

**WASHOE COUNTY
DISTRICT BOARD OF HEALTH**

Denis Humphreys, OD, Chairman
Matt Smith, Vice Chairman
George Furman, MD,
Councilman Dan Gustin
Commissioner Kitty Jung
Amy J Khan, MD, MPH
Councilwoman Julia Ratti

ANNOTATED AGENDA

Meeting of the
DISTRICT BOARD OF HEALTH
Building B
South Auditorium
1001 East Ninth Street
Reno, Nevada
November 18, 2010
1:00 PM
NOTICE

PURSUANT TO NRS 241.020, PLEASE BE ADVISED THAT THE AGENDA FOR THE DISTRICT BOARD OF HEALTH MEETING HAS BEEN POSTED AT THE FOLLOWING LOCATIONS: WASHOE COUNTY HEALTH DISTRICT (1001 E. 9TH ST), RENO CITY HALL (1 E. 1ST ST), SPARKS CITY HALL (431 PRATER WAY), WASHOE COUNTY ADMINISTRATION BUILDING (1001 E. 9TH ST), AND ON THE WASHOE COUNTY HEALTH DISTRICT WEBSITE @ WWW.WASHOECOUNTY.US/HEALTH. PUBLIC COMMENT IS LIMITED TO THREE (3) MINUTES PER PERSON.

The Board of Health may take action on the items denoted as “(action)”.

Business Impact Statement – A Business Impact Statement is available at the Washoe County Health District for those items denoted with a \$

1. Call to Order, Pledge of Allegiance Led by Invitation	HELD
2. Roll Call	HELD
3. Public Comment (3 minute time limit per person)	NO COMMENTS PRESENTED
4. Approval/Deletions to the Agenda for the November 18, 2010 Meeting (action)	APPROVED AS AMENDED
5. Approval/Additions/Deletions to the Minutes of the October 28, 2010 Meeting (action)	APPROVED

- 6. Recognitions and Proclamations
 - A. Introduction of New Employees
 - 1. Heather Holmstadt - EPHP
 - 2. Christina Conti - EPHP
 - B. Years-of-Service
 - 1. Linda Gabor – CCHS – 5 Years
 - 2. Luke Franklin – EHS – 10 Years
 - 3. Susan Henkes – EHS – 10 Years
 - 4. Sandi Bridges – EPHP – 15 Years
 - 5. Mike Osborn – AQM – 15 Years
 - 6. Margot Jordan – CCHS – 20 Years
 - 7. Cindy Mullen – CCHS – 20 Years
 - C. Public Relations Society of America Sierra Nevada Chapter's Silver Spike Awards – Gold Spike Community Excellence Award
 - 1. Phil Ulibarri – EPHP Public Information Officer
 - D. Letter of Thanks from Dr. Denise Montcalm, Interim Dean and Ms. Christina Sarman, Associate Director of Development and Alumni Relations, University of Nevada, Reno University of Nevada, Division of Health Services for the Board's Support of the District Board of Health Scholarship and a Note of Thanks from Emily Wozniak for Being Recognized by the Board as the 1st Recipient of the District Board of Health Scholarship

INTRODUCTION OF NEW EMPLOYEES
 MS HEATHER HOLMSTADT
 MS CHRISTINA CONTI

YEARS-OF-SERVICE
 LINDA GABOR – 5 YEARS
 LUKE FRANKLIN – 10 YEARS
 SUSAN HENKES – 10 YEARS
 SANDI BRIDGES- 15 YEARS
 MIKE OSBORN – 15 YEARS
 MARGOT JORDAN – 20 YEARS
 CINDY MULLEN – 20 YEARS

PUBLIC RELATIONS SOCIETY OF AMERICA - SIERRA NEVADA CHAPTER SILVER SPIKE AWARDS – GOLD SPIKE COMMUNITY EXCELLENCE AWARD
 PHIL ULIBARRI

LETTERS OF THANKS – UNIVERSITY OF NEVADA RENO – DISTRICT BOARD OF HEALTH SCHOLARSHIP
 BOARD OF HEALTH

- 7. Consent Agenda

Matters, which the District Board of Health may consider in one motion. Any item, however, may be discussed separately by Board member request. Any exceptions to the consent agenda must be stated prior to approval.

- A. Air Quality Management Cases
 - 1. Recommendation to Uphold Citations Unappealed to the Air Pollution Control Hearing Board
 - a. No Cases This Month
 - 2. Recommendations of Cases Appealed to the Air Pollution Control Hearing Board
 - a. No Cases This Month
- B. Recommendation to Approve Variance Case(s) Presented to the Sewage, Wastewater & Sanitation Hearing Board
 - 1. No Cases This Month

- C. Budget Amendments / Interlocal Agreements
 - 1. Approval of Notice of Subgrant Award from the Nevada State Health Division, in the Amount of \$368,230 in Support of the Assistant Secretary for Preparedness and Response (ASPR) Hospital Preparedness Program for the Period of July 1, 2010 to June 30, 2011; and Approval of Amendments Totaling a Decrease of \$68,035 in Both Revenue and Expense to the FY 11 ASPR Hospital Preparedness Federal Grant Program, IO 10708 (action)
 - 2. Approval of Notice of Grant Award dated October 28, 2010 from the Department of Health and Human Services Public Health Service, in the Amount of \$943,735 in Support of the Family Planning Program for the Period of June 30, 2010 to June 29, 2011; and Approval of Amendments Totaling an Increase of \$47,352 in Both Revenue and Expense to the FY 11 Family Planning Title X Federal Grant Program, IO 10025 (action)

APPROVED

APPROVED

<p>D. Donation</p> <p>1. Acknowledgement of Donation of Items in the Amount of \$234.96 from the Breastfeeding Taskforce of Nevada for the Washoe County Health District (action)</p>	ACKNOWLEDGED
<p>8. A. Approval of Notice of Subgrant Award from the Nevada State Health Division in the Amount of \$744,415 (with \$74,441 or 10% Health District Match) in Support of the Centers for Disease Control and Prevention (CDC) Public Health Preparedness (PHP) Program for the Period of August 10, 2010 to August 9, 2011; Approval of Amendments Totaling an Increase of \$71,638 in Both Revenues and Expense to the FY 11 CDC PHP Federal Grant Program, IO 10713; Authorize the Creation of an On-Call Epidemiologist Intermittent Hourly Position (PC#TBD) as Evaluated by the Job Evaluation Committee (JEC); Authorize the Creation of an On-Call Public Health Investigator Intermittent Hourly Position (PC #TBD) as Evaluated by the Job Evaluation Committee (JEC) (action)</p>	APPROVED
<p>B. Approval of Notice of Subgrant Award from the Nevada State Health Division in the Amount of \$116,000 (\$58,000 FY 11, \$58,000 FY 12) in Support of the Maternal and Child Health (MCH) Program for the Period of January 1, 2011 to June 30, 2012; Approval of Amendments Totaling an Increase of \$33,060 in Both Revenue and Expense to the FY 11 MCH Federal Grant Program, IO 10828; Approval of Amendments Totaling an Increase of \$24,940 in Both Revenue and Expense to the MCH State Grant Program, IO 10007, to Bring the FY 11 Adopted Budget Into Alignment with the Grant; Authorize the Creation of an On-Call Public Health Nurse Intermittent Hourly Position (PC#TBD) as Evaluated by the Job Evaluation Committee (JEC) (action)</p>	APPROVED
<p>9. Air Pollution Control Hearing Board Cases – Appealed to the District Board of Health</p> <p>A. No Cases This Month</p>	
<p>10. Regional Emergency Medical Services Authority CONTINUED TO THE DECEMBER MEETING</p> <p>A. Review and Acceptance of the Operations and Financial Report for October 2010 (action)</p> <p>B. Update of REMSA's Community Activities Since October 2010</p>	CONTINUED TO DECEMBER
<p>11. Review and Acceptance of the Monthly Public Health Fund Revenue and Expenditure for October 2010 (action)</p>	ACCEPTED
<p>12. Presentation and Possible Discussion of Article by Ms. Liz Gambash, <i>Federal Grants Management Handbook "When Is It Right to 'Just Say No' to Grants?"</i> with Possible Direction to Staff (action)</p>	CONTINUED TO DECEMBER
<p>13. Consideration of the Preventive Medicine Residency and Fellowship (PMR/F) Application Centers for Disease Control (CDC) and Prevention with Possible Approval (action)</p>	APPROVED TO PROCEED
<p>14. Washoe County Health District – 2011 Legislative Bill Tracking with Possible Direction to Staff (action)</p>	ACCEPTED
<p>15. Discussion of and Possible Appointment of an Interim Health Officer and the Potential Effective Date of Such an Appointment with Discussion Specific to the Overlap of the Interim Health Officer and the Possible Determination of the Last Date of Employment of the Existing Health Officer (action)</p>	<p>INTERIM DISTRICT HEALTH OFFICER APPOINTMENT – DECEMBER 1, 2010 DR. ANDERSON'S LAST DAY – DECEMBER 10, 2010 MS MARY-ANN BROWN – APPOINTED INTERIM DISTRICT HEALTH OFFICER</p>
<p>16. Update on the District Board of Health Personnel and Administration Committee Meeting of November 12, 2010</p> <p>A. Presentation of Information from the Washoe County Human Resources (HR) and the Discussion of the P/A Committee Specific to the Compensation Package for the New District Health Officer with Possible Direction to HR and Staff (action)</p> <p>B. Discussion and Acceptance of Dr. Anderson's Self-Evaluation (action)</p>	DISCUSSED WITH DIRECTION TO STAFF AND HUMAN RESOURCES
	CONTINUED – DECEMBER 16, 2010

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|-----|---|-----------------------|
| 17. | Presentation of the Overview of the 2010 Annual Rotary Family Flu POD (Points of Dispensing) | PRESENTED |
| 18. | Clarification on District Board of Health Items Which Do Not Have to be Presented to the Board of County Commissioners | PRESENTED |
| 19. | Presentation and Possible Discussion of the Local Public Health Governance Performance Assessment Instrument - National Public Health Performance Standards Program | CONTINUED TO DECEMBER |
| 20. | Update on the Washoe County ACHIEVE Community (2010-2011) & NACCHO Site-Visit | PRESENTED |
| 21. | Immunization Program Update | CONTINUED TO DECEMBER |
| 22. | Staff Reports and Program Updates
A. Director, Epidemiology and Public Health Preparedness – Communicable Disease; Public Health Preparedness (PHP) Activities
B. Director, Community and Clinical Health Services – No Report This Month
C. Director, Environmental Health Services – No Report This Month
D. Director, Air Quality Management - Monthly Report of Air Quality: Everything Green, Monitoring/Planning Activities, Permitting Activities, Compliance/Inspection Activity, and Enforcement Activity; 2008 Period Emissions Inventory – On-Road Mobile Sources for Submission to the US EPA
E. Administrative Health Services Officer – No Report This Month
F. District Health Officer – NACCHO Model Practice Submission; Epidemiology and Prevention of Vaccine Preventable Diseases | PRESENTED |
| 23. | Board Comment – Limited to Announcements or Issues for Future Agendas | COMMENTS PRESENTED |
| 24. | Adjournment (action) | ADJOURNED |

NOTE: Items on the agenda without a time designation may not necessarily be considered in the order in which they appear on the agenda.
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**WASHOE COUNTY
DISTRICT BOARD OF HEALTH**

Denis Humphreys, OD, Chairman
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A G E N D A

Meeting of the
DISTRICT BOARD OF HEALTH

Building B

South Auditorium

1001 East Ninth Street

Reno, Nevada

November 18, 2010

1:00 PM

N O T I C E

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1:00 PM	1.	Call to Order, Pledge of Allegiance Led by Invitation	Dr. Humphreys
	2.	Roll Call	Ms. Smith
	3.	Public Comment (3 minute time limit per person)	Dr. Humphreys
	4.	Approval/Deletions to the Agenda for the November 18, 2010 Meeting (action)	Dr. Humphreys
	5.	Approval/Additions/Deletions to the Minutes of the October 28, 2010 Meeting (action)	Dr. Humphreys

6. Recognitions and Proclamations Dr. Humphreys
- A. Introduction of New Employees
1. Heather Holmstadt - EPHP
 2. Christina Conti - EPHP
- B. Years-of-Service
1. Linda Gabor – CCHS – 5 Years
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1. Phil Ulibarri – EPHP Public Information Officer
- D. Letter of Thanks from Dr. Denise Montcalm, Interim Dean and Ms. Christina Sarman, Associate Director of Development and Alumni Relations, University of Nevada, Reno University of Nevada, Division of Health Services for the Board's Support of the District Board of Health Scholarship and a Note of Thanks from Emily Wozniak for Being Recognized by the Board as the 1st Recipient of the District Board of Health Scholarship
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1. Recommendation to Uphold Citations Unappealed to the Air Pollution Control Hearing Board Mr. Bonderson
 - a. No Cases This Month
 2. Recommendations of Cases Appealed to the Air Pollution Control Hearing Board Mr. Bonderson
 - a. No Cases This Month
- B. Recommendation to Approve Variance Case(s) Presented to the Sewage, Wastewater & Sanitation Hearing Board Mr. Coulter
1. No Cases This Month
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 2. Approval of Notice of Grant Award dated October 28, 2010 from the Department of Health and Human Services Public Health Service, in the Amount of \$943,735 in Support of the Family Planning Program for the Period of June 30, 2010 to June 29, 2011; and Approval of Amendments Totaling an Increase of \$47,352 in Both Revenue and Expense to the FY 11 Family Planning Title X Federal Grant Program, IO 10025 **(action)**

- D. Donation
1. Acknowledgement of Donation of Items in the Amount of \$234.96 from the Breastfeeding Taskforce of Nevada for the Washoe County Health District **(action)**
8. A. Approval of Notice of Subgrant Award from the Nevada State Health Division in the Amount of \$744,415 (with \$74,441 or 10% Health District Match) in Support of the Centers for Disease Control and Prevention (CDC) Public Health Preparedness (PHP) Program for the Period of August 10, 2010 to August 9, 2011; Approval of Amendments Totaling an Increase of \$71,638 in Both Revenues and Expense to the FY 11 CDC PHP Federal Grant Program, IO 10713; Authorize the Creation of an On-Call Epidemiologist Intermittent Hourly Position (PC#TBD) as Evaluated by the Job Evaluation Committee (JEC); Authorize the Creation of an On-Call Public Health Investigator Intermittent Hourly Position (PC #TBD) as Evaluated by the Job Evaluation Committee (JEC) **(action)** Ms. Buxton
 - B. Approval of Notice of Subgrant Award from the Nevada State Health Division in the Amount of \$116,000 (\$58,000 FY 11, \$58,000 FY 12) in Support of the Maternal and Child Health (MCH) Program for the Period of January 1, 2011 to June 30, 2012; Approval of Amendments Totaling an Increase of \$33,060 in Both Revenue and Expense to the FY 11 MCH Federal Grant Program, IO 10828; Approval of Amendments Totaling an Increase of \$24,940 in Both Revenue and Expense to the MCH State Grant Program, IO 10007, to Bring the FY 11 Adopted Budget into Alignment with the Grant; Authorize the Creation of an On-Call Public Health Nurse Intermittent Hourly Position (PC#TBD) as Evaluated by the Job Evaluation Committee (JEC) **(action)**
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 - A. No Cases This Month
 10. Regional Emergency Medical Services Authority **CONTINUED TO THE DECEMBER MEETING** Mr. Smith
 - A. Review and Acceptance of the Operations and Financial Report for October 2010 **(action)**
 - B. Update of REMSA's Community Activities Since October 2010
 11. Review and Acceptance of the Monthly Public Health Fund Revenue and Expenditure for October 2010 **(action)** Ms. Coulombe
 12. Presentation and Possible Discussion of Article by Ms. Liz Gambash, *Federal Grants Management Handbook "When Is It Right to 'Just Say No' to Grants?"* with Possible Direction to Staff **(action)** Ms. Coulombe
 13. Consideration of the Preventive Medicine Residency and Fellowship (PMR/F) Application Centers for Disease Control (CDC) and Prevention with Possible Approval **(action)** Dr. Anderson
 14. Washoe County Health District – 2011 Legislative Bill Tracking with Possible Direction to Staff **(action)** Dr. Anderson
Ms. Hadayia
 15. Discussion of and Possible Appointment of an Interim Health Officer and the Potential Effective Date of Such an Appointment with Discussion Specific to the Overlap of the Interim Health Officer and the Possible Determination of the Last Date of Employment of the Existing Health Officer **(action)** Dr. Humphreys
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 - A. Presentation of Information from the Washoe County Human Resources (HR) and the Discussion of the P/A Committee Specific to the Compensation Package for the New District Health Officer with Possible Direction to HR and Staff **(action)**
 - B. Discussion and Acceptance of Dr. Anderson's Self-Evaluation **(action)**

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| 17. | Presentation of the Overview of the 2010 Annual Rotary Family Flu POD (Points of Dispensing) | Dr. Todd |
| 18. | Clarification on District Board of Health Items Which Do Not Have to be Presented to the Board of County Commissioners | Ms. Admirand |
| 19. | Presentation and Possible Discussion of the Local Public Health Governance Performance Assessment Instrument - National Public Health Performance Standards Program | Ms. Jung |
| 20. | Update on the Washoe County ACHIEVE Community (2010-2011) & NACCHO Site-Visit | Ms. Hadayia |
| 21. | Immunization Program Update | Ms. Brown
Mr. Kutz
Ms. Jordan |
| 22. | Staff Reports and Program Updates | |
| | A. Director, Epidemiology and Public Health Preparedness – Communicable Disease; Public Health Preparedness (PHP) Activities | Dr. Todd |
| | B. Director, Community and Clinical Health Services – No Report This Month | Ms. Brown |
| | C. Director, Environmental Health Services – No Report This Month | Mr. Sack |
| | D. Director, Air Quality Management - Monthly Report of Air Quality: Everything Green, Monitoring/Planning Activities, Permitting Activities, Compliance/Inspection Activity, and Enforcement Activity; 2008 Period Emissions Inventory – On-Road Mobile Sources for Submission to the US EPA | Mr. Dick |
| | E. Administrative Health Services Officer – No Report This Month | Ms. Coulombe |
| | F. District Health Officer – NACCHO Model Practice Submission; Epidemiology and Prevention of Vaccine Preventable Diseases | Dr. Anderson |
| 23. | Board Comment – Limited to Announcements or Issues for Future Agendas | Dr. Humphreys |
| 24. | Adjournment (action) | Dr. Humphreys |

NOTE: Items on the agenda without a time designation may not necessarily be considered in the order in which they appear on the agenda.

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WASHOE COUNTY DISTRICT BOARD OF HEALTH MEETING
Board Room - Health Department Building
Wells Avenue at Ninth Street

November 18, 2010

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WASHOE COUNTY DISTRICTBOARD OF HEALTH MEETING

November 18, 2010

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WASHOE COUNTY DISTRICTBOARD OF HEALTH MEETING

November 18, 2010

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WASHOE COUNTY DISTRICT BOARD OF HEALTH MEETING
November 18, 2010

PRESENT: Denis Humphreys, OD, Chairman; Mr. Matt Smith, Vice Chairman; George Furman, MD; Councilman Dan Gustin; Commissioner Kitty Jung; Amy Khan, MD; and Councilwoman Julia Ratti

ABSENT: None

STAFF: Dr. Mary Anderson, District Health Officer; Eileen Coulombe, Administrative Health Services Officer; Bob Sack, Director, Environmental Health Services; Dr. Randall Todd, Director, Epidemiology and Public Health Preparedness; Mary-Ann Brown, Director, Community and Clinical Health Services; Kevin Dick, Director, Air Quality Management; Patsy Buxton, Fiscal Compliance Officer; Lori Cooke, Fiscal Compliance Officer; Stacey Akurosawa, Administrative Assistant II; Margot Jordan, Infection Control/Quality Management Coordinator; Mike Osborn, Air Quality Specialist; Lee Salgado, Public Health Intern; Jeff Whitesides, Public Health Program Manager; Scott Strickler, Environmental Health Services Specialist; Steve Fisher, Department Computer Application Specialist; Curtis Splan, Department Computer Application Specialist; Peg Caldwell, Registered Nurse; Heather Holmstadt, Public Health Investigator; Christina Conti, Public Health Emergency Response Coordinator; Jennifer Hadayia, Public Health Program Manager; Steve Kutz, Public Health Nursing Supervisor; Luke Franklin, Environmental Health Services Specialist; Samdi Bridges, Office Support Specialist; Bev Bayan, WIC Program Manager; Tracie Douglas, Public Information Officer; Jeanne Rucker, Environmental Health Specialist Supervisor; Tony Macaluso, Environmental Health Services Specialist; Amber English, Environmental Health Specialist; Jim English, Environmental Health Specialist; Rick Sanchez, Environmental Health Specialist; Sharon Clodfelter, Health Statistician; Janet Smith, Recording Secretary; and Leslie Admirand, Deputy District Attorney

At 1:05 pm, Chairman Humphreys called the Washoe County District Board of Health meeting to order, followed by the Pledge of Allegiance led by Dr. Mary Anderson, District Health Officer.

ROLL CALL

Roll call was taken and a full Board noted.

WASHOE COUNTY DISTRICT BOARD OF HEALTH MEETING

November 18, 2010

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PUBLIC COMMENT

No public comment was presented.

APPROVAL/DELETIONS – AGENDA – NOVEMBER 18, 2010

Chairman Humphreys advised that item 20. Update on the Washoe County ACHIEVE Community (2010-2011) & NACCHO Site Visit will be presented after item 7. Consent Agenda; that item; that item 19. Presentation/Possible Direction – Local Public Health Governance Performance Assessment Instrument – National Public Health Performance Standard Program will be presented after item 16. Update on the District Board of Health and Administration Committee Meeting of November 12, 2010.

**MOTION: Ms. Ratti moved, seconded by Mr. Smith, that the agenda for the District Board of Health meeting be approved as presented.
Motion carried unanimously.**

APPROVAL/ADDITIONS/CORRECTIONS – MINUTES – OCTOBER 28, 2010

Chairman Humphreys called for any additions, deletions or corrections to the minutes of the October 28, 2010 meeting.

**MOTION: Ms. Ratti moved, seconded by Ms. Jung, that the minutes of the District Board of Health October 28, 2010 meeting be approved as received.
Motion carried unanimously.**

RECOGNITIONS

Dr. Randall Todd, Director, Epidemiology and Public Health Preparedness (EHPH), introduced Ms. Heather Holmstadt, advising Ms. Holmstadt is a new Public Health Investigator in the Communicable Disease Program/ Epi Investigation Team.

Dr. Todd introduced Ms. Christina Conti, advising that Ms. Conti is the new Public Health Emergency Response Coordinator, who will function as the "health care systems liaison with the various health care institutions."

Chairman Humphreys and Dr. Anderson presented Certificates of Recognition to Mr. Luke Franklin for **10 Years-of-Service**; Ms. Sandi Bridges for **15 Years-of-Service**; Mr. Michael Osborn for **15 Years-of-Service**; Ms. Margot Jordan for **20 Years-of-Service**; and Ms. Cindy Mullen for **20 Years-of-Service**.

Chairman Humphreys and Dr. Anderson advised that Mr. Phil Ulibarri, Public Information Officer, will be honored tonight at the Public Relations Society of America Sierra Nevada Chapter's Silver Awards dinner receiving the *Gold Spike Community Excellence Award*, which recognizes a public relations professional who utilizes his/her professional skills in public service activities which provides a positive service in social and economic well being in the community.

Dr. Anderson advised that a letter of thanks has been received from Dr. Denise Montcalm, Interim Dean and Ms/ Christine Sarman, Associate Director of Development and Alumni Relations, University of Nevada, Reno, University of Nevada, Division of Health Services for the Board's Support of the District Board of Health Scholarship. Also received was a thank you note from Ms. Emily Wozniak for being recognized by the Board as the first recipient of the District Board of Health Scholarship.

Chairman Humphreys

Stated that he encountered Ms. Wozniak at an American Heart Association event the night after her recognition; that "she approached him to thank him again as she was still thrilled about receiving the first scholarship.

Dr. Anderson

Advised that the University of Nevada School of Human and Health Sciences is "undergoing the accreditation process"; that as a member of the Advisory Board she noted that one of the questions asked "is if there are endowments such as scholarships for this program; that she was able to respond that there is a Board of Health Scholarship supporting this Program.

CONSENT AGENDA – BUDGET AMENDMENTS/INTERLOCAL AGREEMENTS

The Board was advised that Staff recommends **approval** of the **Notice of Subgrant Award** from the **Nevada State Health Division** in the amount of **\$368,230** in support of the **Assistant Secretary of Preparedness and Response (ASPR) Hospital Preparedness Program** for the

period of July 1, 2010 to June 30, 2011; and **approval of amendments totaling a decrease of \$68,035** in both revenue and expense to the **FY 11 ASPR Hospital Preparedness Federal Grant Program, IO 10708.**

The Board was advised that Staff recommends **approval of the Notice of Grant Award**, dated October 28, 2010 from the **Department of Health and Human Services Public Health Service** in the amount of **\$943,735** in support of the **Family Planning Program** for the period of June 30, 2010 to June 29, 2011; and **approval of amendments totaling an increase of \$47,352** in both revenue and expense to the **FY 11 Family Planning Title X Federal Grant Program, IO 10025.**

MOTION: Ms. Ratti moved, seconded by Mr. Smith, that the Notice of Subgrant Award and the Notice of Grant Award, with the corresponding budget amendments, be approved as outlined and the Chairman authorized to execute on behalf of the Board where applicable.

Motion carried unanimously.

CONSENT AGENDA – DONATION – BREASTFEED TASK FORCE – WASHOE COUNTY HEALTH DISTRICT

The Board was advised that Staff recommends acknowledgement of the donation of items in the amount of \$234.96 from the Breastfeeding Taskforce of Nevada for the Washoe County Health District.

MOTION: Ms. Ratti moved, seconded by Mr. Smith, that the donation of items in the amount of \$234.96 from the Breastfeeding Taskforce of Nevada for the Washoe County Health District, be acknowledged as outlined.

Motion carried unanimously.

UPDATE – WASHOE COUNTY ACHIEVE COMMUNITY (2010-2011) & NACCHO SITE VISIT

Ms. Jennifer Hadayia, Public Health Program Manager

Advised that approximately one (1) year ago she requested the Board's approval in applying for a grant opportunity in chronic disease prevention; that this was the Action Communities for Health, Innovation, and EnVironmental changE (ACHIEVE) grant. Staff has completed year one (1) of the grant and will be beginning year two (2); that Staff "has accomplished the deliverables for year one (1)."

Introduced Mr. Kenneth Smith, National Association of County and City Health Officials (NACCHO), advising that NACCHO was the ACHIEVE grantor; that the Health District is in the process of the "year one (1) site visit." Staff "has been showing Mr. Smith the community including good examples of support for chronic disease prevention and some not so good examples, which Staff hopes to change; that Mr. Smith has met with the Chronic Disease Team and Dr. Anderson; that she invited him to the meeting to hear Staff's presentation."

ACHIEVE is a national initiative, "under the umbrella of the Center for Disease Control and Prevention (CDC) '*Healthy Communities Program*' focused on policies, systems and environmental change to prevent chronic disease." The Program focuses on the three (3) modifiable risk factors for chronic disease: physical inactivity, poor nutrition, and tobacco use and exposure." ACHIEVE has five national partners: NACCHO; National Association of Chronic Disease Directors (NACDD); National Recreation and Parks Association (NRPA); Society of Public Health Education (SOPHE), and the YMCA.

ACHIEVE is the result of many years of research that has culminated in a "best practice" recommendation "that the most effective way to prevent chronic diseases in the community, at a population-wide level, is to change the environment in which people live so that it promotes healthy lifestyles. To change the environment requires changing policies both at a legislative or regulatory level and on a voluntary basis." These "best practices recommendations of CDC" have recently been endorsed by the White House Task Force on Childhood Obesity.

This grant is a national designation for the Washoe County Health District for a three (3) year period with two (2) years of funding; that "it is a recognition that the community has the infrastructure and the track record for effective policy change to prevent chronic disease in the community." Staff "is very proud of receiving this designation."

Displayed a map of the participating ACHIEVE communities as of February 2010; that "there were only five (5) communities designated as ACHIEVE sites, within the western region; that "to be one (1) of the five (5) is a wonderful testament to the community and its infrastructure; and to the promise of the successful work of the Program."

Advised the components of ACHIEVE are: 1) to design a CHART Team, a leadership team comprised of influential policy-makers; 2) conduct the CHANGE Tool, a CDC-developed policy needs assessment tool measuring 65 different policies in five (5) areas (physical activity, nutrition, tobacco, Chronic Disease Self-Management (CDSM), and leadership) in four (4) sectors (Community-Based Organization (CBO), worksite, healthcare, and schools/district). The CHANGE

tool "not only measures what policies are in-place but also the readiness for new policy change."
3) Develop a written Community Action Plan (CAP), delineating policies to be changed in the community in years two (2) and three (3). In years two (2) and three (3) the process "moves into 4) Implementation of the proposed policy changes, including a minimum of one (1) Big "P" (a community-wide policy) and one little "p" (a voluntary policy at an organization site or a particular sector) related to chronic disease risk factors.

Advised the Board that "Chart Team" participants include "key Washoe County Departments; that Commissioner Jung represents the County Commission and Dr. Khan represents the District Board of Health. The CHART Team was "designed to represent all of the key sectors within the community, all of which will be assessed in terms of policy and readiness." The CHART Team had been meeting monthly; that the frequency of these meetings has been reduced "as the process moves into the implementation phase in which work groups will be developed."

Utilizing the CHANGE tool, from June through August 2010, Staff assessed fifteen (15) sites in four (4) sectors, including the community at-large (CAL) and the School District. The Methods were the review of primary and secondary data; multiple key informant interviews; observational checklists and site-visits. There were two (2) scales utilized: one (1) is there a policy in-place and the second is the environment scale, "which, refers to, if there is a policy in-place how supportive is the environment for that policy." Each module had a percentage score (0 – 100%); that Staff averaged a score within each sector. CDC established a "benchmark of 60% or more as an asset; that less than 60% demonstrates a need.

Presented a graph depicting "the Community At-Large Policy and Environmental Data", advising that the graph indicates the five (5) modules which were assessed; that the policy score is depicted in blue, which is specific to "is there a policy related to these issues?" The environmental score is depicted in yellow, which is "is the environment supportive?" This is a compilation of all the policies and all the measures which were assessed; that those areas less than 60% indicate a need within the community at-large and those in excess of 60% indicate an asset. Reviewed the results in detail, advising that nutrition was the lowest and tobacco the highest, which was attributed to the smoking ban. "Consistently in all sectors and modules environment scored greater than policy; that Staff concluded many sites and sectors have informal practices; that they are supporting their students or employees or the community in these healthy behaviors; however, there is no policy." That without a written policy, if the environment(s), which had been supportive, are no longer available at a location "then the supports go away; therefore, the environments could be eliminated" for a number of reasons (i.e., a change in leadership or in the community). Staff identified this "as an opportunity because if an environment is strong all that is necessary is to provide assistance in writing a policy."

Opportunities for change are within community-wide nutrition, adoption of model policies to codify informal practices, and engaging leadership community-wide for chronic disease prevention programs. The CHART Team was "very much involved in the process of identifying mission, vision, goals and objectives" for the Community Action Plan (CAP). The vision is "to make good health easy"; that "this is consistent with the research from CDC, which indicates when policies are adopted that creates environments that are healthy – engaging in the healthy choice becomes the easy choice."

The mission of the CAP is "to fill gaps in community-wide nutrition and physical activity policies," with the following three (3) goals: 1) increase the percentage of Washoe County adults who are at a healthy weight; 2) increase the percentage of Washoe County children who are at a healthy weight; and 3) improve the Chronic Disease Prevention infrastructure in Washoe County.

Reviewed in detail the seven (7) determined objectives, advising that these are objectives "which can be achieved during the next year of implementation."

Advised that the Community Action Plan (CAP) is available on the GetHealthyWashoe.com website for review; that the Board members have been provided with a copy of the CAP Strategic Map: 2010 – 2012, which summarizes the vision, mission, and goals and objectives (a copy of which was placed on file for the record). During the coming year Staff will be providing further updates regarding the ACHIEVE grant. The CHART Team will be working in smaller groups to develop the healthy food plan, to develop the family engagement initiative, to work with the Regional Planning Governing Board, etc. She will report on the activities and progress of those workgroups next year.

Chairman Humphreys

Stated that during the 2010 Obesity Forum he noted "one (1) out of every three (3) school age child is either overweight or obese, which translates to adult obesity and health problems such as diabetes." This is a very important program and he would thank Staff for the efforts in the Program.

The Board thanked Ms. Hadayia for the update.

NOTICE OF SUBGRANT AWARD – NEVADA STATE HEALTH DIVISION – CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC) PUBLIC HEALTH PREPAREDNESS (PHP) PROGRAM

A. The Board was advised that Staff recommends **approval** of the **Notice of Subgrant Award** from the **Nevada State Health Division** in the amount of **\$744,415 (with \$74,441 or 10% Health District match)** in support of the **Centers for Disease Control and Prevention (CDC) Public Health Preparedness (PHP) Program** for the period of August 10, 2010 to August 9, 2011; **approval of amendments totaling an increase of \$71,638** in both revenue and expense to the **FY 11 CDC PHP Federal Grant Program, IO 10713**; **authorize the creation of an on-call Epidemiologist Intermittent Hourly position (PC#TBD)** as evaluated by the Job Evaluation Committee (JEC); and **authorize the creation of an on-call Public Health Investigator Intermittent Hourly position (PC#TBD)** as evaluated by the Job Evaluation Committee (JEC).

B. The Board was advised that Staff recommends **approval** of the **Notice of Subgrant Award** from the **Nevada State Health Division** in the amount of **\$116,000 (\$58,000 – FY 11; \$58,000 – FY 12)** in support of the **Maternal and Child Health (MCH) Program** for the period of January 1, 2011 to June 30, 2012; **approval of amendments totaling an increase of \$33,060** in both revenue and expensed to the **FY 11 MCH Federal Grant Program, IO 10828**; **approval of amendments totaling an increase of \$24,940** in both revenue and expense to the **MCH State Grant Program, IO 10007**; and **authorize the creation of an on-call Public Health Nurse Intermittent Hourly position (PC#TBD)** as evaluated by the Job Evaluation Committee (JEC).

Ms. Patsy Buxton, Fiscal Compliance Officer

Advised that in addition to approving both Notices of Subgrant Awards, Staff is requesting the District Board of Health to authorize the creation of three (3) new on-call intermittent hourly positions, which include a Public Health Investigator; Epidemiologist and a Public Health Nurse.

An intermittent hourly employee is an individual who is not employed on a 'fixed schedule' and does not work in excess of 1,039 hours in a Fiscal Year; these individuals are paid at an hourly rate and are non-benefits eligible. With the current exception of Epidemiology and Public Health Preparedness each Division in the Health District utilizes on-call intermittent hourly positions; that she has provided the Board members with a chart (a copy of which was placed on file), delineating how those positions are utilized "by program."

Staff recommends these positions be approved to provide "the needed flexibility for the Divisions to staff short-term grants and to provide surge-capacity during critical peak periods." Utilizing

intermittent hourly positions is cost-effective as compared to contracting for these positions. Creation of these positions would require approval from the Board of Washoe County Commissioners. Should the Board of Health approve the intermittent hourly positions the Board members comments will be incorporated into the Staff Report for the Board of County Commissioners. The intermittent hourly positions will be evaluated by the Job Evaluation Committee (JEC) prior to being presented to the Board of County Commissioners.

Ms. Jung

Questioned if the Job Evaluation Committee has approved these positions; and if it is approved by the JEC would "it come back to the Board of Health or be presented to the Board of County Commissioners."

In response to Ms. Jung

Ms. Buxton advised that the job classification have not yet been presented to the Job Evaluation Committee JEC for review; that should the Board of Health approve the positions Staff will submit the appropriate request to the JEC for review. Should the JEC approve the positions as submitted the request will be presented to the Board of County Commissioners for approval.

Ms. Jung

Questioned if that "is the way it is always done or does the Job Evaluation Team usually review it before being presented to the Board of Health."

In response to Ms. Jung

Ms. Buxton advised previously the Health District has had the Board of Health approve the position prior to proceeding to the Job Evaluation Committee (JEC).

Dr. Furman

Stated he would anticipate that the Job Evaluation Committee "would look at the number of Epidemiologists (at the Health District] compared to national levels."

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In response to Dr. Furman

Ms. Buxton stated that the JEC "reviews the duties and skills as identified by the Division Director to be performed and evaluates it against the current classification to ensure it is appropriately classified." She is unsure if the JEC conducts a comparison with other districts.

Dr. Furman

Stated the "median number of Epidemiologists employed by local health departments with a population between 250,000 and 500,000 is one (1)."

Ms. Buxton

Advised that the Public Health Epidemiologist and Public Health Investigator positions are grant funded in the Public Health Preparedness Grant Award; that the Health District position "has been that should the funding not be available the Health District cannot use the positions." The District does attempt "to keep the positions on record in the event that funding becomes available the District can utilize that position; that the District would not utilize a position if there was no funding to support the expense."

Dr. Khan

Questioned if there is a minimal number of hours of work that must be provided for these positions.

In response to Dr. Khan

Ms. Buxton advised that the District is not required to provide a minimum number of hours; that the handout to the Board indicates those employees who worked in excess of sixteen (16) hours between May and November of this year.

Dr. Khan

Stated that currently the Health District does not have the internal capacity in the event of an outbreak similar to the H1N1 that occurred last year, nor is there "a surplus of trained Epidemiologists or Public Health Investigators available to the District in the event of an outbreak." Approval of these positions "provides [the Health District] with a safety-net or surge capacity in the event of an outbreak such as an unusual strain of influenza, avian flu or something new.

Epidemiologists and Public Health Investigators are not commonly found. She would not "think there is a surplus of these individuals; therefore, to the extent it is possible to be able to identify an on-call Epidemiologist" would be of benefit. She would question if that has been an issue previously and how it was addressed; that further, she would question how it would be addressed should these on-call positions not be approved.

In response to Dr. Khan

Ms. Buxton advised that during the H1N1 outbreak Staff utilized the services of a retired Health District Epidemiologist; however, the District contracted with a temporary employment agency for those services "at a much higher hourly rate." Without approval of these positions by the Board of Health it would "probably be necessary to contract with a temporary agency should these services be required again."

Ms. Ratti

Advised that this "is a very strategic method to respond to funding opportunities through the development of a flexible work source that can be deployed as necessary; that it makes a lot of sense and she is completely supportive."

Mr. Smith

Questioned if these positions "are stand-by as call ins"; that he would question what happens to the money if there is no need."

In response to Mr. Smith

Ms. Buxton advised that these positions would be utilized "as programs determine the need for additional resources; that should there be no need the grant has some flexibility allowing funds to be redirected to other expenditures or other activities as identified."

In response to Chairman Humphreys

Regarding the grants "having parameters as to how those funds could be reallocated if not utilized as specified", Ms. Buxton advised that the majority of the grants "have a 10% reallocation authorization included in the grant; that Staff does an excellent job in communicating with the grantor as to how funds are expended if it is not specified in the award."

MOTION: Ms. Ratti moved, seconded by Dr. Furman, that the Notice of Subgrant Award from the Nevada State Health Division in the amount of \$744,415 (with \$74,441 or 10% Health District match), in support of the Centers for Disease Control and Prevention (CDC) Public Health Preparedness (PHP) Program for the period of August 10, 2010 to August 9, 2011; approval of amendments totaling an increase of \$71,638 in both revenue and expense to the FY 11 CDC PHP Federal Grant Program, IO 10713; authorize the creation of an on-call Epidemiologist Intermittent Hourly position (PC#TBD) as evaluated by the Job Evaluation Committee (JEC); authorize the creation of an on-call Public Health Investigator Intermittent Hourly position (PC#TBD) as evaluated by the Job Evaluation Committee (JEC), be approved as presented and the Chairman authorized to execute on behalf of the Board.
Motion carried unanimously.

MOTION: Ms. Ratti moved, seconded by Dr. Furman, that the Notice of Subgrant Award from the Nevada State Health Division in the amount of \$116,000 (\$58,000 – FY11; \$58,000 – FY12), in support of the Maternal and Child Health (MCH) Program for the period of January 1, 2011 to June 30, 2012; approval of amendments totaling an increase of \$33,060 in both revenue and expenses to the FY 11 MCH Federal Grant Program, IO 10828; approval of amendments totaling an increase of \$24,940 in both revenue and expense to the MCH State Grant Program, IO 10007; and authorize the creation of an on-call Public Health Nurse Intermittent Hourly position (PC#TBD) as evaluated by the Job Evaluation Committee (JEC), be approved as presented and the Chairman authorized to execute on behalf of the Board.
Motion carried unanimously.

REGIONAL EMERGENCY MEDICAL SERVICES AUTHORITY

Chairman Humphreys advised that the Operations and Financial Report for October 2010 will be continued to the Board's December 16, 2010 meeting.

REVIEW – ACCEPTANCE – MONTHLY PUBLIC HEALTH FUND REVENUE AND EXPENDITURE – OCTOBER 2010

Ms. Eileen Coulombe, Administrative Health Services Officer

Advised the Board members have been provided with a copy of Health Fund Revenue and Expenditure Report for the month of October 2010; that Staff recommends the Board accept the Report as presented.

Advised that next month's agenda will include the Budget Calendar for FY 12.

MOTION: Mr. Smith moved, seconded by Ms. Jung, that the District Health Department's Revenue and Expenditure Report for October 2010 be accepted as presented.

PRESENTATION – DISCUSSION – ARTICLE – MS LIZ GAMBASH – FEDERAL GRANTS MANAGEMENT HANDBOOK “WHEN IS IT RIGHT TO ‘JUST SAY NO’ TO GRANTS? – POSSIBLE DIRECTION TO STAFF

Chairman Humphreys advised that this item will be continued to the Board's December 16, 2010 meeting.

CONSIDERATION – PREVENTIVE MEDICINE RESIDENCY AND FELLOWSHIP (PMR/F) APPLICATION – CENTERS FOR DISEASE CONTROL (CDC) AND PREVENTION

Dr. Anderson

Advised that she has provided the Board members with a copy of the template that is required for completing the application for a Preventive Medicine Residence and Fellowship with the Centers for Disease Control and Prevention (CDC). This is an opportunity to potentially obtain the services of a residence for an eleven (11) month period from CDC; working in conjunction with Staff “at a high level to obtain leadership experience.” Advised that Dr. Khan is “a former CDC resident who came to Nevada through this Program; that “whether or not Washoe County Health District would be considered will be determined on the number of applications competing for a small pool of residents.” The template she provided is a draft as Staff is in the process of identifying projects in which this individual would provide assistance; that “these are sample projects.” She would request direction from the Board in submitting the application.

In response to Chairman Humphreys

Regarding any fiscal impact to the Health District should the application be successful, Dr. Anderson advised that the resident is an employee of the CDC; that the CDC pays the salary and benefits of the resident; that additionally CDC pays for moving expenses and travel. The Health District would be required to provide office space, a computer, parking and financial support for local and [Health District] assignment-related to travel. The benefit compared to the costs is "very small."

Chairman Humphreys

This type of program is very beneficial for the resident; that it would be very beneficial to the Health Department; that there would be a fiscal benefit "in having another individual available to support work in various projects." He is very supportive of the application.

Ms. Ratti

Advised that she also supports the application.

MOTION: Ms. Ratti moved, seconded by Mr. Gustin, that Staff complete the application process with the Centers for Disease and Prevention (CDC) for the services of a Preventive Medicine Residency and Fellowship (PMR/F), as discussed.

Motion carried unanimously.

WASHOE COUNTY – 2011 LEGISLATIVE BILL TRACKING – POSSIBLE DIRECTION TO STAFF

Chairman Humphreys

Advised that the Board members have been provided with an update to the Bill Draft Requests (BDRs) the Community and Clinical Health Services Division) is monitoring; that there are no further updates. Staff would recommend the Board accept the Report.

Dr. Khan

Questioned if the Health District "traditionally registers any Staff as a Lobbyist during the Legislative Session. Further questioned if Staff identifies who will be registered as a Lobbyist."

In response to Dr. Khan

Dr. Anderson

Advised that "registering Staff as Lobbyists is the traditional approach."

Ms. Coulombe

Advised that during previous Sessions Ms. Hadayia has served as the liaison; that traditionally the Health Officer serves as the Health District's Registered Lobbyist. Ms. Hadayia will continue to coordinate as the liaison and Mrs. Smith will coordinate the reports presented to the Board.

Dr. Khan

In reviewing this month's list of BDRs there are two (2) categories, with one relating to communicable/infectious diseases and the other to chronic disease; that with Dr. Anderson's departure her concern is that "consideration has been given to identifying those individuals with the appropriate level of expertise available to provide testimony" at the Legislature should it be necessary."

In response to Dr. Khan

Ms. Coulombe

Advised that during previous Sessions each one of the Division Directors, or the "subject matter experts" within the Divisions has been available to provide testimony as necessary. The Health District participates in the County-wide tracking system. This issue was discussed during the Leadership Team meeting with the consensus that each Division Director "would be tracking within each of the Division and assign the BDRs to the appropriate Staff member and coordinating it at the Leadership Team."

Dr. Khan

Stated that "this is critical; that the Board may want to consider having the Division Directors register anticipating there may be the need to provide testimony."

In response to Dr. Khan

Dr. Anderson

Advised that there "are challenges for some grant-funded employees with restrictions prohibiting such an individual from testifying"; that Health Department Staff with the appropriate expertise have provided testimony without being Registered Lobbyists.

Ms. Jung

Stated she would request the Health District coordinates its efforts with the County's Legislative Team and the County's Lobbyist.

In response to Ms. Jung

Ms. Mary-Ann Brown, Director, Community and Clinical Health Services

Advised that the format being utilized by the Health District is "what the County has requested"; therefore, "all of the information will go to the County in regard to Staff or the Board's position, the Health District's level of involvement, if Staff will be presenting testimony, etc." The last column on the BDR Tracking form is more specific "as to the preferred method of communicating with Mr. John Slaughter of the County Legislative Team; therefore, there is the coordination." The Board of Health, when accepting the monthly Report will be approving Staff's recommendation unless otherwise directed; that all of it "is in conjunction with the County's lobbying efforts."

Dr. Furman

As Chairman of the Board he was a Registered Lobbyist for the Board; that "he doesn't believe it made much difference; that he has provided more testimony when he wasn't a Lobbyist."

**MOTION: Mr. Smith moved, seconded by Ms. Jung, that the 2011 Legislative Bill Tracking Report be accepted as presented.
Motion carried unanimously.**

DISCUSSION – POSSIBLE APPOINTMENT – INTERIM HEALTH OFFICER – POTENTIAL DATE OF SUCH APPOINTMENT – DISCUSSION – OVERLAP – INTERIM HEALTH OFFICER – POSSIBLE DETERMINATION – LAST DATE OF EMPLOYMENT – EXISTING HEALTH OFFICER'

Chairman Humphreys

- Advised that the Board has three (3) actions to determine: 1) the appointment of an Interim Health Officer; 2) to confirm the effective starting date of the Interim Health Officer; that previously the Board discussed "December 1, 2010, as that starting date"; and 3) determine a "last date of employment for Dr. Anderson, allowing one to two weeks of overlap between Dr. Anderson and the newly appointed interim. Should the Board determine to appoint the Interim Health Officer, effective December 1, 2010, he would recommend Dr. Anderson's final date of employment as December 10, 2010, providing an eight (8) day overlap.

These are important decisions for the Board acknowledging "what the needs of the Health Department are at this time, ensuring the critical functions of the Health District are maintained without distractions." The Health District and Board will work in conjunction with Washoe County Human Resources (HR) during this process; that Division Directors, who were interested in serving as the Interim Health Officer submitted letters of interest to HR; that the HR received four (4) letters of interest from Ms. Mary-Ann Brown; Ms. Eileen Coulombe; Mr. Bob Sack and Dr. Randall Todd. He will ask those four (4) individuals to leave the auditorium; that he will ask each to return individually in alphabetical order to respond to a question from the Board.

As discussed the recruitment period for the new District Health Officer will "take three (3) to five (5) months to complete; therefore, the Board "should select an individual who is able to lead the team, build a bridge from December 1, 2010 through a permanent District Health Officer is appointed." There are "critical issues that will need to be addressed with specific detail; therefore, it will be necessary for proper staffing in those positions to ensure those functions are continued without concerns."

Mr. Gustin

Stated he would recommend the other two (2) determinations be made prior to interviewing the candidates. He would support a December 1, 2010 date of appointment for the Interim Health Officer and the date of December 10, 2010, as Dr. Anderson's last day as the District Health Officer.

MOTION: Mr. Gustin moved, seconded by Ms. Jung, that the appointment of the Interim Health Officer become effective Wednesday, December 1, 2010. It was further ordered that Dr. Anderson's last date of employment as the

**District Health Officer, will be Friday, December 10, 2010.
Motion carried unanimously.**

The Board asked each candidate the following question: "What do you think will be the main challenges for, or the needs of the Interim Health Officer over the next three (3) to five (5) months? And how do you feel you would address or take care of these needs and challenges?"

Chairman Humphreys

Reiterated that "it is important for the Board to determine what is needed for the Health District at this point in time, and make a decision as to who could accomplish those needs." He would "applaud the four (4) individuals who stepped-forward; that this demonstrates good leadership"; that further it indicates the "strength that the Leadership Team has." As discussed, he believes what this individual needs "is leadership skills, the ability to team-build for collaboration; morale-builder for forward movement of the team; communicator and someone able to manage change. This individual will need to bridge the Health Department from where it is in this point in time to when the permanent Health Officer is appointed." There are critical functions which will be necessary, and "all four (4) individuals spoke to these: 1) budget negotiations; 2) legislative concerns; 3) Emergency Medical Services (EMS); that it is necessary for the Board "to have the appropriate Staff n place to attend to those critical functions to allow the Health District to move forward taking care of those critical functions without distraction of any dilution of effort from Staff."

Requested comments from the Board.

Dr. Khan

All of the Division Directors would be very capable in serving as the Interim Health Officer; that the Board has appreciated the skills each "brings to their positions and in the support of public health." A component of the Board's deliberation "may require the Board to consider 'what is the capacity in regard to backfilling in any one of these Division Director positions and what that would mean for the operations for the rest of that Division.'" The Board "would not expect any major/substantial changes in the direction of the Department but would expect an on-going stewardship and support to assist navigating the unknown." The Board "appreciates the interest in serving in this role, acknowledging that in each Division there is more and more effort being made by each individual in doing more with a limited budget."

Mr. Smith

Thanked the four (4) Division Directors for applying for the interim position, as "he appreciate it; that he knows each of these individuals could do this job." He does have concerns regarding "where the Health District is and what is ahead; that there is a lot of work ahead" for the District and the Board. He is "very concerned that if issues such as the budget, EMS, etc., are not monitored very closely it could hurt the Health District. The most important thing for the Board to recognize there is big job ahead that needs to be done"; therefore, it is necessary to choose an individual whose appointment "will not interfere with the major issues facing the Health District."

Ms. Ratti

Stated she concurs "it is impressive that all four (4) candidates have stepped up and that all four (4) candidates could do the job and do it well." The Chairman of the Board has worked more with the Health Officer in a one-on-one capacity; that as it is necessary to retain a continuity in that partnership between the Board Chairman and the Interim Health Officer she would support appointing "whomever the Board of Health Chairman is most comfortable."

Chairman Humphreys

Stated he completes his terms as Chairman December 31, 2010; therefore, it is the determination of the Board.

Ms. Jung

Stated she "would applaud the Staff members who have applied to fill in this bridge in leading the team until the appointment of the permanent Health Officer." She, too, has concerns regarding retaining those people who are critical to the positions they have. "These individuals are not her top candidates because of how well they perform in the jobs they hold as they do those so well. She believes Ms. Mary-Ann Brown has what [the Board] is looking for regarding being able to continue the team building, being able to, communicating well, and has already done quite a bit of change-management." The Board has already been required to greatly reduce her budget and has "brought programs into range of what Title X should be; that she also has tremendous credibility with the Board of County Commissioners", as she has had to respond to the BCC's questions repeatedly.

Ms. Coulombe is too valuable to have anywhere "away from the budget"; that with the upcoming 2011 Legislative Session, it is too critical not to have Mr. Sack available for any of those issues.

Dr. Todd was invaluable during the "H1N1 outbreak and she doesn't believe those days are over; therefore, he is too valuable to that Division."

MOTION: Ms. Jung moved, seconded by Ms. Ratti, that Ms. Mary-Ann Brown, be appointed as the Interim District Health Officer, beginning December 1, 2010.

Dr. Furman

Stated Ms. Jung "has made some excellent points"; however, there are programs which are going to require further review; that the individual "who has the best and longest experience and is the best equipped to review those programs, is Ms. Coulombe the Administrative Health Services Officer. She is the best suited for the job because of her experience and background in Administration."

Mr. Gustin

As the other Board members have stated, he applauds all four (4) of the individuals who applied; that it does demonstrate leadership, as all four (4) are more than capable of doing the job. All of the candidates "were put on the spot and expected to answer a question of great depth, with all demonstrating an understanding of the problems of fiscal responsibility, good stewardship, outreach to the community, etc." The most important issue is communication; that nothing "can be achieved in the private or public sector without adequate communication and understanding with the people you work with or for." He reviewed and was impressed with all of the resumes; that it wasn't possible to prepare "a structured response; that he heard from all the candidates 'how important the job is, what they could do, and an understanding of the importance of the job'. After listening to everyone's responses he would be in support of the appointment of Ms. Brown."

Dr. Khan

Among the Division Directors who applied there is approximately "100 years of public health service"; that she appreciates Mr. Gustin's comment regarding the importance of communication; that "Ms. Brown did express that very clearly. Ms. Brown is the one with the least amount of amount of public health experience"; however, "that does not mean she doesn't have other critical experience working in the health care sector, which is also very important, particularly in the community sector. During the interim it is critically important that with the Interim Health Officer there is no resistance or reluctance of 'tapping-into' the wealth of experience and expertise among the group; that the Board of Health members would expect that. As no one has all the answers"; therefore, "the willingness to collaborate, be convivial is going to be critical. Based on all things

considered she believes Ms. Brown could do an excellent job in the role, with the caveat she has a broad-breath of experience at her disposal of which she should take advantage.”

MOTION: Ms. Jung moved, seconded by Ms. Ratti, that Ms. Mary-Ann Brown, be appointed as the Interim District Health Officer, beginning December 1, 2010.

Motion carried with Dr. Furman voting “no”.

Chairman Humphreys

Congratulated Ms. Brown, advising her that her effective date as Interim Health Officer will be December 1, 2010; that there will be the eight (8) days of overlap with Dr. Anderson; that Dr. Anderson’s last day will be Friday, December 10, 2010.

UPDATE – PERSONNEL AND ADMINISTRATION COMMITTEE MEETING – NOVEMBER 12, 2010

A. Presentation of Information from the Washoe County Human Resources (HR) and the Discussion of the P/A Committee Specific to the Compensation Package for the New District Health Officer with Possible Direction to Staff

Chairman Humphreys

There were two (2) items discussed by the Personnel and Administration Committee during the meeting of November 12, 2010, including the continuing recruitment process for the new permanent District Health Officer. He and Staff have been working with Ms. Katey Fox, Director, Washoe County Human Resource (HR). Dr. Furman worked closely with HR during the last recruitment; that Dr. Furman has agreed to serve as the contact individual for the District Board of Health with HR during this process.

Ms. Katey Fox, Director, Washoe County Human Resources

At the P/A Committee meeting Ms. Ratti requested more specific information as to salary comparisons with what may be perceived as comparable health district organizations in the western United States; and information specific to the salary comparison of the Washoe County District Health Officer and the Division Directors.

Provided the Board members with a copy of a "district Health Officer Comparison) (a copy of which was placed on file for the record). Ms. Akurosawa provided HR with information regarding the district health officer salary comparisons conducted in 2005; that HR has provided this information with additional salary comparison information. Reviewed the information provided in detail, advising that this "was a fairly quick study conducted by Human Resources."

It is important to remember that *Nevada Revised Statute* (NRS) stipulates the District Health Officer's salary is determined by the Board of Health; that other County employees' salary is determined by an established classification methodology. Utilizing the classification methodology Washoe County establishes the "top of the range to the salary comparison mid-point; that the highest a job class is paid at is at the market average"; therefore, the Board may "want to consider the mid-point salary information. The top of the range for the Washoe County District Health Officer is \$149,073.60; that the average mid-point salary range from the data collected is \$155,978."

Advised the second page provides an overview of comparable health districts in which the health officer may or may not also function as a department head; that in the salary comparison there wasn't that much of a distinction in the mid-point range.

Advised the third page provides an overview of district health officer positions in which the health officer is a medical doctor; that again, there wasn't that much of a distinction in the mid-point salary range from other jurisdictions to what the Board established as the Health Officer's salary.

The Committee did discuss that the Health Officer's current compensation does represent an approximate salary reduction of 2.84%, which "all employees of Washoe County were requested to share in a salary reduction for the current Fiscal Year." As the Health Officer's salary is determined by the Board of Health there was discussion regarding requesting Hay and Associates, the County contractor, to conduct a salary evaluation for this position.

Chairman Humphreys

Advised that the information provided today was prepared in a "very brief period of time" as requesting a review by Hay and Associates to provide a salary comparison will require approximately two (2) to three (3) weeks. He would question if the Board is confident of the data provided today or would make the determination to have Hay and Associates conduct a salary comparison.

Ms. Fox

Reviewed the last page of the handout, advising that it provides the comparison of the Washoe County District Health Officer with the Division Directors. The Epidemiology and Public Health Preparedness (EPHP) Director's salary is approximately 99.79% of that of the District Health Officer's salary. The salary of two (2) of the other Division Directors are approximately 20% less than that of the District Health Officer, "which is a recognized methodology regarding compensation levels, with division directors being compensated between 10-20% less than the department head/director."

In response to Ms. Ratti

Regarding the salaries of the Division Directors, Ms. Fox advised that those salaries were reviewed by Hay and Associates; that all of the positions in Washoe County were reviewed with classifications being determined and salary levels being established. "It is a best practices to have a 10% distinction between a division director and a department; however, the Director of the EPHP Division is required to have a Doctorate or a medical license; therefore, specific requirements in a job description can result in a difference in compensation."

Dr. Furman

Commended Ms. Fox and her staff for "doing an excellent job." Stated it is expected the District Health Officer will be available 24/7 to respond to any type of event. Further, the District Health Officer's position is 'at-will' or a temporary position as he/she serves at the pleasure of the Board "on a year-to-year" contract; and therefore, does not have the security of other positions, including other health officers." These are issues which should be taken into consideration when discussing compensation for the position; that the compensation for this position "needs to be higher."

Ms. Jung

Stated she "understands Dr. Furman's comments"; however, she disagrees regarding increasing the compensation. Due to the current economic conditions there is the "ability to garner an excellent candidate for the permanent position with the existing salary." Ms. Fox stated the comparison indicates the Health District is exactly where it should be in terms of the [salary] range. Most high level executives only get a year-to-year contract; that this allows the Board to make changes if necessary; that there shouldn't be a tremendous amount of permanency in that position." The salary range should remain "as it is"; that she acknowledges "best practices" is for the department head to receive 10% more than the next highest paid staff member; however, "she is not willing to increase the proposed salary for the District Health Officer position." To increase

the salary would "be a poor position considering what the County is facing with the upcoming Legislative Session and the inevitability that the State will 'sweep' more of the County's funds and there will be more reductions in the next Fiscal Year, with more being asked of the employees. She will not support a proposed salary increase."

Ms. Ratti

Stated "Dr. Furman makes an excellent point"; however, "that point is offset by the current economy; that [the Board] is not in the position of increasing the salary, particularly when it has been demonstrated the salary is in the ball-park." She would support maintaining the compensation package.

Dr. Khan

Stated there is mix of responsibilities and duties within each health district across the country; that "there is a broader scope of practice in the Washoe County Health District than in many other districts across the country." She would question if Ms. Fox and HR reviewed "the scope of practice in the other health districts; that although it is much larger, a comparison may be the Southern Nevada Health District as it functions under the same authority as Washoe County. She is aware that across the country there is great variability in the scope of practice" in local and regional health departments/districts.

In response to Dr. Khan

Ms. Jung stated it is necessary "to be mindful in comparing the Washoe County Health District with Southern Nevada that the cost of living in Southern Nevada is quite a bit more than Washoe County"; therefore, she does not want to compare the two (2).

In response to Dr. Khan

Ms. Fox stated that HR did not compare the Washoe County Health District; therefore, she does not have information regarding the Southern Nevada Health District. Hay and Associates has the expertise "as to what are true market comparables for Washoe County; that she would "want to leave the comparable to those who do it day-in and day-out."

Mr. Smith

Stated in reviewing the comparisons provided, his concern is "there won't be too many individuals interested in applying and coming here." Some areas are "paying a lot more than what is being paid here without being at the maximum salary."

Dr. Anderson

Stated she would suggest the Board of Health consider not only the compensation being offered but "some of the additional benefits provided to the Health Officer through the contract, which she has considered very valuable", including the payment of her medical license, the opportunity to attend approved CME training courses. A suggestion that was discussed was to provide a vehicle allowance rather than claiming mileage "as a mechanism for additional compensation."

In response to Dr. Anderson

Ms. Jung stated that "she disagrees – she does not believe the position needs a vehicle allowance. Rather than anticipate what may be necessary she would suggest the Board wait to determine what the market will bear." There are "plenty of people with the qualifications the Board set to get a quality individual at the best market rate possible so that the individual and the Health District can be sustainable." Reiterated "she is vehemently opposed to that"; that she does not support increasing the salary range; nor does she support having Hay and Associates review the salary range.

Ms. Jung was excused at 2:53 pm.

Chairman Humphreys

Advised that the individual for the position "has to have some special experience and special education; that it is not known what will occur until the announcement is disseminated." As Mr. Smith stated, "if the offered salary is too low it will not entice individuals" to apply; that a subsequent announcement with a salary revision there is a concern "as to how that would be perceived in a human resources arena. He shares this concern."

Ms. Fox

Stated Ms. Jung did present valid concerns of conditions which exist in Northern Nevada regarding pay and public employees; that Ms. Jung is "being mindful of the balance between finding a highly qualified individual and being responsible to employees within the County and the surrounding cities." The County recently conducted a recruitment for a high-level position which was not successful. The Personnel Committee did discuss that "in today's economic environment highly qualified individuals are reticent to leave an existing position because of the risk – the risk of coming for a year-to-year employment contract, the rate of unemployment and foreclosures, etc." The Board has the difficult decision of "balancing all of those competing interests

Mr. Smith

Stated he would support requesting that HR have Hay and Associates conduct a salary comparison, as his concern is "otherwise there will not be enough applicants interested in applying for the position." It would be worth the time and effort to have the comparison performed; that Hay and Associates "are the professionals."

MOTION: Mr. Smith moved, seconded by Ms. Ratti, that Washoe County Human Resources request Hay and Associates to conduct a salary comparison of health officers from comparable areas.

Dr. Furman

Stated that the District has to be able to compete with what other jurisdictions are paying for "a very important position" in Washoe County; that he appreciates the Board's discussion on this and the transparency of the issue."

In response to Ms. Ratti

Regarding the cost of utilizing the services of Hay and Associates, Ms. Fox advised that it will be approximately \$2500 - \$3,000 to conduct the study.

Ms. Ratti

Stated "she is comfortable with the amount and that it would be well worth the money", acknowledging when the information is presented to the District Board there may remain "some philosophical questions remaining." The P/A Committee did discuss this issue regarding the timing of the recruitment and the study; however, she concurs with Dr. Furman regarding the importance

of the position. She would question if it would be the intent of the Board to delay the implementation of the recruitment until such as the study is received or would it be the intent of the Board to initiate the process without listing a salary.

In response to Ms. Ratti

Ms. Fox

As discussed during the P/A Committee a study by Hay and Associates will "take two (2) to three (3) weeks to complete the analysis and present a report, which will "be a little more detailed allowing the Board to make a more meaningful conclusions based upon those comparisons. She would encourage the use of the services of Hay and Associates as they are the experts who do this daily." She would anticipate having the information for the Board for by the December 16, 2010 meeting. The end of November and December are not "a good time to post and attempt to conduct a recruitment; therefore, it would be more productive to wait until HR has the information from Hay and Associates and the recruitment brochure from the recruiting firm for the Board's review. As discussed at the P/A Committee meeting, she would have concerns regarding listing the position without noting a salary as some candidates may opt out of applying if a salary is not listed.

Ms. Ratti

Stated she would support the motion; that she concurs the holidays would not be a good time to initiate the recruitment; that she would support the motion as the Board "would not be losing ground by requesting the data and delaying the implementation of the process."

Chairman Humphreys

Stated it has always been his intent that the Board "not rush the process; have the best process possible in-place; and ensure the Board has the opportunity to select the best candidate possible for the position; therefore, this is an appropriate action by the Board."

**MOTION: Mr. Smith moved, seconded by Ms. Ratti, that Washoe County Human Resources request Hay and Associates to conduct a salary comparison of health officers from comparable areas.
Motion carried with Dr. Khan abstaining.**

Chairman Humphreys

Requested that Ms. Fox contract with Hay and Associates to perform a salary comparison to present to the Board of Health. Ms. Fox did present a draft of a recruitment brochure for the Board's review; that Ms. Akurosawa has advised that there will be some corrections to the brochure. This is a "work in progress and he would request the Board members review the draft."

Ms. Fox

Advised that HR will work in conjunction with Dr. Furman, as HR is "very interested in learning the issues the new District Health Officer may have to address and resolve, the vision of the Health District, competencies which the Board wants in a District Health Officer."

Chairman Humphreys

Advised that Dr. Furman is a member of the P/A Committee; that "Dr. Furman is very good about communicating." Questioned Ms. Fox regarding the salary for the Interim District Health Officer.

In response to Chairman Humphreys

Ms. Fox

Advised that in accordance with Washoe County Code, Chapter 5, when an individual is expected to assume the duties of a higher class that individual is paid a 10% difference out-of-class salary; that for Ms. Brown it would increase her salary by \$5.70 an hour.

Ms. Ratti

Stated that her support of the Board requesting a review by Hay and Associates "is not a reflection on either Staff's efforts or those of the staff of HR; that HR has provided excellent information providing the resources and time that was available. She respects that the Board is "doing due diligence in ensuring there is the best possible data" to make its determination.

Chairman Humphreys

Stated he, too, appreciates the time HR has put into these efforts; that the Board is aware of the staffing shortages in HR; therefore, the Board acknowledges it has been a challenge for HR and that it is appreciated.

Ms. Fox

Stated she would thank the Board "for acknowledging the work of HR staff; that the comments are truly appreciated by HR staff." HR is committed to providing the analysis and information the Board requires to make a good decision in choosing the next District Health Officer.

Chairman Humphreys

Requested that as HR works with Hay and Associates, that he be provided updates as to the status of the analysis, should it be necessary to present the information to the P/A Committee.

B. Discussion and Acceptance of Dr. Anderson's Self-Evaluation

Chairman Humphreys

Advised that the Board members have received a copy of Dr. Anderson's self-evaluation; that he would request the Board members review it and provide comments to Mrs. Smith no later than Wednesday, December 1, 2010. Those comments will be forwarded to Ms. Fox at HR for a synopsis to be reviewed with Dr. Anderson in her exit interview.

Ms. Ratti

Questioned "if there would be any value to conducting an evaluation or reviewing Dr. Anderson's self-evaluation taking into consideration HR's limited staff."

Chairman Humphreys

Advised that this would be "a very informal process and would be incorporated into the exit interview and would not require any additional time by HR staff."

PRESENTATION – OVERVIEW – 2010 ANNUAL ROTARY FAMILY FLU POD (POINTS OF
DISEPENSING)

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

Advised that Saturday, October 16, 2010, was the Health District's Annual Rotary Family Flu POD (Points of Dispensing) event, which "has become an annual exercise of the District's ability to mass dispense. The mission being 'shots in arm or pills in mouths' to the entire population within a forty-eight (48) hour period of time from the decision to go." The Federal partners have indicated "the first twelve hours of this time period should be discounted, as it will require up to twelve (12) hours to receive whatever will be dispensed; therefore, there would essentially only be thirty-six (36) hours to achieve this. It would have to be performed safely through medical screening, planned education, in some instances social distancing to prevent the spread of a potentially contagious disease, and site and asset security."

The demand for seasonal flu shots is sufficient enough to provide the Health District "an opportunity to stress the mass dispensing designs. It is more realistic of an actual event with "real shots being dispensed to real people with real medical consequences should something go wrong."

This year's event was conducted as "a drive-through POD, which provides social distancing, which would be important if "there was a need to keep people from being in close contact; the logistics of drive-throughs are somewhat easier; people with disabilities do not have to get out of their vehicles; participants with children indicated it was easier as the children were more comfortable remaining in the car; and one participant drove through with the family pet in the vehicle."

Last year's POD event had both a walk-in and drive-through location with the Health District and volunteer staff dispensing 1500 immunizations at the drive-through location in approximately 4.5 hours. Last year's drive-through resulted in long waiting lines and subsequent traffic congestion, with the average wait time of 2 ~ 2.5 hours with Staff exposure to vehicle exhaust, resulting from vehicle idling. There were traffic flow problems as there was not a method for cars "to get around another car if one car was done and another wasn't." Staff applied "lessons learned" from last year's POD and the subsequent H1N1 clinics when planning this year's event.

Dr. Todd displayed pictures providing an overview of the drive-through event, advising that through cooperation with the University of Nevada Reno, the event was located in the west stadium parking garage at UNR. To prevent traffic congestion, long waiting lines and staff exposure to vehicle exhaust and Air Quality Management's concerns regarding vehicle idling wrist bands were distributed to 2,500 individuals with staggered 'appointment' times for arrival. Individual paperwork

was completed in a staging area with "engines turned-off. Groups of twenty-six (26) vehicles were then caravanned from the parking lot, to the garage where the immunizations were administered. Dr. Todd advised that there were 1,818 immunizations administered; that initially "Staff felt this was a high no-show rate; however, the wristbands were distributed one week prior to the event and were free; therefore, people had not invested a lot in obtaining the wristbands." Even so, there were 300 more immunizations administered at this year's event than last year's in the same amount of time with no traffic issues and no air quality issues. Staff was able to monitor the entire event from the "Department Operations Center utilizing WebEOC while simulating an internet outage and utilizing amateur radios to transmit web pages over the airwaves, which could occur in an actual event. This was a statewide exercise with Carson City conducting a drive-through and walk-through POD event.

An exit survey was conducted prior to vehicles exiting the garage. According to the survey the "throughput time was fourteen to thirty-three (14-33) minutes (from the time the vehicle entered the parking lot until exiting the garage), with an average time of twenty-five (25) minutes. The survey also indicated that 96.7% of the participants indicated "they were very happy or happy with the throughput time experienced." Those participating indicated the convenience of the UNR garage location "was fine." Obtaining a wristband required the additional "inconvenience of coming to the Health District to obtain a wristband prior to the event; however, the vast majority of participants indicated "they were happy or very happy" with that process." Dr. Todd presented a charts providing an overview of the demographics of the "race of the participants; and the insurance status of participants."

Dr. Todd reviewed the "lessons learned", advising that there is a "need for more space for volunteer staging; that space used in Legacy Hall was a little small; there should be better coordination for the 'just-in-time' training; better directions for how to pull into the shot stations, as the intent is for a vehicle to never have to back-up; and spreading out the arrivals and eliminating the two-step process of having to obtain a wristband then getting the immunization at a separate time. Staff is discussing with IT the possibility of an on-line appointment process.

Dr. Todd indicated that although staff and volunteers administered only 1,818 doses 2,500 does could have been administered with the same time frame. He would anticipate being able to administer 50,000 in a forty-eight (48) hour period utilizing this structure operating 24/7.

Comments received were: "awesome job, well organized, easiest, great job, etc." This was "one of the smoothest POD events to-date."

Chairman Humphreys

Stated that he has been impressed with the improvements to the POD exercises after each year's event – improving the wait-times, long lines, and the stream-lining of the process. Staff and the volunteers are to be commended for “job well done; that he has comfort in knowing an actual event could be operated in a very, very positive way.”

In response to Mr. Smith

Regarding utilizing the Livestock Event Center, Dr. Todd advised that the POD event was originally scheduled for the Livestock Event Center; however, “due to a paying customer requesting that date, Staff was required to find a second location.” Staff “needs to site-assess locations such as the Livestock Event Center, the Reno/Sparks Convention Center and other locations.” It is difficult to proceed beyond the site-assessment and an actual exercise as planning these events occurs months in advance and Staff is aware these types of venues “have to take paying customers when possible; however, it can cause problems with conducting the event.” It is important to have the site-assessments as in a real emergency these venues would probably be available.

Ms. Ratti

Advised that in assisting in the electronics recycling event which was held at the Reno Livestock Event Center, which resulted in traffic backing-up on the freeway and ultimately the Highway Patrol “shutting the event down.”

Dr. Todd

Staff did have concerns regarding traffic backing-up as the freeway is in close proximity to the UNR parking lot that was used as the staging area; that this did not become an issue for this event. There is the concern regarding how patient people would be in an actual emergency; that wristbanding would probably not be utilized in a actual event; however, there are other methods which would be implemented to spread the arrival times for the dispensing of immunizations or medications. The wristbanding “is a means to test theories for an actual exercise.”

Ms. Ratti

As a Board member she is impressed with “is the process improvement and continual learning; how dedicated Staff is to critiquing each event, learning from each one and implementing the appropriate adjustments.” She would commend the Staff and the volunteers.

The Board thanked Dr. Todd for the update.

CLARIFICATION – DISTRICT BOARD OF HEALTH ITEMS WHICH DO NOT HAVE TO BE PRESENTED TO THE BOARD OF COUNTY COMMISSIONERS

Chairman Humphreys

Advised that during the joint meeting of the Board of Health with the Board of County Commissioners (BCC) there was discussion regarding the BCC receiving "a lot of information from the Health District and how that amount of information could be reduced."

Ms. Leslie Admirand, Deputy District Attorney

Advised that the Board members have been provided with a handout (a copy of which was placed on file), indicating those Board of Health items which would have to be and those which do not have to be presented to the Board of County Commissioners. "Based upon language within the Interlocal Agreement there are Health District items were are placed on the Board of County Commissioners' agenda for the Board of County Commissioners' approval. However, the Board of County Commissioner approval is administerial in which there is no discussion; the BCC's duty is 'just to approve' the item." Commissioner Larkin had requested a decrease in the number of Items placed on the BCC agenda.

The handout items 1-16 are those items which are currently listed on the Board of County Commissioners' agenda; that both she and Ms. Foster, counsel to the Board of County Commissioners, presented the list to Commissioner Larkin for his recommendation "as to what items he would like to see deleted" from what is presented to the BCC. The right-hand side of the spreadsheet now indicates which items will continue to require BCC approval; which items the BCC will delegate the authority to the Board of Health and thus only require Board of Health approval; and those items which the BCC will delegate authority to the County Manager for review. Ms. Foster will present the recommendation to the Board of County Commissioners at the December meeting, delegating such authority to the Board of Health or the County Manager for final approval.

Chairman Humphreys

Thanked Ms. Admirand for the update, advising that "this will answer questions for Health District and County Staff; that upon acceptance by both Boards it can be disseminated to Staff; that this should assist in clarifying issues of concern.

Ms. Admirand

Advised that Ms. Jung had questioned the status of this report; that she reviewed the spreadsheet with Ms. Jung prior to the meeting. The only item she and Ms. Foster "declined to include in delegation to the Board of Health was item 14. out-of-state disinterments as *Nevada Revised Statute* (NRS) stipulates the Board of County Commissioners must make that decision."

In response to Dr. Khan

Regarding those Board of Health items requiring Board of County Commissioner approval, Ms. Admirand advised that those items "are similar to the 'consent agenda' items on the Board of Health agenda.

Ms. Brown advised that, as the Board of Health members can, these items on the Board of County Commissioners' agenda can be considered separately to allow for discussion.

The Board thanked Ms. Admirand for the update.

PRESENTATION – POSSIBLE DISCUSSION OF THE LOCAL PUBLIC HEALTH GOVERNANCE
PERFORMANCE ASSESSMENT INSTRUMENT – NATIONAL PUBLIC HEALTH
PERFORMANCE STANDARDS PROGRAM

Chairman Humphreys

Advised that as Ms. Jung was excused earlier, this item will be continued to the Board's December 16, 2010 meeting.

IMMUNIZATION PROGRAM UPDATE

Ms. Brown

Advised that due to the lateness of the meeting, Staff will continue this Program update.

STAFF REPORTS AND PROGRAM UPDATES

A. Director – Epidemiology and Public Health Preparedness

Dr. Randall Todd, Director, Epidemiology and Public Health Preparedness, presented his monthly Division Director's Report, a copy of which was placed on file for the record.

B. Director – Community and Clinical Health Services

There was no Community and Clinical Health Services Division Director's Report this month.

C. Director – Environmental Health Services

Mr. Bob Sack, Director, Environmental Health Services

Advised that EHS Staff will be issuing the "annual holiday advisory of food safety tips for the holidays."

D. Director – Air Quality Management

Mr. Kevin Dick, Director, Air Quality Management, presented his monthly Division Director's Report, a copy of which was placed on file for the record.

E. Administrative Health Services Officer

There was no Administrative Health Services Officer report this month.

F. District Health Officer's Report

Dr. Mary Anderson, District Health Officer, presented her monthly District Health Officer's Report, a copy of which was placed on file for the record.

BOARD COMMENT

Chairman Humphreys

Advised that he will request that Dr. Anderson be present at the Board's December 16, 2010 meeting to be recognized by the Board of Health for her years as the District Health Officer.

Ms. Ratti

Requested a report at the Board's December 16, 2010 meeting, from the newly appointed Interim Health Officer present "a plan as to how she will approach the Legislature as timeliness is of the essence. She would request information regarding who may be a Registered Lobbyist and who of Staff may be providing expert testimony, etc.

There being no further business to come before the Board, the meeting was adjourned at 3:45 pm.



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



JANET SMITH
RECORDER



Washoe County Health District



Public Health
Prevent. Promote. Protect.

STAFF REPORT BOARD MEETING DATE: 11/18/10

DATE: November 9, 2010

TO: District Board of Health

FROM: Patsy Buxton, Fiscal Compliance Officer, Washoe County Health District *PB*
775-328-2418, pbuxton@washoecounty.us

THROUGH: Eileen Coulombe, Administrative Health Services Officer, Washoe County Health District, 775-328-2417, ecoulombe@washoecounty.us *EC*

SUBJECT: Approval of Notice of Subgrant Award from the Nevada State Health Division in the amount of \$368,230 for the period July 1, 2010 to June 30, 2011 in support of the Assistant Secretary for Preparedness and Response (ASPR) Hospital Preparedness Program; Approval of amendments totaling a decrease of \$68,035 in both revenue and expense to the FY 11 ASPR Hospital Preparedness Federal Grant Program, IO 10708; and if approved authorize the Chairman to execute.

SUMMARY

The Washoe County District Board of Health must approve and execute, or direct the Health Officer to execute, contracts in excess of \$50,000, Interlocal Agreements and amendments to the adopted budget.

The Washoe County Health District received a Notice of Subgrant Award from the Nevada State Health Division for the period July 1, 2010 through June 30, 2011 in the total amount of \$368,230 in support of the Public Health Preparedness ASPR Grant Program. A copy of the Notice of Subgrant Award is attached.

District Board of Health strategic priority: Protect population from health problems and health hazards.

BCC Strategic Objective supported by this item: Safe, Secure and Healthy Communities.
BCC Strategic Outcome supported by this item: Healthy communities.

This item supports the Epidemiology and Public Health Preparedness (EPHP) Division's mission to strengthen the capacity of public health infrastructure to detect, assess, and respond decisively to control the public health consequences of bioterrorism events or any public health emergency.

AGENDA ITEM # 7.C.1.

PREVIOUS ACTION

The District Board of Health approved the Notice of Subgrant Award from the Nevada State Health Division for the period August 9, 2009 through June 30, 2010 in the total amount of \$409,525 at their November 19, 2009 board meeting.

BACKGROUND

The Nevada State Health Division has awarded the Public Health Preparedness Program \$368,230 for the period July 1, 2010 through June 30, 2011. Funds will be used to support personnel, travel, other professional services, and operating expenditures (items to include but not limited to: nutrition and hydration for MRC volunteer trainings, lanyards, hats, shirts, lapel pins, decals, cards for volunteer identification.)

Staff is working jointly with the Nevada State Health Division Public Health Preparedness program staff to develop the final version of the scope of work.

This budget amendment will also require Board of County Commissioners approval.

FISCAL IMPACT

Should the Board approve these budget amendments, the adopted FY 11 budget will be decreased by \$68,035 in the following accounts:

<u>Account Number</u>	<u>Description</u>	<u>Amount of Increase/(Decrease)</u>
2002-IO-10708-431100	Federal Revenue	(\$70,293)
2002-IO-10708-431105	Federal Revenue-Indirect	2,258
	Total Revenue	(\$68,035)
2002-IO-10708-701412	Salary Adjustment	1,078
-710100	Professional Svcs	(32,760)
-710110	Contracted/Temp Svcs	11,571
-710300	Operating Supplies	(13,230)
-710334	Copy Machine	132
-710350	Office Supplies	3,721
-710355	Books/Subscriptions	(374)
-710360	Postage	(480)
-710500	Other Expense	420
-710502	Printing	820
-710508	Telephone	1,484
-710509	Seminars/Meetings	1,198
-710519	Cellular Phone	(180)
-710585	Undesignated Budget	2,258
-711210	Travel	3,550
-711504	Equipment-NonCapital	(50,000)
-781004	Equipment-Capital	2,757
	Total Expenditures	(\$68,035)

RECOMMENDATION

Staff recommends that the Washoe County District Board of Health approve the Notice of Subgrant Award from the Nevada State Health Division in the amount of \$368,230 for the period July 1, 2010 to June 30, 2011 in support of the Assistant Secretary for Preparedness and Response (ASPR) Hospital Preparedness Program; Approve amendments totaling a decrease of \$68,035 in both revenue and expense to the FY 11 ASPR Hospital Preparedness Federal Grant Program, IO 10708; and if approved authorize the Chairman to execute.

POSSIBLE MOTION

Move to approve the Notice of Subgrant Award from the Nevada State Health Division in the amount of \$368,230 for the period July 1, 2010 to June 30, 2011 in support of the Assistant Secretary for Preparedness and Response (ASPR) Hospital Preparedness Program; Approve amendments totaling a decrease of \$68,035 in both revenue and expense to the FY 11 ASPR Hospital Preparedness Federal Grant Program, IO 10708; and if approved authorize the Chairman to execute.

HEALTH DIVISION

(hereinafter referred to as the DIVISION)

NOTICE OF SUBGRANT AWARD

Program Name: Public Health Preparedness Health Planning and Emergency Response Nevada State Health Division	Subgrantee Name: Washoe County Health District (WCHD)
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Address: 4150 Technology Way, Suite #200 Carson City, NV 89706-2009	Address: 1001 East Ninth Street Reno, Nevada 89520
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Subgrant Period: July 1, 2010 through June 30, 2011	Subgrantees: EIN#: 88-6000138 Vendor#: T40283400Q Dun & Bradstreet #: 073786998
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Reason for Award: FY 10 ASPR Hospital Preparedness Program (HPP). For activities that include, but are not limited to, exercising and improving preparedness plans for all-hazards including pandemic influenza, increasing the ability of healthcare systems to provide needed beds, engaging with other responders through interoperable communications systems, tracking bed and resource availability using electronic systems, developing the ESAR-VHP systems, protecting their healthcare workers with proper equipment, decontaminating patients, enabling partnerships/coalitions, education and training their healthcare workers, enhancing fatality managements and healthcare system evacuation/shelter in place plans, and coordinating regional exercises.

County to be served: () Statewide (X) Specific county or counties: Washoe County

Approved Budget Categories:

1. Personnel	\$	228,205
Contractual/Consultant	\$	59,828
3. Travel	\$	20,550
4. Supplies	\$	4,681
5. Equipment	\$	24,757
6. Other	\$	6,134
7. Indirect	\$	24,075
Total Cost	\$	368,230

Disbursement of funds will be as follows:
 Payment will be made upon receipt and acceptance of a reimbursement request/ invoice and supporting documentation specifically requesting reimbursement for actual expenditures *specific to this subgrant*. Total reimbursement will not exceed \$368,230 during the subgrant period.

Source of Funds:	% of Funds:	CFDA#:	Federal Grant #:
1. ASPR Hospital Preparedness Program	100%	93.889	6 U3REP090220-02-01

Terms and Conditions
 In accepting these grant funds, it is understood that:
 1. Expenditures must comply with appropriate state and/or federal regulations.
 2. This award is subject to the availability of appropriate funds.
 3. Recipient of these funds agrees to stipulations listed in Sections A, B, C and D of this subgrant award.

	Signature	Date
Denis M. Humphreys, OD Wa Co Dist Brd of Health	<i>[Signature]</i>	11/18/10
Tami M. Chartraw, MPA:HA Health Program Manager I	<i>[Signature]</i>	10/22/10
De Devine, MSW Health Program Manager II	<i>[Signature]</i>	10/25/10
Richard Whitley, MS Administrator, Health Division	<i>[Signature]</i>	

HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION A
Assurances

As a condition of receiving subgranted funds from the Nevada State Health Division, the Subgrantee agrees to the following conditions:

1. Subgrantee agrees grant funds may not be used for other than the awarded purpose. In the event Subgrantee expenditures do not comply with this condition, that portion not in compliance must be refunded to the Health Division.
2. Subgrantee agrees to submit reimbursement requests for only expenditures approved in the spending plan. Any additional expenditure beyond what is allowable based on approved categorical budget amounts, without prior written approval by the Health Division, may result in denial of reimbursement.
3. Approval of subgrant budget by the Health Division constitutes prior approval for the expenditure of funds for specified purposes included in this budget. Unless otherwise stated in the Scope of Work the transfer of funds between budgeted categories without written prior approval from the Health Division is not allowed under the terms of this subgrant. Requests to revise approved budgeted amounts must be made in writing and provide sufficient narrative detail to determine justification.
4. Recipients of subgrants are required to maintain subgrant accounting records, identifiable by subgrant number. Such records shall be maintained in accordance with the following:
 - a. Records may be destroyed not less than three years (unless otherwise stipulated) after the final report has been submitted if written approval has been requested and received from the Administrative Services Officer of the Health Division. Records may be destroyed by the Subgrantee five (5) calendar years after the final financial and narrative reports have been submitted to the Health Division.
 - b. In all cases an overriding requirement exists to retain records until resolution of any audit questions relating to individual subgrants.

Subgrant accounting records are considered to be all records relating to the expenditure and reimbursement of funds awarded under this Subgrant Award. Records required for retention include all accounting records and related original and supporting documents that substantiate costs charged to the subgrant activity.

5. Subgrantee agrees to disclose any existing or potential conflicts of interest relative to the performance of services resulting from this subgrant award. The Health Division reserves the right to disqualify any grantee on the grounds of actual or apparent conflict of interest. Any attempt to intentionally or unintentionally conceal or obfuscate a conflict of interest will automatically result in the disqualification of funding.
6. Subgrantee agrees to comply with the requirements of the Civil Rights Act of 1964, as amended, and the Rehabilitation Act of 1973, P.L. 93-112, as amended, and any relevant program-specific regulations, and shall not discriminate against any employee or offer or for employment because of race, national origin, creed, color, sex, religion, age, disability or handicap condition (including AIDS and AIDS-related conditions).
7. Subgrantee agrees to comply with the Americans with Disabilities Act of 1990 (P.L. 101-136), 42 U.S.C. 12101, as amended, and regulations adopted thereunder contained in 28 CFR 26.101-36.999 inclusive, and any relevant program-specific regulations.
8. Subgrantee agrees to comply with the requirements of the Health Insurance Portability and Accountability Act of 1996, 45 C.F.R. 160, 162 and 164, as amended. If the subgrant award includes functions or activities that involve the use or disclosure of Protected Health Information, the Subgrantee agrees to enter into a Business Associate Agreement with the Health Division, as required by 45 C.F.R 164.504 (e).
9. Subgrantee certifies, by signing this subgrant, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency. This certification is made pursuant to regulations implementing Executive Order 12549, Debarment and Suspension, 28 C.F.R. pt. 67 § 67.510, as published as pt. VII of May 26, 1988, Federal Register (pp.19150-19211). This provision shall be required of every Subgrantee receiving any payment in whole or in part from federal funds.

10. Subgrantee agrees, whether expressly prohibited by federal, state, or local law, or otherwise, that no funding associated with this subgrant will be used for any purpose associated with or related to lobbying or influencing or attempting to lobby or influence for any purpose the following:
 - a. any federal, state, county or local agency, legislature, commission, council, or board;
 - b. any federal, state, county or local legislator, commission member, council member, board member, or other elected official; or
 - c. any officer or employee of any federal, state, county or local agency, legislature, commission, council, or board.

11. Health Division subgrants are subject to inspection and audit by representatives of the Health Division, Nevada Department of Health and Human Services, the State Department of Administration, the Audit Division of the Legislative Counsel Bureau or other appropriate state or federal agencies to
 - a. verify financial transactions and determine whether funds were used in accordance with applicable laws, regulations and procedures;
 - b. ascertain whether policies, plans and procedures are being followed;
 - c. provide management with objective and systematic appraisals of financial and administrative controls, including information as to whether operations are carried out effectively, efficiently and economically; and
 - d. determine reliability of financial aspects of the conduct of the project.

12. Any audit of Subgrantee's expenditures will be performed in accordance with Generally Accepted Government Auditing Standards to determine there is proper accounting for and use of subgrant funds. It is the policy of the Health Division (as well as a federal requirement as specified in the Office of Management and Budget (OMB) Circular A-133 [Revised June 27th, 2003]) that each grantee annually expending \$500,000 or more in federal funds have an annual audit prepared by an independent auditor in accordance with the terms and requirements of the appropriate circular. **A COPY OF THE FINAL AUDIT REPORT MUST BE SENT TO THE NEVADA STATE HEALTH DIVISION, ATTN: ADMINISTRATIVE SERVICES OFFICER IV, 4150 TECHNOLOGY WAY, SUITE 300, CARSON CITY, NEVADA 89706-2009, within nine (9) months of the close of the Subgrantee's fiscal year. To ensure this requirement is met Section D of this subgrant must be filled out and signed.**

**HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION B**

Description of services, scope of work, deliverables and reimbursement

Washoe County Health District (WCHD), hereinafter referred to as Subgrantee, agrees to provide the following services and reports according to the identified timeframes:

- See Attached Scope of Work.
- Submit written progress reports to the Health Division electronically on or before:
 - January 14, 2011 Mid-Year Progress Report - (for the period of 7/1/10 - 12/31/10)
 - July 30, 2011 End-of-Year Progress Report - (for the period of 1/1/11 - 6/30/11)
- Additional information may be requested by the Health Division, as needed, due to evolving state and federal reporting requirements.
- Identify the source of funding on all printed documents purchased or produced within the scope of this subgrant, using a statement similar to: "This publication (journal, article, etc.) was supported by the Nevada State Health Division through Grant Number 6 U3REP090220-02-01 from the Assistant Secretary for Preparedness and Response (ASPR). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Nevada State Health Division or the Assistant Secretary for Preparedness and Response (ASPR)."
- Any activities performed under this subgrant shall acknowledge the funding was provided through the State Health Division by Grant Number 6 U3REP090220-02-01 from the Assistant Secretary for Preparedness and Response (ASPR).

(continued on next page)

Subgrantee agrees to adhere to the following budget:

1. Personnel	\$ 228,205	<ul style="list-style-type: none"> \$ 73,099 Public Health Emergency Response Coordinator 100% \$ 65,470 MRC Coordinator 100% \$ 29,786 Health Educator II 100% \$ 59,850 Fringe
2. Contractual/Consultant	\$ 59,828	<ul style="list-style-type: none"> \$ 4,071 Part-time temporary clerical assistant \$ 15,000 WebEOC consulting services \$ 25,257 Alternate Care Site Consultant \$ 5,000 MRC media buy \$ 3,000 MRC Volunteer Training \$ 7,500 Temporary workers for seasonal vaccination sites and for data entry
3. Travel	\$ 20,550	In-State and Out-of-State Travel: In compliance with Federal GSA rates.
4. Supplies	\$ 4,681	Office / General Supplies, MRC program supplies, Books & subscriptions, Operating supplies for MRC program training and events, MRC Volunteer recruitment, identification and deployment supplies
5. Equipment	\$ 24,757	<ul style="list-style-type: none"> \$ 9,000 WebEOC annual maintenance fee for WCHD instance \$ 3,000 WebEOC annual maintenance fee for WCHD Resource Manager \$ 12,757 Mobile Medical Facility equipment
6. Other	\$ 6,134	<ul style="list-style-type: none"> \$ 1,300 Printing of fliers, handouts & other training materials for NIMS/HICS and HSEEP trainings \$ 1,198 Room rental and training supplies, such as signage, binders, nutrition and hydration, will be used to conduct NIMS/HICS and HSEEP trainings \$ 264 Land line telephone service \$ 780 Smart phone cell service \$ 780 Long distance and conference call charges \$ 252 Copy machine costs \$ 360 Printing/reproduction costs \$ 120 Postage \$ 420 Promotional materials to aid MRC volunteers \$ 360 Website hosting for Washoe MRC \$ 300 Cell Phone Service for MRC Program
7. Indirect	\$ 24,075	9.9% Total direct costs excluding capital expenditure, sub-awards, and flow-through funds.
Total Cost	<u>\$ 368,230</u>	

- Health Division policy is to allow no more than 10% flexibility (no more than a cumulative amount of **\$36,823** within approved Scope of Work, unless otherwise authorized. Upon reaching the 10% funding adjustment threshold, additional adjustments between categories cannot be made without prior written approval from the Health Division. Changes to the Scope of Work cannot be made without prior approval from the Health Division and the Federal funding agency. ****Redirect requests can only be submitted up to 60 days before the close of the subgrant period.**

- Equipment purchased with these funds belongs to the federal program from which this funding was appropriated and shall be returned to the program upon termination of this agreement.
- Travel expenses, per diem, and other related expenses must conform to the procedures and rates allowed for State officers and employees. It is the Policy of the Board of Examiners to restrict contractors/Subgrantees to the same rates and procedures allowed State Employees. The State of Nevada reimburses at rates comparable to the rates established by the US General Services Administration, with some exceptions (State Administrative Manual 0200.0 and 0320.0).

Subgrantee agrees to request reimbursement according to the schedule specified below for the actual expenses incurred related to the Scope of Work during the subgrant period.

- Requests for Reimbursement will be accompanied by supporting documentation, including a line item description of expenses incurred, summarizing the total amount and type of expenditure made during the reporting period.
- Requests for Reimbursements will be submitted monthly.
- Submit monthly Requests for Reimbursement no later than 15 days following the end of the month; submit a Request for Reimbursement for activities completed through the month of June no later than July 15, 2011.
- Additional expenditure detail will be provided upon request from the Health Division.
- The maximum amount of funding available through this subgrant is \$368,230.

Additionally, the Subgrantee agrees to provide:

- Provide a copy of all plans developed and all After Action Reports (AAR) for exercises within 45 days of completion.
- Provide a complete financial accounting of all expenditures to the Health Division within 30 days of the CLOSE OF THE SUBGRANT PERIOD. Any un-obligated funds shall be returned to the Health Division at that time, or if not already requested, shall be deducted from the final award.

The Nevada State Health Division agrees:

- Review and approve activities through programmatic and fiscal reports and conduct site visits at the subgrantee's physical site as necessary.
- Provide reimbursements, not to exceed a total of \$368,230 for the entire subgrant period.
- Provide technical assistance, upon request from the Subgrantee.
- The Health Division reserves the right to hold reimbursement under this subgrant until any delinquent forms, reports, and expenditure documentation are submitted to and accepted by the Health Division.

Both parties agree:

Based on the bi-annual narrative progress and financial reporting forms, as well as site visit findings, if it appears to the Health Division that activities will not be completed in time specifically designated in the Scope of Work, or project objectives have been met at a lesser cost than originally budgeted, the Health Division may reduce the amount of this subgrant award and reallocate funding to other preparedness priorities within the state. This includes but is not limited to:

- Reallocating funds between the subgrantee's categories, and
- Reallocating funds to another subgrantee or funding recipient to address other identified PHP priorities, by removing it from this agreement through a subgrant amendment,

All reports of expenditures and requests for reimbursement processed by the Health Division are SUBJECT TO AUDIT.

This subgrant agreement may be TERMINATED by either party prior to the date set forth on the Notice of Subgrant Award, provided the termination shall not be effective until 30 days after a party has served written notice upon the other party. This agreement may be terminated by mutual consent of both parties or unilaterally by either party without cause. The parties expressly agree that this Agreement shall be terminated immediately if for any reason the Health Division, state, and/or federal funding ability to satisfy this Agreement is withdrawn, limited, or impaired.

**HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION C
Financial Reporting Requirements**

- ☞ A Request for Reimbursement is due on a **monthly** basis, based on the terms of the subgrant agreement, no later than the 15th of the month.
- ☞ Reimbursement is based on **actual** expenditures incurred during the period being reported.
- ☞ Payment will not be processed without all reporting being current.
- ☞ Reimbursement may only be claimed for expenditures approved within the Notice of Subgrant Award.
- ☞ **PLEASE REPORT IN DOLLARS and CENTS (No Rounding)**

Provide the following information on the top portion of the form: Subgrantee name and address where the check is to be sent, Health Division (subgrant) number, Bureau program number, draw number, employer I.D. number (EIN) and Vendor number.

An explanation of the form is provided below.

- A. Approved Budget:** List the approved budget amounts in this column by category.
- B. Total Prior Requests:** List the **total** expenditures for all previous reimbursement periods in this column, for each category, by entering the numbers found on Lines 1-8, Column D on the **previous** Request for Reimbursement/Advance Form. If this is the first request for the subgrant period, the amount in this column equals zero.
- C. Current Request:** List the **current** expenditures requested at this time for reimbursement in this column, for each category.
- D. Year to Date Total:** Add Column B and Column C for each category.
- E. Budget Balance:** Subtract Column D from Column A for each category.
- F. Percent Expended:** Divide Column D by Column A for each category and total. Monitor this column; it will help to determine if/when an amendment is necessary. Amendments **MUST** be completed (including all approving signatures) 30 days **prior** to the end of the subgrant period.

** An Expenditure Report/Backup that summarizes, by expenditure GL, the amounts being claimed in column 'C' is required.*

**HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION D**

**NEVADA STATE HEALTH DIVISION
AUDIT INFORMATION REQUEST**

1. Non-Federal entities that expend \$500,000.00 or more in total Federal Awards are required to have a single or program-specific audit conducted for that year, in accordance with *OMB Circular A-133*. A COPY OF THE FINAL AUDIT REPORT MUST BE SENT TO THE NEVADA STATE HEALTH DIVISION, ATTN: ADMINISTRATIVE SERVICES OFFICER IV, 4150 TECHNOLOGY WAY, SUITE 300, CARSON CITY, NEVADA 89706-2009, within nine (9) months of the close of your fiscal year.

2. Did your organization expend \$500,000.00 or more in all Federal Awards during your most recent fiscal year?
YES ____ NO ____

3. When does your fiscal year end? _____

4. How often is your organization audited? _____

5. When was your last audit performed? _____

6. What time period did it cover? _____

7. Which accounting firm conducted the audit? _____

SIGNATURE

TITLE

DATE

Nevada Department of Health and Human Services

Health Division # 11031
 Bureau Program # ASPR07-10
 GL # 8516
 Draw #: _____

HEALTH DIVISION

REQUEST FOR REIMBURSEMENT / ADVANCE

Program Name: Public Health Preparedness Health Planning & Emergency Response	Subgrantee Name: Washoe County Health District (WCHD)
Address: 4150 Technology Way, Suite 200 Carson City, NV 89706	Address: 1001 East Ninth Street Reno, NV 89520
Subgrant Period: July 1, 2010 through June 30, 2011	Subgrantee EIN #: 88-6000138 Subgrantee Vendor #: T40283400Q Dun & Bradstreet #: 073786998

FINANCIAL REPORT AND REQUEST FOR FUNDS

(report in dollars and cents; must be accompanied by expenditure report/back-up)

Month(s): _____ **Calendar Year:** _____

Approved Budget Category	A Approved Budget	B Total Prior Requests	C Current Request	D Year To Date Total	E Budget Balance	F Percent Expended
1 Personnel	\$ 228,205.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 228,205.00	0%
5 Contract/Consultant	\$ 59,828.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 59,828.00	0%
2 Travel	\$ 20,550.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 20,550.00	0%
3 Supplies	\$ 4,681.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 4,681.00	0%
4 Equipment	\$ 24,757.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 24,757.00	0%
6 Other	\$ 6,134.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 6,134.00	0%
7 Indirect	\$ 24,075.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 24,075.00	0%
8 Total	\$ 368,230.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 368,230.00	0%

This report is true and correct to the best of my knowledge.

Authorized Signature	Title	Date
----------------------	-------	------

Reminder: Request for Reimbursement cannot be processed without an expenditure report/backup. Reimbursement is only allowed for items contained within Subgrant Award documents. If applicable, travel claims must accompany report.

FOR HEALTH DIVISION USE ONLY

Program contact necessary? Yes No Contact Person: _____

Reason for contact: _____

Fiscal review/approval date: _____ Signed: _____

Scope of Work review/approval date: _____ Signed: _____

ASO or Bureau Chief (as required): _____ Date: _____



Washoe County Health District



Public Health
Prevent Promote Protect

STAFF REPORT BOARD MEETING DATE: 11/18/10

DATE: November 8, 2010

TO: District Board of Health

FROM: Patsy Buxton, Fiscal Compliance Officer, Washoe County Health District *PB*
775-328-2418, pbuxton@washoecounty.us

THROUGH: Eileen Coulombe, Administrative Health Services Officer, Washoe County Health District, 775-328-2417, ecoulombe@washoecounty.us *EC*

SUBJECT: Approval of Notice of Grant Award dated October 28, 2010 from the Department of Health and Human Services Public Health Service for the period June 30, 2010 to June 29, 2011 in the amount of \$943,735 in support of the Family Planning Program; Approval of amendments totaling an increase of \$47,352 in both revenue and expense to the FY 11 Family Planning Title X Federal Grant Program, IO 10025.

SUMMARY

The Washoe County District Board of Health must approve and execute, or direct the Health Officer to execute, contracts in excess of \$50,000, Interlocal Agreements and amendments to the adopted budget.

The Washoe County Health District's Family Planning program received a Notice of Grant Award from the Department of Health and Human Services Public Health Service that reflects an additional \$66,430 in federal funding for the period June 30, 2010 through June 29, 2011. A copy of the Notice of Grant Award is attached.

District Board of Health Priorities supported by this item: *1) Protect population from health problems and health hazards and 2) Give people information they need to make healthy choices.* It also supports the Washoe County Health District's Family Planning Program mission to promote and assure that all Washoe County citizens have access to confidential, high quality, culturally competent reproductive health and family planning services that fosters healthy communities.

PREVIOUS ACTION

The District Board of Health approved the base Notice of Grant Award in the total amount of \$785,000 on July 22, 2010. On October 28, 2010, the board approved an amended Notice of Grant Award that provided an additional \$92,305 in federal funding.

AGENDA ITEM # 7.C.2.

1001 EAST NINTH STREET / P.O. BOX 11130, RENO, NEVADA 89520 (775) 328-2400 FAX (775) 328-2279

www.washoecounty.us/health
WASHOE COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER
PRINTED ON RECYCLED PAPER

BACKGROUND

The District Board of Health accepted the FY11 Family Planning Title X Base Grant Award in the amount of \$785,000 on July 22, 2010. The Washoe County Health District received an amended award dated September 22, 2010 that provided an additional \$92,305 of supplemental funds. As identified in the previous award document, \$62,305 of these funds is in support of the 2009 End-of-Year “Option B” project. The “Option B” additional funding is being utilized to purchase pharmaceuticals and hire intermittent hourly (“per diem”) Advanced Practitioner of Nursing and Registered Nurse positions that will assist the program in achieving their goal to mitigate the gap between needed and available services. The remaining \$30,000 is to assist us with purchasing contraceptives in an effort to expand the range of contraceptives made available through Title X providers, with an emphasis on expanding the availability of Long-Acting, Reversible Contraceptives (LARCs).

At the end of FY 10, the Family Planning Grant had an unobligated balance of \$66,430. The Department of Health and Human Services, Public Health Services approved our request to carryover these funds. This funding will be used to support intermittent hourly positions, medical supplies, security contract, pharmaceuticals, vasectomy contract services and other general operating expenditures.

The FY11 Title X grant budget was adopted in the total amount of \$896,383 and accounted for Base funding in the amount of \$785,000, Year 2 Directed Supplemental funding in the amount of \$62,305, and FY10 Carry Forward (estimate of unobligated balance) funding in the amount of \$49,078. A budget amendment is necessary to bring the program budget into alignment with the Notice of Grant Award.

FISCAL IMPACT

Should the Board approve these budget amendments, the adopted FY 11 budget will be **increased by \$47,352** in the following accounts:

<u>Account Number</u>	<u>Description</u>	<u>Amount of Increase/(Decrease)</u>
2002-IO-10025-431100	Federal Revenue	\$47,352
2002-IO-10025-701130	Pooled Positions	6,148
-710200	Service Contract	2,340
-710205	Repairs/Maintenance	1,000
-710300	Operating Supplies	5,250
-710350	Office Supplies	(800)
-710355	Books/Subscriptions	600
-710360	Postage	(800)
-710500	Other Expense	800
-710502	Printing	(250)
-710503	Licenses	(500)
-710509	Seminars/Meeting	500
-710529	Dues	(200)
-710546	Advertising	1,000
-710577	Uniforms	300

-710703	Biologicals	45,133
-710721	Lab Outpatient	(16,695)
-711010	Utilities	500
-711210	Travel	2,000
-711504	Equipment-NonCapital	1,026
	Total Expenditures	\$47,352

RECOMMENDATION

Staff recommends that the Washoe County District Board of Health approve the Notice of Grant Award dated October 28, 2010 from the Department of Health and Human Services Public Health Service for the period June 30, 2010 to June 29, 2011 in the amount of \$943,735 in support of the Family Planning Program; Approve amendments totaling an increase of \$47,352 in both revenue and expense to the FY 11 Family Planning Title X Federal Grant Program, IO 10025.

POSSIBLE MOTION

Move to approve the Notice of Grant Award dated October 28, 2010 from the Department of Health and Human Services Public Health Service for the period June 30, 2010 to June 29, 2011 in the amount of \$943,735 in support of the Family Planning Program; Approve amendments totaling an increase of \$47,352 in both revenue and expense to the FY 11 Family Planning Title X Federal Grant Program, IO 10025.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
 PUBLIC HEALTH SERVICE
 OPHS Office of Grants Management
 1101 Wootton Parkway
 Suite 550
 Rockville, MD 20852

NOTICE OF GRANT AWARD
 AUTHORIZATION (Legislation/Regulations)
 P.L. 91-572 PHS Act Sec. 1001 as Amended, 42 CFR 59

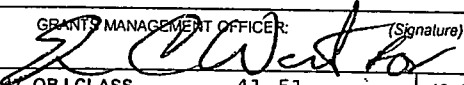
1. DATE ISSUED (Mo./Day/Yr.) 10/28/2010	2. CFDA NO. 93.217
3. SUPERCEDES AWARD NOTICE dated 09/22/2010 except that any additions or restrictions previously imposed remain in effect unless specifically rescinded	
4. GRANT NO. 6 FPHPA090003-42-02 Formerly: 09H000003	5. ADMINISTRATIVE CODES FPH70
6. PROJECT PERIOD Mo./Day/Yr. From 07/01/2007	Mo./Day/Yr. Through 06/29/2012
7. BUDGET PERIOD Mo./Day/Yr. From 06/30/2010	Mo./Day/Yr. Through 06/29/2011

8. TITLE OF PROJECT (OR PROGRAM) (Limit to 56 spaces)
 FY2011 Family Planning Services (Region 9-Navajo Nation, Federated States Micronesia, NV, Washoe Cnty)

9. GRANTEE NAME AND ADDRESS a. Washoe County District Health Department b. PO BOX 11130 c. 1001 EAST NINTH STREET d. Reno e. NV f. 89520-0027	10. DIRECTOR OF PROJECT (PROGRAM DIRECTOR/PRINCIPLE INVESTIGATOR) (LAST NAME FIRST AND ADDRESS) Mary Ann Brown PO BOX 11130 1001 EAST NINTH STREET Reno, NV 89520 Phone: 775-328-2478
--	---

11. APPROVED BUDGET (Excludes HHS Direct Assistance)		12. AWARD COMPUTATION FOR GRANT	
I HHS Grant Funds Only		a. Amount of HHS Financial Assistance (from item 11.u) 943,735	
II Total project costs including grant funds and all other financial participation (Select one and place NUMERAL in box) <input type="checkbox"/> I <input checked="" type="checkbox"/> II		b. Less Unobligated Balance From Prior Budget Periods 66,430	
a. Salaries and Wages 611,439		c. Less Cumulative Prior Award(s) This Budget Period 877,305	
b. Fringe Benefits 222,288		d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION <input type="text" value="0"/>	
c. Total Personnel Costs 833,727		13. RECOMMENDED FUTURE SUPPORT (Subject to the availability of funds and satisfactory progress of the project):	
d. Consultants Costs 0		YEAR	TOTAL DIRECT COSTS
e. Equipment 0		a. 43	d. 46
f. Supplies 28,500		b. 44	e. 47
g. Travel 5,000		c. 45	f. 48
h. Patient Care - Inpatient 0		14. APPROVED DIRECT ASSISTANCE BUDGET (IN LIEU OF CASH):	
i. Patient Care - Outpatient 0		a. AMOUNT OF HHS Direct Assistance 0	
j. Alterations and Renovations 0		b. Less Unobligated Balance From Prior Budget Periods	
k. Other 161,176		c. Less Cumulative Prior Award(s) This Budget Period	
l. Consortium/Contractual Costs 76,471		d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION <input type="text" value="0"/>	
m. Trainee Related Expenses 0		15. PROGRAM INCOME SUBJECT TO 45 CFR PART 74, SUBPART F, OR 45 CFR 92.25, SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES: (Select one and place LETTER in box.)	
n. Trainee Stipends 0		a. DEDUCTION	
o. Trainee Tuition and Fees 0		b. ADDITIONAL COSTS	
p. Trainee Travel 0		c. MATCHING	
q. TOTAL DIRECT COSTS 1,104,874		d. OTHER RESEARCH (Add / Deduct Option)	
r. INDIRECT COSTS 6,643		e. OTHER (See REMARKS) <input type="text" value="e"/>	
s. TOTAL APPROVED BUDGET \$ 1,111,517		16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, HHS ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING:	
t. SBIR Fee		a. The grant program legislations cited above.	
u. Federal Share \$ 943,735		b. The grant program regulation cited above.	
v. Non-Federal Share \$ 167,782		c. This award notice including terms and conditions, if any, noted below under REMARKS.	
		d. HHS Grants Policy Statement including addenda in effect as of the beginning date of the budget period.	
		e. 45 CFR Part 74 or 45 CFR Part 92 as applicable.	
		In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.	

REMARKS: (Other Terms and Conditions Attached - Yes No)
 This revised NGA reflects approval of a carryover in the amount of \$66,430. All previous terms and conditions remain in effect, unless specifically removed.

GRANTS MANAGEMENT OFFICER:  (Signature)		(Name - Typed/Print) Karen Campbell		(Title) Grants Management Officer, OPHS	
17. OBJ CLASS 41.51	18. CRS - EIN 1886000138A1	19. LIST NO.	CONG. DIST.: 02		
FY-CAN 0-3094509	DOCUMENT NO. 09H000003A	ADMINISTRATIVE CODE FPH70	AMT ACTION FIN ASST 0	AMT ACTION DR ASST 0	
20. a.	b.	c.	d.	e.	
21. a.	b.	c.	d.	e.	
22. a.	b.	c.	d.	e.	

NOTICE OF GRANT AWARD (Continuation Sheet)

PAGE 2 of 2	DATE ISSUED 10/28/2010
GRANT NO. 6 FPHPA090003-42-02	

CONTACTS

1. For assistance on grants administration issues please contact: Robin Fuller, Grants Management Specialist, at (240) 453-8830, FAX (240) 453-8823, e-mail robin.fuller@hhs.gov or OPHS Grants Management Office, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852.
2. For assistance on programmatic issues please contact: Rebecca Meece, Regional Program Consultant, at (415) 437-8403, FAX (415) 437-8004, e-mail rebecca.meece@hhs.gov or Office of Family Planning, 90 7th Street, Suite 5-100, San Francisco, CA 94103.

DBGH 11/18/10
 \$ 18.8
 \$ 18.8

Health District Int/Hrly Employees* with 16 hours from May 10, 2010 - November 7, 2010

PC#	Division	Program	Employee Name	# Hrs.	Retired WC Emp.	Title
0160	AQM	Air	Stabler Kassi	60.00	No	PUBLIC SERVICE INTERN*
0160	AQM	Air	Schnieder Brendan	369.50	No	PUBLIC SERVICE INTERN*
0160	AQM	Air	Schomberg Roman	168.50	No	PUBLIC SERVICE INTERN*
0163	CCHS	Immunizations	Flickinger Joni M	353.00	Yes	REGISTERED NURSE I
0163	CCHS	Immunizations	Flores Mary	19.00	No	REGISTERED NURSE I
0163	CCHS	Immunizations	Giglio-Studzinski Elisa	67.50	No	REGISTERED NURSE I
0163	CCHS	Immunizations	Houk Jan W	29.00	No	REGISTERED NURSE I
0163	CCHS	Immunizations	Martin Bonnie J	73.50	No	REGISTERED NURSE I
0163	CCHS	Immunizations	Michaud Maribeth A	478.00	Yes	REGISTERED NURSE I
0163	CCHS	Immunizations	Sprau Joan C	458.25	Yes	REGISTERED NURSE I
0163	CCHS	Immunizations	Beebe Rana	128.25	Yes	REGISTERED NURSE I
0163	CCHS	Immunizations	Ford Janet	34.25	Yes	REGISTERED NURSE I
0163	CCHS	Immunizations	Laird Carolyn Ann	206.75	No	REGISTERED NURSE I
0163	CCHS	Immunizations	Laxamana Gloria	221.50	Yes	REGISTERED NURSE I
0163	CCHS	Immunizations	Paige Christine L	137.25	Yes	REGISTERED NURSE I
2165	EHS	Vector	King Alexander	825.00	No	PUBLIC SERVICE INTERN*
2165	EHS	Vector	Eck Russell	784.50	No	PUBLIC SERVICE INTERN*
2165	EHS	Vector	Kamikawa Anthony	530.50	No	PUBLIC SERVICE INTERN*
2165	EHS	Vector	Lemenager Lee	453.00	No	PUBLIC SERVICE INTERN*
2165	EHS	Vector	Mountjoy William	621.00	No	PUBLIC SERVICE INTERN*
2165	EHS	Vector	Varnum Harry	829.50	No	PUBLIC SERVICE INTERN*
2166	EHS	Water	Lyford Cody	680.00	No	PUBLIC SERVICE INTERN*
2197	CCHS	Family Planning	Tanner Catherine V	335.00	Yes	ADVANCED PRACTITIONER OF NURSING
2197	CCHS	Family Planning	Walker Brooke Laine	132.00	No	ADVANCED PRACTITIONER OF NURSING
3537	CCHS	Family Planning	Bennett Theresa	453.75	No	COMMUNITY HEALTH AIDE
3537	CCHS	Family Planning	Lopez Doris Corrallopezde	371.25	No	COMMUNITY HEALTH AIDE
3537	CCHS	Family Planning	Munoz Elizabet	946.00	No	COMMUNITY HEALTH AIDE
3618	EHS	Food	Fuller John W	305.00	Yes	ENVIRONMENTAL HEALTH SPECIALIST
5653	EHS	Solid Waste	Salgado Lee	801.50	No	PUBLIC SERVICE INTERN*
7279	AHS	WIC	Anderson Pamela Louise	137.00	No	COMMUNITY HEALTH AIDE
7279	AHS	WIC	Markowitz Wendy Morgan	203.75	No	COMMUNITY HEALTH AIDE
7279	AHS	WIC	Embody Cynthia	328.75	No	COMMUNITY HEALTH AIDE
7279	AHS	WIC	Quevedo Leonila	48.00	No	COMMUNITY HEALTH AIDE
7454	EHS	Water	Reighley Richard A.	276.50	Yes	LICENSED ENGINEER

*Public Service Interns within the Health District start at \$9.50 per hour. They are increased \$1.00 per hour for each year of college/university work completed or each returning year with the Health District



Washoe County Health District



Public Health
Prevent. Promote. Protect

STAFF REPORT BOARD MEETING DATE: November 18, 2010

DATE: November 8, 2010
TO: District Board of Health
FROM: Lori Cooke, Fiscal Compliance Officer, Washoe County Health District
 775-325-8068, lcooke@washoecounty.us *LC*
THROUGH: Eileen Coulombe, Administrative Health Services Officer *EC*
 775-328-2417, ecoulombe@washoecounty.us
SUBJECT: Acknowledge the donation of items in the amount of \$234.96 from the Breastfeeding Taskforce of Nevada for the Washoe County Health District.

SUMMARY

In late October 2010, the Washoe County Health District received items in the amount of \$234.96 from the Breastfeeding Taskforce of Nevada. These items include a chair, shelf unit, clock and CD player/boom box for the lactation room located on the second floor of Building B.

Goal supported by this item: Acknowledgment of this donation supports the Health District's Goal to enhance collaborations with community groups and constituents and the Health District's Priority to make healthy lifestyle choices that minimize chronic disease and increase quality and years of healthy life.

PREVIOUS ACTION

There has been no action taken this fiscal year.

BACKGROUND

The Washoe County Health District participates in and provides Public Health staff for various community activities. According to CCHS staff, businesses that implement breastfeeding policies and support breastfeed employees find they benefit by:

- Retaining experienced employees after childbirth
- Reducing the sick time taken by both moms and dads for children's illnesses
- Lowering health care and insurance costs
- Earlier returns from maternity leave

AGENDA ITEM # 7.D.

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- Greater employee productivity and morale
- Greater employee loyalty
- Recognition as a “family friendly” business

FISCAL IMPACT

Should the Board acknowledge this donation, there is no fiscal impact.

RECOMMENDATION

Staff recommends that the Washoe County District Board of Health acknowledge the donation of items in the amount of \$234.96 from the Breastfeeding Taskforce of Nevada for the Washoe County Health District.

POSSIBLE MOTION

Move to acknowledge the donation of items in the amount of \$234.96 from the Breastfeeding Taskforce of Nevada for the Washoe County Health District.

DAJ OH 11/18/10
Item No 20

The Washoe County ACHIEVE Community (2010 – 2011)

*"Local policies and the physical environment [they create]
influence daily choices that affect our health."* CDC, July 2009



Jennifer M. Hadayia, MPA
Public Health Program Manager
Community and Clinical Health Services Division
Washoe County Health District

GetHealthyWashoe.Com

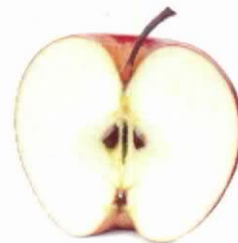


Creating
a Culture of
Healthy Living



What is ACHIEVE?

- ACHIEVE stands for **A**ction **C**ommunities for **H**ealth, **I**nnovation, and **E**nVironmental chang**E**
- Part of the CDC's *Healthy Communities Program* launched in 2003
- Five national partners: NACCHO, NACDD, NRPA, SOPHE, and YMCA
- Local implementation of the research showing that policy and environmental change most effectively and equitably improves behaviors related to chronic disease
- A national designation and two-year grant award
- Recognition that Washoe County has the infrastructure and track record for effective policy change to prevent chronic disease





What is ACHIEVE?

A nationally-tested program model:

1. **CHART.** A leadership team of influential policy-makers
2. **CHANGE.** A CDC-developed policy needs assessment tool measuring ~65 different policies in 5 areas (physical activity, nutrition, tobacco, CDSM, and leadership) in 4 sectors (CBO, worksite, healthcare, schools/district)
3. **CAP.** A written Community Action Plan outlining policies to be addressed
4. **Implementation** of proposed policy changes, including at least one Big "P" and one little "p" related to chronic disease risk factors



Washoe County CHART

County Commission	Chamber of Commerce
County Manager's Office	Nevada Health Care Coalition
Community Development	Join Together Northern Nevada
District Board of Health	Truckee Meadows Tomorrow
Library System	Chronic Disease Coalition
Parks & Open Space	Boys & Girls Club
Public Works	Medical Society
Senior Services	KNPB
School District	
UNR	
Cooperative Extension	



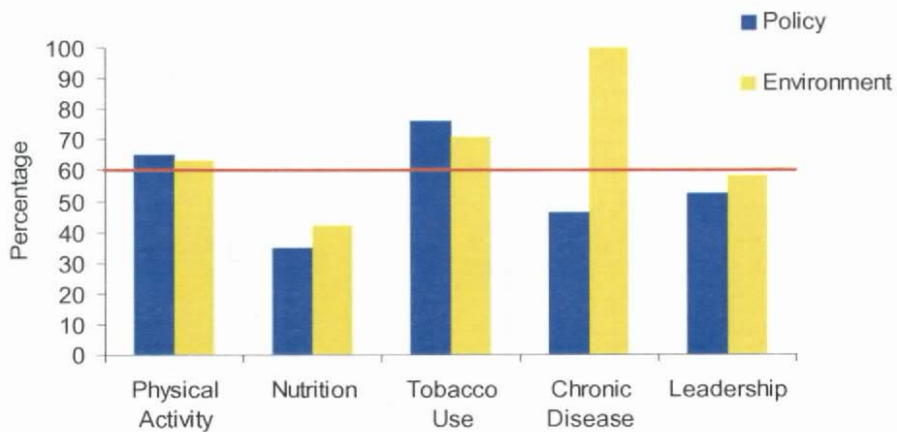
Washoe County CHANGE

- **Overall.** 15 sites assessed in 4 sectors plus Community-At-Large (CAL) and School District (June – August 2010)
- **Methods.** Secondary data review & document archiving; multiple key informant interviews; observational checklists & site-visits
- **Scales.** Policy (1 to 5); Environment (1 to 5); percent score per module per site (0% to 100%); average and S.D. per sector
- **Benchmarks.** 60% and over = asset; under 60% = need; low policy + high environment = "low hanging fruit"
- **Results.** Community-At-Large (policy and environment, by module); Sector averages (policy and environment, by module)



Washoe County CHANGE

Community-At-Large



Washoe County CHANGE

Conclusions

- Nutrition is the lowest scoring area overall for CAL; tobacco is the highest scoring area overall for CAL, largely due to the NCIAA.
- Consistently across sectors and modules, environments scored greater than policy. This suggests the opportunity to put codified policies into place at sites where there is the presence of supportive practices. This is true for the CAL as well.
- Within sectors, nutrition again scored lowest in policy (followed by physical activity), while leadership scored lowest in environment (followed by nutrition).
- Opportunities for change appear to be in: CAL nutrition policy, adoption of model policies for use at worksites and CBOs, and community-wide leadership.



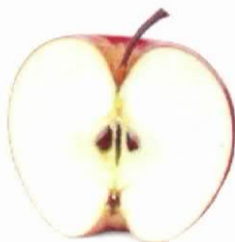
Washoe County CAP

- **Vision.** Making Good Health Easy
- **Mission.** Fill gaps in community-wide nutrition and physical activity policies.
- **Goals.** (2-year outcomes)
 1. Increase the percentage of Washoe County adults who are at a healthy weight. (4% increase)
 2. Increase the percentage of Washoe County children who are at a healthy weight. (4% increase)
 3. Improve chronic disease prevention infrastructure in Washoe County



Washoe County CAP

- **Objectives.** (1-year outcomes)
 1. Customize a model healthy food plan for Washoe County
 2. Facilitate worksites and CBOs to adopt a nutrition or physical activity policy using CHANGE selection criteria
 3. Incorporate obesity prevention strategies as a priority of the Regional Planning Governing Board
 4. Facilitate preschool providers in adopting a Model Preschool Wellness Policy
 5. Facilitate organizations that provide out-of-school-time (OST) in adopting a Model OST Wellness Policy
 6. Launch a public information effort to engage parents and families in promoting child wellness
 7. Expand the role of the Chronic Disease Coalition



The Washoe County ACHIEVE Community (2010 – 2011)

For More Information:

Nationally:

www.achievethecommunities.org

Locally:

www.gethealthywashoe.com

Click: Coalition, then
ACHIEVE

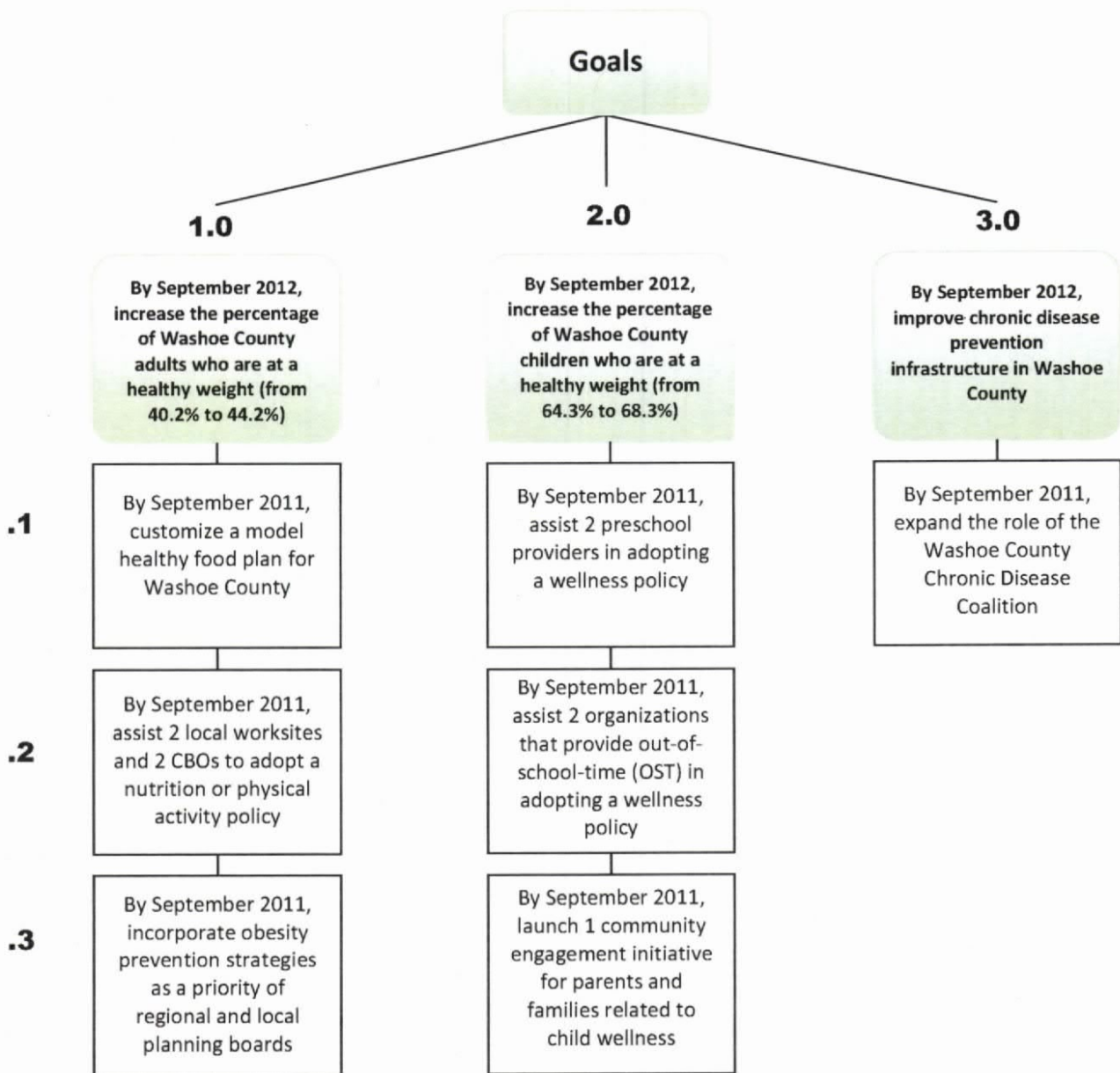




Washoe County ACHIEVE Community CAP Strategic Map: 2010 – 2012

Vision: Making Good Health Easy

Mission: Promote good health by filling gaps in community-wide nutrition and physical activity policies for everyone.





Washoe County Health District



Public Health
Prevent Promote Protect.

STAFF REPORT

BOARD MEETING DATE: 11/18/10

DATE: November 9, 2010

TO: District Board of Health

FROM: Patsy Buxton, Fiscal Compliance Officer, Washoe County Health District *PB*
775-328-2418, pbuxton@washoecounty.us

THROUGH: Eileen Coulombe, Administrative Health Services Officer, Washoe County Health District, 775-328-2417, ecoulombe@washoecounty.us *EC*

SUBJECT: Approval of Notice of Subgrant Award from the Nevada State Health Division in the amount of \$744,415 (with \$74,441 or 10% Health District match) for the period August 10, 2010 to August 9, 2011 in support of the Centers for Disease Control and Prevention (CDC) Public Health Preparedness (PHP) Program; Approval of amendments totaling an increase of \$71,638 in both revenue and expense to the FY 11 CDC PHP Federal Grant Program, IO 10713; Authorize the creation of an on call Epidemiologist Intermittent Hourly position, (PC#TBD) as evaluated by the Job Evaluation Committee (JEC); Authorize the creation of an on call Public Health Investigator Intermittent Hourly position, (PC#TBD) as evaluated by the Job Evaluation Committee (JEC); and if approved authorize the Chairman to execute.

SUMMARY

The Washoe County District Board of Health must approve and execute, or direct the Health Officer to execute, contracts in excess of \$50,000, Interlocal Agreements and amendments to the adopted budget.

The Washoe County Health District received a Notice of Subgrant Award from the Nevada State Health Division for the period August 10, 2010 through August 9, 2011 in the total amount of \$744,415 in support of the Public Health Preparedness CDC Grant Program. A copy of the Notice of Subgrant Award is attached.

District Board of Health strategic priority: Protect population from health problems and health hazards.

BCC Strategic Objective supported by this item: Safe, Secure and Healthy Communities.
BCC Strategic Outcome supported by this item: Healthy communities.

This item supports the Epidemiology and Public Health Preparedness (EPHP) Division's mission to strengthen the capacity of public health infrastructure to detect, assess, and respond decisively to control the public health consequences of bioterrorism events or any public health emergency.

AGENDA ITEM # 8.A.

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WASHOE COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER
PRINTED ON RECYCLED PAPER

PREVIOUS ACTION

The District Board of Health approved the Notice of Subgrant Award from the Nevada State Health Division for the period August 10, 2009 through August 9, 2010 in the total amount of \$790,401 (with \$25,604 Health District match) at their November 19, 2009 board meeting.

BACKGROUND

The Nevada State Health Division has awarded the Public Health Preparedness Program \$744,415 (with \$74,441 or 10% Health District match) for the period August 10, 2010 through August 9, 2011. The combination of in-kind value of volunteers and indirect cost rate will be used to meet the match requirement. Funds will be used to support personnel, travel, other professional services, and operating expenditures including funding incentives (to include but not limited to: nutrition and hydration and serving utensils for PHP trainings/stakeholder meetings; preparedness kits to be used as raffles for meetings and events).

The Epidemiology and Public Health Preparedness division has identified a need to create two on call Intermittent Hourly positions: Epidemiologist and Public Health Investigator. These positions do not currently exist at the Health District.

The Intermittent Hourly Epidemiologist position will provide surge capacity during critical peak periods and assist in the development and utilization of syndromic surveillance data sources to monitor, quantify and localize aberrations to pre-diagnostic data patterns, including chief complaint data from emergency departments, ambulance run data, over-the counter medication purchase data, school absenteeism, and chief complaint data from school nurse office visits.

The Intermittent Hourly Public Health Investigator position will provide surge capacity during critical peak periods and assist in public health investigations and surveillance by gathering data, conducting disease investigations and providing education on communicable disease.

The budget amendment and the creation of both the on call Epidemiologist and Public Health Investigator Intermittent Hourly positions (PC#'s TBD) as evaluated by the Job Evaluation Committee (JEC) will also require Washoe Board of County Commissioner's approval.

FISCAL IMPACT

A budget amendment in the total amount of \$71,638 is necessary to align the budget with the Notice of Subgrant Award. This amendment takes into account actual expenditures for July – August 9, 2010 (previous award) and 12 months of the new award.

Should the Board approve these budget amendments, the adopted FY 11 budget will be **increased by \$71,638** in the following accounts:

<u>Account Number</u>	<u>Description</u>	<u>Amount of Increase/(Decrease)</u>
2002-IO-10713-431100	Federal Revenue	\$71,638
2002-IO-10713-701130	Pooled Positions	30,002
-701412	Salary Adjustment	25,548
-705360	Benefit Adjustment	8,094
-710100	Professional Services	12,708
-710110	Contracted/Temp Wages	9,994
-710205	Repairs/Maintenance	778
-710300	Operating Supplies	(41,639)
-710334	Copy Machine	225
-710350	Office Supplies	(2,073)
-710355	Books/Subscriptions	170
-710360	Postage	28
-710500	Other Expense	4,004
-710508	Telephone	3,556
-710509	Seminars/Meetings	900
-710529	Dues	270
-710546	Advertising	250
-711210	Travel	16,500
-711504	Equipment-NonCapital	2,323
	Total Expenditures	\$71,638

RECOMMENDATION

Staff recommends that the Washoe County District Board of Health approve the Notice of Subgrant Award from the Nevada State Health Division in the amount of \$744,415 (with \$74,441 or 10% Health District match) for the period August 10, 2010 to August 9, 2011 in support of the Centers for Disease Control and Prevention (CDC) Public Health Preparedness (PHP) Program; Approve amendments totaling an increase of \$71,638 in both revenue and expense to the FY 11 CDC PHP Federal Grant Program, IO 10713; Authorize the creation of an on call Epidemiologist Intermittent Hourly position, (PC#TBD) as evaluated by the Job Evaluation Committee (JEC); Authorize the creation of an on call Public Health Investigator Intermittent Hourly position, (PC#TBD) as evaluated by the Job Evaluation Committee (JEC); and if approved authorize the Chairman to execute.

POSSIBLE MOTION

Move to approve the Notice of Subgrant Award from the Nevada State Health Division in the amount of \$744,415 (with \$74,441 or 10% Health District match) for the period

August 10, 2010 to August 9, 2011 in support of the Centers for Disease Control and Prevention (CDC) Public Health Preparedness (PHP) Program; Approve amendments totaling an increase of \$71,638 in both revenue and expense to the FY 11 CDC PHP Federal Grant Program, IO 10713; Authorize the creation of an on call Epidemiologist Intermittent Hourly position, (PC#TBD) as evaluated by the Job Evaluation Committee (JEC); Authorize the creation of an on call Public Health Investigator Intermittent Hourly position, (PC#TBD) as evaluated by the Job Evaluation Committee (JEC); and if approved authorize the Chairman to execute.

HEALTH DIVISION

(hereinafter referred to as the DIVISION)

Program #: CDC09-10

Budget Account #: 3218

Category #: 22

GL #: 8516

NOTICE OF SUBGRANT AWARD

Program Name: Public Health Preparedness Health Planning & Emergency Response Nevada State Health Division		Subgrantee Name: Washoe County Health District (WCHD)	
Address: 4150 Technology Way, Suite #200 Carson City, NV 89706-2009		Address: 1001 East Ninth Street Reno, NV 89520	
Subgrant Period: August 10, 2010 through August 9, 2011		Subgrantees: EIN#: 88-6000138 Vendor#: T40283400Q Dun & Bradstreet #: 073786998	
Reason for Award: 2010 CDC Public Health Preparedness and Response for Bioterrorism – Funds are intended to upgrade state and local public health jurisdictions' preparedness and response to bioterrorism, outbreaks of infectious diseases and other public health threats and emergencies.			
County(ies) to be served: () Statewide (X) Specific county or counties: Washoe County			
Approved Budget Categories:			
1. Personnel	\$	651,120	
2. Contractual/Consultant	\$	30,302	
3. Travel	\$	33,250	
4. Supplies	\$	10,907	
5. Equipment	\$	0	
6. Other	\$	18,836	
7. Indirect	\$	0	
Total Cost		\$	744,415
Disbursement of funds will be as follows: Payment will be made upon receipt and acceptance of a reimbursement form / invoice and supporting documentation specifically requesting reimbursement for actual expenditures <i>specific to this subgrant</i> . Total reimbursement will not exceed \$ 744,415 during the subgrant period.			
Source of Funds:		% of Funds:	CFDA#:
1. Centers for Disease Control and Prevention		100%	93.069
			Federal Grant #: 3U90TP916964-10W1
Terms and Conditions In accepting these grant funds, it is understood that: 1. Expenditures must comply with appropriate state and/or federal regulations. 2. This award is subject to the availability of appropriate funds. 3. Recipient of these funds agrees to stipulations listed in Sections A, B, C and D of this subgrant award.			
Authorized Sub-grantee Official Washoe County Health District		Signature	Date
Daniel P. Mackie, MPH, Health Program Manager, PHP			11/18/10
Kyle Devine, MSW Health Program Manager II, PHP			14 OCT 10
Richard Whitley, MS Administrator, Health Division			10/15/10

HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION A
Assurances

As a condition of receiving subgranted funds from the Nevada State Health Division, the Subgrantee agrees to the following conditions:

1. Subgrantee agrees grant funds may not be used for other than the awarded purpose. In the event Subgrantee expenditures do not comply with this condition, that portion not in compliance must be refunded to the Health Division.
2. Subgrantee agrees to submit reimbursement requests for only expenditures approved in the spending plan. Any additional expenditure beyond what is allowable based on approved categorical budget amounts, without prior written approval by the Health Division, may result in denial of reimbursement.
3. Approval of subgrant budget by the Health Division constitutes prior approval for the expenditure of funds for specified purposes included in this budget. Unless otherwise stated in the Scope of Work the transfer of funds between budgeted categories without written prior approval from the Health Division is not allowed under the terms of this subgrant. Requests to revise approved budgeted amounts must be made in writing and provide sufficient narrative detail to determine justification.
4. Recipients of subgrants are required to maintain subgrant accounting records, identifiable by subgrant number. Such records shall be maintained in accordance with the following:
 - a. Records may be destroyed not less than three years (unless otherwise stipulated) after the final report has been submitted if written approval has been requested and received from the Administrative Services Officer of the Health Division. Records may be destroyed by the Subgrantee five (5) calendar years after the final financial and narrative reports have been submitted to the Health Division.
 - b. In all cases an overriding requirement exists to retain records until resolution of any audit questions relating to individual subgrants.

Subgrant accounting records are considered to be all records relating to the expenditure and reimbursement of funds awarded under this Subgrant Award. Records required for retention include all accounting records and related original and supporting documents that substantiate costs charged to the subgrant activity.

5. Subgrantee agrees to disclose any existing or potential conflicts of interest relative to the performance of services resulting from this subgrant award. The Health Division reserves the right to disqualify any grantee on the grounds of actual or apparent conflict of interest. Any attempt to intentionally or unintentionally conceal or obfuscate a conflict of interest will automatically result in the disqualification of funding.
6. Subgrantee agrees to comply with the requirements of the Civil Rights Act of 1964, as amended, and the Rehabilitation Act of 1973, P.L. 93-112, as amended, and any relevant program-specific regulations, and shall not discriminate against any employee or offer for employment because of race, national origin, creed, color, sex, religion, age, disability or handicap condition (including AIDS and AIDS-related conditions).
7. Subgrantee agrees to comply with the Americans with Disabilities Act of 1990 (P.L. 101-136), 42 U.S.C. 12101, as amended, and regulations adopted there under contained in 28 CFR 26.101-36.999 inclusive, and any relevant program-specific regulations.
8. Subgrantee agrees to comply with the requirements of the Health Insurance Portability and Accountability Act of 1996, 45 C.F.R. 160, 162 and 164, as amended. If the subgrant award includes functions or activities that involve the use or disclosure of Protected Health Information, the Subgrantee agrees to enter into a Business Associate Agreement with the Health Division, as required by 45 C.F.R 164.504 (e).
9. Subgrantee certifies, by signing this subgrant, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency. This certification is made pursuant to regulations implementing Executive Order 12549, Debarment and Suspension, 28 C.F.R. pt. 67 § 67.510, as published as pt. VII of May 26, 1988, Federal Register (pp.19150-19211). This provision shall be required of every Subgrantee receiving any payment in whole or in part from federal funds.

10. Subgrantee agrees, whether expressly prohibited by federal, state, or local law, or otherwise, that no funding associated with this subgrant will be used for any purpose associated with or related to lobbying or influencing or attempting to lobby or influence for any purpose the following:
 - a. any federal, state, county or local agency, legislature, commission, council, or board;
 - b. any federal, state, county or local legislator, commission member, council member, board member, or other elected official; or
 - c. any officer or employee of any federal, state, county or local agency, legislature, commission, council, or board.

11. Health Division subgrants are subject to inspection and audit by representatives of the Health Division, Nevada Department of Health and Human Services, the State Department of Administration, the Audit Division of the Legislative Counsel Bureau or other appropriate state or federal agencies to
 - a. verify financial transactions and determine whether funds were used in accordance with applicable laws, regulations and procedures;
 - b. ascertain whether policies, plans and procedures are being followed;
 - c. provide management with objective and systematic appraisals of financial and administrative controls, including information as to whether operations are carried out effectively, efficiently and economically; and
 - d. determine reliability of financial aspects of the conduct of the project.

12. Any audit of Subgrantee's expenditures will be performed in accordance with Generally Accepted Government Auditing Standards to determine there is proper accounting for and use of subgrant funds. It is the policy of the Health Division (as well as a federal requirement as specified in the Office of Management and Budget (OMB) Circular A-133 [Revised June 27th, 2003]) that each grantee annually expending \$500,000 or more in federal funds have an annual audit prepared by an independent auditor in accordance with the terms and requirements of the appropriate circular. A COPY OF THE FINAL AUDIT REPORT MUST BE SENT TO THE NEVADA STATE HEALTH DIVISION, ATTN: ADMINISTRATIVE SERVICES OFFICER IV, 4150 TECHNOLOGY WAY, SUITE 300, CARSON CITY, NEVADA 89706-2009, within nine (9) months of the close of the Subgrantee's fiscal year. **To ensure this requirement is met Section D of this subgrant must be filled out and signed.**

**HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION B**

Description of services, scope of work, deliverables and reimbursement

The Washoe County Health District (WCHD), hereinafter referred to as Subgrantee, agrees to provide the following services and reports according to the identified timeframes:

- See Attached Scope of Work
- Submit written Progress Reports to the Health Division electronically on or before:
 - March 30, 2010 Mid Year Progress Report (For the period of 8/10/10-2/28/11)
 - October 1, 2010 End of Year Progress Report (For the period of 3/1/11-8/9/11)
- Additional information may be requested by the Health Division, as needed, due to evolving state and federal reporting requirements.
- Identify the source of funding on all printed documents purchased or produced within the scope of this subgrant, using a statement similar to: "This publication (journal, article, etc.) was supported by the Nevada State Health Division through Grant Number 3U90TP916964-10W1 from Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Nevada State Health Division or Centers for Disease Control and Prevention (CDC)."
- Any activities performed under this subgrant shall acknowledge the funding was provided through the State Health Division by Grant Number 3U90TP916964-10W1 from the Centers for Disease Control and Prevention.

(Continued on next page)

Subgrantee agrees to adhere to the following budget:

1. Personnel	\$	688,378		
			\$115,335	Epidemiology & PHP Director 75%
			\$ 58,095	Administrative Secretary 100%
			\$ 65,470	Public Information Officer 100%
			\$ 29,786	Health Educator 50%
			\$ 67,662	PH Emergency Response Coordinator 100%
			\$ 86,620	PHP Manager 100%
			\$ 32,852	Senior Epidemiologist 40%
			\$ 23,970	Intermittent Hourly Position - Epidemiologist 100%
			\$ 6,032	Intermittent Hourly Position – Public Health Investigator I 100%
			\$165,298	Fringe
2. Contractual/Consultant	\$	30,302		
			\$ 4,308	Media Buy
			\$ 10,000	WebEOC Support
			\$ 14,994	Temporary clerical support
			\$ 1,000	Translations Services
3. Travel	\$	33,250		
			\$ 4,250	In State Travel
			\$ 29,000	Out of State Travel
				In compliance with the Federal GSA Rates
4. Supplies	\$	10,907		
			\$ 2,520	Office Supplies
			\$ 2,400	Computer Printer Supplies
			\$ 600	Operating Supplies for signage and event / exercise preparation
			\$ 2,500	POD Exercise Supply Cache
			\$ 2,390	ATP testing equipment – ATP Luminometer System Plus
				ATP testing equipment – Ultrasnap ATP Surface Testing
			\$ 249	Device
				ATP testing equipment – Aquasnap ATP Water Testing
			\$ 248	Device
5. Equipment	\$	0		
6. Other	\$	18,836		
			\$ 5,196	Telephone Service
			\$ 300	Postage
			\$ 360	Copy Machine
			\$ 1,800	Printing
			\$ 1,560	Books, Publications, Subscriptions
			\$ 600	Membership dues
			\$ 100	Advertising
			\$ 1,500	Educational Supplies
			\$ 750	Minor Furniture & Equipment
			\$ 1,000	Equipment Repair & Maintenance
			\$ 2,484	Incentives
			\$ 186	Computer software for PHP staff
			\$ 1,000	Rental Space / Meeting Room
			\$ 2,000	Focus Group Participant Incentives
7. Indirect	\$	0		
Total Cost	\$	<u>744,415</u>		

- Health Division policy is to allow no more than 10% flexibility (no more than a cumulative amount of \$79,040), within approved Scope of Work, unless otherwise authorized. Upon reaching the 10% funding adjustment threshold, additional adjustments between categories cannot be made without prior written approval from the Health Division.
- Equipment purchased with these funds belongs to the federal program from which this funding was appropriated and shall be returned to the program upon termination of this agreement.
- Travel expenses, per diem, and other related expenses must conform to the procedures and rates allowed for State officers and employees. It is the Policy of the Board of Examiners to restrict contractors/subgrantees to the same rates and procedures allowed State Employees. The State of Nevada reimburses at rates comparable to the rates established by the US General Services Administration, with some exceptions (State Administrative Manual 0200.0 and 0320.0).

Subgrantee agrees to request reimbursement according to the schedule specified below for the actual expenses incurred related to the Scope of Work during the subgrant period.

- Requests for Reimbursement will be accompanied by supporting documentation, including a line item description of expenses incurred, summarizing the total amount and type of expenditures made during the reporting period.
- Requests for Reimbursements will be submitted monthly.
- Submit monthly Requests for Reimbursement no later than 15 days following the end of the month; submit a Request for Reimbursement for activities completed through the month of June no later than July 15, 2011.
- Additional expenditure detail will be provided upon request from the Division.
- The maximum amount of funding available through this subgrant is \$744,415.

Additionally, the subgrantee agrees to provide:

- Provide a copy of all plans developed and all After Action Reports (AAR) for exercises within 45 days of completion.
- Provide a complete financial accounting of all expenditures to the Health Division within 30 days of the CLOSE OF THE SUBGRANT PERIOD. Any un-obligated funds shall be returned to the Health Division at that time, or if not already requested, shall be deducted from the final award.

The Nevada State Health Division agrees:

- Review and approve activities through programmatic and fiscal reports and conduct site visits at the Subgrantee's physical site as necessary.
- Provide reimbursements, not to exceed a total of \$744,415 for the entire subgrant period.
- Provide technical assistance, upon request from the Subgrantee.
- Reserve the right to hold reimbursement under this subgrant until any delinquent forms and reports are submitted and accepted by the Health Division.

Both parties agree:

- Based on the bi-annual narrative progress and financial reporting forms, as well as site visit findings, if it appears to the Health Division that activities will not be completed in time specifically designated in the Scope of Work, or project objectives have been met at a lesser cost than originally budgeted, the Health Division may reduce the amount of this subgrant award and reallocate funding to other preparedness priorities within the state. This includes but is not limited to:
 - Reallocating funds between the subgrantee's categories, and

- Reallocating funds to another subgrantee or funding recipient to address other identified PHP priorities, by removing it from this agreement through a subgrant amendment,

All reports of expenditures and requests for reimbursement processed by the Health Division are SUBJECT TO AUDIT.

This subgrant agreement may be TERMINATED by either party prior to the date set forth on the Notice of Subgrant Award, provided the termination shall be not be effective until 30 days after a party has served written notice upon the other party. This agreement may be terminated by mutual consent of both parties or unilaterally by either party without cause. The parties expressly agree that this Agreement shall be terminated immediately if for any reason the Health Division, state, and/or federal funding ability to satisfy this Agreement is withdrawn, limited, or impaired.

**HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION C
Financial Reporting Requirements**

- ∞ A Request for Reimbursement is due on a **monthly or quarterly** basis, based on the terms of the subgrant agreement, no later than the 15th of the month.
- ∞ Reimbursement is based on **actual** expenditures incurred during the period being reported.
- ∞ Payment will not be processed without all reporting being current.
- ∞ Reimbursement may only be claimed for expenditures approved within the Notice of Subgrant Award.
- ∞ **PLEASE REPORT IN DOLLARS and CENTS, (no rounding).**

Provide the following information on the top portion of the form: Subgrantee name and address where the check is to be sent, Health Division (subgrant) number, Bureau program number, draw number, employer I.D. number (EIN) and Vendor number.

An explanation of the form is provided below.

A. Approved Budget: List the approved budget amounts in this column by category.

B. Total Prior Requests: List the **total** expenditures for all previous reimbursement periods in this column, for each category, by entering the numbers found on Lines 1-8, Column D on the **previous** Request for Reimbursement/Advance Form. If this is the first request for the subgrant period, the amount in this column equals zero.

C. Current Request: List the **current** expenditures requested at this time for reimbursement in this column, for each category.

D. Year to Date Total: Add Column B and Column C for each category.

E. Budget Balance: Subtract Column D from Column A for each category.

F. Percent Expended: Divide Column D by Column A for each category and total. Monitor this column; it will help to determine if/when an amendment is necessary. Amendments **MUST** be completed (including all approving signatures) 30 days **prior** to the end of the subgrant period.

**** An Expenditure Report/Backup that summarizes, by expenditure GL, the amounts being claimed in column 'C' is required.***

**HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION D**

**NEVADA STATE HEALTH DIVISION
AUDIT INFORMATION REQUEST**

1. Non-Federal entities that expend \$500,000.00 or more in total Federal Awards are required to have a single or program-specific audit conducted for that year, in accordance with *OMB Circular A-133*. A COPY OF THE FINAL AUDIT REPORT MUST BE SENT TO THE NEVADA STATE HEALTH DIVISION, ATTN: ADMINISTRATIVE SERVICES OFFICER IV, 4150 TECHNOLOGY WAY, SUITE 300, CARSON CITY, NEVADA 89706-2009, within nine (9) months of the close of your fiscal year.

2. Did your organization expend \$500,000.00 or more in all Federal Awards during your most recent fiscal year?
YES ___ NO ___

3. When does your fiscal year end? _____

4. How often is your organization audited? _____

5. When was your last audit performed? _____

6. What time period did it cover? _____

7. Which accounting firm conducted the audit? _____

 SIGNATURE	<i>Comm. Board of Health</i> TITLE	<i>11/18/10</i> DATE
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Nevada Department of Health and Human Services

Health Division # 11061
 Bureau Program # CDC09-10
 GL # 8516
 Draw #: _____

HEALTH DIVISION

REQUEST FOR REIMBURSEMENT

Program Name: Public Health Preparedness Health Planning & Emergency Response	Subgrantee Name: Washoe County Health District (WCHD)
Address: 4150 Technology Way, Suite 200 Carson City, NV 89706	Address: 1001 East Ninth Street Reno, NV 89520
Subgrant Period: August 10, 2010 through August 9, 2011	Subgrantee EIN #: 88-6000138 Subgrantee Vendor #: T40283400Q Dun & Bradstreet #: 73786998

FINANCIAL REPORT AND REQUEST FOR FUNDS

(report in dollars and cents; must be accompanied by expenditure report/back-up)

Month(s): _____ **Calendar Year:** _____

Approved Budget Category	A Approved Budget	B Total Prior Requests	C Current Request	D Year To Date Total	E Budget Balance	F Percent Expended
1 Personnel	\$ 651,120	\$ 0.00	\$ 0.00	\$ 0.00	\$ 651,120.00	0%
2 Contract/Consultant	\$ 30,302	\$ 0.00	\$ 0.00	\$ 0.00	\$ 30,302.00	0%
3 Travel	\$ 33,250	\$ 0.00	\$ 0.00	\$ 0.00	\$ 33,250.00	0%
4 Supplies	\$ 10,907	\$ 0.00	\$ 0.00	\$ 0.00	\$ 10,907.00	0%
5 Equipment	\$ 0	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	0%
6 Other	\$ 18,836	\$ 0.00	\$ 0.00	\$ 0.00	\$ 18,836.00	0%
7 Indirect	\$ 0	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	0%
8 Total	\$ 744,415	\$ 0.00	\$ 0.00	\$ 0.00	\$ 744,415.00	0%

This report is true and correct to the best of my knowledge.

Authorized Signature _____ Title _____ Date _____
 Reminder: Request for Reimbursement cannot be processed without an expenditure report/back-up. Reimbursement is only allowed for items contained within Subgrant Award documents. If applicable, travel claims must accompany report.

FOR HEALTH DIVISION USE ONLY

Program contact necessary? Yes No Contact Person: _____
 Reason for contact: _____
 Fiscal review/approval date: _____ Signed: _____
 Scope of Work review/approval date: _____ Signed: _____
 ASO or Bureau Chief (as required): _____ Date: _____

Washoe County Health District (WCHD)
 CDC Public Health Emergency Preparedness (BP10E)
 SUBGRANT #CDC09-10 (HD#11061)

SECTION B

Scope of Work

August 10 2010 through August 9, 2011

Materials Acquisition and Distribution

The purpose of Material Acquisition and Distribution is to ensure that during a public health emergency Nevada's health authorities are capable of acquiring, distributing, and dispensing medical assets quickly and efficiently to the citizens and visitors of Nevada. Achieving this mission will take a high level of coordination between the Nevada State Health Division and Local Health Authorities.

Goal: Demonstrate Washoe County Health Districts (WCHD) capability to receive and DISPENSE medical countermeasures during a public health emergency by improving WCHD's Technical Assistance Review (TAR) score from a 62% to an 80%.

Objective:	Activities to achieve Objective (detailed information)	Date due by	Documentation
By July 2011, incorporate 100% of the local TAR SNS planning elements into WCHD's POD Ops Manual.	<ul style="list-style-type: none"> • Update deficiencies revealed during state SNS Program TAR reviews, trainings, and exercises. (Use TAR reports and AAR/IP's). • Conduct 1 multi-discipline planning/advisory group meeting annually that includes the following agencies/organizations: <ul style="list-style-type: none"> - WCHD - Reno Fire Dept. - Mental Health - REMSA - Emergency Mgt. - WCSD Jail - Transportation - MRC - Reno PD/WCSD - Red Cross - Home Health - CERT - Civic Org. - Private - At-Risk • Develop use of force guidelines for Law Enforcement in WCHD's POD Ops Manual. • Address legal issues (staff compensation & personnel authorized to dispense medication during a state of emergency) in WCHD's POD 	<ul style="list-style-type: none"> • 7/31/11 • 7/31/11 • 7/31/11 • 7/31/11 	<ul style="list-style-type: none"> - Signature page in POD plan - Meeting Minutes & Sign-in Sheets - Provide use of force guidelines

	Ops Manual.	<ul style="list-style-type: none"> - Provide copy of POD Ops Manual w/ changes - Identify SNS coordinator in the POD Ops Manual
<p>By July 2011, incorporate 100% of the local TAR Management of SNS planning elements into WCHD's POD Ops Manual.</p>	<ul style="list-style-type: none"> • Identify a primary and back-up SNS/POD coordinator. • Conduct quarterly call-down drills (4 drills annually) of key response personnel assigned to the following functions during POD operations: <ul style="list-style-type: none"> - IT Support - Security - POD Coordination - Inventory Management Coordination - Hospital Coordination - Public Information - Volunteer Coordination - Safety Coordination 	<ul style="list-style-type: none"> • 7/31/11
<p>By July 2011, demonstrate WCHD's ability to use redundant communication equipment during a public health emergency.</p>	<ul style="list-style-type: none"> • Conduct quarterly communication drills (4 drills annually) that test communication networks (Web EOC, HAN, HavBed, and 800 MHz radio systems) between command and management locations (e.g. WCHD ops center and POD locations) and support agencies (e.g. WCHD ops center and the County EOC). • Provide training on the use of redundant communications (Web EOC, HAN, HavBed, and 800 MHz radio systems) to personnel that are assigned to the following functions: <ul style="list-style-type: none"> - IT Support - Security - POD Coordination - Inventory Management Coordination - Hospital Coordination - Public Information - Volunteer Coordination - Safety Coordination 	<ul style="list-style-type: none"> • 11/08/10 • 2/08/11 • 5/8/11 • 8/8/11 • 7/31/11
<p>By October 2010, demonstrate</p>	<ul style="list-style-type: none"> • Develop and disseminate PIC messages for WCHD's annual POD 	<ul style="list-style-type: none"> • 10/31/10
		<ul style="list-style-type: none"> - Provide PIC

<p>WCHD's ability to conduct a Public Information and Communication (PIC) Campaign during public health emergency.</p>	<p>exercise.</p> <ul style="list-style-type: none"> Attend the DSNS PIC training course in October 2010 	<ul style="list-style-type: none"> 10/31/10 	<p>messages and proof of dissemination. Provide Sign-in Sheet</p>
<p>By July 2011, WCHD will demonstrate the capability to provide security for all components of a mass prophylaxis operation.</p>	<ul style="list-style-type: none"> Identify a primary point-of-contact from Reno Police Department, Sparks Police Department, Washoe County Sheriff's Department, Washoe County School District Police Department and the University Police to act as a security liaison for the law enforcement agency, during POD operations. Develop and incorporate the following security policies / issues into the WCHD POD Ops Manual: <ul style="list-style-type: none"> Establishment of law enforcement officer posts Specialized unit needs (canine, explosive ordnance disposal, tactical, traffic, etc.) Law enforcement shifts Communication & coordination between law enforcement organizations Work with local law enforcement to develop security plans for transportation of medical materiel for the following purposes: <ul style="list-style-type: none"> Transport of materials from dispensing site to other sites that may need materiel. Escort of personnel to and from site venues 	<ul style="list-style-type: none"> 7/31/11 7/31/11 7/31/11 	<ul style="list-style-type: none"> Provide POD Ops Manual with names and numbers of each security contact Provide POD Ops Manual with updated security policies Provide security plans for transportation of SNS materiel.
<p>By July 2011, WCHD will demonstrate the capability to provide mass prophylaxis to 100% of their population during a public health</p>	<ul style="list-style-type: none"> Develop POD procedures that address shift hours and shift change for POD staff. Develop a first responder and critical infrastructure personnel mass prophylaxis annex to the WCHD POD Ops Manual. 	<ul style="list-style-type: none"> 7/31/11 7/31/11 	<ul style="list-style-type: none"> Provide POD Ops Manual Provide First Responder Mass

<p>emergency.</p>	<ul style="list-style-type: none"> • Develop an at-risk population mass prophylaxis annex to the WCHD POD Ops Manual. • At a minimum, recruit 40 individuals to fill the roles of POD Commander and Operations Section Chief during POD operations. These individuals will be able to provide command and control at POD locations. (Work with church groups, parent teacher associations and other volunteer organizations to ensure there are enough personnel to run all (<u>22</u>) PODs during a catastrophic emergency. • Increase the current number of MRC personnel (158) by 10% to 174 volunteers • Increase the current number of Push-Partners (Nevada Energy and IGT) for 2 to 3. Finalize <u>all</u> MOU's by the end of the grant year. 	<ul style="list-style-type: none"> • 7/31/11 • 7/31/11 • 7/31/11 • 7/31/11 	<p>Prophylaxis annex</p> <ul style="list-style-type: none"> - Provide at-risk population Mass Prophylaxis annex - Provide a list, with contact information, of all personnel on POD core management teams. - Provide sign-in sheets, training material, and agenda for their POD training. - Provide the MRC registry with 174 volunteers - Provide a total of 3 signed MOU's
<p>By July 2011, WCHD will increase the capability of their three major hospitals, (Renown, Saint Mary's, and Northern Nevada Medical Center) to acquire medical</p>	<ul style="list-style-type: none"> • Identify two individuals (primary and back-up) from each hospital that are authorized to request medical materiel on behalf of the hospital. 	<ul style="list-style-type: none"> • 7/31/11 	<ul style="list-style-type: none"> - Provide name and number of each primary and secondary contact

<p>material during an emergency.</p>	<ul style="list-style-type: none"> • Train the identified hospital personnel on proper emergency medical materiel request procedures. • Exercise the emergency medical materiel request procedures annually with <u>each</u> hospital. 	<ul style="list-style-type: none"> • 7/31/11 • 7/31/11 	<p>person from each hospital. (6 total, Renown, Saint Mary's, Northern Nevada).</p> <ul style="list-style-type: none"> - Provide training material, sign-in sheets, and agenda - Provide AAR/IP that identifies request procedures have been exercised with each hospital.
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Evaluation:

- Progress Reports will be submitted in narrative format to the Nevada State Health Division by:
 - July 31st, 2011 (for DSNS TAR Review)
 - April 30th, 2011 (Mid-Year Progress Report and Performance Measures) (For the period of 8/10/10 through 02/28/11)
 - November 9th, 2011 (End-of-Year Progress Report and Performance Measures) (For the period of 8/10/10 through 8/9/11)
- Reports will detail the progress on the following activities:
 - Local TAR SNS planning elements
 - Local TAR Management of SNS planning elements
 - Use of Redundant Communication
 - Public Information and Communication (PIC)
 - Security
 - Mass Dispensing
 - Hospital Coordination
- If progress or objectives are not met, provide detailed information about the current progress, barriers, and corrective action taken to

meet objectives

- Quarterly Site Visits may be conducted by the Technical Assistance Team to ensure fiscal accountability and programmatic achievement
- LHA's will be required to provide quarterly updates on programmatic progress, trainings, and exercises

**Full-Scale Mass Vaccination Exercise
"Operation POD NV III"**

Weapons of mass destruction involving chemical, biological, radiological, nuclear and explosive agents have become an increasing reality in the United States. These agents can cause disease, personal injury and/or death through a mass casualty exposure incident or person to person exposure. Naturally occurring diseases, such as influenza, can also create mass illnesses that affect large populations. Nevada recognizes that in order to prevent and minimize the effects of such a public health emergency, it may be necessary to provide mass immunization to the effected community.

Goal: Demonstrate Washoe County Health District's (WCHD) ability to successfully execute a mass vaccination operation.

Objective:	Activities to achieve Objective (detailed information)	Date due by	Documentation
<p>By December 2010, WCHD will demonstrate the ability to communicate between their Department Operations Center (DOC) and remote POD sites by using 3 different types of communications modalities (R.A.I.L.S)</p>	<ul style="list-style-type: none"> • Conduct a redundant communications drill during the Fall 2010 POD exercise, that tests the capability of the WCHD DOC to communicate with a POD site by using different communication modalities, that must include 3 of the following: <ul style="list-style-type: none"> - Satellite Phones - Ham/Amateur Radio - Web EOC - E-Mail - UHF/VHF/ 800 MHz Radio - NXT Communicator 	<ul style="list-style-type: none"> • 12/31/10 	<ul style="list-style-type: none"> - Provide AAR/IP
<p>By December 2010, WCHD will incorporate at least 2 different agencies that participate as volunteers during their annual POD exercise</p>	<ul style="list-style-type: none"> • Develop partnerships with at least 2 different agencies that can provide volunteers during the annual POD exercise. The following is a suggested list of potential agencies the WCHD can partner with. <ul style="list-style-type: none"> - Lions Club - Red Cross - Meals-on-Wheels - Church Groups - American Legion - Parent/Teacher Associations - Veterans of Foreign Wars - Rotary Club 	<ul style="list-style-type: none"> • 12/31/10 	<ul style="list-style-type: none"> - Provide POD sign-in sheet that identifies where volunteers are from or provide MOU with partnering agency.

<p>By December 2010, WCHD will improve their Patient Per Hour (PPH) throughput at their 2010 POD exercise from a 2009 PPH of 344 to 361 PPH (an increase of 5%)</p>	<ul style="list-style-type: none"> • Recruit additional personnel to operate the POD • Explore alternate methods of dispensing that will increase patient throughput • Test plans that establish the criteria, authorization, and procedures to alter clinical dispensing model to increase patient throughput • Utilize WebEOC to track inventory at the POD site • Train POD inventory staff in POD functions as per their Job Action Sheet • Implement Washoe County chain of custody procedures. 	<ul style="list-style-type: none"> • 12/31/11 	<ul style="list-style-type: none"> - Provide AAR/IP that identifies a higher throughput of 361 PPH
<p>By December 2010, WCHD will demonstrate the ability to track pharmaceuticals within their POD. WCHD POD will report an accurate vaccine count to the WCHD DOC that is within a 5% margin of error.</p>	<ul style="list-style-type: none"> • Implement Washoe County chain of custody procedures. 	<ul style="list-style-type: none"> • 12/31/11 	<ul style="list-style-type: none"> - Provide AAR/IP that identifies a WCHD ability to track pharmaceuticals.

Evaluation:

- Progress Reports will be submitted in narrative format to the Nevada State Health Division by:
 - July 31st, 2011 (for DSNS TAR Review)
 - April 30th, 2011 (Mid-Year Progress Report and Performance Measures) (For the period of 8/10/10 through 02/28/11)
 - November 9th, 2011 (End-of-Year Progress Report and Performance Measures) (For the period of 8/10/10 through 8/9/11)
- Reports will detail the progress man on the following activities:
 - Local TAR SNS planning elements
 - Local TAR Management of SNS planning elements
 - Use of Redundant Communication
 - Public Information and Communication (PIC)
 - Security
 - Mass Dispensing
 - Hospital Coordination
- If progress or objectives are not met, provide detailed information about the current progress, barriers, and corrective action taken to meet objectives
- Quarterly Site Visits may be conducted by the Technical Assistance Team to ensure fiscal accountability and programmatic achievement
- LHA's will be required to provide quarterly updates on programmatic progress, trainings, and exercises

CDC Performance Measures

Performance Measures are an important tool for WCHD to demonstrate essential public health emergency preparedness and response capabilities. To ensure a timely and effective response to an incident, WCHD must demonstrate their capability to immediately, with no advanced notice, assemble public health staff with senior incident management roles. The ability to quickly notify and assemble such staff is a critical first step in initiating or activating a public health response regardless of the scale of the incident or event.

Goal: Demonstrate the capability to notify primary, secondary, and tertiary staff to cover all incident management functional roles during a complex incident.

Objective:	Activities to achieve Objective (detailed information)	Date due by	Documentation
<p>By July 2011, WCHD will demonstrate the ability to provide an effective and coordinated response to a complex incident by convening 100% of their command ICS team, which can make decisions about appropriate response measures and interacts with other response agencies.</p>	<ul style="list-style-type: none"> • Maintain a roster (updated quarterly) of pre-identified staff that would fill core Incident Command System (ICS) functional roles during a public health emergency. The following are the 8 ICS functional roles: <ul style="list-style-type: none"> - Incident Commander - Liaison Officer - Finance Section Chief - Operations Section Chief - Incident Commander - Safety Officer - Public Information Officer - Logistics Section Chief - Planning Section Chief 	<ul style="list-style-type: none"> • 7/31/11 • 7/31/11 	<ul style="list-style-type: none"> - Provide a roster of pre-identified staff with a cover page that is signed to verify it is updated quarterly.
<ul style="list-style-type: none"> • Test WCHD's staff notification system twice a year, with at least one staff notification drill being unannounced and occurring outside of normal business hours. • Conduct one staff assembly drill. This drill can be announced and conducted during business hours. This drill must assemble 100% of the core ICS staff needed to make decisions about appropriate response measures. This group must convene within 60 minutes of 		<ul style="list-style-type: none"> • 7/31/11 	<ul style="list-style-type: none"> - Provide an AAR/IP for each staff notification drill. One AAR/IP must identify that the drill was conducted outside of normal

	notification.	<p><i>business hours.</i></p> <p><i>Provide an AAR/IP that identifies 100% of the core ICS staff assembled within 60 minutes.</i></p>
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Evaluation:

- Progress Reports will be submitted in narrative format to the Nevada State Health Division by:
 - July 31st, 2011 (for DSNS TAR Review)
 - April 30th, 2011 (Mid-Year Progress Report and Performance Measures) (For the period of 8/10/10 through 02/28/11)
 - November 9th, 2011 (End-of-Year Progress Report and Performance Measures) (For the period of 8/10/10 through 8/9/11)
- Reports will detail the progress man on the following activities:
 - **Local TAR SNS planning elements**
 - **Local TAR Management of SNS planning elements**
 - **Use of Redundant Communication**
 - **Public Information and Communication (PIC)**
 - **Security**
 - **Mass Dispensing**
 - **Hospital Coordination**
- If progress or objectives are not met, provide detailed information about the current progress, barriers, and corrective action taken to meet objectives
- Quarterly Site Visits may be conducted by the Technical Assistance Team to ensure fiscal accountability and programmatic achievement
- LHA's will be required to provide quarterly updates on programmatic progress, trainings, and exercises

Goal: Complete agency specific COOP plan to ensure durability of essential public health functions during a pandemic or biological event.

Objective:	Activities to achieve Objective	Date due by	Documentation
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<p>Complete the "All Hazards" COOP plan for public health programs within Washoe County. Ensure this plan includes a pandemic flu plan and is capable of sustaining essential services during a pandemic influenza or biological event.</p>	<p>Use the most current federal template for the COOP to complete the COOP plan for Washoe County Health District (WCHD) and ensure the following issues are addressed within this plan: MOAs for resource sharing; policies and procedures for telecommuting; order of succession for key organizational leadership; delegation of authority protocols; protocols for employee care; infection control policies and procedures; social distancing; alternate work schedules; alternate work locations; and, sick leave policies during a pandemic or biological event.</p> <p>Ensure that this WCHD COOP Plan is synchronized with Washoe County's Emergency Operations Plan (EOP), and the WCHD POD Plan, WCHD SNS Plan, etc.</p>	<ul style="list-style-type: none"> • 2/10/2011 • 2/10/2011 	<ul style="list-style-type: none"> - WCHD COOP Plan - WCHD COOP Plan
<p>Add a pandemic influenza component to the WCHD 'Public Information and Communication (PIC) Plan'</p>	<p>Expand the current version of the WCHD PIC Plan to include pre-canned messages for a pandemic influenza scenario</p>	<ul style="list-style-type: none"> • 7/2011 	<ul style="list-style-type: none"> - WCHD PIC Plan
<p>Demonstrate the ability to sustain essential services by conducting one real world operation or one COOP exercise that utilizes a pandemic influenza scenario.</p>	<p>WCHD will conduct at least a COOP Workshop in BP-10E that includes a majority of the key players identified in the new SNHD COOP Plan.</p>	<ul style="list-style-type: none"> • 7/2011 	<ul style="list-style-type: none"> • WCHD COOP exercise AAR-IP

Emergency Preparedness Plans Public Comment

<p>Goal: Solicit public comment on emergency preparedness plans and their implementation</p>		
<p>Objective</p>	<p>Date Due by</p>	<p>Documentation</p>

Solicit and document public comment on emergency preparedness plans and their implementation.	Solicit and document public comment on emergency preparedness plans and their implementation.	<ul style="list-style-type: none"> • August 2011 	Provide NSHD with documentation of process improvement.
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Approved By:

Denis M. Humphreys, OD
 Chairman, Washoe County District Bd of Health



Date: 11/18/10

Kyle Devine, MSW, Health Program Manager 2
 Public Health Preparedness, NSHD

Date: _____

WASHOE COUNTY HEALTH DISTRICT
PUBLIC HEALTH PREPAREDNESS STAFF CERTIFICATION ATTESTING TO TIME (Level of Effort) SPENT ON PHP DUTIES
 For the Period August 10, 2010 through August 9, 2011
 Subgrant # CDC10-09; Federal Grant # 3U90TP916964-10W1

I certify that the % of time (level of effort) I have stated is true and correct				
Employee Name	Title	% time (level of effort) spent on PHP duties	Employee Signature	Date Certified
Dr. Randal Todd	Epidemiology & PHP Director	75%		
Jeannie Harris	Administrative Secretary	100%		
Phil Ulibarri	Public Information Officer	100%		
Nicole Alberti	Health Educator	50%		
	PH Emergency Response Coordinator	100%		
Jeff Whitesides	PHP Manager	100%		
Dr. Lei Chen	Senior Epidemiologist	40%		
Pam Young	Intermittent Hourly Position - Epidemiologist	100%		
	Intermittent Hourly Position - Public Health Investigator	100%		

All duties performed by these employees support the objectives/deliverables of the federal award.

Coulombe
 Funding Recipient Name

Administrative Health Services Officer, Washoe County Health District
 Title

[Handwritten Signature]
 Signature

11/22/10
 Date

Kafoury, Armstrong & Co., CPA's performed an annual Single Audit of several federal grant programs, which are administered by the Nevada State Health Division for the fiscal year ended June 30, 2008. Included in the audit was the Centers for Disease Control and Prevention, Investigations and Technical Assistance, CFDA 93.283. Finding 8-03: Adequate procedures were not in place at the Nevada State Health Division to ensure costs charged to the Federal Programs (specifically salaries and benefits) were supported by the required documentation and certifications.

As a result of this finding, the Health Division, Public Health Preparedness Program, is requiring all sub-grantees to submit semi-annual time and effort certifications for all employees funded (in whole or in part) by CDC (CFDA # 93.069) or ASPR (CFDA# 93.889) preparedness funds

Pursuant to the CDC BP 10 Grant Guidance:

- 1) PHEP awardees are required to adhere to all applicable federal laws and regulations, including OMB Circular A-87 and semiannual certification of employees who work solely on a single federal award. Per OMB Circular A-87, compensation charges for employees who work solely on a single federal award must be supported by periodic certifications that the employees worked solely on that program during the certification period.
- 2) These certification forms must be prepared at least semiannually and signed by the employee or a supervisory official having firsthand knowledge of the work performed by the employee. Awardees must be able to document that the scope of duties and activities of these employees are in alignment and congruent with the intent of the PHEP cooperative agreement to build public health response capacity and to rebuild public health infrastructure in state and local public health agencies. These certification forms must be retained in accordance with 45 Code of Federal Regulation, Part 92.42.

Nevada State Health Division
Public Health Preparedness
Match Certification

Date: _____

External Funding Source: Centers for Disease Control (CDC)- Public Health Emergency Preparedness (PHEP)

A mandatory cost sharing/matching cost contribution is required for the following proposal:

Funding Recipient: Washoe County Health District

Project Title: 2010 CDC Public Health Preparedness and Response for Bioterrorism (PHEP)

Project Grant #: 3U90TP916964-10W1 (Subgrant # CDC09-10)

Duration: From: August 10, 2010 To: August 9, 2011

Total cost sharing/matching cost contribution: \$74,441 / Percentage: 10%

Source of cost sharing/matching cost contribution:

Name: _____

Account # (if applicable): _____

Funding recipient hereby certifies that the identified cost sharing/matching cost contribution is not being used to match any other funding source.

Eileen Coulombe
Administrative Health Services Officer
Washoe County Health District



11/22/10

Name and Title (Funding Recipient)

Signature

Date

Debi Galloway
Management Analyst II
Public Health Preparedness, NSHD

Name and Title

Signature

Date

Kyle Devine, MSW
Health Program Manager II
Public Health Preparedness, NSHD

Name and Title

Signature

Date



Washoe County Health District



Public Health
Prevent. Promote. Protect

STAFF REPORT
BOARD MEETING DATE: 11/18/10

DATE: November 8, 2010

TO: District Board of Health

FROM: Patsy Buxton, Fiscal Compliance Officer, Washoe County Health District *PB*
775-328-2418, pbuxton@washoecounty.us

THROUGH: Eileen Coulombe, Administrative Health Services Officer, Washoe County Health District, 775-328-2417, ecoulombe@washoecounty.us *EC*

SUBJECT: Approval of Notice of Subgrant Award from the Nevada State Health Division in the amount of \$116,000 (\$58,000-FY11, \$58,000-FY12) for the period January 1, 2011 to June 30, 2012 in support of the Maternal and Child Health (MCH) Program; Approval of amendments totaling an increase of \$33,060 in both revenue and expense to the FY 11 MCH Federal Grant Program, IO 10828; Approval of amendments totaling an increase of \$24,940 in both revenue and expense to the MCH State Grant Program, IO 10007; Authorize the creation of an on call Public Health Nurse Intermittent Hourly position (PC#TBD) as evaluated by the Job Evaluation Committee (JEC); and if approved authorize the Chairman to execute.

SUMMARY

The Washoe County District Board of Health must approve and execute, or direct the Health Officer to execute, contracts in excess of \$50,000, Interlocal Agreements and amendments to the adopted budget.

The Washoe County Health District has received a Notice of Subgrant Award from the Nevada State Health Division in the total amount of \$116,000 (\$58,000-FY 11 and \$58,000-FY 12) for the period January 1, 2011 through June 30, 2012 in support of the MCH Program. A copy of the Notice of Subgrant Award is attached.

District Board of Health strategic priorities: 1) Protect population from health problems and health hazards 2) Give people information they need to make healthy choices.

BCC Strategic Objective supported by this item: Safe, Secure and Healthy Communities.
BCC Strategic Outcome supported by this item: Healthy communities.

AGENDA ITEM # 8.B.

It also supports the Health District's Home Visiting Program's mission to promote public health by educating and empowering individuals and families to enhance their physical, emotional, mental, and social well being; and through the development of partnerships, promote a safe and healthy community.

PREVIOUS ACTION

The District Board of Health directed staff to submit a grant application to the Nevada State Health Division, in the amount of \$58,000 for Maternal Child Health Federal Consolidated Programs at their December 17, 2009 board meeting. The Board approved the District Health Officer's acceptance of the Notice of Subgrant Award from the Nevada State Health Division in the amount of \$58,000 for the period January 1, 2010 to June 30, 2010 in support of the Maternal and Child Health (MCH) Program and associated budget amendments on January 28, 2010.

BACKGROUND

The Washoe County Health District received funding via a Notice of Subgrant Award to improve perinatal health outcomes in Washoe County through outreach, case management and support of local and state maternal and child health policies. The Notice of Subgrant Award is in the total amount of \$116,000 and is for the period January 1, 2011 through June 30, 2012.

This award includes partial funding for an existing Public Health Nurse II, travel, operating supplies and incentives such as bus passes and gas cards (non-cash value). The total budgeted amount for these items is \$1,750. Normally incentive/ enabler items do not exceed \$25.00 in value.

The Home Visiting program intends to assign an existing PHN II (PC# 70002210) to work on this grant. The current assignment for PC# 70002210 in home visiting will be handled (in order of preference) by the following:

1. An on call Intermittent Hourly PHN will be recruited from the community of retired Public Health Nurses and Registered Nurses (RN) with a Bachelors of Science in Nursing (BSN).
2. Increase hours for current part-time PHNs temporarily.
3. Authorize overtime on limited basis.
4. Reassign PHNs with home visiting experience from the Immunization and/or Sexually Transmitted Disease (STD) programs to the Home Visiting program; and utilize Intermittent Hourly RNs to backfill their PHN assignments. This option is not favorable as it is disruptive and moves away from the current decentralized model of keeping staff where they are budgeted.

Community and Clinical Health Services is proposing to implement a staffing pattern that will provide the necessary flexibility to staff short term grants requiring a PHN position in order to meet community needs. A key component to this staffing pattern is the ability

to use an on call Public Health Nurse (PHN) Intermittent Hourly position. This position does not currently exist in the Health District.

The creation of an on call Public Health Nurse (PHN) Intermittent Hourly position (PC#TBD) as evaluated by the Job Evaluation Committee (JEC) will also require Washoe Board of County Commissioner's approval.

FISCAL IMPACT

The FY11 budget does not include any funding for Internal Order 10828 and Internal Order 10007. A budget amendment is necessary to bring the Notice of Grant Award into alignment with the program budget.

Should the Board approve these budget amendments, the adopted FY 11 budget will be **increased by \$58,000** in the following accounts:

<u>Account Number</u>	<u>Description</u>	<u>Amount of Increase/(Decrease)</u>
2002-IO-10828-431100	Federal Revenue	\$33,060
2002-IO-10828-701110	Salaries	24,595
-705110	Insurance	2,732
-705210	Retirement	5,371
-705230	Medicare	362
	Total Expenditures	\$33,060
2002-IO-10007-432100	State Revenue	\$24,940
2002-IO-10007-701110	Salaries	13,702
-705110	Insurance	1,537
-705210	Retirement	3,021
-705230	Medicare	203
-710300	Operating Supplies	1,875
-710500	Other Expense	1,750
-710502	Printing	160
-710512	Auto Expense	639
-710703	Biologicals	746
-710872	Food Purchases	201
-711210	Travel	1,106
	Total Expenditures	\$24,940

RECOMMENDATION

Staff recommends that the Washoe County District Board of Health approve the Notice of Subgrant Award from the Nevada State Health Division in the amount of \$116,000

(\$58,000-FY11, \$58,000-FY12) for the period January 1, 2011 to June 30, 2012 in support of the Maternal and Child Health (MCH) Program; Approve amendments totaling an increase of \$33,060 in both revenue and expense to the FY 11 MCH Federal Grant Program, IO 10828; Approve amendments totaling an increase of \$24,940 in both revenue and expense to the FY 11 MCH State Grant Program, IO 10007; Authorize the creation of an on call Public Health Nurse Intermittent Hourly position (PC#TBD) as evaluated by the Job Evaluation Committee (JEC); and if approved authorize the Chairman to execute.

POSSIBLE MOTION


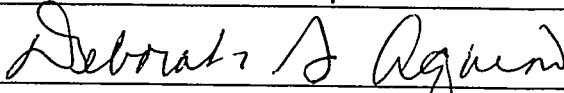
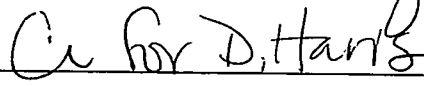

Move to approve the Notice of Subgrant Award from the Nevada State Health Division in the amount of \$116,000 (\$58,000-FY11, \$58,000-FY12) for the period January 1, 2011 to June 30, 2012 in support of the Maternal and Child Health (MCH) Program; Approve amendments totaling an increase of \$33,060 in both revenue and expense to the FY 11 MCH Federal Grant Program, IO 10828; Approve amendments totaling an increase of \$24,940 in both revenue and expense to the FY 11 MCH State Grant Program, IO 10007; Authorize the creation of an on call Public Health Nurse Intermittent Hourly position (PC#TBD) as evaluated by the Job Evaluation Committee (JEC); and if approved authorize the Chairman to execute.

HEALTH DIVISION

(hereinafter referred to as the DIVISION)

#: 11144
 Budget Account #: 3222
 Category #: 15/GF/9399411
 GL #: 8516

NOTICE OF SUBGRANT AWARD

Program Name: Maternal and Child Health Bureau of Child, Family & Community Wellness Nevada State Health Division		Subgrantee Name: Washoe County Health District	
Address: 4150 Technology Way, Suite # 210 Carson City, NV 89706-2009		Address: P.O. Box 11130 Reno, NV 89520-0027	
Subgrant Period: January 1, 2011 through June 30, 2012		Subgrantee's EIN#: 88-6000138 Vendor#: T-40283400 Dun & Bradstreet#: 73-786-998	
Reason for Award: Improved outcomes for Maternal and Child Health populations in Washoe County based on national and state performance measures.			
County(ies) to be served: () Statewide (x) Specific county or counties: <u>Washoe</u>			
Approved Budget Categories:			
1. Personnel	\$	103,046	Must match Budget in Scope of Work.
2. Travel	\$	3,490	
3. Operating	\$	320	
4. Supplies	\$	9,144	
5. Contractual/Consultant	\$	0	
6. Training	\$	0	
7. Other	\$	0	
Total Cost		\$	116,000
Disbursement of funds will be as follows: Payment will be made upon receipt and acceptance of an invoice and supporting documentation specifically requesting reimbursement for actual expenditures <i>specific to this subgrant</i> . Total reimbursement will not exceed \$ 116,000.00 during the subgrant period and \$ 58,000 per budget period.			
Source of Funds:			
1. Maternal and Child Health Block Grant	57%	93.994	BO4MC17025
2. State General Funds	43%	N/A	N/A
Terms and Conditions In accepting these grant funds, it is understood that: 1. Expenditures must comply with appropriate state and/or federal regulations. 2. This award is subject to the availability of appropriate funds. 3. Recipient of these funds agrees to stipulations listed in Sections A, B, and C of this subgrant award.			
Denis M. Humphreys, OD Chairman, Wa Co District Board of Health	Signature 		Date 11/18/10
Deborah Aquino Program Manager	Signature 		Date 11/02/10
Deborah Harris Bureau Chief	Signature 		Date 11/2/10
Richard Whitley, MS Administrator, Health Division	Signature 		Date

**HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION A
Assurances**

As a condition of receiving subgranted funds from the Nevada State Health Division, the Subgrantee agrees to the following conditions:

1. Subgrantee agrees grant funds may not be used for other than the awarded purpose. In the event Subgrantee expenditures do not comply with this condition, that portion not in compliance must be refunded to the Health Division.
2. Subgrantee agrees to submit reimbursement requests for only expenditures approved in the spending plan. Any additional expenditures beyond what is allowable based on approved categorical budget amounts, without prior written approval by the Health Division, may result in denial of reimbursement.
3. Approval of subgrant budget by the Health Division constitutes prior approval for the expenditure of funds for specified purposes included in this budget. Unless otherwise stated in the Scope of Work the transfer of funds between budgeted categories without written prior approval from the Health Division is not allowed under the terms of this subgrant. Requests to revise approved budgeted amounts must be made in writing and provide sufficient narrative detail to determine justification.
4. Recipients of subgrants are required to maintain subgrant accounting records, identifiable by subgrant number. Such records shall be maintained in accordance with the following:
 - a. Records may be destroyed not less than three years (unless otherwise stipulated) after the final report has been submitted if written approval has been requested and received from the Administrative Services Officer of the Health Division. Records may be destroyed by the Subgrantee five (5) calendar years after the final financial and narrative reports have been submitted to the Health Division.
 - b. In all cases an overriding requirement exists to retain records until resolution of any audit questions relating to individual subgrants.

Subgrant accounting records are considered to be all records relating to the expenditure and reimbursement of funds awarded under this Subgrant Award. Records required for retention include all accounting records and related original and supporting documents that substantiate costs charged to the subgrant activity.

5. Subgrantee agrees to disclose any existing or potential conflicts of interest relative to the performance of services resulting from this subgrant award. The Health Division reserves the right to disqualify any grantee on the grounds of actual or apparent conflict of interest. Any attempt to intentionally or unintentionally conceal or obfuscate a conflict of interest will automatically result in the disqualification of funding.
6. Subgrantee agrees to comply with the requirements of the Civil Rights Act of 1964, as amended, and the Rehabilitation Act of 1973, P.L. 93-112, as amended, and any relevant program-specific regulations, and shall not discriminate against any employee or offer or for employment because of race, national origin, creed, color, sex, religion, age, disability or handicap condition (including AIDS and AIDS-related conditions).
7. Subgrantee agrees to comply with the Americans with Disabilities Act of 1990 (P.L. 101-136), 42 U.S.C. 12101, as amended, and regulations adopted there under contained in 28 CFR 26.101-36.999 inclusive, and any relevant program-specific regulations.
8. Subgrantee agrees to comply with the requirements of the Health Insurance Portability and Accountability Act of 1996, 45 C.F.R. 160, 162 and 164, as amended. If the subgrant award includes functions or activities that involve the use or disclosure of Protected Health Information, the Subgrantee agrees to enter into a Business Associate Agreement with the Health Division, as required by 45 C.F.R 164.504 (e).

9. Subgrantee certifies, by signing this subgrant, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency. This certification is made pursuant to regulations implementing Executive Order 12549, Debarment and Suspension, 28 C.F.R. pt. 67 § 67.510, as published as pt. VII of May 26, 1988, Federal Register (pp.19150-19211). This provision shall be required of every Subgrantee receiving any payment in whole or in part from federal funds.
10. Subgrantee agrees, whether expressly prohibited by federal, state, or local law, or otherwise, that no funding associated with this subgrant will be used for any purpose associated with or related to lobbying or influencing or attempting to lobby or influence for any purpose the following:
 - a. any federal, state, county or local agency, legislature, commission, council, or board;
 - b. any federal, state, county or local legislator, commission member, council member, board member, or other elected official; or
 - c. any officer or employee of any federal, state, county or local agency, legislature, commission, council, or board.
11. Health Division subgrants are subject to inspection and audit by representatives of the Health Division, Nevada Department of Health and Human Services, the State Department of Administration, the Audit Division of the Legislative Counsel Bureau or other appropriate state or federal agencies to
 - a. verify financial transactions and determine whether funds were used in accordance with applicable laws, regulations and procedures;
 - b. ascertain whether policies, plans and procedures are being followed;
 - c. provide management with objective and systematic appraisals of financial and administrative controls, including information as to whether operations are carried out effectively, efficiently and economically; and
 - d. determine reliability of financial aspects of the conduct of the project.
12. Any audit of Subgrantee's expenditures will be performed in accordance with Generally Accepted Government Auditing Standards to determine there is proper accounting for and use of subgrant funds. It is the policy of the Health Division (as well as a federal requirement as specified in the Office of Management and Budget (OMB) Circular A-133 [Revised June 27th, 2003]) that each grantee annually expending \$500,000 or more in federal funds have an annual audit prepared by an independent auditor in accordance with the terms and requirements of the appropriate circular. **A COPY OF THE FINAL AUDIT REPORT MUST BE SENT TO THE NEVADA STATE HEALTH DIVISION, ATTN: ADMINISTRATIVE SERVICES OFFICER IV, 4150 TECHNOLOGY WAY, SUITE 300, CARSON CITY, NEVADA 89706-2009, within nine (9) months of the close of the Subgrantee's fiscal year. To ensure this requirement is met Section D of this subgrant must be filled out and signed.**

**HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION B**

Description of services, scope of work, deliverables and reimbursement

This Notice of Subgrant Award supports improving outcomes for Maternal and Child Health National and State Performance Measures (NPM,SPM). The priorities were established by the state needs assessment for federal Title V and local Washoe County data and are related to, or match the Maternal and Child Health Advisory Board priorities for the funding cycle.

Washoe County Health District, hereinafter referred to as Subgrantee, agrees to provide the following services and reports from January 1, 2011 – June 30, 2012:

Program Goal: Improve perinatal health outcomes in Washoe County through outreach, case management and support of local and state maternal and child health policies.

Program Objectives:

- A. Conduct activities associated with **NPM 1: Increase the percent of screen positive newborns who receive timely follow-up to definitive diagnosis and clinical management for condition(s) mandated by State sponsored newborn screening programs.**
 1. Provide follow-up referral services with Washoe County families with an infant that tests positive for metabolic disorders in the Newborn Screening program of the Nevada State Health Division (less than two per year expected).
- B. Conduct activities associated with **NPM 8: The rate of birth (per 1000) for teenagers aged 15 through 17 years.**
 1. In partnership with Title X's Region IX Family Planning Programs and other public health programs, disseminate preconception health recommendations to targeted populations and health care providers.
 2. Provide preconception health training program to health care providers.
- C. Conduct activities associated with **NPM 11: The percent of mothers who breastfeed their infants at six months of age.**
 1. Educate pregnant women about the importance of breastfeeding. Provide encouragement and support of breastfeeding during all interventions.
 2. Provide lactation consultation to enrolled women during the postpartum period.
 3. Increase Public Health Nursing (PHN) skills to provide lactation counseling.
- D. Conduct activities associated with **NPM 18: Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.**
 1. By June 30, 2011, establish PHN services with 125 pregnant women who plan to continue their pregnancy to term. Outreach conducted by PHN will be with agencies that provide pregnancy testing, nutritional supplementation (i.e. WIC) and child protection services.
 2. Family-centered and culturally competent case management services will be provided to teens and other high risk populations during pregnancy to promote access to early and sustained prenatal care; provide health education; and link clients to Medicaid, dental care, and other essential service such as mental health treatment.
Case Management Services:
 - a. Screen all clients for domestic violence; provide education and referrals as needed.
 - b. Screen all clients on use of substances; provide education on avoidance of alcohol, tobacco and other drugs to all pregnant women who receive services; refer to cessation and treatment programs as needed.
 - c. Screen all pregnant women and those women with children one year of age or less for post-natal depression and refer those in need of services.
 - d. Conduct activities that reduce low birth weight and very low birth weight (NPM 17).

- e. Identify women at risk for VLBW (women with chronic health problems including overweight or obesity, diabetes, cardiac disease, hypertension) during outreach activities.
 - f. Provide case management service including intensive education on risk reduction strategies and referrals to services that address risk such as: dental care, smoking cessation, nutritional support, stress management and social support.
- E. Continue to implement strategies to improve cultural and linguistic competency in case management services and preconception health campaign.
 - F. Cooperatively work with WIC, Family Resource Centers, Family to Family, and parent support agencies to promote integrated service delivery to clients.
 - G. Provide input to the Nevada State Health Division Maternal Child Health Program and the Maternal Child Health Advisory Board on local MCH priorities.
 - H. Subgrantee will identify the source of funding on all printed documents purchased or produced within the scope of this contract, using a statement similar to : "This publication (journal, article, etc.) was supported by the Nevada State Health Division through Grant Number 93.994 from the Health Resources and Services Administration. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Nevada State Health Division nor the Health Resources and Services Administration."
 - I. Any activities performed under this sub-grant shall acknowledge the funding was provided through the Nevada State Health Division by Grant Number CFDA 93.994 from the Department of Health and Human Services, Health Resources and Services Administration.

Reporting Objectives:

- A. Provide a brief report on program activities to date with all monthly requests for reimbursement: include activities related to the MCHAB priorities of ensuring access to prenatal care and systems of care for prevention.
- B. Report monthly in a digital format on outcome measures with county level and aggregate data from program clients served summarizing Subgrantee's activities for the Bureau of Child Family and Community Wellness, Maternal and Child Health:
 - 1. County Level Data
 - a. NPM 1: The number of families with an infant testing positive on newborn screening that receives follow-up services
 - 2. Program Case Management Clients
 - a. NPM 11: Percent of mothers who breastfeed their infants at 6 months of age:
 - i) Percent of pregnant women educated about the benefits of breastfeeding until 6 months of age.
 - ii) Percent of program women who breastfeed.
 - b. NPM 15: Percentage of women who smoke in the last three months of pregnancy
 - i. Percent of pregnant women educated during pregnancy about tobacco use
 - ii. Percent of pregnant women screened for use of tobacco during pregnancy
 - iii. Percent of pregnant women referred for use of tobacco during pregnancy
 - c. NPD 18: Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester
 - d. SPM 1: Increase the percent of women of child-bearing age who receive screening and assistance for domestic violence:
 - i. Percent of pregnant women educated about domestic violence
 - ii. Percent of pregnant women screened for domestic violence
 - iii. Percent of pregnant women referred for domestic violence services
 - e. SPM 11: Reduce the prevalence of Fetal Alcohol Spectrum Disorders:

- i. Percent of pregnant women educated during pregnancy about fetal alcohol spectrum disorders.
 - ii. Percent of pregnant women screened for use of alcohol during pregnancy
 - iii. Percent of pregnant women referred for use of alcohol during pregnancy
 - f. NPM 15 and SPM 11: Number of pregnant women and mothers with children birth to one year of age screened for post natal depression
- C. Subgrantee will present program outcomes at least annually to the Maternal and Child Health (MCH) Advisory Board. Subgrantee will be available to answer questions during the quarterly MCH Advisory Board meetings.

(Note: brief reports should be submitted with each request for reimbursement).

(continued on next page)

Subgrantee agrees to adhere to the following budget:

1. Personnel	\$ 103,046	Public Health Nurse I (50% of 1.0 FTE)
2. Travel	\$ 3,490	
3. Operating	\$ 320	
4. Supplies	\$ 9,144	
5. Other	\$ 0	
Total Cost	\$ 116,000	

- Flexibility within categories shall not exceed 10% or \$11,600 for the project period. Prior authorization is not required for category modification. Modifications may not change Scope of Work.
- Equipment purchased with these funds belongs to the federal program from which this funding was appropriated and shall be returned to the program upon termination of this agreement.
- Travel expenses, per diem, and other related expenses must conform to the procedures and rates allowed for State officers and employees. It is the Policy of the Board of Examiners to restrict contractors/Subgrantees to the same rates and procedures allowed State Employees. The State of Nevada reimburses at rates comparable to the rates established by the US General Services Administration, with some exceptions (State Administrative Manual 0200.0 and 0320.0).

Subgrantee agrees to request reimbursement according to the schedule specified below for the actual expenses incurred related to the Scope of Work during the subgrant period.

- Monthly reimbursements may be submitted.
- The maximum amount for the subgrant period is \$116,000 with the maximum per year is \$58,000.
- Requests for Reimbursement will be accompanied by supporting documentation, including a line item description of expenses incurred;
- A brief report must be submitted with each request for reimbursement. Use the request for reimbursement form provided by the Health Division.
- Additional expenditure detail will be provided upon request from the Division.

Additionally, the Subgrantee agrees to provide:

- A complete financial accounting of all expenditures to the Health Division within 30 days of the CLOSE OF THE SUBGRANT PERIOD. Any un-obligated funds shall be returned to the Health Division at that time, or if not already requested, shall be deducted from the final award.

The Nevada State Health Division agrees:

- Providing technical assistance, upon request from the Subgrantee;

The Nevada State Health Division agrees:

- Providing technical assistance, upon request from the Subgrantee;

- The Health Division reserves the right to hold reimbursement under this subgrant until any delinquent forms, reports, and expenditure documentation are submitted to and accepted by the Health Division.

Both parties agree:

- Site visits or monitoring will be done on a quarterly basis or at the request of either party.

All reports of expenditures and requests for reimbursement processed by the Health Division are SUBJECT TO AUDIT.

This subgrant agreement may be TERMINATED by either party prior to the date set forth on the Notice of Subgrant Award, provided the termination shall not be effective until 30 days after a party has served written notice upon the other party. This agreement may be terminated by mutual consent of both parties or unilaterally by either party without cause. The parties expressly agree that this Agreement shall be terminated immediately if for any reason the Health Division, state, and/or federal funding ability to satisfy this Agreement is withdrawn, limited, or impaired.

**HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION C
Financial Reporting Requirements**

- ☞ A Request for Reimbursement is due on a **monthly or quarterly** basis, based on the terms of the subgrant agreement, no later than the 15th of the month.
- ☞ Reimbursement is based on **actual** expenditures incurred during the period being reported.
- ☞ Payment will not be processed without all reporting being current.
- ☞ Reimbursement may only be claimed for expenditures approved within the Notice of Subgrant Award.
- ☞ **PLEASE REPORT IN WHOLE DOLLARS**

Provide the following information on the top portion of the form: Subgrantee name and address where the check is to be sent, Health Division (subgrant) number, Bureau program number, draw number, employer I.D. number (EIN) and Vendor number.

An explanation of the form is provided below.

A. Approved Budget: List the approved budget amounts in this column by category.

B. Total Prior Requests: List the **total** expenditures for all previous reimbursement periods in this column, for each category, by entering the numbers found on Lines 1-8, Column D on the **previous** Request for Reimbursement/Advance Form. If this is the first request for the subgrant period, the amount in this column equals zero.

C. Current Request: List the **current** expenditures requested at this time for reimbursement in this column, for each category.

D. Year to Date Total: Add Column B and Column C for each category.

E. Budget Balance: Subtract Column D from Column A for each category.

F. Percent Expended: Divide Column D by Column A for each category and total. Monitor this column; it will help to determine if/when an amendment is necessary. Amendments **MUST** be completed (including all approving signatures) 30 days **prior** to the end of the subgrant period.

**** An Expenditure Report/Backup that summarizes, by expenditure GL, the amounts being claimed in column 'C' is required.***

Nevada Department of Health and Human Services

Health Division # _____
 Bureau Program # 3222/15
 GL # 8516
 Draw #: _____

HEALTH DIVISION

REQUEST FOR REIMBURSEMENT

Program Name: Maternal Child Health Bureau of Child, Family & Community Wellness	Subgrantee Name: Washoe County Health District
Address: 4150 Technology Way, Ste. 210 Carson City, NV 89706	Address: PO Box 11130 Reno NV, 89520
Subgrant Period: January 1, 2011 through June 30, 2012	Subgrantee EIN#: 88-6000138 Subgrantee Vendor#: T-40283400

FINANCIAL REPORT AND REQUEST FOR FUNDS

(report in whole dollars; must be accompanied by expenditure report/back-up)

Month(s): _____ **Calendar Year:** _____

Approved Budget Category	A Approved Budget	B Total Prior Requests	C Current Request	D Year To Date Total	E Budget Balance	F Percent Expended
1 Personnel	\$ 103,046	\$ 0	\$ 0	\$ 0	103,046	0%
2 Travel	\$ 3,490	\$ 0	\$ 0	\$ 0	3,490	0%
3 Operating	\$ 320	\$ 0	\$ 0	\$ 0	320	0%
4 Supplies	\$ 9,144	\$ 0	\$ 0	\$ 0	9,144	0%
5 Contract/Consultant	\$ 0	\$ 0	\$ 0	\$ 0	0	#DIV/0!
6 Training	\$ 0	\$ 0	\$ 0	\$ 0	0	#DIV/0!
7 Other	\$ 0	\$ 0	\$ 0	\$ 0	0	#DIV/0!
8 Total	\$ 116,000	\$ 0	\$ 0	\$ 0	116,000	0%

This report is true and correct to the best of my knowledge.

Authorized Signature _____ Title _____ Date _____

Reminder: Request for Reimbursement cannot be processed without an expenditure report/back-up.
 Reimbursement is only allowed for items contained within Subgrant Award documents. If applicable, travel claims must accompany report.

FOR HEALTH DIVISION USE ONLY

Program contact necessary? Yes No Contact Person: _____

Reason for contact: _____

Fiscal review/approval date: _____ Signed: _____

Scope of Work review/approval date: _____ Signed: _____

ASO or Bureau Chief (as required): _____ Date: _____

HEALTH DIVISION
NOTICE OF SUBGRANT AWARD
SECTION D

NEVADA STATE HEALTH DIVISION
AUDIT INFORMATION REQUEST

1. Non-Federal entities that expend \$500,000.00 or more in total Federal Awards are required to have a single or program-specific audit conducted for that year, in accordance with *OMB Circular A-133*. A COPY OF THE FINAL AUDIT REPORT MUST BE SENT TO THE NEVADA STATE HEALTH DIVISION, ATTN: ADMINISTRATIVE SERVICES OFFICER IV, 4150 TECHNOLOGY WAY, SUITE 300, CARSON CITY, NEVADA 89706-2009, within nine (9) months of the close of your fiscal year.
2. Did your organization expend \$500,000.00 or more in all Federal Awards during your most recent fiscal year? YES ____ NO ____
3. When does your fiscal year end? _____
4. How often is your organization audited? _____
5. When was your last audit performed? _____
6. What time period did it cover? _____
7. Which accounting firm conducted the audit? _____

SIGNATURE

TITLE

DATE



Washoe County Health District



Public Health
Prevent Promote Protect

November 9, 2010

To: Members District Board of Health
 From: Eileen Coulombe, Administrative Health Services Officer
 Subject: Public Health Fund Revenue and Expenditure Report for October 2010

Recommendation

Staff recommends that the District Board of Health accept the attached report of revenues and expenditures for the Public Health Fund for October of fiscal year 11.

Background

The attached reports are for the accounting period 4/11 and the percentages should approximate 33% of the year. Our total revenues and expenditures for the current year (FY11) compared to last year (FY10) are as follows:

October 2010	FY11 – REV	FY10 – REV	FY11 – EXP	FY10 – EXP
Transfer	8%	16%		
AHS	22%	23%	26%	28%
AQM	30%	25%	32%	26%
CCHS	21%	23%	31%	27%
EHS	38%	35%	33%	34%
EPHP	7%	17%	17%	19%
TOTAL	21%	23%	28%	27%

The Environmental Oversight Account for October 2010 was \$163,152.44.

I will be happy to any questions of the Board during the meeting or you may contact me at 328-2417.


 Administrative Health Services Officer

Enclosure

Accounts	2011 Plan	2011 Actuals	Balance	Act%	2010 Plan	2010 Actual	Balance	Act%
422503 Environmental Permits	43,000.00	15,267.00	27,733.00	36	69,000.00	12,986.00	56,014.00	19
422504 Pool Permits	63,000.00	7,594.00	55,406.00	12	33,000.00	11,077.00	21,923.00	34
422505 RV Permits	10,500.00	2,738.00	7,762.00	26	10,500.00	2,918.00	7,582.00	28
422507 Food Service Permits	342,000.00	102,463.00	239,537.00	30	365,000.00	112,176.00	242,824.00	32
422508 Wat Well Const Perm	34,500.00	10,436.00	24,064.00	30	44,000.00	16,716.00	27,284.00	38
422509 Water Company Permits	4,000.00	468.00	3,532.00	12	12,000.00	1,687.00	10,313.00	14
422510 Air Pollution Permits	391,000.00	99,753.25	291,246.75	26	402,399.00	99,884.00	302,515.00	25
422511 ISDS Permits	47,000.00	23,148.00	23,852.00	49	90,000.00	17,703.85	72,296.15	20
422513 Special Event Permits	70,500.00	38,696.00	31,804.00	55	75,000.00	47,476.20	27,523.80	63
422514 Initial Applic Fee	35,000.00	7,120.00	27,880.00	20	38,000.00	12,240.00	25,760.00	32
* Licenses and Permits	1,040,500.00	307,683.25	732,816.75	30	1,128,899.00	334,864.05	794,034.95	30
431100 Federal Grants	6,971,321.76	975,690.73	5,995,631.03	14	8,060,346.66	1,507,572.24	6,552,774.42	19
431105 Federal Grants - Indirect	29,670.00	13,655.96	16,014.04	46	31,540.00	9,805.13	21,734.87	31
432100 State Grants	445,797.42	190,470.34	255,327.08	43	627,556.00	138,479.20	489,076.80	22
432310 Tire Fee NRS 444A.090	370,535.00	226,129.72	144,405.28	61	370,534.52	209,568.78	160,965.74	57
432311 Pol Ctr 455B.830	290,140.86	77,725.00	212,415.86	27	280,000.00	76,400.00	203,600.00	27
* Intergovernmental	8,107,465.04	1,483,671.75	6,623,793.29	18	9,369,977.18	1,941,825.35	7,428,151.83	21
460162 Services to Other Agencies					63,657.69	23,909.21	39,748.48	38
460500 Other Immunizations	85,000.00	31,445.44	53,554.56	37	110,000.00	32,776.35	77,223.65	30
460501 Medicaid Clinical Services	32,000.00	16,550.25	15,449.75	52	36,500.00	6,796.11	29,703.89	19
460503 Childhood Immunizations	140,000.00	26,822.50	113,177.50	19	190,000.00	58,768.75	131,231.25	31
460505 Non Title X Revenue								
460508 Tuberculosis	7,000.00	2,578.33	4,421.67	37	10,000.00	1,369.00	1,369.00	24
460509 Water Quality		144.00	144.00			2,416.65	7,583.35	
460510 IT Overlay	111,000.00	30,727.00	80,273.00	28	121,001.00	39,607.00	81,394.00	33
460511 Birth and Death Certificates	210,000.00	71,790.00	138,210.00	34	215,000.00	71,255.00	143,745.00	33
460512 Duplication Service Fees	115.00	1,118.04	1,003.04	972	200.00	52.50	147.50	26
460513 Other Health Service Charges	2,700.00	4,821.25	2,121.25	179	8,000.00	1,387.00	6,613.00	17
460514 Food Service Certification	8,000.00	4,539.00	3,461.00	57	8,000.00	5,777.00	2,223.00	72
460515 Medicare Reimbursement	500.00	50.00	450.00	10	500.00	672.90	172.90	135
460516 Pgm Inc-3rd Prty Rec	6,500.00	1,581.32	4,918.68	24	9,000.00	2,533.05	6,466.95	28
460517 Influenza Immunization	12,000.00	1,730.00	10,270.00	14	5,000.00	7,170.06	2,170.06	143
460518 STD Fees	30,000.00	10,120.72	19,879.28	34	30,000.00	8,798.43	21,201.57	29
460519 Outpatient Services					12,500.00	42.00	12,458.00	0
460520 Eng Serv Health	55,000.00	15,392.00	39,608.00	28	90,500.00	19,385.00	71,115.00	21
460521 Plan Review - Pools & Spas	2,500.00	2,761.00	261.00	110	5,000.00	4,427.00	573.00	89
460523 Plan Review - Food Services	17,000.00	9,300.15	7,699.85	55	30,000.00	6,368.15	23,631.85	21
460524 Family Planning	66,000.00	15,705.49	50,294.51	24	100,000.00	22,885.63	77,114.37	23
460525 Plan Review - Vector	24,000.00	12,693.00	11,307.00	53	64,000.00	11,320.00	52,680.00	18
460526 Plan Review-Air Quality	11,270.00	6,800.00	4,470.00	60	15,500.00	11,428.00	4,072.00	74
460527 NOE-AQM	40,000.00	29,660.00	10,340.00	74	32,900.00	29,798.00	3,102.00	91
460528 NESHAP-AQM	62,000.00	25,205.00	36,795.00	41	62,000.00	33,469.00	28,531.00	54
460529 Assessments-AQM	21,000.00	9,660.00	11,340.00	46	22,000.00	10,665.00	11,335.00	48
460530 Inspector Registr-AQ	1,900.00	3,395.00	1,495.00	179	1,900.00	3,735.00	1,835.00	197
460531 Dust Plan-Air Quality	165,000.00	47,712.00	117,288.00	29	178,333.00	56,426.00	121,907.00	32
460533 Quick Start		29.00	29.00			170.00	170.00	
460534 Child Care Inspection	8,300.00	3,795.00	4,505.00	46	9,000.00	4,015.00	4,985.00	45
460535 Pub Accomod Inspectn	17,000.00	4,838.00	12,162.00	28	21,000.00	4,661.00	16,339.00	22

Washoe County Health District
 REVENUE
 Pds 1 -4, FY 2011

Accounts	2011 Plan	2011 Actuals	Balance	Act%	2010 Plan	2010 Actual	Balance	Act%
460570 Education Revenue	13,400.00-	4,982.00-	8,418.00-	37		4,628.00-	4,628.00	
* Charges for Services	1,149,185.00-	395,945.49-	753,239.51-	34	1,451,491.69-	486,711.79-	964,779.90-	34
484050 Donations Federal Pgm Income		13,516.08-	13,516.08		450.00-	100.00-	100.00	
485300 Other Misc Govt Rev		13,516.08-	13,516.08		450.00-	264.00-	186.00-	59
* Miscellaneous	10,297,150.04-	2,200,816.57-	8,096,333.47-	21	11,950,817.87-	364.00-	86.00-	81
** Revenue						2,763,765.19-	9,187,052.68-	23

Accounts	2011 Plan	2011 Actuals	Balance	Act%	2010 Plan	2010 Actual	Balance	Act%
701110 Base Salaries	10,234,370.47	3,059,224.36	7,175,146.11	30	10,661,133.97	3,087,818.68	7,573,315.29	29
701120 Part Time	654,044.80	192,304.81	461,739.99	29	700,249.99	217,598.51	482,651.48	31
701130 Pooled Positions	344,361.88	152,689.29	191,672.59	44	325,364.33	58,738.83	266,625.50	18
701140 Holiday Work	1,200.00	1,069.44	130.56	89	1,500.00	846.49	653.51	56
701150 xcContractual Wages					255,500.00	14,721.92	240,778.08	6
701200 Incentive Longevity	162,000.00	907.72	161,092.28	1	167,094.00	1,264.66	165,829.34	1
701300 Overtime	144,685.26	66,009.46	78,675.80	46	301,520.21	44,949.47	256,570.74	15
701406 Standby Pay	30,000.00	11,265.18	18,734.82	38	30,000.00	10,561.61	19,438.39	36
701408 Call Back	3,000.00	1,197.82	1,802.18	40	3,000.00	1,403.89	1,596.11	47
701412 Salary Adjustment	130,345.57-		130,345.57-		185,747.75		185,747.75	
701413 Vac Payoff/Sick Pay-Term		64,650.80	64,650.80-			64,981.52	64,981.52-	
701417 Comp Time		16,984.33	16,984.33-			23,542.25	23,542.25-	
701500 Merit Awards	120,175.23-		120,175.23-		329,645.39-		329,645.39-	
* Salaries and Wages	11,323,141.61	3,566,303.21	7,756,838.40	31	12,301,464.86	3,526,427.83	8,775,037.03	29
705110 Group Insurance	1,594,029.03	472,544.60	1,121,484.43	30	1,570,574.85	471,204.30	1,099,370.55	30
705210 Retirement	2,369,216.28	699,730.84	1,669,485.44	30	2,467,024.18	706,265.13	1,760,759.05	29
705215 Retirement Calculation	410,797.00		410,797.00		200,000.00		200,000.00	
705230 Medicare April 1986	148,101.06	47,200.97	100,900.09	32	151,277.42	46,065.31	105,212.11	30
705320 Workmens Comp	54,530.00	18,176.68	36,353.32	33	64,271.45	20,444.52	43,826.93	32
705330 Unemploy Comp	33,440.00	5,573.34	27,866.66	17	12,350.00		12,350.00	
705360 Benefit Adjustment					9,504.31		9,504.31	
* Employee Benefits	4,610,113.37	1,243,226.43	3,366,886.94	27	4,475,002.21	1,243,979.26	3,231,022.95	28
710100 Professional Services	1,757,189.94	77,340.60	1,679,849.34	4	2,031,672.72	170,735.40	1,860,937.32	8
710105 Medical Services	7,248.00	1,058.00	6,190.00	15	13,600.00	5,130.50	8,469.50	38
710108 MD Consultants	60,900.00	16,437.50	44,462.50	27	55,382.00	12,787.50	42,594.50	23
710110 Contracted/Temp Services	85,289.22	20,895.10	64,394.12	24				
710119 Subrecipient Payments	186,242.00	46,599.14	139,642.86	25	147,602.00	31,237.00	116,365.00	21
710200 Service Contract	72,075.00	16,304.16	55,770.84	23	102,210.00	50,347.31	51,862.69	49
710205 Repairs and Maintenance	15,086.00	5,545.45	9,540.55	37	15,505.00	3,952.22	11,552.78	25
710210 Software Maintenance	12,000.00		12,000.00		350.00	17,802.29	17,452.29-	5,086
710300 Operating Supplies	179,281.14	29,969.54	149,311.60	17	270,541.22	39,422.17	231,119.05	15
710302 Small Tools & Allow	1,685.00	325.50	1,359.50	19	1,385.00		1,385.00	
710308 Animal Supplies	2,000.00		2,000.00		2,000.00		2,000.00	
710319 Chemical Supplies	360,450.00	321,290.65	39,159.35	89	560,707.00	359,672.88	201,034.12	64
710334 Copy Machine Expense	31,644.00	8,302.35	23,341.65	26	36,024.50	8,040.39	27,984.11	22
710350 Office Supplies	55,112.43	15,129.13	39,983.30	27	62,342.26	17,332.11	45,010.15	28
710355 Books and Subscriptions	7,688.00	1,051.62	6,636.38	14	7,587.00	2,838.48	4,748.52	37
710360 Postage	28,790.00	6,255.89	22,534.11	22	26,958.44	6,800.16	20,158.28	25
710361 Express and Courier	765.00	183.18	581.82	24	1,135.00	64.84	1,070.16	6
710391 Fuel & Lube	100.00		100.00		100.00		100.00	
710500 Other Expense	50,035.88	4,659.27	45,376.61	9	94,550.30	5,421.96	89,128.34	6
710502 Printing	31,533.72	12,966.87	18,566.85	41	49,651.24	6,188.71	43,462.53	12
710503 Licenses & Permits	7,375.00	2,580.00	4,795.00	35	8,625.00	2,977.67	5,647.33	35
710504 Registration					900.00-		900.00-	
710505 Rental Equipment	1,800.00		1,800.00		2,800.00		2,800.00	
710506 Dept Insurance Deductible		150.00	150.00-			300.00		110
710507 Network and Data Lines	5,460.00	1,972.90	3,487.10	36	4,705.00	1,652.31	3,052.69	35
710508 Telephone Land Lines	48,413.92	13,402.88	35,011.04	28	60,808.05	15,375.08	45,432.97	25

Accounts	2011 Plan	2011 Actuals	Balance	Act%	2010 Plan	2010 Actual	Balance	Act%
710509 Seminars and Meetings	28,250.00	12,617.18	15,632.82	45	29,770.00	5,708.00	24,062.00	19
710512 Auto Expense	15,818.00	4,063.79	11,754.21	26	20,954.14	4,482.63	16,471.51	21
710514 Regulatory Assessments		27.99	27.99					
710519 Cellular Phone	13,590.00	5,052.45	8,537.55	37	13,597.00	5,271.51	8,325.49	39
710529 Dues	6,776.00	2,554.00	4,222.00	38	4,476.00	3,511.00	965.00	78
710535 Credit Card Fees	10,545.00	3,031.17	7,513.83	29	12,394.78	3,417.56	8,977.22	28
710546 Advertising	19,144.70	17,793.13	1,351.57	93	37,047.00	4,925.59	32,121.41	13
710577 Uniforms & Special Clothing	3,150.00		3,150.00		3,150.00	232.87	2,917.13	7
710585 Undesignated Budget	29,670.00		29,670.00		31,540.05		31,540.05	
710590 Bad Debt Expense		51,261.10	69,671.79	42		1,293.40	1,293.40	
710600 LT Lease-Office Space	120,932.89	39,565.63	227,581.05	15	195,423.01	74,997.90	120,425.11	38
710703 Biologicals	267,146.68		11,300.00		291,252.68	48,153.66	243,099.02	17
710714 Referral Services	11,300.00		11,300.00		11,300.00		11,300.00	
710721 Outpatient	138,944.97	4,728.97	134,216.00	3	119,940.00	21,794.98	98,145.02	18
710872 Food Purchases	2,650.00	796.88	1,853.12	30	2,695.00	321.98	2,373.02	12
711010 Utilities	600.00		600.00					
711100 ESD Asset Management	21,600.00	6,660.00	14,940.00	31				
711113 Equip Srv Replace	41,946.18	14,694.06	27,252.12	35	101,823.48	36,794.09	65,029.39	36
711114 Equip Srv O & M	58,538.39	19,379.99	39,158.40	33	71,986.43	18,356.75	53,629.68	26
711115 Equip Srv Motor Pool	2,325.00	1,097.50	1,227.50	47	12,070.00	5,630.00	6,440.00	47
711117 ESD Fuel Charge	41,646.75	18,446.32	23,200.43	44	54,173.64	17,705.72	36,467.92	33
711119 Prop & Liab Billings	72,200.00	24,066.64	48,133.36	33	66,930.00	21,976.64	44,953.36	33
711210 Travel	161,819.05	31,163.60	130,655.45	19	194,849.02	14,017.23	180,831.79	7
711213 Travel-Non Cnty Pers		0.68			1,942.00		1,942.00	
711300 Cash Over Short								
711504 Equipment nonCapital	118,719.02	22,372.19	96,346.83	19	76,536.11	122,159.56	45,623.45	160
* Services and Supplies	4,195,476.88	881,793.00	3,313,683.88	21	4,909,465.47	1,168,830.05	3,740,635.42	24
781004 Equipment Capital	102,697.72	43,283.58	59,414.14	42	371,424.85	84,204.12	287,220.73	23
* Capital Outlay	102,697.72	43,283.58	59,414.14	42	371,424.85	84,204.12	287,220.73	23
** Expenses	20,231,429.58	5,734,606.22	14,496,823.36	28	22,057,357.39	6,023,441.26	16,033,916.13	27
485192 Surplus Equipment Sales								
* Other Fin. Sources						12.60	12.60	
621001 Transfer From General	8,192,500.00	682,708.00	7,509,792.00	8	8,795,500.00	1,435,000.00	7,360,500.00	16
* Transfers In	8,192,500.00	682,708.00	7,509,792.00	8	8,795,500.00	1,435,000.00	7,360,500.00	16
** Other Financing Src/Use	8,192,500.00	682,708.00	7,509,792.00	8	8,795,500.00	1,435,012.60	7,360,487.40	16
*** Total	1,741,779.54	2,851,081.65	1,109,302.11	164	1,311,039.52	1,824,663.47	513,623.95	139

Accounts	2011 Plan	2011 Actuals	Balance	Act%	2010 Plan	2010 Actual	Balance	Act%
43100 Federal Grants	1,191,109.00-	257,437.26-	933,671.74-	22	1,205,291.00-	275,397.03-	929,893.97-	23
* Intergovernmental	1,191,109.00-	257,437.26-	933,671.74-	22	1,205,291.00-	275,397.03-	929,893.97-	23
460512 Duplication Service Fees	115.00-	23.00-	92.00-	20	200.00-	52.50-	147.50-	26
* Charges for Services	115.00-	23.00-	92.00-	20	200.00-	52.50-	147.50-	26
485300 Other Misc Govt Rev					450.00-	205.00-	245.00-	46
** Miscellaneous					450.00-	205.00-	245.00-	46
** Revenue	1,191,224.00-	257,460.26-	933,763.74-	22	1,205,941.00-	275,654.53-	930,286.47-	23
701110 Base Salaries	1,806,128.35	550,750.30	1,255,378.05	30	1,748,051.93	535,376.45	1,212,675.48	31
701120 Part Time	24,427.89	7,539.60	16,888.29	31	24,553.03	7,390.73	17,162.30	30
701130 Pooled Positions	83,483.00	10,875.41	72,607.59	13	68,296.19		68,296.19	2
701200 Incentive Longevity	29,800.00		29,800.00		31,000.00		30,396.90	19
701300 Overtime	1,000.00	6,050.77	5,050.77-	605	6,000.00	1,133.86	4,866.14	
701412 Salary Adjustment	5,347.52-		5,347.52-		7,104.00		7,104.00	
701413 Vac Payoff/Sick Pay- Term								
701417 Comp Time								
* Salaries and Wages	1,939,491.72	575,216.08	1,364,275.64	30	1,885,005.15	551,865.77	1,333,139.38	29
705110 Group Insurance	288,679.65	90,299.44	198,380.21	31	268,699.06	85,548.10	183,150.96	32
705210 Retirement	394,720.53	118,288.45	276,432.08	30	381,561.51	114,457.37	267,104.14	30
705215 Retirement Calculation	410,797.00		410,797.00		200,000.00		200,000.00	
705230 Medicare April 1986	26,138.11	8,016.53	18,121.58	31	24,601.66	7,428.38	17,173.28	30
705320 Workmens Comp	10,332.00	3,443.96	6,888.04	33	11,458.00	3,819.32	7,638.68	33
705330 Unemploy Comp	6,336.00	1,055.98	5,280.02	17	2,210.00	2,210.00	2,210.00	
* Employee Benefits	1,137,003.29	221,104.36	915,898.93	19	888,530.23	211,253.17	677,277.06	24
710100 Professional Services	2,300.00	1,905.00	395.00	83	3,300.00	150.00	3,150.00	5
710105 Medical Services		207.00	207.00-			46.50	46.50-	
710200 Service Contract	750.00	221.48	528.52	30	750.00	792.53	42.53-	106
710205 Repairs and Maintenance	700.00		700.00		800.00	96.22	703.78	12
710300 Operating Supplies	26,100.00	520.77	25,579.23	2	52,049.29	5,456.42	46,592.87	10
710334 Copy Machine Expense	11,594.00	2,234.54	9,359.46	19	11,594.00	2,230.58	9,363.42	19
710350 Office Supplies	16,200.00	2,594.23	13,605.77	16	16,185.00	5,984.00	10,201.00	37
710355 Books and Subscriptions	1,350.00	537.90	812.10	40	1,370.00	1,475.50	105.50-	108
710360 Postage	1,550.00	295.51	1,254.49	19	1,600.00	395.52	1,204.48	25
710361 Express and Courier	100.00		100.00		100.00	31.77	68.23	32
710500 Other Expense	1,100.00	429.10	670.90	39	1,100.00	395.80	704.20	36
710502 Printing	9,050.00	310.27	8,739.73	3	9,550.00	557.76	8,992.24	6
710503 Licenses & Permits	2,300.00	740.00	1,560.00	32	2,400.00	355.00	2,045.00	15
710507 Network and Data Lines	480.00	161.46	318.54	34				
710508 Telephone Land Lines	11,380.00	2,863.50	8,516.50	25	11,800.00	3,377.29	8,422.71	29
710509 Seminars and Meetings	5,300.00	2,102.18	3,197.82	40	5,100.00	1,395.00	3,705.00	27
710512 Auto Expense	3,900.00	479.30	3,420.70	12	4,350.00	480.09	3,869.91	11
710519 Cellular Phone	250.00	354.84	104.84-	142	350.00	39.58	310.42	11
710529 Dues	2,850.00	320.00	2,530.00	11	955.00	2,410.00	1,455.00-	252
710546 Advertising	150.00		150.00		150.00		150.00	
710600 LT Lease-Office Space	80,296.00	34,407.80	45,888.20	43	80,296.00	33,456.60	46,839.40	42
710872 Food Purchases	150.00		150.00		150.00		150.00	
711010 Utilities	100.00		100.00					
711100 ESD Asset Management	360.00	120.00	240.00	33	2,122.20	827.40	1,294.80	39
711113 Equip Srv Replace								

Washoe County Health District
 Administrative Health Services
 Pds 1 -4, FY 2011

Accounts	2011 Plan	2011 Actuals	Balance	Act%	2010 Plan	2010 Actual	Balance	Act%
711114 Equip Srv O & M	702.30	268.95	433.35	38	1,043.60	189.76	853.84	18
711115 Equip Srv Motor Pool	1,000.00	267.50	732.50	27		55.00	55.00-	
711117 ESD Fuel Charge	509.46	204.92	304.54	40	636.64	174.47	462.17	27
711119 Prop & Liab Billings	13,680.00	4,559.96	9,120.04	33	11,798.00	3,932.68	7,865.32	33
711210 Travel	17,500.00	6,126.92	11,373.08	35	16,500.00	2,832.72	13,667.28	17
711300 Cash Over Short		0.68	0.68-					
711504 Equipment nonCapital	1,700.00	338.32	1,361.68	20	1,700.00	2,071.01	371.01-	122
* Services and Supplies	213,401.76	62,572.13	150,829.63	29	237,749.73	69,209.20	168,540.53	29
** Expenses	3,289,896.77	858,892.57	2,431,004.20	26	3,011,285.11	832,328.14	2,178,956.97	28
*** Total	2,098,672.77	601,432.31	1,497,240.46	29	1,805,344.11	556,673.61	1,248,670.50	31

Accounts	2011 Plan	2011 Actuals	Balance	Act%	2010 Plan	2010 Actual	Balance	Act%
422510 Air Pollution Permits	391,000.00-	99,753.25-	291,246.75-	26	402,399.00-	99,884.00-	302,515.00-	25
* Licenses and Permits	391,000.00-	99,753.25-	291,246.75-	26	402,399.00-	99,884.00-	302,515.00-	25
431100 Federal Grants	686,099.00-	98,268.44-	587,830.56-	14	681,349.00-	100,015.90-	581,333.10-	15
431105 Federal Grants - Indirect		4,507.56-	4,507.56			4,253.10-	4,253.10	
432100 State Grants	140,000.00-	140,000.00-		100				
432311 Pol Ctrl 455B.830	290,140.86-	77,725.00-	212,415.86-	27	280,000.00-	76,400.00-	203,600.00-	27
* Intergovernmental	1,116,239.86-	320,501.00-	795,738.86-	29	961,349.00-	180,669.00-	780,680.00-	19
460513 Other Health Service Charges		701.00-	701.00			34.00-	34.00	
460526 Plan Review-Air Quality	11,270.00-	6,800.00-	4,470.00-	60	15,500.00-	11,428.00-	4,072.00-	74
460527 NOE-AQM	40,000.00-	29,660.00-	10,340.00-	74	32,900.00-	29,798.00-	3,102.00-	91
460528 NESHAP-AQM	62,000.00-	25,205.00-	36,795.00-	41	62,000.00-	33,469.00-	28,531.00-	54
460529 Assessments-AQM	21,000.00-	9,660.00-	11,340.00-	46	22,000.00-	10,665.00-	11,335.00-	48
460530 Inspector Registr-AQ	1,900.00-	3,395.00-	1,495.00-	179	1,900.00-	3,735.00-	1,835.00-	197
460531 Dust Plan-Air Quality	165,000.00-	47,712.00-	117,288.00-	29	178,333.00-	56,426.00-	121,907.00-	32
* Charges for Services	301,170.00-	123,133.00-	178,037.00-	41	312,633.00-	145,555.00-	167,078.00-	47
** Revenue	1,808,409.86-	543,387.25-	1,265,022.61-	30	1,676,381.00-	426,106.00-	1,250,273.00-	25
701110 Base Salaries	1,368,978.42	428,869.73	940,108.69	31	1,311,733.43	412,535.16	899,198.27	31
701130 Pooled Positions	18,000.00	7,124.63	10,875.37	40	8,000.00	1,231.28	6,768.72	15
701150 xContractual Wages	23,000.00	575.02	22,424.98	3	50,000.00	50,000.00	50,000.00	
701200 Incentive Longevity	6,576.10	1,794.43	4,781.67	27	21,150.00	21,150.00	21,150.00	
701300 Overtime					6,057.21		6,057.21	
701408 Call Back						290.80	290.80	
701413 Vac Payoff/Sick Pay-Term		42,911.41	42,911.41					
701417 Comp Time		11,850.01	11,850.01					
* Salaries and Wages	1,416,554.52	493,125.23	923,429.29	35	1,396,940.64	414,057.24	982,883.40	30
705110 Group Insurance	175,898.81	54,705.55	121,193.26	31	156,554.89	50,134.47	106,420.42	32
705210 Retirement	299,272.94	92,184.81	207,088.13	31	285,871.82	88,037.64	197,834.18	31
705230 Medicare April 1986	18,558.58	6,576.79	11,981.79	35	17,726.98	5,427.98	12,299.00	31
705320 Workmens Comp	5,740.00	1,913.32	3,826.68	33	6,740.00	2,246.68	4,493.32	33
705330 Unemploy Comp	3,520.00	586.66	2,933.34	17	1,300.00	1,300.00	1,300.00	
* Employee Benefits	502,990.33	155,967.13	347,023.20	31	468,193.69	145,846.77	322,346.92	31
710100 Professional Services	205,628.23	24,242.91	181,385.32	12	176,599.41	4,436.95	172,162.46	3
710105 Medical Services		628.00	628.00-					
710110 Contracted/Temp Services	40,000.00		40,000.00					
710200 Service Contract	350.00	51.62	298.38	15	350.00	363.00	13.00-	104
710205 Repairs and Maintenance	7,000.00	4,097.33	2,902.67	59	7,000.00	1,874.70	5,125.30	27
710300 Operating Supplies	9,100.00	1,790.86	7,309.14	20	4,100.00	1,100.85	2,999.15	27
710334 Copy Machine Expense	4,400.00	1,130.78	3,269.22	26	4,387.20	1,273.34	3,113.86	29
710350 Office Supplies	4,000.00	3,315.76	684.24	83	3,500.00	298.21	3,201.79	9
710355 Books and Subscriptions	224.00	213.82	10.18	95	224.00	221.86	2.14	99
710360 Postage	2,200.00	917.86	1,282.14	42	2,200.00	1,126.12	1,073.88	51
710361 Express and Courier	200.00	31.85	168.15	16	200.00	6.75	193.25	3
710500 Other Expense	200.00	50.00	150.00	25	200.00	567.77	367.77-	284
710502 Printing	1,000.00	413.33	586.67	41	1,000.00	184.57	815.43	18
710503 Licenses & Permits	90.00		90.00		90.00	2,237.67	2,147.67-	2,486
710505 Rental Equipment	1,800.00		1,800.00		1,800.00		1,800.00	
710508 Telephone Land Lines	7,000.00	1,523.66	5,476.34	22	9,000.00	2,350.80	6,649.20	26
710509 Seminars and Meetings	5,000.00	1,195.00	3,805.00	24	4,200.00	440.00	3,760.00	10

Accounts	2011 Plan	2011 Actuals	Balance	Act%	2010 Plan	2010 Actual	Balance	Act%
710512 Auto Expense	1,200.00	92.00	1,108.00	8	1,200.00	271.43	928.57	23
710519 Cellular Phone	3,800.00	1,524.83	2,275.17	40	3,800.00	1,295.59	2,504.41	34
710529 Dues	435.00		435.00		435.00		435.00	
710535 Credit Card Fees	1,500.00	316.05	1,183.95	21	1,500.00	570.66	929.34	38
710546 Advertising	1,000.00	165.33	834.67	17	5,700.00	240.27	5,459.73	4
710577 Uniforms & Special Clothing	1,100.00		1,100.00		1,100.00		1,100.00	
710600 LT Lease-Office Space			74,490.12		74,490.12	24,688.00	49,802.12	33
710721 Outpatient	1,316.00		1,316.00		1,316.00		1,316.00	
711100 ESD Asset Management	2,880.00	1,110.00	1,770.00	39				
711113 Equip Srv Replace	7,677.51	4,613.00	3,064.51	60	30,340.92	6,455.99	23,884.93	21
711114 Equip Srv O & M	13,966.50	3,362.83	10,603.67	24	13,520.37	3,593.60	9,926.77	27
711115 Equip Srv Motor Pool		325.00	325.00					
711117 ESD Fuel Charge	11,125.62	3,623.15	7,502.47	33	12,187.68	4,322.93	7,864.75	35
711119 Prop & Liab Billings	7,600.00	2,533.32	5,066.68	33	7,940.00	2,313.32	5,626.68	29
711210 Travel	28,500.00	3,359.80	25,140.20	12	40,227.52	2,702.30	37,525.22	7
711504 Equipment nonCapital	14,000.00	11,539.37	2,460.63	82	4,000.00	2,988.24	1,011.76	75
* Services and Supplies	384,292.86	72,167.46	312,125.40	19	412,608.22	65,924.92	346,683.30	16
781004 Equipment Capital	92,697.72	43,283.58	49,414.14	47	91,708.35	91,708.35	91,708.35	
** Capital Outlay	92,697.72	43,283.58	49,414.14	47	91,708.35	91,708.35	91,708.35	
** Expenses	2,396,535.43	764,543.40	1,631,992.03	32	2,369,450.90	625,828.93	1,743,621.97	26
485192 Surplus Equipment Sales						12.60	12.60	
** Other Financing Src/Use						12.60	12.60	
*** Total	588,125.57	221,156.15	366,969.42	38	693,069.90	199,708.33	493,361.57	29

Accounts	2011 Plan	2011 Actuals	Balance	Act%	2010 Plan	2010 Actual	Balance	Act%
431100 Federal Grants	2,242,003.70-	436,740.74-	1,805,262.96-	19	2,482,580.00-	521,051.63-	1,961,528.37-	21
431105 Federal Grants - Indirect		7,203.40-	7,203.40-					
432100 State Grants	230,797.42-	32,470.34-	198,327.08-	14	552,556.00-	119,229.20-	433,326.80-	22
* Intergovernmental	2,472,801.12-	476,414.48-	1,996,386.64-	19	3,035,136.00-	640,280.83-	2,394,855.17-	21
460162 Services to Other Agencies					63,657.69-	23,909.21-	39,748.48-	38
460500 Other Immunizations	85,000.00-	31,445.44-	53,554.56-	37	110,000.00-	32,776.35-	77,223.65-	30
460501 Medicaid Clinical Services	32,000.00-	16,550.25-	15,449.75-	52	36,500.00-	6,796.11-	29,703.89-	19
460503 Childhood Immunizations	140,000.00-	26,822.50-	113,177.50-	19	190,000.00-	58,768.75-	131,231.25-	31
460505 Non Title X Revenue						1,369.00-	1,369.00-	
460508 Tuberculosis	7,000.00-	2,578.33-	4,421.67-	37	10,000.00-	2,416.65-	7,583.35-	24
460515 Medicare Reimbursement	500.00-	50.00-	450.00-	10	500.00-	672.90-	172.90-	135
460516 Pgm Inc-3rd Prty Rec	6,500.00-	1,581.32-	4,918.68-	24	9,000.00-	2,533.05-	6,466.95-	28
460517 Influenza Immunization	12,000.00-	1,730.00-	10,270.00-	14	5,000.00-	7,170.06-	2,170.06-	143
460518 STD Fees	30,000.00-	10,120.72-	19,879.28-	34	30,000.00-	8,798.43-	21,201.57-	29
460519 Outpatient Services					12,500.00-	42.00-	12,458.00-	0
460524 Family Planning	66,000.00-	15,705.49-	50,294.51-	24	100,000.00-	22,885.63-	77,114.37-	23
460570 Education Revenue	11,000.00-	4,070.00-	6,930.00-	37		4,219.00-	4,219.00-	
* Charges for Services	390,000.00-	110,654.05-	279,345.95-	28	567,157.69-	172,357.14-	394,800.55-	30
484050 Donations Federal Pgm Income		13,516.08-	13,516.08-			100.00-	100.00-	
485300 Other Misc Govt Rev						6.00-	6.00-	
* Miscellaneous		13,516.08-	13,516.08-			106.00-	106.00-	
** Revenue	2,862,801.12-	600,584.61-	2,262,216.51-	21	3,602,293.69-	812,743.97-	2,789,549.72-	23
701110 Base Salaries	2,575,357.20	805,418.57	1,769,938.63	31	3,078,262.37	842,649.21	2,235,613.16	27
701120 Part Time	573,266.06	181,555.99	391,710.07	32	640,119.02	189,676.36	450,442.66	30
701130 Pooled Positions	147,197.03	65,782.06	81,414.97	45	120,571.14	11,453.24	109,117.90	9
701200 Incentive Longevity	52,628.00	182.70	52,445.30	0	54,703.00	338.46	54,364.54	1
701300 Overtime	300.00	3,163.20	2,863.20-	1,054	2,175.00	1,277.56	897.44	59
701412 Salary Adjustment	175,244.98-	1,424.06	175,244.98-		114,541.03	34,498.59	114,541.03	
701413 Vac Payoff/Sick Pay-Term		176.13	176.13-			7,921.65-	34,498.59-	
701417 Comp Time								
701500 Merit Awards	53,002.53	1,057,702.71	53,002.53	33	329,645.39-	1,087,815.07	329,645.39-	30
* Salaries and Wages	3,226,505.84	1,057,702.71	2,168,803.13	29	3,680,726.17	1,087,815.07	2,592,911.10	29
705110 Group Insurance	468,983.59	135,519.19	333,464.40	29	524,221.04	149,762.97	374,458.07	28
705210 Retirement	686,920.38	213,092.67	473,827.71	31	808,950.04	224,237.90	584,712.14	29
705230 Medicare April 1986	42,358.94	13,721.39	28,637.55	32	49,212.59	14,272.41	34,940.18	29
705320 Workmens Comp	17,220.00	5,740.04	11,479.96	33	21,231.00	7,076.92	14,154.08	33
705330 Unemploy Comp	10,560.00	1,760.02	8,799.98	17	4,095.00		4,095.00	
705360 Benefit Adjustment					1,505.00-		1,505.00-	
* Employee Benefits	1,226,042.91	369,833.31	856,209.60	30	1,406,204.67	395,350.20	1,010,854.47	28
710100 Professional Services	79,586.00	30,240.32	49,345.68	38	305,393.00	41,157.60	264,235.40	13
710105 Medical Services	600.00	75.50	524.50	13	13,000.00	4,124.50	8,875.50	32
710108 MD Consultants	48,900.00	14,437.50	34,462.50	30	43,382.00	9,787.50	33,594.50	23
710119 Subrecipient Payments	186,242.00	46,599.14	139,642.86	25	147,602.00	31,237.00	116,365.00	21
710200 Service Contract	2,055.00	3,469.27	1,414.27-	169	12,200.00	3,443.18	8,756.82	28
710205 Repairs and Maintenance	5,786.00	297.63	5,488.37	5	6,105.00	985.88	5,119.12	16
710210 Software Maintenance					350.00		350.00	
710300 Operating Supplies	51,400.00	15,919.26	35,480.74	31	97,132.00	21,204.09	75,927.91	22
710334 Copy Machine Expense	12,310.00	3,787.00	8,523.00	31	16,463.00	3,621.84	12,841.16	22

Accounts	2011 Plan	2011 Actuals	Balance	Act%	2010 Plan	2010 Actual	Balance	Act%
710350 Office Supplies	10,445.01	3,178.73	7,266.28	30	14,405.00	2,633.89	11,771.11	18
710355 Books and Subscriptions	1,300.00	174.90	1,125.10	13	1,730.00	642.39	1,087.61	37
710360 Postage	5,440.00	1,677.17	3,762.83	31	4,858.00	1,887.29	2,970.71	39
710361 Express and Courier	290.00	75.08	214.92	26	535.00	15.98	519.02	3
710500 Other Expense	12,581.67	3,445.90	9,135.77	27	60,624.30	4,458.39	56,165.91	7
710502 Printing	6,150.00	2,652.46	3,497.54	43	11,303.24	1,724.54	9,578.70	15
710503 Licenses & Permits	2,650.00	1,475.00	1,175.00	56	3,800.00	305.00	3,495.00	8
710504 Registration					900.00-		900.00-	
710506 Dept Insurance Deductible					273.40		273.40	
710507 Network and Data Lines	2,280.00	807.30	1,472.70	35	1,505.00	751.05	753.95	50
710508 Telephone Land Lines	14,360.00	4,531.94	9,828.06	32	18,459.00	4,965.66	13,493.34	27
710509 Seminars and Meetings	6,850.00	5,425.00	1,425.00	79	8,050.00	1,920.00	6,130.00	24
710512 Auto Expense	10,418.00	3,325.73	7,092.27	32	14,793.00	3,267.54	11,525.46	22
710519 Cellular Phone	505.00	177.91	327.09	35	462.00	369.43	92.57	80
710529 Dues	1,300.00	1,050.00	250.00	81	1,550.00	550.00	1,000.00	35
710535 Credit Card Fees	4,245.00	1,015.92	3,229.08	24	5,935.00	1,388.25	4,546.75	23
710546 Advertising	16,124.70	17,122.75	998.05-	106	29,997.00	3,685.32	26,311.68	12
710577 Uniforms & Special Clothing	350.00		350.00		350.00		350.00	
710590 Bad Debt Expense						459.00	459.00-	
710703 Biologicals	263,000.00	39,565.63	223,434.37	15	286,952.00	48,153.66	238,798.34	17
710714 Referral Services	11,300.00		11,300.00		11,300.00		11,300.00	
710721 Outpatient	134,628.97	4,704.25	129,924.72	3	109,576.00	21,790.74	87,785.26	20
710872 Food Purchases	2,500.00	796.88	1,703.12	32	2,545.00	321.98	2,223.02	13
711010 Utilities	500.00		500.00					
711100 ESD Asset Management	360.00	30.00	330.00	8				
711113 Equip Srv Replace	1,047.46	28.65	1,018.81	3	1,397.28	587.16	810.12	42
711114 Equip Srv O & M	472.80		472.80		904.60		904.60	
711115 Equip Srv Motor Pool	1,125.00	350.00	775.00	31	4,870.00	322.50	4,547.50	7
711117 ESD Fuel Charge		250.49	250.49-		538.69		538.69	
711119 Prop & Liab Billings	22,800.00	7,600.00	15,200.00	33	21,861.00	7,286.96	14,574.04	33
711210 Travel	29,360.53	7,287.44	22,073.09	25	48,190.50	2,247.47	45,943.03	5
711213 Travel-Non Cnty Pers					1,942.00		1,942.00	
711504 Equipment nonCapital	3,850.00	312.65	3,537.35	8	6,828.00	622.84	6,205.16	9
* Services and Supplies	953,113.14	221,887.40	731,225.74	23	1,316,262.01	225,918.63	1,090,343.38	17
** Expenses	5,405,661.89	1,649,423.42	3,756,238.47	31	6,403,192.85	1,709,083.90	4,694,108.95	27
*** Total	2,542,860.77	1,048,838.81	1,494,021.96	41	2,800,399.16	896,339.93	1,904,559.23	32

Accounts	2011 Plan	2011 Actuals	Balance	Act%	2010 Plan	2010 Actual	Balance	Act%
422503 Environmental Permits	43,000.00-	15,267.00-	27,733.00-	36	69,000.00-	12,986.00-	56,014.00-	19
422504 Pool Permits	63,000.00-	7,594.00-	55,406.00-	12	33,000.00-	11,077.00-	21,923.00-	34
422505 RV Permits	10,500.00-	2,738.00-	7,762.00-	26	10,500.00-	2,918.00-	7,582.00-	28
422507 Food Service Permits	342,000.00-	102,463.00-	239,537.00-	30	355,000.00-	112,176.00-	242,824.00-	32
422508 Wat Well Const Perm	34,500.00-	10,436.00-	24,064.00-	30	44,000.00-	16,716.00-	27,284.00-	38
422509 Water Company Permits	4,000.00-	468.00-	3,532.00-	12	12,000.00-	1,687.00-	10,313.00-	14
422511 ISDS Permits	47,000.00-	23,148.00-	23,852.00-	49	90,000.00-	17,703.85-	72,296.15-	20
422513 Special Event Permits	70,500.00-	38,696.00-	31,804.00-	55	75,000.00-	47,476.20-	27,523.80-	63
422514 Initial Applic Fee	35,000.00-	7,120.00-	27,880.00-	20	38,000.00-	12,240.00-	25,760.00-	32
* Licenses and Permits	649,500.00-	207,930.00-	441,570.00-	32	726,500.00-	234,980.05-	491,519.95-	32
431100 Federal Grants	277,000.00-	71,100.72-	205,899.28-	26	277,000.00-	72,852.54-	204,147.46-	26
432100 State Grants	75,000.00-	18,000.00-	57,000.00-	24	75,000.00-	19,250.00-	55,750.00-	26
432310 Tire Fee NRS 444A.090	370,535.00-	226,129.72-	144,405.28-	61	370,534.52-	209,568.78-	160,965.74-	57
* Intergovernmental	722,535.00-	315,230.44-	407,304.56-	44	722,534.52-	301,671.32-	420,863.20-	42
460509 Water Quality		144.00-	144.00-					
460510 IT Overlay	111,000.00-	30,727.00-	80,273.00-	28	121,001.00-	39,607.00-	81,394.00-	33
460512 Duplication Service Fees		548.83-	548.83-					
460513 Other Health Service Charges	2,700.00-	4,120.25-	1,420.25-	153	8,000.00-	1,353.00-	6,647.00-	17
460514 Food Service Certification	8,000.00-	4,539.00-	3,461.00-	57	8,000.00-	5,777.00-	2,223.00-	72
460520 Eng Serv Health	55,000.00-	15,392.00-	39,608.00-	28	90,500.00-	19,385.00-	71,115.00-	21
460521 Plan Review - Pools & Spas	2,500.00-	2,761.00-	261.00-	110	5,000.00-	4,427.00-	573.00-	89
460523 Plan Review - Food Services	17,000.00-	9,300.15-	7,699.85-	55	30,000.00-	6,368.15-	23,631.85-	21
460525 Plan Review - Vector	24,000.00-	12,693.00-	11,307.00-	53	64,000.00-	11,320.00-	52,680.00-	18
460533 Quick Start		29.00-	29.00-			170.00-	170.00-	
460534 Child Care Inspection	8,300.00-	3,795.00-	4,505.00-	46	9,000.00-	4,015.00-	4,985.00-	45
460535 Pub Accomod Inspectn	17,000.00-	4,838.00-	12,162.00-	28	21,000.00-	4,661.00-	16,339.00-	22
460570 Education Revenue	2,400.00-	912.00-	1,488.00-	38		409.00-	409.00-	
* Charges for Services	247,900.00-	89,799.23-	158,100.77-	36	356,501.00-	97,492.15-	259,008.85-	27
485300 Other Misc Govt Rev						53.00-	53.00-	
* Miscellaneous						53.00-	53.00-	
** Revenue						53.00-	53.00-	
701110 Base Salaries	1,619,935.00-	612,959.67-	1,006,975.33-	38	1,805,535.52-	634,196.52-	1,171,339.00-	35
701130 Pooled Positions	3,318,749.95	950,990.66	2,367,759.29	29	3,399,403.84	965,825.18	2,433,578.66	28
701140 Holiday Work	92,377.86	64,535.03	27,842.83	70	90,097.00	43,950.67	46,146.33	49
701150 xcContractual Wages	1,200.00	319.32	880.68	27	1,500.00	846.49	653.51	56
701200 Incentive Longevity	48,750.00		48,750.00		9,500.00	6,121.44	3,378.56	64
701300 Overtime	33,788.00	22,374.95	11,413.05	66	52,100.00	323.10	51,776.90	1
701406 Standby Pay	30,000.00	11,265.18	18,734.82	38	34,288.00	15,486.48	18,801.52	45
701408 Call Back	3,000.00	1,197.82	1,802.18	40	3,000.00	1,113.09	1,886.91	35
701412 Salary Adjustment					304.20-		304.20-	37
701413 Vac Payoff/Sick Pay-Term						17,610.78	17,610.78-	
701417 Comp Time						8,056.86	8,056.86-	
701500 Merit Awards	173,177.76-		173,177.76-					
* Salaries and Wages	3,354,688.05	1,050,682.96	2,304,005.09	31	3,619,584.64	1,069,895.70	2,549,688.94	30
705110 Group Insurance	496,011.19	146,320.78	349,690.41	29	480,654.08	140,130.45	340,523.63	29
705210 Retirement	724,004.28	206,661.40	517,342.88	29	740,272.62	208,665.84	531,606.78	28
705230 Medicare April 1986	43,660.48	13,447.18	30,213.30	31	43,911.91	13,411.21	30,500.70	31
705320 Workmens Comp	16,072.00	5,357.36	10,714.64	33	18,535.00	6,178.28	12,356.72	33

Accounts	2011 Plan	2011 Actuals	Balance	Act%	2010 Plan	2010 Actual	Balance	Act%
705330 Unemply Comp	9,856.00	1,642.68	8,213.32	17	3,575.00	368,385.78	3,575.00	29
* Employee Benefits	1,289,603.95	373,429.40	916,174.55	29	1,286,948.61	75,871.00	918,562.83	42
710100 Professional Services	257,890.90	4,822.00	253,068.90	2	179,930.29	959.50	104,059.29	192
710105 Medical Services	6,548.00	147.50	6,400.50	2	500.00		459.50	
710110 Contracted/Temp Services		7,458.55	7,458.55					
710200 Service Contract	67,300.00	10,868.74	56,431.26	16	87,300.00	44,132.60	43,167.40	51
710205 Repairs and Maintenance	1,000.00	1,055.54	55.54	106	1,000.00	723.97	276.03	72
710210 Software Maintenance						17,802.29	17,802.29	
710300 Operating Supplies	20,900.00	2,953.11	17,946.89	14	23,593.05	2,710.71	20,882.34	11
710302 Small Tools & Allow	1,685.00	325.50	1,359.50	19	1,385.00		1,385.00	
710308 Animal Supplies	2,000.00		2,000.00		2,000.00		2,000.00	
710319 Chemical Supplies	360,450.00	321,290.65	39,159.35	89	560,707.00	359,672.88	201,034.12	64
710334 Copy Machine Expense	920.00	227.70	692.30	25	1,280.00	162.57	1,117.43	13
710350 Office Supplies	9,900.00	2,929.91	6,970.09	30	9,150.00	4,940.51	4,209.49	54
710355 Books and Subscriptions	2,400.00	125.00	2,275.00	5	1,600.00	325.24	1,274.76	20
710360 Postage	7,300.00	2,592.61	4,707.39	36	5,900.00	2,637.09	3,262.91	45
710361 Express and Courier	175.00	70.58	104.42	40	300.00	10.34	289.66	3
710391 Fuel & Lube	100.00		100.00		100.00		100.00	
710500 Other Expense	5,800.00	734.27	5,065.73	13	800.00		800.00	
710502 Printing	3,825.00	909.50	2,915.50	24	3,225.00	836.69	2,388.31	26
710503 Licenses & Permits	2,335.00	365.00	1,970.00	16	2,335.00	80.00	2,255.00	3
710506 Dept Insurance Deductible		150.00	150.00			300.00	300.00	
710507 Network and Data Lines	2,700.00	807.30	1,892.70	30	3,200.00	751.05	2,448.95	23
710508 Telephone Land Lines	10,500.00	3,035.58	7,464.42	29	11,425.00	3,244.43	8,180.57	28
710509 Seminars and Meetings	9,400.00	4,070.00	5,330.00	43	11,200.00	1,903.00	9,297.00	17
710512 Auto Expense	200.00		200.00		375.00	60.78	314.22	16
710514 Regulatory Assessments		27.99	27.99					
710519 Cellular Phone	8,455.00	2,445.88	6,009.12	29	8,405.00	2,822.52	5,582.48	34
710529 Dues	1,611.00	639.00	972.00	40	896.00	551.00	345.00	61
710535 Credit Card Fees	4,000.00	1,292.46	2,707.54	32	4,959.78	1,093.15	3,866.63	22
710546 Advertising	1,050.00	255.05	794.95	24	500.00		500.00	
710577 Uniforms & Special Clothing	1,700.00		1,700.00		1,700.00	232.87	1,467.13	14
710590 Bad Debt Expense						444.40	444.40	
710600 LT Lease-Office Space	40,636.89	16,853.30	23,783.59	41	40,636.89	16,853.30	23,783.59	41
710721 Outpatient					6,048.00		6,048.00	
711100 ESD Asset Management	18,000.00	4,620.00	13,380.00	26				
711113 Equip Srv Replace	33,221.21	9,926.83	23,294.38	30	67,963.08	28,923.54	39,039.54	43
711114 Equip Srv O & M	43,396.79	15,557.15	27,839.64	36	56,517.86	14,068.64	42,449.22	25
711115 Equip Srv Motor Pool		25.00	25.00		7,000.00	5,240.00	1,760.00	75
711117 ESD Fuel Charge	30,011.67	14,367.76	15,643.91	48	39,610.63	13,208.32	26,402.31	33
711119 Prop & Liab Billings	21,280.00	7,093.36	14,186.64	33	19,085.00	6,361.68	12,723.32	33
711210 Travel	36,395.16	12,933.66	23,461.50	36	35,650.00	4,817.14	30,832.86	14
711504 Equipment nonCapital	9,152.00	2,268.99	6,883.01	25	2,643.97		2,643.97	
* Services and Supplies	1,022,238.62	453,245.47	568,993.15	44	1,198,921.55	611,741.21	587,180.34	51
** Expenses	5,666,530.62	1,877,357.83	3,789,172.79	33	6,105,454.80	2,050,022.69	4,055,432.11	34
621001 Transfer From General					350,000.00		350,000.00	
** Other Financing Src/Use					350,000.00		350,000.00	
*** Total	4,046,595.62	1,264,398.16	2,782,197.46	31	3,949,919.28	1,415,826.17	2,534,093.11	36

Accounts	2011 Plan	2011 Actuals	Balance	Act%	2010 Plan	2010 Actual	Balance	Act%
431100 Federal Grants	2,575,110.06-	112,143.57-	2,462,966.49-	4	3,414,126.66-	538,255.14-	2,875,871.52-	16
431105 Federal Grants - Indirect	29,670.00-	1,945.00-	27,725.00-	7	31,540.00-	5,552.03-	25,987.97-	18
* Intergovernmental	2,604,780.06-	114,088.57-	2,490,691.49-	4	3,445,666.66-	543,807.17-	2,901,859.49-	16
460511 Birth and Death Certificates	210,000.00-	71,790.00-	138,210.00-	34	215,000.00-	71,255.00-	143,745.00-	33
460512 Duplication Service Fees		546.21-	546.21					
* Charges for Services	210,000.00-	72,336.21-	137,663.79-	34	215,000.00-	71,255.00-	143,745.00-	33
** Revenue	2,814,780.06-	186,424.78-	2,628,355.28-	7	3,660,666.66-	615,062.17-	3,045,604.49-	17
701110 Base Salaries	1,165,156.55	323,195.10	841,961.45	28	1,123,682.40	331,432.68	792,249.72	29
701120 Part Time	56,350.85	3,209.22	53,141.63	6	35,577.94	20,531.42	15,046.52	58
701130 Pooled Positions	3,303.99	4,372.16	1,068.17-	132	38,400.00	2,103.64	36,296.36	5
701140 Holiday Work		750.12	750.12-					
701150 xcContractual Wages		150.00	7,672.00	2	196,000.00	8,600.48	187,399.52	4
701200 Incentive Longevity	7,822.00		7,822.00		8,141.00	8,141.00	8,141.00	
701300 Overtime	103,021.16	32,626.11	70,395.05	32	253,000.00	27,051.57	225,948.43	11
701412 Salary Adjustment	50,246.93		50,246.93		64,406.92		64,406.92	
701413 Vac Payoff/Sick Pay-Term		20,315.33	20,315.33-			5,536.75	5,536.75-	
701417 Comp Time		4,958.19	4,958.19-			7,537.51	7,537.51-	
* Salaries and Wages	1,385,901.48	389,576.23	996,325.25	28	1,719,208.26	402,794.05	1,316,414.21	23
705110 Group Insurance	164,455.79	45,699.64	118,756.15	28	140,445.78	45,628.31	94,817.47	32
705210 Retirement	264,298.15	69,503.51	194,794.64	26	250,368.19	70,866.38	179,501.81	28
705230 Medicare April 1986	17,384.95	5,439.08	11,945.87	31	15,824.28	5,525.33	10,298.95	35
705320 Workmens Comp	5,166.00	1,722.00	3,444.00	33	6,307.45	1,123.32	5,184.13	18
705330 Unemploy Comp	3,168.00	528.00	2,640.00	17	1,170.00		1,170.00	
705360 Benefit Adjustment					11,009.31		11,009.31	
* Employee Benefits	454,472.89	122,892.23	331,580.66	27	425,125.01	123,143.94	301,981.67	29
710100 Professional Services	1,211,784.81	16,130.37	1,195,654.44	1	1,366,450.02	49,119.85	1,317,330.17	4
710105 Medical Services	100.00		100.00		100.00		100.00	
710108 MD Consultants	12,000.00	2,000.00	10,000.00	17	12,000.00	3,000.00	9,000.00	25
710110 Contracted/Temp Services	45,289.22	13,436.55	31,852.67	30				
710200 Service Contract	1,620.00	1,693.05	73.05-	105	1,610.00	1,616.00	6.00-	100
710205 Repairs and Maintenance	600.00	94.95	505.05	16	600.00	271.45	328.55	45
710210 Software Maintenance	12,000.00		12,000.00					
710300 Operating Supplies	71,781.14	8,785.54	62,995.60	12	93,666.88	8,950.10	84,716.78	10
710334 Copy Machine Expense	2,420.00	922.33	1,497.67	38	2,300.30	752.06	1,548.24	33
710350 Office Supplies	14,567.42	3,110.50	11,456.92	21	19,102.26	3,475.50	15,626.76	18
710355 Books and Subscriptions	2,414.00		2,414.00		2,663.00	173.49	2,489.51	7
710360 Postage	12,300.00	772.74	11,527.26	6	12,400.44	754.14	11,646.30	6
710361 Express and Courier		5.67	5.67-					
710500 Other Expense	30,354.21		30,354.21		31,826.00		31,826.00	
710502 Printing	11,508.72	8,681.31	2,827.41	75	24,573.00	2,885.15	21,687.85	12
710505 Rental Equipment					1,000.00		1,000.00	
710507 Network and Data Lines		196.84	196.84-			150.21	150.21-	
710508 Telephone Land Lines	5,173.92	1,448.20	3,725.72	28	10,124.05	1,436.90	8,687.15	14
710509 Seminars and Meetings	1,700.00	175.00-	1,875.00	10-	1,220.00	50.00	1,170.00	4
710512 Auto Expense	100.00	166.76	66.76-	167	236.14	402.79	166.65-	171
710519 Cellular Phone	580.00	548.99	31.01	95	580.00	744.39	164.39-	128
710529 Dues	580.00	545.00	35.00	94	640.00		640.00	
710535 Credit Card Fees	800.00	406.74	393.26	51		365.50	365.50-	

Accounts	2011 Plan	2011 Actuals	Balance	Act%	2010 Plan	2010 Actual	Balance	Act%
710546 Advertising	820.00	250.00	570.00	30	700.00	1,000.00	300.00-	143
710585 Undesignated Budget	29,670.00		29,670.00		31,540.05		31,540.05	
710590 Bad Debt Expense						390.00	390.00-	
710703 Biologicals	4,146.68	24.72	4,146.68	1	4,300.68	4.24	4,300.68	0
710721 Outpatient	3,000.00	780.00	2,975.28		3,000.00		2,995.76	
711100 ESD Asset Management		125.58	780.00-					
711113 Equip Srv Replace		191.06	125.58-					
711114 Equip Srv O & M		130.00	191.06-					
711115 Equip Srv Motor Pool	200.00		70.00	65	200.00	504.75	504.75-	6
711117 ESD Fuel Charge					1,200.00	12.50	187.50	
711119 Prop & Liab Billings	6,840.00	2,280.00	4,560.00	33	6,246.00	2,082.00	1,200.00	33
711210 Travel	50,063.36	1,455.78	48,607.58	3	54,281.00	1,417.60	4,164.00	3
711504 Equipment nonCapital	90,017.02	7,912.86	82,104.16	9	61,364.14	116,477.47	52,863.40	190
* Services and Supplies	1,622,430.50	71,920.54	1,550,509.96	4	1,743,923.96	196,036.09	55,113.33-	11
781004 Equipment Capital	10,000.00		10,000.00		279,716.50	84,204.12	1,547,887.87	30
* Capital Outlay	10,000.00		10,000.00		279,716.50	84,204.12	195,512.38	30
** Expenses	3,472,804.87	584,389.00	2,888,415.87	17	4,167,973.73	806,177.60	3,361,796.13	19
*** Total	658,024.81	397,964.22	260,060.59	60	507,307.07	191,115.43	316,191.64	38

Centers for Disease Control and Prevention
Office of Surveillance, Epidemiology, and Laboratory Services
Scientific Education and Professional Development Program Office

Preventive Medicine Residency and Fellowship

Position Description Form

Use this form to request a resident or fellow. Save the form to your computer. Type within the boxes. The boxes will expand as needed. Limit your PD to two pages. E-mail the completed form to AIJ1@cdc.gov.

Program name
Physical location Campus (if CDC)
City State ZIP

Primary Mentor

Name Degrees
Title
Telephone Fax E-mail Mailstop
Mentoring experience

Secondary Mentor

Name Degrees
Title
Telephone Fax E-mail Mailstop
Mentoring experience

Position Information: Briefly describe program's general activities and experience with supporting trainees. Include additional features such as interactions with nearby universities or medical schools.

Washoe County Health District (WCHD) offers experiential opportunities for a Preventive Medicine Resident (PMR) in its five divisions: Administrative Health Services, Air Quality Management, Community and Clinical Health Services, Environmental Health Services and Epidemiology & Public Health Preparedness. The Health District serves a population of about 400,000 persons in the City of Reno, City of Sparks, and Washoe County. It is the only medium-sized local health authority in the State of Nevada and has a permanent workforce of about 175 employees and a budget of approximately \$18M. There are many opportunities for a resident to select projects that have shared elements among the various divisions or to choose a division-specific project.

The campus of the University of Nevada, Reno is nearby the Health District. The University of Nevada School of Medicine (UNSOM) and the School of Community Health Sciences which awards the MPH degree are located within minutes of WCHD. There are opportunities to interact with faculty and staff at the schools. We have ongoing projects that involve UNR faculty members.

Learning Opportunities: Briefly describe the opportunities to gain leadership experience.

Leadership experience can be gained through assuming the lead role on a selected project, taking part in leadership meetings with the Health Officer and Division Directors, providing updates on projects and issues at the monthly District Board of Health meetings, observing State Board of Health deliberations, and interacting with key players at the Health Division for the State of Nevada. Additional experience can be gained through joining WCHD staff during their attendance at board meetings of the County Commission and various community organizations that provide services which are integral to improving public health such as Access to Healthcare, Northern Nevada HOPES (HIV/AIDS treatment), and the Nevada Public Health Foundation. Nevada is unique in its mix of having the highest percentage of urban dwellers among the states yet encompassing vast areas with a low population density in rural and frontier settings. This contrast creates challenges for providing public health services in an equitable manner.

Dr. Amy Khan, MD, MPH, former EIS officer and a current member of the District Board of Health, completed her practicum year for the Preventive Medicine Residency while serving in Nevada through this program. Her mentorship and insights on the status of public health in Nevada would provide valuable perspectives for a PMR.

Major Performance Requirements: For each, provide a bulleted list of potential projects. Please be mindful of the scope of work that can be accomplished in 11 months of the academic year.

Program evaluation

- Take part in a Community Health Assessment--a required foundation element for accreditation.
- Identify the potential barriers to obtaining childhood immunizations at the Washoe County Health District and other entities in Washoe County that provide immunizations.
- Develop an After-Action Report and Improvement Plan (AARIP) as a follow up to an exercise or event that conforms with a Homeland Security Exercise and Evaluation Plan (HSEEP).

Policy analysis or development

- Evaluate the public health impacts of new legislation passed during the 2011 Biennial Session for the State of Nevada in light of rule changes, new mandates, and funding constraints. Possible issues include: childhood obesity, anti-smoking legislation (strengthening or weakening), recycling mandates, built environment impacts and implementation of model legislation for vital records).
- Assist in refining goals and objectives for the WCHD Strategic Plan and participate in the annual Strategic Planning Retreat.

Community intervention

- Participate in data analysis, planning, and presentations for the 3rd Annual Childhood Obesity Forum using data gathered from the school-based BMI assessments mandated for specific grade levels.
- Assume a lead role in the annual Rotary Family Flu Shot Day, a Point of Dispensing (POD) exercise.
- Review the impact of Air Quality Index (AQI) levels on sensitive groups such as children and the elderly during periods of decreased air quality as occurred during the wildfires of 2008 and the wintertime inversions of 2009/10 by assessing the number of ambulance calls and ER visits for respiratory distress. (This is an example of a potential joint project with our Air Quality Division monitoring specialists and one of our Senior Epidemiologists who completed her doctoral dissertation on air quality determinants.)

Project management

- Serve as Incident Commander for an outbreak investigation--several opportunities present each year.
- Work with our STD/HIV staff to refine mechanisms for targeting testing and reporting testing results. This will involve understanding ways to identify and target those at highest risk and selecting approaches to best satisfy the needs of our reporting sources in providing feedback.

Grant proposal evaluation and development

- Assist in preparing a proposal for chronic disease funding in the areas of smoking, nutrition, or chronic disease prevention.
- Participate in evaluating potential grants from organizations such as the National Association of City and County Health Officials (NACCHO) and the Robert Wood Johnson Foundation (RWJF) for their feasibility and sustainability for solving local public health problems.

Submission

E-mail form to Asim Jani, MD, MPH, PMR/F Assistant Director, at AIJ1@cdc.gov.



Washoe County Health District



Public Health
Prevent Promote. Protect

November 9, 2010

TO: District Board of Health Members
FROM: M. A. Anderson, MD, MPH, FACPM
SUBJECT: Legislative Bill Tracking for 2011 Session

Recommendation

Staff recommends the Board accept the update to the Legislative Bill Tracking for the upcoming 2011 Session.

Background

Attached is the update to the preliminary reports of Bill Draft Requests (BDRs) from: Community and Clinical Health Services. Staff continues to monitor these various BDRs for the 2011 Legislative Session.

Respectfully,

M. A. Anderson, MD, MPH

District Health Officer

WASHOE COUNTY HEALTH DISTRICT - 2011 LEGISLATIVE BILL TRACKING
Community and Clinical Health Services Division

11/9/2010

BDR or Bill #	Primary Sponsor	Status	Summary	Background/Analysis/Fiscal Impact	Recommendation & Staff Assignment
24	Senator Wiener	BDR	Requires persons who operate childcare facilities to complete continuing education relating to childhood obesity, nutrition and physical activity.	<u>Background.</u> BDR was submitted in response to a staff concept presented at a statewide childhood obesity policy summit held in June 2010. Subsequent email communication has occurred between staff and sponsor regarding potential bill and regulatory language. At this time, the sponsor prefers a globally-worded bill to ensure child "health, welfare, and safety," with specifics related to childcare facilities vetted in the regulatory process. <u>Ordinance, Policy, and Fiscal Impact:</u> Depending on language, bill could impact Washoe County Social Services (WCSS) regulations regarding required training for childcare providers licensed in Washoe County. There could also be impact to the content of the DHD "Signs & Symptoms" course pending regulatory decisions. If the content of this class is altered per state or WCSS regulation, then the fiscal impact to the DHD would be initial increased staff time to adjust course content.	<ul style="list-style-type: none"> Priority: High Action: Attention Testify: Yes Position: Support Ordinance: Yes Policy: Uncertain Fiscal Impact: Uncertain (J. Hadayia)
36	Assemblyman Hambrick	BDR	Requires schools to provide access to their athletic fields to nonprofit youth sport programs	<u>Background.</u> BDR is a placeholder for the reintroduction of 2009 legislation relating to "joint-use agreements" in which school grant the use of facilities (including athletic fields) to community organization (including nonprofit youth sports programs) for the purpose of physical activity. CDC considers this policy a "best practice" in childhood obesity prevention. In 2009, AB145 passed Assembly Education and was referred to Ways and Means (with no further action taken); the DHD was in support of the bill, and staff provided testimony.	<ul style="list-style-type: none"> Priority: Moderate Action: Attention Testify: No Position: Support Ordinance: No Policy: No Fiscal Impact: No (J. Hadayia)
71	Senator Wiener	BDR	SCR: Urges support for providing programs of fitness and wellness in schools	<u>Background.</u> BDR content is unknown at this time; however, staff recommend providing the 2010 Washoe County Childhood Obesity Forum "Plan for Action" to the bill sponsor as source	<ul style="list-style-type: none"> Priority: Moderate Action: Attention Testify: Yes Position: Support

(Bills that are no longer active are located at the end of the document and identified in italics).

WASHOE COUNTY HEALTH DISTRICT - 2011 LEGISLATIVE BILL TRACKING
Community and Clinical Health Services Division

11/9/2010

138	Assemblyman Parks	BDR	Revises provisions governing the treatment and control of sexually transmitted diseases	material for SCR language. <u>Background.</u> BDR is a placeholder for legislation on behalf of the State AIDS Task Force. Staff serve as Chair of the Task Force's Ad Hoc Policy Committee. Proposed topics for this BDR at this time include: <i>syringe access</i> , <i>universal HIV testing (as a Resolution)</i> , and <i>expedited partner therapy (EPT)</i> for the treatment of Chlamydia and gonorrhea. In 2009, SB305 allowing EPT was passed through to Conference Committee (with no further action taken); the DHD was in support of the bill, and staff provided testimony. Approval by the State AIDS Task Force will be needed prior to further bill development.	<ul style="list-style-type: none"> • Ordinance: No • Policy: No • Fiscal Impact: No <p>(J. Hadayia)</p> <ul style="list-style-type: none"> • Priority: High • Action: Attention • Testify: Yes • Position: Support • Ordinance: No • Policy: No • Fiscal Impact: No <p>(J. Hadayia)</p>
143	Assemblyman Bobzien	BDR	Provides for the standardization of sexuality education curricula	<u>Background.</u> BDR is a placeholder for an effort by community partners to pass the "Safe & Healthy Teens Act" which "requires comprehensive sexuality education, facilitates community partnerships in schools and requires the state of Nevada to apply for funding in support of teens." The State AIDS Task Force Ad Hoc Policy Committee referenced above voted on November 3, 2010 to formally support this BDR as a legislative priority for the session.	<ul style="list-style-type: none"> • Priority: High • Action: Attention • Testify: Yes • Position: Support • Ordinance: No • Policy: No • Fiscal Impact: No <p>(J. Hadayia, S. Hardie)</p>
188	Legislative Committee on Health Care	BDR	Establishes a statewide school wellness policy	<u>Background.</u> BDR is a placeholder for LCHC recommendations (1-4) related to childhood obesity. Staff are in discussion with community partners about proposing an amendment to the bill that would define "school wellness" and/or list components of a statewide school wellness policy in statute as follows:	<ul style="list-style-type: none"> • Priority: Moderate • Action: Attention • Testify: Yes • Position: Support • Ordinance: No • Policy: No • Fiscal Impact: No <p>(J. Hadayia)</p>

(Bills that are no longer active are located at the end of the document and identified in italics).

WASHOE COUNTY HEALTH DISTRICT - 2011 LEGISLATIVE BILL TRACKING
Community and Clinical Health Services Division

11/9/2010

191	Legislative Committee on Health Care	BDR	Revises provisions relating to school nutrition programs	<p>"A statewide school wellness policy shall, at a minimum, include the following:</p> <ul style="list-style-type: none"> • Specifications regarding the nutritional content of all foods and beverages served, sold, given, or available to students while on school property; • Standards for meal times and recess in relation to lunch; and • Specifications for daily consecutive minutes of student physical activity." <p><u>Background.</u> BDR is a Placeholder for LCHC recommendations (18-20) related to federal school food programs.</p>	<ul style="list-style-type: none"> • Priority: Low • Action: Monitor • Testify: No • Position: Support • Ordinance: No • Policy: No • Fiscal Impact: No <p>(J. Hadayia)</p>
291	Attorney General	BDR	Makes various changes relating to the Tobacco Master Settlement Agreement	<p><u>Background.</u> Content is unknown at this time.</p>	<ul style="list-style-type: none"> • Priority: Uncertain • Action: Monitor • Testify: Uncertain • Position: Uncertain • Ordinance: No • Policy: Uncertain • Fiscal Impact: Uncertain <p>(J. Hadayia)</p>
521	Senator Copening	BDR	SCR: Encourages nutritional health of children	<p><u>Background.</u> Content is unknown at this time.</p>	<ul style="list-style-type: none"> • Priority: Uncertain • Action: Monitor • Testify: Uncertain • Position: Uncertain • Ordinance: No • Policy: No • Fiscal Impact: No <p>(J. Hadayia)</p>
TBD	TBD	TBD	Increase in the tobacco excise tax	<p><u>Background.</u> A statewide coalition has been formed to advocate for an increase to the Nevada tobacco excise tax as was sought in the 2009 Session. <i>Research shows that increases</i></p>	<ul style="list-style-type: none"> • Priority: High • Action: Attention • Testify: Yes

(Bills that are no longer active are located at the end of the document and identified in italics).

WASHOE COUNTY HEALTH DISTRICT - 2011 LEGISLATIVE BILL TRACKING
 Community and Clinical Health Services Division

11/9/2010

TBD	TBD	TBD	<p>in tobacco excise tax produce real, predictable improvements in smoking rates, smoking-related health care costs, and state revenue.</p> <p>The DHD is a formal member of this coalition, and staff has signed the Confidentiality Agreement confirming participation.</p> <p><u>Background.</u> Community efforts will begin soon to prepare for and oppose any legislation that may be introduced to weaken the NCIAA as occurred in the 2009 Session (SB372). Details will be forthcoming.</p>	<ul style="list-style-type: none"> • Position: Support • Ordinance: No • Policy: No • Fiscal Impact: Uncertain <p>(J. Hadayia)</p>
TBD	TBD	Nevada Clean Indoor Air Act (NCIAA)		<ul style="list-style-type: none"> • Priority: High • Action: Attention • Testify: Yes • Position: Uncertain • Ordinance: Uncertain • Policy: Uncertain • Fiscal Impact: Uncertain <p>(J. Hadayia)</p>

(Bills that are no longer active are located at the end of the document and identified in italics).

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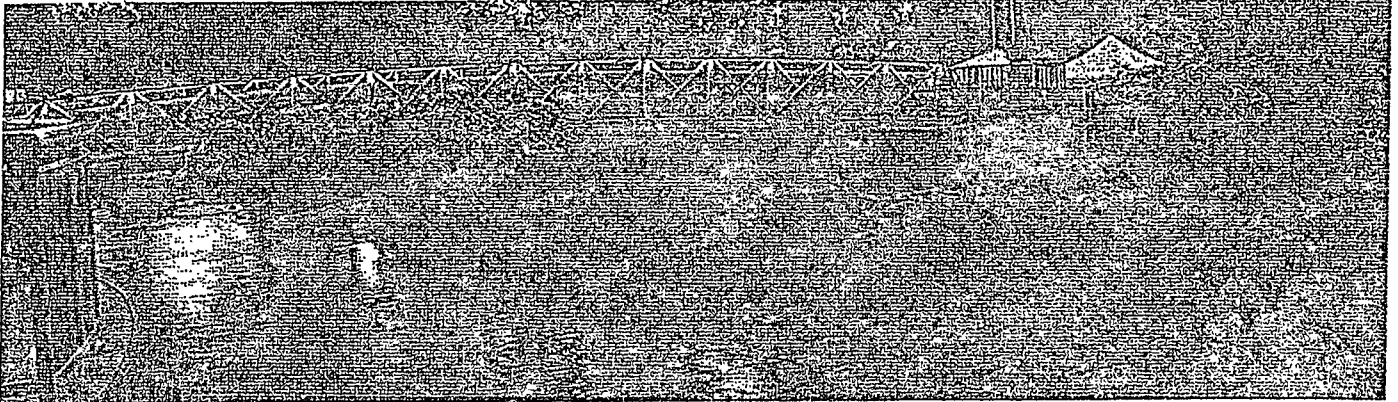
DBOH Agenda
Item #12.
11/18/10



Washoe County

Now Recruiting for

District Health Officer



The County of Washoe

Breathtaking Washoe County is so much more than just an exciting gaming destination.

Located along the eastern slopes of the majestic Sierra Nevada Mountains in northwestern Nevada, Washoe County covers an area of 6,600 square miles bordering California and Oregon. A population of approximately 417,000 enjoys an excellent quality of life with abundant recreational activities, arts and cultural amenities, fine dining, and a variety of entertainment options including being known as the "Biggest Little City" for its variety of cultural and entertainment activities.

A wide range of lifestyle choices are available. The City of Reno is the county seat and the third largest city in Nevada. Named one of the Top 25 Cities for "Best Places to Live 2010" by Men's Journal Magazine (April 2, 2010), Reno has a bustling downtown, diverse neighborhoods, a major university, and a top ranked international airport. Nearby are the communities of Sparks and Incline Village at Lake Tahoe. And miles of high desert and mountains provide additional options in the county's vast unincorporated areas. So whether you prefer an urban setting, suburban, or rural living, Washoe County offers it all.



Washoe County, Nevada
**Many Communities.
One County.**



The Organization

The Washoe County Health District is governed by a seven member policy board comprised of one elected and one citizen representative from each of the two cities and the county, and a physician appointed by the other six Board members. Unlike most other states, in Nevada local health districts have significant statutory autonomy.

The District Health Department is a dynamic and progressive organization with jurisdiction over all health matters within the Health District's boundaries. Washoe County provides a variety of support services and approximately 45% of the \$20,000,000 budget through a transfer of general fund revenues. Other Department revenues come from grants, permit fees and service charges.

The District Health Department is comprised of five divisions:

Administrative Health Services (AHS) provides administrative support for the Department; oversees Vital Statistics, Emergency Medical Services, and federal HIV/AIDS prevention funds for community-based organizations.

Air Quality Management (AQM) protects air quality through planning, monitoring, permitting, public information and education, and regulation enforcement.

Community and Clinical Health Services (CCHS) provides clinic services and epidemiology for STD, TB and vaccine preventable diseases, family planning, teen and WIC clinics, WIC Marketing, and child abuse prevention, and supports communicable disease control activities.

Environmental Health Services (EHS) programs include food, drinking water, solid and liquid waste, recycling, hazardous materials, underground storage tanks, institutions, and vector borne diseases (including mosquito abatement) programs.

The Epi Center is the department's center for communicable disease surveillance, epidemiology and outbreak control and includes the Public Health Preparedness Program.

The Position of District Health Officer

The District Health Officer administers a budget of \$20,000,000 and provides leadership for a staff of 200. The District Health Officer reports to the District Board of Health, and in addition to administrative duties, carries out the Board's mission and strategic plan, assures the enforcement of public health regulations, advocates for public health and facilitates collaborative efforts with the community to improve public health. The mission, vision, values, strategic plan and annual report can be viewed at: www.washoecounty.us/health. The position class specification can be viewed at: www.washoecounty.us/humanresources. This highly visible position requires responsiveness not only to the Board and Department staff, but also the public, elected officials and other community partners and stakeholders.



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The Ideal Candidate

The minimum qualifications for this position are a Master's in Public Administration (Master's in Public Health Preferred) and a minimum of five (5) years of progressively responsible management experience in a Public Health environment OR an equivalent combination of education and experience. MD's are welcome and encouraged to apply

The Ideal Candidate must have a proven track record that demonstrates abilities and strengths in:

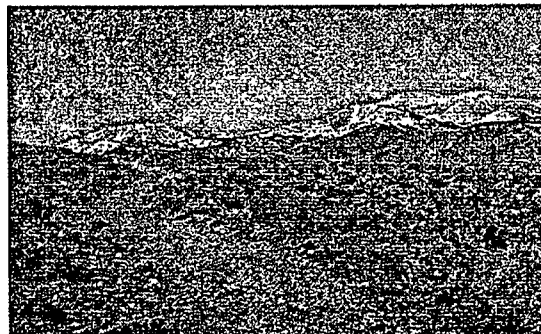
PUBLIC HEALTH ADMINISTRATION: effectively leads, communicates and implements public health vision; able to creatively leverage resources and address public health issues; demonstrates effective public health advocacy in the community, the legislature and other venues.

INTERPERSONAL EFFECTIVENESS: communicates complex information correctly, clearly and effectively in writing and speaking; actively listens; able to deal tactfully with staff, employees, elected officials, organizations and the public. Takes ownership of problems to find solutions. Shares resources, information and knowledge. Encourages commitment to District Health mission and organizational goals. Acts as an ambassador of the Washoe County Health District in all interactions.

FISCAL RESPONSIBILITY: able to plan, prioritize and execute work; utilizes processes, systems and technology to enhance efficiency and effectiveness. Demonstrates a dedication to acting in the interest of the public's trust. **Acts as a trustee of the County's resources.**

CHANGE MANAGEMENT: demonstrates a high level of accountability; takes ownership of own actions and their impact on others; anticipates and is able to manage change; is a quick learner when faced with new problems and information.

LEADERSHIP: able to make effective and timely decisions that demonstrate sound judgment and critical thinking. Builds collaborative relationships with public and private partners; develops strategies to include divergent opinions and overcome adversity; open and candid and receptive to public and staff input. Demonstrates impeccable personal and professional integrity and responsiveness to multiple constituencies. holds self and others accountable for valuing and promoting a work environment that is cooperative and accepting of diversity.



Compensation & Benefits

The annual salary range for this position is \$XX,XXX - \$XXX,XXX depending on experience. The County also offers an exceptional benefits package which includes:

- Retirement: Nevada PERS. Washoe County pays the employer and employee contribution.
- Vacation: Accrues at the rate of 96 hours annually for the first three years of employment. Accrual rate gradually increases until it reaches a maximum of 200 hours annually.
- Sick Leave: Accrual at the rate of 10 hours per month of full-time service for the first 10 years and 12 hours a month of full-time service for 10 years or more.
- Holidays: Eleven paid holidays annually.
- Health, Dental, Life and Vision Insurance: The County pays for 100% of employee costs for all premiums. Dependent coverage paid 50% by employer.
- Longevity Pay: \$100 per year of full-time continuous service to a maximum of \$3,000.
- Merit Increases: Full-time employees eligible to receive an annual merit increase of 5% until the position classification's maximum salary is received.
- There are no social security deductions (although a 1.45% deduction for Medicare is required).
- There is no state income tax in Nevada.

Application & Selection Process

To be considered for this exciting career opportunity, please apply online at www.washoecounty.us; paper applications are not accepted. Applicants are encouraged to attach a resume of professional experience, qualifications, and competencies associated with the ideal candidate. Candidates with professional background and experience most closely related to the "Ideal Candidate" shall be invited to participate in the assessment panels. Please see the online position posting for details.

Filing deadline: 5:00 p.m. PST, DATE

- Assessment panels are tentatively scheduled for the week of DATE
- Appointment is anticipated for DATE

For additional information regarding Washoe County District Health, please visit www.washoecounty.us/health. If you have questions regarding this position, please contact Katey Fox, Director of Human Resources at 775-328-2081 or e-mail to kafox@washoecounty.us.

Washoe County is an Equal Opportunity / Affirmative Action employer hiring employment eligible applicants.





DISTRICT HEALTH DEPARTMENT

November 4, 2010

Dr. Humphreys, Chairman District Board of Health
Washoe County Health District

Subject: Interim Health Officer Assignment

Dear Dr. Humphreys,

The intent of this letter is to identify my interest in the position of Interim Health Officer. I believe I have the leadership experiences and organizational skills to lead the Health District during this period of transition.

I have held executive level positions in organizations similar in complexity to the Health District and recognize the need for an interim chief officer to work closely with the Board, provide prudent fiscal and operational stewardship, and professionally represent the Health District in the community. During my four years with the Health District I have gained the institutional knowledge required to provide solid and clear direction. I actively represent the Health District within the community, the County and the state on many leadership and public health efforts.

My strengths are in the area of communication, staff development, consensus building and collaboration, which are all crucial to success during this very challenging fiscal environment.

The interim position presents an opportunity to maintain stability within the organization during the transition to a permanent Health Officer and assure employees and stakeholders that the organization has a strong and effective leader in place. If chosen, I look forward to working with the Board of Health, the Health District leadership team, staff and stakeholders in continuing the high quality public health services we provide to the community.

Please do not hesitate to contact me if you have any questions or would like to discuss my qualifications in more detail. My resume is attached for your consideration.

Respectfully,

Mary-Ann Brown, R.N. MSN
Division Director Community and Clinical Health Services
Washoe County Health District

C.c. Washoe County Board of Health Members
Washoe County Human Resources

1001 EAST NINTH STREET / P.O. BOX 11130, RENO, NEVADA 89520 (775) 328-2400 FAX (775) 328-2279

www.co.washoe.nv.us/health

WASHOE COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER
PRINTED ON RECYCLED PAPER

Mary-Ann Brown RN MSN

ADDRESS:

1702 Spyglass Circle
Reno, Nevada 89509

PHONE:

(775) 348-7026
(775) 233-8182

EDUCATION

University of Nevada Reno
Masters of Science- Nursing 1996
Bachelor of Science – Nursing 1985

PROFESSIONAL EXPERIENCE

Division Director –Community and Clinical Health Services Washoe County Health District

January 2009-Current

Analyze data concerning community health needs and direct the development of plans to meet those needs. Direct the development, implementation, and evaluation of public health nursing services and other Division programs. Work with the District Health Board, District Health Officer, and management staff in policy, program, and services development. Make recommendations to the District Health Officer. Work with federal, state, and county agencies, professional groups, and other organizations concerned with the improvement of nursing and health services for Washoe County. Represent the Division/Department and public health in high level meetings and conferences with local, state, and/or national groups, including legislative bodies.

Assistant Division Director- Community and Clinical Health Services Washoe County Health District

September 2006-January 2009

Assists the Division Director of Community and Clinical Health Services with organizing, directing, and administering public health and public health nursing activities for Washoe County programs. Directs, trains, supervises and evaluates the public health staff, including nurses, nurse practitioners, and program managers engaged in community, home visiting and clinical nursing services; assists with the formulation of public health and public health nursing policies and practices, procedures and protocols; budget preparation, program planning and evaluation. Acts as the Director in his/her absence.

Executive Director, The Children's Cabinet

2002-December 2006

The Executive Director is responsible for the management and supervision of all activities of The Children's Cabinet which is a non-profit agency serving children and families. The position is responsible for the development and implementation of a \$14 million annual budget. The Executive Director works closely with the Board of Trustees to develop the agency's strategic plan and oversees the implementation of its objectives. The Director also serves as the agency's spokesperson and conducts an active and ongoing public relations campaign to increase visibility and viability of the agency in public and private sectors ensuring the organization and its mission are properly presented.

Corporate Director of Clinical Services, Life Care Management Services, L.L.C.

1999-December 2001

Member of the corporate staff of Life Care Management Services, L.L.C., which owns and operates thirteen hospitals situated throughout the United States. The position is responsible for supporting and providing consulting services to all clinical areas. Clinical programs developed included: Wound Care, Pain Management, Case Management, Utilization Review, Patient/Family Education and Clinical Pathways. The Corporate Director of Clinical Services serves on all hospital boards, is an editor for the company journal, and serves on multiple committees including outcomes and corporate compliance. The Corporate Director of Clinical Services is responsible for the promotion of Life Care's mission, beliefs and core clinical standards.

Clinical Operations Officer (COO), Tahoe Pacific Hospital (A Life Care facility)

1996 – 1999

Clinical Operations Officer of Tahoe Pacific Hospital, a long-term acute care facility providing care to the medically complex patient. The position is responsible for overall operations of clinical functions including Nursing, Rehabilitation, Cardiopulmonary, Dietary, Laboratory, Radiology, Pharmacy, Case Management, Education and Social Services. Responsible for creating and managing clinical area budgets totaling \$8 million. The COO assures the implementation of the hospital's philosophy, goals, and standards.

Critical Care Manager, Saint Mary's Regional Medical Center

1991 – 1996

Manager of the Intensive Care Unit, the Cardiac Intensive Care Unit and the Cardiac Surgical Unit. Overall responsibility for the planning, development, general operations, marketing and medical interface for the critical care areas, with personnel resources that were comprised of 90 staff members. Served on multiple hospital committees including Research, Infection Control and Ethics Committee. Developed, managed and responsible for an operating budget of greater than \$3.5 million annually. Responsible for maintaining clinical practice standards.

Registered Nurse, Intensive Care Unit, Saint Mary's Regional Medical Center

1988 – 1991

Provided primary nursing care for critically ill medical and surgical patients.

Registered Nurse, Telemetry, Washoe Medical Center

1987

Provided primary nursing care to cardiac and other types of patients requiring specialized monitoring.

Registered Nurse, Surgical Unit, University of California, Davis Medical Center, Sacramento, California

1985-1987

Provided primary care to a variety of surgical specialty patients.

PROFESSIONAL ACTIVITIES

Governors Workforce Investment Board for the State of Nevada

Member Board of Directors

Great Basin Public Health Leadership Institute

2008 Graduate

Washoe County Strategic Planning Tactical Advisory Committee

Member

Human Services Network

Board Member

Access to Health Care Network

Board Member

Continue Care Hospital

Board Member

Saint Mary Regional Medical Center Ethics Committee

Committee Member since 1989 (Committee Chair 2003-2006)

Renown Medical Center

Ethics Committee Member

Carson Tahoe Regional Medical Center

Consultant: Critical Care, Ethics Committee, Institutional Review Board (IRB), Palliative Care

University of Nevada Reno, Orvis School of Nursing

Adjunct Faculty and Preceptor

State of Nevada Department of Business and Industry Division of Insurance

Panelist Medical/Dental Legal Screening Panel 1998-2002

Nevada Nurses Association

Past State Board Member of the Nevada Nurses Association

Past District President of the Nevada Nurses Association

Past Chair Nevada Nurses Association Practice Committee

American Nurses Association

Former Nevada Representative for the Practice Institute of the American Nurses Association

LECTURES (SAMPLE OF PROGRAMS PRESENTED)

Public Health and Clinical Ethics, University of Nevada, Reno, April 2010

Best Practices in Highly Ethical Organizations, Association of Fundraising Professionals, February, 2010

Organizational Ethics: Is Your Institution Good and Virtuous? Northern Nevada Medical Practices Association, December, 2009

Ethics Surrounding Healthcare Associated Infections, Nevada Hospital Association Annual Meeting, Lake Tahoe, Nevada, September, 2009

Ethics and Nursing: Bioethical Issues in the Nursing Profession, Reno, Nevada-April, 2005
Difficult Choices; Ethical Dilemmas Surrounding End of Life, Pittsburgh, Pennsylvania – October, 2000
Convocation keynote speaker, University of Nevada Reno – May 1999
Health Insight: The Health Quality Forum: "Facilitating End of Life Decisions", Reno, Nevada – October 1998
Challenges in Nursing; "Critical Thinking and Leadership", Reno, Nevada – May 1998

AUTHORED PUBLICATIONS

Hospital Ethics Committees: What are they? Nevada Public Affairs Review, published by the Senator Alan Bible for Applied Research University of Nevada Reno 2002.

AWARDS RECEIVED

1992 March of Dimes Nurse of the Year

November 8, 2010

Dr. Humphreys, Chairman
Washoe County District Board of Health
P.O. Box 11130
Reno, NV 89520-0027

Dear Dr. Humphreys,

Please accept this letter as my interest to serve as the Interim Washoe County District Health Officer. I have 32 years of experience in planning, directing, and administering Public Health Programs; personnel management; grants administration; data analysis; legislative and policy development; continuous improvement opportunity development; and emergency medical services management.

As the Administrative Health Services Officer, I ensure administrative compliance with fiscal and operational policies as established by the District Board of Health and Board of County Commissioners. I have developed comprehensive financial plans consistent with the Board's strategic goals. I am experienced in managing budgets in a contracting economic environment and possess complete knowledge of all five divisions' budgets in the Health Fund.

I see the "big picture," and anticipate future consequences and trends accurately. I present the unvarnished truth in an appropriate manner to assist the District Board of Health with their decision-making and fulfill government's duty to be publicly accountable. I establish and maintain relationships built on integrity. I am widely trusted across Washoe County and with external stakeholders for the quality of my decisions and organizational abilities.

I have a track record of creating a positive Team-Based environment and leading a diverse staff. I am comfortable delegating both routine and important tasks. I possess an innate ability for empowering and mentoring staff and other public health professionals. I can focus our efforts and guide our activities by analyzing the current workforce, identifying future needs to achieve the Board's strategic objectives, and addressing the gaps and imbalances in the staffing patterns.

I have successfully led a strategic initiative using a collaborative leadership style. I was able to initiate, execute and complete the process to gather multiple people and groups together to advance a common goal. I ensured that my colleagues' issues were being addressed. In addition, I modified the plan's recommendation to customize them to meet new issues that developed since the strategic plan was published.

Dr. Humphreys
November 8, 2010
Page Two

I am a scholar of the Great Basin Public Health Leadership Institute. I participated in the National Association of County and City Health Officials (NACCHO) Public Health Agency role in Incident Command System workshop to develop curriculum. I was appointed to the National Emergency Medical Services Medical Director and Public Health Integration Task Force to develop Public Health/Emergency Medical Services Injury Prevention curriculum.

I evaluated Nevada's newborn screening program and wrote "Nevada Routine Second Newborn Screen: An Examination of Cost Effectiveness." I also evaluated the medical genetic services in Nevada and wrote "A Genetic Needs Assessment for the State of Nevada."

I have represented the District Board of Health, other state and local government officials, community agencies and groups by presenting testimony to the State Legislature. I am confident that I would successfully represent the interests of the Washoe County Health District in the upcoming Legislative session.

I have been the Acting District Health Officer for two District Health Officers and am ready, and willing to serve as the Interim Health Officer. In fact, the current District Health Officer granted signature authority on her behalf to me to ensure business continuity for essential services in her absence.

Should you have any questions, please feel free to contact me directly at 775.328.2417 or ecoulombe@washoecounty.us. Thank you for your time and consideration.

Sincerely,



Eileen Coulombe
Administrative Health Services Officer

Enclosure

cc: Members, District Board of Health
Katey Fox, Director, Human Resources

EILEEN C. COULOMBE
1048 Chesterfield Court
Reno, NV 89523-2717
Cell: (775) 813-8868 Home: (775) 747-5982
Email: eileen_coulombe@sbcglobal.net

QUALIFICATIONS

Thirty-two years of combined experience in planning, directing and administering public health programs, personnel management, grants administration, data analysis, policy development, continuous improvement opportunity development, governing board presentations, and emergency management.

EMPLOYMENT HISTORY

- 2000 - Administrative Health Services Officer
Washoe County Health District
PO Box 11130, Reno, NV 89520-0027
(775) 328-2417
- 1993-2000 Health Analyst
Washoe County Health District
PO Box 11130, Reno, NV 89520-0027
(775) 328-2417
- 1991-1993 Perinatal Coordinator
Nevada State Health Division
505 East King Street, Room 201, Carson City, NV 89701-4797
(775) 684-4200
- 1988-1991 Casualty Claims Adjuster
Allstate Insurance Company
1595 Meadow Wood Lane, Suite 1, Reno, NV 89502
(775) 827-2013
- 1988-1988 Independent Consultant
1048 Chesterfield Court, Reno, NV 89523
(775) 747-5982
- 1980-1988 Administrator
College of Medicine, Obstetrics & Gynecology Department
University of Florida, Gainesville, FL
- 1979-1980 Fiscal Officer
Institute of Food and Agriculture Sciences, Agronomy Department
University of Florida, Gainesville, FL
- 1975-1979 Account Assistant
Learning Resource & Communication Center
University of Florida, Gainesville, FL

EXPERIENCE

Leadership

- Graduated from the Great Basin Public Health Leadership Institute in 2006.
- Served as a subject matter expert for the Washoe County Team Effectiveness Learning Council that assisted in the development and evaluation of the Excellence in Public Service (EPS) certificate program, Essentials of Team Effectiveness.
- Represented the Department with the District Board of Health, other state and local government officials, community agencies and groups; and presented testimony to the State Legislature.
- Participated in the National Association of County and City Health Officials (NACCHO) Public Health Agency role in Incident Command System workshop to develop curriculum.
- Appointed to the National Emergency Medical Services Medical Director and Public Health Integration Task Force to develop public health/EMS Injury Prevention curriculum.
- Active member of the Washoe County Information Technology Advisory Committee (ITAC) that is advisory to the Washoe County Board of County Commissioners.
- Negotiated, coordinated and implemented the implementation of the complex Information Technology Strategic Plan for the Health District.
- Appointed to Washoe County World Class Technology Task Force in 2005.
- Represented Washoe County Public Health at the Weapons of Mass Destruction role of public health in Disasters and Public Health Emergency Operations at UCLA, California.
- Represented the entire County of Washoe at the Department of Justice biological weapons tabletop exercise for Determined Promise 2003.

Management

- Planned, directed, and supervised the administrative and fiscal functions of the Washoe County Health District with 200 employees, 23 budget divisions, and 60 plus project accounts with a fiscal year 2011 budget \$19 million.
- Planned and prepared the Department budget and strategies, directed staff in the preparation of the base and above the base budget, including line item expenditure calculations and justifications, performance measures and workload data.
- Provided administrative and fiscal analysis of public health programs to ensure compliance with the District Board of Health's and Board of County Commissioners' policies and regulations.
- Analyzed the productivity and operational performance of public health programs, and developed recommendations for operational changes.
- Oversaw the regulation and performance of special programs such as the ambulance service franchise.
- Oversaw contracts and agreements with other agencies, vendors, medical providers, and professional personnel, ensuring compliance with terms and conditions.
- Interpreted and coordinated implementation of federal, state, University, local government rules and regulations, and policies and procedures.
- Served as team leader, provided training, guidance and mentoring to other public health professionals.
- Organized local workshops and state and national conferences for professional development of physicians, nurses, and other public health professionals.

Financial

- Established the Department annual budget and presented the budget to the Board of Health and Board of County Commissioners in oral and written format.
- Monitored Health Fund to account for activities in compliance with legal requirements, to facilitate management control, and to satisfy the requirements of generally accepted accounting principles.
- Approved all Health District requisitions, purchase orders, payroll, and other payment claims.
- Directed the collection of revenues from grants/contract, service charges, and permit fees, and prioritized disbursements.
- Assured compliance with established budget guidelines, using automated budget and fund accounting systems, to monitor expenditure reports and other accounting records.
- Prepared financial statements, budget amendments, quarterly and monthly expenditure reports, and forecasted revenue and expenditures.
- Conducted biennial review and adjustment of Department's Schedule of Fees and Services charges developing revenue sources which satisfied criteria of external audit and Legislative review.
- Created and implemented a revenue monitoring system for tracking status of federal, state grants.

Personnel

- Oversaw the personnel services for all the Divisions including preparing and monitoring requisitions for recruitment, processing personnel action forms for merit increases, promotions, resignations, transfers, and health benefits.
- Supervised and evaluated staff, utilizing progressive discipline and conflict resolution procedures when necessary, to develop staff.
- Collaborated with the Washoe County Employee Association (WCEA) collective bargaining unit to resolved employee issues.
- Appointed by the Board of County Commissioners to the steering committee for the "Washoe County Classification and Compensation Study" project conducted by the HAY Group, an independent consultant to Washoe County..
- Conducted position audits and salary surveys of position classifications.
- Counseled employees in matters of benefits, discipline, and other personal and work problems.
- Assured that staff performs assignments in a safe and prudent manner which does not expose them or others to unnecessary harm or risk of on-the-job injury.

Grantsmanship

- Developed and administered grants and contracts from initiation of proposal through submission of final reports and audit for federal, state and private foundations.
- Negotiated funding allocations with federal and state granting agencies.
- Assured compliance with OMB Circular A-133 and the Single Audit Act for federal grants.
- Wrote the Robert Woods Johnson Foundation grant that created the "Health Futures Infant Mortality Reduction Program" and organized the regional "bidder" conference for 17 states and 2 territories to apply for funding for their infant mortality reduction projects.

- Solicited by HRSA (Health Resources Services Administration) to become a grant reviewer on their panel of outside experts to evaluate the viability of federal grant applications.
- Coordinated site visits from funding agencies to review funded and potential projects.
- Created request for proposal (RFP) materials, evaluated applications, and wrote contracts for community-based public health programs.
- Participated on an outside review committee for prevention and treatment grant applications to the State of Nevada Department of Human Resources, Bureau of Alcohol and Drug Abuse.
- Represented the Health Department on the Washoe County Grants Group advising the Washoe County Grants Manager.

Technical Writing

- Evaluated Nevada's newborn screening program and wrote "1990 Nevada Routine Second Newborn Screen: An Examination of Cost Effectiveness".
- Reviewed medical genetic services in Nevada and wrote "A Genetic Needs Assessment for the State of Nevada".
- Prepared a report on Medicaid births, including designing an evaluation tool, collecting and computerizing data, and applying statistical analyses.
- Created patient satisfaction survey for Outpatient Women's Clinic.
- Wrote public health programs' grants, progress and annual reports.
- Developed procedural manuals and position papers.
- Prepared manuscripts for submission to professional journals.
- Prepared proclamations, media releases, and newsletter articles.
- Designed letterhead, brochures, and forms.

Medical

- Evaluated and negotiated complex bodily injury claims to settlement.
- Handled first-party and third-party litigation.
- Interpreted medical reports.
- Reviewed medical fees including diagnostic and other treatment procedures for usual and customary charges.
- Monitored patient progress, reviewing the frequency and length of treatment, necessity of treatment and determined the need for an Independent Medical Examination.
- Resolved problems regarding disputes over fees, treatment utilization or inadequate documentation.
- Coordinated research projects and literature searches, including MEDLINE.

COMMISSIONS AND BOARDS

Washoe County ITAC (Information Technology Advisory Committee), current.
ED (Emergency Department) Consortium, current.
LEPC (Local Emergency Planning Council) general member and Grants & Finance Subcommittee member, current
Washoe County Emergency Planning Council, current
Nevada State Health Division Committee on Emergency Medical Services, current.
Interhospital Coordinating Council, current.
Washoe County Employees Resolution to the Classification and Compensations Study (WERCCS) Steering Committee, 1999 -.2001.
Washoe County Strategic Plan, 1997.
Strategic Plan Information Network, 1997.
March of Dimes Health Professional Advisory Committee, 1991-1993.
Nevada Women's Lobby Coordinating Council, 1992-1993.
Northern Nevada Claim's Association, 1987-1991, Board of Directors, 1991.

PROFESSIONAL AFFILIATIONS

Public Health Leadership Society, 2006 –
National Grants Management Association, 2001 -
Government Finance Officers Association, 2000 –
American Public Health Association, 2000 – 2008.
Nevada Public Health Association, 1991 – 2000.
Nevada Public Health Association, 1997 Vice-President,
1998 President Elect, 1999 President.
Maternal Child Health Coalition of Northern Nevada, 1991-1998, Treasurer, 1992-1998.
Maternal Child Health Coalition of Nevada, Treasurer, 1992-1994.
Toastmasters International, Washoe Express, 1994-1998, Secretary,
1994-95, Sargent At Arms, 1995-96.
National Association of Female Executives, 1987-1988.
National Family Planning and Reproductive Health Association, 1981-1987.

EDUCATION

University of Florida, B.A., Sociology

Continuing education in legal principles, financial management, personnel management, risk management, continuous improvement, National Incident Management System (NIMS), and emergency medical services.

SPECIAL SKILLS

Community Volunteer Experience
Conversational Spanish

REFERENCES AVAILABLE UPON REQUEST



CLASS SPECIFICATION

Class Code: 0629
Date Est: 03/85
Last Rev: 07/96
Last Title Chg:
FLSA: Exempt

ADMINISTRATIVE HEALTH SERVICES OFFICER

DEFINITION

Under general direction, plans, organizes, and directs the operation of public health programs in the Administrative Health Services Division; oversees the fiscal operations of the District Health Department; and performs related work as required.

EXPERIENCE AND TRAINING REQUIREMENTS

Education equivalent to a Bachelor's Degree from an accredited college or university in Health or Environmental Sciences, Business Administration, or a related field and five years of experience in public health administration which included budget administration, financial management, and supervisory duties; OR an equivalent combination of training and experience.

LICENSE OR CERTIFICATE

None.

SUPERVISION EXERCISED

This is a full supervisory classification for formulating and administering various Department programs, fiscal services, support services, and Department budget.

EXAMPLES OF DUTIES *(The following is used as a partial description and is not restrictive as to duties required.)*

Plan, direct, and supervise the Administrative Division's professional, paraprofessional, and clerical staff in various programs, administrative services, and fiscal operations.

Direct staff development and training.

Oversee the regulation and performance of special programs such as the ambulance service franchise.

Prepare and negotiate franchise agreements and prices for services.

Coordinate the District Board of Health meeting processes.

Coordinate Department fiscal services, review, monitoring, and controls, including maintenance of financial records and preparation of financial reports, working with other Department Staff as necessary.

Direct the collection of revenues from grants/contracts, service charges, and permit fees.

Ensure Department fiscal compliance with Federal, State, and County requirements.

Coordinate the fiscal management of Department grants, including the transmittal letter, application packages, project assurances, financial reports, and related audits.

Oversee the personnel services for all the Divisions including preparing and monitoring requisitions for recruitment, processing personnel action forms for merit increases, promotions, resignations, transfers, and health benefits.

Approves the Department payroll.

Oversee contracts and agreements with other agencies, vendors, medical providers, and professional personnel, ensuring compliance with the District Board of Health's policies and requirements.

Represent the Department with District Board of Health, other government agencies, community groups, and the general public.

Ensure that assigned staff performs assignments in a safe and prudent manner that does not expose them or others to unnecessary harm or risk of on-the-job injury.

JOB RELATED AND ESSENTIAL QUALIFICATIONS

Full Performance *(These may be acquired on the job and are needed to perform the work assigned.)*

Knowledge of:

Departmental/division policies and procedures.

Countywide personnel policies such as Affirmative Action, sexual harassment, discrimination, and EEO.

Computer software specific to the department/division.

Programs and services offered by a public health department.

Washoe County budget and finance policies and procedures.

Ability to:

Plan, coordinate, and direct the full scope of administrative and fiscal operations of the District Health Department.

Entry Level *(Applicants will be screened for possession of these through written, oral, performance, or other evaluation methods.)*

Knowledge of:

Principles and practices of public health programs.

Principles and practices of financial management, revenue forecasting, and governmental accounting and budgeting.

Contractual agreements and grant administration.

Computer software packages used in financial management.

Principles of public personnel administration.

Principles of management and organizational theory.

Principles and practices of supervision.

Ability to:

Plan, coordinate, manage, and supervise assigned programs, fiscal services, and administrative functions.

Provide supervision, training, and work evaluation for assigned staff.

Evaluate work priorities, procedures, and processes to determine their effectiveness and efficiency.

Analyze situations and recommend appropriate actions.

Develop and implement work efficiency methods and procedures.

Analyze and evaluate financial data, researching and gathering appropriate information.

Communicate effectively both orally and in writing.

Effectively represent the Department in contacts with other agencies and the public.

Establish and maintain cooperative working relationships with others contacted during the course of work.

SPECIAL REQUIREMENTS

(Essential duties require the following physical skills and work environment.)

Ability to sit for extended periods. Ability to frequently stand and walk. Corrected hearing and vision to normal range. Verbal communication ability. Ability to use office equipment including computers, telephones, calculators, copiers, and FAX. Work is performed in an office environment. Continuous contact with other staff and public.

This class specification is used for classification, recruitment and examination purposes. It is not to be considered a substitute for work performance standards.

Approved WERCCS Job Evaluation Committee

Date March, 2001



Washoe County Health District

ENVIRONMENTAL HEALTH SERVICES DIVISION

November 8, 2010

Dr. Humphreys
Chairman,
Washoe County District Board of Health

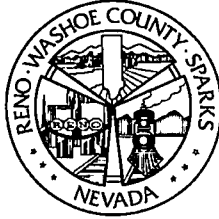
RE: Letter of interest regarding Interim District Health Officer

Dear Dr. Humphreys

I am putting my name forward as interested in being named Interim Health Officer. I am putting my name forward not as someone actively seeking the position but rather as an option for the District Board of Health (DBOH) to consider if they need to for continuity purposes. I do believe that I can carry out the functions of the position if the DBOH were to ask me to do so. I do not have an interest in the permanent Health Officer position and feel very comfortable that I can work with any of the other Division Directors you may appoint. I feel very strongly that each of us as Division Directors should be available as options for the DBOH to consider during any interim period.

Bob Sack
Division Director,
Environmental Health Services Division

Cc: Washoe County District Board of Health members
Washoe County Human Resources



WASHOE COUNTY HEALTH DISTRICT

November 5, 2010

Denis Humphreys, OD
Chairman
Washoe County District Board of Health

Re: Interim District Health Officer

Dear Dr. Humphreys:

I am writing to offer my services for your consideration as Interim Health Officer. I make this offer with the caveat that I am also interested in being considered for the permanent appointment.

Although interim appointees are generally in somewhat of a care taker role during a time of transition in leadership, the timing of this particular transition is such that I believe there are some important concerns that should influence the Board's decision. Specifically, we are going into the annual budget process during a time of great fiscal uncertainty. It is likely that we will, once again, be facing critical decisions with regard to programs and services. We are also going into a legislative session that may present other challenges to us both fiscally and operationally.

In order to assure the Health District is able to continue with its important mission of protecting and enhancing the physical well being and quality of life for our citizens, I would suggest that your Interim Health Officer should have a very broad background and experience in multiple public health disciplines. As you can see from my enclosed *curriculum vitae*, I have more than 30 years of public health experience at both the State and Local level. Seventeen of those years have been in Nevada and five with the Washoe County Health District. My range of experience has included management of clinical services, chronic disease programs, health education, epidemiology, vital records, public health preparedness and laboratory services. Although I have not specifically managed emergency medical services, environmental health, or air quality programs, I have worked closely with these and do have regulatory experience that includes both promulgation as well as application of regulations. I have actively participated in at least five legislative sessions through analysis of bill drafts, preparation and delivery of testimony, and development and delivery of educational sessions for legislators.

Dr. Humphreys
Page 2

In short, I believe I could serve the District well during this Interim as well as long-term should I have the opportunity to do so. Thank you for your consideration.

Sincerely,



Randall L. Todd, DrPH
Director, Epidemiology and Public Health Preparedness

Enclosure

cc: Mr. Matt Smith, Vice Charman
George Furman, MD
Councilman Dan Gustin
Commissioner Kitty Jung
Amy J. Khan, MD, MPH
Councilwoman Julia Ratti
Washoe County Human Resources

Randall L. Todd
4610 Aberfeldy Road
Reno, Nevada 89519
775-825-44610 (Residence)
775-328-2443 (Office)

- Education:** **1979** Doctor of Public Health (DrPH)
Loma Linda University, School of Public Health
Loma Linda, California
- Master of Public Health (MPH)
Health Education
Loma Linda University, School of Public Health
- Employment:** **Sep. 2005 – Present** **Director, Division of Epidemiology and Public Health Preparedness**
Washoe County District Health Department, Reno, Nevada
This is a local health department serving a population of approximately 400,000. The Director of Epidemiology and Public Health Preparedness is responsible for the management of disease investigation staff, senior epidemiologists, the Public Health Preparedness Program, and Vital Records.
- Aug. 2000 – Sep. 2005** **State Epidemiologist**
Nevada State Health Division, Carson City, Nevada
This is a state health department serving a population of approximately 2 million. The State Epidemiologist is responsible for the management of disease investigation staff, the investigation of communicable disease outbreaks and chronic disease clusters, analysis of surveillance data, and consultation on health policy issues related to disease control.
- Aug. 1993 – July 2000** **State Epidemiologist and Chief, Bureau of Disease Control and Intervention Services.**
Nevada State Health Division, Carson City, Nevada.
This is a state health department serving a population approximately 2 million. Bureau Chief responsibilities included the management of approximately 60 public health staff with activities in:
- Sexually Transmitted Disease Investigation and Control
 - HIV/AIDS Programs
 - Tuberculosis Control
 - Immunization Programs
 - General Communicable Disease Investigation and Control
 - Tobacco Control
 - Cancer Registry
 - Breast and Cervical Cancer Prevention and Control
 - Diabetes Control

- Employment: Cont.** **Jan. 2000 – Present** **Adjunct Faculty**
University of Nevada, Reno
Responsible for teaching introductory class in Epidemiology for undergraduate students and graduate students enrolling in newly forming MPH program.
- Jan. 1989 – June 1994** **Associate Graduate Faculty.**
Central Michigan University, Mt. Pleasant, Michigan.
Responsible for teaching classes in Health Program Evaluation for graduate students enrolled in the MSA program. These classes are offered through the Extended Credit Office, which conducts classes in off campus locations throughout the country.
- Dec. 1983 - July 1993** **Director, Division of Health Promotion and Disease Prevention.**
Kent County Health Department, Grand Rapids, Michigan.
This is a local health department serving a population of just over one half million. The Division Director is responsible for the management of approximately 100 public health staff with activities in:
- Chronic Disease Risk Screening and Intervention.
 - Health Promotion Grants and Technical Assistance to Businesses.
 - General Health Education Services.
 - Substance Abuse Prevention.
 - Adult Dental Services.
 - Sexually Transmitted Disease Clinic.
 - AIDS Counseling and Testing.
 - Tuberculosis Control.
 - Immunization Clinic.
 - Epidemiology.
 - Medicaid Screening Clinic.
 - W. I. C. Clinic.
 - Community Coalitions and Councils.
- Jan. 1980 - Dec. 1983** **Director, Office of Health Promotion.**
Branch-Hillsdale-St. Joseph District Health Department, Coldwater, Michigan.
This is a local health department serving three rural counties. The Director's responsibilities included:
- Smoking Cessation Programs.
 - Nutrition and Weight Control Programs.
 - Stress Management Programs.
 - Chronic Disease Risk Reduction Programs.
 - Worksite Hypertension Control Activities.
 - Development of Periodic Health Appraisal Policy for Department Employees.
 - Media Relations.
 - Grant Writing.

- Publications:** 2009 Elliott L, Loomis D, Lottritz L, Slotnick RN, Oki E, **Todd R**. "Case-control Study of a Gastroschisis Cluster in Nevada". *Archives of Pediatrics and Adolescent Medicine*, 2009 Nov; 163(11): 1000-1006.
- 2007 Azziz-Baumgartner E, Lubner G, Schurz-Rogers H, Backer L, Belson M, Kieszak S, Caldwell K, Lee B, Jones R, **Todd R**, Rubin C. "Exposure assessment of a mercury spill in a Nevada school – 2004". *Clinical Toxicology (Philadelphia, PA)*, 2007 May; 45(4): 431.
- Thigpen MC, Thomas DM, Gloss D, Park SY, Khan AJ, Fogelman VL, Beall B, Van Beneden CA, **Todd RL**, Greene CM (2007). "Nursing Home Outbreak of Invasive Group A Streptococcal Infections Caused by 2 Distinct Strains". *Infection Control and Hospital Epidemiology*, 2007 Jan; 28(1): 68-74.
- Rubin CS, Holmes AK, Belson MG, Jones RL, Flanders WD, Kieszak SM, Osterloh J, Lubner GE, Blount BC, Barr DB, Steinberg KK, Satten GA, McGeehin MA, **Todd RL** (2007). "Investigating Childhood Leukemia in Churchill County, Nevada". *Environmental Health Perspectives*, 2007 Jan; 115(1): 151-157.
- 2005 Clements-Noll K, Ballard-Reisch DS, **Todd RL**, Jenkins T (2005). "Nevada's academic-practice collaboration: public health preparedness possibilities outside an academic center" *Public Health Reports*, 2005;120 Suppl 1:100-8.
- 2004 Steinmaus C, Lu M, **Todd R**, Smith AH (2004). "Probability estimates for the unique childhood leukemia cluster in Fallon, Nevada, and risks near other US military aviation facilities". *Environmental Health Perspectives*, 2004 May; 112(6):766-71.
- 1999 Kitsutani PT, Denton RW, Fritz CL, Murray RA, **Todd RL**, Pape WJ, Wyatt Frampton J, Young JC, Khan AS, Peters CJ, Ksiazek TG (1999). "Acute Sin Nombre hantavirus infection without pulmonary syndrome, United States". *Emerging Infectious Diseases*, Sep-Oct;5(5):701-5.
- 1996 Ravenholt O, Schmutz C, Empey D, Maxson D, Klouse P, Byrant A, **Todd R** (1996). "Salmonellosis Associated with a Thanksgiving Dinner – Nevada, 1995". *Morbidity and Mortality Weekly Report*, Nov;45(46):1016-7.
- 1995 Armstrong LR, Zaki SR, Goldoft MJ, **Todd RL**, Khan AS, Khabbaz RF, Ksiazek TG, Peters CJ (1995). "Hantavirus pulmonary syndrome associated with entering or cleaning rarely used, rodent-infested structures". *Journal of Infectious Disease*, Oct;172(4):1166.

Publications: 1990
Cont.

Mayer JP, Hawkins B, Todd R (1990). "A randomized evaluation of smoking cessation interventions for pregnant women at a WIC clinic". *American Journal of Public Health* Jan;80(1):76-8.

District Health Officer Comparisons

BOH 11/18/10
ITEM No. 129

Master Table

County	Title	MD	Salary Actual	Salary Minimum	Salary Midpoint	Salary Maximum	Population
Clackamas County, OR	Director Health Housing Health Services & Human Services	No	Unknown	\$ 114,000.00	\$ 134,000.00	\$ 154,000.00	386,143
	Program Manager - Contracted Out	No	Unknown				
Clark County, WA	Public Director, Public Health Department	No	Unknown	\$ 93,000.00	\$ 113,000.00	\$ 133,000.00	432,002
County of Monterey, CA	Health Officer	Yes	Unknown	\$ 117,000.00	\$ 142,000.00	\$ 167,000.00	
County of Monterey, CA	Director of Health Services	No	Unknown	\$ 155,000.00	\$ 183,500.00	\$ 212,000.00	410,370
County of Solano, CA	Health Officer	Yes	Unknown	\$ 130,000.00	\$ 154,000.00	\$ 178,000.00	
County of Solano, CA	Director, Health and Social Services	No	Unknown	\$ 173,000.00	\$ 192,000.00	\$ 211,000.00	407,234
	Deputy Director, H&SS - Health Officer	Yes	Unknown	\$ 175,000.00	\$ 194,000.00	\$ 213,000.00	
Lane County, OR	Director Health and Human Services	No	Unknown	\$ 65,000	\$ 81,500.00	\$ 98,000.00	351,109
	Program Manager - Public Health	Yes	Unknown	\$ 106,000.00	\$ 132,500.00	\$ 159,000.00	
Maricopa County, AZ	Director of Public Health Department of Public	Yes	Unknown	\$ 138,000.00	\$ 174,250.00	\$ 210,500.00	4,023,132
Pima County, AZ	Health Chief Medical Officer Department	Yes	Unknown	\$ 131,000.00	\$ 160,000.00	\$ 229,000.00	1,020,200
Salt Lake Valley UT	Director of Public Health Health Department	No	\$ 135,456.00	\$ 135,456.00	\$ 135,456.00	\$ 135,456.00	1,034,989
State of Nevada	State Health Officer	Yes	\$ 161,470.00	\$ 161,470.00	\$ 161,470.00	\$ 161,470.00	2,643,085
Santa Barbara County, CA	Public Health Director Public Health Department	Yes	\$ 220,000.00	\$ 220,000.00	\$ 220,000.00	\$ 220,000.00	407,057
Yolo County, CA	Director of Health Services	No	Unknown	\$ 128,000.00	\$ 142,000.00	\$ 156,000.00	199,407
\$ 136,128.40							\$ 175,828.40

Washoe County, NV District Health Officer *Yes \$ 149,073.60 \$ 114,732.80 \$ 131,903.20 \$ 149,073.60 414,820

*Not required by statute

District Health Officer Comparisons

Department Head Only		MD	Salary Actual	Salary Minimum	Salary Midpoint	Salary Maximum	Population
County	Title						
Clackamas County, OR	Director Health Housing Health Housing & Human Services	No	Unknown \$	\$ 114,000.00	\$ 134,000.00	\$ 154,000.00	386,143
Clark County, WA	Public Director, Public Health Health Department	No	Unknown \$	\$ 93,000.00	\$ 113,000.00	\$ 133,000.00	432,002
County of Monterey, CA	Director of Health Health Services	No	Unknown \$	\$ 155,000.00	\$ 183,500.00	\$ 212,000.00	410,370
County of Solano, CA	Director, Health and Health and Social Services	No	Unknown \$	\$ 173,000.00	\$ 192,000.00	\$ 211,000.00	407,234
Lane County, OR	Health Director Health and Human Services	No	Unknown \$	\$ 65,000	\$ 81,500.00	\$ 98,000.00	351,109
Maricopa County, AZ	Department of Public Health Director of Public Health	Yes	Unknown \$	\$ 138,000.00	\$ 174,250.00	\$ 210,500.00	4,023,132
Pima County, AZ	Health Chief Medical Officer Department	Yes	Unknown \$	\$ 131,000.00	\$ 180,000.00	\$ 229,000.00	1,020,200
Salt Lake Valley UT	Director of Public Health Health Department	No	\$	\$ 135,456.00	\$ 135,456.00	\$ 135,456.00	1,034,989
State of Nevada	State Health Officer	Yes	\$	\$ 161,470.00	\$ 161,470.00	\$ 161,470.00	2,643,085
Santa Barbara County, CA	Public Health Director Public Health Department	Yes	\$	\$ 220,000.00	\$ 220,000.00	\$ 220,000.00	407,057
Yolo County, CA	Health Director of Health Health Services	No	Unknown \$	\$ 128,000.00	\$ 142,000.00	\$ 156,000.00	199,407
			\$	\$ 137,629.64	\$ 156,106.91	\$ 174,584.18	

Washoe County, NV District Health Officer *Yes \$ 149,073.60 \$ 114,732.80 \$ 131,903.20 \$ 149,073.60 414,820
 District Health

*Not required by statute

District Health Officer Comparisons

Health Officer Only

County	Title	MD	Salary Actual	Salary Minimum	Salary Midpoint	Salary Maximum	Population
Clackamas County, OR	Program Manager - Health Housing & Human Services	No	Unknown				386,143
Clark County, WA	Public Health Officer Health Department	Yes	Unknown	\$ 117,000.00	\$ 142,000.00	\$ 167,000.00	432,002
County of Monterey, CA	Health Officer Health Services	Yes	Unknown	\$ 130,000.00	\$ 154,000.00	\$ 178,000.00	410,370
County of Solano, CA	Deputy Director, H&SS - Health and Social Services	Yes	Unknown	\$ 175,000.00	\$ 194,000.00	\$ 213,000.00	407,234
Lane County, OR	Health Program Manager - and Human Services Public Health	Yes	Unknown	\$ 106,000.00	\$ 132,500.00	\$ 159,000.00	351,109
				<u>\$ 132,000.00</u>	<u>\$ 155,625.00</u>	<u>\$ 179,250.00</u>	

Washoe County, NV District Health Officer *Yes \$ 149,073.60 \$ 114,732.80 \$ 131,903.20 \$ 149,073.60 414,820
 District Health

*Not required by statute

Division Manager Compensation as Percent of DHO

Job Title	Employee Name	Grade	Min.	Max.	Actual Pay
60009304 DISTRICT HEALTH OFFICER	Anderson Mary A.	M 0001	\$55.16	\$71.67	\$71.67
60015302 EIP CENTER DIRECTOR	Todd Randall L.	C DWZ	\$55.01	\$71.52	\$71.52
60000632 DIV DIRECTOR-CCHS	Brown Mary-Ann Kathleen	C DVV	\$43.85	\$57.01	\$57.01
60000630 DIV DIRECTOR-ENVIRONMENTAL SERVICES	Sack Robert Orville	C DVV	\$43.85	\$57.01	\$57.01
60000619 DIV DIR AIR QUALITY MGMT	Dick Kevin Irwin	C DTT	\$39.58	\$51.41	\$50.00

Percent of DHO Actual Pay

Job Title	Employee Name	Percent of DHO Actual Pay
DISTRICT HEALTH OFFICER	Anderson Mary A.	99.79%
EIP CENTER DIRECTOR	Todd Randall L.	79.55%
DIV DIRECTOR-CCHS	Brown Mary-Ann Kathleen	79.55%
DIV DIRECTOR-ENVIRONMENTAL SERVICES	Sack Robert Orville	69.76%
DIV DIR AIR QUALITY MGMT	Dick Kevin Irwin	

Percent of DHO Salary Maximum

Job Title	Employee Name	Percent of DHO Salary Maximum
DISTRICT HEALTH OFFICER	Anderson Mary A.	99.79%
EIP CENTER DIRECTOR	Todd Randall L.	79.55%
DIV DIRECTOR-CCHS	Brown Mary-Ann Kathleen	79.55%
DIV DIRECTOR-ENVIRONMENTAL SERVICES	Sack Robert Orville	71.73%
DIV DIR AIR QUALITY MGMT	Dick Kevin Irwin	



Washoe County, Nevada
Reno, Nevada

Washoe County Human Resources
Recruitment for

District Health Officer

Annual Salary: DOE



The Washoe County District Health Department

The Washoe County Health District was formed in 1972 by an Interlocal Agreement among Reno, Sparks and Washoe County. It is governed by a seven member policy board comprised of one elected and one citizen representative from each of the two cities and the county, and a physician appointed by the other six Board members. Unlike most other states, in Nevada local health districts have significant statutory autonomy.

The District Health Department is a dynamic and progressive organization with jurisdiction over all health matters within the Health District's boundaries. Its main offices are located in Reno. Washoe County provides a variety of support services and approximately 45% of the \$20,000,000 budget through a transfer of general fund revenues. Other Department revenues come from grants, permit fees and service charges.

The Administrative Health Services (AHS) Division provides administrative support for the Department. It also oversees Vital Statistics, Emergency Medical Services, and federal HIV/AIDS prevention funds for community-based organizations. The EMS program provides compliance oversight for the ambulance franchise agreement granted by the District Board of Health.

The Air Quality Management (AQM) Division protects air quality through planning, monitoring, permitting, public information and education, and regulation enforcement. AQM has received awards for its work, including the community's Silver Star Award, for its role in the dramatic improvement in the community's air quality in the past ten years.

The Community and Clinical Health Services (CCHS) Division provides clinic services and epidemiology for STD, TB and vaccine preventable diseases, family planning, teen and WIC clinics, WIC Marketing, and child abuse prevention, and

supports communicable disease control activities. Its chronic disease and injury prevention, and tobacco prevention programs address chronic diseases and their risk factors. CCHS collaborates with the community to assure clinical services are provided in the community.

The Environmental Health Services (EHS) Division programs include food, drinking water, solid and liquid waste, recycling, hazardous materials, underground storage tanks, institutions, and vector borne diseases (including mosquito abatement) programs. EHS works with developers, builders and the hospitality industry to assure the public's health is protected despite the community's rapid growth.

The Epi Center is the department's center for communicable disease surveillance, epidemiology and outbreak control. It includes the Public Health Preparedness Program, which works closely with communicable disease staff on disease surveillance and control, emergency preparation and response and data management. The Epi Center is the community's repository for public health data.

The Position

The District Health Officer administers a budget of \$20,000,000 and provides leadership for a staff of 200. The District Health Officer reports to the District Board of Health, and in addition to administrative duties, carries out the Board's mission and strategic plan, assures the enforcement of public health regulations, advocates for public health and facilitates collaborative efforts with the community to improve public health. The mission, vision, values, strategic plan and annual report can be viewed at: www.washoecounty.us/health. The position class specification can be viewed at: www.washoecounty.us/humanresources. This highly visible position requires responsiveness not only to the Board and Department staff, but also the public, elected officials and other community partners and stakeholders.

The Ideal Candidate

The District Board of Health seeks a motivated and competent individual with the following qualifications:

- Effective leadership and ability to communicate and implement public health vision
- Administrative and management skills and experience, with a participatory style
- Effective interpersonal and communication skills: open and candid and receptive to public and staff input
- Impeccable personal and professional integrity
- Commitment to customer service
- Ability to effectively manage multiple priorities
- Effective public health advocacy in the community, the legislature and other venues
- Responsiveness to multiple constituencies and building collaborative relationships with public and private partners
- Creativity in leveraging resources and addressing public health issues

The minimum qualifications for this position are a Master's Degree in a public health related field, MPA or MPH (MPH Preferred) and a minimum of five (5) years of progressively responsible management experience in a public health environment OR an equivalent combination of education and experience.

MD's are welcome and encouraged to apply

Compensation and Benefits

The Annual Salary Range for this position will be negotiated depending on qualifications and experience.

In addition, benefits are provided which include:

- ✓ Paid contributions to the Public Employees Retirement System
- ✓ Annual leave

- ✓ Sick leave
- ✓ Eleven paid holidays
- ✓ Medical, dental, vision and life insurance
- ✓ Longevity pay
- ✓ Deferred compensation

Additionally, there are no social security deductions (although a 4.14% deduction for Medicare is required)

The Community

Washoe County is a growing area located along the eastern slopes of the Sierra Nevada Mountains in western Nevada. The County covers an area of 6,900 square miles in the northwestern section of the state bordering California and Oregon and has a population of approximately 370,000. The County seat is the City of Reno, the second largest city in Nevada. Other communities in Washoe County are Sparks and Incline Village, at Lake Tahoe. Recreational activities abound, including skiing, fishing, sailing and hiking, all within minutes of the metropolitan area. Citizens enjoy cultural events, quality public schools, and excellent public services throughout Washoe County.

The economy is growing, housing is plentiful, and the cost of living is moderate. The largest employers in Washoe County are the Washoe County School District and Washoe Health System.

The University of Nevada, Reno is located just minutes from downtown and has 11 colleges, including both medical and nursing schools. The Truckee Meadows Community college, a two-year institution, also serves the area by offering a variety of associate degrees and certificates, and works closely with employers to develop programs specifically tailored to the Reno/Sparks job market.

The Washoe County School District consists of 61 elementary, 15 middle and 12 high schools. In addition, the area has nine private high schools and numerous vocational schools.

Anticipated Schedule

June 10, 2005	Filing Deadline at 5:00 p.m.
Week of June 13, 2005	Applications screened and top candidates identified
Week of June 20, 2005	Reference and background checks completed on top candidates
Week of June 27, 2005	Interviews of top candidates by the screening committee and the District Board of Health and possible appointment of District Health Officer subject to completing background check including fingerprinting.
August 1, 2005	Position Available

SPECIAL NOTE: Pursuant to the Nevada open meeting law, names of all applicants for this position and all application materials submitted may be made public after the filing deadline.

How To Apply

- To apply for this position, submit a Washoe County application*, resume and a letter of interest to:

Joanne Ray, Director of Human Resources
P.O. Box 11130
Reno, NV. 89520-0027

Phone: (775) 328-2089

Fax: (775) 328-6119

* Washoe County application can be obtained by contacting Human Resources at (775) 328-2081 or downloaded from the Human Resources website at www.washoecounty.us/humanresources

e-mail: jray@mail.co.washoe.nv.us

As an equal opportunity employer, Washoe County values diversity in its work force and does not discriminate on the basis of sex, race, color, age, religion, sexual orientation, disability or national origin in the activities in which it operates. For other current vacancies, call the Job Information Line at (775) 328-2091 or go to our website at www.washoecounty.us/humanresources



CLASS SPECIFICATION

Class Code: 9304
Date Est:
Last Rev: 09/95
Last Title Chg:
FLSA: Exempt

DISTRICT HEALTH OFFICER

DEFINITION

Under administrative direction, serves as the Chief Executive Officer of the Washoe County Health District; plans, organize, directs, manages and supervises Public Health programs for Washoe County; directs the enforcement of Federal, State and local health laws and regulations; directs staff in providing Public Health education programs; represents District activities, programs, and services with community organizations and other government agencies; and performs related work as required.

EXPERIENCE AND TRAINING REQUIREMENTS

Equivalent to graduation from an accredited college or university with a Master's Degree in Public Health, or a closely related field, and three years of experience in the development, analysis, and administration of public health programs and services, including experience in an administrative or supervisory position involving program development, fiscal management, and personnel management; OR an equivalent combination of training and experience.

LICENSE OR CERTIFICATE

Possession of valid Nevada license to practice medicine.

SUPERVISION EXERCISED

This is a full supervisory, management, and department head classification for the County Public Health programs and functions.

EXAMPLES OF DUTIES *(The following is used as a partial description and is not restrictive as to duties required.)*

Plan, organize, direct, coordinate and administer Public Health programs for the County.

Develop and interpret administrative policies regarding the administration of Public Health functions and activities and the enforcement of Public Health laws and regulations.

Develop and recommend Health District goals, objectives, and policies.

Prepare and administer the District's budgets, controlling fiscal expenditures and revenues.

Coordinate District programs and functions with State and Federal programs and other departments and agencies.

Hire, direct, and supervise Division Directors, administrative staff, and other employees of the District in accordance with County Personnel Rules.

Provide direction and develop polices for clinics and the control and prevention of communicable diseases through protocol development.

Plan and develop new program efforts.

Initiate appropriate epidemiological investigations of communicable disease outbreaks.

Negotiate and sign executive agreements or contracts with other government agencies and community organizations.

Develop and administer grants and contracts.

Interpret Public Health programs and policies for interested groups and the general public.

Direct the preparation, prepare, and provide reports to the District Board of Health, State Board of Health, Washoe County Manager, and other interested parties.

Serve as a liaison with those groups and agencies whose activities impact on the health needs of the Washoe County community.

Maintain contact with the press and community organizations.

Ensure that assigned personnel perform duties and responsibilities in a safe and prudent manner that does not expose them or others to unnecessary harm or risk of on-the-job injury.

JOB RELATED AND ESSENTIAL QUALIFICATIONS

Full Performance *(These may be acquired on the job and are needed to perform the work assigned.)*

Knowledge of:

Departmental/division policies and procedures.

Countywide personnel policies such as Affirmative Action, sexual harassment, discrimination, and EEO.

Washoe County Public Health Programs functions and purposes.

Community resources and other social and health agencies and functions as related to the Washoe County Health District.

Ability to:

Supervise personnel, including training, assigning, and reviewing work, administering discipline, and conducting performance evaluations.

Plan, coordinate, and direct the operations of the Public Health District to accomplish established goals and objectives and optimize efficiency.

Identify work methods and procedures that promote a safe working environment for employees and others and train staff in same.

Entry Level *(Applicants will be screened for possession of these through written, oral, performance, or other evaluation methods.)*

Knowledge of:

Program planning and development.

Principles, techniques, and practices of business and Public Health administration.

Principles of medical science and their application to County Public Health programs.

Public Health problems and issues and their relationship to the development and operations of Public Health programs and services.

Federal, State, and County laws and regulations applicable to Public Health programs and communicable disease control.

Causes, means of transmission, and method of control of communicable diseases, including sexually transmitted diseases, AIDS, and tuberculosis.

Public personnel management.

Community public health problems and issues and their relationship to the development and operations of public programs and services.

Principles and techniques of effective employee supervision, training, and development.

Research techniques and procedures.

Budget development and expenditure control.

Principles of grant administration.

Ability to:

Plan, organize, supervise, and administer the functions and programs of a County Public Health Department.

Ensure proper enforcement of Public Health statutes, laws, and regulations.

Develop, organize, analyze, and interpret statistical data.

Develop and administer a budget and control expenditures.

Evaluate work priorities, procedures, and processes to determine their effectiveness and efficiency.

Interpret and apply regulations, policies, and procedures.

Communicate effectively both orally and in writing.

Effectively represent the Public Health District in contacts with the public, community organizations, and other government agencies.

SPECIAL REQUIREMENTS

(Essential duties require the following physical skills and work environment.)

Ability to sit for extended periods. Ability to frequently stand and walk. Normal manual dexterity and eye-hand coordination. Ability to lift and move objects weighing up to 25 lbs. Corrected hearing and vision to normal range. Verbal communication ability. Ability to use office equipment, laboratory, and health related equipment. Work is performed in an office or clinic environment. Exposure to communicable diseases. Continuous contact with staff and the public.

This class specification is used for classification, recruitment and examination purposes. It is not to be considered a substitute for work performance standards.

Approved Gregory Carmichael

Date February 10, 2000

EMPLOYMENT AGREEMENT

THIS AGREEMENT, is made and entered into this 28th day of July, 2005, by and between the Washoe County District Board of Health (hereinafter "Employer"), as party of the first part, and Mary Anderson, M.D., M.P.H., (hereinafter "Employee"), as party of the second part.

WITNESSETH:

WHEREAS, Employer desires to employ the services of Mary Anderson as the Washoe County District Health Officer, as provided for in N.R.S. 439.400; and

WHEREAS, it is the desire of Employer to provide certain benefits, establish certain conditions of employment, and to set working conditions of said Employee; and

WHEREAS, Employee has agreed to apply for and receive a license to practice medicine in the State of Nevada and has agreed that she will not engage in the practice of medicine until said license is received; and

WHEREAS, Employee desires to accept employment as the Washoe County District Health Officer.

NOW, THEREFORE, in consideration of the mutual covenants herein contained, the parties agree as follows:

Section 1: Duties

Employer hereby agrees to employ Mary Anderson as Washoe County District Health Officer to perform the functions and duties set forth by law, and to perform such other legally permissible and proper duties and functions as Employer shall from time to time assign.

Section 2: Term

- A. This agreement shall be in effect for a period of one year, beginning September 15, 2005, the Employee's first day of employment as District Health Officer; provided however, that the agreement shall automatically renew for successive one year periods unless and until either Employer or Employee terminates the agreement in accordance with the terms set forth below.
- B. At any time during the term of this agreement, either Employer or Employee may terminate the agreement without cause by providing thirty (30) days written notice to the other party (unless a different period is agreed upon by both parties), as described in section 3, below.
- C. At any time during the term of this agreement, Employer may terminate this agreement, effective immediately, for cause as set forth in section 4(G), below.

Section 3: Notices

Required notices may be given by personal service on the Chairman of the Washoe County District Board of Health or Employee, or by deposit in the custody of the United States Postal Service, postage prepaid, addressed to the Chairman of the Washoe County District Board of Health or to Employee. Notice shall be deemed given as of the date of personal service or three days after the date of deposit of such written notice in the custody of the United States Postal Service, postage prepaid and addressed as specified herein.

Section 4: Salary

- A. Employer agrees to pay Employee a beginning annual salary of ONE HUNDRED THIRTY ONE THOUSAND, NINE HUNDRED THIRTEEN DOLLARS AND SIXTY CENTS (\$131,913.60) for the services rendered pursuant to this agreement. Such salary shall be payable in installments in the same manner as the salaries of employees of Washoe County are paid.
- B. Employer will adjust the annual salary of Employee by providing cost-of-living adjustments commensurate with the cost-of-living adjustments granted to unclassified management employees of Washoe County.
- C. Employer agrees to review the performance of Employee at the conclusion of the first six (6) months of employment.
- D. Employer may adjust the annual salary of Employee by providing increases based upon performance at any time during and/or after the first year of this agreement as the Employer deems appropriate.
- E. Unless terminated for cause, as described in paragraph G below, if Employer terminates the agreement by giving thirty (30) days notice pursuant to section 2 (B), Employer agrees to pay to Employee severance pay equivalent to three (3) months of Employee's annual salary. Severance pay shall be calculated from the end of the thirty (30) day notice period. Severance pay shall be in addition to any other payments for unused annual leave or other benefits that may be payable to unclassified management employees of Washoe County with service credit equal to that of Employee. The three months severance pay shall not include additional accrual of annual or sick leave benefits or incentive pay for the three months, but Employer will make a PERS contribution for the three months severance pay.
- F. If Employee terminates the agreement by giving thirty (30) days notice pursuant to section 2(B), Employer is not obligated to pay severance pay to Employee. Employee shall receive her then current salary during the thirty (30) day notice period (or any longer period as may be agreed upon).
- G. For purposes of this agreement, cause is defined as conduct which constitutes a crime (except for a misdemeanor traffic citation), or conduct which constitutes a knowing violation of law or policy governing the conduct of public officers or employees, as determined by the Employer. In such event, Employer shall give written notice of its desire to terminate Employee for cause and the effective date of the termination shall be thirty (30) days after notice is given in accordance with section 3 above. If Employee is terminated for cause, Employee shall not be entitled to severance pay.

Section 5: Benefits

- A. Employer shall be entitled to the same benefits provided for unclassified management employees of Washoe County with the same period of service credit, which are described as follows:
1. Retirement: Employer agrees to pay all contributions to the Nevada Public Employees Retirement System (PERS) on behalf of Employee.
 2. Leave:
 - a) Sick leave will be credited at the rate of one and one-fourth days for each month of full time services.
 - b) Employee will accrue vacation leave credit at the biweekly equivalent of 96 hours per year until such time as she completes three (3) years of service, at which time she will accrue 136 hours per year. Vacation credit may be accumulated from year to year, but may not exceed 240 hours. Upon termination of employment, Employee shall be paid a lump sum payment for any unused or accumulated vacation earned through the last day worked.
 - c) Overtime worked in the position of District Health Officer is accrued as straight compensatory time. The accrual of compensatory time shall be based only upon actual time worked; except that time paid for a holiday shall be considered as time worked for the purpose of computing compensatory time. Any overtime worked beyond 240 hours shall not be accumulated or recorded as compensatory time. Employee will not receive cash payment for any accumulated compensatory time under any circumstances.
 3. Career Incentive: Employee is entitled to career incentive pay, provided she has been rated standard or better in her annual performance evaluations. Employee shall receive \$100.00 per year of service up to a minimum annual payment of \$3,000 for 30 years or more of service. Eligibility for career incentive pay shall be reviewed as of June 1 and December 1 of each year with payment to be effected in equal semiannual installments payable on the first pay day of June and December.
 4. Insurance: Employer shall pay all of Employee's health insurance premiums. Employee is responsible for paying the premiums for any dependents Employee may choose to enroll for health insurance coverage.
 5. Medical License fee: Employer shall pay the cost for Employee to obtain and maintain a license to practice medicine in the State of Nevada.

- B. Employee's benefits may only be altered by formal action of the District Board of Health, taken at a properly noticed public meeting. A change in the benefits granted by Washoe County to its unclassified management employees subsequent to the date of this agreement will not result in an automatic change in the benefits to which Employee is entitled.

Section 6: No Reduction in Salary of Benefits

Employer shall not at any time during the term of this Agreement decrease the salary, compensation or other financial benefits of Employee (unless Employee is incapacitated and unable to perform the services required hereunder and has exhausted available leave), except to the degree such a decrease is made across the board for all unclassified management employees of Washoe County.

Section 7: Automobile Use

Employee shall be entitled to reimbursement for business use of her personal vehicle in accordance with the rates set by applicable law.

Section 8: Annual Evaluation

Each year, prior to the anniversary date of Employee, Employer will review and evaluate Employee's performance. The evaluation form and process to be used will be jointly developed and mutually agreed upon by Employer and Employee. Employee must contact the Chairman of the District Board of Health at least thirty (30) days prior to her anniversary date in order to schedule Employee's annual evaluation and the evaluation shall be conducted in accordance with the provisions of Nevada's Open Meeting law, including a properly noticed public meeting to discuss the professional competence of Employee.

Section 9: Dues and Subscriptions

Employer agrees to budget and to pay for the professional dues and subscriptions of Employee necessary for her Nevada medical license and for her continuation and full participation in national, regional, state, or local public health associations and organizations which are appropriate, necessary and desirable for her continued professional participation, growth, and advancement, and for the good of Employer.

Section 10: Travel and Professional Development

- A. To the extent allowed by law and as may be consistent with Washoe County's travel ordinance, Employer hereby agrees to budget for and to pay the travel and subsistence expenses of Employee for professional and official travel and meetings necessary to adequately pursue official functions and other business of Employer.


- B. To the extent allowed by law and as may be consistent with Washoe County's travel ordinance, Employer also agrees to budget and to pay for the travel and subsistence expenses of Employee for short courses, institutes, and seminars each year for her professional development for the good of the Employer.

Section 11: General Provisions

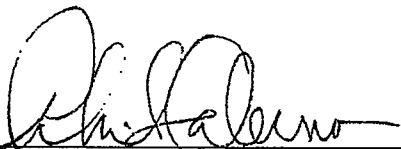
- A. The text of this agreement constitutes the entire agreement between the parties.
- B. This agreement shall be binding upon and inure to the benefit of the heirs at law and executors of Employee.
- C. If any provision, or portion thereof, contained in this agreement is held unconstitutional, invalid or unenforceable, the remainder of the agreement shall be deemed severable and remain in full force and effect.

IN WITNESS WHEREOF, the Washoe County District Board of Health has caused this agreement to be signed and executed on its behalf by its Chairman, and Mary Anderson has signed and executed this agreement, all on the day and year first above written.

WASHOE COUNTY DISTRICT BOARD
OF HEALTH



Mary Anderson
C/O Washoe County District
Health Department
P.O. Box 11130
Reno, NV. 89520

By 

Phil Salerno, Chairman
C/O Washoe County District
Health Department
P.O. Box 11130
Reno, NV. 89520



CLASS SPECIFICATION

DBOH 10/28/10 Item 12
11/18/10
Class Code: 9304
Date Est:
Last Rev: 06/2005
Last Title Chg:
FLSA: Exempt

DISTRICT HEALTH OFFICER

DEFINITION

Under administrative direction, serves as the Chief Executive Officer of the Washoe County Health District; plans, organize, directs, manages and supervises Public Health programs for Washoe County; directs the enforcement of Federal, State and local health laws and regulations; directs staff in providing Public Health education programs; represents District activities, programs, and services with community organizations and other government agencies; and performs related work as required.

SUPERVISION EXERCISED

This is a full supervisory, management, and department head classification for the County Public Health programs and functions.

EXAMPLES OF IMPORTANT AND ESSENTIAL DUTIES (*The following is used as a partial description and is not restrictive as to duties required.*)

Plan, organize, direct, coordinate and administer Public Health programs for the County.

Develop and interpret administrative policies regarding the administration of Public Health functions and activities and the enforcement of Public Health laws and regulations.

Develop and recommend Health District goals, objectives, and policies.

Prepare and administer the District's budgets, controlling fiscal expenditures and revenues.

Coordinate District programs and functions with State and Federal programs and other departments and agencies.

Hire, direct, and supervise Division Directors, administrative staff, and other employees of the District in accordance with County Personnel Rules.

Provide direction and develop polices for clinics and the control and prevention of communicable diseases through protocol development.

Plan and develop new program efforts.

Initiate appropriate epidemiological investigations of communicable disease outbreaks.

Negotiate and sign executive agreements or contracts with other government agencies and community organizations.

Develop and administer grants and contracts.

Interpret Public Health programs and policies for interested groups and the general public.

Direct the preparation, prepare, and provide reports to the District Board of Health, State Board of Health, Washoe County Manager, and other interested parties.

Serve as a liaison with those groups and agencies whose activities impact on the health needs of the Washoe County community.

Maintain contact with the press and community organizations.

Ensure that assigned personnel perform duties and responsibilities in a safe and prudent manner which does not expose them or others to unnecessary harm or risk of on-the-job injury.

JOB RELATED AND ESSENTIAL QUALIFICATIONS

FULL PERFORMANCE *(These may be acquired on the job and are needed to perform the work assigned.)*

Knowledge of:

Departmental/division policies and procedures.

County wide personnel policies such as Affirmative Action, sexual harassment, discrimination, and EEO.

Washoe County Public Health Programs, functions and purposes.

Community resources and other social and health agencies and functions as related to the Washoe County Health District.

Ability to:

Supervise personnel, including training, assigning, and reviewing work, administering discipline, and conducting performance evaluations.

Plan, coordinate, and direct the operations of the Public Health District to accomplish established goals and objectives and optimize efficiency.

Identify work methods and procedures which promote a safe working environment for employees and others and train staff in same.

ENTRY LEVEL *(Applicants will be screened for possession of these through written, oral, performance, or other evaluation methods.)*

Knowledge of:

Program planning and development.

Principles, techniques, and practices of business and Public Health administration.

Principles of medical science and their application to County Public Health programs.

Public Health problems and issues and their relationship to the development and operations of Public Health programs and services.

Federal, State and County laws, and regulations applicable to Public Health programs and communicable disease control.

Causes, means of transmission, and method of control of communicable diseases, including sexually transmitted diseases, AIDS, and tuberculosis.

Public personnel management.

Community public health problems and issues and their relationship to the development and operations of public programs and services.

Principles and techniques of effective employee supervision, training, and development.

Research techniques and procedures.
Budget development and expenditure control.

Principles of grant administration.

Ability to:

Plan, organize, supervise, and administer the functions and programs of a County Public Health Department.

Ensure proper enforcement of Public Health statutes, laws, and regulations.

Develop, organize, analyze, and interpret statistical data.

Develop and administer a budget and control expenditures.

Evaluate work priorities, procedures, and processes to determine their effectiveness and efficiency.

Interpret and apply regulations, policies, and procedures.

Communicate effectively both orally and in writing.

Effectively represent the Public Health District in contacts with the public, community organizations, and other government agencies.

Experience and Training Requirements:

Equivalent to graduation from an accredited college or university with a Master's Degree in Public Health, or a closely related field, and three years of experience in the development, analysis, and administration of public health programs and services, including experience in an administrative or supervisory position involving program development, fiscal management, and personnel management; OR an equivalent combination of training and experience.

Special Requirements:

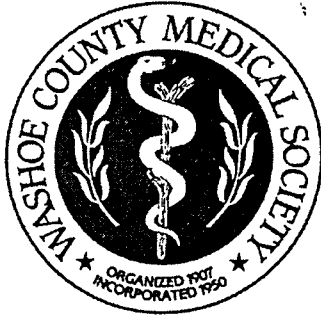
(Essential duties require the following physical skills and work environment.)

Ability to sit for extended periods. Ability to frequently stand and walk. Normal manual dexterity and eye-hand coordination. Ability to lift and move objects weighing up to 25 lbs. Corrected hearing and vision to normal range. Verbal communication ability. Ability to use office equipment, laboratory and health related equipment. Work is performed in an office or clinic environment. Exposure to communicable diseases. Continuous contact with staff and the public.

This class specification is used for classification, recruitment and examination purposes. It is not to be considered a substitute for work performance standards.

Approved Gregory Carmichael

Date February 10, 2000



OFFICERS:

Travis D. Kieckbusch, M.D., President
Tomas Hinojosa, Jr., M.D., President-Elect
Michelle K. Chu, M.D., Secretary/Treasurer
Donald D. VanDyken, M.D., Imm. Past President
George H. Hess, M.D., Delegation Chairman

Jeanie L. Catterson, Executive Director

DIRECTORS:

Gina R. Dapra, M.D.
Ross H. Golding, M.D.
Henry C. Hicks, M.D.
Deven Khosla, M.D.
Shaji O. Mathew, M.D., Ph.D.
Craig M. Sande, M.D.

October 26, 2010

Denis Humphreys, OD, Chairman
Washoe County Health District
1001 East Ninth Street
P.O. Box 11130
Reno, Nevada 89520-0027

Dear Chairman Humphreys:

The Washoe County Medical Society has received the news that Mary A. Anderson, MD, MPH, District Health Officer, has decided to move on to other opportunities. We would like to take this time to publically thank Dr. Anderson for all she has done for the citizens of Washoe County as well as the physicians of the Washoe County Medical Society. Dr. Anderson has gone above and beyond in working with us at Washoe County Medical Society and she will be greatly missed.

Part of Dr. Anderson's ability to closely work with the Washoe County Medical Society is due to the fact that she is a physician. Because of this, she has a unique ability to communicate on a level that is difficult for non-physicians to achieve. We would, therefore, ask while you are considering Dr. Anderson's replacement that someone with similar qualifications would be most suited to take her place. As physicians, we feel that this would be in the best interest of the citizens of Washoe County and the physicians of this community.


We thank you for your consideration in this matter and please feel free to contact me if you would like to discuss this further.

Thank you,

Travis D. Kieckbusch, M.D.
President, Washoe County Medical Society

TDK:jlc

● ● ● | Point of Dispensing (POD)
Exercise - 2010

October 16, 2010 

● ● ● | POD Mission

- Shots in arms or pills in mouths
- Entire population within 48 hours

- Accomplish above safely
 - Medical screening
 - Client education
 - Social distancing
 - Site and asset security



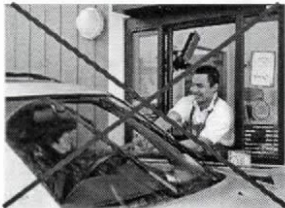
Why Flu Shots?

- o Sufficient community demand to stress POD design
- o More realism = Better test
 - Real shots
 - Real people
 - Real consequences



Why a Drive-through POD?

- o Social distancing
- o Easier logistics
 - Participants with certain disabilities
 - Participants with children
 - Participants with pets

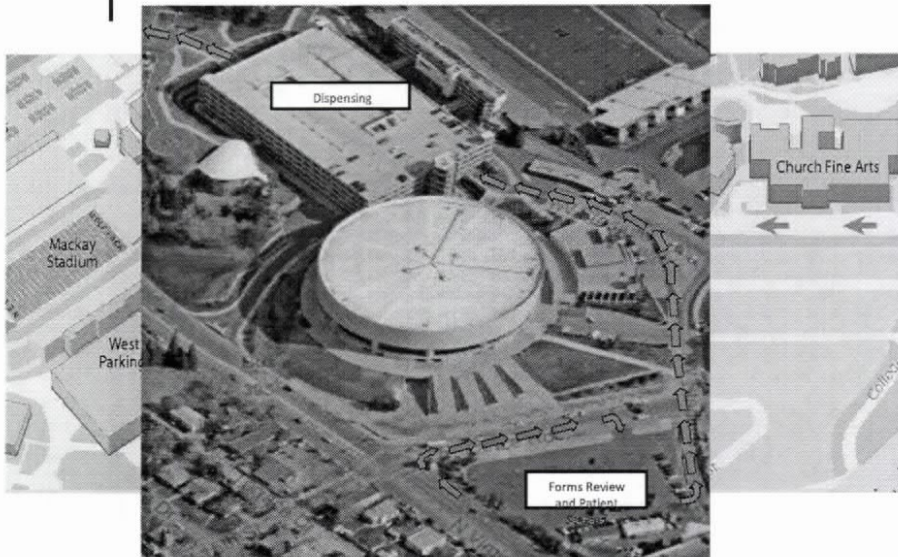




What was Learned in 2009?



Solutions 2010





Results 2010

- o 2,500 wrist bands distributed
- o 1,818 flu shots administered
- o No traffic issues
- o No air quality issues
- o WebEOC used with simulated internet outage



Results 2010

NV POD Status 2010 Display - Microsoft Internet Explorer

POD NV 2010									
NV POD Status 2010									
Date	Time	Jurisdiction	POD	Status	Doses			Re-Order	View
					Total	Last Hr	On Hand	Pending	Update
10/16/2010	13:15	Carson City	Carson City POD Drive Thru	Closed	1658	14	842		Detail
10/16/2010	12:26	Carson City	Carson POD Walk In	Closed	1361	49	1139		Detail
10/16/2010	13:08	Douglas County	Douglas POD Drive Thru	Closed	1157	277	1843		Detail
10/16/2010	07:30	State	State DOC (Primary DOC Site)	Closed	0	0	0		Detail
10/16/2010	13:25	Washoe County	UNR Drive-through	Closed	1818	459	682		Detail
TOTALS					5994	799	4506		

Page 1 of 1 Disable Refresh



Results 2010



Results 2010





Results 2010



Results 2010

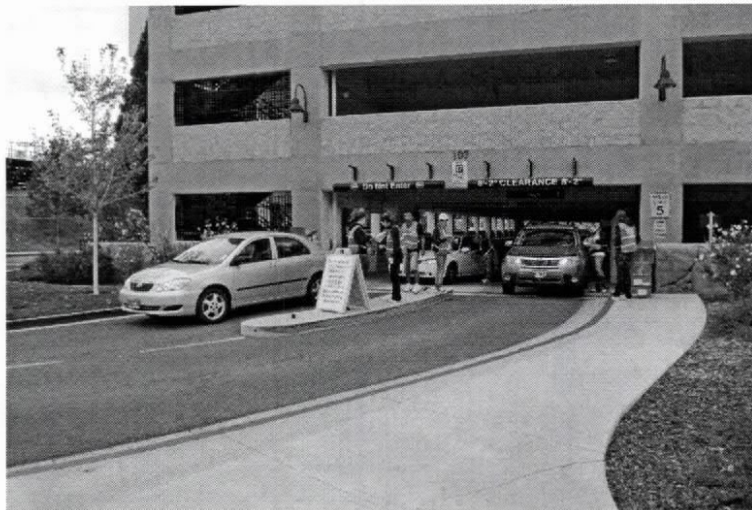




Results 2010

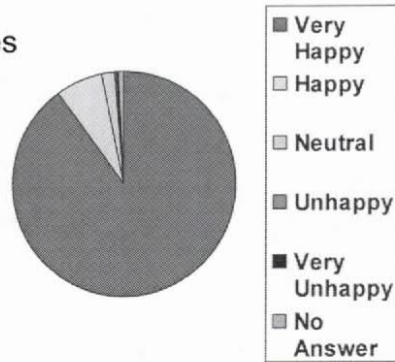


Results 2010



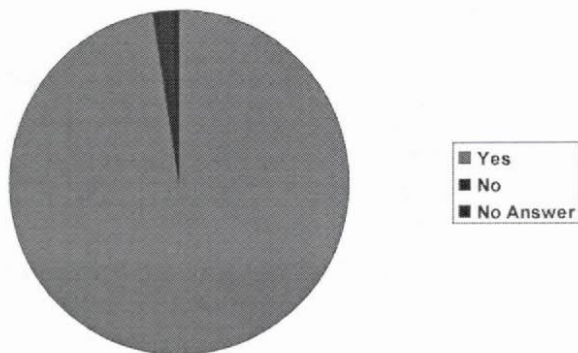
Results 2010

- o Throughput time
 - 14 minutes – 33 minutes
 - Mean 25 minutes
 - 96.7% of participants were very happy or happy



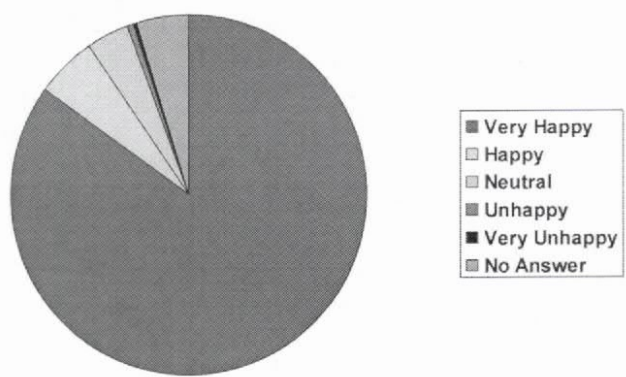
Results 2010

Was POD Location Convenient?



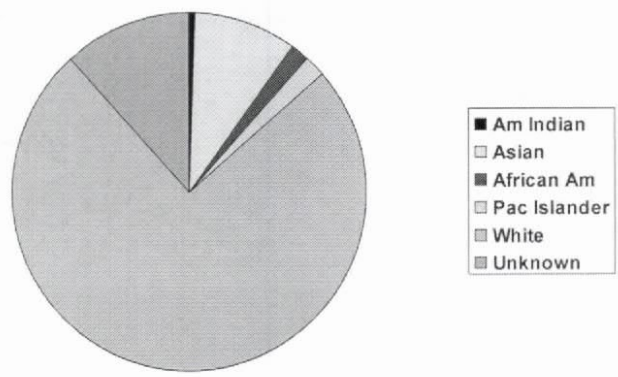
Results 2010

Wrist Band Process



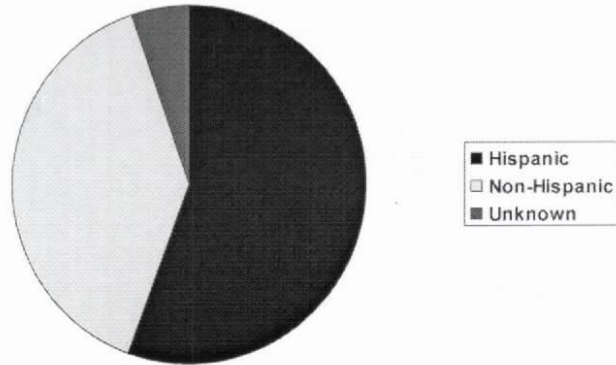
Results 2010

Race of Participants



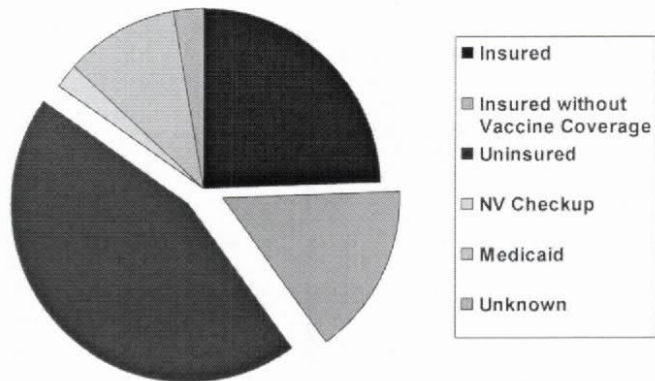
Results 2010

Ethnicity of Participants



Results 2010

Insurance Status of Participants



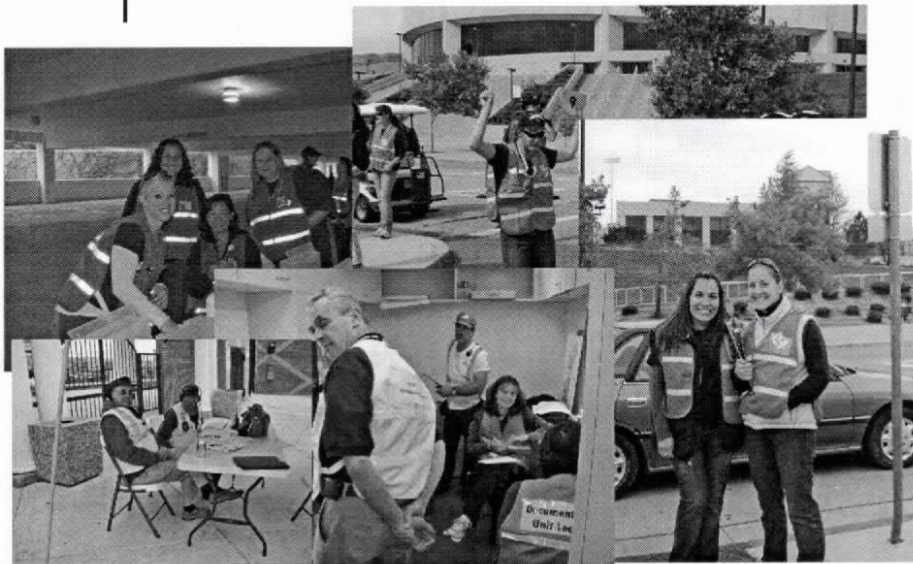


Lessons 2010

- o More space for volunteer staging
- o Better coordination for just-in-time training
- o Better directions for pulling into shot stations
- o Spread arrivals without 2-step process



Comments 2010



DRBH
 11/18/18
 Attempt #18

ITEMS THAT CURRENTLY REQUIRE BOARD OF COUNTY COMMISSIONER APPROVAL

BCC BOH CM

	BCC	BOH	CM
1 Use of Gift Cards (although we use as incentive items, often approved as part of the grant, the Comptroller deems them "gifts even though they are provided in exchange for something like participation on committees/ focus groups, compliance with isolation, etc.)		X	
2 Food Purchases (grant required)		X	
3 Budget amendments	X		
4 New positions, including established classification, new intermittent positions funded by grants			X
5 Change in position status (i.e. permanent increase/decrease to hours)			X
6 Donations (acceptance of client donations, approval of items donated to us by other entities)		X	
7 Request to go to bid for purchases of Over \$100,000, even if budget authority exists in SAP cost object	X		
8 Approve bids over \$100,000	X		
9 Purchase Orders over \$100,000	X		
10 Per recent change, change order requests for POs over \$100,000	X		
11 Subrecipient Agreement Comptroller will not establish a new Internal Order for a grant without BCC approval, although the BCC doesn't approve our grants. We usually have to present a budget amendment to establish authority for a new grant, thereby giving the Comptroller the approval.	X		
12 Non-County employee travel		X	
13 Increasing capital and travel budget authority	X		
14 Out of State disinterments	X		
15 Proclamations requested by WCHD staff			X
16 Interlocal agreements (i.e. Juvenile services, Social services) or Grant Awards (Emergency Management)	X		

ITEMS THAT CURRENTLY REQUIRE BOARD OF COUNTY COMMISSIONER APPROVAL

BCC are items to remain on BCC agenda

BOH are items to be delegated to the BOH with County audit

CM are items to be reviewed by the County Manager



DISTRICT HEALTH DEPARTMENT

November 8, 2010

MEMORANDUM

To: Members, Washoe County District Board of Health

From: Randall L. Todd, DrPH
Epidemiology and Public Health Preparedness (EPHP) Director

Subject: Report to the District Board of Health, November 2010

Communicable Disease –

Two developments should be pointed out with respect to Influenza surveillance this season. First, our network of sentinel healthcare providers has been improved with the return of a physician in Incline Village. This is good news from the standpoint of attaining better geographic coverage for influenza surveillance. Second, our regional baseline rate has increased from 2.8% to 4.1%. The baseline is the mean percentage of patient visits for Influenza-like Illness (ILI) during non-influenza weeks for the previous three seasons plus two standard deviations. We are in Region 9 along with Arizona, California, Guam, and Hawaii. Only Region 6 (Arkansas, Louisiana, New Mexico, Oklahoma, Texas) has a higher baseline at 4.9%. The lowest is Region 1 (Connecticut, Main, Massachusetts, New Hampshire, Rhode Island, Vermont) with 1.4%.

For the week ending October 30 (MMWR week 43) seven of eight participating sentinel healthcare providers reported a total of 37 patients with influenza-like illness (ILI). This represented 0.9% of the total patients seen which is below the regional baseline of 4.1%. During week 42, the U.S. percentage was 1.2% which is below the national baseline of 2.5%. On a regional level ILI visits ranged from 0.3% to 2.1%.

The recent nationwide outbreak of Salmonella enteritidis has started to generate legal requests for patient records. This seems to be an increasing trend when outbreaks gain any significant media attention. Although, our staff are not generally a party to litigation arising from these outbreaks, it can take a considerable amount of time and resources to prepare the requested records and redact confidential information. One recent request required more than 30 hours in staff time. When staff receive subpoenas to provide depositions or appear in court, the amount of time increases further.

Public Health Preparedness (PHP) Activities –

On October 26 PHP staff attended a required workshop in Carson City conducted by the Centers for Disease Control and Prevention (CDC) along with staff from the Nevada State Health Division. The workshop was on Public Information and Communication focused specifically on Mass Antibiotic Dispensing. This training is being required by CDC in order to better prepare communities to respond to media issues that will likely arise in the event that assets from the Strategic National Stockpile (SNS) are deployed. Mass Antibiotic Dispensing will present different issues as compared to mass immunization. For example, mass immunization requires that every person to receive service be present. Mass dispensing of antibiotics may entail provision of oral medications that could be delivered to household representatives. This would reduce the number of people attending a POD and improve efficiency but raises a number of ethical and logistical issues that also need to be addressed.

Orientation for 8 new members of the Medical Reserve Corps (MRC) was conducted on October 27. Each new member was provided with a packet of forms that includes the Volunteer Agreement, Code of Conduct, Standard Operating Guidelines, HIPPA forms, and Personal Preparedness/Safety Guidelines. This brings the total number of MRC volunteers to 161.

A request has been submitted to the Nevada State Health Division for a no-cost extension on H1N1 funds. Requested activities included continuation of work for an on-line appointment system for vaccinations both in the clinic and at POD events, increased epidemiological surveillance. Also requested was education targeted toward immunization providers, parents, schools, and PTAs regarding HPV, TDAP, and seasonal flu vaccine.



Randall L. Todd, DrPH, Epidemiology and Public Health Preparedness Director




WASHOE COUNTY HEALTH DISTRICT

AIR QUALITY MANAGEMENT DIVISION



Public Health
Prevent. Promote. Protect.

Date: November 18, 2010

To: District Board of Health 

From: Kevin Dick, Director, Air Quality Management

Re: Monthly Report for Air Quality Management

Agenda Item: 22.D.

The enclosed Air Quality Management Division Report is for the month of October, 2010 and includes the following sections:

Air Quality
Monitoring Activity
Planning Activity
Permitting Activity
Compliance/Inspection Activity
Enforcement Activity

DBOH AGENDA ITEM # 22.D.

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Director's Report October 2010

Climate Protection Milestone

We recently received word from ICLEI – Local Governments for Sustainability that they have recognized Washoe County's achievement of "Milestone One" of their Climate Protection Campaign. This first milestone was accomplished through work led by my predecessor, Andrew Goodrich and Yann Ling-Barnes of the Air Quality Management Division to conduct a greenhouse gas emissions analysis for the County. This greenhouse gas inventory identified and quantified the global warming pollution produced by both government operations and the community at large.

With this milestone accomplished, the Air Quality Management Division will now provide support to the County Green Team to assist in establishing a County greenhouse gas reduction target and developing a climate action plan which will identify the policies, programs and projects the County will use to achieve the reduction targets.

Reducing greenhouse gas emissions from combustion sources can provide direct air quality benefits from the reduction of other associated criteria and hazardous air pollutants. However, taking action to reduce greenhouse gas emissions is perhaps more important from other public health perspectives due to concerns of potential injuries and fatalities related to severe weather events and heat waves, infectious diseases related to expansion of the tropical disease zone, allergic symptoms related to increased allergen production, and stresses from drought and disruption of food production. I am proud that Washoe County is taking action to address climate change, and the Air Quality Management Division will continue to contribute to these efforts.

Kevin Dick, Director

AIR QUALITY COMPARISON FOR OCTOBER

Air Quality Index Range		# OF DAYS OCTOBER 2010	# OF DAYS OCTOBER 2009
GOOD	0 to 50	29	29
MODERATE	51 to 100	2	2
UNHEALTHY FOR SENSITIVE GROUPS	101 to 150	0	0
UNHEALTHY	151 to 200	0	0
VERY UNHEALTHY	201 to 300	0	0
TOTAL		31	31

HIGHEST AQI NUMBER BY POLLUTANT

Air Quality

POLLUTANT	OCT 2010	YTD for 2010	OCT 2009	Highest for 2009
CARBON MONOXIDE (CO)	16	29	27	37
OZONE 8 hour (O3)	54	104	42	100
PARTICULATES (PM _{2.5})	49	112	29	149
PARTICULATES (PM ₁₀)	41	83	59	94

For the month of October, there were no exceedances of Carbon Monoxide, or Particulate Matter standards at any of the monitoring stations. The highest Air Quality Index (AQI) value reported for the month of October was fifty-four (54) for 8-hour Ozone. There were twenty-nine (29) days in the month of October where the Air Quality was in the good range, and two (2) days the Air Quality fell into the moderate range.

Duane Sikorski, Air Quality Supervisor

Monitoring Activity

Daily monitoring operational, quality assurance and data submission activities continued throughout the month along with continued training of the new AQ Specialist I. Implementation of the NCore monitoring site continues moving forward towards its January 1, 2011 start-up date.

New carbon monoxide and ozone monitors have been installed at a number of sites replacing equipment that was 15 to 20 years old and additionally, new PM₁₀ and PM_{2.5} continuous samplers have been installed allowing for the expansion of PM_{2.5} sampling to the Sparks site in addition to the Reno 3 location.

The agency's final draft newly revised monitoring Quality Assurance Project Plan (QAPP) was submitted to EPA on October 28th. The QAPP and eight (8) of the nineteen (19) Standard Operating Procedures are in the internal final review process and are expected to be delivered to EPA by the end of the year.

Duane Sikorski, Air Quality Supervisor

Planning Activity

An information only presentation was made to your Board summarizing the results of the 2009-2010 Residential Wood Combustion (RWC) Survey. November 1st started the 2010-2011 RWC Green/Yellow/Red notification program which runs through the end of February.

The delayed announcement (originally scheduled for October 21st and then by November 1st) of the new 8-hour ozone NAAQS of ≤ 70 but ≥ 60 ppb (currently 75 ppb) is scheduled to be announced by the end of the year.

With the Planning Section as the lead, the AQMD is in the process of revising its Emergency Episode Policies given the forthcoming reductions of the NAAQS.

Duane Sikorski, Air Quality Supervisor

Permitting Activity

TYPE OF PERMIT	2010		2009	
	OCTOBER	YTD	OCTOBER	ANNUAL TOTAL
Renewal of Existing Air Permits	73	1103	102	1320
New Authorities to Construct	3	30	9	80
Dust Control Permits	3 (94 acres)	108 (2400 acres)	11 (138 acres)	128 (1498 acres)
Wood Stove Certificates	17	208	22	170
WS Dealers Affidavit of Sale	16 (4 replacements)	58 (31 replacements)	23 (11 replacements)	250 (145 replacements)
WS Notice of Exemptions	737 (0 stoves removed)	4843 (33 stoves removed)	668 (3 stoves removed)	5358 (145 stoves removed)
Asbestos Assessments and Asbestos Removal Notifications (NESHAP)	70	853	93	1003

Compliance &
Inspection Activity

Staff reviewed forty (40) sets of plans submitted to the Reno, Sparks or Washoe County Building Departments to assure the activities complied with Air Quality requirements.

Staff conducted forty-seven (47) stationary source renewal inspections and fifty-four (54) gas station inspections in October. Staff also conducted inspections on asbestos removal and construction/dust projects.

Permitting &
Enforcement Activity

Staff met with Mr. George Ochs (Washoe County School District Science Fair Coordinator) on October 20th to discuss the possibility of using the air pollution fine money to support the 2011 science fair awards program. As with the past few years, about \$6,000 will be set aside for student monetary awards as well as other support materials. Many of the local winners have gone on to successfully compete in national and international events. Staff has also been a judge at the fair for past several years.

Abatement is still going on at the old motel adjacent to the Atlantis Hotel & Casino. No problems have been noted since the abatement began the first of October. No other major asbestos abatement projects are in progress at this time.

Finally, the dust season appears to be officially over after the recent October rains. No Notices of Violation were issued the entire "dust season" for visible emissions, but seven Notices were issued for expired or no dust control permits at various "abandoned" properties. Staff has successfully contacted the new owners in all cases for dust permit renewal purposes.

Noel Bonderson, Air Quality Supervisor

Enforcement Activity

COMPLAINTS	2010*		2009		
	OCTOBER	YTD	OCTOBER	YTD	Annual Total
Asbestos	0	18	2	19	21
Burning/Smoke	0	6	2	9	16
Dust	1	50	8	121	134
Gas Station/Oxy Fuel	0	0	0	0	0
Miscellaneous	0	4	0	6	7
Odor	3	17	0	26	30
Painting (spray painting)	1	10	1	6	6
Permit Violation	2	11	4	11	12
TOTAL	7	116	17	198	226
NOV'S	OCTOBER	YTD	OCTOBER	YTD	Annual Total
Warnings	0	4	3	12	13
Citations	0	9	0	9	10
TOTAL	0	13	3	21	23

* Discrepancies in totals between Monthly Reports can occur because of data entry delays.

Notices of Violation (NOVs):

There were no Notice of Violations (NOVs) issued in October 2010.



Washoe County Health District



DBOH AGENDA ITEM NO. 22.F

Public Health
Prevent Promote Protect

November 9, 2010

TO: Members, District Board of Health
FROM: Mary A. Anderson, MD, MPH, FACPM
SUBJECT: District Health Officer's Report

NACCHO Model Practice Submission

Dr. Randall Todd and I teamed up to provide a submission to the National Association of County and City Health Officials (NACCHO) for consideration as a "Model Practice." The title of the submission is "Reducing Wait Times for Public Participating in Points of Dispensing." Our use of colored wrist bands for time slot assignments as a means of mitigating the problem of long lines and extended wait times is a simple, low-tech way of achieving crowd control. A side benefit of the wrist band use was found to be a quick backup method for inventory control. By knowing the number of wristbands that were distributed and then counting the number that came back to us during the POD event time slots, we were able to calculate a "no-show" rate which enabled us to determine the number of remaining doses of vaccine on hand. This, in turn, provided a method for us to determine if there was sufficient vaccine to accommodate walk-in traffic.

The Health District has been recognized in the past for Model Practices—notably, in 2007 when we were the only health department to receive three awards in one year. If our submission is chosen, the Health District will be invited to present our Model Practice at the NACCHO meeting which will be held in Hartford, CT from July 20-22, 2011.

Epidemiology & Prevention of Vaccine Preventable Diseases

Last week I attended the above-named conference presented by the Nevada Immunization Coalition, the California Department of Public Health Immunization Branch, and the Centers for Disease Control and Prevention National Center for Immunization and Respiratory Diseases. The increasing complexity of immunization schedules, the variety of similar—but not the same—products produced by competing pharmaceutical firms, and the logistics of ordering, shipping, and storing vaccine made this conference a "must-attend" event for persons involved with immunization programs. Our immunization staff was very enthusiastic about the quality of the sessions as the CDC speakers were topnotch. I gained a renewed appreciation for the tremendous effort required to administer an immunization program. I extend my congratulations to Staff for their ongoing dedication to staying current on immunization practices and being leaders in the effort to improve our immunization rates in Washoe County.

Mary A. Anderson, MD, MPH, FACPM

Mary A. Anderson, MD, MPH, FACPM

District Health Officer

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DBOH AGENDA ITEM # 22.F

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