



Board of Health Meeting
Tuesday, November 18, 2025
13307 Miami Lane, Caldwell, ID 83607

Public comments specific to an agenda item for the November 18, 2025 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 10:00 a.m. on Monday, November 17, 2025. 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 Meeting to Order	Chairman Kelly Aberasturi
9:01		Pledge of Allegiance	
9:04		Roll Call	Chairman Kelly Aberasturi
9:07	A	Call for changes to agenda; vote to approve agenda	Chairman Kelly Aberasturi
9:10		In-person public comment	
9:15	I	Introduction of new employees	Division Administrators
9:20	A	Approval of October 2025 meeting minutes	Chairman Kelly Aberasturi
9:25	I	September 2025 Monthly Expenditure and Revenue Report	Michele Hanrahan
9:50	I	Board Member Payment Revision	Michele Hanrahan
10:00	I	Contract Services and Grant Applications	Michele Hanrahan, Don Lee
10:10		Break	
10:25	I	Oral Health Program and Trends Overview	Rick Stimpson
10:50	A	Review and Approve 2026 Board of Health Meeting Calendar	Nikki Zogg
11:00	G	Review 2026 Board of Health Meeting Workplan	Nikki Zogg
11:15	A	Review and Approve 2026 SWDH Position Statements	Nikki Zogg
11:30		Directors Report	Nikki Zogg
		• Executive Council Meetings • Board of Health Strategic Planning Survey • Report Summary of Grants, Contracts, Subgrants, Obligations Signed	
11:58	I	Future Agenda Items	
12:00		Adjourn	

NEXT MEETING: To be determined in January 2026 at 10:00 a.m.



BOARD OF HEALTH MEETING MINUTES
Tuesday, October 28, 2025

BOARD MEMBERS:

Jennifer Riebe, Commissioner, Payette County – present
Jim Harberd, 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 Harshman, Don Lee, Beth Kriete, Ben Shatto, Michele Hanrahan, Michelle Schildhauer, Ricky Bowman, Molly Smith

Virtual: Colton Osborne

GUESTS: Abbey Erquiaga, Jace Perry, Amanda Swails

CALL THE MEETING TO ORDER

Chairman Kelly Aberasturi called the meeting to order at 9:06 a.m. due to technical difficulties.

ROLL CALL

Chairman Aberasturi – present; Dr. John Tribble – present; Commissioner Purdy – present;
Commissioner Harberd – present; Vice Chairman 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 Riebe made a motion to approve the agenda as presented. Commissioner Brooks seconded the motion. All in favor; motion passes.

PUBLIC COMMENT

No public comment was provided in person and no public comments were submitted through the online submission mechanism.

INTRODUCTION OF NEW EMPLOYEES

No new employees were introduced.

APPROVAL OF SEPTEMBER 2025 MEETING MINUTES

Board members reviewed meeting minutes from the September 2025 Board of Health meeting.

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

AUGUST 2025 EXPENDITURE AND REVENUE REPORT

Michele Hanrahan, Financial Officer, provided the August 2025 Expenditure and Revenue Report. Program expenditures are slightly lower than the target. Personnel is also slightly lower than target due to several vacant positions.

Board members asked what is included in the administration costs noted on the top line. Michele will look into that and report back.

CONTRACT SERVICES AND GRANT APPLICATIONS

There are no grant applications in process to share. Don Lee, Chief Operating Officer, explained that staff have been working to identify grants that may help support counties directly. One example is recent discussions with Adams County regarding a small grant with Delta Dental to provide a water filling station. The county elected to not move forward with that as the grant did not support the cost.

In addition, Diane, SWDH grant writer, and Don met with Canyon County Ambulance District to share information about a grant for one-time purchasing of equipment. Staff are keeping an eye open for opportunities that might be of interest to counties.

FISCAL YEAR 2026 OPIOID PLAN ADJUSTMENT

Michele Schildhauer, SWDH Program Manager, presented a request for reallocation of \$43,200 that Board members previously allocated to behavioral health home visitor support. She explained SWDH received two grants to cover the project goals for that expense including \$19,000 from City of Nampa's opioid settlement funds to provide counseling and \$20,000 from Laura Moore Cunningham foundation that can be used to support home visiting through books, educational toys, and group activities.

She asked that the \$43,200 be reallocated to provide funds to focus on training and certification for 36 master's level clinicians who work in the district to become certified in focused cognitive behavioral therapy. This treatment focuses on youth ages 3 to 18 and helps the youth reframe experiences and move forward. The funds would also allow certification for 33 peer support specialists, an evidence-based practice effective for patients working through substance use or mental health treatment.

Board members discussed questions about negative impacts of trauma focused therapy and how evidence-based research supports its use. Michelle explained that a pre-assessment is typically used and peer support is an evidence-based practice pairing someone with lived experience such as substance use or mental health diagnoses with someone currently working through that treatment. Research shows this pairing provides more substantial recovery and more treatment compliance.

MOTION: Commissioner Buttici made a motion to reallocate the funds of \$43,200 from operating supplies for the behavioral health provider and home visiting programs to the training and certification as requested. Commissioner Harberd seconded the motion. All in favor; motion passes.

DISASTER READINESS TABLETOP EXERCISE

Ricky Bowman, SWDH Program Manager, and Molly Smith, SWDH Training and Exercise Coordinator for the SWDH Public Health Emergency Preparedness and Epidemiology Response (PHEPER) Team shared a disaster readiness tabletop exercise.

Last year, Ricky and Molly presented information to Board members regarding what is involved with being an administrator during a natural disaster. This tabletop follows up on that training to show what a flooding scenario looks like from an emergency responder perspective and what the SWDH (i.e., public health) lens looks like for a response and recovery.

The group discussed the differences between outbreaks declared by public health and emergency declarations issued by Boards of County Commissioners. Molly and Ricky also shared information on public health considerations during a flood incident including environmental health (well water contamination, septic systems failures, epidemiology (diseases spread from failed wells or septic systems, mosquitos and mosquito borne diseases) and stressed hospital systems.

Dr. Tribble asked about the plan to mobilize and utilize volunteers during a national disaster. Ricky explained the Medical Reserve Corps (MRC) helps provide volunteers.

DISTRICT BOARDS OF HEALTH MEETING RECAP

Viki Purdy, Board of Health Executive Council Representative, shared a recap of the Idaho District Boards of Health (IADBH) held October 15-16, 2025 at Central District Health in Boise.

CLEARWATER FINANCIAL SITUATIONAL ANALYSIS REPORTS

Clearwater Financial staff provided updates on the situational analysis reports. These reports summarize the internal stakeholder summary report and external stakeholder summary report intended to represent the district's voice regarding facility improvements. Areas where feedback intersects will help to inform the master facilities plan and help guide the district.

The single most consistent theme amongst external stakeholders is public lack of awareness and limited public perception of health district services and also perception that services are only available to people with a certain income level or demographic. Some stakeholders encouraged more proactive communication.

Amanda Swails shared information about the emerging themes. The next steps in the process are to transition into scenario building, meet with citizen committee again, then come back to the board with another update including more specific scenario solutions.

DECEMBER 2025 BOARD OF HEALTH MEETING DATE

Board members were asked to consider cancelling or rescheduling the December meeting date due to conflicts with holiday travel.

MOTION: Commissioner Brooks made a motion to cancel the December Board of Health meeting. Commissioner Riebe seconded the motion. All in favor; motion passes.

DIRECTORS REPORT

Director and Board Member Meetings

Nikki extended an invitation to Board members to meet with her individually to discuss input for the annual Board of Health workplan.

Lawsuit Dismissal

The lawsuit involving properties in Washington County has been dismissed.

Funding Update

From the federal side, there has not been much funding impact to health districts. Next fiscal year there may be some home visiting program funding cuts from the state side and health district directors are working to address those.

Report Summary of Grants, Contracts, Subgrants, Obligations Signed

To follow up on Board's direction to be kept informed of what Nikki has signed, Nikki has provided a report summary of grants, contracts, subgrants and obligations signed. Anything that is up and coming over \$50,000 threshold will be presented to the Board separately.

Adjournment

There being no further business, the meeting adjourned at 12:04 p.m.

Respectfully submitted:

Approved as written:

Nikole Zogg
Secretary to the Board

Kelly Aberasturi
Chairman

Date: November 18, 2025



SOUTHWEST DISTRICT HEALTH REVENUES & EXPENDITURE REPORT FOR FY2026

September-25

Modified Accrual Basis

Target **25.00%**

Fund Balances		
	FY Beginning	Sept 2025 Ending
General Operating Fund	\$1,355,402	\$1,527,162
LGIP Operating	\$5,650,546	\$5,727,415
LGIP Vehicle Replacement	\$113,809	\$115,068
LGIP Capital	\$1,299,174	\$1,299,174
Total	\$8,983,390	\$8,668,819

Income Statement Information		
	YTD	Month
Net Revenue:	\$4,328,283	\$1,396,999
Expenditures:	(\$4,221,143)	(\$1,532,443)
Net Income:	\$107,140	(\$135,445)

Revenue										
	County Contributions	Fees	Subgrant/Grant/Contract Revenue	Sale of Assets	Interest	Other	Monthly Total	YTD	Total Budget	Percent Budget to Actual
Administration & BoH	-\$244,133.67		-\$72,345.94				-\$316,479.61	-\$965,584.23	\$4,173,645.00	23.14%
District Operations Div							\$0.00	-\$3,030.12	\$0.00	
FCS										
Medical Clinic		-\$15,305.38					-\$15,305.38	-\$58,173.68	\$162,000.00	35.91%
Immunizations		-\$5,927.89	-\$10,645.18				-\$16,573.07	-\$49,637.44	\$189,024.00	26.26%
HIV/STI/DIS Prevention			-\$7,942.13				-\$7,942.13	-\$28,008.79	\$185,250.00	15.12%
Women's Health Check		-\$328.28					-\$328.28	-\$5,761.37	\$20,061.00	28.72%
Nurse Family Partnership		-\$16,507.92					-\$16,507.92	-\$191,626.50	\$472,150.00	40.59%
Parents as Teachers		-\$21,010.08					-\$21,010.08	-\$107,836.54	\$378,292.00	28.51%
WIC							\$0.00	-\$34,419.35	\$1,306,960.00	2.63%
Adult Crisis Center						-\$125,000.00	-\$125,000.00	-\$375,000.00	\$1,704,000.00	22.01%
Youth Crisis Center						-\$125,000.00	-\$125,000.00	-\$375,000.00	\$1,737,510.00	21.58%
YouthROC			-\$12,936.12				-\$12,936.12	-\$112,936.12	\$420,000.00	26.89%
Pre-Prosecution Diversion			-\$20,181.59				-\$20,181.59	-\$218,138.51	\$1,419,794.00	15.36%
Other FCS		-\$5,399.80	-\$212,836.63			-\$1,000.00	-\$219,236.43	-\$233,394.37	\$617,552.00	37.79%
ECHS										
Fit & Fall Proof							\$0.00	-\$6,328.60	\$95,897.00	6.60%
Millennium-Tobacco							\$0.00	-\$350,565.79	\$461,038.00	76.04%
Partnership for Success			-\$295,457.41				-\$295,457.41	-\$315,024.45	\$545,777.00	57.72%
Food Programs		-\$8,159.00					-\$8,159.00	-\$26,036.00	\$349,900.00	7.44%
Child Care Inspections		-\$1,850.00	-\$23,291.27				-\$25,141.27	-\$44,994.60	\$142,284.00	31.62%
Land Programs		-\$92,059.00	-\$14,610.94				-\$106,669.94	-\$333,982.41	\$1,042,629.00	32.03%
Epi Investigations			-\$38,182.47				-\$38,182.47	-\$91,519.10	\$374,453.00	24.44%
Public Health Preparedness			-\$16,567.15				-\$16,567.15	-\$52,874.87	\$573,000.00	9.23%
WICHC							\$0.00	\$0.00	\$145,020.00	0.00%
Other ECHS			-\$10,320.73				-\$10,320.73	-\$348,410.29	\$517,299.00	67.35%
Monthly Revenue	-\$244,133.67	-\$166,547.35	-\$735,317.56	\$0.00	\$0.00	-\$251,000.00	-\$1,396,998.58			
Year-to-Date Revenue								-\$4,328,283.13	\$17,033,535.00	25.41%



SOUTHWEST DISTRICT HEALTH

REVENUES & EXPENDITURE REPORT FOR FY2026

Modified Accrual Basis

September-25

Target **25.00%**

EXPENDITURES								
	Personnel	Operating	Capital	T/B	Monthly Total	YTD	Total Budget	Percent Budget to Actual
Administration & BoH	\$46,538.56	\$32,368.87			\$78,907.43	\$252,588.84	\$814,284	31.02%
District Operations Div (and blanks-unidentified programs)	\$127,105.44	\$100,513.55			\$227,618.99	\$653,050.67	\$2,705,474	24.14%
FCS								
Medical Clinic	\$41,834.99	\$13,503.00			\$55,337.99	\$185,315.13	\$787,894	23.52%
Immunizations	\$15,856.47	\$11,215.58			\$27,072.05	\$94,042.77	\$309,671	30.37%
HIV/STI/DIS Prevention	\$7,645.26	\$2,596.37			\$10,241.63	\$34,161.24	\$158,077	21.61%
Women's Health Check	\$348.60	\$822.53			\$1,171.13	\$2,434.96	\$22,087	11.02%
Nurse Family Partnership	\$31,436.66	\$8,413.22			\$39,849.88	\$142,589.64	\$599,162	23.80%
Parents as Teachers	\$32,301.45	\$8,228.80			\$40,530.25	\$123,648.52	\$459,414	26.91%
WIC	\$92,770.63	\$13,325.54			\$106,096.17	\$366,037.85	\$1,554,031	23.55%
Adult Crisis Center	\$1,096.69	\$237,214.68			\$238,311.37	\$483,734.77	\$1,490,559	32.45%
Youth Crisis Center		\$243,775.90			\$243,775.90	\$487,821.33	\$1,498,974	32.54%
YouthROC	\$4,612.90	\$268.34		\$86,769.58	\$91,650.82	\$165,106.21	\$413,845	39.90%
Pre-Prosecution Diversion	\$16,016.85	\$1,036.26			\$17,053.11	\$61,689.54	\$1,278,193	4.83%
Other FCS	\$26,728.99	\$25,491.46		\$7,419.65	\$59,640.10	\$169,439.95	\$479,224	35.36%
ECHS								
Fit & Fall Proof	\$6,309.98	\$123.76			\$6,433.74	\$22,860.26	\$100,135	22.83%
Millennium-Tobacco	\$20,315.53	\$2,986.33			\$23,301.86	\$73,915.46	\$317,691	23.27%
Partnership for Success	\$10,072.00	\$15,448.54		\$3,582.57	\$29,103.11	\$109,010.20	\$477,714	22.82%
Food Programs	\$49,400.78	\$3,316.10			\$52,716.88	\$184,550.48	\$685,368	26.93%
Child Care Inspections	\$8,792.53	\$336.65			\$9,129.18	\$27,789.05	\$166,169	16.72%
Land Programs	\$63,049.54	\$5,771.48			\$68,821.02	\$231,605.50	\$947,688	24.44%
Epi Investigations	\$21,094.52	\$696.31			\$21,790.83	\$78,651.54	\$316,565	24.85%
Public Health Preparedness	\$23,862.01	\$1,615.08			\$25,477.09	\$98,136.24	\$505,150	19.43%
WICHC	\$6,356.69	\$4,989.50			\$11,346.19	\$36,673.37	\$115,859	31.65%
Other ECHS	\$41,562.51	\$2,504.01		\$3,000.00	\$47,066.52	\$136,289.25	\$830,307	16.41%
Monthly Expenditures	\$695,109.58	\$736,561.86	\$0.00	\$100,771.80	\$1,532,443.24			
				Year-to-Date Expenditures		\$4,221,142.77	\$17,033,535	24.78%



Oral Health

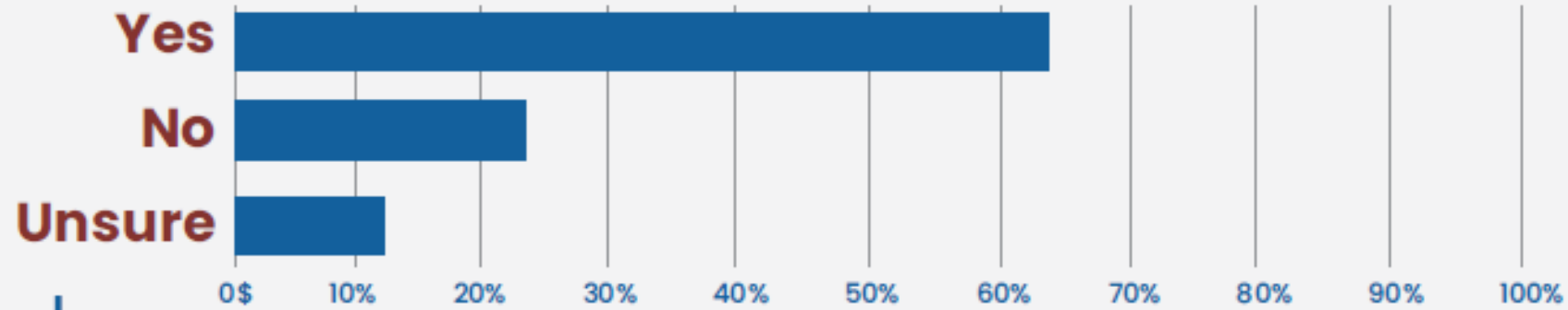
School Based Screenings and Education

Overview:



- **Idaho and Local Data**
- **Program**
- **Reach**

When asked “Do you know anyone in your area that is having difficulties in accessing oral health care?”, respondents answered:



1. Lack of Insurance
2. Lack of Transportation
3. Financial Barriers
4. Insurance Limitations (providers not taking Medicare or Medicaid patients)

Health Professional Shortage Area: Dental Care, July 2025-Idaho

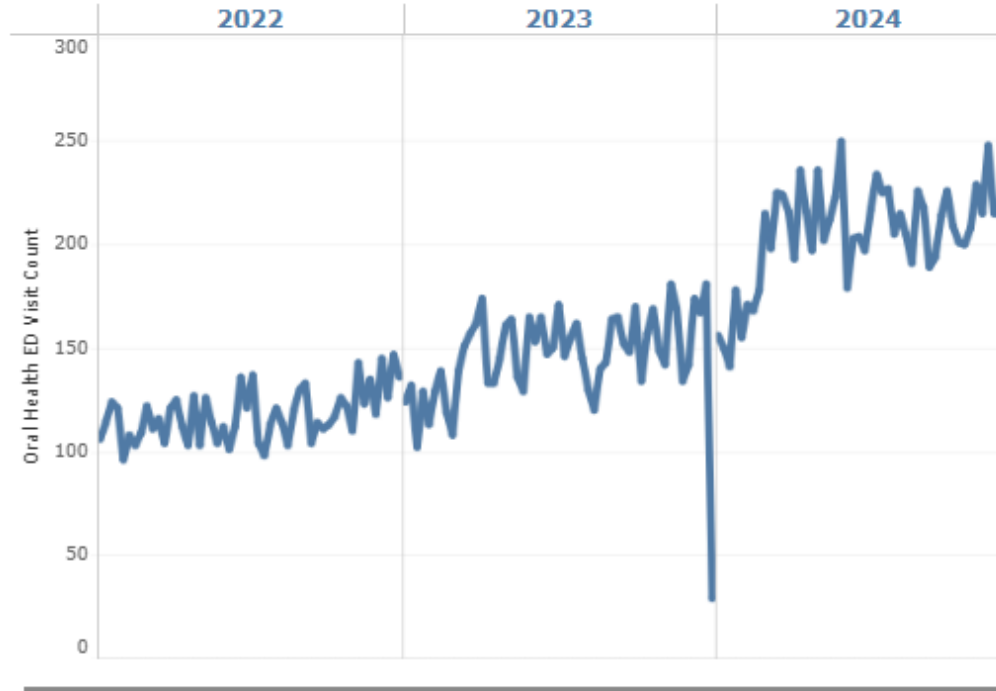
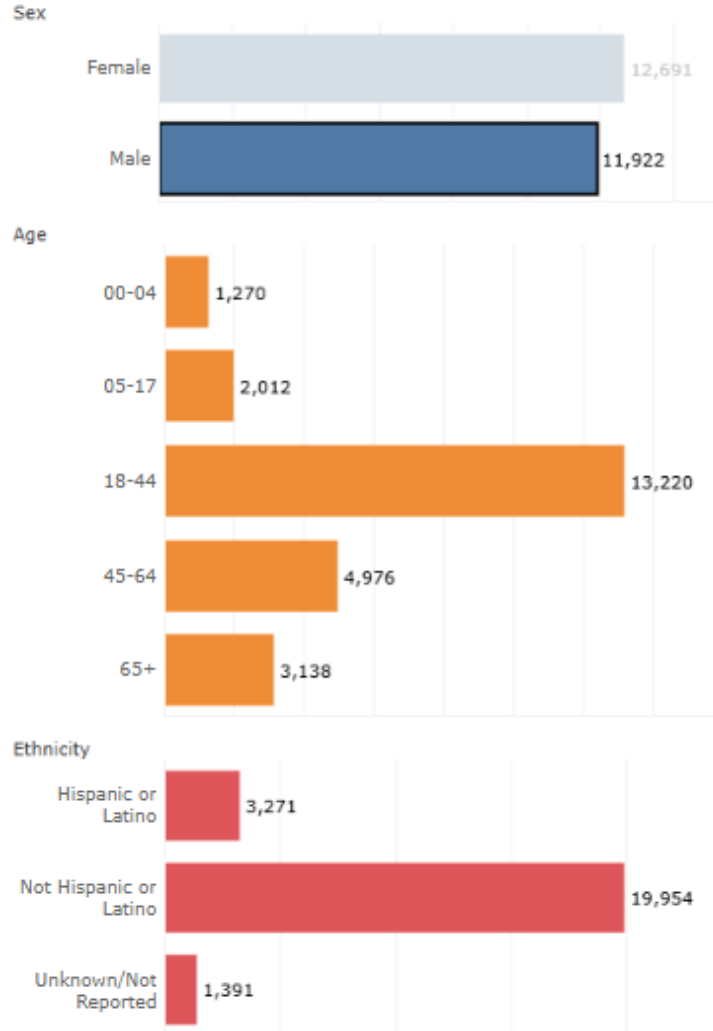


District 3
(Southwest)

Non-Traumatic Oral Health Emergency Department (ED) Visits

Step 2: Use the filter below to select which year(s) to display.

(All)



Notes on ED Visits

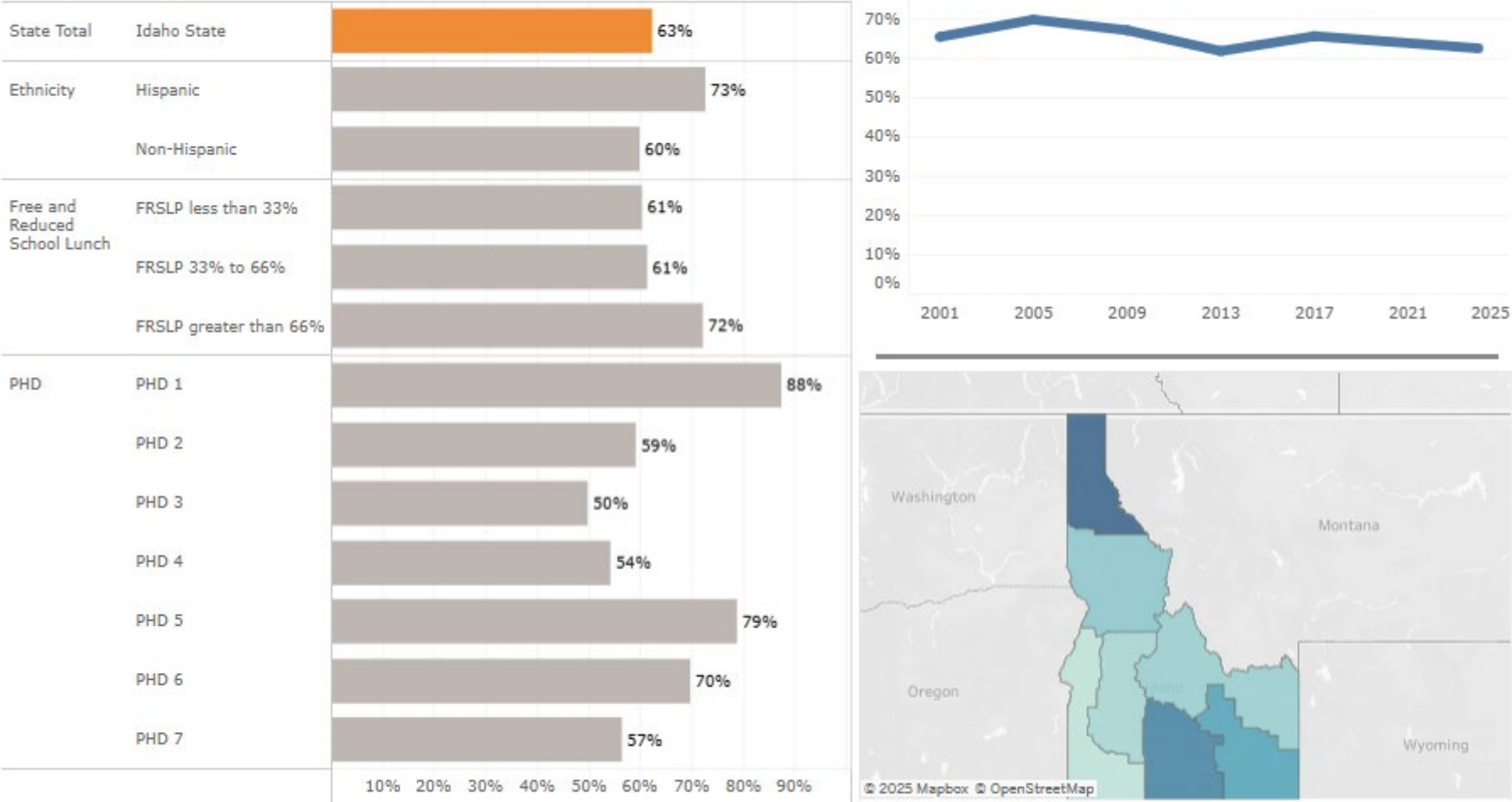
Number of reporting facilities: The number of facilities reporting emergency department data to ESSENCE increased from 19 facilities in January, 2019 to 35 facilities in May, 2021. The 35 facilities currently reporting represent 98.0% of estimated emergency department annual visits in Idaho. Therefore, the number of visits are not 100% comparable and should be taken into consideration when comparing data across timeframes.

Source: BioSense Platform: Data on emergency department visits in Idaho contributed daily.

2020 & 2021 visits in general may have been impacted by COVID-19.



Percentage of Idaho 3rd graders with caries (cavities) experience



Key statistics and trends

- Dental Caries (cavities) are the most prevalent chronic disease in children today.
- A 2025 report noted that 63% of Idaho 3rd graders have experienced caries (cavities), exceeding the national benchmark of 42.9%.
- In a 2023 survey, 11.1% of 3rd graders had active decay with no history of dental care, a rate lower than in previous surveys.

Our Team

- Virginia Reyna-Walling, RDH



- Mary Garza



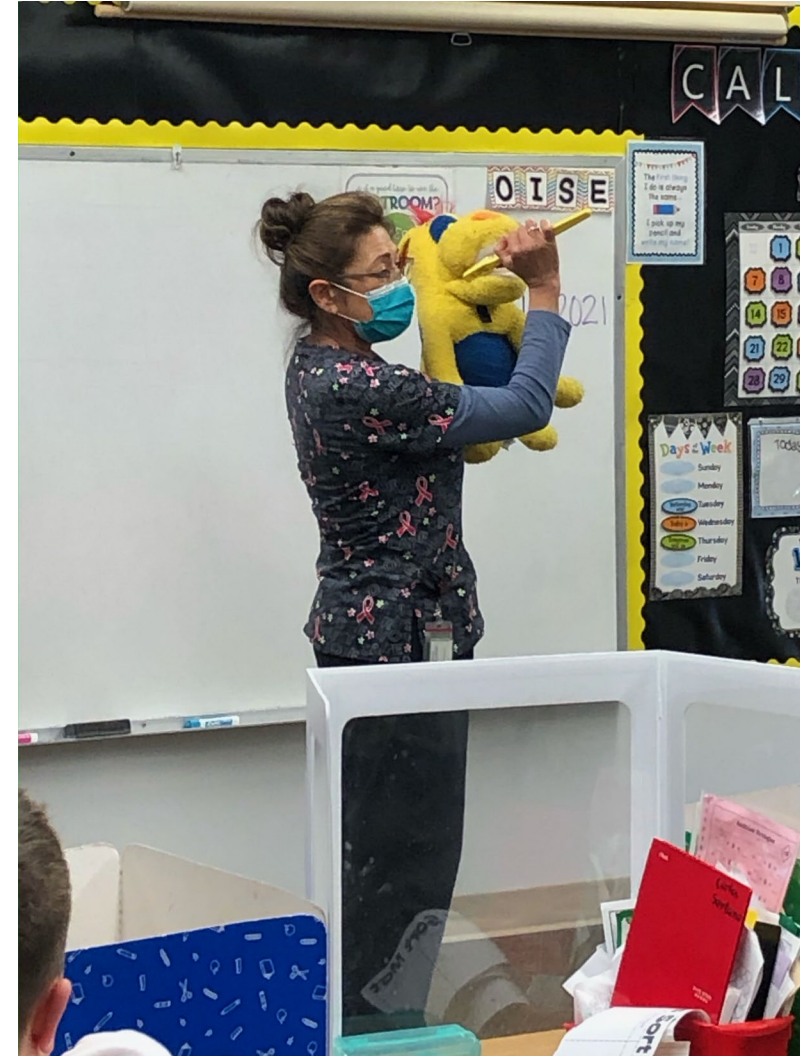
Purpose

To improve oral health outcomes for children and families in our communities through prevention, education, and connection to care.



Community Partners

- Local Schools
- Delta Dental
- Idaho Oral Health Alliance
- Idaho Department of Health and Welfare
- Local Dentist



Services Provided

- **Oral Health Screenings** – Identify early signs of tooth decay and other oral health concerns.
- **Fluoride Varnish Applications** – Provide protective fluoride treatments to strengthen teeth and prevent cavities.
- **Oral Health Education** – Offer age-appropriate education and resources to promote good brushing, flossing, and nutrition habits.
- **Referrals to Local Dentists** – Connect individuals and families to dental providers for follow-up and ongoing care.
- **Dental Sealant Clinics** – Apply protective sealants to children's permanent molars to help prevent decay.

Why Early Identification Matters?

- Prevents More Serious Problems
- Supports Overall Health
- Improves School Readiness and Attendance
- Promotes Positive Habits Early
- Reduces Health Disparities



Reach

Year Individuals Served

Year	Individuals Served
2023	2,185
2024	2,412
2025	2,280



Who Do We Reach

- % Medicaid = 43%
- % Non-insured = 35%
- % Insured = 21%
- Preschool – 3rd Grade
- Headstart
- Migrant Headstart

County	Individuals Served	Percentage
Adams	0	0%
Canyon	1690	74%
Gem	118	5%
Owyhee	123	5%
Payette	322	14%
Washington	27	1%
Total	2280	

Include Funding Sources on Last Slide

- **Funding Source:** Health Resources and Services Administration (HRSA)
 - Maternal and Child Health (MCH) Services Block Grant, HCS2838
- **Funding Requester:** Idaho Department of Health and Welfare
- **Funding Recipient:** Southwest District Health
- **Funding Duration:** 12-month subgrant

References

- Idaho Department of Health & Welfare, Division of Public Health. (n.d.). *IOHSS dashboard: Oral health* [Data dashboard]. Retrieved October 16, 2025, from <https://www.getthehealthy.dhw.idaho.gov/iohss-dashboard-oral-health>
- Rural Health Information Hub. (n.d.). *Map of health professional shortage areas: dental care, by county, Idaho* [Map]. Retrieved October 17, 2025, from <https://www.ruralhealthinfo.org/charts/9?state=ID>
- The Idaho Oral Health Alliance. (2017). *Idaho oral health environmental assessment report*. Retrieved October 16, 2025, from <https://www.idahooralhealth.org/>



2026 PUBLIC MEETING NOTICE

November 18, 2025

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 27, 2026*
Tuesday, February 24, 2026
Tuesday, March 24, 2026
Tuesday, April 28, 2026
Tuesday, May 19, 2026
Tuesday, June 23, 2026

Tuesday, July 28, 2026
Tuesday, August 25, 2026
Tuesday, September 22, 2026*
Tuesday, October 27, 2026
Tuesday, November 17, 2026
Tuesday, December 22, 2026

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.

*subject to change based on IAC midwinter and fall conference dates

Healthier Together

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

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SWDH Board of Health Annual Workplan – 2026

This workplan is used as a guide. Presentations may be added to a board agenda when the board specifically asks for it, when the district needs input, feedback, or direction from the board, when there is a sense of urgency or a threat to the public's health that the board should be informed about, or when there is a new program or service being explored or added.

Month	Special schedules or events	Standing agenda items	Special presentations
January		• Public comment • Open discussion • Board minutes (A) • New employee introductions • Monthly expenditure and revenue report (I) • Budget Revision (A) • New service contracts & grants (I) • Interim 5-year Facilities and IT Infrastructure Plan (I) • Marketing & PR Roundup (I) • Executive Council Report (I) • Board elections (A) • Director's Report (I) ○ Director approved agreements, contracts, and subgrants ○ Legislative update • Future agenda items	• Clearwater Financial Report • Tobacco & vape use prevention
February	Work session	• Budget workshop: Division Presentations/Needs/Gaps; Subgrants/Contracts forecast; Clearwater Financial recommendations	
		• Public comment • Open discussion • Board minutes (A) • New employee introductions • Monthly expenditure and revenue report (I) • New service contracts & grants (I) • Fee schedule approval (A) • Employee retention and compensation assessment (I) • Executive Council Report (I)	Work session

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		• Director's report (I) ○ Director approved agreements, contracts, and subgrants ○ Millennium Fund update ○ Legislative update • Future agenda items	
March		• Public comment • Open discussion • Board minutes (A) • New employee introductions • Monthly expenditure and revenue report (I) • New service contracts & grants (I) • Annual financial audit report (A) • Fiscal Year 2027 Change in Employee Compensation Plan (A) • Fiscal Year 2027 Pay Schedule (A) • Fiscal Year 2027 County Contributions (A) • Executive Council Report (I) • Director's report (I) ○ Director approved agreements, contracts, and subgrants ○ Legislative Update ○ Millennium Fund update • Future agenda items	Clearwater Financial final report & recommendations
April		• Public comment • Open discussion • Board minutes (A) • New employee introductions • Monthly expenditure and revenue report (I) • New service contracts & grants (I) • Fiscal Year 2027 Budget Proposal (A) • Communications Report (I) • Director's Report (I) ○ Director approved agreements, contracts, and subgrants ○ Budget Committee proxy Forms ○ Board of Health term expirations • Future agenda items	

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May	Budget hearing	Fiscal year 2026 budget hearing	
		• Public comment • Open discussion • Board minutes (A) • New employee introductions • Monthly expenditure and revenue report (I) • New service contracts & grants (I) • Director's report (I) ○ Director approve agreements, contracts, and subgrants ○ Budget committee proxy forms ○ Board of Health Term Expirations • Future agenda items	
June	• Fiscal year end • BOCC confirmation of term renewals • Bylaw review (biannual – even years) •	• Public comment • Open discussion • Board minutes (A) • New employee introductions • Monthly expenditure and revenue report (I) • New service contracts & grants (I) • SWDH draft IADBH resolutions and position statements (A) • Director's report (I) ○ Director approved agreements, contracts, and subgrants • Future agenda items	Note: Bylaws do not need reviewed and approved in 2026 as the bylaws were revised and approved in 2025.
July		• Public comment • Open discussion • Board minutes (A) • New employee introductions • Monthly budget report (I) • New service contracts & grants (I) • IADBH draft resolutions & position statements (I) • Director's report (I) ○ Director approved agreements, contracts, and subgrants • Future agenda items	
August		• Public comment • Open discussion	

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		• Board minutes (A) • New employee introductions • Monthly expenditure and revenue report (I) • New service contracts & grants (I) • Commit carryover funding (A) • IADBH draft resolutions & position statements (I) • Director's report (I) ○ Director approved agreements, contracts, and subgrants • Future agenda items	
September		• Public comment • Open discussion • Board minutes (A) • Monthly expenditure and revenue report (I) • New service contracts & grants (I) • IADBH draft resolutions & position statements (I) • Director's report (I) ○ Director approved agreements, contracts, and subgrants ○ IADBH proxy forms • Future agenda items	
October	Work session	ICS Training for Elected Officials/Tabletop	
	Annual IADBH Conference	• Public comment • Open discussion • Board minutes (A) • New employee introductions • Monthly expenditure and revenue report (I) • New service contracts & grants (I) • Director's report (I) ○ Director approved agreements, contracts, and subgrants • Future agenda items	Work session
November		• Public comment • Open discussion • Board minutes (A) • New employee introductions • Monthly expenditure and report (I) • New service contracts & grants (I)	

DRAFT

		• BOH schedule for next calendar year (A) • Director's report (I) ○ Director approved agreements, contracts, and subgrants Future agenda items	
December		• Public comment • Open discussion • Board minutes (A) • New employee introductions • Monthly expenditure and revenue report (I) • New service contracts & grants (I) • Annual board workplan for next calendar year (I) • Director's report (I) ○ Director approved agreements, contracts, and subgrants • Future agenda items	



2026 Position Statements and Funding Priorities

Southwest District Health's (SWDH) 2026 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, adopt, and inform 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.

Specific and brief position statements pertaining to issues impacting the public's health are provided on pages 2 to 8.

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Existing Idaho Association of District Boards of Health Resolutions and Position Statements

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.

A position statement articulates SWDH's position for or against a potential policy or funding decision that may be considered by a body of policymakers.

The IADBH resolutions and position statements, in their entirety, can be accessed at:

<https://idahopublichealthdistricts.org/resources/>.

NUMBER	TITLE	CURRENT DATE*
22-02R	Resolution to remove the food establishment license fee in Idaho Code	October 24, 2024
25-01	Resolution Clarifying Idaho Code 39-3801	October 16, 2025
25-01	Position statement Regarding Clinical Services	October 16, 2025

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



SWDH Resolutions and Position Statements

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.

No resolutions or position statements were adopted by the Board of Health in 2025.



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
Supports policies and funding that make healthy living easier and more affordable by: • Ensuring families have access to nutritious foods and practical nutrition education • Expanding opportunities for physical activity across all ages • Providing education that prevents substance misuse and promotes safe relationships • Improving access to affordable, preventive healthcare	Idahoans' lack of consumption of fresh fruits and vegetables coupled with decreased physical activity and increased screen time has led to increasing rates of cardiovascular disease, diabetes, and poor mental health.
Supports continued funding for Nurse Family Partnership® and Parents as Teachers® services, which strengthens families during	Idaho's public health districts' home visiting programs provide trained home visitors, such as nurses and parent educators, to work alongside parents to improve parent-child interaction, self-sufficiency, and prevent child maltreatment. SWDH



critical times of early life development.	consistently has a waiting list for these services.
Supports Medicaid coverage for lower cost mental health service interventions that contribute directly to a reduction in law enforcement and justice system involvement.	In 2025, Medicaid reimbursement for peer support specialists and intensive care services for persons with severe and persistent mental illness have been defunded. This will negatively impact those suffering from substance use disorders and certain mental health conditions and will increase costs to law enforcement and the justice system.
Supports policies that encourage and promote careers in healthcare and behavioral health.	As the baby boomers age, Idaho will face an even more critical healthcare access situation. 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.
Supports policy changes and funding to sustain essential EMS services and strengthen partnerships between SWDH and county EMS—maximizing resources, skills, and impact.	Making EMS an essential service under Idaho law will unlock sustainable funding statewide, ensuring faster, more effective care that meets public expectations, reduces disability and premature death, and lowers healthcare costs. Public health expertise can further improve efficiency by reducing 911 misuse and deploying cost-effective resources for frequent, low-acuity needs.
Supports investments that expand availability and access to health education that fosters wellbeing and improves mental health for Idahoans.	Recently, behavioral health ranked 1st in the results of the 10-county Community Health Needs Assessment conducted in southwest Idaho. Public health professionals are well-positioned to deliver health education to Idahoans of all ages in an aim to reduce mental health conditions and substance misuse.
Supports funding for education that prevents human trafficking and promotes healthy family relationships.	Funding education on human trafficking and healthy family dynamics raises awareness and builds resilient communities that can actively participate in prevention and support efforts. 1 in 3 children can now expect to have an unwelcome sexual experience online before they turn 18 (ParentsTogether, 2023).



FOCUS AREA: GOVERNMENTAL PUBLIC HEALTH

POSITION STATEMENT & FUNDING PRIORITY	JUSTIFICATION
Supports policies and funding that assure access to public health services for all citizens; services that protect and improve the population's health and are tailored to local community needs.	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. Governmental public health works to assure infrastructure (e.g., safe drinking water, safe food, healthy housing, education/information for informed decision-making, maternal & newborn nutrition, and preventative healthcare access, etc.) is in place to prevent disease, disability, and premature death of the population.
Supports maintaining Idaho's reportable disease requirements—and adopting any updates recommended by DHW—to ensure timely monitoring of critical conditions such as infectious diseases, cancers, and threats like rabies.	Maintaining Idaho's reportable disease requirements—and updating them as recommended by the Department of Health and Welfare—is critical for protecting public health. Timely and accurate disease reporting enables: • Early detection and rapid response to outbreaks, preventing widespread illness. • Monitoring of long-term health trends, including cancers and other serious conditions, which informs resource allocation and prevention strategies. • Protection against high-risk threats such as rabies and emerging infectious diseases, reducing disability, premature death, and healthcare costs. Without these requirements, gaps in surveillance could delay interventions, increase healthcare costs, and compromise the safety of Idaho communities.



FOCUS AREA: ENVIRONMENT AND LAND USE

POSITION STATEMENT & FUNDING PRIORITY	JUSTIFICATION
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.	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.
Supports initiatives, policies, and funding decisions to help municipalities make healthier land use, planning, and development decisions.	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.
Supports regular oversight of public recreational water facilities.	Due to a recent change in the law, there is no statewide oversight of public recreational water facilities. Yet, in the prior five years leading up to the policy change, 100% of waterborne disease outbreaks associated with exposure to public recreational water in the six counties served by SWDH were in unregulated facilities. This underscores the value SWDH brings to the local municipalities, businesses, pool operators, and public. An inspection program should focus on the major public health concerns including drowning, physical and chemical injuries, and disease outbreaks.
Support improving access to childcare without compromising health and safety, and reinstating ICCP income qualifications to pre-2025 levels.	Maintaining health and safety standards protects children and reassures parents. These measures help prevent injuries, illness, and neglect, reducing long-term social and healthcare costs. By improving access without compromising safety, Idaho can strengthen family well-being, workforce participation, and community health. Access to affordable, safe childcare is essential for Idaho families and the state's workforce. When childcare is unaffordable, parents are forced to leave jobs or reduce hours, which impacts economic stability and local businesses.



Southwest District Health

Parties

Originating: Southwest District Health	Subgrantee: Advocates Against Family Violence (AAFV)
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Document Type

Subgrant	☐ Amendment
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Summary

Name/Title:	AAFV Programming
Description (long title):	AAFV Towards No Drugs programming
FAIN#:	H79SP083777
Funding Source:	Federal
SWDH Project Code:	41127
Original Effective Date:	10/29/2025
Current Expiration Date:	07/05/2026
Total [Funding Amount or Cost of Service]:	7000
Allowable Indirect Rate:	15%
Match Required:	NO
Match Amount:	
FTE Supported:	N/A
District Funds Budgeted in Current FY:	32566.36
Restrictions:	None
Target Population:	Youth age 10-19
If this is an amendment, briefly describe the change.	

Contacts

Contact Name (Internal & External)	Contact [Agency, Organization, Contractor, Vendor, Partner]	Contact Email or Phone Number
Tara Woodward	SWDH, subgrant monitor	tara.woodward@swdh.id.gov
Tricia Lofton	AAFV, Operations Director, subgrant poc	tricia@aafvhope.org

Applicable Law and/or Agreement

Idaho Statutes or Rules (select up to 3)	39-409, IC	Choose an Item	Choose an Item
Agreement	N/A		

Public Impact

Scope of Work Summary (3-5 bullets)	AAFV will implement Towards No Drugs (TND) program, to help prevent youth use of alcohol and marijuana through increasing protective factors to avoid substance use. Staff will offer the TND program with two youth populations (1) Incarcerated youth, and (2) community-based youth Staff will implement the program with multiple cohorts 2x a week over 6 week periods (as the program is designed)
Summary Public Impact (3-5 bullets)	Anticipate reaching approximately 20-45 youth over a 9- month period These programs will teach youth life skills and other protective factors to reduce the risk of substance use.
Summary of Evidence-based (3-5 bullets)	-Towards No Drugs is an evidence-based program used to prevent and reduce youth substance use, prevent and reduce violence, and other related problematic behaviors. his program is designed to help build protective factors that teach youth to increase self-control, decision making skills, and internal motivation factors related to drug and alcohol use - This program is designed to build protective factors that teach youth to increase self-control, decision making skills, and internal motivational factors related to drug and alcohol use

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date	10/24/2025		10/24/2025	10/24/2025		10/24/2025
Initials	 Charlene Cariou		BS	MA		NZ

** The necessity of legal review will be determined by the Financial Officer, Division Administrator, or Director.*



Southwest District Health

Parties

Originating: Southwest District Health	Subgrantee: Boys and Girls Club of the Western Treasure V
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Document Type

Subgrant	☐ Amendment
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Summary

Name/Title:	Boys and Girls Club Programming
Description (long title):	BGCWTV Positive Action & Smart Moves programming
FAIN#:	H79SP083777
Funding Source:	Federal
SWDH Project Code:	41127
Original Effective Date:	10/30/2025
Current Expiration Date:	06/15/2026
Total [Funding Amount or Cost of Service]:	8500
Allowable Indirect Rate:	15%
Match Required:	NO
Match Amount:	
FTE Supported:	N/A
District Funds Budgeted in Current FY:	32566.36
Restrictions:	None
Target Population:	Youth 10-19
If this is an amendment, briefly describe the change.	

Contacts

Contact Name (Internal & External)	Contact [Agency, Organization, Contractor, Vendor, Partner]	Contact Email or Phone Number
Tara Woodward	SWDH, subgrant monitor	tara.woodward@swdh.id.gov
Dana Castellani	Chief Executive Director of BGCWTV, subg	castellani@bgcwtv.org

Applicable Law and/or Agreement

Idaho Statutes or Rules (select up to 3)	39-409, IC	Choose an Item	Choose an Item
Agreement	N/A		

Public Impact

Scope of Work Summary (3-5 bullets)	- Implement two evidence-based programs (1) Positive Action and (2) SMART Moves to help prevent youth use of alcohol and marijuana through increasing protective factors to avoid substance use - Staff will offer these programs as written at least twice weekly with club members aged 10-14 at their location - Funds provided by SWDH will pay for Boys and Girls Club personnel to be able to support the implementation of these evidence-based programs.
Summary Public Impact (3-5 bullets)	- Anticipate reaching approximately 40-75 youth over a 9- month period - These programs will teach youth life skills and other protective factors to reduce the risk of substance use
Summary of Evidence-based (3-5 bullets)	- Positive Action is an evidence-based program used to prevent and reduce youth substance use, prevent disruptive youth behaviors, and reduce violence. - SMART Moves is a nationally recognized evidence-informed program. The program teaches decision making and life skills, refusal and assertiveness and positive relationship skills. - Both programs help build protective factors that teach youth to increase self-control, problem-solving, and decision-making.

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date	10/22/2025		10/22/2025	10/22/2025		10/22/2025
Initials	 Charlene Cariou		BS	MA		NZ

** The necessity of legal review will be determined by the Financial Officer, Division Administrator, or Director.*



Southwest District Health

Parties

Southwest District Health	Weiser Ambulance District
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Document Type

Subgrant	☒ Amendment
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Summary

Name/Title:	Behavioral Health Partnership for Early Diversion of Adults and Yo
Description (long title):	Community Paramedic Program
FAIN#:	5H89SM089492-03
Funding Source:	Federal
SWDH Project Code:	95332287
Original Effective Date:	10/26/2024
Current Expiration Date:	09/29/2028
Total [Funding Amount or Cost of Service]:	\$189481
Allowable Indirect Rate:	0
Match Required:	YES
Match Amount:	\$39,499
FTE Supported:	1
District Funds Budgeted in Current FY:	\$48181.91
Restrictions:	NA
Target Population:	Residents of Washington County
If this is an amendment, briefly describe the change. Minor changes to SOW, cost revision increase, mileage rate, detailed reporting.	
SharePoint Hyperlink:	https://swddistricthealth.sharepoint.com/:w:/g/EeR43zm6Dm9MkXvT5cSWHhABPGXMWLVAV83ZxjyNM9n5Gg

Contacts

Contact Name (Internal & External)	Contact [Agency, Organization, Contractor, Vendor, Partner]	Contact Email or Phone Number
Wendy Young	Southwest District Health	wendy.young@swdh.id.gov
Alan Foster	Weiser Ambulance District	weiserdirector@gmail.com

Applicable Law and/or Agreement

Idaho Statutes or Rules (select up to 3)	N/A	N/A	N/A
Agreement	N/A		

Public Impact

Scope of Work Summary (3-5 bullets)	• Development of a Community Paramedicine Program to serve patients with behavioral health needs in Washington County. • Divert appropriate populations from law enforcement and other unnecessary higher levels of care through support, resources and referrals. • Build community support through outreach, partnerships and CIT program
Summary Public Impact (3-5 bullets)	• Individuals in Washington County will have access to appropriate behavioral health supports during a crisis and there will be decreased involvement with law enforcement or unnecessary hospital stays when not appropriate for the situation.
Summary of Evidence-based (3-5 bullets)	• Community Paramedicine Supporting Community Needs https://doi.org/10.1155/2024/4079061 • An examination of the emerging field of Community Paramedicine DOI: 10.1186/s12913-023-09537-x

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date	10/07/2025	10/07/2025	10/07/2025	10/07/2025		10/08/2025
Initials	<u>WY</u> WY	<u>MS</u> MS	<u>MS</u> MS	<u>MH</u>		<u>NZ</u> NZ

* The necessity of legal review will be determined by the Financial Officer, Division Administrator, or Director.



Southwest District Health

Parties

City of Nampa	Southwest District Health
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Document Type

Agreement	☐ Amendment
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Summary

Name/Title:	FY26 Opioid Funding
Description (long title):	FY26 SWDH use of Opioid Funding on Behalf of the City of Nampa
FAIN#:	N/A
Funding Source:	Other
SWDH Project Code:	95341060 / 953OSNAMPA
Original Effective Date:	11/03/2025
Current Expiration Date:	09/30/2026
Total [Funding Amount or Cost of Service]:	18457.50
Allowable Indirect Rate:	24.95%
Match Required:	NO
Match Amount:	0
FTE Supported:	1
District Funds Budgeted in Current FY:	0
Restrictions:	None
Target Population:	Nampa residents 18-24 years old & family with SUD &/or mental ill
If this is an amendment, briefly describe the change.	

Contacts

Contact Name (Internal & External)	Contact [Agency, Organization, Contractor, Vendor, Partner]	Contact Email or Phone Number
Michelle Schildhauer	Southwest District Health	michelle.schildhauer@swdh.id.gov
Chris Boaz	City of Nampa	boazc@cityofnampa.us

Applicable Law and/or Agreement

Idaho Statutes or Rules (select up to 3)	Choose an Item	Choose an Item	Choose an Item
Agreement	Choose an item		

Public Impact

Scope of Work Summary (3-5 bullets)	Provide initial medical wellness exams and sub sequential counseling appointments. NOTE: applicable law and/or agreement reference (not yet available in the drop down) - 57-825 and Exhibit A of the Opioid Settlement
Summary Public Impact (3-5 bullets)	Success will be defined by: 1. The number of individuals whose access to mental health care has improved 2. The number that participates in counseling that would otherwise not have access to mental health services. 3. The number of individuals who were connected to additional services that they did not know about or did not have access to.
Summary of Evidence-based (3-5 bullets)	1. United Way Treasure Valley, ALICE Report 2023 2. Healthline www.healthline.com 3. KFF Independent Source for health policy research State Health Facts 2024 www.kff.org 4. Lopes, L., Krizinger, A., Sparks, G. Stokes, M., and Brodie, M. KFF/CNN Mental Health in America Survey, Oct 2022. www.kff.org 5. Ibid, KFF 2020 6. Idaho Substance Misuse Prevention Needs Assessment 2024. Idaho Office of Drug Policy

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date		10/22/2025	10/22/2025	10/22/2025		10/22/2025
Initials		MS MS	EAK EAK	MH		NZ NZ

** The necessity of legal review will be determined by the Financial Officer, Division Administrator, or Director.*



Southwest District Health

Parties

Southwest District Health	United Way
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Document Type

Agreement	☐ Amendment
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Summary

Name/Title:	WICHC Funding Agreement
Description (long title):	Western Idaho Community Health Collaborative
FAIN#:	N/A
Funding Source:	Non-Profit
SWDH Project Code:	95346020
Original Effective Date:	11/10/2025
Current Expiration Date:	06/30/2026
Total [Funding Amount or Cost of Service]:	10000
Allowable Indirect Rate:	33.84%
Match Required:	NO
Match Amount:	0
FTE Supported:	2.0
District Funds Budgeted in Current FY:	254.17
Restrictions:	Limited to infrastructure resources.
Target Population:	Individuals living in Public Health Districts 3 and 4.
If this is an amendment, briefly describe the change. N/A	

Contacts

Contact Name (Internal & External)	Contact [Agency, Organization, Contractor, Vendor, Partner]	Contact Email or Phone Number
Megan M. Remaley	United Way	mremaley@unitedwaytv.org / 208.807.2941
Berenice Medina	SWDH	Berenice.Medina@swdh.id.gov / 208-455-5397

Applicable Law and/or Agreement

Idaho Statutes or Rules (select up to 3)	N/A	N/A	N/A
Agreement	N/A		

Public Impact

Scope of Work Summary (3-5 bullets)	- Goal: Improve health outcomes in the following Idaho counties: Ada, Adams, Boise, Canyon, Elmore, Gem, Owyhee, Payette, Valley, and Washington Counties. - Manage the work of the Western Idaho Community Health Collaborative and its three priorities: Housing, Behavioral Health, and Access to Care. - Ensures that the work of the collaborative drives population health in the Greater Treasure Valley (counties listed above).
Summary Public Impact (3-5 bullets)	- Drives community investments in the areas of Housing, Behavioral Health, and Access to Care. - Augments the quality of life of our communities by aiming for whole person health. - Promotes collaboration among public and private partners in the Greater Treasure Valley.
Summary of Evidence-based (3-5 bullets)	- Collective Impact Centered: This framework is a nationally recognized framework for collaboration and co-creation. - Co-leads the work of our Community Health Needs Assessment and the Community Health Implementation Plan (both initiatives are designed to promote health and well-being). - Emphasizes the use of local data to drive programming, investments, and collaborations meaning the work is hyper-local and focused on the uniqueness of each community.

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date	11/06/2025	11/07/2025	11/07/2025	11/07/2025		11/07/2025
Initials	 BM		BS	MA		NZ

** The necessity of legal review will be determined by the Financial Officer, Division Administrator, or Director.*