

Washoe County



Health District

## Washoe County District Board of Health Meeting Minutes December 20, 2012

**PRESENT:** Mr. Matt Smith, Chairman, Commission Jung, Vice Chair, Councilwoman Ratti, Councilwoman Zadra, Dr. Denis Humphreys, and Dr. George Hess

**ABSENT:** Dr. George Furman

**STAFF:**

Joseph P. Iser, District Health Officer  
Eileen Stickney, Administrative Health Services Officer, Administrative Health Services  
Robert Sack, Division Director, Environmental Health Services

Charlene Albee, Branch Enforcement Chief, AQM  
Lori Cooke, Fiscal Compliance Officer, AHS  
Phil Ulibarri, Public Information Officer, AHS  
Stacey Akurosawa, EMS Coordinator, EPHP  
Leslie Admirand, Deputy District Attorney  
Suzanne Dugger, Air Quality Specialist, A  
Peggy F. O'Neill, Recording Secretary

Kevin Dick, Division Director, Air Quality Management  
Steve Kutz, Division Director, Community and Clinical Health Services  
Randall Todd, DrPH, Division Director, Epidemiology and Public Health Preparedness  
Daniel Inouye, Air Quality Supervisor, AQM  
Patsy Buxton, Fiscal Compliance Officer, AHS  
Steve Fisher, Department Computer Application Specialist, AQM  
Peg Caldwell, Registered Nurse I, EPHP  
Bev Bayan, WIC Program Manager, AHS  
Ricardo Cruz, Environmental Health Specialist, EHS

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
1:04 pm 1, 2	<b>Meeting Called to Order, Pledge of Allegiance and Roll Call</b>	Chairman Smith called the meeting to order, followed by the Pledge of Allegiance led by Dr. Hess. Roll call was taken and a quorum noted.	
3.	<b>Public Comment</b>	No public comment was presented.	
4.	<b>Approval/Deletions – Agenda – December 20, 2012</b>	Chairman Smith called for any deletions to the Agenda of the December 20, 2012 DBOH Meeting.	Councilwoman Zadra moved, seconded by Councilwoman Ratti, that the December 20, 2012 Agenda be approved as submitted.  <b><u>MOTION CARRIED</u></b>

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5.	<b>Approval/Deletions – Minutes - Regular Meeting of November 15, 2012</b>	Chairman Smith called for any additions or corrections to the minutes of the November 15, 2012 Regular Meeting.	Dr. Humphreys moved, seconded by Dr. Hess, that the minutes of the November 15, 2012 Regular Meeting be approved as presented.  <b><u>MOTION CARRIED</u></b>
6.	<b>Recognitions</b>	Dr. Iser and Chairman Smith recognized new employee, David Gamble, the promotion of James English, and 20 years of service for Angela Tibaduiza. Michael Ford was recognized for his years of service on the Air Pollution Control Hearing Board, and Graciela Flores was recognized for Essentials of Personal Effectiveness Certification. The retirements of Sally Fry-Woyciehowsky, William Mullen, and Ricardo Cruz were recognized.	
7.	<b>Proclamations</b>	There were no proclamations this month.	
8.	<b>Consent Agenda</b>	<p>Dr. Humphreys and Chairman Smith requested that Agenda Item Nos. 8.D and 8.E., respectively, be pulled from the Consent Agenda for discussion.</p> <p><b>A. <u>Air Quality Management Cases:</u></b></p> <p>1. Unappealed Citations to the Air Pollution Control Hearing Board:</p> <p><b>a. McClelland Laboratories - Case No. 1098, Unappealed Citation No. 5309</b> – Staff reported <b>Citation No. 5309</b>, was issued to <b>McClelland Laboratories</b> on October 8, 2012, for operating a sample preparation facility without a permit to operate, which is a major violation of Section 030.030 of the Washoe County DBOH Regulations Governing Air Quality Management. Staff recommends the citation be <b>upheld</b> and a fine in the amount of <b>\$5,000.00</b> be levied as a <b>negotiated fine</b>.</p> <p><b>b. Seven Eleven Inc. Store #16235 - Case No. 1100, Unappealed Citation No. 5311</b> – Staff reported <b>Citation No. 5311</b>, was issued to <b>Seven Eleven Inc. Store #16235</b> on October 9, 2012, for failure to maintain gasoline dispensing equipment in good working condition, which is a major violation of Section 030.2175 of the Washoe County DBOH Regulations Governing Air Quality</p>	

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		<p>Management. Staff recommends the citation be <b>upheld</b> and a fine in the amount of <b>\$500.00</b> be levied as a <b>negotiated fine</b>.</p> <p>c. <b>Maverick Inc. - Case No. 1102, Unappealed Citation No. 5314</b> – Staff reported <b>Citation No. 5314</b>, was issued to <b>Maverick Inc.</b> on October 23, 2012, for failure to conduct the required testing within 30 days of the opening of a gasoline dispensing facility in accordance with the conditions of the Authority to Construct. Failure to comply with the conditions of the Authority to Construct, which is a major violation of Section 030.2175 of the Washoe County DBOH Regulations Governing Air Quality Management. Staff recommends the citation be <b>upheld</b> and a fine in the amount of <b>\$500.00</b> be levied as a <b>negotiated fine</b>.</p> <p>d. <b>Quick Stop Market #160 – Case No. 1103, Unappealed Citation No. 5313</b> – Staff reported <b>Citation No. 5313</b>, was issued to <b>Quick Stop Market #160</b> on October 23, 2012, for failure to maintain gasoline dispensing equipment in good working condition, which is a major violation of Section 030.2175 of the Washoe County DBOH Regulations Governing Air Quality Management. Staff recommends the citation be <b>upheld</b> and a fine in the amount of <b>\$500.00</b> be levied as a <b>negotiated fine</b>.</p> <p>e. <b>Quick Stop Market #160 – Case No. 1103, Unappealed Citation No. 5313</b> – Staff reported <b>Citation No. 5313</b>, was issued to <b>Quick Stop Market #160</b> on October 23, 2012, for failure to maintain gasoline dispensing equipment in good working condition, which is a major violation of Section 030.2175 of the Washoe County DBOH Regulations Governing Air Quality Management. Staff recommends the citation be <b>upheld</b> and a fine in the amount of <b>\$500.00</b> be levied as a <b>negotiated fine</b>.</p> <p>f. <b>Guardian Environmental – Case No. 1104, Unappealed Citation No. 5261</b> – Staff reported <b>Citation No. 5261</b>, was issued to <b>Guardian Environmental</b> on November 7, 2012, for failure to maintain negative air in a containment area during an asbestos abatement project, which is a major violation of Section 030.107(B) of the Washoe County DBOH Regulations Governing Air Quality Management. Staff recommends the citation be <b>upheld</b> and a fine in the amount of <b>\$2,500.00</b> be levied as a <b>negotiated fine</b>.</p>	

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		<p>2. Recommendation to Uphold Citation Appealed to the Air Pollution Control Hearing Board: None.</p> <p>3. Recommendation for Variance: None.</p> <p><b>B. <u>Sewage, Wastewater &amp; Sanitation Cases:</u></b> None.</p> <p><b>C. <u>Budget Amendments / Interlocal Agreements:</u></b></p> <p>1. The Board was advised Staff recommends Approval of Amendment #1 to Agreement between the Washoe County Health District and Nevada Public Health Foundation in the total amount of \$70,020 for the period June 13, 2012 through June 30, 2013 for the District Board of Health and District Health Officer support services; and if approved, authorize the Chairman to execute.</p> <p>2. The Board was advised Staff recommends Ratification of Cooperative Agreement for Services to the Kid's to Senior's Korner Programs in the total amount of \$50,000 (\$0 for Washoe County Health District). The Cooperative Agreement for Services to the Kid's to Senior's Korner Program is a multi-agency agreement between the City of Reno Police Department, Catholic Charities of Northern Nevada, Washoe County Sheriff's Office, Washoe County Department of Senior Services, for the period upon approval with automatic annual renewal unless terminated or changed in accordance with the terms of the agreement, and, if approved, authorize the Chairman to execute the Cooperative Agreement.</p> <p>3. The Board was advised Staff recommends approval of amendments totaling an increase of \$29,752 in both revenue and expense to the FY13 Centers for Disease Control and Prevention (CDC) Public Health Preparedness (2011 Carry forward) Grant Program, IO 11072.</p> <p>4. The Board was advised Staff recommends Approval of amendments totaling an increase in \$11,501 in both revenue and expense to the FY13 Assistant Secretary for Preparedness and Response (ASPR) (2011 Carry forward) Grant Program, IO 11071.</p> <p>5. The Board was advised Staff recommends ratification of Interlocal Agreement between the Washoe County Health District (WCHD) and the Board of Regents of the Nevada System of Higher Education on</p>	<p><b><u>ACTION ITEMS:</u></b> (1) Agenda Item Nos. 8.D. and 8.E. were pulled from the Consent Agenda for discussion; and (2) Letters to McClelland Laboratories; Seven Eleven Inc. Store #16235; Maverik Inc. Store #443; Quick Stop Market #160; and Guardian Environmental Inc., regarding fines and due dates.</p>



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		<p>Dr. Iser reported that the point of the policy is to acknowledge what we are doing. Ms. Buxton reported that is also affords us leverage with the state to actually have a policy that we are following.</p> <p>E. <u>Chairman recommends approval of Letter from Chairman Smith to REMSA regarding Franchise Agreement Renegotiations.</u></p> <p><u>Discussion on Agenda Item No. 8.E:</u></p> <p>Chairman Smith informed the Board that he did in fact delivery the letter to REMSA, and he received a call from Patrick Smith earlier today informing Chairman Smith that the letter will be considered at REMSA's next board meeting, and they will respond within the requested time period.</p>	<p>Chairman Smith moved, seconded by Councilwoman Ratti, that Agenda Item No. 8.E. be approved as presented.</p> <p><b><u>MOTION CARRIED</u></b></p>
9.	<p><b>Air Pollution Control Hearing Board Cases Appealed to the District Board of Health.</b></p>	<p>Charlene Albee, Enforcement Branch Chief, reported that <b>Reno Rock Transport</b> - Case No. 1092, Citation No. 5255, was heard before the Air Pollution Control Hearing Board on October 2, 2012. Ms. Albee reported that this case has arisen after a long period of complaints dating back to 2008. AQM has received many complaints about this location, but has never been able to document the complaints. On the date in question, AQ Specialist Dugger observed fugitive dust being generated by the material handling activities and vehicle traffic importing and exporting material from Reno Rock Transport, and a citation was issued.</p> <p>John Springgate, counsel for Reno Rock Transport, stated that he was unable to attend the Air Pollution Control Hearing Board, but did receive a transcript two days ago and has now reviewed that transcript. Mr. Springgate stated that he has a couple of points of note. Mr. Springgate stated that these have been a string of complaints from the same neighbor since 2008. Reno Rock Transport took over the facility in 2010. This is the only complaint that has been documented. AQM was not able to videotape the event but was able to view the event. Mr. Springgate stated that the record shows that the majority of the dust that Staff was able to view was being created by trucks coming in and out of the facility. Mr. Archie was not present when Staff arrived and the mitigation measures were down that day. It would appear that additional mitigation measures are necessary over the ingress/egress road since that is where Staff witnessed the majority of the fugitive dust. At the APCHB, Staff acknowledged that there seemed to be a great deal of confusion about the how the fine should have been resolved. Aerial photos of the site were presented. Testimony about asphalt mitigation was given.</p>	

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	<p><b>Board Comment</b></p>	<p>Mr. Gary Archie, owner of Reno Rock Transport stated that at the time this complaint was lodged and AQ Specialist Dugger arrived on the site, the sprinkler mediation system was inoperable. Reno Rock Transport had it operable again by 4:00 pm. Mr. Archie presented water bills to evidence the amount of water to mitigate the dust issues.</p> <p>Mr. Springgate stated that this is a single, isolated, verified complaint, and they would request a reduction in the fine from \$1,000 to \$250.</p> <p>Chairman Smith asked Mr. Archie what his relationship is to Kyle and Paul Archie, and whether they worked for Reno Rock and Mr. Archie explained that they are his sons, and further stated that Paul Archie worked for Reno Rock Inc., not Reno Rock Transport. Councilwoman Zadra asked how many citations had been issued to the property prior to Mr. Archie's ownership, and Ms. Albee stated that no citations have been issued at the site. The installation of the sprinklers at the site has mitigated the dust issues. Councilwoman Zadra asked if there were attempts to negotiate a lesser fine prior to the APCHB, and Ms. Albee stated that the normal process had been followed, and Mr. Archie was offered a \$250 fine, but he never accepted nor paid the fine, and that is why it went before the APCHB.</p> <p>Councilwoman Ratti asked for clarification that the APCHB had upheld the fine and if the DBOH would be seeing or hearing new evidence today, and Mr. Springgate stated the water bills evidencing the amount of water being used to mitigate the dust and the photos of the site which show the ingress and egress where the majority of the dust occurs. Councilwoman Ratti asked why Mr. Archie did not accept the initial \$250 negotiated settlement, and Mr. Archie explained that he did not understand that he had to pay the fine right then and there.</p> <p>Commissioner Jung asked to see a copy of the Memorandum of Understanding, which was not included in her packet, and Ms. Albee produced a copy from the file. Commissioner Jung stated that the Memorandum of Understanding does not ask the person receiving to sign and return with payment. There appear to be no instructions. This seems to be an issue with communication. Ms. Albee explained that the instructions were given verbally, and Mr. Archie was notified that he should sign the instrument and return it, and then the process would go directly before the DBOH as a negotiated settlement. Following the DBOH meeting, a letter and invoice would be issued for the negotiated settlement. Instead, Mr. Archie never returned the MOU, and therefore, the case came before the APCHB, who in turn issued a \$1,000, which Mr. Archie is appealing</p>	

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		<p>today. Councilwoman Ratti stated that many of the issues being discussed today are irrelevant. The issue is that on this particular day, at this particular time, there was fugitive dust, and therefore, a fine is warranted.</p> <p>Dr. Iser addressed the health implications from fugitive dust and the reasons that Air Quality Management is part of the Health District. Dr. Iser thanked Mr. Archie for his mitigation efforts to date and his continued efforts in mitigating the dust at his place of business.</p>	<p>Councilwoman Ratti moved, seconded by Dr. Hess, that the fine amount for the Citation issued to Reno Rock Transport be reduced to \$250.00.</p> <p><b><u>MOTION CARRIED</u></b></p>
10.	<p><b><u>PUBLIC HEARING:</u></b> <b>Presentation and possible adoption of an amendment to the Washoe County District Board of Health Regulations Governing Air Quality Management for an exemption for the Phase II vapor recovery requirements for gasoline dispensing facilities that can demonstrate at least 95% of the fleet vehicles serviced are equipped with Onboard Refueling Vapor Recovery (ORVR).</b></p>	<p>Ms. Albee recommended to the District Board of Health that they approve a change in regulations to adopt an exemption from the Phase II Vapor Recovery requirements as presented the for gasoline dispensing facilities that can demonstrate at least 95% of the fleet vehicles serviced are equipped with Onboard Refueling Vapor Recovery (ORVR).</p> <p>Ms. Albee reported that on February 21, 2012, the DBOH approved a petition for variance from the Phase II vapor recovery requirements submitted by The Hertz Corporation based on the same EPA guidance. As part of the recommendation of approval, Air Quality Staff recognized the exemption from Phase II Vapor Recovery Requirements may be applicable to other gasoline dispensing facilities located in Washoe County. Therefore, in addition to recommending the approval of the variance, Staff committed to drafting a proposed regulation to be included in Section 040.083(C)(4), Phase II Exemptions, for fleets that are able to demonstrate the widespread availability of ORVR. Staff proposed to have the new regulation adopted within the next 12 months. This proposed amendment for consideration by the District Board of Health satisfies that commitment.</p> <p>Staff believes that the proposed regulation will not impose any changes or new requirements on existing Washoe County business facilities subject to this regulation. There are currently thirty-three (33) facilities in Washoe County that are eligible to take advantage of the proposed exemption. It is anticipated to be a considerable cost saving measure to those entities.</p> <p>Chairman Smith opened the Public Hearing and asked for public comment. Mr. Peter Kruger commented that he represents the Nevada Petroleum Marketers &amp; Convenience Store Association, a trade association that represents fuel retailers and wholesalers in the state. Mr. Kruger stated that the Association is in support of the proposed regulation and believe it is a step in the right direction; however, the Association would encourage eventual elimination of the Phase II stage recovery systems.</p>	<p>Commissioner Jung moved, seconded by Councilwoman Zadra, to adopt the amendment to the Washoe County District Board of Health Regulations Governing Air Quality Management for an exemption for the Phase II vapor recovery requirements for gasoline dispensing facilities that can demonstrate at least 95% of the fleet vehicles serviced are equipped with Onboard Refueling Vapor Recovery.</p> <p><b><u>MOTION CARRIED</u></b></p>



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11.	<p><b><u>Regional Emergency Medical Services Authority:</u></b></p> <p>A. Review and Acceptance of the Operations and Financial Report for October, 2012; and</p> <p>B. Update of REMSA's Community Activities Since October, 2012</p>	<p>Mr. Jim Gubbels, Vice President of REMSA, reported that the DBOH members have been provided with a copy of the October 2012 Operations and Financial Report; overall emergency response times for Priority One compliance was at 92%; in the 8-minute zone, it was 92%; for the 15-minute zone, it was 98%; for the 20-minute zone it was 94%. For Priority Two compliance it was 97%. Advised the overall average bill for air ambulance service to date is \$7,764, and overall average bill for ground ambulance services to date is \$1,024.</p> <p>Mr. Gubbels presented REMSA's community service activities since October, 2012.</p> <p>Mr. Gubbels stated that there has been much discussion here about a virtual CAD system. REMSA, at the direction of its Board of Directors, has installed a CAD portal in its Dispatch Center. It is not CAD to CAD, which is the direction we want to go. True CAD to CAD will take revisions on both the Reno and Sparks Systems, which are both near end of life. This is an interim step to allow passing of information on the patient's chief complaints over to Dispatch Center. We have worked with the Dispatch Steering Committee which both Mr. Gubbels and Dr. Iser sit on. It is a starting point to begin sharing information so that the Dispatch Centers have more information on the patient. It is automatic. It comes down from our CAD. As soon as it gets that chief complaint, it forwards that information to the appropriate Dispatch Center to ensure the appropriate assets roll. It forwards the patient's age, sex, chief complaint, whether awake, alert, etc. At this point, the Dispatch Centers are reviewing the presentations made of the CAD system, and the Dispatch Steering Committee has committed to me that in their meeting on January 25, they will notify us of their willingness to try this system on trial basis. Right now we have to pick up a phone for Reno or a paging system in Sparks. We would really like to get this working on at least a trial basis.</p> <p>In order for CADs to speak to each other, there has to be a software interface. Tiburon is at its end of life, and it doesn't make sense to invest more dollars with it near end of life. It will be a significant investment to upgrade. They can request in the RFP that it must be compatible with our system.</p> <p>Dr. Iser reported that at the last BCC meeting, Chairman Larkin expressed deep concern at all of the efforts made by the Board of County Commissioners with ECOMM and Dispatch, and he was interested in furthering this development as</p>	

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		<p>quickly as he can. Ms. Simon stated that they cannot get data out of Tiburon yet. There has to be the CAD to CAD linkage at Sparks and Reno to do that dual linkage. There is a misunderstanding that this linkage that Mr. Gubbels is speaking about only brings information from the Dispatch Centers to REMSA. The opposite is actually true. REMSA's information is being transferred to the Dispatch Center, not the other way around. ECOMNN Dr. Iser stated that he has heard \$850,000 investment to upgrade the Tiburon system.</p> <p>Eric Millette, Sparks Fire Department, stated that the actual numbers are still variable, but \$850,000 was the number that was floated around. Further evaluation is needed to determine what is needed for Reno ECOMM. That is also being reviewed from the Sparks Dispatch side. There are various hardware and software options that need to be evaluated to truly come up with the figures. In this economic climate, financial priorities need to be placed on those two items.</p> <p>Dr. Iser stated that an eventual CAD to CAD system would allow us to extract the data that would allow us to track a patient from entering the system to exit from the hospital. We want to be able to tell what happened to the patient.</p> <p>Mr. Millette stated that ideally we will be able to track from the moment the 911 call comes in, with open communications and dialogue with all entities responding to get the right resources to patient and get them from the field to the definitive medical care as quickly as possible, working with Fire, police agencies, and REMSA to accomplish that. The fact that REMSA is offering this service, even that is complicated. There are many issues just on the Dispatch side, not only technology, but from a personnel perspective also. Additional work will be required to transfer that information. We are working with REMSA to see how we can make that work. It will be a long process to get our Dispatch system more up to date.</p> <p>Dr. Iser reported that Mr. Gubbels would be happy to demonstrate this CAD portal to any of the Board members if they are interested in seeing it.</p> <p>Dr. Humphreys asked if the CAD to CAD will allow more autonomous communication.</p> <p>Mr. Gubbels stated that at present, there is a lot of duplication and a mechanical process. The PSAPs (Tiburon) are different from the medical applications (TriTech). They are looking to capture different data, but Tiburon and TriTech have been merged before. It was done 15 years ago in Ft. Worth, but you don't do it with antiquated equipment that needs to be replaced. This is a great</p>	

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		<p>opportunity to do this portal and see how it works, and then once we change those CADs and the major PSAPs and request to do a merger, we can stop this duplication.</p> <p>Councilwoman Ratti stated that it seems it is an interesting opportunity, but the challenges are great. It's not just a portal; it is a whole process improvement. So the question becomes whether it is feasible to do this portal process, or does it make more sense to really push forward with where do we get the money and implement the whole process improvement, especially when you take into account the personnel aspect.</p> <p>Mr. Gubbels stated that REMSA is very appreciative of the time and effort that have been put into the portal review to this point.</p>	<p>Councilwoman Ratti moved, seconded by Dr. Humphreys, to accept the REMSA Operations and Financial Report for October, 2012, as presented.</p> <p><b><u>MOTION CARRIED</u></b></p>
12.	<p><b>Discussion and Possible Direction to Staff Regarding Emergency Medical Services ("EMS"), Including Recommendations Contained in the TriData Report and Various Other EMS Studies.</b></p>	<p>Dr. Iser presented the EMS timeline up to the October 18 concurrent meeting of the BCC, Reno City Council, and the DBOH, and then stated that EMS agendized, among other issues, resulting in three key points related to EMS in Washoe County:</p> <ul style="list-style-type: none"> <li>• "Fix Dispatch" (many TriData recommendations related to Dispatch);</li> <li>• Open the REMSA Franchise Agreement and invite REMSA to participate; County and both City Managers to participate in the franchise negotiation; and</li> <li>• Develop an EMS Agency that has authority and oversight in Reno, Sparks, and Washoe County.</li> </ul> <p>Reno City Council approved a motion to discuss and possibly direct staff on three areas above. Washoe County Commission approved the same EMS agendized, among other issues, resulting in three key points related to EMS in Washoe County.</p> <p>At its meeting on October 25, 2012, the DBOH directed Health District staff to begin work on taking the lead on reviewing and implementing the appropriate recommendations from the recent stakeholder task force and working with our partners at the Cities and County to bring forth recommendations back to the DBOH. (Note: there are 38 TriData recommendations).</p> <p><b>November 7, 2012 (Reno City Council):</b> Follow up to approved motion at the concurrent meeting October 18. Directed staff to work on implementation of appropriate TriData recommendations where the City has authority for</p>	

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		<p>implementation and to work with Health District in implementation of those recommendations.</p> <p><b>November 19, 2012 (Managers' Meeting):</b> Washoe County Manager, Reno City Manager, Sparks City Manager, and DHO met to discuss the next steps in the EMS review process, including the three key points outlined at the October 18, 2012 meeting.</p> <p><b>December 6, 2012 (DBOH):</b> Update DBOH on recent meetings. Chairman Smith to forward letter penned by Andrew Clinger to REMSA.</p> <p><b>December 10, 2012 (Sparks City Council):</b> First hearing by Sparks City Council introduced by Chief Flock and presentation by Dr. Iser, District Health Officer. Approved motion to direct staff to work with the Health District Staff and our partners at the cities and county on reviewing and implementing the appropriate recommendations from the recent stakeholders task force and TriData Study.</p> <p><b>December 11, 2012 (BCC):</b> Discussion that reported Chairman Smith delivered the letter to REMSA; reported a meeting scheduled for January with fire chiefs to talk about franchise recommendations; noted that the county's Tiburon system does not allow data recovery; Ms Simon said that the REMSA CAD proposal would only allow information to flow from the PSAP to REMSA. This is where Chairman Larkin expresses his concern about Tiburon's inability to transfer data.</p> <p>Dr. Iser stated that subsequent to December 11, 2012 BCC meeting, he met with outgoing Chairman Larkin, Ms. Simon, Mr. Clinger, Mr. Carey, and Mr. Slaughter. Another concurrent meeting for February 11 was discussed, and the sole agenda item would be EMS. It would start at 8:30 am. Dr. Cohen will present at this concurrent meeting. The goal is to inform the new members about the report and bring everyone as up to date as possible. Other invitees would be the Sheriff and Chief Brown.</p> <p>Quarterly concurrent meetings are part of the regular business process, so there will be another concurrent meeting not including the one on February 11. Dr. Iser stated that he believes, as does Dr. Cohen, the oversight agency is the primary concern for EMS in our region.</p> <p>Dr. Iser will attend the REMSA meeting tomorrow and will update Chairman Smith and the Board as necessary.</p>	<p>Dr. Hess moved, seconded by Councilwoman Zadra, to accept Dr. Iser's EMS report, as presented.</p> <p><b><u>MOTION CARRIED</u></b></p>

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13.	<b>Presentation, Discussion, and Possible Direction to Staff Regarding Health in All Policies ("HiAP")</b>	<p>Dr. Iser stated that historically, our most important improvements in public health have been due to policy changes, such as smoking bans or restrictions on tobacco; helmet laws for cycles and skiers, and seatbelt laws for accident prevention; immunization requirements, sanitation improvements for disease prevention. Even now, the biggest impacts we can make are in the area of policy. There are ways to improve health outcomes: Health in All Policies ("HiAP") are effective.</p> <p><u>How do HiAPs work?</u></p> <ul style="list-style-type: none"> <li>▶ Level 1—Reducing disease burden (locating schools away from freeways or other sources of pollution)</li> <li>▶ Level 2—Reducing risk factors for disease (smoking bans, retail tobacco licensing to reduce opportunities for smoking)</li> <li>▶ Level 3—Focus on underlying disease determinants (create a healthier built environment by incorporating health into land use decisions)</li> </ul> <p><u>Recommendations:</u></p> <ul style="list-style-type: none"> <li>▶ <u>Promote Healthy Communities</u> - Active Transportation; Housing &amp; Indoor Spaces; Parks, Urban Greening and Places to be Active; Violence Prevention; Healthy Food <ul style="list-style-type: none"> <li>❖ Data <ul style="list-style-type: none"> <li>○ Map transit to essential destinations</li> <li>○ Assess health impacts active transportation</li> </ul> </li> <li>❖ Complete Streets <ul style="list-style-type: none"> <li>○ Training for road designers, planners, operations</li> </ul> </li> <li>❖ Safety of all users <ul style="list-style-type: none"> <li>○ Amend Vehicle Code to allow localities to lower speed limits</li> <li>○ Possible lower highway speed limits</li> </ul> </li> <li>❖ Trails and greenways <ul style="list-style-type: none"> <li>○ Bike trails, walking trails</li> <li>○ Bicycle lanes</li> </ul> </li> </ul> </li> <li>▶ <u>Promote Healthy Public Policy</u> - State Guidance; Embedding Health in Decision-Making; Data &amp; Research; Collaboration &amp; Community Engagement</li> <li>▶ <u>Each recommendation - Links to health</u> <ul style="list-style-type: none"> <li>❖ Policies related to policy goals influence environments in which people live, work, and play</li> <li>❖ Environments influence adoption of behaviors that promote or diminish health</li> <li>❖ Health linked to productivity, healthy economy</li> </ul> </li> </ul>	<p>Councilwoman Zadra left the meeting at 2:45 pm.</p>

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	<p><b>Board Comment</b></p>	<p>Dr. Iser stated that agencies should collaborate with each other to ensure that health is considered when policies are developed.</p> <p>Councilwoman Ratti stated that while she certainly is supportive of a HiAP approach, rather than it just being proclaimed, how we move it beyond theory and into action.</p> <p>Dr. Iser stated that what he would like to see is a motion from the city councils and the county commission directing their staffs to make sure that they start incorporate HiAPs in their decision making. He asked that we consider what the health implications of policy decisions are, and then when they come back to their Boards with a recommendation. The consideration again should be what are the health implications of this, and then hold staff to task for its implementation. Where this has worked is where not only has a governor made this proclamation, but the legislature starts to act on it. We can work with you and staff to see what the implications are.</p> <p>Councilwoman Ratti stated that a primary concern is resourcing it properly when department heads do not have a health background from which to evaluate the policy. Coming to those presentations with a few specific ideas about priorities would be very helpful, as well as acknowledging where this type analysis is already being done, such as with RTC and staff. A presentation on just the policy may not be as well received as a presentation that shows where we are doing a good job and where we need to grow, and what resources the Health District can provide to help get there, we might be able to move it forward more readily.</p> <p>Dr. Iser stated that we have worked closely with RTC, and they have made tremendous strides in this arena. Kevin Dick reported that RTC and NDOT are very progressive in their thinking and are pursuing a "Zero Fatality" goal with their roadway designs, it is worthwhile to be able to point the agencies to resources and toolboxes.</p>	<p>Dr. Humphreys moved, seconded by Chairman Smith, to endorse the HiAP initiative, as presented.</p> <p><b><u>MOTION CARRIED</u></b></p>
<p>14.</p>	<p><b>Discussion and Possible Appointment of a Legislative Subcommittee to Meet as Needed during the 2013 Nevada Legislature to Provide Direction to Staff on Pending Legislative</b></p>	<p>Chairman Smith began the discussion by questioning if there is truly a need for a subcommittee or whether the Board should simply rely on a report from the District Health Officer.</p> <p>Dr. Humphreys stated that he is not sure what the purpose would be to form a subcommittee of the Board at this time. Dr. Iser stated that from his perspective he is not sure that it would be helpful, as long as Staff is keeping the DBOH fully informed on the issues at hand. If two Board members are willing to come down and work with us and help us keep the Board informed, that might be helpful.</p>	<p>Dr. Humphreys moved, seconded by Dr. Hess, to endorse the legislative agenda as presented by staff.</p> <p><b><u>MOTION CARRIED</u></b></p>

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
	<p><b>Matters Related to Public Health</b></p>	<p>Staff will go down and participate with the legislature. That is our job on your behalf. Dr. Todd, Mr. Sack, and Mr. Dick all go down and interact on the issues that are pertinent to the Health District, so what we would like is for you to endorse the preliminary list that has been developed by the Health District or identified by the Manager's Office for our tracking and input.</p> <p>Dr. Iser stated that John Slaughter is the County's legislative coordinator, and Dr. Iser will keep Mr. Slaughter informed of our activities. Commissioner Jung stated that the County also has an outside lobbyist who should be kept informed, and Councilwoman Ratti stated that both Reno and Sparks's representatives should be kept informed also.</p> <p>Dr. Iser stated that he will contact the City and County Managers' offices to develop a distribution list for informing the partners of when Staff will be at the Legislature.</p>	<p><b>ACTION ITEM:</b> Dr. Iser will contact the City and County Managers' offices to develop a distribution list for informing the partners of when Staff will be at the Legislature.</p>
15.	<p><b>Presentation, Discussion, and Possible Direction to Staff Regarding Acceptance and Implementation of the Washoe County Health District Strategic Plan</b></p>	<p>Dr. Iser directed the Board to the Health District Strategic Plan and Metrics which were contained in their packets. Each division has also developed metrics for their strategic plans. Dr. Iser proposes that each division present their strategic plan and metrics to the Board at separate meetings over the next several months.</p> <p>Dr. Iser stated that what he had hoped to have by this time is the Health Status Report, from which we will develop an Improvement Plan. The Improvement Plan will inform our Strategic Plan going forward. Dr. Iser plans to present the outcomes to the metrics at next year's Strategic Retreat.</p> <p>Dr. Hess stated that an article in the RGJ today stated that Nevada is second to the lowest in immunization rates and emergency management. Dr. Hess questioned Washoe County's immunization rates for Pertussis in 2-6 year olds, and Mr. Kutz responded that the exact two year old rates for the state are done through the National Immunization Survey, so I can get you numbers for Washoe County, but that is based on the statewide registry. It is a bit comparing apples and oranges, and we typically rate higher than the state. The State Immunization Program met with our Staff today, and they can do a data analysis and scrubbing and cleaning of the data, and anecdotally it was stated that our two year old immunization rate was 80%.</p> <p>Dr. Hess stated that Strategy 3 under Goal 1 for the Health District is "Demonstrate value using cost-benefit and health outcome analyses." It appears to Dr. Hess that part of that would be educating our citizens. Dr. Hess stated that Air Quality does a great job at this in the news and the newspaper. Dr. Hess</p>	

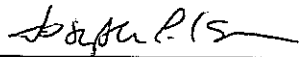
TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
		<p>suggested some type of Red, Yellow, Green code would be a good tool to use for immunizations also. Then under Emergency Management, Dr. Hess stated that our strategy is pretty confined. It doesn't really address what we are on our way to doing. Dr. Iser stated that until the decision is made on where the authority will lie, he is hesitant to make EMS authority a goal for the Health District.</p> <p>Dr. Todd reported that yesterday he spoke to several media outlets on this very report. Dr. Todd stated that the report is limited to Pertussis in 18 – 36 month olds. A couple of years ago, the State of Nevada did require a second dose of Pertussis for entry into school. At times the proof of this is not in attainment of certain levels of immunization, but rather are you having outbreaks. For example, California scored higher than Nevada as a state, but they had huge outbreaks of Pertussis, where Nevada has not. Dr. Todd believes the reasons for that are two-fold. One because our rates are good, and two, because that second dose is very effective.</p> <p>Dr. Todd stated that when he reviews reports like this, he determines how Washoe County would have scored if ranked as a state. There were areas where we've made improvements, but not early enough to be considered in this report. We are somewhat constrained by the target capabilities handed down by the CDC.</p> <p>Dr. Hess stated that it appears that we are usually performing better than Clark County, but we do not seem to perform as well as some other states. Dr. Iser agreed that that part is true, and CDC funding has gone down in disaster preparedness and the ASPR grant has gone down to, and this report does a good job in stating that we will not be able to maintain these capabilities as funding goes down. In the Emergency Management program, had SNHD not been sharing funds we would have had more significant cuts.</p> <p>Councilwoman Ratti stated that the Strategic Plans presented today are a vast improvement over what has been presented in the past and she realizes it took a lot of effort on the part of Staff to develop these plans. What the plans seem to lack to her are prioritization. You need that Health Assessment to be able to determine what our true needs are so that we can shift focus on to those areas, which will also be helpful when we get to budget and trying to make those tough budget decisions.</p> <p>Dr. Iser stated that strategic plans are living plans and fluid, and if something become important enough, the plan can be adjusted mid-year.</p>	<p>Commissioner Jung left the meeting at 3:03 pm.</p> <p>Councilwoman Ratti moved, seconded by Dr. Humphreys, to accept the report.</p> <p><b><u>MOTION CARRIED</u></b></p>



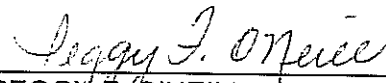
TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
16.	<b>Review and Acceptance of the Monthly Public Health Fund Revenue and Expenditure Report for November, 2012</b>	Eileen Stickney, Administrative Health Services Officer, presented the Monthly Public Health Fund Revenue and Expenditure Report for November 2012, stating that Staff recommends the Board accept the report. Monthly Staff reports to you on the drivers of variances in the budget line items.	Dr. Humphreys moved; seconded by Dr. Hess, to accept the Health Fund Revenue and Expenditure Report for November 2012.  <b><u>MOTION CARRIED</u></b>
17.	<b>Presentation, Discussion, and Possible Direction to Staff Regarding FY 14 Health Fund Budget</b>	Dr. Iser addressed the Board regarding questions on the Strategic Plan budget presentation and suggested that he could present on more detail the plan to close the budget gap. The Board responded that it was not necessary to make such a presentation.	
18.	<b>Election of District Board of Health Chairman for 2013 – 2014</b>	<b>Continued to January 24, 2013 regular meeting.</b>	
19.	<b>Election of District Board of Health Vice Chair for 2013 – 2014</b>	<b>Continued to January 24, 2013 regular meeting.</b>	
20.	<b><u>Staff Reports and Program Updates</u></b>  A. <u>Director – Epidemiology and Public Health Preparedness</u>	Dr. Randall Todd, Director, Epidemiology and Public Health Preparedness, presented his monthly Division Director's Report, a copy of which was placed on file for the record.  Dr. Todd corrected that there is only a 17.8% attack rate of influenza life illness in one school in Washoe County rather than the 40% which was stated in his written report.	
	B. <u>Director – Community and Clinical Health Services</u>	Mr. Steve Kutz, Director, Community and Clinical Health Services, presented his monthly Division Director's Report, a copy of which was placed on file for the record.	

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
	C. <u>Director – Environmental Health Services</u>	Mr. Robert Sack, Director, Environmental Health Services, presented his monthly Division Director's Report, a copy of which was placed on file for the record.	
	D. <u>Director – Air Quality Management</u>	<p>Mr. Kevin Dick, Division Director, Air Quality Management, presented the monthly Division Director's Report, a copy of which was placed on file for the record.</p> <p>Mr. Dick reported that last month Staff presented the Periodic Emissions Inventory, and Dr. Hess suggested that in the future Staff should present an executive summary for those type reports. Staff has prepared such a summary for the Periodic Emissions Inventory, and it was placed at your seats and on file for the record.</p>	
	E. <u>Administrative Health Services Officer</u>	The Administrative Health Services Officer's Reports for this month were addressed in other agenda items.	
	F. <u>District Health Officer</u>	<p>Dr. Iser, District Health Officer, presented the monthly District Health Officer Report, a copy of which was placed on file for the record.</p> <p>Dr. Iser reported that attached to his report are copies of letters of thanks from the recipients of the Board of Health Scholarship for the Health Sciences program at UNR.</p> <p>Dr. Iser stated that he will begin work on the Northern Nevada Shared Services Learning Community by meeting with the county partners the last week ,</p>	
17.	<b>Board Comment</b>	<p>Chairman Smith stated that Dr. Furman has requested that Home Visiting be placed on the agenda for the Board's next meeting, and Dr. Iser asked if reporting on statistics and cost accounting would meet Dr. Furman's request, and Chairman Smith acknowledged that it would.</p> <p>Dr. Iser asked that the Board consider a sub-committee to examine the future and sustainability of the Health District, and requested that it be agendized for the January meeting. Dr. Iser would hope for two Board members to be on that sub-committee.</p> <p>Dr. Hess asked if we would be discussing the Health Assessment next month, and Dr. Iser responded that it is his understanding that it is to be completed by</p>	

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
		January 15. We will place the Health Assessment on the agenda as soon as it is available.	
18.	<b>Public Comment</b>	No public comment was presented.	
19.	<b>Motion to Adjourn</b>	There being no further business to come before the Board, the meeting was adjourned.	<p>Dr. Hess, moved, seconded by Dr. Humphreys, that the meeting be adjourned.</p> <p><b><u>MOTION CARRIED</u></b> The meeting was adjourned at 3:30 p.m.</p>



JOSEPH P. ISER, MD, DrPH, MSc  
DISTRICT HEALTH OFFICER



PEGGY F. O'NEILL,  
RECORDING SECRETARY