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| **Washoe County District Board of Health Meeting Minutes** | |

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| **Members** | **Thursday, September 28, 2017** |
| Kitty Jung, Chair | **1:00 p.m.** |
| Dr. John Novak, Vice Chair |  |
| Oscar Delgado |  |
| Dr. George Hess | **Washoe County Administration Complex** |
| Kristopher Dahir | **Commission Chambers, Building A** |
| Michael D. Brown | **1001 East Ninth Street** |
| Tom Young | **Reno, NV** |

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* 1. \***Roll Call and Determination of Quorum**

Vice Chair Novak called the meeting to order at 1:01 p.m.

The following members and staff were present:

Members present: Dr. John Novak, Vice Chair

Oscar Delgado

Kristopher Dahir

Michael Brown

Tom Young

Dr. George Hess

Members absent:

Kitty Jung, Chair

**Ms. Rogers verified a quorum was present.**

Staff present: Kevin Dick, District Health Officer, ODHO

Leslie Admirand, Deputy District Attorney

Charlene Albee

Steve Kutz

Dr. Randall Todd

Laurie Griffey

* 1. \***Pledge of Allegiance**

Dr. Hess led the pledge to the flag.

* 1. \***Public Comment**

**As there was no one wishing to speak, Vice Chair Novak closed the public comment period.**

* 1. **Approval of Agenda**

September 28, 2017

Mr. Brown moved to approve the agenda for the September 28, 2017, District Board of Health regular meeting. Mr. Delgado seconded the motion which was approved six in favor and none against.

* 1. **Recognitions**

A. Promotions

i. Angela Penny from Public Health Nurse to Public Health Nurse Supervisor, 9/5/2017 – CCHS

Mr. Dick congratulated Ms. Penny on her promotion to Public Health Nurse Supervisor and stated that she is the newest supervisor in CCHS.

Mr. Kutz informed that Ms. Penny has worked in Public Health since 1993. He explained that her career began with the Washoe County Health District, and had then moved to Alaska to practice Public Health for a short time. Upon her return to the Reno area, she was re-hired by the Health District where she had most recently been a Public Health Nurse, Disease Intervention Specialist, in CCHS’ Sexual Health Program. Mr. Kutz expressed that they were very happy to have Ms. Penny as part of their management team.

ii. Stephanie Chen from Intermittent Hourly to Permanent Health Educator I, 8/28/2017 – CCHS

Mr. Dick informed that Ms. Chen was not able to be present due to her participation at the Nevada Public Health Association Conference. He stated that Ms. Chen has been working in the Chronic Disease Program and will continue to work there as a permanent employee.

B. Years of Service

i. Judy Medved-Gonzalez, Public Health Nurse II, 20 years, hired 6/23/1997- CCHS

Ms. Medved-Gonzalez was not in attendance.

C. Terminations

i. Sara Behl, Director of Programs and Projects, 15 years – ODHO

Ms. Behl was not able to be in attendance, but Mr. Dick wished to congratulate her on her new position working under contract at the State of Nevada. He reminded those present that she had been the Director of Programs and Projects at the Health District, leading the Strategic Plan, Community Health Improvement Plan and Accreditation efforts. Mr. Dick congratulated Ms. Behl for her fantastic work in the fifteen years she had been with the Health District.

Mr. Dick was pleased to report that the Director of Programs and Projects position has been filled, and the new employee’s first day will be October 2, 2017.

**Vice Chair Novak clarified that the motion for the approval of the Agenda, Item 4, was made by Chief Brown, and Mr. Delgado seconded the motion.**

**6. Consent Items**

Matters which the District Board of Health may consider in one motion. Any exceptions to the Consent Agenda must be stated prior to approval.

A. Approval of Draft Minutes

August 24, 2017

**Mr. Dahir informed of an error at the beginning of the August 24, 2017 Minutes that should be corrected, in that it was written that Chair Jung had called the meeting to order. Chair Jung had been absent, and Vice Chair Novak had called that District Board of Health Meeting to order.**

B. Budget Amendments/Interlocal Agreements

1. Accept Subgrant Amendment #1 from the Nevada Department of Health and Human Services, Division of Public and Behavioral Health, retroactive to April 1, 2017 through June 30, 2018 reducing the amount of the original award by $15,618.00 to a new total of $356,232.00 in support of the Community and Clinical Health Services Division Immunization Program Internal Orders #11319 and #10029 and authorize the District Health Officer to execute the Subgrant Amendment.

Staff Representative: Nancy Kerns Cummins

1. Retroactive approval of Assistant Amendment #A-00905417-1 from the U.S. Environmental Protection Agency (EPA) for funding in the amount of $684,564 for the period 10/1/16 through 9/30/17 for the Air Quality Management, EPA Air Pollution Control Program, IO 10019.

Staff Representative: Patsy Buxton

1. Retroactive Approval of Assistance Amendments PM-00T56401-4 and PM-00T56401-5 from the U.S. Environmental Protection Agency (EPA) for the period 4/1/17 through 3/31/18 for the Air Quality Management, EPA Air Pollution Control Program, IO 10021.

Staff Representative: Patsy Buxton

1. Retroactive Approval of Notice of Grant Award #1U18FD006275-01 from the U.S. Food and Drug Administration for the period 9/1/17 through 6/30/18 in the total amount of $70,000 for the Advancing Conformance with the Voluntary National Retail Food Regulatory Program Standards program within Environmental Health Services, IO 11088.

Staff Representative: Patsy Buxton

1. Approve a Subgrant Award from the State of Nevada Department of Health and Human Services, Division of Public & Behavioral Health effective October 1, 2017 through September 30, 2018 in the total amount of $1,062,147 (no required match) in support of the Community and Clinical Health Services Division (CCHS) Women, Infants and Children (WIC) Program IO# 10031 and authorize the District Health Officer to execute the Subgrant Award.

Staff Representative: Nancy Kerns Cummins

C. Approve donation of various obsolete equipment with a current market value estimated at $-0- to other air monitoring agencies in need of such equipment coordinated by National Association of Clean Air Agencies (NACAA); and if no interest received from other air monitoring agencies, donate the equipment to The Atmospheric Sciences Program at the University of Nevada, Reno.

Staff Representative: Patsy Buxton

D. Approval of Memorandum of Understanding (MOU) between the Washoe County Health District and the United States Department of Agriculture, Forest Service, Region-4, Humboldt-Toiyabe National Forest and Region 5, Lake Tahoe Basin Management Unit; and if approved, authorize the Chair to execute.

Staff Representative: Patsy Buxton

E. Approval of the Workforce Development Plan

Staff Representative: Kevin Dick

F. Acknowledge receipt of the Health Fund Financial Review for August, Fiscal Year 2018

Staff Representative: Anna Heenan

**Mr. Dahir moved to accept the Consent Agenda as presented. Mr. Young seconded the motion which was approved six in favor and none against.**

**7. \*Presentation: Truckee Meadows Regional Planning Agency 2017 Regional Plan Update**

Presented by: Lauren Knox

Ms. Knox informed that her presentation’s purpose is to clarify who Truckee Meadows Regional Planning Agency (TMRPA) is and what they do, and give an overview of the 2017 Regional Plan Update. She presented a video on these topics. Ms. Knox informed that TMRPA was designed to foster coordination around the use of land and regional issues of concern, such as air quality, water and infrastructure; and while the whole of Washoe County is included in the Plan, the emphasis is on the more heavily populated areas. TMRPA develops and maintains the Comprehensive Regional Plan which spans twenty years and coordinates growth across the region.

Ms. Knox expressed that the purpose of planning regionally addresses the needs of citizens who impact multiple regions in an area. TMRPA has a variety of regional partners in the community, including the Washoe County Health District. She informed that their data and analysis have been used by various groups including the Economic Development Authority of Western Nevada and the Western Regional Water Commission.

Ms. Knox stated that TMRPA’s accomplishments since 2012 have included the completion of 40 collaborative projects while leveraging over $1M from regional partners and maximizing the investment of government dollars.

She announced that they have recently launched the Public Participation Phase of the 2017 Regional Plan Update, and that this presentation is the required five-year update. The last major update to the Plan was in 2007, and the community has undergone major changes in land use, demographics and economy during that decade. Ms. Knox informed that this Plan is in response to these changes and those that are being forecast.

Ms. Knox detailed ways to become engaged with this process, such as by taking the survey that can be accessed on their website, plantruckeemeadows.org (<http://tmrpa.org/regionalplanupdate2017/>). On that site, citizens can also subscribe to obtain the newsletter. She thanked staff for posting this information on the Health District website and social media; assisting TMRPA’s efforts to engage as many people as possible.

Ms. Knox thanked the Board for the opportunity to present at the meeting, and offered to answer any questions.

Because it is a twenty-year Plan and forecasts for population growth are substantial, Mr. Dahir question if the Plan took into account the expanded infrastructure this type of growth would require. He noted that he had not seen any information on that aspect of regional planning in their presentations or on the TMRPA website.

Ms. Knox stated that their Consensus Forecast, which is a population projection for the region, is required to be used in expanding infrastructure or any other type of project. She informed that they have infrastructure policies that guide growth through requirements in the Master Plan of the local jurisdictions.

Mr. Dahir asked if there was a tool in place to discern what type of infrastructure would be required in the future, and Ms. Knox replied that there was not as of yet, but they are working to provide that type of information.

Dr. Hess inquired if this website would eventually have information on the population and infrastructure needs of the community into the future.

Ms. Knox indicated that information would become available within this update and would be posted on their website.

Mr. Dick encouraged the Board to take the survey, not only to provide their input, but to experience the interactive survey tool that TMRPA utilized for this purpose.

**8. Regional Emergency Medical Services Authority**

Presented by JW Hodge and Kevin Romero

A. Review and Acceptance of the REMSA Operations Report for August 2017

Mr. Hodge stated that he was available to answer any questions.

Mr. Dahir wished to welcome Mr. Hodge into his new role as Chief Operating Officer with REMSA.

**Mr. Brown moved to approve the Review and Acceptance of the REMSA Operations Report for August 2017. Mr. Dahir seconded the motion which was approved six in favor and none against.**

\*B. Update of REMSA’s Public Relations during August 2017

Mr. Romero informed that from July 30th – August 2nd they had collaborated with the Truckee Meadows Fire Protection District to provide two medical aid stations, two response units and an on-site manager at the PGA Barracuda Championship.

On August 7th – 13th, additional medical staff was added to provide Emergency Medical Services (EMS) coverage at eight venue sites for the Hot August Nights Event.

On August 25th - September 5th, REMSA supplemented the Gerlach Fire Department with an ALS Ambulance for ten days during the Burning Man Event. Mr. Romero stated that REMSA had worked with Washoe County Emergency Manager, Aaron Kenneston, and Richard Walsh at Gerlach Fire Department to increase their service capacity.

He stated that REMSA had worked with the City of Sparks Fire Department and the Sparks Nugget to provide EMS at the Rib Cook Off, and provided a medical clinic in conjunction with Saint Mary’s Regional Medical Center at the National Championship Air Races. This effort included multiple medical response units, two ambulances dedicated to crash and fire rescue with the Reno Fire Department, and positioned Care Flight at the event, as well.

Mr. Romero informed that they were beginning operations for the Street Vibrations Event, which includes additional staffing for REMSA and law enforcement.

He stated that all of the efforts mentioned are to minimize any impact on normal 911 operations.

Mr. Romero informed that REMSA Tactical Paramedics also work with the White House Advance Team, Secret Service and local law enforcement during the President’s visits to region.

He stated that REMSA had participated in two hospital exercises in the past month, and lastly, that the Wingfield and Spanish Springs unit will now have 24-hour coverage beginning October 15th. This station had previously been staffed sixteen hours per day.

Mr. Dahir requested explanation of the Penalty Fund, noted at the end of the report. Mr. Hodge explained that this account is funded by penalties charged to REMSA for arriving at a call later than the parameters of the agreement, and these monies are used to fund community projects or other projects as approved by the District Health Officer. Any expenditure from this fund is reported to the Board in the REMSA Operations Report.

**9. Discussion of Process and Presentation of Evaluation Forms for the District Health Officer’s Annual Review and Possible Direction to Staff to conduct the evaluation.**

Presented by: Laurie Griffey

Ms. Griffey explained that the evaluation of the District Health Officer is an annual process, and the survey questions are the same as were used last year for both the District Health Officer and the County Manager. Ms. Griffey explained that Board approval is required to proceed with the evaluation. The 360 Evaluation is sent to the list of persons contained in the packet, the results are tabulated and a report on the outcome will be presented at the October District Board of Health Meeting.

Dr. Novak requested the deadline date for completion of the survey. Ms. Griffey replied the deadline would be October 17th.

**Dr. Hess moved to approve the Discussion of Process and Presentation of Evaluation Forms for the District Health Officer’s Annual Review and directed Staff to conduct the evaluation. Mr. Brown seconded the motion, which was approved six in favor and none against.**

**10. \*Staff Reports and Program Updates**

1. **Air Quality Management, Charlene Albee, Director**

Program Update, Divisional Update, Program Reports

Ms. Albee stated that she had nothing to add to her report and would be happy to answer any questions.

Vice Chair Novak inquired if Ms. Albee would like to comment on the meeting she attended.

Ms. Albee stated that she had been in Seattle, attending the National Association of Clean Air Agencies (NACAA) meeting, and informed that the group is comprised of Air Quality Directors from State and local governments across the country, representing forty states and 116 local governments. She expressed that it was a very productive meeting, with topics including national and regional updates and current events. Ms. Albee chaired a panel on wildfire smoke, and had been intrigued by the level of interest that Midwestern states had shown on wildfire smoke due to the impact this season’s large fires had on their regions. They are not normally impacted, and were looking for direction from the western states.

Ms. Albee spoke of the opportunity to meet a new Administration Representative for NACAA, a liaison to the Congressional Office. In their meeting, the group was able to inform the Representative of their region’s needs for him to support in Washington D.C. She reported that they also had a very productive meeting with their EPA Staff Member who is the head of the Office of Air Quality Planning and Standards.

Regarding the agenda item for donation of air monitoring equipment, Ms. Albee informed that South Florida’s local Air Quality Division expressed interest in some of the available items. NACAA will create a list of equipment on their website to match needs with availability.

After her year’s tenure as a Local Board of Directors Member for NACAA, Ms. Albee disclosed that she has been elected to the Executive Board of Directors as Treasurer for a one-year term. Election to this position begins the succession to vice president and president.

Vice Chair Novak congratulated Ms. Albee on her election. He inquired if FEMA has portable equipment for Air Monitoring following a natural disaster. Ms. Albee replied that it is EPA who has that equipment, and that each regional office has mobile equipment for deployment. She informed that deployment has become more responsive with lessons learned from 9/11.

Mr. Dahir inquired if there has been any change in status in Washoe County’s Ozone Designation. Ms. Albee informed that Washoe County is expected to be designated as attainment with the Exceptional Events Demonstration. She explained that each regional office will taking action on a state–by-state basis to measure attainment, and that Washoe County will be reviewed by Region 9. A letter will be sent to each state by the EPA indicating which regions have met the criteria for attainment. Ms. Albee opined that it is expected Nevada’s letter will show all areas to be in attainment, with the possible exception of some areas of Clark County. There will be no final action until the Clark County issue is resolved. Ms. Albee informed that Washoe County’s margin of attainment is narrow and there is much work to be done. In relation to this topic, at the NACAA meeting, she met with South Coast Air Quality and several other agencies in California regarding initiatives to reduce emissions from diesel transport trucks and locomotives. Ms. Albee hoped to have an update for the Board on these initiatives at the October meeting.

1. **Community and Clinical Health Services, Steve Kutz, Director**

Program Report – Fetal Infant Mortality Review Program; Divisional Update – New Public Health Nurse Supervisor; Data & Metrics; Program Reports

Mr. Kutz informed that he had nothing to add to his report, but was available to answer questions.

Mr. Delgado requested clarification on the report statistics that showed the greatest number of infant deaths occurred in the 89502 area. The statistics show an increase from 19% in 2016 to 32% in 2017. He inquired what is being done to address this issue and requested Mr. Dick to speak to the Truckee Meadows Healthy Community initiative to positively impact the 89502 area. Mr. Kutz replied that data showed the lack of early prenatal care in the area, and that CCHS has been collaborating with the local Fetal Infant Mortality Review (FIMR) group to start the “Go Before You Show” campaign that encourages early prenatal care. Mr. Kutz informed that he would need to obtain more data from the FIMR team to answer questions specific to the 89502 increase in infant deaths. He indicated that he could report his findings at the October District Board of Health Meeting.

Mr. Dick informed that the Truckee Meadows Healthy Communities has focused a number of resources around Family Health Festivals held primarily in the 89502 area with the most recent being held outside of that zip code. He stated that one focus of these events is assistance to enroll citizens in Medicaid and the Silver State Exchange Insurance programs, facilitating the ability to obtain medical care. Mr. Dick informed that there hasn’t been a targeted initiative for pregnant mothers in their first trimester, but opined that the “Go Before You Show” campaign provides the opportunity to distribute those materials at future Family Health Festivals.

Mr. Delgado expressed concern over the increase in infant mortality, and that he is very interested in the results Mr. Kutz will provide. He stressed that there has historically been a broad spectrum of health concerns in the 89502 area, and requested assurance that Washoe County Health District and Truckee Meadows Healthy Communities would maintain the health of the citizens as their primary focus.

Mr. Kutz informed that he and the Community and Clinical Health Services staff are members of the statewide Safe Sleep Workgroup, whose focus is to promote safe sleep activities for infants. He stated that there have been statewide radio and television spots and collaboration with REMSA and the Washoe County Human Services Agency to educate parents on safe sleeping practices for infants, which is alone, on their backs, in a sleeper with no blankets or bumper pads, and in the parent’s room. Mr. Kutz informed that all information is available in both English and Spanish.

Mr. Dick informed that the Pack and Play cribs and information on the Cribs for Kids campaign were available at recent Family Health Festivals. He also noted that, while the increase in the 89502 area was alarming, the percentage can vary widely year-to-year for each area due it being calculated on the 78 total cases in the community.

Mr. Delgado reiterated the importance of assuring citizens the best service possible through the chosen initiatives of the Washoe County Health District and Truckee Meadows Healthy Communities.

Mr. Dahir requested the definition of a Fetal Anomaly, as contained in the report. Mr. Kutz informed that it is an organ or systemic defect, such as with the heart or lungs. Mr. Dahir noted that there was an increase in the instance of these anomalies, and Mr. Kutz stated that it can be the result of congenital defect, exposure to substances and various other causes. Mr. Kutz informed the Board that this report is based on data from the second full year of the Fetal Infant Mortality Review Program, therefore, the amount of historical data is limited with which to calculate trends. He stated that the Washoe County Health District is the first in the state of Nevada to have a FIMR Program, and that they partner with other participating jurisdictions to share information. Mr. Dahir opined that it may be beneficial to categorize the data for anomalies related to drug use and those that are not. Mr. Kutz replied that he would investigate how the anomalies are reported to discern if this could be done, but opined that data collected on the mothers could be a source.

1. **Environmental Health Services, Kevin Dick, Acting Director**

EHSDivision and Program Updates – Food, Land Development, Schools, Vector-Borne Disease and Waste Management

Mr. Dick stated the Food Program is continuing to provide education to the public and food establishments, as well as provide tools for them to identify service animals versus therapy and emotional support animals.

Mr. Dick informed that the last helicopter application of larvicide was on September 20th and 21st. He noted that the cooler temperatures will decrease mosquito activity.

Regarding Waste Management, Mr. Dick wished to inform the Board that the new Washoe County Franchise Agreement with Waste Management (WM) allows WM to terminate services for customers who are delinquent in their payment for services. Letters were sent by Waste Management on 9/28/17 to inform residential customers whose bills are delinquent that their services will be terminated. Mr. Dick explained that Washoe County Health District regulations require disposal of residential garbage within seven days, but the regulations do not require residents have garbage service. Facilities that are permitted by Washoe County District Board of Health Regulations Governing Solid Waste Management are required to have garbage service. However, the Health District regulations do not require garbage service from WM Franchise and therefore it is not within the Health District’s jurisdiction to enforce the County’s WM Franchise Agreement.

Mr. Delgado inquired if this information affected the entire county, knowing that the cities of Sparks and Reno have separate agreements. Mr. Dick thanked him for his question, and informed that this information affected the unincorporated area of Washoe County only.

Vice Chairman Novak inquired who would enforce residential garbage disposal if it goes beyond the seven day limit. Mr. Dick informed that, per the Washoe County Health District regulation, Environmental Health Services would respond to complaints, require the refuse to be removed and have the authority to cite the resident if appropriate.

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

Program Updates for Communicable Disease, Public Health Preparedness, and Emergency Medical Services

Dr. Todd indicated that there were updates to his written report, beginning with West Nile Virus. The number of human cases in the report was twelve, but has increased to twenty-one officially reported cases thus far this year. Dr. Todd stated he was also thankful for the cooler weather and its reduction of mosquito activity. He informed that this is the highest number of cases ever reported in Washoe County, with the previous record of seventeen cases in 2006.

Dr. Todd informed that the number of reported cases of coccidioidomycosis (Valley Fever) was twelve in his report, but had increased to seventeen. He stated that this, also, is a record in Washoe County, with the previous record of nine cases in 2015. A number of the current cases appear to have no exposure outside of Washoe County. Dr. Todd explained that the area for this fungi seems to be expanding from those shown on maps produced in the 1940’s and 50’s, referring to a new habitat in Washington State. He reported that the results from field testing in this region with Environmental Health and the Centers for Disease Control have not been received.

Dr. Todd informed of plans for a number of Points of Dispensing (PODS) for influenza vaccine this Fall. Most of the PODS will be provided by partners of the Health District, and EPHP will assist in providing services. He stated that there will be a public POD at the County complex at approximately 2:00 p.m. on October 4th with approximately 400 participants expected.

Vice Chair Novak inquired how the public will be notified of the POD held at the County complex. Dr. Todd replied that advertising is limited due to a limited supply of vaccine, and the targeted groups are participants of the Rural Area Medical Event and other select groups.

Vice Chair Novak inquired if there had been advertisement of this POD in the 89502 zip code, due to the number of persons there who might not otherwise be able to obtain this vaccination.

Mr. Delgado interjected that it will be interesting to obtain Mr. Kutz’ report to learn how the Spanish speaking community is informed of these types of events.

Dr. Todd expressed again that the reason for limiting the outreach to notify the entire community of this POD is due to limited supply of the vaccine.

Vice Chair Novak inquired if the CDC was in the process of producing a new map for coccidiodomycosis. Dr. Todd informed that the map had been revised slightly upon identification of that fungus in the state of Washington, and may also be altered if it is found in the Washoe County area, as well. He stated that CDC indicated that they are not able to do this type of mapping now, although it had been done in the 1940’s and 50’s. Vice Chair Novak inquired if this is a reportable disease with the CDC, and Dr. Todd confirmed that it was in Nevada and some other Western states, but that it might not be reportable in Eastern states.

1. **Office of the District Health Officer, Kevin Dick, District Health Officer**

District Health Officer Report – Water System Regulation and Plan Reviews, Regional Business License and Permits Program, Public Health Accreditation, Community Health Needs Assessment, Truckee Meadows Healthy Communities, Board Member Engagement, Other Events and Activities, and Health District Media Contacts

Mr. Dick informed that he continues to work with TMWA, the NDEP and local jurisdictions to streamline the water project submittal and approval process. He stated that attachments to his report had been presented in a meeting with the Associated General Contractors (AGC) on September 20th. This information covers issues that have been resolved to streamline the review process.

In collaboration with TMWA and NDEP, one such improvement is the decision to add a generic statement on plans and have easement information provided through the construction completion letter to help alleviate delays in the early stages of review.

Another improvement is to review for conformance with NAC standards and not TMWA design standards.

Mr. Dick informed that guidance has been provided to help contractors understand the types of projects that require a water project submittal, due to a misconception in the community that all projects required water project submittals. Working with TMWA, the minority of projects that do require submittals were identified, which provided opportunities for dispelling misconceptions about delays in the process. Mr. Dick spoke of the plan to meet with Don Tatro of BANN and the design engineering community to relate this information to them.

Mr. Dick stated that another factor emphasized in the meeting with the AGC Group were the NAC guidelines that contractors must comply with in the plans they are submitting.

Another issue discovered is that developers often do not engage TMWA in the early phases of a project to discern whether there is sufficient water for the project, or if TMWA would need to provide water rights for a project to proceed. TMWA also needs to identify capacity requirements in the system which affects the project design. The contractor then needs to develop a design for TMWA to review, and if approved, the plan is sent to the Health District for review. Mr. Dick informed that this process can take quite a bit of time, and if steps are not followed correctly, delays will result. He explained that the flow charts shared at the AGC meeting show the plan review process as it is now and the ideal submittal flow if TMWA is engaged at the beginning of a project.

Mr. Dick stated that the discussion with NDEP has been around the specific requirements in NAC for the separation distances, and whether there could be potential to provide some additional flexibility and accommodation in the requirements without jeopardizing public health protection.

He informed that the other discussion the group is having is in regards to larger water systems such as TMWA; whether it would be more efficient to have a different oversight approach than that of the Health District reviewing each of the water project plans. NDEP has indicated they are willing to explore that possibility, and discussions with NDEP, the Health District and TMWA will continue along those lines. Mr. Dick informed that the development community would also be engaged if opportunities exist for sensible changes to NAC regarding the approach to development. With regulations dating back to 1997 and all of the advances made since that time, it seems to be justifiable to examine the regulations for potential revision.

Mr. Dick informed that he has been questioned as to why the Health District is involved in the water project plan review process if TMWA is also reviewing the plans.

Mr. Dick stated that his responsibilities are to protect public health and comply with the law as defined by the NAC. So while the Health District is required to be involved per NAC, Mr. Dick stressed that there are concerted efforts to make the process as seamless as possible under the existing regulations.

Mr. Dahir inquired if Mr. Dick perceived TMWA to accept the concept that incomplete plan designs are coming to the Health District, thereby causing delays. Mr. Dick informed that one positive aspect of these efforts is that it has resulted in better communication between TMWA and the Health District, and improvement has already been noted in plans coming to the Health District. Also noted are TMWA’s efforts to determine the cause of issues as they arise to possibly improve their processes as well.

Mr. Dick stressed that one of the consequences that exists with an exploding development environment is that there are a limited number of resources within both the regulatory agencies and engineering design community. The volume of new projects has overwhelmed engineering firms, which may affect their ability to move work forward.

Mr. Dahir inquired about the previously discussed concurrent plan review between the Health District and TMWA. Mr. Dick replied that, in a meeting on 9/27/17, it was agreed to initiate concurrent review as a pilot program. Mr. Dick opined that a revised version of this pilot may be needed to realize maximum efficiency.

Mr. Dahir inquired that, in light of the requirements of this situation, does the Health District have the proper planning group and enough staff to provide service required in the plan review process. Mr. Dick opined that the level of staffing is sufficient at this time, but it is being monitored.

Mr. Dick stated that a better workflow design in Accela would greatly improve production, explaining that the Health District must interface with the three local jurisdictions in the water plan review process. He informed that the Health District obtained a quote from an Accela Professional Services firm for development of a sub-process to improve interface workflow, and to have that sub-process installed at each agency to maximize productivity and improve reporting.

Mr. Young inquired if Las Vegas has a similar submittal process to Washoe County. Mr. Dick noted that this subject has been a component of the discussion with NDEP, in that Southern Nevada Health District does not review water plans but Washoe County Health District does. He informed that the NAC requires the Health District to review these projects, and the question has become then, why isn’t SNHD reviewing these project plans also? Mr. Dick opined this regional difference in processes may be beneficial in the objective for NAC regulations to be reviewed. Mr. Young expressed his appreciation for the effort invested and improvements thus far, and opined that the workflow process would become much more streamlined as a result. Mr. Dick expressed that this effort is definitely collaborative, and that all parties are working together to provide the best water distribution system that is protective of public health while maintaining compliance with existing regulations.

Mr. Dick reported on a Community Health Needs Assessment (CHNA) meeting on September 8th with eighty community partners in attendance, with the purpose of defining Priorities for the Community Health Improvement Plan. Mr. Dick expressed his excitement at how well the event was received and by the amazing job of Health District staff member, Ms. Kerwin, who organized and provided the presentation for status on the CHNA. Each attendee had five votes for the areas they felt were of the greatest benefit to the community within the twelve health topics listed and their focus areas for initiatives whose results are measurable. He informed that Social Determinates rose to the top with Housing as the subtopic area that garnered the most votes. In order, Mental Health, Access to Health and Substance Use were the next highest ranked. Ms. Kerwin also reported on the results of the communitywide survey at that meeting, and that the survey results would be included also in the CHNA. Mr. Dick informed that an algorithm was developed to calculate the priorities from data that is still being collected, and that the results change weekly. He stated that the CHNA should be complete by mid-December of this year.

Mr. Dick informed that the Remote Area Medical (RAM) Event, which is a free medical, dental and vision clinic provided by volunteers using equipment and methodology provided by RAM, would begin at 6:00 a.m. on 9/29/2017. The equipment truck was being unloaded at the Boys and Girls Club and the location was to be ready for service by 5:00 p.m. He explained that transportation to the Event would be staged at the Washoe County Complex to the Boys and Girls Club, and that the gates of the County Complex would open at midnight to the public. Those present will be assigned a number in order to obtain services, with the number of persons served based on the number of medical volunteers. Mr. Dick explained that RTC is providing shuttle service from the Complex, due to constrained parking at the Boys and Girls Club.

Mr. Dick informed that there will be a small-scale Family Health Festival at the Health District from 9:00 a.m. to 1:00 p.m. on 9/29/2017, in conjunction with the RAM Event. There will be a Media Tent in operation from 5:00-9:00 a.m., and the Public Health Communications Program Manager, Mr. Ulibarri, requested Mr. Dick to invite any of the Board Members who would want to participate. He informed that Mr. Slonim would be present, in representation of Truckee Meadows Healthy Communities, with whom the Health District has partnered in the organization of this RAM Event. Mr. Dahir informed he’d volunteered for a twelve-hour shift at RAM on that day.

Mr. Dahir wished to thank staff for their work in the Community Health Needs Assessment, stating he thought it important for the Board to know that the Health District is leading the community in these conversations and doing a fine job of it. He stated that it was enlightening to watch the broad spectrum of participants coming together on common ground to determine the areas of focus for the betterment of the community. Mr. Dahir expressed thanks to Ms. Kerwin for her fantastic work, and that the event was very successful and insightful.

Vice Chair Novak agreed that it is very important for staff to hear how much they are appreciated for their work and level of commitment. He opined that a letter of thanks from the Board to staff for another year of their hard work was in order.

Mr. Delgado stated he looked forward to the final outcome of the Community Health Needs Assessment, and was excited for the jurisdictions to have that data as a tool to better plan for land use and development with the focus on community health.

**11. \*Board Comment**

Vice Chair Novak requested an update on Accela program and on Accreditation.

Mr. Dahir noted that the November 16, 2017, District Board of Health Meeting date is in conflict with the in North Carolina National League of Cities, and could prove difficult to have quorum for the DBOH Meeting.

Vice Chair Novak noted that there is also the upcoming November 2nd Strategic Plan Workshop, and that is important to have a majority of Board Members in attendance. He requested Ms. Rogers to email the Board to confirm quorum for both dates.

**12. \*Public Comment**

Ms. Cathy Brandhorst expressed concern for some of our community’s children.

**Vice Chair Novak closed the public comment period.**

**13. Adjournment**

**Vice Chair Novak adjourned the meeting at 2:22 p.m.**

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**Possible Changes to Agenda Order and Timing.**  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 agenda.

**Special Accommodations.** 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.

**Public Comment.** During the “Public Comment” items, anyone may speak pertaining to any matter either on or off the agenda, to include items to be heard on consent. For the remainder of the agenda, public comment will only be heard during items that are not marked with an asterisk (\*). Any public comment for hearing items will be heard before action is taken on the item and must be about the specific item being considered by the Board. In order to speak during any public comment, each speaker must fill out a “Request to Speak” form and/or submit comments for the record to the Recording Secretary. Public comment and presentations for individual agenda items are limited as follows: fifteen minutes each for staff and applicant presentations, five minutes for a speaker representing a group, and three minutes for individual speakers unless extended by questions from the Board or by action of the Chair.

**Response to Public Comment.** 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.”

**Posting of Agenda; Location of Website.**

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

Downtown Reno Library, 301 S. Center St., Reno, NV

Washoe County Health District Website [www.washoecounty.us/health](http://www.washoecounty.us/health) State of Nevada Website: [https://notice.nv.gov](https://notice.nv.gov/)

**How to Get Copies of Agenda and Support Materials.** Supporting materials are available to the public at the Washoe County Health District located at 1001 E. 9th Street, in Reno, Nevada. Ms. Laura Rogers, 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. Rogers is located at the Washoe County Health District and may be reached by telephone at (775) 328-2415 or by email at [lrogers@washoecounty.us](mailto:lrogers@washoecounty.us). Supporting materials are also available at the Washoe County Health District Website [www.washoecounty.us/health](http://www.washoecounty.us/health)pursuant to the requirements of NRS 241.020.