

Exhibit 12

Erik Birnel

From: Bob Lutz
Sent: Tuesday, August 25, 2020 10:43 AM
To: Breean Beggs
Subject: FW: Op Ed

Breean,
Is this something you're aware of?
It comes as quite a surprise and certainly nothing that's been discussed with me, either in person or by ECBOH...
-b-

Bob Lutz | Health Officer | Spokane Regional Health District | Administration
Direct: 509.324.1469 | Fax: 509.324.1507 | blutz@srhd.org | srhd.org

From: Amelia Clark <aclark@srhd.org>
Sent: Tuesday, August 25, 2020 9:47 AM
To: Bob Lutz <blutz@srhd.org>
Subject: RE: Op Ed

I saw it from Kelli.

My concern is that when we spoke about OpEds, I expressed wanting SRHD to be "out of" the OpEd business. The only reason I let this one go forward is because I thought it would be from Maria (didn't realize it would also be from the health district), which is why I emailed the question yesterday.

The board does not want SRHD sending out op eds at this time -- I will let Kelli know that we are no longer participating in the OpEds so if/when Spokesman reaches out to us, we are a "no".

Amelia E. Clark | Administrative Officer | Spokane Regional Health District | Administration
Direct: 509.324.1518 | Fax: 509.324.1507 | aclark@srhd.org | srhd.org

From: Bob Lutz <blutz@srhd.org>
Sent: Tuesday, August 25, 2020 9:23 AM
To: Amelia Clark <aclark@srhd.org>
Subject: RE: Op Ed

Sure,
Had you not seen it from Kelli?

Bob Lutz | Health Officer | Spokane Regional Health District | Administration
Direct: 509.324.1469 | Fax: 509.324.1507 | blutz@srhd.org | srhd.org

From: Amelia Clark <aclark@srhd.org>
Sent: Tuesday, August 25, 2020 9:22 AM

To: Bob Lutz <blutz@srhd.org>
Subject: RE: Op Ed

So, it looks like the OpEd had you and Maria listed as authors.
Let's discuss when you are back in the office. Thanks, Amelia

Amelia E. Clark | Administrative Officer | Spokane Regional Health District | Administration
Direct: 509.324.1518 | Fax: 509.324.1507 | aclark@srhd.org | srhd.org

From: Bob Lutz <blutz@srhd.org>
Sent: Monday, August 24, 2020 10:21 AM
To: Amelia Clark <aclark@srhd.org>
Subject: RE: Op Ed

It was published yesterday with Maria

Bob Lutz | Health Officer | Spokane Regional Health District | Administration
Direct: 509.324.1469 | Fax: 509.324.1507 | blutz@srhd.org | srhd.org

From: Amelia Clark <aclark@srhd.org>
Sent: Monday, August 24, 2020 10:17 AM
To: Bob Lutz <blutz@srhd.org>
Subject: Op Ed

I'm working from home today.

Question on the OpEd – is it just going to come out from Maria Howard? When we talked a few weeks ago I thought that was the case, but when Kelli sent me the last draft it still has your name on it too.



Amelia E. Clark | Administrative Officer | Administration
Direct: 509.324.1518 | Fax: 509.324.1507
aclark@srhd.org | srhd.org



Exhibit 13

Michelle Fossum

From: Amelia Clark
Sent: Thursday, May 7, 2020 7:25 AM
To: Amelia Clark
Subject: FW: Leadership Questions

These questions need answered to move forward at EOC. Frustrations over direction.

Amelia E. Clark | Administrative Officer | Spokane Regional Health District | Administration
Direct: 509.324.1518 | Fax: 509.324.1507 | aclark@srhd.org | srhd.org

From: Amelia Clark
Sent: Tuesday, May 5, 2020 3:20 PM
To: Bob Lutz <blutz@srhd.org>
Cc: Lyndia Wilson <lwilson@srhd.org>
Subject: RE: Leadership Questions

I think some of them were for a meeting on Thursday morning (I think the ones that Ray asked – he was asking from a list of questions that came out of a business strategy meeting...) you might want to talk to Ray prior to the presentation on Thursday morning at EOC.

Amelia E. Clark | Administrative Officer | Spokane Regional Health District | Administration
Direct: 509.324.1518 | Fax: 509.324.1507 | aclark@srhd.org | srhd.org

From: Bob Lutz <blutz@srhd.org>
Sent: Tuesday, May 5, 2020 3:10 PM
To: Amelia Clark <aclark@srhd.org>
Cc: Lyndia Wilson <lwilson@srhd.org>
Subject: RE: Leadership Questions

I'm going to have dead finger if I answer all these questions, which for many I don't have absolute answers, fully acknowledging everyone, including me, would like!
We can discuss on Thursday...
-b-

Bob Lutz | Health Officer | Spokane Regional Health District | Administration
Direct: 509.324.1469 | Fax: 509.324.1507 | blutz@srhd.org | srhd.org

From: Amelia Clark <aclark@srhd.org>
Sent: Tuesday, May 5, 2020 2:30 PM
To: Bob Lutz <blutz@srhd.org>
Cc: Lyndia Wilson <lwilson@srhd.org>
Subject: Leadership Questions

Bob -

During the leadership meeting today, we started a list of “we need Bob” questions....here are the questions and who asked/needs the follow up....Thanks, Amelia

(Kelli) – Are the cases in the VA hospital considered cases? According to the MD at the JIC today they are all being given acute care, so we are not sure how to count these cases....
No...I can address this with her tomorrow; some confusion last week, but clarified to the larger group

(Ray/Steve) – What are the data points needed to open the economy? This is for the dashboard for Spokane County and the 5 -county commerce region related to the proposal to open up regionally.
Using the document forwarded by the Governor that I sent to Steve, I’m hopefully of learning specific cutpoints for these; to date, just metrics

(Ray) – Definitive testing guidelines. This is for general testing. We also need to figure out what the business testing is? Are there other requirements? Do all businesses need to test? Is there criteria for business to test all employees? By industry? Risk level? Job description?

(Ray) – Are you going to follow the statewide guidance on testing criteria? This is needed for the application related to the region. There is potentially three different things happening (CHAS screens everyone, Testing site only tests symptomatic based on DOH criteria, we don’t know the hospital system, etc.)

(Ray/Susan) – Clarification on auxiliary site for the public health lab? Can the Sacred Heart SP lab be used? If yes, we need a list of materials needed for purchase.

(Ray/Steve) – Is there a way to close the loop between the results that go to the hospitals and CHAS regarding test for a more accurate case count for total test run? Some type of faster turnaround?

(Susan/Steve) – Can you share out the daily ICU and hospital bed aggregated data? (It’s whatever Heather G. is sharing out)



Amelia E. Clark | Administrative Officer | Administration
Direct: 509.324.1518 | Fax: 509.324.1507
aciark@srhd.org | srhd.org



Exhibit 14

Michelle Fossum

From: Amelia Clark
Sent: Wednesday, June 17, 2020 5:48 PM
To: Amelia Clark
Subject: BL -COVID Facility Concerns

On Friday, June 12 around 7:15 p.m. I received a call from M. Kunev, who had just received a call from O. Knezovich on the setting up of a field hospital due to inmates from WA-DOC being COVID+ and needing to be transferred to Spokane. I informed M. Kunev that I was unaware of this occurring. I called S. Smith who has access to SRHD epi data to understand what was happening. On Friday, 6 inmates were sent to Deaconess in Spokane after testing positive. It was unclear if these individuals were from Coyote Ridge or Airway Heights. The hospitals still had significant capacity and were not at a surge level.

I call M. Kunev back. While on the phone, A. French called me. I shared the above information with both M. Kunev and A. French and explained that I did not authorize the "setting up" of a field hospital as there was still surge capacity at the hospitals and that there were only 9 individuals hospitalized at the time for being COVID-19+.

In the conversation with M. Kunev, she shared that she had also spoken with Peg from Providence who indicated that in conversations with the hospitals and her staff, there was still plenty of capacity. M. Kunev communicated back to O. Knezovich/DEM.

The next morning, Saturday, June 13, I received a call from L. Wilson about setting up of a field hospital due to inmates from WA-DOC being COVID+ and needing to be transferred to Spokane because she received a call from B. Lutz. I informed L. Wilson that we would not be setting up a field hospital because I had already had conversation with S. Smith about the current case numbers, and then M. Kunev about hospital capacity. Both conversations indicated that there was no need for a field hospital. L. Wilson said she would call C. Thompson and B. Lutz back and confirm.

L. Wilson then let me know that there would be a call between DOC, the hospitals and SRHD about inmates. After speaking with M. Kunev I called L. Wilson and asked her to send me the call-in information for the call at 10:30 so that I would hear the entire story. During the call, the DOC participants asked a lot of questions. It was clear that communication that needed to take place at (and between) the DOC sites and hospitals was lacking. B. Lutz and C. Thompson connected the DOC group to the REDI staff to ensure that they were aware on hospitals with capacity, resources, etc. The CMO's at both MultiCare and Providence (Dr. Chen and Dr. Getz) both indicated that there was capacity in the county. B. Lutz asked about setting up a field hospital. Dr. Chen indicated that Deaconess is quite busy and would like assistance. Dr. Getz (Providence) indicated that Providence had 50 open ICU capable beds in addition to having capacity throughout the hospital for surge and that there was no need for a field hospital.

Additional questions/conversations took place related to DOC including Jameson from DOC clarifying for the doctor at Airway Heights facility how to access PPE through the prison ECC system. Following the conversation, B. Lutz asked again if a field hospital needed set up, and the hospitals again stated that a field hospital doesn't need set up. Moments later the call ended.

Following the call, I phoned M. Kunev and B. Wick to update on what I found out related to the DOC inmates and surge capacity.



Amelia E. Clark | Administrative Officer | Administration
Direct: 509.324.1518 | Fax: 509.324.1507
aclark@srhd.org | srhd.org



Exhibit 15

8/28/2020

[REDACTED]

Jeff Bell → ideas on Equity funding

Michael

8/28/2020

→ 2 weeks ago today, IBM report sent out
→ 1 week I just became aware and just sent out

→ Frustration at Bob

↳ contacted Bob → Bob said he ~~doesn't have~~ the authority to close schools not the authority to open.
@@@@@@@@@@@@@

→ When the memo came out, he shared it with sup's

→ March 13/14 → Mark Sminger on a zoom an hour before Governor closing school... Bob said we didn't need to

What he sees is a "stream of consciousness"

Don't talk to Bob → Doesn't want to get him in trouble

Caused problems by being asked to sit in on (+ acceptable) to sit on Dist 81 re opening committee

"might not let anyone open - he has conversations with people and they don't line up... if he knows I've talked

Current → 80% Starting remote (might not let anyone open) 20% Hybrid or important

→ How do we pivot?

How can I help as AD?

→ Another say on call "we have no idea what this looks like"

→ clarify on the call → write out statements

Pivot into Superintendant calls

Source: transcript 2/9/2020-6/9/20

Exhibit 16

Michelle Fossum

From: Ann Pitsnogle
Sent: Tuesday, June 2, 2020 11:16 AM
To: Amelia Clark
Subject: RE: a dpr email - want us to say anything

Amelia,

Would you like to respond to the complaint received (below) about Dr. Lutz attending the protest or would you like DPR staff who are processing complaints?

Lalonna Ann Pitsnogle | Executive Assistant | Spokane Regional Health District | Administration
Direct: 509.324.1512 | Fax: 509.324.1507 | lpitsnogle@srhd.org | srhd.org

From: Carey Weller <cweller@srhd.org>
Sent: Tuesday, June 2, 2020 11:12 AM
To: Ann Pitsnogle <lpitsnogle@srhd.org>
Subject: FW: a dpr email - want us to say anything

Hello Ann,

How would you like to address this complaint regarding Dr. Lutz attending the protest on Sunday?

Dr. Lutz did wear a mask when he attended the protest on Sunday. He was very mindful to social distance when able and generally those around him were wearing masks.

Thank you
Carey

From: Boyd Foster <bfoster@srhd.org>
Sent: Tuesday, June 2, 2020 7:57 AM
To: Carey Weller <cweller@srhd.org>
Subject: a dpr email - want us to say anything

Hey, do you want us to respond to this? Glad to but thought you might like to see.

New DPR Complaint Form Submission

Submission Data

First Name

Christy

Last Name

Heitstuman

Phone Number

509-294-1105

Email Address

golfergirl77@comcast.net

City

Spokane

States

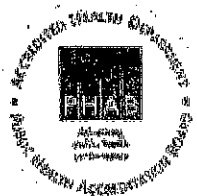
WA

Preference

email

Comments

So this morning the Spokesman Review had a story about BoB Lutz participating in the protest on Sunday. I find this both disturbing and incredibly hypocritical. For months the term "social distancing" has been pounded into our brains by Mr. Lutz and the media. Where was that social distancing by Mr. Lutz on Sunday?? Why should people listen to what the SRHD and Mr. Lutz have to say after he does something like this?



Boyd Foster, PhD | Research Scientist 2 | Data Center- Quality, Planning, and Assessment
(509) 324-1670 | (509) 324- 3623 fax | bfoster@srhd.org
Spokane Regional Health District | www.srhd.org



Always working for a safer and healthier community

“What we’re trying to do here is take these mountains of data that are in different places and turn data into information, turn that information into knowledge, and hopefully turn that knowledge into policy”

— Dave Matusoff, Director for the Indiana Management & Performance Hub

CONFIDENTIALITY NOTICE: This e-mail message and any attachments are for the sole use of the intended recipient(s) and may contain proprietary, confidential or privileged information. Any unauthorized review, use, disclosure or distribution is prohibited and may be a violation of law. If you are not the intended recipient or a person responsible for delivering this message to an intended recipient, please contact the sender by reply e-mail and destroy all copies of the original message.

Exhibit 17

Michelle Fossum

From: Ann Pitsnogle
Sent: Friday, June 5, 2020 12:29 PM
To: Amelia Clark
Subject: FW: Online Form Submittal: Contact Commissioner Al French
Attachments: FW: Online Form Submittal: Contact Commissioner Al French; FW: Online Form Submittal: Contact Commissioner Al French

Amelia

Attached are two other complaints forwarded from the commissioner's office

Lalonna Ann Pitsnogle | Executive Assistant | Spokane Regional Health District | Administration
Direct: 509.324.1512 | Fax: 509.324.1507 | lpitsnogle@srhd.org | srhd.org

From: Amelia Clark <aclark@srhd.org>
Sent: Friday, June 5, 2020 12:07 PM
To: Ann Pitsnogle <lpitsnogle@srhd.org>
Subject: Re: Online Form Submittal: Contact Commissioner Al French

Can you forward to Lyndia? She's incident commander internally. Thanks!

Get [Outlook for IOS](#)

From: Ann Pitsnogle <lpitsnogle@srhd.org>
Sent: Friday, June 5, 2020 12:00:05 PM
To: Amelia Clark <aclark@srhd.org>
Subject: FW: Online Form Submittal: Contact Commissioner Al French

Amelia,

This complaint was forwarded to us from Commissioner French's office.

Lalonna Ann Pitsnogle | Executive Assistant | Spokane Regional Health District | Administration
Direct: 509.324.1512 | Fax: 509.324.1507 | lpitsnogle@srhd.org | srhd.org

From: Corkins, Karen <KCORKINS@spokanecounty.org>
Sent: Friday, June 5, 2020 11:53 AM
To: Ann Pitsnogle <lpitsnogle@srhd.org>
Subject: FW: Online Form Submittal: Contact Commissioner Al French

Hello-

We received the email below through our website. I let the citizen know that I would give Commissioner French a copy of it as well as forward it to the Health District.

Thank you,

Karen Corkins, Governmental & Constituent Relations Officer
Office of Spokane County Commissioner Al French, District 3
509-477-2741 | kcorkins@spokanecounty.org
1116 W. Broadway Ave | Spokane, WA 99260

From: noreply-spoco@spokanecounty.org <noreply-spoco@spokanecounty.org>
Sent: Thursday, June 04, 2020 6:09 AM
To: Corkins, Karen <KCORKINS@spokanecounty.org>; French, Al <AFRENCH@spokanecounty.org>; Webley, Jared C. <JCWEBLEY@spokanecounty.org>
Subject: Online Form Submittal: Contact Commissioner Al French

Contact Commissioner Al French

| Request Type | Comment |
|--------------|---|
| First Name | Christine |
| Last Name | Heitstuman |
| Email | golfergirl77@comcast.net |
| Phone | 509-294-1105 |
| Contact Me | Yes |
| Request | <p>I sent the following comments directly to Mr. French but I am also sending them to you as I don't know when Mr French would be reading them. Thank you...</p> <p>Hello. I am writing to you because you are a member of the board of the Spokane Regional Health District. This past Sunday, May 31st, Dr. Bob Lutz participated in the huge protest that occurred downtown. The Spokesman Review wrote an article about it June 1st. As a long time resident of the City of Spokane, since 1979, I am completely disgusted by his actions. For months Dr. Lutz has been the face of the COVID 19 crisis in this city...telling us to Stay home...social distance.. Where was all of that on Sunday? I am speaking specifically about his attendance there. The hypocrisy of his actions is incredible. Where was his regard for public health? I read there is another protest planned for Sunday, June 7th. Will the good Dr. be marching in that one as well?</p> <p>PS.. how many protesters were condemned when they were marching to support their closed businesses? Health Board member Jason Kinley was criticized by his colleagues for giving</p> |

out supposedly "false" information at a May 1st protest. Where
is the criticism for Dr. Lutz for his actions?

Email not displaying correctly? [View it in your browser.](#)

Exhibit 18

Michelle Fossum

From: Amelia Clark
Sent: Sunday, June 7, 2020 1:40 PM
To: Amelia Clark
Subject: BL 6/4/2020

Today, I met with Bob for our one on one meetings.

He discussed the Hep C program and the decision that Lyndia, Misty, and I made regarding the nature of the program. (Shannon was advocating for SRHD to own the whole program.) The concern we had with this type of program set up was that SRHD cannot provide full-service lab and primary care to individuals. We can provide care coordination through Mackenzie via our state funding. I also reminded Bob that both he and Shannon were invited to the meeting on April 2, they both accepted the meeting, and neither showed up.

Bob expressed concern that he was not part of the interview to place Casey as a manager in emergency response. I stated that I wasn't either. Bob is concerned that he hasn't been part of Amber Lenhart's interview, Tiffany Turner's, and Ashley Beck's interview. I explained that Amber was hired prior to me starting at SRHD and that I wasn't part of her interview and she reports to me. I also explained that I was not part of Tiffany or Ashley's interview because I trust that the director's they report to are building their teams and placing the right individuals in the right spots. It's about trust – there was no reason for me or him to be in the interview.

I brought to Bob's attention the concerns that I am receiving from board members and community members related to his participation in the peaceful race protest. Bob stated "people who know me know my politics". I explained that I wanted him to be aware of the feedback because in our leadership roles we are connected to SRHD even when we are acting in our "personal" capacity.



Amelia E. Clark | Administrative Officer | Administration
Direct: 509.324.1518 | Fax: 509.324.1507
aclark@srhd.org | srhd.org



Exhibit 19

Michelle Fossum

From: Ann Pitsnogle
Sent: Wednesday, June 10, 2020 8:28 AM
To: Amelia Clark
Subject: Complaints
Attachments: FW: Online Form Submittal: Contact Commissioner Al French; FW: Online Form Submittal: Contact Commissioner Al French

Amelia,

Here are two other complaints forwarded from Spokane County.

Lalonna Ann Pitsnogle | Executive Assistant | Spokane Regional Health District | Administration
Direct: 509.324.1512 | Fax: 509.324.1507 | lpitsnogle@srhd.org | srhd.org

Michelle Fossum

From: Corkins, Karen <KCORKINS@spokanecounty.org>
Sent: Wednesday, June 10, 2020 8:01 AM
To: Ann Pitsnogle
Subject: FW: Online Form Submittal: Contact Commissioner Al French

Hi-

Here is another SRHD related question that was submitted through our website.

Thank you,

Karen Corkins, Governmental & Constituent Relations Officer
Office of Spokane County Commissioner Al French, District 3
509-477-2741 | kcorkins@spokanecounty.org
1116 W. Broadway Ave | Spokane, WA 99260

From: noreply-spoco@spokanecounty.org <noreply-spoco@spokanecounty.org>
Sent: Tuesday, June 09, 2020 2:12 PM
To: Corkins, Karen <KCORKINS@spokanecounty.org>; French, Al <AFRENCH@spokanecounty.org>; Webley, Jared C. <JCWEBLEY@spokanecounty.org>
Subject: Online Form Submittal: Contact Commissioner Al French

Contact Commissioner Al French

| Request Type | Question |
|--------------|---|
| First Name | Fran |
| Last Name | Wills |
| Email | franwills@gmail.com |
| Phone | 5099797180 |
| Contact Me | Yes |
| Request | Yesterday Gov. Inslee said that all people that protested should self isolate for two weeks. Dr. Bob Lutz chose to participate in the protest on May 31st if I remember hearing correctly. Is he going to be self isolating for a week because it has not been two weeks since that protest? I agree that he had every right to protest but he should then follow the governor's directive to self isolate. If he is going to make Spokane County stay in phase 2 |

then he should be adhering to all of the recommendations that he himself and the state make.

Email not displaying correctly? [View it in your browser.](#)

Michelle Fossum

From: Corkins, Karen <KCORKINS@spokanecounty.org>
Sent: Wednesday, June 10, 2020 7:54 AM
To: Ann Pitsnogle
Subject: FW: Online Form Submittal: Contact Commissioner Al French

Hello-

We received another SRHD related comment through the County website.

Thank you,

Karen Corkins, Governmental & Constituent Relations Officer
Office of Spokane County Commissioner Al French, District 3
509-477-2741 | kcorkins@spokanecounty.org
1116 W. Broadway Ave | Spokane, WA 99260

From: noreply-spoco@spokanecounty.org <noreply-spoco@spokanecounty.org>
Sent: Tuesday, June 09, 2020 12:09 PM
To: Corkins, Karen <KCORKINS@spokanecounty.org>; French, Al <AFRENCH@spokanecounty.org>; Webley, Jared C. <JCWEBLEY@spokanecounty.org>
Subject: Online Form Submittal: Contact Commissioner Al French

Contact Commissioner Al French

| Request Type | Comment |
|--------------|--|
| First Name | Bill |
| Last Name | Field not completed. |
| Email | Field not completed. |
| Phone | Field not completed. |
| Contact Me | No |
| Request | Why does Dr. Bob Lutz have more control of the people of Spokane County then the County Commissioners? He is destroying many businesses and he needs to be gone. NOW!! |

Email not displaying correctly? [View it in your browser.](#)

Exhibit 20



Expense Reimbursement / Petty Cash Request

REQUEST - Note: there is no guarantee that there will be petty cash available to cover these costs.

| | |
|---|---|
| Date: 5/28/20 | Requested By: b lutz |
| <input checked="" type="checkbox"/> Expense Reimbursement | <input type="checkbox"/> Petty Cash Request |
| Estimated Cost: \$ 99.99 176.22 | |
| Purpose of Expense (must have prior approval before items are purchased): feed for exp | |
| Program Supervisor signature X: | Date: |
| Division Director signature X: | Date: 7/10/2020 |
| Comptroller signature (if more than \$150.00) X: | Date: |

EXPENDITURES - This section to be filled out after items are purchased:

| Description of Expenditure (attach receipts) | Amount |
|--|----------------|
| staff lunch (epi) | 99.99 |
| staff going away lunch | 76.23 |
| staff | |
| | |
| | |
| | |
| | |
| Expenditure Code: | |
| Division: 800 | Program: 811 |
| Project: 8900000 | Loc: - |
| Act: 888 | Function: 0000 |
| | Object: 317 |

I hereby certify under penalty of perjury that this is a true and correct claim for expenses incurred by me in the amount of \$ for supplies and/or services to conduct the above referenced program, and that no other payment has been received by me for this claim.

Signature of Claimant: Date: 6/23/20

Finance Use Only: Payment method: Petty Cash Pay by Voucher

Finance Approval:

- Requests for food/beverage items must be accompanied by a meeting agenda and attendee roster.
- Receipts MUST be attached for expense reimbursement.

David's
Hand-Crafted Pizza
Customer Receipt

Order: 464815

David's Pizza
803 W Mallon
Spokane, WA 99201

PICK UP 5/28/2020
7:02 am

SPOKANE COUNTY HEALTH
(509) 218-2013
DR. BOB LUTZ

Guest:

| | | |
|---|-------------------------------|-------|
| 1 | 12" Pizza DaVinci | 19.00 |
| 1 | 12" Pizza Pesto A La David | 19.00 |
| 1 | 12" Pizza Marg rita | 17.00 |
| 1 | Salad's Half Family Sala | 13.50 |
| 1 | 18" Pizza DaVinci | 23.00 |
| 1 | - CC Process | 0.35 |

| | |
|------------|-------|
| Sub Total: | 91.85 |
| Tax: | 8.14 |
| Total: | 99.99 |

Order Totals:

| | |
|------------|-------|
| Sub Total: | 91.85 |
| Tax: | 8.14 |

Total: 99.99

Payments:

| | |
|--------------|-------|
| Credit Card: | 99.99 |
|--------------|-------|

| | |
|-------------|------|
| Amount Due: | 0.00 |
|-------------|------|

Server: MARK
Cashier: MARK
Register: POSSERVERDAVIDS
Order Number: 464815
Table:

We value your comments!
(509) 483-7460

Exhibit 21

Bob Lutz

From: Bob Lutz
Sent: Saturday, June 20, 2020 9:49 AM
To: Bob Lutz
Subject: FW: Receipt from Boots Bakery - Order #1056-151562, Check #1

Print...

Bob Lutz | Health Officer | Spokane Regional Health District | Administration
Direct: 509.324.1469 | Fax: 509.324.1507 | blutz@srhd.org | srhd.org

From: bob lutz <TEAMAB@msn.com>
Sent: Thursday, June 11, 2020 1:49 PM
To: Bob Lutz <blutz@srhd.org>
Subject: FW: Receipt from Boots Bakery - Order #1056-151562, Check #1

From: receipts@lavusys.com [<mailto:receipts@lavusys.com>]
Sent: Thursday, June 11, 2020 12:01 PM
To: teamab@msn.com
Subject: Receipt from Boots Bakery - Order #1056-151562, Check #1

Thank you so much for allowing us to serve you today.

Order #: 1056-151562
Quick Serve
1 Guest
Server: Alison
Cashier: Alison
Register: PRINTING (receipt)
2020-06-11 12:01:11

| | |
|------------------------|-------|
| 1 food open | 70.00 |
| Subtotal: | 70.00 |
| Tax (8.9%): | 6.23 |
| Total: | 76.23 |
| Paid with card (5274): | 76.23 |
| Amount Due: | 0.00 |

Sale
VISA ...5274 for 76.23
Ref #: 1572016401
Auth Code: 07868D

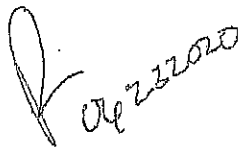


Exhibit 22



COPY

SPOKANE REGIONAL HEALTH DISTRICT

Employee Performance Review

NOV 19 2018

HUMAN RESOURCE SERVICES

| | |
|--|---------------------------------------|
| Name: Bob Lutz | Position Title: Health Officer |
| Program: Health Officer | Division: Administration |
| Review Meeting Date: | For Annual Period: 1/1/2017-8/31/2019 |
| Employee Section | |
| By signing this review, I agree that: | |
| <input checked="" type="checkbox"/> I have discussed the SRHD Strategic Plan with my manager <input checked="" type="checkbox"/> I have reviewed and understand my current position description <input checked="" type="checkbox"/> I adhere to the SRHD Employee Handbook <input checked="" type="checkbox"/> I have had the chance to review this document and add comments | |
| Employee's Signature <u>Bob Lutz</u> | Date: <u>11/15/18</u> |
| Reviewer Section | |
| By signing this review, I agree that I have met SRHD requirements by completing: | |
| <input checked="" type="checkbox"/> Employee's Essential Duties and Responsibilities – Includes performance factor rating for each job duty <input checked="" type="checkbox"/> Gained feedback from sources appropriate for the position (e.g., peers, colleagues, etc.) <ul style="list-style-type: none"> • Retain feedback forms; do not send to Human Resources. | |
| Reviewer's Signature <u>Tommy Smith</u> | Date: <u>11/15/18</u> |
| Job Title: <u>ADMINISTRATOR</u> | |
| Reviewer's Supervisor's Signature: _____ | Date: _____ |
| Job Title: _____ | |

Employee Performance Review – Goal Sheet

2015 – 2018
Strategic Plan

Mission: As a leader and partner in public health, we protect, improve and promote the health and well-being of our communities.

Vision: Healthy Lives.
Safe Environments.
Thriving Communities.

Values: Integrity,
Compassion, Respect,
Equity, Collaboration,
Innovation.

Goal: Foster a positive work environment that develops, values and supports employees

Goal: Strengthen proactive and effective communication within the agency and in the community.

Goal: Enhance agency efforts to reduce inequities that contribute to health disparities

Goal: Develop a strategic health agenda to address emerging and ongoing public health issues.

Public Health Standards

Customer Service Standards

Public Health Competencies

Your personal annual goals as presented in this performance evaluation

Performance Factors:

- Exceptional:** Consistently performs job duties above and beyond
- Achieves:** Successfully performs job duties
- Growth Opportunity:** Improvements will enhance job performance
- Unsatisfactory:** Development required to successfully perform job duties
- Not Applicable:** Does not apply to position

Any item checked as "Exceptional", "Growth Opportunity", or "Unsatisfactory" requires a comment. Any item checked as "Unsatisfactory" requires an improvement goal in "Employee Goals" section.

| Essential Duties & Responsibilities <small>Copy and paste each essential job duty from employee's Position Description</small> | Interim, if necessary | | | | Annual | | | | Comments |
|--|-----------------------|----------|--------|----------------|-------------|----------|--------|----------------|---|
| | Date | | | | Date 5/1/15 | | | | |
| | Exceptional | Achieves | Growth | Unsatisfactory | Exceptional | Achieves | Growth | Unsatisfactory | |
| <u>Clinical Care</u> <ul style="list-style-type: none"> • Diagnoses and treats active tuberculosis • Diagnoses and treats latent tuberculosis infection related to active tuberculosis cases. • Manages complications of TB treatment • Approves emergency response protocols, such as for safety of staff or during off-site immunization clinics • Provides consultation for appropriate screening for tuberculosis in high risk individuals • Provides consultation for LTBI case management | | | | | | | | | <p>Your work with TB in particular is engaged and thorough and keenly aware of the equity issues in marginalized communities.</p> <p>You have shown strong integration with the PHEPR program as well.</p> |
| <u>Clinical Consultation</u> <ul style="list-style-type: none"> • Provides consultation to health care providers on a wide variety of communicable diseases • Provides consultation to disease investigation specialists who treat sexually transmitted diseases • Makes recommendations for appropriate immunization strategies • Reviews documents from a medical and epidemiologic perspective, and provides consultation on epidemiological methods • Provides standing orders for testing and treatment of and vaccination against communicable diseases with prescription authority • Authorizes collaborative practice agreements and memorandums of understanding agreements with universities for academic students and volunteers working under medical license • Provides medical oversight and consultation of communicable disease issues to communicable disease program (ongoing) • Provides expertise around proactive prevention strategies to reduce disease burden in community • Utilizes health officer authority for mitigation and control of disease outbreaks using exclusion/closure, | | | | | | | | | <p>Having your time divided between a clinical setting and the health district has strengthened SRHD's relationships with our clinical partners. Additionally, your engagement with our universities to encourage research and evolution of an academic public health arrangement is building enhancement for applied public health on a solid research foundation. As your direct clinical time decreases it is important to keep strong relationships with the clinical sector.</p> <p>It is also important to coordinate the research with academia with the work that has been underway by the data center for quite some time.</p> |

| | | Exceptional | Achieves | Growth | Unsatisfactory | N/A | Exceptional | Achieves | Growth | Unsatisfactory | N/A | |
|---|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--|
| 1 | Sets priorities, adjusts work pace, and organizes assignments to respond to the changing conditions of the agency/division/program. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | My only concern is that you have committed far more hours than originally agreed to at a .75FTE. |
| 2 | Limits personal business to break time. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | You adjust your time appropriately. |
| 3 | Performs high quality work that is neat, accurate, complete, and on time. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Your work is well researched and done at a high standard. |
| 4 | Practices an awareness of cost concerns and uses resources wisely. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | You have shown awareness and seek to find mechanisms to support the desired work. |
| 5 | Shares job knowledge with co-workers. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | You are a valuable resource in this vein. |
| 6 | Stays calm and composed during stressful situations. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Demonstrated |
| 7 | Accesses or shares confidential client, employee, and SRHD information on a "need to know" basis. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Achieved |
| 8 | If applicable, shows improvement in areas where disciplinary actions have occurred (may comment on number of verbal counselings; number of written warning(s), etc.) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 9 | Other | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

Additional Achievements

Your ability to cover for the Treatment Services medical oversight has allowed the program to continue despite staffing changes. This is a valuable asset as we seek to find a direct MD/DO to fill the program medical director role.

Employee Goals

Completion of Previous Goals

| SRHD Strategic goal and objective | List your last year's goals | Date completed | Comments |
|-----------------------------------|--|----------------|---|
| | Competency in requirements per Job Description | By 10/1/18 | I believe you have sought to learn a variety of staff roles and |

| | | | |
|--|--|------------|--|
| | <ul style="list-style-type: none"> a. Continue to work with staff to understand responsibilities b. Learning by doing — competency | | responsibilities to best assist them and increase your understanding. |
| | <p>"Bridge" relationships (clinical, academic, political, social, economic, other)</p> <ul style="list-style-type: none"> a. Have met with all medical directors, working on establishing a "conversation" for collaboration b. Faculty appointment with ESFCOM research project c. Quarterly meetings with Spokane Mayor, meetings with Spokane and Spokane Valley City Councils d. Met with local state legislators, Congresswoman McMorris Rogers e. Met with many social organization leaders f. A member of the Health Industry Development Group (GSI) g. Ex officio member of SCMS h. Pending Board member YMCA | By 10/1/18 | <p>Bridge building is something we have needed in our health officer which you are demonstrating well. Whether medical, political, community or education based there are better alignments today than in past health officer terms.</p> <p>It will also benefit us that you are part of Leadership Spokane.</p> |
| | <p>Align Health Officer goals with SRHD through strategic Planning process</p> <ul style="list-style-type: none"> a. Unfolding thru work of group 4 | By 10/1/18 | Being done |
| | <p>Develop Spokane Health Advisory Board and Ethics Committee</p> <ul style="list-style-type: none"> a. SHAC by-laws drafted, names of potential members identified, will begin 1-on - 1 conversations with members in Q1 2018 | By 10/1/18 | Advisory board is taking shape and discussions of how to evolve an ethics committee are underway. |
| | <p>Identify "one big initiative"</p> <ul style="list-style-type: none"> a. opioids and suicide | By 10/1/18 | The one big initiative is really two and both are progressing with opioids leading the efforts. |
| | <p>Advocate for "Public Health 3.0"</p> <ul style="list-style-type: none"> a. on-going | By 10/1/18 | 3.0 and chief health strategist are ideologies I see you exemplify in your work. |

Setting S.M.A.R.T. Goals for Next Year

At least two goals are required. These work-related goals link to the strategic goals of SRHD by directly supporting your agency/division/program goals.

| Strategic | Specific | Measurable | Attainable | Realistic | Timeline |
|--|---|--|--|--|------------------------------------|
| What strategic goal(s) and objectives do your goals support? | List specifically what goals you will accomplish. | How will you and your supervisor know the goals are completed? | Can the goals be completed within the next year? | What support or resources do you need to accomplish the goals? | Dates the goals will be completed. |
| | Increase competency in requirements per Job Description | | | | |
| | Increase visibility of SRHD, public health | | | | |

| | | | | | |
|--|---|--|--|--|--|
| | Increase leadership skills & application | | | | |
| | Ensure opioid and suicide work are sustained | | | | |
| | Continue "bridging" work between healthcare, academia & public health | | | | |
| | Public health policy advocacy | | | | |
| | | | | | |
| | | | | | |

Performance Summary

Your enthusiasm and engagement with community is a welcomed and positive enhancement for SRHD relations to many community partners.

Internally you have shown similar engagement which is greatly beneficial, however, there are times your approach has been problematic. When you approach staff without discussions with their managers or knowing what their manager has as assignments it creates problems and comes across as disrespectful to managers as it feels back-doored. The staff feel caught between input or a request from you as the health officer and their current work assignments or direction from their manager. It is important for you to assure your actions engage managers before staff to avoid these circumstances. This also requires you to be aware of and set boundaries in your role as the health officer and not as the manager.

It is important to be aware of and follow existing agency processes, procedures and policies. This is also critical with managers when wanting to engage their staff.

Due to my retirement I will have you meet with me, Ray and Mike to discuss this concern as it has been shared with the transition committee by various staff.

Overall, your performance is strong and moving the agency forward internally, externally and with our board which can be enhanced with attention to the points raised above.

Employee Comments

We welcome your response to this Performance Review:

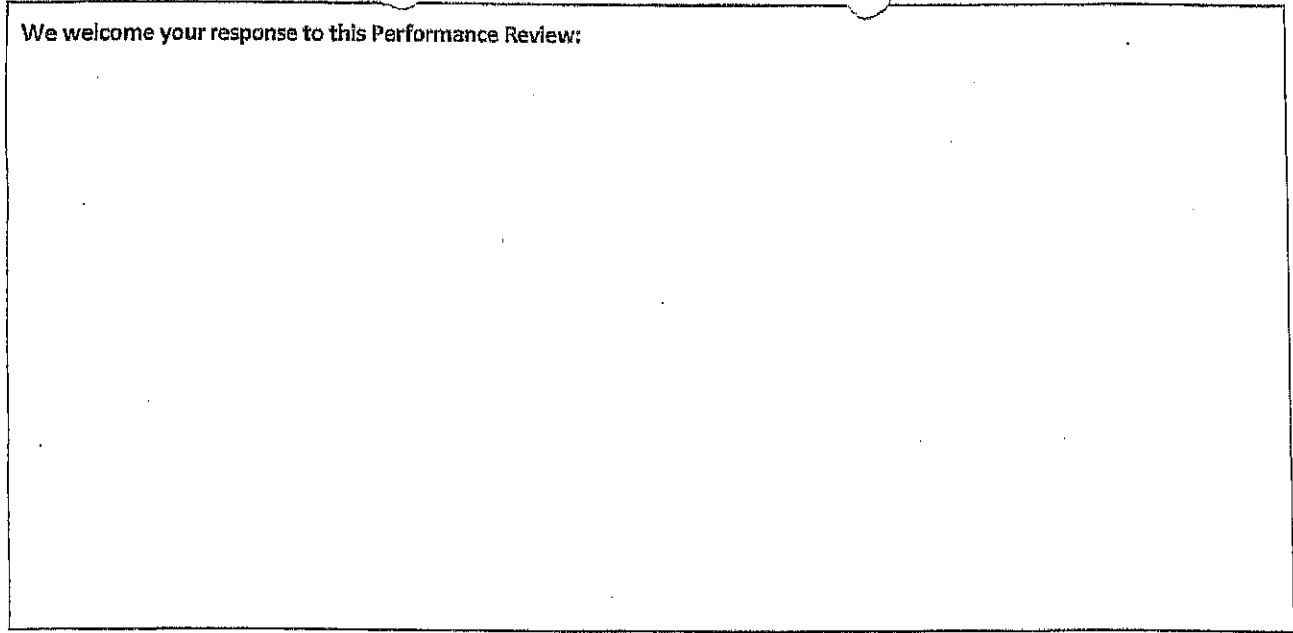


Exhibit 23

COPY

February 25, 2020 at 12:15 pm

Participants: Misty Challinor, Treatment Services Division Director; Angella Buckles, Treatment Services Medical Assistant; Sue Winters, HR Manager

Angella doesn't like drama and was actually in Kristen's office to avoid Leslie and Dr. Lutz out in the hallway. Angella brought her concerns to Misty regarding Dr. Lutz. Misty called me to see if the two of them could meet with me to discuss their concerns.

Angella commented that Bob is in Leslie's office quite often and that they are always having conversations. About two weeks ago Bob came out of Leslie's office and said to Angella, "I heard you hate your job." Angella stated no, not really. Angella told him it's not the job – she doesn't like the pay. Bob told Angella that he's making changes in HIV upstairs and there would be work for her to do there which would involve giving injections. Angella asked how that would work, and does that mean she would work part-time in Treatment Services and part-time in HIV, or what? Bob said he was trying to work on putting a job together and wasn't sure of what that looked like yet. Angella brushed it off.

A couple of days ago, Leslie let Angella know that she gave her two weeks' notice. Leslie proceeded to bad mouth Misty stating that Misty was mad because she went over Misty to Bob, and that she's done with this place, etc. Angella let Leslie vent.

Bob was down in the area and Bob was bad mouthing Misty to Leslie and Angella. He was mad because he didn't have the power to make the hiring decision for the Nursing Program Manager, and he was frustrated it wasn't offered to the person he referred for the position. He said it was inappropriate to say we might be interested in the referred candidate for a different position. He went on to state that Misty shouldn't be the one hiring the medical staff in Treatment Services – he should be the one hiring. Angella was concerned that he's bad mouthing Misty who is a division director in front of some of her staff.

Bob talked with Angella again about creating a job for her. Bob said it may be with HIV upstairs and Med First, and then Bob said it would probably be a position with Med First. Angella told him the timing isn't good, and she plans to stay in her current job.

Angella really debated on even going to Misty because she was afraid of what might happen. I asked her if she sees Dr. Lutz as being in a position of power over her and she said yes. Misty and I both reassured her that she did nothing wrong, and it was appropriate for her to go to Misty. Misty told her she valued her as an employee and that her position is not in jeopardy. I let Angella know that we are still working on the compensation study, and that I can't make any promises, but that pay may go up for some of our positions but we're not there yet.

Angella then brought up concerns that the EKG machine keeps getting moved out into the hall, the lab has been dirty, etc. Things are clean in the lab and the EKG machine is in the EKG room when she leaves for the day, and then the next morning she comes in and the lab may be dirty, and the EKG machine is quite often out in the hall. She stated that Med First meets in the EKG room. She also stated that Med First collects urine samples in their own cups. She said she has seen Med First dried urine cups sitting around, and recently saw cups that were wet, upside down drying.

Misty and I thanked Angella for bringing up her concerns and that it was an appropriate thing to do. We then let Angella go back to work.

Misty and I then continued our conversation with regards to the Med First contract. Neither one of us have seen the contract. If it is just to use space here, it might be appropriate for Med First to use the conference room in Treatment Services and not the EKG room. Misty stated the lock was removed to the EKG room when Med First started here. Misty is also concerned that Bob doesn't like her and is targeting her. He has crossed the line multiple times and interjected himself into Treatment Services work. She would prefer that he doesn't have badge access to her area. If he continues to undermine her, she may take this to Amelia, Ray and me, and may include the BOH chair in a conversation.

I let Misty know that I would request the contract from Carey and I would let Carey know it's part of an investigation and to not share this with others.

Exhibit 24

2/25/2020 – 3:45pm – 4:20pm

COPY

Attendees: Dr. Bob Lutz, Sue Winters, Debbie Blair

Sue said HR has received a complaint from Treatment Services about promising jobs. She asked Dr. Lutz if he recalled any conversations with Angelia.

Dr. Lutz said this issue is regarding the Med First program. This is a project with U of W. It's a low barrier program with buprenorphine...coordinated with Frontier Behavioral Health (and others). I am the point of contact for this program. We want to sever our relationship with Abilla...leaving a nurse care manager and medical provider openings. The nurse care manager can be an MA, LPN or RN. We need someone to fill this position with Med First. I asked Angelia if she'd be interested in the position. She said yes.

Dr. Lutz said Katie, Kira and I have been providing bicillin. We need someone that can do this. This would be an SRHD employee, funded by U of W. Angelia was the first person that came to mind for this. I asked her about this about two weeks ago. She said to 'keep me informed.'

Sue asked if this was always going to be a Med First program. Dr. Lutz said yes, this is one of four pilot programs. They don't all operate the same. This position would be paid by Med First. Since syringe service is in Lisa's program, I'm thinking this could be incorporated into her program.

Sue asked if this would be an SRHD employee. Dr. Lutz said yes, this would be an SRHD employee funded by Med First. I've asked Mike how much money would be allocated for this position. The funding is guaranteed thru 7/2021 (and should extend beyond).

Dr. Lutz said, 'during my second conversation with Angelia, she told me she was still interested.'

Sue asked Dr. Lutz if he has had any conversations about this program with Lisa and Misty. Dr. Lutz said he spoke with Lisa about this program, but not Misty. If Angelia is interested, 'I would run this up the chain. I know they're (i.e. Treatment Services) short staffed.'

Sue said my concern is if you are making or promising a job to someone. We have to post our jobs. Dr. Lutz said "Angelia was a known entity. She knows our population. I'm familiar with the hiring process. This also gives me an idea if this is a viable option" (i.e., if Angelia is interested). I am wanting to see this Med First program work. I have a contract with Abilla expiring the end of April and I'm trying to fill this gap.

Sue said if this moves forward, we need to look at the MA job description. Our nursing contract only talks about nurses. MA's are not covered in WSNA, they're in ProTec17. But I can see WSNA challenging this if the MA does work that traditionally has been done by the nurses. Bob asked if he should continue to look for an MA for this role. Sue said yes, it sounds like this would be appropriate for your need if it's approved through our normal hiring process.

Dr. Lutz said if Angelia thought I was promising or creating a position for her, that was a misunderstanding.

Sue said there's a feeling that you're making negative remarks about Treatment Services and Misty, especially around the hiring of medical staff. Bob expressed concern about the hiring of the clinical manager. He said 'I know Graham applied for the position and he put my name as a reference. I heard there were no qualified applicants (from Dr. Harrison). I know Graham was qualified.' Sue said there was a communication breakdown. Treatment Services wanted more applicants before beginning the interviews. Dr. Lutz said I heard Kristin applied....but 'how did she get in the interview pool?' I don't know Kristin's background, but I know Graham's background. Dr. Lutz said Dr Harrison didn't interview Kristin but did interview Graham. Sue said I believe Dr Harrison called in on Kristin's interview. Dr. Lutz said Kristin is working on her NP and "where she can meet the requirements of the job is to be seen."

Dr. Lutz said I only inquired to see if Graham was getting an interview as he hadn't heard anything. Sue said we encourage our managers to communicate with applicants and should keep the applicant informed regarding the status of the interview process if the process is delayed.

Sue said there's concerns that you were bashing Misty in front of some Treatment Services staff and saying you should be the one hiring medical staff in Treatment Services. Dr. Lutz said I've never said I should be hiring. I have said I should be involved in the clinical work. I was the Interim Director before Shannon. Dr. Lutz commented that his position description states he has responsibilities to represent OTP in the community. I represent OTP in the community and need to know what's happening. It's about me trying to find out what's happening from a clinical standpoint. We (Misty and I) have differences of opinions of what's going on down there. It's a very counselor centric model, and Dr. Harrison is working with Misty on this. I would like it to be a more two way street....not one way.

Exhibit 25

Erik Birnel

From: Amelia Clark
Sent: Tuesday, February 4, 2020 11:52 AM
To: SRHD
Subject: Org Structure
Attachments: 20200204 Org Structure.pdf

SRHD –

Yesterday, I sent out an updated communication and change plan that outlined some of the next steps in the organizational restructure plan. This morning, I met with the departments that are most heavily impacted by the changes. For your reference, I have attached the new organizational structure chart. Please note that there is a legend on the top right of the attachment so that you can understand the color coding. All new Phase 1 positions will be posted by February 21 at the latest.

I will begin working with ELT on drafting a communication and change plan on the next steps including effective dates of changes. Beginning today, HP is now reporting up to Lyndia Wilson. Upon Sheila Masteller's retirement on February 18, CFS will begin reporting up through Lyndia as well.

If you have questions, please reach out to me. Tomorrow, at the Joint Management meeting, we will walk through the organizational restructure and I can answer questions for managers at that time as well.

Thank you,

Amelia



Amelia E. Clark | Administrative Officer | Administration
Direct: 509.324.1518 | Fax: 509.324.1507
aclark@srhd.org | srhd.org



Exhibit 26



2018

Position Description

HUMAN RESOURCE SERVICES

| | | | |
|-----------------------------------|---|--|------|
| Employee Name: | Dr. Bob Lutz | | |
| Classification Info. – Job Title: | Health Officer | Salary range: | 295A |
| Division: | Administration | | |
| Program(s): | | | |
| Program Mgr/Director: | Torney Smith, Administrator | | |
| FLSA Status: | <input type="checkbox"/> Non-Exempt | <input checked="" type="checkbox"/> Exempt | |
| Represented Status: | <input type="checkbox"/> WSNA represented | <input type="checkbox"/> PTE represented | |
| | <input checked="" type="checkbox"/> Non-represented | | |
| Full-Time Equivalency (FTE): | .75 | | |
| Position Status: | <input checked="" type="checkbox"/> Regular | <input type="checkbox"/> Project | |
| | <input type="checkbox"/> Temporary | <input type="checkbox"/> Intermittent | |
| Purpose of Update: | <input type="checkbox"/> New Position | <input checked="" type="checkbox"/> General Update | |
| | <input type="checkbox"/> Reclassification | <input type="checkbox"/> Annual Review | |
| | <input type="checkbox"/> New incumbent. Replaces: | | |
| Date Submitted to HR: | February 2018 | | |

Position Purpose (briefly describe what the position was created to accomplish):

Enforce local and state public health laws, serving as the chief medical officer for the health district and providing highly complex staff assistance. This position may supervise staff.

Major Responsibilities/Activities List in order of importance the major functions of the job and the approximate percentage of time spent on each of the activities. Guideline: percentage of time for a given responsibility should not exceed 25-30%.
NOTE: Nothing in this position description restricts management's right to assign duties and responsibilities.

| %Time | Major Responsibilities / Activities: |
|-------|---|
| 13% | <u>Clinical Care</u> <ul style="list-style-type: none"> Diagnoses and treats active tuberculosis Diagnoses and treats latent tuberculosis infection related to active tuberculosis cases. Manages complications of TB treatment Treats patients with STDs who do not meet treatment protocols for the Expedited Partner Program Approves emergency response protocols, such as for safety of staff or during off-site immunization clinics |
| 5% | <u>Supervision</u> <ul style="list-style-type: none"> Supervises the PHN2 position within the TB program. This includes hiring, providing continuing education, evaluation and discipline. |
| 14% | <u>Clinical Consultation</u> <ul style="list-style-type: none"> Provides consultation to health care providers on a wide variety of communicable diseases Provides consultation to disease investigation specialists who treat sexually transmitted diseases Provides consultation for appropriate screening for tuberculosis in high risk individuals Makes recommendations for appropriate immunization strategies Provides consultation for LTBI case management Reviews documents from a medical and epidemiologic perspective, and provides consultation on epidemiological methods Provides standing orders for testing and treatment of and vaccination against communicable diseases |

PD template
Revised 8/2013

| | |
|-----|--|
| | <ul style="list-style-type: none"> with prescription authority • Authorizes collaborative practice agreements and memorandums of understanding agreements with universities for academic students and volunteers working under medical license |
| 7% | <u>Communicable Disease Control</u> <ul style="list-style-type: none"> • Provides medical oversight and consultation of communicable disease issues to communicable disease program (ongoing) • Provides expertise around proactive prevention strategies to reduce disease burden in community • Utilizes health officer authority for mitigation and control of disease outbreaks using exclusion/closure, isolation, quarantine, mandatory testing, mass treatment or prophylaxis, etc. |
| 8% | <u>Public Health Preparedness and Response</u> <ul style="list-style-type: none"> • Provides medical oversight and direction for all outbreaks, natural and environmental disasters, and public health emergencies • Reviews and approves emergency response plans dealing with medical issues; such as, isolation and quarantine, mass fatalities, and alternative care facilities • Participates on policy decision committees for emergency response; such as, Emergency Management Operations Group and Disaster Clinical Advisory Committee. |
| 2% | <u>Environmental and Occupational Safety and Health</u> <ul style="list-style-type: none"> • Provides medical clearance for the agency respiratory protection program • Interprets environmental health data and provide implications regarding health effects • Recommend appropriate personal protective equipment for occupational exposures |
| 4% | <u>Vital Records</u> <ul style="list-style-type: none"> • Works with health care providers, funeral homes, and vital records staff to ensure appropriate completion of death certificates • Completes death certificates when no other provider is identified • Gives presentations to providers on completion of death certificates |
| 2% | <u>Opioid Treatment Program</u> <ul style="list-style-type: none"> • Serves as back to OTP medical director (approves methadone, buprenorphine, and buprenorphine and naloxone orders and carries in his absence • Represents OTP program to health care professionals (episodic) • Provides input on addiction management of opioid dependency |
| 6% | <u>Women, Infants and Children (WIC) Program</u> <ul style="list-style-type: none"> • Provides oversight and certification for competent professional authorities who perform low risk anemia assessments on WIC clients. • Provides oversight and consultation to dietitians in the development of high risk care plans. • Promotes the WIC and nutrition services to the medical community. |
| 4% | <u>Health Promotion Programs</u> <ul style="list-style-type: none"> • Actively participates in promoting healthy behaviors to prevent early onset of chronic disease and injury. • Champions specific policies, systems, and environmental changes that reduce health disparities and increase healthy behaviors. • Assists in developing connectivity and collaboration between the health care system and the public health system. |
| 10% | <u>Communication</u> <ul style="list-style-type: none"> • Attends BOH and executive committee meetings; communicates regularly with SRHD Board of Health on all significant public health medical issues occurring in or potentially impacting the SRHD jurisdiction. • Informs the board of emerging and potential medical public health issues; recommends policy decisions where appropriate to protect and promote public health • Assures that information is provided to Spokane County populace regarding the causes, nature, risks, and prevention of dangerous or communicable diseases within SRHD's jurisdiction. • Provides education on the preservation, promotion, and improvement of the population's health |
| 25% | <u>General</u> <ul style="list-style-type: none"> • Maintains health and sanitation supervision over the territory within SRHD's jurisdiction • Executive action to control and prevent the spread of any dangerous, contagious or infectious diseases that |

PD template
Revised 8/2013

| | |
|--|--|
| | <p>may occur within SRHD's jurisdiction</p> <ul style="list-style-type: none"> Participates in medical community, health professionals, citizen groups, and state/federal committees/groups. Attends conferences called by Secretary of Health or representatives Monitors health officer expenditures; recommends amendments necessary to conduct health officer duties. Performs other tasks as reasonably directed by the Administrator |
|--|--|

Qualifications:

| | |
|--------------------------|--|
| Education: | The health officer must have a Master's in Public Health or its equivalent in accordance with RCW 70.05.051. |
| Experience: | Five years directly related public health experience including tuberculosis control under RCW 70.28.031. |
| Licensure/Certification: | <p>The local health officer must be an experienced physician licensed to practice medicine and surgery or osteopathic medicine and surgery in this state; and who is qualified or provisionally qualified in accordance with the standards prescriber in RCW 70.05.050 through 70.05.055 to hold the office of local health officer.</p> <p>Valid motor vehicle license and current auto insurance</p> |

Knowledge, Skills and Abilities Specific to this Position:

Knowledge
 The local health officer must have knowledge of all pertinent federal, state and local laws, rules, regulations and policies governing public health; epidemiology and disease control; principles of effective leadership; public relations and community organization and collaboration.

Skills
 The health officer must be able to evaluate health service programs; maintain effective community relations; interpret and comply with applicable local, state and federal regulations; and communicate clearly and concisely, both orally and in writing. This position also requires effective personnel management skills.

Ability
 Conducts himself or herself in a professional and courteous manner when dealing with the board, the public, community partners and staff. Maintains the highest standards of ethical behavior; and perform such other tasks as reasonably directed by the administrator. Ability to effectively plan, assign, direct and evaluate the work of subordinates.

Typical Work Environment and Physical Demands (check all that apply):

| | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | Indoors, sedentary with 8 hours/day sitting or standing |
| <input type="checkbox"/> | Outdoors, with _____ hours/day walking or standing |
| <input checked="" type="checkbox"/> | 4-6 hours/day keyboarding or typing at a computer terminal |
| <input type="checkbox"/> | Ability to work outdoors in various climates (rain, snow, wind, sun, etc.) |
| <input checked="" type="checkbox"/> | Ability to navigate client sites (unpaved walkways, stairs, narrow hallways, etc.) on a <input type="checkbox"/> regular or <input checked="" type="checkbox"/> occasional basis |
| <input checked="" type="checkbox"/> | Communication skills to interact effectively with people |
| <input checked="" type="checkbox"/> | Comprehend and process verbal communication |
| <input checked="" type="checkbox"/> | Visual acuity to read small print |
| <input type="checkbox"/> | Ability to discern colors |
| <input type="checkbox"/> | Ability to discern odors |
| <input type="checkbox"/> | Ability to work with chemical smells (laboratory). |
| <input checked="" type="checkbox"/> | Ability to bend, twist, stoop on a <input type="checkbox"/> regular or <input checked="" type="checkbox"/> occasional basis |
| <input checked="" type="checkbox"/> | Ability to lift or carry up to 30 pounds on a <input type="checkbox"/> regular or <input checked="" type="checkbox"/> occasional basis |

