



Board of Health Meeting
 Tuesday, November 19, 2024, 9:00 a.m.
 13307 Miami Lane, Caldwell, ID 83607

Public comments specific to an agenda item for the November 19, 2024 Board of Health meeting can be submitted [here](#) 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 9:00 a.m. on Monday, November 18, 2024. The meeting will be available through live streaming on [the SWDH You Tube channel](#).

Agenda

A = Board Action Required

G =Guidance

I = Information item

9:00	A	Call the meeting to order	Chairman Kelly Aberasturi
9:01		Pledge of Allegiance	
9:02		Roll call	Chairman Kelly Aberasturi
9:04	A	Call for changes to agenda; vote to approve agenda	Chairman Kelly Aberasturi
9:05		In-person public comment	
9:15	I	Introduction of new employees	Division Administrators
9:17	A	Approval of October 22, 2024 minutes	Chairman Kelly Aberasturi
9:20	I	Audit Update	Troy Cunningham
9:35	I	Canyon County Pre-Prosecution Diversion Program Overview	Vito Kelso
10:00	A	Review and Approval of 2025 Board of Health Meeting Calendar	Nikki Zogg
10:05		Break	
10:20	I	Idaho Association of District Boards of Health (IADBH) Annual Meeting Recap	Board members
10:40	I	IADBH Strategic Plan SWOT Analysis Overview	Nikki Zogg
11:00	A	Policy and Position Statements Review and Approval	Nikki Zogg
11:40	I	Director’s Report	Nikki Zogg
11:45		Executive Session pursuant to Idaho Code 74-206(b), (f)	
11:55	A	Action taken as a Result of Executive Session	
12:00		Adjourn	

NEXT MEETING: Tuesday, December 17, 2024 – 9:30 a.m.
 Public Health Symposium – 9:30 am – 12 pm
 Board of Health Meeting – 12pm – 1pm

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



BOARD OF HEALTH MEETING MINUTES
Tuesday, October 22, 2024

BOARD MEMBERS:

Jennifer Riebe, Commissioner, Payette County – present
Lyndon Haines, Commissioner, Washington County – present
Zach Brooks, Commissioner, Canyon County – present
Kelly Aberasturi, Commissioner, Owyhee County – present
Viki Purdy, Commissioner, Adams County – present
John Tribble, MD, Physician Representative – present
Bill Butticci, Commissioner, Gem County – present

STAFF MEMBERS:

In person: Nikki Zogg, Katrina Williams, Don Lee, Beth Kriete, Rick Stimpson, Troy Cunningham, Dr. Perry Jansen, Anna Briggs

Virtual attendees: Jeff Renn, Monique Evancic, Dean Page

GUESTS: Approximately 30 members of the public attended the meeting in person. Virtual guest presenters and contributors also attended.

CALL THE MEETING TO ORDER

Chairman Kelly Aberasturi called the meeting to order at 9:00 a.m.

PLEDGE OF ALLEGIANCE

Meeting attendees participated in the pledge of allegiance.

ROLL CALL

Chairman Aberasturi – present; Dr. John Tribble – present; Commissioner Purdy – present; Vice Chairman Haines – present; Commissioner Brooks – present; Commissioner Riebe – present; Commissioner Butticci – present.

REQUEST FOR ADDITIONAL AGENDA ITEMS AND APPROVAL OF AGENDA

Chairman Kelly Aberasturi asked for additional agenda items. Board members had no additional agenda items or changes to the agenda.

MOTION: Commissioner Brooks made a motion to approve the agenda as presented. Commissioner Riebe seconded the motion. All in favor; motion passes.

EXECUTIVE SESSION

Pursuant to Idaho Code 74-206(b), Commissioner Butticci made a motion to go into Executive Session at 9:03 a.m. Commissioner Riebe seconded the motion. Roll call taken; all board members in attendance.

At 9:09 a.m., Board members exited Executive Session.

ACTION TAKEN AS A RESULT OF EXECUTIVE SESSION

No action was taken as a result of the Executive Session.

IN-PERSON PUBLIC COMMENT

Members of the public provided public comment.

OPEN DISCUSSION

No items for open discussion.

INTRODUCTION OF NEW EMPLOYEES

Division administrators introduced new employees.

APPROVAL OF MEETING MINUTES – SEPTEMBER 17, 2024

Board members reviewed meeting minutes from the September 17, 2024 Board of Health meeting.

MOTION: Commissioner Riebe made a motion to approve the September 17, 2024 Board of Health meeting minutes as presented. Commissioner Brooks seconded the motion. All in favor; motion passes.

DIRECTORS REPORT

Idaho Association of Public Health District Directors Meeting (IAPHDD)

At the IAPHDD meeting held last month, the district directors heard from Alex Adams, newly appointed Idaho Department of Health and Welfare (IDHW) Director. The group discussed changes that may impact public health districts (PHDs) including citizen review panels (CRPs) and public pool inspections.

Board members briefly discussed ensuring that the scope of work and funding to support these activities are aligned. Nikki shared that from the districts’ perspectives, regarding public pool inspections, it would be ideal to discuss the scope of work and ensure that each of the boards can set their own fees as we have the authority. This would require removing the fee currently established in Idaho Code.

The district directors also met with Director Jess Byrne from the Department of Environmental Quality (DEQ) and discussed the solid waste program and the municipal landfills. Currently, there is no clear direction from DEQ regarding the future role of the districts in these programs.

Lastly, the group discussed waning participation in the annual Idaho Association of District Boards of Health (IADBH) meeting over the last nine years. The person chairing the meeting at District 7 for the Idaho Association of District Boards of Health (IADBH) meeting may bring this subject up at the meeting scheduled for October 22-24, 2024 in Idaho Falls.

Public Health Symposium

The Public Health Symposium this year will be held on Tuesday, December 17, prior to the December Board of Health meeting.

Idaho Association of District Boards of Health Meeting and Proxy Forms

The fall IADBH meeting, hosted by District 7, is scheduled for October 22-24, 2024 in Idaho Falls. The discussion of and voting on resolutions is scheduled at 2:00 p.m. on October 24. Proxy forms will be available for board members unable to attend. Commissioners Brooks, Aberasturi and Purdy are attending and may be designated as proxy.

EXPENDITURE AND REVENUE REPORTING TIMELINE

Nikki asked Board members to consider adjusting the timeline of the presentation of monthly expenditure and revenue reports to help ensure concrete, accurate data are available. For example, August reports would be presented at the October meeting. If there is an imminent or pressing item, Troy will present it to the board.

MOTION: Commissioner Riebe made a motion to adjust the timeline of the presentation of monthly expenditure and revenue reports as requested. Commissioner Butticci seconded the motion. All in favor; none opposed. Motion passes.

SEPTEMBER 2024 EXPENDITURE AND REVENUE REPORT

Troy Cunningham, Financial Manager, presented the September 2024 Monthly Expenditure and Revenue Report. The target at this point in the fiscal year is 25% and we are on budget in both expenditures and revenues.

QUARTERLY CONTRACTS AND REVENUE REPORT STATUS UPDATE

Troy provided an overview of the quarterly contracts and revenue report.

SOCIAL SECURITY ADMINISTRATION 218 PARTICIPATION VOTE NEXT STEPS

Don Lee, SWDH Chief Operating Officer, shared that the result of the recent Social Security Administration Referendum vote was 46 votes counted as Yes and 51 counted as No. This means that all employees at SWDH will no longer participate in social security. Next steps at this point are working with the State Controller’s office (SCO) to develop a 401(a) option in Luma. The anticipated completion date for this project is the end of the first quarter of the calendar year.

FAMILY AND MEDICAL LEAVE/FOSTER CARE BENEFITS

Don Lee asked for Board support for providing two weeks paid parental leave for those staff taking a foster child into their homes. This aligns with what several other private agencies are offering. Currently, the state offers eight weeks paid parental leave. This leave for foster parents is not a benefit SWDH currently offers.

MOTION: Commissioner Butticci made a motion to implement two weeks of paid parental leave for use during a transition for a household to accept a foster child. Commissioner Purdy seconded the motion. All in favor; motion passes.

WIC LEASE AGREEMENT APPROVAL

Beth Kriete, Family and Clinic Services Division Administrator, requested board approval to lease office space at the Idaho Hispanic Community Center to expand the Nampa WIC office. The lease is \$1,500 per month with utilities included. The cost was budgeted for fiscal year 2025.

MOTION: Commissioner Brooks made a motion to approve the Idaho Hispanic Community Center lease at \$1,500 per month. Dr. Tribble seconded the motion. All in favor; motion passes.

COVID-19 VACCINE AVAILABILITY AT SWDH CLINICS

Dr. Jansen presented slides and data regarding safety and efficacy of the COVID-19 vaccine. He emphasized freedom of choice and encouraged board members to safeguard the provider and patient

relationship. He also pointed out that SWDH provides the vaccine at a reduced cost compared to other clinic and pharmacy locations.

Dr. Tribble and guest presenters provided slides regarding significant adverse effects to the COVID-19 vaccine and emphasized a significant drop in lack of trust in health care, public health, and health care in general.

MOTION: Commissioner Brooks made a motion that SWDH no longer provides or administers the COVID vaccine. Commissioner Purdy seconded the motion. Commissioner Brooks, Commissioner Butticci, Commissioner Purdy, and Dr. Tribble voted in support of the motion. Commissioner Aberasturi, Commissioner Haines, and Commissioner Riebe opposed the discontinuation.

There being no further discussion, the meeting adjourned at 12:36 p.m.

Respectfully submitted:

Approved as written:

Nikole Zogg
Secretary to the Board

Kelly Aberasturi
Chairman

Date: November 22, 2024



Canyon County Pre-Prosecution Diversion Program

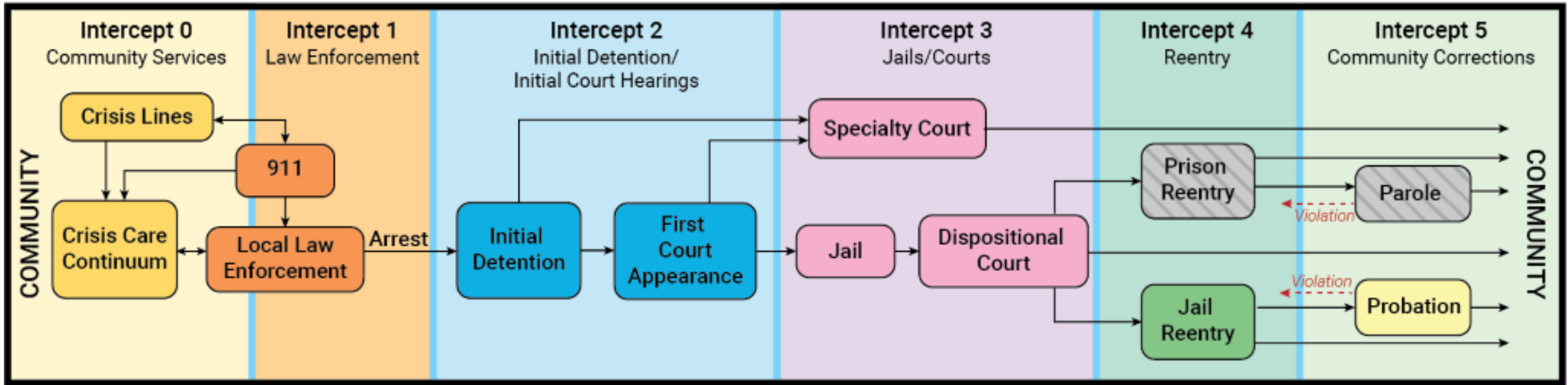
11/19/2024 Board of Health Meeting

Vito Kelso, Pre-Prosecution Diversion Program Manager

Pre-Prosecution Diversion (PPD) Program Creation

- Sequential Intercept Model (SIM) mapping
 - Held in Canyon County in 2022
 - Comprised of partners across the crisis continuum and justice system
 - Workgroup focused on early intervention for those within the Canyon County justice system
 - Resulted in the idea of diversion programs for those with behavioral health concerns

Sequential Intercept Model



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PPD Creation - Continued

- Idaho Behavioral Health Council (IBHC)
 - Prioritized diversion from the justice system
 - Adopted by Governor Little under the Leading Idaho initiative
 - Governor Little's request for funding approved by Idaho Legislature in 2023
 - Applied to Idaho Department of Corrections' fiscal budget to award as grant funds

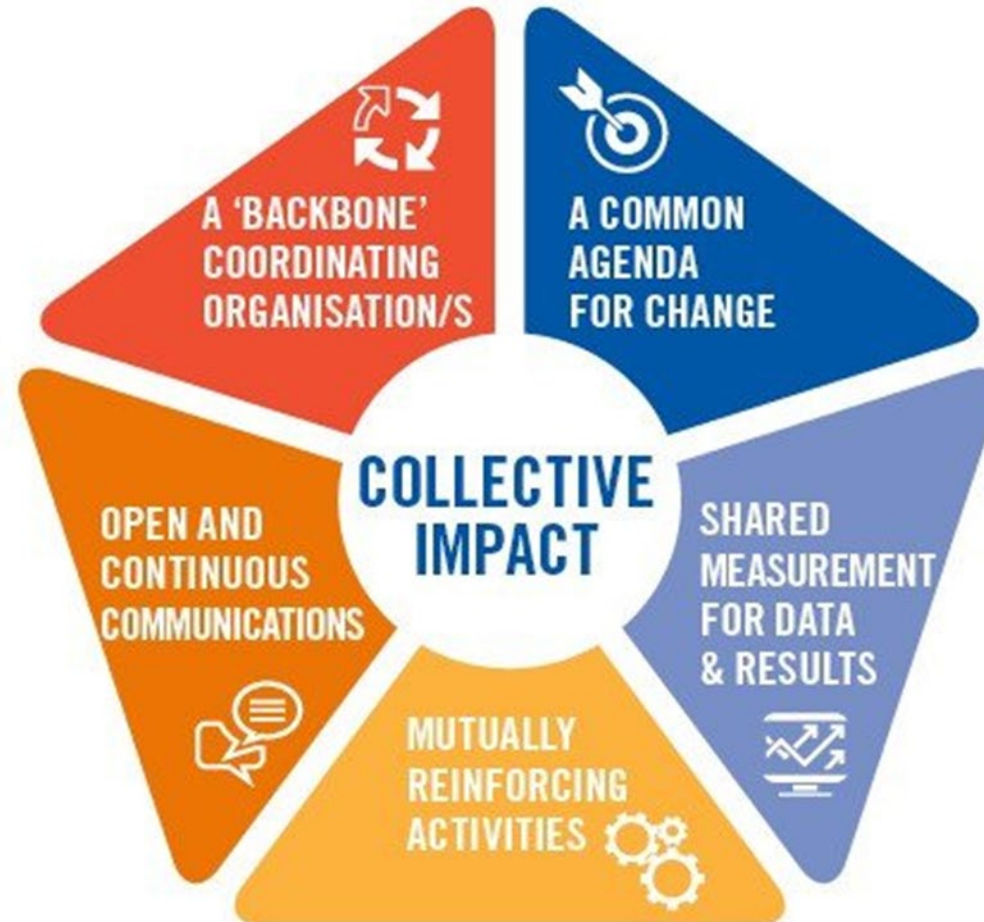
PPD Creation - Continued

- Canyon County Prosecuting Attorney's Office (CCPA) applied for grant fund's
- IBHC recommended CCPA's diversion program
- Canyon County awarded \$1.8M in state grant funds
- Funding over 3 years from July 2023 through June 2026
- Canyon County contracted with SWDH to develop and manage the PPD program

Program Overview

- Provide early intervention
 - Case management
 - Peer support
 - Referral to care and support services
- Reduce duplication
- Filling gaps and needs
- Increasing accountability by utilizing the Collective Impact Model
- Bridge the gap between the justice system and community resources

Collective Impact Model



Program Overview - Continued

- Collaborating with community partners in Canyon County
 - Partners within the crisis continuum
 - Partners within the justice system
- Justice Education and Diversion Initiative (J.E.D.I) Center
 - Co-located facility with behavioral health services
 - Improve accessibility
 - Decrease barriers
 - Provide resources and support

PPD Eligibility

- Adults age 18+
- Behavioral health concern – mental illness and/or substance use disorder
- Entering or reentering into the criminal justice system
 - Have not been justice involved within the last 5 years
- Referrals come from the justice system and identified community partners

Qualifying Offenses

Misdemeanors:

- Aiding in Misdemeanors
- Resisting and Obstructing Officer
- Assault
- Battery
- Criminal Contempt
- Petit Theft
- Destruction, Alteration or Concealment of Evidence
- Willful Concealment of Goods
- False Information to Officers
- Public Nuisance
- Disturbing the Peace
- Malicious Injury to Property

- False Alarms-Complaints-Reports-Penalties-Civil Damages
- Criminal Trespass
- Unlawful Entry
- Driving without Privileges
- Possession of a Controlled Substances
- Paraphernalia with Intent to Use
- Failure to Provide Insurance
- Reckless Driving
- Fleeing or Attempting to Elude a Police Officer
- Pedestrian Under Influence of Alcohol or Drugs

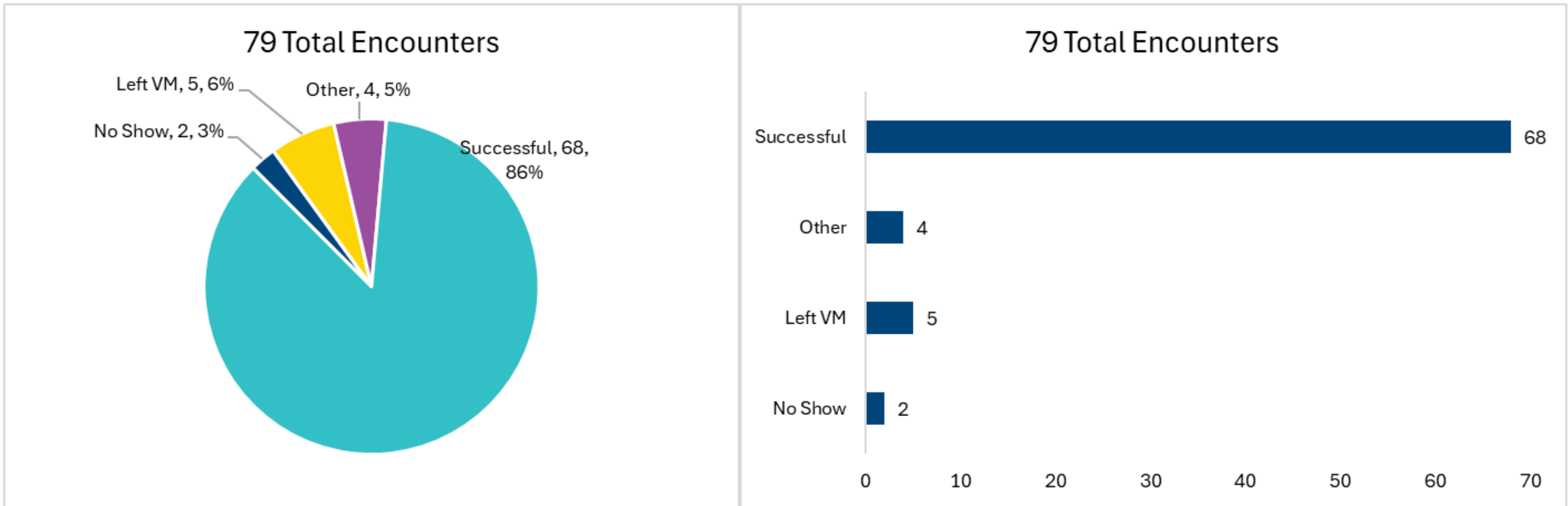
Felonies:

- Assault or Battery Upon Certain Personnel
- Battery Against Health Care Workers
- Burglary
- Theft-Receive Possess Stolen Property
- Grand Theft
- Malicious Injury to Property
- Criminal Trespass
- Possession of a Controlled Substance

PPD Ineligibility

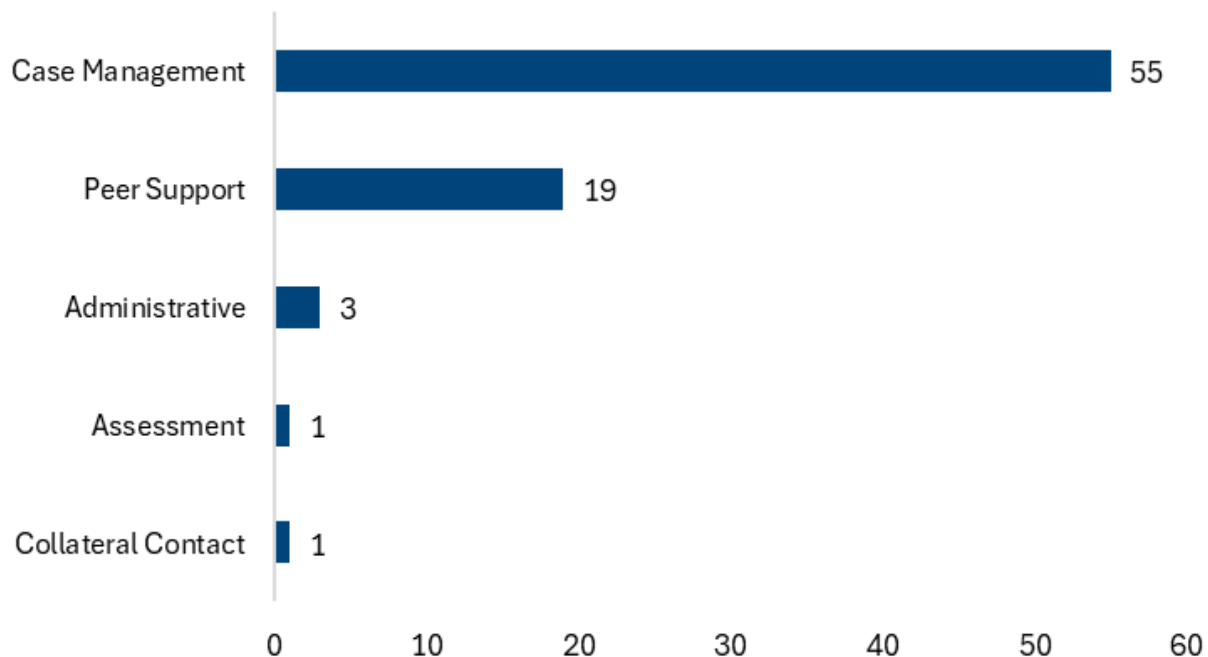
- Currently on court/state supervision
 - Felony/misdemeanor supervision
- Pending out of county charges
- Offenses where a firearm was used in the commission of the crime
- Sex offense
- DUI's
- Violent crimes – domestic violence, stalking, harassment
- Trafficking/delivering controlled substances

PPD Data: Aug 1 – Nov 12, 2024

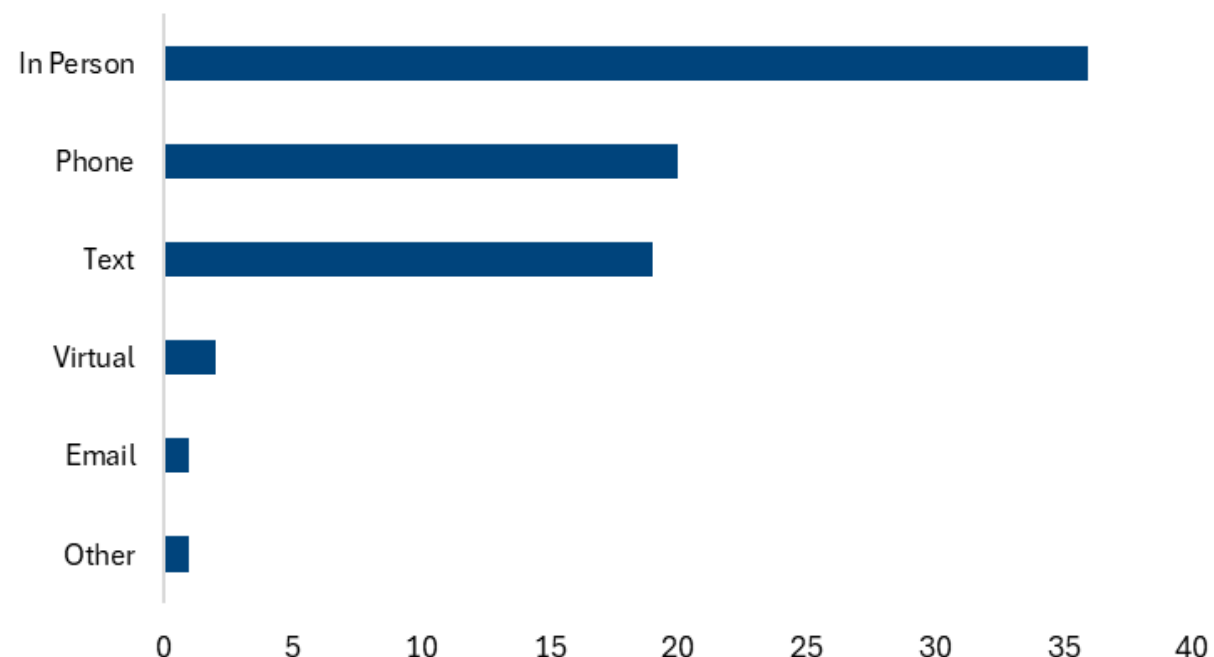


PPD Data: Aug 1 – Nov 12, 2024

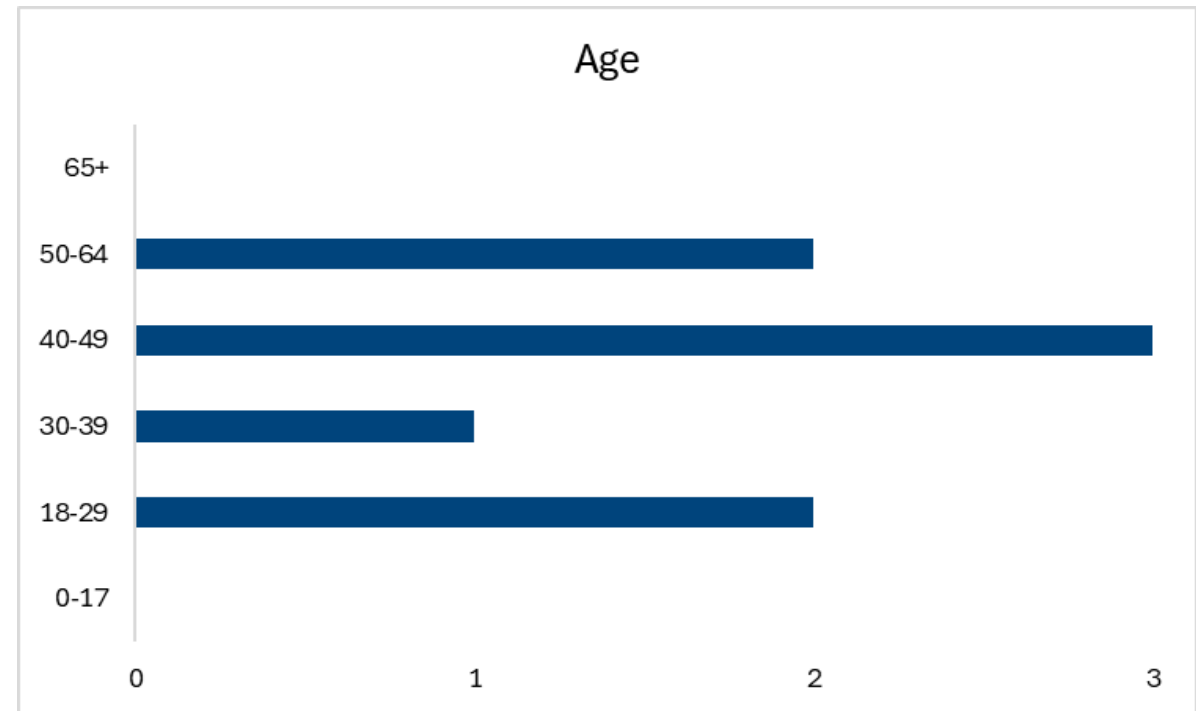
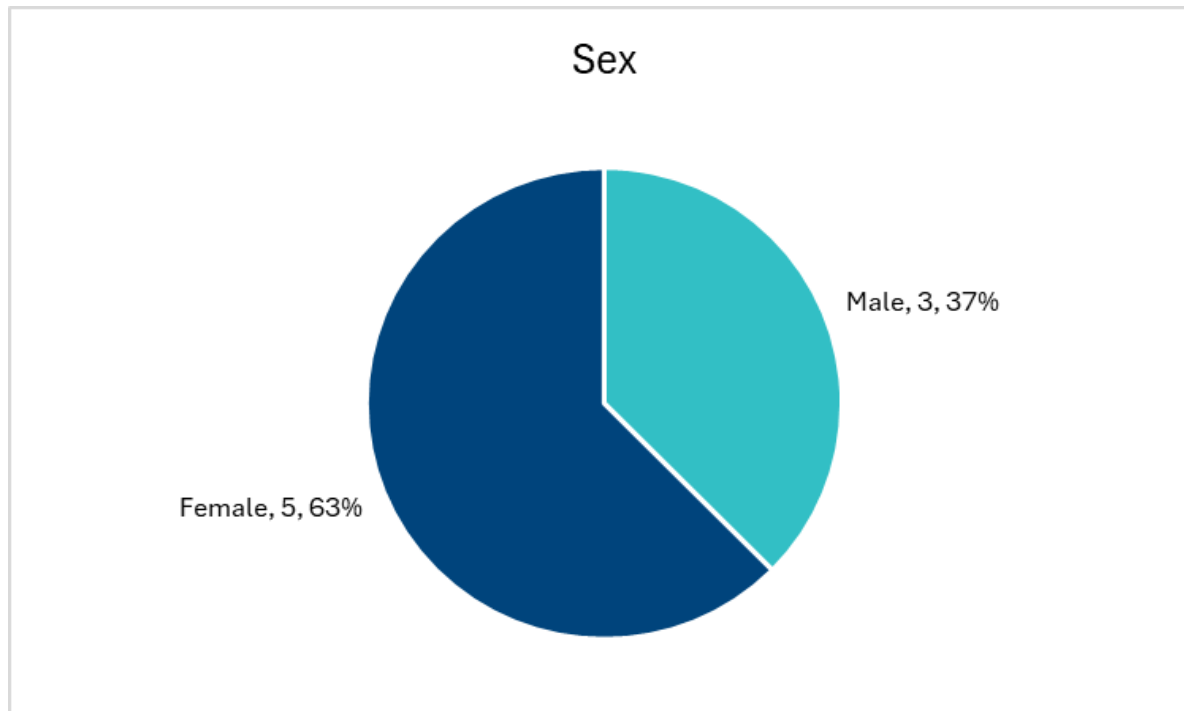
Encounter Type



Encounter Method



PPD Data: Aug 1 – Nov 12, 2024



PPD and Public Health

Essential Public Health Function:

- 3. Communicate effectively to inform and educate people about health, factors that influence it, and how to improve it.
- 4. Strengthen, support, and mobilize communities and partnerships to improve health
- 5. Create, champion, and implement policies, plans, and laws that impact health
- 7. Assure an effective system that enables equitable access to the individual services and care needed to be healthy



PPD and Public Health - Continued

Essential Public Health Function:

- 8. Build and support a diverse and skilled public health workforce
- 9. Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement
- 10. Build and maintain strong organizational infrastructure for public health



Questions?

Vito Kelso

Pre-Prosecution Diversion Program Manager

Vito.Kelso@swdh.id.gov

PPD Funding Sources

- **Funding Source:** Idaho Department of Corrections
- **Funding Requester:** Canyon County
- **Funding Recipient:** Canyon County
- **Funding Duration:** 3-year subgrant



2025 PUBLIC MEETING NOTICE

November 19, 2024

Southwest District Health
Nikole Zogg, Director
13307 Miami Lane
Caldwell, ID 83607

The Southwest District Health Board of Health will hold their monthly Board Meetings on the following dates at 9:00 a.m., unless otherwise noted, at Southwest District Health, 13307 Miami Lane, Caldwell, Idaho.

Tuesday, January 28, 2025*
Tuesday, February 27, 2025*
Tuesday, March 18, 2025*
Tuesday, April 22, 2025
Tuesday, May 20, 2025
Tuesday, June 22, 2025

Tuesday, July 22, 2025
Tuesday, August 26, 2025
Tuesday, September 16, 2025
Tuesday, October 28, 2025
Tuesday, November 18, 2025
Tuesday, December 16, 2025*

This public notice satisfies the notice of meeting requirements in Idaho Code 74-204(1), Open Meeting Law. This document is posted in the principal office of Southwest District Health where the Board of Health meetings are held and is made available at <https://phd3.idaho.gov/boh/calendar/>.

If you have any questions, please contact Nikole Zogg at 208-455-5317.

* These meetings will be held from 10:00 a.m. to 1:00 p.m. to allow for winter driving conditions.

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Strengths

1. IADBH is an organization that facilitates collaboration, networking, and the exchange of information and best practice.
2. IADBH is a statewide organization with participation from all public health districts.
3. IADBH is strongest when public health districts are united.

Weaknesses

1. IADBH participation among the public health district board members is limited and waning.
2. IADBH is not politically strong, not commonly known, and does not have influence.
3. Public health district members do not always understand what IADBH is and what IADBH does.

Opportunities

1. Change the timing and location of the annual meeting to improve member participation and build awareness of the purposes of IADBH (by holding the annual meeting in Boise during the legislative session).
2. IADBH may provide training and education to its members on best practices.
3. Organize in a way that provides statewide direction and representation to IADBH members.

Threats

1. Public health districts fracturing and breaking away from IADBH over disagreement/misalignment on core public health issues.
2. Loss of local independence.
3. Mixed messaging to decision makers if there is disagreement among public health districts on matters affecting public health districts.



2025 Position Statements and Funding Priorities

Southwest District Health’s (SWDH) 2025 position statements and funding priorities are informed by known gaps, barriers, threats, or opportunities that impact the health of Idahoans across the six-county region.

This information is intended to inform legislators, local elected officials, and leaders in our community so they can, as they deem appropriate, propose or adopt policy or direct funding that will improve the health and vitality of Idahoans. The statements are brief and concise, and intended to be used if or when needed to communicate the district’s position. They may be further accompanied by supporting data and information, when requested.

An executive summary is provided on page 2. Specific and brief position statements pertaining to issues impacting the public’s health are provided on pages 3 to 10.

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Executive Summary

Southwest District Health (SWDH), through review of the 2023 Greater Treasure Valley Community Health Needs Assessment and the most recent data on demographics and leading causes of preventable illness and premature death in the six-county region, has identified five areas that if focused on could result in significant health improvements for Idahoans now and for generations to come. This could be accomplished by changes to policy at the local or state level, programs or services, and funding investments in strategic areas.

SWDH's position statements and funding priorities are broadly described below. More detailed information starts on page 5.

HEALTHIER COMMUNITIES. SWDH supports policies and funding commitments that aim to strengthen the health and wellbeing of the family unit, affordable and healthier housing, and improved access to healthcare, including behavioral health.

ENVIRONMENT & LAND USE. SWDH supports policies and funding commitments that aim to improve the safety, accessibility, and interactions we have in our environment. The design of our communities, how we plan for and build the spaces we live in, including open spaces, has positive or negative effects on physical and mental health.

GOVERNMENTAL PUBLIC HEALTH. SWDH supports policies and funding commitments that support public health infrastructure and public access to high-performing agencies (health districts, DEQ, DHW, etc.) with professional and well-trained staff. Public health professionals should be counted on to collect, analyze, and report on the health of their community in a timely, accurate, and meaningful way, effectively plan for and respond to threats to the public's health, and deliver services as required by law and based on the needs of the local community.



Existing Idaho Association of District Boards of Health Resolutions

A resolution is a concise statement of the Idaho Association of District Boards of Health’s (IADBH) stance towards a particular issue and serves as a call to action for the organization and its members. It describes and endorses a defined course of action directed towards a particular individual, organization, event, legislation, or policy.

Resolutions are used to educate and urge action by elected officials at all levels, other organizations, the media and the public about the IADBH’s position on important public health issues. The resolutions in their entirety can be accessed at: <https://idahopublichealthdistricts.org/resources/>.

NUMBER	TITLE	CURRENT DATE*
17-01	Resolution supporting prevention of excessive alcohol use	June 17, 2021
17-02	Resolution concerning the prevention of opioid drug overdose through prescriber education	October 24, 2024**
17-04	Resolution to support tobacco tax increase in the State of Idaho	June 17, 2021
19-01	Resolution to support awareness, education, and prevention of suicide	June 9, 2022
19-03	Resolution opposing the legalization of recreational (non-medical) marijuana	October 24, 2024
19-05	Resolution to support the recognition of senior cognitive health as a public health issue	June 9, 2022
19-06	Resolution supporting immunizations	October 24, 2024
22-01	Resolution to support an excise tax on electronic nicotine delivery systems	June 9, 2022
22-02	Resolution to remove the food establishment license fee in Idaho Code	October 24, 2024
22-03	Resolution to support raising the minimum age of legal access and use of <i>Mitragyna speciosa</i> (kratom) products in Idaho to age 21	June 9, 2022
22-04	Resolution to support vaping prevention in schools	June 9, 2022
22-05	Resolution to support innovative funding streams to support awareness, education, and prevention of suicide	June 9, 2022
24-01	Resolution to Clarify the Roles Pertaining to Solid Waste Disposal in Idaho	October 24, 2024
24-02	Resolution to Increase WIC Participation in Idaho	October 24, 2024**
24-03	Resolution to Allow for Public Health District Banking Flexibility	October 24, 2024**

* Current date: IADBH resolutions are effective for three years. They can be extended or archived after three years.

**These resolutions are in the process of being converted to policy position statements.



Southwest District Health Resolutions

SWDH's Board of Health members may submit for consideration to the board or request SWDH staff draft resolution language to support or oppose a specific policy impacting governmental public health or the health and wellbeing of Idahoans. The Board of Health votes to approve resolutions.

NUMBER	TITLE	CURRENT DATE
2024-01	Resolution to request a statute change to allow Southwest District Health the option to shift fiscal operations from State Treasury to an alternate banking institution that is FDIC insured.	Approved by BOH, August 27, 2024

DRAFT



SWDH Policy Position Statements & Funding Priorities

SWDH’s policy position statements and funding priorities reflect and align with our strategic priorities and support our mission and vision. Depending on the priority, SWDH may take the following approaches:

- Commit funding and/or seek out funding from a variety of sources including federal, state, and non-profit organizations to address current or emerging threats to health
- Advocate and educate policymakers on issues that impact governmental public health or the health of Idahoans
- Educate and coordinate with organizations and businesses on matters that impact the health of Idahoans

FOCUS AREA: HEALTHIER COMMUNITIES

POSITION STATEMENT & FUNDING PRIORITY	JUSTIFICATION
<p>Supports policies and actions that promote healthy choices, behaviors, and preventative healthcare such as:</p> <ul style="list-style-type: none"> • access to healthy foods and health nutrition education for families • activities that promote physical exercise at all stages of life • education that reduces the risk for substance misuse and unsafe relationships • access to easily accessible and affordable preventative healthcare 	<p>Idahoans’ consumption of unhealthy, processed foods coupled with decreased physical activity and increased screen time has led to increasing rates of cardiovascular disease, diabetes, and poor mental health, and life-expectancy, overall, for Idahoans is on the decline.</p>
<p>Supports access to home visiting programs that strengthen families during critical times of early life development in all SWDH counties.</p>	<p>Idaho’s public health districts’ home visiting programs provide trained home visitors, such as nurses or parent educators, to work with expecting parents and parents of children under age 5 to provide necessary resources and skills to raise healthy children. These evidence-based programs have demonstrated positive outcomes for children and families in such areas as health care, self-sufficiency, family strengthening and prevention of child maltreatment. SWDH consistently has a waiting list for these services.</p>



POSITION STATEMENT & FUNDING PRIORITY	JUSTIFICATION
Supports making EMS an essential service in Idaho.	<p>Establishing EMS as an essential service in Idaho law will expand opportunities to fund EMS services across the state at a level that can better serve the public’s expectations, decrease disability and premature death, and reduce healthcare costs associated with delayed access to care.</p> <p>*Idaho Association of Counties (IAC) priority area</p>
Supports efforts to improve Idaho’s behavioral health system and the continuum of care for those with mental health conditions or substance use disorders.	<p>According to the 2023 Community Health Needs Assessment, access to affordable mental health care and substance misuse treatment is a struggle for many residents of SWDH, including youth. Behavioral health ranked 2nd in the results of the assessment, just behind safe and affordable housing. Supporting the full continuum of behavioral health care and interventions is essential for promoting mental wellbeing across populations while addressing specific needs based on risk level or existing symptoms.</p>

FOCUS AREA: GOVERNMENTAL PUBLIC HEALTH

POSITION STATEMENT & FUNDING PRIORITY	JUSTIFICATION
Supports funding for governmental public health infrastructure and essential services.	<p>Despite SWDH’s population growth of 16.5% since 2017, the number of staff employed by the district has stayed relatively unchanged despite increasing demands for services.</p> <p>Governmental public health works to assure critical infrastructure (e.g., safe drinking water, safe food, healthy housing, education/information for informed decision-making, preventative healthcare access, etc.) is in place to prevent disease, disability, and premature death of the population.</p>



FOCUS AREA: ENVIRONMENT AND LAND USE

POSITION STATEMENT & FUNDING PRIORITY	JUSTIFICATION
<p>Supports access to clean, potable water, the oversight necessary to protect Idaho’s groundwater, and education to the public about well water testing, lab results, and water treatment.</p>	<p>Availability of water is a growing concern across Idaho. Clean, potable water is essential to the health of children and families. Already, Idahoans across the state are experiencing unsafe levels of nitrates, arsenic, uranium, and other toxins in their private well water systems. Without monitoring and intentional practices to protect ground water and aquifers across the state, the risk for further contamination is high and will likely increase as the population grows unless measures are taken to proactively protect groundwater.</p>
<p>Supports initiatives, policies, and funding decisions to help municipalities make healthier planning decisions.</p>	<p>The built environment of a community is a direct predictor of longevity and quality of life. Physical spaces can expose people to toxins or pollutants and influence lifestyles that contribute to diabetes, cardiovascular disease, and asthma among other diseases and conditions.</p>
<p>Supports policy change to expand inspection of swimming facilities to include those in community subdivisions, apartment complexes, and hospitality industry.</p>	<p>Currently, SWDH only inspects municipal public swimming pools in accordance with Idaho Code. However, the majority of reported waterborne illnesses and hospitalizations in the district come from exposures to disease causing microorganisms in other public swimming and splash pad facilities (e.g., gyms, subdivisions, apartment complexes, hotels, hot springs, and parks). While these facilities are not inspected for health or safety purposes, it still requires taxpayer dollars to respond when illnesses are associated with them. Regular inspections would increase operator education and decrease waterborne illnesses, related hospitalizations, lost work productivity, and school attendance.</p>



Southwest District Health Position Statements

While not identified as a top priority for the district, the following position statements received honorable mention because of their relevance to core public health and general importance to creating the conditions for Idahoans to thrive.

FOCUS AREA: HEALTHIER COMMUNITIES

POSITION STATEMENT	JUSTIFICATION
Supports drug overdose prevention training and resources in our local communities.	By investing in overdose prevention training and resources, communities can take proactive steps to safeguard their health, support those in need, and ultimately save lives.
Supports individual and community civic engagement and voter participation.	Civic engagement (e.g., voting, volunteering, attending public meetings, etc.) promotes social connectedness and wellbeing. Creating awareness and supporting civic participation opportunities leads to community cohesion, engagement, and healthier communities.
Supports funding education about human trafficking and education that helps cultivate healthy family dynamics.	<p>Funding education on human trafficking and healthy family dynamics not only raises awareness but also builds resilient communities that can actively participate in prevention and support efforts.</p> <p>1 in 3 children can now expect to have an unwelcome sexual experience online before they turn 18 (ParentsTogether, 2023).</p>



POSITION STATEMENT	JUSTIFICATION
<p>Supports access to convenient and affordable contraception.</p>	<p>The majority of females 18 to 64 years have used contraception at some point in their reproductive years (NCSL, 2023). Access to a range of contraceptive methods may help women and their partners to plan and space their births. Contraception can also help reduce unplanned pregnancy. Research shows planning pregnancies leads to positive health, social and economic outcomes for women, families and society.</p> <p>Approximately 65% of females 14 to 49 currently use contraception.</p>
<p>Supports evidence-based mental health care access for all ages.</p>	<p>Promoting mental health care access helps normalize the conversation around mental health, reducing stigma and encouraging individuals to seek help. This is particularly important for vulnerable populations, such as children and the elderly, who may face additional barriers.</p>
<p>Supports policies that encourage and promote careers in healthcare and behavioral health.</p>	<p>Policies that encourage and promote careers in healthcare and behavioral health are essential for meeting the needs of a changing population, addressing workforce shortages, and improving overall public health outcomes. From 2021 through 2036, the US is expected to experience severe workforce shortfalls in all medical and mental health service areas. Of note, rural communities tend to be harder hit by healthcare workforce shortages (HRSA). By investing in education and support for these careers, we can create a more resilient healthcare system.</p>



FOCUS AREA: GOVERNMENTAL PUBLIC HEALTH

POSITION STATEMENT	JUSTIFICATION
<p>Supports Idaho’s de-centralized public health model and infrastructure to support and sustain it.</p>	<p>In a state with many rural counties, communities are best supported with public health services through a model that leverages multi-county, state, and federal funding. This ensures even the least populated counties have access to a professional public health workforce and services to help their communities be healthy, safe, and thrive.</p>
<p>Supports health in all policies, which integrates and articulates health considerations into policymaking across sectors to improve the health of communities.</p>	<p>A person’s and a community’s health are more influenced by their environment and behaviors than by the healthcare they receive. Through a health in all policies approach, local policymakers have the power and ability to consider the impacts on the health of their community in any policy decision they consider.</p>

FOCUS AREA: ENVIRONMENT AND LAND USE

POSITION STATEMENT	JUSTIFICATION
<p>Supports funding for critical infrastructure that accommodates population growth and community vitality (e.g., roads and other modes of transportation, bridges, schools, emergency services, and community spaces such as parks, libraries, and senior centers).</p>	<p>A person’s environment affects their overall physical and mental health.</p>