



King County

King County Board of Health

Staff Report

Agenda item No: 8 - 11

Date: October 17, 2024

Resolution No: BOH24-03, BOH 24-04,
BOH24-05, BOH 24-06

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Subject

A set of four proposed resolutions regarding the reappointment and appointment of non-elected candidates to the King County Board of Health.

Summary

Proposed Resolutions identifying the King County Board of Health's selected nonelected regular and alternate member candidates to serve three-year terms beginning in January 2025:

- Resolution BOH 24-03 would identify Esther Lucero and Abigail Echo-Hawk to be reappointed to serve as the regular nonelected member and alternate member, respectively, selected by the American Indian Health Commission of Washington State.
- Resolution BOH 24-04 would identify Katherine Gudgel to be reappointed to serve as the regular nonelected member representing public health, facilities, and professionals.
- Resolution BOH 24-05 would identify Mustafa Mohammed to be appointed to a seat representing consumers of public health.
- Resolution BOH24-06 would identify Dr. LaMont Green to be appointed to the alternate seat representing consumers of public health.

Background

Pursuant to R.C.W. 70.05.035, the King County Board of Health shall consist of an equal number of elected and non-elected members. One of the non-elected members and an alternate must be selected by the American Indian Health Commission for Washington State, while the remaining members should be chosen by the King County Board of Health from three distinct

categories of interests: public health, health care facilities and providers, consumers of public health, and other community stakeholders. Additionally, in compliance with chapter 246-90 WAC, BOH chapter 2.04, and K.C.C. chapter 2.35, the King County Board of Health is required to select applicants who will represent community stakeholders, thereby enhancing the Board's efforts to preserve and protect public health.

Recruitment Process

The King County Board of Health plays a crucial role in promoting and protecting the health of King County residents. The King County Board seeks members who have demonstrated a commitment to public health, who represent a diversity of expertise and lived experiences, and who identify with historically underrepresented communities.

When assessing candidates for nonelected positions, the Board takes into consideration the following:

- Whether the applicant's background meets the qualifications of the applicant's selected category or categories as defined in WAC 246-095-010;
- Potential conflicts of interest;
- The applicant's demonstrated commitment to public health;
- Service, current or past, on other local boards or commissions;
- Whether the applicant represents a diversity of expertise and lived experience;
- Whether the applicant represents the geographic diversity of the community; and
- Whether the applicant identifies with a historically underrepresented community.

The King County Board of Health recruitment strategy included advertising for the vacant alternate position through various channels such as:

- Posting vacancy announcements on the King County website,
- Advertisements in the local newspapers of record
- Posting on Public Health – Seattle & King County's online blog
- E-mail recruitments sent via email in English and Spanish
- Available vacancy announcements in any language upon request;
- Vacancy announcements were also posted across the King county region

Three nonelected boardmember positions and two alternate positions are set to expire in December 2024 -- Position 3, representing public health facilities and providers; Position 5, representing consumers of public health; Positions 8 and 9, the boardmember and alternate positions identified by the American Indian Health Commission of Washington; and Position 11, the alternate representing consumers of public health. New terms begin on January 1, 2025, and end December 31, 2027.

In a letter dated July 1, 2024, Board of Health Chair Teresa Mosqueda wrote to the American Indian Health Commission of Washington State (AIHC), asking the AIHC to designate one tribal

representative and one alternate to serve on the Board for a three-year term beginning in January 2025. On October 8, 2024, Vicki Lowe, AIHC Executive Director, informed the Board Administrator via phone call that the AIHC designates Esther Lucero and Abigail Echo-Hawk to serve as member and alternate, respectively.

Boardmember Katherine Gudgel, who represents public health providers in Position 3, indicated she is willing to serve a second term, so the Board did not recruit for the position. Boardmember Robin Narruhn, who represents consumers of public health in Position 5, indicated that she would not serve a second term, leaving the position vacant beginning in January 2025. Her alternate, Mustafa Mohammed, affirmed that he would be willing to serve in Position 5, so the Board recruited for Position 11 that he would be vacating.

A subcommittee consisting of Boardmembers Christopher Archiopoli, Katherine Gudgel, Victor Loo and Alternates Francoise Milinganyo and Mustafa Mohammed volunteered to review applications and interview candidates for Position 11. The Board received five applications, four were invited for interviews, and three candidates participated in an interview in August and September. After thorough review, the subcommittee recommended LaMont Green to serve in Position 11.

Reappointment

Esther Lucero and Abigail Echo-Hawk. Resolution 24-03 recommends reappointing Esther Lucero and Abigail Echo-Hawk as the member and alternate, respectively, identified by the American Indian Health Commission of Washington State for three-year terms expiring on December 31, 2027. This would be the second term for both.

Esther Lucero is Dinè and Latina and a third generation urban Indian from Colorado Springs, Colorado. A leader in national public health policy for urban American Indians and Alaska Natives, Esther became CEO of the Seattle Indian Health Board in 2015 and completed a reorganization of the company by establishing a leadership team that is leading the charge toward an informed system of care that is grounded in indigenous knowledge.

Abigail Echo-Hawk (Pawnee), MA, is the Executive Vice President of Seattle Indian Health Board and the Director of their data and research division, Urban Indian Health Institute. She serves on the Robert Wood Johnson Public Health Data National Commission, the University of Washington Population Health Initiative External Advisory Board, the Data for Indigenous Justice Board, and many other boards and committees related to data justice and health equity. She also served on the National Academies of Sciences, Engineering, and Medicine (NASEM) committee to create A Framework for Equitable Allocation of Vaccine for the Novel Coronavirus in 2020.

Katherine Gudgel. Resolution 24-04 recommends reappointing Katherine Gudgel as a representative of public health facilities and providers for a three-year term expiring on

December 31, 2027. She has indicated her interest in serving an additional term. This would be her second term.

Katherine Gudgel has an extensive background in the healthcare industry. Katherine's work experience includes roles such as Director of Community Programs at HealthPoint (CHC), where she oversaw various health programs in schools and for the homeless population. Prior to this, she worked as a Community Health Manager in the Seattle area, conducting needs assessments and developing strategies for organizations. Katherine also served as a Contracts Project Manager at Community Health Plan of Washington, focusing on ensuring compliance with contract requirements.

Appointments

Mustafa Mohammed. Resolution BOH 24-05 recommends Mustafa Mohammed to serve as a representative of consumers of public health for a three-year term, expiring on December 31, 2027. This would be his first term as a regular Boardmember. Mustafa Mohammed has served on the Board since 2023 as the alternate member representing consumers of public health.

Mustafa Mohammed, MBCHB, MHP, AAC, was born and lived in Iraq until 2006. He speaks English, Arabic, Turkish, and some Kurdish. He lived & worked as a physician in Baghdad during the first & second Gulf Wars. He completed his medical school in Iraq (MBCHB) in 1993 and continued work as a medical doctor for 25 years in governmental, private hospitals and clinics. He immigrated to the USA in 2008, rebuilt himself as a Mental Health Professional, and specializes in working with refugees and immigrants from the Middle East. He is a certified Mental Health Professional and Cross-Cultural Counselor licensed in Seattle Washington, currently employed at Lutheran Community Services Northwest (LCSNW). The focus of his work there is both as an intake specialist & clinician to diverse refugee clients, who are victims of war trauma in their home countries and were displaced as refugees or sought asylum here in the US. He started an Iraqi Men's Group in 2015, and it became very successful program at LCSNW.

LaMont Green. BOH 240-06 recommends LaMont Green to serve as the alternate member representing consumers of public health for a three-year term, expiring on December 31, 2027.

Dr. LaMont Green has nearly 20 years of experience helping local communities and governments identify and dismantle the persistent drivers of inequity in human services, homelessness, housing, behavioral health, and criminal justice systems. He is a person with lived experience of homelessness and is a military Veteran. He has led several community-driven initiatives centered on improving systems of care for complex health and historically disenfranchised populations, and currently codirects the Technical Assistance Collaborative's (TAC) Systems Alignment Innovation Hub. Dr. Green also brings expertise in Department of Housing and Urban Development (HUD) homelessness programs, human-centered design, continuous quality improvement, and implementation science. He is a nationally recognized

racial equity leader and has spoken at numerous conferences to inspire action towards undoing institutional racism and other forms of oppression. He received his Doctorate of Social Work from the University of Southern California with a focus on harnessing social innovation to address the Grand Challenge of Achieving Equal Opportunity and Justice for All.

Candidates selected by the board were recruited and chosen in accordance with 246-90 WAC, pertaining to Local Board of Health Membership, and each candidate meets the qualifications and requirements of RCW 70.05.035(1)(a).

Next steps

In accordance with the recommendations for the Board of Health, the resolutions naming the new nonelected regular and alternate members will be transmitted to the King County Council for their confirmation. The Board of Health Administrator will transmit the necessary documents to the Clerk of the King County Council in accordance with the requirements of King County Code.

Attachment:

1. Biographies for 2025 Board of Health Nonelected Member Candidates