



Board of Health Meeting

Tuesday, May 18, 2021, 9:00 a.m.
13307 Miami Lane, Caldwell, ID 83607

Public comments specific to an agenda item for the May 18, 2021 Board of Health meeting can be submitted at <https://www.surveymonkey.com/r/05182021> or by mail to: SWDH Board of Health, Attn: Administration Office, 13307 Miami Lane, Caldwell, ID, 83607. The period to submit public comments will close at 10:00 a.m. on Monday, May 17, 2021.

***Meeting Format :** In-person attendance at the meeting will be limited. Anyone unable to attend the meeting in-person is invited to view the meeting on their own device through live streaming available on [the SWDH YouTube channel](#).

Agenda		
A = Board Action Required	G = Guidance	I = Information item
9:00 A	Call the Meeting to Order	Chairman Bryan Elliott
9:02	Pledge of Allegiance	
9:03	Roll Call	Chairman Bryan Elliott
9:05 A	Request for Additional Agenda items; Approval of Agenda	Chairman Bryan Elliott
9:10	In-Person Public Comment	
9:25 I	Open Discussion	SWDH Board Members
9:40 A	Approval of Minutes – April 27, 2021 and May 4, 2021	Chairman Bryan Elliott
9:50 I	Introduction of New Employees	Emily Geary, Jaime Aanensen, Doug Doney
10:00 I	April 2021 Expenditure and Revenue Report	Troy Cunningham
10:15 I	Contracts and Funding Sources	Troy Cunningham
10:25 A	WICCC Advisory Committee Bylaws Approval	Sarah Andrade, Sam Kenney
10:35	Break	
10:45 A	IADBH Executive Council Update	Commissioner Georgia Hanigan, Nikki Zogg
10:50 A	County Contributions	Nikki Zogg
11:00 A	FY2022 Budget Proposal	Nikki Zogg
11:20 G	Board of Health Email Inbox	Nikki Zogg
11:30 A	Region 3 Behavioral Health Board Contract	Nikki Zogg
11:45 I	Director's Report	Nikki Zogg
	Board Elections	
	Budget Committee Invites and Proxy Forms	
	Summer IADBH Resolutions and Meeting Proxy Forms	
12:00	Adjourn	

NEXT MEETING: Thursday, June 17, 2021 – Budget Committee - 9:00 a.m.
Board of Health - 9:30 a.m.
Lunch Break – 12:30 p.m.
Idaho Association of District Boards of Health – 1:30 p.m.

Healthier Together

13307 Miami Lane • Caldwell, ID 83607 • (208) 455-5300 • FAX (208) 454-7722



BOARD OF HEALTH MEETING MINUTES
Tuesday, April 27, 2021

BOARD MEMBERS:

Georgia Hanigan, Commissioner, Payette County – present
Lyndon Haines, Commissioner, Washington County - present
Keri Smith, Commissioner, Canyon County - present
Kelly Aberasturi, Commissioner, Owyhee County – present
Viki Purdy, Commissioner, Adams County – present
Sam Summers, MD, Physician Representative – not present
Bryan Elliott, Commissioner, Gem County – present

STAFF MEMBERS:

Nikki Zogg, Katrina Williams, Jaime Aanensen, Mitch Kiester, Jeff Buckingham

Via Zoom: Doug Doney, Chuck Washington, Troy Cunningham, Ashley Anderson, Rachel Pollreis, Carol Julius, Emily Geary, Sam Kenney

GUESTS: Members of the public attending in person; Guests viewing live stream via SWDH You Tube page.

CALL THE MEETING TO ORDER

Chairman Bryan Elliott called the meeting to order at 9:10 a.m.

ROLL CALL

Kelly Aberasturi – present; Dr. Summers – not present; Chairman Elliott – present; Commissioner Hanigan – present; Commissioner Purdy – present; Commissioner Haines – present; Commissioner Smith - present

APPROVAL OF AGENDA

Commissioner Smith asked for the process to add an action item for Commissioner Purdy's resolution. Chairman Elliott explained open meeting concerns with the email sent by Commissioner Purdy to the whole Board. Commissioner Smith asked for clarification about how to add an agenda item and asked if the SWDH Board of Health bylaws address that.

MOTION: Dr. Summers moved to accept the agenda as presented. Commissioner Smith seconded the motion. All in favor; motion carries.

IN-PERSON PUBLIC COMMENT

Board members heard members of the public present in-person public comment.

OPEN DISCUSSION

Board members engaged in open discussion.

Face coverings for SWDH staff

Commissioner Smith was approached by SWDH staff asking about the face covering policy in place for SWDH staff. Commissioner Smith asked if the Board can provide guidance that might help our agency. Nikki Zogg explained that we currently require masks for staff when they are in common areas not when they are in their private office spaces. This interim policy is being re-evaluated and is on the agenda to discuss tomorrow, Wednesday, April 28th, at the leadership team's weekly meeting.

Septic Program

Commissioner Smith has received inquiries from citizens requesting help with septic issues. She expressed her opinions about the septic program and asked, if as a board, can they provide some leadership help to SWDH? Nikki Zogg responded that the septic program has encountered challenges. Measures are being taken to come into compliance with state rules to protect drinking water, wells, private wells and others' drinking water around them.

Guidance opening up outdoor events

Commissioner Smith asked for guidance regarding opening up outdoor events. Nikki responded that SWDH has not put restrictions on outdoor events. Managing these outdoor events is up to the independent businesses and organizers to manage. Our staff are available to provide guidance and review when requested. Commissioner Smith asked to issue guidance that says outdoor events are safe.

Resolution

Commissioner Purdy presented a resolution to help clarify that SWDH recommendations are not mandates. Board members discussed the resolution. Commissioner Haines discussed concerns about ensuring the resolution accomplishes the intended purpose of clarifying the recommendations. Commissioner Hanigan asked to ensure that the resolution does not limit future activities of SWDH as related to public health.

Board members requested a special meeting to discuss and vote on the resolution.

APPROVE MARCH 16, 2021 BOARD OF HEALTH MEETING MINUTES AND MARCH 24, 2021 SPECIAL BOARD OF HEALTH MEETING MINUTES

Board members reviewed the March 16, 2021 Board of Health meeting minutes and the March 24, 2021 Special Board of Health meeting minutes.

Commissioner Aberasturi requested an edit to reflect he attended in person on March 24, 2021.

MOTION: Commissioner Smith moved to accept the minutes with the change requested by Commissioner Aberasturi. Commissioner Haines seconded the motion. All in favor; motion passes.

MARCH 2021 EXPENDITURE AND REVENUE REPORT

Troy Cunningham, Financial Manager, presented the March 2021 Expenditure and Revenue Report.

FY21 BUDGET REVISION

Troy Cunningham presented a request for additional spending authority. Last month, concerns regarding personnel spending authority were discussed. Commissioner Smith asked for clarification on whether the need for additional spending authority to meet personnel costs will impact next year's budget or are these temporary positions? Nikki clarified that most of these positions are temporary limited-service positions meaning when the contract funds go away the positions will go away.

Troy Cunningham requested additional spending authority in the amount of \$1,060,000 to cover increased personnel costs mostly related to COVID-19.

MOTION: Commissioner Smith made a motion to approve the request for additional spending authority of \$1,060,000 due to increased costs in personnel due to COVID-19 as outlined in the presentation. Commissioner Aberasturi seconded the motion. All in favor; motion passes.

RESOLUTION DISCUSSION

This topic was covered previously. Commissioner Purdy asked that no edits be made to her resolution when it is presented to the Board at the special meeting next week. Board members discussed the importance of keeping the resolution concise to ensure it accomplishes the intended purpose of clarifying that SWDH has not issued mandates or requirements or enforced any COVID-19 related restrictions.

ALIGNMENT OF JUNE BOARD OF HEALTH AND IADBH MEETINGS (6/17/2021)

Nikki asked Board members if there is interest in aligning the date of the annual meeting of the Idaho Association of District Boards of Health (IADBH) scheduled for June 17, 2021 with the regularly scheduled June Board of Health meeting by moving the regular Board of Health meeting scheduled for Tuesday, June 22 to June 17, 2021 in the morning before IADBH. Board members agree combining the meetings into one date on June 17, 2021 is convenient. Katrina will make the appropriate change to the annual meeting notice to reflect the date change for the June Board of Health meeting.

MOTION: Commissioner Haines made a motion to hold the regular June Board of Health meeting on Thursday, June 18 at 9:00 a.m. followed by the annual IADBH conference. Commissioner Purdy seconded the motion. All in favor; motion passes.

WESTERN IDAHO COMMUNITY CRISIS CENTER FISCAL YEAR 2022 BUDGET PROPOSAL

Sam Kenney joined the meeting to discuss the Western Idaho Community Crisis Center (WIDCCC) budget proposal. Nikki explained that following conversation with Sarah Andrade, Lifeways Program Manager, she is requesting no action be taken on this action item due to uncertainty about how House Bill 316 will impact funding.

WIDCCC CONTRACT EXTENSION

Board members did not receive the contract extension information for the WIDCCC contract in advance of the meeting. Chairman Elliott recommended this topic be carried over to the next Board of Health meeting. In addition, SWDH staff will adjust board packet material submission deadlines to ensure that materials are available for distribution to board members by the Friday before the regular Board meetings.

Nikki asked that the contract extension topic be added to the Special Board of Health meeting in the interest of time sensitivity. Chairman Elliott will add this matter to the Special Board of Health meeting agenda.

WIDCCC ADVISORY COMMITTEE BYLAWS APPROVAL

The WIDCCC Advisory Committee has reviewed these bylaws and requested approval by the Board of Health. This topic will be carried over to the next regularly scheduled Board of Health meeting.

ENVIRONMENTAL HEALTH FEES APPROVAL

Jaime Aanensen and Mitch Kiester attended virtually to request approval of a fee of \$850 for multiple test hole evaluations. Mitch clarified that up to eight test holes on one application will be included for individuals who are requesting health district evaluation prior to engineering process or prior to purchasing the property.

MOTION: Commissioner Hanigan made a motion to adopt the proposed fee of \$850 for up to eight test holes. Commissioner Aberasturi seconded the motion. All in favor; motion passes.

COUNTY CONTRIBUTIONS

Nikki discussed potential impacts to county contributions based on what happens with House Bill 316. Board members discussed delaying the budget meeting by one month to allow time to assess what will change in what counties are and are not funding. If the bill passes, the implementation date will be moved from January 2022 to March 1, 2022. This implementation date will affect the state appropriation and Mike Kane has been following this on behalf of the public health districts.

Board members agree to table the county contributions discussion until May 17, 2021. The annual Budget Committee meeting will take place in June.

FISCAL YEAR 2022 BUDGET PROPOSAL

Fiscal Year 2022 (FY22) Budget proposal review and approval will be tabled until May 17, 2021. Board members briefly discussed the inclusion of funding for COVID-19 response staff in the FY22 budget. Most of the work needs will be focused on increasing vaccination rates and access to vaccines as well as maintaining capacity to investigate and monitor disease trends.

Commissioner Smith asked for a breakdown/summary of these positions with names redacted including a summary of the staffing needs and where the funding sources are coming from and that those funding sources for FY22 are already confirmed.

Action item: Troy and Nikki will develop the requested summary.

IADBH EXECUTIVE COUNCIL UPDATE

House Bill 316 was introduced to the Senate with amendments yesterday. It did go through the Senate and will go back to the House for concurrence then to the Governor's desk.

DIRECTOR'S REPORT

Budget Committee Meeting Invitations and Proxy Forms

Meeting invitations and proxy forms will be sent to each Board of County Commissioners via email.

Board of Health Term Expirations

The Board of Health Adams County representative's term expires June 30, 2021. Katrina will send a request for appointment of representative to the Adams County Board of County Commissioners. Following receipt of that appointment, ballots will be distributed to each county for commissioners' votes.

EXECUTIVE SESSION

At 1:07 p.m. Commissioner Hanigan made a motion to go into Executive Session pursuant to Idaho Code 74-206(1)b and 74-206(1)(f). Commissioner Haines seconded the motion. Poll was taken Aberasturi – aye; Purdy – aye; Elliott – aye. Summers – not present. Smith – excused from meeting prior to Executive Session. Motion was unanimous. No action was taken. Open session was resumed at 1:08 p.m.

There being no further business, the meeting adjourned at 2:31 p.m.

Respectfully submitted:

Approved as written:

Nikole Zogg
Secretary to the Board

Bryan Elliott
Chairman

Date



SPECIAL BOARD OF HEALTH MEETING MINUTES

Tuesday, May 4, 2021

BOARD MEMBERS:

Georgia Hanigan, Commissioner, Payette County – present via Zoom
Lyndon Haines, Commissioner, Washington County – present via Zoom
Keri Smith, Commissioner, Canyon County - present in person
Kelly Aberasturi, Commissioner, Owyhee County – present in person
Viki Purdy, Commissioner, Adams County – present in person
Sam Summers, MD, Physician Representative – present in person
Bryan Elliott, Commissioner, Gem County – present in person

STAFF MEMBERS:

Nikki Zogg, Katrina Williams, Sam Kenney

Via Zoom: Doug Doney, Chuck Washington, Ashley Anderson

GUESTS: Members of the public attending in person; Guests viewing live stream via SWDH YouTube page.

CALL THE MEETING TO ORDER

Chairman Bryan Elliott called the meeting to order at 9:02 a.m.

ROLL CALL

Kelly Aberasturi – present; Dr. Summers - present; Chairman Elliott – present; Commissioner Hanigan – present via Zoom; Commissioner Purdy – present; Commissioner Haines – present via Zoom; Commissioner Smith – present

APPROVAL OF AGENDA

MOTION: Commissioner Aberasturi moved to accept the agenda as presented. Commissioner. Dr. Summers seconded the motion. All in favor; motion carries.

IN-PERSON PUBLIC COMMENT

Board members heard members of the public present in-person public comment.

RESOLUTION DISCUSSION AND VOTE

Commissioner Purdy introduced the amended resolution for discussion and vote. She asked board members to consider making a clear statement regarding support of individuals and businesses to make decisions they feel best.

Dr. Summers asked for discussion of what this resolution does that we are not already doing. Commissioner Smith responded that the resolution supports the mission to promote the health and wellness of those who live, work, and play in Southwest Idaho by prioritizing the whole health of our communities and by clearly stating we are giving rights back to the people to choose how they want to operate as families, individuals, schools, and businesses.

Dr. Summers asked Nikki Zogg if there is anything in the resolution that inhibits future activities of the Board and the health district. Director Zogg expressed concern about the future ability of the health

district to conduct inspections and take actions to protect the health of the population in the areas of food safety and protection, licensed childcare, and potable water. The resolution as written could be interpreted to limit the public health district's ability and authority in these areas unrelated to COVID-19. Board members discussed wording changes needed to limit the scope of the resolution to COVID-19 specific instances.

Commissioner Aberasturi suggested the resolution be very clear that it is specific to COVID-19 (SARS-CoV-2). Commissioner Haines also requested that COVID-19 language be added to the last paragraph. Commissioner Hanigan also felt the last paragraph is overbroad concerning the conversations last week.

Commissioner Elliott clarified that this resolution is not a law. It is simply intended to let the people know that this Board of Health supports the freedom of choice for individuals that we have always supported.

Commissioner Elliott feels the resolution needs to be specific to COVID-19 or communicable diseases. If we have a new one, what will we know about it? Commissioner Smith suggested adding coronavirus to the title to narrow the scope. Dr. Summers asked that COVID-19 or SARS-CoV-2 be used rather than coronavirus.

Commissioner Haines suggested adding phrasing to the title of the resolution to clarify what the resolution is about.

MOTION: Commissioner Haines made a motion to adopt the resolution as presented with the addition of the phrase “Related to SARS-CoV-2 (COVID-19) and its variants or mutations” at the end of the title of the resolution. Commissioner Smith seconded the motion. All in favor; motion passes.

LETTER TO THE CITIES

Nikki asked if the Board would like her to respond to cities with information to consider if they are presented with a resolution similar to the one the Board of Health just adopted. Commissioner Purdy suggested edits to the letter to remove the second and third paragraphs.

Commissioner Aberasturi noted that each of the cities are their own government agencies. Commissioner Smith stated that the letter is helpful as to the heart of why we did what we did and how we will move forward. She commended the writing of the letter and stated that mayors and city councils will have questions about what decisions were made and why. She supports the letter.

Commissioner Elliott stated that the last paragraph could be removed or redone but other than that is very much in favor of pushing out this information. Nikki will consider the guidance provided by the Board but does not feel a motion is necessary.

WESTERN IDAHO COMMUNITY CRISIS CENTER CONTRACT EXTENSION

Sam Kenney, Project Manager, presented a request to extend the contract currently in place with Lifeways for management of the Western Idaho Community Crisis Center (WIDCCC) based on the recommendation of the Western Idaho Community Crisis Center Advisory Board.

Commissioner Aberasturi commended Lifeways for their operation and management of the crisis center.

MOTION: Commissioner Smith made a motion to grant the WIDCCC contract extension in place with Lifeways for a period of two years as allowable within the current contract. Commissioner Aberasturi seconded the motion. All in favor; motion passes.

EXECUTIVE SESSION

At 10:31 a.m. Commissioner Smith made a motion to go into Executive Session pursuant to Idaho Code 74-206(b). Commissioner Haines seconded the motion. Roll was taken.

At 10:51 a.m. Board members came out of Executive Session.

Action taken as a result of Executive Session

MOTION: Commissioner Smith made a motion to approve the Director’s Employee Agreement as presented with a 2% annual increase. Dr. Summers seconded the motion. All in favor; motion passes.

There being no further business, the meeting adjourned at 11:00 a.m.

Respectfully submitted:

Approved as written:

Nikole Zogg
Secretary to the Board

Bryan Elliott
Chairman

Date

DRAFT



**SOUTHWEST DISTRICT HEALTH
BUDGET REPORT FOR APRIL 2021 (FY21)**

Target 83.3%

This month

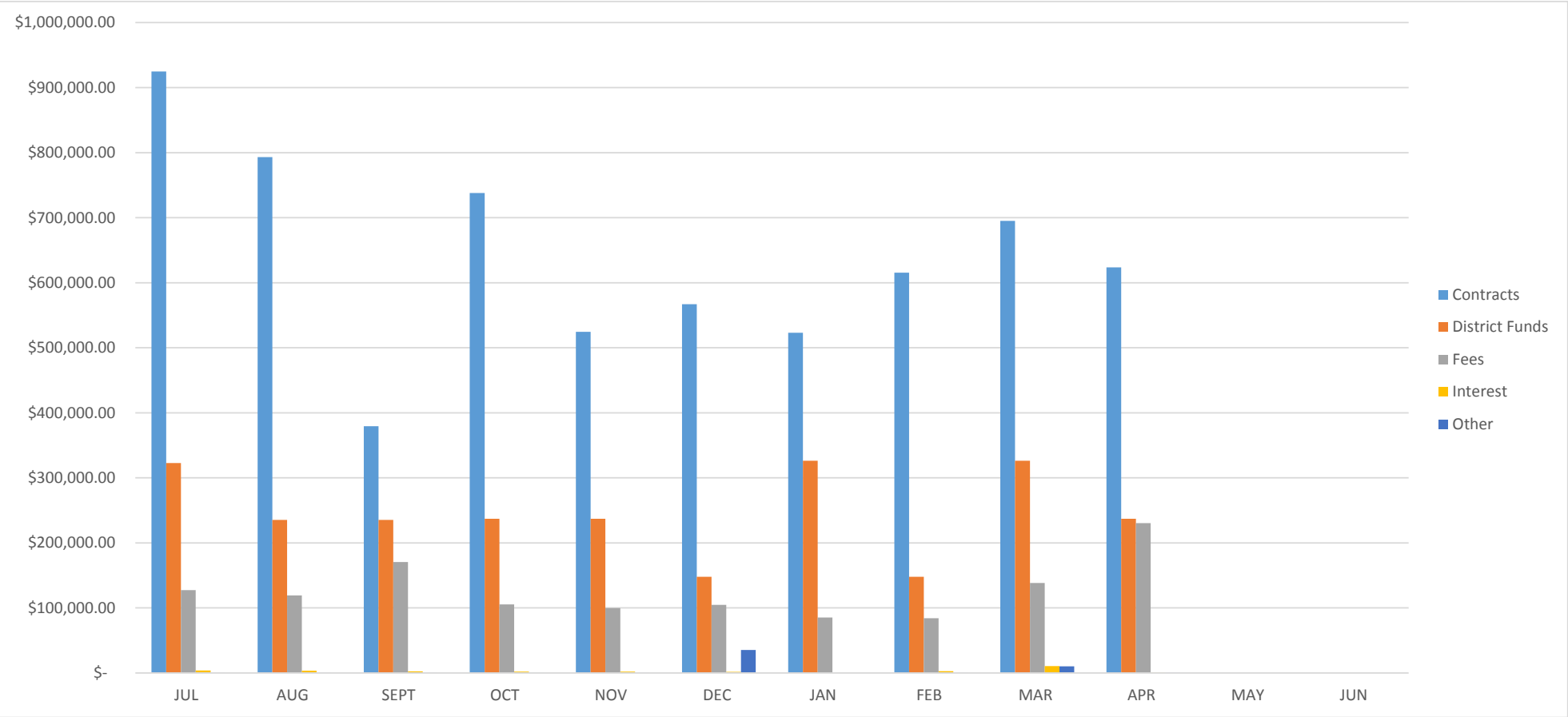
Fund Balances		
	Beginning Total:	Apr 30
General Operating Fund	\$ 66,114	\$ 14,710
Millennium Fund	\$ -	\$ 73,643
LGIP Operating	\$ 2,630,723	\$ 3,855,792
LGIP Vehicle Replacement	\$ 99,207	\$ 99,663
LGIP Capital	\$ 1,299,174	\$ 1,299,174
Total	\$ 4,095,218	\$ 5,342,982

Year-to-Date Cash Position			CHANGE
Carry Over:	Revenues:	\$ 10,388,652	
	Behavioral Health Board	\$ (10,793)	
	CRP	\$ (7,102)	
	Parents As Teacher	\$ (190,760)	
Net Revenue:		\$ 10,179,997	\$ 1,092,713
Expenditures:		\$ (9,175,719)	\$ (1,219,723)
Net Cash Position:		\$ 1,004,278	\$ (127,010)

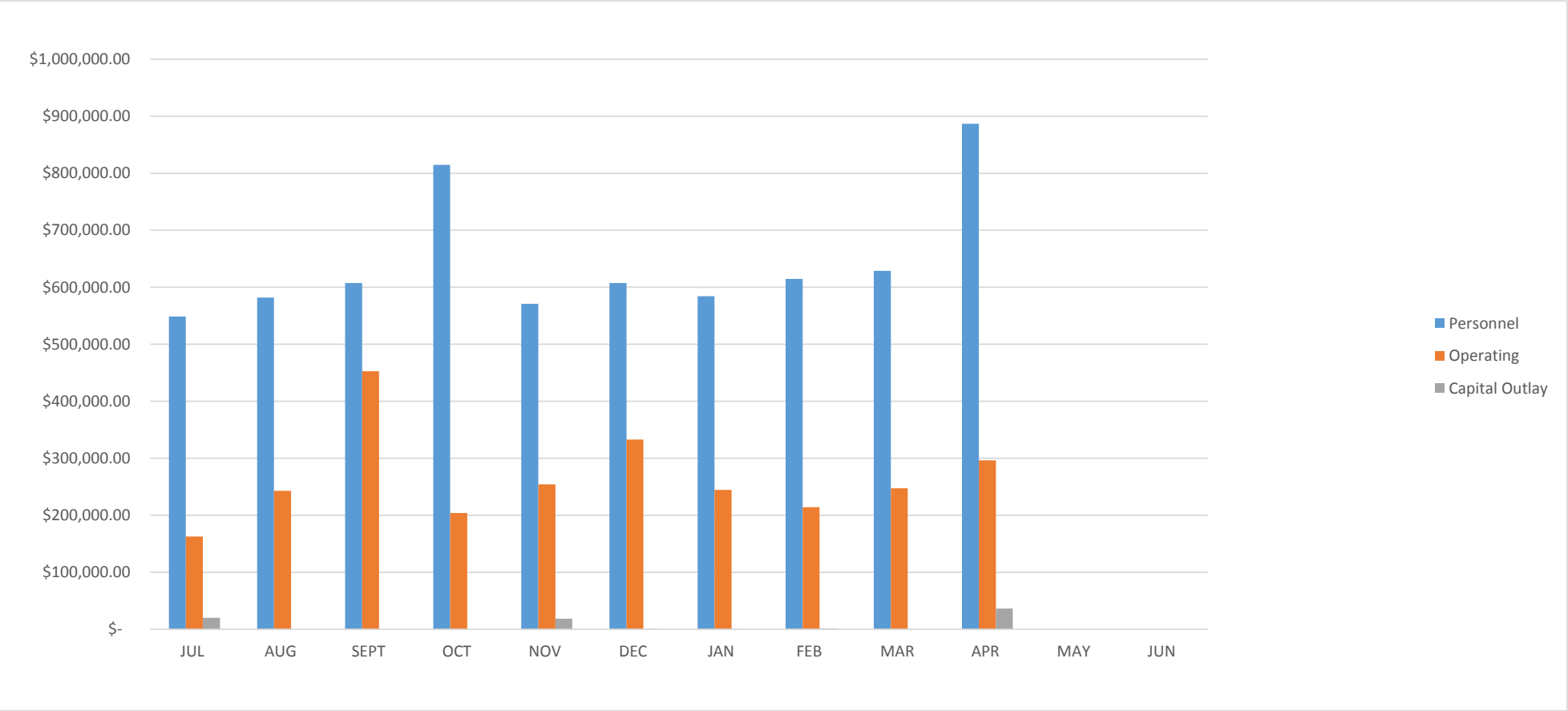
Revenue											
	Board of Health	Admin	Clinic Services	Env & Community Health	General Support	Buildings	Crisis Center	Total	YTD	Total Budget	Percent of Direct
Fees	\$ -	\$ -	\$ 64,251	\$ 165,857	\$ -	\$ 330	\$ -	\$ 230,438	\$ 1,265,036	\$ 1,715,979	74%
Contracts	\$ -	\$ -	\$ 172,628	\$ 366,838	\$ -	\$ -	\$ 84,082	\$ 623,547	\$ 6,384,400	\$ 5,801,838	110%
Sale of Assets	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 20,000	0%
Interest	\$ -	\$ 875	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 875	\$ 30,155	\$ 80,000	38%
District Funds	\$ 806	\$ 11,782	\$ 100,172	\$ 38,677	\$ 53,150	\$ 32,478	\$ -	\$ 237,066	\$ 2,452,838	\$ 4,369,047	
Carry-Over Funds	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 208,655	\$ 70,027	
Other/Committed Funds	\$ -	\$ 107	\$ 680	\$ -	\$ -	\$ -	\$ -	\$ 787	\$ 47,566	\$ 27,886	171%
Monthly Revenue	\$ 806	\$ 12,764	\$ 337,731	\$ 571,372	\$ 53,150	\$ 32,808	\$ 84,082	\$ 1,092,713	\$ 10,388,652	\$ 12,084,777	86.0%
Year-to-Date Revenue	\$ 8,340	\$ 152,256	\$ 3,426,001	\$ 4,852,467	\$ 727,028	\$ 339,148	\$ 883,410	\$ 10,388,652	Total Direct budget is \$10,560,522 + \$1,524,255 indirects= \$12,084,777		
Direct Budget	\$ 15,043	\$ 299,905	\$ 3,878,817	\$ 3,036,833	\$ 1,219,147	\$ 602,422	\$ 1,508,355	\$ 10,560,522			
Budget	\$ 15,043	\$ 299,905	\$ 4,724,791	\$ 3,682,696	\$ 1,238,534	\$ 602,422	\$ 1,521,386	\$ 12,084,777			
	55.4%	50.8%	88.3%	159.8%	59.6%	56.3%	58.6%	98.4%			

Expenditures											
Personnel	\$ 1,525	\$ 21,102	\$ 312,338	\$ 439,276	\$ 95,166	\$ 12,900	\$ 4,705	\$ 887,012	\$ 6,445,653	\$ 6,775,177	95%
Operating	\$ -	\$ 2,517	\$ 23,946	\$ 179,080	\$ (5,104)	\$ 30,390	\$ 65,604	\$ 296,434	\$ 2,652,235	\$ 5,124,800	52%
Capital Outlay	\$ -	\$ -	\$ -	\$ 10,500	\$ -	\$ 25,777	\$ -	\$ 36,277	\$ 77,831	\$ 184,800	42%
Monthly Expenditures	\$ 1,525	\$ 23,619	\$ 336,284	\$ 628,857	\$ 90,062	\$ 69,067	\$ 70,309	\$ 1,219,723	\$ 9,175,719	\$ 12,084,777	75.9%
Year-to-Date Expenditures	\$ 16,329	\$ 179,555	\$ 2,638,297	\$ 4,346,039	\$ 838,693	\$ 392,915	\$ 763,892	\$ 9,175,719	Total Direct budget is \$10,560,522 + \$1,524,255 indirects= \$12,084,777		
Direct Budget	\$ 15,043	\$ 299,905	\$ 3,878,817	\$ 3,036,833	\$ 1,219,147	\$ 602,422	\$ 1,508,355	\$ 10,560,522			
Budget	\$ 15,043	\$ 299,905	\$ 4,724,791	\$ 3,682,696	\$ 1,238,534	\$ 602,422	\$ 1,521,386	\$ 12,084,777			
	108.6%	59.9%	55.8%	118.0%	67.7%	65.2%	50.2%	75.9%			

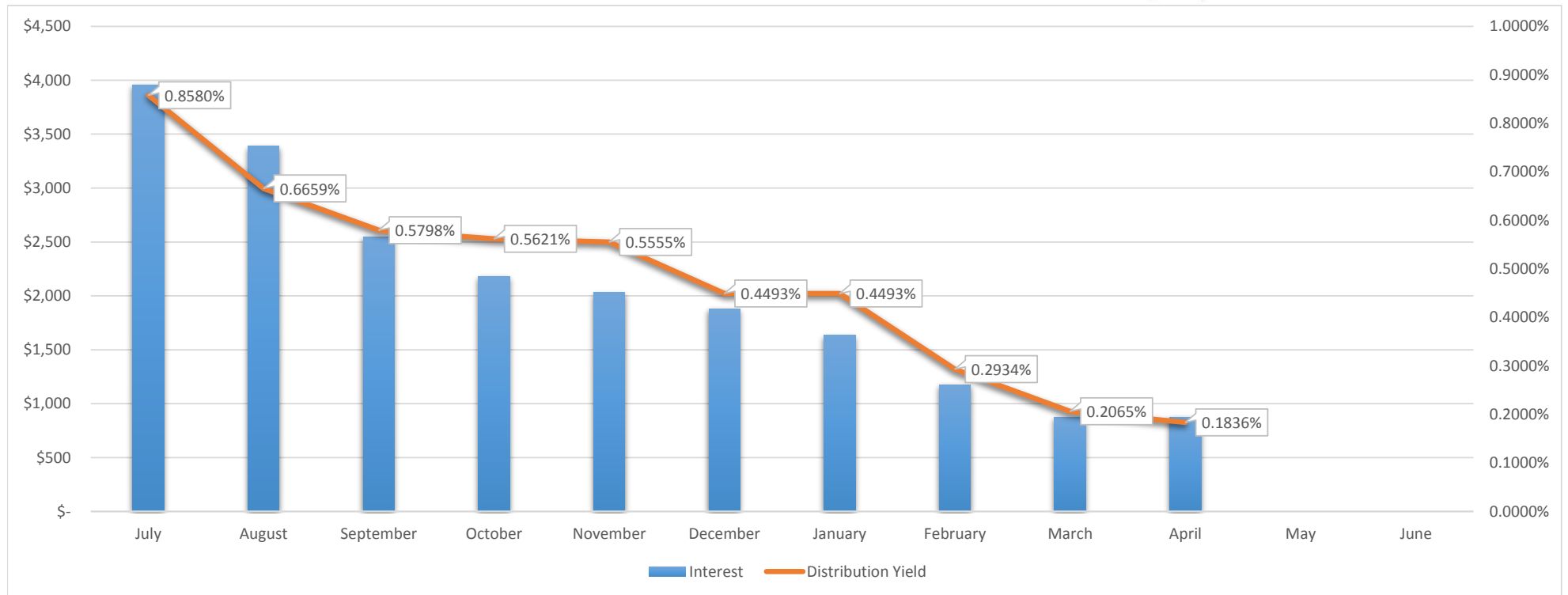
YTD REVENUES



YTD EXPENDITURES



YTD INVESTMENT YIELD TRENDS





Title	Amount	Brief Description	FUNDING SOURCE
STD/HIV Prevention Activities	\$84,431	This subgrant provides access to clinical services, HIV testing, partner services, linkage to care, PrEP/PEP, and STD Testing.	Federal Pass-through Sub-grant
Women's Health Check	\$28,625	This subgrant will provide cancer prevention awareness through client reminders, provider referrals, small media, and collaboration with other community and non-profit organizations.	Federal Pass-through Sub-grant
State Supplied Immunizations and High Risk Seasonal Flu Vaccine	\$82,285	This subgrant will conduct activities (marketing, promotion, education, etc.) in direct support of increasing immunization rates in Idaho, and conduct other activities with a focus on high risk adult populations for influenza.	Federal/State Mix Pass-through Sub-grant
Immunizations	\$12,200	This subgrant will provide site visits to immunization centers to assess their general knowledge, provide technical assistance, and education.	Federal Pass-through Sub-grant
Healthcare School Project	\$12,967	Collaborative project with partners to bring preventative health services to schools.	Federal Pass-through Sub-grant
Nurse Family Partnership	\$515,000	This subgrant provides for the Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV), nurse supervision and training.	Federal Pass-through Sub-grant
Parents as Teachers	\$206,206	State funded home visiting program to improve outcomes and reduce justice involvement for low-income and high-risk families.	State Appropriation
Citizen's Review Panel	\$19,000	State funded program to support the oversight of DHW's foster care program and improve outcomes of children entering the foster care system.	State Appropriation
Oral Health	\$38,150	This subgrant provides dental screenings to school based clinics and parent education.	Federal Pass-through Sub-grant
State Actions to Improve Oral Health	\$18,500	This subgrant will plan and coordinate School-Based/Linked Dental Sealant Clinics to children and adolescents in elementary and middle schools to improve oral health.	Federal Pass-through Sub-grant



Title	Amount	Brief Description	FUNDING SOURCE
Oral Health Workforce *HRSA	\$22,982	This subgrant will provide increased access to oral health services by developing projects in Dental Health Professional Shortage Areas and employing the utilization of Silver Diamine Fluoride.	Federal Pass-through Sub-grant
Women, Infants, and Children (WIC)	\$1,209,122	This subgrant will provide general administration, clients services, breastfeeding promotion, nutrition education, and breastfeeding peer counseling to the WIC program.	Federal Pass-through Sub-grant
Public Water Systems Contract	\$228,906	This subgrant provides funding for the oversight, inspection, and related activities to ensure that public drinking water systems comply with applicable state and federal regulations.	Federal Pass-through Sub-grant
RIBHNN - Rural Integrated Behavioral Health Hub Network * HRSA	\$199,999	This grant will provide funding to replicate and implement the Regional Hub for Integrated Behavioral Health in additional Health Districts across Idaho.	Direct Federal Grant
Regional Behavioral Health Board	\$200,000	This subgrant will provide administrative services and support of the Regional Behavioral Health Board (\$50,000 per year).	Federal/State Mix Pass-through Sub-grant
Suicide Prevention	\$35,000	This subgrant will organize and coordinate a Districtwide Collective of individuals, businesses, community members, and survivors, whose purpose is to develop a plan with strategies consistent with the Idaho State Suicide Prevention Plan to reduce deaths by suicide.	Federal Pass-through Sub-grant
Drug Overdose Prevention Program	\$108,055	This subgrant will advance opioid prevention work through public and prescriber education, local capacity building, public safety partnerships, and the social determinants of health.	Federal Pass-through Sub-grant
Diabetes, Heart Disease, Stroke	\$42,000	This subgrant will provide community-based diabetes/hypertension prevention and management education.	Federal Pass-through Sub-grant
Child Care Health/Safety Program and Child Care Complaints	\$550,000	This subgrant will provide guidance to outline the respective roles of the public health districts in implementing the Child Care Health and Safety Program throughout Idaho and help ensure that all children in child care settings are in a health and safe environment while receiving care.	Federal Pass-through Sub-grant
Disease Reporting	\$65,982	This subgrant will provide epidemiologic investigation and reporting on all reported cases of disease.	Federal Pass-through Sub-grant



Title	Amount	Brief Description	FUNDING SOURCE
HIV Surveillance	\$9,164	This subgrant will provide activities to detect, securely investigate, and complete documented cases of reported HIV infection.	Federal Pass-through Sub-grant
TB Elimination	\$55,734	This subgrant will allow for directly observed therapy, contact investigations, RVCT reporting, EDN reporting, and attendance at tuberculosis-specific training.	Federal Pass-through Sub-grant
Perinatal Hep B	\$21,150	This subgrant will provide Perinatal Hepatitis B surveillance and case management.	Federal Pass-through Sub-grant
NEDSS - National Electronic Disease Surveillance System	\$356,435	This subgrant will provide vaccine preventable disease surveillance and disease investigation data entry.	Federal Pass-through Sub-grant
Adolescent Pregnancy Prevention - PREP and TANF	\$54,289	This subgrant will conduct activities that support implementation of Reducing the Risk curriculum and Youth-Adult Partnership groups to aid in adolescent pregnancy prevention.	Federal Pass-through Sub-grant
Wise Guys	\$13,163	This subgrant will provide activities to support implementation of Wise Guys curriculum/training and statutory rape presentations.	Federal Pass-through Sub-grant
Sexual Risk Avoidance Education	\$17,455	This subgrant will provide activities that support implementation of the State Sexual Risk Avoidance Education curriculum to Idaho students ages ten to fourteen (10-14) at schools, community sites, youth centers, sports leagues, faith groups, and juvenile justice centers.	Federal Pass-through Sub-grant
Physical Activity & Nutrition	\$75,500	This subgrant will provide programmatic activities to the public. This includes but is not limited to the following: Fit and Fall Proof fall prevention training and coordination; age friendly park assessments; childhood obesity prevention; child and family health.	Federal/State Mix Pass-through Sub-grant
Cancer Prevention Activities	\$27,000	This subgrant will implement evidence-based strategies to increase cancer screening and prevention (sun safety training, HPV vaccination reminders, breast and cervical cancer screening).	Federal Pass-through Sub-grant
Millennium Fund	\$130,000	State appropriated funds to prevent tobacco use among youth and young adults, eliminate secondhand smoke, promote quitting among youths and adults, and identify and eliminate tobacco related disparities among population groups.	State Appropriation



Title	Amount	Brief Description	FUNDING SOURCE
Tobacco Prevention Resource Program Activities	\$84,000	This subgrant will provide activities to: prevent tobacco use among youth and young adults, eliminate secondhand smoke, promote quitting among youths and adults, and identify and eliminate tobacco related disparities among population groups.	Federal Pass-through Sub-grant
Healthy Store Initiative	\$21,000	This subgrant will support the goals and objectives of Idaho's Supplemental Nutrition Assistance Program State Plan (SNAP-Ed) to improve the likelihood that Food Stamp Program participants have access to and will purchase healthy food choices within a limited budget.	Federal Pass-through Sub-grant
Cuidate	\$41,280	This subgrant will provide support to the Adolescent Pregnancy Prevention program by providing Cuidate Curriculum, implementation, and education.	Federal Pass-through Sub-grant
Partnership for Success	\$215,271	This subgrant will provide activities for the Be the Parents campaign (parent learning sessions, youth leadership activities), and Youth Mental Health (training, screening, referrals).	Federal Pass-through Sub-grant
Crisis Center	\$3,240,000	This subgrant allows for the Behavioral Health Community Crisis Center to deliver crisis intervention and services to the Region 3 community. \$1,520,000 per year.	State General Fund
Crisis Center - CFAC Funding	\$30,000	This subgrant allows for the Behavioral Health Community Crisis Center to deliver crisis intervention and services to the Region 3 community specifically targeted to COVID-19 barriers.	Federal Pass-through Sub-grant



Title	Amount	Brief Description	FUNDING SOURCE
Preparedness COVID-19 Response - Preparedness Assessment, Cities Readiness Initiative	\$475,395	This subgrant will provide support to Public Health Emergency Preparedness in the following areas: community preparedness and recovery, incident management and emergency operations coordination, emergency public information and warning management, medical countermeasures dispensing and administration, mass care, fatality management, and public health surveillance and epidemiologic investigation.	Federal Pass-through Sub-grant
Preparedness COVID-19 Supplemental	\$360,753	This subgrant provides supplemental funding for the COVID-19 response specific to preparedness as it relates to the district's emergency operations and epidemiological response.	Federal Pass-through Sub-grant
ELC Cares Enhancing Support COVID-19	\$3,238,721	This subgrant will support the rapid establishment and monitoring of key activities related to responding to COVID-19 in the areas of epidemiology, laboratory, and informatics.	Federal Pass-through Sub-grant
Coronavirus Relief (Schools) - COVID-19	\$477,500	This subgrants allows for the COVID-19 school response and testing in the following areas: Public Health COVID-19 School Point of Contact, school testing, isolation, and contact tracing.	Federal Pass-through Sub-grant
Kresge Foundation COVID-19	\$35,000	Aims to decrease barriers to education, testing, and vaccine resources among the Hispanic/Latinx community.	Direct Private Foundation Grant
Vaccinations Subgrant- COVID-19	\$166,722	This subgrant supports a range of COVID-19 vaccination activities.	Federal Pass-through Sub-grant
Vaccinations DHW - COVID-19 Immunizations	Reimbursement for 1st and 2nd doses	This grant is to support increased COVID-19 vaccination capacity, safe storage and handling of COVID-19 vaccines, ensure equitable distribution and administration, and improve timely reporting into the Immunization Reminder Information System (IRIS). Ends April 2021	Federal Pass-through Sub-grant



Western Idaho Community Crisis Center Advisory Committee Bylaws

LEGAL AUTHORITY:

Bylaws of the Advisory Committee are amended and adopted by the Southwest District Health (SWDH) Board of Health pursuant to the authority granted in Title 39, Chapter 1 through Chapter 91, Idaho Code (IC 39-91). The Division of Behavioral Health (DBH), as the state behavioral health authority established by section 39-3123, Idaho Code, shall oversee the crisis centers to ensure compliance with the intent of this chapter, application of the model, associated administrative rules and patient safety. DBH shall be authorized to perform annual audits of crisis centers as necessary to fulfill its oversight responsibility.

PREAMBLE:

These bylaws are to aid the SWDH Board's WICCC Advisory Committee on guiding the organization, implementation, and operation of the center as it provides an effective behavioral health service delivery system that meets the needs of its constituency. The term of advisory committee membership, appointment authority for members and organizational structures shall be guided by these bylaws established by SWDH. (IC 39-9105)

Article 1. Advisory Committee Membership

Section 1.1 Eligibility

The Advisory Committee shall consist of no fewer than five (5) and no more than ten (10) members and shall include a minimum of a local behavioral health consumer, a physician, law enforcement and a county commissioner from within the region. (IC 39-9104) Advisory Committee members shall not have not been convicted of a felony or criminal offense related to the delivery of health care. In all proceedings of the Advisory Committee, each voting member is entitled to one vote

Section 1.2 Ex-officio Members

The Advisory Committee shall include the project manager from SWDH, program manager from DBH, and a representative from the vendor operating WICCC. These members make up to the ten (10) maximum prescribed in section 1.1. Ex-officio members are non-voting members.



Section 1.3 Member Nomination Process

Parties interested in service on the Advisory Committee should inform Chair by submitting a nomination form. Nominations will be considered every two years and as members resign. When the committee needs a new member, nomination forms will be reviewed and vetted, and voted on by current members to recommend appointment by the SWDH BOH.

Section 1.4 Committee Appointment

The SWDH BOH will review nominations recommended by the Advisory Committee and vote to appoint members.

Section 1.4 Member Terms

Appointed members of the committee shall serve a minimum of a two-year term from the time appointment is approved by the SWDH BOH. Members are eligible for reappointment for a total of 3 consecutive terms.

Section 1.5 Member Resignation

Resignation from the Advisory Committee must be in writing and received by the Chair.

Section 1.6 Member Termination

Termination of Advisory Committee membership may occur for inappropriate activities as determined by the committee. Termination must be approved by a two-thirds majority of the Advisory Committee. The member in question of termination may not be present at the vote.

Article 2. Officers

Section 2.1 Election of Officers

Each year, the Advisory Committee shall elect a chair and vice-chair. The Ex-officio member from SWDH will act as secretary. The new officers shall take office on or after the conclusion of the advisory meeting in which they are elected.

Section 2.2 Duties of Chair

The Chair of the WICCC Advisory Committee shall preside over Advisory Committee meetings (regular and special); member nominations; sub-committee appointments; present WICCC updates to the SWDH BOH as needed; and perform all duties of the Chair position and office in accordance to these bylaws, as required by law, rules and regulation.

Section 2.3 Duties of Vice-Chair

During the absence or inability of the Chair to perform their duties, the Vice-Chair shall have the powers and be subject to the responsibilities hereby given or imposed upon the Chair.

Section 2.4 Duties of the Secretary

The Secretary of the Advisory Committee shall keep minutes, coordinate with WICCC and SWDH



for custody and posting of all meeting records, and request the committee to appoint an assistant secretary if needed to assist secretary's duties as prescribed by the secretary.

Article 3. Advisory Committee Meetings

Section 3.1 Open Public Meetings

The WICCC Advisory Committee is a committee of SWDH's Board under provisions of IC 39-9104(3). The SWDH Board of Health is subject to the Open Meeting Law (IC 74-2), it is therefore determined the Advisory Committee is also subject to the provisions of the Open Meeting Law.

Section 3.2 Meeting Notice

Notice of regular meetings shall be posted and provided to each member, giving at least 72 hours' notice and specifying its time and place. Or, if determined by the Advisory Committee to hold meetings at regular intervals of at least once per calendar month scheduled in advance over the course of the year, meeting notice may be satisfied by giving notice at least once each year of its regular meeting schedule.

Section 3.3 Regular Meetings

The Advisory Committee will meet at a minimum of once per quarter.

Section 3.3 Establishing a Quorum

A simple majority of voting members present shall constitute a quorum. In the event of a quorum not being present, no determination, action, vote, or final disposition upon a motion, proposal, resolution, order, or measure on which a vote is required shall be made.

Section 3.4 Voting Authority

The action of the majority of members' present shall be the action of the committee. Individual members of the Advisory Committee shall not speak for the committee, except on specific delegation. All voting is public; secret ballots, proxies, or email voting is prohibited.

Section 3.4 Attendance

Members shall attend posted meetings as often as able. If a Member is unable to attend a meeting, they should notify an Advisory Committee Officer. Voting by proxy or email shall not be allowed.

Section 3.5 Special Meetings

Special meetings of the Advisory Committee may be held at any time, and shall be called by the chair or majority of the members. A written notice (posted, emailed or faxed) of 24 hours shall be given for such special meetings, and no business other than that specified in such notice shall be transacted.

Section 3.6 Virtual Meetings

All meetings may provide virtual options for attendance. Such options may include, but are not



limited to, telephone or video conferencing. Virtual Participation by a member shall constitute presence in person by such member.

Section 3.7 Meeting Minutes

Neither a full transcript nor a recording of the meeting is required, except as otherwise provided by law. All minutes shall be available to the public within a reasonable time after the meeting, and shall include at least the following information: members present; all motions, resolutions, orders, or ordinances proposed and their disposition; the results of all votes, and upon the request of a member, the vote of each member, by name.

Article 4. Parliamentary Authority

Robert's Rule of Order (Simplified) shall be the governing authority for the order of business and conduct of all meetings of the Advisory Committee, and other committees of this organization when not in conflict with these By-Laws.

Article 5. Amendments

These by-laws may be altered, amended, or repealed by an affirmative vote of the SWDH Board by a two-thirds majority of all appointed members. Only such changes as have been specified in the notice shall be made. If, however, all members of the Board are present at any regular or special meeting, these by-laws may be amended by a unanimous vote, without any previous notice.

Article 6. Nondiscrimination

This Advisory Committee shall be noncommercial, nonsectarian and nonpartisan. No person shall be excluded from membership on the basis of race, color, creed, national origin, disability, gender, and sexual orientation

Article 7. Conflict of Interest

Advisory Committee members shall not use positions to promote any personal or professional business relationships, contracts, or financial gain. Advisory Committee members shall promptly disclose the existence of an actual or possible conflict of interest including any potential financial interest and all material facts to the Advisory Committee or the Board of Health. Advisory Committee members shall promptly notify the Advisory Committee or the Board of Health should any interest become potentially detrimental to WICCC. Advisory Committee members shall acknowledge that each member of the Advisory Committee has a fiduciary duty to WICCC, and as part of that duty each member is to maintain absolute confidentiality as to all non-public information to which access is available by reason of Advisory Committee membership. Advisory



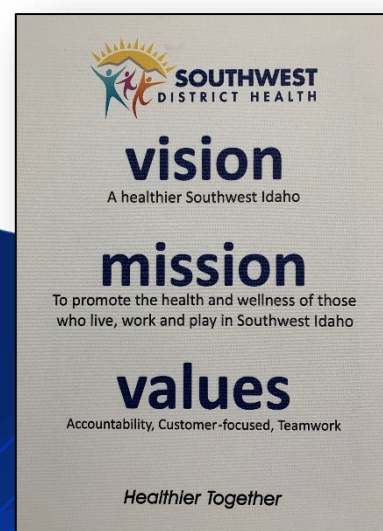
Committee members shall disclose and discuss such information only with appropriate officers, employees, agents, and advisors of WICCC and only for valid WICCC purposes or as otherwise required by law.

These bylaws were first amended and approved at a regular Advisory Committee meeting on the October 9, 2019.

Amendments to these bylaws were reviewed by the Advisory Committee on April 14, 2021 and recommended for approval by the SWDH Board of Health.



Fiscal Year 2022 Budget Request



WHAT'S INSIDE:



Summary	1
Budget Request	3
Population and Market Value	4
County Request	5
Budget Funding Sources	6
Fund Balances	7
Board of Health	8
Compensation	9
County Infographics	10-21



Fiscal Year 2022 Budget Summary

Fiscal Years 2020, 2021, and 2022 have been, and will continue to be, out of the ordinary for Southwest District Health (SWDH) due to the COVID-19 pandemic. Federal funds have been infused into public health across the state to assist with the COVID-19 pandemic response—first with epidemiological investigations, contact tracing, and testing, and now more recently with COVID-19 vaccination efforts. As a result, SWDH's proposed budget for Fiscal Year (FY) 2022 is \$13,552,240 which is a 12% increase from FY2021.

Revenue Highlights

State Appropriations

During the 2021 Legislative Session, House Bill 316 (HB316) was passed and signed into law. HB316 eliminates the State General Fund appropriation to local public health and requires counties to contribute more to support the health districts, beginning March 1, 2022. In FY2023, the State General Fund appropriation will be eliminated completely, leaving the counties to fully fund that which was previously funded by the State using the FY21 State General Fund appropriation level as the minimum base.

County Appropriations

SWDH is not requesting an increase in County Contributions for FY2022; however due to increases in population and property market values, both Adams and Canyon counties will experience an increase in their respective contributions, while the remaining counties within the health district will see a percent decrease in their contributions. As noted above, with House Bill 316, the counties will be required to contribute additional funding to support local public health starting March 1, 2022.

Fees

For FY2022, we are budgeting a 9% increase in fee revenue due to higher activity in several programs, including Subsurface Sewage Disposal (Septic), Land Development, Food Protection, and Immunizations.

Sub-grants

This year's budget reflects an overall increase of 10.5% in sub-grant funding over FY2021. Nearly all of this increase is due to continued funding related to epidemiology activities. Also included in this budget is a marked increase in funding for Oral Health (HRSA), Septic and Land revenues, Drug Overdose Prevention, Childcare, and Tobacco Education and Prevention programs funded primarily through federal pass-through sub-grants.



Expense Highlights

Salaries

Last year, SWDH's Board of Health opted not to approve salary increases to staff for FY2021 due to uncertainties in the economy due to COVID-19. SWDH has been on the front lines of the pandemic response for the last year and every employee's work has been impacted in one way or another. The district could not have fared as well as it did this past year without the dedicated and committed staff at SWDH. To address disparities in salaries, increases in employee cost for insurances, and to recognize the hard work of SWDH staff, included in this budget is a 2% salary increase as approved in the March board meeting which will be distributed to employees based on performance.

Employee Benefits

All employer benefit costs have remained relatively unchanged from FY2021. Of note, however, for FY2022, the cost to employees for medical and dental insurance is increasing an average of 8.7% (medical) and 4.2% (dental) for full time employees and an average of 3.15% (medical) and 3% (dental) for part time employees.

Operating Expenses

Operating costs are the ongoing expenses incurred from normal day-to-day activities. Overall, budgeted operating expenses for FY2022 have decreased slightly over last year.

Capital Expenses

In addition to necessary infrastructure improvements, included in this year's request is \$90,000 of board committed funds for vehicle replacement using monies set aside in the LGIP account as has been done in the past. Last year, SWDH opted not to replace vehicles due to the uncertainty of the pandemic. However, some vehicles are in need of replacement due to high mileage as well as the nature of their use in very rural and difficult terrain.

Trustee and Benefit Expenses

Trustee and Benefit expenses are those costs associated with pass through funding to third parties for activities required by grant/sub-grant deliverables.

Summary

SWDH's FY2022 budget request has increased compared to historical budgets due to an estimated increase in activities in Septic, Land Development, Food Protections, Immunizations, and COVID-19 programs. SWDH appreciates the support we receive from our counties and looks forward to an even closer working relationship in the years to come as we work hard to support the health and well-being of the residents in our communities.



Southwest District Health FY2022 Budget Request

July 1, 2021 through June 30, 2022

District Summary	FY2020 Budget	FY2021 Budget	FY2022 Request*
REVENUE			
Fees	\$1,705,615	\$1,715,979	\$1,874,852
Contracts	\$3,713,133	\$4,152,338	\$5,194,475
County Funds	\$1,381,174	\$1,401,892	\$1,401,892
County Funds HB316 Mar - June **	\$0	\$0	\$491,100
State Appropriation	\$1,444,400	\$1,442,900	\$985,800
Millennium Fund Appropriation	\$129,500	\$129,500	\$130,000
Interest	\$70,000	\$80,000	\$50,000
Sale of Land, Buildings & Equip	\$15,000	\$20,000	\$20,000
Other	\$11,200	\$14,986	\$24,000
Carry-Over Funds	\$476,416	\$70,027	\$169,000
Reserve	\$10,000	\$12,900	\$90,000
Total Revenue	\$8,956,438	\$9,040,522	\$10,431,119
EXPENDITURES			
Salary & Wage *	\$4,578,980	\$4,657,914	\$5,733,833
Employee Benefits *	\$2,111,261	\$2,117,263	\$2,631,858
Merit Increase *	\$166,500	\$0	\$0
Operating Expenses	\$1,909,791	\$2,080,545	\$1,743,528
Capital Outlay	\$189,906	\$184,800	\$197,400
Trustee Benefits (<i>Pass-thru funds</i>)	\$0	\$0	\$124,500
Total Expenditures	\$8,956,438	\$9,040,522	\$10,431,119
CRISIS CENTER			
Contract Revenue	\$1,520,000	\$1,520,000	\$1,083,289
Expenditures	\$1,520,000	\$1,520,000	\$1,083,289
GRAND TOTAL			
Revenues	\$10,476,438	\$10,560,522	\$11,514,408
Expenditures	\$10,476,438	\$10,560,522	\$11,514,408
FTEs	95.7	97.1	116.7
		COVID BASE	12.0 104.7

*2% Change in Employee Compensation accounted for in Salary and Wages as approved by the board on March 16, 2021.

** Based on FY22 State Appropriation (March - June, 2022)

May-21



Southwest District Health Population & Market Value

Changes in County Population and Net Taxable Market Value (TMV)

County	FY 2021 2019 Pop Estimate	FY 2022 2020 Pop Estimate	Population Percent Change	FY 2021 CY 2019 Net Taxable Values	FY 2022 CY 2020	TMV Percent Change
Adams	4,294	4,323	0.7%	\$595,684,570	\$670,181,179	12.5%
Canyon	229,849	232,313	1.1%	\$15,190,228,354	\$17,104,468,660	12.6%
Gem	18,112	17,900	-1.2%	\$1,308,254,243	\$1,480,679,317	13.2%
Owyhee	11,823	11,792	-0.3%	\$738,765,837	\$809,239,280	9.5%
Payette	23,951	23,780	-0.7%	\$1,706,234,290	\$1,928,302,133	13.0%
Washington	10,194	10,189	0.0%	\$907,085,609	\$957,067,413	5.5%
TOTAL	298,223	300,297		\$20,446,252,903	\$22,949,937,982	

17-May-21

Population: provided by Idaho Department of Commerce - ID39-424

Net Taxable Values: provided by State of Idaho Tax Commission



County Request - 0% Increase + House Bill 316

Southwest District Health

Budget Request for County Fiscal Year 2022

Period Covered: October 2021 - September 2022

Based Upon Idaho Code 39-424 & HB316

County Contribution = 70% Population Distribution + 30% Taxable Market Value (TMV)

October 2021 - February 2022						
County	2020 Population Estimate	70%: Population	Dollar Amount	30%: TMV	Dollar Amount	Total Contribution
ADAMS	4,323	1.44%	\$5,886	2.92%	\$5,117	\$11,003
CANYON	232,313	77.36%	\$316,318	74.53%	\$130,603	\$446,921
GEM	17,900	5.96%	\$24,373	6.45%	\$11,306	\$35,679
OWYHEE	11,792	3.93%	\$16,056	3.53%	\$6,179	\$22,235
PAYETTE	23,780	7.92%	\$32,379	8.40%	\$14,724	\$47,103
WASHINGTON	10,189	3.39%	\$13,873	4.17%	\$7,308	\$21,181
TOTAL	300,297	100.00%	\$408,885	100.00%	\$175,236	\$584,122
		Monthly Contribution				
Current Contributions	ADAMS	\$2,201				
	CANYON	\$89,384				
	GEM	\$7,136				
	OWYHEE	\$4,447				
	PAYETTE	\$9,421				
	WASHINGTON	\$4,236				
March 2022 - September 2022						
County	2020 Population Estimate	70%: Population	Dollar Amount	30%: TMV	Dollar Amount	Total Contribution
ADAMS	4,323	1.44%	\$13,190	2.92%	\$11,466	\$24,656
CANYON	232,313	77.36%	\$708,789	74.53%	\$292,648	\$1,001,438
GEM	17,900	5.96%	\$54,613	6.45%	\$25,334	\$79,947
OWYHEE	11,792	3.93%	\$35,978	3.53%	\$13,846	\$49,823
PAYETTE	23,780	7.92%	\$72,553	8.40%	\$32,992	\$105,545
WASHINGTON	10,189	3.39%	\$31,087	4.17%	\$16,375	\$47,461
TOTAL	300,297	100.00%	\$916,209	100.00%	\$392,661	\$1,308,870
		Monthly Contribution	Increase/mo			
New Contributions Mar - September	ADAMS	\$4,931	\$2,731			
	CANYON	\$200,288	\$110,903			
	GEM	\$15,989	\$8,854			
	OWYHEE	\$9,965	\$5,518			
	PAYETTE	\$21,109	\$11,689			
	WASHINGTON	\$9,492	\$5,256			
TOTAL						
County	Approved FY2021	Requested FY2022	Dollar Change	Percentage Change		
ADAMS	\$26,368	\$35,659	\$9,291	35.24%		
CANYON	\$1,068,816	\$1,448,358	\$379,542	35.51%		
GEM	\$86,515	\$115,625	\$29,110	33.65%		
OWYHEE	\$54,087	\$72,058	\$17,971	33.23%		
PAYETTE	\$113,888	\$152,648	\$38,760	34.03%		
WASHINGTON	\$52,217	\$68,643	\$16,425	31.46%		
TOTAL	\$1,401,892	\$1,892,992	\$491,100	35.03%		

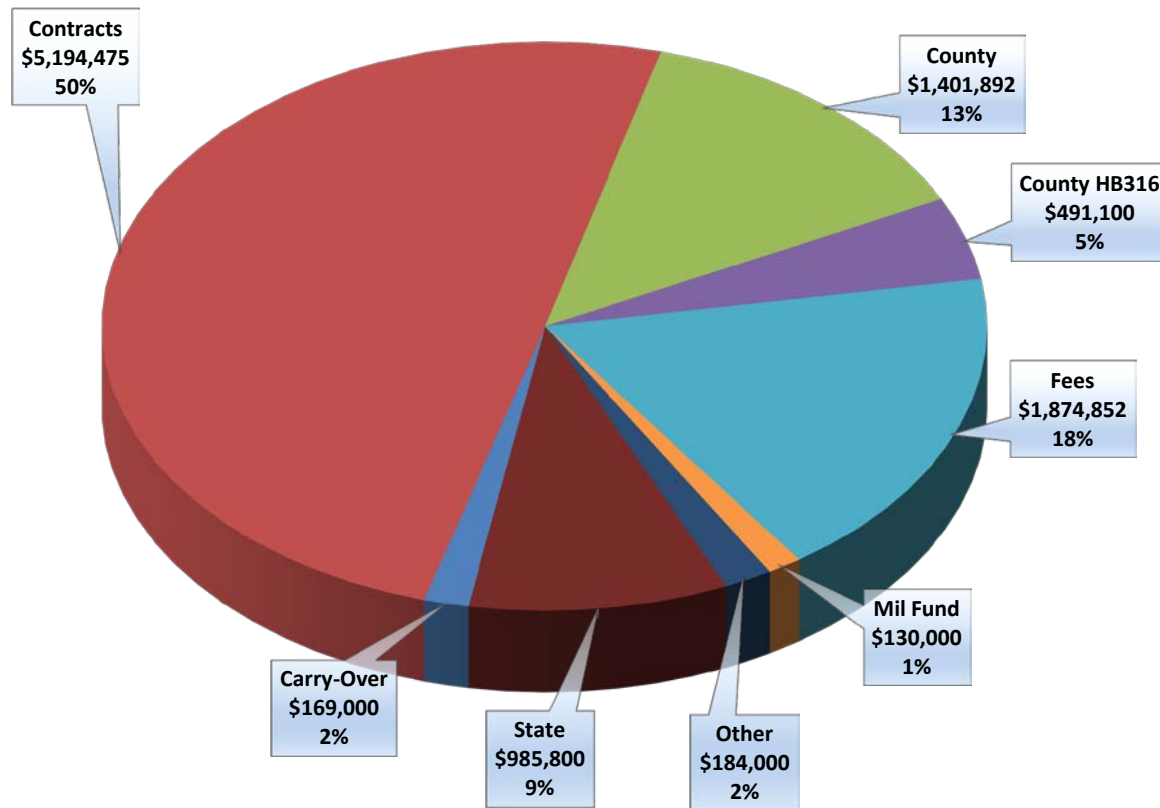
17-May-21

17-May-21



Budget Funding Sources

FY 2022



**Does not include Crisis Center contract funds in the amount of \$1,083,289*



Southwest District Health Fund Balances - as of March 31, 2021

Restricted Funds	\$207,112
(Restricted funds include funds for Behavioral Health Board, Parents as Teachers, and Citizen Review Panel)	
Committed Funds	\$525,382
(Committed funds include funds for 27th Payperiod, Medical Equipment, Computer/EMR Replacements, Capital Projects, Website Upgrade, and Auto LGIP)	
Capital Reserve Fund (LGIP)	\$1,299,174
Unrestricted Operating Funds	<u>\$3,646,832</u>
	\$5,678,500

Southwest District Health

Summary of Restricted and Committed Funds - FY 2021

Restricted Funds - Third party restricted

Committed Funds - Committed by the Board of Health for a specific purpose

	Restricted Funds	Committed Funds
Behavioral Health Board	\$4,383.47	
Parents as Teachers	\$199,786.39	
Citizen's Review Panel	\$2,942.53	
Medical Equipment & Training		\$75,000.00
Computer/EMR Replacements		\$138,760.00
Capital Projects		\$143,246.05
27th Payperiod		\$51,500.00
Website Upgrade		\$17,230.00
Vehicles (LGIP Auto Replacement)		\$99,646.00
	<u>\$207,112.39</u>	<u>\$525,382.05</u>

17-May-21



Board of Health

Commissioner Bryan Elliott, Chairman – Gem County

Commissioner Kelly Aberasturi, Vice-Chairman – Owyhee County

Dr. Sam Summers – Physician Representative

Commissioner Viki Purdy – Adams County

Commissioner Keri Smith – Canyon County

Commissioner Georgia Hanigan, Trustee – Payette County

Commissioner Lyndon Haines – Washington County

SOUTHWEST DISTRICT HEALTH EMPLOYEE COMPENSATION FY20-FY21

TREND ALERT

Employee Turnover Rate



Southwest District Health
Turnover Rate
Number of separations
18

Statewide
Turnover Rate
Number of separations
1,676

RECRUITING MARKET

Comparison between PHD3 & PHD4



0% increase in
employee
compensation



3% increase in
employee
compensation

MERIT INCREASES

0%

SOUTHWEST
DISTRICT HEALTH

3%

ADAMS COUNTY

2%

CANYON COUNTY

3%

GEM COUNTY

4%

OWYHEE COUNTY

3%

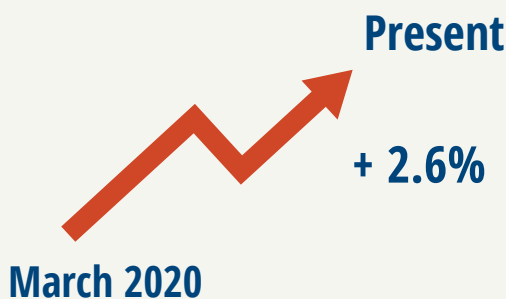
PAYETTE COUNTY

3%

WASHINGTON COUNTY

AVERAGE COST OF LIVING

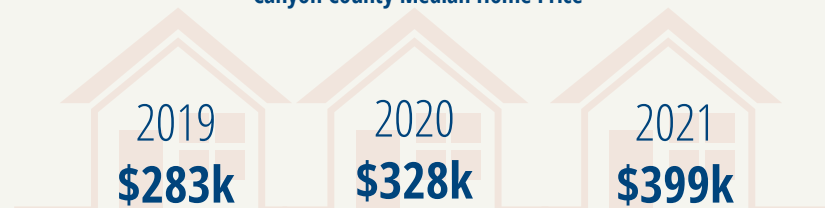
Canyon County Data 2019-2020



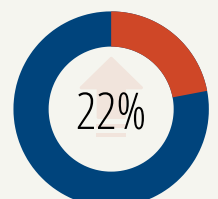
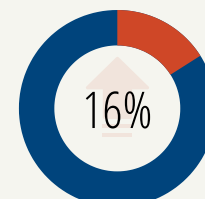
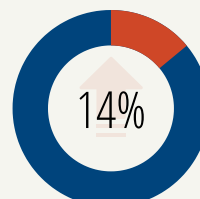
CHANGES IN AFFORDABLE HOUSING

Canyon County Data 2019-2021

Canyon County Median Home Price



Canyon County Average Home Price % Increase



*In Canyon County, home prices are expected to
increase by 33% over the next three years. 9

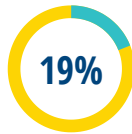
ADAMS COUNTY

Healthier Together FY20

Health Outcomes

ADAMS COUNTY

Health outcomes are changes in health that result from specific health care investments or interventions.



of Adams County residents report poor or fair health



of babies born in Adams County have a low birth rate



Life expectancy in Adams County is 80.1 years

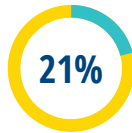


Adams County ranks 39 out of 43 ranked counties in Idaho

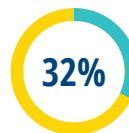
Health Factors

ADAMS COUNTY

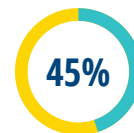
Health Factors represent those things we can modify to improve the length and quality of life for residents.



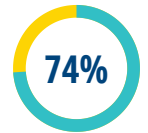
of adults in Adams County smoke tobacco



of adults in Adams County are considered obese



of children in Adams County are eligible for free or reduced lunch



of Adams County residents have access to broadband internet



16% of Adams County residents are uninsured

Health Investment in ADAMS COUNTY

July 2019 - June 2020

Clinic Services

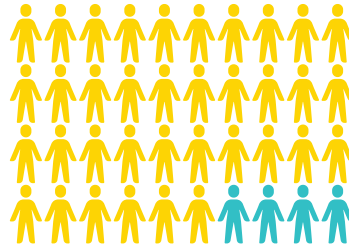


6

immunizations
administered

2

immunization
appointments



36

WIC participants



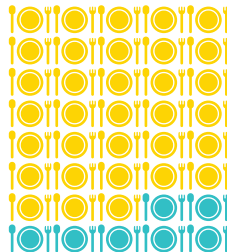
\$3,733,384.60
spent in
WIC vouchers*

Environmental Health



21

septic permits



33

restaurant inspections



pool inspections



CANYON COUNTY

Healthier Together FY20

Health Outcomes

CANYON COUNTY

Health outcomes are changes in health that result from specific health care investments or interventions.



of Canyon County residents report poor or fair health



of adults in Canyon County are diabetic



Life expectancy in Canyon County is 79.1 years



Canyon County ranks 19 out of 43 ranked counties in Idaho

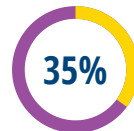
Health Factors

CANYON COUNTY

Health Factors represent those things we can modify to improve the length and quality of life for residents.



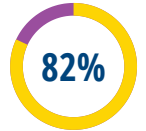
of adults in Canyon County smoke tobacco



of adults in Canyon County are considered obese



of children in Canyon County are eligible for free or reduced lunch



of Canyon County residents have access to broadband internet



17% of Canyon County residents are uninsured



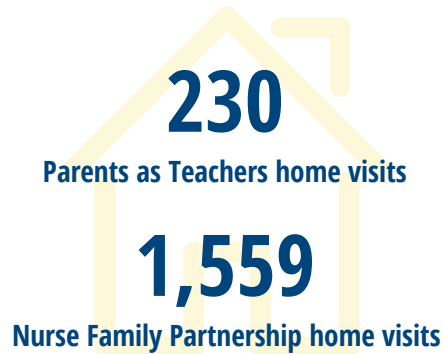
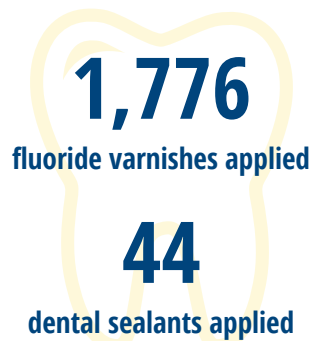
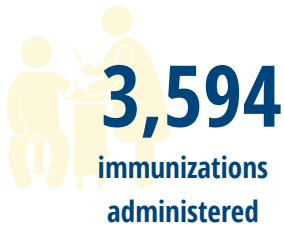
SOUTHWEST
DISTRICT HEALTH

Health Investment in CANYON COUNTY

04222021

July 2019 - June 2020

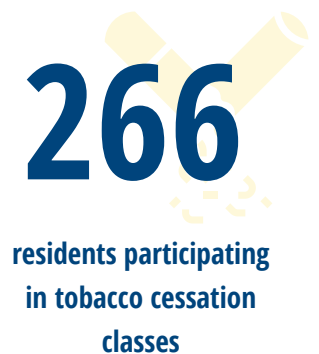
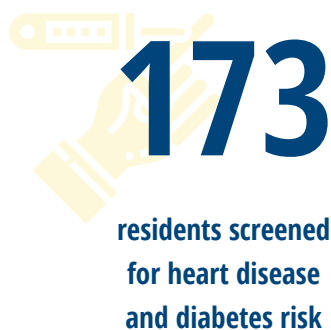
Clinic Services



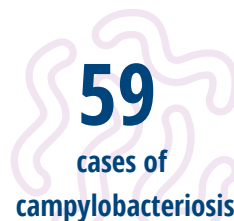
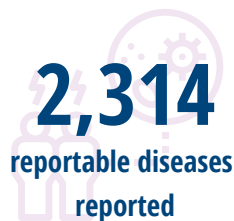
Environmental Health



Community Health



Communicable Diseases



GEM COUNTY

Healthier Together FY20

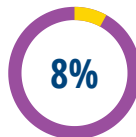
Health Outcomes

GEM COUNTY

Health outcomes are changes in health that result from specific health care investments or interventions.



of Gem County residents report poor or fair health



of babies born in Gem County have a low birth rate



Life expectancy in Gem County is 78.2 years

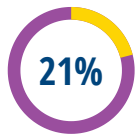


Gem County ranks 25 out of 43 ranked counties in Idaho

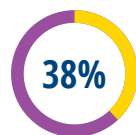
Health Factors

GEM COUNTY

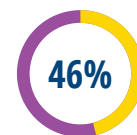
Health Factors represent those things we can modify to improve the length and quality of life for residents.



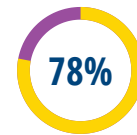
of adults in Gem County smoke tobacco



of adults in Gem County are considered obese



of children in Gem County are eligible for free or reduced lunch



of Gem County residents have access to broadband internet



16% of Gem County residents are uninsured



Health Investment in Gem COUNTY

July 2019 - June 2020

Clinic Services



695

immunizations
administered



70 women enrolled
in Women's Health
Check, 4 were
treated for breast
or cervical cancer

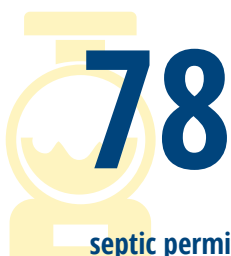
482

WIC participants



\$3,733,384.60
spent in
WIC vouchers*

Environmental Health



septic permits

5

accessory use
permits issued



10

signed land
development plats

83
5

restaurant inspections
child care inspections

Community Health



38

Fit and Fall Proof™
participants

Gem County
Community Health
Action Team (CHAT)
conducted a
walkability assessment
to make
recommendations
for increasing
pedestrian safety

Communicable Diseases



111

reportable diseases reported

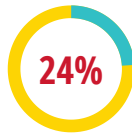
OWYHEE COUNTY

Healthier Together FY20

Health Outcomes

OWYHEE COUNTY

Health outcomes are changes in health that result from specific health care investments or interventions.



of Owyhee County residents report poor or fair health



of babies born in Owyhee County have a low birth rate



Life expectancy in Owyhee County is 78.2 years

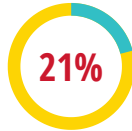


Owyhee County ranks 42 out of 43 ranked counties in Idaho

Health Factors

OWYHEE COUNTY

Health Factors represent those things we can modify to improve the length and quality of life for residents.



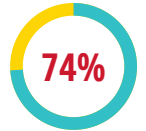
of adults in Owyhee County smoke tobacco



of adults in Owyhee County are considered obese



of children in Owyhee County are eligible for free or reduced lunch



of Owyhee County residents have access to broadband internet



24% of Owyhee County residents are uninsured



Health Investment in OWYHEE COUNTY

04222021

July 2019 - June 2020

Clinic Services



74

immunizations
administered



175

fluoride varnishes
applied

424

WIC participants



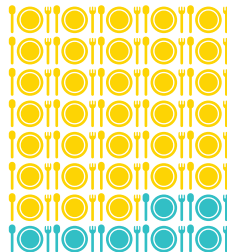
\$3,733,384.60
spent in
WIC vouchers*

Environmental Health



58

septic permits



69

restaurant inspections



4

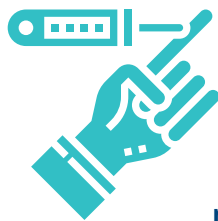
pool inspections

Community Health



20

Fit and Fall Proof™
participants



12

residents screened
for heart disease
and diabetes risk

21

residents participating
in tobacco cessation
classes



PAYETTE COUNTY

Healthier Together FY20

Health Outcomes

PAYETTE COUNTY

Health outcomes are changes in health that result from specific health care investments or interventions.



of Payette County residents report poor or fair health



of adults in Payette County are diabetic



Life expectancy in Payette County is 76.6 years



Payette County ranks 40 out of 43 ranked counties in Idaho

Health Factors

PAYETTE COUNTY

Health Factors represent those things we can modify to improve the length and quality of life for residents.



of adults in Payette County smoke tobacco



of adults in Payette County are considered obese



of children in Payette County are eligible for free or reduced lunch



of Payette County residents have access to broadband internet



15% of Payette County residents are uninsured



Health Investment in PAYETTE COUNTY

04222021

July 2019 - June 2020

Clinic Services



452
immunizations
administered

132
fluoride varnishes applied
43
dental sealants applied

89
Parents as Teachers
home visits

260
WIC participants
\$3,733,384.60
spent in
WIC vouchers*

Environmental Health

70
septic permits

8
accessory use
permits issued



4
signed land
development plats

97
restaurant inspections
11
child care inspections

Community Health



72
Fit and Fall Proof™
participants

Payette County
Community Health
Action Team (CHAT)
identified its mission
statement and health
priority areas.
PCHAT is focused on
behavioral health access,
youth substance use,
food access and
transportation.

Communicable Diseases



193
reportable diseases reported

WASHINGTON COUNTY

Healthier Together FY20

Health Outcomes

WASHINGTON COUNTY

Health outcomes are changes in health that result from specific health care investments or interventions.



of Washington County residents report poor or fair health



of adults in Washington County are diabetic



Life expectancy in Washington County is 78.7 years



Washington County ranks 22 out of 43 ranked counties in Idaho

Health Factors

WASHINGTON COUNTY

Health Factors represent those things we can modify to improve the length and quality of life for residents.



of adults in Washington County smoke tobacco



of adults in Washington County are considered obese



of children in Washington County are eligible for free or reduced lunch



of Washington County residents have access to broadband internet



18% of Washington County residents are uninsured



Health Investment in WASHINGTON COUNTY

04222021

July 2019 - June 2020

Clinic Services



487

immunizations
administered



13

fluoride varnishes
applied

260

WIC participants



Environmental Health



21

septic permits



2

signed land
development plats



54

restaurant inspections

5

child care inspections



4

pool inspections

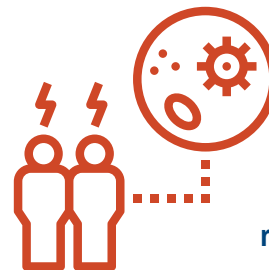
Community Health



68

Fit and Fall Proof™
participants

Communicable Diseases



57

reportable diseases reported

FTE #	Position Title	Role & Responsibilities	Funding Source	Transition plan, if applicable
1	Program Manager	Oversee daily operations and supervise COVID-19 program.	ELC Cares COVID-19 subgrant.	Eliminate position.
1	Sr. Research Analyst	Provide data analytics related to COVID-19.	ELC Cares COVID-19 subgrant.	Eliminate position.
0.56	Public Information Officer	Provide marketing and communications for COVID-19.	ELC Cares COVID-19 subgrant.	Absorb time in other Agency programs; district dollars.
0.2	Division Administrator	Provide supervision and oversight of COVID-19 program manager.	ELC Cares COVID-19 subgrant.	Absorb time in other division programs.
1	HR Associate	Provide HR support to COVID-19 program.	ELC Cares COVID-19 subgrant.	Eliminate position.
1	Customer Svc Rep 2	Oversee COVID-19 call center.	COVID-19 Immunizations subgrant.	Absorb call center work into customer service call center; eliminate position.
1	Lab Tech	Provides testing & customer service representative duties.	COVID-19 Immunizations subgrant.	Eliminate position.
2	Epidemiologist	Oversee COVID-19 investigations team.	ELC Cares COVID-19 subgrant.	Eliminate position.
1	Health Edu Spec	Conduct COVID-19 investigations.	ELC Cares COVID-19 subgrant.	Eliminate position.
1	Health Edu Spec	Conduct COVID-19 investigations.	ELC Cares COVID-19 subgrant.	Eliminate position.
1	Health Edu Spec	Conduct COVID-19 investigations.	ELC Cares COVID-19 subgrant.	Eliminate position.
1	Health Edu Spec	Conducts COVID-19 vaccine operations.	COVID-19 Immunizations subgrant.	Eliminate position.
1	Health Edu Spec	Conduct COVID-19 investigations.	ELC Cares COVID-19 subgrant.	Eliminate position.
1	Health Edu Spec	Conduct COVID-19 investigations.	ELC Cares COVID-19 subgrant.	Eliminate position.

STATE OF IDAHO
Department of Health and Welfare Contract

CONTRACT NO. BC031400

CONTRACTOR'S FEDERAL I.D. NO. 826000952BU

CONTRACT NAME: HEALTH DISTRICT III SOUTHWEST

CFDA NUMBER AND TITLE: 0.000

This Contract is entered into by the State of Idaho, Department of Health and Welfare, hereinafter referred to as the **DEPARTMENT**, and **HEALTH DISTRICT III SOUTHWEST**, hereinafter referred to as the **CONTRACTOR**. This contract is anticipated to be effective as of **09/15/2019** and will expire on **09/14/2023**. As outlined in Paragraph II of the Contract Terms and Conditions, this Contract will not be effective until signed by all parties.

WITNESSETH: The **DEPARTMENT** enters into this Contract pursuant to authority granted to it in Title 56, Chapter 10, Idaho Code. The **CONTRACTOR** agrees to undertake performance of this Contract under the terms and conditions set forth herein.

The Contractor agrees to provide, and the Department agrees to accept the services detailed in the Scope of Work and generally described as follows:

Administrative services and support of the Regional Behavioral Health Board.

The following Attachments are hereby incorporated and made a part of this Agreement:

General Terms and Conditions
Scope of Work
Performance Metrics
Cost/Billing Procedure
Reports

TOTAL CONTRACT AMOUNT: \$200,000.00

CONTRACT MONITOR: Mindy Oldenkamp

CONTRACT MANAGER: Rosie Andueza

General Terms and Conditions

- I. DEFINITIONS. As used in the Contract, the following terms shall have the meanings set forth below:
 - A. Contract shall mean the Contract Cover Sheet, these General Terms and Conditions, and all Attachments identified on the Contract Cover Sheet. The Contract shall also include any negotiated and executed amendment to the Contract.
 - B. Contract Manager shall mean that person appointed by the Department to administer the Contract on behalf of the Department. "Contract Manager" includes, except as otherwise provided in the Contract, an authorized representative of the Contract Manager acting within the scope of his or her authority. The Department may change the designated Contract Manager from time to time by providing notice to the Contractor as provided in the Contract.
 - C. Contractor shall mean that individual, partnership, corporation, or other entity who executes the Contract or performs services under the Contract. The Contractor shall include any subcontractor retained by the Contractor as permitted under the terms of the Contract.
 - D. Department shall mean the State of Idaho, Department of Health and Welfare, its divisions, sections, offices, units, or other subdivisions, and its officers, employees, and agents.
- II. CONTRACT EFFECTIVENESS. It is understood that this Contract or any Amendment is effective when it is signed by all parties, or at a later date if specified in the Contract or Amendment. The Contractor shall not render services to the Department until the Contract or Amendment has become effective. The Department will not pay for any services rendered prior to the effective date of the Contract or Amendment.
- III. RENEWAL. The Department reserves the right to extend this contract for additional periods, not anticipated to exceed a total of four (4) years, provided the Contractor has demonstrated satisfactory performance in the previous year. Any extension or amendment of this contract shall be in writing, signed by both parties.
- IV. INDEPENDENT CONTRACTOR STATUS.
 - A. Status The Contractor's status under the Contract shall be that of an independent contractor and not that of an agent or employee of the Department. The Contractor shall be responsible for paying all employment-related taxes and benefits, such as federal and state income tax withholding, social security contributions, worker's compensation and unemployment insurance premiums, health and life insurance premiums, pension contributions and similar items.
- V. SUBCONTRACTING. Unless otherwise allowed by the State in the Contract, the Contractor shall not, without written approval from the State, enter into any subcontract relating to the performance of the Contract or any part thereof. Approval by the State of the Contractor's request to subcontract or acceptance of or payment for subcontracted work by the State shall not in any way relieve the Contractor of any responsibility under the Contract. The Contractor shall be and remain liable for all damages to the State caused by negligent performance or non-performance of work under the Contract by the Contractor's subcontractor. Subcontractor(s) must maintain the same types and levels of insurance as that required of the Contractor under the Contract unless the Contractor

provides proof to the State's satisfaction that the subcontractor(s) are fully covered under the Contractor's insurance, or, except as otherwise authorized by the State.

VI. ASSIGNMENT. Unless otherwise allowed by the State in the Contract, the Contractor shall not, without written approval from the State, enter into any subcontract relating to the performance of the Contract or any part thereof. Approval by the State of the Contractor's request to subcontract or acceptance of or payment for subcontracted work by the State shall not in any way relieve the Contractor of any responsibility under the Contract. The Contractor shall be and remain liable for all damages to the State caused by negligent performance or non-performance of work under the Contract by the Contractor's subcontractor. Subcontractor(s) must maintain the same types and levels of insurance as that required of the Contractor under the Contract unless the Contractor provides proof to the State's satisfaction that the subcontractor(s) are fully covered under the Contractor's insurance, or, except as otherwise authorized by the State.

A. Obligations Obligations. The Contractor shall not assign this Contract, or its rights, obligations, or any other interest arising from the Contract, or delegate any of its performance obligations, without the express written consent of the Administrator of the Division of Purchasing and the Idaho Board of Examiners. Transfer without such approval shall cause the annulment of the Contract, at the option of the State. All rights of action, however, for any breach of the Contract are reserved to the State (Idaho Code Section 67-9230).

B. Right to Payment Right to Payment. Notwithstanding the foregoing, and to the extent required by applicable law (including Idaho Code Section 28-9-406), the Contractor may assign its right to payment on an account provided that the State shall have no obligation to make payment to an assignee until thirty (30) days after the Contractor (not the assignee) has provided the responsible State procurement officer with (a) proof of the assignment, (b) the identity of the specific State Contract to which the assignment applies, and (c) the name of the assignee and the exact address to which assigned payments should be made. The State may treat violation of this provision as an event of default.

VII. RECORDS AND DATA.

A. Records Maintenance The Contractor shall maintain all records and documents relevant to the Contract for three (3) years from the date of final payment to the Contractor. If an audit, litigation or other action involving records is initiated before the three (3) year period has expired, the Contractor shall preserve and secure records until all issues arising out of such actions are resolved, or until an additional three (3) year period has passed, whichever is later. If the Contract is terminated for convenience, for cause, or by bankruptcy all records and documents related to the Contract in the Contractor's possession shall at the election of the Department, be immediately delivered to the Contract Monitor or Department designee.

B. Records Review All records and documents relevant to the Contract, shall be subject to inspection, review or audit, and copying by the Department and other personnel duly authorized by the Department, and by federal inspectors or auditors. The Contractor shall make all records relevant to this Contract available to such parties at all reasonable times, at either the Contractor's principal place of business or upon premises designated by the Department.

VIII. CONFIDENTIALITY. The Contractor shall comply with all applicable state and federal laws, rules, and regulations concerning confidentiality. The Department will furnish the Contractor with copies of applicable statutes, rules, and regulations upon receipt of a written request from the Contractor. Pursuant to the Contract, the Contractor may collect, or the State may disclose to the Contractor,

financial, personnel, or other information that the State regards as proprietary or confidential ("Confidential Information"). Such Confidential Information shall belong solely to the State. The Contractor shall use such Confidential Information only in the performance of its services under the Contract and shall not disclose Confidential Information or any advice given by it to the State to any third party, except with the State's prior written consent or under a valid order of a court or governmental agency of competent jurisdiction and then only upon timely notice to the State. Confidential Information shall be returned to the State upon termination or expiration of the Contract. Confidential Information shall not include data or information that:

- A. Possession of the Contractor Possession of the Contractor Is or was in the possession of the Contractor before being furnished by the State, provided that such information or other data is not known by the Contractor to be subject to another confidentiality agreement with or other obligation of secrecy to the State;
- B. Available to the Public Available to the Public Becomes generally available to the public other than as a result of disclosure by the Contractor; or
- C. Available to the Contractor Available to the Contractor Becomes available to the Contractor on a non-confidential basis from a source other than the State, provided that such source is not known by the Contractor to be subject to a confidentiality agreement with or other obligation of secrecy to the State.

IX. PUBLIC RECORDS.

- A. Open to Public Open to Public Pursuant to Idaho Code Section 74-101. et seq., information or documents received by the State will be open to public inspection and copying unless the material is exempt from disclosure under applicable law. The person or entity submitting the material must clearly designate specific information within the document as "exempt," if claiming any exemption and indicate the basis for such exemption (e.g. Trade Secret). The State will not accept the marking of an entire document as exempt; or a legend or statement on one page that all, or substantially all, of the document is exempt from disclosure.
 - B. Failure to Designate Failure to Designate The Contractor shall indemnify and defend the State against all liability, claims, damages, losses, expenses, actions, attorney fees, and suits whatsoever for honoring such a designation or for the Contractor's failure to designate specific information within the document as exempt. The Contractor's failure to designate as exempt any document or portion of a document that is released by the State shall constitute a complete waiver of any and all claims for damages caused by and such release. If the State receives a request for materials claimed exempt by the Contractor, the Contractor shall provide the legal defense for such claim.
- X. AUDIT EXCEPTIONS. If a federal or state audit indicates that payments made to the Contractor for goods or services that do not comply with the terms of the Contract or applicable federal or state laws, rules or regulations, the Contractor shall refund any compensation paid to the Contractor arising from such noncompliance.
- XI. COMPLIANCE WITH CERTAIN LAWS, LICENSING, AND CERTIFICATIONS. The Contractor shall comply with ALL requirements of federal, state, and local laws and regulations applicable to the Contractor pursuant to the Contract. For the duration of the Contract, the Contractor shall maintain in effect and have in its possession all licenses and certifications required by federal, state, and local

laws and rules, including but not limited to:

- A. Nondiscrimination The Contractor shall provide all services funded through or affected by the Contract without discrimination on the basis of race, color, national origin, religion, sex, age, and physical or mental impairment, and shall comply with all relevant sections of the following: Title VI of the Civil Rights Act of 1964; Section 504 of the Rehabilitation Act of 1973; The Age Discrimination Act of 1975; and, The Americans with Disabilities Act of 1990. The Contractor shall comply with pertinent amendments to such laws made during the term of the Contract and with all federal and state rules and regulations implementing such laws.
- B. HIPAA The Contractor acknowledges that it may have an obligation, independent of this contract, to comply with the Health Insurance Portability and Accountability Act (HIPAA), Sections 262 and 264 of Public Law 104-191, 42 USC Section 1320d, and federal regulations at 45 CFR Parts 160, 162 and 164. If applicable, the Contractor shall comply with all amendments to the law and federal regulations made during the term of the Contract.
- C. Lobbying
1. The Contractor certifies that none of the compensation under the Contract has been paid or will be paid by or on behalf of the Contractor to any person for influencing or attempting to influence an officer or employee of any governmental agency, a member, officer or employee of Congress or the Idaho Legislature in connection with the awarding, continuation, renewal, amendment, or modification of any contract, grant, loan, or cooperative agreement.
 2. If any funds, other than funds provided by the Contract, have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any governmental agency, a member, officer or employee of Congress or the State Legislature in connection with the Contract, the Contractor shall complete and submit Standard Form LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions, and submit a copy of such form to the Department.
 3. The Contractor shall require that the language of this certification be included in any subcontract, at all tiers, (including grants, subgrants, loans, and cooperative agreements) entered into as a result of the Contract, and that all sub-recipients shall certify and disclose as provided herein.
 4. The Contractor acknowledges that a false certification may be cause for rejection or termination of the Contract, subject the Contractor to a civil penalty, under 31 U.S.C. Section 1352, of not less than \$10,000.00 and not more than \$100,000.00 for each such false statement, and that the Contractor's execution of the Contract is a material representation of fact upon which the Department relied in entering the Contract.
- D. Qualification The Contractor certifies to the best of its knowledge and belief that it and its principals:
1. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from performing the terms of the Contract by a government entity (federal, state or local);

2. Have not, within a three (3) year period preceding the Contract, been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
 3. Are not presently indicted for or otherwise criminally or civilly charged by a government entity (federal, state or local) with commission of any of the offenses enumerated in paragraph 2 of this certification; and
 4. Have not within a three (3) year period preceding the Contract had one or more public transactions (federal, state, or local) terminated for cause or default.
 5. The Contractor acknowledges that a false statement of this certification may be cause for rejection or termination of the Contract and subject the Contractor, under 18 U.S.C. Section 1001, to a fine of up to \$10,000.00 or imprisonment for up to five (5) years, or both.
- E. Illegal Aliens The Contractor warrants that the contract is subject to Executive Order 2009-10 (http://gov.idaho.gov/mediacenter/execorders/eo09/eo_2009_10.html); it does not knowingly hire or engage any illegal aliens or persons not authorized to work in the United States; it takes steps to verify that it does not hire or engage any illegal aliens or persons not authorized to work in the United States; and that any misrepresentation in this regard or any employment of persons not authorized to work in the United States constitutes a material breach and shall be cause for the imposition of monetary penalties up to five percent (5%) of the contract price, per violation, and or termination of its contract.
- F. Single Audit Act The Contractor acknowledges that it may have an obligation; independent of this contract, to comply with the terms of the "Single Audit Act" of 1984. Funds provided under the Contract may be used to pay for compliance with this act in proportion to other funding sources available to the Contractor for the services provided pursuant to the Contract.
- G. Local Contribution To Funding If funding for the Contract is tied to a local contribution or match: (1) The Contractor certifies that none of the local contribution or match funds are federal funds, are derived from or are in lieu of federal funds, and none of said funds have been used, or have been substituted for funds used, to earn other federal funds. (2) The Contractor further certifies that any costs incurred by the Contractor prior to the Contract will not be allowable to or included as a cost of any other state or federally financed program in either the current period or any prior period.

XII. CONFLICT OF INTEREST.

- A. Public Official No official or employee of the State of Idaho or the United States government who exercises any functions or responsibilities in the review or approval of the undertaking or carrying out of the Contract shall, prior to the termination of the Contract, voluntarily acquire any personal interest, direct or indirect, in the Contract.
- B. Contractor The Contractor and its agents shall have no present or future interest, direct or

indirect, that would conflict in any manner or degree with the performance of the services provided pursuant to this Contract.

XIII. REMEDIES.

- A. Remedial Action If any of the Contractor's responsibilities do not conform to Contract requirements, the Department shall consult with the Contractor and may at its sole discretion require any of the following remedial actions, taking into account the nature of the deficiency: (1) require the Contractor to take corrective action to ensure that performance conforms to Contract requirements; (2) reduce payment to reflect the reduced value of services received; (3) require the Contractor to subcontract all or part of the service at no additional cost to the Department; or (4) terminate the Contract.
- B. Termination for Convenience The Department may cancel the Contract at any time, without cause, upon thirty (30) calendar days written notice to the Contractor specifying the date of termination. The Contractor must obtain the approval of the Department to terminate the Contract for convenience.
- C. Termination for Cause Either party may terminate the Contract (and/or any order issued pursuant to the Contract) when either party has been provided written notice of default or noncompliance and has failed to cure the default or noncompliance within a reasonable time, not to exceed thirty (30) calendar days. If the Contract is terminated for default or noncompliance by the Department, the Contractor shall be responsible for any costs resulting from the Department's award of a new contract and any damages incurred by the Department. The Department, upon termination for default or noncompliance, reserves the right to take any legal action it may deem necessary including, without limitation, offset of damages against payment due.
- D. Effect of Termination Upon termination by either party, the Contractor shall: (a) promptly discontinue all work, unless the termination notice directs otherwise; (b) promptly return to the Department any property provided by the Department pursuant to the Contract; and, (c) deliver or otherwise make available to the Department all data, reports, estimates, summaries and such other information and materials as may have been accumulated by the Contractor in performing the Contract, whether completed or in process.
- E. Survival of Terms Any termination, cancellation, or expiration of the Contract notwithstanding, provisions which are intended to survive and continue shall survive and continue, including, but not limited to, the provisions of Sections IV (Independent Contractor Status), VII (Records and Data), X (Audit Exceptions), and XI (Compliance with Certain Laws, Licensing and Certifications).

XIV. MISCELLANEOUS.

- A. Disposition of Property At the termination of the Contract, the Contractor shall comply with relevant federal and state laws, rules and regulations and, as applicable, 2 CFR §§ 200.310-316 concerning the disposition of property purchased wholly or in part with funds provided under the Contract.
- B. Governing Law The Contract shall be governed by and construed under the laws of the State of Idaho.

- C. Officials Not Personally Liable In no event shall any official, office, employee or agent of the State of Idaho or of the Department be liable or responsible for any representation, statement, covenant, warranty or obligation contained in, or made in connection with, the Contract, express or implied.
- D. Time of Performance Time is of the essence with respect to the obligations to be performed under the Contract; therefore, the parties shall strictly comply with all times for performance.
- E. Notices Any notice given in connection with the Contract shall be given in writing and shall be delivered electronically or by hard copy to the other party.
1. Notice to the Department shall be as designated by the Department.
 2. Notice to the Contractor shall be as designated by the Contractor.
- F. Attorney Fees In the event of a legal proceeding of any kind instituted under the Contract or instituted to obtain performance or to remedy a default under the Contract, the prevailing party shall be awarded reasonable fees and costs.
- G. Appropriation by Legislature Required The State reserves the right to terminate this Agreement in whole or in part (or any order placed under it) if, in its sole judgment, the Legislature of the State of Idaho or the federal government if applicable, fails, neglects, or refuses to appropriate sufficient funds as may be required for the State to continue such payments, or rescinds or requires any return or "give-back" of funds required for the State to continue payments, or if the Executive Branch mandates any cuts or holdbacks in spending. All affected future rights and liabilities of the parties hereto shall thereupon cease within ten (10) calendar days after notice to the Contractor.
- H. Nonwaiver of Breach The failure of the Department to require strict performance of any term or condition of the Contract, or to exercise any option herein, in any one or all instances shall not be construed to be a waiver or relinquishment of any such term or condition. The same shall be and remain in full force and effect unless there is a prior written waiver by the Department.
- I. Complete Statement of Terms The Contract constitutes the entire agreement between the parties and shall supersede all previous proposals, negotiations, representations commitments, and all other communications between the parties. The Contract may not be released, discharged, changed, extended, modified, subcontracted or assigned in whole or in part, and no claim for additional services not specifically provided herein will be allowed by the Department, except to the extent provided by an instrument in writing signed by a duly authorized representative of the Department and the Contractor.
- J. Priority of Contract Documents The Contract consists of and precedence is established by the order of the documents as listed on the Contract Cover Sheet.
- K. Severability If any term or provision of the Contract is held by the court to be illegal or unenforceable, the validity of the remaining terms and provisions shall not be affected, and the

rights and obligations of the parties shall be construed and enforced as if the Contract did not contain the particular term or provision held to be invalid.

- L. Headings The captions and headings contained herein are for convenience and reference and are not intended to define or limit the scope of any provision of the Contract.

IN WITNESS WHEREOF, the parties have executed this agreement.

CONTRACTOR:

HEALTH DISTRICT III SOUTHWEST

Name of Organization

Nikole Zogg

Name of Signature Authority (printed)

Director

Title



Signature

08/27/19

Date

Mailing Address:

13307 Miami Lane

Caldwell, Idaho 83607

Email Address

208.455.5300

Telephone No.

Contract Number: BC031400

STATE OF IDAHO:

Department of Health and Welfare

Name of Organization

Ross Edmunds, Division of Behavioral Health

Name of Signature Authority (printed)

Division Administrator

Title



Signature

9/11/2019

Date

Mailing Address:

P.O. Box 83720

Boise, ID 83720-0036

Telephone No.

Scope of Work

I. General Requirements

A. The Contractor shall:

1. Comply with the rules, regulations and policies pertaining to the Regional Behavioral Health Board (RBHB) as outlined in Idaho Statutes 39-3132, 39-3133, 39-3134, and 39-3135;
2. Support the goals and objectives of the Department in the establishment of readiness and maintenance of the RBHB under Idaho Statute 39-3132;
3. Enter into a Memorandum of Agreement (MOA) with the RBHB and the Department that defines the roles and responsibilities of each party that may or may not be covered in this Scope of Work (SOW); and
4. Not be responsible for providing services outlined in the MOA that are not defined in the SOW.

II. Regional Board Direct Support Services

A. The Contractor shall be responsible for providing support for the mission, vision and work of the RBHB as defined under Idaho Statute 39-3132.

B. The Contractor shall ensure that personnel provide services to the RBHB which include, but are not limited to the following duties:

1. Administrative support to the RBHB, the Executive Committee, sub-committees and workgroups;
2. Documenting and maintaining meeting minutes;
3. Supporting the RBHB in their development of community resources and services in all counties of region/district related to behavioral health services (substance use disorder, mental health and co-occurring disorders);
4. Assisting with the development of a RBHB budget;
5. Maintaining a RBHB website;
6. Preparing reports as necessary;
7. Providing support to grant writing efforts of RBHB; and
8. Supporting the RBHB in its efforts to educate and train the region/district in all counties on the mission and vision of the RBHB.
9. Providing personnel support as described under Idaho Statute Chapter 53 Title 67.

III. Regional Board Operational Services

A. The Contractor shall provide a fiscal support structure to the RBHB for its operational needs within the defined annual budget per this SOW and as developed by the RBHB with the approval of the Contractor. Defined operational needs include, but are not limited to:

1. Travel reimbursement for RBHB members;

2. Travel reimbursement for personnel supporting the RBHB;
 3. Educational expenses for RBHB members and support staff;
 4. Media, advertising and promotional activities;
 5. Facilitation, consultation, and training; and
 6. Direct relief and support services as defined under Powers and Duties in Idaho Statute 39-3135.
- B. The Contractor shall provide access to legal support to the RBHB within the scope of their roles and responsibilities under Idaho Statute 39-3135 understanding that the RBHB functions as advisory to the Contractor.

IV. Other Support Services

A. The Contractor shall:

1. Manage funding provided by the Department for agreed upon behavioral health services which include RBHB support and any additional services provided under the fiscal control practices utilized by the Contractor;
2. Provide grant writing support to the RBHB within its defined powers and duties under the Public Health District rules and policies; and
3. Manage grants and grant funding as obtained by the RBHB. Indirect cost percentages shall be defined by the Contractor.

V. Reports and Records

A. The Contractor shall:

1. Participate in the development of an Annual Gaps and Needs Analysis as required by the State Behavioral Health Planning Council and provide administrative support in creating the final product for submission to the Behavioral Health Planning Council;
2. Provide the Department's contract monitor with a copy of the annual operational budget and expenditures, specific to the RBHB; and
3. Maintain and submit the RBHB meeting minutes each month (electronic or hard copy). The Activity Summary Report shall be substituted for those months when the RBHB does not meet and therefore meeting minutes are not available.

Performance Metrics

Regional Board Direct Services.

(SOW I and II) The Contractor shall provide personnel support to the RBHB for them to meet their responsibilities as defined in Idaho Statutes 39-3132, 39-3133, 39-3134, and 39-3135.

Required Level of Expectation:

100%

Method of Monitoring:

The Contract Monitor will meet with the Contractor quarterly with the RBHB Executive Committee being involved in these meetings bi-annually to ensure compliance. Review of the RBHB monthly meeting minutes/monthly Activity Summary Report.

Strategy for Correcting Non-Compliance:

The Department will notify the Contractor if an issue is identified and both parties will work together to ensure issue resolution. The Contractor may be required to submit a written response to a performance monitoring report that includes how they will resolve the issue and dates for completion.

Regional Board Operational Services.

(SOW I and III) The Contractor shall provide fiscal support to the RBHB to fulfill their responsibilities as defined in Idaho Statutes 39-3132, 39-3133, 39-3134, and 39-3135.

Required Level of Expectation:

100%

Method of Monitoring:

The Contract Monitor will meet with the Contractor quarterly with the RBHB Executive Committee being involved in these meetings bi-annually to ensure compliance. Review of the RBHB monthly meeting minutes/monthly Activity Summary Report.

Strategy for Correcting Non-Compliance:

The Department will notify the Contractor if an issue is identified and both parties will work together to ensure issue resolution. The Contractor may be required to submit a written response to a performance monitoring report that includes how they will resolve the issue and dates for completion.

Other Support Services.

(SOW II. B. 9.) The Contractor shall provide personnel support as needed by the RBHB as it moves to develop those services as described under Idaho Statute Chapter 53 Title 67.

Required Level of Expectation:

100%

Method of Monitoring:

The Contract Monitor will meet with the Contractor quarterly with the RBHB Executive Committee being involved in these meetings bi-annually to ensure compliance. Review of the RBHB monthly meeting minutes/monthly Activity Summary Report.

Strategy for Correcting Non-Compliance:

The Department will notify the Contractor if an issue is identified and both parties will work together to ensure issue resolution. The Contractor may be required to submit a written response to a performance monitoring report that includes how they will resolve the issue and dates for completion.

Cost/Billing Procedure

COST:

This is a FIRM FIXED FEE, DEFINITE QUANTITY contract.

The Department will pay and the Contractor shall receive up to a total sum of **TWO HUNDRED THOUSAND DOLLARS AND ZERO CENTS (\$200,000.00)** for services satisfactorily performed and authorized under the contract. No carry over of funds from year to year will be allowed under this contract.

Cost Matrix

Services	Unit	Number of Units	Cost/Unit
Regional Behavioral Health Board Support	Per Month	47	\$4,167.00
Regional Behavioral Health Board Support	Per Month	1	\$4,151.00

BILLING PROCEDURE:

The Contractor shall submit monthly invoices as identified in the cost matrix along with a copy of the RBHB monthly meeting minutes and/or the monthly Activity Summary Report within thirty (30) days after the end of the month in which services were provided.

Invoices shall include the following:

1. Contractor's Name
2. Vendor Identification Number
3. Contract Number
4. Month services were provided
5. Invoice number
6. Date of Invoice
7. Total amount invoiced for the billing period

Invoices shall be submitted to:

Mindy OldenKamp, Project Coordinator
Division of Behavioral Health
Mindy.OldenKamp@dhw.idaho.gov

Final invoices and reports must be submitted to the Department no later than thirty (30) days after the contract expiration date. Final invoices received without the required report(s)/documentation will be returned to the Contractor for their resubmission with the final reports/documentation.

Reports

Report Description:

Activity Summary Report - The report shall identify activities, decisions, and tasks that occur on behalf of the RBHB. It shall be substituted for those months when the RBHB does not meet, and therefore, meeting minutes are not available.

Report Format:

Word or Excel

Report Due Date:

Within thirty (30) calendar days after the month in which services were provided. Last month of each contract year, the report is due no later than August 31st.

Report Description:

Operational Budget and Expenditures Report - The report shall be specific to the RBHB and contain a breakdown of the budget and expenditures specific to the fifty thousand dollars (\$50,000) budget for each contract year.

Report Format:

Word or Excel

Report Due Date:

Within thirty (30) calendar days after the month in which services were provided. Last month of each contract year, the report is due no later than August 31st.

Memorandum of Agreement

Objective

The ultimate goal for the development of a strong, mutual relationship among the Region 3 Behavioral Health Board (R3BHB), the Southwest District Health (SWDH) and the Department of Health and Welfare, Division of Behavioral Health (DBH) is to better serve all of our customers in need of behavioral health services. We clearly understand that each of our client bases, as well as those we mutually serve, will benefit when we share and combine our expertise. As more attention is given to addressing patients in a holistic manner, this effort becomes essential, both because of specific requirements under the Affordable Care Act, and because it is what is best for our customers.

Background

Through this MOA, the R3BHB, the SWDH and the DBH enter into a joint agreement that will support the establishment, maintenance, and the execution of powers and duties under Idaho Statute 39-3132, 39-3135 and 39-3136. This agreement seeks to outline the roles and responsibilities that are required of the R3BHB to demonstrate readiness to accept responsibility for Community Family Support and Recovery Support Services as defined in 39-3135. The DBH seeks to support the R3BHB's readiness, duties and powers by defining its role and responsibilities under this agreement in the promotion of better outcomes for Behavioral Health. The SWDH seeks to promote a Healthier Southwest Idaho and endeavors to partner with the R3BHB to promote the health and wellness of those who live, work and play in Southwest Idaho. As stated in section XV, subsection B of the contract between the State of Idaho Department of Health and Welfare and the Southwest District Health, "the Department of the Contractor may cancel the contract at any time, with or without cause, upon thirty (30) calendar days' written notice to the other party specifying the date of termination."

Mission

The mission of the R3BHB is to advocate, educate, and ensure accessible care for those in need of Mental Health and Substance Use Services, by developing and sustaining a network that promotes prevention and ready to access to a full range of services.

Vision

The vision of the R3BHB envisions a healthy community through a collaborate integrated network that promotes and sustains hope and recovery for all.

Roles and Responsibilities

1. SWDH Responsibilities:

- A. SWDH will comply with the rules, regulations and policies as outlined by the DBH and rules, regulations and policies pertaining to R3BHB as outlined in Idaho Statutes 39-3132, 39-3133, 39-3134, and 39-3135.
- B. SWDH shall ensure that procedural safeguards are followed in confidentiality requirements according to IDAPA 16.05.01, Use and Disclosure of Department Records.
- C. SWDH agrees to support the goals and objectives of the DBH in the establishment of readiness and maintenance of R3BHBs under 39-3132.
- D. SWDH will manage personnel, operational and support tasks as stated in the Scope of Work, under the DBH contract.
- E. SWDH will maintain a webpage for the R3BHB.
- F. SWDH will not be responsible for services that are not funded or outlined within the Scope of Work under contract with the DBH.
- G. SWDH will participate with the R3BHB in the budget development process.
- H. SWDH will participate with the R3BHB in identifying service gaps and contract opportunities.
- I. SWDH will provide the R3BHB with assistance in the development of the Gaps and Needs Analysis report to the State Behavioral Health Planning Council (SBHPC).
- J. SWDH will collaborate on joint projects or initiatives that fit within the scope of the R3BHB, including but not limited to grant opportunities pursuable by SWDH.
- K. SWDH will provide behavioral health integration expertise and resources from the regional Behavioral Health Board, where available, and/or through the IDHW Division of Behavioral Health, or existing resources in the Western Idaho Community Health Collaborative (WICHC).
- L. SWDH agrees to meet at least bi-annually with the R3BHB and DBH to ensure ongoing alignment and compliance with this MOA.
- M. SWDH will promptly notify R3BHB of any anticipated or received funding that may be relevant or applicable to the mission of the R3BHB.

2. R3BHB Responsibilities:

- A. R3BHB will advise the SBHPC on behavioral health needs for adults and children within region/district.
- B. R3BHB will advise the SBHPC on progress, problems and proposed projects of the regional/district service.
- C. R3BHB will promote improvements in the delivery of behavioral health services and coordinate and exchange information regarding behavioral health services in the region/district.

- D. R3BHB will develop an annual Gaps and Needs Analysis assessment of behavioral health services for the region/district.
- E. R3BHB will assist the SBHPC with planning for service improvements.
- F. R3BHB will report annually to the SBHPC, the DBH and SWDH the progress being made toward building a comprehensive community family support and recovery support system that will include performance and outcome data.
- G. R3BHB will establish and maintain a children's mental health subcommittee.
- H. R3BHB will work actively to build and support community support and recovery support services within the region/district.
- I. R3BHB will follow all Idaho Code requirements for board membership as stated in 39-3134.
- J. R3BHB will coordinate all grant funding requests with SWDH in advance of the proposals being submitted for consideration. Guidelines for grant funding requests where SWDH will be the fiduciary agent are as follows:
 - i. SWDH must be notified at least 30 days in advance of the grant application deadline
 - ii. All grant writing responsibilities placed on SWDH will be paid by R3BHB
 - iii. SWDH's Finance Manager must approve the budget in the grant proposal prior to submission
 - iv. Grants that will require SWDH to hire and retain staff must be approved by the Director in advance of the grant proposal submission
 - v. All grant awards must cover the full cost of the project or program unless the Board of Health approves the use of SWDH funds to support the project or program in advance of the grant proposal submission
- K. R3BHB will meet at least bi-annually with SWDH and DBH to ensure ongoing alignment and compliance with this MOA.
- L. R3BHB will promptly notify SWDH of any anticipated or received funding that may be relevant or applicable to the mission of SWDH.

3. DBH Responsibilities:

- A. DBH will commit to annual funding of \$50,000 for the life of the contract which will be established at 4 year intervals.
- B. DBH will provide federal grant writing support for efforts agreed upon by the R3BHB and the SWDH.
- C. DBH will write and submit those grants that are agreed to by the R3BHB and SWDH that can only be submitted through the DBH (federal grants).

- D. DBH will meet at least bi-annually with the R3BHB and SWDH to ensure ongoing alignment and compliance with this MOA.

IN WITNESS WHEREOF, the parties have executed this agreement.

Southwest District Health

Region 3 Behavioral Health Board

Name of Organization

Name of Organization

NIKOLE ZOGG

Name of Signature Authority (printed)

Maissa Mero, MD

Name of Signature Authority (printed)

Director

Board Chair

Title

Title

Signature

10/2/19

Date

Signature

10/1/19

Date