



Washington State Public Health Laboratory
Risk and Safety Assessment
Stakeholder Group Meeting Report
July 11, 2008

Overview

This was the second meeting of the Public Health Laboratories' (PHL) Stakeholder Group. The group has been recruited by the PHL to assist with a risk and safety assessment. The stakeholder group will participate in the selection of a consultant to perform that assessment, and will also provide advice to the PHL throughout the assessment process. In addition, the group will provide recommendations to the Department of Health on the best way to ensure successful communication, over the long-term, with the Shoreline community.

The primary purpose of this meeting was to review the consultant team Statements of Qualifications for the risk and safety assessment project. The group also discussed the PHL's role and responsibility related to bioterrorism response in Washington State.

Attendees

Stakeholder Group Members

Kent Baxter, *King County Sheriffs Office*

Bill Bear, *Briarcrest Neighborhood Association*

Jeff Flesner, *Fircrest School*

Jim Hardman, *Friends of Fircrest*

Scott Keeny, *Shoreline Fire Department*

Patty Hale, *Ridgecrest Neighborhood Association (alternate for Dick Nicholson)*

Jan Stewart, *Public-at- Large*

Staff

Romesh Gautom, *Director, Public Health Laboratory*

Lain Knowles, *Public Health Laboratory, Assistant Director*

Jim Robertson, *Chief Administrator for Epidemiology, Department of Health*

Jude Van Buren, *Assistant Secretary, Department of Health*

Margaret Norton-Arnold, *Facilitator*

Amanda Sparr, *Administrative Assistant*

Introduction and Overview

Margaret opened the meeting and welcomed the group. Members shared information about a number of upcoming community events, including:

- Fircrest FunFest: July 31 (Vince and Dick play in a band that will be performing at this event.)
- Shoreline SolarFest and Taste of Shoreline: July 18-19 (Bill Bear will be making a presentation at this event.)
- Celebrate Shoreline Parade and Festival: August 16 (Neighborhood associations are involved.)

Kent Baxter also described ongoing officer training that has been taking place at Shoreline Community College.

Update on Consultant Selection Process

Jim Robertson provided the group with an overview of the consultant selection process.

The Department of Health began by developing a scope of work, which the stakeholder advisory group reviewed and commented on. The Department then finalized the Request for Qualifications, which was advertised to a list of contractors that have been prequalified by Washington State, Department of General Administration.

Two proposals were received, and interviews of both firms will be held on Friday, July 18. Jim Hardman, Jan Stewart, Bill Bear, and Gail Marsh will participate in the interviews together with Jim Robertson, Lain Knowles and Greg Staley of Department of Health, and Greg Rohner from Department of General Administration.

Committee members asked why only two proposals were submitted, and wondered if DOH was concerned about this. Jim Robertson said he was not concerned; risk assessment is a highly specialized field, and the pool of qualified consultants is relatively small. Moreover, the proposals submitted were from firms that appear to have strong credentials and experience in assessing risk. Jim remarked that it is better to have two high quality teams submit, than to receive a high volume of responses from firms that may or may not be fully qualified to do the work.

There was some discussion about the speed at which the risk assessment will be conducted, since the Department has asked that it be finalized by the end of 2008. Jim reminded the group that the Washington State Legislature requested that the risk assessment be available for the next legislative session, which is January 2009. Therefore, the contractor must begin the work now, and have the assessment ready for submittal to the Legislature in December 2008.

Group Suggestions for Interview Questions

Stakeholder group members suggested the types of questions that should be asked at the consultant team interviews, including:

- How do you see your role in relation to public relations or community education?
- How will you define “risk” to help the community understand the implications of risk?
- How will you provide recommendations on decreasing risk? What level of detail will these recommendations include (i.e. building materials)?
- How will you evaluate the potential for risk from the future expansion of the Lab?
- Do you stand to gain additional revenue from the Department of Health as a result of your findings or recommendations?
- What software and format will be used for files and reports?
- What will your deliverables (interim and final) be?
- What is the definition of a BSL 3-extended, or enhanced, lab? What are the increased risks of such a facility?
- Will you be afraid to share bad news about the Laboratory with the Department of Health?
- Are we asking the right questions? Are there other risk criteria that you would recommend?
- Will you interview first responders?
- Will you review the emergency response plans internally, and at local offices?
- What is your level of familiarity with hazardous materials?
- Do you have any other large projects or significant levels of resources committed that might interfere with this project?
- What special challenges do you foresee, as this is the first time this type of risk assessment has been done for a public health laboratory?
- Will we have access to working notes?
- What impact or relevance does Homeland Security have on this project?

- Will you evaluate the risks that have a small probability but a great potential for damage?
- How do you interpret the criteria related to neighborhoods on page 9 of the scope of work?
- In addition to auditing the existing safety certifications and plans, what other standards for safety verification exist?

Lain will take responsibility for working with these questions to develop the interview format and discussion.

Presentation and Discussion: Bioterrorism Response

State Representative Maralyn Chase had distributed a newsletter to the Shoreline community stating that the Public Health Laboratories' mission "has expanded to become the state's bioterrorism response laboratory."

Jan Stewart and several other group members were concerned about these statements and wondered if they were true; this portion of the meeting agenda was devoted to a discussion of the issues raised.

Romesh Gautom reviewed with the group the entire system of public health laboratories throughout Washington State. Although the Shoreline Laboratory is the only such state facility within Washington, other laboratories exist at the County level, federal level, and at Washington State University in Pullman. All of these laboratories are part of a network of statewide response to any potential threats to public health. In addition, the PHL is linked to the national Center for Disease Control in Atlanta, Georgia. Although the PHL does have an authorized responsibility to analyze substances that may have been part of a suspected act of bioterrorism, the Lab is by no means the only facility responsible for this analysis in Washington State.

Jude van Buren emphasized that the Laboratory's mission has not changed, and that it will not change in the future. The same viruses and pathogens that have always been analyzed at the Lab will continue to be analyzed. Since 2001, however, the world has changed; especially in relation to the potential for bioterrorism. Virtually any chemical, virus, or pathogen can be used as a bioterrorist weapon; *e. coli*, for example, is a bacteria that can contaminate food and make people very sick. If someone wants to deliberately spread *e. coli* to the general populace, it is possible to do that. The PHL is responsible for analyzing samples of *e. coli*, among numerous other harmful bacteria and other substances. The Laboratory will continue to perform this role for Washington State.

Since 2001, the emerging concern has been with substances such as anthrax; these have been redefined as “select agents” under federal regulations. Romesh Gautam noted that the Public Health Laboratory conducts about three million tests per year, and that an average of about four of these three million tests are related to suspicious “white powder” substances.

More importantly, however, is the degree to which the “first responder” (police, fire) role has changed and been augmented since 2001. Although previous plans for the PHL expansion showed a receiving and demobilization unit, that facility is not longer incorporated into the Laboratory expansion plans. This is primarily because the first responder role has become much more rigorous. Suspicious materials are now handled and diagnosed on-site, both for the safety of the officers involved and for the surrounding community. If possible, decontamination of suspicious materials also occurs at the site of the first response. As a result of these procedures, a “preliminary screening” has already been completed on any materials that are actually brought to the Lab; decontamination procedures have also been enacted prior to substances being delivered to the Laboratory. And, only very small amounts of these substances are delivered to the Laboratory for a comprehensive analysis.

All of the Department of Health staff at the meeting again reiterated that there were absolutely no plans to construct a BSL 4 Laboratory. Nor are there any plans to construct a “BSL 3-Enhanced” Laboratory. As they had stated at the first stakeholder group meeting, staff reemphasized that the proposed laboratory expansion is only intended to help improve the safety and working efficiency of the current BSL 3 laboratory and receiving space.

Stakeholder group members recommended that the Department of Health issue a press release or other publication related to this issue to help set the record straight. They said that numerous rumors about the Laboratory are circulating throughout the community. Staff responded with information about the upcoming newsletter, and also said they appreciated these suggestions from group members.

Public Comment

Jim Walsh asked about the proposed containment pavilion, and when that had been dropped from the expansion plans, noting that there was considerable confusion about what was actually proposed to be built.

Jude and Romesh explained that the previous ten-year capital plan submitted to the Washington State Legislature did include a separate receiving, containment, and demobilization facility. The new ten-year capital plan, which will become a public document on September 1 of this year, does not include this facility. This is primarily due to the increased roles and responsibilities of first responders, as was discussed previously in the meeting.

The upcoming risk assessment may also highlight other capital improvements needed to improve the overall safety of Laboratory operations, and, if so, the resulting capital request will be made to the Washington State Legislature.

Bill Anderson asked Jude what she meant when she said earlier in the meeting that “times have changed.” Jude responded that, following 9/11, the world changed in terms of government security concerns. A major change has been in the role and responsibilities of the first responders; Jude reiterated that this is why the separate demobilization facilities are no longer needed as part of the PHL Addition.

Next Steps

In the next couple of weeks, a newsletter will be mailed to 2400 residences in the vicinity of the Public Health Lab. All members of the stakeholder group, and their email addresses, are listed in the newsletter. Group members reviewed the newsletter and the distribution map. The goal of the newsletter is to provide information about the ongoing work of the Public Health Laboratory, as well as the risk and safety assessment. The newsletter also offers Laboratory tours for anyone who is interested.

The next meeting of the stakeholder group will be Friday, August 8th, from 1:00 to 4:00 p.m. This will be the kick-off meeting with the risk assessment consulting team.

Two additional stakeholder group meetings are scheduled on Friday, September 12, from 3:00-6:00 p.m. and on Friday, October 17, also from 3:00 a.m. to 6:00 p.m.

Jim Hardman had suggested in an earlier email that perhaps the stakeholder group should meet more often; this will be further explored once the consultant team is on board.

The Public Health Laboratory will also host a public open house in the fall to present the risk assessment status, findings, and solutions.