WASHOE COUNTY COMMISSION WASHOE COUNTY BOARD OF HEALTH

JOINT MEETING

TUESDAY <u>1:00 P.M.</u> FEBRUARY 26, 2008

PRESENT:

Bob Larkin, Washoe County Commission, Chairman
Bonnie Weber, Washoe County Commission, Vice Chairperson
Jim Galloway, Washoe County Commissioner

David Humke, Washoe County Commissioner*

Kitty Jung, Washoe County Commissioner

George Furman, Washoe County Board of Health, Chairman

David Humke, Washoe County Board of Health, Vice Chairman*

Amy Khan, Washoe County Board of Health Member

Dan Gustin, Washoe County Board of Health Member*

Dennis Humphreys, Washoe County Board of Health Member*

Matt Smith, Washoe County Board of Health Member

Ron Smith, Washoe County Board of Health Member

Amy Harvey, County Clerk
Katy Singlaub, County Manager
Melanie Foster, Legal Counsel

The Board met in joint session in the Commission Chambers of the Washoe County Administration Complex, 1001 East Ninth Street, Reno, Nevada. Following the Pledge of Allegiance to the flag of our Country, roll was called and the Boards conducted the following business:

AGENDA ITEM 4 – PUBLIC COMMENT

<u>Agenda Subject</u>: "Public Comment (three-minute time limit per person) – (Additional Public Comment on specific agenda items will be limited to two-minute time limit per person.) Comments to be addressed to the Chairs of the meeting and to the Washoe County District Board of Health and the Washoe County Commission as a whole."

Dr. George Furman, Washoe County Board of Health Chairman, said the District Board of Health included representatives from the Cities of Reno and Sparks and Washoe County. He acknowledged a large number of letters were received expressing concern about Family Planning services. He explained essential public health services included programs for ensuring safe and clean water, air, and food; however, increasing demands on mandated services caused local health departments to decrease personal health

services. He stated those savings were being used to preserve the ability to provide legally mandated services. He noted representatives from the Cities of Reno and Sparks, Washoe County and the District Health Department were evaluating mandated and non-mandated services for efficiency.

Chairman Larkin commented this was an historic meeting of the Commission and the District Board of Health. Amy Harvey, County Clerk, indicated she had been County Clerk for 10 years and this was the first joint meeting between the two Boards during that time. Chairman Larkin welcomed the District Board of Health members to the Commission Chambers.

Elisa Maser, Nevada Advocates for Planned Parenthood Affiliates President and CEO, stated she was excited about this meeting taking place, but was concerned the City of Reno and the City of Sparks City Councils were not present because the District Board of Health represented all three local governments and received tax dollars from taxpayers in all three jurisdictions. She felt these were very important discussions about budget and services, and she hoped the Cities would be included in setting priorities as the budget discussions moved forward. She noted the Health Department received \$10 million from the County's General Fund, but she understood the County wanted to cut Family Planning funds by 90 percent. She said that meant almost all of the Health Department's budget cuts would be at the expense of the Family Planning Program. She asked the County to work with community groups, like Planned Parenthood, to make sure a safety net was truly in place. She stated she was also concerned that Planned Parenthood was singled out to be de-funded through the grant process. She indicated she was looking forward to partnering with the two Boards to provide these important services to the community.

Garth Elliott said he was serving on the Nuisance Committee and he had some concerns about what was happening there because, to some extent, it involved the District Health Department and the County. He explained the Committee had been meeting for over a year and its members found the prospect of a funding cut in June 2008 to be discouraging and disruptive to the Committee's process. He said the Committee members were also discouraged because they heard the Commissioners did not fully support the Committee. He advised the Committee had been meeting for over a year because it was a huge undertaking; and he discussed the mistakes made at the Committee's inception, which lengthened the process. He discussed the specifics of why he felt a member of the Committee should have attended the Commission meetings once a month to describe what was and was not working. He indicated it was felt the Committee's work would be done by June, but he asked for the Board's indulgence if the meetings went on a little longer than that. He reiterated his request for the Commission to give the Committee the time it needed.

Lee Rowland, American Civil Liberties Union (ACLU) of Nevada Northern Coordinator, said her comments pertained to Agenda Items 5 and 6. She noted this was a budget issue and the Board was looking to see what could be offered beyond mandated services. She advised the ACLU strongly supported women's rights that were good for

women and families, specifically the right to access preventative care, family planning and medical care. She said the ACLU urged that not all of the cuts be made in one area and that full family planning be retained for all Washoe County women, particularly low-income women, because it was the fiscally responsible thing to do. She felt regardless of where anyone fell in the political spectrum, everyone should get together to reduce the number of teen pregnancies. She said the facts indicated the way to reduce teen-pregnancy numbers was to invest in family planning and it was the right thing to do to reduce abortions. She felt it would be pennywise and pound foolish to take money out of those critical areas, which would later become a burden on the State in the form of sexually-transmitted diseases, unwanted pregnancies, or having low-income women relying on the State for medical care. She urged the Boards to rethink their budgetary priorities because it was the fiscally responsible thing to do. A letter from Ms. Roland was placed on file with the Clerk.

The Chairman closed public comment.

08-173 Agenda Items 5 and 6

<u>Agenda Subject</u>: "Agenda Item 5 - Discussion regarding non-mandated and mandated Health Department Programs," and "Agenda Item 6 - Discussion regarding Title X (Family Planning Services Grant – Public Health Services Act) funding and programs."

Dr. Mary Anderson, District Health Officer, said the Board had copies of the memorandum from the Washoe County District Attorney, which had not been reissued after being reviewed. She noted there were no substantive changes to the material in the document. She stated the Board also had a copy of the District Health Department's budget. Copies of the memorandum and the budget were placed on file with the Clerk.

Commissioner Weber said the packets distributed to the Board last Tuesday included numerous letters, but no staff report and to her knowledge, no one had yet received a staff report. She advised she requested this joint meeting over a month and a half ago because she had questions about which District Board of Health services were mandated and which were not and what monies were involved in family planning. She said her request contained nothing about the budget and folks had commented on a subject that did not pertain to what she requested. She indicated it was not clear to her if there could be any discussion today due to the staff report just now being provided to the Boards and because she liked to do her homework, which she did not have a chance to do. She stated there was a lot of misinformation out in the community about why the joint meeting was being held and there was staff going out and speaking against what the Boards were for and giving out misinformation, as well as misinformation being sent out by organizations.

Member Ron Smith agreed with Commissioner Weber. He noted he just received the packet and did not know how any discussion could take place. He felt staff should be meeting with the Commissioners, because the Commissioners would be making suggestions to the Board of Health.

Commissioner Galloway acknowledged the lack of the staff report, which the Board was used to seeing, was unfortunate. However, everyone was here and a lot of people wrote letters and he felt they were owed some discussion.

Commissioner Weber noted the responses and statements made to the Commissioners came from somewhere. She found it interesting there were responses to what people thought was going to be discussed. She asked if the misinformation came from the District Board of Health or was someone in the community making it up. She felt that issue had to be dealt with first before going on with any discussion.

Commissioner Galloway stated he would appreciate the opportunity to ask a few questions and to get a statement from the Chairman of the District Board of Health about the mandates, which was on the agenda for discussion. He indicated one of his questions was about the mandates' affect on the Department's budget and if Ms. Maser concerns were reactions to plans by the District Board of Health to meet the mandates. He stated a lot of the letters pertained to those issues, which he felt should be addressed on the record to clear things up.

Member Matt Smith agreed with Commissioner Weber about there being concerns out in the community. He advised since sitting on the District Board of Health, there had been a number of times where the Commission asked that cuts be made because of the local economy. He said once the review of the programs was started, there was a reaction by people in the Health Department and in a number of other clinics that almost verged on hysteria. He stated he was not sure exactly what happened, but he agreed there was no backup for these letters because they were not based on any facts.

Dr. Anderson felt the evolution of Commissioner Weber's topic into a situation where there was concern about Family Planning funding, was the result of staff looking at mandated versus non-mandated services to locate where budget adjustments could be made. She stated the Family Planning Program, with its amount of local funding, was being looked at because it represented a significant portion of the General Fund's contribution. She felt that examination lead to a concern that the program might be substantially reduced or eliminated by not taking Title X Funding, which in turn lead to community-wide concern that there would not be any family planning services available.

Commissioner Galloway said he would like any misperceptions corrected if that was what some of the letters were based on. He asked if any direction was received from Washoe County or its Manager to make specific cuts in the area of family planning or regarding trimming the Department's overall budget. Dr. Anderson replied no direction was received specific to family planning, but direction was received relative to reducing the budget for fiscal conservancy due to the downturn in the economy.

Commissioner Galloway asked if the Department was given a target, because concern was expressed that the target could result in a 90 percent reduction in the Family Planning Program. Dr. Anderson replied the Health Department's target was a 5

percent reduction from the 2007 General Fund transfer, which would be in the \$500,000 to \$550,000 range. Commissioner Galloway noted, based on the budget he was given, family planning's budget would be \$1.661 million. He said even if the whole \$500,000 came out of family planning, there would still be over \$1 million left and it would be approximately a 30 percent reduction instead of 90 percent. He was aware the reduction was not all targeted to come out of family planning, but was the math correct. Dr. Anderson said the amount came from the Title X federal grant, which was in excess of \$700,000, and the local contribution plus fees realized from serving patients. The Community and Clinical Health Services Program Fact Sheets were placed on file with the Clerk.

Dr. Anderson felt the misperception might have come from the fact that the Family Planning Program, as currently constituted, costs a significant amount per capita. She noted that amount was in excess of the national norms by several hundred dollars per patient. She said in attempting to reduce costs to more closely match the national norm, she asked the Family Planning Program Manager to look at reducing the reliance on local dollars from the current 51 percent and 49 percent from Title X, to 90 percent from Title X and 10 percent from local. She felt that might have been misinterpreted as a 90 percent reduction. Commissioner Galloway noted regarding the reference to several hundred dollars there was a General Fund contribution toward Washoe County's Family Planning Program of \$2 per person per year. Dr. Anderson replied that would be if the entire population was looked at, but the more important number was the cost per client served in the clinic, which was the cost per patient.

In response to Chairman Larkin, Dr. Anderson provided the following breakdown in mandated versus non-mandated services and noted Administrative Health Services was the administration of the Department and was not mandated:

Non-Mandated	Mandated	Mixture of Both
Chronic Disease & Tobacco	Safe Drinking Water	Air Quality Management
Control		
Community & Clinical Health	Tuberculosis (TB)	Environmental Health Services
Services		
Emergency Medical Services	Vital Statistics	Epidemiological Surveillance
Family Planning & Teen		Hazardous Materials
Health Mall		
Maternal Child Health		Immunization
(Incline)		
Podiatry (program closing)		Public Health Preparedness
Public Health Nursing &		Sexual Health – HIV
Perinatal		
Underground Storage Tanks		Sexual Health – STD
Women, Infants and Children		Solid Waste Management
(WIC)		
WIC Marketing		Vector Control

Dr. Anderson explained under the above general categories, there would be specific programs that could unequivocally be called mandated or non-mandated instead of classifying them as a mixture.

Chairman Larkin asked if an equitable approach was being taking on the non-mandated programs for the budget reduction for fiscal year 2008/09; and, if an innovative approach was being taken in looking at non-local funding, cost sharing or some other approach. Dr. Anderson replied both mandated and non-mandated programs were being examined. She said every program had the potential to be more efficient and cost effective. She explained a need was found to hold positions vacant, but the vacancies had been happening arbitrarily based on someone leaving. She noted those vacant positions had been affecting both mandated and non-mandated programs to various degrees, and was one of the factors that had to be considered when looking at the second layer of programs.

Chairman Larkin asked for another example of cost shifting, such as looking at moving away from local funding towards grants or private funding for family planning. Dr. Anderson replied the Department had limited opportunity for private funding. Chairman Larkin asked for another example where a program manager had been asked to take an innovated approach toward budgetary issues. Dr. Anderson noted the Chronic Disease Program was non-mandated, but it was the most pressing problem in American health today and was something that would have the most affect on people's health in the coming years. She said the Department tried to find ways to fund the Chronic Disease Program because it had minimal funding. She advised one innovate approach was to look for a grant that would provide funding on obesity issues and another was to see if a program called "The Nurse/Family Partnership" was viable or not. She noted the program had national recognition and statistics to support its efficacy. She said she and Dr. Larry Sands, Southern Nevada Health District representative, were proponents of trying to implement this program to help persons with financial challenges, who were first time parents, to have a better opportunity for a successful pregnancy and successful outcome for the child's upbringing. She explained the Nurse/Family Partnership was geared towards having more successful outcomes for the individual and for society as a whole. She advised that program was being looked at to potentially conduct a pilot down the road.

Dr. Anderson indicated programs in other areas were being looked at to see if there were ways to reduce expenditures relative to local costs by increasing fees as was done by Air Quality and Environmental Health.

Commissioner Weber felt there should be accountability regarding the lack of a staff report, but did not believe it was the Commissioners who would hold anyone accountable. She explained in response to the comment about the other entities not being present, her request was simply to meet with the District Board of Health and it was never intended for the Cities of Reno and Sparks to participate.

Commissioner Weber asked if Legal Counsel could explain the County Commission's role in the District Board of Health. Melanie Foster, Legal Counsel, explained the Health District was created in the 1950's by the Cities of Reno and Sparks and Washoe County, with the creation and governance of the District being set forth in an Interlocal Agreement. She said the Agreement tied the Health District administratively very close to Washoe County, that is, County employees and Heath District employees were hired through the same mechanism, were treated as County employees, and were allowed to be part of the same bargaining unit. She explained the District uses the County's Purchasing Department in compliance with the Local Government Purchasing Act, and uses the County's Controller and Treasurer as set forth in the Agreement. She advised according to State law, if a Health District was created, the Board must be made up of representatives from each of the governments within the area covered by the District. She said there were two members each from the County and the Cities of Reno and Sparks and one elected and one appointed member. She said the members of the Board of Health were also required to appoint a physician as a member.

Ms. Foster stated the Agreement spelled out how the Health District and the Health Department were to go through the County budget process. She said the role laid out for the County Commissions was the Commissioners established the budget procedures and, through staff, the District Board of Health and the Health Department staff were told how much money was going to the Health Department. She explained once that amount was set, other than instances of pay raises for employees through collective bargaining and that kind of thing, by agreement it fell to the Board of Health to make the policy decisions regarding Health Department's programs and how the money was spent. She said the Commission's oversight role was coequal with the Cities of Reno and Sparks, and the Agreement prevented any decrease in budget without the approval of all three bodies. She noted increases were allowed if budgets within the County were increased to allow employee raises and if non-County monies were received, such as the Department obtaining a new grant. She said after the Health Department budget was prepared, the budget was required to go to the County and City Managers, so they could do a preliminary review and express any concerns they might have on behalf of their governments.

*1:40 p.m. Commissioner Humke arrived at the meeting.

Ms. Foster indicated the policy role for decisions on public health programs came from the District Board of Health. She noted the closest situation she could compare this to would be that of the District Courts, where they were funded by the Commission by law. She stated the one thing that had always been problematic about the Agreement was it did not spell out how the Health Department was funded, while Clark County had a dedicated tax rate from all of the participating entities that was used to fund their Health District. She noted the Clark's Health District functioned separately from all of the governments and did not use the Districts Attorney's Office.

Commissioner Humke asked if, for example, the Health budget was \$100 excluding all grants, what would be the proportion of funding by the entities. Ms. Foster said that would be a better question for the County's Finance Director, but she was aware that five or six years ago some letters from the 1960's evidencing a transfer in a taxing

authority from the two Cities to Washoe County to fund Health was roughly estimated to be \$3 million in today's dollars.

Katy Singlaub, County Manager, explained the value was based on a transfer of pennies of tax rate, so it depended on what the assessed value of the Cities would be today. She confirmed a small proportion of the County's General Fund dollars were transferred to support the Health Department's budget in addition to grants that were not local funds. Commissioner Humke asked if the County's General Fund stood to guarantee the full faith and credit of the County of Washoe to the Health Department. Ms. Singlaub replied she would not say it guaranteed the full faith and credit, which was not done for any department; but yes the County did have a responsibility to fund from the General Fund the local portion in full of the approved budget of the Health Department. She noted the budget was the result of a lot of iterative work by the Health Department staff, the City Managers, and herself. She said it then went to the Board of Health and then to the Commission.

Commissioner Humke asked what the general match rates on the grants for the non-mandated services were and were the match rates being exceeded if, for example the federal government paid 90 percent and the local match was 10 percent, was the County paying 20, 30, or 40 percent in addition to the County's required match. Dr. Anderson replied she could not provide that information "off the cuff" for each and every program. She referred to the Family Planning Annual Report 2005 National Summary page, Exhibit 33, where the Region IX column and Local government grants/contracts row intersected at 2 percent, which represented the average contribution of local government grants in Region IX. She noted just above it showed Region IX State government as contributing 10 percent, but in the case of Nevada there was no State funding. For the sake of comparison, if the combined total of 12 percent was used, it compared with the current situation of Washoe County having a 51 percent local and a 49 percent grant contribution. She said that put the County substantially above the Region IX norms and showed how much local contributions were depended on to support family planning. Commissioner Humke indicated he believed the Board of County Commissioners would like those numbers broken out in the future and there should be an effort to look for a local funding match from private entities.

Commissioner Galloway advised that as an individual Commissioner, he had never suggested to the Health Department that the Family Planning Program should be singled out in any way or that there had been any formal action to do so by the Board of County Commissioners. He said Dr. Anderson acknowledged that she had only received direction to reduce the budget. He stated after looking at the mix of mandated and non-mandated programs he saw no reason why the axe should fall disproportionately on the Family Planning Program. He said if information was provided for the other programs on whether or not grants were received and, if they were received, what the percentages were and it was decided the 51/49 match on Title X was higher than on all the other programs, then he felt some kind of allowance should be made. He noted he would like the Board of Health to comment on whether or not this reduction could be spread around or did they want to continue along the course of doing the family planning reduction first without

looking at everything else. Chairman Larkin asked if Commissioner Galloway wanted an immediate response. Commissioner Galloway replied if someone wanted to make a comment, but he wanted to clarify that neither he nor the Board had made a formal request to single out this program.

Commissioner Jung concurred. She indicated based on advice from Legal Counsel, this agenda item was not styled for action, but direction could be given to staff. Ms. Foster explained it was up to the Board of Health to make its budget decisions and to schedule its public hearings. She said this meeting was intended to allow the two Boards to hold an interactive discussion about Heath Department programs in general and the Title X Family Planning Program specifically.

Commissioner Weber said she requested this joint meeting because of an item that was before the Board in December or January where Counsel indicated the Board of County Commissioners was simply a pass-through for Title X funding. She asked if Title X funding could go directly to an entity providing services without coming through the District Health Department or through Washoe County. Dr. Anderson advised that Title X services were delivered through a network of community-based clinics that included state and local health departments, hospitals, university health centers, independent clinics and public and non-profit agencies. She said that meant Title X monies could be applied for by other entitles besides a local health department. Commissioner Weber felt it would be appropriate for the District Board of Health to look at having the funding go directly to nonprofit agencies in the community.

Dr. Furman indicated that the inefficiencies of the Family Planning Program were noted and were being worked on.

Commissioner Weber asked if some of the District Health employees were County employees or was it that they were treated as if they were County employees. Ms. Foster said the first reference in the Agreement reads, "Personnel matters in the Health Department shall be regulated by those Ordinances applicable to County employees." The second reference reads, "The Health Officer shall employ qualified persons under the County's merit ordinance," and prescribes, "Compensation and disciplinary action would be done in the same way they were done for County employees." Ms. Foster said that issue had been routinely litigated. She stated one of the requirements in Nevada law for someone to sue a government officer or employee, was they must sue the political subdivision that employees the officer or employee. She said the County had been very successful in obtaining dismissal of actions where Health Department employees were named and Washoe County was sued. She said that was usually done by using an affidavit from one of the Assistant County Managers that indicated, while the Health Department had close administrative ties to the County, it was a separate entity and the appropriate entity to sue was the Health District. She said there was no black and white answer, but the rules were the same for Health Department employees. She said the District Attorney's Office always took the position that they were employees of the Health Department and of the District Board of Health.

In response to Commissioner Jung, Dr. Anderson said the information on what proportion of the Family Planning clients for FY 2006/07 received birth control or contraceptives was not available, but staff would get back to Commissioner Jung with an answer by the end of the week.

In response to Chairman Larkin, Dr. Anderson noted the Health Department's budget presentation to the County Commission was scheduled for March 17th. She said there was a pre-meeting with the Cities of Reno and Sparks and Washoe County in early March to discuss the budget.

Commissioner Galloway asked if private organizations could be required to have a match for the Title X funding, because when the County took Title X funds, the County provided the match and then some of the work was farmed out to private organizations. He said if the funds went directly to the private organizations, they would have to come up with the match themselves. He asked if it would be better before pursuing that idea to find out how many of the organizations had a match available. Dr. Anderson explained one of the things the Health Department staff did as a result of looking at their programs, and in particular Family Planning, was to try to evaluate the potential for community capacity. She said it did not appear there was another agency that could totally take over the Family Planning Program. She indicated the potential might exist down the road for another agency to get the resource levels and the service levels up to a level that would not impact the community's capacity to serve its current clients. Commissioner Galloway said he was not as optimistic that would be enough to take over a huge portion of this, because he felt a program that had its benefits spread over the entire population should have its match provided by the government.

Commissioner Galloway said based on Dr. Anderson's answer, he hoped that during the budget process each program would be looked at because there were a lot of unmandated programs or those that were mixed. He said staff should look at each program's needs and then how much the money could be leveraged. He indicated for family planning, the high teen pregnancy rate should be taken into account. He felt a balanced approach should be taken towards the budget reduction so no single program would be devastated.

Member Kahn said she was honored to serve on the District Board of Heath and that she wanted to acknowledge staff and management for their scrutiny in looking at the programs, the mandates, and at those areas where efficiency could be improved. She appreciated Commissioner Weber's interest in wanting to discuss Title X and noted action had been taken over the last several months, with some support by County management, to look at the Health Department's budget. She stated she wanted to make sure any additional concerns were brought up that may not have already been addressed.

Commissioner Weber responded that her interest was the Title X funding coming through the Board as pass-through funding, and that it was important to look at how the Title X money could go directly to the providers. She discussed the number of clinic visits during fiscal year 2006/07 and noted the demographics indicated that 55

percent of the clients were Spanish speaking, which she felt was an important consideration. She asked if out of all those visits, there was an idea of who administered the visits and how many staff members it took. Dr. Anderson replied Family Planning currently had a staff of 17, which included five Advanced Nurse/Practitioners, three Community Health Aids, one Office Support Specialist, five Office Assistant II's, one Licensed Practical Nurse (LPN), one Health Educator, and one part-time Public Health Nurse. She indicated in fiscal year 2009 there would be 15 persons supporting the Family Planning Program.

In response to the call for public comment, Vicki LaSasso, stated she was with the Nevada Women's Lobby, who had advocated for a lot of these programs. She noted yearly checkups and obtaining birth control were the primary functions of health care for most young women of any income. She indicated there were a lot of studies that backed up the fact that every family planning dollar spent saved almost \$4 down the road. She said another thing to be considered would be where would these women turn if family planning was not available and at what cost to themselves, to their families, and to the community. She said if the women did not receive these services, the community would pay for their pregnancies and all of the support services those pregnancies include. She stated it was tempting to only look at the bottom line today, but it was important to look at the long term cost of cutting costs.

Janice Flanagan, said she was a member of the American Association of University Women – Reno Branch, which supported the complete funding of Title X. She noted that even though the cost per client was high, the cost per capita was low and everyone in the community benefited from having a good Family Planning Program. She asked both Boards to consider these were real people who would be impacted by the cuts mades.

Paula Berkley stated she represented Cherie Jamason, Food Bank of Northern Nevada, and she placed a letter from Ms. Jamason on file with the Clerk. She stated the organization liked the idea and benefit of working with the County and the District Health Department in providing all of the resources together.

Sam Dehne discussed his warnings that the governments would run out of money and his problem with abstinence only being given a token reference as part of the Family Planning Program.

The Chairman closed public comment.

Chairman Larkin thanked the District Board of Health for taking time out of their schedule, because he felt this was an important discussion to have. He noted any of the governing bodies could have this discussion with the District Board of Health and that maybe this should be done again. He stated he was surprised by the wide breath being taken by the Health Department regarding mandated and non-mandated programs and some of the innovations being looked at and applauded Dr. Anderson for doing so.

No action was taken on these items.

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<u>2:51 p.m.</u> There being no further business to come before the Board, for the Washoe County Commission, on motion by Commissioner Humke, seconded by Commissioner Weber, which motion duly carried, Chairman Larkin ordered that the meeting be adjourned.

For the District Board of Health, on motion by Member Humke, seconded by Member Matt Smith, it was ordered that the meeting be adjourned.

	ATTEST:
ROBERT M. LARKIN, Chairman Washoe County Commission	AMY HARVEY, County Clerk and Clerk of the Board of County Commissioners
	ATTEST:
DR. GEORGE FURMAN, Chairman Washoe County District Board of Health	DR. MARY ANDERSON, District Health Officer

Health Department

Minutes Prepared by: Jan Frazzetta, Deputy County Clerk