Public Health

## 2024 Board Retreat

**January 13, 2025** 

## **Outcomes for this Cycle**

### **FY26 Planning**

- Strategic Priorities, Goals & Outcomes
   Review, refinement BUT not major change
- Initiatives To be refreshed
- Refresh the Strategy with the emerging issues/topics







## **Retreat Flow**

Time Block	Discussion Item	Speakers
:10 mins	Welcome & Opening	Chair, DHO, Erica
:15 mins	Strategic Planning & Implementation Process	Erica
:30 mins	Fiscal Health & Sustainable Funding  • Expense & Revenue  • Projections  • Ending Fund Balance	Jack & Chad
:20 mins	Legislative Priorities  • General Overview  • Principles & Priorities for 2025 Session	Joelle
:15 mins	Board Composition	Erin
:15 mins	Strategic Snapshot  Community Indicators - Progress to Date	Ray, Erica
:75 mins	Organizational Impact  • Goals & Outcomes - Progress to Date  • Service Levels & Staffing  • Impact Strategies	Ray, Erica
Time Permitting	Community Partnerships Opportunities for community partners	Ray
:15 mins	FY26 Focus  Re-cap of strategic direction and focus for FY26	Chad, Erica





# Strategic Planning & Governance Overview

**Background on the FY24-26 Strategic Planning process** 

## **MISSION**

To improve and protect our community's quality of life and increase equitable opportunities for better health.



## **FY24-FY26 Strategic Priorities**

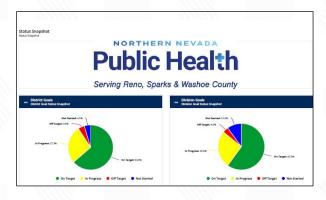
- 1. **HEALTHY LIVES:** Improve the health of our community by empowering individuals to live healthier lives.
- 2. **HEALTHY ENVIRONMENT:** Create a healthier environment that allows people to safely enjoy everything Washoe County has to offer.
- LOCAL CULTURE OF HEALTH: Lead a transformation in our community's awareness, understanding, and appreciation of health resulting in direct action.
- **4. IMPACTFUL PARTNERSHIPS:** Extend our impact by leveraging collaborative partnerships to make meaningful progress on health issues.
- **5. ORGANIZATIONAL CAPACITY:** Strengthen our workforce and increase operational capacity to support growing population.
- **6. FINANCIAL STABILITY:** Enable the Health District to make commitments in areas that will positively impact the community's health through reliable and sustainable funding.

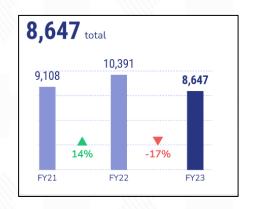




## **Overview of Board Reports**







#### **Monthly Division Reports**

Purpose: Division update, generally includes summary of key Division data

#### **Quarterly Results**

Purpose: Results compared to performance management targets. Now also includes volume data to provide context for performance results.

#### **District Snapshot**

Purpose: High level aggregate overview of District efforts including volume indicators and some performance indicators.





# Fiscal Health & Sustainable Funding

Clarity around NNPH's financial situation in FY24, Status of FY25 and beyond.

Public Health

## **Budget Overview**

**January 13, 2025** 

Jack Zenteno, Administrative Health Services Officer

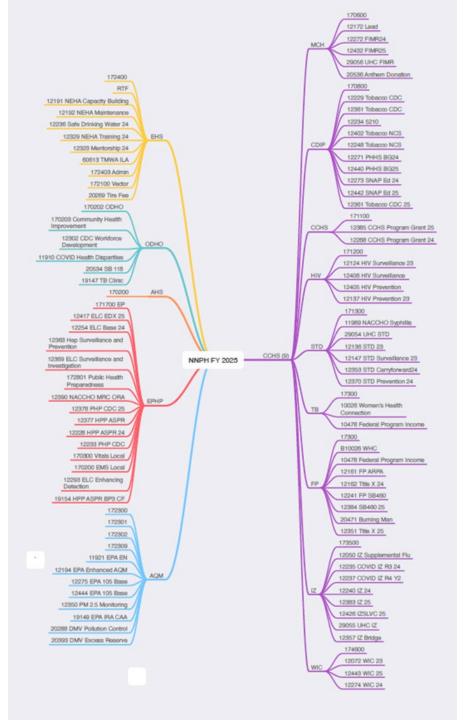
### **Overview**

- Review of Fiscal Year 2024
- Revenues
- Expenditures
- Staffing
- Status of Fiscal Year 2025
- Projections and Discussion of Fiscal Year 2026-2030















# Review of Fiscal Year 2024

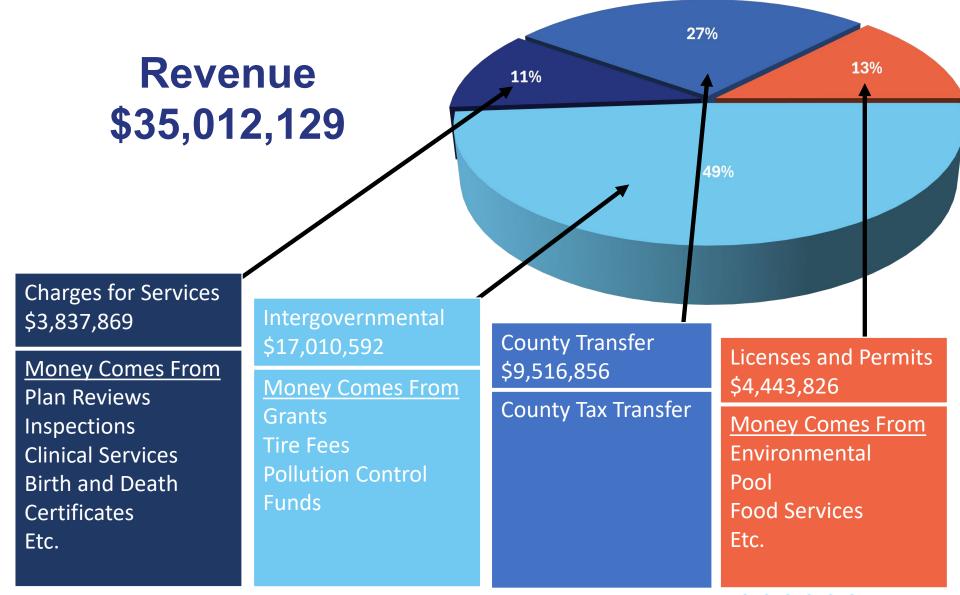


## Revenues

### Revenue Year over Year FYs 2020-2024

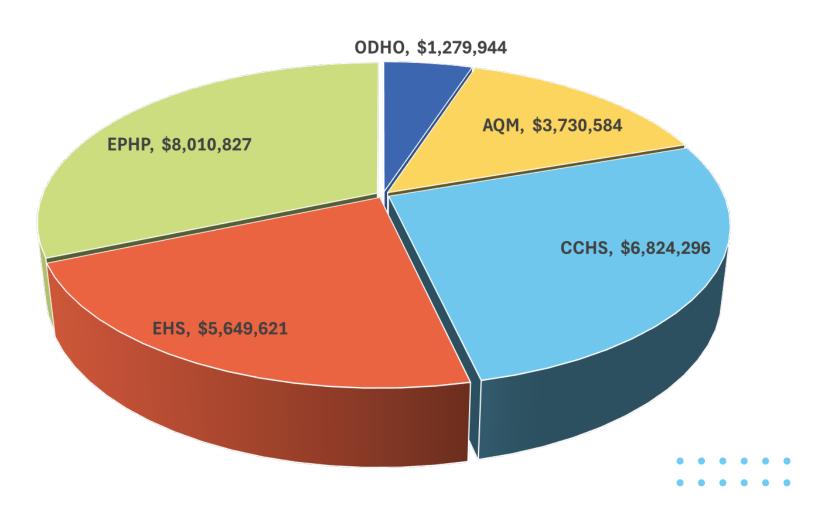








## **Revenue by Division FY 2024**

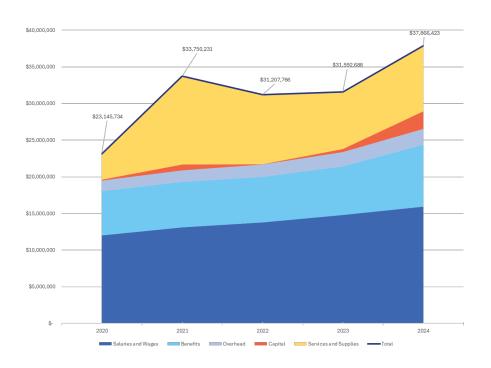


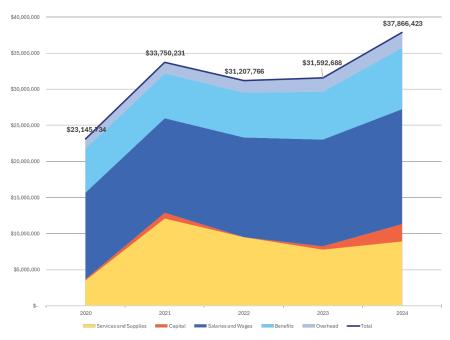




## **Expenditures**

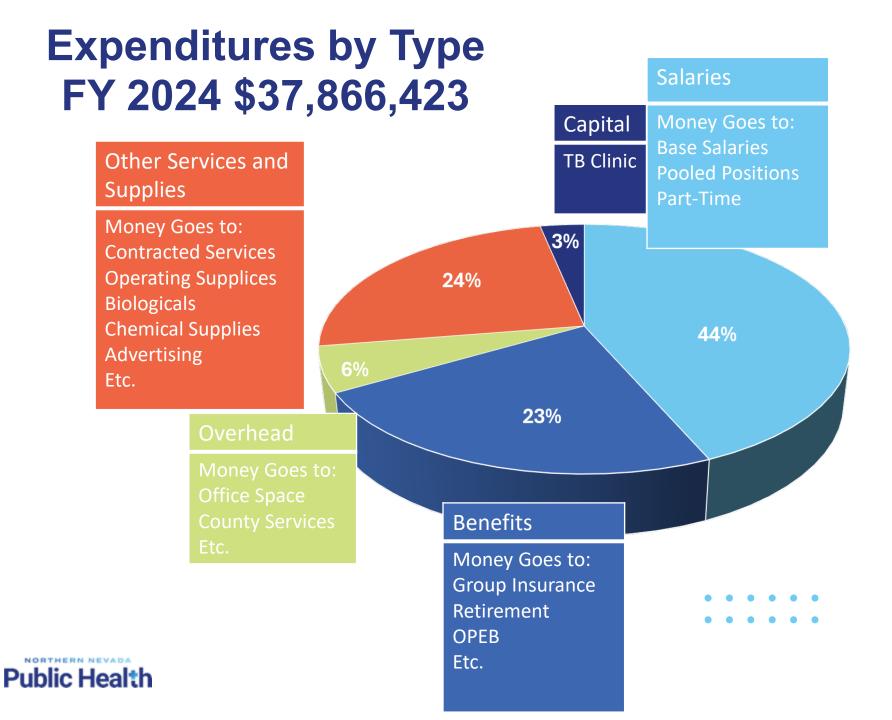
## **Expenditures Year Over Year FYs 2020-2024**



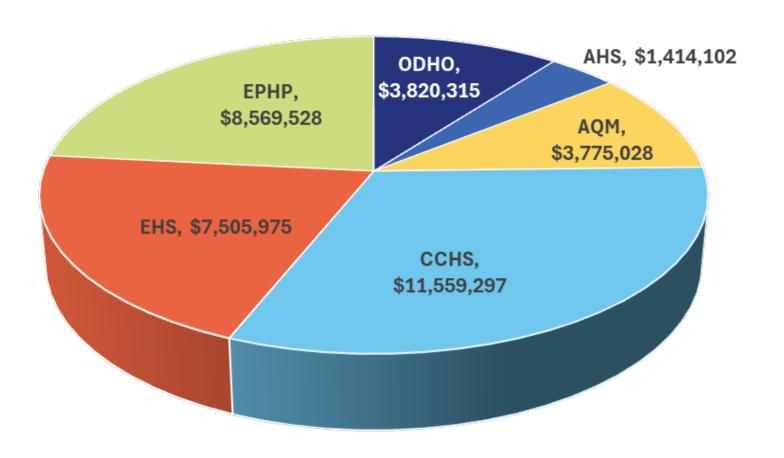






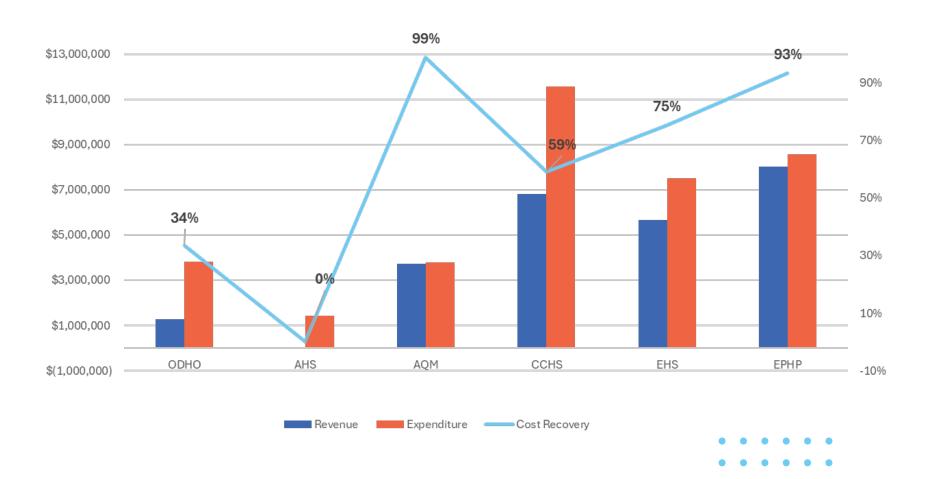


## **Expenditures by Division FY 2024**



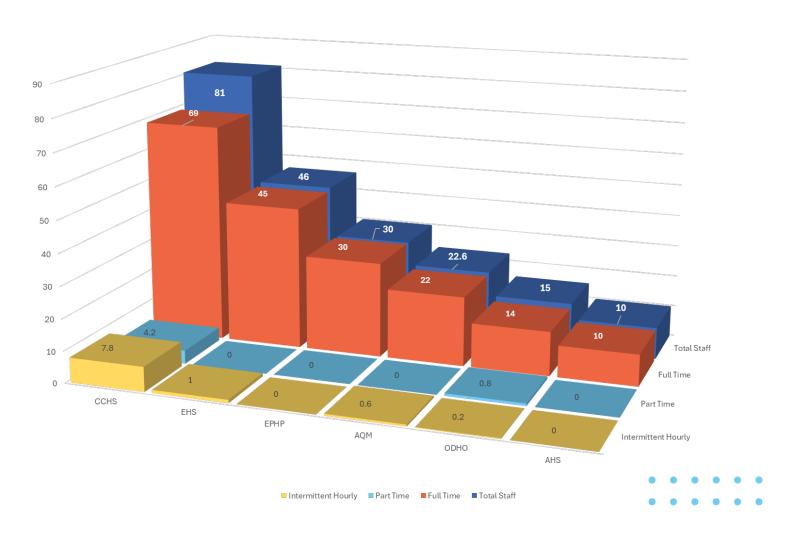


## Revenues vs Expenditures by Division FY 2024



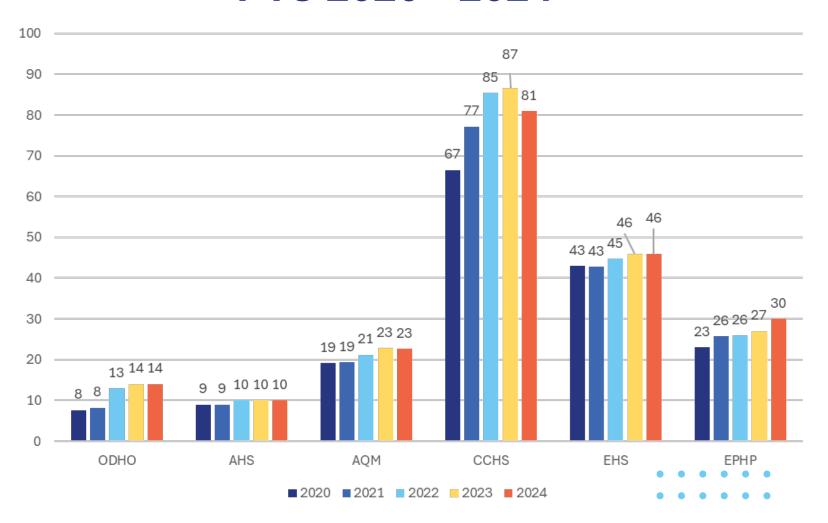


## Full Time Equivalent (FTE) by Division





## FTE by Division Year Over Year FYs 2020 - 2024







## **Projections**



## What we Know(ish)

### **Assumptions**

- State Funding (SB118) continues through FY 2030 (three State budget cycles of approved funding)
- Flat Federal funding

### Generally

- Federal uncertainty
- State Economic Forum is tempered but positive
- Local budget shortfalls

#### Revenues

- Grants are flat overall with some decreasing
- New fees for EHS and AQM for FY 2025
- Public Health Improvement Funding (formally SB118)
- TB Building
- COVID Funding

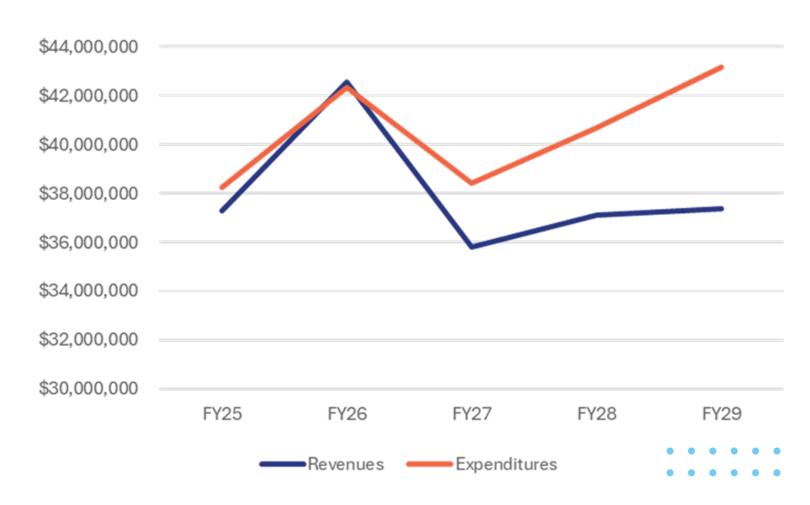
### **Expenditures**

• Salaries, benefits, overhead are putting a strain on our budgets



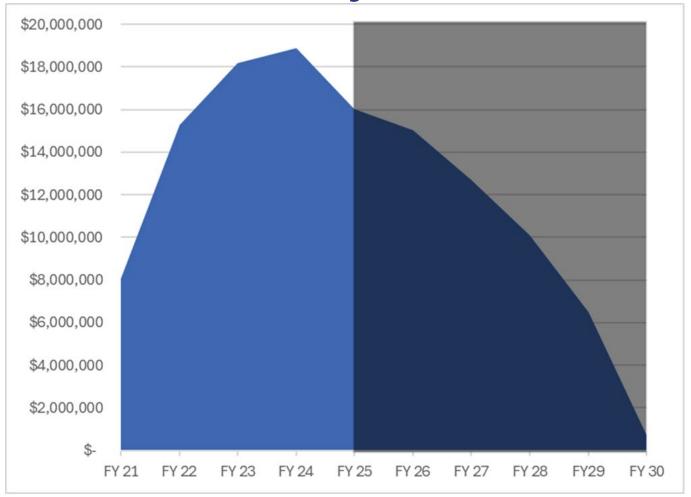


## Revenue and Expenditure Projections FYs 2025-2030





## **Fund Balance Projections FY 25-29**









## **Next Steps**

- Continue Divisional Assessments and implement efficiencies
- Continue to look for additional funding opportunities
- Reevaluate fee structure before scheduled timeline
- Review enabling framework and begin the process of reducing Departmental activities
- Begin implementing changes by July 1, 2026







## **Legislative Priorities**

Action on the 2025 Legislative Principles & Priorities.

## What we are anticipating:

- Sustainable Funding
- Food Vendors
- Super Boards
- Tobacco
- Solid Waste/Safe Drinking
- EMS
- Congenital Syphilis





## What we are watching out for:

- Unfunded mandates
- Loss of authority
- Degradation of Public Health
- Loss of funding
- Funny Business





## **Legislative Principles**

### 2025

- Collaboration across all levels of government
- Sustained Investment in Public Health
- Local Flexibility and Control
- Equity and Resilience in Public Health Systems
- Preservation of Public Health Authority

(For Possible Action)





## **Legislative Priorities**

### 2025

- Sustained Public Health Improvement Fund (PHIF)
- Environmental Health Protections: Equal Standards of Safety
- Public Health Workforce Development
- Health Equity and Social Determinants of Health
- Emergency Preparedness and Resilience

(For Possible Action)





### **For Action**

Discussion and Possible Adoption of Northern Nevada Public Health 2025 Legislative Principles and Priorities and Possible Direction to Staff.







## Public Health

## **Board Composition**

Background and discussion around the Board composition.

#### Public Health

# District Board of Health and District Health Officer in Counties Whose Population is Less Than 700,000

NRS 439.369	Applicability.
NRS 439.370	Health district: Creation.
NRS 439.380	County or city board of health abolished upon creation of district board of health.
NRS 439.383	County boards of health within district abolished upon creation of district board of health.
NRS 439.385	City and town boards of health abolished upon creation of district board of health.
NRS 439.390	District board of health: Composition; qualifications of members.
NRS 439.400	Appointment, qualifications, powers and compensation of district health officer;
	clinical program requiring medical assessment must be supervised by physician.
NRS 439.405	Duties of district health department to ensure access for persons with limited English proficiency to certain services related to COVID-19; collaboration with community-based organizations; gifts, grants, donations and other funding.
NRS 439.410	Powers and jurisdiction of district board of health and district health department;
	regulations of district board of health.

### NRS 439.390 District board of health: Composition; qualification of members

For populations less than 700,000

- A district board of health must consist of two members from each county, city or town which participated in establishing the district, to be appointed by the governing body of the county, city or town in which they reside, together with one additional member to be chosen by the members so appointed.
- 2. The additional member must be a physician licensed to practice medicine in this State.
- 3. If the appointive members of the district board of health fail to choose the additional member within 30 days after the organization of the district health department, the additional member may be appointed by the Chief Medical Officer.

Part 35:199:1911; added <u>1939, 297</u>; 1931 NCL § 5268.01]—(NRS A <u>1959, 104</u>; <u>1963, 941</u>; <u>1991, 1379</u>)





#### Bylaws of the DBOH

#### Article 3 – Members

.....Washoe County Board of County Commissioners, Reno City Council and Sparks City Council shall each appoint two members of the District Board of Health, only one of who shall be an elected member of the governing body.

3.3 Members of the District Board of Health shall serve four-year terms. Each member may be re-appointed in the same manner as their original appointment to serve not more than two additional terms.

#### **Article 4 – Officers**

Chair and Vice Chair – 2 year appointments

District Health Officer - Non-voting member of DBOH







## Strategic Snapshot 2024

Understanding of the results achieved in 2024.

#### **District Snapshot**

#### Data Represented: Districtwide View

- Storytelling tool
- Rolls up similar data points
- Workload Indicators
- Performance Indicators

Frequency: Annually

#### **Intended Audience:**

- Board of Health
- Stakeholders
- Public

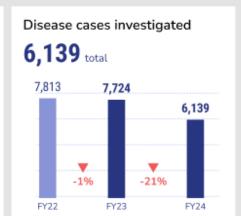




Clients directly served

11,191
total
(includes duplicated clients)





93.50%

of FY24 investigations initiated/completed within recommended timeframe

92.20% target

#### Inspections completed

8,186 total



80% % of required inspections completed

#### Plan & building reviews completed

3,406 total



FY24

**73%** 

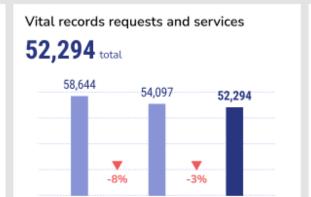
% of plan and building reviews completed within jurisdictional time frames

IN FY24

Permits, registrations and notifications managed

16,177 total





FY23

FY22

# Public records requests fulfilled 5,009 total 4,836 5,009

FY23

FY24

10%

FY22

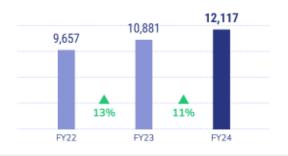
Social media posts

1,987 total



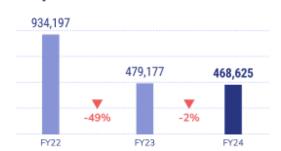
Social media followers

12,117 total



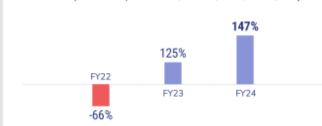
Web clicks on district website

468,625 total



Engagement growth YoY

147% increase in engagement on all social media platforms (comments, shares, likes, clicks, etc.)



481

Web visits to the TMT health portal (informed by CHA)

IN FY24

383

Community outreach efforts and community presentations

In FY24

Press releases, media alerts, media availability

FY23

111

FY24

-13%

111 total 164 127

FY22

-23%

**8**1

Partnerships with community organizations

In FY24

Communicable disease reports and assessments provided

**78** total



202

Full-time employees

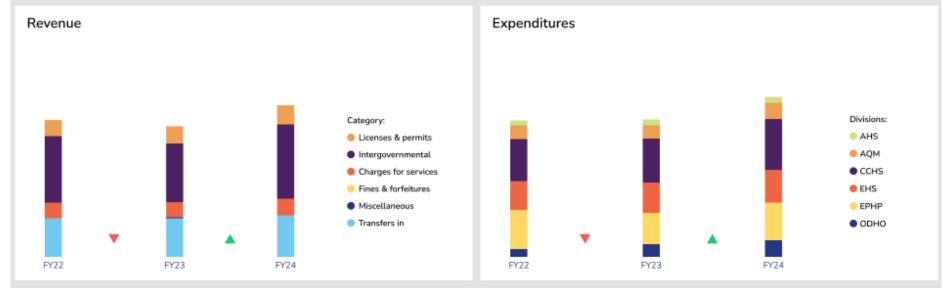
192

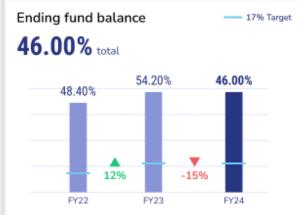
Full-time and Part-time positions

41
Intermittent/hourly

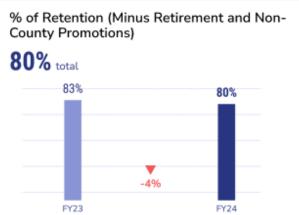
8 Interns 12% position vacancy rate

5% target











### Organizational Impact

Understanding of the Outcomes achieved to date and expected through FY25.

#### **FY24-FY26 Strategic Priorities**

- **1. HEALTHY LIVES:** Improve the health of our community by empowering individuals to live healthier lives.
- **2. HEALTHY ENVIRONMENT:** Create a healthier environment that allows people to safely enjoy everything Washoe County has to offer.
- **3. LOCAL CULTURE OF HEALTH:** Lead a transformation in our community's awareness, understanding, and appreciation of health resulting in direct action.
- **4. IMPACTFUL PARTNERSHIPS:** Extend our impact by leveraging collaborative partnerships to make meaningful progress on health issues.
- **5. ORGANIZATIONAL CAPACITY:** Strengthen our workforce and increase operational capacity to support growing population.
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#### 1. Healthy Lives

Improve the health of our community by empowering individuals to live healthier lives.

#### **Outcomes**

14 0 2 2
On Target Off Target Critical Deferred

#### **District Goals**

- **1.1** Promote healthy behaviors to reduce chronic disease and injury.
- **1.2** Promote preventive health services that are proven to improve health outcomes in the community.
- 1.3 Improve access to healthcare so people of all means receive the health care services they need.



#### Highlights

80%	Maintaining breastfeeding rates at 80% among WIC clients.
98%	Maintained 98% of enrolled WIC participants.
1,073	clients <b>served</b> in the immunization program.
91%	<b>91%</b> of foodborne, vector borne, vaccine preventable, disease of unusual occurrence, cases investigated within designated time frame.
1,110	clients received family planning and sexual health services.

- Increased the number of multi-family housing properties with smoke free policies.
- Quarterly educational messaging delivered to seniors related to fall prevention.
- Increased the number of clients and community members with navigation of community resources.

#### In Need of Attention

- · Reaching residents about the impact of secondhand cannabis smoke exposure.
- % of all individuals suspected to have active TB status confirmed within 1 business day via Nucleic Acid Amplification Test (NAAT).
- For clients with active tuberculosis, increasing the percentage that have sputum culture conversion within 60 days of treatment initiation.

#### **Focus for FY26**

- Community Partnerships
- Customer Service



### 2. Healthy Environment

Create a healthier environment that allows people to safely enjoy everything Washoe County has to offer.

#### **Outcomes**

18 3 2 2
On Target Off Target Critical Deferred

#### **District Goals**

- **2.1** Protect people from negative environmental impacts.
- 2.2 Keep people safe where they live, work and play



#### **Highlights**

98.7% data capture rate for ozone.		98.4%	98.2%
		data capture rate for PM2.5.	data capture rate for PM10.
96% of dust perm		s managed within 10 business	days.
95%	of stationary s	ource authority to operate perr	nits issued within 180 days.
100%	of asbestos pe	ermits managed within internal	best practice standard.
95%	of first review turnaround.	plans for compliance with AQ r	regulations met 2-week
98%	residential sep	otic and well plan reviews mee	t a 2-week turnaround.
24	outreach eve	nts held to educate leaders, de	ecision makers and regulated

#### In Need of Attention

entities.

· Improve data collection.

21

- Complete 100% of inspections at permitted waste management facilities.
- Develop a system to track occurrence of foodborne illness risk factors in inspected facilities.
- · Percentage of required inspections of food establishments completed.
- Update SOPs and develop standardized processes to support inspections
- Staff turnover pacing national trend.

#### **Focus for FY26**

- Customer Service
- Efficiency



### 3. Local Culture of Health

Lead a transformation in our community's awareness, understanding, and appreciation of health resulting in direct action.

#### **Outcomes**



#### **District Goals**

- **3.1** Ensure community access to actionable public health information via website, media and social media.
- **3.2** Inform the community of important community health trends by capturing and communicating health data.
- **3.3** Drive better health outcomes in Washoe County through improved public health systems and policies.

#### **Highlights**

100%	Processed <b>100%</b> of vital records requests & services within 96 hours.
100%	Delivered 100% of internal & external requests for statistical analysis.
+5%	Increased Spanish language Facebook followers by <b>over 5</b> %.
+5%	Increased audience growth by 5% across all social media platforms.

- Implemented public information campaigns designed to promote health equity and reduce health disparities.
- Actively engaged in local policies to advocate for better quality of life in Washoe County.
- Broadened NNPH outreach to LinkedIn.
- Website page view data is up 15% in FY25 so far.

#### In Need of Attention

• Increase impressions across all social media posts by 10%.

#### **Focus for FY26**

Customer Service





### 4. Impactful Partnerships

Extend our impact by leveraging collaborative partnerships to make meaningful progress on health issues.

#### **Outcomes**



#### **District Goals**

- **4.1** Support and promote behavioral health.
- **4.2** Advance efforts to improve health living behaviors with an emphasis on prevention.
- **4.3** Advance efforts to improve access to health care.
- **4.5** Enhance the regional emergency medical services system
- **4.6** Engage the community in public health improvement.
- **4.7** Improve the ability of the community to respond to health emergencies.
- **4.8** Partner with academia to advance public health goals.



#### **Highlights**

84%	Of applicable WIC participant interactions received substance abuse screening, education and referrals. (target 90%)
87%	Of FHF participants received the services needed. (target 80%)
+5	Increased the number of organizations leading CHIP initiatives from <b>30 to 35</b> .

- Expanded the number of sites implementing the 5210 Healthy Washoe program from 5 to 6 elementary schools.
- Implemented 4 initiatives to improve disparate health outcomes by involving partners that represent underserved communities.
- Working with community partners and the state to implement elements of the behavioral health crisis system.
- Implemented a lethal means reduction strategy in coordination with the Washoe Suicide Prevention Alliance.
- Increased the number of cross-divisional projects working with the health equity team and/or community-based partners to impact health disparities.
- Executed regional emergency response exercise with regional healthcare partners.
- Ensuring standardized, recurring internship opportunities.

#### In Need of Attention

- Implement 4 strategies from the EMS Strategic Plan FY24-29.
- Recruit community representatives to establish a cross-sector health coalition.
- Implement 1-2 strategies from the jurisdictional risk assessment.
- Review policies or laws that have a disproportionate effect on one or more subpopulations in Washoe County.

#### **Focus for FY26**

Community Partnerships



### 5. Organizational Capacity

Strengthen our workforce and increase operational capacity to support growing population.

#### **Outcomes**

 10
 4
 1
 5

 On Target
 Off Target
 Critical
 Deferred

#### **District Goals**

- **5.1** Attract and retain a talented public health workforce to meet the needs of Washoe County.
- **5.2** Meet and exceed national public health best practice standards.
- **5.3** Invest in expanded Health District capacity and targeted services to meet the needs of a growing and diverse community.
- **5.4** Maximize and expand facilities to meet the needs of staff and clients.
- **5.5** Leverage technology to improve services, increase effectiveness and efficiency, and provide access to higher quality data.



#### **Highlights**

+2%	Increased mandatory training completion rate from 96% to 98%.
+1	Increased the number of mental health resources provided to staff in the workplace from <b>2 to 3</b> .
16%	Percentage of AQMD customers paying through the Accela Custome Access platform.
100%	Met 100% of requirements to maintain public health accreditation.

- Making progress on the health equity plan by completing 3 initiatives.
- Increased self service payments made via Accela.

#### In Need of Attention

- · Maintain 5% or less employee vacancy rate.
- Increase probationary/annual evaluation completion rate from 80% to 85%.
- Identify Quality Improvement projects using data from the performance management system to improve services, programs and efficiencies.
- At least 50% of employees feeling proficient on targeted core competencies.
- Develop a plan to meet the office space needs of NNPH employees.
- Integration of new/renewed sources into the software.
- Supporting new county ticketing system as appropriate.

#### **Focus for FY26**

- Efficiency
- · Customer Service
- Sustainable Funding



### 6. Financial Stability

Enable the Health District to make commitments in areas that will positively impact the community's health through reliable and sustainable funding.

#### **Outcomes**



#### **District Goals**

**6.1** Update NNPH's financial model to align with the needs of the community.

#### **Highlights**

100%	Compliance with purchasing and contract procedures maintained.
100%	Grant compliance maintained.
100%	Cost recovery for AQM permitting, compliance programs and vital records services maintained.
12	Contracted insurance companies providing access and revenue through billable services.

• On target toward maintaining an ending fund balance of 10-17%.

#### In Need of Attention

- % of costs recovered for clinic services through client and third-party payer payments.
- Increasing the percent of costs recovered through EHS fees.

#### **Focus for FY26**

- Efficiency
- Sustainable Funding





# **Community Partnerships**

Discussion on where to strengthen NNPH's Impact through Partnerships

#### **Leveraging NNPH's Impact**

Improve alignment between current work among community partners and NNPH.

Increase performance by collecting higher quality and credible data to document progress of health outcomes.

Expand NNPH's impact by collaborating with others who can create socioeconomic improvements.







### FY26 Focus

Alignment around the priorities for FY26



#### **FY26 Areas of Focus**

- 1. Funding
- 2. Customer Service
- 3. Efficiency
- 4. Community Partnerships

Where are we at? Where are we going?





#### **For Action**

Discussion and Possible Adoption of Northern Nevada Public Health 2025 Legislative Principles and Priorities and Possible Direction to Staff.





### Public Health