1. *Roll Call and Determination of Quorum*

Chair Jung announced she had a meeting with Senator Heidi Gansert at 2:30 p.m. and would leave this meeting should it not be concluded by that time, and would turn the meeting over to Vice Chair Novak.

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

The following members and staff were present:

**Members present:**
- Kitty Jung, Chair (departed 1:58 p.m.)
- Dr. John Novak, Vice Chair
- Oscar Delgado (departed 1:59 p.m.)
- Michael Brown
- Tom Young (arrived 1:01 p.m.)
- Dr. George Hess
- Kristopher Dahir

**Members absent:** None

**Ms. Rogers verified a quorum was present.**

**Staff present:**
- Kevin Dick, District Health Officer, ODHO
- Leslie Admirand, Deputy District Attorney
- Charlene Albee
- Steve Kutz
- Chad Westom
- Dr. Randall Todd
- David McNinch

2. *Pledge of Allegiance*

Mr. Tom Young led the pledge to the flag.
3. *Public Comment*

Mr. Tom Clark, representing Pignic Pub & Patio, reminded those present of his initial comments at the October 26, 2017 District Board of Health Meeting where he made note of the Cease and Desist Order that had been issued to Pignic Pub and Patio. The Order suspended Pignic’s outdoor operations for patrons to bring in their own food and grill and consume it amongst their own party. Since that time, he stated that Pignic had worked diligently with Health District staff and stated that progress was being made. Mr. Clark informed that he had not been able to find another instance in the country of this type of business model. It appears that Washoe County Health District is the first to allow this type of consumer experience, and he opined it demonstrates that Washoe County is on the cutting edge of innovative businesses.

Mr. Clark stated that the process now involves the request for variance from the Food Protection Hearing and Advisory Board (FPHAB). He noted that a meeting set for December 7th to hear this issue could not be held due to lack of quorum. He informed that there is an item on the current agenda for this District Board of Health Meeting to appoint new FPHAB Members to replace those who had resigned. He hoped this would be able to be accomplished to allow a new meeting of the FPHAB next week.

Mr. Clark opined the Health District staff and Pignic are in agreement for next steps. He noted that Pignic will have to apply for a new outdoor food establishment permit, and the FPHAB will decide whether to allow a variance that would allow Pignic’s patrons to bring in food to prepare and consume.

Mr. Clark informed that one of the issues has been the definition of approved food. He stated that meat would be allowed to be brought in by patrons but would have to be in original packaging with a receipt to demonstrate that it is a commercially purchased product. He informed that an Operations Plan has been worked on and there is understanding between Health District and Pignic staff regarding the other elements of Pignic’s operation. Mr. Clark stressed that public safety is of primary concern to both Pignic Pub & Patio and the Health District.

Chair Jung closed the public comment period.

4. Approval of Agenda

December 14, 2017

Mr. Brown moved to approve the agenda for the December 14, 2017, District Board of Health regular meeting. Dr. Novak seconded the motion which was approved unanimously.

5. Recognitions

A. Years of Service


Mr. Dick informed that it is not standard practice to recognize intermittent hourly employees, but that there are two that will be recognized due to their exceptional number of years of service between their careers at the Health District and years served as intermittent hourly employees.

Mr. Dick stated he wished to recognize years of service for Mr. Fuller who has a total of forty years and ten months of service with the Health District. Mr. Dick informed that he actually started with the Health District forty-two years ago, but had a bit of retirement before coming back as an intermittent hourly employee.
Mr. McNinch introduced himself as a Supervisor in the Environmental Services Division, and stated he wished to express the appreciation of the entire EHS staff for Mr. Fuller’s contributions. Mr. McNinch stated that there was not enough time to review all of Mr. Fuller’s accomplishments, but that Mr. Fuller has moved the dial in our community’s public health. Mr. Fuller started with the Health District in 1975 and has been a mentor to many of the Environmental Health staff members. Mr. McNinch thanked Mr. Fuller for everything he’s done for Environmental Health and the Health District.

Mr. Young informed that Mr. Fuller had been instrumental in working through permitting of his brewery which was the first to open in Nevada and thanked him for his service.

Mr. Dick added that Mr. Fuller was responsible for winning the National WasteWise Award in Washoe County during his career for his efforts in waste reduction and the recycling program that the County established.

Mr. Fuller stated that when Washoe County joined the EPA’s WasteWise Program, there were one hundred fifty local governments involved. He informed that Washoe County was Number One for three years in a row. Mr. Fuller expressed that staff did a good job. Chair Jung stated that he had done a good job as well, and thanked him for his service.


Ms. Saum was not present. Mr. Dick announced that Ms. Saum had been with the Health District a total of twenty-eight years and six months.

iii. Angela Tibaduiza. 25 years, hired 12/28/1992 – CCHS

Mr. Dick congratulated Ms. Tibaduiza on her twenty-five years of service with WIC where she served as a Human Support Specialist II. He announced that he would be combining her recognition for years of service with that of her retirement. Mr. Dick stated that she would be presented with a clock from the Washoe County Health District as a token of appreciation for her service.


Mr. Dick recognized Ms. Goatley-Seals for fifteen years of service, and informed that Ms. Goatley-Seals is a great champion for the Health District’s Chronic Disease Program.

v. David Gamble, 5 years, hired 12/3/2012 – EPHP

Mr. Dick introduced Mr. Gamble as the Medical Reserve Corps Coordinator for the Health District’s Preparedness Planning Program and stated that he has been with the Health District for five years.

B. Retirements
   i. Angela Tibaduiza, 12/14/2017, WIC Human Support Specialist II - 25 years – CCHS

C. New Hires
   i. Chad Westom, 10/30/2017, EHS Division Director – EHS

Mr. Dick informed that he had introduced Mr. Westom to the District Board of Health Members at the Strategic Planning Retreat on November 2nd, but wanted to recognize him today for the benefit of the viewing audience of this meeting. Mr. Dick stated that Mr.
Westom is the new Environmental Health Division Director and was most recently a Bureau Chief at the State Division of Public and Behavioral Health.

6. **Proclamations**
   Radon Action Month Proclamation

   Mr. Dick informed that Ms. Susan Howe was present to accept the Proclamation for the University of Nevada Reno Cooperative Extension. Mr. Dick read the Proclamation to those assembled, designating January 2018 as Radon Action Month in Washoe County. Ms. Howe spoke of the dangers of radon, the importance of testing and percentage of homes by zip code in Washoe County that may have elevated levels of radon. She informed that shipping was now being charged on those kits sent via the mail, but the Cooperative Extension was providing free radon test kits in January and February and provided information on locations where they could be picked up. Ms. Howe noted that the kits would also be available at several upcoming presentations that were listed on a flier she had provided.

   Ms. Howe announced that the International Building Code and the International Residential Code for 2018 would be voted on in 2018, and expressed her hopes that Appendix F of the International Residential Codes for radon control methods in new homes would be supported by the Health District.

   Chair Jung asked that there be a letter drafted in support of this initiative on behalf of the District Board of Health to be sent to all three jurisdictions.

   **Dr. Novak motioned to accept the Proclamation for Radon Action Month. Mr. Dahir seconded the motion which was approved unanimously.**

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. Approval of Draft Minutes
      i. October 26, 2017
      ii. November 2, 2017

   B. Budget Amendments/Interlocal Agreements
      i. Approve a Sub-Grant Award from the State of Nevada Department of Health and Human Services, Division of Welfare and Supportive Services retroactive to October 1, 2017 through September 30, 2018 in the total amount of $82,963 ($25,000 non-federal match required) in support of the Community and Clinical Health Services Division Chronic Disease Prevention Program IO#11452 and authorize the District Health Officer to execute the Sub-Grant Award.
         Staff Representative: Nancy Kern-Cummins

      ii. Approve a Subgrant Award from the State of Nevada Department of Health and Human Services, Division of Public and Behavioral Health retroactive to October 1, 2017 through September 30, 2018 in the total amount of $15,000 (no match required) in support of the Community and Clinical Health Services Division Tuberculosis Prevention Program IO#11457 and authorize the District Health Officer to execute the Subgrant Award.
         Staff Representative: Nancy Kerns-Cummins

      iii. Approve a Subgrant Award from the State of Nevada Department of Health and Human Services, Division of Public and Behavioral Health retroactive to October 1,
2017 through September 30, 2018 in the total amount of $25,001 (no match required) in support of the Community and Clinical Health Services Division (CCHS) Chronic Disease Prevention Program IO#11454 and authorize the District Health Officer to execute the Subgrant Award.
Staff Representative: Nancy Kerns-Cummins

iv. Retroactive approval of Notice of Subgrant Award from the Nevada Department of Health and Human Services, Division of Public and Behavioral Health, for the period August 1, 2017 through July 31, 2018 in the total amount of $170,522 in support of the Centers for Disease Control and Prevention (CDC) Epidemiology and Laboratory Capacity Program; and if approved authorize the District Health Officer to execute the Subgrant Award.
Staff Representative: Patsy Buxton

v. Approve Award from the Association of Food and Drug Officials (AFDO) for the period January 1, 2018 through June 30, 2018 in the total amount of $2,673 in support of the Environmental Health Services Division (EHS) Food Retail Program Standards Program – Joint Nevada Food Safety Task Force and NevEHA Annual Educational Conference Project, IO TBD; and if approved, authorize the District Health Officer to execute the Agreement.
Staff Representative: Patsy Buxton

C. Approve the modification of the Community and Clinical Health Services Fee Schedule to add Lidocaine with Epinephrine, Naproxen and Herpes Simplex 1 and 2 testing.
Staff Representative: Nancy Kerns-Cummins

D. Review and possible approval of the Department Emergency Operations Plan
Staff Representative: Christina Conti

E. Approval to donate evacuation and triage tags to skilled nursing, long-term care, hospital and EMS partner agencies not to exceed a total amount of $3,000 funded by the Assistant Secretary for Preparedness and Response Grant (Fed ID#1NU90TP921907-01-00).
Staff Representative: Andrea Esp

F. Recommendation for the Board to Uphold Notice of Violation Citation No. 5658 Issued to Harry Stewart, Case No. 1198, for a violation of the District Board of Health Regulations Governing Air Quality Management with a $3450.00 Negotiated Fine.
   i. Harry Stewart, Case No. 1198, Notice of Violation No. 5658
   Staff Representative: Charlene Albee

G. Acknowledge receipt of the Health Fund Financial Review for November, Fiscal Year 2018
   Staff Representative: Anna Heenan

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

8. * Presentation– Washoe County Health District Board Scholarship Recipients
   Presented by: Kara Mays

   Ms. Mays introduced herself as the Assistant Director of Development and Alumni Relations for the School of Community Health Sciences at the University of Nevada Reno. She stated that she has the pleasure of working with Dr. Trudy Larson and Mr. Dick who is on the Community Advisory Board.
Ms. Mays informed that the scholarship recipients were present today and would be speaking later.

Dr. Trudy Larson is now the Dean of the School of Community Health Sciences. Ms. Mays informed that she has been the School’s Director for the past six years and opined that her new role as Dean is an important step in a positive direction for the School and for Dr. Larson, and that Dr. Larson sends her regards.

Ms. Mays stated that the School became independent of the Division of Health Sciences in July of 2017 which created the Dean role and provided heightened research opportunities and a stronger national presence.

Ms. Mays informed that the School’s Masters in Public Health (MPH) Programs were Council on Education for Public Health (CEPH) accredited in 2011. It is Dr. Larson’s priority for the School to become a fully accredited School of Public Health by the year 2020, and Ms. Mays informed that the application for accreditation has been submitted.

Ms. Mays stated that the rate of growth has increased dramatically, with their total enrollment totaling nearly ten percent of the University of Nevada Reno’s entire student body. This rapid growth is due in part to the merger with the Substance Abuse Technology Center, the inclusion of pre-nursing students and the overall growth of the health field.

In review of the academic programs, Ms. Mays highlighted the new MPH Online Program that allows flexibility for working professionals.

Ms. Mays informed that a key component for their students to graduate is the internship requirement, and expressed gratitude for the one hundred thirty-three partnering sites in Northern Nevada that allow students opportunities to fulfill this requirement. Over 37,000 hours of community service in Northern Nevada was performed by the students last year. It is common for students who have completed internship with a partnering site to be employed by them upon graduation.

Ms. Mays stated that the School also provides continuing education and professional development opportunities. The Nevada Public Health Training Center provides that opportunity to their workforce. The Center trains Public Health Professionals to be proficient in all areas of Public Health and Community Wellness with the goal of constantly improving the community’s Public Health workforce.

Scholarship recipients Allyson Updike and Larissa White expressed gratitude for the assistance the Scholarship provided them and gave an overview of their focus of study and internship experiences.

Ms. Mays reported the market value of the Scholarship Endowment at $18,000, and informed that a fully endowed Scholarship at the University is $25,000 for a $1,000 award each year. She inquired if the Board would consider growing this fund to the $25,000 level to continue to support Community Health Sciences students in such a meaningful way.

Mr. Young inquired what the process is for a student to be selected for internship at one of the partnering sites, and indicated that he would be interested in his brewery becoming a partnering site. Ms. White informed that the student interviews at the partnering site, just as one would for a job interview.

Mr. Dahir inquired what could be done to retain graduates in the workforce locally. Ms. White opined that, other than the pay scale, it is important to graduates that they work for an entity with good organizational structure for their efforts to have the greatest impact in the community.

Chair Jung thanked Ms. Mays for her presentation and inquired if it would be a one-time gift of $7,000 to increase the scholarship to the $25,000. Ms. Mays confirmed that to be
correct, that the principal amount is not touched and scholarships are taken from the accrued interest. Chair Jung noted that if each of the Board Members was to contribute $1,000, the goal would be met.

9. *Presentation – Eddy House
Presented by: Michele Gehr

Ms. Gehr introduced herself as the Executive Director of Eddy House, located at 423 E. 6th Street in Reno, and that they act as the central intake and assessment facility for all homeless youth in Northern Nevada. She informed that they serve primarily non-system youth, meaning that they are not associated with any other organization, agency or non-profit.

Ms. Gehr gave an update on the numbers from this presentation. In the first eight months of 2017 the Eddy House saw 625 individual homeless youth, but that number is growing. She stated that they see sixty youth per day in a space of less than 1,000 square feet, and saw eighteen new youth just last week. She informed that they’ve had more than 7,000 youth interactions in 2017, the number climbing now to nearly 8,000.

Ms. Gehr informed that they do not duplicate services, but partner with about twenty-five different agencies to bring services onsite to Eddy House. She stated that these partners include the Food Bank, Notables Music Therapy, art therapy, mental health providers, job skills and life skills, to name a few. Other services include addiction support groups, healthy relationship training, anger management and grief and loss counseling.

Ms. Gehr stated that approximately 90% of their youth population has lost a parent or primary care giver due to death, incarceration or abandonment. Nearly 50% have been in the foster care system with 20% having aged out of foster care. 83% of Eddy House youth have moved more than five times as a child.

She informed that the largest percentage of their youth is between eighteen and twenty-four years of age for which there seems to be a gap in available services in this community.

Data shows that homeless youth should not be served at the same location as the adult homeless population. Ms. Gehr informed that they are homeless for different reasons and statistics show that the adults will prey on the youth.

Of the homeless youth seen at Eddy House, 71% are from Washoe County and 8% are from rural Nevada.

Ms. Gehr stated that their initial focus is being a safe place physically and psychologically, and that Eddy House is 100% trauma effective to serve the majority of youth with Post-Traumatic Stress Disorder. She informed that Eddy House provides showers, clothing and food, and assists with essential documents for medical or dental care and education. Another focus is to assist them in obtaining a GED or other high school equivalency which increases opportunities for employment.

Ms. Gehr informed that 70% of the youth seen at Eddy House report they are safer living on the street than at home, and that 58% have been trafficked for sex or labor.

Ms. Gehr stated that Nevada now has the fastest growing rate of homeless youth and is fast approaching a public health crisis. Nevada ranks fifth in the nation for unsheltered homeless. She informed that the Council on Homelessness estimates the annual cost to a city for one homeless person between $30-50K and could be a collective cost to the local jurisdictions of over $12M/year. She stated that less than eight percent of the homeless youth seen at Eddy House will use the Volunteers of America homeless shelter, siting safety concerns.

Ms. Gehr reiterated that Eddy House sees sixty youth per day, with the largest count being seventy-four in a single day in an area of less than one thousand square feet, and that
there has been no conflict. She credited her amazing staff and the fact the youth love having a safe place to be.

Ms. Gehr announced their plan for the next year to have a twenty-four hour drop-in center located in downtown that would accommodate fifty youth per night, as well as continue the drop-in services. She stated that, ideally, this center would have a commercial kitchen to allow them to prepare and serve nutritious meals. They hope to also have classroom space, therapy space, and have showers and lockers.

Ms. Gehr stressed that their goal is not to manage this crisis, but to end youth homelessness, and that she sees Reno, Sparks, Northern Nevada and the Eddy House as a national model to end the problem of youth homelessness. She stated that seven hundred youth is a manageable problem, but that it will take the community working together to accomplish the goal and expressed hope for that collaboration.

To accomplish Eddy House’s goal, they need to strengthen their current programming and funding streams. Current support has been through donations from local persons and entities. She informed that Eddy House is a data-driven agency and is likely the largest data collection source for this population in the county. Ms. Gehr informed that they are ready to share this data with County, City and State agencies.

She informed that they want to increase operation hours at their current location, work on partnerships and the continuum of care, and expand into a larger facility to provide a safe, warm place for more of the homeless youth.

Ms. Gehr detailed ways to help, including touring Eddy House, networking to inform the community of the need and of Eddy House operations and goals, both in person and on social media.

Mr. Dahir expressed his interest and stated that he would tour Eddy House. He informed that there are many initiatives to curb homelessness in general, but stated it would be wonderful to see their operation in benefit of homeless youth. Ms. Gehr informed that they focus on prevention, because data shows if there is intervention before the age of twenty-five, the individual is less likely to continue to be homeless as an adult.

Dr. Hess expressed that their plan to end youth homelessness wasn’t clear to him, and inquired what that plan is. Ms. Gehr stated their plan is for a twenty-four hour center, since data shows if they are stable at night, they go back to school and have successful jobs. She informed of their job skills program; since April of 2016, one hundred sixty of their youth have managed to secure employment. She stressed that it is difficult to retain employment if there is no safe place to sleep, underscoring the importance of a twenty-four hour center. Dr. Hess inquired what size building they were looking for. Ms. Gehr replied a space of at least 10,000 square feet, located near downtown, with space for fifty beds would be ideal. Dr. Hess inquired how the Health District could help. Ms. Gehr stated that assistance in developing programming for nutrition, medical care and other needs the youth require but do not have access to would be their ask.

Chair Jung encouraged the Board to take a tour of Eddy House, and commended Ms. Gehr on their data driven approach. She informed that she and a group of constituents wanted to adopt her for a night of dinner, and asked Ms. Gehr to explain that concept to the Board. Ms. Gehr informed that a major objective when she returned to Nevada and Eddy House was for the youth to become involved and invest themselves in what Eddy House was trying to accomplish. One way to do this was the Friday Family Meals. She informed that, every Friday at 2:30 p.m., a group, individual or organization provides a hot meal for sixty-five persons. They incentivize throughout the week with raffle tickets. During the meal there is a feedback session and a raffle for five $10 gift cards. This interaction creates a bond
Chair Jung asked what kind of clothes was needed for the youth, and Ms. Gehr stated that socks and underwear were their only need at the moment.

Chair Jung also inquired if they had received a VOCA Grant, and Ms. Gehr confirmed that they have a VOCA Grant in place and had submitted for additional funding to hire a full time marriage and family therapist, but response hadn’t yet been received.

Chair Jung expressed her appreciation of Ms. Gehr and the work she is doing. She offered the Board’s assistance and asked they be kept apprised of any assistance they could give to avert this public health crisis.

Chair Jung informed that the start time to her previously mentioned meeting is 2:00 p.m., not 2:30 p.m., and so would need to depart and turn the meeting over to Vice Chair Novak. She noted that she was in favor of the upcoming item for the REMSA increase although she would not be present to vote. She departed at 1:58 p.m.

Mr. Delgado departed at 1:59 p.m.

10. Presentation, Discussion, and possible approval of REMSA’s request for an increase of 3% a year over four years to the average allowable bill.
Presented by: Dean Dow

Mr. Dow introduced himself as the President and CEO of REMSA and Care Flight. He informed that REMSA’s mission includes contributing to the health of the communities they serve, and currently holds five accreditations across all major service lines in their organization.

Mr. Dow stressed that accreditations are the backbone of quality and safety throughout the organization, and represent REMSA’s commitment to meeting national and international standards. These standards insure the highest quality of service for their patients and the community. He detailed the areas in which REMSA is accredited.

Mr. Dow informed REMSA has seen an 8-12% increase in overall call volume and a 15% increase in Medicaid patients since the introduction of Health Care Reform through the passing of the Affordable Care Act.

Mr. Dow informed that data from the Washoe County Health District 2016 Community Health Improvement Plan indicates that one third of the Washoe County residents live in a primary care shortage area, and all Washoe County residents live in a mental health provider shortage area.

Because of the increase in insured patients and the lack of healthcare providers in our region, many of those healthcare providers do not accept Medicaid. Mr. Dow informed that there is an overall increase in patients using EMS and Emergency Departments to access healthcare, and that REMSA has become the community’s healthcare safety net.

Mr. Dow stated that all patients who call are not transported, but can receive treatment. This non-transport response happens with about one third of calls annually, which is approximately 24,700 calls that REMSA cannot be compensated for. Population growth has resulted in expanded service areas, and thirty-four additional field providers have been hired since 2013. This number doesn’t include positions replaced due to attrition.

REMSA is focused on employee retention, it being critical to recruit and retain high quality EMS providers to maintain the level of clinical expertise it is known for. Mr. Dow informed that REMSA launched a competitive compensation program, increasing pay to clinical providers to align them in a Step Progression Plan while maintaining a strong benefits package.

To accommodate growth coming to this region, a new Franchise Response Map was
implemented along with new response requirements based on geographic demand and population density. To assure compliance with these requirements, REMSA added three fixed stations and ambulances dedicated to those areas at a total annual operating cost of $1.5M. Mr. Dow informed that, since 2015, REMSA has added an additional eleven staffed ambulances per year, which is an approximate 18% increase over the past two years.

Despite efforts to educate the populace to the proper use of 911, many continue to call for medical assistance in non-emergent instances. In response to an increase in 911 calls, REMSA identified two additional innovative solutions, the Nurse Health Line and Omega Protocols. Both use medically trained registered nurses and communications specialists to facilitate getting patients to the right level of care which may include sending an ambulance or may include recommending a visit to an urgent care or primary care office.

In light of growth in the community, Mr. Dow informed that REMSA has been challenged to respond to more than just 911 calls. Special programs were implemented to meet the changing needs of the community outside of the traditional EMS response. These programs use highly trained staff without fees for services and include the Technical Emergency Medical Services, or TEMS Team, trained to attach to SWAT Teams to provide care at active scenes, the Search and Rescue Paramedics that support the Washoe County Search and Rescue Team, and the Advanced Life Support Bike Team used to service high volume weekends and cover high density populations during events. Responses to events such as the Air Race crash and the recent active shooter incident at the Montage are examples of meeting the community’s needs to provide high quality resources in non-traditional ways.

It is critical for REMSA to stay current and provide up-to-date technology for patient care. Mr. Dow informed that, in the last two years, REMSA has invested more than $5M in capital improvements and upgrades. Of that amount, $2.1M was for ambulance related purchases, upgrades and refurbishments, and $2.2M was used in capital investments to enhance the REMSA Medical Dispatch Center and radio infrastructure. He informed that over $700K was invested in IT improvements and other vital medical equipment.

Mr. Dow stated the proposed rate increase will impact patients with private insurance. 70% of REMSA patients are on Medicaid and Medicare and will not be impacted by the increase. He informed that REMSA only receives 34 cents on every billed dollar. He stated the rate increase REMSA is seeking is 3% per year for four years. He informed the impact will be $34 to the average allowable bill for the first year of the increase. The actual payment from insurers will be subject to lower reimbursement based on what they actually pay.

Mr. Dow stressed that REMSA remains committed to transparency, and the ability to monitor the impact this increase will have for REMSA overall’s performance will be possible through the annual financial audit that is presented to the EMS Oversight Office.

Mr. Dow informed that REMSA also presents its average allowable bill as part of the monthly compliance report presented to the District Board of Health. In addition, Mr. Dow stated they will provide an annual update to the Board highlighting the ongoing infrastructure investments as well as REMSA’s growth across the region.

Mr. Dow thanked the Board for their time, and expressed his appreciation for the partnership that REMSA and Care Flight has had with the District Board of Health as well as their other community partners. He offered to answer any questions.

Mr. Young inquired what could be done to reduce the number of non-transport calls. Mr. Dow informed they are currently working with the Nurse Health Line and the Omega Call structure. A person calling 911 is routed through an Emergency Medical Dispatch process, and utilizing the EMD dispatchers and the nurses in the call center, REMSA can help direct
non-emergent calls to into other healthcare pathways. Mr. Young inquired if this process would lower the number of non-transport calls. Mr. Dow informed that it will actually increase the number of non-transport calls, but that it is a benefit to the health system overall to direct the non-acute patients to the appropriate level of care.

Dr. Hess expressed concern regarding the 3% increase over four years without knowing what the financial situation will be at that time. He informed this increase would exceed the cost of living increase and opined that requesting an increase for four years in succession could be premature. Mr. Dow informed that it is REMSA’s strategy is to estimate their future budget as closely as possible. He stated that REMSA has done an analysis over the last four years and results show their costs increasing at a rate an average of 4% per year over the last four years. Dr. Hess inquired if that increase was in cost per transport, and if costs associated with the growth of the County was removed from the equation. Mr. Dow informed that as the population increases so does the utilization of the 911 System, but not necessarily the number of transports.

Per information provided by Mr. Dow, Mr. Brown recapped that 70% of transports were Medicare and Medicaid, leaving 30% for private insurance and self-pay. Mr. Brown informed that 4% was the projected budget increase per year used as an estimate by the ambulance company he had managed, and it still didn’t keep up with increasing costs of operation. He opined that the proposed increase might not be enough to cover their needs, but would be supportive of the amount requested in this item, especially in light of the fact that the increase would only affect the private insurance and self-pay transport bills.

Mr. Dahir stated that there have been no substantial requests for rate increase in REMSA’s services in some time, and Mr. Dow confirmed it had been approximately ten years. Mr. Dahir opined that the request was within reason, and agreed with the importance of retaining quality employees.

Mr. Dahir moved to approve REMSA’s request for an increase of 3% a year over four years to the average allowable bill. Mr. Brown seconded the motion which was approved four in favor and none against.

Vice Chair Novak noted that Mr. Delgado and Chair Jung were also in support of this item.

11. Regional Emergency Medical Services Authority
Presented by: JW Hodge

Mr. Hodge noted that there are two Franchise Compliance Reports included in his presentation, and that he would like to thank Mr. Dick for noticing one of the charts differed in data between the October and November reports for early spring 2017. He informed that a corrected chart had been provided.

A. Review and Acceptance of the REMSA Operations Report for October 2017

Mr. Brown moved to accept the REMSA Operations Report for October 2017. Mr. Young seconded the motion which was approved four in favor and none against.

B. *Update of REMSA’s Public Relations during October, 2017

Mr. Hodge offered to answer any questions. Mr. Dahir requested Mr. Hodge to provide an overview of the use of Flirtey drones as mentioned in the October Public Relations and Social Media report. Mr. Hodge informed they had entered into a partnership with Flirtey in response to the concept they proposed of delivering a defibrillator via drone to certain areas more quickly than it could reach the patient by ambulance. By using REMSA and Washoe
County data, Heather Kerwin from the Health District EMS helped Flirtey identify areas in the region that could benefit from drone delivery of a defibrillator (AED). Mr. Hodge explained that if ArcCAD recognizes a cardio arrest situation, it would automatically launch a drone to the destination with an AED. This action would be coupled with instructions given by REMSA Dispatch Center to provide pre-arrival instructions for the use of the AED, as well as other pertinent information. Mr. Hodge informed that they are hoping to launch tests in early 2018. Mr. Dahir requested updates as to the progress of this operation.

Dr. Novak inquired how the drone would be recovered if it should become misdirected. Mr. Hodge stated he’d be happy to bring in a Flirtey representative to provide information on how the drones are tracked. He informed that these commercial drones are flying with technology similar to aircraft.

Ms. Admirand informed Vice Chair Novak of a request from staff to re-open Item 10 and direction be given as to the effective date of the rate increase for REMSA. Vice Chair Novak requested Mr. Dow to provide that information. Mr. Dow responded that January 1, 2018 would be an acceptable start date.

Mr. Dahir inquired if he needed to include the start date in the motion and Ms. Admirand confirmed that to be correct.

**Mr. Dahir moved to add January 1, 2018 as the effective date for the REMSA rate increase to the original motion.** Mr. Young seconded the motion which was approved four in favor and none against.


Pursuant to a question from Mr. Brown, Mr. Hodge informed the reason dates appear for prior months in the Dates of Service Column for Comments Received are due to individuals calling back on an older issue or that they receive new comments from previous month.

**Mr. Brown moved to accept the REMSA Operations Report for November 2017.** Dr. Hess seconded the motion which was approved four in favor and none against.

D. *Update of REMSA’s Public Relations during November, 2017*

There was no comment made on the Public Relations report.

12. Presentation and Possible Acceptance of Revised Strategic Plan

Staff Representative: Catrina Peters

Ms. Peters stated she would be presenting the Revised Strategic Plan for the Board’s approval. She informed that there were a few minor revisions to discuss, the first being the addition of a summary of the new information shared at the November 2, 2017 Strategic Planning Retreat. New Outcomes were added from information shared regarding the Community Health Needs Assessment and other emerging Strategic Priorities. She informed that she had updated staffing assignments due to turnover, and had added a table to show cross-divisional collaboration. Ms. Peters detailed the Outcomes that were added and the information on cross collaboration table.

Mr. Dahir stated his belief that families are the Health District’s first line of defense for a healthier community. He agreed there were activities in the Health District’s operation that focus on families, but would like to see more initiatives be developed to support families through parenting classes and other means incorporated in the Strategic Plan.

Mr. Dick responded to Mr. Dahir, stating he believed his comments at the Retreat were heard and appreciated. He informed that Mr. Kutz’ upcoming monthly report contains information on opportunities being pursued that are in alignment with Mr. Dahir’s objective.
Mr. Young moved to accept the Revised Strategic Plan as presented. Mr. Brown seconded the motion which was approved four in favor and none against.

13. Possible approval of the proposed 2018 Washoe County District Board of Health Meeting Calendar

Staff Representative: Kevin Dick

Mr. Dick informed the proposed calendar of 2018 District Board of Health Meeting dates include the standard meeting dates of the fourth Thursday of each month with the exception of November and December. The November meeting is listed on the calendar as tentative to be omitted if not necessary, and the December meeting is scheduled for the second Thursday due to the Christmas holiday. Also included on the calendar, Mr. Dick informed, is the proposed date of November 1st, 2018 for the Strategic Planning Retreat.

Mr. Dahir moved to approve the 2018 District Board of Health Meeting Calendar. Dr. Hess seconded the motion which was approved four in favor and none against.

14. Possible approval of the proposed appointment of two new Food Protection Hearing and Advisory Board Members to replace those who have resigned. Possible appointees are Mr. Chris Thompson, Mr. George Heinemann and Mr. Jesus Gutierrez.

Staff Representative: Chad Westom

Mr. Westom stated that there are two vacancies on the Food Protection Hearing and Advisory Board (FPHAB) created by the resignation of Mr. Vern Martin and Mr. Jerry Montoya. He informed there are three prospective replacements for the District Board of Health’s consideration; all three have experience in the food service industry as shown by the resumes provided, of these, Mr. Thompson was recommended as an appointee by Mr. Martin. He reviewed the qualifications of all three persons interested in becoming a FPHAB Board Member.

Mr. Westom informed the purpose of the FPHAB is to consider appeals by aggrieved persons and applications for variance in the Washoe County Regulations Governing Food Establishments.

Mr. Westom stated that Environmental Health recommends that the District Board of Health appoint Mr. Chris Thompson to the Food Protection Hearing and Advisory Board, and would also support the appointment of either Mr. George Heinemann or Mr. Jesus Gutierrez for the remaining vacancy.

Mr. Dahir moved to appoint Mr. Christopher Thompson and Mr. George Heinemann to the Food Protection Hearing and Advisory Board. Mr. Brown seconded the motion which was approved four in favor and none against.

Mr. Brown thanked all three gentlemen that showed interest in participating on the Food Protection Hearing and Advisory Board, and stated that it takes commitment to participate on a board. He expressed appreciation of their willingness to participate.

Mr. Dahir stated his appreciation of the applicants as well and requested Mr. Gutierrez be thanked for his interest and that he be considered for any future openings on this Board. Mr. Westom stated that he would do so and would encourage him to participate in other ways as well.

15. *Staff Reports and Program Updates

A. Air Quality Management, Charlene Albee, Director

Program Update, Divisional Update, Program Reports
Ms. Albee informed that November 1st began the “Know the Code” season, the woodstove peak season program, and has a new radio ad that has received positive reaction from the community. She shared the ad with those present.

She informed there had not been a red no-burn day to date, when historically there would have been with the first major inversion of the year. She opined this is due to the effectiveness of their woodstove program which includes replacement of old woodstoves with change of ownership and the rebate program which incentivizes citizens to upgrade to new models. The various outreach programs have also contributed to the program’s success by informing citizens of the burn forecast.

Ms. Albee informed that, as the packet was being prepared to submit to EPA for the regulations for gasoline dispensing facilities and the removal of Phase Two, it was discovered that the notice needed to be published three times instead of the two it had been. This was due to the finding that this is a State Implementation Plan (SIP) submittal. The publications are now being submitted in December with notification that another workshop could be held if requested. This item will be brought before the Board again as a Business Impact Statement in January and possible approval of regulations in February.

Ms. Albee informed of a policy change she instituted that any item required to be posted will be posted three times.

Mr. Dahir commended Ms. Albee on a job well done for efforts that resulted in a 10% increase in the state/local air grants. Ms. Albee informed that the Federal Administration is still considering the reduction of the EPA’s budget, but letters sent to the Nevada Congressional members prompted support in the House and Senate to support either level funding or a 10% increase to compensate the state for work that will become their responsibility. She stressed that the budget isn’t final but that staff would remain vigilant.

B. Community and Clinical Health Services, Steve Kutz, Director
Divisional Update – World AIDS Day; Nurse Family Partnership; Data & Metrics; Program Reports

Mr. Kutz stated there was an exciting opportunity to share with the Board, as well as inform of a family related program that Ms. Howell, Sexual Health Program Coordinator, had reminded him that is provided. He explained that the Sexual Health Program provides monthly STD/HIV testing at the Eddy House, which is a great way to build rapport and intersect with the youth and teens to hopefully prevent issues rather than treat them. Mr. Kutz expressed his appreciation for Ms. Howell and her staff for their work at the Eddy House and other off-sight community testing.

Mr. Kutz informed that it was World AIDS Day on December 1st and of the importance of medications that halt the transmission or acquisition of HIV. He stated that this is an unprecedented step on the path to eliminate the epidemic.

In response to Mr. Dahir’s request to see more focus on the education and support of the family unit, Mr. Kutz informed of an opportunity to increase that interaction with families through the Nurse Family Partnership, and expanded on information included in his report. He stated that the Nurse Family Partnership’s (NFP) mission is to “positively transform lives of vulnerable babies, mothers and families”, and their vision is “a future where all children are healthy, families thrive, communities prosper and the cycle of poverty is broken”.

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Mr. Kutz informed that this is a voluntary program, that the typical client is a first time mother who meets low-income criteria and receives her first home visit by the end of her twenty-eighth week of her pregnancy. He stated that the mother is visited throughout her pregnancy and through the baby’s first two years of life with gradually decreasing frequency of visitation. Mr. Kutz informed that the nurses would carry a case load of 25-30 active clients each, and the Program Supervisor would provide weekly one-on-one clinical supervision visits, hold weekly case conference and team meetings and joint home visits. He stated that there would also be a Community Advisory Board established that would meet at least quarterly, and that Renown Health was very interested in being part of this Board.

Regarding community impact points, Mr. Kutz stated that NFP addresses family, poverty, educational attainment, school success, crime rates, etc.; all of which have been mentioned as priorities in the Community Health Needs Assessment (CHNA) and Community Health Improvement Plan (CHIP). Mr. Kutz opined that this intersection between NFP, the Health District, CCHS and the CHIP provides an excellent opportunity to positively impact the community.

In comparison with communities of a similar population, Mr. Kutz informed that NFP has seen an 18% reduction in pre-term births, 21% increase in breast feeding rates, and 19% increase in the number of children with current immunizations. As of 2016, he stated that NFP was serving clients in forty-two states in the United States.

Mr. Kutz informed that the State Division of Public and Behavioral Health will be working on Medicaid reimbursement for services, and grants such as the MIECHV (Maternal, Infant, and Early Childhood Home Visiting Program) to provide sustainability for the NFP Program.

Mr. Kutz stated that Southern Nevada Health District has also had the Nurse Family Partnership Program since 2008 and currently have seven home nurse visitors. He informed that they are applying for one additional nurse through the MIECHV Grant.

Mr. Kutz stated they were very excited about this opportunity and that he would be keeping the District Board of Health apprised as to the outcome of the grant application. He expressed thanks to the District Health Officer, Mr. Dick, as well as Ms. Heenan, Ms. Kerns-Cummings, and Ms. Gabor for their efforts to apply for this Grant, with a special thanks to Ms. Gabor who wrote the application. Mr. Kutz stated that he looks forward to being granted the funding for this program and for the positive impact it will have on the community.

Mr. Dahir expressed his thanks to Mr. Kutz.

C. Environmental Health Services, Chad Westom, Director

EHS Division and Program Updates – Community Development, Food, Land Development, Safe Drinking Water, Vector-Borne Disease and Waste Management

Mr. Westom informed that the Health District, NDEP and TMWA have been working diligently and have reached an agreement on the waiver regarding water main additions of 500 lineal feet or less for TMWA System 190, with the agreement having been signed on December 4th, 2017. He stated the agreement is between Washoe County, the Health District and TMWA with the support of NDEP.

Mr. Westom pledged that, should future issues with water plan review arise, that his Division would keep Board Members apprised and request direction from them.

Mr. Westom informed that the Health District is in discussion with NDEP and TMWA in regards to potentially expanding the current waiver or creating a new one with
the intent of reducing the amount of review needed for water development projects while protecting community water systems and the residents of Washoe County.

Mr. Dahir expressed appreciation for the expertise of Health District personnel, and stated that continued communication between staff and the Board regarding this issue would be the most beneficial way to solve any issues that may arise. Mr. Westom agreed, stating that transparency and communication have been and would continue to be of high priority.

Mr. Westom informed on the status of Pignic Pub and Patio’s request for regulations variance from the Food Protection Hearing and Advisory Board (FPHAB) that would allow them to operate with their unique business model. Mr. Westom informed that they did have their food establishment permit suspended on November 17, 2017 due to non-compliance and concern of a substantial health hazard. He stated that their bar permit is still in effect.

Mr. Westom informed that there had been a hearing scheduled with the FPHAB on December 7, 2017, but the meeting could not proceed due to lack of quorum. He stated that there would be another hearing scheduled for the upcoming week.

Mr. Westom stated that they are working with Pignic to try to support their business model, and listed three sections of the Regulations of the Washoe County District Board of Health Governing Food Establishments that Pignic is requesting variance from.

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

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

Dr. Todd updated the seasonal influenza surveillance statistics through week forty-nine with the number of cases reported as one hundred sixty two; an increase of eleven cases from the date of the report. He informed that the percentage is now at 2.3%, just under the regional baseline, but forecast that our area would soon have enough cases to be listed as local or regional activity due to the rising case numbers.

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

District Health Officer Report – Water Projects, Strategic Planning Update, Public Health Accreditation, Quality Improvement, Community Health Needs Assessment, Community Health Improvement Plan, Truckee Meadows Healthy Communities, Other Events and Activities and Health District Media Contacts.

Mr. Dick stated the items needed for Accreditation at the time of his report had been twenty-four, but was happy to report that they now have forty-six of the required 213 documents that have passed the review process for items that will meet PHAB requirements.

Mr. Dick informed that Ms. Peters and Ms. Hilliard would be traveling back to the Public Health Accreditation Board Training in Washington DC in February, and that the electronic document submittal system would then be opened to the Washoe County Health District. Mr. Dick stated that the efforts to achieve Accreditation were going strong and that he would continue to report progress to the Board.

15. *Board Comment

Mr. Young opined that it would be interesting to see how the process of working with Pignic Pub and Patio’s business model would unfold and opined there would be challenges.
Dr. Hess inquired if it would be of interest to the other Board Members to have the Emergency Operations Plan detailed for the Washoe County Health District and combined with the Plan for the Inter-hospital Council, because he noticed the one included in his packet was for the Inter-hospital Council only. The other members agreed this would be of interest to have presented at the next DBOH Meeting.

Dr. Hess requested the Board Members to keep the effort to fund the Public Health scholarship a priority.

Mr. Dahir inquired if the Health District has approached WNDD, the Western Nevada Development District, for grant funding. He informed that he serves on their board, and opined that there are federal grant funding opportunities for the Health District.

17. *Public Comment

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

18. Adjournment

Vice Chair Novak adjourned the meeting at 3:03 p.m.
How to Get Copies of Agenda and Support Materials. Supporting materials are available to the public at the Washoe County Health District located at 1001 E. 9th Street, in Reno, Nevada. Ms. Laura Rogers, Administrative Secretary to the District Board of Health is the person designated by the Washoe County District Board of Health to respond to requests for supporting materials. Ms. Rogers is located at the Washoe County Health District and may be reached by telephone at (775) 328-2415 or by email at lrogers@washoecounty.us. Supporting materials are also available at the Washoe County Health District Website www.washoecounty.us/health pursuant to the requirements of NRS 241.020.