WASHOE COUNTY DISTRICT BOARD OF HEALTH

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

ANNOTATED AGENDA

Meeting of the
DISTRICT BOARD OF HEALTH
Building B
South Auditorium
1001 East Ninth Street
Reno, Nevada
February 24, 2011
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 Meeting February 24, 2011 (action)	APPROVED
	5.	Approval/Additions/Deletions to the Minutes of the January 27, 2011 Meeting (action)	APPROVED

<u>YEARS-OF-SERVICE</u>
BETSY HAMBLETON – 5 YEARS
ISABEL CHAIDEZ – 15 YEARS
MARIA PAREDES-SEGURA – 15 YEARS

PROCLAMATION - MARCH 24, 2011 - WORLD TB DAY IN WASHOE COUNTY"

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

- Recommendation to Uphold Citations Unappealed to the Air Pollution Control Hearing Board
 - a. Clark and Sullivan Case No. 1061, NOV No. 4334 (action)
- Recommendations of Cases Appealed to the Air Pollution Control Hearing BoardNo 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
 - Ratification of the Interlocal Contract between the State of Nevada, Department of Conservation and Natural Resources, Division of Environmental Protection and the Washoe County Health District in the Total Amount of \$150,000 (not exceeding \$75,000 the first year) in Support of the Hazardous Materials Grant Program, for the Period of July 1, 2011 through June 30, 2013 (action)
 - 2. Approval of Notice of Subgrant Award from the Nevada State Health Division in the amount of \$83,582 (with \$8,358 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 February 21, 2011 to August 9, 2011; and Approval of Amendments Totaling an Increase of \$83,582 in Both Revenue and Expense to the FY 11 CDC PHP Federal Grant Program (2008 Carry Forward), IO 10713 (action)
 - Approval of Notice of Subgrant Award from the Nevada State Health Division in the Amount of \$86,162 in Support of the Epidemiology and Laboratory Capacity (ELC) Grant Program for the Period of January 1, 2011 through December 31, 2011; and Approval of Budget Adjustments with a Net Effect of \$0 in the FY 11 ELC-Grant Program (IO TBA) (action)
 - 4. Approval of Amendments Totaling an Increase of \$28,225 in Both Revenue and Expense to the FY National Association of County and City Health Officials (NACCHO) ACHIEVE Program Grant Budget (IO 10846); and Approval of Payment for "Sponsor an Indicator" in the Amount of \$1,000 for the Truckee Meadows Tomorrow (Grant Funded) (action)

UPHELD, \$1,000 FINE LEVIED

APPROVED

APPROVED

APPROVED

APPROVED

- Approval of Amendments Totaling an Increase of \$11,281 in Both Revenue and Expense to the FY 11 Centers for Disease Control and Prevention (CDC) Public Health Preparedness and Response for Bioterrorism Pan Flu Carry Forward Federal grant Program. IO 10738 (action)
- Approval of Amendments Totaling an Increase of \$22,137 in Both Revenue and Expense to the FY 11 Centers for Disease control and Prevention (CDC) Public Health Preparedness and response for Bioterrorism Base Carry Forward Federal Grant Program, IO 10737 (action)
- 8. Air Pollution Control Hearing Board Cases Appealed to the District Board of Health A. No Cases This Month
- Regional Emergency Medical Services Authority CONTINUED TO THE MARCH MEETING
 Review and Acceptance of the Operations and Financial Report for January 2011 (action)

B. Update of REMSA's Community Activities Since January 2011

 Review and Acceptance of the Monthly Public Health Fund Revenue and Expenditure for January 2011 (action)

11. Update – Fiscal Year 12 Budget

12. Public Hearing - Washoe County Health District Health Department Fee Schedule

- A. Presentation and Discussion of Proposed Revisions to the Washoe County Health District's Fee Schedule, specific to the Administrative Health Services Division, Community and Clinical Health Services Division, Air Quality Management Division, in accordance with the Washoe County District Board of Health Regulations Governing Air Quality Management, and the Environmental Health Services Division, in accordance with the Washoe County District Board of Health Regulations Governing Food Establishments; Washoe County District Board of Health Regulations Governing Sewage, Wastewater, and Sanitation; Washoe County District Board of Health Regulations Governing the Prevention of Vector-Borne Diseases; Washoe County District Board of Health Regulations Governing Liquid Waste; Washoe County District Board of Health Regulations Governing Invasive Body Decoration Establishments; Washoe County District Board of Health Regulations Governing Public Bathing Places; Washoe County District Board of Health Regulations Governing Public Spas: Washoe County District Board of Health Regulations Governing Mobile Home and Recreational Vehicle Parks; Washoe County District Board of Health Regulations Governing Solid Waste Management; and the Washoe County District Board of Health Regulations Governing Well Construction
- B. Recommendation for Approval and Adoption of the Revisions to the Washoe County Fee Schedule (action)
- 13. Public Hearing Washoe County District Board of Health Regulations Governing Solid Waste Management
 - A. Presentation of Amendments to Section 010.696 (Source Separated Recyclable Material); Section 010.768 (Waste Tire Generator [WTG]); Section 010.772 (Waste Tire Hauler [WTH]); and Section 010.776 (Waste Tire Management Facility [WTMF]);
 - B. Presentation of Addition of Sections 085.000 085.600, Inclusive (Disposal of Waste Tires);
 - C. Approval and Adoption of Deletions, Amendments and Additions to the Washoe County District Board of Health Regulations Governing Solid Waste Management (action)
- 14. Discussion and Possible Direction to Staff Regarding Conducting an Outside Performance Audit of the District Health Department (action)

15. Washoe County Health District – 2011 Legislative Bill Tracking with Possible Direction to Staff (action)

APPROVED

APPROVED

CONTINUED

ACCEPTED

PRESENTED

PRESENTED

CONTINUED WITH DIRECTION TO STAFF

PRESENTED

PRESENTED
APPROVED AND ADOPTED

DISCUSSED

ACCEPTED

COMMITTEES REAPPOINTED Presentation of Existing District Board of Health Board of Health Committees with Appointments or Re-Appointments to the Committees (action) **PRESENTED** 17. Report on the Food Borne Illness Outbreak Report Card CONTINUED Volunteer Agreement for Medical Individuals of the Medical Reserve Corps and Provision of 18. Liability Coverage (MRC) Status of Accreditation Process for the State and Local Health Departments 19. PRESENTED Staff Reports and Program Updates 20. A. Director, Epidemiology and Public Health Preparedness - Communicable Disease; Public Health Preparedness (PHP) Activities B. Director, Community and Clinical Health Services - School-Based Influenza Clinic; Silver Syringe Award; Unintentional Injury Prevention Activities C. Director, Environmental Health Services – City of Reno Business License Restructure D. Director, Air Quality Management - Monthly Report of Air Quality Activities, Permitting Activities, Compliance/Inspection Activity, and Enforcement Activity E. Administrative Health Services Officer - No Report This Month F. District Health Officer - Interim Health Officer's Plan Report on Progress to Date **COMMENTS PRESENTED** 21. Board Comment - Limited to Announcements or Issues for Future Agendas

22.

Adjournment (action)

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

Disabled members of the public who require special accommodations or assistance at the meeting are requested to notify Administrative Health Services in writing at the Washoe County Health District, PO Box 11130 Reno, NV 89520-0027 or by calling (775) 328-2416.

ADJOURNED

WASHOE COUNTY DISTRICT BOARD OF HEALTH

Matt Smith, Chairman
Amy J Khan, MD, MPH, Vice Chairman
George Furman, MD
Councilman Dan Gustin
Denis Humphreys, OD
Commissioner Kitty Jung
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1:00 PM	1.	Call to Order, Pledge of Allegiance Led by Invitation	Mr. Smith
	2.	Roll Call	Ms. Smith
	3.	Public Comment (3 minute time limit per person)	Mr. Smith
	4.	Approval/Deletions to the Agenda for the Meeting February 24, 2011 (action)	Mr. Smith
	5.	Approval/Additions/Deletions to the Minutes of the January 27, 2011 Meeting (action)	Mr. Smith

6. Recognitions and Proclamations

A. Years-of-Service

- 1. Nicole Alberti EPHP 5 Years
- 2. Betsy Hambleton EPHP 5 Years
- 3. Maria Chaidez CCHS 15 Years
- 4. Maria Paredes-Segura CCHS 15 Years
- 5. Lorena Solario CCHS 15 Years
- B. Presentation with Acceptance and Adoption of the Proclamation Proclaiming March 24, 2011 as "World TB Day in Washoe County" (action)

7. Consent Agenda

Mr. Smith

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

- Recommendation to Uphold Citations Unappealed to the Air Pollution Control Hearing Board
 - a. Clark and Sullivan Case No. 1061, NOV No. 4334 (action)
- 2. Recommendations of Cases Appealed to the Air Pollution Control Hearing Board
 - a. No Cases This Month

Mr. Bonderson

Mr. Coulter

Mr. Bonderson

- 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
 - Ratification of the Interlocal Contract between the State of Nevada, Department of Conservation and Natural Resources, Division of Environmental Protection and the Washoe County Health District in the Total Amount of \$150,000 (not exceeding \$75,000 the first year) in Support of the Hazardous Materials Grant Program, for the Period of July 1, 2011 through June 30, 2013 (action)
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Mr. Smith

- Approval of Amendments Totaling an Increase of \$11,281 in Both Revenue and Expense to the FY 11 Centers for Disease Control and Prevention (CDC) Public Health Preparedness and Response for Bioterrorism Pan Flu Carry Forward Federal grant Program, IO 10738 (action)
- Approval of Amendments Totaling an Increase of \$22,137 in Both Revenue and Expense to the FY 11 Centers for Disease control and Prevention (CDC) Public Health Preparedness and response for Bioterrorism Base Carry Forward Federal Grant Program, IO 10737 (action)
- Air Pollution Control Hearing Board Cases Appealed to the District Board of Health
 A. No Cases This Month

Mr. Bonderson

Mr. Smith

- 9. Regional Emergency Medical Services Authority CONTINUED TO THE MARCH MEETING
 - A. Review and Acceptance of the Operations and Financial Report for January 2011 (action)
 - B. Update of REMSA's Community Activities Since January 2011
- 10. Review and Acceptance of the Monthly Public Health Fund Revenue and Expenditure for January 2011 (action)

Ms. Coulombe

11. Update – Fiscal Year 12 Budget

Ms. Brown Ms. Coulombe

12. Public Hearing - Washoe County Health District Health Department Fee Schedule

Ms. Cooke

- A. Presentation and Discussion of Proposed Revisions to the Washoe County Health District's Fee Schedule, specific to the Administrative Health Services Division, Community and Clinical Health Services Division, Air Quality Management Division, in accordance with the Washoe County District Board of Health Regulations Governing Air Quality Management, and the Environmental Health Services Division, in accordance with the Washoe County District Board of Health Regulations Governing Food Establishments; Washoe County District Board of Health Regulations Governing Sewage, Wastewater, and Sanitation; Washoe County District Board of Health Regulations Governing the Prevention of Vector-Borne Diseases; Washoe County District Board of Health Regulations Governing Liquid Waste; Washoe County District Board of Health Regulations Governing Invasive Body Decoration Establishments; Washoe County District Board of Health Regulations Governing Public Bathing Places; Washoe County District Board of Health Regulations Governing Public Spas; Washoe County District Board of Health Regulations Governing Mobile Home and Recreational Vehicle Parks; Washoe County District Board of Health Regulations Governing Solid Waste Management; and the Washoe County District Board of Health Regulations Governing Well Construction
- B. Recommendation for Approval and Adoption of the Revisions to the Washoe County Fee Schedule (action)
- Public Hearing Washoe County District Board of Health Regulations Governing Solid Waste Management

Ms. Rucker

- A. Presentation of Amendments to Section 010.696 (Source Separated Recyclable Material); Section 010.768 (Waste Tire Generator [WTG]); Section 010.772 (Waste Tire Hauler [WTH]); and Section 010.776 (Waste Tire Management Facility [WTMF]);
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- C. Approval and Adoption of Deletions, Amendments and Additions to the Washoe County District Board of Health Regulations Governing Solid Waste Management (action)
- Discussion and Possible Direction to Staff Regarding Conducting an Outside Performance Audit of the District Health Department (action)

Mr. Smith

15.	Washoe County Health District 2011 Legislative Bill Tracking with Possible Direction to Staff (action)	Ms. Brown Ms. Hadayia
16.	Presentation of Existing District Board of Health Board of Health Committees with Appointments or Re-Appointments to the Committees (action)	Mr. Smith
17.	Report on the Food Borne Illness Outbreak Report Card	Dr. Todd
18.	Volunteer Agreement for Medical Individuals of the Medical Reserve Corps and Provision of Liability Coverage (MRC)	Ms. Brown
19.	Status of Accreditation Process for the State and Local Health Departments	Ms. Brown
20.	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 – School-Based Influenza Clinic; Silver Syringe Award; Unintentional Injury Prevention Activities C. Director, Environmental Health Services – City of Reno Business License Restructure D. Director, Air Quality Management - Monthly Report of Air Quality Activities, Permitting Activities, Compliance/Inspection Activity, and Enforcement Activity E. Administrative Health Services Officer – No Report This Month F. District Health Officer – Interim Health Officer's Plan Report on Progress to Date	Dr. Todd Mr. Kutz Mr. Sack Mr. Dick Ms. Coulombe Ms. Brown
21.	Board Comment – Limited to Announcements or Issues for Future Agendas	Mr. Smith
22.	Adjournment (action)	Mr. Smith

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

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WASHOE COUNTY DISTRICT BOARD OF HEALTH MEETING February 24, 2011

PRESENT: Mr. Matt Smith, Chairman; Amy Khan, MD, Vice Chairman (arrived at 1:10 pm);

George Furman, MD; Denis Humphreys, OD; and Councilwoman Julia Ratti

ABSENT: Councilman Dan Gustin and Commissioner Kitty Jung

STAFF: Mary-Ann Brown, Interim District Health Officer; Eileen Coulombe, Administrative

Health Services Officer; Bob Sack, Director, Environmental Health Services; Dr. Randall Todd, Director, Epidemiology and Public Health Preparedness; Kevin Dick, Director, Air Quality Management; Mr. Steve Kutz, RN, MPH, Acting Director, Community and Clinical Health Services; Patsy Buxton, Fiscal Compliance Officer; Lori Cooke, Fiscal Compliance Officer; Jeanne Rucker, Environmental Health Specialist Supervisor; Noel Bonderson, Air Quality Management Supervisor; Steve Fisher, Department Computer Application Specialist; Curtis Splan, Department Computer Application Specialist; Phil Ulibarri, Public Information Officer; Peg Caldwell, RN; Jim English, Senior Environmental Health Specialist; Isabel Chaidez, Clinical Health Aide; Maria Paredes-Segura, Office Assistant; Betsy Hambleton, Medical Reserve Corps Program Coordinator; Nick Florey, Environmental Health Specialist; Janet Smith, Recording Secretary; and Leslie Admirand, Deputy District

Attorney

At 1:05 pm, Chairman Smith called the Washoe County District Board of Health Meeting to order, followed by the Pledge of Allegiance led by Councilwoman Julia Ratti, member of the District Board of Health.

ROLL CALL

Roll call was taken and a quorum noted. Mrs. Janet Smith, Recording Secretary, advised that Councilman Gustin and Commissioner Jung are excused.

PUBLIC COMMENT

There was no public comment presented.

APPROVAL/ DELETIONS - AGENDA - FEBRUARY 24, 2011

Chairman Smith called for any deletions or additions to the agenda.

MOTION: Ms. Ratti moved, seconded by Dr. Humphreys, that the agenda of the

District Board of Health February 28, 2011 meeting be approved as

presented.

Motion carried unanimously.

<u>APPROVAL/ADDITONS/CORRECTIONS - MINUTES - JANUARY 27, 2011</u>

Chairman Smith called for any additions or corrections to the minutes of the January 24, 2011 meeting of the District Board of Health.

MOTION: Ms. Ratti moved, seconded by Dr. Furman, that the minutes of the

District Board of Health January 27, 2011 meeting, be approved as

received.

Motion carried unanimously.

RECOGNITIONS

Chairman Smith and Ms. Mary-Ann Brown, Interim District Health Officer, presented Certificates of Recognition to Ms. Betsy Hambleton for <u>5 Years-of-Service</u>; Ms. Isabel Chaidez for <u>15 Years-of-Service</u>; and Ms. Maria Paredes –Segura for <u>15 Years-of-Service</u>.

PRESENTATION - ACCEPTANCE - ADOPTION - PROCLAMATION - MARCH 24, 2011 - 'WORLD TB DAY IN WASHOE COUNTY'

Ms. Brown

Read a Proclamation in full into the record, advising that Staff recommends approval and adoption of the Proclamation (a copy of which was placed in file for the record), proclaiming Thursday, March 24, 2011, as 'World TB Day in Washoe County'.

MOTION: Dr. Humphreys moved, seconded by Ms. Ratti, that the Proclamation,

proclaiming March 24, 2011, as 'World TB Day in Washoe County', be

approved and adopted as presented.

Motion carried unanimously.

CONSENT AGENDA - AIR QUALITY MANAGEMENT CASE - CLARK & SULLIVAN -UNAPPEALED NOTICE OV VIOLATION

Staff advised that Citation No. 4334, Case No. 1061 was issued to CLARK & SULLLIVAN on January 11, 2011, for the demolition of four (4) houses located at 1127, 1133, 1137, and 1147 Evans Avenue without filing the required Federal Environmental Protection Agency (EPA) National Emissions Standards for Hazardous Air Pollutants (NESHAP) forms with the Air Quality Management Division, in violation of Section 030.105 (National Emissions Standards for Hazardous Air Pollutants – NESHAP) of the Washoe County District Board of Health Regulations Governing Air Quality Management. Staff advised that Clark & Sullivan were advised of the right to appeal; however, no appeal was filed; that Staff recommends Citation No. 4334, Case No. 1061 be upheld and a fine in the amount of \$1,000 be levied as a negotiated settlement for a major violation.

MOTION: Dr. Humphreys moved, seconded by Dr. Khan, that Citation No. 4334, Case No. 1061 (Clark & Sullivan), be upheld and a fine in the amount of \$1,000 be levied as a negotiated settlement for a major violation. Motion carried unanimously.

CONSENT AGENDA – BUDGET AMENDMENTS/INTERLOCAL AGREEMENT

The Board was advised that Staff recommends ratification of the Interlocal Contract between the State of Nevada, Department of Conservation and Natural Resources, Division of Environmental Protection (NDEP) and the Washoe County Health District in the total amount of \$150,000 (not exceeding \$75,000 the first year), in support of the Hazardous Materials Grant Program for the period of July 1, 2011 through June 30, 2013.

The Board was advised that Staff recommends approval of Notice of Subgrant Award from the Nevada State Health Division in the amount of \$83,582 (with \$8,358 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 February 21, 2011 to August 9, 2011; and approval of amendments totaling an increase of \$83,582 in both revenue and expense to the FY 11 CDC PHP Federal Grant Program (2008 Carry Forward), IO 10713.

The Board was advised that Staff recommends approval of Notice of Subgrant Award from the Nevada State Health Division in the amount of \$86,161 in support of the Epidemiology and Laboratory Capacity (ELC) Grant Program for the period of January 1, 2011 through December 31, 2011; and approval of budget amendments with a net effect of \$0 in the FY 11 ELC-Grant Program (IO-TBA).

The Board was advised that Staff recommends approval of amendments totaling an increase of \$28,225 in both revenue and expense to the FY 11 National Association of County and City Health Officials (NACCHO) ACHIEVE Program Grant budget (IO 10846); and approval of payment for "Sponsor an Indicator" in the amount of \$1,000 for the Truckee Meadows Tomorrow (grant-funded).

The Board was advised that Staff recommends approval of amendments totaling an increase of \$11,281 in both revenue and expense to the FY 11 Centers for Disease Control and Prevention (CDC) Public Health Preparedness and Response for Bioterrorism Pan Flu Carry Forward Federal Grant Program (IO 10738).

The Board was advised that Staff recommends approval of amendments totaling an increase of \$22,137 in both revenue and expense to the FY 11 Centers for Disease Control and Prevention (CDC) Public Health Preparedness and Response for Bioterrorism Base Carry Forward Federal Grant Program, IO 10737.

MOTION: Dr. Humphreys moved, seconded by Dr. Khan, that the Interlocal Contract; Notices of Subgrant Awards with corresponding budget amendments; and budget amendments be approved as outlined. Motion carried unanimously.

REGIONAL EMERGENCY MEDICAL SERVICES AUTHORITY

Chairman Smith advised that the monthly REMSA Operations and Financial Report will be continued to the March 24, 2011 meeting.

REVIEW – ACCEPTANCE – MONTHLY PUBLIC HEALTH FUND REVENUE AND EXPENDITURE REPORT – JANUARY 2011

Ms. Eileen Coulombe, Administrative Health Services Officer

Advised that the Board members have been provided with a copy of the Health Fund Revenue and Expenditure Report for the month of January 2011; that Staff recommends the Board accept the Report as presented. "Staff is in the process of reviewing each line item within the Budget for the Estimate to Complete."

MOTION: Dr. Humphreys moved, seconded by Ms. Ratti, that the District Health Department's Revenue and Expenditure Report for January 2011 be

accepted as presented.

Motion carried unanimously.

UPDATE - FISCAL YEAR 12 BUDGET

Ms. Brown

Advised last month Staff presented the County's "fiscal targets in regard to the overall County Budget, including the projected \$33.5 million deficit; and the four (4) methods for addressing the deficit." In addition to the \$33.5 million in reductions, the County is anticipating an additional \$23.5 million "in redirects either through the elimination of funding or the transfer of programs from the State to the County during the Legislative Session."

To prepare for this the County is "reviewing how it does business; and is enlisting the assistance of the Organizational Effectiveness Committee (OEC)." She has provided the Board members with the "Overview of Phase II of the Fundamental Review of Washoe County's Resource Allocation Process" (a copy of which was placed on file for the record), from the OEC's February 17, 2011 meeting. The document provides an overview of the plan, "as to how the County will review resources and do an allocation process based on the decreases in the resources available." She and Ms. Coulombe attended the last meeting in which contracting with a consultant was discussed; that the Request for Proposal (RFP) for the consultant will be released tomorrow." The specific intent of the consultant will be to thoroughly review "opportunities within the County from a systems perspective to assist in achieving these very specific financial targets."

Through the review of the individual program budgets the Health District, with the assistance of the Division Directors and Program Managers, "has met the first financial target presented" by the County. Based on additional reductions that will have to be determined all programs will be reviewed for efficiencies. Staff anticipates this will be "one of many budgets" which will have to be developed. Staff is "working to be pro-active in anticipating how the District will determine where to make these significant reductions in the next few months."

Ms. Coulombe

Advised the Board members will be receiving the notebooks for the March 3, 2011 Budget meeting; that throughout the year Staff will be providing the members with additional information for these budget notebooks. The notebooks are tabbed by Program; that the 'Strategic Plan' adopted by the Board last month is included in the notebook, as are the per capita information, the State doc, etc.

As Ms. Brown advised, the Health District "has met the initial target"; however, Staff anticipates multiple revisions. The mandated meeting with the jurisdictional Managers, per the Interlocal Agreement, is scheduled for Tuesday, March 1, 2011; that Ms. Brown will present any of the manager's comments to the Board of Health at Thursday's Budget meeting, beginning at 1:00 pm.

The Board thanked Ms. Brown and Ms. Coulombe for the update.

PUBLIC HEARING - WASHOE COUNTY DISTRICT HEALTH DEPARTMENT FEE SCHEDULE

1:00 p.m: This being the time set in a Notice of Public Hearing, heretofore published in the *Reno Gazette Journal* on December 7, 8 and 10, 2010, to consider the proposed amendments to the Washoe County District Health Department Fee Schedule.

A. Presentation and Discussion of Proposed Revisions to the Washoe County Health District's Fee Schedule, specific to the Administrative Health Services Division, Community and Clinical Health Services Division, Air Quality Management Division, in accordance with the Washoe County District Board of Health Regulations Governing Air Quality Management, and the Environmental Health Services Division, in accordance with the Washoe County District Board of Health Regulations Governing Food Establishments; Washoe County District Board of Health Regulations Governing Sewage, Wastewater, and Sanitation; Washoe County District Board of Health Regulations Governing the Prevention of Vector-Borne Diseases; Washoe County District Board of Health Regulations Governing Liquid Waste; Washoe County District Board of Health Regulations Governing Invasive Body Decoration Establishments: Washoe County District Board of Health Regulations Governing Public Bathing Places; Washoe County District Board of Health Regulations Governing Public Spas; Washoe County District Board of Health Regulations Governing Mobile Home and Recreational Vehicle Parks; Washoe County District Board of Health Regulations Governing Solid Waste Management: and the Washoe County District Board of Health Regulations Governing Well Construction

Ms. Lori Cooke, Fiscal Compliance Officer

Advised the Board members have received a copy of the proposed revisions to the Washoe County Health District Fiscal Year 12 Fee Schedule, with an effective date of July 1, 2011. The Fee Schedule is reviewed annually with the proposed revisions for increases or decreases to the fees presented to the Board for consideration, and is applicable to all Divisions and Programs. The Health District's Fee Schedule was first implemented in Fiscal Year 83, as a result of a review of the Interim Legislative Committee on Local Government and Finance, which approved the

methodology utilized to calculate departmental fees. The Health District "has consistently maintained the approved methodology during the review process; that the methodology was again reviewed in 1996, by the Interim Study Committee through the auspices of Assembly Bill 530, and was reaffirmed. In addition to the Notice of Public Hearing published in the *Reno Gazette Journal*, the Fee Schedule was posted on the Health District's website on December 6, 2010; that in excess of 8200 postcard notifications were mailed to various individuals and businesses, with approximately 12% being returned to the Health District. The majority of the returned notifications were "from the food service handler certification category." The public workshops were January 7, 10, and 13, 2011, with "a total of five (5) members of the public in attendance"; that Staff responded to an additional fifteen (15) questions received either through email, telephone, written correspondence or in-person.

Staff received comments in opposition to the proposed fee increases from Builders Association of Northern Nevada (BANN); John Ascuaga's Nugget; and the proprietor of a small bakery; that comments from effected temporary and special event vendors who attended a workshop "were neutral."

During last year's public hearing there was discussion that the fees specific to Environmental "would more than likely have an increase due to the calculations of the indirect cost rates"; that this is noted on the proposed Fee Schedule; however, "the proposed Fee Schedule for Fiscal Year 12 for Environmental is less than the fees which were being charged in 2007."

The fiscal impact of the proposed Fee Schedule to the FY 12 Budget is anticipated has been included in the budget notebook; therefore, any possible revisions to the Fee Schedule will have to be incorporated after the next week's budget meeting.

Advised Staff recommends the Board approve and adopt the proposed revisions to the Washoe County Health District FY 12 Fee Schedule.

In response to Dr. Khan

Regarding the anticipated revenue decrease with the Community and Clinical Health Services (CCHS) Programs, Ms. Cooke advised "overall the fees in CCHS have declined between 2-12% depending on the Program (i.e., Immunization by approximately 2%)." This is a result of the direct overall costs, as there has been a reduction in Staff; and wages and benefits because of employee concessions; and a reduction of the indirect costs to the Programs.

In response to Dr. Khan, Ms. Brown stated that as CCHS "becomes more efficient the costs and fees decline as the Programs are cost-based."

Ms. Cooke

Stated that the decrease is anticipated; however, "there may not be this decrease"; that Staff has noted in the CCHS Programs "client ability to pay is starting to become an issue and it is being reflected in the actual revenues; that it is anticipated this will continue into next year." Although there is the possibility of revenues increasing, she determines the calculations by reviewing "the history, the trends, and what is anticipated based on the 'number of service units and the cost of those units' resulting in the amount of revenue."

In response to Ms. Ratti

Regarding the indirect rate for Environmental Health Services, Ms. Cooke advised "the indirect rate is calculated every year by an independent contractor, and is a federally approved methodology; that the actual indirect cost rate is applied to the future anticipated (program) costs. Last year EHS had a 'negative indirect rate', as it was part of the two-year carry forward; therefore, with a negative indirect rate of 2% and an administrative rate of 10% EHS had an 8% indirect rate; however, this year EHS does not have the negative 2%." Currently "the actual indirect rate for Environmental Health is a lower indirect rate than that of 2007; that in 2007 it was a total indirect rate of 35% and the proposed Fee Schedule represents 21%. This is a combination of the EHS Division and the Health District; that it does not include the County's indirect rate." The EHS Division "had a large reduction in expenditures"; therefore, "when the reduction in expenditures was realized there was a negative indirect rate, which was a carry forward calculation." The EHS Division has had a reduction in the number of Staff resulting in the existing Staff providing more direct services; therefore, "it took a couple of years" for the reduction in Staff to affect and result in a reduction in the indirect calculation rate.

In response to Ms. Ratti

Regarding there being a "significant increase in fees this year compared to last year" for EHS, Ms. Cooke advised that "generally it results in approximately a 6% increase fee-to-fee"; that the EHS Division experienced "the same reduction in personnel, wage and benefits as the other Divisions. Wages and benefits is calculated by Division; therefore, it will depend upon how the Division is structured, what the actual indirect costs are and how much indirect is calculated as a percentage of the total costs."

Ms. Ratti

Stated the "current process is very good at achieving the objective of ensuring the costs are recovered as indirect cost-recovery, although there is an approximate year lag-time."

Ms. Cooke

Stated that Ms. Ratti is correct; that "in this year's calculations of the indirect cost rate she applied the current wage rates as it is not known what the wages will be for this year; that next year she will apply that year's wage rates."

In response to Ms. Ratti

The process "is effective in accomplishing the objective of cost-recovery", she would question if "in a volatile economy [the process] results in 'some pretty large swings' in rates, Ms. Cooke stated "it would not necessarily result in large increases in rates; that it would depend on how the division is structured; what the total costs are."

In response to Ms. Ratti

Ms. Brown

When a "large decrease in costs is noted within a Division it is reflected in the indirect costs; that increases in those costs result in a larger fluctuation in the indirect rate and higher fees. Stable staffing, and stable costs result in things remaining the same with the indirect costs remain relatively stable."

Ms. Ratti

Stated, "while she trusts the formula, it is difficult to logically explain a 12.49% increase in a category which affects a large sector of the community while there has been a reduction in staffing with 'more and more' efficiencies in local government."

Ms. Cooke

Stated the methodology for calculating the indirect costs is the same as it has been it was adopted; that in reviewing costs of the indirect rate she is aware "since 1999 the indirect rates have been

fluctuating; that the rates change based upon "how many resources are available and how much time and money is actually expended, as Staff has to true-up actuals to what the actuals were anticipated to be. If there is a large unanticipated decrease in the amount of expenditures in a Division, the [decreases] are going to *catch-up*; that this is what occurred in Environmental. For the past two (2) years Environmental experienced hundreds of thousands of dollars in fee decreases", which Staff had to address in the budget, and determine "how to do more with less. In 2007 the indirect rate was 35.87%; that in 2008 it was 30.12%; and in 2009, when the results to the reductions to the indirect cost rates were being noted, it was 13.93%; that in 2010 the indirect rate was 8.54% and for 2011 21.03%. As 'a trend' the EHS Division has gone from 35.87% indirect rate to 21.03%."

Ms. Ratti

Stated she understands "it works well internally for cost recovery, but not so well for providing a steady fee structure to the community."

In response to Ms. Ratti

Ms. Cooke

Stated, it is similar to "how much of an increase there can be in property taxes, it helps when the market goes down; however, those revenues are not recovered when the market goes back up"; that the intent is for stability. Staff applied the approved methodology, which is to be used for calculating the indirect costs; that some governmental entity fees utilize 'what the market will bear'; that the Health District does not, nor does the Health District apply the Consumer Price Index (CPI) to the calculation of fees. The amounts proposed in the Fee Schedule "are the actual costs to the District for providing the service; that there are a number of costs, which are excluded from the indirect rate being applied"; that the Health District pays for those costs. The proposed Fee Schedule is based on the established methodology and parameters utilized previously.

B. Recommendation for Approval and Adoption of the Revisions to the Washoe County Fee Schedule

Chairman Smith declared the Public Hearing open and called upon anyone wishing to speak either in favor of or in opposition to the proposed revisions to the Washoe County Health District FY 12 Fee Schedule.

Mr. Larry Harvey, John Ascuaga's Nugget

Stated he "listened to Staff's financial report, and the Health District is the same as everyone else in town – trying how to figure out how to do more for less." With today's economy most businesses would be requesting for a reduction in fees; that should the Board adopt the proposed fees, the Nugget "has no way to pass on those fees; that there are fewer customers spending less money." The Nugget is questioning if the Health District "can maintain the existing fee structure and live within the means of what the fees bring in now." He understands the position of the Health District; however, the question is "how can we make this work; that this is the question every business in the community is having to ask. It is important to [the Nugget] there are not these increases in fees; that most of the fees, which affect their industry, are 9, 10, 11, and 12%." He acknowledges the Health District's process for determining fees is rationale; however, the proposed increases "are pretty high", and he would request the Health District "maintain the fees as these are extraordinary times." He would request the Board reconsider these fees.

Mr. Steven Duque, Castaway Trash Hauling

Stated Castaway Trash Hauling has reviewed the proposed rates as those relate to solid waste management programs; that Castaway Trash Hauling is in support of the proposed Fee Schedule; that the proposed rate increases are "very nominal and there are no objections to the proposed fees."

Mr. Jess Traver, Builders Association of Northern Nevada (BANN)

Stated BANN is in opposition to the proposed revisions to the Fee Schedule; that BANN has consistently been in opposition with all of the entities regarding fee increases, and supports "reducing rather than increasing fees." As an engineer for thirty (30) years he has been involved in designing and constructing buildings, and regarding the "logic of the calculations – sometimes we get caught-up in the numbers"; that it is the Board of Health's decision to "use common sense as to what those numbers mean to the community and what it is doing." Another agency recommended "increasing impact fees from \$4,000 to \$8,000"; that "the basis for their Capital Improvement Program (CIP) was the demolition of the EI Dorado Hotel"; that through discussions with that agency the fee was readjusted." He would request the Fee Schedule be reviewed again to determine "what is really being done; what is being provided, without getting caught-up in the fluctuation, and to make sense in the numbers" being approved. There is currently 80% unemployment in the home building industry, and approximately 50% in the public works and general contracting component of the industry. "A 6% increase in Health District fees puts more people out of business."

Mr. Buzz Harris, Associated General Contractors (AGC)

Stated he represents the 300 members of the Associated General Contractors (AGC); that the AGC has discussed the proposed Fee Schedule with Staff; that AGC's opposition in increasing the fees "is more of the perception; that there are a significant number of people unemployed" in the community. "People who may be considering expanding a business, deciding if a business should continue, or a business determining if it should come to the area" may not if it is noted the fees in the area are increasing during these drastic economic times; that this presents "a very poor perception and (maybe) the lack of consideration on the part of government" when fees increases are proposed.

The AGC understands the rationale of the increased, acknowledging there has to be "staffing levels to provide services, but when fee [increases] are directed at a particular sector, which is a sector that is employing people and putting people back to work, this is not a good time" to be increasing fees.

Chairman Smith

Stated he understands the process, and in reviewing the recommendation "the numbers are good and the process works"; however, "there is no common sense to the proposed increases, which would place this large of a burden on businesses at this time."

Dr. Furman

Stated, he concurs "this is a very difficult situation for an industry that has been hit so hard"; that in Southern Nevada there is a charge to all employees of food service establishments; that would bring in revenue without hurting the industry. He acknowledges the food service industry may oppose such a fee.

Ms. Ratti

Stated she acknowledges the methodology for determining fees "is a rationale, logical process, which is valid when compared to other agencies in which she participates; that she appreciates the review of the Fee Schedule and the methodology is completed on an annual basis." She is aware there "is a tendency among governmental entities to not want to increase fees regardless of the economy as it is not a pleasant task, and the representatives will receive the complaints." The entities then lose funding by continually delaying the process, which results in the scenario of "increasing fees by 25% as it has been delayed for five to ten (5-10) years." She does have to

concur with the comments presented "these are extraordinary times; that while the proposed Fee Schedule is logical and rationale and addresses the needs and costs of the [Health District] it may not necessarily meet the needs of the public in these times."

There "isn't an across-the-board solution"; however, she would suggest "taking a step back and further reviewing" the proposed Fee Schedule. There is the need for "an industry by industry assessment and review where there is a significant increase, perhaps where a 3% increase could be accommodated"; that a small incremental increase would not make a difference; however, "a \$4,000 difference could make the difference between someone remaining in business or going out of business."

Stated she is aware Staff conducted public workshops and forwarded notices to all businesses which would be impacted by the proposed fees; however, she would question whether "another month of working with the public in a pro-active approach would help, as public workshops are not always the most pro-active approach to public engagement." Further, she would question what "the dollar impact would be if the {Health District} made no changes this year" to the Fee Schedule.

In response to Ms. Ratti

Ms. Cooke

Stated that "there would not be sufficient time to meet with business representatives" within the month; that she has to provide Tech Services with the information necessary to implement the revisions to the Fee Schedule. Currently there are "only two (2) individuals in Tech Services performing this work; that previously there were four (4); that Tech Services requires a minimum of ninety (90) days to implement the revisions to become effective by July 1st." The process for reviewing the data to determine the indirect costs for each Program and developing the Fee Schedule begins in July; that "it is a year long process for her; that this would result in a mid-year process." Further, the three (3) entities, which collect fees on behalf of the District, would have to revise "each one of the applications again"; therefore, "from a timing perspective it is not preferable"; however, Staff "will do what the Board directs. Staff will do what is necessary to present the Fee Schedule"; however, this could delay the July 1st implementation date.

In regard to the fiscal impact to the Health District it would be approximately \$200,000 in lost revenue; that Staff 'would reverse the revenues from the Budget notebook and would have to complete the necessary adjustments.

Ms. Ratti

Stated Staff's Report does indicate a projected increase in revenues in the amount of \$262,274; therefore, for the Health District "to remain flat" would result in a loss of the revenues.

In response to Ms. Ratti

Ms. Cooke

Stated that it would not be Staff's recommendation to "remain flat on fees"; that Staff is proposing a reduction in the fees for Clinical Health Services, which are based on the actual costs of providing the service; that the Health District is prohibited from charging more than the cost of providing the service. This is a Board decision; however, that would be "her recommendation based on a fiscal perspective."

Regarding the adoption of the "Fee Schedule", Ms. Cooke advised the Board has the authority to modify the Fee Schedule providing specific direction to Staff as which fees should be increased or remain status quo, and which fees would be decreased as recommended.

In response to Ms. Cooke

Ms. Ratti

Questioned if the Board "could approve the portion of the Fee Schedule in which fees are recommended for reduction, and then provide direction to Staff that those fees which are recommended for increase should be reduced."

Ms. Cooke

Stated Staff would "then recalculate the proposed Fee Schedule and present it to the Board indicating "the original proposed and the newly recalculated fees."

Ms. Ratti

Stated she would question the individuals who testified, "if there are specific fee increase which would be particularly detrimental; that has no objections to the more nominal fee increases; that she does not note any "fees that would put someone out of business."

In response to Ms. Ratti

Ms. Cooke

Stated, as Staff was contacted by one of the larger establishments regarding the proposed fee increases, she calculated what the annual fee increase would be and determined the increase would be approximately \$1,000 - \$1,200, depending upon the number of special events in which the facility participated.

Dr. Humphreys

Stated, as has been noted and discussed, "these are difficult times; that, as was mentioned, there is a negative perception" to increasing fees; that a "\$1,000 increase in annual fees for some businesses would be a big impact and for other businesses not as big of an impact. Any increase in fees will have a 'negative impact' on those businesses in operation today regardless of the size of the business. New businesses may have the negative perception on the proposed fees wondering if there will be additional increases next year"; that those statistics are an unknown.

He concurs the process and methodology utilized in preparing the Fee Schedule is logical and good; that he is aware "the process is very time consuming, which he appreciates." He would support a further review as to what the effect would be on the various businesses in the community, while reviewing what the effects would be on the Health District, as the effect to the Health District is very important also." It is necessary to determine "a balance, which is difficult these days"; however, as he stated, "it is very important to determine the effects it would have on all involved."

Dr. Furman

Stated it would be a tremendous burden to conduct the public workshop process again; that he does not know how that would change anything." The Board, Staff and the public "know what the problem is"; therefore, having additional hearings and repeating the process would be a "difficult situation, and he would not recommend that."

Dr. Khan

Stated the Board acknowledges these are difficult times; however, the proven methodology of the calculation process has been approved and adopted by the Board and has been in effect for a number of years.

It was suggested those present representing the industry present comments as to achieving a compromise to the proposed Fee Schedule.

Mr. Buzz Harris, Associated General Contractors (AGC)

Stated the AGC represents "a wide variety of people in the industry (i.e., casinos, restaurants, engineers, lawyers, contractors, etc.); that it would be very difficult for the AGC "to review the fees and attempt to profess what the right fee is or should be. What may be right for the AGC may not be right for another industry."

The AGC does not dispute the methodology and the determination as to the amounts of the fees proposed; that the concern is "these are all businesses that are attempting 'to get by' during these economic times." The Health District Staff "probably knows what is best in the calculation of the fees"; however, as he stated the opinion of the ACG "is that it is the perception of this [proposed increase] at this time to which the AGC is opposed."

"Ms. Ratti's statement that the continued delay of increasing fees results in a much greater increase in those fees in two (2) or three (3) years from now" is accurate; however, the question is "is a particular government industry being saved to take care of things during a time when the private sector does not have the opportunity to prosper. It is the 'big picture' as opposed to" further reviewing these recommendations.

In response to Mr. Harris

Dr. Khan

Stated she appreciates Mr. Harris' comments; however, the Health District has increased efficiencies "to be able to continue providing services; that should the Board not approve the proposed fee increases and make the determination to keep those fees level from last, the Health District will *eat* those costs. It is a very challenging situation; that as Ms. Cooke stated these activities have to continue; however, it would be without compensation for the cost of doing that."

Mr. Harris

Stated he understands "fees are paid to try and have those services; that he is not recommending eliminating everything and not having those services; that this is a great community and the public should be able to have good services. At the same time proper decisions have to be made taking

things year-by-year; that taking the opportunity to review the recommendations in a year or two (2) years is something that should be considered."

Ms. Ratti

Stated it "is critical to her to advise it will not be possible for government entities to continue to reduce fees and provide services at the same level – governmental entities are not capable of doing it." A reduction in fees is a reduction in the number of employees who provide those services; therefore, those are services which will not be provided, and response times which will be delayed. Governmental entities can no longer indicate "the costs will be *eaten* with agencies continuing to *figure-out* how to provide those services. Service levels will be reduced as a component of the recession."

Ms. Brown

Stated a strategic directive of the Board of Health was the Health District "is responsible for ensuring appropriate fees are charged to maintain services. This is one (1) of the goals and strategic approaches of the Board in regard to the significant decreases the Health District must address in all the various revenue sources." She acknowledges there are conflicting goals for the Board, one (1) being the "concerns with increases in fees to businesses and the other is to ensure essential services provided by the Health District are viable and can be provided."

Chairman Smith

Stated the Board will have to make the determination as to how to address this, as the calculations presented by Staff "are the calculations"; that "is the solution to *cap* fees or review what the industry can manage" when determining fees. The Board must further consider the provision of services by the Health District and how to pay for those services; that he would disagree with the comment that services can be discontinued; that it "has to be *put in* perspective whether that is through implementing a smaller percentage of increase." The increases are reasonable when "it is a good economy"; however, "in a bad economy the proposed fee increases can be shocking." He would concur scheduling additional workshops and hearings would not be practical.

Mr. Harvey, John Ascuaga's Nugget

Advised the Nugget is a member of the AGC and is a general contractor; that "casinos are the equivalent of a small town; that fee increases at the treatment plant are passed on to the businesses"; that the Nugget is "charged numerous fees, which all add up." The Nugget

employees 800 individuals within the food service component of the facility; that previously the Nugget employed 2500 people and now employs 1500; that this is common in the industry. The increased fee for the Nugget would be approximately \$1200 annually; however, the Health District is not the only agency proposing to increase fees, which the Nugget and other casinos pay; that there "have been approximately ten (10) other agencies proposing to increase fees during the past several months. Although the proposed increase may be a small percentage it is adding-up to be quite a lot; that the Nugget is a hotel, has nine (9) restaurants, the banquet facilities, etc." Reiterated, he "understands the position of the Health District; that there are assumptions in the proposal which can be reviewed further; that there have to be concessions; that the Nugget's position is 'it can't take it' and opposes any fee increase(s).

Mr. Traver, Builders Association of Northern Nevada (BANN)

Stated this issue is a "little bigger than the Health District; that a 6% increase on a final map review may only be \$19, which isn't very much; however, it is an increase." The County Building Department's proposed fee increase was rejected by the Board of County Commissioners; that with all of the other regulating "there could soon be a 6% across-the-board increase for all Washoe County" department programs." He would question "how many people does that put out of work; that again, it is a bigger issue of not only the perception, it is a reality of who it will affect – how many people and how many businesses will it affect."

There being no one else wishing to speak either in favor of or in opposition to the proposed Washoe County District Board of Health FY 12 Fee Schedule, the Public Hearing was closed.

Ms. Ratti

Stated she "completely understands the economic development argument component; however, there is an argument regarding "the 30% increase in fees which will be necessary in three (3) years; that there is the argument for stability. She does acknowledge these are extraordinary times, and she would concur with Chairman Smith regarding there needing to be common sense." She does not support "eliminating the proposed increases across-the-board; that she would be interested in a compromise that provides stability to the programs while (perhaps) establishing a cap; however, she wants to know how much the economic impact would be" prior to making a determination. The Health District is "charged by State mandate with providing these services; and therefore, he determination cannot be made not to provide those services anymore. Should the impact [to the Health District be too high] she would not be able to support it"; that she would support continuing the Public Hearing and directing Staff to provide information specific to various scenarios to determine the actual impact."

Chairman Smith

He would concur with Ms. Ratti regarding having Staff review other options and report back to the Board "as to how [the Health District] is going to do this."

Ms. Brown

Stated "what she understands the Board is requesting is for Staff to review potential caps on fee increases and calculate the fiscal impact to the Health District from a budgetary perspective, as a one (1) time deviation from the established process in determining fees. Staff would determine the economic impact and provide an analysis to the Board."

In response to Dr. Khan

Regarding "an overall average increase being requested by the Health District", Ms. Cooke advised it "across-the-board the average increase is 6-8%; that some recommended increases are greater. In reviewing the fiscal impact there are fees that increased substantially; however, those fees had not been charged in four (4) years; therefore, it is not possible to determine the fiscal impacts "as there hasn't been any." She can prepare calculations and provide the Board information specific to "the compromise amount." A fee can represent a \$10 increase; however, there are "2,000 businesses, which would be affected annually; therefore there is a greater impact

Dr. Khan

Stated, "that information is very helpful; that it underscores the complexity of the methodology; that she understands an increased volume [of impacted businesses] could affect the revenues." She would question if it would be possible to consider "approval of the fees as proposed within a limit not to exceed a 5% difference, acknowledging that doesn't address revenues."

Ms. Brown

Stated "the difficulty will be the connection between a *cap* on fees and the effect to the revenues, as the two (2) are not related due to more businesses (i.e., a volume of businesses) being impacted by a fee." The direction of the Board may then be to implement a *cap* and then follow-up to determine how that impacts revenues ensuring there isn't a significant impact to revenues (i.e., a *cap* to the impact to revenues); that "this may provide more guidance to Staff." Staff could review the 5% cap ensuring it doesn't result "in a significant deficit for revenues" should the Board determine "that every fee, which was increased, is maintained at only a 5%" and approving the

proposed decreases as recommended." She would question if the Board's direction is to review a specific reduction or review a *cap* to the fees and then provide a projection as to the impact to revenues.

Ms. Ratti

Stated she appreciates the comments regarding "the perception of any increase to fees, however, it is not possible to accommodate not increasing fees"; that the affect to the Health District's budget "would be too great in context of all the projected reductions in the budget process. She does support "stability; that most businesses are going to accommodate a 2%, 3% increase in fees"; therefore, she "does not want to have to impose a 12%, 15%, 300% fee increase, if that is how the calculations work-out"; that she would favor "the common sense approach." She would request information as to the affect there would be to the revenues for the Health District for a 3% or 5% increase to the fees.

In response to Ms. Ratti

Ms. Cooke

Stated she can provide that information to the Board; that "obviously the revenues for the Health District and the impact to the business community will be less."

Ms. Ratti

Stated she "appreciates that the methodology is a system which has worked for decades"; however, as has been stated, "these are extraordinary times"; that during the time period of the approved methodology "there has been nothing like what is currently occurring."

Ms. Cooke

Stated the adherence to the methodology is to ensure there is a proven rationale and justification for the proposed revisions to the Fee Schedule. The presentation allows for "discussion by the Board to determine policy without deviation from the process resulting in the Board to provide direction to Staff."

Ms. Ratti

Stated, "Staff did an excellent job in presenting the information to the Board. The Board now has a policy decision to make", which will require the additional information as discussed.

In response to Chairman Smith

Regarding "CCHS rates decreasing this year and possibly increasing next year", Ms. Cooke stated "that is one (1) of the by-products of utilizing an actual cost methodology." Within CCHS Staff has not noted fluctuations in the immunization pricings; however, that could occur. A hypothetical is "a new drug becomes available, or a vaccine that previously cost \$113 per dose increases to \$132 per dose, etc."

The proposed increases and decreases to the fee are specifically related to the indirect; that the indirect costs are based on: time, and salaries and benefits. Within the Budget notebook Staff "budgeted for all of the concessions that are to be reinstated; however, she did not incorporate the costs associated with reinstatement of the concessions in the fee calculations." As she stated previously there is no CPI or any other indexing costs applied in the calculations of the fees; that the proposed Fee Schedule does "include the average 4% in wage reductions." The wage and benefits of a Staff member who has been in the same position for five (5) or more years is less than it was in 2006; that those reductions are included in the proposed Fee Schedule.

In response to Chairman Smith

Regarding reducing fees in CCHS by "no more than 3%", Ms. Cooke advised "to do so would be contrary to the applied methodology, resulting in charging more than it would cost to provide the service."

In response to Chairman Smith

Ms. Leslie Admirand

Advised the Nevada Revised Statute (NRS) prohibits the Health District from charging more than the actual cost of providing the service.

Ms. Cooke

Advised the reductions in CCHS fees are indicative of how the indirect costs fluctuate; that these fees "are *trued-up* to the past two (2) years when there have been reductions." When the Fee Schedule was reviewed every two (2) years, and some fees every four (4) years, there would be "the situation to which Ms. Ratti referred, and there would be large variations in the recommended increases." Some recommended fees increases could be 20%, 30% or 40%, and businesses strongly objected to those large increases, as it "was very difficult for businesses to prepare for that type of increase."

Ms. Ratti

As Ms. Cooke stated, her concern is the implementation of the "larger increase(s) due to continued delays in addressing fee increases"; therefore, she has requested the additional information for "a stabilizing factor" within possible alternatives "as opposed to no increases in fees." She anticipates the economy will stabilize, and the District would then be considering having to implement "those 20%, and 30% fee increases to support mandated services" if the process continues to be delayed.

Ms. Brown

Stated, it is the Board's direction to Staff "to retain the proposed fee decreases for service reflecting actual costs; to prepare a cap alternative at 3% and 5% for those fees proposed to be increased; calculating the impact to Health District revenues based on the 3% and the 5%."

In response to Dr. Khan

Regarding the Board's authority regarding the Fee Schedule, Ms. Admirand advised the Board can approve a portion of the Fee Schedule (i.e., those proposed to be reduced). Should it be the consensus of the Board to modify the proposed increases, she would recommend the Board continue the Public Hearing to the March 24, 2011 meeting.

Dr. Khan

Stated she would support continuing the Public Hearing to next month's meeting with direction to Staff to "re-estimate the fiscal impact to the District with the proposed capping of increases at the 3%, and 5%."

Ms. Cooke

Stated after the Board has determined an increase she will begin working in conjunction with Tech Services to begin implementing the new FY 12 Fee Schedule in the various billing programs."

Chairman Smith

Stated he would request the inclusion of a "50% reduction to the proposed fees and the fiscal impact to the Health District in addition to the 3% and 5% scenarios."

Ms. Coulombe

Stated, when the Board reconsiders the item, Staff would request direction should the Board make a determination to revise the process. As Ms. Cooke indicated, previously the Fee Schedule was reviewed bi-annually and is now reviewed annually to address the concerns such as those expressed by Ms. Ratti.

MOTION: Ms. Ratti moved, seconded by Dr. Humphreys, to continue the Public Hearing regarding the proposed revisions to the Washoe County Health District's FY 12 Fee Schedule be continued to the Board's March 24, 2011 meeting. It was further ordered that Staff prepare alternatives considering a 3%, and a 5% cap; and a 50% reduction to the proposed fee increases, with an update as to the fiscal impact to the Health District for each alternative. Motion carried unanimously.

Dr. Furman

Stated he would thank the representatives of the businesses for attending today's hearing; that this "is a very difficult situation and do affect the businesses."

PUBLIC HEARING - WASHOE COUNTY DISTRICT BOARD OFHEALTH GOVERNING SOLID WASTE MANAGEMENT

1:00 p.m: This being the time set in a Notice of Public Hearing, heretofore published in the Reno Gazette Journal on January 10, 15 and 21, 2011, to consider the approval and adoption of proposed amendments and additions to the Washoe County District Board of Health Regulations Governing Air Quality Management, specific to waste tire management.

- A. <u>Presentation of Amendments to Section 010.696 (Source Separated Recyclable Material);</u> Section 010.768 (Waste Tire Generator [WTG]); Section 010.772 (Waste Tire Hauler [WTH]); and Section 010.776 (Waste Tire Management Facility [WTMF]);
- B. Presentation of Addition of Sections 085.000 085.600, Inclusive (Disposal of Waste Tires)

Ms. Jeanne Rucker, Environmental Health Specialist Supervisor

Advised the Board members have been provided with a copy of the proposed amendments and additions to the Washoe County District Board of Health Regulations Governing Solid Waste Management, specifically waste tire management.

Advised the Health District has regulated and enforced the Regulations for waste tire haulers and waste tire generator for approximately fifteen (15) years; that previously the Health District utilized the Nevada Administrative Code (NAC) for this purpose. During the 2009 Legislative Session "very specific requirements were implemented regarding the disposal of waste tires. Washoe County does not have a "waste tire management facility in Washoe County"; however, "should there be a facility capable of accepting waste tires for processing into fuel or some other reasonable product tires could no longer be disposed of in a landfill." It was the consensus of Staff "it would be in the best interest of the District to incorporate those provisions into the Regulations, including the other provisions within NAC." All of the waste tire haulers, and waste tire generators were notified of the proposed revisions, the workshop and today's Public Hearing; that Staff conducted a public workshop on November 17, 2010, with two (2) members of the public in attendance. One (1) comment from an out-of-state waste tire hauler that is not a permitted facility in Washoe County, "referencing situations, which occur in Oregon"; that a few other questions were received to which Staff responded.

The majority of definitions included in the proposed revisions are currently incorporated in the Regulations; that there are some minor amendments to "a few of the definitions. The majority of the proposed amendments are the additions to the existing Solid Waste Management Regulations.

The Health District currently charges fees for waste tire haulers; therefore there is no fiscal impact to the approval and adoption of the proposed amendments and additions to the Regulations.

C. <u>Approval and Adoption of Deletions, Amendments and Additions to the Washoe County</u>
District Board of Health Regulations Governing Solid Waste Management

Ms. Rucker

Advised that Staff recommends the Board approve and adopt the referenced amendments and additions to the Washoe County District Board of Health Regulations Governing Solid Waste Management.

Chairman Smith declared the Public Hearing open and called upon anyone wishing to speak either in favor of or in opposition to the proposed amendments and additions to the Washoe County District Board of Health Regulations Governing Solid Waste Management, specifically waste tire management. There being no one wishing to speak the Public Hearing was closed.

MOTION: Dr. Khan moved, seconded by Ms. Ratti, that the amendments and additions to the Washoe County District Board of Health Regulations Governing Solid Waste Management, specifically waste tire management.

be approved and adopted as outlined.

Motion carried unanimously/

<u>DISCUSSION – POSSIBLE DIRECTION – CONDUCTING OUTSIDE PERFORMANCE AUDIT – DISTRICT HEALTH DEPARTMENT</u>

Chairman Smith

Provided the Board members with a copy of "ideas for an evaluation of the Health District" (a copy of which was placed on file for the record); that the suggestion is to "have an independent performance evaluation from an outside consultant performed." For a number of years the Health District has conducted "self-evaluations resulting in some tension from the other stakeholders." His goal is for the other stakeholders to understand the Health District "is doing a really, really good job, without only hearing it from the Health District; that the stakeholders hear it from outside of the organization."

He isn't sure that the Health District "would be able to afford such a project or if the other Board members are interested in having an independent audit performed." The handout he has provided the Board delineates the various aspects "he believes should be reviewed in an audit; that it would (possibly) assist the Health District in operating more efficiently." Further, it would improve the "public perception that the Health District is doing an excellent job, including the three (3) stakeholders" of the Health District."

In response to Dr. Humphreys

In regard to what the hiring of an outside consultant would cost, Chairman Smith stated he doesn't know what the cost would be; that the discussion is to determine if it is "something the Board wants to do. Ms. Brown indicated Washoe County is considering a similar measure.

In response to Chairman Smith

Ms. Brown

Stated she will be updating the Board in regard to possible independent analysis which is being considered by the County. The County's Organizational Effectiveness Committee (OEC) is releasing a Request for Proposal (RFP) tomorrow with the purpose of having a consultant conduct a fundamental services review on Washoe County. The Health District will be included in this fundamental service review, which will include review "what is being done; how it is being done; then providing recommendations, which may ultimately result in changing how and what the County does." A concern of proceeding with this process is the County's anticipated \$60 million in budget reductions.

There is not "a lot of expertise in this area as other governmental entities are experiencing the same" financial constraints as the Heath District and the County are experiencing. The consultant awarded the contract will report to the OEC, which will provide recommendations to the Board of County Commissioners. The OEC is comprised of Chief Executive Officers (CEOs) and business representatives from the community; that "this will be a valuable resource to the County and to the Health District." Advised when the RFP is released she will forward a copy to the Board members.

Dr. Humphreys

Stated "there can be a lot of merit in having an outside evaluation performed depending upon who conducts it; that it has to be performed by the proper individual or entity; however, it can be more objective." In conducting a "self/internal evaluation "the various personalities are involved and the process becomes more subjective." Such a process would "have to depend upon the fiscal feasibility; that it would be of great benefit" to the Health District.

Ms. Brown

Advised currently the Health District does not have to contribute to the cost of the Washoe County external consultant.

Chairman Smith

Stated, an outside performance audit "would carry weight with [the District's] stakeholders.

Dr. Khan

Stated she will review the County's RFP; however, there is the concern "something can be lost when a review is too large; therefore, the Health District may not receive the specific feedback relative to the services provided by the Health District." She appreciates the Health District not having to pay for the review; however, it is important it addresses "what the Health District would want assessed/measured specific to the actual performance in the various divisions and programs."

Dr. Furman

Stated he, too would question "how is this County analysis going to affect the Health District'; that the Health District is unique in that the programs and issues it has are not issues other County Departments have. He would concur with Dr. Khan's comments.

Ms. Ratti

Stated, she "absolutely concurs that an independent performance audit is a helpful tool for any organization; that for twelve (12) years she was an independent contractor performing this type of audit." Based on her professional knowledge "this type of audit is impractical for this organization at this time due to the cost"; that the type of audit referred to by Chairman Smith's handout "would be significantly expensive" to contract; however, more significant is the Health District does not have the budget for "the Staff capacity costs at this time particularly during the budget process, the uncertainty of the Legislature and with an Interim Health Officer." This type of audit requires "10% of the auditor's time and the remaining 90% is performed by the Staff, as it would be Staff obtaining all of the necessary information for the auditor.

A performance audit is not going to achieve "what the Health District did in conducting the organizational restructure." The various entities have been utilizing short-term measures (i.e., savings from retirements); that "what needs to be considered is this is the new reality and this is the new organizational structure to address that reality." The City of Sparks is currently reviewing every position to determine if job assignments and duties have increased or decreased resulting in reclassifications; that reviewing the possibility of outsourcing programs at the City of Sparks required an eight (8) month analysis. Again, this process required a significant amount of staff

time. "At this time the Health District can't afford it; that there isn't the Staff to do it; and the information could not be obtained within the next couple of months when it would be necessary to make decisions."

Any investigation of programs performed by other entities in an effort to eliminate duplication of services will have to be delayed until after the Legislative Session is completed. A number of services currently provided by the State "may no longer be provided by the State by the end of the Legislative Session." The political "environment is changing too rapidly" to have an audit conducted at this time.

Ms. Coulombe

In 2001 the Health District contracted with two (2) external reviewers who conducted "a capacity assessment of all of the programs of the Health District; that Staff has a copy of that assessment available. There was a second process, to which Ms. Ratti referred, which was the "structural review, which was conducted in 2007, in conjunction with representatives of the Board of Health; Staff; and all three (3) jurisdictional entities. Both final documents are on file and available for review.

In response to Ms. Ratti

Regarding the cost of the capacity assessment, Ms. Coulombe stated that she can provide the Board with that information during the Budget meeting should the Board decide to provide direction to Staff.

Dr. Khan

Stated, "it would be helpful for the Board members to review the County's RFP for the countywide review." Further it would be helpful to review the 2001 Capacity Assessment and the results of the 2007 Structural Review Team. She would concur "the County is in a dynamic time; however, she doesn't believe this is a short-term situation; that she believes it will continue for awhile." Should the County assessment not address issues for the Health District it may provide "some key questions that need to be asked; that there is key value in having an independent assessment of the performance capacity, the services delivered and opportunities for improvement." She would recommend the issue be discussed in a few months, as the impacts of the 2011 Legislative Session are unknown.

Ms. Brown

Stated, the Health District "will have to make significant, sweeping changes in the next few months. Ms. Ratti is correct in that it would be very difficult to have an outside audit conducted a plan developed while Staff is preparing the budget." One resource for "more long term would be obtaining accreditation, which would result in the incorporation of best practices for health departments. The County's review process will be of assistance in the "short time line with the accreditation being a much longer process."

Chairman Smith

Stated he would concur "this isn't the best time for have an audit conducted"; that further, he concurs with the Board members that an outside performance audit is of great benefit; and would provide valuable information to the stakeholders of the Health District.

He would request Staff provide the Board with a copy of the Capacity Assessment; and the RFP being released by the County. He would request the Board discuss the feasibility of having an outside performance audit conducted during the October Strategic Planning Retreat.

Ms. Ratti

Stated she supports discussing an outside performance audit for the Health District during the Board's Strategic Planning Retreat, that the Legislative Session will be completed resulting in definitive answers to the financial impact from this Session. The Board of Health will have appointed the new District Health Officer who will have an important role in any type of performance audit.

MOTION: Ms. Ratti moved, seconded by Dr. Khan, that the feasibility of having an outside performance audit of the District Health Department be conducted be agendized for the Board's October Strategic Planning Retreat; that Staff provide the Board members with a copy of the 2001 Capacity Assessment for review; and a copy of the County's RFP for the fundamental service review. Motion carried unanimously.

WASHOE COUNTY HEALTH DISTRICT – 2011 LEGISLATIVE BILL TRACKING – DIRECTION TO STAFF

Ms. Brown

The Board members have been provided with a copy of the Health District's Legislative Bill Tracking; that within the first week of the Session Health District Staff reviewed approximately thirty-six (36) Bills. She would encourage the Board members to review the Bill Tracking to become familiar with the Bills which Health District Staff are monitoring; that to-date Staff has "provided very little testimony or presentations." Mr. Dick will be providing a brief update on the Legislative Hearing on a Bill specific to smog checks.

With the assistance of Mr. Gustin and Ms. Ratti she is in the process of scheduling meetings with the Managers of Reno and Sparks at which time she will provide the Managers with a copy of the Health District's Bill Tracking document. The Cities and the County, and various other entities, have a Memorandum of Understanding Agreement to "maintain communication during the Legislative Session." Staff works in conjunction "with the County's Legislative team to remain consistent."

In response to Dr. Khan

Regarding a Bill introduced by Senator Parks specific "to public health function reorganization", Mr. Bob Sack, Director, Environmental Health Services, advised that he conferred with Southern Nevada Health District regarding this Bill. He has been advised it would "attempt to place control of the health district under the auspices of the Board of County Commissioners; that the Bill only affects those counties with a population of 400,000 or greater."

Ms. Brown

Stated with limited staffing, Staff is reviewing only those Bills which would affect the Health District.

In response to Dr. Khan

Regarding the 400,000 population trigger and the current census of Washoe County, Ms. Leslie Admirand, Deputy District Attorney, advised "it is the understanding a Bill will be introduced to increase the current 400,000 population trigger.

Mr. Sack

Advised Washoe County does now have a population of greater than 400,000; however, "for legal purposes the Legislature has to accept the latest census, which has not yet occurred; therefore, the 400,000 population trigger remains in effect.

Ms. Admirand

Advised the new census information will not take effect until July 1, 2011.

Ms. Brown

Stated, "there are 400+ Bills, which would affect the Health District should the Legislature accept the census data."

Mr. Sack

Stated there is "one (1) other Bill associated with the Washoe County and Southern Nevada Health Districts, which, in counties exceeding the 400,000 population trigger, Social Services would be joined with the Health District."

Ms. Ratti

Questioned, if the County is monitoring the legislation specific to the "400,000 population trigger." She is aware "these issues can be *dropped* during a Legislative Session due to the other issues (i.e., re-apportionment, the budget, etc.) during the 120 day Session."

In response to Ms. Ratti

Ms. Brown

Stated there are "the 400± Bills which would affect the Health District; that there are many more that would affect other County Departments"; therefore, the Health District, the other County Departments, and the County collectively are monitoring Bills and the 400,000 population trigger. "Currently there isn't anything specifically addressing revising the 400,000 population trigger." It was the determination of the County "not to submit any BDRs to the Legislature due to there being

so many issues before the Legislature during this Session." Mr. John Slaughter is present at the Legislature throughout the day "very actively" monitoring Bills for the County.

Mr. Sack

Stated the Legislative Counsel Bureau (LCB) has assured "everyone the 400,000 population trigger will be addressed and adjusted."

In response to Dr. Furman

Regarding the amendment to AB 98 as proposed by the Nevada State Medical Association, Dr. Randall Todd, Director, Epidemiology and Public Health Preparedness, advised that he has not been contacted by the Nevada State Medical Association nor has he reviewed that proposed amendment. He has reviewed AB 98, which is "considered model legislation, which is proposed to be incorporated into *Nevada Revised Statutes* (NRS). AB 98 operationalizes the utilization of out-of-state medical volunteers through the 'Emergency System for the Advanced Registration of Volunteer Healthcare Providers' (ESARVHP)." ESARVHP is a database, into which the names of Nevada Medical Reserve Corps Volunteers are entered. Medical Reserve Corps volunteers from other States are entered into similar ESARVHP-compliant database; that it provides a process by which individuals' credentials and licenses are verified. As he interprets the Bill, AB 98 allows volunteers who are registered in ESARVHP would automatically be allowed to provide services within his/her scope of licensure within the State of Nevada, "without the Governor having to use any of his declaratory authorities." The Bill specifically refers to ESARVHP as an acceptable registration system.

The Bill does refer to "liability issues related to the use of these volunteers." He did discuss this Bill with the State; that the State indicated the Bill "didn't better address liability concerns for Nevada's volunteers, which has been an issue with Washoe County's Medical Reserve Corps." In reviewing the Bill he noted "that to address that issue would change the scope of the Bill"; that the Bill addresses "how can out-of-state licensed and vetted volunteers practice within the scope of their out-of-state license in Nevada should an emergency occur and they have to be brought in to assist."

He is not aware of any Bills currently, "which are more comprehensively addressing the civil liability concerns that Washoe County's MRC volunteers have expressed."

Dr. Furman

Stated he will be "making a motion recommending the Health District support the amendments proposed by the Nevada Medical Association" (a copy of which was placed on file for the record). The amendment has been reviewed and received input from "many physicians in Washoe County and Southern Nevada, including the District Health Officer of Southern Nevada. He is proposing support for these amendments, as there will be a hearing on AB 98 Tuesday, March 1st; that this Bill is important "as it provides protection to those who volunteer."

In response to Dr. Furman

Ms. Brown

Stated Staff does support AB 98; however, there wasn't any intent to testify; however, should it be the direction of Dr. Furman and the Board Dr. Todd will present testimony.

Dr. Furman

Stated testimony should be presented by Staff during the Hearing.

Dr. Todd

Stated, as submitted there were references to "liability protection"; however, as he stated, it is specific to "the volunteers from other areas outside Nevada. If these amendments are strengthening protection for Nevada volunteers he would be supportive of such an amendment.

Mr. Kevin Dick, Director, Air Quality Management

Advised AB 2, which allows for the elimination of the initial emissions control testing requirements for vehicles issued special license plates (i.e., classic, street rods), is being heard by the Committee on Transportation this afternoon. The Health District has remained neutral on this Bill; however, Staff will be presenting comments specific to providing documentation as to the 2500 mile limitation necessary to obtain an exemption. Staff will be recommending this provision "be strengthened to require odometer readings documenting the vehicle had not been driven in excess of 2500 miles from the previous year. Vehicles driven in excess of 2500 miles will result in greater impact to the air quality of the region.

Staff will utilize this time to educate Legislators as to the revisions to the National Ambient Air Quality Standard (NAAQS) for Ozone; that Staff is aware the revision will be a reduction to the allowable NAAQS for Ozone; however, it is not know what the new Standard will be. The new Standard is to become effective in July.

Advised he has provided the Board members with an update regarding SB 158, which would reduce the frequency of smog checks for new motor vehicles and vehicles which have not previously failed a smog test. Staff opposes passage of this Bill as it would have significant impact to the air quality through the "extension by one year the time period for which new vehicles would not be required to obtain an annual emissions testing (smog test) certificate. Models have demonstrated a vehicle "becomes more out of tune the further amount of time a problem is not addressed; therefore, Staff anticipates further impacts to the air quality should this Bill pass." Further, passage of this Bill would require Washoe County Health District to prepare amendments to the State Implementation Plan (SIP) and the Maintenance Plan. These Plans are based upon the emissions levels anticipated from vehicles required to comply with the Inspection and Maintenance (I/M) Program. The increased emissions from vehicles, which are not tested each year, has the potential of requiring Air Quality Management to implement additional control measures on stationary sources or consumer products to offset those increased emissions. The Health District receives \$1 for every smog check certificate issued; therefore, passage of this Bill would have a fiscal impact to the District; that the District also receives grant funding "from the Excess Reserve, which is in excess of \$1 million after the initial distributions occur." Staff projects this would result in a reduction in funding in the amount of \$360,000 for FY 12 and \$367,000 in FY 13. This would "would greatly impact Air Quality Management's ability to maintain the monitoring system, and planning program to comply with the requirements of US Environmental Protection Agency (EPA).

He proposes the Board of Health oppose SB 158; that the Southern Nevada Air Quality District and the Nevada Division of Environmental Protection (NDEP) are also in opposition to this Bill. The fiscal review from NDEP is the projected loss of \$2 million revenue is one-quarter of its operating budget. The Southern Nevada Air Quality District anticipates the loss of \$1 million in revenue reduction.

Ms. Brown

Stated the goal of Staff is to "be very aware of those Bills, which have the potential of having a significant impact expending Staff's limited resources on the most important Bills."

MOTION: Dr. Furman moved, seconded by Ms. Ratti, that the February 2011
Legislative Tracking Report be accepted as presented; that the Board support the amendments to AB 98 as proposed by the Nevada State

Medical Association, with Staff providing testimony at the Committee Hearing. Further it was ordered that the Board support Staff's opposition to SB 158 as presented.

Motion carried unanimously.

<u>PRESENTATION – EXISTING DISTRICT BOARD OF HEALTH COMMITTEE APPOINTMENTS – RE-APPOINTMENTS</u>

Chairman Smith

Advised the Board members have been provided with a current list of the District Board of Health Committee appointments; that he would question if the members have any suggested revisions to the Committees. He would question comments from the members as to any requests for change.

Ms. Ratti

Stated, with the Board in the process of recruiting for a new Health Officer, she would recommend newly appointed Chairman Smith be a member of Personnel and Administration (P/A) Committee, as he will be the member "working most closely with the new District Health Officer." She would prefer Dr. Humphreys remain on the Committee, as he has been the Chair for the P/A Committee. It is important for an elected official to serve on this Committee.

Dr. Khan

Questioned if there prohibit four (4) members serving on a Committee.

In Response to Ms. Ratti

Ms. Admirand

Advise there are no prohibitions limiting the number of members who can be appointed and serve on a Committee; however, it would affect the quorum; that the rationale of three (3) members was to prevent "a tie vote." Currently two (2) members constitute a quorum, with a fourth member a quorum would require three (3) members with a majority vote requiring three (3) members voting in the affirmative or the negative.

Dr. Furman

Stated he has been serving as the Committee liaison between Washoe County Human Resources, the recruiter and the Committee during the recruitment process; that he serves as Washoe County's representative to the Board and to the Committee. He would prefer to remain on the Committee.

MOTION: Dr. Khan moved, seconded by Ms. Ratti, that the District Board of Health Committee appointments remain as presented, with the exception that Chairman Smith will be appointed as the fourth member to the Personnel and Administration Committee.

Motion carried unanimously.

REPORT - FOOD BORNE ILLNESS OUTBREAK REPORT CARD

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

Advised last month the Center for Science in the Public Interest issued a "Food Borne Illness" Outbreak Report Card for the Nation", regarding "how well the States do or don't do on the investigation of food borne illness outbreaks. By definition a food borne illness outbreak is 'two (2) or more people (cases) who become ill from a common food source'; that with new technology food borne illness outbreak are beyond local in scope." Previously food borne illness outbreaks would be considered "as localized"; however, with "PulseNet typing it can be determined the causative agent is the same as that which is occurring in other regions of the state or nation, or occasionally other regions of the world." Advances in technology do not; however, identify the "common source" of an outbreak; that continues to occur through the "case interview process."

Review the ten (10) year data collection from the Center for Science in the Public Interest of food borne illness outbreaks nationwide, advising the first graph depicts the "total number of outbreaks reported and the total number of outbreaks in which the outbreak was solved, resulting in the implicate a pathogen and identify the food source for the pathogen. Not identifying "both was determined as an unsolved food borne illness outbreak." Advised this is "a very difficult definition to achieve as it would depend on how quickly the Health is informed of an outbreak and whether or not there is any food remaining for analysis. The [Health District] may not be able to identify the food source in every outbreak"

Reviewed the methodology utilized to determine the 'grade' received, advising "the more outbreaks reported the better the grade"; therefore, "the fewer outbreaks reported the lower the grade."

The second slide depicts the median number of reported outbreaks per million population between the years 1998 – 2007; that the data indicates Nevada received "an F; however, this is an F Nevada didn't deserve." Advised the rationale for the methodology was "a low number of reported outbreaks (probably) didn't indicate a 'low number of outbreaks', but an indication that the surveillance doesn't work very well." This resulted in "the States of Oregon and Minnesota, which received a high grade, have strong track records of conducting good epidemiology and outbreak investigation had eight (8) or more outbreaks per one (1) million population. This was then set as the standard benchmark."

Advised there is the potential of a financial impact to the State due to this ranking, as "people will not want to bring conferences, conventions or relocate a business to 'the Outbreak State' if there is a concern the attendees could become ill due to Nevada receiving an F."

Dr. Todd reviewed the food borne illness specific to Nevada, advising the graphs depict the number of reported outbreaks between 1998 through 2007, with sixteen (16) outbreaks reported in 2004; and then a "sharp decrease in reported cases, which continued through 2007." He reviewed the data and determined "it resulted in an average of less than two (2) outbreaks per million population." He is aware that Staff conducts "more outbreak investigations than this in Washoe County, maintaining an outbreak data inventory since 2004. Presented graphs depicting "data overlay of Washoe County since 2004, advising he applied the same methodology to Washoe County, which would have resulted in Washoe County being an 'A' State, if Washoe County were a State." He reviewed "what would have occurred to the State of Nevada's grade had Washoe County's outbreaks been included in the data, which would have resulted in Nevada receiving a 'D'." This overlay doesn't include Clark County's outbreak data; that had Clark County's data been included the State would have received a 'B' or perhaps an 'A', as there are a large number of outbreaks in Clark County."

The "question then became why wasn't Washoe and Clark County data reported, as both Counties were investigating and reporting these outbreaks; however, it was noted the information was not being entered into the CDC database after 2005." It was determined the State quit entering the information into the CDC database in 2005. In 2008, when reviewing the 2007 data Staff noted Washoe County's information was not being entered into the CDC database; therefore, Staff requested and received direct authorization to the CDC database and Staff began entering the data in for Washoe County.

Advised that utilizing the methodology for determining the grade, Dr. Todd presented a graph overlay of Washoe County data through 2010, advising that Washoe County would "again receive an 'A'; that the State would receive a 'D' if no outbreaks were reported.

To improve Nevada's grade it will be necessary to report the outbreak investigations conducted to the CDC database; that as he stated, Washoe County has been reporting this data since 2008. The Carson City Health District began reporting outbreak data to CDC at approximately the same time; however, Clark County did not report its data. The only data being reported by the State were those outbreaks "which included multiple states." Washoe County Health District "encouraged other jurisdictions to report their data; that the State has recently committed to reporting data; that this should result in an improvement in Nevada's grade. Washoe County will continue to conduct thorough disease surveillance and outbreak activities.

Dr. Khan

Stated, she "recalls the State Health Officer questioning whether the State should be participating in the National Disease Surveillance System; that as the CDC assignee she was very concerned about the lapse in reporting." She would question the expectation of States reporting to the National Disease Surveillance System, as she considered the reporting as "an essential component of public health practice and one in which States would be expected to participate."

In response to Dr. Khan

Dr. Todd

A large amount of national/federal reporting is not "a matter of law, it is an issue that the majority of States always participate; that reportable data is entered every week, which provides the data for the *Morbidity and Mortality Weekly Report* (MMWR). It becomes immediately obvious is a State's data is missing from the MMWR." The error of omission becomes obvious regarding the Influenza Surveillance; that Staff receives a weekly federal report on national Influenza Surveillance depicting the data on a national map. Occasionally Nevada is depicted in white, which indicates Nevada's information was not reported for the week; that occasionally this was a technological problem that gets corrected in the following week. "It is immediately evident when there has been a lapse in the reporting; that it isn't always immediate obvious in the analysis reporting that Nevada's data has not been submitted. It was only through reviewing a report Staff became aware that Washoe County and Nevada's data was not being reported; that this lapse in reporting results in Nevada receiving the 'F'."

Dr. Khan

The CDC has assigned Epidemiologists to Nevada due to the national concern that Nevada "is a vulnerable State in not having the epidemiological capacity to respond to mass bio-terrorism events or natural occurring events." She is concerned "that with the current economic conditions the State

Health Division may choose to further limit or compromise to the reporting functions. Further, this is a concern that Nevada continues to be vulnerable to any serious epidemiological threat or public health disaster."

Dr. Todd

Stated, he would concur with Dr. Khan; that after the most recent statewide epidemiological meeting there is now a willingness to ensure the State's efforts improve. To conduct a thorough investigation and obtaining results, which are not reported to the national database can result in a publication such as the *Center for Science in the Public Interest* reporting "Nevada is not doing a good job."

The Board thanked Dr. Todd for his report.

<u>VOLUNTEER AGREEMENT – MEDICAL INDIVIDUALS – MEDICAL RESERVE CORPS (MRC) – PROVISION OF LIABILITY COVERAGE</u>

Ms. Brown advised Ms. Jung requested Mr. John Sherman of Washoe County be present to discuss the issue of liability coverage for Medical Reserve Corps volunteers; however, due to Ms. Jung not being present this item will be continued to the March 24, 2011 meeting. She did meet with Mr. Sherman, Ms. Admirand and Risk Management to discuss a "possible agreement in terms of how does [the Health District] create a robust Medical Reserve Corps (MRC) while addressing the liability concerns of the County. Progress has been achieved, with a tentative solution acceptable to everyone. She did confirm this with Ms. Jung and Staff will present the progress report at the March meeting.

STATUS OF ACCREDITATION PROCESS - STATE AND LOCAL HEALTH DEPARTMENTS

Ms. Brown

Advised the Board has discussed accreditation of the District Board of Health; that she investigated the current status of the accreditation process for the State and local health departments. "There currently is a two-pronged approach occurring with the grant; that one (1) is a position at the State in the Office of Epidemiology." The State is investigating assigning and staff member who would be responsible for investigating the "State being accredited as a public health entity." Within the next two (2) weeks an announcement will be posted for a position with the Nevada Public Health

Foundation for a "Performance Improvement Manager, who will be the technical advisor to the local health districts in the accreditation process." This would be a resource to the Washoe County Health District to prepare an analysis to determine "how close the Health District is in being ready to pursue accreditation." As the Board is aware, Carson City was a Beta test site for the accreditation process; that the Health District "will learn from the results of Carson City's process that the preparation can be very valuable in improving the organization." The goal is the Performance Improvement Manager will be available to all of the health districts to provide technical assistance as the district prepare for the accreditation process." When this individual has been hired she will advise the Board as to how Staff anticipates "being able to work with the individual." This process is "all grant-funded at no cost to the Health District."

The Board thanked Ms. Brown for the update.

STAFF REPORTS AND PROGRAM UPDATES

A. <u>Director, Epidemiology and Public Health Preparedness</u>

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

B. Acting Director, Community and Clinical Health Services

Mr. Steve Kutz, Acting Division Director, Community and Clinical Health Services, presented his monthly Acting Division Director Report, a copy of which was placed on file for the record.

C. Director, Environmental Health Services

Mr. Bob Sack, Director of Environmental Health Services, presented his monthly Division Director's Report, a copy of which was placed on file for the record.

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. Interim District Health Officer

Ms. Mary-Ann Brown, Interim District Health Officer, presented her Interim District Health Officer's Report, a copy of which was placed on file for the record.

Ms. Brown

As mentioned during the Budget update, she will be meeting with the colleges in the County to discuss "how can services be provided differently. She will be meeting with the County Departments which provide service to the construction industry to discuss possible duplication of services and how the Departments can work more effectively together. She will be meeting with Social Services to discuss in regard to the Health District's loss of services (i.e., the home visiting program); and how and what the opportunities may be to work in conjunction with Social Services. All of these meetings "align with the concept of working more collaboratively operationally to address how departments are to overcome the upcoming financial challenges."

The County's Multi-Stakeholders Task Force, to which she was appointed, scheduled its first meeting today conflicting with the District Board of Health meeting; that twice she questioned the date and time of that meeting; however, it was not changed. She requested Ms. Akurosawa, EMS Coordinator, attend the meeting as the Health District's representative.

In response to Dr. Khan

Regarding those meetings conflicting with the Board of Health meeting, Ms. Brown advised that additional meeting dates for the EMS Stakeholders Task Force have not yet been scheduled; therefore, she is hopeful there will not be another meeting schedule conflict.

Dr. Khan

Stated, in reviewing the FTE graphs provided in Ms. Brown's report, she would be interested in the "feasibility of creating a bar chart for the Budget meeting", delineating "what portion was from the local cost center as compared to the grant funding."

WASHOE COUNTY DISTRICT BOARD OF HEALTH MEETING February 24, 2011 Page 42

Ms. Brown

Stated Ms. Lori Cooke, Fiscal Compliance Officer "did a phenomenal job in developing these graphs; that the information is in response to a question by the Board as "to how many FTEs does the Health District have?" These graphs depict how many FTEs the Health District has and how many it previously had and the changes in each of the Divisions. Ms. Cooke has indicated she will be able to provide this information to the Board during the Budget meeting.

Ms. Brown

Stated in her handout "Committee on Appropriations", she underlined the proposed reductions to the President's Budget by the Committee on Appropriations; that those underlined have either a direct or indirect impact to Health District programs.

BOARD COMMENTS

There were no comments presented by the Board members.

There being no further business to come before the Board, the meeting was adjourned at 3:50 pm.

RECORDER

MARY-ANN BROWN, RN, MSN

ANTERIM DISTRICT HEALTH OFFICER/SECRETARY



A Proclamation by the Washoe County District Board of Health



WHEREAS, Mycobacterium tuberculosis (TB) is a leading cause of morbidity and mortality worldwide, causing disease in over one hundred residents of Nevada annually, infecting an estimated eight hundred more with the bacterium that causes tuberculosis, and placing Nevada as the eleventh highest state in the nation for TB cases per population in 2009; and

WHEREAS, Multi-Drug Resistant TB (MDR-TB) is becoming an increasing problem in the prevention and control of Tuberculosis, the spread of multi-drug resistant organisms challenges resources and threatens to undermine our goal to ultimately eliminate tuberculosis,

WHEREAS Nevada is one of only nine U.S. states to have reported treating cases of extensively drug resistant forms of tuberculosis (XDR-TB); and evaluates individuals from endemic countries with MDR and XDR TB; and

WHEREAS, pulmonary TB is contagious and completing an appropriate prescribed course of medication for infected individuals is critical in preventing the cycle of transmission; and

WHEREAS, the development of more rapid and accurate diagnostic tools and shorter treatment regimens for all forms of TB is vital to our success; and

WHEREAS, Washoe County Health District supports the individuals, families and communities, affected by this disease, and renew our commitment to preventing the spread of TB; and

WHEREAS, the Centers for Disease Control and Prevention and the Nevada State Health Division join together with Southern Nevada Health District, Washoe County District Health Department, Nevada State Health Division Frontier and Rural Public Health Services Program, Carson City Health and Human Services and Nevada State Public Health Laboratory to invite all health providers and residents of Nevada to participate in World TB Day, March 24, 2011 now, therefore, be it

PROCLAIMED, By the WASHOE COUNTY HEALTH DISTRICT that March 24, 2011 be recognized as World TB Day in Washoe County during which the Board urges all residents to become aware of the impact TB has in our community and learn more about this global health threat.

ADOPTED this 24th day of February, 2011

A. M. Smith III, Chairman



WASHOE COUNTY HEALTH DISTRICT AIR QUALITY MANAGEMENT DIVISION



Prevent. Promote. Protect.

DATE: February 24, 2011

TO: District Board of Health

FR: Kevin Dick, Air Quality Management

SUBJECT: Clark & Sullivan - Case No. 1061

Unappealed Citation No. 4334

Agenda Item: 7.A.1.a.

Recommendation

Air Quality Management Division Staff recommends that Citation No. 4334 be upheld and a fine of \$1,000 be levied against Clark & Sullivan for the demolition of four (4) houses located at 1127, 1133, 1137, and 1147 Evans Avenue in Reno, without filing the necessary federal EPA NESHAP forms with the Air Quality Management office. The Citation was issued for a violation of Section 030.105 of the District Board of Health Regulations Governing Air Quality. This is a negotiated settlement.

Recommended Fine: \$1,000 Negotiated Fine: \$1,000

Background

On November 19, 2010, Environmental Engineer Charlene Albee received a phone call from the job foreman at Clark & Sullivan regarding an underground storage tank unearthed while demolishing four (4) houses. Ms. Albee inquired about said demolition, and verified that the AQMD had not received the completed federal EPA NESHAP forms prior to demolition.

Air Quality Supervisor Noel Bonderson phoned Mr. Scott Koslowski (Asbestos Program Manager at UNR) about this demolition. Mr. Bonderson was directed to call Mr. Scott Brown (Project Manager), and he discovered that no NESHAP forms were filed on this job. Mr. Brown said that it was the contractor's responsibility to take care of obtaining all permits, and he directed Mr. Bonderson to call Mr. Jim Koepp of Clark & Sullivan. Mr. Bonderson also verified that asbestos containing material discovered in two of the houses (1137, 1147 Evans Avenue) had been properly abated by Advance Installations.

DBOH/Clark & Sullivan Case No. 1061 Page 2

Mr. Bonderson met with Mr. Koepp of Clark & Sullivan on January 11, 2011, regarding this matter. Mr. Koepp stated that it was his understanding that UNR personnel normally obtain all the necessary permits for all UNR properties, but he did accept responsibility in this case. As a result, NOV Citation No. 4334 was issued to Clark & Sullivan with a recommended fine of \$1,000. A Memorandum of Understanding was signed by both parties.

Alternatives

- 1. The District Board of Health may determine that no violation of the Regulations has taken place and dismiss NOV Citation No. 4334.
- 2. The District Board of Health may determine to uphold NOV Citation No. 4334 but levy any fine in the range of \$0 to \$10,000.

In the event the District Board of Health determines to change the Proposed penalty, the matter should be continued so that Clark & Sullivan may be properly noticed.

Kevin Dick

Division Director

Air Quality Management Division

in the

KD/NB: ma



WASHOE COUNTY DISTRICT HEALTH DEPARTMENT AIR QUALITY MANAGEMENT DIVISION 401 RYLAND STREET, SUITE 331 • P.O. BOX 11130 • RENO, NV 89520 (775) 784-7200 CMPII-008



NOTICE OF VIOLATION

				NOTICE	E OF VIOLATION	1 1
NOV	4334					DATE ISSUED: 1/11/11
ISSU	ED TO:	CLAR	IL d	SULLIVA N	PHONE #: _	
MAIL	ING ADDF	RESS:	905	INPUSTRIAL	- WAY CITY/ST:_	SPARICS, NV ZIP: 89431
						355- 8500
				DRIV	ER LICENSE #/SSN	
YOU	ARE IN VI	OLATION	OF THE	FOLLOWING S	ON <u>11/15/10</u> SECTION(S) OF THE QUALITY MANAGEME	(DATE) ATO QO O (TIME), WASHOE COUNTY DISTRICT BOARD ENT:
	NOR VIO	ATION O	F SECT	ION:	⊠MAJOR VIOLA	TION OF SECTION:
□ 04	0.030 <u></u> D	UST CON	ITROL		☐ 030.000 OPER	ATING W/O PERMIT
□ 04	0.055 (DDOR/NU	ISANCE		☐ 030.2175 VIOLA	ATION OF PERMIT CONDITION
□ 04	0.200 <u> </u>	DIESEL ID	LING		Ճ 030.105 ASBES	STOS/NESHAP
□ O ⁻	THER				OTHER	
						(4) HOUSES ON THE EPA NESHAP
	FORMS.					
			N:	27, 1133,	1137, 1147 1	EVANS AVE,
POIN	IT OF OBS	ERVATION	V:	ON SITE		
						Wind Direction From: N E S W
Emis	sions Obse	erved: (If Visu	ルA ual Emiss	sions Performed	- See attached Plum	ne Evaluation Record)
	ARNING OI					e) you are hereby ordered to abate the above receipt of this warning on the date indicated.
					_	
cited advise Board sion of If you	above. You ed that with I, P.O. Box 1 of this violati	are hereby in ten days 1130, Ren on to the D n to file an	ordered of the da o, Nevada district Boa appeal the	te of this violation a 89520. Failure to ard of Health, togo e appropriate fine ING THIS FORM	you may submit a writt submit a notice of app other with a request tha	
Issue		mal a	. Bow	beno-		Date:



DISTRICT HEALTH DEPARTMENT AIR QUALITY MANAGEMENT DIVISION

MEMO OF UNDERSTANDING

WASHOE COUNTY DISTRICT HEALTH DEPARTMENT AIR QUALITY MANAGEMENT DIVISION

Date:	
Company Name:	LLIVAN NAY, SPX Case No.: 196
The staff of the Air Quality Management Health Department issued the above references and the staff of the Air Quality Management Health Department issued the above references and the staff of the Air Quality Management Health Department is a supplied of the Air Quality Management Health Department is a supplied of the Air Quality Management Health Department is a supplied of the Air Quality Management Health Department is a supplied of the Air Quality Management Health Department is a supplied of the Air Quality Management Health Department is a supplied of the Air Quality Management Health Department is a supplied of the Air Quality Management Health Department is a supplied of the Air Quality Management Health Department is a supplied of the Air Quality Management Health Department is a supplied of the Air Quality Management Health Department is a supplied of the Air Quality Management Health Department is a supplied of the Air Quality Management Health Department is a supplied of the Air Quality Management Health Department Health Health Department Healt	erenced citation for the violation of
A settlement of this matter has been negresulting in a penalty amount of \$	This settlement will alth for review at the regularly scheduled
JIM KOEPP Print Name SOPT. Title	Print Name AQ SUPERVISOR Title
Witness	Witness
Witness	Witness

COMPLAINT INVESTIGATION REPORT Washoe County Air Quality Management Division

Complaint Number: CMP11-0008

cmp11-0022

Complaint Status: COMPLETE

Source of Complaint: INVESTIGATOR

Complaint Type: ASBESTOS

Date Received: 01/24/2011

Time: 12:00:00 AM

Inspector: NBONDERSON

Inspector Area: 5

Complaint Description: DEMOLITON OF FOUR (4) HOUSES ON EVANS AVE. WITHOUT

COMPLETING THE EPA NESHAP FORMS.

A CCIDENTLY

COMPLETED THE

WID ENTERING

Address: 1127 EVANS AVE RENO

Parcel Number: 00707104

NOV CITATION # 4334

RESPONSIBLE PARTY.

Related Permit Number:

Complainant:

Location:

Responsible Party:

CLARIC & SULLIVAN

Investigation:

On 11/19/10, Charlene Albee received a phone call from Clark & Sullivan regarding an underground storage tank unearthed during the demolition of four houses. Ms. Albee inquired about said demoliton, and verified that the AQMD had not received the completed federal NESHAP forms prior to demolition.

Subsequently, Noel Bonderson phoned Mr. Scott Brown at UNR (project manager) regarding the demolitions. Mr. Brown informed Mr. Bonderson that Clark & Sullivan had been hired to demolish four houses for university expansion purposes, and that he was not aware that the required demolition forms had not been filed with the AQMD. Two of the houses had some asbestos containing material that was properly abated by Advance Installations (1137/1147 Evans Ave.). Mr. Bonderson was directed to speak with Mr. Jim Koepp of Clark & Sullivan.

On 1/11/11, Mr. Bonderson met with Mr. Koepp regarding these demolitions. Mr. Koepp stated that Clark & Sullivan was not aware they were required to file the necessary NESHAP forms, and said UNR normally filed all necessary paperwork for all projects prior to commencement. However, he did accept responsibility in this case, and NOV #4334 was issued to Clark & Sullivan.

Enforcement Activities

 Warning Citation...:
 Citation Number:
 0

 NOV.......:
 NOV Number....:
 0

 Case Number....:
 0

 Settlement.....:
 Amount.......:
 \$0.00

Appealed....:

Upheld.....: \$0.00

Status Information

Initialized By.....: NBONDERSON Completed Date...: 01/25/2011

Date Assigned....: 01/24/2011 Completed By.....: NBONDERSON

COMPLAINT INVESTIGATION REPORT

Washoe County Air Quality Management Division

Complaint Number: CMP11-0022 GONTINUATION OF

CMP11-0008

Complaint Status: NOV Source of Comp

Source of Complaint: INVESTIGATOR

Complaint Type: ASBESTOS

Date Received: 02/14/2011

Time: 12:00:00 AM

Inspector: NBONDERSON

Inspector Area: 5

Complaint Description: CONTINUATION OF CMP11-0008 1-24-2011 - NOV 4334 CASE 1061

-DEMO OF 4 HOUSES W/O COMPLETING EPA NESHAP FORMS.

Address: 1127 EVANS AVE RENO

Location:

Parcel Number: 00707104

Related Permit Number:

Complainant: Responsible Party:

Investigation:

Enforcement Activities

Case Number....: 1061
Settlement.....: \$0.00

Appealed....:

Status Information

Initialized By.....: MAMES Completed Date...:

Date Assigned....: 02/14/2011 Completed By.....:

STAFF REPORT

Clark & Sullivan

VIOLATION: Section 030.105 - NESHAP

Notice of Violation #4334

Case #1061

Date of Incident – 11/15/10

ISSUED TO: Clark & Sullivan

On November 11, 2010, Charlene Albee received a phone call from Clark & Sullivan regarding an underground storage tank unearthed during the demolition of four houses. Engineer Albee inquired about said demolition, and verified that the AQMD had not received the completed federal NESHAP forms prior to demolition.

Subsequently, Air Quality Supervisor Noel Bonderson phoned Mr. Scott Brown at UNR (project manager) regarding the demolitions. Mr. Brown informed Supervisor Bonderson that Clark & Sullivan had been hired to demolish four houses for university expansion purposes, and that he was not aware that the required demolition forms had not been filed with the AQMD. Two of the houses had some asbestos containing material that was properly abated by Advance Installations. Mr. Bonderson was directed to speak with Mr. Jim Koepp of Clark & Sullivan on this matter.

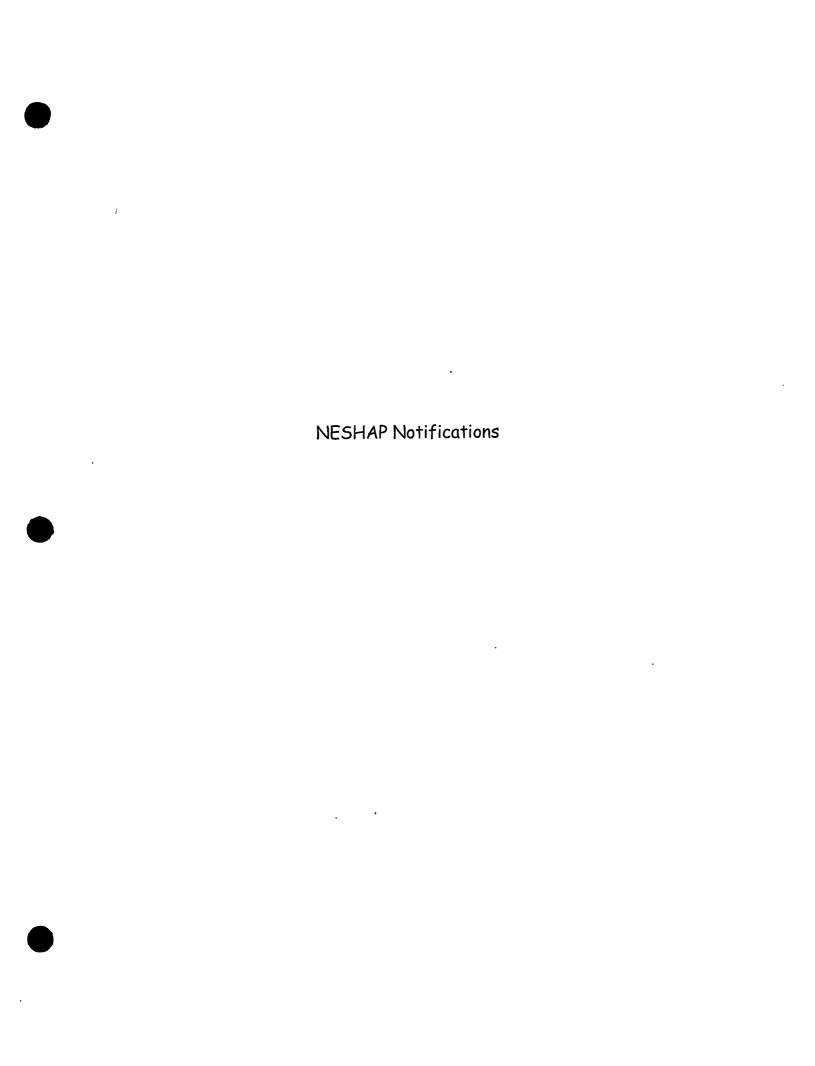
On January 11, 2011, Supervisor Bonderson met with Mr. Koepp regarding these demolitions. Mr. Keopp stated that Clark & Sullivan was not aware they were required to fill the necessary NESHAP forms, and said that UNR normally filed all necessary paperwork prior to project commencement. However, Mr. Koepp did accept responsibility in this case, and NOV #4334 was issued to Clark & Sullivan along with a \$1,000 fine. A Memorandum of Understanding was signed by both parties.

Noel A. Bonderson Air Quality Supervisor

RECOMMENDED FINE WORKSHEET

DATE : <u>1-12-2011</u>	CASE#: <u>1061</u>
COMPANY NAME: CLARK & SULLIVAN	
CONTACT NAME: JIM KOEPP	
VIOLATION: <u>030.105</u>	
SECTIONS:	TYPE OF VIOLATION: MAJOR
OCCURRENCE: 1st	
RANGE OF PENALTIES (PER DAY): \$	<u>0-\$10,000</u>
DEGREE OF VIOLATION: MAJOR - FEDER REQUIRED TO BE FILED PRIOR TO DEM SUBPART M.	ERAL EPA NESHAP FORMS ARE MOLITION PER 40 CFR PART 60,
ECONOMIC BENEFIT COMPONENT: NEPER HOUSE, THIS AMOUNT WAS PAID THE NESHAP FORMS ON 12-13-2010.	SHAP NOTIFICATION FEE OF \$113 WHEN CLARK & SULLIVAN FILED
DEGREE OF COOPERATION: GOOD, FILED THE NECESSARY NESHAP FORM	CLARK & SULLIVAN IMMEDIATELY IS UPON NOTIFICATION.
ADDITIONAL COMMENTS: MR. KOEPP RESPONSIBILITY FOR NOT FILING THE HE SAID THAT UNR CONTRACT REQUIR	E NESHAP FORMS, EVEN THOUGH
RECOMMENDED FINE: \$1,000	
	AQ SPECIALIST'S SIGNATURE

NOTE: "Minor Violations", per District regulations, cannot exceed \$1000 for the first and second violations. Third minor violations, plus "Major Violations" cannot exceed \$10,000 per day.



EPA NESHAP Notification OF DEMOLITION AND RENOVATION

FILL IN <u>ALL</u> NUMBERED BLANKS

Operator Project #	Postmark .	Date	Received			n Permit#	
			12-13-10		Mabil	0-0777	
1. TYPE OF NOTIFICATION (O=Origin			<u> </u>				
2. FACILITY INFORMATION (Identify C	Owner, Removal Contractor	r, and	Other Operato	or) 	<u></u>		
OWNER NAME: University	of Nevada	Pe	10, Faul	1Hes	Mona	perent	
Address: Mail Stop	of Nevada						
City:		Stat	e: 77		Zip: 80	1557	
Contact Person: Seo ++	Brown				Tel: 7	8465	514
REMOVAL CONTRACTOR: Clark & Sillian Contractors							
Address: 905 Industry	al in	-					
City:		Stat	e: NV		Zip: B	9431	
Contact Person: Palla	Eldelellion	 }. }	100			5585	00
OTHER OPERATOR/CONSULTANT:	Videren, o	<u> </u>	····				
Address:							
City:		Stat	e:		Zip:		
ontact Person:					Tel:		
3. TYPE OF OPERATION (D=Demo O	=Ordered Demo R=Renov	ation l	==Emergency	Renovation	1) 1		0
4. IS ASBESTOS PRESENT? (Yes/No							
5. Facility Description (Include Building	1 7 9	or Ro	om Number)	DCS: C	PENTIAC	······································	
D. H. C. Marian				REOTE	20011110		
Address: (5	vans Aue		<u></u>			•	
	State: NV County:	WA	SHOE Zi	p Code:			
On-Site Location:					********		
Building Size: 1 000 5 C		# of	Floors: 1	 .	<i>F</i>	Age in Year	s: 72
December 1,000 5 +		Prio	r Use:	sldent		icant	, 2
Present Use: Les du tral. PROCEDURE INCLUDING ANALYTICAL	- _ METHOD, IF APPROPRIAT	E, USI	ED TO DETECT	THE PRES	ENCE OF A		
7. APPROXIMATE AMOUNT OF ASBEST 1. Regulated ACM to be removed.	OS, INCLUDING:		Amount of RACM	1	unt of ACM Not	Amot Nonfriat	unt of ole ACM
2. Category I ACM Not Removed.			To Be		emoved		emoved
3. Category II ACM Not Removed.	a right of measurement ***	*	Removed	Cat I	Cat II	Cat I	Cat II
*** Note material being removed to the Pipes (Linear Ft.)	e right of measurement			Oati	Oatii	Oati	- Out II
Surface Area (Square Ft.)							
RACM off facility Component (Cub	ic Ft.)			-			
8. SCHEDULED DATES ASBESTOS		Stai	! t:	1	Completed:	I	l
9. SCHEDULED DATES DEMO/RENG		Star	+ / -	<i>i</i> C	completed:	11/10/1	
3. GOLLEGELD DALES DENIONENCE	SVITIOIA (WINNIDDITT)	Ciui	" 11. / (S /	10		<u> </u>	<u>ວ</u>

10. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND	METHODS TO BE USED:	
Heavy Equipment		OLONO OF AGRECTOR
11. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO AT THE DEMOLITION AND RENOVATION SITE:) BE USED TO PREVENT EMIS	SOLING OF ASRESTOS
WASTE TRANSPORTER #1 Quilla Contr	ction	
Name: Keuin Quilia		
. Address: 1465 Longles Lone		
City: Ner O State: NV	Zip: 39511	
Contact Person: Levin	Telephone: 8524	928
WASTE TRANSPORTER #2		
Name:		
Address:	-	
City: State:	Zip:	
Contact Person:	Telephone:	
13. WASTE DISPOSAL SITE LOCK WOO	d Landfill	
Name:		
Location: 2401 Canyon Way	<u> </u>	
City: Sparks State: NV	Zip: 89431	
Telephone: 342-0401		
14. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE IDENT	IFY THE AGENCY BELOW:	
Name: Title:		
uthority:		
Date of order (MM/DD/YY):	ordered to begin (MM/DD/YY	j; _.
15. FOR EMERGENCY RENOVATIONS:		
Date and hour of emergency (MM/DD/YY - HH:MM):		
Description of Sudden, Unexpected Event:	,	
Explanation of how the event caused unsafe conditions or would cause burden:	equipment damage or an unro	easonable financial
16. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THA PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLED, I		
Stop work / Contine to saturate, a	111 consultant	
17. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THIS BE ON-SITE DURING THE DEMOLITION OR RENOVATION AND EVIDENC ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION D	ETHAT THE REQUIRED TRAIN	IING HAS BEEN
	nature of Owner/Operator)	(Date)
18. <u>I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT</u> .		
(Print Name: Owner/Operator . (Affiliation) (AF	ERA Certificate Number)	(Expiration Date)
18 CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.	11	-
Pelin Eldelchlich Project Morager	HAN	12/17/10
(Print Name: Owner/Operator (Title) (Signature)	hature of Owner/Operator)	(Date)
//		

EPA NESHAP Notification OF DEMOLITION AND RENOVATION

FILL IN ALL NUMBERED BLANKS

Operator Project #	Postmark	Da	te Received		Notification	n Permit#		
	, ,	I	2/13/2010	9	+5810	-0780		
1. TYPE OF NOTIFICATION (O=Origin	nal R= Revised C=	Canceled)	0					
2. FACILITY INFORMATION (Identify C	2. FACILITY INFORMATION (Identify Owner, Removal Contractor, and Other Operator)							
OWNER NAME: University	1 of Ne	uada	leso ;	Facilitie	s Man	agen	-	
Addroso: A.	248					0		
City:		St	ate: NV		Zip: 8	9551		
Contact Person:	Brown				Tel: 7	8465	14	
IDENIONAL CONTRACTOR. 🚗 🕽		liver	Contra	utors			,	
Address: 905 Tradust		van						
City: Sparks		St	ate: NV	•	Zip: 80	1431		
Contact Person:	Eldelek lio	ام			l	55850) O	
OTHER OPERATOR/CONSULTANT:		J						
Address:					•			
City:		St	ate:		Zip:	•		
ontact Person:		'			Tel:			
3. TYPE OF OPERATION (D=Demo C	=Ordered Demo F	R=Renovatio	n E=Emerge	ncy Renovation	on) D			
4. IS ASBESTOS PRESENT? (Yes/No) 710	•						
5. Facility Description (Include Building	Name, Number, a	and Floor or I	Room Numb	er)			A	
Building Name:	· · · · · · · · · · · · · · · · · · ·					•		
Address: 1137 Evan	s Ave						diam's	
City: Pero	State: NV	County: W	ASHOE	Zip Code:				
On-Site Location:					·	7-7-		
Building Size: 1, 485		#	of Floors:	1	. <i>F</i>	\ge in Year	s: 60	
Present Use: R. sider that	7_	Pi	ior Use:	Lesiden	tial	-		
. PROCEDURE INCLUDING ANALYTICAL	L METHOD, IF APP	ROPRIATE, U	SED TO DET			CM:		
7. APPROXIMATE AMOUNT OF ASBEST	OS INCLUDING:		Amount	of Am	ount of	Amou	int of	
1. Regulated ACM to be removed.	OS, INCLUDING.		RACM	Nonfriab	e ACM Not	Nonfrial	ole ACM	
Category I ACM Not Removed. Category II ACM Not Removed.			To Be		Removed	To Be R	lemoved	
*** Note material being removed to th	e right of measure	ment ***	Remove	Cat I	Cat II	Cat I	Cat II	
Pipes (Linear Ft.)	e right of measure	mone						
Surface Area (Square Ft.)								
RACM off facility Component (Cub	oic Ft.)	<u> </u>				.,		
· ·					0 1 1		J	
8. SCHEDULED DATES ASBESTOS	REMOVAL (MM/C	D/YY) S	tart:		Completed:		•	

10. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK,	AND METHODS TO BE USED:	
Heavy Equipment	O TO DE LIGED TO DESCRIPT ENTE	SIONS OF ASSESTOS
11. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROL AT THE DEMOLITION AND RENOVATION SITE:		OIUNO UF MODEO 1UO
WASTE TRANSPORTER #1		
Name: Quilici Construction		
Address: 7465 - Longlein Lone		
City: Pero State:	Zip: 89511	
Contact Person: Karvin Quilici	Telephone: 85249	128
WASTE TRANSPORTER #2		
Name:		
Address:		
City: State:	Zip:	
Contact Person:	Telephone:	
13. WASTE DISPOSAL SITE Locale	· · · · · · · · · · · · · · · · · · ·	
Name:	A CONTRACTOR OF THE CONTRACTOR	
Location:		
City: State:	Zip:	
Telephone:		
14. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE I	DENTIFY THE AGENCY BELOW:	
Name:	Title:	
uthority:		
Date of order (MM/DD/YY):	Date ordered to begin (MM/DD/YY	():
15. FOR EMERGENCY RENOVATIONS:		
Date and hour of emergency (MM/DD/YY - HH:MM):		
Description of Sudden, Unexpected Event:		
Explanation of how the event caused unsafe conditions or would caburden:	ause equipment damage or an unr	eașonable financial
16. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBI	ED, PULVERIZED, OR REDUCED T	S FOUND OR. O POWDER:
Stop work, on time to sate	rate, call consul.	
17. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF BE ON-SITE DURING THE DEMOLITION OR RENOVATION AND EVID ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECT	THIS REGULATION (40 CFR PART 6 DENCE THAT THE REQUIRED TRAIN	NING HAS BEEN
(Print Name: Owner/Operator (Title)	(Signature of Owner/Operator)	(Date)
18. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.		
(Print Name: Owner/Operator . (Affiliation)	(AHERA Certificate Number)	(Expiration Date)
I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.		J
Peln Eldlichtele Proset Marager	THAP	12/13/10
(Print Name: Owner/Operator (Title)	(Signature of Owner/Operator)	(Date)

THE PROPERTY OF PROPERTY OF

EPA NESHAP Notification OF DEMOLITION AND RENOVATION

FILL IN <u>ALL</u> NUMBERED BLANKS

Operator Project #	Postmark		Received			n Permit#	٦.
1. TYPE OF NOTIFICATION (O=Origin	al R= Revised C=Cancele	ed)	0			·	3
2. FACILITY INFORMATION (Identify Owner, Removal Contractor, and Other Operator)							
OWNER NAME: Uniwsity of	c Nevada l	eno	, Facili	Hes	Moran	ever t	
Address: Mail Stop	_		-{		Ü		
City: Reso		Stat	e: NV		Zip: 8	1857	
Contact Person: 5coff	Brown				Tel:78	4 651	4
REMOVAL CONTRACTOR:		<u>م</u>	Contrac	AD CS			1
Address: 905 Indust							
City: Sparks		Stat	e: NV		Zip:30	1431	
Contact Person: Pelin E	Idelekilioglu	•			Tel: 3	55850	0
OTHER OPERATOR/CONSULTANT:					_		
Address:	1				•		
City:		Stat	te:		Zip:		
Contact Person:		······································			Tel:		
YPE OF OPERATION (D=Demo O	=Ordered Demo R=Reno	vation	E=Emergency	Renovation		•	
4. IS ASBESTOS PRESENT? (Yes/No	NO					$\widehat{}$	
5. Facility Description (Include Building	Name, Number, and Floo	r or Ro	oom Number)				7
Building Name:						~ (
Address: 1147 Evons	Ave						IVI
City:	State: NV County:	WA	SHOE Zi	p Code:	•		E.
On-Site Location:			•				
Building Size: 1, 107 > E		# of	Floors: 154	שאוע ציים	bosue +	\ge in Year	s: 65
Present Use: Residento	<u>ــــ</u>	Pric	r Use: Les	iden-la	ع		-
. PROCEDURE INCLUDING ANALYTICAL		ΓE, USI	ED TO DETECT	THE PRESI	ENCE OF A	CM:	
7. APPROXIMATE AMOUNT OF ASBESTO 1. Regulated ACM to be removed. 2. Category I ACM Not Removed. 3. Category II ACM Not Removed.	OȘ, INCLUDING:		Amount of RACM To Be Removed	Amou Nonfriable To Be Ro	ACM Not	Amou Nonfriab To Be R	ole ACM
*** Note material being removed to the	right of measurement **	*		Cat I	Cat II	Cat I	Cat II
Pipes (Linear Ft.)							•
Surface Area (Square Ft.)	·	,		`			
RACM off facility Component (Cubi	ic Ft.)						
8. SCHEDULED DATES ASBESTOS F	REMOVAL (MM/DD/YY)	Sta	rt:	С	ompleted:		- · · · ·
9. SCHEDULED DATES DEMO/RENO	OVATION (MM/DD/YY)	Sta	t: 11/15	110 C	ompleted:	11/19/	10 ^

TO. DESCRIPTION OF PLANNED DEMOLITION C		•	
11. DESCRIPTION OF WORK PRACTICES AND	ENGINEERING CONTRO	LS TO BE USED TO PREVENT EM	IISSIONS OF ASBESTOS
AT THE DEMOLITION AND RENOVATION SITE:	Water True	h_	
WASTE TRANSPORTER #1 () JM			
Name:			
Address: 7465 Longiles	lore		
City: Reno	State: NV	Zip: 89511	•
Contact Person:	مناا دن	Telephone: 852	4928
WASTE TRANSPORTER #2			
Name: .			
Address:			
City:	State:	Zip:	
Contact Person:		Telephone:	
13. WASTE DISPOSAL SITE Love La	och		
Name:			
Location:			
City:	State:	Zip:	
· Telephone:	<u></u>		
14. IF DEMOLITION ORDERED BY A GOVERNM	ENT AGENCY, PLEASE I	DENTIFY THE AGENCY BELOW:	
Name:	1	Title:	
Authority:			
ate of order (MM/DD/YY):		Date ordered to begin (MM/DD/)	<u>~</u> Y):
15. FOR EMERGENCY RENOVATIONS:			
Date and hour of emergency (MM/DD/YY -	HH:MM):		
Description of Sudden, Unexpected Event:	· · · · · · · · · · · · · · · · · · ·	//	
Explanation of how the event caused unsafe	e conditions or would ca	ause equipment damage or an u	reasonable financial
burden:		adoo oquipmont damago or air ai	
16. DESCRIPTION OF PROCEDURES TO BE FO			
PREVIOUSLY NONFRIABLE ASBESTOS MATER			
Stop work, Continu		rate, call consult	
17. I CERTIFY'THAT AN INDIVIDUAL TRAINED II BE ON-SITE DURING THE DEMOLITION OR		THIS REGULATION (40 CFR PART DENCE THAT THE REQUIRED TRA	
ACCOMPLISHED BY THIS PERSON WILL BE AV	AILABLE FOR INSPECT	ION DURING NORMAL BUSINESS	HOURS.
		•	
(Print Name: Owner/Operator	(Title)	(Signature of Owner/Operator)	(Date)
18. <u>I CERTIFY THAT THE ABOVE INFORMATION</u>	I IS CORRECT.		
	•		
(Print Name: Owner/Operator	(Affiliation)	(AHERA Certificate Number)	(Expiration Date)
19. I CERTIFY THAT THE ABOVE INFORMATION		1 /	
Pello Flote la la liente De	eet Mage	Than	12/12/10
(Print Name: Owner/Operator	(Title)	(Şignature of Owner/Operator)	(Date)
		//	

EPA NESHAP Notification OF DEMOLITION AND RENOVATION

FILL IN ALL NUMBERED BLANKS

Operator Project #	Postmark	Date	Received 12-13-20	10		n Permit#)- 0778)
1. TYPE OF NOTIFICATION (O=Original Control of the	inal R= Revised C=Canceled	i) ()				
2. FACILITY INFORMATION (Identify	Owner, Removal Contractor	r, and	Other Operate	or)			
OWNER NAME: Unwosth	of Need	τ.	Rep, =	Facille	c> 1	Nondse	na
Address: Mall Stop	248			···		0	
City: Vero	-	Stat	e: NV	•	Zip: 6	3955	1
	Brown				Tel: 7	34651	4
DELICITAL CONTENT	ric & Sillium	G	ntractor	-s			
City: Sparus Contact Person:		Stat	e: Nv		Zip: 80	7431	
Contact Person:	Eldeleleligh	<u> </u>	·····	•	Tel: 3	7431 5585	OO
OTHER OPERATOR/CONSULTANT:	· · · · · · · · · · · · · · · · · · ·			···			
Address:		,	·····				
City:		Stat	e:		Zip:		
ontact Person:					Tel:		
3. TYPE OF OPERATION (D=Demo	O=Ordered Demo R=Renova	ation	E=Emergency	Renovation	<u>')</u>		
4. IS ASBESTOS PRESENT? (Yes/N	o) NO) . ~
5. Facility Description (Include Buildin	<u> </u>	or Ro	om Number)				Ø1
Building Name: RE	SIDENTIAL		······································				
A 11	rons Ave						
City: Rao	State: NV County:	WA	SHOE Zi	p Code:	**		
On-Site Location:	•		*				
Building Size: 1/1/18 1 2	06s.F	# of	Floors: 1	floor	P	ge in Year	s: 59
Present Use: Restation		Pric		sderte	el/V	acant	
. PROCEDURE INCLUDING ANALYTICA	AL METHOD, IF APPROPRIATI	E, USI				CM:	
7. APPROXIMATE AMOUNT OF ASBES	TOS INCLUDING:		Amount of	Amou	ınt of	Amou	unt of
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Category I ACM Not Removed. Category II ACM Not Removed.		:	To Be Removed	To Be R	emoved	To Be R	emoved
*** Note material being removed to the	ne right of measurement ***		Temoved	Cat I	Cat II	Cat I	Cat II
Pipes (Linear Ft.)							
Surface Area (Square Ft.)							
RACM off facility Component (Cu	bic Ft.)						
8. SCHEDULED DATES ASBESTOS	REMOVAL (MM/DD/YY)	Sta	t:	C	ompleted:		_
9. SCHEDULED DATES DEMO/REN	IOVATION (MM/DD/YY)	Star	t: 11/15	100	ompleted:	4/11/	i 10

10. DESCRIPTION OF PLANNED DEMO 上上		ORK, AND METHODS TO BE USED:	
11. DESCRIPTION OF WORK PRACTIC) \	TROLS TO BE USED TO PREVENT EN	AISSIONS OF ASBESTOS
AT THE DEMOLITION AND RENOVATION		Truck	MICCIONO DI MCDELOTO
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	Construction		
Address: . 1465	Longier Lare		, , , , , , , , , , , , , , , , , , ,
City: pero	State:	V Zip: 89511	
Contact Person: KevM	Puillei	Telephone: 8524	928
WASTE TRANSPORTER #2			
Name:			
Address:	•	•	
City:	State:	Zip:	
Contact Person:		Telephone:	
13. WASTE DISPOSAL SITE 👢	octock L	ock wood Landfill	
Name:			
Location: 2401 Cc	anyon Way	· · · · · · · · · · · · · · · · · · ·	
City: Sparks	State: NV	Zip: 89431	
Telephone: 342 04	01		,
14. IF DEMOLITION ORDERED BY A GO	OVERNMENT AGENCY, PLEA	ASE IDENTIFY THE AGENCY BELOW:	
Name:		Title:	M - 1-100
Authority:	A		· · · · · · · · · · · · · · · · · · ·
ate of order (MM/DD/YY):	· · · · · · · · · · · · · · · · · · ·	Date ordered to begin (MM/DD/	YY):
15. FOR EMERGENCY RENOVATIO	NS:		
Date and hour of emergency (MM/L	DD/YY - HH:MM): .		
Description of Sudden, Unexpected	Event:		
Explanation of how the event cause burden:	ed unsafe conditions or wou	ld cause equipment damage or an u	nreasonable financial
16. DESCRIPTION OF PROCEDURES T			
PREVIOUSLY NONFRIABLE ASBESTO	•		
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ACCOMPLISHED BY THIS PERSON WII			
-	•		
(Print Name: Owner/Operator	(Title)	(Signature of Owner/Operator)	(Date)
18. I CERTIFY THAT THE ABOVE INFOR			
·			•
/Print Names Owner/Operator	(AGU-11-2)	(ALIEDA Cortificato Number)	(Euricelian Data)
(Print Name: Owner/Operator 19. I CERTIFY THAT THE ABOVE INFOR	(Affiliation) RMATION IS CORRECT.	(AHERA Certificate Number)	(Expiration Date)
Plan Flick line has	Project Manage	Alle	12/13/10
(Print Name: Owner/Operator	Title)	(Signature of Owner/Operator)	(Date)
1 Omionopolator	(1110)	//*	12010)



Washoe County Health District



STAFF REPORT **BOARD MEETING DATE: 2/24/11**

DATE:

January 20, 2011

TO:

District Board of Health

FROM:

Patsy Buxton, Fiscal Compliance Officer, Washoe County Health District

775-328-2418, pbuxton@washoecounty.us

THROUGH: Eileen Coulombe, Administrative Health Services Officer, Washoe

County Health District, 775-328-2417, ecoulombe@washoecounty.us

SUBJECT: Ratification of Interlocal Contract between the State of Nevada, Department of Conservation and Natural Resources, Division of Environmental Protection and the Washoe County Health District for the period July 1, 2011 through June 30, 2013 in the total amount of \$150,000 (not exceeding \$75,000 the first year) in support of the Hazardous Materials Grant Program; 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 an Interlocal Agreement from the State of Nevada Division of Environmental Protection in the amount of \$150,000 for the period July 1, 2011 through June 30, 2013 in support of the on-going Hazardous Materials Grant Program. A copy of the Interlocal Agreement 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 Hazardous Materials/Waste Management Program mission to protect public health and safety and the environment by ensuring that regulated or hazardous substances are properly processed, stored, handled, transported and disposed of in Washoe County.

AGENDA ITEM #7.c.1.

District Board of Health meeting of February 24, 2011 Page 2

BACKGROUND

This Interlocal Agreement supports the on-going grant program's participation in the Biennial Report System Project and the Targeted Sector Inspection Project. Participation includes site visits, and the conducting of inspections and carrying out of enforcement actions of business entities that utilize, store, or manufacture hazardous materials.

PREVIOUS ACTION

The District Board of Health approved the Interlocal Contract for the period July 1, 2009 through June 30, 2011 in the total amount of \$150,000 on January 22, 2009.

FISCAL IMPACT

Should the Board approve this Interlocal Agreement, there is a fiscal impact to the program, however, this impact is planned and will be included in the FY 12 budget. Revenue and expenditures for this contract will be projected in the Hazardous Materials Grant Program, internal order 10022, in various salary and benefits accounts, 701110 through 705230 and revenue account 432100.

RECOMMENDATION

Staff recommends that the Washoe County District Board of Health ratify the Interlocal Contract between the State of Nevada, Department of Conservation and Natural Resources, Division of Environmental Protection and the Washoe County Health District for the period July 1, 2011 through June 30, 2013 in the total amount of \$150,000 (not exceeding \$75,000 the first year) in support of the Hazardous Materials Grant Program; and if approved, authorize the Chairman to execute.

POSSIBLE MOTION

Move to ratify Interlocal Contract between the State of Nevada, Department of Conservation and Natural Resources, Division of Environmental Protection and the Washoe County Health District for the period July 1, 2011 through June 30, 2013 in the total amount of \$150,000 (not exceeding \$75,000 the first year) in support of the Hazardous Materials Grant Program; and if approved, authorize the Chairman to execute.

INTRASTATE INTERLOCAL CONTRACT BETWEEN PUBLIC AGENCIES

A Contract Between the State of Nevada Acting By and Through Its

Department of Conservation and Natural Resources, Division of Environmental Protection 901 S. Stewart Street, Suite 4001, Carson City, NV 89701-5249 Phone: (775) 687-4670 Fax (775) 687-5856

and

Washoe County Health District
Hereinafter the "Public Agency"

1001 E. Ninth Street, Reno, NV 89520

WHEREAS, NRS 277.180 authorizes any one or more public agencies to contract with any one or more other public agencies to perform any governmental service, activity or undertaking which any of the public agencies entering into the contract is authorized by law to perform; and

WHEREAS, it is deemed that the services hereinafter set forth are both necessary and in the best interests of [the State of Nevada;

NOW, THEREFORE, in consideration of the aforesaid premises, the parties mutually agree as follows:

- 1. <u>REQUIRED APPROVAL</u>. This Contract shall not become effective until and unless approved by appropriate official action of the governing body of each party.
- 2. <u>DEFINITIONS</u>. "State" means the State of Nevada and any state agency identified herein, its officers, employees and immune contractors as defined in NRS 41.0307.
- 3. <u>CONTRACT TERM</u>. This Contract shall be effective from <u>July 1, 2011</u> to <u>June 30, 2013</u>, unless sooner terminated by either party as set forth in this Contract.
- 4. <u>TERMINATION</u>. This Contract may be terminated by either party prior to the date set forth in paragraph (3), provided that a termination shall not be effective until <u>30</u> days after a party has served written notice upon the other party. This Contract may be terminated by mutual consent of both parties or unilaterally by either party without cause. The parties expressly agree that this Contract shall be terminated immediately if for any reason State and/or federal funding ability to satisfy this Contract is withdrawn, limited, or impaired.
- 5. <u>NOTICE</u>. All notices or other communications required or permitted to be given under this Contract shall be in writing and shall be deemed to have been duly given if delivered personally in hand, by telephonic facsimile with simultaneous regular mail, or mailed certified mail, return receipt requested, postage prepaid on the date posted, and addressed to the other party at the address set forth above.
- 6. <u>INCORPORATED DOCUMENTS</u>. The parties agree that the services to be performed shall be specifically described; this Contract incorporates the following attachments in descending order of constructive precedence:

ATTACHMENT A: SCOPE OF WORK (consisting of 8 pages)

ATTACHMENT B: ADDITIONAL TERMS & CONDITIONS (consisting of 3 pages)

7. <u>CONSIDERATION</u>. Washoe County Health District agrees to provide the services set forth in paragraph (6) at a cost of \$250.00 per completed inspection with the total Contract or installments payable: quarterly, not exceeding \$75,000.00 the first year for a contract total of \$150,000.00. Any intervening end to an annual or biennial appropriation period shall be deemed an automatic renewal (not changing the overall Contract term) or a termination as the results of legislative appropriation may require.

8. <u>ASSENT</u>. The parties agree that the terms and conditions listed on incorporated attachments of this Contract are also specifically a part of this Contract and are limited only by their respective order of precedence and any limitations expressly provided.

9. INSPECTION & AUDIT.

- a. <u>Books and Records</u>. Each party agrees to keep and maintain under general accepted accounting principles full, true and complete records, agreements, books, and documents as are necessary to fully disclose to the other party, the State or United States Government, or their authorized representatives, upon audits or reviews, sufficient information to determine compliance with any applicable regulations and statutes.
- b. <u>Inspection & Audit</u>. Each party agrees that the relevant books, records (written, electronic, computer related or otherwise), including but not limited to relevant accounting procedures and practices of the party, financial statements and supporting documentation, and documentation related to the work product shall be subject, at any reasonable time, to inspection, examination, review, audit, and copying at any office or location where such records may be found, with or without notice by the other party, the State Auditor, Employment Security, the Department of Administration, Budget Division, the Nevada State Attorney General's Office or its Fraud Control Units, the State Legislative Auditor, and with regard to any federal funding, the relevant federal agency, the Comptroller General, the General Accounting Office, the Office of the Inspector General, or any of their authorized representatives.
- c. <u>Period of Retention</u>. All books, records, reports, and statements relevant to this Contract must be retained by each party for a minimum of three years and for five years if any federal funds are used in this Contract. The retention period runs from the date of termination of this Contract. Retention time shall be extended when an audit is scheduled or in progress for a period reasonably necessary to complete an audit and/or to complete any administrative and judicial litigation which may ensue.
- 10. <u>BREACH; REMEDIES</u>. Failure of either party to perform any obligation of this Contract shall be deemed a breach. Except as otherwise provided for by law or this Contract, the rights and remedies of the parties shall not be exclusive and are in addition to any other rights and remedies provided by law or equity, including but not limited to actual damages, and to a prevailing party reasonable attorneys' fees and costs.
- 11. <u>LIMITED LIABILITY</u>. The parties will not waive and intend to assert available NRS chapter 41 liability limitations in all cases. Contract liability of both parties shall not be subject to punitive damages. To the extent applicable, actual contract damages for any breach shall be limited by NRS 353.260 and NRS 354.626.
- 12. <u>FORCE MAJEURE</u>. Neither party shall be deemed to be in violation of this Contract if it is prevented from performing any of its obligations hereunder due to strikes, failure of public transportation, civil or military authority, act of public enemy, accidents, fires, explosions, or acts of God, including, without limitation, earthquakes, floods, winds, or storms. In such an event the intervening cause must not be through the fault of the party asserting such an excuse, and the excused party is obligated to promptly perform in accordance with the terms of the Contract after the intervening cause ceases.
- 13. <u>INDEMNIFICATION</u>. Neither party waives any right or defense to indemnification that may exist in law or equity.
- 14. <u>INDEPENDENT PUBLIC AGENCIES</u>. The parties are associated with each other only for the purposes and to the extent set forth in this Contract, and in respect to performance of services pursuant to this Contract, each party is and shall be a public agency separate and distinct from the other party and, subject only to the terms of this Contract, shall have the sole right to supervise, manage, operate, control, and direct performance of the details incident to its duties under this Contract. Nothing contained in this Contract shall be deemed or construed to create a partnership or joint venture, to create relationships of an employer-employee or principal-agent, or to otherwise create any liability for one agency whatsoever with respect to the indebtedness, liabilities, and obligations of the other agency or any other party.

- 15. <u>WAIVER OF BREACH</u>. Failure to declare a breach or the actual waiver of any particular breach of the Contract or its material or nonmaterial terms by either party shall not operate as a waiver by such party of any of its rights or remedies as to any other breach.
- 16. <u>SEVERABILITY</u>. If any provision contained in this Contract is held to be unenforceable by a court of law or equity, this Contract shall be construed as if such provision did not exist and the nonenforceability of such provision shall not be held to render any other provision or provisions of this Contract unenforceable.
- 17. <u>ASSIGNMENT</u>. Neither party shall assign, transfer or delegate any rights, obligations or duties under this Contract without the prior written consent of the other party.
- 18. <u>OWNERSHIP OF PROPRIETARY INFORMATION</u>. Unless otherwise provided by law or this Contract, any reports, histories, studies, tests, manuals, instructions, photographs, negatives, blue prints, plans, maps, data, system designs, computer code (which is intended to be consideration under this Contract), or any other documents or drawings, prepared or in the course of preparation by either party in performance of its obligations under this Contract shall be the joint property of both parties.
- 19. <u>PUBLIC RECORDS</u>. Pursuant to NRS 239.010, information or documents may be open to public inspection and copying. The parties will have the duty to disclose unless a particular record is made confidential by law or a common law balancing of interests.
- 20. <u>CONFIDENTIALITY</u>. Each party shall keep confidential all information, in whatever form, produced, prepared, observed or received by that party to the extent that such information is confidential by law or otherwise required by this Contract.
- 21. <u>PROPER AUTHORITY</u>. The parties hereto represent and warrant that the person executing this Contract on behalf of each party has full power and authority to enter into this Contract and that the parties are authorized by law to perform the services set forth in paragraph (6).
- 22. <u>GOVERNING LAW; JURISDICTION</u>. This Contract and the rights and obligations of the parties hereto shall be governed by, and construed according to, the laws of the State of Nevada. The parties consent to the jurisdiction of the Nevada district courts for enforcement of this Contract.
- 23. <u>ENTIRE AGREEMENT AND MODIFICATION</u>. This Contract and its integrated attachment(s) constitute the entire agreement of the parties and such are intended as a complete and exclusive statement of the promises, representations, negotiations, discussions, and other agreements that may have been made in connection with the subject matter hereof. Unless an integrated attachment to this Contract specifically displays a mutual intent to amend a particular part of this Contract, general conflicts in language between any such attachment and this Contract shall be construed consistent with the terms of this Contract. Unless otherwise expressly authorized by the terms of this Contract, no modification or amendment to this Contract shall be binding upon the parties unless the same is in writing and signed by the respective parties hereto, approved by the State of Nevada Office of the Attorney General.

Signature - Board of Examiners

Date:_____

Deputy Attorney General for Attorney General

Date:____

IN WITNESS WHEREOF, the parties hereto have caused this Contract to be signed and intend to

ATTACHMENT A: To the Contract (Control No. DEP11-012) between the Nevada Department of Conservation and Natural Resources, Division of Environmental Protection (**Division**) and the Washoe County Health District (**District**).

The Division agrees to pay for the services set forth in the following Scope of Work, subject to all other terms of the contract agreement, as follows:

- \$250 for each BR Project site visit and Targeted Sector Inspection (to include all required enforcement, case file documentation and RCRAInfo Data entry);
- Total amount expended in SFY12 may not exceed \$75,000. All unexpended SFY12 funds will carry over to SFY13.

The **District's** hazardous waste authority remains limited to the BR Project and the CESQG/SQG Targeted Sector Inspections described in Section 1 and Section 2 below. No other hazardous waste authority is authorized or implied by this contract.

SFY 12-13 Scope of Work

The **District** agrees to perform the following projects and tasks according to the schedules and in the priority described, and in accordance with the policies and procedures provided by the **Division**.

The **District** agrees to appoint a **contract coordinator** who will assure that all **District** staff that perform work on this contract are familiar with the contract Scope of Work requirements and who will assure that all the requirements of the contract are completed in the time frames specified in the contract.

1. Biennial Report (BR) Project:

- a. For each handler in Washoe County identified by the **Division** as a non-reporter for the 2011 BR report year:
 - 1. Visit each site on the list;
 - 2. Issue an Informal Enforcement Action (Warning Letter, see example letter on Page 5), according to the procedures provided by the **Division**, that requires the handler to submit a properly completed BR Report to the **District** within 15 days;
 - 3. Enter Informal Enforcement Action (Warning Letter) documentation into RCRAInfo;
 - 4. Review each BR Report submitted to the District for completeness;
 - 5. Issue Return to Compliance Letter (see example letter on Page 6) to handlers that submit a properly completed BR Report to the **District**;
 - 6. Enter Return to Compliance documentation into RCRAInfo;
 - 7. Submit the completed BR Report forms to the **Division** at least once every two weeks;
 - 8. Complete and maintain all required documentation in accordance with the procedures provided by the **Division**;
- b. Except as noted below, once the non-reporter list has been made available to the District, the BR Report Project site visits will be conducted to the exclusion of other contract activities until all of the facilities have been contacted and all outstanding forms received.

- 2. Targeted Sector Inspection Project: Based on the generators selected by the Division:
 - a. Conduct a full Compliance Evaluation Inspection (CEI) at each targeted business designated by the **Division** to determine compliance with the hazardous waste regulations. If a CEI checklist is utilized, the checklist must contain all information required for CEI reports as described in the NDEP/BWM Hazardous Waste Enforcement Policy and Procedure Staff Guide.
 - b. If no businesses have been designated by the **Division**, identify (by NAICS number, SIC number or by other means) the targeted sector businesses within Washoe County. The **District** will submit a list of potential target sector businesses to the **Division**, for review, 10 working days prior to initiating the project.
 - c. Issue an Informal Enforcement Action (Warning Letter) as specified in the NDEP/BWM Hazardous Waste Enforcement Policy and Procedure Staff Guide if violations are found.
 - d. Complete the following documentation for each inspection and maintain them in a site case file and RCRAInfo database:
 - 1. The CEI report or site inspection checklist;
 - 2. Photographs and/or detailed description of all violations;
 - 3. Copies of all correspondence relating to the inspection and/or enforcement action;
 - 4. Copies of each warning letter issued or the case referral letter to the Division;
 - 5. Enter Warning Letter documentation into RCRAInfo for all violations;
 - 5. Copies of the return-to-compliance (RTC) documentation;
 - 6. A case closure letter (when RTC has been determined by the District);
 - 7. Enter Return to Compliance documentation into RCRAInfo;
 - 8. Any other relevant information or documentation.
 - e. Notify the Division after each target generator list has been completed. The **Division** will prepare and provide the next generator list based on current EPA-DEP grant commitments within 10 working days after notification by the **District** that the previous generator list has been completed.

3. RCRAInfo Data Entry:

- Assign one primary, and one alternate person, to enter all inspection, violation and enforcement action information into the RCRAInfo database according to the procedures provided by the Division;
- b. The primary or the alternate will verify that all applicable compliance and enforcement information for the quarter entered by the **District** into the RCRAInfo database is complete and accurate, within three (3) days after the end of each quarter;
- c. The **District** and the **Division** will work together to resolve any data quality questions in the RCRAInfo database.

4. Safety Training and Personnel Protective Equipment:

- a. Assure that each **District** contract inspector has received OSHA approved 40-hour Personal Protection and Safety Training prior to performing field inspections for this contract and that the inspector receives annual OSHA approved 8-hour refresher training.
- b. Provide each District contract inspector with all OSHA required personal protective equipment.
- 5. Coordination and Point of Contact with Division Staff: District staff will:
 - a. Participate in inspection coordination meetings with the **Division** staff, upon request;
 - b. Contact the Supervisor of the Program Development Branch of the Bureau of Waste Management in the **Division's** Carson City office for all issues involving:
 - 1. The Biennial Report Project;
 - 2. Quarterly Reporting;
 - 3. Number of Activities to be conducted; and
 - 4. Filing Invoices.
 - c. Contact the Supervisor of the Waste Management Compliance and Enforcement Branch staff in the **Division's** Carson City Office for all compliance and enforcement issues involving:
 - 1. The Targeted Sector Inspection Project;
 - 2. RCRAInfo Data Entry; and
 - 3. Safety Training and Personnel Protective Equipment.
 - 4. All CEI inspections and/or CEI enforcement issues.
 - d. Participate in contract review meetings and oversight inspections with the **Division** staff, upon request. The program reviews may include a meeting with **District** representatives to discuss any issues, problems or cases; a case file review; and an oversight inspection.
- **6.** Quarterly Reporting: Submit a Quarterly Report to the Division's Carson City office. The report must:
 - a. Consist of one original and three copies;
 - b. Be submitted within ten (10) calendar days after the end of each quarterly period;
 - c. Include a transmittal letter and information on the activities conducted under this contract in table form, as specified on page 7 of this attachment.

7. Number of Activities to be Conducted:

- a. Conduct at least sixty (60) BR Project site contacts and/or Targeted Sector CEI Inspections (combined total) each quarter;
- b. The combined total in Section 7a. shall not exceed 80 events per quarter, without prior approval of the **Division** Contract Coordinator;
- b. Total billable events shall not exceed 300 per contract year.
- 8. Billing Invoices: The Division may withhold payment of a quarterly invoice until all required RCRAInfo data entry for the previous quarter(s) is completed. Final contract payment will not be approved until all required RCRAInfo data entry is completed for work conducted under the terms of this contract.
 - a. Submit an original billing invoice to the **Division's** Carson City office for each contract quarter. Each billing invoice will consist of a cover letter on the **District's** letterhead paper and will follow the format described on page 8 of this attachment;
 - b. Submit a written explanation for any invoice that is not submitted by the deadline date. The information must include a reasonable expected submittal date.
 - c. Work directly with the **District's** accounting office staff to resolve any problems or discrepancies with the quarterly billing documents. **Division** staff will return problem invoices directly to the **District's** contract coordinator.

June 1, 2012

Barney Rubble Acme Towing Company 1329 Bonanza Hwy Reno, NV 89521

CERTIFIED MAIL RETURN RECEIPT REQUESTED

WARNING LETTER

Dear Mr. Rubble:

On May 21, 2012, Washoe County Health District (WCHD) staff conducted an inspection of the Acme Towing Company facility located at 1329 Bonanza Hwy, Reno, Nevada to evaluate the facility's compliance with all applicable Federal and State hazardous waste management regulations.

Based on the information gathered during the May 21, 2012 inspection, WCHD has determined that the Acme Towing Company facility is allegedly in violation of the following provisions of the Nevada Administrative Code (NAC):

A. <u>Finding:</u> The Acme Towing Company facility did not submit the 2011 Biennial Hazardous Waste Report to the Nevada Division of Environmental Protection, Bureau of Waste Management (NDEP-BWM) by the required deadline of March 1, 2012.

NAC 444.8675 Biennial reports by generators of hazardous waste.

- 1. A generator shall submit to the Director a report for the hazardous waste generated during odd-numbered years no later than March 1 of the next following even-numbered year.
- 2. The biennial report must contain the information requested on the appropriate form supplied by the Division.
- 3. A generator shall retain a copy of each of his biennial reports for at least 3 years after the report became due. The period required for the retention of each such report is automatically extended during the course of any unresolved action for enforcement regarding the generator or as requested by the Director.
- 4. As used in this section, "generator":
- (a) Has the meaning ascribed to it in 40 C.F.R. § 260.10; and
- (b) Includes a person who has given notice that he is a generator of hazardous waste and holds an active identification number issued pursuant to 40 C.F.R. § 262.12.

By issuing a Warning Letter, the WCHD is providing the Acme Towing Company facility with the opportunity to comply without incurring penalties. However, the Acme Towing Company facility must correct the alleged violations noted and submit documentation to the Washoe County Health District demonstrating that these alleged violations no longer exist. Therefore, you are hereby directed to complete the following activities:

1. Submit the 2011 Biennial Hazardous Waste Report to the Washoe County Health District.

Submit all information requested in this letter no later than 15 days to:

John Doe Washoe County Health District P.O. Box 11130 Reno, NV 89520

Future alleged violations of hazardous waste statutes and regulations will result in the issuance of formal enforcement actions. By eliminating or reducing the amount of waste you generate, you can often minimize or eliminate future compliance problems. Free and confidential pollution prevention assistance may be obtained from the Business Environmental Program, Small Business Development Center, University of Nevada at (800) 882-3233 (for calls originating within Nevada).

Please direct any questions regarding this Warning Letter to me at (775) 328-2400.

Sincerely,

John Doe Washoe County Health District

cc Evan Chambers, NDEP-Carson City

July 19, 2012

Barney Rubble
Acme Towing Company
1329 Bonanza Hwy
Reno NV 89521

Dear Mr. Rubble:

In response to the Informal Enforcement Action, Warning Letter, issued on June 8, 2012, Washoe County Health District (WCHD) staff has received and reviewed the documents submitted by Acme Towing Company. WCHD staff issued the Verbal Warning based on the alleged violation noted during the inspection conducted on May 21, 2012.

The WCHD staff has determined the Acme Towing Company's response fulfills the requirements of the Warning Letter.

Thank you for your assistance in this matter.

Sincerely,

John Doe

Washoe County Health District

XX:

cc: Evan Chambers, NDEP-Carson City

QUARTERLY REPORT FORMAT

Compliance Monitoring List

	Type Visit (check one)					
Site Name (list all)	BR	TSI				
1.						

Compliance Monitoring Statistics

	BR	TSI
# Sites Contacted		
# In Compliance		

Enforcement Statistics

	BR	TSI	Complaints
# Out of Compliance			
# Enf Actions Taken -			
Verbal Warnings			
Warning Letters			
# RTC Within 60 Days			
# Referred to Division			

{EXAMPLE INVOICE}

Washoe County Health District P.O. Box 11130 Reno, NV 89520

Hazardous Waste Contract Contract Control #: DEP11-012.

Time Period of Expenditures: Oct – Dec 2011

	Approved	Quarterly	Year to Date	Balance		
	Budget	Expenditures	Expenditures	Remaining		
Year 1	75,000	17,500	36,250	38,750		

Number of BR Activities Conducted this Quarter: $30 \times $250 = $7,500$ Number of TSI Activities Conducted this Quarter $40 \times $250 = $10,000$ Total # of Activities Conducted this Quarter: $70 \times $250 = $17,500$

AMOUNT REQUESTED: \$17,500.00

AGENCY SIGNATURE: _____ DATE: ____

Year 2 invoices must include cumulative totals (year 1-2)

ATTACHMENT B: ADDITIONAL AGENCY TERMS & CONDITIONS TO CONTRACT FOR SERVICES OF PUBLIC AGENCY CONTRACT CONTROL # DEP11-012

- 1. For contracts utilizing federal funds, the Nevada Division of Environmental Protection shall pay no more compensation that the federal Executive Service Level 4 (U.S. Code) daily rate (exclusive of fringe benefits) for individual consultants retained by the Public Agency or by the Public Agency's contractors or subcontractors. This limitation applies to consultation services of designated individuals with specialized skills who are paid at a daily or hourly rate. The current Level 4 rate is \$74.50 per hour.
- 2. NDEP shall only reimburse the Public Agency for actual cash disbursed. Original invoices (facsimiles are not acceptable) must be received by NDEP no later than forty (40) calendar days after the end of a month or quarter except at the end of the fiscal year of the State of Nevada (June 30th), at the expiration date of the grant, or the effective date of the revocation of the contract, at which times original invoices must be received by NDEP no later than thirty-five (35) calendar days after this date. Failure of the Public Agency to submit billings according to the prescribed timeframes authorizes NDEP, in its sole discretion, to collect or withhold a penalty of ten percent (10%) of the amount being requested for each week or portion of a week that the billing is late. The Public Agency shall provide with each invoice a detailed fiscal summary that includes the approved contract budget, expenditures for the current period, cumulative expenditures to date, and balance remaining for each budget category. If match is required pursuant to paragraph 3 below, a similar fiscal summary of match expenditures must accompany each invoice. The Public Agency shall obtain prior approval to transfer funds between budget categories if the funds to be transferred are greater than ten percent (10%) cumulative of the total Contract amount.
- 3. The Public Agency shall, as part of its approved scope of work and budget under this Contract, provide third party match funds of not less than: \$\frac{N/A}{\text{.}}\$. If match funds are required, the Public Agency shall comply with additional record-keeping requirements as specified in 40 CFR 31.24 and Attachment \frac{N/A}{\text{.}}\$ (Third Party Match Record-Keeping Requirements) which is attached hereto and by this reference is incorporated herein and made part of this Contract.
- 4. Unless otherwise provided in Attachment A (Scope of Work), the Public Agency shall submit quarterly reports or other deliverables within ten (10) calendar days after the end of each quarter.
- 5. All payments under this Contract are contingent upon the receipt by NDEP of sufficient funds, necessary to carry out the purposes of this Contract, from either the Nevada Legislature or an agency of the United States. NDEP shall determine if it has received the specific funding necessary for this Contract. If funds are not received from either source for the specific purposes of this Contract, NDEP is under no obligation to supply funding for this Contract. The receipt of sufficient funds as determined by NDEP is a condition precedent to NDEP's obligation to make payments under this Contract. Nothing in this Contract shall be construed to provide the Public Agency with a right of payment over any other entity. If any payments that are otherwise due to the Public Agency under this Contract are deferred because of the unavailability of sufficient funds, such payments will promptly be made to the Public Agency if sufficient funds later become available.
- 6. Notwithstanding the terms of paragraph 5, at the sole discretion of NDEP, payments will not be made by NDEP unless all required reports or deliverables have been submitted to and approved by NDEP within the schedule stated in Attachment A.
- 7. Any funds obligated by NDEP under this Contract that are not expended by the Public Agency shall automatically revert back to NDEP upon the completion, termination or cancellation of this Contract. NDEP shall not have any obligation to re-award or to provide, in any manner, such unexpended funds to the Public Agency. The Public Agency shall have no claim of any sort to such unexpended funds.
 - 8. For contracts utilizing federal funds, the Public Agency shall ensure, to the fullest extent possible, that at least the "fair share" percentages as stated below for prime contracts for construction, services, supplies or equipment are made available to organizations owned or controlled by socially and economically disadvantaged individuals (Minority Business Enterprise (MBE) or Small Business Enterprise (SBE)), women (Women Business Enterprise (WBE)) and historically black colleges and universities.

	MBE/SBE	WBE
Construction	12%	10%
Services	07%	25%
Supplies	13%	28%
Equipment	11%	23%

The Public Agency agrees and is required to utilize the following seven affirmative steps:

- a. Include in its bid documents applicable "fair share" percentages as stated above and require all of its prime contractors to include in their bid documents for subcontracts the "fair share" percentages;
- b. Include qualified Small Business Enterprises (SBEs) Minority Business Enterprises (MBEs), and Women Business Enterprises (WBEs) on solicitation lists;
- c. Assure that SBEs, MBEs, and WBEs are solicited whenever they are potential sources;
- d. Divide total requirements, when economically feasible, into small tasks or quantities to e. permit maximum participation of SBEs, MBEs, and WBEs;
- e. Establish delivery schedules, where the requirements of the work permit, which will encourage participation by SBEs, MBEs, and WBEs;
- f. Use the services and assistance of the Small Business Administration and the Minority Business Development Agency, U.S. Department of commerce as appropriate; and
- g. If a subcontractor awards contracts/procurements, require the subcontractor to take the affirmative steps in subparagraphs a. through e. of this condition.
- 9. The Public Agency shall complete and submit to NDEP a Minority Business Enterprise/Woman Business Enterprise (MBE/WBE) Utilization Report (Standard Form 334) within fifteen (15) calendar days after the end of each federal fiscal year (September 30th) for each year this Contract is in effect and within fifteen (15) calendar days after the termination date of this Contract.
- 10. The books, records, documents and accounting procedures and practices of the Public Agency or any subcontractor relevant to this Contract shall be subject to inspection, examination and audit by the State of Nevada, the Division of Environmental Protection, the Attorney General of Nevada, the Nevada State Legislative Auditor, the federal or other funding agency, the Comptroller General of the United States or any authorized representative of those entities.
- 11. All books, reports, studies, photographs, negatives, annual reports or other documents, data, materials or drawings prepared by or supplied to the Public Agency in the performance of its obligations under this Contract shall be the joint property of both parties. Such items must be retained by the Public Agency for a minimum of three years from the date of final payment by NDEP to the Public Agency, and all other pending matters are closed. If requested by NDEP at any time within the retention period, any such materials shall be remitted and delivered by the Public Agency, at the Public Agency's expense, to NDEP. NDEP does not warrant or assume any legal liability or responsibility for the accuracy, completeness, or usefulness of any information, report or product of any kind that the Public Agency may disclose or use for purposes other than the performance of the Public Agency's obligations under this Contract. For any work outside the obligations of this Contract, the Public Agency must include a disclaimer that the information, report or products are the views and opinions of the Public Agency and do not necessarily state or reflect those of NDEP nor bind NDEP.
- 12. Unless otherwise provided in Attachment A, when issuing statements, press releases, requests for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with funds provided under this Contract, the Public Agency shall clearly state that funding for the project or program was provided by the Nevada Division of Environmental Protection and, if applicable, the U.S. Environmental Protection Agency. The Public Agency will insure that NDEP is given credit in all official publications relative to this specific project and that the content of such publications will be coordinated with NDEP prior to being published.

13. Unless otherwise provided in Attachment A, all property purchased with funds provided pursuant to this Contract is the property of NDEP and shall, if NDEP elects within four (4) years after the completion, termination or cancellation of this Contract or after the conclusion of the use of the property for the purposes of this Contract during its term, be returned to NDEP at the Public Agency's expense.

Such property includes but is not limited to vehicles, computers, software, modems, calculators, radios, and analytical and safety equipment. The Public Agency shall use all purchased property in accordance with local, state and federal law, and shall use the property only for Contract purposes unless otherwise agreed to in writing by NDEP.

For any unauthorized use of such property by the Public Agency, NDEP may elect to terminate the Contract and to have the property immediately returned to NDEP by the Public Agency at the Public Agency's expense. To the extent authorized by law, the Public Agency shall indemnify and save and hold the State of Nevada and NDEP harmless from any and all claims, causes of action or liability arising from any use or custody of the property by the Public Agency or the Public Agency's agents or employees or any subcontractor or their agents or employees.

- 14. The Public Agency shall use recycled paper for all reports that are prepared as part of this Contract and delivered to NDEP. This requirement does not apply to standard forms.
- 15. The Public Agency, to the extent provided by Nevada law, shall indemnify and save and hold the State of Nevada, its agents and employees harmless from any and all claims, causes of action or liability arising from the performance of this Contract by the Public Agency or the Public Agency's agents or employees or any subcontractor or their agents or employees. NDEP, to the extent provided by Nevada law, shall indemnify and save and hold the Public Agency, its agents and employees harmless from any and all claims, causes of action or liability arising from the performance of this Contract by NDEP or NDEP's agents or employees.
- 16. The Public Agency and its subcontractors shall obtain any necessary permission needed, before entering private or public property, to conduct activities related to the work plan (Attachment A). The property owner will be informed of the program, the type of data to be gathered, and the reason for the requested access to the property.
- 17. This Contract shall be construed and interpreted according to the laws of the State of Nevada and conditions established in OMB Circular A-102. Nothing in this Contract shall be construed as a waiver of sovereign immunity by the State of Nevada. Any action brought to enforce this contract shall be brought in the First Judicial District Court of the State of Nevada. The Public Agency and any of its subcontractors shall comply with all applicable local, state and federal laws in carrying out the obligations of this Contract, including all federal and state accounting procedures and requirements established in OMB Circular A-87 and A-133. The Public Agency and any of its subcontractors shall also comply with the following:
 - 40 CFR Part 7 Nondiscrimination In Programs Receiving Federal Assistance From EPA
 - b. 40 CFR Part 29 Intergovernmental Review Of EPA Programs And Activities.
 - c. 40 CFR Part 31 Uniform Administrative Requirements For Grants And Cooperative Agreements To State and Local Governments;
 - d. 40 CFR Part 32 Governmentwide Debarment And Suspension (Nonprocurement) And Governmentwide Requirements For Drug-Free Workplace (Grants):
 - e. 40 CFR Part 34 Lobbying Activities;
 - f. 40 CFR Part 35, Subpart O Cooperative Agreements And Superfund State Contracts For Superfund Response Actions (Superfund Only); and
 - g. The Hotel And Motel Fire Safety Act of 1990.
- 18. The Public Agency shall neither assign, transfer nor delegate any rights, obligations or duties under this Contract without the prior written consent of NDEP.



Washoe County Health District



STAFF REPORT BOARD MEETING DATE: 2/24/11

DATE:

February 11, 2011

TO:

District Board of Health

FROM:

Patsy Buxton, Fiscal Compliance Officer, Washoe County Health District

775-328-2418, pbuxton@washoecounty.us

THROUGH: Eileen Coulombe, Administrative Health Services Officer, Washoe County

Health District, 775-328-2417, ecoulombe@washoecounty.us

SUBJECT: Approval of Notice of Subgrant Award from the Nevada State Health Division in the amount of \$83,582 (with \$8,358 or 10% Health District match) for the period February 21, 2011 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 \$83,582 in both revenue and expense to the FY 11 CDC PHP Federal Grant Program (2008 Carry Forward), IO 10713; 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 February 21, 2011 through August 9, 2011 in the total amount of \$83,582 in support of the Public Health Preparedness CDC Grant Program (2008 Carry Forward). 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.

PREVIOUS ACTION

The District Board of Health approved 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) Base Program at their 11/18/10 meeting.

District Board of Health meeting of February 24, 2011 Page 2

BACKGROUND

The Washoe County Health District received an award from the Nevada State Health Division in the amount of \$797,458 for the period August 10, 2008 through August 9, 2009 in support of PHP Base activities. At the end of this project period the grant had an available balance of \$83,582.

In February 2010 the Public Health Preparedness program submitted an application to the State requesting carry forward funds. Funds will be used to support the purchase of a mobile communications and command trailer.

The mobile communications and command trailer is for use in field locations where mass vaccination or other countermeasures might be distributed in a parking lot or other location. The trailer would serve as a platform for incident command as well as internet and/or radio communications among field staff as well as the Department Operations Center (DOC). The trailer (approximately 16x10) is configured with radio racks, generator, HVAC system, countertops, cabinets, and necessary accessories for operation.

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 increased by \$83,582 in the following accounts:

		Amount of
Account Number	Description	Increase/(Decrease)
2002-IO-10713 -431100	Federal Revenue	\$83,582
2002-IO-10713-781004	Equipment - Capital	83,582
	Total Expenditures	\$83,582

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 \$83,582 (with \$8,358 or 10% Health District match) for the period February 21, 2011 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 \$83,582 in both revenue and expense to the FY 11 CDC PHP Federal Grant Program (2008 Carry Forward), IO 10713; 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 \$83,582 (with \$8,358 or 10% Health District match) for the period February 21, 2011 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 \$83,582 in both revenue and expense to the FY 11 CDC PHP Federal Grant Program (2008 Carry Forward), IO 10713; and if approved authorize the Chairman to execute.

NV Department of Health & Human Services HEALTH DIVISION

Health Division #: 11079
Program #: CDC07-08a
Budget Account #: 3218
Category #: 22
GL #: 8516

(hereinafter referred to as the DIVISION)

NOTICE OF SUBGRANT AWARD

Program Name: Public Health Preparedness Nevada State Health Division	- BIOT08 - 93069CF9	Subgrantee Name: Washoe County Health Distr	rict (WCHD)
Address: 4150 Technology Way, Suite #200		Address: 1001 East Ninth Street Reno, NV 89520	
Carson City, NV 89706		17610, 144 03020	
Subgrant Period: February 21, 2011 through August	9, 2011	Subgrantee EIN#: Subgrantee Vendor#: DUNS #	88-6000138 T40283400Q 073786998
Reason for Award: 2008 CDC P Funds are intended to continue the response to bioterrorism, outbreak	e upgrade of state a	nd Local public health jurisdicti	ons' preparedness and
County(ies) to be served: () St	atewide (X) Specifi	c county or counties: Washoe	e County
Approved Budget Categories:			
1. Personnel \$ 2. Contractual/Consultant \$ 3. Travel \$ Supplies \$	0 0 0 0		
5. Equipment \$ 6. Other \$	83,582 0		
7. Indirect \$	Ö		
Total Cost \$	83,582		
Disbursement of funds will be a Payment will be made upon receipt documentation specifically reques reimbursement will not exceed \$8. Source of Funds: 1. Centers for Disease Control as	ot and acceptance of ting reimbursement 3,582 during the sub	for actual expenditures specific	voice and supporting c to this subgrant. Total Federal Grant #: 5U90TP916964-10
Terms and Conditions			
In accepting these grant funds, it is 1. Expenditures must comply with 2. This award is subject to the available. Recipient of these funds agree	n appropriate state a ailability of appropria	ate funds. ed in Sections A, B, C and D of	this subgrant award.
Authorized Sub-grantee Official	000	Signature	2-24-11
Title Debi Galloway Management Analyst, PHP	CA III LO		
Daniel P. Mackie, MPH alth Program Manager, PHP			
Richard Whitley, MS Administrator, Health Division			

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 the expenditure of subgrant funds in excess of approved budgeted amount, without prior written approval by the Health Division, may result in the Subgrantee refunding to the Health Division that amount expended in excess of the approved budget.
- 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 sub-grantee 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, counsel, or board;
 - b. any federal, state, county or local legislator, commission member, counsel 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 27, 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, ROOM 300, CARSON CITY, NEVADA 89706, 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:

- Purchase the following items to support WCHD's CDC Base Scope of Work:
 - o Mobile Communications and Command Trailer to use in field locations where mass vaccination or other countermeasures might be distributed in a parking lot or other location. The trailer would serve as a platform for incident command as well as internet and/or radio communications amount field staff as well as the Department Operations Center (DOC). The trailer (approximately 16 x 10) is configured with radio racks, generator, HVAC system, countertops, cabinets and necessary accessories for operation.
- Submit a written Progress Report to the Health Division electronically on or before:

March 30, 2011 Mid-Year Progress Report (For the period of 8/10/10 – 2/28/11)
 October 1, 2011 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 sub-grant, using a statement similar to: "This publication (journal, article, etc.) was supported by the Nevada State Health Division through Grant Number 5U90TP916964-10 from the Centers for Disease Control and Prevention (CDC). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of neither the Nevada State Health Division nor the Centers for Disease Control and Prevention (CDC)."
- Any activities performed under this sub-grant shall acknowledge the funding was provided through the State Health Division by Grant Number 5U90TP916964-10 from the Centers for Disease Control and Prevention (CDC).

(Continued on next page)

Subgrantee agrees to adhere to the following budget:

Total Cost	\$ 83,582	
7. Indirect	\$ 0.00	Mobile Communications and Communic Trans-
6. Other	\$ 0	Mobile Communications and Command Trailer
5. Equipment	\$ 83,582	
4. Supplies	\$ 0	
3. Travel	\$ 0	
2. Contractual/Consultant	\$ 0	
1. Personnel	\$ 0	

- Health Division policy is to allow no more than 10% flexibility (no more than a cumulative amount of \$8,358), 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 written 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 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, 2010.
- Additional expenditure detail will be provided upon request from the Division.
- The maximum amount of funding available through this subgrant is \$83,582.

Additionally, the subgrantee agrees to provide:

 A complete financial accounting of all expenditures to the Health Division within 45 days of the CLOSE OF THE SUBGRANT PERIOD. Any unobligated 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 reimbursement, not to exceed a total of \$83,582 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 quarterly 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 the 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:
 - o 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

- 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.
- Seimbursement is based on actual expenditures incurred during the period being reported.
- Payment will not be processed without all reporting being current.
- Seimbursement may only be claimed for expenditures approved within the Notice of Subgrant Award.
- **PLEASE REPORT IN DOLLARS AND CENTS (No Rounding)**

<u>Provide the following information on the top portion of the form:</u> 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 <u>total</u> 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 <u>previous</u> 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 <u>current</u> 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 <i>OMB Circular A-133</i> . 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 X NO
3.	When does your fiscal year end? <u>June 30, 2011</u>
4.	How often is your organization audited? <u>Annually</u>
5.	When was your last audit performed? Accepted by BCC Nov. 9, 2010
6.	What time period did it cover? July 1, 2009 - July 30, 2010
7. 1	Which accounting firm conducted the audit? <u>Kafoury</u> , <u>Urmstrong</u> + Co.
	, Ден
	Edu Cone Wearth Services Colher 2/11/1

TITLE

Page 9of9

SIGNATURE

HD Template: Updated 07-19-10

Nevada Department of Health and Human Services

Health Division #	11079
Bureau Program #	CDC07-08a
GL#	8516
Draw #:	

HEALTH DIVISION

REQUEST FOR REIMBURSEMENT Subgrantee Name: Program Name: Public Health Preparedness BIOT08 Washoe County Health District (WCHD) Nevada State Health Division -93069CF9 Address: Address: 1001 East Ninth Street 4150 Technology Way, Suite 200 Reno. NV 89520 Carson City, NV 89706 Subgrant Period: Subgrantee EIN #: 88-6000138 Subgrantee Vendor #: T40283400Q February 21, 2011 - August 9, 2011 Dunn & Bradstreet #: 73786998

FINANCIAL REPORT AND REQUEST FOR FUNDS - BASE

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

Month(s):

Calendar Year:

			Α		В		С		D		E	F
Approved Budget Category			Approved	Total Prior			Current		Year To		Budget Balance	Percent
) _		 	Budget	-	Requests	ļ	Request	_	Date Total		,	Expended
1	Personnel	\$	0.00			\$	0.00				 	0%
2	Contract/Consultant	\$	0.00	\$	0.00	\$	0.00	\$	0.00	\$	0.00	0%
3	Travel	\$	0.00	\$	0.00	\$	0.00	\$	0.00	\$	0.00	0%
4	Supplies	\$	0.00	\$	0.00	\$	0.00	\$	0.00	\$	0.00	0%
5	Equipment	\$	83,582.00	\$	0.00	\$	0.00	\$	0.00	\$	83,582.00	0%
6		\$	0.00	\$	0.00	\$	0.00	\$	0.00	\$	0.00	0%
7	Indirect	\$	0.00	\$	0.00	\$	0.00	\$	0.00	\$	0.00	0%
8	Total	\$	83,582.00	\$	0.00	\$	0.00	\$	0.00	\$	83,582.00	0%
Α							Titl .				Det	
4 ut	norized Signature						Title				Dat	e
	ninder: Request for Reir allowed for items conta ort.								•	•	·	
			F	OI	R HEALTH [ΟIV	ISION USE	0	NLY			
⊃ro	gram contact necessary	?	Yes	-	No	С	ontact Pers	on	:			
Rea	son for contact:									_		-
	cal review/approval date:			5	Signed:							_
=isc												
	pe of Work review/appro	val	date:		Sigr	nec	i:					_

Nevada State Health Division Public Health Preparedness Match Certification

Date:	2/10/11						
External Funding Source:	Centers for Disease Control (CDC)- Public Health Emergency Preparedness (PHEP)						
A mandatory cost sharing/n proposal:	natching cost contribution is required for the following						
Funding Recipient:	Washoe County Health District (WCHD						
Project Title:	2008 CDC Public Health Preparedness and Response for Bioterrorism (PHEP) – Carry Forward						
Project Grant #:	5U90TP916964-10						
Duration:	From: February 21, 2011 To: August 9, 2011						
Total cost sharing/matching	cost contribution: \$8,358						
Source of cost sharing/mate	ching cost contribution:						
Name: Washe	County Health Distnet						
Account # (if applicable):							
Funding recipient hereby ce contribution is not being use	rtifies that the identified cost sharing/matching cost ed to match any other funding source.						
A. II							
Authorized Sub-grantee Official Washoe County Health District							
Name and Title (Funding Rec	ipient) Signature Date						



Washoe County Health District



STAFF REPORT BOARD MEETING DATE: 2/24/11

DATE:

August 16, 2010

TO:

District Board of Health

FROM:

Patsy Buxton, Fiscal Compliance Officer, Washoe County Health District

775-328-2418, pbuxton@washoecounty.us

THROUGH: Eileen Coulombe, Administrative Health Services Officer, Washoe County

Health District, 775-328-2417, ecoulombe@washoecounty.us

SUBJECT: Approval of Notice of Subgrant Award from the Nevada State Health Division in the amount of \$86,161 for the period January 1, 2011 through December 31, 2011 in support of the Epidemiology and Laboratory Capacity (ELC) Grant Program; Approve budget adjustments with a net effect of \$0 in the FY 11 ELC-Grant Program (IO-TBA); 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 District Health Department has received a Notice of Subgrant Award from the Nevada State Health Division for the period January 1, 2011 to December 31, 2011. 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.

PREVIOUS ACTION

The District Board of Health approved the Subgrant Amendment #1 from the Nevada State Health Division, Office of Epidemiology for the Epidemiology and Laboratory Capacity (ELC)

AGENDA ITEM #_7c.3.

District Board of Health meeting of February 24, 2011 Page 2

Grant Program, for the period January 1, 2010 through December 31, 2010 in the total amount of \$62,350 and approved amendments totaling an increase of \$2,001 at their August 26, 2010 meeting.

The District Board of Health approved of District Health Officer acceptance of Subgrant Amendment #2 for the period January 1, 2010 through December 31, 2010 in the total amount of \$69,557 and approved amendments totaling an increase of \$7,207 at their January 27, 2011 meeting.

BACKGROUND

The Washoe County Health District received an award from the Nevada State Health Division in the amount of \$86,161 for the period January 1, 2011 through December 31, 2011 in support of all ELC activities such as general core epidemiology, West Nile Virus surveillance, foodborne surveillance and influenza surveillance.

In the past, the Washoe County Health District received a separate award for each program activity and used a distinct internal order to record financial information for each award. For calendar year 2011 one award was issued. As such, unspent budget authority totaling \$40,356 will be transferred from IO-10675, IO-10677 and IO-10730 to the new Internal Order once the new order is established.

FISCAL IMPACT

Should the Board approve these budget amendments, the adopted FY 11 budget will be increased by \$2,001 in the following accounts:

	Amount of
<u>Description</u>	Increase/(Decrease)
Federal Revenue	\$0
Undesignated Budget	(\$1,095)
Travel	\$1,095
Total Expenditures	\$0
	Federal Revenue Undesignated Budget Travel

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 \$86,161 for the period January 1, 2011 through December 31, 2011 in support of the Epidemiology and Laboratory Capacity (ELC) Grant Program; Approve budget adjustments with a net effect of \$0 in the FY 11 ELC-Grant Program (IO-TBA); 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 \$86,161 for the period January 1, 2011 through December 31, 2011 in support of the Epidemiology and Laboratory Capacity (ELC) Grant Program; Approve budget adjustments with a net effect of \$0 in the FY 11 ELC-Grant Program (IO-TBA); and if approved authorize the Chairman to execute.

Department of Health and Human Services HEALTH DIVISION

(hereinafter referred to as the DIVISION)

Budget Account #: 3218
Category #: 15

Health Division #:

GL#: 8516

11189

NOTICE OF SUBGRANT AWARD

Program Name: Office of Epidemiology Bureau of Health Statistics, Planning, Epidemiology, and Response Nevada State Health Division	Subgrantee Name: Washoe County Health District (WCHD)
Address: 4150 Technology Way, Suite #211 Carson City, NV 89706-2009	Address: 1001 East Ninth Street Reno, NV 89502
Subgrant Period: January 1, 2011 through December 31, 2011	<u>Subgrantee EIN#:</u> 88-6000138 <u>Subgrantee Vendor#</u> : T41107900 <u>DUNS #:</u> 73-786-998
Reason for Award: This award is funded through the CY 2 the CDC. WCHD will use these funds to complete Epidemio	

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

County, Nevada, Activities may include general core epidemiology, West Nile Virus surveillance, foodborne

Approved Budget Categories:

surveillance, and influenza surveillance.

	Personnel	\$ 76,199	Subgrantee may make categorical funding
~	. Travel	\$ 2,200	adjustments up to ten percent (10%) of the total subgrant amount without amending the
;	3. Supplies	\$ 0	
4	1. Equipment	\$ 0	agreement, so long as the adjustment is
	5. Contractual/Consultant	\$ 0	reasonable to support the activities
1	6. Other	\$ 0	described within the Scope of Work and the
-	7. Indirect	\$ 7,762	adjustment does not alter the Scope of Work.
	Total Cost	\$ 86.161	

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 *specific to this subgrant*. Total reimbursement will not exceed \$86,161 during the subgrant period.

Source of Funds:% of Funds:CFDA#:Federal Grant #:Centers for Disease Control and Prevention100%93.2833U50CI000489-03S4

Terms and Conditions

In accepting these grant funds, it is understood that:

- 1. Expenditures must comply with appropriate state and/or federal regulations.
- This award is subject to the availability of appropriate funds.
 Recipient of these funds agrees to stipulations listed in Sections A, B, and C of this subgrant award.

Washoe County Health District

Am 1-24
Michelle Urrutia, M.Ed.

LC Program Manager

Muchelle Uthing

1-28-11

Luana Ritch, PhD Bureau Chief

Richard Whitley, MS Administrator, Health Division (A)

- 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;
 - 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.
- 2. 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.

Page 3of9 HD Template: Updated 07-19-10

HEALTH DIVISION NOTICE OF SUBGRANT AWARD

SECTION B

Description of services, scope of work, deliverables and reimbursement

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

- Create a work plan to be used as the Final Scope of Work for this Subgrant with the guidance from the Nevada State Health Division, Office of Epidemiology. This work plan will include specific measurable objectives, activities to be conducted by the WCHD to accomplish the objectives, timelines, and tracking measures to ensure the successful achievement of federal grant objectives.
 - o The Nevada State Health Division, Office of Epidemiology will provide a draft plan containing measureable grant objectives and suggested activities. Please see Attachment A.
 - o WCHD will customize the measureable objectives and activities, provide a timeline for completion of the activities and tracking measures.
 - This customized work plan will be submitted to the Nevada State Health Division no later than February 28, 2011 for inclusion in Section B of this Subgrant and will be considered the Final Scope of Work for this Subgrant.
- Submit written Progress Reports to the Health Division electronically on or before:
 - August 15, 2011 Interim Progress Report (For the period of January 1, 2011 through August 1, 2011)
 - March 1, 2012 End-of-Year Report (For the period of August 1, 2011 through December 31, 2011)
- 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 3U50Cl000489-03S4 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 nor 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 3U50Cl000489-03S4 from the Centers for Disease Control and Prevention.

(continued on next page)

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HD Template: Updated 07-19-10

Subgrantee agrees to adhere to the following budget:

1. Personnel	\$ 76,199	To cover a partial FTE Senior Epidemiologist; includes fringe
2. Travel	\$ 2,200	Mileage to attend local Epi meetings and complete epidemiological investigations, as well as one national conference
3. Supplies	\$ 0	
4. Equipment	\$ 0	
5. Contractual Consultant	\$ 0	
6. Indirect	\$ 7,762	Indirect at 9.9% of total direct expenses
7. Other	\$ 0	
Total Cost	\$ 86,161	

- Subgrantee may make categorical funding adjustments up to ten percent (10%) of the total subgrant
 amount without amending the agreement, so long as the adjustment is reasonable to support the
 activities described within the Scope of Work and the adjustment does not alter the 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.

- 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 December 31, 2011 no later than January 15, 2012.
- The maximum amount of funding available through this subgrant is \$86,161.
- Requests for Reimbursement will be accompanied by supporting documentation, including a line item
 description of expenses incurred.
- 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.

- 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 \$86,161 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:
 - o Reallocating funds between the subgrantee's categories, and
 - o Reallocating funds to another subgrantee or funding recipient to address other identified Health Division 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.

his 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.

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HEALTH DIVISION NOTICE OF SUBGRANT AWARD SECTION C

Financial Reporting Requirements

- A Request for Reimbursement is due on a <u>monthly or quarterly</u> basis, based on the terms of the subgrant agreement, no later than the 15th of the month.
- 9 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

<u>Provide the following information on the top portion of the form</u>: 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 <u>total</u> 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 <u>previous</u> 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 <u>current</u> 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.

Page 7of9 HD Template: Updated 07-19-10

Nevada Department of Health and Human Services

Health Division #_	11189
Bureau Program #	3218
GL# _	8516
_	

				n,	EALID DIVI	SIL	JIV				GL#	
											Draw #:	
		REQUES"	<u>T F</u>	FOR REIMBU	UR	SEMENT / /	AD	VANCE				
Pro	ogram Name:			Subgrantee Name:								
Office of Epidemiology Washoe							Washoe C)OI	unty Health	Di	strict	
Nevada State Health Division												
Ad	dress:						Address:			_		
4150 Technology Way, Suite #211					P. O. Box Reno, NV							
Sul	bgrant Period:						Subgrantee Vendor#:					
Jar	nuary, 1, 2011 through	Dε	cember 31	, 2	<u>2</u> 011		T41107900					
		FI	NANCIAL	RE	PORT AND) F	REQUEST	FC	OR FUNDS			
	(report in who	le	dollars; m	us	t be accon	np:	anied by e	хŗ	enditure re	epo	ort/back-up	p)
Month(s):							Cale	•n∈	dar Year:			
Αŗ	pproved Budget Category		A Approved Budget	1	B Total Prior Requests		C Current Request		D Year To Date Total		E Budget Balance	F Percent Expended
1	Personnel	\$	76,199	\$	0	\$	0	\$	0	\$	76,199	0%
2	Traval		2 200	اها	Ω'	¢	n'	\$	n n	ا ءا	l 2 2001	0%

		1	Α		В	l	С	1	D		E	F
A	pproved Budget Category		Approved		Total Prior		Current		Year To		Budget	Percent
			Budget		Requests		Request	l	Date Total		Balance	Expended
1	Personnel	\$	76,199	\$	0	\$	0	\$	0	\$	76,199	0%
2	Travel	\$	2,200	\$	0	\$	0	\$	0	\$	2,200	0%
3	Operating	\$	0	\$	0	\$	0	\$	0	\$	0	#DIV/0!
4	Equipment	\$	0	\$	0	\$	0	\$	0	65	0	#DIV/0!
5	Contract/Consultant	\$	0	\$	0	\$	0	\$	0	\$	0	#DIV/0!
6	Other	\$	0	\$	0	\$	0	\$	0	\$	0	#DIV/0!
7	Indirect	\$	7,762	\$	0	\$	0	\$	0	\$	7,762	0%
8	Total	\$	86,161	\$	0	\$	0	\$	0	\$	86,161	0%
This report is true and correct to the best of my knowledge.												
	horized Signature				Titl		<u></u>				Date	

Authorized Signature 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

1 OKTIE/KET	T DIVIDION OUE ONE!
Program contact necessary? Yes N	o Contact Person:
Reason for contact:	
Fiscal review/approval date: Signed:	
Scope of Work review/approval date:	Signed:
ASO or Bureau Chief (as required):	Date:

HD Template: Updated 2-7-08

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 <i>OMB Circular A-133</i> . 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.
	Did your organization expend \$500,000.00 or more in all Federal Awards during your most recent fiscal year? YES X NO

mentile of the diese of year needs year.	
2. Did your organization expend \$500,000.00 or more in all Federal Awards during your most recent fiscal year? YES <u>X</u> NO	
3. When does your fiscal year end? <u>June 30, 2011</u>	
4. How often is your organization audited?Annully	
5. When was your last audit performed? Accepted by BCC Nov. 9,	2010
6. What time period did it cover? <u>July 1, 2009 - June 30, 20</u>	DiD
7. Which accounting firm conducted the audit? Kafaung anstron of	Co.

SIGNATURE Administrative 2/11/11/2 DATE

Page 9of9

Washoe County Health District (WCHD) Scope of Work for ELC Attachment A

Washoe County Health District will designate a Senior Epidemiologist to improve epidemiology capacity in Washoe County.

Washoe County Health District Action Plan

Goal: Improve epidemiology capacity.	apacity.		
Objective	Activities	Date due hv	Documentation
Assist with communicable	1. Designate a Senior Epidemiologist.	Ongoing	For Grant purposes: Provide
disease programs and technical support.	2. To assist communicable disease programs such as STD, HIV, and TB Program for the program needs, such as)	a quarterly summary report
	statistical analyses for local data and sending educational		
	messages to local healthcare providers using local data.		
	collection instrument development, analytical statistical		
	analyses, report review, epidemiological software training,		
	outbreak response timeliness evaluation for Nevada State		
	Health Division.		
Collect and analyze data and	1. Designate a Senior Epidemiologist.	Ongoing	Hor Grant mirmococ. Descido
oversee influenza	2. Recruit and retain sentinel providers for the Influenza Sentinel	3,11,2	a dilafferly simmary report
surveillance and response	Provider Surveillance Network.		of activities.
	3. Facilitate influenza specimen submission from the Sentinel		
	Providers Surveillance Network to the state public health		
	laboratory.		
	4. Collect year-round influenza surveillance data in the Influenza		
	Sentinel Provider Surveillance System.		
	5. Explore the availability and utility of existing sources of		
	electronic influenza morbidity (including influenza		
	hospitalization data) and mortality data.		
	6. Facilitate weekly reporting during influenza season.		

Facilitate reporting of influenza-related pediatric deaths through NEDSS.	for 1. Designate a Senior Epidemiologist. Ongoing For Grant purposes: Provide a quarterly summary report or of activities.
	Enhance capacity for investigation, control, and reporting of foodborne disease outbreaks in Washoe County.

Approved By:

Jeff Whitesides, Manager Public Health Preparedness Program, WCHD

Michelle Urrutia, M.Ed Office of Epidemiology, NSHD

Michelle Muha

Date: _

Date: 1-34



Washoe County Health District



STAFF REPORT BOARD MEETING DATE: February 24, 2011

DATE: February 2, 2011

TO: District Board of Health

FROM: Lori Cooke, Fiscal Compliance Officer, Washoe County Health District

775-325-8068, lcooke@washoecounty.us

THROUGH: Eileen Coulombe, Administrative Health Services Officer

775-328-2417, ecoulombe@washoecounty.us

SUBJECT: 1) Approve amendments totaling an increase of \$28,225 in both revenue and expense to the FY11 National Association of County and City Health Officials ACHIEVE Program Grant budget (IO 10846); 2) approve payment for "Sponsor an Indicator" in the amount of \$1,000 for the Truckee Meadows Tomorrow (grant-funded).

SUMMARY

The Washoe County District Board of Health must accept grant awards or direct the Health Officer to accept grants awards, 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 Subaward Agreement between the National Association of County and City Health Officials (NACCHO) and the Washoe County Health District (WCHD) for the period September 30, 2010 to September 29, 2011 in the total amount of \$28,225 in support of the NACCHO ACHIEVE Program. This is the second year of a two-year award. A copy of the agreement is attached.

Goal supported by this item: Approval of these budget amendments & sponsorship supports the Chronic Disease Prevention Program's mission to empower our community to be tobacco free, live active lifestyles, and eat nutritiously through education, collaboration, policy, and evaluation.

PREVIOUS ACTION

The District Board of Health approved the submission of the NACCHO ACHIEVE application on November 19, 2009. The District Board of Health approved the associated amendments for Year 1 on May 27, 2010. The Interim District Health Officer signed the Year 2 Subaward Agreement on January 21, 2011.

BACKGROUND

The Health District received from NACCHO a Subaward Agreement in the total amount of \$28,225 for the NACCHO ACHIEVE Program. These funds support local communities to address chronic disease risk factors of physical inactivity, poor nutrition,

AGENDA ITEM # 7.C.4.

District Board of Health February 24, 2011 Page 2

and tobacco use at the policy, systems, and environmental change level to reduce the burden of chronic diseases such as arthritis, obesity, diabetes, cardiovascular disease, and cancer.

This award includes funding for professional services, contractual wages (temporary services for data entry/clerical assistance), employee travel, training, operating expenses such as meeting supplies, meeting locations, teleconference charges, office supplies, educational supplies, etc., and other expenses, including funding for the Truckee Meadows Tomorrow (TMT) "Sponsor an Indicator" (information below) and incentives, such as, but not limited to: food (including food for meetings/community trainings, etc.), gift cards (non-cash value), special recognitions (i.e., plaques, certificates, etc.), etc. The total budgeted amount for the incentive items is \$1,825. Normally incentive/ enabler items do not exceed \$35.00 in value and awards/recognitions are budgeted at approximately \$50.00 in value.

The TMT "Sponsor an Indicator" was presented to the District Board of Health on September 23, 2011. At that meeting, it was decided that a sponsorship would be valuable and direction given to pursue grant or other non-local funding was available. The request was presented as part of the Year 2 NACCHO ACHIEVE grant and was included in the award. The specific TMT indicator is "#27 – development that encourages healthy lifestyles & neighborhood livability".

FISCAL IMPACT

FY11 budget did not include the second year of funding for Internal Order #10846. A budget amendment in the amount of \$28,225 is necessary to bring the Notice of Grant Award into alignment with the program budget.

The Board of County Commissioners is scheduled to approve these amendments & the sponsorship payment at their February 22, 2011 meeting.

Should the Board approve these budget amendments, the total adopted FY11 budget will be increased by \$28,225 by adjustments to the following accounts:

		Total Expenditures	\$28,225.00
	-711210	Travel	1,550.00
	-710872	Food Purchases	150.00
	-710508	Telephone Land Lines	220.00
	-710500	Other Expense	4,000.00
	-710360	Postage	200.00
	-710350	Office Supplies	75.00
	-710300	Operating Supplies	2,675.00
	-710110	Contracted/Temp Services	3,355.00
2002-IN-10846	-710100	Professional Services	16,000.00
2002-IN-10846	-431100	Federal Revenue	\$28,225.00
Account Number		<u>Description</u>	Increase/(Decrease)
			Amount of

District Board of Health February 24, 2011 Page 3

RECOMMENDATION

Staff recommends that the Washoe County District Board of Health 1) Approve amendments totaling an increase of \$28,225 in both revenue and expense to the FY11 National Association of County and City Health Officials ACHIEVE Program Grant budget (IO 10846); 2) approve payment for "Sponsor an Indicator" in the amount of \$1,000 for the Truckee Meadows Tomorrow (grant-funded).

POSSIBLE MOTION

Move to 1) Approve amendments totaling an increase of \$28,225 in both revenue and expense to the FY11 National Association of County and City Health Officials ACHIEVE Program Grant budget (IO 10846); 2) approve payment for "Sponsor an Indicator" in the amount of \$1,000 for the Truckee Meadows Tomorrow (grant-funded).

SUBAWARD AGREEMENT

This Contractual Agreement is entered into, effective as of the date of the later signature indicated below, by and between the **National Association of County and City Health Officials** (hereinafter referred to as "NACCHO"), with its principal place of business at 1100 17th Street, N.W., 7th Floor, Washington, DC 20036, and **Washoe County Health District** (hereinafter referred to as "Subrecipient"), with its principal place of business at 1001 East, 9th Street, Building B-170, Reno, NV 89512.

WHEREAS, NACCHO wishes to hire Subrecipient to perform the services specified herein for NACCHO to enhance the programmatic activities of a grant;

WHEREAS, Subrecipient wishes to perform such services for NACCHO.

NOW, THEREFORE, for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the parties, intending to be legally bound, do hereby agree as follows:

ARTICLE I: SPECIAL PROVISIONS

- 1. PURPOSE OF AGREEMENT: Subrecipient agrees to provide the goods and/or services to NACCHO to enhance the programmatic activities of CDC GRANT TITLE 5U58DP001667-03 (CFDA #93.283) as described in Attachment I. The terms of Attachment I shall be incorporated into this Agreement as if fully set forth herein. Subrecipient shall act at all times in a professional manner consistent with the standards of the industry.
- 2. <u>TERM OF AGREEMENT</u>: The term of the Agreement shall begin on September 30, 2010 and shall continue in effect until September 29, 2011, unless earlier terminated in accordance with the terms herein. Expiration of the term or termination of this Agreement shall not extinguish any rights or obligations of the parties that have accrued prior thereto. The term of this Agreement may be extended by mutual agreement of the parties.
- 3. PAYMENT FOR SERVICES: In consideration for services to be performed, NACCHO agrees to reimburse the Subrecipient for eligible costs incurred up to \$28,225. Eligible costs are those previously approved by NACCHO. All payments will be made in arrears, within 30 days of receipt of invoice(s) from Subrecipient and following approval by NACCHO for approved services, as outlined on Attachment I. The invoice(s) shall itemize all expenses with supporting documentation for each itemized expense. Invoices may be submitted in quarterly increments; (January 2011, April 2011, July 2011, & October 2011). The NACCHO contract number must be included on all invoices. The final invoice must be received by NACCHO no later than 45 days after the end date of the Agreement.

ARTICLE II: GENERAL PROVISIONS

- 1. <u>INDEPENDENT CONTRACTOR</u>: Subrecipient shall act as an independent Contractor, and Subrecipient shall not be entitled to any benefits to which NACCHO employees may be entitled.
- 2. <u>PAYMENT OF TAXES AND OTHER LEVIES</u>: Subrecipient shall be exclusively responsible for reporting and payment of all income tax payments, unemployment insurance, worker's compensation insurance, social security obligations, and similar taxes and levies.
- 3. <u>LIABILITY</u>: All liability to third parties, loss, or damage as a result of claims, demands, costs, or judgments arising out of activities, such as direct service delivery, to be carried out by the Subrecipient in the performance of this agreement shall be the responsibility of the Subrecipient, and not the responsibility of NACCHO, if the liability, loss, or damage is caused by, or arises out of, the actions of failure to act on the part of the Subrecipient, any subSubrecipient, anyone directly or indirectly employed by the Subrecipient. All liability to third parties, loss, or damage as result of claims, demands, costs, or
 - All liability to third parties, loss, or damage as result of claims, demands, costs, or judgments arising out of activities, such as the provision of policy and procedural direction, to be carried out by NACCHO in the performance of this agreement shall be the responsibility of NACCHO, and not the responsibility of the Subrecipient, if the liability, loss, or damage is caused by, or arises out of, the action or failure to act on the part of any NACCHO employee.
 - In the event that liability to third parties, loss, or damage arises as a result of activities conducted jointly by the Subrecipient and NACCHO in fulfillment of their responsibilities under this agreement, such liability, loss, or damage shall be borne by the Subrecipient and NACCHO in relation to each party's responsibilities under these joint activities.
- 4. <u>REVISIONS AND AMENDMENTS</u>: Any revisions or amendments to this Agreement must be made in writing and signed by both parties.
- 5. <u>ASSIGNMENT</u>: Without prior written consent of NACCHO, Subrecipient may not assign this Agreement nor delegate any duties herein.
- 6. <u>INTERFERING CONDITIONS</u>: Subrecipient shall promptly and fully notify NACCHO of any condition that interferes with, or threatens to interfere with, the successful carrying out of Subrecipient's duties and responsibilities under this Agreement, or the accomplishment of the purposes thereof. Such notice shall not relieve Subrecipient of said duties and responsibilities under this Agreement.

- 7. OWNERSHIP OF MATERIALS: Subrecipient hereby transfers and assigns to NACCHO all right, title and interest (including copyright rights) in and to all materials created or developed by Subrecipient pursuant to this Agreement, including, without limitation, reports, summaries, articles, pictures and art (collectively, the "Materials") (subject to any licensed third-party rights retained therein). Subrecipient shall inform NACCHO in writing of any third-party rights retained within the Materials and the terms of all license agreements to use any materials owned by others. Subrecipient understands and agrees that Subrecipient shall retain no rights to the Materials and shall assist NACCHO, upon reasonable request, with respect to the protection and/or registrability of the Materials. Subrecipient represents and warrants that, unless otherwise stated to NACCHO in writing, the Materials shall be original works and shall not infringe or violate the rights of any third party or violate any law. The obligations of this paragraph are subject to any applicable requirements of the U.S. Department of Health and Human Services.
- 8. RESOLUTION OF DISPUTES: The parties shall use their best, good faith efforts to cooperatively resolve disputes and problems that arise in connection with this Agreement. Both parties will make a good faith effort to continue without delay to carry out their respective responsibilities under the Agreement while attempting to resolve the dispute under this section. If a dispute arises between the parties that cannot be resolved by direct negotiation, the dispute shall be submitted to a dispute board for a nonbinding determination. Members of the dispute board shall be the Director or Chief Executive Officer of the subrecipient, the Executive Director of NACCHO, and the Senior Staff of NACCHO responsible for this Agreement. The costs of the dispute board shall be paid by the subrecipient and NACCHO in relation to the actual costs incurred by each of the parties. The dispute board shall timely review the facts, Agreement terms and applicable law and rules, and make its determination.
- 9. <u>TERMINATION</u>: Either party may terminate this Agreement upon at least fifteen (15) days prior written notice to the other party. NACCHO will pay Subrecipient for services rendered through the date of termination.
- 10. <u>ENTIRE AGREEMENT</u>: This Agreement contains all agreements, representations, and understandings of the parties regarding the subject matter hereof and supersedes and replaces any and all previous understandings, commitments, or agreements, whether oral or written, regarding such subject matter.
- 11. <u>PARTIAL INVALIDITY</u>: If any part, term, or provision of this Agreement shall be held void, illegal, unenforceable, or in conflict with any law, such part, term or provision shall be restated in accordance with applicable law to best reflect the intentions of the parties and the remaining portions or provisions shall remain in full force and effect and shall not be affected.

- 12. <u>ADDITIONAL FUNDING</u>: Unless prior written authorization is received from NACCHO, no additional funds will be allocated to this project for work performed beyond the scope specified or time frame cited in this Agreement.
- 13. <u>REMEDIES FOR MISTAKES</u>: If work that is prepared by the Subrecipient contains errors or misinformation, the Subrecipient will correct error(s) within five business days. The Subrecipient will not charge NACCHO for the time it takes to rectify the situation.
- 14. <u>COMPLIANCE WITH FEDERAL LAWS AND REGULATIONS</u>: Subrecipient's use of funds under this Agreement is subject to the directives of and full compliance with 45 C.F.R. Part 74 (Uniform Administrative Requirements for Awards and Subawards to Institutions of Higher Education, Hospitals, Other Non-Profit Organizations, and Commercial Organizations) and OMB Circular A-110 (Uniform Administrative Requirements for Grants and Agreements With Institutions of Higher Education, Hospitals, and Other Non-Profit Organizations). It is the Subrecipient's responsibility to understand and comply with all requirements set forth therein.
- 15. EQUAL EMPLOYMENT OPPORTUNITY: Pursuant to OMB Circular A-110, Subrecipient will comply with E.O. 11246, "Equal Employment Opportunity," as amended by E.O. 11375, "Amending Executive Order 11246 Relating to Equal Employment Opportunity," and as supplemented by regulations at 41 C.F.R. part 60, "Office of Federal Contract Compliance Programs, Equal Employment Opportunity, Department of Labor."
- 16. <u>DEBARRED OR SUSPENDED SUBRECIPIENTS</u>: Pursuant to OMB Circular A-110, Subrecipient will execute no subcontract with parties listed on the General Services Administration's List of Parties Excluded from Federal Procurement or Nonprocurement Programs in accordance with E.O.s 12549 and 12689, "Debarment and Suspension."
- 17. <u>AUDITING</u>: Subrecipient agrees to permit independent auditors to have access to its records and financial statements for the purpose of monitoring compliance with this Agreement. If Subrecipient is not required to undergo an audit pursuant to OMB Circular A-133 because Subrecipient receives less than \$500,000 in federal direct or indirect cooperative agreement or grant funds, Subrecipient will certify to NACCHO that it is not so required. If Subrecipient is required to undergo an audit pursuant to OMB Circular A-133, Subrecipient will undergo the required audit and agrees to send a copy of its most recent OMB A-133 audit report and any management letters to NACCHO.
- 18. LOBBYING RESTRICTIONS AND DISCLOSURES: Pursuant to OMB Circular A-110, Subrecipient will certify to NACCHO using the required form that it will not and has not used Federal appropriated funds to pay any person or organization for influencing

or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any Federal contract, grant or any other award covered by 31 U.S.C. 1352. Subrecipient will also disclose any lobbying with non-Federal funds that takes place in connection with obtaining any Federal award.

- 19. <u>COMPLIANCE WITH FEDERAL ENVIRONMENTAL REGULATIONS</u>: Pursuant to OMB Circular A-110, Subrecipient agrees to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act (42 U.S.C. 7401 et seq.) and the Federal Water Pollution Control Act as amended (33 U.S.C. 1251 et seq.).
- 20. <u>NOTICE</u>: All notices, including invoices, required to be delivered to the other party pursuant to this Agreement shall be in writing and shall be sent via facsimile, with a copy sent via US mail, postage prepaid, to the parties at the addresses set forth below. Either party may send a notice to the other party, pursuant to this provision, to change the address to which notices shall be sent.

FOR NACCHO:

National Association of County and City Health Officials Attn: Contracts Specialist 1100 17th Street, N.W., 7th Floor Washington, D.C. 20036 Tel. (202) 507-4272 Fax (202) 783-1583

Email: mtsanga@naccho.org

FOR SUBRECIPIENT:

M.A. Anderson Mary Ann Brown

District Health Officer Interim District Health Officer

Washoe County Health District 1001 East 9th Street, Building B-170

Reno, NV 89512 Tel: 775-328-2441

Email: manderson@washoecounty.us wabrown@washoecounty.us

21. <u>AUTHORITY TO BIND:</u> Each party hereby represents and warrants that the person signing below has the authority to bind such party to this Agreement.

NACCHO:		SUBRECIPIENT:
ву:	luntwichas	By:
Name:	Robert M. Pestronk	Name: M.A. Anderson Mary Ann Brown
Title:	Executive Director	Title: InterimDistrict Health Officer
Date:	1-27-11	Date: 1/21/11
		Federal Tax ID No: 88-6000138



Washoe County Health District



STAFF REPORT BOARD MEETING DATE: 2/24/11

DATE: Febr

February 10, 2011

TO:

District Board of Health

FROM:

Patsy Buxton, Fiscal Compliance Officer, Washoe County Health District

775-328-2418, pbuxton@washoecounty.us

THROUGH: Eileen Coulombe, Administrative Health Services Officer, Washoe

County Health District, 775-328-2417, ecoulombe@washoecounty.us

SUBJECT: Approval of amendments totaling an increase of \$11,281 in both revenue and expense to the FY 11 Centers for Disease Control and Prevention (CDC) Public Health Preparedness and Response for Bioterrorism Pan Flu Carry Forward Federal Grant Program, IO 10738.

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 February 21, 2011 through August 9, 2011 in the total amount of \$11,281 in support of the CDC PHP Pan Flu Carry Forward 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.

PREVIOUS ACTION

The District Board of Health approved amendments totaling an increase of \$114,480 in revenue and expense to the PHP Pan Flu Carry Forward Grant Program, Internal Order 10738 on May 28, 2009.

AGENDA ITEM #_7.c.5.

District Board of Health meeting of February 24, 2011 Page 2

BACKGROUND

In May 2009 the Washoe County Health District received an award from the Nevada State Health Division in the amount of \$115,230 for the period August 10, 2008 through August 9, 2009 in support of PHP Pan Flu activities. At the end of this project period the grant had an available balance of \$26,922.

In June 2010 the Public Health Preparedness program submitted an application to the State requesting carry forward funds. Funds will be used to support the purchase of the following:

- > Tri-band antenna, cables, connectors and triplexer for Washoe County Health District amateur radios. This equipment will provide one antenna to operate three types of amateur radios, including packet communication with the hospitals.
- Pass-Mini Hospital Anteroom Negative Pressure Kit. This is utilized to provide a clean negative airflow environment inside a building (such as one of our local healthcare facilities, or attached to the Health District's existing inflatable portable hospital shelter) to prevent contaminants from entering the room where patients are being treated.
- ➤ Heavy-duty tarps for inflatable portable hospital shelter. These are to be placed underneath the shelter and will provide protection for the floor.

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 increased by \$11,281 in the following accounts:

		Amount of
Account Number	<u>Description</u>	Increase/(Decrease)
2002-IO-10738 -431100	Federal Revenue	\$11,281
2002-IO-10738-711504	Equipment - nonCapital	11,281
	Total Expenditures	\$11,281

RECOMMENDATION

Staff recommends that the Washoe County District Board of Health approve amendments totaling an increase of \$11,281 in both revenue and expense to the FY 11 Centers for Disease Control and Prevention (CDC) Public Health Preparedness and Response for Bioterrorism Pan Flu Carry Forward Federal Grant Program, IO 10738.

POSSIBLE MOTION

Move to approve amendments totaling an increase of \$11,281 in both revenue and expense to the FY 11 Centers for Disease Control and Prevention (CDC) Public Health Preparedness and Response for Bioterrorism Pan Flu Carry Forward Federal Grant Program, IO 10738.

Nevada Department of Health and Human Services

HEALTH DIVISION

Health Division #: Program #: CDC07-08c

Budget Account #: 3218

11081...

Category #: 22 GL #: 8516

(hereinafter referred to as the DIVISION)

NOTICE OF SUBGRANT AWARD

	7 · · · · · · · · · · · · · · · · · · ·	
Program Name:Public Health Preparedness- PANCDC07Nevada State Health Division- 93069PC8	Subgrantee Name: Washoe County Health D	vistrict (WCHD)
Address: 4150 Technology Way, Suite #200 Carson City, NV 89706	Address: 1001 East Ninth Street Reno, NV 89520	
Subgrant Period: February 21, 2011 through August 9, 2011	Subgrantee EIN#: Subgrantee Vendor#: DUNS #	88-6000138 T40283400Q 073786998
Reason for Award: 2007 CDC Pan Flu – Carry Forw	ard	
County(ies) to be served: () Statewide (X) Specifi	c county or counties: Wash	noe County
Approved Budget Categories:		
1. Personnel \$ 0		
2. Contractual/Consultant \$ 0		
3. Travel \$ 0		
4. Supplies \$ 0		
5. Equipment \$ 0		
Other \$ 11,281		
7. Indirect \$ 0		
Total Cost \$ 11,281		
Disbursement of funds will be as follows: Payment will be made upon receipt and acceptance of documentation specifically requesting reimbursement for reimbursement will not exceed \$11,281 during the subgraph.	or actual expenditures <i>speci</i>	nvoice and supporting ific to this subgrant. Total
	6 of Funds: CFDA#:	Federal Grant #:
Centers for Disease Control and Prevention	100% 93.069	5U90TP916964-10
Terms and Conditions In accepting these grant funds, it is understood that:		
 Expenditures must comply with appropriate state an This award is subject to the availability of appropriate Recipient of these funds agrees to stipulations listed 	e funds. in Sections A, B, C and D o	of this subgrant award.
 Expenditures must comply with appropriate state an This award is subject to the availability of appropriate Recipient of these funds agrees to stipulations listed Authorized Sub-grantee Official Title 	e funds.	of this subgrant award.
Expenditures must comply with appropriate state an 2. This award is subject to the availability of appropriate 3. Recipient of these funds agrees to stipulations listed Authorized Sub-grantee Official Title Debi Galloway Management Analyst, PHP	e funds. in Sections A, B, C and D o	
 Expenditures must comply with appropriate state an This award is subject to the availability of appropriate Recipient of these funds agrees to stipulations listed Authorized Sub-grantee Official Title Debi Galloway 	e funds. in Sections A, B, C and D o	
1. Expenditures must comply with appropriate state an 2. This award is subject to the availability of appropriate 3. Recipient of these funds agrees to stipulations listed Authorized Sub-grantee Official Title Debi Galloway Management Analyst, PHP Daniel P. Mackie, MPH	e funds. in Sections A, B, C and D o	2/9/11 2/9/11

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.
- Subgrantee agrees the expenditure of subgrant funds in excess of approved budgeted amount, without prior written
 approval by the Health Division, may result in the Subgrantee refunding to the Health Division that amount expended in
 excess of the approved budget.
- 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).
- 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 sub-grantee 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, counsel, or board;
 - b. any federal, state, county or local legislator, commission member, counsel 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 27, 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, ROOM 300, CARSON CITY, NEVADA 89706, 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.

WCHD CDC07-08c Page 3 of 9 HD Template: Updated 07-19-10

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:

- Purchase the following items to support WCHD's CDC Base Scope of Work:
 - Tri-band antenna, cables, connectors and triplexer for WCHD amateur radios to provide one antenna to operate three types of amateur radios, including packet communication with the hospitals
 - Pass-Mini Hospital Anteroom-Negative Pressure Kit to provide a clean negative airflow environment inside a building, such as one of the local healthcare facilities, or attached to the WCHD existing inflatable portable hospital shelter to prevent contaminants from entering the room where patients are being treated.
 - Heavy-duty tarps for Inflatable Portable Hospital Shelter to provide protection on the floor underneath hospital
- Submit a written Progress Report to the Health Division electronically on or before:

March 30, 2011 Mid-Year Progress Report (For the period of 8/10/10 – 2/28/11)
 October 1, 2011 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 sub-grant, using a statement similar to: "This publication (journal, article, etc.) was supported by the Nevada State Health Division through Grant Number 5U90TP916964-10 from the Centers for Disease Control and Prevention (CDC). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of neither the Nevada State Health Division nor the Centers for Disease Control and Prevention (CDC)."
- Any activities performed under this sub-grant shall acknowledge the funding was provided through the State Health Division by Grant Number 5U90TP916964-10 from the Centers for Disease Control and Prevention (CDC).

(Continued on next page)

Subgrantee agrees to adhere to the following budget:

1 Personnel

i. Personner	Φ	U
2. Contractual/Consultant	\$	0
3. Travel	\$	0
4. Supplies	\$	0
5. Equipment	\$	0
6. Other	\$	11,281
7. Indirect	\$	0
Total Cost	\$	11,281

Tri-band antenna, cables, connectors, and triplexer for WCHD amateur radios; Pass-Mini Hospital Anteroom -Negative Pressure Kit; Heavy-duty Tarps for Inflatable Portable Hospital Shelter

- Health Division policy is to allow no more than 10% flexibility (no more than a cumulative amount of \$2,692.20), 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 written 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 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, 2010.
- Additional expenditure detail will be provided upon request from the Division.
- The maximum amount of funding available through this subgrant is \$11,281.

Additionally, the subgrantee agrees to provide:

 A complete financial accounting of all expenditures to the Health Division within 45 days of the CLOSE OF THE SUBGRANT PERIOD. Any unobligated 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 reimbursement, not to exceed a total of \$11,281 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 quarterly 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 the 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:
 - o 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

- 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.
- Se Reimbursement is based on <u>actual</u> expenditures incurred during the period being reported.
- Payment will not be processed without all reporting being current.
- Seimbursement may only be claimed for expenditures approved within the Notice of Subgrant Award.
- **PLEASE REPORT IN DOLLARS AND CENTS (No Rounding)**

<u>Provide the following information on the top portion of the form</u>: 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 <u>total</u> 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 <u>previous</u> 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 <u>current</u> 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.

Did your organization expend \$50 during your most recent fiscal year	00,000.00 or more in all Federal Awards ar? YES <u></u> NO
3. When does your fiscal year end?	June 30, 2011
4. How often is your organization au	idited? Annually
5. When was your last audit perform	ed? Accepted by BCC Nov. 9, 2010
6. What time period did it cover?	July 1, 2009 - June 30, 2010
7. Which accounting firm conducted the	ne audit? <u>Kafoirny, Armstrong</u> & Co.
Elmu Clise	Edministrative 2-9-11

Strenes Officer

SIGNATURE

DATE

Nevada Department of Health and Human Services

Health Division #	11081
Bureau Program #	CDC07-08c
GL#	8516
Draw #:	_

HD Template: Updated 07-19-10

HEALTH DIVISION

REQUEST FOR REIMBURSEMENT

Program Name:	Subgrantee Name:		
PANCDC07	Washoe County Health District (WCHD)		
Nevada State Health Division - 93069PC8			
Address:	Address:		
4150 Technology Way, Suite 200	1001 East Ninth Street		
Carson City, NV 89706	Reno, NV 89520		
Subgrant Period:	Subgrantee EIN #: 88-6000138		
February 21, 2011 - August 9, 2011	Subgrantee Vendor #: T40283400Q		
	Dunn & Bradstreet #: 73786998		

FINANCIAL REPORT AND REQUEST FOR FUNDS - BASE

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

Calendar Year:

	proved Budget Category		A Approved Budget		B Total Prior Requests		C Current Request		D Year To Date Total		E Budget Balance	F Percent Expended
	Personnel	\$	0.00	╀		\$	0.00	\$	0.00	\$	0.00	0%
2	Contract/Consultant	\$	0.00	\$. 0.00	\$	0.00	\$	0.00	\$	0.00	0%
3	Travel	\$	0.00	\$	0.00	\$	0.00	\$	0.00	\$	0.00	0%
4	Supplies	\$	0.00	\$	0.00	\$	0.00	\$	0.00	\$	0.00	0%
5	Equipment	\$	0.00	\$	0.00	\$	0.00	\$	0.00	\$	0.00	0%
6	Other	\$	11,281.00	\$	0.00	\$	0.00	\$	0.00	\$	11,281.00	0%
\vdash	Indirect	\$	0.00	_	0.00	\$	0.00	\$	0.00	\$	0.00	0%
	Total report is true and correct	\$			0.00		0.00	\$	0.00	\$	11,281.00	0%
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.												
			F	OF	HEALTH D	IVI	SION USE	40	ILY			
Program contact necessary?Yes No Contact Person:												
Reas	on for contact:		 				······································					
cal review/approval date: Signed:												
Scope of Work review/approval date: Signed:												
ASO	or Bureau Chief (as req	uire	ed):							_	Date:	

Month(s):

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/n proposal:	natching cost contribution is required for the following				
Funding Recipient:	Washoe County Health District (WCHD)				
Project Title:	2007 CDC Public Health Preparedness and Response for Bioterrorism (PHEP) – Pan Flu – Carry Forward				
Project Grant #:	5U90TP916964-10				
Duration:	From: February 21, 2011 To: August 9, 2011				
Total cost sharing/matching	cost contribution: \$ 1128,10				
Source of cost sharing/matching cost contribution:					
Name: Washoe	County Health District				
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.					
Authorized Sub-grantee Officia Washoe County Health Distric Name and Title (Funding Rec	t (WCHD) Elwe (Los 44/11				



Washoe County Health District



STAFF REPORT **BOARD MEETING DATE: 2/24/11**

DATE:

February 10, 2011

TO:

District Board of Health

FROM:

Patsy Buxton, Fiscal Compliance Officer, Washoe County Health District

775-328-2418, pbuxton@washoecounty.us

THROUGH: Eileen Coulombe, Administrative Health Services Officer, Washoe

County Health District, 775-328-2417, ecoulombe@washoecounty.us

SUBJECT: Approval of amendments totaling an increase of \$22,137 in both revenue and expense to the FY 11 Centers for Disease Control and Prevention (CDC) Public Health Preparedness and Response for Bioterrorism Base Carry Forward Federal Grant Program, IO 10737.

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 February 21, 2011 through August 9, 2011 in the total amount of \$22,137 in support of the CDC PHP Base Carry Forward 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.

PREVIOUS ACTION

The District Board of Health approved amendments totaling an increase of \$100,862 in revenue and expense to the PHP Base Carry Forward Grant Program, Internal Order 10737 on May 28, 2009.

AGENDA ITEM #_7.c.6.

District Board of Health meeting of February 24, 2011 Page 2

BACKGROUND

In May 2009 the Washoe County Health District received an award from the Nevada State Health Division in the amount of \$100,862 for the period August 10, 2008 through August 9, 2009 in support of PHP Base activities. At the end of this project period the grant had an available balance of \$22,137.

In June 2010 the Public Health Preparedness program submitted an application to the State requesting carry forward funds. Funds will be used to support the purchase of WebEOC Resource Manager 2.0 software add-on license, including installation, planning and a two day on site training.

Resource Manager 2.0 enables users to catalog, track, and deploy resources in a manner that complies with the Federal Emergency Management Agency (FEMA) National Incident Management System (NIMS). Resource Manager 2.0 provides for tracking all available resources in "real time", managing resources during an incident through resource requests and deployments, establishing hierarchies based on existing workflow processes, adding resources "on the fly" then adding the resource to the permanent inventory post-incident, preparing Emergency Management Assistance Compact (EMAC) forms electronically, and preparing report and audit logs of resource activities related to an incident. When implemented with the Health District's WebEOC existing Mapper Lite, users can view resources on a map and geocode the location of the resources.

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 increased by \$22,137 in the following accounts:

		Amount of
Account Number	<u>Description</u>	Increase/(Decrease)
2002-IO-10737 -431100	Federal Revenue	\$22,137
2002-10-10737-781004	Equipment - Capital	22,137
2002 10 10101 10100	Total Expenditures	\$22,137

RECOMMENDATION

Staff recommends that the Washoe County District Board of Health approve amendments totaling an increase of \$22,137 in both revenue and expense to the FY 11 Centers for Disease Control and Prevention (CDC) Public Health Preparedness and Response for Bioterrorism Base Carry Forward Federal Grant Program, IO 10737.

POSSIBLE MOTION

Move to approve amendments totaling an increase of \$22,137 in both revenue and expense to the FY 11 Centers for Disease Control and Prevention (CDC) Public Health Preparedness and Response for Bioterrorism Base Carry Forward Federal Grant Program, IO 10737.

NV Department of Health & Human Services HEALTH DIVISION

Health Division #: _____11080 Program #: _____CDC07-08b

Budget Account #: _____3218
Category #: _____22
GL #: _____8516

(hereinafter referred to as the DIVISION)

NOTICE OF S	UBGRANT AWARD							
Program Name:Public Health Preparedness- BIOT07Nevada State Health Division- 93069CF8	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: February 21, 2011 through August 9, 2011	Subgrantee EIN#: 88-6000138 Subgrantee Vendor#: T40283400Q DUNS # 073786998							
Funds are intended to continue the upgrade of state ar	Reason for Award: 2007 CDC Public Health Preparedness and Response for Bioterrorism – Carry Forward. Funds are intended to continue the upgrade of 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	c county or counties: Washoe County							
Approved Budget Categories: 1. Personnel \$ 0 2. Contractual/Consultant \$ 0 3. Travel \$ 0 5. Equipment \$ 0 6. Other \$ 22,137 7. Indirect \$ 0 Total Cost \$ 22,137 Disbursement of funds will be as follows: Payment will be made upon receipt and acceptance of documentation specifically requesting reimbursement for reimbursement will not exceed \$22,137 during the subgroups. Source of Funds: 1. Centers for Disease Control and Prevention	or actual expenditures <i>specific to this subgrant</i> . Total							
Terms and Conditions In accepting these grant funds, it is understood that: 1. Expenditures must comply with appropriate state an 2. This award is subject to the availability of appropriate 3. Recipient of these funds agrees to stipulations listed Authorized Sub-grantee Official Title Debi Galloway Management Analyst, PHP aniel P. Mackie, MPH ealth Program Manager, PHP Richard Whitley, MS	d/or federal regulations. e funds.							
Administrator, Health Division								

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 the expenditure of subgrant funds in excess of approved budgeted amount, without prior written approval by the Health Division, may result in the Subgrantee refunding to the Health Division that amount expended in excess of the approved budget.
- 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 sub-grantee 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, counsel, or board;
 - b. any federal, state, county or local legislator, commission member, counsel 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 27, 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, ROOM 300, CARSON CITY, NEVADA 89706, 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.

WCHD CDC07-08b Page 3 of 9 HD Template: Updated 07-19-10

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:

- Purchase the following items to support WCHD's CDC Base Scope of Work:
 - WebEOC Resource Manager 2.0 software add-on license, including installation, planning and two-day onsite training. Resource Manager 2.0 enables users to catalog, track and deploy resources in a manner that complies with FEMAs NIMS, and it provides for tracking of all available resources in "real-time", during incidents and deployments.
- Submit a written Progress Report to the Health Division electronically on or before:

o March 30, 2011 Mid-Year Progress Report (For the period of 8/10/10 – 2/28/11)
o October 1, 2011 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 sub-grant, using a statement similar to: "This publication (journal, article, etc.) was supported by the Nevada State Health Division through Grant Number 5U90TP916964-10 from the Centers for Disease Control and Prevention (CDC). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of neither the Nevada State Health Division nor the Centers for Disease Control and Prevention (CDC)."
- Any activities performed under this sub-grant shall acknowledge the funding was provided through the State
 Health Division by Grant Number 5U90TP916964-10 from the Centers for Disease Control and Prevention (CDC).

(Continued on next page)

Subgrantee agrees to adhere to the following budget:

1. Personnel	\$ 0
2. Contractual/Consultant	\$ 0
3. Travel	\$ 0
4. Supplies	\$ 0
5. Equipment	\$ 0
6. Other	\$ 22,137
7. Indirect	\$ 0.00
Total Cost	\$ 22,137

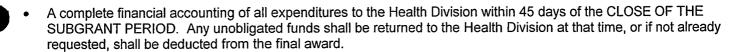
WebEOC Resource Manager 2.0 software add-on license, including installation, planning and two day on site training.

- Health Division policy is to allow no more than 10% flexibility (no more than a cumulative amount of \$2,214), 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 written 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 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, 2010.
- Additional expenditure detail will be provided upon request from the Division.
- The maximum amount of funding available through this subgrant is \$22,137.

Additionally, the subgrantee agrees to provide:



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 reimbursement, not to exceed a total of \$22,137 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 quarterly 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 the 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

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

<u>Provide the following information on the top portion of the form</u>: 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 <u>total</u> 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 <u>previous</u> 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 <u>current</u> 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.
- Z. 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 <i>OMB Circular A-133</i> . 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? <u>June 30, 2011</u>
4.	How often is your organization audited?Annually
5.	When was your last audit performed? Approved by BCC Nov. 9, 2010
6.	What time period did it cover? July 1, 2004 - June 30, 2010
7.	Which accounting firm conducted the audit? <u>Kafoury</u> , Arms trong 4 Co.
	SIGNATURE PATITLE OSSIGNATURE DATE

Page 9of9 HD Template: Updated 07-19-10

Nevada Department of Health and Human Services

Health Division #	11080
Bureau Program #	CDC07-08b
GL#	8516
Draw #:	

HEALTH DIVISION

REQUEST FOR REIMBURSEMENT

Program Name:	Subgrantee Name:					
Public Health Preparedness - BIOT07						
Nevada State Health Division - 93069CF8	Washoe County Health District (WCHD)					
Address:	Address:					
4150 Technology Way, Suite 200	1001 East Ninth Street					
Carson City, NV 89706	Reno, NV 89520					
Subgrant Period:	Subgrantee EIN #: 88-6000138					
February 21, 2011 through August 9, 2011	Subgrantee Vendor #: T40283400Q					
	Dunn & Bradstreet #: 73786998					

FINANCIAL REPORT AND REQUEST FOR FUNDS - BASE

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

Calendar Year:

Month(s):

Approved Budget Category		A Approved		B Total Prior			С		D		Е	F
						Ì	Current Request		Year To	Budget Balance	Percent	
		L	Budget		Requests				Date Total			Expended
1	Personnel	\$	0.00	⊢		\$	0.00	\$	0.00	\$	0.00	0%
2	Contract/Consultant	\$	0.00	\$	0.00	\$	0.00	\$	0.00	\$	0.00	0%
3	Travel	\$	0.00	\$	0.00	\$	0.00	\$	0.00	\$	0.00	0%
4	Supplies	\$	0.00	\$	0.00	\$	0.00	\$	0.00	\$	0.00	0%
5	Equipment	\$	0.00	\$	0.00	\$	0.00	\$	0.00	\$	0.00	0%
6	Other	\$	22,137.00	\$	0.00	\$	0.00	\$	0.00	\$	22,137.00	0%
7	The state of the s	\$	0.00	\$	0.00	\$	0.00	\$	0.00	\$	0.00	0%
8	Total	\$	22,137.00	\$	0.00	\$	0.00	\$	0.00	\$	22,137.00	0%
Authorized Signature Title Date												
24.0										-		
Rem	inder: Request for Rein	nbı	irsement car	nno	ot be proces	se	d without ar	ı e	xpenditure re	ep∈	ort/backup. Reimb	ursement is
only allowed for items contained within Subgrant Award documents. If applicable, travel claims must accompany report.												
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FOR HEALTH DIVISION USE ONLY												
Program contact necessary? Yes No Contact Person:												
Reason for contact:												
Eiscal review/approval date: Signed:												
Scope of Work review/approval date: Signed:												
ASO or Bureau Chief (as required):												

Nevada State Health Division Public Health Preparedness Match Certification

Date:		
External Funding Source:	Centers for Disease Control (CDC)- Public Health Emergenc Preparedness (PHEP)	;y
A mandatory cost sharing/m proposal:	natching cost contribution is required for the following	
Funding Recipient:	Washoe County Health District (WCHD)	.=
Project Title:	2007 CDC Public Health Preparedness and Response for Bioterrorism (PHEP) – Carry Forward	
Project Grant #:	5U90TP916964-10	
Duration:	From: February 21, 2011 To: August 9, 201	1
Total cost sharing/matching	cost contribution: \$ 2214	
Source of cost sharing/matc	hing cost contribution:	
Name: Washe	County Health District	
Account # (if applicable):		
	rtifies that the identified cost sharing/matching cost ed to match any other funding source.	
Authorized Sub-grantee Officia Washoe County Health District Name and Title (Funding Rec	(WCHD) TILL (LSC 14/11	



Washoe County Health District



February 14, 2011

To:

Members District Board of Health

From:

Eileen Coulombe

Subject:

Public Health Fund Expenditure and Revenue Report for January 2011

Agenda Item No. - 10.

Recommendation

Staff recommends that the District Board of Health accept the attached report of revenues and expenditures for the Public Health Fund for January 2011 of fiscal year 11.

Background

The attached reports are for the accounting period 07/11 and the percentages should approximate 58% of the year. Our total revenues and expenditures for the current year (FY11) compared to last year (FY10) are as follows:

January 2011	FY11 – REV	FY10 – REV	FY11 – EXP	FY10 – EXP
Transfer				
AHS	43%	45%	46%	49%
AQM	61%	54%	52%	47%
CCHS	46%	43% ·	55%	49%
EHS	63%	55%	54%	52%
EPHP	24%	33%	29%	31%
TOTAL	45%	44%	48%	46%

The Environmental Oversight Account for January 2011 is \$163,193.57.

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

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44,000.00- 12,000.00- 402,399.00- 90,000.00- 75,000.00- 38,000.00-	1,128,899.00- 8,060,346.66- 31,540.00- 627,556.00- 370,534.52- 280,000.00-	1,128,899.00- 8,060,346.66- 31,540.00- 627,556.00- 370,534.52- 280,000.00- 9,369,977.18- 63,657.69- 110,000.00- 190,000.00-	1,128,899.00- 8,060,346.66- 31,540.00- 627,556.00- 370,534.52- 280,000.00- 9,369,977.18- 63,657.69- 110,000.00- 190,000.00- 121,001.00- 200.00- 8,000.00- 8,000.00- 8,000.00- 8,000.00- 8,000.00- 8,000.00- 8,000.00- 8,000.00- 8,000.00- 12,500.00- 12,500.00-
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34,300.00- 391,000.00- 70,500.00- 70,500.00- 35,000.00-	1,040,500.00- 7,083,078,76- 31,928.00- 470,737.42- 370,535.00- 290,140.86-	1,040,500.00- 7,083,078,76- 31,928.00- 470,737.42- 370,535.00- 290,140.86- 8,246,420.04- 85,000.00- 140,000.00- 7,000.00-	1,040,500.00- 7,083,078,76- 31,928.00- 470,737.42- 370,535.00- 290,140.86- 85,000.00- 140,000.00- 111,000.00- 2,700.00- 2,700.00- 2,700.00- 8,000.00- 8,000.00- 6,500.00- 12,000.00- 12,000.00- 12,000.00- 8,000.00- 8,000.00- 8,000.00- 12,000.00- 12,000.00- 12,000.00- 30,000.00-
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Accounts	2011 Plan	2011 Actuals	Balance	Act%	2010 Plan	2040 Actual	Donolog	V - 40/
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701120 Part Time	654,044,80	337.897.09	316.147.71	2 6	700,001,133.97	5,377,345.49	5,283,788.48	20 1
701130 Pooled Positions	380,511.88	227,541,48	152.970.40	3 6	305,364,33	140.740.69	303,834.35	25
701140 Holiday Work	1,200.00	1,592.87	392.87-	133	1 500 00	10,240.00	207,115.65	8 6
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	30,000.00	20,093.75	9,906.25	29	30,000.00	20.107.68	9 892 32	3 6
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		17,002.32	17,002.32-			25,535,65	25.535.65-1	
/01500 Ment Awards	120,175.23-		120,175.23-		329,645.39-		329,645,39-	
Salaries and Wages	11,419,247.29	6,194,653.62	5,224,593.67	54	12,301,464.86	6,248,646.21	6.052.818.65	51
705110 Group insurance	1,598,298.03	827,662.55	770,635.48	25	1,570,574.85	816,801.75	753,773,10	52
705216 Reurement	2,377,608.28	1,242,494.75	1,135,113.53	25	2,467,024.18	1,253,336.50	1,213,687.68	51
	410,797.00		410,797.00		200,000.00		200,000.00	
705230 Workman Opma	148,666.06	81,847.81	66,818.25	22	151,277.42	81,798.87	69,478.55	54
705330 Themply Comp	04,030.00	31,809.19	22,720.81	28	64,271.45	35,777.91	28,493.54	26
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710100 Professional Services	4,631,433.37	2,217,254.31	2,414,179.06	48	4,475,002.21	2,200,045.03	2,274,957.18	49
10100 Floressional Services	1,737,137.94	97,797.58	1,639,340.36	9	2,031,672.72	267,359.84	1,764,312.88	13
	7,248.00	1,058.00	6,190.00	15	13,600.00	8,337.50	5,262.50	61
	60,900.00	28,200.00	32,700.00	46	55,382.00	22,137.50	33,244.50	40
	106,854.22	41,166.35	65,687.87	39				!
	186,242.00	143,727.69	42,514.31	77	147,602.00	54,481.00	93,121.00	37
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710300 Operating Supplies	132,862.14	54,939.31	77,922.83	41	270,541.22	94,503.70	176,037.52	35
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	1 00.009,0	3,430.54	2,029.46	63	4,705.00	3,095.61	1,609.39	99

Accounts	2011 Plan	2011 Actuals	Balance	Act%	2010 Plan	2040 Actual	2000	39
710508 Telephone Land Lines	53.753.92	23 931 04	20 822 88	45	20 000 03	zoro Actual	Dalarice	ACT%
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	0,450.00	300.35	3,149.65	_	3,150.00	940.63	2,209,37	30
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	120,932.89	74,576.49	46,356.40	62	195,423.01	105,564,32	89,858,69	27
	313,025.68	85,923.27	227,102.41	27	291,252.68	77,710.01	213 542 67	2, 2
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710872 Food Purchases	2.851.00	1 591 26	1 050 74	- 4	000000	01.100.10	77.800,04	- 61
711010 Utilities	1 100 00	1 242 00	47.003.7	8 9	7,695.00	855.30	1,839.70	32
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	58,538.39	28,992.72	29,545.67	20	71.986.43	29 479 87	12 508 5E	3 5
	2,325.00	5,037.20	2,712.20-	217	12.070.00	6 100 00	5,000.00	
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11210 Travel	203.257.37	38.082.62	165 174 75	3 5	104 040 00	38,459.12	28,470.88	22
11213 Travel-Non Cnty Pers		30:300100	2	<u> </u>	194,649.02	22,388.14	172,460.88	=
711300 Cash Over Short		24 27	70 10		1,942.00		1,942.00	
711504 Equipment nonCapital	75.568.02	56.622.27	18 945 75	75	76 506 44	70000		
* Services and Supplies	4.214.249.20	1.416.494.27	2 797 754 93	2 2	/ 000 ARE 47	138,009.79	62,133.68-	184
781004 Equipment Capital	105.454.72	43 283 58	62 174 14	5 5	4,909,400.47	1,076,803.30	3,230,662.17	34
* Capital Outlay	105 151 70	42 202 50	02,171,14	;	01,424,00	87,704.12	283,720.73	24
** Expenses	21.404.04	43,283.38	62,1/1.14	41	371,424.85	87,704.12	283,720.73	24
406400 C	20,370,364.38	87.689,178,8	10,498,698.80	48	22,057,357.39	10,215,198.66	11,842,158,73	46
* Other Fire S						12.60-	12.60	
Course Fill. Sources						12,60-	12 60	T
• + + • • • • • • • • • • • • • • • • •	8,192,500.00-	2,730,832.00-	5,461,668.00-	33	8,795,500.00-	3,360,000.00-	5.435.500.00-	85
i ransters in	8,192,500.00-	2,730,832.00-	5,461,668.00-	33	8,795,500.00-	3.360.000.00-	5 435 500 00-	38
** Other Financing Src/Use	8,192,500.00-	2,730,832.00-	5,461,668.00-	33	8,795,500,00-	3.360.012.60-	5 435 487 40-	g
Total	1,741,779.54	2.420.901.44	679 121 90-	130	1 311 030 52	4 664 007 64	0,400,400	9
				}	30.000.1.01	1 40' /66'100'1	340,958.02-	126



Accounts	2011 Plan	2011 Actuals	Balance	Act%	2040 Dian	2040 Actual		
741400 FOD Accet Management	00 000			2	2010 F 1811	ZOTO ACTUAL	Balance	Act%
	360.00	210.00	150.00	ας.				
711113 Equip Srv Replace				3	1	•		
					2.122.20	1,507,95	811 25	7,
/11114 Equip Sry O & M	702 30	415.50	00 000	Ç,	7 0 10 00	00:1001	64.4.0	=
	200	20.0	700.007	ñ	1,043.60	376.16	667 44	y.
711115 Equip Srv Motor Pool	1,000.00	507.50	492 50	ř	•	00000		3
744447 ESD Enol Charac			00:301	5		790.00	290.00-	
	508.46	329.84	179.62	95	636 64	20 300	77.77	
711110 Pron & Lish Billings	40,000,00			;	10.000	63.062	14.140	40
י י י י י י י י י י י י י י י י י י י	13,080.00	1,979.93	5,700.07	28	11 798 00	6 882 10	107101	
711210 Travel	17 500 00	7 244 70	00000	; ;	00:00:10:	0,002.19	4,810.01	ŝ
	00:000':	8/11/2/	10,288.22	4	16.500.00	4 259 22	12 240 79	ä
711300 Cash Over Short		24 27.	20 00)	77:003'.	14,240.70	07
744504 Familian 14 11 11 11 11 11 11 11 11 11 11 11 11	i	1	17:17					_
/ I I 304 Equipment noncapital	1,700.00	5,586.54	3,886,54-	329	1 700 00	4 570 00	0000	
1* Services and Supplies	21 2 404 76	100 040 46		} ;	20:00	4,07.7.00	7,872.88-	697
	213,401.70	102,673,73	110,528.01	48	237,749.73	108,913,61	128 836 12	46
= Expenses	3,289,896,77	1.501.700.42	1 788 196 35	46	2 011 205 11	4 400 000 00	7 :000 uru	
*** Total	22 020 020 0	1 0 0 0 0 0	00:001100111	2	11,203,11	1,400,000.00	1,545,624.51	49
	7,72,0,06,2	989,270.54	1,109,402.23	47	1,805,344.11	919,441.65	885.902 46	, r
			•	•	-		00000	5

	2011 Plan	2011 Actuals	Balance	Act%	2010 Plan	2040 Actual	Dolono	/07 · V
422510 Air Pollution Permits	391,000.00-	203,655.00-	45.00-	52	402 399 00-	24 to Actual	Dalailce	ACT%
	391,000.00-	203,655.00-	187,345,00-	22	402 399 00-	217,326.00-	184,871.00-	ξ.
	-00.660,989	367,288.54-	318,810.46-	25	681 349 00-	281 199 02	184,871.00-	ζ;
Federal Grants - Indirect		13,796,46-	13.796.46	<u>-</u>	500	40.746.00	400,160.08-	41
	140,000.00-	140,000.00-		100		12,7 10.06-	12,716.08	
432311 Pol Ctrl 455B.830	290,140.86-	159,845.00-	130,295.86-	55	280,000,000	158 650 00-	101	ľ
	1,116,239.86-	-00.026'089	435,309.86-	6	961,349,00-	452 555 00-	-00.020.00-	27
Other Healt Service Charges		701.00-	701.00			992.00-	-00,194,000	4
Plan Review-Air Quality	11,270.00-	17,208.00-	5,938.00	153	15.500 00-	18 657 00-	992.00	ç
	40,000.00-	44.940.00-	4.940.00	112	32 000 00	10,007,004	00.761.6	2 :
	62,000.00-	42.770.00-	19 230 00-	. 6	25,000,00	49,110.00-	16,218.00	149
Assessments-AQM	21,000 00-	16 674 00-	4 326 00	3 6	92,000.00-	50,454.00-	11,546.00-	<u></u>
Inspector Registr-AQ	1.900 00-	3 395 00-	1,326.00-	2 5	22,000.00-	15,435.00-	6,565.00-	2
Dust Plan-Air Quality	165 000 00-	04 4 20 000	1,493.00	2 1	-00.00c,r	3,735.00-	1,835.00	197
	301,170,00-	212 824 00-	99 348 00	3 5	178,333.00-	93,026.00-	85,307.00-	52
	1.808.409.86-	1 097 409 00-	711 000 98	. 6	312,033.00-	231,417.00-	81,216.00-	74
	1 260 070 42	-00.00+,100,1	-00.000,117	5	1,676,381.00-	901,500.00-	774,881.00-	54
Dooled Docitions	1,300,97 0.42	147,174,22	621,804.20	22	1,311,733.43	726,101.01	585,632.42	55
xcContractual Wages	00.000.00	70.808,11	6,040.43	99	8,000.00	4,230.16	3,769.84	53
nceptive Longevity	00 000 80	11			20,000.00		20,000.00	
	6.576.40	70,575,07	12,424.98	46	21,150.00	10,400.00	10,750.00	49
	0.000	46.718,1	4,758.76	78	6,057.21		6,057.21	
Vac Pavoff/Sick Pav-Term		72 011 41	77 770 07			409.82	409.82-	
		11 850 01	42,911.41-					
	1 416 554 52	826 287 57	-10.000,11					
Group Insurance	175 898 81	97 045 74	70 000 47	9 1	1,390,940.64	/41,140.99	655,799.65	23
•	299 272 94	162,613,71	10,083.10	25	156,554.89	87,717.22	68,837.67	92
Medicare April 1986	18 558 58	10,082.72	7 505 96	4 0	285,871.82	157,590.67	128,281.15	52
Workmens Comp	6 740 00	0,302.72	7,393.80	200	17,726.98	9,721.54	8,005.44	55
705330 Unemply Comp	3,740,00	3,348.31	2,391.69	28	6,740.00	3,931.69	2,808.31	28
	502,020,00	5,019.99	0.01	200	1,300.00	1,300.00		9
Professional Services	202,990.33	27.7,463.82	225,526.51	22	468,193.69	260,261.12	207,932.57	56
Medical Services	203,020,23	16.420,72	178,003.32	<u></u>	176,599.41	11,710.34	164,889.07	7
Contracted/Temp Services	40.000.00	00.020	928.00-					
Service Contract	350.00	51.62	900,000,04	L T	C			
Repairs and Maintenance	2 000 00	20:10	290.30	<u>.</u> 6	350.00	363.00	13.00-	104
Operating Supplies	0 100 00	4,000,02	2,040.90	7 6	7,000.00	2,175.27	4,824.73	31
Copy Machine Expense	9,100.00	0,203.07	2,810.13	<u> </u>	4,100.00	7,228.78	3,128.78-	176
02 00	4,400.00	2,981.90	1,418.10	89	4,387.20	2,571.53	1,815.67	29
Once cappies	4,000.00	4,141.09	141.09-	104	3,500.00	1,846.62	1,653,38	53
Scriptions	224.00	213.82	10.18	92	224.00	221.86	2.14	66
	2,200.00	1,708.11	491.89	78	2,200.00	2,054.33	145.67	93
<u>ם</u>	200.00	46.33	153.67	23	200.00	19.02	180.98	10
	200.00	27.00	143.00	53	200.00	567.77	367 77-	284
=	1,000.00	16.773	422.09	28	1,000.00	302.57	697 43	2 6
Licenses & Permits	00.06		90.00		90.00	2.237.67	2.147.67-	2 486
Rental Equipment	1,800.00		1,800.00		1,800.00		1.800.00	ī
relephone Land Lines	7,000.00	3,366.11	3,633.89	48	00'000'6	3,772.45	5,227.55	42
					•			!



Accounts	2011 Plan	2011 Actuals	Balance	Act%	2010 Plan	2040 Actual	Dologo	/07-4
710509 Seminars and Meetings	2 000 00	1 105 00	2 200 5	2	1151 10101	בסוס שכנתמו	Dalalice	ACL%
	00,000,0	00.681,1	3,805.00	7.7	4,200.00	1,205.00	2.995.00	20
/ Incliz Auto Expense	1,200.00	107.00	1,093.00	<u></u>	1.200.00	354 68	045 22	-
710519 Cellular Phone	3,800.00	2,698,82	1 101 18	7	00 000 0	00:100	25.040	ે જ
710529 Dues	425.00	1000010	01:101:1	-	2,000.00	1,995.59	1,804.41	23
1100kg C463	435.00	2,750.00	2,315.00-	632	435.00	1,750.00	1.315.00-	402
710535 Credit Card Fees	1,500.00	595.44	904.56	40	1.500.00	1 096 00	404 00	2 2
710546 Advertising	1.000.00	406 50	593 50	-	200000	01.001	00.404	2
710577 Uniforms & Special Clothing	1 100 00		00000	,	9,700.00	980.19	5,103.81	9
710600 LT Loss Office Special	00.001		00.001,1		1,100.00		1,100.00	
110000 El Edasa-Ollice opace					74,490.12	24,688.00	49.802.12	33
	1,316.00		1,316.00		1.316.00		1 316 00	3
	2,880.00	1,920.00	960.00	29			2	
	7,677.51	8,094.96	417.45-	105	30.340.92	11 207 00	20 040 04	
711114 Equip Srv O & M	13,966.50	5.468 76	8 497 74	90	13 630 37	200.000	19,042.93	ر ا
711115 Fallin Sry Motor Pool		200000	+-: 104.0	<u></u>	13,320.37	16.165,0	7,168.86	47
		253.00	325.00-	-		262.50	262.50-	
/ I I I / ESU ruei Charge	11,125.62	6,014.86	5,110.76	24	12.187.68	6 863 62	F 324 OF	G I
711119 Prop & Liab Billings	2,600.00	4,433.31	3.166.69	23	7 940 00	70,000,0	0,724.00	8 2
711210 Travel	28 500 00	4 230 07	24.260.00) t	00.000.00	4,040.3	69.188'5	ري -
711504 Equipment nonCapital	40,000,00	4,230.97	24,269.03	2	40,227.52	4,093.92	36,133.60	10
	14,000.00	12,296.37	1,703.63	88	4,000.00	11,839.08	7.839.08-	296
Services and Supplies	384,292.86	102,576.68	281,716.18	27	412,608.22	111.513.60	301 094 62	22
/81004_Equipment Capital	92,697.72	43,283.58	49,414.14	47	91,708.35		01 700 25	ī
* Capital Outlay	92,697.72	43,283.58	49,414.14	47	91,708,35		91,708.35	
* Expenses	2,396,535.43	1,249,611.65	1,146,923.78	52	2.369.450.90	1,112,915,71	1 256 535 10	17
485192 Surplus Equipment Sales				l			1,500,000,10	Ī
** Other Financing Src/Use		-				-09.21	12.60	
leto.	588 105 57	150 000 05	100	1		12.60-	12.60	
8	7000,120.07	69.202,261	435,922.92	26	693,069.90	211,403.11	481,666.79	31

Accounts	2011 Plan	2011 Actuals	Balance	Act%	2010 Plan	2040 Actual	000000	/97-4
431100 Federal Grants	2.322.415.70-	1 098 133 50-	00 00	1	2 402 500 00	4 OTF STEET	Dalance	ACT%
431105 Federal Grants - Indirect		17 106 62	17 106 62	-	7,402,300.00-	1.075,377.57-	1,407,202.43-	43
432100 State Grants	255 737 42	64 735 06	17,100.02		1			
* Intercovernmental	2 578 153 13	4 420 020 40	194,002.30-	74	-00.955,556.00-	198,625.75-	353,930.25-	38
JEO160 Congress to Other Agencies	2,076,100.12-	1,170,975.18-	1,401,177.94-	46	3,035,136.00-	1,274,003.32-	1,761,132.68-	42
					63,657.69-	23,909.21-	39.748.48-	38
	85,000.00-	53,941.44-	31,058.56-	63	110,000.00-	50,123.95-	59.876.05-	46
	32,000.00-	24,425.84-	7,574.16-	92	36,500.00-	13.331.98-	23 168 02-	3.2
	140,000.00-	35,071.50-	104,928.50-	25	190,000,00-	81 441 45-	108 558 55	5 5
						1 369 00-	1 280.00	?
460508 Tuberculosis	2,000.00-	4,157.88-	2,842,12-	50	10,000,00	-00.800.4	00.600,1	í
460515 Medicare Reimbursement	500.00-	265 60-	234 40	3 6	-00.000,0	9,006.62-	4,993,38-	သိ
460516 Pam Inc-3rd Prtv Rec	6 500 00-	3 176 58	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	3 5	-00.000	-06/2/30-	172.90	135
	12 000 00-	2, 17 0:30-	5,525,42-	9 r	9,000.00-	4,343.68-	4,656.32-	48
	30,000,00	7,400.99	-10.196,0	ე	-00.000.00	22,329.06-	17,329.06	447
	-00.000,00	-90.80c' / I	12,490.44-	80	30,000.00-	16,774.58-	13,225.42-	26
	0000	0 0			12,500.00-		12,500.00-	
	-00.000.00-	25,925,52-	40,074.48-	<u></u>	100,000.00-	38,974.16-	61,025.84-	99
+ Other Caucation Revenue	11,000.00-	6,212.00-	4,788.00-	99		6,625.00-	6.625.00	
Charges for Services	390,000.00-	176,094.91-	213,905.09-	45	567,157.69-	264.901.59-	302,256 10-	47
484050 Donations Federal Pgm Income	_	24,630.41-	24,630.41			100.00-	100 00	-
485300 Other Misc Govt Rev						900-	00.8	
* Miscellaneous		24,630.41-	24,630.41			106.00-	106.00	
** Kevenue	2,968,153.12-	1,377,700.50-	1,590,452.62-	46	3,602,293,69-	1.539.010.91-	2 063 282 78	/3
701110 Base Salaries	2,613,654.20	1,398,680.88	1,214,973,32	54	3.078.262.37	1 462 062 93	1 646 400 44	2 1
1120 Part Time	573,266.06	314,327.44	258,938,62	22	640,119.02	337 087 66	303 034 36	÷ 5
11130 Pooled Positions	153,345.03	114.492.28	38 852 75	7.2	120 574 14	100,100,100	303,031.30	3 1
701200 Incentive Longevity	52,628.00	28.123.63	24 504 37	2 %	54 703 00	44,032.91	76,518.23	3
701300 Overtime	300008	9 755 66		2 252	04,705.00	27,332.98	27,370.02	20
701412 Salary Adjustment	175 244 98-	200	_	707	2,175.00	3,758.44	1,583.44-	173
		40.694.00	1,0,244.90-		114,541.03		114,541.03	
		10,004.09	10,684.89-			52,337.82	52,337.82-	
	000000000000000000000000000000000000000	194.12	194.12-			7,925.32	7,925.32-	
* Colonion and Monon	55,002.53		53,002.53		329,645.39-		329,645.39-	
705110 Grain Inchination	3,270,950.84	1,876,258.90	1,394,691.94	22	3,680,726.17	1,934,558.06	1,746,168.11	53
	473,252.59	233,137.69	240,114.90	49	524,221.04	258,857.21	265,363.83	49
	695,312.38	374,661.24	320,651.14	54	808,950.04	400,226.71	408,723.33	49
705250 Medicare April 1986	42,923.94	24,278.60	18,645.34	22	49,212.59	25,479.08	23,733.51	25
705320 Workmens Comp	17,220.00	10,045.07	7,174.93	28	21,231.00	12,384.61	8.846.39	28
705330 Unemply Comp	10,560.00	10,560.03	0.03-	100	4,095.00	4.085.00	10.00	101
705360 Benefit Adjustment					1,505.00-		1.505.00-	3
* Employee Benefits	1,239,268.91	652,682.63	586,586.28	53	1,406,204.67	701,032.61	705.172.06	20
	79,586.00	38,186.69	41,399.31	48	305,393.00	126,899.32	178.493.68	3 4
	00.009	75.50	524.50	13	13,000.00	6,325,50	6.674.50	49
	48,900.00	23,200.00	25,700.00	47	43,382.00	15.137.50	28.244.50	2 6
	186,242.00	143,727.69	42,514.31	77	147,602.00	54 481 00	93 121 00	3 6
	4,395.00	4,056.62	338.38	92	12.200.00	6 972 98	5 227 02	2 6
	6,786.00	92.099	6,125.24	9	6,105.00	19.818.18	13 713 18-	325
					350.00		350.00	3
710300 Operating Supplies	58,525.00	26,473.85	32,051.15	45	97,132.00	55.573.99	41 558 01	5.5
	•	•	-	-		1 >>>>	1.2.2021.1	<u> </u>

Accounts	2011 Plan	2011 Actuals	Balance	Act%	2010 Plan	2010 Actual	Ralanco	/0+°V
710334 Copy Machine Expense	12,310.00	6.592.75	5717 25	54	16 463 00	8 450 50	Dalailo	812
710350 Office Supplies	9,645,01	6 665 40	0 070 6	5 6	10,103.00	0,430.30	10,004.42	SS.
710355 Books and Subscriptions	1 900 00	470 05	10.0.0.4	D 1	14,405.00	4,818.45	9,586.55	33
	7,900.00	4/0.00	1,421.15	22	1,730.00	907.62	822.38	25
	4,640.00	2,8/4.36	1,765.64	62	4,858.00	3,154.75	1,703.25	65
	290.00	98.09	191.91	34	535.00	99.76	435.24	6
	15,131.67	5,922.57	9,209.10	39	60,624.30	16,965.14	43.659.16	2 %
	00.090,9	3,201.58	2,858.42	23	11,303.24	2.915.02	8 388 22	0 0
	2,150.00	2,855.00	705.00-	133	3.800.00	685.00	2,300.22	2 6
710504 Registration				 }	00.0000	00:000	0,115.00	2
710506 Dept Insurance Deductible					272 40		900.00-	
710507 Network and Data Lines	2.280.00	1.414.65	865 35	3	4 505 00	000	273.40	
710508 Telephone Land Lines	14.360.00	7 7 7 7 7	00.000	7 7	00.505,07	1,350.90	154.10	6
	7 250 00	11.1111	6,382.83	5 7	18,459.00	8,546.48	9,912.52	46
	1,330.00	5,965.00	1,385.00	<u>~</u>	8,050.00	1,920.00	6,130.00	24
	00.760,11	5,594.33	5,462.67	51	14,793.00	4,941.22	9,851.78	33
	909.00	3/4.21	130.79	74	462.00	508.19	46.19-	110
	1,100.00	1,080.00	20.00	86	1,550.00	924.00	626.00	9
	4,245.00	2,583.88	1,661.12	61	5,935.00	2,124.92	3.810.08	38
10346 Advertising 240577 Haiforms 8 Sanaisi Clathian	17,124.70	24,958.44	7,833.74-	146	29,997.00	17,388.63	12,608.37	28
	00.000		620.00		320.00		350.00	
	308 620 00	10000		ļ		429.00	459.00-	
	308,879,00	85,766.27	223,112.73	78	286,952.00	77,556.01	209,395.99	27
	11,300.00		11,300.00		11,300.00		11,300.00	
1 10/21 Outpatient	117,933.97	52,994.74	64,939.23	45	109,576.00	72,871.10	36,704.90	29
	2,701.00	1,099.38	1,601.62	41	2,545.00	855.30	1,689.70	34
	1,000.00	702.00	298.00	02				
	360.00	30.00	330.00	80				
711113 Equip Srv Replace	1,047.46	28.65	1,018.81	ო	1,397.28	1,027.53	369.75	74
	472.80		472.80		904.60	252.16	652.44	28
	1,125.00	487.50	637.50	43	4,870.00	295.00	4.575.00	œ
		348.45	348.45-		538.69		538.69	
11119 Frop & Liab Billings 11910 Traval	22,800.00	13,300.00	9,500.00	28	21,861.00	12,752.18	9,108.82	28
	32,400.53	8,834.32	23,632.21	27	48,190.50	3,362.96	44,827.54	7
	4 078 00	0 00 0			1,942.00		1,942.00	
Services and Stronline	4,07,000	2,634.37	2,241.63	54	6,828.00	4,786.09	2,041.91	2
Expenses	1,000,794.14	481,043.07	519,751.07	48	1,316,262.01	533,134.46	783,127.55	41
Lyber 300	9,311,013.89	3,009,984.60	2,501,029.29	22	6,403,192.85	3,168,725.13	3,234,467.72	49
	2,542,860.77	1,632,284.10	910,576.67	64	2 800 899 16	1 620 714 22	1010111	ć

6,000,000	A22603 Environmental Promits	2011 Plan	2011 Actuals	Balance	Act%	2010 Plan	2010 Actual	Balance	Act%
Permits 31,0000 0 21,000 0 13,000 0 13,000 0 15,000 0 27,000 0 15,	Permits	63,000.00-	28,346.00-	14,654.00-	99	-00.000,69	24,189.00-	44,811.00-	35
rith permits 34,500.00 21,166.40 19,196.00 40,000.00 20,166.40 19,196.00 40,000.00 20,166.40 19,196.00 40,000.00 20,000.00	Permits	10.500.00-	6 258 00-	49,550.00-	2 8	33,000.00-	16,132.00-	16,868.00-	49
147,000,000	d Service Permits	342,000,00-	210 604 00-	131 396 00-	3 8	-00.006,01	6,525.00-	3,975.00-	62
TYPE OF THE PARTIES AND THE PA	Well Const Perm	34.500.00-	14 799 00-	40 704 00	7 6	355,000.00-	207,847.00-	147,153.00-	29
Permits 17,000,000 14,100,000 12,875,000 12,875,000 12,875,000 12,875,000 12,875,000 12,875,000 14,000	er Company Permits	4.000.00-	702 00-	3 208 00-	ξ 5 α	44,000.00-	20,719.00-	23,281.00-	47
Permils	ollution Permits		26.00	26.00-	2	-000000	-00.1ca,2	9,349.00-	22
Pennils 70,500,000 41,002.00 254,236.00 56 75,000.00 19,714.00 21,022.00 21,022.00 19,714.00 21,022.00	3 Permits	-42,000.00-	34,128.00-	12.872.00-	73	-00 000 06	28 340 85	7 0 0 0	2
Second Color 15,810	ial Event Permits	70,500.00-	41,002.00-	29,498.00-	28	75.000.00-	49 954 20-	25.045.03	2 0
144A 090 377,000.00 486,500.00 284,356.00 58 766,500.00 377,000.00 377,000.00 382,400.00	Applic Fee	35,000.00-	15,881.00-	19,119.00-	45	38.000.00-	18 714 00-	10.040.00-	ò (
15 17 17 17 17 17 17 17	Permits	649,500.00-	365,144,00-	284.356.00-	35	726 500 00-	276,077,06	19,200,007	1 (
444A,090 775,555.00 36,260.00 36,760.00 47,700.00 47,700.00 77,500.00 77,700.00 <t< td=""><td>ral Grants</td><td>307,000.00-</td><td>140.888.96-</td><td>166 111 04-</td><td>8 8</td><td>277 000 00</td><td>479 006 36</td><td>351,427.95-</td><td>25</td></t<>	ral Grants	307,000.00-	140.888.96-	166 111 04-	8 8	277 000 00	479 006 36	351,427.95-	25
44A.090 377.6550 5347.02.56 174.822.44 36 377.02.45 277.02.56 owner Fees 377.62.550 5347.02.56 174.02.44 174.00.00 475.00.00 475.00 460.62.37 77.00.00 475.00 460.62.37 77.00.00 475.00 460.62.37 77.00 460.62.37 77.00 460.62.37 77.00 460.62.37 77.00 460.00 47.00	Grants	75,000.00-	36.250.00-	38 750 00-	2 4	75,000,00	123,220.38-	153,773.62-	44
T72.535.00	Fee NRS 444A.090	370.535 00-	357 042 56	12 402 44	9 6	-00,000,00	37,750.00-	37,250.00-	22
envice Fees 111000.00	ental	752 535 00-	53.181.53	10,432,44	3 8	370,534.52-	299,675.99-	70,858.53-	91
revice Charges 2,700.00	r Quality	2000	132 00-	4 16,333.48-	=	/22,534.52-	460,652.37-	261,882.15-	64
Pools & Spass 2,000.00	/erlav	111 000 00	452.00-	432.00	ļ				
Certification Certificatio	ication Service Fees	200000	-00.061,26	28,850.00-	4/	121,001.00-	-00.126,190	-90'080'09-	51
Certification 6,000000 7,545.00 1452.0	r Healt Service Charges	00 002 6		583.22					
School	Service Certification	-00.007.7		2,218.25	182	8,000.00-	1,629.00-	6,371.00-	8
Proble & Spase Carbon Color Ca	Serv Health	-00.000,0	•	155.00-	86	8,000.00-	9,238.00-	1,238.00	115
Food Sarless 1,2000.00	Doring Dode 9 Con	-00.000,cc	23,584.00-	31,416.00-	43	-90,500.00-	33,772.00-	56,728.00-	37
From services 17,000,000	Doview - Food Specials	2,500.00-	3,601.00-	1,101.00	144	2,000.00-	5,147.00-	147.00	103
Packed P	Neview - rood services	17,000.00-	14,792.15-	2,207.85-	87	30,000.00-	11,155.15-	18.844.85-	37
repulpore 69.00 69.00 69.00 69.00 69.00 69.00 69.00 69.00 69.00 69.00 69.00 69.00 69.00 69.00 69.00 69.00 69.00 69.00 77.00	Review - Vector	24,000.00-	21,311.00-	2,689.00-	88	64,000.00-	17,412.00-	46.588.00-	22
specifion 8,300.00- 2,400.00- 3,137.00- 3,37.00- 3,300.0	Kww Hotel/Motel		-00.69	00.69			212.00-	212.00	i
State Stat	k start		87.00-	87.00			170.00-	170 00	
1 mispectin 17,000,000- 8,725,00- 9,265,00- 51 21,000,00- 1,545,00-	Care Inspection	8,300.00-	4,761.00-	3,539.00-	22	-00.000'6	5.188.00-	3.812.00-	r.
1,910.00	Accomod Inspectn	17,000.00-	8,735.00-	8,265.00-	21	21,000.00-	8.351.00-	12,649.00-	8 8
nris 247,900,000- 144,366,62- 103,533.38- 58 356,501.00- 156,105.15- 200,335.85- ovt Rev 150.00-	sation Kevenue	2,400.00-	1,498.00-	902:00-	62		1.910.00-	1 910 00	}
Fig. 150.00- 1	ervices	247,900.00-	144,366.62-	103,533.38-	28	356,501.00-	156.105.15-	200,395,85-	44
OVIC Rev 1 (1) CMS (1)	oursements		120.00-	150.00	-		150.00-	150.00	•
1,649,935.00	I MISC GOV! Rev						173.00-	173.00	
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92,377 86 82,412.88 9,964.98 89 90,097.00 56,971.91 33,125.09 653.51 1,200.00 671.28 528.72 56 9,900.00 846.49 653.51 8,378.56 840.49 6750.00 20,000.00 20,107.68 9,892.32 21,031.55 21,031.55 21,031.55 226,634.7 286,634.8 236,434.8 236,634.8 23,443.48 20,217.00 54 43,911.91 23,000.00 54 43,604.8 23,443.48 20,217.00 54 43,911.91 20,000.00 54 20,247.00 54 20,247.00 54 20,247.00 54 20,000.00 20,00		3,313,782.63	1,680,310.04	1,633,472.59	51	3,399,403.84	1,673,366.39	1.726.037.45	49
I Wages 1,200.00 671.28 528.72 56 1,500.00 846.49 653.51 gevity 48,750.00 23,100.00 25,650.00 47 52,100.00 23,246.17 28,853.83 gevity 33,788.00 25,841.17 7,946.83 76 34,288.00 18,220.39 16,067.61 30,000.00 20,093.75 9,906.25 67 30,000.00 1,787.87 16,067.61 3,000.00 1,510.06 1,489.94 50 3,000.00 1,787.87 1,212.13 ment 3,000.00 1,510.06 1,489.94 50 3,000.00 1,787.87 1,212.13 ck Pay-Term 173,177.76 21,031.55 10,046.59 10,046.59 10,046.59 nce 496,011.19 260,371.76 236,393.05 51 740,272.62 367,776.19 11986 23,443.48 20,217.00 54 43,911.91 23,066.61	ed Positions	92,377.86	82,412.88	9,964.98	68	90,097.00	56,971.91	33,125,09	83
9evity 48,750.00 25,650.00 47 52,100.00 6,121.44 3,378.56 gevity 33,788.00 25,841.17 7,946.83 76 30,000.00 23,246.17 28,853.83 16,067.61 30,000.00 20,093.75 9,906.25 67 30,000.00 1,787.87 1,212.13 ment 3,000.00 1,510.06 1,489.94 50 30,000.00 1,787.87 1,212.13 304.20-ck Pay-Term 173,177.76 250,371.76 256,371.76 235,639.43 52 480,654.08 240,943.05 24,96.01 20,483.89 20,217.00 54 43,911.91 23,066.48 23,443.48 20,217.00 54 43,911.91 23,000.00 1,210.31 20,845.81 1986 24,960.41 28 23,443.48 20,217.00 54 43,911.91 23,000.00 1,210.44 3,372.496.43 11,986	ady Work	00:002'1	671.28	528.72	26	1,500.00	846.49	653.51	299
33,788.00 25,841.17 7,946.83 76 34,288.00 18,220.39 16,067.61 30,000.00 23,246.17 1,948.94 50 30,000.00 1,787.87 1,212.13 ment 3,000.00 1,510.06 1,489.94 50 30,000.00 1,787.87 1,212.13 304.20-ck Pay-Term 173,177.76 250,371.76 250,371.76 250,371.76 235,639.43 52 490,654.08 240,943.05 24,043.48 20,217.00 54 43,911.91 23,000.01 23,246.17 28,853.83 30 16,067.61 20,085.91 20,087.70 54 43,660.48 23,443.48 20,217.00 54 43,911.91 23,000.61 20,087.30 52 443,911.91 23,000.61 20,087.30 52 52,000.61 23,000.61 20,0845.30 52 52,000.61 23,000.61 20,084.53 30 10,046.59 30,000.61 20,0845.30 54 5.00 52,000.61 20,084.52 30,000.61 20,0845.30 52 54,0845.30 52 54,094.30 54 5.00 52,000.61 20,0845.30 52 54,094.30 54 5,000.61 20,0845.30 52 54,094.30 54 5.00 52,000.61 20,0845.30 54 5.00 52,000.61 20,085.30 52 54,094.30 54 5.00 52,090.61 20,085.30 52 54,094.30 54 5.00 52,090.61 20,0845.30 52 54,094.30 54 5.00 52,090.61 20,0845.30 52 54,094.30 54 5.00 52,090.61 20,0845.30 52,090.61 20,0845.30 52 54,094.30 54 5.00 52,090.61 20,0845.30 52 54,094.30 54 5.00 52,090.61 20,0845.30 52 54,094.30 54 5.00 52,090.61 20,0845.30 52 54,094.30 54 5.00 52,090.61 20,0845.30 54 52,090.61 20,0845.30 54 52,090.61 20,0845.30 54 52,090.61 20,0845.30 54 52,090.61 20,0845.30 54 52,090.61 20,0845.30 54 52,090.61 20,0845.30 54 52,090.61 20,0845.30 54 52,090.61 20,0845.30 54 52,090.61 20,0845.30 54 52,090.61 20,0845.30 54 52,090.61 20,0845	otive I opposity	70 00				9,500.00	6,121,44	3,378.56	64
33,788,00 30,000.00 20,093,75 3,000.00 3,000.00 1,787.87 3,000.00 1,787.87 1,212.13 304.20 304.20 304.20 1,510.06 1,787.87 1,212.13 304.20 304.20 1,510.06 1,787.87 1,212.13 304.20 304.20 304.20 1,510.06 1,787.87 1,212.13 304.20 304.20 304.20 1,610.06 2,007.68 3,000.00 1,787.87 304.20 304.20 1,0046.59 10,046.59 10,046.59 10,046.59 11,0046.28 3,349,720.73 372,496.43 11,986 43,660.48 23,443.48 20,217.00 54 43,911.91 23,066.61 20,077.68 3,600.00 20,107.68 3,600.00 1,787.87 304.20 304.20 1,0046.59 10,046.69 10,046.59 10,046.69 10,046.59 10,046.6	iliye Luligeviliy	48,750.00	23,100.00	25,650.00	47	52,100.00	23,246.17	28,853.83	45
30.000.00	unie dby Day	33,788.00	25,841.17	7,946.83	92	34,288.00	18,220.39	16,067.61	53
ment 3,000.00 1,787.87 1,212.13 and 20.00 1,787.87 1,212.13 and 20.00 ck Pay-Term 304.20- 21,031.55- 10,046.59 10,04	aby ray	30,000.00	20,093.75	9,906.25	29	30,000.00	20,107.68	9,892.32	29
ck Pay-Term 304.20- 21,031.55 - 10,046.59	Jack Adjustmost	3,000.00	1,510.06	1,489.94	20	3,000.00	1,787.87	1,212.13	09
173,177.76 3,349,720.73 4,96,011.19 724,004.28 43,660.48 20,217.00 54,343.48 21,031.55 10,046.59 10,0	y Aujustrierr Davo#/Sick Dav-Term					304.20-		304.20-	
173,177.76- 1,833,939.18 1,515,781.56 55 3,619,584,64 1,831,746.48 1,746.48	Jime						21,031.55	21,031.55-	
3.349,720.73 1,833,939.18 1,515,781.55 55 3,619,584.64 1,831,746.48 1,746.4	Awards	173.177.76-		173 177 76			10,046.59	10,046.59-	
496,011.19 260,371,76 235,639,43 52 480,654,08 240,943.05 1,091,740,140 1,091,740,140 1,091,740,140 1,091,740,140 1,091,740,140 1,091,740,140 1,091,740,140 239,7711,03 724,004.28 370,423.26 353,581.02 51 740,272.62 367,776.19 372,496,43 43,660.48 23,443.48 20,217.00 54 43,911,91 23,066,61 20,845,30	Nages	3,349,720.73	1,833,939.18	1.515.781.55	25	3 619 584 64	1 821 746 40	707 000 702 7	ì
724,004.28 370,423.26 353,581.02 51 740,272.62 367,776.19 372,496.43 23,443.48 20,217.00 54 43,911.91 23,066.61 20,845.30	p Insurance	496,011.19	260,371.76	235.639.43	52	480.654.08	1,031,740.46	1,787,838.16	ב פ
43,660.48 23,443.48 20,217.00 54 43,911.91 23,066.61 20,845.30	sment	724,004.28	370,423.26	353,581.02	5	740,272.62	367.776.19	372 496 43	3 6
	care April 1986	43,660.48	23,443.48	20,217.00	54	43.911.91	23.066.61	05.305.40 05.308.00	3 6



705320 Workmens Comp 705330 Unemply Comp • Employee Benefits 710100 Professional Services 710105 Medical Services 710200 Service Contract 710205 Repairs and Maintenance 710205 Repairs and Maintenance 710205 Repairs and Maintenance 710306 Operating Supplies 710308 Animal Supplies 710319 Chemical Supplies 710336 Animal Supplies 710336 Animal Supplies 710336 Office Supplies 710356 Office Supplies	16,072.00 9,856.00 1,289,603.95 257,890.90 6,548.00	9,375.38 9,856.02	6,696.62	82 52	18,535.00	10,811.99	7.723.01	28 50
705330 Fmploye 710105 710105 710206 710205 710308 710319 710334 710350	9,856.00 1,289,603.95 257,890.90 6,548.00	9,856.02	0.02-	5	3 575 00	3 575 00	1,120.01	8 5
Employe 710100 710100 710100 710200 710200 710300 710319 710350	1,289,603.95 257,890.90 6,548.00		10 101		- 20.0.00			
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	6,548.00	7,855.50	250,035.40	က	179,930,29	75.871.00	10.010,040	3 5
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	_	15,705.91	15,705,91-	ı		00.004.	905.50-	5
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•	2 185 00	07.400,0	10,3/0.74	_ :	23,593.05	8,251.83	15,341.22	33
	2,100.00	325.50	1,859.50	5	1,385.00	750.33	634.67	54
	2,000.00		2,000.00		2,000.00		2,000.00	-
	360,450.00	321,290.65	39,159.35	 68	560,707.00	360,413.48	200,293,52	64
	930.00	325.97	604.03	35	1,280.00	370.66	909.34	g
	10,000.00	4,728.10	5,271.90	47	9,150.00	6 415 25	2 737 75	9 6
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_	7,800.00	6.583.32	1216.68	84	00 000 5	0 707.04	910.70	\$ (
710361 Express and Courier	225.00	80.61	144.39	, %	00.000	0,104.91	-16.91-	501
710391 Fuel & Lube	100.00		100.00	3	300.00	40.99	253.01	9
710500 Other Expense	5.800.00	25.442.82	19 642 82	730	00.00		100:00	
710502 Printing	3 925 00	2 812 60	13,042,02	2 6	00.000		800.00	
710503 Licenses & Permits	2,325.00	2,012.09	1,112.31	7/	3,225.00	1,131.43	2,093.57	33
	2,000,000	420,00	145.00-	901	2,335.00	1,965.00	370.00	84
	00000	10.10	1/6.19-			450.00	450.00-	
-	2,700.00	1,414.65	1,285.35	25	3,200.00	1,350.90	1,849.10	42
	10,800.00	5,285.17	5,514.83	49	11,425.00	5,602.22	5,822.78	49
	00.686,01	7,245.00	9,340.00	44	11,200.00	5,103.00	00.760.9	46
	200.00	-	200.00		375.00	60.78	314.22	1 2
		27.99	27.99-					?
	8,455.00	3,942.90	4,512.10	47	8,405.00	4.043.79	4 361 21	ά
	1,726.00	1,029.00	00.769	09	896.00	1 043 00	147.00	5 4
	4,000.00	1,896.04	2,103.96	47	4.959.78	1 931 06	-00.14-1 -07 900 6	2 6
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				3	6.048.00	27.006.03	13,071,01	8
	18,000.00	8,220.00	9.780.00	46			0,040,00	
	33,221.21	17,573.89	15,647.32	23	67.963.08	50.296.44	17 666 64	77
	43,396.79	22,642.04	20.754.75	52	56 517 86	21 005 20	24 600 67	t 6
		3,537.20	3,537.20-	!	2,000,00	5 240 00	1 760 007 1	9 1
	30,011.67	21,162.26	8.849.41	7.1	39 610 63	18 137 58	30.001,10	5 5
	21,280.00	12,413.38	8,866.62	28	19 085 00	11 132 94	7 062 06	P 0
711210 Travel	54,677.48	13,289.06	41,388.42	24	35 650 00	8 327 02	00.205,7	9 8
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OVERVIEW OF PHASE II OF THE FUNDAMENTAL REVIEW OF WASHOE COUNTY'S RESOURCE ALLOCATION PROCESS

PURPOSE AND GOAL OF PHASE II

Phase II of the Fundamental Review of Washoe County's Resource Allocation Process will support the Board of Commissioner's direction to create a sustainable organization.

The purpose of Phase II is to provide the Board of County Commissioners with recommendations on reducing the cost to provide services by changing service delivery. Recommendations to change service delivery will be developed by evaluating "what services" the County should provide and "how services" should be provided. This has been referred to as opportunities for alternative service delivery.

The goal is to create organizational and financial sustainability by redefining the "what" and "how" of service provision.

SCOPE OF PHASE II

The scope of Phase II has two components: first, which services are included in the review, and second, how much cost savings are needed to create sustainability.

The <u>scope of services</u> includes all services provided by Washoe County. This does not include services such as fire services or GID services, which are separate legal entities.

The scope of savings needed will be looked at three ways:

1. Minimum savings needed in Fiscal Year 2011/12 (first year savings).

In adopting the Budget Plan for Fiscal Year 2011/12 that closes the \$33.5 million deficit, the Board set the minimum savings needed in the first year at \$5 million. These are referred to as the alternative service delivery savings.

2. Minimum savings needed to create financial sustainability beyond Fiscal Year 2011/12.

Because the Budget Plan to close the \$33.5 million deficit includes the use of one-time fund balances in Fiscal Year 2011/12, the savings generated from alternative service delivery needs to be sufficient enough to make up for fund balances not being used beyond Fiscal Year 2011/12. Stated another way, "the savings account" is being tapped in year one to balance the budget. In years two and beyond, service cost savings have to take the place of using "the savings account." The Budget Plan includes the use of \$9.75 million in savings. This means total minimum savings needed to create financial

Organizational Effectiveness Committee Meeting February 17, 2011

OVERVIEW OF PHASE II OF THE FUNDAMENTAL REVIEW OF WASHOE COUNTY'S RESOURCE ALLOCATION PROCESS

sustainability has to be the \$5 million in first year savings <u>plus</u> about \$10 million of annual savings beyond year one. In sum, the scope of total minimum permanent savings needed is \$15 million in service cost reductions.

3. Estimated additional savings needed to absorb the impact of the 2011 Legislative Session.

The full scope of additional savings needed is not known because the potential impact the Nevada Legislature may have on the County is yet to be determined. However, it will be prudent for the County to plan for different financial impact scenarios so that it is prepared to respond to the Legislative outcome. On March 8th, staff will seek the direction of the Board of County Commissioners on developing financial impact scenarios. With this direction, the outer scope of savings to plan for will be brought back to the OEC.

The grid below illustrates albeit incompletely, the scope of savings needed in Fiscal Year 2011/12 and beyond

ESTIMATED SCOPE O	F SAVINGS NEEDED F	ROM ALTERNATIVE SERV	ICE DELIVERY
	Savings Needed in FY 11/12	Additional Savings Needed Beyond FY 11/12	Total Savings Needed
Minimum Savings Needed	\$5 million	\$10 million	\$15 million
<u>PLUS</u> Legislative Impact	???	???	????
Total Savings Needed	???	???	????

It is important to note that the savings needed from service changes is <u>in addition</u> to the labor cost savings of \$13.8 million. Generating labor cost savings is not part of the scope of Phase II of the Fundamental Review. These savings are also <u>in addition</u> to the \$5 million in efficiency savings targets given to all departments.

TIMELINE

Begin April 18, 2011 with final report by August 1, 2011

See the Gant Chart provided for details.

ROLES AND RESPONSIBILITIES FOR CONDUCTING THE REVIEW

OEC-

Serve as "steering committee" for the review. Work with consultant and departments on identifying and vetting

Organizational Effectiveness Committee Meeting February 17, 2011

OVERVIEW OF PHASE II OF THE FUNDAMENTAL REVIEW OF WASHOE COUNTY'S RESOURCE ALLOCATION PROCESS

options to change the "what" and "how" of service delivery. Make recommendations to the Board through the final report.

Project Consultant- The consultant will be responsible for working with

departments and the OEC on developing options to reduce service costs. Consultant will be responsible for writing final

report and interim work products.

Departments — Departments will be responsible for identifying service

delivery cost savings options with the assistance of the

consultant. Departments will also work with OEC providing

information and responding to requests on different

proposals. The public and employees will be included in the

process for developing cost savings options.

Project Management- The Assistant County Mangers will serve as primary project

managers under the direction of the County Manager.

Financial Analysis

Support- The Finance Department will provide support in the

calculation of savings and impact on the overall financial

condition of the County.

Staff Support to OEC- Staff support will be provided by the County Manager's Office

and Finance Department as needed.

Board of County

Commissioners- The BCC has ultimate authority over the process and will

make all final decisions regarding service delivery.

Draft Washoe County Business Strategy 2011-2015

Washoe County Vision Statement -- Best place in the country to live, work, recreate, visit and invest.

Washoe County Mission Statement -- Working together to provide a safe, secure and healthy community.

By 2015 Washoe County's portfolio will emphasize core services:

- Public Safety
- Social Services
- Criminal Justice
- Public Health
- Mandated services and service levels as required in 2015
- Mission critical support services
- Workforce will have high skill levels in problem-solving and decisionmaking, technology application, process management, appropriate financial management, customer service management, legal and risk reduction expertise
- Total compensation of workforce will be scaled to economic conditions and competitive with comparable job market
- Innovation and continuous improvement will support sustainability
- Service delivery business models will insure quality outcomes, efficiency, cost-effectiveness of results, appropriate risk reduction, and healthy regional economy
- Infrastructure, including technology, will be maintained to insure organizational sustainability and community prosperity
- Partnerships with business will strengthen local economy
- Community and social networks will involve citizens in work with County agencies to strengthen families and neighborhoods

Draft February 1, 2011 Page 1

Draft Washoe County Business Strategy 2011-2015

Translates to:

- Workforce predominantly (not exclusively) made up of highly educated, knowledge workers
- Labor practices will support changing demographics, flexible benefits, portability of benefits, etc.
- Job classes and assignments matched to meet appropriate core service demands for knowledge workers at lowest cost; use of paraprofessionals, project pay, etc.
- Workforce will be flexible, dynamic; expand just-in-time use of per diem, temporary and contract employees to meet "surge" workload demands
- Need for concurrence of labor organizations and changes in NRS 288 and NRS 287 to implement
- Risk-based span of control
- Strong capacity in Finance, HR, and Technology
- Service consolidations and expanded service delivery partnerships with business, non-governmental organizations, other agencies, volunteers; managed competition opportunities for employees to compete in outsourcing bids
- Community engagement to support new service level definitions

In future scenarios with **low economic performance**, primary focus will be on core services and mission critical support functions for core services.

In future scenarios with **higher economic performance**, focus can be expanded to enhance quality of life services, and support functions for quality of life services.

In every scenario, emphasis will need to be on:

- **&** Efficiency
 - **❖** Innovation
 - Sustainability

Draft Washoe County Business Strategy 2011-2015

Efficiency efforts may include:

- ☑ investment in training;
- ☑ performance measurement and results management;
- ☑ pay for performance and gain-sharing;
- ☑ technology; and,
- ☑ maintenance of mission critical tools and infrastructure.

Innovation efforts may include:

- ☑ investment in training;
- ☑ competitive compensation;
- ☑ culture of intelligent risk-taking; and,
- ☑ optimal use of technology and other tools.

Sustainability may include:

- ☑ core service funding;
- ☑ balanced investment;
- ☑ employee development;
- ✓ structural cost change;
- ☑ investment in long-term change...

and

- ☑ maintaining adequate reserves;
- ☑ maintaining mission critical infrastructure;
- ☑ labor and other costs scaled to revenues and economic conditions;
- ☑ risk-based decision-making with a long-term view, i.e. prevention strategies;
- ☑ managed competition among county personnel and private sector;
- ☑ community partnerships for economic prosperity; and,
- ☑ citizen support for difficult service changes.

WASHOE COUNTY DISTRICT BOARD OF HEALTH ATTENDANCE CARD PLEASE PRINT

10

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- 1. PUBLIC COMMENT (5 MINUTE TIME LIMIT PER PERSON)
- 2. PLEASE AVOID REPETITIVE REMARKS.

WASHOE COUNTY DISTRICT BOARD OF HEALTH ATTENDANCE CARD

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WASHOE COUNTY DISTRICT BOARD OF HEALTH

NOTE: GENERAL POLICIES FOR ADDRESSING THE BOARD:

- 1. PUBLIC COMMENT (5 MINUTE TIME LIMIT PER PERSON)
- 2. PLEASE AVOID REPETITIVE REMARKS.

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NOTE: GENERAL POLICIES FOR ADDRESSING THE BOARD:

- 1. PUBLIC COMMENT (5 MINUTE TIME LIMIT PER PERSON)
- 2. PLEASE AVOID REPETITIVE REMARKS.

br



Washoe County Health District



STAFF REPORT BOARD MEETING DATE: February 24, 2011

DATE: February 11, 2011

TO: District Board of Health

FROM: Lori Cooke, Fiscal Compliance Officer, Washoe County Health District

775-325-8068, lcooke@washoecounty.us

THROUGH: Eileen Coulombe, Administrative Health Services Officer

775-328-2417, ecoulombe@washoecounty.us

SUBJECT: Public Hearing – Proposed revisions to the Health Department Fee Schedule, specific to the Administrative Health Services Division, Community and Clinical Health Services Division, Air Quality Management Division, in accordance with the Washoe County District Board of Health Regulations Governing Air Quality Management, and the Environmental Health Services Division, in accordance with the Washoe County District Board of Health Regulations Governing Food Establishments; Washoe County District Board of Health Regulations Governing Sewage, Wastewater, and Sanitation; Washoe County District Board of Health Regulations Governing the Prevention of Vector-Borne Diseases; Washoe County District Board of Health Regulations Governing Liquid Waste; Washoe County District Board of Health Regulations Governing Invasive Body Decoration Establishments; Washoe County District Board of Health Regulations Governing Public Bathing Places; Washoe County District Board of Health Regulations Governing Public Spas; Washoe County District Board of Health Regulations Governing Mobile Home and Recreational Vehicle Parks; Washoe County District Board of Health Regulations Governing Solid Waste Management; and the Washoe County District Board of Health **Regulations Governing Well Construction.**

SUMMARY

The Washoe County District Board of Health must approve changes to the Health Department Fee Schedule. Revisions are being proposed to the Department Fee Schedule, specific to the Administrative Health Services Division, Community and Clinical Health Services Division, Air Quality Management Division, in accordance with the Washoe County District Board of Health Regulations Governing Air Quality Management, and the Environmental Health Services Division, in accordance with the Washoe County District Board of Health Regulations

AGENDA ITEM # 12.

Governing Food Establishments; Washoe County District Board of Health Regulations Governing Sewage, Wastewater, and Sanitation; Washoe County District Board of Health Regulations Governing the Prevention of Vector-Borne Diseases; Washoe County District Board of Health Regulations Governing Liquid Waste; Washoe County District Board of Health Regulations Governing Invasive Body Decoration Establishments; Washoe County District Board of Health Regulations Governing Public Bathing Places; Washoe County District Board of Health Regulations Governing Public Spas; Washoe County District Board of Health Regulations Governing Mobile Home and Recreational Vehicle Parks; Washoe County District Board of Health Regulations Governing Solid Waste Management; and the Washoe County District Board of Health Regulations Governing Well Construction. A copy of the proposed schedule is attached.

Goal supported by this item: Approval of the proposed fees supports the District Board of Health's strategic priority: Promote financial accountability and stability. It also supports the Washoe County Strategic Objective: Sustainable Economic, Natural, Organizational, and Social Resources.

PREVIOUS ACTION

The District Board of Health approved departmental revisions applicable to all divisions for the FY11 Department Fee Schedule on March 25, 2010 with an effective date of July 1, 2010.

BACKGROUND

The Health Department's Fee Schedule was implemented in FY 82/83 as a result of the Legislative Process. The Interim Legislative Committee on Local Government and Finance reviewed and approved the methodology used to calculate the Department's fees. We have consistently maintained the approved Legislative methodology during revisions to the Fee Schedule. The methodology has been revisited by the AB538 Interim Study Committee in 1996 and has been re-affirmed.

The methodology of the Health District is to certify the amount of time it takes to perform the activities associated with the fee. Then the most current personnel rate (salaries & benefits) is multiplied by the time. The calculated figure is multiplied by the Health District approved Indirect Cost Rate Agreement (prepared with a federally-approved methodology by an independent contractor for Washoe County, the Health District, Social Services, & Family Support). The resulting amount has any direct expenses added and the fee is rounded to the nearest whole dollar.

Revisions to the current Department Fee Schedule have been prepared in accordance with previous District Board of Health direction to recoup the cost of performing activities to the extent possible and to bring forward the fee schedule annually to more timely account for fluctuations in Health District costs.

The attached fee schedule has been prepared to account for changes in total personnel costs (salaries and benefits), the amount of staff time necessary to perform the activity and the indirect

cost rate. There is no anticipation for FY12 cost of living salary increases for any employee. The fee calculations represent a weighted compilation of the following factors:

- A wage/benefit decrease due to employee association negotiations, effective July 1, 2010
 - o From 2010 to 2011, the average wage/benefit decrease was ~3%
 - o From 2007 to 2011, the average wage/benefit increase is ~5%
- A decrease in the average health insurance cost per employee, effective July 1, 2010
 - o From 2010 to 2011, the average health insurance cost decrease was ~1%
- An increase in the average longevity cost per employee, effective July 1, 2010
 - o From 2010 to 2011, the average incentive longevity cost increase was \$100 per employee
- An average reduction in the Indirect Cost Rate, effective July 1, 2010
 - o AHS indirect reduced by 0.68%
 - o AQM indirect reduced by 7.52%
 - o CCHS indirect reduced by 8.38%
 - o EHS indirect increased by 12.49%
 - o EPHP indirect reduced by 28.94%

A fee justification notebook includes the methodology for each fee. The proposed fee schedule revisions are attached.

Since the last District Board of Health approval on March 25, 2010, the Community and Clinical Health Services Division requested six interim revisions that were approved by the Administrative Health Services Officer (AHSO). The requests reflected changes to the fees for:

- 1) Updated lab costs
- 2) Updated vaccine costs, cost of personnel, direct supplies, indirect cost rate, and update the Influenza and Pneumococcal immunization fees consistent per the agreement with community providers for the upcoming season;
- 3) To include pharmaceuticals excluded from the adopted FY11 fee schedule (x2)
- 4) To include re-activate/update procedure codes due to addition of pharmaceuticals and/or process changes (x2)

In addition, the AHSO approved one Interim Fee Schedule request from the Epidemiology & Public Health Preparedness Division.

1) To change the Vital Statistics Fee Schedule in accordance with the State of Nevada approved fee schedule

The Public Workshops & Public Hearing Notices were noticed in the Reno Gazette Journal on December 7 (Tue.); December 8 (Wed); and December 10 (Fri) of 2010. On December 11, 2010, 8,260 notices, copy attached, were mailed to affected permit holders, businesses, as well as

other identified stakeholders and members of industry, giving notice of the proposed revisions and the public workshops. To date 1,008 (12.2%) of the notices have been returned. A list of the parties that received the mailings is not attached, but can be provided upon request.

Public workshops were held on Friday, January 7, 2011 at 9:00 a.m.; Monday, January 10, 2011 at 2:00 p.m.; and Thursday, January 13, 2011 at 5:30 p.m. The proposed fee schedule was made available for the attendees. In total, 5 members of the public attended the three workshops; all questions/concerns were addressed. In addition, 15 inquiry requests were fielded. Inquiries and comments from the public workshops as well as additional inquiries/comments can be categorized as follows:

- In the current economic climate, fees should not be raised
 - o See attached e-mail
 - Comments from representatives at public workshops, including Builders Association of Northern Nevada and John Ascuaga's Nugget
- Am I required and/or allowed to attend the public workshops or public hearing?
- Why did I receive a notification?
- Would previously exempt entities remain exempt?
- Requests for copies of the proposed fee schedule and direction to the web posting

The proposed fee schedule for each division was posted to the Health Department Internet on Monday, December 6, 2010.

Business impact statements have been prepared in accordance with NRS 237.090 and are attached. If approved the proposed revisions to the fee schedule will have an effective date of July 1, 2011.

The current revenue structure of the Washoe County Health District is as follows:

- Permitting Fees & Charges for Services 12%
- Federal, State and Other Restricted Revenue 44%
- Washoe County General Fund Transfer 44%

FISCAL IMPACT

Should the Board approve the proposed revisions, there will be a net $\underline{\text{increase}}$ in FY12 revenues in the following amounts:

AHS	AQM	CCHS	EHS	EPHP	DEPARTMENT
					TOTAL
\$-0-	\$185,831	\$<10,746>	\$87,189	\$-0-	\$262,274

The calculated revenue increases are based on current activity levels. Regarding CCHS fees, the revenue declines are based on the budgeted fees as affected by the average decreases per program. However, clients pay based on a schedule of discounts using an income-based sliding

scale based on federal poverty guidelines. As such, CCHS revenues might have a more or less significant decrease depending on collection rates versus fee rates.

In addition to the reductions calculated based on the fee revisions, any anticipation of decline of activity level will be included and brought forth as part of the FY12 budget process.

RECOMMENDATION

Staff recommends that the Washoe County District Board of Health approve the Proposed revisions to the Health Department Fee Schedule, specific to the Administrative Health Services Division, Community and Clinical Health Services Division, Air Quality Management Division, in accordance with the Washoe County District Board of Health Regulations Governing Air Quality Management, and the Environmental Health Services Division, in accordance with the Washoe County District Board of Health Regulations Governing Food Establishments; Washoe County District Board of Health Regulations Governing Sewage, Wastewater, and Sanitation; Washoe County District Board of Health Regulations Governing the Prevention of Vector-Borne Diseases; Washoe County District Board of Health Regulations Governing Liquid Waste; Washoe County District Board of Health Regulations Governing Invasive Body Decoration Establishments; Washoe County District Board of Health Regulations Governing Public Bathing Places; Washoe County District Board of Health Regulations Governing Public Spas; Washoe County District Board of Health Regulations Governing Mobile Home and Recreational Vehicle Parks; Washoe County District Board of Health Regulations Governing Solid Waste Management; and the Washoe County District Board of Health Regulations Governing Well Construction.

ALTERNATIVES

The District Board of Health may elect to approve, deny, modify, or revise the proposed fee schedule.

PUBLIC NOTICE ON PROPOSED REVISIONS TO THE WASHOE COUNTY HEALTH DISTRICT FEE SCHEDULE

NOTICE OF PUBLIC WORKSHOPS & NOTICE OF PUBLIC HEARING

The Washoe County Health District is proposing revisions to the District's Fee Schedule. Revisions are specific to the Administrative Health Services Division, Community and Clinical Health Services Division, Air Quality Management Division, in accordance with the Washoe County District Board of Health Regulations Governing Air Quality Management, and the Environmental Health Services Division, in accordance with the Washoe County District Board of Health Regulations Governing Food Establishments; Washoe County District Board of Health Regulations Governing Sewage, Wastewater, and Sanitation; Washoe County District Board of Health Regulations Governing the Prevention of Vector-Borne Diseases; Washoe County District Board of Health Regulations Governing Liquid Waste; Washoe County District Board of Health Regulations Governing Public Bathing Places; Washoe County District Board of Health Regulations Governing Public Spas; Washoe County District Board of Health Regulations Governing Public Spas; Washoe County District Board of Health Regulations Governing Solid Waste Management; and the Washoe County District Board of Health Regulations Governing Solid Waste Management; and the Washoe County District Board of Health Regulations Governing Well Construction.

PUBLIC WORKSHOPS will be conducted at the Washoe County Health District, 1001 E. 9th Street, Reno to discuss the proposed revisions on the following dates and times:

Friday, January 7, 2011 in Auditorium B at 9:00 a.m. Monday, January 10, 2011 in Auditorium B at 2:00 p.m. Thursday, January 13, 2011 in Auditorium B at 5:30 p.m.

THE PUBLIC HEARING will be held on Thursday, February 24, 2011. Interested persons who wish to comment should attend the District Board of Health meeting on Thursday, February 24, 2011, at 1:00 p.m. in Auditorium B, at the Washoe County Health District, 1001 East 9th Street, Building B, Reno. Written comments may be submitted to the Washoe County District Board of Health, P.O. Box 11130, Reno, Nevada, 89520.

Questions or comments regarding the proposed revisions may be addressed to the Washoe County Health District, Administrative Health Services Division, Attention: Lori Cooke, P.O. Box 11130, Reno, NV 89520. Ms. Cooke can be contacted by telephone at (775) 325-8068 or via email at looke@washoecounty.us. Disabled members of the public who require special accommodations or assistance at the meeting(s) are requested to notify Health Administration by calling (775) 328-2400, or in writing to Washoe County Health District, P.O. Box 11130, Reno, Nevada 89520.

The proposed fee schedule is available at www.washoecounty.us/health. If approved, the proposed fee schedule will be effective July 1, 2011.

From: Carrie Byron [mailto:cb0630@hotmail.com] Sent: Thursday, January 13, 2011 1:32 PM

To: Cooke, Lori

Subject:

Dear Ms. Cooke:

Thank you for providing the opportunity to comment on the proposed fee schedule for Food Health permits, Temporary Food Permits, and Sample Permits. The current economic climate does not support an increase at this time. The small business operator not only is paying for entrance fees into events and farmers markets but also increased food preparation costs. These costs added to the permitting fees doesn't allow the small operator to turn a profit or to grow and expand its operation to the point where they can hire employees or move into a retail storefront. We collectively need the jobs and we need our commercial retail market to turnaround. It is recognized that the permit fees were reduced during a time of a weak economy but we are still there and any raising of fees at this time is counter productive for all involved. We urge you to reconsider any increases at this time.

Thank you,

Small Bakery

Washoe County Health District Fee Schedule Proposed Effective Date: July 1, 2011

Administrative Health Services

Page #	Description	Cur	rent Fee	Pro	oposed Fee
1	Tape Recording of Public Meetings (90 minutes)	\$	6.00	\$	1.00
	Epidemiology and Public Health Pre	pared	ness		
2	Certified Copy of Birth Certificate	\$	20.00	\$	20.00
2	Certified Copy of Death Certificate	\$	20.00	\$	20.00
2	Vital Records Search	\$	10.00	\$	10.00

10.00 \$

10.00

Vital Statistics fees are established by the State of Nevada

2 Verification Copy

Washoe County Health District Fee Schedule-Air Quality Management Proposed Effective Date: July 1, 2011

Air Quality Management

Page #	Description	Cı	ırrent Fee	Pr	oposed Fee	
1	Plan Review - Fuel Burning Equipment Only	\$	53.00	\$	72.00	-
1	Plan Review - < 100 tons per year	\$	353.00	\$	525.00	
1	Plan Review - > 100 tons per year	\$	2,825.00	\$	6,829.00	
2	Small Stationary Source Operating Permit	\$	80.00	\$	153.00	
3	Stationary Source Operating Permit	\$	47.00	\$	168.00	
3	Annual Emission Fee (source emitting > 2 lbs/day)	\$	15.00	\$	15.00	
4	Stationary Source Toxics Permit	\$	66.00	\$	71.00	
4	Annual Toxic Emission Fee (source emitting > 1 lb/day)	\$	6.00	\$	6.00	
5	Operating Permit Transfer Fee (person to person)	\$	30.00	\$	43.00	
6	Late Permit Application Processing Fee	\$	207.00	\$	190.00	
7	Gasoline Service Station Permit Fee (base plus per nozzle)					
	Base Fee (per permit)	\$	-	\$	11.00	*new
	Per Nozzle	\$	41.00	\$	37.00	
8	Asbestos Assessment Plan Review	\$	42.00	\$	56.00	
9	Notification of Asbestos App/Removal Fees:					
9-a	Non-NESHAP Demolition	\$	113.00	\$	146.00	
9-a	260<520 Linear ft or 160<320 sq ft	\$	281.00	\$	300.00	
9-a	520<1000 Linear ft or 320<1000 sq ft	\$	563.00	\$	662.00	
9-a	>1000 Linear or Square Feet	\$	1,260.00	\$	1,632.00	
9-a	Facility Annual Notification	\$	1,877.00	\$	3,441.00	
10	Building Plan Review	\$	35.00	\$	49.00	
11	Registration of Neutral Inspectors (Annual)	\$	97.00	\$	89.00	
12	Woodstove Notice of Exemption	\$	13.00	\$	13.00	
13	Geothermal Well Drilling Permit	\$	358.00	\$	333.00	
14	Air Quality Variance Request	\$	228.00	\$	460.00	
15	Dust Control Plan Review (base plus per acre)					
	Base Fee (per permit)		-	\$	33.00	*new
	Per Acre	•	112.00	\$	108.00	
16	Expert Witness Fee (per hour)	\$	276.00	\$	253.00	
17	Air Quality Permit to Operate Late Fee (% of Total Fee Due)		25%		25%	

BUSINESS IMPACT STATEMENT

The following business impact statement was prepared pursuant to NRS 237.090 to address the proposed impact of the proposed adjustment to fees charged by the Air Quality Management Division of the Washoe County Health District, under the authority of the District Board of Health Regulations Governing Air Quality Management, of Section 030.300 through 030.335, Fees and Fee Schedule.

 The following constitutes a description of the manner in which comment was solicited from affected businesses, a summary of their response and an explanation of the manner in which other interested persons may obtain a copy of the summary. (List all trade association or owners and officers of businesses likely to be affected by the proposed rule that have been consulted).

Comments will be considered at the District Board of Health public hearing on February 24, 2011. A Public Hearing Notice was published in the Reno Gazette-Journal per Nevada Open Meeting Law. The Air Quality Management Division has solicited comments via a mailing to affected contractors, permitted sources, asbestos abatement contractors, title companies, and woodstove inspectors indicating the changes to the fee schedule.

2. The estimated economic effect of the proposed rule on the businesses which it is to regulate, including, without limitation, both adverse and beneficial effects, and both direct and indirect effects:

Adverse Effects: No adverse effects have been identified related to costs for inspectors who verify that a residence is in compliance with the regulations.

Beneficial Effects: The modified fee schedule more accurately represents actual costs incurred by the Air Quality Management Division for services performed by staff in the Woodstove Compliance program.

<u>Direct Effects: The individuals or businesses requesting services from the Woodstove Compliance program will be charged an amount that reflects the current cost for services being performed.</u>

Indirect Effects: The Air Quality Management Division reviewed the fees charged for the forms used by the independent inspectors and the woodstove dealers to report compliance with the regulations.

3. The following constitutes a description of the methods that Washoe County Health District considered to reduce the impact of the proposed rule on businesses and a statement regarding whether any, and if so which, of these methods were used: (Include whether the following was considered: simplifying the proposed rule; establishing different standards of compliance for a business; and if applicable, modifying a fee or fine set forth in the rule so that a business could pay a lower fee or fine).

Prior to preparing the modified fee schedule, a review of the cost of forms and the length of time associated with woodstove compliance activities (including

Business Impact Statement Section 030.300 – 030.335; Fees and Fee Schedule Page 2 of 2

processing applications) was conducted by the Division Director and Air Quality Supervisor.

4. Washoe County Health District estimates that the annual cost to the County for enforcement of the proposed rule is:

There will be no additional cost to the County due to the modified fee schedule. The Woodstove Compliance program currently charges a fee. The revisions will reflect no changes to fees for activities currently being performed. The Health District will have no increase or reduction in revenues annually.

5. (If applicable, provide the following): The proposed rule provides a new fee or increases an existing fee and the total annual amount Washoe County Health District expects to receive is:

Not applicable.

The following business impact statement was prepared pursuant to NRS 237.090 to address the proposed impact of the proposed adjustment to fees charged by the Air Quality Management Division of the Washoe County Health District, under the authority of the District Board of Health Regulations Governing Air Quality Management, of Section 030.300 through 030.335, Fees and Fee Schedule.

The following constitutes a description of the manner in which comment was solicited from
affected businesses, a summary of their response and an explanation of the manner in
which other interested persons may obtain a copy of the summary. (List all trade
association or owners and officers of businesses likely to be affected by the proposed rule
that have been consulted).

Comments will be considered at the District Board of Health public hearing on February 24, 2011. A Public Hearing Notice was published in the Reno Gazette-Journal per Nevada Open Meeting Law. The Air Quality Management Division has solicited comments via a mailing to affected contractors, permitted sources, asbestos abatement contractors, title companies, and woodstove inspectors indicating the changes to the fee schedule.

2. The estimated economic effect of the proposed rule on the businesses which it is to regulate, including, without limitation, both adverse and beneficial effects, and both direct and indirect effects:

Adverse Effects: The proposed fee schedule includes increases that will result in increased costs for individuals or businesses requesting: Asbestos Assessment Plan Reviews, and Notification of Asbestos Application/Removal Fees.

Beneficial Effects: The modified fee schedule represents more accurately the actual costs incurred by the Air Quality Management Division for services performed by staff in the Asbestos Program. The costs to businesses requesting Asbestos Assessment Plan Reviews, and Notification of Asbestos Application/Removal Fees will be increased.

<u>Direct Effects: The Air Quality Management Division will assess and collect fees</u>
<u>from individuals or businesses requesting services from the Asbestos program.</u>
<u>These fees will reflect current costs for providing those services.</u>

Indirect Effects: The additional expense or savings realized from the change in fees may be passed on to the end consumer.

3. The following constitutes a description of the methods that Washoe County Health District considered to reduce the impact of the proposed rule on businesses and a statement regarding whether any, and if so which, of these methods were used: (Include whether the following was considered: simplifying the proposed rule; establishing different standards of compliance for a business; and if applicable, modifying a fee or fine set forth in the rule so that a business could pay a lower fee or fine).

<u>Prior to preparing the modified fee schedule, a review of the length of time associated with asbestos program activities (including plan reviews, field inspection, associated with asbestos program activities (including plan reviews, field inspection, as a second control of the length of time associated with asbestos program activities (including plan reviews, field inspection, as a second control of the length of time associated with asbestos program activities (including plan reviews, field inspection).</u>

Business Impact Statement Section 030.300 – 030.335; Fees and Fee Schedule Page 2 of 2

and completing the necessary documentation) was conducted by Air Quality Specialists. The proposed fee schedule reflects current costs for these services.

4. Washoe County Health District estimates that the annual cost to the County for enforcement of the proposed rule is:

There will be no additional cost to the County due to the modified fee schedule. The Asbestos program currently charges a permit/review fee. The revisions will reflect increases to fees for activities that are currently being performed. The Health District will have increased revenues in the approximate amount of \$25,842 annually (\$10,724-Asbestos Assessment Plan Reviews; \$1,089-Non-NESHAP Demolition; \$1,976-260<520 Linear ft; \$1,485-520<1000 Linear ft; \$7,440->1000 Linear ft; \$3,128-Facility Annual Notification.

5. (If applicable, provide the following): The proposed rule provides a new fee or increases an existing fee and the total annual amount Washoe County Health District expects to receive is:

Not applicable.

The money generated by the new fee or increase in existing fee, will be used by the Health District to:

Not applicable.

The following business impact statement was prepared pursuant to NRS 237.090 to address the proposed impact of the proposed adjustment to fees charged by the Air Quality Management Division of the Washoe County Health District, under the authority of the District Board of Health Regulations Governing Air Quality Management, of Section 030.300 through 030.335, Fees and Fee Schedule.

 The following constitutes a description of the manner in which comment was solicited from affected businesses, a summary of their response and an explanation of the manner in which other interested persons may obtain a copy of the summary. (List all trade association or owners and officers of businesses likely to be affected by the proposed rule that have been consulted).

Comments will be considered at the District Board of Health public hearing on February 24, 2011. A Public Hearing Notice was published in the Reno Gazette-Journal per Nevada Open Meeting Law. The Air Quality Management Division has solicited comments via a mailing to affected contractors, permitted sources, asbestos abatement contractors, title companies, and woodstove inspectors indicating the changes to the fee schedule.

2. The estimated economic effect of the proposed rule on the businesses which it is to regulate, including, without limitation, both adverse and beneficial effects, and both direct and indirect effects:

Adverse Effects: The proposed fee schedule includes increases that will result in increased costs for individuals or businesses requesting: Dust Control Plan Reviews.

Beneficial Effects: The modified fee schedule represents more accurately the actual costs incurred by the Air Quality Management Division for services performed by staff in the Dust Control program. The costs to businesses requesting Dust Control Plan Review Fees will be reduced.

<u>Direct Effects: The individuals or businesses requesting services from the Dust Control program will be charged an amount that reflects the current cost for services being performed.</u>

Indirect Effects: The additional expense or savings realized from the change in fees may be passed on to the end consumer.

3. The following constitutes a description of the methods that Washoe County Health District considered to reduce the impact of the proposed rule on businesses and a statement regarding whether any, and if so which, of these methods were used: (Include whether the following was considered: simplifying the proposed rule; establishing different standards of compliance for a business; and if applicable, modifying a fee or fine set forth in the rule so that a business could pay a lower fee or fine).

Prior to preparing the modified fee schedule, a review of the methodology and length of time associated with dust control plan activities (including plan review, evaluation of control measures, and the number of field visits needed) was conducted by

Business Impact Statement Section 030.300 – 030.335; Fees and Fee Schedule Page 2 of 2

Engineers, Air Quality Specialists and an Air Quality Supervisor. The proposed fee schedule reflects current costs for these services.

4. Washoe County Health District estimates that the annual cost to the County for enforcement of the proposed rule is:

There will be no additional cost to the County due to the modified fee schedule. The Dust Control program currently charges a review fee. The revisions will reflect decreases to fees for activities that are currently being performed. The Health District will have reduced revenues in the amount of \$4 per acre with net anticipated revenue reduction of \$2,121.

5. (If applicable, provide the following): The proposed rule provides a new fee or increases an existing fee and the total annual amount Washoe County Health District expects to receive is:

Not applicable.

The money generated by the new fee or increase in existing fee, will be used by the Health District to:

Not applicable.

The following business impact statement was prepared pursuant to NRS 237.090 to address the proposed impact of the proposed adjustment to fees charged by the Air Quality Management Division of the Washoe County Health District, under the authority of the District Board of Health Regulations Governing Air Quality Management, of Section 030.300 through 030.335, Fees and Fee Schedule.

1. The following constitutes a description of the manner in which comment was solicited from affected businesses, a summary of their response and an explanation of the manner in which other interested persons may obtain a copy of the summary. (List all trade association or owners and officers of businesses likely to be affected by the proposed rule that have been consulted).

Comments will be considered at the District Board of Health public hearing on February 24, 2011. A Public Hearing Notice was published in the Reno Gazette-Journal per Nevada Open Meeting Law. The Air Quality Management Division has solicited comments via a mailing to affected contractors, permitted sources, asbestos abatement contractors, title companies, and woodstove inspectors indicating the changes to the fee schedule.

2. The estimated economic effect of the proposed rule on the businesses which it is to regulate, including, without limitation, both adverse and beneficial effects, and both direct and indirect effects:

Adverse Effects: No adverse effects have been identified related to costs for individuals or businesses that do not pay within the 30 day invoice schedule.

Beneficial Effects: The late fee amount is directly proportionate to the annual permit to operate fee. The fee is 25% of the total fee due.

<u>Direct Effects: The individuals or businesses receiving services from the Air Quality Management Division will be charged a fee for paying late.</u>

<u>Indirect Effects: The additional expense realized from the change in fees may be passed on to the end consumer.</u>

3. The following constitutes a description of the methods that Washoe County Health District considered to reduce the impact of the proposed rule on businesses and a statement regarding whether any, and if so which, of these methods were used: (Include whether the following was considered: simplifying the proposed rule; establishing different standards of compliance for a business; and if applicable, modifying a fee or fine set forth in the rule so that a business could pay a lower fee or fine).

The proposed late fee will impact those businesses that choose not to pay the permit to operate fees on time. Since the late fee is calculated as a percentage of the permit fee, the anticipated late fees incurred by individuals or businesses will likely be more as permit fees, in general, have increased.

Business Impact Statement Section 030.300 – 030.335; Fees and Fee Schedule Page 2 of 2

4. Washoe County Health District estimates that the annual cost to the County for enforcement of the proposed rule is:

There will be no additional cost to the County due to the modified fee schedule. The Air Quality Management division currently assesses a late fee equal to 25% of the annual permit amount.

5. (If applicable, provide the following): The proposed rule provides a new fee or increases an existing fee and the total annual amount Washoe County Health District expects to receive is:

Not applicable.

The money generated by the new fee, or increase in existing fee, will be used by the Health District to:

Not applicable.

The following business impact statement was prepared pursuant to NRS 237.090 to address the proposed impact of the proposed adjustment to fees charged by the Air Quality Management Division of the Washoe County Health District, under the authority of the District Board of Health Regulations Governing Air Quality Management, of Section 030.300 through 030.335, Fees and Fee Schedule.

1. The following constitutes a description of the manner in which comment was solicited from affected businesses, a summary of their response and an explanation of the manner in which other interested persons may obtain a copy of the summary. (List all trade association or owners and officers of businesses likely to be affected by the proposed rule that have been consulted).

Comments will be considered at the District Board of Health public hearing on February 24, 2011. A Public Hearing Notice was published in the Reno Gazette-Journal per Nevada Open Meeting Law. The Air Quality Management Division has solicited comments via a mailing to affected contractors, permitted sources, asbestos abatement contractors, title companies, and woodstove inspectors indicating the changes to the fee schedule.

2. The estimated economic effect of the proposed rule on the businesses which it is to regulate, including, without limitation, both adverse and beneficial effects, and both direct and indirect effects:

Adverse Effects: No adverse effects have been identified related to costs for individuals or businesses being certified as Neutral Inspectors.

Beneficial Effects: The modified fee schedule represents more accurately the actual costs incurred by the Air Quality Management Division for services performed by staff. The costs to individuals or businesses being certified as Neutral Inspectors will be reduced.

<u>Direct Effects: The individuals or businesses being trained as Neutral Inspectors will</u> be charged an amount that reflects the current cost for services being performed.

<u>Indirect Effects: The additional expense or savings realized from the change in fees may be passed on to the end consumer.</u>

3. The following constitutes a description of the methods that Washoe County Health District considered to reduce the impact of the proposed rule on businesses and a statement regarding whether any, and if so which, of these methods were used: (Include whether the following was considered: simplifying the proposed rule; establishing different standards of compliance for a business; and if applicable, modifying a fee or fine set forth in the rule so that a business could pay a lower fee or fine).

<u>Prior to preparing the modified fee schedule, a review of the methodology and length of time associated with processing and training applicants was conducted by </u>

Business Impact Statement Section 030.300 – 030.335; Fees and Fee Schedule Page 2 of 2

the Division Director and the Air Quality Supervisor. The proposed fee schedule reflects current costs for these services.

4. Washoe County Health District estimates that the annual cost to the County for enforcement of the proposed rule is:

There will be no additional cost to the County due to the modified fee schedule. The Air Quality Management Division currently trains inspectors and charges a registration fee. The revisions reflect decreases to fees for activities currently being performed. The Health District will have reduced revenues in the approximate amount of \$280 as a result of the proposed decreases in fees related to Neutral Inspector certification.

5. (If applicable, provide the following): The proposed rule provides a new fee or increases an existing fee and the total annual amount Washoe County Health District expects to receive is:

Not applicable.

The money generated by the new fee or increase in existing fee, will be used by the Health District to:

Not applicable.

The following business impact statement was prepared pursuant to NRS 237.090 to address the proposed impact of the proposed adjustment to fees charged by the Air Quality Management Division of the Washoe County Health District, under the authority of the District Board of Health Regulations Governing Air Quality Management, of <u>Section 030.300 through 030.335</u>, Fees and Fee Schedule.

 The following constitutes a description of the manner in which comment was solicited from affected businesses, a summary of their response and an explanation of the manner in which other interested persons may obtain a copy of the summary. (List all trade association or owners and officers of businesses likely to be affected by the proposed rule that have been consulted).

Comments will be considered at the District Board of Health public hearing on February 24, 2011. A Public Hearing Notice was published in the Reno Gazette-Journal per Nevada Open Meeting Law. The Air Quality Management Division has solicited comments via a mailing to affected contractors, permitted sources, asbestos abatement contractors, title companies, and woodstove inspectors indicating the changes to the fee schedule.

2. The estimated economic effect of the proposed rule on the businesses which it is to regulate, including, without limitation, both adverse and beneficial effects, and both direct and indirect effects:

Adverse Effects: The proposed fee schedule includes increases that will result in increased costs for individuals or businesses requesting: Plan Reviews.

Beneficial Effects: The modified fee schedule represents more accurately the actual costs incurred by the Air Quality Management Division for services performed by staff.

<u>Direct Effects:</u> The Air Quality Management Division will assess and collect fees from businesses for plan reviews. These fees will reflect current costs for providing those services. The costs to individuals or businesses requesting plan review activity will be increased.

<u>Indirect Effects: The additional expense or savings realized from the change in fees may be passed on to the end consumer.</u>

3. The following constitutes a description of the methods that Washoe County Health District considered to reduce the impact of the proposed rule on businesses and a statement regarding whether any, and if so which, of these methods were used: (Include whether the following was considered: simplifying the proposed rule; establishing different standards of compliance for a business; and if applicable, modifying a fee or fine set forth in the rule so that a business could pay a lower fee or fine).

Prior to preparing the modified fee schedule, a review of the methodology and length of time associated with processing and training applicants was conducted by the Division Director and the Air Quality Supervisor.

Business Impact Statement Section 030.300 – 030.335; Fees and Fee Schedule Page 2 of 2

4. Washoe County Health District estimates that the annual cost to the County for enforcement of the proposed rule is:

There will be no additional cost to the County due to the modified fee schedule. The Plan Review program currently charges a review fee. The revisions will reflect increases to fees for activities currently being performed. The Health District will have net increased revenues in the approximate amount of \$10,887 annually (\$608-Plan Review-Fuel Burning Equipment Only; \$4,816-Plan Review <100 tons per year; \$unknown-Plan Review>100 tons per year; \$5,488-Building Plan Review; decrease of \$25-Geothermal Well) as a result of the proposed increases in fees related to Plan Reviews.

5. (If applicable, provide the following): The proposed rule provides a new fee or increases an existing fee and the total annual amount Washoe County Health District expects to receive is:

Not applicable.

The money generated by the new fee or increase in existing fee, will be used by the Health District to:

Not applicable.

The following business impact statement was prepared pursuant to NRS 237.090 to address the proposed impact of the proposed adjustment to fees charged by the Air Quality Management Division of the Washoe County Health District, under the authority of the District Board of Health Regulations Governing Air Quality Management, of Section 030.300 through 030.335, Fees and Fee Schedule.

 The following constitutes a description of the manner in which comment was solicited from affected businesses, a summary of their response and an explanation of the manner in which other interested persons may obtain a copy of the summary. (List all trade association or owners and officers of businesses likely to be affected by the proposed rule that have been consulted).

Comments will be considered at the District Board of Health public hearing on February 24, 2011. A Public Hearing Notice was published in the Reno Gazette-Journal per Nevada Open Meeting Law. The Air Quality Management Division has solicited comments via a mailing to affected contractors, permitted sources, asbestos abatement contractors, title companies, and woodstove inspectors indicating the changes to the fee schedule.

2. The estimated economic effect of the proposed rule on the businesses which it is to regulate, including, without limitation, both adverse and beneficial effects, and both direct and indirect effects:

Adverse Effects: The proposed fee schedule includes increases that will result in increased costs for individuals or businesses requesting: Stationary Source permits.

Beneficial Effects: The modified fee schedule represents more accurately the actual costs incurred by the Air Quality Management Division for services performed by staff. The costs to businesses requiring Stationary Source permits will be increased.

<u>Direct Effects: The Air Quality Management Division will assess and collect fees from businesses that are required to have Stationary Source permits. These fees will reflect current costs for providing those services.</u>

Indirect Effects: The additional expense or savings realized from the change in fees may be passed on to the end consumer.

3. The following constitutes a description of the methods that Washoe County Health District considered to reduce the impact of the proposed rule on businesses and a statement regarding whether any, and if so which, of these methods were used: (Include whether the following was considered: simplifying the proposed rule; establishing different standards of compliance for a business; and if applicable, modifying a fee or fine set forth in the rule so that a business could pay a lower fee or fine).

Prior to preparing the modified fee schedule, a review of the length of time associated with stationary source permitting program activities was conducted. The proposed fee schedule reflects current costs for these services.

Business Impact Statement Section 030.300 – 030.335; Fees and Fee Schedule Page 2 of 2

4. Washoe County Health District estimates that the annual cost to the County for enforcement of the proposed rule is:

There will be no additional cost to the County due to the modified fee schedule. The Stationary Source permitting program currently charges a permit fee. The revisions will reflect a combination of increases and decreases to fees for activities that are currently being performed. The Health District will have net increased revenues in the approximate amount of \$151,503 annually (\$795-Stationary Source Toxic Permit; <\$4,118>-Gasoline Service Station Permit; \$20,805-Small Stationary Source Operating Permit; \$133,826-Stationary Source Operating Permit; \$195-Operating Permit Transfer Fee) as a result of the proposed increases in fees related to Stationary Sources.

5. (If applicable, provide the following): The proposed rule provides a new fee or increases an existing fee and the total annual amount Washoe County Health District expects to receive is:

Not applicable.

The money generated by the new fee or increase in existing fee, will be used by the Health District to:

Not applicable.

Washoe County Health District Fee Schedule

Proposed Effective Date: July 1, 2011

Community & Clinical Health Services

Page #	Description	Description Adopted Fee (current)			pposed Fee (new)
1	Day Care Facility Employee Training	\$	23	\$	24
2	Day Care Facility Employee Re-Issue Certification	\$	7	\$	6
3	First Offender Sexual Health Class	\$	-	\$	87 *New
4-b	STD Exam - Limited	\$	61	\$	53
4-b	STD Exam - Extended		78	\$	69
4-b	STD Exam - Comprehensive	\$ \$	95	\$	84
4-b	STD Visit - Low risk	\$	39	\$	31
5	Tuberculosis Risk Assessment	\$	28	\$	26
5	Tuberculin Skin Test	\$	13	\$	12
5	TST Reading	\$	29	\$	26
5	Chest X-ray review by physician	\$	15	\$	14
5	Abnormal diagnostic results review	\$	15	\$	14
5	Abnormal chest X-ray review by physician	\$	15	\$	14
5	Office Visit - medication start	\$	79	\$	72
5	Office Visit - medication refill	\$	28	\$	19
5	Office Visit - brief (10)	\$	15	\$	14
5	Office Visit - DOT (5)	\$	9	\$	6
5	Office Visit - DOT (10)	\$	15	\$	12
5	Office Visit - DOT (15)	\$	21	\$	17
5	Home Visit Services - (M-F)	\$	16	\$	48
5	Home Visit Services - (S-S & Holiday)	\$	16	\$	48
5	Home Visit Services - New patient/limited	\$	45	\$	41
5	Home Visit Services - New patient/extended	\$	140	\$	128
5	AFB Collection	\$	26	\$	24
8	New Patient Visit (Brief)	\$	43	\$	36
8	New Patient Visit (Limited-20)	\$	50	\$	41
8	New Patient Visit (Limited-30)	\$	62	\$	53
8	New Patient Visit (Intermediate)	\$	81	\$	71
8	Established Patient Brief (10 minutes)	\$	27	\$	23
8	Established Patient Brief (20 minutes)	\$	39	\$	34
8	Established Patient Intermediate (30 minutes)	\$	52	\$	46
8	Established Patient Extended (40 minutes)	\$	64	\$	57
8	Initial Comprehensive Preventative Med (age 12-17)	\$	62	\$	53
8	Initial Comprehensive Preventative Med (age 18-39)	\$	56	\$	47
8	Initial Comprehensive Preventative Med (age 40-64)	\$	56	\$	47
8	Periodic Comprehensive Preventative Med (age 12-17)	\$	39	\$	34
8	Periodic Comprehensive Preventative Med (age 18-39)	\$	33	\$	29
8	Periodic Comprehensive Preventative Med (age 40-64)	\$	33	\$	29
8	IUD Consultation	\$	31	\$	28
8	Vasectomy Counseling	\$	87	\$	78
	* If the client completes the vasectomy process, \$452 is billed to the WCHD Family F				
	Center. The client is subsequently billed for the cost based on application of the slidir	ng fee sched	ule. Some	clients	complete
	the counseling but decide against going through with the procedure.				
9	IUD (Paragard Comprehensive visit) *not including device	\$	59	\$	55
9	IUD (Mirena Insert ARCH Foundation) *not including device	\$	59	\$	57
9	Genital Wart Treatment	\$	33	\$	29
9	Contraceptive Implant Removal	\$	45	\$	44

Washoe County Health District Fee Schedule

Proposed Effective Date: July 1, 2011

Community & Clinical Health Services

Page #	Description	-	ted Fee rrent)	-	Proposed Fee (new)					
Interim Immunization Clinic Fee Schedule -Flu Effective September 13, 2010										
12	VFC Eligible Routine Child Immunization (per shot)	\$	16	\$	16					
		Ψ		Ψ	10					
40	Non VFC Eligible									
12 12	Influenza - Pediatric P-Free (6-35 months)	\$	34	\$	32					
12	PCV13 - Pneumococcal 13-valent (Prevnar to age 5)	\$	131	\$	129					
12	RV - Rotorix (6-32 weeks)	\$	106	\$	104					
12	RV - Rotateq (6-32 weeks)	\$	92	\$	90					
12	HAV - Hepatitis A (age 1-18)	\$	35	\$	33					
12	HBV - Hepatitis B (child - through 19)	\$	32	\$	30					
12	DTaP - Daptacel	\$	45	\$	44					
12	DTaP - Infanrix	\$	36	\$	35					
12	DTaP - HBV-IPV - Pediarix	\$	71	\$	70					
	DTaP - IPV - Kinrix	\$	55	\$	53					
12	DTaP - Hib-IPV - Pentacel	\$	95	\$	96					
12	HAV - Hepatitis A - Havrix	\$	43	\$	42					
12	HAV-HBV - Hepatitis A-Hepatitis B (Twinrix adult)	\$	64	\$	64					
12	HBIG - Hepatitis B Immune Globulin (per cc)	\$	115	\$	136					
12	HBV - Hepatitis B (Engerix-B adult)	\$	49	\$	48					
12	Hib - PedvaxHIB	\$	45	\$	43					
12	Hib - ActHIB	\$	45	\$	44					
12	HPV - Human Papillomavirus (Gardasil age 9-26)	\$	153	\$	150					
12	IG - Immune Globulin	\$	38	\$	38					
12	Influenza - Intranasal (age 5-49)	\$	42	\$	40					
12	Influenza (age 3 & older)	\$ \$ \$	28	\$	28					
12	Influenza (age 18 & older)	\$	28	\$	28					
12	IPV - Polio (adult)	\$	46	\$	45					
12	MCV - Meningococcal (Menactra age 11-55)	\$	121	\$	124					
12	MMR - Measles-Mumps-Rubella (adult)	\$	71	\$	69					
12	MMRV - Proquad	\$ \$ \$	151	\$	149					
12	MPSV - Meningococcal (Menomune age 3 & older)	\$	123	\$	124					
12	PPV-23 - Pneumococcal (Pneumovax age 2 & older)		50	\$	50					
12	TD - Tetanus-Diphtheria - Decavac	\$	42	\$	40					
12	TDaP - Tetanus, Diphtheria & Acellular Pertussis	\$ \$	60	\$	58					
12	TDaP - Tetanus, Diphtheria & Acellular Pertussis		50	\$	46					
12	VZV - Varicella (Varivax)	\$	103	\$	101					
13	Laboratory/Outpatient Fee Schedule	See at	tached s	chedule	Э					
14	Pharmaceutical Fee Schedule	Schedule See attached schedule								

Fees in bold are determined by verbal agreements with other providers in the community.

Note: Fees may be adjusted throughout the year to match increases/decreases by vendors supplying vaccine.

LABORATORY/OUTPATIENT FEE SCHEDULE

Laboratory/outpatient tests are provided to clients seen in Family Planning, Teen Health Mall, Sexually Transmitted Disease Clinic and Tuberculosis Prevention & Control Clinic. Charges are based upon actual cost and are typically provided in conjunction with other services, which are charged separately.

Client fees for laboratory/outpatient services are based on the actual charge to the Health Department. Sliding scale discounts are applied as determined by the client's financial record. Charges reflect the current schedule and will be adjusted on a regular basis to match increases/decreases by suppliers or

		Direct Lab				
	D supply cost		utpatient Cost			
ALT	\$ -	\$	4.89			
Aptima (CT & GC combined)	\$ 0.02	\$	9.00			
AST	\$ -	\$	4.89			
Biopsy (each)	\$ -	\$	40.00			
Blood draw fee	\$ -	\$	4.12			
Blood Glucose	\$ -	\$	6.49			
Bronchoscopy	\$ -	\$	669.00			
CBC	\$ -	\$	9.10			
Chem Panel	\$ -	\$	8.62			
Chest View PA	\$ -	\$	31.30			
Chest View PA/Lateral	\$ -	\$	46.54			
CT Thorax with dye	\$ -	\$	329.42			
CT Thorax without dye	\$ -	\$	282.36			
CT Thorax with & without dye	\$ -	\$	403.63			
Draw and ship specimen	\$ -	\$	65.50			
Draw and process refer	\$ -	\$	28.50			
FBS (glucose serum)	\$ 	\$	3.09			
FTA - ABS	\$ 3.56	\$	12.00			
GC culture - Anal	\$ 1.04	\$	6.00			
GC culture - Throat	\$ 1.04	\$	6.00			
GC culture - Vaginal	\$ 1.04	\$	6.00			
Gram Stain	\$ 5.69	\$	-			
Hemocue/hemoglobianalysis	\$ 1.50	\$	-			
Hepatitis A screen	\$ -	\$	20.00			
Hepatitis A Antibody	\$ -	\$	10.00			
Hepatitis B screen (per marker)	\$ 3.56	\$	8.00			
Hepatitis C Antibody	\$ -	\$	18.00			
Herpchek	\$ 0.02	\$	28.00			
HIV Oral Fluid Test	\$ -	\$	33.75			
HIV Rapid Test	\$ -	\$	14.06			
HIV Test	\$ 3.56	\$	5.00			
HPV	\$ -	\$	85.00			
Lipid Profile	\$ -	\$	14.31			
Liver Panel	\$ -	\$	14.21			
Pap	\$ 1.39	\$	9.00			
Pathologist review of abnormal pap	\$ -	\$	11.50			
Pertussis	\$ -	\$	65.00			
Pregnancy Test (blood)	\$ -	\$	13.30			
Prolactin	\$ -	\$	21.44			
Quantitative HCG	\$ -	\$	25.00			
Quantiferon	\$ 1.00	\$	48.50			
Quipid hCG	\$ 1.66	\$	2.70			
RPR (Syphilis)	\$ 3.56	\$	2.70			
Rubella	\$ 3.56	\$	8.50			
Sed Rate Westergren	\$ 12.60	\$	12.60			
Therapeutic Drug Assay	\$ -	\$	70.00			
TP.PA	\$ 3.56	\$	12.00			
TSH	\$ -	\$	17.30			
Urine Dipstick	\$ 1.14	\$	-			
Urine C & S	\$ 0.88	\$	-			
Western Blot	\$ -	\$	42.00			
Wet mount / KOH	\$ 1.27	\$	-			

Edit date: 02/11/2011 Proposed Effective Date: 7/1/2011

PHARMACEUTICAL FEE SCHEDULE

Prescription medications and non-prescription medications are provided to clients seen in Family Planning, Teen Health Mall, Sexually Transmitted Disease Clinic and Tuberculosis Prevention & Control Clinic. Charges are based upon actual cost and are typically provided in conjunction with other services, which are charged separately.

Client fees for pharmaceuticals and non-prescription medications are based on the actual charge to the Health Department. Sliding scale discounts are applied as determined by the client's financial record. Charges reflect the current schedule and will be adjusted on a regular basis to match increases/decreases by suppliers.

Pharmaceutical Co Client Fee				
Acyclovir 200mg	\$	0.02		
Acyclovir 400mg	\$	0.04		
Amikacin 50mg		23.53		
Amikacin 250mg	\$ \$ \$	70.97		
Amoxicillin 250mg	\$	0.05		
Amoxicillin 500mg	\$	0.07		
Azithromycin 500mg	\$	0.16		
Bicillin 2.4 m.u.	\$	1.02		
Capreomycin 1gm	\$	17.78		
Ceftriaxone 250mg / 125mg	\$	0.97		
Cephalixin 250mg	\$	0.03		
Cipro 100mg	\$	1.48		
Cipro 250mg	\$	0.06		
Cipro 500mg	\$	0.06		
Cipro 750mg	\$	0.08		
Clindamycin 300mg #14	\$	0.08		
Clofazimine 50mg	\$	-		
Clotrimazole/Mycelex 7 -45gr	\$	0.74		
Clotrimazole 15gm	\$	1.01		
Conceptrol Gel/Suppositories	\$	1.10		
Cycloserine 250mg	\$	7.38		
Depo-Provera	\$	1.57		
Diflucan/Fluconazole 150mg	\$	0.01		
Diphenhydramine HCL 25mg	\$	0.03		
Double antibiotic ointment	\$	1.52		
Doxycycline 100mg	\$	0.01		
Elimite Permethrin cream 5%	\$	2.19		
Erythoromycin 500mg	\$	0.09		
Ethambutol 100mg	\$	0.14		
Ethambutol 400mg (Myambutol 400mg?)	\$	0.29		
Ethionamide 250mg	\$	1.86		
Ferrous Sequels	\$	0.17		
Flagyl/Metronidazole 500mg	\$	0.04		
Flagyl/Metronidazole 250mg	\$	0.05		
Gatifloxacin 400mg	\$	•		
Hydrocortisone cream	\$	0.87		
Ibuprofen	\$	0.02		
Isoniazid 50mg (Ped. Formulation)	\$	3.35		
Isoniazid 100mg	\$	0.01		
Isoniazid 150mg	\$ \$ \$ \$ \$ \$ \$ \$	-		
Isoniazid 250mg	\$	-		

Edit date: 02/11/2011 Proposed Effective Date: 7/1/2011

		Client Fee
Isoniazid 300mg	\$	0.03
IUD (Mirena-Foundation)	\$	-
IUD (Mirena-PVT)	\$	264.78
IUD (Paragard)	\$ \$ \$	195.22
Kanamycin 1g/3ml	\$	-
Kenamycin 75mg/2ml	\$	-
Kenamycin 500mg/2ml IM	\$	-
Kenamycin 0.5g capsule	\$	-
Levaquin 250mg	\$	2.41
Levaquin 500mg	\$	2.41
Lotrimin/Clotrimazole 1% 15g	\$	1.01
Moxifloxacin 400mg	\$	3.02
Nitrofurantoin 100mg	\$	0.31
Nix Permethrin rinse 1%	\$	3.78
Nutritional Supplements (Boost, Ensure, Pediasure, Etc.)	\$	0.70
OC - Levora	\$	7.26
OC - Micronor	\$	3.25
OC - Nora-Be	\$	7.87
OC - Norinyl 1+35	\$	6.00
OC - Ortho Cyclen	\$	3.78
OC - Ortho Novum 777	\$	5.89
OC - Ortho Tricyclen Lo	\$	5.66
OC - Ortho Tricyclen	\$	3.82
OC - Previfem	\$	8.58
OC - Sronyx		0.69
Ofloxacin 200mg	\$ \$	1.07
Ofloxacin 300mg	\$	0.38
Ofloxacin 400mg	\$	0.66
Phenazophridine HCI 100 mg	\$	0.13
Plan B	\$	31.98
Next Choice	\$	12.26
Prenatal Vitamins (100 tabs)	\$	1.99
Pyrazinamide 100mg (Ped. Formulation)	\$	0.71
Pyrazinamide 500mg	\$	0.52
Rifabutin 150mg	\$	1.58
Rifadin 150mg	\$	0.41
Rifamate	ę.	1.50
Rifampin 300mg	\$ \$ \$	0.44
Rifampin 150mg	Ψ C	0.41
Rifampin 10mg/1 ml susp	\$	0.41
Rifampin 100mg/5ml susp	Ψ Φ	1.69
Streptomycin 1 gr	φ	
Suprax 400mg	ው	6.50
. •	Ф Ф	8.80
TMP/SMZ	Φ	0.03
Tuberculin 10 dose	Þ	2.82
Tuberculin 50 dose	\$	2.05
Vitamin B6 25mg	* * * * * * * *	•
Vitamin B6 50mg	\$	0.01

Edit date: 02/11/2011 Proposed Effective Date: 7/1/2011

Washoe County Health District Fee Schedule - Environmental Health Services PROPOSED EFFECTIVE DATE: JULY 1, 2011

Environmental Health Services

Page #	Account #	Description	Cu	rrent Fee	Pro	posed Fee
		Information Technology (IT) Overlay	\$	11.00	\$	14.00
•	470400 400500	Development Review	_	450.00		404.00
		Change of Land Use	\$	150.00	\$	164.00
		Minor/Major Special Use Permit Review/Development Agreement Parcel Map Review - Sewer Available	\$ \$	200.00 268.00	\$ \$	219.00 293.00
		Parcel Map Review - Sewer Not Available	φ \$	623.00	Ф \$	671.00
•	112100 400020	Talloof Map (Covion Covion Not) (Valiable	Ψ	calculated/	Ψ	calculated/
5	172400-460520	Special Use Permit Conditions Inspection		permit		permit
		Tentative Subdivision Review - Sewer Available	\$	302.00	\$	329.00
6	172400-460520	Tentative Subdivision Review - Sewer Not Available	\$	849.00	\$	908.00
6	172400-460520	Amended or Lapsed Subdivision - Sewer Available	\$	302.00	\$	329.00
		Amended or Lapsed Subdivision - Sewer Not Available	\$	849.00	\$	908.00
		Final Map Review	\$	200.00	\$	219.00
8	172400-460520	Community Development Application Review	\$	65.00	\$	72.00
		Construction Plan Review				
9	172404-460523	Food Service Establishment Construction-Quick Start	\$	28.00	\$	30.00
		Food Service Establishment Construction-Plan Review	Ψ	20.00	Ψ	30.00
10	112404-400020	'Base Fee'	\$	109.00	\$	121.00
10-a		Project less than 1,000 square feet	•	108.00	\$	117.00
10-a		Project 1,000 to 2,999 square feet		151.00	\$	163.00
10-a		Project 3,000 or greater square feet		221.00	\$	239.00
11	172404-460523	Food Service Establishment Construction Remodel Plan Review-'Base Fee'	\$	109.00	\$	121.00
11-a	172404-460523	Food Service Establishment Construction Remodel Plan Review	\$	94.00	\$	102.00
12	172400-460523	Facility Construction Revised Plan Review-Land Dev. Group	\$	123.00	\$	135.00
		Facility Construction Revised Plan Review-Facility	\$	102.00	\$	113.00
		Hotel/Motel Plan Review - Engineering	\$	147.00	\$	161.00
		Hotel/Motel Plan Review - Base Rate-Environmental	\$	66.00	\$	73.00
		Hotel/Motel Plan Review - Per Room Charge-Environmental	\$	5.00	\$	5.00
		Mobile Home/Recreational Vehicle Park Plan Review	\$	316.00	\$	345.00
		Recreational Vehicle Dump Station Permit to Construct	\$	147.00	\$	161.00
		General Environmental Health Services Construction Plan Review-Land Dev.	\$	99.00	\$	109.00
		Sewage Disposal - On Site Construction Permit (per/bldg)	\$	525.00	\$	572.00
		Sewage Disposal - On Site Abandonment Permit	\$	174.00 146.00	\$ \$	188.00 157.00
		Sewage Disposal - On Site System Advisory Inspection Sewage Disposal - On Site Re-inspection (Sewage)	\$ \$	93.00	\$ \$	103.00
		Sewage Disposal - On Site Re-inspection (Wells)	\$	93.00	\$	103.00
		Sewage Disposal - On Site Re-inspection (VA/FHA)	\$	66.00	\$	73.00
		Sewage Disposal - On Site Plan Review Only	\$	174.00	\$	188.00
		Water Treatment Plant Construction Permit and Inspections >1000 Connections	\$	1,408.00	\$	1,527.00
		Water Treatment Plant Construction Permit and Inspections <1000 Connections	\$	387.00	\$	417.00
		Swimming Pool or Spa Construction Plan Review	\$	451.00	\$	491.00
		Swimming Pool or Spa Remodel Plan Review	\$	179.00	\$	195.00
27	172400-460521	Swimming Pool or Spa Construction Reinspection	\$	134.00	\$	128.00
28	172200-422509	Water System Const. Plan Review - New Facility Community	\$	364.00	\$	396.00
28	172200-422509	Water System Const. Plan Review - New Facility Non-Community	\$	228.00	\$	249.00
29	172200-422509	Water System Expansion or Modification - Community	\$	245.00	\$	267.00
		Water System Expansion or Modification - Non-Community	\$	160.00	\$	175.00
		Water Well Abandonment Permit	\$	239.00	\$	259.00
	172400-422508	Water Well Construction Permit	\$	294.00	\$	318.00
30-a		New Replacement Well Construction/Abandonment of Existing Well	\$	349.00	\$	377.00
22	172400-422508	Water Well Construction Re-Inspection	\$	93.00	\$	103.00
		Food Service Establishment Permits				
31	172404-422514	Food Service Establishment-Application	\$	92.00	\$	102.00
	172404-422507		Ф \$	107.00	φ \$	118.00
	172404-422507		\$	107.00	\$	118.00
		Delicatessen Permit	\$	121.00	\$	133.00
		Food Manufacturing Permit	\$	121.00	\$	133.00
		Grocery Store Permit	\$	107.00	\$	118.00
			~		•	5.00

Environmental Health Services

	age #	Account #	Description	Curre	nt Fee	Prop	osed Fee
			Food Service Establishment Permits-Cont.				
			Meat Market Permit	\$	107.00	\$	118.00
			Mobile Food Service Depot Permit	\$	93.00	\$	103.00
			Mobile Food Service Permit	\$	93.00	\$	103.00
			Pre-Packaged Food w/inspection Permit	\$	107.00	\$	118.00
			Pre-packaged w/o inspection Permit	\$	25.00	\$	29.00
			Restaurant Permit	\$	135.00	\$	148.00
			Satellite Food Distribution Site Permit	\$	66.00	\$	73.00
			School Kitchen Permit Permit	\$	231.00	\$	252.00
			Snack Bar Permit	\$	107.00	\$	118.00
			Support Kitchen Permit	\$	121.00	\$	133.00
	32-a	1/2404-42250/	Warehouse Permit	\$	107.00	\$	118.00
			Temporary Foods/Special Events Permits				
	33	172400-422513	1-Day Event Permit	\$	39.00	\$	44.00
			2-Day Event Permit	\$	67.00	\$	75.00
			3-Day Event Permit	\$	79.00	\$ \$	87.00
			4-7 Day Event Permit	\$	157.00	\$	172.00
			8-14 Day Event Permit	\$	298.00	\$	325.00
			1-7 Day Event Low Risk Permit	\$	39.00	\$ \$	44.00
			8-14 Day Event Low Risk Permit	\$ \$	73.00	\$ \$	81.00
			Non Profit 1-14 Days Permit	\$	25.00	\$ \$	25.00
			Non-Profit Conditional Maximum Permit	φ \$	200.00	Ф \$	200.00
			Cumulative Maximum Permit	•	rmit Fee	•	ermit Fee
		172400-422513			it Fee;		nit Fee;
	55	172400-422515			exceed		exceed
				\$100	CACCEU	\$100	CACCEG
	33	172400-422513	Annual Farmer's Market Produce Sample Permit	\$ \$	95.00	\$	105.00
			Annual Sampling Permit	\$	95.00	\$	105.00
_	33	172400 422010	Promoters Fees	Ψ	55.00	•	100.00
		172400-422513	Special Event Permit to Operate	\$	337.00	\$	368.00
V		172400-422513	Recurrent Special Event Permit to Operate		484.00	\$	526.00
		172400-422513			it Fee:	•	it Fee;
	-	172100 122010			exceed		exceed
					l permit		al permit
				fee		fee	p
			Food Protection Managers				
			Food Protection Instructor Examination Proctoring	\$	25.00	\$	27.00
	35	172404-460514	Certificate and Photo ID Issuance & Renewal-Certified Food Protection Managers	\$	28.00	\$	32.00
	36	172404-460514	Certificate/Photo ID Reissuance	\$	6.00	\$	7.00
	37	172404-460514	Food Protection Manager Reciprocity	\$	28.00	\$	32.00
	38	172404-460514	Certificate and Photo ID Issuance & Renewal-Certified Food Protection Instructors'	\$	-	\$	271.00
•	*Previou	s fee of \$0 was appro	oved during regulation review and was not intended to be permanent; fee is assessed once every 5 years				
			Permitted Facilities				
			Permitted Facilities Re-Inspection	\$	67.00	\$	75.00
			Mobile Home or Recreational Vehicle Park Permit - 1-20 spaces	\$	99.00	\$	108.00
			Mobile Home or Recreational Vehicle Park Permit - 21-39 spaces	\$	99.00	\$	108.00
			Mobile Home or Recreational Vehicle Park Permit - 40 or more spaces	\$	115.00	\$	128.00
			RV Dump Station Annual Permit	\$	67.00	\$	75.00
			Swimming Pools/Spas - Seasonal Permit	\$	120.00	\$	132.00
			Swimming Pools - Year Round Permit	\$	133.00	\$	147.00
	43	172400-460534	Child Care Inspection	\$	80.00	\$	88.00
			Madagasa				
	44	470400 400504	<u>Variances</u>		400.00	•	540.00
			Swimming Pools Variance Request (Construction)	\$	469.00	\$	510.00
			Well Construction Variance Request (Construction)	\$	514.00	\$	559.00
			Mobile Home/Recreational Vehicle Park Variance (Construction)	\$	435.00	\$	473.00
			On-Site Subdivision Variance	\$	752.00	\$	816.00
_			Sewage Disposal - On Site Variance Request	\$	752.00	\$	816.00
			Food Service Variance (Permitted Facility)	\$	296.00	\$	323.00
		with program	Lionardi Varianca Paguart	\$	226.00	\$	247.00
1	0	with program	General Variance Request	Ψ	220.00	Ψ	247.00

Environmental Health Services

age #	Account #	Description Name of the Paragraph of the	Curre	nt Fee		Propo	sed Fee	
51	172700-460513	Waste Management Solid Waste System Plan Review	\$	260.00		\$	283.00	
		·			+ \$5			+ \$5
52	172700 422503	Waste Release Permit - Grease Trap & Asbestos Release	\$	35.00	cust	\$	40.00	cust
52	172700-422505	Waste Release Ferritt - Grease Trap & Asbestos Release	Ψ	33.00	+ \$5	Ψ	40.00	+ \$5
52	172700 422502	Waste Release Permit - Sandoil Separator Release	\$	44.00	cust	\$	49.00	cust
		Waste Release Permit - Non-Hazardous Special Waste Release	\$	56.00	Silb	\$	65.00	Silp
		Waste Release Permit - Each Custody Record	\$	1.00		\$	1.00	
		Waste Release Permit - Each Additional Custody Slip Record	\$	5.00		\$	5.00	
		Non-Standard Industrial Waste Permit	\$	99.00		\$	110.00	
		Garbage Exemptions (A,B,C,D,E)	\$	106.00		\$	120.00	
		Biohazardous Waste Transfer Station Permit Biohazardous Waste Treatment Facility Permit	\$ \$	140.00 123.00		\$ \$	152.00 136.00	
		Biohazardous Waste Treatment Facility Fermit	э \$	111.00		φ \$	120.00	
		Biohazardous Waste Generator	\$	129.00		\$	141.00	
		Biosolids Permit	\$	99.00		\$	110.00	
60	172700-422503	Waste Tire Management Facility	\$	152.00		\$	168.00	
	172700-422503	Materials Recovery/Recycling Facility Permit (prev. Waste Reduction/Recycling Facility)	\$	88.00		\$	99.00	
62		Composting Facility Permit	\$	158.00		\$	173.00	
		Landfill Operations Permit	\$	717.00		\$	779.00	
	1/2/00-422503	Municipal Solid Waste/Green Waste Transfer Station Permit	\$	193.00		\$	211.00	
65	470700 400500	Municipal Solid Waste System Inspection-Extra Hours	\$		per hour	\$		per hour
		Waste Hauler Operations Permit Import	\$ \$	85.00 123.00		\$	94.00 136.00	
66 67		Waste Hauler Operations Permit-Import Waste Tire Hauler Permit-Domestic	э \$	93.00		\$ \$	104.00	
07	172700-422303	Waste The Haulet Fernin-Donlestic	Ψ	33.00		Ψ	104.00	
		Miscellaneous						
68		Limited Advisory Inspection	\$	124.00		\$	136.00	
68		Limited Advisory Inspection-Non-Standard Hours	\$	78.00	per hour	\$	76.00	per hour
69	172400-460535	Public Accommodations Inspection	œ	104.00		\$	115.00	
		Up to 50 rooms 50 to 100 rooms		115.00		\$ \$	126.00	
		101-200 rooms		165.00		\$	181.00	
		201-300 rooms		126.00		\$	137.00	
		301-500 rooms	\$	126.00		\$	137.00	
		501-1000 rooms	\$	176.00		\$	192.00	
			\$	203.00		\$	222.00	
		Invasive Body Decoration Establishment Permit	\$	104.00		\$	113.00	
		Invasive Body Decoration Temporary Permit (w/o wheels)	\$	85.00 53.00		\$ \$	93.00 59.00	
		Invasive Body Decoration Mobile Permit (w/wheels) Hazardous Waste/Materials Spill Response	\$ \$	115.00		φ \$	128.00	
		Hazardous Waste/Materials Spili Response Hazardous Waste/Materials Site Assessment/Remediation	\$		per hour	\$		per hour
		Water Sample/Septic Sys Eval/Mortgage Loan-Certification only	\$	29.00	•	\$	32.00	,
		Water Septic System Evaluation Only	\$	155.00		\$	170.00	
		Water Sample/Septic Sys Eval/Sample Evaluation-lab fee only	\$	112.00		\$	112.00	
76	172400-422503	Liquid/Oil/Waste Hauler Vehicle Permit	\$	53.00		\$	60.00	
		Vector Fees						
77	172100-460525	Vector - Construction Plan Review	\$	148.00		\$	222.00	
78		Vector - Limited Advisory Review	\$	52.00		\$	59.00	
	172100-460525	Vector - Final Map Review	\$	93.00		\$	103.00	
80		Vector - Parcel Map Review (sewer available/not available)	\$	203.00		\$	222.00	
81		Vector - Special Use Permit/Site Plan/Major Special Use Permit Review	\$	93.00		\$	103.00	
		Vector - Subdivision Review (tentative map, amended or lapsed)	Ф Ф	148.00		\$	163.00 73.00	
	172100-460525	Vector - Zoning Map/Master Plan/Major Project/Change of Land Use Plan Review Vector - Mobile Home/Recreational Vehicle Park Plan Review	\$ \$	66.00 148.00		\$ \$	163.00	
84 85		Vector - Mobile Home/Recreational Venicle Park Plan Review Vector - Community Development Application Review	э \$	121.00		\$ \$	133.00	
	2100-400020	Todas - Community Bottolophion / ppiloditoli Notion	•	0		7		

Note: *Non-profit fee established by the District Board of Health

The following business impact statement was prepared pursuant to NRS 237.090 to address the proposed impact of the proposed adjustment to fees charged by the Environmental Health Services Division of the Washoe County Health District for construction plan review of water company permits.

 The following constitutes a description of the manner in which comment was solicited from affected businesses, a summary of their response and an explanation of the manner in which other interested persons may obtain a copy of the summary. (List all trade association or owners and officers of businesses likely to be affected by the proposed rule that have been consulted).

Comments will be considered at the District Board of Health public hearing on February 24, 2011. A Public Hearing Notice was published in the Reno Gazette Journal per Nevada Open Meeting Law. The Environmental Health Services Division has solicited comments via a mailing to affected parties including permitted sources indicating the changes to the fee schedule.

2. The estimated economic effect of the proposed rule on the businesses which it is to regulate, including, without limitation, both adverse and beneficial effects, and both direct and indirect effects:

Adverse Effects: The proposed fee schedule includes increases that will result in increased costs for individuals or businesses requesting: Water System Plan Review.

Beneficial Effects: The modified fee schedule represents more accurately the actual costs incurred by the Environmental Health Services Division for services performed by staff in the Water program.

<u>Direct Effects: The individuals or businesses requesting services from the Water program will be charged an amount that reflects the current cost for services being performed.</u>

Indirect Effects: The additional expense or savings realized from the change in fees may be passed on to the end consumer.

3. The following constitutes a description of the methods that Washoe County Health District considered to reduce the impact of the proposed rule on businesses and a statement regarding whether any, and if so which, of these methods were used: (Include whether the following was considered: simplifying the proposed rule; establishing different standards of compliance for a business; and if applicable, modifying a fee or fine set forth in the rule so that a business could pay a lower fee or fine).

Prior to preparing the modified fee schedule, a review of the number of inspections required, the amount of time it takes to complete each inspection (including travel time) associated with water permit activities was conducted by Licensed Engineers. The proposed fee schedule reflects current costs for these services.

Business Impact Statement Fee Changes Page 2 of 2

4. Washoe County Health District estimates that the annual cost to the County for enforcement of the proposed rule is:

There will be no additional cost to the County due to the modified fee schedule. The Water program currently charges a permit/review fee. The revisions will reflect increases to fees for activities currently being performed. The Health District will have increased revenues in the approximate amount of \$308 annually (\$0-Water System Construction Plan Review, \$308-Water System Expansion or Modification Plan Review).

5. (If applicable, provide the following): The proposed rule provides a new fee or increases an existing fee and the total annual amount Washoe County Health District expects to receive is:

Not applicable.

The money generated by the new fee or increase in existing fee, will be used by the Health District to:

Not applicable.

The following business impact statement was prepared pursuant to NRS 237.090 to address the proposed impact of the proposed adjustment to fees charged by the Environmental Health Services Division of the Washoe County Health District for child care facility inspection fee, under the authority of NRS 432A.180 and NRS 439.

 The following constitutes a description of the manner in which comment was solicited from affected businesses, a summary of their response and an explanation of the manner in which other interested persons may obtain a copy of the summary. (List all trade association or owners and officers of businesses likely to be affected by the proposed rule that have been consulted).

Comments will be considered at the District Board of Health public hearing February 24, 2010. A Public Hearing Notice was published in the Reno Gazette Journal per Nevada Open Meeting Law. The Environmental Health Services Division has solicited comments via a mailing to affected parties including permitted sources indicating the changes to the fee schedule.

2. The estimated economic effect of the proposed rule on the businesses which it is to regulate, including, without limitation, both adverse and beneficial effects, and both direct and indirect effects:

Adverse Effects: The proposed fee schedule includes increases that will result in increased costs for individuals or businesses requesting: Child Care Facility inspections.

Beneficial Effects: The modified fee schedule represents more accurately the actual costs incurred by the Environmental Health Services Division for services performed by staff in the Child Care Facility Inspection program.

<u>Direct Effects: The individuals or businesses requiring services from the Child Care Facility Inspection program for inspections will be charged an amount that reflects the current cost for services being performed.</u>

Indirect Effects: The additional expense or savings realized from the change in fees may be passed on to the end consumer.

3. The following constitutes a description of the methods that Washoe County Health District considered to reduce the impact of the proposed rule on businesses and a statement regarding whether any, and if so which, of these methods were used: (Include whether the following was considered: simplifying the proposed rule; establishing different standards of compliance for a business; and if applicable, modifying a fee or fine set forth in the rule so that a business could pay a lower fee or fine).

Prior to preparing the modified fee schedule, a review of the amount of time it takes to complete each inspection (including travel time) associated with Child Care Facility Inspections was conducted by an Environmental Supervisor. The proposed fee schedule reflects current costs for these services.

Business Impact Statement Fee Changes Page 2 of 2

4. Washoe County Health District estimates that the annual cost to the County for enforcement of the proposed rule is:

There will be no additional cost to the County for enforcement of the modified fee schedule. The Environmental Health Services Division already performs the activities associated with Child Care Facility Inspections. The Health District will have increased revenues in the approximate amount of \$928 annually.

5. (If applicable, provide the following): The proposed rule provides a new fee or increases an existing fee and the total annual amount Washoe County Health District expects to receive is:

Not applicable.

The money generated by the new fee or increase in existing fee, will be used by the Health District to:

Not applicable.

The following business impact statement was prepared pursuant to NRS 237.090 to address the proposed impact of the proposed adjustment to fees charged by the Environmental Health Services Division of the Washoe County Health District (Land Development Program), under the authority of the District Board of Health Regulations Governing Sewage, Wastewater and Sanitation and Well Construction.

 The following constitutes a description of the manner in which comment was solicited from affected businesses, a summary of their response and an explanation of the manner in which other interested persons may obtain a copy of the summary. (List all trade association or owners and officers of businesses likely to be affected by the proposed rule that have been consulted).

Comments will be considered at the District Board of Health public hearing on February 24, 2011. A Public Hearing Notice was published in the Reno Gazette Journal per Nevada Open Meeting Law. The Environmental Health Services Division has solicited comments via a mailing to affected parties including permitted sources indicating the changes to the fee schedule.

2. The estimated economic effect of the proposed rule on the businesses which it is to regulate, including, without limitation, both adverse and beneficial effects, and both direct and indirect effects:

Adverse Effects: The proposed fee schedule includes increases that will result in increased costs for individuals or businesses requesting: Water Well-Abandonment, Construction and Re-inspection, Land Development Review, Sewage Disposal and Hotel/Motel Construction Plan Reviews, and Water Sample/Septic System Evaluations.

Beneficial Effects: The modified fee schedule represents more accurately the actual costs incurred by the Environmental Health Services Division for services performed by staff in the Land Development Program.

<u>Direct Effects: The individuals or businesses requesting services from the Land Development program will be charged an amount that reflects the current cost for services being performed.</u>

<u>Indirect Effects: The additional expense or savings realized from the change in fees may be passed on to the end consumer.</u>

3. The following constitutes a description of the methods that Washoe County Health District considered to reduce the impact of the proposed rule on businesses and a statement regarding whether any, and if so which, of these methods were used: (Include whether the following was considered: simplifying the proposed rule; establishing different standards of compliance for a business; and if applicable, modifying a fee or fine set forth in the rule so that a business could pay a lower fee or fine).

Prior to preparing the modified fee schedule, a review of the number of inspections required, the amount of time it takes to complete each inspection (including travel time) associated with land development activities was conducted by Licensed Engineers. The proposed fee schedule reflects current costs for these services.

Business Impact Statement Fee Changes Page 2 of 2

4. Washoe County Health District estimates that the annual cost to the County for enforcement of the proposed rule is:

There will be no additional cost to the County due to the modified fee schedule. The Land Development program currently charges a permit/review fee. The revisions will reflect a net decrease to fees for activities currently being performed. The Health District will have increased revenues in the approximate amount of \$7,807 annually (\$2,724-land development, \$2,808-sewage disposal, including variance requests, \$2,268-water well abandonment, construction, reinspections, \$7-hotel/motel plan review, \$0-water sample/septic system).

5. (If applicable, provide the following): The proposed rule provides a new fee or increases an existing fee and the total annual amount Washoe County Health District expects to receive is:

Not applicable.

The money generated by the new fee or increase in existing fee, will be used by the Health District to:

Not applicable.

The following business impact statement was prepared pursuant to NRS 237.090 to address the proposed impact of the proposed adjustment to fees charged by the Environmental Health Services Division of the Washoe County Health District (Food Program), under the authority of the District Board of Health Regulations Governing <u>Food Establishments</u>.

1. The following constitutes a description of the manner in which comment was solicited from affected businesses, a summary of their response and an explanation of the manner in which other interested persons may obtain a copy of the summary. (List all trade association or owners and officers of businesses likely to be affected by the proposed rule that have been consulted).

Comments will be considered at the District Board of Health public hearing on February 24, 2011. A Public Hearing Notice was published in the Reno Gazette Journal per Nevada Open Meeting Law. The Environmental Health Services Division has solicited comments via a mailing to affected parties including permitted sources indicating the changes to the fee schedule.

2. The estimated economic effect of the proposed rule on the businesses which it is to regulate, including, without limitation, both adverse and beneficial effects, and both direct and indirect effects:

Adverse Effects: The proposed fee schedule includes increases that will result in increased costs for individuals or businesses requesting: Food Service Establishment permits, Food Service Establishment plan reviews, and Food Protection Manager permits/certifications.

Beneficial Effects: The modified fee schedule represents more accurately the actual costs incurred by the Environmental Health Services Division for services performed by staff in the Food Program.

<u>Direct Effects: The individuals or businesses requesting services from the Food Program will be charged an amount that reflects the current cost for services being performed.</u>

<u>Indirect Effects: The additional expense or savings realized from the change in fees may be passed on to the end consumer.</u>

Business Impact Statement Fee Changes District Board of Health Regulations Governing Food Establishments Page 2 of 2

3. The following constitutes a description of the methods that Washoe County Health District considered to reduce the impact of the proposed rule on businesses and a statement regarding whether any, and if so which, of these methods were used: (Include whether the following was considered: simplifying the proposed rule; establishing different standards of compliance for a business; and if applicable, modifying a fee or fine set forth in the rule so that a business could pay a lower fee or fine).

Prior to preparing the modified fee schedule, a review of the length of time associated with the food establishment program activities was conducted. The proposed fee schedule reflects current costs for these services.

4. Washoe County Health District estimates that the annual cost to the County for enforcement of the proposed rule is:

There will be no additional cost to the County due to the modified fee schedule. The revisions will reflect an increase to fees for activities currently being performed. The Health District will have increased revenues in the approximate amount of \$47,910 annually.

5. (If applicable, provide the following): The proposed rule provides a new fee or increases an existing fee and the total annual amount Washoe County Health District expects to receive is:

Not applicable.

The money generated by the new fee or increase in existing fee, will be used by the Health District to:

Not applicable.

The following business impact statement was prepared pursuant to NRS 237.090 to address the proposed impact of the proposed adjustment to fees charged by the Environmental Health Services Division of the Washoe County Health District, under the authority of the District Board of Health Regulations Governing <u>Invasive Body Decorations (IBDs).</u>

1. The following constitutes a description of the manner in which comment was solicited from affected businesses, a summary of their response and an explanation of the manner in which other interested persons may obtain a copy of the summary. (List all trade association or owners and officers of businesses likely to be affected by the proposed rule that have been consulted).

Comments will be considered at the District Board of Health public hearing on February 24, 2011. A Public Hearing Notice was published in the Reno Gazette Journal per Nevada Open Meeting Law. The Environmental Health Services Division has solicited comments via a mailing to affected parties including permitted sources indicating the changes to the fee schedule.

2. The estimated economic effect of the proposed rule on the businesses which it is to regulate, including, without limitation, both adverse and beneficial effects, and both direct and indirect effects:

Adverse Effects: The proposed fee schedule includes increases that will result in increased costs for individuals or businesses requesting: Invasive Body Decoration Establishment Permits, Invasive Body Decoration Temporary Permits, with and without wheels.

Beneficial Effects: The modified fee schedule represents more accurately the actual costs incurred by the Environmental Health Services Division for services performed by staff in the Invasive Body Decoration program.

<u>Direct Effects: The individuals or businesses requesting services from the Invasive Body Decoration program will be charged an amount that reflects the current cost for services being performed.</u>

<u>Indirect Effects: The additional expense or savings realized from the change in fees may be passed on to the end consumer.</u>

3. The following constitutes a description of the methods that Washoe County Health District considered to reduce the impact of the proposed rule on businesses and a statement regarding whether any, and if so which, of these methods were used: (Include whether the following was considered: simplifying the proposed rule; establishing different standards of compliance for a business; and if applicable, modifying a fee or fine set forth in the rule so that a business could pay a lower fee or fine).

Prior to preparing the modified fee schedule, a review of the number of inspections required, the amount of time it takes to complete each inspection (including travel time) associated with invasive body decoration permit activities was conducted by a Environmental Supervisor and Senior Environmental Health Specialist. The proposed fee schedule reflects current costs for these services.

Business Impact Statement Fee Changes Page 2 of 2

4. Washoe County Health District estimates that the annual cost to the County for enforcement of the proposed rule is:

There will be no additional cost to the County due to the modified fee schedule. The Invasive Body Decoration program currently charges a permit fee. The revisions will reflect an increase to fees for activities currently being performed. The Health District will have increased revenues in the approximate amount of \$867 annually (\$387- IBD Establishments, \$480-IBC Temporary Permit without wheels, \$0-Temporary IBD Permit with wheels).

5. (If applicable, provide the following): The proposed rule provides a new fee or increases an existing fee and the total annual amount Washoe County Health District expects to receive is:

Not applicable.

The money generated by the new fee or increase in existing fee, will be used by the Health District to:

Not applicable.

The following business impact statement was prepared pursuant to NRS 237.090 to address the proposed impact of the proposed adjustment to fees charged by the Environmental Health Services Division of the Washoe County Health District, under the authority of the District Board of Health Regulations Governing Mobile Home and Recreational Vehicle Parks.

1. The following constitutes a description of the manner in which comment was solicited from affected businesses, a summary of their response and an explanation of the manner in which other interested persons may obtain a copy of the summary. (List all trade association or owners and officers of businesses likely to be affected by the proposed rule that have been consulted).

Comments will be considered at the District Board of Health public hearing on February 24, 2011. A Public Hearing Notice was published in the Reno Gazette Journal per Nevada Open Meeting Law. The Environmental Health Services Division has solicited comments via a mailing to affected parties including permitted sources indicating the changes to the fee schedule.

2. The estimated economic effect of the proposed rule on the businesses which it is to regulate, including, without limitation, both adverse and beneficial effects, and both direct and indirect effects:

Adverse Effects: The proposed fee schedule includes increases that will result in increased costs for individuals or businesses requesting: Mobile Home and Recreational Vehicle Park permits.

Beneficial Effects: The modified fee schedule represents more accurately the actual costs incurred by the Environmental Health Services Division for services performed by staff in the Mobile Home and Recreational Vehicle Park program.

<u>Direct Effects: The individuals or businesses requesting services from the Mobile Home and Recreation Vehicle Park program will be charged an amount that reflects the current cost for services being performed.</u>

Indirect Effects: The additional expense or savings realized from the change in fees may be passed on to the end consumer.

3. The following constitutes a description of the methods that Washoe County Health District considered to reduce the impact of the proposed rule on businesses and a statement regarding whether any, and if so which, of these methods were used: (Include whether the following was considered: simplifying the proposed rule; establishing different standards of compliance for a business; and if applicable, modifying a fee or fine set forth in the rule so that a business could pay a lower fee or fine).

Prior to preparing the modified fee schedule, a review of the number of inspections required, the amount of time it takes to complete each inspection (including travel time) associated with mobile home and recreational vehicle park permit activities was conducted by an Environmental Supervisor and Senior Environmental Health Specialist. The proposed fee schedule reflects current costs for these services.

Business Impact Statement Fee Changes Page 2 of 2

4. Washoe County Health District estimates that the annual cost to the County for enforcement of the proposed rule is:

There will be no additional cost to the County due to the modified fee schedule. The mobile home and recreational vehicle park program currently charges a permit fee. The revisions will reflect increases to fees for activities currently being performed. The Health District will have increased revenues in the approximate amount of \$1,133 annually (\$162-1-20 spaces, \$243-21-39 spaces, and \$728-40+ spaces).

5. (If applicable, provide the following): The proposed rule provides a new fee or increases an existing fee and the total annual amount Washoe County Health District expects to receive is:

Not applicable.

The money generated by the new fee or increase in existing fee, will be used by the Health District to:

Not applicable.

The following business impact statement was prepared pursuant to NRS 237.090 to address the proposed impact of the proposed adjustment to fees charged by the Environmental Health Services Division of the Washoe County Health District, under the authority of the District Board of Health Regulations Governing <u>Public Bathing Places and Public Spas.</u>

1. The following constitutes a description of the manner in which comment was solicited from affected businesses, a summary of their response and an explanation of the manner in which other interested persons may obtain a copy of the summary. (List all trade association or owners and officers of businesses likely to be affected by the proposed rule that have been consulted).

Comments will be considered at the District Board of Health public hearing on February 24, 2011. A Public Hearing Notice was published in the Reno Gazette Journal per Nevada Open Meeting Law. The Environmental Health Services Division has solicited comments via a mailing to affected parties including permitted sources indicating the changes to the fee schedule.

2. The estimated economic effect of the proposed rule on the businesses which it is to regulate, including, without limitation, both adverse and beneficial effects, and both direct and indirect effects:

Adverse Effects: The proposed fee schedule includes increases that will result in increased costs for individuals or businesses requesting: Swimming Pool/Spa Construction Plan Reviews, Remodel Plan Reviews and Permits.

Beneficial Effects: The modified fee schedule represents more accurately the actual costs incurred by the Environmental Health Services Division for services performed by staff in the Swimming Pool/Spa program.

<u>Direct Effects: The individuals or businesses requesting services from the Swimming Pool/Spa program will be charged an amount that reflects the current cost for services being performed.</u>

<u>Indirect Effects: The additional expense or savings realized from the change in fees may be passed on to the end consumer.</u>

3. The following constitutes a description of the methods that Washoe County Health District considered to reduce the impact of the proposed rule on businesses and a statement regarding whether any, and if so which, of these methods were used: (Include whether the following was considered: simplifying the proposed rule; establishing different standards of compliance for a business; and if applicable, modifying a fee or fine set forth in the rule so that a business could pay a lower fee or fine).

Prior to preparing the modified fee schedule, a review of the number of inspections required, the amount of time it takes to complete each inspection (including travel time) associated with swimming pool/spa permit activities was conducted by a Environmental Supervisor. The activities associated with swimming pools/spa construction plan review were reviewed by Licensed Engineers. The proposed fee schedule reflects current costs for these services.

Business Impact Statement Fee Changes Page 2 of 2

4. Washoe County Health District estimates that the annual cost to the County for enforcement of the proposed rule is:

There will be no additional cost to the County due to the modified fee schedule. The Swimming Pool/Spa program currently charges a permit/review fee. The revisions will reflect net increases to fees for activities currently being performed. The Health District will have increased revenues in the approximate amount of \$7,251 annually (\$3,346-Pool/Spa Annual Permits, \$3,756-Pool/Spa Seasonal Permits, \$185-Plan Review, and \$<36>-Pool/Spa Construction Reinspection).

5. (If applicable, provide the following): The proposed rule provides a new fee or increases an existing fee and the total annual amount Washoe County Health District expects to receive is:

Not applicable.

The money generated by the new fee or increase in existing fee, will be used by the Health District to:

Not applicable.

The following business impact statement was prepared pursuant to NRS 237.090 to address the proposed impact of the proposed adjustment to fees charged by the Environmental Health Services Division of the Washoe County Health District for public accommodation inspection fee.

 The following constitutes a description of the manner in which comment was solicited from affected businesses, a summary of their response and an explanation of the manner in which other interested persons may obtain a copy of the summary. (List all trade association or owners and officers of businesses likely to be affected by the proposed rule that have been consulted).

Comments will be considered at the District Board of Health public hearing on February 24, 2011. A Public Hearing Notice was published in the Reno Gazette Journal per Nevada Open Meeting Law. The Environmental Health Services Division has solicited comments via a mailing to affected parties including permitted sources indicating the changes to the fee schedule.

2. The estimated economic effect of the proposed rule on the businesses which it is to regulate, including, without limitation, both adverse and beneficial effects, and both direct and indirect effects:

Adverse Effects: The proposed fee schedule includes charging a fee that will result in increased costs for individuals or businesses requiring: Public Accommodation inspections.

Beneficial Effects: The modified fee schedule represents more accurately the actual costs for plan reviews incurred by the Environmental Health Services Division for services performed by staff in the Public Accommodation program.

<u>Direct Effects: The individuals or businesses requiring services from the Public Accommodations program for inspections will be charged an amount that reflects the current cost for services being performed.</u>

<u>Indirect Effects: The additional expense or savings realized from the change in fees may be passed on to the end consumer.</u>

3. The following constitutes a description of the methods that Washoe County Health District considered to reduce the impact of the proposed rule on businesses and a statement regarding whether any, and if so which, of these methods were used: (Include whether the following was considered: simplifying the proposed rule; establishing different standards of compliance for a business; and if applicable, modifying a fee or fine set forth in the rule so that a business could pay a lower fee or fine).

Prior to preparing the modified fee schedule, a review of the number of inspections required, the amount of time it takes to complete each inspection (including travel time) associated with public accommodations inspections was conducted by an Environmental Supervisor and Senior Environmental Health Specialist. The proposed fee schedule reflects current costs for these services.

Business Impact Statement Fee Changes Page 2 of 2

4. Washoe County Health District estimates that the annual cost to the County for enforcement of the proposed rule is:

There will be no additional cost to the County for enforcement of the modified fee schedule. The revisions will reflect increases to fees for activities currently being performed. The Health District will have increased revenues in the approximate amount of \$1,798 annually (\$880-up to 50 rooms, \$308-51-100 rooms, \$352-101-200 rooms, \$66-201-300 rooms, \$33-301-500 rooms, \$64-501-1000 rooms, and \$95-more than 1000 rooms).

5. (If applicable, provide the following): The proposed rule provides a new fee or increases an existing fee and the total annual amount Washoe County Health District expects to receive is:

Not applicable.

The money generated by the new fee or increase in existing fee, will be used by the Health District to:

Not applicable.

6. (If applicable, provide the following): The proposed rule includes provisions which duplicate or are more stringent than federal, state or local standards regulating the same activity. The following explains why such duplicative or more stringent provisions are necessary.

Not applicable.

BUSINESS IMPACT STATEMENT

The following business impact statement was prepared pursuant to NRS 237.090 to address the proposed impact of the proposed adjustment to fees charged by the Environmental Health Services Division of the Washoe County Health District, under the authority of the District Board of Health Regulations Governing <u>Food Establishments</u>, <u>Section 170.106</u>

1. The following constitutes a description of the manner in which comment was solicited from affected businesses, a summary of their response and an explanation of the manner in which other interested persons may obtain a copy of the summary. (List all trade association or owners and officers of businesses likely to be affected by the proposed rule that have been consulted).

Comments will be considered at the District Board of Health public hearing on February 24, 2011. A Public Hearing Notice was published in the Reno Gazette Journal per Nevada Open Meeting Law. The Environmental Health Services Division has solicited comments via a mailing to affected parties including permitted sources indicating the changes to the fee schedule.

2. The estimated economic effect of the proposed rule on the businesses which it is to regulate, including, without limitation, both adverse and beneficial effects, and both direct and indirect effects:

Adverse Effects: The proposed fee schedule includes charging a fee that will result in increased costs for individuals or businesses, including special event promoters, requiring: Temporary Foods/Special Events permits.

Beneficial Effects: The modified schedule represents more accurately the actual costs incurred by the Environmental Health Services Division for services performed by staff in the Temporary Food/Special Event Programs.

<u>Direct Effects: The individuals or businesses, including special event promoters, will be charged an amount that reflects the current cost for services being performed.</u>

Indirect Effects: The additional expense or savings realized from the change in fee may be passed on to the temporary food service operators.

3. The following constitutes a description of the methods that Washoe County Health District considered to reduce the impact of the proposed rule on businesses and a statement regarding whether any, and if so which, of these methods were used: (Include whether the following was considered: simplifying the proposed rule; establishing different standards of compliance for a business; and if applicable, modifying a fee or fine set forth in the rule so that a business could pay a lower fee or fine).

Prior to preparing the modified fee schedule, the Senior Environmentalist and Environmental Health Specialist Supervisor conducted an analysis of the time spent in meetings and for travel in addition to reviewing the time spent on reviewing event layout, support requirements, vendor list and location. The proposed fee schedule reflects current costs for these services.

Business Impact Statement Fee Changes Page 2 of 2

4. Washoe County Health District estimates that the annual cost to the County for enforcement of the proposed rule is:

There will be no additional cost to the County due to the modified fee schedule. The Temporary Food/Special Events program currently charges permit fees. The revisions will reflect increases to fees for activities currently being performed. The Health District will have increased revenues in the approximate amount of \$9,875 annually.

5. (If applicable, provide the following): The proposed rule provides a new fee or increases an existing fee and the total annual amount Washoe County Health District expects to receive is:

Not applicable.

The money generated by the new fee or increase in existing fee, will be used by the Health District to:

Not applicable.

6. (If applicable, provide the following): The proposed rule includes provisions which duplicate or are more stringent than federal, state or local standards regulating the same activity. The following explains why such duplicative or more stringent provisions are necessary.

Not applicable.

BUSINESS IMPACT STATEMENT

The following business impact statement was prepared pursuant to NRS 237.090 to address the proposed impact of the proposed adjustment to fees charged by the Environmental Health Services Division of the Washoe County Health District, under the authority of the District Board of Health Regulations Governing the Prevention of Vector-Borne Diseases.

 The following constitutes a description of the manner in which comment was solicited from affected businesses, a summary of their response and an explanation of the manner in which other interested persons may obtain a copy of the summary. (List all trade association or owners and officers of businesses likely to be affected by the proposed rule that have been consulted).

Comments will be considered at the District Board of Health public hearing on February 24, 2011. A Public Hearing Notice was published in the Reno Gazette Journal per Nevada Open Meeting Law. The Environmental Health Services Division has solicited comments via a mailing to affected parties including permitted sources indicating the changes to the fee schedule.

2. The estimated economic effect of the proposed rule on the businesses which it is to regulate, including, without limitation, both adverse and beneficial effects, and both direct and indirect effects:

Adverse Effects: The proposed fee schedule includes charging a fee that will result in increased costs for individuals or businesses such as developers and engineering firms requesting: plan reviews, including grading plans, map reviews, special use permits.

Beneficial Effects: The modified fee schedule represents more accurately the actual costs incurred by the Environmental Health Services Division for services performed by staff in the Vector-Borne Disease Program.

<u>Direct Effects: The permit holder or agency will be charged an amount that reflects the current cost for services being performed.</u>

Indirect Effects: The additional expense or savings realized from the change in fee may be passed on to the end consumer.

3. The following constitutes a description of the methods that Washoe County Health District considered to reduce the impact of the proposed rule on businesses and a statement regarding whether any, and if so which, of these methods were used: (Include whether the following was considered: simplifying the proposed rule; establishing different standards of compliance for a business; and if applicable, modifying a fee or fine set forth in the rule so that a business could pay a lower fee or fine).

Prior to preparing the modified fee schedule, program staff reviewed the type of and length of time for activities performed. The proposed fee schedule reflects current costs for these services.

Business Impact Statement Fee Changes, Vector-Borne Diseases Page 2 of 2

4. Washoe County Health District estimates that the annual cost to the County for enforcement of the proposed rule is:

There will be no additional cost to the County due to the modified fee schedule. The Vector-Borne Diseases program currently charges these fees. The revisions will reflect increases to fees for activities currently being performed. The Health District will have increased revenues in the approximate amount of \$2,928 annually.

5. (If applicable, provide the following): The proposed rule provides a new fee or increases an existing fee and the total annual amount Washoe County Health District expects to receive is:

Not applicable.

The money generated by the new fee or increase in existing fee, will be used by the Health District to:

Not applicable.

6. (If applicable, provide the following): The proposed rule includes provisions which duplicate or are more stringent than federal, state or local standards regulating the same activity. The following explains why such duplicative or more stringent provisions are necessary.

Not applicable.

BUSINESS IMPACT STATEMENT

The following business impact statement was prepared pursuant to NRS 237.090 to address the proposed impact of the proposed adjustment to fees charged by the Environmental Health Services Division of the Washoe County Health District, under the authority of the District Board of Health Regulations Governing Solid Waste Management.

 The following constitutes a description of the manner in which comment was solicited from affected businesses, a summary of their response and an explanation of the manner in which other interested persons may obtain a copy of the summary. (List all trade association or owners and officers of businesses likely to be affected by the proposed rule that have been consulted).

Comments will be considered at the District Board of Health public hearing on February 24, 2011. A Public Hearing Notice was published in the Reno Gazette Journal per Nevada Open Meeting Law. The Environmental Health Services Division has solicited comments via a mailing to affected parties including permitted sources indicating the changes to the fee schedule.

2. The estimated economic effect of the proposed rule on the businesses which it is to regulate, including, without limitation, both adverse and beneficial effects, and both direct and indirect effects:

Adverse Effects: The proposed fee schedule includes increases that will result in increased costs for individuals or businesses requesting: Garbage Exemptions, RV Dump Station Permits and Waste Reduction/Recycling Facility, Solid Waste System Plan Review, Waste Release Permits, and Municipal Solid Waste Inspections.

Beneficial Effects: The modified fee schedule represents more accurately the actual costs incurred by the Environmental Health Services Division for services performed by staff in the Solid Waste Management program.

<u>Direct Effects: The individuals or businesses requesting services from the Solid Waste Management program will be charged an amount that reflects the current cost for services being performed.</u>

<u>Indirect Effects: The additional expense or savings realized from the change in fees may be passed on to the end consumer.</u>

Business Impact Statement Fee Changes Page 2 of 2

3. The following constitutes a description of the methods that Washoe County Health District considered to reduce the impact of the proposed rule on businesses and a statement regarding whether any, and if so which, of these methods were used: (Include whether the following was considered: simplifying the proposed rule; establishing different standards of compliance for a business; and if applicable, modifying a fee or fine set forth in the rule so that a business could pay a lower fee or fine).

Prior to preparing the modified fee schedule, a review of the number of inspections required, the amount of time it takes to complete each inspection (including travel time) associated with solid waste management was conducted Environmental Health Supervisors and Senior Environmental Health Specialists. The proposed fee schedule reflects current costs for these services.

4. Washoe County Health District estimates that the annual cost to the County for enforcement of the proposed rule is:

There will be no additional cost to the County due to the modified fee schedule. The Solid Waste Management program currently charges permit/review fees. The revisions will reflect an increase to fees for activities currently being performed. The Health District will have increased revenues in the approximate amount of \$6,384 annually (\$69-Solid Waste System Plan Review, \$4,180-Waste Release Permits, \$490 Garbage Exemptions, \$171 Bio-hazardous Waste Permits; \$104-RV Dump Station, \$907-Waste Haulers, \$463-Municipal Solid Waste Permits).

5. (If applicable, provide the following): The proposed rule provides a new fee or increases an existing fee and the total annual amount Washoe County Health District expects to receive is:

Not applicable.

The money generated by the new fee or increase in existing fee, will be used by the Health District to:

Not applicable.

6. (If applicable, provide the following): The proposed rule includes provisions which duplicate or are more stringent than federal, state or local standards regulating the same activity. The following explains why such duplicative or more stringent provisions are necessary.

Not applicable.

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STATE OF NEVADA COUNTY OF WASHOE

Being first duly sworn, deposes and says: That as the legal clerk of the Reno Gazette-Journal, a daily newspaper of general circulation published in Reno, Washoe County, State of Nevada, that the notice referenced below has published in each regular and entire issue of said newspaper between the dates: 12/07/2010 - 12/10/2010, for exact publication dates please see last line of Proof of Publication below.

Signed:

DEC 1 0 2010

Subscribed and sworn to before me

PAMELA K. HEISLER
Notary Public - State of Nevada
Appointment Recorded in Washoe County
No: 04-86494-2 - Expires December 8, 2011

Proof of Publication

PUBLIC NOTICE ON PROPOSED REVISIONS TO THE WASHOE COUNTY HEALTH DISTRICT FEE SCHEDULE NOTICE OF PUBLIC WORKSHOPS & NOTICE OF PUBLIC HEARING The Washoe County Health District is proposing revisions to the District's Fee Schedule. Revisions are specific to the Administrative Health Services Division, Community and Clinical Health Services Division, Air Quality Management Division, in accordance with the Washoe County District Board of Health Regulations Governing Air Quality Management, and the Environmental Health Services Division, in accordance with the Washoe County District Board of Health Regulations Governing Food Establishments; Washoe County District Board of Health Regulations Governing Sewage, Wastewater, and Sanitation; Washoe County District Board of Health Regulations Governing the Prevention of Vector-Borne Diseases; Washoe County District Board of Health Regulations Governing Liquid Waste; Washoe County District Board of Health Regulations Governing Invasive Body Decoration Establishments; Washoe County District Board of Health Regulations Governing Public Bathing Places; Washoe County District Board of Health Regulations Governing Public Spas; Washoe County District Board of Health Regulations Governing Mobile Home and Recreational Vehicle Parks; Washoe County District Board of Health Regulations Governing Solid Waste Management; and the Washoe

Ad Number: 1000734434 Page 1 of 2

County District Board of Health Regulations Governing Well Construction. PUBLIC WORKSHOPS will be conducted at the Washoe County Health District, 1001 E. 9th Street, Reno to discuss the proposed revisions on the following dates and times: Friday, January 7, 2011 in Auditorium B at 9:00 a.m. Monday, January 10, 2011 in Auditorium B at 2:00 p.m. Thursday, January 13, 2011 in Auditorium B at 5:30 p.m. THE PUBLIC HEARING will be held on Thursday, February 24, 2011. Interested persons who wish to comment should attend the District Board of Health meeting on Thursday, February 24, 2011, at 1:00 p.m. in Auditorium B, at the Washoe County Health District, 1001 East 9th Street, Building B, Reno. Written comments may be submitted to the Washoe County District Board of Health, P.O. Box 11130, Reno, Nevada, 89520. Questions or comments regarding the proposed revisions may be addressed to the Washoe County Health District, Administrative Health Services Division, Attention: Lori Cooke, P.O. Box 11130, Reno, NV 89520. Ms. Cooke can be contacted by telephone at (775) 325-8068 or via email at lcooke@washoecounty.us. Disabled members of the public who require special accommodations or assistance at the meeting(s) are requested to notify Health Administration by calling (775) 328-2400, or in writing to Washoe County Health District, P.O. Box 11130, Reno, Nevada 89520. The proposed fee schedule is available at www.washoecounty.us/health. If approved, the proposed fee schedule will be effective July 1, 2011. No. 734434 Dec. 7, 8, 10, 2010

Ad Number: 1000734434

Tue / wed / Fri



Washoe County Health District

ENVIRONMENTAL HEALTH SERVICES DIVISION

DATE: February 2, 2011

TO: Washoe County District Board of Health

FROM: Jeanne Rucker, Environmental Health Specialist Supervisor

SUBJECT: Amendments and Additions to the Regulations of the Washoe County District Board of Health Governing Solid Waste Management

010.696 Source Separated Recyclable Material - Amendment

010.768 Waste Tire Generator (WTG) - Amendment

010.772 Waste Tire Hauler (WTH) – Amendment

010.776 Waste Tire Management Facility (WTMF) - Amendment

085.005 – 085.600, inclusive – Disposal of Waste Tires - Addition

Recommendation:

Staff recommends that the Board approve and adopt the referenced regulations as submitted.

Background:

Nevada Administrative Code has language that has been used to regulate waste tire haulers and waste tire management facilities for approximately 15 years. The 2009 Legislature approved additional restrictions regarding waste tire management facilities. Specifically, the Legislature required that IF a waste tire management facility exists within a community, waste tires are prohibited from being disposed in a municipal solid waste landfill.

It was determined that in order to implement this new requirement, the agency would also have to adopt the existing regulations. Therefore, Section 085 is dedicated to the requirements and restrictions set forth for waste tire disposal, waste tire haulers and waste tire management facilities. Definitions contained in Section 010 have been slightly modified to be consistent with the Nevada Administrative Code.

Waste Tire Regulations February 2, 2011

The proposed regulations were distributed to all waste tire haulers permitted by the Washoe County Health District. There are no permitted waste tire management facilities in Washoe County at this time. A public workshop was held on November 17, 2010. Only two (2) members of the public attended. They had a few questions, but no changes to the draft regulation resulted.

Fiscal Impact:

There is no fiscal impact. Waste tire haulers are currently permitted under existing state regulations and pay a permit fee. These regulations do not require additional fees.

R. Jeanne Rucker, REHS

Environmental Health Specialist Supervisor

SECTION 010 DEFINITIONS

Italics = new language
Strikethrough = deleted language
Definitions:

010.512 PASSENGER CAR means a motor vehicle designed to carry 10 persons or less, except a motorcycle or a motor driven cycle.

010.516 PASSENGER TIRE EQUIVALENT means a measure of waste tires or materials derived from waste tires that is expressed as an equivalent number of passenger tires, where one waste tire or 20 pounds of material derived from waste tires equals one passenger tire equivalent.

010.544 PNEUMATIC TIRE means all tires inflated with compressed air.

010.684 SOLID WASTE MANAGEMENT PERMIT (SWMP) means an annual permit issued by the Solid Waste Management Authority for a solid waste management facility.

010.696 SOURCE SEPARATED RECYCLABLE MATERIAL means a recyclable material that has been separated from the waste stream, at the site of generation, with ten (10) percent or less, by weight or volume, of solid waste that will not be recycled.

010.708 SURETY means a person who has contracted to be responsible for another, especially one who assumes responsibilities or debts in the event of default.

010.764 WASTE TIRE means a tire that is not suitable for its intended purpose because of wear, damage or defect.

010.768 WASTE TIRE GENERATOR (WTG) means a person who possesses a tire at the time it becomes a waste tire, or at any time thereafter, until it is deposited with a facility for the management of waste tires, an approved disposal site, an approved solid waste management facility or given to a waste tire hauler.

010.772 WASTE TIRE HAULER (WTH) means a person who transports waste tires or materials derived from waste tires over the highways of this State. The term does not include a:

- A. Collector of solid waste who operates pursuant to a license issued by a local government;
 - B. Person who generates and transports his own waste tires;
 - C. Government agency;
- D. Person who transports used tires to be resold or retreadable casings to be retreaded;

- E. Person who transports tires across state boundaries, but does not load or unload waste tires within this State;
- F. Person who is directed by a solid waste management authority to transport waste tires for disposal; or
- G. Person who transports products made from recycled waste tires for sale or other distribution.

010.776 WASTE TIRE MANAGEMENT FACILITY (WTMF) means a site at which waste tires are deposited for processing, recycling or use as a fuel *and which has been issued a permit for that purpose pursuant to these regulations. A facility that receives waste tires only inadvertently, unintentionally, or that are incidental to the load being received, is not a facility for the management of waste tires.*

010.780 WASTE TIRE PROCESSING means preparing a waste tire for recycling, use as a fuel or disposal in a landfill by chipping, splitting or otherwise altering the tire.

SECTION 085 DISPOSAL OF WASTE TIRES

PERMIT TO OPERATE WASTE TIRE MANAGEMENT FACILITY

085.005 Permit required; exceptions.

- 1. Except as otherwise provided in subsection 2, the owner or operator of a waste tire management facility shall not accept waste tires for processing, recycling or for use as a fuel until he obtains a permit to operate a waste tire management facility from the Health Authority.
- 2. The following businesses are **not required** to comply with subsection 1:
- a) A business which retreads tires and stores less than 3,000 passenger tire equivalents on the premises.
- b) A retail dealer of tires, or any other business that removes tires from motor vehicles, which stores less than 1,500 passenger tire equivalents on the premises.
- c) A disposal site which is authorized by the solid waste management authority to store waste tires or deposit waste tires in a landfill.
- d) Any business that stores less than 500 passenger tire equivalents on the premises.

085.010 Application for permit; Contents.

Each applicant for a permit to operate a waste tire management facility must complete an application on a form prescribed by the Health Authority. The application must include:

- 1. The name of the owner and operator of the facility;
- 2. The address of the location of the facility;
- 3. A plan of operation which complies with the requirements set forth in section 085.100 through 085.150 inclusive of these regulations;
- 4. A plan of the area where the tires will be stored at the facility which includes:
 - a) The arrangement and size of the piles of tires in the storage area;

- b) The width of the fire lanes;
- c) The location of each building at the facility; and
- d) The methods used to control access to the facility.
- 5. An estimate of the number of passenger tire equivalents the facility will receive each year.
- 6. A description of the final use for the waste tires deposited or the available market for the material derived from the tires after processing;
- 7. Proof of compliance with any applicable ordinances or other requirements of the local fire authority;
- 8. Proof of compliance with any applicable ordinances or other requirements of the state or local governments for permits;
- 9. The procedures to be used at the facility, to include:
 - a) For the prevention of fire; and
 - b) For response to a fire if it occurs and that is approved by the local fire authority;
- 10. A copy of the plan to demonstrate financial assurance as outlined in NAC 444A.410 and 444A.420; and
- 11. Any other information required by the Health Authority.

085.020 Application for permit: Notification of applicant; submission of additional information.

The Health Authority shall, within 45 days after receiving an application for a permit to operate a waste tire management facility, notify the applicant whether or not his application is complete. The Health Authority shall base its determination on whether the application contains all documents and information required by Section 085.010 of these regulations. The Health Authority may require the applicant to submit any additional documents or information it deems necessary.

085.030 Application for permit: Evaluation by the Health Authority; notice of intent to issue or deny application; public notice.

- 1. The Health Authority shall complete an evaluation of an application for a permit to operate a waste tire management facility within 30 days after notification of the applicant that his application is complete.
- 2. Upon completion of the evaluation, the Health Authority shall:
 - a) Issue the applicant a notice of intent to issue or deny the permit; and
- b) Issue a public notice stating whether it intends to issue or deny the permit. The public notice must include a fact sheet which describes:
 - 1. The proposed facility;
 - 2. The proposed action;
 - 3. The availability of the documents which were evaluated; and
 - 4. The procedures for public review and comment.

085.040 Application for permit: Period for public review; duties of the Health Authority following the period for public review.

1. The Health Authority shall provide a period for the public review of an application for a permit to operate a facility for the management of waste tires. The

period of public review shall not be less than 30 days and begins the date the Health Authority issues public notice pursuant to subsection 2 of 085.030. During this period, the applicant or any other interested person may submit to the Health Authority written comments concerning the permit.

2. Within 15 days after the period for public review has ended, the Health Authority shall issue the permit or provide written notice to the applicant which sets for the reasons for denial of the permit.

085.050 Issuance: revocation or suspension of permit; request for modification of permit.

A permit to operate a waste tire management facility which is issued by the Health Authority:

- 1. Must be issued to a specific owner or operator;
- 2. Is not transferable;
- 3. Is valid for one year from the date of issuance;
- 4. May be renewed provided the conditions of the permit have been met and the permit fee has been paid prior to the expiration of the permit;
- 5. May be modified by the Health Authority if the statutes and regulations upon which the permit is based are amended or if a modification is otherwise necessary to protect the public health and the environment;
- 6. May be revoked or suspended upon written notice by the Health Authority if the permit holder does not comply with applicable statutes or regulations or the conditions upon which the Health Authority issued the permit; and
- 7. May be modified by the owner or operator if the modification is approved by the Health Authority. The owner or operator must submit a written request for a modification of the permit to the Health Authority. A proposed modification of the permit may be subject to public notice and 30 days of public review if the Health Authority deems it necessary.

085.060 Renewal of the permit; operation of the facility pending issuance of a new permit.

- 1. At least 45 days before a permit to operate a waste tire management facility expires, the Health Authority shall send to the permit holder:
 - a. A notice to inform the holder that he must renew his permit to continue operations; and
 - b. An invoice to pay for the permit renewal fee.
- 2. The permit holder who wishes to renew his permit must:
 - a. Submit the appropriate fees, required reports and/or laboratory analyses to the Health Authority at least 30 days prior to the expiration date of the permit;
 - b. Provide any information concerning operation of the facility that was not submitted with his initial permit application to the Health Authority; and

- c. Revise any information that has changed since the last permit renewal period or initial application submittal and submit it to the Health Authority.
- 3. Unless otherwise notified in writing, the owner or operator of a facility for the management of waste tires, may continue to operate the facility if the permit is not renewed by the Health Authority prior to the expiration date, provided the facility is in compliance with all conditions of the permit. The owner or operator may continue to operate until such time as the Health Authority renews the permit or denies the permit renewal.

OPERATION OF WASTE TIRE MANAGEMENT FACILITY

085.100 Design and construction; attendants; equipment; final use of waste tires deposited at facility.

- 1. The owner or operator of a waste tire management facility shall:
 - a. Design and construct the facility to ensure that:
 - i. Runoff of water from the surface of the property is directed away from the area used to store tires; and
 - ii. Waters of the State are protected from potential runoff resulting from extinguishing a fire at the facility.
 - b. Control vectors to protect public health and welfare. As used in this section, "vector" has the meaning ascribed to it in section 010.590 of these regulations.
- 2. If a waste tire management facility receives tires from a person other than the operator of the facility, an attendant must be present when the facility is open for business.
- 3. Before the operator of a waste tire management facility may begin operation of the facility, he shall ensure that each area where waste tires are cut, chipped, ground or otherwise altered has the equipment which is necessary to process waste tires in operating condition.
- 4. A waste tire management facility must have a final use for the waste tires deposited or an available market for the material produced from processing the waste tires to ensure that at least 75 percent of the waste tires deposited are used or removed from the facility as processed material for recycling or disposal within 12 months after receipt.

085.120 Storage of tires; compliance with regulations adopted by the State Fire Marshal required.

- 1. The owner or operator of a waste tire management facility shall not store more than 5,000 passenger tire equivalents on the premises of the facility unless he has written approval from the Health Authority.
- 2. An owner or operator of a facility for the management of waste tires, upon request from the Health Authority, shall produce evidence that the facility

- complies with provisions set forth by the State Fire Marshal as they relate to the facility.
- 3. Any area in which tires are stored outside the building located at the facility must be enclosed with a fence that limits access to the area.

085.130 Procedures to be used if fire occurs at facility.

The owner or operator of a waste tire management facility shall adopt and carry out procedures to be used if a fire occurs at the facility. The procedures must include:

- 1. The name and telephone number of each person who will be notified if a fire occurs;
- 2. A list of equipment to be used in response to a fire at the facility, the location of that equipment and the manner in which the equipment will be used if a fire occurs; and
- 3. A description of the procedure that must be followed if a fire occurs.

085.140 Maintenance of records; availability of records for inspection by the Health Authority.

- 1. The owner or operator of a waste tire management facility shall include in the records kept a the facility:
 - a. Copies of manifests required by Section 085.310 of these regulations; and
 - b. The following information if applicable:
 - i. The number of passenger tire equivalents or tons of material processed from tires received, stored and shipped at the facility.
 - ii. The names and registration numbers of haulers of waste tires who transport each shipment to and from the facility. If a hauler is not required to be registered, the record must include his address.
 - iii. The origin of each shipment of waste tires to the facility and the destination of each shipment from the facility.
 - c. A copy of the plan for financial assurance required by Section 085.210 085.220 of these regulations.
- 2. The owner or operator of the facility shall maintain the records required by subsection 1 for at least 3 years, and make them available for inspection by the Health Authority during regular business hours.

085.150 Annual report: Submission; contents.

The owner or operator of a waste tire management facility shall submit an annual report to the Health Authority not later than March 1 of each year. The owner or operator shall:

- 1. Submit the report on a form prescribed by the Health Authority;
- 2. Include a summary of information described in subsection 1 of Section 085.140 of these regulations in the report; and
- 3. Include any other information in the report which is required by the Health Authority.

CLOSURE OF WASTE TIRE MANAGEMENT FACILITY

085.200 Notice of closure; removal of waste tires and material derived from waste tires.

- 1. An owner or operator of a waste tire management facility who wishes to close that facility shall:
 - a. Prohibit public access to the facility; and
 - b. Post a notice at the facility stating that the facility is closed and the name and address of the nearest facility for the management of waste tires.
- 2. Within 12 months after the waste tire management facility is closed and, according to a schedule approved by the Health Authority, the owner or operator of the facility shall remove from the facility any waste tires and materials derived from waste tires.

085.210 Estimate of costs for closure; demonstration of financial assurance; modification of estimate of costs for closure.

- 1. The owner or operator of a waste tire management facility shall estimate the costs of processing and removing or disposing of all waste tires or material derived from waste tires at the facility. The owner or operator shall base his estimate on:
 - a. The maximum amount of waste tires and material which is derived from waste tires stored at the facility at any time; and
 - b. The possibility of having to hire another person to perform the work.
- 3. The estimate of costs must be approved by the Health Authority and revised annually to adjust for inflation.
- 4. The owner or operator of the facility shall demonstrate adequate financial assurance to close the facility based on the estimate of costs set forth in subsection 1.
- 5. The owner or operator of the facility shall increase the estimate of costs for closure and the amount of financial assurance provided if changes in the plan for closure or conditions at the facility increase the maximum costs of closure.
- 6. The owner or operator of the facility may reduce the estimate of costs for closure and the amount of financial assurance if the estimate of costs exceeds

the maximum costs of closure at any time during which the facility will remain in operation. An owner or operator who wishes to reduce an estimate shall notify the Health Authority that the justification for reducing the estimate of costs for closure and the amount of financial assurance has been noted in the records required to be kept by Section 085.140 of these regulations.

085.220 Mechanisms for demonstrating financial assurance; alternate plans for demonstrating financial assurance.

- 1. Except as otherwise provided in subsection 2, the owner or operator of a waste tire management facility shall demonstrate financial assurance in the manner prescribed below:
 - a. A trust fund as described in NAC 444.6853;
 - b. A surety bond guaranteeing payment or performance as described in NAC 444.68535;
 - c. A letter of credit as described in NAC 444.6854;
 - d. A policy insurance as described in NAC 444.6855;
 - e. A mechanism approved by the solid waste management authority pursuant to NAC 444.6856; or
 - f. Any combination of the options listed in subsections a. e., inclusive.
- 2. The Health Authority may approve an alternate plan for demonstrating financial assurance if the alternate plan complies with the requirements set forth in NAC 444.6859.

085.230 Inspection of facility after notification of closure; notification concerning demonstration of financial assurance.

The Health Authority shall inspect a waste tire management facility after it receives notification that closure of the facility has been completed. If the requirements of the closure plan have been met, the Health Authority shall notify the owner or operator of the facility and the person who is providing the financial assurance, in writing, that the person providing financial assurance is no longer required to demonstrate financial assurance.

WASTE TIRE HAULERS

085.300 Registration number: Requirement; application; display.

- 1. A waste tire hauler shall obtain a registration number from the Health Authority. The waste tire hauler shall display his registration number on the vehicle he uses to transport waste tires or material derived from waste tires.
- 2. Each waste tire hauler who applies for a registration number must complete an application on a form prescribed by the Health Authority. The application must include the license number and the name of the registered owner of the vehicle used to transport waste tires or material derived from waste tires.

3. A waste tire hauler who obtains a registration number pursuant to these regulations is required to comply with all other applicable local and state requirements.

085.310 Manifest to transport tires: Contents; copies to certain persons; penalty for noncompliance.

- 1. A waste tire hauler shall initiate a manifest to transport waste tires from the place where he takes possession of the waste tires from a waste tire generator to the place where he deposits the waste tires at a waste tire management facility or a disposal site approved by the Health Authority. The manifest must include:
 - g. Name of the generator of the waste tires;
 - h. Passenger tire equivalents or total tons of waste tires to be transported;
 - i. Name and registration number of the waste tire hauler;
 - j. Date of transport;
 - k. Destination of waste tires;
 - l. Number of tires sold for reuse, if any; and
 - m. Signatures of the waste tire generator, waste tire hauler and operator of the waste tire management facility or disposal site approved by the Health Authority.
- 2. The waste tire hauler shall:
 - A. Provide the owner or operator of the waste tire management facility or the disposal site approved by the Health Authority with a completed copy of the manifest; and
 - B. Return a completed copy of the manifest to the waste tire generator not later than 30 days after the date the waste tire hauler takes possession of the waste tires.
- 3. A waste tire hauler who fails to comply with the provisions of this section of the regulations may be subject to enforcement action, including revocation of his registration number.

085.320 Semiannual reports: Submission; contents.

- 1. A waste tire hauler shall submit semiannual reports with the Health Authority. The first report must be submitted for the reporting period beginning with January 1 of each year and ending with June 30 of each year. The second report must be for the period beginning July 1 of each year and ending on December 31 of each year. The waste tire hauler must submit each report within 30 days after the end of the reporting period on a form prescribed by the Health Authority. The report must include:
 - a. The registration number of the waste tire hauler;
 - b. The type and quantity of waste tires collected during the reporting period;
 - c. The destination of the waste tires collected; and

- d. The names of the generators of the waste tires or the premises from which the waste tires were collected.
- 2. A waste tire hauler who fails to comply with the provisions of this section may be subject to enforcement action, including revocation of his registration number.

WASTE TIRE GENERATORS

085.400 Transportation of waste tires.

- 1. Except as otherwise provided in subsection 2, a waste tire generator shall not enter into a contract to have waste tires collected with a person who is not a registered waste tire hauler.
- 2. A waste tire generator may haul waste tires he generates or contract with a collector of solid waste who operates pursuant to the requirements outlined in these regulations. A waste tire generator shall maintain receipts for the disposition of its waste tires for a minimum of three (3) years. The waste tire generator shall make the receipts available for inspection by the Health Authority during regular business hours and shall list the number, weight or volume of the waste tires disposed of in this manner.

DISPOSAL OF WASTE TIRES BY LANDFILLING

085.500 Restrictions on the disposal of waste tires in landfills within Washoe County.

- 1. No person shall dispose of (a) waste tire(s) in a municipal solid waste landfill within the Washoe County Health District if a waste tire management facility has been permitted by the Health Authority for operation within the Washoe County Health District. In this context the facility must be capable of processing the waste tire into a usable product or fuel.
- 2. The prohibition outlined in 085.500 (1) to dispose of a waste tire in a municipal solid waste landfill does not apply to the disposal of a waste tire if the unavailability of the waste tire management facility makes disposal at such a facility impracticable. The provisions of this subsection do not exempt a person from any other regulation adopted pursuant to this section.
- 3. A person who inadvertently or unintentionally disposes of a waste tire in a municipal solid waste landfill is exempt from any penalty imposed pursuant to these regulations.
- 4. If a waste tire management facility does not exist as outlined in Section 085.500 (1.), waste tires that are disposed in a municipal solid waste landfill must be managed in the following manner:
 - a. Waste tires must be cut into four or more parts across the bead;
 - b. Waste tires must be split circumferentially through the tread surface to produce two halves, each of which contains a bead, sidewall, and part of the tread:

- c. Waste tires must be mechanically compressed and secured into a bale;
- d. Waste tires must have the sidewalls manually cut out to produce three (3) or more parts; or
- e. Waste tires must be processed in any other way approved by the Health Authority.
- 5. These regulations do not prohibit the lawful disposal of a waste tire outside of the Washoe County Health District.

085.510 Exemptions.

- 1. A person may request an exemption or waiver from any of these regulations by submitting an application for a variance to the Health Authority. The application must be submitted on forms provided by the Health Authority and accompanied by fee(s) approved by the Washoe County District Board of Health.
- 2. The Health Authority is not obligated to approve an application for a variance. The variance, however, must be processed in a timely manner by the Health Authority.
- 3. Approval of a variance request may include additional conditions or requirements set forth by the Health Authority to ensure that the public and environmental health and safety are protected.
- 4. An exemption or waiver is not transferable from person to person, place to place or business to business.

085.600 Penalties

- 1. A person shall not operate a waste tire management facility unless the operator:
 - a. Holds a permit to operate the waste tire management facility issued by the Health Authority; and
 - b. Complies with the terms and conditions of the permit.
- 2. A person who violates Section 085.600 (1.) is guilty of a misdemeanor.
- 3. Each day or part of a day during which the violation is continued or repeated constitutes a separate offense.
- 4. A person convicted of violating Section 085.600 (1.) is, in addition to any criminal penalty imposed, liable for a civil penalty upon each such conviction in accordance with NRS 444.507 (4.); a court before whom a defendant is convicted of a violation of Section 085.600 (1.) shall, for each violation, order the defendant to pay a civil penalty of at least \$500 but not more than \$5000.
- 5. A person who willfully disposes of a waste tire generated in Washoe County to a municipal solid waste landfill anywhere in the State of Nevada after a waste tire facility has been permitted to operate within the Washoe County Health District is guilty of a misdemeanor and shall be punished by a fine of not less than \$100 per violation. Each waste tire disposed of in violation of the provisions of these

regulations constitutes a separate offense. The provisions of this subsection do not apply:

- a. To a person who inadvertently or unintentionally disposes of a waste tire in a municipal solid waste landfill; or
- **b.** If the unavailability of a waste tire management facility makes disposal of a waste tire at a site other than a municipal solid waste landfill impracticable.

RENO NEWSPAPERS INC Publishers of

Reno Gazette-Journal

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STATE OF NEVADA COUNTY OF WASHOE

Being first duly sworn, deposes and says: That as the legal clerk of the Reno Gazette-Journal, a daily newspaper of general circulation published in Reno, Washoe County, State of Nevada, that the notice referenced below has published in each regular and entire issue of said newspaper between the dates: 01/10/2011 - 01/21/2011, for exact publication dates please see last line of Proof of Publication below.

Subscribed and sworn to before me

Signed:

JAN 2 1 2011

STACEY GOMES

Notary Public - State of Nevada

Associational Resolded in Washee County

Appointment Recorded in Washoe County No. 09-10505-2 - Expires July 22, 2013

Proof of Publication

NOTICE OF PUBLIC HEARING WASHOE COUNTY DISTRICT BOARD OF HEALTH The Washoe County District Board of Health does hereby declare 1:00 p.m., February 24, 2011, at the Washoe County Health District Conference Room B (1001 E. 9th Street, Reno, Nevada) as the time, date and place to consider amendments to the Regulations of the Washoe County District Board of Health Governing Solid Waste Management. Interested persons who may be affected or wish to comment on any action being considered on the above date should appear at the public hearing to submit oral testimony or may address comments, data, views or arguments in written form to the Washoe County District Board of Health, P.O. Box 11130, Reno, Nevada 89520. Copies of the proposed regulations are available at the Washoe County Health District Office. Environmental Health Services Division, 1001 E. 9th Street, Reno, Nevada for inspection by any person. If you would like additional information, please contact Jeanne Rucker, 328-2423. Matt Smith, Chairman Washoe County District Board of Health No. 737730 Jan 10, 15, 21, 2011

Ad Number: 1000737730 Page 1 of 1

DBOH Stem No. 14

Proposal for independent program performance

evaluation

1. Proposed target

Evaluate each program for performance and necessity at the Washoe County Health Dept.

2. Expectations and direction from Board of health.

Evaluate each program from an outside independent firm for.

- 1- Program mandate, what amount of service is mandated and how much above or below the mandate are we doing?
- 2- Evaluate performance of each program for staff needs and standards. Point out current staff and statistics, recommend changes.
- 3- Investigate programs that are done by other entities in order to eliminate duplicate services
- 4- Research out sourcing programs when fiscally prudent.
- 5- Recommend changes to program methodology. How can we do things better? Has the programs changed with technology and procedure changes?
- 6- Evaluate administration productivity and current procedures. (information gathering and record keeping) Recommend staffing needs and electronic equipment upgrades to become more efficient and reduce staffing.
- 7- Evaluate core functions provided and recommend changes needed. (some mandates and core functions should be changed due to evolving healthcare needs)
- 8- Report to the Board of Health where the Washoe County Health Department rates to national standards and recommend the necessary changes to achieve those standards.



Washoe County Health District



February 17, 2011

TO:

District Board of Health Members

FROM:

Mary-Ann Brown, RN, MSN

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 current report of Bill Health District Staff have reviewed, are tracking or monitoring. Staff continues to review these various Bills for the 2011 Legislative Session.

Respectfully,

Interim District Health Officer

19288 AB59	#40624 AB 139	BDR or
Attorney General	Sponsor Goicoechea, Ellison, Hansen	Primary
Referred to Committee on Gov't Affairs	Referred to Committee on Health & Human Services	2
Makes various changes to the Open Meeting Law.	Revises provisions relating to emergency medical services.	0
Background: If the Attorney General finds that a public body has taken an action which violates the Open Meeting Law, this bill requires the public body to include an item on the next agenda posted for a meeting of the public body acknowledging the finding of the Attorney General regarding such a violation. Existing law makes each member of a public body who attends a meeting where action is taken in violation of the Open Meeting Law with knowledge of the fact that the meeting is in violation guilty of a misdemeanor. This bill further makes each such member who attends such a meeting subject to a civil penalty in an amount not to exceed \$500 regardless of knowledge of the violation.	Background: This bill authorizes the holder of a permit for the operation of an ambulance or a vehicle of a fire-fighting agency to use a person other than a licensed attendant or firefighter to provide certain emergency care and assistance in a county whose population is less than 15,000 if the county health officer or any other person designated by the board of county commissioners of the county has determined that an insufficient number of attendants and firefighters are available and the health or safety of the public is in danger as a result of that insufficiency. Analysis: Pertains only to counties whose population is less than 15,000. Does not affect Washoe County Health District. Fiscal Impact: None Amendment:	
 Priority: Low Action: Monitor Testify: No Position: No Ordinance: No Policy: No Fiscal Impact: None (S. Akurosawa) 	Staff Assignment Priority: Low Action: None Testify: No Position: None Ordinance: No Policy: No Fiscal Impact: None (S. Akurosawa)	Recommendation &

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

40447 AB51
Health Division-Health and Human Services
Referred to Committee on Health & Human Services
Revises provisions to provide consistency with national educational standards for emergency medical service providers.
Analysis: Various meetings conducted by the Health District that fall under the Open Meeting Law. Potential impacts if any violations to the Open Meeting Law occur. Fiscal Impact: None Amendment: Background: Existing law provides for the training and certification of three types of emergency medical technicians based upon the level of care provided. This bill revise the terms used in the National Emergency with the National Highway Traffic Safety Administration in 2009. That publication establishes the minimum education competencies required for persons who provide emergency medical services and will replace the National Standard Curriculum of the United States Department of Transportation. The term "emergency medical technician. However, this bill replaces the term "intermediate emergency medical technician. However, this bill replaces the term "intermediate emergency medical technician. However, this bill replaces the term "intermediate emergency medical technician. However, this bill replaces the term "intermediate emergency medical technician and replaces the term "advanced emergency medical technician technician and paramedic." In addition, the training for certification as an emergency medical technician for certification as an emergency medical technician the training for certification as an emergency medical technician the training for certification as an emergency medical technician the training for certification as an emergency medical technician the training for certification as an emergency medical technician the training for certification as an emergency medical technician the training for certification as an emergency medical technician the training for certification as an emergency medical technician and paramedic to follow the curriculum or educational standards prepared by the United States Department of Transportation which are now set forth in the National
 Priority: Low Action: Monitor Testify: No Position: None Ordinance: No Policy: No Fiscal Impact: None (S. Akurosawa)

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

(n	ري. ال	4.0
527	530	40642 SB 138
Assemblyman Bobzien Joint Requester: Assemblywoman Kirkpatrick	Assemblyman Segerblom	Senator Lee
	·	Referred to Committee on Health & Human Services
Revises provisions governing the use of websites by local governments to comply with the Open Meeting Law.	Provides for consolidation of fire departments by county.	Makes various changes concerning emergency medical services.
Background: Analysis: Fiscal Impact: Amendment:	Background: Analysis: Fiscal Impact: Amendment:	Analysis: Brings NRS into alignment with NHTSA's new National EMS Education Standards and provider levels. Will not affect the Washoe County Health District directly but may affect REMSA. Fiscal Impact: None Amendment: Background: This bill authorizes the holder of a permit for the operation of an ambulance or a vehicle of a fire-fighting agency to use a person other than a licensed attendant or firefighter to provide certain emergency care and assistance in a county whose population is less than 15,000. Analysis: Pertains only to counties whose population is less than 15,000. Does not affect Washoe County Health District. 'Fiscal Impact: None Amendment:
 Priority: Action: Testify: Position: Ordinance: Policy: Fiscal Impact: (S. Akurosawa) 	 Priority: Action: Testify: Position: Ordinance: Policy: Fiscal Impact: (S. Akurosawa) 	 Priority: Low Action: None Testify: No Position: None Ordinance: No Policy: No Fiscal Impact: None (S. Akurosawa)

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

Senator Parks		Authorizes reorganization of	Background:	 Priority:
		public health function of district	Analysis:	Action:
		Counties	Amendment:	• Position:
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Ordinance:
				Policy:
				 Fiscal Impact:
				(S. Akurosawa)
Assemblyman Aizley		Authorizes local governments to	Background:	Priority:
		publish material electronically in	Analysis:	Action:
		lieu of the newspaper.	Fiscal Impact:	Testify:
			Amendment:	 Position:
				 Ordinance:
				Policy:
				Fiscal Impact:
				(S. Akurosawa)
Senator Parks		Revises provisions concerning	Background:	Priority:
		annexation.	Analysis:	Action:
			Fiscal Impact:	Testify:
			Amendment:	Position:
				 Ordinance:
				Policy:
				 Fiscal Impact:
				(S. Akurosawa)
Assemblyman Carpenter		Revises provisions governing	Background:	 Priority:
,		the open meeting law.	Analysis:	 Action:
			Fiscal Impact:	Testify:
			Amendment:	Position:
				Ordinance:
				Policy:
				 Fiscal Impact:
				(S. Akurosawa)
Assemblywoman	Introduced in the	Introduced in the Assembly.	1) The bill allows for the elimination of the initial	Priority: Low
Kirkpatrick	Assembly.	Referred to the Committee on	emissions control testing requirement for	Action: Tracking
	Referred to the	Transportation	vehicles issued special license plates including	Testify: Yes
	Committee on		antique vehicles, street rods, classic rods and	 Position: Neutral with
	Transportation	Read first time to Committee	classic vehicles. Rather than passing an initial	Concerns
		02/07/11	smog check" when the vehicle is registered for	 Ordinance: No
	Assemblyman Aizley Senator Parks Senator Parks Assemblyman Carpenter Assemblyman Carpenter Assemblyman Carpenter	Aizley	Aizley Aizley Carpenter Carpenter Carpenter Committee on Transportation	Alziley Alz

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SB-12	
Natural Resources	
Introduced in Senate Referred to Committee on Natural	Read first time to Committee 02/07/11
Repeals certain reporting requirements for the emission of greenhouse gases	
This bill merely removes the state law requiring reporting of greenhouse gas emissions from the largest sources (power plants) because the EPA now has federal greenhouse gas reporting requirements for these facilities and the state law is now unnecessary.	the special plates, the vehicle owner is merely required to pay a fee equivalent to the \$6 emissions control compliance certificate fee, and certify that the vehicle is driven less than 2,500 miles per year to be exempted from the emissions control testing requirements. 2) Washoe County Health District is delegated implementation of the Federal Clean Air Act by U.S. EPA. This is conditioned upon adherence to State Implementation Plans and associated regulations which were submitted to U.S. EPA and approved by them. The emissions testing requirements are included in the State Implementation Plans (SIP) for PM10, Ozone and Carbon Monoxide (CO) and are accounted for in the emissions budgeting as the basis for the SIP's approach to meet federal National Ambient Air Quality Standards (NAAQS) for CO. If this regulation is enacted, Washoe County District Health would need to determine that the change in emissions that would result from the change to this regulation is not significant. If it is a significant change, a SIP amendment will need to be prepared by Washoe County Health District AQMD and submitted to EPA to seek their approval. In addition, the CO emissions budget which is the basis for EPA's determination of whether to approve the CO SIP will need to be reviewed for any significant impacts from this change to the statute.
• • • •	• •
Priority: Low Action: Monitoring Testify: No Position: Recommend the County support Ordinance: No	Policy: If it is determined that the legislation results in significant increases in vehicle emissions this would require SIP amendments to be prepared for EPA, revision of the CO emissions budget. Fiscal Impact: If emissions impacts are determined to be significant, cost of preparing SIP amendments, (Kevin Dick)

BDR 753	BDR 40- 310	SB-81	
Assemblyman Woodbury	Assemblyman Gustavson	Government Affairs	
Filed 12/14/2010	Filed 8/31/10	Introduced in Senate Referred to Committee on Government Affairs Read first time, to committee 02/07/11	Resources Read first time to Committee 02/07/11
Revises provisions governing smog checks of motor vehicles.	Reduces the frequency of smog checks for motor vehicles that have not previously failed a test.	Makes various changes relating to state financial administration. Requires professional and occupational licensing agencies to deny the issuance or renewal of licenses possessed by certain persons who owe debts to the State	
No further information	May result in increased emissions from these vehicles. May decrease the I&M fees received by AQM. May require SIP amendments to U.S. EPA, revisions of emissions budget and may require additional CO offsets for emissions budget.	This bill could affect the Neutral Inspectors Registration for the Air Quality Management Division's Woodstove Program and the Environmental Health Services Division's Certified Food Managers Program. There are approximately 35 Registered Neutral Inspectors, and approximately 2900 Certified Food Managers. If passed, the Divisions would be required to review the State's database of persons that owed a debt to a state agency. The Health District would not be allowed to issue the Neutral Inspector Registration or the Food Manager Certification until such time as the persons name was removed from the State list. The amount of additional work for the Divisions might be minimal or more substantial depending on the quality and timeliness of the State's list development efforts.	
 Priority: High Action: Tracking (Kevin Dick) 	 Priority: High Action: Tracking Testify: Yes Position: Recommend the County Oppose (Kevin Dick) 	 Priority: Low Action: Monitoring Testify: No Position: Neutral Ordinance: No Policy: No Fiscal Impact: Anticipated to be small, additional review of the State list by staff prior to granting certification/registration. (Kevin Dick, Bob Sack) 	Policy: NoFiscal Impact: No(Kevin Dick)

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

SB 27	Senator Wiener	Senate	Codifies existing training requirements for childcare workers	No impact to environmental health. Requirements are already in regulation	Priority: Low Action: None Testify: No Position: Neutral Ordinance: No Policy: No Fiscal Impact: No
SB 81	Government Affairs	Senate	Requires agencies who issue licenses or certifications to check a State database to check if an individual owes the State money. If they owe money then the license or certification can not be issued,	Will require us to review the database to determine if individual owes money. If the database is easy to use and access it will not add much effort to the process. No fiscal impact	e I not impact
SB 69	Government affairs	Senate	Revises provisions governing the issuance of city business licenses	This bill would disconnect the requirement that a health permit must be issued before a business license is issued. This would apply in the cities only. We believe the present process works well and does not need to change. We have discussions on a periodic basis with the cities and county on these processes. Changes are made on an as needed basis to help streamline the process.	t that a siness cities rks well rks well lities s are amline
AB 35	Committee On Natural Resources, Agriculture, And Mining	Assembly	Revises provisions governing custom application of pesticides	This bill makes various changes regarding businesses and farms which apply pesticides. Does not affect our operations	des.
AB 73	Government Affairs	Assembly	Revises provisions governing beneficial use of water	Proposed changes will affect the State Engineers Office and the local Public Water Systems. These will have no effect on the Health District	iter

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AB128	SB 121	SB120	AB 129	AB123	SB 119	AB 115	AB 114
Assemblyman (Dr.) Aizley	Natural Resources	Natural Resources	Health and Human Services	Health and Human Services	Natural Resources	Government Affairs	Government Affairs
Referred to Committee on Judiciary	Senate	Senate	Assembly	Assembly	Senate	Assembly	Assembly
Prohibits smoking on buildings and grounds of the facilities of the Nevada System of Higher Education	Revises definition of radioactive waste	Revises scope of review for the legislative Committee On High Level Nuclear Waste to include hazardous waste disposal sites	Requires certain training of employees in health care facilities	Requires State Health Division to inspect health care facilities 4X /year	Revises Agency for Nuclear Projects	Revises provisions governing beneficial use of water	Revises provisions governing water rights for irrigation purposes
Analysis. This bill seeks to include the Nevada System of Higher Education (NSHE) in the list of locations where smoking is universally prohibited, including in outdoor spaces of all properties leased, owned, or occupied for the System's purposes. Currently, smoking is prohibited only indoors per the Nevada Clean Indoor Air Act. In addition, UNR has banned smoking within 25' of all doors and entrances and has relegated smoking at outdoor sporting events to designated smoking areas. This bill furthers the Health District's goals of creating additional smokefree public spaces, particularly those frequented by youth and young	No effect on us	No effect but NDEP is looking into the circumstances to see if there are hidden effects	No effect on us	No effect on us	No effect on us	No effect on us	No effect on us
 Priority: High Action: Attention Testify: Yes Position: Support Ordinance: No Policy: No Fiscal Impact: No (J. Hadayia, E. Dixon) 	Priority: Low Action: No (Bob Sack)	Priority: Low Action: No (Bob Sack)	Priority: Low Action: No (Bob Sack)	Priority: Low Action: No (Bob Sack)	Priority: Low Action: No (Bob Sack)	Priority: Low Action: No (Bob Sack)	Priority: Low Action: No (Bob Sack)

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Ī	SB27		AB	
	327		AB137	
	Senator Wiener		Legislative (Health Care	
	Wiener		Legislative Committee on Health Care	
			littee on	
	Amend, pass as amende 11)	Ways a	Referred to Concurrent Committees on Education and	
	Amend, and do pass as amended (2-15-11)	Ways and Means	d to rent tees on on and	
	Require child ca child ca training the lifelt safety c		Revises program schools	
	Requires employees of certain child care facilities to complete training each year relating to the lifelong wellness, health and safety of children. (BDR 38-24)		Revises provisions governing programs of nutrition in public schools. (BDR 34-191)	
	ees of ce ss to comp ir relating ess, healt (BDR 38		ns govern tion in pul I-191)	
	rtain solete to th and 3-24)		ing blic	
	Analysis. The amended version of SB27 requirements of continuing education "related to childhood obesity, nutrition and physical activannually as part of current continuing education requirements. The intent of this bill is to ensure that licensed childcare providers have training childhood obesity prevention strategies in the early childcare setting. Preliminary data from Washoe County show that 11% of preschoole are overweight and 16% are obese. Obesity prevention interventions targeting the early childcare setting is considered a national best practice. DCFS, NSHD, NSMA, SNHD, and A are also in support of the bill.	these schools would be required to prepare a report on their school breakfast programs. According to the WCSD Director of Nutrition Services, 62% of Washoe County schools currently offer breakfast in their food program (including 100% of at-risk schools), and 13 schools are implementing breakfast in the classroom. The WCSD has placed a \$104,000/year Fiscal Note on this bill. Staff are currently researching whether school breakfast programs and breakfast in the classroom programs are considered a childhor obesity prevention best practice.	Analysis. This bill would mandate breakfast in the classroom for all students in those schools that have been designated as low-performing for 3 consecutive years. In addition, the principals of	adults in o
	Analysis. The amended version of SB27 requires licensed childcare providers to complete at least 2 hours of continuing education "related to childhood obesity, nutrition and physical activity" annually as part of current continuing education requirements. The intent of this bill is to ensure that licensed childcare providers have training in childhood obesity prevention strategies in the early childcare setting. Preliminary data from Washoe County show that 11% of preschoolers are overweight and 16% are obese. Obesity prevention interventions targeting the early childcare setting is considered a national best practice. DCFS, NSHD, NSMA, SNHD, and AHA are also in support of the bill.	these schools would be required to prepare port on their school breakfast programs According to the WCSD Director of Nutriti Services, 62% of Washoe County schools currently offer breakfast in their food prog (including 100% of at-risk schools), and 1 schools are implementing breakfast in the classroom. The WCSD has placed a \$104,000/year Fiscal Note on this bill. Staff are currently researching whether so breakfast programs and breakfast in the classroom programs are considered a chiobesity prevention best practice.	<u>Analysis</u> . This bill would mandate breakfast in the classroom for all students in those schools that have been designated as low-performing for 3 consecutive years. In addition, the principals of	adults in order to protect them in hazards of secondhand smoke
	The amended version of SB27 requires hildcare providers to complete at least continuing education "related to obesity, nutrition and physical activity" is part of current continuing education ed childcare providers have training in obesity prevention strategies in the care setting. Preliminary data from county show that 11% of preschoolers eight and 16% are obese. Obesity interventions targeting the early setting is considered a national best OCFS, NSHD, NSMA, SNHD, and AHA support of the bill.	heir school breakfast programs. to the WCSD Director of Nutrition 62% of Washoe County schools offer breakfast in their food program 100% of at-risk schools), and 13 in implementing breakfast in the The WCSD has placed a year Fiscal Note on this bill. surrently researching whether school programs and breakfast in the programs are considered a childhood evention best practice.	This bill would mandate breakfast in som for all students in those schools seen designated as low-performing tive years. In addition, the principals	rder to protect them from the health secondhand smoke.
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	SB27 req plete at I lated to sical actual or sical actual	prepare grams. Nutrition chools d program and 13 t in the a sill. ther school the school and the school and the the school the school and t	reakfast i se schoo serformin e principa	the heal
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	Priority: Action: J Testify: Position Amend Amend Ordinan Policy: † Fiscal Ir (J. Hadayia)	 Ordinan Policy: I Fiscal Ir (J. Hadayia) 	Pri-	
	Priority: High Action: Attention Action: Attention Testify: Yes (2-15 Position: Support Amended Ordinance: No Policy: No Fiscal Impact: No ladayia)	Ordinance: No Policy: No Fiscal Impact: No ladayia)	Priority: Moderate Action: Track Testify: No Position: Neutral	
	Priority: High Action: Attention Testify: Yes (2-15-11) Position: Support, As Amended Ordinance: No Policy: No Fiscal Impact: No ladayia)	act: No	oderate ick eutral	
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3436	SB79		SB53
Assemblyman Hambrick	Committee on Revenue	•	Committee on Health and Human Services
BDR	Introduced in Senate		Referred to Health and Human Services Committee
Requires schools to provide access to their athletic fields to nonprofit youth sport programs	Makes various changes relating to the Tobacco Master Settlement Agreement. (BDR 32-291)		Excludes locations where programs are operated by a local government to supervise children from certain licensing requirements. (BDR 38-242)
Background. 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.	Analysis. This bill clarifies a process and structure for the collection of non-Master tobacco Settlement Agreement (MSA) tobacco manufacturers' and wholesalers' contribution to the Nevada settlement fund. It also allows the Attorney General's office to apply for FDA enforcement grants.	Staff have conducted additional research on this impact of this bill since the prior report, and, contrarily to prior analysis, there are currently no government-run after-school programs (ASP) licensed in Washoe County to which these changes would apply. Currently, Washoe County does not license any ASPs; should this bill pass, licensing of government-run ASPs would be prohibited by statute. There is some concern in the community that, should this bill fail, state regulatory bodies will require local entities to begin licensing these types of programs. This could have a policy and fiscal impact on the DHD. However, this outcome is uncertain at this time and is not directly related to the legislation.	Analysis. This bill seeks to amend the definition of a "child care facility" in NRS 432A.024 to exclude non-full-day childcare facilities (a.k.a., after-school programs, camps, etc.) that are also "operated by a local government."
 Priority: Low Action: Monitor Testify: No Position: Support Ordinance: No Policy: No Fiscal Impact: No (J. Hadayia) 	 Priority: Low Action: Monitor Testify: No Position: Neutral Ordinance: No Policy: No Fiscal Impact: No (J. Hadayia, E. Dixon) 	 Policy: No Fiscal Impact: No (J. Hadayia, R. Gonzales) 	 Priority: Moderate Action: Track Testify: No Position: Neutral Ordinance: No

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Analysis.	the BDR value instead, a Instead, a Instead was the partner was adopted in ad	Analysis.	Analysis. though is related to	In 2009, AB145 passed Assembly Education and was referred to Ways and Means (with no further action taken); the DHD was in support the bill, and staff provided testimony.
Content i	will be pul Technic: Yer service Yer service Ill be issually Ill be issually Ill be contact Ill be complete Current Courrent Cour	The cont	Content is likely to shildhood	AB145 pa eferred to tion taker nd staff pr
s unknow	lled. al Bulletir s "standa s "standa led by the he NAC4 he NAC4 per 2010, ber 2010, ber at the ling s that incomply and and hydia and	ent of this	s unknow support Co d obesity	ssed Ass Ways and the DH ovided te
n at this	I designal of carred of ca	bill is no	n at this t CHS prior preventic	embly Ed nd Means ID was in stimony.
time.	ting EPT a proper for eealth sions ww ww es es for the	longer i is like	time, rities nn.	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.
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Pendir		Policy: Fiscal I Hadayia	Priority Action: Testify:	
٥		nce: No No mpact: N	: Low Monitor Yes	
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	Senator Wiener BDR Authorizes the Health Division to facilitate and encourage the development of comprehensive health centers in public schools. Content is unknown at this time. Analysis. Content is unknown at this time. Box of a content is unknown at this time. Analysis. Content is unknown at this time. Box of a content is unknown at this time. Box of a content is unknown at this time. Box of a content is unknown at this time. Box of a content is unknown at this time. Box of a content is unknown at this time. Box of a content is unknown at this time. Box of a content is unknown at this time. Box of a content is unknown at this time.	Sexually transmitted diseases the BDR will be pulled. Instead, a Technical Bulletin designating EPT as the partner services "standard of care" for Nevada will be issued by the State Health Division in light of the NAC441 A revisions adopted in December 2010, which now reference current CDC partner services treatment guidelines that include EPT for the treatment of Chlamydia and gonorrhea. Senator Wiener BDR Authorizes the Health Division to facilitate and encourage the development of comprehensive health centers in public schools. BDR Analysis. Content is unknown at this time. • Replacement of Division to facilitate and encourage the development of comprehensive health centers in public schools.	Senator Parks BDR Revises provisions governing the treatment and control of sexually transmitted diseases Instead, a Technical Bulletin designating EPT as the partner services "standard of care" for Nevada will be issued by the State Health Division in light of the NAC441A revisions adopted in December 2010, which now reference current CDC partner services treatment of Chlamydia and gonorrhea. Senator Wiener BDR Authorizes the Health Division to facilitate and encourage the development of comprehensive health care in public schools. Book and the partner content of this bill is no longer (J.H. Particular to the partner services standard of care" for the treatment of Chlamydia and gonorrhea. Analysis. The content of this bill is no longer (J.H. Particular to the partner services the partner services treatment of Chlamydia and gonorrhea. Analysis. The content of this bill is no longer (J.H. Particular to the partner services the partner singular to the partner services treatment of Chlamydia and gonorrhea. Analysis. The content of this bill is no longer (J.H. Particular to the partner services the partner services treatment of Chlamydia and gonorrhea. Analysis. The content of this bill is no longer to the least the partner services treatment of Chlamydia and gonorrhea. Analysis. The content of this bill is no longer to the least the partner services the partner s	Senator Wiener BDR SCR: Urges support for providing programs of fitness and wellness in schools Revises provisions governing the treatment and control of sexually transmitted diseases BDR Revises provisions governing the treatment and control of sexually transmitted diseases Revises provisions governing the partner Therapy (EPT), and it is likely to support CCHS priorities related to childhood obesity prevention. Analysis. The content of this bill is no longer Expedited Partner Therapy (EPT), and it is likely the BDR will be pulled. Instead, a Technical Bulletin designating EPT as the partner services "standard of care" for Nevada will be issued by the State Health Division in light of the NAC441A revisions adopted in December 2010, which now reference current CDC partner services treatment guidelines that include EPT for the treatment of Chlamydia and gonorrhea. Senator Wiener BDR Authorizes the Health Division to facilitate and encourage the development of comprehensive health centers in public schools. Analysis. Content is unknown at this time, though is likely to support CCHS priorities enalted to childhood obesity prevention. (J.) + (J

32605	521	34188
Assembly Committee on Taxation	Senator Copening	Legislative Committee on Health Care
Referred to Committee on Taxation	BDR	BDR
Revises the rate of taxation on moist snuff.	SCR: Encourages nutritional health of children	Establishes a statewide school wellness policy
Background. This BDR is boilerplate legislation introduced in both 2007 and 2009 that proposed to revise the rate of taxation on smokeless tobacco products from a percent of wholesale price to a weight-based tax (specifically 58 cents per ounce based upon the net weight of the product, per BDR language.) Research shows that applying a weight-based tax on smokeless tobacco results in lighterweight products from the manufacturer. This then leads to a lower cost to the consumer and, therefore, increased sales, which equates to increased consumption of tobacco by Nevadans.	Analysis. Content is unknown at this time, though is likely to support CCHS priorities related to childhood obesity prevention.	Background. BDR is a placeholder for LCHC recommendations (1-4) related to childhood obesity. Staff remain in communication with the State Health Officer and Bill Sponsor on next steps related to the bill, including proposing draft bill language to: (1) mandate school wellness policies at the District level; and (2) establish a minimum definition of a school wellness policy that includes both nutrition and physical activity standards. Current school wellness policies are lacking in comprehensive physical activity guidelines for student wellness. The NDE is in support of the proposed draft, and the WCSD has not voiced opposition.
 Priority: High Action: Attention Testify: Yes Position: Oppose Ordinance: No Policy: No Fiscal Impact: No (J. Hadayia) 	 Priority: Low Action: Monitor Testify: No Position: Support Ordinance: No Policy: No Fiscal Impact: No J. Hadayia) 	 Priority: High Action: Attention Testify: Yes Position: Support Ordinance: No Policy: No Fiscal Impact: No (J. Hadayia)

				The DHD was in opposition to this bill in both prior sessions and provided testimony.	
619	Senator Breeden (Senator Parks, Assemblyman Segerblom)	BDR	SCR: Encourages health care providers to offer routine screening for Human	Background. 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	Priority: HighAction: AttentionTestify: Yes
			Immunodeficiency Virus (HIV) in all health care settings.	Committee and point-person for the Task Force's legislative activities.	 Position: Support Ordinance: No Policy: No
				Analysis. The purpose of this resolution is to encourage health care providers to implement federal recommendations for universal HIV testing.	 Fiscal Impact: No (J. Hadayia)
666	Senator Denis	BDR	Requires the elimination of trans fats from meals provided in public schools.	Analysis. Content is unknown at this time, though is likely to support CCHS priorities related to childhood obesity prevention.	 Priority: Moderate Action: Track Testify: Uncertain
					 Policy: No Policy: No Fiscal Impact: No (J. Hadayia)
40795	Senator Parks	BDR	Authorizes programs which provide access to clean syringes.	Background. 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 and point-person for the Task Force's	 Priority: High Action: Attention Testify: Yes Position: Support
				legislative activities.	Ordinance: No Policy: No Figoral transport
				access to clean syringes for the purpose of the prevention of HIV, hepatitis C, and other blood	• Fiscal impact. No (J. Hadayia)
				borne diseases associated with sharing injection drug using equipment. The current mechanism	
				proposed by legal staff for this legislation is the "de-regulation" of needles and syringes by	
				removing them from the Nevada drug paraphernalia statute. This is the recommended	
				approach to syringe access and is currently in	
				the use of federal funds for syringe access was	

				
		881 869		
		Assemblywoman Pierce Senate Committee on Revenue		
		BDR		
	Makes various changes concerning the taxation of tobacco products.	Revises the taxes on intoxicating liquors and tobacco products.		
Analysis. The coalition recommendation to the bill sponsors is: (1) a \$1.20 increase to the current cigarette excise tax (for a total tax of \$2.00); (2) a commensurate increase to the percent of wholesale price on Other Tobacco products (OTP); and (3) a partial earmark from new revenue to tobacco prevention, cessation, and research programs in Nevada. The coalition also recommends clarification of the OTP definitions to be inclusive of new smokeless tobacco products.	Session. Research shows that increases in the price of tobacco products lead to the most predictable improvements in tobacco rates. The DHD was in support of this bill in 2009 and provided testimony, and is a formal member of the 2011 coalition.	Health Investment Partnership) has been formed to advocate for an increase to the Nevada tobacco excise tax as was sought in the 2009	The national Harm Reduction Coalition has been providing subject matter expertise and technical assistance on this bill. A community coalition (called the Public Health Alliance for Syringe Access) has also been formed to garner support.	also lifted in 2010. Affirmative legislation would make it possible for community-based organizations to begin clean syringe distribution in their communities using existing funding.
	 Ordinance: No Policy: No Fiscal Impact: Uncertain (J. Hadayia) 	 Priority: Fight Action: Attention Testify: Yes Position: Support 		

AB98	TBD
	Assemblywoman Pierce
Read first time. To committee on Government Affairs	TBD
Enacts the Uniform Emergency Volunteer Health Practitioners Act. Allows out-of-state healthcare providers to volunteer their services in Nevada under certain conditions and circumstances	Requires provision relating to warning about the health hazard of smoking for pregnant women. Nevada Clean Indoor Air Act (NCIAA)
This bill relates to how volunteer healthcare providers from other states may practice legally in Nevada during an emergency. It requires such volunteers to be registered in a system that includes information about the licensure and standing of the healthcare provider. The bill specifically identifies the Emergency System for Advance Registration of Volunteer Healthcare Practitioners (ESARVHP) as one such system that would be acceptable. The Nevada State Health Division under a Public Health Preparedness grant requirement has already established an ESARVHP into which Washoe County Medical Reserve Corps volunteers are registered. MRC volunteers from other states who are registered in ESARVHP would be allowed under the provisions of this bill to provide services in Nevada that are within their scope of practice.	Background. BDR is a placeholder for the reintroduction of 2009 legislation that would require warning labels at the point-of-sale of all tobacco products, including over-the-counter sales and vending machines. The DHD was in support of this bill in 2009 but did not provide testimony. Background. 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.
 Priority: High Action: Track Testify: No Position: Support Ordinance: No Policy: Yes Fiscal Impact: Uncertain (R Todd) 	 Priority: Low Action: Monitor Testify: No Position: Support Ordinance: No Policy: No Fiscal Impact: No J. Hadayia) Priority: High Action: Attention Testify: Yes Position: Uncertain Ordinance: Uncertain Policy: Uncertain Fiscal Impact: Uncertain Incertain J. Hadayia)

SB52			
Read first t To committ Health and Human Sei			
Read first time. To committee on Health and Human Services			
Revises provisions relating to vital statistics			
This bill provides some much needed cleanup and updating to NRS 440 covering registration of births and deaths. As written the bill would require a change in how death certificates are issued. Specifically it requires that they be issued by default without a specific cause of death listed. The bill goes on to specify the conditions under which a certificate can be issued with the specific cause of death. This will require a procedural change in Washoe County and the rest of the state.	As submitted this bill does not appear to offer any liability protection to the County for deployment of volunteers during exercises or other situations during which there is not an emergency declaration.	Section 29 of the bill defines these volunteers as employees for the purpose of receiving benefits for death or injury pursuant to NRS 616A to 616D and 617.	Section 28 of the bill offers protection from civil liability for volunteer healthcare providers and in subsection 2 appears to protect the County as well by prohibiting vicarious liability for acts or omissions of volunteers who are not otherwise liable. This section does appear to leave open the possibility that a host entity could still file a claim against a volunteer. (Section 28 Subsection 3(d)) It may be appropriate to ask for a legal interpretation of this section to determine if there are any potential amendments that would better protect Washoe County interests while still promoting volunteerism.
 Priority: High Action: Track Testify: No Position: Support Ordinance: No Policy: Yes Fiscal Impact: Uncertain (R Todd) 			

										AB92				
									Judiciary	To committee on				
	person was released from prison within the immediately preceding 6 months.	need to submit documentation from the Department of Corrections verifying that the	provisions of this bill a person released from prison would	a signed affidavit stating they are homeless. Under the	requires such a waiver for a	months. Existing law already	released from prison within the	birth certificate for persons	Waive the fee for issuance of a	Washoe County Health	TL: [:]			
	Current and proposed language is ambiguous with regard to whether the fee waiver applies only to the individual or any family member certificates they may wish to obtain.	problem because strict enforcement of identification requirements is an important deterrent to identify theft.	certificate is lack of acceptable identification. This bill will not and should not solve that	With respect to released prisoners, the primary problem they encounter in obtaining a birth	apply to persons released from jails.	the language of the bill is interpreted to also	waiver has not been large in Washoe County. Any faced impact would be significantly greater if	individuals taking advantage of the existing	possible to estimate how large this impact would be. Anecdotally, the number of homeless	a negative impact on fee revenues, it is not	this modification.	Nevada State Health Division will need to make	without a specific cause of death. This will need	Currently the computer system used statewide will not allow us to print a death certificate
•					(R Todd	Uncertain	Policy: No Fiscal Impact:	Ordinance: No	Position: Neutral	Action: Monitor				

DBOH Stem No. 15 2/24/11

Proposed Amendments

Revise Section 11 (page 3, lines 11-13):

"Health practitioner" means a "provider of health care" as defined in NRS 629.031 or an individual licensed in these professions under the laws of this or another state to provide health or veterinary services."

Revise Section 20 (page 4, lines 29-33):

"Sections 2 to 30, inclusive, of this act apply to volunteer health practitioners who are registered with a registration system that complies with section 22 of this act and who provide health or veterinary services in this State for a host entity while participating in required training exercises to prepare for, and when an emergency declaration is in effect, or when they have responded with reasonable expectation that an emergency declaration will be made."

DBOH Stem No. 15

WASHOE COUNTY HEALTH DISTRICT - 2011 LEGISLATIVE BILL TRACKING AIR QUALITY MANAGEMENT DIVISION

					71/	VM -	٠٠ _۱	EIN
							SB-158	
							Gustavson	Senator
					Resources	Committee on Natural	Senate Befored to	Introduced in
						not previously failed a test.	smog checks for new motor vehicles and vehicles that have	Reduces the frequency of
Revenue reductions will impact AQM's ability to conduct monitoring and planning activities required for implementation of the Clean Air Act.	Makes non-attainment with July 2011 revised Ozone NAAQS more probable.	Plan amendments to U.S. EPA, revisions of emissions budget/emissions inventories. May require additional control measures (might include stationary sources and consumer products) to offset vehicle emission increases.	County) and excess reserve grant runding. Revenue loss projected at \$360,000 FY 12, and \$367,000 FY13. Will require CO SID and Ozone Maintenance	Will decrease the revenue received by AQM from the DMV Pollution Control Account (\$1 per emissions testing certificate in Washoe	Will result in increased emissions from these vehicles.	two years for vehicles which pass the emissions control test.	control test for new vehicles by one year, and limits emissions control test fractionary to every	Extend the requirement for an initial emissions
			additional control measures by Washoe County residents. (Kevin Dick)	Additional costs of plan amendment preparation, and potential for costs of	Revenue loss of \$360,000 in FY12;	 Position: Oppose Fiscal Impact: 	Action: Tracking Todific: Vo.	Priority: High



Washoe County Health District



DBOH AGENDA ITEM NO. 16.

DISTRICT BOARD OF HEALTH COMMITTEES April 23, 2009

Community and Clinical Health:

Dr. Humphreys
 Mr. Matt Smith

3. Dr. Amy Khan

Environmental Health Services:

1. Mr. Matt Smith

2. Ms. Kitty Jung

3. Mr. Dan Gustin

Personnel and Administration:

1. Dr. Humphreys

2. Dr. George Furman

3. Ms. Julia Ratti

Marketing:

1. Dr. George Furman

2. Mr. Dan Gustin

3. Ms. Julia Ratti

Ambulance Study:

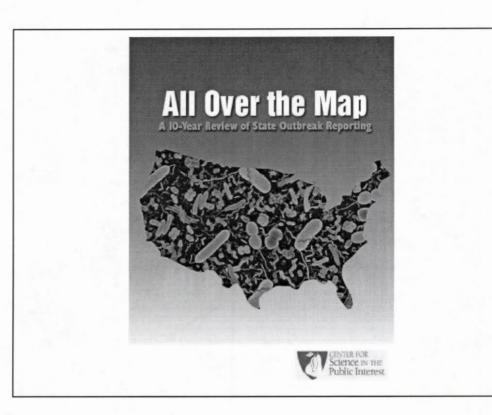
1. Dr. Denis Humphreys

2. Mr. Matt Smith

3. Ms. Julia Ratti

DBOH AGENDA ITEM # <u>.16.</u>

DBOH Agenda Sten No. 17 2/24/11

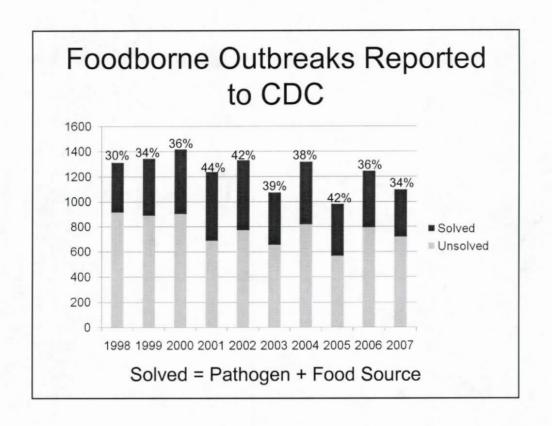


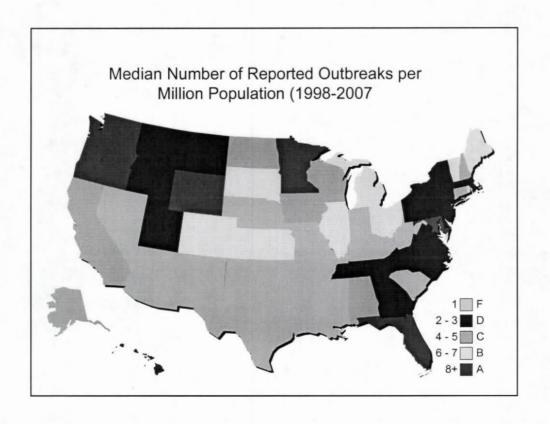
Foodborne Outbreak

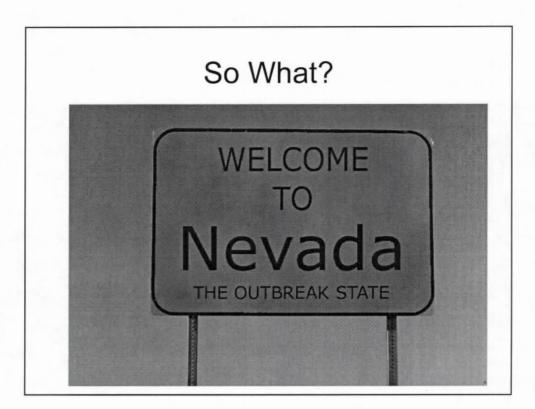
 Definition - Two or more people (cases) become ill from a common food source

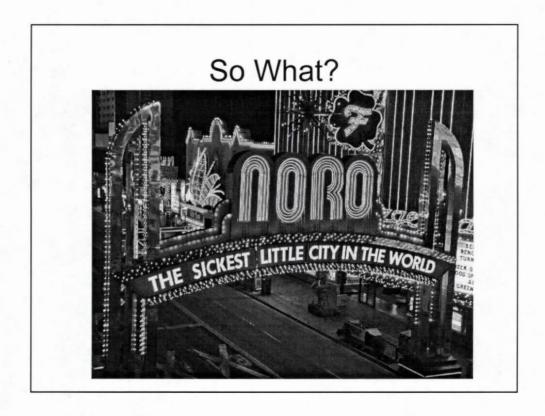
 PulseNet – Improved linking of cases to a common food source through DNA

 Common Food – Still identified through case interview process

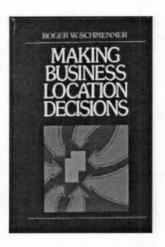




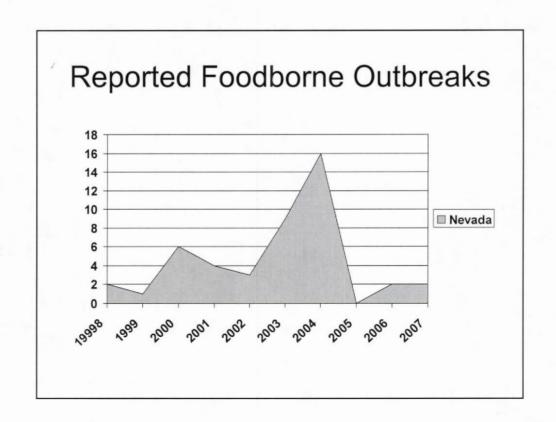


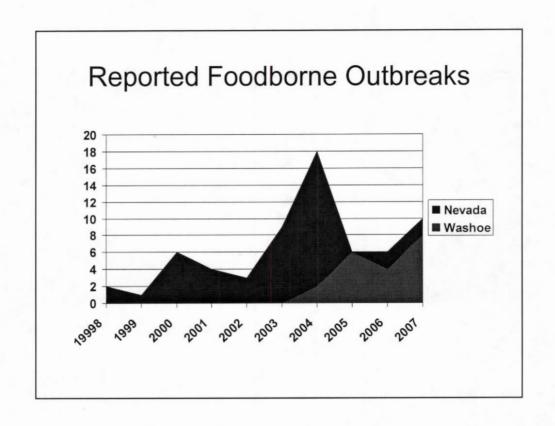


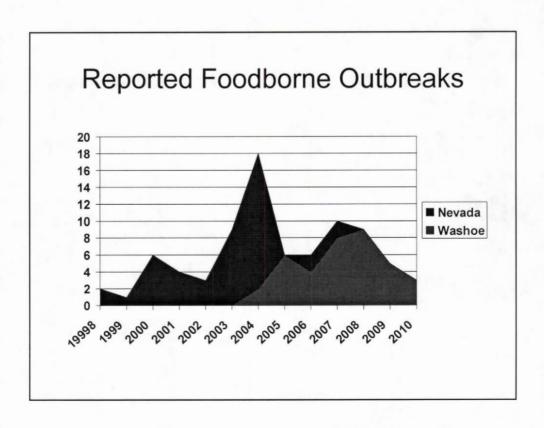












Improving Nevada's Grade

 Report what we have (Turn in the homework)

 2008 – Washoe County began reporting directly to CDC

 Encourage other Nevada jurisdictions to report

 Continue disease surveillance and investigation activities





DISTRICT HEALTH DEPARTMENT

February 16, 2011

MEMORANDUM

To: Members, Washoe County District Board of Health

From: Randall L. Todd, DrPH

Epidemiology and Public Health Preparedness (EPHP) Director

ubject: Report to the District Board of Health, February 2011

Communicable Disease -

Influenza

For the week ending February 12 (week 06) six of eight participating sentinel healthcare providers in Washoe County saw 104 patients presenting with influenza-like-illness (ILI) out of 3,279 total patients. This yields a total ILI percentage of 3.2% which is below the regional baseline of 4.1%. By comparison the ILI percentage for U.S. sentinel providers during the previous week (05) was 4.6%. This is above the national baseline of 2.5%.

Also during week 05 four Washoe County death certificates were received listing pneumonia or influenza as a factor contributing to the death. The ratio of deaths with pneumonia or influenza to all deaths (P & I Ratio) for week 05 was 5.8%. The national P & I Ratio for week 05 was 8.0%. The epidemic threshold set by CDC for week 05 was 8.0%.

Poisoning from Nutritional Weight-Loss Supplement

The CD Program and staff from Environmental Health Services have been investigating a severe illness associated with a young adult having taken a nutritional supplement that is believed to promote weight loss. The product has a Spanish name "Almendras Quema Grasa" that translates to "Fat Burning Almonds." It is available locally by request in some Hispanic markets and can also be obtained via the internet. A similar case occurred a few months ago in Las Vegas. The product does not contain almonds but is apparently the seed from yellow oleander. Oleander is highly poisonous. Staff are working with the State Laboratory and the Food and Drug Administration to confirm that this product is responsible for the current illness and to determine the most appropriate measures to reduce the likelihood of additional cases.

Public Health Preparedness (PHP) Activities –

Training and Education

Four staff attended ICS 400 training. PHP staff is moving ahead with getting a training approved for the Health District and community partners for National Public Health Week. The topic will be Agro-Terrorism and Community preparedness. This is tentatively scheduled for April 5 from 9:00 to 11:00 am in the BCC Chambers.

Exercises and Drills

The current grants for PHP require our participation in or facilitation of several exercises. Some of these include:

Dry POD – This is a functional exercise to benchmark throughput for dispensing of oral medications. This will take place April 29-30.

Eagle Package – This is a Strategic National Stockpile (SNS) functional exercise on May 10-12. We are currently expecting 2 hospitals to participate.

Broken Wing - This is full scale airport exercise on May 25 with full hospital participation.

Post Office – This will be an exercise of the Biological Detection System on May 26.

Bureau of Reclamation – This is a tabletop flood scenario on June 22. We are expecting 3 hospitals to participate.

School District – This is a full scale exercise with a mass casualty/mass fatality scenario on July 27. We are expecting 1 hospital to participate.

Medical Reserve Corps

In January 25, three MRC nurses volunteered with CCHS staff at "Project Homeless Connect" to administer vaccinations to more than 100 members of the homeless community.





Washoe County Health District

ENVIRONMENTAL HEALTH SERVICES DIVISION

DATE: February 16, 2011

TO: District Board of Health Members

FROM: Robert O. Sack, Division Director of E.H.S.

SUBJECT: Division Director's Report – Environmental Health Services

AGENDA ITEM NO. 20.C.

CITY OF RENO BUSINESS LICENSE RESTRUCTURE

Last year the City of Reno undertook the enormous task of restructuring the review and issuance process of business licenses, taking it from a personnel, paper-driven program to an online electronic process. As all business licenses must pass through and receive approval from several agencies, including the Health District, the Environmental Health Services Division provided staff to work with this large team to build a streamlined program. The staff person assigned to this effort was Michael Lupan, REHS. City staff was very happy with Mike's involvement. Before this restructure, EHS staff had to physically pick up and return business license applications, and now the time committed has decreased. The City of Reno began using this program the first of this year. It seems to be working very well with few hiccups.

Robert O. Sack Division Director

Environmental Health Services Division

ROS:sn



Washoe County Health District



February 25, 2011

TO: District Board of Health

FROM: Steve Kutz, RN, MPH

Acting Division Director, Community and Clinical Health Services

SUBJECT: Report for February 2011 District Board of Health Meeting

1. School Based Influenza Clinic Update

2. Silver Syringe Award

3. Update on Unintentional Injury Prevention Activities

1. School Based Influenza Clinic Update

The Immunization Program is continuing its partnership with the Northern Nevada Immunization Coalition (NNIC), Washoe County School District (WCSD), and the Nevada State Health Division (NSHD) to provide influenza immunizations to students and staff in Phase I of the Nevada State Health Officer's school-based immunization plan. Since November 2010, the partners have immunized nearly 1,500 students, school faculty, and family members against influenza. A summary of this plan was presented as part of the December 2010 CCHS Board Report.

Phase II of the school-based immunization clinic plan is set to commence in Spring 2011. The partners have identified 19 Title I schools with sixth grades and are currently working on staffing plans to provide students with Tdap, Varicella, and influenza immunizations prior to seventh grade entry.

2. Silver Syringe Award

The Immunization Program will receive an NNIC Silver Syringe Award for **Outstanding Adult Immunization Program** for "exceptional work" in providing influenza, Tdap and pneumococcal vaccines to at-risk adult populations in 2010. Each year the NNIC holds an awards ceremony to celebrate and recognize immunization successes, partnerships and champions who have gone above and beyond in the area of immunizations in Northern Nevada.

3. Update on Unintentional Injury Prevention Activities

Unintentional injuries such as motor vehicle crashes and pedestrian accidents remain among the leading causes of death in Washoe County, and, though CCHS

no longer operates a dedicated injury prevention program, staff continue to address risk factors for injury through integration with other programming, particularly chronic disease. For example, one of the goals of the CCHS Chronic Disease Prevention Program is to promote increased physical activity, such as biking and walking to school or work. Many injury prevention activities in the community promote safe biking and pedestrian behaviors. Therefore, partnering with injury prevention coalitions and groups provides an additional venue for conveying the chronic disease prevention message and, at the same time, provides increased capacity and support for injury prevention activities in the community.

An example of integration of unintentional injury prevention, with increase physical activity is: Safe Kids Washoe County and Safe Routes to Schools, which coordinate multiple school-based safe walking and biking programs for children, including Walk Your Child to School Day and Bike to School Week. Another is the RTC "Street Smart" Pedestrian Safety Program, which provides public education about safe walking particularly during high-traffic walking events such as outdoor festivals. The Truckee Meadows Bicycle Alliance ensures a safety component is included in the annual Bike To Work week.

The way in which CCHS staff have integrated injury prevention activities within the chronic disease mission is another example of creative partnerships and how scarce resources are being leveraged to continue to meet a community need.



WASHOE COUNTY HEALTH DISTRICT AIR QUALITY MANAGEMENT DIVISION



Date:

February 24, 2010

To:

District Board of Health

From:

Kevin Dick, Director, Air Quality Management

Re:

Monthly Report for Air Quality Management

Agenda Item:

20.D.

The enclosed Air Quality Management Division Report is for the month of January, 2011 and includes the following sections:

Air Quality Monitoring Activity Planning Activity Permitting Activity Compliance/Inspection Activity Enforcement Activity



Management Division

Director's Report January 2011

Particulates Inside and Out

A strong temperature inversion that trapped air pollutants near the ground in early January was typical of the wintertime episodes that cause particulate matter air pollution problems in the Truckee Meadows. Levels of fine particulate matter, PM25, began to build in concentration on Thursday January 6th. The Yellow Burn Code was triggered that day when the Air Quality Index (AQI) approached 80. The word went out through the local media asking citizens to voluntarily curtail wood burning.

The inversion held strong until Saturday evening, January 8th. During the day on Saturday the AQI climbed to 102, Unhealthful for Sensitive Groups. This triggered a Red Burn Code, a mandatory ban on burning wood in fireplaces and woodstoves. Fortunately, a front moved through on the evening of the 8th, rapidly dissipating the PM25 pollution and the Burn Code returned to Green on Sunday morning. Because EPA determines exceedances based on a midnight to midnight 24-hour average concentration, rather than a rolling 24 hour average used to determine our AQI, the Truckee Meadows avoided a reportable exceedances of the National Ambient Air Quality Standard during this event and throughout the month of January.

I'd like to note the assistance and cooperation provided by the Street Sweeping Programs at the City of Reno, Sparks, and Nevada Department of Transportation during the episode. Each agency mobilized in response to the Air Quality Management Division's (AQMD) notice of the situation and request for their renewed attention to street sweeping efforts. The agencies provided AQMD with status updates of their equipment mobilization and sweeping activities.

AQMD's Residential Wood Combustion (RWC) Program is aimed to reduce outdoor ambient air concentrations of pollutants from wood burning. These pollutants can also cause indoor air quality problems in residences burning wood in fireplaces or woodstoves.

In January scientists released research results from a study of healthy adults living in a community where wood burning stoves are the main sources of pollution. The researchers found that high efficiency particle air (HEPA) filters reduced the amount of indoor airborne particulate matter, resulting in improved blood vessel health and reductions in blood markers that are associated with an increased risk of cardiovascular disease. The study's results indicate that using inexpensive air filters may help reduce cardiovascular disease risk that results from exposure to indoor air pollution from woodstoves and fireplaces. The findings were published online ahead of the print edition of the American Thoracic Society's American Journal of Respiratory and Critical Care Medicine.

Kevin Dick, Director

AIR QUALITY COMPARISON FOR JANUARY

Air Quality Index Ra	# OF DAYS JANUARY 2011	# OF DAYS JANUARY 2010	
GOOD	0 to 50	12	17
MODERATE	51 to 100	18	12
UNHEALTHY FOR SENSITIVE GROUPS	101 to 150	1	2
UNHEALTHY	151 to 200	0	0
VERY UNHEALTHY	201 to 300	0	0
TOTAL		31	31

Real-Time data was unavailable for three days due to phone line issues and the Air Quality relocation to the main Washoe County Complex at 1001 East Ninth Street.

Air Quality

HIGHEST AQI NUMBER BY POLLUTANT

POLLUTAN	Т	JANUARY 2011	YTD for 2011	JANUARY 2010	Highest for 2010
CARBON MONOXIDE	(CO)	39	39	29	31
OZONE 8 hour	(O3)	40	40	40	104
PARTICULATES	(PM _{2.5})	102	102	112	112
PARTICULATES	(PM ₁₀)	69	69	83	83

For the month of January, there were no exceedances of Carbon Monoxide, Particulate Matter PM¹⁰ or 8-Hour Ozone standards at any of the monitoring stations. There was an exceedance of PM^{2.5} Fine Particulate Matter on January 8th. The highest Air Quality Index (AQI) value reported for the month of January was one-hundred two (102) for PM^{2.5}. There were twelve (12) days in the month of January where the Air Quality was in the good range, eighteen (18) days in the moderate range, and one (1) day the Air Quality was in the Unhealthy For Sensitive Groups range.

Monitoring Activity

Daily monitoring operational, quality assurance and data submission activities continued throughout the month.

Duane Sikorski, Air Quality Supervisor

Planning Activity

With the Planning Section as the lead, the AQMD continues the process of revising its Emergency Episode Policies given the forthcoming reductions of the NAAQS.

Washoe County AQMD was invited to join and attended its first meeting of the California Northern Sierra Area Land Managers Association on January 13th assuring that Washoe County's air quality interests are taken into consideration for the issuance of future California prescribed burn permits.

Duane Sikorski, Air Quality Supervisor

Permitting Activity

	20	11	20	10
TYPE OF PERMIT	January	YTD	January	ANNUAL TOTAL
Renewal of Existing Air Permits	106	106	107	1296
New Authorities to Construct	13	13	1	40
Dust Control Permits	2 (3.7 acres)	2 (3.7 acres)	9 (105 acres)	127 (2814 acres)
Wood Stove Certificates	16	16	14	254
WS Dealers Affidavit of Sale	27 (17 replacements)	27 (17 replacements)	12 (7 replacements)	82 (46 replacements)
WS Notice of Exemptions	180 (0 stoves removed)	180 (33 stoves removed)	276 (3 stoves removed)	5767 (41 stoves removed)
Asbestos Assessments and Asbestos Removal Notifications (NESHAP)	68	68	50	1027

Compliance & Inspection Activity

Staff reviewed thirty-six (36) 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-eight (48) stationary source renewal inspections and fifty-four (54) gas station inspections in January. Staff also conducted inspections on asbestos removal and construction/dust projects.

Staff continues to make asbestos presentations to local industry for compliance with the regulations. The audiences include general contractors, plumbing contractors, HVAC people, electrical contractors, and related construction practices. Topics include necessary paperwork to complete prior to project start up, proper work practices, complete surveys, and disposal methods. We believe that education is the best way to gain compliance as well as a good working relationship with local industry.

We have also been working with the staff of Community Development in a revision to Article 438 (Grading Standards) of the County Code. Specifically, language has been drafted outlining a phased grading concept to prevent large areas of land being opened up without corresponding development (as has been the case with areas of the County such a Spanish Springs, South Meadows, etc.). Community Development will be scheduling future workshops to get input from both the public and industry prior to developing a final product for County Commission consideration.

Finally, staff continues to make site visits to monitor the Ruby Pipeline project in Northern Washoe County for compliance with the Air Quality Regulations.

Noel Bonderson, Air Quality Supervisor

Enforcement Activity

COMPLAINTS	201	11*		2010	
COMPLAINTS	January	YTD	January	YTD	Annual Total
Asbestos	3	3	1	1	22
Burning/Smoke	0	0	2	2	6
Construction Dust	3	3	1	1	52
Dust Control Permit	0	0	0	0	0
Diesel Idling	1	1	0	0	5
Odor	1	1	2	2	22
Spray Painting	0	0	0	0	10
Permit to Operate	0	0	1	1	14
Woodstove	2	2	0	0	0
TOTAL	10	10	5	5	131
NOV'S	January	YTD	January	YTD	Annual Total
Warnings	1	1	2	2	7
Citations	1	1	0	0	12
TOTAL	2	2	2	2	19

^{*} Discrepancies in totals between Monthly Reports can occur because of data entry delays.

Notices of Violation (NOVs):

There were two (2) Notice of Violations (NOVs) issued in January 2011, one was an NOV Warning issued for No Asbestos Assessment prior to Demo, Asbestos Sampling & Notification, and Unacceptable Control Work Practices. There was one NOV Citation issued for No Asbestos Assessment before Demolition.



Washoe County Health District

February 15, 2011

TO: District Board of Health Members

FROM: Mary-Ann Brown, R.N., M.S.N.

Interim Health Officer Washoe County Health District

SUBJECT: Interim Health Officer Report

Elements of Interim Health Officer Plan Completed as of February 15, 2011.

Strategic Planning

- WCHD Strategic Plan presented to DBOH on 1/27/11 and approved. Draft Strategic Plan presented to WCHD staff at the General Staff Meeting on 1/27/11. Approved plan distributed to all staff 1/28/11.
- Incorporating approved WCHD Strategic Plan into Washoe County budget process with identification of targets for key performance measures.

2010-2011 Legislative Sessions

- Thirty three (33) Bills to date have been reviewed and analyzed for the Washoe Bills tracking system including fiscal impacts as requested. Hearings have begun and staff are monitoring for the need to testify. Details can be found in DBOH tracking report.
- DBOH Bill tracking reports continue to be presented at each Board meeting.

Budget

- Initial budget targets met following review of all Division and programmatic budgets for savings. Fiscal staff preparing initial budget for submission.
- Conducting analysis on potential state decreases in funding, reallocation of services from State to County and requested payment from County for service provided by the State. Meetings held with the other Nevada State Health Districts and representatives from the State of Nevada including State Health Officer Dr Green regarding impacts to WCHD budget, services to the public and health implications. The three areas proposed to be shifted to WCHD include:
 - 1. Food inspections for higher education
 - 2. Elimination of funding and transfer of responsibility for Tuberculosis (TB) medical treatment

DBOH AGENDA ITEM # 20.F

3. Requiring payment for (Emergency Medical System) EMS standards, training and licensure program.

The largest fiscal impact is related to the EMS program. The State will be requesting an estimated \$413,840 per year to be invoiced monthly or quarterly. WCHD has not provided the EMS program since 1995 and the Interim Health Officer is working with Clark County to review the program they operate including program specifics, costs and revenue from fees.

All three areas are under review with staff to identify how to minimize fiscal impacts and retain critical services. It is essential to monitor for bills and budget hearings related to these issues as they will offer the opportunity to identify the impact to the WCHD and the citizens of Washoe County.

Human Resources

- Leadership continues to work on conducting employee evaluations to bring all staff into compliance. Sample evaluations provided to leadership as resources.
- Working with Human Resources (HR) Director and staff to address employee development needs within WCHD.

Communication

- Interim Health Officer Friday 5's continue to be distributed weekly.
- Meetings scheduled with the City Mangers of Reno and Sparks with direction from DBOH City Council representative members.
- E-mail and verbal contact made with all County Commissioner regarding position of Interim Health Officer and requesting any information or updates needed.
- Walking rounds, informal meetings, attendance at trainings and staff meetings continue.

Community Activities

- Attendance and participation with various community Boards, committees and work groups such as:
 - 1. REMSA Board of Directors meeting, tour and orientation from Jim Gubbles, meeting with Bonnie Drinkwater REMSA legal council
 - 2. Economic Impact on Early Care and Education in Nevada Advisory Committee
 - 3. Governor's Workforce Investment Board Healthcare Sector Council
 - 4. Kids to Senior Advisory Board
 - 5. Juvenile Detention Alternative Initiative
 - 6. County Department Head Strategic Retreat
 - 7. Human Services Board of Directors

District Board of Health Information and Resources

 WCHD Employee Full Time Equivalent (FTE) historical reports (Attachment A) The US House of Representatives Committee on Appropriations partial list of 70 spending cuts that will be included in the upcoming Continuing Resolution (CR) bill. A full list of cuts will be released when the bill is formally introduced. Underlined are the programs that if cut could have an impact on WCDH grant funding or cause changes to the State both funding and/or programmatic. (Attachment B)

Mary-Ann Brown RN MSN Interim Health Officer

Washoe County Health District

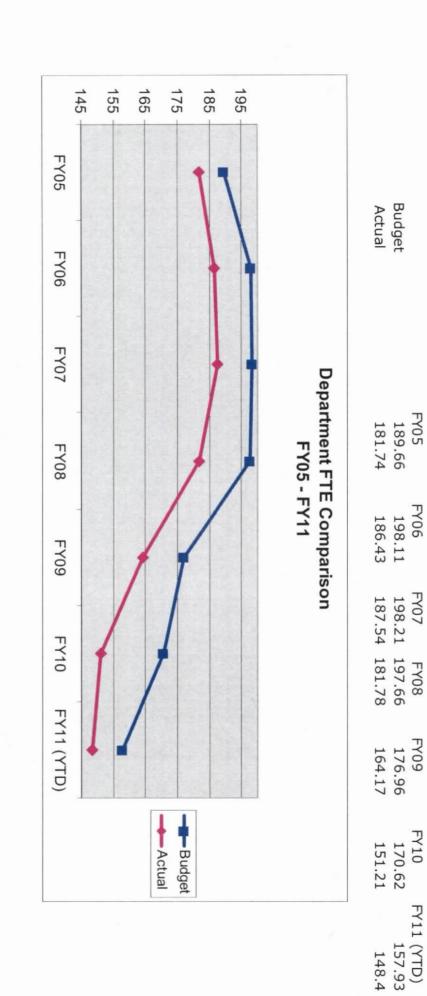
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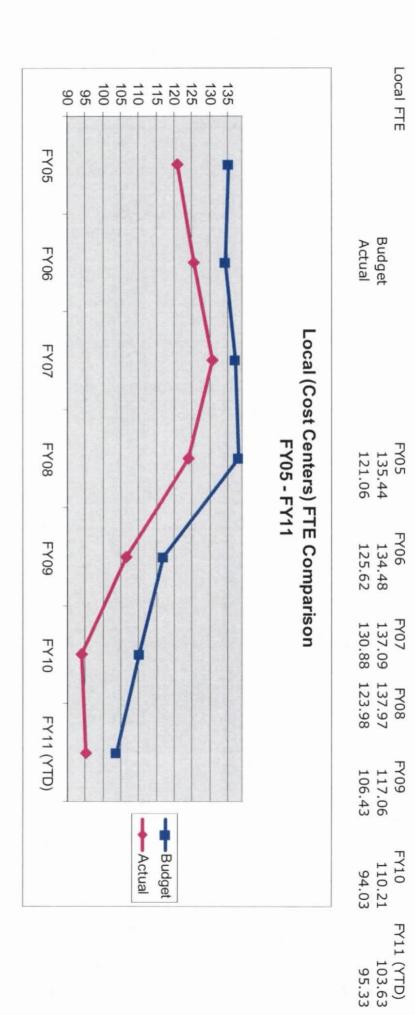
FY05 189.66

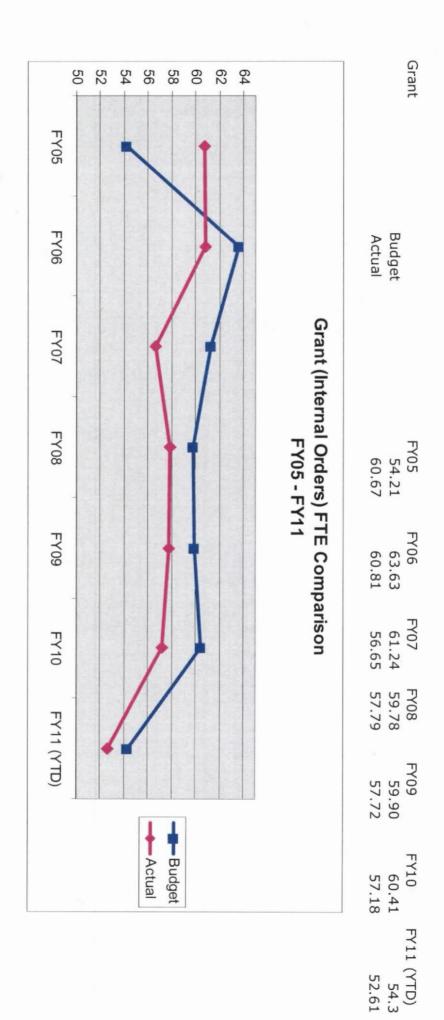
FY06 198.11

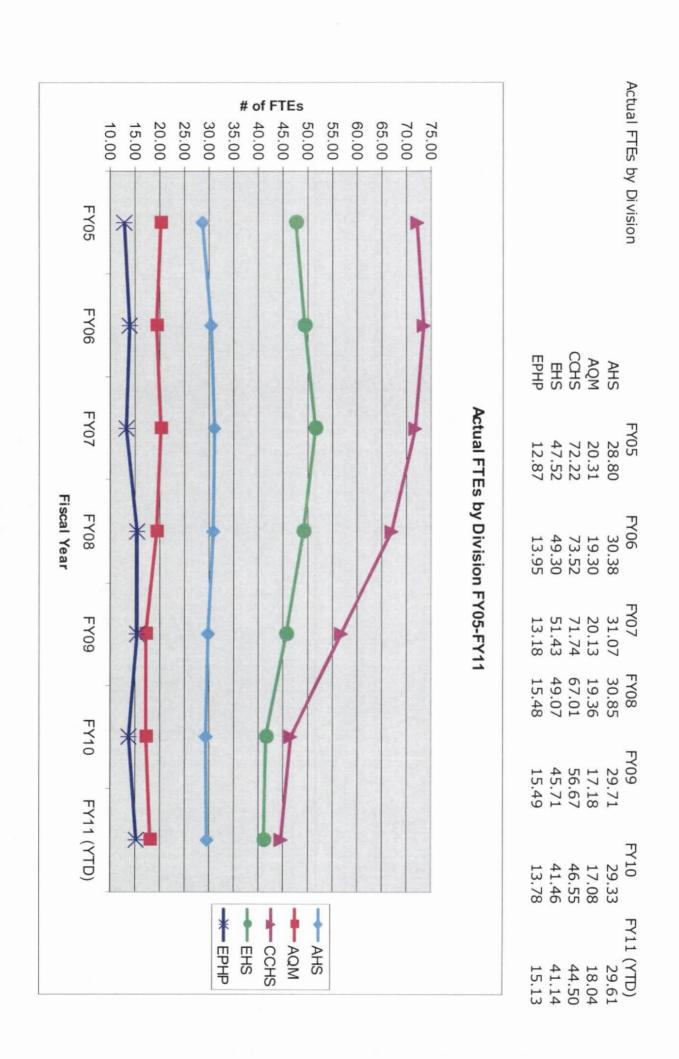
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The U.S. House of Representatives COMMITTEE ON APPROPRIATIONS

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"No money shall be drawn from the Treasury but in Consequence of Appropriations made by Law US Constitution Article I, Section 9, Clause 7

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News Room

CR SPENDING CUTS TO GO DEEP

February 9th, 2011 - -

CR Spending Cuts to Go Deep

WASHINGTON, D.C. - House Appropriations Chairman Hal Rogers today announced a partial list of 70 spending cuts that will be included in an upcoming Continuing Resolution (CR) bill. The CR legislation will fund the federal government for the seven months remaining in the fiscal year and prevent a government wide shut-down, while significantly reducing the massive increases in discretionary spending enacted in the last several years by a Democrat majority. A full list of program cuts will be released when the bill is formally introduced.

The total spending cuts in the CR will exceed \$74 billion, including \$58 billion in non-security discretionary spending reductions. The statement by Chairman Rogers on these cuts follows:

"Never before has Congress undertaken a task of this magnitude. The cuts in this CR will represent the largest reduction in discretionary spending in the history of our nation.

"While making these cuts is hard, we have a unique opportunity to right our fiscal ship and begin to reduce our massive deficits and debt. We have taken a wire brush to the discretionary budget and scoured every program to find real savings that are responsible and justifiable to the American

"Make no mistake, these cuts are not low-hanging fruit. These cuts are real and will impact every District across the country - including my own. As I have often said, every dollar we cut has a constituency, an industry, an association, and individual citizens who will disagree with us. But with this CR, we will respond to the millions of Americans who have called on this Congress to rein in spending to help our economy grow and our businesses create jobs."

The List of 70 Spending Cuts to be Included in the CR follows:

Flood Control and Coastal Emergencies -\$30M

Energy Efficiency and Renewable Energy -\$899M

Electricity Delivery and Energy Reliability -\$49M

Nuclear Energy -\$169M

Fossil Energy Research -\$31M

Clean Coal Technology -\$18M

Strategic Petroleum Reserve -\$15M Energy Information Administration -\$34M

Office of Science -\$1.1B

Power Marketing Administrations -\$52M

Department of Treasury -\$268M

Internal Revenue Service -\$593M

Treasury Forfeiture Fund -\$338M

GSA Federal Buildings Fund -\$1.7B

ONDCP -\$69M

International Trade Administration -\$93M

Economic Development Assistance -\$16M

Minority Business Development Agency -\$2M

National Institute of Standards and Technology -\$186M

NOAA -\$336M

National Drug Intelligence Center -\$11M

ATTACHMENT "B"

Law Enforcement Wireless Communications -\$52M US Marshals Service -\$10M FBI -\$74M State and Local Law Enforcement Assistance -\$256M Juvenile Justice -\$2.3M COPS -\$600M NASA -\$379M NSF -\$139M Legal Services Corporation -\$75M EPA -\$1.6B Food Safety and Inspection Services -\$53M Farm Service Agency -\$201M Agriculture Research -\$246M Natural Resource Conservation Service -\$46M Rural Development Programs -\$237M WIC -\$758M International Food Aid grants -\$544M FDA -\$220M Land and Water Conservation Fund -\$348M National Archives and Record Service -\$20M DOE Loan Guarantee Authority -\$1.4B EPA ENERGY STAR -\$7.4M EPA GHG Reporting Registry -\$9M USGS -\$27M EPA Cap and Trade Technical Assistance -\$5M EPA State and Local Air Quality Management -\$25M Fish and Wildlife Service -\$72M Smithsonian -\$7.3M National Park Service -\$51M Clean Water State Revolving Fund -\$700M Drinking Water State Revolving Fund -\$250M EPA Brownfields -\$48M Forest Service -\$38M National Endowment for the Arts -\$6M National Endowment for the Humanities -\$6M Job Training Programs -\$2B Community Health Centers -\$1.3B Maternal and Child Health Block Grants -\$210M Family Planning -\$327M Poison Control Centers -\$27M CDC -\$755M NIH -\$1B Substance Abuse and Mental Health Services -\$96M LIHEAP Contingency fund -\$400M Community Services Block Grant -\$405M High Speed Rail -\$1B FAA Next Gen -\$234M Amtrak -\$224M HUD Community Development Fund -\$530M

(All reductions are compared to the President's fiscal year 2011 request)

Contact: Jennifer Hing, 202-226-7007

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- 9th current Press Release
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In This Issue:

 Washoe County Quarterly Communicable Disease Statistics January 28, 2011 Vol. 31, No. 3

Telephone (775) 328-2447 Fax (775) 328-3764 epicenter@washoecounty.us

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WASHOE COUNTY HEALTH DISTRICT .

P.O. BOX 11130

RENO, NEVADA 89520-0027 (775) 328-2447



REPORTED CASES OF SELECTED **COMMUNICABLE DISEASES** WASHOE COUNTY October - December 2010

To report communicable disease phone: (775) 328-2447 or fax reports to: (775) 328-3764

	(775) 328-3764					
DISEASE	4 th Quarter			Year to Date (Cumulative)		
	2008	2009	2010	2008	2009	2010
AIDS	4	7	3	23	25	9
Campylobacteriosis	7	6	9	37	34	63
Chlamydia	364	316	371	1340	1243	1426
Cryptosporidiosis	0	4	0	7	14	8
E. coli 0157:H7	0	1	0	0	5	0
Giardiasis	8	5	8	25	22	34**
Gonorrhea	56	29	31	213	131	98
Haemophilus influenzae type b (Hib)	0	0	0	0	0	0
Hepatitis A (acute)	0	1	1	1	3	4
Hepatitis B (acute)	0	1	1	6	4	6
Hepatitis B (chronic)	16	6	9	49	41	41
Hepatitis C (acute)	3	1	0	5	4	3
Hepatitis C (chronic)	201	172	141	903	774	673
HIV	10	9	10	21	25	21
Influenza (Type A, B, or unknown)	20	647	103	827	*2559	132
Measles	0	0	0	0	0	0
Meningitis, Viral or Aseptic	3	2	4	13	13	14
Meningococcal Disease	0	2	0	3	3	4
Pertussis (confirmed & Probable)	0	0	4	7	5	11
Pneumococcal Disease, Invasive	7	10	12	50	47	44
Rabies (bat)	2	2	2	9	9	4
Rotavirus	4	34	1	115	80	13
RSV	38	18	151	290	278	321
Salmonellosis	8	6	8	38	45	63**
Shigellosis	3	0	0	5	3	3
Syphilis (Primary & Secondary)	2	1	1	4	2	2
Tuberculosis	2	3	3	10	15	12
West Nile Virus	0	0	0	0	0	1

^{*} Novel H1N1 influenza: 599. >99% (157/158) of specimens positive by rapid test for influenza A were subsequently confirmed as novel H1N1 influenza by PCR testing.

** Outbreak associated



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In This Issue:

 Outbreaks Reported in Washoe County, 2010 February 11, 2011 Vol. 31, No. 4

Telephone (775) 328-2447 Fax (775) 328-3764 epicenter@washoecounty.us

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Outbreaks Reported in Washoe County, 2010

Although the number of outbreaks received at Washoe County Health District (WCHD) in 2010 was significantly less than those reported in 2009, several outbreak investigations were resource intensive. The purpose of this article is to provide an overview of outbreaks reported in Washoe County in 2010 and to make recommendations for healthcare providers in an effort to assist the Health District in the early detection and rapid control of outbreaks.

Summary

A total of 21 outbreaks were reported to WCHD in 2010. Of 21 outbreaks, 71% (15/21) were gastroenteritis, 14% (3/21) were rash illnesses, 10% (2/21) were respiratory illnesses, and the remaining 5% (1/21) was associated with an occupational exposure. Sixty-two percent (13/21) of outbreaks were laboratory-confirmed. The confirmed or suspected etiology for these outbreaks is as follows:

- Norovirus 12 (57%)
- Varicella-zoster Virus 2 (10%)
- Salmonella enteritidis 1 (5%)
- Giardia 1 (5%)
- Unknown 5 (23%)

Extended care facilities (ECFs), community living facilities (CLFs), childcare centers, and schools were the most commonly affected settings for outbreaks in 2010. A third of outbreaks occurred in ECFs or CLFs; 24% of outbreaks were in childcare facilities or schools. Other settings include workplaces, restaurants, and the community (part of a national outbreak).

Norovirus

Noroviruses are named after the original strain "Norwalk virus," which caused an outbreak of gastroenteritis in a school in Norwalk, Ohio, in 1968. Noroviruses are highly heterogeneous and can be genetically divided into 5 different genogroups (GI-GV), with human strains classified in genogroups GI, GII, and GIV, and at least 25 genotypes. The majority of norovirus outbreaks are caused by GII viruses. Twelve (12) outbreaks involving 339 ill individuals were reported in Washoe County in 2010, which accounted for 57% of all reported outbreaks and 75% of reported illness from all outbreaks. Nine (9) of these outbreaks were laboratory confirmed, the

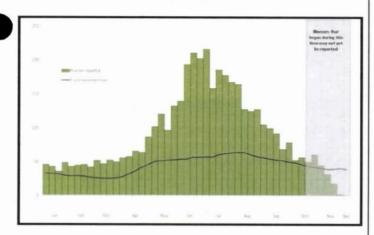
remainder were suspect norovirus. Reported outbreak settings include extended care facilities, child care facilities, an acute care hospital, a workplace, and associated with restaurants. One outbreak may have been foodborne; the remaining 11 outbreaks were most likely transmitted person-to-person. Norovirus is highly contagious and as few as 10 viral particles may be sufficient to infect an individual. During outbreaks of norovirus gastroenteritis in congregate settings (i.e., extended care facilities, child care facilities, and schools), WCHD recommends that ill persons stay home (or in the case of institutional settings remain in their rooms) for 72 hours after their last symptom (i.e., vomiting or diarrhea). Health care providers should encourage their patients who work in sensitive occupations (food handlers, health care workers, child care providers, etc.) to stay home from work for 72 hours after their symptoms resolve in the presence of an outbreak. Health care providers should also encourage parents to keep their children home from child care or school for 72 hours after the child's symptoms resolve in the presence of an outbreak. Given the genetic variability of noroviruses. individuals are likely to be repeatedly infected throughout their lifetime. A norovirus vaccine is under research.1 Reverse transcriptase polymerase chain reaction (RT-PCR) can be used to identify the organism in the stool. This test is available at commercial laboratories (LabCorp. Quest) and the Nevada State Public Health Laboratory (NSPHL).

Salmonella Enteritidis

One salmonellosis outbreak was reported in 2010. This outbreak was associated with the nationwide Salmonella enteritidis outbreak linked to shell eggs. From May 1 to November 30, 2010, approximately 1.939 illnesses were reported that are likely to be associated with this outbreak in the nation (see following graph for epidemic curve of this outbreak. Source: www.cdc.gov dated on 12/02/2010). The outbreak was declared to be over nationwide on December 2, 2010 because reported illness levels returned to the normal baseline. In Washoe County, a total of 33 laboratory-confirmed Salmonella enteritidis cases were reported in July and August of 2010, far above the expected baseline for that time period. Intensive investigations were conducted. Of 33 confirmed cases, 30 were likely associated with this national outbreak because of epidemiological link to

¹ Jan Vinje. A Norovirus Vaccine on the Horizon? JID 2010:202 (1 December)

the shell eggs recalled in August 2010 by the Food and Drug Administration (FDA).



Giardia

An outbreak of giardiasis associated with a local golf course was identified through a traditional CD investigation of several reported laboratory-confirmed cases with common exposure histories. Subsequent epidemiological and environmental investigations found that 19 laboratory confirmed cases were associated with this outbreak. Onset dates were between July 11 and August 28, 2010 with a peak of onset dates between July 25 and 31. Although a definitive source of infection could not be determined, the investigation indicated the most likely source was non-potable water from surrounding ditches used to irrigate the golf course. Appropriate control measures were implemented and no further cases associated with the golf course were identified.

Varicella

A varicella outbreak is defined as the occurrence of five (5) or more varicella cases that are related in place and epidemiologically linked.2 Two varicella outbreaks were reported from two schools (School A and B). During the period of January 13 through April 20, 2010, 13 cases were reported from school A, which represented an attack rate of 5.4% among students. Of 13, one (1) was a severe case (skin lesions >=500), three (3) were moderate cases (skin lesions 50-500), and nine (9) were mild cases (skin lesions <50). Eight (8) cases sought medical care and none were hospitalized. Ten (10) of 13 cases received one dose of vaccine prior to illness and three (3) had no prior history of chickenpox disease and had never received varicella vaccine. Investigation revealed that many students were under vaccinated or lacked documentation of immunization records. A total of 112 doses of varicella vaccine were given to students who were susceptible or under-vaccinated resulting from this outbreak investigation.

² National Center for Immunization and Respiratory Diseases. CDC. Strategies for the Control and Investigations of Varicella Outbreaks 2008. During the period of March 16 through May 24, 2010, six (6) cases were reported from school B, which represented an attack rate of 1% among all school students but 4% among students residing in one particular dorm. Five of six cases were foreign born. Four of six had no history of chickenpox disease or prior varicella vaccination, one had unknown history of chickenpox and no varicella vaccination, and one had no history of chickenpox and questionable record for varicella vaccination. Varicella-zoster virus DNA was detected from a skin lesion specimen from one patient. A total of 43 doses of varicella vaccine were given to unvaccinated or under vaccinated students.

According to the Recommended Immunization Schedule for Persons Aged 7 through 18 Years, children aged 7 through 18 years without evidence of immunity should be given 2 doses of varicella vaccine if not previously vaccinated, or should be given a second dose if only 1 dose has been administered. Beginning with the 2011-2012 school year, 2 doses of varicella vaccine is required prior to school entry for all K-12 students new to the school district.

Other Outbreaks

- A skilled nursing facility reported a cluster of suspect scabies among five (5) residents.
- An outbreak of <u>upper</u> respiratory illness was reported by an office.
- An elementary school reported greater than 10% school absenteeism due to symptoms of cough and vomiting; etiology was not identified.
- A cluster of <u>elevated blood arsenic</u> level among persons who engage in a special occupation was reported. Further laboratory evaluation revealed no anomalies among those individuals.
- A total of 12 persons ill with <u>gastrointestinal</u> <u>symptoms</u> were reported after media reported a local water district detected *E. coli* in routinely collected water samples and a boil water order was issued. Investigation from routine surveillance systems did not detect increased illness activities in the affected area.

When you SUSPECT a disease outbreak, please report it to the Health District at 775-328-2447 immediately.

Your early recognition and timely reporting is a critical step for the Health District to promptly implement prevention and control measures.

2

http://www.cdc.gov/vaccines/recs/schedules/downloads/child/7 -18yrs-schedule-pr.pdf

⁴ Nevada State Health Division. Nevada Laws Requiring Immunization of Children in Public Schools, and Private Schools. Technical Bulletin. December 7, 2010.



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In This Issue:

 CDC HAN Info Service Message: Best Practices for Health Care Professionals on the Use of Polymerase Chain Reaction (PCR) for Diagnosing Pertussis February 18, 2011 Vol. 31, No. 5

Telephone (775) 328-2447 Fax (775) 328-3764 epicenter@washoecounty.us

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This is an official CDC HAN Info Service Message

Distributed via the HAN Info Service February 16, 2011, 11:30 EST (11:30 AM EST) HANINFO-000319-2011-02-16-UPD-N

Best Practices for Health Care Professionals on the Use of Polymerase Chain Reaction (PCR) for Diagnosing Pertussis

Summary: With the continuing resurgence of pertussis, health care professionals will likely see more patients with suspected pertussis. Proper testing criteria, timing of testing, specimen collection techniques, protocols for avoiding specimen contamination, and appropriate interpretation of test results are all necessary to ensure that Polymerase Chain Reaction (PCR) reliably informs patient diagnosis. PCR is an important tool for timely diagnosis of pertussis and is increasingly available to clinicians. PCR is a molecular technique used to detect DNA sequences of the Bordetella pertussis bacterium and unlike culture does not require viable (live) bacteria present in the specimen. Despite this advantage, PCR can give results that are falsely-negative or falsely-positive. The following compilation of best practices is intended to help health care professionals optimize the use of PCR testing for pertussis by avoiding some of the more common pitfalls leading to inaccurate results.

Recommendations for Testing

Whom should you test?

Only patients with signs and symptoms consistent with pertussis should be tested by PCR to confirm the diagnosis. For guidance in distinguishing signs and symptoms of pertussis from those of other conditions, see http://www.cdc.gov/pertussis/clinical/features.html. Testing asymptomatic persons should be avoided as it increases the likelihood of obtaining falsely-positive results. Asymptomatic close contacts of confirmed cases should not be tested and testing of contacts should not be used for post-exposure prophylaxis decisions.

When should you test?

When possible, you should test patients for pertussis during the first 3 weeks of cough when bacterial DNA is still present in the nasopharynx, because after the fourth week of cough, the amount of bacterial DNA rapidly diminishes, increasing the risk of obtaining falsely-negative results by PCR. For more information on diagnostic testing, see http://www.cdc.gov/pertussis/clinical/diagnostic-testing/diagnosis-confirmation.html.

Also, PCR testing after 5 days of antibiotic use is unlikely to be of benefit, because PCR testing following antibiotic therapy also can result in falsely-negative findings, although the exact duration of positivity following antibiotic use is not well understood.

How should you obtain specimens?

You should obtain specimens for PCR by aspiration or swabbing the posterior nasopharynx, rather than by throat swabs or anterior nasal swabs which both have unacceptably low rates of DNA recovery and should therefore **not** be used for pertussis diagnosis. For more information, see http://www.cdc.gov/pertussis/clinical/diagnostic-testing/specimen-collection.html.

What should you do to avoid contamination of clinical specimens with pertussis DNA?

Some pertussis vaccines^[1] have been found to contain PCR-detectable *B. pertussis* DNA. Environmental sampling has identified *B. pertussis* DNA from these vaccines in clinic environments. While DNA in the vaccines

Vaccines shown to contain PCR-detectable DNA include Pentacel[®], Daptacel[®], and Adacel[®]. Leber A et al. Detection of *Bordetella pertussis* DNA in Acellular Vaccines and in Environmental Samples from Pediatric Physician Offices, in 2010 Interscience Conference on Antimicrobial Agents and Chemotherapy (ICAAC): Boston, USA.

does not impact the safety or immunogenicity, accidental transfer of the DNA from environmental surfaces to a clinical specimen can result in specimen contamination and falsely-positive results. If health care professionals adhere to good practices, there is no need to switch vaccines. Clinicians should adhere to the following vaccine preparation and administration best practices and basic infection-control measures, to prevent cross-contamination.

Best Practices for Preparing and Administering Vaccines

- Prepare and administer vaccines in areas separate from pertussis specimen collection because doing so may reduce the opportunity for cross contamination of clinical specimens.
- Take care to avoid contamination of surfaces when preparing and administering vaccines.

Adherence to Basic Infection-control Measures

- Wearing clean gloves immediately before and during specimen collection or vaccine preparation and administration with immediate disposal of gloves after the procedure, and
- Cleaning clinic surfaces using a 10% bleach solution to reduce the amount of nucleic acids in the clinic environment.

The use of liquid transport media likely also contributes to falsely-positive results from contaminant DNA. When using liquid transport media, DNA that is accidentally transferred from hands to the swab shaft can be washed off into the liquid medium which freely circulates around the transport tube; this liquid is later extracted to obtain DNA for PCR testing. Use of a semisolid or non-liquid transport media or transport of a dry swab without media should prevent contaminant DNA on the swab shaft from reaching the part of the specimen that is later extracted. If using liquid transport medium, the swab stick should be handled with care and only above the red line or indentation which marks where the shaft is snapped off after insertion into the medium. Performing NP aspiration rather than swabbing the NP may also prevent contamination from occurring as the aspirate kit (syringe or bulb style) is a closed system at the point of specimen collection.

Recommendations, Understanding and Interpreting PCR Results

PCR assays for pertussis are not standardized across clinical laboratories. Testing methods, DNA targets used, and result interpretation criteria vary, and laboratories do not use the same cutoffs for determining a positive result. With PCR, high cycle threshold (Ct) values indicate low levels of amplified DNA; for pertussis, these values may still indicate infection but can also be the result of specimens contaminated with DNA from the environment at the time of specimen collection. Clinical laboratories might report high Ct values as any of the following: positive, detected, indeterminate, or equivocal. In addition, most clinical laboratories use a single target PCR for IS481, which is present in multiple copies in *B. pertussis* and in lesser quantities in *B. holmesii* and *B. bronchiseptica*. Because this DNA sequence is present in multiple copies, IS481 is especially susceptible to falsely-positive results. Use of multiple targets may improve specificity of PCR assays for pertussis. Clinicians are encouraged to inquire about which PCR target or targets are used by their laboratories. Interpretation of PCR results, especially those with high Ct values, should be done in conjunction with an evaluation of signs and symptoms and available epidemiological information.

For more information:

- For the entire guidance on PCR best practices in diagnosing pertussis, see http://www.cdc.gov/pertussis/clinical/diagnostic-testing/diagnosis-pcr-bestpractices.html
- For distinguishing clinical features of pertussis, see http://www.cdc.gov/pertussis/clinical/features.html.
- For more information on diagnostic testing, see http://www.cdc.gov/pertussis/clinical/diagnostic-testing/index.html.
- CDC's toll-free information line, 800-CDC-INFO (800-232-4636)
 TTY: (888) 232-6348, is available 24 hours a day, every day.

Categories of Health Alert messages:

Health Alert conveys the highest level of importance; warrants immediate action or attention.

Health Advisory provides important information for a specific incident or situation; may not require immediate action.

Health Update provides updated information regarding an incident or situation; unlikely to require immediate action.

HAN InfoService provides general public health information; unlikely to require immediate action.