

Washoe County District Board of Health

Concurrent Meeting Minutes

February 10, 2014, 8:30 AM

Reno City Council Chamber
One East First Street
Reno, NV 89501

Washoe County



Health District

PRESENT: Chair Matt Smith, Vice Chair Kitty Jung, David Silverman, Denis Humphreys, Councilmember Julia Ratti, Councilmember Sharon Zadra
ABSENT: Dr. George Hess

STAFF:

John Slaughter – Washoe County Manager
Kevin Dick – District Health Officer
Leslie Admirand – Deputy District Attorney
Dawn Spinola – Administrative Secretary/Recording Secretary

Time/ Item	Agenda Item	Discussion
8:30 am *1.	Call to Order	Reno City Mayor Robert Cashell called the meeting to order.
*2.	Pledge of Allegiance.	Mr. Slaughter led the Pledge of Allegiance.
*3.	Roll Call	Roll call was taken and a quorum confirmed.
*4.	Public Comment. Comment heard under this item will be limited to three minutes per person and may pertain to matters both on and off the District Board of Health agenda. The Board	None

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	<p>will also hear public comment during individual action items, with comment limited to three minutes per person. Comments are to be made to the Commission, Sparks City Council, Reno City Council, and the Washoe County District Board of Health as a whole.</p>	
5.	<p>Approval of the Agenda – Consideration of taking items out of sequence, deleting items, and adding items which require action upon a finding that an emergency exists. (For Possible Action)</p>	<p>Washoe County Commissioner Kitty Jung moved, seconded by Reno Councilperson Ed Lawson, that the February 10, 2014 agenda be approved. The motion duly carried with Dr. Hess absent.</p>
6.	<p>Staff Report: Rules of procedure for joint regional meetings of Washoe County, the City of</p>	<p>Reno Assistant City Manager Cadence Matijevich introduced the rules for the joint meetings, which had last been updated in 2007. Since that time, the Nevada State Legislature has made a number of revisions to the Open Meeting Law and she felt it was prudent the rules be reviewed for compliance.</p> <p>Mr. Cashell polled the governing bodies for a response and received none. He stated the rules would remain as</p>

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	Reno and the City of Sparks. [Reno]	they are.
7.	Staff Report: Presentation, discussion, and potential approval of the following: A) A Principles of Agreement for the Regional Emergency Medical Services Authority Franchise Agreement, and B) A Resolution directing the Washoe County Health District to establish and maintain a Regional Emergency Medical Services Oversight Program to provide for oversight of all emergency medical services provided by the City of Reno, the City of Sparks, the County of Washoe and the Regional Emergency Medical	<p>Mr. Carey explained he was speaking as part of the Emergency Medical Systems Working Group which had been working since February 11, 2013 to implement the recommendations of a study completed by Tri-Data. The study had been commissioned by the Washoe County Board of Commissioners (BCC) to find resolutions to underlying problems in the emergency medical services (EMS) system. He noted the Tri-Data report had said that the Washoe County region had outstanding EMS and that it is operating with some of the best efficiencies they have seen.</p> <p>Mr. Carey stated the Tri-Data report had uncovered 38 opportunities to move the system forward. The governing bodies had empowered the team to find solutions and set up a system that will allow them to communicate better, use technology better and focus on patient care. He explained the blueprint for the future that was being presented to the governing bodies would allow the regional EMS providers to communicate and implement change.</p> <p>Mr. Carey explained Washoe County has chosen to use an integrated system with the firefighters being the first responders, dispatch centers providing primary dispatch services and Regional Emergency Medical Services Authority (REMSA) providing dispatch services for their ambulances. REMSA is used for the transport of patients by ground and air.</p> <p>Mr. Carey explained the staff report packet included a matrix that addressed each of the 38 opportunities for improvement. The team members had found consensus on all items. He acknowledged all solutions did not completely satisfy each member but achieved the goal of implementing sound practices.</p> <p>Mr. Carey stated two documents needed to be written. One was a franchise agreement that would provide REMSA a defined service term for the future. The term would ensure that the services remained at a high level. It described a partnership among emergency responders and would allow the flexibility to adapt to changing technology and situations. The Principles of Agreement (PA) will drive the new Franchise Agreement (FA) that will be refined and finalized by Deputy District Attorney (DDA) Paul Liparelli and his staff. If the governing bodies approved the recommendations presented, staff could return with the documentation for ratification at the May concurrent meeting, and the changes could take effect as early as July 1 of next year.</p>

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	<p>Services Authority; and providing other matters properly relating thereto. These agreements will incorporate the Emergency Medical Services Working Group's proposed solutions to the recommendations from the 2013 TriData Emergency Medical Systems Analysis Final Report. (For Possible Action)</p> <p>[Sparks]</p>	<p>Mr. Carey explained the second document was an Interlocal Agreement (ILA) that would amend the original agreement that established Washoe County Health District (WCHD). It empowers local government in its role as public safety providers. The systems that we use will be properly looked at, reported back, so that performance changes and actions may be taken by you, the elected bodies, through your managers and through your fire chiefs.</p> <p>Mr. Carey noted emergency service performance would be tracked on every level and reported to the managers and governing bodies. WCHD would be the steward of a regional emergency medical services system by creating an oversight process. The process will integrate REMSA, Dispatch and Fire and will report to an oversight committee. The system will have a manager who will manage the systems and any recommendations for improvement that arise as the process is refined.</p> <p>Mr. Carey explained the documents laid out reporting mechanisms for all of the proposed tracking aspects of EMS and empowered the governing bodies. The fire departments would retain their current Medical Directors (MDs). There would also be a doctor at WCHD who would work with the group of doctors to allow seamless integration of systems and procedures. There will be regional protocols and standards.</p> <p>WCHD would have a Medical Advisory Committee that would consist of the City and County managers and medical professionals. The ILA allows the integration between the WCHD and the governing boards and allows the governing bodies to be a part of the process of EMS oversight.</p> <p>Mr. Carey spoke of two objectives that required immediate attention. The first was how to best protect the community in the case of a failure of REMSA's operating arm. The team had turned that issue over to DDA Liparelli, the City attorneys and REMSA's attorney to compile a plan for continued service if that were to occur. The second was to address the continuance funding in case of failure. The plan under consideration provided a pool of cash to draw from. Those two issues were the only ones the team felt they needed outside counsel on.</p> <p>Mr. Carey thanked the managers and team members and assured the governing bodies that the plans would provide the best patient care possible going forward into the future.</p> <p>Sparks City Council Member Ed Lawson asked if an organizational chart had been developed and requested an explanation as to how it all fit together. Mr. Carey replied there had not been enough time to develop a chart</p>

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		<p>and explained responsibility was laid out in two places. The PA spelled out how each of the 38 recommendations would be addressed. All of REMSA's requirements were specifically included. He explained how data would be gathered regarding specific points of contact with patients and that the flowchart was embedded within the recommendations. An organizational chart could be developed to answer any other questions. Another portion of the PA assured that all information flowed to WCHD for a compilation of a common string of data.</p> <p>Washoe County Commissioner Vaughn Hartung expressed concerns about response time to outlying areas and how they would deal with firefighters assisting REMSA, as that put engines out of service for a time. He asked if patient care was being addressed regionally through interagency agreements.</p> <p>Mr. Carey explained the ILA gave the Commissioners and other governing bodies the power of concurrent review of the outcomes of performance. All performance issues will be measured and the results reported to the governing bodies annually. The data will be collected region-wide and may be viewed for an overall perspective or broken down into specific areas. This information allows the governing bodies to participate in making decisions that will continue to improve services.</p> <p>Washoe County Sheriff Mike Haley explained that the process of tackling the 38 recommendations made by Tri-Data helped the responsible parties to develop a set of systems that will allow them to inform themselves about what they are seeing. They are putting in a radio communications gateway that will allow them to listen to and share in medical services dispatch and gather the data to be entered into a single identifier. That data will be analyzed and used to make resource decisions. Sheriff Haley noted Reno, Sparks and Washoe County were also working together to obtain and use the same software so information can be more readily shared.</p> <p>Truckee Meadows Regional Fire Protection District (TMRFPD) Chief Charles Moore reiterated good data was needed and not currently available. When there is a better understanding of the time elements, they can make better decisions as to how to improve inefficiencies. He noted another aspect of the plan was to integrate Automatic Vehicle Locators so they could track equipment and develop data regarding use and availability. This information would help Dispatch as well as providing more data critical for resource planning.</p> <p>Washoe County Commission Chair David Humke asked if a goal of the program was to have one central dispatch that would alert the optimal resources regardless of jurisdictional boundaries. Chief Moore explained that would depend on the severity of the incident. He opined a standard of performance should be developed so that if one agency is unable to respond within a certain time frame then mutual aid would be triggered.</p>

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		<p>Commissioner Humke asked how much time it would take to reach that ideal and if it was included in the current FA. Chief Moore stated that to the best of his knowledge it was not in the FA and a standard should be advocated for.</p> <p>Commissioner Humke noted there were indications of follow-on agreements to the FA. Chief Moore explained Commissioner Humke’s concern could be embedded in the agreement or addressed in the process of EMS oversight. He hoped the process would be established within a year. Commissioner Humke asked if the success of mutual aid depended on the cooperating agency. Chief Moore explained there were already mutual aid agreements in place so there should be no problems bringing the local agencies in as partners to the process.</p> <p>REMSA President Jim Gubbels stated the mutual aid agreements had been in place for years and included all of the surrounding Advanced Life Support (ALS) ambulance services. This included North Lake Tahoe Fire Protection District, Carson Fire, Storey and North Lyon Counties, as well as Truckee. Calls for service currently go into the original service area. If REMSA is not in that area then they can and do call for mutual aid. He provided examples of REMSA’s participation in mutual aid situations both as the receiver and the provider of services. Mr. Gubbels pointed out air transport services were also available.</p> <p>Sparks Councilmember Ron Schmitt asked Mr. Carey if the agreement was designed to codify the work done to date and allow the process to move forward into the documentation phase. Mr. Carey stated they would write the binding ILA to change the relationship with WCHD. DDA Liparelli’s office would take the lead in preparing the ILA. He pointed out it would also be necessary to write the FA, which would involve REMSA’s attorney as well as the DA staff. The documents would be brought back to the governing bodies in May.</p> <p>Sparks Councilmember Ron Schmitt noted the issue had been contentious when last presented to the Boards. He complemented the team members on the achievement of coming to the agreements that they had.</p> <p>Washoe County Commissioner Bonnie Weber expressed concern about response time to the outlying areas. Mr. Gubbels explained any calls within certain areas automatically generated requests for mutual aid. If REMSA arrives first, they will call off the other responders and vice versa. Commissioner Weber stated she looked forward to having the data and felt it was important. Mr. Gubbels explained this meeting was a starting point. From here, the EMS Advisory Board would be formed and the system will be studied as a whole. The next step is to jointly address identified needs. Commissioner Weber expressed her appreciation of all of the hard work of the team and complemented them on how well they had come together.</p>

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		<p>Reno Councilmember Jenny Brekhus asked if this was the first time the concept of a franchise was going to be used for an agreement between REMSA and the Washoe County District Board of Health (DBOH). Mr. Gubbels replied it was not, it was designed to be a franchise model when it started in 1986. It gave REMSA exclusive right to provide ambulance services to all of Washoe County.</p> <p>Councilmember Brekhus noted a recommendation in the FA was to work to assure passage of legislation or administrative regulation to provide legal protection to all constituents. Based on the language, she opined some legislative changes would need to take place. Mr. Gubbels explained some regulations would need to be updated so patient information could be exchanged without violating Health Insurance Portability and Accountability Act (HIPAA) laws. Ms. Brekhus asked if the changes would be requested collaboratively and Mr. Gubbels stated they would.</p> <p>Councilmember Brekhus noted the agreement was for a 16-year term. The DBOH had the option to extend it for six years and then another six. The decision to extend was not automatic; it would be based on performance standards. Mr. Gubbels stated that was correct and clarified the DBOH would review the agreement after 10 years. If they decided not to extend, the terms allowed for a six-year transition period. If they did allow the 16-year contract to run its course, they had the option to extend it for an additional six years.</p> <p>Councilmember Brekhus asked if it was legal for an outside entity to dictate the composition of a franchisee’s board. Mr. Gubbels explained that had been brought up in discussion and it was agreed the current composition would remain in place. He did not feel as though the agreement would hinder REMSA from operating as they normally would.</p> <p>Councilmember Zadra noted WCHD would be the ultimate manager of the contract once the governing bodies agreed to it. She asked Mr. Dick to speak about that and how the fundamental review, currently under way, would help determine best management practices. Mr. Dick stated he agreed with what had been said regarding the plans to collect and analyze data and establishing integrated performance measures. He noted the fundamental review did address performance management and supports the direction of the agreement and potential action of the governing bodies. He reiterated there would be an EMS Program Manager and staff. WCHD would be receiving all of the response data across the agencies and compiling it into a unified database. This would allow the agencies to move the EMS system forward and optimize performance.</p> <p>Commissioner Weber asked if the boundaries of the areas noted as exceptions to the FA would be defined. Mr.</p>

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		<p>Gubbels explained Gerlach and North Lake Tahoe had opted out of the original franchise agreement and he deferred to Mr. Slaughter for more information. Mr. Slaughter stated maps would be prepared that clearly showed the boundaries of the jurisdictions opting out. He noted the Gerlach area would most likely be mapped by the time the documents came before the governing bodies in May, but North Lake Tahoe may not, as that discussion was more complicated.</p> <p>Commissioner Weber asked about a portion of the study that related to volunteer firefighters. Mr. Carey explained that was written prior to the creation of the current Fire Department structure and Chief Moore would be asking the BCC for direction about utilization of volunteers and methods of dispatch.</p> <p>Commissioner Hartung asked Mr. Gubbels to define what it meant when he said that REMSA services were or were not immediately available and if there was a mandated time frame for response. Mr. Gubbels stated that meant if there was an ambulance in the immediate area. Commissioner Hartung asked if there was a defined anticipated response time lag that would trigger REMSA to call for mutual aid. Mr. Gubbels reiterated that decision was based on the resource needs for the patient and the acuity level of the patient. Commissioner Hartung asked if a standard time frame could be established. Mr. Gubbels stated the mutual aid agreements were in place. The data would be gathered and reviewed collaboratively.</p> <p>Reno Councilmember Hillary Schieve asked Mr. Gubbels why he had felt a Regional MD would be important. He explained the initial vision of the group was to have one MD over all of the services. After discussion, the agencies had agreed to retain their own MDs for the time being and had requested them to work collaboratively on system-wide protocols.</p> <p>Councilmember Schieve asked why Reno Fire’s response to incidents is altered for certain circumstances. Mr. Carey explained the Tri-Data study had concluded that Reno did not always have the resources to respond to medical calls during a lightning storm due to being on watch for serious wild land fires. Mr. Carey clarified the decision regarding how to use the resources was up to the City Council using information provided by the Fire Chief.</p> <p>Councilmember Schieve asked if the data would be available to the public through the web in the future. Mr. Carey opined it would, while making sure not to violate any HIPPA laws.</p> <p>Mr. Carey referred back to Councilmember Schieve’s initial question regarding the Regional Medical Director and emphasized the governing agencies would have access to information they had not had access to in the</p>

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		<p>past. He opined having one ambulance authority eliminated confusion and the proposed agreement would provide transparency.</p> <p>Commissioner Weber asked how the proposed agency fines would benefit a patient. Mr. Carey explained they never expected that to be a significant source of funding, but it supports excellent patient care. The funds are used for outreach and education efforts.</p> <p>Commissioner Weber asked how the EMS committee would be funded. Mr. Carey replied they had looked at what they needed to start and where they needed to go. All of the positions would not be filled initially. They would be filled to capture data, put a manager in place and to have a Health Department doctor on contract. The second step was to be sure the system was evolving. The working groups of the Fire Chiefs and REMSA will be in place to ensure that when a new protocol is established, they train to the same piece of equipment and it works with everyone's budgets. Education will be provided by REMSA. Mr. Carey opined the decision to retain separate MDs allowed each Fire District the freedom to act in a way that helped it to face its own unique challenges. Mr. Carey reiterated that having the ability for the doctors, the fire chiefs and the EMS manager to come together will improve any differences in approach and training of incidents.</p> <p>Mr. Carey explained there was a provision that Washoe County will be paying for part of the oversight cost. A percentage would be provided by REMSA.</p> <p>Sparks Councilmember Julia Ratti expressed her pleasure over the progress made on the project and thanked the BCC for having the foresight to commission and fund the Tri-Data study. She thanked the team members for going through the work of coming to consensus. She suggested the proposed contract language be changed for clarity to require REMSA to pay 12.5 percent of the overall cost of administration. Mr. Gubbels and Mr. Dick stated that the change was acceptable to them.</p> <p>Washoe County Commissioner Marsha Berkgigler asked how long it would take for all of the agencies to get onto the same system. Mr. Carey acknowledged the contributions of Sheriff Haley, who has significant communications development skills. His work has led to a gateway that will allow communications between dispatch centers to occur within a few weeks.</p> <p>Mr. Carey then explained the evolution of Tiburon, which was expected to go live on January 1, 2015. REMSA's system will be properly mirrored to link with Tiburon and the primary dispatch centers.</p>

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		<p>Reno City Councilmember Oscar Delgado asked which agency provides first response and noted REMSA transports and also provides services. Reno Fire Chief Mike Hernandez explained Washoe County currently utilized a two-tier system. Fire operates first response and REMSA operates the second, which is advanced life support and transport. City of Reno staff is trained to the Intermediate level and TMFPD is moving towards the Paramedic or ALS level which is where REMSA operates.</p> <p>Councilmember Delgado asked if Reno had paramedics in its fire department. Chief Hernandez explained they had slightly more than a dozen certified paramedics, but the agreement states that their medics operate at the Intermediate level. That will likely be a negotiation point in the future. TMFPD is working towards a system wherein they can deliver the same level of service as REMSA. Chief Hernandez clarified level of service was dictated by labor contracts, not the REMSA contract.</p> <p>Councilmember Delgado asked what still needed to be done to cause the systems to work together and to establish a central dispatch. Chief Hernandez opined the author of the Tri-Data study had made it a point to emphasize Dispatch be the most important thing that is addressed and he believed they were moving towards the optimal framework.</p> <p>Councilmember Delgado asked about current response times and Chief Hernandez stated they responded they respond to 100 percent of EMS calls in just under six minutes and 40 seconds in the City of Reno proper. (1:36) Approximately 70-75 percent of the time they arrive prior to REMSA. Under the new agreement, REMSA has committed to a response time of eight minutes and 59 seconds. Chief Hernandez stated the Reno Fire initial response time for fire calls is just over seven minutes with a full firefighting response force arrival of 12 minutes.</p> <p>Sheriff Haley reiterated the Tri-Data report recommended a single-dispatch mechanism. Any single-dispatch system requires a secondary in case of failure. He explained all dispatch needed to be handled by the Sheriff, the City of Reno or an outside contractor. He emphasized it was irrelevant who was in charge of it; it was relevant that it was all in one place with a secondary dispatch available.. Sheriff Haley reiterated Tri-Data had made 38 recommendations and coming to consensus on all of them had taken time. They had made substantial progress on the dispatch issue and were close to getting it off the ground.</p> <p>Reno Councilmember Neoma Jardon asked if the data that they would receive would help them to make decisions defining what types of calls Fire would respond to, or if that was something that needed to be addressed at the union negotiation level. Chief Hernandez replied they had already initiated the process in light</p>

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		<p>of the fact they would continue with the same model. Reno Fire had initiated discussions with their M.D. regarding which calls were of the utmost priority, which were important but not as critical and what calls do not warrant a Fire response. Once that criteria is established they will work with the REMSA MD and adjust dispatch protocols accordingly. The goal for starting that type of system is March or April. Chief Hernandez noted that was outside the labor contract parameters. It is a service issue that rests with the City Council and Fire Department leadership.</p> <p>Reno Councilmember Dwight Dortch asked if that would come back to the Council for approval. Chief Hernandez replied he could bring it back as a presentation or an action item, whichever the Council preferred.</p> <p>Washoe County Commissioner Kitty Jung requested comment cards offer the responder the option to contact either REMSA or DBOH so the patients have more ways to register comments or complaints.</p> <p>Commissioner Jung noted the only item addressed regarding dispute resolution was limited to rate increases and asked if that would be expanded in the future to include other dispute topics to be settled through other means to perhaps include mediation. Mr. Carey noted the Councils, Health Board and Commissioners would be more involved and empowered through the ILA and would be in a position to choose the direction the dispute would take.</p> <p>For the City of Sparks, on motion by Councilmember Ratti, seconded by Councilmember Schmitt, which motion duly carried unanimously, it was ordered that the franchise agreement be approved as proposed and the Washoe County District Attorney's Office be directed to prepare final legal agreements to match the Principles of Agreement to the franchise, with the amendment changing the 25 percent of REMSA on additional costs to 12.5 percent of all oversight costs. Further it was ordered that the full development of an Interlocal Agreement concerning the duties and responsibilities of the entities participating in the Regional Emergency Medical Services Oversight Program be approved.</p> <p>For Washoe County, on motion by Commissioner Weber, seconded by Commissioner Hartung, it was ordered that the franchise agreement be approved as proposed and the Washoe County District Attorney's Office be directed to prepare final legal agreements to match the Principles of Agreement to the franchise, with the amendment changing the 25 percent of REMSA on additional costs to 12.5 percent of all oversight costs. Further it was ordered that the full development of an Interlocal Agreement concerning the duties and responsibilities of the entities participating in the Regional Emergency Medical Services Oversight Program be approved.</p>

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		<p>Washoe County Commission Chair David Humke noted the amendment distributed the cost between REMSA and the Washoe County District Board of Health and pointed out that meant the County would bear the costs. He asked if it was the intent of the County to enter into that agreement. Councilmember Ratti noted the amendment did not change the dollar amount; it just changed what the 12.5 percent was applied to. Commissioner Weber stated she would like to retain the motion as presented. The motion duly carried.</p> <p>For Washoe County, on motion by Chair Smith, seconded by Mr. Humphreys, which motion duly carried with Dr. Hess absent, it was ordered that the franchise agreement be approved as proposed and the Washoe County District Attorney’s Office be directed to prepare final legal agreements to match the Principles of Agreement to the franchise, with the amendment changing the 25 percent of REMSA on additional costs to 12.5 percent of all oversight costs. Further it was ordered that the full development of an Interlocal Agreement concerning the duties and responsibilities of the entities participating in the Regional Emergency Medical Services Oversight Program be approved.</p> <p>For the City of Reno, on motion by Councilmember Zadra, seconded by Councilmember Brekhus, it was ordered that the franchise agreement be approved as proposed and the Washoe County District Attorney’s Office be directed to prepare final legal agreements to match the Principles of Agreement to the franchise, with the amendment changing the 25 percent of REMSA on additional costs to 12.5 percent of all oversight costs. Further it was ordered that the full development of an Interlocal Agreement concerning the duties and responsibilities of the entities participating in the Regional Emergency Medical Services Oversight Program be approved. . Councilmember Schieve asked if the standard of performance explained earlier by Chief Moore would be moving forward and Mayor Cashell noted that was within the motion. The motion duly carried.</p>
8.	Comments from the Councils, Commissions, Boards, Managers and District Health Officer.	Councilperson Ratti noted this was likely the last joint or concurrent meeting that would be attended by Mr. Carey. She extended her thanks for his leadership and said it had been a pleasure to serve with him. The audience supported her statements with a standing ovation.
9.	Public Comment. Comment heard under this item will be limited to three	None.

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	<p>minutes per person and may pertain to matters both on and off the Commission agenda. The District Board of Health will also hear public comment during individual action items, with comment limited to three minutes per person. Comments are to be made to the Commission, Sparks City Council, Reno City Council and the Washoe County District Board of Health as a whole.</p>	
10.	Adjournment. (For Possible Action)	The meeting adjourned at 10:25 a.m.



KEVIN DICK
DISTRICT HEALTH OFFICER



DAWN SPINOLA
ADMINISTRATIVE SECRETARY/RECORDING SECRETARY

Approved by the Washoe County District Board of Health in session on _____, 2014