Washoe County District Board of Health
Meeting Minutes

Thursday, March 24, 2016
1:00 p.m.

Washoe County Administration Complex
Commission Chambers, Building A
1001 East Ninth Street
Reno, NV

Members
Kitty Jung, Chair
Julia Ratti, Vice Chair
Oscar Delgado
Dr. George Hess
David Silverman
Dr. John Novak
Michael D. Brown

1. *Roll Call and Determination of Quorum
   Chair Jung called the meeting to order at 1:00 p.m.
   The following members and staff were present:
   Members present: Kitty Jung, Chair
                   Julia Ratti, Vice Chair (arrived at 1:04 p.m.)
                   Dr. George Hess
                   David Silverman (arrived at 1:04 p.m.)
                   Dr. John Novak
                   Mike Brown
                   Oscar Delgado
   Members absent: None

   Ms. Spinola verified a quorum was present.

   Staff present: Kevin Dick, District Health Officer, ODHO
                  Leslie Admirand, Deputy District Attorney
                  Anna Heenan, Administrative Health Services Officer, AHS
                  Charlene Albee, Division Director, AQM
                  Randall Todd, Division Director, EPHP
                  Bob Sack, Division Director, EHS
                  Kelly Goatley-Seals, Health Educator Coordinator
                  Dawn Spinola, Administrative Secretary/Recording Secretary, ODHO

2. *Pledge of Allegiance
   Ms. Goatley-Seals led the pledge to the flag.

3. *Public Comment
   As there was no one wishing to speak, Chair Jung closed the public comment period.
4. Approval of Agenda
March 24, 2016

Dr. Hess moved to approve the agenda for the March 24, 2016, District Board of Health regular meeting. Councilmember Delgado seconded the motion which was approved five in favor and none against.

5. Approval of Draft Minutes
February 25, 2016

Mr. Brown moved to accept the minutes of the February 25, 2016 District Board of Health regular meeting as written. Dr. Novak seconded the motion which was approved five in favor and none against.

6. *Recognitions

A. Years of Service

1. Scott Baldwin, 10 years, hired 3/13/06 – AQM
   
   Mr. Baldwin was not in attendance.

2. Mark Dougan, 10 years, hired 3/20/06 – EHS
   
   Mr. Dick congratulated Mr. Dougan and presented him with a commemorative certificate and a Washoe County 10-year pin.

3. Nick (Nicholas) Florey, 10 years, hired 3/27/06 – EHS
   
   Mr. Dick noted Mr. Florey had recently been congratulated by the Board on his promotion. Mr. Dick presented Mr. Florey with a commemorative certificate and a Washoe County 10-year pin.

4. Sunita Monga, 20 years, hired 3/6/96 – CCHS
   
   Mr. Dick introduced Ms. Monga and noted she was a supervisor in the WIC program. He presented her with a commemorative certificate and a Washoe County 20-year pin.

B. New Hires

1. Christopher Peterson, Licensed Engineer, hired 3/14/16 – EHS
   
   Mr. Sack briefly reviewed Mr. Peterson’s background, noting that his background included experience providing water system oversight with the State Department of Environmental Protection.

   
   Ms. Albee introduced Mr. Crawford, explaining that he had moved to Nevada from Florida, where he had most recently been employed by Walt Disney World as an Electronics Technician and Specialist. His previous experience includes air quality monitoring.

C. Achievements

1. Inter-Hospital Coordinating Council (IHCC) Presentation of Accomplishments
   
   Mr. Kent Choma provided a PowerPoint presentation outlining the organization’s accomplishments and activities for the previous year.
Dr. Hess stated he had served on the IHCC. He complimented the group, noting it was one place in the community where the four hospitals truly cooperated.

7. Proclamation – National Public Health Week

Ms. Goatley-Seals, Laima Etchegoyhen of UNR School of Medicine, Monica Monticelli, a UNR undergraduate with the School of Community Health Science and Tai Osunlalu, CDC Associate, accepted the proclamation.

Ms. Goatley-Seals noted Public Health Week was acknowledged nationally, and she explained that local organizations worked together to plan educational and informational activities.

**Vice Chair Ratti moved to accept the proclamation. Councilmember Delgado seconded the motion which was approved unanimously.**

8. 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. Approval of Notice of Subgrant Award from the Nevada Department of Health and Human Services, Division of Public and Behavioral Health in the total amount of $109,100 for the period January 1, 2016 through December 31, 2016 in support of the Community and Clinical Health Services Division (CCHS) Tuberculosis Grant Program, IO 10016; and if approved, authorize the Chair to execute the Notice of Subgrant Award.
   Staff Representative: Patsy Buxton

2. Approval to add Gentamycin at $4.55 per unit, Bexsero MenB at $195 per unit and Admin of Depo at $16 per unit to the Community and Clinical Health Services fee schedule.
   Staff Representative: Steve Kutz

3. Approval of Subgrant Amendment #1 from the Nevada Division of Public and Behavioral Health, for the period Upon approval by all parties through June 30, 2016 in the amount of $19,726 in support of the Centers for Disease Control and Prevention (CDC) Public Health Preparedness, FY 16 Carryover, IO 11294; Approve amendments totaling an increase of $19,726 in both revenue and expense to the FY 16 CDC Public Health Preparedness – FY16 Carryover, IO 11294.
   Staff Representative: Erin Dixon

B. Recommendation to Uphold Citation(s) Not Appealed to the Air Pollution Control Hearing Board
   Staff Representative: Charlene Albee
   1. Citation No. 5555, Case No. 1180 issued to Mr. Brad Bryant – SCI Construction

C. Acceptance of the Air Quality Management Division portion of the Truckee Meadows Regional Plan Annual Report
   Staff Representative: Charlene Albee

D. Acceptance of the 2015 Annual Report to the Regional Planning Commission by the Washoe County Health District as the Solid Waste Management Authority
   Staff Representative: James English

E. Recommendation to Approve Variance Case(s) Presented to the Sewage, Wastewater &
Sanitation Hearing Board
Staff Representative: Wesley Rubio
1. John Lindberg – Case No. 1-16S

F. Acknowledge receipt of the Health District Fund Financial Review for February Fiscal Year 2016
Staff Representative: Anna Heenan

G. Approval of authorization to travel and travel reimbursements for non-County employee Dr. John Novak in the approximate amount of $1,500, to attend the 2016 NALBOH conference in St. Louis, MO August 9-12, 2016.
Staff Representative: Patsy Buxton

**Dr. Novak moved to accept the Consent Agenda as presented. Dr. Hess seconded the motion which was approved unanimously.**

9. *Presentation on Progress to Prepare for an Upcoming Strategic Planning Discussion at April 14, District Board of Health Retreat*
Presented by Erica Olsen and Zach Yeager

Ms. Olsen presented PowerPoint slides (Attachment A) covering what had occurred thus far in the process, key themes that had emerged from stakeholder input and what would occur at the Board retreat. She requested the Board inform them if they would like to have more information available for the retreat.

Ms. Olsen noted the Board would receive review material prior to the retreat that would include the survey report and a briefing book which pulls all of the information together. The data will be synthesized down into so it is more digestible and the retreat can focus on setting goals and priorities.

Mr. Yeager reviewed the major themes that encompass what had come up as he and Ms. Olsen were reviewing all of the data that had been gathered. He asked the Board for their input regarding whether they believed their proposals represented a good starting point for building a plan, specifically if they felt anything was missing.

Chair Jung invited the Board to contact Mr. Yeager or Ms. Olsen if they would like to see any additions prior to the retreat.

Vice Chair Ratti suggested all of the documentation utilized should be gathered together in one place for the Board members to reference as they were reviewing the material. Mr. Yeager noted they would do that and also that they intended to compile a composite of the most relevant data from each of the reports. Vice Chair Ratti clarified that for her, the reports did not to be included, just a link to them. The other members indicated that would work for them as well.

Vice Chair Ratti stated there were no surprises in any of the areas discussed.

Dr. Novak opined the agenda was sufficiently populated for a robust discussion and most of the Board’s ideas about what should be covered had been included.

Dr. Hess requested a copy of the PowerPoint presentation be emailed to the members. Chair Jung asked Ms. Spinola to send it out.

Chair Jung thanked Ms. Olsen and Mr. Yeager and stated she looked forward to seeing them at the retreat.

Ms. Olsen reiterated the information presented was just a preliminary view and would be explored more in-depth at the retreat. She reviewed the agenda and lightly expounded on what
would occur during each item. She then explained management staff would spend the rest of that day and the following day utilizing the guidance and policy direction provided by the Board to build out the goals and initiatives.

Mr. Dick noted lunch would be provided.

10. Regional Emergency Medical Services Authority
   Presented by Don Vonarx and Kevin Romero


       Mr. Vonarx noted updates would be provided and offered to answer any questions regarding the Operations Report.

       **Vice Chair Ratti moved to accept the report as presented. Mr. Silverman seconded the motion which was approved unanimously.**

   *B. Update of REMSA’s Public Relations Activities during February 2016

       Mr. Vonarx stated the Memorandum of Understanding with Truckee Meadows Fire Protection District (TMFPD) was moving forward in a positive direction. Chief Moore and Dean Dow planned to present an update jointly to the Board in April.

       Mr. Vonarx noted the customer satisfaction survey response numbers had increased, providing statistically significant results. He explained approximately four percent of transports were being contacted by phone, in addition to the mailed surveys that had been sent out prior to that practice being discontinued.

       Mr. Brown noted discussion had occurred at a previous meeting regarding utilization of the assistance of public safety agencies to move large patients and asked if that practice had been revisited. Mr. Vonarx clarified the issue had been based on an event with a single patient, and had been discussed at the last meeting. He noted Mr. Romero had also provided an update regarding the equipment available and being utilized for those types of situations. Mr. Vonarx explained they work in partnership with other agencies and expressed he was unaware that had been an action item.

       Mr. Brown clarified that the question had been posed regarding what was being done to work toward a solution that does not utilize public staff to assist with larger patients. Chair Jung suggested he request that as an action item later in the meeting, as she agreed it should be agendized and discussed.

       Mr. Romero stated REMSA had a policy with the City of Reno Fire Department clarifying that they will assist with patients in a residence with a medical problem. No similar agreements exist with the other fire agencies.

       Mr. Romero explained activity had increased during February due to visits by various presidential candidates. A tabletop exercise regarding hospital evaluations had been conducted, and a planning meeting had been held regarding conducting quarterly trainings for airport response to active assailants. REMSA also instructed the entire Northern Nevada Law Enforcement academy on law enforcement casualty care.

       Dr. Hess stated a major problem that he had become aware of was the disbanding of the Gerlach Volunteer Fire department, as they had been responsible for patient transport in both the immediate vicinity and other areas in the northern portion of the County. He asked if REMSA had discussed a plan to address that need until a resolution was found and established. Mr. Romero noted that was up to TMFPD. He explained that at the time the
problem had originated, REMSA had reached out to Mr. Dick and the Emergency Medical Services (EMS) oversight staff to offer their assistance.

Dr. Hess asked if Mr. Romero knew what the current response was to a medical emergency in Gerlach. Mr. Romero opined Chair Jung might be able to answer that question. She noted discussion about TMFPD was not agendized. Deputy District Attorney (DDA) Admirand stated it was not, although it could be requested for a future agenda item.

Dr. Hess opined it was an emergency item in that it was affecting public health in the present, and some sort of a report would be beneficial. DDA Admirand reiterated it could be agendized for the April meeting. Dr. Hess noted that was 30 days away and reiterated it was an emergency. He asked if there were a way to request an emergency item be added. He opined it was an EMS issue.

DDA Admirand explained there were specific requirements for an emergency item under Chapter 241 of the Nevada Revised Statutes (NRS). Dr. Hess requested she inform him of what they were. DDA Admirand requested a five-minute break.

[At 1:41 p.m., Chair Jung stated the meeting was in recess.]

Dr. Hess noted he was not an attorney but disagreed with DDA Admirand. He stated he wished to make an emergency motion.

[At 1:44 p.m. Chair Jung called the Board back into session.]

Dr. Hess stated he believed the situation constituted an emergency and an emergency motion was warranted due to the fact the issue had just occurred within the last week, wherein the entire fire department, who also provided emergency medical transport services, walked off. He stated people in Northern Washoe County were at great risk if there was a serious injury or illness. Because there was no medical care or transport. He moved that the item at least have preliminary discussion at the current meeting.

Chair Jung stated it was not an action item. Dr. Hess reiterated he was asking to make an emergency motion, and suggested that there was an ability under NRS to make emergency motions. He pointed out Chair Jung did not agree with him so could overrule him, but he wanted it on record. DDA Admirand explained that under the definition of Open Meeting Law, the item did not meet the requirements of an emergency and it was not on the agenda, so her advice was to take no action.

Chair Jung noted it was not necessary for her to overrule him, as there had been no second to the motion.

11. 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 the staff report contained information regarding the history of the Fundamental Review (FR) and how it has been implemented to date. He directed their attention to the list of items remaining to be addressed, and noted the full listing of items had also been included in the packet.

Mr. Dick explained he intended to discuss only the remaining items as that list was shorter, and also because the goal was to address and potentially finalize them so that the direction of the
Health District could transition from the FR to the Strategic Plan. Any remaining items from the FR would be incorporated into the plan. Mr. Dick reviewed the list and provided explanatory comments.

4. Clinical Services
   • Consideration of any additional Service Hours
     Clinical services has been expanded to provide immunizations five days a week and evening hours for immunizations and Family Planning services on the first, third and fifth Wednesdays of the month.
     • Interactive Voice Response software for appointment scheduling – Not currently available.

     The previous and current electronic health records providers did not and do not have IVR capacity. Staff is optimistic that the new provider may be able to provide that service in the future.

     Chair Jung asked if there was a demand driving the request for additional service hours. Mr. Dick replied there had been no specific requests. Chair Jung opined expanding hours without data that supported the decision would not be a good use of resources.

5. Fee Schedules
   • Work on Septic and Well Regs and Process – potential fee modification
     Workgroup established through the Builder’s Association of Northern Nevada (BANN) and the Environmental Health (EHS) staff is meeting every two weeks. Anticipated regulation changes may lead to fee modifications.
   • Potential Risk-based Food Establishment Fees
     EHS staff will provide briefings to the Board as they go through the process of reviewing and updating the regulations.

     Dr. Novak requested a description of Risk-Based food. Mr. Dick explained there were different risk levels based on what type of food handling and preparation methods are utilized. Lower-risk foods do not require as much oversight as high-risk foods.

     Mr. Sack explained EHS was moving towards a food inspection process that specifically targets areas that have a higher risk of creating food-borne illnesses. Dr. Novak asked if it would mean a separate inspection and Mr. Sack stated it would not at this time.

     Vice Chair Ratti noted she had missed the opportunity to ask a question and requested further explanation regarding how the District was working with Immunize Nevada (INN) to improve billing. Mr. Dick explained INN had received a grant which funds support assistance for the District in billing to recover costs for clinical services. An individual paid for by the grant has expertise in billing and cost recovery, and revenue has increased. The service will continue through the next fiscal year, funded by the approved District budget.

     Mr. Silverman noted he was pleased that time and effort was being dedicated to Item 5. He stated he was looking forward to seeing the results of the modifications to fees and inspections based on risk level and he appreciated their efforts.
   • Track costs and update fees.

8. Develop Infrastructure to Support the District Health Officer
   • Program Coordinator to support CHIP in proposed budget

11. Assessment of needed Administrative and Fiscal staff
• Administrative Assistant Position for CCHS in proposed budget. Additional adjustments may occur

13. Align programs and services with public demand for services to reflect burden of disease and effective public health intervention
• Internal Personnel Resource shift in response to program analysis.
• Program Coordinator position in proposed budget as result of CHA and CHIP
• Further actions may result from Strategic Plan

15. Develop metrics for organizational success and improved community health
• Goes with #20. See below.

19. Undertake an organizational Strategic Plan.
• Underway to be completed in June, 2016.

20. Implement a performance management system
• Implementation of Fundamental Review recommendations have served as metrics for success. Moving forward Strategic Plan and Community Health Improvement Plan will be used to identify metrics and implement a performance management system

The Strategic Plan will include measures to track implementation progress. Additional measures may need to be added to adequately implement the performance management system.

22. Take a greater leadership role to enhance the strong current State/Local collaboration.
• Increasing collaboration with NDPBH and LHD to address legislative priorities and potential establish State Association of City and County Health Officials (SACCHO)

23. Develop an organizational culture to support quality by taking visible leadership steps.
• Continue to develop this culture and implement QI initiative

24. Seek Public Health Accreditation Board accreditation
• DBOH decision

Mr. Dick noted Dr. Novak had been extensively involved in the NALBOH accreditation program and they had listened to a webinar on the topic. Mr. Dick explained upcoming changes to the accreditation fees and process.

Dr. Hess expressed concern with the price and noted he was not clear on what the return would be for the investment. He opined meeting the standards was helpful to the organization. Mr. Dick agreed that it did appear expensive and that going through the required steps was valuable. He opined the information about the benefits was limited and deferred to Dr. Novak.

Dr. Novak stated taking the steps was beneficial to the District’s process in terms of best practices. Whether or not accreditation would help with activities such as receiving grants was something that was not known for certain. He opined it was a great thing to do, but could not state that the District would get its money’s worth out of it. Mr. Dick agreed that the general consensus was that it was beneficial but could not say if the proof was available yet.

Chair Jung asked if the Health District belonged to any other organization that charged similar levels of fees and Mr. Dick stated he did not believe so. She opined it would not be a worthwhile expenditure and recommended more data be compiled to justify its value. She indicated she supported accreditation in general and the efforts being made to meet the standards. Dr. Novak pointed out that the District had already achieved many of those standards.
Vice Chair Ratti asked what should happen with the items that are noted as being in the Parking Lot. Mr. Dick explained that was a decision for the Board, and staff would act on any direction they provided. Vice Chair Ratti opined that Item 12a, regarding demonstrating a concerted effort among all parties to address tensions regarding overhead/direct costs, could be regarded as complete, as good progress had been made.

**Vice Chair Ratti moved to consider Item 12a complete.**

Vice Chair Ratti noted she was not clear on what Item 6a, regarding a tiered level of service, was attempting to accomplish. Mr. Dick explained it addressed requests for expedited permits by updating regulations and initiating special fees. Due in part to the new development meetings and concierge service, turnaround times were currently relatively expedient. A process of that type would be detrimental in that it would delay other permit requests further.

Vice Chair Ratti asked if there was any interest in doing the work to develop a tiered structure. Chair Jung opined there were reasons to discuss it, and a staff report that covered best practices, pros and cons could provide that opportunity. She noted it may also be a good discussion to have with the community.

Mr. Dick noted that the FR was conducted during a period of time when the Licensed Engineer position was vacant, which caused delays in permit review and approval. The tiered service structure may not be necessary when EHS is fully staffed and running smoothly. Chair Jung requested more information be provided regarding the need for the service.

**Vice Chair Ratti moved to consider Item 12a complete. Mr. Silverman seconded the motion which was approved unanimously.**

Chair Jung complimented staff’s work on the Fundamental Review recommendations.

12. *Staff Reports and Program Updates*

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

Ms. Albee explained presentations had been scheduled with all three elected bodies to hear the Ozone Advance resolution.

B. Community and Clinical Health Services, Steve Kutz, Director
   World TB Day; Divisional Update – Medicaid & Marketplace Exchange Enrollment, U.S. Department of State-Visiting Delegation; Program Reports

Mr. Kutz pointed out the expanded TB information section in the staff report and noted that March 24, 2016 was World TB day. He described the gifts that had been provided to each of the Board members by the NV Division of Public and Behavioral Health, TB Program, and complemented the TB staff on their good work.

Mr. Kutz, referring to the discussion regarding expanded hours, stated the current supply was adequate for the demand. He noted Saturday clinics had been provided in the past, and although they were popular initially, attendance dropped to a point that led to the decision to discontinue them. He further explained that staffing a new Saturday clinic may impact normal operations.

Mr. Kutz also explained the previous process and vendor had netted hundreds of dollars in third-party reimbursements for 2014, and the updated process has already brought in over...
$47,000 for 2015. When the new electronic health record system is launched in May, revenues and reimbursements are expected to increase further, as it includes a claims-processing clearinghouse.

C. Environmental Health Services, Bob Sack, Director

EHS Division Program Updates - Food, Land Development, Vector-Borne Disease, Waste Management and EHS Inspections / Permits / Plan Review

Mr. Sack noted three water systems in the area were currently out of compliance. He explained State law provides inspection oversight to EHS, but enforcement is handled by the state and federal offices. The purveyors of the systems that are out of compliance had been required to notify the citizens they serve that they were out of compliance and why. Mr. Sack stated the escalating enforcement process can take years.

Dr. Novak noted he had read the media reports in the USA Today section of the Reno-Gazette Journal regarding the situation and did not feel there was any urgency nor was any of the information surprising. Mr. Sack reiterated EHS was heavily involved in the oversight of the systems.

Dr. Hess asked if results had been received from the tests for the Zika virus that had been conducted on 11 individuals. Mr. Sack indicated Dr. Todd would touch on that in his report.

D. Epidemiology and Public Health Preparedness, Dr. Randall Todd, Director

Program Updates for Communicable Disease, Public Health Preparedness, and Emergency Medical Services

Dr. Todd explained at last count there were 12 individuals who had submitted specimens for Zika testing. Several had come back negative and none positive, a few are pending.

Dr. Todd noted that the State Division of Public and Behavioral Health has been notified by the Centers for Disease Control that the amount of funding for public health preparedness is to be reduced. The money is being diverted to areas that are more heavily impacted by Zika. It is not anticipated to affect the District’s budget.

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

Budget, Community Health Improvement Plan, Truckee Meadows Healthy Communities (TMHC), Strategic Planning, Quality Improvement, Succession Management, Other Events and Activities and Health District Media Contacts

Mr. Dick discussed the budget overview meeting held with City and County managers on March 10. He opined it went smoothly and there was less concern about the District’s budget situation than in past years.

Mr. Dick explained one of the items discussed in more depth at the meeting was the relocation of the TB clinic, as the new location has yet to be established. Dr. Hess asked about the possibility of leasing the building being vacated by the Medical Examiner. Mr. Dick explained that it is located on the block with the Renown campus and they have indicated a desire to acquire it. Perhaps provision of a facility for providing TB services could be part of a purchase agreement with the County. Chair Jung requested he bring the idea back to the Board as an agenda item for discussion. Dr. Hess opined it would be worth pursuing. Mr. Dick had suggested to Mr. Slaughter that perhaps another location on the Renown campus could be located for the clinic, as the proximity to the facility had proven to be a benefit to the clinic.
Mr. Dick noted his report contained information regarding succession planning. He opined the Human Resources (HR) department was providing good support to the District and other departments for this effort. Included in the report were statistics provided by HR demonstrating how many employees were or would shortly be eligible to retire. Class specifications are being updated to accurately reflect the current duties of, and knowledge, skills and abilities needed for the positions. Anticipated vacancies are being identified so that potential candidates may be developed to fill the positions.

Mr. Dick stated he had spent March 23rd testifying before the Interim Legislative Committee on Health Care. He was joined by representatives of the Southern Nevada Health District and Carson City Health and Human Services. Most of the meeting had been devoted to public health. He noted that State spending on public health ranked 51st in the nation, and described the limitations on the use of that funding. He and the other representatives had discussed numerous public health topics, including chronic disease, e-cigarettes and substance abuse programs.

Vice Chair Ratti asked if there had been a conversation regarding a package of public health proposals should the Recreational Marijuana initiative pass. Mr. Dick stated that was not discussed while he was there, although it may have been brought up at the Public Health Policy discussion that was scheduled for later in the afternoon.

13. *Board Comment

Dr. Hess requested the next agenda include a report from staff, REMSA and Fire, if appropriate, regarding activities to resume emergency medical services and transport for the Gerlach area and Northern Washoe County.

Vice Chair Ratti requested an item covering the potential tiered services, to contain analysis and a recommendation whether or not it should be pursued or categorized as not recommended. She stated input should be solicited from all jurisdictions so she understood that the report may require a few months to compile.

Vice Chair Ratti also requested a presentation on any efforts being made to address the potential public health impacts if the recreational marijuana initiative passes.

Mr. Brown reiterated he would like to hear more about the coordinated efforts between REMSA and public safety agencies regarding the movement of larger patients. Chair Jung requested that be a future agenda item.

14. *Public Comment

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

15. Adjournment

Chair Jung adjourned the meeting at 2:37 p.m.

Respectfully submitted,

Kevin Dick, District Health Officer
Secretary to the District Board of Health
Approved by Board in session on April 28, 2016.
Setting the WCHD’s Strategic Direction: Progress Update

District Board of Health
March 24, 2016
Inputs into the Process

Existing

• Fundamental Review
• Financial Review/Cost Analysis
• Board Self Assessment
• Quality Improvement & Control
• Community Health Needs Assessment and the Community Health Improvement Plan

New

• Board- 1:1 Discussions
• Management staff input session and survey
• Staff- All staff survey
• Community Leaders- Survey to Kevin’s 360 Review group
Priorities “In Motion”

- Updating fee structures/cost analysis
- Strengthening customer focus
- Business permitting process improvements through Accela
- Partnering on Truckee Meadows Healthy Communities
- Accreditation activities
Community Priorities

Community Leaders’ Priorities
• Engage partners and community in culture of health
• Improve air quality to meet new standards
• Prepare for service impacts of population growth
• Improve coordination of care

Community Needs Assessment
• Access to healthcare and social services
• Food security and access
• Behavioral health
• Education (K-12)
• Tobacco use
• Physical activity, nutrition, and obesity
• Health policy advocacy
Board and Staff Priorities

Board Perspective
1. Financial resources
2. Increasing awareness and public outreach
3. Long-term planning
4. Quality control and process improvement

Staff Perspective
1. Work with partners
2. Service impacts of population growth
3. Awareness of the Health District and its services
4. Air quality
4.t Coordination of care
Strategic Objectives- Proposed

Financial stability
- Stability/predictability
- Agreement on local funding for Health District

Focused impact where it matters most
- Obesity/Chronic disease
- Drug abuse
- Behavioral health

Extending impact through partnerships
- Healthcare
- Public/Private
- Truckee Meadows Healthy Communities

Emergency prevention and response
- Immunization/disease prevention
- Food safety
- Health data
- Response plans

Sustaining our healthy environment
- Air quality
- Drought/Climate change
- Food safety

Awareness, outreach and education
- Health District identity/brand
- PR-getting the word out
- Healthy lifestyle programs

Operational capacity to support growing pop.
- Working across divisions and interjurisdictionally
- Process efficiency/technology
- Training and professional development

Work environment
- Facility enhancements
- Employee recognition, encouragement, accountability
- Management support, leadership
Retreat Agenda- Morning Session

April 14, 9am-1pm (Board, Management Staff and Fiscal Compliance Officers)

I. Intro from Desert Research Institute Hosts
II. Review Inputs into the Strategic Planning Process
III. Clarify the District’s Core Purpose & Strategic Direction
IV. Prioritization of Draft Strategic Objectives
   **5-10 Minute Break**
V. Strategic Objective #1
   • Review the external/internal analysis related to this objective
   • Address or answer critical strategic issues
   • Establish the strategic approach & roadmap for the next 5 years
VI. Strategic Objectives #2, #3, etc.
VII. Summarize Key Decisions and Closing
**Retreat Agenda - Afternoon & Day 2**

**April 14, 2-4 pm** (Management Staff and Fiscal Compliance Officers)

I. Clarify Direction from the Board
II. Finalize the District’s Core Purpose & Strategic Direction - if necessary
III. Strategic Objective #1
   • Set 3-5 District Goals
   • Identify performance metrics for each goal and progression over five years
IV. Strategic Objectives #2, #3, etc.

**April 15, 9 am-4 pm** (Management Staff and Fiscal Compliance Officers)

I. Recap Decisions made the Previous Day
II. Clarify the District Goals
   • Identify divisions involved
   • 12-24 month “must dos”
   • Identify resources, capabilities needed to accomplish the goal
III. Division Breakout Groups
   • Identify division level goals based on previous agenda item
Inter–Hospital Coordinating Council

Kent Choma, Ph.D., P.E.
IHCC Chair
Hospitals and healthcare facilities

- EMS/FIRE Agencies
- Emergency Management
- School District
- Mental Health
- Public Health
- Volunteer Organizations
- Healthcare Associations
- Tribes
Accomplishments

- Mutual Aid Evacuation Annex (MAEA) update
- Disaster Behavioral Health Annex
- WebEOC Mass Causality Patient Tracking Board
- Hospital Essential Assets and Services Survey
- Jurisdictional Risk Assessment
- 17 trainings offered to healthcare partners
Exercises

- Washoe County Water Restoration TTX
- Regional Active Assailant Full-Scale Exercise
- Reno-Tahoe Airport Authority Exercise
- POD Full-Scale Exercise
- Family Assistance Center TTX
- 20 additional exercises
Thank you