

Washoe County



Health District

## Washoe County District Board of Health Regular Meeting Minutes December 19, 2013 - Revised

**PRESENT:** Chair Matt Smith, Vice Chair Kitty Jung, David Silverman, Dr. George Hess, Dr. Denis Humphreys, Council Member Julia Ratti (1:08pm) and Council Member Sharon Zadra (1:18pm)

**ABSENT:** None

**REVISION: Item 17A, spelling of the word Botulism was corrected.**

**STAFF:**

Kevin Dick, Interim District Health Officer  
 Leslie Admirand, Deputy District Attorney  
 Eileen Stickney, Administrative Health Services Officer, AHS  
 Charlene Albee, Acting Division Director, AQM  
 Steve Kutz, Division Director, CCHS  
 Robert Sack, Division Director, EHS  
 Randall Todd, Dr. PH, Division Director, EPHP  
 Steve Fisher, Department Computer Application Specialist, AHS  
 Laurie Griffey, Admin Assistant I/Recording Secretary, AHS

Patsy Buxton, Fiscal Compliance Officer, AHS  
 Erin Dixon, Fiscal Compliance Officer, AHS  
 Jennifer Howell, Program Coordinator, CCHS  
 Linda Gabor, Public Health Nurse Supervisor, CCHS  
 Stacy Hardie, Public Health Nurse Supervisor, CCHS  
 Jeff Whitesides, Public Health Preparedness Manager, EPHP  
 Christina Conti, Emergency Response Coordinator, EPHP  
 Jacqueline Chaidez, Community Health Aid, WIC  
 Catherine Gipe, Licensed Practical Nurse, CCHS  
 Jan Houk, Public Health Nurse, CCHS

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
1:00 pm *1, 2	<b>Meeting Called to Order, Pledge of Allegiance and Roll Call</b>	<b>Chair Smith</b> called the meeting to order. Roll call was taken and a quorum noted. The Pledge of Allegiance was led by <b>Mr. Steve Kutz</b> .	
*3.	<b>Public Comment</b>	None.	
4.	<b>Approval / Deletions – Agenda – December 19, 2013</b>	<b>Chair Smith</b> called for any deletions or corrections to the Agenda of the December 19, 2013 DBOH Meeting.  <b>Chair Smith</b> noted that Item No. 16 would be continued to next month.	<b>Dr. Hess</b> moved, seconded by <b>Mr. Silverman</b> , that the December 19, 2013 Agenda be approved as amended.  <b><u>MOTION CARRIED</u></b>

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5.	<b>Approval / Additions / Deletions to the Minutes of the November 21, 2013 Regular Meeting</b>	<b>Chair Smith</b> called for any additions or corrections to the Minutes of the November 21, 2013 Regular Meeting.	<b>Commissioner Jung</b> moved, seconded by <b>Dr. Hess</b> , that the Minutes of the November 21, 2013 Regular Meeting be approved as presented.  <b><u>MOTION CARRIED</u></b>
*6.	<b>Recognitions</b>	<b>Mr. Dick</b> and <b>Chair Smith</b> made the following recognitions:  A. Introduction of New Employee(s) – 1. Jan Houk - Public Health Nurse – CCHS 11/18/13 B. Promotions – 1. Linda Gabor – Public Health Nurse Supervisor – CCHS – 12/9/13 2. Luke Franklin – Senior Environmental Specialist- EHS 12/2/13 C. Years of Service – 1. Jacqueline Chaidez – WIC – 10 Years D. Retirements – 1. Catherine Gipe – CCHS – 20+ Years E. Recognitions – None.	Mr. Smith and Mr. Dick
7.	<b>Proclamations</b>	None.	
8.	<b>Consent Agenda</b>	<b>A. <u>Air Quality Management Cases:</u></b>  1. Recommendation to Uphold Unappealed Citations to the Air Pollution Control Hearing Board.  a. McCarran Mart – Case 1137, NOV 5270 13900 Stead Boulevard, Reno NV 89506  2. Recommendation of Cases Appealed to the Air Pollution Control Hearing Board.  a. Custom Performance Restoration – Case 1133, NOV 5249 340 Freeport Boulevard #17, Sparks NV 89531	

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		<p>3. Recommendation for Variance: <b>None.</b></p> <p><b>B. <u>Sewage, Wastewater &amp; Sanitation Cases:</u></b> Recommendation to Approve Variance Case(s) Presented to the Sewage, Wastewater &amp; Sanitation Hearing Board. <b>None.</b></p> <p><b>C. <u>Budget Amendments / Interlocal Agreements:</u></b></p> <p>1. Ratification of Amendment #2 to Intrastate Interlocal Contract Between State of Nevada, Department of Conservation and Natural Resources, Division of Environmental Protection and the Washoe County Health District in the Total Amount of \$872,000 (\$218,000 base funding per year for FY14, FY15, FY16 and FY17) in support of the Underground Storage Tank (UST) and Leaking Underground Storage Tank (LUST) Grant Program; Approval of Amendments Totaling an Increase of \$21,519.85 in Revenue and Expense to the FY14 UST/LUST Grant Program, IO 10023; and if Approved Authorize the Chairman to Execute.</p>	<p><b>Council Member Ratti</b> moved, seconded by <b>Dr. Humphreys</b>, that the Consent Agenda be approved as presented.</p> <p><b><u>MOTION CARRIED</u></b></p>
9.	<b>Air Pollution Control Hearing Board Cases Appealed to the District Board of Health.</b>	None.	
10.	<p><b><u>Regional Emergency Medical Services Authority:</u></b></p> <p>A. Review and Acceptance of the Operations and Financial Reports for November, 2013; and</p> <p>B. Update of REMSA's Community Activities Since November, 2013</p>	<p><b>Mr. Jim Gubbels</b>, President of REMSA, reported that in November, 2013, Priority 1 Compliance was 94%, and Priority 2 Compliance was 98%. Priority 1 Compliance by zone, the 8-minute zone was 94%, the 15-minute zone was 98%, and the 20-minute zone was at 97%. Average bill for the month for Care Flight was \$7,687, which brought the year-to-date average to \$8,300. The average bill for Ground Service for the month was \$1,069, which brought the year-to-date ground average to \$1,066.</p> <p><b>Mr. Gubbels</b>, reported REMSA participated in several Christmas and community activities: Channel 2 Food Drive; Senior Bridges Part at Northern Nevada Medical Center, providing quilts and goodie bags for 45 seniors; Secret Santa at the Children's Cabinet; Shop with a Sheriff program and REMSA Care Flight hosted the Kids Christmas party for 72 children and REMSA staff.</p>	<p><b>Dr. Hess</b> moved, seconded by <b>Mr. Silverman</b>, to accept the REMSA Operations and Financial Report for November 2013 as presented.</p> <p><b><u>MOTION CARRIED</u></b></p>
11.	Presentation, Discussion, and Possible Direction to Staff regarding Emergency Medical Services ("EMS"),	<p><b>Dr. Todd</b> advised a brief report was submitted with the board packet. Additional information: The Executive Committee and Working Groups continue to meet; the Executive Committee is meeting on a more robust schedule. Significant progress is being made towards achieving a consensus on the various TriData</p>	

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	Including Recommendations Contained in the TriData Report and Various Other EMS Studies	recommendations. Once a consensus is reached a principle of agreement document will be developed and eventually be incorporated into a Revised Franchise Agreement.	Report presented no action taken. <b><u>NO MOTION</u></b>
12	Presentation, Possible Discussion with Recommendation for Approval of the Revisions to the District Board of Health's Multi-Casualty Incident Plan (MCIP)	<p><b>Ms. Conti</b>, Emergency Response Coordinator for the Health District and <b>Captain Millette</b>, Sparks Fire; gave a presentation on the recommended revisions to the Multi-Causality Incident Plan (MCIP). Ms. Conti introduced the regional partners present in support of the recommended revisions: Brian Taylor, REMSA; Tracy Moore, Washoe County School District Police; Rob McLaughlin, Emergency Manager VA Hospital and Chair of the Inter-Hospital Coordinating Council; and Tim Spencer, City of Reno Emergency Manager/Fire.</p> <p>The MCIP was created in 1996 and has had several revisions. The current recommended revisions came from the normal process of reviewing the plans and from recommendations which came out of the Air Race Multi-Causality Incident (MCI). The biggest recommended change is a different Triage system. During the Air Race MCI it was noted that the triage tags were not very effective when used in an actual incident with multiple casualties. A work shop was conducted in December 2012, involving all regional agencies impacted by the MCIP plan.</p> <p><b>Captain Millette</b> indicated a Triage Tag workgroup was created for the purpose of developing a new tool and a more effective triage system. The agencies who would respond to an MCI (REMSA and Fire Agencies) worked together in a FEMA supported exercise conducted at the Silver Club Casino in Sparks, Nevada. The exercise was used to test the different triage tools available. After testing the different triage systems, the group developed a Disaster Management System (DMS) with an effective quick Triage ribbon system. This DMS is much more efficient and effective, while being less cumbersome in the field; tie a ribbon on the patient and move on. Patients are moved from the scene to a re-triage/transport area according to the color of the ribbon. They are re-triaged according to their current condition before being transported to the hospital. Special tags can be places on contaminated patients. A more robust tag system is used at the re-triage/transport area than was used in the past. Samples were provided for the board to examine. These agencies worked well together on a common goal and created a great new system that will benefit the whole community.</p> <p><b>Ms. Conti</b> indicated the group took the information provided, rewrote the plan, sent it to the regional partners for review, then held a workshop on December 2, 2013, to allow regional partners a final opportunity to review and provide additional input. The changes included in the plan are the addition of an Air Operations Branch, the new triage system, and an appendix that addresses the integration of other organizations. She indicated this appendix was added since rural areas in our county may receive</p>	

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		<p>mutual aid from other organizations. The routine changes include cleanup of agency names, update of regional partnerships and equipment. The Air Operation Branch was added as a direct result from the Air Race MCI. It clarifies the use of aircrafts during multi-causality incidents. The triage tag system became a critical issue during the Air Race MCI. The new tags are more comprehensive and very intuitive. The ability to re-triage is critical and the new system integrates well with the medical facilities, and provides better tracking of patients through the Regional Emergency Operations Center. All of the agencies in the region will use the same triage tag, so the initial triage is the same no matter which agency does the triage. Ms. Conti indicated the next step in the process is the approval of the MCIP plan. If the plan is approved it will become effective January 1, 2014, and is estimated to be in full operational status by April 1, 2014. The expectation is to have training of all regional partners accomplished by the end of the first quarter of 2014.</p> <p><b>Dr. Hess</b> inquired if Carson City/Tahoe, Douglas and bordering counties are participating in the new Triage process.</p> <p><b>Captain Millette</b> indicated the other areas are not currently participating, but during the training process the group will reach out to the boarding cities/counties to share the information on the new DMS system. The new tags are very comprehensible.</p> <p><b>Ms. Conti</b> advised that the Health District in Carson City has already inquired about information on the new system and has started looking at the cost of implementing the new triage system. They may consider changing to the new process as they have the potential to receive patients from our area.</p> <p><b>Dr. Humphreys</b> asked if there will be follow up on training, since implementation will require all agencies to be trained.</p> <p><b>Captain Millette</b> indicated training will be done through a train the trainer type program. A couple representatives from each agency will be trained and will be responsible for providing training to all applicable staff in their agency. Follow up on the new triage process will be done during upcoming community wide drills. The new DMS triage system will be utilized during the Airport Broken Propeller drill scheduled in May 2014.</p> <p><b>Dr. Humphreys</b> inquired about the cost of this new triage process.</p> <p><b>Ms. Conti</b> advised that the initial startup cost were covered through a grant opportunity. Each agency will be responsible for the cost of replenishing their supply, which is the current practice.</p> <p><b>Commissioner Jung</b> inquired as to when all of the agencies will be carrying the new tags and if there are plans for a press release to advise the public of the improvements being made as a result of the Air Race MCI.</p>	

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		<p><b>Ms. Conti</b> indicated some equipment is available in the community; additional inventory can be purchases after the approval of the revised Multi-Casualty Incident Plan.</p> <p><b>Captain Millette</b> indicated he doesn't see an issue with a press release but advised it would be up to higher management to decide. It may not be beneficial to relate it back to the Air Race MCI. The MCIP is posted on the Washoe County Health District website so a press release by the Health Officer or PIO could be advantageous in informing the public the plan has been updated and improvements have been made.</p> <p><b>Commissioner Jung</b> inquired if there is evidence of patients switching tags for faster care?</p> <p><b>Ms. Conti</b> indicated it is rare but it has happened in the past. This is less likely with the new system as the color ribbon only gets the patient to the re-triage/transport station where their symptoms will be evaluated for priority of transport.</p> <p><b>Dr. Hess</b> inquired as to the coordination of resources related to the Air Operations.</p> <p><b>Captain Millett</b> and <b>Ms. Conti</b> indicated the inclusion of an Air Operations Branch will help keep the Operations branch more informed of the resources that are available but not seen.</p> <p><b>Dr. Humphreys</b> commended all of the Health District staff, agencies and regional partners who were involved in this project for their teamwork and for producing a quality product that will benefit the whole community.</p>	<p><b>Dr. Humphreys</b> moved, seconded by <b>Commissioner Jung</b>, to Approve the Revisions to the District Board of Health's Multi-Causality Incident Plan (MCIP) as presented.</p> <p><b><u>MOTION CARRIED</u></b></p>
13.	Review and Acceptance of the Monthly Public Health Fund Revenue and Expenditure Report for November, 2013	<p><b>Eileen Stickney</b>, Administrative Health Services Officer. Staff recommends the District Board of Health accept the attached report of revenues and expenditures for the health fund for November, 2013 for Fiscal Year 2014.</p> <ul style="list-style-type: none"> <li>• The environmental oversight account (tank farm) current balance is \$108,319,53. The bank statement had not been received.</li> <li>• Under Administration (page 5) in the Revenue section, Other Misc Govt Revenue is budgeted at \$62,228,75. The report shows an actual receipt of revenue of \$314,381, which puts Administration at 505%. While Administration would like to have this revenue the funds actually belong to Air Quality. The funds were received from the State in the form of a check and are temporarily being housed in Administration until an Internal Order is established and a journal entry is done to move the funds to the Air Quality account.</li> </ul>	<p><b>Council Member Zadra</b> moved, seconded by <b>Dr. Hess</b>, to accept the Monthly Public Health Funds Revenue and Expenditure Report for November 2013 as presented.</p> <p><b><u>MOTION CARRIED</u></b></p>

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*14.	Update on Citation and Enforcement regarding Prevention of Bear Activity within Populated Areas (Continued from November 21, 2013)	<p><b>Mr. English</b> provided a brief update on bear activities related to solid waste issues in the populated areas of Washoe County. There has been a dramatic increase of complaints of bear activity in populated areas since the issuance of a press release. The Health District was proactive and issued a press release indicating how citizens could contact the Health District if they had bear related issues. The bears are not particular where they go so there are issues in both incorporated and unincorporated areas.</p> <p>Items that occurred in the last couple of months:</p> <ul style="list-style-type: none"> <li>• The Board of Trustees of Incline Village is moving forward and has directed staff as of December 10, 2013, to change their franchise agreement to require all commercial and residential accounts to have bear resistant trash containers. The Health District is assisting IVGID with language and will continue to assist as needed.</li> <li>• As of Friday, December 13, 2013, the City of Reno has also changed their franchise agreement to allow the servicing of animal resistant containers. The Washoe County regulations allow the Health District to require these types of containers and we have been requiring them this fall. Some residents have switched to animal resistant containers, which caused a servicing need in the community. The City of Reno stepped up to address this need. Washoe County is looking at doing something along the same line.</li> </ul> <p><b>Council Member Ratti</b> indicated she has not heard of any bear complaints in the City of Sparks, and did not hear Sparks mentioned by Mr. English. Is there an issue she needs to pursue?</p> <p><b>Mr. English</b> indicated there are no specific issues with bears in the City of Sparks at this time. The regulations are district wide so if issues with dogs and coyotes (which are the primary problems in the City of Sparks, Sun Valley and Cold Springs) increase residents in the affected areas could be required to have locking garbage containers. To date this has not been an issue. If an issue does arise it will be brought to the City of Sparks attention.</p>	
15	Presentation, Possible Discussion with the Recommendation for Acceptance of the Washoe County Health District 2012	<p><b>Dr. Todd</b> indicated a link for the PowerPoint presentation was sent to the Board Members. He reviewed the Annual Communicable Disease Summary and provides additional information. Nevada is no longer at the bottom of the list for Communicable Diseases according to the 2012 State Health Rankings; improvements have been made throughout the state. All states have made improvements, so significant improvements</p>	

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	Annual Communicable Disease (CD) Summary	<p>have been made in Nevada for us to move up in the rankings. <u>Strength and Challenges</u> – one of Nevada’s strengths is low incidences of infectious diseases; Nevada has not had any many outbreaks. Dr. Todd indicated Washoe County has good surveillance. <u>Enteric Diseases</u> are intestinal diseases; Washoe County had ups and downs in this area over the years (2003-2012). The nation sets goals and objective for themselves. Washoe County met the 2020 Healthy People Objectives for Enteric Disease. <u>Hepatitis</u> has decreased in Washoe County from 2003 to 2012, but the county did not meet the Healthy People 2020 Objectives. Hepatitis A dropped drastically in 2004 when children were required to be vaccinated. <u>Sexually Transmitted Disease</u> – Chlamydia continues to climb (most common sexually transmitted disease), HIV and AIDS have both decreased. People view HIV as a manageable disease now, so safe sex practices are on the decline, which is causing cases of AIDS to start moving back up (this is not unique to Washoe County). We did not meet Healthy People 2020 Objectives for Chlamydia. Some of the increase in reportable cases could be due to improved testing. Epidemiology and Clinical Health are both concerned and working hard on this area. <u>Tuberculosis</u> cases in Washoe County are higher than the Healthy People 2020 Objectives; all reported cases were foreign born. Treatment rate of Latent TB is at 89%. <u>Vaccine Preventable Disease</u> – There were no cases of Diphtheria, Measles, Polio, Rubella or Invasive Hib in 2003 – 2012; and only one adult case of Tetanus in 2009. Pertussis is still active (4 probable cases in 2012), the vaccine isn’t as effective as we would like it to be. Influenza peaked in March last year with a relatively mild Flu season; most cases were Influenza A with H1N1 coming in second. <u>Vector Borne Disease</u> – No West Nile Virus in people in 2012, which could be due to the Vector program’s efforts to keep West Nile Virus down in the mosquito population. This in turn helps keep it down in humans. Rabies does exist in the animal population in our area and has recently been seen in bats. We can all help mitigate against rabies by keeping our pets vaccinated. <u>Extraordinary Occurrences of Illness</u> – in 2012 Washoe County saw and increase in Hand Foot and Mouth Disease. There was also a novel strain of Coxsackievirus in our area.</p> <p><b>Commissioner Jung</b> brought to the board’s attention that the map of the states indicates the states surrounding us all have better health rankings than we do, which can have a tremendous impact on our economic development and our ability to attract new businesses to our state. She would like to see the District Health Officer or PIO push out some of the good news from this report to the public. She also inquired about the contents of the current years Flu vaccine.</p> <p><b>Dr. Todd</b> indicated the currant vaccine has the same three strains of flu as last year, which includes the H1N1. There are two types of flu shots available this year – Trivalent and Quadrivalent, both contain H1N1. It is still early in the season but we are seeing a higher proportion of H1N1 this year. It is not too late to get a flu shot this year.</p>	<p><b>Council Member Ratti</b> moved, seconded by <b>Council Member Zadra</b>, to accept the Washoe</p>



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		<p><b>Dr. Humphreys</b> inquired as to the steps taken for intervention when trends are seen?  <b>Dr. Todd</b> advised that the Health District tracks all reportable diseases and puts out a weekly report. Analysis are run to see if there are any increases; if something is found a physician's alert is sent out. The Health District relies on health care providers and labs for data and in turn we share the consolidated data with them on a regular basis.  <b>Dr. Humphreys</b> – What was the true occurrence compared to the reportable occurrences?  <b>Dr. Todd</b> indicated these are generally educated estimates.</p>	<p>County Health District 2012 Annual Communicable Disease (CD) Summary as Presented.  <b><u>MOTION CARRIED</u></b></p>
16.	<p>Recommendation to Approve an Employment Agreement Between the Washoe County District Board of Health and Dr. Kevin Dick, for the Position of District Health Officer</p>	<p><b>Chair Smith</b> continued this item to the January meeting.</p>	<p><b><u>NO MOTION</u></b></p>
*17.	<p><b><u>Staff Reports and Program Updates</u></b></p> <p>A.  <u>Director, Epidemiology and Public Health Preparedness</u></p>	<p><b>Dr. Randall Todd</b>, Director, Epidemiology and Public Health Preparedness. No additional information at this time.</p> <p><b>Dr. Humphreys</b> indicated that Dr. Todd's report talked about the point of dispensing, but didn't specifically mention Botulism. With Botulism it's very important to get antitoxin quickly, what is the availability of the antitoxin for Botulism in our area?  <b>Dr. Todd</b> indicated the CDC maintains a stockpile of antitoxin, which we can request and have delivered within a few hours.</p>	
	<p>B.  <u>Director, Community and Clinical Health Services</u></p>	<p><b>Mr. Steve Kutz</b>, Director, Community Clinical and Health Services.</p> <p><b>Mr. Kutz</b> thanked Dr. Hess for his assistance with the Syphilis outbreak and for helping the Community and Clinical Health Services partner with the Washoe County Medical Society.</p> <p>Additional information:  Sexual Health – men having sex with men is showing an increase in HIV positive cases.  Divisional Update – the recent NetSmart webinar was a success.  Affordable Care Act – Mr. Kutz has been in contact with the Affordable Care Act enrollment concerning the number of Nevadans enrolled. Approximately 6600 enrolled in Nevada last week. They reported 6.6 million hits to the website, but are still</p>	

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		<p>experiencing some technical difficulties with the enrollment program.</p> <p><b>Dr. Humphreys</b> inquired as to the target number.</p> <p><b>Mr. Kutz</b> indicated that Nevada has an estimated 249,000 uninsured and 265,000 underinsured. There are over 500,000 people in Nevada who could benefit from this program. There is a possibility that the 2014 date may be pushed out further. The Nevada program helps people determine what plans they may be eligible for and consolidates the statements for them.</p> <p><b>Mr. Dick</b> also thanked Dr. Hess for his assistance with the recent Syphilis outbreak. Dr. Hess was very helpful and met with Mr. Kutz and staff. He also helped represent the Health District at the Washoe County Medical Society meeting.</p> <p><b>Mr. Dick</b> indicated he electronically distributed a copy of an advertisement concerning Syphilis to the board. The advertisement is being run in the Reno News and Review and encourages Syphilis testing. The Health District will also have other HIV awareness advertising coming out soon sponsored by the CDC.</p>	
	<p><u>C.</u> <u>Director,</u> <u>Environmental</u> <u>Health Services</u></p>	<p><b>Mr. Robert Sack</b>, Division Director, Environmental Health Services. No additional information to his report at this time.</p> <p><b>Mr. Sack</b> did comment on Dr. Todd's report. The Health District is very proactive and monitors information as it comes in daily. If there is any indication of an outbreak or abnormal situation it is addressed immediately. All necessary resources are dedicated to the investigation.</p>	
	<p><u>D.</u> <u>Acting Director, Air</u> <u>Quality</u> <u>Management</u></p>	<p><b>Ms. Charlene Albee</b>, Acting Division Director, Air Quality Management.</p> <p><b>Ms. Albee</b> indicated the Red Burn Code has been in place for the past 10 days. Due to better conditions it went to green today (Dec 19, 2013). There were 6 incidents where we recently exceeded the PM2.5 standard. Air Quality has received approximately 20 complaints for wood burning, which enforcement staff has investigated. 2-3 warning citations were issued to people who did not want to voluntarily comply with the burning codes. This is the first step to mandatory compliance.</p> <p>Sole Source of Heat program – several people are submitting applications for sole source heating exemptions; information for community assistance is provided for those that may require financial assistance for heating. Air Quality has started a temporary exemption list. A complete summary of this program will be provided at the January</p>	

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		<p>Board meeting.</p> <p><b>Commissioner Jung</b> inquired if Health advertises the phone number to call for an exemption or to complain about people burning?</p> <p><b>Ms. Albee</b> indicated the PIO puts out press release, which include the phone number to call for questions. The complaint hot line is the main Air Quality number.</p> <p><b>Mr. Dick</b> indicated he will have the PIO verify that the contact information is included in press releases. The TV station he was watching did include the phone numbers and information on the Sole Source program.</p> <p><b>Mc. Albee</b> indicated signs were provided for 10 of the Sole Source applicants to post in their windows. There are 20-25 on the temporary list.</p>	
	<p><u>E.</u> <u>Administrative Health Services Officer</u></p>	<p><b>Ms. Eileen Stickney</b>, Administrative Health Services Officer, Administrative Health Services. No additional information.</p>	
	<p><u>F.</u> <u>Interim District Health Officer</u></p>	<p><b>Mr. Kevin Dick</b>, Interim District Health Officer.</p> <p>Mr. Dick highlighted a few items from his board report. The Health District has done a lot of work on the fundamental review. Ms. Stickney has provided additional financial information. We are awaiting additional recommendations from the review team.</p> <p>Quality Improvement Initiative: Representatives from each division have been designated for QI teams. These teams met on December 2 &amp; 18<sup>th</sup> to start work on initial divisional QI projects. We will be looking at larger projects as recommendations are received from the Fundamental Review Team.</p> <p>Mr. Dick is currently engaged with the Planning Committee for a Healthy Community Conversation. The Health District is working with other agencies on a Healthy Community Conversation which covers community development over all three jurisdictions. Agencies involved include the Federal Reserve, the three jurisdictions, Renown, St. Mary's, United Way and other organizations. At this time there is good momentum for a Spring event. They hope to gain additional traction and momentum for continued action after this event with a multiple of agencies including the financial community. The community needs to recognize the opportunities to work together towards a healthy community and the importance of community health and public health in community development planning.</p>	

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*18.	Board Comment – Limited to Announcements or Issues for Future Agendas	<p><b>Commissioner Jung</b> requested a letter of condolence be sent to Renown and the Urology Associates on behalf of the Board and the Health District.</p> <p><b>Chair Smith</b> reminded everyone about the upcoming January 16<sup>th</sup> Board of Health Retreat from 1-5p.m. Happy Birthday to Mr. Kutz.</p>	
19.	Emergency Items.	None.	
*20.	Public Comment (limited to three (3) minutes per person). No action may be taken.	None.	
21.	<b>Adjournment</b>	There being no further business to come before the Board the meeting was adjourned.	<p><b>Matt Smith</b> moved, seconded by <b>Council Member Zadra</b>, that the meeting be adjourned.</p> <p><b><u>MOTION CARRIED</u></b> The meeting was adjourned at 2:30 p.m.</p>

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KEVIN DICK,  
INTERIM DISTRICT HEALTH OFFICER

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LAURIE GRIFFEY  
ADMIN ASSISTANT I/RECORDING SECRETARY