

## **Washoe County District Board of Health Meeting Notice and Agenda**

### **Members**

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

**Thursday, June 23, 2016  
1:00 p.m.**

**Washoe County Administration Complex  
Commission Chambers, Building A  
1001 East Ninth Street  
Reno, NV**

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**Items for Possible Action.** All items numbered or lettered below are hereby designated for possible action as if the words “for possible action” were written next to each item (NRS 241.020). An item listed with asterisk (\*) next to it is an item for which no action will be taken.

**1:00 p.m.**

**1. \*Roll Call and Determination of Quorum**

**2. \*Pledge of Allegiance**

**3. \*Public Comment**

Any person is invited to speak on any item on or off the agenda during this period. Action may not be taken on any matter raised during this public comment period until the matter is specifically listed on an agenda as an action item.

**4. Approval of Agenda**

June 23, 2016

**5. Approval of Draft Minutes**

May 26, 2016

**6. \*Recognitions**

A. Transfer

- i. Nancy Kerns-Cummins, Fiscal Compliance Officer, to Health District from Social Services, started 6/6/16 – AHS

B. Presentation of Healthy Hospitality Hero Awards

Staff Representative: Lona Cavallera

- i. Whitney Peak Hotel  
ii. Our Bar  
iii. The Stick Sports Lounge

**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 Subgrant Amendment #1 from the Nevada Department of Health and Human Services, Division of Public and Behavioral Health, for the period July 1, 2015 through June 30, 2017 in the total amount of \$248,720 in support of the Centers for Disease Control and Prevention (CDC) Public Health Preparedness (PHP) – Preparedness, Assurance, Inspections and Statistics (PAIS), IO 11257; and if approved authorize the Chair to execute.  
Staff Representative: Patsy Buxton
  - ii. Approval of Grant Agreement PM-00T56401-2 from the U.S. Environmental Protection Agency (EPA) for funding in the amount of \$113,889 (\$61,055 available for drawdown) for the period 4/1/16 through 3/31/17 for the Air Quality Management, EPA Air Pollution Control Program, IO 10021; approve amendments totaling an increase of \$20,025 in both revenue and expense to FY17 Air Pollution Control Grant Program, IO 10021.  
Staff Representative: Patsy Buxton
- B. Recommendation to Uphold Citations Not Appealed to the Air Pollution Control Hearing Board  
Staff Representative: Charlene Albee
- i. Aspen Earthworks, Case No. 1184, Citation No. 5533
- C. Acknowledge receipt of the Health District Fund Financial Review for May, Fiscal Year 2016  
Staff Representative: Anna Heenan
- 8. Regional Emergency Medical Services Authority**  
Presented by Don Vonarx and Kevin Romero
- A. Review and Acceptance of the Compliance Report for May 2016
  - \*B. Operations Update for May 2016
- 9. Presentation, Discussion and Possible Approval of Interlocal Agreement between the Washoe County Health District for its Vector-Borne Diseases Program and City of Reno to stage, land and fly a helicopter at Fire Station 12 for mosquito treatment of 700 acres in the South Meadows and Damonte Ranch area.**  
Staff Representative: Jim Shaffer
- 10. Introduction, Discussion and Possible Direction to Staff regarding Amended Board Bylaws and proposed Rules, Policies and Procedures for Potential Adoption at the July 2016 DBOH meeting.** [Ratti, Hess]  
Staff Representative: Kevin Dick
- 11. Discussion and Possible Direction to pursue Accreditation through the Public Health Accreditation Board and to provide Semi-Annual Progress Reports to the District Board of Health.** [Novak]  
Staff Representative: Kevin Dick
- 12. \*Staff Reports and Program Updates**
- A. Air Quality Management, Charlene Albee, Director  
Program Update, Divisional Update, Program Reports
  - B. Community and Clinical Health Services, Steve Kutz, Director  
Divisional Update – Patagonia Health; Poison Prevention Trainings; Program Reports
  - C. Environmental Health Services, Bob Sack, Director  
EHS Division and Program Updates - Food, Land Development, Vector-Borne Disease, Waste Management and EHS Inspections / Permits / Plan Review

- D. Epidemiology and Public Health Preparedness, Dr. Randall Todd, Director  
Program Updates for Communicable Disease, Public Health Preparedness, and  
Emergency Medical Services
- E. Office of the District Health Officer, Kevin Dick, District Health Officer  
Strategic Planning, Prescription Drug Abuse, Recommendations to the Legislative  
Committee on Health Care, Community Health Improvement Plan, Truckee Meadows  
Healthy Communities (TMHC), Quality Improvement, Other Events and Activities and  
Health District Media Contacts

### 13. \*Board Comment

Limited to announcements or issues for future agendas.

### 14. \*Public Comment

Any person is invited to speak on any item on or off the agenda during this period. Action may not be taken on any matter raised during this public comment period until the matter is specifically listed on an agenda as an action item.

### 15. Adjournment

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**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 775.328.2415, 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:

Downtown Reno Library, 301 S. Center St., Reno

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](http://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. 9<sup>th</sup> Street, in Reno, Nevada. Ms. Dawn Spinola, 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. Spinola is located at the Washoe County Health District and may be reached by telephone at (775) 328-2415 or by email at [dspinola@washoecounty.us](mailto:dspinola@washoecounty.us). Supporting materials are also available at the Washoe County Health District Website [www.washoecounty.us/health](http://www.washoecounty.us/health) pursuant to the requirements of NRS 241.020.

## **Washoe County District Board of Health Meeting Minutes**

### **Members**

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

**Thursday, May 26, 2016  
1:00 p.m.**

**Washoe County Administration Complex  
Commission Chambers, Building A  
1001 East Ninth Street  
Reno, NV**

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### **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  
Julia Ratti, Vice Chair (arrived at 1:05 p.m.)  
Dr. George Hess  
Dr. John Novak  
Oscar Delgado (arrived at 1:05 p.m.)  
David Silverman

Members absent: Mike Brown

### **Ms. Spinola verified a quorum was present.**

Staff present: Kevin Dick, District Health Officer, ODHO  
Leslie Admirand, Deputy District Attorney  
Patsy Buxton, Fiscal Compliance Officer, AHS  
Jeff Whitesides, Public Health Preparedness Manager, EPHP  
Daniel Inouye, Air Quality Supervisor, AQM  
Joshua Restori, Air Quality Specialist II, AQM  
Christina Conti, EMS Program Manager  
Brittany Dayton, EMS Coordinator  
Dave McNinch, Environmental Health Specialist Supervisor, EHS  
James English, Environmental Health Specialist Supervisor, EHS  
Dawn Spinola, Administrative Secretary/Recording Secretary, ODHO

### **2. \*Pledge of Allegiance**

**Jessica Sferrazza 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**

May 26, 2016

**Dr. Hess moved to approve the agenda for the May 26, 2016, District Board of Health regular meeting. Dr. Novak seconded the motion which was approved four in favor and none against.**

#### **5. Approval of Draft Minutes**

A. April 14, 2016

B. April 28, 2016

**Dr. Novak moved to accept the minutes of the April 14 and April 28, 2016 District Board of Health meetings as written. Mr. Silverman seconded the motion which was approved four in favor and none against.**

#### **6. \*Recognitions**

A. Years of Service

1. Yann Sheau Ling-Barnes, 15 years, hired 5/2/2001 – AQM

Ms. Ling-Barnes was not in attendance. She will receive a certificate and 15-year pin.

B. Promotions

1. Erin Dixon 5/23/16, from AHS – Fiscal Compliance Officer to CCHS – Public Health Supervisor

Mr. Dick requested Ms. Dixon stand and be recognized and attendees congratulated her with a round of applause.

C. Promotion/Transfer out of Health

1. Trudy Enfield-Allred, 5/23/16 from EHS front counter, Plans Permit Aide to Community Services as a Building Permit Tech

Mr. Dick requested Ms. Enfield stand and be recognized and attendees congratulated her with a round of applause.

[Vice Chair Ratti and Councilmember Delgado joined the meeting at 1:05 p.m.]

#### **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

1. Recommendation to approve an Interlocal Contract between the Washoe County Health District and Washoe County through its Department of Juvenile Services to provide consultative and clinical services, Tuberculosis (TB) testing and Sexually Transmitted Disease (STD)/TB treatment medications for Wittenberg juveniles for the period upon ratification by the governing parties through June 30, 2017 unless extended by the mutual agreement of the Parties; with automatic renewal for two successive one-year periods for a total of three years on the same terms unless either party gives the other written notice of nonrenewal at least 60 days prior to June 30 of each year; and if approved, authorize the Chair to execute the Agreement.

Staff Representative: Patsy Buxton

2. Recommendation to approve a FY17 Purchase Requisition (#TBD) issued to Cardinal Health (Contract #MMS10001) in the approximate amount of \$105,725 for pharmaceutical products in support of the medical clinic operations on behalf of the Community and Clinical Health Services Division of the Washoe County Health District.  
Staff Representative: Patsy Buxton
  3. Recommendation to approve a FY17 Purchase Requisition (#TBD) issued to Board of Regents – UNR School of Medicine (single source) in the approximate amount of \$100,000 for laboratory testing primarily in support of the medical clinic operations on behalf of the Community and Clinical Health Services Division of the Washoe County Health District.  
Staff Representative: Patsy Buxton
  4. Retroactive approval of Grant Agreement #A-00905416-0 from the U.S. Environmental Protection Agency (EPA) for funding in the amount of \$549,354 for the period 10/1/15 through 9/30/16 for the Air Quality Management, EPA Air Pollution Control Program, IO 10019  
Staff Representative: Erin Dixon
- B. Acceptance of the “Washoe County, Nevada Air Quality Trends (2006-2015)” Report  
Staff Representative: Charlene Albee
- C. Acknowledge receipt of the Health District Fund Financial Review for April, Fiscal Year 2016  
Staff Representative: Anna Heenan

**Dr. Novak moved to accept the Consent Agenda as presented. Vice Chair Ratti seconded the motion which was approved six in favor and none against.**

- 8. PUBLIC HEARING: Presentation, discussion and possible adoption of revisions to the Regulations of the Washoe County District Board of Health Governing Air Quality Management, Sections 010.000 (Definitions), 040.051 (Wood Stove/Fireplace Insert Emissions), and 040.052 (Hydronic Heaters).**

Staff Representative: Dan Inouye

Chair Jung opened the public hearing.

Mr. Inouye explained the revisions did not address gaseous and liquid fuels to provide clarification on a concern expressed by a Board member at the previous meeting..

Chair Jung closed the public hearing.

**Dr. Novak moved to adopt the revisions to the Regulations of the Washoe County District Board of Health Governing Air Quality Management. Mr. Silverman seconded the motion which was approved six in favor and none against.**

- 9. Presentation, discussion and possible approval of the Regional Emergency Medical Services Authority (REMSA) Compliance Checklist, which will be used to determine REMSA’s Franchise compliance with the Amended and Restated Franchise Agreement for Ambulance Service.**

Staff Representative: Brittany Dayton

Ms. Dayton explained there were no substantial context modifications from the previous version. The updates were focused on delineating CAD and AVL items, removing out-of-date

items and clarifying item language. Additionally, in an effort to make the process less subjective, the “Reviewer’s Notes” column and definitions of full compliance, substantial compliance or non-compliance were also added.

Dr. Novak asked if Item 5.1.b. regarding radios, should have a timeline. Ms. Dayton explained that dates would be delineated in the Emergency Medical Services (EMS) strategic plan, so they were not considered to be as appropriate for the Compliance Checklist. Vice Chair Ratti asked if Dr. Novak would prefer to see the date included or add the word “timeline” to suggest that a timeline exists elsewhere. Dr. Novak clarified he would prefer the latter. This would make it more consistent with the language of 5.2.e.

**Vice Chair Ratti moved to approve the Regional Emergency Medical Services Authority Compliance Checklist with the inclusion of adding the word timeline to Item 5.1.b. Dr. Hess seconded the motion which was approved six in favor and none against.**

**10. Presentation, discussion and possible acceptance of an update on the CAD-to-CAD interface between the PSAP dispatch centers and REMSA [Ratti, Novak].**

Staff Representative: Christina Conti

Ms. Conti reviewed the information contained in the staff report, noting the process was currently stalled due to contract issues with the Tiburon system. Chair Jung asked which agency had not signed the contract. Ms. Conti explained the server would belong to the City of Reno and the other jurisdictions would utilize it, therefore, Reno needed to sign the contract.

Dennis Nolan, City of Reno, explained they had received a proposal from Tiburon that had to be returned to them to be updated due to changes and software upgrades. The revised proposal had not yet arrived. Chair Jung clarified, noting it was not an issue of refusing to sign; it was an issue with not having the proper contract available for signature. Chief Nolan agreed with that summary.

Vice Chair Ratti asked if the Tiburon project was factored in to the City of Reno budget and Chief. Nolan stated it was.

Dr. Novak requested clarification that the issue was about paperwork, not funding. Chief Nolan confirmed it was a paperwork issue. The contract had to go back to Tiburon for revisions due to technical issues.

**Dr. Novak moved to accept the report. Councilmember Delgado seconded the motion which passed six in favor and none against.**

**11. Presentation, discussion and possible approval of the allowable exemptions to REMSA’s response time penalties, as outlined in the Amended and Restated Franchise Agreement for Ambulance Service Article 7, Section 7.6.**

Staff Representative: Christina Conti

Mr. Dick explained exemptions had previously been granted by the District Health Officer but in the interest of transparency any new exemptions required DBOH approval under the new agreement. As some of the exemptions had undergone substantial changes staff had determined it was prudent to bring all the exemptions back to the Board for review and approval.

Kathy Brandhorst provided public comment to share her opinions about local ambulance service.

Vice Chair Ratti asked if the exemptions were to be reported back to the Board at some point. Ms. Conti explained that information was contained in REMSA’s Operations Reports each

month.

Dr. Novak asked who was responsible for declaring a mass casualty incident (MCI). Ms. Conti explained it could be made by any agency on scene or the emergency manager,

Dr. Novak asked who the third-party vendor was that calculated system overload. Don Vonarx of REMSA explained it was First Watch, who does data sampling and reporting nationwide. It dips data from the CAD; no one touches the CAD data but First Watch.

**Dr. Novak moved to approve the exemptions. Mr. Silverman seconded the motion which passed six in favor and none against.**

## **12. Regional Emergency Medical Services Authority**

Presented by Don Vonarx and Kevin Romero

### **A. Review and Acceptance of the Compliance Report for April 2016**

Mr. Vonarx introduced the item and offered to answer questions.

**Dr. Hess moved to accept the report as presented. Vice Chair Ratti seconded the motion which was approved six in favor and none against.**

### **\*B. Operations Update for April 2016**

Mr. Romero, adding to Ms. Conti's comments, noted the dispatch center was also authorized to declare an MCI. He introduced REMSA's Education Manager Cindy Green and their Communications Director, Adam Heinz.

Ms. Green explained a large group had been formed to work together to address the Opioid crisis. It included REMSA, law enforcement, EMS providers, medical providers and ancillary service providers. They meet regularly to address immediate needs and long-term impacts. She provided an overview of steps taken to date to support the community and the current status of the event. One of the steps included keeping a larger-than-usual supply of Narcan on hand.

Chair Jung requested that Amber Howell, Director of Social Services, be kept informed as that department should be able to provide statistics. Mr. Dick noted they had been participating.

Mr. Silverman asked what Narcan was. Ms. Green explained it was also known as Naloxone and was used to block the deadly symptoms of an opiate overdose.

Mr. Heinz explained REMSA's communications center had been recognized as an Accredited Center of Excellence since 2001. He reviewed the standards that were required to be achieved to retain that designation. He announced that REMSA had received official notification from the International Academy of Emergency Medical Dispatch that they had been accredited for a fifth time. He noted the communications center has a close relationship with the Nurse Helpline, also accredited, making them the only dually-accredited center in the world.

Mr. Dick noted a draft item had inadvertently been included in the Board packet but would not be heard.

## **13. Presentation, Discussion, and Possible Adoption of Washoe County Health District FY17-20 Strategic Plan and Direction to Staff**

Staff Representative: Kevin Dick

Mr. Dick thanked the Board members for attending the retreat to work on the plan. He also acknowledged the work of the management staff and Erica Olsen and Zach Yeager from OnStrategy. He provided a Power Point presentation to introduce the strategic plan (Attachment



A). Mr. Dick went on to explain that for each of the goals, staff had identified a number of community outcomes so that progress could be measured. Those outcomes will be further broken down to divisional-level initiatives.

Mr. Dick noted the next strategic planning retreat would be held on a date to be determined in the future. Optimally it would be held sometime in the fall so that the decisions of the Board could be utilized to guide the budget plan for the following year.

Dr. Novak opined the Board's goals had been accurately captured and stated it was good work. Chair Jung agreed.

Vice Chair Ratti expressed her satisfaction with the plan. She opined the work of seven years towards a good strategic plan had finally been accomplished. She pointed out it provided goals and the proposed approach to implementation allowed some flexibility in the methodology to achieve them. She expressed her gratitude to the staff for their hard work.

Chair Jung commended Vice Chair Ratti for pushing for the plan throughout the years. Chair Jung went on to complement Mr. Dick for his administrative skills and his contributions to the plan and the District. She thanked the OnStrategy members as well.

Chair Jung expressed her pleasure that baseline measures and targets had been established. She noted it would inform the Legislature and other potential sources of funding about specific targets and how the money would help.

Chair Jung noted action was being taken to take mental health out of the State's jurisdiction and sending it to the counties. She welcomed it but noted the District had not been able to address it in the past due to limited resources.

**Vice Chair Ratti moved to adopt the Washoe County Health District FY17-20 Strategic Plan as presented and directed staff to proceed with implementation. Dr. Novak seconded the motion which was approved six in favor and none against.**

#### **14. \*Staff Reports and Program Updates**

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

Mr. Inouye reported that Bike Week had been very successful. He also noted that the Environmental Protection Agency staff had visited to share a FLIR camera that used infrared to allow the user to see gas vapor leaks. Joshua Restori presented a video that demonstrated its capabilities. Dr. Hess asked if AQM was seeking grant funding to be able to purchase one and Mr. Restori explained that search was in process.

- B. Community and Clinical Health Services, Steve Kutz, Director  
Program Report – Teen Pregnancy Prevention Month; Divisional Update – Patagonia Health; Program Reports

Mr. Kutz stated he had nothing to add and was available for questions.

- C. Environmental Health Services, Bob Sack, Director  
EHS Division Program Updates - Food, Land Development, Vector-Borne Disease, Waste Management and EHS Inspections / Permits / Plan Review

Mr. McNinch introduced James English, who explained to the Board that septic systems were failing in Panther Valley, creating a public health threat. He reviewed the steps that were being taken to solve the problem and protect the public.

Mr. McNinch noted pools and spas were opening and temporary events season was beginning, keeping staff busy. He thanked Mr. Silverman for his input into changes to the food program and expounded on some of the specific issues that were being addressed.

Mr. McNinch explained the number of submittals for new water plans was increasing and staff was reviewing and streamlining processes to better keep up. Vector was focusing on dusting parks and other places people were anticipated to congregate during the summer months.

Dr. Novak asked about the possibility of grant funding being returned to the State as described in the staff report. Mr. McNinch explained the funding was to be utilized for a certain level of activities and deliverables within a program, and the amount of work dedicated to that program was anticipated to decrease. Therefore, the agreed-upon results were unlikely to be achieved and a portion of the grant would need to be refunded.

Dr. Novak asked if that would jeopardize future activities. Mr. English explained a budget amendment will allow the District to charge more of the indirect cost to the grant. Additionally, new fees allowed collection of revenue on construction activities, which have been substantial.

Mr. Dick noted the District was recovering more indirect costs through the grant, but that the indirect costs the Health District incurred had not changed..

D. Epidemiology and Public Health Preparedness, Dr. Randall Todd, Director  
Program Updates for Communicable Disease, Public Health Preparedness, and  
Emergency Medical Services

Mr. Whitesides stated he had nothing to add but was available to answer questions. Dr. Hess asked if any more Zika cases had been reported and Mr. Whitesides stated he was not aware of any that were not noted in the report.

E. Office of the District Health Officer, Kevin Dick, District Health Officer  
Budget, Opioid Situation, Strategic Plan, Community Health Improvement Plan, Truckee  
Meadows Healthy Communities (TMHC), Quality Improvement, Other Events and  
Activities and Health District Media Contacts

Mr. Dick discussed the Family Health Festival that had been held May 25, noting one of the highlights had been the potting and distribution of vegetable seedlings. He noted Commissioner Lucey had contributed funds towards the project.

Mr. Dick explained that on June 1, there would be a signing ceremony with the Reno Sparks Indian Colony for the Point of Dispensing Memorandum of Understanding. Several Board members had indicated they would be participating.

Mr. Dick explained the Chair of the Legislative Committee on Health Care, Assemblyman Oscarson, had put out a notice that they are welcoming submittals of ideas for public health care that the Committee could either directly support or endorse during the coming Legislative session. He will be working with the Health Officers from Carson City and Southern Nevada Health District to present joint recommendations.

## **15. \*Board Comment**

Dr. Hess asked how the Opioid crisis was being tracked and who he could speak to regarding obtaining the most recent information. Mr. Dick asked if his monthly report could be reopened so that he could expound on the relevant information contained there. Chair Jung reopened Item 14.E.

Mr. Dick explained he and other staff from the Health District have been participating in the work group that was coordinated by Tom Robinson, the Deputy Chief of Reno Police Department. Kevin Quint, the head of the State Substance Abuse program has been participating. Mr. Dick agreed the situation was significant, and noted funding was limited. He explained the workgroup consisted of representatives from a wide array of agencies and services in the area and opined it was a good information-sharing avenue.

Mr. Dick explained that regarding communications, Join Together Northern Nevada has coordinated substance abuse info for some time and have produced public service announcements. Additionally, the State has formed a multi-disciplinary committee to address substance abuse, and they have compiled a strategic plan. The Governor will be holding a forum in June to discuss the problem.

Dr. Hess opined the work group provided a good umbrella approach, but more communication should be shared with physicians. Chair Jung suggested he spearhead that as he has close contacts with that community.

Dr. Novak requested an item be added to the June meeting to discuss the accreditation process. He had received information from Kay Bender, the head of the examining board, that he would like to share with the Board. He stated what he had learned had caused him to feel more positive about proceeding with the accreditation. Chair Jung thanked him for his active engagement and stated the Board was proud of his representation.

#### **16. \*Public Comment**

Kathy Brandhorst shared her feelings regarding various events.

#### **17. Adjournment**

**Chair Jung adjourned the meeting at 2:25 p.m.**

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Respectfully submitted,



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Kevin Dick, District Health Officer  
Secretary to the District Board of Health



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Dawn Spinola, Administrative Secretary  
Recording Secretary

Approved by Board in session on \_\_\_\_\_, 2016.

DD	AH	___
DHO	___	KD ___
DA	LA	___
Risk	DME	___

**Staff Report**  
**Board Meeting Date: June 23, 2016**

**DATE:** June 9, 2016

**TO:** District Board of Health

**FROM:** Patsy Buxton, Fiscal Compliance Officer, 775-328-2418, [pbuxton@washoecounty.us](mailto:pbuxton@washoecounty.us)

**SUBJECT:** Approve Subgrant Amendment #1 from the Nevada Department of Health and Human Services, Division of Public and Behavioral Health, for the period July 1, 2015 through June 30, 2017 in the total amount of \$248,720 in support of the Centers for Disease Control and Prevention (CDC) Public Health Preparedness (PHP) – Preparedness, Assurance, Inspections and Statistics (PAIS), IO 11257; and if approved authorize the Chair to execute.

**SUMMARY**

The Washoe County District Board of Health must approve and execute Interlocal Agreements and amendments to the adopted budget. The District Health Officer is authorized to execute agreements on the Board of Health’s behalf not to exceed a cumulative amount of \$50,000 per contractor; over \$50,000 up to \$100,000 would require the approval of the Chair or the Board designee.

The Washoe County Health District received a Subgrant Amendment #1 from the Division of Public and Behavioral Health for the period July 1, 2015 through June 30, 2017 in the total amount of \$248,720 in support of the Centers for Disease Control and Prevention (CDC) Public Health Preparedness (PHP) – Preparedness, Assurance, Inspections and Statistics (PAIS), IO 11257. A copy of the Subgrant Amendment is attached.

**District Board of Health strategic priority:** Protect population from health problems and health hazards.

BCC Strategic Objective supported by this item: Safe, Secure and Healthy Communities.

*Goal supported by this item:* Approval of the Subgrant Award supports the Epidemiology and Public Health Preparedness (EPHP) Division’s mission to strengthen the capacity of public health infrastructure to detect, assess, and respond decisively to control the public health consequences of bioterrorism events or any public health emergency.

**PREVIOUS ACTION**

The Board approved the Notice of Subgrant Award for the period July 1, 2015 through September 30, 2016 in the total amount of \$248,720 on September 24, 2015.

**BACKGROUND**

The Washoe County Health District received the Boards approval of the Notice of Subgrant Award on September 24, 2015. Funding from this award supports readiness and response capability to respond

effectively to the Ebola virus disease. These activities include: Updating the Concept of Operations Plan (CONNOPS), updating the Ebola Virus Disease (EVD) Emergency Response Plan, conducting community response exercises, and purchasing appropriate Personal Protective Equipment (PPE) and provide appropriate training on its use.

The Subgrant Amendment extends the subgrant period from September 30, 2016 to June 30, 2017 to accomplish Ebola activities.

Program staff has indicated that the majority of the planned work has been completed. Staff may use the additional time to make improvements to post exercise planning (i.e. Full Scale Infectious Disease Exercise conducted June 9, 2016).

### **RECOMMENDATION**

Staff recommends that the Washoe County District Board of Health approve Subgrant Amendment #1 from the Nevada Department of Health and Human Services, Division of Public and Behavioral Health, for the period July 1, 2015 through June 30, 2017 in the total amount of \$248,720 in support of the Centers for Disease Control and Prevention (CDC) Public Health Preparedness (PHP) – Preparedness, Assurance, Inspections and Statistics (PAIS), IO 11257; and if approved authorize the Chair to execute.

### **POSSIBLE MOTION**

Move to approve Subgrant Amendment #1 from the Nevada Department of Health and Human Services, Division of Public and Behavioral Health, for the period July 1, 2015 through June 30, 2017 in the total amount of \$248,720 in support of the Centers for Disease Control and Prevention (CDC) Public Health Preparedness (PHP) – Preparedness, Assurance, Inspections and Statistics (PAIS), IO 11257; and if approved authorize the Chair to execute.



State of Nevada  
 Department of Health and Human Services  
**Division of Public & Behavioral Health**

Original HD #: **14892-1**  
 Budget Account: 3218  
 Category: 24  
 GL: 8516  
 Job Number: 9307415A

## SUBGRANT AMENDMENT # 1

<b>Program Name:</b> Public Health Preparedness (PHP) Preparedness, Assurance, Inspections and Statistics (PAIS)	<b>Subgrantee Name:</b> Washoe County Health District (WCHD)																																						
<b>Address:</b> 4150 Technology Way, Suite # 200 Carson City, NV 89706-2009	<b>Address:</b> 1001 East Ninth St./ P.O Box 11130 Reno, NV 89520																																						
<b>Subgrant Period:</b> July 1, 2015 through June 30, 2017	<b>Amendment Effective Date:</b> Upon approval by all parties.																																						
<b>This amendment reflects a change to:</b> <input type="checkbox"/> Scope of Work <input checked="" type="checkbox"/> Term <input type="checkbox"/> Budget																																							
<b>Reason for Amendment:</b> CDC extended cooperative agreement until June 30, 2017 to accomplish Ebola activities.																																							
<b>Required Changes:</b> <b>Current Language:</b> The sub-grant termination date: September 30, 2016  <b>Amended Language:</b> The sub-grant termination date: June 30, 2017																																							
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Budget Categories</th> <th style="width: 25%;">Current Budget</th> <th style="width: 25%;">Amended Adjustments</th> <th style="width: 25%;">Revised Budget</th> </tr> </thead> <tbody> <tr> <td>1. Personnel</td> <td style="text-align: right;">\$ 116,754.00</td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 116,754.00</td> </tr> <tr> <td>2. Contractual/Consultant</td> <td style="text-align: right;">\$ 66,359.00</td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 66,359.00</td> </tr> <tr> <td>3. Travel</td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>4. Supplies</td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>5. Equipment</td> <td style="text-align: right;">\$ 43,790.00</td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 43,790.00</td> </tr> <tr> <td>6. Other</td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>7. Indirect</td> <td style="text-align: right;">\$ 21,817.00</td> <td style="text-align: right;">\$ 0.00</td> <td style="text-align: right;">\$ 21,817.00</td> </tr> <tr> <td><b>Total</b></td> <td style="text-align: right;"><b>\$ 248,720.00</b></td> <td style="text-align: right;"><b>\$ 0.00</b></td> <td style="text-align: right;"><b>\$ 248,720.00</b></td> </tr> </tbody> </table>				Budget Categories	Current Budget	Amended Adjustments	Revised Budget	1. Personnel	\$ 116,754.00	\$ 0.00	\$ 116,754.00	2. Contractual/Consultant	\$ 66,359.00	\$ 0.00	\$ 66,359.00	3. Travel	\$ 0.00	\$ 0.00	\$ 0.00	4. Supplies	\$ 0.00	\$ 0.00	\$ 0.00	5. Equipment	\$ 43,790.00	\$ 0.00	\$ 43,790.00	6. Other	\$ 0.00	\$ 0.00	\$ 0.00	7. Indirect	\$ 21,817.00	\$ 0.00	\$ 21,817.00	<b>Total</b>	<b>\$ 248,720.00</b>	<b>\$ 0.00</b>	<b>\$ 248,720.00</b>
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<b>Incorporated Documents:</b> Exhibit A: Original Notice of Subgrant Award and all previous amendments																																							

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

Name/Title	Signature	Date
Kitty Jung Washoe County District Board of Health		
Erin Lynch Health Program Manager II, PHP	<i>Erin Lynch</i>	6/9/16
Chad Westom Bureau Chief, PAIS	<i>C. Warden Westom</i>	6.9.16
for Cody L. Phinney, MPH Administrator, Division of Public & Behavioral Health		

DD	AH	_____
DHO	SK	_____
DA	LA	_____
Risk	DME	_____

**Staff Report**  
**Board Meeting Date: June 23, 2016**

**TO:** District Board of Health

**FROM:** Patsy Buxton, Fiscal Compliance Officer, Washoe County Health District  
775-328-2418, [pbuxton@washoecounty.us](mailto:pbuxton@washoecounty.us)

**SUBJECT:** **Approval of Grant Agreement PM-00T56401-2 from the U.S. Environmental Protection Agency (EPA) for funding in the amount of \$113,889 (\$61,055 available for drawdown) for the period 4/1/16 through 3/31/17 for the Air Quality Management, EPA Air Pollution Control Program, IO 10021; approve amendments totaling an increase of \$20,025 in both revenue and expense to FY17 Air Pollution Control Grant Program, IO 10021.**

**SUMMARY**

The Washoe County District Board of Health must approve and execute Interlocal Agreements and amendments to the adopted budget. The District Health Officer is authorized to execute agreements on the Board of Health’s behalf not to exceed a cumulative amount of \$50,000 per contractor; over \$50,000 up to \$100,000 would require the approval of the Chair or the Board designee.

The Air Quality Management Division receives a Grant Agreement from the EPA, which provides for grant funding for the on-going Air Pollution Control Program, PM 2.5 Program, IO 10021. A copy of Grant Number PM-00T56401-0 is attached.

**District Board of Health strategic priority:** Protect population from health problems and health hazards.

BCC Strategic Objective supported by this item: Safe, Secure and Healthy Communities.

**PREVIOUS ACTION**

The previous EPA PM 2.5 grant award that ended March 31, 2016 was approved by the DBOH on May 28, 2015.

**BACKGROUND/GRANT AWARD SUMMARY**

**Project/Program Name:** EPA PM2.5 Monitoring Network

**Scope of the Project:**

The Grant Agreement was received on June 15, 2016. The Grant Agreement is being presented for District Board of Health approval per the EPA procedure that does not require signature.

The PM 2.5 award provides funding for salaries and benefits, operating supplies, and a mandatory contractual. EPA provides full federal funding in the amount of \$113,889, which

includes \$52,834 of EPA in-kind support. Washoe County Health District is authorized to expend the remaining \$61,055.

**Benefit to Washoe County Residents:** This award supports the Health District Air Quality Program Mission to implement clean air solutions that protect the quality of life for the citizens of Reno, Sparks and Washoe County.

**On-Going Program Support:** These funds support on-going PM 2.5 activities in the Air Quality Program.

**Award Amount:** Amendment of \$113,889, total award is \$225,773

**Grant Period:** April 1, 2016 – March 31, 2017

**Funding Source:** U.S. Environmental Protection Agency

**Pass Through Entity:** Not applicable

**CFDA Number:** 66.034

**Grant ID Number:** PM – 00T56401 - 2

**Match Amount and Type:** No match required

**Sub-Awards and Contracts:** No Sub-Awards are anticipated.

**FISCAL IMPACT**

As the FY17 budget in Internal Order 10021 was adopted with a total of \$43,200 in revenue (includes \$2,170 of indirect) and \$41,030 in expenditure authority, a budget amendment in the amount of \$20,025 is necessary to bring the Grant Agreement into alignment with the direct program budget. No amendment is necessary for indirect revenue.

Should the Board approve these budget amendments, the FY 17 budget will be **increased by \$20,025** in the following accounts:

<u>Account Number</u>	<u>Description</u>	<u>Amount of Increase/(Decrease)</u>
<b>2002-IO-10021</b>	<b>-431100 Federal Revenue</b>	<b>\$20,025</b>
	<b>Total Revenue</b>	<b>\$20,025</b>
2002-IO-10021	-701110 Base Salaries	\$ 7,939
	-705110 Group Insurance	\$ 905
	-705210 Retirement	\$ 2,223
	-705230 Medicare	\$ 115
	-710100 Professional Services	\$ 3,743
	-710300 Operating Supplies	\$ 1,100
	-711210 Travel	\$ 4,000
	<b>Total Expenditures</b>	<b>\$20,025</b>




**RECOMMENDATION**

It is recommended that the Washoe County District Board of Health approve Grant Agreement PM-00T56401-2 from the U.S. Environmental Protection Agency (EPA) for funding in the amount of \$113,889 (\$61,055 available for drawdown) for the period 4/1/16 through 3/31/17 for the Air Quality Management, EPA Air Pollution Control Program, IO 10021; approve amendments totaling an increase of \$20,025 in both revenue and expense to FY17 Air Pollution Control Grant Program, IO 10021.

**POSSIBLE MOTION**

Should the Board agree with staff's recommendation, a possible motion would be: "Move to approve Grant Agreement PM-00T56401-2 from the U.S. Environmental Protection Agency (EPA) for funding in the amount of \$113,889 (\$61,055 available for drawdown) for the period 4/1/16 through 3/31/17 for the Air Quality Management, EPA Air Pollution Control Program, IO 10021; approve amendments totaling an increase of \$20,025 in both revenue and expense to FY17 Air Pollution Control Grant Program, IO 10021."

	<b>U.S. ENVIRONMENTAL PROTECTION AGENCY</b>  <b>Assistance Amendment</b>	<b>GRANT NUMBER (FAIN):</b> 00T56401 <b>MODIFICATION NUMBER:</b> 2 <b>PROGRAM CODE:</b> PM	<b>DATE OF AWARD</b> 06/08/2016
		<b>TYPE OF ACTION</b> Augmentation: Increase	<b>MAILING DATE</b> 06/15/2016
		<b>PAYMENT METHOD:</b> Advance	<b>ACH#</b> 90104
		<b>RECIPIENT TYPE:</b> County	
<b>RECIPIENT:</b> Washoe Cnty Dist Hlth Dept P.O. Box 11130 Reno, NV 89520 EIN: 88-6000138		<b>PAYEE:</b> Washoe Cnty Dist Hlth Dept P.O. Box 11130 Reno, NV 89520	
<b>PROJECT MANAGER</b> Charlene Albee P.O. Box 11130 Reno, NV 89520 E-Mail: <a href="mailto:calbee@washoecounty.us">calbee@washoecounty.us</a> Phone: 775-784-7211		<b>EPA PROJECT OFFICER</b> Roberto Gutierrez 75 Hawthorne Street, AIR-8 San Francisco, CA 94105 E-Mail: <a href="mailto:Gutierrez.Roberto@epa.gov">Gutierrez.Roberto@epa.gov</a> Phone: 415-947-4276	
<b>EPA GRANT SPECIALIST</b> Renee Chan Grants Management Office, EMD-6-1 E-Mail: <a href="mailto:Chan.Renee@epa.gov">Chan.Renee@epa.gov</a> Phone: 415-972-3675			
<b>PROJECT TITLE AND EXPLANATION OF CHANGES</b> PM 2.5 Monitoring Network  This assistance amendment increases the federal funding by \$113,889 (which includes \$52,834 for in-kind costs for PM2.5 EPA contractual support), from \$111,884, to the revised Total Approved Assistance Amount of \$225,773.  The purpose of this grant is to provide current year funding to the Washoe County District Health Department (WCDHD) to monitor fine particulate matter with the diameter equal to or smaller than 2.5 micrometers (PM 2.5) in order to determine compliance with the PM 2.5 National Ambient Air Quality Standards and determine deductions in air emissions.			
<b>BUDGET PERIOD</b> 04/01/2015 - 03/31/2017	<b>PROJECT PERIOD</b> 04/01/2015 - 03/31/2017	<b>TOTAL BUDGET PERIOD COST</b> \$225,773.00	<b>TOTAL PROJECT PERIOD COST</b> \$225,773.00
<b>NOTICE OF AWARD</b>			
Based on your Application dated 05/02/2016 including all modifications and amendments, the United States acting by and through the US Environmental Protection Agency (EPA) hereby awards \$61,055. EPA agrees to cost-share 100.00% of all approved budget period costs incurred, up to and not exceeding total federal funding of \$225,773. Recipient's signature is not required on this agreement. The recipient demonstrates its commitment to carry out this award by either: 1) drawing down funds within 21 days after the EPA award or amendment mailing date; or 2) not filing a notice of disagreement with the award terms and conditions within 21 days after the EPA award or amendment mailing date. If the recipient disagrees with the terms and conditions specified in this award, the authorized representative of the recipient must furnish a notice of disagreement to the EPA Award Official within 21 days after the EPA award or amendment mailing date. In case of disagreement, and until the disagreement is resolved, the recipient should not draw down on the funds provided by this award/amendment, and any costs incurred by the recipient are at its own risk. This agreement is subject to applicable EPA regulatory and statutory provisions, all terms and conditions of this agreement and any attachments.			
<b>ISSUING OFFICE (GRANTS MANAGEMENT OFFICE)</b>		<b>AWARD APPROVAL OFFICE</b>	
<b>ORGANIZATION / ADDRESS</b> U.S. EPA, Region 9 Grants Management Section, EMD 6-1 75 Hawthorne Street San Francisco, CA 94105		<b>ORGANIZATION / ADDRESS</b> U.S. EPA, Region 9 Air Division, AIR-1 75 Hawthorne Street San Francisco, CA 94105	
<b>THE UNITED STATES OF AMERICA BY THE U.S. ENVIRONMENTAL PROTECTION AGENCY</b>			
<b>Digital signature applied by EPA Award Official</b> Craig A. Wills - Grants Management Officer			<b>DATE</b> 06/08/2016

# EPA Funding Information

FUNDS	FORMER AWARD	THIS ACTION	AMENDED TOTAL
EPA Amount This Action	\$ 59,050	\$ 61,055	\$ 120,105
EPA In-Kind Amount	\$ 52,834	\$ 52,834	\$ 105,668
Unexpended Prior Year Balance	\$ 0	\$	\$ 0
Other Federal Funds	\$ 0	\$	\$ 0
Recipient Contribution	\$ 0	\$	\$ 0
State Contribution	\$ 0	\$	\$ 0
Local Contribution	\$ 0	\$	\$ 0
Other Contribution	\$ 0	\$	\$ 0
<b>Allowable Project Cost</b>	<b>\$ 111,884</b>	<b>\$ 113,889</b>	<b>\$ 225,773</b>

Assistance Program (CFDA)	Statutory Authority	Regulatory Authority
66.034 - Surveys-Studies-Investigations-Demonstrations and Special Purpose Activities relating to the Clean Air Act	Clean Air Act: Sec. 103	2 CFR 200 2 CFR 1500 and 40 CFR 33

Fiscal									
Site Name	Req No	FY	Approp. Code	Budget Organization	PRC	Object Class	Site/Project	Cost Organization	Obligation / Deobligation
-	1609M6S040	16	E1	09M4	102A04XPM	4112			61,055
									61,055

Budget Summary Page

<b>Table A - Object Class Category (Non-construction)</b>	<b>Total Approved Allowable Budget Period Cost</b>
<b>1. Personnel</b>	\$66,110
<b>2. Fringe Benefits</b>	\$29,366
<b>3. Travel</b>	\$4,000
<b>4. Equipment</b>	\$0
<b>5. Supplies</b>	\$2,200
<b>6. Contractual</b>	\$117,911
<b>7. Construction</b>	\$0
<b>8. Other</b>	\$0
<b>9. Total Direct Charges</b>	\$219,587
<b>10. Indirect Costs: % Base <u>Indirect Cost Rate Proposal</u></b>	\$6,186
<b>11. Total (Share: Recipient <u>0.00 % Federal 100.00 %.</u>)</b>	\$225,773
<b>12. Total Approved Assistance Amount</b>	\$120,105
<b>13. Program Income</b>	\$0
<b>14. Total EPA Amount Awarded This Action</b>	\$113,889
<b>15. Total EPA Amount Awarded To Date</b>	\$225,773

<b>Table B - Program Element Classification (Non-construction)</b>	<b>Total Approved Allowable Budget Period Cost</b>
<b>1. Table A, Line 6 Contractual includes</b>	\$
<b>2. in-kind contractor support through</b>	\$
<b>3. an EPA-HQ national contract.</b>	\$
<b>4.</b>	\$
<b>5. Table A, Line 10 Indirect is based on an</b>	\$
<b>6. Indirect Cost Rate Proposal</b>	\$
<b>7. (lower ICR rate used than negotiated).</b>	\$
<b>8.</b>	\$
<b>9. Table A, Line 12, reflects total available</b>	\$
<b>10. drawdown amount.</b>	\$
<b>11. Total (Share: Recip % Fed %)</b>	\$
<b>12. Total Approved Assistance Amount</b>	\$

## **Administrative Conditions**

General, Administrative, Programmatic Terms and Conditions of the initial assistance agreement, awarded 04/30/2015, remain in full force and effect. See paragraph below for the most current EPA General Terms and Conditions. Programmatic condition a) is revised; d) is add.. All applicable terms and conditions are reflected in this assistance amendment, PM-00T56401-2.

The recipient agrees to comply with the current EPA general terms and conditions available at:

<https://www.epa.gov/grants/epa-general-terms-and-conditions-effective-march-29-2016-or-later>.

These terms and conditions are in addition to the assurances and certifications made as a part of the award and the terms, conditions or restrictions cited throughout the award. The EPA repository for the general terms and conditions by year can be found at

<http://www.epa.gov/grants/grant-terms-and-conditions>.

### **A. Annual Federal Financial Report (FFR) - SF 425**

For awards with cumulative project and budget periods greater than 12 months, the recipient will submit an annual FFR (SF 425) covering the period from "project/budget period start date" to September 30 of each calendar year to the U.S. EPA Las Vegas Finance Center (LVFC). The FFR will be submitted electronically to [lvfc-grants@epa.gov](mailto:lvfc-grants@epa.gov) no later than December 31 of the same calendar year. The form with instructions can be found on LVFC's website at <http://www2.epa.gov/financial/forms>.

### **B. Procurement**

The recipient will ensure all procurement transactions will be conducted in a manner providing full and open competition consistent with 2 CFR Part 200.319. In accordance 2 CFR Part 200.323 the grantee and subgrantee(s) must perform a cost or price analysis in connection with applicable procurement actions, including contract modifications.

### **C. Six Good Faith Efforts 40 CFR Part 33, Subpart C**

Pursuant to 40 CFR Section 33.301, the recipient agrees to make the following good faith efforts whenever procuring construction, equipment, services and supplies under an EPA financial assistance agreement, and to require that sub-recipients, loan recipients, and prime contractors also comply. Records documenting compliance with the six good faith efforts shall be retained:

(a) Ensure DBEs are made aware of contracting opportunities to the fullest extent practicable through outreach and recruitment activities. For Indian Tribal, State and Local and Government recipients, this will include placing DBEs on solicitation lists and soliciting them whenever they are potential sources.

(b) Make information on forthcoming opportunities available to DBEs and arrange time frames for contracts and establish delivery schedules, where the requirements permit, in a way that encourages and facilitates participation by DBEs in the competitive process. This includes, whenever possible, posting solicitations for bids or proposals for a minimum of 30 calendar days before the bid or proposal closing date.

(c) Consider in the contracting process whether firms competing for large contracts could subcontract with DBEs. For Indian Tribal, State and local Government recipients, this will include dividing total requirements when economically feasible into smaller tasks or quantities to permit maximum participation by DBEs in the competitive process.

(d) Encourage contracting with a consortium of DBEs when a contract is too large for one of these firms to handle individually.

(e) Use the services and assistance of the SBA and the Minority Business Development Agency of the Department of Commerce.

(f) If the prime contractor awards subcontracts, require the prime contractor to take the steps in paragraphs (a) through (e) of this section.

## **D. Utilization of Disadvantaged Business Enterprises**

### **General Compliance, 40 CFR Part 33**

The recipient agrees to comply with the requirements of EPA's Disadvantaged Business Enterprise (DBE) Program for procurement activities under assistance agreements, contained in 40 CFR Part 33.

### **Fair Share Objectives, 40 CFR Part 33, Subpart D**

A recipient must negotiate with the appropriate EPA award official, or his/her designee, fair share objectives for MBE and WBE participation in procurement under the financial assistance agreements.

In accordance with 40 CFR Section 33.411 some recipients may be exempt from the fair share objective requirements as described in 40 CFR Part 33, Subpart D. Recipients should work with their DBE coordinator if they think their organization may qualify for an exemption.

The dollar amount of this assistance agreement, or the total dollar amount of all of the recipient's financial assistance agreements in the current federal fiscal year from EPA is \$250,000 or more. The recipient accepts the applicable MBE/WBE fair share objectives/goals negotiated with EPA by the Nevada Department of Conservation and Natural Resources (NV DCNR), as follows:

	MBE	WBE
Construction	03%	01%
Equipment	02%	01%
Services	01%	01%
Supplies	01%	01%

The recipient accepts the fair share objectives/goals stated above and attests to the fact that it is purchasing the same or similar construction, supplies, services and equipment, in the same or similar relevant geographic buying market as NV DCNR.

### **Negotiating Fair Share Objectives/Goals, Section 33.404**

The recipient has the option to negotiate its own MBE/WBE fair share objectives/goals. If the recipient wishes to negotiate its own MBE/WBE fair share objectives/goals, the recipient agrees to submit proposed MBE/WBE objectives/goals based on an availability analysis, or disparity study, of qualified MBEs and WBEs in their relevant geographic buying market for construction, services, supplies and equipment.

The submission of proposed fair share goals with the supporting analysis or disparity study means that the recipient is **not** accepting the fair share objectives/goals of another recipient. The recipient agrees to submit proposed fair share objectives/goals, together with the supporting availability analysis or disparity study, to the Regional MBE/WBE Coordinator, Joe Ochab at [Ochab.Joe@epa.gov](mailto:Ochab.Joe@epa.gov), within 120 days of its acceptance of the financial assistance award. EPA will respond to the proposed fair share objective/goals within 30 days of receiving the submission. If proposed fair share objective/goals are not received within the 120 day time frame, the recipient may not expend its EPA funds for procurements until the proposed fair share objective/goals are submitted.

### **Contract Administration Provisions, 40 CFR Section 33.302**

The recipient agrees to comply with the contract administration provisions of 40 CFR Section 33.302.

### **Bidders List, 40 CFR Section 33.501(b) and (c)**

Recipients of a Continuing Environmental Program Grant or other annual reporting grant, agree to create and maintain a bidders list. Recipients of an EPA financial assistance agreement to capitalize a revolving loan fund also agree to require entities receiving identified loans to create and maintain a bidders list if the recipient of the loan is subject to, or chooses to follow, competitive bidding requirements. Please see 40 CFR Section 33.501 (b) and (c) for specific requirements and exemptions.

## **E. MBE/WBE Reporting**

### **General Compliance, 40 CFR, Part 33, Subpart E – Non-Reporting Condition**

MBE/WBE reports are required annually. Reporting is required for assistance agreements where there are funds budgeted for procuring construction, equipment, services and supplies, including funds budgeted for direct procurement by the recipient or procurement under subawards or loans in the "Other" category, that exceed the threshold amount of \$150,000, including amendments and/or modifications.

Based on EPA's review of the planned budget, this award does not meet the conditions above and is not subject to Disadvantaged Business Enterprise (DBE) Program reporting requirements. However, if during

the performance of the award the total of all funds expended for direct procurement by the recipient and procurement under subawards or loans in the "Other" category exceeds \$150,000, annual reports will be required and you are required to notify your EPA grant specialist for additional instructions.

The recipient also agrees to request prior approval from EPA for procurements that may activate DBE Program reporting requirements.

This provision represents an approved deviation from the MBE/WBE reporting requirements as described in 40 CFR Part 33, Section 33.502; however, the other requirements outlined in 40 CFR Part 33 remain in effect, including the Good Faith Effort requirements as described in 40 CFR Part 33, Subpart C, and Fair Share Objectives negotiation as described in 40 CFR Part 33, Subpart D.

#### **F. Indirect Costs**

Recipients are entitled to reimbursement of indirect costs, subject to any statutory or regulatory administrative cost limitations, if they have a current rate agreement or have submitted an indirect cost rate proposal to their cognizant federal agency for review and approval. Recipients are responsible for maintaining an approved indirect cost rate throughout the life of the award. Recipients may draw down grant funds once a rate has been approved, but only for indirect costs incurred during the period specified in the rate agreement. Recipients are not entitled to indirect costs for any period in which the rate has expired.

Recipients with differences between provisional and final rates are not entitled to more than the award amount. Recipients may request EPA approval to rebudget funds from direct cost categories to the indirect cost category (to grants which have not expired or been closed out) to cover increased indirect costs.

The recipient agrees to comply with the audit requirements prescribed in 2 CFR Part 200, Subpart F, Audits of States, Local Governments, and Non-Profit Organizations.

### **Programmatic Conditions**

a). This grant includes the performance of environmental measurements. WCDHD and EPA approved a Quality Management Plan (QMP) on October 2, 2014, and a Quality Assurance Program Plan (QAPP) for CO, SOx, PM2.5, PM10, Ozone, and NOx, on February 12, 2013. Both plans are up to date. For questions regarding both the QMP and QAPP, EPA's Quality Assurance Office can be contacted at 415-972-3411.

b). The recipient agrees to inform EPA as soon as problems, delays or adverse conditions become known which will materially impair the ability to meet the outputs/outcomes specified in the assistance agreement work plan. Since this grant is solely for the purpose of monitoring, quarterly reporting is required in the form of data entered into EPA's national Air Quality System (AQS) database.

c). Consistent with local, state, and federal grant procurement rules, recipient shall, when feasible, purchase environmentally preferable products/services and hold conferences/meetings using environmentally preferable measures. Environmentally preferable products/services and environmentally preferable measures include those that have a lesser or reduced effect on the environment when compared with competing products, services, or measures that serve the same purpose. This comparison may consider raw material acquisition, production, manufacturing, packaging, distribution, reuse, operation, maintenance, or disposal of the product or service. In addition, environmentally preferable measures for conferences/meetings apply to large gatherings of ten or more persons.

d). Cybersecurity:

(a) The recipient agrees that when collecting and managing environmental data under this assistance agreement, it will protect the data by following all State or Tribal law cybersecurity requirements as applicable.

(b)(1) EPA must ensure that any connections between the recipient's network or information system and EPA networks used by the recipient to transfer data under this agreement, are secure. For purposes of this Section, a connection is defined as a dedicated persistent interface between an Agency IT system and an external IT system for the purpose of transferring information. Transitory,

user-controlled connections such as website browsing are excluded from this definition.

If the recipient's connections as defined above do not go through the Environmental Information Exchange Network or EPA's Central Data Exchange, the recipient agrees to contact the EPA Project Officer (PO) no later than 90 days after the date of this award and work with the designated Regional/Headquarters Information Security Officer to ensure that the connections meet EPA security requirements, including entering into Interconnection Service Agreements as appropriate. This condition does not apply to manual entry of data by the recipient into systems operated and used by EPA's regulatory programs for the submission of reporting and/or compliance data.

(b)(2) The recipient agrees that any subawards it makes under this agreement will require the subrecipient to comply with the requirements in (b)(1) if the subrecipient's network or information system is connected to EPA networks to transfer data to the Agency using systems other than the Environmental Information Exchange Network or EPA's Central Data Exchange. The recipient will be in compliance with this condition: by including this requirement in subaward agreements; and during subrecipient monitoring deemed necessary by the recipient under 2 CFR 200.331(d), by inquiring whether the subrecipient has contacted the EPA Project Officer. Nothing in this condition requires the recipient to contact the EPA Project Officer on behalf of a subrecipient or to be involved in the negotiation of an Interconnection Service Agreement between the subrecipient and EPA.

-- END OF AGREEMENT --



DD	AH	_____
DHO	_____	_____
DA	LA	_____
Risk	DME	_____

**Staff Report**  
**Board Meeting Date: Jun 23, 2016**

**TO:** District Board of Health

**FROM:** Charlene Albee, Director, Air Quality Management Division  
(775) 784-7211, [calbee@washoecounty.us](mailto:calbee@washoecounty.us)

**SUBJECT:** Recommendation for the Board to Uphold Unappealed Notice of Violation Citation No. 5533 Issued to Aspen Earthworks, Case No. 1184, with a \$300 Negotiated Fine.

**SUMMARY**

Air Quality Management Division (AQMD) Staff recommends Citation No. 5533 be **upheld** and a fine of **\$300.00** be levied against Aspen Earthworks for failure to maintain a current Dust Control Permit and water truck logs at the construction site; and failure to control trackout. Failure to maintain the Dust Control Permit and water truck logs on site are both **minor violations** of the District Board of Health Regulations Governing Air Quality Management, specifically Section 040.030 Dust Control, Subsection E.2 Compliance and Records; and failure to control trackout is a **minor violation** of the District Board of Health Regulations Governing Air Quality Management, specifically Section 040.030 Subsection C.4 Work Practices.

**District Health Strategic Objective supported by this item:** Achieve targeted improvements in health outcomes and health equity.

**PREVIOUS ACTION**

No previous actions.

**BACKGROUND**

On Saturday, May 14, 2016, AQMD received a complaint of dust from a construction site in the Poco Rey Court and Wingfield Springs Road area. No inspector was available to respond the day of the complaint; therefore, Air Quality Specialist II Suzanne Dugger responded the next business day. Upon arrival on-site Specialist Dugger noted Aspen Earthworks was in operation. Specialist Dugger determined neither the Dust Control Permit (No. DCP15-0062) nor the water logs were being maintained on site. Ms. Dugger further noted truck track-out was not being removed from adjacent roadways.

Specialist Dugger contacted Mr. Marvin Monroy, site foreman for Aspen Earthworks, and explained her visit was due to a citizen complaint received on the weekend. Ms. Dugger also advised him the project was in violation of the District Board of Health Regulations Governing Air Quality Management, specifically Section 040.030 Dust Control, Subsection E.2 Record Keeping, and Section 040.030 Subsection C.4 Work Practices. Specialist Dugger advised Mr. Monroy Notice of Violation Citation No. 5533 would be issued for the violations noted. At Mr. Monroy's request Specialist

Dugger contacted Mr. Ryan Dustin, President of Aspen Earthworks, to explain the violations and the issuance of the citation. Mr. Dustin did not contest the violations or the issuance of the citation.

On May 20, 2016, Mr. Michael Wolf, Permitting and Enforcement Branch Chief conducted a negotiated settlement meeting attended by Specialist Dugger and Mr. Dustin, regarding Citation No. 5533. Mr. Wolf explained to Mr. Dustin the requirement to maintain a valid Dust Control Permit and the water logs on-site at all times; and that track-out materials must be removed from roadways prior to causing excessive dust emissions or within 24-hours. During the meeting, Mr. Dustin agreed to the terms of the negotiated settlement. A Memorandum of Understanding was signed by all parties.

### **FISCAL IMPACT**

There are no fiscal impacts resulting from the Board upholding the issuance of the Notice of Violation Citation and associated fine. All fine money collected is forwarded to the Washoe County School District to be used for environmentally focused projects for the benefit of the students.

### **RECOMMENDATION**

Staff recommends the District Board of Health **uphold** Notice of Violation Citation No. 5533, Case No. 1184, and levy a fine in the amount of **\$300** as a negotiated settlement for both **minor violations**.

### **ALTERNATIVE**

An alternative to upholding the Staff recommendation as presented would include:

1. The Board may determine no violation of the regulations has occurred and dismiss Citation No. 5533.

Or

2. The Board may determine to uphold Citation No. 5533 and levy any fine in the range of \$0 to \$250 per day for each violation.

### **POSSIBLE MOTION(S)**

Should the Board agree with Staff's recommendation or the alternatives, a possible motion would be:

1. "Move to grant the uphold Citation No. 5533, Case No. 1184, as recommended by Staff."

Or

2. "Move to uphold Citation No. 5533, Case No. 1184, and levy a fine in the amount of (*range of \$0 to \$250*) per day for each violation, with the matter being continued to the next meeting to allow for Aspen Earthworks to be properly noticed."



WASHOE COUNTY HEALTH DISTRICT  
 AIR QUALITY MANAGEMENT DIVISION  
 1001 EAST NINTH ST. • SUITE B171 • RENO NV 89512  
 (775) 784-7200



**NOTICE OF VIOLATION**

NOV 5533

DATE ISSUED: 5-16-2016

ISSUED TO: ASPEN EARTHWORKS PHONE #: 1-530-514-0508

MAILING ADDRESS: P.O. BOX 3205 CITY/ST: TRUCKEE, CA ZIP: 96160

NAME/OPERATOR: RYAN DUSTIN PHONE #: \_\_\_\_\_

COMPLAINT NO. CMPI6-0081 PERMIT # DCPI5-0062

YOU ARE HEREBY OFFICIALLY NOTIFIED THAT ON 5-16-2016 (DATE) AT 9:00 A.M. (TIME), YOU ARE IN VIOLATION OF THE FOLLOWING SECTION(S) OF THE WASHOE COUNTY DISTRICT BOARD OF HEALTH REGULATIONS GOVERNING AIR QUALITY MANAGEMENT:

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

VIOLATION DESCRIPTION: SEC. E, 2., a. (1) (2) FAILURE TO MAINTAIN DUST CONTROL PERMIT ON SITE & DUST CONTROL LOGS. (RECORD KEEPING)  
SEC. E, 4., b. (2) FAILURE TO CONTROL TRACK OUT (WORK PRACTICES)

LOCATION OF VIOLATION: WINGFIELD SPRINGS & POCC REY WINGFIELD SPRINGS VILLAGE 30

POINT OF OBSERVATION: ON SITE

Weather: PARTLY CLOUDY, COOL, NO WIND Wind Direction From: N E S W

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

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

Signature \_\_\_\_\_

**CITATION:** You are hereby notified that effective on 5-16-2016 (date) you are in violation of the section(s) cited above. You are hereby ordered to abate the above violation within TODAY hours/days. You may contact the Air Quality Management Division to request a negotiated settlement meeting by calling (775) 784-7200. You are further advised that within 10 working days of the date of this Notice of Violation, you may submit a written petition for appeal to the Washoe County Health District, Air Quality Management Division, P.O. Box 11130, Reno, Nevada 89520-0027. Failure to submit a petition within the specified time will result in the submission of this Notice of Violation to the District Board of Health with a recommendation for the assessment of an administrative fine.

**SIGNING THIS FORM IS NOT AN ADMISSION OF GUILT**

Signature: [Signature] Date: 5-16-2016

Issued by: [Signature] Title: AQS II

**PETITION FOR APPEAL FORM PROVIDED**

MEMORANDUM OF UNDERSTANDING

WASHOE COUNTY DISTRICT HEALTH DEPARTMENT  
AIR QUALITY MANAGEMENT DIVISION

Date: May 20 2016

Company Name: Aspen Earth works

Address: PO Box 3205, Truckee CA 96160

Notice of Violation # 5533 Case # 1184

The staff of the Air Quality Management Division of the Washoe County Health District issued the above referenced citation for the violation of Regulation: 040.030 sec E.2.g(1)(2)  
Failure to maintain dust control permit on site  
040.030 sec C.4.b(2) Failure to control track out

A settlement of this matter has been negotiated between the undersigned parties resulting in a penalty amount of \$ 300<sup>00</sup>. This settlement will be submitted to the District Board of Health for review at the regularly scheduled meeting on June 23, 2016

The undersigned agrees to waive an appeal to the Air Pollution Control Hearing Board so this matter may be submitted directly to the District Board of Health for consideration.

[Signature]  
Signature of Company Representative

[Signature]  
Signature of District Representative

Ryan Austin  
Print Name

Michael Wolf  
Print Name

Pres  
Title

WCAQMA Permitting & Enforcement Sup  
Title

\_\_\_\_\_  
Witness

[Signature]  
Witness

Washoe County Air Quality Management  
Permitting & Enforcement Branch  
Recommended Fine Calculation Worksheet

Company Name Aspen Earthworks  
Contact Name Ryan Dustin

Case 1184 NOV 5533 Complaint CMP16-0081

I. Violation of Section 040.030 Sec.C, 4., b., (2) & 040.030 Sec.E, 2., a., (1) & (2)

I. Recommended/Negotiated Fine = \$ 300

II. Violation of Section 0

II. Recommended/Negotiated Fine = \$ 0

III. Violation of Section 0

III. Recommended/Negotiated Fine = \$ 0

IV. Violation of Section 0

IV. Recommended/Negotiated Fine = \$ 0

V. Violation of Section 0

V. Recommended/Negotiated Fine = \$ 0

**Total Recommended/Negotiated Fine = \$ 300**

  
Air Quality Specialist

5-20-2016  
Date

  
Senior AQ Specialist/Supervisor

5/20/16  
Date

**Washoe County Air Quality Management  
Permitting & Enforcement Branch  
Recommended Fine Calculation Worksheet**

Company Name Aspen Earthworks  
 Contact Name Ryan Dustin

Case 1184 NOV 5533 Complaint CMP16-0081

Violation of Section 040.030 Sec.C, 4., b., (2) & 040.030 Sec.E, 2., a., (1) & (2)

**I. Base Penalty as specified in the Penalty Table** = \$ 500

**II. Severity of Violation**

**A. Public Health Impact**

**1. Degree of Violation**

(The degree of which the person/company has deviated from the regulatory requirements)

Minor – 0.5 Moderate – 0.75 Major – 1.0 **Adjustment Factor** 0.75

**Comment:** Both violaitons are minor violations per Washoe County Regulations

**2. Toxicity of Release**

Criteria Pollutant – 1x  
 Hazardous Air Pollutant – 2x **Adjustment Factor** 1.0

**Comment:** Track out causing fugitive dust, which is PM10

**3. Environmental/Public Health Risk (Proximity to sensitive environment or group)**

Negligible – 1x Moderate – 1.5x Significant – 2x **Adjustment Factor** 1.0

**Comment:** \_\_\_\_\_

Total Adjustment Factors (1 x 2 x 3) = 0.75

**B. Adjusted Base Penalty**

Base Penalty \$ 500 x Adjustment Factor 0.75 = \$ 375

**C. Multiple Days or Units in Violation**

Adjusted Penalty \$ 375 x Number of Days or Units 1 = \$ 375

**Comment:** \_\_\_\_\_

**D. Economic Benefit**

Avoided Costs \$ 0 + Delayed Costs \$ 0 = \$ 0

**Comment:** \_\_\_\_\_

**Penalty Subtotal**

Adjusted Base Penalty \$ 375 + Economic Benefit \$ 0 = \$ 375

**Washoe County Air Quality Management  
Permitting & Enforcement Branch  
Recommended Fine Calculation Worksheet**

**III. Penalty Adjustment Consideration**

**A. Degree of Cooperation** (0 – 25%) - 10%

**B. Mitigating Factors** (0 – 25%) - 10%

1. Negotiated Settlement
2. Ability to Pay
3. Other (explain)

**Comment:** Water truck arrival delayed for over 3 hours

**C. Compliance History**

No Previous Violations (0 – 10%) - 0%

**Comment:** \_\_\_\_\_

Similar Violation in Past 12 months (25 - 50%) + 0%

**Comment:** Exact violation in November 2014

Similar Violation within past 3 year (10 - 25%) + 0%

**Comment:** third violation in 3 years

Previous Unrelated Violation (5 – 25%) + 0%

**Comment:** \_\_\_\_\_

**Total Penalty Adjustment Factors** – sum of A, B, & C -20%

**IV. Recommended/Negotiated Fine**

Penalty Adjustment:

\$ <u>375</u>	x	<u>-20%</u>	=	<u>-75</u>
Penalty Subtotal		Total Adjustment Factors		Total Adjustment Value
(From Section II)		(From Section III)		

Additional Credit for Environmental Investment/Training - \$ \_\_\_\_\_

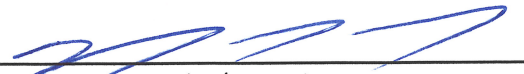
**Comment:** \_\_\_\_\_

Adjusted Penalty:

\$ <u>375</u>	+/-	\$ <u>-75</u>	=	\$ <u>300</u>
Penalty Subtotal		Total Adjustment Value		Recommended/Negotiated
(From Section II)		(From Section III + Credit)		Fine

  
Air Quality Specialist

5-20-2016  
Date

  
Senior AQ Specialist/Supervisor

5/20/16  
Date

DD	NA	_____
DHO		_____ <i>AD</i>
DA	NA	_____
Risk	NA	_____

**Staff Report**  
**Board Meeting Date: June 23, 2016**

**TO:** District Board of Health

**FROM:** Anna Heenan, Administrative Health Services Officer  
328-2417, [aheenan@washoecounty.us](mailto:aheenan@washoecounty.us)

**SUBJECT:** Acknowledge receipt of the Health District Fund Financial Review for May, Fiscal Year 2016

**SUMMARY**

May, fiscal year 2016 (FY16), ended with a cash balance of \$2,724,272. Total revenues were \$17,717,960 which was 88.2% of budget and an increase of \$419,613 or 2.4% over fiscal year 2015 (FY15). With 91.7% of the fiscal year completed 81.8% of the expenditures have been spent for a total of \$17,784,087 up \$295,020 or 1.7% compared to FY15.

**District Health Strategic Objective supported:** Secure and deploy resources for sustainable impact.

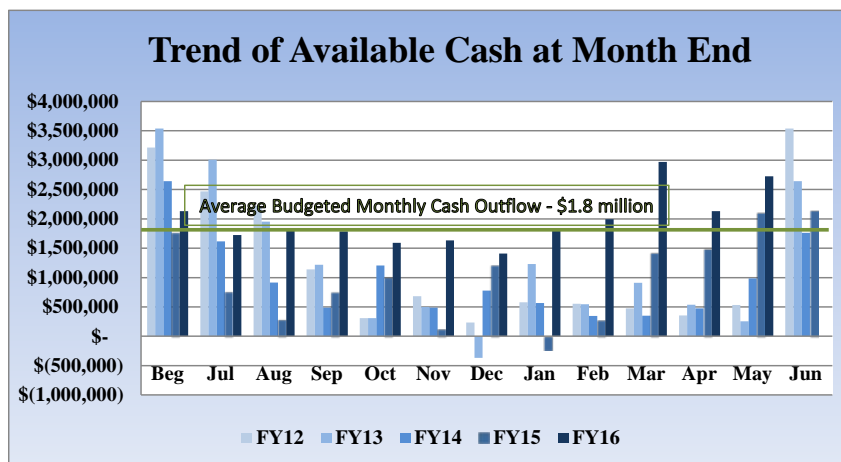
**PREVIOUS ACTION**

Fiscal Year 2016 Budget was adopted May 18, 2015.

**BACKGROUND**

**Review of Cash**

The available cash at the end of May, FY16, was \$2,724,272 which was 150.5% of the average budgeted monthly cash outflow of \$1,810,512 for the fiscal year and up 29.7% or \$624,429 compared to the same time in FY15. The encumbrances and other liability portion of the cash balance totals \$1.2 million; the portion of cash restricted as to use is \$1.1 million (e.g. Air Quality and the Solid Waste Management programs restricted cash); leaving a balance of \$400,000.

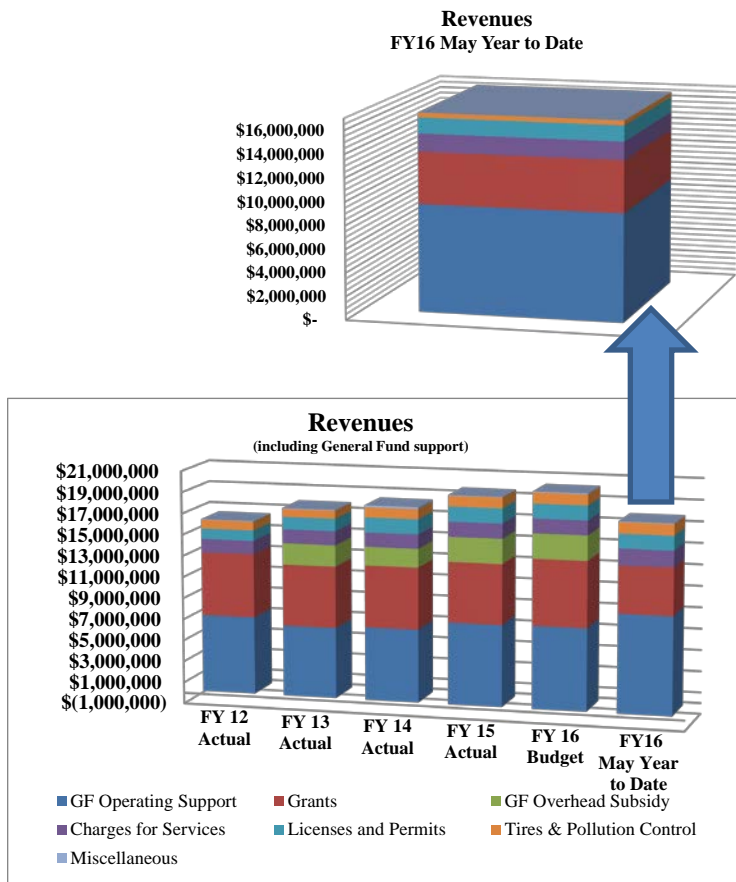


Note: December FY13 negative cash is due to 50%, \$1.3million, of the County Overhead being charged in December with just 8.3%, \$719,000, of the County Support being transferred to the fund. January FY15 no County General Fund support was transferred to the Health Fund leading to a negative cash situation.

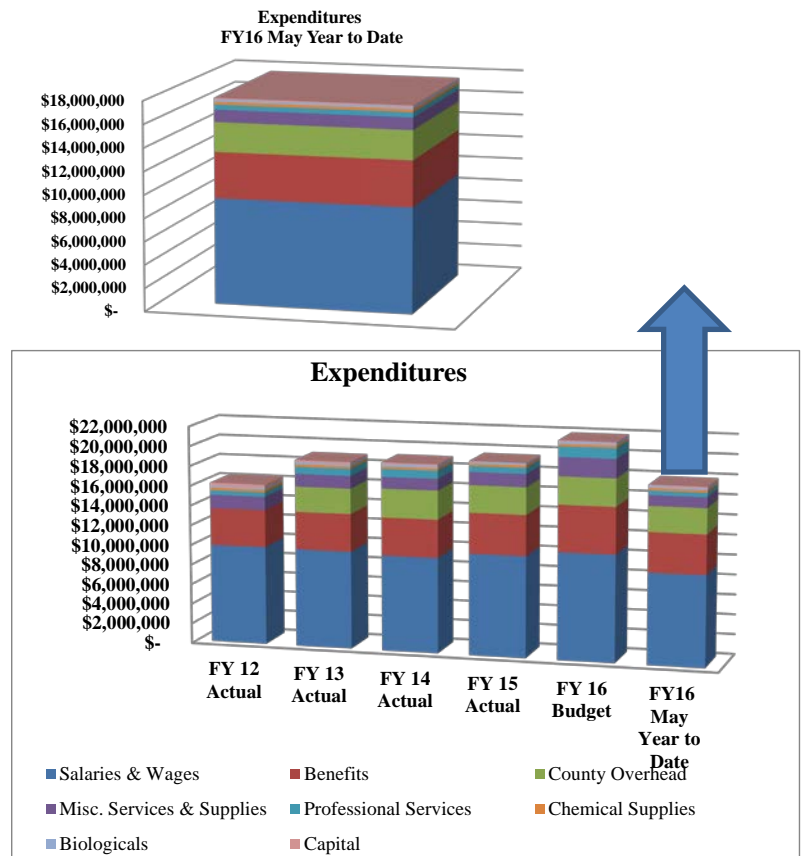


**Review of Revenues (including transfers from General Fund) and Expenditures by category**

Total year to date **revenues** of \$17,717,960 were up \$419,613 which was an increase of 2.4% over the same time last fiscal year and was 88.2% of budget. The single largest source of the increase is from the County General Fund support of \$9,237,118, excluding that source of revenue the fund was 4.3% or \$349,337 up from last year. The revenue categories that were up over last fiscal year are as follows: licenses and permits of \$1,356,199 were up \$83,981 or 6.6%; tire and pollution control funding of \$1,064,635 was up \$76,546 or 7.7%; charges for services of \$1,543,564 were up \$313,118 or 25.4%; fines for illegal dumping received \$500; miscellaneous revenues of \$66,325 were up \$20,651 or 45.2%; and, the County General Fund transfer of \$9,237,118 was up \$70,276 or 0.8%. The federal and state grant revenue of \$4,449,619 were down by \$145,459 or 3.2%.



The total year to date **expenditures** of \$17,784,087 increased by \$295,020 or 1.7% compared to the same time frame for fiscal year 2015. Salaries and benefits expenditures for the eleven months were \$13,149,488 up \$110,004 or 0.8% over the prior year. The total services and supplies expenditures of \$4,576,714 were up \$152,658 which was a 3.5% increase. The major expenditures included in the services and supplies are: the professional services which totaled \$434,015, up \$72,784 or 20.1% over the prior year; chemical supplies were up 7.5% or \$17,435 over last year for a total of \$250,088; the biologicals of \$204,226 were up \$29,874 or 17.1%; and, County overhead charges of \$2,562,892 were up 2% or \$50,252 over last year. Total capital expenditures for the year were \$57,884.



**Review of Revenues and Expenditures by Division**

AQM has received \$2,055,690 or 91.1% of budget and down \$86,040 in revenue compared to FY15. CCHS received \$2,904,485 in revenue or 80.4% of budget and up \$47,203 over FY15. EHS has received \$1,895,478 which is 96.0% of budget and up \$161,998 over FY15. EPHP has received \$1,617,689 in revenue and is up \$218,828 or 15.6% over last year due to additional grant funding and an increase in birth and death certificates. The County General Fund support is the single largest source of revenue and totaled \$9,237,118 or 91.7% of budget.

With 91.7% of the fiscal year completed the total expenditures were \$17,784,087 which is 81.8% of budget and up \$295,020 over last fiscal year. ODHO spent \$526,579 up \$89,514 or 20.5% over FY15 due to filling a position that was vacant in FY15. AHS has spent \$918,526 down \$91,659 or 9.1% over last year due to an employee retirement payout of accrued benefits in FY15. AQM spent \$2,401,418 of the division budget and has increased \$106,984 or 4.7% over last fiscal year due to new costs for the regional permitting system; accrued benefit payout for an employee retirement; additional air monitoring equipment; and additional air quality media outreach. CCHS has spent \$6,252,537 year to date and is down \$40,194 or 0.6% over last year due to a decline in advertising associated with the Chronic Disease program. EHS spent \$5,401,349 and has increased \$39,635 or 0.7% over last year. EPHP expenditures were \$2,283,678 and were \$190,740 or 9.1% over FY15 due to vacant staff positions in FY15 that have been filled this fiscal year.

Washoe County Health District Summary of Revenues and Expenditures Fiscal Year 2011/2012 through May Year to Date Fiscal Year 2015/2016 (FY16)									
	Actual Fiscal Year			Fiscal Year 2014/2015		Fiscal Year 2015/2016			
	2011/2012	2012/2013	2013/2014	Actual Year End (audited)	May Year to Date	Adjusted Budget	May Year to Date	Percent of Budget	FY16 Increase over FY15
<b>Revenues (all sources of funds)</b>									
ODHO	-	-	-	-	-	15,000	7,500	50.0%	-
AHS	8	33,453	87,930	151	151	-	-	-	-100.0%
AQM	1,966,492	2,068,697	2,491,036	2,427,471	2,141,730	2,255,504	2,055,690	91.1%	-4.0%
CCHS	3,706,478	3,322,667	3,388,099	3,520,945	2,857,282	3,610,928	2,904,485	80.4%	1.7%
EHS	1,755,042	1,828,482	1,890,192	2,008,299	1,733,481	1,975,149	1,895,478	96.0%	9.3%
EPHP	1,670,338	1,833,643	1,805,986	1,555,508	1,398,861	2,154,845	1,617,689	75.1%	15.6%
GF support	7,250,850	8,623,891	8,603,891	10,000,192	9,166,842	10,076,856	9,237,118	91.7%	0.8%
<b>Total Revenues</b>	<b>\$16,349,208</b>	<b>\$17,710,834</b>	<b>\$18,267,134</b>	<b>\$19,512,566</b>	<b>\$17,298,347</b>	<b>\$20,088,282</b>	<b>\$17,717,960</b>	<b>88.2%</b>	<b>2.4%</b>
<b>Expenditures</b>									
ODHO	-	-	-	481,886	437,065	703,642	526,579	74.8%	20.5%
AHS	1,202,330	1,366,542	1,336,740	1,096,568	1,010,186	1,018,458	918,526	90.2%	-9.1%
AQM	1,955,798	2,629,380	2,524,702	2,587,196	2,294,434	3,222,502	2,401,418	74.5%	4.7%
CCHS	6,086,866	6,765,200	6,949,068	6,967,501	6,292,731	7,316,459	6,252,537	85.5%	-0.6%
EHS	4,848,375	5,614,688	5,737,872	5,954,567	5,361,713	6,535,814	5,401,349	82.6%	0.7%
EPHP	2,084,830	2,439,602	2,374,417	2,312,142	2,092,938	2,939,917	2,283,678	77.7%	9.1%
<b>Total Expenditures</b>	<b>\$16,178,200</b>	<b>\$18,815,411</b>	<b>\$18,922,800</b>	<b>\$19,399,860</b>	<b>\$17,489,067</b>	<b>\$21,736,792</b>	<b>\$17,784,087</b>	<b>81.8%</b>	<b>1.7%</b>
<b>Revenues (sources of funds) less Expenditures:</b>									
ODHO	-	-	-	(481,886)	(437,065)	(688,642)	(519,079)		
AHS	(1,202,322)	(1,333,088)	(1,248,810)	(1,096,417)	(1,010,035)	(1,018,458)	(918,526)		
AQM	10,694	(560,683)	(33,666)	(159,725)	(152,704)	(966,998)	(345,728)		
CCHS	(2,380,389)	(3,442,533)	(3,560,969)	(3,446,555)	(3,435,450)	(3,705,531)	(3,348,052)		
EHS	(3,093,333)	(3,786,206)	(3,847,680)	(3,946,268)	(3,628,233)	(4,560,665)	(3,505,871)		
EPHP	(414,492)	(605,958)	(568,431)	(756,634)	(694,076)	(785,071)	(665,989)		
GF Operating	7,250,850	8,623,891	8,603,891	10,000,192	9,166,842	10,076,856	9,237,118		
<b>Surplus (deficit)</b>	<b>\$ 171,008</b>	<b>\$ (1,104,577)</b>	<b>\$ (655,666)</b>	<b>\$ 112,707</b>	<b>\$ (190,720)</b>	<b>\$ (1,648,509)</b>	<b>\$ (66,127)</b>		
<b>Fund Balance (FB)</b>	<b>\$ 3,916,042</b>	<b>\$ 2,811,465</b>	<b>\$ 2,155,799</b>	<b>\$ 2,268,506</b>		<b>\$ 619,996</b>			
<b>FB as a % of Expenditures</b>	<b>24.2%</b>	<b>14.9%</b>	<b>11.4%</b>	<b>11.7%</b>		<b>2.9%</b>			

Note: ODHO=Office of the District Health Officer, AHS=Administrative Health Services, AQM=Air Quality Management, CCHS=Community and Clinical Health Services, EHS=Environmental Health Services, EPHP=Epidemiology and Public Health Preparedness, GF=County General Fund

**FISCAL IMPACT**

No fiscal impact associated with the acknowledgement of this staff report.

**RECOMMENDATION**

Staff recommends that the District Board of Health acknowledge receipt of the Health District Fund Financial Review for May, Fiscal Year 2016.

**POSSIBLE MOTION**

Move to acknowledge receipt of the Health District Fund Financial Review for May, Fiscal Year 2016.

Attachment:  
Health District Fund financial system summary report

Period: 1 thru 11 2016  
 Accounts: CO-P-L P&L Accounts  
 Business Area: \*

Fund: 202 Health Fund  
 Fund Center: 000 Default Washoe County  
 Functional Area: 000 Standard Functional Area Hiera

Accounts	2016 Plan	2016 Actuals	Balance	Act%	2015 Plan	2015 Actual	Balance	Act%
422503 Environmental Permits	46,317-	54,184-	7,867	117	46,317-	52,713-	6,396	114
422504 Pool Permits	97,000-	100,616-	3,616	104	97,000-	94,210-	2,790	97
422505 RV Permits	11,000-	9,961-	1,040-	91	11,000-	10,578-	422-	96
422507 Food Service Permits	509,823-	435,505-	74,318-	85	420,000-	414,599-	5,401-	99
422508 Wat Well Const Perm	30,000-	48,814-	18,814-	163	30,000-	36,104-	6,104	120
422509 Water Company Permits	5,000-	17,412-	12,412-	348	5,000-	13,123-	8,123	262
422510 Air Pollution Permits	477,443-	471,991-	5,452-	99	474,103-	476,216-	2,113	100
422511 ISDS Permits	75,000-	102,287-	27,287-	136	75,000-	81,486-	6,486	109
422513 Special Event Permits	90,000-	83,970-	6,030-	93	105,000-	66,413-	38,587-	63
422514 Initial Applic Fee	31,000-	31,460-	460	101	31,000-	26,776-	4,224-	86
* Licenses and Permits	1,372,583-	1,356,199-	16,384-	99	1,294,420-	1,272,218-	22,202-	98
431100 Federal Grants	5,701,499-	3,988,400-	1,713,099-	70	5,271,536-	4,098,982-	1,172,554-	78
431105 Federal Grants - Indirect	291,791-	280,788-	11,003-	96	235,667-	226,178-	9,489-	96
432100 State Grants	209,951-	166,908-	43,043-	79	311,068-	257,990-	53,078-	83
432105 State Grants-Indirect	15,457-	13,523-	1,934-	87	16,026-	11,928-	4,098-	74
432310 Tire Fee NRS 444A.090	468,548-	465,345-	3,203-	99	468,548-	446,463-	22,085-	95
432311 Pol Ctrl 445B.830	550,000-	599,290-	49,290-	109	318,667-	541,626-	222,958	170
* Intergovernmental	7,237,247-	5,514,254-	1,722,993-	76	6,621,513-	5,583,167-	1,038,345-	84
460162 Services to Other Agencies	28,421-	19,196-	9,225-	68	89,000-	39,734-	49,266-	45
460500 Other Immunizations	89,000-	24,938-	64,063-	28	8,200-	3,683-	4,517-	45
460501 Medicaid Clinical Services	8,200-	64,634-	56,434	788	20,000-	12,855-	7,145-	64
460503 Childhood Immunizations	20,000-	13,210-	6,790-	66				
460504 Maternal Child Health								
460505 Non Title X Revenue		85-	85					
460508 Tuberculosis	4,100-	6,250-	2,150	152	4,100-	4,504-	404	110
460509 Water Quality		354-	354			377		
460510 IT Overlay	35,344-	32,319-	3,025-	91	35,344-	31,439-	3,905-	89
460511 Birth and Death Certificates	470,000-	477,604-	7,604	102	480,000-	426,600-	53,400-	89
460512 Duplication Service Fees		1,738-	1,738			307		
460513 Other Health Service Charges	10,167-	40,227-	30,060	396		793		
460514 Food Service Certification	18,000-	294-	17,706-	2	18,000-	16,062-	1,938-	89
460515 Medicare Reimbursement								
460516 Pgm Inc-3rd Prty Rec	1,450-	22,141-	20,691	1,527	1,750-	34,934-	33,184	1,996
460517 Influenza Immunization	7,000-		7,000-		7,000-	53-	6,948-	1
460518 STD Fees	21,000-	20,214-	786-	96	21,000-	13,084-	7,916-	62
460519 Outpatient Services		1,505-	1,505			1,225-	1,225	
460520 Eng Serv Health	50,000-	67,916-	17,916	136	50,000-	44,769-	5,231-	90
460521 Plan Review - Pools & Spas	1,500-	8,016-	6,516	534	3,600-	4,358-	758	121
460523 Plan Review - Food Services	20,000-	23,542-	3,542	118	20,000-	22,928-	2,928	115
460524 Family Planning	32,000-	44,165-	12,165	138	32,000-	29,491-	2,509-	92
460525 Plan Review - Vector	42,000-	66,648-	24,648	159	42,000-	48,269-	6,269	115
460526 Plan Review-Air Quality	60,804-	50,139-	10,665-	82	57,889-	50,075-	7,814-	87
460527 NOE-AQM	116,984-	113,824-	3,160-	97	116,984-	111,244-	5,740-	95

Period: 1 thru 11 2016 Fund: 202 Health Fund  
 Accounts: GO-P-L P&L Accounts Default Washoe County  
 Business Area: \* Functional Area: 000 Standard Functional Area Hiera

Accounts	2016 Plan	2016 Actuals	Balance	Act%	2015 Plan	2015 Actual	Balance	Act%
460528 NESHAP-AQM	99,333-	111,157-	11,824	112	99,333-	92,106-	7,227-	93
460529 Assessments-AQM	51,336-	56,489-	5,153	110	51,336-	52,056-	720	101
460530 Inspector Registr-AQ	2,162-	98-	2,064	5	2,162-	855-	1,307-	40
460531 Dust Plan-Air Quality	142,403-	248,949-	106,546	175	142,403-	159,506-	17,103	112
460532 Plan Rvw Hotel/Motel	2,530-	646-	1,884	26	2,530-	4,387-	4,387	
460533 Quick Start								
460534 Child Care Inspection	8,514-	8,002-	512	94	8,514-	7,948-	566-	93
460535 Pub Accomod Inspectn	19,000-	19,265-	265	101	19,000-	16,804-	2,196-	88
460570 Education Revenue								
* Charges for Services	1,361,248-	1,543,564-	182,317	113	1,329,615-	1,230,446-	99,169-	93
471265 Illegal Dumping		500-	500					
* Fines and Forfeitures		500-	500					
483000 Rental Income						151-	151	
484000 Donations, Contributions	37,550-	3,700-	3,700	65	37,550-	24,774-	12,776-	66
484050 Donations Federal Pgm Income		24,370-	13,180-		55,988-		55,988-	
484195 Non-Govt'l Grants		8,571-	3,060-	74	5,125-		5,125-	
484197 Non-Gov. Grants-Indirect	11,631-	28,089-	10,510-	73		19,131-	19,131	
485100 Reimbursements	38,599-					120-	120	
485121 Jury Reimbursements		221-	221			1,497-	1,497	
485300 Other Misc Govt Rev	87,780-	64,950-	22,830-	74	98,663-	45,673-	52,990-	46
* Miscellaneous								
** Revenue	10,058,858-	8,479,467-	1,579,391-	84	9,344,211-	8,131,505-	1,212,706-	87
701110 Base Salaries	9,728,309	8,277,532	1,450,777	85	9,204,374	8,334,527	869,846	91
701120 Part Time	398,206	326,349	71,857	82	408,927	321,671	87,256	79
701130 Pooled Positions	374,608	331,895	42,713	89	510,064	330,590	179,474	65
701140 Holiday Work	4,319	2,154	2,155	50	4,319	2,804	1,515	65
701150 xcContractual Wages								
701200 Incentive Longevity	166,775	81,149	85,626	49	155,100	83,428	71,672	54
701300 Overtime	64,681	67,749	3,068-	105	62,798	57,488	5,311	92
701403 Shift Differential	302	290	12	96		128	128-	
701406 Standby Pay								
701408 Call Back	1,000	938	62	94	1,000	1,000	1,000	
701412 Salary Adjustment	43,993-		43,993-		131,434		131,434	
701413 Vac Payoff/Sick Pay-Term	49,515	58,470	8,955-	118		150,763	150,763-	
701414 Vacation Denied-Payoff		416	416-					
701417 Comp Time		7,218	385	95		22,931	22,931-	
701419 Comp Time - Transfer	7,603	2,785	2,785-					
701500 Merit Awards								
Salaries and Wages	10,751,325	9,156,945	1,594,380	85	10,478,015	9,304,329	1,173,686	89
705110 Group Insurance	1,602,223	1,375,852	226,371	86	1,452,108	1,312,052	140,056	90
705210 Retirement	2,870,083	2,413,660	456,424	84	2,508,521	2,219,303	289,218	88
705215 Retirement Calculation								
705230 Medicare April 1986	143,292	125,457	17,835	88	134,798	127,748	7,050	95



Period: 1 thru 11 2016  
 Accounts: GO-P-L P&L Accounts  
 Business Area: \*

Fund: 202 Health Fund  
 Fund Center: 000 Default Washoe County  
 Functional Area: 000 Standard Functional Area Hiera

Accounts	2016 Plan	2016 Actuals	Balance	Act%	2015 Plan	2015 Actual	Balance	Act%
710577 Uniforms & Special Clothing	9,900	1,718	8,182	17	12,350	2,086	10,264	17
710585 Undesignated Budget					90,642		90,642	
710594 Insurance Premium		5,605	5,605-					
710598 Telecomm Charge-out contra	79,703	79,151	552	99	109,115	79,692	29,423	73
710600 IT Lease-Office Space								
710620 IT Lease-Equipment	242,868	204,226	38,642	84	203,743	174,352	29,392	86
710703 Biologicals		9	9-					
710708 Foster Care Home								
710714 Referral Services	96,331	74,563	21,769	77	96,370	1,356	1,356-	64
710721 Outpatient	2,170	1,526	644	70	4,889	61,990	34,381	35
710872 Food Purchases								
711010 Utilities								
711020 Water/Sewer								
711100 ESD Asset Management	66,552	55,930	10,622	84	66,526	58,829	7,697	88
711113 Equip Srv Replace	38,039	25,992	12,047	68	27,586	24,766	2,820	90
711114 Equip Srv O & M	62,441	56,066	6,375	90	41,538	40,635	902	98
711115 Equip Srv Motor Pool					5,000		5,000	
711117 ESD Fuel Charge	47,382	27,813	19,569	59	48,591	39,913	8,677	82
711119 Prop & Liab Billings	75,992	69,660	6,333	92	74,502	68,294	6,208	92
711210 Travel	145,143	83,940	61,203	58	222,874	85,096	137,778	38
711300 Cash Over Short						20-	20	
711399 ProCard in Process		58	58-			65	65-	
711400 Overhead - General Fund	2,795,882	2,562,892	232,990	92	2,741,061	2,512,639	228,422	92
711504 Equipment nonCapital	136,573	90,953	45,620	67	100,055	69,536	30,519	69
* Services and Supplies	6,168,713	4,518,633	1,650,080	73	5,868,891	4,424,056	1,444,835	75
781004 Equipment Capital	105,880	57,884	47,996	55	381,454	25,527	355,927	7
* Capital Outlay	105,880	57,884	47,996	55	25,000	25,000	25,000	6
** Expenses	21,726,142	17,726,005	4,000,136	82	20,954,034	17,489,067	3,464,967	83
485192 Surplus Equipment Sales			1,375					
* Other Fin. Sources		1,375-	1,375					
621001 Transfer From General	10,076,856-	9,237,118-	839,738-	92	10,000,192-	9,166,843-	833,349-	92
* Transfers In	10,076,856-	9,237,118-	839,738-	92	10,000,192-	9,166,843-	833,349-	92
814230 To Reg Permits-230	58,081	58,081		100				
* 814430 To Reg Permits Capit	58,081	58,081		100				
* Transfers Out	10,018,775-	9,180,412-	838,363-	92	10,000,192-	9,166,843-	833,349-	92
** Other Financing Src/Use								
*** Total	1,648,509	66,127	1,582,382	4	1,609,632	190,720	1,418,912	12



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*Regional Emergency Medical Services Authority*

# **REMSA**

## **Franchise Compliance Report**

**MAY 2016**





**REMSA Accounts Receivable Summary**  
Fiscal 2016

Month	#Patients	Total Billed	Average Bill	YTD Average	Average Collected
July	3813	\$4,171,875	\$1,094	\$1,094	\$394
August	3767	\$4,133,146	\$1,097	\$1,096	\$394
September	3827	\$4,220,950	\$1,103	\$1,098	\$395
October	3879	\$4,265,879	\$1,100	\$1,099	\$395
November	3667	\$4,033,496	\$1,100	\$1,099	\$396
December	3756	\$4,147,194	\$1,104	\$1,100	\$396
January	3929	\$4,334,292	\$1,103	\$1,100	\$396
February	3779	\$4,173,630	\$1,104	\$1,101	\$396
March	4110	\$4,578,934	\$1,114	\$1,102	\$397
April	3978	\$4,363,776	\$1,097	\$1,102	\$397
May	3894	\$4,224,935	\$1,085	\$1,100	\$396
<b>Totals</b>	<b>42399</b>	<b>\$46,648,106</b>	<b>\$1,100</b>		

Allowed ground average bill: \$1,098.00  
 Monthly average collection rate: 36%

## Fiscal 2016

Month	Priority 1 System-Wide Avg. Response Time	Priority 1 Zone A	Priority 1 Zones B,C,D
Jul. 2015	6 mins. 0 secs.	92%	99%
Aug.	6 mins. 10 secs.	92%	95%
Sept.	6 mins. 22 secs.	91%	96%
Oct.	6 mins. 18 secs.	91%	94%
Nov.	6 mins. 19 secs.	92%	96%
Dec.	6 mins. 30 secs.	92%	97%
Jan. 2016	6 mins. 26 secs	92%	96%
Feb.	6 mins. 04 secs.	92%	97%
Mar.	6 mins. 05 secs	92%	96%
Apr.	5 mins. 54 secs	94%	99%
May	6 mins. 12 secs	92%	97%
June 2016			

Year to Date: July 2015 through May 2016

Priority 1 Zone A	Priority 1 Zones B,C,D
92%	96%

Average Response Times by Entity				
Month/Year	Priority	Reno	Sparks	Washoe County
July 2015	P-1	5:29	6:02	8:39
	P-2	5:50	6:55	8:31
Aug. 2015	P-1	5:14	5:57	9:08
	P-2	5:55	6:59	8:50
Sept. 2015	P-1	5:21	6:18	9:42
	P-2	6:06	7:01	9:03
Oct. 2015	P-1	5:33	6:04	9:33
	P-2	6:00	6:37	9:33
Nov. 2015	P-1	5:28	6:09	9:16
	P-2	5:51	6:59	9:25
Dec. 2015	P-1	5:39	6:06	9:51
	P-2	6:15	7:03	10:20
Jan. 2016	P-1	5:34	6:09	9:08
	P-2	6:14	6:55	10:20
Feb. 2016	P-1	5:24	5:55	8:48
	P-2	6:02	6:58	9:54
Mar. 2016	P-1	5:19	6:01	8:47
	P-2	5:31	6:37	6:15
Apr. 2016	P-1	5:06	5:53	8:03
	P-2	5:25	6:10	7:45
May 2016	P-1	5:03	6:32	7:56
	P-2	5:15	6:09	7:38
June 2016	P-1			
	P-2			

Year to Date: July 2015 through May 2016

Priority	Reno	Sparks	Washoe County
P-1	5:23	6:00	9:00
P-2	5:51	6:45	9:09



## GROUND AMBULANCE OPERATIONS REPORT

May 2016

### 1. OVERALL STATISTICS:

Total Number of System Responses	6141
Total Number of Responses in Which No Transport Resulted	2212

### 2. CALL CLASSIFICATION REPORT:

Cardiopulmonary Arrests	2%
Medical	47%
OB	1%
Psychiatric/Behavioral	9%
Transfers	12%
Trauma – MVA	7%
Trauma – Non MVA	19%
Unknown	3%

### 3. MEDICAL DIRECTOR'S REPORT:

The Clinical Director or designee reviewed:

- 100% of cardiopulmonary arrests
- 100% of pediatric patients (transport and non-transport patients)
- 100% of advanced airways (outside cardiac arrests)
- 100% of STEMI Alert or STEMI rhythms
- 100% of deliveries and neonatal resuscitation
- 100% Advanced Airway Success rates for nasal/oral intubation and King Airway placement for adult and pediatric patients.

Total number of ALS calls: 2917

Total number of above calls receiving QA reviews: 272

Percentage of charts reviewed from the above transports: 9.32%



# REMSA OCU Incident Detail Report

Period: 5/01/2016 thru 5/31/2016

CAD Edits & Call Priority Reclassification

Response Area	Orig Zone	Zone	Clock Start	Clock Stop	Stop Clock Unit	Orig Threshold	Threshold	Orig RespTime	Response Time
A-08-IC Reno	Zone A	Zone A	05/01/2016 10:36:51	05/01/2016 10:36:55	313	00:12:59	00:12:59	-00:00:59	00:00:04
A-08-IC Reno	Zone A	Zone A	05/04/2016 13:08:09	05/04/2016 13:17:04	304	00:08:59	00:08:59	00:09:00	00:08:55
A-08-IC Reno	Zone A	Zone A	05/05/2016 12:53:36	05/05/2016 12:54:57	313	00:12:59	00:12:59	-00:00:08	00:01:21
A-08-IC Washoe Co N-NW	Zone A	Zone A	05/05/2016 16:54:53	05/05/2016 17:13:45	323	00:08:59	00:08:59	00:18:52	00:18:52
A-08-IC Reno	Zone A	Zone A	05/07/2016 07:56:15	05/07/2016 08:02:18	312	00:12:59	00:12:59	-00:03:56	00:06:03
A-08-IC Reno	Zone A	Zone A	05/07/2016 18:57:55	05/07/2016 18:58:14	419	00:12:59	00:12:59	-00:00:05	00:00:19
A-08-IC Washoe Co N-NW	Zone A	Zone A	05/07/2016 23:57:39	05/07/2016 23:59:56	425	00:08:59	00:08:59	-00:00:16	00:02:17
A-08-IC Reno	Zone A	Zone A	05/08/2016 20:01:29	05/08/2016 20:02:10	123	00:12:59	00:12:59	-00:01:02	00:00:41
A-08-IC Reno	Zone A	Zone A	05/08/2016 20:17:27	05/08/2016 20:17:59	319	00:19:59	00:19:59	-00:00:03	00:00:32
		Zone A	05/09/2016 15:19:08	05/09/2016 15:21:49	323	00:00:00	00:08:59	00:02:41	00:02:41
A-08-IC Reno	Zone A	Zone A	05/12/2016 19:18:11	05/12/2016 19:18:38	435	00:12:59	00:12:59	-00:00:05	00:00:27
A-08-IC Reno	Zone A	Zone A	05/13/2016 00:13:03	05/13/2016 00:15:18	402	00:12:59	00:12:59	-00:00:17	00:02:15
A-08-IC Reno	Zone A	Zone A	05/13/2016 21:38:11	05/13/2016 21:40:20	402	00:12:59	00:12:59	-00:00:01	00:02:09
A-08-IC Reno	Zone A	Zone A	05/16/2016 02:46:18	05/16/2016 02:46:39	414	00:12:59	00:12:59	-00:02:17	00:00:21
A-08-IC Reno	Zone A	Zone A	05/16/2016 10:01:59	05/16/2016 10:10:57	302	00:08:59	00:08:59	00:09:00	00:08:58
A-08-IC Reno	Zone A	Zone A	05/16/2016 21:13:15	05/16/2016 21:14:10	402	00:12:59	00:12:59	-00:00:04	00:00:55
A-08-IC Reno	Zone A	Zone A	05/19/2016 04:56:14	05/19/2016 04:57:56	402	00:08:59	00:08:59	-00:00:21	00:01:42
A-08-IC Reno	Zone A	Zone A	05/22/2016 06:21:16	05/22/2016 06:21:38	340	00:00:00	00:12:59	00:00:22	00:00:22
A-08-IC Reno	Zone A	Zone A	05/25/2016 17:19:13	05/25/2016 17:25:00	414	00:08:59	00:08:59	00:12:00	00:05:47
A-08-IC Reno	Zone A	Zone A	05/25/2016 23:57:36	05/26/2016 00:01:39	401	00:08:59	00:08:59	00:10:42	00:04:03
		Zone A	05/26/2016 05:34:13	05/26/2016 05:39:04	331	00:00:00	00:12:59	00:04:51	00:04:51
A-08-IC Reno	Zone A	Zone A	05/28/2016 21:58:57	05/28/2016 22:00:50	308	00:08:59	00:08:59	-00:00:13	00:01:53
A-08-IC Reno	Zone A	Zone A	05/31/2016 15:43:05	05/31/2016 15:47:50	330	00:12:59	00:12:59	-00:00:04	00:04:45
		Zone B	05/15/2016 13:47:10	05/15/2016 14:12:05	337	00:00:00	00:15:59	00:24:55	00:24:55

Call Priority Reclassification					
Incident Number	City	Zone	Incident Date	Exemption Reason	Priority
128120-16	Reno, NV	A	5/7/2016	Upgrade	1



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*Regional Emergency Medical Services Authority*

**REMSA**

**EDUCATION AND TRAINING REPORT**

**MAY 2016**



REMSA Education  
 Monthly Course and Student Report  
 Month: May 2016

Discipline	Total Classes	Total Students	REMSA Classes	REMSA Students	Site Classes	Site Students
ACLS	5	44	3	33	2	11
ACLS EP	0	0	0	0	0	0
ACLS EP I	0	0	0	0	0	0
ACLS I	0	0	0	0	0	0
ACLS P	1	3	1	3	0	0
ACLS R	12	58	1	9	11	49
ACLS S	6	26	1	5	1	25
AEMT	1	21	1	21		
AEMT T	0	0	0	0		
BLS	72	342	10	58	62	284
BLS I	2	36	2	36	0	0
BLS R	17	88	6	47	11	41
BLS S	9	24	0	0	9	24
CE	7	172	7	172	0	0
EMAPCT	0	0	0	0	0	0
EMPACT I	0	0	0	0	0	0
EMR	0	0	0	0		
EMR R	0	0	0	0		
EMS I	0	0	0	0		
EMT	2	67	2	67		
EMT T	0	0	0	0		
FF CPR	6	145	0	0	6	145
FF CPR FA	0	0	0	0	0	0
FF FA	0	0	0	0	0	0
HS BBP	4	51	2	39	2	12
HS CPR	44	283	5	61	39	222
HS CPR FA	57	529	6	65	51	464
HS CPR FA S	2	6	0	0	2	6
HS CPR PFA	6	36	1	8	5	28
HS PFA S	1	1	1	1	0	0
HS CPR S	0	0	0	0	0	0
HS FA	15	67	0	0	15	67
HS FA S	1	2	0	0	1	2
HS PFA	4	30	1	7	3	23
ITLS	1	4	1	4	0	0
ITLS A	0	0	0	0	0	0
ITLS I	0	0	0	0	0	0
ITLS P	0	0	0	0	0	0
ITLS R	2	10	2	10	0	0
ITLS S	0	0	0	0	0	0
PALS	2	10	2	10	0	0
PALS I	0	0	0	0	0	0
PALS R	9	41	1	8	13	28
PALS S	1	10	0	0	1	10
PEARS	0	0	0	0	0	0
PM	1	18	1	18		
PM T	0	0	0	0		7

Discipline	Total Classes	Total Students	REMSA Classes	REMSA Students	Site Classes	Site Students
Legend						Classes w/ CPR
ACLS	Advanced Cardiac Life Support					214
ACLS EP	Advanced Cardiac Life Support for Experience Providers					
ACLS P	Advanced Cardiac Life Support Prep					
ACLS R	Advanced Cardiac Life Support Recert					CPR Students
ACLS S	Advanced Cardiac Life Support Skills					
ACLS I	Advanced Cardiac Life Support Instructor					
AEMT	Advanced Emergency Medical Technician					1454
AEMT T	Advanced Emergency Medical Technician Transition					
BLS	Basic Life Support					REMSA CPR Classes
BLS I	Basic Life Support Instructor					
BLS R	Basic Life Support Recert					
BLS S	Basic Life Support Skills					29
CE	Continuing Education:					
EMAPCT	Emergency Medical Patients Assessment, Care, & Transport					REMSA CPR Students
EMAPCT I	Emergency Medical Patients Assessment, Care, & Transport Instructor					
EMR	Emergency Medical Responder					240
EMR R	Emergency Medical Responder Recert					
EMS I	Emergency Medical Services Instructor					
EMT	Emergency Medical Technician					
EMT T	Emergency Medical Technician Transition					
FF CPR	Family and Friends CPR					
FF CPR FA	Family and Friends CPR and First Aid					
FF FA	Family and Friends First Aid					
HS BBP	Heartsaver Bloodborne Pathogens					
HS CPR	Heartsaver CPR and AED					
HS CPR FA	Heartsaver CPR, AED, and First Aid					
HS CPR FA S	Heartsaver CPR, AED, and First Aid Skills					
HS CPR PFA	Heartsaver Pediatric CPR, AED, and First Aid					
HS CPR S	Heartsaver CPR and AED Skills					
HS FA	Heartsaver First Aid					
HS FA S	Heartsaver First Aid Skills					
HS PFA	Heartsaver Pediatric First Aid					
HS PFA S	Heartsaver Pediatric First Aid Skills					
ITLS	International Trauma Life Support					
ITLS A	International Trauma Life Support Access					
ITLS I	International Trauma Life Support Instructor					
ITLS P	International Trauma Life Support - Pediatric					
ITLS R	International Trauma Life Support Recert					
ITLS S	International Trauma Life Support Skills					
PALS	Pediatric Advanced Life Support					
PALS I	Pediatric Advanced Life Support Instructor					
PALS R	Pediatric Advanced Life Support Recert					
PALS S	Pediatric Advanced Life Support Skills					
PEARS	Pediatric Emergency Assessment, Recognition, and Stabilization					
PM	Paramedic					
PM T	Paramedic Transition					



## COMMUNITY OUTREACH

May

### Point of Impact

5/9/2016	Nevada Strategic Highway Safety Plan Occupant Protection Critical Emphasis Area Meeting	1 staff
5/10/2016	Safe Kids Washoe County Coalition Meeting	1 staff
5/14/2016	Child Car Seat Checkpoint hosted by Babies R Us; 32 cars and 40 seats inspected.	8 volunteers, 3 staff
5/19/2016	Technician Update class	5 Technicians
5/22/2016	Northern Nevada Baby Expo and Family Health Fair	2 volunteers, 1 staff
5/24-25/2016	Nevada Traffic Safety Summit, Las Vegas. Presented at one conference session on expanding Child Passenger Safety Programs into Rural Nevada	1 staff

### Cribs for Kids

5/3/2016	C4K attends monthly Immunize Nevada Events Committee meeting.	1 staff
5/5/2016	C4K attends monthly Immunize Nevada Coalition meeting.	1 staff
5/10/2016	C4K attends monthly Safe Kids Coalition meeting.	1 staff
5/11/2016	C4K/REMSA attends Family Health Festival planning meeting.	1 staff
5/11/2016	C4K hosts Elko Safe Sleep Conference meeting.	1 staff
5/12/2016	C4K meet with RENOWN Children's Foundation for discussion.	1 staff
5/14/2016	C4K hosts a booth at Babies R Us for Safe Kids Day.	2 staff
5/16/2016	C4K hosts monthly Northern Nevada Maternal Child Health Coalition meeting.	1 staff
5/18/2016	C4K attends Fetal Infant Mortality (FIMR).	1 staff
5/19/2016	C4K attends Increasing the Impact of Safe Sleep meeting at Washoe County Social Services.	1 staff
5/22/2016	C4K host a Community Event table at the Baby Expo.	2 staff
5/24/2016	C4K attends Safe Kids strategic planning meeting.	1 staff
5/25/2016	C4K attends Youth Homeless Summit Follow Up meeting.	1 staff
5/25/2016	C4K/REMSA host a Community Event table at the Family Health Festival: Seniors and Families Day at Miguel Ribera Park.	2 staff
5/26/2016	C4K attends Community Health Improvement Plan (CHIP) Access to Health Care and Social Services Work Group.	1 staff

### Meetings






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*Regional Emergency Medical Services Authority*

**REMSA**

**INQUIRIES**

**MAY 2016**

**No inquiries for MAY 2016**



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*Regional Emergency Medical Services Authority*

**REM SA**

**CUSTOMER SERVICE**

**MAY 2016**

REMSA

Reno, NV  
Client 7299



1515 Center Street  
Lansing, Mi 48096  
1 (877) 583-3100  
service@EMSSurveyTeam.com  
www.EMSSurveyTeam.com

# EMS System Report

May 1, 2016 to May 31, 2016

Your Score

**93.97**

Number of Your Patients in this Report

**157**

Number of Patients in this Report

**7,141**

Number of Transport Services in All EMS DB

**117**



## Executive Summary

This report contains data from **157 REMSA** patients who returned a questionnaire between **05/01/2016** and **05/31/2016**.

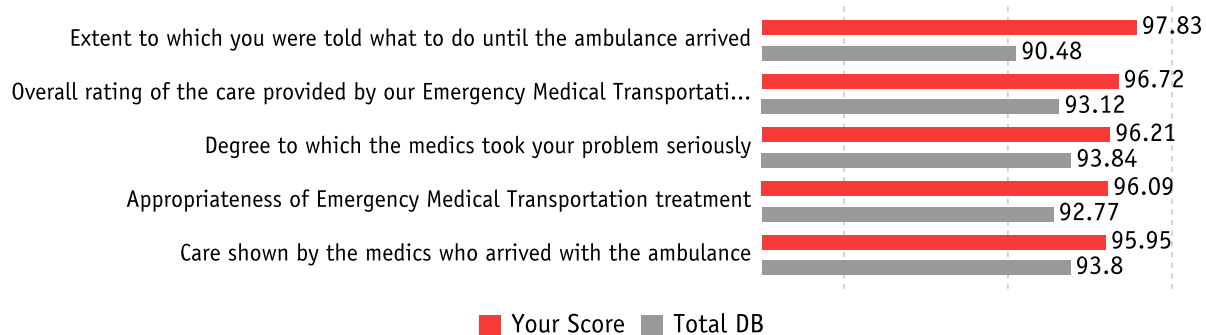
The overall mean score for the standard questions was **93.97**; this is a difference of **1.92** points from the overall EMS database score of **92.05**.

The current score of **93.97** is a change of **-0.24** points from last period's score of **94.21**. This was the **24th** highest overall score for all companies in the database.

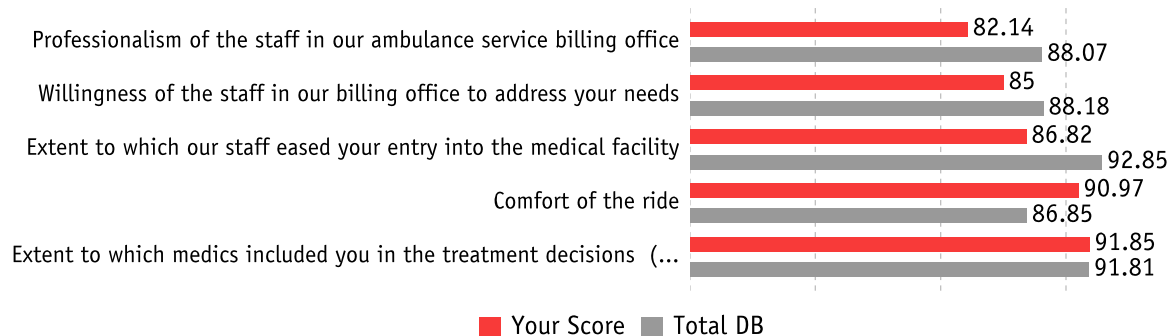
You are ranked **7th** for comparably sized companies in the system.

**80.54%** of responses to standard questions had a rating of Very Good, the highest rating. **99.25%** of all responses were positive.

### 5 Highest Scores



### 5 Lowest Scores

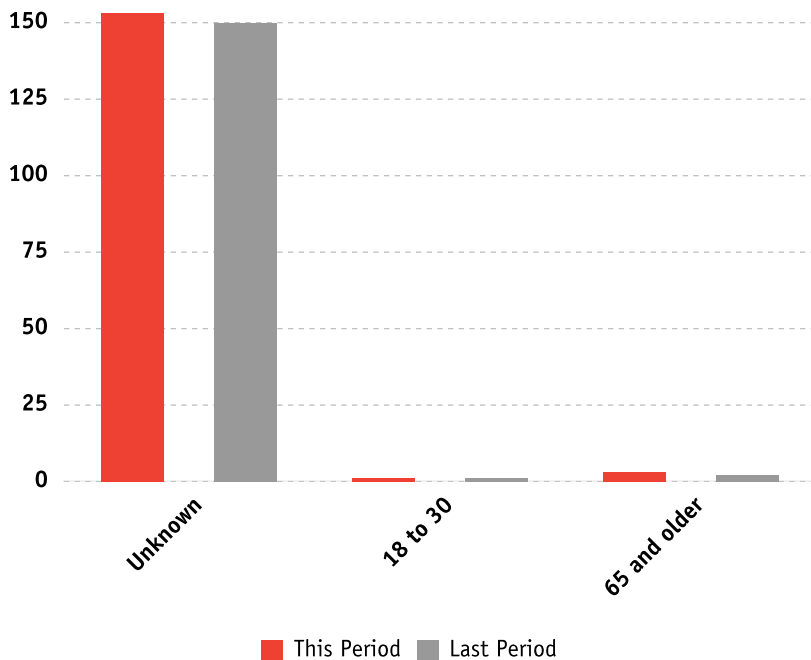




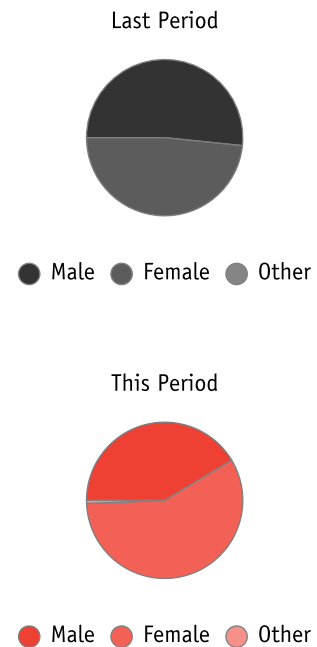
**Demographics** — This section provides demographic information about the patients who responded to the survey for the current and the previous periods. The information comes from the data you submitted. Compare this demographic data to your eligible population. Generally, the demographic profile will approximate your service population.

	Last Period				This Period			
	Total	Male	Female	Other	Total	Male	Female	Other
Unknown	150	78	72	0	153	62	90	1
18 to 30	1	0	1	0	1	1	0	0
65 and older	2	1	1	0	3	2	1	0
<b>Total</b>	<b>153</b>	<b>79</b>	<b>74</b>	<b>0</b>	<b>157</b>	<b>65</b>	<b>91</b>	<b>1</b>

### Age Ranges



### Gender





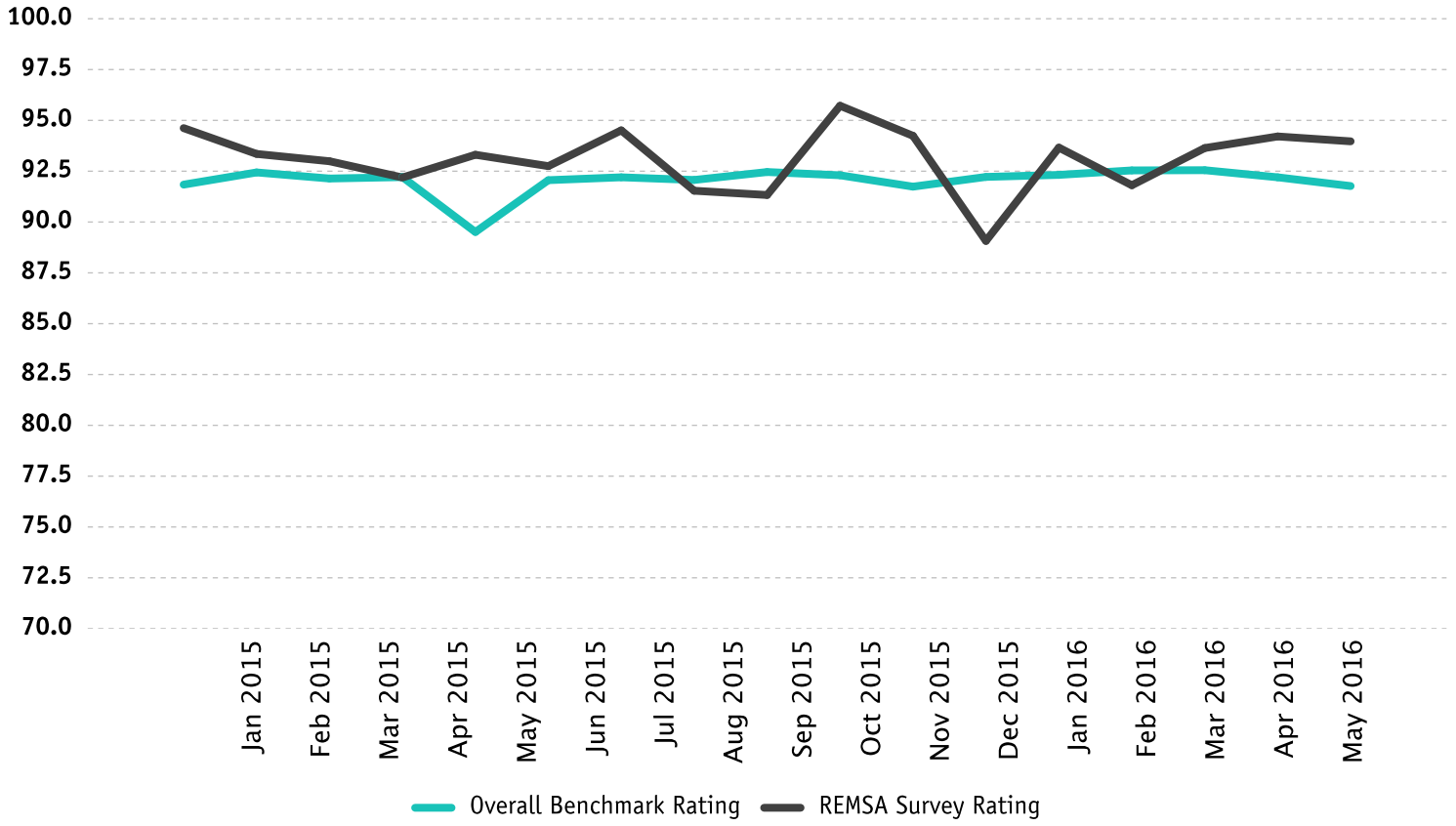
## Monthly Breakdown

Below are the monthly responses that have been received for your service. It details the individual score for each question as well as the overall company score for that month.

	May 2015	Jun 2015	Jul 2015	Aug 2015	Sep 2015	Oct 2015	Nov 2015	Dec 2015	Jan 2016	Feb 2016	Mar 2016	Apr 2016	May 2016
Helpfulness of the person you called for ambulance service	93.88	92.26	94.79	91.20	89.56	95.27	90.05	87.91	95.00	93.34	92.44	93.15	95.63
Concern shown by the person you called for ambulance service	93.88	91.25	95.31	91.20	88.98	95.27	91.28	87.15	95.00	92.64	90.76	83.33	93.75
Extent to which you were told what to do until the ambulance	91.30	91.67	93.75	87.52	86.07	96.05	92.13	85.19	91.07	91.29	91.56	89.00	97.83
Extent to which the ambulance arrived in a timely manner	90.18	91.84	96.57	91.81	87.28	95.63	89.56	93.59	94.74	93.53	94.36	94.59	93.97
Cleanliness of the ambulance	92.73	96.11	95.50	94.20	93.14	95.39	95.51	95.59	95.83	94.20	95.38	93.06	94.18
Comfort of the ride	88.21	100.00		94.20	92.67	97.30	94.26	95.71	94.12	93.39	95.56	92.83	90.97
Skill of the person driving the ambulance	92.45	94.15	94.39							95.09			95.00
Care shown by the medics who arrived with the ambulance	96.94	94.32	95.10	92.81	93.98	97.50	97.56	91.22	95.00	93.11	94.01	95.74	95.95
Degree to which the medics took your problem seriously	96.50	94.77	95.59	93.55	94.44	96.88	96.25	91.67	93.75	92.66	93.79	97.02	96.21
Degree to which the medics listened to you and/or your family	94.50	91.86	96.08	93.44	94.44	98.13	96.88	89.86	93.75	92.21	94.52	95.83	92.86
Skill of the medics	94.39	95.35	95.59	94.41	93.52	96.79	96.88	93.06	93.75	92.38	96.00	93.75	93.75
Extent to which the medics kept you informed about your	92.93	90.63	94.50	90.37	90.87	94.74	94.59	87.50	93.42	90.60	92.13	93.47	93.70
Extent to which medics included you in the treatment decisions	94.23	95.45	93.18	88.52	90.48	94.08	93.78	84.20	93.06	89.59	91.98	93.37	91.85
Degree to which the medics relieved your pain or discomfort	91.11	91.67	93.23	90.47	91.85	93.24	91.43	83.16	90.79	87.45	90.15	92.78	91.90
Medics' concern for your privacy	94.64	93.75	94.15	90.97	92.65	96.15	95.39	85.74	95.00	90.99	95.46	94.07	91.98
Extent to which medics cared for you as a person	95.21	95.83	96.00	91.40	95.67	95.95	95.63	90.28	95.00	92.04	94.16	95.31	95.00
Professionalism of the staff in our ambulance service billing	89.13	85.87	90.15	87.10	81.90	94.44	93.75	86.11	87.50	87.31	88.04	87.50	82.14
Willingness of the staff in our billing office to address your	89.29	86.36	89.84	87.07	82.41	93.75	89.47	87.50	87.50	86.47	85.87	85.00	85.00
How well did our staff work together to care for you	94.27	93.75	94.39	90.81	91.06	94.74	96.34	87.50	96.25	92.36	94.34	95.70	94.09
Extent to which our staff eased your entry into the medical	96.11	90.70	95.41	92.54	91.06	94.74	97.37	90.03	93.75	92.82	92.81	93.75	86.82
Appropriateness of Emergency Medical Transportation treatment	94.32	94.51	96.28	92.24	93.75	94.74	95.39	89.71	96.25	92.60	94.66	93.06	96.09
Extent to which the services received were worth the fees	89.40	86.83	88.64	88.30	87.23	94.29	90.74	80.10	91.67	84.72	88.56	86.90	92.64
Overall rating of the care provided by our Emergency Medical	95.65	92.86	95.59	93.00	93.75	96.71	95.51	88.24	96.25	92.54	94.75	96.05	96.72
Likelihood of recommending this ambulance service to others	94.57	94.23	95.59	92.56	93.00	97.79	94.74	91.67	91.67	92.66	95.06	94.67	95.74
Your Master Score	93.31	92.75	94.51	91.54	91.33	95.72	94.24	89.07	93.66	91.81	93.64	94.21	93.97
Your Total Responses	58	50	55	61	56	41	47	40	22	376	206	155	157



### Monthly tracking of Overall Survey Score



**GROUND AMBULANCE CUSTOMER COMMENTS**

**May 2016**

<b>Date of Service</b>	<b>What Did We Do Well?</b>	<b>What Can We Do To Serve You Better</b>	<b>Description / Comments</b>	<b>Results after follow up</b>
11/02/2015			"I would certainly choose this crew if hospitalized again"	
12/05/2015	"Very quick & experienced"	"Enclosed is a route she should of taken"	"The male personnel did an excellent job"	
12/05/2015	"Someone else at the restaurant called. I'm unaware of. I had a heart attack and passed out. My son, who is a paramedic was talking to them"	"Not a thing that I can think of. Hope there isn't a next time"	"Was in Reno with family and my son is a paramedic and was administrating to me before the ambulance arrived"	
04/04/2016	"Daughter called"	"Nothing"		
04/04/2016		"Everything was excellent"		
04/04/2016		"Everything was great- maybe charge a little less"		
04/05/2016		"Have more women"		
04/05/2016		"It was all good"		
04/06/2016		"Newer ambulance"		
04/06/2016		"Send two medics who are caring and nice."	"Two medics, blonde was really nice and the brunette was quite rude. He was rough inserting the IV as well, she asked for it to be adjusted, he refused. He left it where it was and she couldn't bend her arm. He was mean."	Contacted patient regarding complaint. She feels like he used too large of a needle for the IV and refused to back the IV out after she asked him to. Chart states he used a 20 gauge witch is appropriate for the situation. She was unaware that she received pain medications, but the chart also states that she was treated with fentanyl and Zofran. She does not want any follow up and I will follow up with the crew. She appreciated the call and follow up.
04/06/2016			"Medic was a family member"	
04/06/2016	"Wasn't a whole lot to do in regards to the second questions"		"Sometimes had trouble with IV because she has small veins"	
04/06/2016			"Couldn't have been more kind. Nothing bad to say. Very professional and caring."	
04/06/2016		"Don't bring the fire truck and police. But gives a lot of at a boys"		
04/07/2016		"Ask if there's a DNR on file"		
04/07/2016		"Have the medics listen to the patient"	"Requested they take her to St. Mary's because she had just been discharged that same day and was having problems after surgery. They wouldn't take her there."	Attempt to call to patient. Phone just rang without option to leave a message.
04/07/2016		"No, just wanted to go to one hospital but went to another, found out why later."		
04/07/2016			"They didn't do anything about pain"	



**GROUND AMBULANCE CUSTOMER COMMENTS**

**May 2016**

<b>Date of Service</b>	<b>What Did We Do Well?</b>	<b>What Can We Do To Serve You Better</b>	<b>Description / Comments</b>	<b>Results after follow up</b>
04/07/2016			"He needed to throw up, but he was in a car seat and couldn't. No privacy because it was an apartment complex."	
04/07/2016			"Extremely great."	
04/07/2016		"Everything just went fine"		
04/07/2016		"No, they did so much, they can't do anymore. They are very kind and gracious and respectful."	"They are so nice and good to her. She called the company a couple times and has found nothing but the best from everyone."	
04/08/2016		"No, they were great and very informative."		
04/08/2016		"No, Didn't find any flaws."		
04/08/2016		"Nope, everything was great."		
04/08/2016		"No, everything was fine. Daughter was mad because she went in the ambulance because she thought she was ""crying wolf.""		
04/09/2016			"Still remained very friendly, not scary or anything"	
04/09/2016		"No, there is nothing we can do better, very nice, friendly, warm and really listening. Held her hair back."		
04/09/2016		"No I was very pleased with the care that I had."		
04/09/2016		"Nothing"		
04/09/2016		"Just occlude the veins."	"He tried to put in an IV and blew the vein."	
04/10/2016		"Just consult more with husband"	"Listened to son, not husband."	
04/10/2016		"Everything was good."		
04/10/2016		"They got there so quick and did such a good job, he has complaints."	"Oxygen mask made an enormous difference, couldn't breathe"	
04/10/2016		"It would be nice if there was a service to take patients back to their vehicle, or some kind of a siren for cars following behind, it was hard to keep up."	"Calmed her down and reassured her that everything was okay. Could not give medicine until Dr checked her out."	
04/10/2016	"She was superb. Kept her on the line because she knew they were in distress and didn't let her get discouraged. EMTs could hear everything as well, which was helpful."	"No, everything was great."	"They saved my husbands life, they were absolutely wonderful. Upbeat and positive, very well trained. Gave her the option to go with ambulance or not. One EMT put himself between her and the ambulance so she didn't experience the trauma."	
04/11/2016			"Treated her like a second class citizen, told her she had a mental disorder and shouldn't be taking an ambulance when she was vomiting profusely."	I called and left message for pt to call me back on my direct line if she would like to follow up on this complaint. I reviewed the chart and it was documented that pt has a mental health history and was experiencing some signs and symptoms of a mental health disorder. There was no mention of vomiting or treatment for vomiting in the chart.
04/11/2016		"No, very happy with the service"		
04/11/2016	"Nothing she could do."	"No, it got kind of crowded though when the police came."	"No treatment to give. Everyone worked rapid."	

**GROUND AMBULANCE CUSTOMER COMMENTS**

**May 2016**

<b>Date of Service</b>	<b>What Did We Do Well?</b>	<b>What Can We Do To Serve You Better</b>	<b>Description / Comments</b>	<b>Results after follow up</b>
04/11/2016		"No, everything was perfect and in line for what they should have done."		
04/11/2016		"Everything seemed great"		
04/11/2016		"Did very well"		
04/11/2016		"Nothing"		
04/11/2016		"Nothing"	"Does not remember treatment"	
04/12/2016		"No problems!"		
04/12/2016	"Mother called"	"Everyone was great!"		
04/12/2016		"Can only do what they can- they did a great job"		
04/12/2016				
04/12/2016		"can't think of anything, very helpful"		
04/12/2016		"Sent fire truck and ambulance- didn't really need it all but everyone and everything was great"	"Medics even watched dogs to be sure they didn't get out and took care of closing up her home"	
04/12/2016		"No"	"didn't relieve any pain"	There is no contact information for this patient. No phone number is listed on the chart. After review of the chart the patient is c/o abd pain and states she is 27 weeks pregnant. Treatment is appropriate for the complaint.
04/12/2016		"Nothing everything was fine"	"did not have any pain/discomfort"	
04/12/2016		"Nothing - did everything very well. Maybe give a family member a comment card for hospital"		
04/12/2016		"Had been in bad accident- would not like to have to wait 45 minutes in ER waiting room again"		
04/13/2016		"On the ball- did job well to her satisfaction"		
04/13/2016		"Nothing, everything was fine"		
04/13/2016		"No, did pretty good. EMT did tell him to be quiet"		
04/13/2016		"No."	"Couldn't find him in the VA system"	
04/14/2016			"She was treated by the firemen, not the ambulance. All they did was drive her to the hospital."	
04/14/2016		"No"		
04/14/2016		"They did a wonderful job"	"Really calmed her down with the way they were talking and relating to her. Told her how to breathe and were very helpful."	
04/14/2016			"They look like they know what they are doing. Used REMSA 3 times this month."	
04/14/2016			"They were great"	
04/14/2016			"Very knowledgeable and very caring"	
04/14/2016		"Were very satisfied."	"Medics were very caring and compassionate"	
04/14/2016		"Did a superior job. Can not complain at all"		
04/14/2016		"Nothing, great experience"		
04/14/2016		"Everything was good"		

**GROUND AMBULANCE CUSTOMER COMMENTS**

**May 2016**

<b>Date of Service</b>	<b>What Did We Do Well?</b>	<b>What Can We Do To Serve You Better</b>	<b>Description / Comments</b>	<b>Results after follow up</b>
04/22/2016		"I just think the girl who ran into the fence was really really new and inexperienced. Maybe a little more training."		
04/22/2016		"Faster service."		
04/22/2016		"Let them know, thank you very much and that my vertebrae fell apart and that it was my fault that I said no meds. I probably would have been screaming less if I had taken some from them. What could you do better: maybe just more training on neck and vertebrae. My cervical column fell apart c4,5,&6 fel"		
04/27/2016			"The lady medic blew out my vein trying to put an IV in."	
04/15/2016		"Reckless driver hit the ambulance"		
04/15/2016		"Nothing - they all did well"	"Were very calm and explained to her what they needed to do before they took her to the hospital"	
04/15/2016	"Niece called"	"Nothing, they did everything ok!"		
04/15/2016	"Doesn't remember"	"Nothing, REMSA always comes in good time and shows good care"	"Young man seemed irritated to even be there, and she felt he was condescending. The young woman was very good, talked to her, and gave her good advice"	I called and spoke with the patient. She was happy with the follow up and was intoxicated at the time of the event. She does not want anything further and does not want any follow up.
04/15/2016		"Couldn't possibly think of anything they could do better"		
04/15/2016		"Nothing that he has noticed, and he has had a few experiences with REMSA. Thank you very much"		
04/15/2016		"Was very satisfied with the service except for being stuck so many times trying to find his vein"	"Stuck him so many times trying to find his vein"	
04/16/2016			"Medics were excellent would give them a 200%"	
04/17/2016		"Everyone is exceptional"		
04/17/2016		"Nothing, everything went smoothly"		
04/17/2016		"Nothing, they did excellent"		
04/17/2016			"Didn't relieve her pain, had to wait 5 hours"	Called and left a message for pt asking her to call me back on my direct line if she wanted further follow up on complaint. After reviewing the chart the pt was c/o non-traumatic chest pain. ECG was normal. Pt treated with antiemetic with some relief.
04/17/2016		"Nothing, very professional. The service was excellent"		
04/17/2016			"Great, even took care of her service dog and cat"	
04/17/2016		"Don't know what that could be! Medics always go above and beyond"		
04/16/2016		"Get more comfortable mats in the ambulance. They were very uncomfortable and it was really painful"		
04/18/2016		"Nothing, everything was just fine"		
04/18/2016		"Nothing, they had everything under control"		



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*Regional Emergency Medical Services Authority*

**REMSA**

**PENALTY FUNDS DISTRIBUTION**

**MAY 2016**



**REMSA 2015-16 PENALTY FUND RECONCILIATION AS OF MAY 31, 2016**

**2015-16 Penalty Fund dollars accrued by month**

<u>Month</u>	<u>Amount</u>
July 2015	\$6,444.90
August 2015	5,222.22
September 2015	6,004.02
October 2015	7,258.50
November 2015	5,749.50
December 2015	6,440.34
January 2016	5,772.18
February 2016	6,158.58
March 2016	5,776.74
April 2016	4,308.72
May 2016	3,554.22
<b>Total accrued as of 5/31/2016</b>	<b>\$62,689.92</b>

**2015-16 Penalty Fund dollars encumbered by month**

<u>Program</u>	<u>Amount</u>	<u>Description</u>	<u>Month Submitted</u>
Child Safety	\$7,727.94	500 Coaches First Aid Kits	March-16
Search And Rescue (SAR)	895.00	Extreme SAR Drysuit	March-16
Search And Rescue (SAR)	229.95	Rapid Rescuer PFD	March-16
Search And Rescue (SAR)	69.95	ATB Wetshoe	March-16
Search And Rescue (SAR)	33.75	Co-Pilot Knife	March-16
Child Safety	8,831.00	100 Graco Portable Cribs	April-16
Search And Rescue (SAR)	1,500.00	Wildland Fire Shelter	May-16
Search And Rescue (SAR)	3,007.90	10 Garmin GPS Units	May-16
Search And Rescue (SAR)	4,284.04	10 Conterra Survival and Medical Gear Backpacks	May-16
Search And Rescue (SAR)	3,756.26	10 Back Country Access Avalanche Kits	May-16
Search And Rescue (SAR)	6,037.96	4 Bendix King P25 Handheld Radios	May-16
<b>Total encumbered as of 5/31/2016</b>	<b>\$36,373.75</b>		
<b>Penalty Fund Balance at 5/31/2016</b>	<b>\$26,316.17</b>		



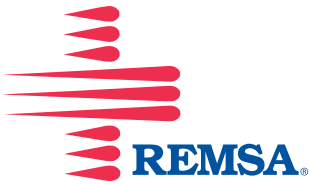
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*Regional Emergency Medical Services Authority*

**REMSA**

**PUBLIC RELATIONS REPORT**

**MAY 2016**



# May 2016 Public Relations Report

## District Board of Health

### MEDIA COVERAGE

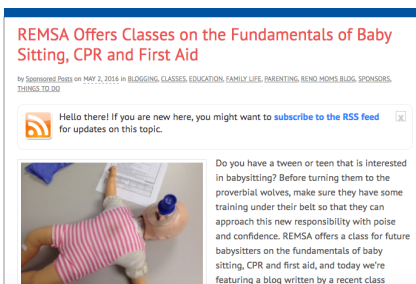
#### REMSA Prepares for Growth – *NNBW*



#### Regional Agencies Prepare for Possible Heroin Spike Following Prescription Drug Bust – *KTVN*

#### Emergency Crews Prepare for Influx of Drug-Related Calls – *KOLO*

#### REMSA Offers Classes on the Fundamentals of Babysitting – *Reno Mom's Blog*



#### Heroin Concerns: REMSA Prepares to See Spike in Overdose Calls – *KRVN*

#### Paramedic Graduation – *People on the Move, RGJ*

#### Overdose Response – *KOLO*

#### Reno Law Enforcement, Medical Professionals Prepare for Drug Abuse Ripple Effect – *RGJ*

#### A Day in the Life of a Paramedic – *KOLO*

#### EMS Week Award Ceremony – *KOLO*

#### Weekly Safety Tips – distributed via Nevada Business Magazine and social media

Poison Safety

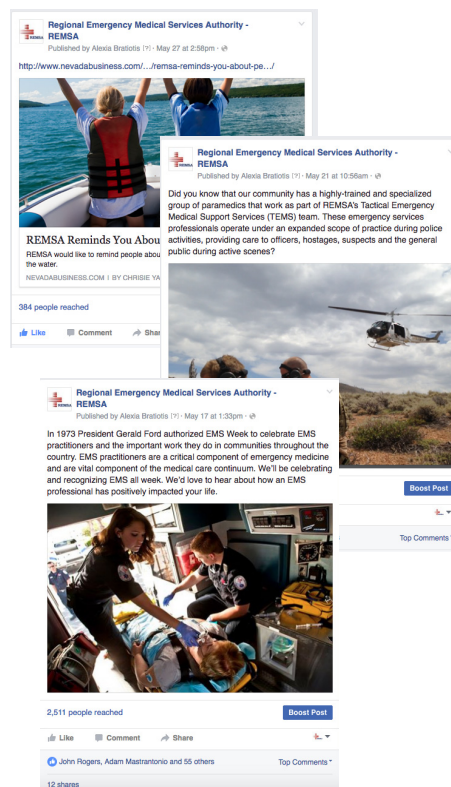
Watercraft Safety

#### In Other News:

REMSA celebrated the nation's 43rd annual EMS Week with an employee recognition event where 10 employees were given awards, three others were praised for civic and trade awards and Glenn Jones, a 30-year employee with REMSA announced his retirement. In addition, the ceremony acknowledged others in the first responder community that work alongside REMSA and Care Flight, including the Nevada Highway Patrol, Reno Police Department and Washoe County Sheriff's Office.

Representatives of REMSA's volunteer board of directors, Dean Dow, Kevin Dick, District Health Officer, Washoe County Health Department, and local elected officials attended the event and participated in the ceremony, including Washoe County Commissioner Bob Lucey, Reno City Councilman David Bobzien and Reno City Councilwoman Naomi Duerr.

The event also recognized REMSA's 30th anniversary which is being celebrated throughout the year. During the event, each staff member received an anniversary branded t-shirt. Social and mass media highlights of the week included a weeklong Facebook series dedicated to the EMS industry and its professionals, as well as two dedicated news stories featuring the award ceremony and a reporter ride along segment.



DD	BS	_____
DHO		_____ <sup>kd</sup>
DA	LA	_____
Risk	DME	_____
CSD	EC	_____

**STAFF REPORT**

**BOARD MEETING DATE:** June 23, 2016

**TO:** District Board of Health  
**FROM:** Jim Shaffer, Program Coordinator Vector-Borne Diseases Program  
 775-785-4599, jshaffer@washoecounty.us  
**SUBJECT:** Presentation, Discussion and Possible Approval of Interlocal Agreement between the Washoe County Health District for its Vector-Borne Diseases Program and City of Reno to stage, land and fly a helicopter at Fire Station 12 for mosquito treatment of 700 acres in the South Meadows and Damonte Ranch area.

**SUMMARY**

Presentation, Discussion and Possible Approval of Interlocal Agreement between the Washoe County Health District for its Vector-Borne Diseases Program and City of Reno to stage, land and fly a helicopter at Fire Station 12 for mosquito treatment of 700 acres in the South Meadows and Damonte Ranch area.

**District Health Strategic Objective supported by this item: Achieve targeted improvements in delivery of service.**

**PREVIOUS ACTION**

There has been no previous action taken by the District Board of Health (DBOH).

**BACKGROUND**

The Vector-Borne Diseases Program has previously staged the helicopter at the terminal end of South Meadows Parkway for mosquito treatment of the South Meadows and Damonte Ranch area. With the Southeast connector projected to intersect South Meadows Parkway next year that location will no longer be available. Other potential locations that were targeted for staging resulted in more ferrying costs, reducing the efficiency of the mosquito applications.

Washoe County Community Services Department will be constructing the helipad. A separate Right of Entry agreement between Washoe County and the City of Reno has been crafted for authorization.

**FISCAL IMPACT**

Should the Board approve this Agreement, there will be no fiscal impact to the adopted FY17 budget. The helipad will be built in September 2016 by the Washoe County Roads Department with funds from CSD cost center 216002. With the limited use of the pad, maintenance would occur over ten years with slurry seal at a cost of \$750.00. If the City of Reno determined the helipad was no longer needed, the cost of removal would be \$5,000.00. The cost of maintenance when needed and removal would be charged to Health District cost center 172100 from line items 710205 repairs and maintenance, 710300 operating supplies and Equipment non capital 711504. In addition, the helipad would provide multiple-agency use for normal and or emergency conditions.

**RECOMMENDATION**

Staff recommends the Board approve the Interlocal Agreement between the Washoe County Health District for its Vector-Borne Diseases Program and City of Reno to stage, land and fly a helicopter at Fire Station 12 for mosquito treatment of 700 acres in the South Meadows and Damonte Ranch area.



Subject: Helipad Interlocal Agreement

Date: June 23, 2016

Page 2 of 2

**POSSIBLE MOTION**

Should the Board approve staff's recommendation, a possible motion would be "Move to approve the Interlocal Agreement between the Washoe County Health District for its Vector-Borne Diseases Program and City of Reno to stage, land and fly a helicopter at Fire Station 12 for mosquito treatment of 700 acres in the South Meadows and Damonte Ranch area."

## **INTERLOCAL AGREEMENT**

1. **PARTIES** This Interlocal Agreement (“Agreement”) is entered into between the City of Reno, Nevada, a Municipal Corporation herein called "City" and the Washoe County Health District, herein called “Health District”, collectively the “Parties.”

2. **RECITALS**

2.1 WHEREAS, the Parties are public agencies under NRS 277.100; and

2.2 WHEREAS, NRS 277.180(1) provides that any one or more public agencies may contract with any one or more other public agencies to perform any governmental service, activity or undertaking which any of the contracting agencies is authorized by law to perform; and

2.3 WHEREAS, the Vector-Borne Diseases Program of the Health District provides mosquito control through the use of helicopter services for large acreage's throughout Washoe County to reduce the risk of virus transmission by mosquitoes which serves the public interest; and

2.4 WHEREAS, The Health District wishes to land and load the helicopter with pesticide product on land owned by the City to control mosquito populations in South Meadows and Damonte Ranch on a specific location authorized on land owned by the City which is a desirable site for the helicopter. The Health District will not store the helicopter, helicopter fuel or pesticides on the land owned by the City. The cost and expense of all labor, materials, maintenance and repair of the helicopter site will be the responsibility of the Health District.

2.5 NOW THEREFORE, in consideration of the mutual covenants and conditions herein, the parties agree as follows:

3. **LICENSE AND COOPERATION**

3.1 The City grants a non-exclusive license to the Health District to land and load and operate the helicopter on the following land owned by the City:

Currently Assessor’s Parcel Number 140-212-04, commonly known as Fire Station #12. The helicopter pad shall be installed in substantial conformance to the design and location as shown in Exhibit A, attached hereto and incorporated herein. As indicated above, the Health District will not store the helicopter, helicopter fuel, pesticides or any items relating to the helicopter at this location.

3.2 The City agrees to grant Washoe County, through its Community Development Department, a Right of Entry to construct an approximately 50 foot by 50 foot helicopter pad with a structural section of three inches of asphalt on 6 inches of gravel base, per City of Reno local street standards. The Health District shall ensure that the helicopter pad and its structural section comply with all federal, state and local helicopter pad construction requirements.

3.3 While the City agrees to cooperate with the Health District in the obtaining of any governmental permits required, the Health District is responsible for a) obtaining the necessary governmental permits and b) paying the costs of all permits necessary to complete the Work.

3.4 Within 90 days after the termination of this Agreement, or after the removal of the helicopter pad, the Health District, at its sole expense, agrees to restore the Property to a condition reasonably approximating the condition of the Property before the helicopter pad was installed. Restoration shall include, but not be limited to, the remediation and removal of all hazardous materials caused by the Health District's use of the helicopter pad. Such remediation shall meet all EPA requirements and comply with all federal, state and local standards. Landscaping that was removed or damaged during the removal of the helicopter pad shall also be replaced by the Health District.

#### 4. Helicopter

4.1 When not in use by the Health District, the City may, at its own risk, use the helicopter pad as deemed necessary for public safety response.

4.2 Prior to every use of the helicopter pad, the appropriate Health District employee shall obtain approval from the chief of the fire department or his designee.

4.3 The Health District agrees to comply with all Federal Aviation Administration requirements and all other applicable laws, regulations and standards when its helicopter is using the helicopter pad.

#### 5. INDEMNIFICATION & TERMINATION

5.1 The Health District agrees, to the extent allowed by law, to hold harmless, indemnify and defend the City from any and all losses, liabilities, or expenses of any nature to the person or property of another, to which the City may be subjected as a result of any claim, demand, action, or cause of action arising out of the negligent acts, errors or omissions on the part of the employees, agents, or servants of the Health District in connection with the performance of the duties or obligations of this Agreement.

5.2 The City agrees, to the extent allowed by law, to hold harmless, indemnify and defend the Health District from any and all losses, liabilities, or expenses of any nature to the person, or property of another, to which the Health District may be subjected as a result of any claim, demand, action, or cause of action arising out of the negligent acts, errors, or omissions on the part of the employees, agents or servants of the City in connection with the performance of the duties or obligations of this Agreement.

5.3 The parties shall not waive and intend to assert available NRS Chapter 41 liability limitations in all cases. Contract liability of both parties shall not be subject to punitive damages.

5.4 This Agreement shall remain in effect from the Effective Date until terminated as provided herein. This Agreement may be terminated by either party upon 30 days prior written notice for any or no reason. Pursuant to Section 3.4 of this Agreement, within 90 days of termination, the Health District, at its own expense, shall cause the helicopter pad to be removed unless City, by written agreement, assumes ownership and total liability for the helicopter pad.

5.5 This Agreement shall automatically terminate, without more, upon removal of the helicopter pad by the Health District for any reason.

6. MISCELLANEOUS PROVISIONS

6.1 This Agreement is binding upon and inures to the benefit of the Parties and their respective heirs, estates, personal representatives, successors and assigns.

6.2 This Agreement is made in, and shall be governed, enforced and construed under the laws of the State of Nevada, County of Washoe.

6.3 This Agreement constitutes the entire understanding and agreement of the Parties with respect to the subject matter hereof, and supersedes and replaces all prior understandings and agreements, whether verbal or in writing, with respect to the subject matter hereof.

6.4 This Agreement may not be modified, terminated, or amended in any respect, except pursuant to an instrument in writing duly executed by the parties.

6.5 No delay or omission by either party in exercising any right or power hereunder shall impair any such right or power or be construed to be a waiver thereof, unless this Agreement specifies a time limit for the exercise of such right or power or unless such waiver is set forth in a written instrument duly executed by the person granting such waiver. A waiver of any person of any of the covenants, conditions, or agreements hereof to be performed by any other party shall not be construed as a waiver of any succeeding breach of the same or any other covenants, agreement, restrictions or conditions hereof.

6.6 All notices, demands or other communications required or permitted to be given in connection with this Agreement, shall be in writing, and shall be deemed delivered when personally delivered to a party (by personal delivery to an officer or authorized representative of a corporate party) or, if mailed, three (3) business days after deposit in the United States mail, postage prepaid, certified or registered mail, addressed to the parties as follows:

If to City:                      Fire Chief  
    City of Reno  
    P.O. Box 1900  
    Reno, Nevada 89505

If to Health District: Administrative Health Services Officer  
Washoe County Health District  
P.O. Box 11130  
Reno, Nevada 89520

Any person may change its address for notice by written notice given in accordance with the foregoing provisions.

6.7 The Agreement may be executed in one or more counterpart copies, and each of which so executed, irrespective of the date of execution and delivery, shall be deemed to be an original, and all such counterparts together shall constitute one and the same instrument. This Agreement may be recorded.

6.8 This Agreement is effective the date it is signed by the last party provided all the Parties have first signed and approved it ("Effective Date").

IN WITNESS WHEREOF, the Parties have executed this Agreement.

**CITY OF RENO**

**HEALTH DISTRICT**

Dated this \_\_\_\_ day of \_\_\_\_\_, 2016

Dated this \_\_\_\_ day of \_\_\_\_\_, 2016

By: \_\_\_\_\_  
Hillary Schieve, Mayor

By: \_\_\_\_\_  
District Board of Health

APPROVED AS TO FORM:

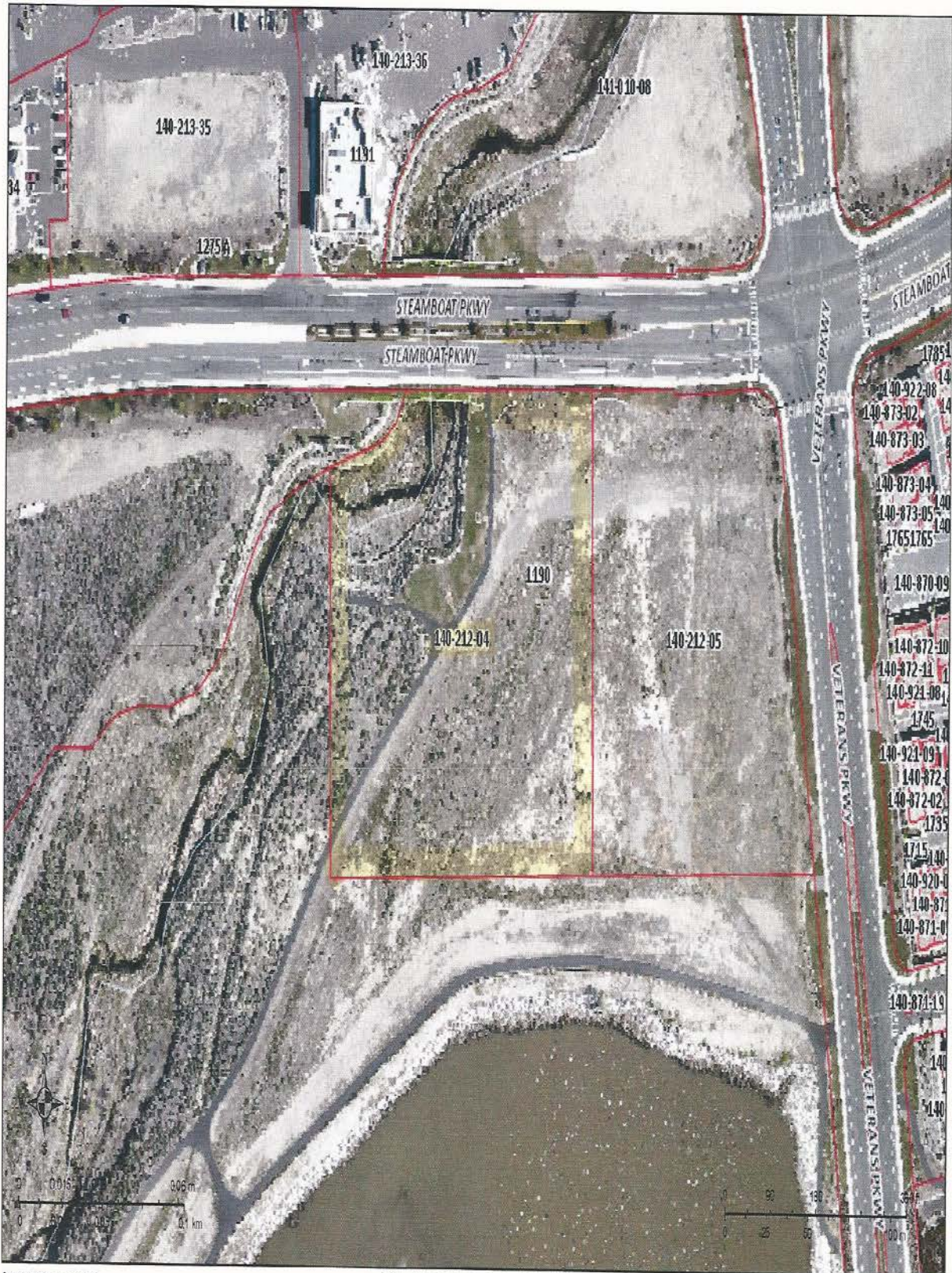
By: \_\_\_\_\_  
City Attorney's Office

ATTEST:

By: \_\_\_\_\_  
Ashley Turney, City Clerk

Exhibit A

Fire Station #12



Created: February 22, 2016

Washoe County Technology Services - Regional Services Division (GIS), PO Box 11130, Reno, NV 89520-0027 [www.washocountyus.gov/gis](http://www.washocountyus.gov/gis) (775) 328-3619

DISCLAIMER: This information is provided as a service to the citizens of Washoe County. No warranties of any kind, expressed or implied, are provided, including usage, merchantability, content, interpretation, sequence, accuracy, currency or timeliness. This information is not intended for use as an address locator and it should be noted that not all county addresses will be found. For example, parcels containing multiple addresses may only display a single address as recorded in the Assessor's database. This information cannot be used for the purpose of boundary resolution or location. Building outlines are included for cartographic and representational purposes only and are not intended to be used for any measurement, calculation, or delineation. Assessor's Office Disclaimer: This public information is furnished by the Washoe County Assessor's Office and should be accepted and used by the recipient with the understanding that the data contained was developed and collected for assessment purposes only. No liability is assumed as to the accuracy, sufficiency or suitability of the information contained herein for any other particular use. The Assessor's Office assumes no liability whatsoever associated with the use or misuse of such data. For questions about assessment data, please contact the Washoe County Assessor's Office Public Service Center at (775) 328-2777. Zoning information should be verified with the appropriate planning agency.

## **RIGHT OF ENTRY AGREEMENT**

**THIS AGREEMENT**, entered into this            day of            , is made by and between City of Reno, a municipal corporation, (the “Landowner”), and Washoe County, a political subdivision of the State of Nevada, (the “Licensee”).

### **1.     GENERAL.**

1.1     Property. Landowner is the owner of certain land located in Reno, Washoe County, Nevada, more commonly known as APN 140-212-04, Reno Fire Station #12 of which is more particularly shown on Exhibit “A”, attached hereto and incorporated herein by reference (the “Property”).

1.2.     Entry/Improvements. Licensee desires to enter (“Entry”) onto a certain portion of the Property for the purposes of constructing a helicopter pad See Exhibit A for location.

1.3.     Consideration. In consideration for Entry, Licensee shall be responsible for all costs and expenses related to construction of the helicopter pad, including compliance with all applicable erosion control, drainage, air quality and dust control measures and permitting requirements.

### **2.     TERMS OF ENTRY.**

2.1.     Entry and Work. Subject to compliance with the provisions of this Agreement, Licensee is hereby granted the right and license to enter the Property during the term hereof for the purposes of construction of an approximately 50 foot by 50 foot helicopter pad with a structural section of 3 inches of asphalt on six inches of gravel base per City of Reno local street standards on the Property (the “Work”). No fee shall be charged by Landowner for Entry. All Work shall be performed and made at Licensee’s sole cost and expense and shall meet comply with all federal, state and local helicopter pad construction requirements. Licensee shall be strictly liable for all claims of, all activities of, and compliance with , all contractors, vendors, material men, and other third parties involved with the Entry and the Work. Landowner makes no warranty or representation that any material or condition existing on the Property will be fit for Licensee’s intended use. Licensee shall not excavate fill material from the Property. Dust control shall be maintained by Licensee to Landowner’s satisfaction and Licensee shall be responsible for compliance with all applicable federal, state and local air emissions requirements. All access to the Property shall be subject to the Landowner’s approval and designation of route. Entry and all Work shall be scheduled and coordinated prior to commencement with the Fire Chief or his designee. Licensee shall not traverse, trespass on or disturb other real property owned by Landowner, unless prior written consent from Landowner is obtained.

2.2.     Non-exclusive Right. The right and license of Entry granted herein is non-exclusive. Landowner may continue to use and to enjoy the Property in any manner not inconsistent with the right of Entry granted herein.

### **3.     TERM.**

3.1.     Commencement and Termination. This Agreement shall commence, and be binding and effective on the parties, on the last date of the execution by a party hereto.



This Agreement shall terminate on the date when all Work and restoration has been satisfactorily completed and approved by Landowner. All work and restoration must be complete prior to \_\_\_\_\_. Notwithstanding, either party shall have the option of terminating this agreement upon 30 days notice to the other party. In the event the Agreement is terminated prior to completion of the work, Licensee shall, at its sole expense, restore the Property in accordance with Paragraph 6 prior to vacating the Property.

**4. COMPLIANCE WITH REQUIREMENTS.** Licensee shall comply with all applicable permits, authorizations, laws, rules and regulations of local, state and federal governmental authorities, including, without limitation, all Environmental Laws (hereinafter defined) in performing Work, and shall take every precaution to protect and safeguard the Property.

**5. LIENS.** Licensee shall pay when due all bills and amounts due for labor, services or materials provided for or incorporated in the Property for the Work pursuant to the Entry. Licensee shall remove or cause to be removed within fifteen (15) days after recordation thereof any claims of mechanic's or material men's liens or other charges or encumbrances against the Property that arise from or relate to the Entry and the Work.

**6. RESTORATION AND INDEMNITY.** Licensee, at its sole expense, agrees to restore the Property to its original condition to the extent reasonably possible upon completion of the Work and termination of this Agreement. Licensee's obligation hereunder to restore the Property shall include, without limitation, the removal of any debris, equipment, structures, fixtures, supplies, materials and other items necessary and incidental to Entry and performance of the Work. Restoration shall include remediation of all hazardous materials caused by the Work. Such remediation shall meet all EPA requirements and comply with all federal, state and local law, regulations, ordinances and standards. Landscaping that was removed or damaged during the Work shall also be replaced. To the fullest extent of NRS Chapter 41 liability limitations, each party shall indemnify, hold harmless and defend, not excluding the other's rights to participate, the other from and against all liability, claims, actions, damages, losses, and expenses, including but not limited to reasonable attorneys' fees and costs, caused by the negligence, errors, omissions, recklessness or intentional misconduct of its own officers, employees and agents. Such obligation shall not be construed to negate, abridge, or otherwise reduce any other right or obligation of indemnity which would otherwise exist as to any party or person described herein. This indemnification obligation is conditioned upon the performance of the duty of the party seeking indemnification (indemnified party), to serve the other party (indemnifying party) with written notice of actual or pending claim, within 30 calendar days of the indemnified party's notice of actual or pending claim or cause of action. The indemnifying party shall not be liable for reimbursement of any attorney's fees and costs incurred by the indemnified party due to said party exercising its right to participate in legal counsel.

**7. ENVIRONMENTAL.** Licensee will not, nor will Licensee authorize any other person or entity, during the term of this Agreement, to manufacture, process, store, distribute, use, discharge, place, or dispose of any Hazardous Substances (hereinafter defined), in, under or on the Property or any property adjacent thereto. For purposes hereof, "Hazardous Substances" shall include: 1) those substances defined as "hazardous substances", "hazardous materials", "toxic substances", "toxic material"; or "regulated substances" under any federal, state or local law, ordinance, regulation, statute or rule; 2) any petroleum based or related products except petroleum products used in construction

of the Work performed hereunder; and 3) any other substance, material or waste regulated under any federal, state or local law, ordinance, regulation, statute or rule relating to the aforementioned, to the environment or to industrial hygiene (collectively, "Environmental Laws").

**8. NOTICES.**

All notices and demands by any party hereto to any other party, required or desired to be given hereunder shall be in writing and shall be validly given or made only if personally delivered or deposited in the United States mail, postage prepaid, return receipt requested or if made by Federal Express or other similar delivery service maintaining records of deliveries and attempted deliveries, or if made by facsimile. Service shall be conclusively deemed made upon receipt if personally delivered or, if delivered by mail or delivery service, on the first business day delivery is attempted or upon receipt, whichever is sooner.

Any notice or demand to Landowner shall be addressed to Landowner at:

**Washoe County:**

Eric Crump, Operations Division Director  
Washoe County Community Services Department  
PO Box 11130  
Reno, NV 89520

Any notice or demand to Landowner shall be addressed to Landowner at:

City of Reno  
Attention: Fire Chief and Public Works Director  
PO Box 1900  
Reno, Nevada 89505

The parties may change their addresses for the purpose of receiving notices or demands as herein provided by a written notice given in the manner aforesaid to the others, which notice of change of address shall not become effective, however, until the actual receipt thereof by the others.

**9. Miscellaneous.**

A. Assignment. Neither this Agreement nor any rights or obligations of Licensee hereunder may be transferred, assigned or conveyed by Licensee without the written consent of Landowner, provided that Licensee may delegate performance of obligations hereunder to contractors or others performing the Work on the Property. Said delegation shall not relieve Licensee of liability hereunder.

B. Survival of Covenants. Any of the representations, warranties, covenants and agreements of the parties, as well as any rights and benefits of the parties, pertaining to a period of time following the termination shall survive the termination and shall not be merged therein.

C. Parties Bound. This Agreement shall be binding upon and inure to the benefit of the parties of this Agreement and their respective heirs, executors, administrators, legal representatives, successors and assigns.

D. Severability. If any of the terms and conditions hereof shall for any reason be held to be invalid, illegal, or unenforceable in any respect, such invalidity, illegality, or unenforceability shall not affect any other of the terms and conditions hereof and the terms and conditions hereof thereafter shall be construed as if such invalid, illegal, or unenforceable term or conditions had never been contained herein.

E. Time. Time is of the essence to the performance of any provision of this Agreement. If the date for performance of any provisions of the Agreement is a Saturday, Sunday, or banking holiday (in the State of Nevada), the date for performance shall be extended until the next day that is not a Saturday, Sunday or banking holiday.

F. Waiver. Either party may specifically waive any breach of the terms and conditions hereof by the other party, but no waiver specified in this Section shall constitute a continuing waiver of similar or other breaches of the terms and conditions hereof. All remedies, rights, undertakings, obligations, and agreements contained herein shall be cumulative and not mutually exclusive.

G. Governing Law. The terms and conditions hereof shall be governed by and construed in accordance with the laws of the State of Nevada, and venue shall be in Washoe County, Nevada.

H. Counterparts. This Agreement may be executed in counterparts, each of which shall be deemed an executed original, and all of which together shall constitute one and the same instrument.

I. Entirety and Amendments. This Agreement embodies the entire Agreement between the parties and supersedes all prior Agreements and understandings if any, relating to the Property, and may be amended or supplemented only by an instrument in writing executed by the party against whom enforcement is sought. No oral statements or representations made before or after the execution of this Agreement regarding the subject matter of this Agreement are binding on a party, nor may any such oral statements or representations be relied on by a party.

J. Invalid Provisions. If any provision of this Agreement is held to be illegal, invalid or unenforceable under present or future laws, such provision shall be fully severable. The Agreement shall be construed and enforced as if such illegal, invalid or unenforceable provision had never comprised a part of the Agreement. The remaining provisions of the Agreement shall remain in full force and effect and shall not be affected by the illegal, invalid or unenforceable provision or by its severance from this Agreement.

K. Headings. Headings used in this Agreement are used for reference purposes only and do not constitute substantive matter to be considered in construing the terms of this Agreement.

L. Not a Partnership. The provisions of this Agreement are not intended to create, nor shall they be in any way interpreted or construed to create, a joint venture, partnership, or any other similar relationship between the parties.

M. No Recordation. Neither this Agreement nor any notice hereof shall be recorded in the office of the Washoe County Recorder.

**IN WITNESS WHEREOF**, the parties hereto or a representative or either have set their hands and subscribed their signatures as of the date and year indicated.

**LICENSEE:**

**COUNTY OF WASHOE, a political subdivision of the State of Nevada**

By: \_\_\_\_\_ Date: \_\_\_\_\_  
Eric Crump, Operations Division Director  
Washoe County Community Services Department

STATE OF NEVADA

COUNTY OF WASHOE

On the \_\_\_\_\_ day of \_\_\_\_\_, 2016, Eric Crump, Operations Division Director, Washoe County Community Services Department, personally appeared before me, a Notary Public, and acknowledged to me that the party executed the above instrument for the purpose therein contained.

\_\_\_\_\_  
Notary Public  
My Commission Expires \_\_\_\_\_

**LANDOWNER:**

**City of Reno, a Municipal Corporation**

By: \_\_\_\_\_ Date \_\_\_\_\_  
John Flansberg, Public Works Director

STATE OF NEVADA

COUNTY OF WASHOE

On the \_\_\_\_\_ day of \_\_\_\_\_, 2016, \_\_\_\_\_ personally appeared before me, a Notary Public, and acknowledged to me that the party executed the above instrument for the purpose therein contained.

\_\_\_\_\_  
Notary Public  
My Commission Expires \_\_\_\_\_

## Staff Report

**Board Meeting Date:** June 23, 2016

**TO:** District Board of Health  
**FROM:** Kevin Dick, District Health Officer  
 775.328.2415, kdick@washoecounty.us  
**SUBJECT:** Introduction, Discussion and Possible Direction to Staff regarding Amended Board Bylaws and proposed Rules, Policies and Procedures for Potential Adoption at the July 2016 DBOH meeting.

### SUMMARY

Staff has developed for introduction Amended Board Bylaws and proposed Rules, Policies and Procedures, for discussion, direction and potential future action at the July 2016, DBOH meeting.

**District Health Strategic Objective supported by this item:** Strengthen District-wide infrastructure to improve public health and strengthen WCHD as an innovative, high- performing organization.

### PREVIOUS ACTION

District Board of Health Procedural Policies (Policies) were adopted November 17, 1993 and revised in 1995, 1998 and 2000. Click the following link to access the document: [https://www.washoecounty.us/health/files/district-board-of-health/dboh\\_procedural\\_policies.pdf](https://www.washoecounty.us/health/files/district-board-of-health/dboh_procedural_policies.pdf)

District Board of Health Bylaws, Rules and Regulations (Bylaws) were adopted February 28, 1990 and revised in 1998, 2003 and 2006. Click the following link to access the document: [https://www.washoecounty.us/health/files/district-board-of-health/dboh\\_bylaws.pdf](https://www.washoecounty.us/health/files/district-board-of-health/dboh_bylaws.pdf)

### BACKGROUND

The Policies and Bylaws documents that guide the DBOH were developed decades ago and require updating.

Staff reviewed documentation developed to guide other governing boards and developed the proposed compilation of Rules, Policies and Procedures (RPPs) for the Board's consideration.

A draft of the proposed Rules, Policies and Procedures (RPPs) was presented to the Board on April 28, 2016. The Board took no action but requested that staff, with Dr. Hess' input, divide the RPPs into separate governing and procedural documents and bring them back for review.

### FISCAL IMPACT

There will be no additional fiscal impact to the FY17 budget.

### RECOMMENDATION

Staff recommends the Board provide input as to whether they are satisfied with the Amended Board Bylaws and proposed Rules, Policies and Procedures, or provide direction to request changes or additions to the documents prior to consideration for adoption during the July 2016 DBOH meeting.

Subject: Proposed Rules, Policies and Procedures

Date: June 23, 2016

Page 2 of 2

### **POSSIBLE MOTION**

Possible motions could be “Move to accept the Amended Board Bylaws and proposed Rules, Policies and Procedures as written, and to direct staff to bring the Amended Board Bylaws and proposed Rules, Policies and Procedures to the July, 2016 DBOH meeting for possible adoption.”

Or

Move to direct staff to make the following changes or additions [*changes proposed*] to the Amended Board Bylaws and proposed Rules, Policies and Procedures, and bring the Amended Board Bylaws and proposed Rules, Policies and Procedures to the July, 2016 DBOH meeting for possible adoption.

BYLAWS  
OF THE WASHOE COUNTY DISTRICT BOARD OF HEALTH

ARTICLE I

NAME

The name of this organization shall be the Washoe County District Board of Health, hereinafter referred to as "District Board of Health".

ARTICLE II

OBJECT

The object of the District Board of Health shall be set forth under Chapter 439 of the *Nevada Revised Statutes* and the *Interlocal Agreement Concerning The Washoe County Health District*.

- Section 1. The District Board of Health shall protect and promote the public health and the environment within the health district through the abatement of nuisances, the regulation of sanitation and sanitary practices; the sanitary protection of water and food supplies, and the suppression and control of contagious or infectious diseases.
- Section 2. The District Board of Health shall be responsible for assessment, monitoring, and surveillance of health district's health problems and needs of resources for dealing with them.
- Section 3. The District Board of Health shall be responsible for policy development and leadership that foster local involvement and a sense of ownership, that emphasize health district needs, and that advocate equitable distribution of public resources and complementary private activities commensurate with health district needs.
- Section 4. The District Board of Health shall be responsible for assurance that high quality services needed for the protection of public health within the health district are available and accessible to all persons.

## ARTICLE III

### MEMBERS

The members of the District Board of Health shall be set forth under Chapter 439 of the *Nevada Revised Statutes* and the *Interlocal Agreement Concerning The Washoe County Health District*.

- Section 1. The District Board of Health shall consist of two members from each county, city or town which participated in establishing the health 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. 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.
- Section 2. The additional member of the District Board of Health shall be a physician licensed to practice medicine in Nevada. ~~This provision applies to appointments made on or after January 1, 1992.~~
- Section 3. If the members of the District Board of Health appointed by Reno, Sparks and Washoe County fail to choose the additional member within 30 days after the term of the additional member becomes vacant or expires, that member ~~shall~~ may be appointed by the State ~~Health Division~~ Chief Medical Officer.
- Section 4. 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. Upon the expiration of this term of office, a member shall continue to serve until his/her successor is appointed and qualifies. When a person appointed to the District Board of Health as a member of the governing body of Reno, Sparks or Washoe County no longer qualifies as a member of that governing body, his/her term of office on the District Board of Health expires and a vacancy automatically occurs. That vacancy shall be filled in the same manner specified in Section 1.



## ARTICLE IV

### OFFICERS

Section 1. ~~The District Board of Health shall select a chairman and vice chairman from among its members.~~

Section 2. ~~The chairman and vice chairman shall serve two years and until their successors are appointed by the District Board of Health and qualify.~~

Section 3. ~~The District Health Officer shall be the chief executive officer of the District Health Department and secretary to the District Board of Health.~~

#### ~~Article 7 — OFFICERS OF THE BOARD~~

7.01 Titles. The officers of the Board shall be:

- a. Chair, who shall preside at all meetings, maintain order, call special meetings as they are needed, appoint committees, and generally represent the Board.
- b. Vice Chair, who will perform all of the Chair's functions in the absence of the Chair.
- ~~c. The District Health Officer shall be the chief executive officer of the Health District and Secretary (non-voting), who shall be the District Health Officer or his/her designee, to the District Board of Health and who shall maintain the Board records; Rules, Policies and Procedures; and attachments. The District Health Officer shall be appointed by the Board in accordance with NRS 439.400 (2) and the Interlocal Agreement establishing the Health District.~~

7.02 Election of Officers.

- a. During even numbered years, ~~the~~ December Board meeting shall include on the agenda the election of officers.
- b. The Chair and Vice Chair will take office at the meeting held the following January.

7.03 Terms of Office.

- a. Each officer of the Board shall be elected by the Board and shall serve for two years or until ~~his~~their successor is elected and takes office.
- ~~b. In the case the Chair does not complete his/her term of office, the Vice Chair who succeeds him/her may serve as Chair for two full terms.~~

## ARTICLE V

## MEETINGS

Section 1. ~~The regular meetings of the District Board of Health shall be held on the fourth Thursday of each month unless otherwise ordered by the District Board of Health.~~  
All meetings of the District Board of Health are subject to the provisions of the *Nevada Open Meeting Law*.

Section 2. a. Regular meetings shall be ~~held~~scheduled at least once each month. Regular meetings will normally convene on the fourth Thursday of the month at 1:00 p.m., in the Board of Commission Chambers, or other properly noticed location identified by the Chair. In the months of November and December, the meetings will be ~~held~~scheduled on the third Thursday.

b. Should the regular meeting date fall on a holiday or conflict with a special event within the complex or at a neighboring facility, the meeting may be held on an alternate date and/or at an alternate meeting facility as determined by the Chair ~~or Acting Chair.~~

Section ~~32~~. Special meetings may be called by the Chair~~man~~ or by other Board members and shall be called upon written notice. The purpose of the meeting shall be stated in the notice. Except in cases of an emergency, as defined in Chapter 241 of the *Nevada Revised Statutes*, at least three working days advanced ~~and~~ notice shall be ~~given~~provided to the public and the Board.

Section ~~43~~. Four members of the District Board of Health shall constitute a quorum.

3

## ARTICLE VI

### COMMITTEES AND ADVISORY BOARDS

Section 1. The following ~~committees~~hearing and advisory boards shall act as advisors to the District Board of Health. The object of these ~~hearing and committees and~~ advisory boards shall be as set forth in the Statutes, regulations, resolutions, or resolutions-agreements authorizing their creation.

Section 2. ~~An Administration and Personnel Committee~~

~~Section 3. A Community and Clinical Health Services Committee~~

~~Section 4. An Environmental Health Committee~~

~~Section 5. A Marketing Committee~~

Section ~~26~~. An Air Pollution Control Hearing Board, ~~consisting of seven members, appointed to serve, as needed, as a fair and unbiased panel that hears appeals when a negotiated resolution cannot be achieved-~~ in accordance with NRS 445B.275.

Section ~~37~~. A Sewage, Wastewater and Sanitation Hearing and Advisory Board, ~~consisting of seven members, appointed to serve, as needed, to hold hearings to consider appeals, applications for variances and petitions to consider other matters relating to sewage, wastewater or sanitation. In accordance with Regulations Governing Sewage, Wastewater, and Sanitation Section 170.~~

Section 48. A Food Protection Hearing and Advisory Board, consisting of seven members, appointed to serve, as needed, when an appeal or variance hearing is required by the regulations governing food establishments. In accordance with Regulations Governing Food Establishments 190.600.

~~Section 5.~~ An Emergency Medical Services Advisory Board in accordance with the 2014 Interlocal Agreement for Emergency Medical Services Oversight.

Section ~~869~~. Such other committees, standing or special, as deemed necessary by the District Board of Health to carry on its work ~~and~~ shall be appointed in a duly noticed public meeting.

Section 710. The Chairman shall be ex-officio member of all committees.

Section 118. All committee meetings shall be noticed and conducted in accordance with the *Nevada Open Meeting Law*.

## ARTICLE VII

## RECORDS AND DOCUMENTS

### Section 1. Minutes and Audio/Video Recordings.

- a. All approved minutes, including items presented at the meetings as part of public record pertaining to the work of the Board shall be kept in safe, orderly files maintained under the supervision of the District Health Officer. Said records shall be accessible to the members of the Board and to the public as required by Nevada Revised Statutes and Washoe County's Public Records Policies and Procedures.
- b. All audio and video recordings pertaining to the work of the Board shall be kept in a safe, orderly location maintained under the supervision of the District Health Officer. Said records shall be accessible to the members of the Board and to the public for one year and then ~~will~~may be destroyed pursuant to Nevada Revised Statutes.
- c. The District Health Officer shall provide a Recording Secretary for each meeting who shall be responsible for preparing a written record of the meeting. Said minutes will bear the name of and be executed by the Recording Secretary.
- d. Copies of unapproved minutes of the past regular meeting, or meetings, shall be furnished to the Board members in advance of a regular meeting.

## ARTICLE VIII

### AMENDMENT OF BYLAWS

These bylaws may be amended at any regular meeting of the District Board of Health by a two-thirds vote, provided that the amendment has been submitted in writing at the previous regular meeting.

Effective, September 23, 1998

Amended February 26, 2003

Amended March 23, 2006

| ~~Amended~~ Proposed for amendment ~~May 26~~ June 23, 2016

| [5](#)

*Washoe County District Board of Health*  
*RULES, POLICIES AND PROCEDURES*

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Adopted

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Article 1 DEFINITIONS AND GENERAL POLICIES

    1.01 Definitions. The following words have the following meanings for purposes of these rules, policies and procedures:

        a. **District** means the Washoe County Health District or the department designated by the Interlocal Agreement Concerning the Washoe County Health District signed by Reno, Sparks and Washoe County.

- b. **Interlocal Agreement** means the Interlocal Agreement Concerning the Washoe County Health District signed by Reno, Sparks and Washoe County on August 26, 1986 and amended by the Amendment to the Interlocal Agreement Concerning the Washoe County District Health Department signed by Reno, Sparks and Washoe County and having an effective date of August 24, 1993.
- c. **District Health Officer** means the District Health Officer of the Health District, or his/her designee.
- d. **General Business matter** includes taking action on general business items and procedural matters such as election of officers, appointment of committees, ceremonial or administrative resolutions, and amendments to these rules.
- e. **Board Determines Rules, Policies and Procedures.** The Washoe District Board of Health, under State statute and by the Interlocal Agreement, has the responsibility for policy development and leadership that fosters local involvement and a sense of ownership, that emphasizes health district needs, and that advocates equitable distribution of public resources and complementary private activities commensurate with health district needs.

1.02 Duties and Responsibilities.

- a. POLICY
  - i Members of the Board shall keep themselves informed on health laws, policies, procedures and trends in public health, and ethics laws of Nevada.
  - ii The seven Board members shall represent the best interests of the citizens of and visitors to Washoe County.
  - iii Board members shall endeavor to provide questions on agenda items to the managers or staff of the District prior to the meeting on which the agenda item is scheduled (24 hrs. when possible).
- b. RULE
  - i Members shall be prompt and diligent in attendance.

1.03 Communications outside of public hearings or meetings.

- a. POLICY. General: Members should avoid ex parte communications (i.e., private communications outside a public meeting with interested parties not employed as Health District staff) and limit any communication to matters not coming for appeal before the Board.
- b. RULE
  - i. A Board member will disclose on the record any ex parte communication and any relevant information pertaining thereto on matters before the Board for decision.
  - ii. Members shall not solicit, offer, or accept any offer for any business relationship or arrangement with any interested party. Any preexisting, ongoing or expected business relationship with any interested party must be disclosed and may be grounds for abstention under NRS Chapter 281A.

1.04 Ethical Principles for Board Conduct; Disclosures and Abstentions.

- a. POLICY
  - i. The Board is governed by Nevada's ethics laws, including NRS Chapter 281A
- b. RULE

- i. Potential Conflicts of Interest. In connection with matters coming before the Board, NRS 281A.420 discusses three circumstances where disclosure and abstention may be required. These three circumstances include when a Member

- has accepted a gift or loan,
- has a significant pecuniary interest, or
- would reasonably be affected by the Member’s commitment in a private capacity to the interests of another person in connection with the matter.

In any of those circumstances, the Member should check current statutes and rulings of the Nevada Board on Ethics to determine what disclosures should be made and when abstention is warranted. If disclosure is required, it should be made before the matter is discussed by the Board, and at that time the Member must also discuss whether or not he/she is abstaining, and why. If abstaining, it is not necessary to leave the room during deliberation and vote, but the Member should leave his/her seat at the dais until after the vote.

- a. If a Member has an ownership or pecuniary interest in an item being considered, the Member must abstain but may address the Board to discuss facts about the proceeding but must not ask, advocate or give any reasons for or against a vote.

## Article 2 VOTING

### 2.01 Voting.

- a. Unless otherwise provided by bylaws, code or statute, all matters and motions may be resolved by a majority of votes of those present at the meeting.

2.02 Motions to reconsider. A motion to reconsider any action taken by the Board may be made only during the meeting at which the action was taken or at the next regularly scheduled meeting. A motion to reconsider must be made by a Member who voted on the prevailing side of the motion being reconsidered, but a motion to reconsider may be seconded by any member of the Board. A previous motion failing by virtue of a tie vote may be reconsidered upon motion of any Member. If a motion for reconsideration relates to an item requiring legal notice, only the motion itself shall be debated and, if passed, reconsideration of the item continued to a future date to allow for the provision of legal notice.

## Article 3 MEETINGS

### 3.01 Rules

- a. The Board is a public body and must comply with the laws of Nevada regarding public and open meetings, including NRS Chapter 241 (the “open meeting law”)
- b. All meetings of the Board will be held in accordance with the open meeting law.

### 3.02 Agenda

- a. Items scheduled on the regular Board agenda shall ordinarily be limited to those matters that have prior staff review and are in a form suitable for Board action. . The District Health Officer will list the matters according to the order of business and furnish a copy of the agenda with background materials prior to the Board meeting to each member of the Board, the District Attorney, and Division Directors. No item may be submitted to the Board, except through the District Health Officer.
- b. In establishing the agenda, the District Health Officer may vary the order of business set forth in Section d by grouping items involving related subject matter or the same personnel, regardless of whether the items are public hearings, action items or informational items.
- c. The draft agenda is not considered final until approved by the Chair.



- d. Order of Business. Regular meetings shall be conducted substantially in the following order:
  1. \*Roll Call and Determination of a Quorum
  2. \*Pledge of Allegiance
  3. \*Public Comment
  4. Approval of Agenda
  5. Approval of Minutes
  6. Recognitions
  7. Proclamations
  8. Consent Items
  9. Public Hearings
  10. Business Items
  11. \*Staff Reports and Program Updates
  12. Board Comment
  13. \*Public Comment
  14. Adjournment

Asterisks (\*) are used to denote non-action items. Agenda headings will be modified to correctly indicate whether or not an item is an action (no asterisk) or a non-action action (\*).

3.03 Continued Items.

- a. The Board may vote to grant a continuance on an agenda item upon request of a Member, and, in addition, in the case of an Appeal, the Appellant. If the Board decides to continue an item, the Chair shall first ask if anyone in the audience wishes to testify on the matter even though it may be continued to another date, time and location certain.

3.04 General Expectations of Members During Meetings.

- a. Members shall treat each other and all persons at a meeting with respect before, during and after the meeting. The decorum rules stated below apply to Members as well as members of the public, and a Member may be removed by the Chair for disruptive conduct.

3.05 Meeting Decorum; Removal for Disruptive Conduct.

- a. Meetings of the District Board of Health are limited forums for the governmental purpose of making health policies and decisions for the community in accordance with its duties under state and local law. That governmental purpose is efficiently accomplished only when the process established by law is followed and all participants in a meeting conduct themselves within the limits established and with decorum, civic responsibility, and mutual respect.
- b. It is the intent of the Board to maintain the highest level of decorum. The Chair is authorized to take appropriate actions to maintain such decorum to include declaring recesses, admonishing speakers and other remedies set forth below.
- c. The viewpoint of any speaker will not be restricted, but reasonable restrictions may be imposed upon the time, place, and manner of speech at the meeting. Remarks which are irrelevant, impertinent, unduly repetitious, or which contain personal attacks, implied or actual threats, fighting words, or profanity are not consistent with efficiently accomplishing the governmental purpose.

- d. The Chair may remove (with or without warning) any person who willfully makes the kind of remarks described above or engages in other disorderly conduct, if such remarks or conduct makes the orderly conduct of the meeting impractical.

### 3.06 Public Hearings or Individual Agenda Items.

- a. The following rules apply to persons speaking during public hearings or individual agenda items (as opposed to speaking during general public comment periods).
  - i. Public hearings and receiving public input during individual agenda items are part of a governmental process and, in order to efficiently pursue that process, persons addressing the Board during such items are to speak only to the topic being considered. Irrelevant or overly repetitions comments by the same person delays and disrupts the process.
  - ii. Speakers must sign and deliver to the Recording Secretary a “Request to Speak” form.
  - iii. The Chair shall determine the order of speakers.
  - iv. Public comment and presentations for individual agenda items are limited as follows: fifteen minutes for appellant 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.
  - v. The speaker will also be encouraged to limit his/her comments regarding the background of the topic. When speakers have exceeded the allotted time, the Chair will endeavor to remind them that they have gone past the recommended time limits and request they conclude their remarks. The Chair may rule the speaker out-of-order should the speaker not obey the Chair’s admonition.
  - vi. Alterations to the above time limits may be permitted by the Chair in the following circumstances.
    - a. All public testimony. The Chair may modify speaker time limits for all public testimony during any item and will announce the modification at the beginning of the agenda item, if possible, or as soon as is practicable during the agenda item. The modified time limits will remain in effect only for that specific agenda item.
    - b. Individual time limits for public speakers. The Chair may adjust individual speaker time limits to accommodate questions by Members
    - c. Appellants and amicus organizations. Appellants or his/her representative, or a person representing an amicus group (a group with special knowledge or interest in the agenda item who desires to testify as a friend of the Board) may notify Department staff 24 hours prior to the start of a noticed meeting at which action may be taken that a longer time is requested to make a presentation. When making the notification, an approximate amount of time needed to make the presentation must be provided. The department will notify the Chair, who has the discretion to grant, modify, or deny such a request at the beginning of the agenda item.
    - d. During individual presentations by appellants, or amicus organizations, the Chair may adjust the time limit to accommodate questions by Members or if the Chair believes that extra time is essential to a complete presentation of probative and non-repetitive information.

### 3.07 Procedures for Individual Agenda Items.

- a. General Principles. These rules are intended to promote consistency and efficiency, maximize public input, and afford the appropriate amount of due process in the conduct of meetings of the Board. These rules apply to all proceedings before the Board.

- b. Consent Agenda.
  - i. The consent agenda may be used for matters which need not be individually discussed and acted on and may be more efficiently handled on a block vote. Examples of items typically handled on the consent agenda are Air Quality Management cases that have not been appealed, budget amendments, interlocal agreements, contracts and acceptance of donations.
  - ii. Items which require a public hearing shall not be placed on the consent agenda.
  - iii. When announcing the Consent agenda, the Chair shall ask for and allow public comments on any item. Any Member may ask for removal of an item from the consent agenda and it shall be removed and handled as a general business item under Rule C(9)(c). Otherwise, consent agenda items may be voted on as a block.
- c. Motions.
  - a. Motions must be seconded before acceptance or debate. If a motion is not seconded, it is considered moot and the Chair may call for further discussion or a new motion. Unless otherwise directed by the Chair, motions may be made and voted upon by the board members present.
- d. Vote.
  - a. The Chair shall call for a vote.
  - b. If a motion to approve an adjudicative matter does not receive the required number of affirmative votes, it is deemed denied.

#### Article 4 BOARD COMMENTS

4.01 Board comments will be limited to announcements or issue(s) for a future agenda.

#### Article 5 USES OF STAFF

5.01 Board members may request assistance of Department staff in research, responses to complaints, and other matters. The request must be made to the District Health Officer who will determine the appropriate level of assistance to be provided to meet the request. If the District Health Officer determines that the request will entail more than two hours of staff time and it is a request made by one Board member only, the request will have to be acted upon by the Board.

#### Article 6 MEMBERS

6.01 The physician member appointed by the Board shall be expected to serve as a Board liaison to the physicians of Washoe County and the Washoe County Medical Society.

#### Article 7 AMENDMENT OF RULES, POLICIES AND PROCEDURES

7.01 Amendments. The Rules, Policies and Procedures may be amended or added to by majority vote of the Members present. The proposed amendment or addition shall be placed as an action item on a Board meeting agenda, and would become effective at the next Board meeting upon a majority affirmative vote of the full Board.

Adoption:

## Staff Report

**Board Meeting Date:** June 23, 2016

**TO:** District Board of Health  
**FROM:** Kevin Dick, District Health Officer  
 (775) 328-2416, kdick@washoecounty.us  
**SUBJECT:** **Discussion and Possible Direction to pursue Accreditation through the Public Health Accreditation Board and to provide Semi-Annual Progress Reports to the District Board of Health.**

### SUMMARY

Discussion and possible direction to pursue accreditation through the Public Health Accreditation Board (PHAB) and to provide semi-annual progress reports to the District Board of Health (DBOH).

**District Health Strategic Objective supported by this item:** Strengthen District-wide infrastructure to improve public health, Secure and deploy resources for sustainable impact, Strengthen WCHD as an innovative, high- performing organization

### PREVIOUS ACTION

The Washoe County Health District Fundamental Review recommendations, based largely on PHAB accreditation domains, were presented to the District Board of Health on February 27, 2014. On March 27, 2014 the DBOH approved the implementation plan proposed by staff. Since that time, all but a few of the recommendations have been implemented and finalized. Recommendation 24 is to seek PHAB accreditation.

On January 1, 2016, Dr. Novak became a member of the Board of the National Association of Local Boards of Health (NALBOH) and opened discussions with the DBOH members regarding the possibility of pursuing accreditation.

The Washoe County Health District Strategic Plan was approved by the District Board of Health on May 26, 2016. This is the third prerequisite requirement for accreditation, the other two, the Community Health Needs Assessment, and the Community Health Improvement Plan, were previously approved by the Board in January 2015 and 2016.

Dr. Novak requested an item be added to the June 23, 2016 agenda regarding a decision to pursue accreditation.

### BACKGROUND

Since PHAB's national accreditation program was established in 2011, 135 public health departments serving over half of the U.S. population have achieved accreditation. To receive national accreditation through PHAB, a health department or integrated local public health department system must undergo a rigorous, multi-faceted, peer-reviewed assessment process to ensure it meets or exceeds a set of public health quality standards and measures.

Subject: WCHD Accreditation

Date: June 23, 2016

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The benefits of achieving accreditation through PHAB are far-reaching. According to a survey conducted by NORC at the University of Chicago, accreditation stimulates quality improvement and performance management opportunities, stimulates greater accountability and transparency, strengthens management processes, and helps health departments document their capacity to deliver critical public health services to their communities.

Through completion of the PHAB Accreditation Readiness Checklist and discussions with the recently accredited Carson City Health and Human Services, it was determined that the Health District was not yet ready to apply for accreditation. Items to be completed include a workforce development plan, a performance management plan, and a branding strategy plan. An accreditation team led by an accreditation coordinator also needs to be established and work on preparation activities. While accreditation will require an investment of personnel resources, and a financial commitment, it should be manageable if planned and accomplished over time.

Therefore, the staff recommendation is not to attempt to apply for accreditation by the end of June 2016 under the existing fee schedule, which would require completion of accreditation in twelve months. Rather, staff recommends pursuing accreditation in a planned and managed fashion to allow other Health District priorities recently identified in the Strategic Plan and CHIP to move forward as well. The PHAB will be implementing a new annual fee schedule, which begins July 1, 2016. However, while accreditation may be more expensive under the new fee structure, it is not expected to be substantially more expensive over the longer term since the new annual fee structure includes reaccreditation and Health Departments accredited under the existing fee structure will be required to pay a yet-to-be-established reaccreditation fee after five years.

### **FISCAL IMPACT**

There will be no additional fiscal impact to the FY17 budget should the Board direct the District Health Officer to pursue accreditation.

### **RECOMMENDATION**

Staff recommends the District Board of Health direct Health District staff to pursue accreditation through the Public Health Accreditation Board and to provide semi-annual progress reports to the District Board of Health.

### **POSSIBLE MOTION**

Should the Board agree with staff's recommendation, a possible motion would be "Move to direct Health District staff to pursue accreditation through the Public Health Accreditation Board and to provide semi-annual progress reports to the District Board of Health."

**Air Quality Management Division Director Staff Report**  
**Board Meeting Date: June 23, 2016**

**DATE:** June 10, 2016

**TO:** District Board of Health

**FROM:** Charlene Albee, Director  
775-784-7211, calbee@washoecounty.us

**SUBJECT:** Program Update, Divisional Update, Program Reports

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**1. Program Update**

- a. 2015 Nevada Legislative Session – Assembly Bill 146



During the 2015 Nevada Legislative Session, Nevada’s legislators passed Assembly Bill 146 (AB 146) requiring the Advisory Committee on the Control of Emissions from Motor Vehicles (I/M Committee) to study the inspection and testing of motor vehicles and emissions control systems in Nevada. The original bill, as proposed and including a series of amendments, would have arbitrarily reduced the frequency of smog checks to biennial and provided an exemption for 1995 and older vehicles which are typically identified as gross polluters.

Both Clark County Department of Air Quality (CCDAQ) and Washoe County Health District, Air Quality Management Division (AQMD) provided testimony in opposition to AB146 based on the potential impacts to air quality. As an alternative, the District Health Officer and AQMD Director met with Assemblywoman Marilyn Kirkpatrick and proposed the I/M Committee conduct a study of the smog check program, to include the Classic Vehicle Plates, and provide recommendations prior to the 2017 Legislative Session. AB146 was amended with the directive to complete the study and present the final report to the Legislative Council Bureau by June 30, 2016. The final report was completed in May 2016 and will be transmitted to the chairs of the Senate and Assembly Standing Committees on Transportation for consideration. A copy of the report is available on the AQMD website at [OurCleanAir.com](http://OurCleanAir.com).

In order to complete the study, an I/M Subcommittee was formed consisting of a member of each of the local air agencies (AQMD (chair) and CCDAQ), the Nevada Division of Environmental Protection – Air Quality Planning, and the Department of Motor Vehicles. The Subcommittee met on a monthly basis beginning in July 2015 with three basic principles:

- i. Ensure that the changes do not result in an appreciable emission increase of harmful pollutants or lead to violations of the National Ambient Air Quality Standards (NAAQS);
- ii. Take into account the I/M programs of other western states; and
- iii. Decrease the regulatory burden imposed on the motoring public.

The analysis found Nevada was the only state which requires annual testing exclusively. Recommendations in the report were compiled following an extensive analysis of DMV vehicle registration data in Clark and Washoe Counties; an evaluation of the pass/fail results based on type of vehicles and model years; and the completion of a series of modeling analyses to determine the air quality impacts from a variety of scenarios.

The final report includes a recommendation to increase the new car exemption to four (4) years, biennial testing for the next four (4) years, and annual testing for all vehicles over eight (8) years old. Under this scenario, the air quality impacts will be less than 1% for carbon monoxide, nitrogen oxides, and volatile organic compounds. It is expected the nominal emissions increase will be offset by Federal EPA rules targeting emission reductions (i.e., Tier 3 Motor Vehicle Emission and Fuel Standards) and voluntary reductions from Clark and Washoe Counties' participation in the Ozone Advance Program.

A fiscal impact analysis was performed for both the regulatory agencies and the smog check industry. In order to remain revenue neutral with a reduction in testing frequency, the report recommends increasing the inspection certificate fee from \$6.00 to \$7.75. Additionally, the report recommends assessing the fee as an air pollution abatement fee as part of the vehicle renewal process. This would reduce the burden on the testing industry to collect the fee and then transfer it to DMV for distribution. The fiscal impact to industry will result in a reduction of approximately 22% of tests conducted.

The report also provides options to close the existing loophole created during the 1997 legislative session which provided an exemption for old, unmaintained vehicles to avoid emissions testing. After consideration of a number of options, three primary recommendations to ensure the classic vehicle exemption is not being exploited include:

- Clarify the definition of a classic vehicle to align with western states
- Require annual odometer reading certified at licensed I/M inspection stations
- Reinstate the requirement for classic vehicles to pass an initial emissions test

Other options presented for consideration include classic vehicle insurance, random audits of odometer readings, and establishing a classic vehicle hotline similar to the smoking vehicle hotline to report vehicles that do not meet the definition of a classic vehicle.

The completion of this report represents a tremendous multi-jurisdictional effort by staff during a relatively short amount of time. It should be noted that all of the Subcommittee meetings were conducted in accordance with the Nevada Open Meeting Laws to ensure the public was provided the opportunity to participate. AQMD staff will be prepared to engage as necessary as the 2017 Legislative Session considers the recommendations in the report.

b. Bike Week 2016 Summary


**BIKE WEEK 2016 THANK YOU**

A BIG THANKS TO EVERYONE WHO HELPED MAKE THIS YEAR'S BIKE WEEK A HUGE SUCCESS AND TO EACH RIDER WHO PARTICIPATED IN ALL THE EVENTS! PLEASE VISIT [BIKEWASHOE.ORG](http://BIKEWASHOE.ORG) FOR A COMPLETE LIST OF SPONSORS & PARTNERS WHO MADE 2016 BIKE WEEK POSSIBLE.

**CYCLING** IS NOT ONLY A GREAT WAY TO TRAVEL AND BE ENGAGED IN YOUR COMMUNITY, BUT IT ALSO REDUCES CAR EMISSIONS, TRAFFIC CONGESTION AND BURNS CALORIES. CYCLING IS LOW IMPACT SO IT'S NOT AS HARD ON KNEES AND JOINTS, AND IS A GREAT EXERCISE FOR WEIGHT LOSS, BUILDING MUSCLES AND GETTING IN SHAPE. THE NUMBER OF CALORIES BURNED DEPENDS ON THE INDIVIDUAL. THE AVERAGE RIDER BURNS APPROXIMATELY **235** CALORIES PER HALF HOUR RIDING AT A MODERATE SPEED (12-14 MPH).

**SPONSORS & PARTNERS:**  
E.L. CORD FOUNDATION  
WASHOE COUNTY HEALTH DISTRICT  
NEVADA BICYCLE COALITION  
NEVADA DOT  
GET HEALTHY WASHOE  
RTC  
RTC SMART TRIPS  
NV ENERGY  
ERGS PROPERTIES  
RENO BIKE PROJECT  
NATURE'S BAKERY  
RENO CYCLING & FITNESS  
RED ROCK WATER  
STANTEC  
SCHEELS  
BONANZA PRODUCE

**2016 STATISTICS:**  
OVER **1,043** REGISTRANTS  
**332** REGISTRANTS LOGGED MILES  
**14,838** MILES LOGGED  
OVER **536,451** CALORIES BURNED  
**7.1 TONS** OF CO2 SAVED  
**532** VEHICLES REMOVED FROM THE ROAD

 [BIKEWASHOE.ORG](http://BIKEWASHOE.ORG)

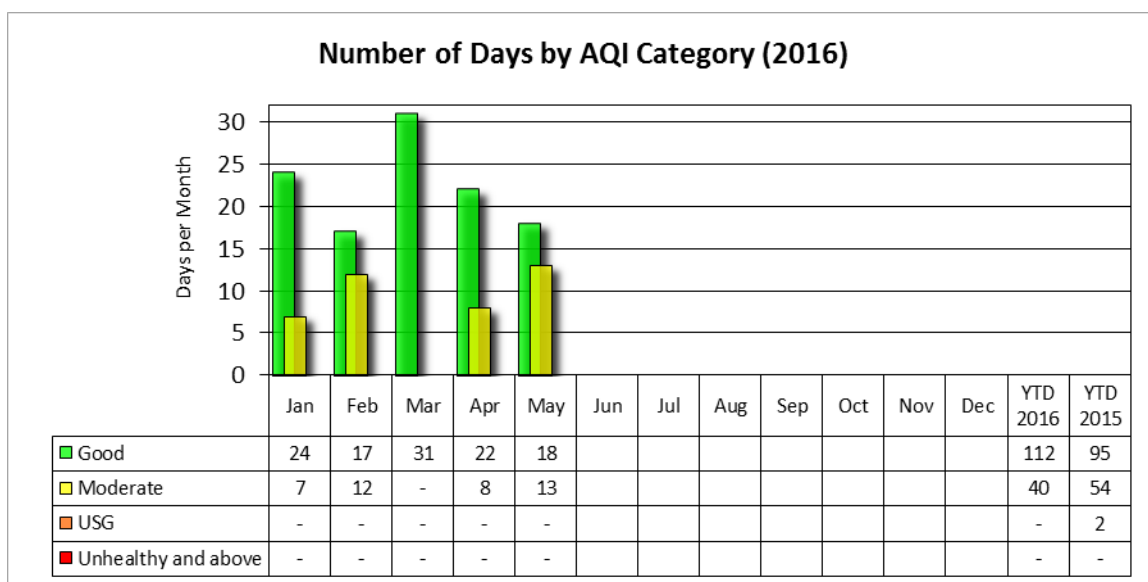
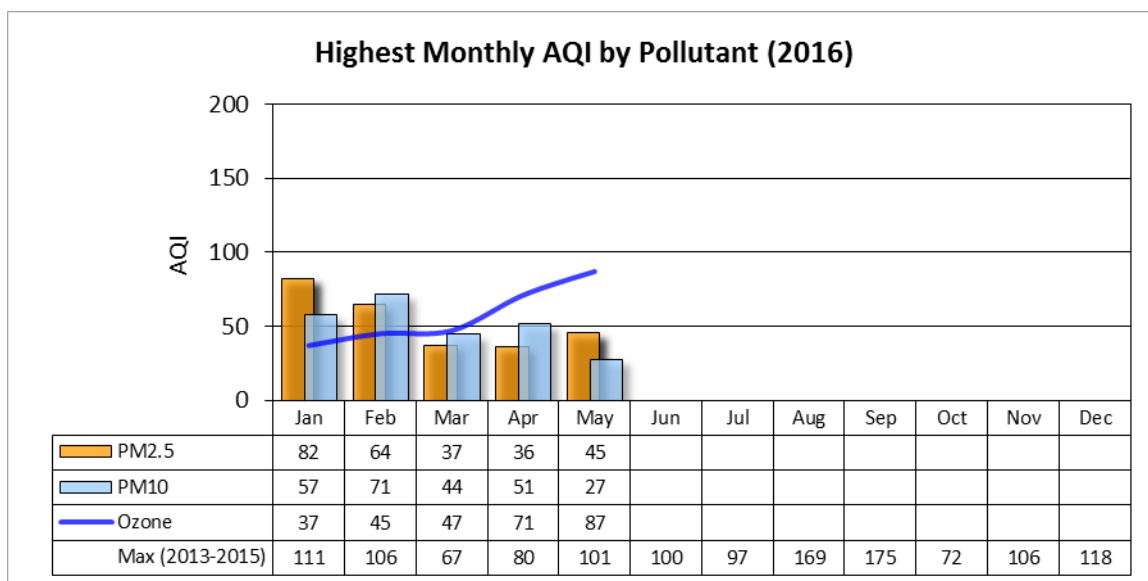
This year's Bike Week was a success with participation and logged miles increasing again this year.

Charlene Albee, Director  
Air Quality Management Division



## 2. Divisional Update

- a. Below are two charts detailing the latest air quality information for the month of May. The top chart indicates the highest AQI by pollutant and includes the highest AQI from the previous three years in the data table for comparison. The bottom chart indicates the number of days by AQI category and includes the previous year to date for comparison.



Please note AQI data are not fully verified and validated and should be considered preliminary. As such, they should not be used to formulate or support regulation, guidance, or any other governmental or public decision. For a daily depiction of the AQI data, please visit [OurCleanAir.com](http://OurCleanAir.com) for the most recent AQI Summary.

### 3. Program Reports

#### a. Monitoring & Planning

There were no exceedances of any National Ambient Air Quality Standards (NAAQS) during the month of May.

The DRAFT "2015 Ambient Air Monitoring Network Plan" is available for public inspection at [OurCleanAir.com](http://OurCleanAir.com). The Network Plan summarizes monitoring network operations for 2015 and includes proposed modifications for 2016-2017. This plan is required by 40 CFR 58.10 and will be submitted to EPA by July 1, 2015.

In May, the DBOH adopted revisions to the Woodstove Regulation (DBOH Regulations Governing Air Quality Management Sections 040.051 and 040.052). The revision incorporates EPA's new emission standards for woodstoves, pellet stoves, and hydronic heaters. It also now requires that existing pellet stoves must meet EPA's emission standards prior to close of escrow. Pellet stoves were previously exempt from this requirement. A workshop will be held on July 21 from 9:00 to 11:00 am at the Health District to ensure proper implementation and enforcement of the revised regulation. Woodstove dealers, woodstove inspectors, title companies, the Reno/Sparks Association of Realtors, and the general public will be invited to this implementation workshop.



Resolutions supporting Ozone Advance are expected to be adopted in June by the Truckee Meadows Regional Governing Board and the Regional Transportation Commission.

Daniel K. Inouye  
Chief, Monitoring and Planning

b. Permitting & Enforcement

Type of Permit	2016		2015	
	May	YTD	May	Annual Total
<b>Renewal of Existing Air Permits</b>	159	590	156	1297
<b>New Authorities to Construct</b>	9	39	13	99
<b>Dust Control Permits</b>	15 (118 acres)	68 (887 acres)	17 (188 acres)	151 (2129 acres)
<b>Wood Stove (WS) Certificates</b>	38	172	38	391
<b>WS Dealers Affidavit of Sale</b>	5 (3 replacements)	33 (23 replacements)	1 (0 replacements)	135 (85 replacements)
<b>WS Notice of Exemptions</b>	488 (4 stoves removed)	3010 (28 stoves removed)	739 (4 stoves removed)	7490 (50 stoves removed)
<b>Asbestos Assessments</b>	90	455	81	1077
<b>Asbestos Demo and Removal (NESHAP)</b>	19	112	17	150

Staff reviewed forty (40) sets of plans submitted to the Reno, Sparks or Washoe County Building Departments to assure the activities complied with Air Quality requirements.

- Permitting staff has completed the review of the RR Donnelley Title V permit and the federally required Statement of Basis; both documents are currently available for public review. After the conclusion of the 30 day public comment period, staff will reissue the permit which will be valid for five (5) years.
- Permitting and enforcement staff completed the review of all gasoline dispensing facility permits and facilities. Since January 2016 more than 210 gas station permits were reviewed and facilities inspected.

Staff conducted inspections of thirty-four (34) stationary source and fifty three (53) gasoline dispensing facilities in May 2016. Staff also conducted inspections on asbestos removal and construction/dust projects.

COMPLAINTS	2016		2015	
	May	YTD	May	Annual Total
<b>Asbestos</b>	1	14	1	25
<b>Burning</b>	1	6	0	8
<b>Construction Dust</b>	6	12	0	32
<b>Dust Control Permit</b>	2	8	1	6
<b>General Dust</b>	8	30	2	48
<b>Diesel Idling</b>	2	5	0	3
<b>Odor</b>	3	14	1	30
<b>Spray Painting</b>	0	1	1	8
<b>Permit to Operate</b>	2	4	1	12
<b>Woodstove</b>	0	1	1	13
<b>TOTAL</b>	<b>25</b>	<b>95</b>	<b>8</b>	<b>185</b>
NOV's	May	YTD	May	Annual Total
<b>Warnings</b>	2	12	2	24
<b>Citations</b>	1	6	1	8
<b>TOTAL</b>	<b>3</b>	<b>18</b>	<b>3</b>	<b>32</b>

\*Discrepancies in totals between monthly reports can occur due to data entry delays.

Mike Wolf  
 Chief, Permitting and Enforcement

DD	SK	—
DHO	—	—

**Community & Clinical Health Services  
Director Staff Report  
Board Meeting Date: June 23, 2016**

**DATE:** June 9, 2016  
**TO:** District Board of Health  
**FROM:** Steve Kutz, RN, MPH  
 775-328-6159; skutz@washoecounty.us  
**SUBJECT:** Divisional Update – Patagonia Health; Poison Prevention Trainings; Program Reports

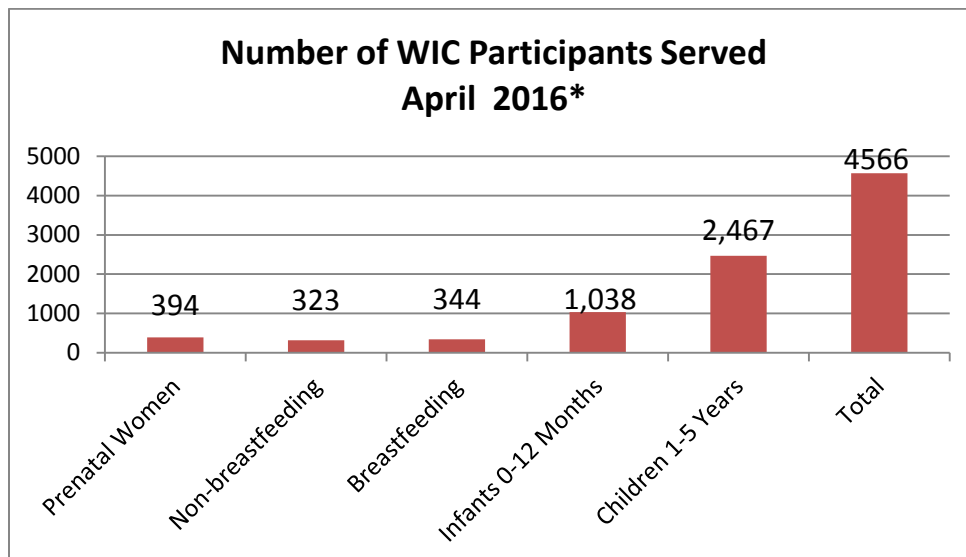
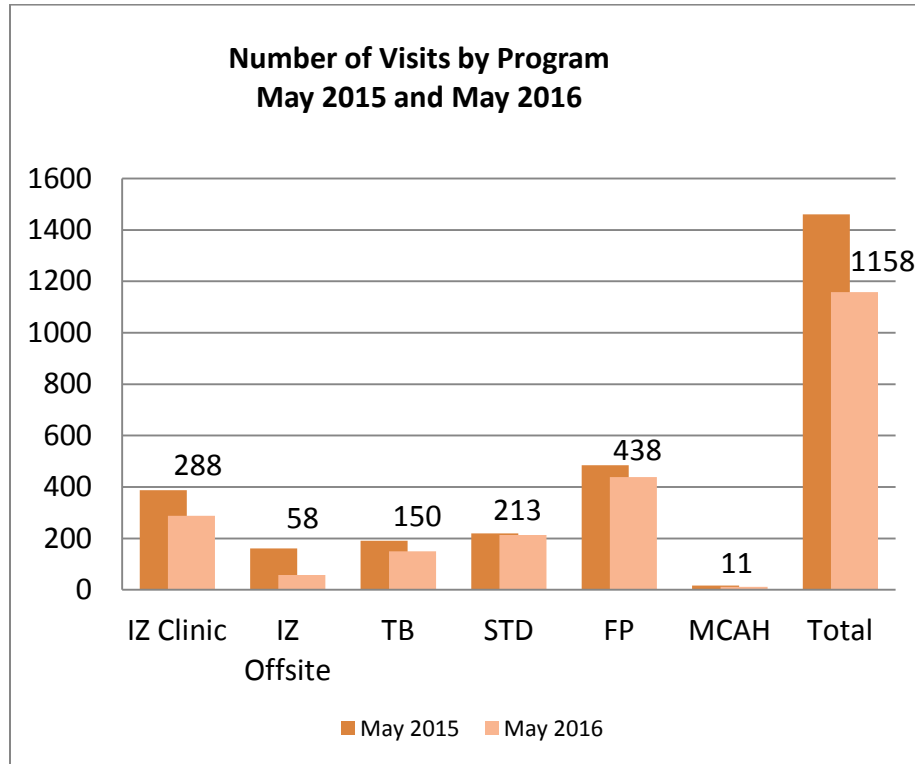
**1. Divisional Update –**

**a. Patagonia Health**

The pace has been fast and furious for the past few weeks as CCHS worked to “go live” with our new Electronic Health Record (EHR), Patagonia in the Immunization, Tuberculosis and Maternal Child Adolescent Health Programs. Patagonia had training staff onsite May 23<sup>rd</sup>-25<sup>th</sup> to provide support and technical assistance to program staff as we stood up the new EHR. To date, we are impressed with the capabilities of the new EHR, and continue to refine our processes while getting more comfortable with the system.

Sexual Health and Family Planning Programs are fine tuning templates and reports and expect to be going live around July 1, 2016. This staggered approach for go live has been beneficial to date, with our staff working through challenges in Immunization and TB, which will benefit our other programs in sharing lessons learned and being able to provide technical expertise.

**b. Data/Metrics**



\*It takes a full month after the last day of the reporting month for final caseload counts as WIC clinics operate to the end of the month and participants have 30 days after that to purchase their WIC foods.

Changes in data can be attributed to a number of factors – fluctuations in community demand, changes in staffing and changes in scope of work/grant deliverables, all which may affect the availability of services.

## 2. Program Reports – Outcomes and Activities

- a. **Sexual Health** – The HIV Surveillance Program had an informal meeting with HIV State staff and the CDC's Project Officer and Epidemiologist on May 17, 2016. Staff shared program successes and challenges.

The HIV program attended a Ryan White provider training in Las Vegas, June 6-7, 2016.

As noted above, staff has been working with Patagonia representatives to ensure all reporting requirements are captured for HIV and STD testing.

- b. **Immunizations** – The Immunization Program successfully launched Patagonia Health on May 24, 2016, including the electronic insurance billing component. Clinic appointment times have been expanded during this implementation process.

A total of 28 clients received 64 vaccinations at five different locations, including the Family Health Festival on May 25, 2016, in partnership with Kids to Senior Korner program. Additionally, staff provided vaccine and a significant amount of education regarding immunizations at the Baby Expo and Family Health Fair at the Grand Sierra Resort on May 22, 2016. A total of 30 clients received 54 doses of vaccine at that event.

- c. **Tuberculosis Prevention and Control Program** – Staff attended the Northern Nevada International Center (NNIC) Refugee Resettlement stakeholder meeting on May 24, 2016. Information was provided regarding the refugee resettlement process in the United States and outlined strategies and opportunities for the NNIC. The Office of Refugee Resettlement (ORR) is projected to begin later this summer. The ORR expects the Reno area to receive up to 75 refugees in FY 17.

The program went live with Patagonia Health on May 24, 2016, and staff continue to gain comfort and skills with the new EHR.

- d. **Family Planning/Teen Health Mall** – Christine Boheimer started work with the program as an Intermittent Hourly Health Educator I on June 6, 2016. Christine's position is grant funded. She will be assisting with program outreach and advertising to reach high needs populations as defined in the program's needs assessment. Christine, a recent graduate of the University of Nevada, Reno, has her degree in Community Health Science and previously volunteered for the Family Planning Program.

- e. **Chronic Disease Prevention Program (CDPP)** – Smoke free policies continue to be a priority and the FY17 tobacco work plan has been adjusted to increase the number of smoke free policies in locations frequently visited by families and youth such as playgrounds and sports fields.

Staff surveyed attendees and vendors at Earth Day regarding attitudes about smoke-free and vape free outdoor events. Results were mixed, as many attendees at the event were proponents of the use of marijuana. Staff continues to observe and anticipate the impact of potential recreational marijuana on tobacco smoking regulations. Staff attended the Marijuana Summit and gained knowledge on what other communities have experienced related to the legalization of recreational marijuana.

Staff completed a successful week of Bike Week activities. With AQM leading the efforts, CDPP contributed to the planning and assisted by encouraging businesses to participate in the Commuter Challenge. This year there were 1,043 people who registered and 332 who logged their miles on-line, with a total of 14,838 miles logged and 536,451 calories burned.

- f. **Maternal, Child and Adolescent Health (MCAH)** – Staff is working with Washoe County Parole on a Drug Endangered Children project. Pregnant women who are actively using or have a history of drug use are provided with pregnancy related education and resources. Staff attended the Statewide Maternal Child Health Coalition Spring Symposium on June 1, 2016. The MCAH program also went live with Patagonia Health on May 24, 2016.
- g. **Women, Infants and Children (WIC)** – Staff attended *The Baby Expo and Family Health Fair* on Sunday, May 22, 2016, at the Grand Sierra Resort that was co-sponsored by the Renown Children's Hospital and the RGJ Media Group. This outreach event was very successful and WIC staff promoted our services and obtained a large number of applicants for our program.

On Tuesday, May 31, 2016, staff received training on, "Shopping on a Budget - Providing Healthy Meals" that will be taught for clients in collaboration with the CUBE (Center for Unique Business Enterprises). The primary areas included planning meals, purchasing and preparing food, utilizing and comparing unit prices, and how to best use coupons to save money.

To help with food insecurity during the summer, WIC will provide information to clients about two different programs available. The first is the USDA Summer Food Service



Subject: CCHS Division Director's Report

Date: May 13, 2016

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Program *Free Summer Meals* that is available to all children ages 1- 18 years at various sites in Washoe County. These sites are sponsored by various community organizations including the Food Bank of Northern Nevada and The Boys & Girls Club of Truckee Meadows. The second is the Summer Electronic Benefit Transfer for Children program. This program is also funded by the USDA to offer a different means of obtaining nutritious foods using the WIC EBT benefit delivery model. Children that are receiving free or reduced lunch in school and living in certain school districts can participate in this program.

**Staff Report**  
**Board Meeting Date: June 23, 2016**

**DATE:** June 10, 2016  
**TO:** District Board of Health  
**FROM:** Robert O. Sack, Division Director, Environmental Health Services (EHS)  
775-328-2644; [bsack@washoecounty.us](mailto:bsack@washoecounty.us)  
**SUBJECT:** EHS Division and Program Updates - Food, Land Development, Vector-Borne Disease, Waste Management and EHS Inspections / Permits / Plan Review.

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**DIVISION UPDATE**

- In an effort to promote awareness of EHS functions and community services, staff developed and launched a Washoe County Environmental Health Service Facebook page. Staff has established tactics to promote the page including the development of standardized EHS social media icons to be incorporated in PowerPoint presentations, outreach documents and email signature blocks.
- Staff evaluated the EHS table at the bottom of the DD report to find it did not properly track commercial plan reviews, but instead the inspections associated with them. The report now reflects actual commercial plan reviews routed to the Environmental Health Services Division.
- The Division is in the process of interviewing and selecting a new Senior REHS as a result of the position reclassification approved by the Board and Board of County Commissioners.
- The Public Pool/Spa program is in the height of their busy season making sure citizens are safe and pools/spas are all in compliance. The attached press contributed to the spike in general inspections.
- Staff spent a tremendous amount of time working on the review and planning for Slide the City. Staff had various concerns regarding whether or not sanitary conditions could be maintained during the day of the event. As a result of poor water quality, the slide was temporarily closed on multiple occasions. In the end, staff closed the slide to public use approximately one and an half hours prior to the event's scheduled end. Since the event, multiple health agencies have contacted our Division to discuss the event, what went wrong, what issues were discovered and what recommendations would we have to other agencies trying to regulate such an event.

**PROGRAM UPDATES**

**Food**

- Staff held three workshops for food establishment operators and the general public on the No Bare Hand Contact with Ready-to-Eat Foods regulator requirement. The workshop covered education on the rationale for the requirement, methods to comply with the



requirement, and an interactive handwashing and glove use demonstration. **Participation in workshops for the consumers and industry meets the criteria of Standard 7 – Industry and Community Relations.**

- Staff from three workgroups continues to work on the implementation of a new food inspection form that will emphasize a risk based inspection approach by identifying the status of each foodborne illness risk factor and intervention. **Implementation of this project meets the criteria of Standard 3 – Inspection Program Based on HACCP Principles, Standard 7– Industry and Community Relations and Standard 9 – Program Assessment.**
- Two public workshops were held on June 7 and 9, 2016, to gather comments and input on the proposed regulation amendments related to the new food establishment rating system. Both public workshops were attended by food establishment operators, industry association representatives and the general public. **Implementation of the new inspection process meets the criteria of Standard 1 – Regulatory Foundation, Standard 3 – Inspection Program Based on HACCP Principles, Standard 7 – Industry and Community Relations and Standard 9 – Program Assessment.**
- With a grant funded by the FDA Voluntary National Retail Food Regulatory Program Standards, staff collaborated with a local graphic design and media company to develop Facebook advertisements and radio spots aimed at directing the general public and food service workers to the WashoeEats.com website to check food establishment inspection scores and gain additional information on the upcoming new inspection rating system. The ad campaigns are scheduled to run June through August 2016. **Execution of educational outreach to the general public and industry meets the criteria of Standard 7 – Industry and Community Relations.**
- **Food Epidemiology Program:** During May the Epidemiology Program saw a spike in foodborne illness complaints over April as expected. There was a small Noro-type outbreak associated with Fur-Con for the second year in a row. This year the case count was less than ten. Two outbreaks of Noro-type illness at elementary schools also occurred which have now been closed thanks to interdiction by the Health District with school staff on cleaning and exclusion procedures.

Additionally, staff continued working with Washoe County School District to implement revised exclusion and sanitation measures during Noro-type virus outbreaks. They are on track to resolution by June. There have been four recent Hand Foot and Mouth Disease outbreaks at Daycares and staff has responded to ensure that sanitation and control measures are in place. All cases have been closed. Staff attended a Mass Mayhem table top exercise with Federal, State and Local Health Authorities involving a large scale food contamination event on May 24, 2016, and was an integral part of the exercise.

- **EHS Training Program:** The four newest EHS Trainees completed nearly all sections of their Training Manuals for routine inspections in May. Through the efforts of EHS Training Program along with EHS staff the new trainees are entering the field at an accelerated pace with well- rounded training for routine inspections. Two other trainees that were hired before implementation of the more formal manual and training have retroactively joined in on some of the more recent training. All are expected to have achieved competency in all facets of routine inspection and will be moving forward towards REHS study and examination by the end of June.

- **EHS QI:** The Food Safety Program Senior along with the EHS QI Program Senior presented to the Supervisors, Division Directors and District Health Officer their quality improvement project for management support for FDA Food Program Standards. It was presented along with the continuous improvement project of implementing the FDA Food Program Standards, which Food Services Supervisors and the Food Safety Program Senior have worked on since 2006. The ultimate goal is to have the Standards as part of the Health District's Strategic Plan. Other QI projects are currently being explored.
- **Special Events:**
  - No large scale special events occurred during the month of May other than the Reno River Festival, which was reported in the previous month's program update. Much of the month was spent preparing for large events scheduled to occur during June, including the Street Vibrations Spring Rally, the Reno Rodeo, and the Eldorado BBQ, Brews and Blues Festival. During May, 120 temporary food establishment inspections were performed. A wide variety of staff members continue to perform temporary food establishment inspections, although the four Environmental Health Specialist Trainees have volunteered and have been relied upon to complete the bulk of the inspections. The trainees have reported that their regular work load has not been negatively affected by working in the Special Events program.

### **Land Development**

- The land development group is working overtime to keep up with the plan reviews that have been submitted and to maintain staff requirements for their routine work load. The average plan review is taking approximately 14 days, and may exceed that time frame goal on occasion.
- Plan submittals are continuing to trend higher and are expected to continue to increase with the new fees being implemented as of July 1, 2016.
- Staff is working with Truckee Meadows Water Authority (TMWA) to get their updated Consolidated Lead and Copper sampling plan approved at the State level. TMWA has provided updated sampling plans for the consolidated water quality parameter testing. This process has taken more staff time and has resulted in numerous meetings between the State, TMWA and the Health District in order to get a complete plan submittal resolved. It is the goal of staff to have the plans completed by July 1, 2016. Once this plan is completed, the regulatory consolidation of the TMWA and former Washoe County Water Resources Water Systems can be completed.
- Staff completed the first assessment of a total coliform positive result of a water system under the new federal Revised Total Coliform Rule. This new response and assessment process took staff in excess of sixteen hours to complete which is a dramatic increase to the procedures and processes prior to the new rule's implementation.
- Staff is working with TMWA to put on various workshops to help developers better understand the requirements for water system plan review and submittal to help with efficient review and approval process of the plans.

### UST/LUST Program

- Staff sat in the first state regulation workshop on updating NAC for the State UST program. It is anticipated the proposed changes to the Nevada Administrative Codes will be approved by the State Environmental Commission by November 2016. When approved, these amendments will increase our oversight and workload in the program.

### Vector-Borne Diseases

- A helicopter application of larvacide was applied to Swan Lake, Kiley Ranch and Butler Ranch on June 2, totaling 450 acres. Our office support staff has been receiving a high volume of calls regarding adult mosquito activity in the areas. Calls from Wingfield Springs, South Meadows, Damonte Ranch and Washoe Valley have been keeping staff quite busy. Staff is fogging these areas to reduce the mosquito adult populations. Our interns have been going through training to assist staff in the fogging applications in the Truckee Meadows Community.
- We are sending in the weekly surveillance mosquito collections to the Animal Diseases Laboratory at the Nevada Department of Agriculture for testing of mosquito borne viruses. So far the results have been negative. In addition, staff has deployed our newest trapping methods (gravid and BG traps) to detect the Aedes species of mosquitoes that transmit the Zika virus. The BG traps are located at Moana nursery and Rancho San Raphael Park and the gravid traps are located at Idlewild Park, Washoe County Golf Course, Lemmon Valley, Wedekind Road and Shadow Lane.
- Our sentinel chickens arrived and we will begin the bi-weekly bleeding and testing them for mosquito –borne viruses as well. The five flocks with ten birds per flock are placed from Lemmon Valley to Washoe Valley.
- Staff has been busy as well with development plans from the Cities and Washoe County. In addition, 22 civil plans are in the reviewing stage and we have signed off on seven building plans with the owners receiving their Certificate of Occupancy (C of O).
- Staff gave a Zika presentation to CCHS this week and will be presenting to the Washoe Committee-Prepare (Preparedness Partnership Committee) next week.



### Waste Management

- The WCHD funded the dumpsters used for the Great Community Cleanup held April 30, 2016, as part of a contract for services between Keep Truckee Meadows Beautiful (KTMB) and WCHD. Over 700 volunteers worked for hours removing invasive weeds and cleaning up illegally dumped trash from open spaces for KTMB's 10th annual Great Community Cleanup. Over 76 tons of trash was removed from 16 different sites along with 611 tires recovered (see attached).



### EHS 2016 Inspections / Permits / Plan Review

	JAN 2016	FEB 2016	MAR 2016	APR 2016	MAY 2016	Mo. Avg
Child Care	8	6	7	5	15	8
Complaints	103	68	103	93	97	93
Food	217	317	454	369	363	344
General*	38	73	125	137	296	134
Developmental Review Numbers	20	26	27	34	41	30
Plan Construction Inspection (Commercial)	11	9	6	12	25	13
Construction Plans Received (Commercial)	35	31	63	41	52	44
Plan Review (Residential - Septic/Well)	54	35	63	76	59	57
Residential Septic/Well Inspections	58	67	94	110	86	83
Temporary Foods/Special Events	24	26	45	106	120	64
Well Permits	11	7	20	20	15	15
Waste Management	19	29	16	16	14	19
<b>TOTAL</b>	<b>563</b>	<b>663</b>	<b>960</b>	<b>978</b>	<b>1,183</b>	<b>903</b>

\* **General Inspections Include:** Invasive Body Decorations; Mobile Homes/RVs; Public Accommodations; Pools; Spas; RV Dump Stations; and Sewage/Wastewater Pumping.

## A CDC study in five states found at least one violation in 80 percent of the pools inspected (Photo: Geralt / MGN)

ATLANTA (AP) -- A government survey has found at least one violation in nearly 80 percent of public pool and hot tub inspections from 2013 in five states.



The Centers for Disease Control says it analyzed more than 84,000 inspections of nearly 49,000 public venues in Arizona, California, Florida, New York and Texas, the five states with the most public pools.

The CDC says 1 in 8 inspections resulted in immediate closure because of serious health and safety violations. It says 1 in 5 kiddie pools were shut down.

The CDC says the most common violations involved improper pH levels, safety equipment and disinfectant concentration. The agency says nearly a third of local health departments don't regulate or inspect public pools. It says swimmers should be cautious before entering the water.

## Cleanup' on April 30

By Jaclyn Shearer Thursday, April 28th 2016

RENO, Nev. (News 4 & Fox 11) — It costs \$2 to recycle a tire. By comparison, it costs Keep Truckee Meadows Beautiful 50-60 dollars to clean up illegally dumped tires.

In fact, Waste Management also offers plenty of opportunities to dump large items for free.

KTMB is hosting an event on Saturday, April 30 from 8 a.m. to noon to clean up some of those tires, and also to raise awareness about illegal dumping.

The Great Community Cleanup is a 10 year tradition, hosted by KTMB, The Truckee River Fund, Washoe County Sheriff's Office, and other great organizations. Each year it brings in hundreds of volunteers to do years of good for our local community at various sites.

Christie Cakiroglu, the Executive Director of Keep Truckee Meadows Beautiful, took us around the Peavine project site ahead of Saturday's cleanup to take a look at the damage caused by illegal dumping.

### Keep Truckee Meadows Beautiful Great Community Cleanup Removes 76 Tons of Trash

KTVM, Channel 2 Posted: Apr 30, 2016 12:22 PM PDT <em class="wnDate">Saturday, April 30, 2016 3:22 PM EDT  
By Meghan Breen

Over 700 volunteers participated in the 10th annual Keep Truckee Meadows Beautiful's Great Community Cleanup Saturday.

The KTMB Great Community Cleanup is an annual event that focuses on the beautification of the open spaces surrounding the Truckee Meadows. Volunteers helped to clean illegal dump sites and remove invasive weeds before they bloom and spread.

Preliminary results show that over 76 tons (152,000 pounds) of trash and invasive weeds were removed during the event.

KTMB's Great Community Cleanup, requires months of coordination, over 30 public and private partners, heavy equipment, and tens of thousands of dollars to put it on.

"This event is instrumental in lessening illegal dumping and removing invasive weeds before they bloom and spread" said Christi Cakiroglu, Executive Director for KTMB. "This is truly a community-driven event and it's great to see so many volunteers and partners come out to keep our open spaces clean. The tough part is that there is still so much more trash out there. These cleanups are costly and we can only do so much with limited funding."

For 10 years, KTMB has coordinated the Illegal Dumping Task Force, a group of over 50 vested partners including the Washoe County Sheriff's Office, municipalities, recreating groups, and private citizens. They meet regularly to discuss current illegal dumping sites, to support KTMB's Great Community Cleanup and work on long-term solutions to prevent illegal dumping. Though the issue of illegal dumping is not easily solved, progress has been made through increased patrolling, cleanups and education.

KTMB's Great Community Cleanup is made possible with help from the Truckee River Fund, NV Energy Foundation, Intuit, Washoe County Health District, Waste Management, City of Reno, City of Sparks, Sun Valley General Improvement District, Washoe County, and the Washoe County Sheriff's Office.

## Slide the City mired with delays but generally a fun time



Slide the City took over a few city blocks down the Ralston Street hill. An estimated 4,000 people slid down the three-lane waterslide on Ralston Street throughout June 4. (Photo: mhigdon@rgj.com 5:54 a.m. PDT June 7, 2016)

Slide the City dropped its 1,000-foot, three-lane waterslide into Reno for a seven-hour summertime extravaganza Saturday. But not without a few issues, making the ride for some, a little bumpy.

Early in the afternoon, Slide the City's filter pump, which recirculates water from the bottom of the slide back to the top, broke and Washoe County Health District officials shut the slide down. Without clear information about the length of the delay, people in line started getting rowdy. Some staff members told people the delay could last 45 minutes to three hours. People then demanded refunds and started leaving.

Slide the City is offering refunds to anyone who paid and did not get to slide due to the delays. They are asking people to email [info@slidethecity.com](mailto:info@slidethecity.com) to deal with refunds.

About an hour later, the giant pool filter was repaired and the remaining sliders rushed the slide, causing hilarious but also injurious pile ups on the now-dry slide. One person stopped on the slide, hunched over in pain, causing another delay until REMSA EMTs took him away. After that, staff made sure the entire slide was wet before, the hoses were spraying and people could go down in an orderly fashion before starting up again.

After the delays ended, the lines piled back up for the rest of the day and posts all over social media showed that people had a good time.

## Northern Nevada to have bad mosquito season after rainy winter

By Ben Margiott Tuesday, June 7th 2016

Mosquitoes are likely to be out in full force this summer in Northern Nevada.

RENO, Nev. (News 4 & Fox 11) — If you've already stocked up on sunscreen for summer, you might want to head back to the store for mosquito repellent.

Northern Nevada is likely to experience a bad mosquito season after having a normal rain year, according to local health officials.

Mosquitoes need standing water to reproduce, and the rainy season has left much more standing water than in previous years because of the extreme drought.

The manager of Washoe County's vector-borne disease prevention program, Jim Shaffer, said his suspicions have been backed up by numerous comments from residents much earlier than usual.

"We began the season back in March and we've had calls earlier than normal, probably two weeks earlier," Shaffer said.

Jeff Knight, the Nevada State Entomologist, said standing water is one of a few different ways a good rainy season actually contributes to more bugs in the summer.



"We'll also see increases probably in some of the insects because our vegetation is going to be much better," Knight said.

The county began its mosquito abatement program late last week when it sprayed 500 acres of land in Lemmon Valley, Kiley Ranch, South Meadows and Damonte Ranch. But the department won't be able to spray as much as it did last year.

"We had two human cases of West Nile virus last year and because of that, we put a lot of effort last season to go ahead and at least control those mosquitoes in the larval stage and because of that effort, we put all that product in last year and very little for that second application this spring," Shaffer said.

County officials could be playing catch-up all summer.

"If people are going to be outside, they're going to have to protect themselves, long-sleeve shirts, pants, wear repellent," Shaffer said.

Although there will be many more mosquitoes than in previous years, the Zika virus does not concern officials because northern Nevada does not have either of the two Zika-carrying mosquito species.

If you are seeing more mosquitoes on your property, call the Washoe County vector-borne disease prevention program at (775) 785-4599.

## POLL: Are you noticing more bugs around your house this year compared to previous years?

By News 4 Digital Staff Tuesday, June 7th 2016



The poll question on Tuesday, June 7, 2016, was: Are you noticing more bugs around your house this year compared to previous years?

RENO, Nev. (News 4) — All the rainfall this winter helped out our drought situation but might bring more mosquitoes to the area this summer.

The Washoe County Health District said it has been receiving more calls than usual this time of year from residents reporting mosquitoes.

The department did begin its mosquito abatement program last Thursday, spraying 500 acres in Lemmon Valley, Kiley Ranch, South Meadows and Damonte Ranch. But they will be spraying less this year so they expect to be playing catch-up this summer.

If you are seeing more mosquitoes than usual, you're encouraged to call the Washoe County Health District at (775) 785-4599.

Ben Margiott will have more on this story on News 4 at 6 p.m. on Tuesday, June 7.

## Washoe County Health District to begin mosquito abatement on June 2

By News 4-Fox 11 Digital Staff Wednesday, June 1st 2016

Mosquito abatement will begin in multiple areas of the Truckee Meadows on Thursday, June 2, 2016.

RENO, Nev. (News 4 & Fox 11) — The Washoe County Health District Vector-Borne Disease Program will begin mosquito abatement in the early morning hours of Thursday, June 2, according to a news release.

Officials said this first seasonal helicopter larviciding application will cover the Lemmon Valley, Kiley Ranch, South Meadows and Damonte Ranch areas to prevent mosquito hatching over approximately 500 acres.

Subsequent applications are planned for some time in the first two weeks of July, August and September, the statement read.

Health officials report the applications will consist of Vectolex, a biological larvicide that naturally occurs in the environment. They said this product targets mosquito larvae and does not affect humans, fish, water fowl or other organisms such as bees.

"The Health District has started disease surveillance mosquito trapping, targeting species of [mosquitoes] that transmit diseases including trapping methods for detection of [mosquitoes] capable of transmitting the Zika virus, if they appear in the Truckee Meadows area," officials said.

The Health District said residents can help prevent an increase in the mosquito population by taking these steps:

- Clear the yard area of any free-standing water that may become a mosquito breeding-ground
- Wear long sleeves and long pants in mosquito prone areas
- Use mosquito repellent such as Deet, oil of lemon eucalyptus, Picaridin, IR3535, or other natural products
- Repair any window screens that provide entry for mosquitoes
- Vaccinate horses for Western equine encephalitis (WEE) and West Nile virus (WNV)

For more information, call the Vector Borne Disease Program at (775) 785-4599 or [CLICK HERE](#).

## A look at mosquito abatement from the air

By Terri Russell

Posted: Thu 1:55 PM, Jun 02, 2016 |

Updated: Fri 9:48 AM, Jun 03, 2016

**RENO, Nev (KOLO) Health** officials confirmed the week of May 31, 2016 a woman infected with the Zika Virus gave birth to a baby with Microcephaly. It all happened in New Jersey where the mother, from Honduras, came to this country for care.



Zika is spread by mosquitos, which makes Washoe County's first-of-the-season mosquito abatement application a welcome sight. KOLO 8 News Now's Terri Russell caught a ride in the helicopter to get a bird's **eye** view of where those mosquitoes are hiding.

The helicopter landed in a field on Kiley Ranch, **fresh** from spreading an ecologically-friendly larvicide in Lemmon Valley. The pilot, Khaythan Chamerlain, picked me up so I could get a front row seat as the marshes in Kiley Ranch undergo the same treatment:

"It's like you have a swimming pool; if you didn't take care of it last year and you don't take care of it this year, you are going

to have the same **problem**," Chamerlain.

The larvicide called Vectolex specifically targets larvae, and **prevents** them from becoming adult mosquitoes.

With budget constraints, Washoe County Vector **Control** says there will be fewer abatement events this summer—about one a month.

We make several passes where birds, fish, and even a coyote are down below. The pilot knows exactly where to place the pellets, because prior to this flight, crews on the ground surveyed the area, even capturing mosquitoes looking for those carrying **disease**.

West Nile **Virus**, which is in the area, is certainly one disease they look for. But with the Zika Virus first and foremost on many people's minds, the specific mosquito that carries that virus is also looked for in traps below.

The mosquito, known to carry Zika, does not **live** in northern Nevada. But monitoring is ongoing.

"We actually take those mosquitoes back to the lab and sort them and identify them, and that triggers us to go ahead and come in and do more surveillance in the area in terms of inspection, and if we have to larvicide, we larvicide. And if we have to knock down the mosquitoes we knock down the mosquitoes," says Jim Shaffer with vector control

In all, the treatment at Kiley Ranch takes about 30 minutes. That includes a stop to replenish the helicopter with pellets.

With the job done here, we head to Rosewood Lakes to kill the bloodsuckers, before they make it to your house.

## ***Health District begins mosquito abatement***

*Larviciding will cover 500 acres in Lemmon Valley, Kiley Ranch, South Meadows, and Damonte Ranch*

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Media Release

[www.washoecounty.us/health](http://www.washoecounty.us/health)

**RENO, NV** – The Washoe County Health District Vector-Borne Disease Program will conduct the first seasonal helicopter larviciding application in the early morning hours of June 2, 2016, with subsequent applications planned for some time in the first two weeks of July, August and September. The larviciding will cover the Lemmon Valley, Kiley Ranch, South Meadows, and Damonte Ranch areas to prevent mosquito hatching over approximately 500 acres.

Health officials report the applications will consist of Vectolex, a biological larvicide that naturally occurs in the environment. This product is target specific, affecting mosquito larvae with no affect to humans, fish, water fowl or other non-target organism's such as bees.

The Health District has started disease surveillance mosquito trapping, targeting species of mosquitos that transmit diseases including trapping methods for detection of mosquitos capable of transmitting the Zika virus, if they appear in the Truckee Meadows area.

Health officials remind people that they should take steps to avoid being bitten by mosquitos. During the spring and summer months, to prevent an increase in the mosquito population in and around their homes, people should:

- Clear the yard area of any free-standing water that may become a mosquito breeding-ground
- Wear long sleeves and long pants in mosquito prone areas
- Use mosquito repellent such as Deet, oil of lemon eucalyptus, Picaridin, IR3535, or other natural products
- Repair any window screens that provide entry for mosquitos
- Vaccinate horses for Western Equine Encephalitis (WEE) and West Nile Virus (WNV)

If you are experiencing biting mosquitos call the Vector Borne Disease Program at 785-4599, and staff will investigate the source of these adult mosquitos. The Vector Borne Disease Program also has mosquito fish available for ponds, troughs and other impoundments containing water which will prevent mosquito larvae from hatching into biting adult mosquitos.

## ***Proposed Amendments to the Regulations of the Washoe County District Board of Health Governing Food Establishments***

*Proposed updates to the current food establishment regulations*

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Reno, NV – The Environmental Health Services (EHS) Division of the Washoe County Health District (WCHD) would like to invite you to attend a workshop to learn about the proposed amendments to our 2015 regulations governing food establishments. The WCHD is proposing deletion of sections 240.060 and 240.065 related to grades and grading of food establishments , addition of provisions, as well as minor edits and formatting corrections. The purpose of the workshops is to provide businesses and individuals affected by these regulation amendments additional information and opportunity for input. Feedback collected at these workshops will be used to develop recommendations for the District Board of Health (DBOH), who will then be notified of the proposed changes and will subsequently hold a Public Hearing where they may take action. The public will have the opportunity to speak at these meetings.

The workshops will be held on the following dates:

**Tuesday, June 7, 2016 @ 5:30 PM**

**Thursday, June 9, 2016 @ 1:30 PM**

Location: South Auditorium of the WCHD (Building B) at 1001 E. Ninth Street, Reno, Nevada

**The Notice of Proposed Changes will be presented to the DBOH on Thursday, July 28 @ 1:00 PM.**

Location: Board of County Commissioners Chambers at 1001 E. Ninth Street, Reno, Nevada

**The Public Hearing will be held as part of the DBOH monthly meeting on Thursday, August 25, 2016 @ 1:00 PM.**

Location: Board of County Commissioners Chambers at 1001 E. Ninth Street, Reno, Nevada

The proposed regulation changes are available

at <https://www.washoecounty.us/health/files/regulations/ehs/FoodRegsInspectionFormUpdateMay2016.pdf>

For more information on food safety and upcoming workshops please email [foodsafety@washoecounty.us](mailto:foodsafety@washoecounty.us), and follow on us on Facebook @ <https://www.facebook.com/wchdehs>.

***Food service workers and general public urged to attend food safety workshops***  
*Proposed changes to be discussed in public forums*

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Media Release

[www.washoecounty.us/health](http://www.washoecounty.us/health)

Reno, NV – The Environmental Health Services Division of the Washoe County Health District (WCHD) has slated free workshops and public hearings beginning Tuesday, June 7, 2016, concerning proposed amendments to the 2015 Regulations Governing Food Establishments.

Primarily, the Health District is proposing deletion of sections 240.060 and 240.065 related to grades and grading of food establishments. The addition of other provisions, as well as minor edits and formatting corrections will also be addressed at the meetings.

The purpose of the workshops is to provide businesses and individuals affected by these regulation amendments additional information and opportunity for input. Feedback collected at these workshops will be used to develop recommendations for the District Board of Health (DBOH), who will then be notified of the proposed changes and will subsequently hold a Public Hearing where they may take action. Members of the food service industry and the general public are encouraged to attend and will have the opportunity to speak at these meetings.

The **free workshops** will be held on the following dates:

- Tuesday, June 7, 2016 @ 5:30 PM
- Thursday, June 9, 2016 @ 1:30 PM

Both workshops will be held in the South Auditorium of the WCHD, at 1001 E. Ninth Street, Building B, Reno, Nevada

The **Notice of Proposed Changes** will be presented to the DBOH on Thursday, July 28 @ 1:00 PM.

The DBOH meeting will be held in the Board of County Commissioners Chambers at 1001 E. Ninth Street, Building A, Reno, Nevada

The **Public Hearing** will be held as part of the DBOH monthly meeting on Thursday, August 25, 2016 @ 1:00 PM.

This meeting will also be held in the Board of County Commissioners Chambers at 1001 E. Ninth Street, Building A, Reno, Nevada

The proposed regulation changes are available

at <https://www.washoecounty.us/health/files/regulations/ehs/FoodRegsInspectionFormUpdateMay2016.pdf>

For more information on food safety and upcoming workshops please email [foodsafety@washoecounty.us](mailto:foodsafety@washoecounty.us), and follow on us on Facebook @ <https://www.facebook.com/wchdehs>.

**Epidemiology and Public Health Preparedness  
Division Director Staff Report  
Board Meeting Date: June 23, 2016**

**DATE:** June 14, 2016  
**TO:** District Board of Health  
**FROM:** Randall Todd, DrPH, EPHP Director  
 775-328-2443, [rtodd@washoecounty.us](mailto:rtodd@washoecounty.us)  
**Subject:** Program Updates for Communicable Disease, Public Health Preparedness, and  
 Emergency Medical Services

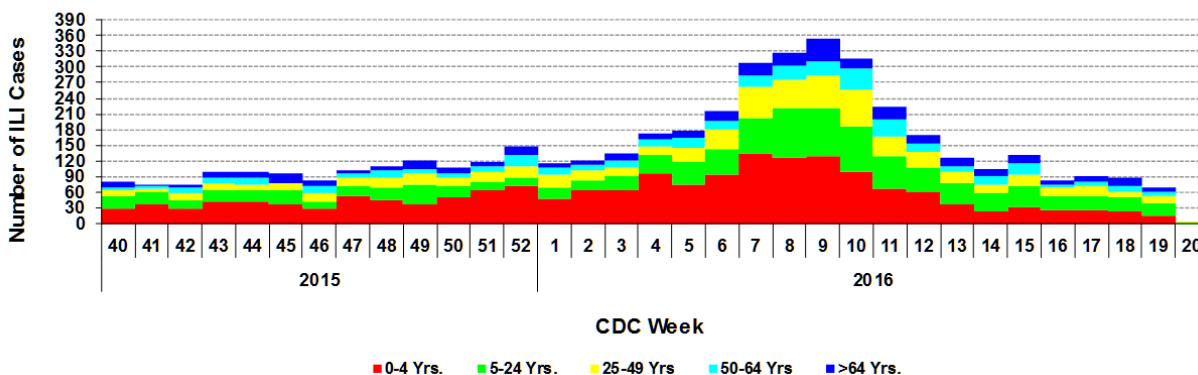
**Communicable Disease (CD) –**

**Influenza Surveillance** – For the week ending May 21, 2016 (CDC Week 20) 12 participating sentinel providers reported a total of 4 patients with influenza-like-illness (ILI). The percentage of persons seen with ILI by the 12 providers was 0.5% which is below the regional baseline of 2.6%. Also during week 20, the percentage of visits to U.S. sentinel providers due to ILI was 1.3%. This percentage is below the national baseline of 2.1%. On a regional level, the percentage of outpatient visits for ILI ranged from 0.5% to 2.5%.

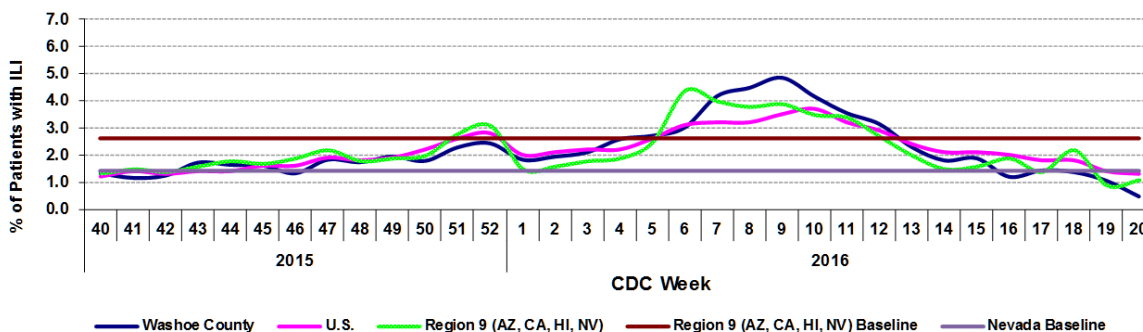
Seven death certificates were received for week 20 listing pneumonia (P) or influenza (I) as a factor contributing to the cause of death. The total number of deaths submitted for week 20 was 110. This reflects a P&I ratio of 6.4% which is below the epidemic threshold set by CDC for week 20 at 6.6%. The national P&I ratio for week 20 was below the epidemic threshold at 6.0%. The total P&I deaths registered to date in Washoe County for the 2015-2016 influenza surveillance season is 252. This reflects an overall P&I ratio of 8.5% (252/2976).

Influenza season has officially come to a close. Week 20 was the last week of the 2015-2016 season. Hospitals will, however, continue to report their ILI data throughout the off season. The official 2016-2017 season will begin on October 2, 2016.

**Number of ILI Cases by Week and Age Group Reported by Sentinel Providers, Washoe County Influenza Surveillance, 2015-2016.**



**Proportion of Patients Seen with ILI by Sentinel Physicians, Washoe County Influenza Surveillance, 2015-2016.**



Data source for U.S. ILI and Regional Baseline: CDC Flu View Weekly Influenza Surveillance Report.

**Zika Virus Disease Evaluation and Testing** – As of June 9, 2016, 19 individuals have been referred by local healthcare providers for an evaluation of possible Zika virus infection. Of these 19 individuals, 11 were pregnant women with travel histories to areas with ongoing Zika transmission. One of nine symptomatic persons had a laboratory confirmed Zika virus test. The case was a female adult, not pregnant and recovered within a week. One serology result is pending at CDC. All other serology results have been negative.

## Public Health Preparedness (PHP)

### General

- The PHP program hosted the Statewide Public Health Partner’s Meeting on May 26. Agenda items included Zika funding, Ebola Funding Continuance, Upcoming Training and Exercise Planning Workshop, Status of requesting CMS (Centers for Medicare and Medicaid Services) data from the federal government- to obtain special needs population data during an emergency, Realignment of ASPR HPP Capabilities, Crisis Standards of Care, Jurisdictional Risk Assessment and the Senior Advisory Committee for Public Health Preparedness.
- The Medical Reserve Corps (MRC) volunteer program participated in the “Family Health Festival” sponsored by Truckee Meadows Healthy Communities and was held in Miguel Ribera Park, May 25th. MRC licensed medical volunteers provided free blood pressure screening examinations and distributed emergency preparedness and public health educational information. The goal of the event was to provide information on food security, access to healthcare, workforce development and education, housing and safe neighborhoods information, and onsite services to families and individuals in the 89502 neighborhood. Truckee Meadows Healthy Communities was successful in meeting its goal.

- The Public Health Preparedness Emergency Response Coordinator:
  - Completed public outreach for the Medical Countermeasures Dispensing plan and finalized the planning documents.
  - Facilitated discussion between the Reno-Sparks Indian Colony (RSIC) and the Washoe County Health District resulting in the signing of a Memorandum of Understanding that provides for the use of tribal facilities as Points of Dispensing during public health emergencies. The agreement also provides for continued collaboration and regional partnership between RSIC and the Washoe County Health District by increasing infrastructure and resource sharing. The agreement was signed on June 1, 2016 during a ceremony at the Reno-Sparks Tribal Health Center.
  
- The Public Health Emergency Response Coordinator for Healthcare:
  - Conducted full-scale infectious disease exercise, Operation Unicorn, on June 9<sup>th</sup>. The scenario was as follows: A Veteran possibly infected with the Ebola virus presented at East Campus VA clinic shortly after her return from Sierra Leone and her roommate checked herself into Saint Mary's Medical Center shortly after, creating a host of clinical, administrative, and infection control challenges. The following organizations participated in the exercise: Saint Mary's Regional Medical Center, Nevada State Public Health Laboratory, REMSA, Northern Nevada Medical Center, Reno Police Department, Washoe County Health District, Renown Regional Medical Center, Renown South Meadows Medical Center, Tahoe Pacific Hospital, Washoe County Emergency Management, Nevada Division of Public and Behavioral Health, and VA Sierra Nevada Health Care System. The After Action Report/Improvement Plan will be completed by June 30<sup>th</sup> and reviewed by the Inter-Hospital Coordinating Council on July 8<sup>th</sup>.
  - Attended and presented at the 2016 Rural Preparedness Summit. The presentation was on the Regional Medical Surge Plan, which is an annex to the State plan.
  - Presented the Washoe County Disaster Behavioral Health Annex to the Behavior Health Coalition and lessons learned from the tabletop in May.
  - The program was able to collect 200 in-person Crisis Standards of Care surveys and distributed over 20,000 flyers with a link and QR code to the online survey. All surveys are to be completed by July 20<sup>th</sup>.
  - Completed the assessment project with 22 skilled nursing, rehabilitation, memory care, and assisted living facilities in Washoe County. For this project the program only focused on facilities with 20 or more beds. The program will continue phase two of the project,



working with facilities with less than 20 beds. In addition to the assessment, the program has revised the Alternate Care Site Guideline for SNFs.

- Completed the dialysis center assessment.
- Completed the Quality Improvement Project
- Facilitated the Isolation and Quarantine Tabletop Exercise on June 17<sup>th</sup>. The scenario was as follows: a student returning to UNR from South Africa where a plague outbreak has been reported is diagnosed with pneumonic plague.

### **Emergency Medical Services (EMS) –**

The EMS staff attended a regional Disaster Behavioral Health Tabletop exercise on May 18<sup>th</sup>. The exercise facilitated a healthy multi-disciplinary discussion about behavioral health and how all those involved can enhance response to these types of needs during a disaster.

The EMS Coordinator hosted an Initial Planning Meeting on May 19<sup>th</sup> to begin organizing a full-scale evacuation exercise. The exercise will be held in October 2016 and Tahoe Pacific Hospitals – Meadows will conduct a complete facility evacuation using the Mutual Aid Evacuation Annex (MAEA) and the DMS Evac1-2-3 patient tagging and tracking system.

The EMS Manager participated in the EMS State Regulations workshop on May 23<sup>rd</sup>. State EMS is updating their regulations, fees and Nevada Administrative Code. The workshops provide a mechanism by which the EMS community can give input into the regulations. The next meeting is scheduled for June 29<sup>th</sup>

The application process for a Heart Safe Community designation continues. The region has met monthly and is within one month of applying. The sustainment plan is being worked through so that the information obtained can stay current.

EMS staff participated in the Airport tabletop exercise on May 26<sup>th</sup>. The exercise had members of the entire response community that would respond during an airport event. The scenario reviewed was realistic, allowing responders to work through the resource utilization process. EMS staff participated in patient tracking and family assistance center discussions.

The EMS Coordinator presented at Tahoe Pacific staff's annual disaster training and tabletop exercise on May 31<sup>st</sup>. This was an opportunity to provide information about the countywide planning and response conducted by the Health District for both MCIs and healthcare evacuations.

The EMS Coordinator, Renown Emergency Manager and REMSA personnel conducted training for more than 30 nurses on the Mutual Aid Evacuation Annex (MAEA) and the patient tagging and tracking system. The participants had an opportunity to complete the tags and walk through the processes of an evacuation of 20 "patients."

EMS staff presented to the Prehospital Medical Advisory Committee (PMAC). The presentation focused on information obtained from the EMS Today conference staff attended in February. PMAC is comprised of the medical directors for the area EMS agencies, emergency department physicians, community physicians, and guests.

**REMSA Percentage of Compliant Responses  
 FY 2015 -2016**

Month	Zone A	Zone B	Zone C	Zone D	Zones B, C and D	All Zones
July 2015	92%	99%	100%	100%	99%	92%
August 2015	92%	95%	94%	100%	95%	92%
September 2015	91%	96%	97%	100%	96%	92%
October 2015	91%	95%	92%	100%	94%	92%
November 2015*	92%	96%	97%	100%	96%	92%
December 2015*	92%	97%	97%	100%	97%	92%
January 2016*	92%	95%	97%	100%	96%	92%
February 2016*	92%	96%	96%	100%	96%	93%
March 2016*	92%	98%	96%	100%	97%	92%
April 2016*	94%	99%	100%	100%	99%	94%
May 2016*	94%	97%	98%	100%	97%	95%
<b>YTD</b>	<b>92%</b>	<b>96%</b>	<b>97%</b>	<b>100%</b>	<b>97%</b>	<b>93%</b>

\* Compliance calculations include exemptions.

**REMSA 90<sup>th</sup> Percentile Responses**

Month	Zone A 8:59	Zone B 15:59	Zone C 20:59	Zone D 30:59
July 2015	8:34	13:18	17:00	N/A*
August 2015	8:32	12:46	19:51	N/A*
September 2015	8:53	13:06	18:23	18:22
October 2015	8:39	14:24	19:14	N/A*
November 2015	8:37	14:03	18:11	N/A*
December 2015	8:42	12:31	17:39	N/A*
January 2016	8:48	14:50	18:36	N/A*
February 2016	8:34	13:05	17:52	N/A*
March 2016	8:42	12:19	17:26	N/A*
April 2016	8:11	11:45	17:14	N/A*
May 2016	7:59	11:35	15:38	15:30

\*There were 5 or less calls per month in Zone D, therefore a statistically meaningful 90<sup>th</sup> percentile analysis cannot be conducted. However, no calls in Zone D exceeded the 30:59 time requirement.

**Performance with NFPA Standards – May 2016**

The EMS Oversight Program is going to continue to measure partner responses against the National Fire Protection Agency established standards. Performance measures will be explored in the Quarterly EMS Report. However, per the request of Board members, the ambulance assignment performance measure is included below. While “Clock Start” is not an NFPA standard, it impacts the ability for an ambulance to be assigned if the dispatcher is unable to obtain the appropriate information.

	Total and % of Calls for Month*		Number and % of calls with Clock start within 60 seconds		Number and % of calls with Clock Start within 90 seconds		Number and % of calls with Clock start within 120 seconds		Number and % of calls with Clock Start over 121 seconds	
All calls	<b>5504</b>	<b>100.0%</b>	<b>4970</b>	<b>90.3%</b>	<b>5402</b>	<b>98.1%</b>	<b>5469</b>	<b>99.4%</b>	<b>35</b>	<b>0.6%</b>
Priority 1	2057	37.4%	1832	89.1%	2012	97.8%	2040	99.2%	17	0.8%
Priority 2	2360	42.9%	2159	91.5%	2317	98.2%	2345	99.4%	15	0.6%
Priority 3	962	17.5%	867	90.1%	949	98.6%	959	99.7%	3	0.3%
Priority 9	125	2.3%	112	89.6%	124	99.2%	125	100.0%	0	0.0%

\*1 call was missing Clock Start and not included in the table above

The previous table shows the time lapse between the call being answered in the REMSA Dispatch center and the “clock start” variable, used for compliance. The clock starts when the citizen answers three pieces of information: address phone number and citizen identified chief compliant.



	Total and % of Calls for Month*		Number and % of calls with Assignment within 90 seconds		Number and % of calls with Assignment within 120 seconds		Number and % of calls with Assignment over 120 seconds	
All calls	<b>5505</b>	<b>100.0%</b>	<b>5383</b>	<b>97.8%</b>	<b>5454</b>	<b>99.1%</b>	<b>51</b>	<b>0.9%</b>
Priority 1	2057	37.4%	2020	98.2%	2043	99.3%	14	0.7%
Priority 2	2361	42.9%	2303	97.5%	2337	99.0%	24	1.0%
Priority 3	962	17.5%	938	97.5%	950	98.8%	12	1.2%
Priority 9	125	2.3%	122	97.6%	124	99.2%	1	0.8%

This chart shows the time lapse between the call being answered in the REMSA Dispatch center and an ambulance being assigned to the call.

NFPA Standard:

Assignment Made within 90 seconds - 90% standard

Assignment Made within 120 seconds - 99% standard

Assignment over 120 seconds

**District Health Officer Staff Report  
Board Meeting Date: June 23, 2016**

**TO:** District Board of Health

**FROM:** Kevin Dick, District Health Officer  
(775) 328-2416, kdick@washoecounty.us

**SUBJECT:** District Health Officer Report – Strategic Planning, Prescription Drug Abuse, Recommendations to the Legislative Committee on Health Care, Community Health Improvement Plan, Truckee Meadows Healthy Communities (TMHC), Quality Improvement, Other Events and Activities and Health District Media Contacts

Strategic Planning

Following the DBOH adoption of the 2017-2020 Strategic Plan, staff worked with OnStrategy to develop an action plan to identify and track specific initiatives that will be undertaken to contribute to the desired outcomes identified for the Strategic Priorities and Goals. Progress on the initiatives will be tracked and reported. An Execution Management Guide was developed to assist with discussing and tracking progress through Health District management team meetings, and Board meetings.

Prescription Drug Abuse

Another meeting of the regional opioid response group took place at REOC on June 1. Join Together Northern Nevada has organized a Town Hall Meeting on Prescription Drug Abuse in our Community that will take place July 12, at UNR in conjunction with the Community Opioid Response Alliance. Governor Sandoval announced a Prescription Drug Abuse planning session which will serve as the precursor to a two-day Summit to be held in Las Vegas at the end of August, 2016. The planning session will take place on June 21 from 9:00 a.m. to 3:00 p.m. in the Legislative Building in Carson City.

Recommendations to the Legislative Committee on Health Care

I worked with the Southern Nevada Health District, Carson City Health and Human Services, and the Nevada Chapter of the American Public Health Association to develop joint recommendations to the Legislative Committee on Health Care for consideration during their August 2016 working meeting. The recommendations address:

- Height and weight measurement in schools
- Fluoridation of public water systems in counties with a population of over 400,000
- Adding E-cigarettes to the Nevada Clean Indoor Air Act and taxing them in a manner equivalent to combustible cigarettes
- Increasing funding for tobacco control
- Establishing a block grant program to provide non-categorical State funding to local health authorities.
- Instituting insurance policy surcharges to provide funds for EMS and trauma system oversight, and trauma prevention efforts.

### Community Health Improvement Plan (CHIP)

CHIP Workgroups are researching strategies to move forward with CHIP implementation. An update of each workgroup is listed below:

The **CHIP Access to Healthcare and Social Services Workgroup's** current priority is Objective 1.3 of the CHIP: By December 31, 2018, increase the percentage of Washoe County residents who have a usual primary care provider.

During the May 2016 meeting, the workgroup identified "lack of health insurance" as the first barrier the group would like to address with regard to ensuring residents have access to primary care. During the meeting, State Medicaid provided a brief presentation of Medicaid in general, and then the workgroup worked to complete Medicaid applications. Much discussion and many questions arose regarding the Medicaid application and process. Therefore, a more lengthy presentation and discussion will take place at the June 2016 workgroup meeting as it relates to Medicaid. Furthermore, the co-chairs of the workgroup, Terri Lightfoot and Sara Dinga, have been meeting with insurance companies who currently have, and may potentially receive in the near future, State Medicaid contracts in order to learn what the insurance companies are doing to reach those without insurance.

The Workgroup hopes to brainstorm solutions to address the barrier of "lack of health insurance" once more information is gathered regarding the Medicaid process.

The **CHIP Food Security Workgroup's** current priority is Objective 8.5 of the CHIP: By December 31, 2016, develop a Washoe County Community Garden Plan to identify goals, objectives, and strategies for Community Gardens in low-income communities.

The Workgroup has researched what is currently occurring in Washoe County related to school and community gardens and who the key players are. It was found that the primary barrier to keeping community and school gardens running is the lack of a paid coordinator.

The Workgroup participated in the Family Healthy Festival on May 25<sup>th</sup> to provide: gardening instructions, free herbs and vegetables, fresh food education, and recipes, in an effort to raise awareness and provide education related to fresh produce. The Workgroup's booth was by far the most successful booth outside of the Food Bank of Northern Nevada's mobile pantry. Family Health Festival participants were engaged with booth activities and enjoyed taking home free herbs and vegetables after learning some gardening tips.

The **CHIP Education Workgroup** has chosen to prioritize strategies around youth behavioral health issues, specifically those issues related to bullying, depression, and suicide, as the JTNN coalition is already focused heavily on substance abuse issues. The CHIP Education Workgroup and the CHIP Behavioral Health Workgroup have therefore joined forces to begin an asset mapping process for youth in our community as it relates to bullying, depression, and suicide. Several youth from different Washoe County schools and zip codes have been invited to attend the June meeting to assist in the asset mapping process.

### Quality Improvement

The Q-Team is currently working to complete the FY 2016-2017 Quality Improvement Plan.

Subject: District Health Officer Report

Date: June 23, 2016

Page 3 of 3

### Truckee Meadows Healthy Communities Family Health Festival

The fourth Family Health Festival took place on May 25<sup>th</sup> from 1:00-4:00 pm at Miguel Ribera Park. Even with the downpour, it was estimated that 200-250 people attended the May Family Health Festival. The next Family Health Festival is scheduled for July 27<sup>th</sup> from 1:00-4:00 pm at Miguel Ribera Park, and because kids will be out of school, the estimated number of attendees is expected to be 500 or more.

### Other Events and Activities

Attended REMSA Board meeting on May 27.

Participated in a regional meeting to coordinate on issues related to homeless encampments on the Truckee River on May 31.

Signed the Memorandum of Understanding with the Reno-Sparks Indian Colony during a ceremonial event attended by members of the Colony and County officials on June 1.

Chaired a TMHC Steering Committee meeting on June 1.

Participated in the Nevada Health Authorities Call on June 2.

Met with Manager Slaughter on June 3.

Chaired a TMHC 89502 Planning Subcommittee meeting on June 7.

Participated in the Accela Regional Project - Management Oversight Group Quarterly meeting June 7.

Attended Department Heads meeting June 8.

Met with EHS staff and the NDEP Administrator, Deputy Administrator and Safe Drinking Water Bureau Chief on June 13.

Met with the Division Directors on June 1 and June 22. I meet regularly with the Division Directors and ODHO staff on an individual basis.

**Health District Media Contacts: May 2016**

<u>DATE</u>	<u>MEDIA</u>	<u>REPORTER</u>	<u>STORY</u>
5/31/2016	UNIVISION	Anya Salgado	Pool Inspections - Ulibarri
5/31/2016	KRNV CH4 - NBC Reno	Joe Hart	Garbage - Ulibarri
5/25/2016	KRNV CH4 - NBC Reno	Joe Hart	Garbage - Ulibarri
5/21/2016	KOLO CH8 - ABC Reno	Ed Pierce	Lead Poisonimngs - Ulibarri
5/19/2016	KKOH Radio 780AM - CNN Reno	Ross Mitchell	Poison Workshops - Ulibarri
5/18/2016	KTVN CH2 - CBS Reno	Amanda Ketchledge	Poison Workshops - Ulibarri
5/18/2016	UNIVISION	Anya Salgado	Food Safety Workshops - Bryant
5/17/2016	KTVN CH2 - CBS Reno	Arianna Bennett	Mosquitos - Shaffer
5/17/2016	KKOH Radio 780AM - CNN Reno	Ross Mitchell	Bike Week - Ulibarri
5/17/2016	KKOH Radio 780AM - CNN Reno	Daniella Zannino	Bike Week - Hunter
5/16/2016	KOLO CH8 - ABC Reno	Terri Russell	Bike Week - Ulibarri
5/10/2016	America Matters Media/Radio	Jay Wilson	Northern Nevada Outreach Team - Howell
5/9/2016	KUNR 88.7 FM - PBS Reno	Julia Richey	Hepatitis C - Todd
5/3/2016	KOLO CH8 - ABC Reno	Paul Harris	Opiods - Ulibarri

**Press Releases/Media Advisories/Editorials/Talking Points**

5/31/2016	Reno-Sparks Indian Colony Signs MOU	Ulibarri
5/17/2016	Bike Week Events	Ulibarri
5/9/2016	Poison Prevention Trainings	Ulibarri

**Social Media Postings**

<b>Facebook</b>	AQMD/CCHS/ODHO EHS	119
<b>Twitter</b>	AQMD/CCHS	82
<b>2016 Bike Week Web Posting recap</b>	AQMD/BikeWashoe.org	176 new likes 10,250 people reached 260 click throughs to website
<b>Grindr/Sexual Health Program</b>	CCHS	68 popups 901,348 impressions

## Fundamental Review Recommendation Status

Legend:

June 23, 2016

Complete
Underway
Underway - Regulatory, Budget, Policy Analysis or Issue Resolution Necessary or in Process
Underway but Progress Stalled or Delayed
Not Yet Underway - No Changes Necessary
Parking Lot
Not Recommended

Status Goal

	<b>1</b>	<b>Place WIC organizationally where it is most closely aligned with similar functions</b>
	a.	WIC moved to CCHS effective January 21, 2014
	<b>2</b>	<b>Develop a DBOH orientation manual and program</b>
	a.	Completed August 2014
	<b>3</b>	<b>Strengthen customer focus, exploring the potential for user groups to share consumer viewpoints</b>
	a.	Land development user group established, meeting regularly. Incorporates food and retail assoc.
	<b>4</b>	<b>Critically examine clinic appointment scheduling from a patient access perspective</b>
	a.	Staffing IZ five days a week, accept IZ walk ins on a limited basis
	b.	Extended IZ hours established.
	c.	Vital Statistics staffed five days a week
	d.	Interactive Voice Response software options being explored
	<b>5</b>	<b>Update fee schedules and billing processes for all clinical and environmental services</b>
	a.	Third-party billing service terminated 12/31/15. Immunize Nevada under contract to improve billing.
	b.	Adopted new fees for services not previously charged for. Effective 7/1/15
	c.	Fee revisions approved for EHS and AQM December 2015. Effective 7/1/16 (50%) and 7/1/17 (100%)
	d.	CCHS services reviewed, new fees adopted October 22, 2015



## Fundamental Review Recommendation Status

	<b>6</b>	<b>Explore tiered level of services for Environmental Health programs and inspections</b>
	a.	Consider the desire & support for this type of tiered structure and this item within the larger context
	<b>7</b>	<b>Participate in the business process analysis across all building permitting in the county</b>
	a.	ILA and contract with Accela signed. Implementation proceeding but extended due to change order
	<b>8</b>	<b>Develop infrastructure to support the District Health Officer</b>
	a.	Program Coordinator position approved in FY 17 budget - approved by BCC May 17
	<b>9</b>	<b>Implement time coding for employees</b>
	a.	Time coding has been implemented. Adjustments continue.
	<b>10</b>	<b>Perform cost analysis of all programs</b>
	a.	Completed and accepted by Board December 2015
	<b>11</b>	<b>Perform assessment of needed administrative and fiscal staffing to increase efficiencies</b>
	a.	AA1 position approved in FY 17 CCHS budget - approved by BCC May 17
	<b>12</b>	<b>Demonstrate a concerted effort among all parties to address tensions regarding overhead/direct costs</b>
	a.	The District is maintaining a positive and productive working relationship with the County Manager & budget ofc
	<b>13</b>	<b>Align programs and services with public demand</b>
	a.	Shifted home visiting resources to provide additional clinical services on 6/1/14
	b.	Assess changes in service levels and program alignment with respect to CHA CHIP, SP or funding
	i.	FTEs shifted within EHS, within CCHS, and from EHS to CCHS to align with public demand
	<b>14</b>	<b>Conduct a CHA in concert with current partner organizations</b>
	a.	Second CHA will begin January 2017
	<b>15</b>	<b>Develop metrics for organizational success and improved community health</b>
	a.	In FY16, continue to identify metrics that help to manage programs and resources and tell our story
	<b>16</b>	<b>Continue current collaborative action plan to resolve REMSA oversight issues</b>
	a.	Franchise Agreement approved, Regional EMS Oversight Program and Advisory Board established.
	<b>17</b>	<b>Maintain current levels of local and state financial support</b>
	a.	Past action on this recommendation is captured under Recommendation 12 above
	b.	Advocate sustaining or enhancing funding through State agencies
	<b>18</b>	<b>Conduct a governance assessment utilizing NALBOH criteria</b>
	a.	Completed 1/16/14. Repeat in 2018 per approved Significant Board Activities schedule
	<b>19</b>	<b>Undertake an organizational strategic plan to set forth key Health District goals and objectives</b>
	a.	Information gathered, Special DBOH meeting held, plan to DBOH for adoption May 26.
	<b>20</b>	<b>Implement a performance management system</b>
	a.	Use results of program cost analysis, performance metrics and SP to develop & implement performance mgmt. syst

## Fundamental Review Recommendation Status

	<b>21</b>	<b>Consider alternative governance structures</b>
	a.	This is not a recommendation for staff action
	<b>22</b>	<b>Take a greater leadership role to enhance the strong current State/Local collaboration</b>
	a.	District provided testimony on bills during the 2015 Legislative session and assisted in changing regulations
	b.	Working collaboratively with NDPBH and SNHD regarding 2017 Legislative session priorities
	<b>23</b>	<b>Develop an organizational culture to support quality by taking visible leadership steps</b>
	a.	QTeam established, all-staff training completed 9/15/15, FY 16 QI Plan finalized, DBOH briefed Jan. 2016
	<b>24</b>	<b>Seek Public Health Accreditation Board accreditation</b>
	a.	Seek DBOH direction on this recommendation once the CHA, CHIP and the SP are completed

Acronyms: IZ - Immunizations  
 ILA - Interlocal Agreement  
 CHA - Community Health Assessment  
 CHIP - Community Health Improvement Plan  
 SP - Strategic Plan  
 QI - Quality Improvement  
 DBOH - District Board of Health  
 NALBOH - National Association of Local Boards of Health