

**WASHOE COUNTY
DISTRICT BOARD OF HEALTH**

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

AGENDA

Meeting of the
DISTRICT BOARD OF HEALTH
Bartley Ranch -Brick House
6000 Bartley Ranch Road
Reno, NV 89511

Thursday, October 8, 2009

9:00 AM

NOTICE

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

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

Business Impact Statement – A Business Impact Statement is available at the Washoe County Health District for those items denoted with a “\$.”

THE CHAIRMAN MAY CALL FOR LUNCH AT HIS DISCRETION

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| 9:00AM | 1. Call to Order, Pledge of Allegiance Led by Invitation | Dr. Humphreys |
| | 2. Roll Call | Ms. Smith |
| | 3. Public Comment (3 minute time limit per person) | Dr. Humphreys |
| | 4. Approval/Deletions to the Agenda for October 8, 2009 (action) | Dr. Humphreys |
| | 5. Welcome and Opening Remarks for the Annual DBOH Strategic Retreat | Dr. Anderson |
| | 6. Orientation to the Strategic Retreat Binder | Ms. Coulombe |
| | 7. Review and Discussion of the Washoe County Health District's Vision and Mission with Possible Direction to Staff (action) | Dr. Anderson |

8. Review and Discussion of the Washoe County Health District's Staff Strategic Issues with Possible Direction to Staff , including but not limited to:

Dr. Anderson,
Ms. Coulombe
Mr. Goodrich
Ms. Brown
Mr. Sack
Dr. Todd

AHS

- Stability of the Health Fund
- Data & performance measurement quality

AQM

- Anticipated public policy changes
- Service evaluation & alignment

CCHS

- Efficient program operations
- Collaboration & integration of services
- Population-based health initiatives.

EHS

- Environmental Staffing
- Regulatory Issues

EPHP

- Pandemic Influenza
- Epidemiology Staffing
- Policy Changes in Vital Records

DHO

- Workforce
- Infrastructure-present & future
- Future fiscal climate

(action)

9. Review and Discussion of the Washoe County Health District's Board Member Strategic Issues with Possible Direction to Staff, including but not limited to:

DBOH Board Members

Dr. George Furman

- Nuisance Ordinance
- Cooperation Among Departments
- Budget Impacts on Department

Commissioner Kitty Jung

- Mandatory Recycling

Councilman Dan Gustin

- Materials Resource Facilities (MRF)
- Social Marketing

Dr. Amy Khan

- Community Partner Collaboration
- Relationship Prioritization

Matt Smith

- Budget

Councilwoman Julia Ratti

- Budget Planning by Scenarios
- REMSA

(action)

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|-----|--|------------------------------|
| 10. | Discussion with Possible Direction to Staff Regarding Outcomes and Performance Measurement (action) | DBOH Board Members,
Staff |
| 11. | Closing Comments Regarding Strategic Retreat by Board Members and Staff | Dr. Humphreys |
| 12. | Acceptance of Federal Funding totaling \$1,688,166 from the Centers for Disease Control and Prevention (CDC) and \$53,000 from Assistant Secretary for Preparedness and Response (ASPR) to prepare for and respond to H1N1; Approval of amendments totaling an increase of \$585,283 in both revenue and expenses to the H1N1 Phase 1&2, Focus Area 1 Grant Program, Internal Order 10780 FY10 Budget; Approval of amendments totaling an increase of \$50,000 in both revenue and expense to the H1N1 Phase 1&2, Focus Area 2 Grant Program, Internal Order 10781 FY10 Budget; Approval of amendments totaling an increase of \$1,052,883 in both revenue and expense to the H1N1 Phase 3 Grant Program, Internal Order 10782 FY10 Budget; and Authorize the creation of an on call Registered Nurse Intermittent Hourly position, (PC#TBD) as evaluated by the Job Evaluation Committee (JEC). (action) | Ms. Buxton |
| 13. | Discussion of Process and Selection of Management Appraisal Form for District Health Officer's Annual Review with Possible Direction to Staff (action) | Dr. Humphreys |
| 14. | Board Comment Limited to Announcements or Issues for Future Agendas | Dr. Humphreys |
| 15. | Adjournment (action) | Dr. Humphreys |

NOTE:

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 District Health Department, 1001 East Ninth Street, Building "B", Reno, NV 89512 or by calling 328-2416.

WASHOE COUNTY DISTRICT BOARD OF HEALTH
STRATEGIC PLANNING MEETING
October 8, 2009

BOARD MEMBERS PRESENT: Denis Humphreys, OD, Chairman; Mr. Matt Smith, Vice Chairman; Councilman Dan Gustin; George Furman, MD; Commissioner Kitty Jung; Amy Khan, MD; and Councilwoman Julia Ratti

ABSENT: None

STAFF: Dr. Mary Anderson, District Health Officer; Eileen Coulombe, Administrative Health Services Officer; Andrew Goodrich, Director, Air Quality Management; Mary-Ann Brown, Director, Community and Clinical Health Services; Bob Sack, Director, Environmental Health Services; Dr. Randall Todd, Director, Epi and Public Health Preparedness; Patsy Buxton, Fiscal Compliance Officer; Lori Cooke, Fiscal Compliance Officer; Stacey Akurosawa, Administrative Assistant; Jeanne Rucker, Environmental Health Specialist Supervisor; Bev Bayan, WIC Program Manager; Steve Fisher, Department Computer Application Specialist; Janet Smith, Recording Secretary; Leslie Admirand, Deputy District Attorney; and Mary Kandaras, Deputy District Attorney

At 9:00 am, Chairman Humphreys called the Washoe County District Board of Health Strategic Planning meeting to order, followed by the Pledge of Allegiance, led by Councilman Dan Gustin, District Board of Health member.

ROLL CALL

Roll call was taken and a full Board noted.

PUBLIC COMMENT

Mr. Brad Capurro, Castaway Trash Hauling, presented a copy of a "*Materials Recovery Facility for Truckee Meadows*" (a copy of which was placed on file for the record), which was presented to the Reno City Council on September 9, 2009. Mr. Capurro advised that the intent of the conceptual proposal is for the eventual development of a Materials Recovery Facility (MRF) within Washoe

County. Mr. Capurro reviewed the proposal for the "advanced recycling technology to sort and separate Municipal Solid Waste (MSW), advising that only a small percentage of waste products are diverted from the local landfill; that the proposed facility "will achieve extremely high recycling and recovery rates."

The Board thanked Mr. Capurro and the representatives of Four Thirty-Three, LLC/Castaway Trash Hauling for the presentation.

APPROVAL/DELETIONS – AGENDA – OCTOBER 8, 2009

Chairman Humphreys called for approval of the agenda of the Washoe County District Board of Health Strategic Planning Session of October 8, 2009.

**MOTION: Mr. Gustin moved, seconded by Ms. Ratti, that the District Board of Health agenda for the October 8, 2009 Strategic Planning Session be approved.
Motion carried unanimously.**

WELCOME – OPENING REMARKS – ANNUAL DBOH STRATEGIC RETREAT

Chairman Humphreys welcomed the Board members and Staff and advised that a goal today is to review the District Board of Health's "vision, mission, goals and operational objectives to determine to ensure they remain appropriate for 2010". Chairman Humphreys advised that it will be necessary to confirm the Board and Staff are "on track for programs and finances as directed by the last planning session and the subsequent Board meetings." Chairman Humphreys that the Board will be reviewing programs and projected finances providing direction to Staff for 2010, identifying any "long-range issues from Staff or Board members."

Dr. Mary Anderson, District Health Officer, welcomed the Board members and Staff, providing a brief review of the day's schedule.

ORIENTATION – STRATEGIC RETREAT BINDER

Ms. Eileen Coulombe, Administrative Health Services Officer, stated that she would thank Staff's efforts in preparing the binders for the Strategic Planning Session; that the information contained in

the binder is available on the internet. Ms. Coulombe provided an overview of the five (5) tabs of the Strategic Planning Binder (a copy of which was placed on file for the record), advising that Tab 1 is the "mission, vision, goals and operational objectives." Ms. Coulombe advised that Tab 2 is the "per capita analysis"; that during the Budget meeting Staff provided the "proposed per capita analysis"; that the document presented today "is that "actual adopted per capita analysis." Ms. Coulombe reviewed the "per capita analysis", advising that the programs are presented alphabetically, providing an overview of "grants, fees, revenue totals, the tax transfer from the General Fund; the percentage of the program as a total department expense; the percentage from grants, fees and the General Fund, with the per capita from the General Fund transfer.

Ms. Coulombe stated that the General Fund Transfer as listed is "greater than the actual General Fund Transfer this year, of \$8,445,500"; that the difference is due to the Ending Fund Balance; however, "it does tie out on the Project Accounting Sheet(s)." Ms. Coulombe advised that the second sheet provides a comparison of program changes from last fiscal year; that the third sheet presents the FY 09/10 budget sorted by General Fund and per capita. Ms. Coulombe advised that the last two (2) sheets provide the Board members with a synopsis of all the programs. Ms. Coulombe advised that Tab 3 provides a list of the legally mandated services, the core function and the District Board of Health's strategic goal for those services. Ms. Coulombe stated that Tab 4 is the Project Accounting Sheets, which were provided to the Board members at the August 2009 meeting; that, as she advised at the August meeting, Staff will present the Budget "by program."

Ms. Coulombe advised that Tab 5 provides the Health District's Organizational Chart as of August 27, 2009; that any revisions for FY 11 will be noted in the Budget Book."

REVIEW – DISCUSSION – WASHOE COUNTY HEALTH DISTRICT'S VISION – MISSION – GOALS AND OPERATIONAL OBJECTIVES

The Board reviewed the mission statement: *"The Washoe County Health District protects and enhances the physical well being and quality of life for all citizens of Washoe County through providing health promotion, disease prevention, public health emergency preparedness, and environmental services."*

MOTION: Mr. Smith moved, seconded by Ms. Jung, that the Washoe County Health District mission statement be reconfirmed as presented.
Motion carried unanimously.

The Board reviewed the vision statement: "*We are leaders in a unified community committed to optimal human and environmental health.*"

**MOTION: Mr. Gustin moved, seconded by Ms. Ratti, that the Washoe County Health District vision statement be reconfirmed as presented.
Motion carried unanimously.**

The Board reviewed the District Board of Health's Goals as established during the Board's 2008 Strategic Planning Session.

In the discussion that followed it was the consensus of the Board to amend the Goals as outlined: The Health District will assist the citizens to realize the **strategic** priorities by achieving the following goals:

- ◆ Educate the community about public health and the services provided by the Health District
- ◆ Serve the public through enhanced use of technology
- ◆ Enhance collaborations with community groups and constituents
- ◆ **Ensure fiscal sustainability and good stewardship of our resources**
- ◆ Recruit, retain and develop a competent public health workforce
- ◆ Promote planning and activities to support a sustainable healthy community

**MOTION: Mr. Gustin moved, seconded by Ms. Ratti that the District Board of Health's Goals for 2009-2010, be approved and adopted as amended
Motion carried unanimously.**

The Board reviewed the District Board of Health's Operational Objectives as established during the Board's 2008 Strategic Planning Session.

Ms. Coulombe stated it is necessary to be aware of the "link between fiscal objectives and strategic goals and outcome measures and expand cost benefits analysis of program and activities." Ms. Coulombe stated the Health District is a "data driven organization; that the most basic requirement of 'managing for results' is 'to measure results that are most important to accomplish ensuring that the measures 'meet the purpose.' Ms. Coulombe stated that "a cost for a program/activity can be high"; however, the value added justifies the cost.

In the discussion that followed it was the consensus of the Board to amend the Operational Objectives as outlined:

1. Assuring fiscal responsibility for the Health District
2. Prioritizing programs and services such that the greatest weight is given to those that represent a core function of public health and/or an essential public health service as defined by CDC, NACCHO, ASTHO, and others, followed by those programs and services that accomplish a strategic goal established by this Board.
3. Assuring that the **performance** of all programs and/or services of the Health District are periodically evaluated **for cost effectiveness and quality outcomes**.

**MOTION: Ms. Ratti moved, seconded by Ms. Jung that the District Board of Health's Operational Objectives for 2009-2010, be approved and adopted as amended
Motion carried unanimously.**

The Board discussed the Strategic Priorities as established during the Board's 2008 Strategic Planning Session.

Ms. Coulombe reviewed the *Strategic Plan FY 08* template document for reporting on progress (a copy of which was placed on file for the record), advising that the document indicates the "key outcomes and performance measure and target" for each of the strategic priorities. Ms. Coulombe advised that Dr. Anderson had presented the document to the Board in August; however, Staff has been unable to provide periodic updates. Ms. Coulombe advised that the concept was to "integrate a number of strategic plans, including Washoe County, the Cities of Sparks and Reno and the State Health Division, with the Health District's Strategic Priorities.

In the discussion that followed it was the consensus of the Board to reconfirm the following Strategic Priorities:

1. Monitor health status and understand health issues facing the community.
2. Protect population from health problems and health hazards.
3. Give people information they need to make healthy choices.
4. Enforce public health laws and regulations.
5. Develop our workforce.
6. Promote financial accountability and stability.

MOTION: Dr. Khan moved, seconded by Mr. Smith, that the District Board of Health's Strategic Priorities be reconfirmed as adopted.

Motion carried unanimously.

It was further the consensus of the Board that Staff present the amended revisions of the Goals, Operational Objectives, and the reconfirmed Strategic Priorities to the Board at the October 22, 2009 meeting.

In response to Chairman Humphreys regarding "keeping the public informed" as to the functions of the Health District, Dr. Anderson advised that historically the District printed an Annual Report for the community; however, due to budget reductions that Report has not been printed for the "past couple of years."

Dr. Khan stated that she concurs it is important "to market the Health District's product, which isn't being done"; that there are "some antiquated ideas of what public health is and what public health departments do." Dr. Khan stated that perhaps "there is a way to strategically place the brochures to reach the community so that they are more aware"; that typically "people become aware of the Health Department when there is a need or something fails." Dr. Khan stated that "there have to be opportunities on how to reach the most people with a limited budget."

Ms. Jung stated that she concurs with Dr. Khan regarding marketing the Health District; that an opportunity would be to have the Public Information Officers (PIOs) provide presentations to the various Neighborhood Advisory Boards (NAB) and the Citizen Advisory Boards (CABs) delineating the services provided by the District and the goals and operational objectives. Ms. Jung stated that the NABs and CABs provide input to the individuals within the respective areas.

Dr. Furman stated that he would provide copies of the Annual Report at the Library branch and would replace copies as necessary.

Dr. Anderson stated that she would distribute the Reports at the Medical School and other locations in which she would give presentations.

REVIEW – DISCUSSION – WASHOE COUNTY HEALTH DISTRICT – STAFF STRATEGIC ISSUES

Dr. Anderson advised that each Division Director will present “the highest areas of concern within each Division, which will impact the budget and programs.” Dr. Anderson stated that the issues being presented are those “which need to be addressed by Division as priorities”

Ms. Coulombe reviewed the two (2) strategic issues for the Administrative Health Services (AHS) Division in detail.

Stability of the Health Fund

- Ensure administrative compliance with fiscal and operational policies as established by the District Board of Health and Board of County Commissioners.
- Maximize grant reimbursement to the Health Fund by billing grants within 30 days of the end of the period.
- Enhance the efficient and effective use of Health Fund resources.
- Continue to develop standard operating procedures for administrative processes.

Data & Performance Measure Quality

- Enhance an evaluative review process for all programs and services for presentation to the District Board of Health.
- Review Goals and Performance Measures by Program template.
- Foster technology solutions and standards with an Inter-Divisional Technology Team and the Washoe County Information Technology Advisory Committee.

Ms. Coulombe advised that the long-term goals for Administrative Health Services (as noted in the budget book) are “ensuring the fiscal stability of the Health Fund; and utilize and access information technology service to improve department functionality.” Ms. Coulombe stated that the Health District “must function within a framework and Health Administration is charged with ensuring adherence to that framework.” Ms. Coulombe stated that last year the focus was on the “optimization organization” as endorsed by the Structural Review Team (SRT) and adopted by the District Board of Health, in which “positions and activities were reorganized to do a better job of integrating where the resources were going within the Department.” In response to Mr. Smith regarding the performance measures and goals, Ms. Coulombe advised that “billing of grants within thirty (30) days for the maximizing of grant reimbursement to the Health Fund was new for Administrative Health Services”; that Staff has been reporting quarterly to the Board of County Commissioners regarding the Department’s progress in achieving this goal.”

Mr. Smith stated that he would request this information be presented to the Board of Health also.

Ms. Coulombe stated the enhanced evaluative review process for all programs and services for "is the basis for the development of the District's comprehensive operating and financial plan for 2011, ensuring that the District's operational plan is consistent with the District Board's direction and goals – ensuring measurements are aligned with the priorities." Ms. Coulombe stated that the long-term goal for the Administrative Health Services, in the Budget book, is "to ensure the fiscal stability of the Health Fund while accessing and utilizing information technology services to improve Department functionality."

Ms. Coulombe advised that a new Department Computer Application Specialist (DCAS) will be beginning in the Department on November 9, 2009, which will enhance the technology capabilities within the Department, allowing Mr. Fisher the opportunity to update the Department's website. In response to Ms. Jung regarding this position, Ms. Coulombe stated that the DCAS position was listed as a priority position by the Board of Health; that the position was evaluated by the Job Evaluation Committee. Ms. Coulombe advised that this position will assist in the District specialized software; that this individual is currently with the County's IT Department.

In response to Ms. Ratti regarding each of the Division's strategic issues, Ms. Coulombe stated that, in regard to Administrative Health Services, "the issues she listed are those areas in which the Division's Staff will be focusing their energy and resources." Ms. Coulombe stated that, should these not "be in alignment with the Board's direction", Staff will accept direction from the Board.

In response to Ms. Ratti, Dr. Anderson stated that the goal was for each Division Director to provide the Board with the "the major operational issues for each Division for the coming year." Dr. Anderson stated that the focus and issues of the Administrative Health Services Division "by the very functions of the Division, are different from the other Divisions." Dr. Anderson stated the strategic issues of each Division are to advise the Board as to the "what Staff perceives as the major issues for each Division in the coming year(s).

Mr. Andrew Goodrich, Director, Air Quality Management, reviewed the two (2) strategic issues for the Air Quality Management Health Services (AHS) Division in detail.

Anticipated public policy changes

- National Ambient Air Quality Standards (NAAQS) are being reviewed and in most cases strengthened.
- United States Environmental Protection Agency (EPA) will be continuing emphasis for the control of Hazardous Air Pollutants (HAPs).
- Climate Change; either through congressional policy or legislative action, will be a significant issue for all air quality agencies.

Service evaluation & alignment

- Office relocation + reduction of staff + increasing division responsibilities = must improve efficiency.
- Maintain and improve customer service – Increased visibility through the “Permits Plus Zone”.
- Increase coordination and collaboration with other agencies (Building, Planning, Community Development, etc.)

Mr. Goodrich advised the Health District is the US Environmental Protection Agency (EPA) delegated air quality agency for Washoe County; therefore, “what occurs nationally ‘drives’ his Division and what decisions are made for the County.” Mr. Goodrich stated that the directives for his Division are the National Ambient Air Quality Standards (NAAQS); Hazardous Air Pollutants (HAPs); and Cap and Trade (CAPs), which are Federal Standards, to which the Air Quality District must comply.

Mr. Goodrich advised that NAAQS is the standard for six (6) pollutants, which are “clearly defined in the Clean Air Act” and for which all metropolitan areas must measure (i.e., Carbon Monoxide, Particulate Matter [PM], etc.). Mr. Goodrich advised the US EPA is required “by law” to review those standards every five (5) years to ensure that the standards for those specific pollutants adequately protect public health. Mr. Goodrich stated that after a delay in reviewing those standards, EPA is “now very actively reviewing those standards”; that within the past year the standards for lead and nitrogen dioxide have been reviewed and determined “to not be adequate.” Mr. Goodrich advised that these standards have been revised and become more stringent; that currently the EPA is reviewing the standard for Ozone; that the review of the Ozone standard is one of concern. Mr. Goodrich advised it was “just two (2) years ago the Health District was designated as attainment for Ozone”; therefore, a determination that the Ozone standard “is not adequate and should be more stringent” could result in the Health District again being designated as a non-attainment area for Ozone. Mr. Goodrich advised that further, EPA will be reviewing the

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standards for "Carbon Monoxide, Sulfur Dioxide, and Particulate Matter (PM) within the next year or so; that Staff is anticipating these reviews."

In response to Ms. Jung regarding the District "losing funding" if determined to be in non-attainment status, Mr. Goodrich advised that designation of non-attainment requires the Health District "to respond to that designation." Mr. Goodrich advised that this would require the District to increase the monitoring activities; develop plans for the reduction of Ozone emissions within the District, etc.; which would result in an increased level of work to comply with additional regulations and would require more Staff to perform the necessary work. Mr. Goodrich advised that more stringent regulations would require Staff to review all (pollutant) sources to determine where reductions in pollutant levels could be achieved; that complying with more stringent standards would be very difficult.

In response to Dr. Anderson regarding a "business impact" related to being designated non-attainment or as attainment, Mr. Goodrich advised that there are definite economic business impacts to an area with the designation. Mr. Goodrich advised that a consideration of a business before locating to an area is "what types of regulatory controls to which the business would have to comply or whether the business can even be located in an area." Mr. Goodrich advised that "every business has a level of emissions, some cleaner than others; however, a non-attainment status would prevent some businesses from locating to Nevada.

In response to Dr. Todd regarding if economic conditions are a consideration of the EPA when developing new standards, Mr. Goodrich advised that the implementation of new standards is a very involved process for developing the standards. Mr. Goodrich advised that the Congressional Air Science Advisory Committee (CASAC) reviews, which investigates the "feasibility of controlling emissions"; that the primary focus "is the protection of public health." Mr. Goodrich advised that the NAAQS set forth the standards for the protection of public health; however, it is the role and responsibility of the regulatory agency to develop the "regulations and control measures" which address economic impacts through Best Available Control Technologies (BACT) or MACT (Maximum Available Control Technologies) requirements within the Regulations. In response to Ms. Ratti regarding EPA acknowledging the challenges of the various regional areas, Mr. Goodrich advised that there are provisions for "exceptional events", such as the increase in Ozone, Carbon Monoxide or Particulate Matter (PM) levels that the Basin experiences due to wildfires. Mr. Goodrich advised that these "exceptional events" are those for which the District has no ability to predict or prevent and are not due to a failure of control measures by the District.

Mr. Goodrich advised that there are no standards for Hazardous Air Pollutants (HAP), as there is no level which is considered safe for HAPs; that currently there are 188 chemicals listed in the

Clean Air Act which are considered hazardous or toxic. Mr. Goodrich advised that diesel emissions are being reviewed by EPA as a significant source of HAPs in urban areas; that "area HAP sources" are being reviewed. Mr. Goodrich advised that an area source, which Staff will be addressing through proposed revisions to the Regulations, is perchloroethylene (PCE); that Staff will be recommending the discontinuation of PCE, a solvent currently utilized by dry cleaning establishments. Mr. Goodrich advised that this has been implemented in other air districts; that there are alternatives to the use of PCE for dry cleaning; that PCE is within the top 33 of the 188 HAPs as defined by EPA. Mr. Goodrich stated that South Coast Air District conducted extensive Multiple Air Toxics Exposure Studies (MATES), which determined that dry cleaning emissions "present a greater risk than living next to a refinery, or a power plant." Mr. Goodrich advised that Staff is being pro-active in this approach; that he anticipates these restrictions will be mandated nationwide. Mr. Goodrich advised that the proposed revisions would require new dry cleaning businesses to comply with the mandate prohibiting the use of PCE; however, existing dry cleaners wouldn't have to comply until the PCE unit would have to be replaced or repaired.

Mr. Goodrich advised that Cap and Trade is the a response to the "endangerment finding for greenhouse gases" being considered by the US EPA; that should the US EPA be successful in implementing Cap and Trade, "greenhouse gases" would then be controlled through the Clean Air Act. Mr. Goodrich advised that recently legislation was passed requiring the very largest sources for greenhouse gases will have to report those emissions to the air district(s). Mr. Goodrich advised he does not anticipate that the District will have to adopt regulations for Cap and Trade, as the District does not have any sources, nor does he anticipate any sources "in the near future", which will be large enough to mandate this. Mr. Goodrich stated Staff is in the process of preparing an inventory for greenhouse gases, as the District has been advised that "this will be a requirement."

Mr. Goodrich advised that the second issue of concern is "service evaluation and alignment" specific to the continuing financial challenges for both the County and the Health District. Mr. Goodrich stated that the Air Quality Management Division has had a 15% vacancy rate "for more than a year and anticipate it will continue within the foreseeable future." Mr. Goodrich advised that AQM Staff have managed as business has declined and a number of AQM services "are business driven"; however, "it is very stressful for Staff."

Mr. Goodrich advised that the Air Quality Management Division is currently located in leased space; that by the end of the month the AQM Division will again be located at the 9th Street complex, which will reduce expenditures.

Mr. Goodrich advised that continuing existing community partnerships/collaboration and developing new ones will be critical for the continued success of the AQM Division. In response to Ms. Jung

regarding cooperation from the jurisdictional agencies, Mr. Goodrich advised that will definitely require the cooperation of the various governmental entities; that "everyone acknowledges air quality is important"; however, it will require participation by "the policy and decision makers will have to be included in this process." Mr. Goodrich advised that the *Regional Green Team* is comprised of representatives of various entities (i.e., the School District, the University of Nevada, the Cities of Reno and Sparks, Nevada Energy, etc.), and meets to discuss these various issues.

In response to Dr. Khan regarding partnering with community development agencies to ensure environmentally friendly, sound communities, Mr. Goodrich stated that "how communities are planned and developed is so critical for air quality." Mr. Goodrich stated "it has to be emphasized to the planning departments and developers that there is a huge air quality component to be considered when planning a development." Mr. Goodrich advised that he serves on the "Green Team" and works with Nevada Energy; that he anticipates more private power producers in the region.

Mr. Randy Mellinger, City of Sparks Assistant City Manager for Public Works and Redevelopment, advised that the City of Sparks has "significant policies directly related to air quality specific to vehicle miles traveled, reduced trips, etc." Mr. Mellinger stated that the City of Sparks has revised its Master Plan to coordinate with the Regional Plan and the concept of "smart growth." Mr. Mellinger stated he concurs it is vital for the Health District be involved in all aspects of regional planning; that he would suggest a joint meeting to "ensure everyone is aware of it."

In response to Mr. Gustin regarding the air quality authority for Storey County, Mr. Goodrich advised that "everything outside of Washoe and Clark Counties is within the State's jurisdiction." In response to Mr. Gustin regarding the proposed "largest industrial park" proposed in Storey County and the impact to Washoe County due to the increased diesel truck travel, Mr. Goodrich stated that this is of concern. Mr. Goodrich stated that it will require "good planning"; that he believes the Nevada Department of Transportation will be responsible for the "transportation planning" for the ingress and egress to that industrial park. Mr. Goodrich advised that there are federal regulations governing diesel trucks; that these regulations have been improved during the last few years and new requirements will continue to improve emissions from diesels.

Dr. Anderson stated that approximately three (3) years ago, she and Dr. Khan did a presentation to the American College of Preventive Medicine (ACPM) specific to environmentally livable development in which amenities (i.e., grocery stores, schools, etc.) are within walking distance of residences. Dr. Anderson stated that those developments in which there are residences only do not "lend themselves to good air quality"; that there are a number of health-related issues which

can be addressed through environmental development; therefore, it is "quite necessary" for public health to be incorporated into community development.

Ms. Ratti advised that with the assistance of stimulus funds the Regional Transportation Commission has expedited plans for a rapid transit system for the Reno/Sparks area; that the groundbreaking for the system will be held tomorrow at the south parking lot at Meadowwood Mall.

Mr. Goodrich advised that Mr. Lee Gibson, the new Executive Director of the Regional Transportation Commission, has a "good understanding" of the importance of regionalized transportation.

In response to Mr. Smith regarding air quality management fees, Mr. Goodrich that with a reduction in construction there has been a decrease in the request for permits and subsequently a loss of fee revenue. Mr. Goodrich stated that he anticipates fee revenue "to remain flat throughout the coming year."

The Board recessed at 10:50 am and reconvened at 11:00 am.

Ms. Mary-Ann Brown, Director, Community and Clinical Health Services, reviewed the three (3) strategic issues for the Community and Clinical Health Services (CCHS) Division in detail.

Efficient program operations

- Establish productivity benchmarks within all programs
- Utilize cost analysis tools to increase operational efficiencies
- Incorporate flexible personnel (per diems) into staffing models to maximize short term funding

Collaboration & integration of services

- Conduct a pilot project integrating Public Health Nursing into Juvenile and Child Protection services for targeted high-risk clients
- Enhance integration of Immunization services within Washoe County School District
- Incorporate elder abuse prevention into child abuse and neglect prevention activities

Population-based health initiatives

- Conduct a Pre-Conception Health Counseling campaign
- Seek stimulus funding to work on community public policies that support obesity reduction
- Design a Comprehensive Tobacco Prevention and Control System as the Local Lead Agency (LLA) per legislative mandate (NRS 439.630)

Mr. Bob Sack, Director, Environmental Health Services, reviewed the two (2) strategic issues for the Environmental Health Services (EHS) Division in detail.

Environmental staffing

- Staffing is at bare bones. Programs have been reviewed multiple times over the last 15 years for efficiencies and minimal levels of mandates.
- Predicting future on-demand workload is problematic. We are not staffed for increases.

Regulatory issues

- Administrative enforcement procedures:
 - driven by Legislative and local jurisdiction desires. Will require changes in regulation and increased budget to implement.
- Indoor smoking enforcement:
 - Supreme Court has invalidated criminal enforcement of the NCIAA. This will require legislative action to ultimately fix the problems with the Act.
- Illegal vendors:
 - Increase in illegal food vendors. Being driven by economics and cultural demand for on street sales of food. There are organized groups that are coordinating some of these vendors. This requires new investigative techniques be developed. Response needs to be multiagency in each of the local jurisdictions.
- Recycling:
 - The Health District is holding steady in its recycling rate of 25% (Legislative goal 25%). There is a strong local community interest in raising the recycling rate. This can be done by the DBOH. One way of achieving is to have garbage go through a MRF to sort garbage for recycling.
 - Any changes required will begin with staff presentations to the DBOH regarding necessary revisions to our DBOH-adopted Waste Management Plan. Revisions to

the plan will require changes in local regulation and franchise agreements. Such changes are not short term but long term in nature.

In response to Dr. Khan regarding attendance at the special events, Mr. Sack stated he does not have the statistics on the attendance at special events. Mr. Sack stated that Staff had anticipated a decrease in the number of special events; and thus, a decrease in Staff time; however, the number of special events did not decrease. Mr. Sack advised that the economy has resulted in more people involved in special events as an opportunity "to make money." Mr. Sack advised that "the opportunity to make money" is what has increased the number of illegal food vendors, as has the "cultural concept" that food can be sold "door to door or purchased off the street." Mr. Sack stated that currently Staff "is not very effective on enforcement for illegal vendors"; that Staff will be presenting an update to the Board regarding these activities.

Mr. Sack stated that in regard to enforcement activities the Health District has different hearing and advisory boards for appeals to enforcement procedures or these are presented to the Board of Health for determination; however, the Cities and the County are considering formalizing the "hearing officer process." Mr. Sack stated that this would be a "change in policy for the Health District"; that it would require the adoption of regulations associated with this process. Mr. Sack stated that the County has recently adopted the Nuisance Ordinance, which has "costs and a lot of time associated with it"; that the Health District will "be associated with it and there will be additional costs for hiring a hearing officer; the implementation of administrative procedures, paper work, etc."

Dr. Furman stated that he is very concerned about the knowledgeable environmental Staff who are retiring and wondering "who will train the new people?"

In response to Dr. Furman, Mr. Sack advised that Staff will be hiring "a couple of Environmentalists"; however, Staff has noted a problem in that the "experienced Environmentalist, who could function well on their own does not seem to do well on the Human Resources (HR) test" for Environmentalists. Mr. Sack stated that Staff is attempting to work with HR to resolve this issue, as there has been "some excellent experienced Environmentalist who have applied and did not make it to the interview process."

Mr. Sack advised that State Law mandates the local health district to adopt a "Solid Waste Management Plan", which is a guideline for developing the Solid Waste Regulations are prepared; that the Plan is reviewed and adopted by the Board of Health. Mr. Sack advised that the Waste Management Plan is prepared as a "long-term plan." Mr. Sack advised that the District has not

updated the Waste Management Plan for approximately ten (10) years; that the State has recently updated that State Plan and is requiring an increase to the 25% recycling rate. Mr. Sack advised that, with curbside and commercial recycling Washoe County has achieved the 25% goal; however, to increase the 25% recycling rate will require additional efforts, including Materials Recycling Facility (MRF) businesses. Mr. Sack advised that this will increase the recycling rates dramatically. Mr. Sack stated it is vital that Environmental Health Services Staff, as the technical experts, be included within the Cities and the County's franchise agreement process for solid waste management. Mr. Sack advised that the franchise agreements are being extended for "longer and longer periods of time (i.e., 10-15 years)" resulting in "more and more loss of control" specific to solid waste management. Mr. Sack stated that with improved technology and recycling efforts solid waste has progressed from "something thrown into a landfill into a commodity"; that in Washoe County both the landfill and transfer stations are privately owned and operated. Mr. Sack stated that these new technologies for recycling and waste reduction "cost money and are not cheap."

In response to Mr. Smith regarding MRFs also being private enterprises, Mr. Sack advised that a MRF would "most likely" be a private enterprise. Mr. Sack advised that Waste Management has indicated a willingness to construct a MRF; however, "the company wants a 5-15 year extension to the Franchise Agreement with all entities." Mr. Sack stated that "the ideal solution" would be for the local jurisdictions to construct a MRF that would be owned by the entities, which would allow the entities "a lot more control as to what is being recycled and when."

Ms. Jung stated that a suggestion would be "the model being utilized by the Truckee Meadows Water Authority (TMWA) and being considered by Washoe County Water Resources"; that "this is citizen owned and operated." Ms. Jung stated she would concur with Mr. Sack that a regionally owned and operated recycling center would be the ideal.

Dr. Randall Todd, Director, Epidemiology and Public Health Preparedness, reviewed the three (3) strategic issues for the Epidemiology and Public Health Preparedness (EPHP) Division in detail.

Pandemic Influenza

- The overarching goal in our response is to slow the pandemic by reducing the attack rate.
- Mass vaccination of targeted groups within the county is the most efficient way to accomplish this.
- Partnership with private healthcare providers is an important adjunct
- BME ruling disallowing use of MAs will impact this.

Epidemiology staffing

- Increase in incoming phone calls 86%
- Increase in incoming faxes 133%
- Increase in reported cases 159%
- Increase in staff 0%
- PHER funding – Need for expedited approval to spend

Policy changes in Vital Records

- State shift to electronic birth and death registry
- Removal of local ability to register births
- State intent to change NRS in 2011
- Impact on customer service
- Impact on revenues

Dr. Khan stated that she is concerned regarding the issue with the State "removing the ability of the local health districts to register births"; that a family cannot insure an infant without a Birth Certificate and Nevada has the highest rate of uninsured children in the nation.

Dr. Todd stated the State's position was this would improve the process and eliminate delays in registering births at the "local level"; however, the "only time there was any delays in getting births registered at the local level was if there was a delay by one of the hospitals in forwarding the birth record to the Health District. Dr. Todd stated that this change by the State has resulted in customer service issues for Vital Statistics, as Staff has been delayed in being able to issue Birth Certificates that have not yet been registered at the State. Dr. Todd stated that this impacts the revenue received through the District's Vital Statistics program; that a local health district does not have to have registered the Birth Certificate to sell one; however, it now cannot sell one until the State has registered it.

Dr. Anderson stated that Staff has had discussions with the State regarding this issue and will continue to attempt to resolve it

Dr. Anderson reviewed the three (3) strategic issues for the District Health Officer in detail.

Workforce

- Loss of personnel due to incentives for retirement/departure
- Lag time in hiring for positions that are not frozen
- Long training/start-up period for some disciplines
- Mismatch between position openings and availability of qualified personnel
- Unknown level of increased demand due to novel H1N1 influenza and Medical Assistant crisis in NV

Infrastructure

- Space adequate for present due to loss of personnel, but no CIP projects in foreseeable future
- Air Quality Management move reduces reliance on leased space
- Phone system inadequate to handle appointment call volume

Future fiscal climate

- Downturn will likely continue, so must be prepared for more budget cuts
- \$\$ for H1N1 efforts may exceed capacity to expend
- Demand for public health services is elevated due to man-made disasters (economic downturn & MA crisis)

In response to Ms. Ratti regarding the use of medical assistants, Ms. Brown advised that the Health District does not use medical assistants in its programs.

In response to Ms. Ratti regarding certification or training to be a medical assistant, Dr. Anderson advised that currently there is no certification or training requirements for medical assistants; that medical assistant's duties may vary from administering shots, eye drops, etc. Dr. Anderson stated that the Nevada Administrative Code (NAC) 630 stipulates "...burden is on the physician who delegates tasks to any unlicensed employee to ensure the assistant is properly trained to perform and/or supervise the task; that the reasonableness of the training and the supervision is always subject to review; that any delegation means the physician retains all liability for all acts performed." Dr. Anderson stated that the use of medical assistants has been a practice for more than thirty (30) years; that the duties performed by medical assistants has steadily increased.

Dr. Khan stated that this is a public health issue, which will be an on-going issue.

**MOTION: Ms. Jung moved, seconded by Mr. Smith, that the strategic issues of the Division Director's and the District Health Officer, be accepted as presented and discussed.
Motion carried unanimously.**

REVIEW – DISCUSSION – WASHOE COUNTY HEALTH DISTRICT'S BOARD MEMBERS – STRATEGIC ISSUES – POSSIBLE DIRECTION TO STAFF

Dr. Furman reviewed his three (3) strategic issues for the Health District in detail as follows:

Nuisance Ordinance

Dr. Furman stated that he is concerned that adoption of the new County Nuisance Ordinance will result in costs to the Health District, as there are specific Nevada Revised Statutes (NRS), which require the Health District to enforce nuisances.

Cooperation Among Departments and Budget Impacts on Department

Dr. Furman stated that these issues have already been discussed today.

Ms. Jung stated that the Health District being required to perform additional enforcement action, without additional funding is the equivalent of State unfunded mandates. In response to Ms. Jung regarding requesting additional staff information prior to a vote, Dr. Furman stated that "that would address his concerns; that he has no objections to Ms. Jung presenting his concerns.

Ms. Jung reviewed her strategic issue for the Health District in detail as follows:

Mandatory Recycling

Ms. Jung stated that this issue has been discussed; however, she would request additional information from Mr. Sack's Division as to the current Solid Waste Management Plan; that it is necessary for a more concerted effort to improve recycling efforts and to offer alternatives to landfills. Ms. Jung stated she would concur that it is necessary for Health District Staff to be involved in the process of reviewing the Franchise Agreement(s) with Waste Management; that it is important for "that to be made known or reiterated to the jurisdictional agencies" to ensure that Health District Staff are included to provide the expertise.

Ms. Jung stated that she would request information regarding the possibility of a regional composting facility similar to those in other regions.

Mr. Sack stated that the MRFs, composting facilities, waste to energy facilities are alternatives being reviewed by Staff for updating the Solid Waste Management Plan. Mr. Sack advised that, as he stated, Staff has the expertise specific to solid waste management and is the regulatory enforcement agency; however, the Health District has no authority specific to the franchise agreements negotiated between the jurisdictional agencies and Waste Management.

Ms. Jung stated that the Board of County Commissioners will be having a discussion during the last meeting in October with Waste Management specific to service levels; that she would request Staff be aware of this discussion.

Mr. Gustin reviewed his strategic issues for the Health District in detail as follows:

Materials Recycling Facilities (MRF)

Mr. Gustin stated that Castaway Trash Hauling gave the presentation to Reno City Council regarding the concept of developing a Materials Recycling Facility in Washoe County. Mr. Gustin stated that he concurs with Ms. Jung's comments regarding the importance of having a MRF facility in Washoe County; that the entities are aware it will cost money; however, "there is also a consensus that it will be good for everybody." Mr. Gustin stated that the issues of "who is going to do it and how it will be done" have to be determined; that Waste Management conducted a pilot project in Northwest Reno where there was an approximate 37% recycling rate; that when one (1) receptacle was provided in which "everything could be put in the rate increased to approximately 80%." Mr. Gustin reiterated that "while there will be associated costs, there is a strong acceptance within the community that it will be good for everybody"; that it is guesstimated "90% of what goes into a single barrel can be recycled." Mr. Gustin stated that a "clean MRF would be a receptacle for specific (recyclable) items; that "a dirty MRF would be everything being dumped into one (1) receptacle with recyclable items being removed."

In response to Ms. Ratti regarding Staff involvement with the City of Sparks in this process, Mr. Sack advised Staff has become involved in the discussions 'after-the-fact' regarding the Franchise Agreements. Mr. Sack advised that the Franchise Agreements are specific to the collection of garbage within the community and the disposal of it at the landfill. Mr. Sack stated that there are definitions for "trash versus garbage versus solid waste"; that each jurisdictional Franchise Agreement has "its own language." Mr. Sack stated that Staff would prefer to be included in these

discussion "at a base level as opposed to after-the-fact"; that this would allow Staff the opportunity to respond to jurisdictional questions regarding "how do the Regulations impact" the Franchise Agreement and the "regulatory interpretation by Staff."

Ms. Ratti stated that the City of Sparks has recently renewed the Franchise Agreement with Waste Management Services aligning its Agreement "to be more closely aligned with the City of Reno and Washoe County on the expiration date." Ms. Ratti stated that the City of Sparks requested "strong assurances from Waste Management regarding reopening the recycling discussion" component "community wide" and cost information specific to the development of a "clean MRF versus a dirty MRF."

Mr. Sack stated that Staff "was aware of those discussions"; however, Staff was not involved. Mr. Sack advised that Staff was contacted by the County "peripherally on its discussions with Waste Management." Mr. Sack stated that Staff would prefer to be included in these discussions and will participate if invited; that Staff is not attempting to usurp the jurisdictional authority; that Staff's goal is to participate as technical advisors with the expertise and representing the "values of the Board of Health."

Ms. Ratti stated that the elected officials can direct the appropriate City and County staff to contact Environmental Health Services when these issues are discussed.

Chairman Humphreys stated that this is an important issue; that as additional information is provided by Staff the Board can "begin making determinations."

Social Marketing

Mr. Gustin requested an update on the various social marketing tools and programs being utilized by the Health District (i.e., Facebook, Twitter, YouTube, etc.)

In response to Mr. Gustin, Ms. Brown advised that the Community and Clinical Health Division utilizes social marketing in networking various programs "as it is highly effective"; however, the CCHS Division "has not moved to the next level of Twitter, Facebook, etc." Ms. Brown stated that "it is a matter of acceptance of the new technology"; that not everyone is comfortable with this technology.

Mr. Gustin stated that although there are advantages to the technology and the technology is available "he is not sure the District should 'jump on in'."

Ms. Jung stated that Staff should work with Ms. Kathy Carter, Washoe County Public Information Officer, as there are legal issues as "what can and cannot be said on social networking sites". Ms. Jung stated that the Board of County Commissioners are having similar discussions and in the process of establishing policy.

Ms. Coulombe advised she is a member of the Information Technology Advisory Committee (ITAC); that Ms. Simon did confer with ITAC regarding the social marketing policy; that the policy has not yet been adopted. Ms. Coulombe stated that the Health District will work within the parameters of the approved guidelines when adopted.

Mr. Smith requested a list of the various websites utilized by the District Health Department.

Mr. Steve Fisher, Department Computer Application Specialist and Health Department Webmaster, advised that official Health District websites "has to go through a content management system at the County level to Mr. Chris Matthews, County Webmaster."

Dr. Todd stated that, as Mr. Fisher advised, there are "official County websites; however, there are others that CCHS utilizes and EPHP has one for the Medical Reserve Corps (MRC); that he would question if Mr. Smith's request is for all these.

Mr. Smith stated that he would request information as to all the various websites utilized by the Health District.

Ms. Coulombe advised that there are purchase orders associated with a number of websites; that Staff will provide this information to the Board.

The Board recessed at 12:30 pm and reconvened at 1:00 pm.

Dr. Khan reviewed her strategic issues for the Health District in detail as follows:

Community Partner Collaboration and Relationship Prioritization

Dr. Khan stated she would commend Staff on the presentations of "their divisional strategic priorities"; that she appreciated how there has been discussion regarding the importance of community partner collaboration. Dr. Khan stated that it is vital the Health District continue to pursue community partnerships within each Division, including partnerships with private industry.

Dr. Khan stated that based upon Nevada's high unemployment rate and a large uninsured or underinsured population she would encourage the CCHS Division to continue existing and to pursue new community partner collaborations, including improvement of childhood immunization rates. Dr. Khan stated that there are innovations in the delivery of services with which the Department can partner with other agencies to ensure services are available.

Ms. Brown stated that the CCHS does work "closely with community partners, including the Immunization Coalition, which is comprised of numerous providers; that collectively the Immunization Coalition and community partnering agencies have "made an impact." Ms. Brown stated she would concur with Dr. Khan "that the Health District cannot do it all."

Dr. Anderson stated she recently she and Dr. Todd were invited to give an H1N1 presentation to the Nevada Health Care Coalition during which she became aware of "this community partnership and all of the constituent organizations involved, including area hospitals, casinos, the airport, etc." Dr. Anderson stated that the Nevada Health Care Coalition indicated an interest in pursuing partnerships with the concept of "leveraging some of its organizational *clout* in partnering with the Association of State and Territorial Health Officers (ASTHO) and NACCHO (National Association of County and City Health Officials) in applying for grant funding to develop community-related issues.

Dr. Khan stated he would challenge the Divisions to continue to review and pursue partnerships in those areas where it is known "the District is short and there is a need"; that this could result in a "good brainstorming session as to innovative methods for assurances specific to public health." Dr. Khan stated that she would request Staff report back to the Board regarding "those areas in which innovative work is being accomplished."

Mr. Smith reviewed his strategic issues for the Health District in detail as follows:

Budget

Mr. Smith stated that the District's Budget continues to be an issue of concern; that the EHS Division is "very short on Staff"; that this is a "huge problem coming"; that the solid waste issues discussed "will be put on EHS." In response to Mr. Smith regarding monitoring the clean-up at schools should a school be closed because of an H1N1 outbreak, Mr. Sack advised in the event of a norovirus outbreak at a school, Staff would be actively involved in providing direction as to how the school should be cleaned. Mr. Sack stated that Dr. Todd's Staff would possibly be involved, too; that in the majority of outbreaks, with the exception of the H1N1, the EHS Division, CCHS Division and the EPHP Division would all be involved in the investigation.

Mr. Smith stated that these outbreaks occur with regular frequency; that with the current budget status he has concerns as to the District's ability to continue responding at a high level. Mr. Smith stated that the EPHP and CCHS Divisions are addressing the H1N1 crisis; that this is a tremendous workload issue.

In response to Mr. Smith, Dr. Todd stated the CCHS Division does have access to per diem nursing positions; however, there are no "per diem Epi positions" available to assist in addressing the increased call and fax volume occurring within the EPHP Division. Dr. Todd stated that it would be necessary for his Division to contract with temporary services.

Mr. Sack stated that the Divisions do work intra-divisionally; that EHS Staff will assist the EPHP Staff during an outbreak investigation; that CCHS Division Staff will be providing services for the H1N1 clinics.

Mr. Smith stated that he appreciates Staff "working together"; that it is important the divisional Staff work as teams; however, with diminished staffing there is the concern of Staff "being overloaded and stressed"; that this is all budget related. Mr. Smith stated that it is definitely "an opportunity for everyone to shine"; however, as he stated these issues are of concern because of the budget. In response to Mr. Smith regarding the Immunization Clinic "not being open five (5) days a week", Dr. Todd stated that Staff will be "taking advantage of the two (2) days per week that the Immunization Clinic is closed; that H1N1 clinics will be scheduled for those Tuesdays and Thursdays. In response to Mr. Smith regarding advising the public as to the clinics, Dr. Todd stated that once the vaccine has begun arriving the District will announce the clinics and will utilize all media outlets to publicize these clinics.

In response to Mr. Smith regarding the Immunization Clinic being closed on Tuesdays and Thursdays, Ms. Brown advised that although Staff is not providing immunizations at the Health Department on Tuesdays and Thursdays Staff is involved in providing immunizations on the "Take Care a Van", in the community, at schools, etc.

In response to the Board regarding Staff's comments for the divisional strategic priorities, Dr. Anderson advised that she will have a copy of the power point presentation with the notes forwarded to the Board members.

Ms. Ratti reviewed her strategic issues for the Health District in detail as follows:

Budget Planning by Scenarios

Ms. Ratti stated it is the responsibility to "hold the Health District to performance outcomes"; however, "it is difficult to know how to do this in this environment." Ms. Ratti stated due to the unforeseen variables "that could happen to the budget, she would question if it possible to do scenario budgeting; that she acknowledges this would a lot of extra work." Ms. Ratti stated that her concern is a possible Special Session of the Legislature, a possible reduction in assessment values of commercial and retail properties, etc., all of which can "change the status of the budget rather dramatically." Ms. Ratti stated that it may be appropriate to prepare proposed budgets at "a flat rate; 3%; 5%; 10% or a plan as to how those decisions will be made." Ms. Ratti advised that the City of Sparks is reviewing possible scenarios, also; that "she doesn't have a solution."

Dr. Anderson stated that it would be difficult to predict how a tax change would affect the Health District "by the time the changes trickled down to the Health District's budget."

In response to Ms. Jung regarding the Health District's reductions, Ms. Coulombe advised that the Health District was required to reduce the budget by 12% for FY 10.

Ms. Jung advised that the County will be reevaluating the tiered budget reduction process utilized last year, which is another variable; therefore, her suggestion would be "to be very generic" in any budgeting scenario, acknowledging limited Staff resources. Ms. Jung stated that recently Judge Adams ruled in favor of a tax "rollback" for residents of Incline Village; that the Board of County Commissioners will be reviewing this issue with legal counsel to determine if that ruling will be appealed; that this would result in a further reduction of \$13 million, which is not in the County budget. Ms. Jung stated that the County Assessor will also be reducing property assessment

throughout the County, again, reducing the County's income base. Ms. Jung stated that the County will be monitoring the possibility of a Special Session of the Legislature also. Ms. Jung stated that there is a State mining tax; however, those Counties which have mining and collect taxes retain those taxes and "do not distribute those taxes throughout the State." Ms. Jung stated that this is a concern for everyone.

Ms. Coulombe advised that "what is known is the transfer of \$8.4"; that the best scenario would be for this amount to "remain flat", which would equate to "a reduction" for the District. Ms. Coulombe stated that during the budgeting process Staff can discuss the possibility of reductions of 5%, 10% and 15%; that Staff can discuss these various budgeting scenarios.

Ms. Ratti stated that this would assist the Board in making decisions during the budget meeting.

Chairman Humphreys stated that it is important the Board receive this information as soon as Staff can as it does allow the Board to be aware "of what it has to work with to allow the Board to be proactive in making decisions."

Ms. Jung was excused at 1:15 pm.

In response to Mr. Smith regarding whether the funding for the H1N1 response represents a cost saving for the budget, Dr. Todd advised that the funding received in the Centers for Disease Control (CDC) and Prevention from the Assistant Secretary for Preparedness and Response (ASPR) cannot be utilized to off-set other costs. Dr. Todd stated that the funding will be utilized to assist "in backfilling the positions for the use of the nurses in Ms. Brown's Division to staff the H1N1 clinics."

Mr. Gustin stated that the City of Reno did scenario budget planning based upon "5-10% and determining the service level that can be provided" with those rates of reduction; that "it is the smartest and easiest way to go about it."

Ms. Coulombe advised that Staff will present this information to the Board in a timely manner.

In response to Mr. Smith regarding why the food industry is not "paying for the costs associated with conducting the required inspections", Mr. Sack advised that the current fees "are set at the maximum allowed to be charged by law." Mr. Sack stated that the District cannot "charge for disease and foodborne illness outbreak(s) and subsequent investigations; complaints, programs costs, etc." Mr. Sack stated that "his counterpart at the State is directed by the Legislature to develop a fee structure which supports the programs."

REMSA

Ms. Ratti stated that after reviewing the REMSA Franchise Agreement and the Interlocal Agreement she would question the level of "oversight by the Health District in the provision of emergency medical services within the community". Ms. Ratti stated that she would request "a year long process in which the Health District reviews/evaluates its relationship with REMSA."

Chairman Humphreys stated that the issue is "what is the District's responsibility and charge in regard to REMSA"; that the District Health Department "holds the Franchise and it is the District's responsibility to oversee that Franchise to ensure REMSA is in full compliance with the parameters of that Franchise." Chairman Humphreys stated that REMSA "has its own Governing Board, responsible for the issues of the REMSA business"; that it is important the District "doesn't cross those lines." Chairman Humphreys stated that for the new Board members the "initial step would be to review the Franchise and the requirements of that."

Ms. Ratti stated her concern is that "not everything needed for the Franchise Agreement is in the Franchise Agreement; that the Franchise Agreement itself is not providing the oversight of emergency medical services needed." Ms. Ratti stated that the Cities and the County have delegated "emergency medical management roles outlined by Nevada Statute to the Board of Health."

In response to Mr. Gustin regarding the length of the Franchise Agreement, Ms. Leslie Admirand, Deputy District Attorney, advised that there is not an expiration date for the Franchise Agreement; that it renews automatically.

Ms. Coulombe advised that Staff reviews REMSA's compliance with the Franchise Agreement and presents and annual compliance report to the Board for review and acceptance.

MOTION: Mr. Gustin moved, seconded by Mr. Smith, that the strategic issues of the District Board of Health members be accepted as presented and discussed.

Motion carried unanimously.

DISCUSSION – DIRECTION TO STAFF – OUTCOMES AND PERFORMANCE MEASURES

Chairman Humphreys stated that in previous discussion as to the “outcomes and performance measures” the term “dash board indicators” has been utilized; that currently the County is in the process of “working on those dashboard indicators.”

Mr. Gustin stated that Ms. Brown has previously referred to “the levels of attainment being achieved”; that rather than an entire overview of a program he would prefer “an executive summary scorecard.”

Ms. Brown stated that it is important to “measure to ensure certain performance levels have been achieved”; that others are to determine where improvement is necessary; and some are required for funding.

Ms. Coulombe stated that the Board members were provided with the document specific to outcome performance measures, which Staff had been directed to complete at last year’s Strategic Planning Session. Ms. Coulombe stated that with the continuing budgetary issues this year Staff has not been able to complete that document; therefore, she would request the Board approve the discontinuation of that process in lieu of the new process being discussed.

In response to Ms. Ratti regarding “a process clarification for the long-term goals in the budget book”, Ms. Coulombe advised that Staff would request direction as to “the performance measures the Board would request.” Ms. Coulombe advised that the first Tab in the budget book delineates the County’s at a divisional level; that Tab 7 is “at the program level.” Ms. Coulombe advised that Tab 6 are the performance measures for the adopted budget, which were presented in March; that Tab 8, which are the financials in numeric order, will be revised and integrated by program resulting in the “funding and the activity being presented together.”

Dr. Anderson stated that the performance measures document presented by Ms. Coulombe was developed utilizing information from the NACCHO ‘Operational Definition of a functional local health department’, the Nevada Annual Budget FY 2008-2009 Health Fund, the Washoe County Strategic Plan 2006-2008; and the Washoe County Strategic Plan 2008-2010, presented to the

Board last year. Dr. Anderson stated that Staff "attempted to tie all these together"; however, the various plans did not "take into account Staff did not have control over outcomes."

Dr. Furman stated that, as Staff has indicated, there were goals established in (Healthy People) 2010 for which the Health Department has no control (i.e., reducing the number of premature births). Dr. Furman stated that more important is the data specific to productivity (i.e., number of immunizations administered, number of contacts achieved, etc.), is a "better evaluation tool rather than generalities."

Dr. Khan stated that regardless of the scorecard being presented quarterly, semi-annually, or annually the goal is to present measurable performance achievements within programs to determine how the Health District "is doing in what has been identified as key areas of performance or outcomes that are being tracked." Dr. Khan stated an example would be demonstrating "that there has been a 30% improvement in previous immunization rates or there has been a reduction in the first quarter's rates of immunizations." Dr. Khan stated that this information will assist the Board "in better understanding of how the Health District is doing allowing the Board to provide support to the District."

**MOTION: Mr. Smith moved, seconded by Mr. Gustin, that the performance standards format approved by the Board of Health during the 2008 Strategic Planning Session, be discontinued in lieu of the County's pending 'dashboard indicators' concept. It was further ordered that upon completion of the County's 'dashboard indicators' those be presented to the Board of Health for review and consideration.
Motion carried unanimously.**

CLOSING COMMENTS – STRATEGIC RETREAT – BOARD MEMBERS AND STAFF

Chairman Humphreys stated that he would thank and commend Staff for the time and effort in preparing for the Strategic Planning Session and "what lies ahead, voicing their issues and concerns, particularly in view of the budget crisis." Chairman Humphreys stated that "he appreciates Staff keeping the Board informed throughout the year as to what the concerns are allowing the Board to 'keep a step ahead' as much as possible in regard to the decisions that have to be made." Chairman Humphreys stated he would commend Dr. Anderson for her leadership and dedication of herself and her Staff in working through the challenges.

Chairman Humphreys stated that he appreciates the Board members' dedication, and knowledge provided by each member.

Dr. Furman stated that although he may "seem quite critical at times, there have been tremendous activities occurring at the Health District and within the Divisions in the last year."

Mr. Gustin stated that he has always "appreciated institutional knowledge; that this is important"; that the dynamics of the Board continues to evolve; that the current membership of the Board "is much more interactive than what it was five (5) years ago when he first became a member." Mr. Gustin stated that this has been "very positive"; that the Staff has always been responsive to the Board members requests individually and as a whole. Mr. Gustin stated that Dr. Anderson's leadership has been a component of the Board being more and more proactive.

ACCEPTANCE – FEDERAL FUNDING

Ms. Patsy Buxton, Fiscal Compliance Officer, advised that Staff recommends the Board **accept Federal Funding totaling \$1,688,166 from the Centers for Disease Control and Prevention (CDC) and \$53,000 from Assistant Secretary for Preparedness and Response (ASPR) to prepare for and respond to H1N1; approval of amendments totaling an increase of \$585,283 in both revenue and expenses to the H1N1 Phase 1&2, Focus Area 1 Grant Program, Internal Order I0780 FY 10 Budget; approval of amendments totaling an increase of \$50,000 in both revenue and expense to the H1N1 Phase 1&2, Focus Area 2 Grant Program, Internal Order 10781 FY 10 Budget; approval of amendments totaling an increase of \$1,052,883 in both revenue and expense to the H1N1 Phase 3 Grant Program, Internal Order 10782 FY 10 Budget; and approval for the authorization for the creation of an on call Registered Nurse Intermittent Hourly position (PC# TBD), as evaluated by the Job Evaluation Committee (JEC).** Ms. Buxton stated that this item will be presented to the Board of County Commissioners next Tuesday.

In response to Ms. Ratti regarding any consequences for being unable to expend the funds, Dr. Todd stated that the funds would then revert to the State.

Ms. Buxton advised that the "time frame for the award(s) will be retroactive to July 31, 2009; however, Staff is unaware of the end of the project period will be." In response to Ms. Coulombe regarding the grant, Ms. Buxton advised that it is a reimbursement based grant and not an advance

Chairman Humphreys advised that Staff has provided the language for the motion, which "is critical."

MOTION: Ms. Ratti moved, seconded by Mr. Gustin, that the Board accept Federal Funding totaling \$1,688,166 from the Centers for Disease Control

and Prevention (CDC) and \$53,000 from Assistant Secretary for Preparedness and Response (ASPR) to prepare for and respond to H1N1; approve amendments totaling an increase of \$585,283 in both revenue and expenses to the H1N1 Phase 1&2, Focus Area 1 Grant Program, Internal Order 10780 FY 10 Budget; approve amendments totaling an increase of \$50,000 in both revenue and expenses to the H1N1 Phase 1&2, Focus Area 2 Grant Program, Internal Order 10781 FY 10 Budget; approve amendments totaling an increase of \$1,052,883 in both revenue and expense to the H1N1 Phase 3 Grant Program, Internal Order 10782 FY 10 Budget; authorizing the creation of an on call Registered Nurse Intermittent Hourly position (PC#TBD), as evaluated by the Job Evaluation Committee (JEC).

Motion carried unanimously.

DISCUSSION – PROCESS – SELECTION – MANAGEMENT APPRAISAL FORM – DISTRICT HEALTH OFFICER'S ANNUAL REVIEW – POSSIBLE DIRECTION TO STAFF

Chairman Humphreys advised that the Board members have been provided with copies of two (2) evaluation forms for consideration for use in Dr. Anderson's annual performance appraisal. Chairman Humphreys stated that one (1) is the form the Board has used for several years; that the other is utilized by Washoe County for the County Manager's annual evaluation. Chairman Humphreys stated that it is necessary for the Board to determine which form it will utilize to proceed with Dr. Anderson's annual performance evaluation.

In the discussion that followed, it was the consensus of Staff that a 360° evaluation allows for more "feed-back."

MOTION: Dr. Khan moved, seconded by Mr. Smith, that the management evaluation form, utilized by the County for the County Manager's annual appraisal be utilized by the Board of Health in conducting the annual performance evaluation of Dr. Anderson in her capacity as the District Health Officer. Motion carried unanimously.

BOARD COMMENT

Chairman Humphreys advised that the Board has requested updates on illegal food vendors and the status of enforcement; an update on the Health District's Waste Management Plan, including Materials Recycling Facilities (MRFs).

WASHOE COUNTY DISTRICT BOARD OF HEALTH STRATEGIC PLANNING MEETING


October 8, 2009

Page 32


Mr. Sack stated that Staff will provide the Board with an orientation of the Health District's authority and the Solid Waste Management Regulations.

Chairman Humphreys stated the Board has requested an update "on the recruitment of hard to replace positions"; the status of registering birth records; and the REMSA Franchise Agreement for discussion and review.

There being no further business to come before the Board, the meeting was adjourned at 2:00 pm.



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



JANET SMITH
RECORDER

10/8/09
Sign-In - Please Print

Name

Agency

SPIKE Pogue

433 LLC

BRAD CAPURRO

433, LLC

Keith Capurro

433 LLC

Bryan

WCHD

Howe Cooke

WCHD

Jeanne Rucker

wchd

Patsy Burton

WCHD

Eileen Coulombe

WCHD

**Materials Recovery Facility For Truckee Meadows
Reno City Council Proposal Overview
September 9, 2009**

**Prepared By:
Four Thirty-Three, LLC**

5-#WATI
HOBB
9/8/09

The Objective: Leadership In Sustainability

- Our vision is to partner with local government to build and operate a state-of-the-art Materials Recovery Facility (“MRF”) to serve the Truckee Meadows using advanced recycling technology to sort and separate Municipal Solid Waste (“MSW”).
- A MRF is a specialized facility that receives and separates mixed solid waste -- garbage and trash -- and extracts recyclable materials from the MSW for market or alternative uses such as energy production.
- This type of MRF will be the first of its kind in Northern Nevada and will capture as much recyclable material as possible, minimize landfill dependence and help create a more sustainable community.
- Of all the waste that is produced in the Truckee Meadows only an extremely small percentage is diverted from our local landfill. The MRF will achieve extremely high recycling and recovery rates.

Facility Overview



- The MRF will be an approximately 50,000 to 75,000 square foot facility located on a 5 to 10 acre site. The facility will be completely indoors and clean. The structures will have an aesthetically pleasing architectural design modeled after the Roseville facility.

Facility Overview



- The proposed MRF will allow the community to recycle and recover materials from a single container collection format, thus reducing transportation costs, energy use, traffic congestion and pollution while optimizing reuse of the MSW stream.
 - Most effective and efficient form of recovery.
 - Allows consistent access to 100 percent of available recyclables.
 - Provides feedstock for alternative energy or biofuels production.
 - A flexible platform to address market and technology changes.

Facility Overview

- The MRF will process approximately 400 to 500 tons of MSW per working day and will provide a recycling facility the entire community can utilize on a daily basis.
- This facility has been designed to achieve up to 90 percent recovery of all in-bound waste.



Facility Overview



- The estimated project cost for the MRF is upwards of \$15 million.
- The facility will immediately create local jobs.

Facility Overview



- The facility will include a public buy-back center where materials will be accepted for purchase and provide responsible disposal options for hard to dispose of items like latex paint, household batteries and antifreeze.

Facility Overview

- The MRF plans to supply prepared feedstock to firms that are in the process of building alternative energy plants in Northern Nevada.
- These alternative energy plants will produce fuel and electricity that can be consumed by the local community.
- These plants produce near zero emissions and generate cost effective renewable power. These plants can be expanded in the future to handle more waste.



Proposal Overview

- Collection of garbage from homes and businesses will continue in the same manner as currently occurs. A certain percentage of the garbage, instead of going to a traditional transfer station and to a landfill, would be delivered to the MRF pursuant to regulatory directives of the Washoe County District Board of Health (the “Health Board”) and the City.
- At the MRF, (i) garbage will be sorted; (ii) recyclable material would be cleaned and bundled for shipment to the proper recycled material processors; (iii) suitable materials would be sorted for use in alternative energy production; and (iv) the remaining material would be transported to the landfill by the existing franchisees.
- The materials received at the MRF will be processed within 24 hours of delivery of garbage to the MRF.

Proposal Overview

- The Company would enter into a long-term ground lease at fair market value with the City for the MRF site.
 - The lease would provide the City with an opportunity to purchase the operation of the MRF from the Company.
- The Company would also pay the local governments an assessment tied to the relative amount of MSW each municipality and the County diverts for processing at the MRF.
- The Company will arrange financing, development and construction of the MRF on the site.
- The local governments will not be required to make any capital contributions, extend credit or act as a surety.

MRF Location



- Two locations have been identified as potential sites for the MRF. Each potential site is near the existing transfer station at Commercial Row and Sutro and involves City-owned parcels. Each potential site would require the City's support for some zoning changes and a special use permit.

The City's Contributions to the Plan

- Support the adoption of a Health Board regulation setting a county-wide mandate for diversion for processing of a minimum of 250 tons per working day of the solid waste stream from commercial and residential collection to the MRF.
- Support amendments to the Reno City Code to –
 - Facilitate a MRF within Reno.
 - Direct the municipal garbage franchisee to divert to the MRF at least 150 tons and up to 250 tons per working day of the garbage generated by commercial customers of the franchisee.
 - Establish through recycling fees or other means funding that will support the capital and operating costs of the MRF, such as a surcharge on monthly fees paid by residential, business and commercial customers of the municipal garbage franchisee and demolition fees on building permits.
- Support similar amendments to the Washoe County Code and the Sparks City Code.

Benefits For Our Communities

- Allows local government to gain control of its waste stream.
 - Public Health & Safety
 - Waste Derived Pestilence
 - Development of Sanitary Disposal System
 - Liability
 - Groundwater Contamination
 - Methane Gas Migration
 - Resource Conservation & Recovery Act (RCRA)

Benefits For Our Communities

- Cities and the County capture new revenues through diversion fees.
 - Recycling; Valuable Commodities (25 percent of stream)
Current Residential Recycling Stream
Value = \$80 / \$90 per ton
 - Refuse – Organics – C&D Materials (75 percent of stream)
 - Formerly viewed only as expense; Now recognized to have value
 - Large companies are touting their movement away from the “landfill disposal” orientation and toward “green” energy production.
- Fosters a more competitive environment for management of MSW in the future.

Benefits For Our Communities

- Provides a platform for accurate daily recycling data.
- Promotes “Green Community” and “Green Technology” businesses.
 - Dramatically increases recycling rates and uses waste to create renewable energy to power homes and businesses in our community.
 - Expands the types of materials beyond plastic bottles, cans, paper and cardboard that can be re-used rather than landfilled.
 - Creates use for food waste, plastic bags, green waste, old carpet, styrofoam and packaging materials.
 - Will create local job opportunities.
 - Attract businesses and conventions to the Truckee Meadows, and our community will stand out as a leader in sustainability.

**WASHOE COUNTY
DISTRICT BOARD OF HEALTH**

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

A G E N D A

Meeting of the
DISTRICT BOARD OF HEALTH
Bartley Ranch -Brick House
6000 Bartley Ranch Road
Reno, NV 89511

Thursday, October 8, 2009

9:00 AM

NOTICE

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

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

Business Impact Statement – A Business Impact Statement is available at the Washoe County Health District for those items denoted with a “\$.”

THE CHAIRMAN MAY CALL FOR LUNCH AT HIS DISCRETION

- | | | |
|---------------|--|---------------|
| 9:00AM | 1. Call to Order, Pledge of Allegiance Led by Invitation | Dr. Humphreys |
| | 2. Roll Call | Ms. Smith |
| | 3. Public Comment (3 minute time limit per person) | Dr. Humphreys |
| | 4. Approval/Deletions to the Agenda for October 8, 2009 (action) | Dr. Humphreys |
| | 5. Welcome and Opening Remarks for the Annual DBOH Strategic Retreat | Dr. Anderson |
| | 6. Orientation to the Strategic Retreat Binder | Ms. Coulombe |
| | 7. Review and Discussion of the Washoe County Health District's Vision and Mission with Possible Direction to Staff (action) | Dr. Anderson |

8. Review and Discussion of the Washoe County Health District's Staff Strategic Issues with Possible Direction to Staff , including but not limited to:

Dr. Anderson,
Ms. Coulombe
Mr. Goodrich
Ms. Brown
Mr. Sack
Dr. Todd

AHS

- Stability of the Health Fund
- Data & performance measurement quality

AQM

- Anticipated public policy changes
- Service evaluation & alignment

CCHS

- Efficient program operations
- Collaboration & integration of services
- Population-based health initiatives.

EHS

- Environmental Staffing
- Regulatory Issues

EPHP

- Pandemic Influenza
- Epidemiology Staffing
- Policy Changes in Vital Records

DHO

- Workforce
- Infrastructure-present & future
- Future fiscal climate

(action)

9. Review and Discussion of the Washoe County Health District's Board Member Strategic Issues with Possible Direction to Staff, including but not limited to:

DBOH Board Members

Dr. George Furman

- Nuisance Ordinance
- Cooperation Among Departments
- Budget Impacts on Department

Commissioner Kitty Jung

- Mandatory Recycling

Councilman Dan Gustin

- Materials Resource Facilities (MRF)
- Social Marketing

Dr. Amy Khan

- Community Partner Collaboration
- Relationship Prioritization

Matt Smith

- Budget

Councilwoman Julia Ratti

- Budget Planning by Scenarios
- REMSA

(action)

- | | |
|--|------------------------------|
| 10. Discussion with Possible Direction to Staff Regarding Outcomes and Performance Measurement (action) | DBOH Board Members,
Staff |
| 11. Closing Comments Regarding Strategic Retreat by Board Members and Staff | Dr. Humphreys |
| 12. Acceptance of Federal Funding totaling \$1,688,166 from the Centers for Disease Control and Prevention (CDC) and \$53,000 from Assistant Secretary for Preparedness and Response (ASPR) to prepare for and respond to H1N1; Approval of amendments totaling an increase of \$585,283 in both revenue and expenses to the H1N1 Phase 1&2, Focus Area 1 Grant Program, Internal Order 10780 FY10 Budget; Approval of amendments totaling an increase of \$50,000 in both revenue and expense to the H1N1 Phase 1&2, Focus Area 2 Grant Program, Internal Order 10781 FY10 Budget; Approval of amendments totaling an increase of \$1,052,883 in both revenue and expense to the H1N1 Phase 3 Grant Program, Internal Order 10782 FY10 Budget; and Authorize the creation of an on call Registered Nurse Intermittent Hourly position, (PC#TBD) as evaluated by the Job Evaluation Committee (JEC). (action) | Ms. Buxton |
| 13. Discussion of Process and Selection of Management Appraisal Form for District Health Officer's Annual Review with Possible Direction to Staff (action) | Dr. Humphreys |
| 14. Board Comment Limited to Announcements or Issues for Future Agendas | Dr. Humphreys |
| 15. Adjournment (action) | Dr. Humphreys |

NOTE:

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 District Health Department, 1001 East Ninth Street, Building "B", Reno, NV 89512 or by calling 328-2416.

Washoe County

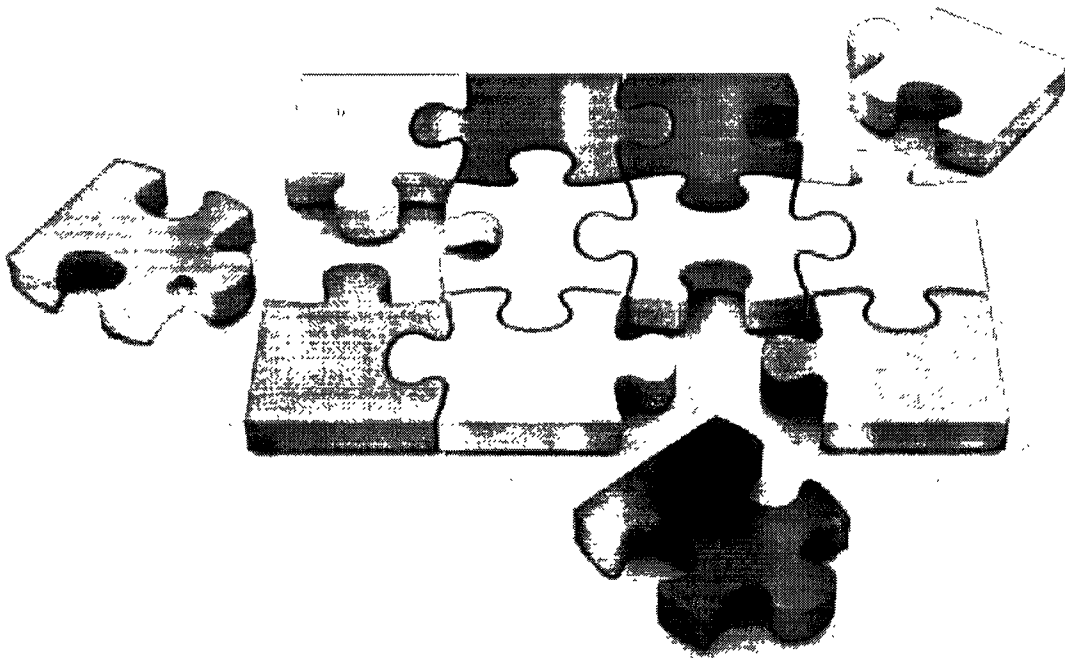


Health District



Public Health
Prevent. Promote. Protect

Washoe County District Board of Health



Strategic Planning Retreat October 8, 2009

WASHOE COUNTY HEALTH DISTRICT

Washoe County

Mission

The Washoe County Health District protects and enhances the physical well being and quality of life for all citizens of Washoe County through providing health promotion, disease prevention, public health emergency preparedness, and environmental services.

Vision

We are leaders in a unified community committed to optimal human and environmental health.

Health District

DISTRICT BOARD OF HEALTH

Goals

The Health District will assist the citizens to realize the priorities by achieving the following goals:

- ◆ Educate the community about public health and the services provided by the Health District
- ◆ Serve the public through enhanced use of technology
- ◆ Enhance collaborations with community groups and constituents
- ◆ Recruit, retain and develop a competent public health workforce
- ◆ Seek funding and resource development opportunities
- ◆ Promote planning and activities to support a sustainable healthy community

Operational Objectives

1. Assuring fiscal responsibility for the Health District.
2. Prioritizing programs and services such that the greatest weight is given to those that are legally mandated, followed by those that represent a core function of public health and/or an essential public health service as defined by CDC, NACCHO, ASTHO, and others, followed by those programs and services that accomplish a strategic goal established by this Board.
3. Assuring that all programs and/or services of the Health District are periodically evaluated.

WASHOE COUNTY HEALTH DISTRICT FY 09/10 BUDGET - ACTUAL

445,660

PROGRAMS	FY 10	Grants		Fees		Revenue Total	County General Fund (GF)	Prog. Exp. as % of Total Dept. Exp.	% Grants % Fees % of GF			GF Per Capita
Administrative Health Services	\$ 1,560,938	\$ -	\$ 650	\$ -	\$ 650	\$ 650	\$ 1,560,288	8.1%	0%	0%	100%	\$ 3.50
Air Quality Management	\$ 2,122,368	\$ 961,349	\$ 715,032	\$ -	\$ 1,676,381	\$ 1,676,381	\$ 445,987	11.1%	45%	34%	21%	\$ 1.00
Child Abuse & Neglect Prevention	\$ 101,071	\$ 101,071	\$ -	\$ -	\$ 101,071	\$ 101,071	\$ -	0.5%	100%	0%	0%	\$ -
Chronic Disease & Tobacco Control	\$ 550,334	\$ 300,320	\$ -	\$ -	\$ 300,320	\$ 300,320	\$ 250,014	2.9%	55%	0%	45%	\$ 0.56
Community & Clinical Health Services	\$ 593,559	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 593,559	3.1%	0%	0%	100%	\$ 1.33
Emergency Medical Services	\$ 34,517	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 34,517	0.2%	0%	0%	100%	\$ 0.08
Environmental Health Services	\$ 1,967,054	\$ -	\$ 514,001	\$ -	\$ 514,001	\$ 514,001	\$ 1,453,053	10.3%	0%	26%	74%	\$ 3.26
Epidemiological Surveillance	\$ 542,768	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 542,768	2.8%	0%	0%	100%	\$ 1.22
Family Planning & Teen Health Mail	\$ 922,986	\$ 729,078	\$ 121,000	\$ -	\$ 850,078	\$ 850,078	\$ 72,908	4.8%	79%	13%	8%	\$ 0.16
Food Protection	\$ 1,761,506	\$ -	\$ 431,000	\$ -	\$ 431,000	\$ 431,000	\$ 1,330,506	9.2%	0%	24%	76%	\$ 2.99
Hazardous Materials	\$ 75,000	\$ 75,000	\$ -	\$ -	\$ 75,000	\$ 75,000	\$ -	0.4%	100%	0%	0%	\$ -
Home Visiting	\$ 474,693	\$ 63,658	\$ 12,500	\$ -	\$ 76,158	\$ 76,158	\$ 398,535	2.5%	13%	3%	84%	\$ 0.89
Immunizations	\$ 1,348,194	\$ 369,550	\$ 325,000	\$ -	\$ 694,550	\$ 694,550	\$ 653,644	7.0%	27%	24%	48%	\$ 1.47
Public Health Preparedness	\$ 1,418,796	\$ 1,418,796	\$ -	\$ -	\$ 1,418,796	\$ 1,418,796	\$ -	7.4%	100%	0%	0%	\$ -
Safe Drinking Water	\$ 238,981	\$ 90,000	\$ 12,000	\$ -	\$ 102,000	\$ 102,000	\$ 136,981	1.2%	38%	5%	57%	\$ 0.31
Sexual Health - HIV	\$ 698,410	\$ 698,410	\$ -	\$ -	\$ 698,410	\$ 698,410	\$ -	3.6%	100%	0%	0%	\$ -
Sexual Health - STD	\$ 630,179	\$ 115,022	\$ 38,000	\$ -	\$ 153,022	\$ 153,022	\$ 477,157	3.3%	18%	6%	76%	\$ 1.07
Solid Waste Management	\$ 486,586	\$ 370,535	\$ 62,000	\$ -	\$ 432,535	\$ 432,535	\$ 54,051	2.5%	76%	13%	11%	\$ 0.12
Tuberculosis	\$ 554,172	\$ 186,089	\$ 13,000	\$ -	\$ 199,089	\$ 199,089	\$ 355,083	2.9%	34%	2%	64%	\$ 0.80
Underground Storage Tanks	\$ 187,000	\$ 187,000	\$ -	\$ -	\$ 187,000	\$ 187,000	\$ -	1.0%	100%	0%	0%	\$ -
Vector Control (with 1/2 Cent)	\$ 1,308,685	\$ -	\$ 64,000	\$ -	\$ 64,000	\$ 64,000	\$ 1,244,685	6.8%	0%	5%	95%	\$ 2.79
Vital Statistics	\$ 166,039	\$ -	\$ 215,000	\$ -	\$ 215,000	\$ 215,000	\$ (48,961)	0.9%	0%	129%	-29%	\$ (0.11)
Women, Infants and Children	\$ 1,410,635	\$ 1,200,096	\$ -	\$ -	\$ 1,200,096	\$ 1,200,096	\$ 210,539	7.4%	85%	0%	15%	\$ 0.47
Total	\$19,154,470	\$6,865,972	\$2,523,183	\$9,389,155	\$9,389,155	\$9,389,155	\$9,765,314	100.0%	36%	13%	51%	\$ 21.91

WASHOE COUNTY HEALTH DISTRICT FY 09/10 BUDGET - ACTUAL

PROGRAMS	FY 10		Fees		Revenue Total	County General Fund (GF)	Prog. Exp. as % of Total Dept. Exp.	% Grants % Fees % of GF			GF Per Capita	Adopted FY09	Chg FY09 To FY10
			Grants					% Grants	% Fees	% of GF			
Administrative Health Services	\$ 1,560,938	\$ 650	\$ -	\$ 650	\$ 650	\$ 1,560,288	8.1%	0%	0%	100%	\$ 3.50	\$ 3.43	\$ 0.07
Air Quality Management	\$ 2,122,368	\$ 715,032	\$ 961,349	\$ 715,032	\$ 1,676,381	\$ 445,987	11.1%	45%	34%	21%	\$ 1.00	\$ 0.82	\$ 0.18
Child Abuse & Neglect Prevention	\$ 101,071	\$ -	\$ 101,071	\$ -	\$ 101,071	\$ -	0.5%	100%	0%	0%	\$ -	\$ -	\$ -
Chronic Disease & Tobacco Control	\$ 550,334	\$ -	\$ 300,320	\$ -	\$ 300,320	\$ 250,014	2.9%	55%	0%	45%	\$ 0.56	\$ 0.29	\$ 0.27
Community & Clinical Health Services	\$ 593,559	\$ -	\$ -	\$ -	\$ -	\$ 593,559	3.1%	0%	0%	100%	\$ 1.33	\$ 1.66	\$ (0.23)
Emergency Medical Services	\$ 34,517	\$ -	\$ -	\$ -	\$ -	\$ 34,517	0.2%	0%	0%	100%	\$ 0.08	\$ 0.31	\$ (0.23)
Environmental Health Services	\$ 1,967,054	\$ 514,001	\$ -	\$ 514,001	\$ 514,001	\$ 1,453,053	10.3%	0%	26%	74%	\$ 3.26	\$ 6.08	\$ (2.82)
Epidemiological Surveillance	\$ 542,768	\$ -	\$ -	\$ -	\$ -	\$ 542,768	2.8%	0%	0%	100%	\$ 1.22	\$ 1.28	\$ (0.06)
Family Planning & Teen Health Mail	\$ 922,986	\$ 121,000	\$ 729,078	\$ 121,000	\$ 850,078	\$ 72,908	4.8%	79%	13%	8%	\$ 0.16	\$ 0.89	\$ (0.73)
Food Protection	\$ 1,761,506	\$ 431,000	\$ -	\$ 431,000	\$ 431,000	\$ 1,330,506	9.2%	0%	24%	76%	\$ 2.99	\$ -	\$ 2.99
Hazardous Materials	\$ 75,000	\$ -	\$ 75,000	\$ -	\$ 75,000	\$ -	0.4%	100%	0%	0%	\$ -	\$ -	\$ -
Home Visiting	\$ 474,693	\$ 12,500	\$ 63,658	\$ 12,500	\$ 76,158	\$ 398,535	2.5%	13%	3%	84%	\$ 0.89	\$ 2.66	\$ (1.77)
Immunizations	\$ 1,348,194	\$ 325,000	\$ 369,550	\$ 325,000	\$ 694,550	\$ 653,644	7.0%	27%	24%	48%	\$ 1.47	\$ 0.98	\$ 0.49
Public Health Preparedness	\$ 1,418,796	\$ -	\$ 1,418,796	\$ -	\$ 1,418,796	\$ -	7.4%	100%	0%	0%	\$ -	\$ -	\$ -
Safe Drinking Water	\$ 238,981	\$ 12,000	\$ 90,000	\$ 12,000	\$ 102,000	\$ 136,981	1.2%	38%	5%	57%	\$ 0.31	\$ 0.08	\$ 0.23
Sexual Health - HIV	\$ 698,410	\$ -	\$ 698,410	\$ -	\$ 698,410	\$ -	3.6%	100%	0%	0%	\$ -	\$ -	\$ -
Sexual Health - STD	\$ 630,179	\$ 38,000	\$ 115,022	\$ 38,000	\$ 153,022	\$ 477,157	3.3%	18%	6%	76%	\$ 1.07	\$ 1.03	\$ 0.04
Solid Waste Management	\$ 486,586	\$ 62,000	\$ 370,535	\$ 62,000	\$ 432,535	\$ 54,051	2.5%	76%	13%	11%	\$ 0.12	\$ (0.12)	\$ 0.24
Tuberculosis	\$ 554,172	\$ 13,000	\$ 186,089	\$ 13,000	\$ 199,089	\$ 355,083	2.9%	34%	2%	64%	\$ 0.80	\$ 0.65	\$ 0.15
Underground Storage Tanks	\$ 187,000	\$ -	\$ 187,000	\$ -	\$ 187,000	\$ -	1.0%	100%	0%	0%	\$ -	\$ -	\$ -
Vector Control (with 1/2 Cent)	\$ 1,308,685	\$ 64,000	\$ -	\$ 64,000	\$ 64,000	\$ 1,244,685	6.8%	0%	5%	95%	\$ 2.79	\$ 2.71	\$ 0.08
Vital Statistics	\$ 166,039	\$ 215,000	\$ -	\$ 215,000	\$ 215,000	\$ (48,961)	0.9%	0%	129%	-29%	\$ (0.11)	\$ (0.16)	\$ 0.05
Women, Infants and Children	\$ 1,410,635	\$ -	\$ 1,200,096	\$ -	\$ 1,200,096	\$ 210,539	7.4%	85%	0%	15%	\$ 0.47	\$ 0.68	\$ (0.21)
Total	\$18,154,470	\$2,523,183	\$6,865,972	\$2,523,183	\$9,389,155	\$ 9,765,314	100.0%	36%	13%	51%	\$ 21.91	\$ 23.99	\$ (2.08)

445,660

435,535

10,125

WASHOE COUNTY HEALTH DISTRICT FY 09/10 BUDGET - SORTED BY GENERAL FUND & PER CAPITA

445,660

PROGRAMS	FY 10	Grants	Fees	Revenue Total	County General Fund (GF)	Prog. Exp. as % of Total Dept. Exp.	% Grants	% Fees	% of GF	GF Per Capita
Administrative Health Services	\$ 1,560,938	\$ -	\$ 650	\$ 650	\$ 1,560,288	8.1%	0%	0%	100%	\$ 3.50
Environmental Health Services	\$ 1,967,054	\$ -	\$ 514,001	\$ 514,001	\$ 1,453,053	10.3%	0%	26%	74%	\$ 3.26
Food Protection	\$ 1,761,506	\$ -	\$ 431,000	\$ 431,000	\$ 1,330,506	9.2%	0%	24%	76%	\$ 2.99
Vector Control (with 1/2 Cent)	\$ 1,308,655	\$ -	\$ 64,000	\$ 64,000	\$ 1,244,655	6.8%	0%	5%	95%	\$ 2.79
Immunizations	\$ 1,348,194	\$ 369,550	\$ 325,000	\$ 694,550	\$ 653,644	7.0%	27%	24%	48%	\$ 1.47
Community & Clinical Health Services	\$ 593,559	\$ -	\$ -	\$ -	\$ 593,559	3.1%	0%	0%	100%	\$ 1.33
Epidemiological Surveillance	\$ 542,768	\$ -	\$ -	\$ -	\$ 542,768	2.8%	0%	0%	100%	\$ 1.22
Sexual Health - STD	\$ 630,179	\$ 115,022	\$ 38,000	\$ 153,022	\$ 477,157	3.3%	18%	6%	76%	\$ 1.07
Air Quality Management	\$ 2,122,368	\$ 961,349	\$ 715,032	\$ 1,676,381	\$ 445,987	11.1%	45%	34%	21%	\$ 1.00
Home Visiting	\$ 474,693	\$ 63,658	\$ 12,500	\$ 76,158	\$ 398,535	2.5%	13%	3%	84%	\$ 0.89
Tuberculosis	\$ 554,172	\$ 186,089	\$ 13,000	\$ 199,089	\$ 355,083	2.9%	34%	2%	64%	\$ 0.80
Chronic Disease & Tobacco Control	\$ 550,334	\$ 300,320	\$ -	\$ 300,320	\$ 250,014	2.9%	55%	0%	45%	\$ 0.56
Women, Infants and Children	\$ 1,410,635	\$ 1,200,096	\$ -	\$ 1,200,096	\$ 210,539	7.4%	85%	0%	15%	\$ 0.47
Safe Drinking Water	\$ 238,981	\$ 90,000	\$ 12,000	\$ 102,000	\$ 136,981	1.2%	38%	5%	57%	\$ 0.31
Family Planning & Teen Health Mall	\$ 922,986	\$ 729,078	\$ 121,000	\$ 850,078	\$ 72,908	4.8%	79%	13%	8%	\$ 0.16
Solid Waste Management	\$ 486,586	\$ 370,535	\$ 62,000	\$ 432,535	\$ 54,051	2.5%	76%	13%	11%	\$ 0.12
Emergency Medical Services	\$ 34,517	\$ -	\$ -	\$ -	\$ 34,517	0.2%	0%	0%	100%	\$ 0.08
Child Abuse & Neglect Prevention	\$ 101,071	\$ 101,071	\$ -	\$ 101,071	\$ -	0.5%	100%	0%	0%	\$ -
Hazardous Materials	\$ 75,000	\$ 75,000	\$ -	\$ 75,000	\$ -	0.4%	100%	0%	0%	\$ -
Public Health Preparedness	\$ 1,418,796	\$ 1,418,796	\$ -	\$ 1,418,796	\$ -	7.4%	100%	0%	0%	\$ -
Sexual Health - HIV	\$ 698,410	\$ 698,410	\$ -	\$ 698,410	\$ -	3.6%	100%	0%	0%	\$ -
Underground Storage Tanks	\$ 187,000	\$ 187,000	\$ -	\$ 187,000	\$ -	1.0%	100%	0%	0%	\$ -
Vital Statistics	\$ 166,039	\$ -	\$ 215,000	\$ 215,000	\$ (48,961)	0.9%	0%	129%	-29%	\$ (0.11)
Total	\$ 19,154,470	\$ 6,865,972	\$ 2,523,183	\$ 9,389,155	\$ 9,765,314	100.0%	36%	13%	51%	\$ 21.91

**WASHOE COUNTY DISTRICT BOARD OF HEALTH
STRATEGIC RETREAT
October 8, 2009**

Program Synopsis

Administrative Health Services provides administrative guidance and oversight for risk management, purchasing, human resources, facilities management, information technology and legislative issues for the District. Staff manages Health Fund financial activities including but not limited to: annual budget, financial statements, cash, grants management, audits, accounts receivable and payable, payroll, internal controls, inventory and contracts.

Air Quality Management seeks solutions to our community's air pollution problems through a combination of regulatory activities and public education. Federal financial assistance for this program is received directly from EPA. Fees for permits and plan reviews are also charged. Title V is an operating permit program that strives to identify and implement the Clean Air Act requirements for air pollution sources thereby improving compliance with emissions control requirements. This program receives no federal funding. Funds are provided entirely from fees charged for permits issued to "major" stationary sources of certain pollutants (primarily industrial facilities and large commercial operations). Air Quality DMV Pollution Control funds are allocated for the operation of the federally mandated oxygenated fuels program and provides significant assistance to the District's ambient air quality monitoring program.

Child Abuse & Neglect Prevention program receives funding from the State of Nevada, Children's Trust Fund. The program mission is to increase exposure to child abuse prevention information including what constitutes child abuse, how to report it and how to prevent by developing a statewide campaign that will reach a majority of Nevada citizens 19 to 64 years old.

Chronic Disease & Tobacco Control program monitors indicators of community health and quality of life by collecting and analyzing health-related data; and is a resource for the community in measuring its progress toward achieving its goal for improved health and wellness. Federal funding is received from the Centers for Disease Control and Prevention (CDC) through the State of Nevada. Funding from the Masler (Tobacco) Settlement Agreement (MSA) is received through the State of Nevada.

Community & Clinical Health Services includes staff that provide management and specific administrative duties related to the Community Health programs and clinical services. These functions are different from, and not a replacement for, those of the general administrative function.

Emergency Medical Services monitors REMSA's performance under the franchise agreement; promotes coordination of medical disaster preparedness activities with public safety agencies, hospitals and ambulance services.

Environmental Health Services provides administrative services for the other environmental functions: Underground Storage Tanks, Food Protection Program, Vector Control, Safe Drinking Water, Hazardous Waste, Liquid Waste and Solid Waste Management. These services are neither in conflict with, nor a replacement for, those of the general administration function. Personnel in this cost center perform plan review, investigations, and licensing for pools, spas and other regulated activities. During the course of this type of work, some time is also spent in reviewing the environmental impact for separate programs.

Epidemiology Surveillance program's mission is to provide comprehensive epidemiology services for Washoe County residents to detect, investigate, and respond to communicable diseases in order to reduce their incidence. This program receives federal funding from the Centers for Disease Control and Prevention (CDC) through the State of Nevada.

Family Planning and Teen Health Mall provides reproductive health, family planning and minor acute care services. Federal financial assistance is received directly from the U.S. Public Health Service. Patient fees are also charged.

Food Protection Program has five elements which include 1) Epi-Program 2) Plan Review 3) Education 4) Inspection and Investigation and 5) Permit Issuance. The Health Authority is mandated to inspect each food establishment within the Health District at least once per year, review food establishment plans; and to investigate food-borne botulism (illness). This program receives no federal financial assistance.

Hazardous Waste Program conducts specific hazardous materials and hazardous waste inspections that are limited to the Biennial Report System (BRS) Project and the Targeted Sector Inspection (TSI) Project. The program receives state funding from the Nevada Division of Environmental Protection.

Home Visiting Program provides home visits to at-risk families and offers appropriate referrals. Public Health Nurses promote public health by educating and empowering individuals and families to enhance their physical, emotional, mental, and social well being; and through the development of partnerships, promote a safe and healthy community. This program receives no federal financial assistance.

Immunization Programs' mission is to promote public health by reducing vaccine preventable disease through immunization, with an emphasis on collaboration and cooperation with community partners. The program receives federal funding from the Centers for Disease Control and Prevention (CDC) through the State of Nevada. Patient fees are also charged.

Public Health Preparedness program's mission is to strengthen the capacity of public health infrastructure to detect, assess, and respond decisively to control the public health consequences of bioterrorism event. Civilian Volunteer Medical Reserve Corps (MRC) program focuses heavily on the recruitment of new members, volunteer recognition, credentialing and deployment. Federal funding is received from the Centers for Disease Control and Prevention (CDC) through the State of Nevada and from National Association of City and County Health Officials (NACCHO). Activities created to increase hospital and clinic surge capacity and provide staffing for Point of Distribution (PODS) and alternate care sites in the event of an emergency are funded by Health Resources and Services Administration (HRSA) through the State of Nevada.

Safe Drinking Water administers the EPA's Safe Drinking Water Act program in Washoe County. This program is also concerned with how present and future development impacts the water supply. This program receives funds through the State of Nevada.

Sexual Health Program provides comprehensive prevention, education, treatment, and surveillance activities in Washoe County that reduce the incidence of STD infection including HIV. Federal funding is received from the Centers for Disease Control and Prevention (CDC) through the State of Nevada. Patient fees are also charged.

Solid Waste Management Program oversees all matters involving solid waste in Washoe County and monitors waste collection and disposal. Staff implements regulations involving permits, landfill and transfer station operations, importation of out-of-state municipal solid waste, illegal dumping, recycling, and complaint investigation. The State of Nevada created a \$1 per tire recycling fee to be charged at the sale of each retail tire sold in Nevada. This program receives 25% of these funds that are placed in the Solid Waste Management Account.

Tuberculosis provides assessment, diagnosis, counseling, and treatment for tuberculosis exposure and active disease patients. This program receives state and federal funds and charges patient fees.

Underground Storage Tanks provides ongoing assessment of potential containment sources to prevent releases of petroleum products in to the groundwater; reviews and evaluate groundwater remediation cases to ensure that responsible parties are actively working to clean up contaminated groundwater to below state action levels. This program receives federal funds through the State of Nevada.

Vector – Control is responsible for surveillance and ecological control of diseases that are transmitted from animal to humans. Mosquito population and the presence of encephalitis, hantavirus, plague and rabies in hosts are monitored. This program receives no federal financial assistance.

Vital Statistics Office is designated by the State of Nevada as the local registrar for all births and deaths occurring in Washoe County. The program provides certified copies of birth and death certificates upon approved request for a fee.

Women, Infants, and Children is a preventative health and nutrition program for mothers and children providing health and educational services, as well as necessary foods, to eligible participants. Federal financial assistance from the U.S. Department of Agriculture is received through the State of Nevada.

RP-Health Fund 202-0

A	B	C	D	E	F	H	I	J	K	L	M
Function	Department / Division	Fund Center/ Responsible Cost Center	Program Title	Description/Purpose Statement	List the Specific Statutory Authority to Provide the Programs (federal law, state law, county code, regulations, case law etc.)	FY 08-09 Adopted Budget-Local Funding (Personnel, Operating and Capital)	Authorized FTEs (Local Funding)	FY 08-09 Adopted Budget-Grant Funding (Personnel, Operating and Capital) (Revenue = Expense)	Authorized FTEs assigned (Grant Funding)	FY 08-09 Adopted Budget TOTAL (Local and Grant Funding)	Authorized FTEs assigned TOTAL (Local and Grant Funding) 193
1		2002	Health Fund	The Health Fund accounts for general fund support, intergovernmental grants and user fees dedicated to health services. The District Health Department reports to a District Board of Health composed of representatives appointed by the governing bodies of the Cities of Reno and Sparks, and Washoe County. Chapter 439 of the Nevada Revised Statutes prescribes the organization and functions of the Health District. The District Health Department operates through five (5) divisions.		\$ 13,069,182	117.06	\$ 6,883,114	59.90	\$ 19,972,296	176.96
2											
3	AHS	170200	Administration	Provides administrative guidance and oversight for risk management, purchasing, human resources, facilities for the District. Manages Health Fund financial activities including but not limited to: annual budget, financial statements, cash, grants management, audits, accounts receivable and payable, payroll, internal controls, inventory, and contracts.	NRS 439 Administration of Public Health NRS 332 Purchasing; Local Governments NRS 354 Local Financial Administration Washoe County Code, Chapter 5 Washoe County Code, Chapter 15	\$ 1,494,644	15.00	\$	0.00	\$ 1,494,644	15.00
4											
5	AHS	170400	Emergency Medical Services	Monitor RE/MSA's performance under the franchise agreement; Promote coordination of medical disaster preparedness activities with public safety agencies, hospitals and ambulance services;	NRS 268.081, 268.083, 244.187, 244.188 & Interlocal Agreement between Reno, Sparks and Washoe County, Amended 8/26/86	\$ 136,901	1.40	\$	0.00	\$ 136,901	1.40
6											
7	AHS	Not Mandated (174600)	WIC	Provides supplemental nutritious foods, nutrition education and referrals to other health and social services to eligible pregnant and postpartum women, infants and children up to age five in Washoe County to prevent occurrence of health problems and to improve the health status of these persons.		\$ 295,407	2.44	\$ 1,016,061	13.56	\$ 1,311,468	16.00
8											
9											

Legend:
 3 = Legally Mandated
 2 = Core Function
 1 = DBOH Strategic Goal

RP-Health Fund 202-0

A	B	C	D	E	F	H	I	J	K	L	M
Function	Department / Division	Fund Center/ Responsible Cost Center	Program Title	Description/Purpose Statement	List the Specific Statutory Authority to Provide the Programs (federal law, state law, county code, regulations, case law etc.)	FY 08-09 Adopted Budget-Local Funding (Personnel, Operating and Capital)	Authorized FTEs assigned (Local Funding)	FY 08-09 Adopted Budget-Grant Funding (Personnel, Operating and Capital) (Revenue = Expenses)	Authorized FTEs assigned (Grant Funding)	FY 08-09 Adopted Budget TOTAL (Local and Grant Funding)	Authorized FTEs assigned TOTAL (Local and Grant Funding)
1											
10	ACM	172300	Administration			\$ 459,615	2.90	\$ 133,005	1.10	\$ 592,620	4.00
3	ACM	172300	Planning & Monitoring	As defined by the US EPA workshop objectives and the Code of Federal Regulations: continuous 24/7 real-time priority pollutant monitoring and reporting collected within EPA OA Guidelines. On-going emissions inventory database development with triennial reporting for priority pollutants, precursors, GHG, and HAPs. Preparation of priority SIP submittals and maintenance plans. Rules/regulation development.	NRS 446.646, 446B.500 Federal Clean Air Act, Title 40, Chapter 1, Part 50 - 97 USC Title 42, Chapter 85, Subchapter I-VI	\$ 394,172	3.45	\$ 441,415	3.55	\$ 775,587	7.00
11											
3	ACM	172300	Permitting & Enforcement	Permit and inspect stationary sources of air pollution for compliance as required by federal law and local regulations.	NRS 446.646, 446B.500 Federal Clean Air Act, Title 40, Chapter 1, Part 50 - 97 USC Title 42, Chapter 85, Subchapter I-VI	\$ 427,704	4.17	\$ 473,212	3.83	\$ 900,916	8.00
12											
3	ACM	Not Mandated (172300)	Public Information & Community Outreach Program	Educate the general public about causes of air pollution and everyday solutions that can be carried out by individual citizens.	NRS-446.646, Federal-Clean Air Act	\$	0.00	\$ 57,500	0.00	\$ 57,500	0.00
14											
15											

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RP-Health Fund 202-0

A	B	C	D	E	F	H	I	J	K	L	M
Function	Department /Division	Fund Center/ Program Title Responsible Cost Center	Program Title	Description/Purpose Statement	List the Specific Statutory Authority to Provide the Programs (federal law, state law, county code, regulations, case law etc.)	FY 08-09 Adopted Budget-Local Funding (Personnel, Operating and Capital)	Authorized FTEs assigned (Local Funding)	FY 08-09 Adopted Budget-Grant Funding (Personnel, Operating and Capital) (Revenue = Expense)	Authorized FTEs assigned (Grant Funding)	FY 08-09 Adopted Budget TOTAL (Local and Grant Funding)	Authorized FTEs assigned TOTAL (Local and Grant Funding) 193
1	EPHP	170300	Vital Statistics	The Vital Statistics Office is designated by the State of Nevada as the local registrar for all births and deaths occurring in Washoe County. The program provides certified copies of birth and death certificates upon approved request.		\$ 162,223	2.00	\$	0.00	\$ 162,223	2.00
16				District Health Officer is mandated to:							
17				Register all births and deaths in Washoe County	NRS 440.190						
18				Furnish blank forms of certificates to such persons as require them; examine submitted documents for accuracy	NRS 440.200 - .210						
19				Enforce for incomplete/unsatisfactory submissions	NRS 440.220						
20				Make complete and accurate copies and maintain said copies	NRS 440.240						
21				File list of names of deceased with Public Administrator within 5 days of receipt of original death certificate	NRS 440.250, subsection 2						
22				Transmit to the State Registrar all original certificates registered during the preceding month by the 10th day of the following month	NRS 440.260						
23				Issue burial/interment permits with the exception of deaths considered by the Board to be infectious, contagious, or communicable and dangerous to the public health	NRS 440.500						
24				Charge and collect a \$1 fee for support of the County Coroner (pursuant to NRS 259.025) for each certified death certificate issued and remit such fees to the proper County Treasurer	NRS 440.715						
25	EPHP	171700	Epidemiology	Required that each reported case of a communicable disease be investigated to confirm the diagnosis, identify any contacts, identify the source of the infection, determine if the case is employed in a sensitive occupation or is a child attending a childcare facility, determine the extent of any outbreak, and carry out measures for the prevention suppression and control of the disease.	NRS 441A and NAC 441A	\$ 555,705	5.61	\$	1.00	\$ 555,705	6.61
26				To strengthen public health response activities that are mandated. These activities relate to biological, chemical, and radiological terrorism as well as naturally occurring public health emergencies such as pandemic influenza or SARS.	US Code Title 42, 247-d Director of Epidemiology and Public Health Preparedness is 100% grant funded.	\$	0.00	\$ 537,346	8.00	\$ 937,346	8.00
27	EPHP	Net Mandated (Grant Funded)	Public Health Preparedness								
28											
29											

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RP-Health Fund 202-0

A	B	C	D	E	F	H	I	J	K	L	M
Function	Department /Division	Fund Center/ Responsible Cost Center	Program Title	Description/Purpose Statement	List the Specific Statutory Authority to Provide the Programs (Federal law, state law, county code, regulations, case law etc.)	FY 08-09 Adopted Budget (Personnel, Operating and Capital)	Authorized FTEs assigned (Local Funding)	FY 08-09 Adopted Budget-Grant Funding (Personnel, Operating and Capital) (Revenue = Expense)	Authorized FTEs assigned (Grant Funding)	FY 08-09 Adopted Budget TOTAL (Local and Grant Funding)	Authorized FTEs assigned TOTAL (Local and Grant Funding) 193
1	EHS	172200	Safe Drinking Water	To ensure that public water systems provide safe and reliable drinking water that prevents the spread of disease and provides for sustainable development by monitoring water quality, and performing water system inspections, and water project plan reviews.	Federal Safe Drinking Water Act USC 42, Chapter 6A, Subchapter XII, NRS 445A.015 - 445A.955 NRS 278.330 - 278.377 NAC 445A.65505 - 445A.6731	\$ 93,990	0.76	\$ 70,000	0.55	\$ 163,990	1.25
30	EHS	172100	Vector-Borne Disease	Disease prevention by control of vector populations, active disease surveillance and public education.	NRS 439.170, 439.490 441A.410; NAC 441A.225, 441A.280, 441A.410, 441A.415, 441A.420, 441A.460, 441A.520, 441A.557, 441A.595, 441A.605, 441A.635, 441A.650, 441A.655, 441A.665, 441A.715	\$ 993,424	3.25	\$	0.00	\$ 993,424	3.25
31	EHS	172101	Vector-Borne Disease	Funding in case of emergency outbreak such as West Nile Virus	\$.005 Tax Support	\$ 350,000	0.00	\$	0.00	\$ 350,000	0.00
32	EHS	172400	Administration			\$ 902,383	4.25	\$	0.00	\$ 902,383	4.25
33	EHS	172404	Food Protection	The Health Authority shall inspect each food establishment within the Health District at least once per year, review food establishment plans; and to investigate food-borne botulism (illness).	NRS 439, 446; NAC 441A.465	\$ 1,555,135	17.15	\$ 109,365	1.10	\$ 1,664,501	18.25
34	EHS	172400	Food Protection - Special Events (including temporary food establishments)	To provide regulatory oversight for many permitted events that occur each year, this includes ensuring food protection and adequate sanitation such as proper sewage and availability of potable water.	NRS 446	\$ 260,355	3.20	\$	0.00	\$ 260,355	3.20
35	EHS	172400	Environmental Engineering	Reviews community development and building permit applications to ensure compliance with various regulations.	NRS 439.370, 439.410, 278A.010-278A.520, 445A.800 - 445A.955, NAC 445A.450 - 445A.492, 445A.65505 - 445A.6731	\$ 212,141	2.00	\$	0.00	\$ 212,141	2.00
36	EHS	172400	Pools/Spas	To insure protection for the health and safety of residents and visitors of Washoe County that use public swimming pools and spas.	NRS 444.003 - 444.120, NAC 444.010 - 444.305 Public Bathing Places, NAC 444.310 - 444.546 Public Spas	\$ 165,436	1.75	\$	0.00	\$ 165,436	1.75
37	EHS	172400	Institutions - Mobile Home/RV Parks	The Health Authority shall inspect each mobile home/rv park within the Health District at least once per year.	NRS 461A.223	\$ 23,333	0.20	\$	0.00	\$ 23,333	0.20
38	EHS	172400	Institutions - Public Accommodations	The Health Authority shall inspect each public accommodation within Washoe County at least once per year, investigate all complaints.	NRS 447	\$		\$		\$	
39	Legend:										

3 = Legally Mandated

2 = Core Function

1 = DBOH Strategic Goal

RP-Health Fund 202-0

A	B	C	D	E	F	H	I	J	K	L	M
Function	Department / Division	Fund Center / Responsible Cost Center	Program Title	Description/Purpose Statement	List the Specific Statutory Authority to Provide the Programs (federal law, state law, county code, regulations, case law etc.)	FY 08-09 Adopted Budget-Local Funding (Personnel, Operating and Capital)	Authorized FTEs assigned (Local and Grant Funding)	FY 08-09 Adopted Budget-Grant Funding (Personnel, Operating and Capital) (Revenue = Expense)	Authorized FTEs assigned (Grant Funding)	FY 08-09 Adopted Budget TOTAL (Local and Grant Funding)	Authorized FTEs assigned TOTAL (Local and Grant Funding) 193
1	EHS	172400	Institutions - Schools and Jails	The Health Authority is required to have supervision over the sanitation, healthiness, cleanliness and safety of jails, schools, and school gymnasiums. Jails shall be inspected at least once per year and schools and school gymnasiums shall be inspected at least twice per year.	NRS 444.335	\$		\$		\$	
40	EHS	172400	Institutions - Child Care Facilities	The State Health Officer or his designate shall enter and inspect at least annually, every building or premises of a child care facility and are of operation of an outdoor youth program on behalf of the Bureau, to secure compliance with standards for health and sanitation.	NRS 432A.180 Inspection by Bureau, State Fire Marshal and State Health Officer	\$		\$		\$	
41	EHS	172400	Well Construction	To enforce regulations governing the plan review, construction, inspection and operation of individual domestic wells and public drinking water wells.	NRS 439.410	\$ 152,001	1.50	\$	0.00	\$ 152,001	1.50
42	EHS	172400	Liquid Waste	To enforce regulations governing the construction, installation, operation of onsite sewage disposal systems, sewage and wastewater pumping contractions, non-sewered toilet contractions and dump station operators and investigate sewage overflow complaints.	NRS 444.650	\$ 184,366	2.25	\$	0.00	\$ 184,366	2.25
43	EHS	172700	Waste Management - Solid Waste	The Health Authority shall conduct one inspection per year on permitted facilities; investigate complaints.	NRS 444, NAC 444	\$ 86,546	1.30	\$ 415,000	3.50	\$ 501,546	4.80
44	EHS	Not Mandated (172400)	Hazardous Materials	To provide emergency response to any haz mat related incident 24 hours per day, 7 days per week. Considered first responders to spills, drug labs and similar emergency situations.	State-Authority-In-NRS-459-Health-Authority-via-Interlocal-with-NDEP-US Code Title 42, Section 11001 c.; NRS 459.740; NAC 459.69133	\$ 90,551	0.91	\$	0.09	\$ 90,551	1.00
45	EHS	Not Mandated (172400)	Hazardous Waste Management	To inspect specified business establishments for hazardous waste management as required by contract with NDEP, to identify those hazardous waste generators that are not complying with federal and state hazardous waste management regulations and to gain compliance with same.	State-Authority-In-NRS-459-Health-Authority-via-Interlocal-with-NDEP-US Code Title 42, Section 11001 c.; NRS 459.740; NAC 459.69133	\$ 78,412	0.97	\$ 75,000	0.88	\$ 153,412	1.65
46	EHS	Not Mandated (172700)	Waste Management - Underground and Leaking Underground Storage Tanks	To provide ongoing assessment of potential containment sources to prevent releases of petroleum products in to groundwater; reviews and evaluate groundwater remediation cases to ensure that responsible parties are actively working to clean up contaminated groundwater to below state action levels.	State Authority in NRS 459; Health Authority via Interlocal with NDEP	\$ 79,712	0.81	\$ 187,000	1.84	\$ 266,712	2.65
48	Legend:										
49	1 = DBOH Strategic Goal										
50	2 = Core Function										

RP-Health Fund 202-0

A	B	C	D	E	F	H	I	J	K	L	M
Function	Department/Division	Fund Center/Responsible Cost Center	Program Title	Description/Purpose Statement	List the Specific Statutory Authority to Provide the Programs (federal law, state law, county code, regulations, case law etc.)	FY 08-09 Adopted Budget-Local Funding (Personnel, Operating and Capital)	Authorized FTEs assigned (Local Funding)	FY 08-09 Adopted Budget-Grant Funding (Personnel, Operating and Capital) (Revenue = Expense)	Authorized FTEs assigned (Grant Funding)	FY 08-09 Adopted Budget TOTAL (Local and Grant Funding)	Authorized FTEs assigned TOTAL (Local and Grant Funding) 193
1											
50	CCHS	171100	Administration			\$ 604,968	6.00	\$ -	0.00	\$ 604,968	6.00
51	CCHS	173500	Immunization	The local Health Authority is required to hold immunization clinics at least one month before the opening date of the school year.	NRS 439.535	\$ 818,124	7.14	\$ 400,000	3.85	\$ 1,218,124	10.99
52	CCHS	174400	Tuberculosis	The program investigates each case, confirms diagnosis, ensures treatment, conducts contact investigations, treats contacts and others with Latent Tuberculosis infection, and performs measures to prevent and control TB.	NAC 441A.355, NRS 441A.340 Authority for control, prevention and treatment via interlocal with NSHD	\$ 289,479	2.67	\$ 185,652	1.48	\$ 485,131	4.15
53	CCHS	171300	Sexual Health (STD/HIV)	The health district is mandated to prevent, investigate, and treat HIV/STDs; to notify persons regarding possible exposure	NRS 441A, NAC 441A.450	\$ 547,283	5.00	\$ 824,922	5.30	\$ 1,372,205	10.30
54											
55	CCHS	Not Mandated (170800)	Public Health Nurse Home Visitation	To educate and empower high-risk pregnant women to deliver a healthy term infant.		\$ 1,168,414	11.81	\$ 86,494	0.46	\$ 1,254,908	12.28
56	CCHS	Not Mandated (170800)	Chronic Disease and Injury Prevention	Activities focus on reducing the risk factors for chronic disease and injuries including Tobacco prevention and control, promotion of physical activity and nutrition, and improvements in motor vehicles, pedestrian, recreational, and home and environmental safety.		\$ 162,249	1.38	\$ 384,872	3.53	\$ 546,921	4.91
57	CCHS	Not Mandated (171103)	Podiatry	Provides routine foot care to the five remaining elderly ununderserved and disabled populations		\$ 1,200	0.00	\$ -	0.00	\$ 1,200	0.00
58	CCHS	Not Mandated (173000)	Family Planning/Teen Health Mail	Provides family planning services to individuals of childbearing age.	NOTE: FTE hours adjusted to reflect FP reduction and abolished positions.	\$ 492,317	5.66	\$ 806,950	5.46	\$ 1,299,267	11.12
59	CCHS	Not Mandated (173000)	Child Abuse Prevention			\$ -	0.00	\$ 269,520	1.00	\$ 269,520	1.00
60											176.95

Legend:
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FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Administrative Health Services Division		
	170200	FY10 Total
460512 Duplication Services	\$ (200.00)	\$ (200.00)
485300 Other Miscellaneous	\$ (450.00)	\$ (450.00)
Revenue	\$ (850.00)	\$ (650.00)
701110 Base Salaries	\$ 948,919.13	\$ 948,919.13
701200 Incentive	\$ 13,550.00	\$ 13,550.00
701300 Overtime	\$ 1,000.00	\$ 1,000.00
701412 Salary Adjustment	\$ 7,104.00	\$ 7,104.00
Salaries and Wages	\$ 970,573.13	\$ 970,573.13
705110 Group Insurance	\$ 113,944.29	\$ 113,944.29
705320 Retirement	\$ 206,425.86	\$ 206,425.86
705215 Retirement C	\$ 200,000.00	\$ 200,000.00
705230 Medicare	\$ 13,808.32	\$ 13,808.32
705320 Workmens Comp	\$ 5,392.00	\$ 5,392.00
705330 Unemployment	\$ 1,040.00	\$ 1,040.00
Employee Benefits	\$ 540,610.47	\$ 540,610.47
710100 Professional Services	\$ 1,500.00	\$ 1,500.00
710200 Service Contract	\$ 750.00	\$ 750.00
710205 Repairs Maint	\$ 300.00	\$ 300.00
710300 Operating Supplies	\$ 100.00	\$ 100.00
710334 Copy Machine Exp	\$ 6,000.00	\$ 6,000.00
710350 Office Supplies	\$ 6,000.00	\$ 6,000.00
710355 Books Subscriptions	\$ 1,000.00	\$ 1,000.00
710360 Postage	\$ 1,400.00	\$ 1,400.00
710361 Express Courler	\$ 100.00	\$ 100.00
710500 Other Exp	\$ 100.00	\$ 100.00
710502 Printing	\$ 1,500.00	\$ 1,500.00
710503 Licenses & Permits	\$ 1,700.00	\$ 1,700.00
710508 Telephone Land Lines	\$ 4,000.00	\$ 4,000.00
710509 Seminars Mtgs	\$ 2,900.00	\$ 2,900.00
710512 Auto Exp	\$ 100.00	\$ 100.00
710519 Cell Phones	\$ 350.00	\$ 350.00
710529 Dues	\$ 800.00	\$ 800.00
710546 Advertising	\$ 150.00	\$ 150.00
710600 Lt Lease-Office	\$ -	\$ -
710872 Food Purchases	\$ 150.00	\$ 150.00
711113 Equip Srv Repla	\$ 2,122.20	\$ 2,122.20
711114 Equip Serv O & M	\$ 1,043.60	\$ 1,043.60
711117 ESD Fuel Charge	\$ 636.64	\$ 636.64
711119 Prop & Liability	\$ 5,552.00	\$ 5,552.00
711210 Travel	\$ 10,500.00	\$ 10,500.00
711504 Equip non-Capital	\$ 1,000.00	\$ 1,000.00
Services and Supplies	\$ 49,754.44	\$ 49,754.44
Expenditures	\$ 1,560,938.04	\$ 1,560,938.04
General Fund Tax Transfer	\$ 1,560,288.04	\$ 1,560,288.04

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Administrative Health Services Division		
Emergency Medical Services		
	170400	FY10 Total
701110 Base Salaries	\$ -	\$ -
701120 Part Time	\$ 24,553.03	\$ 24,553.03
701200 Incentive	\$ -	\$ -
Salaries and Wages	\$ 24,553.03	\$ 24,553.03
705110 Group Insurance	\$ -	\$ -
705320 Retirement	\$ -	\$ -
705230 Medicare	\$ 356.03	\$ 356.03
705320 Workmens Comp	\$ 674.00	\$ 674.00
705330 Unemployment	\$ 130.00	\$ 130.00
Employee Benefits	\$ 1,160.03	\$ 1,160.03
710100 Professional Services	\$ 1,000.00	\$ 1,000.00
710334 Copy Machine Exp	\$ 50.00	\$ 50.00
710350 Office Supplies	\$ 185.00	\$ 185.00
710355 Books Subscriptions	\$ 370.00	\$ 370.00
710360 Postage	\$ 200.00	\$ 200.00
710361 Express Courier	\$ -	\$ -
710502 Printing	\$ 50.00	\$ 50.00
710503 Licenses & Permits	\$ 200.00	\$ 200.00
710508 Telephone Land Lines	\$ 300.00	\$ 300.00
710509 Seminars Mtgs	\$ 1,200.00	\$ 1,200.00
710512 Auto Exp	\$ 1,250.00	\$ 1,250.00
710529 Dues	\$ 105.00	\$ 105.00
711119 Prop & Liability	\$ 694.00	\$ 694.00
711210 Travel	\$ 3,000.00	\$ 3,000.00
711504 Equip non-Capital	\$ 200.00	\$ 200.00
Services and Supplies	\$ 8,804.00	\$ 8,804.00
Expenditures	\$ 34,517.06	\$ 34,517.06
General Fund Tax Transfer	\$ 34,517.06	\$ 34,517.06

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Administrative Health Services Division			
Women Infants & Children			
	WIC	Grant	FY10
	174800	10031	Totals
431100 Federal Grants	\$ -	\$ (1,200,096.00)	\$ (1,200,096.00)
Revenue	\$ -	\$ (1,200,096.00)	\$ (1,200,096.00)
701110 Base Salaries	\$ 79,913.36	\$ 719,219.44	\$ 799,132.80
701130 Pooled Positions	\$ -	\$ 68,296.19	\$ 68,296.19
701200 Incentive	\$ 1,745.00	\$ 15,705.00	\$ 17,450.00
701300 Overtime	\$ -	\$ 5,000.00	\$ 5,000.00
701412 Salary Adj	\$ -	\$ -	\$ -
Salaries and Wages	\$ 81,658.36	\$ 808,220.63	\$ 889,878.99
705110 Group Insurance	\$ 15,475.01	\$ 139,279.76	\$ 154,754.77
705320 Retirement	\$ 17,513.86	\$ 157,621.79	\$ 175,135.65
705230 Medicare	\$ 1,043.78	\$ 9,393.53	\$ 10,437.31
705320 Workmens Comp	\$ -	\$ 5,392.00	\$ 5,392.00
705330 Unemployment	\$ -	\$ 1,040.00	\$ 1,040.00
Employee Benefits	\$ 34,032.65	\$ 312,727.08	\$ 346,759.73
710100 Prof Services	\$ -	\$ 800.00	\$ 800.00
710108 MD Consultants	\$ -	\$ -	\$ -
710200 Service Contract	\$ -	\$ -	\$ -
710205 Repairs Maint	\$ -	\$ 500.00	\$ 500.00
710300 Operating Supplies	\$ -	\$ 46,754.29	\$ 46,754.29
710334 Copy Machine Exp	\$ 1,500.00	\$ 4,044.00	\$ 5,544.00
710350 Office Supplies	\$ -	\$ 10,000.00	\$ 10,000.00
710361 Express Courier	\$ -	\$ -	\$ -
710500 Other Expenses	\$ -	\$ 1,000.00	\$ 1,000.00
710502 Printing	\$ -	\$ 8,000.00	\$ 8,000.00
710503 Licenses & Permits	\$ -	\$ 500.00	\$ 500.00
710508 Telephone Land Lines	\$ 7,500.00	\$ -	\$ 7,500.00
710509 Seminars Mtgs	\$ -	\$ 1,000.00	\$ 1,000.00
710512 Auto Exp	\$ -	\$ 3,000.00	\$ 3,000.00
710529 Dues	\$ -	\$ 50.00	\$ 50.00
710600 LT Lease-Office	\$ 80,296.00	\$ -	\$ 80,296.00
711119 Prop & Liability	\$ 5,552.00	\$ -	\$ 5,552.00
711210 Travel	\$ -	\$ 3,000.00	\$ 3,000.00
711504 Equip non-Capital	\$ -	\$ 500.00	\$ 500.00
Services and Supplies	\$ 94,848.00	\$ 79,148.29	\$ 173,996.29
Expenditures	\$ 210,539.01	\$ 1,200,096.00	\$ 1,410,635.01
General Fund Tax Transfer	\$ 210,539.01	\$ -	\$ 210,539.01

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Air Quality Management Division							
	Local	Title V	EPA	PM 2.5	Radon	Pollution Ctrl	FY10
	172300	172302	10019	10021	10564	20288	Totals
422510 Air Pol Permits	\$ (381,000.00)	\$(21,399.00)	\$ -	\$ -	\$ -	\$ -	\$ (402,399.00)
431100 Federal Grants	\$ -	\$ -	\$(632,649.00)	\$(41,200.00)	\$(7,500.00)	\$ -	\$ (681,349.00)
432311 Pol Ctrl	\$ -	\$ -	\$ -	\$ -	\$ -	\$(280,000.00)	\$ (280,000.00)
460526 Plan Review-AQM	\$ (15,500.00)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (15,500.00)
460527 NOE-AQM	\$ (32,900.00)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (32,900.00)
460528 NESHAP-AQM	\$ (62,000.00)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (62,000.00)
460529 Assessments-AQM	\$ (22,000.00)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (22,000.00)
460530 Inspector Regis	\$ (1,900.00)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (1,900.00)
460531 Dust Plan-AQM	\$ (178,333.00)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (178,333.00)
Revenue	\$ (693,633.00)	\$(21,399.00)	\$(632,649.00)	\$(41,200.00)	\$(7,500.00)	\$(280,000.00)	\$ (1,676,381.00)
701110 Base Salaries	\$ 694,474.88	\$ 17,482.48	\$ 382,347.34	\$ 23,899.82	\$ -	\$ 193,528.91	\$ 1,311,733.43
701130 Pooled Positions	\$ -	\$ -	\$ 8,000.00	\$ -	\$ -	\$ -	\$ 8,000.00
701200 Incentive	\$ 12,191.50	\$ 563.50	\$ 6,277.50	\$ 128.00	\$ -	\$ 1,989.50	\$ 21,150.00
701300 Overtime	\$ 500.00	\$ -	\$ 1,012.49	\$ 4,544.72	\$ -	\$ -	\$ 6,057.21
701412 Salary Adjustment	\$ 2,212.50	\$(2,212.50)	\$ -	\$ -	\$ -	\$ -	\$ -
Salaries and Wages	\$ 709,378.88	\$ 15,833.48	\$ 397,637.33	\$ 28,572.54	\$ -	\$ 195,518.41	\$ 1,346,940.64
705110 Group Insurance	\$ 88,010.39	\$ 1,695.21	\$ 44,229.68	\$ 4,048.46	\$ -	\$ 18,571.15	\$ 156,554.89
705320 Retirement	\$ 151,563.09	\$ 3,870.31	\$ 83,350.91	\$ 5,153.75	\$ -	\$ 41,933.76	\$ 285,871.82
705230 Medicare	\$ 9,162.75	\$ -	\$ 5,411.88	\$ 325.25	\$ -	\$ 2,827.10	\$ 17,726.98
705320 Workmens Comp	\$ 4,044.00	\$ -	\$ 1,685.00	\$ -	\$ -	\$ 1,011.00	\$ 6,740.00
705330 Unemployment	\$ 780.00	\$ -	\$ 325.00	\$ -	\$ -	\$ 195.00	\$ 1,300.00
Employee Benefits	\$ 253,560.23	\$ 5,565.52	\$ 135,002.47	\$ 9,527.46	\$ -	\$ 64,538.01	\$ 468,193.69
0100 Professional Services	\$ 500.00	\$ -	\$ 51,908.20	\$ 2,000.00	\$ -	\$ 12,943.58	\$ 67,352.78
710200 Service Contract	\$ 350.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 350.00
710205 Repairs Maint	\$ 1,000.00	\$ -	\$ 6,000.00	\$ -	\$ -	\$ -	\$ 7,000.00
710300 Operating Supplies	\$ 1,000.00	\$ -	\$ 2,000.00	\$ 1,100.00	\$ -	\$ -	\$ 4,100.00
710334 Copy Machine Exp	\$ 4,387.20	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,387.20
710350 Office Supplies	\$ 3,500.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,500.00
710355 Books Subscriptions	\$ 224.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 224.00
710360 Postage	\$ 2,200.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,200.00
710361 Express Courier	\$ 200.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 200.00
710500 Other Exp	\$ 200.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 200.00
710502 Printing	\$ 1,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,000.00
710503 Licenses & Perm	\$ 90.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 90.00
710505 Rental Equip	\$ 1,800.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,800.00
710508 Telephone Land Lines	\$ 9,000.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 9,000.00
710509 Seminars Mtgs	\$ 1,500.00	\$ -	\$ 2,000.00	\$ -	\$ 700.00	\$ -	\$ 4,200.00
710512 Auto Exp	\$ 1,200.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,200.00
710519 Cell Phones	\$ 3,800.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,800.00
710529 Dues	\$ 435.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 435.00
7.0535 Credit Card Fee	\$ 1,500.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,500.00
710546 Advertising	\$ 1,000.00	\$ -	\$ -	\$ -	\$ 4,700.00	\$ -	\$ 5,700.00
710577 Uniforms & Spec	\$ -	\$ -	\$ 1,100.00	\$ -	\$ -	\$ -	\$ 1,100.00
710600 LT Lease - Office	\$ 74,490.12	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 74,490.12
710721 Outpatient	\$ 1,316.00	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,316.00
711113 Equip Srv Replc	\$ 30,340.92	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 30,340.92
711114 Equip Serv O & M	\$ 13,520.37	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 13,520.37
711115 Equip Serv Motor Pool	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
711117 ESD Fuel Charge	\$ 12,187.68	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 12,187.68
711119 Prop & Liability	\$ 6,940.00	\$ -	\$ -	\$ -	\$ -	\$ 1,000.00	\$ 7,940.00
711210 Travel	\$ 3,000.00	\$ -	\$ 8,000.00	\$ -	\$ 2,100.00	\$ 6,000.00	\$ 19,100.00

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Environmental Health Services Division			
	Local	IT Overlay	FY10
	172400	172402	Totals
422503 Environ Permits	\$ (7,000.00)	\$ -	\$ (7,000.00)
422504 Pool Permits	\$ (33,000.00)	\$ -	\$ (33,000.00)
422505 RV Permits	\$ (10,500.00)	\$ -	\$ (10,500.00)
422508 Water Well Const Perm	\$ (44,000.00)	\$ -	\$ (44,000.00)
422511 ISDS Permits	\$ (90,000.00)	\$ -	\$ (90,000.00)
422513 Special Event Perm	\$ (75,000.00)	\$ -	\$ (75,000.00)
460510 IT Overlay	\$ -	\$ (121,001.00)	\$ (121,001.00)
460513 Other Health Serv	\$ (8,000.00)	\$ -	\$ (8,000.00)
460520 Eng Serv Health	\$ (90,500.00)	\$ -	\$ (90,500.00)
460521 Plan Review - Pool	\$ (5,000.00)	\$ -	\$ (5,000.00)
460534 Child Care Insp	\$ (9,000.00)		\$ (9,000.00)
460535 Pub Accomod Ins	\$ (21,000.00)		\$ (21,000.00)
Revenue	\$ (393,000.00)	\$ (121,001.00)	\$ (514,001.00)
701110 Base Salaries	\$ 1,163,888.58	\$ 60,629.08	\$ 1,224,517.66
701130 Pooled Positions	\$ 9,000.00	\$ -	\$ 9,000.00
701140 Holiday Work	\$ 1,500.00	\$ -	\$ 1,500.00
701200 Incentive	\$ 19,409.00	\$ 1,150.00	\$ 20,559.00
701300 Overtime	\$ 25,000.00	\$ 1,000.00	\$ 26,000.00
701406 Standby	\$ 30,000.00	\$ -	\$ 30,000.00
701408 Call Back	\$ 3,000.00	\$ -	\$ 3,000.00
Salaries and Wages	\$ 1,251,797.58	\$ 62,779.08	\$ 1,314,576.66
705110 Group Insurance	\$ 153,259.53	\$ 13,706.87	\$ 166,966.40
705320 Retirement	\$ 253,789.30	\$ 13,250.06	\$ 267,039.36
705230 Medicare	\$ 15,028.37	\$ 803.92	\$ 15,832.29
705320 Workmens Comp	\$ 7,414.00	\$ 337.00	\$ 7,751.00
705330 Unemployment	\$ 1,430.00	\$ 65.00	\$ 1,495.00
Employee Benefits	\$ 430,921.20	\$ 28,162.85	\$ 459,084.05
710100 Professional Services	\$ -	\$ 17,802.29	\$ 17,802.29
710200 Service contract	\$ 800.00	\$ -	\$ 800.00
710205 Repairs Maint	\$ 100.00	\$ -	\$ 100.00
710300 Operating Supplies	\$ 700.00	\$ 400.00	\$ 1,100.00
710302 Small Tools	\$ 250.00	\$ -	\$ 250.00
710319 Chemical Supplies	\$ 750.00	\$ -	\$ 750.00
710334 Copy Machine Exp	\$ 1,000.00	\$ -	\$ 1,000.00
710350 Office Supplies	\$ 4,000.00	\$ 1,000.00	\$ 5,000.00
710355 Books Subscriptions	\$ 1,000.00	\$ 100.00	\$ 1,100.00
710360 Postage	\$ 5,000.00		\$ 5,000.00
710361 Express Courier	\$ 100.00	\$ 50.00	\$ 150.00
710502 Printing	\$ 2,500.00	\$ -	\$ 2,500.00
710503 Licenses & Permits	\$ 2,200.00	\$ -	\$ 2,200.00
710507 Network Data Li		\$ 3,200.00	\$ 3,200.00
710508 Telephone Land Lines	\$ 10,000.00	\$ 125.00	\$ 10,125.00
710509 Seminars Mtgs	\$ 1,000.00	\$ 1,000.00	\$ 2,000.00
710512 Auto Exp	\$ 100.00	\$ 75.00	\$ 175.00
710519 Cell Phones	\$ 6,500.00	\$ -	\$ 6,500.00
710529 Dues	\$ 200.00	\$ -	\$ 200.00
710535 Credit Card Fee	\$ 4,500.00	\$ 459.78	\$ 4,959.78
710546 Advertising	\$ 500.00	\$ -	\$ 500.00
710721 Outpatient	\$ 6,048.00	\$ -	\$ 6,048.00
711113 Equip Serv Replacement	\$ 43,944.36	\$ -	\$ 43,944.36
711114 Equip Serv O & M	\$ 37,379.76	\$ -	\$ 37,379.76

FY10 ADOPTED BUDGET
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Environmental Health Services Division			
	Local	IT Overlay	FY10
	172400	172402	Totals
711117 ESD Fuel Charge	\$ 21,781.27		\$ 21,781.27
711119 Prop & Liability	\$ 7,981.00	\$ 347.00	\$ 8,328.00
711210 Travel	\$ 5,000.00	\$ 5,500.00	\$ 10,500.00
Services and Supplies	\$ 183,334.39	\$ 30,059.07	\$ 193,393.46
Expenditures	\$ 1,846,053.17	\$ 121,001.00	\$ 1,967,054.17
General Fund Tax Transfer	\$ 1,453,053.17	\$ -	\$ 1,453,053.17

FY10 ADOPTED BUDGET
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Environmental Health Services Division			
	Vector	Ctrl Tax	FY10
	172100	172101	Totals
460162 Services O Agencies	\$ -	\$ -	\$ -
460525 Plan Review	\$ (64,000.00)	\$ -	\$ (64,000.00)
621001 TF General	\$ -	\$ (350,000.00)	\$ (350,000.00)
Revenue	\$ (64,000.00)	\$ (350,000.00)	\$ (414,000.00)
701110 Base Salaries	\$ 294,478.31	\$ -	\$ 294,478.31
701130 Pooled Positions	\$ 32,535.00	\$ 6,350.00	\$ 38,885.00
701150 Contractual Wage	\$ -	\$ 9,500.00	\$ 9,500.00
701200 Incentive	\$ 2,300.00	\$ -	\$ 2,300.00
701300 Overtime	\$ 3,000.00	\$ -	\$ 3,000.00
Salaries and Wages	\$ 332,313.31	\$ 15,850.00	\$ 348,163.31
705110 Group Insurance	\$ 37,531.92	\$ -	\$ 37,531.92
705320 Retirement	\$ 63,653.77	\$ -	\$ 63,653.77
705230 Medicare	\$ 4,198.58	\$ -	\$ 4,198.58
705320 Workmens Comp	\$ 1,348.00	\$ -	\$ 1,348.00
705330 Unemployment	\$ 260.00	\$ -	\$ 260.00
Employee Benefits	\$ 106,992.27	\$ -	\$ 106,992.27
710100 Professional Services	\$ 6,235.00	\$ 105,693.00	\$ 111,928.00
710105 Medical Service	\$ 500.00	\$ -	\$ 500.00
710200 Service Contract	\$ 61,500.00	\$ 20,000.00	\$ 81,500.00
710205 Repairs Maint	\$ 900.00	\$ -	\$ 900.00
710300 Operating Supplies	\$ 3,000.00	\$ -	\$ 3,000.00
710302 Small Tools	\$ 435.00	\$ -	\$ 435.00
710308 Animal Supplies	\$ 2,000.00	\$ -	\$ 2,000.00
710319 Chemical Supplies	\$ 360,000.00	\$ 199,957.00	\$ 559,957.00
710334 Copy Machine Exp	\$ 100.00	\$ -	\$ 100.00
710350 Office Supplies	\$ 1,000.00	\$ -	\$ 1,000.00
710355 Books Subscriptions	\$ 200.00	\$ -	\$ 200.00
710360 Postage	\$ 100.00	\$ -	\$ 100.00
710361 Express Courier	\$ 100.00	\$ -	\$ 100.00
710391 Fuel & Lube	\$ 100.00	\$ -	\$ 100.00
710500 Other Expense	\$ 800.00	\$ -	\$ 800.00
710502 Printing	\$ 500.00	\$ -	\$ 500.00
710503 Licenses & Permits	\$ 35.00	\$ -	\$ 35.00
710508 Telephone Land Lines	\$ 800.00	\$ -	\$ 800.00
710509 Seminars Mtgs	\$ 1,000.00	\$ 1,500.00	\$ 2,500.00
710512 Auto Exp	\$ 200.00	\$ -	\$ 200.00
170519 Cellular Phone	\$ 755.00	\$ -	\$ 755.00
710529 Dues	\$ 350.00	\$ -	\$ 350.00
710546 Advertising	\$ -	\$ -	\$ -
710577 Uniforms & Spec	\$ 200.00	\$ -	\$ 200.00
710600 LI Lease-Office	\$ 40,636.89	\$ -	\$ 40,636.89
711113 Equip Serv Replacement	\$ 11,997.84	\$ -	\$ 11,997.84
711114 Equip Serv O & M	\$ 8,499.63	\$ -	\$ 8,499.63
711115 Equip Serv Motor Pool	\$ -	\$ 7,000.00	\$ 7,000.00
711117 ESD Fuel Charge	\$ 10,047.39	\$ -	\$ 10,047.39
711119 Prop & Liability	\$ 6,000.00	\$ -	\$ 6,000.00
711210 Travel	\$ 1,388.00	\$ -	\$ 1,388.00
Services and Supplies	\$ 519,379.75	\$ 334,150.00	\$ 853,529.75
Expenditures	\$ 958,685.33	\$ 350,000.00	\$ 1,308,685.33
General Fund Tax Transfer	\$ 894,685.33	\$ -	\$ 894,685.33

FY10 ADOPTED BUDGET
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Environmental Health Services Division			
	SDWA	PWSS	FY10
	172200	10017	Totals
422509 Water Co Permits	\$ (12,000.00)	\$ -	\$ (12,000.00)
431100 Federal Grants	\$ -	\$ (90,000.00)	\$ (90,000.00)
Revenue	\$ (12,000.00)	\$ (90,000.00)	\$ (102,000.00)
701110 Base Salaries	\$ 101,865.20	\$ 50,569.92	\$ 152,535.12
701130 Pooled Position	\$ -	\$ 19,712.00	\$ 19,712.00
701200 Incentive Longevity	\$ 2,017.50	\$ 1,045.00	\$ 3,062.50
701300 Overtime	\$ -	\$ 288.00	\$ 288.00
701412 Salary Adjustment	\$ (917.39)	\$ 917.39	\$ -
Salaries and Wages	\$ 103,065.31	\$ 72,532.31	\$ 175,597.62
705110 Group Insurance	\$ 14,245.77	\$ 5,672.77	\$ 19,918.54
705320 Retirement	\$ 22,301.57	\$ 11,070.00	\$ 33,371.57
705230 Medicare	\$ 1,074.41	\$ 724.92	\$ 1,799.33
705320 Workmens Comp	\$ 1,011.00	\$ -	\$ 1,011.00
705330 Unemployment	\$ 195.00	\$ -	\$ 195.00
Employee Benefits	\$ 38,827.75	\$ 17,487.69	\$ 56,295.44
710100 Professional Services	\$ 200.00	\$ -	\$ 200.00
710300 Operating Supplies	\$ 50.00	\$ -	\$ 50.00
710334 Copy Machine Exp	\$ 50.00	\$ -	\$ 50.00
710350 Office Supplies	\$ 50.00	\$ -	\$ 50.00
710355 Books Subscriptions	\$ 300.00	\$ -	\$ 300.00
710380 Postage	\$ 150.00	\$ -	\$ 150.00
710361 Express Courter	\$ -	\$ -	\$ -
710503 Licenses & Permits	\$ 100.00	\$ -	\$ 100.00
710508 Telephone Land Lines	\$ 200.00	\$ -	\$ 200.00
710509 Seminars Mtgs	\$ 200.00	\$ -	\$ 200.00
710529 Dues	\$ 346.00	\$ -	\$ 346.00
711113 Equip Serv Replacement	\$ -	\$ -	\$ -
711114 Equip Serv O & M	\$ 2,146.13	\$ -	\$ 2,146.13
711113 Equip Serv Replacement	\$ -	\$ -	\$ -
711117 ESD Fuel Charge	\$ 1,103.09	\$ -	\$ 1,103.09
711119 Prop & Liability	\$ 1,041.00	\$ -	\$ 1,041.00
711210 Travel	\$ 1,000.00	\$ -	\$ 1,000.00
711504 Equip non-Capital	\$ 152.00	\$ -	\$ 152.00
Services and Supplies	\$ 7,088.22	\$ -	\$ 7,088.22
Expenditures	\$ 148,981.28	\$ 90,000.00	\$ 238,981.28
General Fund Tax Transfer	\$ 136,981.28	\$ -	\$ 136,981.28

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Environmental Health Services Division		
Food Program		
	172404	FY10 Total
422507 Food Serv Permits	\$ (355,000.00)	\$ (355,000.00)
422514 Initial Application	\$ (38,000.00)	\$ (38,000.00)
460514 Food Service Certs	\$ (8,000.00)	\$ (8,000.00)
460523 Plan Review-Food Fac	\$ (30,000.00)	\$ (30,000.00)
Revenue	\$ (431,000.00)	\$ (431,000.00)
701110 Base Salaries	\$ 1,221,777.97	\$ 1,221,777.97
701130 Pooled Position	\$ 22,000.00	\$ 22,000.00
701200 Incentive	\$ 15,950.00	\$ 15,950.00
701300 Overtime	\$ 5,000.00	\$ 5,000.00
701412 Salary Adjustment	\$ -	\$ -
Salaries and Wages	\$ 1,264,727.97	\$ 1,264,727.97
705110 Group Insurance	\$ 186,318.21	\$ 186,318.21
705320 Retirement	\$ 265,469.85	\$ 265,469.85
705230 Medicare	\$ 16,408.39	\$ 16,408.39
705320 Workmens Comp	\$ 6,066.00	\$ 6,066.00
705330 Unemployment	\$ 1,170.00	\$ 1,170.00
Employee Benefits	\$ 475,432.45	\$ 475,432.45
710300 Operating Supplies	\$ 1,300.00	\$ 1,300.00
710334 Copy Machine Exp	\$ 100.00	\$ 100.00
710350 Office Supplies	\$ 1,500.00	\$ 1,500.00
710360 Postage	\$ 100.00	\$ 100.00
710502 Printing	\$ 100.00	\$ 100.00
710509 Seminars Meetings	\$ 2,000.00	\$ 2,000.00
711119 Prop & Liability	\$ 6,246.00	\$ 6,246.00
711210 Travel	\$ 10,000.00	\$ 10,000.00
Services and Supplies	\$ 21,346.00	\$ 21,346.00
Expenditures	\$ 1,761,506.42	\$ 1,761,506.42
General Fund Tax Transfer	\$ 1,330,506.42	\$ 1,330,506.42

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Environmental Health Services Division		
Hazardous Waste		
	10022	FY10 Total
432100 State Grants	\$ (75,000.00)	\$ (75,000.00)
Revenue	\$ (75,000.00)	\$ (75,000.00)
701110 Base Salaries	\$ 55,290.01	\$ 55,290.01
701200 Incentive	\$ 778.50	\$ 778.50
701412 Salary Adjustment	\$ (304.20)	\$ (304.20)
Salaries and Wages	\$ 55,764.31	\$ 55,764.31
705110 Group Insurance	\$ 5,999.91	\$ 5,999.91
705320 Retirement	\$ 12,025.38	\$ 12,025.38
705230 Medicare	\$ 808.40	\$ 808.40
705320 Workmens Comp	\$ 337.00	\$ 337.00
705330 Unemployment	\$ 65.00	\$ 65.00
Employee Benefits	\$ 19,235.69	\$ 19,235.69
Expenditures	\$ 75,000.00	\$ 75,000.00
General Fund Tax Transfer	\$ -	\$ -

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Environmental Health Services Division		
Underground Storage Tank		
	10023	FY10 Total
431100 Federal Grants	\$ (187,000.00)	\$ (187,000.00)
Revenue	\$ (187,000.00)	\$ (187,000.00)
701110 Base Salaries	\$ 126,493.14	\$ 126,493.14
701200 Incentive	\$ 1,500.00	\$ 1,500.00
Salaries and Wages	\$ 127,993.14	\$ 127,993.14
705110 Group Insurance	\$ 16,324.20	\$ 16,324.20
705320 Retirement	\$ 27,452.00	\$ 27,452.00
705230 Medicare	\$ 1,803.61	\$ 1,803.61
705320 Workmens Comp	\$ 674.00	\$ 674.00
705330 Unemployment	\$ 130.00	\$ 130.00
Employee Benefits	\$ 46,383.81	\$ 46,383.81
710300 Operating Supplies	\$ 3,143.05	\$ 3,143.05
710334 Copy Mach Ex	\$ 30.00	\$ 30.00
710350 Office Supplies	\$ 1,500.00	\$ 1,500.00
710360 Postage	\$ 500.00	\$ 500.00
710381 Express Courier	\$ 50.00	\$ 50.00
710502 Printing	\$ 100.00	\$ 100.00
710508 Telephone Landline	\$ 300.00	\$ 300.00
710509 Seminars Mtgs	\$ 2,000.00	\$ 2,000.00
711210 Travel	\$ 5,000.00	\$ 5,000.00
Services and Supplies	\$ 12,623.05	\$ 12,623.05
Expenditures	\$ 187,000.00	\$ 187,000.00
General Fund Tax Transfer	\$ -	\$ -

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Environmental Health Services Division			
	Solid Waste	Tire Fee	FY10
	172700	20269	Totals
422503 Environ Permits	\$ (62,000.00)	\$ -	\$ (62,000.00)
432310 Tire Fee	\$ -	\$ (370,534.52)	\$ (370,534.52)
Revenue	\$ (62,000.00)	\$ (370,534.52)	\$ (432,534.52)
701110 Base Salaries	\$ 72,315.22	\$ 251,996.41	\$ 324,311.63
701130 Pooled Positions	\$ -	\$ 500.00	\$ 500.00
701200 Incentive	\$ 2,000.00	\$ 5,950.00	\$ 7,950.00
Salaries and Wages	\$ 74,315.22	\$ 258,446.41	\$ 332,761.63
705110 Group Insurance	\$ 12,517.36	\$ 35,077.54	\$ 47,594.90
705320 Retirement	\$ 15,938.34	\$ 55,322.35	\$ 71,260.69
705230 Medicare	\$ 450.83	\$ 2,610.48	\$ 3,061.31
705320 Workmens Comp	\$ -	\$ 1,348.00	\$ 1,348.00
705330 Unemployment	\$ -	\$ 260.00	\$ 260.00
Employee Benefits	\$ 28,906.53	\$ 94,618.37	\$ 123,524.90
710100 Prof Services	\$ -	\$ -	\$ -
710200 Service Contracts	\$ -	\$ -	\$ -
710300 Operating Supplies	\$ -	\$ -	\$ -
710302 Small Tools	\$ 200.00	\$ -	\$ 200.00
710325 Signs & Markers	\$ -	\$ -	\$ -
710334 Copy Machine	\$ -	\$ -	\$ -
710350 Office Supplies	\$ 100.00	\$ -	\$ 100.00
710360 Postage	\$ 50.00	\$ -	\$ 50.00
710502 Printing	\$ 25.00	\$ -	\$ 25.00
710508 Telephone Land Lines	\$ -	\$ -	\$ -
710509 Seminars Mtgs	\$ -	\$ -	\$ -
710519 Cellular Phone	\$ -	\$ -	\$ -
710529 Dues	\$ -	\$ -	\$ -
710577 Uniforms	\$ -	\$ -	\$ -
711113 Equip Serv Replacement	\$ 4,965.96	\$ 7,054.92	\$ 12,020.88
711114 Equip Serv O & M	\$ 2,455.17	\$ 6,037.17	\$ 8,492.34
711117 ESD Fuel Charge	\$ 2,301.23	\$ 4,377.65	\$ 6,678.88
711119 Prop & Liability	\$ 2,082.00	\$ -	\$ 2,082.00
711210 Travel	\$ 650.00	\$ -	\$ 650.00
711504 Equipment NonCapital	\$ -	\$ -	\$ -
781007 Vehicles Capital	\$ -	\$ -	\$ -
Services and Supplies	\$ 12,829.36	\$ 17,469.74	\$ 30,299.10
Expenditures	\$ 116,051.11	\$ 370,534.52	\$ 486,585.63
General Fund Tax Transfer	\$ 54,051.11	\$ -	\$ 54,051.11

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Epidemiology & Public Health Preparedness Division		
Communicable Disease Prevention		
	171700	FY10 Total
701110 Base Salaries	\$ 309,187.00	\$ 309,187.00
701120 Part time	\$ 35,577.94	\$ 35,577.94
701200 Incentive	\$ 4,041.00	\$ 4,041.00
701300 Overtime	\$ 1,000.00	\$ 1,000.00
701412 Salary Adj	\$ 22,927.00	\$ 22,927.00
Salaries and Wages	\$ 372,732.94	\$ 372,732.94
705110 Group Insurance	\$ 52,501.54	\$ 52,501.54
705320 Retirement	\$ 74,811.30	\$ 74,811.30
705230 Medicare	\$ 4,140.81	\$ 4,140.81
705320 Workmens Comp	\$ 2,359.00	\$ 2,359.00
705330 Unemployment	\$ 455.00	\$ 455.00
Employee Benefits	\$ 134,267.65	\$ 134,267.65
710100 Professional Services	\$ 1,500.00	\$ 1,500.00
710105 Medical Services	\$ 100.00	\$ 100.00
710108 MD Consultants	\$ 12,000.00	\$ 12,000.00
710200 Service Contract	\$ 125.00	\$ 125.00
710205 Repairs Maint	\$ -	\$ -
710300 Operating Supplies	\$ 50.00	\$ 50.00
710334 Copy Machine Exp	\$ 150.00	\$ 150.00
710350 Office Supplies	\$ 1,000.00	\$ 1,000.00
710355 Books Subscriptions	\$ 600.00	\$ 600.00
710360 Postage	\$ 200.00	\$ 200.00
710361 Express Courier	\$ -	\$ -
710502 Printing	\$ -	\$ -
710508 Telephone Land Lines	\$ 2,000.00	\$ 2,000.00
710509 Seminars Mtgs	\$ 1,200.00	\$ 1,200.00
710512 Auto Exp	\$ 100.00	\$ 100.00
710518 Cell Phones	\$ 100.00	\$ 100.00
710528 Dues	\$ 40.00	\$ 40.00
710703 Biologicals	\$ 100.00	\$ 100.00
710721 Outpatient	\$ 3,000.00	\$ 3,000.00
711115 Equip Srv Motor	\$ 200.00	\$ 200.00
711119 Prop & Liability	\$ 5,552.00	\$ 5,552.00
711210 Travel	\$ 7,500.00	\$ 7,500.00
711504 Equip non-Capital	\$ 250.00	\$ 250.00
Services and Supplies	\$ 35,767.00	\$ 35,767.00
Expenditures	\$ 542,767.59	\$ 542,767.59
General Fund Tax Transfer	\$ 542,767.59	\$ 542,767.59

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Epidemiology & Public Health Preparedness Division		
Vital Statistics		
	170300	FY10 Total
460511 Birth Death Certs	\$ (215,000.00)	\$ (215,000.00)
Revenue	\$ (215,000.00)	\$ (215,000.00)
701110 Base Salaries	\$ 91,945.83	\$ 91,945.83
701200 Incentive	\$ 1,400.00	\$ 1,400.00
Salaries and Wages	\$ 93,345.83	\$ 93,345.83
705110 Group Insurance	\$ 12,735.34	\$ 12,735.34
705210 Retirement	\$ 20,021.11	\$ 20,021.11
705230 Medicare	\$ 1,353.52	\$ 1,353.52
705320 Workmens Comp	\$ 674.00	\$ 674.00
705330 Unemployment	\$ 130.00	\$ 130.00
Employee Benefits	\$ 34,913.97	\$ 34,913.97
710100 Professional Services	\$ 20,000.00	\$ 20,000.00
710200 Service Contracts	\$ 1,485.00	\$ 1,485.00
710205 Repairs Maint	\$ -	\$ -
710334 Copy Machine Exp	\$ 1,800.00	\$ 1,800.00
710350 Office Supplies	\$ 2,000.00	\$ 2,000.00
710360 Postage	\$ 2,500.00	\$ 2,500.00
710361 Express Courier	\$ -	\$ -
710502 Printing	\$ 7,700.00	\$ 7,700.00
710508 Telephone Land Lines	\$ 600.00	\$ 600.00
710602 LI Lease-Equip	\$ -	\$ -
711119 Prop & Liability	\$ 694.00	\$ 694.00
711210 Travel	\$ 1,000.00	\$ 1,000.00
Services and Supplies	\$ 37,779.00	\$ 37,779.00
Expenditures	\$ 166,038.80	\$ 166,038.80
General Fund Tax Transfer	\$ (48,961.20)	\$ (48,961.20)

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Community & Clinical Health Services Division		
	Local	FY10
	171100	Totals
701110 Base Salaries	\$ 242,558.05	\$ 242,558.05
701120 Part Time	\$ 57,708.50	\$ 57,708.50
701200 Incentive	\$ 4,350.00	\$ 4,350.00
701300 Overtime	\$ -	\$ -
701412 Salary Adjus	\$ (12,376.00)	\$ (12,376.00)
701500 Merit Awards	\$ 162,969.00	\$ 162,969.00
Salaries and Wages	\$ 455,207.55	\$ 455,207.55
705110 Group Insurance	\$ 31,388.45	\$ 31,388.45
705320 Retirement	\$ 65,332.45	\$ 65,332.45
705230 Medicare	\$ 3,445.57	\$ 3,445.57
705320 Workmens Comp	\$ 2,022.00	\$ 2,022.00
705330 Unemployment	\$ 390.00	\$ 390.00
Employee Benefits	\$ 102,578.47	\$ 102,578.47
710100 Professional Services	\$ 750.00	\$ 750.00
710105 Medical Service	\$ 400.00	\$ 400.00
710300 Operating Supplies	\$ 50.00	\$ 50.00
710312 Special Depl Ex	\$ -	\$ -
710334 Copy Machine Exp	\$ 10,000.00	\$ 10,000.00
710350 Office Supplies	\$ 1,400.00	\$ 1,400.00
710355 Books Subscriptions	\$ 1,000.00	\$ 1,000.00
710360 Postage	\$ 100.00	\$ 100.00
710361 Express Courier	\$ 50.00	\$ 50.00
710500 Other Expense	\$ 100.00	\$ 100.00
710502 Printing	\$ 200.00	\$ 200.00
710503 License & Permits	\$ 1,000.00	\$ 1,000.00
710508 Telephone Land Lines	\$ 6,000.00	\$ 6,000.00
710509 Seminars Mtgs	\$ 2,000.00	\$ 2,000.00
710512 Auto Exp	\$ 700.00	\$ 700.00
710529 Dues	\$ 1,000.00	\$ 1,000.00
710546 Advertising	\$ -	\$ -
710714 Referral Services	\$ -	\$ -
711113 Equip Serv Replacement	\$ 1,397.28	\$ 1,397.28
711114 Equip Serv O & M	\$ 904.60	\$ 904.60
711117 ESD Fuel Charge	\$ 538.69	\$ 538.69
711119 Prop & Liability	\$ 2,082.00	\$ 2,082.00
711210 Travel	\$ 5,100.00	\$ 5,100.00
711504 Equip non-Capital	\$ 1,000.00	\$ 1,000.00
Services and Supplies	\$ 35,772.57	\$ 35,772.57
Expenditures	\$ 593,558.59	\$ 593,558.59
General Fund Tax Transfer	\$ 593,558.59	\$ 593,558.59

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Community & Clinical Health Services Division		
Child Abuse & Neglect Prevention		
	10410	FY10 Total
432100 State Grants	\$ (101,070.94)	\$ (101,070.94)
Revenue	\$ (101,070.94)	\$ (101,070.94)
701110 Base Salaries	\$ 71,805.15	\$ 71,805.15
701200 Incentive	\$ 1,750.00	\$ 1,750.00
Salaries and Wages	\$ 73,555.15	\$ 73,555.15
705110 Group Insurance	\$ 10,314.37	\$ 10,314.37
705320 Retirement	\$ 15,775.55	\$ 15,775.55
705230 Medicare	\$ 1,023.87	\$ 1,023.87
705320 Workmens Comp	\$ 337.00	\$ 337.00
705330 Unemployment	\$ 65.00	\$ 65.00
Employee Benefits	\$ 27,515.79	\$ 27,515.79
710100 Professional Services	\$ -	\$ -
710200 Service Contract	\$ -	\$ -
710361 Express Courier	\$ -	\$ -
710500 Other Expenses	\$ -	\$ -
710502 Printing	\$ -	\$ -
710519 Cellular Phone	\$ -	\$ -
711210 Travel	\$ -	\$ -
Services and Supplies	\$ -	\$ -
Expenditures	\$ 101,070.94	\$ 101,070.94
General Fund Tax Transfer	\$ -	\$ -

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Community & Clinical Health Services Division				
Chronic Disease & Injury Prevention				
	Health Ed	Tobacco Ctrl	Tobacco Prev	FY10
	170800	10010	10418	Totals
431100 Federal Grants	\$ -	\$ (122,552.00)	\$ -	\$ (122,552.00)
432100 State Grants	\$ -	\$ -	\$ (177,767.63)	\$ (177,767.63)
Revenue	\$ -	\$ (122,552.00)	\$ (177,767.63)	\$ (300,319.63)
701110 Base Salaries	\$ 117,476.39	\$ 64,751.09	\$ 129,942.09	\$ 312,169.57
701120 Part Time	\$ 45,717.15	\$ -	\$ -	\$ 45,717.15
701200 Incentive	\$ 1,025.00	\$ 750.00	\$ 550.00	\$ 2,325.00
Salaries and Wages	\$ 164,218.54	\$ 65,501.09	\$ 130,492.09	\$ 360,211.72
705110 Group Insurance	\$ 22,488.10	\$ 15,191.60	\$ 16,597.44	\$ 54,277.14
705320 Retirement	\$ 35,221.59	\$ 14,048.72	\$ 27,990.42	\$ 77,260.73
705230 Medicare	\$ 2,329.04	\$ 821.81	\$ 1,883.68	\$ 5,034.53
705320 Workmens Comp	\$ 1,011.00	\$ 337.00	\$ 674.00	\$ 2,022.00
705330 Unemployment	\$ 195.00	\$ 65.00	\$ 130.00	\$ 390.00
Employee Benefits	\$ 61,244.73	\$ 30,464.13	\$ 47,275.54	\$ 138,984.40
710100 Professional Services	\$ 10,000.00	\$ 2,500.00	\$ -	\$ 12,500.00
710200 Service Contract	\$ -	\$ -	\$ -	\$ -
710210 Software Maintenance	\$ 350.00			\$ 350.00
710300 Operating Supplies	\$ 1,500.00	\$ 1,000.00	\$ -	\$ 2,500.00
710334 Copy Machine Exp	\$ 200.00	\$ 100.00	\$ -	\$ 300.00
710350 Office Supplies	\$ 750.00	\$ 1,333.00	\$ -	\$ 2,083.00
170355 Books/Subscr	\$ -	\$ -	\$ -	\$ -
710360 Postage	\$ 50.00	\$ 250.00	\$ -	\$ 300.00
710361 Express Courier		\$ 100.00	\$ -	\$ 100.00
710500 Other Expenses	\$ 1,500.00	\$ 2,000.00	\$ -	\$ 3,500.00
710502 Printing	\$ 1,000.00	\$ 300.00	\$ -	\$ 1,300.00
710507 Network, Data	\$ -	\$ 600.00	\$ -	\$ 600.00
710508 Telephone Land Lines	\$ 120.00	\$ 600.00	\$ -	\$ 720.00
710509 Seminars Mtgs	\$ 250.00	\$ 1,500.00	\$ -	\$ 1,750.00
710512 Auto Exp	\$ 430.00	\$ 500.00	\$ -	\$ 930.00
710529 Dues	\$ 50.00	\$ 50.00	\$ -	\$ 100.00
710546 Advertising	\$ 2,394.00	\$ 12,953.78	\$ -	\$ 15,347.78
711115 Equip Srv Motor	\$ 125.00	\$ 300.00		\$ 425.00
711119 Prop & Liability Billing	\$ 2,082.00	\$ -	\$ -	\$ 2,082.00
711210 Travel	\$ 3,500.00	\$ 1,500.00	\$ -	\$ 5,000.00
711504 Equip non-Capital	\$ 250.00	\$ 1,000.00	\$ -	\$ 1,250.00
Services and Supplies	\$ 24,551.00	\$ 26,586.78	\$ -	\$ 51,137.78
Expenditures	\$ 250,014.27	\$ 122,552.00	\$ 177,767.63	\$ 550,333.90
General Fund Tax Transfer	\$ 250,014.27	\$ -	\$ -	\$ 250,014.27

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Community & Clinical Health Services Division				
HIV Program				
	Surveillance	Prevention	Fiscal Agent	FY10
	10012	10013	10187	Totals
431100 Federal Grants	\$ (85,229.00)	\$ (581,142.00)	\$ (32,039.00)	\$ (698,410.00)
Revenue	\$ (85,229.00)	\$ (581,142.00)	\$ (32,039.00)	\$ (698,410.00)
701110 Base Salaries	\$ 55,398.14	\$ 238,391.50	\$ 21,392.33	\$ 315,181.97
701120 Part Time	\$ -	\$ -	\$ -	\$ -
701200 Incentive	\$ 936.00	\$ 4,074.00	\$ 140.00	\$ 5,150.00
701412 Salary Adj	\$ 6,452.27	\$ (6,854.83)	\$ 402.56	\$ 0.00
Salaries and Wages	\$ 62,786.41	\$ 235,610.67	\$ 21,934.89	\$ 320,331.97
705110 Group Insurance	\$ 6,678.92	\$ 28,877.38	\$ 5,196.93	\$ 40,753.23
705320 Retirement	\$ 12,082.05	\$ 52,003.60	\$ 4,618.58	\$ 68,704.23
705230 Medicare	\$ 779.62	\$ 3,439.11	\$ 288.60	\$ 4,507.33
705320 Workmens Comp	\$ 337.00	\$ 1,011.00	\$ -	\$ 1,348.00
705330 Unemployment	\$ 65.00	\$ 195.00	\$ -	\$ 260.00
Employee Benefits	\$ 19,942.59	\$ 85,526.09	\$ 10,104.11	\$ 115,572.79
710100 Professional Services	\$ -	\$ -	\$ -	\$ -
710119 Subrecipient Payment	\$ -	\$ 189,994.00	\$ -	\$ 189,994.00
710300 Operating Supplies	\$ -	\$ 15,000.00	\$ -	\$ 15,000.00
710334 Copy Machine Exp	\$ -	\$ 500.00	\$ -	\$ 500.00
710350 Office Supplies	\$ -	\$ 2,000.00	\$ -	\$ 2,000.00
710355 Books/Subscriptions	\$ -	\$ 200.00	\$ -	\$ 200.00
710361 Express Courier	\$ -	\$ 200.00	\$ -	\$ 200.00
710500 Other Expenses	\$ -	\$ 1,000.00	\$ -	\$ 1,000.00
710502 Printing	\$ -	\$ 3,157.24	\$ -	\$ 3,157.24
710503 Licenses & Permits	\$ -	\$ 100.00	\$ -	\$ 100.00
710505 Rental Equipment	\$ -	\$ 469.00	\$ -	\$ 469.00
710508 Telephone Land Lines	\$ -	\$ 1,000.00	\$ -	\$ 1,000.00
710509 Seminars Mtgs	\$ -	\$ 3,300.00	\$ -	\$ 3,300.00
710512 Auto Exp	\$ -	\$ 372.00	\$ -	\$ 372.00
710519 Cellular Phone	\$ -	\$ -	\$ -	\$ -
710546 Advertising	\$ -	\$ 10,000.00	\$ -	\$ 10,000.00
710721 Outpatient	\$ -	\$ 24,285.00	\$ -	\$ 24,285.00
710872 Food Purchases	\$ -	\$ 1,000.00	\$ -	\$ 1,000.00
711115 Equip Srv Motor	\$ -	\$ 100.00	\$ -	\$ 100.00
711210 Travel	\$ 2,500.00	\$ 6,328.00	\$ -	\$ 8,828.00
711504 Equip Non-Ca	\$ -	\$ 1,000.00	\$ -	\$ 1,000.00
Services and Supplies	\$ 2,500.00	\$ 260,005.24	\$ -	\$ 262,505.24
Expenditures	\$ 85,229.00	\$ 581,142.00	\$ 32,039.00	\$ 698,410.00
General Fund Tax Transfer	\$ -	\$ -	\$ -	\$ -

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Community & Clinical Health Services Division					
Family Planning					
	Local	Title X	WHC	Program Income	FY10
	173000	10025	10028	10478	Totals
430100 Federal Grants	\$ -	\$ (729,078.00)	\$ (6,000.00)	\$ -	\$ (735,078.00)
432100 State Grants	\$ -	\$ -	\$ -	\$ -	\$ -
460501 Medicaid Clinic	\$ -	\$ -	\$ -	\$ (12,000.00)	\$ (12,000.00)
460516 Pgm Inc - 3rd Party	\$ -	\$ -	\$ -	\$ (3,000.00)	\$ (3,000.00)
460524 Family Planning	\$ -	\$ -	\$ -	\$ (100,000.00)	\$ (100,000.00)
Revenue	\$ -	\$ (729,078.00)	\$ (6,000.00)	\$ (115,000.00)	\$ (850,078.00)
701110 Base Salaries	\$ 286,558.73	\$ 94,782.34	\$ -	\$ -	\$ 361,341.07
701120 Part Time	\$ 47,406.53	\$ 219,767.81	\$ -	\$ -	\$ 267,174.34
701130 Pooled Positions	\$ 1,071.34	\$ 13,137.80	\$ -	\$ -	\$ 14,209.14
701200 Incentive	\$ 6,310.00	\$ 1,700.00	\$ -	\$ -	\$ 8,010.00
701412 Salary Adj	\$ -	\$ 138,838.00	\$ -	\$ -	\$ 138,838.00
701500 Merit Awards	\$ (292,409.39)	\$ -	\$ -	\$ -	\$ (292,409.39)
Salaries and Wages	\$ 28,937.21	\$ 468,225.95	\$ -	\$ -	\$ 497,163.16
705110 Group Insurance	\$ 60,259.94	\$ 46,787.29	\$ -	\$ -	\$ 107,047.23
705320 Retirement	\$ 68,690.00	\$ 67,829.02	\$ -	\$ -	\$ 136,519.02
705230 Medicare	\$ 3,769.65	\$ 3,821.74	\$ -	\$ -	\$ 7,591.39
705320 Workmens Comp	\$ 2,022.00	\$ 1,685.00	\$ -	\$ -	\$ 3,707.00
705330 Unemployment	\$ 390.00	\$ 325.00	\$ -	\$ -	\$ 715.00
Employee Benefits	\$ 135,131.59	\$ 120,448.05	\$ -	\$ -	\$ 255,579.64
710100 Professional Services	\$ 2,050.00	\$ 6,507.00	\$ -	\$ -	\$ 8,557.00
710105 Medical Services	\$ 5,400.00	\$ 6,600.00	\$ -	\$ -	\$ 12,000.00
710108 MD Consultants	\$ 6,057.00	\$ -	\$ -	\$ -	\$ 6,057.00
710119 Subrecipient Payments	\$ -	\$ -	\$ -	\$ -	\$ -
710205 Repairs Maint	\$ 510.00	\$ 50.00	\$ -	\$ -	\$ 560.00
710300 Operating Supplies	\$ -	\$ 19,250.00	\$ -	\$ -	\$ 19,250.00
710334 Copy Machine Exp	\$ 500.00	\$ -	\$ -	\$ -	\$ 500.00
710350 Office Supplies	\$ 500.00	\$ 1,700.00	\$ -	\$ -	\$ 2,200.00
710355 Books Subscriptions	\$ -	\$ 500.00	\$ -	\$ -	\$ 500.00
710360 Postage	\$ 1,000.00	\$ -	\$ -	\$ -	\$ 1,000.00
710361 Express Courier	\$ -	\$ 20.00	\$ -	\$ -	\$ 20.00
710500 Other Exp	\$ 550.00	\$ 200.00	\$ -	\$ -	\$ 750.00
710502 Printing	\$ -	\$ 500.00	\$ -	\$ -	\$ 500.00
710503 Licenses & Permits	\$ 500.00	\$ 500.00	\$ -	\$ -	\$ 1,000.00
710508 Telephone Land Lines	\$ 1,650.00	\$ 350.00	\$ -	\$ -	\$ 2,000.00
710509 Seminars Mtgs	\$ -	\$ 1,000.00	\$ -	\$ -	\$ 1,000.00
710512 Auto Exp	\$ 5.00	\$ 20.00	\$ -	\$ -	\$ 25.00
710529 Dues	\$ 500.00	\$ -	\$ -	\$ -	\$ 500.00
710535 Credit Card Fee	\$ 800.00	\$ -	\$ -	\$ -	\$ 800.00
710546 Advertising	\$ -	\$ 2,000.00	\$ -	\$ -	\$ 2,000.00
710577 Uniforms & Special Equip	\$ -	\$ -	\$ -	\$ -	\$ -
710703 Biologicals	\$ -	\$ 66,157.00	\$ -	\$ -	\$ 66,157.00
710721 Outpatient	\$ -	\$ 31,500.00	\$ 6,000.00	\$ -	\$ 37,500.00
710872 Food Purchase	\$ -	\$ 50.00	\$ -	\$ -	\$ 50.00
711119 Prop & Liability	\$ 3,817.00	\$ -	\$ -	\$ -	\$ 3,817.00
711210 Travel	\$ -	\$ 3,000.00	\$ -	\$ -	\$ 3,000.00
711504 Equip non-Capital	\$ -	\$ 500.00	\$ -	\$ -	\$ 500.00
Services and Supplies	\$ 23,839.00	\$ 140,404.00	\$ 6,000.00	\$ -	\$ 170,243.00
Expenditures	\$ 187,907.80	\$ 729,078.00	\$ 6,000.00	\$ -	\$ 922,985.80
General Fund Tax Transfer	\$ 187,907.80	\$ -	\$ -	\$ (115,000.00)	\$ 72,907.80

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Community & Clinical Health Services Division				
Immunizations				
	Local	Base	Program Income	FY10
	173500	10028	10479	Totals
431100 Federal Grants	\$ -	\$ (389,550.00)	\$ -	\$ (369,550.00)
460500 Other Immunizations	\$ -	\$ -	\$ (110,000.00)	\$ (110,000.00)
460501 Medicaid Clinic	\$ -	\$ -	\$ (19,500.00)	\$ (19,500.00)
460503 Child Immunizations	\$ -	\$ -	\$ (190,000.00)	\$ (190,000.00)
460515 Medicare Reimbursement	\$ -	\$ -	\$ (500.00)	\$ (500.00)
460517 Influenza Immunizations	\$ -	\$ -	\$ (5,000.00)	\$ (5,000.00)
Revenue	\$ -	\$ (389,550.00)	\$ (325,000.00)	\$ (694,550.00)
701110 Base Salaries	\$ 425,797.99	\$ 191,021.26	\$ -	\$ 616,819.25
701120 Part Time	\$ 100,255.17	\$ 28,622.52	\$ -	\$ 128,877.69
701130 Pooled Positions	\$ 19,700.00	\$ -	\$ -	\$ 19,700.00
701200 Incentive	\$ 7,775.50	\$ 2,988.50	\$ -	\$ 10,764.00
701300 Overtime	\$ -	\$ -	\$ -	\$ -
701412 Salary Adjustment		\$ 37,089.26	\$ -	\$ 37,089.26
Salaries and Wages	\$ 553,528.66	\$ 259,721.54	\$ -	\$ 813,250.20
705110 Group Insurance	\$ 85,446.11	\$ 31,219.43	\$ -	\$ 116,665.54
705320 Retirement	\$ 114,492.29	\$ 47,748.48	\$ -	\$ 162,240.77
705230 Medicare	\$ 7,304.47	\$ 3,081.55	\$ -	\$ 10,386.02
705320 Workmens Comp	\$ 2,696.00	\$ 1,348.00	\$ -	\$ 4,044.00
705330 Unemployment	\$ 520.00	\$ 260.00	\$ -	\$ 780.00
Employee Benefits	\$ 210,458.87	\$ 83,657.46	\$ -	\$ 294,116.33
710100 Professional Services	\$ 14,200.00	\$ 2,050.00	\$ -	\$ 16,250.00
710108 MD Consultants	\$ 5,600.00	\$ 3,825.00	\$ -	\$ 9,425.00
710200 Service Contract	\$ 1,100.00	\$ -	\$ -	\$ 1,100.00
710205 Repairs Maint	\$ 300.00	\$ 1,000.00	\$ -	\$ 1,300.00
710300 Operating Supplies	\$ 14,500.00	\$ -	\$ -	\$ 14,500.00
710334 Copy Machine Exp	\$ 500.00	\$ 2,472.00	\$ -	\$ 2,972.00
710350 Office Supplies	\$ 1,500.00	\$ 3,584.00	\$ -	\$ 5,084.00
710360 Postage	\$ 500.00	\$ 1,020.00	\$ -	\$ 1,520.00
710500 Other Expenses	\$ -	\$ -	\$ -	\$ -
710502 Printing	\$ 1,000.00	\$ 2,400.00	\$ -	\$ 3,400.00
710503 Licenses & Permits	\$ 400.00	\$ -	\$ -	\$ 400.00
710507 Network Data Li	\$ 700.00	\$ -	\$ -	\$ 700.00
710508 Telephone Land Lines	\$ 3,042.00	\$ 780.00	\$ -	\$ 3,822.00
710509 Seminars Mtgs	\$ 250.00	\$ 550.00	\$ -	\$ 800.00
710512 Auto Exp	\$ 650.00	\$ 1,217.00	\$ -	\$ 1,867.00
710535 Credit Card Fee	\$ 4,600.00	\$ -	\$ -	\$ 4,600.00
710577 Uniforms & Special Equip	\$ 150.00	\$ -	\$ -	\$ 150.00
710703 Biologicals	\$ 160,000.00	\$ -	\$ -	\$ 160,000.00
711119 Prop & Liability	\$ 4,164.00	\$ -	\$ -	\$ 4,164.00
711210 Travel	\$ 1,000.00	\$ 6,073.00	\$ -	\$ 7,073.00
711504 Equip non-Capital	\$ 500.00	\$ 1,200.00	\$ -	\$ 1,700.00
Services and Supplies	\$ 214,856.00	\$ 26,171.00	\$ -	\$ 240,827.00
Expenditures	\$ 978,643.53	\$ 369,550.00	\$ -	\$ 1,348,193.53
General Fund Tax Transfer	\$ 978,643.53	\$ -	\$ (325,000.00)	\$ 653,643.53

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

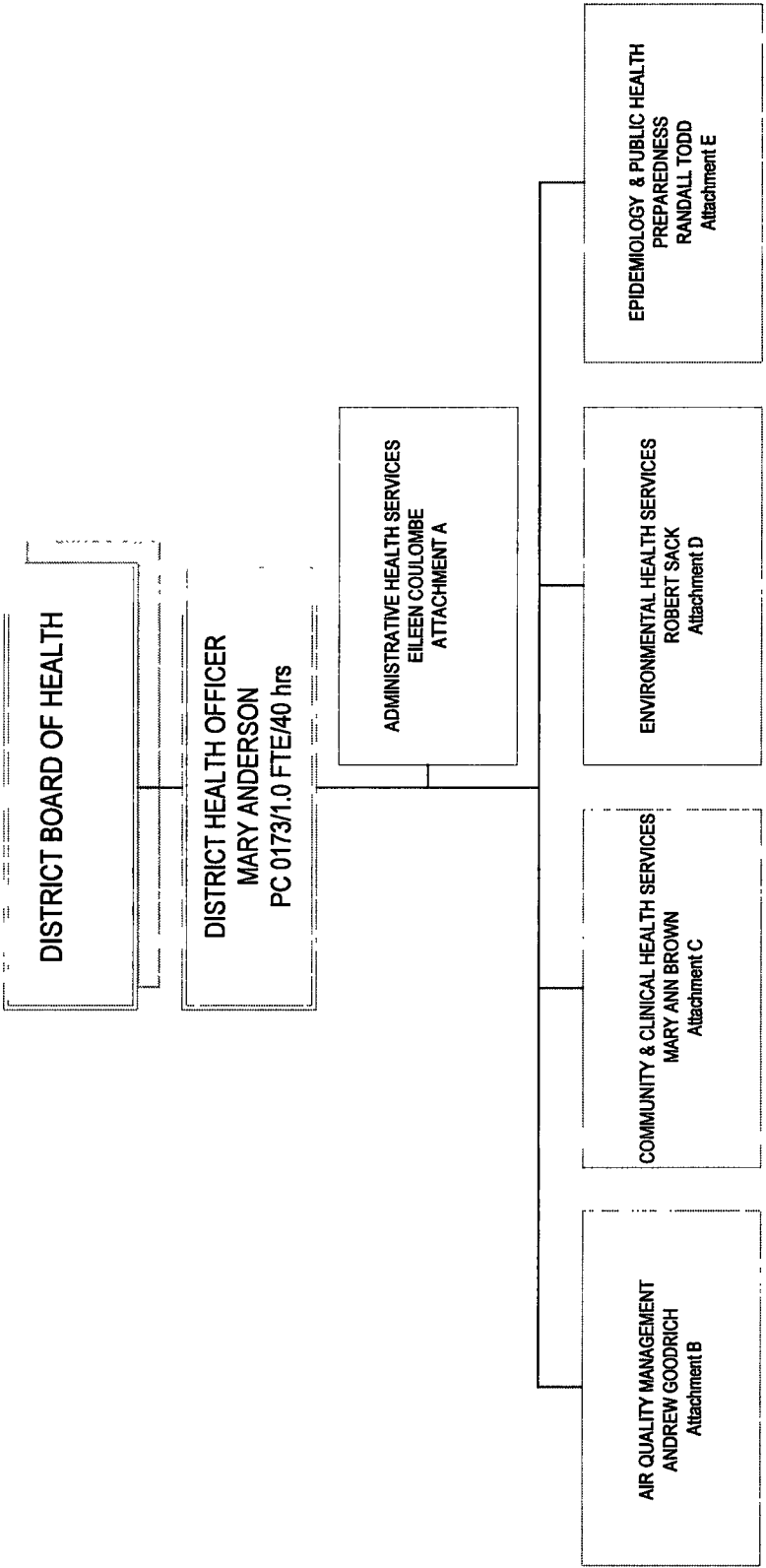
Community & Clinical Health Services Division			
Public Health Nursing			
	Home Visiting	Perinatal	FY10
	170600	60163	Totals
460162 Services O A	\$ -	\$ (63,657.69)	\$ (63,657.69)
460519 Outpatient Services	\$ (12,500.00)	\$ -	\$ (12,500.00)
Revenue	\$ (12,500.00)	\$ (63,657.69)	\$ (76,157.69)
701110 Base Salaries	\$ 404,136.63	\$ -	\$ 404,136.63
701150 Contractual	\$ -	\$ -	\$ -
701120 Part Time	\$ 17,536.03	\$ 46,165.28	\$ 63,701.31
701200 Incentive	\$ 9,950.00	\$ -	\$ 9,950.00
701300 Overtime	\$ 75.00	\$ -	\$ 75.00
701500 Merit Awards	\$ (200,205.00)	\$ -	\$ (200,205.00)
Salaries and Wages	\$ 231,492.66	\$ 46,165.28	\$ 277,657.94
705110 Group Insurance	\$ 56,417.47	\$ 6,960.07	\$ 63,377.54
705320 Retirement	\$ 92,565.23	\$ 9,901.64	\$ 102,466.87
705230 Medicare	\$ 5,421.78	\$ 630.70	\$ 6,052.48
705320 Workmens Comp	\$ 3,707.00	\$ -	\$ 3,707.00
705330 Unemployment	\$ 715.00	\$ -	\$ 715.00
Employee Benefits	\$ 158,826.48	\$ 17,492.41	\$ 176,318.89
710100 Professional Services	\$ 1,000.00	\$ -	\$ 1,000.00
710205 Repairs Maintenance	\$ 50.00	\$ -	\$ 50.00
710300 Operating Supplies	\$ 500.00	\$ -	\$ 500.00
710334 Copy Machine Exp	\$ 250.00	\$ -	\$ 250.00
710350 Office Supplies	\$ 500.00	\$ -	\$ 500.00
710360 Postage	\$ 100.00	\$ -	\$ 100.00
710361 Express Courier	\$ 20.00	\$ -	\$ 20.00
710500 Other Expenses	\$ 100.00	\$ -	\$ 100.00
710502 Printing	\$ 500.00	\$ -	\$ 500.00
710503 Licenses & Permits	\$ 500.00	\$ -	\$ 500.00
710508 Telephone Land Lines	\$ 1,700.00	\$ -	\$ 1,700.00
710509 Seminars Mtgs	\$ 500.00	\$ -	\$ 500.00
710512 Auto Exp	\$ 5,000.00	\$ -	\$ 5,000.00
710519 Cell Phone	\$ 332.00	\$ -	\$ 332.00
711115 Equip Srv Motor Pool	\$ 4,000.00	\$ -	\$ 4,000.00
711119 Prop & Liability	\$ 4,164.00	\$ -	\$ 4,164.00
711210 Travel	\$ 1,500.00	\$ -	\$ 1,500.00
Services and Supplies	\$ 20,716.00	\$ -	\$ 20,716.00
Expenditures	\$ 411,035.14	\$ 63,657.69	\$ 474,692.83
General Fund Tax Transfer	\$ 398,535.14	\$ -	\$ 398,535.14

FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

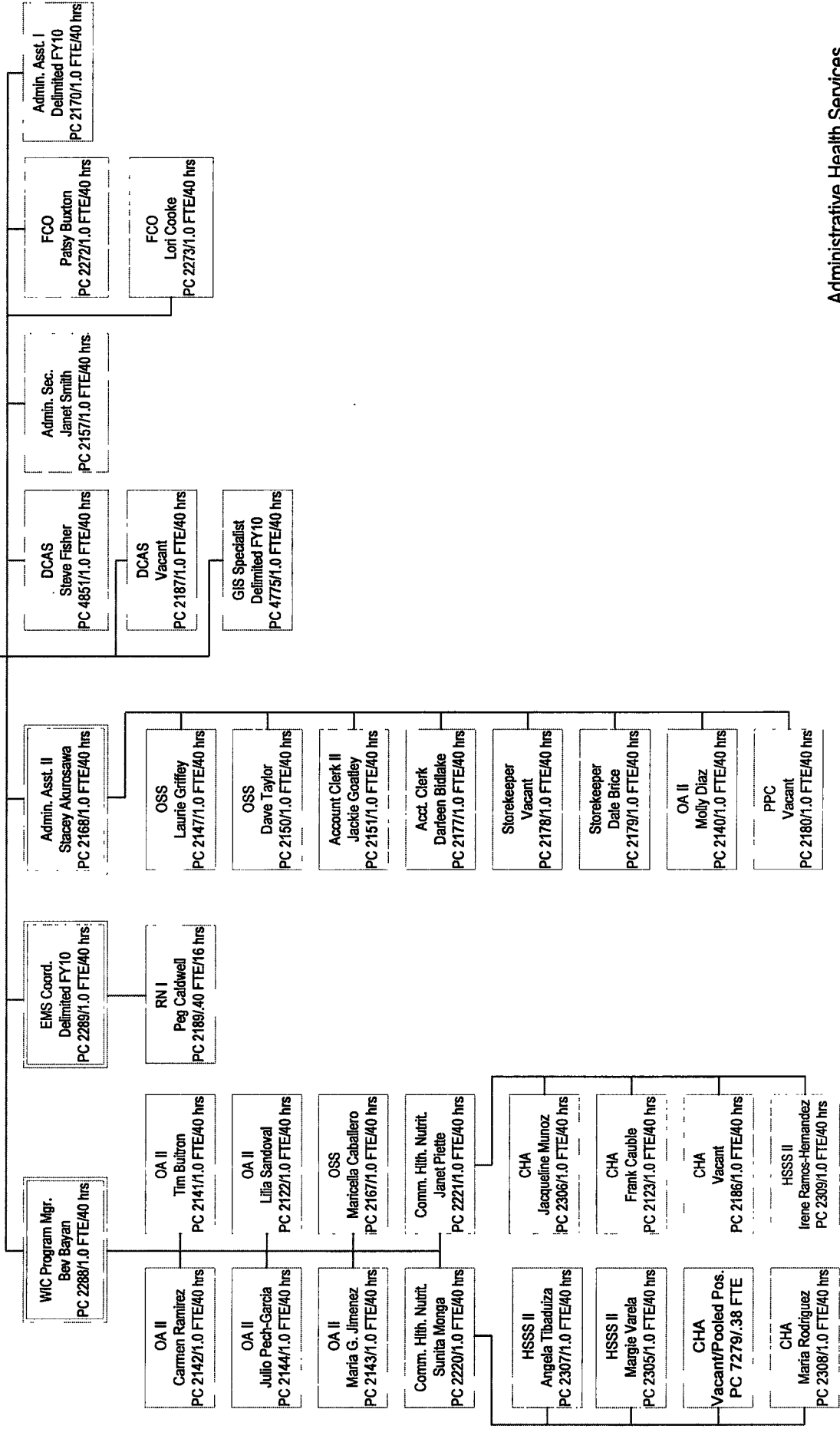
Community & Clinical Health Services Division				
Sexual Health Program				
	SH	SH Grant	Income	FY10
	171300	10014	10480	Totals
460501 Medicaid Clinics	\$ -	\$ -	\$ (4,000.00)	\$ (4,000.00)
460516 Pgm Inc - 3rd Party	\$ -	\$ -	\$ (4,000.00)	\$ (4,000.00)
460518 STD Fees	\$ -	\$ -	\$ (30,000.00)	\$ (30,000.00)
431100 Federal Grants	\$ -	\$ (115,022.00)	\$ -	\$ (115,022.00)
Revenue	\$ -	\$ (115,022.00)	\$ (38,000.00)	\$ (153,022.00)
701110 Base Salaries	\$ 313,964.67	\$ 69,247.80	\$ -	\$ 383,212.47
701120 Part Time	\$ 15,388.43	\$ -	\$ -	\$ 15,388.43
701200 Incentive	\$ 5,495.00	\$ 1,625.00	\$ -	\$ 7,120.00
701300 Overtime	\$ -	\$ -	\$ -	\$ -
701412 Salary Adjustment	\$ -	\$ (1,371.25)	\$ -	\$ (1,371.25)
Salaries and Wages	\$ 334,848.10	\$ 69,501.55	\$ -	\$ 404,349.65
705110 Group Insurance	\$ 40,027.34	\$ 5,730.85	\$ -	\$ 45,758.19
705320 Retirement	\$ 71,815.67	\$ 15,199.62	\$ -	\$ 87,015.29
705230 Medicare	\$ 4,709.97	\$ 1,018.98	\$ -	\$ 5,728.95
705320 Workmens Comp	\$ 2,359.00	\$ -	\$ -	\$ 2,359.00
705330 Unemployment	\$ 455.00	\$ -	\$ -	\$ 455.00
Employee Benefits	\$ 119,366.98	\$ 21,949.45	\$ -	\$ 141,316.43
710100 Professional Services	\$ 8,000.00	\$ -	\$ -	\$ 8,000.00
710108 MD Consultants	\$ 11,500.00	\$ -	\$ -	\$ 11,500.00
710205 Repairs Maintenance	\$ 350.00	\$ -	\$ -	\$ 350.00
710300 Operating Supplies	\$ 5,550.00	\$ -	\$ -	\$ 5,550.00
710334 Copy Machine Exp	\$ 100.00	\$ -	\$ -	\$ 100.00
710350 Office Supplies	\$ 1,000.00	\$ -	\$ -	\$ 1,000.00
710360 Postage	\$ 1,000.00	\$ -	\$ -	\$ 1,000.00
710361 Express Courier	\$ 25.00	\$ -	\$ -	\$ 25.00
710500 Other Expenses	\$ 300.00	\$ -	\$ -	\$ 300.00
710502 Printing	\$ 50.00	\$ -	\$ -	\$ 50.00
710503 Licenses & Permits	\$ 200.00	\$ -	\$ -	\$ 200.00
710508 Telephone Land Lines	\$ 1,000.00	\$ -	\$ -	\$ 1,000.00
710509 Seminars Mtgs	\$ 250.00	\$ -	\$ -	\$ 250.00
710512 Auto Expense	\$ 200.00	\$ -	\$ -	\$ 200.00
710535 Credit Card Fee	\$ 450.00	\$ -	\$ -	\$ 450.00
710577 Uniforms	\$ 200.00	\$ -	\$ -	\$ 200.00
710703 Biologicals	\$ 5,000.00	\$ -	\$ -	\$ 5,000.00
710721 Outpatient	\$ 15,000.00	\$ 23,571.00	\$ -	\$ 38,571.00
711119 Prop & Liability	\$ 3,817.00	\$ -	\$ -	\$ 3,817.00
711210 Travel	\$ 6,450.00	\$ -	\$ -	\$ 6,450.00
711504 Equip non-Capital	\$ 500.00	\$ -	\$ -	\$ 500.00
Services and Supplies	\$ 60,942.00	\$ 23,571.00	\$ -	\$ 84,513.00
Expenditures	\$ 515,157.08	\$ 115,022.00	\$ -	\$ 630,179.08
General Fund Tax Transfer	\$ 515,157.08	\$ -	\$ (38,000.00)	\$ 477,157.08

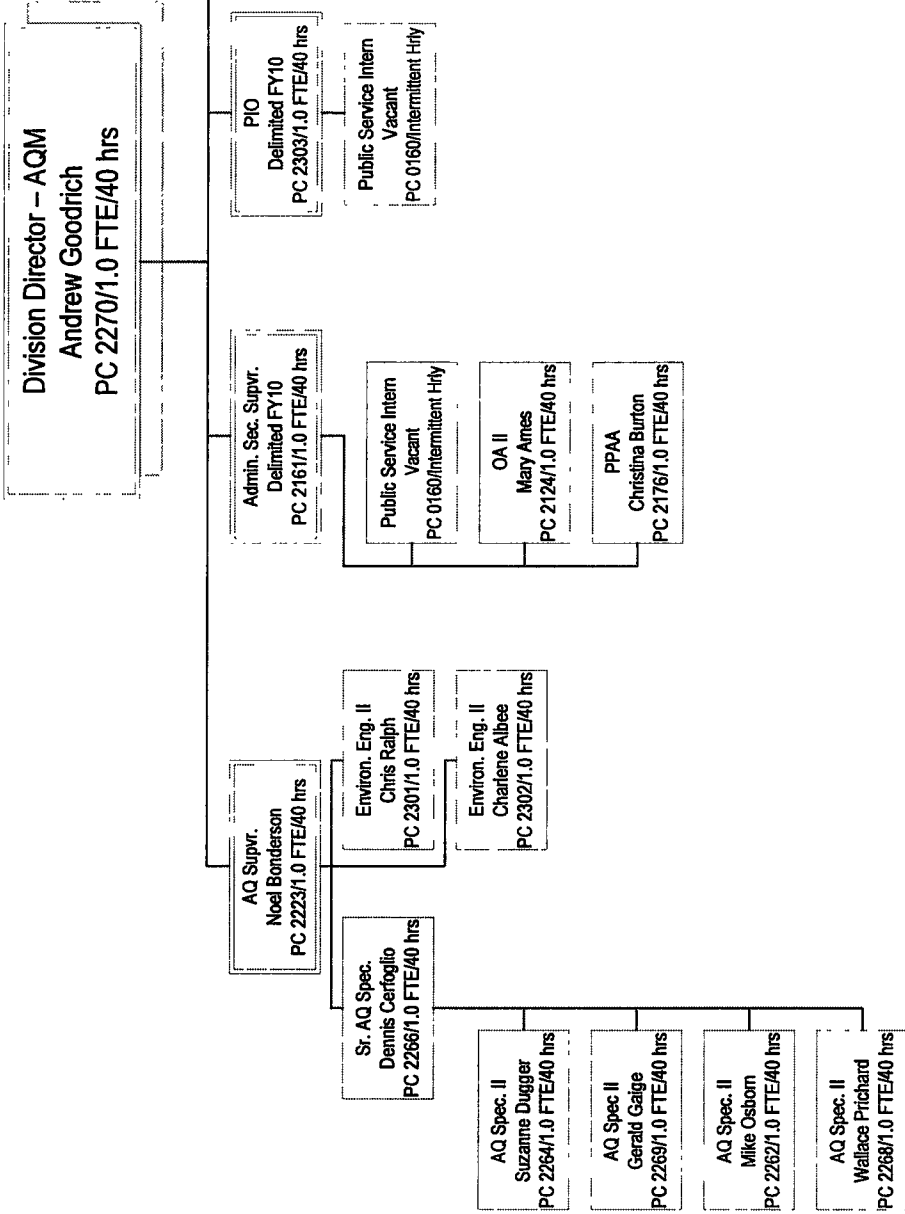
FY10 ADOPTED BUDGET
(2010 Recommend - Report Date: 05/11/09)

Community & Clinical Health Services Division					
Tuberculosis					
	Local	CDC Grant	Supplement	Income	FY10
	171400	10016	10035	10481	Totals
431100 Federal Grants	\$ -	\$(67,723.00)	\$ -	\$ -	\$ (67,723.00)
432100 State Grants	\$ -	\$ -	\$(118,366.00)	\$ -	\$(118,366.00)
460501 Medicaid Clinic	\$ -	\$ -	\$ -	\$ (1,000.00)	\$ (1,000.00)
460508 Tuberculosis	\$ -	\$ -	\$ -	\$ (10,000.00)	\$ (10,000.00)
460516 Pgm 3 rd Prt	\$ -	\$ -	\$ -	\$ (2,000.00)	\$ (2,000.00)
Revenue	\$ -	\$(67,723.00)	\$(118,366.00)	\$(13,000.00)	\$(199,089.00)
701110 Base Salaries	\$214,624.21	\$ 44,626.46	\$ 32,315.54	\$ -	\$ 291,566.21
701120 Part Time	\$ 24,821.34	\$ -	\$ 36,932.26	\$ -	\$ 61,563.60
701200 Incentive	\$ 2,990.00	\$ 957.00	\$ 693.00	\$ -	\$ 4,640.00
701300 Overtime	\$ 100.00	\$ -	\$ -	\$ -	\$ 100.00
701412 Salary Adjus	\$ -	\$ -	\$ (1,522.09)	\$ -	\$ (1,522.09)
Salaries and Wages	\$242,335.55	\$ 45,583.46	\$ 68,418.71	\$ -	\$ 356,337.72
705110 Group Insurance	\$ 31,172.93	\$ 6,365.67	\$ 12,833.75	\$ -	\$ 50,372.35
705320 Retirement	\$ 51,953.34	\$ 9,776.26	\$ 15,000.53	\$ -	\$ 76,730.13
705230 Medicare	\$ 2,751.93	\$ 625.09	\$ 927.43	\$ -	\$ 4,304.45
705320 Workmens Comp	\$ 1,011.00	\$ 337.00	\$ 337.00	\$ -	\$ 1,685.00
705330 Unemployment	\$ 195.00	\$ 65.00	\$ 65.00	\$ -	\$ 325.00
Employee Benefits	\$ 87,084.20	\$ 17,169.02	\$ 29,163.71	\$ -	\$ 133,416.93
710100 Prof Services	\$ 7,066.00	\$ -	\$ 1,942.00	\$ -	\$ 9,008.00
710105 Medical Serv	\$ 600.00	\$ -	\$ -	\$ -	\$ 600.00
710108 MD Consultants	\$ 9,200.00	\$ -	\$ 7,200.00	\$ -	\$ 16,400.00
710200 Service Contract	\$ -	\$ -	\$ -	\$ -	\$ -
710205 Repairs Maint	\$ 3,510.00	\$ -	\$ -	\$ -	\$ 3,510.00
710300 Operating Supplies	\$ 600.00	\$ -	\$ 400.00	\$ -	\$ 1,000.00
710334 Copy Machine Exp	\$ 1,650.00	\$ -	\$ -	\$ -	\$ 1,650.00
710350 Office Supplies	\$ 431.00	\$ -	\$ 569.00	\$ -	\$ 1,000.00
710355 Books/Subscr	\$ 100.00	\$ -	\$ -	\$ -	\$ 100.00
710360 Postage	\$ 200.00	\$ -	\$ -	\$ -	\$ 200.00
710361 Express Courier	\$ 20.00	\$ -	\$ 100.00	\$ -	\$ 120.00
710500 Other Expenses	\$ 532.00	\$ 1,118.52	\$ 672.58	\$ -	\$ 2,323.10
710502 Printing	\$ 100.00	\$ -	\$ 100.00	\$ -	\$ 200.00
710503 Licenses & Permits	\$ 200.00	\$ -	\$ 100.00	\$ -	\$ 300.00
710508 Telephone Land Lines	\$ 2,000.00	\$ -	\$ -	\$ -	\$ 2,000.00
710509 Seminars Mtgs	\$ 500.00	\$ -	\$ 300.00	\$ -	\$ 800.00
710512 Auto Exp	\$ 200.00	\$ -	\$ 300.00	\$ -	\$ 500.00
710519 Cellular Phone	\$ 130.00	\$ -	\$ -	\$ -	\$ 130.00
710535 Credit Card Fee	\$ 85.00	\$ -	\$ -	\$ -	\$ 85.00
710703 Biologicals	\$ 3,000.00	\$ -	\$ 3,000.00	\$ -	\$ 6,000.00
710721 Outpatient	\$ 5,754.00	\$ -	\$ 4,900.00	\$ -	\$ 10,654.00
710872 Food Purchases	\$ 50.00	\$ -	\$ 700.00	\$ -	\$ 750.00
711119 Prop & Liability	\$ 1,735.00	\$ -	\$ -	\$ -	\$ 1,735.00
711210 Travel	\$ 1,000.00	\$ 3,852.00	\$ 500.00	\$ -	\$ 5,352.00
Services and Supplies	\$ 38,663.00	\$ 4,970.52	\$ 20,783.58	\$ -	\$ 64,417.10
Expenditures	\$368,082.75	\$ 67,723.00	\$ 118,366.00	\$ -	\$ 554,171.75
General Fund Tax Transfer	\$368,082.75	\$ -	\$ -	\$(13,000.00)	\$ 355,082.75

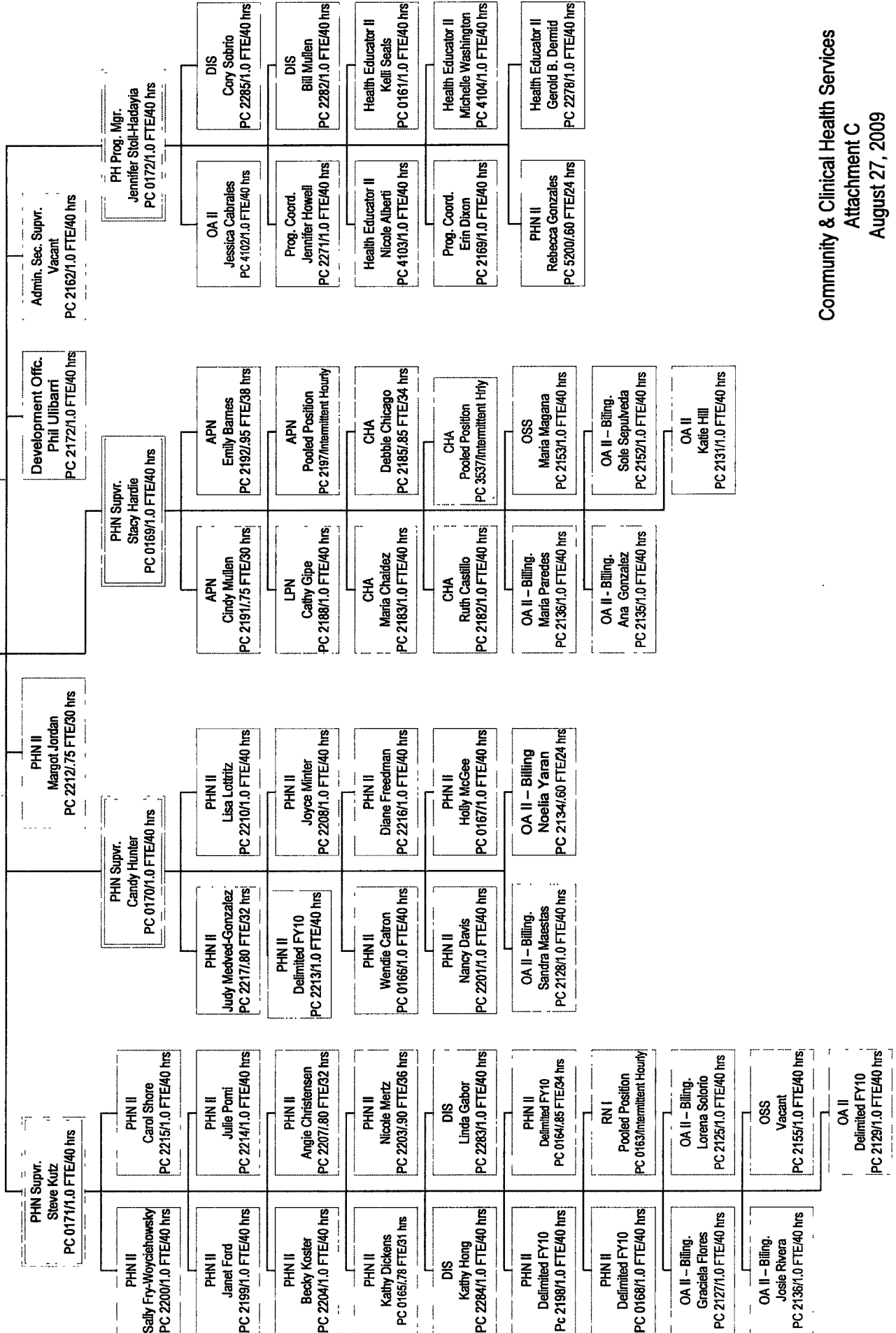


Administrative Health Services Officer
Eileen Coulombe
 PC 2279/1.0 FTE/40 hrs

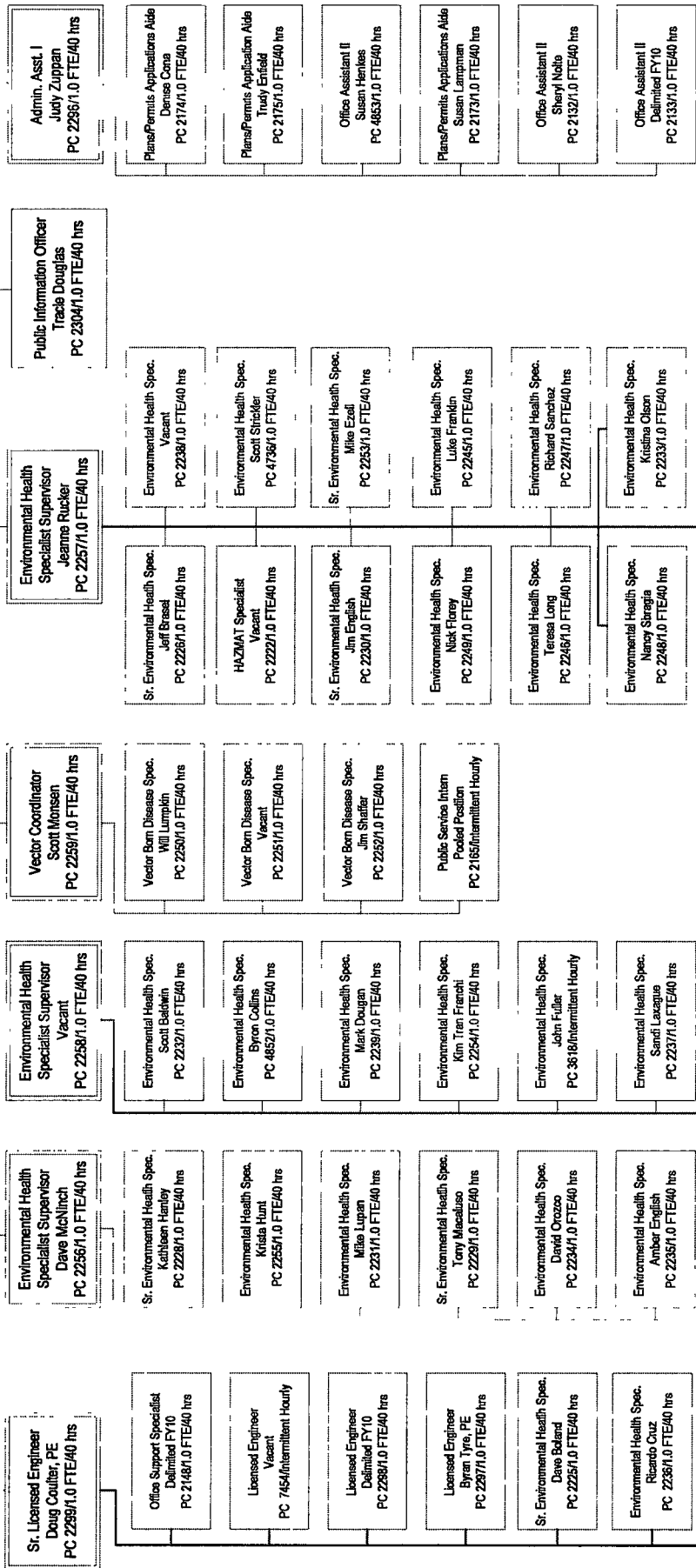


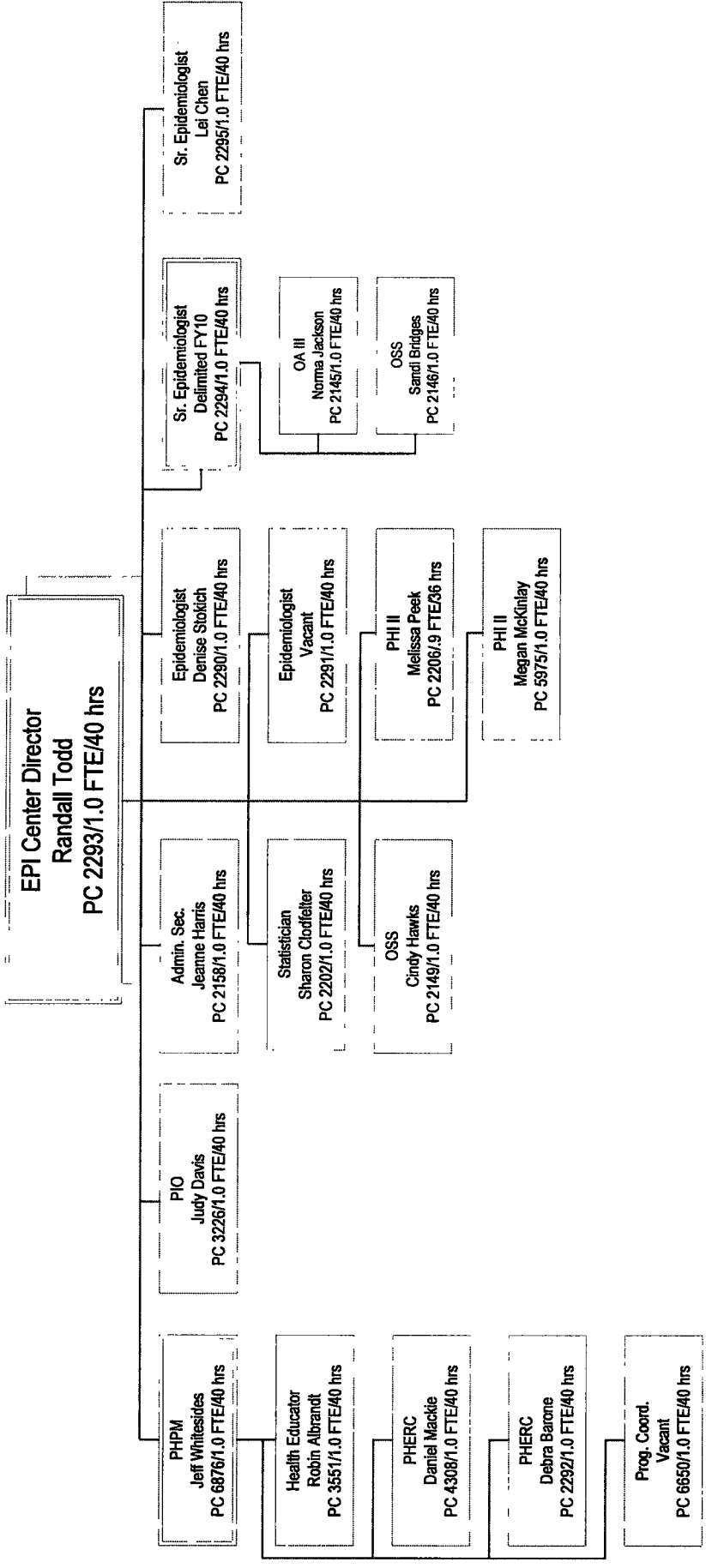


Division Director – CCHS
Mary Ann Brown
PC 2281/1.0 FTE/40 hrs



Division Director - EHS
Robert Sack
 PC 2280/1.0 FTE/40 hrs





Strategic Planning 2009

District Board of Health
Thursday, October 8, 2009
Bartley Ranch Brick House



AHS

- ❖ Stability of the Health Fund
- ❖ Data & performance measure quality

AQM

- ❖ Anticipated public policy changes
- ❖ Service evaluation & alignment




CCHS

- ❖ Efficient program operations
- ❖ Collaboration & integration of services
- ❖ Population-based health initiatives




EHS

- ❖ Environmental staffing
- ❖ Regulatory issues




EPHP

- ❖ Pandemic influenza
- ❖ Epidemiology staffing
- ❖ Policy changes in Vital Records




DHO


- ❖ Future fiscal climate
- ❖ Service levels
- ❖ Infrastructure - present & future

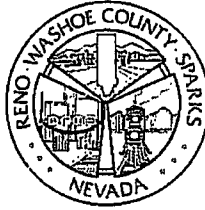


Prevent~Promote~Protect



POD SQUAD 2008





DISTRICT HEALTH DEPARTMENT

STAFF REPORT BOARD MEETING DATE: 10/8/09

DATE: October 1, 2009

TO: District Board of Health

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

Randall Todd, DrPH, Director of Epidemiology and Public Health *RT*
Preparedness, 775-328-2443, rtodd@washoecounty.us

THROUGH: M. A. Anderson, MD, MPH, FACPM, District Health Officer *MAA 10/2/09*

SUBJECT: Acceptance of Federal Funding totaling \$1,688,166 from the Centers for Disease Control and Prevention (CDC) and \$53,000 from Assistant Secretary for Preparedness and Response (ASPR) to prepare for and respond to H1N1; Approval of amendments totaling an increase of \$585,283 in both revenue and expenses to the H1N1 Phase 1&2, Focus Area 1 Grant Program, Internal Order 10780 FY10 Budget; Approval of amendments totaling an increase of \$50,000 in both revenue and expense to the H1N1 Phase 1&2, Focus Area 2 Grant Program, Internal Order 10781 FY10 Budget; Approval of amendments totaling an increase of \$1,052,883 in both revenue and expense to the H1N1 Phase 3 Grant Program, Internal Order 10782 FY10 Budget; Authorize the creation of an on call Registered Nurse Intermittent Hourly position, (PC#TBD) as evaluated by the Job Evaluation Committee (JEC).

SUMMARY

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

The Washoe County Health District has received a letter from the Nevada Department of Health and Human Services, Health Division, Public Health Preparedness Program indicating their intent to award federal funding from the Centers for Disease Control and

AGENDA ITEM # _____

District Board of Health meeting of October 8, 2009

Page 2

Prevention (CDC) and Assistant Secretary for Preparedness and Response (ASPR) to prepare for and respond to H1N1. A copy of the letter is attached.

Approval of the amendments and authorization to create an on call Registered Nurse Intermittent Hourly position is being requested from the Board of County Commissioners on October 13, 2009.

County Priority/Goal supported by this item: The approval of these amendments supports Washoe County's strategic priority to "Improve Public Safety, Security and Health", "Preserve and Enhance our Quality of Life" as well as the strategic priority to "Provide Excellent Public Services".

BACKGROUND

In the spring of 2009 a novel influenza virus (Novel Influenza H1N1) emerged in North America. Novel influenza viruses are new to the human population which, therefore, has virtually no immunity from previous episodes of disease or vaccination. Such viruses have potential to cause pandemics by spreading throughout the world and can cause excessive numbers of hospitalizations, deaths, and social disruption.

The Novel H1N1 virus has indeed spread throughout the world and has been declared a pandemic by the World Health Organization. Although the severity of this virus has been relatively mild to date, it is projected that as many as 30% of the population may become infected during the upcoming influenza season. Even with fatality rates similar to seasonal influenza strains, the higher proportion of infected individuals may produce as many as 90,000 excess deaths nationally and more than 120 excess deaths in Washoe County. Based on this "mild" scenario it is also projected that Washoe County could experience more than 600 excess hospitalizations.

The most effective way to prevent the high rate of infection with the attendant excesses in deaths and hospitalizations is to induce immunity in a significant proportion of the population through an effective vaccination program. Federal health officials have indicated that a Novel H1N1 vaccine will become available by mid October. This vaccine will most likely require two doses separated by a period of 3 to 4 weeks for individuals age 9 years and younger. A single dose will be required for those age 10 years and over. It will be essential that the Health District along with local healthcare providers move quickly to vaccinate individuals before infections become widespread in the community.

The magnitude of such an operation is unprecedented in history of the nation. It is, for example, a much larger undertaking than the mass polio vaccinations that took place in the 1950s. It will become necessary to quickly mobilize personnel and other resources if Washoe County is to succeed in protecting its citizens.

District Board of Health meeting of October 8, 2009

Included in each award is funding to support professional/contractual services. Emergency contracts (with approximated aggregate totals among all award phases) may include but are not limited to the following:

➤ Temporary Contractual Staff for vaccination clinics	\$718,400
➤ Temporary Contractual Staff for public health clinic	\$ 75,000
➤ Temporary Contractual Staff for data entry of records	\$ 56,000
➤ Temporary Office Clerical Support	\$ 30,000
➤ Temporary Public Information Support (PIO, Call Center)	\$ 83,400
➤ Vaccine Cold Storage Refrigeration	\$ 24,000
➤ Temporary Contractor to maintain H1N1 website	\$ 80,000
➤ Temporary Contractual Epidemiologist	\$ 50,000
➤ Media Buy Contract	\$150,000

FISCAL IMPACT

Should the Board approve these budget amendments, the adopted FY 10 budget will be **increased** in the following accounts:

<u>Account Number</u>	<u>Description</u>	<u>Amount of Increase/(Decrease)</u>
2002-IO-10780-431100	Federal Revenue	\$585,283
2002-IO-10780-701150	Contractual Wages	71,000
-710100	Professional Services	435,400
-710300	Operating Supplies	8,640
-710350	Office Supplies	3,600
-710360	Postage	8,400
-710500	Other Expense	28,226
-711210	Travel	4,000
-711504	Equipment – NonCapital	26,017
	Total Expenditures	\$585,283
2002-IO-10781-431100	Federal Revenue	\$50,000
2002-IO-10781-701150	Contractual Wages	50,000
	Total Expenditures	\$50,000
2002-IO-10782-431100	Federal Revenue	\$1,052,883
2002-IO-10782-701130	Pooled Positions	38,400
-701150	Contractual Wages	51,000
-701300	Overtime	250,000
-710100	Professional Services	681,800
-710350	Office Supplies	6,000
-710360	Postage	300
-710502	Printing	11,033
-710508	Telephone	2,040
-711117	Equipment Svcs- Fuel	1,200

-711210	Travel	3,000
-711504	Equipment – NonCapital	8,110
	Total Expenditures	\$1,052,883

RECOMMENDATION

Staff recommends that the Washoe County District Board of Health accept Federal Funding totaling \$1,688,166 from the Centers for Disease Control and Prevention (CDC) and \$53,000 from Assistant Secretary for Preparedness and Response (ASPR) to prepare for and respond to H1N1; Approve amendments totaling an increase of \$585,283 in both revenue and expenses to the H1N1 Phase 1&2, Focus Area 1 Grant Program, Internal Order 10780 FY10 Budget; Approve amendments totaling an increase of \$50,000 in both revenue and expense to the H1N1 Phase 1&2, Focus Area 2 Grant Program, Internal Order 10781 FY10 Budget; Approve amendments totaling an increase of \$1,052,883 in both revenue and expense to the H1N1 Phase 3 Grant Program, Internal Order 10782 FY10 Budget; Authorize the creation of an on call Registered Nurse Intermittent Hourly position, (PC#TBD) as evaluated by the Job Evaluation Committee (JEC).

POSSIBLE MOTION

Move to accept Federal Funding totaling \$1,688,166 from the Centers for Disease Control and Prevention (CDC) and \$53,000 from Assistant Secretary for Preparedness and Response (ASPR) to prepare for and respond to H1N1; Approve amendments totaling an increase of \$585,283 in both revenue and expenses to the H1N1 Phase 1&2, Focus Area 1 Grant Program, Internal Order 10780 FY10 Budget; Approve amendments totaling an increase of \$50,000 in both revenue and expense to the H1N1 Phase 1&2, Focus Area 2 Grant Program, Internal Order 10781 FY10 Budget; Approve amendments totaling an increase of \$1,052,883 in both revenue and expense to the H1N1 Phase 3 Grant Program, Internal Order 10782 FY10 Budget; Authorize the creation of an on call Registered Nurse Intermittent Hourly position, (PC#TBD) as evaluated by the Job Evaluation Committee (JEC).

STATE OF NEVADA

JIM GIBBONS
Governor

MICHAEL J. WILLDEN
Director



RICHARD WHITLEY, MS
Administrator

TRACEY GREEN, MD
State Health Officer

DEPARTMENT OF HEALTH AND HUMAN SERVICES
HEALTH DIVISION
BUREAU OF HEALTH STATISTICS, PLANNING &
EMERGENCY RESPONSE
PUBLIC HEALTH PREPAREDNESS
4150 Technology Way, Suite 200
Carson City, Nevada 89706-2009

October 1, 2009

Ms. Eileen Coulombe
Administrative Health Services Officer
Washoe County District Health Department
1001 East Ninth Street, PO Box 11130
Reno, Nevada 89520

Dear Ms. Coulombe:

The Health Division's Public Health Preparedness Program is in the process of developing Subgrants and Contracts to award funding for base activities and H1N1 activities. The program has received \$13,765,554 in new federal funding from both CDC and ASPR to prepare for and respond to H1N1. As a result, we have a tremendous amount of work to do in order to execute contractual agreements as quickly as possible, and we are doing everything we can to expedite this process.

The awards include funding to support contractual/consultant, travel, equipment, supplies and other miscellaneous expenditures to support H1N1 planning and response activities.

Please be assured that the Nevada State Health Division, Public Health Preparedness Program intends to award your agency the following funding upon receipt of the federally approved Notice of Grant Awards.

Funding Source	Agency	Funding Area	Amount
CDC H1N1 PHER Phase 1 & 2	Washoe County District Health Department	Focus Area 1	\$585,283.00
CDC H1N1 PHER Phase 1 & 2	Washoe County District Health Department	Focus Area 2	\$50,000.00
CDC H1N1 PHER Phase 3	Washoe County District Health Department	Mass Vaccination	\$1,052,883.00
ASPR H1N1	Washoe County District Health Department	Healthcare Preparedness	\$53,000.00
CDC Base	Washoe County District Health Department	PHEP Base Activities	\$790,401.00
ASPR Base	Washoe County District Health Department	ASPR Base Activities	\$417,025.00

If you have any questions or concerns, please do not hesitate to contact Connie Warmath, Grants & Project Analyst, via email at: cwarmath@health.nv.gov or telephone at (775) 884-5973.

Sincerely,

Mr. Richard Whitley
Administrator
Nevada State Health Division

DBOH AGENDA ITEM 12

OCTOBER 8 2009

WASHOE COUNTY MANAGEMENT PERFORMANCE APPRAISAL PROCESS

Instructions

Purpose: The Management Performance Appraisal process helps managers to achieve better results on their present job and prepares them for future responsibilities. It also encourages better communication between managers and customers. Beyond the fundamental purpose of clearly defining expectations and carefully evaluating performance, information gathered by the process is used for professional and personal growth and development.

Process: At least once every two years, the County Manager completes the Management Performance Appraisal Form, evaluates the manager's performance in writing and discusses it with him/her. The County Manager will have an initial discussion with the manager to be evaluated and decide on the additional raters to appraise the manager's performance. No more than five raters will be selected to provide additional feedback. The County Manager will provide the rating forms to the individuals identified for participation in the performance review. Upon receiving the feedback from the additional raters, the County Manager will schedule a meeting with the manager to discuss the performance feedback and appraisal.

During this evaluation, performance will be appraised as follows:

Results – what has been achieved during the year. What was supposed to have been achieved? Have expectations (goals and objectives) been met, been exceeded, or did the manager fail to meet them? If the manager failed to meet expectations, who or what is responsible? The County Manager will make judgments on these questions before discussing them with the manager. Through discussion, the manager will have an opportunity to review his/her performance and ask questions about how he/she might improve. The County Manager can then provide helpful suggestions for the coming year.

2. Performance factors – what the manager does that affects results. The performance factors describe day-to-day work relationships and actions that affect results. Often, performance patterns emerge when one looks back on the ways one attained results. For example, when you have problems, do you try to solve them yourself or do you utilize a team approach? Do you share information with your staff? Is your work completed on time? Are you well-organized?

The Management Performance Appraisal Form consists of fourteen job categories. Each job category contains individual elements to be rated numerically as either: 5 = "Outstanding," 4 = "Very Good," 3 = "Standard," 2 = "Fair," or 1 = "Unsatisfactory."

A discussion on performance factors typically includes examples of how the manager went about doing his/her job throughout the evaluation period. Regardless of the factor rating, development opportunities may also be identified in any area where the manager or the rater feels that improvement is achievable and would strengthen current job performance or the potential to assume increased responsibilities.

Because development is one of the performance appraisal's goals, the manager and the County Manager establish goals and objectives for 1-2 years. The manager can also discuss his/her own ideas for self-improvement. The goals and objectives usually include work assignments, projects, training or other experiences that support the Department Strategic Plan and help the manager improve in his/her job.

The manager and the County Manager will plan the results expected during the next 12-24 months. These objectives become the base against which work can be reviewed throughout the next 1-2 years.

To establish future goals and objectives, the manager and the County Manager consider the department's strategic plan, the position's responsibilities (outlined in the position description), and the manager's areas of interest and concern. The manager and the County Manager will discuss the expected results and how those results will be measured.

A copy of the Management Performance Appraisal, as completed by the County Manager, including goals and objectives established for the next evaluation period, will be maintained in the Human Resources Department and becomes part of the manager's permanent file.

**WASHOE COUNTY
GUIDELINES FOR RATING
JOB PERFORMANCE FACTORS**

Check the statement that *most accurately* describes the employee's performance since the last evaluation. Keep in mind that not all comments in each statement category need apply.

1. **Unsatisfactory.** Has not successfully performed tasks of the job. On balance, has not achieved established performance objectives. Nature of skill and/or motivation is such that improvement is unlikely. Employee clearly not qualified for this position.
2. **Fair.** Has adequately performed most responsibilities. Has not completely or consistently met performance objectives. Met most objectives, but has not completely reached agreed-upon manners of performance. Needs to improve skills. Likely that performance will improve within the next year.
3. **Standard.** Has successfully achieved performance objectives. In a few instances, may have exceeded some objectives and missed others, but, on balance, has competently performed the duties of the job. Demonstrates the motivation to improve performance.
4. **Very good.** Has exceeded overall performance objectives. Overall performance clearly better than most individuals at this level. Highly skilled in relation to the technical and managerial requirements of the job. Has skill to be consistently successful in meeting difficult challenges.
5. **Outstanding.** Has far exceeded all performance objectives. Highly skilled in relation to the technical and managerial requirements of this job. Has skill to be consistently successful in meeting difficult challenges. Has made exceptional contributions (e.g., cost control, new procedures, improvement in financial results against budget, etc.).

WASHOE COUNTY
MANAGEMENT PERFORMANCE APPRAISAL FORM

NAME _____ TITLE _____ DATE _____

RATING SCALE: 5=Outstanding, 4=Very Good, 3=Standard, 2=Fair, 1=Unsatisfactory
Please provide examples to support your ratings.

Circle appropriate rating for each category.

RESPONSIBILITY FOR RESULTS

- Demonstrates measurable results and achievements that are in alignment with County objectives. 5—4—3—2—1

Example: _____

- Recognizes and accepts responsibility for the authority and utilization of the resources entrusted to him/her (fiscal, time, property, fuel, capital, equipment, etc.) 5—4—3—2—1

Example: _____

Fosters teamwork through cooperative efforts and support for shared resources. 5—4—3—2—1
—1

Example: _____

- Invests in employees through ongoing training and development that is aligned with department goals and objectives. 5—4—3—2—1

Example: _____

CUSTOMER ORIENTATION

Provides the best possible service to all customers, from those on whose behalf we exercise regulatory powers to those who receive direct service. 5—4—3—2—1

Example: _____

Balances the needs of customers and community with the resources available to provide essential services in a quality manner.

5---4---3---2---1

Example: _____

- Proactively seeks customers' input to identify needs.

5---4---3---2---1

Example: _____

- Always seeks a better way to provide services (efficiency and effectiveness).

5---4---3---2---1

Example: _____

FOSTERS A CLIMATE OF OPENNESS:

- Supports and stimulates constructive criticism, forthright appraisal of department problems, and tolerance of disagreement in the interests of improving organizational performance.

5---4---3---2---1

Example: _____

Expresses ideas clearly, concisely and effectively both verbally and in writing.

5---4---3---2---1

Example: _____

- Practices active listening skills when communicating with others.

5---4---

3---2---1

Example: _____

- Faces disagreements, misunderstandings and performance problems forthrightly and with sensitivity.

5---4---3---2---1

Example: _____

Acknowledges others accomplishments and gives credit here credit is due.

5—4—3—2—1

Example: _____

- Keeps staff up-to-date on issues impacting the department or the organization; shares appropriate information.

5—4—3—2—1

Example: _____

LEADERSHIP SKILLS:

- Communicates department vision to others and encourages motivated and inspired performance.

5—4—3—2—1

Example: _____

- Facilitates individual and group development through ongoing coaching and performance monitoring.

5—4—3—2—1

Example: _____

- Continually improves professional knowledge through reading professional journals, attending conferences, and maintaining professional contacts.

5—4—3—2—1

Example: _____

PLANNING AND STRATEGIC THINKING

- Develops strategies for improvement and converts strategies into effective action.

5—4—3—2—1

Example: _____

- Focuses on how to use allocated resources to best advantage.

5—4—3—2—1

Example: _____

- Anticipates change and is proactive in addressing it; takes appropriate action to resolve problems.

5—4—3—2—1

Example: _____

- Analyzes problems and applies project management methodology to establish appropriate plans of action (prioritization, resource analysis, tracking, etc.)

5—4—3—2—1

Example: _____

MANAGEMENT SKILLS

- Exercises effective problem solving skills by analyzing sufficient information, developing alternative solutions to problems, and anticipating consequences of various alternatives. 5—4—3—2—1

Example: _____

- Sets priorities, coordinates or schedules tasks or events in a logical manner so as to maximize staff and material resources. 5—4—3—2—1

Example: _____

- Establishes appropriate procedures to monitor (or regulate) processes, tasks, or the activities of subordinates. 5—4—3—2—1

Example: _____

- Effectively delegates, insuring that responsibilities are defined to staff and adequate support provided. 5—4—3—2—1

Example: _____

TARGETS AND GOALS FOR UPCOMING YEAR:

PERSONAL DEVELOPMENT GOALS:

COMMENTS

OVERALL RATING: _____

Evaluator signature

Date

Employee signature

Date

DBOH 10/8/09
Item No. 7

Washoe County Health District Strategic Plan FY08

Mission and Values	Strategic Priorities	Key Outcomes	FY 2008 Supporting Goals	Performance Measure & Target	Lead Responsibility
<p>MISSION The Washoe County Health District protects and enhances the quality of life for all citizens of Washoe County through providing health promotion, disease prevention, public health emergency preparedness, and environmental services.</p> <p>VALUES We are leaders in a unified community committed to optimal human and environmental health.</p>	<p>1. Monitor health status and understand health issues facing the community.¹</p>	<p>1.1 Obtain and maintain data that provide information on the community's health (e.g., provider immunization rates; hospital discharge data; environmental health hazard, risk, and exposure data; community-specific data; indicators of health disparities such as high levels of poverty, lack of affordable housing, limited or no access to transportation, etc.).¹</p> <p>1.2 Develop relationships with local providers and others in the community who have information on reportable diseases and other conditions of public health interest and facilitate information exchange.¹</p> <p>1.3 Conduct or contribute expertise to periodic community health assessments.¹</p> <p>1.4 Integrate data with health assessment and data collection efforts conducted by others in the public health system.¹</p>	<p>Monitor influenza activity through the use of sentinel healthcare providers and syndromic surveillance systems in the community. Target - Maintain six (6) sentinel providers and three (3) syndromic surveillance systems annually.⁴</p>	<p>EPHP</p>	

¹Operational Definition of a functional local health department - NACCHO November 2005
²Washoe County, Nevada Annual Budget FY2008 - 2009, Health Fund
³Washoe County Strategic Plan FY2006-08
⁴Washoe County Strategic Plan FY2008-2010

Washoe County Health District Strategic Plan FY08

Mission and Values	Strategic Priorities	Key Outcomes	FY 2008 Supportive Goals	Performance Measures & Target	Lead Responsibility
<p>2. Protect population from health problems and health hazards.¹</p>	2.1 Investigate health problems and environmental health hazards. ¹				
	2.2 Prevent, minimize, and contain adverse health events and conditions resulting from communicable diseases; food-, water-, and vector-borne outbreaks; chronic diseases; environmental hazards; injuries; and health disparities. ¹			Decrease the percentage of Washoe County residents who smoke. Target - Reduce by 1% (from current level of 18% to 17%) by June 2010. ⁴	CCHS
	2.3 Coordinate with other governmental agencies that investigate and respond to health problems, health disparities, or environmental health hazards. ¹			Reduce mosquito breeding habitats by collaborating with public and private entities to eliminate standing water in problem locations. Target - Redmediate two (2) locations annually. ⁴	EHS
	2.4 Lead public health emergency planning, exercises, and response activities in the community in accordance with the National Incident Management System, and coordinate with other local, state, and federal agencies. ¹			Conduct exercises in cooperation with community partners designed to demonstrate public health preparedness to respond to both natural and human-caused disasters. Target - one (1) annual exercise by June 2009 and another by June 2010. ⁴	EPHP
	2.5 Fully participate in planning, exercises, and response activities for other emergencies in the community that have public health implications, within the context of state and regional plans and in a manner consistent with the community's best public health interest. ¹				
	2.1.6 Maintain access to laboratory and biosite expertise and capacity to help monitor community health status and diagnose and investigate public health problems and hazards. ¹				
	2.1.7 Maintain policies and technology required for urgent communications and electronic data exchange. ¹				

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Washoe County Health District Strategic Plan FY08

Mission/Goal	Strategic Priorities	Key Outcomes	FY 2008 Supporting Goals	Performance Measures & Targets	Fiscal Responsibility
	<p>3. Give people information they need to make healthy choices.¹</p>	<p>3.1 Develop relationships with the media to convey information of public health significance, correct misinformation about public health issues, and serve as an essential resource.¹</p>		<p>Develop and implement a public awareness campaign on child abuse (reporting and prevention). Target - Reach 70% of population by June 2009 and 75% of population by June 2010.⁴</p>	CCHS
		<p>3.2 Exchange information and data with individuals, community groups, other agencies, and the general public about physical, behavioral, environmental, social, economic, and other issues affecting the public's health.¹</p>		<p>Conduct social marketing and/or media campaigns which focus on chronic disease and their risk factors by increasing awareness and offering prevention strategies. Target - Four (4) campaigns completed by June 2009 and eight (8) campaigns completed by June 2010.⁴</p>	CCHS
		<p>3.3 Provide targeted, culturally-appropriate information to help individuals understand what decisions they can make to be healthy.¹</p>			
		<p>3.4 Provide health promotion programs to address identified health problems.¹</p>			

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Washoe County Health District Strategic Plan FY08

Mission and Values	Strategic Priorities	Key Outcomes	FY 2008 Supporting Goals	Performance Measure & Target	Lead Responsibility
<p style="text-align: center;">4. Enforce public health laws and regulations¹</p>	<p>4.1 Review existing laws and regulations and work with governing bodies and policy-makers to update them as needed.¹</p>				
	<p>4.2 Understand existing laws, ordinances, and regulations that protect the public's health.¹</p>				
	<p>4.3 Educate individuals and organizations on the meaning, purpose, and benefit of public health laws, regulations, and ordinances and how to comply.¹</p>		<p>Increase the percentage of permitted food facilities that are in compliance with the Nevada Clean Indoor Air Act. Target - 98% by June 2009 and 99% by June 2010.⁴</p>	<p>EHS</p>	
	<p>4.4 Monitor, and analyze over time, the compliance of regulated organizations, entities, and individuals.¹</p>				
	<p>4.5 Conduct enforcement activities.¹</p>	<p>Maintain Air Quality Index (AQI) in the "Good" range (AQI < 51). Target AQI < 51 in 75% of measured days by June 2009 and AQI < 51 in 77% of measured days by June 2010.⁴</p>	<p>AQM</p>		

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Washoe County Health District Strategic Plan FY08

Mission and Values	Strategic Priorities	Key Outcomes	FY 2008 Supporting Goals	Performance Measures & Targets	Lead Responsibility
	5. Develop our workforce ³	5.1. Recruit, train, develop, and retain a diverse staff. ¹			
		5.2. Evaluate LHD staff members' public health competencies, and address deficiencies through continuing education, training, and leadership development activities. ¹			
		5.3. Provide practice- and competency-based educational experiences for the future public health workforce, and provide expertise in developing and teaching public health curricula, through partnerships with academia. ¹			
		5.4. Promote the use of effective public health practices among other practitioners and agencies engaged in public health interventions. ¹			

¹Operational Definition of a functional local health department - NACCHO November 2005

²Washoe County, Nevada's Annual Budget FY2008 - 2009, Health Fund

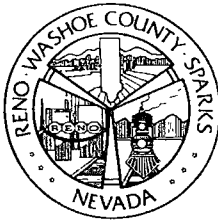
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Washoe County Health District Strategic Plan FY08

Mission and Values	Strategic Priorities	Key Outcomes	FY 2008 Supportable Goals	Performance Measure & Target	Lead Responsibility
	6. Promote Financial Accountability ³ and Stability	6.1 Continuously improve cost effectiveness of the Washoe County Health District. ³		Prepare a Business Impact Analysis (BIA) for the Health District. Target - 100% complete by June 2009. ⁴	AH5
			under counties		
			1.1.5.		

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³Washoe County Strategic Plan FY2006-08
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DISTRICT HEALTH DEPARTMENT

STAFF REPORT BOARD MEETING DATE: 10/8/09

DATE: October 1, 2009

TO: District Board of Health

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

Randall Todd, DrPH, Director of Epidemiology and Public Health Preparedness, 775-328-2443, rtodd@washoecounty.us *RT*

THROUGH: M. A. Anderson, MD, MPH, FACPM, District Health Officer *MAA 10/12/09*

SUBJECT: Acceptance of Federal Funding totaling \$1,688,166 from the Centers for Disease Control and Prevention (CDC) and \$53,000 from Assistant Secretary for Preparedness and Response (ASPR) to prepare for and respond to H1N1; Approval of amendments totaling an increase of \$585,283 in both revenue and expenses to the H1N1 Phase 1&2, Focus Area 1 Grant Program, Internal Order 10780 FY10 Budget; Approval of amendments totaling an increase of \$50,000 in both revenue and expense to the H1N1 Phase 1&2, Focus Area 2 Grant Program, Internal Order 10781 FY10 Budget; Approval of amendments totaling an increase of \$1,052,883 in both revenue and expense to the H1N1 Phase 3 Grant Program, Internal Order 10782 FY10 Budget; Authorize the creation of an on call Registered Nurse Intermittent Hourly position, (PC#TBD) as evaluated by the Job Evaluation Committee (JEC).

SUMMARY

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

The Washoe County Health District has received a letter from the Nevada Department of Health and Human Services, Health Division, Public Health Preparedness Program indicating their intent to award federal funding from the Centers for Disease Control and

AGENDA ITEM # _____

Prevention (CDC) and Assistant Secretary for Preparedness and Response (ASPR) to prepare for and respond to H1N1. A copy of the letter is attached.

Approval of the amendments and authorization to create an on call Registered Nurse Intermittent Hourly position is being requested from the Board of County Commissioners on October 13, 2009.

County Priority/Goal supported by this item: The approval of these amendments supports Washoe County's strategic priority to "Improve Public Safety, Security and Health", "Preserve and Enhance our Quality of Life" as well as the strategic priority to "Provide Excellent Public Services".

BACKGROUND

In the spring of 2009 a novel influenza virus (Novel Influenza H1N1) emerged in North America. Novel influenza viruses are new to the human population which, therefore, has virtually no immunity from previous episodes of disease or vaccination. Such viruses have potential to cause pandemics by spreading throughout the world and can cause excessive numbers of hospitalizations, deaths, and social disruption.

The Novel H1N1 virus has indeed spread throughout the world and has been declared a pandemic by the World Health Organization. Although the severity of this virus has been relatively mild to date, it is projected that as many as 30% of the population may become infected during the upcoming influenza season. Even with fatality rates similar to seasonal influenza strains, the higher proportion of infected individuals may produce as many as 90,000 excess deaths nationally and more than 120 excess deaths in Washoe County. Based on this "mild" scenario it is also projected that Washoe County could experience more than 600 excess hospitalizations.

The most effective way to prevent the high rate of infection with the attendant excesses in deaths and hospitalizations is to induce immunity in a significant proportion of the population through an effective vaccination program. Federal health officials have indicated that a Novel H1N1 vaccine will become available by mid October. This vaccine will most likely require two doses separated by a period of 3 to 4 weeks for individuals age 9 years and younger. A single dose will be required for those age 10 years and over. It will be essential that the Health District along with local healthcare providers move quickly to vaccinate individuals before infections become widespread in the community.

The magnitude of such an operation is unprecedented in history of the nation. It is, for example, a much larger undertaking than the mass polio vaccinations that took place in the 1950s. It will become necessary to quickly mobilize personnel and other resources if Washoe County is to succeed in protecting its citizens.

Included in each award is funding to support professional/contractual services. Emergency contracts (with approximated aggregate totals among all award phases) may include but are not limited to the following:

➤ Temporary Contractual Staff for vaccination clinics	\$718,400
➤ Temporary Contractual Staff for public health clinic	\$ 75,000
➤ Temporary Contractual Staff for data entry of records	\$ 56,000
➤ Temporary Office Clerical Support	\$ 30,000
➤ Temporary Public Information Support (PIO, Call Center)	\$ 83,400
➤ Vaccine Cold Storage Refrigeration	\$ 24,000
➤ Temporary Contractor to maintain H1N1 website	\$ 80,000
➤ Temporary Contractual Epidemiologist	\$ 50,000
➤ Media Buy Contract	\$150,000

FISCAL IMPACT

Should the Board approve these budget amendments, the adopted FY 10 budget will be **increased** in the following accounts:

<u>Account Number</u>	<u>Description</u>	<u>Amount of Increase/(Decrease)</u>
2002-IO-10780-431100	Federal Revenue	\$585,283
2002-IO-10780-701150	Contractual Wages	71,000
-710100	Professional Services	435,400
-710300	Operating Supplies	8,640
-710350	Office Supplies	3,600
-710360	Postage	8,400
-710500	Other Expense	28,226
-711210	Travel	4,000
-711504	Equipment – NonCapital	26,017
	Total Expenditures	\$585,283
2002-IO-10781-431100	Federal Revenue	\$50,000
2002-IO-10781-701150	Contractual Wages	50,000
	Total Expenditures	\$50,000
2002-IO-10782-431100	Federal Revenue	\$1,052,883
2002-IO-10782-701130	Pooled Positions	38,400
-701150	Contractual Wages	51,000
-701300	Overtime	250,000
-710100	Professional Services	681,800
-710350	Office Supplies	6,000
-710360	Postage	300
-710502	Printing	11,033
-710508	Telephone	2,040
-711117	Equipment Svcs- Fuel	1,200

-711210	Travel	3,000
-711504	Equipment – NonCapital	8,110
	Total Expenditures	\$1,052,883

RECOMMENDATION

Staff recommends that the Washoe County District Board of Health accept Federal Funding totaling \$1,688,166 from the Centers for Disease Control and Prevention (CDC) and \$53,000 from Assistant Secretary for Preparedness and Response (ASPR) to prepare for and respond to H1N1; Approve amendments totaling an increase of \$585,283 in both revenue and expenses to the H1N1 Phase 1&2, Focus Area 1 Grant Program, Internal Order 10780 FY10 Budget; Approve amendments totaling an increase of \$50,000 in both revenue and expense to the H1N1 Phase 1&2, Focus Area 2 Grant Program, Internal Order 10781 FY10 Budget; Approve amendments totaling an increase of \$1,052,883 in both revenue and expense to the H1N1 Phase 3 Grant Program, Internal Order 10782 FY10 Budget; Authorize the creation of an on call Registered Nurse Intermittent Hourly position, (PC#TBD) as evaluated by the Job Evaluation Committee (JEC).

POSSIBLE MOTION

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JIM GIBBONS
Governor

STATE OF NEVADA

RICHARD WHITLEY, MS
Administrator

MICHAEL J. WILLDEN
Director



TRACEY GREEN, MD
State Health Officer

DEPARTMENT OF HEALTH AND HUMAN SERVICES
HEALTH DIVISION
BUREAU OF HEALTH STATISTICS, PLANNING &
EMERGENCY RESPONSE
PUBLIC HEALTH PREPAREDNESS
4150 Technology Way, Suite 200
Carson City, Nevada 89706-2009

October 1, 2009

Ms. Eileen Coulombe
Administrative Health Services Officer
Washoe County District Health Department
1001 East Ninth Street, PO Box 11130
Reno, Nevada 89520

Dear Ms. Coulombe:

The Health Division's Public Health Preparedness Program is in the process of developing Subgrants and Contracts to award funding for base activities and H1N1 activities. The program has received \$13,765,554 in new federal funding from both CDC and ASPR to prepare for and respond to H1N1. As a result, we have a tremendous amount of work to do in order to execute contractual agreements as quickly as possible, and we are doing everything we can to expedite this process.

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Please be assured that the Nevada State Health Division, Public Health Preparedness Program intends to award your agency the following funding upon receipt of the federally approved Notice of Grant Awards.

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CDC H1N1 PHER Phase 1 & 2	Washoe County District Health Department	Focus Area 1	\$585,283.00
CDC H1N1 PHER Phase 1 & 2	Washoe County District Health Department	Focus Area 2	\$50,000.00
CDC H1N1 PHER Phase 3	Washoe County District Health Department	Mass Vaccination	\$1,052,883.00
ASPR H1N1	Washoe County District Health Department	Healthcare Preparedness	\$53,000.00
CDC Base	Washoe County District Health Department	PHEP Base Activities	\$790,401.00
ASPR Base	Washoe County District Health Department	ASPR Base Activities	\$417,025.00

If you have any questions or concerns, please do not hesitate to contact Connie Warmath, Grants & Project Analyst, via email at: cwarmath@health.nv.gov or telephone at (775) 684-5973.

Sincerely,

A handwritten signature in black ink, appearing to read "R. Whitley".

Mr. Richard Whitley
Administrator
Nevada State Health Division

HEALTH DIVISION

(hereinafter referred to as the DIVISION)

Program #: H1N107-09

Budget Account #: 3218

Category #: 45

GL #: 8516

NOTICE OF SUBGRANT AWARD

Program Name: Public Health Preparedness Health Planning & Emergency Response Nevada State Health Division	Subgrantee Name: Washoe County Health District (WCHD)
Address: 4150 Technology Way, Suite #200 Carson City, NV 89706-2009	Address: 1001 East Ninth Street Reno, NV 89520
Subgrant Period: July 31, 2009 through July 30, 2010	Subgrantees: EIN#: 88-6000138 Vendor#: T40283400Q Dun & Bradstreet #: 073786998

Reason for Award: 2009 CDC H1N1 Public Health Emergency Response (PHER) Phase 1 and Phase 2

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

Approved Budget Categories:	Focus Area 1	Focus Area 2	Total H1N1 Phase 1 & 2
1. Personnel	\$ 0	\$ 0	\$ 0
2. Contractual/Consultant	\$ 500,400	\$ 50,000	\$ 550,400
3. Travel	\$ 4,000	\$ 0	\$ 4,000
4. Supplies	\$ 12,240	\$ 0	\$ 12,240
5. Equipment	\$ 26,017	\$ 0	\$ 26,017
6. Other	\$ 42,626	\$ 0	\$ 42,626
7. Indirect	\$ 0	\$ 0	\$ 0
Total Cost	\$ 585,283	\$ 50,000	\$ 635,283

Disbursement of funds will be as follows:

Payment will be made upon receipt and acceptance of an invoice and supporting documentation specifically requesting reimbursement for actual expenditures *specific to this subgrant*. Total reimbursement will not exceed **\$635,283** during the subgrant period.

Source of Funds:	% of Funds:	CFDA#:	Federal Grant #:
1. CDC PHER Phase 1 & 2	100%	93.069	1H75TP000337-01

Terms and Conditions

In accepting these grant funds, it is understood that:

- Expenditures must comply with appropriate state and/or federal regulations.
- This award is subject to the availability of appropriate funds.
- Recipient of these funds agrees to stipulations listed in Sections A, B, and C of this subgrant award.

Authorized Sub-grantee Official Title	Signature	Date
Daniel P. Mackie, MPH Health Program Manager, PHP	<i>[Signature]</i>	11/16/09
Deanne Devine, MSW Health Program Manager II, PHP	<i>[Signature]</i>	2/20/09
Richard Whitley, MS Administrator, Health Division	<i>[Signature]</i>	10/20/09

HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION A
Assurances

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

1. Subgrantee agrees grant funds may not be used for other than the awarded purpose. In the event Subgrantee expenditures do not comply with this condition, that portion not in compliance must be refunded to the Health Division.
 2. Subgrantee agrees to submit reimbursement requests for only expenditures approved in the spending plan. Any additional expenditures beyond what is allowable based on approved categorical budget amounts, without prior written approval by the Health Division, may result in denial of reimbursement.
 3. Approval of subgrant budget by the Health Division constitutes prior approval for the expenditure of funds for specified purposes included in this budget. Unless otherwise stated in the Scope of Work the transfer of funds between budgeted categories without written prior approval from the Health Division is not allowed under the terms of this subgrant. Requests to revise approved budgeted amounts must be made in writing and provide sufficient narrative detail to determine justification.
 4. Recipients of subgrants are required to maintain subgrant accounting records, identifiable by subgrant number. Such records shall be maintained in accordance with the following:
 - a. Records may be destroyed not less than three years (unless otherwise stipulated) after the final report has been submitted if written approval has been requested and received from the Administrative Services Officer of the Health Division. Records may be destroyed by the Subgrantee five (5) calendar years after the final financial and narrative reports have been submitted to the Health Division.
 - b. In all cases an overriding requirement exists to retain records until resolution of any audit questions relating to individual subgrants.
- Subgrant accounting records are considered to be all records relating to the expenditure and reimbursement of funds awarded under this Subgrant Award. Records required for retention include all accounting records and related original and supporting documents that substantiate costs charged to the subgrant activity.
5. Subgrantee agrees to disclose any existing or potential conflicts of interest relative to the performance of services resulting from this subgrant award. The Health Division reserves the right to disqualify any grantee on the grounds of actual or apparent conflict of interest. Any attempt to intentionally or unintentionally conceal or obfuscate a conflict of interest will automatically result in the disqualification of funding.
 6. Subgrantee agrees to comply with the requirements of the Civil Rights Act of 1964, as amended, and the Rehabilitation Act of 1973, P.L. 93-112, as amended, and any relevant program-specific regulations, and shall not discriminate against any employee or offeror for employment because of race, national origin, creed, color, sex, religion, age, disability or handicap condition (including AIDS and AIDS-related conditions).
 7. Subgrantee agrees to comply with the Americans with Disabilities Act of 1990 (P.L. 101-136), 42 U.S.C. 12101, as amended, and regulations adopted thereunder contained in 28 CFR 26.101-36.999 inclusive, and any relevant program-specific regulations.
 8. Subgrantee agrees to comply with the requirements of the Health Insurance Portability and Accountability Act of 1996, 45 C.F.R. 160, 162 and 164, as amended. If the subgrant award includes functions or

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

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

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

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

Description of services, scope of work, deliverables and reimbursement

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

- See Attachment #1: Section B- Scope of Work
- Submit Monthly Progress Reports to the Health Division electronically by the 5th day of each month beginning November 5, 2009 for activities conducted during the preceding month. (NSHD will compile the reports and submit to CDC via PERFORMS by the 10th day of each month). CDC will develop the reporting template to include questions such as:
 - The number of doses administered
 - The breakdown of the doses administered by private sector versus public sector (including those working on behalf of public health agencies)
 - The number of provider sites enrolled as ship-to sites
 - Other relevant mass vaccination data
 - Promising practices/lessons learned
- Submit After Action Reports (AARs), Improvement Plans (IPs) and Corrective Action Programs (CAPs) to the Health Division electronically by March 15, 2010 for the time period of October 1, 2009 to December 31, 2009. (NSHD will submit the reports to CDC via the DSLR Channel on LLIS.gov by March 31, 2010).
- Additional information may be requested by the Health Division, as needed, due to evolving state and federal reporting requirements.
- Identify the source of funding on all printed documents purchased or produced within the scope of this subgrant, using a statement similar to: "This publication (journal, article, etc.) was supported by the Nevada State Health Division through Grant Number 1H75TP000337-01 from Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Nevada State Health Division nor Centers for Disease Control and Prevention (CDC)."
- Any activities performed under this subgrant shall acknowledge the funding was provided through the State Health Division by Grant Number 1H75TP000337-01 from the Centers for Disease Control and Prevention.

(Continued on next page)

Subgrantee agrees to adhere to the following budget:

Focus Area 1- Mass Vaccination, Communication & Community Mitigation:

1. Personnel	\$	0	
2. Contractual/ Consultant	\$	500,400	
			\$200,000 Temporary Contractual Staff for vaccination clinics
			\$35,000 Temporary Contractual Staff for data entry of vaccination records into WebIZ
			\$75,000 Temporary Contractual Staff for public health clinic (professional and support staff)
			\$10,000 Northern Nevada Immunization Coalition
			\$50,000 Media Buy- flu prevention print, publication and direct mail
			\$80,000 Temporary Contractor to maintain WCHD H1N1 Website
			\$36,000 Temporary Contractual staff to assist WCHD PIO
			\$14,400 Media tracking service
3. Travel	\$	4,000	Includes: In-State Travel in compliance with federal GSA rates
4. Equipment	\$	26,017	
			\$6,017 Trailer for storage of POD equipment
			\$20,000 Vaccine cold storage refrigeration for providers and health clinics
5. Supplies	\$	12,240	
			\$3,640 Minor equipment and mass vaccination supplies for PODs and Health Clinics (non-medical)
			\$5,000 Minor equipment and mass vaccination supplies for PODs and Health Clinics (medical)
			\$3,600 Printing/copying for H1N1 vaccination
6. Other	\$	42,626	
			\$6,000 Vaccination training for EMT Intermediates
			\$3,600 Postage
			\$3,600 Printing
			\$4,800 Direct mail for providing educational materials to the community
			\$10,000 H1N1 educational materials
			\$14,626 H1N1 public education/outreach
Total Focus Area 1 Cost	\$	585,283	

Focus Area 2- Epidemiology and Surveillance:

1. Contractual/ Consultant	\$	50,000	
			\$50,000 Temporary Contractual Epidemiologist
Total Focus Area 2 Cost	\$	50,000	
Total Phase 1 & 2 Cost	\$	635,283	

- Health Division policy is to allow no more than 10% flexibility (no more than a cumulative amount of \$63,528), within approved Scope of Work, unless otherwise authorized. Upon reaching the 10% funding adjustment threshold, additional adjustments between categories cannot be made without prior written approval from the Health Division. Changes to the Scope of Work cannot be made without prior approval from the Health Division and the federal funding agency.
- Funds cannot be redirected between Focus Areas.
- Equipment purchased with these funds belongs to the federal program from which this funding was appropriated and shall be returned to the program upon termination of this agreement.
- Travel expenses, per diem, and other related expenses must conform to the procedures and rates allowed for State officers and employees. It is the Policy of the Board of Examiners to restrict contractors/subgrantees to the same rates and procedures allowed State Employees. The State of Nevada reimburses at rates comparable to the rates established by the US General Services Administration, with some exceptions (State Administrative Manual 0200.0 and 0320.0).

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

- Requests for Reimbursement will be accompanied by supporting documentation, including a line item description of expenses incurred, summarizing the total amount and type of expenditures made during the reporting period.
- Requests for Reimbursements will be submitted monthly.
- Submit monthly Requests for Reimbursement no later than 15 days following the end of the month; submit a Request for Reimbursement for activities completed through the month of June no later than July 15, 2010.
- Submit a separate Reimbursement Request for each Focus Area.
- Additional expenditure detail will be provided upon request from the Division.
- The maximum amount of funding available through this subgrant is \$635,283.

Additionally, the subgrantee agrees to provide:

- Provide a copy of all plans developed and all After Action Reports (AAR) for exercises within 45 days of completion.

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

The Nevada State Health Division agrees:

- Review and approve activities through programmatic and fiscal reports and conduct site visits at the Subgrantee's physical site as necessary.
- Provide reimbursements, not to exceed a total of \$635,283 for the entire subgrant period.
- Provide technical assistance, upon request from the Subgrantee.
- Reserve the right to hold reimbursement under this subgrant until any delinquent forms and reports are submitted and accepted by the Health Division.

Both parties agree:

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

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

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

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

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

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

An explanation of the form is provided below.

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

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

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

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

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

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

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

Nevada Department of Health and Human Services

H1N1 PHER Phase 1 & 2
 Cat 45; Job # 93069S09
 Sub Acct # PHER09

HEALTH DIVISION

Health Division # 10077
 Bureau Program # H1N107-09
 GL # 8516
 Draw #: _____

REQUEST FOR REIMBURSEMENT / ADVANCE

Program Name: Public Health Preparedness Health Planning & Emergency Response	Subgrantee Name: Washoe County Health District (WCHD)
Address: 4150 Technology Way, Suite 200 Carson City, NV 89706	Address: 1001 East Ninth Street Reno, Nevada 89520
Subgrant Period: July 31, 2009 through July 30, 2010	Subgrantee EIN#: 88-6000138 Subgrantee Vendor#: T40283400Q DUNS#: 073786998

FINANCIAL REPORT AND REQUEST FOR FUNDS

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

Month(s): _____

Calendar Year: _____

Focus Area 1

Approved Budget Category	A Approved Budget	B Total Prior Requests	C Current Request	D Year To Date Total	E Budget Balance	F Percent Expended
1 Personnel	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	#DIV/0!
2 Contract/Consultant	\$ 500,400.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 500,400.00	0%
3 Travel	\$ 4,000.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 4,000.00	0%
4 Supplies	\$ 12,240.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 12,240.00	0%
5 Equipment	\$ 26,017.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 26,017.00	0%
6 Other	\$ 42,626.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 42,626.00	0%
7 Indirect	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	0%
8 Total	\$ 585,283.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 585,283.00	0%

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

Authorized Signature _____ Title _____ Date _____

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

FOR HEALTH DIVISION USE ONLY

Program contact necessary? Yes No Contact Person: _____

Reason for contact: _____

_____ fiscal review/approval date: _____ Signed: _____

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

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

Nevada Department of Health and Human Services

H1N1 PHER Phase 1 & 2
 Cat 45; Job # 93069S09
 Sub Acct # PHER09

HEALTH DIVISION

Health Division # 10077
 Bureau Program # H1N107-09
 GL # 8516
 Draw #: _____

REQUEST FOR REIMBURSEMENT / ADVANCE

Program Name: Public Health Preparedness Health Planning & Emergency Response	Subgrantee Name: Washoe County Health District (WCHD)
Address: 4150 Technology Way, Suite 200 Carson City, NV 89706	Address: 1001 East Ninth Street Reno, Nevada 89520
Subgrant Period: July 31, 2009 through July 30, 2010	Subgrantee EIN#: 88-6000138 Subgrantee Vendor#: T40283400Q DUNS#: 073786998

FINANCIAL REPORT AND REQUEST FOR FUNDS

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

Month(s): _____ Calendar Year: _____

Focus Area 2

Approved Budget Category	A Approved Budget	B Total Prior Requests	C Current Request	D Year To Date Total	E Budget Balance	F Percent Expended
1 Personnel	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	#DIV/0!
2 Contract/Consultant	\$ 50,000.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 50,000.00	0%
3 Travel	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	#DIV/0!
4 Supplies	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	#DIV/0!
5 Equipment	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	0%
6 Other	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	0%
7 Indirect	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	0%
8 Total	\$ 50,000.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 50,000.00	0%

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

Authorized Signature _____ Title _____ Date _____

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

FOR HEALTH DIVISION USE ONLY

Program contact necessary? Yes No Contact Person: _____

Reason for contact: _____

_____ fiscal review/approval date: _____ Signed: _____

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

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

Washoe County Health District
2009 CDC H1N1 Public Health Emergency Response (PHER) Phase 1 and Phase 2
 Grant #1H75TP000337-01; Subgrant # CDCH1N107-09

Attachment #1
Section B- Scope of Work

Vaccination

Gap:	Objectives	Activities	Date due by	Process Measure
<p>The ACIP has identified several target populations that should be prioritized for receipt of H1N1 vaccine when it becomes available. These target groups can be divided into two main categories:</p> <ul style="list-style-type: none"> • Target group members can be identified by age and/or occupation. • Target group members must be identified by risk. <p>Clearly, mass dispensing of vaccine through PODs can be accomplished for age/occupation-based target groups. Risk-based target groups would be much more difficult to serve in a POD.</p> <p>Therefore in a High Severity H1N1 event Washoe County Health District would expect to provide vaccination for 50% of Washoe County's population of</p>	<p>Based off the '06/'07/'08 POD exercise we estimate that two 2-lane walk-through PODs should process ~ 1,600 (PPH) persons per hour. With 50% of our 6 months through 24 years population being 76,250 and our rate of PPH, it would take roughly 50 total hours to process this number of people through PODs. Two 2-lane PODs would require the efforts of 93 non-medical personnel and 41 medical personnel at a total cost of \$218,240 in staffing alone.</p>	<p>March 2010 or July 30, 2010 dependent on vaccine availability.</p>	<p>Vaccinate 50% of Washoe County population ages 6 months through 24 years old with H1N1 vaccine.</p>	

<p>152, 466 (based off of the 2008 population estimate) for people aged 6 months through 24 years. Risk based target groups will be encouraged through public information and education to seek vaccination through their healthcare provider. Washoe County Health District believes that Healthcare providers will be able to address 75% of the demand, and public clinics will need to address up to 25% of the risk-based demand.</p>	<p>Encourage members of risk-based target groups to access vaccine through their provider. Augment existing public clinic staffing levels to enable provision of vaccine to members of risk based target groups who may be unable to access private healthcare providers.</p>	<p>March 2010 or July 30, 2010 dependent on vaccine availability.</p>	<p>Through media communications, Washoe County Health District will encourage members of risk-based target groups to access vaccine through their provider. Washoe County Health District will augment existing staffing levels to enable provision of vaccine to members of risk based target groups who may be unable to access private healthcare providers.</p>
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Community Mitigation

Gap:	Activities	Date due by	Process Measure
<p>Washoe County Health District does not perceive that the community mitigation strategies would require significant resources to implement. These include things like school closures, public event cancellations, suspension of public transportation, restriction of movement, isolation and quarantine, and other social distancing. The Health District</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>

<p>does not suggest that any of these would be easy to do, but they would essentially require us to identify the appropriate decision makers and to approach them with our recommendations and rationale. It would be very difficult to put a cost to such actions on our part and we do not believe there are sufficient funds to reimburse for the community and economic costs associated with these strategies.</p>			
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Communication

Gap:	Objectives	Activities	Date due by	Process Measure
<p>Educational efforts will be needed to assure that the public and healthcare providers have ready access to information regarding vaccination and other community mitigation or prevention measures. Funds will be requested to conduct media buys, direct mail, and to develop a web-site with bidirectional capability. A website that is hosted off site will help to assure that we have an easy-to-remember and market url as well as the ability to change web content on-the-fly without IT</p>	<p>Media buy to communicate and reinforce flu prevention messages to the public. Expenses likely will include creative development and production of collateral and/or costs associated with purchase of broadcast time, publication space and postage for direct mail.</p>	<p>July 30, 2010</p>	<p>Media purchased and distribution to the public completed for communication and reinforcement of flu prevention.</p>	

<p>intervention. The bidirectional capability will assure that target groups will be able to pre-register for PODs.</p> <p>Although the focus of the communication activities may change with severity, the dollar requirements will likely be the same. Therefore, the proposed funding for communications will be similar across all three planning scenarios.</p>			
	<p>Contractor will create an H1N1 website for Washoe County with bidirectional capability. Contractor will provide website maintenance, updating of content, domain name and hosting fees (one year). A website that is hosted off site will help to assure that we have an easy-to-remember and market url as well as the ability to change web content on-the-fly without IT intervention. The bidirectional capability will assure that target groups will be able to pre-register for PODs.</p> <p>Contractor/temporary worker will assist the PIO in performing tasks such as, assisting in media interviews, preparing documents, answering phone and email inquiries.</p>	<p>November 1, 2009 start with on-going updating throughout the remainder of the grant period.</p> <p>On-going</p>	<p>Creation of an H1N1 website with bidirectional capability that will allow target group registration for PODs.</p> <p>PIO assistance to complete H1N1 communication goals.</p>
<p>Gap:</p>			
<p>Objective</p> <p>Washoe County Health District will need assistance handling large call volume from the public with concerns about H1N1.</p>	<p>Activities</p> <p>Suggest NSHD procure public info hotline such as Rocky Mountain Poison Control Center.</p>	<p>Date due by</p> <p>Start of H1N1 flu season.</p>	<p>Process Measure</p> <p>NSHD to secure public info hotline.</p>

Focus Area 2:

Surveillance/Epidemiology

Gap:	Activities	Date due by	Process Measure
<p>Objective</p> <p>Funds in this category can only come from the Phase I portion of the funding. Additional epidemiology staffing will be necessary in order to engage in H1N1 activity surge related to:</p> <ul style="list-style-type: none"> • Sentinel site recruitment and retention • Sample collection, pick up and delivery for sentinel sites • Evaluation and analysis of data • Preparation of reports <p>With increasing severity the need for additional staff will increase. Our proposal across the three scenarios will reflect this.</p> <p>In addition to staffing there are additional epidemiological needs. These would include:</p> <ul style="list-style-type: none"> • Access to the electronic death registry • Implementation of electronic laboratory reporting • Deferral of calls to an 	<p>Activities</p> <p>1.5 FTE Epidemiologists will provide assistance to WCHD epidemiological staff in areas such as: 1) sentinel site recruitment and retention, 2) sample collection, pick up and delivery for sentinel sites, 3) evaluation and analysis of data, and 5) preparation of reports.</p>		<p>Process Measure</p> <p>Additional epidemiologists staffing will provide increased sentinel site recruitment and retention, sample collection pick up and delivery, evaluation and analysis and preparation of reports.</p>

external information
hotline. This may be
accomplished through a
statewide contract with
RMPCC. If so, it would
obviate the need for us to
request hotline funding.