MINUTES OF THE CENTRAL NEVADA HEALTH DISTRICT

155 N. Taylor St., Fallon, NV 89406
December 8, 2022

Call to Order:
The regular meeting of the Central Nevada Health District was called to order at 2:00 PM on December 8, 2022.

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 Pamela D. Moore, Deputy Clerk to the Board
ABSENT:	Dr. Tedd McDonald

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 4th day of December, 2022, between the hours of 10:30 AM and 12:00 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 Jim R. Barbee made a motion to approve the Agenda as submitted. Member Bob Erickson seconded the motion, which carried by unanimous vote.

Appointments:

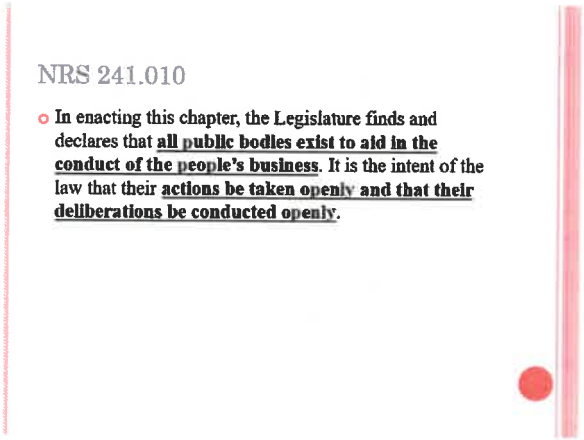
A- Consideration and possible action re: Swearing in of Officers to the Central Nevada Health District Board of Health.
Swearing in of all Board of Health for the Central Nevada Health District.

FISCAL IMPACT: None
EXPLANATION OF IMPACT: N/A
FUNDING SOURCE: N/A
ACTION REQUESTED: Accept

The following were sworn in as Member of the Board: Ken Tedford, Cassie Hall, Bob Erickson, Jim Barbee, Shannon Ernst, Denise Ferguson, Larry Rackley, and Tyson McBride.

B- Consideration and possible action re: Board Member Ethics Training.
Mr. Weed will provide a Board Ethics Training
FISCAL IMPACT: None
EXPLANATION OF IMPACT: N/A
FUNDING SOURCE: N/A
ACTION REQUESTED: None; Informational Only

Civil Deputy DA Jeff Weed provided ethics training to the board. He had the following PowerPoint presentation:



WHAT IS A MEETING THAT IS SUBJECT TO OPEN MEETING LAW?

- Gathering of members of a public body at which a quorum is present to deliberate toward a decision or to take action on any matter over which the public body has supervision, control, jurisdiction or advisory power.
  - Quorum: typically, a simple majority or another proportion established by law.
  - CNHD Bylaws: A majority of members of the Board of Health
- Example: 9 person board
- Quorum = 5 members

ACTION AND DELIBERATION

- Generally, action is taken when:
  - A decision is made;
  - A commitment or promise is made; or
  - An affirmative vote is made.
- "Deliberate" means collectively to examine, weigh and reflect upon the reasons for or against the action.

SOCIAL GATHERINGS AND CONFERENCES

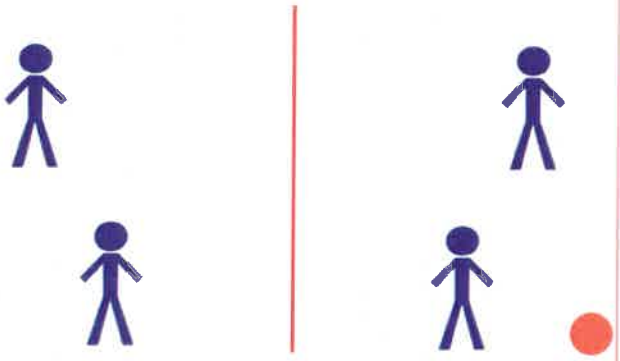
- Social gatherings and conferences are not meetings subject to open meeting law even if a quorum is present unless that quorum deliberates on a matter over which the public body has supervision.

ELECTRONIC COMMUNICATION

- A quorum of a public body using serial electronic communication to deliberate . . . Violates the Open Meeting Law. That is not to say that in the absence of a quorum, members of a public body cannot privately discuss public issues or even lobby for votes. However, if a quorum is gathered by serial electronic communications, the body must deliberate and actually vote on the matter in a public meeting.

NEVADA SUPREME COURT

SERIAL COMMUNICATIONS (WALKING QUORUMS)



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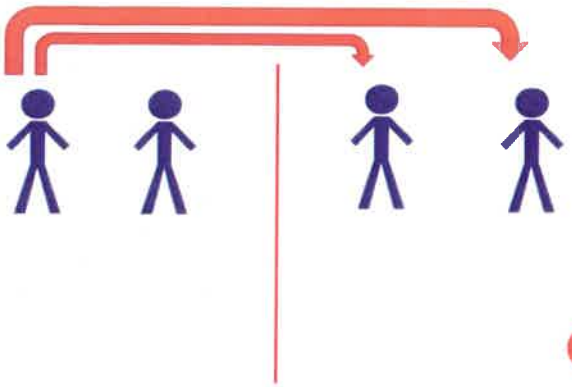

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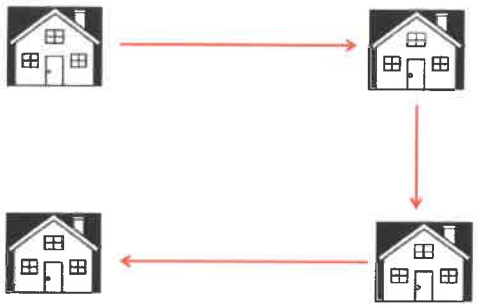
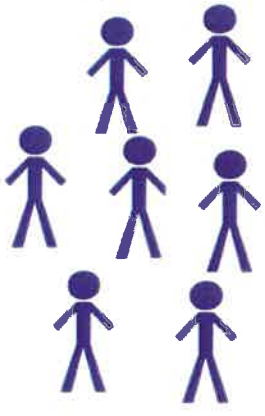


EMAIL

MEETINGS WITH ATTORNEY



MEETINGS WITH ATTORNEY

- No Public Notice Required
- Can it be agendized and done during a meeting?
  - Yes
- What can you discuss?
  - Only to discuss potential or existing litigation
- Can you take action?
  - No

NOTICE REQUIREMENTS

- Posted three working days prior to the meeting, not including the day of the meeting, by 9:00 am.
- Must include concise but informative notice to the public of the items to be discussed. (If you don't know what an agenda item means, neither does the public.)
  - If "adopting changes to organizational chart," need to be clear if terminating a position or firing.
- No action may be taken on items not on the agenda, or that are not marked for action.

THE AGENDA

- Stick to it
- Items can be taken out of order unless there is a specific appointment time.
- Be careful with Staff Reports, Request for Future Agenda Items and Visiting before and after Meeting.

WHAT NOT TO SAY IN A MEETING

"I came today with my mind already made up."
"There's nothing you can tell me today that will change my mind about this situation."

VIOLATION OF OPEN MEETING LAW

- Rehear action taken (actions taken in violation are void)
- Notice of corrective action included as agenda item at subsequent meeting
- $500 civil fine **for each violation** – County cannot reimburse
- Misdemeanor - $1,000 fine, 6 months jail
  - With knowledge of the fact that meeting is in violation

PUBLIC COMMENT

- Legal Requirement: Once before any action item, and once after all other business OR after each action item on the agenda is discussed but before taking action.

- Best practice: Once before any action item, once immediately prior to the end of the meeting. On each action item for which a public member wishes to speak that is not disruptive to the meeting process

Public Comment Continued

- Public Comment at the start and end of the meeting may be on any item over which the Board has jurisdiction, even if that item is not on the Agenda.
- Public comment may be limited to uniform periods of time. This applies to everyone! Failure to enforce this on any one speaker means it cannot be enforced on any speaker.
- Board members should avoid making public comment.

Conducting a Meeting

- Chairperson is responsible for the orderly procession of the meeting. Including calling for a motion and voting, acknowledging speakers, and ensuring the meeting proceeds in a timely fashion.
- Chairperson may cut-off speakers and presentations that are redundant or irrelevant. Chairpersons may not limit public comment based upon viewpoint.

Removal of Disruptive Persons

- Chairperson may order that a person be removed from the meeting when they willfully disrupt the meeting to the extent that the orderly conduct of the meeting is impractical.
- For example, a person may be removed for intentionally making comments in the audience that are audible to the board and disruptive to the meeting. This includes things like clapping, whistling, stomping feet, etc.
- Best practice is to admonish then remove.

ETHICS FOR NEVADA OFFICIALS

- General Rule: Do not participate in any matter in which you have a personal interest.
- Do not approve, disapprove, comment on any matter in which:
  - You have accepted a gift or a loan
  - You have a pecuniary (economic) interest
  - The interests of a person to whom you have a commitment in a private capacity are at issue

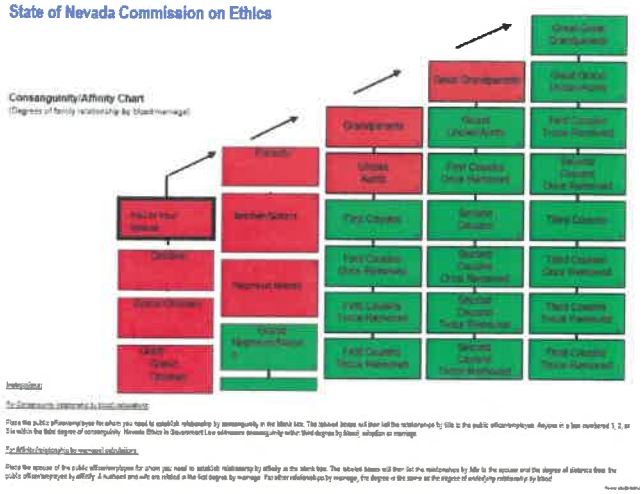
If the above is true, then…

ETHICS FOR NEVADA OFFICIALS

- DISCLOSE THE INTEREST
- ABSTAIN IF THE INTEREST WOULD AFFECT JUDGMENT OF A REASONABLE PERSON
- When in doubt - Disclose

"COMMITMENT IN PRIVATE CAPACITY"

- Commitment to a person:
  - In your household
  - Related by blood or marriage within third degree of consanguinity
  - Employs you or a member of your household
  - You have a continuing ongoing business relationship
  - Other similar relationship



NRS 241.010

In enacting this chapter, the Legislature finds and declares that **all public bodies exist to aid in the conduct of the people's business**. It is the intent of the law that their **actions be taken openly and that their deliberations be conducted openly**.

This item was presented for training purposes only and no action was taken.

C- Consideration and possible action re: Approval of Bylaws for the Central Nevada Health District.

It is customary for boards of health to have a set of guidelines in the form of Bylaws to outline specific instructions to board members in regards to the governance of the board.

FISCAL IMPACT: None.

EXPLANATION OF IMPACT: N/A

FUNDING SOURCE: N/A

ACTION REQUESTED: Accept

Marena Works made this presentation as outlined above.

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

Member Jim R. Barbee made a motion to accept the Central Nevada Health District Bylaws as presented. Member Denise Ferguson seconded the motion, which carried by

unanimous vote.

D- Consideration and possible action re: Election of Officers, Chair and Vice Chair to serve until January 2024

According to the CNHD Bylaws section 5.2 Election of Officers shall include a Chair and Vice-Chair. Officers shall be elected by the Board at the inaugural meeting of the Board of Health and each January thereafter.
FISCAL IMPACT: None
EXPLANATION OF IMPACT: N/A
FUNDING SOURCE: N/A
ACTION REQUESTED: Accept

Marena Works made this presentation as outlined above.

Member Jim R. Barbee made a Motion to elect Ken Tedford as Chair and Cassie Hall as Vice-Chair to serve until January 2024. Member Bob Erickson seconded the motion, which carried by unanimous vote.

E- Consideration and possible action re: Appointment of a Physician to the Central Nevada Health District Board of Health.

NRS 439.390 subsection 1 and 2 instructs: A district board of health must consist of two members from each county, city or town which participated in establishing the district, to be appointed by the governing body of the county, city or town in which they reside, together with one additional member to be chosen by the members so appointed. 2. The additional member must be a physician licensed to practice medicine in this State.

Per the Bylaws, the appointment must be completed in 30 days or the State Board of Health shall appoint.
FISCAL IMPACT: None
EXPLANATION OF IMPACT: N/A
FUNDING SOURCE: N/A
ACTION REQUESTED: Accept

Marena Works made this presentation as outlined above.

Marena stated that the District has one letter of interest from a physician. The board can either select that physician or put out a call for others, it is the preference of the board. Chairman Tedford asked who the letter of interest was from. Member Jim Barbee stated Dr. Justin Heath he then asked if Dr. Heath would come up and give a little 411. Dr. Justin Heath came up and said that he is from Fallon, grew up here as Mayor Tedford knows. I am also a commissioner and work here at the local hospital since 2014, and look forward to serving the committee.

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

Member Jim R. Barbee made a motion to appoint Dr. Justin Heath as the Physician as

presented. Member Bob Erickson seconded the motion, which carried by unanimous vote.

At this time, Dr. Justin Heath was administered the Oath of Office.

F- Consideration and possible action re: Appointment of an Interim Administrator.
The Central Nevada Health District was officially created on December 2, 2022. There is an immediate need for an administrator, and appointing an interim will allow for time to recruit and hire a qualified administrator.

Churchill County has contracted with Arc Dome Strategies, Caleb Cage, as the Transition Manager for the Project. It is recommended that Caleb Cage be appointed as the Administrator of record to complete processes approved by the board as part of the CNHD implementation.
FISCAL IMPACT: Churchill County has obligated funding to cover the $4,000 / month contract from grant funds obtained.
EXPLANATION OF IMPACT: No impact to CNHD.
FUNDING SOURCE: N/A
ACTION REQUESTED: Accept

Member Shannon Ernst made this presentation as outlined above.

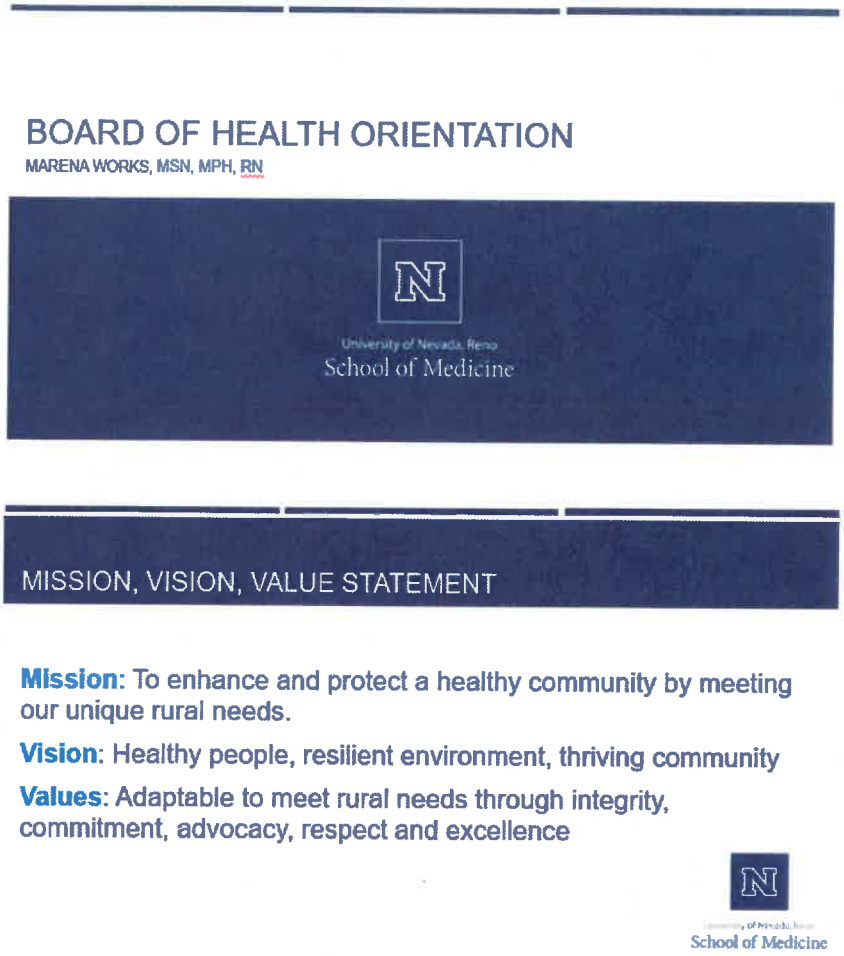
Chairman Tedford asked if there was any public comment but there was none.

Member Jim R. Barbee made a motion to approve Caleb Cage as the Transition Manager for Central Health District to be named as Administrator until one is appointed. Member Denise Ferguson seconded the motion, which carried by unanimous vote.

Member Jim R. Barbee asked Chairman Tedford to administer the Oath to Dr. Justin Heath so that we can place him on the board and he can start engaging. Chairman Tedford ask Deputy Clerk to the Board Pam Moore to administer. Deputy Clerk to the Board Pam Moore administer the Oath to Dr. Heath. Chairman Tedford said thank you, as Member Justin Heath joined the other members up front.

G- Consideration and possible action re: Board of Health Member Orientation.
As newly appointed members of the Central Nevada Health District Board of Health, it is recommended that all members receive an orientation to help define and clarify their roles and expectations. Additionally, the history will be provided of the creation of the Central Nevada Health District to assist and understand the process, goal and overall mission.
FISCAL IMPACT: None
EXPLANATION OF IMPACT: N/A
FUNDING SOURCE: N/A
ACTION REQUESTED: None; Informational Only

Marena Works had the following PowerPoint presentation:



Marena Works said the Mission, Vision and Values came about from the meetings that we have had this past year with the core team or the team that was pulled together to work on the development of this health district. This is where they stand right now, but certainly as a board you could at anytime look to revise or change them as you deem necessary.

What is Public Health Video

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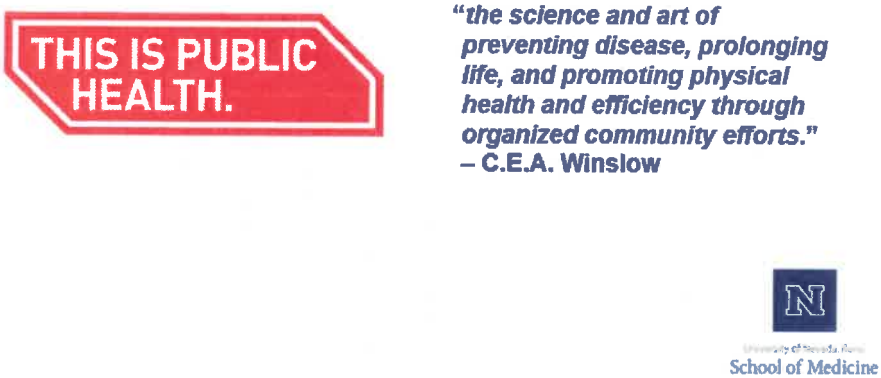
Video did not work.



DISTRICT BOH COMPOSITION

- NRS 439.390: A district BOH must consist of **2 members from each county, city or town** which participated in establishing the district…plus an additional member that must be a physician
- Also specify that:
  - Appoint a **health officer** (not required to be a physician) who has full authority as a county health officer in the district
  - Clinical programs which requires medical assessment must be carried out under the direction of a physician

Governing body for the local health department/district

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POWERS OF A DISTRICT BOARD OF HEALTH

- NRS 439.410
  - Have powers of a county BOH
  - Have jurisdiction over all PH matters in the District, except in matters concerning EMS
  - May adopt regulations consistent with law, which must take effect immediately on their approval by the state BOH to:
    - Prevent and control nuisances; NRS 439.490: abatement or removal of any nuisance detrimental to the public health in accordance with the laws related to such matters
    - ***Regulate sanitation and sanitary practices in the interests of public health**
    - ***Provide for the sanitary protection of water and food supplies**
    - ***Protect and promote the public health generally in the geographical area subject to the jurisdiction of the health department**
    - ***NRS 439.473: A district health officer has authority for abatement of mosquitoes, flies other insects and rats**

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PUBLIC HEALTH VS. CLINICAL MEDICINE

- **Population** vs. Individual
- **Prevention** vs. Treatment
  - Primary Prevention
  - Secondary Prevention
  - Tertiary Prevention

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POPULATION HEALTH VERSUS PUBLIC HEALTH

- Public Health
  - Often focused on the entire population of a certain geographic region
- Population Health
  - Can target a defined subset of a population based on:
    - Geography
    - Enrollees in a health plan
    - People in a certain income bracket, age, specific disease status (ex: diabetic)

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PRIMARY PREVENTION

- Goal is to PREVENT the disease or health condition from developing in the first place
- Focus is on eliminating the exposure or eliminating the harmful effects of an exposure
  - Immunizations
  - Education
  - Controlling potentially hazardous substances in the home or at work
  - Removing exposures (e.g., no smoking in public places)

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SECONDARY PREVENTION

- Goal is to identify people with whom a disease has already begun, but who have not yet developed clinical signs
- Focus is detecting a disease or treating an injury as soon as possible so that the least amount of damage is done
- Examples:
  - Cancer screening
  - Newborn screening

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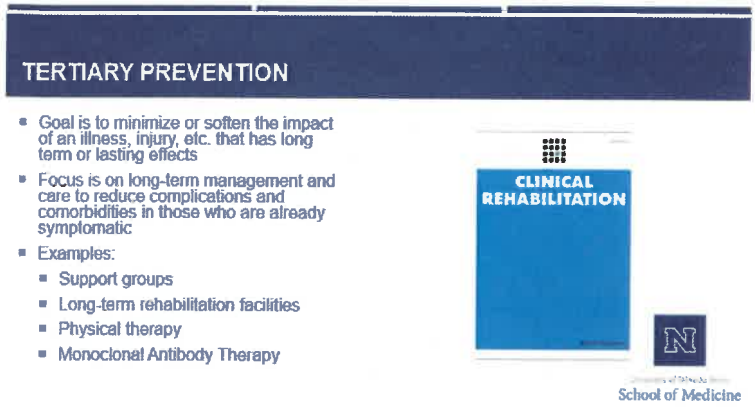

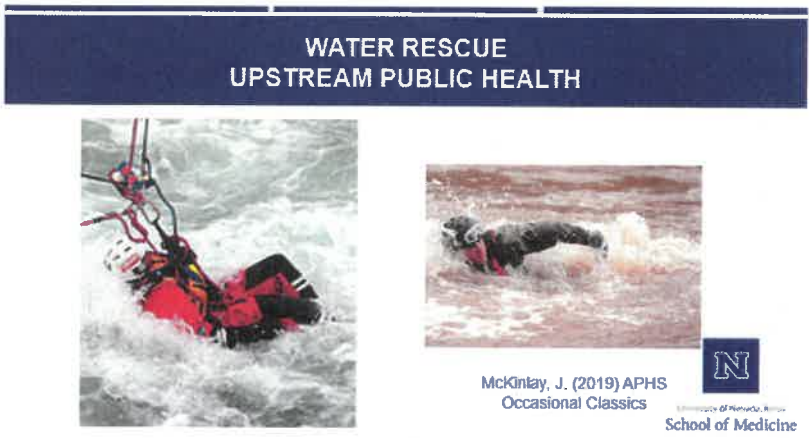

Marena Works stated I want to talk really quickly that when we're in public health we tend to use terms like upstream, and what does that mean? So this graphic and this story was first published by a physican in the early 1970's. And this physican described his practice as seeing people everyday and having them come into his office with so many medical problems. He related it to someone drowning and you're pulling them out and doing CPR, as soon as you're done with CPR and they're coming to you look in the water and there's someone else in the drowning. You pull them out, you do CPR, you look out and there is someone else drowning. You pull them in, do CPR and that is what he felt like primary practice was. At some point he was like who the hell is dumping all of these people into the water, what's going on? What's causing this to happen?

HOLE IN THE BRIDGE ANALOGY

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Marena Works continued with so you go upstream and find a hole in the bridge. So the whole point of Public Health is, lets fix the hole in the bridge before it starts causing problems and make people drown. This is to sum up our prevention strategy, and what Public Heath is all about. What it really looks at is prevention and stopping things before they can really get started.

PURPOSE OF PUBLIC HEALTH

- Prevent epidemics and spread of disease
- Protect against environmental hazards
- Prevent injuries
- Promote and encourage healthy behaviors
- Respond to disasters and assist communities in recovery
- Assure the quality and accessibility of services

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UPSTREAM PUBLIC HEALTH THE PRESENT & FUTURE

- Based on long term thinking
- Looks at Social Determinants of Health
  - Education
  - Employment
  - Housing
  - Nutrition

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20TH CENTURY ACHIEVEMENTS IN PUBLIC HEALTH

- Vaccination
- Motor vehicle safety
- Control of infectious diseases
- Decline of deaths from CHD and stroke
- Healthier mothers and babies
- Safer and healthier foods
- Safer workplaces
- Family planning
- Fluoridation of drinking water
- Recognition of tobacco use as a health hazard

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LOCAL RESPONSIBILITIES

- There are about 2,800 local health authorities in the U.S. and services vary dramatically
- Services offered should be based on the 10 essential Public Health Services. Of the 2,800 LHA, these are the services that are most often offered:
  - Surveillance of disease and environmental health
  - Immunizations
  - Screen and treat for TB
  - Inspect food establishments
  - Population based nutrition services
  - Inspect schools and daycares

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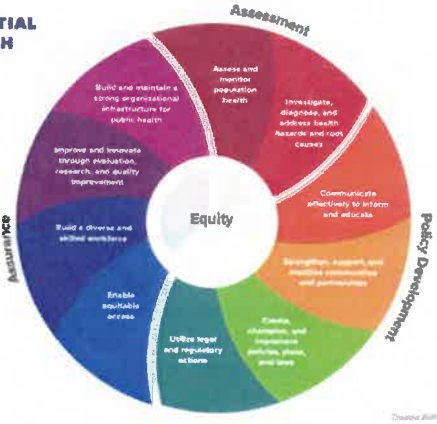
THE 10 ESSENTIAL PUBLIC HEALTH SERVICES

To protect and promote the health of all people in all communities

The 10 Essential Public Health Services provide a framework for public health to protect and promote the health of all people in all communities. To achieve optimal health for all, the Essential Public Health Services actively promote policies, systems, and services that enable good health and seek to remove obstacles and systemic and structural barriers, such as poverty, racism, gender discrimination, and other forms of oppression, that have resulted in health inequities. Everyone should have a fair and just opportunity to achieve good health and well-being.



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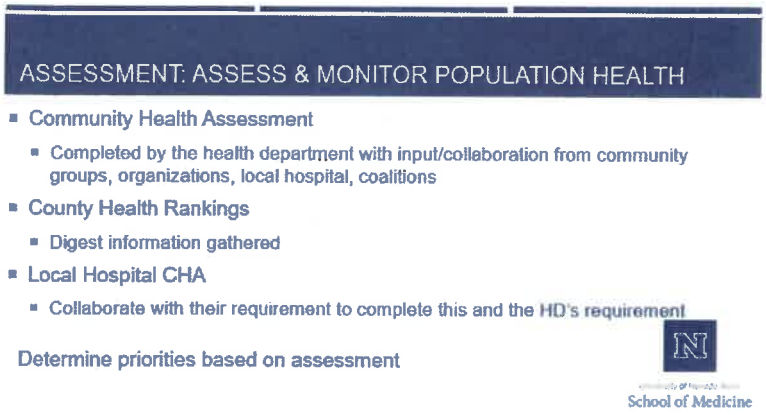
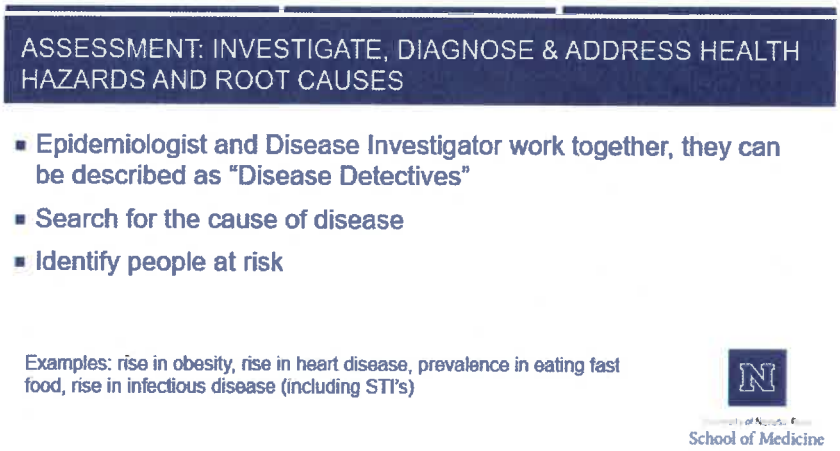
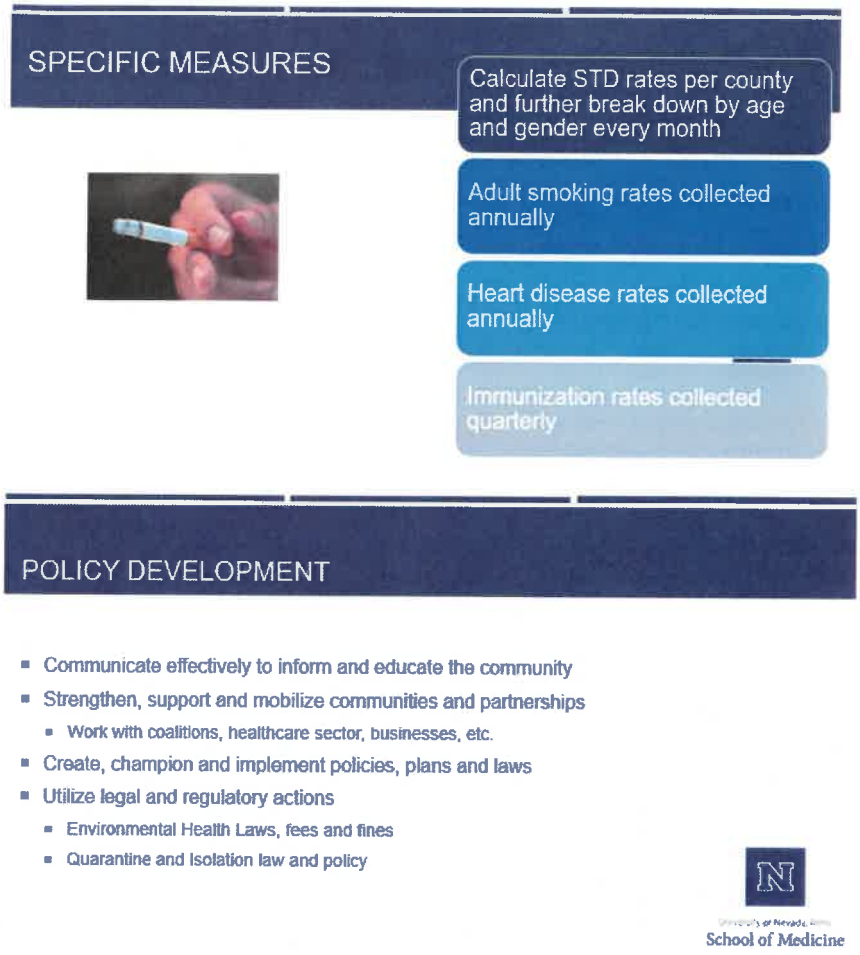


Marena Works stated that every hospital that is non- profit is required to do a community health assesment every 3 years. For a Public Health to become accredited they are required to do a health assesment every 5 years so it only makes sense to coordinate with local hospitals in the jurisdictions. Generally speaking coalitions need to do assesments, even extensions tend to do community health assesments. That is one thing that the district health department would want to collaborate with those entities and do a community health assesment and really drill down to what is affecting their communities.





Marena Works would like to point out the difference between having a county Board of Health and a district Board of Health under environmental health laws is that for example if there was a complaint or a variance request; with a county Board of Health they are required to go to the State Board of Health to have that variance heard. Now that you have a District the environmental health would come to you. So it kind of helps bring that to a local level, and I think it's a little more friendly for those in that business area that are looking for variances especially if they have a complaint. So that is going to be a big difference that the county Board of Health didn't do and a District Board of Health does.

HEALTH IN ALL POLICIES (HIAP)

The health of a community is a responsibility of all and is interlinked with the entire social system which includes in part housing, parks, transportation and access to quality fresh food. The idea of Health in All Policies (HiAP) is a collaborative effort of policy maker decisions to allow citizens to adopt behaviors that promote health. HiAP is a whole Government approach to health, and it realizes health is integrated in all of our social systems.

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ASSURANCE

- Enable equitable access
- Build a diverse and skilled workforce
- Improve and innovate through evaluation, research and quality improvement
- Build and maintain a strong organizational infrastructure for public health

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THE NATIONAL ASSOCIATION OF LOCAL BOARDS OF HEALTH

The National Association of Local Boards of Health (NALBOH) informs, guides, and is the national voice for boards of health. In today's public health system, the leadership role of boards of health makes them an essential link between public health services and a healthy community. Uniquely positioned to deliver technical expertise in governance and leadership, board development, health priorities, and public health policy, NALBOH strives to strengthen good governance where public health begins—at the local level.

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NALBOH DEFINITIONS

- **Governing entity**
  The board, commission, council, individual, or other body legally accountable for ensuring the Six Functions of Public Health Governance in a jurisdiction.
- **Governance Functions (The Six Functions of Public Health Governance)**
  The identified functions for which a public health governing entity is responsible. The Six Functions of Public Health Governance are policy development, resource stewardship, legal authority, partner engagement, continuous improvement, and oversight.
- **Public Health**
  Provide conditions in which people can be healthy. Prevention of illness and disease, the promotion of health, the protection of the population.

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UNDERSTANDING THE FUNCTIONS OF A BOARD OF HEALTH

SIX FUNCTIONS OF PUBLIC HEALTH GOVERNANCE

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LEGAL AUTHORITY

- Ensure the provision of public health services when local law allows (ex: EH code)
- Understand the roles and responsibilities, obligations and functions
- Act ethically within the law
- Contact legal counsel if necessary

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LEGAL AUTHORITY: NEVADA REVISED STATUTES AND NEVADA ADMINISTRATIVE CODE

NRS 439, 441A, 442, 446

- 439 describes the administration of public health
- 441A is communicable disease
- 446 food establishments

NAC 439

- How the state BOH is run
- How to petition the BOH
- RX drug program
- Nevada WebIZ
- Sliding fee schedule for certain nursing services

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LEGAL AUTHORITY: MANDATED PH SERVICES

- Environmental Health
  - NRS 444, 446, 583
- Infectious Diseases Toxic Agents (NRS 441A)
  - Communicable disease reporting
  - STD control, prevention and treatment
  - TB control and treatment/cure
  - Isolation/quarantine; rabies control

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RESOURCE DEVELOPMENT

- Ensure financial, human and other resources are available
- Create a realistic budget, discuss long range financial planning, develop agreements, advocate for funding
- Adopts the program plan and budget annually
- Allow for HD to seek grants that align with the mission and priorities
- BOH is entrusted with funds to support community conditions and standards

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OVERSIGHT

- Guide the agency to achieve public health goals and outcomes
- Act as a liaison between elected officials and/or agencies that oversee the health department role
- Oversee the health officer
- Participate in governing entity activities

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CONTINUOUS IMPROVEMENT

- Improve the health of the community, influenced by policy
- Evaluate, monitor and set measurable outcomes for population health
- Evaluate effectiveness of programs
- Professional development
- Assess the achievements of the overall mission
- Evaluation of the administrator and health officer

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PARTNER ENGAGEMENT

- Create and build community partnerships
- Educate, engage and collaborate
- Participate with community leaders
- Link between agencies, community, businesses and others to improve health outcomes
- BOH members are the eyes and ears as the Board represents the public interest

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POLICY DEVELOPMENT

- Protect, promote and improve public health
- Use best available research and evidence
- Consistent with local, state and federal laws
- Advocate for the community

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ADMINISTRATOR AND HEALTH OFFICER EXPECT A BOARD WILL:

- Counsel and advise using professional expertise and familiarity with the community
- Consult with them on issues the Board is considering
- Delegate responsibility for all administrative functions
- Refrain from micromanaging administrative details
- Share all communication
- Support the Administrator and HO and staff in carrying out their professional duties
- Hold the Administrator accountable for the supervision of the agency
- Evaluate and recognize the work of the Administrator and HO

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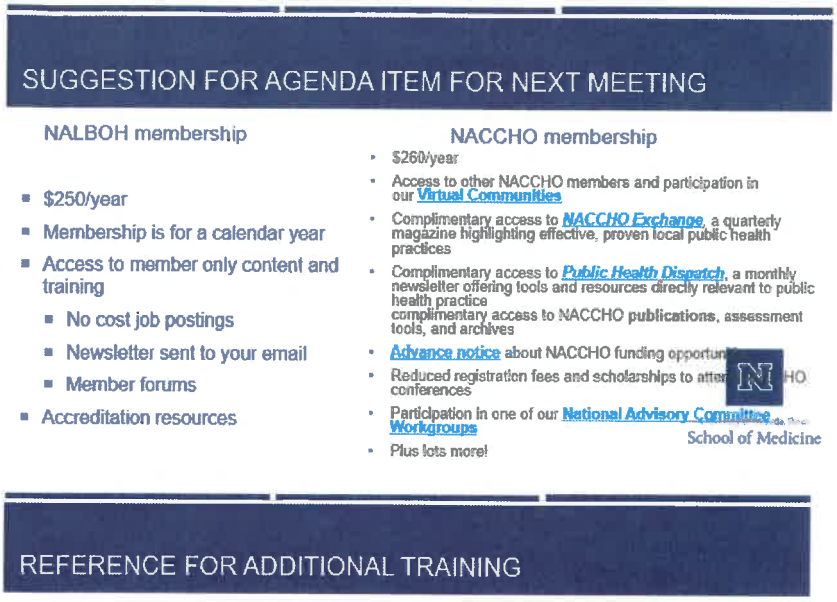
SUMMARY

- Be aware of the mission, vision and values
- Be knowledgeable about policies and procedures
- Understand roles and functions of the board of health
- Be informed on the background of issues
- Maintain lines of communication with staff
- Understand and question financial statements
- Support and participate in revenue efforts

School of Medicine



School of Medicine

Chairman Tedford asked if there was any questions. Then said that he knows that as we begin to find out what other counties have issues with, health wise as we meet more together. He knows that a problem that we have in Churchill County that he did not see on the list is mental health. To me that is a number one priority in Churchill County as well as most of the rural areas, and is poorly funded in the state of Nevada. Did I miss is up there Marena? Marena stated that she did not point it out it does wrap into there and that is something that the Board can consider looking at how they want to deal with it and what kind of participation they want to take into mental health activities. Chairman Tedford stated that it is a number one priority in Churchill County. Marena stated that she has been looking hard at the counties for awhile and what surprised me a lot about Churchill is per capita, you have the highest heart disease rate in the State and that's concerning. Looking at Mineral, they have the highest diabetic rate in the State. There is so much opportunity to really prioritize what they want to start with and how they want to start impacting their communities. Chairman Tedford stated that it all starts with education and the willingness to learn from that education.

This item was done for training purposes only and no action was taken.

New Business:

A- Consideration and possible action re: Approval of Interlocal Agreement between

Central Nevada Health District and Churchill County for Administration for an annual contract amount of $81,698, resulting in a total for FY23 and FY24 of $121,698.
The Central Nevada Health District is a new, independent public entity that is small in its number of employees and it makes fiscal sense to contract out the required services of human resources, district attorney, and fiscal and public information officer as opposed to hiring these positions/departments independently. Churchill County has agreed to a yearly rate to supply these services.
FISCAL IMPACT: Churchill County will charge an annual fee of $81,698.00 inclusive for the services listed
EXPLANATION OF IMPACT: The cost for Churchill County to provide these services is economical compared with the CNHD having to hire these positions independently.
FUNDING SOURCE: FY23- January 1, 2023 - June 30, 2023, $40,000 Grant obtained through Churchill County Social Services
FY24 - July 1, 2023 - June 30, 2024, $81,698, Grants and fees collected for the CNHD
ACTION REQUESTED: Accept

Civil Deputy DA Weed made this presentation as outlined above.

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

Social Services Director Shannon Ernst said that she would like to point out one thing, the Board is not paying fees until July 1, 2023. So I want everyone to recognize that we don't really have a lot of money. The funds that are being used to pay the $40,000 is coming from a grant from the CDC Workforce, it was issued to Churchill County Social Services not only to help create the district but to provide the staff that is visiting the communities and helping the communities. We are working with them also for all the other positions that are not on staff to get hired. We just received some additional funds to help get the administrator on board sooner than July 1. We're looking at the Manager for Environmental Health. The positions are outlined in the budget and will be placed on the next agenda to make sure that you do get to see that full budget. I want you to know that from now to June 30 everything is being paid by grant funds. So I will make some comments on those every once in a while to let you know what is available. Tyson McBride said we do have the funds available to pay for this now right? Shannon Ernst said absolutely, we have allocated in the modification to pay the administrative cost, to allow these contracts to go forward. Civil Deputy DA Weed said part of the challenge was that this timeline got moved up 7 months or so, so it was kind of a scramble to try and figure out how to get it done. The funding is there and the contracts we'll go through next and we'll talk about the funding that the members will start paying to the districts, but there will be funding. Member Jim R. Barbee said just to clarify I recognize we're talking about the specific item A under New Business but as we move through these contracts, contracts are associated between now and July 1 the state has stepped up and helped identify funding to be able to position us to do that and this is basically in the largest sense how these funds are provided as we move to July 1 and those membership fees start on July 1 with us joining in, correct? Shannon Ernst nodded yes. Member Barbee said ok, thank you.

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

Member Bob Erickson made a Motion to accept the Interlocal Agreement between the CNHD and Churchill County for administration services as presented Member Cassie Hall seconded the motion, which carried by unanimous vote.

B- Consideration and possible action re: Approval of Interlocal Agreements between City of Fallon, Churchill, Pershing, and Mineral Counties outlining the Scopes of Work for each entity.

Per NRS 439.370, a health district may be created by the approval of the Boards of County Commissioners of two or more adjacent counties, the governing body of two or more cities or towns within any county; or the board of county commissioners and the governing body or bodies of any incorporated city or cities, town or towns in such a county. This agreement includes their formal intent to join the District and includes the agreed upon monetary contribution for each county and city.

FISCAL IMPACT: Revenue from the agreements to the Central Nevada Health District
$100,000 base
$5 / capita
20% contingency
Due quarterly starting on or before July 15, 2023

EXPLANATION OF IMPACT: Fees for services to be provided and support operations of the Central Nevada Health District

FUNDING SOURCE: Each county and/or city joining the Central Nevada Health District

ACTION REQUESTED: Accept

Civil Deputy DA Weed made this presentation as outlined above.

Social Services Director Shannon Ernst said and just to add these have been sent to all of your jurisdictions and Pershing has returned theirs today. Member Larry Rackley from Pershing County I do have the signed agreement from our lab yesterday, which I need signed by the chair so I can take a copy back. Chairman Tedford said City of Fallon passed our agreement on Tuesday of this week.

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

Member Jim R. Barbee made a motion to accept the individual Interlocal Agreements between the Central Nevada Health District, to join the District, and the City of Fallon, Churchill County, Mineral County and Pershing County. Member Larry Rackley seconded the motion, which carried by unanimous vote.

C- Consideration and possible action re: Approval of an Interlocal Agreement between the Central Nevada Health District and Eureka County for Service Provisions until eligible to become a member per Legislative action.

Eureka County has participated in the planning of the Central Nevada Health District since the meetings began. They are currently being held back from officially joining per NRS 439.370 subsection 1 states that counties must be adjoining. It is anticipated that this restriction in law

will be changed in the 2023 legislative session.
FISCAL IMPACT: The direct cost of services rendered, to be paid by Churchill County Social Service grant revenues until July 1, 2023
EXPLANATION OF IMPACT: The cost to provide services to Eureka County will be by a grant until July 1, 2023 when they will pay a contribution.
FUNDING SOURCE: Grant from the State Department of Public and Behavioral Health
ACTION REQUESTED: Accept

Civil Deputy DA Weed made this presentation as outlined above.

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

Member Justin Heath made a motion to approve the Agreement to provide services to Eureka County until such a time that they are allowed by law to officially join the Central Nevada Health District Member Denise Ferguson seconded the motion, which carried by unanimous vote.

D- Consideration and possible action re: Approval of Interim Health Officer Contract between the Central Nevada Health District and Dr. Tedd McDonald for the term of December 8, 2022 - June 30, 2023.

It is required that the Central Nevada Health Officer obtain and maintain a Health Officer. It is recommended to enter into an interim agreement with Dr. Tedd McDonald to provide interim services from December 8, 2022 through June 30, 2023. This will allow the board to review, approve and release RFQ to obtain a Health Officer effective July 1, 2023, but maintain compliance.
FISCAL IMPACT: $2,000 / month plus liability insurance
EXPLANATION OF IMPACT: monthly fee, plus coverage
FUNDING SOURCE: Churchill County Social Services CDC Workforce Grant
ACTION REQUESTED: Accept
Civil Deputy DA Weed made this presentation as outlined above.

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

Member Ernst said I would just like to provide comment that this is covered by the grant and we also pay for the liability insurance pertaining to this board for this contract.

Member Bob Erickson made a motion to approve the Contract as presented Commissioner Justin Heath seconded the motion, which carried by unanimous vote.

E- Consideration and possible action re: Adopt Churchill County Health Department Policies and Procedures on an interim basis.

The CNHD policies are not yet written but will need policies to operate under immediately. By accepting the policies already in place for Churchill County this gives the CNHD staff time to develop their own, personalized policies, procedures and standard operating procedures.
FISCAL IMPACT: None

EXPLANATION OF IMPACT: N/A
FUNDING SOURCE: N/A
ACTION REQUESTED: Accept

Marena Works stated since there is going to be an official opening of the Central Nevada Health District July 1, 2023 but until that time there are services that were being done in Churchill, Pershing, Eureka and Mineral Counties, mostly having to do with COVID-19 testing and different vaccinations. So in order to carry those on, and while we are developing our own policies and procedures for the Central Nevada Health District we need some policies to function under. The request here is to adopt Churchill County policies at the moment until we have the chance to write Central Nevada Health District policies so that operations wont have to stop in the 6 to 7 month interim period. Social Services Director Shannon Ernst said I believe your motion further explains authorizing the interim administrator and the health officer to make revisions as necessary to provide services through this interim as all of these are being developed, just as a note.

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

Member Jim R. Barbee made a Motion to accept the Churchill County Public Health Policies, Procedures, and Standard Operating Procedures for an interim term while the Central Nevada Health District policies are being written and approved and further authorize the Health Officer to issue standing orders as required for vaccine administration and COVID testing. Member Cassie Hall seconded the motion, which carried by unanimous vote.

F- Consideration and possible action re: Approval of the Central Nevada Health District Administrator Job Description and posting for the position.

As a new entity, the CNHD needs an administrator to lead the day to day operations and to be a link between the CNHD Board of Health and the District employees. According to the CNHD Bylaws Article VII - Powers and Duties section 7.1 the Board shall appoint the Health Administrator and shall advise the Administrator on such matters as he/she may bring forth.
FISCAL IMPACT: A maximum of $206,916 including wages and benefits for 12 months of employment
EXPLANATION OF IMPACT: The cost of hiring an Administrator includes wages and benefits calculated at 55% of the highest wage.
FUNDING SOURCE: The cost of hiring an Administrator prior to July 1, 2023, will be covered by a grant from the State of Nevada, Department of Public and Behavioral Health. The funds may come from more than one grant.

July 1, 2023 costs will be covered by the CNHD operation budget - via fess collected and grants
ACTION REQUESTED: Accept

Marena Works stated as you approved earlier Caleb Cage will be the interim administrator, but we would like to go ahead and get a full-time administrator job posted. This would be a position that is hired directly by this board, and works at the pleasure of this board. We would like to go

ahead and see if you are ok with the job description that is before you so that we can get this posted and start collecting candidates. The proposal would be to bring you the top two or top three candidates that you will interview publicly, whenever that might happen. Probably not by January but by February.

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

Member Jim R. Barbee made a motion to accept the job description for the CNHD Administrator, including wage scale, and direct staff (staff includes Churchill County employees and contractual positions) to post and recruit for this position, bringing back to the board the top 3 qualified applicants. Member Bob Erickson seconded the motion, which carried by unanimous vote.

G- Consideration and possible action re: Review of requirements for Medicaid and required details needed by Board Members.

Per Medicaid, it is required that members are registered with the federal agency to include, Full Legal name, date of Birth, and Social Security Number. As part of this requirement, the administration will need to obtain the information from each member and submit it via the federal portal for Medicaid billing approval.

Attached is a copy of the completed portal on behalf of each member. Once submitted, the information will be destroyed.

FISCAL IMPACT: No impact from this action- but it will allow for Medicaid billing on behalf of the CNHD

EXPLANATION OF IMPACT: N/A

FUNDING SOURCE: N/A

ACTION REQUESTED: None; Informational Only

Marena Works stated one of the important components of the Health District is to bring in revenue and one of the main sources through clinic operations is going to be Medicaid. Medicaid has an application process, because you are the overseeing board they are requesting from you some information that you can see from the packet in front of you. We are not able to sign up for Medicaid unless we have each board members date of birth and social security number. We wanted to make you aware of that. I know it can be uncomfortable to give that out but there is no way around this for Medicaid billing. This would be just for the purposes of Medicaid, we would apply so that we would be able to bill them for services done in the clinic. I don't know how long it takes but I want to make sure it gets in place, definitely before July 1. We can probably start billing sooner than that with the services we're doing now, once we get the Medicaid completed.

Chairman Tedford asked if there were any questions from the board but there was none. This item was presented for informational purposes only and no action was taken.

Marena Works said that just so you're aware you'll be asked for the information but that is only going to Medicaid, that's it.

H- Consideration and possible action re: Approval to submit a name change from Churchill County Public Health to Central Nevada Health District for WebIZ and CLIA Laboratory Exempt License.

Direct services have been provided under the name Churchill County Public Health. As part of the transition from Churchill County to the Central Nevada Health District, it is required to complete name changes for all sites and access for staff.

It is requested authorization to complete said action
FISCAL IMPACT: None
EXPLANATION OF IMPACT: N/a
FUNDING SOURCE: N/A
ACTION REQUESTED: Accept

Marena Works said that what this is currently, WebIZ is the immunization registry for the state of Nevada anybody that gets an immunization in this state it is required by law to be entered in the WebIZ system. Also as part of that there are different programs in the state of Nevada such as Vaccines for Children and another program they call 317 which is a way to get immunizations at low to no cost from the state of Nevada. Currently that is under Churchill County and it needs to switch to Central Nevada Health District. The CLIA Laboratory Exempt License covers in office tests, an example is COVID-19 tests. When you go in and get a quick swab that is done in office, that has to be done in a CLIA Exempt Laboratory so as part of the Central Nevada Health District each clinic site will have a CLIA License for an Exempt Lab. This is simply your approval to put in for the name change from Churchill County Public Health to the Central Nevada Health District.

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

Member Jim R. Barbee made a Motion to approve the name changes and further authorize the Chair or Transition Manager and or Health Officer to execute as required. Member Denise Ferguson seconded the motion, which carried by unanimous vote.

I- Consideration and possible action re: Approval to Submit for an EAN, DUNS, and SAMS on behalf of the Central Nevada Health District.

It is required for the CNHD to complete applications to obtain EAN, DUNS, and Sams numbers as required to complete necessary grants and filings.
FISCAL IMPACT: None
EXPLANATION OF IMPACT: N/A
FUNDING SOURCE: N/A
ACTION REQUESTED: Accept

Marena Works said in order for the Central Nevada Health District to be able to apply for and receive grant money from the state of Nevada or anywhere else they are required to have these numbers. We would like to go ahead and get those applications and send them in, with your approval.

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

Member Jim R. Barbee made a motion to apply for EAN, DUNS, and SAMS numbers on behalf of Central Nevada Health District and further authorize the Chair or/and Transition Manager to execute as required. Member Cassie Hall seconded the motion, which carried by unanimous vote.

J- Consideration and possible action re: Establishment of the 2023 Central Nevada Health District Meeting Schedule.

To assist in administration, it is required to set an annual schedule for the Board of Health. Per the bylaws, meetings, at a minimum, must be every two months or six times per year.
FISCAL IMPACT: None
EXPLANATION OF IMPACT: N/A
FUNDING SOURCE: N/A
ACTION REQUESTED: Accept

Marena Works said the minimal requirement for meetings would be quarterly. However, due to the fact that there is a lot of business to be conducted in getting the board organized and running in time to launch the Central Nevada Health District by July 1, 2023, it is recommended that the board meet monthly. It was suggested that the board meet on the 2nd Thursday of each month at 1:30 PM.

Member Ernst confirmed that the board room is available in Churchill County and participants can join via Zoom or meetings could be conducted in other locations if staff in those locations are willing to set up and run the meeting.

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

It was agreed that the meetings will be held on the 2nd Thursday of each month at 1:30 PM, with an option for virtual meeting.

K- Consideration and possible action re: Review and approval of a Central Nevada Health District Logo.

The CNHD will need to approve or provide recommendations on a logo. The provided logo was initially reviewed and developed by the working committee.
FISCAL IMPACT: NONE
EXPLANATION OF IMPACT: N/A
FUNDING SOURCE: N/A
ACTION REQUESTED: Accept

Marena Works made this presentation as outlined.

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

After discussion, it was agreed to table this matter to the next meeting to allow all board members to consider the logo and be able to vote.

Reports/Notification of Items Received:

There were no items received.

Consent Items:

There were no consent items.

Consideration of Future Agenda Items:

The following items were suggested for the future meeting: adoption of a logo, budget, funding review, and memberships in NALBOH and NACCHO organizations mentioned by Marena Works.

Consider and schedule future meeting date and location:

The next meeting will be held on January 12, 2023, at 1:30 PM in Churchill County.

Public Comment:

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

Adjournment:

The meeting was adjourned at 4:55 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

Brittany Burton, Office Specialist