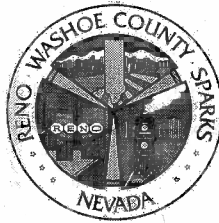


Washoe County



MATT SMITH, Chairman
KITTY JUNG, Vice Chairman
GEORGE FURMAN, MD
SHARON ZADRA

GEORGE HESS, MD
DENIS HUMPHREYS, OD
JULIA RATTI
JOSEPH P. ISER, MD, DrPH, MSc
District Health Officer

Health District

WASHOE COUNTY HEALTH DISTRICT

1001 East Ninth Street / P.O. Box 11130

Reno, Nevada 89520

Telephone 775.328-2400 • Fax 775.328.2279

www.washoecounty.us/health

MEETING NOTICE AND AGENDA

Washoe County District Board of Health

Date and Time of Meeting: Thursday, January 24, 2013, 1:00 p.m.

Place of Meeting: Washoe County Health District
1001 East Ninth Street, Building B
South Auditorium
Reno, Nevada 89520

District Board of Health Meeting Agenda

All items numbered or lettered below are hereby designated for possible action as if the words "for possible action" were written next to each item (NRS 241.020). An item listed with asterisk (*) next to it is an item for which no action will be taken.

Time	Agenda Item No.	Agenda Item	Presenter
1:00 PM	*1.	Call to Order, Pledge of Allegiance Led by Invitation	Mr. Smith
	*2.	Roll Call	Ms. O'Neill
Public Comment	*3.	Public Comment (limited to three (3) minutes per person)	Mr. Smith
	4.	Approval/Deletions to Agenda for the January 24, 2013 Meeting	Mr. Smith
	5.	Approval/Additions/Deletions to the Minutes of the December 6, 2012 Strategic Planning Retreat and December 20, 2012 Regular Meeting	Mr. Smith

Time	Agenda Item No.	Agenda Item	Presenter
	*6.	Recognitions A. Introduction of new employee(s) – None. B. Promotions – None. C. Years of Service – None. D. Recognitions – CARES/SART Partner Recognition of the WCHD Sexual Health Program Partnership E. Retirements – None.	Mr. Smith and Dr. Iser
	7.	Election of District Board of Health Chair for 2013 – 2014 Term	Mr. Smith
	8.	Election of District Board of Health Vice Chair for 2013 – 2014 Term	Mr. Smith
	9.	<p><u>Consent Agenda:</u> Matters which the District Board of Health may consider in one motion. Any exceptions to the Consent Agenda must be stated prior to approval.</p> <p>A. <u>Air Quality Management Cases:</u></p> <p>1. Recommendation to Uphold Unappealed Citations to the Air Pollution Control Hearing Board:</p> <p>a. Mustang Market – Case 1105, NOV 5317 12155 East I-80, Sparks NV 89431</p> <p>b. 4 Wheel Parts – Case 1106, NOV 5316 40 Victorian Ave, Sparks NV 89431</p> <p>c. Quickie Mart #201572 – Case 1107, NOV 5315 890 West 4th Street, Reno 89503</p> <p>d. Preservation Restoration Services – Case 1108, NOV 5318 10672 Fire Poppy Circle, Reno NV 89521</p> <p>e. Heavenly Auto Body – Case 1109, NOV 5319 2530 Sutro Street, Suite 1, Reno NV 89512</p>	

Time	Agenda Item No.	Agenda Item	Presenter
		<p>2. Recommendation of Cases Appealed to the Air Pollution Control Hearing Board. None.</p> <p>3. Recommendation for Variance: None.</p> <p>B. <u>Sewage, Wastewater & Sanitation Cases:</u> Recommendation to Approve Variance Case(s) Presented to the Sewage, Wastewater & Sanitation Hearing Board. None.</p> <p>C. <u>Budget Amendments / Interlocal Agreements:</u></p> <p>1. Retro-Actively Accept Notice of Grant awards in the amount of \$125,000 for the period of January 15, 2013 to January 14, 2015 in support of the Robert Wood Johnson Foundation (RWJF) Northern Nevada Shared Services Learning Community grant (IO-TBA); Authorize travel and travel reimbursements for non-County employees (John Packham, PhD, Emily Brown, MPH, CPH, and Peggy O'Neill) in the approximate amount of \$16,400, supported by the grant award; and, if approved, authorize the DBOH Chairman to execute the grant documents; and if approved, direct Finance to make the appropriate budget adjustments.</p> <p>2. Approval of amendments totaling an increase of \$62,216 in both revenue and expense to the FY13 Centers for Disease Control and Prevention (CDC) Epidemiology and Laboratory Capacity (ELC) Affordable Care Act Federal Grant Program, IO 10984; and, if approved, authorize the Chairman to execute.</p> <p>D. <u>Washoe County Health District Employee Manual:</u> Review and Acceptance of Washoe County Health District Employee Manual.</p> <p>E. <u>Appointment to the Air Pollution Control Hearing Board – Jim Kenney.</u></p>	

Time	Agenda Item No.	Agenda Item	Presenter
	10.	<u>Air Pollution Control Hearing Board Cases appealed to the District Board of Health.</u> None.	Ms. Albee
	11.	Presentation on the Washoe County Health District's Indirect Cost Allocation Plan Methodology	Mr. Scott Mayne
	*12.	Presentation regarding the Prehospital Medical Advisory Committee ("PMAC")	Joseph L. Ryan, MD, PMAC Chairman
	13.	<u>Regional Emergency Medical Services Authority:</u> A. Review and Acceptance of the Operations and Financial Reports for November and December, 2012; and B. Update of REMSA's Community Activities Since November, 2012	Mr. Gubbels
	14.	Presentation Regarding 38 Recommendations in the Tri-Data Report; and Presentation, Discussion, and Possible Direction to Staff regarding Emergency Medical Services ("EMS"), Including Recommendations Contained in the TriData Report and Various Other EMS Studies	Dr. Iser, Mr. Smith, Dr. Todd, and Ms. Akurosawa
	15.	<u>PUBLIC HEARING:</u> Proposed approval and adoption of the revisions to "The Washoe County Portion of the Nevada State Implementation Plan to meet the Nitrogen Dioxide Infrastructure SIP requirements of Clean Air Act Section 110(a)(2)".	Mr. Inouye
	16.	<u>PUBLIC HEARING:</u> Proposed approval and adoption of the revisions to "The Washoe County Transportation Conformity Plan."	Mr. Inouye
	17.	Discussion and Possible Appointment of a Subcommittee to Meet as Needed to Provide Direction to the DBOH and Staff on the Future of the Health District and Its Financial Stability	Mr. Smith and Dr. Iser
	18.	Presentation, Discussion, and Possible Direction to Staff regarding the 2013 Legislative Session	Dr. Iser and Ms. O'Neill

Time	Agenda Item No.	Agenda Item	Presenter
	19.	Review and Acceptance of the Monthly Public Health Fund Revenue and Expenditure Report for December 2012	Ms. Stickney
	20.	Discussion and Possible Direction to Staff Regarding FY14 Health Fund Budget	Dr. Iser and Ms. Stickney
	*21.	<p><u>Staff Reports and Program Updates</u></p> <p>A. Director, Epidemiology and Public Health Preparedness - Communicable Disease; Public Health Preparedness; Emergency Medical Services; and Vital Statistics</p>	Dr. Todd
		<p>B. Director, Community and Clinical Health Services – Clinical Programs and Non-Communicable Disease Updates – Maternal and Child Health (Home Visitation) Program Presentation</p>	Mr. Kutz
		<p>C. Director, Environmental Health Services Food Program; Land Development; Solid Waste/Special Events; and Vector-Borne Disease Program</p>	Mr. Sack
		<p>D. Director, Air Quality Management – Air Quality; Planning and Monitoring Activity; Permitting Activity; Compliance & Inspection Activity; and Permitting & Enforcement Activity</p>	Mr. Dick
		<p>E. Administrative Health Services Officer – AHSO agenda items are included in other agenda items.</p>	Ms. Stickney
		<p>F. District Health Officer – 2013 Legislative Session; Budget; Human Resources; Communication; Accreditation; Washoe County and Community Activities; Health District Media Contacts and Outreach; Statewide (and Beyond) Organizational Efforts; RWJF Shared Services Learning Community Grant Update; and District Board of Health Information and Resources</p>	Dr. Iser

Time	Agenda Item No.	Agenda Item	Presenter
Board Comment	*22.	Limited to Announcements or Issues for Future Agendas	Mr. Smith
	23.	Emergency Items	Dr. Iser
Public Comment	*24.	Public Comment (limited to three (3) minutes per person). No action may be taken.	Mr. Smith
	25.	Adjournment	Mr. Smith

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

Items on the agenda may be taken out of order, combined with other items, withdrawn from the agenda, moved to the agenda of another later meeting; moved to or from the Consent section, or they may be voted on in a block. Items with a specific time designation will not be heard prior to the stated time, but may be heard later. Items listed in the Consent section of the agenda are voted on as a block and will not be read or considered separately unless withdrawn from the Consent.

The District Board of Health Meetings are accessible to the disabled. 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 1130, Reno, NV 89520-0027, or by calling 775.328.2416, 24 hours prior to the meeting.

Time Limits: Public comments are welcomed during the Public Comment periods for all matters whether listed on the agenda or not. All comments are limited to three (3) minutes per person. Additionally, public comment of three (3) minutes per person may be heard during individual action items on the agenda. Persons are invited to submit comments in writing on the agenda items and/or attend and make comment on that item at the Board meeting. Persons may not allocate unused time to other speakers.

Response to Public Comments: The Board of Health can deliberate or take action only if a matter has been listed on an agenda properly posted prior to the meeting. During the public comment period, speakers may address matters listed or not listed on the published agenda. The *Open Meeting Law* does not expressly prohibit responses to public comments by the Board of Health. However, responses from the Board members to unlisted public comment topics could become deliberation on a matter without notice to the public. On the advice of legal counsel and to ensure the public has notice of all matters the Board of Health will consider, Board members may choose not to respond to public comments, except to correct factual inaccuracies, ask for Health District Staff action or to ask that a matter be listed on a future agenda. The Board of Health may do this either during the public comment item or during the following item: “Board Comments – Limited to Announcement or Issues for future Agendas.”

Pursuant to NRS 241.020, Notice of this meeting was posted at the following locations:

Washoe County Health District, 1001 E. 9th St., Reno, NV
Reno City Hall, 1 E. 1st St., Reno, NV
Sparks City Hall, 431 Prater Way, Sparks, NV
Washoe County Administration Building, 1001 E. 9th St, Reno, NV
Washoe County Health District Website www.washoecounty.us/health

Washoe County



Health District

Washoe County District Board of Health Strategic Planning Retreat Meeting Minutes December 6, 2012

PRESENT: Mr. Matt Smith, Chairman, George Furman, MD; Commissioner Kitty Jung, Vice Chair; Councilwoman Zadra, Councilwoman Ratti arrived at 9:08 am, Dr. Denis Humphries; and George Hess, MD

ABSENT: None

STAFF:

Joseph P. Iser, District Health Officer Robert Sack, Director, Environmental Health Services Kevin Dick, Director, Air Quality Management Patsy Buxton, Fiscal Compliance Officer, AHS Peg Caldwell, Registered Nurse I, EPHP Phil Ulibarri, Public Information Officer, AHS Bev Bayan, WIC Program Manager, CCHS Stacy Hardie, Public Health Nurse Supervisor, CCHS Jeff Whitesides, Public Health Preparedness Program Manager, EPHP Charlene Albee, Enforcement Branch Chief, AQM Kelli Seals, Health Educator II, CCHS Jim English, Environmental Health Specialist Supervisor, EHS Peggy F. O'Neill, Recording Secretary Leslie Admirand, Deputy District Attorney	Steve Kutz, Division Director, Community and Clinical Health Services Randall Todd, DrPH, Director, Epidemiology and Public Health Preparedness Eileen Stickney, Administrative Health Services Officer, AHS Lori Cooke, Fiscal Compliance Officer, AHS Stacey Akurosawa, EMS Coordinator, EPHP Bryan Tyre, Environmental Engineer, EHS Dave McIninch, Environmental Health Specialist Supervisor, EHS Candy Hunter, Public Health Nurse Supervisor, CCHS Daniel Inouye, Air Quality Supervisor, AQM Erin Dixon, Tobacco Program Coordinator, CCHS Steve Fisher, Department Computer Application Specialist, AHS Paula Valentine, Administrative Assistant I, EHS Tony Macaluso, Environmental Health Specialist Supervisor, EHS Jim Shaffer, Vector Borne Disease Program Manager, EHS
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TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
9:00 am 1, 2	Meeting Called to Order, Pledge of Allegiance and Roll Call	Chairman Smith called the meeting to order, followed by the Pledge of Allegiance led by Councilwoman Zadra. Roll call was taken and a quorum noted. Councilwoman Ratti arrived at 9:08 am.	
3.	Public Comment	Dr. Iser noted that Commissioner-Elect Hartung is in attendance.	
4.	Approval/Deletions – Agenda – December 6, 2012	Chairman Smith called for any deletions to the Agenda of the December 6, 2012, Strategic Planning Retreat.	Councilwoman Zadra moved, seconded by Dr. Hess, that the December 6, 2012 Strategic Planning Retreat Meeting Agenda be approved as submitted. MOTION CARRIED

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
5.	<p>Presentation -- Public Health Priorities</p>	<p>Dr. Iser made a presentation on Public Health Priorities, a copy of which was placed on file for the record.</p> <p>Dr. Iser introduced the key winnable public health battles for the United States as identified by the Centers for Disease Control (CDC) as (1) tobacco; (2) healthcare associated infections; (3) teen pregnancy; (4) nutrition, physical activity, obesity, and food safety; (5) motor vehicle injuries; and (6) HIV. Dr. Iser stated that the Washoe County Health District does not have much effect on healthcare associated infections, but can influence the other battles identified.</p> <p>Dr. Iser presented statistics on reduced smoking and the impacts on the citizens of New York City and discussed how smoke-free workplace laws save lives and do not hurt business. Dr. Iser then presented data on how tobacco counter-marketing campaigns do save lives, and that anti-tobacco advertising is effective.</p> <p>Dr. Iser presented specific ideas and programs about what states and communities can do to prevent obesity by targeting schools, child care facilities, worksites, communities, and the health care community, and presented statistics which show progress in nutrition, physical activity, obesity, and food safety.</p> <p>Dr. Iser presented data on healthcare-associated infections and reiterated that the Health District will not be able to affect this area, but explained its impact on our community. Dr. Iser presented data on motor vehicle injuries and the progress made in motor vehicle injury prevention due to seatbelt laws and speeding laws, etc. Dr. Iser presented statistics on teen pregnancy and discussed its impacts on young girls who are then unable to finish school and get the education they need, which then impacts other areas of their lives, including access to good health care. Dr. Iser then discussed how education about teen pregnancy has had an impact and has reduced the teen birth rate from 2007 to 2010 by 17%. Maternal and child health programs focus on these issues. Dr. Iser then presented national statistics on HIV/Aids. One point one million people in the US are living with HIV. One in 5 people do not know they are infected, and only 1 in 4 people with HIV have their condition under control. The lifetime cost of treating one person with HIV is approximately \$400,000.</p> <p>Dr. Iser stated that we need to prioritize and identify our own focus areas. We need to address public health priorities that have large-scale impact on health. We need to implement existing evidence-based interventions, and focus on efforts that can have a significant impact in a relatively short time. Proper treatment and control of heart disease, stroke, high blood pressure, and diabetes will have a tremendous impact on the health of our community.</p>	

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
6.	<p>Presentation – Winnable Battles</p>	<p>Dr. Iser made a presentation on Winnable Battles, a copy of which was placed on file for the record.</p> <p>The Winnable Battles Dr. Iser presented are: (1) get good data; (2) prioritize and do the hard stuff first; (3) fight and win winnable battles; (4) hire great people; (5) address communicable diseases and environmental health, or you will not be able to address anything else; (6) do not cede the clinical realm; (7) learn the budget cycle; (8) manage the context; (9) never surprise your boss; and (1) follow these 5 principals: (i) be a diligent steward of the funds entrusted to your agency; (ii) provide an environment for intellectual and personal growth and integrity; (iii) base all public health decisions on the highest quality scientific data, openly and objectively derived; (iv) place the benefits to society above the benefits to the institution; and (v) treat all persons with dignity, honesty, and respect.</p> <p>To be successful, we must put these practices into place:</p> <ul style="list-style-type: none"> • Address high-burden winnable battles • Develop evidence-based prevention strategies • Support surveillance • Increase capacity to advocate for an implement prevention policy • Leverage resources • Consult with and learn from peers • Follow-up on one policy or program • Do more with less <p>Dr. Iser opened the floor for questions, and Councilwoman Ratti expressed her frustration with the lack of Washoe County-specific data, not only within the Health District, but in Sparks and county-wide.</p> <p>Dr. Randall Todd reported to Councilwoman Ratti that she is correct in certain areas; however, for Communicable Disease, the Health District has rich and localized data. In the area of Chronic Disease is where we do not have good data. Everything is based on national or state estimates.</p> <p>Dr. Iser reported that as soon as St. Mary's Medical Center produces its Community Health Assessment, the Health District will have the data that will be more specific to Washoe County and help us make these decisions.</p>	
	<p>Board Comment</p>	<p>Commissioner Jung stated that she would like to see some type of correlation between WIC and the foods that are available for purchase and that they be</p>	

TIME /
ITEM

SUBJECT / AGENDA

DISCUSSION

ACTION

restricted to healthy choices since obesity is such a contributing factor to Chronic Disease.

Dr. Iser reported that developing public health policy that looks at health inequities to help prevent things such as "food deserts" will go a long way in alleviating obesity and other Chronic Diseases.

Chairman Smith asked that a white board be used to capture some of the ideas being discussed today.

Mr. Dick reported that the AQM is working with RTC to develop policies like the Healthy Streets policies that increase bikeability and walkability and decreases injuries in these corridors. We also work with RTC on fuel efficiencies and emissions reducing, part of which includes driver training. We do have connections and need to work to strengthen them.

Mr. Vaughn Hartung asked Dr. Iser to explain 3rd hand smoke. Dr. Iser explained that 1st hand smoke is when you smoke yourself; 2nd hand smoke is when someone else is smoking in the room around you; and 3rd hand smoke is the inhalation of residue from smoke on clothing or other items that has absorbed into those items. Mr. Hartung also asked if additional tobacco taxes could be implemented at the county level or must be implemented at the state level. Erin Dixon responded that tobacco taxes must be implemented at the state level. Ms. Dixon further reported that the tobacco tax in Nevada is \$.80; by comparison, the tobacco tax in New York is \$5.00; Nevada's is \$.50 below the national average.

Dr. Iser stated that the Health District is a proponent of a Tobacco Retail License fee which would generate income for tobacco prevention and allow additional oversight to pull a license if the distributor is selling tobacco to anyone underage. Washoe County receives about \$8 Million dollars in the tobacco tax revenue. We have no way of knowing how much is distributed to the Health District.

Commissioner Jung stated that she believes one way to increase the tourism relating to gaming is to advertise about the Nevada experience such as alcohol consumption at tableside and the immediacy of available of winnings, which is not always true at Indian casinos.

Commissioner Hartung asked if there is an appetite to pursue increased taxation on tobacco products, and Dr. Iser and certain members of the Board expressed their ability to support such an initiative.

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
		<p>Candy Hunter advised the Board that the Maternal and Child Health block grant that the state receives from HRSA requires the State to work collaboratively with other organizations to conduct a State-wide, comprehensive Needs Assessment every 5 years, and based on the findings of the Needs Assessment, requires each State to identify State priorities to comprehensively address the needs of the MCH population and guide the use of the Maternal and Child Health Block Grant funds. That data is available and is helpful, but more work needs to be done.</p> <p>Stacy Hardie reported to the Board that during the recent Family Planning Grant audit, the team developed a Needs Assessment which utilized local data and Ms. Hardie will make that data available to the Board. Councilwoman Ratti suggested that the Health District create a repository so that the local data we capture can be shared with others for grant applications, etc.</p>	<p>ACTION ITEM: Ms. Hardie will bring to the Board the data and Needs Assessment prepared for the Family Planning grant. It will also be made available on the Health District's website.</p>
7.	<p>RWJF Shared Services Grant Update – Northern Nevada Learning Community Shared Services Proposal</p> <p>Board Comment</p>	<p>Dr. Iser reported on the status of the Northern Nevada Learning Community Shared Services Proposal. Dr. Iser stated reported to the administrators of the grant that Dr. Iser will keep the Board informed of the grant activities in the monthly DHO report. Dr. Iser reiterated that this is a planning grant only. It is a two year grant to review how we can share services among the jurisdictions. The stakeholders are the eight northern Nevada counties.</p> <p>Dr. Iser stated again that there are no preconceived notions about how to proceed other than how can we improve public health in northern Nevada. The Carson City Health Department was also successful in receiving this grant. SNHD did not apply for this grant.</p> <p>Dr. Iser stated that no funds from Washoe County would support any activities for other counties, and that costing of services will be part of the planning process. Each county's revenue would support any activities that the Washoe County Health District would supply to any county.</p> <p>Dr. Humphreys asked if this grant will simply cover the studies necessary to determine any needed services or if it would allow for implementation of any of the recommendations. Dr. User stated that the grant could be anything from planning to implementation, but implementation is not our plan at this time.</p> <p>Councilwoman Ratti stated that a review of the process and costs of implementation for transitioning Child Welfare services from the state to the county would be prudent to see the difficulty and the challenges involved in this type transition. A dedicated funding stream is imperative to the success of any transition.</p>	

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
8.	<p>Review of and Possible Direction to Staff regarding the Washoe County Health District Legislative Agenda</p> <p>Board Comment</p>	<p>Dr. Iser a part of this grant will be participating in the Kansas Institute Learning Community which will help us to understand the implications of these type transitions in a public health environment.</p> <p>Dr. Iser presented the 2013 Washoe County Health District Legislative Agenda to the District Board of Health.</p> <p>Dr. Iser referred the Board members to the proposed Legislative Agenda in their packets which lists specific items of interest to the Washoe County Health District.</p> <p>Dr. Iser reported that we have added a few new items for the Board's consideration. Farm to Fork will be on the 2013 Legislative agenda.</p> <p>Councilwoman Zadra questioned Dr. Iser if anyone had spoken with our state legislators and local jurisdictions about raising the tax on tobacco or a licensing fee to increase the Health District funding. Dr. Iser stated that Staff will pursue that discussion if it is supported by the Board members.</p> <p>Dr. Iser suggested that we also explore the tobacco settlement funds. Commissioner-Elect Hartung stated that the tobacco settlement funds were to be directed to the Millennium Scholarship and that he believes better education has a direct correlation to tobacco use. Dr. Hess stated that the allocation of funds was decided in a court case and not by the Legislature, but it is his understanding that dollars that were directed to tobacco education have now been diverted to other budgetary items. Councilwoman Ratti asked that Staff present data on how those dollars are being allocated now, and Ms. Dixon stated that she will present a report on those funds and their current allocation and use.</p> <p>Dr. Iser asked for a motion to approve the Washoe County Health District 2013 Legislative Agenda as amended. Councilwoman Ratti suggested the DBOH form a Legislative Subcommittee that can be convened easily to promote the desired strategies and be inclusive of each jurisdiction represented by the DBOH to ensure a comprehensive and coordinated strategy. Dr. Iser stated that he regularly keeps the Washoe County Legislative Committee updated about his efforts and meetings through John Slaughter. Ms. Admirand informed the Board that any subcommittee formed would be subject to the Nevada Open Meeting Law. The subcommittee would not be able to discuss anything without the meeting being noticed. Dr. Iser suggested that one solution would be to allow staff to work with the Chairman to facilitate the Legislative Agenda. Councilwoman Zadra stated that the practice in Reno is the go ahead and</p>	<p>ACTION ITEM: Councilwoman Ratti asked that Staff present data on how the tobacco dollars are being allocated now, and Ms. Dixon stated that she will present a report on those funds and their current allocation and use.</p>

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
		<p>properly notice any meetings with enough detail to facilitate such a meeting, and then cancel the meeting if it is unnecessary. Commissioner Jung stated that it is imperative that we present a coordinated platform. Commissioner Jung stated that she would like to bring this issue back to the Commission. She further stated that any DBOH Legislative activities should be coordinated through John Slaughter's office so that we are presenting a coordinated platform. Councilwoman Ratti stated that what is presented is a list of concepts, and she believes we need to develop a true legislative comprehensive platform that can be sent our legislators each session would be a step forward in the process we are attempting to create.</p> <p>Ms. Admirand stated that if the DBOH would like to form such a subcommittee, that would be outside the scope of the agenda item, and the matter would have to be agendaized for the December 20, 2012 Regular Meeting.</p>	<p>Dr. Hess moved, seconded by Councilwoman Zadra, that the Legislative Agenda as amended, be approved, and that the DBOH pursue legislation that dedicates a portion of the tax from tobacco revenue to fund the Health District.</p> <p><u>MOTION CARRIED</u></p> <p>Recessed at 10:30 am; reconvened at 10:45 am.</p>
9.	<p>Presentation – Investing In Our Health – Public Health Funding and Key Health Facts</p>	<p>Dr. Iser made a presentation on Investing in our Health – Public Health Funding and Key Health Facts, a copy of which was placed on file for the record.</p> <p>Dr. Iser reported that this presentation represents data from the 2800 local health districts across the country. The data represents how different districts are funded at the state and local levels.</p> <ul style="list-style-type: none"> • Federal funding for public health has remained at relatively flat and insufficient levels for years. The budget for CDC has decreased from a high of \$6.62 billion in 2005 to \$6.32 billion in 2011 (RWJ, March 2012). • From FY 2008 to FY 2011, the median per capita state spending decreased from \$33.71 to \$30.09. • Since 2008, LHDs have lost a total of 34,400 jobs due to layoffs and attrition. Combined state and local public health job losses total 49,310 since 2008. • There are major differences in disease rates and other health factors in states around the country. <p>Where you live should not determine how healthy you are:</p> <ul style="list-style-type: none"> • One major factor in the health of a community is whether or not they have a strong public health system. • Public health departments can help improve the health of communities since they are responsible for finding ways to address the systemic reasons why some communities are healthier than others — and for developing policies and programs to remove obstacles that get in the way of making healthy choices possible. 	

Dr. Iser presented statistics on CDC and HRSA per capita funding for states and also on state funding, with Hawaii having the highest at \$154.80 per capita and Nevada having the lowest at \$3.45 per capita. The disparity is huge in the state funding for Nevada.

Commissioner Jung asked Dr. Iser how the federal dollars are distributed to each state, and Dr. Iser stated that these are grant funding dollars that can be obtained, but in some instances, Nevada does not apply for these dollars. Some of the other grants are very competitive. The others are block grants. It has a lot to do with who can write the best grant application. HRSA dollars come out in Community Health dollars for which we are not eligible to apply.

Board Comment

- A July 2011 study published in the journal *Health Affairs* found that increased spending by local public health departments can save lives currently lost to preventable illnesses.
- On average, local public health spending rose from \$34.68 per capita in 1993 to \$40.84 per capita in 2005 – an increase of more than 17 percent.
- For each 10 percent increase in local public health spending, there were significant decreases in infant deaths (6.9 percent drop), deaths from cardiovascular disease (3.2 percent drop), deaths from diabetes (1.4 percent drop) and deaths from cancer (1.1 percent drop).
- The 3.2 percent decrease in cardiovascular disease mortality cited above required local health agencies to spend, on average, an additional **\$312,274** each year. *For perspective, to achieve the same reduction in deaths by focusing on treatment would require an additional 27 primary care physicians in an average metropolitan community. Those physicians would cost nearly \$5.5 Million or more than 27 times the public health investment.*

LHDs continue to struggle with budget cuts.

- In July, 2011, nearly half of LHDs reported reduced budgets, which is in addition to 44 percent that reported lower budgets in November 2010.
- In addition, more than 50 percent of LHDs expect cuts to their budgets in the upcoming fiscal year.

Dr. Iser then presented data graphically on the following issues: (1) Asthma Rates in high school students; (2) Immunization Gap Among Children Ages 19 to 35 months; (3) Percent of Current Adult Smokers; (4) Infant Mortality Per 1,000 Live Births; and (5) Pneumococcal Vaccination Rates, 65 and Over. Dr. Iser presented data samples of adult health indicators.

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
10.	<p>Presentation, Discussion, and Possible Direction to Staff Regarding FY 14 Health Fund Budget</p>	<p>Eileen Stickney, Administrative Health Services Officer, reported that staff will brief the Board on one scenario to close the budget gap as was presented in October, and one element of that will be to implement a Health District Indirect Cost Policy. Ms. Patsy Buxton will present to the Board the proposed Washoe County Health District Indirect Cost Policy.</p> <p>Ms. Buxton reported that presented to the Board is a Draft Indirect Cost Policy for the Board's review. As the County has allocated its Cost Allocation to the Health Fund, it is imperative that the Health District implement an indirect cost policy to help maintain financial sustainability.</p> <p>Ms. Buxton stated that the relevant terms are defined in the policy, and the policy simply states that the Health District will apply the full relevant indirect cost rate to all external grants, contracts, and fees. In certain circumstances, the District Health Officer and Administrative Health Services Officer may approve full or partial waivers of the Administrative costs normally incurred. The Revenue derived from recovering indirect costs will be moved from individual programs to a Health Fund administrative cost object so that it is not utilized for daily operational expenditures.</p> <p>Ms. Buxton then presented a spreadsheet which demonstrates several indirect cost recovery scenarios and the revenue derived there from. Ms. Buxton recommended that the Board implement a policy which recovers a minimum of 10% and then revisit the policy on an annual basis. Dr. Iser interjected that most grants have limitations on cost recovery which normally range from 10% to 12%. For every dollar we take out for cost recovery, we will have to take out of services.</p> <p>Dr. Hess asked for clarification on the spreadsheet, and Ms. Buxton stated that the rates are identified as follows: Health Administration, Division Rate, HD Combined Rate (which is Administration and the Division Rate combined), the COWCAP Rate, and then finally all of those combined is the Total Rate. All numbers are based on our audited financials. Ms. Buxton offered to have Scott Mayne of LSM – Government Financial Management present to the Board regarding the COWCAP. He is contracted with the County to develop the Washoe County Cost Allocation Plan and the Washoe County Health District Indirect Cost Rate Proposal.</p> <p>Councilwoman Ratti questioned how the COWCAP could be different by Division within the Health District, and Ms. Buxton reported that it is mostly allocated by FTE and/or division salaries and wages, and therefore, the divisional rates are different. Councilwoman Ratti stated that this is an effort to</p>	
	<p>Board Comment</p>		

regain some of the dollars lost in the implementation of the County COWCAP to the Health Fund in order to pay those costs for which it has never been charged before.

Dr. Iser interjected that the Health District just received notification of what the allocation for the Health District will be for the tobacco program this year. Last year they proposed a cut that we renegotiated with them. This year we are getting the same amount of money, but they require a 41% match and the state takes its Cost Allocation off that grant before it divides up the funds but then requires us to overmatch in order to get those funds. We can do part of that in kind. We did the same thing with the RWJF grant. We allocated the outlying counties' employee participation, Ms. Stickney, and Ms. O'Neill's salary that way also to help us be more competitive.

Chairman Smith asked where our funding comes from and Dr. Iser responded that it is General Fund Transfer, Grants, and Fees and Permits. Most of our grants require a minimum match. This policy will govern how we operate in the future with grants and cost recovery to help us with sustainability. Dr. Iser stated that other departments within the County have been charged the COWCAP prior to this year, but this is the Health Fund's first year. His request to the County is to allow the Health Fund the time to restructure our fees and grants to help absorb the COWCAP.

Dr. Iser discussed the difficulty of fiscal equity between divisions and programs. Councilwoman Ratti expressed her concern with the way the rates are calculated. She stated the Indirect Rate should be a statistical representation of how much administrative costs involved in that program. She questions the accuracy of the allocation. Thirty-eight percent of the district is pushing paper and that seems odd. Ms. Stickney stated that this discussion is occurring also at the federal level because it is labor intensive, so there is much discussion about having just a flat administrative rate. Ms. Stickney stated that Staff will bring back a report that details the Indirect Cost Rate Table. Ms. Stickney stated that Councilwoman Ratti is correct and important that we need to have the distinction in the allocation and the recovery.

Ms. Stickney transitioned to the Preliminary FY14 Health Fund Budget discussion. Ms. Stickney reported that in the column identified as November 2012, the vacant positions are calculating as if they were filled, the Revenues do not include any fee increases, and the Grants do not include any indirect cost recovery which is what our budget looks like right now. In the column identified as December 2012, we have projected ETCs with 6 vacancies, which captures approximately \$439,000 in salary savings for the remainder of FY13 which in

ACTION ITEM: Bring a staff report that details the calculations used in the ICR Table attached to the Draft Indirect Cost Policy and how the Health District directs costs, with a distinction in the allocation and recovery.

turn will increase our Ending Fund Balance. In Revenues, we are projecting additional revenue of approximately \$374,000 for the fee increases Staff will bring to the Board in February 2013. We are projecting additional salary savings of approximately \$668,000 for FY14 for 7 vacancies which could be kept open. These savings and additional Revenue bring us to only a \$199,005 shortfall. This scenario does not assume any indirect cost recovery applied to our grants.

Ms. Stickney reported that Staff will focus on the DBOH's and DHO's priorities when realigning resources and working closely with Washoe County Finance Department staff. Health District Administrative Staff will meet with the Division Directors and program managers in January and February 2013, for the actual FY 14 Budget requests. The required LA Managers' Meeting has been set for March 5, 2013, and the proposed FY14 Budget will be presented to the DBOH at its Special Budget meeting on Thursday, March 7, 2013, at 1:00 pm.

Dr. Iser reported that Ms. Simon has indicated slightly more flexibility in the implementation of the COWCAP. We must remember that any of these positions that do not get filled mean more work for those who remain and tasks that will not be done. For instance, the position vacated by Mr. Kutz is not slated to be refilled, and we have reallocated those programs between Ms. Hunter and Ms. Hardie. We've not filled positions in Vector, Air Quality, and Environmental Health. We cannot project how sustainable this will be. We don't know how the Affordable Care Act will affect our clinical services either, and we have to hear from our federal partners about what those impacts will be.

Chairman Smith requested a report on mandated service and level of service so that the Board can be prepared as we go forward into the budget process.

Dr. Iser stated that Staff will bring that back to the Board, but there will be areas that are not mandated, but that Staff will recommend that the DBOH continue to fund. We will have to evaluate how to keep our community as safe as we can and how we can have the best outcomes.

Dr. Todd stated that as stated in one of the presentations, it is critical that we don't cede the clinical realm. Contact tracing is integral to disease prevention, and primary care facilities receive no training for that protocol. Mr. Kutz stated that this is occurring in Massachusetts already.

Mr. Dick and Councilwoman Ratti asked for clarification on how the salary savings are being calculated, and Ms. Stickney stated that in the column identified as December 2012, we have projected ETCs with 6 vacancies, which captures approximately \$439,000 in salary savings for the remainder of FY13,

ACTION ITEM: Chairman Smith requested a report on the Health District's mandated services and the levels of service required.

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
		<p>which in turn will increase our Ending Fund Balance. In Revenues, we are projecting additional revenue of approximately \$374,000 for the fee increases Staff will bring to the Board in February 2013. We are projecting additional salary savings of approximately \$668,000 for FY14 for 7 vacancies which could be kept open. These savings and additional Revenue bring us to only a \$199,005 shortfall.</p> <p>Dr. Iser reported that there are other salary savings which are not yet included in those calculations such as his time and Ms. O'Neill's time which will be attributable to the RWJF grant.</p>	<p>Recessed at 12:15 pm; Reconvened at 12:30 pm.</p>
11.	<p>Lunchtime Presentation – Leading the Way in Chronic Disease Prevention in Washoe County</p>	<p>Ms. Erin Dixon and Ms. Kelli Seals presented on Leading the Way in Chronic Disease Prevention in Washoe County.</p> <p>Ms. Dixon reported that there are three behaviors that have a direct causal effect on three diseases that are responsible for 50% of deaths. Tobacco use, poor diet, and no exercise lead to heart disease, cancer, and stroke, which cause 50% of all deaths. Ms. Dixon presented data on the causes of death in Washoe County between 1998 and 2010 as Heart Disease - 51.1%; Cancer - 22.6%; and all other causes - 26.3%.</p> <p>The Chronic Disease Prevention Program works to empower our community to be tobacco free, live active lifestyles, and eat nutritiously through education, collaboration, policy, and evaluation. Ms. Dixon stated that in order to effect change in our community, we must have policies, systems, and environmental change, which is consistent with the Board of Health priority of working toward a healthy community where citizens will make healthy lifestyle choices that minimize chronic disease and increase quality and years of healthy life. Policy interventions may be a law, ordinance, resolution, mandate, regulation, or rule (organizational policies that provide healthy foods in vending machines). Systems interventions are changes that impact all elements of an organization, institution, or system (types of systems are schools, transportation, parks and recreation, food, etc.). Environmental interventions involve physical or material changes to the economic, social or physical environment (incorporating sidewalks, paths, and recreation areas into community design).</p> <p>Ms. Dixon stated that there is a spectrum of prevention with six identifiable traits: (1) strengthening individual knowledge and skills; (2) promoting community education; (3) educating providers; (4) fostering coalition and networks; (5) changing organizational practices; and (6) influencing policy and legislation.</p>	

Ms. Dixon presented the impacts regarding how events and programs which end differ from policy changes. It great to participate in events and programs, but the educational process is what helps to bring about change in policy, which is what has long term effects on health outcomes.

Ms. Dixon stated that Washoe County's smoking rate is approximately 21%. She then presented statistical data on smoking rates and how increased tobacco tax rates have decreased smoking rates and what we know about how educational efforts have decreased smoking rates. Aggressive media campaigns work well. Educational programs and free patch or intervention services have a great impact on reducing smoking rates. New York City's tobacco tax is \$5.85. There was group discussion on Nevada's tobacco tax rate and the funding levels rolled out to counties. Ms. Dixon then turned the presentation over to Ms. Kelli Seals.

Ms. Seals presented data on obesity rates, physical activity, and nutrition trends among US adults. Nevada's obesity rate among adults in 1992 was 12.5%. In 2011, it is 25%. She noted that the obesity rates have outpaced the charting system and new colors have been added to track the higher rates. A recent RWJF study shows that if measures are not put in place to control the obesity rate, it will be at 50% by 2030. Obesity is measured by body mass index. It's not an exact method, but it's the best method we have outside a laboratory. Washoe County has done a great job with obesity data on children since the legislature allows us to collect obesity data from our schools. We see the higher rates of obesity within the Title I schools, which helps us know where we need to direct our efforts to have the greatest impact.

Ms. Seals stated that we know that dietary patters in the US have changed. The prices of healthy foods have increases more than the prices of "junk" food. We have seen an increase in portion sizes and processed foods. Active transportation has decreased (walking and biking to work or school). Increased TV viewing increases childhood obesity, along with ingraining them with images of junk food. Reducing salt intake can reduce high blood pressure.

Ms. Seals presented 5 solutions for changing our communities: (1) strengthen schools as the heart of health; (2) integrate physical activity every day in every way; (3) activate employers and health care professionals; (4) market what matters for a healthy life; and (5) make healthy foods available everywhere. Food deserts need to be eliminated. We need to make the most of our partnerships in our community to promote healthy activity. There was discussion about how to create more accessibility to bus service in the outlying areas which has been cut back due to funding issues, when sprawl is being

ACTION ITEM: Place a reliable BMI calculator or a link on the WCHD website.

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		<p>created by the amount of road tax dollars that are available. There is not enough transit funding for a community of this size. There are not enough people to support transit to those outlying areas. We need to have this discussion as a community. Dr. Iser stated that in 2013 the EPA will implement lower standards for ozone, and we barely meet the standard now. We need to invest in public transportation.</p> <p>Ms. Seals quoted Dr. Thomas R. Frieden. "Obesity continues to be a major public health problem. We need intensive, comprehensive and ongoing efforts to address obesity. If we don't, more people will get sick and die from obesity-related conditions, such as heart disease, stroke, and type 2 diabetes and some types of cancer – some of the leading causes of death."</p> <p>Staff can lead efforts to prevent Chronic Disease by keeping the focus on policy, system, and environmental change; garner support – present a united front and empower ourselves and our partners; become more action oriented – push the limits; and increase chronic disease surveillance. The resources needed are support from the District Board of Health; commitment to Health in All Policies; and sufficient Chronic Disease staffing (NACCHO's recommendations for our size health district include a minimum of 3 FTEs and a recommended minimum of 2 staff per 100,000 in population).</p> <p>Ms. Seals stated that the Board of Health can lead efforts to prevent Chronic Disease by determining parameters, influence, and realm of authority and act within them by requiring a chronic disease report card every two years and by BOH members taking issues and ideas back to your respective councils, boards, and committees to effect real change.</p> <p>Commissioner Jung stated that major updates are being addressed with the Community Development Code to include walkability and bikeability and other issues.</p> <p>Councilwoman Ratti stated that picking one or two issues and then providing staffing and resources to address those issues would be the most effective way to proceed. We need to zero in on a couple issues and effect change in a directed way.</p> <p>Ms. Seals concluded the presentation by stated the call to action is for us to work together to move our community towards wellness.</p>	<p>Recessed at 1:20 pm; Reconvened at 1:40 pm.</p>
	<p>Board Comment</p>		

12.

Presentation and Discussion regarding the Implementation of the Washoe County Cost Allocation Plan

Mr. Alan Rosen and Ms. Pine Fine made a presentation regarding the implementation of the County Wide County Cost Allocation Plan.

Mr. Rosen stated that Washoe County has completed a cost allocation plan every year since FY 2004. The function of a cost allocation plan is to determine a methodology for allocating central service costs. The formulation of the cost allocation plan is in compliance with OMB Circular A-87 and A87 Guidance. This guidance is widely used in local government accounting to allocate indirect costs to grants and other programs. The BCC gave new direction to Staff in February of 2012 to implement full charges based on the COWCAP over a three year period.

Mr. Rosen stated that the COWCAP strategy for FY12-13 was to have a 3 year phase-in for vulnerable funds by fully charging overhead starting July 2013, buffering vulnerable funds with increased transfer from the General Fund, and phasing out the buffer over 3 years. There was to be no charge for insignificant amounts in FY 12-13, and no charge for funds when not allowed by NRS or working on a longer term strategy. Preliminary work on the FY 14 COWCAP will be complete by January 15, 2013.

Mr. Rosen presented a slide reflecting what he termed as the "Largest users of central service support." Commissioner Jung asked if the Library Expansion Fund is a Restricted Fund. Mr. Rosen replied that it is restricted as to the use, but not for charging cost allocation. Mr. Rosen stated that grants are restricted by their terms as to the amount of indirect costs which can be charged.

Board Comment

Councilwoman Zadra asked for clarification on the Library Expansion Fund and the Friends of the Library Fund. Ms. Fine stated that the Friends of the Library Trust is a separate trust fund from the Library Expansion Fund. The Library Expansion Fund was a property tax override to expand and build more libraries, and in that funding the operations and staffing and building of those new library facilities was all allowable, and the overhead was considered an allowable cost. The Friends of the Library contribution is a separate trust fund which is a separate cost account all together, and is one of those funds that is restricted from having overhead charges charged to it.

Dr. Randy Todd asked Mr. Rosen if on the current slide presented, "Largest users of central service support," if the recommended charge was implemented fully if there were no notes regarding subsidies in the Notes column, and Mr. Rosen replied in the affirmative. Dr. Todd stated that there are quite a few large funds that are not listed on that slide, such as the Sheriff's Department, and questioned if they were charged the COWCAP. Mr. Rosen replied that all

departments that are purely funded by General Fund were not charged the COWCAP because they are in the same fund as the services that they use.

Chairman Smith questioned Ms. Fine about whether the COWCAP formula is changed when applying to grants based upon their restrictions, and if not, could that structure be put in place to support the Health Fund, and Ms. Fine replied that they are two separate issues. There are two cost allocation components. There's the Health District administrative overhead and the Washoe County administrative overhead. The Washoe County overhead that is being charged is charged to the entire Health Fund for county services, and if the Health District is able to include those charges to a grant funder that would be wonderful, but if the Health District chooses to accept a grant that doesn't allow for overhead or administrative reimbursement, then the Health District is making a conscious choice to absorb that cost within the local funding.

Mr. Kevin Dick stated that it appears that the restricted funds that are being charged the COWCAP have dedicated revenues streams either from ad valorem taxes or fees or other taxes that go directly to them, and are any other General Fund departments which are being required to pay the COWCAP to the County. Ms. Fine responded that there is a blend of different funds and departments that are being charged COWCAP and they get ad valorem, and they get fees, or charges for services, like the Health Fund. The golf courses get no General Fund contribution, but they have to pay the COWCAP. Councilwoman Ratti pointed out that while other departments may be being charged COWCAP and receiving General Fund transfer, it's not 50% of their budget.

Mr. Steve Kutz stated that in years past the General Fund transfer was at approximately \$10 Million dollars, and now with the reductions and the implementation of the COWCAP the Health Fund has experienced roughly a 60% decrease in funding. Mr. Rosen replied that the formula that is used to determine the COWCAP is utilizing data that is several years old and that as the process moves forward, that calculation will be revisited and updated to reflect the changes in the Health District, but the figures will always be two years in arrears.

Dr. Hess asked if we look across the County departments, does the amount of the expense from the General Fund equal what you are trying to recover from the departments. Mr. Rosen stated that the COWCAP has different charges for different allocation. For example, square footage charges differ by location and actual costs.

Dr. Todd stated that he understands that this allocation supposed to pay for our use of IT, HR, Comptroller, etc., but questioned whether the formula contains scenarios for services that we provide for ourselves, such as internal IT services, our HR representative, and our FCOs, etc? Mr. Rosen stated that that is currently not part of the formula.

Commissioner Jung stated she was surprised to hear that seeking outside legal counsel required DA Office approval and that she believes the Sheriff's office has outside counsel and wondered if they sought the approval of the DA's office. Ms. Fine replied that it is in code that the DA's office must approve any outside counsel. Commissioner Jung asked that Ms. Admirand follow up on that issue and report to the Board. Ms. Admirand stated that since the DA's office is the County, if there is any kind of conflict, then outside counsel would be sought and the DA's office would sign off on that. Ms. Admirand stated that the DA's office does have someone assigned to the Sheriff's Department for general civil matters and another attorney in house that provides advice on HR issues, but she does not know the background on that, but she will find out and report to the Board.

Mr. Rosen stated that implementation of the COWCAP is prompting internal review of the various systems and procedures to search for savings and efficiencies across the County departments, which is a good outcome. Managed competition is an outcome that the County is exploring. Commissioner Jung questioned whether those allocations are tried up at the end of each year, i.e., this much for the DA's office, this much for HR, etc., and Mr. Rosen confirmed that is the plan; however, since this is the first year of implementation, that process has not yet been done.

Ms. Fine stated that the current year COWCAP for the Health Fund of \$2.55 Million is an estimate based on the FY11 audited CAFR, which is always on a 2 year lag, so in 2 years when we can apply the FY 12 CAFR to the FY14 estimated COWCAP, and then if that estimate that you paid for DA services, Comptroller services, etc., was too high for what was actually used in the year, then it will be revised, but it is a two year lag. Dr. Iser confirmed that has been the case in the other jurisdictions in which he has worked.

Councilwoman Ratti applauded the County and the Finance Team for the process of beginning to apply the COWCAP to the departments which is the only tool available to cost out services, which is an absolute necessity for effective management and delivery of services. Councilwoman Ratti questioned whether the software packages being used by the County are sophisticated enough to produce the data that is required to make these projections timely and

ACTION ITEM: Ms. Admirand will research how the attorney who provides advice on HR issues was assigned to the Sheriff's Office and report to the Board.

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accurately, and Mr. Rosen replied although he has only been with the County for a year, and this is the first time he has used the SAP program, it is highly functional and a great tool for these tasks, and Ms. Fine concurred that the software is "cutting edge."

Councilwoman Ratti again applauded the effort to determine true cost allocation. Ms. Fine stated that it is a cost accounting function to apply all costs of providing any activity, service, or program, so that you know how much that service, program, or activity costs, so that in the end, if it costs too much, you can't make the decision about funding it, cutting it back, or making it go away, if you truly don't know how much it costs. So this is a step toward appropriate cost allocation so that we can know how much every activity, program, or service costs. Ms. Fine confirmed that Ms. Ratti's point is very good about the cost allocation to the General Fund, and Ms. Fine is advocating allocating COWCAP to all the General Fund, non-central service cost departments. Direct service departments would be the Sheriff's Department, Patrol, District Attorney's office, District Court, etc. We need to push the true cost to each program. Only then will we know how much it costs to run a jail, or a patrol division, etc. This is huge, huge project and has taken many years to iron out a solid, cost allocation methodology where we really have confidence in all the numbers, and the next small step which the Board took this last year was to charge out these costs to all non-General Fund departments. It is Ms. Fine's hope and recommendation that they will be pushed out to all General Fund departments as well.

Ms. Ratti stated that she believes everyone is in agreement that we need a good accounting of the costs of providing a certain service, program, or activity, but where we are less supportive is where it becomes a cost transfer and is 50% of the General Fund budget. That is more difficult to justify. Ms. Fine stated that once appropriate cost allocation has been applied to a program, and then a better fee structure can be built so that cost can be recovered. Ms. Fine also stated that the cost allocation is not in direct correlation to a General Fund transfer. She sees it as a cost of the Health Fund doing business, and if the General Fund transfer is insufficient to sustain operations, that is a separate discussion that should be had with the Washoe County Board of Commissioners. Ms. Fine stated the COWCAP allocation should not be confused with a direct hit on any General Fund Transfer. What should be done is to embrace the cost of doing business and providing Health District services to the community and that a certain amount of subsidization to accomplish that.

Councilwoman Ratti again stated that she understands the concepts outlined and presented by Ms. Fine, but again, our citizens are paying for these services through their sales tax, property tax, and ad valorem taxes, and to simply shift

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additional burden to the citizens through increased fees is not necessarily an optimum solution.

Mr. Kutz stated that he recalls when the County surveyed the citizens and asked for rankings on how they want to see their services funded, and public health was ranked near the top at number 3 or 4. With those tiered reductions, the Health Fund was less affected, but it is difficult to reconcile where the public would like to see the Health District funded and then where we are at now.

Mr. Rosen stated that Mr. Kutz is right that in how the community ranked its preferences for funding, but that this issue is complicated by the drastic downturn in the economy, and that as we see the economic environment stabilizing, the funding stream should be stabilizing as well.

Dr. Iser stated that he was handed a note from the audience which stated the COWCAP as calculated equates to approximately \$16,600 per FTE. He believes this must be at 155 FTEs rather than the current figure of 145 FTEs.

Chairman Smith questioned how not to view the COWCAP as a reduction in the General Fund Transfer, but since there is no other funding source, we have no choice but to view it as such.

Dr. Todd stated that as he understands it, this allocation will be revisited on an annual or bi-annual basis. Dr. Todd still has concerns about charges to his programs for IT functions, such as a computer refresh, when his program is already being charged an IT cost allocation, when he physically has had to do computer refreshes himself.

Mr. Rosen directed the Board to the FY12-13 COWCAP slide which represents the General Fund charges, less the subsidies and items not allowed, and the net COWCAP charges. The next slide presented gave examples of the Central Service Charges to the Health Fund, and then a final slide which depicts historical COWCAP costs, allocation, and General Fund subsidies.

Councilwoman Ratti questioned the OPEB charge on the final slide, and Ms. Fine stated that is a calculation to continue funding health care and retirement costs for retired Health District employees and current Health District employees.

Mr. Kutz questioned how changes in Central Services staffing will affect the Health District COWCAP. Mr. Rosen's response was not audible.

Dr. Todd stated that looking at the COWCAP charge for IT and the fact that we get no credit for having two DCASs on staff, the Health District would be better served by transferring the DCAS staff back to Central Services and utilizing IT for its needs. He could make the same argument for our internal HR representative. Mr. Rosen said that it is definitely worth looking at, and Staff is reviewing the elements of the COWCAP on a regular basis.

Ms. Stickney stated she is in negotiations with Finance regarding a credit for the DCASs, she would caution against the thought of transferring them back to IT staff, and discussed other ideas regarding reducing the COWCAP.

Ms. Fine stated that Finance wants to work toward a solution for the issue and looks forward to working with Health District staff to resolve the budget deficit.

Dr. Iser asked Ms. Fine if the Health Fund had complied with every budget reduction the County had suggested, and Ms. Fine agreed, but clarified that the Health Fund was not previously asked to take reductions at the levels requested of other departments.

Chairman Smith thanked Mr. Rosen and Ms. Fine for their presentation, and stated that Dr. Iser and Staff will work with Finance to explore what type reduction in implementation of the COWCAP is possible. Mr. Rosen stated that we will be working with Staff to come to a resolution.

In transition to the next agenda item, Chairman Smith stated that due to time constraints, we will have to postpone the presentation of Agenda Item Nos. 15 and 16 to the December 20, 2012 Regular Board Meeting. Chairman Smith then corrected the record to reflect that Agenda Item Nos. 14, 15, and 16 will be continued to the December 20, 2012 Regular Board Meeting. Chairman Smith then introduced Agenda Item No. 13.

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13.	<p>District Health Officer Report regarding Washoe County Emergency Medical Services and the Overarching Effects of the Local Political Environment on the Washoe County Health District, the Interlocal Agreement, and Our Partners</p> <p>Board Comment</p>	<p>Dr. Iser reported that there have been several governing body meetings during the last several weeks. The County and City Managers and Dr. Iser met to determine first steps forward. We have yet to hear from the Sparks City Council on direction to their staff. That item will be on the Sparks City Council agenda on Monday, December 10.</p> <p>At the initial Managers' and DHO meeting, Ms. Simon and Mr. Clinger did ask for a written agreement from REMSA to come to the negotiating table "in good faith." Dr. Iser advised the managers that REMSA had publicly assured both the BCC and the DBOH that that is their intention. They still wanted something in writing on behalf of their boards. Chairman Smith agreed to bring that forward to the DBOH.</p> <p>Chairman Smith stated that REMSA has asked that we determine which specific areas of the Franchise Agreement the Cities and the County would like to look at, and we were hoping for more specificity from the partners, but the letter they requested the DBOH forward to REMSA is broader, and that is what is presented to you today. If the Board is in agreement, we will send it over to REMSA and let them review it. Chairman Smith stated that REMSA may choose to add items which they believe need review. Chairman Smith asked the members if they are okay with this letter or if anyone has any comments.</p> <p>Dr. Hess stated that he believes the language in the letter is not strong enough about the need to renegotiate the Franchise Agreement. Vice Chair Jung stated that she believes that the hesitation Chairman Smith is expressing in sending the letter as written is that there are other issues addressed in the TriData Report that speak to more than just REMSA. Neither the BCC as a body, nor the Cities of Reno and Sparks, have given the DBOH any sort of punch list about what their requests are from the DBOH to make us a better and safer community. We need a singular system, meaning EMS, and that everybody will agree to come to the table and share information. So it is not just REMSA that needs to share information, and historically this Board has not received much support when we have tried to implement improvements. Vice Chair Jung stated that she believes a similar demand should go to all the stakeholders notifying them of what is necessary to address the initial issues.</p> <p>Chairman Smith stated that there are representatives of the Cities and the County in attendance and Chairman Smith would appreciate them reporting to their managers about the content of this discussion. The Chairman stated that he is positioned to move on any items that will improve the system, such as the three items which have been identified.</p>	

Dr. Iser reported that the initial managers' meeting was "REMSA centric." Very little discussion was had on the other two areas. In reference to the earlier presentation about doing the hard things first, REMSA is hard, but the oversight authority is the hard piece, after which all the rest of the pieces will start to fall in place. It is Dr. Iser's recommendation that the Cities and the County look at that piece early. The other issues would then begin to fall into place.

Dr. Hess stated that if in the meeting with the Cities and the County they asked for this letter to REMSA, then we need to get this letter signed by REMSA as soon as possible.

Dr. Iser reported that he didn't hear that this letter was essential before we move on to anything else. Dr. Iser believes it would be a significant hurdle if REMSA does not sign the letter.

Councilwoman Ratti stated that she agrees it would be helpful to have REMSA sign off in agreement to come to the table regarding the Franchise Agreement, but does not necessarily agree with the timeline imposed in the letter.

Councilwoman Ratti also stated that not all of the recommendations that are in the Tri-Data Report are winnable battles. Councilwoman Ratti hopes that the recommendations that are winnable are not hung up on trying to implement the recommendations that are not winnable. She is not willing to hold up the implementation of some of the winnable issues (such as virtual dispatch) in order to determine where the oversight authority should lie.

Dr. Iser reported that the REMSA letter presented was agreed upon by the City and County Managers. Dr. Iser had no role in writing the letter.

Chairman Smith stated that the other issue to consider is that the actual costs for the oversight has not yet been determined, and that is of great concern to him, especially in light of the Health District's budget shortfall for 2014. The costs would have to be secured for the future and that process will take a while to work through. Chairman Smith agreed that the other items can be worked on while those negotiations are taking place.

Chairman Smith stated that he will send the letter.

Dr. Iser stated that there is discussion among the managers of another concurrent meeting of the Cities, County, and DBOH on January 31. Councilwoman Ratti stated her concern that it may not be timely for another concurrent meeting in this "thoughtful process." She believes work toward laying out the process prior should be completed before another concurrent

meeting is held. The process should be defined by staff rather than the governing board laying out their favorites.

Dr. Iser reported that he commented to the managers that he did not believe enough progress had been made to necessitate another concurrent meeting.

Dr. Humphreys stated that the key message is that these decisions need to be based on their benefit to society rather than their benefit to any organization or institution. That will be the key point in this process. The process needs to be approached with dignity, honor, and respect whether its negotiations or a joint meeting or discussions. We are working for the health and welfare of our community.

Chairman Smith stated that he looks forward to making progress on this issue.

John Slaughter stated that the main reason for the proposed January 31 concurrent meeting is to have discussions and review with the newly elected members of each council and board so that they have a full understanding of the issues being faced by the entities.

Dr. Iser commended Chief Flock for his exemplary public service in summarizing the recommendations and their impacts for the members and that it has been a great help to all.

Dr. Furman stated that the utmost concern should be given for the welfare of our citizens.

Ms. Admirand stated that the letter as written is to be sent by Mr. Smith as the Chairman of the District Board of Health and that the agenda item is not specific enough to allow the Board to take action on this letter. The current agenda item is just a Health Officer report. Ms. Admirand suggested that the letter be agendaized for the next regular DBOH meeting on December 20 under the same language as Agenda Item No. 14, adding "approval of the Letter to REMSA." Ms. Admirand stated the item will need to go on the next agenda.

Chairman Smith questioned whether the letter could be approved under item No. 14, and Mr. Admirand informed Chairman Smith that he had already continued that item to the December 20th meeting, and that anyone who was present for that discussion may have left the meeting when that item was continued.

TIME /
ITEM

SUBJECT / AGENDA

DISCUSSION

ACTION

Chairman Smith stated that he would like to put Item No. 14 back on the agenda, and Ms. Admirand informed Chairman Smith that he could not do that.

Dr. Iser asked Ms. Admirand if the Board could just state individually whether they liked the letter and then Chairman Smith could send it. Ms. Admirand replied no, and stated that the letter must be approved by the Board.

Chairman Smith stated we need to figure out a way to get the letter approved because we need to get the letter out today. Chairman Smith asked that if he made a mistake in continuing Item 14, we need to correct it, because the letter needs to be sent today. Ms. Admirand informed Chairman Smith that he could not put Item No. 14 back on the agenda after continuing it for the reasons already expressed. Ms. Admirand further stated that Item No. 14 was not specific enough to have taken action on the REMSA letter either. Ms. Admirand suggested that Mr. Smith send a letter to the Cities and County that the REMSA letter will be on the agenda for December 20.

Chairman Smith stated that Item No. 13 does state that the Board will be having discussions regarding EMS and that is the subject of the letter. Ms. Admirand informed Chairman Smith that it is not specific enough to inform the public about the actions of the Board. Ms. Admirand again suggested that the item be placed on the agenda for the December 20 meeting with additional specific language relating to the letter. Ms. Admirand stated that this is an Open Meeting Law issue.

Councilwoman Ratti asked Ms. Admirand whether Mr. Smith could act unilaterally and then come back for approval by the Board. Councilwoman Ratti stated that Chairman Smith would be putting himself out on a limb because the Board could come back and overturn that action, but in the City of Sparks, the Mayor, as the Chairman of the City Council, sends letters all the time and then comes to the council for approval. Councilwoman Ratti suggested that if Chairman Smith would like, he could send the letter of his own accord and then ask the Board to ratify his action.

Ms. Admirand stated that is reasonable suggestion, and we can bring back to the Board on the 20th for approval.

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
14.	Discussion and Possible Direction to Staff regarding Emergency Medical Services ("EMS"), including Recommendations Contained in the TriData Report and Various Other EMS Studies	CONTINUED TO DECEMBER 20, 2012 REGULAR MEETING	
15.	Presentation, Discussion, and Possible Direction to Staff Regarding Health in All Policies ("HIAP")	CONTINUED TO DECEMBER 20, 2012 REGULAR MEETING	
16.	Presentation, Discussion, and Possible Direction to Staff regarding the Implementation of the Washoe County Health District Strategic Plan	CONTINUED TO DECEMBER 20, 2012 REGULAR MEETING	
17.	Board Comment – Limited to Announcements or Issues for Future Agendas	No additional announcements or issues for future agendas, other than the items continued, were discussed.	
18.	Public Comment	No public comment was presented.	

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
19.	<p>Motion to Adjourn</p>	<p>There being no further business to come before the Board, the meeting was adjourned.</p>	<p>Dr. Humphreys moved, seconded by Dr. Hess, that the meeting be adjourned.</p> <p><u>MOTION CARRIED</u> The meeting was adjourned at 3:05 p.m.</p>

Joseph P. S.

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

Peggy F. O'Neill

PEGGY F. O'NEILL,
RECORDING SECRETARY

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	Meeting Called to Order, Pledge of Allegiance and Roll Call	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.	Public Comment	No public comment was presented.	
4.	Approval/Deletions – Agenda – December 20, 2012	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. <u>MOTION CARRIED</u>

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
5.	Approval/Deletions – Minutes - Regular Meeting of November 15, 2012	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.
6.	Recognitions	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.	<u>MOTION CARRIED</u>
7.	Proclamations	There were no proclamations this month.	
8.	Consent Agenda	<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>A. <u>Air Quality Management Cases:</u></p> <ol style="list-style-type: none"> 1. Unappealed Citations to the Air Pollution Control Hearing Board: <ol style="list-style-type: none"> a. McClelland Laboratories - Case No. 1098, Unappealed Citation No. 5309 – Staff reported Citation No. 5309, was issued to McClelland Laboratories 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 upheld and a fine in the amount of \$5,000.00 be levied as a negotiated fine. b. Seven Eleven Inc. Store #16235 - Case No. 1100, Unappealed Citation No. 5311 – Staff reported Citation No. 5311, was issued to Seven Eleven Inc. Store #16235 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 	

- Management. Staff recommends the citation be **upheld** and a fine in the amount of **\$500.00** be levied as a **negotiated fine**.
- c. **Maverick Inc. - Case No. 1102, Unappealed Citation No. 5314** – Staff reported **Citation No. 5314**, was issued to **Maverick Inc.** 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 **upheld** and a fine in the amount of **\$500.00** be levied as a **negotiated fine**.
 - d. **Quick Stop Market #160 – Case No. 1103, Unappealed Citation No. 5313** – Staff reported **Citation No. 5313**, was issued to **Quick Stop Market #160** 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 **upheld** and a fine in the amount of **\$500.00** be levied as a **negotiated fine**.
 - e. **Quick Stop Market #160 – Case No. 1103, Unappealed Citation No. 5313** – Staff reported **Citation No. 5313**, was issued to **Quick Stop Market #160** 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 **upheld** and a fine in the amount of **\$500.00** be levied as a **negotiated fine**.
 - f. **Guardian Environmental – Case No. 1104, Unappealed Citation No. 5261** – Staff reported **Citation No. 5261**, was issued to **Guardian Environmental** 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 **upheld** and a fine in the amount of **\$2,500.00** be levied as a **negotiated fine**.

2. Recommendation to Uphold Citation Appealed to the Air Pollution Control Hearing Board: None.

3. Recommendation for Variance: None.

B. Sewage, Wastewater & Sanitation Cases: None.

C. Budget Amendments / Interlocal Agreements:

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.

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.

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.

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.

5. The Board was advised Staff recommends ratification of Interlocal Agreement between the Washoe County Health District (WCCHD) and the Board of Regents of the Nevada System of Higher Education on

ACTION ITEMS: (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.

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
		<p>Behalf of the University of Nevada Cooperative Extension to utilize WCHD facilities for the "All 4 Kids©: Resiliency in the Obesogenic Environment" research project for the period upon approval by all parties through June 30, 2013; and, if approved, authorize the Chairman to execute</p> <p>D. <u>Staff recommends approval of the Washoe County Health District Indirect Cost Policy.</u></p> <p><u>Discussion on Agenda Item No. 8.D:</u></p> <p>Patsy Buxton, Fiscal Compliance Officer, presented the Washoe County Health District Indirect Cost Policy and a schedule prepared to support and expand on the methodology used in preparing the indirect cost rate policy. Specifically, a comparison of the EPHP (Epidemiology and Public Health Preparedness) and AQM (Air Quality Management) division indirect cost rates was illustrated. Ms. Buxton referred the Board to the back of page 7 of their packet. On the bottom of the page are the division rates for each division.</p> <p>Ms. Buxton reported that the indirect rate is calculated and "fixed" in advance for a specific future period on the basis of an estimate of that period's ratio of indirect costs and direct salaries and wages. Once the actual indirect and direct costs of that period are known, the difference between the estimated and actual indirect cost is "carried forward" as an adjustment to the calculation of a future rate. This places any adjustments to the rate in a future period, allowing us to avoid having to file amended federal or state program reports when actual indirect costs vary from estimated indirect costs.</p> <p>Dr. Hess asked what rate is used when applying for a grant. Ms. Buxton replied that technically, you would apply the rate for that division, but we negotiate the actual rate.</p> <p>Dr. Humphreys questioned if the formula for these calculations has been consistent over the years, and Ms. Buxton confirmed that assumption. Ms. Buxton further reported that the application of the policy and recovering the indirect would affect revenue. Ms. Buxton reported that depending on negotiations with our state partners, we are anticipating an increase in federal indirect revenue of approximately \$500,000 if we are successful in applying a 10% rate to our awards.</p> <p>Board Comment</p>	<p>Councilwoman Zadra moved, seconded by Dr. Hess, that the Consent Agenda be approved as modified in a single motion.</p> <p><u>MOTION CARRIED</u></p>
			<p>Dr. Humphreys moved, seconded by Councilwoman Zadra, that the Washoe County Health District Indirect Cost Policy be approved as presented.</p> <p><u>MOTION CARRIED</u></p>

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
		<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 deliver 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><u>MOTION CARRIED</u></p>
9.	<p>Air Pollution Control Hearing Board Cases Appealed to the District Board of Health.</p>	<p>Charlene Albee, Enforcement Branch Chief, reported that Reno Rock Transport - 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>	

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.

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.

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.

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.

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

Board Comment

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
		<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><u>MOTION CARRIED</u></p>
10.	<p><u>PUBLIC HEARING:</u> 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 with Onboard Refueling Vapor Recovery (ORVR).</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 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 & 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><u>MOTION CARRIED</u></p>

11.

Regional Emergency Medical Services Authority:

- A. Review and Acceptance of the Operations and Financial Report for October, 2012; and
- B. Update of REMSA's Community Activities Since October, 2012

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.

Mr. Gubbels presented REMSA's community service activities since October, 2012.

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.

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.

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

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. ECOMMN Dr. Iser stated that he has heard \$850,000 investment to upgrade the Tiburon system.

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.

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.

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.

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.

Dr. Humphreys asked if the CAD to CAD will allow more autonomous communication.

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

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
		<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><u>MOTION CARRIED</u></p>
12.	<p>Discussion and Possible Direction to Staff Regarding Emergencies Medical Services ("EMS"), Including Recommendations Contained in the TriData Report and Various Other EMS Studies.</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"> • "Fix Dispatch" (many TriData recommendations related to Dispatch); • Open the REMSA Franchise Agreement and invite REMSA to participate; County and both City Managers to participate in the franchise negotiation; and • Develop an EMS Agency that has authority and oversight in Reno, Sparks, and Washoe County. <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>November 7, 2012 (Reno City Council): 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>	

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
		<p>implementation and to work with Health District in implementation of those recommendations.</p> <p>November 19, 2012 (Managers' Meeting): 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>December 6, 2012 (DBOH): Update DBOH on recent meetings. Chairman Smith to forward letter penned by Andrew Clinger to REMSA.</p> <p>December 10, 2012 (Sparks City Council): 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>December 11, 2012 (BCC): 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><u>MOTION CARRIED</u></p>

13.

Presentation, Discussion, and Possible Direction to Staff Regarding Health in All Policies (“HiAP”)

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 cyclists 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.

How do HiAPs work?

- ▶ Level 1—Reducing disease burden (locating schools away from freeways or other sources of pollution)
- ▶ Level 2—Reducing risk factors for disease (smoking bans, retail tobacco licensing to reduce opportunities for smoking)
- ▶ Level 3—Focus on underlying disease determinants (create a healthier built environment by incorporating health into land use decisions)

Recommendations:

- ▶ **Promote Healthy Communities - Active Transportation; Housing & Indoor Spaces; Parks, Urban Greening and Places to be Active; Violence Prevention; Healthy Food**
 - ❖ Data
 - Map transit to essential destinations
 - Assess health impacts active transportation
 - ❖ Complete Streets
 - Training for road designers, planners, operations
 - Safety of all users
 - ❖ Amend Vehicle Code to allow localities to lower speed limits
 - Possible lower highway speed limits
 - ❖ Trails and greenways
 - Bike trails, walking trails
 - Bicycle lanes
- ▶ **Promote Healthy Public Policy - State Guidance; Embedding Health in Decision-Making; Data & Research; Collaboration & Community Engagement**
- ▶ Each recommendation - Links to health
 - ❖ Policies related to policy goals influence environments in which people live, work, and play
 - ❖ Environments influence adoption of behaviors that promote or diminish health
 - ❖ Health linked to productivity, healthy economy

Councilwoman Zadra left the meeting at 2:45 pm.

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
	<p>Board Comment</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><u>MOTION CARRIED</u></p>
14.	<p>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</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><u>MOTION CARRIED</u></p>

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
	Matters Related to Public Health	<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>ACTION ITEM: 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>Presentation, Discussion, and Possible Direction to Staff Regarding Acceptance and Implementation of the Washoe County Health District Strategic Plan</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><u>MOTION CARRIED</u></p>

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
16.	Review and Acceptance of the Monthly Public Health Fund Revenue and Expenditure Report for November, 2012	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. <u>MOTION CARRIED</u>
17.	Presentation, Discussion, and Possible Direction to Staff Regarding FY 14 Health Fund Budget	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.	Election of District Board of Health Chairman for 2013 – 2014	Continued to January 24, 2013 regular meeting.	
19.	Election of District Board of Health Vice Chair for 2013 – 2014	Continued to January 24, 2013 regular meeting.	
20.	<u>Staff Reports and Program Updates</u> 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> <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>	
17.	Board Comment		

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

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

Peggy F. O'Neill
 PEGGY F. O'NEILL,
 RECORDING SECRETARY



WASHOE COUNTY HEALTH DISTRICT

AIR QUALITY MANAGEMENT DIVISION



Public Health
Prevent. Promote. Protect.

DATE: January 24, 2013

TO: District Board of Health

FROM: Kevin Dick, Director, Air Quality Management

SUBJECT: Mustang Market LLC – Case No. 1105
Unappealed Citation No. 5317
Agenda Item: 9. A. 1. a.

Recommendation

Air Quality Management Staff recommends that Citation No. 5317 be upheld and a fine of \$1,250 be levied against Mustang Market LLC for failure to conduct the required annual performance testing in accordance with Condition No. 4 of Permit to Operate No. G02-0011. Failure to conduct the required testing constitutes a major violation of the District Board of Health Regulations Governing Air Quality Management, specifically Section 030.2175, Operations Contrary to Permit. This is a negotiated settlement.

Recommended Fine: \$1,500.00

Negotiated Fine: \$1,250.00

Background

On November 16, 2012, AQ Specialist Michael Osborn conducted a routine gasoline dispensing facility inspection at the Mustang Market located at 12155 East Interstate 80 in Washoe County, Nevada. During the inspection, Specialist Osborn noted that the required annual Air to Liquid (A/L) and Static Pressure Decay Tests had not be conducted. Condition No. 4 of Permit to Operate No. G02-0011 issued for the gasoline dispensing equipment states:

An annual A/L (Air to Liquid) Test and Static Pressure Decay Test will be required to demonstrate compliance with the CARB Executive Orders for vacuum assist phase II vapor recovery systems. The AQMD must be notified at least 72 hours prior to the test. The testing must be completed 90 days from the expiration date of this permit and the results submitted within 30 days of the test.

Specialist Osborn also noted that during the previous inspection, conducted on May 17, 2012, the testing requirement was noted in the comments section of the inspection form that was signed by Mr. Davinder Bajwa, the facility owner. After completing the inspection, Specialist Osborn advised Mr. Bajwa that he had ten days to secure a testing date in order to demonstrate compliance with Condition No. 4 of the permit to operate.

Based on the results of the inspection and file review, Specialist Osborn issued Notice of Violation Citation No. 5317 for a major violation of Section 030.02175, Operations Contrary to Permit.

P.O. BOX 11130 Reno, NV 89520-0027 • (775) 784-7200 • FAX (775) 784-7225

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DBOH AGENDA ITEM NO. 9. A. 1. a.

January 24, 2013
DBOH/Mustang Market LLC / Case 1105
Page 2

Settlement

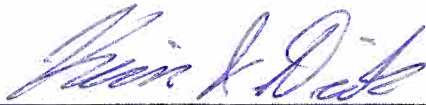
On November 30, 2012, Senior Air Quality Specialist Dennis Cerfoglio conducted a negotiated settlement meeting attended by Air Quality Engineer II Michael Wolf and Mr. Bajwa. After consideration of all of the facts presented in the case, including the fact that Mr. Bajwa had been given notice of the testing requirement on May 17, 2012, AQ Specialist Cerfoglio proposed that Citation No. 5317 be upheld with a fine of \$1,250. Mr. Bajwa agreed to the condition of the negotiated settlement and a Memorandum of Understanding was signed by both parties.

As a follow up, the required testing was completed on January 2, 2013, and the results submitted to the Air Quality Management office on January 7, 2013.

Alternatives

1. The District Board of Health may determine that no violation of the Regulations has taken place and dismiss Citation No. 5317.
2. The Board may determine to uphold Citation No. 5317 and levy any fine in the range of \$0 to \$10,000.

In the event the Board determines to change the proposed penalty, the matter should be continued so that Mustang Market LLC may be properly noticed.



Kevin Dick, Division Director
Air Quality Management

KD/DC: ma



**DISTRICT HEALTH DEPARTMENT
AIR QUALITY MANAGEMENT DIVISION**

MEMORANDUM OF UNDERSTANDING

WASHOE COUNTY HEALTH DISTRICT
AIR QUALITY MANAGEMENT DIVISION

Date: November 30, 2012

Company Name: Mustang Market LLC

Address: 12155 I-80 East, Sparks, NV

Notice of Violation No.: 5317 Case No.: 1105

The staff of the Air Quality Management Division of the Washoe County District Health Department issued the above referenced citation for the violation of

Regulation: 0302175 Cond #4 No Static Pressure Decay Testing

A settlement of this matter has been negotiated between the undersigned parties resulting in a penalty amount of \$ 1,250⁰⁰. This settlement will be submitted to the District Board of Health for review at the regularly scheduled meeting on January 24, 2012.

[Signature]
Signature of Company Representative

[Signature]
Signature of District Representative

DAVINDER S. BAJWA
Print Name

DENNIS A. CERFOGLIO
Print Name

OWNER
Title

Sr. Air Quality Specialist
Title

[Signature]
Witness

[Signature]
Witness

Witness

Witness

RECOMMENDED FINE WORKSHEET

DATE: 11-16-2012 CASE NO.: 1105 NOV NO.: 5317

COMPANY NAME: MUSTANG MARKET – CHEVRON STATION #301419

CONTACT NAME: DAVINDER BAJWA, FACILITY OPERATOR

(MAJOR / MINOR)

VIOLATION OF SECTION(S): 030.2175 VIOLATION OF PERMIT CONDITION

X 1ST VIOLATION _____ 2ND VIOLATION _____ 3RD VIOLATION

<u>YES</u>	HAZARDOUS AIR POLLUTANT	YES / NO	<u>VOC'S & HAP'S</u>	TYPE OF AIR CONTAMINANT (CO, NOX, SOX, PM, VOC'S, HAP'S)
<u>YES</u>	LEGALLY PERMITTED SOURCE	YES / NO	<u>NO</u>	PUBLIC HEALTH EXPOSURE YES / NO
<u>N/A</u>	NUMBER OF DAYS IN VIOLATION	YES / NO	<u>NO</u>	PUBLIC COMPLAINTS YES / NO

1. **DEGREE OF VIOLATION:** (The degree to which the person/company has deviated from the regulatory requirements) MINOR MODERATE MAJOR

Failure to conduct required A/L and Static Pressure Decay tests.

2. **ECONOMIC BENEFIT COMPONENT:** (OPTIONAL): MINOR MODERATE MAJOR
ESTIMATED COST \$ \$700 per year
(Economic effect to the person/company for NOT complying with the Regulations including avoided costs and delayed costs)

3. **DEGREE OF COOPERATION:** (The person/company's efforts to immediately cease the violation and come into compliance) MINOR MODERATE MAJOR

4. **ADDITIONAL COMMENTS:**

RECOMMENDED FINE: \$ 1,500



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.



WASHOE COUNTY HEALTH DISTRICT
 AIR QUALITY MANAGEMENT DIVISION
 1001 EAST NINTH ST. • SUITE B171 • RENO NV 89512
 (775) 784-7200



NOTICE OF VIOLATION

NOV 5317

DATE ISSUED: Nov 16, 2012

ISSUED TO: Mustang Market LLC PHONE #: 342-0444

MAILING ADDRESS: 12155 East I-80 CITY/ST: Sparks, NV ZIP: 89498

NAME/OPERATOR: Darinder Bajwa PHONE #: Same

PERMIT NO. 2502-0011 COMPLAINT NO. CMP120202

YOU ARE HEREBY OFFICIALLY NOTIFIED THAT ON 11/16/2012 (DATE) AT 9:30 a.m. (TIME), YOU ARE IN VIOLATION OF THE FOLLOWING SECTION(S) OF THE WASHOE COUNTY DISTRICT BOARD OF HEALTH REGULATIONS GOVERNING AIR QUALITY MANAGEMENT:

- | | |
|--|--|
| <input type="checkbox"/> MINOR VIOLATION OF SECTION: | <input checked="" type="checkbox"/> MAJOR VIOLATION OF SECTION: |
| <input type="checkbox"/> 040.030 __ DUST CONTROL | <input type="checkbox"/> 030.000 OPERATING W/O PERMIT |
| <input type="checkbox"/> 040.055 __ ODOR/NUISANCE | <input checked="" type="checkbox"/> 030.2175 VIOLATION OF PERMIT CONDITION |
| <input type="checkbox"/> 040.200 __ DIESEL IDLING | <input type="checkbox"/> 030.105 ASBESTOS/NESHAP |
| <input type="checkbox"/> OTHER _____ | <input type="checkbox"/> OTHER _____ |

VIOLATION DESCRIPTION: Violation of permit condition #4. An A/E and Static Pressure Decay test must be conducted annually for this assist vapor recovery system.

LOCATION OF VIOLATION: Mustang Market (Chevron)

POINT OF OBSERVATION: Permit to Operate 2502-0011 file review

Weather: cool/raining Wind Direction From: N E S W

Emissions Observed: None
 (If Visual Emissions Performed - See attached Plume Evaluation Record)

WARNING ONLY: Effective _____ a.m./p.m. _____ (date) you are hereby ordered to abate the above violation within _____ hours/days. I hereby acknowledge receipt of this warning on the date indicated.

Signature _____

CITATION: You are hereby notified that effective on Nov 16, 12 (date) you are in violation of the section(s) cited above. You are hereby ordered to abate the above violation within 10 hours/days. You may contact the Air Quality Management Division to request a negotiated settlement meeting by calling (775) 784-7200. You are further advised that within 10 working days of the date of this Notice of Violation, you may submit a written petition for appeal to the Washoe County Health District, Air Quality Management Division, P.O. Box 11130, Reno, Nevada 89520-0027. Failure to submit a petition within the specified time will result in the submission of this Notice of Violation to the District Board of Health with a recommendation for the assessment of an administrative fine.

SIGNING THIS FORM IS NOT AN ADMISSION OF GUILT

Signature: [Signature] Date: 11-16-12

Issued by: [Signature] Title: 4QST

PETITION FOR APPEAL FORM PROVIDED

**AIR QUALITY MANAGEMENT
PERMIT TO OPERATE # 602-0011
ISSUED TO MUSTANG MARKET - CHEVRON STATION #301419
LOCATED AT 12155 EAST I-80, SPARKS NV 89434**



PERMIT TO OPERATE

An Air Pollution Emission Source

No. G02-0011

Issued By Air Quality Management Division, Washoe County Health District

P.O. Box 11130, Reno, Nevada 89520-0027 • Phone (775) 784-7200

MUSTANG MARKET LLC Gen Air - Gasoline

ISSUED TO:

ADDRESS:

12155 E INTERSTATE 80, SPARKS NV, 89434

LOCATION:

12155 EAST I-80, SPARKS, NV 89440

EQUIPMENT COVERED UNDER THIS PERMIT GASOLINE DISPENSING FACILITY WITH VACUUM ASSIST PHASE II VAPOR RECOVERY, CARB EXECUTIVE ORDER #G-70-153-AD, 8 GASOLINE DISPENSING NOZZLES

THE CONDITIONS OF OPERATION LISTED ON THIS PERMIT SUPERCEDE ALL PREVIOUS PERMIT CONDITIONS

CONDITIONS OF OPERATION LISTED ON THIS PERMIT:

- A. **ALTERATIONS:** This permit becomes void upon any change of ownership or address or any alteration of permitted equipment.
- B. **POSTING:** This permit shall be posted on or near the equipment listed above. This permit shall be made readily available at all times while the equipment is operating.
- C. **MODIFICATION OF EQUIPMENT:** Any modification of the equipment other than normal repair and maintenance will require a new permit.
- D. **RECORDS:** Any records of operation which effect the potential of the source to emit air pollutants, such as fuel or products consumed, products produced, hours of operation, chemicals or supplies used in source operation, must be maintained for a period of at least 5 years and made available to the Control Officer upon request.
- E. **EQUIPMENT FAILURE:** All upset or breakdown conditions resulting in increased emissions or air pollutants shall be reported in compliance with District regulations, Section 020.075 and 020.076.
- F. **ACCESS:** The Control Officer will be provided access to the facility to inspect operations and equipment covered under this permit whenever necessary to determine compliance with this permit and any other air pollution limitations specified in District regulations.

ADDITIONAL CONDITIONS:

- 1: The annual throughput/consumption figures must be submitted in writing to the A.Q.M.D. no later than the 20th of the month, approximately 6 weeks prior to the expiration date of the permit.
- 2: All gasoline transfer and dispensing facilities must operate in accordance with Section 040.080 of the Washoe County District Board of Health Regulations governing Air Quality Management.
- 3: To reduce evaporative loss all components of the Phase I and Phase II vapor recovery systems shall be installed and maintained in accordance with California Air Resources Board (CARB) Executive Orders, or New York State Department of Environmental Conservation approvals.
- 4: An annual A/L (Air to Liquid) Test and Static Pressure Decay Test will be required to demonstrate compliance with the CARB Executive Orders for vacuum assist phase II vapor recovery systems. The AQMD must be notified at least 72 hours prior to the test. The testing must be completed 90 days from the expiration date of this permit and the results submitted within 30 days of the test.
- 5: A flow limiter is required on dispensers that have a maximum flow rate in excess of 10 gallons/minute.
- 6: All hoses, boots, faceplates/flexible cones, nozzle shut off mechanisms, check valves, swivels, tanks, tank fill tubes, and fill tube cap seals must be maintained in good working order with regular maintenance to prevent leakage and excess escape of vapors (i.e., no tears, slits, holes, leaks, or malfunctions -- Section 040.080.)
- 7: In accordance with Section 040.095 of the Washoe County Air Quality Regulations and 40 CFR, Part 80, all gasoline dispensed to motor vehicles between October 1 and January 31 must contain the proper amount of oxygenate and each dispenser must be properly labeled with the following statement: The gasoline dispensed from this pump is oxygenated and will reduce carbon monoxide pollution from motor vehicles. The label must be clearly visible to the public on the upper two-thirds of the pump on the vertical surface near the gallonage and price meters.
- 8: Fuel spills or leaks must be cleaned up or corrected immediately using proper waste disposal methods. (Including accumulations of fuel in spill containers, condensation pots, and liquid collectors).

Joseph A. Ison M.D., P.H., M.S.
CONTROL OFFICER

09/30/2012
EXPIRATION DATE

\$343.00
ANNUAL RENEWAL FEE

G02-0011
PERMIT NO.

FAILURE TO COMPLY WITH THE CONDITIONS OF THIS PERMIT MAY RESULT IN CITATIONS OR PERMIT REVOCATION



PERMIT TO OPERATE

An Air Pollution Emission Source

No. G02-0011

Issued By Air Quality Management Division, Washoe County Health District

P.O. Box 11130, Reno, Nevada 89520-0027 • Phone (775) 784-7200

ISSUED TO: MUSTANG MARKET LLC Gen Air - Gasoline

ADDRESS: 12155 E INTERSTATE 80, SPARKS NV, 89434

LOCATION: 12155 EAST I-80, SPARKS, NV 89440

EQUIPMENT COVERED UNDER THIS PERMIT GASOLINE DISPENSING FACILITY WITH VACUUM ASSIST PHASE II VAPOR RECOVERY, CARB EXECUTIVE ORDER #G-70-153-AD, 8 GASOLINE DISPENSING NOZZLES

9: "Instructions for operating the phase II vapor recovery equipment must be posted for the customers, and must stress that "Topping Off" is prohibited --Section 040.080.C. The Air Quality Management Division's answer line phone number must be posted for customers with comments/problems regarding the nozzles - (775) 784-7200."

10: VACUUM/ASPIRATOR ASSIST SYSTEMS: The assist system must be operating at all times when the facility is open for business.

11: All operations must comply with 40 CFR Part 63, Subpart CCCCCC - National Emission Standards for Hazardous Air Pollutants (NESHAP) for Source Category: Gasoline Dispensing Facilities.

Joseph P. Iser M.D., D.P.H., M.S.
CONTROL OFFICER

09/30/2012
EXPIRATION DATE

\$343.00
ANNUAL RENEWAL FEE

G02-0011
PERMIT NO.

FAILURE TO COMPLY WITH THE CONDITIONS OF THIS PERMIT MAY RESULT IN CITATIONS OR PERMIT REVOCATION



PERMIT TO OPERATE

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THE CONDITIONS OF OPERATION LISTED ON THIS PERMIT SUPERCEDE ALL PREVIOUS PERMIT CONDITIONS

CONDITIONS OF OPERATION LISTED ON THIS PERMIT:

- A. **ALTERATIONS:** This permit becomes void upon any change of ownership or address or any alteration of permitted equipment.
- B. **POSTING:** This permit shall be posted on or near the equipment listed above. This permit shall be made readily available at all times while the equipment is operating.
- C. **MODIFICATION OF EQUIPMENT:** Any modification of the equipment other than normal repair and maintenance will require a new permit.
- D. **RECORDS:** Any records of operation which effect the potential of the source to emit air pollutants, such as fuel or products consumed, products produced, hours of operation, chemicals or supplies used in source operation, must be maintained for a period of at least 5 years and made available to the Control Officer upon request.
- E. **EQUIPMENT FAILURE:** All upset or breakdown conditions resulting in increased emissions or air pollutants shall be reported in compliance with District regulations, Section 020.075 and 020.076.
- F. **ACCESS:** The Control Officer will be provided access to the facility to inspect operations and equipment covered under this permit whenever necessary to determine compliance with this permit and any other air pollution limitatons specified in District regulations.

ADDITIONAL CONDITIONS:

- 1: The annual throughput/consumption figures must be submitted in writing to the A.Q.M.D. no later than the 20th of the month, approximately 6 weeks prior to the expiration date of the permit.
- 2: All gasoline transfer and dispensing facilities must operate in accordance with Section 040.080 of the Washoe County District Board of Health Regulations governing Air Quality Management.
- 3: To reduce evaporative loss all components of the Phase I and Phase II vapor recovery systems shall be installed and maintained in accordance with California Air Resources Board (CARB) Executive Orders, or New York State Department of Environmental Conservation approvals.
- 4: An annual A/L (Air to Liquid) Test and Static Pressure Decay Test will be required to demonstrate compliance with the CARB Executive Orders for vacuum assist phase II vapor recovery systems. The AQMD must be notified at least 72 hours prior to the test. The testing must be completed 90 days from the expiration date of this permit and the results submitted within 30 days of the test.
- 5: A flow limiter is required on dispensers that have a maximum flow rate in excess of 10 gallons/minute.
- 6: All hoses, boots, faceplates/flexible cones, nozzle shut off mechanisms, check valves, swivels, tanks, tank fill tubes, and fill tube cap seals must be maintained in good working order with regular maintenance to prevent leakage and excess escape of vapors (i.e., no tears, slits, holes, leaks, or malfunctions -- Section 040.080.)
- 7: In accordance with Section 040.095 of the Washoe County Air Quality Regulations and 40 CFR, Part 80, all gasoline dispensed to motor vehicles between October 1 and January 31 must contain the proper amount of oxygenate and each dispenser must be properly labeled with the following statement: The gasoline dispensed from this pump is oxygenated and will reduce carbon monoxide pollution from motor vehicles. The label must be clearly visible to the public on the upper two-thirds of the pump on the vertical surface near the gallonage and price meters.

Joseph P. Iser MD, DEPH, MS

CONTROL OFFICER

09/30/2013
EXPIRATION DATE

\$475.00
ANNUAL RENEWAL FEE

G02-0011
PERMIT NO.

FAILURE TO COMPLY WITH THE CONDITIONS OF THIS PERMIT MAY RESULT IN CITATIONS OR PERMIT REVOCATION

WASHOE COUNTY



HEALTH DISTRICT

PERMIT TO OPERATE

An Air Pollution Emission Source

No. G02-0011

Issued By Air Quality Management Division, Washoe County Health District

P.O. Box 11130, Reno, Nevada 89520-0027 • Phone (775) 784-7200

ISSUED TO: MUSTANG MARKET LLC Gen Air - Gasoline

ADDRESS: 12155 E INTERSTATE 80, SPARKS NV, 89434

LOCATION: 12155 EAST I-80, SPARKS, NV 89440

EQUIPMENT COVERED UNDER THIS PERMIT GASOLINE DISPENSING FACILITY WITH VACUUM ASSIST PHASE II VAPOR RECOVERY, CARB EXECUTIVE ORDER #G-70-153-AD, 8 GASOLINE DISPENSING NOZZLES

8: Fuel spills or leaks must be cleaned up or corrected immediately using proper waste disposal methods. (Including accumulations of fuel in spill containers, condensation pots, and liquid collectors).

9: "Instructions for operating the phase II vapor recovery equipment must be posted for the customers, and must stress that "Topping Off" is prohibited --Section 040.080.C. The Air Quality Management Division's answer line phone number must be posted for customers with comments/problems regarding the nozzles - (775) 784-7200."

10: VACUUM/ASPIRATOR ASSIST SYSTEMS: The assist system must be operating at all times when the facility is open for business.

11: All operations must comply with 40 CFR Part 63, Subpart CCCCCC - National Emission Standards for Hazardous Air Pollutants (NESHAP) for Source Category: Gasoline Dispensing Facilities.

Joseph P. Iser MD, DrPH, MS

CONTROL OFFICER

09/30/2013

EXPIRATION DATE

\$475.00

ANNUAL RENEWAL FEE

G02-0011

PERMIT NO.

FAILURE TO COMPLY WITH THE CONDITIONS OF THIS PERMIT MAY RESULT IN CITATIONS OR PERMIT REVOCATION

COMPLAINT INVESTIGATION REPORT
Washoe County Air Quality Management Division

Complaint Number: **CMP12-0202**

Complaint Status: NOV

Source of Complaint: INVESTIGATOR

Complaint Type: PERMIT

Date Received: 11/16/2012

Time: 9:30 a.m.

Inspector: MOSBORN

Inspector Area: 4

Complaint Description: CITATION 5317, CASE 1105 - 030.2175 VIOLATION OF PERMIT TO OPERATE
CONDITION #4

Address:

Location: 12155 EAST I-80, SPARKS NV 89434

Parcel Number:

Related Permit Number:

Complainant:

MICHAEL OSBORN, AQ SPECIALIST II
AIR QUALITY MANAGEMENT DIVISION
1001 E 9TH ST STE B171
RENO NV 89512
775-784-7231

Responsible Party:

MUSTANG MARKET LLC
DAVINDER BAJWA
12155 EAST I-80
SPARKS NV 89440
775-342-0444

Investigation:

On November 16th, 2012, Specialist Osborn entered the Mustang Market Permit to Operate G02-0011 for the purpose of a permit renewal inspection. The Mustang Market LLC is a gasoline dispensing facility with vacuum assist, phase II vapor recovery.

On initializing the inspection one nozzle was found out of round with fuel, water and trash in some of the vaults.

A check of the file conditions of operation revealed that the Mustang Market has not completed the annual air to liquid test and static pressure decay test as required under condition #4 of their permit to operate.

On a prior inspection dated May 17, 2012, it was noted that Mr Bajwa was advised of his need to complete the testing no later than September 30, 2012. This was also annotated on the vapor recovery inspection sheet of which a copy was presented to Mr. Bajwa on May 17, 2012.

After completing the inspection all items were explained to Mr. Bajwa again advising him that he had ten days to secure a testing date ref. Condition #4. Mr Bajwa was further presented with Notice of Violation #5317 for violation of 030.2175; Condition #4, for required testing. Mr. Bajwa was further presented with a petition for appeal. Mr Bajwa received copies of the violation, inspection

sheet and appeal form.

Enforcement Activities

Warning Citation...: 11/16/2012
NOV.....:

Citation Number: 5317
NOV Number....: 0
Case Number.....: 1105
Amount.....: \$0.00

Settlement.....:
Appealed.....:
Upheld.....:

Amount.....: \$0.00

Status Information

Initialized By.....: MOSBORN
Date Assigned.....: 11/16/2012

Completed Date...:
Completed By.....:

**AIR QUALITY MANAGEMENT
VAPOR RECOVERY INSPECTION SHEET
ISSUED TO MUSTANG MARKET - CHEVRON STATION #301419
LOCATED AT 12155 EAST I-80, SPARKS NV 89434
DATED MAY 17, 2012**



WASHOE COUNTY HEALTH DISTRICT
 AIR QUALITY MANAGEMENT DIVISION
VAPOR RECOVERY INSPECTION SHEET

STATION Western Market LLC ADDRESS 12155 E-190
 CITY Sparks ZIP 89434 CONTACT Darinda Baxine
 OWNER/OPERATOR Darinda Baxine PHONE (775) 342-0444
 NUMBER OF DISPENSERS (GASOLINE) 4 NUMBER OF NOZZLES (GASOLINE) 8
 NUMBER OF PRODUCT GRADES (GASOLINE) 3 NUMBER OF NOZZLES (DIESEL) 3
 FOR EACH DISPENSER

Date 5-17-12
 Permit # 1302-0011
 INSP OSBORNO
 VN# _____

DEFECTIVE OR NON-OPERABLE EQUIPMENT

NOZZLE NUMBER										
GAS GRADE										

PUMPS	1. VACUUM PUMP																		
	2. LEAKS FTGS/SWIVELS																		
	3. USE INSTRUCTIONS																		
	4. WINTER FUEL ADVISEMENT ..																		
HOSE	1. CUT/PUNCTURED																		
	2. FLATTENED/KINKED																		
	3. LENGTH																		
	4. SWIVEL																		
NOZZLE	5. RETRACTORS																		
	1. NOZZLE/SPOUT																		
	2. SWIVEL JOINTS																		
	3. FACE SEAL																		
	4. BELLOWS																		
VENT PIPES	5. VAPOR CHECK VALVE																		
	1. 2" DIA. X 12 HGT.-MIN.																		
OTHER	1. VACUUM/ASSIST EQUIP																		
	2. AFTERBURNER																		

O.K.

PHASE I System Type: Two-Point Coaxial _____ Other _____ PHASE II INSTALLED YES NO _____ BALANCE ASSIST

	TANK #1	TANK #2	TANK #3	TANK #4		TANK #1	TANK #2	TANK #3	TANK #4
1. PRODUCT GRADE (UR, U+, UP)					8. DEFECTIVE VAPOR POPPET				
2. TANK CAPACITY, GALLONS					9. MISSING FILL CAP				
3. MISSING VAPOR CAP					10. DEFECTIVE FILL CAP				
4. DEFECTIVE VAPOR CAP					11. FILL CAP GASKET				
5. VAPOR CAP NOT ENGAGED					12. FUEL/DEBRIS IN VAULT				
6. VAPOR CAP GASKET					13. VAULT DRAIN VALVE				
7. DEFECTIVE COAXIAL					14. FILL-VAP-STEM LOOSE				

REMARKS: Approved All + Static Pressure Decant due 9/30/12. See condition #4 for details. All hose huzzles ok in this date, no violations noted

OPERATOR (X) [Signature]

Unless otherwise noted all equipment must be repaired or replaced within 7 working days of the inspection date. Failure to repair or replace equipment may result in a Notice of Violation for permit conditions (Section 030.2175 - Operations Contrary to Permit, Washoe County District Board of Health Regulations Governing Air Quality Management).

AIR QUALITY MANAGEMENT
VAPOR RECOVERY INSPECTION SHEET
ISSUED TO MUSTANG MARKET - CHEVRON STATION #301419
LOCATED AT 12155 EAST I-80, SPARKS NV 89434
DATED NOVEMBER 16, 2012



WASHOE COUNTY HEALTH DISTRICT
 AIR QUALITY MANAGEMENT DIVISION
 VAPOR RECOVERY INSPECTION SHEET

STATION Mustang Market II ADDRESS 12155 East I-80
 CITY Sparks ZIP 89440 CONTACT Darinda BAJWA
 OWNER/OPERATOR Darinda Bergman PHONE (775) 342-0444
 NUMBER OF DISPENSERS (GASOLINE) 4 NUMBER OF NOZZLES (GASOLINE) 8
 NUMBER OF PRODUCT GRADES (GASOLINE) 3 NUMBER OF NOZZLES (DIESEL) 8
 FOR EACH DISPENSER

Date 11-16-2012
 Permit # 202-0011
 INSP OSBORNO
 VN# _____

DEFECTIVE OR NON-OPERABLE EQUIPMENT

NOZZLE NUMBER	<u>3</u>															
GAS GRADE	<u>All grades</u>															

PUMPS	1. VACUUM PUMP																
	2. LEAKS FTGS/SWIVELS																
	3. USE INSTRUCTIONS																
	4. WINTER FUEL ADVISEMENT ..																
HOSE	1. CUT/PUNCTURED																
	2. FLATTENED/KINKED																
	3. LENGTH																
	4. SWIVEL																
NOZZLE	5. RETRACTORS																
	1. NOZZLE <u>(SPOUT)</u>	<u>X</u>	<u>out of round</u>														
	2. SWIVEL JOINTS																
	3. FACE SEAL																
	4. BELLOWS																
VENT PIPES	5. VAPOR CHECK VALVE																
	1. 2" DIA. X 12 HGT.-MIN.																
OTHER	1. VACUUM/ASSIST EQUIP																
	2. AFTERBURNER																

PHASE I System Type: Two-Point Coaxial Other _____ PHASE II INSTALLED YES NO BALANCE ASSIST

	TANK #1	TANK #2	TANK #3	TANK #4		TANK #1	TANK #2	TANK #3	TANK #4
1. PRODUCT GRADE (UR, U+, UP)					8. DEFECTIVE VAPOR POPPET	<u>C</u>	<u>D</u>		
2. TANK CAPACITY, GALLONS					9. MISSING FILL CAP				
3. MISSING VAPOR CAP					10. DEFECTIVE FILL CAP				
4. DEFECTIVE VAPOR CAP					11. FILL CAP GASKET				
5. VAPOR CAP NOT ENGAGED					12. FUEL/DEBRIS IN VAULT	<u>X</u>	<u>X</u>		
6. VAPOR CAP GASKET					13. VAULT DRAIN VALVE				
7. DEFECTIVE COAXIAL					14. FILL-VAP-STEM LOOSE				

REMARKS: Spout #9 is out of round. Small diesel fuel spill by Pump 9. Please clean up. Check to insure vaults are clear of fuel and debris.

NOV # 5317 issued for violation of Condition #4
Call 784-7231 with date of testing 10 days to comply
 OPERATOR (X) [Signature]

Unless otherwise noted all equipment must be repaired or replaced within 7 working days of the inspection date. Failure to repair or replace equipment may result in a Notice of Violation for permit conditions (Section 030.2175 - Operations Contrary to Permit. Washoe County District Board of Health Regulations Governing Air Quality Management).

L A PERKS - SOURCE TEST RESULTS FOR
MUSTANG MARKET - CHEVRON STATION #301419 LOCATED AT
12155 EAST I-80, SPARKS NV 89434
DATED JANUARY 2, 2013

SUMMARY OF SOURCE TEST RESULTS

Test Type: Deerly
 Test Date: 1-2-13
 Test Times: 9AM

Source Name and Address:
MUSTANG TRUCK
CHEROKEE
 Ph: _____

Testing Company Name and Address
L.A.Perks Plumbing & Heating Inc.
765 East Greg Street Suite 103
Sparks, NV 89431
Ph: 775-358-4403 FX: 775-358-4411

Facility Parameters	Operational Parameters
Phase II System Type (check one)	Tank# #of Nozzles served by tank
Gilbarco Vac _____	1. <u>8</u>
Balance _____	2. <u>8</u>
Hirt _____	3. _____
Red Jacket _____	Total # of Gas Nozzles <u>8</u>
Hasstech _____	
Healy _____	
Manifolded Yes <input checked="" type="checkbox"/> No _____	

Source Test Results and Comments:

Tank #	1	2	3
Product Grade:	<u>87</u>	<u>91</u>	
Actual tank Capacity, Gallons	<u>12,126</u>	<u>6059</u>	<u>15185</u>
Gasoline Volume, Gallons	<u>2856</u>	<u>2881</u>	<u>5737</u>
Ullage, Gallons (#2 - #3)	<u>9270</u>	<u>3178</u>	<u>12,448</u>
Initial Pressure, inches h2o	_____	_____	<u>2.0</u>
Pressure After 1 min. inches h2o	_____	_____	<u>2.0</u>
Pressure After 2 min. inches h2o	_____	_____	<u>1.97</u>
Pressure After 3 min. inches h2o	_____	_____	<u>1.98</u>
Pressure After 4 min. inches h2o	_____	_____	<u>1.97</u>
Final Pressure After 5 min. inches h2o	_____	_____	<u>1.96</u>
Allowable Final Pressure from (table 1)	_____	_____	<u>1.92</u>
Test Status (Pass or Fail)	_____	_____	_____

Test Conducted By: RON WOOD
 District Witness: _____

Date: 1-2-13
 Date: _____



WASHOE COUNTY HEALTH DISTRICT

AIR QUALITY MANAGEMENT DIVISION



Public Health
Prevent. Promote. Protect.

DATE: January 24, 2012

TO: District Board of Health

FROM: Kevin Dick, Director, Air Quality Management

SUBJECT: 4 Wheel Parts – Case No. 1106
Unappealed Citation No. 5316
Agenda Item: 9. A. 1. b.

Recommendation

Air Quality Management Staff recommends that Citation No. 5316 be upheld and a fine of \$2,500 be levied against 4 Wheel Parts for failure to have an asbestos survey performed by a qualified person and submitted to Air Quality for the issuance of an Acknowledgement of Asbestos Assessment prior to the demolition/renovation of a commercial facility. Conducting demolition/renovation activities without an asbestos survey and an Acknowledgement of Asbestos Assessment is a major violation of the District Board of Health Regulations Governing Air Quality Management, specifically Section 030.105(B)(10) National Emission Standards for Hazardous Air Pollutants (NESHAP), Subpart M - Asbestos, which is implemented through Section 030.107(A), Hazardous Air Pollutants, Asbestos Sampling and Notification. This is a negotiated settlement.

Recommended Fine: \$5,000.00

Negotiated Fine: \$2,500.00

Background

On November 15, 2012, Air Quality Management received notification from the City of Sparks Building Department that a Stop Work Order had been posted at 40 Victorian Avenue for demolition activities without a building permit. A review of the Air Quality Management records determined an Asbestos Acknowledgement Form had not been completed for any renovation activities at that location. At approximately 2:25 p.m., AQ Specialist II Michael Osborn was dispatched to the site to investigate the disturbance of potential asbestos containing materials without proper sampling and notification. On arrival AQ Specialist Osborn made contact with Mr. Greg Bolton, Regional Manager of 4 Wheel Parts.

AQ Specialist Osborn observed that a significant amount of demolition had taken place on the interior of the commercial building. AQ Specialist Osborn then inquired if there had been an asbestos survey performed on the materials to be disturbed during the renovation process and if any notification had been provided to Air Quality Management. Mr. Bolton confirmed an asbestos survey had not been performed prior to the demolition activities. At that time AQ Specialist Osborn explained to Mr. Bolton the proper procedure for contracting a qualified person to perform a survey of all potential asbestos containing materials and submittal of the results to Air Quality in order to satisfy the regulatory notification requirement prior to any disturbance of materials. AQ Specialist Osborn included the fact that the Asbestos Acknowledgement Form issued by Air Quality would be required prior to the issuance of a building permit by the City of Sparks.

Based on the results of the inspection and file review, AQ Specialist Osborn issued Notice of Violation Citation No. 5316 for a major violation of Section 030.107 (A), Asbestos Sampling and Notification.

P.O. BOX 11130 Reno, NV 89520-0027 • (775) 784-7200 • FAX (775) 784-7225

www.washoecounty.us/health

WASHOE COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER HIRING EMPLOYMENT ELIGIBLE APPLICANTS

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DBOH AGENDA ITEM NO. 9. A. 1. b.

January 24, 2013

DBOH/4 Wheel Parts/Case 1106

Page 2

Settlement

On November 27, 2012, Senior Air Quality Specialist Dennis Cerfoglio conducted a negotiated settlement meeting attended by AQ Specialist Osborn and Mr. Greg Bolton. After careful consideration of all the facts in the case, in addition to educating Mr. Bolton as to the proper procedures for asbestos testing and notification for any future projects, AQ Specialist Cerfoglio recommended that Citation No. 5316 be upheld with a fine of \$2,500. A Memorandum of Understanding was signed by all parties.

Alternatives

1. The District Board of Health may determine that no violation of the regulations has taken place and dismiss Citation No. 5316.
2. The Board may determine to uphold Citation No. 5316 and levy a fine in the range of \$0 to \$10,000 per day.

In the event the board determines to change the proposed penalty, the matter should be continued so that 4 Wheel Parts may be properly noticed.



Kevin Dick, Division Director
Air Quality Management

KD/DC: ma



DISTRICT HEALTH DEPARTMENT
AIR QUALITY MANAGEMENT DIVISION

MEMORANDUM OF UNDERSTANDING

WASHOE COUNTY HEALTH DISTRICT
AIR QUALITY MANAGEMENT DIVISION

Date: November 27, 2012
Company Name: 4 wheel Parts
Address: 40 Victorian Ave, Spr, NV 89431
Notice of Violation No.: 5316 Case No.: CMA12-0199

The staff of the Air Quality Management Division of the Washoe County District Health Department issued the above referenced citation for the violation of Regulation: 030.1074 No notification or proper asbestos sampling

A settlement of this matter has been negotiated between the undersigned parties resulting in a penalty amount of \$ 2,500.00. This settlement will be submitted to the District Board of Health for review at the regularly scheduled meeting on January 24, 2013.

[Signature]
Signature of Company Representative

[Signature]
Signature of District Representative

GREG BOLTON
Print Name

DENNIS A. CERFOGLIO
Print Name

Regional Manager
Title

Sr. Air Quality Specialist
Title

Witness

[Signature]
Witness

Witness

Witness

RECOMMENDED FINE WORKSHEET

DATE: 11-15-2012 CASE NO.: 1106 NOV NO.: 5316

COMPANY NAME: 4 WHEEL PARTS

CONTACT NAME: GREG BOLTON, REGIONAL MANAGER

(MAJOR / MINOR)

VIOLATION OF SECTION(S): 030.107A

X 1ST VIOLATION _____ 2ND VIOLATION _____ 3RD VIOLATION

<u>NO</u>	HAZARDOUS AIR POLLUTANT	YES / NO	<u>N/A</u>	TYPE OF AIR CONTAMINANT (CO, NOX, SOX, PM, VOC'S, HAP'S)	
<u>NO</u>	LEGALLY PERMITTED SOURCE	YES / NO	<u>NO</u>	PUBLIC HEALTH EXPOSURE	YES / NO
<u>30</u>	NUMBER OF DAYS IN VIOLATION	YES / NO	<u>NO</u>	PUBLIC COMPLAINTS	YES / NO

1. **DEGREE OF VIOLATION:** MINOR MODERATE MAJOR
(The degree to which the person/company has deviated from the regulatory requirements)

No asbestos sampling conducted or Acknowledgement of Asbestos Assessment obtained.

2. **ECONOMIC BENEFIT COMPONENT:** (OPTIONAL): MINOR MODERATE MAJOR
ESTIMATED COST \$ \$300
(Economic effect to the person/company for NOT complying with the Regulations including avoided costs and delayed costs)

Estimated Cost of Asbestos Survey performed by a Qualified Asbestos Consultant.

3. **DEGREE OF COOPERATION:** MINOR MODERATE MAJOR
(The person/company's efforts to immediately cease the violation and come into compliance)

Cooperation was good, Mr. Bolton obtained a professional contractor, asbestos sampling, and is working on obtaining an Acknowledgement of Asbestos Assessment from AQMD.

4. **ADDITIONAL COMMENTS:**

RECOMMENDED FINE: \$ 5,000



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.



WASHOE COUNTY HEALTH DISTRICT
 AIR QUALITY MANAGEMENT DIVISION
 1001 EAST NINTH ST. • SUITE B171 • RENO NV 89512
 (775) 784-7200



NOTICE OF VIOLATION

NOV 5316

DATE ISSUED: Nov 13, 2012

ISSUED TO: 4 Wheel Parts PHONE #: 303-246-3393
 MAILING ADDRESS: 4000 W. Artesia Blvd. CITY/ST: Compton, Ca. ZIP: 90220
 NAME/OPERATOR: Greg Bolton PHONE #: 310-800-5500 (Corporate)
Bob Batsch
 PERMIT NO. _____ COMPLAINT NO. CMP12-000179

YOU ARE HEREBY OFFICIALLY NOTIFIED THAT ON 11-14-2012 (DATE) AT 1504 A.M. (TIME), YOU ARE IN VIOLATION OF THE FOLLOWING SECTION(S) OF THE WASHOE COUNTY DISTRICT BOARD OF HEALTH REGULATIONS GOVERNING AIR QUALITY MANAGEMENT:

- | | |
|--|---|
| <input type="checkbox"/> MINOR VIOLATION OF SECTION: | <input checked="" type="checkbox"/> MAJOR VIOLATION OF SECTION: |
| <input type="checkbox"/> 040.030 DUST CONTROL | <input type="checkbox"/> 030.000 OPERATING W/O PERMIT |
| <input type="checkbox"/> 040.055 ODOR/NUISANCE | <input type="checkbox"/> 030.2175 VIOLATION OF PERMIT CONDITION |
| <input type="checkbox"/> 040.200 DIESEL IDLING | <input checked="" type="checkbox"/> 030.105 ASBESTOS/NESHAP |
| <input type="checkbox"/> OTHER _____ | <input checked="" type="checkbox"/> OTHER <u>030.107</u> |

VIOLATION DESCRIPTION: Failure to conduct an asbestos survey prior to demolition of Dry wall in a public building

LOCATION OF VIOLATION: #40 Victorian, Spr, NV 89431

POINT OF OBSERVATION: on site

Weather: Cloud/Calm Wind Direction From: N E S W

Emissions Observed: None
 (If Visual Emissions Performed - See attached Plume Evaluation Record)

WARNING ONLY: Effective _____ a.m./p.m. _____ (date) you are hereby ordered to abate the above violation within _____ hours/days. I hereby acknowledge receipt of this warning on the date indicated.

Signature _____

CITATION: You are hereby notified that effective on 11/14/12 (date) you are in violation of the section(s) cited above. You are hereby ordered to abate the above violation within 0 hours/days. You may contact the Air Quality Management Division to request a negotiated settlement meeting by calling (775) 784-7200. You are further advised that within 10 working days of the date of this Notice of Violation, you may submit a written petition for appeal to the Washoe County Health District, Air Quality Management Division, P.O. Box 11130, Reno, Nevada 89520-0027. Failure to submit a petition within the specified time will result in the submission of this Notice of Violation to the District Board of Health with a recommendation for the assessment of an administrative fine.

SIGNING THIS FORM IS NOT AN ADMISSION OF GUILT

Signature: [Signature] Date: 11/15/12

Issued by: [Signature] Title: AQSD

PETITION FOR APPEAL FORM PROVIDED

COMPLAINT INVESTIGATION REPORT
Washoe County Air Quality Management Division

Complaint Number: **CMP12-0199**

Complaint Status: NOV

Source of Complaint: CITIZEN

Complaint Type: ASBESTOS

Date Received: 11/15/2012

Time: 2:15:00 PM

Inspector: MOSBORN

Inspector Area: 2

Complaint Description: NOV CITATION 5316, CASE 1106 - INTERIOR DEMO WITHOUT A BUILDING PERMIT OR ASBESTOS ACKNOWLEDGEMENT FORM

Address: 40 VICTORIAN AVE SPKS

Location:

Parcel Number: 03331603

Related Permit Number:

Complainant:

CITY OF SPARKS BUILDING DEPARTMENT
TERESA

775-353-2306

Responsible Party:

4 WHEEL PARTS
GREG BOLTON
12655 E 42ND AVE UNIT 1
DENVER, COLORADO 89431
303-341-5337

Investigation:

At approx. 2:15 hours, on Nov. 15, 2012, specialist Osborn was notified to go to #40 Victorian Ave. reference a possible rip and tear that may contain asbestos containing material. On arrival at the scene contact was made with Greg Bolton, Regional Manager of 4 Wheel Parts.

This specialist could observe a significant amount of demolition to the walls of the interior of the building. Some ceiling tiles had been broken and removed also. The exterior of the building was in the process of being painted, however no work was observed on going inside. A stop work order placed by the City of Sparks Building Department was observed on the door into to building itself.

On speaking with Mr. Bolton it was learned that his crew had did the original demolition of walls on or about the 16th of Oct. 2012. The city of Sparks inspector had shut them down on the 19th of October with a stop work order.

Mr. Bolton was asked if he had any asbestos sampling of material done prior to the rip and tear and he stated "no" he hadn't. Bolton stated that since the stop work order was placed on the door he had hired a professional contractor to take care of everything, including permits.

This Specialist spoke with Jace Callender of Reyman Construction who was currently gathering permits. Jace stated that he had Wise Consulting take samples inside the building for areas to be disturbed and that all samples were returned with negative asbestos reading.

The full process was explained to Mr. Bolton of sampling, asbestos assessments, and building permits. It was explained to Mr. Bolton that he had initiated a demolition of the interior of the building without any testing and that he was being cited for violation of 030.107A under the District Board of Health Regulations Governing Air Quality Management Regulations.

Mr Bolton, District Manager of 4 Wheel Parts was issued Notice of Violation #5316 and presented with an appeal form. He was instructed to do no further interior demolition until he had secured his asbestos assessment and building permits.

No previous citations with this office.

Michael R. Osborn, AQSII
Washoe County Health District
Air Quality Management Division

Enforcement Activities

Warning Citation..:	Citation Number: 5316
NOV.....: 11/15/2012	NOV Number....: 0
	Case Number.....: 1106
Settlement.....:	Amount.....: \$0.00
Appealed.....:	
Upheld.....:	Amount.....: \$0.00

Status Information

Initialized By.....: CALBEE	Completed Date....:
Date Assigned.....: 11/15/2012	Completed By.....:

PHOTOS TAKEN BY AQ SPECIALIST II, MICHAEL OSBORN
OF 4 WHEEL PARTS LOCATED AT
40 VICTORIAN AVENUE, SPARKS NV 89431



11/15/2012 3:56:40 PM

photos displays various walls re-moved from # 40 Victorian Ave. Sparks, Nevada 89431. Walls removed by 4 Wheel Parts personnel without asbestos sampling 10/16/2012.



11/15/2012 3:56:25 PM



11/15/2012 3:56:49 PM

**AIR QUALITY MANAGEMENT - ACKNOWLEDGE OF ASBESTOS ASSESSMENT
(INCLUDING THE ASBESTOS TESTING RESULTS FROM WISE CONSULTING)
ISSUED TO REYMAN BROTHERS CONSTRUCTION FOR THE TENANT
IMPROVEMENT FOR "4 WHEEL PARTS" FORMERLY LITHIA SUZUKI OF SPARKS,
LOCATED AT 40 VICTORIAN AVENUE, SPARKS NV 89431
DATED: OCTOBER 25, 2012**

ACKNOWLEDGMENT OF ASBESTOS ASSESSMENT
Washoe County Air Quality Management Division

Permit Number: ASB12-1025

Property Owner: 4 WHEEL PARTS

Phone: 303-246-3393

Property Being Evaluated: 4 WHEEL PARTS TENANT IMPROVEMENT

Address: 40 VICTORIAN AVE SPKS

TYPE OF PROJECT - TYPE OF PROPERTY - PROPERTY BEING ASSESSED
RENO - NON-RES - PARTIAL*

FILING FEE: \$56.00

*Note: If this project is a partial renovation and additional work is to be conducted later, additional asbestos assessment(s) will be required unless this assessment covers all pertinent representative asbestos suspected materials throughout the building.

General Contractor:

REYMAN BROTHERS CONSTRUCTION INC
JACE CALLENDER
151 SOUTH 18 ST
SPARKS NV 89431

Consultant or Assessment Company:

WISE CONSULTING & TRAINING
DANA CARLTON
500 RYLAND ST #250
RENO NV 89502

Abatement Contractor:

Assessment Results: ACM ABSENT

Abatement Completed:

** Note: If asbestos present, abatement must be conducted in accordance with NESHAP and OSHA regulations before renovation or demolition work may proceed.

10-DAY NOTIFICATION MANDATORY FOR DEMOLITION

Jace Callender
Owner / Representative's Name

Comments:

Tenant improvement remodel for new occupant. Sampling found no ACM present. Use best methods for dust control during construction.

Charlene Albee
Health District Representative

11/16/12
Date

Signature on this asbestos assessment document does NOT constitute full Health District approval for this project. Any additional Health permits such as are required for bar or restaurant operations, underground storage tanks, hazardous material disposal or air pollution sources must be obtained separately.

Signature by the Washoe County Health District does not warrant, nor should this report be taken to warrant, that asbestos was or was not present on stated property. Exposure to even small amounts of airborne asbestos fibers may cause cancer. For this reason the Health District recommends that all asbestos handling and abatement work be performed by certified asbestos contractors.



October 25, 2012
Wise Project No. 1210-283

Reyman Brothers Construction
151 South 18th Street
Sparks, NV 89431

Attn: Mr. Jace Callender

**Re: LIMITED SCOPE ASBESTOS RENOVATION SURVEY
FORMER LITHIA SHOWROOM, SALES AREA
40 Victorian Ave., Sparks, NV 89431**

Ladies and Gentlemen:

On Tuesday, October 23, 2012, a consultant from Wise Consulting and Training, Inc. (WISE) conducted an asbestos renovation survey at the above referenced site. **The scope of work involves the reconfiguration of several partition walls in the location referenced above.**

The purpose of the survey was to determine if Asbestos Containing Material (ACM) exists in the building materials that will be disturbed by the referenced renovation project. With this knowledge, the Owner or the Owner's agent can determine what abatement action is necessary for appropriate health and safety precautions and to comply with all applicable federal, state and local regulatory requirements prior to and during the proposed building renovation.

The survey work included conducting a visual inspection of the proposed work areas to determine the types of building materials present, then developing and implementing a sampling plan of all accessible suspect asbestos containing materials in the intended renovation project. Six (6) samples were collected, resulting in eight (8) analyses for asbestos content by EPA Method 600/R-93/116. Since more than one (1) material was present in a sample, and each material must be analyzed separately per EPA mandated laboratory protocols, sample splits were necessary.

FINDINGS

The result of the renovation survey is that the sample analytical results indicate there is no ACM present in the construction materials in the renovation area. The materials determined not to be ACM because they *did not contain regulated quantities of asbestos* include:

- Carpet Mastic – Typical throughout survey area where carpet is present.
- Drywall, Wall Texture and Joint Compound – Typical throughout survey area.
- Cove Base Mastic – Typical throughout survey area.
- 2'x 2' Ceiling Tiles – Typical throughout survey area.

CONCLUSION AND RECOMMENDATIONS

Since no ACM was detected in the materials that are intended for renovation, further asbestos regulatory requirements do not apply, except the requirement to submit the survey to the local AQMD. For projects in Washoe County, we recommend this report be submitted to the Washoe County District Health Department (WCDHD), Air Quality Management Division, 1001 E. 9th Street, Building B, Room #171, Reno, NV 89502, to receive an *Acknowledgment of Asbestos Assessment*. By doing this, you have verifiable documentation that this survey was performed and may receive directions from WCDHD on how to comply with local and Federal EPA regulations.

We recommend this survey report be retained with project files and property records.

CLOSURE

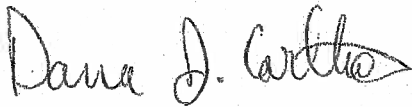
This report consists of this written report, the laboratory analytical report, the survey data sheet, and the sample location sketch. If any portions of this report are missing, the report should be considered incomplete.

It was not the intent of this study to find buried materials, conduct excessive destructive sampling, or to sample those materials that are not commonly considered asbestos containing for the purposes of building renovation or demolition. The purpose of this survey was to find and sample accessible suspect materials including multi-layered materials to determine asbestos content. *If additional suspect Asbestos Containing Materials are encountered during renovation or demolition, that were previously undetected, the consultant requests to be notified so that sampling or other appropriate responses can be determined.*

The condition of ACM may change over time. In addition, asbestos content will vary from location to location within materials due to manufacturing and application processes. This report represents information relating to the specific sample locations and material conditions at the time the survey was conducted. No other claims, warranties, or guarantees are either expressed or implied.

We have issued this report for the use of the above listed Client only.

Prepared By:



Dana J. Carlton
Environmental Consultant
NV Asbestos Consultant #IJPM 883

Reviewed and Approved By:



Rob Lanier
Environmental Consultant
NV Asbestos Consultant #IM 1184

Enc.: Asbestos Sample Location Sketch
Laboratory Analytical Report No. 4068-12-781 of 10/25/2012
Survey Data Sheet of 10/23/2012

Asbestos Sampling Location Sketch 40 Victorian Ave., Sparks, NV

REVISIONS	BY

MITCHELL CORN ARCHITECT
ARCHITECTURE & PLANNING
1000 W. WASHINGTON ST. SUITE 100
SPARKS, NEVADA 89410
TEL: 775-333-7777 FAX: 775-333-7778

PROJECT: 21 DEC 2004
@ MITCHELL CORN ARCHITECT

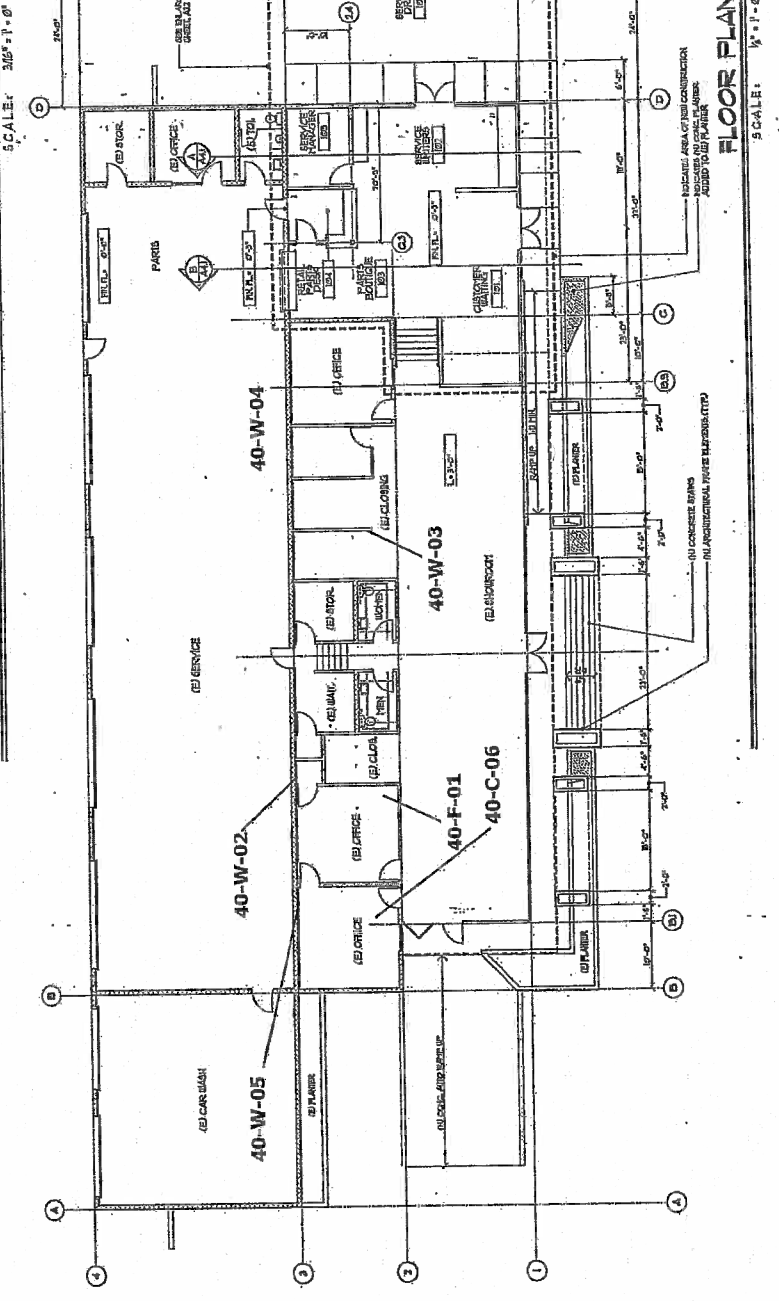
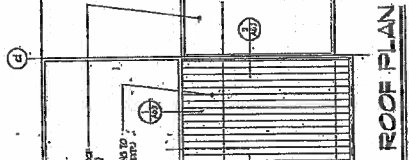
AN ADDITION & REMODEL FOR
LITHIA EQUINE OUTFITTERS
40 VICTORIAN AVENUE
SPARKS, NEVADA



DRAWN BY: J. P. COOPER
CHECKED BY: J. P. COOPER
DATE: 21 DEC 2004
SCALE: 1/8" = 1'-0"
PROJECT NO.: 04-004 (0)

A
2-1

PROPOSED FLOOR PLAN



REVISIONS BY

MITCHELL CORN ARCHITECT
ARCHITECTURE & PLANNING
1000 W. WASHINGTON ST. SUITE 100
SPARKS, NEVADA 89410
TEL: 775-333-7777 FAX: 775-333-7778

PROJECT: 21 DEC 2004
@ MITCHELL CORN ARCHITECT

AN ADDITION & REMODEL FOR
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40 VICTORIAN AVENUE
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SCALE: 1/8" = 1'-0"
PROJECT NO.: 04-004 (0)

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2-1

PROPOSED FLOOR PLAN

SCHNEIDER LABORATORIES GLOBAL

INCORPORATED

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LABORATORY ANALYSIS REPORT

Asbestos Identification by EPA Method¹ 600/R-93/116

Using SLI A6

ACCOUNT #: 4068-12-781
CLIENT: Wise Consulting and Training Inc.
ADDRESS: 500 Ryland St. Suite 250
Reno, NV 89502

DATE COLLECTED: 10/23/2012
DATE RECEIVED: 10/24/2012
DATE ANALYZED: 10/24/2012
DATE REPORTED: 10/25/2012

PROJECT NAME:

JOB LOCATION: 40 Victorian Ave

PROJECT NO.: 1210-283

PO NO.:

SampleType: BULK

Client Sample No.	SLI Sample/ Layer ID	Sample Identification/ Layer Name	PLM Analysis Results	
			Asbestos Fibers	Other Materials
40-F-01	31659634	West End		
Layer 1:	Carpet Mastic Yellow, Soft		None Detected	100% NON FIBROUS MATERIAL
40-W-02	31659635	Closet		
Layer 1:	Textured Material White, Granular		None Detected	100% NON FIBROUS MATERIAL
Layer 2:	Drywall White, Powdery		None Detected	3% CELLULOSE FIBER 97% NON FIBROUS MATERIAL
Layer 3:	Joint Compound White, Granular		None Detected	100% NON FIBROUS MATERIAL
40-W-03	31659636	Partition Wall		
Layer 1:	Joint Compound White, Granular		None Detected	100% NON FIBROUS MATERIAL
40-W-04	31659637	East End @ Stairs		
Layer 1:	Joint Compound White, Granular		None Detected	100% NON FIBROUS MATERIAL

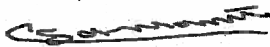
Total Number of Pages in Report: 2

Results relate only to samples as received by the laboratory.

Visit www.slabinc.com for current certifications.


Samples analyzed by the EPA Test Method are subject to the limitations of light microscopy including matrix interference. Gravimetric reduction and correlative analyses are recommended for all non-friable, organically bound materials. This method has a reporting limit of 1% or greater. Visual estimation contains an inherent range of uncertainty. This report must not be reproduced except in full with the approval of the lab, and must not be used to claim NVLAP or other gov't agency endorsement.

Client Sample No.	SLI Sample/ Layer ID	Sample Identification/ Layer Name	PLM Analysis Results	
			Asbestos Fibers	Other Materials
40-W-05	31659638	West End		
Layer 1:	Cove Base Mastic White, Soft		None Detected	100% NON FIBROUS MATERIAL
40-C-06	31659639	West End		
Layer 1:	Ceiling Tile White, Fibrous		None Detected	40% CELLULOSE FIBER 30% MINERAL/GLASS WOOL 20% FOAMED GLASS 10% NON FIBROUS MATERIAL



Analyst:

SAMANI ABDELFADEL



Reviewed By:

Hind Eldanaf, Microscopy Supervisor

Total Number of Pages in Report: 2

Results relate only to samples as received by the laboratory.

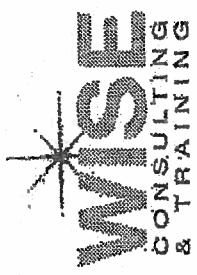
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4068-12-781

SURVEY DATA SHEET

Analysis/Turnaround: 24hr F



Inspector: Dana J. Carlton Cell: 745-6658 Project Name: _____
 E-mail: dana@wisecandt.com Project Location: 40 Victorian Ave. Date: 10-23-12
 Project #: 1210-283 Wise Consulting & Training, Inc. (775) 827-2717 Client Contact: _____
 Page: 1 of 1

Sample #	Material Description	Sample Location	H. Mat. #	Friability	Comments	Asbestos Cor
40-F-01	Carpet Mastic	West End	1	NF		
40-W-02	Tex JC DW	Closet	2, 3, 4	PF		
40-W-03	Tex JC	Partition Wall	2, 3	PF		
40-W-04	Tex	East End @ Stairs	2	PF		
40-W-05	CBM	West End	5	NF		
40-C-06	2x2' CT	" "	6	PF		



Friability
 F = Friable
 PF = Potentially Friable
 NF = Not Friable

Relinquished By: _____
 Name/Company: WISE - Dana J. Carlton
 Signature: Dana J. Carlton
 Date/Time: 10-23-

Received By: _____
 Name/Company: _____
 Signature: _____
 Date/Time: 10-24-

Signature: _____
 Name/Company: _____
 Signature: _____



WASHOE COUNTY HEALTH DISTRICT

AIR QUALITY MANAGEMENT DIVISION



Public Health
Prevent. Promote. Protect.

DATE: January 24, 2013

TO: District Board of Health

FROM: Kevin Dick, Director, Air Quality Management

SUBJECT: Quickie Mart – Case No. 1107
Unappealed Citation No. 5315
Agenda Item: 9. A. 1. c.

Recommendation

Air Quality Management Staff recommends that Citation No. 5315 be upheld and a fine of \$1,250 be levied against Quickie Mart for failure to conduct the required annual performance testing in accordance with Condition No. 4 of Permit to Operate No. G02-0006. Failure to conduct the required testing constitutes a major violation of the District Board of Health Regulations Governing Air Quality Management, specifically Section 030.2175, Operations Contrary to Permit. This is a negotiated settlement.

Recommended Fine: \$1,500.00

Negotiated Fine: \$1,250.00

Background

On November 16, 2012, AQ Specialist Michael Osborn conducted a routine gasoline dispensing facility inspection at the Quickie Mart located at 890 West Fourth Street in Reno. During the inspection, AQ Specialist Osborn noted that the required annual Air to Liquid (A/L) and Static Pressure Decay Tests had not been conducted. Condition No. 4 of Permit to Operate No. G02-0006 issued for the gasoline dispensing equipment states:

An annual A/L (Air to Liquid) Test and Static Pressure Decay Test will be required to demonstrate compliance with the CARB Executive Orders for vacuum assist phase II vapor recovery systems. The AQMD must be notified at least 72 hours prior to the test. The testing must be completed 90 days from the expiration date of this permit and the results submitted within 30 days of the test.

AQ Specialist Osborn noted that during a previous inspection, conducted on May 24, 2011, Quickie Mart was issued Notice of Violation Warning No. 4875 also for failure to conduct the required annual testing. After completing the inspection, AQ Specialist Osborn informed Mr. Jitendra Singh, the store manager, that the required annual testing had not been completed as required by Condition No. 4 of the permit to operate. AQ Specialist Osborn advised Mr. Singh that he had ten days to secure a testing date in order to demonstrate compliance with Condition No. 4 of the permit to operate.

Based on the results of the inspection and file review, AQ Specialist Osborn issued Notice of Violation Citation No. 5315 for a major violation of Section 030.02175, Operations Contrary to Permit.

P.O. BOX 11130 Reno, NV 89520-0027 • (775) 784-7200 • FAX (775) 784-7225

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DBOH AGENDA ITEM NO. 9. A. 1. c.

January 24, 2013

DBOH/ Quickie Mart/Case No. 1107

Page 2

Settlement

On December 4, 2012, Senior AQ Specialist Dennis Cerfoglio conducted a negotiated settlement meeting attended by AQ Specialist Osborn and Mr. Deep Virk, owner of Quickie Mart. After consideration of all of the facts presented in the case, including the issuance of NOV Warning No. 4875, for the same violation, AQ Specialist Cerfoglio proposed that Citation No. 5315 be upheld with a fine of \$1,250. Mr. Virk agreed to the condition of the negotiated settlement. A Memorandum of Understanding was signed by all parties.

As a follow up, the required testing was completed on December 26, 2012, and the results submitted to the Air Quality Management office on January 7, 2013.

Alternatives

1. The District Board of Health may determine that no violation of the Regulations has taken place and dismiss Citation No. 5315.
2. The Board may determine to uphold Citation No. 5315 and levy any fine in the range of \$0 to \$10,000 per day.

In the event the Board determines to change the proposed penalty, the matter should be continued so that Quickie Mart may be properly noticed.



Kevin Dick, Division Director
Air Quality Management

KD/DC: ma



**DISTRICT HEALTH DEPARTMENT
AIR QUALITY MANAGEMENT DIVISION**

MEMORANDUM OF UNDERSTANDING

AIR QUALITY MANAGEMENT DIVISION
WASHOE COUNTY HEALTH DISTRICT

Date: December 5, 2012

Company Name: Quinlan Mart - Chevron Station # 201572

Company Address: 890 West 4th Street, Reno, NV 89503

Notice of Violation No.: 5315 Case No.: EMP12-0198-1106

Location of Violation: 890 West 4th St, Reno, NV 89503

The staff of the Air Quality Management Division of the Washoe County Health District issued the above referenced Citation for the violation of Regulation: 030.2175
Rowd #4 No Static Pressure Decay Testing

A settlement of this matter has been negotiated between the undersigned parties resulting in a penalty amount of \$ 1,250.00. This settlement will be submitted to the District Board of Health for review at the regularly scheduled meeting on January 24, 2013.

[Signature]
Signature of Company Representative

ABHENDER S. VIRK
Print Name

OWNER
Title

Witness

Witness

[Signature]
Signature of District Representative

DENNIS A. CERFOGLIO
Print Name

SR. AIR QUALITY SPEC.
Title

[Signature]
Witness

Witness

RECOMMENDED FINE WORKSHEET

DATE: 11-14-2012 CASE NO.: 1104 NOV NO.: 5315

COMPANY NAME: QUICKIE MART – CHEVRON STATION # 201572

CONTACT NAME: JITENDRA SINGH, MANAGER

(MAJOR / MINOR)

VIOLATION OF SECTION(S): 030.2175 VIOLATION OF PERMIT CONDITION

 1ST VIOLATION X 2ND VIOLATION 3RD VIOLATION

<u> YES </u>	HAZARDOUS AIR POLLUTANT	YES / NO	<u> </u>	VOC'S & HAP'S	TYPE OF AIR CONTAMINANT (CO, NOX, SOX, PM, VOC'S, HAP'S)
<u> YES </u>	LEGALLY PERMITTED SOURCE	YES / NO	<u> NO </u>	PUBLIC HEALTH EXPOSURE	YES / NO
<u> N/A </u>	NUMBER OF DAYS IN VIOLATION	YES / NO	<u> NO </u>	PUBLIC COMPLAINTS	YES / NO

1. **DEGREE OF VIOLATION:** MINOR MODERATE MAJOR
(The degree to which the person/company has deviated from the regulatory requirements)

Annual Testing required to assess the integrity of this station. New test should have been completed by March 30, 2012.

2. **ECONOMIC BENEFIT COMPONENT:** (OPTIONAL): MINOR MODERATE MAJOR
ESTIMATED COST \$ \$700 per year
(Economic effect to the person/company for NOT complying with the Regulations including avoided costs and delayed costs)

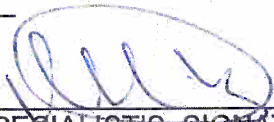
Estimated Cost to Perform Required Testing.

3. **DEGREE OF COOPERATION:** MINOR MODERATE MAJOR
(The person/company's efforts to immediately cease the violation and come into compliance)

4. **ADDITIONAL COMMENTS:**

Prior Notice of Violation "Warning" No. 4875 was issued on May 24, 2011 for the same infraction, to the same Manager, Mr. Singh.

RECOMMENDED FINE: \$ 1,500


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.



WASHOE COUNTY HEALTH DISTRICT
 AIR QUALITY MANAGEMENT DIVISION
 1001 EAST NINTH ST. • SUITE B171 • RENO NV 89512
 (775) 784-7200



NOTICE OF VIOLATION

NOV 5315

DATE ISSUED: 11-14-12

ISSUED TO: Dunkie Mart PHONE #: 775-323-7699

MAILING ADDRESS: 890 W. 4th Street CITY/ST: Reno, NV ZIP: 89503

NAME/OPERATOR: J. Tendra Singh PHONE #: Same 338-2628

PERMIT NO. 402-0006 COMPLAINT NO. CMP12-0198

YOU ARE HEREBY OFFICIALLY NOTIFIED THAT ON 11/14/12 (DATE) AT 1148 AM (TIME), YOU ARE IN VIOLATION OF THE FOLLOWING SECTION(S) OF THE WASHOE COUNTY DISTRICT BOARD OF HEALTH REGULATIONS GOVERNING AIR QUALITY MANAGEMENT:

- | | |
|--|--|
| <input type="checkbox"/> MINOR VIOLATION OF SECTION: | <input checked="" type="checkbox"/> MAJOR VIOLATION OF SECTION: |
| <input type="checkbox"/> 040.030 DUST CONTROL | <input type="checkbox"/> 030.000 OPERATING W/O PERMIT |
| <input type="checkbox"/> 040.055 ODOR/NUISANCE | <input checked="" type="checkbox"/> 030.2175 VIOLATION OF PERMIT CONDITION |
| <input type="checkbox"/> 040.200 DIESEL IDLING | <input type="checkbox"/> 030.105 ASBESTOS/NESHAP |
| <input type="checkbox"/> OTHER _____ | <input type="checkbox"/> OTHER <u>A70 402-0006</u> |

VIOLATION DESCRIPTION: Violation of Permit Condition #4. Annual A/L test and static pressure decay required on vacuum assist phase II Vapor Recovery System. Last test 8/18/2011

LOCATION OF VIOLATION: 890 W. 4th St. Reno, NV (Dunkie Mart)

POINT OF OBSERVATION: Compliance File. Written Warning 4875 issued May 2011

Weather: cool/calm Wind Direction From: N E S W

Emissions Observed: N/A
 (If Visual Emissions Performed - See attached Plume Evaluation Record)

WARNING ONLY: Effective _____ a.m./p.m. _____ (date) you are hereby ordered to abate the above violation within _____ hours/days. I hereby acknowledge receipt of this warning on the date indicated.

Signature _____

CITATION: You are hereby notified that effective on _____ (date) you are in violation of the section(s) cited above. You are hereby ordered to abate the above violation within _____ hours/days. You may contact the Air Quality Management Division to request a negotiated settlement meeting by calling (775) 784-7200. You are further advised that within 10 working days of the date of this Notice of Violation, you may submit a written petition for appeal to the Washoe County Health District, Air Quality Management Division, P.O. Box 11130, Reno, Nevada 89520-0027. Failure to submit a petition within the specified time will result in the submission of this Notice of Violation to the District Board of Health with a recommendation for the assessment of an administrative fine.

SIGNING THIS FORM IS NOT AN ADMISSION OF GUILT

Signature: _____ Date: 11/14/12

Issued by: [Signature] Title: AQSU

PETITION FOR APPEAL FORM PROVIDED

AIR QUALITY MANAGEMENT
PERMIT TO OPERATE # 602-0007
ISSUED TO QUICKIE MART - CHEVRON STATION #201572
LOCATED AT 890 WEST 4TH STREET, RENO NV 89503



PERMIT TO OPERATE

An Air Pollution Emission Source

No. G02-0006

Issued By Air Quality Management Division, Washoe County Health District

P.O. Box 11130, Reno, Nevada 89520-0027 • Phone (775) 784-7200

ISSUED TO: QUICKIE MART Gen Air - Gasoline

ADDRESS: 890 WEST 4TH STREET, RENO NV, 89503

LOCATION: 890 WEST 4TH STREET, RENO, NV 89503

EQUIPMENT COVERED UNDER THIS PERMIT GASOLINE DISPENSING FACILITY WITH VACUUM ASSIST PHASE II VAPOR RECOVERY, CARB EXECUTIVE ORDER #G-70-153-AD, 12 GASOLINE & 4 DIESEL NOZZLES

THE CONDITIONS OF OPERATION LISTED ON THIS PERMIT SUPERCEDE ALL PREVIOUS PERMIT CONDITIONS

CONDITIONS OF OPERATION LISTED ON THIS PERMIT:

- A. **ALTERATIONS:** This permit becomes void upon any change of ownership or address or any alteration of permitted equipment.
- B. **POSTING:** This permit shall be posted on or near the equipment listed above. This permit shall be made readily available at all times while the equipment is operating.
- C. **MODIFICATION OF EQUIPMENT:** Any modification of the equipment other than normal repair and maintenance will require a new permit.
- D. **RECORDS:** Any records of operation which effect the potential of the source to emit air pollutants, such as fuel or products consumed, products produced, hours of operation, chemicals or supplies used in source operation, must be maintained for a period of at least 5 years and made available to the Control Officer upon request.
- E. **EQUIPMENT FAILURE:** All upset or breakdown conditions resulting in increased emissions or air pollutants shall be reported in compliance with District regulations, Section 020.075 and 020.076.
- F. **ACCESS:** The Control Officer will be provided access to the facility to inspect operations and equipment covered under this permit whenever necessary to determine compliance with this permit and any other air pollution limitations specified in District regulations.

ADDITIONAL CONDITIONS:

- 1: The annual throughput/consumption figures must be submitted in writing to the A.Q.M.D. no later than the 20th of the month, approximately 6 weeks prior to the expiration date of the permit.
- 2: All gasoline transfer and dispensing facilities must operate in accordance with Section 040.080 of the Washoe County District Board of Health Regulations governing Air Quality Management.
- 3: To reduce evaporative loss all components of the Phase I and Phase II vapor recovery systems shall be installed and maintained in accordance with California Air Resources Board (CARB) Executive Orders, or New York State Department of Environmental Conservation approvals.
- 4: An annual A/L (Air to Liquid) Test and Static Pressure Decay Test will be required to demonstrate compliance with the CARB Executive Orders for vacuum assist phase II vapor recovery systems. The AQMD must be notified at least 72 hours prior to the test. The testing must be completed 90 days from the expiration date of this permit and the results submitted within 30 days of the test.
- 5: A flow limiter is required on dispensers that have a maximum flow rate in excess of 10 gallons/minute.
- 6: All hoses, boots, faceplates/flexible cones, nozzle shut off mechanisms, check valves, swivels, tanks, tank fill tubes, and fill tube cap seals must be maintained in good working order with regular maintenance to prevent leakage and excess escape of vapors (i.e., no tears, slits, holes, leaks, or malfunctions -- Section 040.080.)
- 7: In accordance with Section 040.095 of the Washoe County Air Quality Regulations and 40 CFR, Part 80, all gasoline dispensed to motor vehicles between October 1 and January 31 must contain the proper amount of oxygenate and each dispenser must be properly labeled with the following statement: The gasoline dispensed from this pump is oxygenated and will reduce carbon monoxide pollution from motor vehicles. The label must be clearly visible to the public on the upper two-thirds of the pump on the vertical surface near the gallonage and price meters.
- 8: Fuel spills or leaks must be cleaned up or corrected immediately using proper waste disposal methods. (Including accumulations of fuel in spill containers, condensation pots, and liquid collectors).

Mary-L B
CONTROL OFFICER

06/30/2012
EXPIRATION DATE

\$491.00
ANNUAL RENEWAL FEE

G02-0006
PERMIT NO.

FAILURE TO COMPLY WITH THE CONDITIONS OF THIS PERMIT MAY RESULT IN CITATIONS OR PERMIT REVOCATION

WASHOE COUNTY



HEALTH DISTRICT

PERMIT TO OPERATE

An Air Pollution Emission Source

No. G02-0006

Issued By Air Quality Management Division, Washoe County Health District

P.O. Box 11130, Reno, Nevada 89520-0027 • Phone (775) 784-7200

ISSUED TO: QUICKIE MART Gen Air - Gasoline

ADDRESS: 890 WEST 4TH STREET, RENO NV, 89503

LOCATION: 890 WEST 4TH STREET, RENO, NV 89503

EQUIPMENT COVERED UNDER THIS PERMIT GASOLINE DISPENSING FACILITY WITH VACUUM ASSIST PHASE II VAPOR RECOVERY, CARB EXECUTIVE ORDER #G-70-153-AD, 12 GASOLINE & 4 DIESEL NOZZLES

9: "Instructions for operating the phase II vapor recovery equipment must be posted for the customers, and must stress that "Topping Off" is prohibited --Section 040.080.C. The Air Quality Management Division's answer line phone number must be posted for customers with comments/problems regarding the nozzles - (775) 784-7200."

10: VACUUM/ASPIRATOR ASSIST SYSTEMS: The assist system must be operating at all times when the facility is open for business.

11: All operations must comply with 40 CFR Part 63, Subpart CCCCCC - National Emission Standards for Hazardous Air Pollutants (NESHAP) for Source Category: Gasoline Dispensing Facilities.


CONTROL OFFICER

06/30/2012
EXPIRATION DATE

\$491.00
ANNUAL RENEWAL FEE

G02-0006
PERMIT NO.

FAILURE TO COMPLY WITH THE CONDITIONS OF THIS PERMIT MAY RESULT IN CITATIONS OR PERMIT REVOCATION



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ADDITIONAL CONDITIONS:

- 1: The annual throughput/consumption figures must be submitted in writing to the A.Q.M.D. no later than the 20th of the month, approximately 6 weeks prior to the expiration date of the permit.
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Joseph P. Iser M.D., P.H., M.S.

CONTROL OFFICER

06/30/2013

EXPIRATION DATE

\$623.00

ANNUAL RENEWAL FEE

G02-0006

PERMIT NO.

FAILURE TO COMPLY WITH THE CONDITIONS OF THIS PERMIT MAY RESULT IN CITATIONS OR PERMIT REVOCATION



PERMIT TO OPERATE

An Air Pollution Emission Source

No. G02-0006

Issued By Air Quality Management Division, Washoe County Health District

P.O. Box 11130, Reno, Nevada 89520-0027 • Phone (775) 784-7200

ISSUED TO: QUICKIE MART Gen Air - Gasoline

ADDRESS: 890 WEST 4TH STREET, RENO NV, 89503

LOCATION: 890 WEST 4TH STREET, RENO, NV 89503

EQUIPMENT COVERED UNDER THIS PERMIT GASOLINE DISPENSING FACILITY WITH VACUUM ASSIST PHASE II VAPOR RECOVERY, CARB EXECUTIVE ORDER #G-70-153-AD, 12 GASOLINE & 4 DIESEL NOZZLES

8: Fuel spills or leaks must be cleaned up or corrected immediately using proper waste disposal methods. (Including accumulations of fuel in spill containers, condensation pots, and liquid collectors)

9: "Instructions for operating the phase II vapor recovery equipment must be posted for the customers, and must stress that "Topping Off" is prohibited --Section 040.080.C. The Air Quality Management Division's answer line phone number must be posted for customers with comments/problems regarding the nozzles - (775) 784-7200."

10: VACUUM/ASPIRATOR ASSIST SYSTEMS: The assist system must be operating at all times when the facility is open for business.

11: All operations must comply with 40 CFR Part 63, Subpart CCCCCG - National Emission Standards for Hazardous Air Pollutants (NESHAP) for Source Category: Gasoline Dispensing Facilities.

Joseph P. Iser MD, DrPH, MSE

CONTROL OFFICER

06/30/2013

EXPIRATION DATE

\$623.00

ANNUAL RENEWAL FEE

G02-0006

PERMIT NO.

FAILURE TO COMPLY WITH THE CONDITIONS OF THIS PERMIT MAY RESULT IN CITATIONS OR PERMIT REVOCATION

COMPLAINT INVESTIGATION REPORT
Washoe County Air Quality Management Division

Complaint Number: **CMP12-0198**

Complaint Status: NOV

Source of Complaint: INVESTIGATOR

Complaint Type: PERMIT

Date Received: 11/14/2012

Time: 11:48 a.m.

Inspector:

Inspector Area: 4

Complaint Description: NOV CITATION 5315, CASE 1107 - VIOLATION OF PTO #G02-0006; COND #4:
ANNUAL A/L AND STATIC PRESSURE DECAY REQUIRED.

Address:

Location: 890 West Fourth Street, Reno, Nevada

Parcel Number:

Related Permit Number: G02-0006

Complainant:

MICHAEL OSBORN, AQ SPECIALIST II
#201
AIR QUALITY MANAGEMENT DIVISION
1001 E 9TH ST STE B171
RENO NV 89512
775-772-7923

Responsible Party:

QUICKIE MART (CHEVRON STATION)

JITENDRA SINGH
890 W 4TH STREET
RENO NV 89503
775-323-7699

Investigation:

INSPECTION PTO #G02-0006

On or about 1120 a.m. on the 14th of November Specialist Osborn entered the Quickie Mart located at 890 West Fourth Street, Reno, Nevada for the purpose of their permit renewal inspection. This is a gasoline dispensing facility with a vacuum assist phase II Vapor recovery system under CARB Executive Orders.

On introducing himself to the daytime manager, Jitendra Singh, Specialist Osborn conducted the inspection.

During the inspection, two gasoline spouts were found out of round along with an underground tank fill cap which was broken. These items were notated on the inspection form.

After a check of the Permit file and in accordance with Condition #4 it was determined that the owner/operator had in fact not completed the annual A/L and Static pressure decay test as required in their permit to operate. The last testing date of the system was 08/18/2011. Manager Jitendra was issued notice of violation #5315 for violation of condition #4, failure to conduct testing on a

annual basis.

Additional Information: On May 24, 2011, Specialist Osborn had issued Notice of Violation Warning #4875 for the identical violation. That being in violation of 030.2175 Condition #4,

Mr. Jintendra Singh was explained the results of the inspection and advised to have the equipment repaired within ten days. Mr. Singh was also presented with a copy of notice of violation #5315 and also presented with an appeal form. Mr. Singh was advised that he had 10 days to notify of the testing date for the Assist system.

Michael R. Osborn, AQS II
Washoe County Health District
Air Quality Management Division

Enforcement Activities

Warning Citation..: 11/14/2012	Citation Number: 5315
NOV.....:	NOV Number.....: 0
	Case Number.....: 1107
Settlement.....:	Amount.....: \$0.00
Appealed.....:	
Upheld.....:	Amount.....: \$0.00

Status Information

Initialized By.....: MOSBORN	Completed Date....:
Date Assigned.....: 11/14/2012	Completed By.....:

AIR QUALITY MANAGEMENT
VAPOR RECOVERY INSPECTION SHEET
ISSUED TO QUICKIE MART - CHEVRON STATION #201572
LOCATED AT 890 WEST 4TH STREET, RENO NV 89503
DATED NOVEMBER 14, 2012



WASHOE COUNTY HEALTH DISTRICT
 AIR QUALITY MANAGEMENT DIVISION
VAPOR RECOVERY INSPECTION SHEET

STATION Quickie Mart ADDRESS 999 W. 4th Street
 CITY Reno, NV ZIP 89503 CONTACT Mr. Jitendra Singh
 OWNER/OPERATOR Abby Deep Singh PHONE (775) 323-2689
 NUMBER OF DISPENSERS (GASOLINE) 6 NUMBER OF NOZZLES (GASOLINE) 12
 NUMBER OF PRODUCT GRADES (GASOLINE) 3 NUMBER OF NOZZLES (DIESEL) 4
 FOR EACH DISPENSER

Date 11-14-2012
 Permit # HOZ-0006
 INSP OSBORN
 VN# _____

DEFECTIVE OR NON-OPERABLE EQUIPMENT

NOZZLE NUMBER	GAS GRADE
6 11	All grades

PUMPS	1. VACUUM PUMP	
	2. LEAKS FTGS/SWIVELS	
	3. USE INSTRUCTIONS	
	4. WINTER FUEL ADVISEMENT ..	
HOSE	1. CUT/PUNCTURED	
	2. FLATTENED/KINKED	
	3. LENGTH	
	4. SWIVEL	
	5. RETRACTORS	
NOZZLE	1. NOZZLE/SPOUT	X X Spouts out of round
	2. SWIVEL JOINTS	
	3. FACE SEAL	
	4. BELLOWS	10 days to notify of test date.
	5. VAPOR CHECK VALVE	
VENT PIPES	1. 2" DIA. X 12 HGT.-MIN.	
	2. AFTERBURNER	
OTHER	1. VACUUM/ASSIST EQUIP	
	2. AFTERBURNER	

PHASE I System Type: Two-Point Coaxial _____ Other _____ PHASE II INSTALLED YES NO _____ BALANCE ASSIST

	TANK #1	TANK #2	TANK #3	TANK #4		TANK #1	TANK #2	TANK #3	TANK #4
1. PRODUCT GRADE (UR, U+, UP)	U				8. DEFECTIVE VAPOR POPPET	U			
2. TANK CAPACITY, GALLONS					9. MISSING FILL CAP				
3. MISSING VAPOR CAP					10. DEFECTIVE FILL CAP	X			
4. DEFECTIVE VAPOR CAP					11. FILL CAP GASKET				
5. VAPOR CAP NOT ENGAGED					12. FUEL/DEBRIS IN VAULT				
6. VAPOR CAP GASKET					13. VAULT DRAIN VALVE				
7. DEFECTIVE COAXIAL					14. FILL-VAP-STEM LOOSE				

REMARKS: Date of last Air and Static Pressure Log was 6/18/11
Spouts # 6 and 11 are out of round and need repair. Unlabeled fill cap is defective and needs replaced (Broken). Repair equip. within 10 days. Call 772-7923, Mike for reinspection.
NOV # 5315 issued Violation of ATO HOZ-0006 Penal # 4

OPERATOR (X) [Signature]

Unless otherwise noted all equipment must be repaired or replaced within 7 working days of the inspection date. Failure to repair or replace equipment may result in a Notice of Violation for permit conditions (Section 030.2175 - Operations Contrary to Permit, Washoe County District Board of Health Regulations Governing Air Quality Management).

L A PERKS - SOURCE TEST RESULTS FOR
QUICKIE MART - CHEVRON STATION #201572 LOCATED AT
890 WEST 4th STREET, RENO NV 89503
DATED NOVEMBER 21, 2012

SUMMARY OF SOURCE TEST RESULTS

Test Type: Decay Annual

Test Date: 11-21-12

Test Times: 12PM

Source Name and Address:
Quick Mart
890 4th St
Ph: _____

Testing Company Name and Address
L.A.Perks Plumbing & Heating Inc.
765 East Greg Street Suite 103
Sparks, NV 89431
Ph: 775-358-4403 FX: 775-358-4411

Facility Parameters
Phase II System Type
(check one)
Gilbarco Vac _____ Wayne Vac
Balance _____
Hirt _____
Red Jacket _____
Hasstech _____
Healy _____
Manifolded Yes No _____

Operational Parameters
Tank# #of Nozzles served by tank
1. 12
2. 12
3. _____
Total # of Gas Nozzles 12

Source Test Results and Comments:

Tank #	1	2	3
Product Grade:	<u>87</u>	<u>91</u>	
Actual tank Capacity, Gallons	<u>11627</u>	<u>11627</u>	<u>23254</u>
Gasoline Volume, Gallons	<u>6684</u>	<u>7745</u>	<u>14429</u>
Ullage, Gallons (#2 - #3)	<u>4943</u>	<u>3882</u>	<u>8825</u>
Initial Pressure, inches h2o			<u>2.0</u>
Pressure After 1 min. inches h2o			<u>1.99</u>
Pressure After 2 min. inches h2o			<u>1.97</u>
Pressure After 3 min. inches h2o			<u>1.97</u>
Pressure After 4 min. inches h2o			<u>1.95</u>
Final Pressure After 5 min. inches h2o			<u>1.95</u>
Allowable Final Pressure from (table 1)			<u>1.90</u>

Test Status (Pass or Fail) PASS

Test Conducted By: Ka W J

Date: 11-21-12

District Witness: _____

Date: _____

Quick Mart

GDF Name and Address <i>Chaparral</i> <i>890-4th</i>	A/L Field Data Sheet	Testing Firm Name and Address: L.A.Perks Plumbing & Heating Inc. 765 East Greg Street Suite 103 Sparks, NV 89431
		Phone No. (775) 358-4403 Test Performed by:
Test Date/Time:		

Disp #	Grade	Nozzle Model #	A/L	GPM	Pass/Fail	COMMENTS
1	87	<i>EMICO</i>	1.00	8.27		
1	89		.99	8.00		
1	91		.98	8.49		
2	87		.99	7.51		
2	89		.99	7.47		
2	91		1.01	7.32		
3	87		1.03	7.22		
3	89		1.00	7.49		
3	91		1.01	7.50		
4	87		.98	7.21		
4	89		1.01	7.40		
4	91		1.03	7.59		
5	87		.99	7.22		
5	89		.99	7.34		
5	91		.99	7.60		
6	87		1.00	7.11		
6	89		1.00	7.09		
6	91		1.03	6.21		
7	87		1.05	6.59		
7	89		1.03	6.81		
7	91		1.01	6.44		
8	87		1.00	7.01		
8	89		.99	7.11		
8	91		1.00	7.21		

GDF Name and Address	A/L Field Data Sheet	Testing Firm Name and Address:
		L.A.Perks Plumbing & Heating Inc.
		765 East Greg Street Suite 103 Sparks, NV 89431
Test Date/Time:		Phone No. (775) 358-4403
		Test Performed by:

Disp #	Grade	Nozzle Model #	A/L	GPM	Pass/Fail	COMMENTS
1 9	87		0	-	F	
1 9	89		0	-	F	
1 9	91		0	-	F	
2 10	87		199	711		
2 10	89		99	702		
2 10	91		1.00 1.00	721		
3 11	87		0.99	678	F	
3 11	89		0.99	700	F	
3 11	91		0.99	649	F	
4 12	87		1.01	701		
4 12	89		1.03	721		
4 12	91		1.05	744		
5	87					
5	89					
5	91					
6	87					
6	89					
6	91					
7	87					
7	89					
7	91					
8	87					
8	89					
8	91					

After Repairs

GDF Name and Address QUICKIE MART CHEVRON 4TH ST Test Date/Time:	A/L Field Data Sheet	Testing Firm Name and Address: L.A.Perks Plumbing & Heating Inc. 765 East Greg Street Suite 103 Sparks, NV 89431
		Phone No. (775) 358-4403
		Test Performed by:
		WOOD

Disp #	Grade	Nozzle Model #	A/L	GPM	Pass/Fail	COMMENTS
9	87	OPW	1.99	7.62	PASS	CHANGE
9	89		.98	771		WAC
9	91		.98	788		
11	87		1.00	701		MOTORS
11	89		1.01	721		
11	91		1.05	7.75		
3	87					
3	89					
3	91					
4	87					
4	89					
4	91					
5	87					
5	89					
5	91					
6	87					
6	89					
6	91					
7	87					
7	89					
7	91					
8	87					
8	89					
8	91					

AQMD NOTICE OF VIOLATION "WARNING"
ISSUED TO QUICKIE MART - CHEVRON STATION #201572
LOCATED AT 890 WEST 4TH STREET, RENO NV 89503
DATED MAY 24, 2011



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



NOTICE OF VIOLATION

cmpl1-0055

NOV 4875

DATE ISSUED: May 24, 2011

ISSUED TO: Quibie West PHONE #: 775-323-3557

MAILING ADDRESS: 890 West 4th Street CITY/ST: Reno ZIP: 89503

NAME/OPERATOR: Mr. Singh PHONE #: Same

DRIVER LICENSE #/SSN WIA

YOU ARE HEREBY OFFICIALLY NOTIFIED THAT ON May 24, 2011 (DATE) AT 1100 (TIME), YOU ARE IN VIOLATION OF THE FOLLOWING SECTION(S) OF THE WASHOE COUNTY DISTRICT BOARD OF HEALTH REGULATIONS GOVERNING AIR QUALITY MANAGEMENT:

- | | |
|--|--|
| <input type="checkbox"/> MINOR VIOLATION OF SECTION: | <input type="checkbox"/> MAJOR VIOLATION OF SECTION: |
| <input type="checkbox"/> 040.030 DUST CONTROL | <input type="checkbox"/> 030.000 OPERATING W/O PERMIT |
| <input type="checkbox"/> 040.055 ODOR/NUISANCE | <input checked="" type="checkbox"/> 030.2175 VIOLATION OF PERMIT CONDITION |
| <input type="checkbox"/> 040.200 DIESEL IDLING | <input type="checkbox"/> 030.105 ASBESTOS/NESHAP |
| <input type="checkbox"/> OTHER _____ | <input type="checkbox"/> OTHER _____ |

VIOLATION DESCRIPTION: Failure to conduct Air, liquid and Pressure Decay test on an annual basis as prescribed under condition # 4 of Permit to Operate # 202-0006; 10 Days to correct.

LOCATION OF VIOLATION: on site

POINT OF OBSERVATION: File denying Permit renewal suspension

Weather: Windy calm Wind Direction From: N E S W

Emissions Observed: WIA
 (If Visual Emissions Performed - See attached Plume Evaluation Record)

WARNING ONLY: Effective 1100 a.m. 5/24/2011 (date) you are hereby ordered to abate the above violation within 10 hours/days. I hereby acknowledge receipt of this warning on the date indicated.

Signature: [Signature]

CITATION: You are hereby notified that effective on _____ (date) you are in violation of the section(s) cited above. You are hereby ordered to abate the above violation within _____ hours/days. You are further advised that within ten days of the date of this violation you may submit a written notice of appeal to the Chairman, Hearing Board, P.O. Box 11130, Reno, Nevada 89520. Failure to submit a notice of appeal in the time specified will result in submission of this violation to the District Board of Health, together with a request that an administrative fine be levied against you. If you do not wish to file an appeal the appropriate fine may be paid at the District Health Department.

SIGNING THIS FORM IS NOT AN ADMISSION OF GUILT

Signature: _____ Date: _____

Issued by: W. R. Osborn, HQSIP Title: ADMD

WASHOE DOES NOT DISCRIMINATE ON THE BASIS OF SEX, RACE, COLOR, AGE, RELIGION, DISABILITY OR NATIONAL ORIGIN IN THE ACTIVITIES AND OR SERVICES WHICH IT PROVIDES. IF YOU HAVE ANY QUESTIONS, PLEASE CALL WASHOE COUNTY HUMAN RESOURCES - 328-2080; TDD NUMBER 328-3685.



WASHOE COUNTY HEALTH DISTRICT

AIR QUALITY MANAGEMENT DIVISION



Public Health
Prevent. Promote. Protect.

DATE: January 24, 2013

TO: District Board of Health

FROM: Kevin Dick, Director, Air Quality Management

SUBJECT: Preservation Restoration Service – Case No. 1108
Unappealed Citation No. 5318
Agenda Item: **9. A. 1. d.**

Recommendation

Air Quality Management Staff recommends that Citation No. 5318 be upheld and a fine of \$2,500 be levied against Preservation Restoration Service for failure to conduct a proper asbestos survey, provide notification to Air Quality Management, and using improper work practices during the removal of asbestos containing materials involved in the demolition/renovation of a commercial facility. Failure to comply with the asbestos testing, notification, and work practice standards constitutes a major violation of the District Board of Health Regulations Governing Air Quality Management, specifically Section 030.105(B)(10) National Emission Standards for Hazardous Air Pollutants (NESHAP), Subpart M - Asbestos, which is implemented through Section 030.107 (A) Asbestos Sampling and Notification, (B) Asbestos Control Work Practice, and (C) Asbestos Containment and Abatement. This is a negotiated settlement.

Recommended Fine: \$5,000.00

Negotiated Fine: \$2,500.00

Background

On November 20, 2012, Air Quality Management received notification from City of Reno Code Enforcement staff that they were investigating renovation activities without a building permit at 72 High Street which is a 30-unit apartment building. A review of the Air Quality Management records determined an Acknowledgement of Asbestos Assessment Form had not been completed for any renovation activities at that location. At approximately 8:15 am, AQ Specialist Michael Osborn was dispatched to the site to investigate the disturbance of potential asbestos containing materials without notification.

Upon arrival at the site, AQ Specialist Osborn observed a pickup truck parked next to the building that contained five or six different kinds of sheet vinyl linoleum that had been removed from the apartment building. Since sheet vinyl linoleum is a suspect asbestos containing material, AQ Specialist Osborn requested that the truck contents be wet down and covered with poly plastic until samples of the flooring materials could be taken for analysis. AQ Specialist Osborn then met with Mr. Mike Sterling, manager for Preservation Restoration Service. AQ Specialist Osborn immediately asked Mr. Sterling if he had done any sampling of the materials to be removed during the renovation project. Mr. Sterling advised AQ Specialist Osborn that he had not sampled any of the materials and that he did not have an asbestos consultant on the job.

AQ Specialist Osborn then requested that Mr. Sterling to accompany him on a tour of the entire building so he could inspect all of the work areas. During the inspection, it was noted that linoleum had been removed from the kitchen and bathroom areas in the second floor units. Additionally, the spray acoustic ceiling material had been scraped and allowed to fall on the floor and was tracked all over the building. Specialist Osborn advised Mr. Sterling to contact an asbestos consultant to immediately take samples of all the suspect materials on site to determine if asbestos was present in any of the materials that had been disturbed. A consultant was hired, samples were taken, and the results identified 20 - 30% chrysotile asbestos in the linoleum flooring. The spray acoustic ceiling material did not contain any asbestos.

P.O. BOX 11130 Reno, NV 89520-0027 • (775) 784-7200 • FAX (775) 784-7225

www.washoecounty.us/health

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Printed on Recycled Paper

DBOH AGENDA ITEM NO. 9. A. 1. d.

January 24, 2013

DBOH/ Preservation Restoration Service/Case No. 1108

Page 2

In addition to the pickup truck, Specialist Osborn located a dumpster with six large bags of materials that had also been removed from the building. Mr. Sterling was advised to contact a licensed asbestos abatement contractor to properly cleanup and dispose of all the materials stacked in the pickup truck and the dumpster. The asbestos consultant and abatement contractor were also required to address the cleanup and wipe down of the apartments affected by the illegal disturbance of asbestos materials. Guardian Environmental immediately responded and completed the abatement of the disturbed materials in addition to the proper cleanup and wipe down of the affected units.

Based on the results of the inspection and asbestos sampling, Specialist Osborn issued Notice of Violation No. 5318 for a major violation of Section 030.107 (A) Asbestos Sampling and Notification, (B) Asbestos Control Work Practices, and (C) Asbestos Contamination and Abatement.

Settlement

On November 27, 2012, Senior Air Quality Specialist Dennis Cerfoglio conducted a negotiated settlement meeting attended by AQ Specialist Osborn and Mr. Mike Sterling. After careful consideration of all the facts in the case, in addition to educating Mr. Sterling as to the proper procedures for asbestos testing and notification for any future projects, AQ Specialist Cerfoglio recommended that Citation No. 5316 be upheld with a fine of \$2,500 and a requirement that Mr. Sterling and one of his employees attend a 40-hour asbestos class as soon as possible. A Memorandum of Understanding was signed by all parties.

Alternatives

1. The District Board of Health may determine that no violation of the regulations has taken place and dismiss Citation No. 5318.
2. The Board may determine to uphold Citation No. 5318 and levy a fine in the range of \$0 to \$10,000.

In the event the board determines to change the penalty, the matter should be continued so that Preservation Restoration Service may be properly notified.



Kevin Dick, Division Director

Air Quality Management

KD/DC: ma



DISTRICT HEALTH DEPARTMENT
AIR QUALITY MANAGEMENT DIVISION

MEMORANDUM OF UNDERSTANDING

WASHOE COUNTY HEALTH DISTRICT
AIR QUALITY MANAGEMENT DIVISION

Date: November 27, 2012
Company Name: Preservation Restoration Services
Address: 10672 Fire Poppy Circle
Notice of Violation No.: 5318 Case No.: 1108

The staff of the Air Quality Management Division of the Washoe County District Health Department issued the above referenced citation for the violation of

Regulation: 030.107 ABC No surveys or proper notification of asbestos containing materials

A settlement of this matter has been negotiated between the undersigned parties resulting in a penalty amount of \$ 2,500.00 plus 40 HR. class for two employees. This settlement will be submitted to the District Board of Health for review at the regularly scheduled meeting on January 24, 2012.

[Signature]
Signature of Company Representative

[Signature: Dennis A. Cerfoglio]
Signature of District Representative

Michael Storking
Print Name

DENNIS A. CERFOGLIO
Print Name

Restoration Specialist
Title

Sr. Air Quality Specialist
Title

Witness

[Signature]
Witness

Witness

Witness

RECOMMENDED FINE WORKSHEET

DATE: 11-21-2012 CASE NO.: 1108 NOV NO.: 5318

COMPANY NAME: PRESERVATION RESTORATION SERVICES

CONTACT NAME: MICHAEL STERLING

(MAJOR / MINOR)

VIOLATION OF SECTION(S): 030.107 A,B,C - ASBESTOS/NESHAP

X 1ST VIOLATION _____ 2ND VIOLATION _____ 3RD VIOLATION

YES HAZARDOUS AIR POLLUTANT YES / NO HAP'S & ASBESTOS TYPE OF AIR CONTAMINANT
(CO, NOX, SOX, PM, VOC'S, HAP'S)

NO LEGALLY PERMITTED SOURCE YES / NO YES PUBLIC HEALTH EXPOSURE YES / NO

_____ NUMBER OF DAYS IN VIOLATION YES - City of Reno PUBLIC COMPLAINTS YES / NO

1. **DEGREE OF VIOLATION:** MINOR MODERATE MAJOR
(The degree to which the person/company has deviated from the regulatory requirements)

No Asbestos survey; work practices were not followed which contaminated four apartments, walkway, dumpster and (outdoor) haul truck.

2. **ECONOMIC BENEFIT COMPONENT:** (OPTIONAL): MINOR MODERATE MAJOR
ESTIMATED COST \$ UNKNOWN

(Economic effect to the person/company for NOT complying with the Regulations including avoided costs and delayed costs)

Obtaining permits, asbestos abatement and sampling costs.

3. **DEGREE OF COOPERATION:** MINOR MODERATE MAJOR
(The person/company's efforts to immediately cease the violation and come into compliance)

Cooperation was very good.

4. **ADDITIONAL COMMENTS:**

RECOMMENDED FINE: \$ 5,000


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.



NOTICE OF VIOLATION

NOV 5318

DATE ISSUED: Nov 20, 2012

ISSUED TO: Asbestos Restoration Service PHONE #: 775-445-9355

MAILING ADDRESS: 10672 Fire Pippy Circle CITY/ST: Reno, NV ZIP: 89521

NAME/OPERATOR: Michael J. Sterling PHONE #: Same

PERMIT NO. _____ COMPLAINT NO. CMA12-0203

YOU ARE HEREBY OFFICIALLY NOTIFIED THAT ON 11/27/12 (DATE) AT 11:00/12 (TIME), YOU ARE IN VIOLATION OF THE FOLLOWING SECTION(S) OF THE WASHOE COUNTY DISTRICT BOARD OF HEALTH REGULATIONS GOVERNING AIR QUALITY MANAGEMENT:

- | | |
|--|---|
| <input type="checkbox"/> MINOR VIOLATION OF SECTION: | <input checked="" type="checkbox"/> MAJOR VIOLATION OF SECTION: |
| <input type="checkbox"/> 040.030 DUST CONTROL | <input type="checkbox"/> 030.000 OPERATING W/O PERMIT |
| <input type="checkbox"/> 040.055 ODOR/NUISANCE | <input type="checkbox"/> 030.2175 VIOLATION OF PERMIT CONDITION |
| <input type="checkbox"/> 040.200 DIESEL IDLING | <input type="checkbox"/> 030.105 ASBESTOS/NESHAP |
| <input type="checkbox"/> OTHER _____ | <input checked="" type="checkbox"/> OTHER <u>030.105 ABC</u> |

VIOLATION DESCRIPTION: Operator above did fail to obtain samplings Assessment, and did not use proper removal techniques of asbestos and improper disposal of material in street side dumpster

LOCATION OF VIOLATION: Habitat 7 lots, 72 High St. Reno, NV 89502

POINT OF OBSERVATION: 910 site, Apts (numerous Apts) See report

Weather: Clear/Cloudy Wind Direction From: N E S W

Emissions Observed: Asbestos in Rooms on Floors, Dumpster
 (If Visual Emissions Performed - See attached Plume Evaluation Record)

WARNING ONLY: Effective _____ a.m./p.m. _____ (date) you are hereby ordered to abate the above violation within _____ hours/days. I hereby acknowledge receipt of this warning on the date indicated.

Signature _____

CITATION: You are hereby notified that effective on 11/20/12 (date) you are in violation of the section(s) cited above. You are hereby ordered to abate the above violation within _____ hours/days. You may contact the Air Quality Management Division to request a negotiated settlement meeting by calling (775) 784-7200. You are further advised that within 10 working days of the date of this Notice of Violation, you may submit a written petition for appeal to the Washoe County Health District, Air Quality Management Division, P.O. Box 11130, Reno, Nevada 89520-0027. Failure to submit a petition within the specified time will result in the submission of this Notice of Violation to the District Board of Health with a recommendation for the assessment of an administrative fine.

SIGNING THIS FORM IS NOT AN ADMISSION OF GUILT

Signature: [Signature] Date: 11-20-12

Issued by: [Signature] Title: AQSP

PETITION FOR APPEAL FORM PROVIDED

STOP WORK

WASHOE COUNTY HEALTH DISTRICT
AIR QUALITY MANAGEMENT DIVISION
1001 EAST NINTH ST. SUITE B171 • RENO NV 89512
PHONE (775) 784-7200

DATE 11/29/12 TIME 11:11
OWNER/OPERATOR _____
ADDRESS 2211 S. ...
EQUIPMENT DESCRIPTION

NOTICE OF VIOLATION # ... DATE 11/29/12

- 30.105 Asbestos Removal
- 40.080 Gas Station Operations
- 30.200 Source Operations Without Permit

VIOLATION SECTION ...

YOU HAVE BEEN DULY NOTIFIED OF THIS VIOLATION AND ARE HEREBY ORDERED TO CEASE CONSTRUCTION, INSTALLATION, ALTERATION, OR OPERATION OF THIS SOURCE.

FAILURE TO CONFORM MAY RESULT IN A FINE OF UP TO \$10,000 PER DAY AS LEVIED BY THE DISTRICT BOARD OF HEALTH PURSUANT TO THE AIR POLLUTION CONTROL REGULATIONS FOR RENO, SPARKS, AND WASHOE COUNTY.

By _____
Inspector

UNLAWFUL TO REMOVE THIS TAG

COMPLAINT INVESTIGATION REPORT
Washoe County Air Quality Management Division

Complaint Number: **CMP12-0203**

Complaint Status: NOV

Source of Complaint: CITIZEN

Complaint Type: ASBESTOS

Date Received: 11/20/2012

Time: 8:17:00 AM

Inspector: MOSBORN

Inspector Area: 3

Complaint Description: CITATION 5318, CASE 1108, POSSIBLE ASBESTOS REMOVAL; 20 UNITS
LINOLEUM

Address: 72 HIGH ST RENO

Location:

Parcel Number: 01211222

Related Permit Number:

Complainant:

CINDY
CITY OF RENO CODE ENFORCEMENT

RENO NV 89502
775-745-0379

Responsible Party:

PRESERVATION RESTORATION SVCS
MICHAEL J STERLING
10672 FIRE POPPY CIRCLE
RENO NV 89521-8210
775-445-9355

Investigation:

Violation of 030.107ABC

Investigation:

On or about November 20, 2012, Michael J. Sterling, DBA as Preservation Restoration Services did in fact violate:

- 030.107 A: Asbestos sampling and notification
- 030.107 B: Asbestos control work practices
- 030.107 C: Asbestos contamination and abatement

Facts:

At approximately 0815 hrs. Specialist Osborn was dispatched to 72 High street, Reno Nevada. City of Reno Code Enforcement Officer Cindy LNU had observed or spoke with personnel involving the removal of asbestos linoleum from approximately 20 apt. units located at 72 high street. On arrival at 72 High Street a pick up truck with no plates was observed backing from the building. The Driver was

instructed to pull his truck up along the wall and park it until Specialist Osborn could get a look at the material in the rear of the truck. On closer examination of the vehicle there was observed to be five or six different patterns of vinyl flooring. Through experience and visual observation the outer surfacing pattern on some pieces of the flooring appear to be that associated with other asbestos containing flooring observed in the past. Specialist Osborn requested the worker to immediately wet and cover the truck with poly plastic until further investigation was completed.

Specialist Osborn then met with the Manager of Preservation Restoration Services, Mike Sterling. After identifying himself to Mr. Sterling it was learned that he has the project at 72 High Street. Also projects at 53, 55, 57, and 61 High Street. Addresses 53 thru 61 are carpet removal and painting projects of the houses and apartments. According to Mr. Sterling.

Mr. Sterling was asked if he had in fact sampled for asbestos containing materials at 72 High Street. Mr Sterling advised this specialist that he had no consultants and no Asbestos surveys of the property. Specialist Osborn then asked Mr. Sterling to accompany me around the property for a visual inspection.

During the tour of the property it was learned that he had removed linoleum from the kitchen floors and some bathrooms of apartments on the second floor. On going up the stairs to the second floor there was found to be an excessive amount of broken up building material that had been tracked in and out of the second floor areas.

It was further learned from Mr. Sterling that he had in fact removed the kitchen and some lino from bathrooms in seven apartments. Mr. Sterling was advised at this time to obtain an asbestos consultant so sampling and survey of the building could be taken. Bob Nemitz of Environmental testing and Consulting arrived and met with Mr. Sterling and this specialist. Sheet flooring samples were taken from units 27, 28, 35 and 36. This is a composite of four apartments with a common kitchen. Kitchen samples were found to be positive for asbestos 20-30%. The linoleum in bathroom 28 was found positive for asbestos 20-30%. Most of the flooring had been torn up and carried out to the truck. Due to improper abatement in these units enough samples were left in the rooms to match to the colors in the truck.

It was also noticed that ceiling scapes of popcorn surfacing material had occurred in many of the apartments. The material was scraped and left of the floors of the apartments. It was much of this material that was found tracked out onto the balconies on the second floor. This material was tested for asbestos and found to be negative.

Mr. Sterling wanting to continue his project was advised that further sampling of any material to be disturbed should be analyzed at this point and time. It was decided that seven samples of popcorn ceiling material should be obtained, 6 samples of flooring material and 3 samples of cove base mastic.

All samples appeared to be homogeneous in the various types of materials.

All of the samples were checked under a PLM microscope.

On checking the perimeter of the building some linoleum and approximately six large bags of scraped popcorn material was located in the dumpster. A padlock was placed on the dumpster until the items could be removed by an abatement team.

Mr. Sterling was further advised to contact an abatement team and request an emergency abatement on the contents of the back of the truck and of the garbage dumpster. Guardian Environmental was

contacted and arrived on scene to abate the trucks contents of friable asbestos along with the contents from the dumpster. Abatement work of the dumpster and asbestos flooring in the truck concluded at approximately 8:30 p.m.

Mr Sterling was advised that apartments 27-28-35-36 were contaminated with asbestos and would require a complete abatement of linoleum, a wipe down of the apartments and final air sampling.

Mr. Sterling was then issued notice of violation #5318, for violation of 030.107; A,B,C. Mr Sterling was also provided with a copy of petition for appeal.

No past violations for this company or Mr. Sterling were located.

Michael R. Osborn, AQSII
Air Quality Management Div.
Washoe County Health District

Enforcement Activities

Warning Citation..:	Citation Number: 5318
NOV.....: 11/20/2012	NOV Number.....: 0
	Case Number.....: 1108
Settlement.....:	Amount.....: \$0.00
Appealed.....:	
Upheld.....:	Amount.....: \$0.00

Status Information

Initialized By.....: TBURTON	Completed Date...:
Date Assigned.....: 11/20/2012	Completed By.....:

PHOTOS TAKEN BY AQ SPECIALIST II, MICHAEL OSBORN
OF PROPERTY LOCATED AT
72 HIGH STREET, RENO NV 89502



11/20/2012 12:48:52 PM

Violation of 030.107;
A; Asbestos sampling and notification.
B; Asbestos control work practice.
C; Asbestos contamination and abatement.



11/20/2012 12:48:23 PM

Depicts Ford Ranger P/U loaded with debris found to contain asbestos flooring.



11/20/2012 12:48:46 PM



11/20/2012 12:48:36 PM



11/20/2012 9:18:27 AM

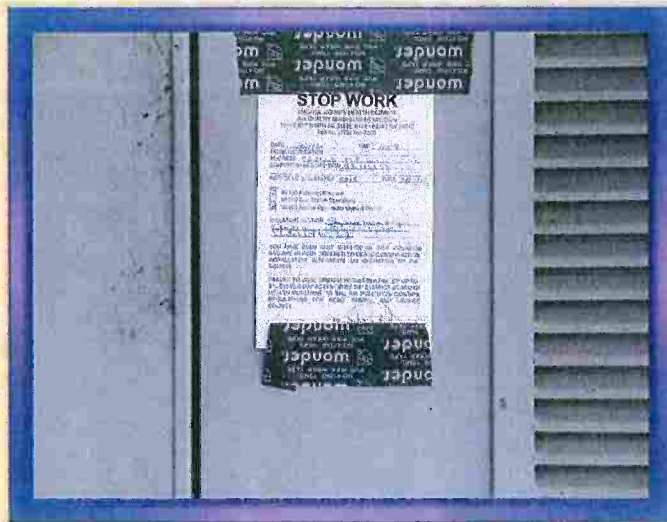


11/20/2012 9:18:43 AM



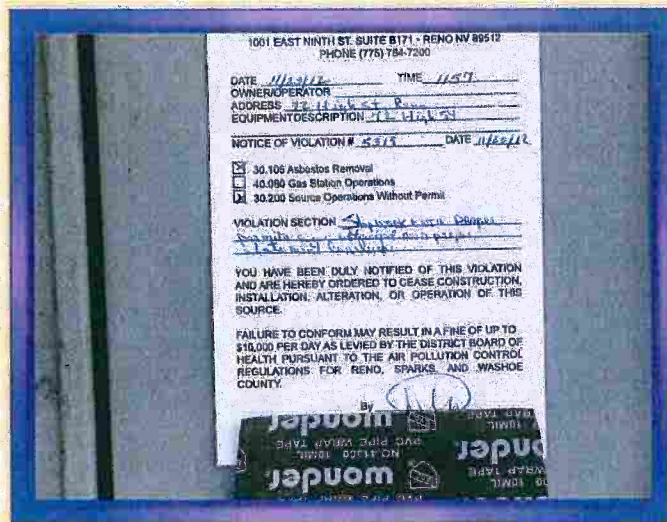
11/20/2012 9:20:48 AM

Close ups of asbestos containing flooring in the back of pick up truck located at 72 High Street.



11/20/2012 12:47:28 PM

Depicts stop work order placed on first floor of apartment building.



11/20/2012 12:47:36 PM

This photo depicts the trackout and contamination of out walkway on 2nd floor of 72 High Street.



11/20/2012 10:36:02 AM

The photos depict the upper landings of 72 High Street. After wetting the outdoor carpet poly was placed to stop further contamination from "Popcorn" ceiling material tracked out of both sides of building.



11/20/2012 12:37:37 PM

These photos are of possible contamination garbage dumpster possible asbestos containing materials inside the garbage dumpster at 72 High Street.



11/20/2012 11:25:30 AM



11/20/2012 11:25:02 AM



11/20/2012 11:17:14 AM



11/20/2012 11:18:04 AM

These photos depict ceiling scrapes that occurred or in approximately 15 units. Popcorn material proved negative for asbestos.



11/20/2012 11:22:51 AM



11/20/2012 11:03:08 AM

These photos show contaminated units 35 and 36. Kitchen floor Vinyls contained 20-30% asbestos content.



11/20/2012 10:50:43 AM



11/20/2012 11:14:51 AM



11/20/2012 10:58:21 AM

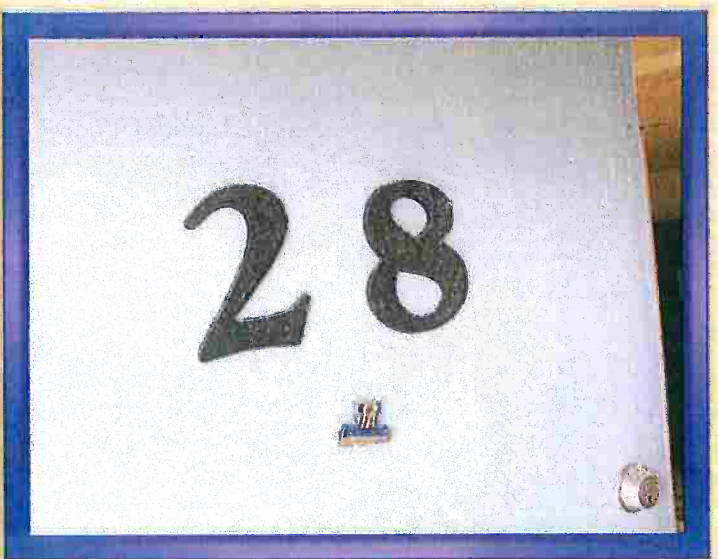


11/20/2012 10:58:37 AM

Photos depicts units 27 and 28 contaminated by asbestos containing Vinyl flooring found to contain 20-30% Chrysotile.



11/20/2012 10:58:58 AM



11/20/2012 10:59:11 AM

**ENVIRONMENTAL TESTING & CONSULTING INC - ASBESTOS TESTING RESULTS
AND
ASBESTOS TEM LABORATORIES INC - LAB RESULTS**

**FOR THE PROPERTY LOCATED AT 72 HIGH STREET, RENO NV 89502
DATED NOVEMBER 20, 2012**

**ENVIRONMENTAL
TESTING & CONSULTING INC
14640 Toll Rd. Reno. NV 89521**

November 20, 2012
ETC Project No. 11-12-946

Preservation Restoration Services
10672 Fire Poppy Circle
Reno, NV 89521
Attn: Mike Sterling

**Re: ASBESTOS RENOVATION SURVEY
72 High St, Reno, NV**

Ladies and Gentlemen:

On Tuesday November 20, 2012 a representative from Environmental Testing & Consulting (ETC) collected samples of building materials* (acoustical ceiling, sheet flooring and cove base mastic) proposed for renovation in the above mentioned facility. The intended scope of work included removal or disturbance of the above mentioned building materials. The contractor described the scope of work.

The purpose of this survey was to determine if Asbestos Containing Material (ACM) existed in the building materials that may be disturbed by an intended renovation. With this knowledge, the Owner or the Owner's Agent can determine what abatement action is necessary for appropriate health and safety precautions and to comply with all applicable federal, state and local regulatory requirements prior to and during the proposed renovation.

The survey work included conducting a visual inspection of the proposed work areas to determine types of building materials present, then developing and implementing a sampling plan of all accessible suspect asbestos containing materials in the intended renovation area. Samples were collected from the impacted materials. The samples were analyzed for asbestos content by EPA Method 600/R-93/116.

*Some of the building materials were removed. Samples were collected from debris in the areas where said materials had been removed.

FINDINGS**

The description and location of all ACM detected in the survey is summarized in the following table. The following homogenous materials were determined to be ACM because the analytical results indicate they contain greater than 1% asbestos:

ACM Summary Data			
Material Description	Material Location	Sample Number & Asbestos Content	*Friability
Sheet flooring	Room 28 bathroom	3 20-30% Chrysotile	F
Sheet flooring	Room's 27, 28, 35 and 36 common kitchen	4 20-30% Chrysotile	F
*Note: F = Friable NF = Non- Friable PF = Potentially Friable, because it will become friable under standard renovation or demolition procedures.			

The **materials determined not to be ACM** because they did not contain regulated quantities of asbestos include:

- Acoustical ceiling material throughout the facility
- Cove base mastic throughout the facility
- Sheet flooring in the bathroom in rooms 27, 35 and 36

****Please see attached sketch for exact sample locations.**

CONCLUSION AND RECOMMENDATIONS

In conclusion, we recommend that any ACM listed as F or PF in the above table be considered Regulated ACM, and further recommend that all Regulated ACM be removed prior to the intended renovation of these structures in accordance with federal, state, and local regulation requirements, **if the materials will be disturbed by the intended renovation.** We also recommend that an independent state licensed consultant conduct confirmation of abatement by visual inspection and air quality sampling if abatement is required.

Additionally, we recommend this report be submitted to the air quality division of the local health department. By doing this, you have verifiable documentation that this survey was performed and may receive directions on how to comply with local and Federal EPA regulations. Note that OSHA and state regulations may also apply to this project under separate jurisdiction.

Our firm has the licensed personnel and ability to assist with abatement design, abatement monitoring, and clearance testing. Please contact the undersigned industrial hygienist if you have questions on the report or for further services.

CLOSURE

It was not the intent of this study to find buried materials, conduct excessive destructive sampling, or to sample those materials that are not commonly considered asbestos containing for the purposes of building renovation or demolition. The purpose of this survey was to find and sample accessible suspect materials including multi-layered materials to determine asbestos content. ***If additional suspect Asbestos Containing Materials are encountered during renovation or demolition, that were previously undetected, the consultant requests to be notified so that sampling or other appropriate responses can be determined.***

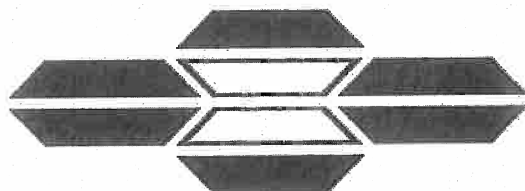
This report represents information relating to the specific sample locations and material conditions at the time the survey was conducted. No other claims, warranties, or guarantees are either expressed or implied.

Submitted by,

Jack Goshow, Senior Industrial Hygienist, CMC™
Council Certified Microbial Consultant™
Board-awarded by the American Indoor Air Quality Council™
NV Asbestos Consultant # IM 0865
IICRC Water Restoration Technician



Enc. Lab Reports & Chain of Custody



ASBESTOS TEM LABORATORIES, INC.

**EPA Method 600/R-93/116
Polarized Light Microscopy
Analytical Report**

Report No. 120786

1350 Freeport Blvd., Unit 104
Sparks, NV 89431
(775) 359-3377
FAX (775) 359-2798

With Main Office Located At:
630 Bancroft Way, Berkeley, CA 94710
Ph. (510) 704-8930 Fax (510) 704-8929



ASBESTOS TEM LABORATORIES, INC

Accredited by
U.S. Dept. of Commerce
NVLAP[®]
NVLAP Lab Code 200104-0

Nov-20-12

Mr. Jack Goshow
Environmental Testing & Consulting
14640 Toll Rd
Reno, NV 89521

RE: LABORATORY JOB # 881-####
Polarized light microscopy analytical results for 15 bulk sample(s) with 1 sample split(s)
Job Site: 72 High Street, Reno
Job No.:
Report No.: 120786

Enclosed please find the bulk material analytical results for one or more samples submitted for asbestos analysis. The analyses were performed in accordance with EPA Method 600/R-93/116 or 600/M4-82-020 for the determination of asbestos in bulk building materials by polarized light microscopy (PLM). Please note that while PLM analysis is commonly performed on non-friable and fine grained materials such as floor tiles and dust, the EPA method recognizes that PLM is subject to limitations. In these situations, accurate results may only be obtainable through the use of more sophisticated and accurate techniques such as transmission electron microscopy (TEM) or X-ray diffraction (XRD).

Prior to analysis, samples are logged-in and all data pertinent to the sample recorded. The samples are checked for damage or disruption of any chain-of-custody seals. A unique laboratory ID number is assigned to each sample. A hard copy log-in sheet containing all pertinent information concerning the sample is generated. This and all other relevant paper work are kept with the sample throughout the analytical procedures to assure proper analysis.

Each sample is opened in a class 100 HEPA negative air hood. A representative sampling of the material is selected and placed onto a glass microscope slide containing a drop of refractive index oil. The glass slide is placed under a polarizing light microscope where standard mineralogical techniques are used to analyze and quantify the various materials present, including asbestos. The data is then compiled into standard report format and subjected to a thorough quality assurance check before the information is released to the client.

For possible future reference, samples are normally kept on file for one year.

Sincerely Yours,

Laboratory Analyst
ASBESTOS TEM LABORATORIES, INC.

--- These results relate only to the samples tested and must not be reproduced, except in full, with the approval of the laboratory. This report must not be used to claim product endorsement by NVLAP or any other agency of the U.S. Government. ---



POLARIZED LIGHT MICROSCOPY ANALYTICAL REPORT

EPA Method 600/R-93/116 or 600/M4-82-020

Contact: Mr. Jack Goshow	Samples Indicated: 15	Report No. 120786
Address: Environmental Testing & Consulting	Reg. Samples Analyzed: 15	Date Submitted: Nov-20-12
14640 Toll Rd	Split Layers Analyzed: 1	Date Reported: Nov-20-12
Reno, NV 89521	Job Site / No. 72 High Street, Reno	

SAMPLE ID	ASBESTOS TYPE	OTHER DATA		DESCRIPTION
		1) Non-Asbestos Fibers 2) Matrix Materials 3) Date/Time Collected 4) Date Analyzed		FIELD LAB
1. Lab ID # 881-03226-001	None Detected	1) 11-25% Cellulose, Fiberglass 2) 75-89% Plast, Calc, Other m.p.	3) 4) Nov-20-12	Sheet Flooring, 35 Bathroom Sheet Floor/Backing-Blue/Grey
2. Lab ID # 881-03226-002	None Detected	1) 11-25% Cellulose, Fiberglass 2) 75-89% Plast, Calc, Other m.p.	3) 4) Nov-20-12	Sheet Flooring, 27 Bathroom Sheet Floor/Backing-Tan/Grey
3. Lab ID # 881-03226-003A	None Detected	1) 11-25% Cellulose, Fiberglass 2) 75-89% Plast, Calc, Other m.p.	3) 4) Nov-20-12	Sheet Flooring, 28 Bathroom Sheet Floor/Backing-Red/Grey
3. Lab ID # 881-03226-003B	20-30% Chrysotile	1) 10-20% Cellulose 2) 50-70% Plast, Gyp, Other m.p.	3) 4) Nov-20-12	Sheet Flooring, 28 Bathroom Sheet Floor/Backing-Brown/Grey
4. Lab ID # 881-03226-004	20-30% Chrysotile	1) 10-20% Cellulose 2) 50-70% Plast, Gyp, Other m.p.	3) 4) Nov-20-12	Sheet Flooring, 27,28,35,36 Kitchen Sheet Floor/Backing-Brown/Grey
5. Lab ID # 881-03226-005	None Detected	1) 11-25% Cellulose, Fiberglass 2) 75-89% Plast, Calc, Other m.p.	3) 4) Nov-20-12	Sheet Flooring, 36 Bathroom Sheet Floor/Backing-Green/Grey
6. Lab ID # 881-03226-006	None Detected	1) 1-5% Cellulose 2) 95-99% PlastFoam, Calc, Other m.p.	3) 4) Nov-20-12	Spray Accoustic, 28 Acoustic-White
7. Lab ID # 881-03226-007	None Detected	1) 1-5% Cellulose 2) 95-99% PlastFoam, Calc, Other m.p.	3) 4) Nov-20-12	Spray Accoustic, 35 Acoustic-White
8. Lab ID # 881-03226-008	None Detected	1) 1-5% Cellulose 2) 95-99% PlastFoam, Calc, Other m.p.	3) 4) Nov-20-12	Spray Accoustic, 33 Acoustic-White
9. Lab ID # 881-03226-009	None Detected	1) 1-5% Cellulose 2) 95-99% PlastFoam, Calc, Other m.p.	3) 4) Nov-20-12	Spray Accoustic, 24 Acoustic-White

Detection Limit of Method is Estimated to be 1% Asbestos Using a Visual Area Estimation Technique

Laboratory Analyst
Greg Hanes



POLARIZED LIGHT MICROSCOPY ANALYTICAL REPORT

EPA Method 600/R-93/116 or 600/M4-82-020

Contact: Mr. Jack Goshow

Address: Environmental Testing & Consulting
14640 Toll Rd
Reno, NV 89521

Samples Indicated: 15
Reg. Samples Analyzed: 15
Split Layers Analyzed: 1
Job Site / No. 72 High Street, Reno

Report No. **120786**
Date Submitted: Nov-20-12
Date Reported: Nov-20-12

SAMPLE ID	% ASBESTOS TYPE	OTHER DATA		DESCRIPTION
		1) Non-Asbestos Fibers 2) Matrix Materials 3) Date/Time Collected 4) Date Analyzed		FIELD LAB
10. Lab ID # 881-03226-010	None Detected	1) 1-5% Cellulose 2) 95-99% PlastFoam, Calc, Other m.p. 3) 4) Nov-20-12		Spray Acoustic, 8 Acoustic-White
11. Lab ID # 881-03226-011	None Detected	1) 1-5% Cellulose 2) 95-99% PlastFoam, Calc, Other m.p. 3) 4) Nov-20-12		Spray Acoustic, 10 Acoustic-White
12. Lab ID # 881-03226-012	None Detected	1) 1-5% Cellulose 2) 95-99% PlastFoam, Calc, Other m.p. 3) 4) Nov-20-12		Spray Acoustic, 13 Acoustic-White
13. Lab ID # 881-03226-013	None Detected	1) 1-5% Cellulose 2) 95-99% Gyp, Calc, Other m.p. 3) 4) Nov-20-12		Cove Base Mastic, 12 Common Kitchen Mastic-Brown
14. Lab ID # 881-03226-014	None Detected	1) 1-5% Cellulose 2) 95-99% Gyp, Calc, Other m.p. 3) 4) Nov-20-12		Cove Base Mastic, 22 Bathroom Mastic-Brown/Tan
15. Lab ID # 881-03226-015	None Detected	1) 1-5% Cellulose 2) 95-99% Gyp, Calc, Other m.p. 3) 4) Nov-20-12		Cove Base Mastic, 27 Bathroom Mastic-Brown
Lab ID #		1) 2) 3) 4)		
Lab ID #		1) 2) 3) 4)		
Lab ID #		1) 2) 3) 4)		
Lab ID #		1) 2) 3) 4)		

Detection Limit of Method is Estimated to be 1% Asbestos Using a Visual Area Estimation Technique

Laboratory Analyst

Greg Hanes

ENVIRONMENTAL TESTING & CONSULTING

14640 Toll Rd * Reno, NV 89521 * Ph: (775) 691-5506 * Fax: (775) 853-3554

ASAP * BULK SAMPLE SUBMISSION FORM / CHAIN-OF-CUSTODY *****

Turnaround: 2 hr 4 hr 8 hr 24 hr 2 Day 3 Day

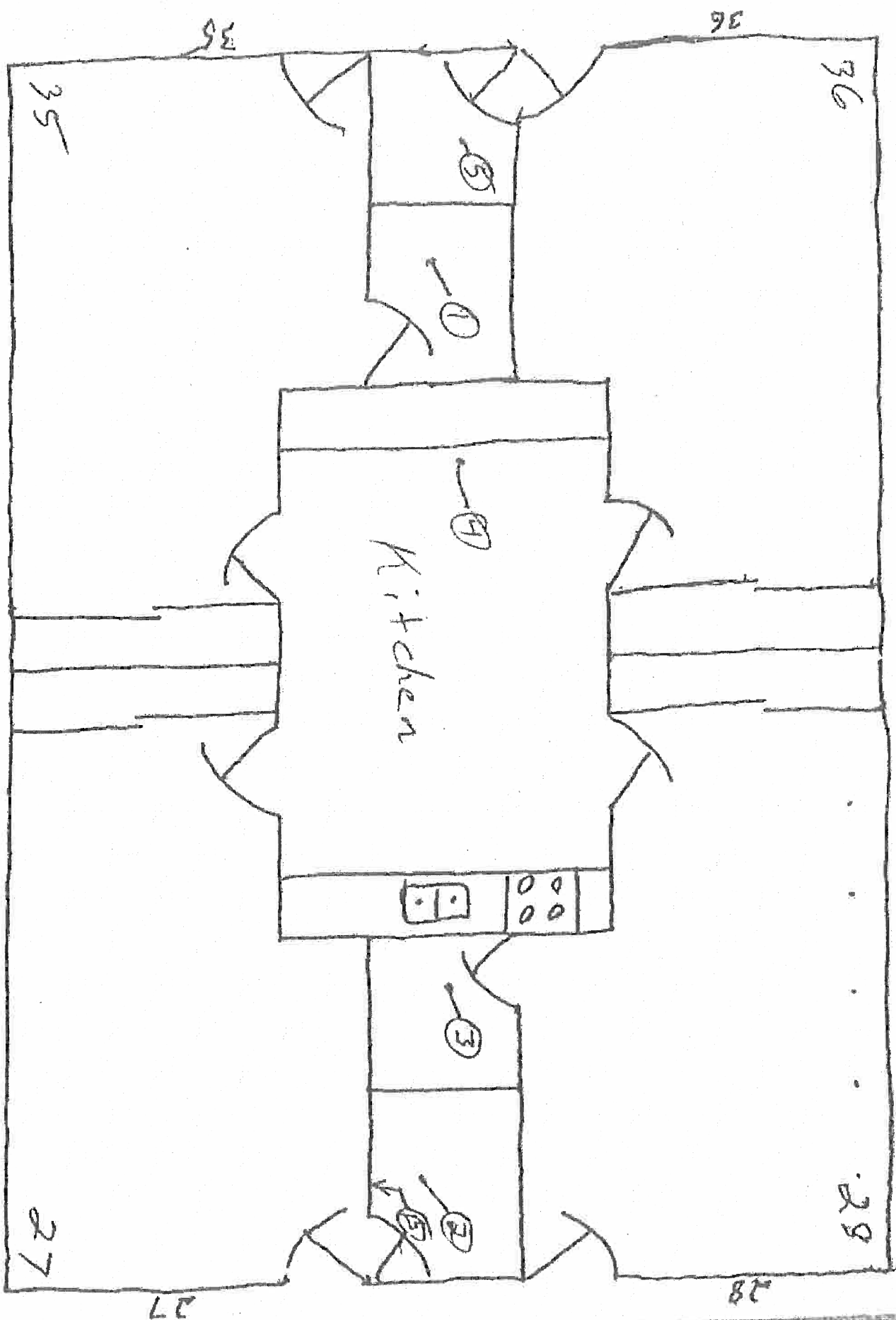
Job Site: 72 High St. (Beard)

Contact Person: Jack Geshow / Bob Nemitz

Sample Number	Sample Description	Sample Location
1	SF Blue/Grey	35 Bathroom
2	SF (Tan/Gold Brown Firm stripes)	27 Bathroom
3	SF Red/Black Pattern	28 Bathroom
4	SF (Tan, Gold, Brown wavy lines)	27, 28, 35, 36 Kitchen
5	SF Green w/ Paisley	36 Bathroom
6	SA	28
7	SA	35
8	SA	33
9	SA TTFP	24
10	SA	8
11	SA	10
12	SA	13
13	CBM	12 common Kitchen
14	" TTFP	22 Bathroom
15	"	27 "

Special Instructions: _____

Relinquished by		Date / Time	Received by		Date / Time
Name/Company: Jack Geshow / Bob Nemitz / ETC		11-20-12	Name/Company - Sue Ehrlich / Greg Hanes / ATEM		11-20-12
Signature		11:07	Signature		11:07
Name/Company			Name/Company		
Signature			Signature		



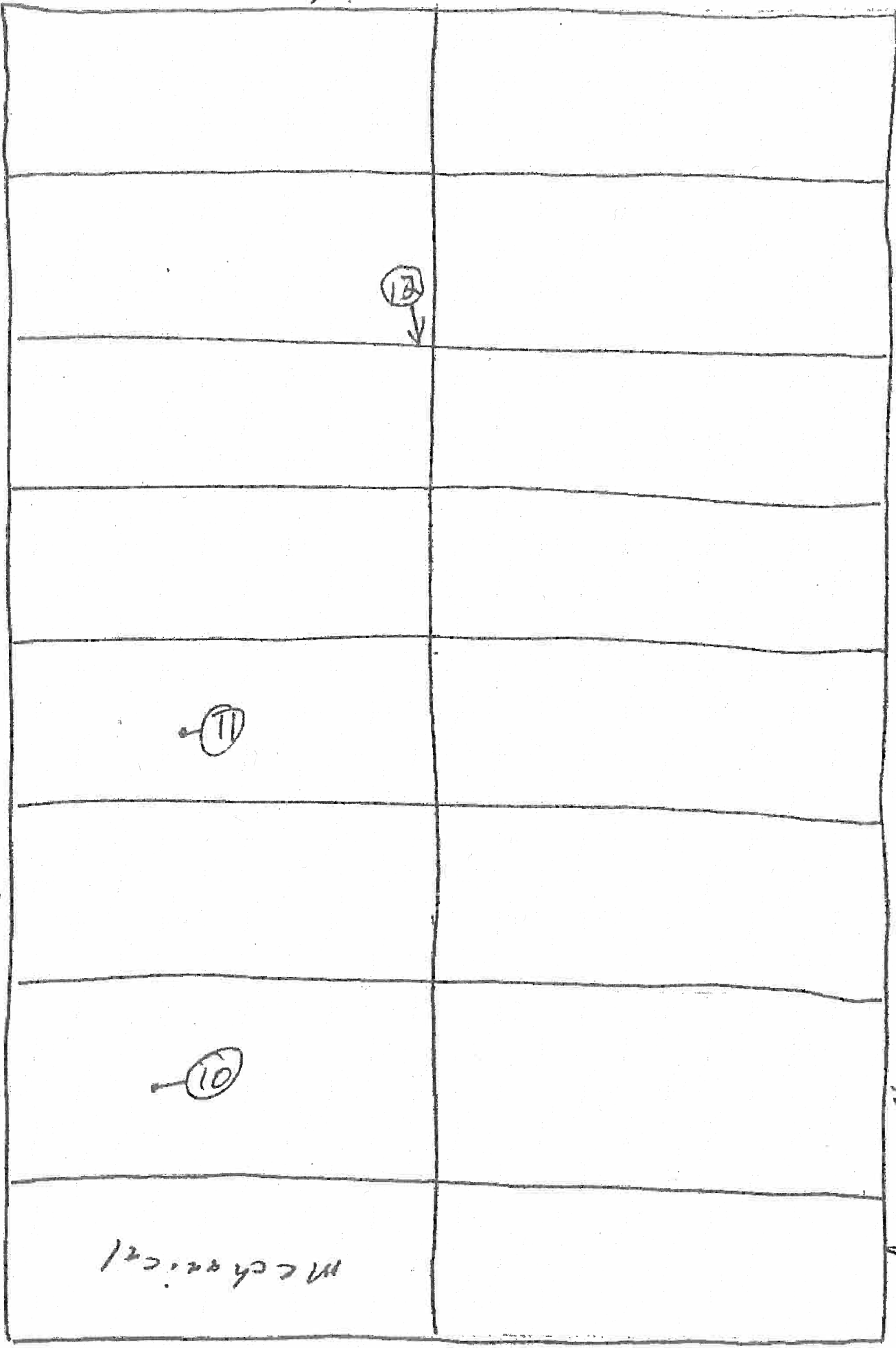
N ↑
72 High
(Rend)

(1-5)
(15)

72 High (end) . (lower) (10-13)

14
13
12
11
10
9
8

7
6
5
4
3
2
1
Landing
office



Mechanical

11

13

10

↙
↘

72 High (Beid) (Upper) (6-9)
(14)

36		⑥	28
35	⑦		27
34			26
33	⑧		25
32		⑨	24
31			23
30			⑭ ↑ 22
29			21

**AIR QUALITY MANAGEMENT - EPA/NESHAP FORM
ISSUED TO PRESERVATION RESTORATION SERVICES
DATED NOVEMBER 26, 2012**

NOV 26 2012

WASHOE COUNTY HEALTH DIST.

EPA NESHAP
Notification OF DEMOLITION AND RENOVATION

FILL IN ALL NUMBERED BLANKS

50048 4300.00
CHECK
1 112612 1048963 TND

Operator Project #	Postmark	Date Received 11/26/2012	Notification Permit # ASB12-1047
--------------------	----------	-----------------------------	-------------------------------------

1. TYPE OF NOTIFICATION (O=Original R= Revised C=Canceled) **O**

2. FACILITY INFORMATION (Identify Owner, Removal Contractor, and Other Operator)

OWNER NAME: **HABITAT FLATS LLC**

Address: **P.O. Box 6736**

City: **Incline Village** State: **NEVADA** Zip: **89450**

Contact Person: **Mark Schitten** Tel: **562-799-2190**

REMOVAL CONTRACTOR: **PRESERVATION RESTORATION SERVICES**

Address: **10672 FIRE POPPY CIR**

City: **RENO** State: **NV** Zip: **89521**

Contact Person: **MIKE STERLING** Tel: **775-445-9355**

OTHER OPERATOR/CONSULTANT: **GUARDIAN ENVIRONMENTAL**

Address: **1320 FREEPORT BLVD STE. 111**

City: **SPARKS** State: **NV** Zip: **89431**

Contact Person: **ROGER GADSBY** Tel: **775-219-6879**

3. TYPE OF OPERATION (D=Demo O=Ordered Demo R=Renovation **E**=Emergency Renovation) **E**

4. IS ASBESTOS PRESENT? **(Yes/No)**

5. Facility Description (Include Building Name, Number, and Floor or Room Number)

Building Name: **HABITAT**

Address: **72 High Street**

City: **RENO** State: **NV** County: **WASHOE** Zip Code: **89502**

On-Site Location: **Pick-up truck outside location**

Building Size: **11,352 SF.** # of Floors: **TWO** Age in Years: **34**

Present Use: **Single Family Apts.** Prior Use: **SAME**

6. PROCEDURE INCLUDING ANALYTICAL METHOD, IF APPROPRIATE, USED TO DETECT THE PRESENCE OF ACM:
PLM Bulk Sampling

7. APPROXIMATE AMOUNT OF ASBESTOS, INCLUDING: 1. Regulated ACM to be removed. 2. Category I ACM Not Removed. 3. Category II ACM Not Removed.	Amount of RACM To Be Removed	Amount of Nonfriable ACM Not To Be Removed		Amount of Nonfriable ACM To Be Removed	
		Cat I	Cat II	Cat I	Cat II
*** Note material being removed to the right of measurement ***					
Pipes (Linear Ft.)					
Surface Area (Square Ft.) FRIABLE SHEET FLOOR BACKING	193 SF				
Vol RACM off facility Component (Cubic Ft.)					

8. SCHEDULED DATES ASBESTOS REMOVAL (MM/DD/YY) Start: **11-20-12** Completed: **11-20-12**

9. SCHEDULED DATES DEMO/RENOVATION (MM/DD/YY) Start: _____ Completed: _____

D. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHODS TO BE USED:

1. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION AND RENOVATION SITE:

2. WASTE TRANSPORTER #1

Name: GUARDIAN ENVIRONMENTAL, INC.

Address: 1320 Freeport Blvd. Ste. # 111

City: Sparks

State: NV.

Zip: 89431

Contact Person: Roger Gadsby

Telephone: 775-219-6879

WASTE TRANSPORTER #2

Name:

Address:

City:

State:

Zip:

Contact Person:

Telephone:

3. WASTE DISPOSAL SITE

Name: Lockwood Regional Landfill

Location: 2401 Canyon Way

City: Sparks

State: NV

Zip: 89434

Telephone: 775-342-0401

14. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE IDENTIFY THE AGENCY BELOW:

Name: Title:

Authority:

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 cause equipment damage or an unreasonable financial burden:

16. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO POWDER:

17. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THIS REGULATION (40 CFR PART 61, SUBPART M) WILL BE ON-SITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING NORMAL BUSINESS HOURS.

ROGER GADSBY (Print Name: Owner/Operator)

Project Mgr. (Title)

Roger Gadsby (Signature of Owner/Operator)

11-26-12 (Date)

18. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.

(Print Name: Owner/Operator)

(Affiliation)

(AHERA Certificate Number)

(Expiration Date)

19. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.


ROGER GADSBY (Print Name: Owner/Operator)

Project Mgr. (Title)

Roger Gadsby (Signature of Owner/Operator)

11-26-12 (Date)

**LISTING OF PERSONNEL ON SITE DURING THE INVESTIGATION
ON NOVEMBER 20, 2012**

PERSONNEL ON SITE DURING INVESTIGATION. 11/20/12 

Environmental Testing & Consulting

Mold • Asbestos • Industrial Hygiene • IAQ

Bob Nemitz
Environmental Consultant

Cell: (775) 691-0951
Office: (775) 853-7878
aihome@sbcglobal.net

14640 Toll Road
Reno, NV 89521

JIM GIBBONS
Governor



STATE OF NEVADA

Department of Business and Industry
Division of Industrial Relations
Occupational Safety and Health Administration

EE FOO LEE
Industrial Hygienist
Compliance Unit

4600 Kietzke Lane
Suite F-153
Reno, Nevada 89502

Telephone (775) 824-4607
Fax (775) 688-1378

E-mail: lee.cefoo@dol.gov

BRIAN SANDOVAL
Governor



STATE OF NEVADA

Department of Business and Industry
Division of Industrial Relations
Occupational Safety and Health Administration

ANDREW CONNER
Compliance Safety and Health Officer

4600 Kietzke Lane, Building F-153
Reno, Nevada 89502

Telephone (775) 824-4614
Fax (775) 688-1378

E-mail: conner.andrew@dol.gov

BRIAN SANDOVAL
Governor



RENO FAX
689-2194

STATE OF NEVADA

Department of Business and Industry
Division of Industrial Relations
Workers' Compensation Section

GEORGE DORSA
Compliance Investigator
Employer Compliance Unit

400 W. King Street, Suite 400
Carson City, Nevada 89703
www.dirweb.state.nv.us

824-4658
Telephone (775) 684-7264
CARSON FAX (775) 687-3073
E-mail: gdorsa@business.nv.gov



WASHOE COUNTY HEALTH DISTRICT

AIR QUALITY MANAGEMENT DIVISION



Public Health
Prevent. Promote. Protect.

DATE: January 24, 2013

TO: District Board of Health

FROM: Kevin Dick, Director, Air Quality Management

SUBJECT: Heavenly Auto Body – Case No. 1109
Unappealed Citation No. 5319
Agenda Item: 9. A. 1. e.

Recommendation

Air Quality Management Staff recommends that Citation No. 5319 be upheld and a fine of \$2,500 be levied against Heavenly Auto Body for an auto body repair facility without a permit to operate. Operating without a permit constitutes a major violation of the District Board of Health Regulations Governing Air Quality Management, specifically Section 030.000, Source Permitting and Operation.

Recommended Fine: \$5,000.00

Negotiated Fine: \$2,500.00

Background

On November 27, 2012, Air Quality Management received a citizen's complaint regarding the strong smell of paint fumes in the area of 2530 Sutro Street, Reno. At approximately 4:30 pm, Specialist II Michael Osborn arrived on site and immediately identified a strong odor emanating from Suite No. 1. Upon entering the building, Specialist Osborn requested permission to inspect the facility in response to the complaint and was granted full access. When he entered the back bay area, he found a vehicle that had been masked off and freshly painted with acrylic lacquer primer. Specialist Osborn asked an apprentice painter in the shop, Mr. Avilla, how the lacquer had been applied to the vehicle. Mr. Avilla stated that he used a HVLP (high velocity low pressure) spray gun to apply the product. Photos were taken of the primed vehicle, the spray gun and the product that had been applied.

Specialist Osborn then made contact with Mr. Oscar Casas, owner of Heavenly Auto Body Shop, to inform him of the complaint that had been received. Specialist Osborn advised Mr. Casas that painting or priming vehicles without an approved spray booth was a violation of the Air Quality Regulations. Mr. Casas was instructed to cease any further painting or priming of vehicles without an approved paint booth. Upon completion of a records review, Specialist Osborn was able to confirm that Mr. Casas does have a business license for an auto body shop in the State of Nevada, but that he had no Air Quality permit on file.

Based on the results of the investigation, Specialist Osborn issued Notice of Violation Citation No. 5319 for a major violation of Section 030.000, Source Permitting and Operation. Specialist Osborn also presented Mr. Casas with information regarding permitting and compliance with the regulations contained in 40 CFR, Part 63, National Emission Standards for Hazardous Air Pollutants Subpart HHHHHH – Paint Stripping and Miscellaneous Surface Coating Operations.

P.O. BOX 11130 Reno, NV 89520-0027 • (775) 784-7200 • FAX (775) 784-7225

www.washoecounty.us/health

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DBOH AGENDA ITEM NO. 9. A. 1. e.

January 24, 2013
DBOH/Heavenly Auto Body /Case 1109
Page 2

Settlement

On December 11, 2012, Senior AQ Specialist Dennis Cerfoglio conducted a negotiated settlement meeting attended by AQ Specialist Osborn and Mr. Casas, Heavenly Auto Body. After consideration of all the facts in the case, Specialist Cerfoglio recommended that Citation No. 5319 be upheld with a fine of \$2,500. 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 Citation No. 5319.
2. The Board may determine to uphold Citation No. 5319 and levy a fine in the range of \$0 to \$10,000.

In the event the Board determines to change the proposed penalty, the matter should be continued so that Heavenly Auto Body may be properly noticed.



Kevin Dick, Division Director
Air Quality Management

KD/DC: ma



DISTRICT HEALTH DEPARTMENT

AIR QUALITY MANAGEMENT DIVISION

MEMORANDUM OF UNDERSTANDING

AIR QUALITY MANAGEMENT DIVISION
WASHOE COUNTY HEALTH DISTRICT

Date: December 11, 2012

Company Name: HEAVENLY AUTOBODY

Company Address: 2530 SUTRO ST. Ste #1, RENO, NV 99512

Notice of Violation No.: 5319 Case No.: 1109

Location of Violation: SAME AS ABOVE

The staff of the Air Quality Management Division of the Washoe County Health District issued the above referenced Citation for the violation of Regulation: _____

030.000 OPERATING WITHOUT A PERMIT
030.106 MESHAPS - 6 H

A settlement of this matter has been negotiated between the undersigned parties resulting in a penalty amount of \$ 2,500.00. This settlement will be submitted to the District Board of Health for review at the regularly scheduled meeting on January 24, 2013. Five payments of \$500.00 Each

Oscar S. Casas
Signature of Company Representative

Dennis A. Cerfoglio
Signature of District Representative

Oscar S. Casas
Print Name

DENNIS A. CERFOGLIO
Print Name

Owner
Title

Sr. Air Quality Specialist
Title

Witness

[Signature]
Witness

Witness

Witness

RECOMMENDED FINE WORKSHEET

DATE: 11-27-2012 CASE NO.: 1109 NOV NO.: 5319

COMPANY NAME: HEAVENLY AUTO BODY

CONTACT NAME: OSCAR CASAS, OWNER

(MAJOR / MINOR)

VIOLATION OF SECTION(S): 030.2175 VIOLATION OF PERMIT CONDITION

X 1ST VIOLATION _____ 2ND VIOLATION _____ 3RD VIOLATION

<u>YES</u>	HAZARDOUS AIR POLLUTANT	YES / NO	<u>VOC'S & HAP'S</u>	TYPE OF AIR CONTAMINANT (CO, NOX, SOX, PM, VOC'S, HAP'S)
<u>NO</u>	LEGALLY PERMITTED SOURCE	YES / NO	<u>YES</u>	PUBLIC HEALTH EXPOSURE YES / NO
<u>UNKNOWN</u>	NUMBER OF DAYS IN VIOLATION	YES / NO	<u>YES</u>	PUBLIC COMPLAINTS YES / NO

1. **DEGREE OF VIOLATION:** MINOR MODERATE MAJOR
(The degree to which the person/company has deviated from the regulatory requirements)

Major violation of both Regulations; 303.000 & 030.106: No Air Quality Permit to Operate, and no Spray booth, no fire safety system, etc.

2. **ECONOMIC BENEFIT COMPONENT:** (OPTIONAL): MINOR MODERATE MAJOR
ESTIMATED COST \$ \$5,000

(Economic effect to the person/company for NOT complying with the Regulations including avoided costs and delayed costs)

Cost of Spray Booth and installation, fire system, filters, etc.

3. **DEGREE OF COOPERATION:** MINOR MODERATE MAJOR
(The person/company's efforts to immediately cease the violation and come into compliance)

OK on site visits.

4. **ADDITIONAL COMMENTS:**

RECOMMENDED FINE: \$ 5,000


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.



WASHOE COUNTY HEALTH DISTRICT
 AIR QUALITY MANAGEMENT DIVISION
 1001 EAST NINTH ST. • SUITE B171 • RENO NV 89512
 (775) 784-7200



NOTICE OF VIOLATION

NOV 5319

DATE ISSUED: Nov 29, 2012

ISSUED TO: Heavenly Auto Body PHONE #: 775 830-9799

MAILING ADDRESS: 2530 Sutter St, Ste 1 CITY/ST: Reno, NV ZIP: 89512

NAME/OPERATOR: Oscar Casas, Owner PHONE #: 930-9799

PERMIT NO. None COMPLAINT NO. CMP12-0206

YOU ARE HEREBY OFFICIALLY NOTIFIED THAT ON Nov 27, 12 (DATE) AT 4:45 AM (TIME), YOU ARE IN VIOLATION OF THE FOLLOWING SECTION(S) OF THE WASHOE COUNTY DISTRICT BOARD OF HEALTH REGULATIONS GOVERNING AIR QUALITY MANAGEMENT:

- | | |
|--|--|
| <input type="checkbox"/> MINOR VIOLATION OF SECTION: | <input type="checkbox"/> MAJOR VIOLATION OF SECTION: |
| <input type="checkbox"/> 040.030 DUST CONTROL | <input checked="" type="checkbox"/> 030.000 OPERATING W/O PERMIT |
| <input type="checkbox"/> 040.055 ODOR/NUISANCE | <input type="checkbox"/> 030.2175 VIOLATION OF PERMIT CONDITION |
| <input type="checkbox"/> 040.200 DIESEL IDLING | <input type="checkbox"/> 030.105 ASBESTOS/NESHAP |
| <input type="checkbox"/> OTHER _____ | <input checked="" type="checkbox"/> OTHER <u>NESHAP 40CFR, Part 63, 6H</u> |

VIOLATION DESCRIPTION: Operating with out a valid Air Quality Permit and violation of NESHAP, 40CFR Part 63, Subpart 6H. -> violation of 030.106 Washap

LOCATION OF VIOLATION: 2530 Sutter Street, Suite 1, Reno, NV 89512

POINT OF OBSERVATION: 010 site (See photos)

Weather: cool, calm Wind Direction From: N E S W

Emissions Observed: Heavy VOC Odors
 (If Visual Emissions Performed - See attached Plume Evaluation Record)

WARNING ONLY: Effective _____ a.m./p.m. _____ (date) you are hereby ordered to abate the above violation within _____ hours/days. I hereby acknowledge receipt of this warning on the date indicated.

Signature _____

CITATION: You are hereby notified that effective on Nov 27 (date) you are in violation of the section(s) cited above. You are hereby ordered to abate the above violation within 10 hours/days. You may contact the Air Quality Management Division to request a negotiated settlement meeting by calling (775) 784-7200. You are further advised that within 10 working days of the date of this Notice of Violation, you may submit a written petition for appeal to the Washoe County Health District, Air Quality Management Division, P.O. Box 11130, Reno, Nevada 89520-0027. Failure to submit a petition within the specified time will result in the submission of this Notice of Violation to the District Board of Health with a recommendation for the assessment of an administrative fine.

SIGNING THIS FORM IS NOT AN ADMISSION OF GUILT

Signature: Oscar Casas Date: _____

Issued by: W. R. Johnson Title: 102511

PETITION FOR APPEAL FORM PROVIDED

COMPLAINT INVESTIGATION REPORT
Washoe County Air Quality Management Division

Complaint Number: **CMP12-0206**

Complaint Status: NOV

Source of Complaint: CITIZEN

Complaint Type: ODOR Date Received: 11/27/2012

Time: 4:15:00 PM

Inspector: MOSBORN

Inspector Area: 1

Complaint Description: CITATION 5319, CASE 1109 - ODORS FROM SPRAY PAINTING WITHOUT A SPRAY BOOTH

Address: 2530 SUTRO ST RENO

Location:

Parcel Number: 00409333

Related Permit Number:

Complainant:

NICHOLAS MENDOZA
SENTURY SNOWBOARDS
2530 SUTRO STREET UNIT 2
RENO, NV 89512
775-287-1959

Responsible Party:

HEAVENLY AUTO BODY
OSCAR CASAS
2530 STUTRO STREET SUITE 1
RENO NEVADA 89512
775-830-9799

Investigation:

History

On November 27, 2012, the Washoe County Air Quality Office received a complaint from Nicholas Mendoza concerning an odor coming from next to his shop at 2530 Sutro Street Suite #2.

INVESTIGATION:

Specialist Osborn was dispatched to the above location and parked. Immediately exiting the vehicle Osborn smelled a strong odor of VOCs emanating from Suite #1. At the door of suite #1 were two men who were spray painting a sign on the window. When asked where the odors were coming from one of the responsible parties stated that it is from the paint in the cans they were spraying on the outer window of the shop. I asked them for permission to take a walk of the shop and they allowed access through the door to the back area. In the back bay area of the building was a vehicle that had just been freshly painted with acrylic laquer primer. The car was taped and papered off. See attached photos.

Several photos were taken of the paint mixing area and work bench. I asked how the primer was applied and apprentice Avilla stated that it was painted with an hvlp gun. I Asked Avila where the product can was located. Photos were taken of the container. A further inspection of the shop revealed several HVLP guns in the work area. Photos are attached to this report. This specialist then advised Mr. Oscar Casa that I would be researching and due to prior commitments would return on Thursday that week. Casas was instructed not not paint any more cars in the garage. Mr. Casas then stated that he doesn't paint in the garage, just primes the vehicles and then takes them to a paint shop on Glendale Ave. to be painted.

On thurs the 29th of November, Specialist Osborn returned to 2530 Sutro #1 and presented information to Mr. Casas in ref. to Neshap 40 CFR, part 63, HHHHHH and explained that this was the equipment needed to continue painting in his shop. Mr. Casas is a licensed body shop with the state of Nevada but has no Air Quality permit on file. Mr. Casas was then issued Notice of violation #5319 for 030.000 operating without a permit and also for Violation of 40 CFR, Part 63, HHHHHH or adapted regulation 030.106. Mr Casas was further presented with an appeal form and this specialist left the shop.

Michael R Osborn, AQSII
Washoe County Heakth District
Air Quality Management Division

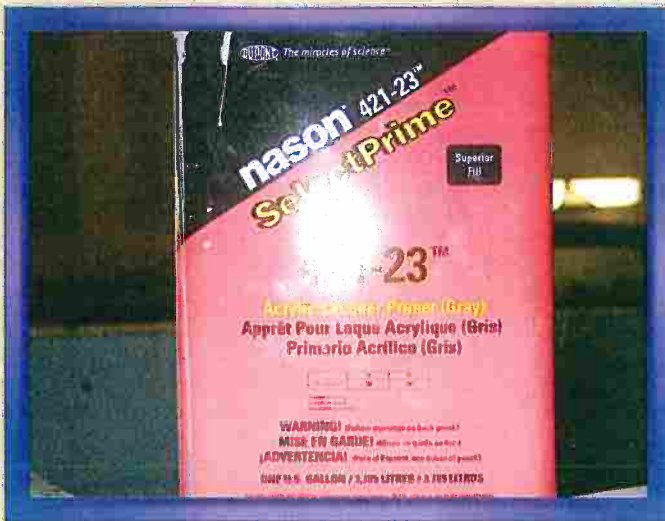
Enforcement Activities

Warning Citation..: 11/29/2012	Citation Number: 5319
NOV.....:	NOV Number....: 0
	Case Number.....: 1109
Settlement.....:	Amount.....: \$0.00
Appealed.....:	
Upheld.....:	Amount.....: \$0.00

Status Information

Initialized By.....: CALBEE	Completed Date...:
Date Assigned.....: 11/27/2012	Completed By.....:

PHOTOS TAKEN BY AQ SPECIALIST II, MICHAEL OSBORN
OF PROPERTY LOCATED AT
2530 SUTRO STREET, SUITE 1, RENO NV 89512



Acrylic enamel primer used with HVLP guns on car at the attached address.

11/27/2012 5:19:19 PM



11/27/2012 5:17:16 PM



11/27/2012 5:18:28 PM



11/27/2012 5:19:48 PM

Freshly sprayed car inside the rear bay of the building.



11/27/2012 5:19:56 PM



11/27/2012 5:20:13 PM



11/27/2012 5:20:20 PM

Paper used in process and photo of workshop area.



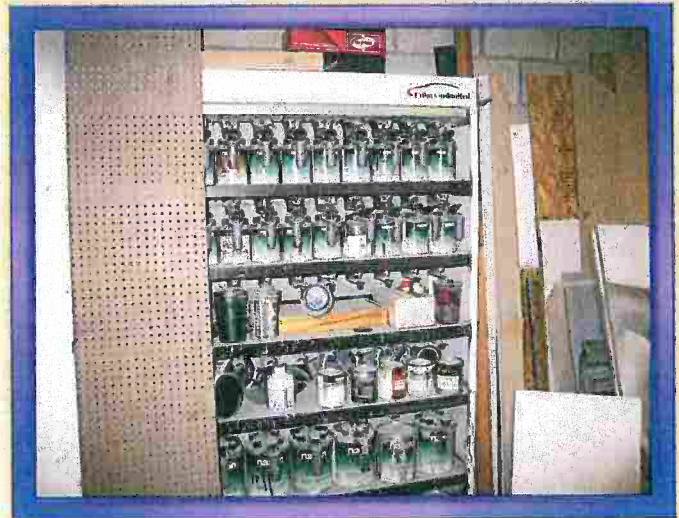
11/27/2012 5:21:03 PM



11/27/2012 5:21:49 PM



11/27/2012 5:21:58 PM



11/27/2012 5:22:12 PM

Spray work shop area to include approx. three HVLP guns and paint/mixing area.

**AIR QUALITY MANAGEMENT
MACT INSPECTION FORM FOR AUTO REFINISHING SHOPS
(NESHAP, 40 CFR PART 63, SUBPART HHHHHH)**

**GIVEN TO HEAVENLY AUTO BODY
LOCATED AT 2530 SUTRO ST, SUITE 1, RENO NV 89512
DATED NOVEMBER 27, 2012**

MACT INSPECTION FORM FOR AUTOBODY REFINISHING SHOPS
(NESHAP, 40 CFR PART 63, SUBPART HHHHHH)

Name of Facility

Heavenly Auto Body

Facility Address

2530 Satic St. Ste #1, Reno, NV

Permit Number

None

EQUIPMENT

Spray Paint Booth (s)

Negative Pressure

No Booth / Neg. Air

Positive Pressure

Gauge Reading

inches water column (< 0.05 " wc)

Booth Filters Type

None

Efficiency

None

HVLP Spray Guns

Yes

No

Comments

Observed 3 gun (Very dirty)

Spray Gun Cleaning

Enclosed Gun Cleaner

Manual Cleaning

None, States He doesn't clean guns.

COMPLIANCE REQUIREMENTS

Initial Notification Submitted

Date: / /

None submitted

Compliance Certification

Date: / /

None submitted

Painter Certification Records Maintained

Yes

No

Number of Painters

Unknown

Comments:

Notice of Violation # 5319 issued
for violation 030.009 and 030.106.

INSPECTOR:

Wes

DATE:

11 / 27 / 12

HEAVENLY AUTO BODY BUSINESS CARDS



BEFORE


AFTER

INSURANCE WELCOME
FREE ESTIMATES

2530 Sutro St. Suite #1
 Reno, NV 89512

HEAVENLY AUTO BODY

THE BEST QUALITY & SERVICE IN TOWN



775-830-9799

EPA BROCHURE
SUMMARY OF REGULATIONS CONTROLLING AIR EMISSIONS FROM
PAINT STRIPPING AND MISCELLANEOUS SURFACE COATING OPERATIONS

NATIONAL EMISSION STANDARDS FOR HAZARDOUS AIR POLLUTANTS
NESHAP (SUBPART HHHHHH) - FINAL RULE

What Is The Compliance Date?

- Sources: January 10, 2011.
- New Sources: Upon startup after January 9, 2008.
- An affected source is a new source if you commenced construction of the source after September 17, 2007 by installing new paint stripping or surface coating equipment at a source not actively engaged in paint stripping and/or miscellaneous surface coating prior to September 17, 2007.
- An affected source is an existing source if it is not a new source or a reconstructed source (An affected source is reconstructed if it meets the definition of reconstruction in section 63.2.).

What are the Permitting Requirements?

- Affected facilities are exempt from Title V permit requirements provided they are not required to obtain a permit for another reason.

What Reporting/Recordkeeping is Required?

Reporting:

- Initial Notification (informs EPA that the facility is subject to the standards and when the source will be in compliance).
- New Sources: July 7, 2008 or 180 days after startup
- Existing Sources: January 11, 2010
- Notification of Compliance (certifies that the source is in compliance with the applicable requirements).
- New Sources: As part of the Initial Notification
- Existing Sources: March 11, 2011
- Annual notification of changes report—required each calendar year any reportable changes occur.

Recordkeeping (keep these records on file)

- Records to include copies of Notifications submitted to EPA.
 - Painter training certifications.
 - Spray booth filter efficiency documentation.
 - Spray gun transfer efficiency.
 - MeCl content information such as MSDS.
 - Annual usage of MeCl for paint stripping, and written MeCl minimization plan if annual usage > 1 ton per year.
 - Deviation and corrective action documentation.
- Records to be maintained in a form suitable and readily available for expeditious review.

You can also contact your Regional EPA air toxics office at the following numbers:

Address	States	Website	Phone Number
Region 1 5 Post Office Square, Suite 100 Mail code: OES04-2 Boston MA 02109-3912	CT, MA, ME, NH, RI, VT	www.epa.gov/region1	(888)372-7341 (617) 918-1650
Region 2 290 Broadway New York, NY 10007-1866	NJ, NY, PR, VI	www.epa.gov/region2	(212) 637-4023
Region 3 1650 Arch Street Philadelphia, PA 19103-2029	DE, MD, PA, VA, WV, DC	www.epa.gov/region3	(215) 814-2746 (800) 228-8711
Region 4 Atlanta Federal Center 61 Forsyth Street, SW Atlanta, GA 30303-8960	FL, NC, SC, KY TN, GA, AL, MS	www.epa.gov/region4	(404) 562-9131 (800) 241-1754
Region 5 77 West Jackson Blvd. Chicago, IL 60604-3507	IL, IN, MI, WI, MN, OH	www.epa.gov/region5	(312) 886-6812 (312) 353-6684 (312) 886-6798
Region 6 1445 Ross Avenue Suite 1200 Dallas, TX 75202-2733	AR, LA, NM, OK, TX	www.epa.gov/region6	(800) 887-6063* (214) 665-7250 (214) 665-7224
Region 7 901 North Fifth Street Kansas City, KS 66101	IA, KS, MO, NE	www.epa.gov/region7	(800) 223-0425 (913)-551-7003
Region 8 1595 Wynkoop St. Denver, CO 80202-1129	CO, MT, ND, SD, UT, WY	www.epa.gov/region8	(800) 227-8917* (303) 312-6460
Region 9 75 Hawthorne Street San Francisco, CA 94105	CA, AZ, HI, NV, GU, AS, MP	www.epa.gov/region9	(415) 947-8715
Region 10 1200 6th Ave. Suite 900, AWT-107 Seattle, WA 98101	AK, ID WA, OR	www.epa.gov/region10	(800) 424-4372* (206) 553-6220

* For sources within the region only.

For More Information

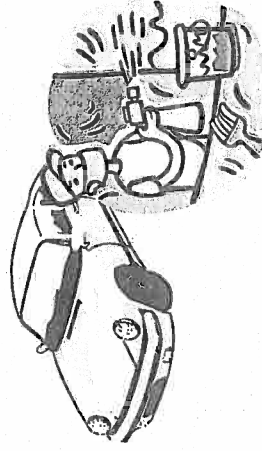
Copies of the rule and other materials are located at: <http://www.epa.gov/ttn/atw/area/arearules.html>

For more information on state requirements, please contact your state representatives at: http://www.epa.gov/ttn/atw/area/table_state_contacts.doc or, <http://www.4cleanair.org/contactUsaLevel.asp>



Summary of Regulations Controlling Air Emissions from

PAINT STRIPPING AND MISCELLANEOUS SURFACE COATING OPERATIONS



NATIONAL EMISSION STANDARDS FOR HAZARDOUS AIR POLLUTANTS NESHAP (SUBPART HHHHHH) FINAL RULE



PAINT STRIPPING AND MISCELLANEOUS SURFACE COATING OPERATIONS (SUBPART HHHHHH)

What Is an Area Source?

- Any source that is not a major source. (A major source is a facility that emits, or has the potential to emit in the absence of controls, at least 10 tons per year (TPY) of individual hazardous air pollutants (HAP) or 25 TPY of combined HAP.)

Who Does This Rule Apply To?

- Area sources that engage in any of the following:
 - Paint stripping operations that use methylene chloride (MeCl)-containing paint stripping formulations;
 - Spray application of coatings to motor vehicles and mobile equipment;
 - Spray application of coatings to a plastic and/or metal substrate where the coatings contain compounds of chromium (Cr), lead (Pb), manganese (Mn), nickel (Ni), or cadmium (Cd).

This rule does not apply to:

- Surface coating or paint stripping performed on site at installations owned or operated by the Armed Forces of the United States.
- Surface coating or paint stripping of military munitions or equipment directly and exclusively used for the purposes of transporting military munitions.
- Surface coating or paint stripping performed by individuals on their personal vehicles, property or possessions, either as a hobby or for maintenance of their personal vehicles, possessions, or property provided they coat no more than two vehicles per year.
- Surface coating or paint stripping that meets the definition of "research and laboratory activities."
- Surface coating or paint stripping that meets the definition of "quality control activities."

- Surface coating or paint stripping that meets the definition of "quality control activities."
- Surface coating or paint stripping activities that are covered under another area source NESHAP

Motor vehicle or mobile equipment surface coating operations may petition the Administrator for an exemption from this subpart if you can demonstrate, to the satisfaction of the Administrator, that you spray apply no coatings that contain compounds of chromium (Cr), lead (Pb), manganese (Mn), nickel (Ni), or cadmium (Cd).

What Am I Required To Do?

- **Paint Stripping Operations**—implement management practices that minimize emissions of MeCl.
 - Evaluate the need for paint stripping (e.g., is it possible to re-coat without stripping?).
 - Evaluate each application to identify potential alternative stripping methods.
 - Reduce exposure of strippers to air.
 - Optimize application conditions.
 - Practice proper storage and disposal.

- For each paint stripping operation with > 1 ton MeCl annual usage, develop and implement a written MeCl minimization plan. No implementation plan is needed if usage is < 1 ton MeCl; however, sources must still utilize work practices to minimize emissions of MeCl. Consult the MSDS sheet to identify the amount of MeCl contained in the paint stripper, but note that annual usage should not exceed 181 gallons of MeCl.

- Maintain records of annual usage of paint strippers containing MeCl.

Motor Vehicle/Mobile Equipment/Miscellaneous Surface Coating Operations.

- Train/certify all painters on spray gun equipment selection, spray techniques, maintenance, and environmental compliance (consult 73 FR 1738, pg. 1762, section 63.11173(f)(2)(i)-(iv)).
- Install/operate filter technology on all spray booths/stations/enclosures to achieve at least 98% capture efficiency.

- Spray booths/stations used to refinish complete motor vehicles or mobile equipment must be fully enclosed and ventilated at negative pressure or up to 0.05 inches water gauge positive pressure for booths that have seals on all doors and other openings and an automatic pressure balancing system.

- Spray booths/stations used to coat miscellaneous parts or products or vehicle subassemblies must have a full roof, at least three complete walls or side curtains, and ventilated so that air is drawn into the booth.

- Spray-applied coatings must be applied with a high volume, low pressure (HVLP) spray gun, electrostatic application, airless or air-assisted airless spray gun, or an equivalent technology.
- Paint spray gun cleaning must be done so that an atomized mist or spray of the cleaning solvent is not created outside a container that collects used gun cleaning solvent.

- Train and certify all personnel who spray apply surface coatings no later than 180 days after hiring or by July 7, 2008 (new sources) or by January 10, 2011 (existing sources).

What are the Impacts?

- Most paint stripping facilities already comply with the rule requirements. Estimate 1,000 facilities will need to take action to comply.
 - Reduce 1,000 tons MeCl annually,
 - Capital costs = \$1.5 million.
 - Annual benefit = \$0.9 million.
- Most surface coating facilities already comply with the rule requirements. Estimate < 25% of existing facilities will need to take some action to comply.
 - Reduce 6,900 tons of HAP annually including 11 tons of metal HAP.
 - Capital costs = \$20 million; however, initial cost to be offset and recovered over time by cost savings as a result of more efficient use of labor and materials.

**DUPONT - NASON FINISHES - TECHNICAL MANUAL FOR:
NASON SELECTPRIME 421-23
GRAY ACRYLIC PRIMER-SURFACER**

NASON[®] SELECTPRIME[™] 421-23[™] GRAY ACRYLIC PRIMER-SURFACER

Nason[®] SelectPrime[™] 421-23[™] is a fast-drying, easy-to-use Acrylic Primer-Surfacer (GRAY).

Nason[®] SelectPrime[™] 421-23[™] is designed to use under synthetic enamel*, acrylic enamel, acrylic lacquer, and urethane enamel. May be used to repair OEM or other properly cured and prepared automotive finishes. Nason[®] SelectPrime[™] 421-23[™] has excellent filling properties, dries fast, sands freely, and provides good holdout for finish coats.

MIXING & THINNING:

Mix ratio by volume for Nason[®] SelectPrime[™] 421-23[™] is 1:1.

Mix:

1 Part Nason[®] SelectPrime[™] 421-23[™]
1 Part Nason[®] Thinner 441-62[™]

SPRAY VISCOSITY:

18-20 seconds for a Zahn #3 (DuPont M-222) cup.

POT LIFE:

Not Applicable

SUBSTRATES:

Properly treated bare steel and aluminum, fiberglass and thoroughly sanded painted surfaces.

TOPCOATS:

Nason[®] Acrylic and Urethane Enamels.
*Nason[®] SelectPrime[™] must be sealed prior to topcoating with Nasco[™]/Astron[®] or Ful-Base[®] Enamel.

SURFACE PREPARATION:

Prior to sanding, remove all wax, grease, oil and road tar with Nason[®] 441-05[™] Silicone and Wax Remover. Where required, use Silicone and Wax Remover permitted by local regulation.

Bare metal areas should be treated with Nason[®] 491-17[™] Etch Primer; or an appropriate "Metal Conditioner".

Featheredge damaged areas with 180 grit paper and scuff edges around area to be filled with 320.

Block sand and prime as necessary. Finish sand with 320 before top coating.

After sanding, wash again with 441-05[™] Silicone and Wax Remover, or permitted cleaner.

For best results and maximum resistance to corrosion and humidity, prime bare metal with Ful-Poxy[®] 491-16[™] Primer or Nason[®] 491-17[™] Etch Primer, before applying Nason[®] SelectPrime[™] 421-23[™].

Can be applied over sanded rigid plastic (excluding Polyethylene and Polypropylene).

SPRAY PRESSURE:

Conventional gun 35-40 PSI at the gun
HVLP: 8-10 PSI air cap pressure.

APPLICATION:

Apply 2 or more wet coats. Allow each coat to flash-off (5-10 minutes) before applying succeeding coats. This will prevent solvent entrapment that could cause pinholes, solvent popping and shrinkage.

DRYING TIME:

Allow 5-10 minutes between coats; 15-20 minutes before sanding; 20-30 minutes before applying finish coat. All drying times are figured at 70°F. Lower temperatures require longer flash times.

SANDING:

Must be sanded prior to sealing or topcoating.

#320-360 Grit for Enamel Topcoats
#360-600 Grit for Lacquer Topcoats

CLEANING OF PAINT EQUIPMENT:

Use Nason® 481-06™ Lacquer Thinner or Nason® SelectThinner™ 481-16™. (Refer to appropriate Air Quality District requirements for proper use of equipment and solvent).

THEORETICAL COVERAGE:

Theoretical Coverage: 312 sq. feet per ready-to-spray gallon at 1 mil.

PERCENT SOLIDS BY WEIGHT:

36.87% ready-to-spray

PERCENT SOLIDS BY VOLUME:

18.07% ready-to-spray

FLASH POINT: CLOSED CUP

See MSDS

IMPORTANT NOTES:

- Nason® SelectPrime™ 421-23™ Primer Surfacer must be sanded thoroughly before application of topcoat.
- *Nason® SelectPrime™ 421-23™ must be sealed with Nason® SelectSeal™ 422-48 for best performance.
- Caution: Never apply heavy coats of primer surfacer in one or two passes of the spray gun. Primer Surfacer applied in this manner will surface dry, staying soft underneath, thus causing solvent trap, hard sanding (gummy), poor holdout, pinholes, cracking, etc.

Never mix surfacer in the gun cup. Always mix Primer Surfacer in a separate can designated for this purpose. Strain the ready to spray mixture into the gun cup. This prevents gun clogging and gritty texture.

VOC DATA:

Components

421-23™, 441-62™

VOC: 4.8 lbs/gal read-to-spray



Washoe County Health District



Public Health
Prevent. Promote. Protect.

STAFF REPORT BOARD MEETING DATE: 1/24/13

DATE: January 14, 2013

TO: District Board of Health

FROM: Eileen Stickney, Administrative Health Services Officer
Washoe County Health District
775.328.2417, estickney@washoecounty.us

SUBJECT: Retro-Actively Accept Notice of Grant award in the amount of \$125,000 for the period of January 15, 2013 to January 14, 2015 in support of the Robert Wood Johnson Foundation (RWJF) Northern Nevada Shared Services Learning Community grant (IO-TBA); Authorize travel and travel reimbursements for non-County employees (John Packham, PhD, Emily Brown, MPH, CPH, and Peggy O'Neill) in the approximate amount of \$16,400, support by the grant award; if approved, authorize the DBOH Chairman to execute the grant document; and if approved, direct Finance to make the appropriate budget adjustments.

SUMMARY

The Washoe County District Board of Health must approve and execute, or direct the District 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 Grant Award from the Robert Wood Johnson Foundation (RWJF) for the period of January 15, 2013 to January 14, 2015 in the total amount of \$125,000 to support the Northern Nevada Shared Services Learning Community project. A copy of the Letter of Agreement for the grant award is attached.

The Washoe Board of County Commissioners must authorize travel and travel reimbursements for non-County employees (John Packham, Ph, Emily Brown, MPH, CPH, and Peggy O'Neill) in the approximate amount of \$16,400.

The Washoe Board of County Commissioners must approve amendments to the adopted fiscal year budget and direct the Finance to make the appropriate budget adjustments.

DBOH Strategic Objective supported by this item:

- Demonstrate the value and contribution of Public Health.
- Achieve targeted improvements in health outcomes and health equity.

PREVIOUS ACTION

On September 21, 2012, the Washoe County District Board of Health approved retroactively the submission of the Northern Nevada Shared Services Learning Community proposal to the Robert Wood Johnson Shared Services Learning Community Call for Proposals.

BACKGROUND

Pursuant to the authority granted the District Health Officer at the May 24, 2012 District Board of Health meeting, the Washoe County Health District (WCHD) submitted a proposal to the RWJF Shared Services Learning Community Call for Proposals. The grant opportunity provided two-year grants of up to \$125,000 to up to 18 teams of public health officials, policy makers, and stakeholders that are exploring, implementing, and/or improving cross-jurisdictional sharing arrangements between two or more public health agencies. The grant application (#38) was entered into the Washoe County SharePoint on August 19, 2012 and was submitted on August 29, 2012 to the Robert Wood Johnson Foundation.

The WCHD's *Northern Nevada Shared Services Learning Community* proposal is designed to encompass the eight-county region of northern Nevada, including Washoe and seven rural/frontier counties (Churchill, Elko, Eureka, Humboldt, Lander, Pershing, and White Pine). Washoe is the only county in the project with a local health department – Washoe County Health District.

There are no formal cross-jurisdictional sharing arrangements in place between the WCHD and any of the seven rural counties, nor are there any cross-jurisdictional sharing arrangements among the rural jurisdictions. Current public health services are provided to the rural counties by the Nevada State Health Division, which is part of this cross-jurisdictional sharing proposal.

The Robert Wood Johnson Foundation Grant Learning Community grant will explore and assess cross-jurisdictional sharing arrangements and the regionalization of public health activities during a period of serious cuts to public health funding and emerging threats to public health in an eight-county region of northern Nevada. By the end of the two-year project period, the team's participation in the Learning Community will

facilitate the exploration, development, and implementation of cross-jurisdictional sharing arrangements among public health agencies and jurisdictions in northern Nevada.

The cross-jurisdictional sharing team will be responsible for engaging county-level and stakeholders, and organizational-person and teleconference discussions, and developing reports of current and alternative public health structures. The Team Lead (Joseph P. Iser, MD, DrPH, MSc) and other team members (John Packham, PhD, Emily Brown, MPH, CPH, and Peggy O'Neill) will travel to individual counties to hold stakeholder meetings and to present findings. At least three of the cross-jurisdictional sharing Team members will also participate in Learning Community Center meetings and quarterly calls with the Learning Community Center staff. The Washoe County Health District and local cross-jurisdictional sharing Team will host up to two site visits over the course of the project.

A portion of the District Health Officer's salary will be funded to oversee the project and ensure that project outcomes are accomplished.

Professional services contracts will support:

- Development of a comprehensive baseline report for the northern Nevada region, containing regional and jurisdiction-specific findings and recommendations which depict each jurisdiction's current services, needed services, public health funding and infrastructure capacity and assessment of community stakeholder perception regarding analysis and outcome, deliverable and timelines.
- Development of a comprehensive assessment of alternatives for the implementation of various CJS models along with participants, including recommendations for preferred alternatives, implementation strategies, and a comprehensive cost structure for services that will lead to the sustainability of public health service for our northern Nevada region.
- A Communications Coordinator to participate in some elements of the Learning Community Center activities, and administrative support.

The professional services contracts have been approved by the Risk Manager and District Attorney assigned to the Washoe County Health District.

Refreshments for individual county stakeholder meetings and host costs for Learning Community Center site visits. Hosting of site visits is a Robert Wood Johnson Foundation grant requirement.

Travel to Learning Community Center meetings and site visit costs were estimated using GSA per diem rates consistent with Washoe County travel policy and the Robert Wood Johnson Foundation's budgeting guidance.

Non- Capital equipment will support the purchase of a projector, laptop, carrying case, one polycom phone, and digital camera to facilitate county meetings.

This agenda item will also require Board of County Commissioners approval for the budget amendment and approval of non-County employee travel and travel reimbursements. It is anticipated that this item will be placed on the 2/12/13 BCC meeting.

FISCAL IMPACT

Should the Board accept this grant award and approve these amendments, the adopted FY13 budget will be **increased by \$114,750** in both revenue and expenditures in the following accounts:

<u>Account Number</u>	<u>G/L</u>	<u>Description</u>	<u>Amount of Increase/(Decrease)</u>
2002-IO-TBA	484195	Nongovernmental grant	\$114,750
		Total Revenues	\$114,750
2002-IO-TBA	-701110	Base Salaries	\$32,576
	-710100	Professional Services	\$44,000
	-710350	Office Supplies	\$1,493
	-710360	Postage	\$500
	-710502	Printing	\$2,730
	-710512	Auto Expense	\$436
	-710872	Food Purchases	\$2,575
	-711210	Travel	\$27,665
	-711504	Equipment Non Capital	\$2,775
		Total Expenditures	\$114,750

The difference between the Notice of Grant award of \$125,000 and the budget amendment is \$10,250 which will be collected in indirect revenue. No budget adjustment is needed for the indirect revenue.


The grant submission was not approved by the Finance Department before submittal to the awarding agency.

RECOMMENDATION

Staff recommends that the District Board of Health retro-actively accept Notice of Grant award in the amount of \$125,000 for the period of January 15, 2013 to January 14, 2015 in support of the Robert Wood Johnson Foundation (RWJF) Northern Nevada Shared Services Learning Community grant (IO-TBA); authorize travel and travel reimbursements for non-County employees (John Packham, PhD, Emily Brown, MPH, CPH, and Peggy O'Neill) in the approximate amount of \$16,400, support by the grant award; if approved, authorize the DBOH Chairman to execute the grant documents; and if approved, direct Finance to make the appropriate budget adjustments.

POSSIBLE MOTION

Should the Board agree with staff's recommendation, a possible motion would be: "Move to approve to retro-actively accept Notice of Grant award in the amount of \$125,000 for the period of January 15, 2013 to January 14, 2015 in support of the Robert Wood Johnson Foundation (RWJF) Northern Nevada Shared Services Learning Community grant (IO-TBA); authorize travel and travel reimbursements for non-County employees (John Packham, PhD, Emily Brown, MPH, CPH, and Peggy O'Neill) in the approximate amount of \$16,400, support by the grant award; authorize the DBOH Chairman to execute the grant document; and direct Finance to make the appropriate budget adjustments."


Eileen Stickney
Administrative Health Services Officer

Attachment

AGENDA ITEM # _____



Robert Wood Johnson Foundation

Revised 1/7/13

LETTER OF AGREEMENT

Following are the terms and conditions applying to grants made by the Robert Wood Johnson Foundation (referred to as "the Foundation," "we" or "us"). As a grantee (referred to as "grantee" or "you"), you should read this carefully; your signature on this form constitutes your acceptance of all the terms and conditions. As used in this form, the term "grant" includes any income you derive from the grant.

Awardee: Washoe County Health District
I.D.: 70617
Amount: \$125,000
Purpose: Exploring shared-services options in the Northern Nevada region
Project Information: Grant Period: January 15, 2013 through January 14, 2015
Project Director: Joseph P. Iser, MD, DrPH, MSc, 775-328-2416
(jiser@washoecounty.us)
Project Director: John F. Packham, PhD, 775-784-1235
(jpackham@medicine.nevada.edu)

1. PURPOSE AND ADMINISTRATION. You will directly administer the project or program being supported by the grant and agree that no grant funds shall be used in any way other than as specifically set forth in this Letter of Agreement and the final proposal, budget and related documents, all as approved by the Foundation (the "Approved Grant Documents") without the Foundation's prior written consent. You further agree that no grant funds shall be disbursed to any organization or entity, whether or not formed by you, except as specifically set forth in the Approved Grant Documents.

The project is funded under RWJF's program, Center for Sharing Public Health Services: Shared Services Learning Community, which is designed to explore, implement and/or improve cross-jurisdictional sharing (CJS) arrangements between two or more public health agencies to improve the quality and impact of public health. This project seeks to determine if one urban county and seven rural counties and the State Health Division can collaboratively determine if CJS arrangements can be structured for the benefit of all the participants. The project seeks to improve the effectiveness and efficiency of public health service delivery in northern Nevada through improved problem identification, priority setting, and coordination. Deliverables include: 1) A baseline report for the region, containing overall and jurisdiction-specific findings and recommendations along with descriptions of each jurisdiction's current services, needed services, public health funding and infrastructure capacity, and assessment of community stakeholder perceptions regarding public health CJS; and 2) A report of alternatives for implementing CJS among the participants including recommendations for preferred alternatives, implementation strategies and a comprehensive cost structure for services that would lend to the sustainability of public health services. In addition, the project grantee will designate a team lead to serve as the primary point of contact for the project and provide continuity by participating in all Learning Community activities; designate a

communications coordinator to serve as the primary point of contact for the Center's communications staff; ensure that at least three team members participate in three in-person Learning Community meetings, ensure at least one team member attends another project's site visit, participate in quarterly calls with the Learning Community, participate in quarterly calls with Center staff and host up to two site visits over the course of the project.

No changes may be made to the nature or scope of the program or project being supported by this grant without the express written consent of the Foundation.

2. USE OF GRANT FUNDS.

A. No part of the grant shall be used to carry on propaganda or otherwise attempt to influence legislation within the meaning of Section 4945(d)(1) of the Internal Revenue Code.

B. No part of the grant shall be used to attempt to influence the outcome of any specific public election or to carry on, directly or indirectly, any voter registration drive within the meaning of Section 4945(d)(2) of the Internal Revenue Code.

C. No part of the grant shall be used to provide a grant to an individual for travel, study or similar purpose within the meaning of Section 4945(d)(3) of the Internal Revenue Code, without prior written approval of the Foundation. Payments of salaries, other compensation or expense reimbursement to your employees within the scope of their employment do not constitute grants for these purposes and are not subject to these restrictions.

D. No part of the grant shall be used for purposes other than religious, charitable, scientific, literary or educational purposes or the prevention of cruelty to children or animals within the meaning of Section 170(c)(2)(B) of the Internal Revenue Code. If any portion of the grant is used for purposes other than those described in Section 170(c)(2)(B) of the Internal Revenue Code, you shall repay to the Foundation that portion of the grant and any additional amount in excess of such portion necessary to effect a correction under Section 4945 of the Internal Revenue Code.

E. You promptly shall repay any portion of the grant which for any reason is not used exclusively for the purposes of the grant. You shall repay to the Foundation any portion of the grant which is not used exclusively for the purposes described in Section 1 hereof by the expiration of the grant period or within any approved extension within thirty (30) days. If we terminate the grant pursuant to Section 11 hereof, you shall repay within thirty (30) days all grant funds unexpended as of the effective date of termination and all grant funds expended for purposes or items allocable to the period of time after the effective date of termination.

F. If you are directly or indirectly controlled by the Foundation or by one or more "disqualified persons" (within the meaning of Section 4946 of the Internal Revenue Code) with respect to the Foundation, you agree (i) to expend all of the grant prior to the close of your first annual accounting period following the taxable year in which you receive a grant payment, as qualifying distributions within the meaning of Section 4942(g)(3) and (h); and (ii) to submit to the Foundation promptly after the close of your annual accounting period a full and complete written report signed by an appropriate officer, director or trustee showing that the qualifying distribution has been made, the name and address of the recipient or recipients, the amounts received by each and that all the distributions are treated as distributions out of corpus under Section 4942(g)(3) and (h).

G. Grantee agrees that any polls or surveys funded as part of this grant, if any, shall comply fully with the RWJF Guidelines for Funding and Releasing Polls and Surveys (which are available at www.rwjf.org/files/guidelinesforpollsandsurveys.pdf).

3. **BUDGET.** The grant budget and any revisions thereto shall comply with our Budget Preparation Guidelines (previously provided with your proposal application and instructions), Budget Revision Guidelines (which are available at www.rwjf.org/grantees/instructionlist.jsp) and any additional instructions contained in the award letter sent by the Foundation to you (collectively the "Budget Guidelines"). Such Budget Guidelines, as they may be modified by us from time to time, are part of the terms and conditions of your grant. Expenditures of grant funds must adhere to the specific line items in your approved grant budget.

4. **ACCOUNTING AND AUDIT.** You shall indicate the grant separately on your books of account. You shall maintain a systematic accounting record of the receipt and disbursement of funds and expenditures incurred under the terms of the grant and shall retain the substantiating documents such as bills, invoices, cancelled checks and receipts in your files for at least four (4) years after expiration of the grant period. You agree promptly to furnish the Foundation with copies of such documents upon the Foundation's request and to make your books and records available for inspection by us at reasonable times.

At our expense, we may audit or have audited your grant-related books and records, and you shall provide all necessary assistance in connection therewith.

5. **REPORTS.** You shall furnish financial reports to us for each budget period of the grant and upon expiration, repayment (pursuant to Section 2E) or termination of the grant (pursuant to Section 11). The financial report shall show actual expenditures reported as of the date of the report against the approved line item budget. You shall furnish annual narrative reports and the final narrative report to us which shall include a report on the progress you made toward achieving the grant purposes and any problems or obstacles encountered in the effort to achieve the grant purposes. All such reports shall be furnished to us within thirty (30) days after the close of the period for which such reports are made. You shall retain all such reports in your files for at least four (4) years after expiration of the grant period.

At our expense, we may monitor and conduct an evaluation of operations under the grant, which may include visits by our representatives to observe your program procedures and operations and to discuss the program with your personnel.

6. **COPYRIGHT; FOUNDATION USE OF DATA; PUBLIC USE DATA SETS.** All copyright interests in materials produced as a result of this grant are owned by the grantee. You grant to the Foundation a nonexclusive, irrevocable, perpetual, royalty-free license to reproduce, publish, republish, summarize, excerpt or otherwise use and license others to use, in print or electronic form, including in electronic databases or in any future form not yet discovered or implemented, any and all such materials produced in connection with this grant.

You represent and warrant that the material produced by you under this grant will be original and not infringe upon any copyright or any other right of any other person, and has not previously been published.

If one of the deliverables described in Section 1 is a public use data set for inclusion in the Foundation's Health and Medical Care Archive, you shall, at no additional cost to us, cause public use data files to be constructed (with appropriate adjustments to assure individual privacy) in accordance with the specifications of the Inter-University Consortium for Political and Social Research, University of Michigan, including the full documentation outlined in the Consortium's current data preparation manual. Unless we otherwise specify, such public use data files shall include all data files used to conduct the analysis under the grant. You shall transmit one computer-readable copy of such public use data files and documentation to the Consortium within 12 months of the expiration of the grant period. A portion of your final payment up to 10 percent of the grant award amount may be withheld until this deliverable has been received.

7. PUBLIC REPORTING. The Foundation will report this grant, if made, in its next annual report. The Foundation will discuss potential communications activities with you related to this grant, including the issuing of press releases. Please do not issue press releases or any public announcements without consulting with the Foundation prior to these activities. In addition, we may publish reports on the project or program, briefly describing its accomplishments and results, which we may also use to respond to inquiries.

You shall send to the Foundation copies of all papers, manuscripts and other materials which you produce that are related to this grant.

In all public statements concerning the Foundation, you should refer to the Foundation by its full name: Robert Wood Johnson Foundation.

8. GRANTEE TAX STATUS. You represent that you are currently either (i) a tax-exempt organization described in Section 501(c)(3) of the Internal Revenue Code and either (a) are not a private foundation and are not a Type III supporting organization described in Section 509(a)(3)(B)(iii); or (b) are an exempt operating foundation described in Section 4940(d)(2); or (ii) an organization described in Section 170(c)(1) or Section 511(a)(2)(B). You shall immediately give written notice to us if you cease to be exempt from federal income taxation as an organization described in Section 501(c)(3), or your status as not a private foundation under Section 509(a) and not a Type III supporting organization under Section 509(a)(3)(B)(iii), as an exempt operating foundation described in Section 4940(d)(2) or as a Section 170(c)(1) or Section 511(a)(2)(B) organization is materially changed.

9. CERTIFICATION REQUIRED WHEN GRANT MAY BE USED FOR RESEARCH INVOLVING HUMAN SUBJECTS. If the grant is to be used in whole or in part for research involving human subjects, you hereby certify that you will conduct the research in compliance with the ethical standards and the criteria for approval and conduct of research set forth in United States Department of Health and Human Services policy for the protection of human research subjects (45 C.F.R. Part 46 and related guidance, as amended from time to time) and all other federal and state laws applicable to the research project. Such requirements may include, but are not limited to, obtaining and maintaining institutional review board (IRB) approval and obtaining informed consent of participating research subjects.

10. PRIVACY AND SECURITY OF HEALTH INFORMATION. You represent and warrant that any individually identifiable health information used or disclosed in connection with the grant will be used and disclosed in compliance with applicable federal and state statutes and regulations regarding the privacy and security of such information including, but not limited to, the Health

Insurance Portability and Accountability Act of 1996, 42 U.S.C. Section 201 et seq., as amended, and its applicable implementing regulations, 45 C.F.R. Part 164 (HIPAA). Any health information reported to the Foundation will be de-identified within the meaning of the HIPAA privacy rule or will be consistent with the research subject's signed HIPAA authorization or will be otherwise permissible under law.

11. GRANT TERMINATION. It is expressly agreed that any use by you of the grant proceeds for any purposes other than those specified in Section 170(c)(2)(B) of the Internal Revenue Code will terminate our obligation to make further payments under the grant.

At our sole option, we may terminate the grant at any time if (i) you cease to be exempt from federal income taxation as an organization described in Section 501(c)(3) of the Internal Revenue Code; (ii) your status as not a private foundation under Section 509(a), as not a Type III supporting organization under Section 509(a)(3)(B)(iii), or as an exempt operating foundation under Section 4940(d)(2), or as a Section 170(c)(1) or Section 511(a)(2)(B) organization is materially altered; or (iii) in our sole judgment, you become unable to carry out the purposes of the grant, cease to be an appropriate means of accomplishing the purposes of the grant or fail to comply with any of the conditions hereof.

If the grant is terminated prior to the scheduled completion date, upon our request, you shall provide us a full accounting of the receipt and disbursement of funds and expenditures incurred under the grant as of the effective date of termination.

12. LIMITATION; CHANGES; SEVERABILITY. You acknowledge and agree that we have no obligation to provide other or additional support to you for purposes of this project or any other purposes. Any changes, additions or deletions to (i) the terms and conditions of the grant; or (ii) the Approved Grant Documents must be made in writing only and must be jointly approved by the Foundation and you. The invalidity in whole or in part of any term or condition of this grant shall not affect the validity of the other terms and conditions.

13. CHANGED CIRCUMSTANCES; REGULATORY ACTION. You shall promptly notify us in writing if there is any change in circumstances that might affect your ability to carry out the grant; you undergo a merger, division or other corporate reorganization; you become subject to a proceeding under the Bankruptcy Code or other law relating to insolvency or make an assignment for the benefit of creditors; you become subject to an investigation or proceeding brought by the Attorney General or any other regulatory agency; or you receive notice of any litigation or other legal action relating to the grant or are served with a subpoena or other legal process seeking to compel production of or obtain access to any data related to the grant.

14. NONTRANSFERABILITY; NO JOINT VENTURE. This grant is not transferable. Nothing contained herein shall be construed in any manner to imply or create a relationship between the Foundation and you as partners, joint venturers or agent. You shall not act in any manner as our agent or representative.

15. AUTHORITY; COMPLIANCE WITH APPLICABLE LAW. You represent and warrant that you have full power and authority to enter into this agreement, and that all activities conducted hereunder shall be in full compliance with the requirements of all applicable federal, state and local laws, regulations and ordinances.

All the terms and conditions above are hereby accepted and agreed to as of the date indicated.

Date: 1-9-13

Washoe County Health District

By: 

Matt Smith, II

Title: Chairman



Washoe County Health District



Public Health
Prevent. Promote. Protect.

STAFF REPORT BOARD MEETING DATE: 1/24/13

DATE: January 8, 2013

TO: District Board of Health

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

THROUGH: Eileen Stickney, Administrative Health Services Officer, Washoe County Health District, 775-328-2417, estickney@washoecounty.us *ES*

SUBJECT: Approval of amendments totaling an increase of \$62,216 in both revenue and expense to the FY 13 Centers for Disease Control and Prevention (CDC) Epidemiology and Laboratory Capacity (ELC) Affordable Care Act Federal Grant Program, IO 10984; and if approved authorize the Chairman to execute.

SUMMARY

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

The Washoe County Health District received a Notice of Subgrant Award from the Nevada State Health Division for the period August 1, 2012 through July 31, 2013 in the total amount of \$136,833 in support of the Epidemiology and Laboratory Capacity Grant Program. A copy 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: Achieving long term financial sustainability.

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

There has been no previous action taken by the District Board of Health.

AGENDA ITEM # _____

BACKGROUND

The Nevada State Health Division has awarded the Epidemiology Program \$136,833 for the period August 1, 2012 through July 31, 2013. Funds will be used to support personnel, travel, operating expenditures.

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

FISCAL IMPACT

The award amount is \$136,833 (of which \$14,135 is indirect federal revenue). The FY13 ELC ACA Budget was projected at \$67,840. A budget amendment in the total amount of \$62,216 is necessary to align the budget with the Notice of Subgrant Award. This amendment takes into account actual expenditures in the amount of \$7,358 for July (previous award) and 12 months of the new award.

Should the Board approve these budget amendments, the adopted FY 13 budget will be **increased by \$62,216** in the following accounts:

<u>Account Number</u>	<u>Description</u>	<u>Amount of Increase/(Decrease)</u>
2002-IO-10984-431100	Federal Revenue	\$62,216
	Total Revenue	\$62,216
2002-IO-10984-701110	Base Salaries	34,438
-705210	Retirement	8,178
-705230	Medicare	500
-710355	Books and Subscriptions	600
-711210	Travel	18,500
	Total Expenditures	\$62,216

The Notice of Grant Award includes \$14,135 indirect federal revenue. No budget adjustment is needed for the indirect revenue.

RECOMMENDATION

Staff recommends that the Washoe County District Board of Health approve amendments totaling an increase of \$62,216 in both revenue and expense to the FY 13 Centers for Disease Control and Prevention (CDC) Epidemiology and Laboratory Capacity (ELC) Affordable Care Act Federal Grant Program, IO 10984; and if approved authorize the Chairman to execute.

POSSIBLE MOTION


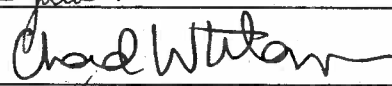
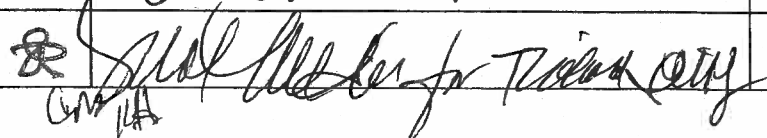
Move to approve amendments totaling an increase of \$62,216 in both revenue and expense to the FY 13 Centers for Disease Control and Prevention (CDC) Epidemiology and Laboratory Capacity (ELC) Affordable Care Act Federal Grant Program, IO 10984; and if approved authorize the Chairman to execute.

HEALTH DIVISION

(hereinafter referred to as the DIVISION)

Budget Account #: 3219
 Category #: 16
 GL #: 8516

NOTICE OF SUBGRANT AWARD

Program Name: Office of Public Health Informatics and Epidemiology Bureau of Health Statistics, Planning, Epidemiology, and Response Nevada State Health Division		Subgrantee Name: Washoe County Health District (WCHD) IO-10984	
Address: 4126 Technology Way, Suite #200 Carson City, NV 89706-2009		Address: 1001 East Ninth Street Reno, NV 89502	
Subgrant Period: August 1, 2012 through July 31, 2013		Subgrantee's EIN#: 88-6000138 Vendor#: T41107900 Dun & Bradstreet#: 73-786-998	
Reason for Award: This award is funded through the <i>Epidemiology and Laboratory Capacity (ELC) Program - Building and Strengthening Epidemiology, Laboratory and Health Information System</i> grant from the CDC. The WCHD will use these funds to complete health information system development and exchange activities.			
County(ies) to be served: () Statewide (X) Specific county or counties: Washoe County, Nevada			
Approved Budget Categories:			
1. Personnel	\$ 103,598	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.	
2. Travel/Training	\$ 18,500		
3. Supplies	\$ 600		
4. Equipment	\$ 0		
5. Contractual/Consultant	\$ 0		
6. Other	\$ 0		
7. Indirect (11.52% of total)	\$ 14,135		
Total Cost	\$ 136,833		
Disbursement of funds will be as follows: Payment will be made upon receipt and acceptance of an invoice and supporting documentation specifically requesting reimbursement for actual expenditures <i>specific to this subgrant</i> . Total reimbursement will not exceed \$ 136,833 during the subgrant period.			
Source of Funds:	% of Funds:	CFDA#:	Federal Grant #:
Centers for Disease Control and Prevention	100%	93.521	3U50CI000900-02S2
Terms and Conditions In accepting these grant funds, it is understood that: 1. Expenditures must comply with appropriate state and/or federal regulations. 2. This award is subject to the availability of appropriate funds. 3. Recipient of these funds agrees to stipulations listed in Sections A, B, and C of this subgrant award.			
		Signature	Date
Washoe County Health District			
Julia Peek, MHA Program Manager			12/7/12
Chad Westom Chief, BHSPER			12/18/12
Richard Whitley, MS Administrator, Health Division			1/2/13

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

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

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

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

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

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

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

Description of services, scope of work, deliverables and reimbursement

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

- The Senior Epidemiologist will assist with communicable disease reporting, tracking, follow up, and analysis. Support to include sample size determination, data collection instrument development, analytical statistical analyses, report review, epidemiological software training, development, and implementation, outbreak response timeliness evaluation for Nevada State Health Division.
- The WCHD will submit written progress reports to the Health Division electronically as required for the grant progress and annual reports. This report must have updates on current project progress as well as the future funding year project proposal and budget.
- 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 3U50CI000900-02S2 from 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 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 3U50CI000900-02S2 from the Centers for Disease Control and Prevention.

(continued on next page)

Subgrantee agrees to adhere to the following budget:

1. Personnel	\$ 103,598	To cover the salary and fringe for Lei Chen, Senior Epidemiologist \$80,383/year + \$23,215 (fringe) = \$103,598
2. Travel/Training	\$ 18,500	Local travel and to allow WCHD staff to attend the following out-of state trainings/travel: CSTE Conference, West Coast Epi Conference, Epi Into Action Course, Public Health Surveillance Course, and other related conferences/trainings.
3. Supplies	\$ 600	To include purchase of reference books and materials
4. Equipment	\$ 0	
5. Contractual Consultant	\$ 0	
6. Indirect	\$ 14,135	Calculated at 11.52% of total
7. Other	\$ 0	
Total Cost	\$ 136,833	

- 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.

- 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.
- Additional expenditure detail will be provided upon request from the Division.

Additionally, the Subgrantee agrees to provide:

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

The Nevada State Health Division agrees:

- 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 \$136,833, 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.
- The Health Division reserves the right to hold reimbursement under this subgrant until any delinquent forms, reports, and expenditure documentation are submitted to and accepted by the Health Division.

Both parties agree:

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

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

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

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

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

An explanation of the form is provided below.

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

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

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

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

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

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

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

NOTICE OF SUBGRANT AWARD
SECTION D

NEVADA STATE HEALTH DIVISION
AUDIT INFORMATION REQUEST

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

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

3. When does your fiscal year end? _____

4. How often is your organization audited? _____

5. When was your last audit performed? _____

6. What time period did it cover? _____

7. Which accounting firm conducted the audit? _____

SIGNATURE

TITLE

DATE

SECTION E

BUSINESS ASSOCIATE ADDENDUM

BETWEEN

Nevada State Health Division
Hereinafter referred to as the "Covered Entity"

and
(Enter Business Name)

Hereinafter referred to as the "Business Associate".

PURPOSE. In order to comply with the requirements of HIPAA and the HITECH Act, this Addendum is hereby added and made part of the Contract between the Covered Entity and the Business Associate. This Addendum establishes the obligations of the Business Associate and the Covered Entity as well as the permitted uses and disclosures by the Business Associate of protected health information it may possess by reason of the Contract. The Covered Entity and the Business Associate shall protect the privacy and provide for the security of protected health information disclosed to the Business Associate pursuant to the Contract and in compliance with the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 ("HIPAA"), the Health Information Technology for Economic and Clinical Health Act, Public Law 111-5 ("the HITECH Act"), and regulation promulgated there under by the U.S. Department of Health and Human Services (the "HIPAA Regulations") and other applicable laws.

WHEREAS, the Business Associate will provide certain services to the Covered Entity, and, pursuant to such arrangement, the Business Associate is considered a business associate of the Covered Entity as defined in HIPAA, the HITECH Act, the Privacy Rule and Security Rule; and

WHEREAS, Business Associate may have access to and/or receive from the Covered Entity certain protected health information, in fulfilling its responsibilities under such arrangement; and

WHEREAS, the HIPAA Regulations, the HITECH Act, the Privacy Rule and the Security Rule require the Covered Entity to enter into a contract containing specific requirements of the Business Associate prior to the disclosure of protected health information, as set forth in, but not limited to, 45 CFR Parts 160 & 164 and Public Law 111-5.

THEREFORE, in consideration of the mutual obligations below and the exchange of information pursuant to this Addendum, and to protect the interests of both Parties, the Parties agree to all provisions of this Addendum.

I. **DEFINITIONS.** The following terms shall have the meaning ascribed to them in this Section. Other capitalized terms shall have the meaning ascribed to them in the context in which they first appear.

1. **Breach** means the unauthorized acquisition, access, use, or disclosure of protected health information which compromises the security or privacy of the protected health information. The full definition of breach can be found in 42 USC 17921 and 45 CFR 164.402.
2. **Business Associate** shall mean the name of the organization or entity listed above and shall have the meaning given to the term under the Privacy and Security Rule and the HITECH Act. For full definition refer to 45 CFR 160.103.
3. **CFR** stands for the Code of Federal Regulations.
4. **Contract** shall refer to this Addendum and that particular Contract to which this Addendum is made a part.
5. **Covered Entity** shall mean the name of the Division listed above and shall have the meaning given to such term under the Privacy Rule and the Security Rule, including, but not limited to 45 CFR 160.103.
6. **Designated Record Set** means a group of records that includes protected health information and is maintained by or for a covered entity or the Business Associate that includes, but is not limited to, medical, billing, enrollment, payment, claims adjudication, and case or medical management records. Refer to 45 CFR 164.501 for the complete definition.

7. **Disclosure** means the release, transfer, provision of, access to, or divulging in any other manner of information outside the entity holding the information as defined in 45 CFR 160.103.
8. **Electronic Protected Health Information** means individually identifiable health information transmitted by electronic media or maintained in electronic media as set forth under 45 CFR 160.103.
9. **Electronic Health Record** means an electronic record of health-related information on an individual that is created, gathered, managed, and consulted by authorized health care clinicians and staff. Refer to 42 USC 17921.
10. **Health Care Operations** shall have the meaning given to the term under the Privacy Rule at 45 CFR 164.501.
11. **Individual** means the person who is the subject of protected health information and is defined in 45 CFR 160.103.
12. **Individually Identifiable Health Information** means health information, in any form or medium, including demographic information collected from an individual, that is created or received by a covered entity or a business associate of the covered entity and relates to the past, present, or future care of the individual. Individually identifiable health information is information that identifies the individual directly or there is a reasonable basis to believe the information can be used to identify the individual. Refer to 45 CFR 160.103.
13. **Parties** shall mean the Business Associate and the Covered Entity.
14. **Privacy Rule** shall mean the HIPAA Regulation that is codified at 45 CFR Parts 160 and 164, Subparts A, D and E.
15. **Protected Health Information** means individually identifiable health information transmitted by electronic media, maintained in electronic media, or transmitted or maintained in any other form or medium. Refer to 45 CFR 160.103 for the complete definition.
16. **Required by Law** means a mandate contained in law that compels an entity to make a use or disclosure of protected health information and that is enforceable in a court of law. This includes, but is not limited to: court orders and court-ordered warrants; subpoenas, or summons issued by a court; and statutes or regulations that require the provision of information if payment is sought under a government program providing public benefits. For the complete definition refer to 45 CFR 164.103.
17. **Secretary** shall mean the Secretary of the federal Department of Health and Human Services (HHS) or the Secretary's designee.
18. **Security Rule** shall mean the HIPAA regulation that is codified at 45 CFR Parts 160 and 164 Subparts A and C.
19. **Unsecured Protected Health Information** means protected health information that is not rendered unusable, unreadable, or indecipherable to unauthorized individuals through the use of a technology or methodology specified by the Secretary in the guidance issued in Public Law 111-5. Refer to 42 USC 17932 and 45 CFR 164.402.
20. **USC** stands for the United States Code.

II. OBLIGATIONS OF THE BUSINESS ASSOCIATE.

1. **Access to Protected Health Information.** The Business Associate will provide, as directed by the Covered Entity, an individual or the Covered Entity access to inspect or obtain a copy of protected health information about the Individual that is maintained in a designated record set by the Business Associate or, its agents or subcontractors, in order to meet the requirements of the Privacy Rule, including, but not limited to 45 CFR 164.524 and 164.504(e) (2) (ii) (E). If the Business Associate maintains an electronic health record, the Business Associate or, its agents or subcontractors shall provide such information in electronic format to enable the Covered Entity to fulfill its obligations under the HITECH Act, including, but not limited to 42 USC 17935.
2. **Access to Records.** The Business Associate shall make its internal practices, books and records relating to the use and disclosure of protected health information available to the Covered Entity and to the Secretary for purposes of determining Business Associate's compliance with the Privacy and Security Rule in accordance with 45 CFR 164.504(e)(2)(ii)(H).
3. **Accounting of Disclosures.** Promptly, upon request by the Covered Entity or individual for an accounting of disclosures, the Business Associate and its agents or subcontractors shall make available to the Covered Entity or the individual information required to provide an accounting of disclosures in accordance with 45 CFR 164.528, and the HITECH Act, including, but not limited to 42 USC 17935. The accounting of disclosures, whether electronic or other media, must include the requirements as outlined under 45 CFR 164.528(b).
4. **Agents and Subcontractors.** The Business Associate must ensure all agents and subcontractors to whom it provides protected health information agree in writing to the same restrictions and conditions that apply to the Business Associate with respect to all protected health information accessed, maintained, created, retained, modified, recorded, stored, destroyed, or otherwise held, transmitted, used or disclosed by the agent or subcontractor. The Business Associate must implement and maintain sanctions against agents and

- subcontractors that violate such restrictions and conditions and shall mitigate the effects of any such violation as outlined under 45 CFR 164.530(f) and 164.530(e)(1).
5. **Amendment of Protected Health Information.** The Business Associate will make available protected health information for amendment and incorporate any amendments in the designated record set maintained by the Business Associate or, its agents or subcontractors, as directed by the Covered Entity or an individual, in order to meet the requirements of the Privacy Rule, including, but not limited to, 45 CFR 164.526.
 6. **Audits, Investigations, and Enforcement.** The Business Associate must notify the Covered Entity immediately upon learning the Business Associate has become the subject of an audit, compliance review, or complaint investigation by the Office of Civil Rights or any other federal or state oversight agency. The Business Associate shall provide the Covered Entity with a copy of any protected health information that the Business Associate provides to the Secretary or other federal or state oversight agency concurrently with providing such information to the Secretary or other federal or state oversight agency. The Business Associate and individuals associated with the Business Associate are solely responsible for all civil and criminal penalties assessed as a result of an audit, breach, or violation of HIPAA or HITECH laws or regulations. Reference 42 USC 17937.
 7. **Breach or Other Improper Access, Use or Disclosure Reporting.** The Business Associate must report to the Covered Entity, in writing, any access, use or disclosure of protected health information not permitted by the Contract, Addendum or the Privacy and Security Rules. The Covered Entity must be notified immediately upon discovery or the first day such breach or suspected breach is known to the Business Associate or by exercising reasonable diligence would have been known by the Business Associate in accordance with 45 CFR 164.410, 164.504(e)(2)(ii)(C) and 164.308(b) and 42 USC 17921. The Business Associate must report any improper access, use or disclosure of protected health information by: the Business Associate or its agents or subcontractors. In the event of a breach or suspected breach of protected health information, the report to the Covered Entity must be in writing and include the following: a brief description of the incident; the date of the incident; the date the incident was discovered by the Business Associate; a thorough description of the unsecured protected health information that was involved in the incident; the number of individuals whose protected health information was involved in the incident; and the steps the Business Associate is taking to investigate the incident and to protect against further incidents. The Covered Entity will determine if a breach of unsecured protected health information has occurred and will notify the Business Associate of the determination. If a breach of unsecured protected health information is determined, the Business Associate must take prompt corrective action to cure any such deficiencies and mitigate any significant harm that may have occurred to individual(s) whose information was disclosed inappropriately.
 8. **Breach Notification Requirements.** If the Covered Entity determines a breach of unsecured protected health information by the Business Associate has occurred, the Business Associate will be responsible for notifying the individuals whose unsecured protected health information was breached in accordance with 42 USC 17932 and 45 CFR 164.404 through 164.406. The Business Associate must provide evidence to the Covered Entity that appropriate notifications to individuals and/or media, when necessary, as specified in 45 CFR 164.404 and 45 CFR 164.406 has occurred. The Business Associate is responsible for all costs associated with notification to individuals, the media or others as well as costs associated with mitigating future breaches. The Business Associate must notify the Secretary of all breaches in accordance with 45 CFR 164.408 and must provide the Covered Entity with a copy of all notifications made to the Secretary.
 9. **Breach Pattern or Practice by Covered Entity.** Pursuant to 42 USC 17934, if the Business Associate knows of a pattern of activity or practice of the Covered Entity that constitutes a material breach or violation of the Covered Entity's obligations under the Contract or Addendum, the Business Associate must immediately report the problem to the Secretary.
 10. **Data Ownership.** The Business Associate acknowledges that the Business Associate or its agents or subcontractors have no ownership rights with respect to the protected health information it accesses, maintains, creates, retains, modifies, records, stores, destroys, or otherwise holds, transmits, uses or discloses.
 11. **Litigation or Administrative Proceedings.** The Business Associate shall make itself, any subcontractors, employees, or agents assisting the Business Associate in the performance of its obligations under the Contract or Addendum, available to the Covered Entity, at no cost to the Covered Entity, to testify as witnesses, or otherwise, in the event litigation or administrative proceedings are commenced against the Covered Entity, its administrators or workforce members upon a claimed violation of HIPAA, the Privacy and Security Rule, the HITECH Act, or other laws relating to security and privacy.
 12. **Minimum Necessary.** The Business Associate and its agents and subcontractors shall request, use and disclose only the minimum amount of protected health information necessary to accomplish the purpose of the request, use or disclosure in accordance with 42 USC 17935 and 45 CFR 164.514(d)(3).
 13. **Policies and Procedures.** The Business Associate must adopt written privacy and security policies and procedures and documentation standards to meet the requirements of HIPAA and the HITECH Act as described in 45 CFR 164.316 and 42 USC 17931.
 14. **Privacy and Security Officer(s).** The Business Associate must appoint Privacy and Security Officer(s) whose responsibilities shall include: monitoring the Privacy and Security compliance of the Business

Associate; development and implementation of the Business Associate's HIPAA Privacy and Security policies and procedures; establishment of Privacy and Security training programs; and development and implementation of an incident risk assessment and response plan in the event the Business Associate sustains a breach or suspected breach of protected health information.

15. **Safeguards.** The Business Associate must implement safeguards as necessary to protect the confidentiality, integrity, and availability of the protected health information the Business Associate accesses, maintains, creates, retains, modifies, records, stores, destroys, or otherwise holds, transmits, uses or discloses on behalf of the Covered Entity. Safeguards must include administrative safeguards (e.g., risk analysis and designation of security official), physical safeguards (e.g., facility access controls and workstation security), and technical safeguards (e.g., access controls and audit controls) to the confidentiality, integrity and availability of the protected health information, in accordance with 45 CFR 164.308, 164.310, 164.312, 164.316 and 164.504(e)(2)(ii)(B). Sections 164.308, 164.310 and 164.312 of the CFR apply to the Business Associate of the Covered Entity in the same manner that such sections apply to the Covered Entity. Technical safeguards must meet the standards set forth by the guidelines of the National Institute of Standards and Technology (NIST). The Business Associate agrees to only use, or disclose protected health information as provided for by the Contract and Addendum and to mitigate, to the extent practicable, any harmful effect that is known to the Business Associate, of a use or disclosure, in violation of the requirements of this Addendum as outlined under 45 CFR 164.530(e)(2)(f).
16. **Training.** The Business Associate must train all members of its workforce on the policies and procedures associated with safeguarding protected health information. This includes, at a minimum, training that covers the technical, physical and administrative safeguards needed to prevent inappropriate uses or disclosures of protected health information; training to prevent any intentional or unintentional use or disclosure that is a violation of HIPAA regulations at 45 CFR 160 and 164 and Public Law 111-5; and training that emphasizes the criminal and civil penalties related to HIPAA breaches or inappropriate uses or disclosures of protected health information. Workforce training of new employees must be completed within 30 days of the date of hire and all employees must be trained at least annually. The Business Associate must maintain written records for a period of six years. These records must document each employee that received training and the date the training was provided or received.
17. **Use and Disclosure of Protected Health Information.** The Business Associate must not use or further disclose protected health information other than as permitted or required by the Contract or as required by law. The Business Associate must not use or further disclose protected health information in a manner that would violate the requirements of the HIPAA Privacy and Security Rule and the HITECH Act.

III. **PERMITTED AND PROHIBITED USES AND DISCLOSURES BY THE BUSINESS ASSOCIATE.** The Business Associate agrees to these general use and disclosure provisions:

1. **Permitted Uses and Disclosures:**

- a. Except as otherwise limited in this Addendum, the Business Associate may use or disclose protected health information to perform functions, activities, or services for, or on behalf of, the Covered Entity as specified in the Contract, provided that such use or disclosure would not violate the HIPAA Privacy and Security Rule or the HITECH Act, if done by the Covered Entity in accordance with 45 CFR 164.504(e) (2) (i) and 42 USC 17935 and 17936.
- b. Except as otherwise limited by this Addendum, the Business Associate may use or disclose protected health information received by the Business Associate in its capacity as a Business Associate of the Covered Entity, as necessary, for the proper management and administration of the Business Associate, to carry out the legal responsibilities of the Business Associate, as required by law or for data aggregation purposes in accordance with 45 CFR 164.504(e)(2)(A), 164.504(e)(4)(i)(A), and 164.504(e)(2)(i)(B).
- c. Except as otherwise limited in this Addendum, if the Business Associate discloses protected health information to a third party, the Business Associate must obtain, prior to making any such disclosure, reasonable written assurances from the third party that such protected health information will be held confidential pursuant to this Addendum and only disclosed as required by law or for the purposes for which it was disclosed to the third party. The written agreement from the third party must include requirements to immediately notify the Business Associate of any breaches of confidentiality of protected health information to the extent it has obtained knowledge of such breach. Refer to 45 CFR 164.502 and 164.504 and 42 USC 17934.
- d. The Business Associate may use or disclose protected health information to report violations of law to appropriate federal and state authorities, consistent with 45 CFR 164.502(j)(1).

2. **Prohibited Uses and Disclosures:**

- a. Except as otherwise limited in this Addendum, the Business Associate shall not disclose protected health information to a health plan for payment or health care operations purposes if the patient has required this special restriction, and has paid out of pocket in full for the health care item or service to which the protected health information relates in accordance with 42 USC 17935.

- b. The Business Associate shall not directly or indirectly receive remuneration in exchange for any protected health information, as specified by 42 USC 17935, unless the Covered Entity obtained a valid authorization, in accordance with 45 CFR 164.508 that includes a specification that protected health information can be exchanged for remuneration.

IV. OBLIGATIONS OF COVERED ENTITY

1. The Covered Entity will inform the Business Associate of any limitations in the Covered Entity's Notice of Privacy Practices in accordance with 45 CFR 164.520, to the extent that such limitation may affect the Business Associate's use or disclosure of protected health information.
2. The Covered Entity will inform the Business Associate of any changes in, or revocation of, permission by an individual to use or disclose protected health information, to the extent that such changes may affect the Business Associate's use or disclosure of protected health information.
3. The Covered Entity will inform the Business Associate of any restriction to the use or disclosure of protected health information that the Covered Entity has agreed to in accordance with 45 CFR 164.522 and 42 USC 17935, to the extent that such restriction may affect the Business Associate's use or disclosure of protected health information.
4. Except in the event of lawful data aggregation or management and administrative activities, the Covered Entity shall not request the Business Associate to use or disclose protected health information in any manner that would not be permissible under the HIPAA Privacy and Security Rule and the HITECH Act, if done by the Covered Entity.

V. TERM AND TERMINATION

1. **Effect of Termination:**
 - a. Except as provided in paragraph (b) of this section, upon termination of this Addendum, for any reason, the Business Associate will return or destroy all protected health information received from the Covered Entity or created, maintained, or received by the Business Associate on behalf of the Covered Entity that the Business Associate still maintains in any form and the Business Associate will retain no copies of such information.
 - b. If the Business Associate determines that returning or destroying the protected health information is not feasible, the Business Associate will provide to the Covered Entity notification of the conditions that make return or destruction infeasible. Upon a mutual determination that return or destruction of protected health information is infeasible, the Business Associate shall extend the protections of this Addendum to such protected health information and limit further uses and disclosures of such protected health information to those purposes that make return or destruction infeasible, for so long as the Business Associate maintains such protected health information.
 - c. These termination provisions will apply to protected health information that is in the possession of subcontractors, agents, or employees of the Business Associate.
2. **Term.** The Term of this Addendum shall commence as of the effective date of this Addendum herein and shall extend beyond the termination of the contract and shall terminate when all the protected health information provided by the Covered Entity to the Business Associate, or accessed, maintained, created, retained, modified, recorded, stored, or otherwise held, transmitted, used or disclosed by the Business Associate on behalf of the Covered Entity, is destroyed or returned to the Covered Entity, or, if it not feasible to return or destroy the protected health information, protections are extended to such information, in accordance with the termination.
3. **Termination for Breach of Contract.** The Business Associate agrees that the Covered Entity may immediately terminate the Contract if the Covered Entity determines that the Business Associate has violated a material part of this Addendum.

VI. MISCELLANEOUS

1. **Amendment.** The parties agree to take such action as is necessary to amend this Addendum from time to time for the Covered Entity to comply with all the requirements of the Health Insurance Portability and Accountability Act (HIPAA) of 1996, Public Law No. 104-191 and the Health Information Technology for Economic and Clinical Health Act (HITECH) of 2009, Public Law No. 111-5.
2. **Clarification.** This Addendum references the requirements of HIPAA, the HITECH Act, the Privacy Rule and the Security Rule, as well as amendments and/or provisions that are currently in place and any that may be forthcoming.
3. **Indemnification.** Each party will indemnify and hold harmless the other party to this Addendum from and against all claims, losses, liabilities, costs and other expenses incurred as a result of, or arising directly or indirectly out of or in conjunction with:

- a. Any misrepresentation, breach of warranty or non-fulfillment of any undertaking on the part of the party under this Addendum; and
 - b. Any claims, demands, awards, judgments, actions, and proceedings made by any person or organization arising out of or in any way connected with the party's performance under this Addendum.
4. **Interpretation.** The provisions of the Addendum shall prevail over any provisions in the Contract that may conflict or appear inconsistent with any provision in this Addendum. This Addendum and the Contract shall be interpreted as broadly as necessary to implement and comply with HIPAA, the HITECH Act, the Privacy Rule and the Security Rule. The parties agree that any ambiguity in this Addendum shall be resolved to permit the Covered Entity and the Business Associate to comply with HIPAA, the HITECH Act, the Privacy Rule and the Security Rule.
5. **Regulatory Reference.** A reference in this Addendum to a section of the HITECH Act, HIPAA, the Privacy Rule and Security Rule means the sections as in effect or as amended.
6. **Survival.** The respective rights and obligations of Business Associate under Effect of Termination of this Addendum shall survive the termination of this Addendum.

IN WITNESS WHEREOF, the Business Associate and the Covered Entity have agreed to the terms of the above written agreement as of the effective date set forth below.

COVERED ENTITY

BUSINESS ASSOCIATE

 Health Division
 (Enter Division Name)

 4150 Technology Way
 (Enter Division Address)

 Carson City, NV 89706
 (Enter Division City, State and Zip Code)

 775-684-4200
 (Enter Division Phone Number)

 775-684-4211
 (Enter Division Fax Number)

 (Authorized Signature)

 Richard Whitley
 (Print Name)

 Administrator
 (Title)

 (Enter Business Name)

 (Enter Business Address)

 (Enter Business City, State and Zip Code)

 (Enter Business Phone Number)

 (Enter Business Fax Number)

 (Authorized Signature)

 (Print Name)

 (Title)



Washoe County Health District



Public Health
Prevent. Promote. Protect.

Staff Report

Board Meeting Date: January 24, 2013

DATE: January 8, 2012

TO: District Board of Health

THROUGH: Joseph P. Iser, MD, DrPH, MSc, District Health Officer, Washoe County Health District 775-328-2416, JIser@washoecounty.us *JPI*

Eileen Stickney, Administrative Health Services Officer, Washoe County Health District 775-328-2417, ESTickney@washoecounty.us *ES*

FROM: Laurie Griffey, Administrative Assistant I, Washoe County Health District 775-328-2698, lgriffey@washoecounty.us *LAG*

SUBJECT: **Proposed Approval of the Washoe County Health District Employee Policy Manual updated for Fiscal Year 13.**

RECOMMENDATION:

Staff recommends that the District Board of Health approve the Washoe County Health District Employee Policy Manual updated for Fiscal Year 13.

SUMMARY

The Washoe County District Board of Health shall adopt written policies and procedures for administering and maintaining its programs, projects and activities. The employee policy manual ensures administrative compliance with operational policies and procedures governing employees, established by the District Board of Health and Board of County Commissioners.

District Board of Health Goal 4: Strengthen Washoe County Health District as an innovative, high performing organization.

District Board of Health Strategy 2: Retain and recruit a skilled, diverse and empowered workforce.

District Board of Health Strategy 4: Optimize Washoe County Health District organizational structure and processes.

PREVIOUS ACTION

The District Board of Health last reviewed and accepted the Washoe County Health District's Employee Policy Manual in its entirety on September 24, 2009.

BACKGROUND:

A comprehensive review of the manual was initiated; some policies were updated and several new policies have been added. The revised manual represents an intensive review of Human Resource and Fiscal policies and procedures and provides employees with guidance on these issues.

The revised manual has been discussed and reviewed by the following individuals:

- Washoe County District Health Officer
- Washoe County Health District Administrative Health Services Officer
- Washoe County Health District Division Directors
- The Deputy District Attorney assigned to the Washoe County Health District

A comprehensive administrative review of the policy manual will be conducted on a bi-annual basis. The policy manual will be kept current with the inclusion of new or revised policies as soon as they are accepted by the District Board of Health.

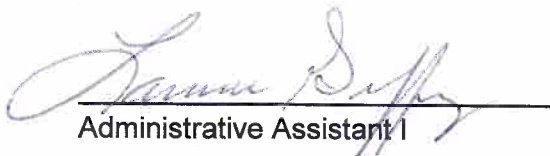
Upon approval by the District Board of Health, an electronic version of the manual will be placed on the Health District's employee intranet site and an electronic copy will be sent to each employee with an Acknowledgement form for the employee to sign. The Acknowledgement form indicates the employee has read, understands, and agrees to abide by the Washoe County Health District Employee Policy Manual and the policies referenced therein. Acknowledgement forms will be maintained in the employee's personnel file.

FISCAL IMPACT:

Should the Board approve the Washoe County Health District Employee Policy manual, there will be no fiscal impact to the adopted FY 13 budget.

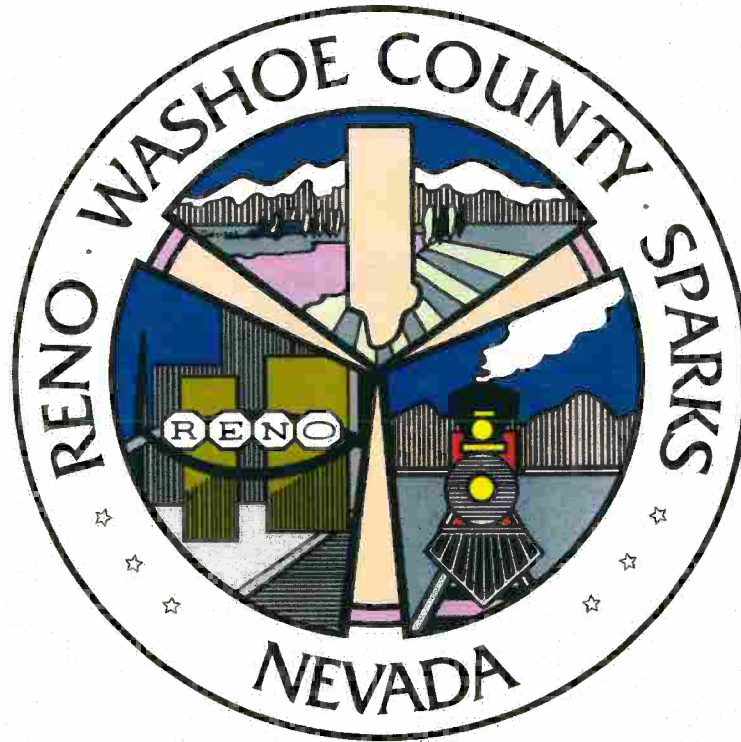
POSSIBLE MOTION:

Move to approve the Washoe County Health District Employee Policy Manual updated for Fiscal Year 13.



Administrative Assistant I

(Enclosure)



WASHOE COUNTY HEALTH DISTRICT
EMPLOYEE POLICY MANUAL

Accepted by the District Board of Health
Last Approved: September 24, 2009

Proposed Changes 2013
Presented to Board: January 24, 2013

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INTRODUCTION AND LEGAL NOTICE

Introduction

The Washoe County Health District Employee Policy Manual is intended to provide general information about departmental policies.

Legal Notice

The policies and statements contained herein may include information taken from other original source documents such as the Washoe County Code and the Agreements, which exist between Washoe County and the recognized Employee Associations. This manual does not alter the provisions of the Code or the Agreements in any way, nor does it affect the relationships defined therein. Therefore, these and other pertinent source documents should be consulted for complete and up-to-date versions of the policies and statements set forth in this Policy Manual.

This document supersedes all prior Health District Employee Policy Manuals. This Policy Manual is subject to change at any time. Employees will be notified of new policies and policy updates upon acceptance. A current copy of the Policy Manual also can be located on the Washoe County Health District website.

Washoe County Policies are issued to employees attending Washoe County New Employee Orientation through Washoe County Human Resources. A list of these policies is included in this Manual for reference and the full text of these policies may be viewed separately at the Washoe County Human Resources website.

ACCIDENT AND INJURY REPORTING (CONTINUED)

1. The employee shall report the incident to the Supervisor; and within one (1) business day of the incident, complete and submit the Saf-7 "Washoe County Liability and Property Loss Report" form; (located on [eww.health](#) under **Forms & Info, HR Forms & Info, Risk Management forms**) and submit it to the Division Director, through their Supervisor;
2. The Division Director shall submit the form to the Washoe County Health District's Personnel Representative within two (2) business days of the incident.

III. **Vehicle Accident:**

An Employee driving any vehicle (County, rental, or personal), who is involved in an accident during the course of assigned duties shall:

1. Immediately notify the appropriate law enforcement agency for investigation at the scene, regardless of the extent of damage; **if local law enforcement will not respond and a County vehicle is involved, advise dispatch a County vehicle was involved and request they dispatch a Deputy Sheriff to the scene to do a report. (Risk Mgmt needs this report);**
2. After notifying law enforcement **contact your immediate Supervisor and give a preliminary verbal report; if Supervisor is unavailable,** call the Washoe County Health District emergency line (328-2461) and give a preliminary verbal report **to the WCHD Personnel Rep;**
3. Within one (1) business day, the **employee must** complete the Saf-5 "Washoe County Vehicle Accident Report" form and submit it to the Washoe County Health District's Personnel Representative, through his/her Supervisor and Division Director; (**form located on [eww.health](#) under Forms & Info, HR Forms & Info, Risk Management forms**);
4. **Accidents involving non-County vehicles when law enforcement does not respond: Employee should** obtain, complete and file the Nevada Department of Motor Vehicles "Driver's Report of Traffic Accident SR-I: form **and submit a copy to the Health District Personnel Representative (NV DMV SR-1 form located at <http://www.dmvnv.com/pdf/forms/sr1.pdf>);**
5. Do not sign any form(s) or materials presented by the insurance carrier(s) of the opposing party. All such materials are to be forwarded to the District Health Officer, who will advise Risk Management.

Updated 8/22/12

**NEW AUTHORITY:
HEALTH OFFICER TO REVIEW AND APPROVE NEW
AND CONTINUING GRANT APPLICATIONS AFTER
CONDUCTING A PRE-APPLICATION ASSESSMENT**

DESCRIPTION:

Pre-Application Assessment

A pre-application assessment evaluates the following factors and should be done in consultation with the Administrative Health Services Officer and District Health Officer (DHO).

Pre-Application Assessment shall be done in advance of the submission of the Grant Application for new and continuing grants.

Financial Factors:

- Total anticipated project cost (including: reimbursable and non-reimbursable costs and costs associated with sub-granting)
- Match requirements and sources
- Program income considerations
- Staffing requirements (including salary and benefits increases for multi-year grants)
- Plan for sustaining/terminating the program in the event of loss of grant funding or end of the grant term

Programmatic Factors:

- Alignment with the Washoe County Health District mission and County strategic priorities
- Community and service delivery benefits
- Provision or expansion of services to address critical needs as determined by DHO
- Department's capacity to administer the requirements of the grant

Application Request to Submission Form

All Washoe County Health District grant applications must be approved by the Administrative Health Services Officer and District Health Officer or the District Board of Health prior to application. Board approval for applications is only necessary when required by the granting agency. The District Health Officer's and Administrative Health Services Officer's approval are appropriate for all other grant applications.

On-going grants that have been approved by the District Board of Health during the budget process are exempt from the "Request to Submit" (form prescribed by the Grants Administrator) procedure, unless there are material changes to the award. In the event of changes, those not reviewed during the budget process, shall be submitted to the Administrative Health Services Officer. The Administrative Health Services Officer will consider the changes to the award and determine if the changes are material and require a Request to Submit for approval by the District Health Officer.

New grant applications will require the "Request to Submit" form be completed and sent through the appropriate approval process. No funding can be obligated or spent until the DBOH approves the grant, retroactively if necessary.

Added 5/14/12

Updated per instruction from DBOH 5/24/12 meeting (Agenda #13)

NEW

CELL PHONE POLICY

DESCRIPTION:

All employees who are issued a County/Health District cell phone must read and sign the WCHD Cell Phone Policy located on the Health District website; (located on www.health under Forms & Info, Policies, Procedures and Protocols) or obtain a copy from the Health District HR Personnel Representative.

Cell phones are to be used for County/Health District business only. They are not to be used for personal use except in an emergency situation as outlined in section #2 of the Cell Phone Policy.

Individually signed cell phone policy acknowledgement forms are to be submitted to the Health District HR Personnel Representative and placed in the employees personnel file.

Added 10/12/12

CODE OF ETHICAL STANDARDS (CONTINUED)

- (1) The public officer who is responsible for, and has authority to authorize the use of such property, equipment, or other facility, has established a policy allowing the use or that the use is necessary as a result of emergency circumstances;
 - (2) The use does not interfere with the performance of his public duties;
 - (3) The cost or value related to the use is nominal; and
 - (4) The use does not create the appearance of impropriety;
 - (b) The use of mailing lists, computer data, or other information lawfully obtained from a governmental agency which is available to members of the general public for nongovernmental purposes; or
 - (c) The use of telephones or other means of communication if there is not a special charge for that use. If a governmental agency incurs a cost as a result of a use that is authorized pursuant to this subsection, or would ordinarily charge a member of the general public for the use, the public officer or employee shall promptly reimburse the cost or pay the charge to the governmental agency.
8. A member of the Legislature shall not:
- (a) Use governmental time, property, equipment, or other facility for a nongovernmental purpose or for the private benefit of himself or any other person. This paragraph does not prohibit:
 - (1) A limited use of state property and resources for personal purposes if:
 - (I) The use does not interfere with the performance of his public duties;
 - (II) The cost or value related to the use is nominal; and
 - (III) The use does not create the appearance of impropriety;
 - (2) The use of mailing lists, computer data, or other information lawfully obtained from a governmental agency, which is available to members of the general public, for nongovernmental purposes; or
 - (3) The use of telephones or other means of communication if there is not a special charge for that use.
 - (b) Require or authorize a legislative employee, while on duty, to perform personal services or assist in a private activity, except:
 - (1) In unusual and infrequent situations where the employee's service is reasonably necessary to permit the Legislator or legislative employee to perform his official duties; or
 - (2) Where such service has otherwise been established as legislative policy.
9. A public officer or employee shall not attempt to benefit his personal or financial interest through the influence of a subordinate.
10. A public officer or employee shall not seek other employment or contracts through the use of his official position.

NEW

CUSTOMER CONDUCT, RIGHTS AND SUSPENSION

DESCRIPTION:

A Customer Conduct Policy, Customer/Client Rights Under the Discrimination and Harassment Policy and a Customer Suspension Policy have been created to outline the acceptable conduct of customers and customer's rights along with a process for suspending a customer's privileges.

The policies are available under the forms section of this manual and posted on the Washoe County Health District intranet under www.washoeCounty/health.

Employees should review and be aware of the policies and follow the "Staff Actions Steps" below.

Staff Action Steps for Customer Conduct Policy Violation

1. Staff should ask the customer to please discontinue their action or behavior that is not in compliance with our Customer Conduct Policy.
2. Should this not work, let the customer know that they are violating the policy, and provide he or she with a copy of the Customer Conduct Policy.
3. If the customer has any questions or concerns, or continues their actions or behaviors, notify a Supervisor.
4. The Supervisor may discuss the situation with the customer, reiterating the policy violation. If necessary, security may be notified.
5. If the customer is unable to comply with the policy, the Supervisor shall let the customer know that his or her Health District privileges may be suspended, as stated in the **WCHD Customer Suspension Policy**.

Staff Action Steps for WCHD Customer/Client Discrimination and Harassment Policy –

For use when customers state they have been discriminated or harassed by Health District staff

1. Immediately notify their Supervisor or Division Director of the customer's complaint.
2. The Supervisor will provide the customer with a copy of the WCHD. Customer/Client Discrimination and Harassment Complaint Form, for the client to complete.
3. The Supervisor shall collect the form from the customer, and make a copy for the client to retain.
4. Provide original complaint form to the District Health Officer for review and investigation.

For more information regarding the above policies, please refer to the WCHD Policy Manual.

Added 10/31/12

INCOMPATIBLE ACTIVITIES

DESCRIPTION: Washoe County Code,
Sections 5.334 through 5.339 (January 2009)

5.334 Full-time service required: Each employee shall, during his hours of duty as an employee and subject to such other laws, rules or regulations as pertain thereto, devote his full-time attention and efforts to County employment. A full-time employee may not engage in additional part-time work for the County.

[§1, Ord. No. 729; A Ord. No. 828]

5.335 Incompatible activities: Prohibition. Employees shall not engage in any employment, activity or enterprise which has been determined to be inconsistent, incompatible or in conflict with their duties as Washoe County officers and employees, or with the duties, functions or responsibilities of their appointing authorities or departments by which they are employed.

[§158, Ord. No. 213]

5.337 Incompatible activities: Specific prohibitions. Employees shall not engage in any employment, activity or enterprise which is inconsistent, incompatible or in conflict with their duties as Washoe County officers and employees, or with the duties, functions or responsibilities of their appointing authorities or departments by which they are employed, including but not limited to:

1. Except for the limited use authorized in section 5.340, the use for private gain or advantage of the County's time, facilities, equipment and supplies.
2. The use for private gain or advantage of a badge, uniform, prestige or influence of their County positions of employment.
3. The receipt or acceptance by employees of any money or other consideration from anyone other than the County for the performance of an act which the employees would be required or *Washoe County Code Supplement 12 January 2009 CHAPTER 5 - ADMINISTRATION AND PERSONNEL Page 5-101* expected to render in the regular course of hours of their County employment or as a part of their duties as employees.
4. The performance of an act in other than their capacity as employees, which act may later be subject, directly or indirectly, to control, inspection, review, audit, or enforcement by such employees or the department by which they are employed.

[§158, Ord. No. 213; A Ord. Nos. 492, 1053]

5.339 Incompatible activities: Designation. Each appointing authority may determine and describe in writing additional specific activities which, for employees under his jurisdiction, will be considered inconsistent, incompatible, or in conflict with their duties as employees, and shall provide a copy to each such employee.

[§159, Ord. No. 213; A Ord. No. 492]

Determination of incompatible activities is made by the District Health Officer.

Updated 10/31/12

NEW LICENSURE/CERTIFICATION/REGISTRATION RENEWAL PROCESS

DESCRIPTION:

It is a professional responsibility and a legal requirement, for any employee whose position requires an active license, certificate, or registration to maintain a current one on file at all times.

All personnel whose position requires a license, certificate, or registration will provide a copy to their Supervisor on or before the expiration date of the previous one. The Supervisor will forward a copy of the license, certificate, or registration to the WCHD HR Personnel Representative for tracking purposes.

If an employee fails to provide a copy of his or her license, certificate, or registration they will be removed from the work schedule and unable to return until they have provided a copy of their current active license, certificate, or registration. Failure to maintain a required license, certificate, or registration may result in disciplinary action up to and including termination.

Example: In accordance with the Washoe County Job Specifications the following positions require a license, certificate or registration:

- District Health Officer
- All Nursing positions (RN, LPN, APN, Disease Intervention Specialist, Nursing Supervisor, etc.)
- Community Health Nutritionist
- Environmental Health Specialist (all levels)
- Positions working in the Lab (certification as a Office Lab Assist)
- EPI Center Director
- Licensed Engineer (all levels)
- Vector Borne Disease Specialist / Vector Control Coordinator

REFERENCES

- Washoe County Job Specifications
- Nevada Nurse Practice Act
- WCNA Contract

Added 7/30/12

MEDIA POLICY

DESCRIPTION:

The Washoe County Health District (WCHD) recognizes the significant role that media outlets play in providing health-related information to our community during the course of daily operations and particularly in the event of a public health emergency or a change in public health policy. Therefore, it is of critically importance that the WCHD be perceived by media representatives as the foremost local public health resource and as a credible, trusted, and responsive source of information; that productive relationships with media contacts be established and nurtured; and that media inquiries be treated as a priority.

It is the policy of the WCHD to welcome and encourage communication with media representatives about public health-related matters, unless there is a compelling reason not to do so (e.g., Privacy Act requirements).

In support of these objectives, it is imperative that communication with media representatives be conducted in a timely, well-coordinated, respectful, and professional manner. Although effective communication is integral to the role of the WCHD Public Information Officers (PIO), each employee, as a representative of the WCHD, also is responsible to promote and protect the brand and reputation of the WCHD by adhering to this media policy.

1. All communication with the media shall be coordinated as follows:
 - a. **Proactive (Initiating Communication with Media Representatives)**
communication with the media shall be approved by Division/Department management and made through the appropriate WCHD PIO **prior to its initiation/distribution** (e.g., any WCHD employee can write a news release or media advisory, but it must receive PIO review, editing or approval before it is distributed. The appropriate PIO shall be listed as the contact on information distributed to media outlets.)
 - b. **Reactive (Responding to Inquiries from Media Representatives)**
communication requests from the media shall be referred to the appropriate PIO **prior to responding**. If the appropriate PIO is not available, then Division or Department management shall be contacted for direction.
2. All communication with media representatives, whether formal (e.g., via a news release) or informal (e.g., a casual conversation at a non-WCHD event) shall be considered to be "on the record."
3. The District Health Officer must approve all press releases of a non-routine nature (as defined in the Media Administrative Procedure) prior to dissemination to the media.

NEW

MEETING POLICY: SMOKE FREE

DESCRIPTION:

In an effort to reduce the serious health hazards caused by exposure to secondhand smoke, all meetings and conferences hosted or sponsored by the Washoe County Health District shall be held in a 100% smoke-free facility. Exceptions to this Smoke Free policy can only be granted by the District Health Officer.

Added 5/14/12

NEW

PERSONNEL ELECTRIC OR ELECTRONIC USE (PEEU)

DESCRIPTION:

Employees are limited on the personal use of County or personal electric or electronic devices during work time. Personal business should be conducted on non-work hours.

Due to the potential hazards and the increase in power usage; employees are not allowed to utilize space heaters, fans, or other electronic devices not specifically approved or provided by the County.

The use of lap tops, note pads, note books, I-Pad, phones, and other electronic devices (whether personal or County owned), for non-business purposes during business hours shall be in compliance with the Washoe County internet and Intranet Acceptable Use Policy.

According to the Washoe County Internet and Intranet Acceptable Use Policy approved by the Board of County Commissioners and amended by ordinance #1343 effective July 22, 2002; which references NRS 281.481(7) and Washoe County Code section 5.340:

<http://www.washoeCounty.us/repository/files/13/InternetandIntranetAcceptableUsePolicyJune2028202011.pdf>

http://www.co.washoe.nv.us/clerks/files/pdfs/County_code/CompleteCode.pdf

Added 10/31/12

PHOTOCOPYING

DESCRIPTION:

Photocopiers shall be used for Washoe County Health District business only. The appropriate program or division code will be used when making copies.

Bulk copies should be processed through the Washoe County Reprographics Department, whenever possible.

Copies being made for customers who are waiting should take priority over all other copy jobs.

RECORDING OF TIME - TIMECARDS

DESCRIPTION:

Each employee is responsible for the timely submittal of an accurate and complete timecard thru the ESS Portal.

Each Supervisor/Division Director or designee shall review the timecard for accuracy prior to approval; **verifying timecards have been entered for all of their staff and released by internal WCHD payroll deadlines.** Inaccurate timecards will be returned to the employee for corrections.

The Health District's timecard deadline is 5 p.m. on Thursday of the week prior to payday. All time must be entered, released and approved by the Supervisor prior to 5p.m. Due to holidays payroll deadlines may be adjusted; employees will be notified of earlier payroll deadlines via e-mail.

Supervisor/Division Director or designee is responsible for ensuring all timecards for their staff are entered. If an employee is on leave and their timecard has not been entered, the Supervisor may submit a request to the Health District Personnel Representative to have the employee's time entered. (Request must include employee's name, dates, hours, breakdown of accounts and how hours are to be encoded).

If a **full-time** employee fails to complete their time card, Annual Leave will be encoded by the department's personnel representative. If sufficient Annual Leave **is not** available in the employee's leave bank, other leave types may be used to fulfill the minimum time requirements for the employee if available. **If there is not enough time available Leave Without Pay (LWOP) will be entered.**

Part-time, seasonal or intermittent hourly employees do not have minimum time requirements established in ESS. If the employee fails to enter their timecard; their Supervisor should follow up with the employee. If no time is entered, no paycheck is issued. Any time that is worked but not entered will need to be entered during the next pay period.

If a Supervisor fails to approve an employee's time card, the department's personnel representative can approve the requisite number of hours to give the employee their budgeted hours for the pay period. Compensatory time earned, overtime, mileage reimbursement, etc. must be approved in SAP by the employee's Supervisor or designated substitute. Approval for these categories of compensation cannot be delegated to the department's personnel representative. **If a Supervisor or designated substitute is experiencing SAP approval/program issues, they may request assistance with the approval of the extra compensation after they have verified the validity of the entries and provided written approval to the department's personnel representative.**

Updated 8/22/12

SIGNATURES - CORRESPONDENCE

DESCRIPTION:

The District Health Officer or his designee shall sign all official Washoe County Health District correspondence to:

- District Board of Health Members
- Washoe County Manager
- City Managers
- State Health Division Administrator
- State Health Officer
- Elected officials
- Other local government official

Division Directors or their designees may sign routine correspondence to those individuals noted above (except District Board of Health Members) if it does not involve a statement of Washoe County Health District policy, or address personnel or fiscal matters. A copy of such correspondence shall be provided to the District Health Officer.

USE OF COUNTY VEHICLES

DESCRIPTION:

County vehicles should be used when practical before the use of private automobiles. County vehicles shall be used for official business only, and shall be driven only by employees. Passengers are restricted to other employees or individuals on official business.

Employees driving County vehicles shall:

- Have a valid driver's license
- Provide verification of same to the Washoe County Health District's Personnel Representative
- Comply with the County's relevant policies and procedures, (e.g., defensive driving policy, use of safety belts, service station, vehicle maintenance, motor pool, and parking of vehicles)
- Comply with all traffic regulations
- Pay for parking tickets and moving violations
- Secure the vehicle, valuables, and equipment during routine stops
- Lock the vehicle at the end of the workday in an area designated by the County
- Be responsible for keeping vehicles clean

APPENDIX

<u>Plans</u>		
• Defensible Hiring Guide	Workforce Development	Guidelines and Forms
• Dental Summary	Benefits	Summary
• Dependent Eligibility Requirements	Benefits	Summary
• Direct Deposit Request Form	Technical Processing	Form
• Discrimination Complaint Form	EEO	Form
• Discrimination/Harassment Policy	EEO	Policy, Procedures and Forms
• Discrimination/Harassment Complaint Procedure - Department Head	EEO	Policy and Procedures
• Diversity Brochure	EEO	Guidelines
• Diversity in Action	EEO	Policy and Procedures
• Driver Selection Form	Employment	Form
• Driver Selection & Training Policy	Employment	Policy
• DUI Procedure	Employment	Procedure
• Eligibility Quick Reference	Benefits	Summary
• E-mail Etiquette Guide	Workforce Development	Guide
• Employee Parking Policy	Miscellaneous	Policy
• Enrollment Form - Health Plan	Benefits	Form
• Essential Functions	Employment	Form
• Equal Employment Opportunity Plan	EEO	Policy
• Equal Employment Opportunity Plan (Sheriff's Department)	EEO	Policy
• External Training Request Form	Workforce Development	Form
• Flex Dependant Day Care Reimbursement Form	Benefits	Form
• Flex Direct Deposit Request Form	Benefits	Form
• Flex Unreimbursed Medical Claim Reimbursement Form	Benefits	Form
• Fingerprinting - Civil Applicant Waiver	Employment	Form
• Fingerprint Request Form	Employment	Form
• Fitness for Duty Policy	Employment	Procedures
• Fitness for Duty/Essential Job Functions (Long Form)	Employment	Form
• FMLA Employer Response Form to FMLA Request	Leave	Form
• FMLA FAQ's	Leave	Guidelines
• FMLA Policy	Leave	Policy and Procedures
• FMLA Regulations 2009 Addendum	Leave	Policy and Procedures
• FMLA Required Forms	Leave	Form
• GAP Plan and HMO Participants	Benefits	Summary
• GAP Reimbursement Form	Benefits	Form
• Hiring Deferral Appeal	Technical Processing	Form
• Holiday Calendar 2011-2012	Technical Processing	Calendar
• Holiday Calendar 2012-2013	Technical Processing	Calendar
• HMO Plan Summary	Benefits	Summary
• HSA Contribution Form	Benefits	Form

APPENDIX

• Rest and Meal Break Guidelines	Technical Processing	Guidelines
• Self Funded Plan Summary	Benefits	Summary
• Self Funded Plan Document	Benefits	Summary
• Sexual Harassment Complaint Form	EEO	Form
• Sexual Harassment Policy	EEO	Policy, Procedures and Form
• Sick Leave Usage Guide	Leave	Guidelines
• Smoking Policy	Miscellaneous	Policy
• SSA - 1945 Employment Not Covered by SS	Employment	Guidelines and Form
• Subsequent Injury Program Form	Miscellaneous	Form
• Substance Abuse Policy and Procedures	Employment	Policy, Procedures and Guidelines
• Summary of Benefits	Benefits	Summary
• Suggestion Program	Miscellaneous	Policy
• Suggestion Program Form	Miscellaneous	Form
• Technology Services Computer Data and Media Disposal Policy	Miscellaneous	Policy
• Technology Services Internet Policy	Miscellaneous	Policy and Form
• Technology Services Internet Policy Form	Miscellaneous	Form
• Technology Services Policy Manual	Miscellaneous	Policy
• Technology Services Security Policy	Miscellaneous	Policy
• Technology Services Social Media Use for Official County Business	Miscellaneous	Policy
• Telecommuting Form	Employment	Form
• Telecommuting Policy	Employment	Policy
• Temporary Employment Agreement	Employment	Form
• Transfer Request	Technical Processing	Form
• Tuition Reimbursement Policy	Compensation/Benefits	Policy and Procedures
• Tuition Reimbursement Process	Compensation/Benefits	Procedures
• Volunteer Agreement	Miscellaneous	Form
• Volunteer Duty Description	Miscellaneous	Form
• Volunteer Program Policy	Miscellaneous	Policy and Procedures
• Voluntary Demotion Request	Technical Processing	Form
• VSP Summary (Vision Plan)	Benefits	Summary
• W-2 Duplicate Request	Technical Processing	Form
• W-4 (Link to IRS web page)	Technical Processing	Form
• WC Sheriff Overtime Worksheet	Technical Processing	Form
• Washoe County Scholarship Fund	Miscellaneous	Form
• Whistleblower Request for Hearing	EEO	Form
• Whistleblower Notice	EEO	Procedures, Guidelines and Form
• Whistleblower Ordinance	EEO	Policy
• Workplace Violence Policy	EEO	Policy and Procedures



WASHOE COUNTY HEALTH DISTRICT

AIR QUALITY MANAGEMENT DIVISION



Public Health
Prevent. Promote. Protect.

DATE: January 24, 2013
 TO: District Board of Health
 FR: Kevin Dick, Division Director
 SUBJECT: Appointment to the Air Pollution Control Hearing Board
 Agenda Item: 9. E.

Background

Air Pollution Control Hearing Board (APCHB) members are appointed for three-year terms. The APCHB members volunteer their time and receive no compensation for their service. An APCHB member appointment will end on January 28th, 2013.

Recommendation

It is recommended that the District Board of Health appointment Mr. Jim Kenney to serve a three-year term on the Air Pollution Control Hearing Board (APCHB). Mr. Kenney has indicated his willingness to serve on the Board. A brief resume is attached.

Mr. Kenney would replace Mr. Andrew Sato. Mr. Sato has served on the hearing board since 2009. Mr. Sato has indicated his willingness to leave the Board when his term ends.

Alternatives

The Board may decide not to make this appointment and direct staff to solicit other potential APCHB members.

Kevin Dick
 Division Director
 Air Quality Management Division

Jim Kenney

Owner, Catalytic PURE AIR, LLC

P. O. Box 20423

Reno, NV 89515

M: 530 277-5268

jim@catalyticpureair.com

Affiliations:

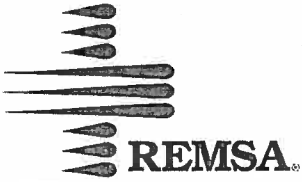
- *Reno Chamber of Commerce Member
- *Business Network International Member
- *Indoor Air Quality Association Member
- *American Lung Association, Board Member

Community Service Organizations:

- *Alpine Meadows Estate Association
- *Tahoe Adaptive Ski School
- *American Lung Association of Nevada

Education:

- * Masters of International Management, Thunderbird School of International Management, USA



Regional Emergency Medical Services Authority

REMSA

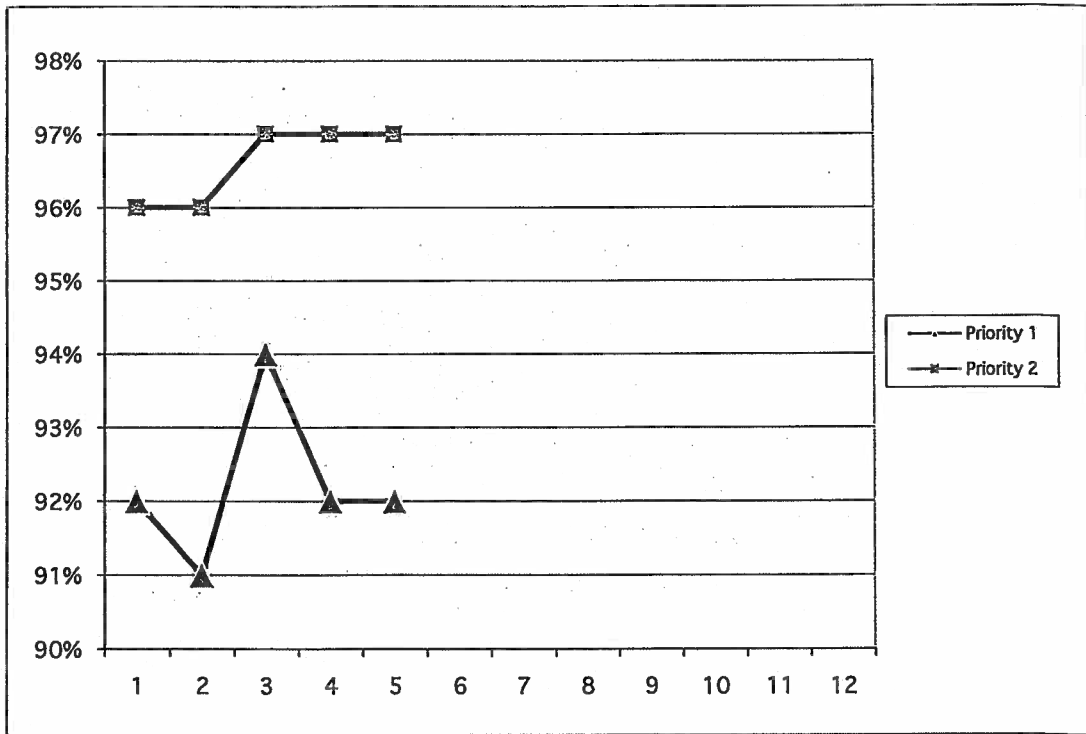
OPERATIONS REPORTS

FOR

NOVEMBER 2012

Fiscal 2013

Month	Avg. Response Time	Avg. Travel Time	Priority 1	Priority 2
Jul. 2012	5 mins. 46 secs.	4 mins. 48 secs.	92%	96%
Aug.	5 mins. 59 secs.	4 mins. 56 secs.	91%	96%
Sept.	5 mins. 46 secs.	4 mins. 48 secs.	94%	97%
Oct.	5 mins. 34 secs.	4 mins. 40 secs.	92%	97%
Nov.	5 mins. 38 secs.	4 mins. 42 secs.	92%	97%
Dec.				
Jan. 2013				
Feb.				
Mar.				
Apr.				
May				
June 2013				



Care Flight

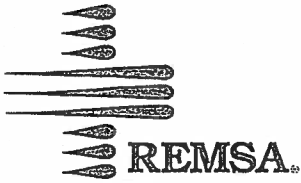
Month	#Patients	Gross Sales	Avg. Bill	YTD Avg.
Jul-12	10	\$69,730	\$6,973	\$6,973
Aug.	17	\$140,090	\$8,241	\$7,771
Sept.	12	\$95,505	\$7,959	\$7,829
Oct.	3	\$20,775	\$6,925	\$7,764
Nov.	11	\$81,919	\$7,447	\$7,698
Dec.			\$0	\$7,698
Jan. 2013			\$0	\$7,698
Feb.			\$0	\$7,698
Mar.			\$0	\$7,698
Apr.			\$0	\$7,698
May			\$0	\$7,698
June			\$0	\$7,698
Totals	53	\$408,019	\$7,698	\$7,698

Adjusted Allowed Average Bill - \$7,393.00

REMSA Ground

Month	#Patients	Gross Sales	Avg. Bill	YTD Avg.
Jul-12	3222	\$3,256,558	\$1,011	\$1,011
Aug.	3305	\$3,381,910	\$1,023	\$1,017
Sept.	3088	\$3,190,456	\$1,033	\$1,022
Oct.	3234	\$3,322,716	\$1,027	\$1,024
Nov.	3015	\$3,094,421	\$1,026	\$1,024
Dec.			\$0	\$1,024
Jan. 2013			\$0	\$1,024
Feb.			\$0	\$1,024
Mar.			\$0	\$1,024
Apr.			\$0	\$1,024
May			\$0	\$1,024
June			\$0	\$1,024
Totals	15864	\$16,246,061	\$1,024	\$1,024

Allowed ground avg bill - \$1,028.00



Regional Emergency Medical Services Authority

**CARE FLIGHT
OPERATIONS REPORT
FOR
NOVEMBER 2012**



**CARE FLIGHT OPERATIONS REPORT
NOVEMBER 2012
WASHOE COUNTY**

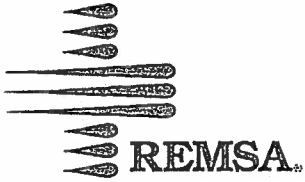
- ❖ **In Town Transfer:**
 - 0 Ground ITTs were completed

- ❖ **Outreach, Education, & Marketing:**
 - 0 Community Education & Public Events

- ❖ **Statistics**

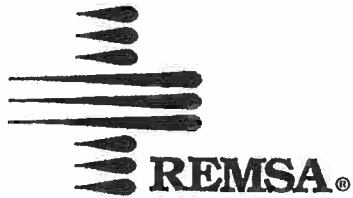
Washoe County Flights

	# patients
Total Flights:	11
Total Patients	11
Scene Flights	9
Hospital Transports	2
Cardiac	1
Trauma	2
Medical	2
Pulmonary	1
High Risk OB	0
Neuro	4
Pediatrics	0
Newborn	0
Full Arrest	0
Surgical	1
Total	11



Regional Emergency Medical Services Authority

REMSA
GROUND OPERATIONS REPORT
FOR
NOVEMBER 2012



GROUND AMBULANCE OPERATIONS REPORT

November 2012

1. OVERALL STATISTICS:

Total Number Of System Responses	4913
Total Number Of Responses In Which No Transport Resulted	1917
Total Number Of System Transports	2996

2. CALL CLASSIFICATION REPORT:

Cardiopulmonary Arrests	2%
Medical	44%
OB	1%
Psychiatric/Behavioral	4%
Transfers	18%
Trauma	27%
Trauma – MVA	8%
Trauma – Non MVA	19%
Unknown/Other	4%
Total Number of System Responses	100%

3. MEDICAL DIRECTOR'S REPORT:

The Clinical Director reviewed:

- 100% Full Arrest Ground Charts
- 100% Pediatric ALS and BLS Ground Charts
- 100% All Ground Intubations

Review of the following patient care records (PCR) for accurate and complete documentation and appropriate use of protocol:

- 100% of cardiopulmonary arrests
- 100% of pediatric patients both ALS and BLS transport and non-transport patients
- 100% of advanced airways (outside cardiac arrests)
 - ETCO2 use in cardiac arrests and advanced airway
- 100% of Phase 6 Paramedic and EMT PCRs
- 100% Pain/Sedation Management
- Total of 2625 PCRs

All follow-up deemed necessary resulting from Communication CQI was completed by Chris Barton, EMD, Communications Education and CQI Coordinator

4. EDUCATION AND TRAINING REPORT:

A. Public Education

Advanced Cardiac Life Support

Date	Course Location	Students
11/3/2012	Nampa Fire Department	1
11/5/2012	REMSA	11
11/9/2012	Casey Quinlan	5
11/11/2012	EMS CES 911 Training Site	3
11/14/2012	REMSA	13
11/19/2012	East Fork Fire	8
11/19/2012	EMS CES 911 Training Site	4
11/19/2012	TMCC-REMSA	16
11/22/2012	Tahoe Pacific Hospital SM	1
11/24/2012	EMS CES 911 Training Site	3
11/26/2012	EMS CES 911 Training Site	9

Advanced Cardiac Life Support Recert

Date	Course Location	Students
9/17/2012	HGH	2
10/26/2012	REMSA	10
10/30/2012	REMSA	11
11/2/2012	EMS CES 911 Training Site	3
11/2/2012	Squaw Creek Resort-REMSA	6
11/7/2012	EMS CES 911 Training Site	3
11/11/2012	EMS CES 911 Training Site	2

11/15/2012	REMSA	1
11/16/2012	Tahoe Pacific Hospital SM	3
11/17/2012	REMSA	9
11/17/2012	REMSA	9
11/19/2012	EMS CES 911 Training Site	3
11/24/2012	EMS CES 911 Training Site	1
11/26/2012	REMSA	11
11/28/2012	EMS CES 911 Training Site	1
11/28/2012	Zack Marcus	1

Advanced Cardiac Life Support Prep

Date	Course Location	Students
11/2/2012	REMSA	3

Advanced Cardiac Life Support Instructor

Date	Course Location	Students
10/1/2012	REMSA	1
10/1/2012	REMSA	1
11/2/2012	REMSA	1

Bloodborne Pathogen

Date	Course Location	Students
11/9/2012	Joe Dabrowski	9
11/13/2012	CCNN	11
11/15/2012	CCNN	3
11/15/2012	CCNN	6

Bloodborne Pathogen Instructor

Date	Course Location	Students
6/19/2012	HGH	7
11/5/2012	ECSD-REMSA	6
11/19/2012	REMSA	2
12/10/2012	REMSA	1
12/10/2012	REMSA	1

Basic Life Support Instructor

Date	Course Location	Students
6/4/2012	REMSA	1
9/1/2012	Peggy Drussel	3
9/27/2012	REMSA	1
6/1/2012	REMSA	1

Health Care Provider CPR

Date	Course Location	Students
6/7/2012	HGH	4
8/3/2012	HGH	3
8/16/2012	HGH	6
9/11/2012	HGH	13
9/17/2012	NDOC	3
10/23/2012	HGH	9
11/3/2012	Riggs Ambulance	5
11/5/2012	Nye County Sheriff	4
11/7/2012	EMS CES 911 Training Site	2
11/7/2012	REMSA	10

11/8/2012	Nye County EMS	7
11/9/2012	Great Basin College	4
11/11/2012	EMS CBS 911 Training Site	1
11/12/2012	Barrick Goldstrike	32
11/12/2012	Kat Fivelstad	1
11/13/2012	EMS CBS 911 Training Site	2
11/13/2012	CCNN	1
11/14/2012	Storey Fire Department	1
11/14/2012	Casey Quinlan	2
11/14/2012	Barrick Cortez	5
11/14/2012	SNJC	6
11/15/2012	West Hills Hospital	5
11/16/2012	CCNN	14
11/16/2012	HGH	4
11/19/2012	Lassen CPR Plus	1
11/21/2012	SNJC	8
11/21/2012	EMS CBS 911 Training Site	4
11/21/2012	Jennifer Kraushaar	12
11/23/2012	EMS CBS 911 Training Site	2
11/28/2012	Milan	18
11/28/2012	EMS CBS 911 Training Site	3
11/28/2012	Nye County Sheriff	3
11/28/2012	Florida Canyon Mining	6
11/5/2012	EMS CBS 911 Training Site	5

Health Care Provider, Employee

Date	Course Location	Students
11/9/2012	REMSA	1
11/20/2012	REMSA	1
11/26/2012	REMSA	1
11/28/2012	REMSA	2
11/29/2012	REMSA	2
11/30/2012	REMSA	1

Health Care Provider Recert

Date	Course Location	Students
9/20/2012	HGH	6
10/18/2012	HGH	4
11/1/2012	Tahoe Forest Hospital	1
11/1/2012	REMSA	9
11/1/2012	HGH	3
11/1/2012	HGH	2
11/2/2012	EMS CES 911 Training Site	6
11/2/2012	Tahoe Forest Hospital	1
11/2/2012	Squaw Creek Resort-REMSA	4
11/3/2012	HGH	13
11/3/2012	HGH	15
11/3/2012	HGH	32
11/4/2012	National Guard	9
11/4/2012	HGH	11
11/5/2012	REMSA	6
11/5/2012	EMS CES 911 Training Site	1

11/7/2012	Tahoe Forest Hospital	1
11/7/2012	Nampa Fire Department	4
11/8/2012	REMSA	4
11/12/2012	Tahoe Forest Hospital	1
11/12/2012	Tahoe Forest Hospital	1
11/13/2012	Tahoe Forest Hospital	1
11/13/2012	REMSA	10
11/14/2012	WCSD	5
11/15/2012	Tahoe Forest Hospital	1
11/15/2012	Storey Fire Department	13
11/15/2012	Eastern Plumas Healthcare	9
11/16/2012	Tahoe Forest Hospital	1
11/17/2012	REMSA	10
11/17/2012	REMSA	10
11/19/2012	Tahoe Forest Hospital	1
11/20/2012	REMSA	9
11/20/2012	Tahoe Forest Hospital	8
11/20/2012	Tahoe Forest Hospital	1
11/20/2012	Tahoe Forest Hospital	1
11/21/2012	REMSA	9
11/26/2012	Airport Fire Department	1
11/27/2012	Tahoe Forest Hospital	1
11/29/2012	REMSA	9
11/30/2012	REMSA	9

Health Care Provider Skills

Date	Course Location	Students
8/31/2012	Tahoe Pacific Hospital SM	1
10/26/2012	REMSA	3
10/27/2012	Jasmine Wevers	3
10/28/2012	Jasmine Wevers	5
11/1/2012	Tahoe Pacific Hospital SM	1
11/2/2012	REMSA	1
11/7/2012	Majen	4
11/9/2012	Tahoe Pacific Hospital SM	1
11/14/2012	REMSA	3
11/15/2012	Majen	1
11/16/2012	REMSA	2
11/20/2012	Willow Springs	10
11/21/2012	Tahoe Pacific Hospital SM	2
11/26/2012	REMSA	1
11/28/2012	REMSA	1
11/28/2012	REMSA	1
11/29/2012	Jasmine Wevers	1
11/30/2012	REMSA	4

Heart Saver CPR/AED

Date	Course Location	Students
8/14/2012	HGH	29
8/15/2012	HGH	4
9/13/2012	HGH	13
10/27/2012	REMSA	7

11/1/2012	WCSD	5
11/3/2012	WCSD	6
11/5/2012	WCSD	3
11/6/2012	Dustin Hopfe	1
11/6/2012	WCSD	7
11/7/2012	WCSD	5
11/7/2012	Nampa Fire Department	6
11/8/2012	WCSD	5
11/10/2012	Ronald Oliver	9
11/10/2012	WCSD	6
11/12/2012	The Ritz Carlton	4
11/13/2012	The Ritz Carlton	1
11/13/2012	WCSD	6
11/14/2012	REMSA	6
11/14/2012	WCSD	3
11/15/2012	WCSD	7
11/15/2012	Dustin Hopfe	2
11/15/2012	Noah Boyer	14
11/16/2012	Nampa Fire Department	10
11/17/2012	Hope Academy	4
11/17/2012	WCSD	6
11/17/2012	Nampa Fire Department	21
11/17/2012	Eastern Plumas Healthcare	9
11/18/2012	UNR PD	4
11/19/2012	UNR PD	2
11/19/2012	WCSD	5
11/19/2012	Nampa Fire Department	10

11/20/2012	WCSD	6
11/20/2012	SNJC	6
11/24/2012	Ronald Oliver	6
11/27/2012	WCSD	6
11/29/2012	WCSD	2
11/30/2012	Bobbi Shanks	15

Heart Saver CPR/First Aid

Date	Course Location	Students
7/26/2012	HGH	2
8/10/2012	NDOC	5
8/13/2012	NDOC	18
8/14/2012	NDOC	8
8/14/2012	NDOC	2
8/15/2012	NDOC	1
8/15/2012	NDOC	14
8/27/2012	NDOC	4
8/29/2012	NDOC	10
8/30/2012	NDOC	5
9/4/2012	NDOC	2
9/5/2012	NDOC	15
9/6/2012	NDOC	3
9/13/2012	NDOC	16
9/17/2012	NDOC	14
10/16/2012	Amazon	10
10/16/2012	NDOC	7

10/18/2012	Amazon	4
10/18/2012	NDOC	6
10/19/2012	Amazon	8
10/22/2012	NDOC	9
10/23/2012	NDOC	8
10/24/2012	NDOC	10
10/25/2012	NDOC	5
10/29/2012	NDOC	14
10/29/2012	Noah Boyer	7
10/31/2012	NDOC	14
11/6/2012	NDOC	9
11/6/2012	Noah Boyer	5
11/7/2012	Community Living Options	4
11/7/2012	SNJC	2
11/7/2012	Noah Boyer	3
11/8/2012	Noah Boyer	6
11/8/2012	HGH	11
11/8/2012	HGH	15
11/9/2012	Joe Dabrowski	9
11/10/2012	REMSA	9
11/11/2012	Mark Bosco	3
11/13/2012	Majen	7
11/14/2012	Majen	9
11/14/2012	Majen	2
11/18/2012	EMS CES 911 Training Site	1
11/19/2012	Eagle Valley	3

11/20/2012	Majen	3
11/24/2012	National Career Skills Institute	6
11/27/2012	Jennifer Kraushaar	15
11/27/2012	Jennifer Kraushaar	8
11/28/2012	Community Living Options	2
11/28/2012	Majen	3
11/29/2012	Majen	9
11/29/2012	Jennifer Kraushaar	8
11/29/2012	Brian Markowski	4
11/29/2012	Edward Watts	3
11/30/2012	Jennifer Kraushaar	18
11/30/2012	Edward Watts	4

Heart Saver First Aid

Date	Course Location	Students
9/20/2012	REMSA	1
9/28/2012	SNJC	6
11/5/2012	EMS CES 911 Training Site	1
11/7/2012	Majen	1
11/7/2012	Community Living Options	1
11/8/2012	WCSD	2
11/13/2012	EMS CES 911 Training Site	1
11/14/2012	SNJC	6
11/15/2012	REMSA	2
11/15/2012	REMSA	2
11/16/2012	CCNN	14

11/20/2012	WCSD	2
11/29/2012	Milan	18

Heart Saver Pediatric CPR/First Aid

Date	Course Location	Students
10/29/2012	InterTribal Council-REMSA	29
11/3/2012	REMSA	6
11/8/2012	Tahoe Forest Hospital	9
11/17/2012	Jennifer Kraushaar	7
11/24/2012	Jennifer Kraushaar	5

International Trauma Life Support Recert

Date	Course Location	Students
11/21/2012	REMSA	12

International Trauma Life Support

Date	Course Location	Students
11/9/2012	REMSA	7

Pediatric Advanced Life Support

Date	Course Location	Students
11/4/2012	Nampa Fire Department	1
11/5/2012	HGH	11
11/5/2012	Storey Fire Department	8
11/8/2012	EMS CES 911 Training Site	2
11/19/2012	REMSA	10
11/28/2012	EMS CES 911 Training Site	1

Pediatric Advanced Life Support Recert

Date	Course Location	Students
11/5/2012	Riggs Ambulance	6
11/8/2012	Eastern Plumas Healthcare	1
11/14/2012	EMS CES 911 Training Site	1
11/15/2012	John Mohler & Co	19
11/20/2012	REMSA	1
11/21/2012	East Fork Fire	9

Pediatric Advanced Life Support Instructor

Date	Course Location	Students
9/22/2012	REMSA	1
9/22/2012	REMSA	1
11/6/2012	Riggs Ambulance	6

Pediatric Advanced Life Support Skills

Date	Course Location	Students
11/2/2012	REMSA	1
11/13/2012	REMSA	1
11/16/2012	REMSA	2

Pediatric Emergency Assessment, Recognition & Stabilization

Date	Course Location	Students
11/16/12	John Mohler & Co	6

Ongoing Courses

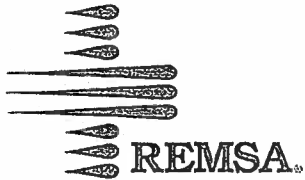
Date	Course Description / Location	Students
1/3/12	REMSA Education- Paramedic	15
8/14/12	REMSA Education - Paramedic	13
10/2/12	REMSA Education- EMT	20
Total Students This Report		1567

5. COMMUNITY RELATIONS:

Community Outreach:

Cribs for Kids

Date	Description	Attending
11/1-2/2012	Immunization Conference in Las Vegas. Was able to network and get name and face out to folks in Las Vegas area. Booth with brochures and talking materials.	1 staff, 200 attendees
11/14/12	Delivered 1250 English and Spanish Brochures to CDMS for Pink Packets	1 Staff,
10/29/12	Carson City-Carson City/Douglas Helath Human Services & WIC Train the Trainer (Carson City, Douglas, and Gardnerville)	1 Staff, 10 attendees



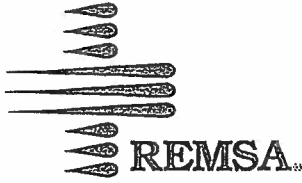
Regional Emergency Medical Services Authority

**GROUND AMBULANCE AND CARE FLIGHT
INQUIRIES
FOR
NOVEMBER 2012**

INQUIRIES

November 2012

There were no inquiries in the month of November.



Regional Emergency Medical Services Authority

**GROUND AMBULANCE
CUSTOMER SERVICE
FOR
NOVEMBER 2012**

GROUND AMBULANCE CUSTOMER COMMENTS NOVEMBER 2012

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
1	Responded.	Don't have so many responders and/or don't have to brief every new responder. It takes to much time. Start moving the patient sooner.	Have a policy that when the number of patients is one, the paramedic(s) do not wonder through the rest of the house like they are casing it for a robbery.
2	EMT was very caring & kind to my mother. Reassured her and talked to her.	Take the shorter route to St. Marys. You took the longest route possible w/ was up and over McCarran.	Very caring & kind to my aging mother
3	Talked to me.	Get the IV right.	Some of your staff could have been a little nicer.
4		Please check with meidcot & Medicare about the bill. Thank you.	
5	Billing is to be sent to VA as I'm 100 percent disabled.		It was very good.
6	Besides being very knowledgeable - they were both excellent at getting my husband relaxed and calm.		
7	The REMSA personnel were very kind & helpful.	The route taken was the longer of two choices. I worked in the area of NNMC and going Highland Ranch to Sparks Blvd to Prater is 8 miles getting to the freeway & over to Sparks & then NNMC was 11.	
8	CARE-		
9	Transferred from rehab to ER		very good & polite
10	All	Nothing	
11	Handled everything	N/A	
12	very well	nothing	
13	asking for med. info, polite, fast response time	so far so good	
14	Explained what they were going to do carefully. Were polite and responded to my humor.		
15	you are priceless	?	
16	Everything	I don't know what it would be.	The people who work on the patient are super-very caringin our experience.
17	Everything. Thank you for being there.		
18	Keeping us calm		Satisfied. Great techs
19	communicated with patient and family		
20	Everything - your personnal were great!	Nothing! :)	Your staff really made me relax & that is hard to do when your hurting?
21	They were very professional & at the same time made me very comfortable both emotionaly & physicaly		
22	Extremely careful & counteous		
23	All services were performed in an effecient manner		
24	Everything	From my point of view how much better is better, you were awesome	My sister talked to dispatch, but all is great. keep it up.
25	Patient Expired		
26			Ambulance crew helpful & friendly, kept me informed at all times
27	Everything (Great)	You did Great!!	Everything - Every one was "Great" to me you have a great staff. Have great day Thank you for sending your people to help me.
28	Everything was great	keep on keeping on	
29	got there quickly-		

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
30	Very informative and competent		
31	Driver was good		
32			Everything went smoothly
33	Professional, communicated well	Nothing	Thank you
34	prompt polite professional		
35	This was the third time you saved my wife's life. I can not say anymore than this	Saving my wife. Howe better than you and your company be. Thank you	No comment needed - and Thank you again
36	Everything	Nothing	
37	The paramedic called me immediately to inform me of my son's accident. He was very helpful and kept me calm. He gave me the information I needed very effectively.		My son says that they were very nice to him and cared for him extremely well. Thank you!
38	Did what you could to make our baby safe & secure. And let us say good-bye as she went to Vegas.	I can't think of anything	
39	The service was excellent and professional		Excellent
40	Fast response-understanding-professional	I can't imagine better service!	Your team is the nicest, professional team we've ever see, you should all be PROUD!
41	crew was very informative		crew made my ride as comfortable as possible
42	Expect for emergency itself- staff was extremely wise, prepared.	Keep it up!	
43	Everything possible	I live in NY and do not plan on any other use	Everyone was friendly-professional and helped me relax. Excellent service!
44	All	All went well	
45	Communicate and kept me calm		Excellent
46	Your crew was excellent. I can't say enough good about them.	I can't think of anything.	Remsa is excellent.
47	very well		
48	He was very informative and explained what was going on - great comfort		
49	Everything - Promptness & caring	continue doing same	
50	tened to patient very efficiently		Did a good job and wer prompt with response
51	Very impressed w/Remsa personal. Their demeanor was entirely appropaiate & appreciated	Keep up the good work	
52	prompt professional. Did what we needed. tried not to hurt or frighten art.	Can't think of anything.	
53	Everything		
54	The ambulance team were both very persoanble and professional. Upon arrival at NO. Nv Med. Cntr they stayed and made sure I was ok and asked if I needed anything. (They didn't just "dump & run" and leave like the others have done in the past.)		
55	Please forgive me for taking so long to get this back to you. My mom is 93 and your staff was very caring and patient with her. They were knowledgeable and professional in their assessment and care at her needs.		Thank you to all of you!
56	This is the first time being in an emergency situation, so everything went well.	well, to be the first time everything went perfect.	
57	Made me feel very comforable they were very good with communication and explainingwhat was going on	I can't think of anything else- your staff couldn't have done better	
58	Kept me medicated throughout the trip	nothing	
59	Everything		

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
60	everything		
61	Very good		
62	pain mgmt	get a longer board for back injuries!	
63	arrived fast - administeted meds fast - arrived ER fast but safe.	Stay alert and keep up good work.	
64	Everything		
65	They were professional	nothing	Always prompt and professional
66	Everything wad great	Same thing	I have had them before & service is so perfect. They treat me like thier Grandmother - so great.
67	efficient curtious		
68	You listened and advised	?	Thank you
69	They all that was needed	Keep up the good work	Everyone was very helpful and polite
70	You gave me the chance to ask questions and what to possibly expect	Your service has gone beyond help. It gives everyone a fair chance.	They were so kind to me and to my husband.
71	Helpful + nonintrusive	Nothing	
72	Very professional	not much	For an ambulance service, you guys were similar to our "Medic 2" in Wa state.
73	Everything- crew was great & gave me the feeling I was in a safe place.	stay the same	Used Remsa several times & each okay however did have to walk to street as they didn't seem to want to drive to door
74	Saved my life	Keep up the good work	
75	No barf bags in vehicle men ok	dont come	
76	REMSA did a great job. As always, our 15 year old daughter was the pt and your team treated he very well, encourage, and supported her until I arrived at the ER		GREAT SERVICE - Thank goodness for Silver Savor!
77			Very satisfied
78	Answered all questions	keep up the good work	Keep up the good work
79	Very courteous and professional, listen well	Everything was good	
80	Fast arrival, ekg done, code 3 to hospital	EMT's were fantastic- saved my life	Thank you
81	As always - very good and concerned!		
82	Made me comfortable, explained what he was doing - most important was respectable of an elder lady's dignity	You couldn't do more - Thank you!	I understand the workers don't get very high pay- they are saving lives! They should get a wage to match a fireman.
83	Pick up was quick & very kind and efficent		
84	Everything	Keep up the good work	above and beyond
85	Got me ther fast	?	
86	Answered all questions	keep up the good work	keep up the good work
87			This call was for the purpose of transporting Pt, an Alzheimer's Victim, from The Arbors,(an alzheimer's care facility where she is permanently in residence) to Renown Medical Center, ER. The saff of the Arbors ordered this service and accompanied the patient. This questionnaire should be readdressed to the Arbors for response.
88	driver ok	?	
89	Took total control and kept patient safe		
90	I met them at the hospital & they were awesome! They explained what was going on & how it happen.	Everything was perfect.	My son's twin was aloud to ride along as he was very scared for his brohter & that was such a relief for both him & myself.
91	Getting to our home fast - Evaluating my husband in a calming manor.		

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
92	Crew was very professional,empathetic,helped leep me calm and kept me informed of what was going to happen		
93	Everything	Your excellent	That you and God bless you
94			Transporters were polite and caring - Thank you for the great care.
95	My first experience — Everything was fine. Very considerate personel.		
96	Transport to ER		
97	Took stock of patient's situation and quickly administered IV which appread to be what was needed.	Nothing!	Liked how dispatcher stayed on the line until Remsa arrived. Remsa crew quietly and efficiently did what needed to be done.
98	Everyone and was helpful		Everything was fine
99	Very considerate & caring.		Very prompt,made my wife feel comfortable and that I was in good hands.
100	You allowed me to ride in the ambulance. Your driver assured me & helped me to stay calm.	Nothing	Your personal were wonderful, I credit you with helping to save my husband's life.
101	Staff called family member to inform that mom was going to the hospital-Thank you!		
102	Everything	Nothing	The care was very good.
103	Your company was very professional (super)		
104	Everything-Very wonderful		Everyone was great. Very friendly,helpful,understanding. As Edith's daughter I am very pleased with the care they they gave to my mom. and want to say a big Thank You for your help
105	Everything-Very wonderful		Everyone was great. Very friendly,helpful,understanding. As Edith's daughter I am very pleased with the care they they gave to my mom. and want to say a big Thank You for your help
106	Everything		all excellent
107	Transported patient carefully, taking special care with her hips.	N/A	
108	Friendly,easy manner. Kept patient calm & family informed of what they were doing	Keep doing this well	
109	You responded quickly when i needed you. You listened, explained things, and were compassionate and caring.	Have heat in the ambulance	I am a stage 4 cancer patient and have used your services quite a bit all ready. I feel cinfident that you will servie me well in the future.
110	The REMSA staff are always the greatest people who is working very hard @ very tuff job for all people in the community.		Thanky you so much for bottom of our heart.
111	Dispatch was very helpful in my remaining calm & asuring help was on the way. Responders were excellent kept me informed of what they were doing to help my husband. Thank you very much.		
112	Made me comfortable This was my first ambulance call- Both Remsa personal were very comforting for me	was ok!	
113	get there fast & help save my husband life.	nothing	
114	The team i got was the best. The was the 2nd time i had to use Remsa. Both time great	Nothing they are the best	
115	Impressed with the knowledge of person on the phone to walk me thru seizure		Remsa was fast to put heart monitor on my mom- she had another seizure recorded on machine

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
116			The service was outstanding. Both Remsa members were very professional
117	The instructions were very clear		
118		Nothing better	Excellent
119	all went well		
120	You did great job. thanks		
121	Thanks for your help. You did good job.		
122	Everything		
123	your personal were just great they took care of all our needs right then and their	just stay as you are-	great crew-
124	Every thing was don't really good	nothing	Very good.
125	Your EMT's were very competent and reassuring. Made me feel well taken care of & safe. Thank you		The casino spoke to dispatcher/no billing staff contact.
126	The personal was very friendly, and very helpful. The Personal & crew tool excellent care of me.	You don't need to change a thing	Everyone was very polite & i personally thanked the crew
127	Everything		
128	Thanks for transporting Pt - we appreciate your help.		
129	Thank you for saving my wifes life	We live in Oregon Thanks -	Your staff was great very helpful and polite
130	They took very good care		
131	excellent care as usual. Very considerate to me and my family		
132	Everything The dispatch was on phone until the emts got here The service I ever had	not at thing	The care and staff were the best. I had service in Las Vegas and Pahrum and ur servie to me was 100% better Thank you
133	Everything		
134	Everything. Thank s to all of the staff at saint marys! God blessing to all of you.		Please forgive me. "dam old age" Can't write or print anymore.
135	Explanation of the process - help in the transport process.	Can't think of a thing	Generally the service was professional and helpful.
136	care & use in transport		
137	great. Thank you		
138	great everyone was so nice to my husband and me	nothing - your great	
139	came to my help	stay the same	
140	everything		
141	Your people were very kind & very concerned about the comfort of my son who fell & broke his hip & also has brain cancer! Thank you!		
142			Excellent
143	Excellent!	Can't think of anything	
144	Arrived immediately and because of that probably saved my life. Thank you!		Care and service are exemproly.
145	very		
146	quick to get here - knew exactly what to do		very pleased Thanks
147	Took me to the hospital	No problem	
148	prompt, & curtsies service, very polite	you guys were great	you guys were very professional and polite
149	Advisement of proper hospital		
150	very helpful, kind personal		

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
151	Very kind caring people who assisted us. Thank you for all you do.		
152	everything!!!		
153	Very Nice & caring		Thank you for everything
154	What I remember they were very kind	Nothing they were fine	
155	The Response was within 2mins. Everything!!!		
156	Everything	you could not find another place like yours	Everything and every body was so good to be true
157	Everything was well handled	Nothing that I'm aware of	Very good service
158	Great staff	Same	
159	Everything	I hope I never have to have your service again	
160	Everything		
161	Real kindly when ask a question	same service	Great
162		The crew was good	
163	Kept me calm under stress	Drive Faster	
164			The REMSA worker didn't give the nurse in ER bloodcount which was really low. We told them she was a diabetic, she (patient) could went into a comma.
165			Crew did not dispense pain meds before moving me. On past occasions crew always dispensed pain meds. I was in terrible pain all the way to the hospital.
166	They kept talking with me so I wasn't thinking about the fall.	Don't charge so much. Please send info on your insurance program to help with costs.	Great they asked what hospital I wanted to go to.
167	Great service.	A bottle of valium disappeared and we can't find a pillow.	
168	Everything.	When entering apartment complex @ daytime you should go to the office first. It helps to find the unit faster.	
169	Showed Up.	Will avoid REMA in future.	Avoid repeating questions and unwelcome political comments when patient is in so much pain. VERY UNPROFESSIONAL. Male attendant's political comments should be kept to himself.
170			The driver was sick. She should not have been working with sick people.
171	Arrived quick after call, 10 min or less.	Lost one of my slippers somewhere from ambulance to emergency room.	The care and service was excellent, they were very helpful.
172	REMSA & fire work good together. They were very good. I felt very secure.	Just keep doing what you are train to do.	Pls send me the family policy for REMSA.
173	overall operation		
174	Great		
175	Yes the staff was wonderful & took very good care of me.		
176	they treated me as if i had a heart attack, which was good.		
177	Care & Response	nothing	
178	Responded to my medical emergency & trans me to the VA. Hospital.	You are already doing a GREAT Job and I do not know how you could improve your services.	
179	Made me feel comfortable	N/A	N/A
180	everything		

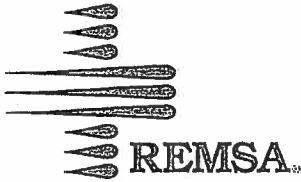
	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
181			I wanted to go to st mary's but they were not accepting any at the ER so I was transfer to Renown ER
182	Everything	Maybe pain killer	
183	excellent care- Thank You.		
184		Everything! Efficient, Polite, Very helpful in every way.	
185	They did their job very well. I was very satisfied, they were very kind & did their job very well	Nothing	They did their job very well and I was very satisfied
186	Arrived early, took info on patient in a timing matter	no	good job
187	Every thing was done very well		
188	Passing & Caring	-	Very pleasant staff all times
189	the handling of the emergency situation was done very well and professional	The service was excellent	
190	Kindness		
191	Excellent		
192	You're people listen to the patient. They did a neck IV line w/no problems or 10-12 bruises from poking	Keep up standard of excellence you have. I could easily die w/o your services	The best 20 minutes of about 36 hours!
193	Everything was done fast & professional. Thank you		
194	Very polite are patinet toward myself	you are doing very well already	thank you for all that you've done for me
195	Your staff was great.	I can't think of anything they could do better.	Remsa is the only time either of us ever used in our 85 and 88 yyears and I can't imagine any other service being better.
196	Keeping me calm and very informative	Thank the crew for me!	Your professional is second to none!
197	Everything		
198	The care provided answered all questions completely and politely. I am pleased with the care provided.		
199	they were very comforting	N/A	
200	nice people- arrive immiditly - very helpful		
201	Everything they could		
202	They were very careful in getting me on the gurney	Can't think of anything	Wonderful service
203	prompt & knowledgable	went great	
204	kept talking to me.		
205	everything	not much	they did everything right
206	As far as I was concerned all was professional and well	N/A	
207	Got me to Renown Hospital	?	
208	(Named Crew) transported me and I wanted to take the time to tell you what an excellent job he did. Great service- Very caring & explained everything that was going on during transport.	N/A	
209	the paramedics were great. Very happy w/ your service.		
210	Got me to the hospital quickly		Thank the crew was very helpful and caring
211	Everything. No complaints	warmer blankets	
212	Covered all bases very well.		Received prompt, caring, great service.

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
213	Overall care was good	NA	Service was good
214		You are wonderful!	
215	Everything, Kind - gental	Same	I am missing my "Do not resuscitate" sign that was on our apparent door
216	Crew on this call knew what to do in my case. I feel they saved me	Always be there with there pro. care that I got. Thank you	
217	recommend action	Nothing	Convinced me to go to hosp. I prob would not have gone & had reoccurring problem.
218	cheeked blood sugar	send a billing for next year	
219	got patient to Renown South Meadows in a timely way.		passed out, suffered diabetic shock, lost conscious. (low blood sugar) Improper/inadequate info regarding location of my car- could not find car after release from hospital.
220	Everyone seemed to know what they were doing and were very efficient.	I don't know!	
221	It was a very sad day, don't really remember,but I know everyone was nice and helpful.		
222	The team that responded to my moth was excellent,very polite and concerned for my mom's helped with her and her pain.	nothing they were everything anyone could ask for	Your service that you provided was excellent, don't change a thing.
223	All went very well your people were polite-Thanks		
224	Professional and careful transport	They did well	
225	you always do		
226	Everything - Thanks		
227	Did well. Fast & helpful		
228	Quick respond to the victim! Doing great job and professionalism.	Keep up the good work always and active response to the victims.	very good, doing professional job
229	You arrived quickly,assessed the situation & transported to the ER quickly.	Nothing-everything was handled great	
230	you do everything amazingly well always; I can only highly praise everyone at Remsa. All whom I've (me) dealt with in the past are well-trained, professional, courteous, always helpful	I can't see how you can improve on perfection. Blessings to all & Thank You.	
231	Attentative, concerned help during a painful situation	Keep up what you are doing!	Excellent employees!
232	Caring and compassionate sevice	from out of the area event was emergency one	
233	Told me what they were doing and why	nothing	
234	yes- and you took the correct route this time!	Nothing	Everything just great!
235	Everything		
236	Their at house within minutes on way to hospital very comfortably		
237	They kept us informed what was going on, very polite and business	all was great.	
238	very well		
239	Everyone was absolutely top notch. Very professional. I felt I was in good hands.	The ride to the plane was rough probably of the special gurney	Your standard of core is very high. Your crew has my gratitude. Many thanks to everyone.
240	Communication w/ patient	Unknown	TLC & service rate high marks
241	Very kind and helpful on & off. very professional.	at this time nothing	I was treated with respect and kindness
242	caring, courteous, gentle		

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
243	Everything was excellent. They pulled up way before I hung up and made me feel & know I was in good hands.	Your personal did everything & beyond better.	They were very professional & caring. Also my I.D. was accidentally brought with them. When I called your business to ask about it I was told that they would drop it off to me. This was very very nice. Because I don't drive & made everything with your company & employees a very good experience. Please make sure you find out who the driver was that day so they will get the credit they deserve & also the gentlemen who brought my I.D.
244	Explained everything being done and what options I had during the evaluation of my condition		The crew was superb. They helped my daughter calm herself while i was receiving care.
245	Remsa is the best!!		
246	Took very good care of me!!!		
247	Responded quickly	Keep up the good work.	
248	Took care of Marlene Teixeira	Nothing	
249	Stable & transport		Thank you so much
250	Everything	Keep up the good work.	No complaints
251	all		
252	Came right away, treated my mom w/ great care & respect.		Thank you!
253	Everything, even more like sympathetic, friendly, kindly, etc	Nothing	Congratulation and Thank you. God Bless you all
254	Put in an IV with very little pain		
255	Got me to Renown quickly & administered to my needs in the most professional manner.		
256	The paramedics were fantastic in helping get my mom to the hospital and very understanding of my dad's difficulty in hearing.		
257	Everything went smoothly-they did everything well from start to finish.		Very impressed with their professionalism and friendliness.
258			Very professional service
259	Got there fast, were efficient, professional & friendly		
260	I was having a TIA stroke Remsa staff were professional and with a sense of humor which made me feel at ease		Care and service 100%
261	Did very good also very helpful		
262	very good		
263	Everyone was very professional	I think that the Remsa staff couldn't get any better.	I had received great care, never had a bad experience.
264	My mother is elderly w/ dementia having seizures, they were very comforting and gentle		
265	Comfort, confident in their abilities	Don't really know	Overall-Great
266	Everything		
267	The dispatcher & all personnel were very helpful, reassuring, & confident	Many thanks to REMSA for your help!	
268	My daughter (17yr) was in a car accident and the paramedics were very kind and knowledgeable.		
269	Transported from airport to St. Marys was smooth!	Nothing	Everyone worked well together
270	Thank you for your awesome service.		

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
271	Yes-everything well-everyone that was from Remsa ambulance was very thoughtful and kind.	nothing	Thank you for their kind help.
272	Everyone was kind and treated me very gently. They kept me very well informed on what they were going to be doing to me.		
273	The care was excellent & the crew members were very polite & courteous	Nothing	Very caring,professional service- Thank you!
274	Everything		
275	communicated with me and family	Keep up the outstanding work	your personal were right on and went up and beyond the call of duty to help me and communicated with my wife and daughter. Thank you kindly
276	Took care of my mom with care & compassion		
277	Kept me very calm.	Nothing	Very good
278	everything		
279	Got me stabilized & transported to hospital.		
280	All the above	Stay the way you are!	
281	Crew was very reassuring,skilled, efficient and kind.	Could not expect anything better than what I received.	Thank You!
282	Very friendly!		
283	all		
284	everything and very polite and delightful	keep up the excellent help	
285	He, was wonderful, calm, smiled help my hand & made me relax	Have more people like him!	Very good you were here in 5 minutes. Great!
286	Everything!	Nothing!	They were all outstanding!
287	Everything	N/A	They were fast, efficient, and very caring!
288	They arrived in a timely manner. EMTs were friendly.	The EMT's poked about 6 holes in my hand and more but still didn't provide an IV, billing staff forgot I was still in the hospital	
289	They met the airplane (Sierra Life Flight) and got me to the hospital without any delay.	I was very very critical and most interaction was done w/ the flight team.	Thank You!
290			The service was unnecessary. I transported to the VA could extra point in a wheelchair. The VA has a number of vans (shuttle vans) equipped to transport wheelchairs. The VA had agreed to pay for my Renown stay. I am on SS with very limited income. My return trip from Renown to the Va was by cab with a total cost of \$7.00. Why were you called?
291	All service was excellent	Keep doing the same	
292	Prompt, courteous, service	Nothing	Always excellent service
293	Everything		Outstanding
294	Everyone was very kind		
295			Patient was transfer from airport to Renown and sedated - don't know answers to above. Didn't talk to crew or billing staff.
296	Very polite & helpful	I was not there	
297	Everything necessary. The crew was very professional.	I don't know how they could be improved	
298	Prompt caring service		
299	Calmed me down	Keep a good attitude	
300	The personel in the ambulance were very sweet and courteous.	Nothing, just keep it going	Everyone were excellent!!

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
301	Everything		
302	We could not think of anything but good		
303	arrival time prompt, excellent communications with elderly patient	continue excellent service	
304			Everything was good keep up the good work
305	dispatch said to take aspirin-all staff arrived to quickly & were very kind & caring & answered all my questions.		
306	Everything was done well I had fallen & it knocked me out, I came to & fuzzy but the guys was good thank you.		good job
307	Everything the 2 men who came out was very nice & polite, respectable	Be there hopefully next time but honestly I wont need you again but not likely, Be the same.	I don't believe they could of done a better job. Thank you, I thank God we have good people to help us when needed.
308	Everything		
309	In everything	Your people were 100% in everything.	
310	Everything was done perfectly	Did fine and kept me aware of everything being done.	They stayed in touch in emergency until the Dr. & nurses were there.
311	I was going through anxiety and was realy scared. there was someone telling me to kept breathing.	Maybe explain more in detail what they were doing.	I know there job is to take care of me. I live in a apartment. Now i have coners amnd sliding door to be fixed and I will be charged to fixs
312	Responded promptly, polite, competent		Excellent
313	Very comforting to my two children (agaes 0&8) they were very scared.	Nothing	
314	everything		
315	very good treatment		
316	Very good treatment		
317	Work w/ family		
318	Everything I have no complaintses at all		
319	Care	Keep Caring	Your service was great
320	everything	not a thing	
321	very	nothing	none
322	everything		
323	Provide prompt and caring service	Nothing	Excellent service
324	yes		
325	Everything		



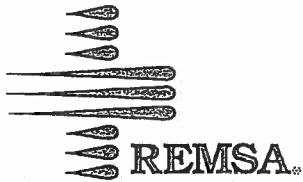
Regional Emergency Medical Services Authority

**CARE FLIGHT
CUSTOMER SERVICE
FOR
NOVEMBER 2012**



CARE FLIGHT CUSTOMER COMMENTS NOVEMBER 2012

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
1			If this happens again maybe I should get a yearly subscription!
2		Everything and everyone was perfect.	
3	The staff and crew was great. Put worried parents at ease knowing Montana was in the best care.		Excellent job.
4	Quick response	Excellent job, don't know what you could have done better.	
5	Nothing	Save a life, don't let them die!!	My little brother is dead, please leave us alone!!!
6	Before we leave in Barton, I was really very nervous because I thought it was a bouncy flight, but the pilot did it very smoothly. I don't really feel anything when we go up. Pilot is really good. Good job. Thanks alot.		Excellent.
7	Everything happened so quickly and efficiently. I had no time to become concerned.		I never spoke to any billing staff. Contact me if needed, his wife. Ed was well taken care of by all of you. He had suffered a severe stroke and passed away on 7 November. Thank you for your care.
8	Everything was just fine. I have no complaints.		
9	The knowledge and compassion during the stressful situation was superb.		When I was in ICU with Steve the flight crew came in and checked on his progress. I thanked the crew but I can't remember their names. I am glad they were there that day!
10			
11	Everything very friendly and professional.	Can't think of a thing.	
12	Everything	Cant think of a thing. How do you improve on perfection?	



Regional Emergency Medical Services Authority

REMSA
PUBLIC RELATIONS REPORT
FOR
NOVEMBER 2012

ER RECEIVES AN ARTISTIC 'THANK YOU'

It's been almost a year since the Caughlin Ranch Fire raged through Reno, burning dozens of homes and forcing the evacuation of thousands of residents.

To honor and thank medical personnel, firefighters, law enforcement officers and volunteers who helped save homes and lives during that November 2011 wildfire, a group of community members contributed art to blank canvases during a "Community Gratitude" event later that year.

Now those canvases have been presented to the organizations that stepped up to offer assistance during the fire -- one of which is Renown Regional Medical Center.

Jeff Stout, MSN, RN, NEA-BC, Chief Nursing Officer, Renown Regional Medical Center, said the hospital was "lucky enough to receive two pieces of the thank-you art." Stout decided the paintings should hang in Regional's Emergency Medical Services entrance.

"This is our main EMS entrance where REMSA comes in and out," Stout said. "So our community's first responders



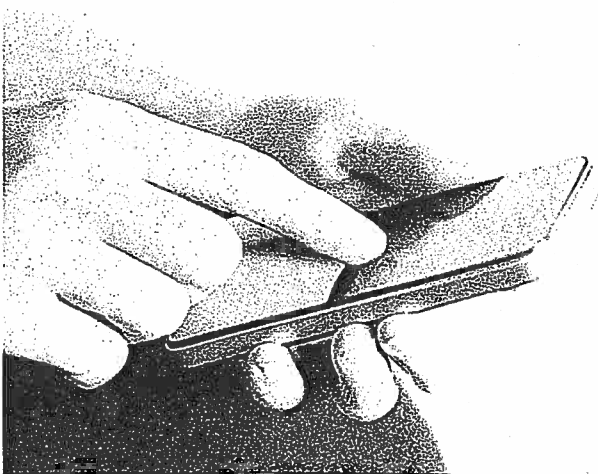
Jeff Stout, MSN, RN, NEA-BC, Chief Nursing Officer at Renown Regional Medical Center; Sylvia Burgess, RN; and Lisa Perino, volunteer, stand with the community-created artwork that graces the walls of the Emergency Medical Services entrance.

will see it, and our Emergency Room team can enjoy it as well."

Emergency Room staff agreed that Stout's choice of placement is a good one. The walls of this breezeway were previously blank.

"They're so beautiful," said Jennifer Dado, RN, Emergency Room Supervisor,

Renown Regional. "They're bright and they make you feel good. When I realized what they were for, I thought, 'That is really super nice, that someone would do that.' It just brightens your day."



NEW INSURANCE E CARD: IT'S JUST A TOUCH AWAY

For all those who dig through wallets, purses or pockets to locate their insurance ID cards, Hometown Health now offers an alternative – the Hometown Health eCard.

With the region's first Electronic Member ID Card, Hometown Health members can access their secure eCard from their smartphones and view, fax or email a copy of the card directly to a healthcare provider's office.

"Hometown Health members now have on-the-go access to

their insurance information, such as co-pay amounts," said Ty Windfeldt, vice president of Hometown Health. "This leading-edge technology provides our members with added convenience not currently available by others in our market."

Hometown Health Members can download this free app for iPhones, iPads and Android smartphones by visiting their mobile phones' app store and searching for "Hometown Health eCard." For additional information, visit hometownhealth.com/ecard.

From: "Kenneston, Aaron" <AKenneston@washoecounty.us>
Date: December 3, 2012, 3:05:29 PM PST
To: "Kenneston, Aaron" <AKenneston@washoecounty.us>
Subject: Winter Flood Watch 2012 Lessons-Learned

Hi All,

First, a big thank-you to the multitude of jurisdictions, agencies, public safety officials, first responders, regional partners, and volunteers who "stepped-up" in the face of a predicted flood event. It is interesting that as we prepared for the flood waters we had a significant power outage in Incline Village, loss of some mountaintop repeaters, and serious wind damage on Pyramid Lake Paiute Tribe buildings. As we scrambled to respond to downed trees, isolated urban and rural flooding, and citizen reports of potential issues- everyone performed magnificently.

I was especially proud the many times I heard senior officials, the media, and the public praise the efforts of our many fine personnel in the region. The overwhelming comments that I heard were that the region did a superb job of collaborating and responding to an emergency situation. We've always said that the beauty of having a Regional Operations Center (REOC) is that the two cities and the county could "flex" resources. This incident was a classic situation with the City of Sparks positioned forward at the probable critical point, and the City of Reno and Washoe County coordinating activities and support from the REOC. Again, my belief is that the City of Sparks, the City of Reno, Washoe County, and the Regional Partners have good reason to be proud of their performance.

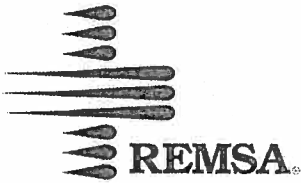
That said, there are always things that we can do better next time. The danger of performing so smoothly is that we may overlook some of the issues we encountered. I know that many jurisdictions and agencies will produce their own Lessons Learned reports. I hope to get copies of those documents for my files and to integrate them into the training schedule for the REOC next year.

So please take a moment and reflect on "*what went right,*" "*what could have gone better,*" and "*what we should do differently next time.*" Please feel free to e-mail me with your comments so that I can compile an After Action Review (AAR) to complete the record, file in WebEOC, and create an action plan for REOC training activities this coming year.

Thanks!

Aaron R. Kenneston, CEM

Washoe County Office of Emergency Management and Homeland Security



Regional Emergency Medical Services Authority

REMSA

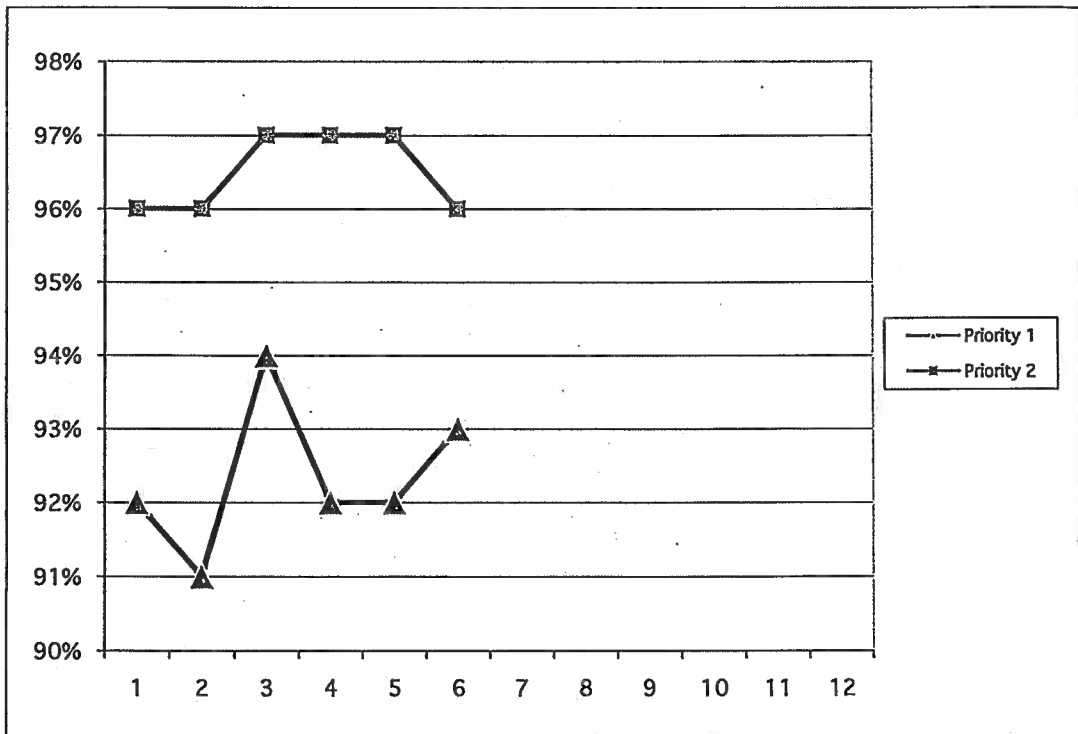
OPERATIONS REPORTS

FOR

DECEMBER 2012

Fiscal 2013

Month	Avg. Response Time	Avg. Travel Time	Priority 1	Priority 2
Jul. 2012	5 mins. 46 secs.	4 mins. 48 secs.	92%	96%
Aug.	5 mins. 59 secs.	4 mins. 56 secs.	91%	96%
Sept.	5 mins. 46 secs.	4 mins. 48 secs.	94%	97%
Oct.	5 mins. 34 secs.	4 mins. 40 secs.	92%	97%
Nov.	5 mins. 38 secs.	4 mins. 42 secs.	92%	97%
Dec.	5 mins. 56 secs.	4 mins. 58 secs.	93%	96%
Jan. 2013				
Feb.				
Mar.				
Apr.				
May				
June 2013				



Care Flight

Month	#Patients	Gross Sales	Avg. Bill	YTD/Avg.
Jul-12	10	\$69,730	\$6,973	\$6,973
Aug.	17	\$140,090	\$8,241	\$7,771
Sept.	12	\$95,505	\$7,959	\$7,829
Oct.	3	\$20,775	\$6,925	\$7,764
Nov.	11	\$81,919	\$7,447	\$7,698
Dec.	3	\$19,774	\$6,591	\$7,639
Jan. 2013			\$0	\$7,639
Feb.			\$0	\$7,639
Mar.			\$0	\$7,639
Apr.			\$0	\$7,639
May			\$0	\$7,639
June			\$0	\$7,639
Totals	56	\$427,793	\$7,639	\$7,639

Adjusted Allowed Average Bill - \$7,393.00

REMSA Ground

Month	#Patients	Gross Sales	Avg. Bill	YTD/Avg.
Jul-12	3222	\$3,256,558	\$1,011	\$1,011
Aug.	3305	\$3,381,910	\$1,023	\$1,017
Sept.	3088	\$3,190,456	\$1,033	\$1,022
Oct.	3234	\$3,322,716	\$1,027	\$1,024
Nov.	3015	\$3,094,421	\$1,026	\$1,024
Dec.	3164	\$3,269,747	\$1,033	\$1,026
Jan. 2013			\$0	\$1,026
Feb.			\$0	\$1,026
Mar.			\$0	\$1,026
Apr.			\$0	\$1,026
May			\$0	\$1,026
June			\$0	\$1,026
Totals	19028	\$19,515,808	\$1,026	\$1,026

Allowed ground avg bill - \$1,028.00



Regional Emergency Medical Services Authority

**CARE FLIGHT
OPERATIONS REPORT
FOR
DECEMBER 2012**



**CARE FLIGHT OPERATIONS REPORT
DECEMBER 2012
WASHOE COUNTY**

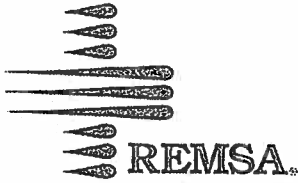
- ❖ **In Town Transfer:**
0 Ground ITTs were completed
- ❖ **Outreach, Education, & Marketing:**
➤ 2 Community Education & Public Events

12/8/12	REMSA Santa Party	Flight Staff
12/14/12	Food Drive drop at GSR	Flight Staff

❖ **Statistics**

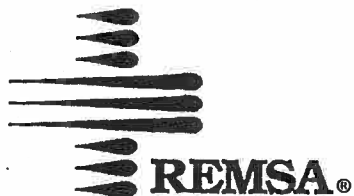
Washoe County Flights

	# patients
Total Flights:	4
Total Patients	4
Expired on Scene	0
Refused Transport (AMA)	1
Scene Flights	4
Hospital Transports	0
Cardiac	2
Trauma	2
Medical	0
Pulmonary	0
High Risk OB	0
Neuro	0
Pediatrics	0
Newborn	0
Full Arrest	0
Surgical	0
Total	4



Regional Emergency Medical Services Authority

REMSA
GROUND OPERATIONS REPORT
FOR
DECEMBER 2012



GROUND AMBULANCE OPERATIONS REPORT

December 2012

1. OVERALL STATISTICS:

Total Number Of System Responses	5215
Total Number Of Responses In Which No Transport Resulted	2058
Total Number Of System Transports	3157

2. CALL CLASSIFICATION REPORT:

Cardiopulmonary Arrests	2%
Medical	44%
OB	1%
Psychiatric/Behavioral	4%
Transfers	19%
Trauma	26%
Trauma – MVA	9%
Trauma – Non MVA	17%
Unknown/Other	4%
Total Number of System Responses	100%

3. MEDICAL DIRECTOR'S REPORT:

The Clinical Director reviewed:

- 100% Full Arrest Ground Charts
- 100% Pediatric ALS and BLS Ground Charts
- 100% All Ground Intubations

Review of the following patient care records (PCR) for accurate and complete documentation and appropriate use of protocol:

- 100% of cardiopulmonary arrests
- 100% of pediatric patients both ALS and BLS transport and non-transport patients
- 100% of advanced airways (outside cardiac arrests)
 - ETCO2 use in cardiac arrests and advanced airway
- 100% of Phase 6 Paramedic and EMT PCRs
- 100% Pain/Sedation Management
- Total of 2698 PCRs

All follow-up deemed necessary resulting from Communication CQI was completed by Chris Barton, EMD, Communications Education and CQI Coordinator

4. EDUCATION AND TRAINING REPORT:

A. Public Education

Advanced Cardiac Life Support

Date	Course Location	Students
12/11/2012	Riggs Amulance	5
12/12/2012	EMS CES 911 Training Site	4
12/22/2012	EMS CES 911 Training Site	6

Advanced Cardiac Life Support Recert

Date	Course Location	Students
12/3/2012	HGH	8
12/4/2012	EMS CES 911 Training Site	1
12/4/2012	REMSA	12
12/9/2012	EMS CES 911 Training Site	1
12/11/2012	EMS CES 911 Training Site	1
12/12/2012	REMSA	7
12/20/2012	EMS CES 911 Training Site	1
12/22/2012	EMS CES 911 Training Site	1
12/31/2012	EMS CES 911 Training Site	2

Advanced Cardiac Life Support Skills

Date	Course Location	Students
12/6/2012	REMSA	1
12/9/2012	St. Mary's Regional Medical Center	1
12/21/2012	REMSA	1

EMPACT

Date	Course Location	Students
12/6/2012	REMSA	15

Bloodborne Pathogen

Date	Course Location	Students
12/11/2012	Career College of Northern Nevada	2
12/20/2012	Career College of Northern Nevada	9

Basic Life Support Instructor

Date	Course Location	Students
12/2/2012	NV Air National Guard - REMSA	5
12/2/2012	REMSA	1

Nevada First Responder

Date	Course Location	Students
12/5/2012	REMSA	6
12/19/2012	REMSA	11

Health Care Provider CPR

Date	Course Location	Students
9/12/2012	Humboldt General Hospital	7
10/18/2012	Nevada Dept. of Corrections	2
11/26/2012	Sandra Burns	1
11/29/2012	REMSA	10
11/29/2012	Silver Legacy - Security Dept.	5

12/1/2012	Riggs Amulance	4
12/2/2012	Airport Fire Department	6
12/5/2012	EMS CES 911 Training Site	8
12/5/2012	REMSA	10
12/5/2012	Sierra Army Depot	8
12/6/2012	SNJC	2
12/6/2012	REMSA	10
12/6/2012	Nevada Dept. of Corrections	6
12/6/2012	Elko BLM	2
12/6/2012	Sierra Army Depot	9
12/6/2012	Silver Legacy - Security Dept.	3
12/7/2012	Silver Lake Volunteer Fire Dept	1
12/7/2012	CCNN	14
12/7/2012	Molly Turner	1
12/7/2012	IS Randi Hunewill	47
12/7/2012	IS Randi Hunewill	21
12/8/2012	REMSA	9
12/9/2012	IS Randi Hunewill	9
12/10/2012	IS Randi Hunewill	45
12/11/2012	REMSA	10
12/11/2012	Sliver Legacy - Security Dept	4
12/12/2012	Noah Boyer	3
12/12/2012	Storey County Fire Department	1
12/12/2012	Nevada Dept. of Corrections	1
12/12/2012	IS Jennifer Kraushaar	5
12/13/2012	EMS CES 911 Training Site	2

12/13/2012	Silver Legacy - Security Dept.	5
12/17/2012	Barrick Goldstrike Mines	7
12/17/2012	Ney Co. Sheriff's	2
12/17/2012	Milan Institute	12
12/17/2012	Nye County EMS	5
12/17/2012	IS Chris Mc Nally	2
12/18/2012	EMS CES 911 Training Site	2
12/18/2012	Ralph Renteria	8
12/18/2012	Sierra Army Depot	5
12/19/2012	Nye Co Sherriff's	1
12/20/2012	LASSEN CPR OFFICE	1
12/20/2012	EMS CES 911 Training Site	4
12/20/2012	REMSA	9
12/23/2012	CPR 1st Aid Training Site	1
12/24/2012	Humboldt General Hospital	2
12/26/2012	EMS CES 911 Training Site	2
12/26/2012	Peter Larsen	1

Health Care Provider, Employee

Date	Course Location	Students
12/3/2012	REMSA	2
12/3/2012	REMSA	1
12/4/2012	REMSA	1
12/10/2012	REMSA	1
12/20/2012	REMSA	1
12/26/2012	REMSA	1

12/27/2012	REMSA	1
12/31/2012	REMSA	2
12/31/2012	REMSA	1

Health Care Provider Recert

Date	Course Location	Students
10/26/2012	REMSA	1
12/1/2012	Tahoe Forest Hospital	1
12/1/2012	Nampa Fire Department	1
12/3/2012	REMSA	7
12/3/2012	REMSA	1
12/5/2012	REMSA	8
12/5/2012	Tahoe Forest Hospital	2
12/7/2012	HGH	11
12/7/2012	HGH	2
12/11/2012	Rosewood Rehabilitation	6
12/12/2012	Riggs Amulance	4
12/13/2012	REMSA	9
12/13/2012	REMSA	8
12/13/2012	Concentra	7
12/14/2012	Tahoe Forest Hospital	1
12/14/2012	IS Alex MacLennan	5
12/15/2012	REMSA	5
12/17/2012	Tahoe Forest Hospital	1
12/17/2012	Tahoe Forest Hospital	1
12/18/2012	REMSA	1
12/18/2012	REMSA	10

12/18/2012	Tahoe Forest Hospital	5
12/18/2012	Tahoe Forest Hospital	1
12/21/2012	REMSA	10
12/21/2012	EMS CES 911 Training Site	1
12/21/2012	Tahoe Forest Hospital	1
12/31/2012	EMS CES 911 Training Site	1

Health Care Provider Skills

Date	Course Location	Students
12/3/2012	Majen	1
12/5/2012	REMSA	1
12/6/2012	Tahoe Pacific Hospital - SM	1
12/6/2012	Majen	1
12/9/2012	Riggs Amulance	1
12/24/2012	REMSA	1
12/3/2012	Majen	1
12/5/2012	REMSA	1
12/6/2012	Tahoe Pacific Hospital - SM	1
12/6/2012	Majen	1
12/9/2012	Riggs Amulance	1
12/24/2012	REMSA	1
12/3/2012	Majen	1
12/5/2012	REMSA	1
12/6/2012	Tahoe Pacific Hospital - SM	1
12/6/2012	Majen	1
12/9/2012	Riggs Amulance	1

12/24/2012	REMSA	1
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Heart Saver CPR/AED

Date	Course Location	Students
11/30/2012	Elko County School District	1
12/3/2012	Washoe County School District	3
12/4/2012	Washoe County School District	2
12/5/2012	WCSD	5
12/5/2012	Erica Krysztof	3
12/6/2012	Elko BLM	2
12/6/2012	WCSD	5
12/7/2012	REMSA	2
12/8/2012	IS Ronald Oliver	4
12/10/2012	Erica Krysztof	3
12/11/2012	Erica Krysztof	1
12/11/2012	MAJEN	1
12/12/2012	Erica Krysztof	2
12/12/2012	REMSA	6
12/12/2012	WCSD	6
12/13/2012	Fairfield Suites - REMSA	7
12/13/2012	IS - Erica Krysztof	4
12/13/2012	Washoe County School District	7
12/15/2012	Dept. Homeland Security	1
12/15/2012	REMSA	9
12/15/2012	Washoe County School District	4
12/17/2012	IS - Erica Krysztof	1
12/17/2012	Washoe County School District	7

12/18/2012	HS CPR AED	6
12/19/2012	IS Susan Phillips	1
12/20/2012	Washoe County School District	5
12/20/2012	IS Randi Hunewill	8

Heart Saver CPR/First Aid

Date	Course Location	Students
12/10/2010	Harley Davidson - REMSA	10
8/21/2012	Nevada Dept. of Corrections	9
9/18/2012	Nevada Dept. of Corrections	32
9/19/2012	Nevada Dept. of Corrections	8
10/22/2012	Nevada Dept. of Corrections	2
11/7/2012	Nevada Dept. of Corrections	7
11/13/2012	Nevada Dept. of Corrections	4
11/14/2012	Nevada Dept. of Corrections	12
11/15/2012	Nevada Dept. of Corrections	12
11/15/2012	Nevada Dept. of Corrections	5
11/19/2012	Sandra Burns	2
11/27/2012	Nevada Dept. of Corrections	5
11/29/2012	Nevada Dept. of Corrections	6
11/29/2012	Nevada Dept. of Corrections	2
12/1/2012	Brian Markowski	6
12/1/2012	Brian Markowski	6
12/3/2012	Brian Markowski	5
12/4/2012	WCSD	5
12/4/2012	Nevada Dept. of Corrections	4

12/5/2012	Majen	4
12/5/2012	MS Carita Inc - REMSA	7
12/7/2012	REMSA	1
12/7/2012	Harley Davidson - REMSA	5
12/8/2012	REMSA	10
12/11/2012	Humboldt General Hospital	24
12/11/2012	Humboldt General Hospital	13
12/12/2012	Susan Phillips	3
12/12/2012	Humboldt General Hospital	10
12/13/2012	Lemons, Grundy & Eisenberg - REMSA	6
12/13/2012	MAJEN	7
12/14/2012	Lemons, Grundy & Eisenberg - REMSA	7
12/14/2012	Humboldt General Hospital	2
12/16/2012	IS - Lawrence Smith	1
12/17/2012	Community Living Options	1
12/18/2012	MAJEN	1
12/19/2012	Sierra Nevada Job Corps	5
12/19/2012	Sierra Nevada Job Corps	5
12/19/2012	IS Susan Phillips	2
12/21/2012	Community Living Options	3
12/26/2012	EMS CES 911 Training Site	2

Heart Saver First Aid

Date	Course Location	Students
11/29/2012	Silver Legacy - Security Dept.	5
12/6/2012	Silver Legacy - Security Dept.	3

12/7/2012	CCNN	14
12/11/2012	Silver Legacy - Security Dept.	4
12/13/2012	REMSA	2
12/13/2012	EMS CES 911 Training Site	1
12/13/2012	Silver Legacy - Security Dept.	5
12/18/2012	Milan Institute	12
12/18/2012	EMS CES 911 Training Site	1

Heart Saver Pediatric CPR/First Aid

Date	Course Location	Students
12/8/2012	Alex MacLennan	8
12/1/2012	REMSA	10

Pediatric Advanced Life Support

Date	Course Location	Students
12/4/2012	EMS CES 911 Training Site	9
12/16/2012	EMS CES 911 Training Site	2
12/11/2012	Humboldt General Hospital	12
12/14/2012	REMSA	5
7/27/2012	Humboldt General Hospital	6

Pediatric Advanced Life Support Recert

Date	Course Location	Students
12/9/2012	EMS CES 911 Training Site	1
12/10/2012	REMSA	13
12/11/2012	EMS CES 911 Training Site	2
12/19/2012	EMS CES 911 Training Site	2

Pediatric Advanced Life Support Skills

Date	Course Location	Students
12/4/2012	REMSA	1
12/5/2012	REMSA	1

Pediatric Emergency Assessment, Recognition & Stabilization

Date	Course Location	Students
12/6/2012	Great Basin College	17

Ongoing Courses

Date	Course Description / Location	Students
1/3/12	REMSA Education- Paramedic	15
8/14/12	REMSA Education - Paramedic	13
10/2/12	REMSA Education- EMT Advanced	24

Total Students This Report	1116
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5. COMMUNITY RELATIONS:

Community Outreach:

Point of Impact

Date	Description	Attending
12/5/12	WIC staff meeting; talk about Point of Impact and Northern Nevada Fitting Station	10 WIC Staff

Safe Kids Washoe County

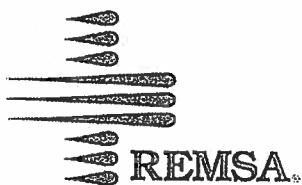
Date	Description	Attending
12/4/12	Esther Bennett Photojournalism Photovoice Project, Walking Field Trip, Sun Valley.	4 volunteers, 7 students
12/4/12	Join Together Northern Nevada monthly coalition meeting, Reno.	1 intern
12/4/12	Give Kids a Boost committee meeting, Sun Valley.	6 volunteers
12/5/12	Safe Kids USA Advisory Council monthly teleconference.	1 staff
12/10/12	Coral Academy of Science Safety Committee meeting, Reno.	3 volunteers
12/11/12	Safe Kids monthly Coalition meeting, Sparks.	12 volunteers
12/11/12	Annual Nevada State Bicycle Pedestrian Conference, Las Vegas. Melissa Krall was presented an award on behalf of Safe Kids Washoe County for Bicycle Advocacy for our summer bike camps.	1 staff
12/12/12	Esther Bennett Photojournalism Photovoice Project, classroom education session, Sun Valley.	3 volunteers, 6 students
12/13/12	Safe Kids Washoe County Board of Directors bi-monthly meeting, REMSA.	1 staff, 5 volunteers
12/13/12	Chronic Disease Coalition quarterly meeting, Reno.	1 volunteer
12/14/12	Coral Academy of Science Pedestrian Safety assembly, Reno.	1 staff, 6 volunteers, 375 students
12/18/12	Truckee Meadows Bicycle Alliance monthly meeting, Reno.	1 volunteer
12/19/12	Immunize Nevada monthly meeting, Reno.	2 staff
12/19/12	Safe Routes to Schools monthly partner meeting, Reno.	1 staff
12/20/12	Maternal Child Health Coalition of Northern Nevada monthly meeting, Reno.	2 staff
12/21/12	Esther Bennett annual holiday program including Fire Safety assembly by Safety Patrol, Sun Valley.	2 volunteers, 7 safety patrol, 550 attendees

Public Relations

Date	Description	Attending
12/13/12	Sparks Police Department annual awards ceremony, Sparks.	1 staff

Meetings

Date	Description	Attending
12/3/12	Washoe County District Health Department Environmental Assessment Call.	1 volunteer
12/3/12	Safe Haven subcommittee teleconference meeting hosted by State of Nevada Health Division.	1 staff
12/4/12	Telephone Meeting with Margarita De Santos of Southern Nevada Health District regarding YouTube Video that is being utilized and implemented at UMC (video gives recognition to C4K) Inquired also about crib cards or magnets. \$\$ all from Healthy Tomorrows Grant awarded to South.	1 staff
12/5/12	Maternal Child and Adolescent Health Strategic Planning Session for Washoe County District Health Department.	1 volunteer
12/6/12	Meeting with Margie with Community Health Alliance regarding paperwork completion.	1 staff
12/7/12	United Way Community Involvement Council annual grant training, Reno.	1 volunteer
12/13/12	Nevada State EMS for Children quarterly teleconference.	1 volunteer
12/17/12	Nevada State EMS for Children teleconference; Nevada Site-Visit Follow-Up Review of Recommendations	1 volunteer



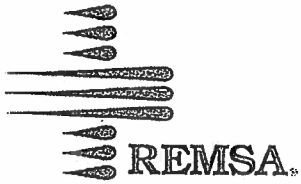
Regional Emergency Medical Services Authority

**GROUND AMBULANCE AND CARE FLIGHT
INQUIRIES
FOR
DECEMBER 2012**

INQUIRIES

December 2012

There were no inquiries in the month of December.



Regional Emergency Medical Services Authority

**GROUND AMBULANCE
CUSTOMER SERVICE
FOR
DECEMBER 2012**

GROUND AMBULANCE CUSTOMER COMMENTS DECEMBER 2012

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
1	Made my mom comfortable, treated her with dignity and respect.	Nothing.	My mom said the medics/EMT's were very professional and kind.
2	They took good care of me.		
3	You could not ask for better service.	Nothing	Thank you!
4	Your staff were professional and kind. They answered all of my questions with kindness and made me comfortable.	I was in your care twice during the last month and each experience was positive.	Thank you for great service and care.
5	They were kind, caring, and helpful which creates a calming atmosphere. They were very intelligent young people.		Keep up the great quality of service!
6	Prompt, helpful. Calmed me down.	I don't know. Seemed fine.	We like the service.
7	Got to me fast.		
8	Was quick. Didn't waste any time.		
9	Everything	Nothing	
10	Very prompt. Right there in about 5 min. Made me feel comfortable	Everything was ok.	They made me feel comfortable, even when lifting and transferring me to another bed.
11	Got me to er quickly	Keep up good work.	
12	They were very professional and they were very kind and helpful and did everything they were supposed to do.	In my opinion, nothing.	I already did.
13	Attend to my immedate pain and transport me to Renown		
14	They 3 young men were caring and so helpful. Thanks for their concern.		
15	Made my mom feel comfortable and treated her with respect.		
16	Thoughtful and caring.	I can't think of anything more they could have done!	I thank you very much!
17	Very professional and easy to speak to.	Hope I never have ocaasion to use your service again.	
18	Everything went great! My husband had a heart attack, he's fine now.	Can't think of anything.	Great! Everyone is always polite and professional.
19	Great!		
20	Everything.		
21	Everything.		
22	Prompt, courteous, efficient	Continue as you are	Very good care.
23	Very helpful, thank you!		
24	Found my location, asked me questions. This was my third REMSA trip and my experiences have all been excellent.	Everything was fine.	
25	Everything	Nothing	Great!
26	Everything	You are perfect	
27	Fast response, thanks. Thoughtful attendents.	Nothing right now. I'm just happy you all were there for me.	
28	Everything was done nicely.	Keep up your good work.	
29	Good work, thank you.		
30	You are perfect		
31	No complaints	Good service!	
32	Everything.		
33	The staff was informative and helpful with my illions	Talk with me through illions	Service was quick and very kind to me.
34	To help out the family by giving us helpful instruction on saving the patient.	Just keep up the good job.	
35	Very polite	Not much	good
36	Communication on a level that was understood.	Keep up the good work.	The crew made me feel better, they cared.
37	Fast, efficient	Nothing I can think of.	
38	Handling of patient*		Excellent service

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
39	The crew was so nice and did everything they could to put me at ease.	I think they did everything they could.	The billing lady was very helpful. I think you all are on top of everything.
40	Very quick service and professional help.	None.	Very kind and considerate people.
41	Your folks were courteous, asked about my well being and constantly asked how I felt.	Nothing.	
42	a+	Nothing, the young gentlemen were great and polite	Every aspect of care was perfect.
43	Very satisfied with service		Very good
44	May I say without hesitation they did a good job in taking care of me.		
45		Get rid of the female that rode along on November 3 or 4. The female on duty was one of the worst paramedics I have ever encountered. I had just got home from surgery when I had to call REMSA - she was yelling in my face - her spit got in my eye and on my lips I was in severe vascular pain in my leg. She tried several times to start an IV and couldn't. I told her to stop wit till I got to St Mary's. Minute later she told me St Mary's would not take me. The other paramedics were great.	
46	Very helpful		
47	Crew very caring.		
48	Very caring and considerate		
49	Everything		Thanks to all the nice people involved.
50	The staff was very patient and helpful in describing my medical condition and the urgency of hospital treatment.	Nothing further could be done. The service was excellent and very professional.	The paramedic was great. He went above and beyond his duties to take care of me.
51	All of the help your personnel gave me. Their concern was so good, made me feel so comfortable.	You did it all. It works.	
52	Concern for patient		
53	Got me to the hospital fast and was very good		
54	You got me to the hospital safely and expiditiously. Thanks!	Make me healthy, wealthy, and wise.	
55	Very prompt, highly professional	Can't think of anything.	
56	Everything. I have always been taken care of with respect and courtesy. They are great.		
57	Very well		
58	They were excellant	Just keep being who you are	
59	Reassured us; made decisions quickly		
60	Gentle, communicated well		
61	Everyting	Nothing	
62	Everything your staff are always nice. What would we do without all of you	Not a thing	Well, you just can't get any better. We have never had bad service.
63	Everything! We are so grateful to your caring and skilled professionals.		
64	Rapid response. Knowledgeable and professional staff.	Nothing really. Excellent service.	Staff was calm and efficient and pleasant.
65	Everything	Nothing, all was great.	
66	Everything		
67	Everything ok	Fold this form so that it fits into the envelope provided.	
68	Everything so far was right	Keep up the good work	
69	Good		
70	Everything		
71	Prompt arrival, concern for problem, very professional.		

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
72	Everything! Very helpful, polite, informative and friendly.	Nothing! We both think you get an excellent rating from us.	Can't say enough good things about our experience.
73	Courteous and efficient transfer from ER South Meadows to Renown main.		
74	The whole episode		Did not receive a bill yet. Service was good.
75	Competent	We sat still in the ambulance a long time. I didn't understand why we weren't moving. One of the EMT's treating me was the driver. I didn't understand until I asked.	
76	Calmed me down		Prompt, efficient, courteous.
77	I have never been dissatisfied with any of the services REMSA has provided. Highly professional!		Exceptional in every way.
78	Everything	Nothing	They were always polite and helpful to both the patient and the family.
79	Keep up the good work.		
80	As always, you were very helpful.		
81	Listened and responded. Great guys. No problems. Couldn't have gone better.	Nothing, just keep it up	Very professional and polite and they listened!
82			The drivers were kind and considerate to both the patient and the family.
83	Access situation. Ask right questions, show concern for injured person, arrived promptly.	You guys/gals are the best! Can't think of a thing at this time. Thank you so much for being there!	Dispatcher kept called on line until REMSA arrived.
84	Everything! Made me as comfortable as possible!	Nothing!	Thanks for all your concerns!
85	They were careful with my broken leg	Keep up the kindness.	
86	Cheerful and pleasant	Nothing, they were perfect and caring.	All to make me comfortable as possible and friendly.
87	All around good service	Nothing	Very pleased.
88	Everything	Nothing, they were great	
89	Most everything	Nohting	
90	Everything was fine.		
91	Response was quick.	Nothing. Everything was quick and questions asked were answered.	Your service was handled professionally and polite!
92	Speed, showed care.	Nothing.	
93	The girl that took control at my house should be punished for being unknowledgable and total uncaring dumber than a box of rocks.	Will take my chance on dieing next time will never call REMSA again. This wicked bitch should be FIRED.	Never again unless new ambulance service comes to town. Didn't have a clue what she was doing then gave me a bunch of crap - TOTAL BITCH.
94	Everything! Thank you	This was the 4th or 5th time we had to use your service and well satisfied each time!	
95	Capable and professional handling of desperate matter and helping to keep all parties calm.		
96	Service was prompt and professional.	Just keep doing what you are doing.	
97	The paramedics were so knowledgeable and they took good care of me. I felt better at once upon their arrival.	Just keep up the good work and the rest will be better.	I was confident that I was in good hands the moment they came.
98	Very friendly, moved slowly and explained each action and what to expect.	keep up the good training.	
99	Prompt arrival, caring treatment, professional.		
100	Quick response, professional, caring	Not sure you can do much better	
101	Timeliness, care in transfer, care indicated toward patient and family.		
102	The ambulance crew was very helpful, nurturing, and very caring.	Continue to provide the same services for everyone that I was able to receive.	Special thanks to the ambulance crew that helped me.
103	Everything was done well	Not a thing	The service was grate

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
104	Do the same	Nothing	
105	Move was smooth and quick.		
106	Stabilized patient, handled me with minimal pain.		
107	you did everything very well.	I can't think of anything. They were great.	
108	Everything	Nothing	Same
109	Safely transported me from Reno VA to Renown		Great service.
110	Everything!		
111	Excellent service	Can't think of a thing.	
112	You did everything excellant	You do good now	you always do excellant work
113	All services satisfactory!		
114		\$40 cash missing from my purse between Peppermill & Renown.	I would like the \$40 deducted from my bill, incident is included in police report.
115	They took very good care of me.		
116	Helped me feel better		
117	Very patient and calm with me.		
118	Great customer service		
119	Everything		
120	Everything		
121	The crew are always ready	Please make bill not too high.	Thank you for your good and accurate service. You saved my life.
122	My husband was going through withdrawals and needed to get to the hospital and he was in a very combative state and your personnel were amazing in getting the job don in a curteous and professional manner. They were true life savers!		
123	Everything.		
124	Everything		
125	The paramedic was very polite and professional. Explained everything and very calm.	Nothing.	
126	Very nice.		
127	Comforted me as my husband was needing to be transported from Plumas Co. CA, to Reno. I was very scared.	Nothing.	My husband was in very bad shape. There were 2 EMT Ladies who were very comforting for me. They reassured me about my husband.
128	Response and transport times excellent.		
129	Took good care of me	Keep up the good work.	
130	Everything		
131	Everything		
132	Everyone was kind and caring.		
133	Everything	Nothing	
134	Everything		
135	Everything	n/a	Always very professional, caring, great folks.
136	Fast and proper response	Keep up the good work	Excellent care.
137	Well organized, followed orders from flight crew, polite and friendly.		
138	Responded quickly and efficiently and professionally.		
139	The medics were great in trying to make me feel better. They were funny and the medic was the best at doing IV's.	Hire more people like them!	The best experience I have had.
140	Professional and courteous	Seemed care was good.	
141	Making sure I was comfortable and safely secured	Keep up the good work.	

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
142	Listen to me and ask questions to clarify. Put in an I.V. in my arm during transport - excellent	Nothing comes to mind.	
143	Got here quickly, efficient		
144	Your personnel was very calm and helpful. They tried to keep me calm and not concentrate on my pain.		
145	Kidnapping a paying customer in hotel.	Instead of forcing me to ambulance, take me to my hotel room to sleep. I had my hotel room key in the wallet you inspected!	
146			Good
147	Coming and helping! Reassuring!	Keep up your good work!	Thank you!
148	On time. The team were very caring that took care of me.		They did a good job in care for me. I'm so happy that we have REMSA to care for people. Thank you.
149	you remain calm and courteous		
150	Very patient, understanding, explained everything they were doing.		When I first called I was scared. The tech's made me comfortable and reassured me all the while they were doing their tests and thing. Their calmness helped. Thank you!
151	I was made very comfortable and was informed of the flight and what to expect.	I can't think of anything there was never any pain or discomfort.	I actually enjoyed the flight and the landmarks pointed out.
152	As far as I know, you did everything well.		
153	Everything	Everything, excellent	
154	Explained what was happening and why. As an ex-EMT, I really thought they did a wonderful job.	Couldn't think of a thing.	Excelent service
155	The paramedic was very caring	Nothing, everything fine.	
156	Arrived soon and assessed the situation		Nice, capable group. They cared.
157	Everything I can think of.	Nothing	
158	Took me to the Veteran's Emergency.		All helped in a professional way. Talked polite. I liked all of them
159	Made my husband comfortable		You made me feel good about what was happening. I appreciate your care of both of us.
160	Quick response		
161	Very prompt		
162	Allways good ASAP Thanx		
163	All good always		
164	The male paramedic was very sympathetic, kind, and helpful. The female was not so nice. I take methadone for a past addiction and have been clean for 7 years but she kept questioning me if I had used street drugs. I had told her no but she didn't believe me. She also kept asking me when the last time I was at the ER and if I had recieved narcotics. She thought I was drug seeking.		
165	Quick response to illness		Good? NO, GREAT!
166	Everything		
167	You arrived within minutes. You told my daughter what to do for me. I did have a heart attack.		
168	Prompt, efficient, professional service.		
169	Everything. I have no complaints.		

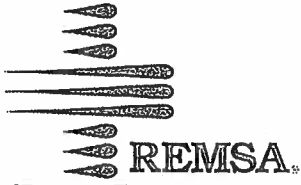
	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
170	Kept things calm, evaluated patient, asked correct questions.	n/a	Overall, good to excellent
171	You responded quickly - were helpful and enjoyed light conversation.	Nothing I can think of	Great
172	Got me to hospital	You did on this time	
173	Everything	Not one thing. Service was outstanding.	
174	You did it all	Not a thing	
175	Everything	Keep up your good works	Thank you
176	Arrived quickly, assessment thorough, iv inserted in transit - good job	Can't think of anything	Very pleased with REMSA staff.
177	Everything that was required/necessary.	Nothing that is required	No comments.
178	Communicate and get to the hospital safely.	Provide transportation home for those who have no transportation of their own.	
179	Everything		
180	Everything		Care, service great
181	Everyone was nice and helpful. Will always think well of Reno.		
182	Speed, rapid professional service	Reduce your to high bill	Keep doing that excellent job
183	Everything		Couldn't have asked for more. Thank you.
184	Very Satisfied		
185	Very Satisfied		
186	Everything	Nothing, they did well.	
187	Communication	Keep up the good work	
188	Safety was the priority.	?	This service is very helpful to patients and their families.
189	Excellent transport. Made sure family was comfortable and felt safe		Service above and beyond!
190	Courteous and professional	You did the best!	
191	Kept me calm, very polite, understanding, gentle.		
192	Very concerned about what was going on very good with 92 year old mother	Excellent	
193	Concern and compassion		
194	Early response and caring attitude while performing excellent emergency care. Thank you!!	Keep up the great work!!	Excellent
195	Made our daughter feel safe.		
196	I don't even remember being on the plane.	Have airflight that could/would come to more out of the homes. I know that's not possible though.	
197	Everything	Nothing, keep up the great service.	
198	Very calming and caring to my son.	Have a better dispatcher. She was horrible.	
199	Took charge and gave directions in a very compassionate and professional way	Your people do an excellent job now	
200	Everything	Nothing	none
201	EMT's were very nice and professional	Nothing, everything was great	
202	Everything		
203	Helpful all the time		
204	Everything	I think the service was fantastic.	Thank you very much.
205	Everything		They made me feel that everything would be alright.
206	The men were very calming and very efficient.		
207	Everything was great	I can't think of anything.	
208	Cannot really comment. Patient does not remember.		
209	Got me to hospital safely and quickly	You were helpful	I have Medicare and Tricare

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
210	Everything		
211	Response was very quick and EMT's were very friendly, professional and comforting.		
212	Everything	Nothing	None
213	Quick arrival, efficient service in our home, rapid transport to the hospital	Your service was excellent.	
214	Very fast service. Crew was helpful and professional		Very good.
215	Care of the patient		
216	Courteous Service	Nothing	Service very good - EMT's very attentive
217	ok. Ambulance rather noisy at 3 or 4 in the morning. I did not feel good. Everything ok except me.		
218	The crew was great. Made me feel at ease and were easy to talk to.		
219	Everyone was wonderful, helpful, and courteous.		
220	Quick and efficient		
221	Transported my husband to the hospital very quickly.	Nothing	Everything was done to perfection. Thank you.
222	Your crew were excellent and very professional. Very impressed.		
223	Treated me very well and took good care of me.	Nothing	Service was excellent, very professional.
224	Always so kind and understanding.		
225	Caring and calm		
226	The dispatcher helped keep me calm until staff arrived.	At this time only comment was I was very cold asked for blanket. Transport unit was cold.	I felt the care was professional and caring.
227		It took a long time to arrive.	
228	The actual physical performance was fine, however when I called, the first thing the female kept asking me if - do you have a gun? Do you have a weapon? This sucks. Then after being picked up for transport the female kept asking me what was wrong with me. Actually, I felt like shit, if that's an answer. Found female member of crew to be obnoxious!		
229	Transport was polite	Fix your shocks on your trucks.	
230	Everything, including taking me down 15 stairs	Cannot better a perfect job.	
231	Promptness, professional	Don't know	
232	Yes, very well.		
233	Everything was well done		The crew was very caring and professional.
234	Were quick.		
235	Everything		Your dispatchers are outstanding and their care makes a patient feel confident. Thank you.
236	You were prompt		I am grateful for this service.
237	Your personnel were the kindest and nicest people.	Everything was perfect.	
238	Everything	Nothing	
239	Yes, they were ready and waiting. EMT's made me as comfortable as they could.		
240	Everything. The crew was wonderful.		
241		Staff knew nothing about my condition and basicly gave me a \$1200.00 cab ride.	

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
242	Everything that I know of.		
243	Paramedics were kind, efficient, and understanding of my needs and conditions.	My experience with REMSA over the years has always been excellent.	
244	Everything. My wife was bleeding from her head. REMSA personnel handled her with care.	REMSA personnel did marvelous.	Where needed, what a blessing to have REMSA. AND! REMSA cleaned up the blood on our kitchen floor. That's thoughtful service!!!!
245	My hero's! Helpful, kind, efficient, good caring young men. Thanks!		
246	Everything		
247	Everything!!	Practice how to give an IV.	All was great.
248	Everything!!!		All went well.
249	Everything		
250	Everything - Thank you!		
251	Communicate	Fired	Crew ripped me off \$300.00 of my winning tickets.
252			The price of the one block ride was way to much.
253			In a state of emergency, I can only remember smoothness of transition and tenderness.
254	Timely, prompt, efficient, and helpful.		
255	Everything		
256	Everything!		All was handled perfectly.
257	Very polite and professional.		
258	Very professional, explained as he went along, very polite.	I really can't think of anything.	Our call was very early in the morning and we asked them not to use the siren in the complex and they didn't.
259	Personal attention to patient. A lot of care.		Excellent service.
260	You showed patience to an elderly, frightened, sick person.	Continue to be patient and encouraging.	
261	Took good care of my patient.		
262	Everything!	Very good. Allowed wife to accompany in ambulance.	
263	Everything! You made a very difficult night safe.	Nothing, your service was perfect!	
264	The EMT's were very considerate, gentle, understanding and did their best and more to make me as comfortable as possible.	Avoid potholes and speed bumps.	I was very pleased with how I was treated and the EMT's were the best so far that have transported me to the hospital.
265	yes	no	none
266	There was not a thing your people did not do. Thank you for all your help.	No, you already did it.	There is no questions to ask of you. You did it all.
267	Everything! From the quick response to the caring professionals. The patient was in great care.	Nothing.	Truly above and beyond. An amazing staff. Thank you!
268	Friendly and helpful.		
269	Kindness and compassion	We, the family, was treated with great respect.	Thank you.
270	Thanks for helping me. Sure appreciate it. Your staff is wonderful.	Think you couldn't do any better	Your service couldn't be better.
271	Prompt, professional	Nothing	
272			I don't remember any of this. The only thing I remember after my fall is the guys taking off my sweatpants and I was wearing men's boxer briefs! Tell them I was wearing them because they're comfortable when doing exercise!! UGH! How embarrassing!! Please also tell them thank you for taking care of me.
273	Quick response and treatment		

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
274		Finding the vein the first time.	They were all very nice.
275	Talked in a calming and reassuring way to me. Very professional and kind.		
276	Your people are very professional and so nice and understanding.	I have absolutely no complaints whatsoever.	Thank you so much.
277	Very polite people work for you, very professional also very friendly.		
278	Everything		
279	Everything		Very satisfactory, thank you.
280	Carefully moved patient from hospital bed to gurney and covered her with blankets to keep her warm. Also explained to her what they would be doing.		
281	The attention to my care was exceptional. This was my first experience.	I don't know how my experience could be improved.	
282	Dispatched all parties immediately.		The paramedics were extremely helpful and very kind. I wish the world had more kind people like them.
283	Careful bringing gurney in house. Dispatcher calm and reassuring.	Family puzzled that if patient said didn't want to go to hospital, wouldn't have.	Fire Dept and REMSA both seems redundant.
284	Nice folks	A blanket would have been nice.	
285	All went well	Nothing	Good, prompt service.
286	Polite, respectful	Less rough riding vehicle.	
287	You're great!!		
288	patient care		
289	Everything	Nohting	
290	Everything was very adequate. Thank you.		
291	The medical technicians were very willing to listen to me. I did not want the IV or BP on my arm due to breast cancer surgery.		Thank you to the medical techs in the ambulance who took my BP on my leg and place an IV in my ankle.
292	I arrived at the scene of my daughter's auto accident. REMSA personnel were helpful to explain my daughter's condition and what would be happening next.		
293	EMS persons very nice	Dispatch to listen	
294	Your medics didn't treat me in the manner so many others treat people my age. I'm 77. I very much appreciate the way they did treat me.	I can't think of anything you could do to improve your services.	No further comment.
295	Everything	Nothing	
296	Everything	Nothing - your great	We were very satisfied.
297	Convince me to go to emergency	None, everything was excellent	Your personnel did well for your office and me.
298	The personel were very polite and courteous. They made me feel at ease	Nothing	I was very happy with the service.
299	Very well. Everything	Stay like you are doing	I'm satisfied
300	Everything. Save my life	Nothing.	
301	All	Let me choise hospital	
302	Compassionate, humorous, efficient, polite, chivalrous, professional. Could not have asked for better help. Fast and efficient!	Not a thing. Perfect professionals in a vulnerable moment.	
303	Came promptly! Were though! Very pleasant	Nothing	Everybody was professional
304	The paramedics went way beyond what I expected. They made a HORRIBLE experience almost fun.	The service was exceptional. Could not be better	Please give my THANK YOU'S to both paramedics.

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
305	It was terrific. I felt that I was in the best of care. That means a lot to me. Thanks to every one.	Keep up the good care and attention.	
306	Timing was fast. Quick ride to hospital	You guys are doing a great job.	
307	Prompt and friendly doing medical procedures.		
308	Everything	Nothing	The crew was gentle and helpful. They provided wonderful service.
309	Everything	Nothing	I have had excellent care and thoughtfulness every time.
310	Got patient ready quickly. Very professional and compassionate.		
311	Everything! Thank you for your awesome service.		
312	In a confusing, cramped atmosphere, they were calm, efficient, friendly, humorous.		My mother was transported 2 different times. Both times she was treated gently and comforting.
313	You arrived in a timely manner and the staff was efficient and professional.	Ask for code.	
314	Everything great!		They were calm, efficient, understanding!
315	Your service was very good		Good.
316	Service was fine!		
317	They were very efficient and helpful also professional.	Nothing.	
318	Arrived promptly, accessed the patient quickly, communicated clearly, overall very pleased!	Keep up the good work!	Care and service was GREAT!
319	Took good care and quick to respond, arrived safely good communication	Nothing, great service.	
320	The personnel check-up on me, my mom and sister were very helpful and attentive to us!	Nothing that I can think of... your already good	The service is excellent/outstanding!
321	Saved my life after a heart attack at the Peppermill Resort.		
322	Getting me to the hospital safely.	Listen more.	
323	Taking me from the hospital to Manor Care for recovery.	Nothing I can think of.	
324	Taking me to the hospital in a timely manner	Nothing, everything went well.	
325	Quick response and great service. Very gentle but got the job done.	You did great.	
326	Provided comfort with communication		
327	Helped to save my husbands life	No changes are needed that I could see.	
328	Very good service		
329	Very kind and comforting to my needs.	Nothing, all was good for me and to me.	



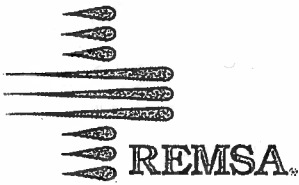
Regional Emergency Medical Services Authority

**CARE FLIGHT
CUSTOMER SERVICE
FOR
DECEMBER 2012**



CARE FLIGHT CUSTOMER COMMENTS DECEMBER 2012

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
1	Your personnel were very polite and professional.		
2	Took very good care of my loved one.		
3	Everyone was polite professional and helpful in every way necessary.		
4	Very prompt and efficient flight staff in getting me into copter; made me feel at ease and comfortable.		Professional caring staff including pilot and 2 nurses.
5	All services were professional		
6	Everything, had a ball. Love flyers, love them.	No, God Bless all	Saved my right eye, can't hardly see, sorry, but thank you all. Merry Christmas always.
7	I was unconscious, not sure if crew communicated with me.		
8	Everything.	Stay consistent	Great formula for care and transport, don't change anything.
9	You landed 200' from the house, kind, courteous.	Nothing	
10	It was unnerving and frightening	Would be helpful if personnel informed family when (what time) patient would be arriving at hospital being taken to and be more courteous.	
11	The care flight was most helpful in making the call for Ralph to be sent to the burn unit at UCD.	I thought they were great.	Pt was impressed that it only took 1 time for the nurse to find a vein and get pain meds into his system.



Regional Emergency Medical Services Authority

REMSA
PUBLIC RELATIONS REPORT
FOR
DECEMBER 2012

PUBLIC RELATIONS

December 2012

ACTIVITY	RESULTS
Coordinated "Share Your Christmas Food Drive" shopping event with Scolari's and Channel 2.	REMSA was featured on Channel 2 on 12/13/12 for food shopping, and 12/14/12 for their donation to the drive by food drive to benefit the Food Bank of Northern Nevada.
Worked with Kurt Althof on Silver Saver Membership Program media placement for 2013.	Spots to promote Silver Saver for year-round enrollment will begin in mid-January.
Managed media calls from local TV stations regarding a national report that placed Nevada near the bottom of emergency preparedness.	Directed the media to the appropriate state personnel.

CORPORATE Giving 2012

December 16, 2012 • 13

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PROUDLY SUPPORTS THE FOLLOWING:

- American Red Cross
 - Children's Cabinet
 - Evelyn Mount Community Outreach
 - Girl Scout Council - Sierra Nevada
 - Kids Kottage
 - Local youth sports teams
 - Nevada Hospital Association
 - Renown Health Foundation
 - Ronald McDonald House Charities Northern Nevada
 - Senior Bridges Outpatient Program
-



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Posted: Mon 11:27 PM, Dec 17, 2012

Updated: Tue 8:14 AM, Dec 18, 2012

Reporter: Staff Email

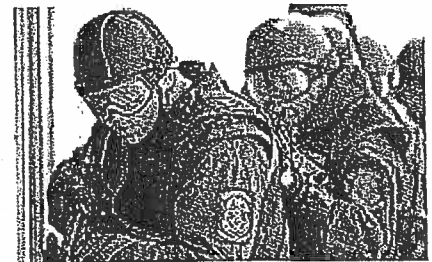
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SWAT Practices Hostage Rescue, Mass Casualty Training at Meadowood

RENO, Nev.— SWAT practice took place at Meadowood Mall in preparation for local disasters.

Monday beginning at 10PM, the Reno Police Department and the Washoe County Sheriff's Office Special Weapons And Tactics Teams along with the Regional Crisis Intervention Negotiation Team, REMSA Tactical Medics, and Meadowood Mall Security conducted joint training at Meadowood Mall.

Training topics included active shooter, hostage rescue, and mass casualties and traumas. Although this training had been planned for several months, the recent events in Connecticut and Oregon are reminders for law enforcement to stay proactive in the preparation for these types of incidents, which was the goal of this training, which lasted well into Tuesday morning.



[Next Story >](#)

Find this article at:

<http://www.kolotv.com/home/headlines/SWAT-Practice-at-Meadowood-Mall--183851101.html>

Check the box to include the list of links referenced in the article.

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Posted: 12:05 p.m. Thursday, Dec. 20, 2012

Reno Rodeo Foundation Denim Drive rounds-up donations of new clothing for abused and neglected children

RENO -- The Reno Rodeo Denim Drive wrapped up this past Monday and has been visiting 135 collection locations throughout 13 Northern Nevada counties picking up a generous amount of donations.

For the past 30 days the Denim Drive has raised awareness of the need for new denim clothing and new socks and underwear for abused, neglected and abandoned infants, children and teens who have been rescued from unsafe homes.

Donations are being collected from the 135 locations with the help of REMSA staff and ambulances and several volunteers of the Reno Rodeo. REMSA has been a partner with the Reno Rodeo for many years.

This afternoon (Wednesday, December 19) at 2 PM, on the 8th floor of the Washoe County Courthouse, a significant donation of clothing collected from the staff of the District Attorney's office is being picked up with the help of REMSA.

The past 3 days, donations have been picked up from businesses in 13 Northern Nevada counties. All clothing donations are brought to the Washoe County Kids Kottage, a protective custody facility for children, so they may be processed, counted and cataloged for the coming year. The Reno Rodeo Foundation through the Denim drive clothes over 1500 children in foster care and protective custody all year long, including back to school clothes and school uniforms.

"So far the amount of donations looks to be tremendous. Once again our community, both businesses and citizens have come to the aid of children who are in a tough position through no fault of their own. These children arrive in foster care or protective custody with just the clothes on their backs. We are rounding up donations of new jeans, socks and underwear from 135 locations in 13 counties so these children have clothes to wear to school and feel like a normal kid should feel. Today is a good day and speaking on behalf of the 500 Reno Rodeo volunteers, we are proud to help the children of our community," said Marie Baxter, Executive Director, Reno Rodeo Foundation.

Visit RenoRodeoFoundation.org to donate on-line or call (775) 322-9875 for more information. 100% of the proceeds are given directly to the children and donations collected in each county stay in each county.

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Posted: 10:58 a.m. Monday, Dec. 31, 2012

RTC offering free transit service for New Year's celebration

RENO -- The Regional Transportation Commission and its Safe RIDE partners want people to avoid drinking and driving for everyone's safety this holiday.

Travelers can ride FREE New Year's Eve night on RTC transit services from 7 pm to 2 am thanks to the generous support of our sponsors who have completely underwritten the cost of the lifesaving annual service, now in its 28th year.

The FREE extended service is not in effect for RTC INTERCITY and RTC SIERRA SPIRIT which will operate on regular schedule on Dec. 31st.

"We're grateful our partners are able to provide the community FREE transit rides on New Year's Eve keeping our streets and highways safe for everyone," said David Jickling, RTC Director of Public Transportation and Operations.

Our event partners are Renown Health, the Northern Nevada DUI Task Force, KOLO 8 News Now, Wood Rodgers, Inc., Club Cal Neva, REMSA, Morrey Distributing, Washoe County Honorary Deputy Sheriff's Association, Reno Media Group, Reno Fire Fighters Local 731, the Reno Sparks Convention and Visitors Authority, Reno News & Review and AMEC.

For route and schedule information visit www.rtcwashoe.com or call RTC Passenger Services at 775-348-RIDE available Monday to Friday 7 am – 7 pm, Saturday and Sunday 8 am – 5 pm, closed on holidays.

More News

We Recommend

- Shoplifter escapes after attacking security officers with a knife (FOXreno)
- CA man dies in I-80 rollover 60 miles east of Reno (FOXreno)
- Snow blankets ski resorts in time for New Year's (FOXreno)
- Coach Ault steps down after more than 40 years

From Around the Web

- 10 Worst Cars of All Time (TheStreet)
- 10 Things You Should Never Buy at Garage Sales (Reader's Digest)
- eBay Motors Reveals its Best-Sellers (CarBuzz)
- Stop Changing Your Oil (Edmunds)
- What You May Not Know About Buffet Food (Lifescript.com)

RECEIVED
DEC 20 2012
BY:

December 10, 2012

Debbie Zalmana
REMSA
450 Edison Way
Reno, NV 89502-4117

Dear Ms. Zalmana,

We are incredibly thankful for your generous support of the Food Bank of Northern Nevada. You have made an investment in our organization, and we want to keep you apprised of the achievements you have helped make possible. To that end, the enclosed report summarizes our activities and progress for 2012.

It's only with your engagement and commitment that we are making a difference in the lives of children, families and seniors who are struggling. You are profoundly touching lives:

- The 10-year-old boy who is excited to receive his backpack with wholesome food for the weekend
- The family who relies on a box of groceries from the neighborhood food pantry because one parent is unemployed and the other can only find part-time work
- The elderly woman who is thankful for her monthly box of staple food items that helps stretch her fixed-income budget

The faces of hunger are many and varied, but they all have one thing in common—you. You not only provide nutritious meals, you provide much needed hope. You show compassion for people who are hurting. They are so grateful for what they receive and thankful they have not been forgotten.

We are so fortunate to have your involvement and support, and we hope you will continue your generosity. We still have so much important work to do and so many hungry people to help. Standing together, we can do anything.

With our warm wishes for the holidays and the new year,

Cherie Jamason
President & CEO

P.S. – I welcome any questions or thoughts you have after reading the enclosed report. I'm always available to visit with you.



FOOD BANK
OF NORTHERN NEVADA

WASHOE COUNTY SHERIFF

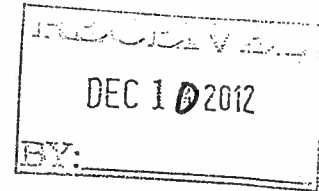


Michael Haley
Sheriff

Dedicated Service in Partnership with our Community

December 5, 2012

Mr. Jim Gubbels
Executive Director
REMSA
450 Edison Way
Reno, Nevada 89502



Dear Jim: *Jim*

Our 10th annual Shop with the Sheriff event was an overwhelming success and I wanted to express my appreciation for your generous donation of staff. You have supported us for several years and it's a real comfort knowing REMSA is available should one of our children or shoppers need medical assistance.

We sponsored over 200 children ages 7-13 from at risk, low income, and homeless families to shop for Christmas gifts. Each child was identified as critically in need of our financial support and guidance through the Sierra Nevada Chapter - Girl Scouts of America, The Boys and Girls Club of Incline, the Children's Cabinet, and the WCSO Patrol Division staff – all of whom work on a daily basis with these under privileged children.

Your assistance means so much to me but even more to the children who we support. Thank you very much for partnering with us for Shop with the Sheriff and for everything you do to help maintain its success. I hope all the REMSA associates have a safe and merry holiday season.

Sincerely,

Michael Haley
MICHAEL HALEY, SHERIFF *

MH/tc



WASHOE COUNTY HEALTH DISTRICT

AIR QUALITY MANAGEMENT DIVISION



Public Health
Prevent. Promote. Protect.

DATE: January 24, 2013

TO: District Board of Health

FROM: Kevin Dick, Division Director

SUBJECT: Public Hearing: Proposed approval and adoption of the revisions to "The Washoe County Portion of the Nevada State Implementation Plan to Meet the Nitrogen Dioxide Infrastructure SIP Requirements of Clean Air Act Section 110(a)(2)."
Agenda Item:

Staff Recommendation

Approve and adopt revisions to "The Washoe County Portion of the Nevada State Implementation Plan to Meet the Nitrogen Dioxide Infrastructure SIP Requirements of Clean Air Act Section 110(a)(2)."

Background

The U.S. Environmental Protection Agency (EPA) establishes health based national ambient air quality standards (NAAQS) for six criteria pollutants including Nitrogen Dioxide (NO₂). The Clean Air Act (CAA) directs states to address basic State Implementation Plan (SIP) requirements to implement, maintain, and enforce the NAAQS. Many of the CAA Section 110(a)(2) SIP elements relate to the general information and authorities that constitute the "infrastructure" of a state's air quality management program. States are required to submit an Infrastructure SIP (I-SIP) within three years after promulgation of a new or revised standard. In 2010, EPA substantially strengthened the NO₂ NAAQS by promulgating a new health-based 1-hour primary standard of 100 ppb.

This I-SIP is a summary of current air quality management elements in Washoe County's portion of the Nevada NO₂ SIP. It includes air quality regulations and programs demonstrating the Health District's ability to meet these CAA requirements. To reduce printing resources and expenses, the I-SIP is not included with this staff report. The document is 20 pages and can be accessed from the "News & Events" section of the Air Quality Management Division website, www.ourcleanair.com. A hard copy is available by contacting Mr. Daniel Inouye of AQMD at (775) 784-7214 or dinouye@washoecounty.us.

P.O. BOX 11130 Reno, NV 89520-0027 • (775) 784-7200 • FAX (775) 784-7225

www.washoecounty.us/health

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If the I-SIP is approved and adopted, it will be submitted to EPA through the Nevada Division of Environmental Protection as a revision to the Washoe County portion of the Nevada NO₂ SIP. A notice of today's public hearing was published in the Reno Gazette-Journal on December 21, 2012, January 7, and January 17, 2013. The I-SIP has been available for public inspection at the AQMD website and office since December 21, 2012.

Recommended Motion

Move to approve and adopt revisions to "The Washoe County Portion of the Nevada State Implementation Plan to Meet the Nitrogen Dioxide Infrastructure SIP Requirements of Clean Air Act Section 110(a)(2)" and direct Staff to forward it to EPA as an amendment to the Washoe County portion of the Nevada NO₂ State Implementation Plan.

Alternatives

The District Board of Health may:

1. Elect not to adopt the revision to the I-SIP; or
2. Continue this public hearing and direct Staff to research some portion of the I-SIP and report back to the Board at a future meeting.



Kevin Dick
Division Director
Air Quality Management

The Washoe County Portion of the
Nevada State Implementation Plan to Meet the
Nitrogen Dioxide Infrastructure SIP Requirements of
Clean Air Act Section 110(a)(2)

January 24, 2013

Washoe County Health District
Air Quality Management Division
P.O. Box 11130
Reno, Nevada 89520-0027
(775) 784-7200
www.ourcleanair.com

Acronyms and Abbreviations

AQS	Air Quality System
CAA	Clean Air Act
CSAPR	Cross-State Air Pollution Rule
CFR	Code of Federal Regulations
CO	Carbon Monoxide
DMV	Department of Motor Vehicles
EPA	U.S. Environmental Protection Agency
FR	Federal Register
HA	Hydrographic Area
I-SIP	Infrastructure State Implementation Plan
NAAQS	National Ambient Air Quality Standard
NDEP	Nevada Division of Environmental Protection
NO ₂	Nitrogen Dioxide
NRS	Nevada Revised Statute
NSR	New Source Review
O ₃	Ozone
Pb	Lead
PM _{2.5}	Particulate Matter less than or equal to a nominal 2.5 microns in aerodynamic diameter
PM ₁₀	Particulate Matter less than or equal to a nominal 10 microns in aerodynamic diameter
PSD	Prevention of Significant Deterioration
SIP	State Implementation Plan
SLAMS	State and Local Air Monitoring Station
SO ₂	Sulfur Dioxide
USC	United States Code
WCDBOH	Washoe County District Board of Health
WCAQMD	Washoe County Health District - Air Quality Management Division

Introduction and Background

Sections 110(a)(1) and (2) of the federal Clean Air Act (CAA), 42 USC § 7410(a)(1) and (2) hereafter referred to as the “Infrastructure” State Implementation Plan (I-SIP) requirements, requires states and delegated local agencies to submit an implementation plan to the U.S. Environmental Protection Agency (EPA) demonstrating their ability and authority to implement, maintain, and enforce each National Ambient Air Quality Standard (NAAQS). Section 110(a)(1) addresses the timing requirement for the submissions of the I-SIP. Washoe County is required to submit an I-SIP to EPA not later than 3 years after promulgation of a new or revised NAAQS regardless of whether or not the local jurisdiction has any nonattainment areas.

Section 110(a)(2) lists the required elements that cover the I-SIP. These elements include: enforceable emission limitations, air quality modeling, enforcement programs, ambient air monitoring programs, and confirmation of adequate personnel, resources and legal authorities. The following elements are addressed in this I-SIP:

- Enforceable Emission Limitations and Other Control Measures (110(a)(2)(A))
- Air Quality Monitoring, Compilation, Data Analysis, and Reporting (110(a)(2)(B))
- Enforcement and Stationary Source Permitting (110(a)(2)(C))
- Interstate Transport (110(a)(2)(D))
- Resources, Conflict of Interest, and Emergency Backstop (110(a)(2)(E))
- Stationary Source Emissions Monitoring and Reporting (110(a)(2)(F))
- Emergency Powers and Contingency Plans (110(a)(2)(G))
- SIP Revision For Revised Air Quality Standards or New Attainment Methods (110(a)(2)(H))
- SIP Revisions for New Nonattainment Areas (110(a)(2)(I))
- Consultation and Public Notification (110(a)(2)(J))
- Air Quality Modeling and Reporting (110(a)(2)(K))
- Major Stationary Source Permitting Fees (110(a)(2)(L))
- Consultation with Local Entities (110(a)(2)(M))

This I-SIP addresses Washoe County’s portion of the State of Nevada’s requirements for the 2010 Nitrogen Dioxide (NO₂) NAAQS.

Table 1
 Current CAA 110(a)(2)(A)-(M) Requirements in the
 Washoe County Portion of the Nevada Infrastructure SIP for the
 2010 Nitrogen Dioxide NAAQS, Unless Otherwise Noted

Element (A)	<p><u>Enforceable emission limits and other control measures:</u> Requires SIPs to include enforceable emission limits and other control measures, means, or techniques, and schedules for compliance.</p>
<p>WCDBOH Regulations Governing Air Quality Management (Regulation) Section 020.005 (See 38 FR 12702) authorizes the Control Officer to enforce all SIP measures including the following previously submitted Sections: 030.000; 030.005; 030.010; 030.015; 030.025; 030.030; 030.110; 030.115(1), (5), and Subsection B; 030.1201; 030.205; 030.215; 030.245; 030.250 (See 46 FR 21758); 030.300; 030.305; 030.310; 030.3101-3105; 030.3107; 030.3108 (See 46 FR 43141); 030.218, 030.230, and 030.970A (See 77 FR 60915); 040.070; 040.075; 040.080; 040.085; 040.090 (See 46 FR 21758); and 050.001 (See 72 FR 33397).</p> <p>The following Sections have not been submitted as part of the SIP, but have been adopted by the WCDBOH and further support this element requirement (See Attachment B): 020.0051 (Board of Health - Powers and Duties); and 020.020 (Control Officer - Powers and Duties).</p>	
Element (B)	<p><u>Ambient air quality monitoring/data system:</u> Requires SIPs to provide for establishment and operation of ambient air quality monitors, collection and analysis of ambient air quality data, and to make these data available to EPA upon request.</p>
<p>The WCAQMD operates an ambient air monitoring network in accordance with 40 CFR 58. The network is reviewed annually pursuant to 40 CFR 58.10 to ensure it meets ambient air monitoring objectives (See Attachment A).</p>	

Element (C)	<p><u>Program for enforcement of control measures:</u> Requires SIPs to include a program providing for enforcement of all SIP measures and the regulation of construction of new and modified stationary sources as necessary to assure that the NAAQS are achieved, including a permit program as required in Parts C and D.</p>
<p>WCDBOH Regulation Section 020.005 (See 38 FR 12702) authorizes the Control Officer to enforce all SIP measures including the following previously submitted Sections: 030.000; 030.005; 030.010; 030.015; 030.025; 030.030; 030.110; 030.115(1), (5), and Subsection B; 030.1201; 030.205; 030.215; 030.245; 030.250 (See 46 FR 21758); 030.300; 030.305; 030.310; 030.3101-3105; 030.3107; 030.3108 (See 46 FR 43141); 030.218, 030.230, and 030.970A (See 77 FR 60915); 040.070; 040.075; 040.080; 040.085; 040.090 (See 46 FR 21758); and 050.001 (See 72 FR 33397).</p> <p>The following Sections have not been submitted as part of the SIP, but have been adopted by the WCDBOH and further support this element requirement (See Attachment B): 010.1303 (Regulated Air Pollutant); 020.0051 (Board of Health - Powers and Duties); 020.020 (Control Officer - Powers and Duties); 030.002 (Construction or Modification of Permitted Operations); 030.500 (New Source Review (NSR) Applicability); 030.502 (Review for Emission Limitation Compliance); 030.503 (Conditions for Approval); 030.504 (Emission Offset Ratios); 030.505 (Completeness of Application); 030.506 (Requirements for Public Notice); 030.507 (Comments); 030.508 (Final Action); and 030.905 (Sources Requiring Part 70 Permits).</p> <p>On March 3, 2008, the WCAQMD received full delegation of the federal PSD program (See Washoe County 2006 PM_{2.5} NAAQS I-SIP, Attachment C, submitted December 4, 2009) and is incorporated into Nevada's SIP (40 CFR 52.1485).</p>	

<p>Element (D)</p>	<p><u>Interstate transport provisions:</u> Requires SIPs to contain adequate provisions prohibiting emissions generated within the state from contributing significantly to nonattainment in, or interfering with maintenance by, any other state with respect to the NAAQS, or from interfering with measures required to be included in the SIP of any other state to prevent significant deterioration or to protect visibility.</p>
<p>Gina McCarthy, Assistant Administrator of the EPA issued a memo on November 19, 2012 to EPA Air Division Directors, Regions 1-10, regarding states' and EPA's obligations with respect to the requirements of (D)(i)(I). Ms. McCarthy notes:</p> <p style="padding-left: 40px;">“I would also like to note that the recent CSAPR decision made certain holdings regarding the requirement for states to submit SIPs addressing the provisions of Clean Air Act section 110(a)(2)(D)(i)(I), the good neighbor provision that addresses upwind emissions linked to NAAQS attainment problems in downwind states. The decision states that a SIP cannot be deemed deficient for failing to meet the good neighbor obligation before the EPA quantifies that obligation. Although we have filed a petition for rehearing of the Court's decision, including this element of the decision, and although the mandate for that decision has not yet been issued, we intend to act in accordance with the decision during the pendency of the appeal. Therefore, at this time the EPA does not intend to make findings that states failed to submit SIPs to comply with section 110(a)(2)(D)(i)(I). To the extent that states may inquire about their obligations to submit SIPs addressing this provision, we believe it would be appropriate to convey that at this time we do not intend to make such findings with respect to section 110(a)(2)(D)(i)(I).”</p> <p>Because EPA has not informed Nevada of its contribution to any ozone NAAQS attainment problem in downwind states, the WCAQMD concludes that it is not obligated to address this requirement at this time.</p>	
<p>Element (E)</p>	<p><u>Adequate resources:</u> Requires SIPs to provide necessary assurances for adequate personnel, funding, and authority under state law to carry out its SIP, to contain requirements addressing potential conflicts of interest, and to provide necessary assurances that the state retains responsibility for ensuring adequate implementation of the SIP where the state relies on a local or regional government for implementation of any SIP provision.</p>
<p>NRS 445B.500 authorizes the WCDBOH to implement and administer air quality management programs within the geographic boundaries of Washoe County. These programs are managed through the WCAQMD. For the most recent fiscal year (2011-12), the WCAQMD consisted of 19 allocated full-time staff. Primary funding sources are: 1) Operating permit fees; 2) EPA grants; 3) Nevada DMV funds; and 4) the City of Reno, City of Sparks, and County of Washoe via an inter-local agreement with the Washoe County Health District (See Washoe County 2006 PM_{2.5} NAAQS I-SIP, Attachment D, submitted December 4, 2009).</p>	

Element (F)	<p><u>Stationary source monitoring system:</u> Requires SIPs to establish a system to monitor emissions from stationary sources, to submit periodic emissions reports, to correlate the emissions reports with the corresponding SIP emission limits and standards, and to make emissions reports available to the public.</p>
<p>WCDBOH Regulation Section 020.005 (See 38 FR 12702) authorizes the Control Officer to enforce all SIP measures including the following previously submitted Sections related to authority for stationary source monitoring and reporting: 030.210; 030.250 (See 46 FR 21758); and 030.218, 030.230; 030.235, and 030.970A (See 77 FR 60915).</p> <p>The following Sections have not been submitted as part of the SIP, but have been adopted by the WCDBOH and further support this element requirement (See Attachment B): 020.0051 (Board of Health - Powers and Duties); and 020.060 (Sampling and Testing).</p>	
Element (G)	<p><u>Emergency episodes:</u> Requires SIPs to provide for authority to address activities causing imminent and substantial endangerment to public health and to provide for adequate contingency plans to implement such authority.</p>
<p>Emergency powers are authorized under WCDBOH Regulation 050.001 (Emergency Episode Plan) (See 72 FR 33397). In addition, general emergency powers are provided in Nevada's SIP in NRS 445B.560.</p>	
Element (H)	<p><u>Future SIP revisions:</u> Requires SIPs to provide for SIP revisions in response to changes in the NAAQS, or availability of improved methods for attaining the NAAQS, and in response to an EPA finding that the SIP is substantially inadequate.</p>
<p>WCDBOH Regulation Section 020.005 (See 38 FR 12702) authorizes the Control Officer to enforce Section 020.0051 (Board of Health - Powers and Duties) which provides the WCDBOH the authority to revise a SIP "to achieve and maintain levels of air quality to protect human health".</p>	
Element (I)	<p><u>SIP revisions for new non-attainment areas:</u> Requires SIP revisions to meet the applicable Part D requirements relating to non-attainment areas.</p>
<p>The WCAQMD commits to submit SIP revisions whenever the county, or portions of the county, are newly designated non-attainment for any federal NAAQS.</p>	

Element (J) [§121]	<p><u>Consultation with government officials, public notification, PSD and visibility protection:</u> Requires states to provide a process for consultation with local governments and Federal Land Managers carrying out NAAQS implementation requirements; . . .</p>
<p>All SIP elements are adopted by the WCDBOH before being formally submitted as the Washoe County portion of the Nevada SIP. Participation by local political subdivisions is authorized by WCDBOH Regulation Section 020.005 (See 38 FR 12702) and an inter-local agreement between the City of Reno, City of Sparks, and the County of Washoe, Nevada (See Washoe County 2006 PM_{2.5} NAAQS I-SIP, Attachment D, submitted December 4, 2009). This inter-local agreement requires that the WCDBOH include one elected official from each of the three political subdivisions in Washoe County. The WCAQMD is committed to include all stakeholders, such as local governments and federal land managers, in the SIP development process.</p>	
Element (J) [§127]	<p>. . . requires SIPs to notify the public if NAAQS are exceeded in an area and to enhance public awareness of measures that can be taken to prevent exceedances; and . . .</p>
<p>WCDBOH Regulation Section 050.001 (See 72 FR 33397) authorizes the WCAQMD to advise the public on measures that are taken to reduce their exposure during elevated air pollutant concentrations. Near-time ambient air monitoring data are posted on the WCAQMD website (www.washoecounty.us/health/aqm/home.html). A Trends report, which summarizes monitored ambient air quality in Washoe County, is prepared annually and also posted on the WCAQMD website.</p>	
Element (J) [Part C PSD / Visibility]	<p>. . . requires SIPs to meet applicable requirements of Part C related to prevention of significant deterioration and visibility protection.</p>
<p>On July 31, 2007, EPA's approval of Nevada's interstate transport SIP (CAA 110(a)(2)(D)(i)) for the 8-hour O₃ and PM_{2.5} NAAQS promulgated in July 1997 was published in the Federal Register (See 72 FR 41629). Also, Article 13 of Nevada's SIP, "General Provisions for the Review of New Sources," requires an environmental evaluation before a registration certificate may be issued. Finally, on March 3, 2008, the WCAQMD received full delegation of the federal PSD program (See Washoe County 2006 PM_{2.5} NAAQS I-SIP, Attachment C, submitted December 4, 2009) and is incorporated into Nevada's SIP (40 CFR 52.1485).</p>	

<p>Element (K)</p>	<p><u>Air quality modeling/data:</u> Requires SIPs to provide for the performance of air quality modeling for predicting effects on air quality of emissions of any NAAQS pollutant and the submission of such data to EPA upon request.</p>
<p>WCDBOH Regulation Section 030.235 (Requirements for Source Sampling and Testing) (See 77 FR 60915) authorizes the Control Officer to require operators provide source stack testing or other types of testing to determine the quantity and effect of emissions produced by a stationary source.</p> <p>In addition, the following Section has not been submitted as part of the SIP, but have been adopted by the WCDBOH and further support this element requirement (See Attachment B): 030.503 (Conditions for Approval).</p>	
<p>Element (L)</p>	<p><u>Permitting fees:</u> Requires SIPs to require each major stationary source to pay permitting fees to cover the cost of reviewing, acting upon, implementing and enforcing a permit until such fee requirement is superseded by EPA approval of a fee program under Title V of the CAA.</p>
<p>Permitting fees are authorized under WCDBOH Regulation Sections 030.210 (See 46 FR 21758) and 030.310 (See 46 FR 43141).</p>	
<p>Element (M)</p>	<p><u>Consultation/participation by affected local entities:</u> Requires SIPs to provide for consultation and participation in SIP development by local political subdivisions affected by the SIP.</p>
<p>All SIP elements are adopted in a public hearing by the WCDBOH before being formally submitted as the Washoe County portion of the Nevada SIP. Participation by local political subdivisions is authorized by WCDBOH Regulation Section 020.005 (See 38 FR 12702) and an inter-local agreement between the City of Reno, City of Sparks, and the County of Washoe, Nevada (See Washoe County 2006 PM_{2.5} NAAQS I-SIP, Attachment D, submitted December 4, 2009). This inter-local agreement requires that the WCDBOH include one elected official from each of the three political subdivisions in Washoe County.</p>	

Attachment A

Letter from Matthew Lakin (EPA Region IX) to Kevin Dick (WCAQMD) Regarding the
"2011 Annual Monitoring Network Plan" (November 1, 2011)

DRAFT
December 18, 2012



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION IX
75 Hawthorne Street
San Francisco, CA 94105
NOV 01 2011

Mr. Kevin Dick, Director
Air Quality Management Division
Washoe County Health District
1001 East Ninth Street, Suite A115
P.O. Box 11130
Reno, NV 89520-0027

Dear Mr. Dick:

Thank you for your timely submittal of the 2011 Annual Monitoring Network Plan for the Washoe County Health District Air Quality Management Division (AQMD). EPA reviewed the submitted document and found that it is complete, informative, detailed and meets the requirements set forth under 40 CFR Part 58.10. We also appreciate your addressing in full the comments to last year's 2010 Network Plan. This letter serves as an approval of the annual plan and all of the proposed modifications except the Sparks special purpose monitoring proposed for non-submission into the AQS. This issue, along with the special purpose monitoring at Reno3 is further discussed in our enclosed comments. AQMD should continue to work with EPA Region 9 staff to obtain the proper documentation and approvals to establish special purpose monitoring at the Sparks and Reno3 sites.

If you have any questions regarding this letter or the enclosed comments, please feel free to contact me at (415) 972-3851 or Elfego Felix at (415) 972-4141.

Sincerely,

Matthew Lakin, Manager
Air Quality Analysis Office
Air Division

Enclosure

cc: Craig Petersen, Senior Air Quality Specialist, AQMD
Julie Hunter, Air Quality Specialist, AQMD

Comments on 2011 Network Plan for Washoe County AQMD

Please update next year's network plan to reflect the following comments:

1. 40 CFR 58.20(b) requires any SPM data collected using an FRM, FEM, or ARM must meet the requirements of §58.11, §58.12, and appendix A or an approved alternative. Furthermore, SPM data collected using an FRM, FEM, or ARM that meets appendix A must also report to AQS. Pertaining to this, EPA noted that the following corrections will need to be made for the AQMD network:
 - o For the new FEM particulate instruments that are planned for installation at the Sparks site (pp.8), AQMD will either need to meet the requirements of §58.11, §58.12, appendix A and submit data into AQS, or submit an alternative plan for EPA approval that may allow for non-submittal into AQS.
 - o It was noted that AQMD also operates PM continuous FEM instruments as SPMs at the Reno3 site and is not currently submitting this data into AQS (pp.3). These Reno3 monitors will also either need to meet the requirements of §58.11, §58.12, appendix A and submit data into AQS, or submit an alternative plan for EPA approval that may allow for non-submittal into AQS.

AQMD should continue to work closely with EPA Region IX staff to ensure the appropriate documentation and approvals are in place that allow for accurate monitoring of the Sparks and Reno3 sites using FEM instrumentation that does not report to AQS.

2. The cover letter of AQMD's network plan that comments were received during the public inspection period of the plan. Page 1 of the Network Plan however contains the following language: "Public comments received during the public inspection period are included along with this plan to EPA Region IX." These two statements do not agree. EPA requests that this information be clarified in next year's plan and that a consistent message is delivered in the plan as well as the cover letter.

Attachment B

**Washoe County District Board of Health Regulations Governing Air Quality Management
Not Included in the Washoe County Portion of the Nevada Nitrogen Dioxide Infrastructure SIP
But Further Support CAA 110(a)(2)(A)-(M) Requirements**

DRAFT
December 18, 2012

010.1303

"REGULATED AIR POLLUTANT" shall mean the following:

1. Nitrogen oxides or any volatile organic compounds;
2. Any pollutant for which a national ambient air quality standard has been promulgated.
3. Any pollutant that is subject to any standard promulgated under section 111 of the Act.
4. Any class I or II substance subject to a standard promulgated under or established by title VI of the Act.
5. Any pollutant subject to a standard promulgated under section 112 or other requirements established under section 112 of the Act, including the following:
 - a. Any pollutant subject to requirements under section 112(j) of the Act. If the administrator fails to promulgate a standard pursuant to section 112(e) of the Act, any pollutant for which a subject source would be major shall be considered to be regulated on the date 18 months after the applicable date established pursuant to section 112(e) of the Act; and
 - b. Any pollutant for which the requirements of section 112(g)(2) of the Act have been met, but only with respect to the individual source subject to section 112(g)(2) requirement.

(Adopted 10/20/93)

020.0051

BOARD OF HEALTH - POWERS AND DUTIES

Pursuant to the powers and responsibilities that have inured to the benefit of the Board of Health, said Board shall, without excluding any other powers, responsibilities, and authority conferred on said Board in the Nevada Revised Statutes, have the following powers and/or responsibilities:

- A. To adopt and enforce rules and regulations to reduce the release into the atmosphere of any air contaminants originating within the territorial limits of the Washoe County Health District in order to achieve and maintain levels of air quality which will protect human health and safety, prevent injury to plant and animal life, prevent damage to property, and preserve visibility and scenic, aesthetic and historic value within said Health District.
- B. To establish ambient air quality standards in accordance with law.
- C. To make such determinations and issue such orders as may be necessary to implement the provisions of these regulations and to achieve air quality standards in accordance with law.
- D. To institute proceedings to prevent continued violation of any order issued by the Board of Health, Hearing Board, or Control Officer, and to enforce these regulations.
- E. To require access to records relating to emissions which cause or contribute to air pollution.
- F. To apply or and receive grants or other funds or gifts from public or private agencies.
- G. To cooperate and contract with other governmental agencies including the State of Nevada, other states, and the federal government.

- H. To conduct investigations, research and technical studies consistent with the general purposes of the Nevada Revised Statutes.
- I. To establish such emission control requirements, as may be necessary to prevent, abate, or control air pollution.
- J. To require the registration of air pollution sources together with a description of the processes employed, fuels used, nature of emissions and other information considered necessary to evaluate the pollution potential of a source.
- K. To prohibit, regulate or control, as specifically provided in **Section 030.000** through **030.260**, the installation, alteration or establishment of any source capable of causing air pollution.
- L. To issue or deny all requests or applications for a variance or waiver from any of the requirements of these regulations after due consideration of the recommendations of the Hearing Board and Control Officer.
- M. To require the submission of preliminary plans and specifications and other information as the Board deems necessary to process permits required by these regulations.
- N. To enter into and inspect, at any reasonable time, any premises containing an air contaminant source or a source under construction for purposes of ascertaining the state of compliance with these regulations.
- O. To hold any hearing as authorized in Chapter 445 of the Nevada Revised Statutes.
- P. To review recommendations of the Hearing Board and to take such additional evidence as the Board of Health deems necessary or to remand to the Hearing Board for such evidence as the Board of Health may direct on any matters arising under these regulations.
- Q. To require elimination of devices or practices which cannot be reasonably allowed without generation of undue amounts of contaminants.
- R. To specify the manner in which incinerators may be constructed and operated.
- S. To delegate all above powers, except **Subsections A, B, F, O, and P**, to the Control Officer or his representatives as may be necessary to implement these regulations.
- T. To appoint by resolution, or other appropriate action of the Board of Health, a Hearing Board consisting of seven (7) members who are not employees of the State of Nevada or any political subdivision of the State of Nevada, or which one (1) member must be an attorney admitted to practice law in the State of Nevada, or which one (1) member must be a professional engineer registered in the State of Nevada and one (1) member shall be licensed in Nevada as a general engineering contractor or a general building contractor as defined by NRS 624.215. All members of said Hearing Board shall be appointed to the terms as specified in NRS 445.481.
- U. To institute, in any court of competent jurisdiction, legal proceedings to compel compliance

with these regulations and the Nevada Revised Statutes pertaining to the emission of air contaminants into the atmosphere within the territorial limits of the Washoe County Health District.

020.020 CONTROL OFFICER - POWER AND DUTIES

The Control Officer, or his designated agent or representative, shall enforce the provisions of these regulations in his name, or in the name of the Board of Health, in any one or combination of the following ways:

- A. By issuing a written notice of violation, delivered personally or by registered or certified mail, to any person if reasonable cause exists to believe said person is violating these regulations.
- B. By issuing a warning to any person suspected of violating these regulations and by giving said person an opportunity to correct the cause of said violation prior to issuing a notice of violation or citation and referring the matter to the Board of Health or proper prosecuting authority in the Washoe County Health District;
- C. By requesting the District Attorney of the County of Washoe, or other proper agency, person or prosecuting authority in the Washoe County Health District, to institute appropriate criminal, civil or administrative proceedings against the person or persons responsible for violation of any of these regulations.
- D. By requesting the Board of Health to levy an appropriate administrative fine against any person found to have violated any of these regulations.
- E. By reviewing each variance to ascertain if the variance holder is meeting all provisions of the variance or dates set forth in the compliance schedule; if they are not met, the Control Officer may notify the variance holder personally or by registered or certified mail to this effect and may suspend or revoke any variances or reject any schedule of compliance involved with said infractions.
- F. By requesting the Board of Health to institute all necessary and proper legal proceedings authorized by law to carry out the purposes of these regulations and purposes of Chapter 445 of the Nevada Revised Statutes, including injunctive relief.

020.060 SAMPLING AND TESTING

In addition to any other testing requirements provided for in these regulations, the Control Officer or the Board of Health may require any person to conduct or make arrangements to conduct testing of any source to determine compliance with these regulations. In the event such testing is required, the Control Officer may do any of the following:

- A. Witness all tests as required by this Section.
- B. Determine whether or not generally recognized methods of measurement have been used to determine the quantity of emissions from the source being tested and if not additional testing may be required.

- C. Determine the point or points at or within the source where testing shall be done, to determine the actual discharge into the atmosphere.
- D. Make any modifications or adjustments in the testing requirements so as to be compatible with specific sampling conditions or needs as shown by good practice, judgement and experience.
- E. Require the cost of any testing to be paid by the owner or person responsible for any source of air contaminants.
- F. Require additional tests of any source of air contaminants tested in accordance with this Section, provided such separate or additional tests shall be conducted on behalf of the Board of Health and at said Board's expense.
- G. Require in writing the construction or creation of sampling holes, safe scaffolding and related facilities, to be provided at the expense of the owner or person responsible for any source of air contaminants being tested in accordance with this section.
- H. Require the owner or person responsible for any source of any air contaminants being tested pursuant to this section to provide a suitable power source to the point of testing, so that sampling instruments can be operated as required.
- I. All information gathered during any testing operation conducted pursuant to this Section will be provided to both the Control Officer or the Board of Health and the person or persons who own or control or are responsible for any source of air contaminants that are tested pursuant to this Section. All such information obtained pursuant to any testing required under this Section will be treated as confidential in accordance with the requirements of Section 020.055 of these regulations.

030.002

CONSTRUCTION OR MODIFICATION OF PERMITTED OPERATIONS (Amended 4/89, 10/20/93)

A written Authority to Construct shall be required to construct, erect, alter or replace any equipment which may cause, potentially cause, reduce, control or eliminate the issuance of air contaminants. A single Authority to Construct may be issued for all components of an integrated system or process. Plans and specifications drawn in accordance with acceptable engineering practices shall be required before issuance of an Authority to Construct. The applicant for any Authority to Construct must notify the Control Officer in the application of any source which is or will become subject to 40 CFR Part 70 upon completion of the proposed construction. An Authority to Construct is not needed for routine operation and maintenance. This includes maintenance prescribed by the manufacturer, replacement of worn or broken components with like equipment, etc.

030.500

NEW SOURCE REVIEW (NSR) APPLICABILITY

A major new source or major modification which would locate in an area designated as nonattainment for a pollutant for which the source or modification would be major shall not be allowed to construct unless the stringent conditions set forth below are met. These conditions are designed to insure that the new source's or modification's emission will be controlled to the greatest degree possible, that more than equivalent offsetting emission reductions ("emission offsets") will be progress toward achievement of the national ambient air quality standards. For

the purposes of this part, a reconstructed source shall be treated as a new stationary source. Since major facility definition and requirements vary upon State and EPA area designations, a map (Figure 1) is included to facilitate the determination of which requirements must be met.

030.502 REVIEW FOR EMISSION LIMITATION COMPLIANCE

Authority to construct any new source or modification shall be denied unless the new source or modification meets all applicable emission requirements in the Nevada State Implementation Plan (SIP), all applicable Federal New Source Performance Standards, and all applicable National Emission Standards For Hazardous Air Pollutants.

030.503 CONDITIONS FOR APPROVAL (Amended 7/28/93, Revised 10/25/95)

If a major stationary source or major modification would be constructed in an area designated as nonattainment for a pollutant for which the stationary source or modification is major, an Authority to Construct shall be denied unless the following conditions are met:

- Condition 1 The new source or modification is required to meet an emission limitation which specifies lowest achievable emission rate for such source.
- Condition 2 The applicant must certify that all existing major sources owned or operated by the applicant for any entity controlling, controlled by, or under common control of the applicant in the State of Nevada are in compliance with all applicable emission limitations and standards under the Clean Air Act (or are in compliance with an expeditious schedule which is federally enforceable or contained in a court decree).
- Condition 3 Emission reductions ("offsets") from existing sources in the same nonattainment area as the proposed new source or modification (whether or not under the same ownership) are required such that they shall not interfere with or contribute to the interference with the attainment of the applicable National Ambient Air Quality Standards. Only intrapollutant emission offsets will be acceptable (e.g. hydrocarbon increases may not be offset against SO₂ reductions). All emission reductions for the purpose of offsets shall be enforceable under the Clean Air Act.

The terms of the offset emission reductions shall be specified and federally enforceable prior to permit issuance.

All offset emissions reductions shall be, by the time a new or modified source commences operation, in effect and enforceable and shall assure that the total tonnage of increased emissions of the air pollutant from the new or modified source shall be offset by an equal or greater reduction.

All offset emissions reductions must be obtained from decreases in actual emissions from the same or other sources in the area. No emissions reductions otherwise required by the Clean Air Act or other regulatory action may be credited for the purpose of meeting offset requirements.

- Condition 4 The emission offsets will provide a positive net air quality benefit in the affected area. Atmospheric simulation modeling is not necessary for volatile organic compounds and NOX. Fulfillment of **Condition 3** and **Section 030.504** of these regulations will be considered adequate to meet this condition.
- Condition 5 The applicant must perform an analysis of at least two (2) alternative sites for the facility, production processes, and environmental control techniques. This analysis must demonstrate that the benefits of the proposed source significantly outweigh the environmental and social costs imposed as a result of its location, construction or modification.
- Condition 6 The Control Officer shall also require the review of any Major Stationary Source or Major Modification subject to New Source Review under this section that may have an impact on visibility in any mandatory Class I Federal area. Such visibility review will ensure the source's emissions will be consistent with making reasonable progress toward State and National visibility goals.
- Condition 7 The Administrator has not made a determination that the applicable implementation plan is not being adequately implemented for the attainment area in which the proposed source is to be constructed or modified.
- Condition 8 The proposed major source or major modification shall not contribute to nonattainment in, or interfere with maintenance by, any other State with respect to any national ambient air quality standard, or interfere with measures required to be included in the applicable implementation plan for any other State with respect to prevention of significant deterioration of air quality or to protect visibility.

All emission limitations shall be assessed in light of the limits of "good engineering practice" on stack heights as specified in **Section 030.614**.

Any major stationary source or major modification commencing construction without an Authority to Construct shall be subject to an enforcement action. Obtaining an Authority To Construct does not relieve the owner from complying with any applicable local, state or federal regulation.

At such time that a particular source or modification becomes a major stationary source or major modification solely by virtue of a relaxation in any enforcement limitation which was established after August 7, 1980, on the capacity of the source or modification otherwise to emit a pollutant, such as a restriction on hours of operation, then the requirements of regulations approved pursuant to this section shall apply to the source or modification as though construction had not yet commenced on the source or modification. All permits issued by the Control officer shall comply with all applicable terms of the State Implementation Plan for the non-attainment area in which the source is to be constructed.

030.504

EMISSION OFFSET RATIOS (Amended 7/28/93)

Emission reductions required under **Section 030.503** shall be offset at a ratio of 1.2 to 1 when the offset sources are five (5) miles or less from the new source or modification. For offset

sources that are greater than five (5) miles from the new source or modification, the applicant shall determine an offset ratio based on atmospheric simulation modeling or an equivalent method to ensure a positive net air quality benefit. In no case shall the offset ratio for source located greater than five miles from the proposed project be less than 1.2 to 1. Non-reactive organic compounds (those which are listed in 40 CFR 51.100(s)) cannot be used for offsets.

030.505 COMPLETENESS OF APPLICATION

Following submittal by the applicant, the Control Officer shall determine whether the application for permit to construct is complete not later than thirty (30) calendar days after receipt of the application, or after such longer time as both the applicant and the Control Officer may agree. Such determination shall be transmitted in writing immediately to the applicant at the address indicated on the application if it is determined to be incomplete, the determination shall specify which parts of the application are incomplete and how they can be made complete. Upon receipt by the Control Officer of any re-submittal of the application, a new thirty (30) day period in which the Control Officer must determine completeness shall begin. Completeness of an application or resubmitted application shall be evaluated on the basis of the guideline for such, published by the Control Officer. After acceptance of an application as complete, the Control Officer shall not subsequently request of an applicant any new or additional information which was not specified in the Control Officer's list of items to be included within such applications. However, the Control Officer may, during the processing of the application, request an applicant to clarify, amplify, correct or otherwise supplement the information required in such list in effect at the time the complete application was received. Making any such request does not waive, extend, or delay the time limits in this section for decision on the completed application, except as the applicant and Control Officer may both agree.

030.506 REQUIREMENTS FOR PUBLIC NOTICE (Amended 7/28/93, Revised 10/25/95)

For those sources subject to Section 030.500, following acceptance of an application as complete, the Control Officer shall:

- A. Perform the evaluations required to determine compliance with this section and make a preliminary written decision as to whether an Authority to Construct should be approved, conditionally approved, or disapproved. The decision shall be supported by a succinct written analysis;
- B. Within ten (10) calendar days following such decision, publish a notice by prominent advertisement in at least one (1) newspaper of general circulation in the County, stating the preliminary decision of the Control Officer and where the public may inspect the information required to be made available. The notice shall provide thirty (30) days from the date of publication for the public to submit written comments on the preliminary decision;
- C. At the time notice of the preliminary decision is published, make available for public inspection at the District office the information submitted by the applicant, the supporting analysis for the preliminary decision to grant or deny the Authority to Construct, including any proposed permit conditions, and the reasons therefore. The confidentiality of trade secrets shall be considered in accordance with **Section 020.055** of these regulations;
- D. No later than the date of publication of the notice, a copy of said notice and any appropriate data is to be sent to the Nevada Department of Conservation and Natural

Resources Division of Environmental Protection, the regional planning authority of Washoe County, local government offices, any Indian governing body whose lands may be affected by facility emissions, any Federal Land Manager whose lands may be affected (including visibility effects) and the Regional Office of the U.S. Environmental Protection Agency; and

- E. Applicant to bear cost of all public notices under this section and **Section 030.508**.
- F. The Control Officer shall contact any Federal Land Manager whose lands may be affected for comments on the proposed project within 30 days after the application has been deemed complete. This shall be for the purpose of obtaining comments on the proposed scope of review for affected lands and species.

030.507 COMMENTS

The Control Officer shall consider all written comments submitted during the thirty (30) day public comment period.

030.508 FINAL ACTION (Amended 7/28/93)

Within 180 days after acceptance of the application as complete and the completion of all required preconstruction monitoring and public notice periods (including those required under the District's Part 70 Permit regulations), the Control Officer shall take final action on the application after considering all written comments. The Control Officer shall provide written notice of the final action to the applicant, the U.S. Environmental Protection Agency, other Affected States and the Nevada Department of Conservation and Natural Resources and shall publish such notice in a newspaper of general circulation. The notice and all supporting documents shall be made available for public inspection during normal business hours.

030.905 SOURCES REQUIRING PART 70 PERMITS (Adopted 10/20/93, Revised 10/25/95)

A. Sources Required to Obtain a Part 70 Permit

The following sources and source categories shall be subject to Part 70 permitting:

1. Any Major Stationary Source;
2. Any source, including area sources, subject to a standard, limitation or other requirement under section 111 (New Source Performance Standards) of the Act;
3. Any source, including an area source, subject to a standard or other requirement under section 112 (Hazardous Air Pollutants) of the Act. However, a source which is subject to regulations or requirements only under section 112(r) of the Act shall not be required to obtain a permit;
4. Any source that includes one or more units subject to Title IV (Acid Rain) of the Act;
5. Any source in a source category designated by the EPA Administrator pursuant to 40 CFR Part 70.

B. Exemptions

The following sources and source categories shall be exempted from Part 70 permit requirements:

1. Any source subject to this regulation solely because it is subject to 40 CFR Part 60, subpart AAA, Standards of Performance for New Residential Wood Heaters.
2. Any source subject to this regulation solely because it is subject to 40 CFR Part 61, subpart M, National Emission Standards for Hazardous Air Pollutants for Asbestos, Standards for Demolition and Renovation.

3. Insignificant Emission Levels

Sources with the potential to emit less than an annual average of two (2) pounds per day of any criteria pollutant or less than one (1) pound per day of any hazardous air pollutant on a facility wide basis are exempted from all part 70 permitting requirements. Such sources may still be required by the Control Officer to obtain a non-Part 70 operating permit under District regulations. No source which is itself subject to an applicable requirement may qualify as an insignificant source.

4. All Dry Cleaning operations with the potential to emit less than ten (10) tons per year of any criteria or hazardous air pollutant shall be exempted for a period of five (5) years from the initial EPA Part 70 program approval date unless required to obtain a permit under **Section 030.905(A) (5)**.
5. All sources which would be subject to Part 70 permits under **Section 030.905 (A)** which are not major sources, affected sources or solid waste incineration units subject to permitting under section 129(e) of the act, are exempt from requirements to obtain a Part 70 permit for a period of 5 years from the date of EPA approval of the Washoe County Part 70 permit program.
6. Sources may seek exempt status by limiting facility emissions to levels below those defined for a major source as provided in **Section 010.090, part D (prohibitory status) and part E (Synthetic Minor sources)**.

C. Sources Which Must be Permitted by the State of Nevada

Any facility whose principal business is to generate electricity using steam derived from the burning of fossil fuels must obtain any necessary Part 70 permit(s) from the State of Nevada.



WASHOE COUNTY HEALTH DISTRICT

AIR QUALITY MANAGEMENT DIVISION



Public Health
Prevent. Promote. Protect.

DATE: January 24, 2013

TO: District Board of Health

FROM: Kevin Dick, Director

SUBJECT: Public Hearing: Proposed approval and adoption of the revisions to the "Washoe County Transportation Conformity Plan."
Agenda Item:

Staff Recommendation

Approve and adopt revisions to "Washoe County Transportation Conformity Plan."

Background

Nationwide, as well as in Washoe County, motor vehicles are a significant source of air pollutant emissions. The Clean Air Act requires that long and short-range transportation plans prepared by the local Metropolitan Planning Organization (MPO) conform to local air quality State Implementation Plans (SIPs). The Regional Transportation Commission (RTC) of Washoe County is the designated MPO for this area. Transportation Conformity SIPs are the federally enforceable plans that ensure this evaluation occurs. The *Washoe County Transportation Conformity Plan* has been revised to be submitted to the U.S. Environmental Protection Agency (EPA) as the Transportation Conformity SIP for Washoe County.

The purpose of the *Washoe County Transportation Conformity Plan* is to enhance regional air quality, promote a healthy community and implement the Clean Air Act and related federal requirements regarding the conformity of transportation plans, programs, and projects with local SIPs. This plan addresses transportation plans, programs, and projects developed by the United States Department of Transportation and the Washoe County Metropolitan Planning Organization or other recipients of funds.

The *Washoe County Transportation Conformity Plan* is based on the Clean Air Act section 176(c)(4)(E), which provides the requirements for conformity SIPs, and the transportation conformity regulations at 40 CFR Part 51.390 and Part 93.100-129. These regulations detail consultation criteria, policies, and procedures that Metropolitan Planning Organizations must follow when addressing transportation conformity issues.

The *Washoe County Transportation Conformity Plan* applies to all EPA designated nonattainment and maintenance areas for transportation related criteria pollutants within Washoe County, Nevada, now or in the future.

The primary element of the Washoe County Transportation Conformity Plan is Inter-Agency Consultation (IAC) and roles of stakeholders such as the Washoe County Health District, RTC, Nevada Department of Transportation, Nevada Division of Environmental Protection, EPA, Federal Highway Administration, Federal Transit Administration, and Truckee Meadows Regional Planning Agency. The Transportation Conformity Plan details each stakeholder's roles and responsibilities when transportation conformity analysis is required. Each of these stakeholders was involved in the development of the document.

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January 24, 2013
District Board of Health/Transportation Conformity Plan
Page 2 of 2

To reduce printing resources and expenses, the Transportation Conformity Plan is not included with this staff report. The document is 17 pages and can be accessed from the "News & Events" section of the Air Quality Management Division website, www.ourcleanair.com. A hard copy is available by contacting Mr. Daniel Inouye of AQMD at (775) 784-7214 or dinouye@washoecounty.us.

If the Transportation Conformity Plan is approved and adopted, it will be submitted to EPA through the Nevada Division of Environmental Protection as a revision to the Washoe County Transportation Conformity Plan. A notice of today's public hearing was published in the Reno Gazette-Journal on December 21, 2012, January 7, and January 17, 2013. The Transportation Conformity Plan has been available for public inspection at the AQMD website and office since December 21, 2012.

Recommended Motion

Move to approve and adopt revisions to the "Washoe County Transportation Conformity Plan" and direct Staff to forward it to EPA as an amendment to the Washoe County Transportation Conformity State Implementation Plan.

Alternatives

The District Board of Health may:

1. Elect not to adopt the revision to the I-SIP; or
2. Continue this public hearing and direct Staff to research some portion of the I-SIP and report back to the Board at a future meeting.



Kevin Dick
Division Director
Air Quality Management

Washoe County Transportation Conformity Plan



Prepared by:

Regional Transportation Commission of Washoe County

Washoe County Health District - Air Quality Management Division

January 2013

EXECUTIVE SUMMARY

The purpose of the *Washoe County Transportation Conformity Plan* is to enhance regional air quality, promote a healthy community and implement the Clean Air Act and related federal requirements regarding the conformity of transportation plans, programs, and projects with state implementation plans (SIP). This plan addresses transportation plans, programs, and projects developed by the United States Department of Transportation and the Washoe County Metropolitan Planning Organization or other recipients of funds.

The *Washoe County Transportation Conformity Plan* is based on the Clean Air Act section 176(c)(4)(E), which provides the requirements for conformity SIPs, and the transportation conformity regulations at 40 CFR Part 51.390 and Part 93.100-129. These regulations detail consultation criteria, policies, and procedures that Metropolitan Planning Organizations must follow when addressing transportation conformity issues.

The *Washoe County Transportation Conformity Plan* applies to all EPA designated nonattainment and maintenance areas for transportation related criteria pollutants within Washoe County, Nevada, now or in the future. The Regional Transportation Commission (RTC) will update this plan whenever the United States Congress enacts new regulations that affect transportation consultation criteria, policies, or procedures.

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Acronyms and Abbreviations

BCC—Washoe County Board of County Commissioners

CAA—Clean Air Act of 1970, as amended

CFR—Code of Federal Regulations

CO—carbon monoxide

CWG—Conformity Working Group

DOT—U.S. Department of Transportation

EPA—U.S. Environmental Protection Agency

FHWA—Federal Highway Administration

FTA—Federal Transit Administration

MPO—Metropolitan Planning Organization

NAAQS—National Ambient Air Quality Standards

NDEP—Nevada Division of Environmental Protection

NDOT—Nevada Department of Transportation

NEPA—National Environmental Policy Act

PM_{2.5}—particulate matter 2.5 microns or less in diameter

PM₁₀—particulate matter less than 10 microns in diameter

PPP—Regional Transportation Commission Public Participation Plan

RTC—Regional Transportation Commission of Washoe County

RTIP—Regional Transportation Improvement Program

RTP—Regional Transportation Plan

SIP—State Implementation Plan

TCM—Transportation Control Measure

TCP—Transportation Conformity Plan

TMRPA—Truckee Meadows Regional Planning Agency

WCAQMD—Washoe County Health District - Air Quality Management Division

A. Introduction

1. Washoe County Metropolitan Planning Organization

Pursuant to Nevada statute (NRS 277.A), the Regional Transportation Commission of Washoe County (RTC) is required to identify and fund needed regional street and highway improvements in Washoe County; serve as the Metropolitan Planning Organization (MPO); coordinate and facilitate the federally mandated transportation planning process for the Reno-Sparks urbanized area and for all of Washoe County; and provide public mass transportation to Washoe County.

Representatives elected from Washoe County, as well as from the cities of Reno and Sparks serve on the RTC Board of Directors. The Director of the Nevada Department of Transportation (NDOT) presides as an ex-officio member.

As the MPO, the RTC is charged with facilitating the federally mandated transportation planning process. Along with local entities and the state, the RTC identifies and coordinates all federal and state transportation projects and directs expenditures of local gas tax funds. These projects are denoted in RTC's Regional Transportation Plan (RTP) and Regional Transportation Improvement Program (RTIP). While developing these transportation plans, the RTC provides local residents and other members of the private sector with the opportunity to participate in the planning process.

2. Federal Regulations

Federal law requires that regional planning officials prepare both a transportation plan to benefit public mobility and an air quality plan to benefit public health. Under the federal Clean Air Act (CAA), transportation activities that receive federal funding or approval must be fully consistent with the plan developed to meet federal clean air standards, known as the state implementation plan (SIP). The SIP is developed by the Washoe County Health District - Air Quality Management Division (WCAQMD).

The CAA prohibits federal agencies and MPOs from approving any transportation plan, program, or project that fails to conform with the SIP. The 1990 CAA amendments expanded federal regulation by defining and explaining implementation plan conformity, and providing conditions for approval of transportation plans, programs, and projects. On the conformity issue, the CAA states:

“Conformity to the plan’s purpose of eliminating or reducing the severity and number of violations of the national ambient air quality standards and achieving expeditious attainment of such standards; and that such activities will not (i) cause or contribute to any new violation of any standard in any area; (ii) increase the frequency or severity of any existing violation of any standard in any area; or (iii) delay timely attainment of any standard or any required interim emission reductions or other milestones in any area.”

In addition to the CAA, the Code of Federal Regulations (CFR) Title 40, Parts 51 and 93 specify criteria and procedures for conformity determinations for transportation plans, programs, and projects.

The Environmental Protection Agency (EPA) requires that states with areas that do not meet the National Ambient Air Quality Standards (NAAQS, defined as nonattainment areas), submit a SIP revision containing the criteria and procedures for federal, state, and local agencies to determine the conformity

of transportation plans, programs, and projects with the SIP. This stipulation applies to all nonattainment and maintenance areas for transportation-related criteria pollutants for which the area is designated nonattainment or has a maintenance plan.

EPA has designated parts of Washoe County as nonattainment or maintenance areas for carbon monoxide (CO) and particulate matter less than 10 microns in diameter (PM₁₀). The conformity requirement applies to federal transportation decisions made in CO and/or PM₁₀ nonattainment or maintenance areas. As such, Washoe County must submit a Transportation Conformity Plan (TCP) to EPA, via the State of Nevada as a SIP revision.

3. Transportation Conformity

Conformity determinations for transportation programs and projects are made by MPOs in metropolitan areas and by state departments of transportation in nonmetropolitan areas. The RTC, as the MPO for Washoe County and the Reno-Sparks urbanized area, serves as the agency for conducting transportation conformity. These determinations are made in close coordination with the WCAQMD, NDOT, EPA, and other partner agencies.

The federal transportation conformity rule (40 CFR Part 93) applies to Long-Range Transportation Plans (RTP), regional transportation improvement programs (RTIP), and projects funded by the Federal Highway Administration (FHWA) or the Federal Transit Administration (FTA). Conformity determinations are required every four years, as well as when RTP or RTIPs are updated. If an MPO adopts a 20-year RTP, or a short-term federal RTIP, it must include a conformity analysis. In addition, sponsors of transportation projects that require federal approval are responsible for assessing project conformity. The FHWA, in consultation with the FTA and the EPA, provide approval of the conformity finding developed by the RTC for RTPs and RTIPs. RTC will coordinate with NDOT regarding project level conformity analysis.

a. Conformity Procedures

The RTC adheres to the criteria contained in the transportation conformity rule. For the RTP and RTIP, conformity first involves an emissions test. The air quality plans in the SIP forecast levels of pollutant emissions that will enable steady progress toward attainment of air quality standards by CAA deadlines, backed up by control strategies that will enable these levels to be reached. Such forecasts are divided by emission source; the motor vehicle emissions budget is the on-road mobile source portion of the forecast, after control measures are applied.

To be in conformity with the SIP, the region's transportation plan and program shall generate vehicle emissions that are within each applicable emissions budget. Emissions from transportation activities must conform to the purpose of the SIP to cause no new violations, no worsening of existing violations, and no delay in timely attainment. Conformity determinations are required for transportation plans extending through a 20-year period, evaluating the emissions-related impacts of all projects, programs and policies defined in the RTP and RTIP. Conformity rules also require timely implementation of transportation control measures (TCMs) and project-level analyses (hot-spot) for individual transportation projects.

b. Conformity Consultation

While the RTC shall adhere to the procedures in the federal transportation conformity rule, areas are required to tailor three sections of the rule for their local Conformity Plan. These sections cover procedures for interagency consultation, conflict resolution, and public consultation. The Clean Air Act requires that the conformity SIP contain:

- i. Consultation procedures;
- ii. Procedures to obtain written commitments to implement control measures that are not included in a MPO's plan and RTIP prior to using emissions reductions associated with the control measures in conformity determinations, and requirements that such commitments must be fulfilled; and
- iii. Procedures to obtain written commitments to mitigation measures prior to a project-level conformity determination, and a requirement that project sponsors must fulfill such commitments.

In general, the procedural aspect of the rule provides an effective mechanism to address and resolve problems as early as possible. The procedures set forth are clear, explicit, mandatory, and binding on all parties covered by the federal regulations.

B. Interagency Consultation

Local air and transportation agencies regularly consult with each other and involve state and federal agencies because joint transportation and air quality planning assists both conformity assessments and air pollution reduction efforts. This interagency consultation process involves the EPA, FHWA, FTA, state and local transportation agencies, and state and local air quality agencies. Local transportation and air quality planning processes are open to interested organizations and members of the public.

Consultation is required when the MPO affects transportation by making a conformity determination, or by the MPO or local air quality agency developing or revising a RTP, RTIP, or SIP. The RTC shall consult with all concerned agencies, such as the WCAQMD, NDOT, Nevada Division of Environmental Protection (NDEP), EPA, U.S. Department of Transportation (DOT), FHWA, and FTA, before making conformity determinations, or before developing or revising a RTP or RTIP. In addition, the RTC shall ensure that the public and any interested organizations have the opportunity to participate in the planning process. Similarly, the WCAQMD shall consult with these agencies and RTC before developing or revising a control strategy SIP, especially plans that establish motor vehicle emissions budgets or Transportation Control Measures. The RTC shall adhere to the transportation conformity procedures set forth in the TCP.

1. General Interagency Consultation as Applied to Washoe County

a. Conformity Working Group, Lead Agencies and Responsibilities

The RTC, along with any other governmental entity responsible for developing, submitting, and/or employing provisions of the TCP, shall consult with all concerned agencies, such as the WCAQMD, NDOT, NDEP, EPA, FHWA, FTA, and TMRPA as described below.

The interagency consultation process in Washoe County is implemented through the Conformity Working Group (CWG), which is comprised of stakeholder federal, state and regional agencies. Each CWG member agency and their area of responsibility are denoted in Table 1.

Table 1 Interagency Consultation Team Members & Overview of Responsibilities	
Agency	Area of Responsibility
U.S. Environmental Protection Agency	Review SIP, RTP, RTIP & other environmental documents, including regional plan and project level conformity determinations
Federal Highway Administration	Review SIP, RTP, RTIP & other environmental documents, including regional plan and project level conformity determinations
Federal Transit Administration	Review SIP, RTP, RTIP & other environmental documents, including regional plan and project level conformity determinations
Nevada Department of Environmental Protection	Develop SIPs for compliance with requirements
Nevada Department of Transportation	Develop STIP & incorporate RTIP, project level conformity air quality analysis
Regional Transportation Commission of Washoe County	Develop RTP, RTIP, conformity analysis, travel demand modeling, air quality analysis on RTP/RTIP, and scheduling interagency consultation meetings
Washoe County Health District - Air Quality Management Division	Develop SIP, regional air quality modeling, emission budgets, SIP analysis & findings
Truckee Meadows Regional Planning Agency	Develop regional population & employment forecasts

A CWG meeting is arranged by the RTC or WCAQMD to address any one of the actions listed below. Any CWG member or other party may initiate the consultation process at any time as needed.

- i. The development or review of a draft RTP, amendment/revision to the RTP requiring an air quality conformity analysis, or draft RTP conformity analyses. The RTC is the lead agency.
- ii. The development or review of a draft RTIP, amendment/revision to the RTIP requiring an air quality conformity analysis, or draft RTIP conformity analyses. The RTC is the lead agency.
- iii. The development of SIPs and any revisions that affect transportation or emissions budgets. The WCAQMD is the lead agency.
- iv. The notification of SIP findings that may lead to nonconformity and/or sanctions. The WCAQMD is the lead agency. Actions on SIPs that lead to conformity freezes are initiated by EPA.
- v. The scheduling of quarterly CWG meetings. The RTC is the lead agency.

- vi. *Transportation Control Measure Plan* revisions for inclusion into the SIP, as prepared by the RTC for the WCAQMD. The RTC is the lead agency.
- vii. The proposed changes to, or elimination of, mitigation measures for regionally significant conforming projects, as allowed pursuant to 40 CFR part 93. The project proponent is the lead agency for the event, and has discretionary project and mitigation requirement approval authority.
- viii. The proposed changes to, or elimination of, mitigation measures initiated by the RTC as conditions for the RTP or RTIP conformity determinations. The RTC is the lead agency.

b. General Roles and Responsibilities of Each Agency in the SIP Development and Transportation Planning Processes

The general interagency procedures broadly define each agency's roles and responsibilities during the SIP development and transportation planning processes, including technical meetings. The general roles and responsibilities of the RTC, WCAQMD, TMRPA, NDOT, NDEP, FWHA, and FTA in the consultation process are listed below in Table 2. These agencies may have additional specialized responsibilities, such as lead agency or specific interagency consultation duties, which are detailed in other TCP sections.

Table 2
CGW Agencies' Roles and Responsibilities in SIP Development and Transportation Planning Processes

Agency	SIP	RTIP	RTIP	RTIP	Conformity Findings
RTC	<ul style="list-style-type: none"> • Provide technical and policy consultation on emissions budgets criteria • Prepare system-based and non-regulatory TCMs, using WCAQMD • Provide consultation on proposed revisions that relate to transportation or emissions budgets • Monitor TCM implementation • Recommend revisions to replace ineffective TCMs 	<ul style="list-style-type: none"> • Develop, implement, and revise document and associated conformity analysis • Incorporate TCMs developed with the WCAQMD and NDOT 	<ul style="list-style-type: none"> • Develop, implement, and amend document and associated conformity analysis • Routinely obtain plans for regionally significant federal and nonfederal projects from NDOT and local agencies and consult with those agencies on possible alternatives, locations, design concepts, and scope for regional emissions analysis purposes • Regularly obtain changes to plans for regionally significant federal and nonfederal projects and alternatives, and make new RTIP conformity determinations • Solicit candidate projects from cities, the county and other participating agencies for inclusion in the draft and final document 	<ul style="list-style-type: none"> • Determine and document conformity between the SIP and RTP, the RTP, and amendments that involve projects not exempt from federal transportation conformity regulations • Conduct transportation modeling and regional analysis • Monitor and document implementation of TCMs in the SIP and consult with CWG • Obtain written commitments for project-level and regional mitigation/control measures identified as conditions for making conformity determinations for the RTP and RTIP • Include project-level mitigation in the assumptions used in the regional conformity analysis • Propose changes to, or elimination of, mitigation measures for conforming the RTP or the RTP to the CWG if requirements are satisfied without the mitigation or control measures • Provide consultation to the RTC on the proper use of motor vehicle emissions budgets and other regional emissions modeling issues • Collaborate with the RTC to develop, implement, and revise TCMs • Develop, solicit input on, and implement updated motor vehicle emissions factors • Provide consultation on draft RTPs and RTIPs 	
WCAQMD	<ul style="list-style-type: none"> • As the air pollution control agency of Washoe County, the Washoe County Health District provides the following: <ul style="list-style-type: none"> • Develop, implement, and revise transportation-related rulemakings, including attainment and maintenance demonstrations, reasonable further progress reports, regulatory TCMs, and actions that affect the motor vehicle emissions budget • Consult with the CWG on the development of transportation-related revisions, including development of new control measures and inclusion of TCMs • Adopt emissions obtained in consultation with the CWG and in accordance with other conformity provisions • Develop, solicit input on, and implement updated motor vehicle emissions factors/models for use in control strategy development • Provide consultation on emissions budget development and overall transportation-related revisions • Provide consultation on TCM development • Implement TCMs for which it has responsibility • Provide consultation to NDEP on proposed revisions to motor vehicle emissions factors 	<ul style="list-style-type: none"> • Provide consultation • Submit candidate projects and programs for inclusion in the draft 	<ul style="list-style-type: none"> • Provide consultation • Submit candidate projects and programs for inclusion in the draft 	<ul style="list-style-type: none"> • Provide consultation • Submit candidate projects and programs for inclusion in the draft 	
NDOT	<ul style="list-style-type: none"> • Review draft and final submittals for compliance with applicable requirements • Transmit submittals to the EPA • Provide consultation on emissions and dispersion modeling • Review, make findings on SIP revisions in a timely manner, and notify agencies of related proposed and final actions • Provide CAA guidance to other agencies • Provide agencies and the public with a 30-day comment period before making SIP findings 	<ul style="list-style-type: none"> • Submit candidate projects and programs for inclusion in the draft • Provide consultation on the draft and amendments • Review the final document and provide recommendations for the state transportation plan 	<ul style="list-style-type: none"> • Submit candidate projects and programs for inclusion in the draft • Review and comment on the draft RTP and amendments • Incorporate the RTIP into the federal state transportation improvement plan and submit it to the FHWA division office and the FTA regional office • Provide consultation 	<ul style="list-style-type: none"> • Provide consultation to the RTC on drafts • Ascertain the project-level conformity of regionally significant state transportation projects • Provide consultation to the FHWA division office on RTC conformity determinations • Provide consultation on drafts • Provide consultation to federal agencies, including FHWA and FTA, on final determinations 	
NDEP	<ul style="list-style-type: none"> • Review draft and final submittals for compliance with applicable requirements • Transmit submittals to the EPA • Provide consultation on emissions and dispersion modeling • Review, make findings on SIP revisions in a timely manner, and notify agencies of related proposed and final actions • Provide CAA guidance to other agencies • Provide agencies and the public with a 30-day comment period before making SIP findings 	<ul style="list-style-type: none"> • Provide consultation • Review and comment on revisions 	<ul style="list-style-type: none"> • Provide consultation • Review and comment on revisions 	<ul style="list-style-type: none"> • Provide consultation to the RTC on draft conformity determinations • Provide consultation to NDOT on final RTP and RTIP conformity determinations • Provide the most recent EPA-approved motor vehicle emissions factors for use in emission analysis • Provide guidance on transportation conformity rule to other agencies 	
EPA	<ul style="list-style-type: none"> • Review and comment on revisions within 30 days of EPA notification • Provide guidance to the RTC on the conformity implications of submittals 	<ul style="list-style-type: none"> • Provide consultation on drafts, determine conformity, and notify the CWG and other affected agencies 	<ul style="list-style-type: none"> • Provide consultation on drafts, determine conformity, and notify the CWG and other affected agencies 	<ul style="list-style-type: none"> • Provide consultation on draft findings to the RTC • Determine conformity of the RTP, the RTIP, and amendments • Consult with EPA and NDEP during the 30-day comment period before making conformity determinations • Provide guidance on transportation legislation 	
FHWA/FTA	<ul style="list-style-type: none"> • Provide consultation 	<ul style="list-style-type: none"> • Develop the regional 20-year Consensus Forecast for population and employment in collaboration with the Cities of Reno and Sparks and Washoe County • Provide consultation on draft documents and amendments 	<ul style="list-style-type: none"> • Provide consultation on the draft and amendments 	<ul style="list-style-type: none"> • Provide consultation on drafts 	
TMRPA					

c. CWG Interagency Consultation Procedures

The administrative procedures defined here are intended to promote effective and efficient information sharing and analysis. The regular consultation organizational level and interagency communication procedures are listed for CWG administrative meetings in Table 3, while additional consultation and communication procedures for document development and adoption are listed for the listed for the CWG lead agency in Table 4.

Table 3 General CWG Administrative Meeting Requirements	
Communicators and Communication Methods	Regular Consultation Organization Level and Interagency Communication Procedures
Meeting Attendees	<ul style="list-style-type: none"> •CWG representatives, or their designees, attend CWG meetings – see Table 1 for governmental agencies comprising CWG
Meeting Administrator	<ul style="list-style-type: none"> •The RTC shall administer quarterly meetings. •The quarterly meetings shall address any regulatory, policy, or technical developments that could affect conformity criteria or procedures. Topics at quarterly meetings may include: revisions, additions, and deletions to the adopted conformity criteria and procedures for Washoe County; and status reports on topics relevant to conformity, which includes, among other things, sanction clocks, transportation-related SIPs, changes to regulations or tools, and the latest conformity findings. •The lead CWG agency, whether it is the RTC, WCAQMD, or the Project Proponent, shall administer specifically convened or out-of-cycle meetings. •A CWG agency member may request an out-of-cycle meeting to consider relevant topics or urgent matters. Such a request shall be made to or by the lead CWG agency, accompanied by the reason for the meeting. The CWG lead agency shall administer the meeting and follow the procedures set forth in the TCP, unless two or more members agree that the topic does not fit within this framework. In that case, the CWG shall adopt a reasonably equivalent framework.
General Communication Requirements of the Meeting Administrator	<ul style="list-style-type: none"> •Arrange meeting times and locations, and give proper notice to CWG members and interested parties •Provide all meeting materials, including agendas, initial documents, and proposed alternatives to CWG members at least one week before a meeting •Develop meeting minutes •Distribute agendas and minutes to other members of the CWG and any interested parties •Provide sufficient information at either the initial meeting or a subsequent meeting to enable members to review and comment knowledgeably •Provide any other public information needed to form a common basis of understanding •Supply all relevant documents and information to member agencies promptly •Maintain a complete and accurate record of all agreements, planning and programming processes, and consultation activities, and make the record available for public inspection upon request •Notify the public that they may obtain a draft, or final document and supporting materials •Distribute final documents, such as transportation-related SIP submittals, RTIPs, RTPs, conformity determinations, to CWG members at the same time they are submitted to appropriate federal agencies
Communication Methods at Meetings	<ul style="list-style-type: none"> •All CWG meetings shall be conducted face-to-face or through conference calls
Communication Methods between Meetings	<ul style="list-style-type: none"> •When communicating between meetings, email is an appropriate form of communication for, among other things, disseminating information, requesting information, asking/answering questions, and receiving/sending comments •The meeting administrator may set forth more specific email procedures, if warranted

**Table 4
CWG Lead Agency Document Development and Adoption**

Responsibilities	Lead Agency Requirements
General Consultation	<ul style="list-style-type: none"> • Provide an opportunity for early review and comment on draft documents, and convene CWG meetings early in the process of finalizing documents • Facilitate advisory committee reviews of draft materials • Provide local agencies and the public with opportunities for input through regional advisory committees and workshops • Consider CWG member views before taking any actions and provide a prompt, substantive response before making final decisions • Provide, upon request by any member of the CWG, a written response
Conformity Analysis	<ul style="list-style-type: none"> • Seek tentative approval at the initial meeting from the CWG for planning assumptions and modeling approaches • Hold initial meeting before the RTC completes any analyses • Hold initial meeting at least 60 days before the draft document is either issued or accepted for distribution by the policy board
TCM Analysis	<ul style="list-style-type: none"> • Recommend revisions to replace ineffective TCMs and revise the TCM list whenever the SIP is updated • Distribute the initial and revised list of TCMs to the CWG for their review and comment • Prepare this document for inclusion in SIP revisions, which are written by WCAQMD • Implement TCMs on schedule where responsible or otherwise monitor TCM implementation
Information Dissemination	<ul style="list-style-type: none"> • Provide in written form, either at the first meeting or a subsequent meeting, the relevant requirements and criteria, the analytical approach, and any proposed alternatives • Proposed alternatives for the RTIP, the RTP, and conformity determinations may consist of: emissions data analyses, model documentation and assumptions used to perform a conformity determination, and project categories utilized in the analysis, including TCMs • Proposed alternatives for transportation-related or emissions budget-related SIP revisions may consist of the following materials, as determined appropriate by the CWG: emissions data analyses; model documentation and assumptions used to prepare emissions budgets, control strategies, and maintenance demonstrations; the analytical process that determined which control strategies, including TCMs, to include in the SIP; and the process that determines the emissions reductions associated with each strategy
Draft Analyses	<ul style="list-style-type: none"> • Provide draft analyses through the circulation of draft RTPs, RTIPs, conformity determinations and transportation-related SIP submittals • Give CWG agencies at least 30 days to review and comment • Consider all comments before issuing a draft document
Meeting Topic Dissemination	<ul style="list-style-type: none"> • Discuss meeting topics with the RTC and WCAQMD advisory committees and the public, as appropriate
Soliciting Federal/State Involvement	<ul style="list-style-type: none"> • Seek comments from affected federal and state agencies by encouraging participation in document development and soliciting supporting material submissions • Seek input from state and federal agencies during the interagency consultation process, and garner those agencies' concurrence on significant issues prior to the completion of any analyses • Send meeting minutes, agendas, and supporting documentation
Draft Documents	<ul style="list-style-type: none"> • Circulate, or provide ready access to, draft documents and supporting materials, for RTPs, RTIPs, conformity determinations, and transportation-related SIP submittals, for comment before formal adoption or publication • Provide CWG agencies with at least 30 days to review draft documents and supporting materials, and submit comments in writing to the lead agency • Provide written responses to a CWG agency's comments within 30 days of receipt of a CWG agency's comments
Document Approval	<ul style="list-style-type: none"> • Submittal of adopted document to state and federal officials for final approval

3. Specific Interagency Consultation Processes.

Table 2 sets forth well-defined rules, responsibilities and procedures for the CWG agencies. In addition, certain CWG agencies shall also follow the interagency consultation procedures in specific instances as denoted in Table 5.

Table 5 Specific Interagency Consultation	
Affected CWG Member(s)	Conduct Requiring Interagency Consultation
Lead CWG Agency, RTC, WCAQMD, NDOT, NDEP, EPA, FTA, FHWA, DOT	<ul style="list-style-type: none"> •Evaluating and choosing which data, model(s), associated methods, and assumptions are to be utilized in hot spot analyses, preparing motor vehicle emissions budgets for SIPS, and regional transportation emissions analyses, which includes forecasting vehicle miles traveled •Determining which minor arterials and other transportation projects should be considered regionally significant in analyzing regional emissions that are in addition to those functionally classified as principal arterial or higher, or as fixed guideway systems, or extensions that offer an alternative to regional highway travel •Determining which projects should be considered to have a significant change in design concept and scope from the RTP or RTIP •Evaluating whether projects otherwise exempted from meeting the requirements of the transportation conformity regulations should be treated as non-exempt where potential adverse emissions impacts may exist for any reason •Notifying other agencies of RTP and RTIP revisions or amendments which only add or delete exempt projects •Determining localized CO, PM₁₀, and PM_{2.5} concentrations, also known as hot spot analysis, and specifically identifying projects at sites in PM₁₀ nonattainment areas that have vehicle and roadway emission and dispersion characteristics similar to those at sites with violations verified by monitoring and thus require quantitative PM₁₀ hot spot analysis •Choosing conformity tests and methodologies for isolated rural nonattainment and maintenance areas
Lead CWG Agency, RTC, WCAQMD, NDOT, NDEP	<ul style="list-style-type: none"> •Evaluating events that trigger new conformity determinations, in addition to those listed in 40 CFR 93.104 •Consulting on emissions analysis for transportation activities that cross borders of MPOs, nonattainment areas, or air basins
RTC, Lead CWG Agency, NDOT	<ul style="list-style-type: none"> •Planning, analyzing and determining the conformity of all projects outside the metropolitan planning area and within the nonattainment or maintenance areas
Lead CWG Agency, RTC, NDOT, Other CWG Members	<ul style="list-style-type: none"> •Ensure that plans for construction of regionally significant projects, which are not FHWA/FTA projects, are regularly disclosed to the RTC including projects by fund recipients designated under U.S.C. Title 23 or 49
Lead CWG Agency, RTC, Other CWG Members	<ul style="list-style-type: none"> •Monies have been received pursuant to U.S.C. Title 23 or 49, for the location, design concept and scope of projects that have been disclosed to the RTC, but whose sponsors have not developed the projects in enough detail to perform a regional emissions analysis •Projects subject to this requirement include: alternative locations, design concept and scope, and the no-building option. CWG members must notify the RTC of any changes to construction plans immediately
RTC	<ul style="list-style-type: none"> •Design, schedule, and funding of research and data collection efforts and regional transportation model development
Lead CWG Agency	<ul style="list-style-type: none"> •Provide agenda and support materials, including applicable implementation plans, implementation plan revisions, and supporting information, to each CWG agency, within one week of scheduled meetings

4. Resolving Conflicts.

Issues may arise between any of the CWG members during the conformity determination process. Agencies shall make every effort to resolve differences quickly and effectively. Initially, member agencies shall hold

informal discussions and/or personal meetings between the agencies to resolve issues quickly and effectively. Table 6 details the resolution process. Issues involving statutory mandates and/or duties of the WCAQMD or the Washoe County Health District shall be exempt from this process and shall be decided by the Washoe County District Board of Health.

Table 6 Conflict Resolution Steps for Local and State Agencies		
Resolution Steps	Disagreements Among Local or Regional Agencies	Disagreements Involving State Agencies
Step 1: Initial Resolution	Member Agencies shall hold informal discussions	Agency heads or their policy-level representatives shall hold personal meetings
Step 2: Appellate Procedures	If no resolution is reached, the issue shall be presented to a panel consisting of the Executive Directors of the RTC and TMRPA and the District Health Officer or their designees. The panel has 14 days* to make a recommendation	If no resolution is reached, the issue shall be presented to the NDEP head. The NDEP has 14 days* to make a recommendation
Step 3: Final Resolution	If the panel's recommendation is not acceptable, it will be appealed to the RTC Board. The RTC shall have 60 days from date of referral to decide the issue	If NDEP's recommendation is not acceptable, it will be appealed to the Governor of Nevada. The Governor may delegate the role of hearing the appeals to another state official or agency. The Governor shall not delegate this role to the NDEP, a state transportation commission or board, any agency that has any of these functions, or the RTC

* The 14-day period shall commence when the RTC or the NDOT confirms that the panel/NDEP director has received all comments.

5. Public Consultation Procedures.

Pursuant to federal regulations, affected agencies making conformity determinations on transportation plans, programs, and projects shall establish a proactive public involvement process. Table 7 denotes general consultation procedures.

Table 7 Public Consultation Procedure Requirements for CWG Agencies	
Consultation Procedures	Requirements of CWG Agencies
General	<ul style="list-style-type: none"> •Public outreach will be in conformance with the RTC's Public Participation Plan (PPP) •The RTC shall maintain a comprehensive committee structure that provides a forum for local agencies and the public to participate in the regional transportation planning process and associated air quality conformity determinations •The WCAQMD shall provide for broad-based community involvement in state and federal air quality compliance activities •Local agency and public participation shall be encouraged through policy board meetings of member agencies, public hearings, and public information programs •The RTC shall specifically address in writing all public comments

C. Conformity Procedures

Under the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users, conformity SIPs shall include conformity procedures that address 40 CFR 93.122(a)(4)(ii) and 93.125(c) (all remaining conformity procedures apply automatically).

1. Enforceable Written Commitments Required for Emissions Reduction Credits

Emissions reduction credit from control measures that are not included in the transportation plan and RTP, and that do not require a regulatory action in order to be implemented, may not be included in the emissions analysis unless the conformity determination includes written commitments to the implementation from the appropriate entities.

Prior to making a conformity determination on the RTP or RTIP, the RTC, as lead agency, shall not include emissions reductions credits from any control measures that are not included in the RTP or TIP and that do not require a regulatory action in the regional emissions analysis used in the conformity analysis unless the RTC or FHWA/FTA obtains written commitments¹, from the appropriate entities to implement those control measures. The written commitments to implement those control measures shall be fulfilled by the appropriate entities.

2. Enforceability of Design Concept and Scope; Project-Level Mitigation and Control Measures

Prior to making a project-level conformity determination for a transportation project, FHWA/FTA shall obtain written commitments from the project sponsor and/or operator to implement any project-level mitigation or control measures in the construction or operation of the project identified as conditions for NEPA approval.

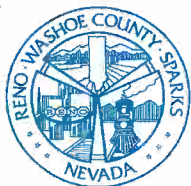
The written commitments to implement those project-level mitigation or control measures shall be fulfilled by the appropriate entities. Prior to making a conformity determination on the RTP or RTIP, the RTC shall ensure any project-level mitigation or control measures are included in the project design concept and scope and are appropriately identified in the regional emissions analysis used in the conformity determination. Prior to making a project-level conformity determination, the lead CWG agency shall obtain written commitments before such mitigation or control measures are used in a project-level hot-spot conformity analysis.

¹ A written commitment includes a description of the action to be taken; a schedule for the completion of the action; a demonstration that funding necessary to implement the action has been authorized by the appropriating or authorizing body; and an acknowledgment that the commitment is an enforceable obligation.

APPENDIX A Documentation of Public Review Process

This section will contain documentation on the preparation and review of the document including the working group, RTC advisory committees, RTC Board and Washoe County District Board of Health.

DRAFT



Washoe County Health District



Public Health
Prevent. Promote. Protect.

January 14, 2013

To: Members District Board of Health

From: Eileen Stickney

Subject: Public Health Fund Revenue and Expenditure Report for December 2012 Agenda Item No. -

Recommendation

Staff recommends that the District Board of Health accept the attached report of revenues and expenditures for the Health Fund for December 2012 of fiscal year 13.

Background

The attached reports are for the accounting period 6/13 and the percentages should approximate 50% of the year. The total revenues and expenditures for the current year (FY13) compared to last year (FY12) are as follows:

Dec 2012	FY13 – REV	FY12 – REV	FY13 – EXP	FY12 – EXP
Transfer	17%	8%		
AHS	41%	45%	50%	43%
AQM	54%	46%	40%	39%
CCHS	30%	33%	47%	45%
EHS	39%	36%	44%	47%
EPHP	47%	41%	49%	43%
TOTAL	42%	38%	46%	42%

The Environmental Oversight Account for December is \$108,299.71.

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

Administrative Health Services Officer

Enclosure

Washoe County Health District
REVENUE
Periods 1-6, FY13

Accounts	2013 Plan	2013 Actuals	Balance	Act%	2012 Plan	2012 Actual	Balance	Act%
422503 Environmental Permits	51,500.00	26,082.00	25,418.00	51	46,900.00	23,112.00	23,788.00	49
422504 Pool Permits	68,000.00	12,619.00	55,381.00	19	63,000.00	12,325.85	50,674.15	20
422505 RV Permits	10,500.00	5,811.00	4,689.00	55	9,700.00	5,240.00	4,460.00	54
422507 Food Service Permits	369,000.00	187,234.00	181,766.00	51	342,000.00	164,429.00	177,571.00	48
422508 Wat Well Const Perm	20,000.00	13,077.00	6,923.00	65	27,000.00	6,399.00	20,601.00	24
422509 Water Company Permits	2,500.00	1,002.00	1,498.00	40	3,500.00	702.00	2,798.00	20
422510 Air Pollution Permits	448,037.00	232,909.25	215,127.75	52	370,485.00	154,127.50	216,357.50	42
422511 ISDS Permits	49,000.00	26,944.00	22,056.00	55	47,000.00	30,304.00	16,696.00	64
422513 Special Event Permits	79,000.00	38,150.00	40,850.00	48	74,000.00	40,931.00	33,069.00	55
422514 Initial Applic Fee	27,000.00	13,246.00	13,754.00	49	25,000.00	10,790.00	14,210.00	43
* Licenses and Permits	1,124,537.00	557,074.25	567,462.75	50	1,008,585.00	448,360.35	560,224.65	44
431100 Federal Grants	5,494,407.51	2,044,249.82	3,450,157.69	37	6,249,019.10	2,201,822.75	4,047,196.35	35
431105 Federal Grants - Indirect	76,088.00	34,667.94	41,400.06	46	38,708.00	50,380.36	11,672.36	130
432100 State Grants	281,857.00	213,559.97	68,297.03	76	458,327.00	278,484.74	179,842.26	61
432310 Tire Fee NRS 444A.090	418,766.00	115,359.18	303,406.82	28	452,000.00	222,991.65	229,008.35	49
432311 Pol.Ctr. 455B.830	300,000.00	162,040.00	137,960.00	54	297,006.07	162,600.00	134,406.07	55
* Intergovernmental	6,571,098.51	2,569,876.91	4,001,221.60	39	7,495,060.17	2,916,279.50	4,578,780.67	39
460500 Other Immunizations	89,000.00	33,647.00	55,353.00	38	89,000.00	41,295.73	47,704.27	46
460501 Medicaid/Clinical Services	36,200.00	44.46	36,244.46	0	40,300.00	12,723.26	27,576.74	32
460503 Childhood Immunizations	30,000.00	9,436.00	20,564.00	31	59,000.00	16,025.54	42,974.46	27
460508 Tuberculosis	4,100.00	2,635.45	1,464.55	64	6,250.00	1,677.48	4,572.52	27
460510 IT Overlay	113,400.00	56,944.00	56,456.00	50	96,800.00	44,185.00	52,615.00	46
460511 Birth and Death Certificates	400,000.00	220,012.00	179,988.00	55	280,000.00	210,766.00	69,234.00	75
460512 Duplication Service Fees	2,700.00	237.78	2,462.22	88	2,700.00	22.86	2,677.14	84
460513 Other Health Service Charges	13,900.00	2,577.00	123.00	95	9,000.00	837.00	1,863.00	31
460514 Food Service Certification	2,500.00	8,229.00	5,671.00	59	300.00	9,943.00	943.00	110
460515 Medicare Reimbursement	2,250.00	3,056.00	2,250.00	100	4,750.00	8,752.83	4,002.83	184
460516 Pgm Inc-3rd Pfty Rec	7,000.00	11,460.55	3,944.00	44	7,000.00	3,541.00	3,459.00	51
460517 Influenza Immunization	23,000.00	15,359.00	11,539.45	50	28,000.00	11,110.16	16,889.84	40
460518 STD Fees	44,000.00	15,359.00	28,641.00	35	42,000.00	16,023.00	25,977.00	38
460520 Eng Serv Health	2,500.00	879.00	1,621.00	35	2,500.00	2,436.00	64.00	97
460521 Plan Review - Pools & Spas	17,000.00	12,407.00	4,593.00	73	17,000.00	7,669.00	9,331.00	45
460523 Plan Review - Food Services	44,000.00	14,699.83	29,300.17	33	44,000.00	15,475.39	28,524.61	35
460524 Family Planning	30,000.00	18,894.00	11,106.00	63	24,000.00	14,671.00	9,329.00	61
460525 Plan Review - Vector	40,000.00	18,651.00	21,349.00	47	25,000.00	15,254.00	9,746.00	61
460526 Plan Review-Air Quality	100,000.00	47,476.00	52,524.00	47	76,000.00	44,982.00	31,018.00	59
460527 NOE-AQM	84,000.00	35,156.00	48,844.00	42	66,000.00	35,165.00	30,835.00	53
460528 NESHAP-AQM	41,000.00	23,117.00	17,883.00	56	28,000.00	15,918.00	12,082.00	57
460529 Assessments-AQM	2,600.00	2,838.00	238.00	109	3,115.00	2,670.00	445.00	86
460530 Inspector-Registr-AQ	95,000.00	53,677.00	41,323.00	57	165,000.00	43,824.00	121,176.00	27
460531 Dust Plan-Air Quality	8,500.00	4,134.00	4,366.00	49	8,000.00	87.00	87.00	48
460532 Plan Rwr/Hotel/Motel	17,300.00	7,266.00	10,034.00	42	16,000.00	6,736.00	4,136.00	42
460533 Quick Start	5,700.00	831.77	4,868.23	15	13,400.00	3,643.00	9,757.00	27
460534 Child Care Inspection	1,253,150.00	603,897.92	649,252.08	48	1,153,115.00	589,297.25	563,817.75	51
460535 Pub Accomod/Inspectn	41,934.00	20,012.65	21,921.35	48	41,450.00	22,169.63	19,280.37	53
460570 Education Revenue								
Charges for Services								
484050 Donations Federal Pgm Income								

Washoe County Health District
 REVENUE
 Periods 1-6, FY13

Accounts	2013 Plan	2013 Actuals	Balance	Act%	2012 Plan	2012 Actual	Balance	Act%
484195 Non-Govt Grants					5,000.00-		5,000.00-	
485100 Reimbursements		907.44-	907.44			150.00-	150.00	
485110 Workers Comp Reimb		135.00-	135.00					
485121 Jury Reimbursements		42.45-	42.45					
485300 Other Misc Govt Rey					805,650.00-	1,253.80-	804,396.20-	0
* Miscellaneous	41,934.00-	21,097.54-	20,836.46-	50	852,100.00-	23,573.43-	828,526.57-	3
** Revenue	8,990,719.51-	3,751,946.62-	5,238,772.89-	42	10,508,860.17-	3,977,510.53-	6,531,349.64-	38

Washoe County Health District
EXPENSES
Periods 1-6, FY13

Accounts	2013 Plan	2013 Actuals	Balance	Act%	2012 Plan	2012 Actual	Balance	Act%
701110 Base Salaries	9,412,433.37	4,371,764.51	5,040,668.86	46	9,478,553.73	4,355,349.95	5,123,203.78	46
701120 Part Time	527,508.89	265,654.84	261,854.05	50	542,290.09	272,416.21	269,873.88	50
701130 Pooled Positions	449,368.86	196,574.55	252,794.31	44	425,879.50	177,649.35	248,230.15	42
701140 Holiday Work	1,450.00	1,296.51	153.49	89	1,200.00	2,539.91	1,339.91	212
701200 Incentive Longevity	161,762.00	84,421.14	77,340.86	52	162,380.00	82,524.60	79,855.40	51
701300 Overtime	50,825.11	22,253.39	28,571.72	44	57,406.25	22,982.61	34,423.64	40
701400 Standby Pay						5,427.32	5,427.32	
701408 Call Back	1,000.00	182.10	817.90	18	3,000.00	376.24	2,623.76	
701412 Salary Adjustment	40,388.54		40,388.54		101,818.78		101,818.78	
701413 Vac Payoff/Sick Pay-Term		28,585.45	28,585.45			98,236.41	98,236.41	
701417 Comp Time		17,520.48	17,520.48			13,896.47	13,896.47	
701419 Comp Time - Transfer		9,723.83	9,723.83					
701500 Merit Awards								
* Salaries and Wages	10,644,736.77	4,997,976.80	5,646,759.97	47	10,679,709.73	5,031,399.07	92,818.62	47
705110 Group Insurance	1,443,538.70	679,489.67	764,048.43	47	1,489,390.16	682,906.59	5,648,310.66	47
705199 Lab Cost Sav-Benefit						2,107.00	806,483.57	
705210 Retirement	2,388,527.05	1,117,956.84	1,270,570.21	47	2,386,170.12	1,107,692.01	2,107.00	46
705215 Retirement Calculation						4,667.24	1,258,478.11	47
705230 Medicare April 1986	137,846.64	67,310.95	70,535.69	49	355,282.00	66,353.26	350,614.76	1
705320 Workmens Comp	63,932.41	31,966.32	31,966.09	50	137,288.33	63,674.96	70,935.07	48
705330 Unempoly Comp	15,533.45	15,533.45	15,533.45	100	63,088.76	38,674.96	24,413.90	61
705360 Benefit Adjustment	10,656.00		10,656.00		14,892.40	14,892.90	11,708.00	100
* Employee Benefits	4,060,033.66	1,912,257.23	2,147,776.42	47	4,437,819.77	1,913,079.96	2,524,739.91	43
710100 Professional Services	897,831.38	218,976.37	678,855.01	24	1,126,661.42	80,603.96	1,046,057.46	7
710105 Medical Services	9,264.00	1,737.50	7,526.50	19	8,914.00	757.00	8,157.00	8
710108 MD Consultants	46,900.00	21,787.50	25,112.50	46	60,900.00	27,352.50	33,537.50	45
710110 Contracted/Temp Services	68,500.00	15,052.96	53,447.04	22	89,365.00	15,799.48	73,565.52	18
710119 Subrecipient Payments						186,242.00	84,629.36	55
710200 Service Contract	105,243.00	37,135.89	68,107.11	35	69,433.00	52,941.54	16,491.46	76
710205 Repairs and Maintenance	20,541.91	3,191.62	17,350.29	16	19,940.00	2,434.26	17,505.74	12
710210 Software Maintenance	16,200.00	13,920.00	2,280.00	86	12,000.00	9,000.00	3,000.00	75
710300 Operating Supplies	130,502.55	63,315.14	67,187.41	49	158,652.00	72,747.00	85,905.00	46
710302 Small Tools & Allow	3,685.00		3,685.00		1,685.00		1,685.00	
710308 Animal Supplies	2,000.00	343.91	1,656.09	17	2,000.00	323.75	1,676.25	16
710319 Chemical Supplies	231,950.00	232,079.07	129.07	100	281,950.00	265,391.74	16,558.26	94
710326 Signs and Markers								
710334 Copy Machine Expense	28,166.89	10,407.18	17,759.71	37	29,324.89	10,198.83	1,336.50	35
710350 Office Supplies	39,970.01	17,047.54	22,922.47	43	44,277.01	17,668.56	26,618.45	40
710355 Books and Subscriptions	7,359.00	1,904.20	5,454.80	26	7,684.00	4,311.05	3,372.95	56
710360 Postage	21,360.00	7,751.92	13,608.08	36	21,085.00	8,592.41	12,492.59	41
710361 Express and Courier	610.75	356.53	254.22	58	780.00	144.06	635.94	18
710391 Fuel & Lube	100.00		100.00		100.00		100.00	
710500 Other Expense	42,473.51	16,359.04	26,114.47	39	28,331.31	9,735.01	18,596.30	34
710502 Printing	28,155.00	8,838.96	19,316.04	31	17,557.00	5,442.39	12,114.61	31
710503 Licenses & Permits	8,870.00	5,672.39	3,197.61	64	8,540.00	2,345.25	6,194.75	27
710505 Rental Equipment	3,324.00	919.00	2,405.00	28	2,300.00	777.00	1,523.00	34
710506 Dept Insurance Deductible		302.58	302.58			150.00	150.00	
710607 Network and Data Lines	6,240.00	5,120.94	1,119.06	82	5,960.00	5,838.85	121.15	98

Washoe County Health District
EXPENSES
Periods 1-6, FY13

Accounts	2013 Plan	2013 Actuals	Balance	Act%	2012 Plan	2012 Actual	Balance	Act%
710508 Telephone Land Lines	45,215.00	18,682.54	26,532.46	41	46,189.00	18,761.16	27,427.84	41
710509 Seminars and Meetings	32,070.00	12,090.50	19,979.50	38	33,040.00	12,566.00	20,474.00	38
710512 Auto Expense	19,368.00	6,844.17	12,523.83	35	23,268.00	6,651.86	16,616.14	29
710514 Regulatory Assessments	11,920.00	8,940.00	2,980.00	75				
710519 Cellular Phone	18,290.00	5,048.43	13,241.57	28	17,240.00	6,543.03	10,696.97	38
710529 Dues	11,576.00	5,486.00	6,090.00	47	6,886.00	3,327.00	3,659.00	48
710535 Credit Card Fees	11,455.00	5,472.87	5,982.13	48	10,495.00	4,685.33	5,809.67	45
710546 Advertising	44,728.86	39,623.71	5,105.15	89	42,465.52	43,782.09	1,316.57	103
710551 Cash Discounts Lost		19.95	19.95			22.49	22.49	
710552 Moving Costs						1,046.14	1,046.14	
710577 Uniforms & Special Clothing	3,000.00	2,297.83	702.17	77	3,150.00		3,150.00	
710585 Undesignated Budget	21,769.00		21,769.00		923,058.00		923,058.00	
710600 LT Lease-Office Space	113,439.00	56,115.87	57,323.13	49	113,439.00	65,054.54	48,384.46	57
710703 Biologicals	249,583.98	103,652.20	145,931.78	42	242,794.79	71,358.16	171,436.63	29
710714 Referral Services	9,040.00		9,040.00		9,040.00		9,040.00	
710721 Outpatient	110,399.15	33,118.99	77,280.16	30	97,399.00	32,728.66	64,670.34	34
710872 Food Purchases	9,100.00	2,592.07	6,507.93	28	3,726.00	386.24	3,339.76	10
711010 Utilities	2,880.00		2,880.00		3,483.00		3,483.00	
711100 ESD Asset Management	17,040.00	8,352.00	8,688.00	49	17,160.00	9,152.00	8,008.00	53
711113 Equip Srv Replace	25,936.64	15,542.10	12,396.54	52	44,139.00	23,296.58	20,842.42	53
711114 Equip Srv O & M	42,163.13	21,614.86	20,548.27	51	57,849.02	23,127.54	34,721.48	40
711115 Equip Srv Motor Pool	16,741.00		16,741.00			15,625.48	15,625.48	
711117 ESD Fuel Charge	51,253.35	28,789.89	22,463.46	56	48,768.76	28,829.26	19,939.50	59
711119 Prop & Liab Billings	80,283.41	40,141.68	40,141.73	50	77,036.32	38,518.14	38,518.18	50
711210 Travel	194,372.25	30,116.49	164,255.76	15	163,845.00	25,382.38	138,462.62	15
711300 Cash Over Short						3.00	3.00	
711400 Overhead - General Fund	2,553,372.00	1,276,686.00	1,276,686.00	50				
711502 Build Imp nonCapital						127.00	127.00	
711504 Equipment nonCapital	108,441.08	100,424.24	8,016.84	93	66,984.98	75,438.50	8,453.52	113
* Services and Supplies	5,522,685.85	2,501,872.63	3,020,813.22	45	4,235,138.02	1,201,910.36	3,033,227.66	28
781004 Equipment Capital	384,770.01	96,589.40	288,180.61	25	529,183.12	262,214.75	266,968.37	50
* Capital Outlay	384,770.01	96,589.40	288,180.61	25	529,183.12	262,214.75	266,968.37	50
** Expenses	20,612,226.28	9,508,696.06	11,103,530.22	46	19,881,850.64	8,408,604.04	11,473,246.60	42
485196 Insur Reimb-F/A Less		150.00	150.00					
* Other Fin. Sources		150.00	150.00					
621001 Transfer From General	8,623,891.00	1,437,316.00	7,186,575.00	17	7,250,850.00	604,238.00	6,646,612.00	8
* Transfers In	8,623,891.00	1,437,316.00	7,186,575.00	17	7,250,850.00	604,238.00	6,646,612.00	8
** Other Financing Src/Use	8,623,891.00	1,437,466.00	7,186,425.00	17	7,250,850.00	604,238.00	6,646,612.00	8
*** Total	2,997,615.77	43,9283.44	1,321,697.67	14	2,122,140.47	3,826,856.51	1,704,715.04	180

Washoe County Health District
Administrative Health Services
Periods 1-6, FY13

Accounts	2013 Plan	2013 Actuals	Balance	Act%	2012 Plan	2012 Actual	Balance	Act%
431100 Federal Grants	1,109,658.25	454,379.98	655,278.27	41	1,191,109.00	504,426.36	686,682.64	42
431105 Federal Grants - Indirect						28,103.25	28,103.25	
* Intergovernmental	1,109,658.25	454,379.98	655,278.27	41	1,191,109.00	532,529.61	658,579.39	45
460512 Duplication Service Fees		5.00	5.00			8.00	8.00	
* Charges for Services		5.00	5.00			8.00	8.00	
** Revenue								
701110 Base Salaries	1,109,658.25	454,384.98	655,273.27	41	1,191,109.00	532,537.61	658,571.39	45
701130 Pooled Positions	1,587,759.85	775,976.98	811,782.87	49	1,600,778.33	778,506.51	822,271.82	49
701200 Incentive Longevity	5,000.00	8,696.97	3,696.97	174	24,125.42	8,411.15	15,714.27	35
701300 Overtime	30,755.00	15,107.67	15,647.33	49	30,500.00	14,490.38	16,009.62	48
701412 Salary Adjustment	1,200.00	1,462.99	202.99	117	2,000.00	924.24	1,075.76	46
701413 Vac Payoff/Sick Pay-Term	10,554.54	3,173.40	10,554.54		58,579.12		58,579.12	
701417 Comp Time		18.92	3,173.40			388.28	388.28	
* Salaries and Wages	1,635,269.39	804,376.93	830,892.46	49	1,715,982.87	802,721.04	913,261.83	47
705110 Group Insurance	254,302.59	122,817.35	131,485.24	48	261,042.78	127,615.59	133,427.19	49
705199 Lab Cost Sav-Benef						426.40	426.40	
705210 Retirement	384,397.43	187,838.57	196,558.86	49	385,686.97	186,538.26	199,148.71	48
705215 Retirement Calculation					355,282.00		355,282.00	
705230 Medicare April 1986	22,639.74	11,131.28	11,508.46	49	22,872.08	11,137.61	11,734.47	49
705320 Workmens Comp	11,339.00	5,669.52	5,669.48	50	11,830.05	5,915.04	5,915.01	50
705330 Unemply Comp	2,755.00	2,755.00	2,755.00	100	2,794.50	2,794.50	2,794.50	100
* Employee Benefits	675,433.76	330,211.72	345,222.04	49	1,039,508.38	333,574.60	705,933.78	32
710100 Professional Services	1,500.00	30,348.98	28,848.98	2,023	1,500.00	210.00	1,290.00	14
710105 Medical Services	350.00	26.00	324.00	7	350.00		350.00	
710200 Service Contract	1,500.00		1,500.00		1,500.00		1,500.00	
710205 Repairs and Maintenance	400.00	147.16	252.84	37	400.00	2.45	1,497.55	0
710300 Operating Supplies	9,100.00	3,516.04	5,583.96	39	17,281.00	15,975.93	366.00	9
710334 Copy Machine Expense	4,500.00	2,279.18	2,220.82	51	5,500.00	3,031.69	1,275.07	93
710350 Office Supplies	8,500.00	4,161.15	4,338.85	49	11,700.00	6,698.36	2,408.31	56
710355 Books and Subscriptions	1,000.00	383.44	616.56	38	1,000.00	787.00	5,001.64	57
710360 Postage	1,125.00	519.73	605.27	46	1,125.00	341.85	783.15	30
710361 Express and Courier	100.00	35.22	64.78	35	100.00		100.00	
710500 Other Expense	1,600.00	615.60	984.40	38	1,600.00	584.10	1,015.90	37
710502 Printing	2,050.00	313.88	1,736.12	15	2,050.00	662.11	1,387.89	32
710503 Licenses & Permits	2,340.00	446.00	1,894.00	19	2,340.00	1,851.00	489.00	79
710507 Network and Data Lines	630.00	192.20	437.80	31	630.00	234.94	395.06	37
710508 Telephone Land Lines	10,080.00	3,989.42	6,090.58	40	11,080.00	3,971.25	7,108.75	36
710509 Seminars and Meetings	5,300.00	1,578.50	3,721.50	30	5,900.00	1,556.00	4,244.00	28
710512 Auto Expense	2,900.00	1,351.34	1,548.66	47	2,900.00	1,370.47	1,529.53	47
710519 Cellular Phone	1,470.00	671.88	798.12	46	1,470.00	1,184.36	285.64	81
710529 Dues	2,850.00	3,255.00	405.00	114	2,850.00	1,750.00	1,100.00	61
710546 Advertising	150.00		150.00		150.00		150.00	
710552 Moving Costs								
710600 L.T. Lease-Office Space	71,788.00	35,895.87	35,892.13	50	71,788.00	1,046.14	1,046.14	
710872 Food Purchases	150.00		150.00		150.00	41,464.54	30,323.46	58
711010 Utilities	1,000.00		1,000.00		1,000.00		1,000.00	

Washoe County Health District
 Administrative Health Services
 Periods 1-6, FY13

Accounts	2013 Plan	2013 Actuals	Balance	Act%	2012 Plan	2012 Actual	Balance	Act%
711100 ESD Asset Management					312.00	156.00	156.00	50
711114 Equip Srv O & M					767.04	348.30	418.74	45
711115 Equip Srv Motor Pool						50.00	50.00	
711117 ESD Fuel Charge					557.28	357.82	199.46	64
711119 Prop & Liab Billings	14,239.00	7,119.54	7,119.46	50	14,500.35	7,250.16	7,250.19	50
711210 Travel	13,500.00	2,622.33	10,877.67	19	13,500.00	3,211.94	10,288.06	24
711300 Cash Over Short						3.00	3.00	
711504 Equipment nonCapital	1,500.00	2,765.05	1,265.05	184	1,500.00	15,756.86	14,256.86	1,050
* Services and Supplies	159,622.00	102,233.51	57,388.49	64	175,470.67	110,044.27	65,426.40	63
** Expenses	2,470,325.15	1,236,822.16	1,233,502.99	50	2,930,961.92	1,246,339.91	1,684,622.01	43
** Total	1,360,666.90	782,437.18	578,229.72	58	1,739,852.92	713,802.30	1,026,060.62	41

Washoe County Health District
Air Quality Management
Periods 1-6, FY13

Accounts	2013 Plan	2013 Actuals	Balance	Act%	2012 Plan	2012 Actual	Balance	Act%
422510 Air Pollution Permits	448,037.00	232,909.25	215,127.75	52	370,485.00	154,127.50	216,357.50	42
* Licenses and Permits	448,037.00	232,909.25	215,127.75	52	370,485.00	154,127.50	216,357.50	42
431100 Federal Grants	912,531.00	434,878.96	477,652.04	48	863,531.00	267,319.74	596,211.26	31
431105 Federal Grants- Indirect	30,224.00	6,509.04	23,714.96	22		5,921.26	5,921.26	
432100 State Grants	182,000.00	182,000.00		100	230,000.00	230,000.00		100
432311 Pol Ctr/455B-830	300,000.00	162,040.00	137,960.00	54	297,006.07	162,600.00	134,406.07	55
* Intergovernmental	1,424,755.00	785,428.00	639,327.00	55	1,390,537.07	665,841.00	724,696.07	48
460526 Plan Review-Air Quality	40,000.00	18,651.00	21,349.00	47	25,000.00	15,254.00	9,746.00	61
460527 NOE-AQM	100,000.00	47,476.00	52,524.00	47	76,000.00	44,982.00	31,018.00	59
460528 NESHAP-AQM	84,000.00	35,156.00	48,844.00	42	66,000.00	35,166.00	30,835.00	53
460529 Assessments-AQM	41,000.00	23,117.00	17,883.00	56	28,000.00	15,918.00	12,082.00	57
460530 Inspector Regist-AQ	2,600.00	2,838.00	238.00	109	3,115.00	2,670.00	445.00	86
460531 Dust Plan-Air Quality	95,000.00	53,677.00	41,323.00	57	165,000.00	43,824.00	121,176.00	27
* Charges for Services	362,600.00	180,915.00	181,685.00	50	363,115.00	157,813.00	205,302.00	43
485100 Reimbursements		14.56	14.56			150.00	150.00	
485300 Other Misc Govt Rev		14.56	14.56			423.30	423.30	
** Miscellaneous	2,235,392.00	1,199,266.81	1,036,125.19	54	2,124,137.07	978,354.80	1,145,782.27	46
701110 Base Salaries	1,345,462.49	620,076.20	725,386.29	46	1,292,212.29	557,325.10	734,887.19	43
701130 Pooled Positions	93,151.68	5,170.08	87,981.60	6	28,000.00	4,293.61	23,706.39	15
701140 Holiday Work	250.00	140.18	109.82	56		315.72	315.72	
701200 Incentive Longevity	19,210.00	9,449.98	9,760.02	49	22,400.00	9,551.54	12,848.46	43
701300 Overtime	10,045.11	2,267.37	7,777.74	23	7,599.56	2,068.45	5,531.11	27
701413 Vac Payoff/Sick Pay-Term		2,023.44	2,023.44			38,584.09	38,584.09	
701417 Comp Time		918.38	918.38			5,358.86	5,358.86	
* Salaries and Wages	1,468,119.28	640,045.63	828,073.65	44	1,350,211.85	617,497.37	732,714.48	46
705110 Group Insurance	172,127.11	79,667.74	92,459.37	46	177,040.72	76,023.21	101,017.51	43
705199 Lab Cost Sav-Benef						401.40	401.40	
705210 Retirement	324,109.95	149,427.47	174,682.48	46	305,669.98	133,336.92	172,333.06	44
705230 Medicare April 1986	19,385.69	8,947.40	10,438.29	46	18,443.93	8,312.01	10,131.92	45
705230 Workmens Comp	7,585.40	3,792.72	3,792.68	50	7,543.80	3,771.90	3,771.90	50
705330 Unemploy Comp	1,843.00	1,843.00		100	1,792.00	1,782.00		100
* Employee Benefits	525,051.15	243,678.33	281,372.82	46	510,480.43	222,824.64	287,655.79	44
710100 Professional Services	385,103.78	56,417.86	328,685.92	15	298,767.94	283.00	298,484.94	0
710106 Medical Services	1,416.00	1,098.00	318.00	78	1,316.00	323.50	992.50	25
710200 Service Contract	500.00	90.07	409.93	18	500.00		500.00	
710205 Repairs and Maintenance	10,741.91	2,427.96	8,313.95	23	11,730.00	449.01	11,280.99	4
710210 Software Maintenance	4,200.00	4,170.00	30.00	99				
710300 Operating Supplies	11,079.55	12,868.06	1,788.51	116	6,600.00	5,362.28	3,237.72	62
710334 Copy Machine Expense	4,400.00	1,202.95	3,197.05	27	4,400.00	1,743.90	2,656.10	40
710350 Office Supplies	4,000.00	1,568.26	2,431.74	39	4,000.00	2,003.25	1,996.75	50
710355 Books and Subscriptions	224.00	334.13	110.13	149	224.00	268.37	44.37	120
710360 Postage	2,900.00	1,398.04	1,501.96	48	2,900.00	1,384.15	1,515.85	48
710361 Express and Courier	80.75	203.10	122.35	252	175.00	57.65	117.35	33
710500 Other Expense	100.00	118.85	18.85	119	100.00	2,989.79	2,889.79	2,990
710502 Printing	800.00	672.16	127.84	84	800.00	341.97	458.03	43
710503 Licenses & Permits	135.00	232.39	97.39	172	135.00		135.00	
710505 Rental Equipment	1,800.00		1,800.00		1,800.00		1,800.00	

Washoe County Health District
 Air Quality Management
 Periods 1-6, FY13

Accounts	2013 Plan	2013 Actuals	Balance	Act%	2012 Plan	2012 Actual	Balance	Act%
710507 Network and Data Lines		2,755.00	2,755.00-			2,555.00	2,555.00-	
710508 Telephone Land Lines	6,500.00	2,146.25	4,353.75	33	6,500.00	2,093.81	4,406.19	32
710509 Seminars and Meetings	3,005.00	1,814.00	1,191.00	60	5,000.00	1,570.00	3,430.00	31
710512 Auto Expense	1,000.00	226.46	773.54	23	1,000.00	175.41	824.59	18
710519 Cellular Phone	4,700.00	1,358.24	3,341.76	29	4,700.00	1,903.18	2,796.82	40
710529 Dues	4,435.00	740.00	3,695.00	17	4,700.00	1,903.18	2,796.82	40
710535 Credit Card Fees	1,600.00	1,174.48	425.52	73	435.00	808.57	435.00	54
710546 Advertising	1,000.00	10,616.00	9,616.00-	1,062	1,500.00	11,915.36	10,915.36-	1,192
710577 Uniforms & Special Clothing	1,100.00	1,247.97	147.97-	113	1,100.00	1,404.00	1,100.00	50
711100 ESD/Asset Management	2,592.00	1,296.00	1,296.00	50	2,808.00	7,660.82	1,404.00	56
711113 Equip Srv Replace	8,498.58	4,761.90	3,737.68	56	13,719.96	4,246.98	6,059.14	33
711114 Equip Srv O & M	10,384.74	4,494.65	5,890.09	43	12,963.22	6,208.23	8,716.24	59
711117 ESD/Fuel Charge	10,687.05	5,521.78	5,165.27	52	10,520.54	4,623.30	4,312.31	50
711119 Prop & Liab Billings	9,525.40	4,762.68	4,762.72	50	9,246.60	2,588.65	4,623.30	8
711210 Travel	36,088.25	8,266.82	27,821.43	23	31,000.00	23,417.82	28,411.35	98
711504 Equipment nonCapital	37,117.08	45,665.33	8,548.25	123	24,000.00	86,378.00	374,568.26	19
* Services and Supplies	565,715.09	179,649.39	386,065.70	32	460,941.26	116,338.60	214,093.40	35
* Capital Outlay	342,770.01	95,239.40	247,530.61	28	330,432.00	116,338.60	214,093.40	35
** Expenses	2,901,655.53	1,158,612.75	1,743,042.78	40	2,652,065.54	1,043,038.61	1,609,026.93	39
*** Total	666,263.53	40,664.06	706,917.59	6	527,928.47	64,883.81	469,244.66	12

Washoe County Health District
Community and Clinical Health Services
Periods 1-6, FY13

Accounts	2013 Plan	2013 Actuals	Balance	Act%	2012 Plan	2012 Actual	Balance	Act%
431100 Federal Grants	2,128,855.53-	627,939.87-	1,500,915.66-	29	2,361,625.00-	788,014.69-	1,573,610.31-	33
431105 Federal Grants - Indirect	15,300.00-	4,853.37-	10,446.63-	32		3,775.69-	3,775.69-	
432100 State Grants	24,857.00-	12,559.97-	12,297.03-	51	153,327.00-	10,984.74-	142,342.26-	7
* Intergovernmental	2,169,012.53-	645,353.21-	1,523,659.32-	30	2,514,952.00-	802,775.12-	1,712,176.88-	32
460500 Other Immunizations	89,000.00-	33,647.00-	55,353.00-	38	89,000.00-	41,295.73-	47,704.27-	46
460501 Medicaid Clinical Services	36,200.00-	44.46	36,244.46-	0	40,300.00-	12,723.26-	27,576.74-	32
460503 Childhood Immunizations	30,000.00-	9,436.00-	20,564.00-	31	59,000.00-	16,025.54-	42,974.46-	27
460508 Tuberculosis	4,100.00-	2,635.45-	1,464.55-	64	6,250.00-	1,677.48-	4,572.52-	27
460515 Medicare Reimbursement					300.00-		300.00-	
460516 Pgm Inc-3rd Pnty Rec	2,250.00-	3,056.00-	2,250.00-		4,750.00-	8,752.83-	4,002.83-	184
460517 Influenza Immunization	7,000.00-	11,539.45-	3,944.00-	44	7,000.00-	3,541.00-	3,459.00-	51
460518 STD Fees	23,000.00-	14,650.55-	11,539.45-	50	28,000.00-	11,110.16-	16,889.84-	40
460524 Family Planning	44,000.00-	14,699.83-	29,300.17-	33	44,000.00-	15,475.39-	28,524.61-	35
460570 Education Revenue	4,500.00-	649.77-	3,850.23-	14	11,000.00-	2,803.00-	8,197.00-	25
* Charges for Services	240,050.00-	75,540.14-	164,509.86-	31	289,600.00-	113,404.39-	176,195.61-	39
484050 Donations Federal Pgm Income	41,934.00-	20,012.65-	21,921.35-	48	41,450.00-	22,169.53-	19,280.37-	53
484195 Non-Govtl Grants							5,000.00-	
485110 Workers Comp Reimb		907.44-	907.44					
485300 Other Misc Govt Rev		27.89-	27.89					
* Miscellaneous								
** Revenue								
701110 Base Salaries	41,934.00-	20,947.98-	20,986.02-	50	46,450.00-	23,000.13-	23,449.87-	50
701120 Part Time	2,450,936.53-	741,841.33-	1,709,155.20-	30	2,851,002.00-	939,179.64-	1,911,822.36-	33
701130 Pooled Positions	2,237,201.94	1,021,674.67	1,215,527.27	46	2,290,226.58	1,053,821.28	1,236,405.30	46
701140 Holiday Work	503,356.32	253,611.10	249,745.22	50	518,071.35	260,870.64	257,200.71	50
701200 Incentive Longevity	175,944.41	109,129.24	66,815.17	62	240,007.08	96,601.59	143,405.49	40
701300 Overtime	48,012.00	108.90	108.90					
701412 Salary Adjustment	1,280.00	29,881.92	18,130.08	62	44,097.00	29,096.16	15,000.84	66
701413 Vac Payoff/Stck Pay-Term	75.00-	397.56	882.44	31	8,606.69	21.75-	8,628.44	0
701417 Comp Time		7,190.33	75.00-		5,998.39	9,289.66	5,998.39	
701419 Comp Time - Transfer		7,057.58	7,057.58-			2,423.57	9,289.66-	
* Salaries and Wages	2,965,719.67	1,438,775.13	9,723.83-	49	3,107,007.09	1,452,081.15	1,854,925.94	47
705110 Group Insurance	433,968.28	202,815.29	231,152.99	47	433,145.91	184,318.14	248,827.77	43
705199 Lab Cost Sav-Benef								
705210 Retirement	657,442.56	309,635.02	347,807.54	47	670,286.51	317,344.86	426.40	47
705230 Medicare April 1986	36,874.75	18,826.39	18,048.36	51	37,606.78	18,440.15	352,941.65	49
705320 Workmens Comp	18,435.65	9,217.80	9,217.85	50	17,766.03	16,013.40	19,166.63	49
705330 Unemploy Comp	4,479.25	4,479.25	4,479.25	100	4,196.70	4,197.20	1,752.63	90
* Employee Benefits	1,151,200.49	544,973.75	606,226.74	47	1,163,001.93	539,887.35	623,114.58	100
710100 Professional Services	75,150.71	39,309.19	35,841.52	52	160,510.33	17,869.11	142,641.22	46
710105 Medical Services	850.00	394.50	455.50	46	600.00	14.00	586.00	2
710108 MD Consultants	46,900.00	21,787.50	25,112.50	46	48,900.00	20,362.50	28,537.50	42
710110 Contracted/Temp Services	1,000.00	3,779.00	2,779.00-	378	2,555.00	2,941.93	386.93-	115
710119 Subrecipient Payments					186,242.00	101,612.64	84,629.36	55
710200 Service Contract	6,048.00	2,653.46	3,394.54	44	4,938.00	2,634.08	2,303.92	53
710205 Repairs and Maintenance	3,800.00	387.50	3,412.50	10	5,710.00	1,100.39	4,609.61	19

Washoe County Health District
Community and Clinical Health Services
Periods 1-6, FY13

Accounts	2013 Plan	2013 Actuals	Balance	Act%	2012 Plan	2012 Actual	Balance	Act%
710300 Operating Supplies	76,719.00	42,361.44	34,357.56	55	76,784.00	43,329.76	33,454.24	56
710334 Copy Machine Expense	13,847.00	5,101.95	8,745.05	37	13,775.00	4,098.99	9,676.01	30
710350 Office Supplies	13,520.01	6,715.15	6,804.86	50	11,877.01	3,345.79	8,531.22	28
710355 Books and Subscriptions	2,060.00	718.73	1,341.27	35	1,200.00	1,663.18	463.18	139
710360 Postage	4,490.00	1,395.00	3,095.00	31	4,740.00	1,943.77	2,796.23	41
710361 Express and Courier	245.00	83.40	161.60	34	320.00	51.92	268.08	16
710500 Other Expense	30,602.51	15,466.79	15,135.72	51	18,990.31	4,897.12	14,093.19	26
710502 Printing	9,675.00	7,092.35	2,582.65	73	6,277.00	2,330.93	3,946.07	37
710503 Licenses & Permits	3,555.00	2,914.00	641.00	82	3,325.00	494.25	2,830.75	15
710506 Dept Insurance Deductible		152.58	152.58					
710507 Network and Data Lines	2,560.00	1,414.86	1,145.14	55	2,280.00	1,716.25	563.75	75
710508 Telephone Land Lines	13,975.00	6,029.02	7,945.98	43	13,394.00	5,099.56	7,294.44	46
710509 Seminars and Meetings	4,750.00	3,147.00	1,603.00	66	6,600.00	2,855.00	3,745.00	43
710512 Auto Expense	13,318.00	4,409.64	8,908.36	33	13,043.00	4,087.81	8,955.19	31
710519 Cellular Phone	540.00	72.65	467.35	13	540.00	234.57	305.43	43
710529 Dues	1,350.00	749.00	601.00	55	1,350.00	330.00	1,020.00	24
710535 Credit Card Fees	3,245.00	1,129.70	2,115.30	35	3,730.00	1,264.05	2,465.95	34
710546 Advertising	34,903.86	29,007.71	5,896.15	83	37,390.52	25,582.70	11,807.82	68
710577 Uniforms & Special Clothing	200.00		200.00		350.00		350.00	
710585 Undesignated Budget	15,300.00		15,300.00					
710703 Biologicals	246,163.19	103,652.20	142,510.99	42	239,040.00	71,116.16	167,923.84	30
710714 Referral Services	9,040.00		9,040.00		9,040.00		9,040.00	
710721 Outpatient	108,264.15	31,872.75	76,391.40	29	95,264.00	32,220.46	63,043.54	34
710872 Food Purchases	6,550.00	2,421.23	4,128.77	37	3,026.00	329.37	2,696.63	11
711010 Utilities	1,700.00		1,700.00		2,303.00		2,303.00	
711100 ESD Asset Management	288.00	144.00	144.00	50				
711114 Equip Srv O & M	550.44	330.74	219.70	60				
711115 Equip Srv Motor Pool	711.35	374.16	337.19	53		132.50	132.50	
711117 ESD Fuel Charge	23,150.65	11,575.26	11,575.39	50	21,776.21	10,888.08	10,888.13	50
711210 Travel	28,184.00	5,353.16	22,830.84	19	27,781.00	4,083.96	23,697.04	15
711504 Equipment nonCapital	6,530.00	1,401.89	5,128.11	21	13,093.00	11,022.41	2,070.59	84
* Services and Supplies	809,735.87	353,397.51	456,338.36	44	1,036,744.38	380,553.24	656,091.14	37
* Capital Outlay	17,000.00	1,350.00	15,650.00	8	20,174.00		20,174.00	
** Expenses	4,943,656.03	2,338,496.39	2,605,159.64	47	5,326,927.40	2,372,621.74	2,954,305.66	45
Total	2,492,659.50	1,596,655.06	896,004.44	64	2,475,925.40	1,433,442.10	1,042,483.30	58

Washoe County Health District
Environmental Health Services
Periods 1-6, FY13

Accounts	2013 Plan	2013 Actuals	Balance	Act%	2012 Plan	2012 Actual	Balance	Act%
422503 Environmental Permits	51,500.00-	26,082.00-	25,418.00-	51	46,900.00-	23,112.00-	23,788.00-	49
422504 Pool Permits	68,000.00-	12,619.00-	55,381.00-	19	63,000.00-	12,325.85-	50,674.15-	20
422505 RV Permits	10,500.00-	5,811.00-	4,689.00-	55	9,700.00-	5,240.00-	4,460.00-	54
422507 Food Service Permits	369,000.00-	187,234.00-	181,766.00-	51	342,000.00-	164,429.00-	177,571.00-	48
422508 Wat Well Const Perm	20,000.00-	13,077.00-	6,923.00-	65	27,000.00-	6,399.00-	20,601.00-	24
422509 Water Company Permits	2,500.00-	1,002.00-	1,498.00-	40	3,500.00-	702.00-	2,798.00-	20
422511 SIDS Permits	49,000.00-	26,944.00-	22,056.00-	55	47,000.00-	30,304.00-	16,696.00-	64
422513 Special Event Permits	79,000.00-	38,150.00-	40,850.00-	48	74,000.00-	40,931.00-	33,069.00-	55
422514 Initial Applic Fee	27,000.00-	13,246.00-	13,754.00-	49	25,000.00-	10,790.00-	14,210.00-	43
* Licenses and Permits	676,500.00-	324,165.00-	352,335.00-	48	638,100.00-	294,232.85-	343,867.15-	46
431100 Federal Grants	277,000.00-	70,017.64-	206,982.36-	25	277,000.00-	99,486.38-	177,513.62-	36
432100 State Grants	75,000.00-	19,000.00-	56,000.00-	25	75,000.00-	37,500.00-	37,500.00-	50
432310 Tire Fee NRS 444A.090	418,766.00-	115,359.18-	303,406.82-	28	452,000.00-	222,991.65-	229,008.35-	49
* Intergovernmental	770,766.00-	204,376.82-	566,389.18-	27	804,000.00-	359,978.03-	444,021.97-	45
460510 IT Overlay	113,400.00-	56,944.00-	56,456.00-	50	96,800.00-	44,185.00-	52,615.00-	46
460512 Duplication Service Fees		232.78-	232.78-			14.86-	14.86-	
460513 Other Health Service Charges	2,700.00-	2,577.00-	123.00-	95	2,700.00-	837.00-	1,863.00-	31
460514 Food Service Certification	13,900.00-	8,229.00-	5,671.00-	59	9,000.00-	9,943.00-	943.00-	110
460520 Eng Serv Health	44,000.00-	15,359.00-	28,641.00-	35	42,000.00-	16,023.00-	25,977.00-	38
460521 Plan Review - Pools & Spas	2,500.00-	879.00-	1,621.00-	35	2,500.00-	2,436.00-	64.00-	97
460523 Plan Review - Food Services	17,000.00-	12,407.00-	4,593.00-	73	17,000.00-	7,669.00-	9,331.00-	45
460525 Plan Review - Vector	30,000.00-	18,894.00-	11,106.00-	63	24,000.00-	14,671.00-	9,329.00-	61
460532 Plan Rvw Hotel/Motel		322.00-	322.00-					
460533 Quick Start								
460534 Child Care Inspection	8,500.00-	4,134.00-	4,366.00-	49	8,000.00-	87.00-	87.00-	
460535 Pub Accomod Inspecth	17,300.00-	7,266.00-	10,034.00-	42	16,000.00-	6,736.00-	4,136.00-	48
460570 Educator Revenue	1,200.00-	182.00-	1,018.00-	15	2,400.00-	840.00-	9,264.00-	42
* Charges for Services	250,500.00-	127,425.78-	123,074.22-	51	220,400.00-	107,305.86-	1,560.00-	35
485121 Jury Reimbursements		135.00-	135.00-				113,094.14-	49
* Miscellaneous		135.00-	135.00-					
** Revenue		135.00-	135.00-					
701110 Base Salaries	1,697,766.00-	656,102.60-	1,041,663.40-	39	1,662,500.00-	761,516.74-	900,983.26-	46
701130 Pooled Positions	3,018,372.82-	1,400,191.62-	1,618,181.20-	46	2,981,274.44-	1,420,539.21-	1,560,735.23-	48
701140 Holiday Work	174,772.77-	57,228.91-	117,543.86-	33	103,247.00-	68,241.44-	35,005.56-	66
701200 Incentive Longevity	1,200.00-	1,001.05-	198.95-	83	1,200.00-	2,224.19-	1,024.19-	185
701300 Overtime	50,800.00-	23,788.46-	27,011.54-	47	53,100.00-	23,538.46-	29,561.54-	44
701406 Standby Pay	36,600.00-	17,597.37-	19,002.63-	48	34,000.00-	19,376.02-	14,623.98-	57
701408 Call Back						5,427.32-	5,427.32-	
701413 Vac Payoff/Sick Pay-Term	1,000.00-	182.10-	817.90-	18	3,000.00-	376.24-	2,623.76-	13
701417 Comp Time		16,198.28-	16,198.28-			31,628.55-	31,628.55-	
701500 Merit Awards		9,525.60-	9,525.60-			280.89-	280.89-	
* Salaries and Wages	3,282,745.59-	1,525,713.39-	1,757,032.20-	46	3,083,002.82-	1,571,632.32-	92,818.62-	51
705110 Group Insurance	434,110.13-	200,949.97-	233,160.16-	46	454,634.94-	215,377.57-	239,257.37-	47
705199 Lab Cost Sav-Benef						426.40-	426.40-	
705210 Retirement	728,879.94-	338,116.88-	390,763.06-	46	709,981.00-	340,768.88-	369,212.12-	48
705230 Medicare April 1986	41,040.99-	20,369.67-	20,671.32-	50	40,395.20-	20,268.83-	20,126.37-	50
705320 Workmens Comp	18,838.38-	9,419.22-	9,419.16-	50	18,966.18-	9,483.12-	9,483.06-	50
705330 Unempl Comp	4,577.10-	4,577.10-	4,577.10-	100	4,480.20-	4,480.20-	4,480.20-	100
* Employee Benefits	1,227,446.54-	573,432.84-	654,013.70-	47	1,228,457.52-	589,952.20-	638,505.32-	48

Washoe County Health District
Environmental Health Services
Periods 1-6, FY13

Accounts	2013 Plan	2013 Actuals	Balance	Act%	2012 Plan	2012 Actual	Balance	Act%
710100 Professional Services	325,401.67	6,233.20	319,168.47	2	490,885.57	6,862.00	484,023.57	1
710105 Medical Services	6,548.00	110.00	6,438.00	2	6,548.00	419.50	6,128.50	6
710110 Contracted/Temp Services	65,000.00	4,904.68	60,095.32	8	55,225.00	12,857.55	42,367.45	23
710200 Service Contract	95,300.00	31,726.86	63,573.14	33	60,300.00	45,364.01	14,935.99	75
710205 Repairs and Maintenance	4,600.00	229.00	4,371.00	5	1,100.00	710.96	389.04	65
710300 Operating Supplies	20,100.00	4,499.93	15,600.07	22	20,100.00	2,289.26	17,810.74	11
710302 Small Tools & Allow	3,685.00		3,685.00		1,685.00		1,685.00	
710308 Animal Supplies	2,000.00	343.91	1,656.09	17	2,000.00	323.75	1,676.25	16
710319 Chemical Supplies	231,950.00	232,079.07	129.07	100	281,950.00	265,391.74	16,558.26	94
710334 Copy Machine Expense	2,250.00	713.26	1,536.74	32	2,250.00	624.45	1,625.55	28
710350 Office Supplies	9,100.00	2,399.17	6,700.83	26	9,500.00	3,399.64	6,100.36	36
710355 Books and Subscriptions	2,400.00	244.00	2,156.00	10	2,400.00	654.95	1,745.05	27
710360 Postage	9,775.00	3,346.98	6,428.02	34	9,300.00	3,656.56	5,643.44	39
710361 Express and Courier	175.00		175.00		175.00	17.39	157.61	10
710391 Fuel & Lube	100.00		100.00		100.00		100.00	
710500 Other Expense	8,300.00	157.80	8,142.20	2	5,800.00	1,264.00	4,536.00	22
710502 Printing	11,525.00	577.73	10,947.27	5	4,025.00	1,454.18	2,570.82	36
710503 Licenses & Permits	2,690.00	2,090.00	610.00	77	2,590.00		2,590.00	
710506 Dept Insurance Deductible		150.00	150.00			150.00	150.00	
710507 Network and Data Lines	2,500.00	576.60	1,923.40	23	2,500.00	1,174.70	1,325.30	47
710508 Telephone Land Lines	9,710.00	4,353.95	5,356.05	45	9,375.00	4,437.11	4,937.89	47
710509 Seminars and Meetings	13,415.00	1,494.00	11,921.00	11	9,240.00	4,330.00	4,910.00	47
710512 Auto Expense	100.00	29.69	70.31	30	4,450.00	52.88	4,397.12	1
710514 Regulatory Assessments	11,920.00	8,940.00	2,980.00	75	7,450.00	2,425.12	5,024.88	33
710519 Cellular Phone	6,600.00	1,971.23	4,628.77	30	1,661.00	587.00	1,074.00	35
710529 Dues	1,661.00	382.00	1,279.00	23	3,965.00	1,717.43	2,247.57	43
710535 Credit Card Fees	4,610.00	2,193.16	2,416.84	48	1,050.00	3,594.53	2,544.53	342
710546 Advertising	6,050.00		6,050.00		1,700.00		1,700.00	
710577 Uniforms & Special Clothing	1,700.00	1,049.86	650.14	62	78,700.00		78,700.00	
710585 Undesignated Budget								
710600 LT Lease-Office Space	41,661.00	20,220.00	21,431.00	49	41,661.00	23,590.00	18,061.00	57
711100 ESD Asset Management	11,856.00	5,760.00	6,096.00	49	11,232.00	6,344.00	4,888.00	56
711113 Equip Srv Replace	17,061.11	8,591.20	8,469.91	50	29,926.32	15,389.40	14,536.92	51
711114 Equip Srv O & M	30,573.49	16,070.91	14,502.58	53	40,610.32	18,103.81	22,506.51	45
711115 Equip Srv Motor Pool	16,741.00		16,741.00			15,442.98	15,442.98	
711117 ESD Fuel Charge	39,776.37	22,879.39	16,896.98	58	37,533.78	22,263.21	15,270.57	59
711119 Prop & Liab Billings	23,656.38	11,828.22	11,828.16	50	23,247.26	11,623.68	11,623.58	50
711210 Travel	81,150.00	7,355.89	73,794.11	9	44,650.00	10,894.48	33,755.52	24
711504 Equipment nonCapital	62,544.00	1,393.12	61,150.88	2	9,000.00	310.25	8,689.75	3
* Services and Supplies	1,184,175.02	404,884.81	779,290.21	34	1,313,875.25	487,720.52	826,154.73	37
781004 Equipment Capital	25,000.00		25,000.00					
* Capital Outlay	25,000.00		25,000.00					
** Expenses	5,719,367.15	2,504,031.04	3,215,336.11	44	5,625,335.59	2,649,305.04	2,976,030.55	47
485196 Insur Reimb-F/A Loss		150.00	150.00					
* Other Fin. Sources		150.00	150.00					
** Other Financing Src/Use		150.00	150.00					
*** Total	4,021,601.15	1,847,778.44	2,173,822.71	46	3,962,835.59	1,887,788.30	2,075,047.29	48

Washoe County Health District
Epidemiology Public Health Preparedness
Periods 1-6, FY13

Accounts	2013 Plan	2013 Actuals	Balance	Act%	2012 Plan	2012 Actual	Balance	Act%
431100 Federal Grants	1,066,362.73-	457,033.37-	609,329.36-	43	1,555,754.10-	542,575.58-	1,013,178.52-	35
431105 Federal Grants - Indirect	30,544.00-	23,305.53-	7,238.47-	76	38,708.00-	12,580.16-	26,127.84-	33
* Intergovernmental	1,096,906.73-	480,338.90-	616,567.83-	44	1,594,462.10-	555,155.74-	1,039,306.36-	35
460511 Birth and Death Certificates	400,000.00-	220,012.00-	179,988.00-	55	280,000.00-	210,766.00-	69,234.00-	75
** Charges for Services	400,000.00-	220,012.00-	179,988.00-	55	280,000.00-	210,766.00-	69,234.00-	75
** Revenue	1,496,906.73-	700,356.90-	796,555.83-	47	1,874,462.10-	765,921.74-	1,108,540.36-	41
701110 Base Salaries	1,223,636.27	553,845.04	669,791.23	45	1,314,062.09	545,157.85	768,904.24	41
701120 Part Time	24,152.57	12,043.74	12,108.83	50	24,218.74	11,545.57	12,673.17	48
701130 Pooled Positions	500.00	16,349.35	15,849.35-	3,270	30,500.00	101.56	30,398.44	0
701140 Holiday Work		46.38	46.38					
701200 Incentive Longevity	12,985.00	6,193.11	6,791.89	48	12,283.00	5,848.06	6,434.94	48
701300 Overtime	1,700.00	588.10	1,111.90	35	5,200.00	635.65	4,564.35	12
701412 Salary Adjustment	29,909.00		29,909.00		37,241.27		37,241.27	
701413 Vac Payoff/Sick Pay-Term								
701417 Comp Time								
* Salaries and Wages	1,292,882.84	589,065.72	703,817.12	46	1,423,505.10	587,467.19	836,037.91	41
705110 Group Insurance	149,029.99	73,239.32	75,790.67	49	163,525.81	79,572.08	83,953.73	49
705199 Lab Cost Sav-Benefit								
705210 Retirement	293,697.17	132,938.90	160,758.27	45	294,545.66	129,703.09	164,842.57	44
705215 Retirement Calculation								
705230 Medicare April 1986	17,905.47	8,036.21	9,869.26	45	17,970.34	4,667.24	4,667.24-	
705320 Workmens Comp	7,733.98	3,867.06	3,866.92	50	6,982.70	8,194.66	9,775.68	46
705330 Unemploy Comp	1,879.10	1,879.10		100	1,639.00	3,491.40	3,491.30	50
705360 Benefit Adjustment	10,656.00		10,656.00		11,708.00	1,639.00		100
* Employee Benefits	480,901.71	219,390.59	260,941.12	46	496,371.51	226,841.97	11,708.00	46
710100 Professional Services	110,675.22	86,667.14	24,008.08	78	174,997.58	55,379.85	119,617.73	32
710105 Medical Services	100.00	109.00	9.00-	109	100.00		100.00	58
710108 MD Consultants								
710110 Contracted/Temp Services	2,500.00	6,369.28	3,869.28-	255	12,000.00	7,000.00	5,000.00	58
710200 Service Contract	1,895.00	2,565.50	770.50-	141	31,585.00	4,941.00	31,585.00	225
710205 Repairs and Maintenance	1,000.00		1,000.00		2,195.00	139.90	2,746.00-	14
710210 Software Maintenance	12,000.00	9,750.00	2,250.00	81	12,000.00	9,000.00	3,000.00	75
710300 Operating Supplies	13,504.00	69.67	13,434.33	1	35,917.00	5,788.77	30,127.23	16
710325 Signs and Markers								
710334 Copy Machine Expense	3,159.89	1,109.84	2,060.05	35	3,399.89	1,336.50	1,336.50-	19
710350 Office Supplies	4,850.00	2,203.81	2,646.19	45	7,200.00	639.80	2,760.09	31
710355 Books and Subscriptions	1,675.00	223.90	1,451.10	13	2,860.00	2,211.52	4,988.48	33
710360 Postage	3,070.00	1,092.17	1,977.83	36	3,020.00	937.55	1,922.45	33
710361 Express and Courier	10.00	34.81	24.81-	348	10.00	1,266.08	1,753.92	42
710500 Other Expense	1,871.00		1,871.00		1,841.00	17.10	7.10-	171
710502 Printing	4,105.00	182.84	3,922.16	4	4,405.00	653.20	1,841.00	15
710503 Licenses & Permits	150.00		150.00		500.00		150.00	155
710505 Rental Equipment	1,524.00	919.00	605.00	60	500.00	777.00	277.00-	29
710507 Network and Data Lines	550.00	182.28	367.72	33	550.00	157.96	392.04	37
710508 Telephone Land Lines	4,950.00	2,163.90	2,786.10	44	5,840.00	2,159.43	3,680.57	34
710509 Seminars and Meetings	5,600.00	4,057.00	1,543.00	72	6,300.00	2,155.00	4,145.00	51
710512 Auto Expense	2,050.00	827.04	1,222.96	40	1,875.00	965.29	909.71	26
710519 Cellular Phone	4,980.00	974.43	4,005.57	20	3,090.00	795.80	2,284.20	

Washoe County Health District
 Epidemiology Public Health Preparedness
 Periods 1-6, FY13

Accounts	2013 Plan	2013 Actuals	Balance	Act%	2012 Plan	2012 Actual	Balance	Act%
710529 Dues	1,280.00	360.00	920.00	28	590.00	660.00	70.00	112
710535 Credit Card Fees	2,000.00	975.53	1,024.47	49	1,300.00	895.28	404.72	69
710546 Advertising	2,625.00		2,625.00		2,875.00	2,689.50	185.50	94
710585 Undesignated Budget	6,469.00		6,469.00		38,708.00			
710703 Biologicals	3,420.79		3,420.79		3,754.79	242.00	38,708.00	
710721 Outpatient	2,135.00	1,246.24	888.76	58	2,135.00	508.20	3,512.79	6
710872 Food Purchases	2,400.00	170.84	2,229.16	7	550.00	56.87	1,626.80	24
711010 Utilities	180.00		180.00		180.00		493.13	10
711100 ESD Asset Management	2,304.00	1,152.00	1,152.00	50	2,808.00	1,248.00	180.00	
711113 Equip Srv Replace	377.95	189.00	188.95	50	492.72	246.36	1,560.00	44
711114 Equip Srv O & M	654.46	718.56	64.10	110	3,508.44	428.45	246.36	50
711117 ESD Fuel Charge	78.58	14.56	64.02	19	157.16		3,079.99	12
711119 Prop & Liab Billings	9,711.98	4,855.98	4,856.00	50	8,265.90	4,132.92	157.16	
711210 Travel	35,450.00	6,518.29	28,931.71	18	46,914.00	4,603.35	4,132.98	50
711502 Build Imp nonCapital						127.00	42,310.65	10
711504 Equipment nonCapital	750.00	49,198.85	48,448.85	6,560	19,391.98	24,931.16	127.00	
* Services and Supplies	250,065.87	185,001.46	65,064.41	74	442,456.46	137,091.84	5,539.18	129
* Capital Outlay					178,577.12	145,876.15	305,364.62	31
** Expenses	2,023,850.42	994,027.77	1,029,822.65	49	2,540,910.19	145,876.15	32,700.97	82
*** Total	526,943.69	283,676.67	233,266.82	56	666,448.09	331,354.51	1,443,633.94	43
							335,093.58	50



WASHOE COUNTY HEALTH DISTRICT EPIDEMIOLOGY AND PUBLIC HEALTH PREPAREDNESS DIVISION



Public Health
Prevent. Promote. Protect.

January 17, 2013

MEMORANDUM

To: Members, Washoe County District Board of Health

From: Randall L. Todd, DrPH
Epidemiology and Public Health Preparedness (EPHP) Director

Subject: Report to the District Board of Health, January 2013

Communicable Disease -- Influenza

For the week ending January 12 (MMWR Week 2) five of 15 participating sentinel healthcare providers reported a total of 70 patients with influenza-like illness (ILI) out of a total of 3,031 patients seen. This yields an ILI percentage of 2.3% which is below the regional baseline of 3.5%. During the previous week the national ILI percentage was 4.3% which is above the national baseline of 2.2%. Regionally, the ILI percentage ranged from 2.1% to 7.2%.

Four death certificates were received for week 1 listing pneumonia (P) or influenza (I) as a factor contributing to the cause of death. The total number of deaths submitted for week 1 was 138. This reflects a P&I ratio of 2.9% which is below the epidemic threshold set by CDC for week 1 at 7.2%. Nationally, the P&I ratio was 7.3%.

From a national perspective, influenza has been at high levels throughout most of the country. There have been 20 reported pediatric flu-related deaths reported nationally so far this season. Based on ILI surveillance and mortality data, Washoe County has been experiencing a comparatively normal season thus far. However, syndromic surveillance is beginning to suggest that we could see higher levels of influenza activity in Washoe County in the coming weeks. National and local media attention has been heavy resulting in an increased interest in getting influenza vaccine.

Viral Gastroenteritis

The investigation of a school-related outbreak of viral gastroenteritis was halted due to the schools going on winter break. The Washoe County School District used this as an opportunity to conduct deep cleaning in all schools, kitchens, school busses, delivery trucks, etc. Prior to the resumption of classes the School District and the Health District issued a joint press release to remind parents of the importance of keeping children home if they had experienced symptoms of gastroenteritis during the three days prior to school

starting again. This was followed by a ConnectEd message to reinforce the importance of excluding ill children from school. The press release generated significant media coverage with several interviews.

The enhanced exclusion policy has remained in effect since the resumption of classes. The Communicable Disease staff has been monitoring chief complaint data from school clinics and absenteeism data. These data will be reviewed on January 18 to determine if the enhanced exclusion policy can be relaxed.

Some of the final statistics for this outbreak as of the winter break were as follows:

- Number of schools with reported outbreaks – 19
- Number of students meeting sensitive case definition – 2,834
- Number of students meeting strict case definition – 1,309
- Attack Rates in each school ranged from 7.9% to 52.6%

Public Health Preparedness –

A Crisis and Emergency Risk Communication Training Refresher training was held on December 21st for WCHD staff who serve as back-up PIOs in the permanent PIO's absence. Since these staff would most likely help fill the role of Public Information officer in the Incident Command System (ICS) structure during a public health emergency, this training was geared towards helping them be successful in this role.

Staff has been coordinating upcoming National Incident Management System (NIMS) trainings tailored for public health professionals. The first series of ICS 300 for Public Health and ICS 400 for Public Health has filled up. There are still seats available for the second series of trainings, ICS 300 for Public Health (May 20th – 22nd), and ICS 400 for Public Health (June 5th – 6th). WCHD staff attending these trainings will be better able to serve the community during a public health emergency.

Staff is also coordinating a follow-up training for staff who attended the Epi Info 7 Trainings in December. This training facilitated by the division's Senior Epidemiologist will take place the morning of February 7th, and will address the use of Excel Pivot Tables.

EPHP and other Health District staff participated in a table top exercise on January 9 that was conducted by the Washoe County School District. The exercise scenario involved a 6.5 magnitude earthquake impacting multiple schools as well as parts of the local critical infrastructure. This exercise will continue as a functional exercise in March and a full scale exercise in May.

Randall L. Todd for R. Todd 1/17/13

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



Washoe County Health District



Public Health
Prevent, Promote, Protect

Staff Report
Board Meeting Date: 1/24/13

DATE: January 24, 2013

TO: District Board of Health Members

FROM: Steve Kutz, RN, MPH, Division Director
Community and Clinical Health Services
(775) 328-3759 skutz@washoecounty.us

SUBJECT: Community and Clinical Health Services (CCHS) Division Report,
January 2013 District Board of Health Meeting

1. Maternal and Child Health (Home Visitation) Program Report
2. Program Reports

1. Maternal and Child Health (Home Visitation) Program

Program Mission

Public Health Nurses (PHNs) promote public health by educating and empowering individuals and families to enhance their physical, emotional, mental, and social well being; and through the development of partnerships, promote a safe and healthy community.

Program Description

The Maternal and Child Health Program:

- Promotes community wide identification of high-risk individuals, families and populations
- Provides assessment of individuals and families and their environment
- Provides education, support, and resources to promote health and well-being
- Advocates for the health and safety of women, infants, children and families

1. Home Visit Program Clients

- Medically fragile infant or child (e.g. premature, congenital disorder, fetal drug exposure, low birth weight, failure to thrive, developmentally delayed)
- Acute or chronic health problem(s) all ages
- Prenatal or parenting adult with condition affecting parenting capacity (e.g. lacks medical home, teenager, depression or domestic violence history, cognitive impairment, medical condition)

Typical referrals

- A 20 year old single mother, pregnant and soon to be homeless, and her 6 week "failure to thrive" infant
- Parents on SSI for cognitive deficits (6th grade level) with a newborn infant
- 15 year old pregnant with first child
- 31 year old female pregnant with her fourth child who is again pregnant, using methamphetamines daily as well as tobacco

Services Provided

- Infant weight monitoring, nutrition and feeding assessments and parental education for infants with a medical diagnosis of failure to thrive, feeding problems, or other metabolic conditions
- Growth and developmental assessments; facilitation of access to care for infants with congenital conditions, prematurity or low birth weights
- Health assessment, education and case management to ensure access to care for parents with mental or physical impairments including drug abuse
- Education on infant nutrition, health, growth/development, parenting and environmental safety for high risk families

2. Blood Lead Toxicity Case Management: PHN provides home and child assessment, education and case management services in the home or by phone for children with blood lead levels >5ug/DI, coordinating care with health care providers

3. Pregnancy Connection

- Improve perinatal health outcomes in Washoe County through outreach, case management and support of local and state maternal and child health policies
 - Conduct case finding and home visits to identify pregnant women in need of prenatal care and provide referrals to care
 - Screen for depression and substance abuse, refer clients with positive findings for treatment
 - Promote breastfeeding
 - Provide education to promote good health habits that prevent premature birth, low birth weight and other adverse outcomes
- Provide follow up referral services for infant with positive metabolic screening disorders in partnership with the Newborn Screening Program of the Nevada State Health Division
- Disseminate preconception health recommendations to targeted populations and health care providers; provider training on same

4. Community-based assurance and policy development

- Participation in Maternal Child Health (MCH) Coalition of Northern Nevada – re-established by Health District team in 2007 as a local coalition that promotes population-based services such as Text for Baby, professional development, community assessment and networking

- Nevada Advisory Board on Maternal and Child Health – based on expertise from Health District program, PHN supervisor chairs NRS established state committee to advise the Health Division Administrator on matters pertaining to maternal and child health
- Home Visitation Network – Local home visitation programs meet quarterly to assess services and coordinate care
- NACCHO Maternal, Child and Adolescent Health grant for capacity building award in 2012 conducted community-wide assessment and strategic planning with community representatives in December 2012; the need to address infants with substance abuse exposure through Fetal Infant Mortality Review (FIMR) was identified as a project through FY13
- MCH Report Card – Data collection and analysis of localized key MCH statistics (e.g. prematurity and low birth weight) for community planning and grant submissions

5. Fetal Infant Mortality Review (FIMR), Child Death Review

- Population based review processes identify preventable factors in fetal, infant and child deaths; this program is in the implementation phase, with state permission received to act as representatives of the Health Officer
- Action teams and state committees use data to improve systems of care and implement prevention programs

6. Child Care Health Consultation

- Formally trained PHN provides classes to child care providers and monitors private provider classes on Communicable Disease in the Child Care Setting
- PHN consultation on health issues in child care settings
- PHN chair the Washoe County Social Services Child Care Advisory Board

Budgets

The Home Visitation allocation was set by the District Board of Health in 2008 with the vote to reduce funding from the FY2008 budget of \$972,144 by approximately 60% to maintain a small Home Visitation program as a safety net for families with underserved health care needs (e.g. premature infants, teenage parents, substance-exposed infants, interpersonal violence). From the peak of 11.39 FTEs assigned to the program in 2008, the current staffing now includes 3.5 locally funded FTEs and a 0.5 FTE PHN assigned to the Nevada State Health Division grant, Pregnancy Connection. A small NACCHO grant was also received in FY13.

<i>Total Adopted FY 13:</i>	\$413,397
Salaries and Benefits:	396,356
Services and Supplies:	17,041
<i>Grant funded Pregnancy Connection:</i>	\$ 58,000
Salaries and Benefits:	51,448
Services and Supplies:	6,552

Grant funded NACCHO MCAH \$6,000

Statistics

On average over the past three full years (FY10-12) of the revised Home Visitation Program, 2100 encounters were made with clients annually.

Data Set	2010-2012 Average
Monthly all encounters total	2109
Telephone calls, Case conferences	357
Monthly Encounters in person only	1751
Total & YTD average FTEs by regular hours in HV Program	2.39
Average all encounters by week	42.2
Average weekly all encounters by FTE (Enc, TCs, CCs)	18
Average weekly in person type only encounters by FTE	15
Percentage difference from expectation (minimum 12 visits/week)*	150%
Total Year-to-date	2109

*National averages for HV programs are 12 HVs weekly (see reference)

Cost Benefit

Cost savings for Washoe County from the Maternal and Child Health Program can be measured in the following desired outcomes:

- Prevention of premature deliveries in pregnant women: in 2006 when the WCHD biostatistician prepared a summary of costs of prematurity, the mean hospital charge alone was \$8,531, with a maximum of \$2.2 million found for one baby. Some of these costs are born by Nevada and Washoe County taxpayers. The March of Dimes (online) reports the following costs:
 - In 2007, the average medical costs for a preterm baby were more than 10 times as high as they were for a healthy full-term baby. The costs for a healthy baby from birth to his first birthday were \$4,551. For a preterm baby, the costs were \$49,033.
 - When a baby came early in 2007, the medical costs for both the mother and the baby were four times as high as they were when a mom had a healthy full-term infant. For the full-term infant, the costs were \$15,047; for the preemie, the costs were \$64,713. These expenses included outpatient visits, in-hospital care and prescriptions.
 - Preterm babies spend more time in the hospital than healthy babies do. The average length of hospital stays for a term infant for the first year of life in 2005 was 2.3 days; for a preterm infant the average length was 14.2 days.
- Prevention of hospitalization of infants for failure to thrive or other morbidity

- Prevention of child abuse or neglect with costly investigations, foster care placements and legal system interventions
- Prevention of vaccine preventable morbidity and mortality
- Improvement of perinatal systems of care based on data analysis
- Prevention of communicable disease in child care settings

Emerging Issues

- Health care reform legislation in March 2010 includes \$1.5 billion over 5 years in mandatory funding for new home visitation grants. It establishes the first dedicated, federal funding stream for early childhood home visitation programs. In Nevada, the Nurse Family Partnership in Southern Nevada, Early Head Start and Parents as Teachers have been funded and the Health Division supports supplemental funding, when available, for additional partners with evidence-based programs.
- A recent NAACHO MCAH Strategic Planning session in partnership with community providers revealed the total lack of any skilled nursing services for pediatric patients in Washoe County. No other agency provides pediatric health care home visitation by nurses in Washoe County, a major issue of concern for health care providers.

2. Program Reports

- a. **Sexual Health** – Program staff have been working on implementing an updated HIV Surveillance database. Program management and staff are exploring additional programmatic efficiencies, including self-generated risk assessments, which may allow for clinic staff to see more clients per hour.
- b. **Immunizations** –
 - i. **Influenza** - Demand for influenza vaccine has increased dramatically based on local and national increase in influenza cases. The program has increased staffing related to the demand, and is working on the purchase of additional influenza vaccine.
 - ii. **School Located Vaccination Clinics (SLVC)** - Staff have concluded the remainder of SLVCs for 2013, providing 406 doses of Tdap and 1486 doses of Influenza vaccines in December. For the Fall SLVC campaign over 4800 children received over 5700 doses of vaccine. Final SLVCs for this school year are planned for January and February, dependent upon influenza vaccine availability.
- c. **Tuberculosis Prevention and Control Program** – Liaison activities with Washoe County Detention Facility and Northern Nevada HOPES have

resumed. These activities ensure the prevention of TB in aggregate care settings.

- d. **Family Planning/Teen Health Mail** – Staff are working on the 2012 Family Planning Annual report, as well as the 2014 continuation application of grant funds. Discussions are also underway for further integration of STD/HIV clinic services with Family Planning services to best utilize staff and funding and to maximize efficiency.
- e. **Chronic Disease Prevention Program** – Menu labeling efforts in Washoe County were recognized in a front page article in the Reno Gazette Journal recently. Staff are completing the ACHIEVE site reports, and are working on a partnership with Nevada Health Care Coalition that could help realize some of the goals set forth in the ACHIEVE Community Action Plan.
- f. **Home Visitation** – Encompassed in the report above.



Washoe County Health District

ENVIRONMENTAL HEALTH SERVICES DIVISION



Public Health
Prevent. Promote. Protect.

DATE: January 15, 2013
TO: District Board of Health Members
FROM: Robert O. Sack, Division Director, Environmental Health Services (EHS)
SUBJECT: Environmental Health Services Division Report for January 2013

Food Program

- WashoeEats.com went live with Washoe County restaurant inspection in February of 2012. The site has received over 13,000 hits through December.

Feb	Mar	Apr	May	Jun	July	Aug	Sept	Oct	Nov	Dec
2,704	1,537	1,308	1,336	829	934	1,032	1,325	859	813	715

Land Development

- Ricardo Cruz retired January 4, 2013. Mike Lupan accepted the transfer position and is working in the Land Development Program, leaving a vacancy in the Food Program.

Vector-Borne Disease Program

- For the past several years the Vector-Borne Diseases Program has required rock pavers as inserts for new and existing private catch basins prior to signing off on building plans. With the insert placed within the basin, adult female mosquitoes should not be able to lay eggs and colonize the water filled sump. This design detail is in the Washoe County Hydrological manual (Orange Book) and required on private catch basins as well as Washoe County infrastructure, although not currently accepted by the cities of Reno and Sparks.

Jeff Jeppson recently observed several catch basins with inserts colonized with mosquito larvae and adults flying through openings in 3/4 inch pavers. When the 3/4 inch pavers were originally recommended, a 12-inch overflow unit was included to maintain the hydrological capacity of the catch basin. With the overflow units installed, it is possible to switch to 3/8 inch rock pavers to prevent mosquito colonization. They are stronger and when plugged, the overflow device accepts the water in the catch basin and allows it to flow through the system, reducing standing water and breeding conditions.

Staff contacted the corporate office of Xeripave to inform them the Vector-Borne Diseases Program no longer recommends the 3/4 inch paver insert and instead recommends the 3/8 inch pavers. When a corporation makes a change in product use, this can cause issues in the manufacture, distribution, as well as publication changes for this product. After discussion, the corporate office agreed to this change and will no longer manufacture the 3/4 inch pavers. The change to the 3/8 inch paver insert in catch basins will begin immediately.

Robert O. Sack, Division Director
Environmental Health Services Division



WASHOE COUNTY HEALTH DISTRICT

AIR QUALITY MANAGEMENT DIVISION



Public Health
Prevent. Promote. Protect.

Date: January 11, 2013

To: District Board of Health *KD*

From: Kevin Dick, Director, Air Quality Management

Re: Monthly Report for Air Quality Management

Agenda Item:

The enclosed Air Quality Management Division Report is for the month of December 2012 and includes the following sections:

**Air Quality
Monitoring Activity
Planning Activity
Permitting Activity
Compliance/Inspection Activity
Enforcement Activity**



Director's Report

DECEMBER 2012

Permit Software Proposals Received

AQM and EHS have been participating as Executive Committee members on a project to procure a new business licensing and permitting software system that can be used across the jurisdictions of Reno, Sparks, and Washoe County. Nine vendors responded to the Request for Proposals which was issued by Washoe County. AQM and EHS are participating on the proposal evaluation committee to rank the proposals in order to select a vendor.

New Annual National Ambient Air Quality Standard for PM2.5

On December 14, 2012, the U.S. Environmental Protection Agency (EPA) strengthened the annual health-based National Ambient Air Quality Standard for fine particles (PM2.5) from 15.0 to 12.0 micrograms per cubic meter ($\mu\text{g}/\text{m}^3$). The 24-hour standards for PM2.5 and PM10 were retained. The new annual standard will also affect calculations used for the Washoe County Air Quality Index (AQI) and the Keep it Clean, Know the Code program.

The lower end of the "Moderate" AQI range will now be triggered by fine particle pollution levels approximately 3 $\mu\text{g}/\text{m}^3$ lower than under the old standard averaged over 24-hours. The result is that fine particulate pollution levels that would previously have been calculated as an Air Quality Index of 39 and in the "Good" range, will under the new standard be calculated as an AQI of 51, indicating "Moderate" air quality.

AIR QUALITY COMPARISON FOR DECEMBER

Air Quality Index Range		# OF DAYS DECEMBER 2012	# OF DAYS DECEMBER 2011
GOOD	0 to 50	14	6
MODERATE	51 to 100	17	19
UNHEALTHY FOR SENSITIVE GROUPS	101 to 150	0	6
UNHEALTHY	151 to 200	0	0
VERY UNHEALTHY	201 to 300	0	0
TOTAL		31	31

Because of these stronger standards, Washoe County is expected to experience more "Moderate" air quality days during winter months and wildfire events. The change is expected to have a smaller impact on the number of "Yellow" and "Red" burn code days which may increase as well. Washoe County is expected to continue to attain the PM2.5 annual standard.

The Washoe County Health District, Air Quality Management Division began utilizing the new AQI calculation methodology on Wednesday, January 2, 2013.

Kevin Dick, Division Director

HIGHEST AQI NUMBER BY POLLUTANT

Air Quality

POLLUTANT	DECEMBER 2012	YTD for 2012	DECEMBER 2011	Highest for 2011
CARBON MONOXIDE (CO)	29	29	37	39
OZONE 8 hour (O3)	38	104	37	114
PARTICULATES (PM _{2.5})	97	105	132	132
PARTICULATES (PM ₁₀)	53	74	60	88

For the month of December 2012, the highest Air Quality Index (AQI) value reported was ninety-seven (97) for PM_{2.5}. There were no exceedances of Carbon Monoxide, Ozone or PM₁₀. There were fourteen (14) days the air quality was in the good range, and seventeen (17) days the air quality was in the moderate range.

Planning & Monitoring Activity

Particulate Monitoring Network:

The conversion from high volume (Hi-Vol) filter-based PM₁₀ samplers to continuous Beta Attenuation Monitors (BAM) was completed in December. Hi-Vols have been a part of the AQM monitoring network since the 1980's. The Hi-Vols required a sample collection filter to be changed out manually every six days and then weighed in the AQM lab to determine particulate concentrations. The primary benefit of the PM₁₀ BAMs is that they provide near real-time data used for reporting the Air Quality Index (AQI) to the public. They also help quickly identify PM₁₀ episodes such as wildfire smoke, residential wood smoke, and high wind dust events. The particulate concentration data is downloaded automatically from the stations on an hourly basis, eliminating the requirement to manually change collection filters. In addition to the PM₁₀ BAMs, AQM also operates PM_{2.5} BAMs at the Reno3, Sparks, and Galletti monitoring stations.

National Ambient Air Quality Standards (NAAQS) and AQM Planning:

EPA establishes NAAQS for six criteria pollutants including particulate matter, ozone, carbon monoxide, nitrogen dioxide, sulfur dioxide, and lead. NAAQS are required by the Clean Air Act to be reviewed every five years and they are frequently revised following these reviews. The Clean Air Act requires the AQM to develop specific NAAQS implementation elements. In general, the AQM planning requirements following NAAQS revisions include: Review and possible flagging of ambient air monitoring data, initial designation recommendations to EPA, development of an infrastructure State Implementation Plan (SIP), possible development of an attainment SIP, and possible development of control strategies. Revisions may also trigger additional monitoring and permitting requirements. Nitrogen dioxide, ozone, and sulfur dioxide Infrastructure SIPs are currently being developed for DBOH adoption and submittal to EPA.

*Dan Inouye, Branch Chief
Planning and Monitoring*

Permitting Activity

TYPE OF PERMIT	2012		2011	
	DECEMBER	YTD	DECEMBER	ANNUAL TOTAL
Renewal of Existing Air Permits	96	1339	97	1215
New Authorities to Construct	6	88	2	82
Dust Control Permits	5 (118 acres)	105 (1420 acres)	3 (29 acres)	89 (796 acres)
Wood Stove Certificates	50	330	22	259
WS Dealers Affidavit of Sale	34 (21 replacements)	134 (83 replacements)	8 (6 replacements)	107 (69 replacements)
WS Notice of Exemptions	361 (0 stoves removed)	7346 (83 stoves removed)	331 (2 stoves removed)	5480 (51 stoves removed)
Asbestos Assessments and Asbestos Removal Notifications (NESHAP)	88	1148	98	999

Compliance &
Inspection Activity

Staff reviewed fifty-three (53) 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-four (44) stationary source renewal inspections and fifty-three (53) gas station inspections in December 2012. Staff also conducted inspections on asbestos removal and construction/dust projects.

Permitting & Enforcement Activity

In addition to participating in the search for a new Business Licensing and Permitting software system for the local jurisdictions, the Permitting Staff has also been participating in conference calls and webinars focused on the Air Facility System (AFS) Modernization Project for EPA reporting. The purpose of the modernization project is to enhance the transparency of Federal, State, and local permitting and enforcement activities. Information entered into the new AFS system will be linked to the EPA Online Tracking Information System (OTIS) which will then be available for public review.

The Enforcement Staff has been very active monitoring a significant number of asbestos abatement projects currently underway throughout Washoe County. Staff has been working with the Washoe County School District, Truckee Meadows Community College, and the Veteran's Hospital. One of the highest profile projects has been the abatement of the Former YMCA located on Foster Drive in Reno. This was a three (3) week project to prepare the building for demolition in order to allow for construction of the new Truckee Meadows Boys and Girls Club.

*Charlene Albee, Branch Chief
Permitting & Enforcement*

Enforcement Activity

COMPLAINTS	2012*		2011		
	DECEMBER	YTD	DECEMBER	YTD	Annual Total
Asbestos	0	18	0	21	21
Burning	0	8	6	10	10
Construction Dust	0	30	3	59	59
Dust Control Permit	1	7	3	22	22
General Dust	2	46	0	0	0
Diesel Idling	1	8	0	3	3
Odor	1	16	0	17	17
Spray Painting	1	5	0	8	8
Permit to Operate	2	55	5	63	63
Woodstove	0	16	5	7	7
TOTAL	8	209	22	210	210
NOV'S	DECEMBER	YTD	DECEMBER	YTD	Annual Total
Warnings	2	45	5	55	55
Citations	3	41	0	9	9
TOTAL	5	86	5	64	64

* Discrepancies in totals between monthly reports can occur because of data entry delays.

Notices of Violation (NOVs):

There were five (5) Notice of Violations (NOV's) issued in the month of December, 2012. There were two (2) NOV Warnings and three (3) NOV Citations.



Washoe County Health District



Public Health
Promote. Protect.

January 24, 2013

TO: District Board of Health Members

FROM: Joseph P. Iser, MD, DrPH, MSc
Washoe County District Health Officer

SUBJECT: December 2012 Washoe County District Health Officer Report

2013 Legislative Session

- WCHD continues to coordinate with Washoe County, WCMS, NSMA, and others on legislative support issues. We will include on our monthly DBOH agenda an item to update you.

Budget

- In previous reports, we have discussed the significant budget shortfall for next fiscal year.
- We believe we have made good progress towards decreasing the shortfall in the FY 14 budget year, which would require that we leave many general funded positions unfilled and other programs potentially underfunded.
- We are still waiting to hear about the "increased flexibility" proffered by Ms. Simon.

Human Resources

- Most open, non-general funded positions remain filled.
- We have one position in CCHS, one in EPHP, and the Administrative Secretary positions under recruitment.

Communication

- DHO will continue to meet routinely or as needed with all partners.
- We continue to work with St. Mary's and UNR on their effort to produce a more substantial data set, as reported to you previously, and it appears that Renown will be working with us in the near future on a unified report to be conducted every three years.
- There is a rollout of the health assessment later this month.

Accreditation

- Internal accreditation meetings continue to occur.
- We have begun intermittent meetings and discussions to strengthen our applications next year for the CDC Public Health Prevention Specialist and the Public Health Associate Program.
- Other significant efforts for accreditation remain on hold.

Washoe County and Community Activities

- DHO attended the REMSA Board of Directors meetings in December and January.
- An update on all EMS activities related to the TriData report and other activities will be provided monthly.
- DHO and the Director of CCHS will continue to meet regularly with the group looking at school-based health centers, led by WCSD.
- The Washoe County Food Policy Council continues to meet, and their two most recent reports are attached to this document.
- DHO continues to meet routinely with the Sheriff's Dispatch working group.

State-Wide (and Beyond) Organizational Efforts

- We have established monthly conference calls with the other two local health authorities and have invited the NSHD to join us. The first of these new calls occurred in November. We will continue calls monthly to continue to try to coordinate public health in Nevada. As an update, these calls have continued.
- DHO will work to continue broader discussions among border counties for other mutual aid and program effectiveness issues. These will primarily involve the health officers, with specific program representatives involved as appropriate.

Interjurisdictional Sharing of Resources

- The Robert Wood Johnson grant began January 15. DHO will travel to all partner counties in late January and early February to begin the coordination for this assessment.
- Monthly reports will be provided to you.

District Board of Health Information and Resources

- Washoe County Food Policy Council Reports (Attached)
- Washoe County District Board of Health Scholarship Endowment Fiscal Report (Attached)
- Health District Media Contacts and Outreach

Health District Media Contacts: December 8, 2012 - January 15, 2013

<u>DATE</u>	<u>MEDIA</u>	<u>REPORTER</u>	<u>STORY</u>
1/14/2013	Reno Gazette - Journal	Steve Timko	Influenza - Ulibarri
1/14/2013	KRNV-CH 4 NBC Reno	Ashley Evans	Influenza - Ulibarri
1/14/2013	KTVN-CH2 CBS Reno	Gabby Tafolla	Influenza - Ulibarri
1/11/3013	KREN-CH 27 Univision Reno	Jose Gonzales	Influenza - Ulibarri
1/11/2013	KOLO-CH 8 ABC Reno	Kendra Kostelecky	Influenza - Ulibarri/West
1/11/2013	Reno News & Review	Traci Douglass	Wood Burning Pizza Ovens - Albee
1/10/2013	KOLO-CH 8 ABC Reno	Terri Russell	Influenza/Handwashing - Todd

1001 EAST NINTH STREET / P.O. BOX 11130, RENO, NEVADA 89520 (775) 328 2400 FAX (775) 785-2279

<http://www.washoecounty.us/health>

WASHOE COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER

1/9/2013	KUNR 88.7 FM NPR	Kate McGee	Influenza - Ulibarri
1/9/2013	KRNV-CH 4 NBC Reno	Alex Sacks	Influenza - Ulibarri
1/9/2013	Reno Gazette - Journal	Emerson Marcus	Menu Labeling/Nutrition - Seals
1/7/2013	KOLO-CH 8 ABC Reno	Denise Wong	Influenza - Shore
1/4/2013	KRXI-CH 21 FOX 11	Ryan Kern	Norovirus - Todd
1/4/2013	Reno Gazette - Journal	Emerson Marcus	Menu Labeling/Food Policy Council - Ulibarri
1/3/2013	KOLO-CH 8 ABC Reno	Ed Pierce	Yellow Burn Code - Dick
1/3/2013	KTVN-CH2 CBS Reno	Rachel Mosley	Yellow Burn Code - Dick
1/3/2013	Reno Gazette - Journal	Jef DeLong	Yellow Burn Code - Dick
1/3/2013	KRXI-CH 21 FOX 11	Matt Rosenberg	Yellow Burn Code/AQI Standards - Dick
1/3/2013	KKOH Radio - 780 AM	Jim Fannon	Yellow Burn Code - Dick
1/3/2013	Reno News & Review	Traci Douglass	Norovirus - Todd
1/2/2013	KOLO-CH 8 ABC Reno	Chris Buckley	Norovirus - Todd
1/2/2013	Reno Gazette - Journal	Shevon McAndrews	Norovirus - Todd
12/19/2012	KRXI-CH 21 FOX 11	Unk	PHP Ready or Not Report - Todd
12/19/2012	KTVN-CH2 CBS Reno	Unk	PHP Ready or Not Report - Todd
12/14/2012	Reno Gazette - Journal	Emerson Marcus	Immunizations - Shore
12/13/2012	Reno News & Review	Brad By	Bath Houses - Howell
12/12/2012	Reno Gazette - Journal	Steve Timko	County Health Rankings
12/11/2012	N. Nevada Business Weekly	John Seelmeyer	Menu Labeling

Press Releases/Media Advisories/Editorials

1/15/2013	Media Distribution List	PIO Ulibarri/Dan Inouye	Burn Code - Yellow Issued
1/9/2013	Media Distribution List	PIO Ulibarri/Dan Inouye	Burn Code Notice - Red Rescinded
1/8/2013	Media Distribution List	PIO Ulibarri/Kevin Dick	Burn Code Notice - Red Issued
1/6/2013	Media Distribution List	Kevin Dick	Burn Code Notice - Red Rescinded
1/4/2013	Media Distribution List	Kevin Dick	Burn Code Notice - Red Issued
1/3/2013	Media Distribution List	PIO Ulibarri/WCSD	Joint Press Release - Norovirus
1/2/2013	Media Distribution List	PIO Ulibarri/Kevin Dick	Air Quality Index Standards

Joseph P. Iser MD, DrPH, MSc

Joseph P. Iser, MD, DrPH, MSc
 District Health Officer

DATE: November 16, 2012
TO: Joseph Iser, MD, DrPH, MSc
Washoe County District Health Officer
FROM: Kerry Seymour, MS, RD
Chair, Washoe County Food Policy Council
RE: Washoe County Food Policy Council
4th Quarter 2012/1st Quarter 2013 Report (May – September, 2012)

The inaugural meeting of the Washoe County Food Policy Council (FPC) was convened May 17, 2012 at the Washoe County Health District (WCHD) office, with the Health District's Erin Dixon presiding and Kelli Seals recording minutes. FPC elected members present (with the WC Food Plan segment each represents identified) were Amber Sallaberry (Food Distribution), Ann Louhela (Food Production), Barbara Scott (Public Food Programs), Haley Anderton-Folmer (Community Planning), Kerry Seymour (Member at Large), Kimothy Smith (Data & Surveillance), Kristi Jamason (Member at Large), Lisa Hill (Food Preparation) and Ty Whitaker (Consumers). Ron Wix (Member at Large) participated via telephone.

Business conducted at the first meeting included a presentation by Erin on the background of the Council's establishment and discussion of its potential role in the community, extended introductions of Council members with each sharing their vision for the Council. A discussion of Council structure and logistics ensued, with meetings to be held on the fourth Friday of each month, noon to 2 p.m. Kerry Seymour volunteered to serve as Chair for one year and Kimothy Smith volunteered as co-chair, with that position later revised to vice-chair.

Subsequent meetings have been held monthly. Replacement selection is in progress to fill Ron Wix's Member at Large position. Ron resigned in September citing medical reasons.

Accomplishments through September, 2012 include:

- Ongoing definition of operating procedures and policies
- Creation of Basecamp online platform to facilitate and house Council communications – hosted by Kimothy Smith.
- Creation of purpose statements. **Vision:** Washoe County has a healthy local food system nourishing our community. **Mission:** Support a vibrant, healthy and equitable local food system for Washoe County, Nevada.
- Establishment of three Workgroups: Food Policy, Food Access and Acceptance, and Marketing and Outreach. Chairs/co-chairs were identified for each, and start-up meetings of Food Policy and Food Access were held. Procedures to invite public participation in these work groups are in development.
- Starting with the September meeting, having a guest speaker present at each meeting, to obtain external input and information to inform Council action. September's speaker was Jana Vanderhaar of the Local Food Network. Dr. Joseph Iser is scheduled to present in October on "Health in All Policies."
- Planning to create the Council's website and logo, and baseline food assessment survey.

While in its early stages of defining its purpose and actions, the Council approaches its work of service to Washoe County residents with enthusiasm and commitment.

DATE: January 11, 2013
TO: Joseph Iser, MD, DrPH, MSc
Washoe County District Health Officer
FROM: Kerry Seymour, MS, RD
Chair, Washoe County Food Policy Council
RE: Washoe County Food Policy Council
2nd Quarter 2013 Report (October - December, 2012)

Council Vision: Washoe County has a healthy local food system nourishing our community.

Mission: The Washoe County Food Policy Council supports a vibrant, healthy and equitable local food system for Washoe County, Nevada.

The Washoe County Food Policy Council held second quarter 2013 meetings October 19, November 16 and December 14, 2012. Kerry Seymour presided as Chair with and Kristi Jamason and Haley Anderton-Folmer serving as co-Vice-Chairs. FPC elected members present (with the WC Food Plan segment each represents identified) were Amber Sallaberry (Food Distribution), Ann Louhela (Food Production), Barbara Scott (Public Food Programs), Haley Anderton-Folmer (Community Planning), Kerry Seymour (Member-at-Large), Kristi Jamason (Member at Large), Lisa Hill (Food Preparation) and Ty Whitaker (Consumers). Kimothy Smith (Data & Surveillance) resigned prior to the October meeting citing lack of time and availability due to new job demands. Kimothy agreed to continue to host Basecamp the online platform to facilitate and house Council communications. Replacement selection for Kimothy's and a previously vacated Member-at-Large position were filled. New members Karyn Grow (Data & Surveillance) and LaRae Wilson (Member-at-Large) attended the December meeting.

Business conducted and accomplishments through December, 2012 included:

- Ongoing definition of operating procedures and policies.
- Biographical sketches and photos of Council members were placed on the Washoe County website.
- The three Workgroups - Food Policy, Food Access and Acceptance, and Marketing and Outreach – have met and identified preliminary goals and tasks.
- Four FPC members participated in the Western Nevada Regional Food Summit sponsored by the Healthy Communities Coalition.
- Member Lisa Hill met with Grady Tarbutton, WC Senior Services, to assess needs.
- Members Kristi Jamason and Ty Whitaker provided Erin with support resources for the Washoe County Health Division community garden project.
- Council members Kristi Jamason and Ann Louhela participated in the Agriculture and Economic Development working group for the development of a Nevada Food Security Plan, a draft of which has now been sent to the Governor. Ms. Jamason is providing updates on the Plan's status.
- Guest speakers included Dr. Joseph Iser presenting in October on "Health in All Policies;" and Catrina Peters (NV Department of Education and NV Farm to School Committee) and Ashley Jeppson (NV Department of Agriculture) presenting in November on the Nevada Farm to School initiative, including a grant received to initiate and coordinate statewide Farm to School training and other activities.

- Work progresses on the Council's website, logo and marketing plan.
- Assignments were made to update the WC Food Plan's food access and assessment data.

The Council looks forward to 2013 opportunities to refine operations and actively promote its vision and mission.



University of Nevada, Reno

December 14, 2012

Mr. Joseph Iser
Washoe County District Health Department
1001 E. 9th St.
PO Box 11130
Reno, NV 89512

Dear Mr. Iser:

The University of Nevada, Reno is a school on the move, keenly focused on attracting the best students, providing a quality education with acclaimed faculty and graduating students to meet the increasing demand for a skilled workforce. The Nevada campus has undergone unprecedented change over the last several years, transforming the institution to a place where tradition meets technology, where facilities are student-centered, and where hands-on learning and cutting-edge research happen every day. All these efforts prepare our graduates with the knowledge and skills they need to be successful, that they in turn will help strengthen the economy of the state and nation. We are successful in our enterprise only with the steadfast and generous support of our alumni, friends, faculty, staff and community partners. Because of you we proudly acknowledge some of our newest milestones:

- We welcomed a record 18,227 students to campus when classes began on Aug. 27.
- Residence hall assignments were up 8 percent over fall 2011, and more than 2,450 students moved in on Aug. 23.
- We opened the new 124,000-square-foot Nevada Living Learning Community, adding 320 beds, plus four classrooms and 12 faculty offices. Even with this newest dorm, residence halls are at 110 percent of their design capacity.
- Our student body now includes 47 National Merit Scholars and 185 Presidential Scholars.
- Last year, the University graduated 3,658 people with degrees, up from 3,561 in 2011. Since its founding, the University has awarded nearly 85,000 degrees.
- We reopened the newly renovated building of the Donald W. Reynolds School of Journalism and Center for Advanced Media Studies after an 18-month substantial technological upgrade, supported by a \$7.9 million gift from the Donald W. Reynolds Foundation, and a \$1.6 million Fund for the Future of Journalism campaign, which will support the building and technology enhancements.
- Marc A. Johnson was inaugurated on Sept. 28 as the University's 16th President.

The University of Nevada, Reno continues to build a solid reputation for quality teaching, cutting-edge research and important community outreach.

- The University was again ranked by *U.S. News and World Report's* annual "best colleges" in the top tier of "best national universities," and ranked among the "top public schools" in the country.
- *U.S. News and World Report* also ranked Nevada's colleges of Engineering and Business as "best undergraduate programs," and the College of Business is listed among "best graduate schools."
- Two new endowed professorships were established by donors for the entrepreneurship program in the College of Business: the Hopping Professorship in Entrepreneurship and the Charles N. Mathewson Professorship in Entrepreneurship.
- Phil and Jennifer Satre '80M.Ed. pledged \$5 million to benefit the School of Medicine to boost translational research efforts, K-12 endeavors in the College of Education and Wolf Pack Athletics.

**175439 Washoe County District Board of Health Scholarship
Endowment (Health Sciences)**

FOUNDATION
Morrill Hall/162
Reno, Nevada 89557-0162
(775) 784-1587
(775) 784-1957 fax
Email: giving@unr.edu
TIN: 94-2781749

There are challenges ahead. As President Marc Johnson stated during his inaugural address, higher education continues to face “substantial pressure to increase the quantity of graduates with few new resources.” But, as President Johnson added, “Our value as an institution, in this volatile, uncertain world, has never been greater.” We will continue to rise to the challenges and Nevada will continue to be a school on the move. We appreciate the many individuals and community partners who, through their endowed support, assist in meeting these challenges and aiding in our path to distinction.

Mr. Iser, we continue to be grateful for the establishment of the **Washoe County District Board of Health Scholarship Endowment Fund**. There is no greater honor for the University of Nevada, Reno than to recognize the Washoe County District Board of Health's commitment to higher education in this important and meaningful way. Endowed gifts like yours are an enduring asset that enables the University and the state of Nevada to realize its future. Your support has helped shape the University and allowed us to remain competitive and strong through times of both turbulence and triumph.

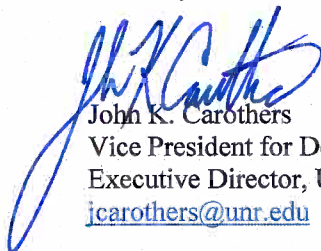
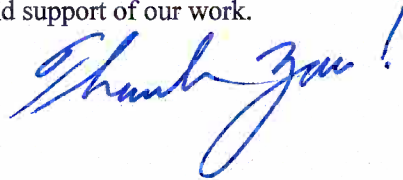
Our overall endowment continues to rebuild much of the value it lost during the economic downturn. The Foundation's volunteer Board of Trustees and its Investment Committee work diligently to establish prudent parameters for investment asset allocation, and accomplish this by working closely with the Foundation's independent consultant Wilshire Associates. Based on the prudent investment parameters established by the Foundation, Wilshire provides periodic projections for returns on the Foundation's investments. Over the last four years those forecasted projections have declined.

As a result of declining asset return projections, it was evident that the Foundation needed to change the amount of distribution from the endowment in order to preserve the value of the endowment for the long-term. After much consideration, the Foundation board approved a reduced spending rate from the endowment to 4.5%, down from 5%, and a 25% reduction in the management fee, from 1% to 0.75%. This change represents a reduction in the total distribution from 6% to 5.25%. While this change will not take effect until July 1, 2013, this measure is a prudent means to maintain the long-term spending power of the endowment.

I am privileged to share with you the attached report for your endowed fund and hope it is both helpful and beneficial. We understand that this information can create questions, so please feel free to contact me at (775) 784-1352 or jcarothers@unr.edu, or Keiko Weil, Director of Donor Relations at (775) 784-1587 or kweil@unr.edu, with any questions you might have.

We are united in President Johnson's promise “to pursue a course rooted in the decency, strength of spirit, and unbounded potential for knowledge that has characterized this institution since our founding in 1874,” and we thank you for your belief in and support of our work.

Sincerely,



John K. Carothers
Vice President for Development and Alumni Relations
Executive Director, University of Nevada, Reno Foundation
jcarothers@unr.edu

175439 Washoe County District Board of Health Scholarship Endowment (Health Sciences)

The 2012 ANNUAL REPORT of the
UNIVERSITY OF NEVADA, RENO FOUNDATION ENDOWMENT

Washoe County District Board of Health Scholarship Endowment Fund

Market Value as of 6/30/11 **\$16,206**

Market Value as of 6/30/12 **\$15,841**

The above information excludes any additions made after May 31, 2012. Gifts received for the endowment are included in the very next scheduled quarterly investment buy after the gift is received.

The Foundation's new payout and management fee policy was approved by the University of Nevada, Reno Foundation Board of Trustees on June 21, 2012, and takes effect July 1, 2013. The payout allows for 4.5 percent (4.5%) of the 12-quarter average market value for distribution purposes, reduced from 5%.

The Foundation's new reduced management fee takes effect July 1, 2013 and allows for an annual 0.75% fee (reduced from 1%) to be assessed on the endowment in the fiscal year ending June 30, 2013 for administrative expenses associated with managing the endowment funds.

The *market value* represents the actual worth of the endowment fund invested in the University of Nevada, Reno Foundation's general endowment pool as of the specified date.

175439 Washoe County District Board of Health Scholarship Endowment (Health Sciences)

The 2012 ANNUAL REPORT of the
UNIVERSITY OF NEVADA, RENO FOUNDATION ENDOWMENT

Washoe County District Board of Health Scholarship Endowment Fund

The University of Nevada, Reno Foundation was established in 1981 with the mission of attracting philanthropy to the University of Nevada, Reno. As we mark the 31st anniversary of its founding, we are pleased to note that the Foundation has raised more than \$468 million in private gifts, including \$21.7 million for the fiscal year ending June 30, 2012. For the same time period, the number of donors to the University increased by 8 percent, from 9,176 to more than 10,000.

The Foundation's endowment value stood at more than \$117 million as of June 30, 2012, an increase in value of more than 6 percent from \$110 million at June 30, 2011. Distributions from the endowment finance vital activities at the University of Nevada, Reno including undergraduate student scholarships, professorships and chairs, graduate fellowships, library acquisitions, building projects and maintenance, academic programs and research.

The University of Nevada, Reno Foundation endowment includes more than 700 named endowment accounts. The endowment funds are responsibly managed by the Investment Committee of the Foundation, which receives independent professional investment advice from Wilshire Associates.

As of June 30, 2012, the funds were invested at the ratio of 36.77% in equities, 6.38% in private equities, 36.11% in fixed income, 11.28% in real estate, 8.04% in inflation linked investments, and 1.42% in cash awaiting investment. The goal of this allocation is to produce a return that meets spending obligations and maintains or increases the real value of the endowment.

For the 12-month reporting period of June 30, 2011 through June 30, 2012, the Foundation had a net return of +4.77% for all assets, compared to the benchmark policy index of +4.63%, the S&P 500 Equity Index of +5.44%, the MSCI All Country World ex-U.S. Equity Index of -14.56%, and the Barclay's Aggregate Bond Index of +7.48%, for the same period of time.

As of June 30, 2012, the Foundation's three- and five-year overall average rate of returns for the endowment, net of fees, were +10.54% and +0.20% respectively. These returns use March 31, 2012 market values for the non-marketable investments.

The Foundation's policy is administered in accordance with the Uniform Prudent Management of Institutional Funds Act (UPMIFA), the provisions of which are set forth in Chapter 164 of the Nevada Revised Statutes. The Foundation's Investment Policy and its Underwater Accounts spending policy can be found on the University's website at: <http://giving.unr.edu/foundation.aspx>.

175439 Washoe County District Board of Health Scholarship Endowment (Health Sciences)

The 2012 ANNUAL REPORT of the
UNIVERSITY OF NEVADA, RENO FOUNDATION ENDOWMENT

Washoe County District Board of Health Scholarship Endowment Fund

Please keep this form for your records

We invite you, if you so desire, to make a contribution to your endowment. A gift to the fund may be used to make an increased distribution in 2013-14, to increase the principal of the endowment, or both. We welcome your gift and have enclosed a return envelope for your convenience.

The estimated 2013-14 annual payout will be: \$680

Of my enclosed gift, I wish for the following:

A.	\$ _____	Amount to be distributed for the 2013-14 year (to be added to the 2013-14 calculated payout above to increase the payout for the academic year); and/or
-----------	----------	--

B.	\$ _____	Amount to be put toward the principal fund.
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Should you opt to make a gift, please return one copy of this duplicate form with your gift in the enclosed envelope. Should you wish to make a gift via credit card or electronic funds transfer (EFT), please complete the enclosed blue form, or call our office at (775) 784-1587. In order to notify departments of available distributions, please respond by January 15, 2013.

More than 8,600 companies match donations made by employees, their families, and retirees to universities and other institutions of higher education. If your company participates in such a program, your gift can be doubled or even tripled for the University of Nevada, Reno. To see if your employer has a matching gift program, please visit our giving website at <http://giving.unr.edu/matchinggifts.aspx>.

175439 Washoe County District Board of Health Scholarship Endowment (Health Sciences)