

WASHOE COUNTY DISTRICT BOARD OF HEALTH MEETING MINUTES

Members

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

Thursday, September 24, 2015
1:00 p.m.

Washoe County Administration Complex
Health District South Conference Room
1001 East Ninth Street
Reno, NV

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

1:00 p.m.

1. *Roll Call and Determination of Quorum

Chair Jung called the meeting to order at 1:03 p.m.

The following members and staff were present:

Members present: Kitty Jung, Chair
Julia Ratti, Vice Chair
Dr. George Hess
Dr. John Novak
David Silverman
Mike Brown

Ms. Spinola verified a quorum was present.

Members absent: Neoma Jardon

Staff present: Kevin Dick, District Health Officer, ODHO
Leslie Admirand, Deputy District Attorney
Anna Heenan, Administrative Health Services Officer, AHS
Mike Wolf, Air Quality Supervisor, AQM
Steve Kutz, Division Director, CCHS
Randall Todd, Division Director, EPHP
Bob Sack, Division Director, EHS
Christina Conti, EMS Program Manager
Dawn Spinola, Administrative Secretary/Recording Secretary, ODHO

2. *Pledge of Allegiance

Dr. Novak led the pledge to the flag.

3. *Public Comment

Any person is invited to speak on any item on or off the agenda during this period. Action may not be taken on any matter raised during this public comment period until the matter is specifically listed on an agenda as an action item. Limited to three (3) minutes per person.

As there was no one wishing to speak, Chair Jung closed the public comment period.

4. Approval of Agenda

September 24, 2015

Dr. Novak moved to approve the agenda for the September 24, 2015, District Board of Health regular meeting. Vice Chair Ratti seconded the motion which was approved six in favor and none against.

5. Approval of Draft Minutes

August 27, 2015

Vice Chair Ratti moved to approve the minutes of the August 27, 2015 District Board of Health regular meeting as written. Dr. Novak seconded the motion which was approved six in favor and none against.

6. Recognitions

B. Retirements

1. Susan Henkes, 15 years, 10/9/00 through 10/9/15 – EHS

Ms. Henkes was not in attendance. Mr. Dick explained she was a member of the EHS front desk staff and stated she would be receiving a commemorative clock to thank her for her service.

A. Years of Service

1. Randall Todd, 10 years, hired 9/12/05 – EPHP

Mr. Dick congratulated Dr. Todd and presented him with a commemorative certificate.

2. Luke Franklin, 15 years, hired 9/11/00 – EHS

Mr. Franklin was not in attendance.

3. Teresa Long, 15 years, hired 9/11/00 – EHS

Ms. Long was not in attendance.

4. Dawn Spinola, 15 years, hired 9/1/2000 – ODHO

Mr. Dick recognized Ms. Spinola and presented her with a commemorative certificate.

5. Dave McNinch, 25 years, hired 9/24/90 – EHS

Mr. Dick congratulated Mr. McNinch and presented him with a commemorative certificate.

C. Achievements

1. Genine Wright, from AQM Specialist II to Environmental Engineer I

Mr. Dick acknowledged Ms. Wright's achievement and congratulated her.

7. Consent Items

Matters which the District Board of Health may consider in one motion. Any exceptions to the Consent Agenda must be stated prior to approval.

A. Budget Amendments/Interlocal Agreements

1. Approve Notice of Subgrant Award from the Nevada Department of Health and Human Services, Division of Public and Behavioral Health, for the period July 1, 2015 through September 30, 2016 in the total amount of \$248,720.00 in support of the Centers for Disease Control and Prevention (CDC) Public Health Preparedness (PHP) – Preparedness, Assurance, Inspections and Statistics (PAIS), IO 11257; Approve amendments totaling an increase of \$226,903 in both revenue and expense to the FY16 CDC PAIS – Ebola Preparedness & Response Federal Grant Program, IO 11257; and if approved authorize the Chair to execute.

Staff Representative: Erin Dixon

2. Ratification of Interlocal Agreement between the Washoe County Health District and the University of Nevada School of Medicine, to provide physician consultative services in the total amount of \$8,032.50 for the period October 1, 2015 through September 30, 2016 unless extended by the mutual agreement of the Parties; with automatic renewal for successive one-year periods for a total of 3 years on the same terms unless either party gives the other written notice of nonrenewal at least 60 days prior to September 30 of each year; and if approved, authorize the Chair to execute the Interlocal Agreement.

Staff Representative: Patsy Buxton

3. Approve the abolishment of one vacant Permanent Full-time Office Assistant II position (PC# 70002142); Approve Notice of Subgrant Award from the Nevada Department of Health and Human Services, Division of Public and Behavioral Health for the period October 1, 2015 through September 30, 2016 in the amount of \$1,062,145 for the Women, Infants and Children (WIC) Program Grant (IO 10031); and if approved authorize the Chair to execute.

Staff Representative: Patsy Buxton

4. Approve Subgrant Amendment #2 from the Nevada Department of Health and Human Services, Division of Public and Behavioral Health for the period January 1, 2015 through December 31, 2015 in the amount of \$337,109 for the Centers for Disease Control and Prevention (CDC) Immunization Program Grant (IOs 10028 & 10029); and if approved authorize the Chair to execute.

Staff Representative: Patsy Buxton

- B. Approval to add Liletta (Intrauterine Device) to the Community and Clinical Health Services fee schedule

Staff Representative: Steve Kutz

Mr. Silverman moved to approve the Consent Agenda as presented. Chief Brown seconded the motion which was approved six in favor and none against.

8. Recommendation to Re-Appoint Mr. David Rinaldi and Dr. Cathleen Fitzgerald, DEnv,

PE, for Three Year Terms to the Air Pollution Control Hearing Board, Serving from September 27, 2015 to September 27, 2018; and Ms. Jeanne Rucker, REHS, for a Three Year Term, to the Air Pollution Control Hearing Board, Serving from October 24, 2015 to October 24, 2018.

Dr. Novak moved to re-appoint Mr. David Rinaldi and Dr. Cathleen Fitzgerald, DEnv, PE, to the Air Pollution Control Hearing Board for a three-year term serving from September 27, 2015, thru September 27, 2018. It further be moved to re-appoint Ms, Jeanne Rucker, REHS, to the Air Pollution Control Hearing Board for a three-year term serving from October 24, 2015 thru October 24, 2018. Dr. Hess seconded the motion which was approved six in favor and none against.

9. Regional Emergency Medical Services Authority

Presented by Kevin Romero

A. Review and Acceptance of the REMSA Operations Reports for August, 2015

Mr. Romero noted REMSA was in compliance throughout all zones and offered to answer any questions.

Dr. Hess asked what the process was that was used to obtain consumer input, noting the number of comments submitted to the Board was quite a bit smaller than it had been in the past. Mr. Romero explained that previously REMSA had sent out the questionnaires to 100 percent of transported patients. The process has since been outsourced and the company handling it sends out the questionnaire to a random selection of 10 percent of customers transported, which would equate to approximately 380 for the month of August. 31 of 61 responses received had been provided to the Board.

Dr. Hess opined it would be beneficial to receive more responses, so the distribution rate should be increased. He had conducted research on appropriate sample sizes and expressed concern that 10 percent distribution was unlikely to achieve a relevant number of responses.

Mr. Dick noted Mr. Gubbels had previously explained that REMSA would be outsourcing the process in hopes of obtaining more statistically representative sampling, instead of oversampling. He suggested the Board request Mr. Gubbels attend the October meeting and provide additional information, to include the basis for the sampling percentage.

Chair Jung suggested Mr. Gubbels meet with Dr. Hess to discuss Dr. Hess' recommendation. Mr. Romero stated he would ask Mr. Gubbels to contact Dr. Hess, and then make a presentation to the Board requesting approval for any potential new direction.

Dr. Hess noted that there had been no negative comments over the last several months, and usually there is one out of 40 or 50. He opined they were important because they may reveal a negative trend that should be addressed.

Chief Brown moved to accept the report as presented. Mr. Silverman seconded the motion which was approved six in favor and none against.

***B. Update of REMSA's Community Activities during August, 2015**

Mr. Romero noted August and September are very busy months in Washoe County. He listed some of the major activities that occur during that time, and explained the Emergency Medical Services (EMS) actions that had occurred. He pointed out the special event staffing provides the secondary benefit of negating any impact to the 911 system.

Vice Chair Ratti noted event promoters were billed for the additional police and fire services in Sparks and asked how that worked for REMSA. Mr. Romero explained they

billed the event promoter as well. They staff the events with the number of personnel and ambulances recommended by the Washoe County Health District (WCHD) based on the size of the event and other factors. Vice Chair Ratti asked what occurred if the promoter elected to not have the services present, and Mr. Romero stated the WCHD would be informed.

Chair Jung congratulated Mr. Gubbels on receiving the honor of being named the Northern Nevada Health Care Hero of the Year. She also noted she would be attending the REMSA Board meeting on September 25.

10. Acknowledge receipt of the Health District Fund Financial Review for August Fiscal Year 2016

Staff Representative: Anna Heenan

Ms. Heenan reviewed the staff report, noting the three percent employee Cost of Living Adjustment (COLA) had been approved so the salary savings would diminish, and she would have more information about that in November. Additionally, the County-Wide Cost Allocation Program (COWCAP) is being billed differently than last year, so it appeared higher but overall was not.

Chair Jung explained the Washoe County elected department heads had obtained a three percent raise from the Legislature at the last session, so she had led the way in convincing the Board of County Commissioners (BCC) to approve the same for all employees.

Dr. Hess noted what appeared to be information that did not match up between the Financial Review and the upcoming Phase One Cost Analysis.

Chair Jung opened Item 11 for discussion.

Dr. Hess clarified he was referring to a table showing a deficit in expenditures versus revenues. Ms. Heenan explained the revenues and expenditures did not include the fund balance, which is positive. Dr. Hess expressed his concern with using the fund to balance a deficit budget every year.

Chair Jung suggested Ms. Heenan meet with Dr. Hess and other interested Board members to discuss the figures. Ms. Heenan explained the cost analysis was based on unaudited data, due to the fact it had been compiled during the end of the fiscal year and not all components were closed and finalized at the time. Chair Jung supported Dr. Hess' statement regarding the unsustainability of using ending fund balance to balance the budget.

Dr. Hess asked if the data could be converted to a form closer to classical accounting. Vice Chair Ratti noted there were different types of accounting utilized based on the type of organization, and opined the information the Board reviews should be set up the way the Auditors will review it. Chair Jung opined Dr. Hess' request was to receive an explanation he felt comfortable with, not to change the methodology.

Dr. Hess noted it appeared as though the WCHD had ended the fiscal year with a loss for each of the last five years, and that should be addressed. Chair Jung reiterated a one-one-one meeting with Ms. Heenan and potentially some other Board members should be held, perhaps inviting Mr. Dick so that he could explain the history of why that had occurred. She stated the rest of the Board members were uncomfortable with the previous budgeting methods as well, but things were headed in the right direction.

Vice Chair Ratti agreed that spending down the fund balance to maintain regular operations was not a sustainable strategy.

Dr. Novak moved to acknowledge receipt of the report. Mr. Silverman seconded the

motion which was approved six in favor and none against.

11. Discussion, acknowledge and possible direction to staff on the Phase One Cost Analysis for the Health District – Fundamental Review Recommendation #10

Staff Representative: Anna Heenan

Mr. Dick acknowledged the work Ms. Heenan had done on the report and the cooperative participation of the division directors and supervisors. He reiterated this was Phase One, and opined it was valuable that the information was pulled together in one place and staff now had the ability to draw comparisons against other programs within Nevada. He noted the report provides good information and some ideas about areas that may warrant further study.

Mr. Dick explained the time accounting limitations due to the software currently available causes the data to be imprecise. He noted it was good information on which to base further study on potential redistribution of resources, but cautioned against using it to make decisions about immediate actions. It was important to wait until the Phase Two analysis was finished so there was a more complete picture of the entire District.

Chair Jung agreed with his analysis. She summarized, stating the data was conservative at best, in terms of how much time staff is actually allocating to each hour. She supported Mr. Dick's suggestion that all phases should be completed prior to the Board making recommendations regarding reallocation of resources or making other alterations.

Mr. Silverman echoed Mr. Dick's statements regarding the amount of data the reports contained and being cautious of the level of information gleaned. He stated he did not agree with working to achieve other agency's benchmarks, but did agree the report provided a good opportunity to study certain areas that may need attention. He noted a statistic that was far removed from the benchmark and requested Mr. Dick's comments relative to his or the Board's comfort level about it.

Mr. Dick stated the disparities had been noted and discussed. He pointed out each division has a number of different program areas and responsibilities, which causes challenges to time accounting. He reiterated the data was allowing the opportunity to study potential reallocation of resources, but that the data itself should not be the only research method used in the decision-making process.

Ms. Heenan stated she was also concerned with the benchmark that Mr. Silverman had pointed out, and it was one of the reasons she had combined benchmarking with work activities. Studying it with that approach closed the gap. She also noted that benchmarking is difficult due to the different structures between health departments and their counties. She noted the new Accela software was expected to make time accounting more accurate.

Dr. Hess asked if the WCHD was required to inspect facilities and new development throughout the entire county, including the northern portion, and Mr. Sack replied that it was. Dr. Hess pointed out the large geographical area of Washoe County, and opined the travel time and associated costs to do those types of inspections should be documented.

Dr. Hess noted that no recommendations had been made for any types of cuts, and opined it would potentially be necessary to eliminate some positions as people retired. Chair Jung acknowledged his points and noted the other Board members were concerned as well. She stated the Fundamental Review (FR) had been conducted to help the Board make the difficult decisions.

Mr. Sack reiterated the challenges with Environmental Health benchmarking, to include

the diversity in structure between different agencies and the unique challenges faced by Washoe County, particularly in light of the tourism industry. He stated points made by Dr. Hess and others warranted further study.

Vice Chair Ratti asked Ms. Heenan to elaborate on the difference between the two types of data that narrowed the gap between the benchmark and actual. Ms. Heenan pointed out a table in the report that potentially indicated excess capacity but urged caution, since the methodology for tracking work activities was still being refined. The additional information gathered and researched thus far has proven that the excess is not as great as the data would suggest. Further study will be conducted to verify the findings. Vice Chair Ratti suggested the next phases align the analysis with the category so that the explanation was clearer.

Vice Chair Ratti opined there were three foundational tools that the Board needed prior to making decisions. Those were the needs assessment, the fundamental review, and the strategic plan. Until those were in place, any decisions making dramatic reallocations of resources was not a good idea.

Vice Chair Ratti noted the report referenced two different population ranges, and pointed out it was important to consider the service level for not only today's population, but what it could be in the future. Ms. Heenan stated she had included both levels to account for that and also tourism.

Mr. Dick noted another indicator that had been analyzed was the Southern Nevada Health District staffing, which had shown that staffing levels were not as far off as the national benchmark indicated.

Dr. Novak stated he appreciated the amount of work that had gone into the report. He acknowledged Mr. Sack's comments with regards to the physical size of the county and opined it put pressure on the available resources. He also agreed with the points made regarding the unique and substantial responsibilities of the WCHD and the wisdom of taking future population into account. Dr. Novak stated the efforts supported accreditation, as this type of research was one component that was taken into account, and the District was being very proactive.

Dr. Novak moved to acknowledge the report as presented. Mr. Silverman seconded the motion.

Vice Chair Ratti asked what Phase Two covered and when it could be expected. Ms. Heenan stated she would be combining Phases Two and Three and her goal was to have it completed and to the Board by December or January. She intended to have the complete process finalized prior to engaging the Board in the strategic planning process.

The motion was approved six in favor and none against.

12. Presentation, Discussion, and Possible Direction to Staff regarding a report on the implementation of Fundamental Review Recommendations. Take action to direct staff to continue with implementation of the plan as approved or direct staff to make changes as discussed.

Staff Representative: Kevin Dick

Mr. Dick noted this was the semi-annual, more detailed report regarding the progress made on implementation of FR recommendations. He noted highlights, including: 1) establishing a budget item for community-wide activities, 2) proposing moving Item 12, addressing tensions regarding overhead costs to the Parking Lot, and; 3) taking a greater leadership role, being addressed through discussions with the State regarding framing public

health policy for the next Legislative session.

Mr. Dick stated he was requesting direction from the Board regarding authorization to work with the State Medical Officer to pursue possibilities for positions in Legislation that the Board may want to support in the next session.

Dr. Novak asked if this action would be a combined effort between Washoe County and Southern Nevada Health District (SNHD). Mr. Dick replied he believed it would.

Vice Chair Ratti opined the report was geared toward Legislative issues, and while the item addressed broader leadership issues, this was a good place to start. She also suggested that if SNHD was not interested in a collaborative agenda, it should not be pushed. She stated it was important to review State mandates that may not have significant impact on public health. The goal of more funding should include a multi-tiered approach.

Mr. Silverman asked what the timeframe was for implementation of Accela. Mr. Dick stated the original go live date was December 21, but would potentially be pushed out to June. The City and County leaders had indicated that was unacceptable. Mr. Sack stated there was no date scheduled but all available resources were being dedicated to make it happen as soon as possible. He noted it was vital that the system be activated, as the current platform was at end of life.

Mr. Silverman asked if the proposal for the implementation of the new fees would be presented to the Board. Mr. Dick explained that staff will present the Business Impact Statement to the Board in November. The proposed fees would be then presented for adoption in December. The intention was to provide several different possible approaches to implementation, to include the implications of each, so that the Board has significant discretion in their direction. Mr. Silverman indicated his comfort level with the fee increase methodology would be supported by the research being conducted that would assure the funds are utilized optimally.

Mr. Dick noted the fees, compiled utilizing the Board-approved methodology, are not calculated based on how many full time employees are in a program, they are based on the amount of work required to provide the service.

Mr. Dick requested the Board accept the report, approve moving Item 12 to the Parking Lot and approve his participation in exploring opportunities for the 2017 Legislative session.

Chief Brown moved to approve the request as stated. Dr. Hess seconded the motion which was approved six in favor and none against.

13. Update on the NACCHO strategic planning grant proposal and Board discussion and possible action and/or direction regarding scheduling (a) special DBOH meeting or meetings to conduct a Governance Self-Assessment and/or work on the Strategic Plan.

Staff Representative: Kevin Dick

Mr. Dick explained a scope of work from OnStrategy has been received for work to conduct strategic planning. Additionally, a repeat of the Governance Self-Assessment had been briefly discussed at the previous meeting.

Mr. Dick noted the National Association of County and City Health Officials (NACCHO) grant proposal for funding to support the strategic plan had been submitted, but whether that funding was granted or not, the intent was to proceed with the contract. OnStrategy staff was available to conduct a Board retreat for strategic planning on the second Thursday of March or April. He requested the Board agree to hold both of those dates or

select one at this point for the retreat. Additionally, he requested the Board consider scheduling the Governance Self-Assessment (GSA) as a special meeting sometime prior to that, suggesting the second Thursday in January. That would be early enough that the results could be incorporated into the strategic plan.

Dr. Hess opined it would be helpful to have the analysis of Phases Two and Three completed prior to these activities taking place. Mr. Dick noted Ms. Heenan's target was to complete them both by December or January, so by the time they get to that point they will have those documents.

Vice Chair Ratti stated she was concerned with the timing. She noted a Board retreat was one step in the strategic planning process, and opined the OnStrategy contract included working with senior leadership to set up a structure and bring recommendations forward. She noted that the budgeting process was already well under way in March or April, and so the ability to impact any meaningful reallocation of resources would not come around again until the next fiscal year.

Mr. Dick explained that had been considered. Optimally, the Community Health Improvement Plan (CHIP) and the program cost analysis would be completed prior to initialization of the strategic planning process. If the funding from NACCHO is obtained, it would be presented in November and funds would be required to be expended by June 10, so that was driving the timeframe for strategic planning. If the funding is not obtained, then there will be more flexibility. He stated he did not see a way to move the strategic plan forward and have it be a meaningful process, considering the data needed for assessments for the planning, to meet the budget cycle and have it completed in April. Mr. Dick also noted that if the funding did not come in, there was no reason to rush the process. He would rather do it at the right time.

Vice Chair Ratti agreed. She noted that over the past few years the Board and District had established numerous processes that provided fundamental foundation pieces which provided them with data and information to actually make meaningful decisions.

Vice Chair Ratti pointed out that if the strategic plan workshop was conducted in April, they would not be able to make the resource adjustments in time to affect the FY17 budget, so the ability to align resources to that strategic plan will occur the next fiscal year. She stated that as long as the whole Board is comfortable with the fact this is a two-year build that gets the Board and the District to a much stronger space, then she was comfortable with it.

Chief Brown noted that a two-year strategic plan process should take the next Legislative session into account as there are time constraints for submittals.

Dr. Hess asked when the Health District budget was due to the County and Ms. Heenan stated that normally the budget requests should be submitted by February, and are typically finalized by April. Dr. Hess opined the budget meeting would need to occur at approximately the same time as the strategic planning meeting being discussed. Ms. Heenan pointed out budget adjustments can be made any time.

Vice Chair Ratti asked about the Board's enthusiasm level for a GSA. Chair Jung asked Mr. Dick whether the previous one had produced useful results and if he felt it would be valuable, or if the resources could be better utilized elsewhere. Mr. Dick opined the exercise had been beneficial to the Board and his recollection was that everyone felt it had been a worthwhile process. One of the FR recommendations was to repeat it. Mr. Dick suggested

the Board discuss it; there were three current members that had not participated.

Vice Chair Ratti stated she was interested in setting the Board up for success over the long term and establishing a cyclical pattern, rather than having many major activities happening at once, for both the Board and staff. One year might include the strategic plan, the next, fees, and then governance.

Chair Jung opined Vice Chair Ratti's direction for future agenda items or reports was to put together a logical series, with her input, over three-year cycles. This would help the Board to determine whether or not they wanted to conduct a GSA this year. Chair Jung opined it would help the Board and staff to achieve better focus if only one major priority at a time was being addressed. Mr. Dick stated he could bring a report back to the Board in October for consideration.

Vice Chair Ratti noted there may be more than three items that needed to be considered when structuring the logical cycle, such as the Legislative session. Mr. Dick pointed out the cycle may be five years rather than three, as the fees were tentatively scheduled to be reviewed every five years. Vice Chair Ratti indicated she was comfortable with whatever it needed to be.

Dr. Novak noted the substantial amount of activity and action that had been taken during the last year. He supported the cyclical approach and noted there would occasionally be items that would need to be addressed out of sequence. He suggested the first round may need to be on a nine-month schedule since so many items were being addressed, but the longer-term plan would create a better balance.

Mr. Dick opined he should bring the item back to the Board in October. He stated that his understanding of the Board's opinion thus far was that if the NACCHO funding was not received, the strategic planning process schedule could be extended.

Vice Chair Ratti moved to direct the District Health Officer to bring a plan to the October meeting for the Board to consider. Dr. Hess seconded the motion which was approved six in favor and none against.

14. Review, discussion and possible action and/or direction to staff regarding the provisions for a written notice of termination 15 days prior to the date of expiration in the Interlocal Agreement (ILA) entered into by the Cities of Reno and Sparks and Washoe County for the creation of the Health District

Staff Representative: Kevin Dick

Mr. Dick explained the item had been requested by Dr. Novak. Several months ago the Board had reviewed the ILA, and at that meeting, Dr. Novak had expressed his concern about the clause in the ILA that allows for any of the jurisdictions to withdraw from the agreement with 15 days' written notice.

Mr. Dick noted that when the item had been previously addressed, there had been discussion about considering it and whether there was any feedback from the jurisdictions. Ultimately it had been left unresolved.

Chair Jung asked what had occurred when Mr. Dick reached out to the other jurisdictions. He noted the Board members had agreed to do that, but he certainly could.

Dr. Hess suggested the two elected members probably had a sense of how their agencies would feel about the idea. He opined 15 days was quite short but pointed out that clause had been in effect as long as the Health District had been in existence. He asked if 15 days or

some other length of time was a standard for governmental entities. Deputy District Attorney (DDA) Admirand agreed it was very short as far as contracts were concerned, particularly with regards to a contract for County-wide services. It was not enough time for jurisdictions to be able to be able to put programs in place to provide the services themselves.

Vice Chair Ratti opined the 15-day clause referred to a required notice prior to termination, but it did not state the agreement terminated in 15 days. She requested clarification as to when the termination actually happens. She agreed completely that if it was 15 days from notification to termination that was impractical.

Vice Chair Ratti asked whether the Board wanted to open the discussion. The topic had been referred to as being a way for any one jurisdiction to get what they would like on any number of topics. She reiterated the 15 days was short but noted she did not have a sense of how the County or Reno would handle it, and any one party could take the opportunity and use it to create numerous challenges. She suggested starting the discussions with the County and city managers was the right way to go.

Dr. Hess opined the 15th day was the day of termination and DDA Admirand agreed.

Chair Jung opined the agencies would not want to address the item at this time as it was not a priority.

Mr. Silverman suggested they should ask if there were any reason why the Board would want the ILA to have the 15-day termination. Chair Jung suggested staff utilize resources to study best practices for health department ILAs. She requested a report be brought back to the Board, to include the potential benefits and difficulties if the contract were reopened. Vice Chair Ratti suggested utilizing local inter-jurisdictional agencies as research resources as well. She went on to state there should not be a 15-day exit clause and it was a valid concern. The question was whether or not it should be addressed at this time.

Chief Brown moved to direct the District Health Officer to meet with the city and County managers. Mr. Silverman seconded the motion which was approved six in favor and none against.

15. Discussion of Process and Presentation of Evaluation Forms for District Health Officer's Annual Review and Possible Direction to Staff

Presented by Kitty Jung

Chair Jung stated she had encouraged Mr. Dick to compile a representative list of the people who should be evaluating him, and that had been provided to the Board. Members were welcome to add or eliminate names as they wished. The evaluation questions were the ones currently being asked for the County Manager's evaluation, tailored for the District Health Officer. Chair Jung had approved it as a draft and was open to feedback.

Mr. Dick noted it would be conducted via Survey Monkey. He pointed out some additions and updates to the list of reviewers. Dr. Hess asked if fire department members were included and Mr. Dick explained they were not, as the city managers were included and they oversee the fire departments. He noted he had removed Mr. Gubbels from the list, because he did not believe it was appropriate to send it to an agency he was responsible for regulating.

Vice Chair Ratti moved to approve the format and process for the evaluation of the District Health Officer to include distribution of the survey via Survey Monkey, based on the County's typical process for the County Manager. Dr. Novak seconded the

motion which was approved six in favor and none against.

16. Recommend to approve a 3% Cost of Living Adjustment (COLA) in base wage for the District Health Officer position, retroactive to July 1, 2015

Staff Representative: Laurie Griffey

Chair Jung stated she had asked the District Health Officer to wait until the BCC approved the same COLA for all other staff prior to requesting it from the Board. It is standard procedure for non-represented management staff to receive the average adjustments as the staff who are Union represented. All of the represented employees will also receive retroactive payments.

Chief Brown moved to approve a 3% Cost of Living Adjustment (COLA) in base wage for the District Health Officer position, retroactive to July 1, 2015. Dr. Hess seconded the motion.

Vice Chair Ratti thanked Chair Jung for working to be sure the issue was handled equitably. Chair Jung opined Mr. Dick deserved the increase, not just because everyone else received it, but because he is performing in a manner which is above and beyond what is required.

The motion was approved six in favor and none against.

17.*Staff Reports and Program Updates

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

Mr. Wolf stated he had nothing to add to the report but was available to answer questions.

- B. Community and Clinical Health Services, Steve Kutz, Director
Fetal Infant Mortality Review (FIMR) Program, Divisional Update, Program Reports

Mr. Kutz reported flu shots would be available for the District Board of Health members in conjunction with the October Board meeting.

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

Mr. Sack noted staff was continuing work on the Salmonella outbreak involving cucumbers.

Mr. Silverman noted he had been following media reports on this topic and found it to be confusing. He asked how the media obtained the information. Mr. Sack replied it had come from the Health District and the State.

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

Dr. Todd noted there were current cases involving two types of Salmonella. WCHD had been the first in the nation to identify that the Mexican cucumbers were responsible for the outbreak of one of the two strains.

Dr. Todd noted this time period was typically marked by cases of gastroenteritis. Norovirus is easily transmittable and spreads quickly. Currently some schools and a daycare center are affected.

Dr. Todd explained the State had made mass gathering guidelines a legal mandate, which are stronger than currently existing WCHD guidelines. Special event organizers must provide for EMS services based on the size of their event.

Vice Chair Ratti noted that earlier in the meeting the mass gathering plans were considered a guideline, but now it was being clarified they are a mandate. Dr. Todd acknowledged that was correct.

Vice Chair Ratti asked who was responsible for enforcing that mandate. Dr. Todd explained the Health District provides guidance regarding how they may comply, but the State EMS program has enforcement authority. Vice Chair Ratti asked how the application for the event got to the State to ensure compliance. Mr. Sack noted the State would not be involved in the review process; they would be involved if there was a complaint. The application would not be approved by the Health District unless all concerns were met.

Vice Chair Ratti asked if the local jurisdictions had been made aware of the changes. Ms. Conti stated Mr. Romero informed her that he had realized that the guidelines were now a mandate. She explained her staff member Brittany Dayton had met with all of the jurisdictions to let them know about the guidelines, and provided documentation that helped clarify the regulations. During meetings with the City of Reno Special Events Committee and Hospital Awareness, Washoe County Emergency Medical Services program (WCEMS) staff had made it clear that they only provide recommendations based on State law, they do not enforce. The permitting agency is responsible for ensuring that they are followed. WCEMS staff is in discussion with State EMS regarding inspections of large Washoe County events.

Vice Chair Ratti asked what size event triggered the requirements and Ms. Conti stated she did not know but could find out. Chief Brown explained the issue had been addressed at the 2011 Legislature and Southern Nevada had been interested in duplicating what Washoe County, Reno and Sparks was doing regarding large gatherings. The Legislature did increase restrictions and some agencies were in opposition. He opined it was something that should be monitored in the future, particularly during the next Legislative session.

Ms. Conti explained one area that had become stricter was the requirement for ambulance service. It was now required at smaller venues than previously. Chief Brown added that another reason to monitor it was that there were no set fee schedules when it comes to how much agencies can charge to the events for the standbys. Some of the events are beginning to experience difficulty in covering the costs.

Ms. Conti noted an outside company had come in and underbid the local responders for an event. Vice Chair Ratti asked if they would be allowed to do that under the Franchise Agreement (FA). Ms. Conti stated WCEMS staff had strongly discouraged other ambulance agencies establishing services in the area because Nevada Revised Statutes (NRS) states that the staged ambulance must have the ability to transport to a hospital. The FA dictates that only REMSA may transport. Any company may provide the medical services.

- E. Office of the District Health Officer, Kevin Dick, District Health Officer
Community Health Improvement Plan, Truckee Meadows Healthy Communities, Quality Improvement, Fundamental Review, County Strategic Plan Goals, Regional Emergency Management Accreditation Program (EMAP) Review, West Nile Virus, Riverbelle Mobile Home Park, Other Events and Activities and Health District Media Contacts

Mr. Dick reviewed his report, noting he and the leadership team had met with the new Administrator for the Nevada Division of Public and Behavioral Health, Ms. Cody Phinney, to discuss a partnership between the two agencies.

18.*Board Comment

Dr. Novak stated he appreciated the discussion about the 15-day exit clause. He referred to the minutes of the August 27, 2015 meeting, clarifying that he had been referring to, and wanted to be sure did not get dropped, was a 30-day exit clause with REMSA. He opined if that action were taken, it could activate an immediate public health crisis. Chair Jung stated that needed to be placed on an agenda.

Vice Chair Ratti requested an agenda item be presented to ask staff to monitor the implementation of the special event EMS mandates so that the Board can provide direction and get regular check-ins with the local jurisdictions to see how it is proceeding.

Chair Jung stated she had been considering aspects of regional population growth. She requested Council's analysis and an explanation of what the Board could do to establish and implement an impact fee on new development to bring in revenues to support the necessary additional Health District activities. She stated it was not a request that needed to be handled as quickly as possible, but she requested it be done prior to the end of the year. She had requested her staff review the same question with regards to the schools.

Chair Jung instructed Ms. Spinola to include the name of the person who requested a meeting item in parenthesis at the end of the item.

19. Emergency Items

None.

20.*Public Comment

Any person is invited to speak on any item on or off the agenda during this period. Action may not be taken on any matter raised during this public comment period until the matter is specifically listed on an agenda as an action item. Limited to three (3) minutes per person.

21. Adjournment

At 3:09 p.m., Dr. Novak moved to adjourn. Chief Brown seconded the motion which was approved six in favor and none against.

Respectfully submitted,



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

Dawn Spinola

Dawn Spinola, Administrative Secretary
Recording Secretary

Approved by Board in session on October 22, 2015.