

Washoe County District Board of Health Meeting Minutes

Members

Kitty Jung, Chair
Dr. John Novak, Vice Chair
Dr. George Hess
Kristopher Dahir
David Silverman
Oscar Delgado
Michael D. Brown

Thursday, February 23, 2017
1:00 p.m.

Washoe County Administration Complex, Building B
Health District South Conference Room
1001 East Ninth Street
Reno, NV

1. *Roll Call and Determination of Quorum

Chair Jung called the meeting to order at 1:00 p.m.

The following members and staff were present:

Members present: Kitty Jung, Chair
Dr. John Novak, Vice Chair
Dr. George Hess
Kristopher Dahir
Oscar Delgado
Michael Brown

Members absent: None

Ms. Rogers verified a quorum was present.

Staff present: Kevin Dick, District Health Officer, ODHO
Leslie Admirand, Deputy District Attorney
Dr. Randall Todd
Charlene Albee
Steve Kutz

2. *Pledge of Allegiance

Mr. Andy Gebhardt led the pledge to the flag.

3. *Public Comment

As there was no one wishing to speak, Chair Jung closed the public comment period.

4. Approval of Agenda

February 23, 2017

Dr. Novak moved to approve the agenda for the February 23rd, 2017, District Board of Health regular meeting. Mr. Brown seconded the motion which was approved six in favor and none against.

5. Approval of Draft Minutes

January 26, 2017

Dr. Novak moved to approve the minutes for the January 26th, 2017, District Board of Health regular meeting. Mr. Dahir seconded the motion which was approved six in favor and none against.

6. Recognitions

A. Years of Service

- i. Kim Tran Franchi, 10 years, hired 2/23/2007 – EHS

Mr. Dick congratulated Ms. Franchi on her 10 years of service.

- ii. Carmen Mendoza, 15 years, hired 2/27/02 – EPHP

Mr. Dick introduced Ms. Mendoza and congratulated her on her years of service

B. New Hire

- i. Michael White, 1/30/2017, Storekeeper - CCHS

Mr. Kutz introduced Mr. White who has years of experience in purchasing and inventory management. Mr. Kutz stated that he has been a wonderful addition to CCHS and they are very pleased to have him on board.

C. Promotions

- i. Chantelle Batton from Environmental Health Trainee I to Environmental Health Trainee II – EHS

Ms. Batton was not in attendance.

- ii. Ellen Messenger-Patton from Environmental Health Trainee I to Environmental Health Trainee II – EHS

Ms. Messenger-Patton was not in attendance.

- iii. Briana Johnson from Environmental Health Trainee I to Environmental Health Trainee II – EHS

Ms. Johnson was not in attendance.

- iv. Michael Touhey from Environmental Health Trainee I to Environmental Health Trainee II – EHS

Mr. Dick congratulated Mr. Touhey on his promotion.

D. Accomplishments

- i. Dianna Karlicek, passed the National Registration Exam to become a Registered Environmental Health Specialist – EHS

Mr. Dick announced that Ms. Karlicek passed the National Registration Exam to become a Registered Environmental Health Specialist. He stressed that it takes a great amount of preparation and congratulated her on her accomplishment.

E. Retirements

- i. Dennis Cerfoglio – 1/31/2017, Sr. Air Quality Specialist – 28.75 years – AQM

Mr. Dick congratulated Mr. Cerfoglio on his retirement and presented him the gift of a clock to commemorate his years of service. Mr. Dick stated that he'd had the great pleasure of working with Mr. Cerfoglio directly when they both worked in the Air Quality Division, and that Mr. Cerfoglio had worked in Environmental Health Services as well. Mr. Dick thanked him for his service and commented that he'd had a great career at the Health District and he would be missed.

Chair Jung wished him a good retirement.

F. TMWA and Lyon County – Recognition for Exemplary Performance during the Flood Event at Sutcliffe, Pyramid Lake Reservation.

Mr. Dick introduced Andy Gebhardt, Tommy Clifton and Pat Nielson with TMWA, and from Lyon County, Mike Gutierrez and Robert Mann. He requested them all to come forward to be recognized, and asked Mr. English to explain the situation regarding the January flood at Sutcliffe, and the efforts of the members of TMWA and Lyon County.

Mr. English explained that during the first flood in January, multiple water systems had issues. The largest water system in Washoe County is that of the Pyramid Paiute Indian Tribe, and it is not regulated by the Health District.

Their well and main distribution line is at the bottom of a wash, which was part of the area that was washed out by the flood. On Wednesday the 11th, two days into the flood, the Health District received a request from NDP to provide technical assistance to bring water back online in that area. Sutcliffe had already been without water since Saturday.

Mr. English stated that his division had already contacted the Tribe's Emergency Manager who is also the Fire Chief. The Emergency Manager thought that if the Health District could provide 250,000 gallons of water, it should take care of the immediate needs.

Having dealt with similar situations with smaller water systems, it was apparent that this was not sufficient, and Wil Raymond with TMWA was contacted for possible assistance. Mr. Raymond stated that TMWA could supply water, but had no way to transport it.

The State had already contacted Lyon County who had, in a previous emergency, purchased potable water hauling trucks. This is the second occasion that Lyon County has assisted Washoe County in two years.

The Health District became the coordinating agency for this response to assist the Tribe.

The issue became much larger than originally anticipated. Lyon County mobilized immediately. TMWA tested a fire hydrant in Spanish Springs to verify the water was potable to fill a tank owned by the Tribe.

When the collective crew actually assessed the damage, it was decided that this was not the entire solution. The water trucks could move the water to the tank, but couldn't pump it into the tank. Pat Nielson and Andy Gebhardt built an inline pump on Friday night and had it deployed on Saturday with their own generator and with two heavy line crews. Additionally, they sent resources out to the well house. The transmission line had been rebuilt by NDF firefighters, but sprung a leak when it was turned on. TMWA made a temporary repair to the transmission line and sent work crews throughout the community to flush the water system to prevent the residents' faucets from blowing up. All of this work is being done by workers unfamiliar to the system, but they worked to understand it and resolved the issues as they arose.

Meantime, Lyon County had their trucks staged in Washoe County in the snow. They

had been tested and filled with water, and workers were trying to plan for transportation of the water to the tank up a 15% grade on a dirt road that had been washed out.

TMWA brought out their own dump trucks with gravel and road base to build a road and graded a road to the tanks to allow them to be filled.

All of this work was accomplished on Saturday. Saturday night, TMWA was present at the community meeting to explain the situation to the Paiute Chief and the State Emergency Manager. Scott Fleckenstein and two others from Lyon County and six others from TMWA worked until 11:30 on Saturday. At 6:00 p.m. on Saturday, they began trucking water to the Tribe. They had also repaired lines to the well to push water from that source as it had not been damaged. They were able to maintain pressure and refill the system on Saturday through Sunday.

TMWA provided their state-approved lab to do the bacteria testing, line flushing and chlorination for the water system which took place Sunday and Monday. They were able to have potable water coming out of their faucets on Wednesday after more than a week of downtime.

The Washoe County Health District has two potable water tanks that were purchased to supply water to the hospitals in the event of an emergency. Those were deployed immediately to the Reservation to provide potable water. Non-potable water was provided sooner for any fire issues.

Other areas of the system were inspected and TMWA provided assistance and guidance on their repair.

One of the cell repeater towers had been lost on Virginia Peak and TMWA utilized their satellite phones for communication to town.

Mr. English extended the Health District's appreciation to the TMWA and Lyon County employees who acted on their own, regardless of jurisdiction and at the Health District's request, to aid the residents of Washoe County in this emergency.

Chair Jung congratulated all those that had been recognized, and thanked them for their hard work and dedication to public service. She stated that the work that Mr. English and the EHS team, along with the crews from TMWA and Lyon County were the epitome of public servants, that she respected and admired them all.

7. Consent Items

Matters which the District Board of Health may consider in one motion. Any exceptions to the Consent Agenda must be stated prior to approval.

A. Budget Amendments/Interlocal Agreements

i. Approve a Subgrant Award from the State of Nevada Department of Health and Human Services, Division of Public & Behavioral Health retroactive to January 1, 2017 through December 31, 2017 in the total amount of \$290,182 (no required match) in support of the Community and Clinical Health Services Division (CCHS) HIV Prevention Program IO# 10013 and authorize the District Health Officer to execute the Subgrant Award.

Staff Representative: Nancy Kerns-Cummins

ii. Approve Interlocal Contract between the Nevada Department of Conservation and Natural Resources, Division of Environmental Protection and the Washoe County Health District for the period upon approval through June 30, 2017 in the total amount of \$10,000 in support of the Environmental Protection Agency (EPA) Multipurpose Grant Project, IO TBD; and if approved, authorize the District Health Officer to execute the Contract.

Staff Representative: Patsy Buxton

- B. Acknowledge receipt of the Health District Fund Financial Review for January Fiscal Year 2017

Staff Representative: Anna Heenan

- C. Accept cash donation in the amount of \$4,000 from Arctica Ice Sales to purchase Long Acting Reversible Contraceptives (LARC's) to help decrease high unintended pregnancy rates; approve amendments totaling an increase of \$4,000 in both revenue and expense to the FY17 Arctica Ice Donation budget, IO-20424.

Staff Representative: Steve Kutz

Mr. Brown moved to accept the Consent Agenda as presented. Dr. Novak seconded the motion which was approved six in favor and none against.

8. *Inter-Hospital Coordinating Council (IHCC) Presentation of Accomplishments

Presented by Kent Choma, IHCC Chairman (2014-2016)

Mr. Dick introduced Mr. Choma who presented a report of the Inter-Hospital Coordinating Council accomplishments.

Mr. Choma announced that he had just finished his term as the Chairperson of the Inter-Hospital Coordinating Council. This group was established in the 1980's in Washoe County and involves EMS, Fire, Law Enforcement, Volunteer Organizations and Public Health. The group meets monthly to assure preparedness for unforeseen circumstances.

One of the largest accomplishments for the year was that this group was selected for attendance at a National Leadership Training Program in Alabama, one of three groups selected to present on their best practices. There was a good exchange of information for all participants, working toward the best function for all coalitions across the country.

Other high-level accomplishments included the Isolation and Quarantine Bench Book and the Nevada West Region Medical Surge Plan was reviewed. The Memorandum of Understanding was reviewed with all of the mutual partners, which was an outcome of the Coalition Training Class, formalizing the commitment to the group. Mr. Choma also stated that The Functional Assessment Services Teams, Jurisdictional Risk Assessment and 23 training programs that were offered to the various healthcare partners in the community rounded out the list of high-level accomplishments.

Mr. Choma informed that there were two full-sized exercises in this past year, the first being Operation Unicorn which was an Ebola exercise that involved the healthcare partners, VA health organizations and REMSA. Onlookers were impressed with how quickly the patients were contained, tested and moved through the healthcare system.

The second exercise was a full-scale hospital evacuation, Operation Egress, which was a test of the evacuation plan that was rewritten last year. Using the new tag system that determines where the patient needs to go for the care they require, they were able to process 17 patients in about 30 minutes.

Mr. Choma also stated that there was a Disaster Behavioral Health Annex TTX (Tabletop Exercise), Isolation and Quarantine TTX and 21 other exercises held in 2016.

Mr. Choma informed that Mr. Brian Taylor will be the new Chair, Mr. Sean Applegate is the new Vice Chair and Mr. Kurt Green is the New Member at Large.

Mr. Choma introduced Mr. Taylor, who stated that the IHCC was excited to have been invited and attend the National Leadership Training Program, and that they are working to create regional plans with Carson and other Northern Nevada Coalitions to create leadership groups for a uniform response to disaster. The primary focus is to have a local response plan

that is best for the area's responders and facilities. He thanked the Washoe County Health District for its support and collaboration. Mr. Taylor emphasized that the IHCC stands ready for response and recovery to any incident in the area, and they will continue to increase their readiness.

Chair Jung thanked Mr. Taylor and congratulated him and the new Vice Chair on their newly elected positions.

9. Presentation of the 2016 Community Health Improvement Plan Annual Report

Staff Representatives: Sara Behl and Melanie Flores

Mr. Dick introduced Ms. Behl and Ms. Flores as the presenters of the 2016 Community Health Improvement Plan Annual Report.

Ms. Behl presented an overview of the CHIP with the goal of providing status of the CHIP's progress. She stated that there are many priorities within the Office of the District Health Officer, and that the CHIP initiatives are community wide, while the Strategic Plan is more internally focused.

Ms. Behl stressed that the CHIP is a plan of action that starts with analyzation of the data from the Community Health Needs Assessment. This data determines the top priorities within the community and the group's focus for activities. Other data utilized in determining the greatest areas of need is collected by means of interviews, surveys and workgroups involving community members and partners.

The Health District provides backbone support to this plan, with the four main health priorities being Access to Healthcare and Social Services, Behavioral Health, K-12 Education and Food Security. Ms. Behl stated that year one of a three year plan has been completed, and that Ms. Flores would now provide the status of the plan.

Ms. Flores announced that the entire draft report is available online, and is formatted to easily assess progress. 55 Strategies and 66 Performance Measures were assessed, and the results of the first year's progress were very positive. Overall, 67% of Strategies had been met or exceeded, and 47% of the Performance Measures were also met or exceeded.

The priority of Access to Healthcare and Social Services involved ten community organizations, with 70% of the Performance Measures having been met or exceeded. 85% of the Strategies were met or exceeded.

Ms. Flores informed that Behavioral Health was the largest priority, led by 20 community organizations and included 21 Strategies and 32 Performance Measures. The goal of this priority included improving access, creating a healthier environment for youth and protecting the health and safety of youth through the reduction of substance use and abuse. 63% of the Objectives were met and 71% of the Strategies were met or exceeded.

She also informed that, although the results showed an increase in bullying, with the change in law, more incidents were being reported. Ms. Flores opined that this number could be effectively used as a baseline for future comparison, and that the increase wasn't a negative, but a more accurate assessment of the issue.

Ms. Flores stated that, within this priority, the School District will screen all 7th graders within the next two years to identify and mitigate any adverse experiences the youth may be experiencing. They feel that earlier intervention will help prevent later life negative health outcomes.

The Education priority was led by eight community partners with 11 Strategies, and 18 performance measures with the goal of improving health outcomes through educational attainment and improving physical activity and nutrition among youth. 17% of the Objectives have been met and 73% of the Strategies have been met or exceeded. Overall, graduation rates have increased, but the data also shows the areas that require a focus of

efforts.

An outcome of the 2015 Legislative Session was to improve literacy among youth, especially by the end of grade three, and Washoe County School District has incorporated learning strategists in all 62 of their elementary schools and five charter schools. This School District is one of the first to attain this level of involvement for their students.

Regarding Food Security, Ms. Flores stated this priority is led by five community partners with 10 Strategies and 6 Performance Measures. The goal with this priority is to implement programs that address the immediate need, promote long-term health and food security and enhance home-delivered meal programs to seniors. 17% of the Objectives have been met and 30% of the Strategies.

Ms. Flores opined that this is the most developmental priority within the CHIP. A main partner in this priority is the Food Bank who received a significant amount of money from Feeding America. This sum was matched by Washoe County Health District and Truckee Meadows Healthy Communities. The focus is to create a plan around social disparities such as housing and income stability, to determine how that influences food security.

Some of the areas under Food Security that are currently in progress are increasing utilization amongst food assistance programs, increasing Food Bank access, working with area hospitals and community health centers concerning prescription food programs and increasing food screening among our social service organizations. These efforts are concentrated in the 89502 zip code area, and will be expanded when possible.

Ms. Behl summarized the report by saying that lessons learned in this first year include the realization that the initial number of Strategies and Performance Measures may have been too ambitious. An effort is now underway to streamline and focus on the areas of the greatest importance.

Lessons learned in the past year will be used to create Version Two of the CHIP by using community feedback and evaluation data to concentrate areas of focus. The Health District will continue to offer backbone support to its partners, develop the new Community Health Needs Assessment to then utilize this and other data to develop the new Community Health Improvement Plan for 2019-2021.

Chair Jung congratulated Ms. Behl on a job well done, and acknowledged her role as lead in these activities. Chair Jung also noted that Councilman Delgado and Commissioner Lucey had been instrumental in funding these efforts. She commented that these activities make the Health District eligible for more grant and other funding.

Councilman Delgado wished to highlight the work of Ms. Behl and Ms. Flores, noting that the community is not aware of the scope of their efforts and congratulated them both on a job well done.

Dr. Novak thanked Ms. Behl and Ms. Flores and commented on the value of the future steps that were outlined, that they are part of the Accreditation process to become an accredited Health District.

Dr. Novak moved to accept the 2016 Community Health Improvement Plan Annual Report as presented. Dr. Hess seconded the motion which was approved six in favor and none against.

10. *Presentation from REMSA Board Member Representing the Accounting Profession
Presented by Tim Nelson

Mr. Dick introduced Mr. Nelson, District Board of Health appointed REMSA Board Member and Chairman of the Finance Committee.

Mr. Nelson stated that almost two years ago, the District Board of Health appointed him

and requested more transparency and communication from the Board Appointees to the REMSA Board, including himself.

The Annual Audit was completed in December 2016 and presented as part of the Annual Franchise Compliance Report in January 2017. Again, this year, REMSA received the highest opinion available from the auditors. This year, there was a positive net gain in change of assets of \$2.1M. Contained within that figure there was also \$2.1M in depreciation expense, so there was over \$4M for capital and debt service. \$1.8M was paid in debt within the last year, and the balance was invested in critical capital equipment needs.

Included in the figures for both last year and this year, REMSA has approved the purchase of new ambulances and the refurbishment of others.

Within the last six months, Mr. Nelson stated that REMSA is on target with their plan for the fiscal year, showing a positive change in assets of about \$400K.

Mr. Nelson stressed that the REMSA organization strives to improve efficiencies and expand patient care in the region.

Mr. Brown inquired if there was a hard copy available of this presentation and Mr. Nelson indicated that this information is within the report that was presented at the 1/26/2017 DBOH Meeting.

Mr. Dick wished to share with the Board that he has been very impressed with their appointee, Mr. Nelson. Mr. Dick stated that, as an ex-officio member of the REMSA Board, he receives updates monthly from REMSA. He stated that Mr. Nelson is doing a wonderful job in this capacity.

Chair Jung agreed with Mr. Dick's statement and thanked Mr. Nelson for his work.

11. PUBLIC HEARING Consideration and possible approval of Proposed Revisions of the Regulations of the Washoe County District Board of Health Governing Public Swimming Pool and Spa Operator Certification Program.

Staff Representative: James English

Mr. English stated that he was pleased to present the final draft regulations for the Board's consideration for approval of the Public Swimming Pool and Spa Certification Program.

He explained that they are proposing to remove the requirement to receive an operator's identification card from the Health District after obtaining the certificate from passing a nationally recognized course.

Mr. English stressed that this action would not change the intent or purpose of the existing regulation, but would make the process more efficient for the operators at a slight cost savings for both the operators and the Health District. This action is in line with the District Board of Health's Strategic Priority for both Organizational Capacity and Healthy Environment.

Mr. Dahir asked Mr. English to clarify the financial impact of this proposal. Mr. English explained that the net effect is zero. The fees received for the cards is offset by the expense of maintaining the special printer for the cards, the cost of the supplies for the cards, as well as the cost of staff time to process the application, print the card and track the data base.

Chair Jung opened the Public Hearing. As there was no one wishing to speak, Chair Jung closed the public comment period. Dr. Novak moved to approve the Proposed Revisions of the Regulations of the Washoe County District Board of Health Governing Public Swimming Pool and Spa Operator Certification Program. Mr. Dahir seconded the motion which was approved six in favor and none against.

12. Review, discussion and possible adoption of the Business Impact Statement regarding Proposed Revisions to the District Board of Health Regulations Governing Air Quality Management, Section 040.080 (Gasoline Transfer And Dispensing Facilities) with a finding that the revised regulations do not impose a direct and significant economic burden on a business; nor do the revised regulations directly restrict the formation, operation or expansion of a business; and set a public hearing for possible adoption of the proposed revisions to the Regulations for March 23, 2017 at 1:00 pm.

Staff Representative: Charlene Albee

Ms. Albee stated this proposal involves the removal of the requirement to install Phase II vapor recovery, which is the hanging hardware equipment on a dispenser that collects the gasoline vapors and puts them back into the underground tank.

Ms. Albee directed the Board's attention to an attachment included in their packets, a letter issued by the US EPA in 2012 that acknowledged that 75% of the fleet in the country have vehicles equipped with onboard vapor recovery. Ms. Albee explained that these two technologies conflict, resulting in the increase in emissions released into the atmosphere.

Ms. Albee explained that, per the EPA, when 75% of the fleet is equipped with the on-board vapor recovery systems, the level in which the environmental result is neutral is attained if the Phase II equipment is removed from the pumps.

When the letter was issued, Ms. Albee stated that calls were received from the industry requesting permission to remove the Phase II equipment from their dispensers. Ms. Albee's decision was to wait until it could be proven that Washoe County's fleet had attained 75% of onboard refueling vapor recovery (ORVR), a level which it did attain in 2016.

Meanwhile, new regulations were introduced requiring all underground storage tanks to be constructed with double walls to protect ground water and this would affect Phase II vapor recovery piping.

The objective of this Business Impact Statement is to have this revision of regulations in place prior to the underground storage tank regulations taking effect. Ms. Albee explained that it's estimated that 75-80% of the tanks in Washoe County will have to be dug up, and wanted to make sure that this burden of the Phase II vapor recovery systems was removed.

The Business Impact Statement was developed with this outcome in mind. There is a positive financial impact for the operators and contractors that will be doing the work. It will not have a significant fiscal impact for Washoe County. The Phase I vapor recovery systems will continue to be inspected, permits to operate will still be required and emissions will continue to be monitored and reported to the EPA.

Public Notice was given and two Public Hearings were held with none in attendance, which Ms. Albee stated is normally a sign of approval by the public.

Mr. Dahir asked when the gas tanks would begin to be dug up and replaced. Ms. Albee stated this process would begin as soon as the Federal EPA rule is implemented, which is overseen by Environmental Health. A timeline might be as early as this summer, but is not a firm date with many variables affecting the implementation.

Mr. Dahir moved to approve the Business Impact Statement regarding Proposed Revisions to the District Board of Health Regulations Governing Air Quality Management, Section 040.080 (Gasoline Transfer And Dispensing Facilities). Dr. Hess seconded the motion which was approved six in favor and none against.

13. Regional Emergency Medical Services Authority

Presented by Don Vonarx

A. Review and Acceptance of the REMSA Operations Report for January 2017

Mr. Vonarx presented the January 2017 Operations Report from REMSA and stated he would be happy to answer any questions.

Chair Jung was pleased to note the change of format in the reports, and that they were much easier to read.

Dr. Hess requested clarification regarding exemptions. Mr. Vonarx explained that there are two types of exemptions. The first is a Blanket Weather Exemption with regards to inclement weather conditions. It is a communication between the Communications Department and the EMS Oversight Team; as conditions warrant, this exemption is implemented and then ceased when conditions warrant. Late calls are still monitored when the exemption is active to confirm the late response is due to weather conditions.

The other category is an Individual Weather Exemption for instances where not all areas are affected by the weather issue but may effect response times in some areas.

Mr. Brown moved to approve the Review and Acceptance of the REMSA Operations Report for January 2017. Dr. Novak seconded the motion which was approved six in favor and none against.

*B. Update of REMSA's Public Relations during January 2017

Presented by Kevin Romero

Mr. Romero stated that he would begin his report with New Year's Eve. He stated that between the hours of 6:00 p.m. on December 31, 2016 and 6:00 a.m. on January 1st, there were 132 calls for service processed. In anticipation of the numerous calls, seven additional ambulances were brought in to service; two were dedicated to the downtown corridor. There were four paramedics stationed with carts downtown, one tactical paramedic working with the Reno Police armored rescue, three additional dispatchers and one mobile dispatcher stationed downtown dedicated to processing calls from that area. Advanced EMTs were stationed at the Peppermill and Atlantis with their security teams for calls in those venues, and many other support staff as well. Mr. Romero informed that it was a slow New Year's Eve, but they have to stand prepared.

Mr. Romero went on to say that the other significant event was the January flood that occurred from the 4th to the 10th. REMSA worked to assure the Communications Center was unaffected. The entire operations fleet, restock and resupply, on and off duty check in and the ambulance management team relocated the entire REMSA operation to Circus Circus. REMSA also had a representative at the Regional Emergency Operations Center during the flood on January 8-9 to assure ambulances were able to access all affected areas.

Mr. Romero wanted to extend thanks to Mr. Darrell Clifton at Circus Circus for allowing REMSA to use the parking lot next to St. Mary's as a base of operation.

On January 24th, REMSA did submit request for cost reimbursement to Washoe County Emergency Management for that declared state of emergency.

Mr. Romero stated that a REMSA representative, Mr. Taylor, is working with the Health District on updating and conducting a region-wide training on the MAEA, the Mutual Aid Evacuation Annex. This activity is ongoing.

14. Approval of the Fiscal Year 2017-2018 Budget

Staff Representative: Kevin Dick

Mr. Dick stated that that Anna Heenan had prepared the report but that he would present it. He indicated that the budget is included in the Board Members' packet for review along with the staff report and budget details for the various divisions for the next fiscal year.

Mr. Dick wanted to first share the significant Health District accomplishments and priorities and issues for the future. These items were presented to the Board of County Commissioners during their January retreat. He indicated that the significant accomplishments within the past year have been the development of the Health District Strategic Plan, the development and implementation of the Community Health Improvement Plan, and our work with the Truckee Meadows Healthy Community initiative. Mr. Dick informed that there were many other sizable activities and accomplishments, but these were the largest.

Mr. Dick informed that the Health District priorities for the future are the National Public Health Agency Accreditation and the triennial update of the Community Health Needs Assessment which is in progress in conjunction with Renown. Mr. Dick informed that engaging the community in Collective Impact to effect policy and systems change and developing a funding policy with Washoe County over the next year to provide financial stability through the General Fund transfer for the Health District were also priority. Another priority is dealing with the economic growth impacts on the Health District and the community overall.

Mr. Dick stressed that it is significant for the Board to recognize the potential for impacts to the Health District from the new administration in Washington DC. The impacts could stem from the repeal and replacement of the Affordable Care Act and the elimination of Title 10 Family Planning Funding. Also, EPA grant funding could be affected.

The future location of the Tuberculosis Clinic has yet to be determined. It had been co-located with the ME's office in the County building on Kirman, but is now the only operation in that building since the Medical Examiner moved to their new facility located directly across from the County Complex.

In a discussion with the County Manager, Mr. Dick stated that they were hopeful that any negotiations regarding transfer of that property in the future would include having a solution for the TB Clinic's new location. Renown is interested in that property.

Dr. Hess asked if Mr. Dick knew what the timeline would be for the need of a new facility for the TB Clinic; Mr. Dick stated that is not yet known.

Presenting the overview of the status of the budget, Mr. Dick stated that he proposes that we continue with twenty-two different programs that are currently operating within the Health District with no significant changes in the programs or services being delivered.

Mr. Dick presented the budget breakdown by offices and divisions of the Health District.

Mr. Dick stated that the total budgeted revenues projected for FY18 are just in excess of \$22M, which is \$1M more than the current year, and so is approximately 5.1% over the adopted budget for this fiscal year. That is primarily driven by the license, permits and charges for services and the increases in permitting and services fees that were approved by the Board. It was agreed that half of the fees would be charged in FY17 and the remainder of the increase will be implemented in FY18. The County General Fund Support will be \$9,516,856, which is decreased by \$280K for the overhead that is now captured in the fees. The General Fund Support is now at 43%, with the balance being grants, contracts and fees for services.

The total budget expenditures are up by just less than \$500K, at \$22,490,587, approximately 2.1% over the FY17 adopted budget. The FTE's will remain approximately the same in FY18, but merit increases, the 3.5% COLA that will begin in FY18, as well as the increase in costs of OPEB retirement benefits comprise this number.

There are some above base requests that will be presented to the Board of County Commissioners for approval. These will be funded by the Health District's income, not the

General Fund Transfer. One request will be to bolster the Chronic Disease Program by adding an additional Health Educator. Another request will be to hire an intermittent hourly Community Health Nutritionist for the WIC Program, which will provide flexibility in nutrition staffing.

Mr. Dick informed that some Environmental Health positions are being re-budgeted for funding by fees collected based on the work they're doing. This income is available because of the increased activity in the permit and inspection programs due to a stronger economy. They'd previously been funded by the tire fund Solid Waste Funding that we receive.

There is an increase in payments to the state for birth and death certificates which is driven by their requirement. The increase in fees is being collected and those amounts are being transferred to the state.

Mr. Dick explained that there is a reclassification request to increase some employee's area of responsibility, allowing them a broader scope of work to increase their value to the organization. The increase responsibility will require an increased salary, which is included in the above base requests.

The fund balance for the end of FY18 is projected to be just under \$2.5M, or 11% of the expenditures. Although the projected net change in fund balance for FY17 is a negative \$178K, Mr. Dick stated that at this time in FY16 a negative balance was also forecast, yet the ending figures were nearly a positive \$700K. He explained that this is due to funds that are budgeted for full expenditure in the Air Quality Solid Waste Funds, etc., and staffing vacancies that we may have, and that it is expected there will be a positive balance by fiscal year end. Mr. Dick stated that it is similarly forecast that there will be a positive budget balance in FY18, although it currently shows negative \$373K.

In the projected budget through 2021, it shows that a strong ending fund balance is expected of 11%, and a positive balance for net change in fund in 2019 and 2020. Mr. Dick explained that these projections are based on receiving level funding from the County General Fund Transfer. He reiterated that one of his priorities is to establish an agreement with the County with the goal of having any increased costs of COLA, wages and OPEB be included in the annual General Fund Transfer to rebase the Health District budget to cover those costs.

Mr. Dick presented the outline of the Next Steps in the Budget Plan. He explained that the District Board of Health needs to act early in this process for the budget to be presented to the County Manager for incorporation in the overall County Budget. The overall budget is then presented to the Board of County Commissioners for presentation and consideration. This explains the budget cycle beginning with presentation of the Health District budget at the February DBOH meeting for approval of the proposed budget. Mr. Dick explained that he has a meeting with the City and County Managers February 24 in accordance with the Interlocal Agreement to present this budget to them. In March, the DBOH will receive the update on this meeting. The budget presentation to the County Senior Management will also occur, and then, in April, the Board of County Commissioners will review the County Manager's recommendations and the budget and General Fund support should be finalized. In May, the Board of County Commissioners will have a Public Hearing and will hopefully adopt the FY18 Final Budget.

In summary, Mr. Dick stated that this is the proposed budget that the Board is being asked to approve. He explained that there may be changes to the budget based on any allocations the County may have for the different programs and support services, although they are not anticipated. Any changes would be brought back to the DBOH in future meetings.

Mr. Dick asked Ms. Heenan to whether he'd recapped the report correctly and she confirmed that he had. He then asked for the Board to adopt the budget as proposed.

Mr. Dahir asked why the intermittent hourly position amount had decreased. Ms. Heenan explained that is due to the loss of the grant funding for those positions. When funding is lost, she informed, any reductions to staff are taken first in the intermittent hourly positions, thereby saving the permanent, benefitted positions. Mr. Dahir asked if these positions were deemed as unnecessary. Mr. Dick stated that one area that has had reduced grant funding is the WIC Program, which is a federally funded USDA program that is passed along for implementation at the County level. He explained that the Health District already gives a large amount of support to the WIC program through indirect costs and management that is supported through the local budgets. Without the funding of the federal government, it is difficult for the Health District to maintain the same level of support to those services. In this instance, one employee was transferred from WIC to another area in Community and Clinical Health Services. Another position was eliminated over the past year. The new position in Chronic Disease offsets the eliminated position, which explains the level FTEs.

Other funding reductions impacted the Immunization Program where intermittent hourly nurse support has been reduced. Mr. Dick stated there is an effort to engage our medical reserve corps and utilize those volunteers in support of the Immunization Services through Dr. Todd's EPHP Division.

Mr. Dahir asked whether reduction of the WIC services, even though funding is decreased, is in the best interests of the community and, as the Board serving the community, if that was the best decision in light of the fund balance that could support the cost. Mr. Dick stated that he is inclined to take a conservative approach to the budget for FY18 in light of the uncertainties with other federal funding the Health District receives. Mr. Dick opined that, while he doesn't like to see the WIC support from the federal government decline, if the potential exists to lose the entire Immunization Program support, that critical area of need would need to be addressed.

Mr. Dahir asked if there was any way to anticipate the impact of the increased costs of the employee insurance benefit. Mr. Dick stated that the Health District is one step removed from the process in that, per the Interlocal Agreement structure, we rely on County HR to negotiate those benefits. He stated that HR is very much aware and concerned regarding the impact of those future benefit costs. Insurance options have been expanded to include a high deductible option that is less expensive to the County and provides other opportunities for the employees, such as a Health Savings Account. HR has also been negotiating with the other plans, and copays have increased in the process of balancing the cost to the County.

Chair Jung reiterated the importance to act on this item. She stated that it would be beneficial for Mr. Dick to be able to present this budget as approved by the DBOH in the upcoming meetings, which would be incorporated into the presentation to the BCC in April. She reminded them that this budget could change.

Mr. Dahir moved to approve the Fiscal Year 2017-2018 Budget as presented. Dr. Hess seconded the motion which was approved six in favor and none against.

15. Update regarding Bill Draft Requests and Bill Drafts for the 2017 Legislative session.

Staff Representative: Kevin Dick

Mr. Dick stated that the Legislature is moving very quickly in comparison to past years with the committees becoming involved and moving legislation through the system at a fast pace. He explained that, in past years, there was less Health District involvement due to the fundamental review recommendation to focus efforts to stabilize the Health District. The

approach at that time was more reactive to the newly introduced legislation. Now, with the Community Health Needs Assessment that has been conducted, the Community Health Improvement Plan and our Strategic Plan Objectives and policy changes, the Health District is more prepared to engage in a more proactive way.

In addition to the Staff Report, Mr. Dick brought the Board's attention to the supplemental documents in their packet. The first, a list of bills sorted by the area of the Health District that it would most affect, the Health District's position, if it's being tracked or monitored, and if testimony will be provided by the Health District. The document's categories are bills that would affect the Health District programs, services, and legislative priorities, bills that would affect the Community Health Improvement Plan (CHIP) priorities, the bills that would affect areas identified in the Community Health Needs Assessment that are not identified as a CHIP priority, bills that would affect the Department of Health and Human Services, and then other bills of interest that weren't easily categorized.

The other attachment is a listing of bills sorted by the Health District's level of interest. The bills that are being tracked are at the top of the list, those being the ones that the Health District is most engaged with. The remaining bills are those that are being monitored, in order to have a broader view of the outcome of the Legislative Session in regards to Public Health.

Mr. Dick said that a Legislative activity he wished to report on is in regards to AB193, the Community Water Fluoridation bill that Assemblywoman Joiner and Assemblyman Sprinkle introduced. He informed that he did provide public comment at the February 15th TMWA Board meeting in regards to the health and financial benefits of community water fluoridation. The TMWA Board had voted to oppose, but had characterized their position as not supporting the bill in its current form. Mr. Dick thanked Councilman Dahir who was representing the Sparks Mayor on the Board for his thoughtful comments regarding Public Health and benefits during that discussion.

Mr. Dick stated that another activity he wanted to report on is SB91, Senator Hardy's bill, regarding the review of Medicaid reimbursement rates. Dr. Iser with the Southern Nevada Health District was testifying in support and Mr. Dick had requested to have him add Washoe County Health District's support to his. This bill is in alignment with the Health District's priority of Access to Health Care, by assuring physicians are paid at a rate that will allow them to provide services.

Mr. Delgado asked why there was opposition to AB193. Mr. Dick responded that there were two key reasons for opposition. One is that the TMWA Board was informed that the cost would be \$70M to implement community water fluoridation, and that it would be \$3M per year for operation and maintenance costs. Mr. Dick stated that he questioned those figures when he made his public comment. That figure is based on fluoridation of every well within the TMWA system, which Mr. Dick opined was not intended to be required.

The other point of opposition was their opinion that this should be put to vote rather than decided by the Legislature.

Chair Jung stated that the benefits of fluoridation are supported by research and should be supported as a benefit to the community.

Mr. Delgado asked what the source of the data was, and Mr. Dick stated that he had met with TMWA last year in an attempt to accurately estimate the cost of fluoridation. He explained that he'd had the opportunity to work with an engineer from Stantec and one from TMWA, to discuss the cost of the project and options for fluoridation that would not require all of the wells to be fluoridated to reduce costs. Mr. Dick stated that he did not receive a report due to their stating that they were refining the numbers. A meeting scheduled for the

morning of February 15th to obtain the revised cost estimates was postponed by them until this morning (2/23/17) and then they cancelled the meeting this morning. They were to have provided a memo today, and Mr. Dick said that they'd provided a CD instead and he hadn't had time to review it prior to this Board meeting.

Mr. Dick stated he was aware of a Public Records Request that had been made, and TMWA provided the requestor with a report from October 31, 2016, which was the point in which TMWA had stated they needed to refine the numbers that Mr. Dick has never received. TMWA informed the Board on February 15, 2017 that the cost would be \$70M for the system and \$3M/year thereafter. The October 16th report showed \$60M and \$3M/year, however the rough estimate determined in the discussion with the engineers was about half of that if only the sole source wells of small systems were fluoridated, and not every well.

Mr. Dahir said that he is an alternate on the Board and was present at the meeting, and that the Board bases their decision on information given. He has come to understand in his contact with the community that it's not necessarily that fluoridation is opposed, but the associated cost of fluoridation. That being said, Mr. Dahir stated that the Health District's perspective is to do what is best for the community, which is different that the perspective of the city or county, whose focus is financial. With better information, he opined that the city and county's perspective could be swayed in favor of fluoridation.

Mr. Brown moved to approve the Update regarding Bill Draft Requests and Bill Drafts for the 2017 Legislative session. Chair Jung seconded the motion which was approved six in favor and none against.

16. Review, discussion and direction to staff regarding the provisions of the Interlocal Agreement (ILA) entered into by the Cities of Reno and Sparks and Washoe County for the creation of the Health District. Take action to accept the ILA in its current form *or* direct staff to forward any recommendations for possible amendments to Reno, Sparks and Washoe County

Staff Representative: Leslie Admirand

Chair Jung asked if this was an administrative/bookkeeping issue, and Ms. Admirand responded that it is, per section 7C of the Interlocal Agreement that requires the Board to review it annually. If there are any recommended possible amendments to direct staff to present them to the cities of Reno and Sparks and the County.

Chair Jung if there were any recommendations on the Interlocal Agreement, and there were none.

Dr. Novak moved to accept the ILA in its current form. Dr. Hess seconded the motion which was approved six in favor and none against.

17. *Staff Reports and Program Updates

A. Air Quality Management, Charlene Albee, Director
Program Update, Divisional Update, Program Reports

Ms. Albee stated that she had nothing to add, but was available to answer questions.

B. Community and Clinical Health Services, Steve Kutz, Director
Program Update – HIV Program; Divisional Update – Patagonia Health; Data & Metrics; Program Reports

Mr. Kutz also stated that he had nothing to add to his report, but would be happy to answer any questions.

C. Environmental Health Services, Bob Sack, Director

EHS Division and Program Updates – Childcare, Food, Invasive Body Decoration (IBD), Land Development, Vector-Borne Disease and Waste Management

Mr. English reported in Mr. Sack’s absence, wishing to highlight that the food safety program last month held two workshops regarding service animals that had standing-room-only attendance. There was such a level of interest that they have been requested to present at a state conference, and possibly present at the Southern Nevada Health District as well.

The other item he wished to present is the tremendous amount of flooding in Lemmon Valley, as well as lesser amounts of flooding in Golden Valley and Silver Lake. Mr. English informed that Washoe County Environmental Health is working closely with the Washoe County Community Services Department providing any and all resources available to the residents of the affected areas.

Also, Mr. English stated that Environmental Health is working with the underground storage tank programs, and that it is an EPA program with the State of Nevada being a designated administrator of the EPA program locally. The regulations are set to go into effect in 2018. Currently all new gas stations or those remodeled in the past two years meet the new standards. Mr. English said that the Environmental Health Division would address any instances on a case by case basis for those that can’t pass the new testing if it becomes law.

Dr. Novak asked why the service dog presentations were so successful. Mr. English opined it was due to them bringing in the ADA with a service dog that demonstrated how a true service dog behaves. All of the issues regarding dogs in shopping carts and, eating off tables were addressed, and the interaction between the public and staff was very good.

Mr. English informed that one of the meetings was held at the Washoe County Complex and another was held by the Nevada Restaurant Association, and there was also coverage by the local press and through Facebook.

Chair Jung stated she was aware that this is a big issue for public service industries such as restaurants and airlines, and that it is now becoming more clear what a service dog actually is and how they should behave. She encouraged Environmental Health to present this show at the mentioned venues.

D. Epidemiology and Public Health Preparedness, Dr. Randall Todd, Director

Program Updates for Communicable Disease, Public Health Preparedness, and Emergency Medical Services

Dr. Todd gave an update on the article published in the Morbidity and Mortality Weekly Report regarding the antibiotic resistant pneumonia he’d reported on at last month’s DBOH. There is a service engaged by MMWR called Altametrics which scores articles based on the amount of discussion they receive in the various media forms. He informed that if the article receives a score over 19, it indicates that the article is in the top 5% of articles viewed that is tracked by this method. Last month, the pneumonia report’s score was 1797, and it is now at 1851.

Dr. Todd informed that it was Q&D Trucking that transported the water tanks to the Pyramid Lake Paiute Tribe during the January flood.

Dr. Todd directed the Board’s attention to tables within the packet that shows the patient’s perspective from the time of the initial call to the Fire Department or REMSA’s arrival.

E. Office of the District Health Officer, Kevin Dick, District Health Officer

District Health Officer Report –Board of County Commissioners Strategic Planning Workshop, Quality Improvement, Accreditation, Strategic Plan, , Community Health Improvement Plan, Community Health Needs Assessment, Truckee Meadows Healthy Communities (TMHC), Other Events and Activities and Health District Media Contacts

Mr. Dick informed that the Truckee Meadows Healthy Communities had provided a Housing Forum in January with approximately 50 in attendance engaged in finance, development, construction and local and state government. This forum was facilitated by Enterprise Community Partners. At the conclusion of this meeting, it was decided that another meeting would be necessary to form the structure in which to implement the objectives set forth in the first meeting, and that it has been set for March 8th.

In a conversation earlier today, Mr. Dick spoke with Chris Askin of the Community Foundation regarding collaborating with them on in community-wide forum that would entail a “town hall” meeting venue for housing that will happen in April.

Mr. Dick stated that the initiative for housing is continuing to move forward to address the spectrum of needs in the community.

15. *Board Comment

Dr. Novak stated that he wished to direct the Board to send an immediate request to the TMWA Board for updated, corrected figures on the cost of fluoridation. Due to testimony on the bill regarding fluoridation that will occur in the near future, he recommended including a deadline in the request.

He stated that with 70 years of water fluoridation data and 140 healthcare organizations that support water fluoridation, studies have revealed a wide variety of health benefits that fluoride provides.

Dr. Novak stressed that he would like to send the request to TMWA the next day, in order to have the best opportunity to obtain necessary data to accurately support legislation regarding fluoridation.

Chair Jung stated that she would like to have a presentation by St. Mary’s Health Network at the March 23rd DBOH Meeting on their Partnership Program with the American Heart Association regarding The Little Hats, Big Hearts Program. In this program, community members knit hats for babies, and Chair Jung would like them to be recognized and to then present their Program to the Board of County Commissioners for a possible resolution.

16. *Public Comment

As there was no one wishing to speak, Chair Jung closed the public comment period.

17. Adjournment

Chair Jung adjourned the meeting at 3:00 p.m.

Possible Changes to Agenda Order and Timing. Items on the agenda may be taken out of order, combined with other items, withdrawn from the agenda, moved to the agenda of another later meeting; moved to or from the Consent section, or they may be voted on in a block. Items with a specific time designation will not be heard prior to the stated time, but may be heard later. Items listed in the Consent section of the agenda are voted on as a block and will not be read or considered separately unless withdrawn from the Consent agenda.

Special Accommodations. The District Board of Health Meetings are accessible to the disabled. Disabled members of the public who require special accommodations or assistance at the meeting are requested to notify Administrative Health Services in

writing at the Washoe County Health District, PO Box 1130, Reno, NV 89520-0027, or by calling 775.328.2416, 24 hours prior to the meeting.

Public Comment. During the “Public Comment” items, anyone may speak pertaining to any matter either on or off the agenda, to include items to be heard on consent. For the remainder of the agenda, public comment will only be heard during items that are not marked with an asterisk (*). Any public comment for hearing items will be heard before action is taken on the item and must be about the specific item being considered by the Board. In order to speak during any public comment, each speaker must fill out a “Request to Speak” form and/or submit comments for the record to the Recording Secretary. Public comment and presentations for individual agenda items are limited as follows: fifteen minutes each for staff and applicant presentations, five minutes for a speaker representing a group, and three minutes for individual speakers unless extended by questions from the Board or by action of the Chair.

Response to Public Comment. The Board of Health can deliberate or take action only if a matter has been listed on an agenda properly posted prior to the meeting. During the public comment period, speakers may address matters listed or not listed on the published agenda. The *Open Meeting Law* does not expressly prohibit responses to public comments by the Board of Health. However, responses from the Board members to unlisted public comment topics could become deliberation on a matter without notice to the public. On the advice of legal counsel and to ensure the public has notice of all matters the Board of Health will consider, Board members may choose not to respond to public comments, except to correct factual inaccuracies, ask for Health District Staff action or to ask that a matter be listed on a future agenda. The Board of Health may do this either during the public comment item or during the following item: “Board Comments – Limited to Announcement or Issues for future Agendas.”

Posting of Agenda; Location of Website.

Pursuant to NRS 241.020, Notice of this meeting was posted at the following locations:

Washoe County Health District, 1001 E. 9th St., Reno, NV
Reno City Hall, 1 E. 1st St., Reno, NV
Sparks City Hall, 431 Prater Way, Sparks, NV
Washoe County Administration Building, 1001 E. 9th St, Reno, NV
Washoe County Health District Website www.washoecounty.us/health
State of Nevada Website: <https://notice.nv.gov>

How to Get Copies of Agenda and Support Materials. Supporting materials are available to the public at the Washoe County Health District located at 1001 E. 9th Street, in Reno, Nevada. Ms. Laura Rogers, Administrative Secretary to the District Board of Health is the person designated by the Washoe County District Board of Health to respond to requests for supporting materials. Ms. Rogers is located at the Washoe County Health District and may be reached by telephone at (775) 328-2415 or by email at lrogers@washoecounty.us. Supporting materials are also available at the Washoe County Health District Website www.washoecounty.us/health pursuant to the requirements of NRS 241.020.