The Washoe County District Board of Health met in regular session on Thursday, October 23, 2014, in the Health Department South Conference Room, 1001 East Ninth Street, Reno, Nevada.

1. Call to Order, Pledge of Allegiance

   Acting Chair Jung called the meeting to order at 1:00 p.m.

   Jim Gubbels led the pledge to the flag.

2. Roll Call

   The following members and staff were present:

   Members present: Vice Chair Kitty Jung, Acting Chair
                   Dr. George Hess
                   Julia Ratti [arrived at 1:15 p.m.]
                   David Silverman
                   Neoma Jardon

   Members absent: Chair Matt Smith
                    Dr. Denis Humphreys

   Staff present: Kevin Dick, District Health Officer
                  Leslie Admirand, Deputy District Attorney
                  Charlene Albee, Division Director, AQM
                  Steve Kutz, Division Director, CCHS
                  James English, Supervisor, EHS
                  Tony Macaluso, Supervisor, EHS
                  Anna Heenan, Administrative Health Services Officer, AHS
                  Randall Todd, DrPH, Director, EPHP
                  Dawn Spinola, Administrative Secretary/Recording Secretary
3. Public Comment

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

4. Approval/Deletions to Agenda

Acting Chair Jung requested Agenda Item 13 be heard immediately after Agenda Item 7.

Dr. Hess moved to approve the amended agenda for the October 23, 2014, District Board of Health meeting. Councilmember Jardon seconded the motion which carried four in favor and none against.

5. Approval of Draft Minutes

Mr. Silverman moved to approve the minutes of the September 25, 2014 District Board of Health regular meeting as written. Dr. Hess seconded the motion which carried four in favor and none against.

6. Recognitions

Presented by Mr. Dick and Acting Chair Jung

A. Years of Service
   1. Angela Penny, 10 years, hired 7/15/04 – CCHS
      Mr. Dick congratulated and thanked Ms. Penny and presented her with a Certificate of Appreciation.
   2. Josephina Rivera – 15 years, hired 9/1/1999 – CCHS
      Mr. Dick congratulated and thanked Ms. Rivera and presented her with a Certificate of Appreciation.

B. Retirement
   1. Sheryl Nolte – 23 years – EHS
      Mr. Dick presented Ms. Nolte with a memorial clock in appreciation for her many years of service.

C. New Hires
      Mr. Mike Wolf discussed Mr. Emerson’s background and stated he had clearly emerged as the top candidate among a large group of interviewees.

D. Promotions
   1. Christina Conti - from Public Health Emergency Response Coordinator to Emergency Medical Services Program Manager 10/6/14
      Mr. Dick stated a national search had been conducted and Ms. Conti had risen indisputably to the top of the list.
E. New Staff

1. Guadalupe Gomez – CDC Associate 10/6/14
2. Julie Baskin – CDC Associate 10/6/14

Ms. Stacy Hardie explained how the Health District became involved with the Public Health Associate Program and stated both associates should be very proud of their accomplishments.

7. Consent Agenda
A. Budget Amendments / Interlocal Agreements
   1. Approve the abolishment of one vacant 40 hour-per-week benefitted Human Services Support Specialist II position (#70002305)

   Dr. Hess moved to approve. Councilmember Jardon seconded the motion which was approved five in favor and none against.

13. Introduction, discussion, and possible direction to staff regarding new fees associated with Health District activities that are not currently on the Fee Schedule and beginning the process of updating of the existing fee schedule with the most current salaries, benefits, and indirect cost rates that have been approved for Fiscal Year 2015.
Staff Representative: Mr. Dick

   Mr. Dick introduced the item and pointed out that at the last meeting, the Board had directed staff to develop and bring back a list of proposed fees for services that are provided and not currently charged for, along with the methodology for how the fees were calculated. The fee calculation included 25 percent of the County indirect cost rate, which was a policy decision made by the Board in 2013. At Board direction, after initial Board review, staff would take the proposed fees out to public workshops and then bring them back to the Board for adoption.

   Acting Chair Jung clarified the Board was not approving the fees at this time; they were only providing direction to staff.

   Dr. Hess expressed concern with Numbers 2, 3 and 7. Number 2 had to do with one tax-supported entity charging another; in this case, it would be the Washoe County School District and that left him feeling uncomfortable. Number 3 referred to underground storage tanks and he asked if that also covered home tanks. Mr. Dick clarified it did not. Mr. English explained the fees covered the current scope of work required to ensure the systems are installed properly and the Health District enjoyed industry support for the proposed fee.

   [Councilmember Ratti arrived at 1:15 p.m.]

   Dr. Hess opened up discussion regarding Number 7, Cost Recovery for Foodborne Illness Outbreaks. He felt it was the Health District’s duty to conduct inspections and it had the ability to close or fine any facility that did not comply with regulations. He opined charging the facility an additional hourly wage to investigate an outbreak was unwarranted.

   Acting Chair Jung explained Board direction, with a Fundamental Review endorsement, had encouraged the fee review. The Health District has been subsidizing many businesses as
it has not recouped the full cost of required staff time. The fees were not intended to be a new revenue source.

Mr. Dick reiterated the item was a presentation of a menu of potential fee options, developed at the recommendation of the Fundamental Review. He opined the policy decisions should be made through Board discussion and staff was simply providing options as directed. Acting Chair Jung acknowledged Dr. Hess’ points.

Mr. Silverman suggested the process be fully vetted early on so the District could gain the support of the affected partners and the community. He opined the language might be revisited. Councilmember Jardon agreed.

Dr. Hess suggested the facility owner be charged a reinspection fee prior to being able to re-open after a violation.

Mr. Dick opined that if the Board objected to any of the fees they should be pulled now, rather than being carried forward to the public workshops.

Councilmember Ratti summarized, noting that following the Fundamental Review, staff was directed by the Board to brainstorm fee policy for cost recovery. Staff had done that and was now asking for Board input. The Board had the option to direct staff to take all or some forward for public review. Mr. Dick acknowledged her description was accurate. Councilmember Ratti further clarified, opining Mr. English was not bringing forward a recommendation to implement, only the possibilities.

Councilmember Ratti went on to review the difference between a fine and a fee. A fine is a punishment for a violation, not a cost recovery, being utilized to encourage someone to alter their behavior. A fee is a business revenue source that is charged for a business service that is not supported by taxes. She agreed that taking it to a workshop may not make sense until after it was more fully vetted by the Board.

Councilmember Ratti asked if a system of fines was already in place, particularly for the repeat offenders. Mr. English explained that was not currently done. She acknowledged Dr. Hess’ concerns and encouraged dialogue. Dr. Hess reiterated his opinion this type of service should be covered by taxes already paid by the citizens.

Councilmember Ratti opined local tax revenue for local government is not sufficient to provide the needed services. As local government cannot raise taxes, additional revenue must come from fee increases. She suggested the small amount of the fee did not warrant the current level of discussion. Mr. Macaluso explained the primary goal would be to identify the offender. That information would be confirmed through laboratory testing. The proposed fee is an hourly charge, not one-time. Some of the larger outbreaks may involve hundreds of hours of staff time, which would include overtime hours.

Mr. Silverman opined it was important to keep the momentum of the Fundamental Review going and to be careful not to spend the time and dollars on pursuing a potential fee that will potentially be rejected. It was important to recoup some costs, but they needed to analyze the best way to do that with each of the proposed fees. He reiterated his concerns about how some of them, particularly the one in question, was written.

Dr. Hess stated he generally had no problem with most of the proposals. He reiterated his opinion the offender should be charged a fee to be relicensed and reopened.
Mr. English explained that the fees were modeled after a fee currently being charged for validated hazardous materials complaints. Typical annual fees take reinspections into account, so the intent was not to penalize anyone, just to recoup costs for repeat offenders.

Councilmember Jardon explained that the City of Reno faced the same challenge and their hands were legally tied to a process of fining. They had considered imposing a repeat offender fine through the business license process. DDA Admirand explained that by statute, the Health District fees were tied to permits, so if there was a way to tie reinspections with statistical data to those permits to issuing and renewing the permits, there is a possibility of looking into that approach.

Mr. English explained the Health District does not have the authority to issue permits to the hotels and motels. The only current option available to address repeat offenses is to ask Reno, Sparks or Washoe County to pull their business licenses, which puts the pressure on them to enforce Health violations. He requested guidance from the Board regarding the possibility of splitting the fees for verified complaints and the foodborne illness outbreaks.

Councilmember Ratti opined they should be broken out, and asked if there was value to having stakeholder and staff input.

Mr. Silverman asked what options there were to impose penalties for repeat offenders as opposed to implementing fees across the board. He is in favor of recouping costs to offset expenses, but opined the approach should be to minimize expenses in specific areas if possible, potentially going as far as repealing a license after a specific number of offenses. DDA Admirand stated that statutorily the District is restricted to criminal penalties. There are no current provisions for administrative fines. The District can issue criminal misdemeanor citations and revoke or suspend permits. She was unaware of a provision that provides the ability to attach a fee to a criminal penalty. The fee would need to be tied to the permit and the reinspection and reissuance of the permit.

Councilmember Ratti noted models where fees are attached to criminal actions, not in the Health District, but elsewhere, as a fee for service. The City of Sparks gives a number of warnings, but there is no final warning, the business is simply closed. There is no opportunity to statutorily scale up the level of warnings either at the City or the Health District. DDA Admirand explained that scaled fees are determined by the criminal courts, not through the administrative actions of the Health District, so it would be necessary to find a way to tie them into current regulations.

Councilmember Jardon suggested an escalating reinspection fee. DDA Admirand stated that could be looked at.

Acting Chair Jung summarized the direction of the Board, directing staff to review the potential of the escalation of the proposed reinspection fees. She opined the fee language was not clear, but she felt it was important to receive stakeholder input, and to inform the community how and why the fees had been established. She suggested it was also important to check with Epidemiological staff to determine at what point should the District be asking citizens to pay additional fees for fundamental disease prevention and control.

Mr. English asked if the Board would like to see a revised version of the language for #7 prior to taking it out for public input. Acting Chair Jung stated they would, with more than
two options. Mr. Silverman asked that all of the proposed fees be looked at to be sure they were clear.

Mr. Dick requested the Board email any suggestions to him. He agreed there was merit in separating a verified complaint investigation fee and an outbreak investigation fee. He asked DDA Admirand if the District had the authority to impose an escalating fee, as his understanding was that the charges could not exceed the costs for providing the service, and that would be charging something additional. DDA Admirand clarified it is restricted to the cost of the inspection, so if it was an escalating fee, it needed to reflect escalating time, if that could be measured.

Councilmember Jardon asked if the hourly inspection fee could double or treble based on the number of reinspections. DDA Admirand explained the District would have to compile statistics to justify the increases in costs. Councilmember Ratti pointed out the inspection takes the same amount of time no matter how many times it is conducted, so it was hard to escalate the fee.

8. Regional Emergency Medical Services Authority
Presented by Jim Gubbels, President, REMSA


Mr. Gubbels presented the report for September, 2014. He reported Priority One compliance in Zone A was 92 percent. For Zones B, C and D, it was 97 percent.

Average Priority One response times in minutes was 5:23 for Reno, 6:01 for Sparks and 10:29 for Washoe County. Average Priority Two response times in minutes was 5:54 for Reno, 7:02 for Sparks and 10:19 for Washoe County.

Average bill for September was $1,073, bringing the year to date total to $1,070.

Mr. Dick noted that under the new Franchise Agreement, REMSA is providing compliance requirement response time. Additionally they are reporting additional response information so that the District may fulfill the responsibilities under the new Emergency Management Services (EMS) oversight program. REMSA has recently begun utilizing new software which has caused some of the response information transmission to be delayed. The new format for reporting has been provided to the Health District (HD) EMS staff, but they are concerned that all of the data is still not being received.

Mr. Dick had discussed his concerns with Mr. Gubbels and the REMSA board regarding uninterrupted receipt of the data. He will be following up with Mr. Gubbels to establish a timeline.

Mr. Gubbels explained the Health District will be able to review real-time data online through a company called First Watch. The Priority One calls are set up and HD EMS staff had attended an inservice training. Some corrections had been suggested. Once the Priority One call data is going through the system correctly, the other types of calls will be activated.

Councilmember Ratti asked if the software had a reporting function. Mr. Gubbels explained the data can be downloaded in Excel format and manipulated as necessary to
extract the required information. REMSA was working with the Fire departments to share data through compatible software, but theirs required updates that had yet to be completed.

Councilmember Ratti asked about the status of the Automatic Vehicle Locator system. Mr. Dick stated that information was not currently available. Mr. Gubbels explained that system would connect into the communication system between REMSA and the Fire Departments.

Mr. Gubbels pointed out that First Watch was a nationwide program, so the Ebola crisis has slowed their ability to react to his requests for service.

Mr. Gubbels reported the average bill for August, 2014 was $1,068, bringing the year to date total to $1,069. That item had not been included during the August report presented to the Board on September 25, 2014.

*B. Update of REMSA’s Community Activities Since August, 2014

Mr. Gubbels reported REMSA had hosted the 2nd Annual West Coast EMS Memorial Bike Ride. Riders rode from Reno to San Francisco. REMSA offered support to the riders along the way.

*C. Presentation
Health Care Innovation Award Community Update
Presented by Brenda Staffan

Ms. Staffan presented the report, which outlined Community Health Programs made possible by a Health Care Innovation Award (HCIA) Grant from the Department of Health and Human Services. The programs included Ambulance Transport Alternatives, Community Paramedicine and a Nurse Health Line, which she explained and provided the success data for. The goal was to find a way to keep the programs going after grant expiration. A final report of outcomes will be developed at that point.

[Councilmember Jardon departed the meeting at 2:28 p.m. and returned at 2:32 p.m.]

Dr. Hess and Councilmember Ratti suggested and encouraged relative cost analysis and comparisons to similar services provided elsewhere, to include savings opportunities. Ms. Staffan explained how those activities were currently being or were planned to be implemented.

DDA Admirand noted the Board had not taken action on Item A, but requested that action be tabled until the next meeting as the agenda incorrectly listed the item as the August review rather than September.

9. Appointment of Dr. Andrew Michelson, Emergency Room Physician and Ms. Katrina Heyder or Ms. Terri Ward, as Hospital Continuous Quality Improvement Representative to the Regional Emergency Medical Services Advisory Board
Staff Representative: Mr. Dick

Mr. Dick presented the staff report. He explained the District had solicited for parties interested in participating and reviewed the list of potential members. He opined both CQI representatives were qualified but recommended Ms. Ward as she had more experience, is a
resident of Washoe County, and that the hospital where she is employed recently won the Nevada Hospital Association’s Quality Improvement Award. Therefore, he recommended Dr. Michelson and Ms. Ward for the Advisory Board.

**Dr. Hess moved to approve the appointments as recommended.**

Mr. Dick pointed out Dr. Michelson was with St. Mary’s and Ms. Ward was with Northern Nevada Medical Center, so by selecting her, two hospitals were represented.

**Councilmember Ratti seconded the motion which was approved five in favor and none against.**

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**10. Presentation on Enterovirus D68 and Ebola Preparedness Activities**

**Staff Representatives: Mr. Dick and Dr. Todd**

Mr. Dick opened the presentation by noting Enterovirus D68 (ED68) has been spreading throughout the nation but Nevada is one of the few remaining states with no confirmed cases. The District is awaiting lab results on a possible case. ED68 is more severe than other Enteroviruses and has particularly affected children.

Mr. Dick explained the District had been very active with Ebola preparedness, including working with the EMS and healthcare communities.

Mr. Dick discussed the local Frontier Airlines passenger who may have been exposed to Ebola and the steps being taken to actively monitor their health.

Dr. Todd provided a brief educational presentation on Enterovirus D68 and Ebola. He explained the three-phase approach that the Health District was taking to prepare for an Ebola outbreak in Washoe County. Phase One, in which there are no cases, involves communication, training, plan review and refinement. Phase Two, activated when there are suspected cases, involves implementing isolation protocols which may trigger legal issues, as well as submitting specimens for testing. Phase Three, activated when there are one or more probable or confirmed cases, involves continuing isolation, contact tracing and potential quarantine.

Dr. Todd further explained that during Phase One, the District had sent out several Physician Alerts, pursued legal review on isolation and quarantine to establish a process, met with EMS providers, met with infection preventionists from the hospitals and organized an informational meeting for members of the business community.

Councilmember Jardon complimented Mr. Dick on his ability to field questions during a media event organized at the Nevada Health Conference. She asked what community members can do to help with Ebola and asked about the importance of getting a flu shot. Dr. Todd explained the flu will kill more people in the US than Ebola. The early symptoms of flu and Ebola are almost identical, so it will assist the health care system if people are not presenting with flu-like symptoms and triggering the process of trying to determine if it is flu or Ebola. As far as what individuals can do, they can stay informed. The Health District is pushing out as much information as possible.
Councilmember Jardon agreed information is key and since more information was getting out, people were beginning to calm down. She noted she was pleased that the District was utilizing Facebook and Twitter.

Dr. Todd reviewed Health District recommendations for reducing the spread of contagious illness.

11. Discussion and Possible Appointment of Mr. Sergio Guzman to the Food Protection Hearing and Advisory Board (FPHAB)
Staff Representative: Mr. Macaluso

Mr. Macaluso recommended Mr. Guzman be appointed to the Food Protection Hearing and Advisory Board. He explained Mr. Guzman works as an Executive Steward for the Atlantis Casino and would bring several years of experience to the Board.

Acting Chair Jung moved to appoint Mr. Guzman. Councilmember Jardon seconded the motion which was approved five in favor and none against.

Staff Representative: Ms. Heenan

Ms. Heenan presented the Financial Review.

Councilmember Jardon moved to accept the review as presented. Dr. Hess seconded the motion which was approved five in favor and none against.

14. Discussion and Possible Direction to Staff Regarding the Change in Scope and Expected Outcomes that have been discussed with the Kansas University Center for Sharing Public Health Services regarding the Robert Wood Johnson Foundation Cross Jurisdictional Sharing Grant.
Staff Representative: Dr. Todd

Dr. Todd presented the staff report. He reviewed the history of the grant and explained the original intent had been to facilitate cross-jurisdictional sharing of health services between northern Nevada counties. It had been determined that a more feasible and appropriate use of the funds would be to provide assistance to the Churchill County, which is the County best poised to revitalize their Board of Health and engagement in public health activities. This could then allow the other rural and frontier counties in the project area to benefit from an opportunity to observe the Churchill County Board of Health in action and an opportunity to discuss how the use of local data might be used to engage leadership within their own communities.

Councilmember Ratti motioned to approve the change in direction. Councilmember Jardon seconded the motion which was approved five in favor and none against.
15. Presentation, Discussion, and Possible Direction to Staff regarding quarterly report on implementation of Fundamental Review Recommendations
Staff Representative: Mr. Dick

Mr. Dick presented the staff report. He requested direction from the Board regarding providing a detailed report semi-annually rather than quarterly.

Mr. Dick noted he had challenged management with moving forward with the recommendations and was very proud of how they had responded and the work they had done. He noted they were at capacity with the Ebola preparedness activities, so there might be some impacts on forward progress.

The Land Development User Group, in cooperation with the Builders Association of Northern Nevada and the Nevada Division of Environmental Protection, is on a path to move forward with proposed to the State Environmental Commission that will resolve longstanding problems with the grading permit and final map process.

The Community Health Assessment (CHA) is still on target for completion by the end of the year.

Development of performance metrics has begun.

The District is reassessing its approach to Quality Improvement (QI). The QI training that management is currently undergoing emphasizes how some tools can be used on a daily basis to help make the best decisions. Staff will go through the same training beginning early next year. Simpler tools and less process-oriented approaches are being created so that QI is more understandable for staff and can be integrated into daily tasks.

Councilmember Jardon was hesitant to recommend the bi-annual detailed report as there would be new Board members in January. She suggested the new members be oriented individually and starting the bi-annual report schedule after that. Mr. Dick suggested the new members be briefed and then to determine whether the briefing should go to the full Board or individually during orientation. He will continue to highlight activities in his monthly report, which will include the dashboard.

Councilmember Jardon motioned to approve bi-annual staff reports with monthly dashboard reports. Mr. Silverman seconded the motion

Acting Chair Jung clarified the motion was to include bi-annual full staff reports, monthly dashboard updates, and a complete explanation of the Fundamental Review for new members.

The motion was approved five in favor and none against.

16. Annual Performance Evaluation of the District Health Officer
Presented by: Acting Chair Jung

A. Discussion of the Evaluation Results and Possible Approval of the Board’s Recommendation Specific to the Annual Performance Evaluation of the District Health Officer
Acting Chair Jung stated that she is very proud of Mr. Dick’s accomplishments. She opined his administrative skills, stability and fresh viewpoint have been beneficial for the Health District.

Mr. Dick pointed out the Division Directors had taken a risk with him also and he opined they were a great team. Their support, participation and engagement has helped Mr. Dick and the District achieve the desired objectives.

Councilmember Ratti asked if Mr. Dick’s review was available as a public record and DDA Admirand stated it was. Councilmember Ratti agreed with Acting Chair Jung’s comments and opined substantial progress had been made. She expressed her desire to see the momentum keep going, stated she is thrilled with Mr. Dick’s work and thanked him for his leadership.

Councilmember Jardon stated that Mr. Dick’s communication is very effective and appreciated regarding emergency situations in the community.

Mr. Dick acknowledged Mr. Ulibarri for his assistance regarding public messaging guidance and organizing appearances.

Mr. Silverman commended Mr. Dick for acknowledging his staff.

DDA Admirand clarified this was an action item and explained the employment contract contemplates and anticipates is that the Board, with Mr. Dick’s input, adopts priorities and expectations for him for the upcoming year.

Mr. Silverman recommended Mr. Dick continue the momentum of progress he has made as the District Health Officer.

Dr. Hess recommended Mr. Dick take some Continuing Education classes to gain a broader knowledge of public health.

Councilmember Jardon recommended Mr. Dick keep up the new communication venues such as Facebook, Twitter and any other means available.

Acting Chair Jung recommended that Mr. Dick resolve internal staffing issues within six months.

Councilmember Ratti recommended Mr. Dick work on the strategic plan, fee process, transparent EMS data and fostering a stronger relationship with the county.

Mr. Dick explained the Strategic Plan would be developed based on the results of the the Community Health Assessment and the Community Health Improvement Plan (CHIP). The CHIP was anticipated to be completed by approximately September 2015.

Acting Chair Jung summarized the results of the conversation, noting eight recommendations:

1. Continuous quality improvement
2. Continuing education in public health
3. Using social media for emergency communication
4. Changing the culture of the Health District to focus on the future
5. Strategic plan
6. Review and rework fee process
7. Transparent EMS data
8. Improve, continue and foster relationship with the county.

Acting Chair Jung urged the Board members to participate in the last activity as well.

**Councilmember Ratti moved to approve the evaluation and the recommendations as listed. Dr. Hess seconded the motion which was approved five in favor and none against.**

B. Consideration and Possible Approval of Compensation and Benefits for the District Health Officer.

Acting Chair Jung stated Mr. Dick has requested a 5% merit increase, and that it was her understanding that all employees had received a 5% merit increase as well. His request followed direction provided by the Board. She opined his performance was above satisfactory.

**Acting Chair Jung motioned to approve the merit increase. Dr. Hess seconded the motion which was approved five in favor and none against.**

17. Election of the District Board of Health Chair for 2015-2016

Dr. Hess nominated Acting Chair Jung for the seat. Councilmember Ratti seconded the nomination which was approved four in favor and none against.

Acting Chair Jung accepted the nomination.

18. Election of District Board of Health Vice Chair for 2015 - 2016

Mr. Silverman nominated Councilmember Ratti for the seat. Councilmember Jardon seconded the nomination which was approved four in favor and none against.

Councilmember Ratti accepted the nomination.

19. Staff Reports and Program updates

A. Director, Air Quality Management

Ms. Albee stated she had nothing to add, but was available to answer any questions.

Dr. Hess asked why the current burn code is yellow. Ms. Albee stated that at this time the public may burn at will, the burn code will not take effect until November 1st.

B. Director, Community and Clinical Health Services

Mr. Kutz stated he had nothing to add, but was available to answer any questions.

C. Director, Environmental Health Services

Mr. Macaluso stated he had nothing to add, but was available to answer any questions.

D. Director, Epidemiology and Public Health Preparedness
Dr. Todd stated he had nothing to add, but was available to answer any questions.

E. District Health Officer, Office of the District Health Officer

Mr. Dick reminded the Board it would be necessary for them to appoint a new member to the REMSA board. In the past, staff has advertised the position, and he offered to provide that service again. He requested the Board recommend any potential candidates.

20. Board Comment

Councilmember Ratti explained the Parks and Recreation Board was working on a policy regarding how to determine if the air quality at a park was unhealthful for outdoor activities. They were hoping the Health District would be willing to take on a more active role regarding making the recommendation in those situations, even if it was just providing a reference table.

Mr. Dick explained the Air Quality Index was accessible, but the measurements are taken from fixed monitoring stations. The Health District also provides guidance regarding making the decision whether or not to hold a sporting event. The difficulty is the variation in air quality from location to location. The guidance is designed to help someone at a specific location make a decision. AQM staff could work with Sparks staff on a daily basis in those conditions.

21. Emergency Items

None.

20. *Public Comment

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

23. Adjournment

At 4:07 p.m., Councilmember Ratti moved to adjourn. Councilmember Jardon seconded the motion which was approved five in favor and none against.

Respectfully submitted,

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

Dawn Spinola, Administrative Secretary
Recording Secretary

Approved by Board in session on ____________, 2014.