

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).

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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.

 for

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



JANET SMITH
RECORDER