

Carolyn Edmonds, *Board of Health Chair*

**BOH Members:**

Richard Conlin  
Dow Constantine  
George W. Counts  
Jan Drago  
Carolyn Edmonds  
Ava Frisinger  
Larry Gossett  
David Hutchinson  
David Irons  
Kathy Lambert  
Frank T. Manning  
Bud Nicola  
Margaret Pageler  
Alonzo Plough

**BOH Staff:**

Maggie Moran

## **KING COUNTY BOARD OF HEALTH MEETING PROCEEDINGS**

**January 18, 2002  
King County Council Chambers**

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### **Roll call**

- Richard Conlin
- Dow Constantine
- Carolyn Edmonds
- Ava Frisinger
- Larry Gossett
- David Hutchinson
- David Irons
- Kathy Lambert
- Margaret Pageler
- Joe Pizzorno
- Kent Pullen
- Alvin Thompson
- Karen VanDusen

### **Call to order**

Vice Chair Pageler called the meeting to order.

Vice Chair Pageler announced that the Ad Hoc Selection Committee would convene, prior to the February Board meeting, to develop recommendations for Board Chair and Health Professional Members. She stated that the plan was to bring a formal recommendation to the Board in February.

Vice Chair Pageler welcomed three new County Council Members appointed to the Board of Health – Council Members Dow Constantine, Carolyn Edmonds, and Kathy Lambert.

### **Announcement of Alternates**

No alternates were identified.

## **Approval of the Minutes**

The minutes of November 16th were approved without change. The minutes of December 7, 2001 were approved without change.

## **Public Comment**

Vice Chair Pageler announced that those members of the public who had signed in were each allotted three minutes. She asked that they state their names and addresses for the record.

**[Note: The following public comments were not edited for content/grammar. What follows reflects the verbatim transcript, except for known typographical errors.]**

### **Jim Stormo:**

"My name is Jim Stormo. I'm from Issaquah. The address is 9227 - 240th Avenue S.E., Issaquah, 98027. I am a resident of King County and I've [lived] in the Issaquah area for 40 years. I belong to a group of volunteers called the Small Well Owners Association. We got together in 1993 and we've been together ever since right before the rural public out there. We have something like 4,500 well owners that have three connections on an average. So we represent quite a few people. We're asked by previous administrations here to come in on the OSS business as well and so we started with that. The thing that I would like to bring to your attention very strongly, we know that you're always looking for ways to enlarge your budget by introducing fees to pay for regulations. But we find that the Health Board, the Health Department finances through fees and according to WAC 246.272.0400 and RCW 70.05.060 explains that these fees are to support alternate systems only and reflect actual cost. We've seen in the past, especially with the I-695 pass and so forth, for those things to jump way beyond cost. And to have this Health Department, Health Board off the General Fund violates State laws as far as I can tell. And it's not reasonable to think that all the people that are served on this thing are supported by the fees that the people in the County rural area mostly. And so I think that you need to go back and go to the Council and look for the \_\_\_\_\_ application to the General Fund.

\_\_\_\_\_ not only King County rules have provision for policing outside pollution to \_\_\_\_\_ or septic systems. Contamination by outside forces is not addressed in the various codes of King County, that's something else I'd recommend for you to look at. And Dr. Plough in the past, being on TV now and then, he looked at the spread of red measles and I looked at that as, that is a real problem that the kind of Health Board should be looking at, not rules and regulations that cost the taxpayers an enormous amount of money. Some of the things that I've looked at, median price of a home is \$245,000. You have to make \$98,500 to afford the first. \$310,000 with a high price is \$98,500, excuse me to afford the first and \$78,500 for the second. You know there's an awful lot of our people that are not making anything. So please consider these rules from that standpoint and look to reintroduce the essential things that the Health Board and Health Department represent such, you know, police, fire and safety, health. These are the essential things, not all the other wonderful things that we have on the agenda, but they certainly should come out of the General Fund which we pay lovingly all these high taxes. Thank you."

Vice Chair Pageler acknowledged Board Member Pullen:

Board Member Pullen asked if understood the testimony to indicate that Mr. Stormo thought that the way the fees were applied was illegal based on State law.

Mr. Stormo responded in the affirmative.

Board Member Pullen responded that perhaps legal counsel could take a look at that matter and report back, in writing, to the Board.

Vice Chair Pageler indicated that the Board had addressed that question recently with respect to the proposed onsite sewer regulations and the extent to which those fees covered the costs of the program. She concurred that it would be helpful to have such a report from the Board's legal counsel.

Vice Chair Pageler invited Mr. Richard Ludwig to address the Board.

**Richard Ludwig:**

"My name is Richard Ludwig. I'm President of the Small Well Owners Association, and I live at 23422 S.E. 158th in Issaquah. Last Monday the 14th our group met with Dr. Plough and his associates discussing this \$20 OSS fee that was applied for. Well, was proposed let's say. We had a nice meeting Dr. Plough, always a pleasure. While the fee may seem slight to those of you who deal of millions and billions of dollars, this fee along with increased health insurance premiums for 2002 exceeds Social Security increases in most cases of senior citizens, that's a fact. This means that again retired senior citizens will continue to fall further and further behind as we keep raising and adding fees. There is no question about that, that's been true for years. As I stated on December 7th, we are still waiting for a complete revision of Title 13, a review of 13, at which time we hope to be able to remove some of the most obnoxious provisions of that ordinance. There are many items that need to be changed in order to improve compliance by individuals and also practicability of the ordinance to make it workable. We look forward to this review, I understand, this coming spring. In respect to the current proposal for a fee, what service is the Health Department providing? On the face of it we could easily assume it is another fee to be used as a resource to free up property taxes for other purposes. Because of at least the appearance of a fee without a service, I find it difficult to accept the proposal. Perhaps it might be considered when and if we can modify Title 13 to alleviate those items which clearly are job creating, not service providing. Please review RCW 70.05.060. Fees for services shall not exceed their costs thereof for the service. I thank you very much."

Vice Chair Pageler acknowledged Board Member Pizzorno:

Board Member Pizzorno asked if the Department paid attention to surveillance of non-King County sources of pollution in the well water and whether or not the Department tested the ground water.

Dr. Alonzo Plough responded that non-King County sources were potential sources of contamination. He added that the testing done was on wells and included the determination of whether or not contaminants were present. He added that they were not necessarily able to pinpoint the source or flow from those same tests.

Dr. Ngozi Oleru stated that the Department of Natural Resources was the government agency that worked with groundwater issues.

Board Member Pizzorno stated that his understanding was that the Department was screening, however it appeared that the Department was screening through another agency that had primary responsibility. He asked how the Department calculated fees. He stated that his assumption was that there was both a direct assessment based on actual time for somebody to go out to check a well and some kind of administrative overhead. He said he could not recall whether or not the Board had actually gone through and discussed how fees were calculated.

Dr. Alonzo Plough indicated that staff had touched on that in previous presentations. He stated that fees were based on the total cost of the program. He added that the Department fees were not calculated to assure a surplus but to simply pay for the ongoing cost of the program and all of its elements - personnel cost, technical cost, travel cost. He added that as those costs increased so too must the fees be increased. Dr. Plough stated that it was generally because of mandated increases in costs and salary and that those costs must be passed along.

Vice Chair Pageler acknowledged Board Member Van Dusen:

Board Member Van Dusen stated that in terms of contamination sources from areas other than King County, she thought that one of the important things to keep in mind, particularly related to onsite sewage, was that there was a State law that all counties must comply with. She added that based on that common regulatory framework there was some assurance that what was done in King County also protected Pierce County and vice versa.

Vice Chair Pageler invited the next citizen forward to provide public comment.

**Ted Cowan:**

"Thank you. My name is Ted Cowan. I live at 14222 Hobart Road in Issaquah, and I'm also a member of the Small Well Owners Association. Now I, as was mentioned, we did get into sewage systems because they're a rural item as wells are. I presume that very few of you on the Council have septic tanks serving you, you have sewers. And sewers are fine, and septic tanks can also be fine because, particularly the rural areas, because if they're properly working, they recharge the aquifer and help our wells. That's where a lot of the water comes from. Anyway, my concern is not about so much with the septic systems, but because they usually work, usually the tanks themselves usually work. What fails is the drainfield. And it seems that there's very little emphasis on maintenance of drainfields. People think that if you could dump it down a sewer, you could dump it into a septic tank, and that's not true. Water-base paint doesn't do well in a drainfield. It tends to plug it up. And your requirement, when I was in the real estate business and a lot of people didn't like the idea of you demanding a reserve drainfield area. And I think that's very practical because if one, if a drainfield is ruined, it's usually cheaper to put it in a separate drainfield than try to repair the old one because you got to haul all the dirt out and it's, you often can't get a backhoe in anyway. My suggestion is that you encourage the, or maybe require the tax people to send out this brochure that I just received. It's dated January 2002, so maybe you haven't even seen it, I don't know. But it talks about how you take care of a drainfield. Don't use a garbage disposal. Don't run your chicken bones down the, into the sewer system. Anyway, if you got the tax people to send this brochure out to the zip codes in rural areas where they are likely to have septic tanks, it wouldn't cost you anything to distribute them and they'd go to all the rural property owners, and it could be, it wouldn't cost any extra postage. The only cost would be the

stuffing. And I don't know if the two departments can work together, but I should think that hopefully you could convince them that that was a worthwhile thing and certainly it's worthwhile educating the public. Anyway, I guess that's the thing I want to emphasize more than anything else. That's the one, that's the one. I see Mr. Constantine has chosen the gravy train down here rather than fighting transportation in Olympia. I'm sure he misses that drive."

Vice Chair Pageler acknowledged Board Member Pullen.

Board Member Pullen stated that he shared Mr. Cowan's concerns on the issues he raised about the need for better education. He stated that they certainly needed to make sure that the public was better educated on how to properly take care of a drainfield. Board Member Pullen stated that he had gotten increasingly alarmed in recent years about all the regulations that were being piled on people - homeowners, property owners - that didn't seem to make sense or have any value. He added as an example, the environmental health division inspection of the soils. He said it didn't seem to matter how well the soils perked, they looked to see if the soils had been disturbed. Board Member Pullen stated that disturbed could be anything 60 or 70 years in the past. He stated that if someone pulled out a stump that was considered disturbed even though that didn't affect the ability of the soil to perk.

Board Member Pullen asked if Mr. Cowan thought that they should be working towards performance based kinds of regulations as opposed to subjective and arbitrary regulations?

Mr. Cowan responded that he agreed with the latter. He added that if the drainfield didn't work, it didn't make any difference how good that septic tank was, how well it was constructed and worked. He stated that if the drainfield didn't work, the whole system didn't work. He stated that when the property was sold, a lot of banks and mortgage companies required systems check. He stated that they would get the system pumped but that didn't address the check of the drainfield. Mr. Cowan stated that he did not have a good solution to address that. He added that he thought they needed to appeal the homeowners that if they messed it up, it was going to be very expensive to fix. He said they needed to educate the public that it was to their advantage to take care of the system.

Board Member Pullen asked about the requirement that one needed to have five acres in order to have a septic system. He added that that did not necessarily guard against failure.

Mr. Cowan responded that that was true. He then described a property he had sold in Maple Valley Heights on lots that were less than a quarter of an acre. He said that most, but not all, of the septic systems were just fine because the property was on land with good perkable soil.

Vice Chair Pageler inquired if there were other members of the public who wished to address the Board or if there were any additional questions from Board Members. There being none, she proceeded to the Chair's Report.

### **Chair's Report**

Vice Chair Pageler directed the Board's attention to the list of 2002 meeting dates. She noted that the Board met on the third Friday of each month from 9:30 a.m. to 12:30 p.m. She added that it had been the Board's practice to rotate between the City Council Chamber and the County Council chamber. Due to scheduling conflicts she advised that members and the public consult each month's agenda or the Board website for the meeting location.

Vice Chair Pageler directed the Board's attention to draft calendar describing Board priority areas and the month each priority has been tentatively assigned. She noted that Ms. Moran, staff to the Board, would be convening work group of Department staff and community partners to help in the development of individual work plans for each of the priority areas. Vice Chair Pageler also noted that monthly agendas would also reflect routine business matters, such as work related to the merging of the Municipal Code of Seattle and the Board of Health Code. She stated that if members had questions or wanted additional detail about any of the priority areas, they should contact staff.

### **Director's Report**

Dr. Plough stated that he had two updates, the first on bioterrorism. He stated that bioterrorism preparedness continued to be a great challenge to Public Health nationally and in our region. In December he noted that there had been a smallpox hoax at SeaTac Airport, that really exemplified the importance of bioterrorism response planning; planning and capacity building without designated funding. Dr. Plough stated that the Health Department had been a catalyst in convening all of the First Responders in Seattle and King County in order to develop a consolidated countywide response. He stated that the plan was nearing completion. Dr. Plough also noted that they had convened a meeting in cooperation with the Washington Hospital Association of all of the CEO's from the major hospitals and health plans in the region to work on hospital based plans. He noted for example, that for smallpox response planning there had to be a single hospital designated that would be the incident hospital that would take those cases. Dr. Plough stated that planning was well underway with four task forces established to work on various aspects of the plan.

Dr. Plough estimated that thus far the Department had incurred nearly \$400,000 in unbudgeted expenditures in just the later quarter of 2001. Dr. Plough stated that on the national scene that the President was poised to sign an Act that would provide \$2.5 billion for Public Health and bioterrorism preparedness. He added that of that amount, about \$865,000 was earmarked for local public health. He added that while the amount might seem significant that state and local health departments might only realize somewhere in the neighborhood of \$600,000 and that it was one-time only money. Dr. Plough stated that the department's overall bioterrorism response plan would be completed on the 22nd of January and that they would tentatively plan for a Board presentation in February or March to review the elements of the plan.

Board Member Edmonds asked whether or not they were discussing regional response issues in their meetings with First Responders and the Hospital Association.

Dr. Plough responded that the focus had been on King County and not the tri-county region. He did note that they had First Responders from adjacent counties who had been part of that dialogue and that they were trying to develop parallelism between those responses, develop clarity about municipal response and border issues.

Board Member Edmonds asked Dr. Plough if he thought that type of coordination important. She stated that bioterrorism would not respect county jurisdictional lines. She also asked if the federal funding was going to be directly granted to states and local through a competitive process.

Dr. Plough stated that the intent was to get the money distributed as soon as feasible. He stated that the local public health and the National Association of City and County Health Officials had argued that the money should be allocated as grants based on per capita basis. He added that there had been some attempts to have CDC use that kind of a formula in the

distribution of funds to locals. Dr. Plough stated that the Association of State and Territorial Health Officials, an organization that represented state Health Departments had recommended that the money go to state Health Departments and have states develop an allocation plan for those dollars. Dr. Plough added that unless something changed before the President signed the Act, the CDC would determine how the \$865,000 was distributed, how much they kept within the U.S. Center for Disease Control, how much went to local public health, and what, if any, allocation was made separately to state and locals, or whether it was block granted to states.

Board Member Irons asked if there were any strings attached to the money.

Dr. Plough stated that the money would be dedicated toward the: national pharmaceutical stockpile, enhancement of computerized surveillance systems between hospitals and health departments and enhancements to an existing program called the "Health Alert Network". He stated that there was a lot of money that would never get beyond the beltway or not much further than the CDC in Atlanta. Dr. Plough stated that his primary concern was that those dollars were needed where "the rubber meets the road"; local and state health departments.

Board Member Irons inquired about the plan.

Dr. Plough responded that the Department plan would identify what was needed, identify gaps and identify strategies to address the gaps.

Board Member Irons....[question not picked up on microphone]

Dr. Plough stated that he thought those kinds of concerns should be brought to the attention of the administration as they made decisions regarding allocation of funds. He stated that he might recommend that the Board, if they elected to do so, could indicate the importance of building on municipal areas that had existing capacity, to refine that capacity by allocating the dollars where there was highest risk and where the response needed to be. He added that that might help to shape the funding priorities so that those dollars flowed where the problems were encountered.

Board Member Irons: [comment/question not picked up by microphone]

Dr. Plough responded that they would get something to the Board in writing that would allow them to make those statements prior to the staff briefing in February or March.

Dr. Plough stated that the other issue he wished to mention was related to the Department's funding. He stated that the Governor's budget proposal would phase out backfill funding for MVET in 2003. He acknowledged that Board members understood how MVET was a critical component of the core Department funding. He stated that MVET represented approximately one-third of local funds that were applied to core public health such as bioterrorism, communicable disease control activities, immunization program, tuberculosis program, HIV AIDS and sexually transmitted disease programs, and interpreter services. He stated that MVET funding had been prioritized by both the City and the County as a major item with the Legislature. He stated that that type of cut would be absolutely catastrophic to the basic core mission of the Health Department. He stated that he would appreciate the Board's support in exploring options to secure that funding.

Vice Chair Pageler acknowledged Board Member Conlin.

Board Member Conlin asked if there was a King County or City lobbying group that worked on issues related to funding.

Dr. Plough responded in the affirmative.

Board Member Conlin stated that he would be happy to go down to Olympia if that would be something that would be useful. He surmised that other Board members would do so as well.

Dr. Plough responded that that would be helpful.

Vice Chair Pageler acknowledged Board Member Pizzorno.

Board Member Pizzorno stated that he understood that cities were obviously very interested in backfill as well. He asked about the utility tax proposed by the County. He asked if that money would be used for regional services if it passed. He stated that cities generally were against counties having utility tax because it was added on top of their city's taxes. He stated that he thought Pierce County was proposing a different way of spending that money, which perhaps differed from King County. He asked if public health would benefit from this tax if passed.

Vice Chair Pageler acknowledged Board Member Irons:

Board Member Irons responded that there was a proposal that came through the King County Council that was going to the State Legislature supporting a utility tax. He stated that at that point in time the County Council did not have the legal authority to implement a utility tax. He stated that the discussion had been fairly broad and at that point in time if the King County Council was authorized to have a utility tax and it was implemented, the funding would go into the General Fund. He said it might indirectly impact the fund for the Board of Health, but that no decision had been made to dedicate the funds to any particular fund at this point in time.

Vice Chair Pageler acknowledged Board Member Pullen.

Board Member Pullen stated that Board Member Irons was correct. He said that the feeling he had from his colleagues who were facing a \$50 million dollar deficit was that the money had already been spent. He said he agreed the money could help with certain regional activities because it would take the pressure off other budgetary items.

Vice Chair Pageler stated that she thought it was fair to say that many of them thought public health was a vital county program that would otherwise be in jeopardy. She stated that she hoped that perspective was shared by the majority of County Council members if in fact the tax became a possibility.

Board Member Pullen responded that that was exactly one of the programs that County Council members had been looking after, but he thought they might be focused on certain County responsibilities through the County's Department of Health as opposed to more of a regional outlook, such as social services, public safety issues, and many, many other issues that were in jeopardy because of a diminished General Fund.

Board Member Thompson stated that if Board Member Pullen had any information on how the money would be spent, he would be interested in receiving said information and sharing it with colleagues at the City level.

Vice Chair Pageler invited Dr. Plough to continue his report.

Dr. Plough introduced Dr. Oleru, Chief of Environmental Health Services.

Dr. Oleru introduced her colleagues, Mark Allen, Senior Environmental Health Specialist and Ellen Larson, Program Analyst, responsible for the daily work on the Operation and Maintenance Program. Dr. Oleru directed the Board to a blue notebook and indicated that she would be referencing the book in her presentation. She stated that the notebook had been developed in response to questions raised at the November Board meeting related to a fee proposal for funding the State and County mandated Operation and Maintenance Program for onsite sewage systems.

Dr. Oleru stated that the benefits of that program included protection of public health and the environment, prevention of costly failures for homeowners and correct operation and maintenance that could extend the life of onsite sewage systems. Dr. Oleru stated that at the time they presented the proposal, the Board had stated several concerns regarding the fee. She added that the purpose of the briefing was to respond to those concerns.

Dr. Oleru proceeded to review the contents of the briefing book. She noted that the first section described the activities undertaken since November 16th; meetings with five representatives from the pumping industry and Public Health officials on November 20, 2001. She stated that a second meeting on November 27, 2001, where approximately 35 to 40 representatives of industry and the public attended. She stated that concerns were expressed about the proposed fee and they were undertaking research of alternative funding ideas advanced by those who attended the meetings. Dr. Oleru stated that she was committed to working with affected groups to craft an amended proposal that would then be presented to the Board at a future date.

Dr. Oleru directed the Board to the next section and walked through detailed responses to questions that had been previously raised by the Board.

Question: What progress has been made with the Operation and Maintenance Program from January 2000 to the present? Response: The King County Department of Natural Resources provided a two-year grant to Public Health in the amount of \$250,000 to initiate an Operation and Maintenance Program. With that grant they made the following progress. They instituted a notice on Title requirement, that went into effect on February 28, 2001. She added that "A Notice on Title" was a notarized document stating that the onsite sewage system owner acknowledged the system was on their property and defined the system owner's responsibilities for operating and maintaining the system. She stated that the grant helped them to institute a certification program that certified onsite system maintainers to monitor and maintain onsite sewage systems. The program included reviewing new and renewal applications, administering a competency exam, coordinating paperwork and issuing certificates of competency. Dr. Oleru stated that educational brochures had been developed about the Operation and Maintenance Program, and was available to homeowners, non-residential establishments that would include food establishments, businesses and schools and also realtors. The brochures explained in a question and answer format the Notice on Title and onsite systems sewage monitoring and maintenance requirements. Dr. Oleru stated that also purchased scanning system that included an image scanner, software, a server and workstation that could be used to scan as-builds and operation and performance

monitoring reports. Dr. Oleru stated that the grant allowed them to research other Washington County funding sources for the Operation and Maintenance Program, mostly counties in Western Washington. Operation performance monitoring reports for all onsite sewage systems were available for inspection reporting by the onsite sewage system maintainer.

**Question:** What are other counties doing with their Operation and Maintenance Programs?

**Response:** Dr. Oleru referred the Board to a table in their briefing books.

She stated that the table described program elements from the Snohomish and Pierce County programs in addition to King County. For each program element she described the similarity and differences between King County and the comparison county, including: data base activities, tracking and monitoring, educational mailings, inspection reminders, how information was collected, recording of Notice on Title, certification program, requirement of pumping reports, program funding.

Board Member Edmonds interjected and asked about the number of systems in each county.

Dr. Oleru indicated that they did not ask the other counties how many systems they had. She indicated that she would follow up with Board Member Edmonds to provide that number.

Board Member Edmonds stated that the way the other two counties were handling their situation was quite different.

Board Member Edmonds wondered if at the time the grant was funded had there been any discussion about how to fund the program after the grant expired.

Dr. Oleru responded that the grant was funded, in part, to answer that question. She stated that one feature of the grant was to develop a database in order to know exactly who and what they had in the County and based on that figure identify a way to fund the program. She added that based on information collected to date, they had formulated the proposal they brought forward to the Board in November. She stated due to the public testimony and questions raised by the Board, they realized that they needed to go back to the drawing board to revisit that proposal.

Board Member Irons asked staff to expand on what information they hoped to derive from the reports.

Dr. Oleru responded that it should become clearer as she walked through the materials. :

Board Member Irons asked about the difference in reporting requirements from county to county. He asked what was the rationale behind that requirement.

Ms. Marson responded that Snohomish County indicated that they did not see a reason to require the pumping reports.

Vice Chair Pageler acknowledged Board Member Irons.

Board Member Irons paraphrased his understanding of what had been stated. He said that he understood that the information was collected in a data base for new installations and they wanted to know where and what type of systems were in but they did not have the need

to know about how often the systems were pumped. He asked if his assessment was correct.

Ms. Marson indicated that he was correct.

Board Member Irons asked what Pierce County hoped to derive from having that data.

Ms. Marson responded that they did not use their reports, they filed them.

Board Member Irons indicated that he wanted feedback from staff as to how they intended to use the data that they were collecting.

Vice Chair Pageler acknowledged Board Member Pullen.

Board Member Pullen stated that he found the talk of grants and required reporting by constituents to be bureaucratic. He recounted that years ago, his constituents viewed the Health Department as a friend. He recounted a conversation he had had with a constituent in the rural area who felt that there were too many bureaucratic intrusions, too many forms to be filled out, paperwork that would be filed and never used. He stated that one constituent in particular, had a drainfield that failed. He stated that his constituent worried that if he had to pay for a new one it would cost a fortune and that the Health Department would make him run it off in the wrong direction or put in a mound system that would never work right. Board Member Pullen stated that instead, his constituent and his son dug up the drainfield, cleaned up the muck, and installed new drain tiles. He added that they then went out to the County road, scraped off gravel from the shoulders and used that gravel to fill in their new drainfield." Board Member Pullen said he told his constituent that he had violated about eight different laws as well as risked the health of his family. He recounted that his constituent said he did not care because he felt that the County had become so intrusive that he would rather beat the County and risk his health to avoid all the bureaucracy. Board Member Pullen indicated that he found that to be shocking; that they had gone so far in demands for intrusive paperwork that they might be losing the battle and perhaps making the health situation worse just because of that kind of rebellion. He added that he wanted to alert staff that more and more of his constituents appeared to be doing things without permits because they no longer considered the Health Department a friend but an entity that was overly intrusive and overly bureaucratic. He said he was concerned about that because he thought it could be hurting health and safety not helping it.

Vice Chair Pageler stated that she hoped Dr. Oleru would continue the presentation and continue to focus on the sanitation requirements and the reduction of risks to citizens. She stated that to the extent that either Natural Resources was concerned about protection of groundwater and Health was concerned about health protection it would be important for Dr. Oleru to remind them of that.

Dr. Oleru continued with the next question.

**Question:** What process was followed when a failing system was identified?

**Response:** She referred the Board to a detailed flow chart in their briefing books that outlined the steps taken when a system has failed.

Dr. Oleru recounted a situation when a homeowner called the Health Department regarding a failed drainfield. Dr. Oleru described the situation as follows: The homeowner was told that because sewer was available she had to connect to sewer. She was sent a King County No

Interest or Low Interest Home Repair Loan brochure and told to contact the local sewer district. A sewage failure report was made and sent priority through processing. Then the sewage failure complaint was assigned to a sanitarian and a site visit was made within 10 days. The failure was confirmed; sewage surfacing at the septic tank area. The sanitarian contacted the homeowner by phone to discuss options and to provide information on contacts to the local sewer district. At that point they sent out a "Notice of Violation" and the homeowner was given two weeks to begin the procedure of connecting to sewer. No response was received within the two week time period so a second Notice of Violation was issued. The homeowner was given another two weeks to comply, based on the regulations. When the two weeks expired there was no response from the homeowner so another site visit was made to determine whether or not there was still a problem. The problem was confirmed and the last step in the civil penalty process was initiated. A "Notice and Order" was issued giving another two weeks to comply, at which time civil penalties in the amount of \$25 a day would be levied. When that date for compliance arrived there was no notification from the homeowner that any action had been taken. The sanitarian telephoned the local sewer district and was informed that the residents had indeed been connected. The sanitarian then made a visit to determine that the septic tank had been abandoned properly and that there was no longer a health hazard. With that determination they then closed that case and noted it to be abated.

Board Member Van Dusen interjected and thanked the staff for the materials prepared in response to Board questions. Board Member Van Dusen stated that she wanted to make sure that Board members did not assume that each time there was a failure people were required to connect to the sewer. She added that the sewer connection was only when there was a certain distance to that septic tank and it was an old system.

Dr. Oleru stated that it that particular situation connection to the sewer was the remedy available.

Vice Chair Pageler asked what the fee would support.

Dr. Oleru responded that the new fee would support the following: establishment and maintenance of the data base, provision of periodic reminders about monitoring and maintaining systems, provision of educational materials to the public, responding to public inquiries and emergencies, attendance at public meetings and industry meetings to promote the Operation and Maintenance Program, management and promotion of Notice on Title and maintenance of county-wide information of onsite system failures. She noted that that information would be used to identify vulnerable areas for public health and groundwater contamination programs.

Vice Chair Pageler acknowledged Board Member Irons.

Board Member Irons asked about item number 11. He asked if this item referred to an expansion of inspections done for food handling or the on site septic system inspection.

Dr. Oleru responded that that item referred to the onsite sewage systems; inspection of those systems at food service establishments.

Board Member Irons asked if that required a different set of inspectors.

Dr. Oleru responded that the onsite system maintainer did that particular inspection.

Board Member Irons asked if it was their intent to dual educate the food handler inspectors so that when they were out doing the food handling inspection, they also looked at the septic system.

Dr. Oleru responded that the food handler could educate the owner and operator about maintaining their systems, but that the actual check of the system was to be done by a certified onsite maintainer; people whom had completed the certification program.

Board Member Irons asked if that certification was then sent back to the Health Department?

Dr. Oleru responded in the affirmative.

Board Member Irons asked Dr. Ngozi to expand on item number 9.

Ms. Marson responded that they could use the GIS system to download information that could then be scanned into their database. She stated for example they could query the data base and ask how many sand filters had sewage surfacing in the year 2002, transfer that information to GIS and map out where those areas were. They would then determine if certain areas had sand filters with more sewage surfacing than other areas.

Board Member Irons asked how they would use that information. He stated that he did not see how that would be beneficial for them.

Dr. Oleru stated that it would be beneficial because it would help them target education. She stated that if they knew of an area that had particular problems, they could target education to those areas either through public meetings or direct mailings to homeowners in that area.

Board Member Irons asked about the cost comparison between a straight database [area, region, street, city and zip code] and the geographical capability as described. He said that he would be interested at a later date to learn about the cost benefit of this part of the program.

Dr. Oleru responded that a lot of those pieces were in collaboration with existing systems. She stated that it was ongoing work within the Department and the Department of Natural Resources and other County agencies. She added that it was not necessarily doing new work as it was collaborating with mechanisms that were already in place.

Board Member Irons asked if it was as simple as taking the database and importing it into the GIS and overlaying the information.

Dr. Plough responded that the Department had GIS capacity. He stated that it represented a run off the database of our existing GIS system. Dr. Plough stated that it would be important to cost out the various components of the program when they brought back another proposal.

Board Member Irons inquired about item number 6. He asked if it was a mandated element and whether or not the escrow agent was mandated to do the notice on title. He asked that some point in the future he wanted to better understand what they would be doing as far as managing and promoting a Notice of Title beyond educating the escrow companies, basically giving them a legal notice they had to do it by law.

Dr. Oleru responded that there was information that came back to the Department that was then maintained as part of the record and the database.

Ms. Marson responded that managing and promoting Notice on Title was simply indicating that they were educating the public that this Notice on Title must be filed and informing them through their brochures did that. She added that they required Notice on Title to be filed with new installations, prior to the issuance of a permit.

Board Member Irons stated that that meant an additional line item on the brochure you that described this requirement. He stated that he was trying to determine how broad the scope was.

Vice Chair Pageler acknowledged Board Member Van Dusen.

Board Member Van Dusen asked for clarification about item # 8. "Provide consultation to owners on failing systems." She asked if this fee would be used to offset existing services or did they anticipate that with better record keeping they would have a lot more to do that would require additional support.

Dr. Oleru indicated yes to the latter statement.

Board Member Van Dusen stated that she believed that there was a requirement that if there were areas of special concern they would provide targeted education.

Dr. Oleru moved to the next question.

**Question:** How would the fees collected be used to accomplish this program?

**Response:** Dr. Oleru referred the Board to a table in their briefing books that described the program elements and what portion of the fee would support each element.

**Question:** How did they arrive at a pumping fee to support this program?

Board Member Pullen asked staff how they had arrived at the trend numbers related to investigations.

Dr. Oleru stated that they did not have sufficient record keeping at that stage to be able to say for sure that it was increasing at a particular rate. She added that they would be able to have that kind of information with the systems that they put in place. She referred them to the notebook section that described the number of failed systems that were responded to in 2000 and 2001.

Dr. Oleru stated that it was a non-funded mandate from the State and they needed to find a way to fund the program. She added that because current expense funds were not available, they had been reviewing several ideas and a simple charge on all systems pumped seemed to be a direct approach. She added that the ramifications of this particular proposal were not totally considered and after they heard concerns we were committed to finding an alternative. She stated that they expected to come back to the Board in the future with a proposal.

Dr. Oleru continued with the next question.

**Question:** How often were tanks pumped?

**Response:** It depends on the system, how the owners use the system, the amount of soils that accumulated in the septic tanks. Some tanks were pumped between 3 to 4 years while others could go for 10 years or more.

**Question:** How many of the estimated 100,000 systems were now documented in their records?

**Response:** Currently they have 56,000 onsite sewage systems in their computer records. The systems were presently filed under parcel numbers and information in the notebook would provide additional details. Dr. Oleru stated that they would have the system in place by the middle of the next year.

Dr. Oleru referred the Board to a table in their notebooks that showed the different kinds of systems that they had in the County.

**Question:** Are grant funds available to assist owners with financial hardship to repair the failing systems?

**Response:** Yes. People who have limited income or express an inability to pay are referred to a King County House and Repair Loan Program. The first one is a Deferred Payment Loan Program that provides a maximum of \$18,500, no interest, no monthly payments, with repayment when the house is sold or title transferred. She stated that there was a second loan program, a Matching Fund Program that provided a maximum of \$13,500, no interest, no monthly payments, to be repaid at sale or title transfer. She stated the third program, a Grant Program designed for emergencies could provide a maximum of \$1,500 and for mobile homes a maximum of \$2,700. She added that they routinely provided this information to residents.

Dr. Oleru described the next steps in the process. She stated that they were pursuing several ideas for revenue generation and seeking a legal opinion on the different options that came up as a result of their consultation with industry and the public. She stated that once they had a viable proposal they would come back to the Board for consideration.

Dr. Oleru described the remaining sections of the notebook for the Board's review and consideration.

Board Member Hutchinson: Asked who qualified for grants.

Dr. Oleru responded that the County Community Services Department administered the grants and loan programs and that they developed the eligibility criteria.

Vice Chair Pageler acknowledged Board Member Van Dusen.

Board Member Van Dusen asked how the collective fees, referenced on page 5 of 6 would be used to accomplish this program. She added that in the context of her reflection on the statements made by Board Member Pullen about the Health Department as a friendly force and in looking at the three areas described she believed that they represented fundamental elements of the program and should be funded. Board Member Van Dusen stated that when staff looked at the whole onsite program and returned to the Board with a proposal if they

could describe how much of this kind of a function they were currently being funded to provide. She stated that she respected the concerns of the public and the struggle that the agency had.

Vice Chair Pageler stated that she sat on the Regional Water Quality Committee. She stated that sanitation was a public responsibility and that those on sewage systems paid for sanitation through sewer rates. She added that thus it did become a fee for service. She stated that she had been trying to calculate how much each person on sewer system paid on an annual basis for those services, and how that compared with the lifetime costs of onsite systems. She added that it was hard to calculate because it depended on how much capital one put into their onsite system. She further added that it was probably not very instructive to make that comparison, however it was important to note that if one was on a sewage treatment system, one did pay for it as part of their homeowner costs; that it was not paid out of the General Fund of the County or the local municipality.

Board Member Van Dusen stated that she thought the point was well taken. She described the reality that onsite sewage systems provided another alternative to treatment plants. She said that she had noticed that other counties have the concept of an operating permit which pulled together a number of things through an ongoing fee similar to what people on public sewer systems paid as part of a monthly fee. She stated she could understand why there was confusion about what the fee supported and did not support. She added that the public sewer fee was the ongoing operation and maintenance and all the other support that went into the Metro system.

Dr. Plough indicated that his report was concluded.

Vice Chair Pageler indicated that Board Member Pullen had distributed a memo on the issue of mercury fillings. She added that that subject would be discussed at a future Board meeting. There being no additional business before the Board, the meeting was adjourned.

KING COUNTY BOARD OF HEALTH

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Margaret Pageler, Vice-Chair