

Washoe County



Health District

**Washoe County District Board of Health
Meeting Minutes
May 23, 2013**

PRESENT: Mr. Matt Smith, Chairman, Councilwoman Zadra, Councilwoman Ratti, Dr. Hess, Dr. Furman, and Dr. Humphreys

ABSENT: Commissioner Jung

STAFF:

Leslie Admirand, Deputy District Attorney
 Kevin Dick, Interim District Health Officer
 Eileen Stickney, Administrative Health Services Officer, AHS
 Daniel Inouye, Acting Division Director, AQM
 Charlene Albee, Branch Enforcement Chief, AQM
 Steve Kutz, Division Director, CCHS
 Robert Sack, Division Director, EHS
 Randall Todd, DrPH, Division Director, EPHP
 Lori Cooke, Fiscal Compliance Officer, AHS
 Phil Ulibarri, Public Information Officer, AHS
 Steve Fisher, Department Computer Application Specialist, AHS
 Beverly Bayan, WIC Program Manager, AHS
 Patsy Buxton, Fiscal Compliance Officer, AHS
 Peggy F. O'Neill, Recording Secretary

Candy Hunter, PHN Supervisor, CCHS
 Jennifer Howell, Program Coordinator, CCHS
 Dave Boland, Senior Environmental Health Specialist, EHS
 Wes Rubio, Environmental Health Specialist, EHS
 Sara Dinga, Intern, EHS
 Jeff Whitesides, Public Health Preparedness Manager, EPHP
 Christina Conti, Public Health Preparedness Coordinator, EPHP
 Susanne Paulson, Epidemiologist, EPHP
 Stacey Akurosawa, EMS Coordinator, EPHP
 Heather Holmstadt, PHI, EPHP
 Megan McKinlay, PHI, EPHP
 Nicole Alberti, Health Educator I, EPHP
 Cindy Hawks, Office Support Specialist, EPHP
 Lei Chen, Senior Epidemiologist, EPHP

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| 1:07 pm 1, 2 | Meeting Called to Order, Pledge of Allegiance and Roll Call | Chairman Smith called the meeting to order, followed by the Pledge of Allegiance led by Councilwoman Zadra . Roll call was taken and a quorum noted. | |
| 3. | Public Comment | None. | |
| 4. | Approval / Deletions – Agenda – May 23, 2013 | Chairman Smith called for any deletions to the Agenda of the May 23, 2013 DBOH Meeting. | Councilwoman Zadra moved, seconded by Councilwoman Ratti , that the May 23, 2013, Agenda be approved as presented. <u>MOTION CARRIED</u> |

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| 5. | Approval/Additions/Deletions to the Minutes of the March 7, 2013 Special Budget Meeting and March 28, 2013 Regular Meeting | Chairman Smith called for any additions or corrections to the minutes of the March 7, 2013 Special Budget Meeting and March 28, 2013 Regular Meeting. | Dr. Humphreys moved, seconded by Dr. Hess , that the minutes of the March 7, 2013 Special Budget Meeting be approved as presented. Councilwoman Zadra moved, seconded by Councilwoman Ratti , that the minutes of the March 28, 2013 Regular Meeting be approved as presented. <u>MOTION CARRIED</u> |
| 6. | Recognitions | Mr. Dick and Chairman Smith made the following recognitions: A. Introduction of new employee(s) – Sara McConnell-Dinga, Public Health Emergency Response Coordinator B. Promotions – None. C. Years of Service – None. D. Retirements – None. E. Recognitions – Candy Hunter - Lifetime Achievement Award at the 14 th Annual Nurse of Achievement Awards. | |
| 7. | Proclamations | Proclamations – None. | |
| 8. | Consent Agenda | A. <u>Air Quality Management Cases:</u> 1. Recommendation to Uphold Unappealed Citations to the Air Pollution Control Hearing Board: a. Spanish Springs Construction – Case No. 1115, NOV 5267, 2399 Valley Road, Reno, NV b. Spanish Springs Construction, Case No. 1117, NOV 5266, 2399 Valley Road, Reno, NV c. Eagle Crest Construction – Case 1118, NOV 5268, 11420 South Virginia Street, Reno, NV | |

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| | | <p>2. Recommendation of Cases Appealed to the Air Pollution Control Hearing Board. None.</p> <p>3. Recommendation for Variance: None.</p> <p>B. <u>Sewage, Wastewater & Sanitation Cases:</u> Recommendation to Approve Variance Case(s) Presented to the Sewage, Wastewater & Sanitation Hearing Board. None.</p> <p>C. <u>Budget Amendments / Interlocal Agreements:</u></p> <p>1. Approval of Amendment #1 to the Interlocal Contract with the State of Nevada, Department of Motor Vehicles, for the DMV Excess Reserve Grant Program (IO 11001) to extend the contract period through June 30, 2014.</p> <p>D. <u>Proposed acceptance of the Washoe County Health District 2013 Legislative Session Report</u></p> | <p><u>ACTION ITEMS:</u> Letters to Spanish Springs Construction (2) and Eagle Crest Construction regarding fines and due dates.</p> <p>Dr. Hess moved, seconded by Councilwoman Zadra, that the Consent Agenda be approved as presented in a single motion.</p> <p><u>MOTION CARRIED</u></p> |
| 9. | Air Pollution Control Hearing Board Cases Appealed to the District Board of Health. | There were no cases agendized this month. | |
| 10. | <p><u>Regional Emergency Medical Services Authority:</u></p> <p>A. Review and Acceptance of the Operations and Financial Reports for April, 2013; and</p> | <p>Mr. Jim Gubbels, President of REMSA, reported that the DBOH members have been provided copies of the April 2013 Operations and Financial Reports; overall emergency response times for Priority One compliance was at 93%; Priority Two Compliance was at 98%; Priority One in the 8-minute zone was at 92%; the 15-minute zone was at 100%; and the 20-minute zone was at 100%. The overall average bill for air ambulance service to date is \$7,270 and overall average bill for ground ambulance services to date is \$1,028. For the year of 2012, there was a total of 90 times that Care Flight was requested for service, of that, 64 of the times, REMSA Ground was there. Care Flight was used as a sole responder 26 times, utilized two or three times at Winnemucca Ranch Road, which is out in Palomino Valley, another one was in Palomino Valley, Red Rock had two or three, East Washoe Lake had two or three, Cold Springs was in there, I-80 West at Tracy was there. So, again, the majority of these are number one, life-threatening, so they are Priority One calls. And, again, most of them are in our surrounding areas. Care Flight needs to be requested; therefore, if Highway Patrol is on the scene of a bad accident in the I-80 corridor, we will go ahead and launch for them, or if fire is on the</p> | |

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| | <p>BOARD COMMENT</p> <p>B. Update of REMSA's Community Activities Since April, 2013</p> | <p>scene, then we will launch for them. An individual person cannot request it.</p> <p>Councilwoman Ratti expressed appreciation for the responsiveness to her inquiries. She confirmed with Mr. Gubbels that Care Flight as a first responder in an urban environment is extremely rare, one such flight so far in 2013 and no such flight in 2012</p> <p>Mr. Gubbels announced that this is National EMS Week. The company is having a BBQ and providing commendation awards. He is most proud of three or four awards that will be awarded to certain employees for supporting other employees as well as an award where an employee went above and beyond for a patient, assisting in the location of housing, ensuring they had some food, and even providing money for a prescription.</p> | <p>Councilwoman Ratti moved, seconded by Councilwoman Zadra, to accept the REMSA Operations and Financial Report for April 2013 as presented.</p> <p><u>MOTION CARRIED</u></p> |
| 11. | <p>Presentation and Possible Approval of the Franchise Compliance Report for the Regional Emergency Medical Services Authority (REMSA) 7/1/11 through 6/30/12</p> <p>BOARD COMMENT</p> | <p>Stacey Akurosawa, Emergency Medical Services Coordinator, reported that staff recommends that the District Board of Health find REMSA in compliance with 31/31 of the performance requirements for Fiscal Year (FY) 12. She explained that before the board was the Franchise Compliance Report for REMSA for FY 12. Applicable excerpts from the franchise language are in italics followed by descriptions of findings in standard type. The report does not address discussions taking place with stakeholders regarding possible future changes to the franchise agreement but fulfills the requirement of the existing Franchise Item No. 26.</p> <p>Chairman Smith inquired about the survey with comparative organizations [market study] as noted in Item 5 of the Franchise Compliance Report which Ms. Akurosawa explained that the market study is performed by a contractor. Mr. Gubbels explained that the existing language in the Franchise Agreement calls for a RFP or competitive bid every 7 years. In 2010, a market study was done. This market study was performed by 15 associates who compared REMSA to 19 other organizations, ambulance organizations, and they looked at over 40 different criteria. Criteria included everything from equipment to staff to billing to maintenance. This is the largest market study ever done in the United States. Multiple agencies were involved with the interest of comparison and using the findings within each of their communities.</p> <p>Councilwoman Ratti inquired about the contract shows an end date of June 30, 2012 yet it is May, 2013.</p> <p>Ms. Akurosawa explained that there are two pieces to it; financials are done and then the independent audit. This causes a time delay.</p> | <p>Dr. Hess moved, seconded by Councilwoman Zadra, to accept the REMSA Franchise Compliance Report for FY 2012 as presented.</p> <p><u>MOTION CARRIED</u></p> |

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| 12. | Presentation, Discussion, and Possible Direction to Staff regarding Emergency Medical Services (“EMS”), Including Recommendations Contained in the TriData Report and Various Other EMS Studies. | <p>Dr. Todd reported that this report is a product of the EMS Working Group which consists of the County Manager, the two City Managers, and the District Health Officer, along with their invited support staff. Dr. Todd, Ms. Akurosawa, and REMSA have been attending these meetings recently as well. There has been some progress, including a meeting this morning of which I will update you verbally. The group met on May 9th and again today [May 23rd]. The first item discussed was a point of disagreement over the use of 800MHz radio systems. Most of public safety uses them. REMSA is on the UHF system. There are very good arguments as to why REMSA should stay on UHF. There are very good arguments by public safety as to why they should use communication in MHz. In today’s meeting, REMSA reported that there is some talk on their board of possibly adding 800MHz radio capability with the condition that Homeland Security grant funding be obtained to purchase this expensive equipment. It would cost somewhere around \$1.5 Million to purchase these radio systems. There is a need for REMSA to retain its existing UHF system, because it is a national standard for EMS. Some of the surrounding counties, which provide mutual aid, are still on UHF, and there is a need for REMSA to be able to communicate with them as well. Dr. Todd pointed out that the other update on the second page of his written report discusses the data working group that was developed. It was discussed at the EMS working group that once they get Computer Aided Dispatch (CAD) to CAD linkages, they will have the ability to work the data in a combined fashion and answer several questions that they cannot answer right now. They are probably at least two years away before there is an upgraded CAD system in the 911 dispatch center, and there will be a period of time before they can link that system with REMSA CAD. Dr. Todd volunteered to utilize his statistician to head up that working group. They met for the first time; each of the fire agencies designated someone to attend this. They met on May 20th and identified some goals and questions that they would like answered once they have a combined dataset. The working group would like to know if within a geographic area if there are response times that are suboptimal. They want to know Fire and REMSA response times to know which component in certain areas needs to be tweaked to get there. They made some good progress. Everybody at the table expressed willingness to share their data. They actually have a little bit of the data already coming in. They have outlined a 7-step work plan which was shared with the group this morning. They presented about a 3-month estimated timeline to complete this. Dr. Todd mentioned one item that he explained was still a little bit contentious; there are response agencies on the EMS Working Group, who would very much like to be able get data files back. The problem is that that data is under HIPAA protection once the Health District has it. For example, there are ambulance calls with addresses that make</p> | |

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| | <p>BOARD COMMENT</p> | <p>the information personally identifiable. The District can share the information in aggregate form and analyzed form, which he is happy to do, but staff has to stop short of that. Some agencies don't believe that; therefore, staff has requested that the Deputy District Attorney provide an opinion and carry that request forward.</p> <p>Chairman Smith asked if there are ways that the data can be redacted.</p> <p>Dr. Todd responded that staff needs the address at this point in order to have a unique identifier along with date and time. Once it is identified in a response zone, yes, it can be redacted.</p> <p>Chairman Smith asked Deputy District Attorney Leslie Admirand if she could provide an opinion on HIPAA and corresponding redactions.</p> <p>Deputy District Attorney Leslie Admirand advised that she has provided opinion via e-mail and agreed to the request.</p> <p>Councilwoman Zadra asked about if we have really considered the best system or simply what system is most widely used.</p> <p>Dr. Todd explained that there is a desire for standardization, and right now the public safety standard is 800MHz. Is that the optimal? No. The system is moving forward where in the not-so-distant future data may be able to be transferred over radio waves. This is doable now on certain technologies. He thinks that the District is going to see radio systems develop rapidly where much more data can be transmitted. He believes REMSA is also looking towards the future. At some point, it would be desirable if public safety and emergency medical responders were on a more interoperable basis.</p> <p>Councilwoman Zadra wanted to know if discussions have taken place regarding timeframes for implementing such a system and if three years is too soon.</p> <p>Dr. Todd explained that there have been robust discussions related to this effort but that he is unable to provide such a timeframe.</p> <p>Councilwoman Zadra asked what will be the contentious items for the upcoming joint meeting.</p> <p>Dr. Todd explained that City Manager Carey has taken Tri-Data recommendation and placed into broad categories, he has further subdivided the Tri-Data Recommendations within those categories on</p> | |

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| | | <p>things where we already have concurrence and things which still need to be negotiated. The attempt of the joint meeting is to update the elected boards on their progress under dispatch, their progress under the franchise, and where do they still need to do some work. He does not anticipate that it will be a contentious meeting with the structure being setup.</p> <p>Mr. Dick explained that Mr. Carey provided a draft document which has been distributed at the dais. It is draft, but if the Board sees any issues, please contact Dr. Todd. The intention is to use this as framework for discussion at the concurrent meeting. The joint meeting is on June 10th at 8:30am at the County Chambers.</p> <p>Dr. Todd pointed out that there is a need to finalize the agenda. There is a deadline by Tuesday of next week [May 28th] and staff is open to input.</p> <p>Mr. Dick added that there is a meeting being organized for June 3rd with the City Managers, County Manager, and the Health District, along with legal counsel.</p> <p>Dr. Hess asked a question about the exchange of data.</p> <p>Mr. Gubbels explained that there is a workaround by using the Health Department as it is a covered entity; REMSA is a covered entity; whereas, fire departments are not. Therefore, they really do not have to abide by federal law, but the District does. Within HIPAA, being a covered entity, there is a public health exception; the District can turn over information with certain exemptions.</p> <p>Dr. Todd explained staff can aggregate the data so that it is no longer identifiable, and then that data can go back out to interested parties. Dr. Todd believes that under circumstance of an immediate incident, Fire and REMSA can exchange data to take care of the patient. After the fact, the exchange of data then becomes problematic under HIPAA.</p> <p>Councilwoman Ratti added that her understanding of why these entities desire to obtain the data is for planning purposes. Therefore, we want data as fresh and relevant as it can possibly be so that we can see trends when we are under constrained resources and having to make really challenging decisions. The data point we are missing right now is where there is an overlap in service, so that we can make a better decision what fire station may be a better candidate for lesser service as maybe that is where REMSA service is most prompt and another station may need more service where REMSA is least prompt.</p> | |

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| | | <p>Dr. Todd explained that there is a difference in opinion amongst fire agencies in how much they want to put out there in real time. Some of them will tell you every call. Other fire agencies have said that they do not want to do that as it would bring in the looters after the fire is out.</p> <p>Chairman Smith added that it is great to hear that the EMS Working Group is active, moving forward, and all involved parties are sitting at the table. This is going to allow for efficiencies within the system so that each partner is going to be able to look at what they need to do, what they can do, but the bottom line is that the public will be better served.</p> | <p>Councilwoman Zadra moved, seconded by Councilwoman Ratti, to accept the report.</p> <p><u>MOTION CARRIED</u></p> |
| 13. | <p><u>PUBLIC HEARING:</u> Proposed Approval and Adoption of the Well Construction Regulations, as amended.</p> | <p>Wes Rubio of Environmental Health Services provided the presentation. Mr. Rubio explained that the purpose of these amendments is to provide clarification of the existing regulations, add some additional definitions, incorporate portions of the regulations with the Sewage, Wastewater and Sanitation Hearing board, the SWS Board, and to remove some of the regulations that are just not possible to regulate. The revised Well Construction Regulations are intended to provide the minimum requirements to be followed by any licensed well driller when performing well construction activities within Washoe County. The initial revision to these regulations was made at the March 28, 2013 board meeting, and it was to address a single inconsistency between the Nevada Administrative Code and the Washoe County Health District Well Regulations. The current revisions encompass a complete review of the well regulations as are seen today. The regulations are geared toward protecting the public health and through good construction practices, the future water resources necessary to promote a healthy community and environment for all persons within Washoe County. Therefore, staff is recommending approval and adoption of these regulations as presented.</p> <p>There are two well regulations in Nevada: the State of Nevada and Washoe County. A couple of the changes address inconsistencies between those regulations mostly within setback requirements to septic systems, well spacing, etc. He noted that Washoe County regulations were actually more restrictive than the state requirements; the state would overrule the County in those cases. Some of the other requirements were simply fixing language, making it a little more open-ended, so that staff could work better with the well construction community, with the licensed well drillers, and to have a little more open-ended well regulation so that they can deal with new technologies as they come forth and provide that better service to the consumer.</p> | |

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| | | <p>Chairman Smith opened the public hearing and asked for any public comment. There was no public comment.</p> | <p>Dr. Hess moved, seconded by Dr. Humphreys, to approve and adopt the Well Construction Regulations, a amended.</p> <p><u>MOTION CARRIED</u></p> |
| 14. | <p><u>PUBLIC HEARING:</u> Proposed Approval and Adoption of the Sewage, Wastewater, and Sanitation Regulations, as amended.</p> | <p>Dave Boland, Senior Environmental Health Specialist, made himself available for any questions. He explained that Mr. Rubio had just explained similar reasoning for changes with well construction regulations and updating some of the language. There were some items over the years where clarification had been requested as well as some items requested for consideration and changes. This is a culmination of those changes that staff has made.</p> <p>Chairman Smith opened the public hearing and asked for any public comment. There was no public comment.</p> | <p>Dr. Humphreys moved, seconded by Dr. Hess, to approve and adopt the Sewage, Wastewater, and Sanitation Regulations, a amended.</p> <p><u>MOTION CARRIED</u></p> |
| 15. | <p>Review and Acceptance of the Monthly Public Health Fund Revenue and Expenditure Report for April, 2013</p> <p>Board Comment</p> | <p>Eileen Stickney, Administrative Health Services Officer, presented the Monthly Public Health Fund Revenue and Expenditure Report for April 2013, stating that Staff recommends the Board accept the report. Staff is developing some financial indicators to communicate to the Board of Health on the fiscal condition.</p> <p>Dr. Humphreys appreciated the efforts on these reports.</p> | <p>Councilwoman Ratti moved, seconded by Councilwoman Zadra, to accept the Health Fund Revenue and Expenditure Report for April, 2013.</p> <p><u>MOTION CARRIED</u></p> |
| 16. | <p>Consideration of contracting with an appropriate national organization for a public health fundamental review of the Washoe County Health District, with a proposed budget of \$80,000</p> | <p>Mr. Dick explained that this is an item that was pulled from the prior month's agenda. Since then, he has met with Division Directors and Supervisors to discuss this item. Staff understands the importance of the fundamental review. He has been in contact with the National Association of County and City Health Officials (NACCHO), the premier national organization representing and working with health districts in organization and program performance. In fact, that is a track at their national conference that is coming up in July, which he hopes to attend. The recommendation is that the Board allow staff to proceed with working with NACCHO to establish a contract to conduct a fundamental review of the health district. Mr. Dick noted that when he met with Commissioner Jung, she had requested that the scope of that review include looking at the composition of the Board of Health shall the Board decide to consider that.</p> | |

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| | <p>Board Comment</p> | <p>Councilwoman Zadra commented that we should be as thorough as we can be. Obviously, times have changed. We are allocating the resources; therefore, we should get a complete review and information.</p> <p>Chairman Smith questioned how does this fair with the funds that we do have available, and where will it come from.</p> <p>Mr. Dick explained that this is an additional piece that falls on the budget but added that they anticipate generating savings from what is budgeted due to vacant positions during the year that allow a realization in budget savings. One of the things he is working on doing is trying to have people thinking about public health expenditures as an investment versus a cost. He thinks that this is an important investment for the health district to be able to come up with this information to help the District in moving forward as well as possibly justifying the budget revenue that is required for supporting a good, functioning health district.</p> <p>Chairman Smith commented that we have talked about the structure for several years now, and I think it is a critical study to be done. One of the concerns we have been watching over the last several years is the long-term sustainability of the health district. We realize that we are reaching a point of no return, if you want to think about it like that, and we are going to have to do something about that. I think NACCHO is obviously a very well-qualified entity to take on this study. They have done this type of study in many communities, so I think they could give us a very good picture of what needs to be done to allow us to move forward and achieve that long-term sustainability.</p> <p>Dr. Hess commented that we should not just rely on the hope that someone is going to retire but plan for at least a portion of that when we budget for next year. My experience, going through accreditation every 7 years, and we need to plan ahead for the cost or we could get ourselves in some trouble.</p> <p>Mr. Dick explained that staff is seeking approval of a contract of up to \$80,000 and so hopefully they can come in lighter on that number. He will work with Ms. Stickney to identify where they can come up with those dollars in the budget.</p> <p>Dr. Hess believes that we don't need to come up with the entire amount but more of a down payment.</p> <p>Councilwoman Ratti agrees with the addition of a review of the board structure and governance. She questioned how the operation works with</p> | |

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| | | <p>NACCHO as in do they have a field of full-time consultants or do they sub-contract with folks.</p> <p>Mr. Dick could not provide a solid answer, but it is his understanding that they have some consultants that they know work with health districts. He will bring back details on what it will look like.</p> <p>Councilwoman Ratti commented to jump on the concern of Dr. Hess, we have asked the District Health Officer to manage some pretty significant adjustments in budgets based on the discussion last month. She is confident that the DHO is fully aware of the fiscal matters and challenges and that they will be reporting back. It would be helpful to receive a report on the overall health of the District.</p> | <p>Councilwoman Zadra moved, seconded by Councilwoman Ratti, to authorize the District Health Officer initiate a contract up to \$80,000 for the review and analysis.</p> <p><u>MOTION CARRIED</u></p> |
| 17. | <p><u>Staff Reports and Program Updates</u></p> <p>A. <u>Director – Epidemiology and Public Health Preparedness</u></p> | <p>Dr. Randall Todd, Director, Epidemiology and Public Health Preparedness, presented his monthly Division Director's Report, a copy of which was placed on file for the record.</p> <p>Dr. Todd reported that in addition to his report, he has been contacted by the California health authorities about a case of Tick Bourne Elapsing Fever. This is not the first time that the District has had cases of this fever, but the cases they have had were rather severe. This comes from a tick bite, usually ticks entering the home. It is called relapsing fever, because you get an illness, get better, relapse, and can have several bouts of this over time. It is a treatable condition although it gets very serious when the patient develops A.R.D.S. No indication that this 6 year old has developed A.R.D.S., but staff will be taking a look at this. It looks like the area of exposure was just on the Nevada side of the California-Nevada Border up at the Lake, and that is where the District's cases have typically been. Dr. Todd questioned what it is about the Tahoe Basin that the Elapsing Fever becomes quite severe as compared to other parts of the country. It is difficult to diagnose as it is the cousin of the organism that causes Lyme Disease, but the District typically do not have the vector that causes Lyme Disease on this side of the mountain.</p> | |
| | <p>B. <u>Director – Community and Clinical Health Services</u></p> | <p>Mr. Steve Kutz, Director, Community and Clinical Health Services, presented his monthly Division Director's Report, a copy of which was placed on file for the record.</p> | |
| | <p>C. <u>Director – Environmental Health Services</u></p> | <p>Mr. Robert Sack, Director, Environmental Health Services, presented his monthly Division Director's Report, a copy of which was placed on file for</p> | |

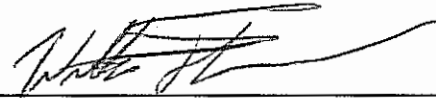
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| | | <p>the record.</p> <p>In your information, you have a report on bed bugs, which is heard about in hotels and motels, but they have now crossed the line and have been found in hospitals.</p> <p>Dr. Humphreys wondered why bed bugs have become so common.</p> <p>Mr. Sack explained that the main reason is due to pesticide resistance. It takes professionals to really work on them.</p> | |
| | <p>D. <u>Director – Air Quality Management</u></p> | <p>Mr. Daniel Inouye, Interim Division Director, Air Quality Management, presented the monthly Division Director’s Report, a copy of which was placed on file for the record.</p> <p>Mr. Inouye added that Air Quality has been promoting biking to school and the work activities all month. Some of the outreach includes proclamations by local entities and also Keep It Clean Rack ‘Em Up Program.</p> <p>The other item Washoe County is expected to receive an EPA settlement agreement in the amount of \$157,000 to replace 197 older wood burning stoves in Reno-Sparks area, administered by the UNR Business Environmental Program and is expected to be rolled out in the Summer or Fall of this year.</p> | |
| | <p>E. <u>Administrative Health Services Officer</u></p> | <p>The Administrative Health Services Officer’s Reports for this month were addressed in other agenda items.</p> | |
| | <p>F. <u>District Health Officer</u></p> | <p>Mr. Dick, Interim District Health Officer, presented the monthly District Health Officer Report, a copy of which was placed on file for the record.</p> <p>Mr. Dick expressed appreciation to the Board for meeting with him in order to receive some of their ideas individually as well as feedback. He has spent the month wrapping up and getting briefings from the Division Directors. He highlighted that the fee revisions were adopted last month with the 25% cap applied. There is an e-mail provided to the Board explaining what that means as far as an overall increase in fees. The anticipated overall increase in fees expected from the FY 14 fee revisions adopted at the April 2013 DBOH meeting is \$148,500 or 8.5% increase. Also, he reported out on the budget meeting held on May 7th with both of the City Managers and the County Manager. This was the 2nd budget meeting. In his report, there is a series of pie charts showing what the composition of staffing for the health district looks like with the 2014 budget versus what it was back in 2003. The full-time employee part of the pie</p> | |

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| | | <p>(blue piece) has shrunk, as has the part-time employee piece of the pie, and they have had more and more of the people who work for the Health District as intermittent-hourly and temporary employees. This is a structural change over those years to basically be able to provide more services at a lower cost for those employees. Staff has also looked at what has happened to the District's FTEs over that period. The District has had a decrease of FTEs over that period of about 17.3%. The Board of County Commissioners meeting on the 14th reported from 2008 that the Health District has experienced a 26.45% reduction versus the County's 21% reduction over the same period. The FY 14 budget is roughly equivalent to the funding amount The District received in 2004, and the staffing levels are roughly equivalent to District staffing back in 1993.</p> <p>Councilwoman Zadra was curious if the County 21% reduction figure was all-inclusive, including Courts, Sheriff, and Health District.</p> <p>Mr. Dick commented that he will report back.</p> <p>Dr. Hess commented that he is thoroughly impressed by the job [staff] has continued to do.</p> | |
| 18. | Board Comment – Limited to Announcements or Issues for Future Agendas | None. | |
| 19. | Emergency Items | None. | |
| 20. | Public Comment | <p>Phil Ulibarri, Public Information Officer, announced the winners of the Rack 'Em Up Contest fairest bike racks were 1st Place: Whitehead Elementary School; 2nd Place: Westergard Elementary School; and 3rd Place: Dunn Elementary School. The schools with the best decorated bike racks were 1st Place: Cold Springs Elementary School; 2nd Place: Incline Elementary School; and 3rd Place: Mendive Middle School.</p> | |
| 21. | Motion to Adjourn | There being no further business to come before the Board, the meeting was adjourned. | <p>Councilwoman Ratti, moved, seconded by Dr. Hess, that the meeting be adjourned.</p> <p><u>MOTION CARRIED</u> The meeting was adjourned at 2:35 p.m.</p> |

| TIME / ITEM | SUBJECT / AGENDA | DISCUSSION | ACTION |
|----------------|------------------|------------|--------|
|----------------|------------------|------------|--------|



KEVIN DICK,
INTERIM DISTRICT HEALTH OFFICER



WILLIAM FLORES,
RECORDING SECRETARY