

**WASHOE COUNTY
DISTRICT BOARD OF HEALTH**

Denis Humphreys, OD, Chairman
Matt Smith, Vice Chairman
George Furman, MD,
Councilman Dan Gustin
Commissioner Kitty Jung
Amy J Khan, MD, MPH
Councilwoman Julia Ratti

AGENDA

Meeting of the
DISTRICT BOARD OF HEALTH
Health Department Building
South Auditorium
1001 East Ninth Street
Reno, Nevada
August 27, 2009
1:00 PM

NOTICE

PURSUANT TO NRS 241.020, PLEASE BE ADVISED THAT THE AGENDA FOR THE DISTRICT BOARD OF HEALTH MEETING HAS BEEN POSTED AT THE FOLLOWING LOCATIONS: WASHOE COUNTY HEALTH DISTRICT (1001 E. 9TH ST), RENO CITY HALL (1 E. 1ST ST), SPARKS CITY HALL (431 PRATER WAY), WASHOE COUNTY ADMINISTRATION BUILDING (1001 E. 9TH ST), AND ON THE WASHOE COUNTY HEALTH DISTRICT WEBSITE @ WWW.WASHOECOUNTY.US/HEALTH. PUBLIC COMMENT IS LIMITED TO THREE (3) MINUTES PER PERSON.

The Board of Health may take action on the items denoted as **“(action)”**.

Business Impact Statement – A Business Impact Statement is available at the District Health Department for those items denoted with a \$

1. Call to Order, Pledge of Allegiance Led by Invitation	HELD
2. Roll Call	HELD
3. Public Comment (3 minute time limit per person)	COMMENTS PRESENTED
4. Approval/Deletions to the Agenda for the August 27, 2009 (action)	APPROVED AS AMENDED
5. Response to Mr. Gustin's Question of July 23, 2009 Specific to the Minutes of the June 25, 2009 Meeting and Approval/Additions/Deletions to the Minutes of the Meeting of July 23, 2009 (action)	PRESENTED APPROVED

6. Recognitions

A. Years-of-Service

1. Jennifer Stoll-Hadayia – CCHS – 5 Years
2. Jeffrey Brasel - EHS – 15 Years
3. Michael L. Ezell – EHS – 15 Years
4. Jackie Lynn Goatley – AHS – 15 Years

B. Completion of Excellence in Public Service – Essentials of Personal Effectiveness Program; Essentials of High Performing Teams Program; and Essentials of Support Staff Program

1. Mary Ames – AQM

C. Food and Drug Administration's (FDA) Associate Commissioner for Foods and Centers for Disease Control (CDC)– Invitation to be a Member of the National Food Protection "Response Workgroup"

1. Kathleen Hanley

YEARS-OF-SERVICE

JENNIFER STOLL-HADAYIA – 5 YEARS
JEFFREY BRASEL – 15 YEARS
MICHAEL EZELL – 15 YEARS
JACKIE GOATLEY – 15 YEARS

EXCELLENCE IN PUBLIC SERVICE –
ESSENTIALS OF PERSONAL
EFFECTIVENESS – ESSENTIALS OF HIGH
PERFORMING TEAMS – ESSENTIALS
SUPPORT STAFF
MARY AMES

FOOD & DRUG ADMINISTRATION
ASSOCIATE COMMISSIONER – FOODS
& CENTERS DISEASE CONTROL (CDC) –
MEMBER – NATIONAL FOOD PROTECTION –
"RESPONSE WORKGROUP"
KATHLEEN HANLEY

7. Consent Agenda

Matters, which the District Board of Health may consider in one motion. Any item, however, may be discussed separately by Board member request. Any exceptions to the consent agenda must be stated prior to approval.

A. Air Quality Management Cases

1. Recommendation to Uphold Citations Unappealed to the Air Pollution Control Hearing Board

- a. Meritage Homes of Nevada - Case No. 1042, NOV No. 4697 (action)
- b. Cal Neva Resort Spa/Casino – Case No. 1043, NOV No. 4699 (action)
- c. Top Carpet Care – Case No. 1044, NOV No. 4700 (action)

UPHELD, \$1000 FINE LEVIED
UPHELD, \$1250 FINE LEVIED
UPHELD, \$2000 FINE LEVIED

2. Recommendations of Cases Appealed to the Air Pollution Control Hearing Board

- a. No Cases This Month)

B. Recommendation to Approve Variance Case(s) Presented to the Sewage, Wastewater & Sanitation Hearing Board

1. No Cases This Month

C. Budget Amendments / Interlocal Agreements / Authorized Position Control Numbers

1. Retroactive Approval of the District Health Officer's Acceptance of Subgrant Amendment #1 from the Nevada State Health Division, Bureau of Health Planning and Statistics for the Public Health Preparedness – Assistant Secretary for Preparedness & Response (ASPR) Grant Program Extending the Term of the Grant Period for One Year and Authorizing Expenditures in the Amount of \$66,939 Through August 8, 2010 (action)
2. Retroactive Approval of the District Health Officer's Acceptance of Subgrant Amendment #2 from the Nevada State Health Division, Bureau of Health Planning & Statistics in the Total Amount of \$1,013,550 in Support of the Public Health Preparedness (PHP) Program for the Period of August 10, 2008 Through August 9, 2009; Approval of Amendments Totaling an Increase of \$4,326 in Revenue and Expense to the PHP Base Grant Program (internal order # 10713) FY 10 Budget; and Approval of Amendments Totaling an Increase of \$750 in Revenue and Expense to the PHP Pan Flu Carry Forward Grant Program (internal order #10738) FY 10 Budget (action)
3. Approval of Subgrant Amendment #1 from the Nevada State Health Division, Bureau of Health Statistics, Planning, and Emergency Response in the Amount of \$92,178 in Support of the HIV Surveillance Program for the Period of January 1, 2009 to December 31, 2009; and Approval of Amendments Totaling an Increase of \$6,949 in Both Revenue and Expenses to the Adopted FY 10 HIV Surveillance Grant Program, IO 10012, to Bring the FY 10 Adopted Budget into Alignment with the Grant (action)

APPROVED

APPROVED

APPROVED

- | | |
|---|------------------------------------|
| <p>4. Approval of Notice of Grant Award from the Nevada Department of Health and Human Services, Grants Management Unit, Fund for a Healthy Nevada, in the Total Amount of \$192,883 in Support of the Comprehensive Tobacco Prevention Program for the Period of July 1, 2009 to June 30, 2010; and Approval of Amendments Totaling a Net Increase of \$15,115.37 in Both Revenue and Expenses to the Adopted FY 10 Comprehensive Tobacco Prevention Program Grant Budget, IO 10418 (action)</p> | <p>APPROVED</p> |
| <p>5. Approval of Subgrant Amendment #1 from the Nevada State Health Division, Bureau of Child, Family and Community Wellness, for the Women, Infants and Children (WIC) Clinic Grant Program Extending the Term of the Grant Period for One Year, Through September 30, 2010 (Current Award Amount Totals \$1,200,096) (action)</p> | <p>APPROVED</p> |
| <p>6. Approval of FY 10 Budget Amendments Totaling an Increase of \$10,021 in Both Revenue and Expense in Support of the Tuberculosis (TB) Program Grant Budget (IO 10035) (action)</p> | <p>APPROVED</p> |
| <p>8. Air Pollution Control Hearing Board Cases – Appealed to the District Board of Health
A. No Cases This Month</p> | |
| <p>9. Regional Emergency Medical Services Authority
A. Review and Acceptance of the Operations and Financial Report for June and July 2009 (action)
B. Update of REMSA's Community Activities Since July 2009</p> | <p>ACCEPTED

PRESENTED</p> |
| <p>10. Review and Acceptance of the Monthly Public Health Fund Revenue and Expenditure for July 2009 (action)</p> | <p>ACCEPTED</p> |
| <p>11. FY 10 Adopted Budget – Project Accounting Sheets</p> | <p>PRESENTED</p> |
| <p>12. FY 10 Organizational Charts – April 9, 2009 and July 1, 2009</p> | <p>PRESENTED</p> |
| <p>13. Updated Report on Illegal Food Vendors with Possible Direction to Staff CONTINUED TO THE SEPTEMBER 24, 2009 MEETING</p> | <p>CONTINUED</p> |
| <p>14. Update on Old Washoe Home Owners Association Solid Waste Complaint (as presented by Mr. Struffert – July 23, 2009) with Possible Direction to the Board CONTINUED TO THE SEPTEMBER 24, 2009 MEETING</p> | <p>CONTINUED</p> |
| <p>15. Discussion of Possible Dates for the District Board of Health 2009 Strategic Planning Session with Possible Direction to Staff (action)</p> | <p>OCTOBER 8, 2009</p> |
| <p>16. Presentation of Dates of National Association Conferences for 2010</p> | <p>PRESENTED</p> |
| <p>17. Update on Attendance at the National Association of Local Boards of Health (NALBOH) Annual Meeting – July 1 – 3, 2009, Philadelphia, Pennsylvania</p> | <p>CONTINUED</p> |
| <p>18. Staff Reports and Program Updates
A. Director, Epidemiology and Public Health Preparedness – Communicable Disease; Public Health Preparedness (PHP) Activities
B. Director, Community and Clinical Health Services – CCHS Representation in Community; Washoe County Childhood Obesity Forum; “Green” Clinic Operations
C. Director, Environmental Health Services – Vector-Borne Disease Prevention Activities; Pool Inspection Program; Hand Washing Outreach</p> | <p>PRESENTED</p> |

D. Director, Air Quality Management - Monthly Report of Air Quality: Everything Green, Monitoring/Planning Activities, Permitting Activities, Compliance/Inspection Activity, and Enforcement Activity; Discussions with The Nevada Fire Safe Council

E. Administrative Health Services Officer – NO REPORT THIS MONTH

F. District Health Officer – NACCHO Conference; State and Local Health Officers' Meeting; Rotary International District Youth Exchange Program

- 19. Board Comment – Limited to Announcements or Issues for Future Agendas
- 20. Adjournment **(action)**

COMMENTS PRESENTED

ADJOURNED

NOTE: Facilities in which this meeting is being held are accessible to the disabled. Persons with disabilities who require special accommodations or assistance at the meeting should call the Administrative Health Services Division, 328-2410, 24-hours prior to the meeting.

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|----------------|---|---------------|
| 1:00 PM | 1. Call to Order, Pledge of Allegiance Led by Invitation | Dr. Humphreys |
| | 2. Roll Call | Ms. Smith |
| | 3. Public Comment (3 minute time limit per person) | Dr. Humphreys |
| | 4. Approval/Deletions to the Agenda for the August 27, 2009 (action) | Dr. Humphreys |
| | 5. Response to Mr. Gustin's Question of July 23, 2009 Specific to the Minutes of the June 25, 2009 Meeting and Approval/Additions/Deletions to the Minutes of the Meeting of July 23, 2009 (action) | Dr. Humphreys |

6. Recognitions Dr. Humphreys
- A. Years-of-Service
 - 1. Jennifer Stoll-Hadayia – CCHS – 5 Years
 - 2. Jeffrey Brasel - EHS – 15 Years
 - 3. Michael L. Ezell – EHS – 15 Years
 - 4. Jackie Lynn Goatley – AHS – 15 Years
 - B. Completion of Excellence in Public Service – Essentials of Personal Effectiveness Program; Essentials of High Performing Teams Program; and Essentials of Support Staff Program
 - 1. Mary Ames – AQM
 - C. Food and Drug Administration’s (FDA) Associate Commissioner for Foods and Centers for Disease Control (CDC)– Invitation to be a Member of the National Food Protection “*Response Workgroup*”
 - 1. Kathleen Hanley
7. Consent Agenda Dr. Humphreys
- Matters, which the District Board of Health may consider in one motion. Any item, however, may be discussed separately by Board member request. Any exceptions to the consent agenda must be stated prior to approval.
- A. Air Quality Management Cases
 - 1. Recommendation to Uphold Citations Unappealed to the Air Pollution Control Hearing Board Mr. Bonderson
 - a. Meritage Homes of Nevada - Case No. 1042, NOV No. 4697 **(action)**
 - b. Cal Neva Resort Spa/Casino – Case No. 1043, NOV No. 4699 **(action)**
 - c. Top Carpet Care – Case No. 1044, NOV No. 4700 **(action)**
 - 2. Recommendations of Cases Appealed to the Air Pollution Control Hearing Board Mr. Bonderson
 - a. No Cases This Month)
 - B. Recommendation to Approve Variance Case(s) Presented to the Sewage, Wastewater & Sanitation Hearing Board Mr. Coulter
 - 1. No Cases This Month
 - C. Budget Amendments / Interlocal Agreements / Authorized Position Control Numbers
 - 1. Retroactive Approval of the District Health Officer’s Acceptance of Subgrant Amendment #1 from the Nevada State Health Division, Bureau of Health Planning and Statistics for the Public Health Preparedness – Assistant Secretary for Preparedness & Response (ASPR) Grant Program Extending the Term of the Grant Period for One Year and Authorizing Expenditures in the Amount of \$66,939 Through August 8, 2010 **(action)**
 - 2. Retroactive Approval of the District Health Officer’s Acceptance of Subgrant Amendment #2 from the Nevada State Health Division, Bureau of Health Planning & Statistics in the Total Amount of \$1,013,550 in Support of the Public Health Preparedness (PHP) Program for the Period of August 10, 2008 Through August 9, 2009; Approval of Amendments Totaling an Increase of \$4,326 in Revenue and Expense to the PHP Base Grant Program (internal order # 10713) FY 10 Budget; and Approval of Amendments Totaling an Increase of \$750 in Revenue and Expense to the PHP Pan Flu Carry Forward Grant Program (internal order #10738) FY 10 Budget **(action)**
 - 3. Approval of Subgrant Amendment #1 from the Nevada State Health Division, Bureau of Health Statistics, Planning, and Emergency Response in the Amount of \$92,178 in Support of the HIV Surveillance Program for the Period of January 1, 2009 to December 31, 2009; and Approval of Amendments Totaling an Increase of \$6,949 in Both Revenue and Expenses to the Adopted FY 10 HIV Surveillance Grant Program, IO 10012, to Bring the FY 10 Adopted Budget into Alignment with the Grant **(action)**

4. Approval of Notice of Grant Award from the Nevada Department of Health and Human Services, Grants Management Unit, Fund for a Healthy Nevada, in the Total Amount of \$192,883 in Support of the Comprehensive Tobacco Prevention Program for the Period of July 1, 2009 to June 30, 2010; and Approval of Amendments Totaling a Net Increase of \$15,115.37 in Both Revenue and Expenses to the Adopted FY 10 Comprehensive Tobacco Prevention Program Grant Budget, IO 10418 **(action)**
 5. Approval of Subgrant Amendment #1 from the Nevada State Health Division, Bureau of Child, Family and Community Wellness, for the Women, Infants and Children (WIC) Clinic Grant Program Extending the Term of the Grant Period for One Year, Through September 30, 2010 (Current Award Amount Totals \$1,200,096) **(action)**
 6. Approval of FY 10 Budget Amendments Totaling an Increase of \$10,021 in Both Revenue and Expense in Support of the Tuberculosis (TB) Program Grant Budget (IO 10035) **(action)**
-
8. Air Pollution Control Hearing Board Cases – Appealed to the District Board of Health
 - A. No Cases This Month Mr. Bonderson

 9. Regional Emergency Medical Services Authority Mr. Smith
 - A. Review and Acceptance of the Operations and Financial Report for June and July 2009 **(action)**
 - B. Update of REMSA's Community Activities Since July 2009

 10. Review and Acceptance of the Monthly Public Health Fund Revenue and Expenditure for July 2009 **(action)** Ms. Coulombe

 11. FY 10 Adopted Budget – Project Accounting Sheets Ms. Coulombe

 12. FY 10 Organizational Charts – April 9, 2009 and July 1, 2009 Ms. Coulombe

 13. Updated Report on Illegal Food Vendors with Possible Direction to Staff **CONTINUED TO THE SEPTEMBER 24, 2009 MEETING** Mr. McNinch

 14. Update on Old Washoe Home Owners Association Solid Waste Complaint (as presented by Mr. Struffert – July 23, 2009) with Possible Direction to the Board **CONTINUED TO THE SEPTEMBER 24, 2009 MEETING** Ms. Rucker

 15. Discussion of Possible Dates for the District Board of Health 2009 Strategic Planning Session with Possible Direction to Staff **(action)** Dr. Humphreys

 16. Presentation of Dates of National Association Conferences for 2010 Dr. Anderson

 17. Update on Attendance at the National Association of Local Boards of Health (NALBOH) Annual Meeting – July 1 – 3, 2009, Philadelphia, Pennsylvania Ms. Jung

 18. Staff Reports and Program Updates
 - A. **Director, Epidemiology and Public Health Preparedness** – Communicable Disease; Public Health Preparedness (PHP) Activities Dr. Todd
 - B. **Director, Community and Clinical Health Services** – Ms. Brown
 - C. **Director, Environmental Health Services** – Vector-Borne Disease Prevention Activities; Pool Inspection Program; Hand Washing Outreach Mr. Sack
 - D. **Director, Air Quality Management** - Monthly Report of Air Quality: Everything Green, Monitoring/Planning Activities, Permitting Activities, Compliance/Inspection Activity, and Enforcement Activity; Discussions with The Nevada Fire Safe Council Mr. Goodrich
 - E. **Administrative Health Services Officer** – NO REPORT THIS MONTH Ms. Coulombe

- F. District Health Officer – NACCHO Conference; State and Local Health Officers' Meeting;
Rotary International District Youth Exchange Program** Dr. Anderson
19. Board Comment – Limited to Announcements or Issues for Future Agendas Dr. Humphreys
20. Adjournment (**action**) Dr. Humphreys

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WASHOE COUNTY DISTRICT BOARD OF HEALTH MEETING
 Board Room - Health Department Building
 Wells Avenue at Ninth Street

August 27, 2009

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WASHOE COUNTY DISTRICTBOARD OF HEALTH MEETING

August 27, 2009

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Adjournment	19

WASHOE COUNTY DISTRICT BOARD OF HEALTH MEETING
August 27, 2009

PRESENT: Denis Humphreys, OD, Chairman; Mr. Matt Smith, Vice Chairman; Councilman Dan Gustin; Commissioner Kitty Jung; and Councilwoman Julia Ratti

ABSENT: George Furman, MD and Amy Khan, MD

STAFF: Dr. Mary Anderson, District Health Officer; Eileen Coulombe, Administrative Health Services Officer; Andrew Goodrich, Director, Air Quality Management; Mary-Ann Brown, Director, Community and Clinical Health Services; Bob Sack, Director, Environmental Health Services; Dr. Randall Todd, Director, Epi and Public Health Preparedness; Patsy Buxton, Fiscal Compliance Officer; Jeanne Rucker, Environmentalist Health Specialist Supervisor; Stacy Hardie, Public Health Nursing Supervisor; Steve Fisher, Department Computer Application Specialist; Noel Bonderson, Air Quality Management Supervisor; Dave McNinch, Environmentalist Health Specialist Supervisor; Susie Dugger, Air Quality Specialist; Mary Ames, Office Assistant II; Kathleen Hanley, Senior Environmentalist Specialist; Mike Ezell, Senior Environmentalist Health Specialist; Bev Bayan, WIC Program Manager; Judy Davis, Public Information Officer; Jennifer Hadayia, Public Health Program Manager; Janet Smith, Recording Secretary and Leslie Admirand, Deputy District Attorney

At 1:05pm, Chairman Humphreys called the Washoe County District Board of Health meeting to order, followed by the Pledge of Allegiance led by Ms. Julia Ratti, member of the District Board of Health.

ROLL CALL

Roll call was taken and a quorum noted. Mrs. Janet Smith, Recording Secretary, advised that Drs. Furman and Khan are excused.

PUBLIC COMMENT

Mr. Bill Fine, Executive Director of Impact, stated that he has "been following the news about H1N1"; however, he has not heard any news regarding "a plan" for the swine flu (H1N1), specifically "whether there is the plan in-place." Mr. Fine questioned "when Washoe County would be receiving the vaccine; how much will the shots cost, who has to pay, and how much vaccine will be received."

WASHOE COUNTY DISTRICT BOARD OF HEALTH MEETING

August 27, 2009

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In response to Chairman Humphreys regarding providing an answer to Mr. Fine, Ms. Leslie Admirand, Deputy District Attorney, advised that the Board can discuss these issues during Board comment not during public comment. Ms. Admirand advised that should the Board request additional information from Staff it can be agendaized for next month's meeting.

Chairman Humphreys advised Mr. Fine that additional information regarding the H1N1 will be presented at the end of today's meeting.

APPROVAL/ADDITIONS – AGENDA – AUGUST 27, 2009

Chairman Humphreys called for approval of the agenda of the Washoe County District Board of Health meeting of August 27, 2009.

Ms. Jung requested that her report item 17. Update on the Attendance of the National Association of Local Boards of Health (NALBOH) regarding her attendance at the conference be continued to next month.

**MOTION: Ms. Ratti moved, seconded by Mr. Smith, that the District Board of Health agenda for the August 27, 2009 meeting be approved as amended.
Motion carried unanimously.**

MINUTES RESPONSE – MR. GUSTIN – JUNE 25, 2009 MEETING

APPROVAL/ADDITIONS/DELETIONS – MINUTES - JULY 23, 2009

Chairman Humphreys stated that the Board members have been provided with a response to Mr. Gustin's question from the June 25, 2009 meeting; that Ms. Brown has additional information.

Ms. Mary-Ann Brown, Director, Community and Clinical Health Services, advised that in regard to the contract with Social Services, which was approved by the Board of Health in June, Social Services makes payments to the Health District for the provision of LEEPS (Loop Electro-Excision Procedure) or colposcopy procedures for those clients "at the poverty level", who would be unable to pay. Ms. Brown advised that Staff is in the process of transitioning the provision of these services to other community agencies and will no longer be providing these services. Ms. Brown advised that there are community agencies who are willing to provide these services to individuals able to pay; that those individuals 'at or below the poverty level' will be referred directly to Social Services, which will be responsible for "preparing a plan of care to address that." Ms. Brown stated

WASHOE COUNTY DISTRICT BOARD OF HEALTH MEETING

August 27, 2009

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the benefit of the transition plan is that those clients will have "a medical home through Social Services Clinic"; therefore, the contract "remains in-place to ensure no client was unable to receive those services until the transition" occurred.

Chairman Humphreys called for any additions, deletions to the minutes of the District Board of Health meeting of July 23, 2009.

**MOTION: Mr. Gustin moved, seconded by Ms. Ratti, that the minutes of the July 23, 2009 District Board of Health meeting be approved as received.
Motion carried unanimously.**

RECOGNITIONS

Chairman Humphreys and Dr. Mary Anderson, District Health Officer, presented Certificates of Recognition to Ms. Jennifer Hadayia for **5 Years-of-Service** and Mr. Micheal Ezell for **15 Years-of-Service**. Dr. Anderson advised that prior to the meeting, she and Dr. Humphreys presented Ms. Jackie Goatley with a Certificate of Recognition for **15 Years-of-Service**, as Ms. Goatley was unable to attend today's meeting. Dr. Anderson advised that a Certificate of Recognition will be presented to Dr. Jeff Brasel for **15 Years-of-Service**.

Chairman Humphreys and Dr. Anderson introduced Ms. Mary Ames, Office Assistant II, advising that Ms. Ames has completed the Excellence in Public Service for Essentials in Personal Effectiveness Program; Essentials of High Performing Teams Program; and Essentials in Support Staff Program.

Chairman Humphreys and Dr. Anderson presented a Certificate to Ms. Kathleen Hanley, Senior Environmentalist Health Specialist, in recognition of being invited by the Food and Drug Administration's (FDA) Association Commissioner to participate in the National Food Protection Workgroup established by the FDA and the Centers for Disease Control and Prevention (CDC). Dr. Anderson advised that, as a member of the "*Response Workgroup*", Ms. Hanley has been working with representatives of other local, Federal and State agencies to address action items recommended by state and local regulators during the "*Gateway to Food Protection*" National Meeting held last summer. Dr. Anderson stated that this project is an effort of FDA and the CDC in establishing a "long-term process to achieve uniformity and consistency in food protection across the nation"; that Ms. Hanley is to be congratulated for her involvement in "such an important, national workgroup."

CONSENT AGENDA – UNAPPEALED NOTICE OF VIOLATION

Staff advised that **Citation No. 4697, Case No. 1042**, was issued to **MERITAGE HOMES OF NEVADA** on May 19, 2009, for failure to control fugitive dust emissions at the Breckenridge job site in violation of Section 040.030 (Dust Control) of the Washoe County District Board of Health Regulations Governing Air Quality Management. Staff advised that Meritage Homes of Nevada was advised of the right to appeal; however, no appeal was filed; that Staff recommends Citation No. 4697, Case No. 1042 be upheld and a fine in the amount of **\$1,000** be levied as a **negotiated settlement**.

MOTION: Mr. Gustin moved, seconded by Ms. Jung, that **Citation No. 4697, Case No. 1042 (Meritage Homes of Nevada)**, be upheld and a fine in the amount of **\$1,000** be levied as a **negotiated settlement**.
Motion carried unanimously.

CONSENT AGENDA – UNAPPEALED NOTICE OF VIOLATION

Staff advised that **Citation No. 4699, Case No. 1043** was issued to **CAL NEVA RESORT SPA/CASINO** on June 16, 2009, for the improper removal and disposal of asbestos-containing materials after a fire in the hotel in violation of Section 030.107 (Hazardous Air Pollutants), Subsections A, B and C of the Washoe County District Board of Health Regulations Governing Air Quality Management. Staff advised that Cal Neva Resort Spa/Casino was advised of the right to appeal; however, no appeal was filed; that Staff recommends Citation No. 4699, Case No. 1043 be upheld and a fine in the amount of **\$1,250** be levied as a **negotiated settlement** for a **major violation**.

MOTION: Mr. Gustin moved, seconded by Ms. Jung, that **Citation No. 4699, Case No. 1043 (Cal Neva Resort Spa/Casino)**, be upheld and a fine in the amount of **\$1,250** be levied as a **negotiated settlement** for a **major violation**.
Motion carried unanimously.

CONSENT AGENDA – UNAPPEALED NOTICE OF VIOLATION

Staff advised that **Citation No. 4700, Case No. 1044** was issued to **TOP CARPET CARE** on June 16, 2009, for improper removal and disposal of asbestos-containing materials after a fire at the Cal Neva Resort Spa/Casino in Crystal Bay, in violation of Section 030.107 (Hazardous Air Pollutants), Subsections A, B and C of the Washoe County District Board of Health Regulations Governing Air Quality Management. Staff advised that Top Carpet Care was advised of the right to appeal;

however, no appeal was filed; that Staff recommends Citation No. 4700, Case No. 1044 be upheld and a fine in the amount of **\$2,000** be levied as a **negotiated settlement** for a major violation.

MOTION: Mr. Gustin moved, seconded by Ms. Jung, that Citation No. 4700, Case No. 1044 (Top Carpet Care), be upheld and a fine in the amount of **\$2,000** be levied as a **negotiated settlement** for a major violation.
Motion carried unanimously.

Mr. Gustin stated that Air Quality Management "may want to conduct an asbestos-awareness clinic in Incline Village"; that he appreciates Air Quality's diligence in these matters.

CONSENT AGENDA – BUDGET AMENDMENTS/INTERLOCAL AGREEMENTS

The Board was advised that Staff recommends **retroactive approval** of the District Health Officer's **acceptance** of the **Subgrant Amendment #1** from the **Nevada State Health Division, Bureau of Health Planning and Statistics** for the **Public Health Preparedness – Assistant Secretary for Preparedness and Response (ASPR) Grant Program** extending the term of the grant period for one (1) year through August 8, 2010, and authorizing expenditures in the amount of **\$66,939**.

The Board was advised that Staff recommends **retroactive approval** of the District Health Officer's **acceptance** of **Subgrant Amendment #2** from the **Nevada State Health Division, Bureau of Health Planning and Statistics** in the **total amount** of **\$1,013,550** in support of the **Public Health Preparedness (PHP) Program** for the period of August 10, 2008 through August 9, 2009; **approval of amendments totaling an increase** of **\$4,326** in revenue and expense to the **PHP Base Grant Program (internal order # 10713) FY 10 Budget** and **approval of amendments totaling an increase** of **\$750** in revenue and expense to the **PHP Pan Flu Carry Forward Grant Program (internal order # 10738) FY 10 Budget**.

The Board was advised that Staff recommends **approval** of **Subgrant Amendment #1** from the **Nevada State Health Division, Bureau of Health Statistics, Planning, and Emergency Response** in the amount of **\$92,178** in support of the **HIV Surveillance Program** for the period of January 1, 2009 to December 31, 2009; and **approval of the amendments totaling an increase** of **\$6,949** in both revenue and expenses to the **adopted FY 10 HIV Surveillance Grant Program, IO 10012** to bring the FY 10 adopted budget into alignment with the Grant.

The Board was advised Staff recommends **approval** of the **Notice of Grant Award** from the **Nevada Department of Health and Human Services, Grants Management Unit, Fund for a**

Healthy Nevada, in the total amount of **\$192,883** in support of **Comprehensive Tobacco Prevention Program**, for the period of July 1, 2009 to June 30, 2010; and approval of amendments totaling a net increase of **\$15,115.37** to the adopted **FY 10 Comprehensive Tobacco Prevention Program Grant budget, IO 10418**.

The Board was advised Staff recommends approval of **Subgrant Amendment #1** from the **Nevada State Health Division, Bureau of Child, Family and Community Wellness**, for the **Women, Infants and Children (WIC) Clinic Grant Program** extending the term of the Grant period for one (1) year, through September 30, 2010 (**current award amount totals \$1,200,096**).

The Board was advised Staff recommends approval of **FY 10 Budget Amendments totaling an increase of \$10,021** in both revenue and expense in support of the **Tuberculosis Program Grant budget (IO 10035)**.

MOTION: Mr. Gustin moved, seconded by Ms. Jung, that the Subgrant Amendment #1 for Public Health Preparedness (ASPR); Subgrant Amendment #2 for the Public Health Preparedness (PHP), with the corresponding budget amendments; Subgrant Amendment #1 for the HIV Surveillance Grant, with the corresponding budget amendments; Notice of Grant Award for Comprehensive Tobacco Prevention Program, with the corresponding amendments; Subgrant Amendment #1 for the WIC Program; and the FY 10 Budget Amendments for the Tuberculosis Program, be approved as outlined with the Chairman authorized to execute on behalf of the Board where applicable.

Motion carried unanimously.

REGIONAL EMERGENCY MEDICAL SERVICES AUTHORITY

A. Review and Acceptance of the Operational and Financial Report – June and July 2009

Mr. Patrick Smith, President, REMSA, advised that the Board members have been provided with a copy of the June 2009 Operations and Financial Report; that the emergency response time for life-threatening calls in June was 92% and 97% for non-life threatening calls, with an overall average response time of six minutes and four seconds (6:04); and an overall average travel time of four minutes and fifty-eight seconds (4:58). Mr. Smith advised that the monthly average bill for air ambulance service for June 2009 was \$6,543, with the year-to-date average of \$6,166; that the allowable annual average for air ambulance is \$6,341. Mr. Smith advised that the monthly average bill for ground ambulance service for June 2009 was \$888, with a year-to-date average of \$882; that the allowable annual average for ground ambulance is \$886.

Mr. Smith advised that the Board members were provided with a copy of the July 2009 Operations and Financial Report; that the emergency response time for life-threatening calls in July was 92% and 95% for non-life threatening calls, with an overall average response time of five minutes and fifty-six second (5:56); and an overall average travel time of four minutes and forty-six seconds (4:46). Mr. Smith advised that the monthly average bill for air ambulance service was \$8,323, which is the year-to-date average. Mr. Smith advised that the monthly average bill for ground ambulance service was \$944, which is the year-to-date average.

MOTION: Ms. Ratti moved, seconded by Mr. Gustin, that the REMSA Operations and Financial Reports for June and July 2009 be accepted as presented. Motion carried unanimously.

B. Update of REMSA's Community Activities Since July 2009

Mr. Smith advised that REMSA has begun preparations for the *Burning Man Festival*; that staff is in the process of "setting-up" the clinic as participants are on-site building the structures; therefore, REMSA is on-site in the event of injuries.

Mr. Smith advised that because *Burning Man* participants "are from all over the world" REMSA has been working in conjunction with the Health District Staff to establish a procedure for evaluating patients at the clinic at the *Burning Man Festival* for possible cases of H1N1, conducting respiratory screenings for those presenting with fever, respiratory coughs, etc. Mr. Smith advised that clinic staff have a specific "set of questions" for those patients; that there will then be precautionary procedures implemented (i.e., masks, isolation, etc. per CDC and Health District guidelines). Mr. Smith stated that with the large number of participants from "all over the world" an outbreak of H1N1 could occur.

Mr. Smith stated that REMSA is also working with the Health District regarding a possible H1N1 outbreak; that REMSA Dispatch has the surveillance capabilities, which will indicate any noticeable increases in respiratory complaints. Mr. Smith stated the surveillance system has the capability of monitoring 'where the calls are occurring, how often the calls are occurring, by time of day and day of week, etc.' Mr. Smith stated that should the data collected 'trigger' an alert the Health Department will be notified to allow a review of the data for possible trends indicating a possible outbreak. Mr. Smith stated that REMSA is working in conjunction with the Health Department regarding possible POD distribution of vaccine for H1N1 and seasonal flu; that REMSA and Care Flight employees, who will be in contact with patients, will be encourage to receive the vaccines.

Mr. Smith advised that REMSA will also be on-site at the State Fair and the *Rib Cook-Off*.

WASHOE COUNTY DISTRICT BOARD OF HEALTH MEETING

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In response to Mr. Gustin regarding the courses REMSA teaches outside of Washoe County, Mr. Smith advised that REMSA has the "preeminent paramedic education program for the west coast; that a recent graduating class had individuals from Las Vegas, California, the rural areas, REMSA personnel, etc." Mr. Smith advised that REMSA does provide public and professional education, which has been a mission of REMSA ~ that of assisting the "more rural areas with the capabilities for maintaining certification(s) for both professional and communities." Mr. Smith stated it is now well known that REMSA provides a variety of training throughout the west coast; that REMSA has recently been contracted by the military through the Department of Defense in Washington, DC to "provide all of the Advanced Life Support (ALS), Cardiac Life Support (CLS) and Trauma Life Support (TLS) training for all instructors in the military."

In response to Mr. Gustin regarding REMSA "going to outside areas (i.e., Nye County) to provide the training", Mr. Smith stated that REMSA has traveled to Nye County and other areas to provide training; that "sometimes the students come to REMSA."

In response to Chairman Humphreys regarding the increase in the Care Flight rate for the month of July, Mr. Smith stated that, as the Board is aware, the REMSA Governing Board establishes the rates; that for the past Fiscal Year the Governing Board "anticipated no increase in volume and only authorized the CPI (Consumer Price Index) for a rate increase. Mr. Smith stated that this resulted in a slight increase in both ground and air ambulance rates; that there "have been some of the more outer area transports, which are very mileage dependent." Mr. Smith stated that July's average "came in higher than anyone expected; that the rates will be monitored and the rates adjusted to the allowable average bill should it become necessary."

In response to Ms. Jung regarding Paramedics having the authority to pronounce a death, Mr. Smith advised that REMSA units work in conjunction with the area hospitals; that should Paramedics attempt a resuscitation on a patient resuscitation efforts have to be continued until such time as a doctor indicates resuscitation efforts can be halted, which can be achieved through radio contact. Mr. Smith stated that should Paramedics arrive on-scene and "it is an obvious death Paramedics can 'call-it' and turn it over to the police department."

REVIEW – ACCEPTANCE – MONTHLY PUBLIC HEALTH FUND REVENUE & EXPENDITURE – JULY 2009

Ms. Eileen Coulombe, Administrative Health Services officer, advised that the Board members have been provided with a copy of the Health Fund Revenue and Expenditure Report for the month

of July 2009. Ms. Coulombe reviewed the Report in detail, as this is the beginning of the new Fiscal Year; that "any time there is a noteworthy variance Staff will bring it to the Board's attention."

Mr. Gustin stated that he noted "56% of the equipment non-capital has been expended; that he would question if that is usual for this time of the year."

In response to Mr. Gustin, Ms. Coulombe advised that she will review this and report back to the Board next month."

MOTION: Mr. Gustin moved, seconded by Ms. Jung, that the District Health Department's Revenue and Expenditure Report for July 2009 be accepted as presented.

Motion carried unanimously.

FY 10 ADOPTED BUDGET – PROJECT ACCOUNTING SHEETS

Ms. Coulombe advised that the Board members have been provided with a copy of the "*Washoe County Health District Fiscal Year 2010 Programs*" project accounting sheets (a copy of which was placed on file). Ms. Coulombe advised that Tab 8 of the Health District's Budget Book was the "appropriations of the different programs by cost centers (local dollars) and by the internal order (grants)." Ms. Coulombe stated that, in the future, rather than delineating by cost centers (local dollars) and grant funding, Staff will present the Budget "by program."

Ms. Coulombe reviewed the "*Washoe County Health District Fiscal Year 2010 Programs*", advising that the document delineates the various programs in the "adopted financials rolled-up" indicating "what is being proposed (requested), and where the Health Department ended-up." Ms. Coulombe stated that the last line on the Revenue and Expense Report indicates the General Fund Tax Transfer to the District; that the last line of each program accounting sheet indicates the amount of the General Fund Tax Transfer for that individual program. Ms. Coulombe reviewed Air Quality Management's sheet, advising that it delineates the internal order and grants, and with grants "revenues have to equal expenditures." Ms. Coulombe stated that she would request the Board members retain this document for their budget books (Tab 8); that next month she will present the "per capita cost sheets" for the various programs. Ms. Coulombe stated that she will present both the proposed per capita project account sheet presented at the Board's budget meeting and the current per capita sheet, after approval of the budget at the Strategic Retreat.

In response to Mr. Gustin regarding the disposition of the air quality management fines levied by the Board of Health, Ms. Coulombe advised that the fines are accepted by the District Health Department but deposited into the School District's account.

Dr. Anderson advised that recently Mr. George Ochs, formerly of the Washoe County School District presented a plaque to the Board in recognition of the support of the Western Nevada Regional Science and Engineering Fair; that it was monies collected through the payment of fines that was utilized to support that Fair.

The Board thanked Ms. Coulombe for the update.

FY 10 ORGANIZATIONAL CHARTS – APRIL 9, 2009 AND JULY 1, 2009

Ms. Coulombe advised that the Board members have been provided with a copy of the Health District's FY 10 Organizational Charts for both April 9, 2009, which were presented during the annual budget meeting and as of August 27, 2009 (copies of which were placed on file), to provide a comparison. Ms. Coulombe advised that usually the Organizational Chart for the new Fiscal Year would be dated July 1st; however, as there have continued to be changes in the organization Staff provided the most current Chart. Ms. Coulombe reviewed the Organizational Chart, advising that the Project Accounting sheets can be utilized to indicate the budget appropriations for the positions, including those positions which are categorized as "delimited."

Ms. Coulombe advised that all of the Health District's vacant positions, which were presented through the County's requisitioning process through Human Resources, Finance and the vacancy review have all been approved. Ms. Coulombe advised that Staff will begin the recruitment process for these approved positions.

Ms. Coulombe advised that there was an anticipated Storekeeper vacancy; that the Health Department did accept "a bump back" position, which filled that Storekeeper position; however, there has been a promotion within the Division; therefore, there will again be a vacant Storekeeper position in Administration. Ms. Coulombe stated that the Health Department must comply with the "Return on Investment (ROI) with the County;" that the incentive separations, to achieve the necessary reductions, included the PERS buyout, which is a substantial amount. Ms. Coulombe advised that vacancies from incentives "may not be a direct position for position" exchange. Ms. Coulombe advised that ROI can be met when a successful internal candidate is appointed to a new position, the position that individual vacated will become the vacant position for ROI. Ms.

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Coulombe advised that, previously vacancy savings, through a position being held vacant, may have been available for divisional leave; however, those funds will not be available; "ROI will be achieved at a fund level."

Ms. Coulombe briefly reviewed the positions within each Division that are being recruited, delimited, or being held vacant. Ms. Coulombe advised that the Health Educator position within the Epidemiology and Public Health Preparedness Division has given notice and this position will become vacant within two (2) weeks; that Staff will be submitting a request to recruit for that position.

Chairman Humphreys stated that the Board is aware there has been a great amount of change within the Division; that he appreciates the update.

UPDATE – REPORT – ILLEGAL FOOD VENDORS - POSSIBLE DIRECTION TO STAFF

Chairman Humphreys advised that the update on illegal food vendors has been continued to the Board's September 24, 2009 meeting.

UPDATE – OLD WASHOE HOME OWNERS ASSOCIATION – SOLID WASTE COMPLAINT – POSSIBLE DIRECTION TO STAFF

Chairman Humphreys stated that by mutual agreement with the Old Washoe Home Owners Association and Staff, the solid waste complaint review will be continued to the Board's September 24, 2009 meeting.

DISCUSSION – POSSIBLE DATES – 2009 STRATEGIC PLANNING SESSION – POSSIBLE DIRECTION TO STAFF

Chairman Humphreys advised that he would request the Board members review their calendars regarding the availability of Thursday, October 8, 2009 as the date for the Board's 2009 Strategic Planning meeting. In response to Mr. Gustin regarding the time for the Strategic Planning Session, Chairman Humphreys advised that the start time is usually 8:30 or 9:00a.m.; that usually the meeting concludes at approximately 2:00p.m., with lunch being served.

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Chairman Humphreys requested Mrs. Smith contact Dr. Furman and Dr. Khan to determine if either or both are available on October 8, 2009.

Ms. Coulombe advised that, as the Strategic Planning Retreats have been in the month of October for the past number of years, when Staff prepares the calendar of monthly meetings for 2010, there will be a date scheduled in October for the annual Strategic Planning Session.

**MOTION: Ms. Jung moved, seconded by Mr. Smith, that the Board of Health's 2009 Strategic Planning Session be tentatively scheduled for Thursday, October 8, 2009.
Motion carried unanimously.**

PRESENTATION – DATES – NATIONAL ASSOCIATION CONFERENCES FOR 2010

Dr. Anderson advised that the Board members have been provided with a list of the dates and locations for the various national association conferences for 2010, which are public health specific. Dr. Anderson advised that the NALBOH (National Association of Local Boards of Health) 2010 annual conference, which is a budgeted item for a Board of Health member to attend, is scheduled for August 5-7, 2010 in Omaha, Nebraska.

UPDATE – NATIONAL ASSOCIATION OF LOCAL BOARDS OF HEALTH (NALBOH) ANNUAL MEETING – JULY 1 – 3, 2009

Chairman Humphreys stated that, at the request of Ms. Jung, the update on her attendance at the National Association of Local Boards of Health (NALBOH) annual conference in Philadelphia, Pennsylvania from July 1 – 3, 2009, will be continued to the Board's September 24, 2009 meeting.

STAFF REPORTS AND PROGRAM UPDATES

A. Director – Epidemiology and Public Health Preparedness

Dr. Randall Todd, Director, Epidemiology and Public Health Preparedness, presented his monthly Division Director's Report, a copy of which was placed on file for the record.

Dr. Todd advised that in his Report he indicated Staff had applied for a Public Health Emergency Response (PHER) Grant to support anticipated costs associated with possible mass-dispensing for H1N1. Dr. Todd stated that Staff had "very little time in which prepare the grant application"; however, it was submitted on time and Staff has been "unofficially notified" it will receive approximately \$635,000 in PHER funding. Dr. Todd stated that the funding will assist in the purchase of equipment and supplies required in the event it becomes necessary to conduct mass-dispensing for H1N1 vaccine.

Dr. Todd stated that initially the Centers for Disease Control (CDC) and Prevention indicated it would begin shipping H1N1 vaccine "as early as the third week in September"; however, CDC is now reporting there will be delays in shipping the vaccine. Dr. Todd stated that indications are it will be mid-October prior to any shipments being received; that further, it is anticipated there will be smaller quantities of the vaccine received than was initially reported. Dr. Todd stated that the Health District's planning for Washoe County was "for the uncertainty of vaccine being available"; therefore, Staff will adjust "to that uncertainty" prior to the planning for any "mass dispensing."

Dr. Anderson stated that she recently participated in telephone conference calls with Dr. Tracey Green, State Health Officer; Mr. Richard Whitley, State Health Administrator and Dr. Larry Sands, Health Officer, Southern Nevada Health District to discuss the distribution of the grant funding for H1N1. Dr. Anderson stated that the proposed awards have to be forwarded to CDC for final approval. Dr. Anderson stated that the grant request was "severity-based", whereby Staff had to indicate whether Washoe County would experience "mild, moderate or severe" cases of H1N1; that Washoe County submitted its request based upon a "moderate" number of cases. Dr. Anderson advised that the Nevada State Health Division "was very pleased with that format and chose to utilize the 'severity-based' format for the State's entire submission." Dr. Anderson stated that Staff received "a considerable amount of praise for this type of approach"; that this format "was responsible for the Health District receiving an award that coincided with the request for moderate-severity scenarios."

In response to Ms. Jung regarding concerns specific to "who will receive the H1N1" and having enough individuals trained to administer immunizations, Dr. Todd stated the concerns are legitimate, as the Health Department "does not have enough Staff to vaccinate 80% (severe scenario – 122,000 individuals) of the age-defined targeted population." Dr. Todd stated that to immunize 122,000 people would require approximately 400 individuals to staff the PODs. Dr. Todd stated that Staff requested funding for a moderate scenario, which would be approximately 50% of the age-defined targeted population and would require a lesser number of people to staff. Dr. Todd stated that approximately 50% of the grant award is for "staff acquisition", which could include per diems, temporary employees, etc., who could be recruited to administer immunizations. Dr. Todd stated that currently there are "no signed contracts" for per diems or temporary employees; that

volunteers is a resource Staff "will actively pursue." Dr. Todd stated that he is aware Board members have been contacted regarding "specific concerns about the Medical Reserve Corp (MRC)"; that the County's Volunteer Task Force "has made some significant progress." Dr. Todd stated that there currently is "an approved agreement and Waiver of Liability form, which is much improved from the previous version." Dr. Todd stated that there "are remaining concerns some of the (MRC) physicians have regarding the revised document"; that a number of those concerns are "addressable" and should be resolved when the physicians understand the County's position is these physicians "are covered to the full extent of the protections provided by *Nevada Revised Statutes* (NRS) 41 and the Federal Volunteer Protection Act of 1997." In response to Ms. Jung regarding the parameters of the Federal Volunteer Protection Act of 1997, Dr. Todd advised that Federal Volunteer Protection Act is "for anything; that there are additional protections, which become effective with declarations; however, the Volunteer Protection Act is always in effect." Dr. Todd advised that the VPA "is very comprehensive"; that he has been conferring with the District Attorney's Office to ensure he fully comprehends the Volunteer Protection Act; that the recommendation was to provide a copy of the Volunteer Protection Act to anyone who has questions regarding legal protection of those who volunteer. Dr. Todd stated that the efforts of the County's Volunteer Task Force "has been tremendously successful"; that Staff will be utilizing these new documents. Dr. Todd stated that currently there are "just more than 100 volunteers in the Medical Reserve Corps (MRC)". Dr. Todd stated that the Health Department has utilized the services of the Rotary Club volunteers, students from the Orvis School of Nursing and staff from the area hospitals and "will continue to do so"; however, this has been for the one (1) day POD event for seasonal flu. Dr. Todd stated that to immunize 80% of the age-targeted population would require operating PODs six (6) hours per day for fifteen (15) days; that "there would probably be a week off" followed by another fifteen (15) six (6) hour days for providing the second dose of the H1N1. Dr. Todd stated "that is a prolonged deployment"; that utilizing the services of "all the volunteers combined" would not be adequate; that the PHER grant funding will allow for the hiring of per diems and temporary personnel. Dr. Todd stated that "there may be an issue of the availability" of per diem and temporary personnel as all entities "will be doing the same thing." Dr. Todd stated that when the District has confirmation regarding the PHER funding, Staff will begin initiating contacts with those organizations, which could possibly "supply personnel that would be necessary."

In response to Mr. Smith regarding scheduling a POD when the H1N1 vaccine is received, Dr. Todd advised that the targeted populations for receiving the vaccine are "those defined by their age; defined by their occupation; and those who are risk-defined (i.e., pregnant women, people with chronic underlying medical conditions, etc.)" Dr. Todd stated that it will "be easy to mass dispense to those who are age or occupationally defined, as a matter of checking IDs to ensure they are within that group." Dr. Todd stated that Staff estimated approximately 120,000 individuals "within the worst-case scenario for age-defined categories who may request the vaccine, with approximately 75-80,000 within a moderate scenario." Dr. Todd stated that in a regular seasonal flu POD "400 people per hour per lane" are immunized; however, it would not be possible to

conduct a mass-dispensing site "where it is all about speed", as it would not provide adequate time "to assess a chronic underlying medical condition or determine pregnancy." Dr. Todd stated that Staff is planning to encourage those with underlying medical conditions and pregnant women to obtain the immunizations from "their private health care provider." Dr. Todd stated that "the assumption is 75%" of the individuals encouraged to utilize their private health care provider will be able to obtain the vaccine from their individual private health care provider. Dr. Todd stated that Staff has requested funding for additional temporary staff "beyond what would be necessary for PODs" for the remaining 25% of the target population, who may not have a private medical care provider or the private medical care provider doesn't administer the immunization, to establish a "task force or clinic similar to the HAWC Clinic ~ a strike team of clinicians" to administer the immunizations. Dr. Todd stated that in conferring with Ms. Brown, Director, Community and Clinical Health Services, it is the consensus of Staff that this type of clinic strike team would have the capability of immunizing approximately 100 people per day. Dr. Todd stated that, while this would be a much slower process the intent is to have these individuals receive the immunizations from their individual health care provider.

Mr. Smith stated that "this is assuming the Health District receives enough vaccine."

Dr. Todd stated that Staff will not be scheduling PODs until such time "as there is enough vaccine on-hand to make it appropriate to do so." Dr. Todd stated a possibility is that the vaccine will be in "such short supply the only people receiving the vaccine will be defined by risk, which would result in a 'purely' clinical operation and PODs would be unnecessary."

The Board thanked Dr. Todd for the update.

B. Director – Community and Clinical Health Services

Ms. Mary-Ann Brown, Director, Community and Clinical Health Services, presented her monthly Division Director's Report, a copy of which was placed on file for the record.

Ms. Brown advised thanked the Board for its support of the Obesity Forum, being held on Thursday, September 10, 2009, at the Reno/Sparks Boys and Girls Club; that Mr. Smith has volunteered to 'represent the Board of Health and Dr. Furman has indicated he, too, will be attending. Ms. Brown stated that Staff has received a tremendous amount of interest in the Forum; that Staff anticipates "a broad level of audience participation." Ms. Brown stated that Staff has been advised that Dr. Tracey Green, the new State Health Officer and Ms. Katy Simon, Washoe

County Manager will be in attendance. Ms. Brown stated that Staff "is looking forward to releasing the data and creating momentum in the community to address a critical public health issue."

In response to Chairman Humphreys regarding obesity among school-age children, Dr. Anderson advised that obesity among school age children is currently considered an epidemic. Ms. Brown advised that it was difficult obtaining passage of the legislation requiring "the gathering of this data; however, it has produced a wealth of information and direction on how to address this issue in the community." Ms. Brown stated that due to these efforts a number of rural counties will begin gathering Body Mass Index (BMI) data to investigate the scope of the problem in the rural areas. Ms. Brown advised that the intent of the forum is to present an overview of what is occurring in the community and discuss possible methods for addressing this issue.

Dr. Anderson advised that a number of years ago Dr. Furman was involved in an effort to address the food products sold in school vending machines; that he participated on a task force to discuss replacing the high calorie, high sugared products with more nutritional food and beverage choices.

Ms. Brown advised that the Board members have been provided with a flyer for the event, which lists the topics that will be discussed.

Ms. Ratti stated she appreciates that the "food insufficiency and its role in obesity" will be discussed; that studies have documented that low income families have a more difficult time maintaining a healthy weight due to the quality of food that is available to them."

The Board thanked Ms. Brown for the update.

C. Director – Environmental Health Services

Mr. Bob Sack, Director, Environmental Health Services, presented his monthly Division Director's Report, a copy of which was placed on file for the record.

Mr. Sack stated that Staff will be partnering with the Boys and Girls Club "Day for Kids" event conducting a hand washing competition in recognition of September as "Clean Hands Month", on Saturday, September 12, 2009 at Ardmore Park in Sparks from 11:00am – 2:00pm. Mr. Sack advised that Staff would invite any of the Board members to participate in this event; that the

Health Department will be "highlighting hand washing for disease prevention." In response to Chairman Humphreys regarding the contest "being speed or quality", Mr. Sack stated that the results will be based on quality.

In response to Ms. Jung regarding Staff contacting the Latino Lions Club to discuss the illegal food vendors, Mr. Sack advised that Staff has left a message expressing a desire to discuss the issue of illegal food vendors; however, no one has returned Staff's call.

The Board thanked Mr. Sack for the update.

D. Director – Air Quality Management

Mr. Andrew Goodrich, Director, Air Quality Management, presented his monthly Division Director's Report, a copy of which was placed on file.

Mr. Goodrich advised that at last month's meeting the Board reviewed an Air Quality Management case specific to the mastication process utilized by The Nevada Fire Safe Council; that the Board requested a follow-up regarding a draft proposal from The Nevada Fire Safe Council specific to dust control and notification delineating information as to project location, acreage to be masticated, fuel type, etc.; however, Staff has not yet received this information from The Nevada Fire Safe Council. Mr. Goodrich advised Staff will present that information to the Board when it is received.

The Board thanked Mr. Goodrich for the update.

E. Administrative Health Services Officer

There was no monthly Administrative Health Services Officer Report.

F. District Health Officer

Dr. Mary Anderson, District Health Officer, presented her monthly Health Officer's Report, a copy of which was placed on file.

Dr. Anderson presented 'hand-outs' she obtained at the National Association of County and City Health Officials (NACCHO) Conference, including a "*National Profile of Local Health Departments*" and one from the Association of State and Territorial Health Officers (ASTHO). Dr. Anderson advised that the "*National Profile of Local Health Departments*" "highlights various local jurisdictions and how they responded to specific emergencies, everything from foodborne illness outbreaks to gigantic snow storms, loss of power, floods, etc." Dr. Anderson stated that "should anyone wish to read one of the articles in the books they are free to borrow the book or she will obtain a copy through NACCHO or ASTHO upon request."

In response to Ms. Jung regarding "how Washoe County did over all as a local district, Dr. Anderson advised that those States with less than five (5) health districts were not included; that Nevada has less than five (5) health districts. Dr. Anderson advised that the document is a profile of the characteristics of the different health departments, with the focus being specific to "how those districts are funded, how the Boards are elected, the priorities of the particular health departments are by state." Dr. Anderson advised that it was not a ranking "on how well a health department did; that it was a characterization profile of local health districts."

The Board thanked Dr. Anderson for the update.

BOARD COMMENT

Chairman Humphreys requested a "total report" on H1N1, including the availability of vaccine, the costs associated with the vaccine and immunizations, and who will be administering the immunizations. Chairman Humphreys requested Staff's report include the "public information aspects" on educating the public as to "the H1N1 requiring two (2) immunizations, which will be in addition to the one (1) immunization for seasonal flu."

Ms. Jung stated that she would request the report include an update regarding volunteer and temporary staff recruitment for possible H1N1 PODs, including "what is available and what are the 'Best Practices'. Ms. Jung stated that she has been advised "the University will be responsible for its own immunizations"; that she would question "how the rural areas will manage dispensing and

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administering the vaccines, as those areas would affect Washoe County." Ms. Jung stated that she would request Staff contact her should the assistance of the Nevada Association of Counties (NACO) be necessary.

Ms. Jung stated that she would request a presentation of the American Red Cross' "Scrubby Bear Program" to the Board of Health at next month's meeting; that this Program is being presented in the School District as a method for teaching children proper hand washing techniques.

There being no further business to come before the Board, the meeting was adjourned at 2:20pm.



MARY A. ANDERSON, MD, MPH, FACPM, DISTRICT HEALTH OFFICER
SECRETARY



JANET SMITH
RECORDER

WASHOE COUNTY DISTRICT BOARD OF HEALTH
ATTENDANCE CARD

PLEASE PRINT

DATE:

1/28/09

AGENDA ITEM:

3

NAME:

Bill Fine

ADDRESS:

965 Joshua, Reno

I REPRESENT:

Impact

I AM IN ATTENDANCE CONCERNING:

swine flu plan

DO YOU WISH TO MAKE A STATEMENT:

YES



NO

_____ IN FAVOR

_____ IN OPPOSITION

NOTE: GENERAL POLICIES FOR ADDRESSING THE BOARD:

1. PUBLIC COMMENT (5 MINUTE TIME LIMIT PER PERSON)



DISTRICT HEALTH DEPARTMENT

August 12, 2009

TO: District Board of Health Members

FROM: Janet Smith, Recording Secretary

At the request of Mr. Gustin, the tape of the June 25, 2009 meeting was reviewed. During the review of the Interlocal Agreements, Mr. Gustin had questioned if the \$12,000 budgeted for health care services, through the Agreement with Washoe County's Department of Social Services; and the \$500 for consultative and clinical services, through the Agreement with Washoe County Juvenile Services "was adequate or if these amounts would have to be supplemented and how much these amounts would cover, are anticipated to cover or if it doesn't cover it at all."

Mr. Gustin further indicated he was satisfied with Staff's answer to his question.

Respectfully,

A handwritten signature in cursive script, appearing to read "Janet".

Janet

DBOH AGENDA ITEM # 5.

1001 EAST NINTH STREET / P.O. BOX 11130, RENO, NEVADA 89520 (775) 328-2400 FAX (775) 328-2279

www.washoecounty.us/health

WASHOE COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER
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WASHOE COUNTY HEALTH DISTRICT

AIR QUALITY MANAGEMENT DIVISION



Public Health
Prevent. Promote. Protect.

DATE: August 27, 2009

TO: District Board of Health

FROM: Andrew Goodrich, Director, Air Quality Management

SUBJECT: Meritage Homes of Nevada – Case No. 1042
Unappealed Citation No. 4697
Agenda Item: **7.A.1.a.**

Recommendation

Air Quality Management Division Staff recommends that Citation No. 4697 be upheld and a fine of \$1,000 be levied against Meritage Homes of Nevada for failure to control dust on a job site. The Citation was issued for a violation of section 040.030 of the District Board of Health Regulations Governing Air Quality. This is a negotiated settlement.

Recommended Fine: \$1,250.00

Negotiated Fine: \$1,000.00

Background

On May 19, 2009, Air Quality Specialist II, Suzanne Dugger observed fugitive dust coming from the Breckenridge job site. A citizen complaint had been phoned in for fugitive dust from the Breckenridge job site that day. Prior to arrival on the site, AQ Specialist Dugger phoned Manny Silva of Meritage Homes of Nevada, the responsible party for the Breckenridge site. Ms. Dugger informed Mr. Silva of the dust complaint and requested a call back. Mr. Silva failed to return a phone call to Ms. Dugger. Upon arrival on site, fugitive dust was observed coming from stock piles and open areas. No site activity was observed and no water trucks were on site. One water truck arrived approximately 25 minutes after Ms. Dugger arrival. Shortly there after a second water truck arrived. Only one water truck remained on site after the second water truck arrived. Ms. Dugger phoned Mr. Silva again and left him a message informing him of the observed violation and the need for more water trucks to control the fugitive dust as required by Dust Control Permit No. D08002. Based on the observation of fugitive dust, Notice of Violation Citation No. 4697 was issued to Meritage Homes of Nevada. An appeal form was given with NOV Citation No. 4697.

On July 7, 2009, Senior Air Quality Specialist, Dennis Cerfoglio and AQ Specialist, Dugger met with Mr. Silva for a negotiated settlement meeting. After consideration of all the facts of the case, Mr. Silva agreed to a fine of \$1,000.00. A Memorandum of Understanding was signed by all parties.

Alternatives

1. The District Board of Health may determine that no violation of the Regulations has taken place and dismiss NOV Citation No. 4697.
2. The Board may determine to uphold NOV Citation No. 4697 but levy any fine in the range of \$600 to \$1,250.00.

In the event the Board determines to increase the proposed penalty, the matter should be continued so that Meritage Homes of Nevada may be properly noticed.



Andrew Goodrich, REM
Director

AG/DC: ma



WASHOE COUNTY DISTRICT HEALTH DEPARTMENT
 AIR QUALITY MANAGEMENT DIVISION
 401 RYLAND STREET, SUITE 331 • P.O. BOX 11130 • RENO, NV 89520
 (775) 784-7200



NOTICE OF VIOLATION C19MAY09010

NOV 4697

DATE ISSUED: 5-19-09

ISSUED TO: MERITAGE HOMES OF NV. PHONE #: 925-288-0088

MAILING ADDRESS: 1900 SUTER STREET CITY/ST: CONCORD, CA ZIP: 94520
 # 500

NAME/OPERATOR: MANNY SILVA, Director of Operations PHONE #: 925-288-0088

DRIVER LICENSE #/SSN _____

YOU ARE HEREBY OFFICIALLY NOTIFIED THAT ON 5-19-09 (DATE) AT 2:00 P.M. (TIME), YOU ARE IN VIOLATION OF THE FOLLOWING SECTION(S) OF THE WASHOE COUNTY DISTRICT BOARD OF HEALTH REGULATIONS GOVERNING AIR QUALITY MANAGEMENT:

- | | |
|---|---|
| <input checked="" type="checkbox"/> MINOR VIOLATION OF SECTION: | <input type="checkbox"/> MAJOR VIOLATION OF SECTION: |
| <input checked="" type="checkbox"/> 040.030 DUST CONTROL | <input type="checkbox"/> 030.000 OPERATING W/O PERMIT |
| <input type="checkbox"/> 040.055 ODOR/NUISANCE | <input type="checkbox"/> 030.2175 VIOLATION OF PERMIT CONDITION |
| <input type="checkbox"/> 040.200 DIESEL IDLING | <input type="checkbox"/> 030.105 ASBESTOS/NESHAP |
| <input type="checkbox"/> OTHER _____ | <input type="checkbox"/> OTHER _____ |

VIOLATION DESCRIPTION: 040.030 SEC. C (1) ALLOWING FUGITIVE DUST.
NOT HAVING SUFFICIENT WATER TRUCKS ON SITE PER PERMIT
REQUIREMENTS

LOCATION OF VIOLATION: BRECKENRIDGE JOB SITE EAGLECREST DRIVE, RENO

POINT OF OBSERVATION: STOCK PILES & OPEN AREAS

Weather: PTLY CLOUDY 20-30 mph w 31 mph HIGH GUST Wind Direction From: N E S (W)

Emissions Observed: FUGITIVE DUST
 (If Visual Emissions Performed - See attached Plume Evaluation Record)

WARNING ONLY: Effective _____ a.m./p.m. _____ (date) you are hereby ordered to abate the above violation within _____ hours/days. I hereby acknowledge receipt of this warning on the date indicated.

Signature _____

CITATION: You are hereby notified that effective on 5-19-09 (date) you are in violation of the section(s) cited above. You are hereby ordered to abate the above violation within IMMEDIATELY hours/days. You are further advised that within ten days of the date of this violation you may submit a written notice of appeal to the Chairman, Hearing Board, P.O. Box 11130, Reno, Nevada 89520. Failure to submit a notice of appeal in the time specified will result in submission of this violation to the District Board of Health, together with a request that an administrative fine be levied against you. If you do not wish to file an appeal the appropriate fine may be paid at the District Health Department.

SIGNING THIS FORM IS NOT AN ADMISSION OF GUILT

Signature: NO PERSONNEL ON SITE TO SIGN Date: 5-19-09

Issued by: Shanne Dugger Title: AQSTI

WASHOE DOES NOT DISCRIMINATE ON THE BASIS OF SEX, RACE, COLOR, AGE, RELIGION, DISABILITY OR NATIONAL ORIGIN IN THE ACTIVITIES AND OR SERVICES WHICH IT PROVIDES. IF YOU HAVE ANY QUESTIONS, PLEASE CALL WASHOE COUNTY HUMAN RESOURCES - 328-2080; TDD NUMBER 328-3685.



DISTRICT HEALTH DEPARTMENT

AIR QUALITY MANAGEMENT DIVISION

MEMORANDUM OF UNDERSTANDING

WASHOE COUNTY DISTRICT HEALTH DEPARTMENT AIR QUALITY MANAGEMENT DIVISION

Date: 7-7-09

Company Name: Heritage Homes of Nevada
 Address: 1800 Sutter Street #500
 Notice of Violation # 4697 Case # 1042

The staff of the Air Quality Management Division of the Washoe County District Health Department issued the above referenced citation for the violation of Regulation 040.030 failure to control dust on a site plus no water trucks while on site

A settlement of this matter has been negotiated between the undersigned parties resulting in a penalty amount of \$ 1,000. This settlement will be submitted to the District Board of Health for review at the regularly scheduled meeting on August 27, 2009.

[Signature]
 Signature of Company Representative

[Signature: Dennis A. Cerfoglio]
 Signature of District Representative

Manny Silje
 Print Name

DENNIS A. CERFOGLIO
 Print Name

Director of Operations
 Title

Senior Air Quality Spec.
 Title

 Witness

[Signature: Shanne Dugger]
 Witness

 Witness

SHANNE DUGGER
 Witness



DISTRICT HEALTH DEPARTMENT

AIR QUALITY MANAGEMENT DIVISION



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Conditional Dust Control Permit Approval #: D08002

Name of Development: Breckenridge (31 Acres Disturbed)

Specific Location: Eaglecrest & Grand Summit Drive

Property Holder: Meritage Homes of Nevada Expiration Date: April 9, 2010

The following requirements are special conditions of approval for this dust control permit in addition to the standard conditions noted in the permit application. The special conditions noted below must be followed in all activities covered in this permit application.

1. **Two (2) water trucks** will be assigned and available for operation 24 HOURS A DAY, 7 DAYS A WEEK for the purpose of water application for control of fugitive dust. If **two water trucks** cannot control fugitive dust emissions from equipment operations and/or gusty wind conditions, the applicant shall immediately provide additional water trucks. CESSATION OF OPERATIONS IS REQUIRED IF DUST CANNOT BE CONTROLLED DUE TO EQUIPMENT OPERATIONS AND/OR GUSTY WIND CONDITIONS. IF CESSATION OF OPERATIONS IS USED AS A DUST CONTROL MEASURE, CONTINUED WATERING OF THE PROJECT IS REQUIRED.
2. Dust emissions generated on any entrance or exit haul roads due to equipment operations or gusty wind conditions must be controlled 24 hours a day, 7 days a week, by the use of water application or an environmentally safe dust palliative (District Regulation 040.030, Section C. 2. a. and b.) Any palliative used must comply with state and local regulations and not provide a noxious odor or contaminate ground water.
3. All projects importing or exporting dirt, rock or other fill materials must comply with the work practice standards in District Regulation 040.030, Section C. 4., including load tarping, watering or Freeboard. Any soil tracked onto adjoining paved roadways will be promptly removed by wet broom or washing. Regular vacuum or wet sweeping will be performed at least daily, and more often if necessary or if ordered by the Control Officer due to a violation. Any materials tracked out or spilled which cause visible fugitive dust for a period of five (5) minutes in any hour period shall be cleaned up immediately.
4. Any soil or fill storage piles operated or maintained as a part of this construction lot will be covered or wetted down sufficiently to prevent wind blown dust. Dust emissions from screening operations will be controlled by the use of a water truck or other control measure that prevents fugitive dust.


Conditional Dust Control Permit # D08002
Breckenridge * Eaglecrest & Grand Summit Drive

5. The applicant shall implement additional dust control measures, such as extra water trucks, water cannons, re-vegetation, environmentally safe dust palliatives (which comply with all applicable regulations and do not emit a noxious odor and do not contaminate ground water), wind fencing, and/or cessation of operations should these measures fail to control fugitive dust emissions from this project.
6. Once final grade has been completed, and if no structures are being constructed, the owner/developer shall be required to establish a long-term stable surface. This shall include re-vegetation or covering the disturbed soil with rock or crushed asphalt products within 30 days of completion of final grade. The use of an approved palliative is an option, but must be approved by the Air Quality Management Division (AQMD) prior to application.
7. The applicant shall provide a Material Safety Data Sheet (MSDS) and dilution ratio to AQMD staff for any dust palliative selected for use as a dust control measure at this site.
8. A copy of this dust control permit shall be maintained at the construction project site and available to any sub-contractor or Air Quality Management Division inspector to review upon request.
9. ANY CHANGES MADE TO THE PROPOSED OPERATIONS, SCOPE OF WORK OR SURFACE DISTURBANCES UNDER THIS DUST CONTROL PERMIT shall be submitted to the District Health Department in writing and must receive approval from the Control Officer prior to implementation.
10. The owner or the general contractor shall erect an informational sign at the main entrance to the project site. The sign shall be a minimum of 4 ft by 4 ft in size, and shall be in place prior to initiation of disturbance of the ground surface. The sign lettering shall be at least 4 inches high and shall be bold and easily readable by the public. The sign shall remain in place for the life of the project. The sign shall include the following information, also see attached example:
 - a) The name of the project.
 - b) A statement identifying the General Contractor.
 - c) A statement proclaiming that "All operators at this site are required to control dust emissions from their operations. The General Contractor is required to oversee and control project wide dust emissions."
 - d) A statement proclaiming that "For dust related problems coming from this site, or to make a dust complaint, call this phone number 24 hours per day, seven days per week: (775) 784-7200. A 24-hour phone number for both the Contractor/Developer and the Air Quality Management Division shall also be posted. The 24-hour phone number for complaints to the Air Quality Management Division is (775) 784-7200.

Conditional Dust Control Permit # D08002
Breckenridge * Eaglecrest & Grand Summit Drive

11. A log book of all dust control operations, containing all information as required by the Control Officer in the standard **"WASHOE COUNTY DUST CONTROL LOG"** must be maintained on a daily basis (copies of blank log sheets are available at the Air Quality Management Division office). Required information includes, but is not limited to, the number of **OPERATING** water trucks/pulls, the size of **OPERATING** water trucks/pulls (gallons capacity of each truck/pull), and the condition of the surface crust on disturbed areas. The operator shall record in the logbook all dust control efforts and the compliance level of the site with dust control requirements. The logbook shall be kept at the project site and made available to District representatives upon request.
12. Visible dust may not be emitted into the air from any operations or disturbed areas of this project for more than 5 minutes in any hour period (Regulation 040:030, Section C. 1). All disturbed areas must maintain a visible surface crust or other cover in compliance with Regulation 040.030, Section C.2.c. Compliance shall be determined using US Environmental Protection Agency Reference Method 22, with an observation period of not less than 5 minutes in any hour period. Copies of District Regulations, enforcement policies and USEPA Reference Testing Methods may be obtained by contacting the Air Quality Management Division at (775) 784-7200.
13. Failure to comply with all of the requirements of this Dust Control Permit shall be considered a citable violation of District Regulations and this dust control permit. Citations may be issued for each day of violation, in amounts up to \$10,000.00 per day as stated in District Regulations.
14. Any use of recycled wastewater from a public or private sewer treatment plant must take into account the protection of public health.

NOTE: All operators who clear more than one (1) acre of land also need an NPDES permit addressing water quality issues related to storm run-off from the Nevada Division of Environmental Protection. Contact the Bureau of Water Pollution Control, at (775) 687-9418 for further information.



Control Officer

October 10, 2008
Effective Date

April 9, 2010
Expiration Date

THIS IS NOT A GRADING PERMIT. THESE CONDITIONS ADDRESS DUST CONTROL ONCE THE GRADING PERMIT HAS BEEN OBTAINED. IF THE GRADING PERMIT IS DENIED THIS PERMIT IS VOID.



DISTRICT HEALTH DEPARTMENT

AIR QUALITY MANAGEMENT DIVISION



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DUST PERMIT CHANGE VERIFICATION

Meritage Homes of NV
Manny Silva
1800 Sutter Street, Suite #500
Concord, CA 94520

Permit No: **D08002**

Name of Project: **Breckenridge**

Location: **Eaglecrest Drive (corner of Grand Summit & Eaglecrest Drive)**

The Washoe County Health District, Air Quality Management Division (AQMD) has officially removed the General Contractor/Grading-Excavating Contractor on Dust Control Permit **D08002**. This means that **Meritage Homes of NV** is now responsible for all dust control activities on the site as stated in the permit.

According to our records, this Dust Control Permit will expire on **April 9, 2010**. If the project has not been completed, **Meritage Homes of NV** will be required to renew the Dust Control Permit for this site prior to the expiration date. This involves submitting a new Dust Control Plan application, as well as paying the applicable fees based on the portion of the site that has not yet been developed, or has not been re-vegetated and/or otherwise permanently stabilized to prevent the generation of fugitive dust. The Dust Control Plan application can be found on our web site at www.washoecounty.us/health.

Note that **Meritage Homes of NV** will be responsible for adequate dust controls on this site in compliance with the District Board of Health Regulations Governing Air Quality, Section 040.030.

Please contact the AQMD office at (775) 784-7200 if there are any questions on the dust control requirements for this site.

Thank you for your cooperation,

Mary Ames
Washoe County Health District
Air Quality Management Division

cc: Q & D Construction, Lance Semento

P.O. BOX 11130 Reno, NV 89520-0027 • 401 Ryland Street, Ste. 331 • (775) 784-7200 • FAX (775) 784-7225

www.washoecounty.us/health

Dust Control Permit - Change of Responsibility

WASHOE COUNTY HEALTH DISTRICT * AIR QUALITY MANAGEMENT DIVISION
401 Ryland Street, Suite 331, Reno NV 89502-0027 * (775) 784-7200 * Fax (775) 784-7225

To transfer, add or remove the Owner/Developer, Engineer/Consultant, General Contractor or the Grading/Excavating Contractor from the Washoe County Air Quality Management Dust Control Permit. This form must be submitted to the Air Quality Management Division, 10 working days before the change of information.

Dust Control Permit #: D08002 Name of Development: Breckenridge

Development Address: D Eaglecrest Dr Expiration Date of Permit: 4/9/10
& GRAND SIERRA

Company to be removed or replaced from Permit: Q&D Construction, Inc.

The following contact information is for the new (circle one):

Owner/Developer * Engineer/Consultant * General Contractor * Grading/Excavating Contractor

New Company Name: _____

Contact Person: _____ Title: _____

Phone number: _____ Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____

In requesting the company's name being removed from the Dust Control Permit for this Development, I certify that (circle):

- 1) All of our company's work is complete and all contractual obligations at this site are fulfilled and/or terminated.
- 2) All of our company's equipment has been removed from the site and will not return for later work.
- 3) Notification of completion and/or departure from the development is made to the persons or companies with whom we contracted.

Under penalty of perjury, to the best of my knowledge formed after a reasonable inquiry, the information supplied in this document is true and correct.

Lance Sementa
Signature

LANCE SEMENTA
Print or Type name

Q&D Construction, Inc.
Company Name

2/12/09

SR. V.P. ENVIR.
Date
Title

775-786-2677
Phone Number

DUST CONTROL PERMIT APPLICATION

WASHOE COUNTY HEALTH DISTRICT * AIR QUALITY MANAGEMENT DIVISION
401 Ryland Street, Suite 331, Reno NV 89502-0027 * (775) 784-7200 * Fax (775) 784-7225

FEE: \$117.00 per acre (Less than .5 acres round down; .5 and greater round up)

THE "APPLICANT" IS RESPONSIBLE FOR ALL DUST CONTROL 24 HOURS A DAY, SEVEN DAYS A WEEK, INCLUDING WEEKENDS AND HOLIDAYS, FROM COMMENCEMENT OF PROJECT TO COMPLETION.

DD8002

The Applicant must be the Property Owner/Developer, and signed by the Applicant or his Attorney in Fact. The application must be filled in completely or it will be returned for completion.

- 1. Name of Development: Breckenridge 3
- 2. Development Address: Zero ~~By~~ Eaglecrest Dr. (corner of Grand Summit & Eaglecrest Dr.)
- 3. Size of Project (disturbed acres): 31 (two (2) WATER TRUCKS)
- 4. Type of Project (choose one):
 Residential - Single Family Residential - Multi Family _____ Commercial with Residential _____
 Road Construction - New _____ Road Construction - Maintenance/Rehabilitation _____
 Commercial / Industrial _____ Municipal/Utilities _____
- 6. If renewing an existing permit, list permit number: A07048

NOTE - - The Dust Control Permit is valid for eighteen (18) months from the date of approval. If the project is not complete or has not commenced by the expiration date, the Applicant must submit a renewal application to the Air Quality Management Division. Failure to do so will result in the Permit expiring and could result in a citation.

- 7. APPLICANT -- Name and current Address of Property Owner/Developer:
 Owner/Developer: Meritage Homes of NV Contact: Manny Silva
 Address: 1800 Sutter Street, Suite #500
 City: Concord State: CA Zip: 94520
 Phone Number: 925-288-0088 Fax Number: 925-288-9930 Email: manny.silva@meritagehomes.com

- 8. Name and current Address of Project Engineer/Consultant:
 Engineer/Consultant: Summit Engineering Corp. Contact: Tom Hannum
 Address: 5405 Mae Anne Avenue
 City: Reno State: NV Zip: 89523
 Phone Number: (775) 747-8550 Fax Number: (775) 741-8559 Email: _____

- 9. Name and Address of General Contractor:
 Contractor: ~~Q+D Construction, Inc~~ Contact: 2/12/2009 Q+D Removed from permit
 Address: ~~1050 S. 21st Street~~ "see attached"
 City: ~~Sparks~~ State: NV Zip: 89431-5596
 Phone Number: ~~(775) 786-2677~~ Fax Number: ~~(775) 786-5136~~ Email: _____

- 10. Name and Address of Grading/Excavating Contractor:
 Contractor: ~~Q+D Construction, Inc~~ Contact: _____ Responsibility: Meritage Homes of NV
 Address: ~~1050 S. 21st Street~~
 City: ~~Sparks~~ State: NV Zip: 89431-5596
 Phone Number: ~~(775) 786-2677~~ Fax Number: ~~(775) 786-5136~~ Email: _____

11. Proposed Construction Dates - Per Phase (provide grading and phasing maps):

On-Site Grading/Excavation: Start: _____ Complete: Yes
Building Construction: Start: unknown Complete: unknown

12. Will fill material be required? Yes _____ yd³ _____; No

13. Will there be an excess of native material as a result of excavation? Yes yd³ 15K
No _____

14. Amount of Material to be excavated (yd³): 15K

15. Is there a soil analysis report available? Yes No _____

16. On-Site soil type: Structural

17. Method of dust control to be utilized (per phase): (attach a map showing dust control strategy-utilize scale with contours)

Water Truck(s) 2 (number of trucks)
Chemical Sealant @ end of project (type - attach MSDS Sheets)
Sprinklers/Water Cannons yes (locations)
Compaction 90% complete (percent)
Enclosure NO (fences, windbreaks)
Revegetation Yes (type - attach seeding schedule)
Will temporary irrigation be supplied? Yes No _____
Water Source: Metered
Speed Limits 25 Other _____

NOTE - - Permanent stabilization methods such as construction/landscaping, revegetation, chemical sealant/palliative, or other approved method(s) of dust suppression must occur "within 30 days of grading completion". Dust suppression must continue regardless of construction status.

18. Method to control mud and soil being tracked onto adjacent paved roadways: Street Sweeping

19. Frequency of daily street cleaning: Weekly

20. Describe the methods (fences, barriers, etc.) to prevent unauthorized traffic on the construction site(s):
Paved Roads / Fencing @ entrance

21. Persons to be contacted during non-working hours in case of dust problems:
Name & telephone #: Manny Silva - 925-383-2927 Email: manny.silva@meritagehomes.com
Name & telephone #: _____ Email: _____

22. The Applicant's (Owner/Developer) signature or that of his/her Attorney in fact on this application shall constitute agreement by the Applicant to accept responsibility for meeting the "Conditions of Plan" (attached):

[Signature]
Signature
Manny Silva
Print or type name
Meritage Homes
Company Name

9-30-08
Date
Director Land Development
Title
(925) 383-2929
Phone Number

WASHOE COUNTY AIR QUALITY MANAGEMENT DIVISION
401 Ryland Street, Suite 331, Reno, NV 89502-1643
Office (775) 784-7200 * Fax (775) 784-7225

CONSTRUCTION SITE INSPECTION FORM

Enforcement Officer: SUZANNE DIGGER Date/Time: 5-19-2009 11:30-

Permit #: DOB002 Responsible Party: MERITAGE HOMES OF NV.

Project Name: BRECKENRIDGE Location: EAGLE CREST DRIVE RENO

31 HIGH GUST

Weather: Clear Partly Cloudy Cloudy Recent Rain Temp: Wind/mph: 20-30 Direction: W

Site: Active Inactive Project Complete Workers Present: Yes No

Activities Occurring: None

Clearing/Grubbing Backfilling Abrasive Blasting Clearing Forms Crushing/Screening
 Cut & Fill Importing/Exporting Explosive Blasting General Construction Subgrade Prep
 Trenching Stockpiling Demolition (mech) Landscaping Paving
 BUILDING WALLS

EMISSIONS COMPLIANCE Yes No

Fugitive Dust Emissions: Yes No If yes, source: STOCK PILES & OPEN AREAS Plume Length: _____
Opacity: _____ %

Project Soils: Stable: Moist Gravel Palliative Crust Other: _____
 (Unstable) Dry Loose Powdery

Interior Roads: None (Stable) Paved Type II Moist Dust Suppressant
Unstable: Dry Loose Powdery

Track-out: Yes No Dust from vehicles: Yes No If yes, Interior Access

Water Source: Hydrant Stand Tank Reservoir None Observed Other: 1 H₂O TRUCK

Mitigation Equipment: Hose Pull(s) Truck(s) None Observed Other: 1 H₂O TRUCK

Mitigation Equipment Ratio: Adequate Inadequate

Track-out device present: Yes, functional Yes, not functional No, needed No, not needed

ADMINISTRATIVE COMPLIANCE Yes No

Acreage Permitted: 31 ACRES Project Size: Equal to Greater than

Staging/Parking area(s): N/A On-Site Off-Site, included in acreage Off-Site, not included in acreage

Stationary Source Permits: No Equipment Screen Crusher Batch Plant ATC#: _____

DCP Sign: Yes No DCP On-Site: Yes No Not Verified

Spoke with: MANY SILVA Title: _____ In person / phone

Actions Taken: None Verbal Warning

Notice of Violation - Warning: _____ Notice of Violation - Citation: _____

Deficiencies to be corrected: ① WATER TRUCK 25 MINUTES AFTER ARRIVAL. ACCORDING TO MANY SILVA ① WATER TRUCK WAS ON SITE WHEN I CALLED AND ANOTHER WAS FILLING UP. UPON MY ARRIVAL NO WATER TRUCKS WERE ON SITE. TOO MUCH OPEN AREA. NO PALLIATIVE REMAINS EFFECTIVE SINCE IT WAS FIRST APPLIED. ② WATER TRUCKS REQUIRED PER PERMIT



NUMBER: C19MAY09010

AIR QUALITY COMPLAINT/ACTION REQUEST

DATE: 5/19/2009 TIME: 2:25 PM TAKEN BY: MARY AMES

ROUTED TO: SUZANNE DUGGER

TYPE OF COMPLAINT: CITIZEN INVESTIGATOR OTHER

RENO SPARKS WASHOE COUNTY AREA 5

COMPLAINT:

DUST FROM CONSTRUCTION SITE - NO ACTIVITY

LOCATION OF COMPLAINT: GRAND SUMMIT & EAGLE CREST (INDIANHEAD & HOGADON)

RESPONSIBLE PARTY: MERITAGE HOMES OF NEVADA - MANNY SILVA
PHONE NUMBER: 925-288-0088

ADDRESS: 1800 SUTTER STREET, SUITE 500, CONCORD CA 94520

COMPLAINANT: RON JAHN PHONE NUMBER: 746-0223

ADDRESS: 1540 BUTTERFLY DRIVE

SPECIAL INSTRUCTIONS: CALL COMPLAINANT

INVESTIGATOR: SUZANNE DUGGER DATE: 5/19/2009 TIME: 2:30

VIOLATION: 040.030

ALLOWING FUGITIVE DUST. NOT HAVING SUFFICIENT WATER TRUCKS ON SITE PER PERMIT REQUIREMENTS. SEE NOV 4697 / CASE 1042

CASE CLOSED: DATE: 5/19/09 TIME: 2:30 INVESTIGATOR: SUZANNE DUGGER

VIEWED BY: DENNIS CERFOGLIO DATE: TIME:

VIOLATION: Minor Violation of Section 040.030
Fugitive Dust
Notice of Violation #4697

ISSUED TO: Meritage Nv. Inc.
1800 Sutter Street, Suite 500
Concord, California 94520

OPERATOR: Manny Silva

On May 19, 2009, Washoe County Air Quality Management Division (WCAQMD), Air Quality Specialist II (AQS) Suzanne Dugger observed fugitive dust coming from the Breckenridge job site. A citizen complaint had also been phoned in for fugitive dust from the Breckenridge job site. Prior to arrival on site AQS Dugger phoned Manny Silva of Meritage Homes of Nevada, responsible party for Breckenridge. AQS Dugger informed Mr. Silva of the dust problem and requested a call back after AQS Dugger arrived on site. Mr. Silva failed to return AQS Dugger's phone call. Upon arrival on site AQS Dugger observed fugitive dust from stock piles and open areas. No site activity was observed and no water trucks were on site. One water truck arrived approximately 25 minutes after AQS Dugger arrived on site. Shortly thereafter a second water truck arrived. Only one water truck remained on site after the second water truck arrived. AQS Dugger phoned Mr. Silva again and left him a message informing him of the observed violation and the need for more water trucks or to at least have the required number of water trucks per the requirements of Dust Control Permit #D08002. Based on the observation of fugitive dust, NOV #4697 was issued for violation of 040.030. C.1. An appeal form was given with NOV #4697.

Suzanne Dugger
Air Quality Specialist II
Air Quality Management Division
Washoe County District Health Department

RECOMMENDED FINE WORKSHEET

DATE: 5-19-2009

CASE#: 1042

COMPANY NAME: MERITAGE HOMES OF NEVADA

CONTACT NAME: MANNY SILVA

VIOLATION: FUGITIVE DUST; NO WATER TRUCKS

SECTIONS: 040.030 C1

TYPE OF VIOLATION: MINOR

OCCURRENCE: 1st

RANGE OF PENALTIES (PER DAY): \$500 - \$1,000


DEGREE OF VIOLATION: MINOR

ECONOMIC BENEFIT COMPONENT: NONE

DEGREE OF COOPERATION: NO CALL BACK PER MY REQUEST

ADDITIONAL COMMENTS: THIS SITE HAS BEEN AN ONGOING PROBLEM WITH FUGITIVE DUST. ONE CITATION ISSUED IN 2007 AND ONE CITATION ISSUED IN 2008. DUE TO NO PALLIATIVE, I RECOMMEND A SECOND APPLICATION BE APPLIED.

RECOMMENDED FINE: \$1,250.00



INVESTIGATOR'S SIGNATURE

NOTE: "Minor Violations", per District regulations, cannot exceed \$1000 for the first and second violations. Third minor violations, plus "Major Violations" cannot exceed \$10,000 per day.



WASHOE COUNTY HEALTH DISTRICT AIR QUALITY MANAGEMENT DIVISION



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AUGUST 27, 2009

ATTACHED IS A COPY OF EACH ACKNOWLEDGEMENT FORM DOCUMENTING THAT THE AFORESIGNED HAS BEEN PROPERLY NOTIFIED OF THE DATE, TIME AND LOCATION OF THE DISTRICT BOARD OF HEALTH MEETING TO CONSIDER THE FINAL DISPOSITION OF SAID CASE.

P.O. BOX 11130 Reno, NV 89520-0027 • 401 Ryland Street, Ste. 331 • (775) 784-7200 • FAX (775) 784-7225

www.washoecounty.us/health

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WASHOE COUNTY HEALTH DISTRICT

AIR QUALITY MANAGEMENT DIVISION



Public Health
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August 18, 2009

Manny Silva, Director of Operations
Meritage Homes of Nevada
1800 Sutter Street
Concord, CA 94520

RE: Case No. 1042, NOV Citation No. 4697

I hereby acknowledge receiving a packet of the information to be presented to the Washoe County District Board of Health regarding Case No. 1042, at its meeting to be held on Thursday, August 27, 2009 at 1:00 p.m., at 1001 East Ninth Street, Reno, Nevada, Building B, Auditorium B. I understand that at this meeting the District Board of Health will take the appropriate administrative action against Case No. 1042.

Appellant or Representative

Delivered by:

" MAILED AUGUST ²⁰ ~~18~~ - CERTIFIED "

Washoe County Health District
Air Quality Management Division Staff

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Public Health
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August 18, 2009

Manny Silva
Meritage Homes of Nevada
1800 Sutter Street
Concord, CA 94520

Dear Mr. Silva:

Enclosed please find a copy of the packet of information regarding Case No. 1042. The case will be presented to the Washoe County District Board of Health on Thursday, August 27, 2009, at 1:00 p.m., at 1001 East Ninth Street, Reno, Nevada, Building B, Auditorium B.

Please sign the attached acknowledgement letter as soon as possible and return it to:

**Washoe County Health District
Air Quality Management Division
Attention Noel Bonderson
401 Ryland Street, Suite 331
Reno NV 89502-1643**

You may also FAX the signed document to (775) 784-7225. If you have any questions or comments, please contact Noel Bonderson, Air Quality Management Division, at (775) 784-7205.

Sincerely,

Mary Ames
Washoe County Health District
Air Quality Management Division

Enclosure



WASHOE COUNTY HEALTH DISTRICT

AIR QUALITY MANAGEMENT DIVISION



Public Health
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DATE: August 27, 2009

TO: District Board of Health

FROM: Andrew Goodrich, Director, Air Quality Management

SUBJECT: Cal Neva Resort Spa/Casino - Case No. 1043
Unappealed Citation No. 4699
Agenda Item: **7.A.1.b.**

Recommendation

Air Quality Management Division Staff recommends that Citation No. 4699 be upheld and a fine of \$1,250 be levied against Cal Neva for improper removal and disposal of asbestos containing materials after a fire. This Citation was issued for violation of Section 030.107 A, B, and C of the District Board of Health Regulations Governing Air Quality. This is a negotiated settlement.

Recommended Fine: \$2,500.00

Negotiated Fine: \$1,250.00

Background

On June 16, 2009, Air Quality Specialist Suzanne Dugger arrived at Cal Neva in Crystal Bay, Nevada for an asbestos abatement investigation. Air Quality Management was made aware that there had been a fire in the hotel on the second floor. AQ Specialist Dugger met with Mr. Kevin Hogue, Chief Engineer for the Cal Neva Resort/Spa Casino and Mr. Robert Marcil, General Manager for the Cal Neva. Mr. Marcil and Mr. Hogue both stated that on May 19, 2009 a fire started on the second floor in room 219. Mr. Hogue stated that he had contacted a Mr. Mario Gallardo of Top Carpet Care to remove and dispose of the damaged material which included acoustical ceiling, drywall and carpet. Only the acoustical ceiling contained asbestos, however because of the improper abatement of the damaged materials all the removed materials became contaminated. Mr. Hogue had also stated that the damaged and now contaminated materials were disposed of into an unlined dumpster which was then taken to the landfill. Therefore the improper work practices which included failure to notify Air Quality Management of removal, improper removal and disposal of asbestos containing materials were violations of Section 030.107 (a)(b)(c) of the District Board of Health Regulations Governing Air Quality. Based on these violations AQ Specialist Dugger issued NOV Citation No. 4699 to Cal Neva Resort/Spa Casino.

DBOH AGENDA ITEM NO. 7.A.1.b

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On July 17, 2009, Senior Air Quality Specialist Dennis Cerfoglio and Air Quality Specialist II Suzanne Dugger made a conference call to Mr. Robert Marcil and Mr. Kevin Hogue for a negotiated settlement meeting. After consideration of all the facts of this case, Mr. Marcil agreed to a fine of \$1,250. A Memorandum of Understanding was signed by all parties.

Alternatives

1. The District Board of Health may determine that no violation of the regulations has taken place and dismiss Citation No. 4699.
2. The Board may determine to uphold Citation No. 4699 but levy any fine in the range of \$0 to \$10,000.

In the event the Board determines to change the proposed penalty, the matter should be continued so that Cal Neva Resort/Spa Casino may be properly noticed.

Andrew Goodrich FOR

Andrew Goodrich, REM
Director

AG/DC: ma



WASHOE COUNTY DISTRICT HEALTH DEPARTMENT
 AIR QUALITY MANAGEMENT DIVISION
 401 RYLAND STREET, SUITE 331 • P.O. BOX 11130 • RENO, NV 89520
 (775) 784-7200



NOTICE OF VIOLATION

NOV 4699

DATE ISSUED: 6-16-09

ISSUED TO: CAL NEVA PHONE #: 298-3081

MAILING ADDRESS: 2 STATELINE CITY/ST: CRYSTAL BAY ZIP: 89402

NAME/OPERATOR: ROBERT J. MARCIL PHONE #: 215-696-6566 CELL

DRIVER LICENSE #/SSN _____

YOU ARE HEREBY OFFICIALLY NOTIFIED THAT ON 6-16-09 (DATE) AT 9:25 A.M. (TIME), YOU ARE IN VIOLATION OF THE FOLLOWING SECTION(S) OF THE WASHOE COUNTY DISTRICT BOARD OF HEALTH REGULATIONS GOVERNING AIR QUALITY MANAGEMENT:

- | | |
|--|---|
| <input type="checkbox"/> MINOR VIOLATION OF SECTION: | <input checked="" type="checkbox"/> MAJOR VIOLATION OF SECTION: |
| <input type="checkbox"/> 040.030 DUST CONTROL | <input type="checkbox"/> 030.000 OPERATING W/O PERMIT |
| <input type="checkbox"/> 040.055 ODOR/NUISANCE | <input type="checkbox"/> 030.2175 VIOLATION OF PERMIT CONDITION |
| <input type="checkbox"/> 040.200 DIESEL IDLING | <input type="checkbox"/> 030.105 ASBESTOS/NESHAP |
| <input type="checkbox"/> OTHER _____ | <input checked="" type="checkbox"/> OTHER <u>030.107 A.B.C</u> |

VIOLATION DESCRIPTION: (A) NO NOTIFICATION OF FIRE DAMAGED MATERIALS,
(B) IMPROPER WORK PRACTICES, AND (C) ASBESTOS CONTAMINATION AND ABATEMENT.

LOCATION OF VIOLATION: 2 STATELINE, CRYSTAL BAY, NV.

POINT OF OBSERVATION: FLOORS 1, 2, AND BASEMENT.

Weather: CLEAR Wind Direction From: N E S W

Emissions Observed: _____
 (If Visual Emissions Performed - See attached Plume Evaluation Record)

WARNING ONLY: Effective _____ a.m./p.m. _____ (date) you are hereby ordered to abate the above violation within _____ hours/days. I hereby acknowledge receipt of this warning on the date indicated.

Signature _____

CITATION: You are hereby notified that effective on 6-16-09 (date) you are in violation of the section(s) cited above. You are hereby ordered to abate the above violation within IMMEDIATELY hours/days. You are further advised that within ten days of the date of this violation you may submit a written notice of appeal to the Chairman, Hearing Board, P.O. Box 11130, Reno, Nevada 89520. Failure to submit a notice of appeal in the time specified will result in submission of this violation to the District Board of Health, together with a request that an administrative fine be levied against you. If you do not wish to file an appeal the appropriate fine may be paid at the District Health Department.

SIGNING THIS FORM IS NOT AN ADMISSION OF GUILT

Signature: [Signature] Date: 6-16-09

Issued by: [Signature] Title: AQS II

WASHOE DOES NOT DISCRIMINATE ON THE BASIS OF SEX, RACE, COLOR, AGE, RELIGION, DISABILITY OR NATIONAL ORIGIN IN THE ACTIVITIES AND OR SERVICES WHICH IT PROVIDES. IF YOU HAVE ANY QUESTIONS, PLEASE CALL WASHOE COUNTY HUMAN RESOURCES - 328-2080; TDD NUMBER 328-3685.

APPEAL FORM GIVEN.

Jul. 20. 2009 8:10AM

No. 1718 P. 2



DISTRICT HEALTH DEPARTMENT AIR QUALITY MANAGEMENT DIVISION

MEMORANDUM OF UNDERSTANDING

WASHOE COUNTY DISTRICT HEALTH DEPARTMENT AIR QUALITY MANAGEMENT DIVISION

Date: 7-17-2009

Company Name: CALNEVA RESORT SPA CASINO
Address: 2 STATE LINE
Notice of Violation # 4699 Case # 1043

The staff of the Air Quality Management Division of the Washoe County District Health Department issued the above referenced citation for the violation of Regulation 030.107 ABC. No notification of removal and disposal of fire damaged asbestos materials

A settlement of this matter has been negotiated between the undersigned parties resulting in a penalty amount of \$ 1,250.00. This settlement will be submitted to the District Board of Health for review at the regularly scheduled meeting on August 27, 2009.

Signature of Company Representative

ROBERT J. MARCIL

Print Name

GENERAL MANAGER

Title

Witness

Witness

Signature of District Representative

DENNIS A. CERFOGLIO

Print Name

Sr. Air Quality Specialist

Title

Witness

SUZANNE DUGGER

Witness

VIOLATION: Major Violation of Section 030.107 Sections (A)(B)(C) Notice of Violation # 4699

ISSUED TO: Cal Neva
2 Stateline Road
Crystal Bay, Nevada 89402

On June 11, 2009, Dan Bauer of Bauer Drywall attempted to obtain an Acknowledgment of Asbestos Assessment form from the Washoe County Air Quality Management Division (WCAQMD). Mr. Bauer brought with him a copy of an asbestos survey dated September 24, 2005 that indicated there was 3-20% Chrysotile in the spray acoustic ceiling in the spa/banquet ceiling of the Cal Neva Resort/Spa/Casino. According to Mr. Bauer he was obtaining the acknowledgment form in order to perform renovation work at the Cal Neva Resort/Spa/ Casino due to a fire which occurred on May 19, 2009. Upon hearing of the fire at the Cal Neva, Air Quality Specialist II (AQS) Suzanne Dugger of the WCAQMD traveled to the Cal Neva on Tuesday June 16, 2009. AQS Dugger met with Mr. Kevin Hogue, Chief Engineer for the Cal Neva Resort/Spa/Casino and Mr. Robert Marcil, General Manager for the Cal Neva Resort/Spa/Casino. According to both gentlemen they confirmed that there was a fire and that they were unaware of what county regulations needed to be followed based on the fire emergency.

Mr. Marcil and Mr. Hogue both stated that on May 19, 2009 a fire started on the second floor in room 219. The fire was started due to a problem with one of the electrical outlets in the room. The fire sprinkler system ran for approximately one hour and the Fire Department had also applied water to this area. Due to the application of excessive amounts of water, the water damaged the carpet and the lower portions of drywall on the second floor. In addition to the damage on the second floor the water traveled down through the walls and damaged the acoustical ceiling in the spa/banquet area which became saturated and fell to the floor. Mr. Hogue contacted Mr. Mario Gallardo of Top Carpet Care to abate the damaged saturated materials, which included acoustical ceiling, drywall and carpet. Of these materials only the acoustical ceiling contained asbestos. Due to improper work practices, a violation of 030.107 B, all damaged materials then became "hot" with asbestos. According to Mr. Hogue all damaged materials were then disposed of into an unlined dumpster which was then taken to the landfill. This improper abatement and disposal is a violation of 030.107 C.

After arriving on site AQS Dugger requested that all current renovation construction associated with the damage from the fire cease until air clearances can be obtained to determine if asbestos fibers remain in the air. Once the air samples are obtained and indicate whether asbestos is present or not will determine the next course of action. AQS Dugger stated that if there are no asbestos fibers detected in the air then the re-build can continue. If the air samples come back detecting asbestos then AQS Dugger stated that a certified asbestos abatement contractor needed to be hired to perform a

clean up of the remaining surfaces. On June 18, 2009, Mr. Kevin Hogue confirmed that air samples obtained in the spa/banquet area contained a trace amount of asbestos. Due to trace amounts of asbestos being detected Mr. Hogue has hired an abatement contractor to perform a clean up of all surface areas and to hepa vac entire area. A final air clearance will be run upon completion of clean up. On June 21, 2009, a final air clearance sample was obtain and the analytical results indicated the air was clean of asbestos.

Based on violations to the Washoe County Asbestos Regulations performed at 2 Stateline Road, Crystal Bay, Nv., AQS Dugger issued a Notice of Violation (NOV) #4699 to the Cal Neva Resort/Spa/Casino for violation of 030.107 (A) Asbestos Sampling and Notification, (B) Asbestos Control Work Practice and (C) Asbestos Contamination and Abatement. AQS Dugger also issued an NOV # 4700 to Top Carpet Care for violation of 030.107 (B) and (C)

An appeal form was attached to NOV # 4699 and 4700.

Suzanne Dugger
Air Quality Specialist II
Air Quality Management Division
Washoe County District Health Department

RECOMMENDED FINE WORKSHEET

DATE: 6/29/2009

CASE No: 1043

COMPANY NAME: CAL NEVA RESORT/SPA CASINO

CONTACT NAME: ROBERT MARCIL

VIOLATION: 030.107.

SECTIONS: A,B,C TYPE OF VIOLATION: MAJOR

OCCURRENCE: 1st

RANGE OF PENALTIES (PER DAY): \$0-\$10,000

DEGREE OF VIOLATION: MAJOR

ECONOMIC BENEFIT COMPONENT: \$1200 AIR CLEARANCES, \$10,000
CLEAN UP = \$11,200.

DEGREE OF COOPERATION: CAL NEVA AND TOP CARPET HAVE BOTH
BEEN EXTREMELY HELPFUL.

ADDITIONAL COMMENTS: DUE TO THIS BEING CAUSED BY A FIRE AND
SINCE BOTH PARTIES HAVE BEEN COOPERATIVE AND ALL AREAS HAVE
SINCE BEEN "CLEANED UP" AND CLEARED BY ASBESTOS ABATEMENT
CREW AND AIR CLEARANCES HAVE BEEN OBTAINED AND INDICATE NO
ASBESTOS IN LEU OF A FINE, I RECOMMEND ASBESTOS AWARENESS
CLASS BE REQUIRED OF BOTH PARTIES.

RECOMMENDED FINE: \$2500



INVESTIGATOR'S SIGNATURE

NOTE: "Minor Violations", per District regulations, cannot exceed \$1000 for the first and second violations. Third minor violations, plus "Major Violations" cannot exceed \$10,000 per day.



WASHOE COUNTY HEALTH DISTRICT

AIR QUALITY MANAGEMENT DIVISION



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AUGUST 27, 2009

ATTACHED IS A COPY OF EACH ACKNOWLEDGEMENT FORM DOCUMENTING THAT THE AFORESIGNED HAS BEEN PROPERLY NOTIFIED OF THE DATE, TIME AND LOCATION OF THE DISTRICT BOARD OF HEALTH MEETING TO CONSIDER THE FINAL DISPOSITION OF SAID CASE.

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AIR QUALITY MANAGEMENT DIVISION



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August 18, 2009

Robert J. Marcil, General Manager
Cal Neva Resort Spa Casino
2 Stateline
Crystal Bay NV 89402

RE: Case No. 1043, NOV Citation No. 4699

I hereby acknowledge receiving a packet of the information to be presented to the Washoe County District Board of Health regarding Case No. 1043, at its meeting to be held on Thursday, August 27, 2009 at 1:00 p.m., at 1001 East Ninth Street, Reno, Nevada, Building B, Auditorium B. I understand that at this meeting the District Board of Health will take the appropriate administrative action against Case No. 1043.

Appellant or Representative

Delivered by:

"MAILED AUGUST ²⁰ 2009 - CERTIFIED"

Washoe County Health District
Air Quality Management Division Staff



WASHOE COUNTY HEALTH DISTRICT

AIR QUALITY MANAGEMENT DIVISION



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August 18, 2009

Robert J. Marcil, General Manager
Cal Neva Resort Spa Casino
2 Stateline
Crystal Bay NV 89402

RE: Case No. 1043, NOV Citation No. 4699

I hereby acknowledge receiving a packet of the information to be presented to the Washoe County District Board of Health regarding Case No. 1043, at its meeting to be held on Thursday, August 27, 2009 at 1:00 p.m., at 1001 East Ninth Street, Reno, Nevada, Building B, Auditorium B. I understand that at this meeting the District Board of Health will take the appropriate administrative action against Case No. 1043.

Appellant or Representative

Delivered by:

"MAILED AUGUST 20 - CERTIFIED"

Washoe County Health District
Air Quality Management Division Staff

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DATE: August 27, 2009

TO: District Board of Health

FROM: Andrew Goodrich, Director, Air Quality Management

SUBJECT: Top Carpet Care - Case No. 1044
Unappealed Citation No. 4700
Agenda Item:

Recommendation **7.A.1.c.**

Air Quality Management Division Staff recommends that Citation No. 4700 be upheld and a fine of \$2,000 be levied against Top Carpet Care for improper removal and disposal of asbestos containing materials after a fire at the Cal Neva Resort Spa Casino located at 2 Stateline, Crystal Bay, Nevada. The citation was issued for a violation of Sections 030.107 (A)(B) of the District Board of Health Regulations Governing Air Quality Management. This is a negotiated settlement.

Recommended Fine: \$2500.00

Negotiated Fine: \$2000.00

Background

On June 16, 2009, Air Quality Specialist Suzanne Dugger arrived at the Cal Neva Resort/Spa Casino in Crystal Bay, Nevada, for an asbestos abatement investigation. When she arrived, Specialist Dugger made contact with Mr. Kevin Hogue, Chief Engineer for the Cal Neva Resort/Spa Casino and Mr. Robert Marcil, General Manager for the Cal Neva Resort/Spa Casino. Mr. Marcil and Mr. Hogue both stated that on May 19, 2009, there was a fire on the second floor in room 219. There was water damage to the carpet and the lower portions of drywall on the second floor. Mr. Hogue called Mr. Mario Gallardo, owner of Top Carpet Care, to remove and dispose of the damaged materials. Upon further investigation by Specialist Dugger, it was determined the water damaged materials were all removed and disposed of in an improper manner not consistent with the Regulations governing the Air Quality Management Division. Specialist Dugger issued Notice of Violation Citation No. 4700 to Top Carpet Care.

On August 3, 2009, Senior Air Quality Specialist Dennis Cerfoglio and Air Quality Specialist II Lauri Mendoza made a conference call to Mr. Mario Gallardo for a negotiated settlement meeting. After consideration of all the facts of this case, Specialist Cerfoglio recommended that Notice of Violation Citation No. 4700 be upheld with a fine of \$2,000. A Memorandum of Understanding was signed by all parties.

DBOH AGENDA ITEM NO. 7.A.1.c.

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Alternatives

1. The District Board of Health may determine that no violation of the regulations has taken place and dismiss Citation No. 4700.
2. The District Board of Health may determine to uphold Citation No. 4700 but levy any fine in the range of \$0 to \$10,000.

In the event the Board determines to change the proposed penalty, the matter should be continued so that Top Carpet Care may be properly noticed.

And G. Goodrich For
Andrew Goodrich, REM
Director

AG/DC: ma



WASHOE COUNTY DISTRICT HEALTH DEPARTMENT
 AIR QUALITY MANAGEMENT DIVISION
 401 RYLAND STREET, SUITE 331 • P.O. BOX 11130 • RENO, NV 89520
 (775) 784-7200



NOTICE OF VIOLATION

NOV 4700

DATE ISSUED: 6-16-09

ISSUED TO: TOP CARPET CARE PHONE #: 560-8254

MAILING ADDRESS: P.O. BOX 8417 CITY/ST: INCLINE VILLAGE ZIP: 89452

NAME/OPERATOR: MARIO GALLARDO PHONE #: 560-8254

DRIVER LICENSE #/SSN _____

YOU ARE HEREBY OFFICIALLY NOTIFIED THAT ON 6-16-09 (DATE) AT 9:25 A.M. (TIME), YOU ARE IN VIOLATION OF THE FOLLOWING SECTION(S) OF THE WASHOE COUNTY DISTRICT BOARD OF HEALTH REGULATIONS GOVERNING AIR QUALITY MANAGEMENT:

- | | |
|--|---|
| <input type="checkbox"/> MINOR VIOLATION OF SECTION: | <input checked="" type="checkbox"/> MAJOR VIOLATION OF SECTION: |
| <input type="checkbox"/> 040.030 DUST CONTROL | <input type="checkbox"/> 030.000 OPERATING W/O PERMIT |
| <input type="checkbox"/> 040.055 ODOR/NUISANCE | <input type="checkbox"/> 030.2175 VIOLATION OF PERMIT CONDITION |
| <input type="checkbox"/> 040.200 DIESEL IDLING | <input type="checkbox"/> 030.105 ASBESTOS/NESHAP |
| <input type="checkbox"/> OTHER _____ | <input checked="" type="checkbox"/> OTHER <u>030.107 B.C.</u> |

VIOLATION DESCRIPTION: (B) IMPROPER WORK PRACTICES, AND (C) ASBESTOS CONTAMINATION AND ABATEMENT.

LOCATION OF VIOLATION: 2 STATELINE CRYSTAL BAY, NV.

POINT OF OBSERVATION: FLOORS 1, 2, AND BASEMENT

Weather: CLEAR Wind Direction From: N E S W

Emissions Observed: _____
 (If Visual Emissions Performed - See attached Plume Evaluation Record)

WARNING ONLY: Effective _____ a.m./p.m. _____ (date) you are hereby ordered to abate the above violation within _____ hours/days. I hereby acknowledge receipt of this warning on the date indicated.

Signature _____

CITATION: You are hereby notified that effective on 6-16-09 (date) you are in violation of the section(s) cited above. You are hereby ordered to abate the above violation within IMMEDIATELY hours/days. You are further advised that within ten days of the date of this violation you may submit a written notice of appeal to the Chairman, Hearing Board, P.O. Box 11130, Reno, Nevada 89520. Failure to submit a notice of appeal in the time specified will result in submission of this violation to the District Board of Health, together with a request that an administrative fine be levied against you. If you do not wish to file an appeal the appropriate fine may be paid at the District Health Department.

SIGNING THIS FORM IS NOT AN ADMISSION OF GUILT

Signature: [Signature] Date: _____

Issued by: [Signature] Title: AQS II

AH. Suzanne Dugger



DISTRICT HEALTH DEPARTMENT

AIR QUALITY MANAGEMENT DIVISION

MEMORANDUM OF UNDERSTANDING

WASHOE COUNTY DISTRICT HEALTH DEPARTMENT AIR QUALITY MANAGEMENT DIVISION

Date: 8-3-2009

Company Name: Top Carpet Care
Address: P.O. Box 8417 Incline Village, Nev. 89452
Notice of Violation # 4700 Case # 1044

The staff of the Air Quality Management Division of the Washoe County District Health Department issued the above referenced citation for the violation of Regulation 030.107 A, B+C No proper notification upon removal & disposal of fire damaged asbestos materials

A settlement of this matter has been negotiated between the undersigned parties resulting in a penalty amount of \$ 2,000.00. This settlement will be submitted to the District Board of Health for review at the regularly scheduled meeting on August 27, 2009
employees required to take 16 hr. asbestos awareness

Mario Gallardo
Signature of Company Representative

Dennis A. Cerfoglio
Signature of District Representative

Mario Gallardo
Print Name

DENNIS A. CERFOGLIO
Print Name

Owner
Title

San. Air Quality Specialist
Title

Witness

Raul J. Mendez
Witness

Witness

Witness

VIOLATION: Major Violation of Section 030.107 Sections (B)(C) Notice of Violation # 4700

ISSUED TO: Top Carpet Care
P.O. Box 8417
Incline Village, Nevada 89452

On June 11, 2009, Dan Bauer of Bauer Drywall attempted to obtain an Acknowledgment of Asbestos Assessment form from the Washoe County Air Quality Management Division (WCAQMD). Mr. Bauer brought with him a copy of an asbestos survey dated September 24, 2005 that indicated there was 3-20% Chrysotile in the spray acoustic ceiling in the spa/banquet ceiling of the Cal Neva Resort/Spa/Casino. According to Mr. Bauer he was obtaining the acknowledgment form in order to perform renovation work at the Cal Neva Resort/Spa/ Casino due to a fire which occurred on May 19, 2009. Upon hearing of the fire at the Cal Neva, Air Quality Specialist II (AQS) Suzanne Dugger of the WCAQMD traveled to the Cal Neva on Tuesday June 16, 2009. AQS Dugger met with Mr. Kevin Hogue, Chief Engineer for the Cal Neva Resort/Spa/Casino and Mr. Robert Marcil, General Manager for the Cal Neva Resort/Spa/Casino. According to both gentlemen they confirmed that there was a fire and that they were unaware of what county regulations needed to be followed based on the fire emergency.

Mr. Marcil and Mr. Hogue both stated that on May 19, 2009 a fire started on the second floor in room 219. The fire was started due to a problem with one of the electrical outlets in the room. The fire sprinkler system ran for approximately one hour and the Fire Department had also applied water to this area. Due to the application of excessive amounts of water, the water damaged the carpet and the lower portions of drywall on the second floor. In addition to the damage on the second floor the water traveled down through the walls and damaged the acoustical ceiling in the spa/banquet area which became saturated and fell to the floor. Mr. Hogue contacted Mr. Mario Gallardo of Top Carpet Care to abate the damaged saturated materials, which included acoustical ceiling, drywall and carpet. Of these materials only the acoustical ceiling contained asbestos. Due to improper work practices, a violation of 030.107 B, all damaged materials then became "hot" with asbestos. According to Mr. Hogue all damaged materials were then disposed of into an unlined dumpster which was then taken to the landfill. This improper abatement and disposal is a violation of 030.107 C.

Based on violations to the Washoe County Asbestos Regulations performed at 2 Stateline Road, Crystal Bay, Nv., AQS Dugger issued a Notice of Violation (NOV) #4700 to Top Carpet Care for violation of 030.107 (B) Asbestos Control Work Practice and (C) Asbestos Contamination and Abatement.

An appeal form was attached to NOV #4700.

Suzanne Dugger
Air Quality Specialist II
Air Quality Management Division
Washoe County District Health Department

RECOMMENDED FINE WORKSHEET

DATE: 6/29/2009

CASE#: 1044

COMPANY NAME: TOP CARPET CARE

CONTACT NAME: MARIO GALLARDO

VIOLATION: IMPROPER ASBESTOS WORK PRACTICES; ASBESTOS
CONTAMINATION AND ABATEMENT

SECTIONS: 030.107 (B)(C)

TYPE OF VIOLATION: MAJOR

OCCURRENCE: 1st

RANGE OF PENALTIES (PER DAY): \$0-\$10,000

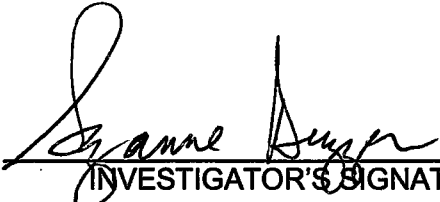
DEGREE OF VIOLATION: MAJOR

ECONOMIC BENEFIT COMPONENT: CONTRACTOR PERFORMED WORK
FOR CAL NEVA. ACCORDING TO THE ASBESTOS ABATEMENT
CONTRACTOR, THE WORK PERFORMED WOULD TOTAL \$10,000.

DEGREE OF COOPERATION: VERY COOPERATIVE. THE CONTRACTOR
WAS UNAWARE THAT THERE WERE REGULATIONS REGARDING THE
REMOVAL OF DAMAGED BUILDING MATERIALS. AS PART OF THE
SETTLEMENT, ONE EMPLOYEE WILL ATTEND A 16-HOUR REFRESHER
COURSE WITH AN ASBESTOS CONSULTING FIRM.

ADDITIONAL COMMENTS:

RECOMMENDED FINE: \$2500



INVESTIGATOR'S SIGNATURE

NOTE: "Minor Violations", per District regulations, cannot exceed \$1000 for the first and second violations. Third minor violations, plus "Major Violations" cannot exceed \$10,000 per day.

ASBESTOS REPORTS & LETTERS
Lisa Monroe & Associates Inc

Lisa Monroe & Associates, Inc.
P.O. Box 2252
Sparks, NV 89432
Phone/Fax: 775-355-1011

June 10, 2009

Cal-Neva Resort
P.O. Box 1397
Crystal Bay, NV 89402

Attention: Kevin Hogue

Regarding: Fire/water damage in the Spa/Banquet level.

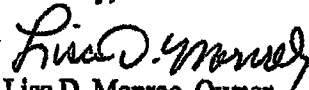
Kevin,

Lisa Monroe & Associates has reviewed the asbestos inspection report that was performed at the Cal-Neva Resort and is dated September 30, 2005. The inspection involved the collection of 44 bulk samples from various areas of the Hotel/Casino. The bulk samples that were collected from the Spa/Banquet level shows that the spray acoustic on the ceilings contains 3-20% Chrysotile asbestos.

If the asbestos containing materials will be disturbed by any renovation activities, an asbestos abatement contractor will need to perform the removal prior to that disturbance.

If you have any questions please give us a call.

Sincerely,



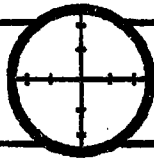
Lisa D. Monroe, Owner
Lisa Monroe & Associates, Inc.
NV DIROSHA: LPM0061

GALLARDO
P.O. BOX 8417
INCLINE VILLAGE
89452

MARIO TOP CARPET CARE 560-8254

Club Cal Neva
Contact: Kevin Hogue

(775) 291 1103 cell



**PRECISION
MICRO-ANALYSIS** I
N
C

SPECIALISTS IN ASBESTOS-RELATED ANALYSIS

Bulk Sample Analysis (PLM) Report

Report # 99379698

Lisa Monroe & Associates
P.O. Box 2252
Sparks, NV 89432-

Date Collected:09/24/05
Date Received:09/26/05
Date Analyzed:09/28/05

Phone:(775)355-1011

Job Information:
05-NV-6124
Cal Neva
Crystal Bay, NV

Sample Number	Sample Location	Sample Description	Analytical Results
NV-6124-1 Lab # 05-131239	Spa / Banquet level	White acoustic	15-20% CHRYSOTILE ASBESTOS
NV-6124-2 Lab # 05-131240	Spa / Banquet level	White acoustic	3-8% CHRYSOTILE ASBESTOS 15-20% Polyethylene fibers
NV-6124-3 Lab # 05-131241	Spa / Banquet level	Tan joint compound	No asbestos detected
NV-6124-4 Lab # 05-131242	Spa / Banquet level	Tan joint compound	No asbestos detected
NV-6124-5 Lab # 05-131243	Arcade - E. soffit	White acoustic	5-10% CHRYSOTILE ASBESTOS
NV-6124-6 Lab # 05-131244	Arcade - West soffit	White acoustic	No asbestos detected

OFFICIAL NOTICE: After 45 days, samples are disposed of through a licensed waste hauler, unless client requests their return.

Total Number of Samples: 44

Supervisor *[Signature]*

Analyst *[Signature]*

Page 1 of 8

Note: The test result findings are made to the methodologies and parameters described on the reverse of this page.

**Lisa Monroe & Associates, Inc.
P.O. Box 2252
Sparks, NV 89432
Phone/Fax: 775-355-1011**

June 17, 2009

**Cal-Neva Resort
P.O. Box 1397
Crystal Bay, NV 89402**

Attention: Kevin Hogue

Regarding: Spa/Banquet Level water Damage

Kevin,

Lisa Monroe & Associates, Inc. performed a visual inspection and collected area air samples and one dust sample from the Spa/Banquet level that was damaged by water following a fire above the area. The water damaged and disturbed the asbestos containing ceiling materials in the area.

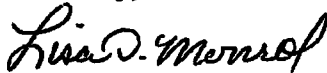
Three area air samples were collected and submitted to an accredited laboratory for Transmission Electron Microscopy (TEM) analysis and one dust sample was submitted to an accredited laboratory for Polarized Light Microscopy (PLM) analysis.

The results of the air sample collection shows that two of the samples do have Chrysotile asbestos structures present on the filter. And the dust sample shows a Trace (less than 1%) of Chrysotile asbestos.

Although the air sample analysis results for the two samples is below the TEM clearance level and the dust sample only contains a Trace of asbestos, it is our opinion that minimal asbestos contamination is present. It is our recommendation that the area be isolated and an asbestos abatement contractor perform cleanup procedures. These procedures should include wet wiping all surfaces and HEPA vacuuming all of the floors. Additional air sample collection may be performed after the cleanup, but may not be necessary because actual asbestos removal is not being performed.

If you have any questions please give us a call.

Sincerely,


**Lisa D. Monroe, President
Lisa Monroe & Associates, Inc.
NV DIROSHA: IJPM0061**

ASBESTOS REPORTS & LETTERS
C & G Environmental Consulting Inc

C & G Environmental Consulting, Inc.

June 22, 2009
C&G Environmental Project No. 03061809

Cal Neva Resort
2 Stateline Road
Crystal Bay, Nevada 89402

ATTN: Kevin Hogue

RE: **LIMITED ASBESTOS CONTAINING MATERIAL INSPECTION AND ASSESSMENT: CAL NEVA RESORT, 2 STATELINE ROAD, CRYSTAL BAY, NEVADA**

Dear Mr. Hogue:

C&G Environmental Consulting is pleased to submit this report which summarizes the results of a limited asbestos containing material (ACM) inspection and assessment at the Cal Neva Resort, which is located at 2 Stateline Road, in Crystal Bay, Nevada.

1.0 SCOPE OF SERVICES

On June 18, 2009, an EPA accredited, and State of Nevada licensed asbestos inspector from C&G Environmental conducted an inspection and assessment of suspect wall materials located in the hallway of floors one and two of the hotel tower. Four (4) representative bulk samples were collected from each of the hallways located on the first and second floors. A total of eight (8) representative bulk samples were collected of wall materials during this inspection.

Suspect materials that were sampled during this inspection included; drywall, joint compound and wall texture.

This inspection was conducted in general accordance with accepted EPA/OSHA regulations. All samples collected were submitted under approved chain-of-custody protocol, and analyzed at Asbestos TEM Laboratories, Inc. in Sparks, Nevada. The suspect ACM samples were analyzed for asbestos fibers utilizing Polarized Light Microscopy (PLM). A copy of the laboratory analytical report is attached in Appendix A, and the chain of custody record is provided in Appendix B.

2.0 ASBESTOS ANALYTICAL RESULTS

In accordance with State of Nevada OSHA regulation NAC 618.887 and NESHAPS 40 CFR 61.141 the definition of an asbestos containing material is "any material which contains more than one percent asbestos by weight".

Analytical results of the bulk samples analyzed during this inspection indicated that all joint compound materials contained less than one percent Chrysotile asbestos. All wall texture and drywall materials were none detected for containing asbestos.

3.0 CONCLUSIONS/RECOMMENDATIONS

The EPA/Washoe County District Health Department does not regulate materials which contain less than one percent asbestos. Additionally, Nevada OSHA does not currently enforce regulations pertaining to materials containing less than one percent asbestos. Therefore, C&G Environmental Consulting summarizes that no further asbestos related activities are required for the materials sampled and analyzed during this inspection. However, C&G Environmental Consulting does recommend that "wet-cuts" or other methods which minimize airborne dust emissions should be used at all times when disturbing materials which contain less than one percent asbestos.

These sample results are limited to the materials that were identified and sampled during this inspection. If additional materials are discovered that have not been sampled, they would require additional sampling and analysis.

4.0 LIMITATIONS

C&G Environmental Consulting is not responsible for any claims or damages associated with the interpretation of information provided during this inspection. This report should not be regarded as a guarantee that no further asbestos exists beyond that which was suspected and sampled during this inspection. In addition, asbestos is usually not distributed evenly throughout a particular material and C&G Environmental Consulting cannot guarantee that all materials sampled are exactly as represented throughout the entire building. In the event renovation or demolition activities uncover materials that were previously hidden or inaccessible during the time of this inspection, then additional sample collection and analysis would be required. In the event asbestos containing materials that were previously hidden or inaccessible during the time of this inspection are disturbed and an asbestos exposure occurs, C&G Environmental Consulting shall be held harmless and will not be responsible for any claims made, financial or otherwise.

C&G Environmental Consulting makes no warranties or guarantees as to the accuracy or completeness of information obtained from, provided by, or compiled by others. It is possible that information exists beyond the scope of this investigation. This report is not a legal opinion. The services performed by C&G Environmental Consulting have been conducted in a manner consistent with the level of care ordinarily exercised by members of our profession currently licensed by the State of Nevada to perform this work, and practicing under similar conditions. No other warranty, expressed or implied, is made.

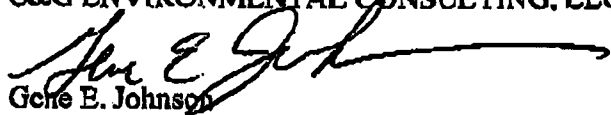
01021209 - Cal Neva Resort, 1st & 2nd Floor Hallways

Page 3

5.0 CLOSURE

We appreciated the opportunity to provide this service for the Cal Neva Resort. Should you have any questions regarding the contents of this report, or need additional information, please contact us at your convenience.

Respectfully Submitted,
C&G ENVIRONMENTAL CONSULTING, LLC.



Gene E. Johnson
Project Director
Asbestos Consultant License No. IJPM0604

APPENDIX A
Laboratory Analytical Results

POLARIZED LIGHT MICROSCOPY ANALYTICAL REPORT

Accredited by
U.S. Dept. of Commerce
NVLAP
NVLAP Lab Code 200104-0

EPA Method 600/R-93/116 or 600/M-82-020

Page: 1 of 3

Contact: Mr. Gene Johnson	Samples Indicated: 8	Report No. 111919
Address: C & G Environmental Consulting, P.O. Box 5298 Reno, NV 89513	Reg. Samples Analyzed: 8	Date Submitted: Jun-19-09
	Split Layers Analyzed: 16	Date Reported: Jun-19-09
	Job Site / No. Cal Neva Resort 03061809	

SAMPLE ID	% ASBESTOS TYPE	OTHER DATA		DESCRIPTION FIELD LAB
		1) Non-Asbestos Fibers 2) Matrix Material 3) Date/Time Collected 4) Date Analyzed		
W-1. Lab ID # 867-01128-001A	None Detected	1) 1-5% Cellulose 2) 95-99% Gyp. Other m.p.		Hall Between Room 207 & 209, Wall Texture / Drywall Drywall-Pink
W-1. Lab ID # 867-01128-001B	None Detected	1) 1-5% Cellulose 2) 95-99% Calc. Other m.p.	4 Jun-19-09	Hall Between Room 207 & 209, Wall Texture / Drywall Texture-Off-White
W-1. Lab ID # 867-01128-001C	None Detected	1) 1-5% Cellulose 2) 95-99% Calc. Other m.p.	4 Jun-19-09	Hall Between Room 207 & 209, Wall Texture / Drywall Texture-White
W-2. Lab ID # 867-01128-002A	<1% Chrysotile	1) 6-15% Fiberglass, Cellulose 2) 85-94% Gyp. Calc. Other m.p.	4 Jun-19-09	Hall Corner By Room 210, Wall Texture / Joint Compound - Drywall <1% Chrysotile in Joint Compound
W-2. Lab ID # 867-01128-002B	None Detected	1) 1-5% Cellulose 2) 95-99% Calc. Other m.p.	4 Jun-19-09	Hall Corner By Room 210, Wall Texture / Joint Compound - Drywall Texture-Off-White
W-2. Lab ID # 867-01128-002C	None Detected	1) 1-5% Cellulose 2) 95-99% Calc. Other m.p.	4 Jun-19-09	Hall Corner By Room 210, Wall Texture / Joint Compound - Drywall Texture-White
W-3. Lab ID # 867-01128-003A	<1% Chrysotile	1) 5-10% Fiberglass, Cellulose 2) 90-95% Gyp. Clay, Other m.p.	4 Jun-19-09	Hall Between By Room 217 & 219, Texture / Drywall <1% Chrysotile in Joint Compound
W-3. Lab ID # 867-01128-003B	None Detected	1) 1-5% Cellulose 2) 95-99% Calc. Other m.p.	4 Jun-19-09	Hall Between By Room 217 & 219, Texture / Drywall Texture-Off-White
W-3. Lab ID # 867-01128-003C	None Detected	1) 1-5% Cellulose 2) 95-99% Calc. Other m.p.	4 Jun-19-09	Hall Between By Room 217 & 219, Texture / Drywall Texture-White
W-4. Lab ID # 867-01128-004A	<1% Chrysotile	1) 1-5% Cellulose 2) 95-99% Gyp. Other m.p.	4 Jun-19-09	Hall Corner By Room 216, Texture / Joint Compound Drywall <1% Chrysotile in Joint Compound

Detection Limit of Method is Estimated to be 1% Asbestos Using a Visual Area Estimation Technique

Lab Manager Dottie Guilbert Analyst Dottie Guilbert
Dottie Guilbert Dottie Guilbert

ASBESTOS TEM LABORATORIES, INC. 1350 Freeport Blvd., Unit 104, Sparks, NV 89431 (775) 359-3377
With Main Office in Berkley, CA (510) 704-8930

Accredited by
U.S. Dept. of Commerce
NVLAP
NVLAP Lab Code 200104-0

**POLARIZED LIGHT MICROSCOPY
ANALYTICAL REPORT**
EPA Method 600/R-93/116 or 600/M-92-020

Page: 2 of 3

Contact: Mr. Gene Johnson	Samples Indicated: 8	Report No. 111919
Address: C & G Environmental Consulting, P.O. Box 5298 Reno, NV 89513	Reg. Samples Analyzed: 8 Split Layers Analyzed: 16	Date Submitted: Jun-19-09 Date Reported: Jun-19-09
	Job Site / No. Cal Neva Resort 03061809	

SAMPLE ID	ASBESTOS % TYPE	OTHER DATA		DESCRIPTION FIELD LAB
		1) Non-Asbestos Fibers 2) Matrix Materials 3) Date/Time Collected 4) Date Analyzed		
W-4. Lab ID # 867-01128-004B	None Detected	1) 1-5% Cellulose 2) 95-99% Calc, Other mp.	Jun-19-09	Hall Corner By Room 216, Texture / Joint Compound - Drywall Texture-Off-White
W-4. Lab ID # 867-01128-004C	None Detected	1) 1-5% Cellulose 2) 95-99% Calc, Other mp.	Jun-19-09	Hall Corner By Room 216, Texture / Joint Compound - Drywall Texture-White
W-5. Lab ID # 867-01128-005A	<1% Chrysotile	1) 1-5% Cellulose 2) 95-99% Gyp, Other mp.	Jun 19-09	1st Floor Hall By Elevator, Texture / Joint Compound - Drywall <1% Chrysotile in Joint Compound
W-5. Lab ID # 867-01128-005B	None Detected	1) 1-5% Cellulose 2) 95-99% Calc, Other mp.	Jun-19-09	1st Floor Hall By Elevator, Texture / Joint Compound - Drywall Texture-Off-White
W-5. Lab ID # 867-01128-005C	None Detected	1) 1-5% Cellulose 2) 95-99% Calc, Other mp.	Jun-19-09	1st Floor Hall By Elevator, Texture / Joint Compound - Drywall Texture-White
W-6. Lab ID # 867-01128-006A	None Detected	1) 2-10% Cellulose, Fiberglass 2) 90-98% Gyp, Other mp.	Jun-19-09	Hall Between Room 104 & 106, Texture / Drywall Drywall-Pink
W-6. Lab ID # 867-01128-006B	None Detected	1) 1-5% Cellulose 2) 95-99% Calc, Other mp.	Jun-19-09	Hall Between Room 104 & 106, Texture / Drywall Texture-Off-White
W-6. Lab ID # 867-01128-006C	None Detected	1) 1-5% Cellulose 2) 95-99% Calc, Other mp.	Jun-19-09	Hall Between Room 104 & 106, Texture / Drywall Texture-White
W-7. Lab ID # 867-01128-007A	<1% Chrysotile	1) 1-5% Cellulose 2) 95-99% Gyp, Other mp.	Jun-19-09	Hall Corner By Room 119, Texture / Joint Compound - Drywall <1% Chrysotile in Joint Compound
W-7. Lab ID # 867-01128-007B	None Detected	1) 1-5% Cellulose 2) 95-99% Calc, Other mp.	Jun-19-09	Hall Corner By Room 119, Texture / Joint Compound - Drywall Texture-Off-White

Detection Limit of Method is Estimated to be 1% Asbestos Using a Visual Area Estimation Technique

Lab Manager Dottie Guilbert
Dottie Guilbert

Analyst Dottie Guilbert
Dottie Guilbert

ASBESTOS TEM LABORATORIES, INC. 1350 Freepoint Blvd., Unit 104, Sparks, NV 89431 (775) 359-3377
With Main Office in Berkley, CA (510) 704-8930

C & G Environmental Consulting, Inc.
P.O. Box 5298, Reno, Nevada 89513
Phone: (775) 748-3838 Fax: (775) 787-6846

FAX TRANSMITTAL

To: Kevin Hogue	From: Gene Johnson
Fax: (775) 748-3838 831-9007	Pages: 16 including cover page
Phone:	Date: June 22, 2009
Re: Asbestos Reports	CC:

Urgent For Review Please Comment Please Reply Please Recycle

• **Comments:**

Attached, please find the final reports for the asbestos inspection in the hallways of floors one and two, and the final clearance air sampling in the basement.

The hard copies of these reports, and an invoice will follow in the mail.

Please call if you have any questions. My office phone number is (775) 748-3838.

The information contained in this fax may be privileged and confidential information, intended only for the individual named above. If you are not the named recipient, you are hereby notified that any use, review, dissemination, distribution, or copying of this document is prohibited. If you have received this fax in error, please notify us immediately by telephone (collect, if necessary) and destroy the original message. Thank you.



C & G Environmental Consulting, Inc.

June 22, 2009
C&G Environmental Project No. 03061809

Cal Neva Resort
2 Stateline Road
Crystal Bay, Nevada 89402

ATTN: Kevin Hogue

RE: **LIMITED ASBESTOS CONTAINING MATERIAL INSPECTION AND ASSESSMENT: CAL NEVA RESORT, 2 STATELINE ROAD, CRYSTAL BAY, NEVADA**

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2.0 ASBESTOS ANALYTICAL RESULTS

In accordance with State of Nevada OSHA regulation NAC 618.887 and NESHAPS 40 CFR 61.141 the definition of an asbestos containing material is "any material which contains more than one percent asbestos by weight".

Analytical results of the bulk samples analyzed during this inspection indicated that all joint compound materials contained less than one percent Chrysotile asbestos. All wall texture and drywall materials were none detected for containing asbestos.

3.0 CONCLUSIONS/RECOMMENDATIONS

The EPA/Washoe County District Health Department does not regulate materials which contain less than one percent asbestos. Additionally, Nevada OSHA does not currently enforce regulations pertaining to materials containing less than one percent asbestos. Therefore, C&G Environmental Consulting summarizes that no further asbestos related activities are required for the materials sampled and analyzed during this inspection. However, C&G Environmental Consulting does recommend that "wet-cuts" or other methods which minimize airborne dust emissions should be used at all times when disturbing materials which contain less than one percent asbestos.

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C&G Environmental Consulting makes no warranties or guarantees as to the accuracy or completeness of information obtained from, provided by, or compiled by others. It is possible that information exists beyond the scope of this investigation. This report is not a legal opinion. The services performed by C&G Environmental Consulting have been conducted in a manner consistent with the level of care ordinarily exercised by members of our profession currently licensed by the State of Nevada to perform this work, and practicing under similar conditions. No other warranty, expressed or implied, is made.

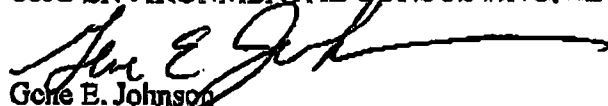
01021209 - Cal Neva Resort, 1st & 2nd Floor Hallways

Page 3

5.0 CLOSURE

We appreciated the opportunity to provide this service for the Cal Neva Resort. Should you have any questions regarding the contents of this report, or need additional information, please contact us at your convenience.

Respectfully Submitted,
C&G ENVIRONMENTAL CONSULTING, LLC.



Gene E. Johnson
Project Director
Asbestos Consultant License No. IJPM0604

APPENDIX A
Laboratory Analytical Results

Accredited by
U.S. Dept. of Commerce



NVLAP Lab Code 200104-0

POLARIZED LIGHT MICROSCOPY ANALYTICAL REPORT

EPA Method 600/R-93/116 or 600/M-82-020

Page: 1 of 3

Contact: Mr. Gene Johnson Address: C & G Environmental Consulting, P.O. Box 5298 Reno, NV 89513	Samples Indicated: 8 Reg. Samples Analyzed: 8 Split Layers Analyzed: 16 Job Site / No. Cal Neva Resort 03061809	Report No. 111919 Date Submitted: Jun-19-09 Date Reported: Jun-19-09
--	---	--

SAMPLE ID	% ASBESTOS TYPE	OTHER DATA		DESCRIPTION
		1) Non-Asbestos Fibers	2) Matrix Materials	FIELD
		3) Date/Time Collected	4) Date Analyzed	LAB
W-1. Lab ID # 867-01128-001A	None Detected	1) 1-5% Cellulose		Hall Between Room 207 & 209, Wall Texture / Drywall
		2) 95-99% Gyp, Other m.p.		
W-1. Lab ID # 867-01128-001B	None Detected	1) 1-5% Cellulose		Hall Between Room 207 & 209, Wall Texture / Drywall
		2) 95-99% Calc, Other m.p.		
W-1. Lab ID # 867-01128-001C	None Detected	1) 1-5% Cellulose		Hall Between Room 207 & 209, Wall Texture / Drywall
		2) 95-99% Calc, Other m.p.		
W-2. Lab ID # 867-01128-002A	<1% Chrysotile	1) 6-15% Fiberglass, Cellulose		Hall Corner By Room 210, Wall Texture / Joint Compound - Drywall
		2) 85-94% Gyp, Calc, Other m.p.		
W-2. Lab ID # 867-01128-002B	None Detected	1) 1-5% Cellulose		Hall Corner By Room 210, Wall Texture / Joint Compound - Drywall
		2) 93-99% Calc, Other m.p.		
W-2. Lab ID # 867-01128-002C	None Detected	1) 1-5% Cellulose		Hall Corner By Room 210, Wall Texture / Joint Compound - Drywall
		2) 95-99% Calc, Other m.p.		
W-3. Lab ID # 867-01128-003A	<1% Chrysotile	1) 5-10% Fiberglass, Cellulose		Hall Between By Room 217 & 219, Texture / Drywall
		2) 90-95% Gyp, Clay, Other m.p.		
W-3. Lab ID # 867-01128-003B	None Detected	1) 1-5% Cellulose		Hall Between By Room 217 & 219, Texture / Drywall
		2) 95-99% Calc, Other m.p.		
W-3. Lab ID # 867-01128-003C	None Detected	1) 1-5% Cellulose		Hall Between By Room 217 & 219, Texture / Drywall
		2) 95-99% Calc, Other m.p.		
W-4. Lab ID # 867-01128-004A	<1% Chrysotile	1) 1-5% Cellulose		Hall Corner By Room 216, Texture / Joint Compound - Drywall
		2) 95-99% Gyp, Other m.p.		

Detection Limit of Method is Estimated to be 1% Asbestos Using a Visual Area Estimation Technique

Lab Manager Dottie Guilbert Analyst Dottie Guilbert
 Dottie Guilbert Dottie Guilbert

ASBESTOS TEM LABORATORIES, INC. 1350 Freeport Blvd., Unit 104, Sparks, NV 89431 (775) 359-3377
 With Main Office in Berkeley, CA (510) 704-8930

**POLARIZED LIGHT MICROSCOPY
ANALYTICAL REPORT**

Accredited by
U.S. Dept. of Commerce
NVLAP
NVLAP Lab Code 200104-0

EPA Method 600/R-93/116 or 600/M-82-020

Page: 2 of 3

Contact: Mr. Gene Johnson
Address: C & G Environmental Consulting,
P.O. Box 5298
Reno, NV 89513

Samples Indicated: 8
Reg. Samples Analyzed: 8
Split Layers Analyzed: 16
Job Site / No. Cal Neva Resort
03061809

Report No. 111919
Date Submitted: Jun-19-09
Date Reported: Jun-19-09

SAMPLE ID	ASBESTOS TYPE	OTHER DATA		DESCRIPTION FIELD
		1) Non-Asbestos Fibers	2) Matrix Materials	
%	TYPE	3) Date/Time Collected	4) Date Analyzed	LAB
W-4. Lab ID # 867-01128-004B	None Detected	1) 1-5% Cellulose 2) 95-99% Calc, Other m.p.	4 Jun-19-09	Hall Corner By Room 216, Texture / Joint Compound - Drywall Texture-Off-White
W-4. Lab ID # 867-01128-004C	None Detected	1) 1-5% Cellulose 2) 95-99% Calc, Other m.p.	4 Jun-19-09	Hall Corner By Room 216, Texture / Joint Compound - Drywall Texture-White
W-5. Lab ID # 867-01128-005A	<1% Chrysotile	1) 1-5% Cellulose 2) 95-99% Gyp, Other m.p.	4 Jun-19-09	1st Floor Hall By Elevator, Texture / Joint Compound - Drywall <1% Chrysotile in Joint Compound
W-5. Lab ID # 867-01128-005B	None Detected	1) 1-5% Cellulose 2) 95-99% Calc, Other m.p.	4 Jun-19-09	1st Floor Hall By Elevator, Texture / Joint Compound - Drywall Texture-Off-White
W-5. Lab ID # 867-01128-005C	None Detected	1) 1-5% Cellulose 2) 95-99% Calc, Other m.p.	4 Jun-19-09	1st Floor Hall By Elevator, Texture / Joint Compound - Drywall Texture-White
W-6. Lab ID # 867-01128-006A	None Detected	1) 2-10% Cellulose, Fiber Glass 2) 90-98% Gyp, Other m.p.	4 Jun-19-09	Hall Between Room 104 & 106, Texture / Drywall Drywall-Pink
W-6. Lab ID # 867-01128-006B	None Detected	1) 1-5% Cellulose 2) 95-99% Calc, Other m.p.	4 Jun-19-09	Hall Between Room 104 & 106, Texture / Drywall Texture-Off-White
W-6. Lab ID # 867-01128-006C	None Detected	1) 1-5% Cellulose 2) 95-99% Calc, Other m.p.	4 Jun-19-09	Hall Between Room 104 & 106, Texture / Drywall Texture-White
W-7. Lab ID # 867-01128-007A	<1% Chrysotile	1) 1-5% Cellulose 2) 95-99% Gyp, Other m.p.	4 Jun-19-09	Hall Corner By Room 119, Texture / Joint Compound - Drywall <1% Chrysotile in Joint Compound
W-7. Lab ID # 867-01128-007B	None Detected	1) 1-5% Cellulose 2) 95-99% Calc, Other m.p.	4 Jun-19-09	Hall Corner By Room 119, Texture / Joint Compound - Drywall Texture-Off-White

Detection Limit of Method is Estimated to be 1% Asbestos Using a Visual Area Estimation Technique

Lab Manager *Dottie Guilbert*
Dottie Guilbert

Analyst *Dottie Guilbert*
Dottie Guilbert

Accredited by
U.S. Dept. of Commerce
NVLAP
NVLAP Lab Code 200104-0

POLARIZED LIGHT MICROSCOPY ANALYTICAL REPORT

EPA Method 600/R-93/116 or 600/M-82-020

Page: 3 of 3

Contact: Mr. Gene Johnson Address: C & G Environmental Consulting, P.O. Box 5298 Reno, NV 89513	Samples Indicated: 8 Reg. Samples Analyzed: 8 Split Layers Analyzed: 16 Job Site / No. Cal Neva Resort 03061809	Report No. 111919 Date Submitted: Jun-19-09 Date Reported: Jun-19-09
--	---	--

SAMPLE ID	ASBESTOS % TYPE	OTHER DATA		DESCRIPTION
		1) Non-Asbestos Fibers 2) Matrix Material 3) Date/Time Collected 4) Date Analyzed		FIELD LAB
W-7. Lab ID # 867-01128-007C	None Detected	1) 1-5% Cellulose 2) 95-99% Calc, Other m.p.	4 Jun-19-09	Hall Corner By Room 119, Texture/ Joint Compound - Drywall Texture-White
W-8. Lab ID # 867-01128-008A	None Detected	1) 2-10% Cellulose, Fiber glass 2) 90-98% Gyp, Other m.p.	4 Jun-19-09	Hall Between By Room 116 - & 118, Texture / Drywall Drywall-Pink
W-8. Lab ID # 867-01128-008B	None Detected	1) 1-5% Cellulose 2) 95-99% Calc, Other m.p.	4 Jun-19-09	Hall Between By Room 116 - & 118, Texture / Drywall Texture-Off-White
W-8. Lab ID # 867-01128-008C	None Detected	1) 1-5% Cellulose 2) 95-99% Calc, Other m.p.	4 Jun-19-09	Hall Between By Room 116 - & 118, Texture / Drywall Texture-White
Lab ID #		1) 2) 3)	4	
Lab ID #		1) 2) 3)	4	
Lab ID #		1) 2) 3)	4	
Lab ID #		1) 2) 3)	4	
Lab ID #		1) 2) 3)	4	

Detection Limit of Method is Estimated to be 1% Asbestos Using a Visual Area Estimation Technique

Lab Manager *Dottie Guilbert* Analyst *Dottie Guilbert*
 Dottie Guilbert Dottie Guilbert

ASBESTOS TEM LABORATORIES, INC. 1350 Freesport Blvd., Unit 104, Sparks, NV 89431 (775) 359-3377
 With Main Office in Berkeley, CA (510) 704-8930

APPENDIX B
Chain Of Custody Record



C & G Environmental Consulting, Inc.

June 22, 2009
C&G Environmental Project No. 01062009

Cal Neva Resort
2 Stateline Road
Crystal Bay, Nevada 89402

ATTN: Kevin Hogue

RE: **FINAL CLEARANCE AIR SAMPLING AND A VISUAL CLEARANCE ASSESSMENT: CAL NEVA RESORT - BASEMENT CLEARANCE, 2 STATELINE ROAD, CRYSTAL BAY, NEVADA**

Dear Mr. Hogue:

C&G Environmental Consulting is pleased to submit this report which presents the results of a final clearance air sampling event, and a visual clearance assessment in the basement area of the Cal Neva Resort which is located at 2 Stateline Road, in Crystal Bay, Nevada.

1.0 AIR SAMPLING AND VISUAL CLEARANCE ASSESSMENT

On June 20, 2009, an OSHA certified air monitoring technician from C&G Environmental Consulting conducted a visual clearance assessment, and final clearance air sampling in one containment area which encompassed the basement area of the hotel tower. The air sampling event was conducted following the cleaning/decontamination of the entire basement area. Five air samples were collected and analyzed during this sampling event.

The final clearance air samples were collected in general accordance with accepted OSHA standards. All samples collected were delivered by approved chain-of-custody protocol, and analyzed at Asbestos TEM Laboratories, Inc. in Sparks, Nevada, utilizing Phase Contrast Microscopy (PCM) per NIOSH 7400 Method.

2.0 AIR SAMPLING AND VISUAL CLEARANCE RESULTS

As a result of conducting this visual clearance assessment, it appeared that all areas of the basement had been thoroughly wet-wiped and HEPA vacuumed, and there were no visible signs of residual debris remaining within the work area.

Results from the air sampling event indicated that the average concentration of fibers per cubic centimeter (f/cc) in the containment area, were well below final clearance criteria of 0.01 f/cc. Upon receipt of these results, Cal Neva Resort personnel were notified that the basement area could be reoccupied without respiratory protection. A copy of the final clearance air monitoring laboratory report is provided in Appendix A, and the chain of custody report is provided in Appendix B.

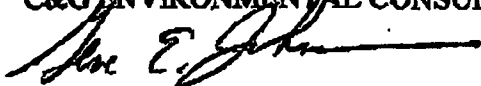
3.0 LIMITATIONS

C&G Environmental Consulting makes no warranties or guarantees as to the accuracy or completeness of information obtained from, provided by, or compiled by others (i.e. laboratories). It is possible that information exists beyond the scope of this investigation. This report is not a legal opinion. The services performed by C&G Environmental Consulting have been conducted in a manner consistent with the level of care ordinarily exercised by members of our profession currently licensed by the State of Nevada to perform this work, and practicing under similar conditions. No other warranty, expressed or implied, is made.

4.0 CLOSURE

We appreciated the opportunity to be of service to the Cal Neva Resort during this project. Should you have any questions regarding the contents of this report, or need additional information, please contact us at your convenience.

Respectfully Submitted,
C&G ENVIRONMENTAL CONSULTING, LLC



Gene E. Johnson
Project Director
Asbestos Consultant License No. IJPM0604

APPENDIX A
FINAL CLEARANCE LABORATORY ANALYTICAL
RESULTS

PHASE CONTRAST MICROSCOPY ANALYTICAL REPORT

NIOSH 7400 Method

Page: 1 of 1

Contact: Mr. Gene Johnson	Samples Submitted: 5	Report No.: 111920
Address: C & G Environmental Consulting, P.O. Box 5298 Reno, NV 89513	Samples Processed: 5	Date Submitted: Jun-21-09
	Job Site / No. Cal Neva Resort - Basement Clearance 01062009	Date Reported: Jun-22-09

SAMPLE ID	FIBERS per CC	95% UCL	FIBERS per FIELDS	FIBERS per FILTER	LOCATION / DESCRIPTION
1. Lab ID # 867-01129-001	0.0041	0.0064	$\frac{13.0}{100}$	6376	Final, Southwest Banquet Room <small>Volume(L) Pump Time(Min) Flow Rate(LPM) 1560 156 10.00</small>
2. Lab ID # 867-01129-002	< 0.0017	< 0.0032	< $\frac{5.5}{100}$	< 2452	Final, Southeast Room <small>Volume(L) Pump Time(Min) Flow Rate(LPM) 1544.4 156 9.9</small>
3. Lab ID # 867-01129-003	0.0028	0.0046	$\frac{9.0}{100}$	4414	Final, Kitchen Area <small>Volume(L) Pump Time(Min) Flow Rate(LPM) 1560 156 10.00</small>
4. Lab ID # 867-01129-004	0.0031	0.0051	$\frac{10.0}{100}$	4904	Final, East Central Room <small>Volume(L) Pump Time(Min) Flow Rate(LPM) 1560 156 10.00</small>
5. Lab ID # 867-01129-005	0.0038	0.0060	$\frac{12.0}{100}$	5885	Final, North Hall <small>Volume(L) Pump Time(Min) Flow Rate(LPM) 1552.2 156 9.950</small>
Lab ID #					<small>Volume(L) Pump Time(Min) Flow Rate(LPM)</small>
Lab ID #					<small>Volume(L) Pump Time(Min) Flow Rate(LPM)</small>
Lab ID #					<small>Volume(L) Pump Time(Min) Flow Rate(LPM)</small>
Lab ID #					<small>Volume(L) Pump Time(Min) Flow Rate(LPM)</small>
Lab ID #					<small>Volume(L) Pump Time(Min) Flow Rate(LPM)</small>

Detection Limit = 7 Fibers/MM2

Reviewer *Dottie Guillbert*
Dottie Guillbert

Analyst *Dottie Guillbert*
Dottie Guillbert

ASBESTOS TEM LABORATORIES, INC. 1350 Freeport Blvd., Sparks, NV 89431 (775) 359-3377
With Main Office in Berkeley, CA (510) 704-8930

APPENDIX B
CHAIN OF CUSTODY RECORD

C & G ENVIRONMENTAL CONSULTING, LLC

P.O. Box 5298 Reno, NV 89513 P: (775) 746-3838 Fax: (775) 787-6846

*** AIR SAMPLE SUBMISSION FORM / CHAIN-OF-CUSTODY REPORT ***

Company: C & G Environmental Consulting
 Address: P.O. Box 5298
 City-State-Zip: Reno, Nevada 89513
 Contact person: Gene Johnson
 Analysis Requested/Turaround: PCM / 4 hrs
 Job Site: CAL NEVA RESORT - Basement Clearance
 Job No: D1062009 P.O.#: _____
 Phone: (775) 746-3838 FAX: (775) 787-6846

Sample id number	Sample type	Time on	Time off	Total time(m)	Flow rate (rpm)		Volume (ft)	Locations / Description
					on	off average		
1	Final	6:16	8:52		10	10		Southwest Bedroom Cor
2	"	6:17	8:53		10	9.8	9.9	Southwest Room
3	"	6:18	8:54		10	10	10	Kitchen Area
4	"	6:19	8:55		10	10	10	East Central Room
5	"	6:20	8:56		10	9.9	9.95	North Hall

Special Instructions:

Relinquished By		Received By	
Name/Company	Signature	Name/Company	Signature
Gene E. Johnson C & G Environmental	<i>Gene E. Johnson</i>	Sue Erickson LATER	<i>Sue Erickson</i>
		Due Erickson	<i>Due Erickson</i>

Date / Time
6-21-09
2:52 pm

Date / Time
6/21/09
2:52 pm



WASHOE COUNTY HEALTH DISTRICT

AIR QUALITY MANAGEMENT DIVISION



Public Health
Prevent. Promote. Protect.

AUGUST 27, 2009

ATTACHED IS A COPY OF EACH ACKNOWLEDGEMENT FORM DOCUMENTING THAT THE AFORESIGNED HAS BEEN PROPERLY NOTIFIED OF THE DATE, TIME AND LOCATION OF THE DISTRICT BOARD OF HEALTH MEETING TO CONSIDER THE FINAL DISPOSITION OF SAID CASE.

P.O. BOX 11130 Reno, NV 89520-0027 • 401 Ryland Street, Ste. 331 • (775) 784-7200 • FAX (775) 784-7225

www.washoecounty.us/health

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WASHOE COUNTY HEALTH DISTRICT

AIR QUALITY MANAGEMENT DIVISION



Public Health
Prevent. Promote. Protect.

August 18, 2009

Mario Gallardo
Top Carpet Care
PO Box 8417
Incline Village NV 89452

RE: Case No. 1044, NOV Citation No. 4700

I hereby acknowledge receiving a packet of the information to be presented to the Washoe County District Board of Health regarding Case No. 1044, at its meeting to be held on Thursday, August 27, 2009 at 1:00 p.m., at 1001 East Ninth Street, Reno, Nevada, Building B, Auditorium B. I understand that at this meeting the District Board of Health will take the appropriate administrative action against Case No. 1044.

Appellant or Representative

Delivered by:

"MAILED AUGUST 20 - CERTIFIED"

Washoe County Health District
Air Quality Management Division Staff



WASHOE COUNTY HEALTH DISTRICT

AIR QUALITY MANAGEMENT DIVISION



PublicHealth
Prevent. Promote. Protect.

August 18, 2009

Robert J. Marcil
Cal Neva Resort Spa Casino
2 Stateline
Crystal Bay, NV 89402

Dear Mr. Marcil:

Enclosed please find a copy of the packet of information regarding Case No. 1043. The case will be presented to the Washoe County District Board of Health on Thursday, August 27, 2009, at 1:00 p.m., at 1001 East Ninth Street, Reno, Nevada, Building B, Auditorium B.

Please sign the attached acknowledgement letter as soon as possible and return it to:

**Washoe County Health District
Air Quality Management Division
Attention Noel Bonderson
401 Ryland Street, Suite 331
Reno NV 89502-1643**

You may also FAX the signed document to (775) 784-7225. If you have any questions or comments, please contact Noel Bonderson, Air Quality Management Division, at (775) 784-7205.

Sincerely,

A handwritten signature in cursive script that reads "Mary Ames".

Mary Ames
Washoe County Health District
Air Quality Management Division

Enclosure



DISTRICT HEALTH DEPARTMENT

STAFF REPORT BOARD MEETING DATE: 8/27/09

DATE: August 14, 2009

TO: District Board of Health

FROM: Patsy Buxton, Fiscal Compliance Officer, Washoe County Health District ^{PB}
775-328-2418, pbuxton@washoecounty.us

THROUGH: Eileen Coulombe, Administrative Health Services Officer ^{EC}

SUBJECT: Retroactive approval of District Health Officer acceptance of Subgrant Amendment #1 from the Nevada State Health Division, Bureau of Health Planning and Statistics for the Public Health Preparedness - Assistant Secretary for Preparedness & Response (ASPR) Grant program that extends the term of the grant period for one year, and authorizes expenditures in the amount of \$66,939 through August 8, 2010.

SUMMARY

The Washoe County District Board of Health must approve and execute, or direct the Health Officer to execute, contracts in excess of \$50,000, Interlocal Agreements and amendments to the adopted budget.

The Washoe County Health District received a Subgrant Amendment from the Nevada State Health Division that extends the term of the grant period for one year, and authorizes expenditures in the amount of \$66,939 through August 8, 2010. A copy of the Subgrant Amendment is attached.

District Board of Health Priority supported by this item:

Acceptance of this amendment supports the District Board of Health's strategic priority: *Assure that the public health system operates at the highest level of integrity during an all hazards event.*

It also supports the Epidemiology and Public Health Preparedness (EPHP) Division's mission to strengthen the capacity of public health infrastructure to detect, assess, and respond decisively to control the public health consequences of bioterrorism events or any public health emergency.

AGENDA ITEM # 7.C.1.

1001 EAST NINTH STREET / P.O. BOX 11130, RENO, NEVADA 89520 (775) 328-2400 FAX (775) 328-2279

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PREVIOUS ACTION

The District Board of Health accepted last years base ASPR Notice of Subgrant Award for the period August 9, 2008 through August 8, 2009 in the amount of \$446,266 on September 25, 2008.

BACKGROUND

The Subgrant Amendment was received on July 30, 2009. Due to the timing requirements for acceptance, the District Health Officer signed the Subgrant Amendment on July 30, 2009 and the Subgrant Amendment is being presented for District Board of Health retroactive approval.

The Washoe County Health District requested a No Cost Extension in the amount of \$66,939 (the anticipated amount of unobligated funds at the end of the grant period). The No Cost Extension will fund travel, contractual and other operating expenditures.

FISCAL IMPACT

The period for this grant, 8/9/08 through 8/8/10, crosses county fiscal years. Should the Board retroactively approve the acceptance of the Subgrant Amendment, no FY 10 budget amendments are necessary as there is sufficient budget authority to carry through June 30, 2010.

RECOMMENDATION

Staff recommends that the Washoe County District Board of Health retroactively approve the District Health Officer's acceptance of Subgrant Amendment #1 from the Nevada State Health Division, Bureau of Health Planning and Statistics for the Public Health Preparedness - Assistant Secretary for Preparedness & Response (ASPR) Grant program that extends the term of the grant period for one year, and authorizes expenditures in the amount of \$66,939 through August 8, 2010.

POSSIBLE MOTION

Move to retroactively approve the District Health Officer's acceptance of Subgrant Amendment #1 from the Nevada State Health Division, Bureau of Health Planning and Statistics for the Public Health Preparedness - Assistant Secretary for Preparedness & Response (ASPR) Grant program that extends the term of the grant period for one year, and authorizes expenditures in the amount of \$66,939 through August 8, 2010.

Nevada Department of Health and Human Services
HEALTH DIVISION
 (hereinafter referred to as the DIVISION)

HD Amendment #: 09085-1
 HD Contract #: _____
 Program #: ASPR05-08
 Budget Account #: 3218
 Category #: 23
 GL #: 8516

SUBGRANT AMENDMENT #1

Program Name: Public Health Preparedness Bureau of Health Planning & Statistics Nevada State Health Division		Subgrantee Name: Washoe County Health District (WCHD)	
Address: 4150 Technology Way, Suite 200 Carson City, Nevada 89706-2009		Address: 1001 East Ninth Street Reno, NV 89520	
Original Subgrant Period: <i>PH</i> August 9, 2008 through August 8, 2010 ²⁰⁰⁹		Subgrantee EIN#: 88-6000138	
Source of Funds: Assistant Secretary for Preparedness & Response		% of Funds: 100%	CFDA#: 93.889
		Federal Grant #: 1 U3REP070018-01-00	

Amendment 1: Based on the Subgrantee's estimated unobligated balance and approved FY08 No Cost Extension by ASPR, Subgrantee has authorization to expend \$66,939 of approved budget through August 8, *and extend the term of the Subgrant until August 8, 2010.*

By signing this Amendment, the Authorized Subgrantee Official or their designee, Program Manager, Bureau Chief, and Health Division Administrator acknowledge the above as the new standard of practice for the above referenced Subgrant. Further, the undersigned understand this amendment does not alter, in any substantial way, the non-referenced contents of the Original Subgrant Award and all of its Attachments.

Authorized Sub-grantee Official Title	Signature	Date
Christine N. Smith Health Program Manager, PHP <i>PH</i>	<i>Christine N. Smith</i>	<i>7-20-09</i>
Kyle Devine, MSW Health Program Manager II, PHP	<i>Kyle Devine</i>	<i>7/21/09</i>
Richard Whitley, MS Administrator, Health Division <i>men</i>	<i>Richard Whitley</i>	

OK

**HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION B**

the budget detail and justification approved in the ASPR FY08 No Cost Extension is as follows:

1. Travel	\$	10,000	Out of State Travel
2. Contractual/ Consultant	\$	55,500	Radio Communications Consultant; Healthcare Systems Liaison; Part-time Clerical Support; MRC Volunteer Training
3 Other	\$	1,439	Training room rental and supplies
Total Cost	\$	66,939	

HEALTH DIVISION

(hereinafter referred to as the DIVISION)

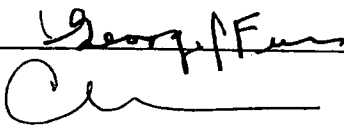
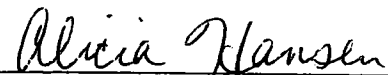
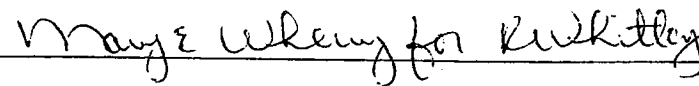
Program #: ASPR05-08

Budget Account #: 3218

Category #: 23

GL #: 8516

NOTICE OF SUBGRANT AWARD

Program Name: Public Health Preparedness Health Planning & Emergency Response Nevada State Health Division		Subgrantee Name: Washoe County Health District (WCHD)	
Address: 4150 Technology Way, Suite #200 Carson City, NV 89706-2009		Address: 1001 East Ninth Street Reno, NV 89520	
Subgrant Period: August 9, 2008 through August 8, 2009		Subgrantee EIN#:	88-6000138
		Subgrantee Vendor#:	T40283400Q
Reason for Award: FY2008 ASPR Hospital Preparedness Program			
County(ies) to be served: () Statewide (X) Specific county or counties: Washoe County			
Approved Budget Categories:			
1. Personnel	\$	162,816	
2. Travel	\$	17,000	
Supplies	\$	10,424	
Equipment	\$	88,715	
5. Contractual/Consultant	\$	137,914	
6. Other	\$	7,580	
7. Indirect	\$	21,817	
Total Cost	\$	446,266	
Disbursement of funds will be as follows: Payment will be made upon receipt and acceptance of an invoice and supporting documentation specifically requesting reimbursement for actual expenditures <i>specific to this subgrant</i> . Total reimbursement will not exceed \$446,266 during the subgrant period.			
Source of Funds:	% of Funds:	CFDA#:	Federal Grant #:
1. ASPR Hospital Preparedness Program	100%	93.889	1 U3REP080068-01-00
Terms and Conditions In accepting these grant funds, it is understood that: 1. Expenditures must comply with appropriate state and/or federal regulations. 2. This award is subject to the availability of appropriate funds. 3. Recipient of these funds agrees to stipulations listed in Sections A, B, and C of this subgrant award.			
Authorized Sub-grantee Official WCHD	Signature		Date
Christine N. Smith Health Program Manager, PHP			10/27/08
e Devine, MSW Health Program Manager II, PHP			9/8/08
Richard Whitley, MS Administrator, Health Division			11.17.08

AM

HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION A
Assurances

As a condition of receiving subgranted funds from the Nevada State Health Division, the Subgrantee agrees to the following conditions:

1. Subgrantee agrees grant funds may not be used for other than the awarded purpose. In the event Subgrantee expenditures do not comply with this condition, that portion not in compliance must be refunded to the Health Division.
2. Subgrantee agrees to submit reimbursement requests for only expenditures approved in the spending plan. Any additional expenditures beyond what is allowable based on approved categorical budget amounts, without prior written approval by the Health Division, may result in denial of reimbursement.
3. Approval of subgrant budget by the Health Division constitutes prior approval for the expenditure of funds for specified purposes included in this budget. Unless otherwise stated in the Scope of Work the transfer of funds between budgeted categories without written prior approval from the Health Division is not allowed under the terms of this subgrant. Requests to revise approved budgeted amounts must be made in writing and provide sufficient narrative detail to determine justification.
4. Recipients of subgrants are required to maintain subgrant accounting records, identifiable by subgrant number. Such records shall be maintained in accordance with the following:
 - a. Records may be destroyed not less than three years (unless otherwise stipulated) after the final report has been submitted if written approval has been requested and received from the Administrative Services Officer of the Health Division. Records may be destroyed by the Subgrantee five (5) calendar years after the final financial and narrative reports have been submitted to the Health Division.
 - b. In all cases an overriding requirement exists to retain records until resolution of any audit questions relating to individual subgrants.

Subgrant accounting records are considered to be all records relating to the expenditure and reimbursement of funds awarded under this Subgrant Award. Records required for retention include all accounting records and related original and supporting documents that substantiate costs charged to the subgrant activity.

5. Subgrantee agrees to disclose any existing or potential conflicts of interest relative to the performance of services resulting from this subgrant award. The Health Division reserves the right to disqualify any grantee on the grounds of actual or apparent conflict of interest. Any attempt to intentionally or unintentionally conceal or obfuscate a conflict of interest will automatically result in the disqualification of funding.
6. Subgrantee agrees to comply with the requirements of the Civil Rights Act of 1964, as amended, and the Rehabilitation Act of 1973, P.L. 93-112, as amended, and any relevant program-specific regulations, and shall not discriminate against any employee or offeror for employment because of race, national origin, creed, color, sex, religion, age, disability or handicap condition (including AIDS and AIDS-related conditions).
7. Subgrantee agrees to comply with the Americans with Disabilities Act of 1990 (P.L. 101-136), 42 U.S.C. 12101, as amended, and regulations adopted thereunder contained in 28 CFR 26.101-36.999 inclusive, and any relevant program-specific regulations.
8. Subgrantee agrees to comply with the requirements of the Health Insurance Portability and Accountability Act of 1996, 45 C.F.R. 160, 162 and 164, as amended. If the subgrant award includes functions or

activities that involve the use or disclosure of Protected Health Information, the Subgrantee agrees to enter into a Business Associate Agreement with the Health Division, as required by 45 C.F.R 164.504 (e).

9. Subgrantee certifies, by signing this subgrant, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency. This certification is made pursuant to regulations implementing Executive Order 12549, Debarment and Suspension, 28 C.F.R. pt. 67 § 67.510, as published as pt. VII of May 26, 1988, Federal Register (pp.19150-19211). This provision shall be required of every Subgrantee receiving any payment in whole or in part from federal funds.
10. Subgrantee agrees, whether expressly prohibited by federal, state, or local law, or otherwise, that no funding associated with this subgrant will be used for any purpose associated with or related to lobbying or influencing or attempting to lobby or influence for any purpose the following:
 - a. any federal, state, county or local agency, legislature, commission, council, or board;
 - b. any federal, state, county or local legislator, commission member, council member, board member, or other elected official; or
 - c. any officer or employee of any federal, state, county or local agency, legislature, commission, council, or board.
11. Health Division subgrants are subject to inspection and audit by representatives of the Health Division, Nevada Department of Health and Human Services, the State Department of Administration, the Audit Division of the Legislative Counsel Bureau or other appropriate state or federal agencies to
 - a. verify financial transactions and determine whether funds were used in accordance with applicable laws, regulations and procedures;
 - b. ascertain whether policies, plans and procedures are being followed;
 - c. provide management with objective and systematic appraisals of financial and administrative controls, including information as to whether operations are carried out effectively, efficiently and economically; and
 - d. determine reliability of financial aspects of the conduct of the project.

Any audit of Subgrantee's expenditures will be performed in accordance with Generally Accepted Government Auditing Standards to determine there is proper accounting for and use of subgrant funds. It is the policy of the Health Division (as well as a federal requirement as specified in the Office of Management and Budget (OMB) Circular A-133 [Revised June 27th, 2003]) that each grantee annually expending \$500,000 or more in federal funds have an annual audit prepared by an independent auditor in accordance with the terms and requirements of the appropriate circular. A COPY OF THE FINAL AUDIT REPORT MUST BE SENT TO THE NEVADA STATE HEALTH DIVISION, ATTN: ADMINISTRATIVE SERVICES OFFICER IV, 4150 TECHNOLOGY WAY, SUITE 300, CARSON CITY, NEVADA 89706-2009, within nine (9) months of the close of the Subgrantee's fiscal year.

**HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION B**

Description of services, scope of work, deliverables and reimbursement

Washoe County Health District (WCHD), hereinafter referred to as Subgrantee, agrees to provide the following services and reports according to the identified timeframes:

- Create a work plan to be used as the Final Scope of Work for this Subgrant with the guidance from the Nevada State Health Division, Public Health Preparedness. This work plan will include specific measurable objectives, activities to be conducted by the WCHD to accomplish the objectives, timelines, and tracking measures to ensure the successful achievement of federal grant objectives.
 - The Nevada State Health Division, Public Health Preparedness will provide a draft plan containing measureable grant objectives.
 - WCHD will customize the measureable objectives and activities, provide a timeline for completion of the activities and tracking measures.
 - This customized work plan will be submitted to the Nevada State Health Division no later than September 30, 2008 for inclusion in Section B of this Subgrant and will be considered the Final Scope of Work for this Subgrant.
- Submit written Progress Reports to the Health Division electronically on or before:
 - March 4, 2009 Mid-Year Progress Report (For the period of 8/9/08-2/28/09)
 - November 4, 2009 End-of-Year Progress Report (For the period of 3/1/09-8/8/09)
- Additional information may be requested by the Health Division , as needed, due to evolving state and federal reporting requirements.
- Identify the source of funding on all printed documents purchased or produced within the scope of this subgrant, using a statement similar to: "This publication (journal, article, etc.) was supported by the Nevada State Health Division through Grant Number 1 U3REP080068-01-00 from Assistant Secretary for Preparedness and Response (ASPR). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Nevada State Health Division nor the Assistant Secretary for Preparedness and Response (ASPR)."

Any activities performed under this subgrant shall acknowledge the funding was provided through the State Health Division by Grant Number 1 U3REP080068-01-00 from the Assistant Secretary for Preparedness and Response (ASPR).

(Continued on next page)

Subgrantee agrees to adhere to the following budget:

1. Personnel	\$ 162,816	\$ 66,672 \$ 50,715 \$ 45,429	MRC Program Coordinator Healthcare Systems Liaison (HSL) Fringe	100% 100% 38.7%
2. Travel	\$ 17,000		In-State and Out-of-State Travel	
3. Supplies	\$ 10,424		For MRC; program supplies, Subscription to Disaster Medicine Journal, Room Rental and Training Supplies, Storage Cabinet, General office, operating, & printer supplies for MRC Coordinator and HSL, MRC Volunteer - recruitment/retention supplies, identification and deployment supplies.	
4. Equipment	\$ 88,715		Includes: WebEOC/EMResource software interface, Computer system, Office furniture, 800 MHz radio, Mobile Radio, Base Radio, Radio Smart Charger, Pelican Travel Cases for Mass Fatality Mgmt Supplies, 18ft. Refrigerated Trailer & Racks, Portable Lighting Unit, Portable Autopsy/Processing Table, Inflatable Shelter.	
5. Contractual Consultant	\$ 137,914		Includes: Emergency Communications Specialist, NIMS Training, MRC Media Buy, MRC Volunteer Training, Clerical Assistant P/T.	
6. Other	\$ 7,580		Includes: Postage, Promotional Materials, Website Hosting, Long Distance/Conference Call Charges, Cell Phone Service, Telephone Service, Copy Machine Costs, Printing/Reproduction, Pandemic Influenza preparedness educational material for at-risk populations.	
7. Indirect	\$ 21,817		13.4% Personnel, fringe and contractual salaries	
Total Cost	\$ 446,266			

- Health Division policy is to allow no more than 10% flexibility (no more than a cumulative amount of \$44,626), within approved Scope of Work, unless otherwise authorized. Upon reaching the 10% funding adjustment threshold, additional adjustments between categories cannot be made without prior written approval from the Health Division. Changes to the Scope of Work cannot be made without prior approval from the Health Division and the federal funding agency.
- Equipment purchased with these funds belongs to the federal program from which this funding was appropriated and shall be returned to the program upon termination of this agreement.

- Travel expenses, per diem, and other related expenses must conform to the procedures and rates allowed for State officers and employees. It is the Policy of the Board of Examiners to restrict contractors/subgrantees to the same rates and procedures allowed State Employees. The State of Nevada reimburses at rates comparable to the rates established by the US General Services Administration, with some exceptions (State Administrative Manual 0200.0 and 0320.0).

Subgrantee agrees to request reimbursement according to the schedule specified below for the actual expenses incurred related to the Scope of Work during the subgrant period.

- Requests for Reimbursement will be accompanied by supporting documentation, including a line item description of expenses incurred, summarizing the total amount and type of expenditures made during the reporting period.
- Requests for Reimbursements will be submitted monthly.
- Submit monthly Requests for Reimbursement no later than 15 days following the end of the month; submit a Request for Reimbursement for activities completed through the month of June no later than July 15, 2009.
- Additional expenditure detail will be provided upon request from the Division.
- The maximum amount of funding available through this subgrant is \$446,266.

Additionally, the subgrantee agrees to provide:

- Provide a copy of all plans developed and all After Action Reports (AAR) for exercises within 45 days of completion.
- Provide a complete financial accounting of all expenditures to the Health Division within 30 days of the CLOSE OF THE SUBGRANT PERIOD. Any un-obligated funds shall be returned to the Health Division at that time, or if not already requested, shall be deducted from the final award.

The Nevada State Health Division agrees:

- Review and approve activities through programmatic and fiscal reports and conduct site visits at the Subgrantee's physical site as necessary.
- Provide reimbursements, not to exceed a total of \$446,266 for the entire subgrant period.
- Provide technical assistance, upon request from the Subgrantee.
- Reserve the right to hold reimbursement under this subgrant until any delinquent forms and reports are submitted and accepted by the Health Division.

Both parties agree:

- Based on the bi-annual narrative progress and financial reporting forms, as well as site visit findings, if it appears to the Health Division that activities will not be completed in time specifically designated in the Scope of Work, or project objectives have been met at a lesser cost than originally budgeted, the Health Division may reduce the amount of this subgrant award and reallocate funding to other preparedness priorities within the state. This includes but is not limited to:
 - Reallocating funds between the subgrantee's categories, and

- o Reallocating funds to another subgrantee or funding recipient to address other identified PHP priorities, by removing it from this agreement through a subgrant amendment,

All reports of expenditures and requests for reimbursement processed by the Health Division are SUBJECT TO AUDIT.

This subgrant agreement may be TERMINATED by either party prior to the date set forth on the Notice of Subgrant Award, provided the termination shall be not be effective until 30 days after a party has served written notice upon the other party. This agreement may be terminated by mutual consent of both parties or unilaterally by either party without cause. The parties expressly agree that this Agreement shall be terminated immediately if for any reason the Health Division, state, and/or federal funding ability to satisfy this Agreement is withdrawn, limited, or impaired.

**HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION C
Financial Reporting Requirements**

- ☞ A Request for Reimbursement is due on a **monthly** basis, based on the terms of the subgrant agreement, no later than the 15th of the month.
- ☞ Reimbursement is based on **actual** expenditures incurred during the period being reported.
- ☞ Payment will not be processed without all reporting being current.
- ☞ Reimbursement may only be claimed for expenditures approved within the Notice of Subgrant Award.
- ☞ **PLEASE REPORT IN DOLLARS and CENTS (No Rounding)**

Provide the following information on the top portion of the form: Subgrantee name and address where the check is to be sent, Health Division (subgrant) number, Bureau program number, draw number, employer I.D. number (EIN) and Vendor number.

An explanation of the form is provided below.

A. Approved Budget: List the approved budget amounts in this column by category.

B. Total Prior Requests: List the **total** expenditures for all previous reimbursement periods in this column, for each category, by entering the numbers found on Lines 1-8, Column D on the **previous** Request for Reimbursement/Advance Form. If this is the first request for the subgrant period, the amount in this column equals zero.

C. Current Request: List the **current** expenditures requested at this time for reimbursement in this column, for each category.

D. Year to Date Total: Add Column B and Column C for each category.

E. Budget Balance: Subtract Column D from Column A for each category.

F. Percent Expended: Divide Column D by Column A for each category and total. Monitor this column; it will help to determine if/when an amendment is necessary. Amendments **MUST** be completed (including all approving signatures) 30 days **prior** to the end of the subgrant period.

☛ **An Expenditure Report/Backup that summarizes, by expenditure GL, the amounts being claimed in column 'C' is required.**

Nevada Department of Health and Human Services

Health Division # 09085
 Bureau Program # 3218
 GL # 23
 Draw #: 8516

HEALTH DIVISION

REQUEST FOR REIMBURSEMENT / ADVANCE

Program Name: Public Health Preparedness Health Planning & Emergency Response	Subgrantee Name: Washoe County Health District (WCHD)
Address: 4150 Technology Way, Suite 200 Carson City, NV 89706	Address: 1001 East Ninth Street Reno, NV 89520
Subgrant Period: August 9, 2008 through August 8, 2009	Subgrantee EIN#: 88-6000138 Subgrantee Vendor#: T40283400Q

FINANCIAL REPORT AND REQUEST FOR FUNDS

(report in dollars and cents; must be accompanied by expenditure report/back-up)

Month(s): _____ **Calendar Year:** _____

Approved Budget Category	A Approved Budget	B Total Prior Requests	C Current Request	D Year To Date Total	E Budget Balance	F Percent Expended
1 Personnel	\$ 162,816.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 162,816.00	0%
2 Travel	\$ 17,000.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 17,000.00	0%
3 Supplies	\$ 10,424.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 10,424.00	0%
4 Equipment	\$ 88,715.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 88,715.00	0%
5 Contract/Consultant	\$ 137,914.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 137,914.00	0%
6 Other	\$ 7,580.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 7,580.00	0%
7 Indirect	\$ 21,817.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 21,817.00	0%
8 Total	\$ 446,266.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 446,266.00	0%

This report is true and correct to the best of my knowledge.

Authorized Signature _____ Title _____ Date _____

Reminder: Request for Reimbursement cannot be processed without an expenditure report/back-up.
 Reimbursement is only allowed for items contained within Subgrant Award documents. If applicable, travel claims must accompany report.

FOR HEALTH DIVISION USE ONLY

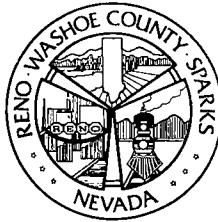
Program contact necessary? Yes No Contact Person: _____

Reason for contact: _____

Fiscal review/approval date: _____ Signed: _____

cope of Work review/approval date: _____ Signed: _____

ASO or Bureau Chief (as required): _____ Date: _____



DISTRICT HEALTH DEPARTMENT

STAFF REPORT
BOARD MEETING DATE: 8/27/09

DATE: August 14, 2009

TO: District Board of Health

FROM: Patsy Buxton, Fiscal Compliance Officer, Washoe County Health District *PB*
 775-328-2418, pbuxton@washoecounty.us

THROUGH: Eileen Coulombe, Administrative Health Services Officer *EC*

SUBJECT: Retroactive approval of District Health Officer acceptance of Subgrant Amendment #2 from the Nevada State Health Division, Bureau of Health Planning & Statistics for the period August 10, 2008 through August 9, 2009 in the total amount of \$1,013,550 in support of the Public Health Preparedness (PHP) Program; approval of amendments totaling an increase of \$4,326 in revenue and expense to the PHP Base Grant Program (internal order # 10713) FY 10 Budget; approval of amendments totaling an increase of \$750 in revenue and expense to the PHP Pan Flu Carry Forward Grant Program (internal order #10738) FY10 Budget

SUMMARY

The Washoe County District Board of Health must approve and execute, or direct the Health Officer to execute, contracts in excess of \$50,000, Interlocal Agreements and amendments to the adopted budget.

The Washoe County Health District received Subgrant Amendment #2 from the Nevada State Health Division for the period August 10, 2008 through August 9, 2009 in the total amount of \$1,013,550 in support of the Public Health Preparedness Program. A copy of Subgrant Amendment #2 is attached.

District Board of Health Priority supported by this item:
 Acceptance of this amendment supports the District Board of Health's strategic priority: *Assure that the public health system operates at the highest level of integrity during an all hazards event.*

It also supports the Epidemiology and Public Health Preparedness (EPHP) Division's mission to strengthen the capacity of public health infrastructure to detect, assess, and respond decisively to control the public health consequences of bioterrorism events or any public health emergency.

AGENDA ITEM # 7.C.2.

PREVIOUS ACTION

The District Board of Health accepted Subgrant Amendment #1 for the period August 10, 2008 through August 9, 2009 in the amount of \$1,008,474 on May 28, 2009.

BACKGROUND

The Subgrant Amendment was received on August 5, 2009. Due to the timing requirements for acceptance, the District Health Officer signed the Subgrant Amendment on August 5, 2009 and the Subgrant Amendment is being presented for District Board of Health retroactive approval.

The amendment is to reimburse Washoe County for salaries expended when staff participated in the Mobile Support Unit (MSU) in response to the deployment of antivirals and personal protective equipment through the Strategic National Stockpile (SNS) due to H1N1 this Spring. The amendment also provides for an additional \$750 in Pan Flu Carry Forward funds that will be used for operating supplies.

This budget amendment will also require Board of County Commissioners approval.

FISCAL IMPACT

A budget amendment in the total amount of \$5,076 is necessary to align the budget with the Amended Notice of Subgrant Award.

Should the Board approve these budget amendments, the adopted FY 10 budget will be **increased by \$5,076 in revenue and expenses** in the following accounts:

<u>Account Number</u>	<u>Description</u>	<u>Amount of Increase/(Decrease)</u>
2002-IO-10737 -431100	Federal Revenue	\$4,326
2002-IO-10737 -701300	Overtime	\$4,326
	Total Expenditures	\$4,326
2002-IO-10738 -431100	Federal Revenue	\$750
2002-IO-10738 -710300	Operating Supplies	\$750
	Total Expenditures	\$750

RECOMMENDATION

Staff recommends that the Washoe County District Board of Health retroactively approve the District Health Officer's acceptance of Subgrant Amendment #2 from the Nevada State Health Division, Bureau of Health Planning & Statistics for the period August 10, 2008 through August 9, 2009 in the total amount of \$1,013,550 in support of the Public Health Preparedness (PHP) Program; approve amendments totaling an increase of

District Board of Health meeting of August 27, 2009
Page 3

\$4,326 in revenue and expense to the PHP Base Grant Program (internal order # 10713) FY 10 Budget; approval of amendments totaling an increase of \$750 in revenue and expense to the PHP Pan Flu Carry Forward Grant Program (internal order #10738) FY10 Budget

POSSIBLE MOTION

Move to retroactively approve the District Health Officer's acceptance of Subgrant Amendment #2 from the Nevada State Health Division, Bureau of Health Planning & Statistics for the period August 10, 2008 through August 9, 2009 in the total amount of \$1,013,550 in support of the Public Health Preparedness (PHP) Program; approval of amendments totaling an increase of \$4,326 in revenue and expense to the PHP Base Grant Program (internal order # 10713) FY 10 Budget; approve amendments totaling an increase of \$750 in revenue and expense to the PHP Pan Flu Carry Forward Grant Program (internal order #10738) FY10 Budget

Nevada Department of Health and Human Services
HEALTH DIVISION
 (hereinafter referred to as the DIVISION)

HD Amendment #: 09094-2
 HD Contract #: _____
 Program #: CDC07-08
 Budget Account #: 3218
 Category #: 22
 GL #: 8516

SUBGRANT AMENDMENT #2

Program Name: Public Health Preparedness Bureau of Health Planning & Statistics Nevada State Health Division	Subgrantee Name: Washoe County Health District (WCHD)
Address: 4150 Technology Way, Suite 200 Carson City, Nevada 89706-2009	Address: 1001 East Ninth Street Reno, NV 89520
Original Subgrant Period: August 10, 2008 through August 9, 2009	Subgrantee EIN#: 88-6000138 Subgrantee Vendor#: T40283400Q
Source of Funds: Centers for Disease Control & Prevention	% of Funds: 100% CFDA#: 93.069 Federal Grant #: 5U90TP916964-09

Amendment #2: Revise budget to reflect an increase in the amount of \$5,076 (\$4,326 to reimburse Washoe County Health District (WCHD) for salaries expended during the deployment of the SNS in support of the Mobile Support Unit (MSU); and to increase, as approved by the CDC H1N1 redirect request; \$750 in Pan Flu Carry Forward (initial 30%).

Current	Amount	Change	Revised	Amount
1 Personnel	\$ 743,721	+ 4,326	1 Personnel	\$ 748,047
2 Travel	\$ 13,531		2 Travel	\$ 13,531
3 Supplies	\$ 12,925		3 Supplies	\$ 12,925
4 Equipment	\$ 129,583		4 Equipment	\$ 129,583
5 Contractual/Consultant	\$ 82,344		5 Contractual/Consultant	\$ 82,344
6 Other	\$ 26,370	+ 750	6 Other	\$ 27,120
7 Indirect	\$ 0		7 Indirect	\$ 0
Total Cost	\$ 1,008,474	+ 5,076	Total Cost	\$ 1,013,550

By signing this Amendment, the Authorized Subgrantee Official or their designee, Program Manager, Bureau Chief, and Health Division Administrator acknowledge the above as the new standard of practice for the above referenced Subgrant. Further, the undersigned understand this amendment does not alter, in any substantial way, the non-referenced contents of the Original Subgrant Award and all of its Attachments.

	Signature	Date
Authorized Sub-grantee Official Title	<i>Handwritten Signature</i>	8-5-2009
Jennifer Dunaway Health Program Manager, PHP	<i>Handwritten Signature</i> for	8/3/09
Kyle Devine, MSW Health Program Manager II, PHP	<i>Handwritten Signature</i> for Kyle Devine	8/4/09
Richard Whitley, MS Administrator, Health Division	<i>Handwritten Signature</i>	

**HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION B**

The following revised budget detail and justification is based on the approved CDC H1N1 Redirect Request to meet grant objectives and deliverables:

CDC Base Carry Forward Budget

1. Personnel	\$	4,326	Reimburse Washoe County Health District for salaries from personnel deployed with the MSU in response to the H1N1 pandemic
Total	\$	4,326	

Nevada Department of Health and Human Services

HEALTH DIVISION

(hereinafter referred to as the DIVISION)

HD Amendment #: 09094-1

HD Contract #: _____

Program #: CDC07-08

Budget Account #: 3218

Category #: 22

GL #: 8516

SUBGRANT AMENDMENT #1

Program Name: Public Health Preparedness Bureau of Health Planning & Statistics Nevada State Health Division		Subgrantee Name: Washoe County Health District (WCHD)	
Address: 4150 Technology Way, Suite 200 Carson City, Nevada 89706-2009		Address: 1001 East Ninth Street Reno, NV 89520	
Original Subgrant Period: August 10, 2008 through August 9, 2009		Subgrantee EIN#: 88-6000138	Subgrantee Vendor#: T40283400Q
Source of Funds: Centers for Disease Control & Prevention	% of Funds: 100%	CFDA#: 93.069	Federal Grant #: 5U90TP916964-09

Amendment #1: Revise budget to reflect the increase in CDC Carry Forward funds totaling \$215,342 (\$100,862 Base; \$114,480 Pan Flu) as requested by the Washoe County Health District in order to meet grant objectives and deliverables.

Current	Amount	Change	Revised	Amount
1 Personnel \$	743,721		1 Personnel \$	743,721
2 Travel \$	12,000 +	1,531	2 Travel \$	13,531
3 Supplies \$	7,800 +	5,125	3 Supplies \$	12,925
4 Equipment \$	0 +	129,583	4 Equipment \$	129,583
5 Contractual/Consultant \$	11,091 +	71,253	5 Contractual/Consultant \$	82,344
6 Other \$	18,520 +	7,850	6 Other \$	26,370
7 Indirect \$	0		7 Indirect \$	0
Total Cost \$	793,132 +	215,342	Total Cost \$	1,008,474

By signing this Amendment, the Authorized Subgrantee Official or their designee, Program Manager, Bureau Chief, and Health Division Administrator acknowledge the above as the new standard of practice for the above referenced Subgrant. Further, the undersigned understand this amendment does not alter, in any substantial way, the non-referenced contents of the Original Subgrant Award and all of its Attachments.

Authorized Sub-grantee Official Title	Signature	Date
Christine N. Smith Health Program Manager, PHP		5/28/09
Kyle Devine, MSW Health Program Manager II, PHP		5/21/09
Hard Whitley, MS Administrator, Health Division		6-9-09

**HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION B**

The following revised budget detail and justification is based on the approved CDC Carry Forward Request to meet grant objectives and deliverables:

CDC Base Carry Forward Budget

1. Travel	\$	1,531	In-State and Out of State Travel- in accordance with federal GSA Rates
2. Supplies	\$	3,500	WCHD Emergency Management Guides
3. Equipment	\$	68,981	POD Staff Vests; POD Lane Signage Kit; POD Lane "Vaccination" Signage Kit; POD Lane "Vaccination" Signage Kit; POD Lane Signage Kit PVC Mounts; Two-Door Storage Cabinet 7' high; 5'high file/storage cabinet combo unit; Storage Bin Units; Wall and Shelf Track; LED Lights; Desk Chairs for PHP Manager and MRC Coordinator; 15" Televisions with DVD Recorders for PHP PIO and DOC; Ten (10) Field Disaster Kits; Vaccine Refrigeration Unit; Modular Furniture for Epidemiology staff; CRBN Cap 2 Conversion Kits for Sentinel HP PAPRs; Paraslydes; Shipping for Paraslydes
4. Consultant/ Contractual	\$	22,000	Media Training; Temporary Assistant Services for Public Information Officer Project
5. Other	\$	4,850	Relocation of C-Band Satellite Receiver; Relocation of Audio-Visual Cable in Epidemiology & Public Health Preparedness (EPHP); Pre-paid Service and Installation of Cable & Satellite Televisions for DOC
Total Base CF	\$	100,862	

CDC Pan Flu Carry Forward Budget

1. Supplies	\$	1,625	POD Operating Supplies
3. Equipment	\$	60,602	16' POD Cargo Trailer for storing POD signage, equipment & supplies; Solar-powered roof fans for POD trailers; Traffic Candlesticks/Cones 42" for PODs; Collapsible Traffic Candlesticks/Cones 42"; POD Cable protectors; Adjustable hand cart for POD materials; Portable 22'x42' Hospital Shelter; 17.5 kw generator for remote power for portable hospital shelter air pump and air conditioning/heating unit; 16' Cargo Trailer to store and protect hospital shelter
4. Consultant/ Contractual	\$	49,253	Pandemic Influenza Plan Writing Consultant; Post Flu Prevention Marketing Research
5. Other	\$	3,000	Pan Flu Communication Production
Total Pan Flu CF	\$	114,480	

Nevada Department of Health and Human Services

Health Division # 09094
 Bureau Program # CDC07-08
 GL # 8516
 Draw #: _____

HEALTH DIVISION

REQUEST FOR REIMBURSEMENT / ADVANCE

Program Name: Public Health Preparedness Health Planning & Emergency Response	Subgrantee Name: Washoe County Health District (WCHD)
Address: 4150 Technology Way, Suite 200 Carson City, NV 89706	Address: 1001 East Ninth Street Reno, NV 89520
Subgrant Period: August 10, 2008 through August 9, 2009	Subgrantee EIN#: 88-6000138 Subgrantee Vendor#: T40283400Q

FINANCIAL REPORT AND REQUEST FOR FUNDS - PAN FLU

(report in dollars and cents; must be accompanied by expenditure report/back-up)

Month(s): _____ **Calendar Year:** _____

Approved Budget Category		A	B	C	D	E	F
		Approved Budget	Total Prior Requests	Current Request	Year To Date Total	Budget Balance	Percent Expended
1	Personnel	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	#DIV/0!
2	Travel	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	#DIV/0!
3	Supplies	\$ 1,625.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 1,625.00	0%
4	Equipment	\$ 60,602.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 60,602.00	0%
5	Contract/Consultant	\$ 49,253.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 49,253.00	0%
6	Other	\$ 3,000.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 3,000.00	0%
7	Indirect	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	0%
8	Total	\$ 114,480.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 114,480.00	0%

This report is true and correct to the best of my knowledge.

Authorized Signature _____ Title _____ Date _____

Reminder: Request for Reimbursement cannot be processed without an expenditure report/back-up. Reimbursement is only allowed for items contained within Subgrant Award documents. If applicable, travel claims must accompany report.

FOR HEALTH DIVISION USE ONLY

Program contact necessary? Yes No Contact Person: _____

Reason for contact: _____

Fiscal review/approval date: _____ Signed: _____

cope of Work review/approval date: _____ Signed: _____

ASO or Bureau Chief (as required): _____ Date: _____

Nevada Department of Health and Human Services

Health Division # 09094
 Bureau Program # CDC07-08
 GL # 8516
 Draw #: _____

HEALTH DIVISION

REQUEST FOR REIMBURSEMENT / ADVANCE

Program Name: Public Health Preparedness Health Planning & Emergency Response	Subgrantee Name: Washoe County Health District (WCHD)
Address: 4150 Technology Way, Suite 200 Carson City, NV 89706	Address: 1001 East Ninth Street Reno, NV 89520
Subgrant Period: August 10, 2008 through August 9, 2009	Subgrantee EIN#: 88-6000138 Subgrantee Vendor#: T40283400Q

FINANCIAL REPORT AND REQUEST FOR FUNDS - BASE

(report in dollars and cents; must be accompanied by expenditure report/back-up)

Month(s): _____

Calendar Year: _____

Approved Budget Category	A Approved Budget	B Total Prior Requests	C Current Request	D Year To Date Total	E Budget Balance	F Percent Expended
1 Personnel	\$ 743,721.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 743,721.00	0%
2 Travel	\$ 13,531.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 13,531.00	0%
3 Supplies	\$ 11,300.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 11,300.00	0%
4 Equipment	\$ 68,981.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 68,981.00	0%
5 Contract/Consultant	\$ 33,091.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 33,091.00	0%
6 Other	\$ 23,370.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 23,370.00	0%
7 Indirect	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	0%
8 Total	\$ 893,994.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 893,994.00	0%

This report is true and correct to the best of my knowledge.

Authorized Signature

Title

Date

Reminder: Request for Reimbursement cannot be processed without an expenditure report/backup. Reimbursement is only allowed for items contained within Subgrant Award documents. If applicable, travel claims must accompany report.

FOR HEALTH DIVISION USE ONLY

Program contact necessary? Yes No Contact Person: _____

Reason for contact: _____

Fiscal review/approval date: _____ Signed: _____

cope of Work review/approval date: _____ Signed: _____

ASO or Bureau Chief (as required): _____ Date: _____



DISTRICT HEALTH DEPARTMENT

STAFF REPORT

BOARD MEETING DATE: 8/27/09

DATE: August 14, 2009

TO: District Board of Health

FROM: Patsy Buxton, Fiscal Compliance Officer, Washoe County Health District ^{PB}
775-328-2418, pbuxton@washoecounty.us

THROUGH: Eileen Coulombe, Administrative Health Services Officer ^E

SUBJECT: Approval of Subgrant Amendment #1 from the Nevada State Health Division, Bureau of Health Statistics, Planning, and Emergency Response for the period January 1, 2009 to December 31, 2009 in the amount of \$92,178 in support of the HIV Surveillance Program; Approve amendments totaling an increase of \$6,949 in both revenue and expenses to the adopted FY 10 HIV Surveillance Grant Program, IO 10012, to bring the FY 10 adopted budget into alignment with the grant; and if approved, authorize the Chairman to execute the Subgrant Amendment.

SUMMARY

The Washoe County District Board of Health must approve and execute, or direct the Health Officer to execute, contracts in excess of \$50,000, Interlocal Agreements and amendments to the adopted budget. The Washoe County Health District has received a Subgrant Amendment from the Nevada State Health Division for the period January 1, 2009 to December 31, 2009 in the total amount of \$92,178 in support of the HIV Surveillance Program. A copy of the Subgrant Amendment is attached.

District Board of Health Priority supported by this item:

Approval of this Subgrant Award and accompanying budget amendment supports the District Board of Health's strategic priority: *Experience a low rate of communicable disease.*

This also supports the District's Sexual Health Program mission to provide comprehensive prevention education, treatment, and surveillance activities in Washoe County that reduce the incidence of STD infection including HIV. The Sexual Health Program emphasizes strategies that empower individuals to decrease risk-related behaviors, thereby decreasing the incidence of new STD and HIV infections in the community.

AGENDA ITEM # 7.C.3.

1001 EAST NINTH STREET / P.O. BOX 11130, RENO, NEVADA 89520 (775) 328-2400 FAX (775) 328-2279

www.washoecounty.us/health

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PREVIOUS ACTION

The District Board of Health approved the Notice of Subgrant Award for the period January 1, 2009 through December 31, 2009 in the total amount of \$85,229 on February 26, 2009.

FISCAL IMPACT

This grant was anticipated in the FY 10 adopted budget in the amount of \$85,229, in salary and benefits and travel. A budget amendment in the amount of \$6,949 is necessary to bring the Notice of Subgrant Award into alignment with the program budget.

Should the Board approve these budget adjustments, the FY 10 budget will be adjusted in the following accounts:

<u>Account Number</u>	<u>Description</u>	<u>Amount of Increase/(Decrease)</u>
2002-IO-10012-431100	Federal Revenue	\$6,949.00
2002-IO-10012-710100	Professional Services	6,949.00
	Total Expenditures	\$6,949.00

RECOMMENDATION

Staff recommends that the Washoe County District Board of Health approve the Subgrant Amendment #1 from the Nevada State Health Division, Bureau of Health Statistics, Planning, and Emergency Response for the period January 1, 2009 to December 31, 2009 in the amount of \$92,178 in support of the HIV Surveillance Program; Approve amendments totaling an increase of \$6,949 in both revenue and expenses to the adopted FY 10 HIV Surveillance Grant Program, IO 10012, to bring the FY 10 adopted budget into alignment with the grant; and if approved, authorize the Chairman to execute the Subgrant Amendment.

POSSIBLE MOTION

Move to approve the Subgrant Amendment #1 from the Nevada State Health Division, Bureau of Health Statistics, Planning, and Emergency Response for the period January 1, 2009 to December 31, 2009 in the amount of \$92,178 in support of the HIV Surveillance Program; Approve amendments totaling an increase of \$6,949 in both revenue and expenses to the adopted FY 10 HIV Surveillance Grant Program, IO 10012, to bring the FY 10 adopted budget into alignment with the grant; and if approved, authorize the Chairman to execute the Subgrant Amendment.

Nevada Department of Health and Human Services
HEALTH DIVISION
 (hereinafter referred to as the DIVISION)

HD Amendment #: 09119-1
 HD Contract #: 09119
 Budget Account #: 3215
 Category #: 18
 GL #: 8516

SUBGRANT AMENDMENT #1

<p><u>Program Name:</u> HIV/AIDS Surveillance Program Bureau of Health Statistics, Planning, and Emergency Response Nevada State Health Division <u>Address:</u> 4150 Technology Way, Suite #200 Carson City, NV 89706-2009 <u>Original Subgrant Period:</u> January 1, 2009 through December 31, 2009</p>	<p><u>Subgrantee Name:</u> Washoe County Health District (WCHD) <u>Address:</u> P.O. Box 11130 Reno, NV 89520 <u>Subgrantee EIN#:</u> 88-6000138 <u>Subgrantee Vendor#:</u> T40283400Q</p>		
<p><u>Source of Funds:</u> 1. Centers for Disease Control and Prevention</p>	<p><u>% of Funds:</u> 100%</p>	<p><u>CFDA#:</u> 93-944</p>	<p><u>Federal Grant #:</u> 5U62PS001038-02</p>

Amendment #1: This amendment reflects an increase in the subgrant award due to carryover funds granted by CDC and redirection of travel funds.

Change from:

The original subgrant award of \$85,229 reflected \$2,500 in travel funds to support WCHD surveillance staff attendance to the National HIV/AIDS Surveillance Conference.

Expense	Amount	Description
Personnel	\$ 82,729	To support DIS staff salary to complete surveillance activities in Washoe County
Travel	\$ 2,500	To support attendance to the National HIV/AIDS Surveillance Conference
TOTAL	\$ 85,229	

Change to:

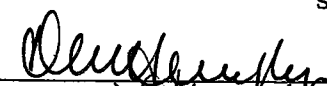
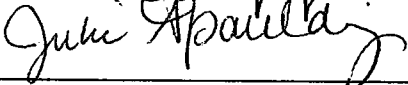
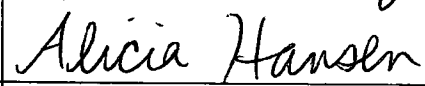

This amendment reflects a redirection of travel funds from attendance at the National HIV/AIDS Surveillance Conference to travel expenses related to trainings for surveillance staff. An increase in the award is also included due to available carryover funds.

Expense	Amount	Description
Personnel	\$ 82,729	To support DIS staff salary to complete surveillance activities in Washoe County
Travel	\$ 2,500	To support travel for staff to attend trainings on surveillance-related topics, such as eHARS, data analysis and quality, disease investigation methods, and new contact tracing strategies.
Other	\$ 6,949	Graphic design expenses associated with three advertising campaigns (30 hours at \$50/hour = \$1,500) Three advertising campaigns to increase active case finding, out-of-care efforts, and

mandated reporting in the Northern Nevada region (\$1,816 per campaign x 3 campaigns = \$5,449)

TOTAL \$ 92,178

By signing this Amendment, the Authorized Subgrantee Official or their designee, Program Manager, Bureau Chief, and Health Division Administrator acknowledge the above as the new standard of practice for the above referenced Subgrant. Further, the undersigned understand this amendment does not alter, in any substantial way, the non-referenced contents of the Original Subgrant Award and all of its Attachments.

	Signature	Date
Authorized Sub-grantee Official WCHD		8/27/09
Julia Spaulding, MHA Health Program Specialist		7/15/09
Alicia Chancellor Hansen, MS Chief State Biostatistician		AH 7/16/09
Richard Whitley, MS Administrator, Health Division		



HEALTH DIVISION

(hereinafter referred to as the DIVISION)

Budget Account #: 3215
 Category #: 18
 GL #: 8516

NOTICE OF SUBGRANT AWARD

Program Name: HIV/AIDS Surveillance Health Statistics, Planning & Emergency Response Nevada State Health Division	Subgrantee Name: Washoe County Health District (WCHD) <i>IO-10012</i>
Address: 4150 Technology Way, Suite #200 Carson City, NV 89706-2025	Address: P.O. Box 11130 Reno, NV 89520
Subgrant Period: January 1, 2009 through December 31, 2009	Subgrantee EIN#: 88-6000138 Subgrantee Vendor#: F44407900 T402834000

Reason for Award: To conduct HIV/AIDS surveillance activities in Washoe County.

County(ies) to be served: () Statewide (X) Specific county or counties: Washoe County

Approved Budget Categories:		Subgrantee may make categorical funding adjustments up to ten percent (10%) of the total subgrant amount without amending the agreement, so long as the adjustment is reasonable to support the activities described within the Scope of Work and the adjustment does not alter the Scope of Work.
1. Personnel	\$ 82,729	
2. Travel	\$ 2,500	
3. Operating	\$ _____	
4. Equipment	\$ _____	
5. Contractual/Consultant Training	\$ _____	
7. Other	\$ _____	
Total Cost	\$ 85,229	

Disbursement of funds will be as follows:
 Payment will be made upon receipt and acceptance of an invoice and supporting documentation specifically requesting reimbursement for actual expenditures *specific to this subgrant*. Total reimbursement will not exceed \$ 85, 229 during the subgrant period.

Source of Funds:	% of Funds:	CFDA#:	Federal Grant #:
1. Centers for Disease Control and Prevention	100	93-944	5U62PS001038-02

Terms and Conditions
 In accepting these grant funds, it is understood that:
 1. Expenditures must comply with appropriate state and/or federal regulations.
 2. This award is subject to the availability of appropriate funds.
 3. Recipient of these funds agrees to stipulations listed in Sections A, B, and C of this subgrant award.

Authorized Sub-grantee Official WCHD	Signature	Date
Robert Salcido, MPH HIV Surveillance Program	<i>Robert C. Salcido</i>	2/26/09
Alicia Hansen, MS Chief State Biostatistician	<i>Alicia Hansen</i>	12/17/08
Richard Whitley, MS Administrator, Health Division	<i>Mary C. Keating</i>	12/19/08
		3/10/09

MS

HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION A
Assurances

As a condition of receiving subgranted funds from the Nevada State Health Division, the Subgrantee agrees to the following conditions:

1. Subgrantee agrees grant funds may not be used for other than the awarded purpose. In the event Subgrantee expenditures do not comply with this condition, that portion not in compliance must be refunded to the Health Division.
2. Subgrantee agrees to submit reimbursement requests for only expenditures approved in the spending plan. Any additional expenditures beyond what is allowable based on approved categorical budget amounts, without prior written approval by the Health Division, may result in denial of reimbursement.
3. Approval of subgrant budget by the Health Division constitutes prior approval for the expenditure of funds for specified purposes included in this budget. Unless otherwise stated in the Scope of Work the transfer of funds between budgeted categories without written prior approval from the Health Division is not allowed under the terms of this subgrant. Requests to revise approved budgeted amounts must be made in writing and provide sufficient narrative detail to determine justification.
4. Recipients of subgrants are required to maintain subgrant accounting records, identifiable by subgrant number. Such records shall be maintained in accordance with the following:
 - a. Records may be destroyed not less than three years (unless otherwise stipulated) after the final report has been submitted if written approval has been requested and received from the Administrative Services Officer of the Health Division. Records may be destroyed by the Subgrantee five (5) calendar years after the final financial and narrative reports have been submitted to the Health Division.
 - b. In all cases an overriding requirement exists to retain records until resolution of any audit questions relating to individual subgrants.

Subgrant accounting records are considered to be all records relating to the expenditure and reimbursement of funds awarded under this Subgrant Award. Records required for retention include all accounting records and related original and supporting documents that substantiate costs charged to the subgrant activity.

5. Subgrantee agrees to disclose any existing or potential conflicts of interest relative to the performance of services resulting from this subgrant award. The Health Division reserves the right to disqualify any grantee on the grounds of actual or apparent conflict of interest. Any attempt to intentionally or unintentionally conceal or obfuscate a conflict of interest will automatically result in the disqualification of funding.
6. Subgrantee agrees to comply with the requirements of the Civil Rights Act of 1964, as amended, and the Rehabilitation Act of 1973, P.L. 93-112, as amended, and any relevant program-specific regulations, and shall not discriminate against any employee or offer of employment because of race, national origin, creed, color, sex, religion, age, disability or handicap condition (including AIDS and AIDS-related conditions).
7. Subgrantee agrees to comply with the Americans with Disabilities Act of 1990 (P.L. 101-136), 42 U.S.C. 12101, as amended, and regulations adopted there under contained in 28 CFR 26.101-36.999 inclusive, and any relevant program-specific regulations.

Subgrantee agrees to comply with the requirements of the Health Insurance Portability and Accountability Act of 1996, 45 C.F.R. 160, 162 and 164, as amended. If the subgrant award includes functions or activities that involve the use or disclosure of Protected Health Information, the Subgrantee agrees to enter into a Business Associate Agreement with the Health Division, as required by 45 C.F.R 164.504 (e).

9. Subgrantee certifies, by signing this subgrant, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency. This certification is made pursuant to regulations implementing Executive Order 12549, Debarment and Suspension, 28 C.F.R. pt. 67 § 67.510, as published as pt. VII of May 26, 1988, Federal Register (pp.19150-19211). This provision shall be required of every Subgrantee receiving any payment in whole or in part from federal funds.
10. Subgrantee agrees, whether expressly prohibited by federal, state, or local law, or otherwise, that no funding associated with this subgrant will be used for any purpose associated with or related to lobbying or influencing or attempting to lobby or influence for any purpose the following:
 - a. any federal, state, county or local agency, legislature, commission, council, or board;
 - b. any federal, state, county or local legislator, commission member, council member, board member, or other elected official; or
 - c. any officer or employee of any federal, state, county or local agency, legislature, commission, council, or board.
11. Health Division subgrants are subject to inspection and audit by representatives of the Health Division, Nevada Department of Health and Human Services, the State Department of Administration, the Audit Division of the Legislative Counsel Bureau or other appropriate state or federal agencies to
 - a. verify financial transactions and determine whether funds were used in accordance with applicable laws, regulations and procedures;
 - b. ascertain whether policies, plans and procedures are being followed;
 - c. provide management with objective and systematic appraisals of financial and administrative controls, including information as to whether operations are carried out effectively, efficiently and economically; and
 - d. determine reliability of financial aspects of the conduct of the project.

Any audit of Subgrantee's expenditures will be performed in accordance with Generally Accepted Government Auditing Standards to determine there is proper accounting for and use of subgrant funds. It is the policy of the Health Division (as well as a federal requirement as specified in the Office of Management and Budget (OMB) Circular A-133 [Revised June 27th, 2003]) that each grantee annually expending \$500,000 or more in federal funds have an annual audit prepared by an independent auditor in accordance with the terms and requirements of the appropriate circular. A COPY OF THE FINAL AUDIT REPORT MUST BE SENT TO THE NEVADA STATE HEALTH DIVISION, ATTN: ADMINISTRATIVE SERVICES OFFICER IV, 4150 TECHNOLOGY WAY, SUITE 300, CARSON CITY, NEVADA 89706-2009, within nine (9) months of the close of the Subgrantee's fiscal year.

**HEALTH DIVISION
NOTICE OF SUBGRANT AWARD**

SECTION B

Description of services, scope of work, deliverables and reimbursement

Washoe County Health District (WCHD), hereinafter referred to as Subgrantee, agrees to conduct the following Scope of Work (SOW) during the subgrant period and to provide the following services and reports according to the identified timeframes to the State HIV/AIDS Surveillance Program. These activities correspond to the core recipient activities of the National HIV/AIDS Surveillance Program as outlined by the Centers for Disease Control and Prevention (CDC) in the 2009 HIV/AIDS Surveillance Program grant guidance:

The intent of the HIV/AIDS Surveillance Program – Core Surveillance is to maintain complete, timely, and accurate data on HIV cases and HIV-related morbidity and mortality in adults, adolescents, and children toward the successful identification of persons in need of HIV-related prevention and care services in Nevada. As a result, the Program serves a pivotal role for the state by generating HIV/AIDS data that can be used in program management, policy development, and resource allocation, thereby enhancing and extending the ability of state and local agencies to appropriately provide HIV/AIDS prevention and care activities to persons in need.

1. **Active Case Finding.** The Subgrantee will review and investigate all reported cases of HIV infection in their jurisdiction: upon receipt of laboratory evidence of HIV infection, the Subgrantee will solicit information needed to complete HIV/AIDS case reports by contacting area healthcare providers and facilities serving HIV-positive persons. The Subgrantee will also monitor laboratory reporting to ensure that HIV testing, CD4 counts, viral loads, opportunistic infections, and other tests/information are reported. The Subgrantee will identify duplicate surveillance reports and take appropriate corrective action. The Subgrantee will conduct No Identified Risk (NIR) investigations and interviews, as needed.
2. **Follow-Up Investigations of Cases of Special Epidemiologic Significance.** The Subgrantee will maintain contact with area HIV testing sites and conduct follow-up investigation of cases that present with rare/unusual or previously unidentified modes of HIV transmission. The Subgrantee will report each case to the Division within 24 hours of investigation.
3. **Evaluation of the Performance of the Surveillance System.** The Subgrantee will demonstrate compliance with CDC's "Minimum HIV Reporting Performance Standards" annually. The Subgrantee will identify staff to participate in the NSHD's HIV/AIDS Surveillance Evaluation Workgroup.
4. **Interstate Reciprocal Notification of Newly Identified HIV/AIDS Cases.** The Subgrantee will complete case reports on out-of-state/out-of-jurisdiction HIV/AIDS cases that present in their jurisdiction; if the Subgrantee cannot solicit information for completing case report forms about said cases, the Subgrantee will contact the NSHD for assistance with interstate communication. The Subgrantee will track out-of-jurisdiction HIV/AIDS cases using standardized CDC software.
5. **Analysis, Dissemination, and Promotion of HIV/AIDS Surveillance Data.** The Subgrantee will produce an Annual HIV/AIDS Surveillance Report (see #9) and provide it to the HIV/AIDS Community Planning Group (CPG) in their area. The Subgrantee will identify staff to participate in local CPG meetings and in other HIV/AIDS planning bodies (e.g., the State AIDS Task Force), as needed. The Subgrantee will respond to requests for data by staff involved in Prevention Case Management, Counseling and Testing System, Prevention Counseling and Referral Services (PCRS), and other HIV Prevention and CARE activities, as needed.
6. **Activities to Improve the Quality, Efficiency, and Productivity of the Surveillance Program.** The Subgrantee will identify data inconsistencies in institution names/identifiers, reporting time period, and jurisdiction. Annually, the Subgrantee will identify a random selection of HIV/AIDS case reports to be reviewed in hard copy for comparison to data entered. The Subgrantee will identify least-productive reporters in their area and establish a schedule of routine and appropriate contact modes to improve reporting compliance.

7. Reporting of Data Using CDC Standards and Software. The Subgrantee will enter HIV/AIDS case reports, laboratory results, and other HIV/AIDS case information into the eHARS database, including (or as available) CDC's recommended standard data elements/questions. The Subgrantee will update eHARS should any laboratory reports or additional medical information be reported.

8. Security. The Subgrantee will maintain security and confidentiality policies that comply with conditions set forth in *NRS 441A.230*, Disclosure of personal information prohibited without consent. Except as otherwise provided in this chapter, a person shall not make public the name of, or other identifying information about, a person infected with a communicable disease who has been investigated by the health authority pursuant to this chapter, without the consent of the person. (Added to NRS by 1989, 300). In addition, an annual confidentiality and security training will be **required** for all HIV/AIDS surveillance staff. The content of this training will be provided by the Health Division or by the CDC HIV/AIDS Surveillance Program.

9. Annual HIV/AIDS Surveillance and Progress Report. The Subgrantee will produce an annual HIV/AIDS Surveillance Report containing analysis of HIV/AIDS data for their jurisdiction (as part of the annual Subgrantee Sexual Health Program report); this report will also include a description of any new or significant HIV/AIDS surveillance activities that occurred during the grant period. The Subgrantee should also identify technical assistance or training needs (if any) and include three (3) copies of all products produced with subgrant funds. **The report is due electronically to the Health Division no later than 45 days after the end of each budget period.**

10. Acknowledgements. The Subgrantee agrees to adhere to the following acknowledgements of funding:
 - a) Identify the source of funding on all printed documents purchased or produced within the scope of this subgrant, using a statement similar to: "This publication (journal, article, etc.) was supported by the Nevada State Health Division through Grant Number from the 5U62PS001038-02 Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Nevada State Health Division or the Centers for Disease Control and Prevention."
 - b) Acknowledge that any activities performed under this subgrant were provided through funding from the Nevada State Health Division through Grant Number 5U62PS001038-02 from the Centers for Disease Control and Prevention.

Subgrantee agrees to adhere to the following budget:

Personnel	<u>Salary</u>	<u>Amount Awarded</u>
HIV/AIDS Surveillance Investigator	\$82,729	\$82,729
Travel (Required CDC HIV Surveillance Meeting)		\$2,500
Total Washoe County HIV Core Surveillance Budget		\$85,229

- Subgrantee may make categorical funding adjustments up to ten percent (10%) of the total subgrant amount without amending the agreement, so long as the adjustment is reasonable to support the activities described within the Scope of Work and the adjustment does not alter the Scope of Work.

- Equipment purchased with these funds belongs to the federal program from which this funding was appropriated and shall be returned to the program upon termination of this agreement.

Subgrantee agrees to request reimbursement according to the schedule specified below for the actual expenses incurred related to the Scope of Work during the subgrant period.

- Reimbursement may be requested monthly or quarterly for expenses incurred in the implementation of the Scope of Work;
- Reimbursement will not exceed \$85,229 for the period of the subgrant;
- Requests for Reimbursement will be accompanied by supporting documentation, including a line item description of expenses incurred;
- Additional expenditure detail will be provided upon request from the Division.

Additionally, the Subgrantee agrees to provide:

- A complete financial accounting of all expenditures to the Health Division within ⁴⁵~~30~~ days of the CLOSE OF THE SUBGRANT PERIOD. Any un-obligated funds shall be returned to the Health Division at that time, or if not already requested, shall be deducted from the final award.

The Nevada State Health Division agrees:

- Identify specific items the program or Bureau must provide or accomplish to ensure successful completion of this project, such as:
 - To provide reimbursement of activities related to this subgrant, not to exceed \$85,229 during the subgrant period, given receipt of appropriate documentation;
 - To provide technical assistance, upon request from the Subgrantee;
 - To provide prior approval of reports or documents to be developed;
 - To forward a report to another party, i.e. CDC.
- The Health Division reserves the right to hold reimbursement under this subgrant until any delinquent forms, reports, and expenditure documentation are submitted to and accepted by the Health Division.

Both parties agree:

Site-visit monitoring and/or audits may be conducted by the Health Division or the Centers for Disease Control and Prevention or related staff of the Subgrantee's HIV/AIDS Surveillance Program in its entirety at any time. Program and fiscal audits shall occur annually or as needed.

The Subgrantee will, in the performance of the Scope of Work specified in this subgrant, perform functions and/or activities that involve the use and/or disclosure of Protected Health Information (PHI); therefore, the Subgrantee is considered a Business Associate of the Health Division.

- Both parties acknowledge a Business Associate Agreement is currently on file with the Nevada State Health Division's Administration Office.

This subgrant may be extended up to a maximum term of four years upon agreement of both parties and if funding is available.

All reports of expenditures and requests for reimbursement processed by the Health Division are SUBJECT TO AUDIT.

This subgrant agreement may be TERMINATED by either party prior to the date set forth on the Notice of Subgrant Award, provided the termination shall be not be effective until 30 days after a party has served written notice upon the other party. This agreement may be terminated by mutual consent of both parties or unilaterally by either party without cause. The parties expressly agree that this Agreement shall be terminated immediately if for any reason the Health Division, state, and/or federal funding ability to satisfy this Agreement is withdrawn, limited, or impaired.

**HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION C
Financial Reporting Requirements**

- ☞ A Request for Reimbursement is due on a **monthly or quarterly** basis, based on the terms of the subgrant agreement, no later than the 15th of the month.
- ☞ Reimbursement is based on **actual** expenditures incurred during the period being reported.
- ☞ Payment will not be processed without all reporting being current.
- ☞ Reimbursement may only be claimed for expenditures approved within the Notice of Subgrant Award.
- ☞ **PLEASE REPORT IN WHOLE DOLLARS**

Provide the following information on the top portion of the form: Subgrantee name and address where the check is to be sent, Health Division (subgrant) number, Bureau program number, draw number, employer I.D. number (EIN) and Vendor number.

An explanation of the form is provided below.

A. Approved Budget: List the approved budget amounts in this column by category.

B. Total Prior Requests: List the **total** expenditures for all previous reimbursement periods in this column, for each category, by entering the numbers found on Lines 1-8, Column D on the **previous** Request for Reimbursement/Advance Form. If this is the first request for the subgrant period, the amount in this column equals zero.

C. Current Request: List the **current** expenditures requested at this time for reimbursement in this column, for each category.

D. Year to Date Total: Add Column B and Column C for each category.

Budget Balance: Subtract Column D from Column A for each category.

F. Percent Expended: Divide Column D by Column A for each category and total. Monitor this column; it will help to determine if/when an amendment is necessary. Amendments **MUST** be completed (including all approving signatures) 30 days prior to the end of the subgrant period.

*** An Expenditure Report/Backup that summarizes, by expenditure GL, the amounts being claimed in column 'C' is required.**

Nevada Department of Health and Human Services

Health
 Division # 09119
 Bureau Program # 3215/18
 GL # 8516
 Draw #: _____

HEALTH DIVISION

REQUEST FOR REIMBURSEMENT / ADVANCE

Program Name: HIV/AIDS Surveillance Program Health Statistics, Planning, & Emergency Response Nevada State Health Division	Subgrantee Name: Washoe County Health District (WCHD)
Address: 4150 Technology Way, Suite #200 Carson City, NV 89706-2025	Address: P.O. Box 11130 Reno, NV 89520
Subgrant Period: January 1, 2009 through December 31, 2009	Subgrantee EIN#: 88-6000138 Subgrantee Vendor#: T41107900 T402834000

FINANCIAL REPORT AND REQUEST FOR FUNDS

(report in whole dollars; must be accompanied by expenditure report/back-up)

Month(s): _____

Calendar

Year: _____

Approved Budget Category		A Approved Budget		B Total Prior Requests		C Current Request		D Year To Date Total		E Budget Balance		F Percent Expended	
1	Personnel	\$	82,729	\$	0	\$	0	\$	0	\$	\$82,729		0%
2	Travel	\$	2,500	\$	0	\$	0	\$	0	\$	2,500		0%
3	Operating	\$	0	\$	0	\$	0	\$	0	\$	0		0%
4	Equipment	\$	0	\$	0	\$	0	\$	0	\$	0		0%
5	Contract/Consultant	\$	0	\$	0	\$	0	\$	0	\$	0		0%
6	Training	\$	0	\$	0	\$	0	\$	0	\$	0		0%
7	Other	\$	0	\$	0	\$	0	\$	0	\$	0		0%
8	Total	\$	85,229	\$	0	\$	0	\$	0	\$	\$85,229		0%

This report is true and correct to the best of my knowledge.

Authorized Signature _____ Title _____ Date _____

Reminder: Request for Reimbursement cannot be processed without an expenditure report/back-up. Reimbursement is only allowed for items contained within Subgrant Award documents. If applicable, travel claims must accompany report.

FOR HEALTH DIVISION USE ONLY

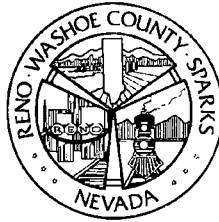
Program contact necessary? Yes No Contact Person: _____

Reason for contact: _____

Fiscal review/approval date: _____ Signed: _____

Scope of Work review/approval date: _____ Signed: _____

ASO or Bureau Chief (as required): _____ Date: _____



Washoe County Health District

STAFF REPORT

BOARD MEETING DATE: 8/27/09

DATE: August 14, 2009

TO: District Board of Health

FROM: Lori Cooke, Fiscal Compliance Officer, Washoe County Health District *LC*
775-325-8068, lcooke@washoecounty.us

THROUGH: Eileen Coulombe, Administrative Health Services Officer *EC*
775-328-2417, ecoulombe@washoecounty.us

SUBJECT: Proposed approval of Notice of Grant Award from the Nevada Department of Health and Human Services, Grants Management Unit, Fund for a Healthy Nevada, for the period July 1, 2009 to June 30, 2010 in the total amount of \$192,883 in support of the Comprehensive Tobacco Prevention Program; and approval of amendments totaling a net increase of \$15,115.37 in both revenue and expenses to the adopted FY 10 Comprehensive Tobacco Prevention Program Grant budget, IO 10418; and direct the Chairman of the Board to sign.

SUMMARY

The Washoe County District Board of Health must approve and execute, or direct the Health Officer to execute, contracts in excess of \$50,000, Interlocal Agreements and amendments to the adopted budget. The Health District has received a Notice of Grant Award from the Nevada Department of Health and Human Services, Grants Management Unit, Fund for a Healthy Nevada, for the period July 1, 2009 to June 30, 2010 in the total amount of \$192,883 in support of the Comprehensive Tobacco Prevention Program, IO 10418. A copy of the Notice of Grant Award is attached.

Goal supported by this item: Approval of this Notice of Grant Award and these budget amendments supports the Health District Tobacco Use Prevention Program's mission to reduce tobacco use and its impact on other health determinants in Washoe County through the promotion of education, policy development and enforcement, and cessation.

PREVIOUS ACTION

The District Board of Health approved the last Notice of Grant Award in support of the Tobacco Use Prevention Program on August 28, 2008.

AGENDA ITEM # 7.C.4.

BACKGROUND

The Health District received from the Nevada Department of Health and Human Services, Grants Management Unit, Fund for a Healthy Nevada, a Notice of Grant Award in the total amount of \$192,883 that supports the Comprehensive Tobacco Prevention Program. This award includes funding for personnel, professional services, educational materials, outreach service promotional items and incentives, including but not limited to non-cash value gift cards and food items. Note that this award and corresponding budget adjustments include a reduction of a Health Educator II from a 1.0 FTE to a .53 FTE. The required paperwork for the permanent reduction will be presented to the Board for approval at a future meeting.

The FY 10 Comprehensive Tobacco Prevention Program budget, IO 10418, was adopted with \$177,767.63 in funding. A budget amendment in the amount of \$15,115.37 is necessary to bring the Notice of Grant Award into alignment with the program budget.

FISCAL IMPACT

Should the Board approve these budget amendments, the adopted FY 10 budget will be **increased by \$15,115.37** in the following accounts:

<u>Account Number</u>	<u>Description</u>	<u>Amount of Increase/(Decrease)</u>
2002-IN-10418-432100	State Revenue	\$15,115.37
2002-IN-10418-701412	Salary Adjustment	(38,404.63)
-710100	Professional Services	53,020.00
-710872	Food Purchase	500.00
	Total Expenditures	\$15,115.37

RECOMMENDATION

Staff recommends that the Washoe County District Board of Health approve the Notice of Grant Award from the Nevada Department of Health and Human Services, Grants Management Unit, Fund for a Healthy Nevada, for the period July 1, 2009 to June 30, 2010 in the total amount of \$192,883 in support of the Comprehensive Tobacco Prevention Program; and approval of amendments totaling a net increase of \$15,115.37 in both revenue and expenses to the adopted FY 10 Comprehensive Tobacco Prevention Program Grant budget, IO 10418; and direct the Chairman of the Board to sign.

POSSIBLE MOTION

Move to approve the Notice of Grant Award from the Nevada Department of Health and Human Services, Grants Management Unit, Fund for a Healthy Nevada, for the period July 1, 2009 to June 30, 2010 in the total amount of \$192,883 in support of the Comprehensive Tobacco Prevention Program; and approval of amendments totaling a net increase of \$15,115.37 in both revenue and expenses to the adopted FY 10 Comprehensive Tobacco Prevention Program Grant budget, IO 10418; and direct the Chairman of the Board to sign.

Nevada Department of Health and Human Services
 Grants Management Unit
 4126 Technology Way, Room 100
 Carson City, NV 89706
 775 684-3470
 Fund for a Healthy Nevada
 NOTICE of GRANT AWARD

Grantee: Washoe County Health District P.O. Box 11130 Reno, NV 89520-0027	Tax ID: 88-6000138 Request ID: 841.01
Contact: Eileen Coulombe, Admin. Health Services Officer	Telephone: 775-328-2417
Project: Washoe County Health District Comprehensive Tobacco Prevention Program	Email: ecoulombe@washoecounty.us
Grant Period: 7/1/2009 to 6/30/2010	Vendor #: T40283400

Project Description: Washoe Co. addresses tobacco use and secondhand smoke among populations with the highest smoking rates. Comprehensive strategies include best practices of education, outreach, public information, cessation referrals, and collaboration to sustain program benefits.

Counties to be served: Urban

Approved Budget:	\$192,883		
Personnel	\$139,363	Occupancy	\$0
Contract/Consult	\$0	Communications	\$0
Staff Travel/Per diem	\$0	Public Information	\$53,020
Equipment	\$0	Other Expenses	\$500
Supplies	\$0	Indirect Costs	\$0
		TOTAL	\$192,883

Approved Measures for Quarterly Progress Reports

Outcome 1	Outcome 2	Outcome 3
<p>Four high risk groups will be reached with comprehensive tobacco prevention strategies:</p> <ul style="list-style-type: none"> ▪ <i>Low socio-economic status</i> ▪ <i>18 – 24 year old individuals</i> ▪ <i>Hispanics</i> ▪ <i>Same sex orientations</i> <p>Approximately 17% (53,740) of individuals in these groups will be reached.</p>	<p>Of the four high risk groups identified in Outcome 1:</p> <ul style="list-style-type: none"> ▪ <i>Low socio-economic status</i> ▪ <i>18 – 24 year old individuals</i> ▪ <i>Hispanics</i> ▪ <i>Same sex orientations</i> ▪ <p>60% of individuals surveyed will cite their intent to improve tobacco-related behaviors as measured by a Program Impact Survey tool.</p>	<p>Materials/messaging will be based on:</p> <ul style="list-style-type: none"> ▪ <i>CDC best practices</i> ▪ <i>proven campaign examples</i> ▪ <i>social marketing theory</i> ▪ <i>and focus groups</i> <p>Media buyers will assist in leveraging and low-cost “we-based” media will be used. Coordination will occur through ongoing partner communication and coalition participation.</p>

Serve#	Achieve%	Serve#	Achieve%	Serve#	Achieve%
53,740	17%	53,740	60%	(1)	(1)

This grant has been approved for a one-year period. Future funding is contingent upon performance and availability of funds. The budget detail is based on the grant period identified above.

Disbursement of funds: Total reimbursement will not exceed \$192,883 during the grant period. Funds will be disbursed primarily on a reimbursement basis, with allowance for advances, in accordance with grant instructions in Attachment B.

Source of Funds: FHN - Tobacco

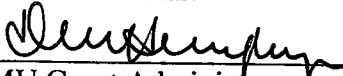
Terms and Conditions: In accepting these grant funds, the recipient understands and agrees to the following:

1. Expenditures must comply with any statutory guidelines as well as the State Administrative Manual.
2. This award is subject to the availability of appropriate funds.
3. Expenditures must be consistent with the budget as approved and documented in Attachment A.
4. Compliance with the Assurances, General Conditions and Grant Instructions in Attachment B.
5. Quarterly progress reports are due by the last working day of the month following the end of the quarter, unless specific exceptions are provided in writing by the grant administrator.
6. Financial Status Reports and Requests for Funds must be submitted at least quarterly, unless specific exceptions are provided in writing by the grant administrator.

Signatures

Dates

Authorized Grantee Official:



8/27/09

Kathy Lee GMU Grant Administrator

Michael J. Willden Director, DHHS:

JIM GIBBONS
Governor



MICHAEL J. WILLDEN
Director

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIRECTOR'S OFFICE
4126 Technology Way, Room 100
Carson City, NV 89706-2009
Telephone (775) 684-4000 • Fax (775) 684-4010
dhhs.nv.gov

7-7-09

The Grant Instructions & Requirements (GIR's) (previously the Grant Instructions) document is attached to the grant award email. It has been updated with several changes. Please read it over carefully and keep on hand for reference during the year.

Some of the changes are:

- **Travel (GIR-09-10):** A travel claim form must be submitted with the Request for Funds for reimbursement. A form is provided with this email. The travel expense will be reviewed to ensure compliance with the Federal GSA travel allowances. Please refer to the GIR's for detail.
- **Equipment and Inventory (GIR-00-15):** Grantees are required to keep an inventory log of all equipment with a value of \$1,000 or greater and computer and software purchases of any amount.
- **Sub-awards – Mini-grants & Contracts:** Reminder - sub-granting of FHN funds must be reviewed and approved by Grants Management Staff prior to finalization. Please refer to FIR-09-5(8) for detail.

Forms are available on our website:

<http://dhhs.nv.gov/Grants/GrantsManagement.htm>

Helping People -- it's who we are and what we do

1/8/2009 2:00:00 PM
FY10 Update Memo 7-7-09

Attachment B

**Assurances
General Conditions
Grant Instructions and Requirements
(GIRS)**

Grant Instructions and Requirements

State of Nevada Department of Health and Human Services Grants Management Unit

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Grant Instructions and Requirements

State of Nevada Department of Health and Human Services Grants Management Unit

GIR-09-1 SUBJECT: GIRS DEFINED

The Department of Health and Human Services (DHHS) Grants Management Unit (GMU) has adopted these Grant Instructions and Requirements (GIRS) to provide all Grantees with essential information relative to financial and administrative requirements for programs funded through the GMU. This edition of the GIRS is effective July 1, 2009, and replaces any Grant Instructions (GINS) issued for prior fiscal years.

Sections of the GIRS are identified by the term GIR (Grant Instructions and Requirements), followed by the last two digits of the calendar year, and numbered serially. The funding source codes are as follows: Children's Trust Fund (CTF), Community Services Block Grants (CSBG), Family to Family (F2F), Family Resource Centers (FRC), Fund for a Healthy Nevada (FHN), Revolving Account for Problem Gambling (RPG), and Title XX Social Services Block Grants (TXX). Each instruction applies to grants from all funding sources unless otherwise noted.

Each program director is instructed to maintain a copy of the GIRS, which will be verified during the fiscal monitorings. Programs that do not follow the requirements outlined in the GIRS will jeopardize their receipt of funds.

GIR-09-2 SUBJECT: GRANTOR AUTHORITY

This section describes the role of the Grantor. The Grantor cannot be limited in its rights by the Grantee, as Grantor rules and regulations shall supersede Grantee rules and regulations. The State's ability to evaluate the grant will not be curtailed or hampered. This includes access to any document or record that is pertinent to the program and the interviewing of staff, clients, or agency personnel in accordance with the procedures of confidentiality.

GIR-09-3 SUBJECT: CONFIDENTIALITY

All Grantees are required to comply with applicable State and Federal confidentiality and privacy rules. Grantees shall collect, maintain, and transmit personal information about service recipients in a manner that ensures security and protects individual privacy. Any Grantee that is a covered entity under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) shall also comply with the security and privacy safeguards set forth in Public Law 104-191 (45 CFR 160 and 164). Such safeguards shall not restrict the Grantor's access to protected health information, which may be necessary to determine program compliance (45 CFR 164.512(d)(1)(iii)).

GIR-09-4 SUBJECT: CONTROLLING DOCUMENTS

For purposes of administration and decisions regarding compliance and operations, the approved grant proposal, agreement, budget and associated assurances constitute the controlling documents. Both the Grantee and the Grantor shall reference these documents when interpreting or applying rules.

GIR-09-5 SUBJECT: GRANTEE RIGHTS AND RESPONSIBILITIES

1. The Grantee organization assumes full responsibility for the overall program which includes: fiscal administration, timely submission of required reports, program management including personnel, and the meeting of the goals and objectives in the approved grant applications. The Grantee does not relinquish responsibility by having a board or representative act on its behalf.
2. The Grantee shall maintain effective control and accountability for all grant funds, property, and other assets. Good internal control necessitates that fiscal responsibilities be clearly established. Accounting functions should be separated to the fullest extent possible so that no one person authorizes, executes, and approves the same transactions. Written policies covering personnel and accounting procedures must be documented in a policies and procedures manual or other similar document.
 - a. The documentation for all transactions, controls and other significant events must be clear and readily available for examination. All documentation such as invoices, contracts, etc., should be maintained at the Grantee's principal place of business. If they are not, the Grantee must bear the cost of making original documents available for examination by the State.
3. The Grantee must maintain continuing responsibility for the overall program. This includes the establishment of policies and procedures for program operations. The following areas must not be delegated to subgrantees or persons who are not employees or officials of the Grantee organization.
 - a. The development and maintenance of a personnel policy including hiring, terminating, supervising, and evaluating the program director
 - b. Being informed of and accountable for all program income and expenditures
 - c. Performance of timely written evaluations of the program and the monitoring of established goals and objectives as written in the program's grant
 - d. Financial reports and all other reports required by the Department including monthly or quarterly requests for funds, quarterly progress reports and final program reports (if required)
 - e. Administration of the program in accordance with the GIRS and the administrative procedures established by the GMU
4. If the Grantee decides to establish a policy-making body, its role and responsibilities must be clearly defined. Written documentation must be provided to the GMU to determine compliance with all appropriate State, Federal, or Department directives.
5. Any activities that might possibly deviate from the goals identified in the grant agreement must receive prior approval from the Grant Manager and may require a written amendment to the grant agreement.
6. Grantees must notify the Grant Manager of any special events such as conferences, workshops, or celebrations for which these grant funds are to be used at least one week in advance of the event.
7. Grantees must notify the Grant Manager immediately regarding any legal action or negative publicity related to grant-funded events, activities, services, purchases, or outreach.
8. All instructions, requirements, and regulations for grants administered through the GMU are applicable to subawards, minigrants, contracts or other mechanisms passing on these funds. It is the responsibility of the Grantee to ensure compliance through monitoring, reporting, site visits, or other means. The Department may implement probationary measures with the Grantee for noncompliance on the part of the subgrantee or contractor.
9. Grant Instructions and Requirements apply equally to all Grantees. Decisions made by Grant Managers must be based on the GIRS, grant agreements, approved budgets, grant assurances, or program policies and procedures. In cases of disagreement regarding grant administration, Grantees should take the following steps.
 - a. Request that the Grant Manager provide the specific documentation upon which a decision is based. Written response will be made within seven working days.

- b. If this does not resolve the disagreement, request that the Grant Manager consult the Chief of the GMU, as well as the Deputy Director of Program or Fiscal Services, for review of the issues. Written response will be made within seven working days.
 - c. If the disagreement is still unresolved, request that the matter be reviewed by the Department Director, whose decision will be final and will not be open to further discussion or challenge.
10. All interactions between Grantees and GMU staff will be conducted with honesty, courtesy, and respect. It is essential that a professional relationship be maintained in order to properly administer the grant and provide effective services in the community.
- a. Conduct that interferes with the administration of the grant or negatively impacts the ability to provide effective program services may result in termination of the grant after the Department carefully reviews the circumstances. The Department will report termination decisions to the Grants Management Advisory Committee (GMAC) or the Advisory Committee on Problem Gambling (ACPG).
11. Technical assistance within the capacity of GMU or fiscal staff or through available resources will be provided to Grantees on the following basis.
- a. At the request of the GMAC or ACPG
 - b. At the request of the Grantee
 - c. In accordance with direction from the Chief of the GMU, the Deputy Director of Fiscal Services, the Deputy Director of Program Services or the Department Director
12. Timeliness of report submission will be tracked and noted in the grant file. Any extensions or exceptions to requirements must also be noted in the grant file.

GIR-09-6 SUBJECT: COST SHARING OR MATCHING REQUIREMENTS

Any match requirements will be discussed in the Request for Applications for each funding source. Match may be cash contributions or in-kind match. Proposed matches are checked during site reviews. Grantees must maintain documents substantiating any cost sharing or matching. All matches must directly benefit the program for which the funds are granted.

GIR-09-7 SUBJECT: DIRECT AND INDIRECT COSTS

1. Direct costs can be identified specifically with particular cost objectives such as a grant, contract, project, function or activity. Direct costs generally include, but are not limited to, the following.
- a. Salaries and wages (including vacations, holidays, sick leave, and other excused absences of employees working specifically on objectives of a grant or contract, i.e., direct labor costs)
 - b. Other employee fringe benefits allocable on direct labor employees
 - c. Consultant services contracted to accomplish specific grant/contract objectives
 - d. Travel of (direct labor) employees that is directly related to the grant objectives
 - e. Materials, supplies and equipment purchased directly for use on a specific grant or contract
 - f. Communication costs such as long distance telephone calls or telegrams identifiable with a specific award or activity
 - g. Rent or occupancy costs associated with employees working on the grant

As illustrated by the list above, direct costs may be considered "administrative" in nature, as compared with direct costs that are "programmatic" in nature. Administrative costs that can be traced directly back to the program should be identified within the grant budget as a line item expense. For example, a Director of a non-profit who has completed a time-study may be able to directly relate a certain percentage of time to a particular grant. This would be considered a direct administrative cost. A Director who has no direct relationship with a program still needs to perform the work of the Director. This is an indirect cost. Rent can be

considered a direct cost but is normally allocated among all grants or projects managed by a Grantee.

2. Indirect costs represent the expenses of doing business that are not readily identified with a particular grant, contract, project function or activity, but are necessary for the general operation of the organization and the conduct of activities it performs. Looking at it another way, indirect costs are those costs that are not classified as direct.

In order to compensate Grantees for indirect costs associated with managing their grants, DHHS has established a policy of allowing Grantees to charge an indirect cost rate computed on total direct expenses. Subsection I of subsection 1 of NRS 439.630 sets a maximum rate of 8% for Fund for a Healthy Nevada (FHN) grants. DHHS has adopted that rule for all grants except Community Services Block Grants (CSBG), which are administered in accordance with Federal rules. Grantees may include an indirect charge of 8% of direct charges listed on request for funds. This is separate from, and in addition to, administrative costs that can be traced directly to the program.

GIR-09-8 SUBJECT: PROGRAM INCOME ACCOUNTING PROCEDURES

1. Program income is money received by the Grantee specifically for the project funded by this grant. Examples of program income include fees for service in accordance with a sliding fee scale or contributions for a particular event related to the grant-funded project.
2. Each program must maintain a system that assures confidentiality and that also assures accountability of all program contributions or fees. All participant contributions must be credited to the appropriate grant.
3. The system must ensure full accountability for all program income. Each Grantee must clearly document the amount and source(s) of program income, and exactly what the money paid for and for what purpose.
4. Internal accounting and administrative controls must be sufficient to provide reasonable assurance that operations are effective and efficient, financial records and reporting are complete and reliable, and the program complies with applicable laws and regulations.

GIR-09-9 SUBJECT: ALLOWABILITY AND ALLOCABILITY OF COSTS

This section applies to all Grantees.

1. For a cost to be allowable as a charge against grant funds, it must first be allocable to that grant and consistent with the goals and objectives of the grant. For consistency purposes, grants made through the GMU will follow the Federal grant guidance in regard to allowability and allocability of costs. In accordance with OMB Circular A-21 for colleges and universities, OMB Circular A-87 for state and local governments, and OMB Circular A-122 for nonprofit Grantees, a cost is allocable to a particular cost objective (program) to the extent of the benefit received or in accordance with the relative benefit received. This means if a Grantee incurs a cost for goods or services used by more than one program, the cost must be charged to all programs. Each program will be charged for the percentage of the cost of the goods or services used by each program. The method for determining that percentage is discussed below under No. 1(a).

This requirement must be taken into consideration when a Grantee incurs a cost that benefits more than one cost objective (program). One example would be having one director who works for two different programs. Another example would be a utility bill for a building used for two different programs, each with separate and distinct funding.

When there are multiple cost objectives, the Grantee must do the following.

- a. Develop and document a reasonable methodology for determining how each applicable cost will be allocated to each cost objective (program) involved. This method must be

- designed to allocate to a program the portion of the cost that benefits the program. Examples of reasonable methodologies include, but are not limited to the following.
- (1) The salary of a single person performing duties for multiple programs will be allocated based on the time the person spends on each program as documented by time studies or on timesheets indicating time actually spent on each program.
 - (2) Facility expenses for a building housing multiple programs will be allocated based on the number of square feet used by each program as documented by a building-use study.
 - (3) Raw food expenses will be allocated based on the documented monthly meal counts.
- b. Maintain documentation that supports the allocation of a cost to each program based on the methodology developed pursuant to No. 1(a) above. Examples of this type of documentation include, but are not limited to the following.
- (1) Time studies
 - (2) Vehicle use studies
 - (3) Building use studies
2. To be allowable under a grant award, costs must also meet the following criteria.
- a. Be necessary and reasonable for proper and efficient performance and administration of fund awards
 - b. Conform to any limitations or exclusions set forth in these Instructions, or other governing limitations as to type or amount of cost items
 - c. Be consistent with policies and procedures that apply uniformly to fund financed and other activities of the organization
 - d. Be accorded consistent treatment
 - e. Be determined in accordance with generally accepted accounting principles
 - f. Be adequately documented
3. If a reimbursed cost is later disallowed, it must be repaid to the State.

GIR-09-10 SUBJECT: DISBURSEMENT OF FUNDS

1. Funds will be reimbursed on a monthly or quarterly basis.
 - a. Any deviation from the standard monthly or quarterly reimbursement will require GMU approval.
 - b. Grantees must submit a Request for Funds to the GMU, as per the grant agreement. The Request for Funds must be completed in full. Questionable costs, incomplete fields or mathematical inaccuracies will result in a delay of funds being issued and the Request for Funds may be returned to the Grantee for corrections.
 - c. **Grantees must not submit requests with a negative balance in any category.**
 - d. Documentation supporting the request for funds must be submitted along with the request in the form of a detailed transaction list, by budget category, with the specific funding source identified, that balances to the request. The transaction list and supporting documents must be kept on file for review at the time of the Department's fiscal monitoring. The detailed transaction list must include, at a minimum, category, check number, date of payment, payee, and amount of payment. This may be in the form of an Excel spreadsheet if the Grantee does not have an accounting software package that generates the transaction list. More detail (such as copies of purchase orders, invoices, receipts, and payroll registers) may be required at the discretion of the GMU and the DHHS Fiscal Unit.
2. In special circumstances, advances may be allowed.
 - a. A Grantee may submit a request for advance funds if the agency does not have sufficient working capital to operate the program on a reimbursement basis. Advances may be utilized to cover up to 60 days of routine expenses. An Advance Request form must be submitted indicating the reason for the advance along with Commercial Crime

Insurance coverage that covers the amount of the advance. An advance will be paid upon the approval of the completed request forms. Until the advance is paid back, the amount must be accounted for and reduced from the total and available funds on all Requests for Funds. Advances must be fully repaid on or before the final Request for Funds for the grant period.

- b. Misappropriation of advance funds will result in immediate probationary action and possible withholding of any future grant funds.
- c. Advances must be repaid at year-end.
3. Late fees, NSF fees, credit card interest charges, and reconnect fees are not allowable.
4. When billing for certain travel expenses, a Travel Reimbursement Request form must be utilized to detail the specific trip.
 - a. This requirement applies only to overnight travel and any trip that requires airfare, whether in-state or out-of-state.
 - b. Reimbursement is allowed in accordance with the grantee's established policies or up to the U.S. General Services Administration (GSA) rate established for the employee's destination, whichever is less. An exception may be made for lodging that is procured at a prearranged place such as a hotel when a meeting, conference or training session is held.
 - c. The Travel Reimbursement Request form, along with the instructions for completing it, may be found online at http://dhhs.nv.gov/Grants/Sitemap_Grants.htm#Forms.

GIR-09-11 SUBJECT: BUDGET MODIFICATIONS

1. All transfers between budget categories (or program categories for CSBG) require a Budget Modification Request (BMR) form. Proposed expenditures must be consistent with approved goals for the current grant agreement. Approved BMRs must be received by the Grantee prior to implementation of request.
2. Requests for budget modifications must be made prior to expenditure of funds for non-budgeted items. Failure to request modifications in advance of expenditures may result in not receiving reimbursement for the expenditures.
3. Changing line items within a budget category (or for CSBG, changing budget categories within program categories) requires approval by the Grant Manager, which must be documented in writing (may be via email).
4. Modifications up to and including \$1,000 may be approved by the Grant Manager, subject to the guidelines above.
5. Modifications between \$1,001 and \$5,000 or 10% of the Grant amount, whichever is less, requires prior approval from the Chief of the GMU or an authorized designee.
6. Modifications that exceed \$5,000 or 25% of the Grant amount, whichever is less, requires prior approval from the Chief of the GMU and the Deputy Director of Fiscal Services or an authorized designee.
7. Multiple modifications may require additional justification and approval.

GIR-09-12 SUBJECT: PAYOUT OF ACCRUED LEAVE

Use of grant funds to payout accrued leave and/or compensatory time upon separation from service requires prior review and approval by the Department.

GIR-09-13 SUBJECT: HANDLING ACCOUNTS PAYABLE AT END OF GRANT YEAR

1. All goods and services received by the last day of the program's grant year, but not yet paid, are to be treated as an accounts payable of that grant year.
2. Notice of deadlines for fiscal year-end will be communicated to Grantees by the GMU Chief prior to the end of the fiscal year.
3. Per State Administrative Manual (SAM) 2622.0, an administrative fee may be assessed for processing a stale claim. A stale claim is any claim not filed by the fiscal year-end deadline referenced in No. 2 above.

**GIR-09-14 SUBJECT: PROCEDURES FOR PROCESSING CARRYOVER OF FUNDS
FOR FHN AND PROBLEM GAMBLING GRANTS ONLY**

1. Grantees may have an opportunity to carryover funds from Year 1 to Year 2 of the grant cycle. Approval of a carryover from Year 1 to Year 2 will depend on the availability of funds, the Grantee's progress to achieve project goals, and other factors deemed relevant by the Department.
2. Requests for carryover must be submitted to the Department in writing with an explanation as to why the funds were not expended in Year 1 and how the carryover funds will be used in Year 2.
3. The Deputy Director of Fiscal Services and the Deputy Director of Program Services reserve the right to deny requests for carryover of funds if fiscal concerns exist or significant progress has not been made to achieve project goals.
4. Grant funds not expended at the end of Year 2 will revert to the funding source unless otherwise specified in the grant agreement.
5. Grant amendments will be generated and kept on file by the GMU and the Grantee.

FOR CSBG GRANTS ONLY

6. Grantees will be allowed to carryover funds from one grant year to the next year consistent with the requirements specified in the CSBG Act, funding formula, and/or instructions contained in the congressional appropriation.
7. A Budget Amendment must be submitted to request the incorporation of carryover funds into the current year budget.

FOR FRC, F2F, CTF, and TXX

8. Funds may not be carried over from one fiscal year to the next. Grant funds not expended at the end of the fiscal year will revert to the appropriate funding source.

GI-09-15 SUBJECT: EQUIPMENT AND INVENTORY REQUIREMENTS

1. Grantees must establish a system of accounting for all equipment purchases of \$1,000 or more and for computer and software purchases of any amount. The system must include, at a minimum, a listing of all equipment purchased with grant funds, the date purchased, the funding source, the physical location and disposition.
2. An ongoing inventory must be maintained for all items purchased with grant funds that meet all of the following criteria.
 - a. Has an anticipated useful life extending beyond one year
 - b. Is not consumed in use
 - c. Is not attached permanently as a non-movable fixture
 - d. Had a purchase price of \$1,000 or more, or is a computer or software.
3. Grant Managers may also request that Grantees inventory certain other items (e.g., GPS systems and webcams).
4. Grantees should conduct a physical inventory periodically (no less than annually) and compare it to the written records. If a Grantee has equipment or property purchased with grant funds they no longer use, a listing of the items must be sent to the GMU.
5. Following termination of a grant under the GMU, the Department may direct the Grantee to retain, transfer, or liquidate equipment and non-consumable materials purchased with grant funds. If equipment is liquidated, use of the proceeds must be approved by the Department.
6. In addition to these requirements, F2F and FRC have additional inventory requirements stated in No. 7.

GRANT INSTRUCTION FOR F2F AND FRC GRANTEEES ONLY

7. All F2F and FRC programs shall develop policies and procedures to ensure that a current inventory is developed and maintained.

- a. An annual physical count of all material and equipment purchased with F2F or FRC funds must be conducted.
- b. All equipment and other items purchased with F2F or FRC funds is considered property of the State of Nevada, DHHS. If any agency no longer provides F2F or FRC services, these items will be transferred to an agency that is providing F2F or FRC services.

GIR-09-16 SUBJECT: RETENTION AND DISPOSAL OF PROJECT DOCUMENTS

1. Financial records, supporting documents, statistical records, and all other records pertinent to a grant agreement must be retained for a period of three years from the date of the submission of the final expenditures report. Consequently, if no litigation, claims, or audits are pending that involved project records, Grantee staff may dispose of materials three or more years subsequent to the submission of the final expenditures or financial status reports. If any litigation, claim, or audit is started before the end of the three-year period, then all pertinent documents must be retained until all actions involving the records have been resolved.
2. During the three-year retention period or any extended period resulting from litigation, claims, or audits, the Deputy Director of Fiscal Services or any of the Department's duly authorized representatives shall have access to any pertinent books, documents, papers, or records of Grantees to make audits, examinations, excerpts, and transcripts.

GIR-09-17 SUBJECT: RISK ASSESSMENT

The Grantor shall, at least once during each grant year, assess the risk level of each Grantee. The assessment will be based on criteria determined by the GMU and the Fiscal Unit. Results may be considered when determining the frequency of program and/or fiscal reviews, the need for special award conditions (GIR-09-20), whether the Grantee is eligible to receive incentive funding and/or carryover funds, and in other administrative decisions.

GIR-09-18 SUBJECT: PROCEDURES FOR FISCAL MONITORING AND ADMINISTRATIVE REVIEW OF ADVERSE FINDINGS

1. The Department may, at its discretion, conduct a fiscal monitoring of a Grantee at any time during or after a grant year.
2. For scheduled fiscal monitorings, each Grantee will be notified in writing at least three weeks prior to the visit. A letter will be sent indicating the documents that must be available to the fiscal monitor prior to their visit and/or during their visit to the Grantee's location.
3. If the Department attempts to perform a fiscal monitoring and discovers that adequate records do not exist or the condition of the records is such that a fiscal monitoring cannot be completed, the Department will issue written notification that the Grantee:
 - a. Will be placed on Probation, and
 - b. May be subject to withholding of any further funding from the Department until the deficiencies are corrected and the fiscal monitoring is completed.
4. Within two weeks following completion of the Department fiscal monitoring, the Grantee will receive a preliminary report that specifies the findings of the Department, subsequent recommendations, and a deadline for responding to the preliminary report.
5. If the Grantee is in agreement with the preliminary report, it will be considered the final report.
6. If the Grantee is not in agreement, the Grantee must submit, within the time frame specified in the preliminary report, a written response with any disagreement of adverse findings. Adverse findings are defined as follows.
 - a. Lack of Adequate Records: The Department determines that either sufficient records do not exist or the records are not in a condition to allow the Department to perform a fiscal monitoring.

- b. **Administrative Findings:** Include those findings that represent weaknesses in the internal accounting and administrative controls but do not include questioned costs or costs recommended for disallowance.
 - c. **Questioned Costs:** Costs charged to a grant that cannot be supported by documentation. With approved documentation, questioned costs may become allowable. Without documentation, they will become disallowed costs.
 - d. **Costs Recommended for Disallowance:** Costs that are in direct violation of State policies.
7. It will be necessary to submit to the Department a listing of each point of disagreement and justifications for each disagreement. Within two weeks of receipt of the Grantee's written response, the Department will review and consider the points and justification of disagreement. If warranted, the Department will make corrections and/or adjustments to the report and issue an amended final report.
 8. If the Grantee remains in disagreement and can furnish additional supportive documentation, a request for an administrative review must be made in writing to the Deputy Director of Fiscal Services within sixty (60) days of the receipt of the final report. For purposes of calculating date of receipt, the Department will use three (3) working days from the date of the final report.
 9. Upon receipt of the request for administrative review, the Grantee will be notified by letter of the date for the Grantee to present their issues of disagreement.
 10. The Department shall review the disagreement issues, supporting documentation, and the Department files and forward a decision to the Grantee in writing.

GIR-09-19 SUBJECT: PROCEDURES FOR PROGRAM SITE VISITS AND MONITORING

1. Formal site visits with program monitoring will be conducted by Grant Managers at a predetermined and mutually agreed upon time.
2. Grantees will be provided with a copy of the monitoring template to review and prepare for the meeting in advance. Required materials must be available at the meeting.
3. Site visits will be documented with a standard report to be provided to the Grantee within six weeks of the site visit. These reports will be kept on file with the grant records.
4. Additional site visits without advance notice may be performed at a Grantee location at any time.

GIR-09-20 SUBJECT: CORRECTIVE ACTIONS

If a Grantee does not meet expectations, the GMU may apply corrective actions including special award conditions, probation, or termination. This section describes the reasons, consequences, and process associated with each option. In each case, enforcement of the appropriate consequences is at the discretion of the Department Director. Any level of corrective action may be applied at any time; options may not be applied sequentially.

1. Special Award Conditions

- a. Reasons a Grantee may be subject to special award conditions include, but are not limited to, the following.
 - (1) History of poor performance
 - (2) Financial instability
 - (3) Management system that does not reasonably assure grant compliance and accurate accounting records.
 - (4) Insufficient governance structure
 - (5) Non-compliance with the terms and conditions of a previous award
- b. Consequences related to special award conditions may include, but are not limited to, the following.
 - (1) Additional reporting
 - (2) Backup documentation
 - (3) Audit

- (4) Accreditation
 - (5) Additional site visits by program and/or fiscal staff, with or without advance notice
 - c. The process for imposing special conditions and/or requirements may be initiated, as needed, at the beginning of the grant period or at any time within the grant period. The special conditions and/or requirements will remain in force until staff determines that the precipitating issues have been resolved. If the GMU determines that special conditions and/or requirements are necessary, the Grantee will be provided with written notification that includes the following.
 - (1) Nature of the additional requirements
 - (2) Reason(s) for the additional requirements
 - (3) Nature of the corrective actions needed
 - (4) Time allowed for completing the corrective actions
- 2. Probationary Status**
- a. Reasons a Grantee may be placed on probation include, but are not limited to, the following.
 - (1) Unwillingness or inability to comply with special conditions and requirements as described in Section 1 of this GIR
 - (2) Non-compliance with Federal or State rules and regulations
 - (3) Non-compliance with the Department's GIRS
 - (4) Inability or unwillingness to properly manage the program
 - (5) Non-compliance with the approved grant application terms and conditions
 - (6) Non-submission of required reporting or failure to submit reports in a timely manner
 - (7) Significant findings by an independent auditor that affects the programs funded by the Department and/or classification as high-risk by an independent audit
 - (8) Non-compliance with applicable OMB Circulars
 - (9) Classification by the Department as high risk and there has been no significant improvement to correct deficiencies
 - b. Consequences related to probationary status may include, but are not limited to, the following.
 - (1) The Grantee may not be eligible for any supplemental funding.
 - (2) The Grantee may not be allowed to receive any grant payments in advance but may be reimbursed on an actual cost basis.
 - (3) If the Grantee receives Federal funding and its financial management system fails to produce accurate, current and complete disclosure of the financial results of each federally funded grant in accordance with the reporting requirements set forth in 2 CFR 215, as applicable, then the Grantee may be prohibited from receiving advance funding.
 - (4) The Grantee may be required to appear before the appropriate GMU advisory committee.
 - c. The process for implementing probationary status and monitoring progress toward corrective action is as follows.
 - (1) The Department will notify the Grantee of probationary status in writing, citing the reasons for that action, and will meet with the Grantee to determine the current status of the program with regard to budget, original goals or any other areas of concern.
 - (2) The Grantee may be required to submit new goals, budgets, or other corrective plans and a strategy for achieving those goals, within two weeks of request, to the Grant Manager for approval.
 - (3) The Department will respond to the corrective action plan within two weeks of receipt. The Grantee may be asked to make modifications.
 - (4) Progress on the corrective action plan will be reviewed by the Department every 60 days.

- (5) When the corrective actions have been completed, the Deputy Director of Fiscal or Program Services may remove the probationary status. The appropriate GMU advisory committee will be informed of this decision at their next scheduled meeting.

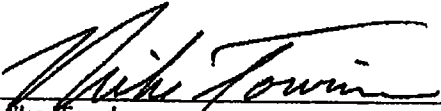
3. Termination

Grants may be terminated by the Department Director in accordance with the General Conditions that are incorporated with the Grant Agreement. A grant may be terminated at any time during the grant year.

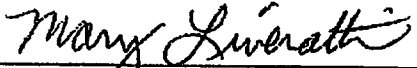
- a. Reasons a Grantee may be subject to termination include, but are not limited to, the following.
 - (1) Unwillingness or inability to comply with special award conditions and requirements as described in Section 1 of this GIR
 - (2) Unwillingness or inability to meet the terms of probation as described in Section 2 of this GIR
 - (3) Conduct that interferes with the administration of the grant or negatively impacts the ability to provide effective program services
 - (4) Illegal activity of any kind
 - (5) Insolvency
 - (6) Failure to disclose a conflict of interest
 - (7) Influence by a gratuity
 - (8) Any violations of the terms of the grant agreement
- b. A no-fault termination may occur at any time during the grant year. Reasons a grant may be terminated on a no-fault basis include, but are not limited to, the following.
 - (1) The State and the Grantee mutually agree to termination without cause.
 - (2) Funding from the State and/or Federal sources is not appropriated or is withdrawn, limited, or impaired.
 - (3) Other extenuating circumstances exist that render continuation by the State impossible.
- c. Consequences of termination may include, but are not limited to, the following.
 - (1) Repayment to the State of any outstanding advance
 - (2) Non-reimbursement for any grant-related expenses incurred after the termination effective date
 - (3) Transfer or liquidation of all equipment and non-consumables purchased with grant funds during the grant period (including equipment with an original purchase price of \$1,000 or more, all computers and software regardless of original purchase price, and any other items the State has required the Grantee to inventory during the course of the grant)
 - (4) Surrender of any and all documents related to the grant that the State deems necessary
- d. The process for implementing grant termination under Section 3a of this GIR is as follows.
 - (1) The State will notify the Grantee in writing.
 - (2) The State will schedule a meeting of the appropriate advisory body (i.e., the Grants Management Advisory Committee or the Advisory Committee on Problem Gambling) to serve as a public hearing and will ensure that the meeting is in compliance with the Nevada open meeting law.
 - (3) The advisory body will review the State's decision, provide an opportunity for the Grantee to offer testimony, and will make a recommendation to the Department Director.
 - (4) The Director's decision will be final and will be effective immediately upon receipt of a written notice to the Grantee (or any date specified therein).
- e. The process for implementing grant termination under Section 3b of this GIR is as follows.
 - (1) The State will notify the Grantee in writing.

- (2) A public hearing will not be scheduled.
- (3) Termination will be effective immediately upon receipt of the written notice (or any date specified therein).

APPROVED:



Mike Torvinen
Deputy Director of Fiscal Services
Date: 7/9/09



Mary Liverati
Deputy Director of Program Services
Date: 7/9/09

ASSURANCES

FORM 7

A signature below indicates that the applicant is capable of and agrees to meet the following requirements, and that all information contained in this proposal is true and correct.

1. Adopt and maintain a system of internal controls which results in the fiscal integrity and stability of the organization, including the use of Generally Accepted Accounting Principles (GAAP).
2. Compliance with state insurance requirements for general, professional, and automobile liability; workers' compensation and employer's liability; and, if advance funds are required, commercial crime insurance.
3. These grant funds will not be used to supplant existing financial support for current programs.
4. No portion of these grant funds will be subcontracted without prior written approval unless expressly identified in the grant agreement.
5. Compliance with the requirements of the Civil Rights Act of 1964, as amended, and the Rehabilitation Act of 1973, P.L. 93-112, as amended, and any relevant program-specific regulations, and shall not discriminate against any employee for employment because of race, national origin, creed, color, sex, religion, age, disability or handicap condition (including AIDS and AIDS-related conditions).
6. Compliance with the Americans with Disabilities Act of 1990 (P.L. 101-136), 42 U.S.C. 12101, as amended, and regulations adopted there under contained in 28 CFR 26.101-36.999 inclusive, and any relevant program-specific regulations.
7. Certification that neither the grantee nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency. This certification is made pursuant to regulations implementing Executive Order 12549, Debarment and Suspension, 28 C.F.R. pt. 67 § 67.510, as published as pt. VII of May 26, 1988, Federal Register (pp. 19150-19211).
8. No funding associated with this grant will be used for lobbying. The attached statement on lobbying applies specifically to grants from the Fund for a Healthy Nevada.
9. Disclosure of any existing or potential conflicts of interest relative to the performance of services resulting from this grant award.
10. Provision of a work environment in which the use of tobacco products, alcohol, and illegal drugs will not be allowed.
11. Compliance with Grant Instructions and Requirements from the Grants Management Unit (available online at <http://dhhs.nv.gov/Grant/Grantee%20Forms/GINS.pdf>).

Name of Organization

Signature of Authorized Representative

Date

Name and Title (typed)

Department of Human Resources, Director's Office
Grants Management Unit

GENERAL CONDITIONS

1. Nothing contained in this Agreement is intended to, or shall be construed in any manner, as creating or establishing the relationship of employer/employee between the parties. The Grantee shall at all times remain an "independent contractor" with respect to the services to be performed under this Agreement. The Department shall be exempt from payment of all Unemployment Compensation, FICA, retirement, life and/or medical insurance and Workers' Compensation Insurance as the Grantee is an independent entity.
2. The Grantee shall hold harmless, defend and indemnify the Department from any and all claims, actions, suits, charges and judgments whatsoever that arise out of the Grantee's performance or nonperformance of the services or subject matter called for in this Agreement.
3. The Department or Grantee may amend this Agreement at any time provided that such amendments make specific reference to this Agreement, and are executed in writing, and signed by a duly authorized representative of both organizations. Such amendments shall not invalidate this Agreement, nor relieve or release the Department or Grantee from its obligations under this Agreement.

The Department may, in its discretion, amend this Agreement to conform with federal, state or local governmental guidelines, policies and available funding amounts, or for other reasons. If such amendments result in a change in the funding, the scope of services, or schedule of the activities to be undertaken as part of this Agreement, such modifications will be incorporated only by written amendment signed by both the Department and Grantee.

4. Either party may terminate this Agreement at any time by giving written notice to the other party of such termination and specifying the effective date thereof at least 30 days before the effective date of such termination. Partial terminations of the Scope of Work in Attachment A may only be undertaken with the prior approval of the Department. In the event of any termination for convenience, all finished or unfinished documents, data, studies, surveys, reports, or other materials prepared by the Grantee under this Agreement shall, at the option of the Department, become the property of the Department, and the grantee shall be entitled to receive just and equitable compensation for any satisfactory work completed on such documents or materials prior to the termination.

The Department may also suspend or terminate this Agreement, in whole or in part, if the Grantee materially fails to comply with any term of this Agreement, or with any of the rules, regulations or provisions referred to herein; and the Department may declare the Grantee ineligible for any further participation in the Department's Grant Agreements, in addition to other remedies as provided by law. In the event there is probable cause to believe the Grantee is in noncompliance with any applicable rules or regulations, the Department may withhold funding as outlined in Grant Instruction and Requirement (GIR) 09-18(3).

Lobbying

- A Healthy Nevada grantee shall not use grant funds for any activity related to:

1. Any attempt to influence the outcome of any Federal, State or local election, referendum, initiative or similar procedure, through in kind or cash contributions, endorsements, publicity or a similar activity.

2. Establishing, administering, contributing to or paying the expenses of a political party, campaign, political action committee or other organization established for the purpose of influencing the outcome of an election, referendum, initiative or similar procedure.

3. Any attempt to influence:

(a) The introduction or formulation of Federal, State or local legislation; or

(b) The enactment or modification of any pending Federal, State or local legislation, through communication with any member or employee of Congress, the Nevada Legislature or a local governmental entity responsible for enacting local legislation, including, without limitation, efforts to influence State or local officials to engage in a similar lobbying activity, or through communication with any governmental official or employee in connection with a decision to sign or veto enrolled legislation.

4. Any attempt to influence the introduction, formulation, modification or enactment of a Federal, State or local rule, regulation, executive order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity through communication with any officer or employee of the United States Government, the State of Nevada or a local governmental entity, including, without limitation, efforts to influence State or local officials to engage in a similar lobbying activity.

5. Any attempt to influence:

(a) The introduction or formulation of Federal, State or local legislation;

(b) The enactment or modification of any pending Federal, State or local legislation; or

(c) The introduction, formulation, modification or enactment of a Federal, State or local rule, regulation, executive order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity, by preparing, distributing or using publicity or propaganda, or by urging members of the general public or any segment thereof to contribute to or participate in any mass demonstration, march, rally, fundraising drive, lobbying campaign or letter writing or telephone campaign.

6. Legislative liaison activities, including, without limitation, attendance at legislative sessions or committee hearings, gathering information regarding legislation and analyzing the effect of legislation, when such activities are carried on in support of or in knowing preparation for an effort to engage in an activity prohibited pursuant to subsections 1 to 5, inclusive.

7. Executive branch liaison activities, including, without limitation, attendance at hearings, gathering information regarding a rule, regulation, executive order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity and analyzing the effect of the rule, regulation, executive order, program, policy or position, when such activities are carried on in support of or in knowing preparation for an effort to engage in an activity prohibited pursuant to subsections 1 to 5, inclusive.

- A Healthy Nevada grantee may, to the extent and in the manner authorized in its grant, use grant funds for any activity directly related to educating persons in a nonpartisan manner by providing factual information in a manner that is:

1. Made in a speech, article, publication or other material that is distributed and made available to the public, or through radio, television, cable television or other medium of mass communication; and

2. Not specifically directed at:

(a) Any member or employee of Congress, the Nevada Legislature or a local governmental entity responsible for enacting local legislation;

(b) Any governmental official or employee who is or could be involved in a decision to sign or veto enrolled legislation; or

(c) Any officer or employee of the United States Government, the State of Nevada or a local governmental entity who is involved in introducing, formulating, modifying or enacting a Federal, State or local rule, regulation, executive order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity.

This provision does not prohibit a grantee or an applicant for a grant from providing information to the Task Force that is directly related to the grant or the application for the grant.



DISTRICT HEALTH DEPARTMENT

STAFF REPORT

BOARD MEETING DATE: 8/27/09

DATE: August 14, 2009

TO: District Board of Health

FROM: Patsy Buxton, Fiscal Compliance Officer, Washoe County Health District
775-328-2418, pbuxton@washoecounty.us ^{PB}

THROUGH: Eileen Coulombe, Administrative Health Services Officer ^{EC}

SUBJECT: Approval of Subgrant Amendment #1 from the Nevada State Health Division, Bureau of Child, Family and Community Wellness, for the Women, Infants and Children (WIC) Clinic Grant program that extends the term of the grant period for one year, through September 30, 2010 (current award amount totals \$1,200,096) ; and if approved authorize the Chairman to execute the Subgrant Amendment.

SUMMARY

The Washoe County District Board of Health must approve and execute, or direct the Health Officer to execute, contracts in excess of \$50,000, Interlocal Agreements and amendments to the adopted budget. The Washoe County Health District has received a Subgrant Amendment from the Nevada State Health Division that extends the grant period for the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) one year, through September 30, 2010. A copy of the Subgrant Amendment is attached.

GOAL

Approval of this Subgrant Amendment supports the Washoe County Health District's Special Supplemental Nutrition Program for Women, Infants and Children (WIC) mission. It is to provide supplemental nutritious foods, nutrition education and referrals to other health and social services to eligible pregnant and postpartum women, infants and children up to age five in Washoe County to prevent the occurrence of health problems and to improve the health status of these persons.

AGENDA ITEM # 7.c.5.

1001 EAST NINTH STREET / P.O. BOX 11130, RENO, NEVADA 89520 (775) 328-2400 FAX (775) 328-2279

www.washoecounty.us/health

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PREVIOUS ACTION

The District Board of Health approved last year's base Notice of Subgrant Award for the period October 1, 2008 through September 30, 2009 in the total amount of \$1,200,096 on October 23, 2008.

BACKGROUND

In the current Notice of Subgrant award, the Washoe County Health District agrees to provide a level of service sufficient to provide WIC food instruments to an estimated 7,200 participants per month for a total of 86,400 participants per year during the term of this subgrant. In turn, the Nevada State Health Division, through this award will reimburse the Washoe County Health District \$13.89 per participant served.

A second amendment that provides funding for the period October 1, 2009 through September 30, 2010 will be processed after the Nevada State Health Division evaluates the projected participation levels and receives the allocation estimate from the United States Department of Agriculture (USDA) Food and Nutrition Service.

FISCAL IMPACT

There is no fiscal impact associated with the approval of the Subgrant Amendment.

RECOMMENDATION

Staff recommends that the Washoe County District Board of Health approve the Subgrant Amendment #1 from the Nevada State Health Division, Bureau of Child, Family and Community Wellness, for the Women, Infants and Children (WIC) Clinic Grant program that extends the term of the grant period for one year, through September 30, 2010 (current award amount totals \$1,200,096); and if approved authorize the Chairman to execute the Subgrant Amendment.

POSSIBLE MOTION

Move to approve the Subgrant Amendment #1 from the Nevada State Health Division, Bureau of Child, Family and Community Wellness, for the Women, Infants and Children (WIC) Clinic Grant program that extends the term of the grant period for one year, through September 30, 2010 (current award amount totals \$1,200,096); and if approved authorize the Chairman to execute the Subgrant Amendment.

Nevada Department of Health and Human Services
HEALTH DIVISION
 (hereinafter referred to as the DIVISION)

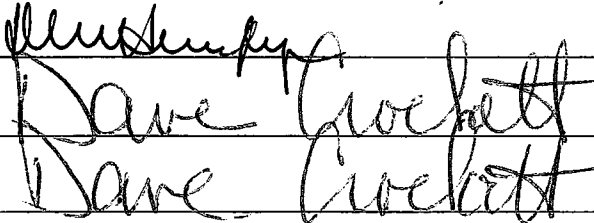


HD Amendment #: 1
 HD Contract #: 09077
 Budget Account #: 3214
 Category #: 04
 GL #: 8516

SUBGRANT AMENDMENT #1

<u>Program Name:</u> WIC- Women, Infants and Children Bureau of Child, Family and Community Wellness Nevada State Health Division		<u>Subgrantee Name:</u> Washoe County District Health Department –WIC 10-10031	
<u>Address:</u> 3427 Goni Road, Suite 108 Carson City, NV 89706		<u>Address:</u> 1009 East 9 th Street/P.O. Box 11130 Reno, NV 89520	
<u>Original Subgrant Period:</u> October 1, 2008 through September 30, 2009		<u>Subgrantee EIN#:</u> 88-6000138	
		<u>Subgrantee Vendor#:</u> T41107900	
<u>Source of Funds:</u>	<u>% of Funds:</u>	<u>CFDA#:</u>	<u>Federal Grant #:</u>
1. WIC Nutrition Services/Administration	100	10-577 10.557	7NV700NV7

Amendment #1: This amendment extends the grant period for one year, through September 30, 2010.

By signing this Amendment, the Authorized Subgrantee Official or their designee, Program Manager, Bureau Chief, and Health Division Administrator acknowledge the above as the new standard of practice for the above referenced Subgrant. Further, the undersigned understand this amendment does not alter, in any substantial way, the non-referenced contents of the Original Subgrant Award and all of its Attachments.

Authorized Sub-grantee Official Title	Signature	Date
David Crockett Program Manager		8/27/09
Maria Canfield Bureau Chief		7-2-09
Richard Whitley, MS Administrator, Health Division		7-2-09

CM

HEALTH DIVISION

(hereinafter referred to as the DIVISION)

Budget Account #: 3214
 Category #: 04
 GL #: 8516

NOTICE OF SUBGRANT AWARD

Program Name: WIC –Women, Infants and Children Bureau of Family Health Services Nevada State Health Division		Subgrantee Name: Washoe County District Health Department WIC 10-10031	
Address: 3427 Goni Road, Suite 108 Carson City, NV 89706-		Address: 1009 East 9th Street/P.O. Box 11130 Reno, NV 89520	
Subgrant Period: October 1, 2008 through September 30, 2009		Subgrantee EIN#: 88-6000138	
		Subgrantee Vendor#: T41107900	
Reason for Award: Provide funding for operation of WIC clinics			
County(ies) to be served: () Statewide (x) Specific county or counties: Washoe			
Approved Budget Categories:			
1. Personnel	\$		
2. Travel	\$		
3. Operating	\$		
4. Equipment	\$		
5. Contractual/Consultant	\$		
6. Training	\$		
7. Other	\$	1,200,096	
Total Cost		\$	1,200,096
Disbursement of funds will be as follows: Payment will be made upon receipt and acceptance of an invoice and supporting documentation specifically requesting reimbursement for actual expenditures <i>specific to this subgrant</i> . Total reimbursement will not exceed \$1,200,096.00 during the subgrant period.			
Source of Funds:	% of Funds:	CFDA#:	Federal Grant #:
1. WIC Nutrition Services/Administration	100	10-577 10-557	7NV700NV7
Terms and Conditions In accepting these grant funds, it is understood that: 1. Expenditures must comply with appropriate state and/or federal regulations. 2. This award is subject to the availability of appropriate funds. 3. Recipient of these funds agrees to stipulations listed in Sections A, B, and C of this subgrant award.			
Authorized Sub-grantee Official Title	Signature		Date
David Crockett Program Manager			10/27/08
Juana Wright Business Chief			9-3-08
Richard Whitley, MS Administrator, Health Division			11-7-08

CRW

**HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION A
Assurances**

As a condition of receiving subgranted funds from the Nevada State Health Division, the Subgrantee agrees to the following conditions:

1. Subgrantee agrees grant funds may not be used for other than the awarded purpose. In the event Subgrantee expenditures do not comply with this condition, that portion not in compliance must be refunded to the Health Division.
2. Subgrantee agrees to submit reimbursement requests for only expenditures approved in the spending plan. Any additional expenditures beyond what is allowable based on approved categorical budget amounts, without prior written approval by the Health Division, may result in denial of reimbursement.
3. Approval of subgrant budget by the Health Division constitutes prior approval for the expenditure of funds for specified purposes included in this budget. Unless otherwise stated in the Scope of Work the transfer of funds between budgeted categories without written prior approval from the Health Division is not allowed under the terms of this subgrant. Requests to revise approved budgeted amounts must be made in writing and provide sufficient narrative detail to determine justification.
4. Recipients of subgrants are required to maintain subgrant accounting records, identifiable by subgrant number. Such records shall be maintained in accordance with the following:
 - a. Records may be destroyed not less than three years (unless otherwise stipulated) after the final report has been submitted if written approval has been requested and received from the Administrative Services Officer of the Health Division. Records may be destroyed by the subgrantee five (5) calendar years after the final financial and narrative reports have been submitted to the Health Division.
 - b. In all cases an overriding requirement exists to retain records until resolution of any audit questions relating to individual subgrants.

Subgrant accounting records are considered to be all records relating to the expenditure and reimbursement of funds awarded under this Subgrant Award. Records required for retention include all accounting records and related original and supporting documents that substantiate costs charged to the subgrant activity.

5. Subgrantee agrees to disclose any existing or potential conflicts of interest relative to the performance of services resulting from this subgrant award. The Health Division reserves the right to disqualify any grantee on the grounds of actual or apparent conflict of interest. Any attempt to intentionally or unintentionally conceal or obfuscate a conflict of interest will automatically result in the disqualification of funding.
6. Subgrantee agrees to comply with the requirements of the Civil Rights Act of 1964, as amended, and the Rehabilitation Act of 1973, P.L. 93-112, as amended, and any relevant program-specific regulations, and shall not discriminate against any employee or offeror for employment because of race, national origin, creed, color, sex, religion, age, disability or handicap condition (including AIDS and AIDS-related conditions).
7. Subgrantee agrees to comply with the Americans with Disabilities Act of 1990 (P.L. 101-136), 42 U.S.C. 12101, as amended, and regulations adopted thereunder contained in 28 CFR 26.101-36.999 inclusive, and any relevant program-specific regulations.
8. Subgrantee agrees to comply with the requirements of the Health Insurance Portability and Accountability Act of 1996, 45 C.F.R. 160, 162 and 164, as amended. If the subgrant award includes functions or activities that involve the use or disclosure of Protected Health Information, the Subgrantee agrees to enter into a Business Associate Agreement with the Health Division, as required by 45 C.F.R 164.504 (e).

9. Subgrantee certifies, by signing this subgrant, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency. This certification is made pursuant to regulations implementing Executive Order 12549, Debarment and Suspension, 28 C.F.R. pt. 67 § 67.510, as published as pt. VII of May 26, 1988, Federal Register (pp.19150-19211). This provision shall be required of every sub-grantee receiving any payment in whole or in part from federal funds.
10. Subgrantee agrees, whether expressly prohibited by federal, state, or local law, or otherwise, that no funding associated with this subgrant will be used for any purpose associated with or related to lobbying or influencing or attempting to lobby or influence for any purpose the following:
 - a. any federal, state, county or local agency, legislature, commission, counsel, or board;
 - b. any federal, state, county or local legislator, commission member, counsel member, board member, or other elected official; or
 - c. any officer or employee of any federal, state, county or local agency, legislature, commission, council, or board.
11. Health Division subgrants are subject to inspection and audit by representatives of the Health Division, Nevada Department of Health and Human Services, the State Department of Administration, the Audit Division of the Legislative Counsel Bureau or other appropriate state or federal agencies to
 - a. verify financial transactions and determine whether funds were used in accordance with applicable laws, regulations and procedures;
 - b. ascertain whether policies, plans and procedures are being followed;
 - c. provide management with objective and systematic appraisals of financial and administrative controls, including information as to whether operations are carried out effectively, efficiently and economically; and
 - d. determine reliability of financial aspects of the conduct of the project.

Any audit of Subgrantee's expenditures will be performed in accordance with Generally Accepted Government Auditing Standards to determine there is proper accounting for and use of subgrant funds. It is the policy of the Health Division (as well as a federal requirement as specified in the Office of Management and Budget (OMB) Circular A-133 [Revised June 27th, 2003]) that each grantee annually expending \$500,000 or more in federal funds have an annual audit prepared by an independent auditor in accordance with the terms and requirements of the appropriate circular. A COPY OF THE FINAL AUDIT REPORT MUST BE SENT TO THE NEVADA STATE HEALTH DIVISION, ATTN: ADMINISTRATIVE SERVICES OFFICER IV, 4150 TECHNOLOGY WAY, SUITE 300, CARSON CITY, NEVADA 89706-2009, within nine (9) months of the close of the Subgrantee's fiscal year.

**HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION B**

Description of services, scope of work deliverables and reimbursement

Washoe County District Health Department WIC, hereinafter referred to as Subgrantee, agrees to provide the following services for the State of Nevada Women, Infant, and Children (WIC) program:

- I. **GENERAL:** Subgrantee shall operate using the following guidelines:
- A. Comply with the fiscal and operational requirements prescribed by the State of Nevada WIC Program pursuant to 7CFR part 246, 7CFR part 3016, the debarment and suspension requirements of 7 CFR part 3017, if applicable, the lobbying restrictions of 7 CFR part 3018, and FNS guidelines and instructions;
 - B. Have at least one competent professional authority (CPA) on the staff of the local agency who possesses the necessary skills to perform certification procedures;
 - C. Provide nutrition education services to participants, in compliance with 7CFR part 246.11 and FNS guidelines and instructions;
 - D. Implement a food delivery system prescribed by the state pursuant to 7CFR part 246.12 and approved by FNS;
 - E. Inform and facilitate the delivery of appropriate health services to WIC participants, and in the case of referrals, have current written agreements in place with health care providers;
 - F. Maintain and have available for review, audit, and evaluation all criteria used for certification.
 - G. Maintain complete, accurate current documentation that accounts for program funds received and expended;
 - H. Maintain comprehensive internal control procedures to insure proper funds management and separation of duties when determining eligibility and issuing benefits;
 - I. Maintain a computer back-up system that duplicates all record transactions on a daily basis, transmit Transfer files daily and when requested perform a Re-create within 24 hours of State request;
 - J. Prohibit discrimination against persons on the grounds of race, color, national origin, age, sex or handicap, and compiles data, maintains records and submits reports as required to permit effective enforcement of nondiscrimination laws;
 - K. Prohibit smoking in WIC facilities where WIC functions are carried out.
- II. **CLINIC OPERATION**
- A. **Term:** The term of the Subgrant is October 1, 2008, through September 30, 2009.
 - B. **Clinic Operation:** Subgrantee shall operate clinic(s) in accordance with the WIC Policy and Procedure Manual, incorporated herein by reference as if set forth in full, subject to coordination and supervision of the state WIC office.
 - C. **Operating Hours:** Full time clinics shall remain open for participant interviewing a minimum of seven and one-half (7.5) hours per day. Agencies are encouraged to provide staff manning during lunch period and give consideration to providing services prior to 8 AM and after 5 PM or on Saturday to meet the needs of participants, receiving WIC benefits.
 - D. **Personnel Assigned:** Terminations, replacements or additions will be reported to the state WIC office within seventy two (72) hours of occurrence, and include affected employee's work location, position and work telephone number.
 - E. Any change in clinic location, including opening of a new clinic, must be approved in writing by state WIC office at least 60 days prior to change in clinic location. A copy of the proposed lease must be forwarded to the state WIC office for review prior to execution.

III. **STAFF, FACILITIES AND EQUIPMENT**

- A. **Training:** Subgrantee shall provide, or cause to be provided, training in accordance with State WIC program objectives and Value Enhanced Nutritional Assessment (VENA) guidance, for each appropriate WIC staff member during the term of this subgrant, and will document such training. Training shall ensure that staff works toward meeting the six competency areas for WIC nutrition assessment; (1) principles of life-cycle nutrition; (2) nutrition assessment process; (3) anthropometric and hematological data collection; (4) communication; (5) multicultural awareness; (6) critical thinking.

B. Facilities

- 1. Privacy:** Subgrantee shall make provisions to insure clinic space provides privacy and confidentiality for applicants during application and individual nutritional education procedures.
- 2. Laboratory Registration:** All metropolitan area subgrantees must register all clinics with the United States Department of Health and Human Services in accordance with 42 CFR part 493 and with the Nevada Bureau of Licensure and Certification in accordance with Nevada Administrative Code 652. Rural clinics will make arrangements with nurses in their respective counties to perform hemoglobin tests in accordance with policy #CT:13 of the WIC Policy and Procedure Manual.

C. Equipment

- 1. Title:** All property purchased with funds provided by the state WIC program pursuant to this subgrant that are not fully consumed in performance of this subgrant shall be the property of the state WIC program.
- 2. Inventory:** Equipment having a useful life over one year and costing a minimum of \$5,000, purchased using WIC funds, will be inventoried and reported annually, with clinic plan, to the state WIC office prior to September 30th of the current subgrant year. The inventory list shall include date of purchase, cost, clinic location, and if available, state of Nevada inventory tag number and/or subgrantee inventory tag number.
- 3. Loss:** Subgrantee shall be responsible for all equipment purchased with funds provided by State WIC funds, insuring that said equipment is maintained in good repair and working order. In the event of loss of said equipment, due to theft or disaster, subgrantee shall replace such equipment with equipment of like value at Subgrantee expense.
- 4. Purchase:** Equipment purchases which exceed \$5,000 and all purchases of computer hardware must receive prior written approval from State WIC Office

IV. PROGRAM ADMINISTRATION

- A. General:** Subgrantee shall operate clinic(s) in accordance with provisions of 7CFR part 246, 7CFR part 3016 and State WIC Policy and Procedure Manual, incorporated herein by reference as if set forth in full, subject to coordination and supervision of the state WIC office.
- B. Clinic Plan:** Subgrantee shall submit to the state WIC office their annual Clinic Plan with their, equipment inventory, and current laboratory certification, no later than September 30th. Failure to comply may result in funding delay.
- C. Record Retention**
 - 1. Administrative Files:** Subgrantee shall maintain and have available for program review and audit all administrative files pertaining to its WIC clinic operations for a minimum of six (6) years from the date of termination of the subgrant or until all discrepancies relating to audit findings are resolved, whichever occurs later.
 - 2. Fiscal Records:** Subgrantee shall maintain all fiscal records and books constituting the basis for submission of reimbursement requests, including records and books supporting indirect rates, for a period of five (5) years from the date of termination of the subgrant or until any discrepancies related to audit findings are resolved, whichever occurs last.
 - 3. Participant Files:** Subgrantee shall maintain all participant files for a minimum of six (6) years after closure or until completion of federal and state audits, whichever occurs last.
 - 4. Conflict of Interest:** Subgrantee shall insure that no conflict of interest exists or arises between the subgrantee or persons employed by or associated with the subgrantee and any authorized vendor within or without the state of Nevada.
 - 5. Inspection:** USDA and Nevada WIC Program through any authorized representative shall have the right at all reasonable times to inspect or otherwise evaluate the work performed or being performed by subgrantee pursuant to this subgrant at the premises where such work is performed or where subgrantee records are maintained. Subgrantee shall provide reasonable facilities and assistance for the safety and convenience of WIC program representatives in the performance of their duties pursuant to this section.

CASELOAD AND FUNDING

- A. Assigned Caseload:** Subgrantee agrees to provide a level of service sufficient to provide WIC food instruments to an estimated 7,200 participants (based upon FFY 08 participation projections) per month for a total of 86,400 participants per year during the term of this subgrant. Subgrantee agrees to

provide WIC services at \$13.89 per participant served in exchange for the funding to be provided by state WIC program.

1. **Adjustments of Caseload:** State WIC program shall have the right to periodically adjust the assigned caseload of subgrantee. Upon written notification of caseload adjustment, subgrantee shall immediately take all reasonable steps necessary to decrease or increase participation as directed by WIC program to maintain the revised level of service.
2. **Failure to Maintain Assigned Caseload:** The WIC program office shall have the right to proportionately increase or decrease funding if the subgrantee falls below or above the aforementioned limits for three months. The proportion to be used for decreases will be the cost per participant in the current budget. The value to be used for increasing participation quantity and cost will be at \$12.75 per participant per month.

B. Funding: In consideration of subgrantee's performance of all required services and fulfillment of all obligations pursuant to this subgrant, the WIC program agrees to pay to subgrantee at the rate of \$13.89 per participant served. The maximum amount of funding to be provided by the WIC program for serving assigned caseload specified in paragraph V(A) above is One Million Two Hundred Thousand Ninety Six (\$1,200,096) subject to amendment of funding. The state WIC program will provide subgrantee with food instruments, specialty infant formula (when approved), certification and nutrition education materials and technical support as necessary. Subgrantee hereby acknowledges and agrees that the maximum subgrant amount is subject to approval by the Administrator of the Nevada State Health Division and that amount is based upon the following line item budget.

DETAILED BUDGET

1. Personnel	\$	
2. Travel		
3. Operating	\$	
4. Equipment	\$	
5. Contract/Consultant	\$	
6. Training	\$	
7. Other	\$1,200,096	86,400 Participants X \$13.89 participant
Total	\$1,200,096	

- C. **Reimbursement:** State WIC Program shall reimburse subgrantee monthly, based on the number of participants served during the billing month, as determined by official State records, and upon submission of a monthly Health Division Request for Reimbursement with supporting documentation acceptable to the state WIC program, for approved participation rate, provided that requested amount does not exceed authorized subgrant amount. Any amount in excess of the authorized subgrant amount shall be borne by subgrantee. Monthly reports shall be submitted by the 15th of the following month. The final Request for Reimbursement report must be submitted by November 30th following the end of each Federal Fiscal Year ended September 30th.
- D. **Allowable Expense:** Subgrantee shall be paid only for allowable expenses, as defined in the applicable regulations (OMB Circular A87, A122 and A133). It is the Policy of the State Board of Examiners to restrict contractors/subgrantees to the same rates and procedures allowed State Employees. The State of Nevada reimburses at rates comparable to the rates established by the US General Services Administration, with some exceptions see State Administrative Manual (SAM) Sections 0200.0 and 0320.0. Standard mileage reimbursement rate will be at the current Nevada State per mile rate. WIC program shall have the right to determine whether expenditures made by subgrantee from funds provided pursuant to this subgrant were made in accordance with the regulations and to withhold payment or demand reimbursement of disallowed expenditures from subgrantee.
- E. All reports of expenditures and requests for reimbursement processed by the Health Division are **SUBJECT TO AUDIT.**
- F. The Health Division reserves the right to hold reimbursement under this subgrant until any delinquent forms, reports, and expenditure documentation are submitted to and accepted by the Health Division.
- G. **Nutrition Education Requirement:** Subgrantee shall expend a minimum of one-sixth of all funds provided in this subgrant for nutrition education by including Time and Effort Studies and Unit Breakdown forms with Request for Reimbursements. The state WIC program shall have the right to determine if the subgrantee has fulfilled this requirement in accordance with the regulations, and to

withhold payment from subgrantee for the difference between the amount expended on nutrition education and an amount equal to the one-sixth of the total subgrant.

- H. **Unexpended Funds:** Any unexpended funds furnished to subgrantee under this subgrant and remaining in subgrantee's possession upon the expiration or termination of this subgrant shall be refunded by subgrantee to state WIC program by December 31st following the end of each Federal Fiscal Year.
- I. **Refunds:** Subgrantee shall pay to state WIC program the amounts, including any interest thereon, of any and all refunds, rebates, credits, or other amounts accruing to or received by subgrantee for services provided by subgrantee in performance of this subgrant from any outside source to the extent that such amounts are allocable to costs for which subgrantee has been or may be reimbursed by state WIC program pursuant to this subgrant.
- J. **Audit Exceptions:** Subgrantee shall pay to state WIC program any and all amounts claimed for reimbursement of WIC program funds brought against subgrantee as a result of state or federal audits.
- K. **Food Instrument Security:** Subgrantee shall pay the state WIC program any and all amounts equal to the value of WIC food instruments which were in their custody and were lost, misused, or otherwise diverted from WIC program purposes through negligence, fraud, theft, embezzlement, or unexplained causes. Subgrantee shall have an opportunity to submit evidence, explanation or information concerning alleged instances of non-compliance or diversion prior to a final determination being made by state WIC program as to the imposition of this requirement.

VI. NON-LIMITATION OF REMEDY

The provisions of sanctions or penalties pursuant to this subgrant shall not be construed as excluding or reducing any criminal or civil penalties or sanctions or other remedies that may be applicable under Federal, State or local laws. Subgrantee hereby acknowledges and agrees that, pursuant to the Regulations, whoever embezzles, willfully misapplies, steals or obtains by fraud any funds, assets or property provided under the Child Nutrition Act, whether received directly or indirectly from FNS, or whoever receives, conceals or retains such funds, assets or property for his or her own interest, knowing such funds, assets or property have been embezzled, willfully misapplied, stolen or obtained by fraud shall, if such funds, assets or property are of the value of \$100 or more, be fined not more than \$25,000 or imprisoned not more than 5 years, or both or if such funds, assets or property are of a value of less than \$100, shall be fined not more than \$1,000 or imprisoned for not more than 1 year, or both.

VII. ADVERSE ACTIONS

- A. **Arbitrations:** This subgrant shall not be subject to arbitration.
- B. **Adverse Action:** The right of appeal shall be granted when state WIC office takes adverse actions which affect participation.
 - 1. State WIC office must provide written notification of adverse action with a minimum of 60 days notice.
 - 2. Subgrantee must file appeal within 15 calendar days of receipt of notification.
 - 3. The hearing shall be convened with 20 days advance notice.
 - 4. The hearing officer, appointed by the Administrator of The Health Division, shall schedule two alternative hearing dates.
 - 5. Subgrantee shall have the opportunity to confront and cross-examine adverse witnesses; to be represented by counsel; and the opportunity to review the case record prior to the hearing.
 - 6. Within 60 days of the date of receipt of the notice of appeal, the hearing officer shall issue a written decision.
- C. **Disqualification:** Subgrantee may be disqualified if:
 - 1. The State WIC Office determines noncompliance with program regulations.
 - 2. When the State WIC Office program funds are insufficient to support the continued operation of all its existing local agencies at their current participation level.
 - 3. When the State WIC Office determines, following a periodic review of local agency credentials, that another local agency can operate the program more effectively and efficiently.
- D. **Participation Pending Appeal:** Appealing an action does not relieve Subgrantee, while the appeal is in process, from the responsibility of continued compliance with the terms of the Subgrant.
- E. **Final Order:** The decision shall be final and conclusive subject to an appeal to a court of law pursuant to NRS Chapter 233B.

- F. **Exceptions:** Expiration or this subgrant and reduction in caseload due to insufficient funds shall not be subject to appeal.

VIII. DISCRIMINATION

- A. **Acknowledgement:** Subgrantee hereby acknowledges and agrees that discrimination in any aspect of WIC Program administration or service is prohibited.
- B. **Prohibition:** Subgrantee shall not, in any aspect of program administration or service, discriminate against any applicant, eligible recipient, participant, employee, or other persons dealing with subgrantee for reasons of age, race color, sex, disability or national origin.
- C. **Data Collection:** Subgrantee shall comply with Federal Nutritional Services (FNS) requirements for the collection of racial and ethnic participation data.
- D. **Translation Services:** Subgrantee shall take all reasonable steps to ensure that WIC program information and nutrition education materials and services are available in the appropriate language to non-English or limited-English speaking persons or hearing and speech impaired.
- E. **Employment:** Subgrantee shall state in all solicitation or advertisements for employees placed by or on behalf of subgrantee that all applicants for employment shall receive consideration regardless of race, age, disability, color, sex, or national origin.
- F. **Notice and Opportunity for Hearing:** Subgrantee shall comply with FNS requirements for public notification of nondiscrimination policy. Subgrantee shall provide all persons with notice and an opportunity to file a civil rights complaint. Subgrantee shall refer any and all complaints of discrimination filed by applicants, eligible recipients or participants to the Director, Office of Equal Opportunity, USDA, Washington, DC 20250, with a copy to state WIC office.

IX. ADDITIONAL SERVICES AND FUNDS

Nothing in this subgrant shall be deemed in any way to authorize subgrantee to perform any additional services or to expend any additional funds without prior written authorization from state WIC office.

X. TERMINATION

- A. **By Subgrantee:** The Subgrant may be terminated by subgrantee prior to expiration by providing written notification to state WIC office provided that subgrantee continues to perform this subgrant during its term until such time as state WIC office is able to replace subgrantee with another provider of the services or until 120 days after notification of revocation, whichever occurs first.
- B. **Availability of Federal Funds:** This subgrant is contingent upon federal funding and will terminate if such funding becomes unavailable. State WIC office shall notify subgrantee immediately in writing of such termination.
- C. **Cooperation:** Subgrantee shall, upon notification of the termination of this subgrant and if so directed by state WIC office, cooperate in any and all efforts to refer participants to other WIC clinics in order to maintain continuity of participation in the WIC program.
- D. **Liability Following Termination:** Following receipt of notice of termination by state WIC office, subgrantee shall cease all WIC program operations as of the effective date of termination. Subgrantee shall be liable for any and all WIC food instruments issued by subgrantee after the effective date of termination of this subgrant, unless the issuance of such WIC food instruments is expressly authorize in writing by state WIC office.
- E. This subgrant agreement may be **TERMINATED** by either party prior to the date set forth on the Notice of Subgrant Award, provided the party has served written notice upon the other party. This agreement may be terminated by mutual consent of both parties or unilaterally by either party without cause. The parties expressly agree that this Agreement shall be terminated immediately of for any reason the Health Division, state, and/or federal funding ability to satisfy this Agreement is withdrawn, limited, or impaired.

XI. VALIDITY AND EFFECTIVENESS OF SUBGRANT.

- A. Both parties recognize that this subgrant's validity and effectiveness are conditional upon availability of funds as provided for by Congress for the purposes of this program.
- B. It is mutually understood between the parties that this subgrant may have been written prior to October 1 of the current year and before congressional appropriation of funds, for the mutual benefit of both parties in order to avoid program and fiscal delays which would occur if the subgrant were executed after October 1.

- C. This subgrant is valid and enforceable only if sufficient funds are made available to the state WIC office by the United States government for the fiscal year specified for the purposes of this program. In addition, this subgrant is subject to any additional restrictions, limitations or conditions enacted by the Congress or any statute enacted by the Congress which may affect the provisions, terms or funding of this subgrant in any manner.
- D. It is mutually agreed that if the Congress does not appropriate sufficient funds for the program, this subgrant may be amended or terminated, to reflect any reduction in funding the Nevada WIC program.

XII.AUDIT

Subgrantee shall have an independent audit of its operations performed during the term of this subgrant. If the subgrantee expends more than \$500,000 in aggregate federal funds, an audit must be performed in accordance with OMB Circular A-133, as revised June 27th, 2003. The audit must be completed and submitted to state WIC office within eighteen (18) months following the close of the fiscal year or subgrantee will be subject to a penalty of up to the amount paid for the audit and Subgrant funding maybe withheld.

XIII.RENEWAL

Nothing in this Subgrant shall be deemed to impose any obligation on either party to enter into any subsequent Subgrant.

XIV.WHOLE AGREEMENT

This subgrant with Sections A, B, and C constitutes the entire agreement between the parties hereto, and supersedes and replaces all previous communications, representations, or agreements, whether oral or written, between the parties pertaining to the subject matter herein.

**HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION C
Financial Reporting Requirements**

- ☞ A Request for Reimbursement is due on a **monthly or quarterly** basis, based on the terms of the subgrant agreement, no later than the 15th of the month.
- ☞ Reimbursement is based on **actual** expenditures incurred during the period being reported.
- ☞ Payment will not be processed without all reporting being current.
- ☞ Reimbursement may only be claimed for expenditures approved within the Notice of Subgrant Award.
- ☞ **PLEASE REPORT IN WHOLE DOLLARS**

Provide the following information on the top portion of the form: Subgrantee name and address where the check is to be sent, Health Division (subgrant) number, Bureau program number, draw number, employer I.D. number (EIN) and Vendor number.

An explanation of the form is provided below.

A. Approved Budget: List the approved budget amounts in this column by category.

B. Total Prior Requests: List the **total** expenditures for all previous reimbursement periods in this column, for each category, by entering the numbers found on Lines 1-8, Column D on the **previous** Request for Reimbursement/Advance Form. If this is the first request for the subgrant period, the amount in this column equals zero.

C. Current Request: List the **current** expenditures requested at this time for reimbursement in this column, for each category.

D. Year to Date Total: Add Column B and Column C for each category.

E. Budget Balance: Subtract Column D from Column A for each category.

F. Percent Expended: Divide Column D by Column A for each category and total. Monitor this column; it will help to determine if/when an amendment is necessary. Amendments **MUST** be completed (including all approving signatures) 30 days **prior** to the end of the subgrant period.

*** An Expenditure Report/Backup that summarizes, by expenditure GL, the amounts being claimed in column 'C' is required.**

HEALTH DIVISION

Draw # _____

REQUEST FOR REIMBURSEMENT

Program Name: WIC-Women, Infants and Children Bureau of Family Health Services Nevada State Health Division	Subgrantee Name: Washoe County District Health Department WIC 10-10031
Address: 3427 Goni Road, Suite 108 Carson City, NV 89706	Address: 1009 East 9th Street/P.O. Box 11130 Reno, NV 89520
Subgrant Period: October 1, 2008 through September 30, 2009	Subgrantee EIN#: 88-6000138 Subgrantee Vendor#: T41107900

PART I: FINANCIAL REPORT

(report in whole dollars; must be accompanied by expenditure report/back-up)

Month(s): _____ Year: _____

Approved Budget Category	A. Approved Budget	B. Total Request	C. Year To Date Costs	D. Budget Balance	E. Percent Expended
1. Personnel	\$	\$	\$	\$	%
2. Travel	\$	\$	\$	\$	%
3. Operating	\$	\$	\$	\$	%
4. Contract/Consultant	\$	\$	\$	\$	%
5. Equipment	\$	\$	\$	\$	%
6. Training	\$	\$	\$	\$	%
7. Other	\$ 1,200,096	\$	\$	\$	%
8. Total Cost	\$ 1,200,096	\$	\$	\$	%

PART II: REQUEST FOR FUNDS (worksheet)

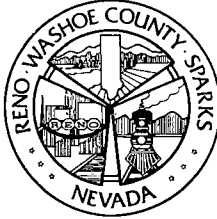
9. Total Funds (column A, line 8)	_____
10. Less: Advance, if	_____
11. Less: Prior Reimbursement Payments (column C, line 8 from previous report)	_____
12. Funds Available (Line 9 minus lines 10 and 11)	_____
13. Year To Date Total Cost (column C, Line 8; cannot exceed line 9)	_____
14. Less: Prior Reimbursements (claimed on line 11)	_____
15. Cost Reimbursement Requested (cannot exceed line 12)	_____
16. Adjustments (describe)	_____
17. TOTAL REQUEST	_____
18. Balance of Funds Remaining (should equal column D, Line 8)	_____

This report is true and correct to the best of my knowledge.

Authorized Signature _____ Title _____ Date _____
 Reminder: Request for Reimbursement cannot be processed without an expenditure report/back-up. Reimbursement is only allowed for items contained within Subgrant Award documents. If applicable, travel claims must accompany report.

FOR HEALTH DIVISION USE ONLY

Program contact necessary? Yes No Contact Person: _____
 Reason for contact: _____
 Fiscal review/approval date: _____ Signed: _____
 Scope of Work review/approval date: _____ Signed: _____
 ASO or Bureau Chief (as required): _____ Date: _____



DISTRICT HEALTH DEPARTMENT

STAFF REPORT

BOARD MEETING DATE: August 27, 2009

DATE: July 20, 2009

TO: District Board of Health

FROM: Lori Cooke, Fiscal Compliance Officer, Washoe County Health District
775-325-8068, lcooke@washoecounty.us *LC*

THROUGH: Eileen Coulombe, Administrative Health Services Officer
775-328-2417, ecoulombe@washoecounty.us *EC*

SUBJECT: Proposed Approval of FY10 Budget Amendments totaling an increase of \$10,021 in both revenue and expense in support of the Tuberculosis Program Grant budget (IO 10035).

SUMMARY

The Washoe County District Board of Health must accept grant awards or direct the Health Officer to accept grants awards, approve and execute, or direct the Health Officer to execute, contracts in excess of \$50,000, Interlocal Agreements and amendments to the adopted budget.

The Washoe County Health District has received an Interlocal Contract between the Nevada State Health Division and the Washoe County Health District for the period July 1, 2009 to June 30, 2010 in the total amount of \$256,774 (\$128,387 per fiscal year) in support of the TB Supplemental Base Program.

Goal supported by this item: Ratification of this Interlocal Contract supports the Health District TB Prevention Program's mission to prevent and control tuberculosis in order to reduce morbidity, disability and premature death due to tuberculosis by reducing the number of TB cases per 100,000 in Washoe County.

PREVIOUS ACTION

The District Board of Health ratified the Interlocal Contract at its April 23, 2009 meeting. The fully executed contract was received on June 25, 2009.

BACKGROUND

The Health District received from State of Nevada, Department of Health and Human Services, Health Division, Bureau of Community Health, TB Prevention Program, an Interlocal Contract in the total amount of \$256,774 (\$128,387 for FY09/10 and \$128,387 for FY10/11) for the TB Supplemental Base Program. These funds support the diagnosis, investigation and treatment of tuberculosis.

AGENDA ITEM # 7.C.6.

1001 EAST NINTH STREET / P.O. BOX 11130, RENO, NEVADA 89520 (775) 328-2400 FAX (775) 328-2279

www.washoecounty.us/health

WASHOE COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER
PRINTED ON RECYCLED PAPER

This award includes funding for personnel, travel, training, operating expenses such as postage, copy machine, printing, licensing, telephones, office supplies, etc. and other expenses, including funding specifically for client housing support and incentives/enablers to reduce barriers and encourage treatment compliance. Incentives/enablers can include, but are not limited to: food, clothing, gift cards, taxi vouchers, bus fare, movie passes, various items for isolation patients (groceries, sheets, clothing, laundry supplies, etc.), etc. The total budgeted amount for these items is \$5,370. Normally incentive/enabler items (excluding patient housing, taxi payments and food items for isolated clients) do not exceed \$35.00 in value.

FISCAL IMPACT

FY10 budget was adopted with \$118,366 in grant funding. A budget amendment in the amount of \$10,021 is necessary to bring the Notice of Grant Award into alignment with the program budget.

Should the Board approve these budget amendments, the total adopted FY10 budget will be **increased by \$10,021** by adjustments to the following accounts:

<u>Account Number</u>		<u>Description</u>	<u>Amount of Increase/(Decrease)</u>
2002-IN-10035	-432100	State Revenue	\$10,021.00
2002-IN-10035	-701412	Salary Adjustment	1,989.58
	-710100	Professional Services	558.00
	-710500	Other Expense	3,997.42
	-710703	Biologicals	1,500.00
	-710721	Outpatient	1,976.00
		Total Expenditures	\$10,021.00

RECOMMENDATION

Staff recommends that the Washoe County District Board of Health Approve the FY10 Budget Amendments totaling an increase of \$10,021 in both revenue and expense in support of the Tuberculosis Program Grant budget (IO 10035).

POSSIBLE MOTION

Move to Approve the FY10 Budget Amendments totaling an increase of \$10,021 in both revenue and expense in support of the Tuberculosis Program Grant budget (IO 10035).



Regional Emergency Medical Services Authority

REMSA

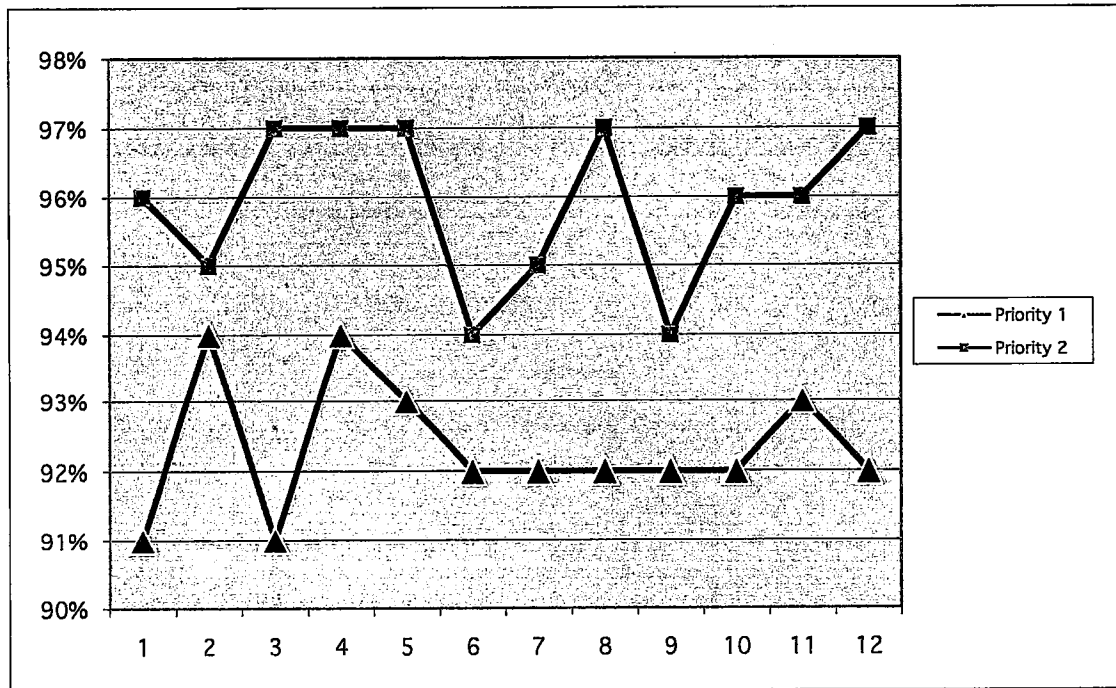
OPERATIONS REPORTS

FOR

JUNE 2009

Fiscal 2009

Month	Avg. Response Time	Avg. Travel Time	Priority 1	Priority 2
Jul-08	4 mins. 56 secs.	3 mins. 51 secs.	91%	96%
Aug.	5 mins. 52 secs.	4 mins. 42 secs.	94%	95%
Sept.	6 mins. 15 secs.	5 mins. 4 secs.	91%	97%
Oct.	5 mins. 55 secs.	4 mins. 49 secs.	94%	97%
Nov.	5 mins. 37 secs.	4 mins. 33 secs.	93%	97%
Dec.	5 mins. 0 secs.	3 mins. 52 secs.	92%	94%
Jan. 09	5 mins. 50 secs.	4 mins. 43 secs.	92%	95%
Feb.	5 mins. 57 secs.	4 mins. 51 secs.	92%	97%
Mar.	6 mins. 14 secs.	5 mins. 7 secs.	92%	94%
Apr.	5 mins. 51 secs.	4 mins. 47 secs.	92%	96%
May	5 mins. 57 secs.	4 mins. 53 secs.	93%	96%
Jun-07	6 mins. 4 secs.	4 mins. 58 secs.	92%	97%



08-09 Sched of Fran Avg. Bill

Care Flight				
Month	#Patients	Gross Sales	Avg. Bill	YTD Avg.
Jul-08	19	\$106,108	\$5,585	\$5,585
Aug.	14	\$83,040	\$5,931	\$5,732
Sept.	25	\$153,215	\$6,129	\$5,903
Oct.	16	\$104,772	\$6,548	\$6,042
Nov.	9	\$53,679	\$5,964	\$6,034
Dec.	18	\$100,736	\$5,596	\$5,956
Jan. 09	11	\$65,659	\$5,969	\$5,957
Feb.	8	\$48,151	\$6,019	\$5,961
Mar.	12	\$94,826	\$7,902	\$6,138
Apr.	4	\$27,733	\$6,933	\$6,161
May	12	\$70,571	\$5,881	\$6,138
June	11	\$71,973	\$6,543	\$6,166
Totals	159	\$980,463	\$6,166	\$6,166
		Adjusted Allowed Average Bill -		\$6,341.00
REMSA Ground				
Month	#Patients	Gross Sales	Avg. Bill	YTD Avg.
Jul-08	2756	\$2,364,088	\$858	\$858
Aug.	2876	\$2,479,415	\$862	\$860
Sept.	2705	\$2,388,051	\$883	\$867
Oct.	2671	\$2,356,443	\$882	\$871
Nov.	2536	\$2,238,390	\$883	\$873
Dec.	2717	\$2,420,685	\$891	\$876
Jan. 09	2741	\$2,437,974	\$889	\$878
Feb.	2505	\$2,220,210	\$886	\$879
Mar.	2815	\$2,516,292	\$894	\$881
Apr.	2673	\$2,372,085	\$887	\$881
May	2850	\$2,524,068	\$886	\$882
June	2805	\$2,490,309	\$888	\$882
Totals	32650	\$28,808,010	\$882	\$882
		Allowed ground avg bill -		\$886.00



Regional Emergency Medical Services Authority

**CARE FLIGHT
OPERATIONS REPORT
FOR
JUNE 2009**



**CARE FLIGHT OPERATIONS REPORT
JUNE 2009
WASHOE COUNTY**

❖ **In Town Transfer:**

- 2 ITTs were completed

❖ **Outreach, Education, & Marketing:**

- 3 Community Education & Public Event

06/18/09	RASI Orientation	Flight Staff
06/19/09	Annual POI Charity Golf Tournament	Flight Staff
06/27/09	Young Eagles at Stead	Flight Staff

❖ **Statistics**

Washoe County Flights

	# patients
Total Flights:	11
Total Patients	11
Expired on Scene	0
Refused Transport (AMA)	0
Scene Flights	9
Hospital Transports	2
Trauma	3
Medical	2
High Risk OB	0
Pediatrics	4
Newborn	0
Full Arrest	2
Total	11



Regional Emergency Medical Services Authority

REMSA
GROUND OPERATIONS REPORT
FOR
JUNE 2009



GROUND AMBULANCE OPERATIONS REPORT

June 2009

1. OVERALL STATISTICS:

Total Number Of System Responses	4707
Total Number Of Responses In Which No Transport Resulted	1916
Total Number Of System Transports	2791

2. CALL CLASSIFICATION REPORT:

Cardiopulmonary Arrests		1%
Medical		46%
OB		0%
Psychiatric/Behavioral		4%
Transfers		16%
Trauma		26%
	Trauma - MVA	7%
	Trauma - Non MVA	19%
Unknown/Other		7%
Total Number of System Responses	100%	

3. MEDICAL DIRECTOR'S REPORT:

The Clinical Director reviewed:

- 100% Full Arrest Ground Charts
- 100% Pediatric ALS and BLS Ground Charts
- 100% All Ground Intubations

Review of the following patient care records (PCR) for accurate and complete documentation and appropriate use of protocol:

- 100% of cardiopulmonary arrests
 - 27 total
- 100% of pediatric patients both ALS and BLS transport and non-transport patients
 - Total 120
- 100% of advanced airways (outside cardiac arrests)
 - 3 total
 - ET/CO₂ use in cardiac arrests and advanced airway
- 100% of Phase 6 Paramedic and EMT PCRs
 - 383 Paramedic total

- o 546 EMT-I total
- 100% Pain/Sedation Management – 199

All follow-up deemed necessary resulting from Communication CQI was completed by Alan Dobrowolski, RN, Communications Manager.

4. EDUCATION AND TRAINING REPORT:

A. Public Education

Advanced Cardiac Life Support

Date	Course Location	Students
5/9/09	Eastern Plumas Healthcare	5
5/18/09	Eastern Plumas Healthcare	6
6/1/09	EMS CES 911	1
6/1/09	REMSA	1
6/3/09	REMSA	2
6/3/09	REMSA	3
6/3/09	REMSA	26
6/5/09	REMSA	10
6/15/09	EMS CES 911	1
6/15/09	REMSA	1
6/22/09	REMSA	4
6/23/09	EMS CES 911	1
6/26/09	REMSA	1

Blood Borne Pathogens Training

Date	Course Location	Students
5/18/09	REMSA	1
5/20/09	REMSA	1

Basic Cardiac Life Support Training

Date	Course Location	Students
6/17/09	REMSA	1

Healthcare Provider CPR Courses

Date	Course Location	Students
4/23/09	Sierra NV Job Corps	7
4/23/09	Sierra NV Job Corps	7
4/24/09	Silver Legacy	2

5/5/09	David O'Connor	1
5/8/09	Sierra NV Job Corps	5
5/23/09	Nye County EMS	4
5/26/09	Kenneth Cohen	2
5/27/09	Randall Evans	5
5/29/09	Micheal Peck	8
5/29/09	Sierra NV Job Corps	5
5/30/09	Barrick Gold Mine	8
5/31/09	Jason Harris	1
6/1/09	EMS CES 911	1
6/1/09	Eureka County EMS	7
6/1/09	Leslie Cowger	2
6/3/09	Randall Evans	2
6/3/09	REMSA	10
6/6/09	Tahoe Forest Hospital	7
6/6/09	Career College Northern Nevada	5
6/6/09	Riggs Ambulance Service	11
6/8/09	EMS CES 911	1
6/9/09	REMSA	8
6/10/09	REMSA	1
6/11/09	Sierra NV Job Corps	6
6/12/09	Riggs Ambulance Service	8
6/13/09	REMSA	5
6/16/09	St Mary's Center for Health	3
6/16/09	St Mary's Center for Health	3
6/17/09	Career College Northern Nevada	1
6/17/09	State of NV DOC	1
6/17/09	St Mary's Center for Health	2
6/18/09	Florida Canyon Mine	1
6/19/09	Jason Harris	1
6/20/09	St Mary's Center for Health	7
6/20/09	Visual Insight CPR	3
6/25/09	REMSA	9
6/4/09	REMSA	9
6/13/09	REMSA	1
6/18/09	REMSA	8
6/20/09	REMSA	3
6/25/09	REMSA	1

Healthcare Provider CPR Recertification Courses

Date	Course Location	Students
9/14/08	Silver Legacy	1
4/3/09	Nampa Fire Department	4

4/13/09	David O'Connor	8
5/18/09	Nevada Department of Corrections	2
5/27/09	Eastern Plumas Healthcare	9
5/27/09	Trent Waechter	1
6/1/09	REMSA	2
6/1/09	REMSA	4
6/2/09	REMSA	1
6/3/09	Jason Harris	1
6/3/09	REMSA	9
6/4/09	Willow Springs	9
6/4/09	REMSA	1
6/5/09	Lisa Rassuchine	8
6/5/09	Jennifer Kraushaar	1
6/5/09	Nampa Fire Department	8
6/5/09	In House Education	9
6/5/09	REMSA	1
6/7/09	Nampa Fire Department	2
6/8/09	Eagle Valley Childrens Home	2
6/8/09	Auggie Arroyo	2
6/9/09	Willow Springs	3
6/10/09	Rosewood Rehab	3
6/10/09	REMSA	4
6/10/09	REMSA	2
6/10/09	REMSA	1
6/10/09	REMSA	7
6/11/09	REMSA	5
6/11/09	REMSA	7
6/11/09	REMSA	1
6/13/09	Nevada Air Guard	6
6/13/09	REMSA	1
6/16/09	St Mary's Center for Health	8
6/17/09	Jason Harris	1
6/17/09	REMSA	1
6/17/09	REMSA	1
6/17/09	REMSA	10
6/17/09	REMSA	10
6/18/09	Concentra	3
6/18/09	REMSA	1
6/18/09	REMSA	5
6/18/09	REMSA	3
6/20/09	Regent Care Center	6
6/22/09	Lovelock Correction Center	5
6/23/09	EMS CBS 911	2
6/23/09	REMSA	3
6/23/09	REMSA	5

6/23/09	REMSA	6
6/24/09	REMSA	1
6/24/09	REMSA	10
6/25/09	REMSA	11
6/25/09	REMSA	1
6/26/09	REMSA	6
6/29/09	REMSA	1
6/29/09	REMSA	1
6/29/09	REMSA	2
6/30/09	REMSA	1
6/30/09	REMSA	2

Healthcare Provider Employee CPR Recertification Course

Date	Course Location	Students
6/1/09	REMSA	1
6/3/09	REMSA	2

Healthcare Provider CPR Skills Course

Date	Course Location	Students
6/1/09	REMSA	2
6/3/09	REMSA	2
6/8/09	REMSA	1
6/9/09	REMSA	1
6/12/09	REMSA	2
6/19/09	REMSA	1
6/22/09	REMSA	1
6/23/09	REMSA	6
6/24/09	REMSA	1
6/26/09	REMSA	1
6/30/09	REMSA	3
6/30/09	REMSA	2

Heartsaver AED Courses

Date	Course Location	Students
5/16/09	Nye County EMS	11
6/5/09	Jennifer Kraushaar	6
6/9/09	Tahoe Forest Hospital	1
6/9/09	REMSA	12
6/10/09	REMSA	3
6/12/09	Nancy Brisack	2
6/23/09	Sierra Surgery Hospital	9

Heartsaver CPR Courses

Date	Course Location	Students
5/20/09	Sierra NV Job Corps	6
6/10/09	Sierra NV Job Corps	6
6/15/09	Darlene Hansen	11

Heartsaver First Aid Courses

Date	Course Location	Students
4/24/09	Silver Legacy	2
5/1/09	Nevada Department of Corrections	25
5/6/09	State of NV DOC	2
5/8/09	Sierra NV Job Corps	5
5/8/09	State of NV DOC	3
5/13/09	Nye County EMS	10
5/15/09	Dacia Sansinena	2
5/26/09	Dacia Sansinena	1
5/28/09	Cheryl Mangum	15
5/28/09	Sierra NV Job Corps	6
5/28/09	Sierra NV Job Corps	3
5/28/09	State of NV DOC	3
5/30/09	Richard Keller	3
5/30/09	State of NV DOC	1
6/1/09	EMS CES 911	1
6/3/09	Silver Legacy	4
6/4/09	Sierra NV Job Corps	6
6/4/09	Scott Kesler	9
6/4/09	State of NV DOC	1
6/5/09	Riggs Ambulance Service	6
6/5/09	Jennifer Kraushaar	3
6/5/09	REMSA	10
6/6/09	State of NV DOC	2
6/8/09	Visual Insight CPR	6
6/8/09	Eagle Valley Childrens Home	2
6/8/09	REMSA	6
6/9/09	Eagle Valley Childrens Home	6
6/9/09	Cheri Beauvais	1
6/11/09	REMSA	6
6/12/09	State of NV DOC	2
6/12/09	Visual Insight CPR	1
6/12/09	Visual Insight CPR	1
6/12/09	Sierra NV Job Corps	6
6/15/09	Patagonia	2
6/17/09	Eagle Valley Childrens Home	6

6/18/09	Patagonia	6
6/18/09	State of NV DOC	12
6/20/09	Riggs Ambulance Service	4
6/20/09	REMSA	3
6/20/09	REMSA	6

Heartsaver Pediatric First Aid Courses

Date	Course Location	Students
5/27/09	Jennifer Kraushaar	1
6/6/09	REMSA	6
6/13/09	Visual Insight CPR	4
6/13/09	REMSA	8
6/15/09	Visual Insight CPR	4

Pediatric Advanced Life Support

Date	Course Location	Students
6/2/09	EMS CES 911	1
6/10/09	REMSA	6
6/15/09	EMS CES 911	2
6/24/09	EMS CES 911	1

Total Students Completed & Processed - June 2009	803
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Paramedic Course

Ongoing	REMSA Paramedic Program - 7/08	10 Students
Ongoing	REMSA Paramedic Program - 1/09	11 Students

EMT Course

Ongoing	EMT-Basic	23 Students
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5. COMMUNITY RELATIONS:

Community Outreach:

Point of Impact

6/19/09	Point of Impact Charity Golf Tournament	
6/20/09	Child Safety Seat Checkpoint, Sak 'N Save Food Store, Plumb Lane, Reno. 22 cars and 28 seats inspected.	5 volunteers, 3 staff

Northern Nevada Fitting Station Project

6/24/09	Saint Mary's Prepared Childbirth Class	26 expectant parents
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Safe Kids Washoe County

6/2/09	Esther Bennett Field Day, four safety game stations, Sun Valley.	8 volunteers, 300 students
6/3/09	Glenn Duncan Safety Committee meeting, Reno.	4 volunteers
6/4/09	Washoe County Child Death Review board, Reno.	16 volunteers
6/9/09 - 6/12/09	Emergency Medical Services for Children (EMSC) annual grantee meeting, Washington, D.C.	1 volunteer
6/9/09	Safe Kids Washoe County monthly meeting, Sparks.	11 volunteers
6/16/09	Safe Kids Walk This Way Advocacy Grant conference call.	4 staff
6/30/09	Safe Kids Officers dinner, Sparks.	7 volunteers

Public Relations

6/19/09	Child bike helmet fitting, REMSA office.	1 client
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Regional Emergency Medical Services Authority

**GROUND AMBULANCE AND CARE FLIGHT
INQUIRIES
FOR
JUNE 2009**

INQUIRIES

June 2009

There were no inquiries in the month of June.



Regional Emergency Medical Services Authority

**GROUND AMBULANCE
CUSTOMER SERVICE
FOR
JUNE 2009**

GROUND AMBULANCE CUSTOMER COMMENTS JUNE 2009

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
1	Wonderful. I've used the services 2x - the other approx 9/07	Absolutely nothing	I've had over 30 surgeries so I believe I'm a qualified judge of care givers. Each trip could not have been handled any better. All were very caring + professional
2	We've had to call Remsa on several occasions. You've always been wonderful.	Don't change a thing.	
3	Quick response, well organyed, very professional	Maintain current efficiency	
4	Everything! Everyone was friendly. I was kinda scared + the crew made me feel more comfortable.		Thank you so much!
5	Friendly, courtesy, Informative, prompt, efficient, + professional	Nothing	They kept me informed @ all time. Asked appropriate questions + appreciated the fact I knew all the answers + said so
6	Well for one they forgot the medical kit and had to wait for a second Remsa -	My husband died May 2nd - "Renown Hospital"	Remsa was good for my grandson when he was sick
7	The crew provided the best possible pain reduction within their limits...unfortunately I did not respond as well as I wished.	The crew that worked on me was doing the best they could.	I truly wish I could have had more pain relief, but as stated above, I do not believe the crew was medically able to offer much more than they did.
8	Made me feel comfortable, and at ease.	Give me some money for the bill.	I did not die, so you guys did a good job.
9	The EMT crew arrived very quickly and assessed the situation quickly and calmly. Thank you!	Keep up the great work because need knows no time, season and does not discriminate.	We just received the bill 4/28/09 and have not had time to look it over and fax to insurance.
10	I was very scared, your crew helped me and my 12 year old son feel comfortated.		Excellent!
11	Arrival time was very good for both REMSA and reno fire dept. Did a great job of following protocol.		Everyone was very professional and did a good job of keeping me and my family informed.
12	You were very quick in getting to our house. You were efficient, pleasant, professional.	I don't know what you could do better.	The service was "top notch" - top of the line
13	Great customer service, very clear on how billing would proceed and explained if any questions who to call.	Not a thing (very satisfied)	Ambulance care was very professional, and very caring great bedside manner "please" thank them for me.
14	very quick, got med sheet, dog, me, lock door, I was sinking fast, got purse, found insurance cards for emergency personel	Be there again if needed	Excellent, each person, knew what had to done.
15	My husband was awake and after his fall put his skis on and rode the lift to the top where he asked the ski patrol for help. He could not remember his fall or where his car was. He was "convinced" by 3 ski patrol to ride the sled down where your ambulance was waiting.	He does not remember anything of that day, the fall, the ride in the sled or ambulance or Cat scan or emergency surgery for a subdural hematoma that killed Natasha Robertson that was in the news recently. Your quick response and transport saved his life. Thank you is NOT enough. You are the greatest.	
16	Everything that was done to help me cut the amount of time in ER when patient is strapped on a back board		The care I received at Remsa was excellent! except for the comment above-

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
17		I.V. Inserted into patient's hand was done very quickly + looked a bit rough	
18	Friendly - efficient - asked a lot of necessary questions	They could have been more careful in picking me up. They almost dropped me.	One young man was more interested in tools, apparatuses in my bedroom that belonged to my husband. It was aggravating.
19	The medics were very kind and concerned. Took information patiently and with understanding.		
20	Took care of me well,	Maybe some more information and knowledge would be helpful of my condition	In general it was good, me, myself need information, "some people need to know"
21	The crew was very polite and help with my safety	Nothing	
	Were able to calm down Doug talking to him	Let family members know what is going on	Very thankful for the speed + care given
23	NO ONE mentioned a price I was treated and released.	explain how I can afford to pay. I receive 1,080.00 a month and can barely make it every month. Need help Food Clothes Medications	Thank you for your quick response and care I need to find a way to get the money I owe. I'm afraid if I can't pay will I go to prison or jail
24	Patient's wishes were taken care of promptly and professionally, courteous		Attendant called me to notify and locked up premises
25	Everything was well done	You don't have to do anything everything was excellent	Your service was very good
26	Very nice staff made me feel very safe and comfortable.	Everything was great.	
27	Everything!	Nothing	Guy's were great and did an excellent job
28	Everything in the entire process was done excellent.	I can't think of a single thing. Your crews and everyone else are wonderful.	Lori Foster and Alex Doerr were absolutely terrific. They made a bad situation good. Thank you.
29	You were prompt, courteous, and friendly.	What you did was enough.	No comment
30	Everything is very well, because all person's REMSA and Hospital, help me.	attendant me very good in the Remsa and the hospital.	all service is nice, and thank you.
31	I was very unhappy - thought I had food poison.	Don't mistreat me next time I call 911 and ask for ambulance.	Send ambulance, not the police. They sent police last time they were here.
32	Everything, They responded within minutes, was treated very respectfully & caring	nothing. Everything was perfect.	perfect
33	Both young women were very professional + courteous and both had a great attitude	It would be hard to top these two (2) women	Also they had great sense of humor thanks
34	Arrived promptly, very considerate to all of us, patient + family	Continue this level of care.	You did an excellent job. Thank you.
35	responded quickly.	very expensive. Without insurance I will have trouble paying.	
36	Transport me to the hospital as quickly as possible.		
	Friendly - compassionate great job Geoffrey and Lori	good job	

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
38	No complaints against REMSA.	Ask patient if they want you to call anyone. Patient had "ICE" phone #'s in his cell phone which we understand is a national program to let emergency people know who to notify. Hospital put his cell phone away with his other belongings so he could not notify family and he begged the Reno Hospital for over 4 hours to bring him a phone.	
39	Your response time was excellent + the care given before + during transport was excellent	Keep up the good work	Thanks so much, you truly were life savers
40	Very efficient. Kept very well Informed.	The staff really cared.	The doctor was outstanding!
41	Listened with Interest	Nothing	
2	Remsa was at our house Immediately after the 911 call was made	Continue your great service, by providing prompt, efficient + friendly service.	Thank you very much for all of your help, and may God always protect you.
43	Everything. I was treated very nice, timely and with compassion.	Only thing I can think of would have been faster. But everyone worked pretty fast.	All of the staff was great. Billing was professional but maybe a little stiff!
44	Moved my husband very gently from the guerny to his bed at home. Thank you.		This move was arranged by the hospital to bring my husband home. My husband died April 28.
45	Everything timely & saved my life for which I am eternally grateful.	Stay just as you are concerned + competent!!	The crew worked as a team to save my life my family was kept informed at all times! Thanks
46	Everything - Remsa staff is the best!	Nothing we can think of	Without Remsa staff, the ER would be a horror chamber
47	very kind + polite + friendly		The staff made me feel at ease as I'm from out of town keep up the good work, + thank you
48	The stayed with me till I got a room They were real nice to me	nothing	There was a girl from Spanish Spring, that stay with me + was great.
49	Had concern for patient Explained what they were doing + why.	Not much else	A - ok
50	My first and third trips were not good. The last trip (and hopefully forever) they were fantastic!	*HELP ME. I am hard to start a IV but their are arms & buttocks shots for nausea and pain. No one ever explain about my privacy rights. Some of the staff I felt I was a inconvenience to them and they rather continue their personal chat. Also some of your drivers could learn that hitting pot holes when a patient is in pain and has had back & neck fusion does not help the pain situation!! (Named two employees) were able to transport me without me feeling like I got worse in the ambulance!	
51	listen Intensely with a caring and concerned way - helped me feel better	I do not know	I felt safe and was able to relax from my fear and anxiety
52	you guys are wonderful. you listen, quick + very good at your jobs	Not much	
3	All of staff was very professional		
54	All were very professional; caring; and kept me informed as they worked.		
55	Explained my options well, kept me calm and were easy to talk to		I was very glad to be in such professional hands.

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
56	The team was extremely compationate to my situation.		
57	Good survey, asked the right questions		All bills to be sent to my (son)
58	Crew kept me relaxed on ride to hospital		I have always been treated well by the Remsa crews
59	Took care of billing insurance in a timely matter + cleared balance (with silver saver program)	Make sure driver can find apartment once they get in apartment complex, we are the first apartment.	No
60	very good at handling a difficult situation patient was emotional and they had a very calming effect.		
61	Made sure I was comfortable and made sure I knew what was happening at all times		Thank you for your service and care.
62	Transported me to hospital in the ambulance as I did not have transportation	Satisfactory	
63	Humor + compassion	it was prompt + Excellent	
64	The crew was wonderful		
65	Info was plentiful		
66		one personnel was polite: while the other was very mean and rude	
67	the team was awesome, responding with empathy + professionalism!	Nothing	
68	Arrived in minutes - w/backup crew - extremely capable, determined + caring. In the seizure, were strong all way to ER. Considered me, the spouse too.	More supplies - used up etubator tubes -	Your crew deserves Kudos for their expertise, caring & going above & beyond on service! Thanx! God bless you all - Edell is in day #17 at the hospital & it would have been fatal but for your crews!
69	We are SilverCare members and they sure treated us with exceptional help. Above & beyond - great job!	They did a fantastic job - keep up this great service!	I can't thank you enough for having the Silver Care program.
70	Came fast, adressed the situation proceeded from there + checked cardiogram	They told me to put dog outside before they come - if I couldn't do that as no one next time if under the same conditions I would call Remsa direct as I wasn't having trouble breathing	
71	Quick response, knowledgeable EMTs		
72	excellent job	I was very pleased!	Very caring and concerned.
73	everything. I was in so much pain. They made me comfoble and I think they really cared. They were great		
74		your staff were rude to my sons. they were scared and have never been in an accident before. your staff harrassed them and drove very fast on the way to the hospital and hit several pot holes on the way to the hospital on purpose. we were not impressed and would file suit if we were that type of person/people. not everyone is out to "screw the insurance companies" per your staff to my sons. matter of fact I am an insurance agent myself. my suggestion to you-make sure your staff are more professional in the future, especially to kids.	

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
75	You saved my life! I live by myself. I blacked out and fell hitting my head on glass, which caused severe bleeding. Without your help I would have died from bleeding.	Nothing	Excellent service - very responsive and professional Thank you for saving my life!
76		Really appreciate Silver Saver	
77	The guys were great and I appreciated all of them	More training in IV's	They were very caring and gentle.
78	Making the emergency easier to get through!	Business cards given to patient.	The service rendered at the time was professional. Done! My wife and I both agree.
79	All necessary steps taken when my collapse was suspected to be a heart attack.	I believe I already had the best!	When people are away from their own State, health providers are very important.
80	helped me with my anxiety + made me comfortable.		Outstanding
81	You saved my life	No	
82	kept me informed at all times. Kept talking to me which helped a lot.		Thank you. Job well done!
83	everything O.K.	O.K keep up the good work	
84	Everything. You always do and I am very grateful.		
85	Everything	Nothing	Everyone very helpful, nice, caring etc.
86	You were on the scene very very quickly Response was amazing. Very caring + professional - I have no complaints		
87	you tended to my needs.	Nothing you did a great job.	You are the best and fastest hospital I ever went Thank you for your kind service
88	The services were very good		
89	Communication, cheerful, informative helpful called ahead for info.		
90	Driving + very polite		you showed you cared
91	crew was prompt + helpful	service was perfect	
92	they were very good -		
93	polite + gentle		I was impressed by professionalism
94	Crew was very efficient		
95	Smooth transition from PHI flight to REMSA ambulance / ambulance personnel professional/caring.		
96	I was treated like a criminal due to the fact I had an ACCIDENT with a knife.	Not judge a situation and be kind and understanding.	Very rude!
97	you were here within a few minutes. Thank you so much!	as soon as I got in the am. I became very relaxed as they took very good care of me	
98	yes. Everything	Nothing	I felt like you are hiring the best of people to do this kind of work.
99	I like the service of how you help your patients.	Nothing can really get better it was perfect	Everything was basically good
100	Everything! You have very caring people working for you!	No idea! We think you are perfect!	

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
101	Your personnel is always polite and always take time and care to help me calm down	Driver was told that it would be better for them and more comfortable for me if they would use the alley but they chose not to move and so the sidewalk caused me added pain	
102		They cut y pants off of me to get the the wound. I felt they could have covered me up since because I only had on my underwear. Other than that the service was good. Thanks	
103	It couldn't have been better + everyone was so helpful, friendly and efficient	Nothing!!!!	I praise them to the skies!! They were just great!!!
104	Took right over & helped me get the medical care I needed.	Nothing. You all were great	They were great at there Job
105	I was hurt at work (Sears Automotive in Reno) & Remsa was there in 2-3 minutes very very fast	Every thing was perfect.	I am very pleased w/the service I received w/remsa - very fast & very professional thank you
106	Your staff - Dr Eric Math in particular - saved my life ever one was so very good to me - thank you so much.		You operate the very best in all my experience - period
107	Attentive, professional, friendly	Would have preferred IV stick on hand, rather than crook of arm. (I have really good veins) NOT A BIG DEAL!	
108	The male paramedics protected my privacy by asking the firefighters to leave. (There were too many male in the room.		
109	Response time & staff professional, polite helpful	Doing a good job now! Would like to see the day when remsa is the sole provider of ambulance service in reno area removing the fire dept from doing routine medical calls.	
110	Stayed calm and reassuring	Could have asked if we wanted to notify neighbors to take care of dogs or if we needed to notify anyone else	My husband as intoxicated and not thinking clearly, firemen, policemen more paramedics noticed - or asked! The only reason all called because he couldn't drive.
111	Kept me informed at all time what they were doing and what to expect.	N/A Were all very good + courteous.	Were quick to respond and very helpful and caring.
112	Response quick, polite reassuring	Keep up the good work	
113	Rapid response - crew well qualified		
114	Arrived promptly. Kept our dad alive. Very polite.	Nothing	We were very pleased and thankful. Bless your workers.
115	very kind, informative and helpful	nothing	It was very first experience with REMSA and I have nothing to complain
116	They made my daughter comfortable.		They asked had she been punched in the stomach which I thought was inappropriate.
117	Everything! Good job	Well I was lucky I actually had 3 paramedics. My lucky day!	You always do well. I just don't like to have to use the service. You never know when you will need to though
118	The female paramedic did an excellent job asking me questions and also taking my blood pressure + temp.		
119	Commend your para medicks - did fine job! Couldn't be more pleased!	At 80 yrs of age I'm not looking forward to that large a bill - but again pleased with your people	
120	EMTs very professional + took control of situation calmly		

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
121	Communication as to patient status at scene + at ER was great.	Personnel did not know Renown South did not have pediatric capability, wasting time	
122	Making sure I was comfortable while being transported and each thing they would do before doing it.	Think service was excellent	Haven't been billed yet.
123	yes -		I used your services 4+ this year. Always been excellent - helpful - polite
124	You were @ the house within 5 minutes of the call - awesome	maybe take the freeway next time - my husband was @ the hospital before the Remsa - he had to drop the kids @ my parents -- etc - when Remsa arrived @ the hospital, could see my husband standing by the van -	
125	Called lifeline and within a minute my door bell rang - They were there, what can they do better. Thank you	Nothing	All great what can I say Thank you
126	The attendants were very nice, seemed concerned for my comfort and respectful		
127	The staff was very kind. On the transfer to St. Mary's they gave him a few minutes in the fresh air.		
128	Everything!	Keep on doing what U R doing!	your crew/crews are always efficient, pleasant + caring! More than can be said for Hosp. STAFF!
129	very fine, courteous		
130	We received excellent care - they all display empathy	Just keep up your quality service	
131	They were entertaining, but very concerned and helpful in helping me understand what might be wrong with me.	Nothing really.	Awesome staff.
132			REMSA people were very courteous and professional
133		Although your staff has been here a few times, they were quite annoyed to have been called again. Please remind your staff this isn't a good time for the patient! Some common respect and a little sympathy would be appreciated! It is not a joy ride for me.	
134	Everyone was very nice and helpful	We couldn't ask for better help	
135	Everything -- my son was well taken care of when he had his allergic reaction!		
136	everything. I got a bad fall + hit the back of my head on the marble floor You have a caring + well trained crew. The emergency staff were wonderful.		
137	Very nice to let my husband ride in the ambulance as we were not from the area.		Very good + much appreciated.
138	Everything Thank you!	Keep on keepin on	Thank you for the care and concern
139	Everyone was very helpful	All ok -	Great service
140	Everyone was polite but professional. Each person seemed to know their job, leaving one more person to explain what was happening.	They seemed perfect the way they are. I don't believe they could have been any better.	Thank you for being kind to an older person such as I, that can get confused at a time of an emergency. I don't deal well at times like these + tend to ramble.

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
141	Attending to patients needs	Dispatcher requested to get patient to lie down from a chair - we almost had an accident very close to bumping heads on a table - We fell down - I just could not do the job! I will not attempt this again patient was of no help.	
142	Everything. Young gal that gave IV was exceptional.		
143	Made me comfortable and stabilized my condition.		Excellent service Thank you.
144	I dont know what could be any better my family was pleased with everything		
145	Everything. The crew was very kind and caring. They were super.	Thanks for a Job well done	Professional, kind, courteous.
146	Response time was very good Crew was very good	Over all no complaints	Very good service
147	general care and explanation was wonderful	keep it up!	great!
148	your staff was very caring and concerning thank you for your care		you are a exclent company thanks
149	Moving Allen from the bed to the gurney carefully so as to cause discomfort.		
150	Allowed me to sit instead of being strapped to the bed.	Remove all charges to me and bill everything to St. Mary's. Thats what I was told would happen and I refuse to make any payments to REMSA. I did not request the ride, therefore I will NOT pay for the Ride. Thank you.	
151	Not well in providing medical help (IV). Transporting out of house to ambulance was well.	Listen to what we think is going on. Administer an IV when a person is severely dehydrated.	Severe dehydration was not adequately addressed.
152			One of the ambulance personnel suggested that the nursing staff at The Court of Reno (residence where my mother lives), overdised her with morphine. My mother has severe Alzheimers and had been on incredibly low doses of morphine for a previous fall and resulting pain. The staff at The Court has been professional throughtout her stay and I am extremely upset that he would suggest this to me and the staff waiting for her at the hospital. I feel an apology is due to The Court of Reno. Thank you.
153	your staff was very polite + very helpful	Just keep up the grate work	Dispatcher was very clear + helpful
154	your staff were calm + efficient + knowledgeable at their jobs. Thank you		
155	Efficient, clear communication, a little appropriate humor.	Be a little more prompt - when that's possible	Fine Job at a tough time
156	Every thing was professional and very kind and gentle. Wonderful crew! Thank you!		Excellent!
157	Very nice to my daughter. Made it so she wasn't scared. (she's 7)	N/A	great care! Thank you!
158	Everything - arrived in good time and got to the hospital in time.	Just keep up the good work.	
159	Thank you for your great service for both me and and my late wife		
160	Monitored sumptoms and transportd to emergency care.	I have no Idea.	Could not believe how courteous and understanding the crew was.

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
161	All I remember they were so great and helpful to me. They were above + beyond.	working - nothing	They were all women - angels to me Thank you again for what you do.
162	very friendly and helpful and calming in a stressful situation		
163	Check out VA Hospital and changed quickly to St Mary's Hospital to come in.	Not sure	Staff were very caring + helpful; seemed confident in their job.
164	Everyone was very helpful and made me comfortable. They even stayed with me until I was settled at the hospital.	I think they did everything very well.	They were very nice to me and talked to me so I was not so nervous. They spent time to explain what they were going to do to me they were very professional. Thank you for taking care of me.
165	Arrived quickly - handled gently they were very concerned with my safety.		
166	Prompt + Informative	nothing	
67	Prompt Response, Genuine Concern	Good Experience under the circumstances	very satisfied w/emergency service
168	tirelessly worked to get a pulse for my mom - after 20 mins.		
169	Treated me with dignity		Rec'd excellent care from home to hospital
170	Responding, handling, & delivery.	No comments.	"Well Done REMSA"
171	Named both employees, they were true professionals. Your other staff need to take hints from them and learn! They seemed to know and care about me and my problems. They should be acknowledged for their skills. My driver and his partner were terrific. The paramedic started my IV at home before transporting me. He was able to help with the nausea and pain. He communicated with me. He told me about my privacy rights. He reassured me and knew I was scared and did not want to go to the ER. He was able to start an EKG knowing with my veins if I did not get help right away it could be hours at the ER.	Have (named medic) educate your other drivers. His partner was a great help to him.	My first experience was horrible. The two women were not kind did not make it easy for me to get into the ambulance.
172	Took my fear away - took my pain away.	You did very good.	You have wonderful people working for you.
173	Everything was very professional. Named paramedic - was outstanding.		
174	Followed strict orders not to use latex gloves.		For the most part the crew was very sympathetic, but one person seemed very condescending to me and my family.

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
175		I wanted to know why an IV was necessary. The attendant put the needle in three different places. I now have three black and blue marks on the back of my hands. The IV I felt was unnecessary. I was put in the ambulance which remained in the Baldini's parking lot for a long while before heading to the Renown Hospital. Couldn't understand why. I didn't feel the trip to the hospital was necessary. The attendants were telling me I may have bleeding in my head, thereby having me feel my condition was more serious than it actually was. I was not unconscious. No headache, and no dizziness. I was coherent answering their questions. Still they had me feeling my condition could be hazardous if I didn't go to the hospital. After arriving at the hospital I was put in an examining room where I waited over an hour and a half for a doctor to examine me. I lost my patience after being told it may be two hours. I told one of nurses I not waiting any longer. I wanted out. I got release papers and left in anger. It was the worst treatment I got in any hospital. Renown is on my "do not go there" list.	
176	Yes		I was Remsa + Fire Dept services together because I could not open the front door for them. Fire man broke in the back door to enter my house. many thanks to Fire Dept. together with Remsa.
177	Communicate, soothing + funny banter		Thanks to the lady EMT - She was great!
178	Very professional excellent communication.	Continue to stay in business and do exactly what you're doing!	n/a
179	started I.V. first try. They were very positive and up beat		
180	My legs were cramping for 3hrs I couldn't sit down or they would cramp. The paramedics showed me what to do so I could get on the gurney & get to the ER & it worked! They were angels.		
181	Very kind, courteous, concerned + helpful took a lot of fear away	Nothing. They were great!	Excellent service all around.
182		Your the best "I'm alive"	
183	Very well - you had some very nervous scared family members to deal with.	Nothing I know about	Very helpful understanding people. Thank you.
184	Helped find my husband to be notified	service already good	very good
185	You all were very helpful and kind. You were patient and put me and my Grandma at ease.	continue the same great service! :) Thanks!	
186	Made me feel as comfortable as possible with my daughter.	Not sure if it was REMSA's fault, but it took FOREVER to do our transfer.	I can't remember her name, but the lady who transferred us was really nice.
187	everything was very professional + compassionate.		Thank you for being there when I was in need of help.
188	Everyone was very gentle, treated me with compassion - very aware of my pain	Continue your prompt service	
189	Response, attitude, professionalism	Cont to provide the Best each member of REMSA can	

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
190	The two EMTS that came to our house were great! Very professional + kind. They probably saved my life! Many thanks for job well done!		I don't think any 2 people could have done such a fine job as these 2 EMTS did to help me.
191	Everything - my husband was very impressed with all.		
192	giving support to patient		Very satisfactory
193	Everything		We were there from out of town - emergency from ambulance staff to the ER staff was great & thank you Dr. Zebrack. Dr. Lanny Andrews & Cody. Thanks again to all. We shall return to Reno - not the ER
194	Everything! The 2 REMSA professionals were exceptional. Communicated clearly + directly w/me and my family. They were respectful, courteous, stayed w/us until everything settled at the hospital + made sure all questions were answered. I could not have asked for better or more compassionate care. My only regret is we did not get their names so we could appropriately thank them + let you know.		
195	The personnel were caring, professional and very kind.	I think the service is excellent now.	My wife was put at ease by the caring fashion of your care...I can't thank you enough.
196	You were excellent, I meant to invite myself and tell you what a wonderful crew you have. I have the BEST. Thank you.		
197	Courteous & polite - very helpful.	N/A	
198	you did a very excellent service	you save my life	we love you people for your fast excellent public service.
199	Great job to the REMSA medical crews.	Great service. Punctual to the service of the patient.	Keep the great job of the remsa medical crews. Knowledgeable...nice...
200	The EMTS were great - caring and thorough.		
201	Made sure I was comfortable, needed anything while being driven back to emergency	nothing - you were all great	all of you were great in making sure that all my needs were met. Thank you again.
202	Everything	No suggestions	Fast response plus excellent care + service
203	Everything	Take correct route to hospital not 395 to 80 to Sparks Blvd to Baring to Vista to Prater then to hospital	
204	When given directions (direction) to find me did not give to driver so they find without going around looking for me. Time is important.		
205	Polite, professional,	Nothing you can't change what is good.	The two personnel were exceptionally competent. Thank you!
206	convinced me that I was in grave danger & needed to be seen & treated by a doctor immediately	everything went well & I felt comfortable	Everyone was very concerned & nursed me back to health in a very dignified way, they checked on me often & care for me well
207		Get better nurses to put in IV's my son was bruised very bad	

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
208	Were very understand of my having just lost my wonderful husband to cancer + knew I was stressed.	keep up the good work.	
209	Basically just take me to hospital	have mor ambulance	I have to wait hours for ambulance to get transfer to Different Hospital But to send bills u guys ar good
210	calmed me down during a very stressful moment. Thank you to Micah + crew.	Hopefully I won't need your services again.	You crew was there very quickly & was greatly appreciated.
211	everything - very professional	the service was so good, there's nothing else to say	very helpful took care of the problem getting me to the hospital
212	I was very happy with everything	Keep up the good work	
213	The paramedics were great!!! Very caring, kind + helpful.		
14	They spoke to me as a professional	Do what you are doing	Wonderful
215	Everything - all was wonderful Youre Great People.	Out of state	It was great - Friendly nurses - Good cooks - Good floor staff -
216	everything was done well	I can't think of anything that could have been different	
217	Crew awesome - big kudos to George with care-flight. He stayed with me on the ground amb. - very caring - a true professional. I came in from black rock desert - motorcycle crash.		Thank you for being there & for being so caring + professional.
218	The EMS crew were very helpful and patient with me		They made sure my dogs were in the pen and made sure TV & lights were off and house was locked
219	you did a good job	you can the best that you can.	
220	I cannot help - I did not regain consciousness or become aware of anything until I was in the emergency room.	I assume all went well or I wouldn't have gotten there.	
221	Being so caring	just doing what your doing.	Was so good to heve the dispatcher on the phone untill Ambulance got here.
222	Communication + attention to detail		
223	Quick to response, very polite + considerate. They spoke + were gentle. Wonderful crew.	Nothing	Out the ordinary circumstances they were great.
224	Everything	Outstanding Job Thank you very much	
225	The crew that came was excellent kind + thoughtful	It is a comfort knowing you are a phone call away	
226	Medics worked together as quickly as possible to stop the bleeding of my laceration.	I happen to be on waremein.	
227	Professional behavior, patient gently handled prodeedures explained.	I am very satisfied with my experience with REMSA	
228	Everything! I was loaded on the stretcher very carefully & safely. Very upbeat w/me so I would not be too scared.	Nothing I can think of. My transporters were great.	No comment.

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
229	They treat me so great + try to calm me they know I don't want to go into the ambulance I panic. They explain everything they do. Because of my extreme weight 290 I don't want them to lift me they let me walk down the stairs	There nothing, there excellent,	I use life alert, + life alert dispatcher + your dispatcher don't get together sometimes to tell them to use back door. We have animals our cat got out this last time before we could get her put away but she came back. We thought she was safe on the front porch. hopefully soon we have a handicapped ramp. Were in the process of getting it butt then it will be the front door + key will have to be re kied also. We are really happy with your help. This last time I had to climb into ambulance because I forgot to take a panic attack pill ahead of time + your drivers were excellent thats in June. I was so embarres I forgot to put underclothes on. I was so embarrassed. I wanted to go in the car but my Dr. wanted me in the ambulance because of my breathing. It fluctuates where I can't get my breath sometimes. I have to get portable tanks
230	I think Alex was the EMT, and he was outstanding	nothing	Everyone was very helpful and professional.
231	Got there quickly + got me to the hospital safely, checked me out + gave me some pain medicine	nothing	Excellent
232	Paramedic gave Ella (3) a Dopey Doll that she loves!!!		
233	The personell was helpful and knowlegeable. Very careful in getting me down the stairs from the second floor.		
234	everything. Fast, professional response. Made a big difference for my wifes stroke recovery.		Great service. Thanks for being there.
235	arrived timely - informative & supportive		
236	They were very courteous and made me comfortable and relaxed	Not much	have none
237	excellent in well caring service, staff were very helpful as well as facility is clean at all times.	to conue a great service for being very helpful and fast service.	excellent in general
238	Saved his life + were very calm the whole time		
239	The staff was extreme accommodating and professional, Thank you very much		
240	Response time great		
241	Employees were polite + on time equipment was new + clean	Nothing service was great	
242	The two crew members who were dispatched were gracious, calm, patient and very helpful		
243	Best IV I ever had - no pain, no sticking me later.		
244	I am confidant that the Remsa staff did a top notch job when it came to my care. I wasn't concerned (AWARE) of very little after my head hit the ground - As of today, I still don't know what happened to cause me to pass out.	Where I live, several of the residents have used your service and the EMT's were great!!!	This was my very first buggy ride and I don't remember any of it!! Thank you for your great care!

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
245	Answered the call to school promptly.	I experienced pressure from medic to transport Karl by ambulance. The cost was exorbitant + excessive 900.00 to drive 6 miles! I should have the option of transporting my conscious stable son in my own vehicle.	
246		Need to explain that a older person with fall + dizziness + bumps to the head that it is important that they transport person to the hospital. Even if the patient tell them they don't need to go - the next day I took her to urgent care. They called REMSA to come take her.	
247	My Inborn Rick thermostat excellent	A sub station	I am 90 years old - "I will remember you"
248	Giving us a choice to use the service or not (not being forceful)	Lower down the price of the service	The 2 AMT's are very professional and courteous.
249	Kept me calm I have an anxiety problem and they even made me laugh Thank you!!	??	you guys were great.
250	The whole experience was plus 1000 +	Hard to find anything constructive	
251	you treated me at the bus station and took me to the hospital. Each + everyone was very professional	Nothing	Care + service was very good. Thank you all
252	Yes	very professional team	no. Improvement needed
253	speed upon arrival. Carefulness in getting me on the gurney.	Not one thing.	The good mood of the crew rubbed off onto me - yeah!! It's funny that in the (about) 2 miles trip from our apartment to No. Nevada Hospital_ nothing looked familiar to me at all - 2 guess because 2 was up so much higher than in a car.!??
254	Got patient to hospital	no info given to patient or family, no team leader, rude, unorganized. Put on hold for 10 minutes.	Very poor. No team leader all talking and inpolite to both patient and family. Unnecassary questions, when given history of health. Assumed it was only panlack attach not heart problems. Even after past history of heart condition verified. Very short and unperfesonal with patient in the condition. Staff at Renown had to find patient after reaching hospital. Family walked quicker to hospital than REMSA. Sincerely, Family
255	From dispatch to Remsa crew everything!	I was lucky I could walk to ambulance. When inside EMT's laid me down on stretcher problem with lifting & lowering of stretcher & it was not batteries! Thank you!	
256	While being professional still friendly thanks to you all!		I am very thankful for I man that stayed in the back a road with me. I was scared. He was very nice and helpful.
57	I do not remember very much of the ambulance ride, but of what I can remember the guys communicated what was happening with me very well.		
258	Did everything perfect.	Nothing more.	Best service I have ever had.
259	Especially everything	can't think of anything. was Johnny on the spot. Most helpful.	
260	Quik response - professional service - polite - helpful		

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
261	The help down the stairs and prompt pain relief	The did the best they could could not have done better	The EMT's did an swesome Job
262	Kind and gental very good to me in a scary situation.		
263	Prompt, caring, speedy	can't think of any as service was excellent	this one as well as previous one's, always excellen - Job well-done.
264	Great everthing they did was very professional	Not a thing	The EMT lady was great she didn't leave me until the nurse had all the information
265	very friendly. Helped me stop a panic attack. Great at their Job!		
266	safe driving, friendly "crew", knowledgable		
267	Curteous staff - explained exactly what they were doing.		
268	The man on phone was very helpful and kept me on the phone till REMSA showed up.		
269	Making sure I was all right and at if I need thing	That I get pain shots because the doctor give me pain pills and they don't work.	
270	Very helpfull and fast.	make shure every document 4 recive you turn over to ER personal	Beside forgetting to turn over med lise everything was really good Thank you
271	Very professional, courteous, helpful.	Keep on coming out when we need you!	I couldn't breathe hardly. I think thier advice to go to hospital helped me get kick started on recovery sooner as I had pneumonia. Thanks for the help! You're doing a great Job!
272	All that was needed.	Continue the good work.	I thought everyone involved was very helpful.
273	I think all performed well	I don't know	I appreciated your people allowing me to present history, medication list EKG strip, before "taking over".
274	Action was prompt. Everyone kind and conderate.	Don't know of anything.	I was well pleased with my experiences Thank you!
275	Everything was so great	Keep up the great service -	Thank you, thank you,
276	Very efficient and supportive. I was visiting in here. I am 86 yrs of age. Very impressed with staff and equipment.		
277	Everything - explaining what they were doing at all times.		
278	helped my husband accompany me to hospital as husband is totally blind.		Very attentive to us both.
279	by being friendly to me and being professional the response time was great		
280	We had three experiences with REMSA in the last 6 months + they were all positive		
281	Every thing was great. Were more helpful than should have been. :)	Keep up the great work!	I speak both English and Spanish. It might be helpful for other people to have bilingual personel.
282	Everything	Nothing	Everyone was very nice + helpful.
283			I was unconclous so do not remember anything but I am sure they good care of me and my head Injury.
284	vary fast, extremely helpful and so aring	I don't see how Excellent personel	
285	Entire experience was very efficient, calm, and professional. Well done!		

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
286	Called The VA hospital was sent to Reknown bc the VA being full at the time	Bill the VA Hospital. Do not use the P.O. Box any longer. Thank you!	All your staff was great
287	everything in a courtly manner		
288	Everything was awesome I could not ask for Better then the service we had	I wouldn't change a thing The service is awesome	Same commet The service was awesome what can I say
289	Smooth flight, excellent attendents	Keep present standards in force	
290	Everything was perfect. Keeping me informed and calm the entire time.	Can't think of anything.	We were thankful for the attention I received and want to personally thank all.
91		I learned at a Fire Training Meeting that Insurance is available for ambulance service. I understand it can only be signed for for in Oct or Nov. How do we get on the list to sign up? We had ambulance service in August 2008 and yet we have not been offered this service. Why is it not publicized more???	Ambulance service is extremely expensive!
292	Average Service	Called billing office on 6/10/09. Closed left a message. No one called me back.	
293		We need to join REMSA. No one told about REMSA membership. That was unkind as we cannot afford the high payment we have now.	
294	You got me to the hospital. The care and service was good and professional.		Please provide me with a copy of the incident report.
295	No one even spoke to me. They took him to the hospital and then were gone when I went back to his room. Either wait until I get to his room to talk to me or come to the waiting area. Thanks.		Would love to talk to someone about my bill. I am currently unemployed and would like to figure out payment arrangements. Thank you.



Regional Emergency Medical Services Authority

**CARE FLIGHT
CUSTOMER SERVICE
FOR
JUNE 2009**



CARE FLIGHT CUSTOMER COMMENTS JUNE 2009

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
1	Your staff and helicopter/plus Bridgeport medics saved me from certain death.	Continue being available to save us. Thank you!	May 17 Is a day I was in pain and need. You saved my life. We would like to get medic aflight insurance.
2	You saved my life.	You guys are awesome.	You guys were very quick to arrive and very very caring. Thank you always for saving my life.
3	I was a little apprehensive about flying as I've never been in a helicopter before, but they made me feel safe.	Possibly a little more prompt. I waited several hours.	
4	pain management		
	Everyone was very informative and comforting. They made sure everything as explained as it happened.	My experience was exceptional.	
6	Fast transport to hospital. Everyone was caring and respectable.		
7	cheaper prices	service in general was the best of service.	
8	Prompt and professional-the older nurse and pilot were great.	The young nurse needs a little help with her attitude.	
9	Everything was done for polite and professional.		
10	Did not like to fly so they helped me through to be very comfortable. Service was outstanding.		
11	I was not aware of much at the time of transport, I was told that everyone was very caring and efficient to my care.		
12	Very prompt to accident site. The crew was very professional and calming to me. (They calmed me down with info)	Your staff is very well trained in what they do	I was not involved with the dispatcher but they did their job very promptly and accurately I did not speak to the billing staff but received a bill after I was discharged from the hospital. the crew did not notify my family. I found it very difficult to communicate with my family because I was in excruciating pain.



Regional Emergency Medical Services Authority

REMSA
PUBLIC RELATIONS REPORT
FOR
JUNE 2009

PUBLIC RELATIONS

June 2009

ACTIVITY	RESULTS
Wrote and Distributed "Community Advisor" regarding hiking safety, personal watercraft safety and camping safety.	Multiple rural newspapers printed the Community Advisor verbatim with numerous references to REMSA, SEMSA and Care Flight.
Wrote and distributed press release regarding REMSA's Water Watcher Whistle program that will go out the first week in July.	Results will be available in July.
Wrote and distributed press release regarding Not Even For a Minute program.	Information was used for a Channel 2 story regarding the dangers of heat and cars on 6/30.
Coordinated interview request from Channel 2 regarding the dangers of heat and cars.	Interview will take place in July.
Began groundwork for press release regarding Care Flight having their first ever female pilot.	N/A
Media training session conducted with Glenn Jones, a new REMSA PIO.	Training session took place on 6/30.



A special "Thank You"
to our 2009 Nevada Infant Immunization and Safe Kids Week
Sponsors, Partners and Volunteers:

Supporters and Partners:



Save money. Live better.

Amerigroup
Borders Express
Carson City Health and Human Services
Douglas High School
Elko County Library – Children’s Department
Ernest M. Johnson Elementary School
Family Resource Center of Northeastern Nevada
GlaxoSmithKline
Great Basin College – High Tech Building
Health Access for Washoe County (HAWC)
Kiwanis Bike Program
Merck
Nevada Covering Kids & Families
Nevada Health Centers
Nevada State Frontier & Rural Health Program
Nevada State Health Division Immunization Program
Nevada Volunteers

Nevada WebIZ
Northern Nevada Early Intervention Services
Orvis Nursing Clinic
Renown
Rotary Club of Reno, Sunrise
Safe Kids Washoe County
Saint Mary’s
Saint Mary’s Nell J. Redfield Health Center
Silver Stage Task Force & Healthy Communities Coalition
Trader Joe’s Carson City
Tune In to Kids
Virginia Palmer Elementary School
Washoe County District Health Department
Washoe County Family Resource Center
Washoe County School District
William Bee Ririe Rural Health Clinic

Big Shot Bunny Volunteers:

Damonte Ranch High School Honor Society
Charlie Fettig, Rotary Club of Reno Sunrise
Melissa Krall, REMSA
John and Kathie Lloyd, Renown
McQueen High School JROTC
Pete Parker, Parker Development Services

Volunteer Nurses:

Janet Ford
Chris Paige
Lynnie Shore

Media:

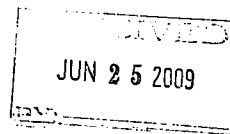
ClearChannel
Family Pulse
KAME-TV
KOLO-TV
KRNV-TV
KRXI-TV
KTVN-TV
KOH Radio
KTHX Radio
MomsLikeMe.com and Reno Gazette Journal
R&R Partners
RLife

4000 Joy Lake Rd.
Reno, NV. 89511



Phone: (775) 849-1108
Fax: (775) 849-1636

June 5, 2009



* Care-Flight
450 Edison Way
Reno, NV 89502

Dear Care-Flight Personnel:

On behalf of the Sierra Fire Protection District, I would like to personally thank your organization for all of your hard work and countless hours donated during the Grizzly Fire Evacuation Drill. The event would not have been a success without the outstanding display of your Care-Flight helicopter and your expert staff, who participated in our drill on May 16, 2009.

The professionalism and dedication of your team contributed to the success of such a large undertaking. Your department's time and efforts were greatly appreciated and did not go unrecognized.

Once again, the Sierra Fire Protection District thanks you for your community dedication and contributions to the Grizzly Fire Evacuation Drill.

Respectfully,

A handwritten signature in black ink, appearing to read "Mark P. Regan". The signature is written in a cursive style with a prominent initial "M".

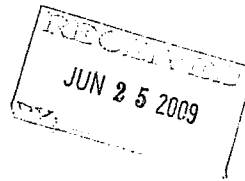
Captain Mark P. Regan

4000 Joy Lake Rd.
Reno, NV. 89511



Phone: (775) 849-1108
Fax: (775) 849-1636

June 5, 2009



* **REMSA**
450 Edison Way
Reno, NV 89502

Dear REMSA Personnel:

On behalf of the Sierra Fire Protection District, I would like to personally thank your organization for all of your hard work and countless hours donated during the Grizzly Fire Evacuation Drill. The event would not have been a success without the help of your REMSA unit and staff, who participated in our drill on May 16, 2009.

The professionalism and dedication of your staff contributed to the success of such a large undertaking. Your department's time and efforts were greatly appreciated and did not go unrecognized.

Once again, the Sierra Fire Protection District thanks you for your community dedication and contributions to the Grizzly Fire Evacuation Drill.

Respectfully,

A handwritten signature in black ink that reads "Mark P. Regan". The signature is written in a cursive style.

Captain Mark P. Regan



Regional Emergency Medical Services Authority

REMSA

OPERATIONS REPORTS

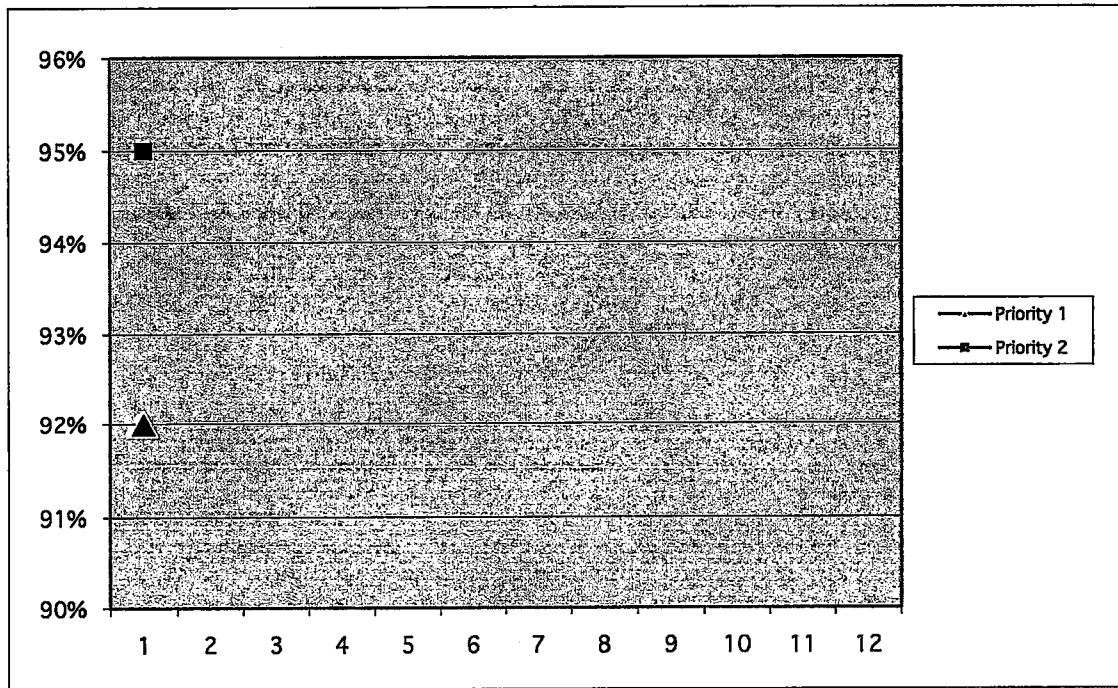
FOR

JULY 2009

DBOH AGENDA ITEM # 9.

Fiscal 2009

Month	Avg. Response Time	Avg. Travel Time	Priority 1	Priority 2
Jul-09	5 mins. 56 secs.	4 mins. 46 secs.	92%	95%
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan. 10				
Feb.				
Mar.				
Apr.				
May				
Jun-07				



09-10 Sched of Fran Avg. Bill

Care Flight				
Month	#Patients	Gross Sales	Avg. Bill	YTD Avg.
Jul-09	11	\$91,553	\$8,323	\$8,323
Aug.			\$0	\$8,323
Sept.			\$0	\$8,323
Oct.			\$0	\$8,323
Nov.			\$0	\$8,323
Dec.			\$0	\$8,323
Jan. 2010			\$0	\$8,323
Feb.			\$0	\$8,323
Mar.			\$0	\$8,323
Apr.			\$0	\$8,323
May			\$0	\$8,323
June			\$0	\$8,323
Totals	11	\$91,553	\$8,323	\$8,323
			Adjusted Allowed Average Bill -	\$6,598.00
REMSA Ground				
Month	#Patients	Gross Sales	Avg. Bill	YTD Avg.
Jul-09	2877	\$2,716,180	\$944	\$944
Aug.			\$0	\$944
Sept.			\$0	\$944
Oct.			\$0	\$944
Nov.			\$0	\$944
Dec.			\$0	\$944
Jan. 2010			\$0	\$944
Feb.			\$0	\$944
Mar.			\$0	\$944
Apr.			\$0	\$944
May			\$0	\$944
June			\$0	\$944
Totals	2877	\$2,716,180	\$944	\$944
			Allowed ground avg bill -	\$922.00



Regional Emergency Medical Services Authority

**CARE FLIGHT
OPERATIONS REPORT
FOR
JULY 2009**



CARE FLIGHT OPERATIONS REPORT

JULY 2009

WASHOE COUNTY

❖ **In Town Transfer:**

- 1 ITT was completed

❖ **Outreach, Education, & Marketing:**

- 4 Community Education & Public Event

07/09/09	Orvis School of Nursing	Flight Staff
07/17/09	Orvis School of Nursing	Flight Staff
07/23/09	RASI Orientation	Flight Staff
07/30/09	RRMC Rooftop Drill	Flight Staff

❖ **Statistics**

Washoe County Flights

	# patients
Total Flights:	11
Total Patients	11
Expired on Scene	0
Refused Transport (AMA)	0
Scene Flights	10
Hospital Transports	1
Trauma	5
Medical	4
High Risk OB	0
Pediatrics	2
Newborn	0
Full Arrest	0
Total	11



Regional Emergency Medical Services Authority

REMSA
GROUND OPERATIONS REPORT
FOR
JULY 2009



GROUND AMBULANCE OPERATIONS REPORT

July 2009

1. OVERALL STATISTICS:

Total Number Of System Responses	5042
Total Number Of Responses In Which No Transport Resulted	2174
Total Number Of System Transports	2868

2. CALL CLASSIFICATION REPORT:

Cardiopulmonary Arrests		1%
Medical		45%
OB		0%
Psychiatric/Behavioral		4%
Transfers		16%
Trauma		26%
	Trauma – MVA	7%
	Trauma – Non MVA	19%
Unknown/Other		8%
Total Number of System Responses	100%	

3. MEDICAL DIRECTOR'S REPORT:

The Clinical Director reviewed:

- 100% Full Arrest Ground Charts
- 100% Pediatric ALS and BLS Ground Charts
- 100% All Ground Intubations

Review of the following patient care records (PCR) for accurate and complete documentation and appropriate use of protocol:

- 100% of cardiopulmonary arrests
 - 28 total
- 100% of pediatric patients both ALS and BLS transport and non-transport patients
 - Total 143
- 100% of advanced airways (outside cardiac arrests)
 - 4 total
 - ETCO2 use in cardiac arrests and advanced airway
- 100% of Phase 6 Paramedic and EMT PCRs
 - 194 Paramedic total

- o 421 EMT-I total
- 100% Pain/Sedation Management – 187

All follow-up deemed necessary resulting from Communication CQI was completed by Marcy Kerns, Communications CQI Coordinator.

4. EDUCATION AND TRAINING REPORT:
--

A. Public Education

Advanced Cardiac Life Support

Date	Course Location	Students
6/16/09	Nampa Fire Department	5
6/27/09	REMSA Education	27
7/6/09	REMSA Education	1
7/7/09	REMSA Education	23
7/7/09	REMSA Education	1
7/8/09	EMS CES 911	1
7/13/09	EMS CES 911	1
7/16/09	John Mohler & Co	4
7/20/09	EMS CES 911	2
7/22/09	Great Basin College	2
7/25/09	REMSA Education	14
7/25/09	Deanna Whitehorn	3
7/25/09	John Mohler & Co	12

Blood Borne Pathogens Training

Date	Course Location	Students
6/10/09	REMSA Education	21

Basic Life Support Instructor

Date	Course Location	Students
6/20/09	REMSA Education	19
7/24/09	Casa Grande	14

Healthcare Provider CPR Courses

Date	Course Location	Students
6/11/09	Jennifer Kraushaar	1
6/22/09	Barrick Goldstrike	9
6/23/09	Milan Institute	27
6/23/09	Steven Silva	8
6/25/09	Nye County EMS	3
6/26/09	REMSA Education	7
6/26/09	CPR Plus	4
6/26/09	Visual Insight	2
6/27/09	Jennifer Kraushaar	3
6/30/09	EMS CES 911	1
7/1/09	REMSA Education	8
7/1/09	Nampa Fire Department	3
7/1/09	Randall Evans	6
7/2/09	REMSA Education	8
7/2/09	Storey County Fire	1
7/2/09	Jennifer Kraushaar	1
7/7/09	REMSA Education	6
7/7/09	Battle Mountain General Hospital	4
7/8/09	EMS CES 911	1
7/9/09	Nampa Fire Department	10
7/9/09	REMSA Education	1

7/11/09	REMSA Education	3
7/11/09	REMSA Education	7
7/11/09	Riggs Ambulance Service	7
7/14/09	EMS CES 911	2
7/15/09	REMSA Education	2
7/15/09	Alpine Hematology/Oncology	4
7/16/09	REMSA Education	8
7/17/09	Pershing General Hospital	1
7/17/09	Kalif Peter	4
7/17/09	Sierra NV Job Corps	6
7/17/09	Jennifer Kraushaar	17
7/20/09	Great Basin College	5
7/21/09	Great Basin College	4
7/23/09	REMSA Education	9
7/24/09	Casa Grande	17
7/28/09	EMS CES 911	1
7/29/09	REMSA Education	4
7/29/09	Cortez Gold Mine	2
7/29/09	REMSA Education	10
7/30/09	REMSA Education	10
7/30/09	Victoria Priebe	3
7/31/09	Jason Harris	2

Healthcare Provider CPR Recertification Courses

Date	Course Location	Students
5/7/09	Eureka EMS	1
6/23/09	Joe Kammann	16
6/27/09	REMSA Education	12

6/27/09	Eureka EMS	2
6/30/09	Nevada DOC	2
6/30/09	Jason Harris	1
7/2/09	REMSA Education	1
7/2/09	Visual Insight	5
7/2/09	Willow Springs	7
7/2/09	Tom Good	1
7/6/09	REMSA Education	5
7/6/09	REMSA Education	5
7/6/09	REMSA Education	5
7/8/09	REMSA Education	10
7/8/09	REMSA Education	1
7/9/09	REMSA Education	1
7/9/09	REMSA Education	8
7/9/09	REMSA Education	1
7/9/09	Willow Springs	16
7/14/09	REMSA Education	6
7/14/09	Nevada DOC	4
7/15/09	REMSA Education	10
7/15/09	REMSA Education	9
7/15/09	Alpine Hematology/Oncology	5
7/16/09	REMSA Education	10
7/16/09	Joshua Buchanan	2
7/16/09	Jason Harris	2
7/18/09	Regent Care Center	6
7/21/09	REMSA Education	10
7/22/09	REMSA Education	7
7/22/09	REMSA Education	4

7/23/09	REMSA Education	9
7/23/09	Nevada DOC	6
7/24/09	REMSA Education	10
7/25/09	REMSA Education	7
7/28/09	REMSA Education	8
7/30/09	Jamie Crumbaker	4
7/31/09	Jamie Crumbaker	3
7/31/09	Michael Drussel	3

Healthcare Provider Employee CPR Recertification Course

Date	Course Location	Students
7/22/09	REMSA Education	1
7/24/09	REMSA Education	1
7/31/09	REMSA Education	1

Healthcare Provider CPR Skills Course

Date	Course Location	Students
7/1/09	REMSA Education	1
7/13/09	REMSA Education	1
7/13/09	REMSA Education	1
7/22/09	EMS CES 911	1

Heartsaver AED Courses

Date	Course Location	Students
6/26/09	Tahoe Forest Hospital	1
7/7/09	JS Redpath	3
7/7/09	Nye County EMS	4
7/7/09	Tanya Getz	3

7/8/09	Nye County EMS	6
7/9/09	St Mary's Center for Health	6
7/9/09	Tanya Getz	4
7/10/09	REMSA Education	11
7/28/09	Tahoe Forest Hospital	1
7/29/09	Scott Kesler	6
7/30/09	Nancy Tyler	5
7/31/09	Scott Kesler	7
7/31/09	Eureka EMS	7

Heartsaver CPR Courses

Date	Course Location	Students
6/28/09	Visual Insight	10
6/28/09	Visual Insight	8
7/5/09	Visual Insight	6
7/5/09	Visual Insight	8
7/6/09	Sierra NV Job Corps	5
7/8/09	REMSA Education	4
7/8/09	Sierra NV Job Corps	6
7/8/09	Sierra NV Job Corps	4
7/10/09	Visual Insight	1
7/15/09	Sierra NV Job Corps	6
7/16/09	Nampa Fire Department	6
7/21/09	Sierra NV Job Corps	6
7/22/09	REMSA Education	10
7/23/09	Sierra NV Job Corps	6

Heartsaver First Aid Courses

Date	Course Location	Students
5/20/09	Majen	5
5/20/09	Majen	4
5/28/09	Majen	6
6/6/09	State of Nevada	19
6/10/09	REMSA Education	1
6/10/09	REMSA Education	21
6/12/09	Nevada DOC	2
6/16/09	Majen	5
6/18/09	Majen	6
6/19/09	Kalif Peter	22
6/22/09	Sierra NV Job Corps	5
6/23/09	Sierra NV Job Corps	3
6/23/09	SMRMC	2
6/24/09	Silver Legacy	2
6/24/09	Majen	3
6/25/09	Silver Legacy	1
6/26/09	Silver Legacy	1
6/27/09	CPR Plus	5
6/27/09	Jennifer Kraushaar	5
6/30/09	State of Nevada	4
7/1/09	State of Nevada	3
7/1/09	Jennifer Kraushaar	15
7/2/09	Sierra NV Job Corps	10
7/2/09	Sierra NV Job Corps	3
7/6/09	Nevada DOC	31
7/7/09	REMSA Education	4

7/9/09	REMSA Education	3
7/9/09	State of Nevada	4
7/9/09	REMSA Education	5
7/11/09	Tahoe Forest Hospital	1
7/12/09	Scott Kesler	1
7/12/09	EMS CES 911	6
7/15/09	Silver Legacy	2
7/16/09	Joshua Buchanan	2
7/16/09	Silver Legacy	1
7/17/09	Silver Legacy	1
7/18/09	REMSA Education	2
7/18/09	REMSA Education	4
7/18/09	Nye County EMS	6
7/20/09	Marci Hays	2
7/23/09	Reno Tahoe Airport Fire	3
7/23/09	Eagle Valley Childrens Home	5
7/29/09	REMSA Education	17
7/30/09	REMSA Education	12

Heartsaver Pediatric First Aid Courses

Date	Course Location	Students
6/26/09	Tahoe Forest Hospital	10
6/27/09	Visual Insight	4
6/27/09	Jennifer Kraushaar	5
7/6/09	Great Basin College	7
7/11/09	REMSA Education	8
7/11/09	Visual Insight	5
7/18/09	Jennifer Kraushaar	3
7/18/09	Riggs Ambulance Service	5

7/19/09	Visual Insight	2
7/21/09	Visual Insight	1

Pediatric Advanced Life Support

Date	Course Location	Students
7/14/09	REMSA Education	12
7/14/09	REMSA Education	10
3/29/09	Scott Rebello	3
7/20/09	EMS CES 911	2
7/26/09	John Mohler & Co	8
7/29/09	Great Basin College	1

International Trauma Life Support

Date	Course Location	Students
6/17/09	REMSA Education	7

Neonatal Resuscitation Program

Date	Course Location	Students
4/24/09	REMSA Education	6
5/19/09	REMSA Education	12
6/24/09	REMSA Education	12
7/31/09	REMSA Education	6

Total Students Completed & Processed – July 2009	1168
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Paramedic Course

Ongoing	REMSA Paramedic Program	19 Students
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EMT Course

Ongoing	EMT-Basic	22 Students
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5. COMMUNITY RELATIONS:

Community Outreach:

Point of Impact

7/18/09	Child Safety Seat Checkpoint, Baby Depot at Burlington Coat Factory, Reno. 30 cars and 39 seats inspected.	12 volunteers, 2 staff
7/29/09	Nevada Office of Traffic Safety Child Passenger Safety Assistant Course	8 students
7/31/09	Henry Schein Employee Safety Day; Child Passenger Safety Booth	1 staff

Northern Nevada Fitting Station Project

7/22/09	Fitting Station quarterly partners meeting, Renown Foundation.	3 partners
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Safe Kids Washoe County

7/8/09	Safe Kids Mini Golf Tournament subcommittee meeting.	5 volunteers
7/9/09	Nevada State Injury Prevention Task Force quarterly meeting, Reno.	9 volunteers
	Distribution of 1,250 Water Watcher Whistles for water safety to partners including City of Reno Parks and Recreation, City of Sparks Parks and Recreation, Washoe County Parks and Recreation, Sierra Adventures, Double Diamond Athletic Club and Saint Mary's	1 staff

7/10/09	Meeting with Truckee River Foundation, donation of 150 Water Watcher Whistles.	1 staff
7/11/09	Renown Pediatric Emergency Department Grand Opening, bike helmet fittings with the Save Your Skull program.	2 volunteers
7/14/09	Safe Kids Washoe County monthly meeting, Sparks.	18 volunteers
7/14/09	At-Risk Populations Emergency Preparedness Symposium, Sparks.	1 volunteer
7/15/09	Safe Kids Walk This Way 2009 planning teleconference call	1 staff
7/15/09	Safe Routes to Schools quarterly stakeholders meeting, Washoe County Public Works.	5 volunteers
7/16/09	Northern Nevada Maternal Child Health Coalition, Washoe County District Health Department. National Speaker Ira Chasnoff discussing Community Based Strategies for the Identification of the Pregnant Woman at Risk for Substance Abuses	60 attendees
7/16/09	Outreach booth at the Sparks Farmer's Market in partnership with the Nevada Immunization Coalition, Sparks.	5 volunteers
7/23/09	Nevada State Child Passenger Safety Task Force quarterly meeting, Reno.	8 volunteers
7/29/09	Chili's Fundraiser for Safe Kids, Reno, Sparks and Carson City locations. \$426.30 raised	

Public Relations

7/1/09	Interview with Channel 2 television news and Mike Alger regarding heat in cars and children.	2 staff
7/7/09	Interview with KOH radio news regarding summer safety.	1 staff
7/7/09	Press conference with Channel 2, Channel 4, Channel 8, Univision and the Reno Gazette Journal, led by Reno Police Department, regarding the motor vehicle death of a 4 year old.	1 staff
7/17/09	Interview with Channel 4 television news regarding heat, playgrounds and children.	2 staff

7/30/09	Truckee Meadows Tomorrow CEO Forum, Health and Wellness subcommittee facilitator, Washoe County Library	1 volunteer, 50 attendees
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Regional Emergency Medical Services Authority

**GROUND AMBULANCE AND CARE FLIGHT
INQUIRIES
FOR
JULY 2009**

INQUIRIES

July 2009

There were no inquiries in the month of July.



Regional Emergency Medical Services Authority

**GROUND AMBULANCE
CUSTOMER SERVICE
FOR
JULY 2009**

GROUND AMBULANCE CUSTOMER COMMENTS JULY 2009

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
1	Providers were friendly, calm, reassuring, thorough and from my view point, very competent.		Thank you!
2	Very compassionate, very caring - was treated like a family member	Couldn't be better	Can't say enough on great service
3	Everything The Three young People you Sent here for me were just <u>wonderful</u>	Praise God, that you have good People working for you	I was in World War II Along with Six of my brothers If Everybody had help as god as yours this Country would be running <u>slight</u> and <u>True</u>
4	Took care of my wound + made me comfortable, took time to make themselves - aware of my seizures and how ears!	Keep up the good work! It's saved my life more than once!	
5	You got the wife down 14 steps		Good - verely care ring
6	Kept the situation calm. You were immediately available		great job!
7	Quick professional (+ courteous) service - Thank you	N/A	Job well done!
8	Before moving patient always told her what they were going to do so she knew what to expect. Communicated every step of the way.	They were <u>PERFECT!</u>	No questions - she passed away the next day - Thx for getting my mom home. This is where she wanted to rest in peace. Thx again
9	As a visitor to your city - and having an emergency I felt the personal treated me very well. I thank them for their quick response.		
10	Showed concern + caring manor	Did fine job	
11	Everything, top notch	It was perfect.	Very professional Thank you!
12	Keep my dignity w/no pants on!		
13	Thourough and Informative	Better safe than sorry - but a bit of an over reactor - on the part of REMSA - son really didn't need hospital	Care was excellent, personell very professional
14	The firemen kept me comfortable and loaded me on board as painless as possible from broken hip.		I spent more time with firemen. Did ask if service streets were okay since the radio announced twice a "DOA" on freeway.
15	Wonderful job!!	-	All I can say for right now is keep up the good work.

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
16	Reall business like; full attention to patient; 100% concerned; applied necessary medication	I cannot think of anything, everything was well performed.	no comment
17	everything was handled in a very professional manner.	-	-
18	dispatcher wasa very helpful in telling us how to be prepared for emergency crew		They were very kind and gentle with Lyndee and explained to us everything that needed to be done - Thank you
19	Treated me with respect and caring	You've served me as good as you can.	Thumbs up for your REMSA staff that transported me from Northern Nevada Er to Saint Mary's ERII
20	all		fast - accurate - polite - and great communication.
21	Tried their best to save keith	EMT's were courteous, helpful and compassionate in my time of need. I don't know what they could do to serve us better.	
22	very professional, listened, calming excellant service		did not feel rushed or pressured
23	Very professional, caring, made me feel safe + very comfortable as I was in a serious medical condition @ Reno-Sparks Indian Clinic and at the request of Dr. REMSA quickly responded.	Always be there for me - as they always have since I've lived on Pyramid Lake Res.	God Bless all the REMSA as they continue to serve the community + people.
24	compasion, warmth, respect	pay your staff more they are worth it	Unfortunatly my mother passed away but the crew made her feel comfortable. A+++ for them all.
25	Prompt + courteous - knew what to do + acted accordingly.	Keep up the good work!	Your staff is efficient + knowledgeable.
26	crew were very nice & communicated great. Everything was very clean and felt safe.		
27	Everything.	Nothing at this time.	Very compassionate and helpful. Thank you very much!
28	Responded ina timely manner	I hope don't need to use these services again.	
29	We will never call any ambulance service but yours! You did everything right and reassured my family also!	Nothing	
30	Very knowlegeable, very efficient, friendly.	I live in Red Rock. Sending an ambulance from Golden Valley would have been quicker.	Thank you for your services! Your EMT's are great!
31	Came to the house soon after I called	nothing	exlant service
32	a very professional staff	-	-

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
33	As the patient I felt very safe In I was informed of everything.	very satisfied	The crew was very professional + took very good care of me.
34	Everything!		Staff was calm + caring. Very competent. Made me + my family feel well cared for.
35	Everything - the EMT's were great and had a very professional yet human + humorous personalities		I have had to use your services a couple of times over the years + your personell are the top
36	helpful professional + fast	Just keep the hard work up.	
37	As always everything was great	Nothing - you have very qualified people & showed concern. Thank you again REMSA	
38	provide an excellent service, care & professionalisms to myself - thank you very much!!!		
39	Very nice and explained all procedures and answered all questions asked. Very professional		I am the family member and I work in the health care profession - your staff was very cautious and communicative.
40	Calmed me down by acting very professionally + speaking calmly to me. I felt I was in good hands	Don't know	The dispatcher kept my mind off the terrifying event + I am grateful - REMSA personnel were just great + I was happy to see them.
41	your staff was excellent!!	Not much!! It was pretty awesome	The new "guy" was great!!
42	Showed compassion	always being there when needed	
43	Quick response & friendly behavior.		
44	Everything - I was totally impressed with the quality of service & professional conduct.	Not a thing	Help arrived within 5 minutes after my husband called 911
45	Informed me re my blood pressure + blood sugar.	Did a great job	Was sent the letter to sign re medicine. Could this have been done @ the hospital?
46	Everything that was possible to do.	Keep up the good work!	
47	as soon as the crew arrived they immediately asked if I was aware of any brain problems in my family I immediately said my dad had a brain aurorism saved my life		exceptional care
48	All	continue	the 2 attendents were grand - professional yet comforting.
49	The transfer from Renown to St. mary's was good because of insurence		

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
50	They were very courteous and efficient, answering my questions quickly, informed what they would lead + the time to get to Renown.		
51	Staff are very comforting + nice	none	staff are very polite. service is excellent.
52	Care of patient despite attendant pain from injury		Very good - perhaps need more communication with attending family members - no doubt of secondary importance.
53	on the ground care, continued care to the hospital and continual checkback while in ER		Care and service by ambulance staff was great!!!
54	Extremely polite to the patient.		Why do you need the fire department?
55	Everything from the time they got here till I got to the hospital. Couldn't ask for anyone better.		I couldn't ask for anyone that cared like the people on REMSA.
56	Patient has alzheimer's - you were understanding + helpful	Your service is very good as is	
57	I thought the personnel was great!		
58			I was out of town so it was beneficial to me to know my mother was taken care of in such an efficient + kind manner.
59	you did everything just fine. Were very prompt.	Nothing	
60	Response time, Professionalism + helpful amount of information		
61	Friendly staff that explained why I needed to keep my neck from moving around. Assisted with movement to and from wheelchair to ambulance to facility.		
62	Kept me alive!	You already do a GREAT JOB!	I'm really glad for the silver saver program - IT GREAT :)
63	Very helpful in getting my mom to the hospital & the response time was excellent		
64	Speedy, Courteous, helpful personnel.	Nothing more, service couldn't have been better.	Excellent!
65	Ambulance crew showed politeness and care from the time they're dispatched to my place and brought me to the hospital emergency facility	No negative comments. I have been satisfied in my recent 911 call	REMSA crews are professional in handling the job.
66	The team was very caring in the transport of Velma, who is 103 yrs old she was well taken care of.		

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
67	was very helpful talking to me and my little daughter.	Nothing everything was good	
68	Quick response time, friendly personell.	Air condition the back of your ambulances. It was hot.	
69	Kept me calm. The female paramedic was especially helpful		
70	very prompt, polite, courteous, helpful thank you making a bad situation a pleasant one		
71	Everyone seemed very nice	Not sure I was kinda drugged at the time. Don't remember any problems	
72		This service was construed to be a run of the mill process, done as a favor because reknown lacks equipment at South Meadows, to do some procedures. No mention of charges was ever made.	
73	arrived immediately very professional staff		
74	Explained whats was happening to me to my family.		
75		keep up your good service, but I hope to not use it again for many years	
76	Fast Friendly + concerned - very good service !!!		
77	transport from Renown to Manorcare	You are wonderful / Thank You :)	
78	the crew very helpful calming my daughter and explained every thing to her.		
79	We were very appreciative of the friendly & professional service		
80	the Crew did a very professional job in attending to my wife but were unable to save her.	it would have been nice if the had told me what they had tried to do, even though they weren't successful.	
81	good service	a little long for pick up to return to Regent Care but understand priorities	
82	Your service was very good		
83	Their ability to remain calm and in a most trying situation	Cut prices \$895.00 is highway Robbery	
84	Covered me with a warm blanket !!(heart) Very polite + willing to do whatever was asked for.		
85	Your crew did everything they could to make sure I was as comfortable as possible.	Keep up the good work	
86	Moved very Fast and Efficient. Employees were Pleasant		
87	As always the crew was curteous efficient and polite - Aware of the feelings of patient family -	Thank you all very much	

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
88	Quick response, comforting to my elderly mother + helped alleviate pain quickly.		
89	Made sure I (spouse) was aware of everything they were doing for my husband.	N/A	
90	Everyone was professional, helpful, and kind in an extremely stressful situation. Dispatcher was very calming. Paramedics endured house was secure before leaving + wife could remain with patient in ER.		
91	Staff was kind and compassionate to my scared 12 yr. old son	N/A	
92	Excellent service, kind and attentive		
93	Very caring and knowledgeable I sent separate letter to REMSA commending two of the EMT's ("employee name" and "employee name")		
94	Kind, started IV from stop	put IV in non-dominant arm please	
95		My cap and glasses were not removed until in the hospital. My daughter took them off and there was a bloody scratch on forehead. Otherwise service was fine	
96	REMSA was at my home very soon after calling. No sirens as requested. Thank you -	Not a thing.	
97	This is second time in just a year we needed this service - very satisfied -		
98	The guys were so awesome! & (cute)	N/A	
99	Great service to the community	Nothing	
100	Very kind & helpful - arrival time good Questions answered		
101	Arrived promptly, well trained, well equipped		
102	Every Thing was Perfect!	Keep up the Quality Work	
103	All of the above	Hard to improve on your professionalism	
104	Your level of professionalism is always top notch. Your men made me feel safe and well cared for.	Always a great job. Thank you!	
105	People doing the transport were very helpful, thoughtful and really put me at ease, as best they could.		
106	Stabilized + managed pain, showed empathy and emotional support during traumatic + frightening event	Transport rates very exorbitant	
107	Vary Courteous - efficient + caring	Thank you!	

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
108	So fast! I barely hung up and they were here	Just keep up the good work	
109	One of your EMT's Held my hand while I was getting the I.V. I've never been hurt before I was very scared		
110	Driver and attendant with my mother both very nice and professional.		
111	Carry conversation to keep things calm + understandable		
112	Very patient with me as I was not feeling well. Knowledgeable about my condition.		
113	I believe the man's name was "name" - very polite, compassionate and caring. Very respectful to our Dad.	nothing - excellent service.	
114	Good service Great personal.	Have air. cond working in ambulance	
115	Asked all imp. questions. Was great + I was relaxed.	Can't think of anything	
116	was very helpful and on time		
117	They were helpful in every way polite and all.		
118	very courteous and professional		
119	Communication, took me to hospital of my choice		
120	personnel helped make it a more pleasant experience.		
121	The paramedic who helped my daughter came back to the ED to check on her - that was awesome.		
122	Very kind, Gentle and Professional		
123	Personable & caring staff, helped to distract, answered all questions openly & thoroughly	have not yet dealt w/billing, but all else was great, no suggestions for improvement	
124	Responded fast and very knowledgeable and personable.		
125	I can't say you did anything wrong, the ambulance crew were extremely professional + were very attentive to my needs	Your personal were professional + very well trained.	
		I was very disappointed in the care. Very Rude.	

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
127	Nothing.	Ambulance crew was rude, ignored my needs, didn't help me in or out of Ambulance, spoke sexual comments to one another - Bad experience.	
128	Arrived in a very short time. Got my mother (the patient to the hospital).	Can't think of anything else.	Everything was handled very well.
129	Being polite and concerning	Nothing	good
130	Calmed me down, reassured me I would be all right	IV in left arm was painful	good service very professional + helpful
131	Crew worked quickly and efficiently.		Called 911 was told to hold; called REMSA no response was told to hold 8-10 minutes. Hung up, called back, finally went through!
132	Dorothy did the calling, I am disabled also so any help is needed. Good at it.	Sorry I don't remember the crew names but all went well here.	Call went thru quickly, crew arrived quietly - thank you!
133	Everything	Hospital staff was rude upon our arrival and put into room, but REMSA apologized.	
134	Everything	Nothing	Everything was Wonderful. Thank you for your great service
135	Everything was perfect. Couldn't be happier		Crew was fast, professional + helpful
136	Everyting done well except one of the workers told me "I was here before for someone" when it was told it was my mother-in-law he said "Oh the bedroom must be bad luck". I felt it was in bad taste to say something like that.		
137	Followed my suggestion not to block only exit with big firetruck so ambulance could get in. Cleared access staff quickly. Transported quickly.		Good service + care.
138	General medical care performed with dispatch and obvious knowledge	"Keep up the good work"	Can't say enough good about the service rendered.
139	Got me to the VA hospital for more needed help. Your staff did a very fine job.	Get here sooner.	Great service
140	helping me breath - (panic attack)	nothing	great service thank you!
141	Immediate response, professional, polite, privacy respected, Explained what they were doing	Thank you!	EXCELLENT Dispatcher was very calm and caring.

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
142	Painless movement to/from gurney Yound lady listened, not overbearing		Air conditioning in van was poor.
143	Personal on ambulance were courteous, effcient in care, respectful, helpful - very caring.	Show up on time not 3+ hours late. Transported from one hospital to another.	Doctor and tests schedule - had to spend an extra day in 2nd hospital due to delay. Doctor sowed up at hospital several times only to be told his patient was a victium of REMSA, not good rep for your company.
144	Prompt!	IV training, my rt arm from wrist to elbow had a hematoma for 4 weeks after! Blew the vein on the first try.	
145	Put me at ease + explained everything clearly	-	-
146	REMSA ambulance personnel were extremely professional and always kept me and my wife informed on what they were going to do.		Care and service in general, was excellent.
147	Showed personal interest + caring about comfort.	All was great!!!	Came by later to see how I was doing. Very nice of them!!
148	The ambulance + medics arrived about the same time my husband was regaining conciousness	They were quick to arrive	Excellent + thorough
149	The EMT's were able to put oin an IV the first try usually RNs have to try more then once.	On the way out of the ambulance at the hospital the EMT's dropped me.	
150	The two medics knew their jobs + got me stabilized quickly + professionally, all went well.	Keep the consistency and you won't need to get better. I don't think could have been better.	Good organization + team work
151	They were here fast, they were helpful in everything	You can put a person that can speak both Spanish and english	Don't have any questions Thank you for help me
152	Very personable, kind, humorous, made me feel like I was being listened to. (Not always the case for an 89 yr.. old)	Nothing else.	Dr. Schenk was fantastic. He treated me like his dad!
153	You did every great!		Every thing was great!!
154	you did everything well	Keep up the same prompt service	could not be any better
155			Everything was great and staff was very helpful
156	Attentif, Courtesy& friendly	very satisfied	had the feeling of being in good care - felt very relaxed
157	Talked to me to assure me that I would be well taken care of. I was really scared for my life.	Your crew noes how to do that	I am sorry for being so late, while going thru my Dr Bills ETC I came accross these forms forgive me. Excuse my writing, I am still not myself

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
158		Consider only one Medic asking questions instead of two asking the same ones right after the other.	I had passed out and was somewhat confused when I had 2 Medics - 1 on each side firing questions at me - B Remsa has been great to me - just this one time I felt bounced on.
159	Very prompt and so considerate.	Nothing - The service was all I could have wanted.	I have life line - I'd take REMSA over them anytime.
160	My mother was very happy with the crews care of me	Not much really you already do a great job	I the patient was suffering from confusion due to hitting my head the day before so my 76 year old mother had to tell me about my experience with you. Don't feel bad I don't remember you because I don't remember the ER and it's staff either. :)
161	The crew were all kind and understanding of the problem.		I think the person who put in IV should have had more experience - he tired 2 times and it really hurt!
162	Crew was friendly, helpful, + very calm + efficient.	I don't know. This is my first experience with an emergency crew and ambulance.	I thought care + service were great.
163	Took good care of me	Nothing	I was given good care
164	All REMSA personnel were professional, helpful + knowledgeable. The girl who rode in the ambulance with me was very nice & calming.	I thought the care & service I got was top notch	I was impressed with my REMSA team. They were sensitive to my injuries + even to saving my clothes. I wish I knew their names but I am very thankful I had REMSA respond to my accident. I broke my tibia + fibula in 7 places with 2 compound through the calf. I am now recovering extremely well and thank REMSA for all you did to help save my leg!
165	went to the patient quickly and gave him the help that was needed.		I was pleased how helpful and professional the team was.
166	The care	Stay at your post, and Thank You Very Much!	It was excellent service
167	Because of the stairs to our bedrooms they buckled me in a chair and took me down	Everything was done in a professional manner	Job well done. Please excuse my writing, not very good because of the mini stroke.
168	They made me comfortable + explained the bumpy ride to reno.		Just keep the good work you are doing going.
169	Encouraged me to take the ambulance instead of cab	you are professional + poilet	Just that I felt encouraged to take the ambulance
170	You cared about my health and well being!	Nothing	Keep doing the good work!

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
171	I was unconcious but my pain was attendid to and made it safe to hosp.	everything went wonderful if I ever need help I will depend on REMSA	Keep up the good work. I am recovering well thanks to REMSA
172	The staff was very friendly and profesional.	None, the food and staff were great.	NA
173	Your people were wonderful and so reassuring. - competent and helpful	nothing	not enough good words for them
174	Those who came to get me put me at ease and encouraged me. They were all very caring.	The service was excellent.	On a scale of 1-10 - your people rate at least an 11.
175	Your quick response was incredible. My mother was with out of town family. They appreciated you being so fast.	Nothing. I was great.	Our REMSA people are so professional + considerate. Thank them for us.
176		Follow thru on payment plan instead of collection letters.	Patient is deceased.
177	You was on a quick response and fast attentives.	Just keep doing well.	Polite and authortive in their duties - O.K. I really appreciate their help. - Thanks.
178	I guess you did your job well.	Don't know - first time I have used Remsa	Professional I am not very objective right now, as the patient you transported was my husband and he passed away. I am sure you did everything you could.
179	Service was great.	Staff needs to communicate better.	Receptionist at billing was rude, treated me like I should have known about the billing. I had just been in a car accident, I didn't need that too.
180	Very efficient and courteous		Recognized my husband was a health professional and did not "talk down" to us
181	Everything, REMSA saved my life	Keep up the Great Job That you People Do! Thank you "REMSA" very much	REMSA is with out no doubt the Best. Again Thank you very, very much.
182	Arrived quickly. Respectful + most helpful relative to my needs	Too expensive; an hour of their time and a 10 mile journey was 1041.00	REMSA personnel were very informative and compasionate relative to my injury. I hope I never have to call for an ambulance again. This was a first for me at 63 years old.
183	No complaint	None that I can see	REMSA personnell are the Best. They give a GREAT help. I salute all them.

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
184	responded quickly once at our home, worked as an amazing team, calm, professional, strong	maybe explain what would happen on the ambulance ride to the hospital.... the team took my son quickly which I know was extremely important. I ran upstairs and threw on some jeans + followed about 5 minutes behind.....It was a little confusing what the team would be doing on the way to the hospital....I'm not sure if they could have told me any more at that time. I know time is critical and they moved FAST. I was so impressed by the Remsa team.	Remsa was wonderful + I appreciate all you did for my son during his emergency, words are not enough to say thank you!!! Logan is doing well!!! You saved his life!
185	Transported me safely from outside casino to emergency room.	Not make me financially responsible for a service I didn't want in the first place.	See attached note typed on back of comment card. Basically, he was asking for leniency on the charges as he was a victim of crime.
186	Your crew was wonderful to both myself and my husband during this extremely stressful time. We can't thank you enough. They even helped me to park my car!	We were told my husband was goin to die at St Mary's Hospital due to his heart & infection that none listened to us about in Reno.	Since he was this sick it would have been appreciated if REMSA could have provided us and your employee's with an ambulance which had a working air conditioner. The AC was not in working order and it upset my husband. Please Please provide a quality vehicle for your sick patients.
187	made me as comfortable as possible	I have been poked for blood so many times one arm (left) is pretty useless & right arm is getting that way. I really don't know what the answer is for that	sorry this took so long. It was routed into the wrong pile of mail I was working on.
188	Polite and considerate	I could say they were very courteous	Speedy, friendly, courteous and
189	Very professional staff.	Can not think of anything.	Staff was great - wish I could thank them in person. They treated my daughter without judgement and very compassionately.
190	Everything	Just keep doing what you are doing	Thank you for helping me
191	Fast arrival - Great! Efforts in communication - great!		Thank you for the fast service and efforts to comunicate with deaf
192	Your staff was punctual, polite, and caring.		Thank you for your good service.
193	Everything they were very sensitive and wonderful service. They did everything to make sure that my daughter was receiving 100% service and making sure she was fine. Outstanding they were wonderful.	Nothing	Thank you! Very much

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
194	Everyone was so polite and calming. Thank you!		Thank-you all for what you do!
195	everything thank you!	Keep working the way you are	the crew was very helpful and caring with my son
196	Got there promptly.	Tell the patient and family what they did was right not what is wrong.	The female attendant wrote all pertinent info and ws helpful. Male attendant was rude.
197	Yes	Nothing	The guys did a great job - Thanks
198	Made me feel less stress + comfortable	?	The paramedics were excellent!
199	They were So very Nice, friendly and Answered a few Questions I had.	It's already wonderful	The past few times I've used your service they done and outstanding Job. and so very friendly & kind. Thank you...
200	Provided the needed service and rapid & safe transportation to hospital.	You were Great	The service was timely and professional and met my needs, "Outstanding"
201	This was 1 o'clock in the morning, the crew was very alert. The REMSA people and the fire dept responded very quickly.	Everything possible was done, he died after making noises - growling & girgling - in 1 second.	The whole crew was very kind and respectful.
202	The responders were patient with my mom and observant of her condition.		They all did a good job.
203	I was pleased with the care and concern.		They were very caring for my husband as well.
204			This was my first experience in an ambulance - everything and everyone was very good.
205	saw that I was secure and comfortable		vary efficient
206	Everything	Nothing	Very helpful, Friendly staff. Thank-you
207	Actualy was like a doctor in examing - Beautiful men. God Bless	nothing	Very please couldn't be better
208	He talked to me. Kept me calm and very polite	I hope I stay well + won't need anymore of your services - Thank you.	Very ready and able to help in time of need.
209	Encouraged me that it was prudent to go to the ER.	Did great job.	Was put on hold when daughter called 911.
210	Response time, professionalism, helped calm the patient - Patient has parkinson's & sometimes gets confused		We have always had good service when needed
211	Transported Mary Brandt to hospital with great care and compassion.	Honestly everything was perfect.	We were very pleased with the caring attitude for an elderly patient.

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
212	everything you people are the best in the west		you were caring polite - I was in very good hands
213	Unit 40 kept my husband alive until they got to the hospital		Your people were extremely nice to me at home and the hospital.
214	your paramedics explained step by step what exactly was going on + what was going to happen.	Keep up the good work	your service was very professional. Thank you.
215	The did the job really good because I was REALLY sick.	you did Really great and Thank you	Your welcome! Have a nice DAY! :) Thank you
216	Very friendly crew. They made us feel very calm and confident in them.	It took about 20 minutes for them to arrive. A shorter response time would be good.	

June 13, 2009

REMSA
450 S. Edison Way
Reno, NV 89502

Re: 911 Call, June 13, 2009 about 3:30 a.m.

Dear REMSA,

Thank you so much for your life-saving response to my 911 call this morning. Jeff, Erin and Rich along with another gentleman responded to the call along with the Reno Fire Department. They rescued my mom from a terrible predicament.

She was very ill and could not speak and it turned out to be because her blood sugar was way too low. Your team of experts quickly determined this was the problem and immediately administered proper treatment and she became coherent in just a matter of minutes.

She showed me this morning how to test her sugar in the event something similar occurs again, and per your recommendation I have a call in to the pharmacy to get a Glucagon emergency shot so I can help if this happens again. She will continue to test regularly. It turned out she had tested four times on Friday, but had started a new log so I thought she had only tested in the morning.

Thank you so much for your knowledge and actions. You saved her. Thank you again, so much.

Very sincerely,



Heidi



Remsa,

On July 6th our family called
your company to transport our
Dad, Pat B. to St. Mary's
Hospital. We would like to thank you
for the professional manner in
which your employees handled
my Dad. Jared and

Arielle arrived at our
home and with care & concern
handled him with professional
courtesy. In addition, on a later
run Jared checked back on Dad to
see how he was doing. Please thank
both Jared & Arielle.

Dad passed away on July 14th at
St. Mary's. We will miss him. The
people that helped us during this
time have been in our thoughts &
we sincerely appreciate your help.
Thank you The B. Family

RECEIVED

JUN 09 2009

6-7-09

To Whom ~~It~~ ^{BY} ~~May~~ ⁰⁹⁻⁹⁹⁷⁹ Concerns:

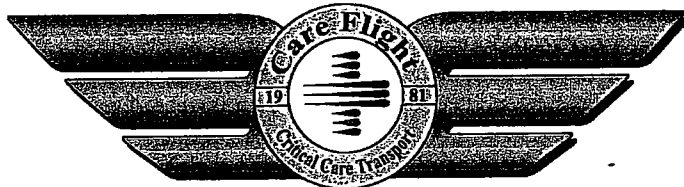
On 3-24-09 my husband couldn't breathe and I called 9-11. Your paramedics were wonderful. They got my husband breathing but said his legs and feet were swollen and they transported him to the hospital. My husband died on 4-7-09 of kidney failure. He had been to the hospital 3 times from July to November and no one picked up what was wrong with him. I didn't get your employee's names but I wanted to tell you how professional, kind and knowledgeable they were. Please tell them how grateful I am for their care and handling of both my husband and I.

Thanks so much,
Carol



Regional Emergency Medical Services Authority

CARE FLIGHT
CUSTOMER SERVICE
FOR
JULY 2009



CARE FLIGHT CUSTOMER COMMENTS JULY 2009

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
1	You did the best.		
2	Kept the plane in the air, very important.		
3	The ladies were prompt in administering pain medication upon arrival.	Great Service.	Very compassionate and sympathetic.
4	Got me to the hospital fast. Everyone was very nice and professional		I was very satisfied.
5	All		
6	From what I saw, everything.		
7	Fast response	Glad for your service	Made me feel at ease about all procedures
8	They communicated with me and kept me relaxed at a stressful time.		
9	Helicopter nice smooth ride		
10	Everything was fine, the ear phones and mike was a thing of beauty.		The service was very good
11	Reassurance Professionalism empathetic		
12	Wonderful	Cant think of anything.	
13	First time went really well. I just wish I could see out first in helicopter.		



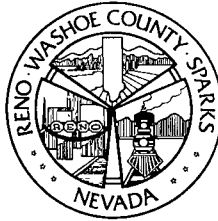
Regional Emergency Medical Services Authority

REMSA
PUBLIC RELATIONS REPORT
FOR
JULY 2009

PUBLIC RELATIONS

July 2009

ACTIVITY	RESULTS
Wrote and Distributed "Community Advisor" regarding river safety, sun exposure safety, and food preparation safety.	Multiple rural newspapers printed the Community Advisor verbatim with numerous references to REMSA, SEMSA and Care Flight.
Wrote and distributed press release regarding REMSA's Water Watcher Whistle program that will go out the first week in July.	Sparks Tribune published a story in its July 13 issue.
Coordinated interview with REMSA and Channel 2 regarding heat dangers and cars.	The interview took place on 7/1 and ran that same day during Channel 2's evening news.
Assisted in preparing for interview with Channel 4 regarding death of 4-year-old improperly installed in automobile.	Interview and story took place on 7/10.
Coordinated interview with Glenn Jones and Channel 2 regarding heat safety.	Interview and story took place and ran on 7/20.
Coordinated interview with Brian Taylor and Channel 4 regarding heat and playground safety.	Interview and story took place and ran on 7/17.
Wrote and distributed press release regarding safety issues during special events.	Channel 2 interviewed Alan Tom and ran the story on special event safety on 7/24 during its evening news
Took media calls and informed them about the latest information regarding a REMSA ambulance in a ditch near Classic Residence.	Story ran on Channel 2 and 4 on 7/24 and on RGJ.com on 7/24.
Worked with Americom getting them to agree to be the media partner for next year's Point of Impact Golf Tournament.	KPS 3 will schedule a planning meeting with them after the first of next year.
Participated in disaster drill at Renown on 7/30 playing the role of a reporter and interviewing Care Flight PIOs.	N/A



DISTRICT HEALTH DEPARTMENT

August 14, 2009

To: Members District Board of Health

From: Eileen Coulombe

Subject: Public Health Fund Revenue and Expenditure Report for July 2009

Recommendation

Staff recommends that the District Board of Health accept the attached report of revenues and expenditures for the Public Health Fund for July of fiscal year 10.

Background

The attached reports are for the accounting period 01/10 and the percentages should approximate 8% of the year. Our total revenues and expenditures for the current year (FY10) compared to last year (FY09) are as follows:

July 2009	FY10 – REV	FY09 – REV	FY10 – EXP	FY09 – EXP
Transfer	0%	6%		
AHS	0%	0%	7%	8%
AQM	9%	3%	7%	8%
CCHS	-6%	7%	7%	8%
EHS	5%	6%	11%	8%
EPHP	1%	1%	6%	6%
TOTAL	1%	4%	8%	8%

The Environmental Oversight Account for July 2009 is \$162,900.32.

I will be happy to any questions of the Board during the meeting or you may contact me at 328-2417.


 Administrative Health Services Officer

Enclosure

Accounts	2010 Plan	2010 Actuals	Balance	Act%	2009 Plan	2009 Actual	Balance	Act%
422503 Environmental Permits	69,000.00-	3,654.00-	65,346.00-	5	125,000.00-	14,645.26-	110,354.74-	12
422504 Pool Permits	33,000.00-	2,269.00-	30,731.00-	7	100,000.00-	5,796.00-	94,204.00-	6
422505 RV Permits	10,500.00-	411.00-	10,089.00-	4	15,000.00-	621.00-	14,379.00-	4
422506 Hotel Motel Permits		118.00-	118.00-					
422507 Food Service Permits	355,000.00-	32,104.00-	322,896.00-	9	410,000.00-	39,043.00-	370,957.00-	10
422508 Wat Well Const Perm	44,000.00-	2,496.00-	41,504.00-	6	40,000.00-	3,295.00-	36,705.00-	8
422509 Water Company Permits	12,000.00-		12,000.00-		25,000.00-	1,517.00-	23,483.00-	6
422510 Air Pollution Permits	402,399.00-	28,022.75-	374,376.25-	7	420,550.00-	34,126.50-	386,423.50-	8
422511 ISDS Permits	90,000.00-	4,866.00-	85,134.00-	5	125,000.00-	10,964.00-	114,036.00-	9
422513 Special Event Permits	75,000.00-	16,609.00-	58,391.00-	22	80,000.00-	15,321.00-	64,679.00-	19
422514 Initial Applic Fee	38,000.00-	3,340.00-	34,660.00-	9				
* Licenses and Permits	1,128,899.00-	93,889.75-	1,035,009.25-	8	1,340,550.00-	125,328.76-	1,215,221.24-	9
431100 Federal Grants	5,857,511.76-	246,052.53	6,103,564.29-	4-	6,797,766.45-	147,684.01-	6,650,082.44-	2
431105 Federal Grants - Indirect	29,531.00-		29,531.00-			3,859.19	3,859.19-	
432100 State Grants	472,204.57-		472,204.57-		809,529.80-	43,897.50-	765,632.30-	5
432310 Tire Fee NRS 444A.090	370,534.52-		370,534.52-		415,000.00-		415,000.00-	
432311 Pol CtrI 455B:830	280,000.00-	76,275.00-	203,725.00-	27	280,000.00-		280,000.00-	
* Intergovernmental	7,009,781.85-	169,777.53	7,179,559.38-	2-	8,302,296.25-	187,722.32-	8,114,573.93-	2
460162 Services to Other Agencies	63,657.69-	16,083.23	47,574.46-	25	195,859.10-		195,859.10-	
460500 Other Immunizations	110,000.00-	12,406.00-	97,594.00-	11	165,000.00-	16,689.00-	148,311.00-	10
460501 Medical Clinical Services	36,500.00-	2,035.69-	34,464.31-	6	30,750.00-	7,594.20-	23,155.80-	25
460503 Childhood Immunizations	190,000.00-	15,703.00-	174,297.00-	8	190,000.00-	23,040.00-	166,960.00-	12
460505 Non Title X Revenue		274.00-	274.00-			811.00-	811.00-	
460508 Tuberculosis	10,000.00-	720.94-	9,279.06-	7	8,000.00-	680.89-	7,319.11-	9
460510 IT Overlay	121,001.00-	11,669.00-	109,332.00-	10	150,000.00-	13,635.00-	136,365.00-	9
460511 Birth and Death Certificates	215,000.00-	19,061.00-	195,939.00-	9	230,000.00-	17,502.00-	212,498.00-	8
460512 Duplication Service Fees	200.00-	20.00-	180.00-	10	800.00-	21.25-	778.75-	3
460513 Other Health Service Charges	8,000.00-	887.00-	7,113.00-	11	23,800.00-	337.80-	23,462.20-	1
460514 Food Service Certification	8,000.00-	2,337.00-	5,663.00-	29	8,000.00-	743.00-	7,257.00-	9
460515 Medicare Reimbursement	500.00-		500.00-		250.00-		250.00-	
460516 Pgm Inc-3rd Prty Rec	9,000.00-	858.32-	8,141.68-	10	3,000.00-	385.86-	2,614.14-	13
460517 Influenza Immunization	5,000.00-	64.00-	4,936.00-	1	10,000.00-		10,000.00-	
460518 STD Fees	30,000.00-	2,101.73-	27,898.27-	7	60,000.00-	3,053.07-	56,946.93-	5
460519 Outpatient Services	12,500.00-	580.00-	11,920.00-	5	11,500.00-	911.00-	10,589.00-	8
460520 Eng Serv Health	90,500.00-	5,101.00-	85,399.00-	6	120,000.00-	17,206.00-	102,794.00-	14
460521 Plan Review - Pools & Spas	5,000.00-	762.00-	4,238.00-	15	3,000.00-		3,000.00-	
460523 Plan Review - Food Services	30,000.00-	1,535.65-	28,464.35-	5	40,000.00-	2,785.85-	37,214.15-	7
460524 Family Planning	100,000.00-	5,110.36-	94,889.64-	5	100,000.00-	10,102.04-	89,897.96-	10
460525 Plan Review - Vector	64,000.00-	2,293.00-	61,707.00-	4	75,000.00-	5,585.00-	69,415.00-	7
460526 Plan Review-Air Quality	15,500.00-	1,973.00-	13,527.00-	13	14,837.00-	4,890.00-	9,947.00-	33
460527 NOE-AQM	32,900.00-	7,180.00-	25,720.00-	22	32,900.00-	5,040.00-	27,860.00-	15
460528 NESHAP-AQM	62,000.00-	8,846.00-	53,154.00-	14	167,900.00-	6,576.00-	161,324.00-	4
460529 Assessments-AQM	22,000.00-	3,330.00-	18,670.00-	15	36,630.00-	2,592.00-	34,038.00-	7
460530 Inspector Registr-AQ	1,900.00-	555.00-	1,345.00-	29	2,100.00-		2,100.00-	
460531 Dust Plan-Air Quality	178,333.00-	22,022.00-	156,311.00-	12	178,333.00-	16,974.00-	161,359.00-	10

Washoe County Health District
 REVENUE
 Pds 1 - 1, FY 2010

Accounts	2010 Plan	2010 Actuals	Balance	Act%	2009 Plan	2009 Actual	Balance	Act%
460533 Quick Start		83.00-	83.00					
460534 Child Care Inspection	9,000.00-	220.00-	8,780.00-	2				
460535 Pub Accomod Inspectn	21,000.00-	1,312.00-	19,688.00-	6				
460570 Education Revenue		253.00-	253.00					
* Charges for Services	1,451,491.69-	145,376.92-	1,306,114.77-	10	1,857,659.10-	157,154.96-	1,700,504.14-	8
485300 Other Misc Govt Rev	450.00-		450.00-					
* Miscellaneous	450.00-		450.00-					
** Revenue	9,590,622.54-	69,489.14-	9,521,133.40-	1	11,500,505.35-	470,206.04-	11,030,299.31-	4

Washoe County Health District
EXPENSES_
Pds 1 - 1, FY 2010

Accounts	2010 Plan	2010 Actuals	Balance	Act%	2009 Plan	2009 Actual	Balance	Act%
701110 Base Salaries	10,569,466.97	794,878.74	9,774,588.23	8	11,240,002.38	874,626.79	10,365,375.59	8
701120 Part Time	700,249.99	50,913.18	649,336.81	7	1,045,046.35	71,921.43	973,124.92	7
701130 Pooled Positions	200,302.33	12,020.63	188,281.70	6	197,135.86	17,846.82	179,289.04	9
701140 Holiday Work	1,500.00	161.88	1,338.12	11	1,500.00		1,500.00	
701150 Contractual Wages	83,500.00	2,789.94	80,710.06	3	96,339.87	3,121.96	93,217.91	3
701200 Incentive Longevity	166,450.00	3,725.26	166,450.00	8	169,100.50	755.67	168,344.83	0
701300 Overtime	49,520.21	2,422.15	45,794.95	8	69,385.91	4,033.74	65,352.17	6
701406 Standby Pay	30,000.00	34.77	27,577.85	8	35,000.00	3,003.04	31,996.96	9
701408 Call Back	3,000.00		2,965.23	1	6,000.00	111.04	5,888.96	2
701412 Salary Adjustment	223,218.86		223,218.86		273,978.53-	126,706.35	273,978.53-	
701413 Vac Payoff/Sick Pay-Term						3.21	3.21-	
701415 Physical Fitness Pay						22,120.54	22,120.54-	
701417 Comp Time								
701500 Merit Awards	329,645.39-		329,645.39-		254,000.00-		254,000.00-	
* Salaries and Wages	11,697,562.97	866,946.55	10,830,616.42	7	12,331,532.34	1,124,250.59	11,207,281.75	9
705110 Group Insurance	1,566,307.85	119,915.64	1,446,392.21	8	1,493,380.68	115,567.40	1,377,813.28	8
705210 Retirement	2,447,498.18	173,659.84	2,273,838.34	7	2,548,069.63	194,023.30	2,354,046.33	8
705215 Retirement Calculation	200,000.00		200,000.00		147,700.00		147,700.00	
705230 Medicare April 1986	149,962.42	11,314.90	138,647.52	8	161,008.60	14,001.34	147,007.26	9
705320 Workmens Comp	64,271.45	7,891.05	56,380.40	12	81,600.00	6,766.63	74,833.37	8
705330 Unemploy Comp	12,350.00		12,350.00		13,260.00		13,260.00	
705360 Benefit Adjustment					19,155.00		19,155.00	
* Employee Benefits	4,440,389.90	312,781.43	4,127,608.47	7	4,464,173.91	330,358.67	4,133,815.24	7
710100 Professional Services	627,726.72	26,024.92	601,701.80	4	1,106,898.07	46,239.79	1,060,658.28	4
710105 Medical Services	13,600.00	46.50	13,553.50	0	13,700.00		13,700.00	
710108 MD Consultants	55,382.00		55,382.00		57,140.00		57,140.00	
710119 Subrecipient Payments	189,994.00	7,243.00	182,751.00	4	304,994.00	7,922.00	297,072.00	3
710200 Service Contract	91,110.00	6,302.17	84,807.83	7	116,754.00	3,945.43	112,808.57	3
710205 Repairs and Maintenance	14,970.00	1,229.50	13,740.50	8	17,335.63	995.13	16,340.50	6
710210 Software Maintenance	350.00	17,802.29	17,452.29-	5,086				
710300 Operating Supplies	157,762.92	2,597.93	155,164.99	2	185,981.66	3,623.60	182,358.06	2
710302 Small Tools & Allow	1,385.00		1,385.00		2,950.00		2,950.00	
710308 Animal Supplies	2,000.00		2,000.00		2,000.00		2,000.00	
710319 Chemical Supplies	560,707.00	257,459.32	303,247.68	46	621,568.00	47,300.00	574,288.00	8
710334 Copy Machine Expense	35,767.03	1,653.37	34,113.66	5	41,362.18	2,259.64	39,102.54	5
710350 Office Supplies	54,432.09	5,417.87	49,014.22	10	56,718.55	4,820.31	51,898.24	8
710355 Books and Subscriptions	7,596.55	1,840.64	5,755.91	24	9,988.50	841.77	9,146.73	8
710360 Postage	17,771.87	1,918.85	15,853.02	11	6,951.57	1,549.80	5,401.77	22
710361 Express and Courier	1,135.00		1,135.00		18,150.00	52.52	18,097.48	0
710391 Fuel & Lube	100.00		100.00		100.00		100.00	
710500 Other Expense	13,899.42	519.24	13,899.42	1	52,568.75	4,299.67	48,269.08	8
710502 Printing	38,358.76	290.00	37,839.52	3	41,043.48	500.83	40,542.65	1
710503 Licenses & Permits	8,325.00		8,035.00		10,415.00		10,415.00	
710505 Rental Equipment	2,269.00		2,269.00		10,169.00		10,169.00	
710506 Dept Insurance Deductible		150.00	150.00-					

Washoe County Health District
EXPENSE
Pds 1 - 1, FY 2010

Accounts	2010 Plan	2010 Actuals	Balance	Act%	2009 Plan	2009 Actual	Balance	Act%
710507 Network and Data Lines	4,500.00	448.14	4,051.86	10	455.00	50.99	404.01	11
710508 Telephone Land Lines	62,983.43	3,987.88	58,995.55	6	74,905.48	3,987.18	70,918.30	5
710509 Seminars and Meetings	32,300.00	1,080.00	31,220.00	3	66,296.00	2,894.25	63,401.75	4
710512 Auto Expense	15,619.00	1,069.43	14,549.57	7	26,645.18	1,148.68	25,496.50	4
710519 Cellular Phone	13,597.00	29.90	13,567.10	0	24,205.00	666.61	23,538.39	3
710529 Dues	4,466.00	1,636.00	2,830.00	37	5,280.00	380.00	4,900.00	7
710535 Credit Card Fees	12,394.78	736.19	11,658.59	6				
710546 Advertising	34,497.78	1,000.00	33,497.78	3	65,626.52		65,626.52	
710577 Uniforms & Special Clothing	3,150.00	215.00	2,935.00	7	3,500.00		3,500.00	
710585 Undesignated Budget	31,331.06		31,331.06					
710600 LT Lease-Office Space	195,423.01	32,467.96	162,955.05	17	256,446.13	31,893.74	224,552.39	12
710620 LT Lease-Equipment		12,730.22	228,727.46	5	5,940.00	1,485.00	4,455.00	25
710703 Biologicals	241,457.68				287,009.61	26,417.49	260,592.12	9
710714 Referral Services					8,700.00	450.00	8,250.00	5
710721 Outpatient	121,374.00		121,374.00		149,305.88	188.80	149,117.08	0
710872 Food Purchases	1,950.00		1,950.00		2,050.00	9.73	2,040.27	0
711113 Equip Srv Replace	101,823.48	9,227.37	92,596.11	9	104,964.00	10,924.29	94,039.71	10
711114 Equip Srv O & M	71,986.43	6,040.68	65,945.75	8	160,958.54	13,174.98	147,783.56	8
711115 Equip Srv Motor Pool	11,725.00	1,252.50	10,472.50	11	19,195.00	445.00	18,750.00	2
711117 ESD Fuel Charge	52,973.64	2,593.46	50,380.18	5				
711119 Prop & Liab Billings	66,930.00	5,494.16	61,435.84	8	58,667.00	4,888.93	53,778.07	8
711210 Travel	174,986.19	1,279.69	173,706.50	1	188,045.22	2,699.79	185,345.43	1
711504 Equipment nonCapital	37,673.50	20,951.11	16,722.39	56	103,981.03	15,453.64	88,527.39	15
* Services and Supplies	3,187,784.34	432,735.29	2,755,049.05	14	4,288,983.98	241,509.59	4,047,474.39	6
781004 Equipment Capital	371,424.85		371,424.85		570,176.05	235.00	569,941.05	0
* Capital Outlay	371,424.85		371,424.85		570,176.05	235.00	569,941.05	0
** Expenses	19,697,162.06	1,612,463.27	18,084,698.79	8	21,654,866.28	1,696,353.85	19,958,512.43	8
621001 Transfer From General	8,795,500.00-		8,795,500.00-		9,693,500.00-	540,000.00-	9,153,500.00-	6
* Transfers In	8,795,500.00-		8,795,500.00-		9,693,500.00-	540,000.00-	9,153,500.00-	6
** Other Financing Src/Use	8,795,500.00-		8,795,500.00-		9,693,500.00-	540,000.00-	9,153,500.00-	6
*** Total	1,311,039.52	1,542,974.13	231,934.61-	118	460,860.93	686,147.81	225,286.88-	149

Accounts	2010 Plan	2010 Actuals	Balance	Act%	2009 Plan	2009 Actual	Balance	Act%
431100 Federal Grants	1,200,096.00-		1,200,096.00-		1,463,729.00-		1,463,729.00-	
* Intergovernmental	1,200,096.00-		1,200,096.00-		1,463,729.00-		1,463,729.00-	
460512 Duplication Service Fees	200.00-	20.00-	180.00-	10	800.00-	21.25-	778.75-	3
* Charges for Services	200.00-	20.00-	180.00-	10	800.00-	21.25-	778.75-	3
485300 Other Misc Govt Rev	450.00-		450.00-					
* Miscellaneous	450.00-		450.00-					
** Revenue								
701110 Base Salaries	1,200,746.00-	20.00-	1,200,726.00-	0	1,464,529.00-	21.25-	1,464,507.75-	0
701120 Part Time	1,748,051.93	136,393.27	1,611,658.66	8	2,046,648.55	145,549.38	1,901,099.17	7
701130 Pooled Positions	24,553.03	1,655.45	22,897.58	7	24,461.26	1,913.13	22,548.13	8
701200 Incentive Longevity	68,296.19		68,296.19		25,580.86		25,580.86	
701300 Overtime	31,000.00		31,000.00		29,850.00	201.92	29,648.08	1
701412 Salary Adjustment	6,000.00	65.53-	6,065.53	1-	4,015.00		4,015.00	
701413 Vac Payoff/Sick Pay-Term	7,104.00		7,104.00		94,369.00		94,369.00	
701417 Comp Time								
701500 Merit Awards								
* Salaries and Wages	1,885,005.15	137,983.19	1,747,021.96	7	91,459.00-	33,899.31	33,899.31-	9
705110 Group Insurance	268,699.06	21,757.13	246,941.93	8	2,133,465.67	188,996.06	1,944,469.61	9
705210 Retirement	381,561.51	27,978.66	353,582.85	7	245,985.18	19,244.41	226,740.77	8
705215 Retirement Calculation	200,000.00		200,000.00		425,683.31	29,879.13	395,804.18	7
705230 Medicare April 1986	24,601.66	1,855.99	22,745.67	8	147,700.00	2,625.04	147,700.00	9
705320 Workmens Comp	11,458.00	954.83	10,503.17	8	28,990.03	1,233.33	26,364.99	8
705330 Unemploy Comp	2,210.00		2,210.00		14,800.00		13,566.67	
705360 Benefit Adjustment					2,405.00		2,405.00	
* Employee Benefits	888,530.23	52,546.61	835,983.62	6	19,155.00	52,981.91	19,155.00	6
710100 Professional Services	3,300.00		3,300.00		884,718.52		831,736.61	
710105 Medical Services		46.50	46.50-		4,800.00		4,800.00	
710200 Service Contract	750.00	774.38	24.38-	103	150.00	667.38	517.38-	445
710205 Repairs and Maintenance	800.00	70.00	730.00	9	800.00	48.33	751.67	6
710300 Operating Supplies	46,854.29	216.00	46,638.29	0	35,300.00	80.06	35,219.94	0
710334 Copy Machine Expense	11,594.00	443.33	11,150.67	4	11,879.00	870.57	11,008.43	7
710350 Office Supplies	16,185.00	3,446.18	12,738.82	21	16,185.00	2,981.54	13,203.46	18
710355 Books and Subscriptions	1,370.00	1,475.50	105.50-	108	1,370.00		1,370.00	
710360 Postage	1,600.00	81.75	1,518.25	5		245.34	245.34-	
710361 Express and Courier	100.00		100.00		1,700.00	5.76	1,694.24	0
710500 Other Expense	1,100.00		1,100.00		1,250.00	64.40	1,185.60	5
710502 Printing	9,550.00	65.49	9,484.51	1	9,570.00	100.91	9,469.09	1
710503 Licenses & Permits	2,400.00	190.00	2,210.00	8	2,500.00		2,500.00	
710508 Telephone Land Lines	11,800.00	940.60	10,859.40	8	12,510.00	851.98	11,658.02	7
710509 Seminars and Meetings	5,100.00	625.00	4,475.00	12	5,100.00	287.50	4,812.50	6
710512 Auto Expense	4,350.00	119.88	4,230.12	3	4,550.00	109.42	4,440.58	2
710519 Cellular Phone	350.00		350.00		383.00		383.00	
710529 Dues	955.00	1,465.00	510.00-	153	955.00	95.00	860.00	10
710546 Advertising	150.00		150.00					
710600 LT Lease-Office Space	80,296.00	13,382.64	66,913.36	17	141,319.12	13,156.84	128,162.28	9

Accounts	2010 Plan	2010 Actuals	Balance	Act%	2009 Plan	2009 Actual	Balance	Act%
710872 Food Purchases	150.00		150.00		200.00		200.00	
711113 Equip Srv Replace	2,122.20	206.85	1,915.35	10		43.50	43.50	
711114 Equip Srv O & M	1,043.60	67.36	976.24	6	1,623.64		1,623.64	
711115 Equip Srv Motor Pool		10.00	10.00			35.00	35.00	
711117 ESD Fuel Charge	636.64	25.32	611.32	4				
711119 Prop & Liab Billings	11,798.00	983.17	10,814.83	8	10,693.00	891.09	9,801.91	8
711210 Travel	16,500.00		16,500.00		16,500.00	1,204.90	15,295.10	7
711504 Equipment nonCapital	1,700.00	141.51	1,558.49	8	1,700.00		1,700.00	
* Services and Supplies	232,554.73	24,776.46	207,778.27	11	281,037.76	21,739.52	259,298.24	8
** Expenses	3,006,090.11	215,306.26	2,790,783.85	7	3,299,221.95	263,717.49	3,035,504.46	8
*** Total	1,805,344.11	215,286.26	1,590,057.85	12	1,834,692.95	263,696.24	1,570,996.71	14

Accounts	2010 Plan	2010 Actuals	Balance	Act%	2009 Plan	2009 Actual	Balance	Act%
422510 Air Pollution Permits	402,399.00-	28,022.75-	374,376.25-	7	420,550.00-	34,126.50-	386,423.50-	8
* Licenses and Permits	402,399.00-	28,022.75-	374,376.25-	7	420,550.00-	34,126.50-	386,423.50-	8
431100 Federal Grants	681,349.00-		681,349.00-		759,349.00-		759,349.00-	
432100 State Grants					170,000.00-		170,000.00-	
432311 Pol Ctr 455B:830	280,000.00-	76,275.00-	203,725.00-	27	280,000.00-		280,000.00-	
* Intergovernmental	961,349.00-	76,275.00-	885,074.00-	8	1,209,349.00-		1,209,349.00-	
460513 Other Health Service Charges		34.00-	34.00-		9,800.00-	35.80-	9,764.20-	0
460526 Plan Review-Air Quality	15,500.00-	1,973.00-	13,527.00-	13	14,837.00-	4,890.00-	9,947.00-	33
460527 NOE-AQM	32,900.00-	7,180.00-	25,720.00-	22	32,900.00-	5,040.00-	27,860.00-	15
460528 NESHAP-AQM	62,000.00-	8,846.00-	53,154.00-	14	167,900.00-	6,576.00-	161,324.00-	4
460529 Assessments-AQM	22,000.00-	3,330.00-	18,670.00-	15	36,630.00-	2,592.00-	34,038.00-	7
460530 Inspector Registr-AQ	1,900.00-	555.00-	1,345.00-	29	2,100.00-		2,100.00-	
460531 Dust Plan-Air Quality	178,333.00-	22,022.00-	156,311.00-	12	178,333.00-	16,974.00-	161,359.00-	10
* Charges for Services	312,633.00-	43,940.00-	268,693.00-	14	442,500.00-	36,107.80-	406,392.20-	8
** Revenue	1,676,381.00-	148,237.75-	1,528,143.25-	9	2,072,398.00-	70,234.30-	2,002,164.70-	3
701110 Base Salaries	1,311,733.43	104,335.73	1,207,397.70	8	1,388,862.47	113,137.58	1,275,724.89	8
701130 Pooled Positions	8,000.00	221.42	7,778.58	3	8,000.00	243.93	7,756.07	3
701150 Contractual Wages	50,000.00		50,000.00		50,000.00		50,000.00	
701200 Incentive Longevity	21,150.00		21,150.00		23,550.00	192.30	23,357.70	1
701300 Overtime	6,057.21		6,057.21		4,535.34		4,535.34	
701408 Call Back					1,000.00		1,000.00	
701412 Salary Adjustment					8,608.78		8,608.78	
701413 Vac Payoff/Sick Pay-Term								
701417 Comp Time								
* Salaries and Wages	1,396,940.64	104,557.15	1,292,383.49	7	1,484,556.59	30,932.84	30,932.84	10
705110 Group Insurance	156,554.89	12,637.36	143,917.53	8	142,279.60	8,342.25	8,342.25	8
705210 Retirement	285,871.82	21,415.79	264,456.03	7	289,544.99	11,846.90	130,432.70	8
705230 Medicare April, 1986	17,726.98	1,369.08	16,357.90	8	18,901.05	23,230.09	266,314.90	8
705320 Workmens Comp	6,740.00	561.67	6,178.33	8	8,000.00	2,078.25	16,822.80	11
705330 Unemploy Comp	1,300.00		1,300.00		1,300.00	666.67	7,333.33	8
* Employee Benefits	468,193.69	35,983.90	432,209.79	8	460,025.64	37,821.91	1,300.00	8
710100 Professional Services	178,599.41		178,599.41		261,928.54		422,203.73	
710200 Service Contract	350.00	363.00	13.00-	104	350.00	312.84	261,928.54	89
710205 Repairs and Maintenance	7,000.00	550.00	6,450.00	8	8,792.63	143.00	37.16	2
710300 Operating Supplies	4,100.00	239.52	4,100.00	5	4,500.00	9.25	8,649.63	0
710334 Copy Machine Expense	4,387.20	20.47	4,147.68	1	4,387.20	239.69	4,490.75	5
710350 Office Supplies	3,500.00	20.47	3,479.53	1	4,500.00	653.92	4,147.51	15
710355 Books and Subscriptions	224.00	248.37	1,951.63	11	224.00	210.77	3,846.08	94
710360 Postage	2,200.00		2,200.00		2,000.00	198.43	198.43	
710361 Express and Courier	200.00		200.00		2,000.00	165.65	2,000.00	17
710500 Other Expense	1,000.00	15.71	984.29	2	1,600.00	211.81	834.35	13
710502 Printing	90.00		90.00		1,600.00		1,388.19	
710503 Licenses & Permits	1,800.00		1,800.00		1,700.00	606.30	1,700.00	5
710505 Rental Equipment	9,000.00	611.62	8,388.38	7	12,600.00		11,993.70	
710508 Telephone Land Lines								

Accounts	2010 Plan	2010 Actuals	Balance	Act%	2009 Plan	2009 Actual	Balance	Act%
710509 Seminars and Meetings	4,200.00		4,200.00		4,200.00		4,200.00	
710512 Auto Expense	1,200.00	63.25	1,136.75	5	200.00	334.51	134.51-	167
710519 Cellular Phone	3,800.00		3,800.00		4,145.00		4,145.00	
710529 Dues	435.00		435.00		435.00		435.00	
710535 Credit Card Fees	1,500.00	134.34	1,365.66	9				
710546 Advertising	5,700.00		5,700.00		5,700.00		5,700.00	
710577 Uniforms & Special Clothing	1,100.00		1,100.00		1,100.00		1,100.00	
710600 LT Lease-Office Space	74,490.12	12,344.00	62,146.12	17	74,490.12	12,189.60	62,300.52	16
710721 Outpatient	1,316.00		1,316.00		1,316.00		1,316.00	
711113 Equip Srv Replace	30,340.92	1,613.99	28,726.93	5	24,384.00	3,096.77	21,287.23	13
711114 Equip Srv O & M	13,520.37	1,136.57	12,383.80	8	33,132.40	2,514.38	30,618.02	8
711115 Equip Srv Motor Pool					275.00		275.00	
711117 ESD Fuel Charge	12,187.68	487.58	11,700.10	4				
711119 Prop & Liab Billings	7,940.00	578.33	7,361.67	7	5,780.00	481.67	5,298.33	8
711210 Travel	38,227.52	555.52	37,672.00	1	38,984.00	428.26	38,555.74	1
711504 Equipment nonCapital	4,000.00		4,000.00		4,000.00	4,441.25	441.25-	111
* Services and Supplies	412,608.22	18,962.27	393,645.95	5	501,703.89	26,238.10	475,465.79	5
781004 Equipment Capital	91,708.35		91,708.35		165,850.05		165,850.05	
* Capital Outlay	91,708.35		91,708.35		165,850.05		165,850.05	
** Expenses	2,369,450.90	159,503.32	2,209,947.58	7	2,612,136.17	216,908.91	2,395,227.26	8
*** Total	693,069.90	11,265.57	681,804.33	2	539,737.17	146,674.61	393,062.56	27

Accounts	2010 Plan	2010 Actuals	Balance	Act%	2009 Plan	2009 Actual	Balance	Act%
431100 Federal Grants	2,108,335.00-	246,052.53	2,354,387.53-	12-	2,343,949.20-	143,824.82-	2,200,124.38-	6
432100 State Grants	397,204.57-	397,204.57-	397,204.57-	10-	564,279.80-	43,897.50-	520,382.30-	8
* Intergovernmental	2,505,539.57-	246,052.53	2,751,592.10-	10-	2,908,229.00-	187,722.32-	2,720,506.68-	6
460162 Services to Other Agencies	63,657.69-	16,083.23-	47,574.46-	25	86,494.00-		86,494.00-	
460500 Other Immunizations	110,000.00-	12,406.00-	97,594.00-	11	165,000.00-	16,689.00-	148,311.00-	10
460501 Medicaid Clinical Services	36,500.00-	2,035.69-	34,464.31-	6	30,750.00-	7,594.20-	23,155.80-	25
460503 Childhood Immunizations	190,000.00-	15,703.00-	174,297.00-	8	190,000.00-	23,040.00-	166,960.00-	12
460505 Non Title X Revenue		274.00-	274.00-			811.00-	811.00-	
460508 Tuberculosis	10,000.00-	720.94-	9,279.06-	7	8,000.00-	680.89-	7,319.11-	9
460515 Medicare Reimbursement	500.00-		500.00-		250.00-		250.00-	
460516 Pgm Inc-3rd Prty Rec	9,000.00-	858.32-	8,141.68-	10	3,000.00-	385.86-	2,614.14-	13
460517 Influenza Immunization	5,000.00-	64.00-	4,936.00-	1	10,000.00-		10,000.00-	
460518 STD Fees	30,000.00-	2,101.73-	27,898.27-	7	60,000.00-	3,053.07-	56,946.93-	5
460519 Outpatient Services	12,500.00-	580.00-	11,920.00-	5	11,500.00-	911.00-	10,589.00-	8
460524 Family Planning	100,000.00-	5,110.36-	94,889.64-	5	100,000.00-	10,102.04-	89,897.96-	10
460570 Education Revenue		198.00-	198.00-					
* Charges for Services	567,157.69-	56,135.27-	511,022.42-	10	664,994.00-	63,267.06-	601,726.94-	10
** Revenue	3,072,697.26-	189,917.26	3,262,614.52-	6-	3,573,223.00-	250,989.38-	3,322,233.62-	7
701110 Base Salaries	2,998,790.37	224,510.87	2,774,279.50	7	3,350,766.90	263,265.91	3,087,500.99	8
701120 Part Time	640,119.02	44,930.62	595,188.40	7	966,243.97	65,260.54	900,983.43	7
701130 Pooled Positions	33,909.14	928.76	32,980.38	3	37,818.00	5,075.80	32,742.20	13
701150 Contractual Wages					17,302.73		17,302.73	
701200 Incentive Longevity	54,059.00		54,059.00		53,890.00	188.37	53,701.63	0
701300 Overtime	175.00		175.00		3,835.57	166.15	3,669.42	4
701412 Salary Adjustment	160,657.92		160,657.92		403,856.66-		403,856.66-	
701413 Vac Payoff/Sick Pay-Term						49,651.34	49,651.34-	
701415 Physical Fitness Pay						3.21	3.21-	
701417 Comp Time						5,787.97	5,787.97-	
* Salaries and Wages	329,645.39-		329,645.39-		162,541.00-		162,541.00-	
705110 Group Insurance	3,558,065.06	270,370.25	3,287,694.81	8	3,863,459.51	389,399.29	3,474,060.22	10
705210 Retirement	519,954.04	38,141.32	481,812.72	7	558,482.31	42,416.84	516,065.47	8
705230 Medicare April 1986	792,045.04	55,284.80	736,760.24	7	896,036.24	67,309.41	828,726.83	8
705320 Workmens Comp	48,074.59	3,539.48	44,535.11	7	53,887.66	4,250.17	49,637.49	8
705330 Unemploy Comp	21,231.00	4,549.15	16,681.85	21	30,000.00	2,499.98	27,500.02	8
* Employee Benefits	4,095.00		4,095.00		4,875.00		4,875.00	
710100 Professional Services	1,385,399.67	101,514.75	1,283,884.92	7	1,543,281.21	116,476.40	1,426,804.81	8
710105 Medical Services	56,065.00	5,024.92	51,040.08	9	299,863.70	10,833.42-	310,697.12	4-
710108 MD Consultants	13,000.00		13,000.00		13,350.00		13,350.00	
710119 Subrecipient Payments	43,382.00		43,382.00		45,140.00		45,140.00	
710200 Service Contract	189,994.00	7,243.00	182,751.00	4	304,994.00	7,922.00	297,072.00	3
710205 Repairs and Maintenance	1,100.00	2,558.38	1,458.38-	233	10,954.00	1,518.26	9,435.74	14
710210 Software Maintenance	5,770.00	518.50	5,251.50	9	5,410.00	230.00	5,180.00	4
710300 Operating Supplies	350.00		350.00					
710334 Copy Machine Expense	58,350.00	1,349.64	57,000.36	2	86,391.00	2,006.50	84,384.50	2
	16,272.00	837.56	15,434.44	5	17,183.00	930.13	16,252.87	5

Washoe Health District
 Community and Clinical Health Services
 Pds 1 - 1, FY 2010

Accounts	2010 Plan	2010 Actuals	Balance	Act%	2009 Plan	2009 Actual	Balance	Act%
710350 Office Supplies	15,267.00	356.70	14,910.30	2	16,679.00	600.87	16,078.13	4
710355 Books and Subscriptions	1,800.00	129.90	1,670.10	7	4,595.00		4,595.00	
710360 Postage	4,220.00	637.27	3,582.73	15	4,350.00	410.78	3,939.22	9
710361 Express and Courier	535.00		535.00		3,650.00	27.04	3,622.96	1
710500 Other Expense	8,073.10	407.21	8,073.10	4	43,298.75	2,299.39	40,999.36	5
710502 Printing	9,307.24	100.00	8,900.03	4	16,784.00	34.58	16,749.42	0
710503 Licenses & Permits	3,500.00		3,400.00	3	4,780.00		4,780.00	
710505 Rental Equipment	469.00		469.00		469.00		469.00	
710507 Network and Data Lines	1,300.00	203.70	1,096.30	16	455.00	50.99	404.01	11
710508 Telephone Land Lines	18,242.00	1,232.85	17,009.15	7	24,270.00	1,397.04	22,872.96	6
710509 Seminars and Meetings	10,400.00		10,400.00		34,897.00	1,171.75	33,725.25	3
710512 Auto Expense	9,594.00	666.01	8,927.99	7	20,542.00	637.45	19,904.55	3
710519 Cellular Phone	462.00		462.00		2,178.00	203.96	1,974.04	9
710529 Dues	1,600.00		1,600.00		2,050.00	100.00	1,950.00	5
710535 Credit Card Fees	5,935.00	279.93	5,655.07	5				
710546 Advertising	27,347.78		27,347.78		29,092.00		29,092.00	
710577 Uniforms & Special Clothing	350.00		350.00		450.00		450.00	
710703 Biologicals	237,157.00	12,730.22	224,426.78	5	282,109.61	26,417.49	255,692.12	9
710714 Referral Services					8,700.00	450.00	8,250.00	5
710721 Outpatient	111,010.00		111,010.00		140,067.88	188.80	139,879.08	0
710872 Food Purchases	1,800.00		1,800.00		1,850.00	9.73	1,840.27	1
711113 Equip Srv Replace	1,397.28	146.79	1,250.49	11	1,800.00	193.50	1,606.50	11
711114 Equip Srv O & M	904.60		904.60		3,129.54	305.04	2,824.50	10
711115 Equip Srv Motor Pool	4,525.00	20.00	4,505.00	0	320.00		320.00	
711117 ESD Fuel Charge	538.69		538.69					
711119 Prop & Liab Billings	21,861.00	1,821.74	20,039.26	8	21,675.00	1,806.25	19,868.75	8
711210 Travel	42,303.00	493.79	42,796.79	1	54,991.00		54,991.00	
711504 Equipment nonCapital	5,950.00		5,950.00		5,017.00		5,017.00	
* Services and Supplies	930,131.69	35,770.53	894,361.16	4	1,511,485.48	38,078.13	1,473,407.35	3
** Expenses	5,873,596.42	407,655.53	5,465,940.89	7	6,918,226.20	543,953.82	6,374,272.38	8
*** Total	2,800,899.16	597,572.79	2,203,326.37	21	3,345,003.20	292,964.44	3,052,038.76	9

Accounts	2010 Plan	2010 Actuals	Balance	Act%	2009 Plan	2009 Actual	Balance	Act%
422503 Environmental Permits	69,000.00-	3,654.00-	65,346.00-	5	125,000.00-	14,645.26-	110,354.74-	12
422504 Pool Permits	33,000.00-	2,269.00-	30,731.00-	7	100,000.00-	5,796.00-	94,204.00-	6
422505 RV Permits	10,500.00-	411.00-	10,089.00-	4	15,000.00-	621.00-	14,379.00-	4
422506 Hotel Motel Permits		118.00-	118.00					
422507 Food Service Permits	355,000.00-	32,104.00-	322,896.00-	9	410,000.00-	39,043.00-	370,957.00-	10
422508 Wat Well Const Perm	44,000.00-	2,496.00-	41,504.00-	6	40,000.00-	3,295.00-	36,705.00-	8
422509 Water Company Permits	12,000.00-		12,000.00-		25,000.00-	1,517.00-	23,483.00-	6
422511 ISDS Permits	90,000.00-	4,866.00-	85,134.00-	5	125,000.00-	10,964.00-	114,036.00-	9
422513 Special Event Permits	75,000.00-	16,609.00-	58,391.00-	22	80,000.00-	15,321.00-	64,679.00-	19
422514 Initial Applic Fee	38,000.00-	3,340.00-	34,660.00-	9				
* Licenses and Permits	726,500.00-	65,867.00-	660,633.00-	9	920,000.00-	91,202.26-	828,797.74-	10
431100 Federal Grants	277,000.00-		277,000.00-		277,000.00-		277,000.00-	
432100 State Grants	75,000.00-		75,000.00-		75,250.00-		75,250.00-	
432310 Tire Fee NRS 444A.090	370,534.52-		370,534.52-		415,000.00-		415,000.00-	
* Intergovernmental	722,534.52-		722,534.52-		767,250.00-		767,250.00-	
460162 Services to Other Agencies					109,365.10-		109,365.10-	
460510 IT Overlay	121,001.00-	11,669.00-	109,332.00-	10	150,000.00-	13,635.00-	136,365.00-	9
460513 Other Health Service Charges	8,000.00-	853.00-	7,147.00-	11	14,000.00-	302.00-	13,698.00-	2
460514 Food Service Certification	8,000.00-	2,337.00-	5,663.00-	29	8,000.00-	743.00-	7,257.00-	9
460520 Eng Serv Health	90,500.00-	5,101.00-	85,399.00-	6	120,000.00-	17,206.00-	102,794.00-	14
460521 Plan Review - Pools & Spas	5,000.00-	762.00-	4,238.00-	15	3,000.00-		3,000.00-	
460523 Plan Review - Food Services	30,000.00-	1,535.65-	28,464.35-	5	40,000.00-	2,785.85-	37,214.15-	7
460525 Plan Review - Vector	64,000.00-	2,293.00-	61,707.00-	4	75,000.00-	5,585.00-	69,415.00-	7
460533 Quick Start		83.00-	83.00					
460534 Child Care Inspection	9,000.00-	220.00-	8,780.00-	2				
460535 Pub Accomod Inspectn	21,000.00-	1,312.00-	19,688.00-	6				
460570 Education Revenue		55.00-	55.00-					
* Charges for Services	356,501.00-	26,220.65-	330,280.35-	7	519,365.10-	40,256.85-	479,108.25-	8
** Revenue	1,805,535.52-	92,087.65-	1,713,447.87-	5	2,206,615.10-	131,459.11-	2,075,155.99-	6
701110 Base Salaries	3,399,403.84	246,657.56	3,152,746.28	7	3,324,778.61	270,681.95	3,054,096.66	8
701130 Pooled Positions	90,097.00	10,870.45	79,226.55	12	125,737.00	12,527.09	113,209.91	10
701140 Holiday Work	1,500.00	161.88	1,338.12	11	1,500.00		1,500.00	
701150 Contractual Wages	9,500.00	1,133.60	8,366.40	12		1,579.96	1,579.96-	
701200 Incentive Longevity	52,100.00		52,100.00		53,900.00	173.08	53,726.92	0
701300 Overtime	34,288.00	2,809.96	31,478.04	8	55,000.00	2,233.49	52,766.51	4
701406 Standby Pay	30,000.00	2,422.15	27,577.85	8	35,000.00	3,003.04	31,996.96	9
701408 Call Back	3,000.00	34.77	2,965.23	1	5,000.00	111.04	4,888.96	2
701412 Salary Adjustment	304.20-		304.20-					
701413 Vac Payoff/Sick Pay-Term								
701417 Comp Time						12,222.86	12,222.86-	
* Salaries and Wages	3,619,584.64	264,090.37	3,355,494.27	7	3,600,915.61	303,090.51	3,297,825.10	8
705110 Group Insurance	480,654.08	35,902.99	444,751.19	7	411,165.33	33,671.49	377,493.84	8
705210 Retirement	740,272.62	51,082.37	689,190.25	7	692,578.60	56,160.68	636,417.92	8
705230 Medicare April 1986	43,911.91	3,309.98	40,601.93	8	42,676.59	3,847.30	38,829.29	9
705320 Workmens Comp	18,535.00	1,544.57	16,990.43	8	20,800.00	1,733.32	19,066.68	8

Accounts	2010 Plan	2010 Actuals	Balance	Act%	2009 Plan	2009 Actual	Balance	Act%
705330 Unemply Comp	3,575.00		3,575.00		3,380.00		3,380.00	
* Employee Benefits	1,286,948.61	91,839.81	1,195,108.80	7	1,170,600.52	95,412.79	1,075,187.73	8
710100 Professional Services	179,930.29	16,000.00	163,930.29	9	131,160.62	38,815.00	92,345.62	30
710105 Medical Services	500.00		500.00		150.00		150.00	
710200 Service Contract	87,300.00	990.41	86,309.59	1	104,700.00	1,342.67	103,357.33	1
710205 Repairs and Maintenance	1,000.00	91.00	909.00	9	1,100.00	573.80	526.20	52
710210 Software Maintenance		17,802.29	17,802.29					
710300 Operating Supplies	23,593.05	1,032.29	22,560.76	4	14,392.81	1,103.18	13,289.63	8
710302 Small Tools & Allow	1,385.00		1,385.00		2,950.00		2,950.00	
710308 Animal Supplies	2,000.00		2,000.00		2,000.00		2,000.00	
710319 Chemical Supplies	560,707.00	257,459.32	303,247.68	46	621,588.00	47,300.00	574,288.00	8
710334 Copy Machine Expense	1,280.00		1,280.00		4,550.00	72.78	4,477.22	2
710350 Office Supplies	9,150.00	932.48	8,217.52	10	9,075.00	312.10	8,762.90	3
710355 Books and Subscriptions	1,600.00	235.24	1,364.76	15	2,000.00	631.00	1,369.00	32
710360 Postage	5,900.00	746.62	5,153.38	13	1,250.00	480.41	769.59	38
710361 Express and Courier	300.00		300.00		7,100.00	19.72	7,080.28	0
710391 Fuel & Lube	100.00		100.00		100.00		100.00	
710500 Other Expense	800.00		800.00		3,400.00	380.03	3,019.97	11
710502 Printing	3,225.00	30.83	3,194.17	1	4,060.00	100.86	3,959.14	2
710503 Licenses & Permits	2,335.00		2,335.00		3,135.00		3,135.00	
710505 Rental Equipment					8,000.00		8,000.00	
710506 Dept Insurance Deductible		150.00	150.00					
710507 Network and Data Lines	3,200.00	203.70	2,996.30	6				
710508 Telephone Land Lines	11,425.00	848.12	10,576.88	7	22,845.00	822.61	22,022.39	4
710509 Seminars and Meetings	11,200.00	405.00	10,795.00	4	15,850.00	1,435.00	14,415.00	9
710512 Auto Expense	375.00	60.78	314.22	16	350.00	23.33	326.67	7
710519 Cellular Phone	8,405.00	17.86	8,422.86	0	16,813.00	364.95	16,448.05	2
710529 Dues	896.00	171.00	725.00	19	1,800.00	185.00	1,615.00	10
710535 Credit Card Fees	4,959.78	321.92	4,637.86	6				
710546 Advertising	500.00		500.00		30,500.00		30,500.00	
710577 Uniforms & Special Clothing	1,700.00	215.00	1,485.00	13	1,950.00		1,950.00	
710600 LT Lease-Office Space	40,636.89	6,741.32	33,895.57	17	40,636.89	6,547.30	34,089.59	16
710721 Outpatient	6,048.00		6,048.00		4,922.00		4,922.00	
711113 Equip Srv Replace	67,963.08	7,259.74	60,703.34	11	78,780.00	7,590.52	71,189.48	10
711114 Equip Srv O & M	56,517.86	4,836.75	51,681.11	9	123,072.96	10,355.56	112,717.40	8
711115 Equip Srv Motor Pool	7,000.00	1,210.00	5,790.00	17	18,500.00	410.00	18,090.00	2
711117 ESD Fuel Charge	39,610.63	2,080.56	37,530.07	5				
711119 Prop & Liab Billings	19,085.00	1,590.42	17,494.58	8	15,028.00	1,252.33	13,775.67	8
711210 Travel	35,650.00	1,217.96	34,432.04	3	44,136.62	437.40	43,699.22	1
711504 Equipment nonCapital	2,643.97		2,643.97		36,202.42	1,131.84	35,070.58	3
* Services and Supplies	1,198,921.55	322,614.89	876,306.66	27	1,372,098.32	121,687.39	1,250,410.93	9
** Expenses	6,105,454.80	678,545.07	5,426,909.73	11	6,143,614.45	520,190.69	5,623,423.76	8
** Other Financing Svc/Use	350,000.00-		350,000.00-		350,000.00-		350,000.00-	
621001 Transfer From General	350,000.00-		350,000.00-		350,000.00-		350,000.00-	
*** Total	3,949,919.28	586,457.42	3,363,461.86	15	3,586,999.35	388,731.58	3,198,267.77	11

Accounts	2010 Plan	2010 Actuals	Balance	Act%	2009 Plan	2009 Actual	Balance	Act%
431100 Federal Grants	1,590,731.76		1,590,731.76		1,953,739.25	3,859.19	1,949,880.06	0
* 431105 Federal Grants - Indirect	29,531.00		29,531.00			3,859.19	3,859.19	
* Intergovernmental	1,620,262.76		1,620,262.76		1,953,739.25		1,953,739.25	
460511 Birth and Death Certificates	215,000.00	19,061.00	195,939.00	9	230,000.00	17,502.00	212,498.00	8
* Charges for Services	215,000.00	19,061.00	195,939.00	9	230,000.00	17,502.00	212,498.00	8
** Revenue	1,835,262.76	19,061.00	1,816,201.76	1	2,183,739.25	17,502.00	2,166,237.25	1
701110 Base Salaries	1,111,487.40	82,981.31	1,028,506.09	7	1,128,945.85	81,991.97	1,046,953.88	7
701120 Part Time	35,577.94	4,327.11	31,250.83	12	54,341.12	4,747.76	49,593.36	9
701150 Contractual Wages	24,000.00	1,656.34	22,343.66	7	29,037.14	1,542.00	27,495.14	5
701200 Incentive Longevity	8,141.00		8,141.00		7,910.50		7,910.50	
701300 Overtime	3,000.00	980.83	2,019.17	33	2,000.00	1,634.10	365.90	82
701412 Salary Adjustment	55,761.14		55,761.14		26,900.35		26,900.35	
* Salaries and Wages	1,237,967.48	89,945.59	1,148,021.89	7	1,249,134.96	89,915.83	1,159,219.13	7
705110 Group Insurance	140,445.78	11,476.94	128,968.84	8	135,468.26	8,387.76	127,080.50	6
705210 Retirement	247,747.19	17,898.22	229,848.97	7	244,226.49	17,443.99	226,782.50	7
705230 Medicare April 1986	15,647.28	1,240.37	14,406.91	8	16,553.27	1,200.58	15,352.69	7
705320 Workmens Comp	6,307.45	280.83	6,026.62	4	8,000.00	633.33	7,366.67	8
705330 Unempty Comp	1,170.00		1,170.00		1,300.00		1,300.00	
* Employee Benefits	411,317.70	30,896.36	380,421.34	8	405,548.02	27,665.66	377,882.36	7
710100 Professional Services	209,832.02	5,000.00	204,832.02	2	409,145.21	18,258.21	390,887.00	4
710105 Medical Services	100.00		100.00		200.00		200.00	
710108 MD Consultants	12,000.00		12,000.00		12,000.00		12,000.00	
710200 Service Contract	1,610.00	1,616.00	6.00	100	600.00	104.28	495.72	17
710205 Repairs and Maintenance	400.00		400.00		1,233.00		1,233.00	
710300 Operating Supplies	24,865.58		24,865.58		45,397.85	424.61	44,973.24	1
710334 Copy Machine Expense	2,233.83	132.96	2,100.87	6	3,362.98	146.47	3,216.51	4
710350 Office Supplies	10,330.09	662.04	9,668.05	6	10,279.55	271.88	10,007.67	3
710355 Books and Subscriptions	2,602.55		2,602.55		1,799.50		1,799.50	
710360 Postage	3,851.87	204.84	3,647.03	5	1,351.57	214.84	1,136.73	16
710361 Express and Courier					3,700.00		3,700.00	
710500 Other Expense	3,726.32		3,726.32		3,620.00	1,390.20	2,229.80	38
710502 Printing	15,276.52		15,276.52		9,029.48	52.67	8,976.81	1
710507 Network and Data Lines		40.74	40.74					
710508 Telephone Land Lines	12,516.43	354.69	12,161.74	3	2,680.48	309.25	2,371.23	12
710509 Seminars and Meetings	1,400.00	50.00	1,350.00	4	6,249.00		6,249.00	
710512 Auto Expense	100.00	159.51	59.51	160	1,003.18	43.97	959.21	4
710519 Cellular Phone	580.00	47.76	532.24	8	686.00	97.70	588.30	14
710529 Dues	580.00		580.00		40.00		40.00	
710546 Advertising	800.00	1,000.00	200.00	125	334.52		334.52	
710585 Undesignated Budget	31,331.06		31,331.06					
710620 LT Lease-Equipment	4,300.68		4,300.68		5,940.00	1,485.00	4,455.00	25
710703 Biologicals	3,000.00		3,000.00		4,900.00		4,900.00	
710721 Outpatient	200.00		200.00		3,000.00		3,000.00	
711115 Equip Srv Motor Pool	200.00	12.50	187.50	6	100.00		100.00	
711119 Prop & Liab Billings	6,246.00	520.50	5,725.50	8	5,491.00	457.59	5,033.41	8

Washoe County Health District
 Epidemiology and Public Health Preparedness
 Pds 1 - 1, FY 2010

Accounts	2010 Plan	2010 Actuals	Balance	Act%	2009 Plan	2009 Actual	Balance	Act%
711210 Travel	42,305.67		42,305.67		33,453.60	629.23	32,824.37	2
711504 Equipment nonCapital	23,379.53	20,809.60	2,569.93	89	57,061.61	9,880.55	47,181.06	17
* Services and Supplies	413,568.15	30,611.14	382,957.01	7	622,658.53	33,766.45	588,892.08	5
781004 Equipment Capital	279,716.50		279,716.50		404,326.00	235.00	404,091.00	0
* Capital Outlay	279,716.50		279,716.50		404,326.00	235.00	404,091.00	0
** Expenses	2,342,569.83	151,453.09	2,191,116.74	6	2,681,667.51	151,582.94	2,530,084.57	6
*** Total	507,307.07	132,392.09	374,914.98	26	497,928.26	134,080.94	363,847.32	27

**Washoe County Health District
Fiscal Year 2010
Programs**

- Administrative Health Services
- Air Quality Management
- Child Abuse & Neglect Preventio
- Chronic Disease & Tobacco Con
- Community & Clinical Health Ser
- Emergency Medical Services
- Environmental Health Services
- Epidemiological Surveillance
- Family Planning
- Food Program
- Hazardous Waste
- Home Visiting
- Immunization
- Public Health Preparedness
- Safe Drinking Water
- Sexual Health - HIV
- Sexual Health - STD
- Solid Waste Management
- Tuberculosis
- Underground Storage Tanks
- Vector Control
- Vital Statistics
- Women, Infants and Children

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Administrative Health Services Division		
	170200	FY10 Total
460512 Duplication Services	\$ (200.00)	\$ (200.00)
485300 Other Miscellaneous	\$ (450.00)	\$ (450.00)
Revenue	\$ (650.00)	\$ (650.00)
701110 Base Salaries	\$ 948,919.13	\$ 948,919.13
701200 Incentive	\$ 13,550.00	\$ 13,550.00
701300 Overtime	\$ 1,000.00	\$ 1,000.00
701412 Salary Adjustment	\$ 7,104.00	\$ 7,104.00
Salaries and Wages	\$ 970,573.13	\$ 970,573.13
705110 Group Insurance	\$ 113,944.29	\$ 113,944.29
705320 Retirement	\$ 206,425.86	\$ 206,425.86
705215 Retirement C	\$ 200,000.00	\$ 200,000.00
705230 Medicare	\$ 13,808.32	\$ 13,808.32
705320 Workmens Comp	\$ 5,392.00	\$ 5,392.00
705330 Unemployment	\$ 1,040.00	\$ 1,040.00
Employee Benefits	\$ 540,610.47	\$ 540,610.47
710100 Professional Services	\$ 1,500.00	\$ 1,500.00
710200 Service Contract	\$ 750.00	\$ 750.00
710205 Repairs Maint	\$ 300.00	\$ 300.00
710300 Operating Supplies	\$ 100.00	\$ 100.00
710334 Copy Machine Exp	\$ 6,000.00	\$ 6,000.00
710350 Office Supplies	\$ 6,000.00	\$ 6,000.00
710355 Books Subscriptions	\$ 1,000.00	\$ 1,000.00
710360 Postage	\$ 1,400.00	\$ 1,400.00
710361 Express Courier	\$ 100.00	\$ 100.00
710500 Other Exp	\$ 100.00	\$ 100.00
710502 Printing	\$ 1,500.00	\$ 1,500.00
710503 Licenses & Permits	\$ 1,700.00	\$ 1,700.00
710508 Telephone Land Lines	\$ 4,000.00	\$ 4,000.00
710509 Seminars Mtgs	\$ 2,900.00	\$ 2,900.00
710512 Auto Exp	\$ 100.00	\$ 100.00
710519 Cell Phones	\$ 350.00	\$ 350.00
710529 Dues	\$ 800.00	\$ 800.00
710546 Advertising	\$ 150.00	\$ 150.00
710600 Lt Lease-Office	\$ -	\$ -
710872 Food Purchases	\$ 150.00	\$ 150.00
711113 Equip Srv Repla	\$ 2,122.20	\$ 2,122.20
711114 Equip Serv O & M	\$ 1,043.60	\$ 1,043.60
711117 ESD Fuel Charge	\$ 636.64	\$ 636.64
711119 Prop & Liability	\$ 5,552.00	\$ 5,552.00
711210 Travel	\$ 10,500.00	\$ 10,500.00
711504 Equip non-Capital	\$ 1,000.00	\$ 1,000.00
Services and Supplies	\$ 49,754.44	\$ 49,754.44
Expenditures	\$ 1,560,938.04	\$ 1,560,938.04
General Fund Tax Transfer	\$ 1,560,288.04	\$ 1,560,288.04

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Air Quality Management Division									
	Local	Title V	EPA	PM 2.5	DMV X Res	Radon	DMV X Res	Pollution Ctrl	FY10
	172300	172302	10019	10021	10039	10564	10685	20288	Totals
422000 Air Pol Permits	\$ (381,000.00)	\$ (21,399.00)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (402,399.00)
431100 Federal Grants	\$ -	\$ -	\$ (632,649.00)	\$ (41,200.00)	\$ -	\$ (7,500.00)	\$ -	\$ -	\$ (681,349.00)
432100 State Grants	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
432311 Pol Ctrl	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (280,000.00)	\$ (280,000.00)
460526 Plan Review-AQM	\$ (15,500.00)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (15,500.00)
460527 NOE-AQM	\$ (32,900.00)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (32,900.00)
460528 NESHAP-AQM	\$ (62,000.00)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (62,000.00)
460529 Assessments-AQM	\$ (22,000.00)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (22,000.00)
460530 Inspector Regis	\$ (1,900.00)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (1,900.00)
460531 Dust Plan-AQM	\$ (178,333.00)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (178,333.00)
485300 Other Misc Govt	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Revenue	\$ (693,633.00)	\$ (21,399.00)	\$ (632,649.00)	\$ (41,200.00)	\$ -	\$ (7,500.00)	\$ -	\$ (280,000.00)	\$ (1,676,381.00)
701110 Base Salaries	\$ 694,474.88	\$ 17,482.48	\$ 382,347.34	\$ 23,899.82	\$ -	\$ -	\$ -	\$ 193,528.91	\$ 1,311,733.43
701130 Pooled Positions	\$ -	\$ -	\$ 8,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 8,000.00
701150 Contractual	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
701200 Incentive	\$ 12,191.50	\$ 563.50	\$ 6,277.50	\$ 128.00	\$ -	\$ -	\$ -	\$ 1,989.50	\$ 21,150.00
701300 Overtime	\$ 500.00	\$ -	\$ 1,012.49	\$ 4,544.72	\$ -	\$ -	\$ -	\$ -	\$ 6,057.21
701408 Call Back	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
701412 Salary Adjustment	\$ 2,212.50	\$ (2,212.50)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Salaries and Wages	\$ 709,378.88	\$ 15,833.48	\$ 397,637.33	\$ 28,572.54	\$ -	\$ -	\$ -	\$ 195,518.41	\$ 1,346,940.64
705110 Group Insurance	\$ 88,010.39	\$ 1,695.21	\$ 44,229.68	\$ 4,048.46	\$ -	\$ -	\$ -	\$ 18,571.15	\$ 156,554.89
705320 Retirement	\$ 151,563.09	\$ 3,870.31	\$ 83,350.91	\$ 5,153.75	\$ -	\$ -	\$ -	\$ 41,933.76	\$ 285,871.82
705230 Medicare	\$ 9,162.75	\$ -	\$ 5,411.88	\$ 325.25	\$ -	\$ -	\$ -	\$ 2,827.10	\$ 17,726.98
705320 Workmens Comp	\$ 4,044.00	\$ -	\$ 1,685.00	\$ -	\$ -	\$ -	\$ -	\$ 1,011.00	\$ 6,740.00
705330 Unemployment	\$ 780.00	\$ -	\$ 325.00	\$ -	\$ -	\$ -	\$ -	\$ 195.00	\$ 1,300.00
Employee Benefits	\$ 253,560.23	\$ 5,565.52	\$ 135,002.47	\$ 9,527.46	\$ -	\$ -	\$ -	\$ 64,538.01	\$ 468,193.69
10 Professional Services	\$ 500.00	\$ -	\$ 51,909.20	\$ 2,000.00	\$ -	\$ -	\$ -	\$ 12,943.58	\$ 67,352.78
10 Service Contract	\$ 350.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 350.00
10205 Repairs Maint	\$ 1,000.00	\$ -	\$ 6,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 7,000.00
10300 Operating Supplies	\$ 1,000.00	\$ -	\$ 2,000.00	\$ 1,100.00	\$ -	\$ -	\$ -	\$ -	\$ 4,100.00
10334 Copy Machine Exp	\$ 4,387.20	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,387.20
10350 Office Supplies	\$ 3,500.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,500.00
10355 Books Subscriptions	\$ 224.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 224.00
10360 Postage	\$ 2,200.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,200.00
10361 Express Courier	\$ 200.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 200.00
10500 Other Exp	\$ 200.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 200.00
10502 Printing	\$ 1,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,000.00
10503 Licenses & Perm	\$ 90.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 90.00
10505 Rental Equip	\$ 1,800.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,800.00
10508 Telephone Land Lines	\$ 9,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 9,000.00
10509 Seminars Mtgs	\$ 1,500.00	\$ -	\$ 2,000.00	\$ -	\$ -	\$ 700.00	\$ -	\$ -	\$ 4,200.00
10512 Auto Exp	\$ 1,200.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,200.00
10519 Cell Phones	\$ 3,800.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,800.00
10529 Dues	\$ 435.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 435.00
10535 Credit Card Fee	\$ 1,500.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,500.00
10546 Advertising	\$ 1,000.00	\$ -	\$ -	\$ -	\$ -	\$ 4,700.00	\$ -	\$ -	\$ 5,700.00
10577 Uniforms & Spec	\$ -	\$ -	\$ 1,100.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,100.00
10600 LT Lease - Office	\$ 74,490.12	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 74,490.12
10721 Outpatient	\$ 1,316.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,316.00
1113 Equip Serv Replaceme	\$ 30,340.92	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 30,340.92
1114 Equip Serv O & M	\$ 13,520.37	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 13,520.37
1115 Equip Serv Motor Pool	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
1117 ESD Fuel Charge	\$ 12,187.68	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 12,187.68
1118 Prop & Liability	\$ 6,940.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,000.00	\$ 7,940.00
1119 Travel	\$ 3,000.00	\$ -	\$ 8,000.00	\$ -	\$ -	\$ 2,100.00	\$ -	\$ 6,000.00	\$ 19,100.00
1500 Equip non-Capital	\$ -	\$ -	\$ 4,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,000.00
Services and Supplies	\$ 176,681.29	\$ -	\$ 75,009.20	\$ 3,100.00	\$ -	\$ 7,500.00	\$ -	\$ 19,943.58	\$ 282,234.07
1004 Equip Capital	\$ -	\$ -	\$ 25,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25,000.00
Capital Outlay	\$ -	\$ -	\$ 25,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 25,000.00
Expenditures	\$ 1,139,620.40	\$ 21,399.00	\$ 632,649.00	\$ 41,200.00	\$ -	\$ 7,500.00	\$ -	\$ 280,000.00	\$ 2,122,368.40
General Fund Tax Transfer	\$ 445,987.40	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 445,987.40

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Community & Clinical Health Services Division		
Child Abuse & Neglect Prevention		
	10410	FY10 Total
432100 State Grants	\$ (101,070.94)	\$ (101,070.94)
Revenue	\$ (101,070.94)	\$ (101,070.94)
701110 Base Salaries	\$ 71,805.15	\$ 71,805.15
701200 Incentive	\$ 1,750.00	\$ 1,750.00
Salaries and Wages	\$ 73,555.15	\$ 73,555.15
705110 Group Insurance	\$ 10,314.37	\$ 10,314.37
705320 Retirement	\$ 15,775.55	\$ 15,775.55
705230 Medicare	\$ 1,023.87	\$ 1,023.87
705320 Workmens Comp	\$ 337.00	\$ 337.00
705330 Unemployment	\$ 65.00	\$ 65.00
Employee Benefits	\$ 27,515.79	\$ 27,515.79
710100 Professional Services	\$ -	\$ -
710200 Service Contract	\$ -	\$ -
710361 Express Courier	\$ -	\$ -
710500 Other Expenses	\$ -	\$ -
710502 Printing	\$ -	\$ -
710519 Cellular Phone	\$ -	\$ -
711210 Travel	\$ -	\$ -
Services and Supplies	\$ -	\$ -
Expenditures	\$ 101,070.94	\$ 101,070.94
General Fund Tax Transfer	\$ -	\$ -

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Community & Clinical Health Services Division				
Chronic Disease & Injury Prevention				
	Health Ed	Tobacco Ctrl	Tobacco Prev	FY10
	170800	10010	10418	Totals
431100 Federal Grants	\$ -	\$ (122,552.00)	\$ -	\$ (122,552.00)
432100 State Grants	\$ -	\$ -	\$ (177,767.63)	\$ (177,767.63)
Revenue	\$ -	\$ (122,552.00)	\$ (177,767.63)	\$ (300,319.63)
701110 Base Salaries	\$ 117,476.39	\$ 64,751.09	\$ 129,942.09	\$ 312,169.57
701120 Part Time	\$ 45,717.15	\$ -	\$ -	\$ 45,717.15
701200 Incentive	\$ 1,025.00	\$ 750.00	\$ 550.00	\$ 2,325.00
Salaries and Wages	\$ 164,218.54	\$ 65,501.09	\$ 130,492.09	\$ 360,211.72
705110 Group Insurance	\$ 22,488.10	\$ 15,191.60	\$ 16,597.44	\$ 54,277.14
705320 Retirement	\$ 35,221.59	\$ 14,048.72	\$ 27,990.42	\$ 77,260.73
705230 Medicare	\$ 2,329.04	\$ 821.81	\$ 1,883.68	\$ 5,034.53
705320 Workmens Comp	\$ 1,011.00	\$ 337.00	\$ 674.00	\$ 2,022.00
705330 Unemployment	\$ 195.00	\$ 65.00	\$ 130.00	\$ 390.00
Employee Benefits	\$ 61,244.73	\$ 30,464.13	\$ 47,275.54	\$ 138,984.40
710100 Professional Services	\$ 10,000.00	\$ 2,500.00	\$ -	\$ 12,500.00
710200 Service Contract	\$ -	\$ -	\$ -	\$ -
710210 Software Maintenance	\$ 350.00			\$ 350.00
710300 Operating Supplies	\$ 1,500.00	\$ 1,000.00	\$ -	\$ 2,500.00
710334 Copy Machine Exp	\$ 200.00	\$ 100.00	\$ -	\$ 300.00
10350 Office Supplies	\$ 750.00	\$ 1,333.00	\$ -	\$ 2,083.00
170355 Books/Subscr	\$ -	\$ -	\$ -	\$ -
710360 Postage	\$ 50.00	\$ 250.00	\$ -	\$ 300.00
710361 Express Courier		\$ 100.00	\$ -	\$ 100.00
710500 Other Expenses	\$ 1,500.00	\$ 2,000.00	\$ -	\$ 3,500.00
710502 Printing	\$ 1,000.00	\$ 300.00	\$ -	\$ 1,300.00
710507 Network, Data	\$ -	\$ 600.00	\$ -	\$ 600.00
710508 Telephone Land Lines	\$ 120.00	\$ 600.00	\$ -	\$ 720.00
710509 Seminars Mtgs	\$ 250.00	\$ 1,500.00	\$ -	\$ 1,750.00
710512 Auto Exp	\$ 430.00	\$ 500.00	\$ -	\$ 930.00
710529 Dues	\$ 50.00	\$ 50.00	\$ -	\$ 100.00
710546 Advertising	\$ 2,394.00	\$ 12,953.78	\$ -	\$ 15,347.78
711115 Equip Srv Motor	\$ 125.00	\$ 300.00		\$ 425.00
711119 Prop & Liability Billing	\$ 2,082.00	\$ -	\$ -	\$ 2,082.00
711210 Travel	\$ 3,500.00	\$ 1,500.00	\$ -	\$ 5,000.00
711504 Equip non-Capital	\$ 250.00	\$ 1,000.00	\$ -	\$ 1,250.00
Services and Supplies	\$ 24,551.00	\$ 26,586.78	\$ -	\$ 51,137.78
Expenditures	\$ 250,014.27	\$ 122,552.00	\$ 177,767.63	\$ 550,333.90
General Fund Tax Transfer	\$ 250,014.27	\$ -	\$ -	\$ 250,014.27

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Community & Clinical Health Services Division		
	Local	FY10
	171100	Totals
701110 Base Salaries	\$ 242,558.05	\$ 242,558.05
701120 Part Time	\$ 57,706.50	\$ 57,706.50
701200 Incentive	\$ 4,350.00	\$ 4,350.00
701300 Overtime	\$ -	\$ -
701412 Salary Adjus	\$ (12,376.00)	\$ (12,376.00)
701500 Merit Awards	\$ 162,969.00	\$ 162,969.00
Salaries and Wages	\$ 455,207.55	\$ 455,207.55
705110 Group Insurance	\$ 31,388.45	\$ 31,388.45
705320 Retirement	\$ 65,332.45	\$ 65,332.45
705230 Medicare	\$ 3,445.57	\$ 3,445.57
705320 Workmens Comp	\$ 2,022.00	\$ 2,022.00
705330 Unemployment	\$ 390.00	\$ 390.00
Employee Benefits	\$ 102,578.47	\$ 102,578.47
710100 Professional Services	\$ 750.00	\$ 750.00
710105 Medical Service	\$ 400.00	\$ 400.00
710300 Operating Supplies	\$ 50.00	\$ 50.00
710312 Special Dept Ex	\$ -	\$ -
710334 Copy Machine Exp	\$ 10,000.00	\$ 10,000.00
710350 Office Supplies	\$ 1,400.00	\$ 1,400.00
710355 Books Subscriptions	\$ 1,000.00	\$ 1,000.00
710360 Postage	\$ 100.00	\$ 100.00
710361 Express Courier	\$ 50.00	\$ 50.00
710500 Other Expense	\$ 100.00	\$ 100.00
710502 Printing	\$ 200.00	\$ 200.00
710503 License & Permits	\$ 1,000.00	\$ 1,000.00
710508 Telephone Land Lines	\$ 6,000.00	\$ 6,000.00
710509 Seminars Mtgs	\$ 2,000.00	\$ 2,000.00
710512 Auto Exp	\$ 700.00	\$ 700.00
710529 Dues	\$ 1,000.00	\$ 1,000.00
710546 Advertising	\$ -	\$ -
710714 Referral Services	\$ -	\$ -
711113 Equip Serv Replacement	\$ 1,397.28	\$ 1,397.28
711114 Equip Serv O & M	\$ 904.60	\$ 904.60
711117 ESD Fuel Charge	\$ 538.69	\$ 538.69
711119 Prop & Liability	\$ 2,082.00	\$ 2,082.00
711210 Travel	\$ 5,100.00	\$ 5,100.00
711504 Equip non-Capital	\$ 1,000.00	\$ 1,000.00
Services and Supplies	\$ 35,772.57	\$ 35,772.57
Expenditures	\$ 593,558.59	\$ 593,558.59
General Fund Tax Transfer	\$ 593,558.59	\$ 593,558.59

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Administrative Health Services Division		
Emergency Medical Services		
	170400	FY10 Total
701110 Base Salaries	\$ -	\$ -
701120 Part Time	\$ 24,553.03	\$ 24,553.03
701200 Incentive	\$ -	\$ -
Salaries and Wages	\$ 24,553.03	\$ 24,553.03
705110 Group Insurance	\$ -	\$ -
705320 Retirement	\$ -	\$ -
705230 Medicare	\$ 356.03	\$ 356.03
705320 Workmens Comp	\$ 674.00	\$ 674.00
705330 Unemployment	\$ 130.00	\$ 130.00
Employee Benefits	\$ 1,160.03	\$ 1,160.03
710100 Professional Services	\$ 1,000.00	\$ 1,000.00
710334 Copy Machine Exp	\$ 50.00	\$ 50.00
710350 Office Supplies	\$ 185.00	\$ 185.00
710355 Books Subscriptions	\$ 370.00	\$ 370.00
710360 Postage,	\$ 200.00	\$ 200.00
710361 Express Courier	\$ -	\$ -
710502 Printing	\$ 50.00	\$ 50.00
710503 Licenses & Permits	\$ 200.00	\$ 200.00
710508 Telephone Land Lines	\$ 300.00	\$ 300.00
710509 Seminars Mtgs	\$ 1,200.00	\$ 1,200.00
710512 Auto Exp	\$ 1,250.00	\$ 1,250.00
710529 Dues	\$ 105.00	\$ 105.00
711119 Prop & Liability	\$ 694.00	\$ 694.00
711210 Travel	\$ 3,000.00	\$ 3,000.00
711504 Equip non-Capital	\$ 200.00	\$ 200.00
Services and Supplies	\$ 8,804.00	\$ 8,804.00
Expenditures	\$ 34,517.06	\$ 34,517.06
General Fund Tax Transfer	\$ 34,517.06	\$ 34,517.06

FY10 ADOPTED BUDGET
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Environmental Health Services Division			
	Local	IT Overlay	FY10
	172400	172402	Totals
422503 Environ Permits	\$ (7,000.00)	\$ -	\$ (7,000.00)
422504 Pool Permits	\$ (33,000.00)	\$ -	\$ (33,000.00)
422505 RV Permits	\$ (10,500.00)	\$ -	\$ (10,500.00)
422508 Water Well Const Perm	\$ (44,000.00)	\$ -	\$ (44,000.00)
422511 ISDS Permits	\$ (90,000.00)	\$ -	\$ (90,000.00)
422513 Special Event Perm	\$ (75,000.00)	\$ -	\$ (75,000.00)
460510 IT Overlay	\$ -	\$ (121,001.00)	\$ (121,001.00)
460513 Other Health Serv	\$ (8,000.00)	\$ -	\$ (8,000.00)
460520 Eng Serv Health	\$ (90,500.00)	\$ -	\$ (90,500.00)
460521 Plan Review - Pool	\$ (5,000.00)	\$ -	\$ (5,000.00)
460534 Child Care Insp	\$ (9,000.00)		\$ (9,000.00)
460535 Pub Accomod Ins	\$ (21,000.00)		\$ (21,000.00)
Revenue	\$ (393,000.00)	\$ (121,001.00)	\$ (514,001.00)
701110 Base Salaries	\$ 1,163,888.58	\$ 60,629.08	\$ 1,224,517.66
701130 Pooled Positions	\$ 9,000.00	\$ -	\$ 9,000.00
701140 Holiday Work	\$ 1,500.00	\$ -	\$ 1,500.00
701200 Incentive	\$ 19,409.00	\$ 1,150.00	\$ 20,559.00
701300 Overtime	\$ 25,000.00	\$ 1,000.00	\$ 26,000.00
701406 Standby	\$ 30,000.00	\$ -	\$ 30,000.00
701408 Call Back	\$ 3,000.00	\$ -	\$ 3,000.00
Salaries and Wages	\$ 1,251,797.58	\$ 62,779.08	\$ 1,314,576.66
705110 Group Insurance	\$ 153,259.53	\$ 13,706.87	\$ 166,966.40
705320 Retirement	\$ 253,789.30	\$ 13,250.06	\$ 267,039.36
705230 Medicare	\$ 15,028.37	\$ 803.92	\$ 15,832.29
705320 Workmens Comp	\$ 7,414.00	\$ 337.00	\$ 7,751.00
705330 Unemployment	\$ 1,430.00	\$ 65.00	\$ 1,495.00
Employee Benefits	\$ 430,921.20	\$ 28,162.85	\$ 459,084.05
710100 Professional Services	\$ -	\$ 17,802.29	\$ 17,802.29
710200 Service contract	\$ 800.00	\$ -	\$ 800.00
710205 Repairs Maint	\$ 100.00	\$ -	\$ 100.00
710300 Operating Supplies	\$ 700.00	\$ 400.00	\$ 1,100.00
710302 Small Tools	\$ 250.00	\$ -	\$ 250.00
710319 Chemical Supplies	\$ 750.00	\$ -	\$ 750.00
710334 Copy Machine Exp	\$ 1,000.00	\$ -	\$ 1,000.00
710350 Office Supplies	\$ 4,000.00	\$ 1,000.00	\$ 5,000.00
710355 Books Subscriptions	\$ 1,000.00	\$ 100.00	\$ 1,100.00
710360 Postage	\$ 5,000.00		\$ 5,000.00
710361 Express Courier	\$ 100.00	\$ 50.00	\$ 150.00
710502 Printing	\$ 2,500.00	\$ -	\$ 2,500.00
710503 Licenses & Permits	\$ 2,200.00	\$ -	\$ 2,200.00
710507 Network Data Li		\$ 3,200.00	\$ 3,200.00
710508 Telephone Land Lines	\$ 10,000.00	\$ 125.00	\$ 10,125.00
710509 Seminars Mtgs	\$ 1,000.00	\$ 1,000.00	\$ 2,000.00
710512 Auto Exp	\$ 100.00	\$ 75.00	\$ 175.00
710519 Cell Phones	\$ 6,500.00	\$ -	\$ 6,500.00
710529 Dues	\$ 200.00	\$ -	\$ 200.00
710535 Credit Card Fee	\$ 4,500.00	\$ 459.78	\$ 4,959.78
710546 Advertising	\$ 500.00	\$ -	\$ 500.00
710721 Outpatient	\$ 6,048.00	\$ -	\$ 6,048.00
711113 Equip Serv Replacement	\$ 43,944.36	\$ -	\$ 43,944.36
711114 Equip Serv O & M	\$ 37,379.76	\$ -	\$ 37,379.76

FY10 ADOPTED BUDGET
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Environmental Health Services Division			
	Local	IT Overlay	FY10
	172400	172402	Totals
711117 ESD Fuel Charge	\$ 21,781.27		\$ 21,781.27
711119 Prop & Liability	\$ 7,981.00	\$ 347.00	\$ 8,328.00
711210 Travel	\$ 5,000.00	\$ 5,500.00	\$ 10,500.00
Services and Supplies	\$ 163,334.39	\$ 30,059.07	\$ 193,393.46
Expenditures	\$ 1,846,053.17	\$ 121,001.00	\$ 1,967,054.17
General Fund Tax Transfer	\$ 1,453,053.17	\$ -	\$ 1,453,053.17

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Epidemiology & Public Health Preparedness Division		
Epidemiology Surveillance		
	171700	FY10 Total
701110 Base Salaries	\$ 309,187.00	\$ 309,187.00
701120 Part time	\$ 35,577.94	\$ 35,577.94
701200 Incentive	\$ 4,041.00	\$ 4,041.00
701300 Overtime	\$ 1,000.00	\$ 1,000.00
701412 Salary Adj	\$ 22,927.00	\$ 22,927.00
Salaries and Wages	\$ 372,732.94	\$ 372,732.94
705110 Group Insurance	\$ 52,501.54	\$ 52,501.54
705320 Retirement	\$ 74,811.30	\$ 74,811.30
705230 Medicare	\$ 4,140.81	\$ 4,140.81
705320 Workmens Comp	\$ 2,359.00	\$ 2,359.00
705330 Unemployment	\$ 455.00	\$ 455.00
Employee Benefits	\$ 134,267.65	\$ 134,267.65
710100 Professional Services	\$ 1,500.00	\$ 1,500.00
710105 Medical Services	\$ 100.00	\$ 100.00
710108 MD Consultants	\$ 12,000.00	\$ 12,000.00
710200 Service Contract	\$ 125.00	\$ 125.00
710205 Repairs Maint	\$ -	\$ -
710300 Operating Supplies	\$ 50.00	\$ 50.00
710334 Copy Machine Exp	\$ 150.00	\$ 150.00
710350 Office Supplies	\$ 1,000.00	\$ 1,000.00
710355 Books Subscriptions	\$ 600.00	\$ 600.00
710360 Postage	\$ 200.00	\$ 200.00
710361 Express Courier	\$ -	\$ -
710502 Printing	\$ -	\$ -
710508 Telephone Land Lines	\$ 2,000.00	\$ 2,000.00
710509 Seminars Mtgs	\$ 1,200.00	\$ 1,200.00
710512 Auto Exp	\$ 100.00	\$ 100.00
710519 Cell Phones	\$ 100.00	\$ 100.00
710529 Dues	\$ 40.00	\$ 40.00
710703 Biologicals	\$ 100.00	\$ 100.00
710721 Outpatient	\$ 3,000.00	\$ 3,000.00
711115 Equip Srv Motor	\$ 200.00	\$ 200.00
711119 Prop & Liability	\$ 5,552.00	\$ 5,552.00
711210 Travel	\$ 7,500.00	\$ 7,500.00
711504 Equip non-Capital	\$ 250.00	\$ 250.00
Services and Supplies	\$ 35,767.00	\$ 35,767.00
Expenditures	\$ 542,767.59	\$ 542,767.59
General Fund Tax Transfer	\$ 542,767.59	\$ 542,767.59

FY10 ADOPTED BUDGET
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Community & Clinical Health Services Division					
Family Planning					
	Local	Title X	WHC	Program Income	FY10
	173000	10025	10026	10478	Totals
430100 Federal Grants	\$ -	\$ (729,078.00)	\$ (6,000.00)	\$ -	\$ (735,078.00)
432100 State Grants	\$ -	\$ -	\$ -	\$ -	\$ -
460501 Medicaid Clinic	\$ -	\$ -	\$ -	\$ (12,000.00)	\$ (12,000.00)
460516 Pgm Inc - 3rd Party	\$ -	\$ -	\$ -	\$ (3,000.00)	\$ (3,000.00)
460524 Family Planning	\$ -	\$ -	\$ -	\$ (100,000.00)	\$ (100,000.00)
Revenue	\$ -	\$ (729,078.00)	\$ (6,000.00)	\$ (115,000.00)	\$ (850,078.00)
701110 Base Salaries	\$ 266,558.73	\$ 94,782.34	\$ -	\$ -	\$ 361,341.07
701120 Part Time	\$ 47,406.53	\$ 219,767.81	\$ -	\$ -	\$ 267,174.34
701130 Pooled Positions	\$ 1,071.34	\$ 13,137.80	\$ -	\$ -	\$ 14,209.14
701200 Incentive	\$ 6,310.00	\$ 1,700.00	\$ -	\$ -	\$ 8,010.00
701412 Salary Adj	\$ -	\$ 138,838.00	\$ -	\$ -	\$ 138,838.00
701500 Merit Awards	\$ (292,409.39)	\$ -	\$ -	\$ -	\$ (292,409.39)
Salaries and Wages	\$ 28,937.21	\$ 468,225.95	\$ -	\$ -	\$ 497,163.16
705110 Group Insurance	\$ 60,259.94	\$ 46,787.29	\$ -	\$ -	\$ 107,047.23
705320 Retirement	\$ 68,690.00	\$ 67,829.02	\$ -	\$ -	\$ 136,519.02
705230 Medicare	\$ 3,769.65	\$ 3,821.74	\$ -	\$ -	\$ 7,591.39
705320 Workmens Comp	\$ 2,022.00	\$ 1,685.00	\$ -	\$ -	\$ 3,707.00
705330 Unemployment	\$ 390.00	\$ 325.00	\$ -	\$ -	\$ 715.00
Employee Benefits	\$ 135,131.59	\$ 120,448.05	\$ -	\$ -	\$ 255,579.64
710100 Professional Services	\$ 2,050.00	\$ 6,507.00	\$ -	\$ -	\$ 8,557.00
105 Medical Services	\$ 5,400.00	\$ 6,600.00	\$ -	\$ -	\$ 12,000.00
108 MD Consultants	\$ 6,057.00	\$ -	\$ -	\$ -	\$ 6,057.00
710119 Subrecipient Payments	\$ -	\$ -	\$ -	\$ -	\$ -
710205 Repairs Maint	\$ 510.00	\$ 50.00	\$ -	\$ -	\$ 560.00
710300 Operating Supplies	\$ -	\$ 19,250.00	\$ -	\$ -	\$ 19,250.00
710334 Copy Machine Exp	\$ 500.00	\$ -	\$ -	\$ -	\$ 500.00
710350 Office Supplies	\$ 500.00	\$ 1,700.00	\$ -	\$ -	\$ 2,200.00
710355 Books Subscriptions	\$ -	\$ 500.00	\$ -	\$ -	\$ 500.00
710360 Postage	\$ 1,000.00	\$ -	\$ -	\$ -	\$ 1,000.00
710361 Express Courier	\$ -	\$ 20.00	\$ -	\$ -	\$ 20.00
710500 Other Exp	\$ 550.00	\$ 200.00	\$ -	\$ -	\$ 750.00
710502 Printing	\$ -	\$ 500.00	\$ -	\$ -	\$ 500.00
710503 Licenses & Permits	\$ 500.00	\$ 500.00	\$ -	\$ -	\$ 1,000.00
710508 Telephone Land Lines	\$ 1,650.00	\$ 350.00	\$ -	\$ -	\$ 2,000.00
710509 Seminars Mtgs	\$ -	\$ 1,000.00	\$ -	\$ -	\$ 1,000.00
710512 Auto Exp	\$ 5.00	\$ 20.00	\$ -	\$ -	\$ 25.00
710529 Dues	\$ 500.00	\$ -	\$ -	\$ -	\$ 500.00
710535 Credit Card Fee	\$ 800.00	\$ -	\$ -	\$ -	\$ 800.00
710546 Advertising	\$ -	\$ 2,000.00	\$ -	\$ -	\$ 2,000.00
710577 Uniforms & Special Equip	\$ -	\$ -	\$ -	\$ -	\$ -
710703 Biologicals	\$ -	\$ 66,157.00	\$ -	\$ -	\$ 66,157.00
710721 Outpatient	\$ -	\$ 31,500.00	\$ 6,000.00	\$ -	\$ 37,500.00
710872 Food Purchase	\$ -	\$ 50.00	\$ -	\$ -	\$ 50.00
1119 Prop & Liability	\$ 3,817.00	\$ -	\$ -	\$ -	\$ 3,817.00
1210 Travel	\$ -	\$ 3,000.00	\$ -	\$ -	\$ 3,000.00
711504 Equip non-Capital	\$ -	\$ 500.00	\$ -	\$ -	\$ 500.00
Services and Supplies	\$ 23,839.00	\$ 140,404.00	\$ 6,000.00	\$ -	\$ 170,243.00
Expenditures	\$ 187,907.80	\$ 722,072.00	\$ 6,000.00	\$ -	\$ 922,985.80
General Fund Tax Transfer	\$ 187,907.80	\$ -	\$ -	\$ (115,000.00)	\$ 72,907.80

FY10 ADOPTED BUDGET
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Environmental Health Services Division		
Food Program		
	172404	FY10 Total
422507 Food Serv Permits	\$ (355,000.00)	\$ (355,000.00)
422514 Initial Application	\$ (38,000.00)	\$ (38,000.00)
460514 Food Service Certs	\$ (8,000.00)	\$ (8,000.00)
460523 Plan Review-Food Fac	\$ (30,000.00)	\$ (30,000.00)
Revenue	\$ (431,000.00)	\$ (431,000.00)
701110 Base Salaries	\$ 1,221,777.97	\$ 1,221,777.97
701130 Pooled Position	\$ 22,000.00	\$ 22,000.00
701200 Incentive	\$ 15,950.00	\$ 15,950.00
701300 Overtime	\$ 5,000.00	\$ 5,000.00
701412 Salary Adjustment	\$ -	\$ -
Salaries and Wages	\$ 1,264,727.97	\$ 1,264,727.97
705110 Group Insurance	\$ 186,318.21	\$ 186,318.21
705320 Retirement	\$ 265,469.85	\$ 265,469.85
705230 Medicare	\$ 16,408.39	\$ 16,408.39
705320 Workmens Comp	\$ 6,066.00	\$ 6,066.00
705330 Unemployment	\$ 1,170.00	\$ 1,170.00
Employee Benefits	\$ 475,432.45	\$ 475,432.45
710300 Operating Supplies	\$ 1,300.00	\$ 1,300.00
710334 Copy Machine Exp	\$ 100.00	\$ 100.00
710350 Office Supplies	\$ 1,500.00	\$ 1,500.00
710360 Postage	\$ 100.00	\$ 100.00
710502 Printing	\$ 100.00	\$ 100.00
710509 Seminars Meetings	\$ 2,000.00	\$ 2,000.00
711119 Prop & Liability	\$ 6,246.00	\$ 6,246.00
711210 Travel	\$ 10,000.00	\$ 10,000.00
Services and Supplies	\$ 21,346.00	\$ 21,346.00
Expenditures	\$ 1,761,506.42	\$ 1,761,506.42
General Fund Tax Transfer	\$ 1,330,506.42	\$ 1,330,506.42

FY10 ADOPTED BUDGET
 (2010 Recommend - Report Date: 05/11/09)

Environmental Health Services Division		
Hazardous Waste		
	10022	FY10 Total
432100 State Grants	\$ (75,000.00)	\$ (75,000.00)
Revenue	\$ (75,000.00)	\$ (75,000.00)
701110 Base Salaries	\$ 55,290.01	\$ 55,290.01
701200 Incentive	\$ 778.50	\$ 778.50
701412 Salary Adjustment	\$ (304.20)	\$ (304.20)
Salaries and Wages	\$ 55,764.31	\$ 55,764.31
705110 Group Insurance	\$ 5,999.91	\$ 5,999.91
705320 Retirement	\$ 12,025.38	\$ 12,025.38
705230 Medicare	\$ 808.40	\$ 808.40
705320 Workmens Comp	\$ 337.00	\$ 337.00
705330 Unemployment	\$ 65.00	\$ 65.00
Employee Benefits	\$ 19,235.69	\$ 19,235.69
Expenditures	\$ 75,000.00	\$ 75,000.00
General Fund Tax Transfer	\$ -	\$ -

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Community & Clinical Health Services Division			
Public Health Nursing			
	Home Visiting	Perinatal	FY10
	170600	60163	Totals
460162 Services O A	\$ -	\$ (63,657.69)	\$ (63,657.69)
460519 Outpatient Services	\$ (12,500.00)	\$ -	\$ (12,500.00)
Revenue	\$ (12,500.00)	\$ (63,657.69)	\$ (76,157.69)
701110 Base Salaries	\$ 404,136.63	\$ -	\$ 404,136.63
701150 Contractual	\$ -	\$ -	\$ -
701120 Part Time	\$ 17,536.03	\$ 46,165.28	\$ 63,701.31
701200 Incentive	\$ 9,950.00	\$ -	\$ 9,950.00
701300 Overtime	\$ 75.00	\$ -	\$ 75.00
701500 Merit Awards	\$ (200,205.00)	\$ -	\$ (200,205.00)
Salaries and Wages	\$ 231,492.66	\$ 46,165.28	\$ 277,657.94
705110 Group Insurance	\$ 56,417.47	\$ 6,960.07	\$ 63,377.54
705320 Retirement	\$ 92,565.23	\$ 9,901.64	\$ 102,466.87
705230 Medicare	\$ 5,421.78	\$ 630.70	\$ 6,052.48
705320 Workmens Comp	\$ 3,707.00	\$ -	\$ 3,707.00
705330 Unemployment	\$ 715.00	\$ -	\$ 715.00
Employee Benefits	\$ 158,826.48	\$ 17,492.41	\$ 176,318.89
710100 Professional Services	\$ 1,000.00	\$ -	\$ 1,000.00
710205 Repairs Maintenance	\$ 50.00	\$ -	\$ 50.00
710300 Operating Supplies	\$ 500.00	\$ -	\$ 500.00
710334 Copy Machine Exp	\$ 250.00	\$ -	\$ 250.00
710350 Office Supplies	\$ 500.00	\$ -	\$ 500.00
710360 Postage	\$ 100.00	\$ -	\$ 100.00
710361 Express Courier	\$ 20.00	\$ -	\$ 20.00
710500 Other Expenses	\$ 100.00	\$ -	\$ 100.00
710502 Printing	\$ 500.00	\$ -	\$ 500.00
710503 Licenses & Permits	\$ 500.00	\$ -	\$ 500.00
710508 Telephone Land Lines	\$ 1,700.00	\$ -	\$ 1,700.00
710509 Seminars Mtgs	\$ 500.00	\$ -	\$ 500.00
710512 Auto Exp	\$ 5,000.00	\$ -	\$ 5,000.00
710519 Cell Phone	\$ 332.00	\$ -	\$ 332.00
711115 Equip Srv Motor Pool	\$ 4,000.00	\$ -	\$ 4,000.00
711119 Prop & Liability	\$ 4,164.00	\$ -	\$ 4,164.00
711210 Travel	\$ 1,500.00	\$ -	\$ 1,500.00
Services and Supplies	\$ 20,716.00	\$ -	\$ 20,716.00
Expenditures	\$ 411,035.14	\$ 63,657.69	\$ 474,692.83
General Fund Tax Transfer	\$ 398,535.14	\$ -	\$ 398,535.14

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Community & Clinical Health Services Division				
Immunizations				
	Local	Base	Program Income	FY10
	173500	10028	10479	Totals
431100 Federal Grants	\$ -	\$ (369,550.00)	\$ -	\$ (369,550.00)
460500 Other Immunizations	\$ -	\$ -	\$ (110,000.00)	\$ (110,000.00)
460501 Medicaid Clinic	\$ -	\$ -	\$ (19,500.00)	\$ (19,500.00)
460503 Child Immunizations	\$ -	\$ -	\$ (190,000.00)	\$ (190,000.00)
460515 Medicare Reimbursement	\$ -	\$ -	\$ (500.00)	\$ (500.00)
460517 Influenza Immunizations	\$ -	\$ -	\$ (5,000.00)	\$ (5,000.00)
Revenue	\$ -	\$ (369,550.00)	\$ (325,000.00)	\$ (694,550.00)
701110 Base Salaries	\$ 425,797.99	\$ 191,021.26	\$ -	\$ 616,819.25
701120 Part Time	\$ 100,255.17	\$ 28,622.52	\$ -	\$ 128,877.69
701130 Pooled Positions	\$ 19,700.00	\$ -	\$ -	\$ 19,700.00
701200 Incentive	\$ 7,775.50	\$ 2,988.50	\$ -	\$ 10,764.00
701300 Overtime	\$ -	\$ -	\$ -	\$ -
701412 Salary Adjustment		\$ 37,089.26	\$ -	\$ 37,089.26
Salaries and Wages	\$ 553,528.66	\$ 259,721.54	\$ -	\$ 813,250.20
705110 Group Insurance	\$ 85,446.11	\$ 31,219.43	\$ -	\$ 116,665.54
705320 Retirement	\$ 114,492.29	\$ 47,748.48	\$ -	\$ 162,240.77
705230 Medicare	\$ 7,304.47	\$ 3,081.55	\$ -	\$ 10,386.02
705320 Workmens Comp	\$ 2,696.00	\$ 1,348.00	\$ -	\$ 4,044.00
705330 Unemployment	\$ 520.00	\$ 260.00	\$ -	\$ 780.00
Employee Benefits	\$ 210,458.87	\$ 83,657.46	\$ -	\$ 294,116.33
710100 Professional Services	\$ 14,200.00	\$ 2,050.00	\$ -	\$ 16,250.00
710108 MD Consultants	\$ 5,600.00	\$ 3,825.00	\$ -	\$ 9,425.00
710200 Service Contract	\$ 1,100.00	\$ -	\$ -	\$ 1,100.00
710205 Repairs Maint	\$ 300.00	\$ 1,000.00	\$ -	\$ 1,300.00
710300 Operating Supplies	\$ 14,500.00	\$ -	\$ -	\$ 14,500.00
710334 Copy Machine Exp	\$ 500.00	\$ 2,472.00	\$ -	\$ 2,972.00
710350 Office Supplies	\$ 1,500.00	\$ 3,584.00	\$ -	\$ 5,084.00
710360 Postage	\$ 500.00	\$ 1,020.00	\$ -	\$ 1,520.00
710500 Other Expenses	\$ -	\$ -	\$ -	\$ -
710502 Printing	\$ 1,000.00	\$ 2,400.00	\$ -	\$ 3,400.00
710503 Licenses & Permits	\$ 400.00	\$ -	\$ -	\$ 400.00
710507 Network Data Li	\$ 700.00	\$ -	\$ -	\$ 700.00
710508 Telephone Land Lines	\$ 3,042.00	\$ 780.00	\$ -	\$ 3,822.00
710509 Seminars Mtgs	\$ 250.00	\$ 550.00	\$ -	\$ 800.00
710512 Auto Exp	\$ 650.00	\$ 1,217.00	\$ -	\$ 1,867.00
710535 Credit Card Fee	\$ 4,600.00	\$ -	\$ -	\$ 4,600.00
710577 Uniforms & Special Equip	\$ 150.00	\$ -	\$ -	\$ 150.00
710703 Biologicals	\$ 160,000.00	\$ -	\$ -	\$ 160,000.00
711119 Prop & Liability	\$ 4,164.00	\$ -	\$ -	\$ 4,164.00
711210 Travel	\$ 1,000.00	\$ 6,073.00	\$ -	\$ 7,073.00
711504 Equip non-Capital	\$ 500.00	\$ 1,200.00	\$ -	\$ 1,700.00
Services and Supplies	\$ 214,656.00	\$ 26,171.00	\$ -	\$ 240,827.00
Expenditures	\$ 978,643.53	\$ 369,550.00	\$ -	\$ 1,348,193.53
General Fund Tax Transfer	\$ 978,643.53	\$ -	\$ (325,000.00)	\$ 653,643.53

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Epidemiology & Public Health Preparedness Division							
	HRSA	Influenza Surv	NEDSS	General ELC	ASPR	PHP	FY10
	10576	10675	10676	10677	10708	10713	Totals
431100 Federal Grants	\$ (107,188.00)	\$ (21,675.00)	\$ (21,531.00)	\$ (21,289.60)	\$ (424,449.00)	\$ (793,132.00)	\$ (1,389,264.60)
431105 Fed. Grants-Indirect	\$ -	\$ (2,885.00)	\$ (2,885.00)	\$ (1,944.00)	\$ (21,817.00)	\$ -	\$ (29,531.00)
Revenue	\$ (107,188.00)	\$ (24,560.00)	\$ (24,416.00)	\$ (23,233.60)	\$ (446,266.00)	\$ (793,132.00)	\$ (1,418,795.60)
701110 Base Salaries	\$ 2,533.00	\$ 16,139.14	\$ 16,136.05	\$ 16,136.05	\$ 131,038.49	\$ 528,371.84	\$ 710,354.57
701150 Contractual Wages	\$ -	\$ -	\$ -	\$ -	\$ 12,000.00	\$ -	\$ 12,000.00
701200 Incentive	\$ -	\$ 150.00	\$ 150.00	\$ 150.00	\$ 1,250.00	\$ 1,000.00	\$ 2,700.00
701412 Salary Adjustment	\$ -	\$ (19.64)	\$ -	\$ -	\$ -	\$ 32,853.78	\$ 32,834.14
Salaries and Wages	\$ 2,533.00	\$ 16,269.50	\$ 16,286.05	\$ 16,286.05	\$ 144,288.49	\$ 562,225.62	\$ 757,888.71
705110 Group Insurance	\$ -	\$ 1,273.64	\$ 1,273.64	\$ 1,273.64	\$ 13,738.43	\$ 57,649.55	\$ 75,208.90
705320 Retirement	\$ 519.00	\$ 3,493.67	\$ 3,493.67	\$ 3,493.67	\$ 28,372.04	\$ 113,542.73	\$ 152,914.78
705230 Medicare	\$ 36.00	\$ 236.19	\$ 236.19	\$ 236.19	\$ 1,919.29	\$ 7,489.09	\$ 10,152.95
705320 Workmens Comp	\$ -	\$ 337.00	\$ 241.45	\$ -	\$ 337.00	\$ 2,359.00	\$ 3,274.45
705330 Unemployment	\$ -	\$ 65.00	\$ -	\$ -	\$ 65.00	\$ 455.00	\$ 585.00
Employee Benefits	\$ 555.00	\$ 5,405.50	\$ 5,244.95	\$ 5,003.50	\$ 44,431.76	\$ 181,495.37	\$ 242,136.08
710100 Professional Services	\$ -	\$ -	\$ -	\$ -	\$ 112,369.75	\$ 11,091.00	\$ 123,460.75
710205 Repairs Maint	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 400.00	\$ 400.00
710300 Operating Supplies	\$ -	\$ -	\$ -	\$ -	\$ 13,230.00	\$ 7,120.00	\$ 20,350.00
710334 Copy Machine Exp	\$ -	\$ -	\$ -	\$ -	\$ 120.00	\$ 150.00	\$ 270.00
710350 Office Supplies	\$ -	\$ -	\$ -	\$ -	\$ 960.00	\$ 4,680.00	\$ 5,640.00
710355 Books & Subscriptions	\$ -	\$ -	\$ -	\$ -	\$ 374.00	\$ 1,440.00	\$ 1,814.00
710360 Postage	\$ -	\$ -	\$ -	\$ -	\$ 600.00	\$ 300.00	\$ 900.00
710500 Other Expense	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 480.00	\$ 480.00
710502 Printing	\$ -	\$ -	\$ -	\$ -	\$ 840.00	\$ 1,800.00	\$ 2,640.00
710508 Telephone Land Lines	\$ -	\$ -	\$ -	\$ -	\$ 340.00	\$ 6,960.00	\$ 7,300.00
710509 Seminars & Meetings	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 200.00	\$ 200.00
710512 Auto Expense	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
710519 Cellular Phone	\$ -	\$ -	\$ -	\$ -	\$ 480.00	\$ -	\$ 480.00
710529 Dues	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 540.00	\$ 540.00
710533 Advertising	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 100.00	\$ 100.00
71 Undesignated Budget	\$ -	\$ 2,885.00	\$ 2,885.00	\$ 1,944.05	\$ 21,817.00	\$ 1,800.01	\$ 31,331.06
71 Travel	\$ -	\$ -	\$ -	\$ -	\$ 17,000.00	\$ 12,000.00	\$ 29,000.00
711504 Equip non-Capital	\$ -	\$ -	\$ -	\$ -	\$ 10,575.00	\$ 350.00	\$ 10,925.00
Services and Supplies	\$ -	\$ 2,885.00	\$ 2,885.00	\$ 1,944.05	\$ 178,705.75	\$ 49,411.01	\$ 235,830.81
781004 Equipment Capital	\$ 104,100.00	\$ -	\$ -	\$ -	\$ 78,840.00	\$ -	\$ 182,940.00
Equipment Capital	\$ 104,100.00	\$ -	\$ -	\$ -	\$ 78,840.00	\$ -	\$ 182,940.00
Expenditures	\$ 107,188.00	\$ 24,560.00	\$ 24,416.00	\$ 23,233.60	\$ 446,266.00	\$ 793,132.00	\$ 1,418,795.60
General Fund Tax Transfer	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

FY10 ADOPTED BUDGET
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Environmental Health Services Division			
	SDWA	PWSS	FY10
	172200	10017	Totals
422509 Water Co Permits	\$ (12,000.00)	\$ -	\$ (12,000.00)
431100 Federal Grants	\$ -	\$ (90,000.00)	\$ (90,000.00)
Revenue	\$ (12,000.00)	\$ (90,000.00)	\$ (102,000.00)
701110 Base Salaries	\$ 101,965.20	\$ 50,569.92	\$ 152,535.12
701130 Pooled Position	\$ -	\$ 19,712.00	\$ 19,712.00
701200 Incentive Longevity	\$ 2,017.50	\$ 1,045.00	\$ 3,062.50
701300 Overtime	\$ -	\$ 288.00	\$ 288.00
701412 Salary Adjustment	\$ (917.39)	\$ 917.39	\$ -
Salaries and Wages	\$ 103,065.31	\$ 72,532.31	\$ 175,597.62
705110 Group Insurance	\$ 14,245.77	\$ 5,672.77	\$ 19,918.54
705320 Retirement	\$ 22,301.57	\$ 11,070.00	\$ 33,371.57
705230 Medicare	\$ 1,074.41	\$ 724.92	\$ 1,799.33
705320 Workmens Comp	\$ 1,011.00	\$ -	\$ 1,011.00
705330 Unemployment	\$ 195.00	\$ -	\$ 195.00
Employee Benefits	\$ 38,827.75	\$ 17,467.69	\$ 56,295.44
710100 Professional Services	\$ 200.00	\$ -	\$ 200.00
710300 Operating Supplies	\$ 50.00	\$ -	\$ 50.00
710334 Copy Machine Exp	\$ 50.00	\$ -	\$ 50.00
710350 Office Supplies	\$ 50.00	\$ -	\$ 50.00
710355 Books Subscriptions	\$ 300.00	\$ -	\$ 300.00
710360 Postage	\$ 150.00	\$ -	\$ 150.00
710361 Express Courier	\$ -	\$ -	\$ -
710503 Licenses & Permits	\$ 100.00	\$ -	\$ 100.00
710508 Telephone Land Lines	\$ 200.00	\$ -	\$ 200.00
710509 Seminars Mtgs	\$ 200.00	\$ -	\$ 200.00
710529 Dues	\$ 346.00	\$ -	\$ 346.00
711113 Equip Serv Replacement	\$ -	\$ -	\$ -
711114 Equip Serv O & M	\$ 2,146.13	\$ -	\$ 2,146.13
711113 Equip Serv Replacement	\$ -	\$ -	\$ -
711117 ESD Fuel Charge	\$ 1,103.09	\$ -	\$ 1,103.09
711119 Prop & Liability	\$ 1,041.00	\$ -	\$ 1,041.00
711210 Travel	\$ 1,000.00	\$ -	\$ 1,000.00
711504 Equip non-Capital	\$ 152.00	\$ -	\$ 152.00
Services and Supplies	\$ 7,088.22	\$ -	\$ 7,088.22
Expenditures	\$ 148,981.28	\$ 90,000.00	\$ 238,981.28
General Fund Tax Transfer	\$ 136,981.28	\$ -	\$ 136,981.28

FY10 ADOPTED BUDGET
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Community & Clinical Health Services Division				
HIV Program				
	Surveillance	Prevention	Fiscal Agent	FY10
	10012	10013	10187	Totals
431100 Federal Grants	\$ (85,229.00)	\$ (581,142.00)	\$ (32,039.00)	\$ (698,410.00)
Revenue	\$ (85,229.00)	\$ (581,142.00)	\$ (32,039.00)	\$ (698,410.00)
701110 Base Salaries	\$ 55,398.14	\$ 238,391.50	\$ 21,392.33	\$ 315,181.97
701120 Part Time	\$ -	\$ -	\$ -	\$ -
701200 Incentive	\$ 936.00	\$ 4,074.00	\$ 140.00	\$ 5,150.00
701412 Salary Adj	\$ 6,452.27	\$ (6,854.83)	\$ 402.56	\$ 0.00
Salaries and Wages	\$ 62,786.41	\$ 235,610.67	\$ 21,934.89	\$ 320,331.97
705110 Group Insurance	\$ 6,678.92	\$ 28,877.38	\$ 5,196.93	\$ 40,753.23
705320 Retirement	\$ 12,082.05	\$ 52,003.60	\$ 4,618.58	\$ 68,704.23
705230 Medicare	\$ 779.62	\$ 3,439.11	\$ 288.60	\$ 4,507.33
705320 Workmens Comp	\$ 337.00	\$ 1,011.00	\$ -	\$ 1,348.00
705330 Unemployment	\$ 65.00	\$ 195.00	\$ -	\$ 260.00
Employee Benefits	\$ 19,942.59	\$ 85,526.09	\$ 10,104.11	\$ 115,572.79
710100 Professional Services	\$ -	\$ -	\$ -	\$ -
710119 Subrecipient Payment	\$ -	\$ 189,994.00	\$ -	\$ 189,994.00
710300 Operating Supplies	\$ -	\$ 15,000.00	\$ -	\$ 15,000.00
710334 Copy Machine Exp	\$ -	\$ 500.00	\$ -	\$ 500.00
710350 Office Supplies	\$ -	\$ 2,000.00	\$ -	\$ 2,000.00
710355 Books/Subscriptions	\$ -	\$ 200.00	\$ -	\$ 200.00
710361 Express Courier	\$ -	\$ 200.00	\$ -	\$ 200.00
710500 Other Expenses	\$ -	\$ 1,000.00	\$ -	\$ 1,000.00
710502 Printing	\$ -	\$ 3,157.24	\$ -	\$ 3,157.24
710503 Licenses & Permits	\$ -	\$ 100.00	\$ -	\$ 100.00
710505 Rental Equipment	\$ -	\$ 469.00	\$ -	\$ 469.00
710508 Telephone Land Lines	\$ -	\$ 1,000.00	\$ -	\$ 1,000.00
710509 Seminars Mtgs	\$ -	\$ 3,300.00	\$ -	\$ 3,300.00
710512 Auto Exp	\$ -	\$ 372.00	\$ -	\$ 372.00
710519 Cellular Phone	\$ -	\$ -	\$ -	\$ -
710546 Advertising	\$ -	\$ 10,000.00	\$ -	\$ 10,000.00
710721 Outpatient	\$ -	\$ 24,285.00	\$ -	\$ 24,285.00
710872 Food Purchases	\$ -	\$ 1,000.00	\$ -	\$ 1,000.00
711115 Equip Srv Motor	\$ -	\$ 100.00	\$ -	\$ 100.00
711210 Travel	\$ 2,500.00	\$ 6,328.00	\$ -	\$ 8,828.00
711504 Equip Non-Ca	\$ -	\$ 1,000.00	\$ -	\$ 1,000.00
Services and Supplies	\$ 2,500.00	\$ 260,005.24	\$ -	\$ 262,505.24
Expenditures	\$ 85,229.00	\$ 581,142.00	\$ 32,039.00	\$ 698,410.00
General Fund Tax Transfer	\$ -	\$ -	\$ -	\$ -

FY10 ADOPTED BUDGET
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Community & Clinical Health Services Division				
Sexual Health Program				
	SH	SH Grant	Income	FY10
	171300	10014	10480	Totals
460501 Medicaid Clinics	\$ -	\$ -	\$ (4,000.00)	\$ (4,000.00)
460516 Pgm Inc - 3rd Party	\$ -	\$ -	\$ (4,000.00)	\$ (4,000.00)
460518 STD Fees	\$ -	\$ -	\$ (30,000.00)	\$ (30,000.00)
431100 Federal Grants	\$ -	\$ (115,022.00)	\$ -	\$ (115,022.00)
Revenue	\$ -	\$ (115,022.00)	\$ (38,000.00)	\$ (153,022.00)
701110 Base Salaries	\$ 313,964.67	\$ 69,247.80	\$ -	\$ 383,212.47
701120 Part Time	\$ 15,388.43	\$ -	\$ -	\$ 15,388.43
701200 Incentive	\$ 5,495.00	\$ 1,625.00	\$ -	\$ 7,120.00
701300 Overtime	\$ -	\$ -	\$ -	\$ -
701412 Salary Adjustment	\$ -	\$ (1,371.25)	\$ -	\$ (1,371.25)
Salaries and Wages	\$ 334,848.10	\$ 69,501.55	\$ -	\$ 404,349.65
705110 Group Insurance	\$ 40,027.34	\$ 5,730.85	\$ -	\$ 45,758.19
705320 Retirement	\$ 71,815.67	\$ 15,199.62	\$ -	\$ 87,015.29
705230 Medicare	\$ 4,709.97	\$ 1,018.98	\$ -	\$ 5,728.95
705320 Workmens Comp	\$ 2,359.00	\$ -	\$ -	\$ 2,359.00
705330 Unemployment	\$ 455.00	\$ -	\$ -	\$ 455.00
Employee Benefits	\$ 119,366.98	\$ 21,949.45	\$ -	\$ 141,316.43
710100 Professional Services	\$ 8,000.00	\$ -	\$ -	\$ 8,000.00
710108 MD Consultants	\$ 11,500.00	\$ -	\$ -	\$ 11,500.00
710205 Repairs Maintenance	\$ 350.00	\$ -	\$ -	\$ 350.00
710300 Operating Supplies	\$ 5,550.00	\$ -	\$ -	\$ 5,550.00
710334 Copy Machine Exp	\$ 100.00	\$ -	\$ -	\$ 100.00
710350 Office Supplies	\$ 1,000.00	\$ -	\$ -	\$ 1,000.00
710360 Postage	\$ 1,000.00	\$ -	\$ -	\$ 1,000.00
710361 Express Courier	\$ 25.00	\$ -	\$ -	\$ 25.00
710500 Other Expenses	\$ 300.00	\$ -	\$ -	\$ 300.00
710502 Printing	\$ 50.00	\$ -	\$ -	\$ 50.00
710503 Licenses & Permits	\$ 200.00	\$ -	\$ -	\$ 200.00
710508 Telephone Land Lines	\$ 1,000.00	\$ -	\$ -	\$ 1,000.00
710509 Seminars Mtgs	\$ 250.00	\$ -	\$ -	\$ 250.00
710512 Auto Expense	\$ 200.00	\$ -	\$ -	\$ 200.00
710535 Credit Card Fee	\$ 450.00	\$ -	\$ -	\$ 450.00
710577 Uniforms	\$ 200.00	\$ -	\$ -	\$ 200.00
710703 Biologicals	\$ 5,000.00	\$ -	\$ -	\$ 5,000.00
710721 Outpatient	\$ 15,000.00	\$ 23,571.00	\$ -	\$ 38,571.00
711119 Prop & Liability	\$ 3,817.00	\$ -	\$ -	\$ 3,817.00
711210 Travel	\$ 6,450.00	\$ -	\$ -	\$ 6,450.00
711504 Equip non-Capital	\$ 500.00	\$ -	\$ -	\$ 500.00
Services and Supplies	\$ 60,942.00	\$ 23,571.00	\$ -	\$ 84,513.00
Expenditures	\$ 515,157.08	\$ 115,022.00	\$ -	\$ 630,179.08
General Fund Tax Transfer	\$ 515,157.08	\$ -	\$ (38,000.00)	\$ 477,157.08

FY10 ADOPTED BUDGET
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Environmental Health Services Division			
	Solid Waste	Tire Fee	FY10
	172700	20269	Totals
422503 Environ Permits	\$ (62,000.00)	\$ -	\$ (62,000.00)
432310 Tire Fee	\$ -	\$ (370,534.52)	\$ (370,534.52)
Revenue	\$ (62,000.00)	\$ (370,534.52)	\$ (432,534.52)
701110 Base Salaries	\$ 72,315.22	\$ 251,996.41	\$ 324,311.63
701130 Pooled Positions	\$ -	\$ 500.00	\$ 500.00
701200 Incentive	\$ 2,000.00	\$ 5,950.00	\$ 7,950.00
Salaries and Wages	\$ 74,315.22	\$ 258,446.41	\$ 332,761.63
705110 Group Insurance	\$ 12,517.36	\$ 35,077.54	\$ 47,594.90
705320 Retirement	\$ 15,938.34	\$ 55,322.35	\$ 71,260.69
705230 Medicare	\$ 450.83	\$ 2,610.48	\$ 3,061.31
705320 Workmens Comp	\$ -	\$ 1,348.00	\$ 1,348.00
705330 Unemployment	\$ -	\$ 260.00	\$ 260.00
Employee Benefits	\$ 28,906.53	\$ 94,618.37	\$ 123,524.90
710100 Prof Services	\$ -	\$ -	\$ -
710200 Service Contracts	\$ -	\$ -	\$ -
710300 Operating Supplies	\$ -	\$ -	\$ -
710302 Small Tools	\$ 200.00	\$ -	\$ 200.00
710325 Signs & Markers	\$ -	\$ -	\$ -
710334 Copy Machine	\$ -	\$ -	\$ -
710350 Office Supplies	\$ 100.00	\$ -	\$ 100.00
710360 Postage	\$ 50.00	\$ -	\$ 50.00
710502 Printing	\$ 25.00	\$ -	\$ 25.00
710508 Telephone Land Lines	\$ -	\$ -	\$ -
710509 Seminars Mtgs	\$ -	\$ -	\$ -
710519 Cellular Phone	\$ -	\$ -	\$ -
710529 Dues	\$ -	\$ -	\$ -
710577 Uniforms	\$ -	\$ -	\$ -
711113 Equip Serv Replacement	\$ 4,965.96	\$ 7,054.92	\$ 12,020.88
711114 Equip Serv O & M	\$ 2,455.17	\$ 6,037.17	\$ 8,492.34
711117 ESD Fuel Charge	\$ 2,301.23	\$ 4,377.65	\$ 6,678.88
711119 Prop & Liability	\$ 2,082.00	\$ -	\$ 2,082.00
711210 Travel	\$ 650.00	\$ -	\$ 650.00
711504 Equipment NonCapital	\$ -	\$ -	\$ -
781007 Vehicles Capital	\$ -	\$ -	\$ -
Services and Supplies	\$ 12,829.36	\$ 17,469.74	\$ 30,299.10
Expenditures	\$ 116,051.11	\$ 370,534.52	\$ 486,585.63
General Fund Tax Transfer	\$ 54,051.11	\$ -	\$ 54,051.11

FY10 ADOPTED BUDGET
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Community & Clinical Health Services Division					
Tuberculosis					
	Local	CDC Grant	Supplement	Income	FY10
	171400	10016	10035	10481	Totals
431100 Federal Grants	\$ -	\$(67,723.00)	\$ -	\$ -	\$ (67,723.00)
432100 State Grants	\$ -	\$ -	\$(118,366.00)	\$ -	\$(118,366.00)
460501 Medicaid Clinic	\$ -	\$ -	\$ -	\$ (1,000.00)	\$ (1,000.00)
460508 Tuberculosis	\$ -	\$ -	\$ -	\$(10,000.00)	\$ (10,000.00)
460516 Pgm 3 rd Prt	\$ -	\$ -	\$ -	\$ (2,000.00)	\$ (2,000.00)
Revenue	\$ -	\$(67,723.00)	\$(118,366.00)	\$(13,000.00)	\$(199,089.00)
701110 Base Salaries	\$214,624.21	\$ 44,626.46	\$ 32,315.54	\$ -	\$ 291,566.21
701120 Part Time	\$ 24,621.34	\$ -	\$ 36,932.26	\$ -	\$ 61,553.60
701200 Incentive	\$ 2,990.00	\$ 957.00	\$ 693.00	\$ -	\$ 4,640.00
701300 Overtime	\$ 100.00	\$ -	\$ -	\$ -	\$ 100.00
701412 Salary Adjus	\$ -	\$ -	\$ (1,522.09)	\$ -	\$ (1,522.09)
Salaries and Wages	\$242,335.55	\$ 45,583.46	\$ 68,418.71	\$ -	\$ 356,337.72
705110 Group Insurance	\$ 31,172.93	\$ 6,365.67	\$ 12,833.75	\$ -	\$ 50,372.35
705320 Retirement	\$ 51,953.34	\$ 9,776.26	\$ 15,000.53	\$ -	\$ 76,730.13
705230 Medicare	\$ 2,751.93	\$ 625.09	\$ 927.43	\$ -	\$ 4,304.45
705320 Workmens Comp	\$ 1,011.00	\$ 337.00	\$ 337.00	\$ -	\$ 1,685.00
705330 Unemployment	\$ 195.00	\$ 65.00	\$ 65.00	\$ -	\$ 325.00
Employee Benefits	\$ 87,084.20	\$ 17,169.02	\$ 29,163.71	\$ -	\$ 133,416.93
710100 Prof Services	\$ 7,066.00	\$ -	\$ 1,942.00	\$ -	\$ 9,008.00
710105 Medical Serv	\$ 600.00	\$ -	\$ -	\$ -	\$ 600.00
710108 MD Consultants	\$ 9,200.00	\$ -	\$ 7,200.00	\$ -	\$ 16,400.00
710200 Service Contract	\$ -	\$ -	\$ -	\$ -	\$ -
710205 Repairs Maint	\$ 3,510.00	\$ -	\$ -	\$ -	\$ 3,510.00
710300 Operating Supplies	\$ 600.00	\$ -	\$ 400.00	\$ -	\$ 1,000.00
710334 Copy Machine Exp	\$ 1,650.00	\$ -	\$ -	\$ -	\$ 1,650.00
710350 Office Supplies	\$ 431.00	\$ -	\$ 569.00	\$ -	\$ 1,000.00
710355 Books/Subscr	\$ 100.00	\$ -	\$ -	\$ -	\$ 100.00
710360 Postage	\$ 200.00	\$ -	\$ -	\$ -	\$ 200.00
710361 Express Courier	\$ 20.00	\$ -	\$ 100.00	\$ -	\$ 120.00
710500 Other Expenses	\$ 532.00	\$ 1,118.52	\$ 672.58	\$ -	\$ 2,323.10
710502 Printing	\$ 100.00	\$ -	\$ 100.00	\$ -	\$ 200.00
710503 Licenses & Permits	\$ 200.00	\$ -	\$ 100.00	\$ -	\$ 300.00
710508 Telephone Land Lines	\$ 2,000.00	\$ -	\$ -	\$ -	\$ 2,000.00
710509 Seminars Mtgs	\$ 500.00	\$ -	\$ 300.00	\$ -	\$ 800.00
710512 Auto Exp	\$ 200.00	\$ -	\$ 300.00	\$ -	\$ 500.00
710519 Cellular Phone	\$ 130.00	\$ -	\$ -	\$ -	\$ 130.00
710535 Credit Card Fee	\$ 85.00	\$ -	\$ -	\$ -	\$ 85.00
710703 Biologicals	\$ 3,000.00	\$ -	\$ 3,000.00	\$ -	\$ 6,000.00
710721 Outpatient	\$ 5,754.00	\$ -	\$ 4,900.00	\$ -	\$ 10,654.00
710872 Food Purchases	\$ 50.00	\$ -	\$ 700.00	\$ -	\$ 750.00
711119 Prop & Liability	\$ 1,735.00	\$ -	\$ -	\$ -	\$ 1,735.00
711210 Travel	\$ 1,000.00	\$ 3,852.00	\$ 500.00	\$ -	\$ 5,352.00
Services and Supplies	\$ 38,663.00	\$ 4,970.52	\$ 20,783.58	\$ -	\$ 64,417.10
Expenditures	\$368,082.75	\$ 67,723.00	\$ 118,366.00	\$ -	\$ 554,171.75
General Fund Tax Transfer	\$368,082.75	\$ -	\$ -	\$(13,000.00)	\$ 355,082.75

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Environmental Health Services Division		
Underground Storage Tank		
	10023	FY10 Total
431100 Federal Grants	\$ (187,000.00)	\$ (187,000.00)
Revenue	\$ (187,000.00)	\$ (187,000.00)
701110 Base Salaries	\$ 126,493.14	\$ 126,493.14
701200 Incentive	\$ 1,500.00	\$ 1,500.00
Salaries and Wages	\$ 127,993.14	\$ 127,993.14
705110 Group Insurance	\$ 16,324.20	\$ 16,324.20
705320 Retirement	\$ 27,452.00	\$ 27,452.00
705230 Medicare	\$ 1,803.61	\$ 1,803.61
705320 Workmens Comp	\$ 674.00	\$ 674.00
705330 Unemployment	\$ 130.00	\$ 130.00
Employee Benefits	\$ 46,383.81	\$ 46,383.81
710300 Operating Supplies	\$ 3,143.05	\$ 3,143.05
710334 Copy Mach Ex	\$ 30.00	\$ 30.00
710350 Office Supplies	\$ 1,500.00	\$ 1,500.00
710360 Postage	\$ 500.00	\$ 500.00
710361 Express Courier	\$ 50.00	\$ 50.00
710502 Printing	\$ 100.00	\$ 100.00
710508 Telephone Landline	\$ 300.00	\$ 300.00
710509 Seminars Mtgs	\$ 2,000.00	\$ 2,000.00
711210 Travel	\$ 5,000.00	\$ 5,000.00
Services and Supplies	\$ 12,623.05	\$ 12,623.05
Expenditures	\$ 187,000.00	\$ 187,000.00
General Fund Tax Transfer	\$ -	\$ -

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Environmental Health Services Division			
	Vector	Ctrl Tax	FY10
	172100	172101	Totals
460162 Services O Agencies	\$ -	\$ -	\$ -
460525 Plan Review	\$ (64,000.00)	\$ -	\$ (64,000.00)
621001 TF General	\$ -	\$ (350,000.00)	\$ (350,000.00)
Revenue	\$ (64,000.00)	\$ (350,000.00)	\$ (414,000.00)
701110 Base Salaries	\$ 294,478.31	\$ -	\$ 294,478.31
701130 Pooled Positions	\$ 32,535.00	\$ 6,350.00	\$ 38,885.00
701150 Contractual Wage	\$ -	\$ 9,500.00	\$ 9,500.00
701200 Incentive	\$ 2,300.00	\$ -	\$ 2,300.00
701300 Overtime	\$ 3,000.00	\$ -	\$ 3,000.00
Salaries and Wages	\$ 332,313.31	\$ 15,850.00	\$ 348,163.31
705110 Group Insurance	\$ 37,531.92	\$ -	\$ 37,531.92
705320 Retirement	\$ 63,653.77	\$ -	\$ 63,653.77
705230 Medicare	\$ 4,198.58	\$ -	\$ 4,198.58
705320 Workmens Comp	\$ 1,348.00	\$ -	\$ 1,348.00
705330 Unemployment	\$ 260.00	\$ -	\$ 260.00
Employee Benefits	\$ 106,992.27	\$ -	\$ 106,992.27
710100 Professional Services	\$ 6,235.00	\$ 105,693.00	\$ 111,928.00
710105 Medical Service	\$ 500.00	\$ -	\$ 500.00
710200 Service Contract	\$ 61,500.00	\$ 20,000.00	\$ 81,500.00
710205 Repairs Maint	\$ 900.00	\$ -	\$ 900.00
710300 Operating Supplies	\$ 3,000.00	\$ -	\$ 3,000.00
710302 Small Tools	\$ 435.00	\$ -	\$ 435.00
710308 Animal Supplies	\$ 2,000.00	\$ -	\$ 2,000.00
710319 Chemical Supplies	\$ 360,000.00	\$ 199,957.00	\$ 559,957.00
710334 Copy Machine Exp	\$ 100.00	\$ -	\$ 100.00
710350 Office Supplies	\$ 1,000.00	\$ -	\$ 1,000.00
710355 Books Subscriptions	\$ 200.00	\$ -	\$ 200.00
710360 Postage	\$ 100.00	\$ -	\$ 100.00
710361 Express Courier	\$ 100.00	\$ -	\$ 100.00
710391 Fuel & Lube	\$ 100.00	\$ -	\$ 100.00
710500 Other Expense	\$ 800.00	\$ -	\$ 800.00
710502 Printing	\$ 500.00	\$ -	\$ 500.00
710503 Licenses & Permits	\$ 35.00	\$ -	\$ 35.00
710508 Telephone Land Lines	\$ 800.00	\$ -	\$ 800.00
710509 Seminars Mtgs	\$ 1,000.00	\$ 1,500.00	\$ 2,500.00
710512 Auto Exp	\$ 200.00	\$ -	\$ 200.00
170519 Cellular Phone	\$ 755.00	\$ -	\$ 755.00
710529 Dues	\$ 350.00	\$ -	\$ 350.00
710546 Advertising	\$ -	\$ -	\$ -
710577 Uniforms & Spec	\$ 200.00	\$ -	\$ 200.00
710600 Lt Lease-Office	\$ 40,636.89	\$ -	\$ 40,636.89
711113 Equip Serv Replacement	\$ 11,997.84	\$ -	\$ 11,997.84
711114 Equip Serv O & M	\$ 8,499.63	\$ -	\$ 8,499.63
711115 Equip Serv Motor Pool	\$ -	\$ 7,000.00	\$ 7,000.00
711117 ESD Fuel Charge	\$ 10,047.39	\$ -	\$ 10,047.39
711119 Prop & Liability	\$ 6,000.00	\$ -	\$ 6,000.00
711210 Travel	\$ 1,388.00	\$ -	\$ 1,388.00
Services and Supplies	\$ 519,379.75	\$ 334,150.00	\$ 853,529.75
Expenditures	\$ 972,005.33	\$ 350,000.00	\$ 1,308,685.33
General Fund Tax Transfer	\$ -23,333.33	\$ -	\$ 894,685.33

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Epidemiology & Public Health Preparedness Division		
Vital Statistics		
	170300	FY10 Total
460511 Birth Death Certs	\$ (215,000.00)	\$ (215,000.00)
Revenue	\$ (215,000.00)	\$ (215,000.00)
701110 Base Salaries	\$ 91,945.83	\$ 91,945.83
701200 Incentive	\$ 1,400.00	\$ 1,400.00
Salaries and Wages	\$ 93,345.83	\$ 93,345.83
705110 Group Insurance	\$ 12,735.34	\$ 12,735.34
705210 Retirement	\$ 20,021.11	\$ 20,021.11
705230 Medicare	\$ 1,353.52	\$ 1,353.52
705320 Workmens Comp	\$ 674.00	\$ 674.00
705330 Unemployment	\$ 130.00	\$ 130.00
Employee Benefits	\$ 34,913.97	\$ 34,913.97
710100 Professional Services	\$ 20,000.00	\$ 20,000.00
710200 Service Contracts	\$ 1,485.00	\$ 1,485.00
710205 Repairs Maint	\$ -	\$ -
710334 Copy Machine Exp	\$ 1,800.00	\$ 1,800.00
710350 Office Supplies	\$ 2,000.00	\$ 2,000.00
710360 Postage	\$ 2,500.00	\$ 2,500.00
710361 Express Courier	\$ -	\$ -
710502 Printing	\$ 7,700.00	\$ 7,700.00
710508 Telephone Land Lines	\$ 600.00	\$ 600.00
710602 Lt Lease-Equip	\$ -	\$ -
711119 Prop & Liability	\$ 694.00	\$ 694.00
711210 Travel	\$ 1,000.00	\$ 1,000.00
Services and Supplies	\$ 37,779.00	\$ 37,779.00
Expenditures	\$ 166,038.80	\$ 166,038.80
General Fund Tax Transfer	\$ (48,961.20)	\$ (48,961.20)

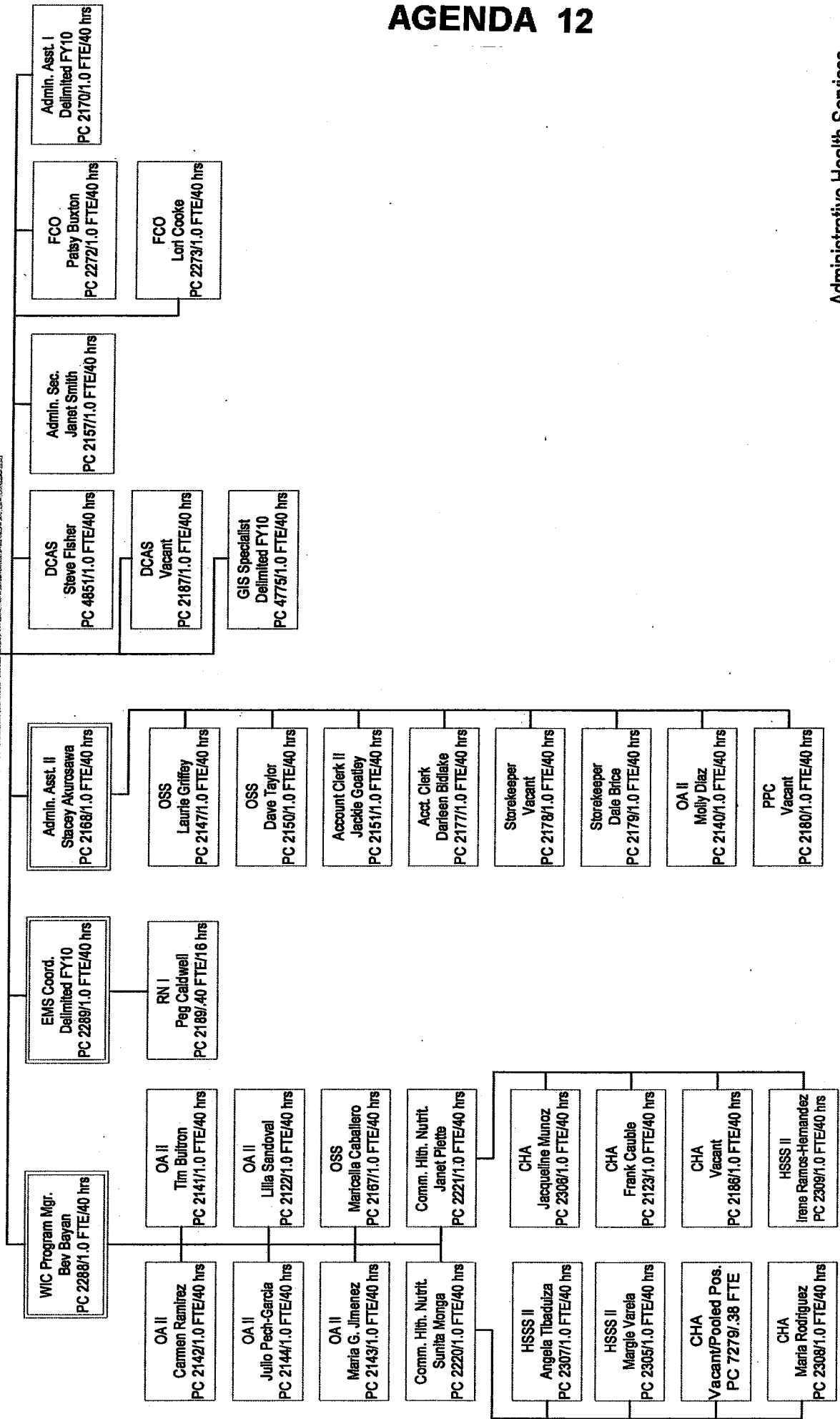
FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Administrative Health Services Division			
Women Infants & Children			
	WIC	Grant	FY10
	174600	10031	Totals
431100 Federal Grants	\$ -	\$ (1,200,096.00)	\$ (1,200,096.00)
Revenue	\$ -	\$ (1,200,096.00)	\$ (1,200,096.00)
701110 Base Salaries	\$ 79,913.36	\$ 719,219.44	\$ 799,132.80
701130 Pooled Positions	\$ -	\$ 68,296.19	\$ 68,296.19
701200 Incentive	\$ 1,745.00	\$ 15,705.00	\$ 17,450.00
701300 Overtime	\$ -	\$ 5,000.00	\$ 5,000.00
701412 Salary Adj	\$ -	\$ -	\$ -
Salaries and Wages	\$ 81,658.36	\$ 808,220.63	\$ 889,878.99
705110 Group Insurance	\$ 15,475.01	\$ 139,279.76	\$ 154,754.77
705320 Retirement	\$ 17,513.86	\$ 157,621.79	\$ 175,135.65
705230 Medicare	\$ 1,043.78	\$ 9,393.53	\$ 10,437.31
705320 Workmens Comp	\$ -	\$ 5,392.00	\$ 5,392.00
705330 Unemployment	\$ -	\$ 1,040.00	\$ 1,040.00
Employee Benefits	\$ 34,032.65	\$ 312,727.08	\$ 346,759.73
710100 Prof Services	\$ -	\$ 800.00	\$ 800.00
710108 MD Consultants	\$ -	\$ -	\$ -
710200 Service Contract	\$ -	\$ -	\$ -
710205 Repairs Maint	\$ -	\$ 500.00	\$ 500.00
710300 Operating Supplies	\$ -	\$ 46,754.29	\$ 46,754.29
710334 Copy Machine Exp	\$ 1,500.00	\$ 4,044.00	\$ 5,544.00
710350 Office Supplies	\$ -	\$ 10,000.00	\$ 10,000.00
710361 Express Courier	\$ -	\$ -	\$ -
710500 Other Expenses	\$ -	\$ 1,000.00	\$ 1,000.00
710502 Printing	\$ -	\$ 8,000.00	\$ 8,000.00
710503 Licenses & Permits	\$ -	\$ 500.00	\$ 500.00
710508 Telephone Land Lines	\$ 7,500.00	\$ -	\$ 7,500.00
710509 Seminars Mtgs	\$ -	\$ 1,000.00	\$ 1,000.00
710512 Auto Exp	\$ -	\$ 3,000.00	\$ 3,000.00
710529 Dues	\$ -	\$ 50.00	\$ 50.00
710600 LT Lease-Office	\$ 80,296.00	\$ -	\$ 80,296.00
711119 Prop & Liability	\$ 5,552.00	\$ -	\$ 5,552.00
711210 Travel	\$ -	\$ 3,000.00	\$ 3,000.00
711504 Equip non-Capital	\$ -	\$ 500.00	\$ 500.00
Services and Supplies	\$ 94,848.00	\$ 79,148.29	\$ 173,996.29
Expenditures	\$ 210,539.01	\$ 1,200,096.00	\$ 1,410,635.01
General Fund Tax Transfer	\$ 210,539.01	\$ -	\$ 210,539.01

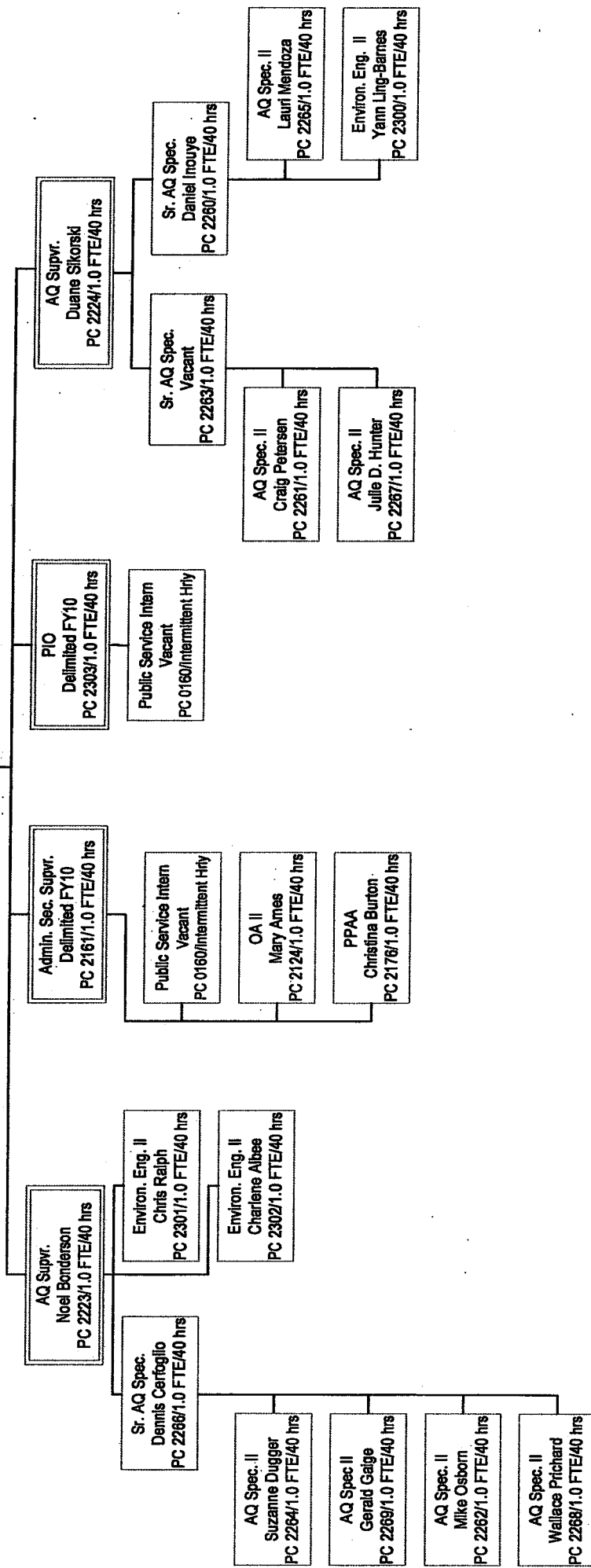
DB04 8/27/09

AGENDA 12

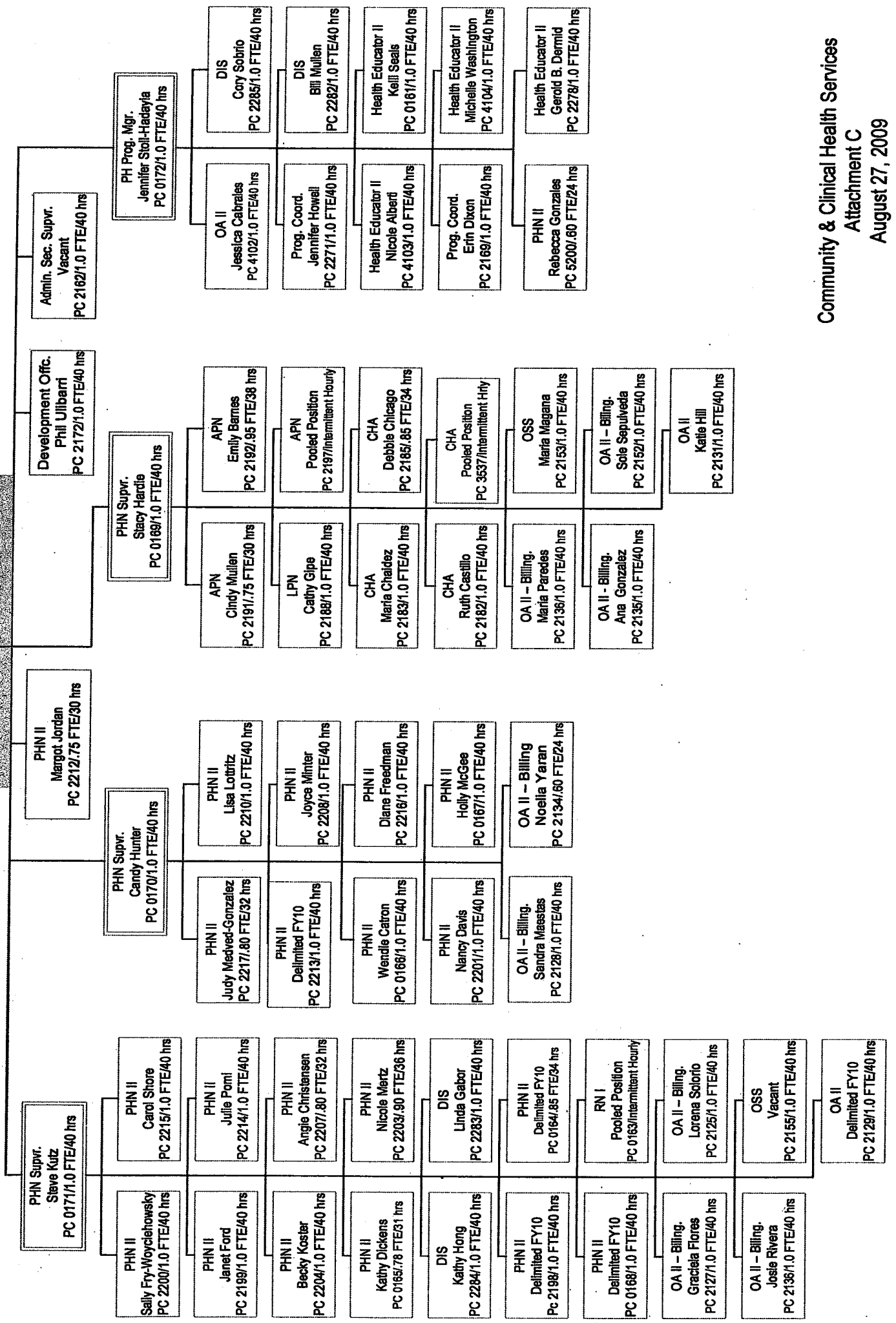
Administrative Health Services Officer
Eileen Coulombe
PC 2279/1.0 FTE/40 hrs



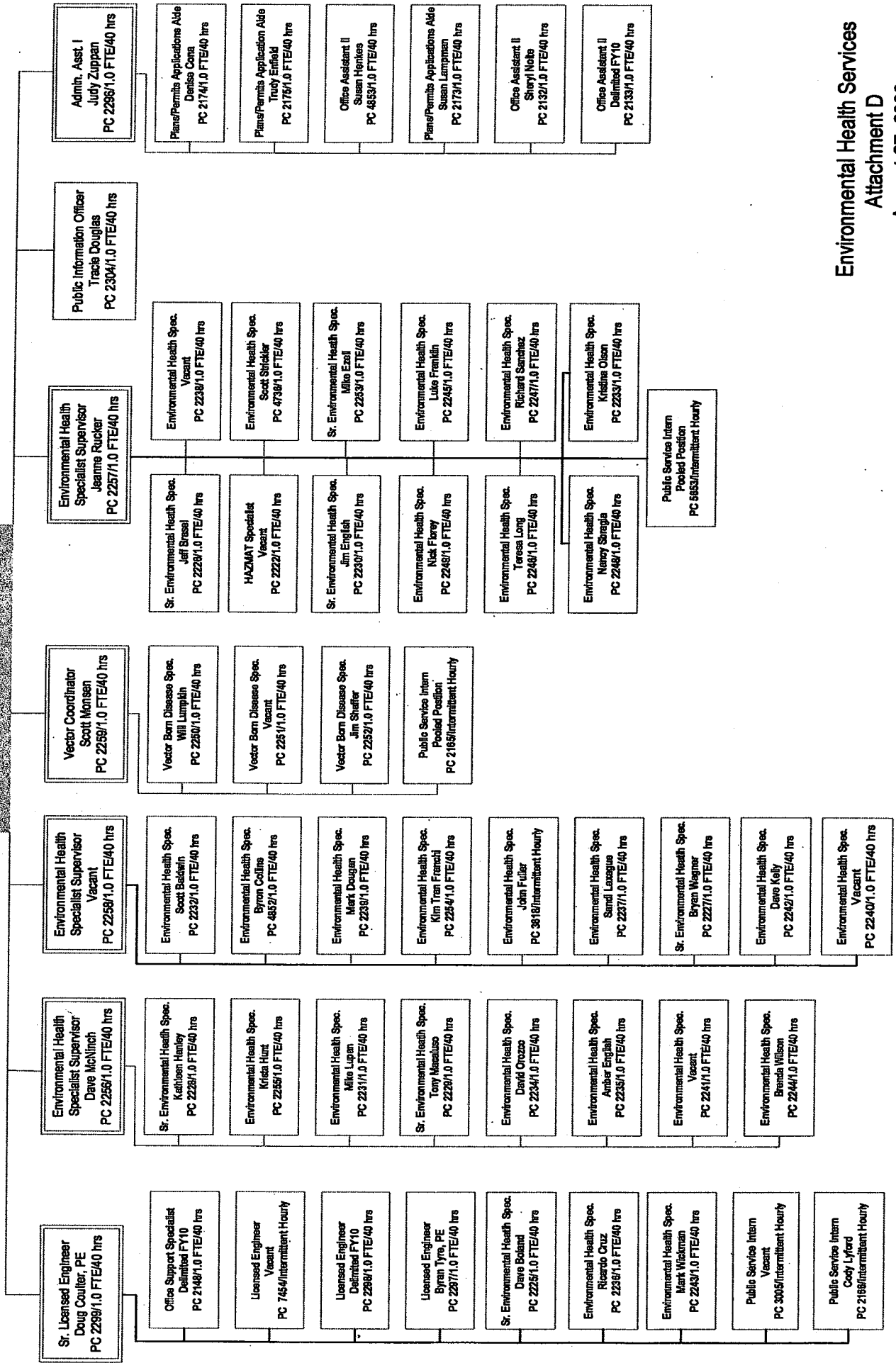
Division Director – AQM
Andrew Goodfich
 PC 2270/1.0 FTE/40 hrs

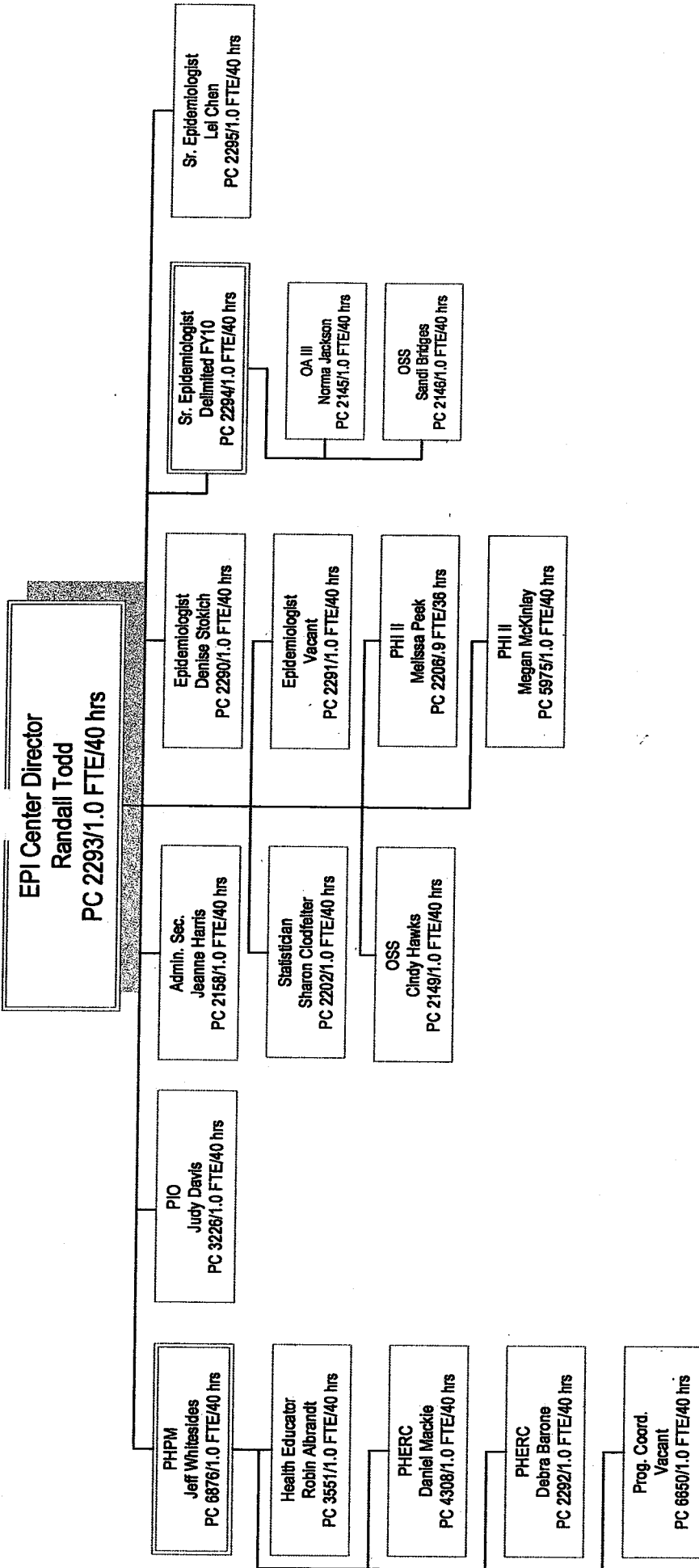


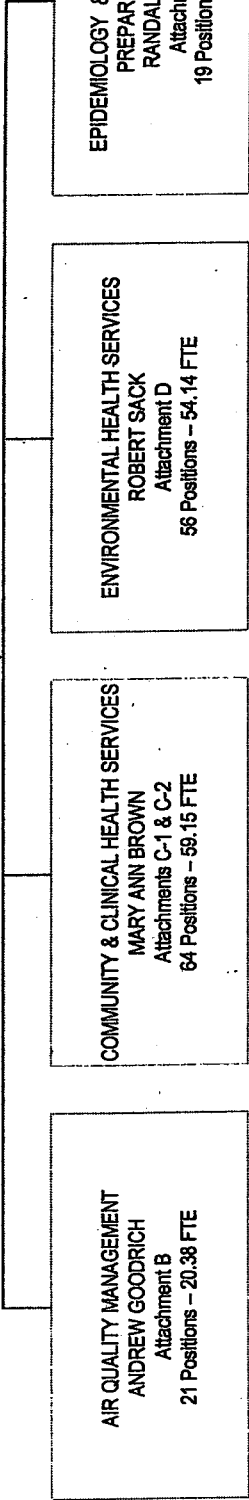
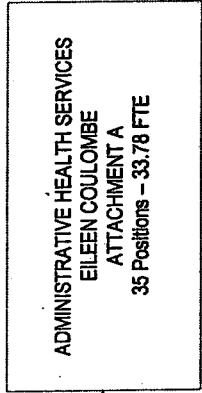
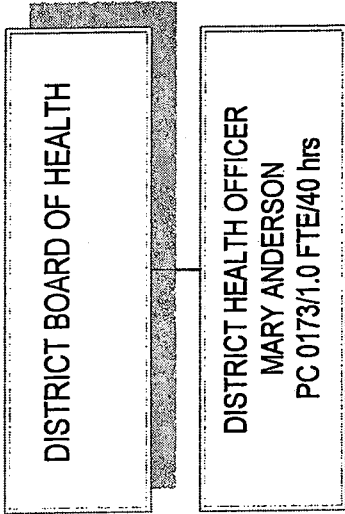
Division Director - CCHS
Mary Ann Brown
PC 2281/1.0 FTE/40 hrs



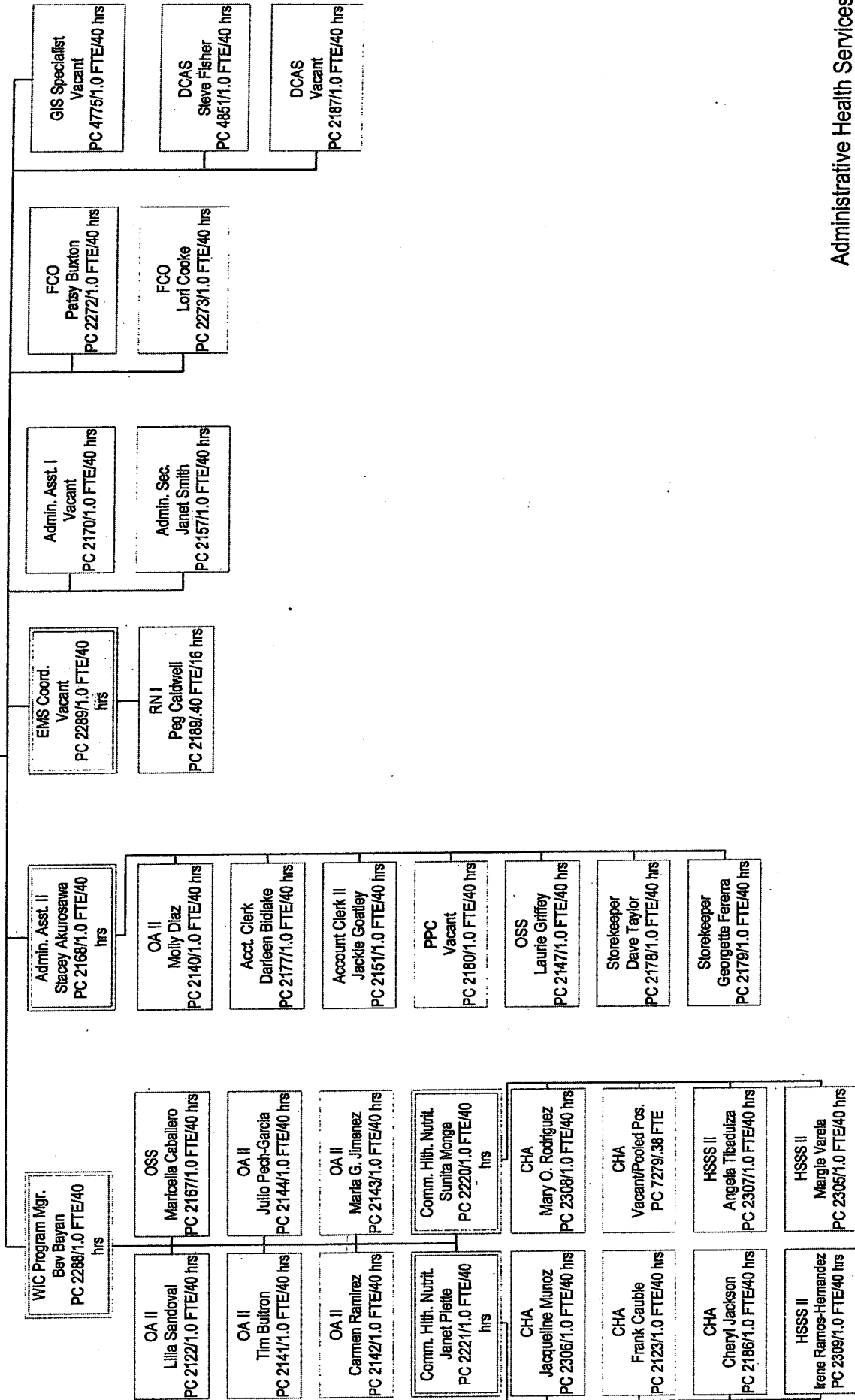
Division Director - EHS
Robert Sack
 PC 2280/1.0 FTE/40 hrs



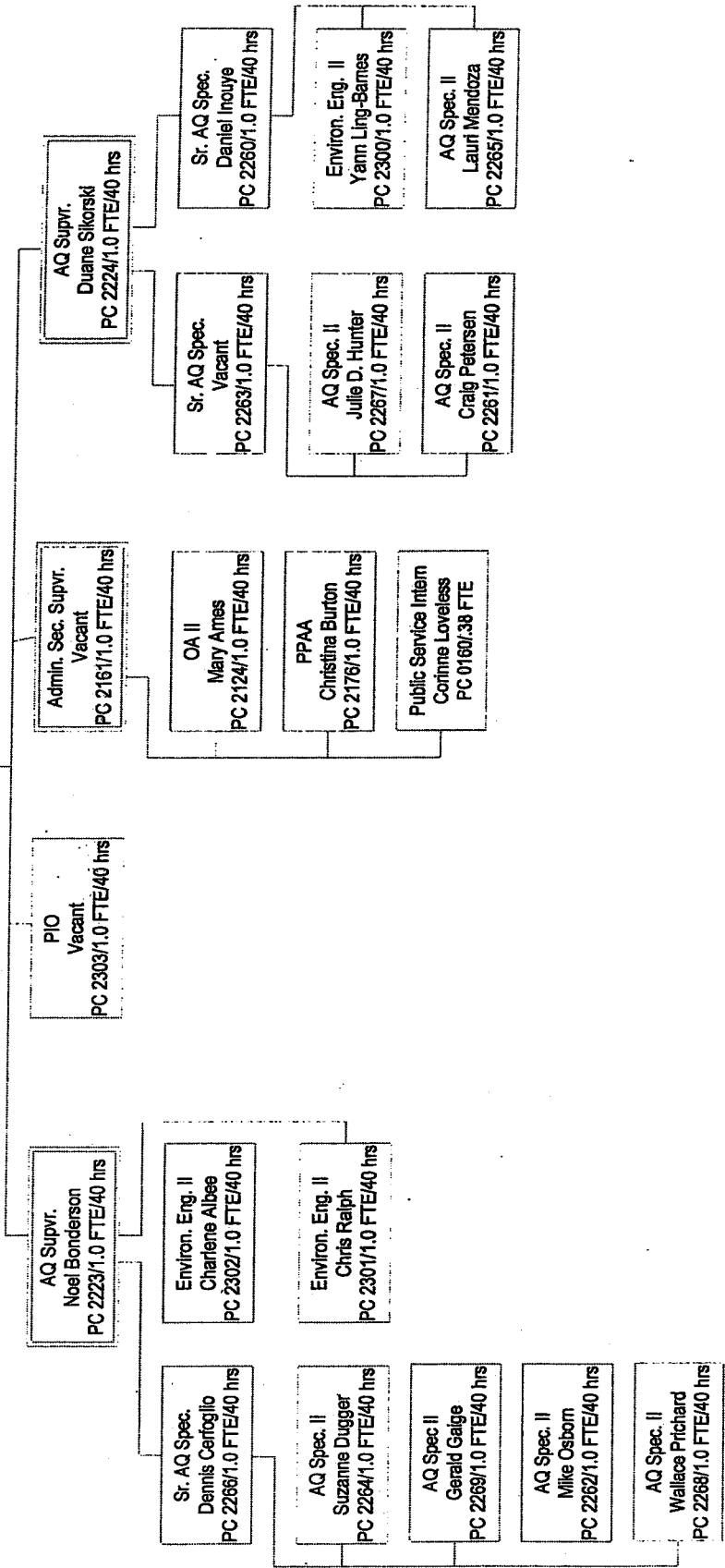




Administrative Health Services Officer
Eileen Coulombe
PC 2279/1.0 FTE/40 hrs



Division Director – AQM
 Andrew Goodrich
 PC 2270/1.0 FTE/40 hrs



Division Director – CCHS
Mary Ann Brown
PC 2281/1.0 FTE/40 hrs

PHN Supvr.
Stacy Hardie
PC 0169/1.0 FTE/40 hrs

APN
Emily Barnes
PC 2192/95 FTE/76 hrs

APN
Incy Mullen
PC 1/75 FTE/60 hrs

LPN
Cathy Gipe
PC 2188/1.0 FTE/40 hrs

CHA
Ruth Castillo
PC 2182/1.0 FTE/40 hrs

CHA
Pooled Position
PC 3537/38 FTE/30.4 hrs

APN
Katie Tanner
PC 2194/85 FTE/68 hrs

APN
Pooled Position
PC 2197/38 FTE/30.4 hrs

CHA
Marie Chaldez
PC 2183/1.0 FTE/40 hrs

CHA
Debbie Chicago
PC 2185/85 FTE/68 hrs

PHN Supvr.
Candy Hunter
PC 0170/1.0 FTE/40 hrs

PHN II
Wendie Catron
PC 0166/1.0 FTE/40 hrs

PHN II
Diane Freedman
PC 2216/1.0 FTE/40 hrs

PHN II
Linda Gabor
PC 2213/1.0 FTE/40 hrs

PHN II
Rebecca Gonzales
PC 5200/60 FTE/48 hrs

PHN II
Lisa Lotritz
PC 2210/1.0 FTE/40 hrs

PHN II
Holly McGee
PC 0167/1.0 FTE/40 hrs

PHN II
Vacant
PC 2211/60 FTE/48 hrs

PHN II
Margot Jordan
PC 2212/75 FTE/60 hrs

PHN II
Nicole Mertz
PC 2203/90 FTE/72 hrs

PHN II
Joyce Minter
PC 2208/1.0 FTE/40 hrs

PHN II
Julie Pomi
PC 2214/1.0 FTE/40 hrs

PHN II
Nancy Davis
PC 2201/1.0 FTE/40 hrs

PHN II
Judy Medved-Gonzalez
PC 2217/80 FTE/64 hrs

PHN II
Vacant
PC 2205/1.0 FTE/40 hrs

PHN Supvr.
Steve Kutz
PC 0171/1.0 FTE/40 hrs

PHN II
Angie Christensen
PC 2207/80 FTE/64 hrs

PHN II
Vacant
PC 0162/525 FTE/42 hrs

PHN II
Joni Flickinger
PC 0168/1.0 FTE/40 hrs

PHN II
Janet Ford
PC 2199/1.0 FTE/40 hrs

DIS
Kathy Hong
PC 2284/1.0 FTE/40 hrs

PH Prog. Mgr.
Jennifer Stoll-Hadayla
PC 0172/1.0 FTE/40 hrs

Health Educator
Nicole Alford
PC 4103/1.0 FTE/40 hrs

OA II
Jessica Cabrales
PC 4102/93 FTE/4.4 hrs

Health Educator
Gerold B. Dermid
PC 2278/1.0 FTE/40 hrs

Prog. Coord.
Erin Dixon
PC 2169/1.0 FTE/40 hrs

PHN II
Becky Koster
PC 2204/1.0 FTE/40 hrs

PHN II
Kathy Dickens
PC 0165/78 FTE/62.4 hrs

PHN II
Carol Shore
PC 2215/1.0 FTE/40 hrs

PHN II
Sally Fry-Woychowski
PC 2200/1.0 FTE/40 hrs

DIS
Gloria Laxamana
PC 2283/1.0 FTE/40 hrs

RN I
Pooled Position
PC 0163/38 FTE/30.4 hrs

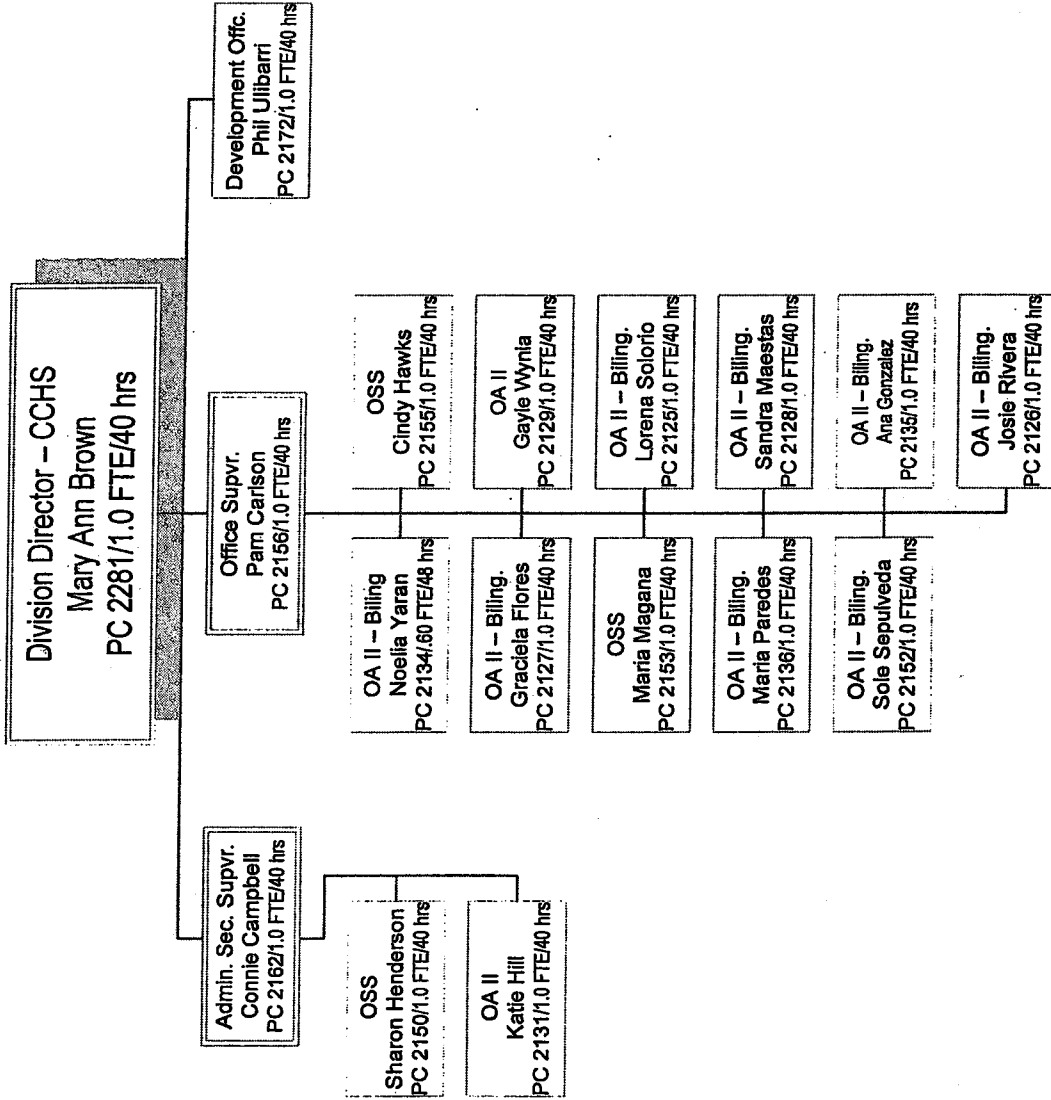
Health Educator
Keil Seals
PC 0161/1.0 FTE/40 hrs

DIS
Bill Mullen
PC 2282/1.0 FTE/40 hrs

DIS
Cory Sobrio
PC 2285/1.0 FTE/40 hrs

Health Educator
Michelle Washington
PC 4104/1.0 FTE/40 hrs

Prog. Coord.
Jennifer Howell
PC 2271/1.0 FTE/40 hrs



**Division Director - EHS
Robert Sack
PC 2280/1.0 FTE/40 hrs**

**Sr. Licensed Engineer
Doug Coulter, PE
PC 2299/1.0 FTE/40 hrs**

Sr. Environmental Health Spec.
Dave Boland
PC 2258/1.0 FTE/40 hrs

Office Support Specialist
Joan Carnahan
PC 2148/1.0 FTE/40 hrs

Environmental Health Spec.
Ricardo Cruz
PC 2238/1.0 FTE/40 hrs

Licensed Engineer
Vacant
PC 2298/1.0 FTE/40 hrs

Licensed Engineer
Byran Tyne, PE
PC 2297/1.0 FTE/40 hrs

Environmental Health Spec.
Mark Wickman
PC 2243/1.0 FTE/40 hrs

Public Service Intern
Vacant
PC 3008/38 FTE/30.4hrs

Public Service Intern
Pooled Position
PC 2188/1.0 FTE/40 hrs

**Environmental Health
Specialist Supervisor
Dave McNinch
PC 2256/1.0 FTE/40 hrs**

Sr. Environmental Health Spec.
Kathleen Hamley
PC 2228/1.0 FTE/40 hrs

Environmental Health Spec.
Krista Hunt
PC 2255/1.0 FTE/40 hrs

Environmental Health Spec.
Mikka Lujan
PC 2231/1.0 FTE/40 hrs

Sr. Environmental Health Spec.
Food Plans
Tony Macaluso
PC 2228/1.0 FTE/40 hrs

Environmental Health Spec.
David Orozco
PC 2234/1.0 FTE/40 hrs

Environmental Health Spec.
Anber English
PC 2235/1.0 FTE/40 hrs

Environmental Health Spec.
Judith Seum
PC 2241/1.0 FTE/40 hrs

Environmental Health Spec.
Brenda Wilson
PC 2244/1.0 FTE/40 hrs

**Environmental Health
Specialist Supervisor
Vacant
PC 2258/1.0 FTE/40 hrs**

Environmental Health Spec.
Scott Baldwin
PC 2232/1.0 FTE/40 hrs

Environmental Health Spec.
Byron Collins
PC 4852/1.0 FTE/40 hrs

Environmental Health Spec.
Mark Dougan
PC 2238/1.0 FTE/40 hrs

Environmental Health Spec.
Kim Tran Franchi
PC 2254/1.0 FTE/40 hrs

Environmental Health Spec.
On Cell
John Fuller
PC 3818/38 FTE/30.4 hrs

Environmental Health Spec.
Sandi Lavague
PC 2237/1.0 FTE/40 hrs

Sr. Environmental Health Spec.
Bryan Wagner
PC 2227/1.0 FTE/40 hrs

Environmental Health Spec.
Dave Kelly
PC 2242/1.0 FTE/40 hrs

**Vector Coordinator
Scott Monsen
PC 2259/1.0 FTE/40 hrs**

Vector Born Disease Spec.
Will Lumpkin
PC 2250/1.0 FTE/40 hrs

Vector Born Disease Spec.
Vacant
PC 2257/1.0 FTE/40 hrs

Vector Born Disease Spec.
Jim Stauffer
PC 2252/1.0 FTE/40 hrs

Public Service Intern
Pooled Position
PC 2165/1.0 FTE/40 hrs

**Environmental Health
Specialist Supervisor
Jeanne Rucker
PC 2257/1.0 FTE/40 hrs**

Sr. Environmental Health Spec.
Jeff Brasel
PC 2228/1.0 FTE/40 hrs

HAZMAT Specialist
Paul Donald
PC 2222/1.0 FTE/40 hrs

Sr. Environmental Health Spec.
Jim English
PC 2230/1.0 FTE/40 hrs

Environmental Health Spec.
Nick Flory
PC 2249/1.0 FTE/40 hrs

Environmental Health Spec.
Teresa Long
PC 2248/1.0 FTE/40 hrs

Environmental Health Spec.
Vacant
PC 2240/1.0 FTE/40 hrs

Public Service Intern
Pooled Position
PC 5553/38 FTE/30.4 hrs

**Environmental Health
Specialist Supervisor
Jeanne Rucker
PC 2257/1.0 FTE/40 hrs**

Environmental Health Spec.
Vacant
PC 2238/1.0 FTE/40 hrs

Environmental Health Spec.
Scott Stricker
PC 4738/1.0 FTE/40 hrs

Sr. Environmental Health Spec.
Mike Ezell
PC 2253/1.0 FTE/40 hrs

Environmental Health Spec.
Luke Franklin
PC 2245/1.0 FTE/40 hrs

Environmental Health Spec.
Richard Semczak
PC 2247/1.0 FTE/40 hrs

Environmental Health Spec.
Nancy Strangia
PC 2248/1.0 FTE/40 hrs

Environmental Health Spec.
Krisina Olson
PC 2233/1.0 FTE/40 hrs

**Public Information Officer
Tracie Douglas
PC 2304/1.0 FTE/40 hrs**

**Admin. Asst. I
Judy Zuppan
PC 2296/1.0 FTE/40 hrs**

Plans/Permits Applications Aide
Denise Coon
PC 2174/1.0 FTE/40 hrs

Plans/Permits Application Aide
Trudy Einfield
PC 2175/1.0 FTE/40 hrs

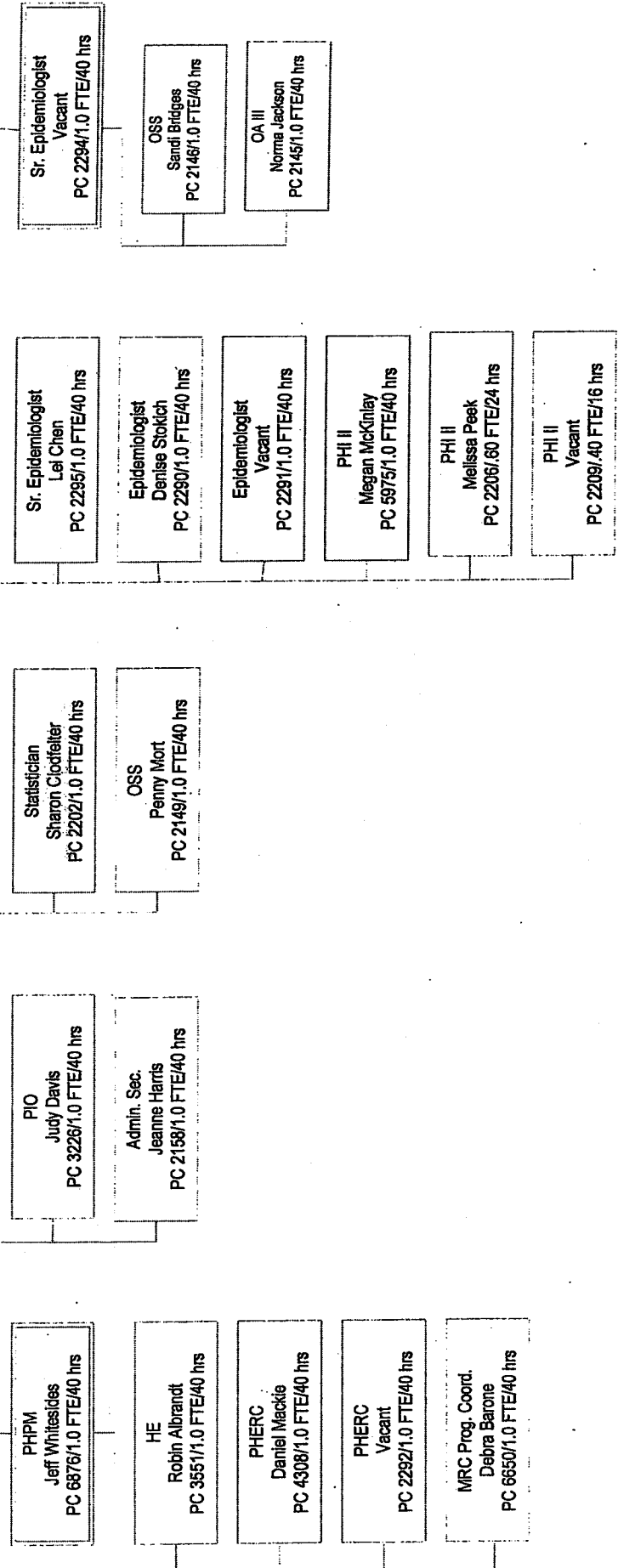
Office Assistant II
Susan Henkes
PC 4853/1.0 FTE/40 hrs

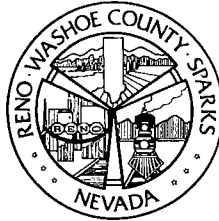
Plans/Permits Applications Aide
Susan Lampman
PC 2173/1.0 FTE/40 hrs

Office Assistant II
Sheryl Nolis
PC 2132/1.0 FTE/40 hrs

Office Assistant II
Carolyn Ramfist
PC 2133/1.0 FTE/40 hrs

**EPI Center Director
Randall Todd
PC 2293/1.0 FTE/40 hrs**





DISTRICT HEALTH DEPARTMENT

August 11, 2009

TO: District Board of Health Members

SUBJECT: Dates of National Association Conferences – 2010

For the Board's information, listed below are the dates and locations of the various national conferences during 2010, which Board members may wish to attend:

American College of Preventive Medicine (ACPM) ~ February 17 – 20 ~ Crystal City, VA
National Association of County & City Health Officials (NACCHO) – July 14 – 16 ~ Memphis, TN
National Association of Local Boards of Health (NALBOH) ~ August 5 – 7 ~ Omaha, NE
American Public Health Association (APHA) ~ November 16 – 19 ~ San Francisco, CA

Should the Board require information regarding other national conferences, please contact Janet Smith at 328-2427 for assistance.

Respectfully,

A handwritten signature in black ink, appearing to read "M. A. Anderson", with a long horizontal flourish extending to the right.

M. A. Anderson, MD, MPH, FACPM
District Health Officer

/jbs

DBOH AGENDA ITEM # 16.

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DISTRICT HEALTH DEPARTMENT

August 19, 2009

MEMORANDUM

To: Members, Washoe County District Board of Health

From: Randall L. Todd, DrPH
Epidemiology and Public Health Preparedness (EPHP) Director

Subject: Report to the District Board of Health, August 2009

Communicable Disease –

Influenza – For the week ending August 15 (week 32) four of six participating sentinel healthcare providers in Washoe County saw 44 patients presenting with influenza-like-illness (ILI) out of 2,185 total patients. This yields a total ILI percentage of 2%. By comparison the ILI percentage for U.S. sentinel providers during the previous week (31) was 1.1%. The national baseline is 2.4%.

Positive laboratory reports for influenza have continued to be overwhelmingly of the novel H1N1 subtype. There have been 333 confirmed or probable cases in Washoe County to date. There have been no H1N1-related deaths reported in Washoe County thus far. Clusters of novel H1N1 infection have been reported at the Washoe County Jail and at the Sierra Nevada Job Corps.

Gastrointestinal Illness – Communicable disease and environmental health staff have investigated GI illness outbreaks associated with fire fighters at the Trailer I fire, a wedding party at the Peppermill, and a local daycare facility.

Public Health Preparedness (PHP) Activities –

H1N1 - Public Health Preparedness continues to plan for the mass dispensing of H1N1 vaccine this fall. An Incident Command has been established for planning purposes. A full scale exercise has been scheduled for October 17. This will include two dispensing sites. One of these will be a traditional walk-

through Point of Dispensing (POD). The other will be a drive-through POD. This exercise will dispense seasonal flu vaccine. Seasonal flu vaccine will not provide protection against the novel H1N1 virus. Protection against novel H1N1 must be obtained from a new vaccine that will hopefully become available in mid October.

The CDC's Advisory Committee on Immunization Practices (ACIP) has issued recommendations for the priority target groups to receive the novel H1N1 vaccine. These target groups are:

- Pregnant women;
- Household contacts and caregivers for children younger than 6 months of age;
- Healthcare and emergency medical services personnel;
- All people from 6 months through 24 years of age;
- Persons aged 25 through 64 years who have conditions associated with higher risk of medical complications from influenza.

The current plan to address these targets will be to organize PODs for those groups that are defined by age and/or occupation. Public information initiatives will direct individuals who are in risk-defined target groups to seek vaccine from their healthcare provider. Funding to support costs associated with these initiatives has been requested through a Public Health Emergency Response (PHER) grant.

A community leader's forum on novel H1N1 influenza was conducted on July 30. Washoe County Commissioner and District Board of Health member Kitty Jung provided the welcome and introduction. Staff speakers were Public Information Officer Judy Davis, Emergency Response Coordinator Dan Mackie, and EPHP Division Director Randall Todd. There were approximately 65 community leaders in attendance representing various sectors including healthcare, education, transportation, communication, and others. This was followed by a short interview of Dr. Todd on KUNR the following day and a 1 hour call-in interview on Nevada Newslines on August 7. Dr. Todd has also presented novel H1N1 information to a statewide meeting of School Superintendants on August 6, to Hispanic Radio Inovación on August 11, and to the Washoe County School Administrators retreat on August 14.

Additional H1N1 updates have been provided to:

- Sparks City Council – June 22
- Saint Mary's Regional Medical Center – June 23
- Washoe County Emergency Planning Council – June 25
- Reno Gazette Journal Editorial Board – July 29
- Regional Transportation Commission – August 12

The Public Health Preparedness Program hosted a National Association of County and City Health Officials (NACCHO)-sponsored webinar on "School-located Influenza Vaccination for Local Health Departments on August 11. Invitations were extended to the Washoe County and Carson City School Districts as well as local public health and emergency managers.

Hand washing and cover your cough resources have been provided to St. Albert's and the Academy for Career Education Schools as part of their disease prevention campaigns. Education materials on

emergency preparedness and hand washing were also provided to Indian Health Services and the Grand Sierra Resort as part of their wellness fairs.

Conferences and Workshops – The Public Information Officer attended a workshop on Delivering Social Media Results. Several Health District staff attended communications/media training with Kelly Burke. The PHP team attended a demonstration of Connected-ED, an electronic information distribution system currently used by the Washoe County School District. The system allows for telephone notification to the parents of approximately 68,000 students within 45 minutes and can be used for emergency as well as routine communications.



Randall L. Todd, DrPH, Epidemiology and Public Health Preparedness Director



DISTRICT HEALTH DEPARTMENT

August 18, 2009

TO: District Board of Health Members

FROM: Mary-Ann Brown, R.N., M.S.N.
Division Director, Community and Clinical Health Services

SUBJECT: Report for August 2009 District Board of Health Meeting
CCHS Representation in Community
Washoe County Childhood Obesity Forum
"Green" Clinic Operations

CCHS Representation in Community

With the decrease in resources and a focus on direct services to clients, Public Health Nurses (PHNs) and other CCHS staff are no longer able to represent the Health District on various boards, coalitions, and community initiatives. To fulfill the need for public health to remain engaged in the community, the CCHS Management Team has prioritized their involvement and now represents the Health District on many important boards and committees locally and statewide. Examples of representation by CCHS leadership are noted below.

Mary-Ann Brown, Division Director

- **Access to Healthcare Network (AHN):** Board Member. AHN is a non-profit medical discount plan that provides primary and specialty care, including dental care and prescriptions, through a consortium of 400+ local health care providers.
- **Governors' Workforce Investment Board (GWIB):** Governor-Appointed Member. The GWIB was established by the Workforce Investment Act and assists the Governor in developing strategies to grow Nevada's workforce. Among other duties, the Board develops the State Plan for Workforce Development, designates local workforce investment areas, and creates allocation formulas for adult and youth employment and training activities.
- **Human Services Network (HSN):** Board Member. HSN's mission is to support and sustain quality human services in the Truckee Meadows by advocating, networking, providing professional development, outreach and information clearing for the region's human services community.
- **Juvenile Detention Alternative Initiative (JDAI):** Stakeholder Member. JDAI is a national initiative funded by the Annie E. Casey Foundation. Its goal is to transform juvenile detention into an entry point for youth development.

- **Washoe County Child Death Review Team: Member.** The Review Team conducts examinations of child deaths using official medical examiner reports. It is multidisciplinary and includes law enforcement, public health, and child welfare. Its purpose is to make recommendations for improvements in laws, protocols, and training to prevent future child deaths.

Stacy Hardie – PHN Supervisor, Family Planning

- **Maternal Child Health Coalition: Vice President.** The Coalition is a voluntary, non-profit group of individuals and public and private agencies that advocate for perinatal and maternal and child health services by promoting: equal access to health care, inter-agency networking and collaboration, public awareness, and prevention of adverse health outcomes. They work on data collection and analysis, policy development, advocacy, and legislative education.
- **Family Planning Advisory Board: Information and Education Review Committee Lead.** Leader of a team of local community-based organizations that provide services to common populations. The group provides general outreach recommendations and reviews and approves all family planning clinical educational materials.

Candy Hunter – PHN Supervisor, Visiting Nursing and Tuberculosis

- **“CAN Prevent” Conference Committee: Lifetime Member.** Provides technical assistance for continuing education credit for the annual “CAN Prevent” Child Abuse and Neglect Conference, a leading provider of CEUs for CCHS nurses.
- **Childhood Lead Poisoning Prevention Project: Liaison with Southern Nevada Health District** for childhood lead poisoning prevention programs.
- **Home Visitation Network: Coordinator.** The Network links home visitation programs such as Early Head Start, Child Protective Services, and Appleseeds.
- **Nevada Children’s Justice Task Force: Chair (2007 – 2009),** currently represents health issues. Assists in developing, establishing, and operating programs designed to improve the handling of child abuse and neglect cases.
- **Nevada Maternal Child Health (MCH) Advisory Board: Governor-Appointed Member.** The MCH Advisory Board sets policy for maternal and child health issues, makes funding decisions for the Title V Block Grant funds, educates legislators on key issues, and writes policy briefs for prioritized issues.
- **United Way Community Impact Committee: Member.** The committee reviews data for performance measurement, approves policy and program issues for funding member agencies, and approves staff recommendations for funding allocations and partnership status.

Steve Kutz – PHN Supervisor, Immunization and STD Program

- **Northern Nevada Immunization Coalition (NNIC): Chair and Legislative Advocacy Group Member.** NNIC is a voluntary, non-profit group of individuals and public and private agencies promoting immunizations across the life span.

Jennifer Stoll Hadayia – Public Health Program Manager

- **High Sierra Area Health Education Center (AHEC):** Board Member. High Sierra AHEC is one of four federally-designated AHECs in Nevada. Its mission is to improve health care access in northwestern Nevada by recruiting, training, and retaining a health professions workforce including health educators.
- **Nevada Public Health Association (NPHA):** President-Elect and Conference Planning Committee Chair. NPHA is the state affiliate of the American Public Health Association (APHA). It hosts an annual statewide conference, publishes an online journal, and provides educational scholarships and awards.
- **Nevada Diabetes Council (NDC):** Vice Chair. The NDC is the state's collaborative of diabetes prevention and control stakeholders and advises the state's Diabetes Prevention and Control Program.
- **Nevada Cancer Council (NVCC):** Marketing Committee Chair. The NVCC is the state's collaborative of cancer control stakeholders. It sponsors the Cancer Control Summit and advises the state's Comprehensive Cancer Program.
- **Safe Kids Washoe County:** Vice President (2007 – 2009). Safe Kids Washoe County is the local coalition affiliate of Safe Kids Worldwide. Its mission is to prevent deaths and injuries to children under 14, with an emphasis on motor vehicle crashes, pedestrian injuries, and recreational injuries.
- **State AIDS Task Force:** Proxy for the District Health Officer. The Task Force is a subcommittee of the State Board of Health. Its purpose is to articulate community needs, identify "best practices," and make policy recommendations regarding HIV/AIDS care and prevention in Nevada.

Washoe County Childhood Obesity Forum

The CCHS Chronic Disease Prevention Program is sponsoring the region's first forum on childhood overweight and obesity on September 10, 2009 at the Boys & Girls of Truckee Meadows. The second year of Body Mass Index (BMI) data collected with Washoe County school children will be released at the event, and local experts will present on the individual, social, and environmental determinants of childhood obesity in Washoe County, such as psychosocial development, food marketing, and food access. The goal of the forum is to identify individual- and community-level solutions to childhood overweight and obesity in Washoe County. Pre/post data is being collected to measure change in childhood obesity interventions launched as a result of the event.

The forum is being presented by the Nevada State Health Officer, Washoe County Manager, Washoe County District Board of Health, Washoe County Chronic Disease Coalition, Get Healthy Washoe, and the Boys & Girls of Truckee Meadows. Light refreshments have been generously donated by Amerigroup. Please see the flyer attached to this report for additional information about the event.

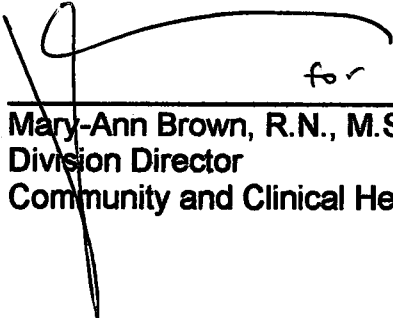
"Green" Clinic Operations

To increase staff efficiency and decrease environmental impact, CCHS has launched extensive "green" or "paperless" business operations in several program areas. Technologies such as scanning, Outlook scheduling, and Insight and Electronic Medical Records (EMR) have made these efforts possible. The Health District is on the cutting-edge of the use of technology in public health; according to a recent report from

the National Association of City and County Health Officials (NACCHO), only 19% of local health departments nationwide have implemented EMR. Specific examples of CCHS's "paperless" clinic efforts are noted below.

- **Family Planning Clinic** was the leader in these efforts, and client charts are 100% paperless as a result of full EMR implementation and chart scanning.
- **Home Visiting Nurse Program** uses Pocket PCs in place of paper day timers to schedule home visits.
- **Immunization Program** has had an electronic database for over 20 years that maintains client immunization records. Currently, the program also utilizes the state immunization registry, WebIZ.
- **Sexual Health Program** has adopted "paperless" HIV/STD testing data collection. Currently, all HIV/STD testing data are collected electronically in Insight and then sent to the statewide testing database via an electronic upload. The STD Clinic also scans all new client charts into EMR, and, by the end of the year, will be capturing client signatures electronically.
- **TB Clinic** is on schedule for full implementation of EMR by January 1, 2010. In addition, daily videophone Directly Observed Therapy (DOT) is used to reduce fuel and vehicle costs. Staff also uses Access/Excel pivot tables for electronic epidemiological data analysis.

CCHS has adopted several additional Division-wide "green" business practices, such as replacing copying with scanning, discontinuing paper leave slips, using lap-tops for internal team meetings, and file-saving on shared drives for communal access to documents. Several staff have also been equipped with lap-tops and docking stations in place of desktops to aid in "real-time" data entry during off-site work assignments.



for

Mary-Ann Brown, R.N., M.S.N.
Division Director
Community and Clinical Health Services

*The Washoe County Manager, Washoe County Health District,
Washoe County Chronic Disease Coalition, Get Healthy Washoe, and the Boys & Girls Club of
Truckee Meadows invite you to attend:*

The Washoe County Childhood Obesity Forum

THURSDAY, SEPTEMBER 10, 2009

8:30 AM – 12:00 PM

BOYS & GIRLS CLUB OF TRUCKEE MEADOWS, EDUCATION ROOM
2680 EAST NINTH STREET, RENO

Topics will include:

- Release of Youth BMI Data for Washoe County & Nevada
- Maintaining Healthy Weight in Childhood: Biology, Development, and Psychology
- How “Big Food” Markets to Children
- Food Insufficiency in Washoe County: Its Role in Unhealthy Weight
- Mapping Environmental Influences on Obesity Using GIS Technology
- New CDC Recommendations for Preventing Obesity in Children and Youth
- Mobilizing to Curb Obesity in Washoe County

*To register for the Forum, please visit www.gethealthywashoe.com
Deadline for registration is Tuesday, September 8, 2009*

*Program approved for approximately 3 hours of CEU credit
To receive CEU credits, a registration form must be submitted*

Light refreshments will be provided by:



Forum brought to you by:



Questions about the Forum? Please contact Kelli Seals at (775) 325-8244





Washoe County Health District

ENVIRONMENTAL HEALTH SERVICES DIVISION

DATE: August 18, 2009
TO: District Board of Health Members
FROM: Robert Sack, Division Director of E.H.S.
SUBJECT: Division Director's Report – Environmental Health Services
AGENDA ITEM NO. 18.C.

VECTOR-BORNE DISEASES PREVENTION PROGRAM

The Washoe County Health District Vector-Borne Diseases Prevention Program has been collecting large numbers of adult mosquitoes in traps that are set throughout the Truckee Meadows and populated areas of the County. These mosquito pools have been tested and at this time, none have been positive for West Nile Virus (WNV).

POOL PROGRAM

One student intern started work mid-July, handling seasonal and annual pool inspections.

HAND WASHING OUTREACH

Staff will be participating at the Boys and Girls Club Day for Kids on Saturday, September 12th, from 11 to 2 PM in Ardmore Park. Along with several other fun activities and food, children and their parents will be taught good hand washing technique through fun exercises. We are also looking for other opportunities for hand washing outreach during September.

Robert O. Sack
Division Director
Environmental Health Services Division
ROS:sn



WASHOE COUNTY HEALTH DISTRICT

AIR QUALITY MANAGEMENT DIVISION



Public Health
Prevent. Promote. Protect.

Date: August 27, 2009
To: District Board of Health
From: Andrew Goodrich, Director, Air Quality Management
Re: Monthly Report for Air Quality Management
Agenda Item: 18.D.

The enclosed Air Quality Management Division Report is for the month of July 2009 and includes the following sections:

- Air Quality**
- Monitoring Activity**
- Planning Activity**
- Permitting Activity**
- Compliance/Inspection Activity**
- Enforcement Activity**

DBOH AGENDA ITEM # 18.D.

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Director's Report

July 2009

After near-record precipitation in June and 100 degree plus days in July, the lands surrounding the Truckee Meadows are primed for wildfires. As we have all seen, even small wildfires generate tremendous amounts of smoke, but does that mean we will be reporting unhealthy air quality every time there's a wildfire? Not necessarily so...let me explain.

First, heat from the fire can lift the smoke high into the atmosphere creating widespread hazy skies, but having little impact on the air in the space where we work, live, and play. Secondly, the Division has a limited number of monitoring locations that are strategically placed to represent large populated areas of the county. Smoke from wildfires can be very distinct in its path and may only affect small, specific areas. Third, we only measure those pollutants that the EPA commonly expects to find in urban areas. Wildfires certainly elevate particulate matter levels and can increase regional ozone counts, two pollutants we do measure; however there is a whole myriad of pollutants in smoke for which we do not measure.

Let's all hope for clear skies and that wildfires will be kept to a minimum the rest of this year.

Andy Goodrich, Director

AIR QUALITY COMPARISON FOR JULY

Air Quality Index Range	# OF DAYS JULY 2009	# OF DAYS JULY 2008
GOOD 0 to 50	28	2
MODERATE 51 to 100	3	19
UNHEALTHY FOR SENSITIVE GROUPS 101 to 150	0	7
UNHEALTHY 151 to 200	0	3
VERY UNHEALTHY 201 to 300	0	0
TOTAL	31	31

HIGHEST AQI NUMBER BY POLLUTANT

Air Quality

POLLUTANT	JULY 2009	Highest for 2009	JULY 2008	Highest for 2008
CARBON MONOXIDE (CO)	7	37	22	32
OZONE 8 hour (O3)	58	74	100	140
PARTICULATES (PM _{2.5})	46	48	187	211
PARTICULATES (PM ₁₀)	31	94	123	167

For the month of July, there were no exceedances of Carbon Monoxide, Particulate Matter, or Ozone standards at any of the monitoring stations. The highest Air Quality Index (AQI) value reported for the month of July was fifty-eight (58) for Ozone. There were twenty-eight (28) days in the month of July where the Air Quality was in the good range, and three (3) days the Air Quality fell into the moderate range.

Duane Sikorski, Air Quality Supervisor

Monitoring Activity

Daily monitoring operational, quality assurance, data submission and network upgrade activities continued throughout the month. The Reno 3 site continuous PM₁₀ beta attenuation monitor (BAM) which had been offline for the month of June pending the release of funds at the beginning of the new fiscal year for replacement parts was operational as of July 16th. The BAM data is used only for daily AQI data reporting purposes and is not data for record submitted to EPA's air quality system database.

Preparation of the 2008 Northern California Wildfires Exceptional Events petition continued during the month of July.

Duane Sikorski, Air Quality Supervisor

Planning Activity

The process of researching, developing and preparing a county-wide greenhouse gas emissions inventory continues while staff is developing the next (2008) triennial emissions inventory for submission to EPA by June of 2010.

Duane Sikorski, Air Quality Supervisor

Permitting Activity

TYPE OF PERMIT	2009		2008	
	JULY	YTD	JULY	ANNUAL TOTAL
Renewal of Existing Air Permits	107	811	106	1302
New Authorities to Construct	2	43	11	81
Dust Control Permits	12 (138 acres)	72 (979 acres)	16 (516 acres)	195 (3012 acres)
Wood Stove Certificates	29	126	10	170
WS Dealers Affidavit of Sale	4 (4 replacements)	70 (49 replacements)	14 (5 replacements)	250 (145 replacements)
WS Notice of Exemptions	512 (21 stoves removed)	2792 (132 stoves removed)	342 (8 stoves removed)	3729 (139 stoves removed)
Asbestos Assessments	82	479	62	856
Asbestos Removal Notifications	37	173	32	322

Compliance/Inspection Activity

Staff reviewed sixty-one (61) sets of plans submitted to the Reno, Sparks or Washoe County Building Departments to assure the activities complied with Air Quality requirements.

Staff conducted forty-eight (48) stationary source renewal inspections and fifty-three (53) gas station inspections in July 2009. Staff also conducted inspections on asbestos removal and construction/dust projects.

Permitting/Enforcement
Activity

The Washoe County School District has had a large number of asbestos abatement projects at all school sites this summer. These types of projects are normally completed during the summer months since school is out and the abatement projects can proceed smoothly.

Staff continues to work with the “new” owners of vacant land parcels in an attempt to secure adequate dust controls. Many of these owners are out of state companies who are not familiar with our local dust regulation requirements; therefore, staff is personally contacting the representatives to make certain they are aware of their dust control responsibilities.

Finally, as reported in a previous DBOH report, staff is considering a new dry cleaner regulation that would prohibit the use of perchloroethylene (PERC) which is a toxic air contaminant. Staff will be having a workshop with the dry cleaner representatives in the near future to discuss the details of the proposed PERC ban and get their input as to viable “green” alternatives, reasonable time frames for implementation, etc.

Noel Bonderson, Air Quality Supervisor

Enforcement Activity

COMPLAINTS	2009*		2008		
	JULY	YTD	JULY	YTD	Annual Total
Asbestos	1	11	0	15	21
Burning/Smoke	1	4	2	8	12
Dust	20	66	12	171	229
Gas Station/Oxy Fuel	0	0	0	1	0
Miscellaneous	0	4	0	7	12
Odor	7	26	7	17	31
Painting (spray painting)	2	2	0	5	8
Permit Violation	2	5	0	7	20
TOTAL	33	118	21	231	334
NOV'S	JULY	YTD	JULY	YTD	Annual Total
Warnings	1	5	0	10	16
Citations	0	5	1	16	27
TOTAL	0	10	1	26	43

* Discrepancies in totals between Monthly Reports can occur because of data entry delays.

Notices of Violation (NOVs):

There was one (1) Notice of Violation (NOV) issued in July 2009 there was one (1) NOV Warning issued for Asbestos Sampling and Notification. There was no NOV Citations issued

Fire Prevention Operations & Dust Control Standards

Per the request of the DBOH at last month's meeting, staff reviewed the language of Section 040.030C.3.d. (dust control standards) and reconfirmed that the mastication process, as described by the Nevada Fire Safety Council, is defined as a "dust generating activity" and is not exempt from dust control. The regulation specifies that "landscape maintenance" does not include grading, trenching, or any other mechanized surface disturbing activities, and does exempt the requirements of a dust permit and project information sign.

Staff has not yet received a draft "project mastication form" for review from the fire representatives. As agreed to in our site visit to Galena Park, this form would be developed by fire personnel and provide specific information such as project location, acreage to be masticated, fuel type, etc. This data would enable both fire and AQMD staff to work together and determine if water could be applied to a given site for dust control purposes based upon topography, access, water availability, location to residential development, etc.

Noel Bonderson, Air Quality Supervisor



August 18, 2009

DISTRICT HEALTH DEPARTMENT

TO: Members, District Board of Health

FROM: Mary A. Anderson, MD, MPH, FACPM

SUBJECT: District Health Officer's Report

NACCHO Conference

I attended the National Association of County & City Health Officials (NACCHO) conference from July 29 – 31, 2009. The theme of the conference was *"The New Public Health: Working across Sectors to Leverage Investment in Communities."* The keynote speaker was Dr. Thomas Frieden, MD, MPH. Dr. Frieden is the new Director of the Centers for Disease Control and Prevention (CDC) and the Administrator for the Agency for Toxic Substances and Disease Registry. He is the first public health physician to be appointed as director of the CDC. The timing of the selection of the first public health physician as the head of the CDC, though long-delayed, comes at a good moment when everyone is grappling with the potentiality for the resurgence of H1N1 flu. Dr. Frieden was well-spoken, energetic, and impressive. His prior leadership as the Commissioner of the New York City Department of Health and Mental Hygiene, one of the world's oldest and largest health departments, will serve him well in his new post.

During the conference, a slide presentation took place whenever there was a break between speakers in the main conference hall. That slide presentation featured contributions from local health departments that illustrated the use of the public health logo and its tagline, "Prevent. Promote. Protect." We submitted three slides taken at last year's POD exercise that showed the logo on the vests worn by our workers and volunteers. Two of our three slides were selected for use and were shown repeatedly along with the name of our health district. Thanks go to Dr. Todd and his team for taking and providing the photos.



Clipboard Crew



"Do I Have to Watch?"

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Among the items I brought back from the conference is a description of the Food Protection Program for the City of Columbus, Ohio which won the Samuel J. Crumbine Consumer Protection Award (Enclosure 1). Their "color-coded, low-literacy system" for identifying facility compliance may be an approach we could consider adopting. I also received copies of the NACCHO *2008 National Profile of Local Health Departments* and the ASTHO *States of Preparedness: Health Agency Progress, Second Edition*, which I will make available for your perusal at the board meeting.


State Health Officer Meeting

The new State Health Officer, Dr. Tracey Green, held a meeting for the Local Health Authorities on August 14, 2009. The emphasis of the meeting was planning for the likely resurgence of H1N1 flu in the coming season. The Nevada State Health Division (NSHD) is setting up a website—Flu.nv.gov—which is intended to be a "hub of knowledge" on flu-related issues. The estimated "go-live" date for the site is August 24th.

Our health district submitted a proposal to NSHD for the use of federal dollars under the Public Health Emergency Response (PHER) grant intended to support H1N1 preparedness and response activities in the fall. Our grant submission was structured around mild, moderate, and severe scenarios.

Rotary International District Youth Exchange Program

We were fortunate to have a young lady from Taiwan, Chun-Hsueh "Sharon" Chien, join us for the majority of her six-week stay in the U.S which concluded on August 25, 2009. She was sponsored through the Rotary International District Youth Exchange Program. She completed her undergraduate work in Taiwan and intends to pursue further study with the aim of achieving a Master of Public Health degree. While here, she not only observed various health district activities, but also contributed to our efforts in a significant way. She analyzed Washoe County School District data related to childhood obesity under the guidance of Sharon Clodfelter and also assisted with an evaluation of the timeliness of communicable disease investigations for Dr. Lei Chen. Due to her excellent analytical skills, Ms. Chien was able to take on the projects and produce results with minimal guidance. She was awarded a certificate to acknowledge her achievements.



Mary A. Anderson, MD, MPH, FACPM
District Health Officer

2009 Samuel J. Crumbine Consumer Protection Award Recipient

Columbus Public Health

Teresa C. Long, MD, MPH, Health Commissioner



National Association of County and City Health Officials

Annual Conference, June 2009, Orlando, FL

Accepting Award: Keith L. Krinn, RS, MA, DAAS, CPHA
Environmental Health Administrator, Columbus Public Health Environmental Health Division

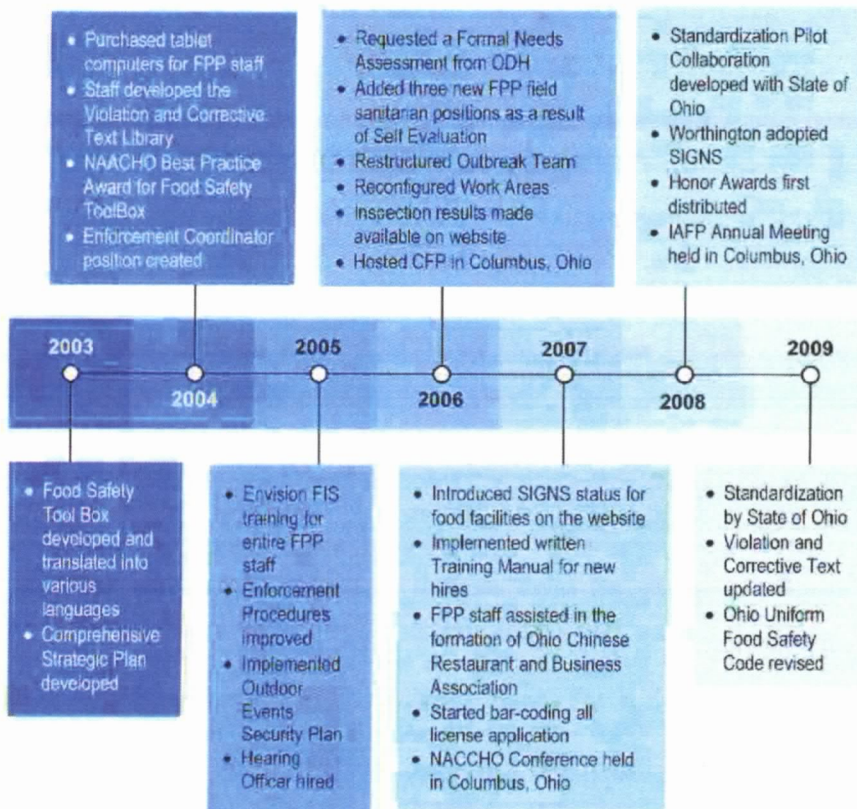
Established in 1833, as the local public health agency for the City of Columbus, Columbus Public Health (CPH) has continually strived for "healthier, safer people". A comprehensive strategic plan using an all-hazards approach was developed in 2003, to affect fundamental change to the Food Protection Program (FPP), for the needs of the community it serves. The comprehensive plan initially addressed the following issues: 1) Food safety education and training; 2) Knowledge and understanding of the changes in the new risk-based code and the science of food safety; 3) Bridging the language and cultural barriers presented by a diverse community and workforce; and, 4) Providing easy access to public information. As the implementation progressed, new goals were identified that dove-tailed and complemented the original goals and included: 1) An increase in the number of inspections to meet state-mandated frequency of inspection criterion; 2) Addressing the concerns of food security and defense by developing emergency response for threats to the food supply; and, 3) As increased inspections resulted in increased follow-up inspections, the need to develop an improved enforcement model became apparent.

The FPP developed a "Food Safety Toolbox", which was provided to all licensees. It includes a copy of the current Ohio Uniform Food Safety Code, which is based on the FDA Model Food Code, along with food safety posters. The Food Safety Toolbox is provided in English, Spanish, Mandarin, and Somali and received a Best Practice Award from NACCHO in 2004.

The FPP conducts risk-focused outreach programs by presenting regularly scheduled food safety training classes in English, Spanish, Mandarin, and Somali.

Regular contact with the Ohio Department of Agriculture and the Ohio Department of Health is maintained and

Food Protection Program Timeline: 2003-2009



2009 Samuel J. Crumline Consumer Protection Award Recipient



a pilot standardization program, designed to be replicated state-wide is underway. Science-based health and safety training is emphasized, and focuses on the five CDC risk factors associated with foodborne illness.

The FPP has been communicating these risk factors to the operators and the public by performing risk-based inspections, emphasizing critical violations on the inspection reports, providing extensive food safety information on the CPH website, and developing the SIGNS Public Information Initiative to promote transparency and better disclose compliance and enforcement information to the public. A durable plastic sign which uses a color-coded system to inform the public of the facility's compliance and enforcement status is posted at the entrance of licensed facilities. As part of this public outreach initiative, consumers can search the website (www.publichealth.columbus.gov) for details of critical violations observed during previous inspections which empowers consumers to make informed choices regarding patronage.

Columbus Public Health

SIGNS Public Health Initiative



The FPP wanted a public disclosure system that accurately represented information regarding compliance and enforcement activity on the placards. Their research demonstrated it should be a color-coded, low-literacy system that could be easily understood by the public, so were attracted to the "traffic light" colors, first used in Toronto, since they are universally recognized. Eventually, a fourth color was selected to denote facilities on an increased frequency of inspection following a license suspension. The plan reflected the program's enforcement protocol and allowed for due process. The "Healthier, Safer People Honor Award" was concurrently created with the SIGNS initiative to recognize facilities that performed above the criterion established for the green sign.



The initial response to terrorism or natural disasters begins at the local level. CPH together with local partners developed an Outdoor Events Security Plan which utilizes an all-hazards approach. The plan has been utilized during preparations and inspections at the many outdoor festivals held in Columbus, and the large venues of the Ohio State Fair, and The Ohio State University home football games.

About the Samuel J. Crumline Consumer Protection Award

For 54 years, the Samuel J. Crumline Consumer Protection Award, named for one of the United States most renowned public health sanitarians, has been presented to a local public health unit by a jury of leading environmental health officials and public health sanitarians and is the most prestigious recognition that a public health unit can receive. Crumline winners serve as models for other public health and safety programs across the nation.



The Crumline Award is supported by the Conference for Food Protection, in cooperation with the American Academy of Sanitarians, American Public Health Association, Association of Food & Drug Officials, Foodservice Packaging Institute, International Association for Food Protection, National Association of County and City Health Officials, National Environmental Health Association, National Restaurant Association Solutions, National Sanitation Foundation International and Underwriters Laboratories Inc. Please visit www.fpi.org for more information about the Crumline Award and to view Columbus Public Health's award-winning application.



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 Telephone (775) 328-2447
 Fax (775) 328-3764
epicenter@washoecounty.us

WASHOE COUNTY DISTRICT HEALTH DEPARTMENT • P.O. BOX 11130 • RENO, NEVADA • 89520-0027 • (775) 328-2447



**REPORTED CASES OF SELECTED
 COMMUNICABLE DISEASES
 WASHOE COUNTY
 April - June 2009**

To report a communicable disease phone: (775) 328-2447 or fax reports to: (775) 328-3764

DISEASE	2 nd Quarter			Year to Date (Cumulative)		
	2007	2008	2009	2007	2008	2009
AIDS	11	11	6	18	15	11
Campylobacteriosis	10	4	4	19	18	17
Chlamydia	367	319	289	754	665	625
Cryptosporidiosis	1	2	0	1	4	5
E. coli 0157:H7	1	0	0	1	0	0
Giardiasis	10	5	4	15	12	8
Gonorrhea	52	58	26	107	119	73
Haemophilus influenzae type b (Hib)	0	0	0	0	0	0
Hepatitis A (acute)	1	0	1	2	0	2
Hepatitis B (acute)	2	2	1	3	5	3
Hepatitis B (chronic)	9	13	13	21	20	26
Hepatitis C (acute)	1	1	1	3	1	2
Hepatitis C (Past or Present)	224	241	225	420	478	417
HIV	8	2	3	18	6	10
Influenza (Type A, B, or unknown)	4	12	338*	287	806	695
Measles	0	0	0	0	0	0
Meningitis, Viral or Aseptic	14	4	2	17	9	5
Meningococcal Disease	0	0	0	2	3	1
Pertussis (confirmed & Probable)	0	1	0	7	2	3
Pneumococcal Disease, Invasive	11	14	16	26	35	28
Rabies (bat)	1	3	1	1	3	1
Rotavirus	19	88	22	46	102	31
RSV	31	47	12	250	250	256
Salmonellosis	4	12	11	9	20	23
Shigellosis	0	1	2	0	2	2
Syphilis (Primary & Secondary)	0	0	0	4	0	1
Tuberculosis	1	3	8	2	5	11
Vest Nile Virus	0	0	0	0	0	0

* 42% (143/338) were novel H1N1 influenza A.

Please share this document with all physicians & staff in your facility/office.