needs of smaller and mid-sized jurisdictions such as Chelan-Douglas.



# Administrator's Report

Q1 2026

## Organizational Governance and Administration

- The revised Employee Manual is being finalized for labor review and future Board presentation.
- Administrative work continues on policies, workforce systems, and governance processes that support modernization, accountability, and organizational stability.

## Contract Updates

Contracts between \$10,000 - \$25,000: none.

Executive Team Contracts between \$25,001-\$65,000: none.

# CDHD BOARD OF HEALTH



## INCIDENT SITUATION REPORT (SitRep)

**Incident Name:** 2026 Legionella and Communicable Disease Support

**Report #:** 1

**Operational Period:** March 16, 2026 – April 13, 2026

**Date Published:** April 13, 2026

---



### 1. Key Updates (Executive Summary)

- CDHD activated an Incident Management Team (IMT) response structure to coordinate investigation, environmental response, communications, and continuity of communicable disease operations.
  - Confirmed cases of Legionella associated with a local facility meeting outbreak criteria. Case counts are not displayed due to small-number reporting guidelines.
  - Immediate control measures were implemented, including water restrictions, remediation activities, and environmental sampling.
  - No widespread community risk has been identified during this reporting period.
  - No additional cases were identified during later operational periods.
  - Epidemiologic review refined one previously reported case as no longer associated with the facility based on updated symptom onset information.
  - IMT operations have transitioned from frequent startup meetings to a weekly monitoring cadence as the response stabilizes.
- 

### 2. What This Means (Public Health Impact)

- Primary risk remains concentrated among elderly and medically vulnerable individuals associated with the impacted facility.
  - Current actions remain focused on preventing additional illness and ensuring safe water system operations.
  - Risk to the public remains low.
  - Continued monitoring and multiple rounds of negative environmental testing are required before full resolution.
- 

### 3. What We Are Doing

- Conducting ongoing case investigations, exposure assessments, and surveillance.
- Supporting facility remediation, water safety measures, and plumbing corrective actions
- Coordinating with state and local partners
- Communicating with healthcare providers, facility residents/families and stakeholders.
- Preparing and updating healthcare alerts, talking points, and response communications.

- Maintaining documentation, operational tracking, and continuity of other communicable disease services.
  - Preparing PPE, fit-testing resources, and mobile response readiness if needed.
- 

#### ◆ 4. What We Are Watching

- Identification of any additional cases
  - Results of environmental (water) testing and follow-up sampling
  - Effectiveness of remediation measures
  - Compliance with required testing timelines and response plans
  - Staffing capacity impacts and operational sustainability
  - Coordination needs among facility leadership and partner agencies
- 

#### ◆ 5. Current Challenges / Risks

- Limited staff capacity due to concurrent public health workload and workforce shortages
  - Complexity of facility water systems and remediation sequencing
  - Multi-agency coordination requirements and communication timing
  - Potential delays related to sampling plans, remediation schedules, or testing results
  - Extended response duration due to regulatory clearance requirements
- 

#### ◆ 6. Resource Status

- Response continues to be managed with existing agency staff resources.
  - Capacity remains strained, but operations are being maintained.
  - PPE supplies and response materials are available.
  - Mobile response capability remains on standby.
  - Additional support may be requested if the situation expands
- 

#### ◆ 7. What to Expect Next

- Continued weekly IMT coordination and monitoring.
  - Ongoing environmental testing and review of remediation progress.
  - Continued surveillance for any new cases.
  - Updated communications to healthcare and community partners as needed.
  - Gradual transition toward demobilization when public health objectives are met.
- 

#### ◆ Requested Board Awareness/Action

- Information only at this time.

- Board awareness requested regarding staffing capacity impacts and potential future resource needs if the response expands.



# Chelan-Douglas Health District

200 Valley Mall Parkway, East Wenatchee, WA 98802

# Chelan-Douglas Health District Health Officer Update

James Wallace, MD, MPH

April 20th, 2026

# Chelan-Douglas Health Officer Update

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## **Respiratory Illness**

- Respiratory season slowly ending

## **Measles**

- New cases in NCW - *now is the time for preparedness*

## **Legionella**

- Surveillance, reporting, investigation and remediation

## **Alpha-gal in WA?**

- Tick season and surveillance

# Respiratory Illness Season - Acute Respiratory Illness - CDHD

Acute Respiratory Illness (ARI)

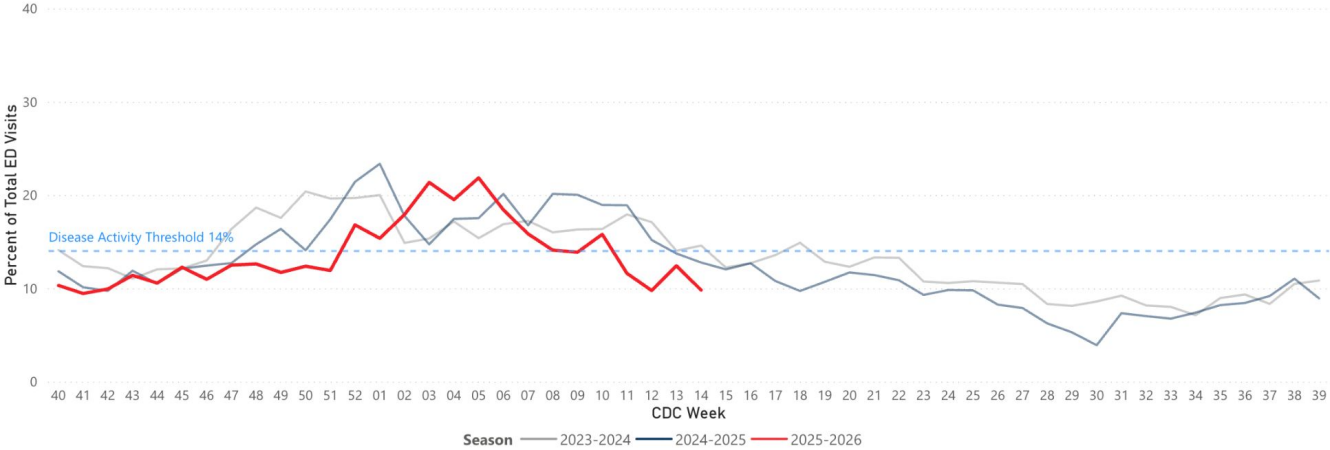
COVID-19

Influenza

Respiratory Syncytial Virus (RSV)

Visits by Age Group

Percent of Emergency Department Visits for Acute Respiratory Illness by County & Region  
2023-24 through 2025-26 Seasons



# Respiratory Illness Season - RSV - Chelan-Douglas

Acute Respiratory Illness (ARI)

COVID-19

Influenza

Respiratory Syncytial Virus (RSV)

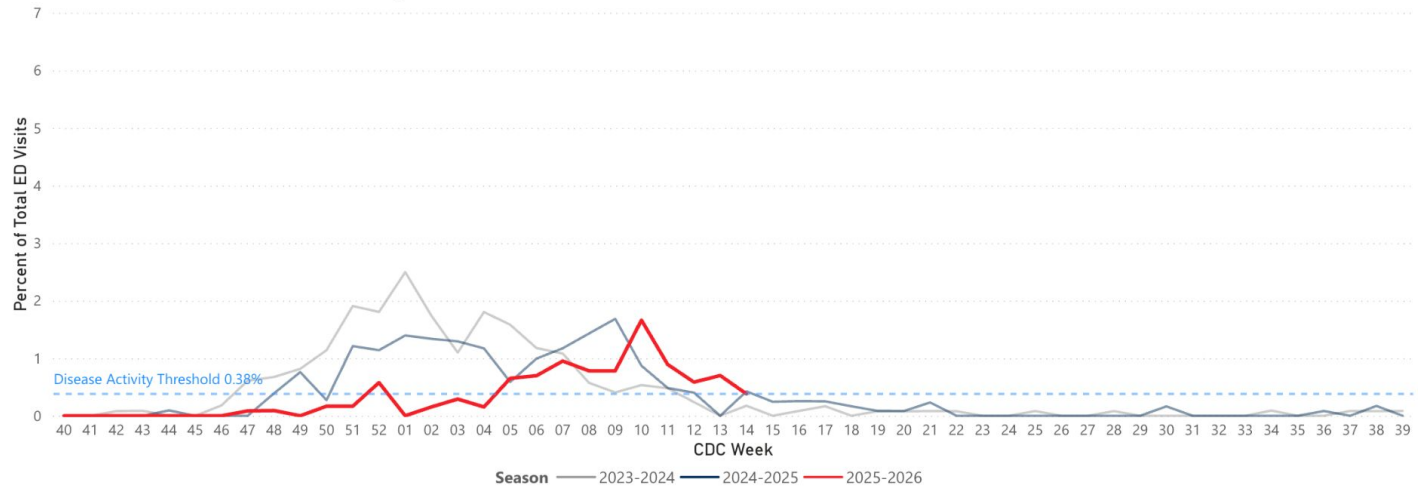
Visits by Age Group

RSV

ED Visits

Hospitalizations

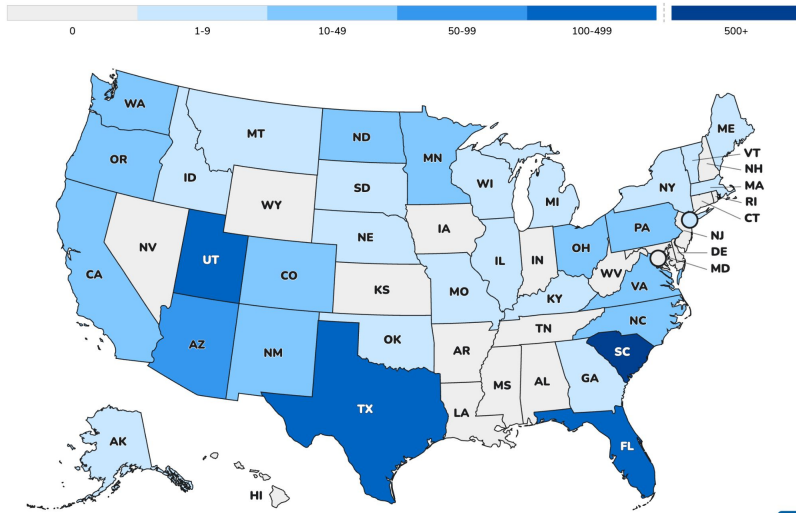
Percent of ED Visits for RSV – Chelan-Douglas



# Measles in WA

## Map of measles cases among U.S. residents

as of April 16, 2026



## 2026 Measles Cases and Outbreaks

Case Counts	Number of Cases	Percent of Total Cases
Measles Cases linked to a WA Outbreak*	21	57%
Measles Cases not linked to a WA Outbreak**	13	35%
Case confirmed, under investigation	3	8%
<b>Total 2026 Confirmed Cases</b>	<b>37</b>	<b>100%</b>
Hospitalized***	3	8%
Deaths	0	0%

## 2026 Measles Cases by County of Residence

County of Residence	Number of Cases	Percent of Total Cases
<a href="#">Snohomish</a>	14	37%
<a href="#">Clark</a>	8	22%
<a href="#">Kittitas</a>	5	14%
<a href="#">King</a>	3	8%
<a href="#">Stevens</a>	3	8%
<a href="#">Grant</a>	2	5%
<a href="#">Spokane</a>	1	3%
<a href="#">Walla Walla</a>	1	3%
<b>Total Measles Cases</b>	<b>37</b>	<b>100%</b>

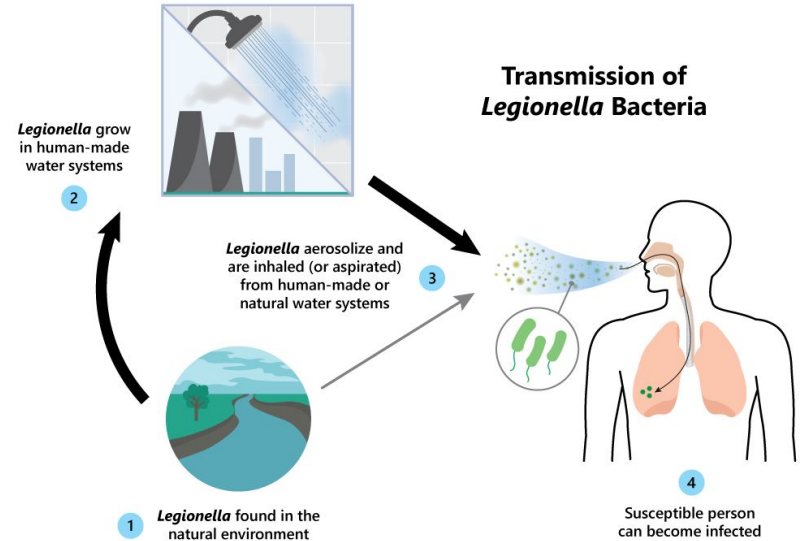
Refer to the Local Health Jurisdiction measles webpages linked above for more information about measles cases in that county.

[https://www.cdc.gov/measles/data-research/?CDC\\_AAref\\_Val=https://www.cdc.gov/measles/cases-outbreaks.html](https://www.cdc.gov/measles/data-research/?CDC_AAref_Val=https://www.cdc.gov/measles/cases-outbreaks.html)

<https://doh.wa.gov/you-and-your-family/illness-and-disease-z/measles/measles-cases-washington-state>

# Legionella Response

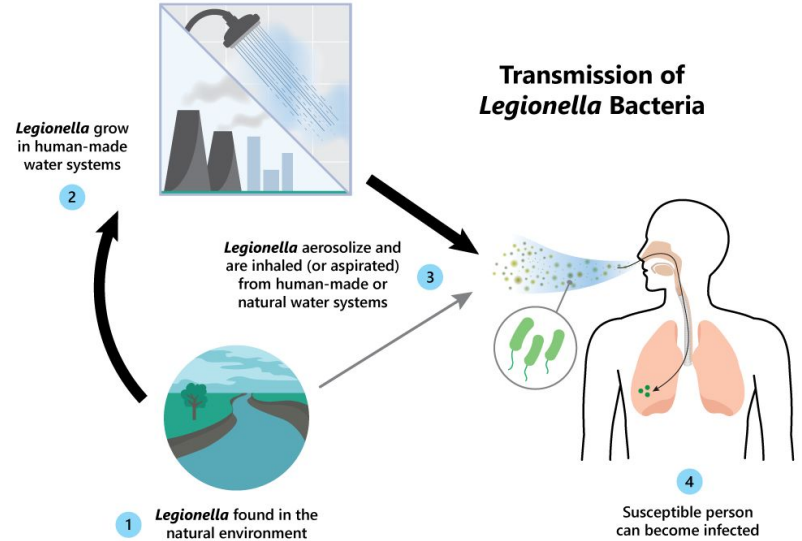
- ❖ **Routine Surveillance**
  - WA State Notifiable Condition
  - Testing via local and Public Health Labs
  - Facility water management plans
- ❖ **Case Investigation**
  - Confirm diagnosis
  - Manage case & care of patient with appropriate precautions
  - Identify potential sources of infection
  - Identify and manage other exposed persons
  - Evaluate environment(s) for legionella
- ❖ **Source Identification & Elimination**
  - Environmental assessment
  - Discontinue use of any potentially contaminated systems
- ❖ **System Remediation**
  - Water system treatment
  - Follow-up testing



# Legionella Response

## Legionella Resources

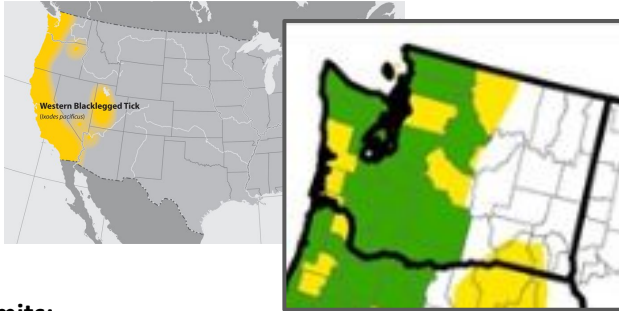
1. [CDHD Notifiable Conditions Presentation \(2/5/26\)](#)
2. [CDHD Provider Alert \(3/19/26\)](#)
3. [WA DOH Legionella Information & Guidelines](#)
4. [CDC Legionella Diseases](#)



<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Legionellosis%28Legionella%29.aspx>

# Alpha-gal in WA?

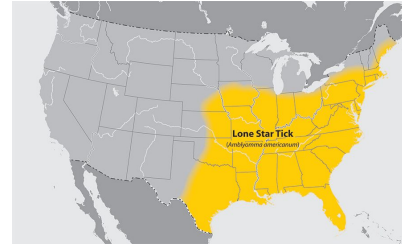
## *Ixodes pacificus* (Western Blacklegged Tick)



### Transmits:

- *Anaplasma phagocytophilum* (anaplasmosis),
- *Borrelia burgdorferi* (Lyme disease) and
- *B. miyamotoi* (tick-borne relapsing fever)

## *Amblyomma americanum* (Lone Star Tick)

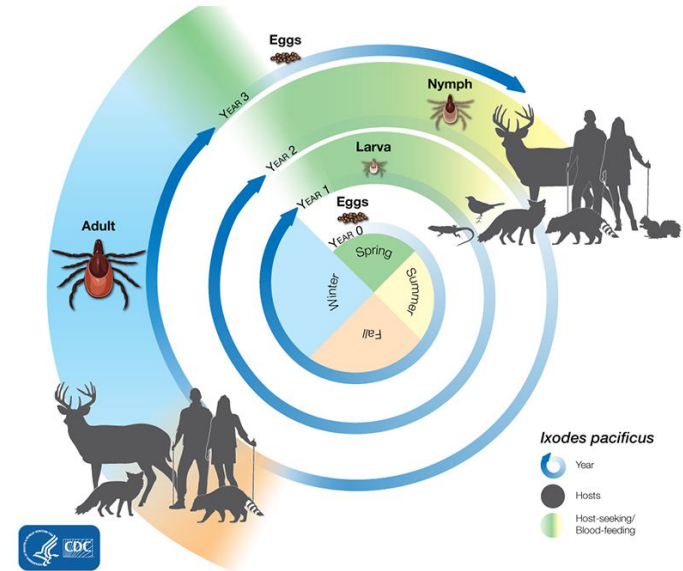


### Transmits:

- Bourbon virus
- *Ehrlichia chaffeensis*,
- *Ehrlichia ewingii* (ehrlichiosis)
- Heartland virus
- Tularemia
- STARI
- Alpha-gal syndrome

# Tick-borne Illness: prevention

- **Primary prevention (exposure to disease)**
  - maintain environmental/seasonal awareness
  - landscaping to maintain tick-safe zones
  - permethrin for clothing
  - DEET, eucalyptus/lemon oil
  - long pants, long-sleeved shirt, tuck/tape socks
  - check for ticks after potential exposure
- **Secondary prevention (disease after exposure)**
  - remove ticks immediately
  - grasp head/mouthparts with tweezers, pull straight out without twisting or jerking
  - wash hands, wound, apply antiseptic
  - monitor for febrile illness and rash
- **Tertiary prevention (complications of disease)**
  - early treatment reduces complications
  - seek healthcare immediately
  - follow evidence-based treatment recommendations



<https://www.cdc.gov/ticks/index.html>



# Chelan-Douglas Health District

200 Valley Mall Parkway, East Wenatchee, WA 98802

# Chelan-Douglas Health District Health Officer Update

James Wallace, MD, MPH

April 20th, 2026