

MINUTES OF THE CENTRAL NEVADA HEALTH DISTRICT

155 N. Taylor St., Fallon, NV 89406

January 12, 2023

Call to Order:

The regular meeting of the Central Nevada Health District was called to order at 1:39 PM on January 12, 2023.

PRESENT:

Ken Tedford, Chairman
Cassie Hall, Vice-Chair
Shannon Ernst, Member
Jim Barbee, Member
Bob Erickson, Member
Denise Ferguson, Member
Larry Rackley, Member
Tyson McBride, Member
Dr. Justin Heath, Member
Caleb Cage, Interim Transition Manager
Jeff Weed, Civil Deputy District Attorney
Morena Works, UNR School of Medicine
Dr. Tedd McDonald, Interim Health Officer
Pamela D. Moore, Deputy Clerk to the Board
Brittany Burton, Office Specialist

Pledge of Allegiance:

The Pledge of Allegiance was recited by the board and public.

Public Comment:

Chairman Tedford asked if there was any public comment but there was none.

Verification of the Posting of the Agenda:

It was verified by Pamela D. Moore, Deputy Clerk to the Board, that the Agenda for this meeting was posted on the 6th day of January, 2023, between the hours of 2:00 PM and 5:00 PM at all of the locations listed on the Agenda, in accordance with NRS 241.

Consideration and possible action re: Approval of Agenda as submitted or revised:

Member Justin Heath made a motion to approve the Agenda as submitted. Member Larry Rackley seconded the motion, which carried by unanimous vote.

Old Business:

A- Consideration and possible action re: Update on Medicaid application.

Marena Works made this presentation as outlined above.

Marena Works stated that in the December 2022 meeting, the Board was asked to supply personal information for the Medicaid application for medical billing purposes. All personal information has been received we are now waiting for the EAN number in order to begin a new

application. Once all the information is received, the application should only take a few days and then we should get an estimate from Nevada Medicaid on how long until we can expect to be approved.

FISCAL IMPACT: N/A

EXPLANATION OF IMPACT: N/A

FUNDING SOURCE: N/A

ACTION REQUESTED: None; Informational Only

B- Consideration and possible action re: Update on EAN, DUNS, and SAMS applications.

Caleb Cage made this presentation as outlined above.

On December 19th, 2022, the SS-4 form was completed and submitted to the IRS as required. The review and notification process can take up to 60 days. Once an EIN is obtained, it will be submitted to the State of Nevada for approval for tax exemption, and the application process to obtain a SAMS, and DUNS number will be started as required to apply and receive State and Federal grant funds.

FISCAL IMPACT: N/A

EXPLANATION OF IMPACT: N/A

FUNDING SOURCE: N/A

ACTION REQUESTED: None; Informational Only

C- Consideration and possible action re: Update on Logo and Website design and possible contractor proposal to be reviewed.

Caleb Cage made this presentation as outlined above.

Canyon Creative & Design is a vendor in the state of Nevada and they were able to provide a proposal for development of the website for the health district and also regarding the logo. If the board approves the logo we would send it back to Canyon Creative & Design, they would modify it and make sure that the logo is in usable format for stationary to billboards.

FISCAL IMPACT: Yes - Amount to be determined

EXPLANATION OF IMPACT: A cost will be associated with developing and rolling out the logo and website. The cost to be determined once the final quote is received.

FUNDING SOURCE: Paid for by Churchill County Social Services from a State of Nevada DPBH / CDC Workforce grant obtained for the project.

ACTION REQUESTED: Accept

Member Shannon Ernst made a motion to approve the website for up to \$4,725 and addition up to \$1,600 to do clean up on the logo. Member Jim R. Barbee seconded the motion, which carried by unanimous vote.

D- Consideration and possible action re: Approval to submit an application on behalf of the CNHD Board members to join the National Association of Local Boards of Health (NALBOH) and National Association of County and City Health Officials (NACCHO).

Marena Works made this presentation as outlined above.

Marena Works at the December 2022 meeting, the Board was asked to consider joining both organizations. These professional organizations support local health departments and their staff/board members in carrying out their duties. By joining, the CNHD will have access to updated information, toolkits, funding opportunities and numerous other benefits that come with membership.

FISCAL IMPACT: Churchill County to pay on behalf of CNHD with reimbursement to be made by the City of Fallon for a total of \$500.

EXPLANATION OF IMPACT: These are yearly fees for the health department to be recognized by these organizations and allow access to member only content and benefits.

FUNDING SOURCE: The City of Fallon has agreed to pay for the first year's dues.

ACTION REQUESTED: Accept

Member Jim R. Barbee made a motion to approve the Central Nevada Health District to join both the National Association of Local Boards of Health and the National Association of County and City Health Officials for the amount of \$250 and \$260 respectively, per year which will be paid by Churchill County and reimbursed by the City of Fallon. Member Cassie Hall seconded the motion, which carried by unanimous vote.

New Business:

A- Consideration and possible action re: Presentation of a draft six and twelve month budget, including proposed division employee positions.

Marena Works made this presentation as outlined above.

The proposed budget outlines positions, services, supplies and equipment anticipated to operate the Central Nevada Health District. There is presented a 6 month budget covering the period of January 1, 2023 through June 30, 2023 and a 12 month budget covering the period of July 1, 2023 through June 30, 2023. At this time there is a discrepancy in revenue versus expenses as there are several unknowns in expected grant amounts and revenue from fees. The budget will be readdressed monthly until all unknowns are accounted for. This budget includes the proposed positions needed for a functional health department.

Central Nevada Health District

Budget - Administration, PHP, Clinical, Environmental Services Jan 2023 - June 2023

PERSONNEL COSTS

Category	District Administration	Budgeted FTE	Salary per 1.0 FTE	Low Budget per 1.0 FTE	High Budget per 1.0 FTE	Total Costs (Mid-range)	Low Budget	High Budget
1 Salaried	District Administrator	1.0	58,183	49,618	66,747	58,183	49,618	66,747
5 Salaried	Full Time Bookkeeper	1.0	27,755	34,694	41,632	27,755	27,755	41,632
	Subtotal: District Administration	2.0	85,938	84,312	108,379	85,938	77,373	108,379

Category	Clinic Services	Budgeted FTE	Salary per 1.0 FTE*	Low Budget per 1.0 FTE	High Budget per 1.0 FTE	Total Costs (Mid-range)	Low Budget	High Budget
2 Salaried	Clinical Services Manager	1.0	43,285.00	36,920.00	49,650.00	43,285.00	36,920.00	49,650.00
	Subtotal: Clinic Services	1.0	43,285.00	36,920.00	49,650.00	43,285.00	36,920.00	49,650.00

Category	Environmental Health	Budgeted FTE	Salary per 1.0 FTE	Low Budget per 1.0 FTE	High Budget per 1.0 FTE	Total Costs (\$)	Low Budget	High Budget
1 Salaried	Environmental Health Specialist, Manager	1	39,612	31,689	47,534	39,612	31,689	47,534

Category	Public Health Preparedness (CDC & ASPR)	Budgeted FTE	Salary per 1.0 FTE	Low Budget per 1.0 FTE	High Budget per 1.0 FTE	Total Costs (\$)	Low Budget	High Budget
1 Salaried	Program Manager*	1.0	39,612.00	31,689.00	47,534.00	39,612.00	31,689.00	47,534.00
3 Salaried	Disease Investigator*	1.0	27,091.00	21,673.00	32,509.00	27,091.00	21,673.00	32,509.00
5 Salaried								
	Subtotal: Public Health Preparedness	2.0	66,703.00	53,362.00	80,043.00	66,703	53,362	80,043

Subtotal Personnel Costs - Salaried Positions (\$)

Subtotal Personnel Costs - Fringe Benefits (55% of Salaried Positions)

Total Personnel Costs

						235,538	199,344	285,606
						129,546	109,639	157,083
						365,084	308,983	442,689

Environmental Health Software Expenses

Item	Amount (\$)			
Monthly Subscription - User License Fees	1445.0	12.0		
Purchase EH Module	25900.0	1.0		17,340
Total Subscription - user license fees	27345.0			25900
			0	43,240

Item	Amount (\$)			Total Costs (\$)
In-State Travel (Continued ed?)	2,000	1.00		2,000
Out-of-State Travel	3,500	1.00		3,500
Fuel	7,000	1.00		7,000
Total Travel Costs				12,500
				12,500

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Budgets - Dropbox				
Item	Amount (\$)	Lines	Headsets	Sites
Medications				
Laboratory Supplies/CLIA License fee	4,000.00			
Office Equipment Repair & Maintenance	2,500			
Memberships and Publications	1,000			
Advertising	2,500			
Operating Supplies	2,000			
Office Supplies & Copying	2,000			
Postage and Shipping	500			
Phone and Fax (\$20 per line per month)	20	18 0		
Phone Headsets	245		18 00	
Total Service and Supply Costs				
				21,270
INDIRECT COSTS				
Total Indirect Costs (Churchill County as Fiscal Agent)		44,314		
Summary				
	Total Costs (\$)			
Personnel Costs	365,084	306,983	442,689	
Contractual Services Costs	25,000	25,000	25,000	
Travel Costs	12,500	12,500	12,500	
Equipment Costs				
Environmental Health Software Expenses				
Service and Supply Costs	43,240	43,240	43,240	
Indirect Costs	21,270	21,270	21,270	
Total Expenses	44,314	44,314	44,314	
	511,408	455,307	589,013	
CONTRACTUAL SERVICES				
Item				
IT Services	25000.0			25,000
Total	25000.0		0	25,000

Caleb Cage said this is a projected budget that will need to be supported through grants and funding that is provided by the partner jurisdictions. Funding by the partner jurisdictions will start July 1. Member Denise Ferguson questioned if the medical supplies, office supplies and infrastrucuter will be adopted by the District so that we will not need to replace them. Marena Works stated that yes sites have been identified in each county and no additional charge will be given to the Health District for the site. Also we are working with the State of Nevada to get a transfer of their equipment.

Member Jim Barbee said that even though these poistions are budgeted most of these postions are going to be transferred over from Churchill County Public Health that was started through COVID. These are not full new hires.

Central Nevada Health District
Budget - Administration, PHP, Clinical, Environmental Services

PERSONNEL COSTS

Category	District Administration	Budgeted FTE	Salary per 1.0 FTE	Low Budget per 1.0 FTE	High Budget per 1.0 FTE	Total Costs (Mid-range)			
1 Salaried	District Health Director/Officer	1.0	\$116,365.00	\$99,236.00	\$133,494.00	\$116,365.00	Low Budget	High Budget	
2 Salaried	Administrative Assistant	1.0				\$0.00	\$99,236.00	\$133,494.00	
3 Salaried	Grant Writer & Manager	1.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	On hold, will hire later if needed
5 Salaried	Full Time Bookkeeper	1.0	\$55,510.00	\$69,387.00	\$83,264.00	\$55,510.00	\$55,510.00	\$0.00	Future person not hiring at this time
Subtotal: District Administration		4.0	\$171,875.00	\$168,623.00	\$216,758.00	\$171,875.00	\$154,746.00	\$216,758.00	
Category	Clinic Services	Budgeted FTE	Salary per 1.0 FTE*	Low Budget per 1.0 FTE	High Budget per 1.0 FTE	Total Costs (Mid-range)	Low Budget	High Budget	
1 Salaried	Community Health Nurse Supervisor	1.0	\$86,569.60	\$73,840.00	\$99,299.20	\$86,569.60	\$73,840.00	\$99,299.20	
2 Salaried	Medical Assistant	2.0	\$96,064.00	\$41,828.00	\$56,243.00	\$196,068.00	\$41,828.00	\$56,243.00	
3 Salaried	Public Health Nurse*	2.0	\$26,670.00	\$65,395.20	\$87,984.00	\$153,340.00	\$130,790.40	\$175,968.00	
3 Salaried	Office Assistant	4.0	\$28,324.00	\$32,698.00	\$43,950.00	\$113,296.00	\$98,094.00	\$175,800.00	
4 Salaried	Advanced Practice Nurse	1.0	\$92,353.00	\$73,883.00	\$110,823.00	\$92,353.00	\$73,883.00	\$110,823.00	
Subtotal: Clinic Services		10.0	\$991,960.60	\$287,644.20	\$398,799.20	\$681,646.60	\$418,435.40	\$618,133.20	
Category	Hourly Positions	Budgeted FTE	Hourly rate	Salary	Low Budget	High Budget	Total Costs (\$)		
1 Hourly	Hourly Nurse	1	35	\$36,365.00	\$31,170.00	\$41,560.00	\$36,365.00	Low Budget	High Budget
2 Hourly	Hourly Nurse	1	35	\$36,365.00	\$31,170.00	\$41,560.00	\$36,365.00	\$31,170.00	\$41,560.00
3 Hourly	Bookkeeping Assistant	1	-	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4 Hourly	Environmental Health Specialist, Hourly			\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Subtotal Personnel Costs - Hourly Positions							\$72,730.00	\$62,340.00	\$83,120.00
Category	Environmental Health	Budgeted FTE	Salary per 1.0 FTE	Low Budget per 1.0 FTE	High Budget per 1.0 FTE	Total Costs (\$)	Low Budget	High Budget	
1 Salaried	Environmental Health Specialist, Manager	1	\$79,223.00	\$63,378.00	\$95,068.00	\$79,223.00	\$63,378.00	\$95,068.00	
2 Salaried	Environmental Health Specialist	1	\$69,387.00	\$55,510.00	\$83,264.00	\$69,387.00	\$55,510.00	\$83,264.00	
Subtotal: Environmental Health		2.0	\$148,610.00	\$118,888.00	\$178,332.00	\$148,610.00	\$118,888.00	\$178,332.00	
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Category	Population Health & Disease Prevention	Budgeted FTE	Salary per 1.0 FTE	Low Budget per 1.0 FTE	High Budget per 1.0 FTE	Total Costs (\$)	Low Budget	High Budget	
1 Salaried	Community Health Workers	1	\$42,286.00	\$36,067.00	\$48,506.00	\$42,286.00	\$36,067.00	\$48,506.00	
2 Salaried	Community Health Workers	1	\$42,286.00	\$36,067.00	\$48,506.00	\$42,286.00	\$36,067.00	\$48,506.00	
3 Salaried	Community Health Workers	1	\$42,286.00	\$36,067.00	\$48,506.00	\$42,286.00	\$36,067.00	\$48,506.00	
4 Salaried	Community Health Workers	1	\$42,286.00	\$36,067.00	\$48,506.00	\$42,286.00	\$36,067.00	\$48,506.00	
Program Manager		1.0				\$0.00	\$0.00	\$0.00	
Subtotal: Epidemiology		5.0	\$169,144.00	\$144,268.00	\$198,024.00	\$169,144.00	\$144,268.00	\$198,024.00	Will be a future hire, Clinical Manager will assume this role until then
Category	Public Health Preparedness (CDC & ASPR)	Budgeted FTE	Salary per 1.0 FTE	Low Budget per 1.0 FTE	High Budget per 1.0 FTE	Total Costs (\$)	Low Budget	High Budget	
1 Salaried	Program Manager*	1.0	\$79,223.00	\$63,378.00	\$95,068.00	\$79,223.00	\$63,378.00	\$95,068.00	
2 Salaried	Epidemiologist	1.0	\$76,690.00	\$65,395.00	\$87,984.00	\$76,690.00	\$65,395.00	\$87,984.00	
3 Salaried	Disease Investigator*	1.0	\$51,182.00	\$43,345.00	\$65,018.00	\$51,182.00	\$43,345.00	\$65,018.00	Possible for state to pay for this position
4 Salaried									
5 Salaried									

Subtotal: Public Health Preparedness		3.0	\$210,095.00	\$172,118.00	\$248,070.00	\$210,095.00	\$172,118.00	\$248,070.00	
Subtotal Personnel Costs - Salaried Positions (6)						\$1,381,370.60	\$1,008,455.40	\$1,455,317.20	Salaried
Subtotal Personnel Costs - Fringe Benefits (55% of Salaried Positions)						\$759,753.83	\$554,650.47	\$800,424.46	
Subtotal Personnel Costs - Hourly Positions						\$77,730.00	\$62,340.00	\$83,120.00	Hourly
Subtotal Personnel Costs - Fringe Benefits (5% of Hourly Positions)						\$3,636.50	\$3,117.00	\$4,159.00	
Total Personnel Costs						\$2,217,490.93	\$1,628,562.87	\$2,343,017.66	
CONTRACTUAL SERVICES COSTS									
Item						Amount (\$)			
Physician Oversight Services						\$30,000.00		\$30,000.00	\$30,000.00
Billing Services									
Pool/Pact Insurance									This is a percent of clinic revenue brought in by cash & insurance
IT Support						\$50,000.00		\$50,000.00	
Fiscal, Legal & HR Services P/O		1.0		81.698					
Total Contractual Services Costs						\$81,698.00		\$81,698.00	\$81,698.00
						\$161,698.00		\$161,698.00	\$161,698.00
Environmental Health Software Expenses									
Item						Sub-total		Total	
Annual Subscription - User License Fees		\$30.00	12.0	Users	4.0	\$1,440.00			\$1,440.00
Monthly Program Recurring Fees		\$725.00	12.0		1.0	8,700			\$8,700.00
Public Portal & Online Payments		\$400.00	12.0		1.0	7,200			\$7,200.00
Total Subscription - user license fees		\$1,155.00				\$17,340.00			\$17,340.00
Item						Total Costs (\$)			
In State Travel (Continued ed?)		\$2,000.00	1.00			\$2,000.00			
Out-of-State Travel		\$3,500.00	1.00			\$3,500.00			\$2,000.00
Fuel		\$7,000.00	1.00			\$7,000.00			\$3,500.00
Total Travel Costs						\$12,500.00			\$7,000.00

**Central Nevada Health District
Revenue Scenarios**

Grants current as of		State Grants	Estimated Revenue- Churchill County	Estimated Revenue- Pershing County	Estimated Revenue- Mineral County	Estimated Revenue- Eureka County	Estimated Revenue- Fallon	TOTAL	Churchill Assessment	Pershing Assessment	Mineral Assessment	Eureka Assessment
State of Nevada												
Immunization Grant	150,000							150,000	All of these columns are estimated, could be higher or lower and it may not account for all the			
ABPA Fund	250,000							250,000				
STD Grant	5,000							5,000				
Family Planning Grant	250,000							250,000				
Capacity Building Grant	200,921							200,921				
FHP Grant	252,000							252,000				
Subtotal: State of Nevada	1,027,921							1,027,921				
Note: grant funding is based only on what Carson City is receiving												
County Funding												
Current State EH Assessment Fee												
Current State CHN Assessment Fee												
County flat fees		100,000	100,000	100,000	100,000	100,000	100,000					
County Per capita fees		87,265	23,615	22,540	8,815	46,635						
Subtotal: County Funding	0	187,265	123,615	122,540	108,815	146,635	686,870					
Estimated Additional Revenue - Adjusted												
Burning Man			15,000				15,000	Estimate				
Health Inspection Fees - Temp Events	2,075		450	575	425	3,525						
Health Inspection Fees - Non-temp events	43,969		10,713	13,670	7,190	75,542						
Clinic Services	17,341		4,349	19,257								
Private Vaccines												
State Vaccines												
Subtotal: Additional Revenue	0	58,385	20,512	33,502	7,615	130,614						
Total Estimated Revenue	1,027,921	245,650	154,127	156,042	116,430	246,635	1,846,805					
STATE OF NEVADA GRANTS		1,027,921.00										
COUNTY FUNDING		686,870.00										
ADDITIONAL REVENUE		130,014.00										
TOTAL REVENUE		1,844,805.00										

State clinic revenue projection on population at \$3.00 per capita
Add Clinical Settlements

County Contributions & Per Capita

	Churchill Co	Pershing Co	Mineral Co	Eureka	Fallon
County flat fees	100,000	100,000	100,000	100,000	
County Per capita fees	87,265	23,615	22,540	8,815	46,635
Total flat fees plus per capita	187,265	123,615	122,540	108,815	
20% Contingency	37,453	24,723	24,508	21,763	29,327
Total	224,718	148,338	147,048	130,578	75,962

Opioid Settlement

Current contribution	124,548	52,885	62,726	14,472	
Proposed assessment including contingen	100,170	95,453	84,322	116,106	Minus what they are currently paying

County Contributions

CC	PC	MC	EC	Total
45,817	11,816	13,022	7,958	78,613
54,731	38,069	40,104	6,214	139,118
100,548	49,885	53,126	14,172	217,731

Increase from Current Assessment

133,352	73,730	69,414	94,643
24,000	3,000	9,600	300
109,352	70,730	59,814	94,343

All Counties Combined using Fiscal '18 numbers

Central Nevada Health District

Budget - Environmental Health

PERSONNEL COSTS

Category	Environmental Health Personnel	Budgeted FTE	Salary per 1.0 FTE*	Low Budget per 1.0 FTE	High Budget per 1.0 FTE	Total Costs (Mid-range)	Low Budget	High Budget
1 Salaried	Environmental Health Specialist, Manager	1	79,223	63,378	95,068	79,223	63,378	95,068
2 Salaried	Environmental Health Specialist	1	69,387	55,510	83,264	69,387	55,510	83,264
Subtotal:		2.0	148,610	118,888	178,332	148,610	118,888	178,332

May put this on hold depending on budget

Category	Hourly Positions	Hours	Hourly Rate (\$)	Low Budget Hourly Rate	High Budget Hourly Rate	Total Costs (\$)	Low Budget	High Budget
1 Hourly	Environmental Health Specialist, Hourly	1,039	0	0	0	0	0	0
Subtotal Personnel Costs - Hourly Positions						0	0	0

Category	Services & Supplies							
	Operating Supplies		1,000.00			1,000		
	Software fees		17,340.00			17,340		
	Travel expenses		2,000.00			2,000		
			20,340.00			20,340		
Subtotal Personnel Costs - Salaried Positions						148,610	118,888	178,332
Subtotal Personnel Costs - Fringe Benefits (55% of Salaried Positions)						81,736	65,388	98,083
Subtotal Personnel Costs - Hourly Positions (1)						0	0	0
Subtotal Personnel Costs - Fringe Benefits (0.5% of Hourly Positions)						0	0	0
Total Personnel Costs						230,346	184,276	276,415

Summary

Environmental Health Expenses		Total Costs (\$)	Low	High
Personnel Costs		230,346	184,276	276,415
Travel		2,000	2,000	2,000
Service and Supply Costs		1,000	1,000	1,000
Total Expenses		233,346	187,276	279,415
Environmental Health Revenue				
Permit Fees		75,542	75,542	75,542
Temp Permit Fees		3,525	3,525	3,525
Burning Man		15,000	15,000	15,000

Central Nevada Health District
Budget - Clinic

PERSONNEL COSTS

Category	Clinic Personnel	Budgeted FTE	Salary per FTE*	Low Budget per 1.0 FTE	High Budget per 1.0 FTE	Total Costs (Mid-range)	Low Budget	High Budget
	Community Health Nurse Supervisor	1	86,570	73,840	99,299	86,570	73,840	99,299
	Medical Assistant	2	98,044	41,828	56,243	196,088	83,656	112,486
	Public Health Nurse*	2	76,670	65,395	87,984	153,340	130,790	175,968
	Office Assistant	4	38,324	32,698	43,950	153,296	130,792	175,800
	Advanced Practice Nurse	1	92,353	73,883	110,823	92,353	73,883	110,823
	Subtotal:	5.0	391,961	287,644	398,299	681,647	492,961	674,376

Category	Hourly Positions	Hours	Hourly Rate (\$)	Low Budget Hourly Rate	High Budget Hourly Rate	Total Costs (\$)	Low Budget	High Budget
1 Hourly	Hourly Nurse	1,039	35	31,170	41,560	36,365	31,170	41,560
	Hourly Nurse	1,039	35	36,365	41,560	36,365	36,365	41,560
	Subtotal Personnel Costs - Hourly Positions			67,535	83,120	72,730	67,535	83,120

Category	Services & Supplies							
	Operating Supplies					10,000.00		
	Office Equipment Repair & Maint					500.00		
	Medications					10,000.00		
	Laboratory							
						20,500.00		
	Travel expenses					4,500.00		
	Subtotal Personnel Costs - Salaried Positions					681,647	492,961	674,376
	Subtotal Personnel Costs - Fringe Benefits (55% of Salaried Positions)					374,906	271,129	370,907
	Subtotal Personnel Costs - Hourly Positions (1)					36,365	31,170	41,560
	Subtotal Personnel Costs - Fringe Benefits (0.5% of Hourly Positions)					1,818	1,559	2,078
	Total Personnel Costs					1,094,735	796,819	1,088,921

Revenue Sources			
STD grant			
Family Planning grant			5,000
Immunization grant			250,000
ARPA Funds			100,000
			250,000

[https://www.dropbox.com/home/CNHD Shared Folder/Budgets?preview=Copy+of+As+of+December+6+2022+Nevada+Health+District+Budget+Draft.xls](https://www.dropbox.com/home/CNHD%20Shared%20Folder/Budgets?preview=Copy+of+As+of+December+6+2022+Nevada+Health+District+Budget+Draft.xls)

605,000			
Summary			
Clinic Expenses			
Personnel Costs	Total Costs (\$)	Low	High
Travel	1,094,735	796,819	1,088,921
In-State Travel	4,500	4,500	4,500
Subscriptions			
Marketing			
Service and Supply Costs	20,500	20,500	20,500
Total Expenses	1,119,735	821,819	1,113,921
Clinic Revenue			
Fees			
Grants			
County Assessments	605,000	605,000	605,000
Total Revenue	605,000	605,000	605,000
DIFFERENCE	514,735	216,819	508,921

Central Nevada Health District
Budget - Health & Disease Prevention

PERSONNEL COSTS

Category	Health & Disease Prevention Personnel	Budgeted FTE	Salary per 1.0 FTE*	Low Budget per 1.0 FTE	High Budget per 1.0 FTE	Total Costs (Mid-range)	Low Budget	High Budget
	Community Health Workers	1	42,286	36,067	48,506	42,286	36,067	48,506
	Community Health Workers	1	42,286	36,067	48,506	42,286	36,067	48,506
	Community Health Workers	1	42,286	36,067	48,506	42,286	36,067	48,506
	Community Health Workers	1	42,286	36,067	48,506	42,286	36,067	48,506
	Program Manager					42,286	36,067	48,506
						0	0	0
	Subtotal:	4.0	169,144	144,268	194,024	169,144	144,268	194,024
Category	Hourly Positions	Hours	Hourly Rate (\$)	Low Budget Hourly Rate	High Budget Hourly Rate	Total Costs (\$)	Low Budget	High Budget
1 Hourly		1,039				0	0	0
	Subtotal Personnel Costs - Hourly Positions					0	0	0
Category	Services & Supplies							
	Operating Supplies					0		
	Travel expenses					2,000		127
						0		
						2,000		
	Subtotal Personnel Costs - Salaried Positions					169,144	144,268	194,024
	Subtotal Personnel Costs - Fringe Benefits (55% of Salaried Positions)					93,029	79,347	106,713
	Subtotal Personnel Costs - Hourly Positions (1)					0	0	0
	Subtotal Personnel Costs - Fringe Benefits (0.5% of Hourly Positions)					0	0	0
	Total Personnel Costs					262,173	223,615	300,737
Revenue Summary								
	Grants							

Summary			
Health & Disease Prevention Expenses			
Personnel Costs	Total Costs (\$)	Low	High
Travel	262,173	223,615	300,737
Service and Supply Costs	2,000	2,000	2,000
Total Expenses	0	0	0
	264,173	225,615	302,737
Health & Disease Prevention Revenue			
Grants			
County Assessments			
Total Revenue			
DIFFERENCE			
	264,173	225,615	302,737

**Central Nevada Health District
Budget - Administration**

PERSONNEL COSTS

Category	Administration Personnel	Budgeted FTE	Salary per 1.0 FTE*	Low Budget per 1.0 FTE	High Budget per 1.0 FTE	Total Costs (Mid-range)	Low Budget	High Budget
1 Salaried	District Health Director/Officer	1	116,365	99,236	133,494	116,365	99,236	133,494
2 Salaried	Administrative Assistant	1	-	-	-	-	-	-
	Grant Writer & Manager	1	-	-	-	-	-	-
	Full Time Bookkeeper	1	55,510	-	83,264	55,510	-	83,264
Subtotal:		4.0	171,875	99,236	216,758	171,875	99,236	216,758

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Category	Hourly Positions	Hours	Hourly Rate (\$)	Low Budget Hourly Rate	High Budget Hourly Rate	Total Costs (\$)	Low Budget	High Budget
1 Hourly		1,039				0	0	0
Subtotal Personnel Costs - Hourly Positions						0	0	0

Category	Services & Supplies	
	Operating Supplies	
	Travel expenses	
	Memberships & Publications	3,479
	Advertising	1,500
	Office Supplies	3,000
	Postage & Shipping	2,000
	Phone/Fax	2,000
	Copies	2,100
		6,000
	Contractual	20,079
	Health Officer	
	Pool Pact Insurance	40,000
	IT Support	
	Fiscal, Legal & HR Services PIO	50,000
	Marketing	81,698
		19,583
		40,158
		191,281
Subtotal Personnel Costs - Salaried Positions		
Subtotal Personnel Costs - Fringe Benefits (55% of Salaried Positions)		
		171,875 99,236 216,758 Salaried
Subtotal Personnel Costs - Hourly Positions (2)		
		94,531 54,580 119,217
Subtotal Personnel Costs - Fringe Benefits (0.5% of Hourly Positions)		
		0 0 0 Hourly
Total Personnel Costs		
		0 0 0
		266,406 153,816 335,975

[https://www.dropbox.com/home/CNHD Shared Folder/Budgets?preview=Conv+of+Act+of+December+16+2022+Health+District+Budget+Draft.xls](https://www.dropbox.com/home/CNHD%20Shared%20Folder/Budgets?preview=Conv+of+Act+of+December+16+2022+Health+District+Budget+Draft.xls)

Member Denise Ferguson questioned who was responsible for obtaining the grants. Marena Works said that the administrator is responsible for getting the grants, but it will be a collaborative effort with all of the managers. Member Denise Ferguson also said that she noticed some of the position rates are low as well as medications. Marena said that she went off of other Health Districts and that traditionally public health pays lower than hospitals. Member Shannon Ernst said that a difference with the hospital and government sector the employee gets a benefit package; such as PERS and health insurance. Member Denise Ferguson said that she offers those benefits as well and she is still paying a higher rate for her nursing positions at the hospital. One big positive is that WNC has a campus here and with the District being located here the relationship that we can build with the apprentice nurse program will help us get nurses to the rural areas.

FISCAL IMPACT: Six-month budget \$455,189; twelve month budget \$2,563,713

EXPLANATION OF IMPACT: A health department is expected to have expenses to operate, which is what the budget attempts to show. The expenses will be offset by revenue received from grants and the collection of fees for services.

Churchill County Social Services currently holds grants pertaining to these functions and will be maintained until CNHD is eligible to accept and manage federal and state grants.

FUNDING SOURCE: State and Federal grants are held currently by Churchill County, and customer fees to be collected starting July 1, 2023.

ACTION REQUESTED: Accept

Member Justin Heath made a Consideration and possible action re: Approval of the draft 6 month and 12 month budget and the positions mentioned within the budget, allowing the Administrator or interim Administrator, to move forward with hiring the positions and purchasing supplies as grants and income are received. Member Larry Rackley seconded the motion, which carried by unanimous vote.

B- Consideration and possible action re: A Presentation of the Central Nevada Health District Operational Plan.

Caleb Cage made this presentation as outlined above.

**Central Nevada Health District
Work Plan**

Category: CNHD Personnel			
Goal: Hire and appoint personnel and governance members to fill critical positions to meet CNHD's ongoing operational needs.			
Objectives:			
• Maintain stability of CNHD's organization structure. • Maintain stability of CNHD's governance structure. • Maximize opportunities to fill critical positions from local communities. • Minimize vacancies for critical positions.			
Strategies	Activities, Outcomes, and Outputs	Timeframe	Owner
Hire CNHD Administrator	a. Develop position description and announce position. b. Conduct interviews. c. Select CNHD administrator.	a. Underway b. January 2023 c. January 2023	a. CNHD Committee b. Hiring Committee c. Hiring Committee
Hire CNHD Health Officer: Dr. McDonald	a. Identify temporary health officer. b. Develop position description and announce position. c. Conduct interviews. d. Select CNHD Health Officer.	a. December 2022 b. Underway c. February 2023 d. February 2023	a. CNHD Committee b. Hiring Committee c. Hiring Committee d. CNHD Administrator
Hire CNHD Bookkeeper	a. Develop position description and announce position. b. Conduct interviews. c. Select CNHD Bookkeeper.	a. January 2023 b. February 2023 c. March 2023	a. CNHD Committee b. Hiring Committee c. CNHD Administrator

Appoint members to CNHD Board	a. Identify appropriate members in each jurisdiction. b. Appoint members.	a. Underway b. December 2022	a. Member jurisdiction b. Member jurisdiction
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Category: CNHD Administration			
Goal: Ensure CNHD has the facilities and equipment necessary from each partner jurisdiction in order to meet its operational needs.			
Objectives:			
• Establish the core operational requirements for CNHD. • Maintain CNHD's presence in communities across service area. • Ensure CNHD's communities are connected electronically. • Ensure CNHD has an optimized plan for sustainability.			
Strategies	Activities, Outcomes, and Outputs	Timeframe	Owner
Establish office space in each county covered by CNHD.	a. Identify office space in each jurisdiction. b. Furnish office space in each jurisdiction. c. Provide computers and communication equipment for each location. d. Identify pharmacy space in each jurisdiction. e. Procure all non-clinical equipment and supplies.	a. Underway b. January 2023 c. March 2023 d. January 2023 e. March 2023	a. Member jurisdictions b. Member jurisdictions c. Member jurisdictions d. Member jurisdictions e. CNHD Administrator
Procure marketing and	a. Identify vehicles for use by CNHD from each jurisdiction.	a. March 2023 b. December 2022	a. Member jurisdictions b. CNHD Committee

outreach equipment.	b. Develop CNHD logo. c. Procure CNHD marketing materials. d. Procure CNHD signage. e. Launch CNHD website.	c. January 2023 d. June 2023 e. January 2023	c. CNHD Administrator d. CNHD Administrator e. CNHD Administrator and jurisdictional PIOs
Establish CNHD accounting and privacy systems.	a. Establish CNHD center in Churchill County accounting system. b. Embed staff training on all IT-related confidentiality policies and procedures into onboarding process.	a. March 2023 b. June 2023	a. CNHD Administrator b. CNHD Administrator
Establish CNHD policies and procedures.	a. Develop personnel, procurement, accounting, and all other necessary policies and procedures. b. Develop administrative code. c. Enact county codes supporting CNHD. d. Ensure all policies and procedures are developed in accordance with PHAB guidelines.	a. March 2023 b. March 2023 c. March 2023 d. March 2023	a. CNHD Administrator b. CNHD Administrator c. Member jurisdictions d. CNHD Administrator
Pursue grants for initial operational funding.	a. Apply for ARP family planning grant. b. Apply for ELC disease investigation grant. c. Apply for CDBG grant. d. Apply for HRSA grant.	a. October 2022 b. March 2023 c. October 2022 d. November 2022 e. Ongoing	a. CNHD Committee b. CNHD Committee c. Churchill County d. CNHD Committee e. CNHD Committee

	e. Apply for public health preparedness grant		
Establish CNHD operational structure	a. Secure CNHD DUNS number. b. Secure CNHD EIN. c. Receive Medicaid approval. d. Secure CNHD SAMS profile. e. Execute interlocal agreement between CNHD and Churchill County. f. Execute interlocal agreement between CNHD and member jurisdictions.	a. December 2022 b. December 2022 c. December 2022 d. December 2022 e. December 2022 f. January and March 2023	a. CNHD Committee b. CNHD Committee c. CNHD Committee d. CNHD Committee e. Churchill County and CNHD Board f. Member jurisdictions and CNHD Board

Category: CNHD Public Health Nursing Operations			
Goal: Establish a comprehensive public health nursing program to address the needs of the jurisdictions within CNHD.			
Objectives:			
• Ensure CNHD has the necessary staff to support the public health nurse. • Ensure CNHD has the necessary policy and procedure framework to support the public health nurse. • Ensure CNHD applies for and receives the appropriate certifications and waivers to support the public health nurse.			
Strategies	Activities, Outcomes, and Outputs	Timeframe	Owner
Staff CNHD public health nursing program	a. Hire nurse manager. b. Hire additional support staff.	a. March 2023 b. June 2023	a. CNHD Administrator b. CNHD Administrator

Onboard all staff and conduct necessary training.	a. Develop a comprehensive onboarding initiative for public health nursing employees. b. Ensure all staff are trained in the following areas: • HIV prevention • STD prevention • Tuberculosis • Epidemiology • Animal bites • Immunization • VFC & 317 compliance • Perinatal Hepatitis B • IT software	a. June 2023 b. As hired, training developed no later than March 2023	a. CNHD Administrator b. CNHD Administrator
Develop the SOPs, Forms, and Policies necessary to support CNHD's operations.	a. Establish policies, procedures, standing orders and forms for communicable disease clinics (including lab procedures). b. Establish SOPs and forms for other activities, including: • Immunizations • VFC & 317 Compliance • Perinatal Hepatitis B • HIV comprehensive services • Animal bites • State lab procedures c. Establish fee schedule for approval	a. January 2023 b. January 2023 c. June 2023	a. CNHD Administrator b. CNHD Administrator c. CNHD Administrator & Board

Obtain necessary certifications and waivers to support CNHD operations.	a. Obtain VFC certification. b. Obtain CLIA waiver for each clinic site. c. Establish contract with pharmacies. d. Establish contract with state public health lab. e. Apply for 340B drug pricing.	a. December 2022 b. December 2022 c. February 2023 d. December 2022 e. February 2023	a. CNHD Committee b. CNHD Committee c. CNHD Administrator d. CNHD Committee e. CNHD Administrator
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Category: CNHD Environmental Health Operations			
Goal: Establish a comprehensive environmental health program to address the needs of the jurisdictions within CNHD.			
Objectives: • Ensure CNHD has the necessary staff to support environmental health operations. • Ensure CNHD has the necessary policy and procedure framework to support environmental health operations. • Ensure CNHD applies for and receives the appropriate certifications and waivers to support environmental health operations.			
Strategies	Activities, Outcomes, and Outputs	Timeframe	Owner
Staff CNHD environmental health program	a. Hire environmental health manager. b. Hire additional support staff. c. Train staff on necessary NRS/NAC requirements. d. Receive environmental health records from state Division of Public and Behavioral health.	a. March 2023 b. June 2023 c. As hired, training developed no later than March 2023 d. June 2023	a. CNHD Administrator b. CNHD Administrator c. CNHD Administrator d. CNHD Board

Develop the SOPs, Forms, and Policies necessary to support CNHD's environmental health operations.	a. Present CNHD environmental health code to state for approval. b. Establish CNHD environmental health code. c. Establish SOPs and inspection forms. d. Develop zone plans for each inspector. e. Inventory inspected entities. f. Review Burning Man agreement to prepare for transition from state to CNHD. g. Establish fee schedule for approval	a. December 2022. b. March 2023 c. June 2023 d. May 2023 e. March 2023 f. December 2022 g. December 2022	a. CNHD Committee b. CNHD Administrator c. CNHD Administrator d. CNHD Administrator e. CNHD Administrator f. CNHD Committee g. CNHD Administrator & Board
Develop public facing elements of CNHD environmental health program.	a. Establish online application. b. Establish online payment form. c. Implement marketing plan notifying public and business owners of the transition to CNHD.	a. May 2023 b. March 2023 c. March 2023	a. CNHD Administrator b. CNHD Administrator c. CNHD Administrator

Category: CNHD Population Health Services Operations			
Goal: Establish a comprehensive population health services program to address the needs of the jurisdictions within CNHD.			
Objectives:			

• Ensure CNHD has the necessary staff to support population health services operations. • Ensure CNHD has the necessary policy and procedure framework to support population health services operations. • Ensure CNHD applies for and receives the appropriate certifications and waivers to support population health services operations.			
Strategies	Activities, Outcomes, and Outputs	Timeframe	Owner
Staff CNHD population health services program	a. Hire population health services manager. b. Hire additional support staff. c. Train staff on necessary requirements.	a. March 2023 b. March 2023 c. As hired, training developed no later than March 2023	a. CNHD Administrator b. CNHD Administrator c. CNHD Administrator
Develop the SOPs, Forms, and Policies necessary to support CNHD's population health services operations.	a. Establish SOPs and form for health assessment activities. b. Develop informational flyers in different languages for distribution in the community re: location of new clinic space and COVID information.	a. March 2023 b. June 2023	a. CNHD Administrator b. CNHD Administrator

Category: HRSA Grant Reporting			
Goal: Maintain compliance with HRSA grant reporting requirements in order to maximize input and ensure strategic success.			
Objectives:			
• Remain in compliance with HRSA progress reporting requirements. • Remain in compliance with HRSA performance measure reporting requirements.			

- Remain in compliance with HRSA requirement to monitor key performance data.
- Ensure the strategic success and direction of CNHD in compliance with HRSA requirements.
- Evaluate effectiveness of CNHD programs.
- Market the programs and services provided by CNHD.
- Ensure the long-term sustainability of the CNHD business model.
- Ensure integrity and performance reporting in accordance with federal requirements.

Strategies	Activities, Outcomes, and Outputs	Timeframe	Owner
Submit an annual progress report through a noncompeting continuation report.	f. Establish report format based on reporting requirements. g. Map data sources to meet reporting requirements. h. Provide quarterly progress report to CNHD board based on annual HRSA requirements. i. Submit progress report to HRSA. j. Submit a comprehensive final progress report to HRSA.	f. First quarter, year 1 of performance period. g. First quarter, year 1 of performance period. h. Quarterly throughout performance period. i. Progress report submitted annually. j. Within 90 days of the final performance period.	f. CNHD Administrator g. CNHD Administrator h. CNHD Administrator & Board i. CNHD Administrator j. CNHD Administrator & Board
Submit a performance measure report after each budget period in PIMS.	a. Receive notification of specific performance measures required for reporting. b. Map data sources to meet reporting requirements. c. Provide quarterly progress report to CNHD board based on annual HRSA requirements.	a. First quarter, year 1 of performance period. b. First quarter, year 1 of performance period. c. Quarterly throughout performance period. d. Performance measures report submitted after each budget period.	a. CNHD Administrator b. CNHD Administrator c. CNHD Administrator & Board d. CNHD Administrator e. CNHD Administrator & Board

	d. Submit performance measures report through PIMS. e. Ensure integrity of performance reporting requirements.	e. Throughout entirety of performance period.	
Develop a data dashboard of key project measures and outcomes	a. Identify key project data to support the ongoing data collection, documentation, and tracking needs of the project. b. Map data sources to meet reporting requirements. c. Present data dashboard to CNHD board to identify opportunities to improve data collection and reporting. d. Make data dashboard available to key partners for critical information needs.	a. First quarter, year 1 of performance period. b. First quarter, year 1 of performance period. c. Quarterly throughout performance period. d. Available in compliance with HRSA requirements.	a. CNHD Administrator b. CNHD Administrator c. CNHD Administrator & Board d. CNHD Administrator
Develop a multi-year strategic plan in the first year of the performance period.	a. Develop survey tool to gather input from internal and external partners. b. Conduct one town hall events in each CNHD jurisdiction to gather input. c. Review existing strategic plans, assessments, reports, and other foundational documents provided by the	a. First quarter, year 1 of performance period. b. First two quarters of performance period. c. First two quarters, year 1 of performance period. d. Third quarter, year 1 of performance period. e. Third quarter, year 1 of performance period.	a. CNHD Administrator b. CNHD Administrator c. CNHD Administrator d. CNHD Administrator e. CNHD Administrator f. CNHD Administrator g. CNHD Administrator

	CNHD jurisdictions, and the state. d. Conduct a strategic analysis of CNHD's challenges and opportunities. e. Write a regional needs assessment based input and reports. f. Publish a three-year strategic plan for CNHD. g. Review and update CNHD strategic plan.	f. Fourth quarter, year 1 of performance period. g. Annually throughout performance period.	
Develop a comprehensive evaluation plan to evaluate the effectiveness of the network and program activities.	a. Develop evaluation questions, indicators for measurement, data collection and communication strategies, timelines and costs. b. Map data sources to meet evaluation requirements. c. Develop evaluation plan for CNHD programs and services. d. Develop a final evaluation plan for the long-term success of CNHD.	a. First quarter, year 1 of performance period. b. First two quarters, year 1 of performance period. c. Fourth quarter of the first year of performance period. d. Within 90 days of the final performance period.	a. CNHD Administrator b. CNHD Administrator c. CNHD Administrator d. CNHD Administrator & Board
Develop a marketing plan for CNHD to reach populations	a. Conduct brand awareness assessment within CNHD communities. b. Identify marketing challenges and opportunities.	a. Year 1 of performance period. b. Year 1 of performance period. c. Year 1 of performance period. d. Year 2 of performance period.	a. CNHD Administrator b. CNHD Administrator c. CNHD Administrator d. CNHD Administrator
throughout the service area and that leverages existing outreach and marketing capabilities of each CNHD jurisdiction.	c. Develop branding material, social media platforms, and calendar of public outreach opportunities. d. Develop an annual marketing plan.		
Develop a final sustainability plan and business model for the long-term success of CNHD.	a. Identify all available funding sources for CNHD's operations. b. Develop a structure for the optimal use of the funding sources. c. Secure investment commitment from partners. d. Provide updates to the CNHD board regarding progress in meeting funding needs. e. Produce a final sustainability plan.	a. Year 1 of the performance period. b. Year 1 of the performance period. c. Year 1 of the performance period. d. Quarterly throughout the performance period. e. During the final performance period.	a. CNHD Administrator b. CNHD Administrator c. CNHD Administrator d. CNHD Administrator & Board e. CNHD Administrator & Board

FISCAL IMPACT: N/A

EXPLANATION OF IMPACT: N/A

FUNDING SOURCE: N/A

ACTION REQUESTED: None; Informational Only

C- Consideration and possible action re: Overview of current grant applications in process.

Caleb Cage made this presentation as outlined above.

Caleb Cage stated that grants are not easy and they must be managed through and through, they have a lot of requirements. It is a large responsibility that lands on the administrator. There are two grants that have been submitted through HERSA. One \$1.2 million 4 year grant; \$300,000 a year that will help offset personnel funding. Also a planning grant \$100,000 one year grant.

FISCAL IMPACT: Not at this time.

EXPLANATION OF IMPACT: Income only to perform the services required by the grantee which fall into the mission and scope of the CNHD, when funding is awarded.

FUNDING SOURCE: Federal and state grant funding

ACTION REQUESTED: None; Informational Only

D- Consideration and possible action re: Approval of applying for a Women, Infants, and Children (WIC) grant opportunity to serve the surrounding communities in the approximate amount of \$400,000

Marena Works made this presentation as outlined above.

FISCAL IMPACT: \$400,000

EXPLANATION OF IMPACT: It will cost approximately \$400,000/year to offer WIC in these areas, the cost mostly for staff, supplies and travel.

FUNDING SOURCE: Federal funding passed through the State of Nevada. Approximately \$400,000 grant funding from the DPBH for FY '24 July 1, 2023, through June 30, 2024

ACTION REQUESTED: Accept

Member Jim R. Barbee made a Motion to submit the funding application as presented Commissioner Justin Heath seconded the motion, which carried by unanimous vote.

Consideration of Future Agenda Items:

Member Ernst said that the health officer will have to provide a report at each meeting, it is a requirement.

Consider and schedule future meeting date and location:

The next meeting will be held on February 9, 2023, at 1:30 PM in Churchill County.

Public Comment:

Chairman Tedford asked if there was any public comment.

Dr Ted McDonald, Central Nevada District Health Officer asked the board what type of information they would like to see in the reports. In the past his reports have included our activity in the District, feedback from CDC, information from monthly Health Officer meetings, and information from HERSA about grant data.

Adjournment:

The meeting was adjourned at 3:01 PM.

Affidavit of Posting:

Approved: Ken Tedford
Ken Tedford, Chairman

Approved: _____
Cassie Hall, Vice-Chairman

Approved: _____
Shannon Ernst, Member

Approved: _____
Jim Barbee, Member

Approved: _____
Bob Erickson, Member

Approved: _____
Denise Ferguson, Member

Approved: _____
Larry Rackley, Member

Approved: _____
Tyson McBride, Member

Approved:

Justin Heath, Member



Brittany Burton, Office Specialist