

Washoe County



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 SHARON ZADRA

KEVIN DICK
Interim District Health Officer

LESLIE ADMIRAND
Deputy District Attorney

Health District

WASHOE COUNTY HEALTH DISTRICT
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MEETING NOTICE AND AGENDA

Washoe County District Board of Health

Date and Time of Meeting: Thursday, January 23, 2014, 1:00 p.m.

Place of Meeting: Washoe County Health District
 1001 East Ninth Street, Building B
 South Auditorium
 Reno, Nevada 89512

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. Matt Smith
	*2.	Roll Call	Ms. Dawn Spinola
Public Comment	*3.	Public Comment (limited to three (3) minutes per person). No action may be taken.	Mr. Matt Smith
	4.	Approval/Deletions to Agenda for the January 23, 2014 Meeting	Mr. Matt Smith
	5.	Approval/Additions/Deletions to the Minutes of the December 19, 2013 Regular Meeting	Mr. Matt Smith
	*6.	Recognitions Introduction of New Employee(s) – 1. Dawn Spinola - Administrative Secretary –AHS – 1/13/14 B. Promotions – 1. Theresa Goins – Permanent, Part-Time Advanced Practitioner of Nursing (APN) - CCHS C. Years of Service – 1. Christina Burton (Tina) – Plans/Permits Aid – AQM – 25	Mr. Matt Smith Mr. Kevin Dick

Time	Agenda Item No.	Agenda Item	Presenter
		Years D. Retirements/Departures – 1. Candy Hunter – Public Health Nurse Supervisor – Retired 1/21/14 with 35 Years of Service 2. Wallace Prichard – Air Quality Specialist II – Retiring 1/31/14 with 13+ Years of Service 3. Mary Clauson – Office Assistant II – Leaving Nevada 1/31/14 with 12+ Years of Service E. Introduction of New Washoe County Manager – 1. John Slaughter – 11/12/13	
	7.	Proclamations A. National Heart Month and National Wear Red Day B. National Radon Action Month in Washoe County	Mr. Matt Smith Mr. Kevin Dick Mr. Steve Kutz
	8.	<p><u>Consent Agenda: Matters which the District Board of Health may consider in one motion. Any exceptions to the Consent Agenda must be stated prior to approval.</u></p> <p><u>A. Air Quality Management Cases:</u></p> <ol style="list-style-type: none"> 1. Recommendation to Uphold Citations Not Appealed to the Air Pollution Control Hearing Board: <ol style="list-style-type: none"> a. Whittlesea Checker Taxi – NOV 5396, Case 1142 100 Sunshine Lane, Reno, NV 89502 2. Recommendation of Cases Appealed to the Air Pollution Control Hearing Board. None. 3. Recommendation for Variance: None. <p><u>B. Sewage, Wastewater & Sanitation Cases:</u> Recommendation to Approve Variance Case(s) Presented to the Sewage, Wastewater & Sanitation Hearing Board. None.</p> <p><u>C. Budget Amendments / Interlocal Agreements:</u></p> <ol style="list-style-type: none"> 1. Approval of the Washoe County Smoke Management Program Memorandum of Understanding with Truckee Meadows Fire Protection District, North Lake Tahoe Fire Protection District, The Nevada Department of Conservation and Natural Resources, Division of Forestry, Division of State Lands, Division of State Parks and Division of Wildlife; and the United States Department of the Interior, Bureau of Land Management and Fish & Wildlife Service <p><u>D. Retroactive authorization of travel and travel reimbursements</u> for non-County employee Harry “Bus” Sharman (District 1 Commissioner from Churchill County) to</p>	<p>Ms. Charlene Albee</p> <p>Ms. Erin Dixon</p> <p>Ms. Eileen Stickney</p>

Time	Agenda Item No.	Agenda Item	Presenter
		attend the Robert Wood Johnson Foundation Learning Center Community meeting in San Diego, California in the approximate amount of \$1,000, supported by the grant award (IO 20385).	
	9.	<u>Air Pollution Control Hearing Board Cases appealed to the District Board of Health.</u> None.	Ms. Charlene Albee
	10.	<u>Regional Emergency Medical Services Authority:</u> A. Review and Acceptance of the REMSA Operations Reports for December, 2013 *B. Update of REMSA's Community Activities Since December, 2013	Mr. Jim Gubbels
	11.	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. Randall Todd
	12.	Approval of the Health Fund Revenue and Expenditure Report for December, 2013	Ms. Eileen Stickney
	13.	Fiscal Year 2015 Budget Kick-off, Calendar and Update with possible direction to staff.	Ms. Eileen Stickney
	14.	Approval of proposed changes to the District Board of Health's Suggested Guidelines for Emergency Medical Services (EMS) Coverage for Mass Gatherings	Ms. Christina Conti
	15.	Recommendation to Approve an Employment Agreement Between the Washoe County District Board of Health and Mr. Kevin Dick, for the Position of District Health Officer	Mr. Matt Smith
	16.	Discussion and possible direction to staff on results of the National Public Health Performance Standards Public Health Governing Entity Assessment Instrument from the January 16, 2014 Washoe County District Board of Health meeting	Mr. Matt Smith
	*17.	<u>Staff Reports and Program Updates</u> A. Director, Epidemiology and Public Health Preparedness Communicable Disease - Influenza, Public Health Preparedness & Continuity of Operations, Training, Public Awareness and Medical Reserve Corps	Dr. Randall Todd
		B. Director, Community and Clinical Health Services Client Satisfaction Survey Results, Program Update – Sexual Health, Divisional Update and Program Reports	Mr. Steve Kutz

Time	Agenda Item No.	Agenda Item	Presenter
		C. Director, Environmental Health Services Food Program, Vector-Borne Disease Program, General Environmental and EHS Inspection Totals	Mr. Robert Sack
		D. Acting Director, Air Quality Management Air Quality, Monitoring and Planning Activity, Permitting Activity, Compliance & Inspection Activity and Permitting & Enforcement Activity	Mr. Daniel Inouye
		E. Administrative Health Services Officer Updates previously provided during Agenda Items Nos. 13 & 14	Ms. Eileen Stickney
		F. Interim District Health Officer REMSA/EMS, Fundamental Review, Permit Software Project, Quality Improvement Initiative, Healthy Community Conversation, Staffing, Other Events & Activities and Health District Media Contacts	Mr. Kevin Dick
Board Comment	*18.	Limited to Announcements or Issues for Future Agendas	Mr. Matt Smith
	19.	Emergency Items	Mr. Kevin Dick
Public Comment	*20.	Public Comment (limited to three (3) minutes per person). No action may be taken.	Mr. Matt Smith
	21.	Adjournment	Mr. Matt 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

Supporting materials are available to the public at the Washoe County Health District located at 1001 E. 9th Street, in Reno, Nevada. Ms. Dawn Spinola, Administrative Secretary to the District Board of Health is the person designated by the Washoe County District Board of Health to respond to requests for supporting materials. Ms. Spinola is located at the Washoe County Health District and may be reached by telephone at (775) 328-2415 or by email at dspinola@washoecounty.us. Supporting materials are also available at the Washoe County Health District Website www.washoecounty.us/health pursuant to the requirements of NRS 241.020.

Washoe County



Health District

**Washoe County District Board of Health
Regular Meeting Minutes
December 19, 2013**

PRESENT: Chair Matt Smith, Vice Chair Kitty Jung, David Silverman, Dr. George Hess, Dr. Denis Humphreys, Council Member Julia Ratti (1:08pm) and Council Member Sharon Zadra (1:18pm)

ABSENT: None

STAFF:

Kevin Dick, Interim District Health Officer
 Leslie Admirand, Deputy District Attorney
 Eileen Stickney, Administrative Health Services Officer, AHS
 Charlene Albee, Acting Division Director, AQM
 Steve Kutz, Division Director, CCHS
 Robert Sack, Division Director, EHS
 Randall Todd, Dr. PH, Division Director, EPHP
 Steve Fisher, Department Computer Application Specialist, AHS
 Laurie Griffey, Admin Assistant I/Recording Secretary, AHS

Patsy Buxton, Fiscal Compliance Officer, AHS
 Erin Dixon, Fiscal Compliance Officer, AHS
 Jennifer Howell, Program Coordinator, CCHS
 Linda Gabor, Public Health Nurse Supervisor, CCHS
 Stacy Hardie, Public Health Nurse Supervisor, CCHS
 Jeff Whitesides, Public Health Preparedness Manager, EPHP
 Christina Conti, Emergency Response Coordinator, EPHP
 Jacqueline Chaidez, Community Health Aid, WIC
 Catherine Gipe, Licensed Practical Nurse, CCHS
 Jan Houk, Public Health Nurse, CCHS

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
1:00 pm *1, 2	Meeting Called to Order, Pledge of Allegiance and Roll Call	Chair Smith called the meeting to order. Roll call was taken and a quorum noted. The Pledge of Allegiance was led by Mr. Steve Kutz .	
*3.	Public Comment	None.	
4.	Approval / Deletions – Agenda – December 19, 2013	Chair Smith called for any deletions or corrections to the Agenda of the December 19, 2013 DBOH Meeting. Chair Smith noted that Item No. 16 would be continued to next month.	Dr. Hess moved, seconded by Mr. Silverman , that the December 19, 2013 Agenda be approved as amended. <u>MOTION CARRIED</u>

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
5.	Approval / Additions / Deletions to the Minutes of the November 21, 2013 Regular Meeting	Chair Smith called for any additions or corrections to the Minutes of the November 21, 2013 Regular Meeting.	Commissioner Jung moved, seconded by Dr. Hess , that the Minutes of the November 21, 2013 Regular Meeting be approved as presented. <u>MOTION CARRIED</u>
*6.	Recognitions	Mr. Dick and Chair Smith made the following recognitions: A. Introduction of New Employee(s) – 1. Jan Houk - Public Health Nurse – CCHS 11/18/13 B. Promotions – 1. Linda Gabor – Public Health Nurse Supervisor – CCHS – 12/9/13 2. Luke Franklin – Senior Environmental Specialist- EHS 12/2/13 C. Years of Service – 1. Jacqueline Chaidez – WIC – 10 Years D. Retirements – 1. Catherine Gipe – CCHS – 20+ Years E. Recognitions – None.	Mr. Smith and Mr. Dick
7.	Proclamations	None.	
8.	Consent Agenda	A. <u>Air Quality Management Cases:</u> 1. Recommendation to Uphold Unappealed Citations to the Air Pollution Control Hearing Board. a. McCarran Mart – Case 1137, NOV 5270 13900 Stead Boulevard, Reno NV 89506 2. Recommendation of Cases Appealed to the Air Pollution Control Hearing Board. a. Custom Performance Restoration – Case 1133, NOV 5249 340 Freeport Boulevard #17, Sparks NV 89531	

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
		<p>3. Recommendation for Variance: None.</p> <p>B. Sewage, Wastewater & Sanitation Cases: Recommendation to Approve Variance Case(s) Presented to the Sewage, Wastewater & Sanitation Hearing Board. None.</p> <p>C. Budget Amendments / Interlocal Agreements:</p> <p>1. Ratification of Amendment #2 to Intrastate Interlocal Contract Between State of Nevada, Department of Conservation and Natural Resources, Division of Environmental Protection and the Washoe County Health District in the Total Amount of \$872,000 (\$218,000 base funding per year for FY14, FY15, FY16 and FY17) in support of the Underground Storage Tank (UST) and Leaking Underground Storage Tank (LUST) Grant Program; Approval of Amendments Totaling an Increase of \$21,519.85 in Revenue and Expense to the FY14 UST/LUST Grant Program, IO 10023; and if Approved Authorize the Chairman to Execute.</p>	<p>Council Member Ratti moved, seconded by Dr. Humphreys, that the Consent Agenda be approved as presented.</p> <p><u>MOTION CARRIED</u></p>
9.	Air Pollution Control Hearing Board Cases Appealed to the District Board of Health.	None.	
10.	<p><u>Regional Emergency Medical Services Authority:</u></p> <p>A. Review and Acceptance of the Operations and Financial Reports for November, 2013; and</p> <p>B. Update of REMSA's Community Activities Since November, 2013</p>	<p>Mr. Jim Gubbels, President of REMSA, reported that in November, 2013, Priority 1 Compliance was 94%, and Priority 2 Compliance was 98%. Priority 1 Compliance by zone, the 8-minute zone was 94%, the 15-minute zone was 98%, and the 20-minute zone was at 97%. Average bill for the month for Care Flight was \$7,687, which brought the year-to-date average to \$8,300. The average bill for Ground Service for the month was \$1,069, which brought the year-to-date ground average to \$1,066.</p> <p>Mr. Gubbels, reported REMSA participated in several Christmas and community activities: Channel 2 Food Drive; Senior Bridges Part at Northern Nevada Medical Center, providing quilts and goodie bags for 45 seniors; Secret Santa at the Children's Cabinet; Shop with a Sheriff program and REMSA Care Flight hosted the Kids Christmas party for 72 children and REMSA staff.</p>	<p>Dr. Hess moved, seconded by Mr. Silverman, to accept the REMSA Operations and Financial Report for November 2013 as presented.</p> <p><u>MOTION CARRIED</u></p>
11.	Presentation, Discussion, and Possible Direction to Staff regarding Emergency Medical Services ("EMS"),	<p>Dr. Todd advised a brief report was submitted with the board packet.</p> <p>Additional information: The Executive Committee and Working Groups continue to meet; the Executive Committee is meeting on a more robust schedule. Significant progress is being made towards achieving a consensus on the various TriData</p>	

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
	Including Recommendations Contained in the TriData Report and Various Other EMS Studies	recommendations. Once a consensus is reached a principle of agreement document will be developed and eventually be incorporated into a Revised Franchise Agreement.	Report presented no action taken. <u>NO MOTION</u>
12	Presentation, Possible Discussion with Recommendation for Approval of the Revisions to the District Board of Health's Multi-Casualty Incident Plan (MCIP)	<p>Ms. Conti, Emergency Response Coordinator for the Health District and Captain Millette, Sparks Fire; gave a presentation on the recommended revisions to the Multi-Casualty Incident Plan (MCIP). Ms. Conti introduced the regional partners present in support of the recommended revisions: Brian Taylor, REMSA; Tracy Moore, Washoe County School District Police; Rob McLaughlin, Emergency Manager VA Hospital and Chair of the Inter-Hospital Coordinating Council; and Tim Spencer, City of Reno Emergency Manager/Fire.</p> <p>The MCIP was created in 1996 and has had several revisions. The current recommended revisions came from the normal process of reviewing the plans and from recommendations which came out of the Air Race Multi-Casualty Incident (MCI). The biggest recommended change is a different Triage system. During the Air Race MCI it was noted that the triage tags were not very effective when used in an actual incident with multiple casualties. A work shop was conducted in December 2012, involving all regional agencies impacted by the MCIP plan.</p> <p>Captain Millette indicated a Triage Tag workgroup was created for the purpose of developing a new tool and a more effective triage system. The agencies who would respond to an MCI (REMSA and Fire Agencies) worked together in a FEMA supported exercise conducted at the Silver Club Casino in Sparks, Nevada. The exercise was used to test the different triage tools available. After testing the different triage systems, the group developed a Disaster Management System (DMS) with an effective quick Triage ribbon system. This DMS is much more efficient and effective, while being less cumbersome in the field; tie a ribbon on the patient and move on. Patients are moved from the scene to a re-triage/transport area according to the color of the ribbon. They are re-triaged according to their current condition before being transported to the hospital. Special tags can be placed on contaminated patients. A more robust tag system is used at the re-triage/transport area than was used in the past. Samples were provided for the board to examine. These agencies worked well together on a common goal and created a great new system that will benefit the whole community.</p> <p>Ms. Conti indicated the group took the information provided, rewrote the plan, sent it to the regional partners for review, then held a workshop on December 2, 2013, to allow regional partners a final opportunity to review and provide additional input. The changes included in the plan are the addition of an Air Operations Branch, the new triage system, and an appendix that addresses the integration of other organizations. She indicated this appendix was added since rural areas in our county may receive</p>	

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
		<p>mutual aid from other organizations. The routine changes include cleanup of agency names, update of regional partnerships and equipment. The Air Operation Branch was added as a direct result from the Air Race MCI. It clarifies the use of aircrafts during multi-causality incidents. The triage tag system became a critical issue during the Air Race MCI. The new tags are more comprehensive and very intuitive. The ability to re-triage is critical and the new system integrates well with the medical facilities, and provides better tracking of patients through the Regional Emergency Operations Center. All of the agencies in the region will use the same triage tag, so the initial triage is the same no matter which agency does the triage. Ms. Conti indicated the next step in the process is the approval of the MCIP plan. If the plan is approved it will become effective January 1, 2014, and is estimated to be in full operational status by April 1, 2014. The expectation is to have training of all regional partners accomplished by the end of the first quarter of 2014.</p> <p>Dr. Hess inquired if Carson City/Tahoe, Douglas and bordering counties are participating in the new Triage process.</p> <p>Captain Millette indicated the other areas are not currently participating, but during the training process the group will reach out to the boarding cities/counties to share the information on the new DMS system. The new tags are very comprehensible.</p> <p>Ms. Conti advised that the Health District in Carson City has already inquired about information on the new system and has started looking at the cost of implementing the new triage system. They may consider changing to the new process as they have the potential to receive patients from our area.</p> <p>Dr. Humphreys asked if there will be follow up on training, since implementation will require all agencies to be trained.</p> <p>Captain Millette indicated training will be done through a train the trainer type program. A couple representatives from each agency will be trained and will be responsible for providing training to all applicable staff in their agency. Follow up on the new triage process will be done during upcoming community wide drills. The new DMS triage system will be utilized during the Airport Broken Propeller drill scheduled in May 2014.</p> <p>Dr. Humphreys inquired about the cost of this new triage process.</p> <p>Ms. Conti advised that the initial startup cost were covered through a grant opportunity. Each agency will be responsible for the cost of replenishing their supply, which is the current practice.</p> <p>Commissioner Jung inquired as to when all of the agencies will be carrying the new tags and if there are plans for a press release to advise the public of the improvements being made as a result of the Air Race MCI.</p>	

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		<p>Ms. Conti indicated some equipment is available in the community; additional inventory can be purchased after the approval of the revised Multi-Casualty Incident Plan.</p> <p>Captain Millette indicated he doesn't see an issue with a press release but advised it would be up to higher management to decide. It may not be beneficial to relate it back to the Air Race MCI. The MCIP is posted on the Washoe County Health District website so a press release by the Health Officer or PIO could be advantageous in informing the public the plan has been updated and improvements have been made.</p> <p>Commissioner Jung inquired if there is evidence of patients switching tags for faster care?</p> <p>Ms. Conti indicated it is rare but it has happened in the past. This is less likely with the new system as the color ribbon only gets the patient to the re-triage/transport station where their symptoms will be evaluated for priority of transport.</p> <p>Dr. Hess inquired as to the coordination of resources related to the Air Operations.</p> <p>Captain Millett and Ms. Conti indicated the inclusion of an Air Operations Branch will help keep the Operations branch more informed of the resources that are available but not seen.</p> <p>Dr. Humphreys commended all of the Health District staff, agencies and regional partners who were involved in this project for their teamwork and for producing a quality product that will benefit the whole community.</p>	<p>Dr. Humphreys moved, seconded by Commissioner Jung, to Approve the Revisions to the District Board of Health's Multi-Causality Incident Plan (MCIP) as presented.</p> <p><u>MOTION CARRIED</u></p>
13.	Review and Acceptance of the Monthly Public Health Fund Revenue and Expenditure Report for November, 2013	<p>Eileen Stickney, Administrative Health Services Officer. Staff recommends the District Board of Health accept the attached report of revenues and expenditures for the health fund for November, 2013 for Fiscal Year 2014.</p> <ul style="list-style-type: none"> • The environmental oversight account (tank farm) current balance is \$108,319,53. The bank statement had not been received. • Under Administration (page 5) in the Revenue section, Other Misc Govt Revenue is budgeted at \$62,228,75. The report shows an actual receipt of revenue of \$314,381, which puts Administration at 505%. While Administration would like to have this revenue the funds actually belong to Air Quality. The funds were received from the State in the form of a check and are temporarily being housed in Administration until an Internal Order is established and a journal entry is done to move the funds to the Air Quality account. 	<p>Council Member Zadra moved, seconded by Dr. Hess, to accept the Monthly Public Health Funds Revenue and Expenditure Report for November 2013 as presented.</p> <p><u>MOTION CARRIED</u></p>

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
*14.	Update on Citation and Enforcement regarding Prevention of Bear Activity within Populated Areas (Continued from November 21, 2013)	<p>Mr. English provided a brief update on bear activities related to solid waste issues in the populated areas of Washoe County. There has been a dramatic increase of complaints of bear activity in populated areas since the issuance of a press release. The Health District was proactive and issued a press release indicating how citizens could contact the Health District if they had bear related issues. The bears are not particular where they go so there are issues in both incorporated and unincorporated areas.</p> <p>Items that occurred in the last couple of months:</p> <ul style="list-style-type: none"> • The Board of Trustees of Incline Village is moving forward and has directed staff as of December 10, 2013, to change their franchise agreement to require all commercial and residential accounts to have bear resistant trash containers. The Health District is assisting IVGID with language and will continue to assist as needed. • As of Friday, December 13, 2013, the City of Reno has also changed their franchise agreement to allow the servicing of animal resistant containers. The Washoe County regulations allow the Health District to require these types of containers and we have been requiring them this fall. Some residents have switched to animal resistant containers, which caused a servicing need in the community. The City of Reno stepped up to address this need. Washoe County is looking at doing something along the same line. <p>Council Member Ratti indicated she has not heard of any bear complaints in the City of Sparks, and did not hear Sparks mentioned by Mr. English. Is there an issue she needs to pursue?</p> <p>Mr. English indicated there are no specific issues with bears in the City of Sparks at this time. The regulations are district wide so if issues with dogs and coyotes (which are the primary problems in the City of Sparks, Sun Valley and Cold Springs) increase residents in the affected areas could be required to have locking garbage containers. To date this has not been an issue. If an issue does arise it will be brought to the City of Sparks attention.</p>	
15	Presentation, Possible Discussion with the Recommendation for Acceptance of the Washoe County Health District 2012	<p>Dr. Todd indicated a link for the PowerPoint presentation was sent to the Board Members. He reviewed the Annual Communicable Disease Summary and provides additional information. Nevada is no longer at the bottom of the list for Communicable Diseases according to the 2012 State Health Rankings; improvements have been made throughout the state. All states have made improvements, so significant improvements</p>	

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	Annual Communicable Disease (CD) Summary	<p>have been made in Nevada for us to move up in the rankings. <u>Strength and Challenges</u> – one of Nevada’s strengths is low incidences of infectious diseases; Nevada has not had any many outbreaks. Dr. Todd indicated Washoe County has good surveillance. <u>Enteric Diseases</u> are intestinal diseases; Washoe County had ups and downs in this area over the years (2003-2012). The nation sets goals and objective for themselves. Washoe County met the 2020 Healthy People Objectives for Enteric Disease. <u>Hepatitis</u> has decreased in Washoe County from 2003 to 2012, but the county did not meet the Healthy People 2020 Objectives. Hepatitis A dropped drastically in 2004 when children were required to be vaccinated. <u>Sexually Transmitted Disease</u> – Chlamydia continues to climb (most common sexually transmitted disease), HIV and AIDS have both decreased. People view HIV as a manageable disease now, so safe sex practices are on the decline, which is causing cases of AIDS to start moving back up (this is not unique to Washoe County). We did not meet Healthy People 2020 Objectives for Chlamydia. Some of the increase in reportable cases could be due to improved testing. Epidemiology and Clinical Health are both concerned and working hard on this area. <u>Tuberculosis</u> cases in Washoe County are higher than the Healthy People 2020 Objectives; all reported cases were foreign born. Treatment rate of Latent TB is at 89%. <u>Vaccine Preventable Disease</u> – There were no cases of Diphtheria, Measles, Polio, Rubella or Invasive Hib in 2003 – 2012; and only one adult case of Tetanus in 2009. Pertussis is still active (4 probable cases in 2012), the vaccine isn’t as effective as we would like it to be. Influenza peaked in March last year with a relatively mild Flu season; most cases were Influenza A with H1N1 coming in second. <u>Vector Borne Disease</u> – No West Nile Virus in people in 2012, which could be due to the Vector program’s efforts to keep West Nile Virus down in the mosquito population. This in turn helps keep it down in humans. Rabies does exist in the animal population in our area and has recently been seen in bats. We can all help mitigate against rabies by keeping our pets vaccinated. <u>Extraordinary Occurrences of Illness</u> – in 2012 Washoe County saw and increase in Hand Foot and Mouth Disease. There was also a novel strain of Coxsackievirus in our area.</p> <p>Commissioner Jung brought to the board’s attention that the map of the states indicates the states surrounding us all have better health rankings than we do, which can have a tremendous impact on our economic development and our ability to attract new businesses to our state. She would like to see the District Health Officer or PIO push out some of the good news from this report to the public. She also inquired about the contents of the current years Flu vaccine.</p> <p>Dr. Todd indicated the currant vaccine has the same three strains of flu as last year, which includes the H1N1. There are two types of flu shots available this year – Trivalent and Quadrivalent, both contain H1N1. It is still early in the season but we are seeing a higher proportion of H1N1 this year. It is not too late to get a flu shot this year.</p>	<p>Council Member Ratti moved, seconded by Council Member Zadra, to accept the Washoe</p>

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
		<p>Dr. Humphreys inquired as to the steps taken for intervention when trends are seen? Dr. Todd advised that the Health District tracks all reportable diseases and puts out a weekly report. Analysis are run to see if there are any increases; if something is found a physician's alert is sent out. The Health District relies on health care providers and labs for data and in turn we share the consolidated data with them on a regular basis. Dr. Humphreys – What was the true occurrence compared to the reportable occurrences? Dr. Todd indicated these are generally educated estimates.</p>	<p>County Health District 2012 Annual Communicable Disease (CD) Summary as Presented. <u>MOTION CARRIED</u></p>
16.	<p>Recommendation to Approve an Employment Agreement Between the Washoe County District Board of Health and Dr. Kevin Dick, for the Position of District Health Officer</p>	<p>Chair Smith continued this item to the January meeting.</p>	<p><u>NO MOTION</u></p>
*17.	<p><u>Staff Reports and Program Updates</u></p> <p>A. <u>Director, Epidemiology and Public Health Preparedness</u></p>	<p>Dr. Randall Todd, Director, Epidemiology and Public Health Preparedness. No additional information at this time.</p> <p>Dr. Humphreys indicated that Dr. Todd's report talked about the point of dispensing, but didn't specifically mention Botchallism. With Botchallism it's very important to get antitoxin quickly, what is the availability of the antitoxin for Botchallism in our area? Dr. Todd indicated the CDC maintains a stockpile of antitoxin, which we can request and have delivered within a few hours.</p>	
	<p>B. <u>Director, Community and Clinical Health Services</u></p>	<p>Mr. Steve Kutz, Director, Community Clinical and Health Services.</p> <p>Mr. Kutz thanked Dr. Hess for his assistance with the Syphilis outbreak and for helping the Community and Clinical Health Services partner with the Washoe County Medical Society.</p> <p>Additional information: Sexual Health – men having sex with men is showing an increase in HIV positive cases. Divisional Update – the recent NetSmart webinar was a success. Affordable Care Act – Mr. Kutz has been in contact with the Affordable Care Act enrollment concerning the number of Nevadans enrolled. Approximately 6600 enrolled in Nevada last week. They reported 6.6 million hits to the website, but are still</p>	

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
		<p>experiencing some technical difficulties with the enrollment program.</p> <p>Dr. Humphreys inquired as to the target number.</p> <p>Mr. Kutz indicated that Nevada has an estimated 249,000 uninsured and 265,000 underinsured. There are over 500,000 people in Nevada who could benefit from this program. There is a possibility that the 2014 date may be pushed out further. The Nevada program helps people determine what plans they may be eligible for and consolidates the statements for them.</p> <p>Mr. Dick also thanked Dr. Hess for his assistance with the recent Syphilis outbreak. Dr. Hess was very helpful and met with Mr. Kutz and staff. He also helped represent the Health District at the Washoe County Medical Society meeting.</p> <p>Mr. Dick indicated he electronically distributed a copy of an advertisement concerning Syphilis to the board. The advertisement is being run in the Reno News and Review and encourages Syphilis testing. The Health District will also have other HIV awareness advertising coming out soon sponsored by the CDC.</p>	
	<p><u>C.</u> <u>Director,</u> <u>Environmental</u> <u>Health Services</u></p>	<p>Mr. Robert Sack, Division Director, Environmental Health Services. No additional information to his report at this time.</p> <p>Mr. Sack did comment on Dr. Todd's report. The Health District is very proactive and monitors information as it comes in daily. If there is any indication of an outbreak or abnormal situation it is addressed immediately. All necessary resources are dedicated to the investigation.</p>	
	<p><u>D.</u> <u>Acting Director, Air</u> <u>Quality</u> <u>Management</u></p>	<p>Ms. Charlene Albee, Acting Division Director, Air Quality Management.</p> <p>Ms. Albee indicated the Red Burn Code has been in place for the past 10 days. Due to better conditions it went to green today (Dec 19, 2013). There were 6 incidents where we recently exceeded the PM2.5 standard. Air Quality has received approximately 20 complaints for wood burning, which enforcement staff has investigated. 2-3 warning citations were issued to people who did not want to voluntarily comply with the burning codes. This is the first step to mandatory compliance.</p> <p>Sole Source of Heat program – several people are submitting applications for sole source heating exemptions; information for community assistance is provided for those that may require financial assistance for heating. Air Quality has started a temporary exemption list. A complete summary of this program will be provided at the January</p>	

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
		<p>Board meeting.</p> <p>Commissioner Jung inquired if Health advertises the phone number to call for an exemption or to complain about people burning?</p> <p>Ms. Albee indicated the PIO puts out press release, which include the phone number to call for questions. The complaint hot line is the main Air Quality number.</p> <p>Mr. Dick indicated he will have the PIO verify that the contact information is included in press releases. The TV station he was watching did include the phone numbers and information on the Sole Source program.</p> <p>Mc. Albee indicated signs were provided for 10 of the Sole Source applicants to post in their windows. There are 20-25 on the temporary list.</p>	
	<p><u>E.</u> <u>Administrative Health Services Officer</u></p>	<p>Ms. Eileen Stickney, Administrative Health Services Officer, Administrative Health Services. No additional information.</p>	
	<p><u>F.</u> <u>Interim District Health Officer</u></p>	<p>Mr. Kevin Dick, Interim District Health Officer.</p> <p>Mr. Dick highlighted a few items from his board report. The Health District has done a lot of work on the fundamental review. Ms. Stickney has provided additional financial information. We are awaiting additional recommendations from the review team.</p> <p>Quality Improvement Initiative: Representatives from each division have been designated for QI teams. These teams met on December 2 & 18th to start work on initial divisional QI projects. We will be looking at larger projects as recommendations are received from the Fundamental Review Team.</p> <p>Mr. Dick is currently engaged with the Planning Committee for a Healthy Community Conversation. The Health District is working with other agencies on a Healthy Community Conversation which covers community development over all three jurisdictions. Agencies involved include the Federal Reserve, the three jurisdictions, Renown, St. Mary's, United Way and other organizations. At this time there is good momentum for a Spring event. They hope to gain additional traction and momentum for continued action after this event with a multiple of agencies including the financial community. The community needs to recognize the opportunities to work together towards a healthy community and the importance of community health and public health in community development planning.</p>	

TIME / ITEM	SUBJECT / AGENDA	DISCUSSION	ACTION
*18.	Board Comment – Limited to Announcements or Issues for Future Agendas	<p>Commissioner Jung requested a letter of condolence be sent to Renown and the Urology Associates on behalf of the Board and the Health District.</p> <p>Chair Smith reminded everyone about the upcoming January 16th Board of Health Retreat from 1-5p.m. Happy Birthday to Mr. Kutz.</p>	
19.	Emergency Items.	None.	
*20.	Public Comment (limited to three (3) minutes per person). No action may be taken.	None.	
21.	Adjournment	There being no further business to come before the Board the meeting was adjourned.	<p>Matt Smith moved, seconded by Council Member Zadra, that the meeting be adjourned.</p> <p><u>MOTION CARRIED</u> The meeting was adjourned at 2:30 p.m.</p>



KEVIN DICK,
INTERIM DISTRICT HEALTH OFFICER



LAURIE GRIFFEY
ADMIN ASSISTANT /RECORDING SECRETARY



Washoe County Health District



Public Health
Prevent. Promote. Protect.

Proclamation

WHEREAS, February 2014 is American Heart Month; and

WHEREAS, February 7, 2014 is National Wear Red Day; and

WHEREAS, 1 in every death in the U.S. is due to heart disease; and

WHEREAS, heart disease is the number one cause of death for both men and women, claiming approximately 600,000 lives annually; and

WHEREAS, heart disease kills more women than all forms of cancer combined in the United States; and

WHEREAS, in 2012, the mortality rate for heart disease in Washoe County was 227.4 per 100,000, making it the leading cause of death in the county; and

WHEREAS, coronary heart disease alone costs the United States \$108.9 billion each year; and

WHEREAS, the risk factors for heart disease include diabetes mellitus, high cholesterol, high blood pressure, overweight/obesity, physical inactivity, poor nutrition, and tobacco use and exposure; and

WHEREAS, the chance of developing heart disease can be reduced by taking steps to prevent and control factors that put people at greater risk; and

WHEREAS, avoiding tobacco and a healthy diet and lifestyle are the best weapons to fight heart disease.

PROCLAIMED, by the Washoe County District Board of Health that February 7, 2014, is designated as **National Wear Red Day** and the month of February 2014 as **American Heart Month**.

ADOPTED, this 23rd day of January, 2014.

Matt Smith, Chairman
Washoe County District Board of Health



Washoe County Health District



Public Health
Prevent. Promote. Protect.

Proclamation

WHEREAS, many residents of Washoe County don't know about radon, yet need to know, for the safety and well-being of their families; and

WHEREAS, radon is a colorless, odorless, naturally occurring radioactive gas that may threaten the health of our citizens and their families; and

WHEREAS, the challenge is that we can't see, smell or taste radon, so it's easy to forget that radon may be a problem in homes, schools and any building in Washoe County; and

WHEREAS, radon is the leading cause of lung cancer for nonsmokers in the United States and the second leading cause among for smokers; and

WHEREAS, the U.S. EPA estimates 21,000 people in the U.S. die each year from lung cancer caused by indoor radon exposure; and

WHEREAS, radon kills more people than secondhand smoke, drunken driving, falls in the home, drowning or home fires; and

WHEREAS, any home in Washoe County may have elevated levels of radon, even if other homes in the same neighborhood do not; and

WHEREAS, testing for radon is simple and inexpensive and when identified, the problems can be fixed; and

WHEREAS, the U.S. Surgeon General recommends all homes be tested for radon and fixed if they have 4 pCi/l or greater levels of radon; and

WHEREAS, University of Nevada Cooperative Extension, the Health District Air Quality Management Division, the American Lung Association, the Nevada Division of Public and Behavioral Health and the U.S. Environmental Protection Agency are supporting efforts to encourage Americans to test their homes for radon, mitigate elevated levels of radon, and have new homes built with radon-reducing materials and features.

PROCLAIMED, by the Washoe County District Board of Health that February 7, 2014, is designated as **National Radon Action Month in Washoe County**.

ADOPTED, this 23rd day of January, 2014.

Matt Smith, Chairman
Washoe County District Board of Health



WASHOE COUNTY HEALTH DISTRICT

AIR QUALITY MANAGEMENT DIVISION



Public Health
Prevent. Promote. Protect.

DATE: January 23, 2014

TO: District Board of Health

FROM: Daniel Inouye, Acting Director, Air Quality Management

SUBJECT: Whittlesea Checker Taxi – Case No. 1142
Unappealed Citation No. 5396
Agenda Item: **8. A. 1. a.**

Recommendation

Air Quality Management Staff recommends that Citation No. 5396 be upheld and a fine of \$1,200 be levied against Whittlesea Checker Taxi for failure to conduct the required annual performance testing in accordance with Condition No. 10 of Permit to Operate No. G0189GS. 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: \$3,000.00

Negotiated Fine: \$1,200.00

Background

On November 12, 2013, AQ Specialist Wallace Prichard conducted a routine gasoline dispensing facility inspection at the Whittlesea Checker Taxi Company located at 100 Sunshine Lane in Reno. During the inspection, AQ Specialist Prichard noted that the required annual Static Pressure Decay Test had not been conducted as required by condition No. 10 of Permit to Operate No. G0189GS. Condition No. 10 states:

In accordance with CARB Executive Order No. G-70-176, the facility must be capable of demonstrating on-going compliance with the static pressure integrity requirements. The operator must conduct and pass a static pressure decay test once every 12 months prior to the annual permit renewal. Results of the test must be submitted within 15 days.

The file records identified the most recent testing was completed on November 7, 2012 therefore the annual testing should have been completed prior to November 7, 2013. AQ Specialist Prichard issued a verbal warning to Peggy, the Whittlesea Office Manager, to schedule the required testing immediately since it was already 5 days past due. AQ Specialist Prichard was notified a week later that the testing still had not been conducted because of weather conditions. AQ Specialist Prichard once again made it clear to Peggy that the testing needed to be completed as soon as possible.

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

January 23, 2014

DBOH/Whittlesea Checker Taxi/Case 1142

Page 2

On December 18th, Specialist Prichard confirmed the testing had still not been scheduled. Based on the failure to conduct the required testing, AQ Specialist Prichard issued Notice of Violation Citation No. 5396 for a major violation of Section 030.2175, Operations Contrary to Permit.

As a follow up, the required testing was completed by Petroleum Maintenance the afternoon of December 18th. The results of the testing found the tank to be in compliance and the results were submitted to Air Quality the same day.

Settlement

On December 24, 2013, Senior AQ Specialist Dennis Cerfoglio conducted a negotiated settlement meeting attended by AQ Specialist Prichard and Mr. Chip Bell, representative of Whittlesea Checker Taxi. After consideration of all of the facts presented in the case, AQ Specialist Cerfoglio proposed that Citation No. 5396 be upheld with a fine of \$1,200. Mr. Bell agreed to the condition of the negotiated settlement. A Memorandum of Understanding was signed by all parties.

Alternatives

1. The Board of Health may determine that no violation of the regulations has taken place and dismiss Citation No. 5396.
2. The Board may determine to uphold Citation No. 5396 and levy a fine in the range of \$0 to \$10,000 per day.

In the event the Board determines to change the penalty, the matter should be continued so that Whittlesea Checker Taxi may be properly notified.



Daniel Inouye, Acting Director
Air Quality Management Division

DI/DC: mc



NOTICE OF VIOLATION

NOV 5396

DATE ISSUED: 12/18/2013

ISSUED TO: Whittlesea Checkers Tap PHONE #: 775-323-0523

MAILING ADDRESS: 100 Sunshine Lane CITY/ST: Reno, NV ZIP: 89502

NAME/OPERATOR: Bell Corporation PHONE #: Case 5396 1142

PERMIT NO. G0189 GS CHIP BELL COMPLAINT NO. CMP13-0196

YOU ARE HEREBY OFFICIALLY NOTIFIED THAT ON 12/18/2013 (DATE) AT 10:00AM (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 #10 and #11. Failure to supply current Leak Decay Test!

LOCATION OF VIOLATION: 100 Sunshine Lane

POINT OF OBSERVATION: Records.

Weather: N/A 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 12/18/13 (date) you are in violation of the section(s) cited above. You are hereby ordered to abate the above violation within 10:00 AM 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: Wallace Freepaul Date: 12/18/2013

Issued by: Dennis C. BEDD Title: PRESIDENT

PETITION FOR APPEAL FORM PROVIDED

Dennis C. 784-7200



DISTRICT HEALTH DEPARTMENT
AIR QUALITY MANAGEMENT DIVISION

MEMORANDUM OF UNDERSTANDING

WASHOE COUNTY HEALTH DISTRICT
AIR QUALITY MANAGEMENT DIVISION

Date: 12/24/2013

Company Name: Whittless Taxi

Address: 100 Sunshine Lane, Reno

Notice of Violation No.: 5396 Case No.: 1142

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: 030.2175 Violation of Permit Conditions Record Keeping

A settlement of this matter has been negotiated between the undersigned parties resulting in a penalty amount of \$ 1,200.00. This settlement will be submitted to the District Board of Health for review at the regularly scheduled meeting on January 23, 2014.

Chip Bell
Signature of Company Representative

Dennis A. Cerfoglio
Signature of District Representative

Chip Bell
Print Name

DENNIS A. CERFOGLIO
Print Name

President
Title

Sr. Air Quality Specialist
Title

Witness

Wallace P...
Witness

Witness

Witness

**AIR QUALITY MANAGEMENT - ADMINISTRATIVE PENALTY TABLE &
RECOMMENDED FINE CALCULATION WORKSHEET**

Administrative Penalty Table

Air Quality Management Division Washoe County Health District

I. Minor Violations - Section 020.040(C)

<u>Regulation</u>	<u>1st Violation</u>	<u>2nd Violation</u>
040.005 Visible Emissions	\$ 1,000	\$ 2,500
040.030 Dust Control (fugitive)	250	750
040.035 Open Fires	500	1,000
040.040 Fire Training	500	1,000
040.050 Incinerator	1,000	2,000
040.051 Woodstoves	500	1,000
040.055 Odors	1,000	2,000
040.080 Gasoline Transfer (maintenance)	1,000	2,000
040.200 Diesel Idling	500	1,000
050.001 Emergency Episode	1,000	2,000

II. Major Violations - Section 020.040

<u>Regulation</u>	<u>Violation</u>	<u>Source Category</u>	
		<u>Minimum</u>	<u>Maximum</u>
030.000	Construction/Operating without Permit (per major process system or unit/day)	\$ 5,000	\$ 10,000
030.1402	Failure to Comply with Stop Work Order	10,000/day	10,000/day
030.2175	Operation Contrary to Permit Conditions (per day or event)	2,500	10,000
030.235	Failure to Conduct Source Test or Report (per Reporting Period for Each Unit)	2,500	5,000
	All other Major Violations (per day or event)	\$ 5,000	\$ 10,000
030.000	Construction Without a Dust Control Permit		
	Project Size – Less than 10 acres	\$ 500 + \$50 per acre	
	Project Size – 10 acres or more	\$1,000 + \$50 per acre	

III. Major Violations - Section 030.107 Asbestos

A. Asbestos Sampling & Notification	\$ 2,000 - \$10,000
B. Asbestos Control Work Practices (per day or event)	\$ 5,000 - \$10,000
C. Asbestos Containment & Abatement (per day or event)	\$ 5,000 - \$10,000

**Washoe County Air Quality Management
Permitting & Enforcement Branch
Recommended Fine Calculation Worksheet**

Company Name Whittlesea Checker Taxi
Contact Name Chip Bell

Case 1142 NOV 5396 Complaint CMP13-0196

Violation of Section 030.2175 Operations Contrary to Permit

I. **Base Penalty as specified in the Penalty Table** = \$ 2,500

II. **Severity of Violation/Intent**

A. **Public Health Impact**

1. **Degree of Violation**

(The degree of which the person/company has deviated from the regulatory requirements)

Minor – 0.5 Moderate – 0.75 Major – 1.0 **Adjustment Factor** 1.0

2. **Toxicity of Release**

Criteria Pollutant – 1x

Hazardous Air Pollutant – 2x **Adjustment Factor** 1.0

3. **Environmental/Public Health Risk** (Proximity to sensitive environment or group)

Negligible – 1x Moderate – 1.5x Significant – 2x **Adjustment Factor** 1.0

Total Adjustment Factors (1 x 2 x 3) = 1.0

B. **Adjusted Base Penalty**

Base Penalty 2,500 x Adjustment Factor 1.0 = \$ 2,500

C. **Multiple Days or Units in Violation**

Adjusted Penalty 2,500 x Number of Days or Units 1.0 = \$ 2,500
Penalty assessed for one time event

D. **Economic Benefit**

Avoided Costs \$500 Avoided costs of completing the required testing = \$ 500

Penalty Subtotal – Recommended Fine

Adjusted Base Penalty \$ 2,500 + Economic Benefit \$ 500 = \$ 3,000

III. Penalty Adjustment Consideration

A. Degree of Cooperation (0 – 25%)	+/-	<u>-25</u>	%
B. Mitigating Factors (0 – 25%)	+/-	<u>-25</u>	%
1. Negotiated Settlement			
2. Ability to Pay			
3. Other (explain)			
C. Compliance History			
No Previous Violations (0 – 10%)	-	<u>10</u>	%
Similar Violation in Past 12 months (25 - 50%)	+	<u> </u>	%
Similar Violation within past 3 year (10 - 25%)	+	<u> </u>	%
Previous Unrelated Violation (5 – 25%)	+	<u> </u>	%
Total Penalty Adjustment Factors – sum of A, B, & C		<u>-60</u>	%

IV. Recommended Fine

Penalty Adjustment:

<u>\$ 3,000</u>	x	<u>-60</u> %	=	<u>\$ -1,800</u>
Penalty Subtotal (From Section II)		Total Adjustment Factors (From Section III)		Total Adjustment Value

Additional Credit for Environmental Investment/Training – N/A

Adjusted Penalty:

<u>\$ 3,000</u>	(-)	<u>\$ 1,800</u>	=	<u>\$ 1,200</u>
Penalty Subtotal (From Section II)		Total Adjustment Value (From Section III)		Negotiated Fine


Air Quality Specialist

12-24-2013
Date

**AIR QUALITY MANAGEMENT
PERMIT TO OPERATE # 601896S**



PERMIT TO OPERATE

An Air Pollution Emission Source

No. G0189GS

Issued By Air Quality Management Division, Washoe County Health District

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

ISSUED TO: WHITTLESEA CHECKER TAXI Gen Air - Gasoline

ADDRESS: 100 SUNSHINE LANE, RENO NV, 89502

LOCATION: 100 SUNSHINE LANE, RENO NV 89502

EQUIPMENT COVERED UNDER THIS PERMIT Gasoline Dispensing Facility with a Hirt Phase II Vapor Recovery System, 2 Gasoline 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: A flow limiter is required on dispensers that have a maximum flow rate in excess of 10 gallons/minute.
- 5: 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.)
- 6: 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.
- 7: 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).
- 8: "Instructions for operating the phase II vapor recovery equipment must be posted for the customers, and must stress that "Topping Off" is

Kevin K. Dil

CONTROL OFFICER

06/30/2014

EXPIRATION DATE

\$281.00

ANNUAL RENEWAL FEE

G0189GS

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. G0189GS

Issued By Air Quality Management Division, Washoe County Health District

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

ISSUED TO: WHITTLESEA CHECKER TAXI Gen Air - Gasoline

ADDRESS: 100 SUNSHINE LANE, RENO NV, 89502

LOCATION: 100 SUNSHINE LANE, RENO NV 89502

EQUIPMENT COVERED UNDER THIS PERMIT Gasoline Dispensing Facility with a Hirt Phase II Vapor Recovery System, 2 Gasoline Nozzles

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."

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

10: In accordance with CARB Executive Order #G-70-176, the facility must be capable of demonstrating on-going compliance with the static pressure integrity requirements. The operator must conduct and pass a static pressure decay test at least once every 12 months prior to the annual permit renewal. Results of the test must be submitted within 15 days.

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

06/30/2014

EXPIRATION DATE

\$281.00

ANNUAL RENEWAL FEE

G0189GS

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: **CMP13-0196**

Complaint Status: NOV

Source of Complaint: INVESTIGATOR

Complaint Type: PERMIT

Date Received: 12/18/2013

Time: 10:00:00 AM

Inspector: WPRICHARD

Inspector Area: 2

Complaint Description: CITATION 5396, CASE 1142 - VIOLATION OF PERMIT CONDITION

Address: 100 SUNSHINE LN RENO

Location: DBOH MEETING - JANUARY 23, 2014

Parcel Number: 01230206

Related Permit Number:

Complainant:

WALLY PRICHARD, AQ SPECIALIST II
CORPORATION
AIR QUALITY MANAGEMENT
1001 E 9TH ST STE B171
RENO NV 89512
775-784-7212

Responsible Party:

WHITTLESEA TAXI / BELL
CHIP BELL
100 SUNSHINE LANE
RENO NV 89502
775-323-0523

Investigation:

Violation of Permit Conditions, Record Keeping

The Air Quality Management Division (AQMD) of the Washoe County District Health Department is issuing Notice of Violation #5396 on December 18, 2013, to the company known as Whittlesea Checker Taxi for Violation of Permit Condition.

The Permit to Operate Conditions require that annual testing is required at least once every 12 months:

Condition #10 In accordance with CARB Executive Order #G-70-177 the facility must be capable of demonstrating on-going compliance with the static pressure integrity requirements. The operator must conduct and pass a static pressure decay test at least once every 12 months prior to the annual permit renewal. Results of the test must be submitted within 15 days of the test.

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

On November 12, 2013

Specialist Prichard was conducting a bi-annual gasoline source inspection of Whittlesea Taxi above ground gasoline tank. When checking the required conditions on the Operating Permit it was noticed that a Static Pressure Decay test had not been conducted within the last 12 months.

On November 12, 2013 Whittlesea Taxi was given a verbal warning to schedule a Static Pressure Decay test immediately. When the tank & nozzle inspection was conducted the test was already over due by five days.

Air Quality Specialist Prichard was notified that the testing was to be conducted by Petroleum Maintenance as soon as possible. Peggy the office manager notified Specialist Prichard a week later that it had been too cold to conduct a leak decay test and she was advised that it needed to be completed as soon as possible. Another week passed and no test was completed. Finally Specialist Prichard called Petroleum Maintenance on December 17, 2013 and Jim Meadows said that the test was scheduled in a couple of weeks.

I issued a Notice of Violation Citation 5396 to Whittlesea Taxi at 10:00am on December 18, 2013 and at 3:00 pm on December 18, 2013 I received a fax of a completed Static Pressure Decay Test.

Based on the results of the Air Quality Management Division's investigation a Notice of Violation of Section 030.2175 a Major Violation of Permit Condition #10 & #11. Citation #5396 has been issued on December 18, 2013.

Senior Air Quality Specialist III Dennis Cerfoglio and Branch Chief Charlene Albee were notified on July 18, 2013 that a Notice of Violation Citation was being issued to Whittlesea Taxi for the above mentioned violations of Washoe County Health District /Air Quality Management Division Regulations.

Enforcement Activities

Warning Citation..:	Citation Number: 5396
NOV.....: 12/18/2013	NOV Number....: 0
	Case Number.....: 1142
Settlement.....:	Amount.....: \$0.00
Appealed.....:	
Upheld.....:	Amount.....: \$0.00

Status Information

Initialized By.....: MAMES	Completed Date...:
Date Assigned.....: 12/18/2013	Completed By.....:

CHRONOLOGY OF COMPLIANCE ACTIONS

Whittleson Taxi

Notice of Violation - WARNINGS

<u>Date</u>	<u>Action</u>	<u>Reason</u>
<i>11/08/2011</i>	<i>10 working days to</i>	<i>Test (No static pressure decay test)</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Notice of Violation - CITATIONS

<u>Date</u>	<u>Action</u>	<u>Reason</u>
<i>12/18/13</i>	<i>NOV #5396</i>	<i>No static pressure decay test.</i>

Details: *Permit condition #10811 36 days operating out of compliance.*

Details: _____

Details: _____



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

NOV 4886

DATE ISSUED: 11/8/2011

ISSUED TO: Whittesee Checker Taxi PHONE #: 323-0503

MAILING ADDRESS: 100 Sunshine Lane CITY/ST: Reno, NV ZIP: 89502

NAME/OPERATOR: J.R. Deman PHONE #: Same

DRIVER LICENSE #/SSN W11A

YOU ARE HEREBY OFFICIALLY NOTIFIED THAT ON 11/8/2011 (DATE) AT 1110 (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 checked="" type="checkbox"/> OTHER <u>Cond. #10</u> |

VIOLATION DESCRIPTION: Facility requires an annual Static Pressure
test but in above ground tank & system,

LOCATION OF VIOLATION: 100 Sunshine Lane, Reno, NV 89502

POINT OF OBSERVATION: File (PTO)

Weather: Coel - Palm Wind Direction From: N E S W

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

WARNING ONLY: Effective 1110 a.m./p.m. 11/8/11 (date) you are hereby ordered to abate the above violation within 10 Days 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: [Signature] Title: AQSU

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.

Testing

HW Wally Pritchard

Petroleum Maintenance

550 E. Fourth St.
Reno, Nevada 89512
775-329-8298
775-329-3301 (fax)

AIR QUALITY SYSTEM TIGHTNESS TEST
Summary of Test Results

Site Information

Facility Equipment

Site Name and Address
Whittlesza Checker Taxi
100 Sunshine Ln
Reno NV 89502
Phone: 723 0503

Site Representative
JR Deman
JR Deman@Bell-
Limo.com
Phone: 685 6572

Phase I System
Two Point X
Coaxial
Phase II System Type
Balance X
Assist
Manifolded? Y or N
Aboveground or Underground

Test Results and Comments

Tank #	1	2	3	TOTAL
Product Grade	SUL			
Number of Nozzles	2			
Actual Tank Capacity, Gallons	12,032			
Gasoline Volume, Gallons	5,657			
Ullage, Gallons	6,375			
Initial Test Pressure, Inches H2O (2.0)	2.0			
Pressure After 1 Minute, Inches H2O	2.02			
Pressure After 2 Minutes, Inches H2O	2.05			
Pressure After 3 Minutes, Inches H2O	2.12			
Pressure After 4 Minutes, Inches H2O	2.18			
Final Pressure After 5 Minutes, Inches H2O	2.19			
Allowable Final Pressure from Table 3-1	1.85			
Test Status (Pass or Fail)	Pass			
pressure after 10min = 2.35				

3'9 1/2"

Test Conducted By:
Jim Meadlow
Jim Meadlow

Witness, Optional

Date/Time of Test
18 Dec 2013
12:56

Test Conditions: overcast, calm, 42°



Washoe County Health District




Public Health
Prevent, Promote, Protect.


STAFF REPORT

BOARD MEETING DATE: January 23, 2014

DATE: January 10, 2014

TO: District Board of Health

FROM: Erin Dixon, Fiscal Compliance Officer, Washoe County Health District 
775-328-2419, edixon@washoecounty.us

THROUGH: Eileen Stickney, Administrative Health Services Officer 
775-328-2417, estickney@washoecounty.us

SUBJECT: Approval of the Washoe County Smoke Management Program Memorandum of Understanding with Truckee Meadows Fire Protection District, North Lake Tahoe Fire Protection District, The Nevada Department of Conservation and Natural Resources, Division of Forestry, Division of State Lands, Division of State Parks, and Division of Wildlife; and the United States Department of the Interior, Bureau of Land Management, and Fish and Wildlife Service.

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.

District Board of Health Priority supported by this item: Be assured of optimal air quality.

BCC Strategic Objective supported by this item: Safe, secure, and healthy communities.

PREVIOUS ACTION

The Washoe County District Board of Health approved the previous Washoe County Smoke Management Program Memorandum of Understanding with the Truckee Meadows Fire Protection District, North Lake Tahoe Fire Protection District, The Nevada Department of Conservation and Natural Resources, Division of Forestry, Division of State Lands, Division of State Parks, and Division of Wildlife; and the United States Department of the Interior, Bureau of Land Management, and Fish and Wildlife Service on October 28, 2004.

AGENDA ITEM # 8. C.

A similar MOU with the State of Nevada, Department of Conservation and Natural Resources, Division of Environmental Protection was ratified by the Washoe County District Board of Health on November 21, 2013.

BACKGROUND

A Smoke Management Program (SMP) balances the need for prescribed fires with the mandate of providing clean air. It requires Land Managers to address and mitigate air quality impacts before the prescribed fire occurs. Participation in the Washoe County SMP is voluntary and implemented through a Memorandum of Understanding (MOU).

The MOU includes performance and contingency measures to ensure its effectiveness. If a prescribed fire causes air quality levels to approach National Ambient Air Quality Standards (NAAQS), then the SMP will be evaluated and/or revised to protect the citizens of Washoe County. In areas with an approved SMP, the U.S. Environmental Protection Agency has the option to consider the short-term air quality impacts from prescribed fires as an anomaly and therefore, would not apply towards exceedances of any NAAQS. Approval and commitment to the MOU is a critical requirement of the SMP.

FISCAL IMPACT

There will be no additional direct fiscal impact to the Health District associated with the approval of this Smoke Management Program Memorandum of Understanding.

RECOMMENDATION

Staff recommends that the District Board of Health ratify the Washoe County Smoke Management Program Memorandum of Understanding with the Truckee Meadows Fire Protection District, North Lake Tahoe Fire Protection District, The Nevada Department of Conservation and Natural Resources, Division of Forestry, Division of State Lands, Division of State Parks, and Division of Wildlife; and the United States Department of the Interior, Bureau of Land Management, and Fish and Wildlife Service; and if approved, authorize the Chairman to execute.

POSSIBLE MOTION

Move to ratify the Washoe County Smoke Management Program Memorandum of Understanding with the Truckee Meadows Fire Protection District, North Lake Tahoe Fire Protection District, The Nevada Department of Conservation and Natural Resources, Division of Forestry, Division of State Lands, Division of State Parks, and Division of Wildlife; and the United States Department of the Interior, Bureau of Land Management, and Fish and Wildlife Service; and authorize the Chairman to execute.

MEMORANDUM OF UNDERSTANDING

BETWEEN

THE WASHOE COUNTY HEALTH DISTRICT

AND

**FIRE PROTECTION DISTRICTS
TRUCKEE MEADOWS FIRE PROTECTION DISTRICT
NORTH LAKE TAHOE FIRE PROTECTION DISTRICT**

AND

**THE STATE OF NEVADA
DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES
DIVISION OF FORESTRY
DIVISION OF STATE LANDS
DIVISION OF STATE PARKS
DIVISION OF WILDLIFE**

AND

**THE UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
FISH AND WILDLIFE SERVICE**

THIS MEMORANDUM OF UNDERSTANDING (MOU or Agreement) is hereby entered into by and between the Washoe County Health District, on behalf of its Air Quality Management Division, hereinafter referred to as "District", and the following government agencies, hereinafter referred to as "Land Managers": Truckee Meadows Fire Protection District; North Lake Tahoe Fire Protection District; The Nevada Department of Conservation and Natural Resources, Division of Forestry, Division of State Lands, Division of State Parks, and Division of Wildlife; and the United States Department of the Interior, Bureau of Land Management, and Fish and Wildlife Service.

I. PURPOSE

- A. To implement the Washoe County Smoke Management Program (SMP) to manage and report the emissions of air pollutants generated from prescribed fire used to meet local and state objectives as well as federal resource management objectives and to facilitate communication and coordination on the smoke from wildfires.

II. OBJECTIVES

- A. To minimize smoke generation and impacts of smoke in Washoe County when prescribed burning is necessary to conduct range and forest practices. Alternative treatments shall be encouraged and used where environmentally acceptable, technologically feasible, and economically reasonable to achieve the management objective.
- B. To minimize visibility impacts from smoke in smoke sensitive areas, including but not limited to roads, schools, hospitals, nursing homes, airports, recreational areas, and those designated by the Secretary of the Interior as Class I areas and wilderness areas with designated Class I air sheds.
- C. To assist in meeting visibility goals required in the Nevada Regional Haze State Implementation Plan.
- D. To acknowledge the role of fire in Washoe County and allow the use of fire under controlled conditions to maintain healthy ecosystems while meeting the requirements of state and federal ambient air quality standards.
- E. To produce a program for the people of Washoe County that provides the opportunity for forest, rangeland, and crop residue burning while minimizing air quality impacts.
- F. To demonstrate compliance with the applicable "conformity" requirements described in federal law and regulation.
- G. To maintain and improve a system to inventory emissions from prescribed and wild land fires for resource benefits.
- H. To coordinate open burning among land management agencies and observe, monitor and communicate impacts.
- I. To provide technical support for the protection of affected resources and visibility.
- J. To address smoke transport issues through enhanced communication and the development of interstate and interagency agreements.

III. MUTUAL RESPONSIBILITIES

A. THE DISTRICT AND THE LAND MANAGERS AGREE TO:

1. Comply with all applicable local, state, and federal laws and regulations in furtherance of the objectives of this Agreement.
2. Develop and implement a SMP for reporting and coordinating burning operations within Washoe County.
3. Review the Washoe County SMP annually and improve the SMP where feasible. Changes to the SMP shall be made with the approval of the signatories, or their designated representative, to this MOU.
4. Participate in the development and presentation of interagency training concerning prescribed burning.
5. Notify the cooperating parties of any policies, agreements, statutory or regulatory developments, or interstate issues that may affect the implementation of this Agreement or SMP.
6. Work cooperatively to provide real-time air quality monitoring for the purposes of evaluating prescribed and wildfire impacts and protecting air quality in Washoe County.

IV. INDIVIDUAL RESPONSIBILITIES

A. THE DISTRICT AGREES TO:

1. Review and process all requests for authorization of open burning in the order received within the time allocated in the Washoe County SMP.
2. Provide and update the list of local health agency contacts at the District's web site on an annual basis.
3. Notify all cooperating parties of air pollution episodes in the area of burning.
4. Collect and tabulate reports from land managers releasing one (1.0) tons or more of PM10 emission within Washoe County during each calendar year and make the results available at the District's web site.

B. THE LAND MANAGERS AGREE TO:

1. Ensure proper smoke management of prescribed fires. On a case-by-case basis, identify and implement appropriate smoke management techniques to minimize the amount and/or impact of smoke produced.
2. Ensure each proposal for prescribed fire conforms to applicable land use plans and identifies the specific resource objective(s) to be attained.
3. Ensure general conformity, air quality impacts, mitigation, and alternatives to prescribed burning are addressed in the appropriate National Environmental Policy Act (NEPA) documentation, as applicable.
4. Obtain a variance from the District before initiating a prescribed burn when PM10 emissions are expected to exceed the *de minimis* quantity and/or when predicated by the proximity to a sensitive area.
5. Comply with the Washoe County SMP and any applicable local, state, and federal requirements.
6. Notify, prior to ignition, the appropriate local agency (ies) of the time, location, and duration of all prescribed burns that are initiated.
7. Provide the District with post-burn fire activity data for prescribed fires and wildfires in Washoe County. The data will include project name date, location, size, fuel type, pre-burn fuel loading, type of burn, final burn area and estimated emissions. Washoe County will provide a spreadsheet for the submittal of this information.
8. Provide or make available to the District, a copy of Daily Situation Reports (DSR) for all burning activities within the county on a daily basis. Timely availability of the DSR may be accomplished through electronic medium (i.e., Internet, e-mail) or other appropriate means (i.e., facsimile).

V. GENERAL PROVISIONS

- A. PARTICIPATION IN SIMILAR ACTIVITIES. This Agreement in no way restricts the District or Land Managers from participating in similar activities with other public or private agencies, organizations, and individuals.
- B. PERFORMANCE MEASURES AND PARTICIPATION. Participation in this MOU by the District and Land Managers shall be voluntary. The District and Land Managers shall review, and if necessary, revise the Washoe County SMP if the SMP becomes ineffective. The SMP is considered ineffective if both of the following occur:

1. Ambient air quality levels in Washoe County reach 85 percent of any National Ambient Air Quality Standard; and
 2. These ambient air quality levels were caused by significant contributions from prescribed fires subject to the Washoe County SMP.
- C. **NON-FUND OBLIGATING DOCUMENT.** This MOU is neither a fiscal nor a funds obligation document. Any endeavor involving reimbursement, contribution of funds, or transfer of anything of value between the parties to this instrument shall be handled in accordance with applicable laws, regulations, and procedures including those for government procurement and printing. Such endeavors shall be outlined in separate agreements that shall be made in writing by representatives of the parties and shall be independently authorized by appropriate statutory authority. This instrument does not provide such authority. Specifically, this instrument does not establish authority for noncompetitive award to the cooperator of any contract or other agreement. Any contract or agreement for training or other services must fully comply with all applicable requirements for competition.
- D. **EFFECTIVE TERM.** This MOU shall be in effect from the date approved by all parties. It shall remain in effect for a period of five (5) years, unless formally terminated by any of the signatories, but only after 30 days written notice to the others of their intention to do so. Termination of this MOU in no way relieves any party from the responsibility to comply with applicable local, state, or federal laws and regulations.
- E. **TERMINATION CONDITIONS.** At the end of the five-year period, this MOU shall be reviewed by the signatories for effectiveness, and if appropriate, re-authorized by written notice from all parties. Any of the parties, in writing, may terminate this MOU in whole, or in part, at any time before the date of expiration.
- F. **REPLACEMENT.** This MOU revokes and supersedes any prior agreement or understanding between the District and any other party to this MOU relating to prescribed burning.
- G. **NONDISCRIMINATION.** Cooperators shall comply with all state and federal statutes relating to nondiscrimination and all applicable requirements of all other state and federal laws, executive orders, regulations and policies. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d), which prohibits discrimination on the basis of race, color, handicap, or national origin; (b) Title IX of the Education amendments of 1972, as amended (20 U.S.C. 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex.
- H. **FREEDOM OF INFORMATION ACT.** Any information furnished to the federal agencies under this MOU is subject to the Freedom of Information Act.
- I. **AMENDMENTS.** Amendments to this MOU may be proposed at any time by a signatory, and shall be effective upon approval by all parties to this MOU.

J. PRINCIPAL CONTACTS. The individuals associated with the development and implementation of the Washoe County SMP and principal contacts for this instrument are:

WASHOE COUNTY HEALTH DISTRICT

JULIE HUNTER
Washoe County Health District
Air Quality Management Division
1001 E. 9th Street, Suite B171
Reno, NV 89512
(775) 784-7210

FIRE PROTECTION DISTRICTS

CHARLES MOORE
Truckee Meadows/Sierra Fire Protection
District
1001 E. 9th Street
Reno, NV 89521
(775) 326-6000

NORB SZCZUREK
North Lake Tahoe Fire Protection District
866 Oriole Way
Incline Village, NV 89451
(775) 831-0351

NEVADA DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES

SCOTT RASMUSSEN
Nevada Division of Forestry
2478 Fairview Drive
Carson City, Nevada 89701
(775) 684-2556

ERIC JOHNSON
Nevada Division of State Parks
901 S. Stewart Street, Suite 5005
Carson City, NV 89701-5248
(775) 684-2770

JEFF HAAS
Nevada Division of State Lands
901 S. Stewart Street, Suite 5003
Carson City, NV 89701-5246
(775) 684-2737

MIKE ZAHRADKA
Nevada Department of Wildlife
100 Valley Rd
Reno, NV 89512
(775) 688-1500

UNITED STATES DEPARTMENT OF INTERIOR

SANDY GREGORY
US Bureau of Land Management
Nevada State Office
1340 Financial Blvd.
Reno, NV 89502
(775) 861-6514

RICHARD HADLEY
US Fish & Wildlife Service
California/Nevada Operations Office
2800 Cottage Way, Suite W-2606
Sacramento, CA 95825
(916) 978-6181

VI. RESPONSIBLE AGENCIES

THE PARTIES HERETO have executed this Agreement

WASHOE COUNTY HEALTH DISTRICT

Washoe County Health District,
Washoe County District Board of Health

By _____ Date _____
Chairman

Truckee Meadows/Sierra Fire Protection District,

By _____
Forest Supervisor

Date _____

North Lake Tahoe Fire Protection District

By _____ Date _____
Forest Supervisor

Division of Forestry

By _____
State Forester

Date _____

Division of State Lands

By _____
Administrator

Date _____

Division of State Parks

By _____
Administrator

Date _____

Nevada Department of Wildlife

By _____
Director

Date _____

Bureau of Land Management,
State of Nevada

By _____ Date _____
State Director, Nevada

By _____ Date _____
Grants and Agreements Specialist

**Fish and Wildlife Service,
Pacific Region**

By _____ Date _____
Assistant Regional Director-CBE

California/Nevada Operations Office

By _____ Date _____
California/Nevada Operations Office Manager



Washoe County Health District



Public Health
Prevent. Promote. Protect.

STAFF REPORT BOARD MEETING DATE: 1/23/14

DATE: January 13, 2014

TO: District Board of Health

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

SUBJECT: Retroactive authorization of travel and travel reimbursements for non-County employee Harry "Bus" Sharman in the approximate amount of \$1,000, supported by the grant award (IO-20385).

SUMMARY

The District Board of Health must authorize travel and travel reimbursements for non-County employees. The Robert Wood Johnson Foundation has requested that a policy maker attend the Shared Services Learning Community meeting in San Diego, California on January 22-24, 2014.

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.

On January 24, 2013 the Washoe County District Board of Health approved to retroactively accept the 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-20385); authorized 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; authorized the DBOH Chairman to execute the grant document; and directed Finance to make the appropriate budget adjustments.

BACKGROUND

The Robert Wood Johnson Foundation Shared Services Learning Community grant provides funding to the Washoe County Health District to 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.

The Robert Wood Johnson Foundation has requested that a policy maker from one of the Northern Counties attend the Learning Community Center meeting to be held on January 22-24, 2014 in San Diego, California. Harry "Bus" Sharman is the District I Commissioner from Churchill County and has been identified as the Policy Maker to attend the meeting.

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

FISCAL IMPACT

Should the Board authorize the travel and travel reimbursement for Commissioner Sharman, there will not be a fiscal impact to the adopted FY14 budget. Budget authority is available in the Robert Wood Johnson Foundation grant, accounted for in IO-20385-711210.

RECOMMENDATION

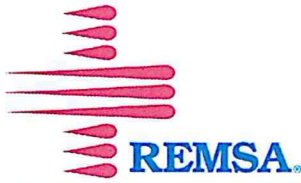
Staff recommends that the District Board of Health retroactively authorize travel and travel reimbursements for non-County employee Harry "Bus" Sharman in the approximate amount of \$1,000.

POSSIBLE MOTION

Should the Board agree with staff's recommendation, a possible motion would be: "Move to retroactively authorize travel and travel reimbursements for non-County employee Harry "Bus" Sharman in the approximate amount of \$1,000.



Eileen Stickney
Administrative Health Services Officer



Regional Emergency Medical Services Authority

REMSA

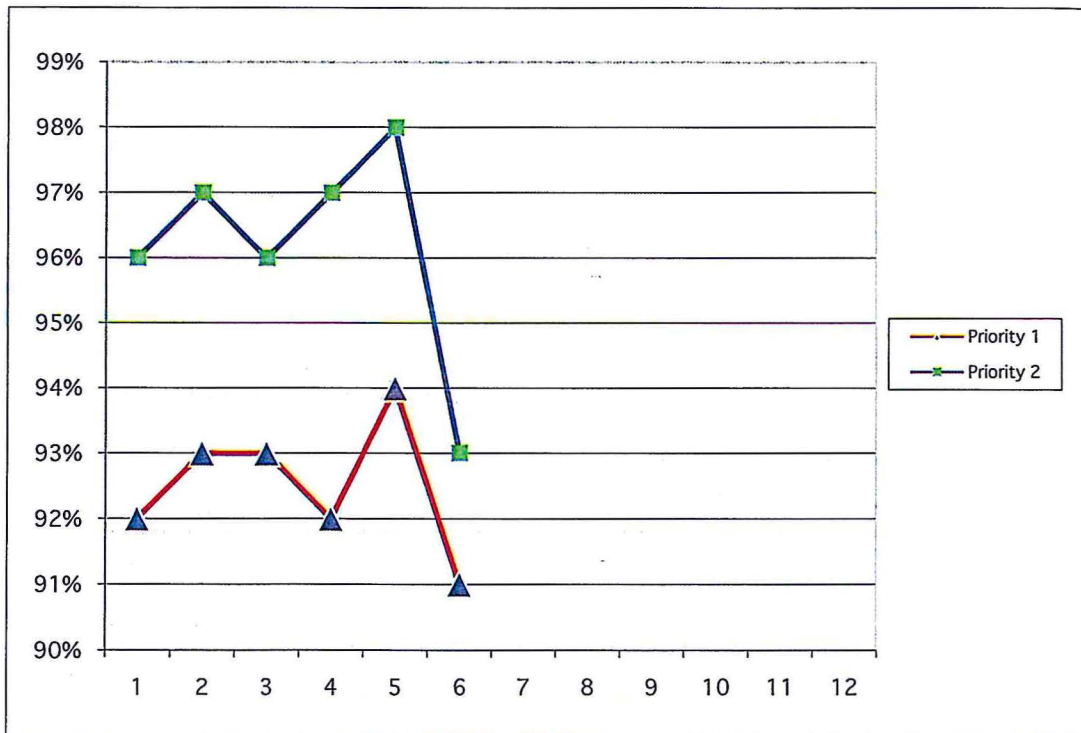
OPERATIONS REPORTS

FOR

DECEMBER 2013

Fiscal 2014

Month	Avg. Response Time	Avg. Travel Time	Priority 1	Priority 2
Jul. 2013	5 mins. 56 secs.	5 mins. 3 secs.	92%	96%
Aug.	6 mins. 0 secs.	5 mins. 3 secs.	93%	97%
Sept.	5 mins. 46 secs.	4 mins. 47 secs.	93%	96%
Oct.	5 mins. 50 secs.	4 mins. 50 secs.	92%	97%
Nov.	5 mins. 29 secs.	4 mins. 39 secs.	94%	98%
Dec.	6 mins. 14 secs.	5 mins. 21 secs.	91%	93%
Jan. 2014				
Feb.				
Mar.				
Apr.				
May				
June 2014				



Care Flight

Month	#Patients	Gross Sales	Avg. Bill	YTD Avg.
Jul-13	15	\$116,951	\$7,797	\$7,797
Aug.	20	\$183,197	\$9,160	\$8,576
Sept.	15	\$129,788	\$8,653	\$8,599
Oct.	11	\$80,637	\$7,331	\$8,370
Nov.	7	\$53,811	\$7,687	\$8,300
Dec.	12	\$82,429	\$6,869	\$8,085
Jan. 2014			\$0	\$8,085
Feb.			\$0	\$8,085
Mar.			\$0	\$8,085
Apr.			\$0	\$8,085
May			\$0	\$8,085
June			\$0	\$8,085
Totals	80	\$646,813	\$8,085	\$8,085

Adjusted Allowed Average Bill - \$7,641.00

REMSA Ground

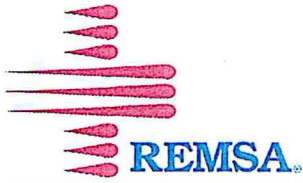
Month	#Patients	Gross Sales	Avg. Bill	YTD Avg.
Jul-13	3528	\$3,760,993	\$1,066	\$1,066
Aug.	3361	\$3,580,384	\$1,065	\$1,066
Sept.	3269	\$3,475,246	\$1,063	\$1,065
Oct.	3376	\$3,597,764	\$1,066	\$1,065
Nov.	3316	\$3,543,650	\$1,069	\$1,066
Dec.	3559	\$3,824,810	\$1,075	\$1,067
Jan. 2014			\$0	\$1,067
Feb.			\$0	\$1,067
Mar.			\$0	\$1,067
Apr.			\$0	\$1,067
May			\$0	\$1,067
June			\$0	\$1,067
Totals	20409	\$21,782,847	\$1,067	\$1,067

Allowed ground avg bill - \$1,067.00

Monthly Payments

REMSA
 Monthly Debt Payments
 as of 1/14/2013

Acct No	Current Monthly Payment (P&I)
7197508-5001	\$ 14,977.27
7197608-5002	10,241.51
7197608-9042	16,480.17
7197608-9047	10,279.43
7197608-9048	6,572.61
7197608-9049	14,993.51
7197608-9050	4,787.55
7197608-9051	22,530.20
7197608-9053	2,196.54
7197608-9054	2,435.75
7197608-9055	8,353.72
7197608-9057	17,511.94
7197608-9058	25,972.42
7197608-9059	5,362.21
10099003	11,871.59
10099004	11,871.59
10099005	12,488.60
Total	\$ 198,926.61



Regional Emergency Medical Services Authority

**CARE FLIGHT
OPERATIONS REPORT
FOR
DECEMBER 2013**



**CARE FLIGHT OPERATIONS REPORT
DECEMBER 2013
WASHOE COUNTY**

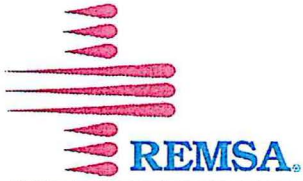
- ❖ **In Town Transfer:**
 0 Ground ITTs were completed
- ❖ **Outreach, Education, & Marketing:**
 ➤ 1 Community Education & Public Event

12/13/13	Food drive delivery to GSR	Flight Staff
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❖ **Statistics**

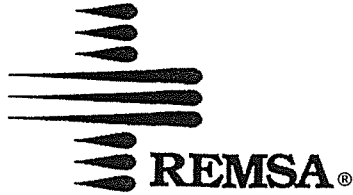
Washoe County Flights

	# patients
Total Flights:	12
Total Patients	12
Expired on Scene	0
Refused Transport (AMA)	0
Scene Flights	10
Hospital Transports	2
Cardiac	4
Trauma	3
Medical	2
Pulmonary	1
High Risk OB	0
Neuro	2
Pediatrics	0
Newborn	0
Full Arrest	0
Surgical	0
Total	12



Regional Emergency Medical Services Authority

REMSA
GROUND OPERATIONS REPORT
FOR
DECEMBER 2013



GROUND AMBULANCE OPERATIONS REPORT

December 2013

1. OVERALL STATISTICS:

Total Number Of System Responses	6070
Total Number Of Responses In Which No Transport Resulted	2504
Total Number Of System Transports	3566

2. CALL CLASSIFICATION REPORT:

Cardiopulmonary Arrests		2%
Medical		48%
OB		0%
Psychiatric/Behavioral		4%
Transfers		17%
Trauma		25%
	Trauma – MVA	7%
	Trauma – Non MVA	18%
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 3512 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
11/25/2013	REMSA	6
12/6/2013	REMSA	6
12/9/2013	EMS CES 911 Training	2
12/12/2013	REMSA	12
12/13/2013	Molly Turner	27

Advanced Cardiac Life Support Recert

Date	Course Location	Students
12/3/2013	REMSA	10
12/4/2013	EMS CES 911 Training	2
12/11/2013	Nampa Fire Department	1
12/12/2013	Saint Mary's Regional Medical Center	2
12/12/2013	REMSA	11
12/16/2013	EMS CES 911 Training	2
12/18/2013	EMS CES 911 Training	1

Advanced Cardiac Life Support Skills

Date	Course Location	Students
11/14/2013	REMSA	1
11/15/2013	REMSA	3
11/27/2013	REMSA	2

12/9/2013	Riggs Ambulance	1
12/11/2013	REMSA	1
12/12/2013	REMSA	1
12/19/2013	East Fork Fire Protection District	2

Advanced Cardiac Life Support Prep Course

Date	Course Location	Students
12/4/2013	REMSA	2

EMPACT

Date	Course Location	Students
12/11/2013	REMSA	13
12/17/2013	REMSA	6

Basic Life Support Instructor

Date	Course Location	Students
12/16/2013	REMSA	14

Family & Friends CPR Awareness

Date	Course Location	Students
12/9/2013	Saint Mary's Maternal Child Services	8

Nevada First Responder

Date	Course Location	Students
12/4/2013	REMSA	17
12/9/2013	REMSA	7

Health Care Provider CPR

Date	Course Location	Students
4/28/2013	Ron Browning	2

7/16/2013	Nevada Department of Corrections	8
7/18/2013	Nevada Department of Corrections	2
10/29/2013	Nevada Department of Corrections	6
11/24/2013	Jennifer Kraushaar	10
12/2/2013	Majen	3
12/3/2013	REMSA	10
12/4/2013	EMS CES 911 Training	4
12/4/2013	Milan Institute	12
12/4/2013	Nevada Department of Corrections	7
12/5/2013	EMS CES 911 Training	3
12/5/2013	Majen	1
12/5/2013	REMSA	7
12/5/2013	Nye County Sheriff's Office	5
12/5/2013	Majen	5
12/6/2013	Career College of Northern Nevada	14
12/7/2013	REMSA	10
12/7/2013	EMS CES 911 Training	1
12/7/2013	Riggs Ambulance	12
12/8/2013	Jennifer Kraushaar	3
12/10/2013	EMS CES 911 Training	3
12/10/2013	Barrick Goldstrike	19
12/11/2013	REMSA	7
12/11/2013	REMSA	11
12/12/2013	Lander County Community Health	4
12/12/2013	Aaron Boyce	2
12/13/2013	West Hills Hospital	4

12/14/2013	Great Basin College	16
12/15/2013	EMS CES 911 Training	4
12/15/2013	CPR 1st Aid Training	1
12/16/2013	Sierra Nevada Job Corps	11
12/16/2013	Nevada Division of Forestry	8
12/16/2013	Charles Sparke	1
12/17/2013	Nye County EMS	6
12/17/2013	REMSA	9
12/18/2013	Nevada Division of Forestry	9
12/18/2013	Willow Springs	6
12/18/2013	REMSA	10
12/19/2013	Regent Care Center Reno	3
12/19/2013	Nevada Legislative Counsel	1
12/19/2013	Florida Canyon Mining Inc	4
12/19/2013	Nye County Sheriff's Office	1

Health Care Provider Employee

Date	Course Location	Students
12/12/2013	REMSA	1
12/13/2013	REMSA	1
12/19/2013	REMSA	1

Health Care Provider Recert

Date	Course Location	Students
11/5/2013	Humboldt General Hospital	6
11/5/2013	Humboldt General Hospital	7
11/26/2013	REMSA	7

11/27/2013	REMSA	10
11/29/2013	Career College of Northern Nevada	1
12/2/2013	Elko BLM	1
12/2/2013	REMSA	9
12/2/2013	Charles Sparke	2
12/3/2013	Infection Control – REMSA	5
12/3/2013	REMSA	3
12/4/2013	Lander County Community Health	3
12/4/2013	REMSA	17
12/4/2013	REMSA	8
12/4/2013	Don Poag	5
12/6/2013	Airport Fire Department	1
12/7/2013	Riggs Ambulance	2
12/9/2013	EMS CES 911 Training	1
12/10/2013	REMSA	8
12/11/2013	Nampa Fire Department	1
12/11/2013	Nampa Fire Department	5
12/12/2013	Eastern Plumas Healthcare	3
12/12/2013	Riggs Ambulance	1
12/12/2013	REMSA	10
12/16/2013	Lassen CPR Plus	1
12/17/2013	Wayne Mackey	9
12/18/2013	Airport Fire Department	4
12/19/2013	REMSA	9
12/20/2013	REMSA	9

Health Care Provider Skills

Date	Course Location	Students
11/8/2013	REMSA	1
11/15/2013	REMSA	1
11/18/2013	REMSA	4
11/19/2013	REMSA	1
11/26/2013	REMSA	2
11/27/2013	Riggs Ambulance	1
11/27/2013	Tahoe Forest Hospital	1
12/2/2013	Tahoe Forest Hospital	1
12/2/2013	REMSA	1
12/3/2013	Tahoe Forest Hospital	1
12/6/2013	REMSA	2
12/6/2013	Majen	3
12/9/2013	Majen	2
12/10/2013	Majen	1
12/11/2013	REMSA	1
12/12/2013	Tahoe Forest Hospital	1
12/18/2013	Tahoe Forest Hospital	2
12/18/2013	Willow Springs	4
12/18/2013	REMSA	1
12/19/2013	REMSA	2
12/19/2013	Majen	3
12/20/2013	REMSA	1
12/20/2013	REMSA	1
12/26/2013	REMSA	1

Heart Saver CPR/AED

Date	Course Location	Students
9/23/2013	Rave Family Foundation	7
9/24/2013	Rave Family Foundation	11
9/25/2013	Rave Family Foundation	8
9/27/2013	Rave Family Foundation	8
9/30/2013	Rave Family Foundation	16
10/1/2013	Rave Family Foundation	13
10/2/2013	Rave Family Foundation	15
10/3/2013	Rave Family Foundation	16
10/4/2013	Rave Family Foundation	10
12/2/2013	Karen Palomo	4
12/4/2013	REMSA	8
12/5/2013	Washoe County School District	3
12/8/2013	CPR Plus	9
12/9/2013	Washoe County School District	6
12/10/2013	Washoe County School District	4
12/12/2013	Washoe County School District	5
12/16/2103	UNR EHS	6

Heart Saver CPR/First Aid

Date	Course Location	Students
10/14/2013	Nevada Department of Corrections	21
10/18/2013	Humboldt General Hospital	14
10/25/2013	Humboldt General Hospital	12
10/26/2013	Humboldt General Hospital	4
11/13/2013	Nevada Department of Corrections	21

11/20/2013	Nevada Department of Corrections	25
12/4/2013	Susan Phillips	1
12/4/2013	Majen	6
12/5/2013	Community Living Options	2
12/5/2013	Sierra Army Depot Training Division	9
12/5/2013	Humboldt General Hospital	5
12/6/2013	Sierra Nevada Job Corps	12
12/7/2013	REMSA	8
12/7/2013	ABC Fire	9
12/9/2013	Adolescent Treatment Center – REMSA	4
12/9/2013	Majen	7
12/11/2013	Susan Phillips	4
12/12/2013	Sierra Army Depot Training Division	9
12/14/2013	Silver Lake Volunteer Fire Department	1
12/16/2013	Majen	3
12/18/2013	Susan Phillips	5
12/19/2013	Sierra Army Depot Training Division	6
12/20/2013	Community Living Options	2
12/18/2103	Susan Phillips	6

Heart Saver First Aid

Date	Course Location	Students
12/5/2013	Milan Institute	20
12/5/2013	Washoe County School District	2
12/5/2013	REMSA	3
12/6/2013	Career College of Northern Nevada	14
12/9/2013	Majen	1

12/13/2013	JS Redpath	4
12/17/2013	Nevada Division of Forestry	8

Heart Saver Pediatric First Aid / CPR

Date	Course Location	Students
12/7/2013	REMSA	7
12/7/2013	Alex MacLennan	10
12/12/2013	EMS CES 911 Training	1
12/14/2013	Christopher McNally	5

Pediatric Advanced Life Support

Date	Course Location	Students
11/18/2013	Riggs Ambulance	7
12/5/2013	EMS CES 911 Training	2
12/10/2013	REMSA	9

Pediatric Advanced Life Support

Date	Course Location	Students
11/14/2013	REMSA	1
12/2/2013	REMSA	1

Pediatric Advanced Life Support Recert

Date	Course Location	Students
12/3/2013	Humboldt General Hospital	1
12/6/2013	REMSA	8
12/9/2013	Zack Marcus	1
12/9/2013	EMS CES 911 Training	2
12/12/2013	Riggs Ambulance	1
12/13/2013	Trent Waechter	5

12/14/2013	EMS CES 911 Training	2
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Pediatric Emergency Assessment, Recognition & Stabilization

Date	Course Location	Students
12/5/2013	Great Basin College	18

Ongoing Courses

Date	Course Description / Location	Students
2/1/13	REMSA Education- Paramedic	15
8/14/13	REMSA Education – Paramedic	13
9/24/13	REMSA Education – EMT-A	23
12/20/13	EMT Transition Course	13
Total Students This Report		1068

5. COMMUNITY RELATIONS:

Community Outreach:

Point of Impact

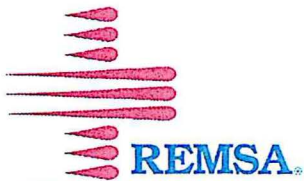
Date	Description	Attending
12/4/13	Interview with KOLO 8 on dangers of coats in car seats	1 staff
12/30/13	Annual planning for Point of Impact, REMSA.	3 staff

Northern Nevada Fitting Station Project

Date	Description	Attending
12/4/13	Fitting Station quarterly partners meeting, REMSA.	4 volunteers

Safe Kids Washoe County

Date	Description	Attending
12/3/13	Safe Kids Day 2014 conference call with Safe Kids Worldwide.	1 staff
12/5/13	Washoe County Bicycle Stakeholders meeting, Reno.	1 staff
12/5/13	Cribs for Kids Train the Trainer Webinar at REMSA for Community Health Workers Statewide, attendees were from Carson City, Elko, Dayton, Reno, and Las Vegas.	1 staff, 11 attendees
12/6/13	Washoe County Child Death Review Board bi-monthly meeting, Washoe County Social Services.	2 staff
12/10/13	Monthly Safe Kids Coalition meeting, Sparks. Robin Ruybalid, case manager for Washoe County CASA program was the speaker.	16 volunteers, 1 staff
12/10/13	Esther Bennett Safety Committee meeting, Sun Valley.	4 volunteers, 1 staff
12/12/13	Washoe County Chronic Disease Coalition quarterly meeting, Washoe County Health District.	1 staff
12/16/13	Northern Nevada Maternal Child Health Coalition meeting, Reno.	1 staff
12/16/13	Community Baby Shower planning meeting, Reno.	1 staff
12/17/13	Safe Kids Washoe County bi-monthly board of directors meeting, REMSA.	6 volunteers, 1 staff
12/20/13	Safe Kids membership subcommittee meeting, REMSA.	6 volunteers



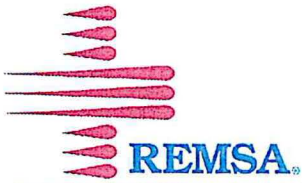
Regional Emergency Medical Services Authority

**GROUND AMBULANCE AND CARE FLIGHT
INQUIRIES
FOR
DECEMBER 2013**

INQUIRIES

December 2013

There were no inquiries in the month of December.



Regional Emergency Medical Services Authority

**GROUND AMBULANCE
CUSTOMER SERVICE
FOR
DECEMBER 2013**

GROUND AMBULANCE CUSTOMER COMMENTS DECEMBER 2013

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
1	Professionalism and kindness.		
2	All great.		
3	I cannot comment, as I was passed out.	No comment - family was pleased.	
4	All.	No big bill.	
5	Started an IV immediately when the nursing home failed.	Nothing.	
6	Explaining what they were doing, as they did thing, relieving my mom and mine. Very professional.		
7	Very helpful - explaining step-by-step what they were doing, reassuring me.	Did an exceptional job and professional.	Thank you for speedy and professional care.
8	The staff did a great job of gathering and sharing information with the family and with the patient (especially critical when it involves writing for a deaf patient).	Provide clear instructions as to how to reunite with the patient in the emergency room. (I followed them to the wrong entrance.) Kind of far off from the regular entrance.	
9	Everything was outstanding!	Nothing; you are already doing an outstanding job!	I am very pleased with your care and service.
10	Very calm and reassuring.		
11	Arrived quickly. Professional and efficient staff.	Nothing! Thank you.	Excellent care.
12	Staff was friendly and made me feel relaxed.	Did well.	Excellent.
13	Very calm.	Nothing.	Excellent.
14	The EMTs were courteous, professional and very helpful.		
15	Professionalism and kindness.	N/A	
16			I was not present when my husband fell, but he told me REMSA handled him very well.
17	Quick, friendly.	N/A	You guys are great!
18	Everything.		Great.
19	Picked up my husband from his business - took him to hospital.	I was not there.	Satisfied. (Patient (husband) passed away Oct. 26, 2013. Services he received were excellent!)
20	Great!		
21	The paramedic and EMTs were professional, caring and did a great job.		
22	Very efficient; ambulance was here in 6 minutes. Took vitals and relayed information expeditiously.	Nothing.	
23	They went above and beyond to make sure everything was explained. Everything was done very well. On the field all the paramedics were thoroughly explaining what was going on and what they had to do. They made sure I understood everything and were continually asking if I had any questions. They were extremely wonderful to my 11 year old son, talking to him the whole time and making sure he was comfortable.	Keep doing what you guys are doing.	
24		Do not take so long to arrive - what is reasonable time?	
25			REMSA was very quick in getting to location.
26	Polite people, helpful.		
27	Everything.	I don't know.	Gorgeous. Excellent.
28	All great.		
29	Acknowledged I was in severe pain immediately and administered pain medication, and comforted.	Always listen to the patient's needs!!	
30	Explained everything to me and were very polite.	Nothing.	
31	Promptness and professionalism.		
32	The crew was so helpful. The children love them.	Not a thing.	
33	Everything.		
34	Took care of my child very well.	Nothing, did very well.	
35	Everything.		Excellent.
36	Very professional in procedures.	Continue to maintain standards.	
37	Saved me! Got me to hospital safely, transfer staff very friendly.		My husband said one of the crew (male) in first ride was rude and condescending.
38		My husband spilled a glass of water on himself and the bed. He was transported to the VA in the wet bedding. They (your staff) didn't mention this to the VA staff and left him there in the wet bedding and clothes.	REMSA was called by Manor Care for the transport. I only saw the transfer from bed to gurney.
39	Everything.		
40	Very kind and efficient.		
41	Everything.	Nothing.	I think I had the best you have. Thanks.
42	All great.		
43	Very compassionate.	Sooner response.	
44	Everything. Your service was the best. I wouldn't ask for any better.	You all did everything the best way possible. I don't know of any ways it could be better.	Everything you did was perfect to me. (Thank you all and God bless.)
45	Everything.		
46	SLOW response time. Showed your unprofessionalism when dealing with Truckee Meadows Fire Department.	Don't talk to your other staff about Halloween parties when you are speaking to the client before the Fire Department arrives.	Your crew is inexperienced on how to treat the clients they serve. There is no need to do 80+ mph on the freeway for a non-critical transport.
47	I could not be more satisfied with Renown.		

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
48	Just called and billing staff was GREAT. Didn't get his name, sorry. Both (male) EMTs were AMAZING!! I just have to say how great they were on the day of my 8 year old daughter's accident (11/1/13). They were so kind to her and great at calming a very scared and in pain little girl. They talked to me with respect and informed me of everything that was going on. These two were a great team. I know the driver was a woman, but I did not get her name. She was quick to pull out a stuffed animal that my daughter clung to for the next 48 hours. Great staff. Great response. I was also impressed that both EMTs stopped by the ER many hours later to check up on us. I hope to never have to call 911 again, but if I do, hope to get this great crew. Thank you.		
49	Plane crash Stead Air Force Base - great job stabilizing spine with harness out of cockpit.		Met guys as they brought patient into trauma unit - good pics of accident to help docs understand injuries better - communicated to staff and myself well.
50	(Patient responded: I don't remember anything.) (2nd person/response: The employees were very explanatory and polite.)		(2nd person: Good.)
51	Everything.	Nothing.	Very good.
52	I was only semi-conscious after the beating/rape and they treated me with kindness.		
53	Took great care of our 17 year old daughter, as well as mom.		
54	On the second visit I was told how to use the blood sugar test.	Nothing.	No comments.
55	You took care of my grandma and made her comfortable.		
56	Everything!	Not a darn thing.	They could not do a better job.
57	Everything. Everyone was polite and professional.		Thank you!
58	You found my apartment.	Come only if I call you!	I was taken against my will to the VAMC. I respectfully told the crew I do not want to go to the hospital. I was in no pain. I was lucid. I had no shortness of breath or chest pains. I repeat, I was abducted by REMSA and thus I have a Cause of Action against REMSA, so you have been put on notice. I spent 3 days of my life in a very busy hospital, when I could have been at my residence where I belonged. Do not come to my apartment again, unless I request your help!!
59	Everything. I've never been in an ambulance before, but the EMT and driver were the best. They were very knowledgeable, polite and fun! Thanks, guys.	Keep on doing exactly what was done for me.	I can't remember the names of my 2 crew, but they were smart. Beyond well mannered, funny and promptly answered all questions nicely, both of them! My crew made me very comfortable, all around comfort in an ambulance, pretty good!
60	Everything!	We do not know!	Excellent!!!
61	Everything.		Everything was excellent.
62	Transport went well.	?	
63	Kept me from being scared.		
64	The respondees were very professional and had a good sense of humor. They were the very best in this situation.	You already did the very best. it's hard to top that.	The two fellows that I had that day were great. They really helped take my mind off the pain.
65	The paramedic was wonderful in trying to calm me down and explain my mom's condition. Please thank him.	Your paramedics have been great every time we have used REMSA.	
66	Your EMTs assessed the situation quickly and were in the bus before I could say goodbye to my husband.		
67		They said that the hospital readmit my mother, but I said that I couldn't lift her if she fell again - I might do more damage than good, but they finally agreed to take her to the hospital.	
68	Everything polite.	I don't think you need to improve.	
69	(Told) crew I didn't want to go. Good your man convinced me I should go due to pain in chest and family history.		
70	The crew was really outstanding!		
71	Very compassionate guys.		
72	Arrived quickly. Very kind to patient and to wife. Moved patient with care.		
73	The entire operation was well done.	Nothing I can think of.	
74	Assessing my situation and acting quickly to deal effectively with it.	Nothing.	Great!
75	Response time was quick; EMTs professional and informative.		
76	They were very polite and knew what to do in this case.	Nothing, as far as I am concerned. Everything was excellently done.	N/A
77	Everything! Thank you so much!		
78	Thanks for taking such good care of me!		
79	Helped me with breathing difficulty - reducing fear.		
80	Took good care of me and was very respectful.		
81	Not sure.	Pick patient (up?) from facility to hospital Renown.	Find a way to tell family about patient being taken to hospital.
82	You transported my mother several times this year. REMSA staff members are superb! This (11/7) was her last trip. She died later that day at Renown. We celebrate 92-1/2 years! Please remove from your list (expired 2/14).		
83	Took care of problem - very professional.		
84	Everything.		
85	Prompt and super efficient.		

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
86	Everything.	REMSA has helped us many times, and they have been the best always.	They deserve much appreciation.
87	The staff was helpful to what happened to me - of what I can remember.		
88	Everything.	Nothing.	Great!
89	EMTs were all excellent!	You did everything right - no complaints. Thank you very much.	
90	Give relief.		
91	Courteous, friendly, explanatory.	Not sure?	
92			Will there be a bill?
93	Very friendly and thorough. Helpful with my 8 year old daughter as well. All around nice and respectful.	Everything was great.	Both EMTs make a great team. We appreciate the help and care.
94	Communication. Professionalism. Kindness.	Keep up the great work!	
95	The personnel staff was considerate, polite and informative about what they were doing.		
96	So kind.	Unknown.	Care was great.
97	Techs were quick, courteous and informative - took some time to convince dispatch.		
98	Everything. I thank you very much. God bless you all.	Keep up the good work always.	May God bless the staff at Renown Hospital.
99		Because my husband is Caucasian and I am Asian, your crew assumed that our house was a group home and was very short when asking for my husband's info. He also asked if "family was notified." I said he is my husband, and please don't assume otherwise.	The dispatcher was short and rude, although helpful. It is not polite that stereotyping is practiced by your staff.
100	The service was prompt, courteous and professional.	I do not know.	
101	Courteous, respectful, competent - excellent overall.		
102	Everything satisfactory.	Satisfied.	I was very satisfied.
103	EMTs were great!	Nothing.	I have a broken shoulder. Sorry this is so brief. Still healing.
104	I thought the paramedics/EMTs were just awesome! They did tell me everything and they were kind, non-judgmental.	Let my family (i.e., my daughter, the only one I live with) know what's going on, what happens next, etc.	This was the best trip I've had with REMSA. They really did a spectacular job in my book, and I'm a former RNI! Good job, great experience. It was very reassuring to be cared for by such capable staff. Many thanks to each of them.
105	Prompt, efficient, courteous, professional.		I was very surprised at the quick arrival of REMSA. Personnel seemed professional, knowledgeable and caring.
106	Very professional and polite. Very timely arrival. Very polite and calm.		Good timing and very helpful.
107	Took good care and were very nice.	Nothing.	
108	My mom is 88 and has Alzheimer's and the EMTs and paramedics were extremely respectful to her.		
109	Very fast response - extremely kind.		
110	Compassionate service and explained all procedures. Terrific service.		
111	Everything.	Can't think of anything.	
112	Responded quickly. Professional yet personable interactions.		
113	Very kind to old lady.		
114	Made me feel relaxed as possible. Communicated with me regularly.		
115	Excellent assistance!		
116	Everything.		
117	Staff was excellent. Professional, friendly, very reassuring.		
118	Services were quick and attentive.	Nothing.	Very satisfied - no complaints. P.S. - Thank you, by the way!
119	Everything was great!	Nothing that I can think of.	
120	All done well.		
121	Both paramedics and EMT were outstanding! Listened to my concerns and problems and transport was easy - and thanks to your staff!		Very good service provided and I cannot thank them enough!
122	Make us both feel comfortable and safe.		
123	Everything was good!!! Everything!! Prompt (4-5 min.). Very alert - quickly sizing up the situation. Patient (wife) in septic shock due to pneumonia and blood culture.	Only problem I had was with them trying to do an IV. Took them 3 tries and blew my veins all but one.	Service was very good. Fast response by all.
124		Keep up the good work!!	Patient's comment - thank you for the excellent work - well done!
125	Okay.	REMSA staff did not know where to go but, in their defense, this place is kind of hard to find.	
126	Professional and courteous.	From accounts - service seemed good!	
127	Everything.		Your new Hotline works like a dream.
128	I was treated with courtesy by the ambulance crew.		
129	Timely; handled elderly patient appropriately.		
130	Everything.	Everything was great.	
131	All of it.		
132	Everything.	All the persons that helped me were great, couldn't ask for better service.	
133	You did everything beautiful and God bless your service.	You were perfect.	Thanks again and God bless.
134	Was explained so anyone could understand the procedure from front to back.		
135	Everything.	Just keep up the good work.	
136	Patient and kindness towards myself and my family.	Nothing.	N/A
137	Very caring and professional.		
138	I could not get better service than your people. I am very happy with them.		
139	Everything. Everyone has always been so helpful and just wonderful. Thank you.		
140	Professional and positive people.		This was ordered by the VA.
141	Were pleasant and helpful.	I was completely at ease.	Although they were busy, they took time to make me comfortable.
142	Everything went great except for the flight was a little rough.		

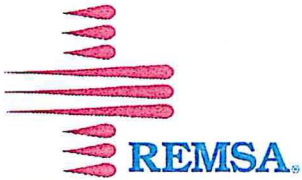
	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
143	Came fast, kept me alive. Thank you!	Keep good bedside manners. Keep in mind patients are scared.	Stay positive to help patients.
144	Explained what they would do. Helped patient. Very happy with the service.		
145	The two guys in the ambulance were great. I was in so much pain.	Everything was great.	Thank you.
146	You did everything very professionally.	I can think of nothing to improve your service. It was excellent!	
147	Put me at ease. Very nice.		
148	Everything right.	Keep everything the same.	
149	Personnel was rapid - informative - gentle - caring.		
150	I didn't know I had a Bundle Branch blockage. I'm glad they told me. I have looked into it!	I am 70 and never been in an ambulance. I think they were amazing.	Thank you for being so professional and nice. I was very scared at first.
151	Everything was done very professionally.		
152	All REMSA personnel were very helpful, courteous and professional! Everything was done very well.	Nothing - great job.	Everyone was very knowledgeable. Everything was very timely. Thank you!
153	EMTs were very informative about what they were doing and what they were going to do - hooking up monitor and getting me into the ambulance, etc.		Great care on the way to hospital, movement from ambulance to emergency room - great job. Learn by getting map of this area - find the main highway out, which is Red Rock Road. South to Reno. North to California or Reno.
154	Fair.	By not going over such bad roads.	
155	Arrived immediately.	Learn to hit bad veins.	
156	We are very satisfied, but please - a little more heat in the ambulance.		
157	Came very fast.	I thought the crew was very efficient.	
158	Helping the patient feel relaxed.		
159	Excellent. One of the helpers was an older student of mine at Hug High and was glad to see him.		
160	Very caring.		
161	I felt safe and cared for.	Can't think of anything.	I appreciated the service.
162	Remember to be very kind and comforting in making me feel better.	I'm sure you did all you should have done.	Thank you very much.
163	Everything.	Keep up the good work.	
164	Everything. (I also appreciate all that the people at WalMart did for me.)	Nothing - everything was done right.	See previous answers.
165	Very well.		
166	Keep my spouse calm during accident.		
167	Courtesy, concern, professional and knowledgeable.		After being deferred from St. Mary's Hospital, I asked them to call my wife so she would know where I was. That was not done, which caused even more stress for her.
168	All around excellent.		
169	Stayed calm and spoke calmly to patient.	Never used this service previously.	
170	Everything!		
171	Prompt and courteous.	Everything was fine.	Very good.
172	Everything.		
173	Female paramedic was especially helpful and efficient.		
174	You were very kind to my mother who has dementia (the patient). I could tell she felt safe.	Nothing! You guys rock!	
175	Came quickly and did all necessary things.		
176	Became ill at the Atlantis and was transported to the Renown Hospital at the South Meadows area of Reno.	Please supply a copy of bill for services and a copy of any report issued.	
177			A blanket would have been nice during transport from one hospital to another.
178	Prompt service and helpful.	I don't know of any better way.	
179	Very helpful.	Nothing. Your staff is very efficient.	
180	Everything.		The crew was great. I will recommend REMSA.
181	Were very prompt and professional and put me at ease.		Excellent service - bravo!
182	Everything.		Great service.
183	Put my dog away, since I couldn't.		
184	Pick up and transport my body - fast.		
185	Dispatcher was calming and very helpful.		Arrived quickly.
186	Nice and respectful to me.		
187	Excellent.	Patient passed away 11/26/13.	
188	Those girls were fabulous!	Nothing, you are great!	Excellent, they knew what they were doing. Saved my life before I got to St. Mary's.
189	They were very caring and helpful. I give them a 10!	Nothing. They were great.	
190	Yes.		ER doctor I did not like or love. The doctor did not believe me in ERI!!!! No contact with REMSA. All arrangements were made by Renown South Meadows.
191			
192	A great team who worked well together.		
193	Got me to the hospital.	Same thing, if I need it.	Soothing, when you feel terrible.
194	Everything. They were all superb!! Very caring and knowledgeable.		We've used you about 4 times in 5 years and have never been dissatisfied.
195	Everyone was very professional.		
196	Caring, helpful, polite and courteous.	I don't know, they came right away and were just so nice and helpful.	
197	Everything.	Keep up the way you are doing now.	
198	Job well done!		
199	Made sure I was comfortable, needed anything extra.	Was very happy with service.	The girls called hospital to make sure they were ready for me. Thank you!
200	Took good care of my wife. She passed on 11-24-13 - 2:10PM. Thank you for bringing her home.		
201	Everything.	Nothing.	Was great.
202	Response great and helpful.		Great service.
203	Fast and helpful service.		Good service.

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
204		Nothing - service was excellent.	Service has always been great and fast to respond. (Thanks so much for your quick response and excellent service and expertise. Thanks to all at REMSA.)
205	Calmed me down - kept talking to me at home and on the way to the hospital. Very caring.	Nothing more that I can think of.	The ambulance personnel were very professional in their duties and yet were very kind and caring.
206	You were very prompt, kind and helpful to my mom.	I feel you did a very good job in providing the service called for.	
207	Billing was very helpful.	Continue the good job.	Great location in the community.
208	At time of your service, I was pretty much out of it with pneumonia. I was under the impression it was my town ambulance of Storey County I had use of, which I am a member.		Now that I know better - enclosed is my insurance card - and will expect a bill for \$200 for service from you.
209	EMT was great. Patient felt very comfortable, and he was very helpful to me as well.		This crew was great. I'm sorry I don't remember female medic's name, but she was very helpful as well.
210	Everything.	Nothing.	Everything was done very well.
211	Drove me to the hospital in a very short time.		
212	Carry to ambulance.	Nothing.	Very good.
213	The nursing staff.		
214	Everything.		Everyone was very kind and helpful.
215	Everything.	I can't think of more.	
216	Quick response, made sure my house was secure.	I gave a list of my husband's medications to an EMT. He did not pass the info along to the Emergency Room. Therefore, I had to call a neighbor to get into my house, dictate the info by cell phone, so I had it for the doctors. This should be corrected or I should be warned to carry extra copies with me.	
217	Your EMTs were really good - very calming.		
218	Everything - courteous, kind, gentle.	You are already great - no suggestion.	I am so impressed with your service - if you need a testimonial - call on me.
219	Everything.		The entire team was quick to respond and caring and helpful.
220			Your staff is always very professional and helpful. We feel we can always rely on them and trust them to take care of us.
221	Took the time to do it right.		
222	Explained potential medical risk and recommendations so I could make an informed decision.	?	I live alone so if I have an emergency requiring a visit to ER, I am afraid to drive. I trust REMSA and their response time.
223	Made me feel at ease and kept me calm.	Nothing.	
224	Very courteous, professional, knowledgeable. All members worked well as a team.		
225	Kind everything.	Keep it up - good work.	You are the best. Thank you.
226	Explained what was going on and took charge of the situation.		Much better experience this time than the last time. You helped us out.
227	Very caring and nice.	Everything was handled very nicely.	Handled my pain and very attentive to my need and my family.
228	All REMSA personnel were very helpful, courteous, and professional! Everything was done very well.	Nothing - great job.	We were impressed with REMSA's interfaces at the hospital.
229	Crew was very courteous and helpful.	In this case, no improvement required.	
230	Dispatch very helpful. Staff very professional, knowledgeable. Helped our family feel more at ease while they worked on her.		
231	Fast and reliable service. Keep up the good work.		
232		1) REMSA staff SHOULD NOT bring up hospice while they are working on patient. Time and place for this discussion was wrong. 2) Speak "English" not "Medical" to family members when discussing patient.	
233		Don't rip open a vein in my hand trying to insert a large IV while moving in an ambulance!	Maybe insert the IV while stationary!
234			I don't know anything about REMSA service - my mother was already in an ER room when I got to St. Mary's. My mother doesn't remember anything.
235	Very nice! Also made me comfortable!	Less light inside so people can't see you! I should have not gone to ERI! No insurance! Urgent Care is really all I needed! A friend could have taken me. I only needed 8 stitches.	A+ service. Great staff!
236	Everything!	Not much. You're the best.	
237	Everything.	Stay the same.	Everyone was very careful and concerned.
238	Helped me medical, when I needed it.	Nothing.	
239	You saved my life.	-0-	
240	Everything - you people have been so great to my 90 year old mom and me.	Just keep coming when my mother needs you.	
241	Came so quickly and saved my best friend's life. They were kind and efficient and then talked later at the hospital and gave them each a huge hug.	The service was incredible. Nothing to change.	I can't say thank you enough for efficiency and respect. Thank you for a job well done!
242	Excellent!!	Nothing!!!	
243	No complaints.		
244	Empathy - professionalism.	No improvement needed. They were the best!	
245	Everything.	Nothing.	
246	Nurse hotline is great. Lisa took my information and then determined that it was necessary to dispatch REMSA, and she stayed on the line until they arrived.	Just keep up the good job you are already doing.	Nothing to add, but "Thank you!"
247	Everything.	Nothing - you are great.	
248	All of the above.	Pay my bill.	Careful, polite, friendly.
249	Everything.	Can't think of a thing.	I probably would have died, but for you guys getting me to the hospital.
250	Everything.	Just be there.	Can't comment on dispatcher, did not make the call.
251	Crew was very careful not to cause me any extra pain.		
252	EMTs were very kind.	Don't change a thing!	
253	I'm sorry, but I know nothing of the dispatch. The ride from the airport to Renown was uneventful. People were kind.	I hope I'll not need you again.	I was air flighted from Elko by Summit Air and was mostly unconscious. I really don't remember much. I am, however, now at home and recuperating - so you must have done fine. Thank you.
254	You helped calm my hesitation down about leaving the hotel without my husband (who came later via taxi). Helped stopped the bleeding. Discussed reasons for going to hospital.	I was in town on vacation. Your services were excellent.	Very polite, professional and efficient.

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
255	Kept me at ease, very professional. Great sense of humor.	I really couldn't ask for better care.	Dispatcher was great and calmed me down. Thank him for that.
256	Calmed me down.		
257	Prompt, helpful, kind.		Excellent.
258	Explained to my husband what they were going to do, kept him calm.	It was very good service - I'm thankful you are there to help me.	Arrived in very short time - minutes, even when I needed help at 3 a.m.
259	Very good care.		
260	Excellent.		
261	Took me to the hospital.		
262	You helped save patient's life. Gave him IV, etc. Had him have immediate care.	Everything was perfect. Hope we do not need you again.	I sincerely appreciated being able to ride in ambulance.
263	Kept me calm. My blood pressure was 200.		They were there quickly.
264	Very fast, efficient, comforting, friendly - the humor and rapport between my "rescuers" really cheered me up.	Can't think of anything.	You were wonderful! Thank you SO much! My husband thinks you were great, too.
265	Everything.	N/A	
266	Got me to a safe place.	Nothing at this time.	
267	Inserted IV before starting to drive.	The crew was very professional and caring.	
268	Everything.	Nothing.	It was good service.
269	Your EMTs stayed calm and helped calm me during that stressful incident.		
270	Excellent.	Nothing.	
271	By helping me to get up off the floor.	Continue being kind.	I wanted to see how my back was, and I am doing good.
272	Everything.	Nothing.	Quick and professional response.
273	You were quick. You were efficient. You talked to the patient.	Nothing, you both did fine.	
274	Always caring and helpful.	Do very well.	No questions.
275	EMTs were VERY kind and thoughtful.	Keep doing what you are!	
276	THIS IS NOT ME!!! NO SERVICE HERE!!!!		
277	You were great all the way around.	Nothing.	Great job.
278	All the personnel were very helpful. They continuously communicated with me until we arrived at the VA hospital - and comfortably.	I couldn't ask any better service than what they gave me. Very satisfied.	Talking to me throughout the transition is very important, made me comfortable, etc.
279	Fast response, crew very compassionate.		
280	Very considerate and compassionate.		
281	I was not present when patient was taken to Renown, but was notified by Manor Care where my husband is there for LTC.		
282	One of the guys came to my room later to see how I was doing. I liked that!		
283	Everything.		
284	Took care of patient until arrival at ER.	Partaking in CHP - very helpful. Hate to see it end within the first 3 months.	Unbelievable care in the ER and by nurses telemetry - grave shift.
285	Encouraged me to keep fighting/were caring of my needs.	You already are.	Bill was very high for not being able to diagnose my medical problem.
286	I was transported from one hospital to another.	I could only answer one of the above. (Yes to "Were our personnel professional and helpful?")	
287	Everything - thanks!	Just keep up the good work.	
288	They were knowledgeable, efficient and effective.		Excellent operation.
289	All was done well. I was all shook up, but the crew reassured me all would be well.	If you do any better, I would use you as taxi service! The drivers were outstanding.	Many thanks from this old (97) girl. A-okay!
290	Everything.	Nothing.	
291	Polite and very helpful for me in my time of need.	Always be there for everyone, as you already are.	Very professional and polite.
292			All involved were very helpful and comforting.
293	Everything.		
294	I passed out in doctor's office - he called 911 and they took me to hospital. I don't remember much of what happened. You did me a great service, as far as I know.		
295	Care of patient.		
296	Fast, friendly, courteous and professional.		So thankful for the care I received. Excellent all around experience.
297	Have never used your service. Where did you get my name and address??		
298	Everything. They were very attentive and I was treated very well.		
299	You picked me up off the floor and took me to Renown. Thank you for being there when I needed you.		
300	Response time was great.		
301	Everything.	Keep up the personal, yet professional, service.	
302	Everyone was helpful. I was well taken care of.		
303			Very good service.
304	Everything!!	It can be better! You're the best!!	
305	Everything. Third time we used you this year. Wife once. Husband twice.	Everything was just great.	Outstanding. We like you, but we hope not to see you next year.
306	Very well done in every category.	Nothing.	I should be getting Frequent Flyer privileges. Thanks for saving my life again!
307	Transport.	Everything done well.	
308	Everything.	Nothing.	Excellent care and service.
309	Everything was great.		
310	Very professional and competent.		
311	Very prompt and polite.		
312	Everything.		They were very concerned, thoughtful and kind.

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
313	The REMSA staff in the ambulance did an amazing job to keep me calm, as my 25 year old baby girl was in distress. They kept me busy talking during the entire ride, and provided the hospital staff with all the necessary info when we arrived at Renown.		
314	Paramedic and EMT were amazing. They treated my mom great and went above and beyond to help.	Nothing.	N/A
315	You were kind, informative and efficient.		
316	Everything.	Not much.	
317	Very comforting and professional.	The experience was excellent service.	Thank you. All were great!
318	Quick to get to our house. Told me where I should go and be there as soon as I could.		
319	Everything. Everyone has always been so helpful and kind. I'm the wife of patient, so I'm usually rattled. I'm always relieved. Thank you, all of you just are some of the nicest and very professional people.		
320	You kept me calm and comfortable. I appreciated the compassion and sincerity.	Stronger pain meds (ha, ha, ha). Nothing comes to mind.	
321	Arrived promptly. Advised me of the severity of the situation and everything they were doing. Were able to restart the patient's heart.		I can't think of anything that they could have done better.
322	So sweet and kind! Helpful, patient and knew their stuff.	Don't think anything.	THANK YOU for helping my dad.
323	Very pleased with service.		
324	Response time and competence.	No suggestions - did very well.	
325	Arrive on time.	Nothing.	Arrived fast and got to ER quickly.
326	Everything was perfect.	Just as you are doing. All is perfect.	All was perfect. Thank you.
327	Everything.	Can't think of a thing.	
328	Everything. I was very grateful for the response and professionalism.	Nothing.	It was excellent.
329		Don't wander around in the other rooms.	
330	Everything - was very helpful and polite.	Nothing.	I felt I was in good hands. Keep up the good work.
331	Everything.	You do just fine.	A "Merry Christmas."
332	Everything - very professional.		Good crew.
333	Responded very quickly. Good service.	N/A	N/A
334	Everything.		
335	Were able to bring gurney to mom's bedroom to transport her safely.	Nothing.	
336	Provide fast, safe care.	N/A	Thank you!
337	How about saved my wife's life!! Hard to beat that! This was our first experience with an ambulance and crew and 911 dispatcher - all awesome!	I was overwhelmed with emotion and the dispatcher was calm and walked me through what I should do - within minutes ambulance and FD was in our house taking care of business!	My wife was in respiratory distress - the paramedics assessed her condition - provided temporary relief and had her on the way to the hospital all within 15 minutes - fantastic.
338	Checked me over, took photos and made sure I was x-rayed for possible injuries.	Nothing. Everything went well and easy.	N/A
339	Very well in general.	TBD	Excellent.
340			Thank you for the great service!
341	Your EMTs were great!		
342	I'm fine. Feeling good.	Excellent.	Very good.
343	Excellent in almost all ways, but the REMSA employees didn't inform me that my uncle had to be able to get out of bed. Social Services told me that - then we could get him to hospital. It's a long story. Please read your records.		When people refuse to go - please inform caregiver of the law. My uncle almost died because REMSA didn't take him the first time I called. Only the second time, after I found all the info from Social Services. Other than that, we got good care.
344	Moved patient down the stairs for transport.	I thought a blanket should have been provided, since it was cold that morning.	
345	Professional, respectful, courteous.	Recycle the gray blankets at animal shelters - hospital staff just throws them out.	
346	They all did very well. Thank you.		
347	REMSA professionals were just that - professionals. I always know I will be well taken care of.		
348	Rapid response.		Very pleased with service!
349	Keeping me informed about what was going on in a caring/compassionate manner.	No improvement could be made.	Your service was excellent. My dad was the person you transported on this day. His girlfriend was with him. We live in the Bay Area and weren't there. Thank you for taking care of my dad and his girlfriend. Unfortunately, my dad didn't make it, but our family appreciates your efforts and kindness. You will not be forgotten.
350	Brought patient home from ER at Renown after treatment for 7 hours. Trip was delayed because of weather/snow and accidents.		None. They are all great caregivers.
351	Excellent in explaining and keeping me calm.	Nothing.	In general, very professional from beginning to end.
352	Kept me covered and warm in the middle of a severe snow storm.	You did fine.	Service was excellent.
353	Very good, prompt, kind, professional.	?	Keep it up!!
354	Quick response. Everybody was kind, courteous and professional		
355	Services were prompt and professional.	?	
356	Everything.	N/A	
357	Got me off the floor. I fell down.	Nothing. All things were good.	Perfect.
358	Making me feel comfortable.	Nothing.	I really felt like they cared.
359	Everything.	Everything was great.	Thank you.
360	Timeliness to response, protecting my privacy.		
361	You made my daughter feel very comfortable because she was very scared.	-0-	-0-
362			I am satisfied with the service you provided.

	What Did We Do Well?	What Can We Do To Serve You Better	Description / Comments
363	The 2 gentlemen were very professional and calmed me down.		
364	They did everything very well.	Nothing. Thank you for your service and care.	The guys were very professional - did their job well.
365	You got here in record time and the men were very caring.	Nothing.	
366	Everything. Just great.		
367	Everything.	Did just fine - "great"!!!	Very, very kind and helpful.
368	Everything.	Nothing.	It is all great.
369	Crew was friendly and put me at ease.	Day was extremely cold and I only had a gown on - transfer from ER to ambulance was uncomfortable as a result.	
370	Everything.	Did everything fine.	
371	The speed in which you helped me.	Can't think of a thing. They were prompt and caring when I needed urgent help.	
372	All aspects of the operation were accomplished in an outstanding manner.	Keep up the great work. Your personnel are well trained and caring.	
373	Everything.	Nothing. Very professional.	
374	Fast and effective diagnosis and decision to transfer to hospital. Ambulance crew was professional, polite and efficient.		Very good.
375	Relaxed me. The blanket they used was light weight and warm.	I can not think of anything to serve me better. The service was great.	The care and service was very good.
376	Very kind and soothing.		
377	Had a heart without any disdain.	Don't know what it could be.	Made me feel like I was a human being.
378	My husband had a heart attack in Elko. We were flown into Reno. I was scared for my husband. Your team helped to keep me very calm.	Your crew was absolutely great.	It was absolutely excellent. I give you all a 10. I just hope and pray you all are good with us once the bills start coming in - helping us through hard times - working with us the best you can on payments. Thank you.
379	Everything was great.	Nothing - just keep doing what you are doing.	
380	Gave good advice and were very courteous.	Nothing.	Web site is easy to use.
381	Everything.	Nothing.	
382	How patient the staff was.		
383	Everything.		All very good.
384	Everything. You always go above and beyond caring for my husband.		
385			We called PHI Emergency Transportation. They called REMSA.
386	Very polite, calming under a stressful situation.		Service was very professional, made me feel safe.
387	Made me feel safe in a stressful situation.		
388	Worked efficiently.	?	Perhaps it was necessary, but the entire scene frightened the wits out of both me and my wife.
389	Kept me alive.		
390	Helpful and knew what steps to take.		
391	Everything!! They made me feel a lot better. I was so scared.	Stay around in our town.	It was great. Keep up the good work.
392	Everything.	Keep up the good work.	N/A
393	Back loading.	Nothing.	All OK.
394	All service was well done.		
395	Unknown.		
396	Unknown.		
397	Excellent customer service and took good care of the patient.	You did an excellent job.	Thank you so much! All personnel did an excellent job and all of them are very helpful.
398	Quick response and transport.		
399	Your personnel were friendly, helpful and understanding.		Your service was very good - what more can you ask?



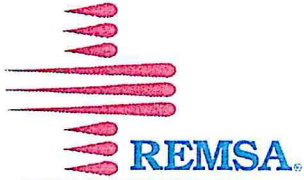
Regional Emergency Medical Services Authority

**CARE FLIGHT
CUSTOMER SERVICE
FOR
DECEMBER 2013**



CARE FLIGHT CUSTOMER COMMENTS DECEMBER 2013

	What Did We Do Well	What Can We Do To Serve You Better	Description / Comments
1			I was knocked out did not know
2	Professional and attentive.		
3	You save my life "twice". Thank you so much.		You did great.
4	Took care of my mom. She passed on Nov 15th.		



Regional Emergency Medical Services Authority

**REMSA
PUBLIC RELATIONS REPORT
FOR
DECEMBER 2013**

PUBLIC RELATIONS

December 2013

ACTIVITY	RESULTS
Continued working on marketing for Community Health Programs and Nurse Health Line.	
Formatted and distributed Nevada Project Heartbeat press release on behalf of REMSA.	
Coordinated and attended Channel 2 Share Your Christmas food/donation drop off.	Care Flight and REMSA were both featured during the event on Dec. 13.
Wrote and distributed a Cribs for Kids press release statewide.	
Worked with media and REMSA's response regarding shooting at Renown medical office building.	On Dec. 17, KPS 3 acted as the media conduit for all inquiries regarding the shooting at Renown medical office building.
Set-up media interview with REMSA and Channel 2 regarding New Year's Eve preparations	Story ran on 12/31/13 in the Reno Gazette Journal.



Washoe County School District

425 East Ninth Street * P.O. Box 30425 * Reno, NV 89520-3425
Phone (775) 348-0200 * (775) 348-0304 * www.washoecountyschools.org

Board of Trustees: Barbara Clark, President * Dave Aiazzi, Vice President * Lisa Ruggerio, Clerk
Estela Gutierrez * John Mayer * Barbara McLaurry * Howard Rosenberg * Pedro Martinez, Superintendent

DEC 23 2013

BY: _____

December 2013

REMSA

Dear Jim,

Thank you from the bottom of our hearts for the support you and your organization provided Washoe County School District and this community in the wake of the tragedy at Sparks Middle School.

During a time of great need, a time of immense sadness and grief, your help allowed our students, staff, and families to begin the healing process, and for that, we are eternally grateful.

Students at Sparks Middle School have returned to school and learning will continue, as it must. While we will never forget the tragic incident of October 21, our community must move forward together, and your help has led the way; it has given us hope.

We are so very grateful, and while words cannot describe our appreciation, we hope you know your efforts have meant the world to all of us.

Sincerely,

Barbara Clark, President

On behalf of the WCSD Board of Trustees

Superintendent Pedro Martinez

December 30, 2013

Director of Operations Mike Williams
REMSA
400 Edison Way
Reno, NV 89502

Dear Director Williams:

On behalf of the men and women of the Reno Police Department, I want to extend our appreciation to your agency and personnel, especially use of your ambulances and TEMS, who assisted in the recent shooting incident at the Center for Advanced Medicine at the Renown Campus. Your personnel responded and integrated into our initial emergency operation flawlessly, and were of significant assistance as we transitioned into the longer term management of the incident.

We are blessed in this region to have such dedicated and committed people, and because of this commitment we come together in these situations with safety and service to others as our propriety.

Please extend our appreciation to your personnel and may we all have a safe 2014.

Thank you.

Sincerely,



Steve Pitts
Chief of Police

Emergency Crews Prepare for New Year's Eve

Posted: Dec 31, 2013 3:56 PM PST Updated: Jan 06, 2014 6:17 PM PST

REMSA is gearing up for what they expect will be an eventful night.

New Year's Eve is one of the three busiest nights of the year for medical calls.

The Saturdays of the Rib Cook-off and Hot August Nights are the other two.

"Typically, we'll have about 200 incidents on New Years Eve and that's just because we have a lot more people in downtown Reno," Kevin Romero, REMSA EMS Director said.

Between 5,000 and 7,000 people are expected to head downtown to celebrate the new year.

So, paramedics know they will have more calls.

That's why they are adding extra units, including a dozen extra ambulances.

Up to 30 of them will be spread around the Truckee Meadows.

"We have four paramedics, downtown, working with law enforcement that will be on foot, covering the area casinos and the corridor downtown," Romero said. And then we put single resource paramedics in the outlying casinos like the Nugget and the Peppermill."

The Reno Police Department is adding 50 extra officers to help keep the peace, as we close out 2013.

Last year's downtown celebration ended with about 15 arrests.

"Any time you get a large group of people gathered, it causes us some problems," Sgt. Joe Robinson said. "But nothing to be too worried about."

Most of those problems tend to be alcohol-related.

That's why RPD and REMSA work together for this event.

"We do know that at midnight or a little after midnight, we are going to have an influx of calls for intoxicated individuals, probably some fights, things of that nature," Romero said.

"The Reno Police Department is dedicated to special events in downtown Reno," Robinson said. "Especially, one that we're hosting New Year's Eve. So, it's our responsibility to make the event safe and that's just what we're going to do."

Officers are asking party-goers for their help to make that happen.

They say responsibility will help make the night go a lot more smoothly.

"It's great to be a part of it and everybody has a good time," Robinson said. "As long as everybody is safe and follows the law, we'll have a great time."

Written by Paul Nelson

December 7, 2013

In Mass Attacks, New Advice Lets Medics Rush In

By MICHAEL S. SCHMIDT

WASHINGTON — Seven minutes after the authorities in Sparks, Nev., received a call one day in October that a gunman was on the loose at a local middle school, a paramedic wearing a bulletproof vest and a helmet arrived at the scene.

Instead of following long-established protocols that call for medical personnel to take cover in ambulances until a threat is over, the paramedic took a far riskier approach: He ran inside to join law enforcement officers scouring the school for the gunman and his victims.

“He met the officers right near the front door, and they said: ‘Let’s go. There are victims outside near the basketball court,’ ” said Todd Kerfoot, the emergency medical supervisor at the shooting. “He found two patients who had been shot and got them right out to ambulances.”

Federal officials and medical experts who have studied the Boston Marathon bombing and mass shootings like the one in Newtown, Conn., have concluded that this kind of aggressive medical response could be critical in saving lives. In response to their findings, the Obama administration has formally recommended that medical personnel be sent into “warm zones” before they are secured, when gunmen are still on the loose or bombs have not yet been disarmed.

“As we say: Risk a little to save a little, risk a lot to save a lot,” said Ernest Mitchell Jr., the Federal Emergency Management Agency’s fire administrator, who released the new guidelines on mass casualty events for first responders in September.

The guidelines say that such events, which have led to more than 250 deaths in the past decade, are “a reality in modern American life” and that “these complex and demanding incidents may be well beyond the traditional training of the majority of firefighters and emergency medical technicians.” They recommended that any of those first responders sent into “warm zones” focus on stopping victims’ bleeding.

The guidelines also say that first responders should be equipped with body armor and be escorted by armed police, a policy that officials in Sparks and a handful of other cities had already adopted. The new focus on moving faster to treat victims follows an earlier shift in thinking about how quickly the police should respond.

In the 1999 shootings at Columbine High School in Colorado, where two disaffected students killed 13 people, no officers entered the school until a half-hour after the shooting began and SWAT teams arrived to respond to a highly planned attack that involved a fire bomb and other explosive devices. After Columbine, law enforcement officials made it clear that they wanted the first officers on a scene to act immediately instead of waiting for specially trained officers with body armor and high-powered weapons.

“These events like the shootings are usually over in 10 to 15 minutes, but it often takes over an hour for everyone to get there,” said Dr. Lenworth Jacobs, a trauma surgeon who created the Hartford Consensus, which brought together experts in emergency medicine and officials from the military and law enforcement after the Newtown shooting to determine better ways to respond to mass casualties. “We’re seeing these events in increasing frequency, and unfortunately we have to change how we approach them to keep death tolls down,” Dr. Jacobs said.

While the United States military saved thousands of lives in Iraq and Afghanistan by practicing combat medicine developed over years of responding quickly to battlefield injuries, the medical response to the bombings last April at the Boston Marathon provided a dramatic example on American soil of how lives could be saved by acting quickly.

The bombs went off near the marathon’s finish line, where many nurses and doctors were stationed to care for injured or ill runners and major hospitals were not far away. The bombing victims received medical assistance almost immediately, and while three people were killed, more than 200 others who were injured survived, including a dozen or so who had limbs amputated.

Those medical professionals were taking a risk: They did not know how many bombs there were or whether they were putting themselves in the middle of a larger attack.

The new FEMA guidelines have been embraced by state and local officials. But they have heightened concerns about the risks to first responders and about whether response times for victims would grow even longer if medics were wounded in a danger zone.

They have also raised the specter that terrorists may target the first responders as they have in Iraq. In recent years, the Qaeda affiliate there has in many instances detonated a car bomb and then, as medical personnel arrived, set off others.

But Harold Schaitberger, who leads the International Association of Fire Fighters in Washington, said his organization played a role in creating the new guidelines and strongly supported them if employed correctly. The association represents 300,000 firefighters, paramedics and others.

Trying to save victims in “warm zones,” Mr. Schaitberger said, “is a different risk for firefighters, but not more of a risk than firefighters already take in responding into a burning structure.”

Mr. Mitchell, the fire administrator, said the gunmen and terrorists who mounted attacks in the United States over the past decade rarely made targets of first responders. But, he said: “We know that this possibility does exist, and part of the training of the fire and E.M.S. is to be observant and aware and to be on the look for suspicious activity and so forth.”

Other efforts have focused on educating civilians on the need to react quickly to danger. This year, many police departments began education efforts that urged anyone caught in a mass shooting to “run, hide or fight” instead of waiting for help.

After all, the people at the scene can often stand in for first responders before they arrive. “In Boston, you saw that the public didn’t run,” Dr. Jacobs said. “You need for the public to have the most education about how they can help to improve the survival results.”

here & NOW

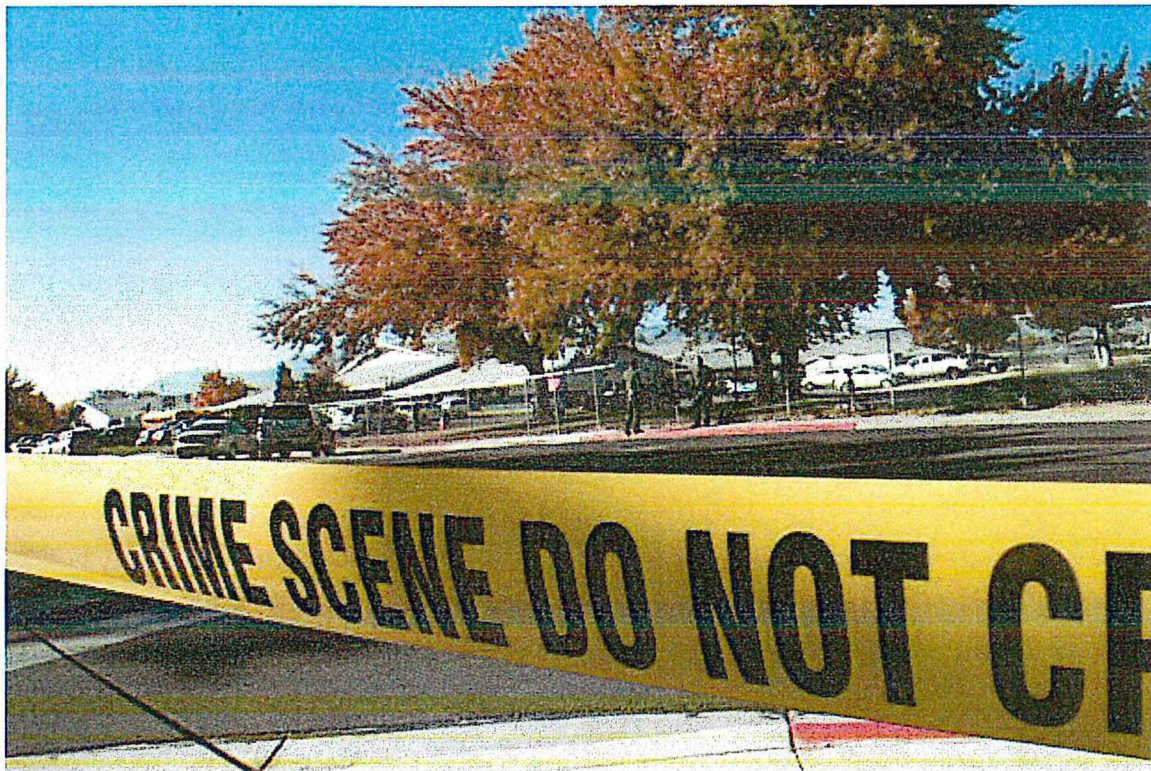
With Robin Young and Jeremy Hobson

Public Radio's Live Midday News Program



Friday, January 3, 2014

FEMA Recommends Paramedics Enter Active Situations



Police tape secures the scene after a shooting at Sparks Middle School October 21, 2013 in Sparks, Nevada. (David Calvert/Getty Images)

FEMA recently released new guidelines for medics in “warm zones”: situations like a mass shooting in which the shooter hasn’t yet been subdued.

FEMA’s advice to medics? Go in.

The long-held thinking has been to keep emergency personnel in the ambulance until the coast is clear.

But after the Columbine High School shooting in 1999 — when both police and medics waited for SWAT teams to clear the area — law enforcement officials decided police should act immediately to restrain the shooter.

And now, FEMA advises send the medics in as well, with helmets and flak jackets if possible. But the Emergency Medical Services in Reno, Nevada, have been sending their medics into warm zones even before FEMA's new guidelines.

Kevin Romero, the EMS director for Regional Emergency Medical Services Authority in Reno, told *Here & Now's* Robin Young that his department was motivated by Columbine to be more active.

However, Romero says not all EMS personnel are trained — nor should they be required to be — for these types of incidents.

At the Sparks Middle School shooting, Romero said one of his responders was a tactical paramedic who was trained to enter such a situation, but another wasn't. The paramedic

who wasn't trained for such a situation stayed behind and created a staging area.

“All EMS providers acknowledge that it doesn't matter if you're responding to a laceration or a domestic disturbance, all incidents are dangerous,” Romero said. “We need the properly trained paramedic — whether that's a paramedic that's trained in the active shooter, whether that's a paramedic who works with a bomb squad.”

When asked whether EMS who respond to such situations should carry firearms, Romero said he does not want EMS responders to also take up law enforcement roles.

“We want our EMS providers to concentrate on EMS,” Romero said. “We don't want them to be put in the position where they become law enforcement.”

- **Guest**
- **Kevin Romero**, the EMS director for Regional Emergency Medical Services Authority in Reno, Nevada.

Transcript

ROBIN YOUNG, HOST:

It's HERE AND NOW. FEMA recently released new guidelines for medics in so-called warm situations: mass shootings in which the gunman has not yet been subdued. The advice: go in. The long-held thinking has been to keep emergency personnel in the ambulance until the coast is clear, but after the Columbine shootings in 1999, when both police and medics waited for SWAT teams to clear the area, and victims bled to death, law enforcement officials decided police should act immediately to restrain the shooter, and now FEMA is saying send the medics in as well to stop the bleeding with helmets and flak jackets if possible.

Well, Reno, Nevada, has been doing this for a while. Kevin Romero is EMS director for REMSA, that's the Regional Emergency Medical Services Authority in Reno. We remember the October shooting at the middle school in Sparks, Nevada, a teacher killed, two children shot. And Kevin, do we understand within seven minutes of the first call, one of your paramedics arrived at the school with a bulletproof vest and helmet?

KEVIN ROMERO: Yeah, we've actually been training with the law enforcement agencies in Reno for about the past 15 years. And we have eight specially trained tactical paramedics that trained with the SWAT teams. And we had a lot of paramedics on duty that day, but it just so happened that one of the closest was one of those specially trained paramedics.

But our policy is to get the most properly trained paramedic to the right type of call with the right type of equipment. An active-shooter-type incident, we do get a paramedic inside of that incident who does have bulletproof vests and helmets and all the proper equipment to treat with inside of a warm or a hot zone.

YOUNG: This is the new recommendation. What was your EMS responder able to achieve that day?

ROMERO: Well, he was able to get on-scene within about four minutes and link up with some law enforcement people who he trains with and immediately gain access into the school and was able to go treat the wounded very quickly and then able to coordinate the ambulances that were staged out of the area by bringing them in one by one to transport those people out safely.

YOUNG: I mean, do you get the sense that in this case, as is being sad, your EMS responder saved lives?

ROMERO: Absolutely. There's no doubt. And, you know, the Columbine incident is one of the incidents that prompted us to start this type of program back in 1997.

YOUNG: Yeah, to stop bleeding. It would appear that the new proposal - and in fact a headline in the New York Times was new advice, let medics rush in. How do you feel about that broad stroke on it?

ROMERO: Rather than saying we need to just have the medics rush in, we need the properly trained paramedic. Whether that's a paramedic that's trained in the active shooter, whether that's a paramedic who works with the bomb squad and doing what our U.S. military does every day. You know, we really need to reach out and start looking at the fact that these types of incidents aren't going away, and how can we mitigate them better.

YOUNG: But you say so they should be properly trained. But should they be armed? I've been looking around on different blogs where firemen and EMS are talking about the new policy. Here's a post on one. They say it doesn't say hero on my paycheck, and when it does, it better come with a hefty raise. I understand the concept, but to send an unarmed EMS worker into an uncleared area to find out that maybe there could be dirty bombs or whatever behind door number one, that EMS person is going to become a target.

ROMERO: And we agree with that 100 percent. In the Sparks middle school shooting, there was a tactical paramedic trained on that ambulance, and there was another EMT provider on that ambulance

who wasn't trained. The tactically trained paramedic jumped out, and the other provider drove off to a staging area.

So to say on a broad spectrum that all paramedics need to rush into these different types of incident just doesn't make any sense. But to properly train them and send the right ones in with the right equipment, that makes sense.

YOUNG: But is part of that equipment a gun? Do you think EMS workers should be armed?

ROMERO: You know, it's our philosophy here in Reno, Nevada, that we want our EMS providers to concentrate on EMS. We don't want them put in a position where they become law enforcement, where they have to be posted up at the corner of a school. So we surround them with people that they train with, and they run multiple calls with these people, special weapons and tactics calls.

And they feel very comfortable that they're protected by those people.

YOUNG: Well in fact here's another response from somebody saying that they're an EMS worker. They say I'll do it. You know, my job is to care for people. And they make the point that you're going to be safer surrounded by these armed policemen wearing ballistic gear in a live shooting situation than you might be on that abdominal pain call with no fire department, no police department backing you up. We wouldn't be the target; the person with the guns would be.

However, this person also says I'd never ask my partner to do it. You know, I don't think it should be required that we do it, but I would want to do it.

ROMERO: Well, I think first and foremost all EMS providers acknowledge that it doesn't matter if you're responding to a laceration or a domestic disturbance. All incidents are dangerous, very similar to what you saw there in Boston. Medical providers rushed in to stop hemorrhage and provide quick care. But what that doesn't mean, it doesn't mean that all EMS providers need to be trained on what they can do to help in this type of incident.

YOUNG: You mentioned the bombings, and so I'm going to raise something that is touchy, from what I'm gathering reading on these blogs for EMS workers, because the fear is raised that an active shooter is one thing, but it's a terrible thing to say but that if it's known that EMS workers are going to rush into let's say bomb situations rather than hang back and wait for law enforcement to sweep an area and make sure that it's safe that we'll start seeing what we're seeing in other countries, that bombers will set something off, wait for the emergency personnel to arrive and then set something else off to target them.

ROMERO: And I think we've got the first step there, and that's the awareness and recognition that we know that can take place. And that's when heightened awareness of everybody, the general lay public, we need to be aware of that type of incident.

We had something very similar, not in nature, but it brought back a lot of memories for us, and that was the Reno air race crash. As our EMS providers watched the Boston bombings, we saw something very similar to the Reno air race crash, and that was the hemorrhaging and the loss of limbs. But the heightened awareness of knowing, as I watched that, knowing that everybody there was thinking the

same thing, let's get these people out of here as quick as possible, control the hemorrhage, but let's be aware of our surroundings.

And I think that was done great in Boston. And we're going to continue training our law enforcement on how to do a little bit of EMS side of things, as well, until we can get people in there.

YOUNG: How about pay? Is there going to be more pay for the EMS worker willing to take the greater risk?

ROMERO: We do have differential pay that we pay for people that are tactically trained or search and rescue trained. I will tell you that our tactically trained paramedics stopped doing that about three years ago and asked that that go into a fund rather than affect their pay, a fund for better equipment, things that they can utilize on those scenes. And they are very well equipped now.

The one thing that's very hard to do is bridge the gap between EMS and law enforcement when it comes to funding. You can't go out in a federal grant, an EMS agency, and get things like flak jackets and helmets. So that's one of the struggles that we've had, but we've been able to overcome and get some funding for those people.

YOUNG: Well, that's quite something that they would give up their own pay for that, but it sounds as if the federal government is changing its policy and recommendation, it needs to come up with the funding for that equipment that medics will now need.

ROMERO: Absolutely, absolutely, and flak jackets for the regular paramedics. Any shooting or stabbing, or if they're asked to go into that type of incident, having that available equipment is really important.

YOUNG: Kevin, thanks so much.

ROMERO: All right, take care.

YOUNG: Bye-bye.

ROMERO: Bye.

YOUNG: OK, so I'm still stuck on that, using their extra pay to pay for equipment. Medics, EMS workers, police, your thoughts on this new policy. Leave a comment with this story at hereandnow.org.
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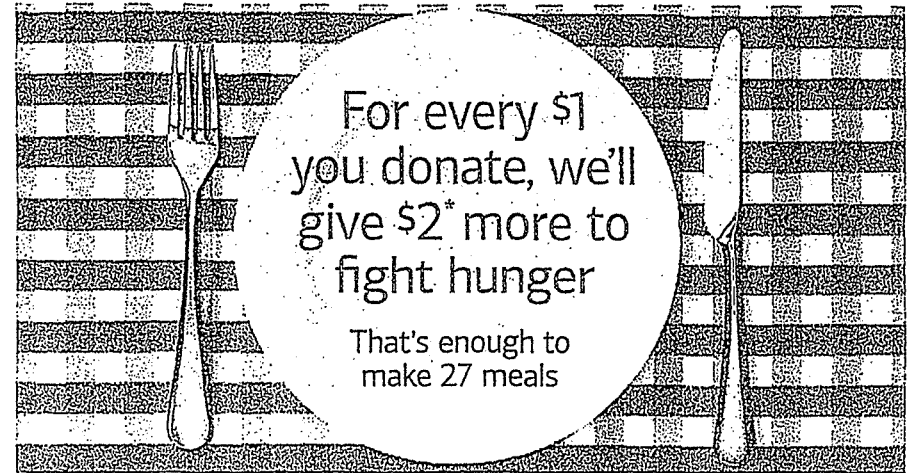
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Washoe County Health District



Public Health
Prevent. Promote. Protect.

January 8, 2014

To: Members District Board of Health

From: Eileen Stickney

Subject: Health Fund Revenue and Expenditure Report for December 2013
Agenda Item No. - 12

Recommendation

Staff recommends that the District Board of Health accept the attached report of revenues and expenditures for the Health Fund for December 2013 of fiscal year 14.

Background

The attached reports are for the accounting period 6/14 and the percentages should approximate 50% of the year. The total revenues and expenditures for the current year (FY14) compared to last year (FY13) are as follows:

DEC 2013	FY14 – REV	FY13 – REV	FY14 – EXP	FY13 – EXP
Overhead-GF			\$1,449,015.98 50%	\$1,276,686.00 50%
AHS	\$463,739.71 37%	\$454,384.98 37%	\$1,189,338.79 46%	\$1,236,822.15 48%
AQM	\$1,374,377.62 58%	\$1,199,266.81 54%	\$1,011,131.36 39%	\$1,158,612.75 40%
CCHS	\$751,661.16 31%	\$741,841.33 30%	\$2,180,348.57 45%	\$2,338,496.39 47%
EHS	\$676,572.43 34%	\$656,102.60 37%	\$2,487,479.71 44%	\$2,504,031.04 43%
EPHP	\$661,741.90 37%	\$700,350.90 38%	\$956,522.90 42%	\$994,027.77 42%
Adjustments				
TOTAL	\$3,928,092.82 40%	\$3,751,946.62 39%	\$9,273,838.31 44%	\$9,508,676.11 45%
GF Transfer	\$2,867,963.68 33%	\$1,437,316.00 17%		

The Environmental Oversight Account balance for December is \$108,321.37.

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

Eileen Stickney
Administrative Health Services Officer
Enclosure

Washoe County Health District
REVENUE EXPENSE
Pds 1-6, FY14

Accounts	2014 Plan	2014 Actuals	Balance	Act%	2013 Plan	2013 Actual	Balance	Act%
422503 Environmental Permits	63,177.00-	30,646.00-	32,531.00-	49	51,500.00-	26,082.00-	25,418.00-	51
422504 Pool Permits	74,690.00-	19,086.00-	55,604.00-	26	68,000.00-	12,619.00-	55,381.00-	19
422505 RV Permits	13,306.00-	6,585.00-	6,721.00-	49	10,500.00-	5,811.00-	4,689.00-	55
422507 Food Service Permits	492,181.00-	212,866.00-	279,315.00-	43	369,000.00-	187,234.00-	181,766.00-	51
422508 Wat Well Const Perm	23,567.00-	18,466.00-	5,101.00-	78	20,000.00-	13,077.00-	6,923.00-	65
422509 Water Company Permits	3,200.00-	3,543.00-	343.00	111	2,500.00-	1,002.00-	1,498.00-	40
422510 Air Pollution Permits	584,012.00-	265,174.25-	318,837.75-	45	448,037.00-	232,909.25-	215,127.75-	52
422511 ISDS Permits	66,522.00-	47,051.00-	19,471.00-	71	49,000.00-	26,944.00-	22,056.00-	55
422513 Special Event Permits	99,623.00-	48,312.00-	51,311.00-	48	79,000.00-	38,150.00-	40,850.00-	48
422514 Initial Applic Fee	35,226.00-	17,150.00-	18,076.00-	49	27,000.00-	13,246.00-	13,754.00-	49
* Licenses and Permits	1,455,504.00-	668,879.25-	786,624.75-	46	1,124,537.00-	557,074.25-	567,462.75-	50
431100 Federal Grants	5,317,857.05-	1,696,711.78-	3,621,145.27-	32	5,860,619.51-	2,044,249.82-	3,816,369.69-	35
431105 Federal Grants - Indirect	243,178.41-	131,238.15-	111,940.26-	54	125,376.00-	34,667.94-	90,708.06-	28
432100 State Grants	427,421.00-	202,813.03-	224,607.97-	47	281,857.00-	213,559.97-	68,297.03-	76
432105 State Grants-Indirect	2,205.00-	682.00-	1,523.00-	31				
432310 Tire Fee NRS 444A.090	468,548.00-	76,483.40-	392,064.60-	16	418,766.00-	115,359.18-	303,406.82-	28
432311 Pol Ctrl 445B.830	300,000.00-	479,374.67-	179,374.67	160	300,000.00-	162,040.00-	137,960.00-	54
* Intergovernmental	6,759,209.46-	2,587,303.03-	4,171,906.43-	38	6,986,618.51-	2,569,876.91-	4,416,741.60-	37
460162 Services to Other Agencies								
460500 Other Immunizations	89,000.00-	25,780.07-	63,219.93-	29	89,000.00-	33,647.00-	55,353.00-	38
460501 Medicaid Clinical Services	8,200.00-	1,677.50-	6,522.50-	20	36,200.00-	44.46	36,244.46-	0-
460503 Childhood Immunizations	20,000.00-	8,392.50-	11,607.50-	42	30,000.00-	9,436.00-	20,564.00-	31
460508 Tuberculosis	4,100.00-	2,656.31-	1,443.69-	65	4,100.00-	2,635.45-	1,464.55-	64
460509 Water Quality								
460510 IT Overlay	35,344.00-	18,114.00-	17,230.00-	51	113,400.00-	56,944.00-	56,456.00-	50
460511 Birth and Death Certificates	450,000.00-	215,810.00-	234,190.00-	48	400,000.00-	220,012.00-	179,988.00-	55
460512 Duplication Service Fees		702.34-	702.34			237.78-	237.78	
460513 Other Healt Service Charges		206.00-	206.00		2,700.00-	2,577.00-	123.00-	95
460514 Food Service Certification	19,984.00-	9,881.00-	10,103.00-	49	13,900.00-	8,229.00-	5,671.00-	59
460515 Medicare Reimbursement								
460516 Pgm Inc-3rd Prty Rec	1,750.00-	18,725.23-	16,975.23	1,070	2,250.00-		2,250.00-	
460517 Influenza Immunization	7,000.00-	2,148.75-	4,851.25-	31	7,000.00-	3,056.00-	3,944.00-	44
460518 STD Fees	21,000.00-	9,846.89-	11,153.11-	47	23,000.00-	11,460.55-	11,539.45-	50
460519 Outpatient Services								
460520 Eng Serv Health	50,707.00-	25,903.00-	24,804.00-	51	44,000.00-	15,359.00-	28,641.00-	35
460521 Plan Review - Pools & Spas	3,816.00-	2,966.00-	850.00-	78	2,500.00-	879.00-	1,621.00-	35
460523 Plan Review - Food Services	18,765.00-	10,345.00-	8,420.00-	55	17,000.00-	12,407.00-	4,593.00-	73
460524 Family Planning	27,000.00-	17,222.10-	9,777.90-	64	44,000.00-	14,699.83-	29,300.17-	33
460525 Plan Review - Vector	36,021.00-	27,606.00-	8,415.00-	77	30,000.00-	18,894.00-	11,106.00-	63
460526 Plan Review-Air Quality	65,272.00-	15,573.00-	49,699.00-	24	40,000.00-	18,651.00-	21,349.00-	47
460527 NOE-AQM	113,934.00-	62,380.00-	51,554.00-	55	100,000.00-	47,476.00-	52,524.00-	47
460528 NESHAP-AQM	135,389.00-	33,020.00-	102,369.00-	24	84,000.00-	35,156.00-	48,844.00-	42
460529 Assessments-AQM	57,888.00-	22,568.00-	35,320.00-	39	41,000.00-	23,117.00-	17,883.00-	56
460530 Inspector Registr-AQ	14,655.00-	2,113.00-	12,542.00-	14	2,600.00-	2,838.00-	238.00	109
460531 Dust Plan-Air Quality	187,690.00-	70,047.00-	117,643.00-	37	95,000.00-	53,677.00-	41,323.00-	57
460532 Plan Rvw Hotel/Motel						322.00-	322.00	
460533 Quick Start								
460534 Child Care Inspection	10,560.00-	4,264.00-	6,296.00-	40	8,500.00-	4,134.00-	4,366.00-	49
460535 Pub Accomod Inspectn	22,540.00-	9,484.00-	13,056.00-	42	17,300.00-	7,266.00-	10,034.00-	42

Washoe County Health District
REVENUE EXPENSE
Pds 1-6, FY14

Accounts	2014 Plan	2014 Actuals	Balance	Act%	2013 Plan	2013 Actual	Balance	Act%
710319 Chemical Supplies	232,300.00	187,892.33	44,407.67	81	231,950.00	232,079.07	129.07-	100
710325 Signs and Markers								
710334 Copy Machine Expense	27,597.00	12,110.82	15,486.18	44	28,274.89	10,407.18	17,867.71	37
710350 Office Supplies	43,073.50	16,653.52	26,419.98	39	44,171.01	17,047.54	27,123.47	39
710355 Books and Subscriptions	7,919.00	3,535.61	4,383.39	45	8,413.00	1,904.20	6,508.80	23
710360 Postage	21,855.00	7,660.17	14,194.83	35	21,954.00	7,751.92	14,202.08	35
710361 Express and Courier	685.00	85.03	599.97	12	610.75	356.53	254.22	58
710391 Fuel & Lube	100.00		100.00		100.00		100.00	
710400 Payments to Other Agencies								
710412 Do Not Use								
710500 Other Expense	25,681.96	8,636.26	17,045.70	34	45,973.51	16,359.04	29,614.47	36
710502 Printing	33,770.00	6,712.13	27,057.87	20	31,499.00	8,838.96	22,660.04	28
710503 Licenses & Permits	7,887.00	1,140.00	6,747.00	14	8,870.00	5,672.39	3,197.61	64
710504 Registration								
710505 Rental Equipment	2,027.00		2,027.00		5,178.00	919.00	4,259.00	18
710506 Dept Insurance Deductible		183.86	183.86-			302.58	302.58-	
710507 Network and Data Lines	5,530.00	4,705.65	824.35	85	6,486.00	5,120.94	1,365.06	79
710508 Telephone Land Lines	43,434.00	17,399.08	26,034.92	40	46,535.00	18,682.54	27,852.46	40
710509 Seminars and Meetings	32,565.00	12,618.18	19,946.82	39	32,320.00	12,090.50	20,229.50	37
710512 Auto Expense	18,802.20	5,969.03	12,833.17	32	19,784.00	6,844.17	12,939.83	35
710514 Regulatory Assessments	11,920.00	5,960.00	5,960.00	50	11,920.00	8,940.00	2,980.00	75
710519 Cellular Phone	15,660.00	5,720.84	9,939.16	37	18,447.00	5,048.43	13,398.57	27
710524 Utility relocation		200.00	200.00-					
710529 Dues	10,791.01	2,095.00	8,696.01	19	11,926.00	5,486.00	6,440.00	46
710535 Credit Card Fees	11,925.00	5,518.64	6,406.36	46	11,455.00	5,472.87	5,982.13	48
710546 Advertising	45,070.00	10,898.00	34,172.00	24	44,728.86	39,623.71	5,105.15	89
710550 Small Differences								
710551 Cash Discounts Lost		36.23	36.23-					
710577 Uniforms & Special Clothing	25,500.00	2,979.21	22,520.79	12	3,000.00	2,297.83	702.17	77
710585 Undesignated Budget	62,228.75		62,228.75		71,077.00		71,077.00	
710600 LT Lease-Office Space	109,115.00	43,698.56	65,416.44	40	113,439.00	56,115.87	57,323.13	49
710620 LT Lease-Equipment								
710703 Biologicals	246,790.79	111,231.23	135,559.56	45	249,583.98	103,652.20	145,931.78	42
710714 Referral Services	6,328.00		6,328.00		9,040.00		9,040.00	
710721 Outpatient	93,092.55	27,792.71	65,299.84	30	110,399.15	33,118.99	77,280.16	30
710872 Food Purchases	10,975.50	344.34	10,631.16	3	11,675.00	2,592.07	9,082.93	22
711010 Utilities					2,700.00		2,700.00	
711100 ESD Asset Management	47,436.00	24,790.00	22,646.00	52	17,040.00	8,352.00	8,688.00	49
711113 Equip Srv Replace	27,084.14	13,803.60	13,280.54	51	25,938.64	13,542.10	12,396.54	52
711114 Equip Srv O & M	46,894.56	22,973.72	23,920.84	49	42,163.13	21,614.86	20,548.27	51
711115 Equip Srv Motor Pool	16,741.00		16,741.00		18,346.00		18,346.00	
711117 ESD Fuel Charge	55,492.05	23,534.29	31,957.76	42	51,253.35	28,789.89	22,463.46	56
711119 Prop & Liab Billings	74,502.09	37,251.18	37,250.91	50	80,283.41	40,141.68	40,141.73	50
711210 Travel	229,135.03	39,059.83	190,075.20	17	251,954.25	30,116.49	221,837.76	12
711300 Cash Over Short		20.00	20.00-					
711399 ProCard in Process								
711400 Overhead - General Fund	2,898,034.00	1,449,016.98	1,449,017.02	50	2,553,372.00	1,276,686.00	1,276,686.00	50
711504 Equipment nonCapital	111,948.36	61,608.69	50,339.67	55	155,955.08	100,424.24	55,530.84	64
* Services and Supplies	6,144,026.35	2,473,426.94	3,670,599.41	40	5,897,250.85	2,501,852.68	3,395,398.17	42

Washoe County Health District
REVENUE EXPENSE
Pds 1-6, FY14

Accounts	2014 Plan	2014 Actuals	Balance	Act%	2013 Plan	2013 Actual	Balance	Act%
781004 Equipment Capital	231,954.82	66,468.47	165,486.35	29	397,107.01	96,589.40	300,517.61	24
781007 Vehicles Capital	100,000.00		100,000.00					
* Capital Outlay	331,954.82	66,468.47	265,486.35	20	397,107.01	96,589.40	300,517.61	24
** Expenses	20,850,923.01	9,273,838.31	11,577,084.70	44	21,142,496.28	9,508,676.11	11,633,820.17	45
485193 Surplus Supplies Sales		626.40-	626.40					
485196 Insur Reimb-F/A Loss						150.00-	150.00	
* Other Fin. Sources		626.40-	626.40			150.00-	150.00	
621001 Transfer From General	8,603,891.00-	2,867,963.68-	5,735,927.32-	33	8,623,891.00-	1,437,316.00-	7,186,575.00-	17
* Transfers In	8,603,891.00-	2,867,963.68-	5,735,927.32-	33	8,623,891.00-	1,437,316.00-	7,186,575.00-	17
811001 Transfer to General								
818000 Transfer to Intrafund								
* Transfers Out								
** Other Financing Src/Use	8,603,891.00-	2,868,590.08-	5,735,300.92-	33	8,623,891.00-	1,437,466.00-	7,186,425.00-	17
*** Total	2,435,636.44	2,477,155.41	41,518.97-	102	2,997,615.77	4,319,263.49	1,321,647.72-	144

Washoe County Health District
Administrative Health Services
Pds 1-6, FY14

Accounts	2014 Plan	2014 Actuals	Balance	Act%	2013 Plan	2013 Actual	Balance	Act%
431100 Federal Grants	1,109,048.06-	416,160.64-	692,887.42-	38	1,109,658.25-	454,379.98-	655,278.27-	41
431105 Federal Grants - Indirect	1,921.50-	15,302.71-	13,381.21	796				
* Intergovernmental	1,110,969.56-	431,463.35-	679,506.21-	39	1,109,658.25-	454,379.98-	655,278.27-	41
460511 Birth and Death Certificates								
460512 Duplication Service Fees						5.00-	5.00	
* Charges for Services						5.00-	5.00	
484195 Non-Gov't'l Grants	88,263.36-	32,276.36-	55,987.00-	37	114,750.00-		114,750.00-	
484197 Non-Gov. Grants-Indirect	5,125.00-		5,125.00-					
485100 Reimbursements								
485300 Other Misc Govt Rev	62,228.75-		62,228.75-					
* Miscellaneous	155,617.11-	32,276.36-	123,340.75-	21	114,750.00-		114,750.00-	
** Revenue	1,266,586.67-	463,739.71-	802,846.96-	37	1,224,408.25-	454,384.98-	770,023.27-	37
701110 Base Salaries	1,610,653.89	754,348.58	856,305.31	47	1,620,335.85	775,976.98	844,358.87	48
701120 Part Time								
701130 Pooled Positions	5,000.00	4,710.88	289.12	94	5,000.00	8,696.97	3,696.97-	174
701140 Holiday Work								
701200 Incentive Longevity	33,265.00	15,355.04	17,909.96	46	30,755.00	15,107.67	15,647.33	49
701300 Overtime	1,200.00	2,120.23	920.23-	177	1,200.00	1,402.99	202.99-	117
701412 Salary Adjustment	3,642.80		3,642.80		10,554.54		10,554.54	
701413 Vac Payoff/Sick Pay-Term						3,173.40	3,173.40-	
701417 Comp Time		2,865.79	2,865.79-			18.92	18.92-	
701419 Comp Time - Transfer		1,885.60	1,885.60-					
701500 Merit Awards								
* Salaries and Wages	1,653,761.69	781,286.12	872,475.57	47	1,667,845.39	804,376.93	863,468.46	48
705110 Group Insurance	258,484.26	124,522.20	133,962.06	48	254,302.59	122,817.35	131,485.24	48
705210 Retirement	421,998.67	192,881.04	229,117.63	46	384,397.43	187,838.57	196,558.86	49
705215 Retirement Calculation								
705230 Medicare April 1986	22,856.87	10,679.94	12,176.93	47	22,639.74	11,131.28	11,508.46	49
705320 Workmens Comp	11,691.26	5,845.68	5,845.58	50	11,339.00	5,669.52	5,669.48	50
705330 Unemply Comp	2,683.24	2,683.24		100	2,755.00	2,755.00		100
705510 Severance Pay								
* Employee Benefits	717,714.30	336,612.10	381,102.20	47	675,433.76	330,211.72	345,222.04	49
710100 Professional Services	36,743.00	15,510.00	21,233.00	42	45,500.00	30,348.98	15,151.02	67
710105 Medical Services	150.00	81.00	69.00	54	350.00	26.00	324.00	7
710108 MD Consultants								
710110 Contracted/Temp Services		1,577.00	1,577.00-					
710200 Service Contract	500.00	2.30	497.70	0	1,500.00		1,500.00	
710205 Repairs and Maintenance	200.00	147.50	52.50	74	400.00	147.16	252.84	37
710300 Operating Supplies	9,397.00	4,221.39	5,175.61	45	9,100.00	3,516.04	5,583.96	39
710312 Special Dept Expense								
710334 Copy Machine Expense	3,500.00	3,022.20	477.80	86	4,500.00	2,279.18	2,220.82	51
710350 Office Supplies	10,963.50	3,986.28	6,977.22	36	9,993.00	4,161.15	5,831.85	42
710355 Books and Subscriptions	1,000.00	1,129.98	129.98-	113	1,000.00	383.44	616.56	38
710360 Postage	1,680.00	406.32	1,273.68	24	1,625.00	519.73	1,105.27	32
710361 Express and Courier	100.00	15.00	85.00	15	100.00	35.22	64.78	35
710500 Other Expense	1,600.00	428.75	1,171.25	27	1,600.00	615.60	984.40	38
710502 Printing	4,480.00	217.87	4,262.13	5	4,780.00	313.88	4,466.12	7
710503 Licenses & Permits	1,992.00	300.00	1,692.00	15	2,340.00	446.00	1,894.00	19
710507 Network and Data Lines	630.00	278.80	351.20	44	630.00	192.20	437.80	31

Washoe County Health District
Administrative Health Services
Pds 1-6, FY14

Accounts	2014 Plan	2014 Actuals	Balance	Act%	2013 Plan	2013 Actual	Balance	Act%
710508 Telephone Land Lines	9,580.00	3,515.47	6,064.53	37	10,080.00	3,989.42	6,090.58	40
710509 Seminars and Meetings	2,800.00	951.50	1,848.50	34	5,300.00	1,578.50	3,721.50	30
710512 Auto Expense	2,336.00	540.57	1,795.43	23	3,336.00	1,351.34	1,984.66	41
710519 Cellular Phone	1,520.00	217.05	1,302.95	14	1,470.00	671.88	798.12	46
710529 Dues	4,030.02	225.00	3,805.02	6	2,850.00	3,255.00	405.00-	114
710546 Advertising	150.00		150.00		150.00		150.00	
710551 Cash Discounts Lost								
710585 Undesignated Budget								
710600 LT Lease-Office Space	67,464.00	23,276.56	44,187.44	35	71,788.00	35,895.87	35,892.13	50
710872 Food Purchases	2,725.50		2,725.50		2,725.00		2,725.00	
711010 Utilities					1,000.00		1,000.00	
711100 ESD Asset Management								
711114 Equip Srv O & M								
711115 Equip Srv Motor Pool								
711117 ESD Fuel Charge								
711119 Prop & Liab Billings	13,169.78	6,584.88	6,584.90	50	14,239.00	7,119.54	7,119.46	50
711210 Travel	36,428.55	4,785.15	31,643.40	13	41,165.00	2,622.33	38,542.67	6
711300 Cash Over Short		20.00	20.00-					
711504 Equipment nonCapital	3,456.01		3,456.01		4,275.00	2,765.05	1,509.95	65
* Services and Supplies	216,595.36	71,440.57	145,154.79	33	241,796.00	102,233.51	139,562.49	42
** Expenses	2,588,071.35	1,189,338.79	1,398,732.56	46	2,585,075.15	1,236,822.16	1,348,252.99	48
485193 Surplus Supplies Sales		626.40-	626.40					
* Other Fin. Sources		626.40-	626.40					
818000 Transfer to Intrafund								
* Transfers Out								
** Other Financing Src/Use		626.40-	626.40					
*** Total	1,321,484.68	724,972.68	596,512.00	55	1,360,666.90	782,437.18	578,229.72	58

Washoe County Health District
Air Quality Management
Pds 1-6, FY14

Accounts	2014 Plan	2014 Actuals	Balance	Act%	2013 Plan	2013 Actual	Balance	Act%
422510 Air Pollution Permits	584,012.00-	265,174.25-	318,837.75-	45	448,037.00-	232,909.25-	215,127.75-	52
* Licenses and Permits	584,012.00-	265,174.25-	318,837.75-	45	448,037.00-	232,909.25-	215,127.75-	52
431100 Federal Grants	708,173.00-	199,751.85-	508,421.15-	28	912,531.00-	434,678.96-	477,652.04-	48
431105 Federal Grants - Indirect	29,372.00-	42,089.85-	12,717.85	143	30,224.00-	6,509.04-	23,714.96-	22
432100 State Grants	182,000.00-	182,000.00-		100	182,000.00-	182,000.00-		100
432311 Pol Ctrl 445B.830	300,000.00-	479,374.67-	179,374.67	160	300,000.00-	162,040.00-	137,960.00-	54
* Intergovernmental	1,219,545.00-	903,216.37-	316,328.63-	74	1,424,755.00-	785,428.00-	639,327.00-	55
460513 Other Health Service Charges		206.00-	206.00					
460526 Plan Review-Air Quality	65,272.00-	15,573.00-	49,699.00-	24	40,000.00-	18,651.00-	21,349.00-	47
460527 NOE-AQM	113,934.00-	62,380.00-	51,554.00-	55	100,000.00-	47,476.00-	52,524.00-	47
460528 NESHAP-AQM	135,389.00-	33,020.00-	102,369.00-	24	84,000.00-	35,156.00-	48,844.00-	42
460529 Assessments-AQM	57,888.00-	22,568.00-	35,320.00-	39	41,000.00-	23,117.00-	17,883.00-	56
460530 Inspector Registr-AQ	14,655.00-	2,113.00-	12,542.00-	14	2,600.00-	2,838.00-	238.00-	109
460531 Dust Plan-Air Quality	187,690.00-	70,047.00-	117,643.00-	37	95,000.00-	53,677.00-	41,323.00-	57
* Charges for Services	574,828.00-	205,907.00-	368,921.00-	36	362,600.00-	180,915.00-	181,685.00-	50
485121 Jury Reimbursements		80.00-	80.00					
485300 Other Misc Govt Rev						14.56-	14.56	
* Miscellaneous		80.00-	80.00			14.56-	14.56	
** Revenue	2,378,385.00-	1,374,377.62-	1,004,007.38-	58	2,235,392.00-	1,199,266.81-	1,036,125.19-	54
701110 Base Salaries	1,275,216.35	586,493.44	688,722.91	46	1,345,462.49	620,076.20	725,386.29	46
701130 Pooled Positions	17,646.29	3,940.00	13,706.29	22	93,151.68	5,170.08	87,981.60	6
701140 Holiday Work	418.65		418.65		250.00	140.18	109.82	56
701150 xcContractual Wages								
701200 Incentive Longevity	20,530.00	9,708.40	10,821.60	47	19,210.00	9,449.98	9,760.02	49
701300 Overtime	3,400.00	968.53	2,431.47	28	10,045.11	2,267.37	7,777.74	23
701408 Call Back								
701412 Salary Adjustment								
701413 Vac Payoff/Sick Pay-Term		14,339.59	14,339.59-			2,023.44	2,023.44-	
701417 Comp Time		91.08	91.08-			918.38	918.38-	
701500 Merit Awards								
* Salaries and Wages	1,317,211.29	615,541.04	701,670.25	47	1,468,119.28	640,045.63	828,073.65	44
705110 Group Insurance	176,696.79	84,303.90	92,392.89	48	172,127.11	79,667.74	92,459.37	46
705210 Retirement	332,632.51	151,599.89	181,032.62	46	324,109.95	149,427.47	174,682.48	46
705230 Medicare April 1986	18,136.32	8,527.80	9,608.52	47	19,385.69	8,947.40	10,438.29	46
705320 Workmens Comp	8,275.26	4,137.66	4,137.60	50	7,585.40	3,792.72	3,792.68	50
705330 Unemply Comp	1,899.24	1,899.28	0.04-	100	1,843.00	1,843.00		100
* Employee Benefits	537,640.12	250,468.53	287,171.59	47	525,051.15	243,678.33	281,372.82	46
710100 Professional Services	396,190.26	16,392.74	379,797.52	4	385,103.78	56,417.86	328,685.92	15
710105 Medical Services	1,525.00	1,265.50	259.50	83	1,416.00	1,098.00	318.00	78
710200 Service Contract	1,600.00	99.44	1,500.56	6	500.00	90.07	409.93	18
710205 Repairs and Maintenance	1,000.00	1,977.40	977.40-	198	10,741.91	2,427.96	8,313.95	23
710210 Software Maintenance	3,386.00	3,530.00	144.00-	104	4,200.00	4,170.00	30.00	99
710300 Operating Supplies	1,000.00	4,157.83	3,157.83-	416	11,079.55	12,868.06	1,788.51-	116
710334 Copy Machine Expense	4,400.00	1,898.86	2,501.14	43	4,400.00	1,202.95	3,197.05	27
710350 Office Supplies	3,500.00	1,750.00	1,750.00	50	4,000.00	1,568.26	2,431.74	39
710355 Books and Subscriptions	100.00	288.03	188.03-	288	224.00	334.13	110.13-	149
710360 Postage	3,000.00	1,622.22	1,377.78	54	2,900.00	1,398.04	1,501.96	48
710361 Express and Courier	75.00	16.47	58.53	22	80.75	203.10	122.35-	252
710500 Other Expense	100.00	1,404.10	1,304.10-	1,404	100.00	118.85	18.85-	119

Washoe County Health District
Air Quality Management
Pds 1-6, FY14

Accounts	2014 Plan	2014 Actuals	Balance	Act%	2013 Plan	2013 Actual	Balance	Act%
710502 Printing	800.00	466.74	333.26	58	800.00	672.16	127.84	84
710503 Licenses & Permits					135.00	232.39	97.39-	172
710505 Rental Equipment	1,800.00		1,800.00		1,800.00		1,800.00	
710506 Dept Insurance Deductible		33.86	33.86-					
710507 Network and Data Lines		2,400.00	2,400.00-			2,755.00	2,755.00-	
710508 Telephone Land Lines	5,500.00	1,779.31	3,720.69	32	6,500.00	2,146.25	4,353.75	33
710509 Seminars and Meetings		3,004.98	3,004.98-		3,005.00	1,814.00	1,191.00	60
710512 Auto Expense	500.00	181.95	318.05	36	1,000.00	226.46	773.54	23
710519 Cellular Phone	4,700.00	1,535.67	3,164.33	33	4,700.00	1,358.24	3,341.76	29
710529 Dues	3,250.00	375.00	2,875.00	12	4,435.00	740.00	3,695.00	17
710535 Credit Card Fees	2,300.00	1,421.27	878.73	62	1,600.00	1,174.48	425.52	73
710546 Advertising	1,650.00	1,143.00	507.00	69	1,000.00	10,616.00	9,616.00-	1,062
710550 Small Differences								
710577 Uniforms & Special Clothing	100.00	2,979.21	2,879.21-	2,979	1,100.00	1,247.97	147.97-	113
710585 Undesignated Budget	25,879.62		25,879.62					
710600 LT Lease-Office Space								
710721 Outpatient								
711100 ESD Asset Management	6,432.00	4,020.00	2,412.00	63	2,592.00	1,296.00	1,296.00	50
711113 Equip Srv Replace	9,523.78	4,762.68	4,761.10	50	8,499.58	4,761.90	3,737.68	56
711114 Equip Srv O & M	11,981.33	6,012.40	5,968.93	50	10,384.74	4,494.65	5,890.09	43
711115 Equip Srv Motor Pool								
711117 ESD Fuel Charge	12,156.58	4,755.81	7,400.77	39	10,687.05	5,521.78	5,165.27	52
711119 Prop & Liab Billings	9,321.78	4,660.92	4,660.86	50	9,525.40	4,762.68	4,762.72	50
711210 Travel	34,419.48	5,735.17	28,684.31	17	36,088.25	8,266.82	27,821.43	23
711300 Cash Over Short								
711399 ProCard in Process								
711504 Equipment nonCapital	11,800.35	7,614.01	4,186.34	65	37,117.08	45,665.33	8,548.25-	123
* Services and Supplies	557,991.18	87,284.57	470,706.61	16	565,715.09	179,649.39	386,065.70	32
781004 Equipment Capital	151,576.82	57,837.22	93,739.60	38	342,770.01	95,239.40	247,530.61	28
* Capital Outlay	151,576.82	57,837.22	93,739.60	38	342,770.01	95,239.40	247,530.61	28
** Expenses	2,564,419.41	1,011,131.36	1,553,288.05	39	2,901,655.53	1,158,612.75	1,743,042.78	40
818000 Transfer to Intrafund								
** Other Financing Src/Use								
*** Total	186,034.41	363,246.26-	549,280.67	195-	666,263.53	40,654.06-	706,917.59	6-

Washoe County Health District
Community and Clinical Health Services
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Accounts	2014 Plan	2014 Actuals	Balance	Act%	2013 Plan	2013 Actual	Balance	Act%
431100 Federal Grants	1,890,000.86-	606,651.34-	1,283,349.52-	32	2,131,855.53-	627,939.87-	1,503,915.66-	29
431105 Federal Grants - Indirect	92,460.00-	30,239.95-	62,220.05-	33	15,300.00-	4,853.37-	10,446.63-	32
432100 State Grants	195,421.00-	8,313.03-	187,107.97-	4	24,857.00-	12,559.97-	12,297.03-	51
432105 State Grants-Indirect	2,205.00-	682.00-	1,523.00-	31				
* Intergovernmental	2,180,086.86-	645,886.32-	1,534,200.54-	30	2,172,012.53-	645,353.21-	1,526,659.32-	30
460162 Services to Other Agencies								
460500 Other Immunizations	89,000.00-	25,780.07-	63,219.93-	29	89,000.00-	33,647.00-	55,353.00-	38
460501 Medicaid Clinical Services	8,200.00-	1,677.50-	6,522.50-	20	36,200.00-	44.46	36,244.46-	0-
460503 Childhood Immunizations	20,000.00-	8,392.50-	11,607.50-	42	30,000.00-	9,436.00-	20,564.00-	31
460508 Tuberculosis	4,100.00-	2,656.31-	1,443.69-	65	4,100.00-	2,635.45-	1,464.55-	64
460512 Duplication Service Fees		45.00-	45.00					
460515 Medicare Reimbursement								
460516 Pgm Inc-3rd Prty Rec	1,750.00-	18,725.23-	16,975.23	1,070	2,250.00-		2,250.00-	
460517 Influenza Immunization	7,000.00-	2,148.75-	4,851.25-	31	7,000.00-	3,056.00-	3,944.00-	44
460518 STD Fees	21,000.00-	9,846.89-	11,153.11-	47	23,000.00-	11,460.55-	11,539.45-	50
460519 Outpatient Services								
460524 Family Planning	27,000.00-	17,222.10-	9,777.90-	64	44,000.00-	14,699.83-	29,300.17-	33
460570 Education Revenue	2,400.00-	540.00-	1,860.00-	23	4,500.00-	649.77-	3,850.23-	14
* Charges for Services	180,450.00-	87,034.35-	93,415.65-	48	240,050.00-	75,540.14-	164,509.86-	31
484050 Donations Federal Pgm Income	37,550.00-	18,725.49-	18,824.51-	50	41,934.00-	20,012.65-	21,921.35-	48
484195 Non-Govt'l Grants								
485110 Workers Comp Reimb						907.44-	907.44	
485300 Other Misc Govt Rev		15.00-	15.00			27.89-	27.89	
* Miscellaneous	37,550.00-	18,740.49-	18,809.51-	50	41,934.00-	20,947.98-	20,986.02-	50
** Revenue	2,398,086.86-	751,661.16-	1,646,425.70-	31	2,453,996.53-	741,841.33-	1,712,155.20-	30
701110 Base Salaries	2,046,242.25	968,811.47	1,077,430.78	47	2,237,201.94	1,021,674.67	1,215,527.27	46
701120 Part Time	541,787.10	197,171.60	344,615.50	36	505,752.32	253,611.10	252,141.22	50
701130 Pooled Positions	233,706.33	146,525.68	87,180.65	63	175,944.41	109,129.24	66,815.17	62
701140 Holiday Work		256.62	256.62-			108.90	108.90-	
701150 xcContractual Wages								
701200 Incentive Longevity	47,486.00	26,766.56	20,719.44	56	48,012.00	29,881.92	18,130.08	62
701300 Overtime	1,280.00	487.95	792.05	38	1,280.00	397.56	882.44	31
701403 Shift Differential								
701406 Standby Pay		100.00-	100.00					
701412 Salary Adjustment	34,459.06-		34,459.06-		75.00-		75.00-	
701413 Vac Payoff/Sick Pay-Term						7,190.33	7,190.33-	
701415 Physical Fitness Pay								
701417 Comp Time						7,057.58	7,057.58-	
701419 Comp Time - Transfer						9,723.83	9,723.83-	
701500 Merit Awards								
* Salaries and Wages	2,836,042.62	1,339,919.88	1,496,122.74	47	2,968,115.67	1,438,775.13	1,529,340.54	48
705110 Group Insurance	414,555.78	181,076.48	233,479.30	44	433,968.28	202,815.29	231,152.99	47
705210 Retirement	651,180.47	305,161.13	346,019.34	47	658,011.56	309,635.02	348,376.54	47
705230 Medicare April 1986	35,230.23	17,504.45	17,725.78	50	36,909.75	18,826.39	18,083.36	51
705320 Workmens Comp	19,765.83	9,455.88	10,309.95	48	18,435.65	9,217.80	9,217.85	50
705330 Unemply Comp	4,536.42	4,340.52	195.90	96	4,479.25	4,479.25		100
* Employee Benefits	1,125,268.73	517,538.46	607,730.27	46	1,151,804.49	544,973.75	606,830.74	47
710100 Professional Services	204,547.00	36,810.65	167,736.35	18	75,150.71	39,309.19	35,841.52	52

Washoe County Health District
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Accounts	2014 Plan	2014 Actuals	Balance	Act%	2013 Plan	2013 Actual	Balance	Act%
710105 Medical Services	850.00	208.50	641.50	25	850.00	394.50	455.50	46
710108 MD Consultants	46,950.00	17,300.00	29,650.00	37	46,900.00	21,787.50	25,112.50	46
710110 Contracted/Temp Services	1,000.00	8,028.09	7,028.09-	803	1,000.00	3,779.00	2,779.00-	378
710119 Subrecipient Payments								
710200 Service Contract	3,798.00	2,515.40	1,282.60	66	6,048.00	2,653.46	3,394.54	44
710205 Repairs and Maintenance	3,770.00	2,235.66	1,534.34	59	3,800.00	387.50	3,412.50	10
710210 Software Maintenance								
710300 Operating Supplies	75,502.00	19,267.64	56,234.36	26	76,719.00	42,361.44	34,357.56	55
710334 Copy Machine Expense	14,797.00	5,160.01	9,636.99	35	13,847.00	5,101.95	8,745.05	37
710350 Office Supplies	12,760.00	2,820.00	9,940.00	22	13,520.01	6,715.15	6,804.86	50
710355 Books and Subscriptions	2,250.00	629.70	1,620.30	28	2,060.00	718.73	1,341.27	35
710360 Postage	3,675.00	1,213.51	2,461.49	33	4,490.00	1,395.00	3,095.00	31
710361 Express and Courier	335.00	47.88	287.12	14	245.00	83.40	161.60	34
710412 Do Not Use								
710500 Other Expense	15,595.96	6,654.41	8,941.55	43	30,602.51	15,466.79	15,135.72	51
710502 Printing	13,700.00	2,709.54	10,990.46	20	9,675.00	7,092.35	2,582.65	73
710503 Licenses & Permits	3,055.00	615.00	2,440.00	20	3,555.00	2,914.00	641.00	82
710504 Registration								
710505 Rental Equipment								
710506 Dept Insurance Deductible						152.58	152.58-	
710507 Network and Data Lines	2,080.00	886.04	1,193.96	43	2,560.00	1,414.86	1,145.14	55
710508 Telephone Land Lines	13,354.00	5,934.74	7,419.26	44	13,975.00	6,029.02	7,945.98	43
710509 Seminars and Meetings	5,650.00	3,059.70	2,590.30	54	4,750.00	3,147.00	1,603.00	66
710512 Auto Expense	13,966.20	4,579.22	9,386.98	33	13,318.00	4,409.64	8,908.36	33
710519 Cellular Phone	360.00	563.45	203.45-	157	540.00	72.65	467.35	13
710524 Utility relocation		200.00	200.00-					
710529 Dues	800.00	1,050.00	250.00-	131	1,350.00	749.00	601.00	55
710535 Credit Card Fees	3,215.00	888.56	2,326.44	28	3,245.00	1,129.70	2,115.30	35
710546 Advertising	30,145.00	9,755.00	20,390.00	32	34,903.86	29,007.71	5,896.15	83
710551 Cash Discounts Lost		9.58	9.58-					
710577 Uniforms & Special Clothing	200.00		200.00		200.00		200.00	
710585 Undesignated Budget					15,300.00		15,300.00	
710703 Biologicals	243,370.00	110,759.03	132,610.97	46	246,163.19	103,652.20	142,510.99	42
710714 Referral Services	6,328.00		6,328.00		9,040.00		9,040.00	
710721 Outpatient	90,957.55	26,929.35	64,028.20	30	108,264.15	31,872.75	76,391.40	29
710872 Food Purchases	6,450.00	344.34	6,105.66	5	6,550.00	2,421.23	4,128.77	37
711010 Utilities					1,700.00		1,700.00	
711100 ESD Asset Management	1,608.00	670.00	938.00	42	288.00	144.00	144.00	50
711114 Equip Srv O & M	546.37	1,247.88	701.51-	228	550.44	330.74	219.70	60
711115 Equip Srv Motor Pool								
711117 ESD Fuel Charge	711.35	396.79	314.56	56	711.35	374.16	337.19	53
711119 Prop & Liab Billings	21,303.49	10,651.80	10,651.69	50	23,150.65	11,575.26	11,575.39	50
711210 Travel	33,713.00	12,141.85	21,571.15	36	28,184.00	5,353.16	22,830.84	19
711399 ProCard in Process								
711504 Equipment nonCapital	5,950.00	17,975.66	12,025.66-	302	6,530.00	1,401.89	5,128.11	21
* Services and Supplies	883,292.92	314,258.98	569,033.94	36	809,735.87	353,397.51	456,338.36	44
781004 Equipment Capital	30,378.00	8,631.25	21,746.75	28	17,000.00	1,350.00	15,650.00	8
* Capital Outlay	30,378.00	8,631.25	21,746.75	28	17,000.00	1,350.00	15,650.00	8

Washoe County Health District
 Community and Clinical Health Services
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Accounts	2014 Plan	2014 Actuals	Balance	Act%	2013 Plan	2013 Actual	Balance	Act%
** Expenses	4,874,982.27	2,180,348.57	2,694,633.70	45	4,946,656.03	2,338,496.39	2,608,159.64	47
811001 Transfer to General								
818000 Transfer to Intrafund								
** Other Financing Src/Use								
*** Total	2,476,895.41	1,428,687.41	1,048,208.00	58	2,492,659.50	1,596,655.06	896,004.44	64

Washoe County Health District
Environmental Health Services
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Accounts	2014 Plan	2014 Actuals	Balance	Act%	2013 Plan	2013 Actual	Balance	Act%
422503 Environmental Permits	63,177.00-	30,646.00-	32,531.00-	49	51,500.00-	26,082.00-	25,418.00-	51
422504 Pool Permits	74,690.00-	19,086.00-	55,604.00-	26	68,000.00-	12,619.00-	55,381.00-	19
422505 RV Permits	13,306.00-	6,585.00-	6,721.00-	49	10,500.00-	5,811.00-	4,689.00-	55
422507 Food Service Permits	492,181.00-	212,866.00-	279,315.00-	43	369,000.00-	187,234.00-	181,766.00-	51
422508 Wat Well Const Perm	23,567.00-	18,466.00-	5,101.00-	78	20,000.00-	13,077.00-	6,923.00-	65
422509 Water Company Permits	3,200.00-	3,543.00-	343.00	111	2,500.00-	1,002.00-	1,498.00-	40
422511 ISDS Permits	66,522.00-	47,051.00-	19,471.00-	71	49,000.00-	26,944.00-	22,056.00-	55
422513 Special Event Permits	99,623.00-	48,312.00-	51,311.00-	48	79,000.00-	38,150.00-	40,850.00-	48
422514 Initial Applic Fee	35,226.00-	17,150.00-	18,076.00-	49	27,000.00-	13,246.00-	13,754.00-	49
* Licenses and Permits	871,492.00-	403,705.00-	467,787.00-	46	676,500.00-	324,165.00-	352,335.00-	48
431100 Federal Grants	362,198.04-	69,251.44-	292,946.60-	19	340,000.00-	70,017.64-	269,982.36-	21
431105 Federal Grants - Indirect	27,470.00-	2,570.25-	24,899.75-	9				
432100 State Grants	50,000.00-	12,500.00-	37,500.00-	25	75,000.00-	19,000.00-	56,000.00-	25
432310 Tire Fee NRS 444A.090	468,548.00-	76,483.40-	392,064.60-	16	418,766.00-	115,359.18-	303,406.82-	28
* Intergovernmental	908,216.04-	160,805.09-	747,410.95-	18	833,766.00-	204,376.82-	629,389.18-	25
460509 Water Quality								
460510 IT Overlay	35,344.00-	18,114.00-	17,230.00-	51	113,400.00-	56,944.00-	56,456.00-	50
460512 Duplication Service Fees		657.34-	657.34			232.78-	232.78	
460513 Other Healt Service Charges					2,700.00-	2,577.00-	123.00-	95
460514 Food Service Certification	19,984.00-	9,881.00-	10,103.00-	49	13,900.00-	8,229.00-	5,671.00-	59
460520 Eng Serv Health	50,707.00-	25,903.00-	24,804.00-	51	44,000.00-	15,359.00-	28,641.00-	35
460521 Plan Review - Pools & Spas	3,816.00-	2,966.00-	850.00-	78	2,500.00-	879.00-	1,621.00-	35
460523 Plan Review - Food Services	18,765.00-	10,345.00-	8,420.00-	55	17,000.00-	12,407.00-	4,593.00-	73
460525 Plan Review - Vector	36,021.00-	27,606.00-	8,415.00-	77	30,000.00-	18,894.00-	11,106.00-	63
460532 Plan Rww Hotel/Motel						322.00-	322.00	
460533 Quick Start								
460534 Child Care Inspection	10,560.00-	4,264.00-	6,296.00-	40	8,500.00-	4,134.00-	4,366.00-	49
460535 Pub Accomod Inspectn	22,540.00-	9,484.00-	13,056.00-	42	17,300.00-	7,266.00-	10,034.00-	42
460570 Education Revenue	500.00-	342.00-	158.00-	68	1,200.00-	182.00-	1,018.00-	15
* Charges for Services	198,237.00-	109,562.34-	88,674.66-	55	250,500.00-	127,425.78-	123,074.22-	51
485100 Reimbursements								
485121 Jury Reimbursements						135.00-	135.00	
485300 Other Misc Govt Rev		2,500.00-	2,500.00					
* Miscellaneous		2,500.00-	2,500.00			135.00-	135.00	
** Revenue	1,977,945.04-	676,572.43-	1,301,372.61-	34	1,760,766.00-	656,102.60-	1,104,663.40-	37
701110 Base Salaries	2,975,071.19	1,357,326.57	1,617,744.62	46	3,018,372.82	1,400,191.62	1,618,181.20	46
701130 Pooled Positions	200,194.04	60,323.79	139,870.25	30	236,872.77	57,228.91	179,643.86	24
701140 Holiday Work	2,400.00	2,566.56	166.56-	107	1,200.00	1,001.05	198.95	83
701150 xcContractual Wages								
701200 Incentive Longevity	50,500.00	23,700.00	26,800.00	47	50,800.00	23,788.46	27,011.54	47
701300 Overtime	59,123.00	25,592.91	33,530.09	43	36,600.00	17,597.37	19,002.63	48
701406 Standby Pay								
701408 Call Back	1,000.00		1,000.00		1,000.00	182.10	817.90	18
701412 Salary Adjustment	199,268.34-		199,268.34-					
701413 Vac Payoff/Sick Pay-Term						16,198.28	16,198.28-	
701415 Physical Fitness Pay								
701417 Comp Time						9,525.60	9,525.60-	
701500 Merit Awards								
* Salaries and Wages	3,089,019.89	1,469,509.83	1,619,510.06	48	3,344,845.59	1,525,713.39	1,819,132.20	46

Washoe County Health District
Environmental Health Services
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Accounts	2014 Plan	2014 Actuals	Balance	Act%	2013 Plan	2013 Actual	Balance	Act%
705110 Group Insurance	411,488.13	197,634.72	213,853.41	48	434,110.13	200,949.97	233,160.16	46
705210 Retirement	776,699.80	353,917.76	422,782.04	46	728,879.94	338,116.88	390,763.06	46
705230 Medicare April 1986	41,720.32	19,845.22	21,875.10	48	41,940.99	20,369.67	21,571.32	49
705320 Workmens Comp	19,168.03	9,584.04	9,583.99	50	18,838.38	9,419.22	9,419.16	50
705330 Unemply Comp	4,399.22	4,399.24	0.02-	100	4,577.10	4,577.10		100
* Employee Benefits	1,253,475.50	585,380.98	668,094.52	47	1,228,346.54	573,432.84	654,913.70	47
710100 Professional Services	217,318.30	13,701.25	203,617.05	6	325,401.67	6,233.20	319,168.47	2
710105 Medical Services	6,548.00	1,870.00	4,678.00	29	6,548.00	110.00	6,438.00	2
710110 Contracted/Temp Services	35,000.03	5,056.42	29,943.61	14	65,000.00	4,904.68	60,095.32	8
710200 Service Contract	95,300.00	38,533.27	56,766.73	40	95,300.00	31,726.86	63,573.14	33
710205 Repairs and Maintenance	5,500.00	494.54	5,005.46	9	4,600.00	229.00	4,371.00	5
710210 Software Maintenance	250.00		250.00					
710300 Operating Supplies	25,650.00	20,751.06	4,898.94	81	20,100.00	4,499.93	15,600.07	22
710302 Small Tools & Allow	10,685.00	229.96	10,455.04	2	3,685.00		3,685.00	
710308 Animal Supplies	1,600.00	582.75	1,017.25	36	2,000.00	343.91	1,656.09	17
710319 Chemical Supplies	232,300.00	187,892.33	44,407.67	81	231,950.00	232,079.07	129.07-	100
710325 Signs and Markers								
710334 Copy Machine Expense	1,900.00	733.50	1,166.50	39	2,250.00	713.26	1,536.74	32
710350 Office Supplies	6,250.00	5,386.69	863.31	86	9,100.00	2,399.17	6,700.83	26
710355 Books and Subscriptions	2,100.00	580.00	1,520.00	28	2,400.00	244.00	2,156.00	10
710360 Postage	10,600.00	3,473.39	7,126.61	33	9,775.00	3,346.98	6,428.02	34
710361 Express and Courier	175.00	5.68	169.32	3	175.00		175.00	
710391 Fuel & Lube	100.00		100.00		100.00		100.00	
710500 Other Expense	200.00	49.00	151.00	25	8,300.00	157.80	8,142.20	2
710502 Printing	12,600.00	1,011.35	11,588.65	8	11,525.00	577.73	10,947.27	5
710503 Licenses & Permits	2,690.00	225.00	2,465.00	8	2,690.00	2,080.00	610.00	77
710505 Rental Equipment								
710506 Dept Insurance Deductible		150.00	150.00-			150.00	150.00-	
710507 Network and Data Lines	2,220.00	684.72	1,535.28	31	2,500.00	576.60	1,923.40	23
710508 Telephone Land Lines	8,960.00	3,980.86	4,979.14	44	9,710.00	4,353.95	5,356.05	45
710509 Seminars and Meetings	16,515.00	3,852.00	12,663.00	23	13,415.00	1,494.00	11,921.00	11
710512 Auto Expense	50.00		50.00		100.00	29.69	70.31	30
710514 Regulatory Assessments	11,920.00	5,960.00	5,960.00	50	11,920.00	8,940.00	2,980.00	75
710519 Cellular Phone	6,600.00	1,906.72	4,693.28	29	6,600.00	1,971.23	4,628.77	30
710529 Dues	1,565.99	445.00	1,120.99	28	1,661.00	382.00	1,279.00	23
710535 Credit Card Fees	4,410.00	2,364.37	2,045.63	54	4,610.00	2,193.16	2,416.84	48
710546 Advertising	10,500.00		10,500.00		6,050.00		6,050.00	
710551 Cash Discounts Lost		26.65	26.65-					
710577 Uniforms & Special Clothing	25,200.00		25,200.00		1,700.00	1,049.86	650.14	62
710585 Undesignated Budget	36,349.13		36,349.13					
710600 LT Lease-Office Space	41,651.00	20,422.00	21,229.00	49	41,651.00	20,220.00	21,431.00	49
710721 Outpatient								
711100 ESD Asset Management	32,964.00	15,276.00	17,688.00	46	11,856.00	5,760.00	6,096.00	49
711113 Equip Srv Replace	17,182.42	8,851.92	8,330.50	52	17,061.11	8,591.20	8,469.91	50
711114 Equip Srv O & M	32,731.24	15,552.14	17,179.10	48	30,573.49	16,070.91	14,502.58	53
711115 Equip Srv Motor Pool	16,741.00		16,741.00		16,741.00		16,741.00	
711117 ESD Fuel Charge	42,624.12	18,381.69	24,242.43	43	39,776.37	22,879.39	16,896.98	58
711119 Prop & Liab Billings	21,592.09	10,796.04	10,796.05	50	23,656.38	11,828.22	11,828.16	50
711210 Travel	76,000.00	13,921.96	62,078.04	18	81,150.00	7,355.89	73,794.11	9

Washoe County Health District
Environmental Health Services
Pds 1-6, FY14

Accounts	2014 Plan	2014 Actuals	Balance	Act%	2013 Plan	2013 Actual	Balance	Act%
711399 ProCard in Process								
711504 Equipment nonCapital	89,242.00	29,440.64	59,801.36	33	62,544.00	1,393.12	61,150.88	2
* Services and Supplies	1,161,784.32	432,588.90	729,195.42	37	1,184,175.02	404,884.81	779,290.21	34
781004 Equipment Capital	50,000.00		50,000.00		25,000.00		25,000.00	
781007 Vehicles Capital	100,000.00		100,000.00					
* Capital Outlay	150,000.00		150,000.00		25,000.00		25,000.00	
** Expenses	5,654,279.71	2,487,479.71	3,166,800.00	44	5,782,367.15	2,504,031.04	3,278,336.11	43
485196 Insur Reimb-F/A Loss						150.00-	150.00	
* Other Fin. Sources						150.00-	150.00	
621001 Transfer From General								
* Transfers In								
818000 Transfer to Intrafund								
* Transfers Out								
** Other Financing Src/Use						150.00-	150.00	
*** Total	3,676,334.67	1,810,907.28	1,865,427.39	49	4,021,601.15	1,847,778.44	2,173,822.71	46

Washoe County Health District
Epidemiology Public Health Preparedness
Pds 1-6, FY14

Accounts	2014 Plan	2014 Actuals	Balance	Act%	2013 Plan	2013 Actual	Balance	Act%
431100 Federal Grants	1,248,437.09-	404,896.51-	843,540.58-	32	1,366,574.73-	457,033.37-	909,541.36-	33
431105 Federal Grants - Indirect	91,954.91-	41,035.39-	50,919.52-	45	79,852.00-	23,305.53-	56,546.47-	29
* Intergovernmental	1,340,392.00-	445,931.90-	894,460.10-	33	1,446,426.73-	480,338.90-	966,087.83-	33
460511 Birth and Death Certificates	450,000.00-	215,810.00-	234,190.00-	48	400,000.00-	220,012.00-	179,988.00-	55
* Charges for Services	450,000.00-	215,810.00-	234,190.00-	48	400,000.00-	220,012.00-	179,988.00-	55
** Revenue	1,790,392.00-	661,741.90-	1,128,650.10-	37	1,846,426.73-	700,350.90-	1,146,075.83-	38
701110 Base Salaries	1,277,745.42	569,050.84	708,694.58	45	1,220,854.27	553,845.04	667,009.23	45
701120 Part Time	24,152.57	6,330.46	17,822.11	26	24,152.57	12,043.74	12,108.83	50
701130 Pooled Positions	4,855.00	9,326.79	4,471.79-	192	11,330.00	16,349.35	5,019.35-	144
701140 Holiday Work						46.38	46.38-	
701150 xcContractual Wages								
701200 Incentive Longevity	13,622.00	6,217.09	7,404.91	46	9,515.00	6,193.11	3,321.89	65
701300 Overtime	1,700.00	2,765.51	1,065.51-	163	1,200.00	588.10	611.90	49
701412 Salary Adjustment	18,982.00		18,982.00		42,507.00		42,507.00	
701413 Vac Payoff/Sick Pay-Term		9,410.57	9,410.57-					
701417 Comp Time		167.14	167.14-					
701500 Merit Awards								
* Salaries and Wages	1,341,056.99	603,268.40	737,788.59	45	1,309,558.84	589,065.72	720,493.12	45
705110 Group Insurance	157,102.63	73,040.01	84,062.62	46	154,680.99	73,239.32	81,441.67	47
705210 Retirement	331,395.85	147,050.67	184,345.18	44	314,726.17	132,938.90	181,787.27	42
705230 Medicare April 1986	18,701.48	8,423.96	10,277.52	45	19,086.47	8,036.21	11,050.26	42
705320 Workmens Comp	8,091.65	4,045.80	4,045.85	50	7,988.98	3,867.06	4,121.92	48
705330 Unemply Comp	1,857.10	1,857.12	0.02-	100	1,879.10	1,879.10		100
705360 Benefit Adjustment	13,398.00-		13,398.00-		10,656.00		10,656.00	
* Employee Benefits	503,750.71	234,417.56	269,333.15	47	509,017.71	219,960.59	289,057.12	43
710100 Professional Services	227,310.27	59,454.45	167,855.82	26	260,648.22	86,667.14	173,981.08	33
710105 Medical Services	100.00		100.00		100.00	109.00	9.00-	109
710108 MD Consultants								
710110 Contracted/Temp Services	42,309.00	9,046.58	33,262.42	21	5,051.00	6,369.28	1,318.28-	126
710200 Service Contract	2,395.00	3,103.61	708.61-	130	1,895.00	2,665.50	770.50-	141
710205 Repairs and Maintenance	500.00	75.00	425.00	15	1,008.00		1,008.00	
710210 Software Maintenance	12,000.00	12,000.00		100	12,000.00	9,750.00	2,250.00	81
710300 Operating Supplies	13,562.00	634.71-	14,196.71	5-	15,739.00	69.67	15,669.33	0
710334 Copy Machine Expense	3,000.00	1,296.25	1,703.75	43	3,277.89	1,109.84	2,168.05	34
710350 Office Supplies	9,600.00	2,710.55	6,889.45	28	7,558.00	2,203.81	5,354.19	29
710355 Books and Subscriptions	2,469.00	907.90	1,561.10	37	2,729.00	223.90	2,505.10	8
710360 Postage	2,900.00	944.73	1,955.27	33	3,164.00	1,092.17	2,071.83	35
710361 Express and Courier					10.00	34.81	24.81-	348
710500 Other Expense	8,186.00	100.00	8,086.00	1	5,371.00		5,371.00	
710502 Printing	2,190.00	2,306.63	116.63-	105	4,719.00	182.84	4,536.16	4
710503 Licenses & Permits	150.00		150.00		150.00		150.00	
710505 Rental Equipment	227.00		227.00		3,378.00	919.00	2,459.00	27
710506 Dept Insurance Deductible								
710507 Network and Data Lines	600.00	456.09	143.91	76	796.00	182.28	613.72	23
710508 Telephone Land Lines	6,040.00	2,188.70	3,851.30	36	6,270.00	2,163.90	4,106.10	35
710509 Seminars and Meetings	7,600.00	1,750.00	5,850.00	23	5,850.00	4,057.00	1,793.00	69
710512 Auto Expense	1,950.00	667.29	1,282.71	34	2,030.00	827.04	1,202.96	41
710519 Cellular Phone	2,480.00	1,497.95	982.05	60	5,137.00	974.43	4,162.57	19
710529 Dues	1,145.00		1,145.00		1,630.00	360.00	1,270.00	22

Washoe County Health District
Epdemiology Public Health Preparedness
Pds 1-6, FY14

Accounts	2014 Plan	2014 Actuals	Balance	Act%	2013 Plan	2013 Actual	Balance	Act%
710535 Credit Card Fees	2,000.00	844.44	1,155.56	42	2,000.00	975.53	1,024.47	49
710546 Advertising	2,625.00		2,625.00		2,625.00		2,625.00	
710585 Undesignated Budget					55,777.00		55,777.00	
710620 LT Lease-Equipment								
710703 Biologicals	3,420.79	472.20	2,948.59	14	3,420.79		3,420.79	
710721 Outpatient	2,135.00	863.36	1,271.64	40	2,135.00	1,246.24	888.76	58
710872 Food Purchases	1,800.00		1,800.00		2,400.00	170.84	2,229.16	7
711010 Utilities								
711100 ESD Asset Management	6,432.00	4,824.00	1,608.00	75	2,304.00	1,152.00	1,152.00	50
711113 Equip Srv Replace	377.94	189.00	188.94	50	377.95	189.00	188.95	50
711114 Equip Srv O & M	1,635.62	161.30	1,474.32	10	654.46	718.56	64.10	110
711115 Equip Srv Motor Pool					1,605.00		1,605.00	
711117 ESD Fuel Charge					78.58	14.56	64.02	19
711119 Prop & Liab Billings	9,114.95	4,557.54	4,557.41	50	9,711.98	4,855.98	4,856.00	50
711210 Travel	48,574.00	2,475.70	46,098.30	5	65,367.00	6,518.29	58,848.71	10
711504 Equipment nonCapital	1,500.00	6,578.38	5,078.38	439	45,489.00	49,198.85	3,709.85	108
* Services and Supplies	426,328.57	118,836.94	307,491.63	28	542,456.87	185,001.46	357,455.41	34
781004 Equipment Capital					12,337.00		12,337.00	
* Capital Outlay					12,337.00		12,337.00	
** Expenses	2,271,136.27	956,522.90	1,314,613.37	42	2,373,370.42	994,027.77	1,379,342.65	42
818000 Transfer to Intrafund								
** Other Financing Src/Use								
*** Total	480,744.27	294,781.00	185,963.27	61	526,943.69	293,676.87	233,266.82	56

Washoe County Health District
 Undesignated
 Pds 1-6, FY14

Accounts	2014 Plan	2014 Actuals	Balance	Act%	2013 Plan	2013 Actual	Balance	Act%
710400 Payments to Other Agencies								
711400 Overhead - General Fund	2,898,034.00	1,449,016.98	1,449,017.02	50	2,553,372.00	1,276,686.00	1,276,686.00	50
** Expenses	2,898,034.00	1,449,016.98	1,449,017.02	50	2,553,372.00	1,276,686.00	1,276,686.00	50
621001 Transfer From General	8,603,891.00-	2,867,963.68-	5,735,927.32-	33	8,623,891.00-	1,437,316.00-	7,186,575.00-	17
* Transfers In	8,603,891.00-	2,867,963.68-	5,735,927.32-	33	8,623,891.00-	1,437,316.00-	7,186,575.00-	17
818000 Transfer to Intrafund								
* Transfers Out								
** Other Financing Src/Use	8,603,891.00-	2,867,963.68-	5,735,927.32-	33	8,623,891.00-	1,437,316.00-	7,186,575.00-	17
*** Total	5,705,857.00-	1,418,946.70-	4,286,910.30-	25	6,070,519.00-	160,630.00-	5,909,889.00-	3

Washoe County Health District
 Miscellaneous
 Pds 1-6, FY14

Accounts	2014 Plan	2014 Actuals	Balance	Act%	2013 Plan	2013 Actual	Balance	Act%
710551 Cash Discounts Lost						19.95	19.95-	
*** Total						19.95	19.95-	



Washoe County Health District



Public Health
Prevent. Promote. Protect.

January 8, 2014

TO: District Board of Health

FROM: Eileen Stickney

SUBJECT: Fiscal Year 2015 Budget Kick-off, Calendar and Update

On January 6, 2014, Administrative Health Services staff held a budget kick-off meeting for the Division Directors, supervisors and key program staff. Topics addressed included, 1) the basics - what is a budget, why have a budget, and what is their role with budgets, 2) the tools – financial guiding principles, Board of County Commissioners Policy, and a glossary of budget acronyms and terms, and 3) the process- budget development, implementation and amendment. Staff understands that the budget is one of the most important documents we prepare since it is the connection between policy and services to be provided to the public and how those services are to be financed. The sixteen attendees in the increased their knowledge of budgeting and received the FY15 Budget Calendar (attached).

Administrative Health Services staff will meet with Division Directors and Program staff starting January 22, 2014 to review projected revenues and expenditures for the remainder of the FY 14 and FY15.

On March 6, 2014, the proposed FY 15 budget will be presented to the District Board of Health to review and adopt a tentative budget.

We will keep the Board of Health updated on budget issues to ensure that the Board is well informed and has adequate input.


Administrative Health Services Office

Attachment

Washoe County - FY14 and FY15 Financial Planning / Budget Process Calendar

Fiscal Year 2013-2014 (FY14)

- November to December 2013:
 - Budget staff work with departments on current year impacts and changes
 - Update Senior Management on estimates and General Fund sources/uses
- January to February 2014, if required, BCC item for FY14 budget adjustments and augmentations

Budget Planning for Fiscal Year 2014/2015 (FY15)

Capital Improvement Plan (CIP) for Fiscal Year 2015-2019

- November - December: Departments develop, prioritize and submit requests
- January - February: Subject matter experts review, prepare cost estimates, prioritize
- March - April: Senior Management reviews, prioritizes, determines funding for projects
- May - CIP plan goes to the BCC for approval

Operating Budget for FY15

- October – December: Finance works with departments to estimate the year end for FY14 and develop an initial funding level for FY15
- January
 - County Manager's budget message to the Department Heads
 - Detailed technical calendar distributed; SAP budget system opened
 - Jan-28 BCC update and status report on FY15
- February
 - State provides preliminary revenue projections
 - Departments finalize budget requests
 - Performance measures due - detail to follow
- March
 - State provides final revenue projections for property taxes
 - BCC update and status report on FY15 budget
- April
 - Department budget presentations to the BCC
 - April-15 tentative budget submitted to Department of Taxation
- May
 - May-13 BCC meeting: Managers recommendations for FY15 budget and approval of the Washoe County Capital Improvement Plan
 - May-19 public hearing and BCC approval
- June
 - BCC adopted FY15 budget due to the State Department of Taxation

*Note: Calendars, forms and other information on intranet site (Flipside):
Finance/Forms and Information / FY15 Budget*



Washoe County Health District




Public Health
Prevent. Promote. Protect.

STAFF REPORT BOARD MEETING DATE: January 23, 2014

DATE: January 13, 2014

TO: District Board of Health

FROM:  Christina Conti, Public Health Emergency Response Coordinator, Washoe County Health District, 775-326-6042, cconti@washoecounty.us

THROUGH:  Dr. Randall Todd, Division Director, Epidemiology and Public Health Preparedness 775-328-2443, rtodd@washoecounty.us

SUBJECT: Approval of proposed changes to the District Board of Health's Suggested Guidelines for Emergency Medical Services (EMS) Coverage for Mass Gatherings.

SUMMARY

The Washoe County District Board of Health must review and approve the suggested guidelines for Emergency Medical Services (EMS) Coverage for Mass Gatherings.

District Board of Health Priority supported by this item: Be assured that the public health system operates at the highest level of integrity during an all hazards event.

BCC Strategic Objective supported by this item: Safe, secure and healthy communities.

PREVIOUS ACTION

The Washoe County District Board of Health approved updates to the Suggested Guidelines for Emergency Medical Services (EMS) Coverage for Mass Gatherings with an effective date of October 26, 2006.

The District Board of Health adopted Suggested Guidelines for Emergency Medical Services (EMS) Coverage for Mass Gatherings, effective January 23, 1991.

BACKGROUND

During the 77th Session of the Nevada Legislature, AB 286 was introduced to further the legal responsibilities of host organizations relating to certain special events. These changes were

AGENDA ITEM # _____

made to NRS 450B.690, NRS 450B.695 and NRS 450B.470. The specific changes to NRS 450B.690 became effective January 1, 2014.

The current revision of the suggested mass gathering guidelines incorporates the specific language and parameters outlined within the law, along with the name to “Washoe County Health District”, and the term “or more” to the algorithm.

FISCAL IMPACT

Should the District Board of Health approve the proposed changes to the District Board of Health’s Suggested Guidelines for Emergency Medical Services (EMS) Coverage for Mass Gatherings, there will not be a fiscal impact to the adopted FY14 budget.

RECOMMENDATION

Staff recommends that the District Board of Health approve the proposed changes to the District Board of Health’s Suggested Guidelines for Emergency Medical Services (EMS) Coverage for Mass Gatherings with an implementation date of January 23, 2014; and if approved, authorize the Chairman to execute.

POSSIBLE MOTION

Should the Board agree with staff’s recommendations, a possible motion would be: :Move to approve the proposed changes to the District Board of Health’s Suggested Guidelines for Emergency Medical Services (EMS) Coverage for Mass Gatherings with an implementation date of January 23, 2014; and authorize the Chairman to execute .”

Attachment

WASHOE COUNTY DISTRICT BOARD OF HEALTH POLICY

Effective date: 1/23/91

Revision dates: 10/26/06, 1/23/14



I. SUBJECT

Suggested Guidelines for Emergency Medical Services (EMS) Coverage for Mass Gatherings

II. POLICY

The following provisions are suggested guidelines and are meant for advisory purposes only. They do not create any entitlement or right for the benefit of third parties.

The Health District recommends that each political jurisdiction evaluate the factors listed below and make recommendations based upon, but not limited to, the following references:

1. Hanna, J.A., 1995. *Emergency Preparedness Guidelines for Mass, Crowd Intensive Events*. Emergency Preparedness Canada.
2. American College of Emergency Physicians, 1995-96. *ACEP EMS Committee: Provision of Emergency Medical Care for Crowds*. Dallas, Texas.
3. Milsten, A.M., et al, 2002. Mass-Gathering Medical Care: A Review of the Literature. *Prehospital and Disaster Medicine*, 17(3), 151-162.
4. Arbon, P., 2004. The Development of Conceptual Models for Mass-Gathering Health. *Prehospital and Disaster Medicine*, 19(3), 208-212.
5. Federal Emergency Management Agency, 2005. *Special Events Contingency Planning Job Aids Manual*. Washington, D.C.
6. San Francisco Emergency Medical Services Agency, 2007. *Emergency Medical Services at Mass Gatherings & Special Events*, Policy Reference No. 7010.
7. NATIONAL FIRE PROTECTION ASSOCIATION, 2006. NFPA 450. Quincy: National Fire Protection Association.
8. NRS 450B.690 (effective January 1, 2014), NRS 450B.695 and NRS 450B.700
9. Other published resources that may provide assistance or guidelines for EMS at mass gathering events.

A mass gathering may be defined as a situation or event during which crowds gather and there is a potential for a delayed response to emergencies because of limited access or other features of the environment or location.

The general guideline for any mass gathering event larger than 2500 people per day is access to an Advanced Life Support (ALS) ambulance within eight (8) minutes or one (1) dedicated ALS ambulance, and on-scene medical personnel of various levels suitably equipped, which may vary depending on the factors evaluated. Other factors should be considered which are based on published standards and are identified to be important to provision of EMS coverage at a specific event. The minimum factors to be considered that may increase medical risks or demands for health care are listed below.

An EMS Coverage Analysis Flow Chart (Appendix A) is attached to provide a guideline for the appropriate EMS coverage, and is based on a review of the current literature regarding EMS at mass gatherings. The flow chart is based on both the size of an event and variables that may result in an increased need for medical care for an event of 2500 people or more. For events less than 2500, it is recommended that the local ambulance provider

be provided information on ingress/egress plans and traffic issues that may result from the event. This allows the ambulance provider to plan for and monitor impacts of the event on the EMS system, while continuing to maintain rapid responses to patients throughout the community.

The producer or organizer of the special event may be requested to supply all the required information #1 through #5 below.

ALL EVENTS SHOULD BE REVIEWED FOR:

1. Event Title and Description of Activities to Occur:
 - A. Date(s) and times(s) of event and duration
 - B. Location (indoor vs. outdoor activities)
 - C. Expected number of event personnel, participants and spectators
 - D. Weather extremes or other environmental factors, high risk participant activities, terrain, or other hazards identified in the event hazard analysis
 - E. Crowd movement (contained or mobile) and crowd density
 - F. Site map indicating entrances/exits, seating and isles/walkways, etc.
 - G. Availability of alcohol at the event
 - H. Audience composition (ages)
 - I. Any anticipated increase in chronic medical conditions of attendees due to the type of event

2. Medical/EMS Services to be Utilized:
 - A. Name(s) of medical or fire-based EMS organization(s) providing service
 - B. Level of coverage (Basic Life Support/Advanced Life Support), number of medical personnel on-site, and name of responsible contact person for medical coverage
 - C. Location of Medical Aid Stations(s) and/or Medical Command Post
 - D. Name(s) of the on-scene EMS Coordinator/Manager/Person in charge
 - E. Identification method for visibility of EMS personnel
 - F. EMS/911 Communication methods to include activation of the EMS system, radio frequencies utilized and method of communication between on-site personnel
 - G. Ingress/egress route(s) for EMS vehicles
 - H. Distribution of resources to provide responses of on-scene medical personnel within four to five minutes to any part of the event
 - I. Location of nearest acute care hospital
 - J. Anticipated injuries/illnesses based on past events
 - K. List of on-scene medical equipment and supplies available for medical providers

3. Medical Record Keeping Method at Event to Include:
 - A. Number of patients treated on scene
 - B. Number of patients known to have been transported to a medical facility by private vehicle, ambulance or other means
 - C. Listing of individual types of illness or injuries seen

(The summary medical data collected under #3 A, B and C should be submitted to the District Health Department EMS Program within 30 days of the event).

4. Distribution method(s) for Medical Aid Station maps/information to participants and spectators.

5. Copies of letters announcing the event date and times for events greater than 2500 should be distributed to local hospital emergency departments and ambulance services at least one month prior to the event to assist them in anticipating staff needs, etc.

ADDITIONAL GUIDELINES:

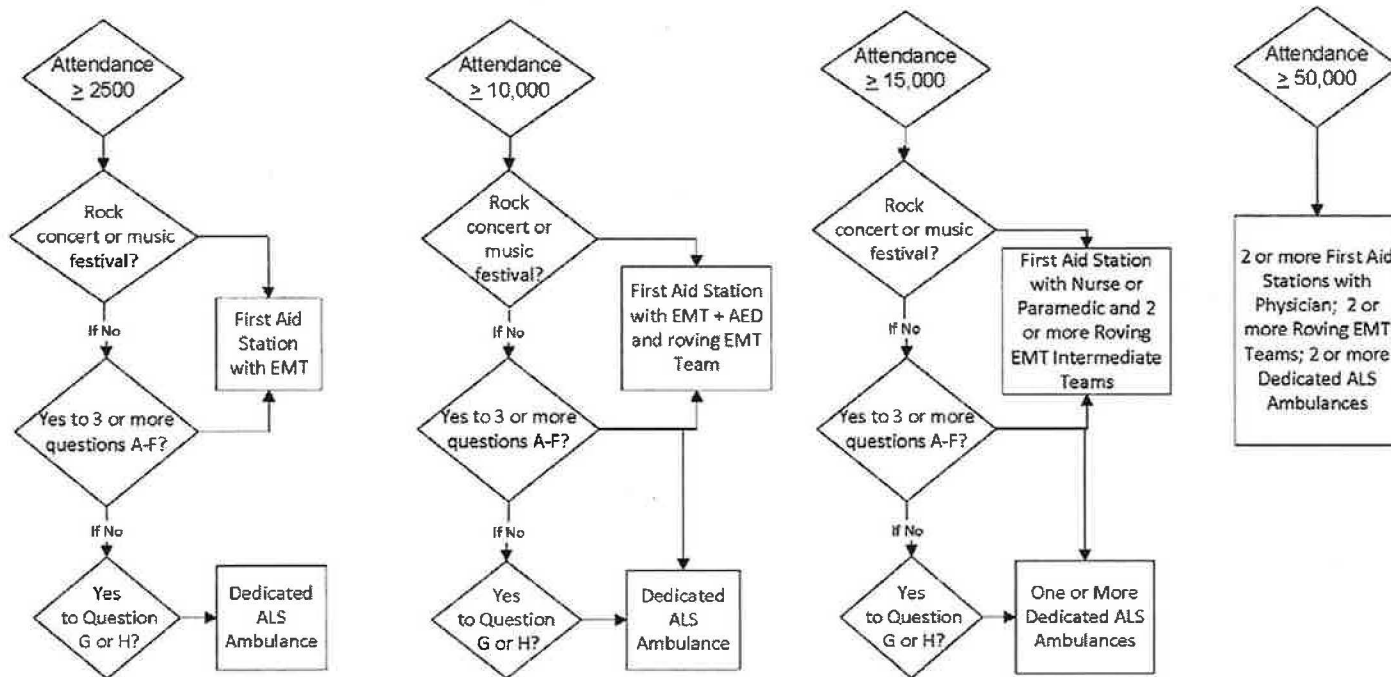
The following mitigation strategies for EMS medical coverage are also recommended:

- EMS personnel should be on site whenever event personnel, spectators or participants are on scene, including set up and take down activities.
- If dedicated ambulances are utilized, they should be co-located with the first aid tent whenever possible.
- Hand washing facilities for medical aid station personnel should be separate from general public facilities.
- Handicapped accessible Sani-Huts or ADA-approved fixed facility restrooms should be available near the medical aid stations so patients can access them.
- If first aid stations are utilized, disposal of biological waste should be addressed in the event plan.
- For venues that are a considerable distance from the closest hospital, pre-planning for landing a medical helicopter should be included.
- Plans for compliance with Health Insurance Portability and Accountability Act (HIPAA) provisions should be developed for patient care records that include patient identifiers.
- For events greater than 15,000 people, Multi-Casualty Incident response operations and command structure concepts should be included in the event planning process.

Matt Smith, _____ Date
Chairman, District Board of Health

Kevin Dick _____ Date
District Health Officer

APPENDIX A--EMS COVERAGE ANALYSIS FLOW CHART



QUESTIONS

- A. High-risk activities such as sports, racing, etc.?
- B. Environmental hazards or extremes of heat or cold?
- C. Average age of crowd less than 25 or greater than 50?
- D. Crowd includes large numbers of persons with acute or chronic illnesses?
- E. Crowd density presents challenges for patient access or transfer to ambulance ?
- F. Alcohol to be sold at the event, or a history of alcohol or drug use by the crowd at prior events?
- G. Past history of significant number of patient contacts at the event or patients transported to area hospitals?*
- H. Event greater than 5 miles from the closest hospital?

DEFINITIONS

First Aid Station: Fixed location on site staffed by at least one Emergency Medical Technician or a person with a higher skill level capable of providing emergency medical care within their proscribed scope of practice.

Roving EMT Team: team of two or more personnel at the basic or EMT Intermediate level with treatment supplies to provide emergency medical care.

Dedicated ALS Ambulance: An Advanced Life Support ambulance staffed by a Paramedic and Intermediate EMT, or personnel with a higher skill level, and capable of providing transport of patients, but which will immediately respond back to the event site.

** Significant means the number of patient contacts is \geq .7% of the total number of attendees, or transport rate to hospital by ambulance or private vehicle is \geq 15% of total patient contacts



WASHOE COUNTY HEALTH DISTRICT

EPIDEMIOLOGY AND PUBLIC HEALTH PREPAREDNESS DIVISION



Public Health
Prevent Promote Protect

January 14, 2014

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 2014

Communicable Disease - Influenza

For the week ending January 11, 2014 (CDC Week 2) eleven of the twelve participating healthcare providers reported a total of 186 patients with influenza-like illness (ILI) out of a total of 4,823 patients seen for an ILI percentage of 3.9%. This is above the regional baseline of 2.9%. During the previous week (1) the national ILI percentage was 4.4%. On a regional level the ILI percentage ranged from 1.5% to 8.7%. Washoe County ILI rates have shown peaks this season in weeks 50 and 52 at around 4.5%. The Washoe County ILI trend line has been above the national and regional trends consistently until weeks 1 and 2.

Also, during week 1 seven death certificates were received listing pneumonia (P) or influenza (I) as a factor contributing to death. The total number of death certificates submitted for week 1 was 38. This reflects a P&I ratio of 18.4% which is above the epidemic threshold set by CDC for week 1 at 7.1%. Nationally the P&I was 6.9%. It should be noted that the local P&I ratio normally fluctuates considerably from week to week due to relatively small numbers in comparison to national data. Therefore, it is a somewhat crude indicator of influenza-related mortality and only reflects a concern if it remains elevated over a period of several weeks.

Based on both the ILI and P&I rates the flu season this year appears to be fairly typical. However, severity of illness indicators based on hospitalization and death are markedly higher this year. For the last three flu seasons the hospitalization rate among lab-confirmed cases ranged from 3.3% to 4.9%. This year the percentage of lab-confirmed cases hospitalized to date is 9.9%. Also during the last three flu seasons the percentage of lab-confirmed cases admitted to an Intensive Care Unit (ICU) ranged from 0.2% to 1.9%. This season the percentage of lab-confirmed cases admitted to an ICU to date is 2.5%. Finally, there were no reported deaths among lab-confirmed cases in Washoe County in the previous three flu seasons. This year there have been six lab-confirmed deaths reported to date. The dominant strain

identified this year among lab-confirmed cases has been 2009 H1N1. All of the lab-confirmed cases with fatal outcomes were identified with this strain. This 2009 H1N1 strain has also been associated with severe illness in atypically young age groups. Five of the six reported deaths were in the mid thirties to mid fifties age range.

Public Health Preparedness (PHP) – Continuity of Operations (COOP)

PHP is working with management in the five divisions to update WCHD's Continuity of Operations Plan (COOP), last updated in 2011. PHP staff is also working with the division directors to schedule a half-day COOP training and tabletop exercise for all staff. This was prompted by the recommendations that came out of the last COOP training and tabletop exercise which was limited to management.

Training

PHP is collaborating with the Northern Nevada Counter-Terrorism Center (a Washoe County Sheriff's Office program) to coordinate training on Creating Vigilant, Prepared, and Resilient Communities for Homeland Security. This two-day intensive training will be held April 2 and April 3 at the Regional Public Safety and Training Center. This training is part of PHP's effort to build the community recover capability identified by CDC.

PHP staff has coordinated an upcoming ICS 300 for Public Health (January 27-29) and ICS 400 for Public Health (February 20-21) at WCHD.

PHP staff has scheduled a mandatory Active Shooter Awareness training for staff, and a second elective training on situational awareness and de-escalation. The objective of the Active Shooter Awareness training is to provide staff with an overview of the active shooter danger and ways in which staff can be better prepared should they find themselves in an active shooter situation. The objective of the Situational Awareness and De-Escalation training is to present a new way to look at one's surroundings and environment in an effort to maintain the proper mindset when dealing with the world we face today. This training will focus on public health issues specifically related to the Health District. For example, if a restaurant owner becomes angry due to a negative report or forced restaurant closures, what can staff do to de-escalate the situation.

PHP staff is currently providing make-up vaccination trainings to intermediate and advanced EMTs with the three Fire agencies. By Friday, January 17, more than 200 EMTs will be trained to assist the Health District in the mass prophylaxis of all of Washoe County residents and tourists in the event of a public health emergency, such as pandemic influenza or a bioterrorism attack in which a Category A agent is released in our community.

Public Awareness

January marked the kickoff of the RTC bus ads component of the "Get to Know Your Neighbor" media campaign, to promote healthy preparedness behaviors in Washoe County. This campaign is a joint effort between PHP and Washoe County Emergency Management. In previous months, radio, print and television ads were run.

Medical Reserve Corps (MRC)

The American Red Cross conducted their "Fundamental Shelter Training" class for MRC Volunteers on December 12th. This basic level course introduced MRC-Volunteers to the guidelines and procedures for setting up, running and closing a shelter during a disaster and/or emergency. This half-day hands on interactive class was taught by experienced and knowledgeable American Red Cross Staff at their facility and nine MRC Volunteers were trained.



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



WASHOE COUNTY HEALTH DISTRICT



Public Health
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Staff Report

DATE: January 23, 2014

TO: District Board of Health Members

FROM: Steve Kutz, RN, MPH, Division Director
Community and Clinical Health Services
(775) 328-6159 skutz@washoecounty.us

SUBJECT: Community and Clinical Health Services (CCHS) Division Report,
January 2014 District Board of Health Meeting

1. CCHS Client Satisfaction Survey Results
2. Program Update – Sexual Health
3. Divisional Update
4. Program Reports

1. CCHS Client Satisfaction Survey Results

In November 2013, CCHS conducted a Division-wide client satisfaction survey. Over 300 clients completed the survey. Clients overwhelmingly rated CCHS services “good” or “great”, and reported an increase in knowledge for the issue that brought them to a CCHS program. Below is a summary of survey questions, and the cumulative good and great response percentages.

Satisfaction Survey Fall 2013

Answer Options	Good Great Percent
Hours the service is available	78%
Calling with questions or for an appointment was	78%
Checking in at the counter was	89%
Waiting area	81%
Time you waited to be seen today was	72%
Time spent with a nurse to receive services and ask questions was	92%
Comfort of exam room	96%
Amount of money charged for your visit was	93%
How friendly was the staff that helped you today?	97%
How was the attitude of the staff that helped you today?	97%
How would you rate your overall experience?	99%
Before your visit - How much did you know about the health issues you received services for today ?	50%
After your visit - How much do you know about the health issues you received services for today ?	82%

2. Program Update – Sexual Health – Increase in HIV & STDs

New HIV cases reported to the Health District have increased by 50% in 2013, compared to 2012 (2013 – 36 cases; 2012 – 24 cases). These numbers includes new HIV, and new HIV cases that have already progressed to AIDS. As a reminder, having an STD increases the odds of becoming infected with HIV; given the increase in STDs this past year, the increase in HIV is not surprising.

As reported at the December DBOH meeting, STDs increased in 2013, some significantly. 2013 year-end totals:

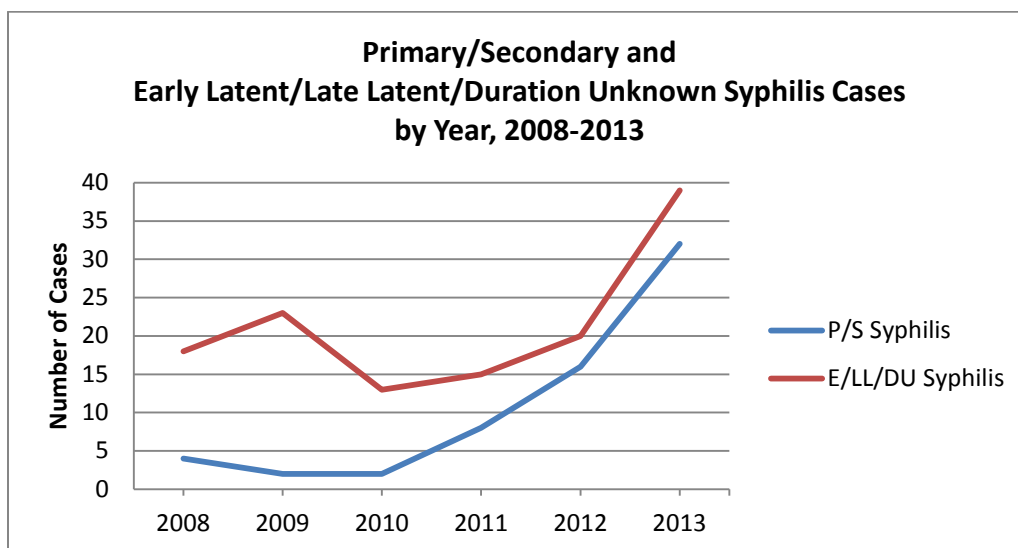
- Chlamydia – 5% increase; 1676 cases reported
- Gonorrhea – 56% increase; 363 cases reported
- Syphilis (primary and secondary*) – 100% increase; 32 cases reported
- Syphilis (early latent*) – 160% increase; 13 cases reported
- Syphilis (other[#]) – 73% increase; 26 cases reported

*infectious cases of syphilis

non-infectious cases of syphilis after investigation

Educational packets have been mailed to healthcare providers in Washoe County to provide technical assistance, as well as Sexual Health contact information should additional help be needed. This information not only encourages healthcare providers to “Think Syphilis”, but also to be cognizant of HIV risks, including testing for HIV along with other STDs.

At the end of this report you will find a press release from the National Council of STD Directors on the increases in STDs nationally in 2012.



Source: WCHD Sexual Health Program STD*MIS, Retrieved January 7, 2014

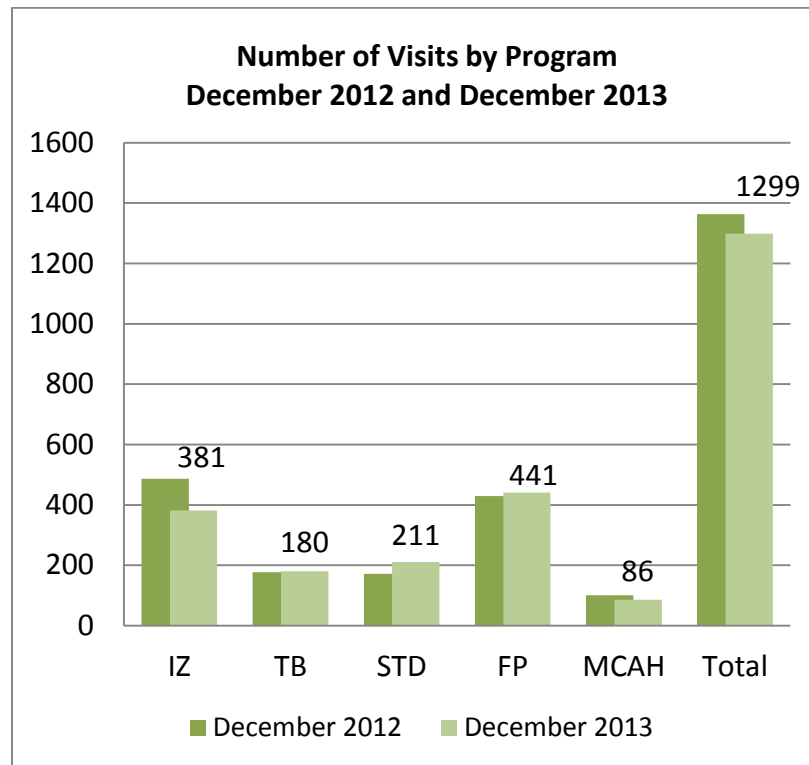
3. Divisional Update

- a. Staffing Update – Linda Gabor has been promoted to Public Health Nurse Supervisor, effective December 9, 2013. Linda has worked for the Health District for over 24 years in CCHS. She has worked in the MCAH Program, Sexual Health and Immunization Programs, and was most recently a Disease Intervention Specialist in our Sexual Health Program. Linda comes to the position with previous management experience, including budget development and monitoring.

- b. Insight – Insight is the database that CCHS uses as its Electronic Health Record (EHR). Successes realized in 2013 included:
 - i. Creation of “pop ups” and increased use of mandatory fields to improve data quality, preventing over 1700 errors
 - ii. Implementation of the Immunization module – first bi-directional transmission of immunization records in the state
 - iii. Netsmart Connections2013 Conference presentation on use of pop ups, improved data quality, including a National Netsmart Award for “Out of the Box” thinking for this project
 - iv. Implementation of the Supply module

- c. Affordable Care Act (ACA) – CCHS clinic, clerical and management staff attended a webinar hosted by Cardea, a long time training partner, on appropriate coding, contracting with third party payers and transitioning the billing process into clinic flow, on January 14, 2014. Washoe County Social Services certified application counselors (CAC) are now accepting appointments to assist clients with signing up for health insurance through the Nevada Silver State Health Insurance Exchange.

d. Data/Metrics –



Changes in data can be attributed to a number of factors – fluctuations in community demand, changes in staffing and changes in scope of work/grant deliverables, resulting in a reduction of direct services available.

4. Program Reports – Outcomes and Activities

a. **Sexual Health** – HIV prevent grant funding has been cut for calendar year 2014. The Sexual Health Program has put in two grant applications to the Nevada Division of Public and Behavioral Health for Ryan White Part B monies (HIV funding) that will mesh well with current Sexual Health Program activities, as well as close the gap in this loss of funding.

b. **Immunizations** –

- i. Our successful School Located Vaccination Clinics (SLVCs) came to a close for 2013 this past December. SLVCs were held at 22 schools, immunizing over 1800 individuals, with more than 1600 doses of influenza vaccine and 500 doses of Tdap administered. This project is part of our ongoing partnership with Immunize Nevada. School clinics resume on January 16th.
- ii. To respond to community concerns regarding influenza, the Immunization Program partnered with Immunize Nevada to provide a community clinic at the Boys and Girls Club on January 14, 2014.

- iii. The Immunization Program scored 100% on the annual Vaccines for Children (VFC) Compliance Visit on December 11, 2013, conducted by the Nevada Division of Public and Behavioral Health.
- c. **Tuberculosis Prevention and Control Program** – Given the recent shooting on the Renown Regional Medical Center campus and location of the TB Clinic on the Northwest corner of this campus, clinic staff and management conducted a safety assessment with a safety intelligence analyst from the Fusion Center at the Sheriff's Office for safety and security recommendations.
- d. **Family Planning/Teen Health Mall** – Theresa Goins has been hired into a permanent position as an Advanced Practice Registered Nurse (APRN). Theresa had been an intermittent hourly APRN with the program since last summer. She began her permanent position January 13, 2014.
- e. **Chronic Disease Prevention Program** – The Chronic Disease Prevention Program had new staff begin working on various projects, in November; the two Interim Hourly Health Educators are working on smoke free living in multi-unit housing units. One of the Public Service Interns is working on promoting cessation among the health care community and medical offices; the other Public Service Intern is working on promotion of physical activity and nutrition through work on wellness policies and voluntary menu labeling. Health Educator Kelli Seals continues to provide guidance and leadership for the new staff.
- f. **Maternal, Child and Adolescent Health (MCAH)** – Home visiting referrals are currently being triaged and placed on a waiting list. This is in part related to the shift of nursing staffing to assist with the syphilis outbreak. The program will be hosting an in-service on January 21st, 12:00pm-1:00pm, where Dr. Lynn Kinman will be presenting on Methamphetamine exposed babies.



For Immediate Release
January 8, 2014

PRESS RELEASE

Contact:
Stephanie S. Arnold Pang
National Coalition of STD Directors
(612) 220-2446
sarnold@ncsddc.org

NCS D Responds to Release of 2012 STD Surveillance Data
*Continued Increase in STD Rates Underscores Need for Additional Resources for
STD Public Health Programs*

Washington, D.C. – Today, the Centers for Disease Control and Prevention (CDC) released its 2012 sexually transmitted disease (STD) surveillance data. This annual report of statistics and trends for the three reportable sexually transmitted diseases in the United States (chlamydia, gonorrhea and syphilis) shows that STD rates for all three diseases continue to increase. In fact, the over 1.4 million cases of chlamydia reported to the CDC in 2012 was the greatest number of cases for any condition *ever* reported to the CDC.

“The ever-increasing rates of sexually transmitted diseases continue to threaten the health and well-being of millions of Americans, particularly youth and men who have sex with men (MSM),” stated William Smith, Executive Director of the National Coalition of STD Directors (NCS D). “The long-term consequences of these diseases impact the health of the individual, burden our larger health care system, and drastically hinder our continued fight against HIV and AIDS.”

While the number of cases reported to the CDC of chlamydia markedly increased in 2012, the overall population rate per 100,000 increased just slightly. The rates of chlamydia in men, however, rose 3.2%. In 2012, rates of primary and secondary syphilis rose a dramatic 11.1%. This increase was seen solely among men, particularly men who have sex with men (MSM). In cases where the sex of the partner is known, MSM account for 75% of the primary and secondary syphilis cases reported to the CDC. Data also suggest that as many as 40% of MSM with syphilis are also co-infected with HIV. STDs greatly increase a person’s risk of acquiring or transmitting HIV. Rising STD rates have a major negative impact on our ability to address the HIV epidemic.

Gonorrhea rates also rose for the third year in a row in 2012. Increasing gonorrhea rates continue to be deeply troubling due to rising drug resistance in gonorrhea. Reducing gonorrhea rates would reduce the overall gonorrhea disease burden and reduce the response needed when resistant gonorrhea does arrive.

“Simply put, STD public health programs do not have enough resources to address all the serious problems that face them. Those on the front lines of STD prevention and control are forced to pick and choose among diseases and populations. As a result, thousands, if not millions, of Americans at risk for STDs are not able to be reached, with long-term human and economic costs,” stated Smith. “STD programs desperately need additional funding to address these rising rates and meet our STD epidemics effectively.”

This data also shows that both the case and rates of chlamydia and gonorrhea continue to be highest in people 24 and younger. Almost 60% of reported cases of gonorrhea occur in this population. A shocking 70% of cases of chlamydia are in young people below the age of 25. These diseases have long-term health consequences, particularly for young women—it is estimated that undiagnosed STDs cause 24,000 women to become infertile each year.

To make progress, NCSD believes critical investments in public health programs are essential as well as other needed interventions including: better comprehensive sex education for young people, greater outreach to the general public and private providers, an increased focus on condom use, and point of care diagnostic tests for earlier detection and better connection to treatment.

The full 2012 STD surveillance data can be found on the CDC website at: www.cdc.gov/std/stats12/. In addition, the current CDC guidelines for STD screening and treatment can be found here: <http://www.cdc.gov/std/treatment/2010/>.

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The National Coalition of STD Directors (NCSD) is a partnership of public health professionals dedicated to promoting sexual health through the prevention of STDs.

NCSD provides dynamic leadership that strengthens STD Programs by advocating for effective policies, strategies, and sufficient resources by increasing awareness of the medical and social impacts of STDs.

For more information, visit www.NCSDDC.org.



WASHOE COUNTY HEALTH DISTRICT



Public Health
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ENVIRONMENTAL HEALTH SERVICES DIVISION

DATE: January 14, 2014

TO: District Board of Health Members

FROM: Robert O. Sack, Division Director, Environmental Health Services (EHS)

SUBJECT: Environmental Health Services Division Report for January 2014

Food Program

- Staff has been working with Washoe County Community Development and the District Attorney's Office on developing local regulations to implement the Medical Marijuana bill from the last legislative session. We have been having discussions regarding jurisdiction as it relates to permitting of kitchens where marijuana is used as an ingredient in a food product which is being produced locally. In addition, we have concerns regarding how solid waste and garbage from any medical marijuana facility is handled and disposed of.

Vector-Borne Disease Program

- Staff attended the Southeast connector meeting in January. Stantec Engineering (consultants for RTC) presented the 90% build out of the project. Comments were sent to the Army Corp of Engineers addressing our concern of the design of the proposed 60 acres of wetlands north and east of Pembroke along Steamboat Creek. After RTC and Stantec Engineering reviews the agencies' comments, we will meet with RTC, Stantec, and the Army Corp of Engineers to incorporate our design standards for the wetlands and sedimentation basins.
- Staff will meet with Karen Brown, Community Manager for Double Diamond Homeowners Association, and Mike Harris of National Landscape to discuss vegetation maintenance in the Central channel, Wetlands 5&6 and several drainage channels under the jurisdiction of Double Diamond HOA. Double Diamond has recently completed maintenance in the Central channel which promotes the free flow of water in this facility. The other item that needs addressing is the many inlets not connected to the channel in which the water sheet flows creating shallow pools of water that produces mosquitoes. This mosquito source can be eliminated by connecting the inlets to the main flow line of the channel.

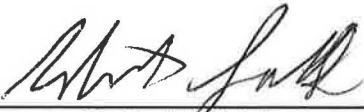
General Environmental

- We have implemented an expanded workload variety for staff beginning January 1. We have assigned a broader spectrum of inspections and complaints to all field staff. This will allow staff to be involved in more programs and allow better coverage in programs during staff shortages. This was implemented at the request of staff.

EHS INSPECTION TOTALS 2013

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YTD	Mo Avg
Child Care	15	9	11	6	15	19	18	26	21	27	11	24	202	11
Complaints	144	90	149	120	137	78	115	109	84	85	56	69	1,236	128
Food	239	404	438	383	378	365	397	412	353	420	366	286	4,441	368
General	103	62	109	83	217	170	225	240	169	183	293	140	1,994	115
Plans (Commercial Food/ Pools/ Spas)	9	11	11	19	10	6	13	7	11	8	6	5	116	12
Plans (Residential Septic)	18	15	19	45	36	44	19	41	34	23	23	20	337	27
Well	4	13	4	14	10	15	14	20	19	11	14	5	143	9
Waste Mgmt	8	17	8	18	9	16	11	10	6	2	7	25	137	12
TOTAL	540	621	749	688	812	713	812	865	697	759	776	574	8,606	682

*General Inspections Include: Invasive Body Decorations; Mobile Homes/RVs; Public Accommodations; Pools; Spas; RV Dump Stations; and Sewage/Wastewater Pumping.



Robert O. Sack, Division Director
 Environmental Health Services Division



WASHOE COUNTY HEALTH DISTRICT

AIR QUALITY MANAGEMENT DIVISION



Public Health
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Date: January 13, 2013

To: District Board of Health

From: Dan Inouye, ^{D.D.} Acting Division 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 2013 and includes the following sections:

- Air Quality
- Monitoring Activity
- Planning Activity
- Permitting Activity
- Compliance/Inspection Activity
- Enforcement Activity



Director's Report

DECEMBER 2013

Top Stories of 2013

The year 2013 was a transitional period for air quality management in Washoe County. We saw the end of a long-term local control strategy and the beginning of new ways to deliver air quality information. We also experienced one of the worst air pollution episodes in history. Below are the top five AQMD stories of 2013.

5 - Suspension of the Oxygenated Fuels Program: In October, the District Board of Health suspended Regulation 040.095 (Oxygen Content of Motor Vehicle Fuels). The Oxygenated Fuels (Oxy-Fuels) program was first implemented in 1988 and successfully reduced carbon monoxide (CO) emissions from cars and trucks. The Oxy-Fuels program, along with the woodstove and smog check programs, helped Washoe County meet and maintain the federal CO air quality standards. As federal emission standards for new cars and trucks became more stringent, the incremental benefits of the Oxy-Fuel program diminished.

4 - December PM2.5 Episodes: A strong winter storm hit the Truckee Meadows in early December. This was followed with an extended period of strong temperature inversions, cold temperatures, and light winds. The Air Quality Index (AQI) reached Unhealthy for Sensitive Groups (AQI > 100) 14 times, including ten consecutive days between December 10 and 19. A Red burn code was issued 15 times compared to a total of five times for the entire 2012-13 season.

3 - Social Media: The AQMD launched Facebook and twitter in July. The AQI was delivered each day along with seasonal air quality information. A major success was connecting with important partners such as the National Weather Service and local media outlets. Air pollution episodes later in the year demonstrated the importance of social media in delivering accurate and consistent air quality information.

AIR QUALITY COMPARISON FOR DECEMBER

Air Quality Index Range		# OF DAYS DECEMBER 2013	# OF DAYS DECEMBER 2012
GOOD	0 to 50	1	14
MODERATE	51 to 100	16	17
UNHEALTHY FOR SENSITIVE GROUPS	101 to 150	14	0
UNHEALTHY	151 to 200	0	0
VERY UNHEALTHY	201 to 300	0	0
TOTAL		31	31

Air Quality Management Division

2 - 2035 Regional Transportation Plan: The Regional Transportation Commission of Washoe County adopted the 2035 Regional Transportation Plan (RTP) in April. Long-range plans are the blueprints for our community's transportation system. The 2035 RTP is significant because it acknowledges how community design influences chronic diseases. Good community design promotes active transportation choices and a healthier community. Also, the RTP identified two food deserts where access to fresh and nutritious foods is limited. Including these issues in the RTP is a very important first step towards developing transportation policies that align with Health District goals.

1 - American and Rim Wildfires: Wildfires in the West are becoming more frequent and intense. Two large fires in California affected the Truckee Meadows from August 11 through September 9. Smoke from the American Fire near Foresthill, CA traveled north, then shifted east into Washoe County due to the afternoon Zephyr winds. A change in weather patterns around August 22 relieved our area from the American Fire smoke, but brought in smoke from the Rim Fire near Yosemite National Park. Fine particulate matter (PM2.5) levels during these episodes changed rapidly fluctuating between Moderate (AQI between 51 and 100) and Very Unhealthy (AQI > 200) at times. The AQI was greater than 100 for 16 days, including 12 consecutive days between August 22 and September 2. The Washoe County School District took precautionary measures to protect students' health by cancelling outdoor activities such as recesses and high school football games.

Dan Inouye, Acting Division Director

HIGHEST AQI NUMBER BY POLLUTANT

Air Quality

POLLUTANT	DEC 2013	YTD for 2013	DEC 2012	Highest for 2012
CARBON MONOXIDE (CO)	30	30	29	29
OZONE 8 hour (O3)	38	93	38	104
PARTICULATES (PM _{2.5})	136	174	97	105
PARTICULATES (PM ₁₀)	86	97	53	74

For the month of December 2013, the highest Air Quality Index (AQI) values reported was one hundred thirty-six (136) for PM2.5. There were no exceedances of Carbon Monoxide, Ozone or PM10. There was one (1) day the air quality was in the good range, sixteen (16) days the air quality was in the moderate range, and fourteen (14) days the air quality was unhealthy for sensitive groups.

Planning & Monitoring Activity

In February, staff will be presenting the AQMD's "Keep it Clean." campaign at the National Air Quality Conference in Durham, NC. Keep it Clean includes seasonal components for wintertime burn codes (Know the Code), ozone season (nOzone), and encouraging cycling as a transportation option (Rack Em Up).

*Dan Inouye, Branch Chief
Planning and Monitoring*

Permitting Activity

TYPE OF PERMIT	2013		2012	
	DECEMBER	YTD	DECEMBER	ANNUAL TOTAL
Renewal of Existing Air Permits	96	1356	96	1339
New Authorities to Construct	3	71	6	88
Dust Control Permits	3 (63 acres)	119 (1150 acres)	5 (118 acres)	105 (1420 acres)
Wood Stove Certificates	27	364	50	330
WS Dealers Affidavit of Sale	13 (7 replacements)	99 (61 replacements)	34 (21 replacements)	134 (83 replacements)
WS Notice of Exemptions	570 (8 stoves removed)	8356 (88 stoves removed)	361 (0 stoves removed)	7346 (83 stoves removed)
<i>Combined Total for both: Asbestos Assessments and Asbestos Demo and Removal (NESHAP)</i>	61	1027	88	1148
Asbestos Assessments	53	828	-	-
Asbestos Demo and Removal (NESHAP)	8	199	-	-

Compliance & Inspection Activity

Staff reviewed thirty (30) 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-two (42) stationary source renewal inspections and fifty-three (53) gas station inspections in December 2013. Staff also conducted inspections on asbestos removal and construction/dust projects.

Permitting & Enforcement Report

The record number of Red Burn Code days during the month of December resulted in a significant increase in complaints received by the Air Quality Management Division. A total of 20 citizen complaints were received for fireplaces/woodstoves burning during the Red Burn Code. Nine of these complaints were received through the answering service after hours. The Enforcement Staff was able to respond to all complaints within an hour. The ultimate goal is to achieve voluntary compliance and have the residents extinguish their fires. During this episode, the Enforcement Staff did issue two Warning Notices of Violation to individuals that were not receptive to the request for voluntary compliance.

The extended Red Burn Code also highlighted the importance of the Sole Source Exemption for residences that depend on a fireplace/woodstove as their only source of heat. The list of approved Sole Source Exemptions in Washoe County has increased to twelve (12) single family residences. As a result of the recent economic challenges, a number of Sole Source applications have been received indicating an inability to pay for fuel or necessary repairs to old heating systems. In response to these requests, the determination was made to approve Temporary Exemptions for the duration of this Know the Code burn season for residences with mechanical failures. Letters have been issued to sixteen (16) residences informing them of the temporary approval and requirement to have the necessary repairs completed prior to the next season. A total of seventeen applications have been denied based on the applicants identifying an additional heat source but indicated the inability to pay for fuel. The denial letters have included contact information for energy assistance programs.

On December 5th, I attended a meeting of the Reno Chapter of the American Lung Association (ALA) focusing on preparations for their Annual Honor Award Dinner which will be held on January 24th at the Atlantis Casino Resort Spa in the Grand Ballroom. This years' dinner will honor Tom Dolan for his contributions to the community and is expected to be attended by several hundred of the most influential people in the Reno-Sparks area. Since this dinner is a major fund raising opportunity for the ALA, the Air Quality Management Division is supporting the cause by purchasing an advertisement in the evening program. The full page advertisement features the Keep it Clean Campaign including banners for Know the Code, Rack'em Up, and nOzone. This is just the latest example of the continued partnership between the ALA and Air Quality Management.

*Charlene Albee, Branch Chief
Permitting & Enforcement*

Enforcement Activity

COMPLAINTS	2013*		2012		
	DECEMBER	YTD	DECEMBER	YTD	Annual Total
Asbestos	1	22	0	18	18
Burning	0	4	0	8	8
Construction Dust	2	27	0	30	30
Dust Control Permit	0	11	1	7	7
General Dust	2	41	2	46	46
Diesel Idling	0	2	1	8	8
Odor	2	14	1	16	16
Spray Painting	0	10	1	5	5
Permit to Operate	2	25	2	55	55
Woodstove	1	12	0	16	16
TOTAL	8	168	8	209	209
NOV'S	DECEMBER	YTD	DECEMBER	YTD	Annual Total
Warnings	5	29	2	45	45
Citations	4	31	3	41	41
TOTAL	9	60	5	86	86

* Discrepancies in totals between monthly reports can occur because of data entry delays.

Notices of Violation (NOVs):

There were nine (9) Notice of Violations (NOV's) issued in the month of December 2013. There were five (5) NOV Warnings and four (4) NOV Citations.



WASHOE COUNTY HEALTH DISTRICT



Public Health
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TO: District Board of Health Members

FROM: Kevin Dick
Interim District Health Officer

DATE: January 23, 2014

SUBJECT: January 2014 Interim District Health Officer Report

REMSA / EMS

EMS working group discussions continue. The parties continue to work to develop *The Principles of an Agreement* document. This document can then be used as the basis for constructing the language of a renewed franchise agreement after it receives approval. The working group is also developing a proposed amendment to the Interlocal Agreement establishing the Washoe County Health District that would provide the authority for the Health District to conduct Regional EMS oversight and engage the local jurisdictions in the EMS Oversight function. The Principles of Agreement and the Interlocal Agreement Amendment will be on the agenda for the February 10th Concurrent Meeting.

Fundamental Review

Additional financial information has been provided to the review team. The team continues their review and development of recommendations to be presented to the District Board of Health on February 27th, 2014.

Permit Software Project

I continue to participate in the Negotiating Team for the regional business licensing and permitting software project. Presentations to the community continued. The Executive Committee is reviewing a draft scope of work. The negotiating team is developing an Interlocal Agreement to be used by the participating jurisdictions to establish a fiscal agent for the project and define the project management structure and obligations of the parties.

Quality Improvement (QI) Initiative

The QI Team continues to meet to advance the initiative. The Team members have identified initial QI projects in their Divisions and organized project teams to address them. This initial QI work is designed to build staff experience and capacity to implement QI projects.

Healthy Community Conversation

Planning continues for a Healthy Community Conversation anticipated later this year. I worked with partners from Renown Health, the University of Nevada, Reno, the Federal Reserve Bank and the public to organize the planning committee meeting on January 14th. During the meeting the planning committee worked to further define the vision and plans for the event and to establish workgroups to keep the initiative moving forward.

WIC Reorganization

I have moved the Women, Infants, and Children's Program (WIC) from Administrative Health Services (AHS) to Community and Clinical Health Services. This was based upon the desire to improve the ability of the Health District to deliver multiple program services to clients and enhance the benefits they are able to receive by improving our efficiency through program coordination and collaboration. In addition, this allows AHS to focus on administrative support for the Health District, rather than program implementation and direct service delivery to the public.

Staffing

The Administrative Secretary position to support the Board and the Health Officer has been filled through a promotion within the County. Recruitments are in progress for the AQM Division Director, an EMS Coordinator and a Statistician in EPHP, and an Environmental Health Specialist in EHS. These positions are being filled as a result of vacancies.

Active Shooter Awareness Training

In light of the recent tragedies at Sparks Middle School and the Renown Campus involving active shooters, I have mandated that all Health District employees take active shooter awareness training. EPHP staff arranged for two classes. The first was held on January 22nd and the second is scheduled for January 24th. Those who cannot attend these classes may take the FEMA 907 Active Shooter Awareness Class online.

Other Events and Activities

A Division Director/Supervisors meeting was held on January 6th for the annual budget process kick-off, and a Division Directors Meeting was held on January 21st. A General Staff meeting was held on January 7th I also conduct individual meetings with the Division Directors on a bi-weekly schedule.

I continue to serve as President of HomeFree Nevada / EnergyFit Nevada, the not-for-profit, Home Performance with Energy Star Provider for the State of Nevada. Through a special EnergyFit Nevada promotion, home energy assessments are available for \$199 and up to \$2,000 rebates are available for home energy upgrades for the first 150 homes that sign-up through February 28th. Funding is provided by a grant from the Department of Energy through the State Office of Energy. On January 14th, I participated with Paul Thomsen, Director of the Governor's Office of Energy, and EnergyFit Nevada staff in receiving an EnergyFit Nevada month proclamation from the Board of County Commissioners.

Health District Media Contacts: December 11, 2013 - January 15, 2014

<u>DATE</u>	<u>MEDIA</u>	<u>REPORTER</u>	<u>STORY</u>
01/14/2014	KOLO CH 8 - ABC Reno	Terri Russell	Surgeon General Smoking Report - Seals
01/13/2014	Associated Press	Sandy Cherub	Flu - Todd
01/13/2014	UNIVISION	Yvette Contreras	Flu - Todd
01/10/2014	KTVN CH2 - CBS Reno	Erin Breen	Flu - Todd
01/10/2014	KRNV CH 4 - NBC Reno	Terri Hendry	Flu - Todd
01/09/2014	KRNV CH 4 - NBC Reno	Joe Hart	Air Quality/Burn Code - Inouye
01/09/2014	KUNR Radio FM 88.7 NPR	Michelle Bliss	Flu - Todd
01/09/2014	Reno Gazette-Journal	Steve Timko	Flu - Todd
01/08/2014	KTVN CH2 - CBS Reno	Terri Hendry	Carbon Monoxide Poisoning - Ulibarri
01/07/2014	KRNV CH 4 - NBC Reno	Joe Hart	Flu - Ulibarri
01/07/2014	KOLO CH 8 - ABC Reno	Pat Thomas	Flu - Ulibarri
01/07/2014	KKOH Radio AM 780 ABC	Ross Mitchell/Monica Jaye	Flu - Ulibarri
01/06/2014	KRNV CH 4 - NBC Reno	Van Tieu	Syphilis - Howell
01/03/2014	KRNV CH 4 - NBC Reno	Joe Hart	Fire Works/Air Quality - Ulibarri
01/03/2014	KOLO CH 8 - ABC Reno	Joe Harrington	Flu - Peek
01/03/2014	KTVN CH2 - CBS Reno	Gene Vance	Flu - Peek
01/02/2014	KRNV CH 4 - NBC Reno	Madison Cortney	Flu - Dick
01/02/2014	KRNV CH 4 - NBC Reno	Joe Hart	Radiation - Ulibarri
01/02/2014	Reno Gazette-Journal	Mark Robinson	Dogs in Food Establishments - Macaluso
12/23/2013	KRNV CH 4 - NBC Reno	Brandon Wholey	Burn Code - Schnieder
12/23/2013	Reno Gazette-Journal	Susan Skorupa	Food Permit Requirements - McNinch/Ulibarri
12/21/2013	KOLO CH 8 - ABC Reno	Angela Chen	Animal/Dog Abuse - Ulibarri
12/16/2013	KTVN CH2 - CBS Reno	Jason Pasco	Radiation - Ulibarri
12/13/2013	KRNV CH 4 - NBC Reno	Alex Sacks	Radiation - Ulibarri

**Press Releases/Media
 Advisories/Editorials**

01/06/2014	Media Advisory	PIO Ulibarri	Green Burn Code Advisory
01/02/2014	Media Advisory	PIO Ulibarri	Red to Yellow Burn Code Advisory
01/02/2014	Press Release	PIO Ulibarri	Flu Cases Rise
01/02/2014	Media Advisory	PIO Ulibarri	Red to Yellow Burn Code Advisory
12/31/2013	Media Advisory	PIO Ulibarri	Yellow to Red Burn Code Advisory
12/27/2013	Media Advisory	PIO Ulibarri	CDC HAN Influenza EPI News
12/26/2013	Media Advisory	PIO Ulibarri	Red to Yellow Burn Code Advisory
12/23/2013	Media Advisory	PIO Ulibarri	Yellow to Red Burn Code Advisory
12/18/2013	Media Advisory	PIO Ulibarri	Green Burn Code Advisory

Kevin Dick
 Interim District Health Officer