



Board of Health Meeting
Tuesday, September 29, 2026
13307 Miami Lane, Caldwell, ID 83607

Public comments specific to an agenda item for the September 29, 2026 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, September 28, 2026. 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	
9:03		Roll Call	Chairman Kelly Aberasturi
9:05	A	Call for changes to agenda; vote to approve agenda	Chairman Kelly Aberasturi
9:07		In-person public comment	
9:10	I	Introduction of new employees	Division Administrators
9:15	I	Approval of August 25, 2026 Board of Health meeting minutes	Chairman Aberasturi
9:17	I	August 2026 Monthly Expenditure and Revenue Report	Michele Hanrahan
9:30	I	Contract Services and Grant Applications	Don Lee
9:35	A	WIC Lease Agreement Addendum Review and Approval	Beth Kriete
9:40	A	Fiscal Year 2025 (FY25) Audit Overview	Jordan Zwygart, Zwygart John & Associates, PLLC
10:00		Break	
10:15	I	Home Visiting Programs Overview	Patty Kennings, Kristen Koprowski
10:45	I	Nutrition Across the Lifespan	Daniel Adams, Denice Ahlstrom
11:10	A	Director's Contract – Final Review and Approval	Chairman Kelly Aberasturi
11:15	G	Public Health Symposium Planning	Nikki Zogg
11:30	A	Resolution: Lawful Presence (D4)	Nikki Zogg
11:40	I	Director's Report	
		• Director approved agreements, contracts, and subgrants • Tort claim • IAC Public Health Workgroup Meeting Summary • IADBH Meeting – October 22, 2026 (virtual) and proxy forms	
11:50	I	Future agenda items	
11:55		Executive Session pursuant to Idaho Code 74-206(b)	
11:57	A	Action taken pursuant to Executive Session	
12:00	I	Adjourn	

NEXT MEETING: Tuesday, October 27, 2026



BOARD OF HEALTH MEETING MINUTES
Tuesday, August 25, 2026

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 – not present
Viki Purdy, Commissioner, Adams County – not present
John Tribble, MD, Physician Representative – present
Kirk Wille, Commissioner, Gem County – present

STAFF MEMBERS:

In person: Nikki Zogg, Katrina Harshman, Ben Shatto, Don Lee, Michele Hanrahan, Michelle Schildhauer

Virtual: Colton Osborne

GUESTS:

CALL THE MEETING TO ORDER

Vice Chairman Zach Brooks called the meeting to order at 9:01 a.m.

ROLL CALL

Chairman Aberasturi – not present; Dr. John Tribble – present; Commissioner Purdy – not present;
Commissioner Harberd – present; Vice Chairman Brooks – present; Commissioner Riebe – present;
Commissioner Wille – present

REQUEST FOR ADDITIONAL AGENDA ITEMS AND APPROVAL OF AGENDA

Vice Chairman Brooks 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 Harberd seconded the motion. All in favor; motion passes.

PUBLIC COMMENT

No public comment was provided in person or through the online submission mechanism.

INTRODUCTION OF NEW EMPLOYEES

New employees were introduced.

APPROVAL OF JULY 28, 2026 BOARD OF HEALTH MEETING MINUTES

Board members reviewed meeting minutes from the July 28, 2026 Board of Health meeting.

MOTION: Commissioner Riebe made a motion to approve the July 28, 2026 Board of Health meeting minutes as presented. Commissioner Wille seconded the motion. All in favor; motion carries.

JULY 2026 MONTHLY EXPENDITURE AND REVENUE REPORT

Michele Hanrahan, SWDH Financial Officer, shared the July 2026 monthly expenditure and revenue report. As of the end of July, we are 8.33% of the way through the fiscal year. A column showing the committed and restricted funds has been added to the report. Michele explained that while we are 8.33% of the way through the fiscal year we are at 14% of planned revenue.

Expenditures are just slightly higher than the target of 8.33%. The expenditures are lower than revenues due to the restricted and committed funds built into the FY27 budget that are front loaded at the beginning of the fiscal year.

A question was asked about the community collaborations listed on the board restricted funding sheet. Funds set aside in the community collaborations are intended for use to support the Community Health Action Teams across the six counties by awarding small grants to support community health initiatives such as the Owyhee County Outdoor Fitness Court.

COMMIT FISCAL YEAR 2026 CARRYOVER FUNDS

Don Lee, SWDH Chief Operating Officer, asked for approval of fiscal year 2026 carryover funds as suggested by the Board of Health budget workgroup that met August 7, 2026. The carryover funds represent monies budgeted for last fiscal year but not expended. Don explained that direct federal grant revenue came in during fiscal year 2026 rather than fiscal year 2025. He asked that the funds be allocated to expanding the SWDH website redesign, marketing and public health education campaigns, vector surveillance, funding of the 27th pay period, and facility improvements consistent with recommendations from the recently completed Clearwater Financial Master Facilities Plan.

Board members discussed concerns about expending funds not included in the budget and noted the difference in processes at the county and the health district. Following discussion, Board members made no decisions on the carryover fund allocation and directed Don and Michele to leave the funds in the operating investment account unallocated until the budget revision. Michele will put a line on the committed funds showing these reserve funds for fiscal year 2026. These funds can be considered as part of a mid-year budget revision.

CONTRACT SERVICES AND GRANT APPLICATIONS

Michele shared new contract services or grant applications that are currently in process. She also shared the grant opportunity highlights document that Diane Demarest, SWDH grant writer, has been sharing with counties on a monthly basis.

PUBLIC DRINKING WATER SYSTEMS

Chris Ababon, Environmental Health Specialist, Senior, presented information on public drinking water systems. A public water system is one with 15 or more connections *OR* 25 or more people accessing the system for at least 60 days. Chris shared examples of public water systems including transient, non-transient non-community, and community. Water systems that do not meet the definition of a public

water system are not required to test drinking water quality under Idaho Administrative Procedure Act 58.01.08. Public water systems are required to have a water system facilities inspection every five years to help identify deficiencies and help prevent contamination events before they happen.

2026 COMMUNITY HEALTH NEEDS ASSESSMENT RESULTS

Charlene Cariou, SWDH Community Health Program Manager, shared results from the recently completed 2026 Community Health Needs Assessment (CHNA). The CHNA is an effort by the Western Idaho Community Health Collaborative (WICHHC), a group of partners that meet routinely to collectively improve health across the ten-county region of Southwest and Central Idaho. Approximately, 45% of the state's population resides in this area. The CHNA effort was completed with funding and representation from United Way of Treasure Valley, Saint Alphonsus, St. Luke's, SWDH, Central District Health, Weiser Memorial, and Terry Reilly. WICHHC was formed in 2019 to lower health care costs and improve health outcomes.

The CHNA received about 8,000 survey responses and included about 20 focus groups from all 10 counties. Respondents ranked mental health as the #1 health issue for their communities.

BEHAVIORAL HEALTH AND COUNSELING

Ashley Hammond, SWDH Behavioral Health Clinician, shared an overview of the behavioral health and counseling services available at SWDH. Based on the data provided in the CHNA, the counties in District 3 were identified as areas with a shortage of behavioral health providers. With that public health need identified and board support, the clinic made preparations to offer behavioral health and counseling service. At SWDH, Ashley primarily serves adults and uses a therapeutic approach incorporating the dimensions of the wellness framework and allowing for coordination with or connection to medical providers within SWDH for whole person care.

Ashley receives referrals from clinic providers and SWDH programs. The services provided through behavioral health and counseling fill gaps in services for the community by offering a sliding scale. Expansion opportunities for behavioral health services at SWDH include pediatric mental health services, increased specialization, bilingual care, outer clinic expansion, and consideration of client preference for male providers.

2027 SOUTHWEST DISTRICT HEALTH BOARD OF HEALTH PRIORITIES

At the July Board of Health meeting, Nikki shared a draft policy priorities document and asked for board member input. The document shows calls to action for schools, families, business owners, policy makers, medical providers, and government entities to help address community priority needs across the district. Board members supported further development and review of the priorities document.

Nikki presented the revised document that is intended to replace the policy statements with more intention around how the health district and the community as a whole can engage around the priorities. Each priority area includes an explanation of why the priority matters, key takeaway, and calls to action.

MOTION: Commissioner Riebe made a motion to approve the 2027 Southwest District Health Board of Health Priorities document as presented. Commissioner Harberd seconded the motion. All in favor; motion carries.

KRATOM RESOLUTION REVIEW AND VOTE

As requested by board members at the July meeting, Nikki edited the draft kratom resolution to seek a total ban on kratom rather than just an age restriction. Also, Mike Kane, SWDH legal counsel, reviewed the resolution as Board members requested. Nikki shared the amended document and asked board members to review and vote on whether to support the resolution.

Commissioner Wille suggested changing the second to the last paragraph to clarify the classification by moving the parentheses to ensure the proper word is clarified. As worded, the clarification appears to apply to the word Alabama, rather than to the word drug.

MOTION: Commissioner Wille made a motion to approve the draft kratom resolution as amended. Commissioner Riebe seconded. All in favor; motion carries.

DIRECTOR'S CONTRACT

Jody Waddy, SWDH Human Resources Manager, sent the director's contract out to board members for review in advance of the meeting. Jody received no feedback requesting changes. Board members suggested several changes to the contract to allow better alignment with the annual budget process and employee compensation reviews. Changes suggested include: 1.) aligning the term of employment to the fiscal year, 2.) change the date of compensation review to February, and 3.) change the effective date of the contract to July 1, 2026 to allow new pay rate to be in effect for backpay purposes.

MOTION: Commissioner Wille made a motion to approve the district director's contract with three changes to include 1.) align the term of employment with the fiscal year, 2.) change the date of compensation review to February, and 3.) change the effective date of the contract to July 1, 2026. Commissioner Riebe seconded the motion. All in favor; motion carries.

Board members asked that the contract be updated and brought back to the board at the September Board of Health meeting. Board members prefer to see the document with track changes accepted so they have a clean, clear document.

DIRECTOR'S REPORT

Director approved agreements, contracts, and subgrants

Summary pages for grants, contracts, agreements, and subgrants are included in the meeting packet.

Idaho Association of District Boards of Health Annual Meeting

The 2026 annual Idaho Association of District Boards of Health (IADBH) meeting will be hosted by District 2 and held virtually on October 22, 2026 from 10am to 5pm. Nikki asked board members their preference for joining from their individual workspaces or coming to SWDH to log on and participate together as a board. Agenda items include risk management, board education by Seth Grigg, and the business meeting action items.

Emmett Office

A private business reached out to inquire about purchasing the Emmett building.

Pending appeal of subsurface sewage disposal decision

A property owner is appealing a subsurface sewage disposal situation. There has been no citation or denial.

Legal counsel update

Central District Health and Southwest District Health have selected CHC Legal, a small law firm with three attorneys, to provide representation for the health districts after Mike Kane's retirement near the end of October 2026. Mike will coordinate with CHC Legal staff to transition over any active projects.

Idaho Association of Counties (IAC) public health workgroup update

The workgroup attendees had some good conversation around how other states structure their health departments. Levy options were not brought up. Also, during the workgroup, IAC expressed continued commitment to support removal of food establishment inspection fees from statute.

The workgroup will reconvene at the September IAC meeting in Boise.

Rural Health Transformation Program funding

The RHTG grant opportunities have now all been shared out. Nikki has not reviewed all of the requests for proposal (RFPs) but has concern that some of the counties will struggle with the application process. She also is unsure whether all of the agencies have federal grant submission accounts, which is an eligibility requirement. The timelines for the grant award applications are tight at about three weeks. If board members have an entity wanting to apply, Nikki asked them to reach out to see if SWDH can offer provide support through the application process.

FUTURE AGENDA ITEMS

No future agenda items were suggested.

EXECUTIVE SESSION PURSUANT TO IDAHO CODE 74-206(b)

No executive session held this meeting.

ACTION TAKEN PURSUANT TO EXECUTIVE SESSION

No executive session was held.

Adjournment

There being no further business, the meeting adjourned at 12:11 p.m.

Respectfully submitted:

Approved as written:

Nikole Zogg
Secretary to the Board

Zach Brooks
Vice-Chairman

Date: September 29, 2026



SOUTHWEST DISTRICT HEALTH REVENUES & EXPENDITURE REPORT FOR FY2027

August-26

Modified Accrual Basis

Target **16.67%**

Fund Balances		
	FY Beginning	August 2026 Ending
General Operating Fund	\$1,647,008	\$1,304,917
LGIP Operating	\$5,938,205	\$5,984,563
LGIP Vehicle Replacement	\$118,520	\$119,279
LGIP Capital	\$1,299,174	\$1,299,174
Total	\$9,002,908	\$8,707,934

Income Statement Information		
	YTD	Month
Net Revenue:	\$2,574,619	\$1,848,656
Expenditures:	(\$2,586,028)	(\$1,172,885)
Net Income:	(\$11,409)	\$675,771

Revenue											
	County Contributions	Fees	Subgrant/Grant/Contract Revenue	Sale of Assets	Interest	Other	Monthly Total	YTD	Restricted / Committed Funds	Total Budget	Percent Budget to Actual
Administration & BoH	-\$42,930.87				-\$23,997.44		-\$66,928.31	-\$339,140.43	-\$506,887.00	-\$3,974,462.00	21.29%
District Operations Div		-\$115.89	-\$33,887.38			-\$26.00	-\$34,029.27	-\$34,029.27		-\$441,787.00	
FCS											
Medical Clinic		-\$16,544.36					-\$16,544.36	-\$37,910.78		-\$226,200.00	16.76%
Immunizations		-\$7,772.32					-\$7,772.32	-\$14,220.76		-\$175,000.00	8.13%
HIV/STI/DIS Prevention			-\$8,855.69				-\$8,855.69	-\$15,415.40		-\$118,750.00	12.98%
Women's Health Check		-\$70.93	-\$1,206.13				-\$1,277.06	-\$3,035.71		-\$22,560.00	13.46%
Oral Health		-\$372.82	-\$2,598.95				-\$2,971.77	-\$3,173.47		-\$56,004.00	5.67%
Nurse Family Partnership		-\$9,604.80	-\$64,339.74				-\$73,944.54	-\$106,360.74	-\$17,500.00	-\$567,854.00	21.81%
Parents as Teachers		-\$18,009.00	-\$48,058.53				-\$66,067.53	-\$83,356.17	-\$17,500.00	-\$504,462.00	19.99%
Behavioral Health Admin		-\$4,215.23					-\$4,215.23	-\$7,675.59	-\$247,422.00	-\$328,422.00	77.67%
WIC			-\$103,538.58				-\$103,538.58	-\$198,331.46		-\$1,362,024.00	14.56%
Adult Crisis Center						-\$250,000.00	-\$250,000.00	-\$250,000.00	-\$139,527.00	-\$1,657,335.00	23.50%
Youth Crisis Center						-\$250,000.00	-\$250,000.00	-\$250,000.00	-\$395,672.00	-\$1,895,672.00	34.06%
Pre-Prosecution Diversion							\$0.00	-\$58,976.55		-\$358,892.00	16.43%
Other FCS			-\$31,950.28			-\$302,743.71	-\$334,693.99	-\$340,693.99		-\$230,990.00	147.49%
ECHS											
Fit & Fall Proof			-\$2,785.25				-\$2,785.25	-\$6,935.43	-\$38,825.00	-\$85,000.00	53.84%
Prescription Drug Overdose			-\$3,030.47				-\$3,030.47	-\$13,583.86		-\$100,000.00	13.58%
Suicide Prevention			-\$4,711.81				-\$4,711.81	-\$4,711.81		-\$45,000.00	10.47%
Millennium-Tobacco			-\$360,000.00				-\$360,000.00	-\$360,000.00	-\$15,660.00	-\$375,660.00	100.00%
Partnership for Success/SAMSHA			-\$30,823.74				-\$30,823.74	-\$30,823.74		-\$392,969.00	7.84%
Food Programs		-\$4,605.00					-\$4,605.00	-\$12,085.00		-\$337,900.00	3.58%
Child Care Inspections		-\$2,700.00	-\$19,463.40				-\$22,163.40	-\$38,539.50		-\$150,534.00	25.60%
Land Programs		-\$126,348.00	-\$10,035.78				-\$136,383.78	-\$268,269.42		-\$1,333,193.00	20.12%
Epi Investigations			-\$19,371.84				-\$19,371.84	-\$21,636.51		-\$221,261.00	9.78%
Public Health Preparedness			-\$28,815.42				-\$28,815.42	-\$59,541.85		-\$552,000.00	10.79%
WICHC							\$0.00	\$0.00	-\$35,000.00	-\$85,000.00	41.18%
Other ECHS			-\$13,626.56			-\$1,500.00	-\$15,126.56	-\$16,171.33	-\$76,172.00	-\$151,480.00	60.96%
Monthly Revenue	-\$42,930.87	-\$190,358.35	-\$787,099.55	\$0.00	-\$23,997.44	-\$804,269.71	-\$1,848,655.92				
Year-to-Date Revenue								-\$2,574,618.77	-\$1,490,165.00	-\$15,750,411.00	25.81%



SOUTHWEST DISTRICT HEALTH

REVENUES & EXPENDITURE REPORT FOR FY2027

Modified Accrual Basis

August-26

Target 16.67%

EXPENDITURES							Restricted / Committed Funds	Total Budget	Percent Budget to Actual
	Personnel	Operating	Capital	T/B	Monthly Total	YTD			
Administration & BoH	\$36,915.70	\$55,034.00			\$91,949.70	\$178,272.76		\$1,085,190	16.43%
District Operations Div (and blanks-unidentified programs)	\$120,330.16	\$64,829.97	\$2,641.05		\$187,801.18	\$418,369.87		\$2,545,273	16.44%
FCS									
Medical Clinic	\$46,347.03	\$9,322.79			\$55,669.82	\$133,104.16		\$856,170	15.55%
Immunizations	\$10,527.72	\$11,438.22			\$21,965.94	\$41,007.16		\$327,328	12.53%
HIV/STI/DIS Prevention	\$3,703.74	\$1,559.85			\$5,263.59	\$12,206.41		\$58,862	20.74%
Women's Health Check	\$388.17	\$304.78			\$692.95	\$1,682.53		\$21,488	7.83%
Oral Health	\$6,718.59	\$807.18			\$7,525.77	\$17,861.70		\$115,374	15.48%
Nurse Family Partnership	\$32,399.97	\$3,962.68			\$36,362.65	\$110,813.42		\$591,638	18.73%
Parents as Teachers	\$32,511.90	\$3,730.48			\$36,242.38	\$81,971.07		\$493,748	16.60%
Behavioral Health Admin	\$19,610.27	\$156.80			\$19,767.07	\$49,670.00		\$322,836	15.39%
WIC	\$100,145.60	\$15,904.11			\$116,049.71	\$259,840.81		\$1,603,269	16.21%
Adult Crisis Center	\$1,266.48	\$121,208.66			\$122,475.14	\$260,351.51		\$1,647,350	15.80%
Youth Crisis Center		\$133,057.21			\$133,057.21	\$274,764.37		\$1,837,772	14.95%
Pre-Prosecution Diversion	\$12,676.14	\$1,830.79			\$14,506.93	\$32,752.91		\$295,504	11.08%
Other FCS	\$17,560.65	\$3,292.30		\$9,876.38	\$30,729.33	\$95,393.97		\$318,110	29.99%
ECHS									
Fit & Fall Proof	\$6,687.85	\$404.21			\$7,092.06	\$17,041.40		\$106,519	16.00%
Prescription Drug Overdose	\$4,602.48	\$988.80			\$5,591.28	\$13,949.61		\$23,531	59.28%
Suicide Prevention	\$3,050.73	\$38.70			\$3,089.43	\$6,672.12		\$74,916	8.91%
Millennium-Tobacco	\$16,502.56	\$2,119.07			\$18,621.63	\$39,931.54		\$287,511	13.89%
Partnership for Success	\$9,829.21	\$1,533.56		\$1,583.68	\$12,946.45	\$28,335.53		\$357,245	7.93%
Food Programs	\$51,456.20	\$10,746.84			\$62,203.04	\$133,042.05		\$694,210	19.16%
Child Care Inspections	\$10,671.74	\$1,501.54			\$12,173.28	\$26,973.36		\$179,083	15.06%
Land Programs	\$72,709.45	\$14,602.64			\$87,312.09	\$185,048.62		\$1,046,295	17.69%
Epi Investigations	\$20,784.52	\$2,151.60			\$22,936.12	\$48,753.57		\$209,007	23.33%
Public Health Preparedness	\$20,691.53	\$11,458.73	\$6,415.84		\$38,566.10	\$64,885.94		\$344,535	18.83%
WICH	\$3,166.29	\$10.50			\$3,176.79	\$9,273.17		\$43,693	21.22%
Other ECHS	\$15,074.34	\$4,042.71			\$19,117.05	\$44,058.66		\$263,954	16.69%
Monthly Expenditures	\$676,329.02	\$476,038.72	\$9,056.89	\$11,460.06	\$1,172,884.69				
Year-to-Date Expenditures								\$15,750,411.00	16.42%



As of: August 31, 2026

Summary of Restricted and Committed Funds - FY 2027

Restricted Funds - Cash on hand from third party restricted by contract, grant, or donation terms

Note: Restricted fund balances carry from year to year until expended or grant ends

Committed Funds - Cash on hand committed by the Board of Health for a specific purpose

Fund Balances as of last prior month reported

	Restricted Funds	Committed Funds
Fund 290000, 290001, 290002		
Citizen's Review Panel	\$19,026	
OPIOID Settlement	\$1,381,436	
Alzheimer HBI	\$34,928	
Parents As Teachers	\$34,858	
NFP	\$35,289	
Tobacco Cessation - MF	\$382,234	
Social Services Block Grant (SSBG)	\$54,974	
SSBG -Ongoing & MHBG-Addtl (BC3687-01)	\$1	
Mental Health Block Grant (MHBG)	\$0	
Youth Crisis-Other-City Contributions	\$0	
IDJC - YROC	\$66,945	
IDJC - Crisis Center	\$0	
IDJC - Magellen & Donations	\$317,450	
Adult Crisis	\$128,504	
MRC	\$5,747	
WICHC	\$39,536	
County Offset FY27 and FY28		\$201,163
Replacement of Expiring Lease Vehicles		\$136,191
Employee Development & Engagement		\$37,866
County Collaborations		\$70,000
Sale of Land		\$284,684
FY26 CF for FY27 Budget Revision		\$513,544
27th Pay Period		\$337,600
Facility Improvements		\$1,095,557
	\$2,500,928	\$2,676,606

Total Restricted/Committed: **\$5,177,534**

Total Operating Cash(as of end of prior month)	\$7,289,480
3 months(Expenses/12 - Contract Revenue /12) *3	\$ (1,900,000)
Restricted/Committed	\$ (5,177,534)
Cash requiring additional commitment	<u>\$ 211,946</u>



CONTRACT SERVICES AND GRANT APPLICATIONS

Updated 9/15/2026

Due Date	Program Applying	Grant Opp	Funder	Amount Req.	Duration	Purpose	Status
9/13/2026	DO - Don	Idaho Rural Health Transformation Grant - Healthcare Infrastructure Support (HIS) - SWDH Building Operations	ID Health & Welfare	\$1,779,700	1 year	SWDH Caldwell roof, fleet vehicles, IT, HR upgrades, prof development, financial software, solar project	Submitted
9/13/2026	DO - Nikki	Idaho Rural Health Transformation Grant - HIS-Community Mobile Health Program	ID Health & Welfare	\$461,680	2 years	vehical and equipment	Submitted
9/18/2026	Behavior Health Michelle S, Beth	Idaho Rural Health Transformation-Substance Use Prevention Grant	ID Health & Welfare	\$200,000	5 years	Deliver Parenting with Love & Logic to rural communities	In Process
9/18/2026	Behavioral Health	Idaho Rural Health Transformation -Behavioral Health Prevention Programs	ID Health & Welfare	\$200,000	5 years	Add a second licensed counselor to SWDH to serve rural clients in-person and virtually	In Process



ADDENDUM TO PREMISES RENTAL AND USE AGREEMENT

This Addendum is made on September 25, 2026, by and between the **City of Nampa** (“Owner”) and **Southwest District Health** (“Renter”), and is incorporated into and made a part of that certain Premises Rental and Use Agreement dated **December 17 2024**, (the “Original Agreement”), relating to the rental of space at the Idaho Hispanic Community Center (“IH2C”).

RECITALS

WHEREAS, the parties entered into the Original Agreement for the use of Room 201

WHEREAS, the parties desire to amend the Original Agreement to change the rental dates to the 2026-2027 season and the total rental fee accordingly;

NOW, THEREFORE, in consideration of the mutual promises and covenants contained herein, the parties agree as follows:

1. **TERM.** Landlord leases to Tenant and Tenant leases from Landlord the above-described premises for a term beginning on October 1, 2026 and expiring on September 30, 2027.
2. **RENT.** The total rent for the term hereof is the sum of One Thousand Five Hundred Dollars (\$1,500) per month payable on the 1 st day of each month of the term. All such payments shall be made on or before the due date and without demand to Landlord at: City of Nampa, 4113rd Street South, Nampa, Idaho 83651.
3. **All Other Terms Remain in Effect**
Except as expressly modified by this Addendum, all other terms, conditions, covenants, and agreements contained in the Original Agreement, including all exhibits, shall remain in full force and effect and are hereby ratified and confirmed by the parties.
4. **Governing Law**
This Addendum shall be governed by the laws of the State of Idaho, consistent with the Original Agreement.

IN WITNESS WHEREOF, the parties have executed this Addendum as of the date first above written.

OWNER:

City of Nampa

Clay Long

Date: _____

RENTER:

Southwest District Health

Kelly Aberasturi

Date: _____



ZWYGART JOHN

CERTIFIED PUBLIC ACCOUNTANTS

Zwygart John & Associates CPAs, PLLC

16130 North Merchant Way, Suite 120 ♦ Nampa, Idaho 83687

Phone: 208-459-4649 ♦ FAX: 208-229-0404

Summary

Purpose of Audit Report

We have audited the accompanying cash basis financial statements of the governmental activities of Southwest District Health (III) (District) for the fiscal year ended June 30, 2025, in accordance with auditing standards generally accepted in the United States of America. The purpose of our audit is to determine whether the District's financial statements are materially accurate and reliable, and that it complied with laws and regulations affecting fiscal operations. Please see the Independent Auditors Report on page 1 of the audit for more information.

Conclusion

We concluded that the District's financial statements are materially accurate and reliable, and fiscal operations materially comply with related laws and regulations. As a result, we issued an unmodified opinion on the District's financial statements. Please see the Independent Auditors Report on page 1 of the audit for more information.

Federal Singe Audit

We audited the WIC Program. There were no material or significant deficiencies found in either program during the year.

Financial Summary

As of June 30, 2025, your ending cash balance was \$8,919,200. This was a \$525,780 decrease from 2023.

Overall revenue in 2025 was \$14,802,457. This was a \$1,001,446 increase from 2024. Most of this was due to a increase in Federal and State Grants.

Expenditures were \$15,328,237 for 2025. This was an increase of \$2,007,260. This was due to a large increase in Family Health Services of \$2,273,549.

Revenue came in \$1,746,506 under budget for the year, mainly due to Contracts not being as much as budgeted. Expenditures were \$464,136 underbudget, due to be under budget from personnel costs.

Findings and Recommendations

Based on the audit procedures performed we did identify an item that were reported as findings in this report.

We noted that the State LGIP account was not being reconciled monthly. This caused some interest income to not be recorded during the year. We would recommend that the LGIP account is reconciled monthly to prevent this issue in the future.

Management's View

The District has reviewed the report and is in general agreement with the contents.

Other Issues

We discussed other issues which, if addressed, would improve internal control, compliance, and efficiency.

This report is intended solely for the information and use of the State of Idaho, the Southwest District Health (III), the District's Board of Health and is not intended to be used by anyone other than these specified parties.

We appreciate the cooperation and assistance of Director Dr. Nikole Zogg and her staff.

Zwygart John & Associates, CPAs PLLC

SOUTHWEST DISTRICT HEALTH

Report on Audited
Basic Cash Basis
Financial Statements
and
Supplemental Information

For the Years Ended June 30, 2025 and 2024

Summary

Purpose of Audit Report

We have audited the accompanying cash basis financial statements of the governmental activities of Southwest District Health (III) (District) for the fiscal year ended June 30, 2025, in accordance with auditing standards generally accepted in the United States of America. The purpose of our audit is to determine whether the District's financial statements are materially accurate and reliable, and that it complied with laws and regulations affecting fiscal operations. Please see the Independent Auditors Report on page 1 of the audit for more information.

Conclusion

We concluded that the District's financial statements are materially accurate and reliable, and fiscal operations materially comply with related laws and regulations. As a result, we issued an unmodified opinion on the District's financial statements. Please see the Independent Auditors Report on page 1 of the audit for more information.

Findings and Recommendations

Based on the audit procedures performed we did identify an item that were reported as findings in this report.

Management should make sure that the state investment pool is reconciled monthly against the trial balance to make sure that all transactions are being recorded each month.

Management's View

The District has reviewed the report and is in general agreement with the contents.

Other Issues

We discussed other issues which, if addressed, would improve internal control, compliance, and efficiency.

This report is intended solely for the information and use of the State of Idaho, the Southwest District Health (III), the District's Board of Health and is not intended to be used by anyone other than these specified parties.

We appreciate the cooperation and assistance of Director Dr. Nikole Zogg and her staff.

Zwygart John & Associates, CPAs, PLLC

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ZWYGART JOHN

CERTIFIED PUBLIC ACCOUNTANTS

Zwygart John & Associates CPAs, PLLC

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Independent Auditor's Report

Director, Board of Health
Southwest District Health (III)
13307 Miami Lane
Caldwell, Idaho 83607

Opinions

We have audited the cash basis financial statements of the governmental activities and the major fund information of Southwest District Health (III) (District), as of and for the years ended June 30, 2025 and 2024, and the related notes to the financial statements which collectively comprise the District's basic financial statements as listed in the table of contents.

In our opinion, the accompanying financial statements present fairly, in all material respects, the respective cash basis financial position of the governmental activities and the major fund information of Southwest District Health (III) as of June 30, 2025 and 2024, and the respective changes in financial position-cash basis and, where applicable, cash flows, thereof for the year then ended in accordance with the cash basis of accounting described in Note 2.

Basis for Opinions

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS) and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the District and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinions.

Emphasis of Matter — Basis of Accounting

We draw attention to Note 2 of the financial statements, which describes the basis of accounting. The financial statements are prepared on the cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our opinions are not modified with respect to this matter.

Responsibilities of Management for the Financial Statements

Southwest District Health (III)'s management is responsible for the preparation and fair presentation of the financial statements in accordance with the cash basis of accounting described in Note 2, and for determining that the cash basis of accounting is an acceptable basis for the preparation of the financial statements in the circumstances. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinions. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS and *Governmental Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS and *Governmental Auditing Standards*, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the District's internal control. Accordingly, no such opinion is expressed.⁶
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the District's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control–related matters that we identified during the audit.

Supplementary Information

Our audit was conducted for the purpose of forming opinions on the financial statements that collectively comprise the District's basic financial statements. The cash basis budgetary to actual schedule and schedule of expenditures of federal awards, as required by Title 2 U.S. Code of Federal Regulations, Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards are presented for purposes of additional analysis and are not a required part of the basic financial statements.

The cash basis budgetary to actual schedule and schedule of expenditures of federal awards, is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. Such information has been subjected to the auditing procedures applied in the audit of the basic financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the cash basis budgetary to actual schedule and schedule of expenditures of federal awards, is fairly stated, in all material respects, in relation to the basic financial statements as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with Government Auditing Standards, we have also issued our report dated September 23, 2026 on our consideration of Southwest District Health (III)'s internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with Government Auditing Standards in considering the District's internal control over financial reporting and compliance.

Zwygart John & Associates, CPAs PLLC

Nampa, Idaho

September 23, 2026

State of Idaho
Southwest District Health (III)
Statement of Net Position - Cash Basis
As of June 30, 2025 and 2024

	June 30, 2024 Governmental Activities	June 30, 2025 Governmental Activities
Assets		
Cash and Cash Equivalents	\$ 9,444,980	\$ 8,919,200
Total Assets	<u>9,444,980</u>	<u>8,919,200</u>
Net Position		
Restricted	3,567,367	2,006,121
Unrestricted	5,877,613	6,913,079
Total Net Position	<u>\$ 9,444,980</u>	<u>\$ 8,919,200</u>

The accompanying notes are an integral
part of the financial statements

State of Idaho
Southwest District Health (III)
Statement of Activities - Cash Basis

As of June 30, 2024

		Program Receipts		Net (Disbursements) Receipts and Changes in Cash Balance
	Disbursements	Charges for Services	Operating Grants and Contributions	Governmental Activities
Primary Government:				
Governmental Activities:				
Administration	\$ 1,022,132	\$ 501,617	\$ -	\$ (520,515)
Family Health Services	6,370,651	1,337,396	1,972,698	(3,060,557)
Environmental Health	4,071,977	3,138	5,940,017	1,871,178
General Support	1,856,217	17,549	-	(1,838,668)
Nutrition and Health Promotion	-	-	71,400	71,400
Total Governmental Activities	<u>\$ 13,320,977</u>	<u>\$ 1,859,700</u>	<u>\$ 7,984,115</u>	<u>(3,477,162)</u>

General Receipts:	
State	722,689
Interest, Rent, and Investments	390,722
County	<u>2,843,785</u>
Total General Revenues	<u>3,957,196</u>
Change in Net Position	480,034
Net Position, Beginning of Year	8,964,946
Net Position, End of Year	<u><u>\$ 9,444,980</u></u>

As of June 30, 2025

		Program Receipts		Net (Disbursements) Receipts and Changes in Cash Balance
	Disbursements	Charges for Services	Operating Grants and Contributions	Governmental Activities
Primary Government:				
Governmental Activities:				
Administration	\$ 808,163	\$ 285,602	\$ 328,609	\$ (193,952)
Family Health Services	8,644,200	3,239,092	3,111,640	(2,293,468)
Environmental Health	3,969,194	1,815,026	2,395,302	241,134
General Support	1,906,680	-	-	(1,906,680)
Total Governmental Activities	<u>\$ 15,328,237</u>	<u>\$ 5,339,720</u>	<u>\$ 5,835,551</u>	<u>(4,152,966)</u>

General Receipts:	
State	378,296
Interest, Rent, and Investments	397,140
County	<u>2,851,750</u>
Total General Revenues	<u>3,627,186</u>
Change in Net Position	(525,780)
Net Position, Beginning of Year	9,444,980
Net Position, End of Year	<u><u>\$ 8,919,200</u></u>

The accompanying notes are an integral
part of the financial statements

State of Idaho
Southwest District Health (III)
Statement of Cash Assets and Fund Balances -
Governmental Funds
As of June 30, 2025 and 2024

	June 30, 2024 <u>General Fund</u>	June 30, 2025 <u>General Fund</u>
Assets		
Cash and Cash Equivalents	\$ 9,444,980	\$ 8,919,200
Total Assets	<u>\$ 9,444,980</u>	<u>\$ 8,919,200</u>
Fund Balances		
Restricted	\$ 3,567,367	\$ 2,006,121
Committed	2,263,681	2,463,328
Assigned	<u>3,613,932</u>	<u>4,449,751</u>
Total Cash Basis Fund Balances	<u>\$ 9,444,980</u>	<u>\$ 8,919,200</u>

The accompanying notes are an integral
part of the financial statements

State of Idaho
Southwest District Health (III)
Statement of Cash Receipts, Cash Disbursements, and Changes In
Cash Basis Fund Balances - Governmental Funds
For the Years Ended June 30, 2025 and 2024

	June 30, 2024	June 30, 2025
	<u>General Fund</u>	<u>General Fund</u>
Cash Receipts		
Health and Professional Services	\$ 1,859,700	\$ 5,339,721
Interest, Rent, and Investments	390,722	397,140
Federal Grants	5,562,359	4,439,688
State Grants	2,217,427	1,395,862
City/County Grants	3,048,114	2,851,750
General Fund Support	722,689	378,296
Total Cash Receipts	<u>13,801,011</u>	<u>14,802,457</u>
Cash Disbursements		
Administration	1,022,132	808,163
Family Health Services	6,370,651	8,644,200
Environmental Health	4,071,977	3,969,194
General Support	1,856,217	1,906,680
Total Cash Disbursements	<u>13,320,977</u>	<u>15,328,237</u>
Excess (Deficiency) of Receipts		
Over Disbursements - Net Change in Cash Balance	480,034	(525,780)
Beginning Cash Basis Fund Balance	<u>8,964,946</u>	<u>9,444,980</u>
Ending Cash Basis Fund Balance	<u><u>\$ 9,444,980</u></u>	<u><u>\$ 8,919,200</u></u>

The accompanying notes are an integral
part of the financial statements

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEARS ENDED JUNE 30, 2025

NOTE 1. REPORTING ENTITY

In determining how to define Southwest District Health (III) for financial reporting purposes, management has considered all potential component units in accordance with GASB Statement 14 as amended by GASB Statement 39. The Idaho Legislature created seven health districts throughout the State in 1970. In 1976, the Legislature expressed specific intent that the districts were not to be considered State agencies, but were to be recognized as authorized governmental entities. Although the districts are not State agencies, all districts have opted to process their financial transactions through the State accounting system.

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The District's financial statements are presented on a cash basis, or an *Other Comprehensive Basis of Accounting (OCBOA)*. The cash basis of accounting, while an acceptable basis of accounting under Statements on Auditing Standards (SAS) 62, differs from Generally Accepted Accounting Principles (GAAP) widely recognized in the United States. Governmental Accounting Standards Board (GASB) pronouncements have been applied to the extent applicable to the cash basis of accounting.

A. Government-Wide Financial Statements

The government-wide financial statements (*Statement of Net Position – Cash Basis*, and *Statement of Activities – Cash Basis*) report information on all activities of the District. These activities are financed through General Fund appropriations, county contributions, federal grants, state grants, local grants, and program revenues.

The *Statement of Net Position – Cash Basis* presents the District's cash and cash equivalent balances of the governmental activities at year end. The *Statement of Activities – Cash Basis* demonstrates the degree to which the direct disbursements of a given function are offset by program receipts. Direct disbursements are those that are clearly identifiable within a specific function. Program receipts include fees and charges paid by recipients of goods or services offered by the program. Appropriations, contributions, interest income, and other items not meeting the definition of program receipts are reported as general receipts.

The Special Revenue Fund accounts for all financial resources of the District. In the governmental fund financial statements, receipts are reported by source and disbursements are reported by functions.

B. Fund Financial Statements

Fund financial statements are prepared on a cash basis with a focus on major funds. The major fund is presented in its own column. Functions of the District are financed through governmental funds. The District has one major governmental fund. The General Fund accounts for all financial resources of the District.

In the governmental fund financial statements, receipts are reported by source, and disbursements are reported by function.

C. Basis of Accounting

The cash basis of accounting is applied in preparing the District's financial statements. Receipts are recorded when cash is received, rather than when revenue is earned. Disbursements are recorded when cash is paid, rather than when a liability is incurred.

The cash basis of accounting precludes the inclusion of some assets and liabilities, such as accounts receivable, accounts payable, and accrued liabilities. These items are not included in the presentation of these financial statements.

D. Assets, Liabilities, and Net Assets

Cash and Cash Equivalents

The State Treasurer is the custodian of the District's cash and investments. The District's primary governmental fund cash and cash equivalents are considered to be cash on hand and are on deposit with the State Treasurer's Office. Cash equivalents are reported at book value. Additional disclosure is identified in Note 3.

Capital Assets

Acquisitions of property and equipment are recorded as disbursements when paid. These items are not reflected as assets in these financial statements.

Compensated Absences

Southwest District Health, as a separate political subdivision has elected to follow State rules on compensated absences. Upon termination accrued leave balances such as vacation and overtime are paid as cash payments to employees. Consistent with cash basis accounting, compensated absences earned are not reflected as a liability in the accompanying financial statements.

Pension Plan

The District participates in a pension plan, further described in Note 4. The District recognizes the employer contribution to the plan when paid. Note 4 further details employer/employee contributions and benefits of the plan.

Restricted Net Position

Southwest District Health's restricted net position consists of funding for the following:

	<u>FY 2025</u>
MRC	\$ 11,223
Citizen's Review Panel	\$ 13,279
Blue Cross Grant	\$ 12,195
City Crisis Contribution	\$ 61,483
OPIOID Settlement	\$ 1,321,676
Mental Health Block Grant	\$ 224
Social Services Block Grant	\$ 110,334
Social Services Block Grant - Ongoing	\$ 111,291
IDJC – Youth Crisis	\$ 9,281
IDJC - Crisis Center	\$ 335,135
TOTAL	\$ 2,006,121

Committed Net Position

Southwest District Health's committed net position consists of funding for the following:

	<u>FY 2025</u>
Capital Reserve/ Debt Reduction Fund	\$ 1,299,174
Vehicle Replacement Fund	\$ 113,809
Employee Development & Engagement	\$ 43,317
County Collaboration	\$ 70,000
27 th Pay Period	\$ 242,576
Facility Improvements	\$ 4694,451
TOTAL	\$ 2,463,328

Unrestricted Net Position

Unrestricted Net Position is the remaining amount of net position having no constraints on their use imposed by contributors or enabling legislation.

Net Position Resource Expenditure

The District does not have a policy regarding the preferred first usage of unrestricted or restricted net position. Expense allocation decisions are made on a program-by-program basis when both restricted and unrestricted net positions are available.

Fund Balance Restrictions

GASB 54 requires the fund balance amounts to be reported within one of the fund balance categories listed below:

- *Nonspendable*, such as fund balance associated with inventories, prepaids, long-term loans and notes receivable, and property held for resale (unless the proceeds are restricted, committed, or assigned).
- *Restricted* fund balance consists of amounts that can be spent only for specific purposes stipulated by their providers, through constitutional provisions, or by enabling legislation.
- *Committed* fund balance classification includes amounts that can be used only for the specific purposes determined by a formal action of the Board of Health (the District's highest level of decision-making authority).
- *Assigned* fund balance classification are intended to be used by the government for specific purposes but do not meet the criteria to be classified as restricted or committed.
- *Unassigned* fund balance is the residual classification for the government's general fund, and includes all spendable amounts not contained in the other classifications.

Restricted Fund Balance Policy

In keeping with the definition of restricted fund balance, the District in its financial statements has listed \$2,006,121 for fiscal year (FY) 2025. This funding was paid in advance for the restricted purposes of supporting the Citizen's Review Panel, MRC, Crisis Center, Blue Cross Grant, City Crisis Contribution, OPIOD Settlement, Mental Health Block Grant, Social Services Block Grant, Youth Vaping, IDJC – Crisis Center, and IDJC – Youth Crisis.

Committed Fund Balance Policy

Southwest District Health's Committed Fund Balance is fund balance reporting required by the Board of Health due to motions passed at Board of Health meetings to commit funds. The Board of Health has committed funds to purchase medical equipment and training, to purchase, remodel and repair District buildings, to purchase computers and electronic medical record program replacements, to upgrade the District's website, to purchase vehicles, and to prepare for the next 27th pay period. Committed funds totaled \$2,463,328.

Assigned Fund Balance Policy

Amounts listed as assigned are those funds left over after the prior categories have been satisfied. These funds are reported in a Special Revenue Fund dedicated to the operation of the District. Assigned funds totaled \$4,449,751.

Unassigned Fund Balance Policy

Southwest District Health has no unassigned fund balance.

Order of Spending

When amounts in more than one classification are available for a particular purpose, the District assumes amounts are spent in the following order: restricted, committed and then assigned.

NOTE 3. CASH AND CASH EQUIVALENTS

The District participates in the State Treasurer's internal and external investment pools. The IDLE Fund is an internal investment pool managed by the State Treasurer's Office on behalf of participants. Money not needed to meet immediate operating obligations is invested in accordance with Idaho Code, Section 67-1210 and 67-1210A. Participation in the pool is mandatory.

The District also participates in the Local Government Investment Pool (LGIP), which is an external investment pool sponsored by the State Treasurer's Office. In order to earn a higher yield, Idaho governmental entities may voluntarily deposit money not needed to meet immediate operating obligations in this pool.

The LGIP is a short-term investment pool. Participants have overnight availability to their funds, up to \$10.0 million. Withdrawals of more than \$10.0 million require 3 business-days notification. The LGIP distributes earnings monthly to the participants based on their average daily balance as a percentage of the total pool. Idaho Code restricts the State Treasurer to certain types of investments.

The pool discloses certain risks that may be associated with its deposits and investments. Disclosures are made for the following required risk disclosures:

Interest rate risk occurs when investments are fixed for longer periods. The weighted average maturity for the LGIP is 76 days.

Concentration of credit risk results when investments are concentrated in one issuer and represents heightened risk of potential loss.

Credit risk associated with investments is the risk that an issuer of debt securities or counterparty to an investment transaction will not fulfill its obligation.

Custodial credit risk is the risk that in the event of financial institution failure, the District's deposits may not be returned. Some of the District's funds may be exposed to custodial credit risk as some funds invested in the IDLE Pool may not be covered by FDIC insurance.

Southwest District Health has no formal investment policies to mitigate credit risk, interest rate risk, or custodial credit risk.

The Local Government Investment Pool is unrated.

The following schedule represents the District's investments at book value in the external investment pool at June 30, 2025:

<u>Investments at Book Value</u>	<u>June 30, 2025</u>
Local Government Investment Pool	\$7,063,530

Additional information, including the investment pool's financial statements, is provided in the *State's Comprehensive Annual Financial Report (CAFR)*, which is available from the Office of the State Controller or its website at www.sco.idaho.gov.

NOTE 4. PENSION PLAN

Plan Description

Southwest District Health contributes to the Base Plan which is a cost-sharing multiple-employer defined benefit pension plan administered by Public Employee Retirement System of Idaho (PERSI) that covers substantially all employees of the State of Idaho, its agencies and various participating political subdivisions. The cost to administer the plan is financed through the contributions and investment earning of the plan. PERSI issues a publicly available financial report that includes financial statements and the required supplementary information for PERSI. That report may be obtained on the PERSI website at www.persi.idaho.gov.

Responsibility for administration of the Base Plan is assigned to the Board comprised of five members appointed by the Governor and confirmed by the Idaho Senate. State law requires that two members of the Board be active Base Plan members with at least ten years of service and three members who are Idaho citizens not members of the Base Plan except by reason of having served on the Board.

Pension Benefits

The Base Plan provides retirement, disability, death and survivor benefits of eligible members of beneficiaries. Benefits are based on members' years of service, age, and highest average salary. Members become fully vested in their retirement benefits with five years of credit services (five months for elected or appointed officials). Members are eligible for retirement benefits upon attainment of the ages specified for their employment classification. The annual service retirement allowance for each month of credited service is 2.0% (2.3% for police/firefighters) of the average monthly salary for the highest consecutive 42 months. The benefit payments for the Base Plan are calculated using a benefit formula adopted by the Idaho Legislature. The Base Plan is required to provide a 1% minimum cost of living increase per year provided the Consumer Price Index increase 1% or more. The PERSI Board has the authority to provide higher cost of living increase to a maximum of the Consumer Price Index movement of 6%, whichever is less; however, any amount above the 1% minimum is subject to review by the Idaho Legislature.

Member and Employer Contributions

Member and employer contributions paid to the Base Plan are set by statute and are established as a percent of covered compensation and earnings from investments. Contribution rates are determined by the PERSI Board within limitations, as defined by state law. The Board may make periodic changes to employer and employee contribution rates (expressed as percentages of annual covered payroll) if current rates are actuarially determined to be inadequate or in excess to accumulate sufficient assets to pay benefits when due.

The contribution rates for employees are set by statute at 60% of the employer rate for general employees and 74% for public safety. As of June 30, 2025 it was 7.18% for general employees and 10.36% for public safety. The employer contribution rate as a percent of covered payroll is set by the Retirement Board and was 11.96% general employees and 13.98% for police and firefighters. Southwest District Health's cash contributions were \$840,428.

NOTE 5. POST-EMPLOYMENT BENEFITS OTHER THAN PENSIONS

The State of Idaho funds, or partially funds, post-employment benefits relating to health, disability, and life insurance. The District participates in the State of Idaho's post-employment benefit programs. The State administers the retiree healthcare plan which allows retirees to purchase healthcare insurance coverage for themselves and eligible dependents. The State provides long-term disability income benefits for active employees who become disabled, generally up to a maximum age of 70. The State provides basic life and dependent life coverage for disabled employees, generally up to a maximum age of 70. For up to 30 months following the date of disability, an employee is entitled to continue healthcare coverage. Benefit costs are paid by Southwest District Health through a rate charged by the State. The primary government is reporting the liability for the retiree healthcare and long-term disability benefits. Specific details of the OPEB are available in the state CAFR, which is available from the Office of the State Controller or its website at www.sco.idaho.gov.

NOTE 6. LEASES

Operating Leases

Operating leases are leases for which the District will not gain title to the asset. They contain various renewal options, as well as some purchase options. Operating lease payments are recorded when paid or incurred. The District's total operating lease expenditures for fiscal year 2025 were \$222,954.

NOTE 7. RISK MANAGEMENT

The District is exposed to various risks of property and casualty losses, and injuries to employees. Accordingly, the District belongs to the State of Idaho Risk Management and Group Insurance internal service funds, available to all State entities. Risk Management provides property and general liability risk coverage for its members. General liability claims are self-insured up to the Idaho Tort Claims Act maximum of \$500,000 for each occurrence; property damage claims up to \$250,000 per occurrence annually; and physical damage to covered vehicles at actual cash value. The District also participates in the Idaho State Insurance Fund, which purchases commercial insurance for claims not self-insured by the above coverage, and for other identified risks of loss, including workers' compensation insurance. Details of the Risk Management and Group Insurance coverage can be found in the statewide *CAFR*.

SUPPLEMENTARY INFORMATION

State of Idaho
Southwest District Health (III)
Schedule of Cash Receipts and Disbursements -
Budget to Actual - General Fund

For the Year Ended June 30, 2024

	Budgeted Amounts		Actual	Variance with Final
	Original	Final	Amounts	Budget
				Positive (Negative)
Cash Receipts				
State	\$ -	\$ -	\$ 722,689	\$ (722,689)
County	3,031,875	3,031,875	2,843,784	(188,091)
Contracts	11,907,169	11,907,169	7,984,115	(3,923,054)
Fees	1,553,787	1,553,787	1,859,700	305,913
Interest, Rent, and Investment Income	150,000	150,000	390,723	240,723
Sale of Land, Building, and Equipment	12,100	12,100	-	(12,100)
Miscellaneous Revenue	124,049	124,049	-	(124,049)
Total Cash Receipts	<u>\$ 16,778,980</u>	<u>\$ 16,778,980</u>	<u>\$ 13,801,011</u>	<u>\$ (4,423,347)</u>
Cash Disbursements				
Personnel Costs	\$ 9,709,707	\$ 9,709,707	\$ 8,320,283	\$ 1,389,424
Operating	5,779,798	5,779,798	3,088,870	2,690,928
Capital Outlay	130,000	130,000	1,061,733	(931,733)
Trustee Benefits	1,159,474	1,159,474	850,091	309,383
Total Cash Disbursements	<u>\$ 16,778,979</u>	<u>\$ 16,778,979</u>	<u>\$ 13,320,977</u>	<u>\$ 3,458,002</u>

For the Year Ended June 30, 2025

	Budgeted Amounts		Actual	Variance with Final
	Original	Final	Amounts	Budget
				Positive (Negative)
Cash Receipts				
State	\$ -	\$ -	\$ 378,296	\$ (378,296)
County	3,122,831	3,122,831	2,851,750	(271,081)
Contracts	7,145,437	7,145,437	5,835,550	(1,309,887)
Fees	1,704,841	1,704,841	5,339,721	3,634,880
Interest, Rent, and Investment Income	337,850	337,850	397,140	59,290
Miscellaneous Revenue	3,481,414	3,481,414	-	(3,481,414)
Total Cash Receipts	<u>\$ 15,792,373</u>	<u>\$ 15,792,373</u>	<u>\$ 14,802,457</u>	<u>\$ (1,746,508)</u>
Cash Disbursements				
Personnel Costs	\$ 9,565,525	\$ 9,565,525	\$ 8,737,431	\$ 828,094
Operating	3,198,590	3,198,590	5,206,965	(2,008,375)
Capital Outlay	80,000	80,000	790,682	(710,682)
Trustee Benefits	2,948,258	2,948,258	593,159	2,355,099
Total Cash Disbursements	<u>\$ 15,792,373</u>	<u>\$ 15,792,373</u>	<u>\$ 15,328,237</u>	<u>\$ 464,136</u>

The accompanying notes are an integral
part of the financial statements

NOTE TO SUPPLEMENTARY INFORMATION

NOTE 1. BUDGET COMMITTEE

The chairmen of the boards of county commissioners located within the District serve as the Budget Committee for the District. The District Board of Health submits the budget to the Budget Committee. The budget is prepared on a cash basis. The budget for the District is approved by a majority of the Budget Committee, and any adjustments to the budget are approved by the District Board of Health.

FEDERAL REPORTS

State of Idaho
Southwest District Health (III)
Schedule of Expenditures of Federal Awards
Cash Basis
For the Years Ended June 30, 2025 and 2024

Program Title	Federal Assistance Listing Number	Title	Contract Number	Pass-Through Entities	Total Expenditures
<u>US Department of Agriculture</u>					
WIC	10.557	WIC Special Supplemental Nutrition Program for Women, Infants, and Children	HC5349	1	\$ 1,471,606
Total US Department of Agriculture					<u>1,471,606</u>
<u>US Department of Justice</u>					
Bureau of Justice Assistance Comprehensive Opioid	16.838	Comprehensive Opioid, Stimulant, and Other Substances Use Program	HC3878	1	31,229
Total US Department of Justice					<u>31,229</u>
<u>US Department of Transportation</u>					
Highway Safety Cluster					
Seat Belt Survey	20.616	National Priority Safety Programs	N/A	7	2,992
Total Highway Safety Cluster					<u>2,992</u>
Total US Department of the Treasury					<u>2,992</u>
<u>US Department of the Treasury</u>					
CARES ACT FUNDING	21.027	Coronavirus State and Local Fiscal Relief Recovery	HC1651	1	147,581
Total US Department of the Treasury					<u>147,581</u>
<u>US Environmental Protection Agency</u>					
Public Drinking Water	66.432	State Public Water System Supervision	K345	2	115,384
Total US Environmental Protection Agency					<u>115,384</u>
<u>US Department of Health and Human Services</u>					
Preparedness Assessment	93.069	Public Health Emergency Preparedness	HC5636	1	349,348
Cities Readiness Initiative	93.069	Public Health Emergency Preparedness	HC5636	1	114,466
Total AL# 93.069					<u>463,814</u>
FDA Standards	93.103	Food and Drug Administration Research	G-202601-07713	8	12,899
Total AL# 93.103					<u>12,899</u>
Activate TB - Federal	93.116	Project Grants and Cooperative Agreements for Tuberculosis Control Programs	HC170400	1	12,992
Total CFDA 93.116					<u>12,992</u>
Prescription Drug Overdose Prevention	93.136	Injury Prevention and Control Research and State and Community Based Programs	HC3878	1	60,640
Total AL# 93.136					<u>60,640</u>
Partnership For Success	93.243	Substance Abuse and Mental Health Services Projects of Regional and National Significance	H79SP083777	3	579,750
Total AL# 93.243					<u>579,750</u>
State Supplied Clinics	93.268	Immunization Cooperative Agreements	HC5544	1	88,308
Immunization - COVID 19	93.268	Immunization Cooperative Agreements	HC1341	1	393
Perinatal HEP B	93.268	Immunization Cooperative Agreements	HC5685	1	3,140
Total AL# 93.268					<u>91,841</u>
Viral Hepatitis Prevention and Control	93.270	Viral Hepatitis Prevention and Control	HC1616	1	10,434
Total AL# 93.270					<u>10,434</u>

State of Idaho
Southwest District Health (III)
Schedule of Expenditures of Federal Awards (continued)
Cash Basis
For the Years Ended June 30, 2025 and 2024

Program Title	Federal Assistance Listing Number	Title	Contract Number	Pass- Through Entities	Total Expenditures
<u>US Department of Health and Human Services (continued)</u>					
NEDSS	93.323	Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)	HC1747	1	123,894
ELC CARES Enhancing	93.323	Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)	HC14724	1	42,468
Total AL# 93.323					<u>166,362</u>
Oral Health CDC Funding	93.366	State Actions to Improve Oral Health Outcomes and Partner Actions to Improve OH	HC3188	1	3,955
Total AL# 93.366					<u>3,955</u>
Tobacco Prevention	93.387	Office of Smoking and Health - National State-Based Tobacco Control	HC5349	1	38,044
Total AL# 93.426					<u>38,044</u>
COVID19 - Health Disparities	93.391	Activities to Support State, Tribal, Local and Territorial (STLT) Health Department Response to Public Health or Healthcare Crises	HC328900	1	-
Total AL# 93.391					<u>-</u>
NACCHO Syphilis Grant	93.421	Maternal and Child Health Services Block Grant to the States	2024-ECHS-17	9	58,992
Total AL# 93.421					<u>58,992</u>
Families Talking Together	93.558	Temporary Assistance for Needy Families	HC5594	1	5,595
Total AL# 93.558					<u>5,595</u>
Child Care - Health and Safety Inspections	93.575	Child Care and Development Block Grant	WC0899	4	23,938
Child Care - Complaints	93.575	Child Care and Development Block Grant	WC0899	4	55,080
Total AL# 93.575					<u>79,018</u>
Total 477 Cluster					<u>84,613</u>
SS Block Grant	93.667	Social Services Block Grant	BC3687	1	105,108
Total AL# 93.667					<u>105,108</u>
Nurse Family Partnership/Innovation	93.870	Maternal, Infant and Early Childhood Home Visiting Grant	HC1461	1	567,482
NFP - ARPA	93.870	Maternal, Infant and Early Childhood Home Visiting Grant	HC272600	1	291
Total AL# 93.870					<u>567,773</u>
Women's Health Check	93.898	Cancer Prevention and Control Programs for State, Territorial and Tribal Organizations	HC5566	1	17,541
Women's Health Check - Outreach	93.898	Cancer Prevention and Control Programs for State, Territorial and Tribal Organizations	HC5566	1	628
Comprehensive Cancer Prevention	93.898	Cancer Prevention and Control Programs for State, Territorial and Tribal Organizations	HC5616	1	16,607
Total AL# 93.898					<u>34,776</u>

State of Idaho
Southwest District Health (III)
Schedule of Expenditures of Federal Awards (continued)
Cash Basis
For the Years Ended June 30, 2025 and 2024

Program Title	Federal Assistance Listing Number	Title	Contract Number	Pass-Through Entities	Total
<u>US Department of Health and Human Services (continued)</u>					
Disease Prevention Workforce Total AL# 93.917	93.914	HIV Care Formula Grant	HC1416	1	61,902 <u>61,902</u>
HIV Prevention Total AL# 93.940	93.940	HIV Prevention Activities Health Department Based	HC265000	1	- <u>-</u>
Community Mental Health Block Grant Total AL# 93.958	93.958	Block Grants for Community Mental Health Services	BC3687	1	25,594 <u>25,594</u>
Infrastructure Grant - A1 - ARPA	93.967	Centers for Disease Control and Prevention Collaboration with Academia to Strengthen Public Health	HC5502	1	336,974
Infrastructure Grant - A2 Total AL# 93.967	93.967	Centers for Disease Control and Prevention Collaboration with Academia to Strengthen Public Health	HC5502	1	62,056 <u>399,030</u>
STD Prevention Activities Total AL# 93.977	93.977	Sexually Transmitted Diseases (STD) Prevention and Control Grants	HC1416	1	14,654 <u>14,654</u>
Diabetes Total AL# 93.988	93.988	Cooperative Agreements for Diabetes Control Programs	HC5534	1	10,462 <u>10,462</u>
Fit and Fall Proof Activities Total AL# 93.991	93.991	Preventative Health and Health Services Block Grant	HC3658	1	43,751 <u>43,751</u>
Oral Health MCH Funding Total AL# 93.994	93.994	Maternal and Child Health Services Block	HC353900	1	75,610 <u>75,610</u>
Total US Department of Agriculture					<u>2,922,996</u>
Total Cash Expenditures					<u>4,691,788</u>
Non-Cash Expenditures					
WIC Food Vouchers	10.557	Sup. Nutrition for Women, Infants, & Children		1	5,265,708
Value of Vaccine	93.268	Immunization Cooperative Agreements		1	154,310
Total Non-Cash Expenditures					<u>5,420,018</u>
Total Federal Expenditures					<u>\$ 10,111,806</u>

Pass Through Entities Legend

- 1 = Idaho Department of Health and Welfare
- 2 = Idaho Department of Environmental Quality
- 3 = Office of Drug Policy
- 4 = Central District Health Department (Health District 4)
- 5 = Direct Grant with Health and Human Services
- 6 = Cares Act Monies US Department of Treasury
- 7 = Idaho Department of Transportation
- 8 = National Environmental Health Association (NEHA) - Food and Drug Administration
- 9 = National Association of County and City Health Officials (NACCHO)

* Some program titles are abbreviated. The full title of each Federal Program listed above can be found at www.cfda.gov

Sub-recipient Pass-Through Funds

Program Title	Federal Assistance Listing Number	Title	Contract Number	Total
PARTNERSHIP FOR SUCCESS	93.243	Substance Abuse and Mental Health Services Projects of Regional and National Significance	H79PS080981	\$ 154,416 <u>\$ 154,416</u>

NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

NOTE 1. BASIS OF PRESENTATION

The accompanying Schedule of Expenditures of Federal Awards includes the federal grant activity of the District and is presented on the cash basis of accounting. The information in this schedule is presented in accordance with the requirements of *Title 2 U.S. Code of Federal Regulations (CFR) Part 200, Uniform Administrative Requirements for Federal Awards (Uniform Guidance)*.

The ALN refers to the *Assistance Listing Numbers*, which is a government-wide list of individual federal programs. The Assistance Listing Number refers to detailed public descriptions of federal programs that provide grants, loans, scholarships, insurance, and other types of assistance awards.

NOTE 2. WIC FOOD VOUCHERS

The District uses the Idaho Department of Health and Welfare's determination of eligibility, if one exists, for clients participating in the Women, Infants and Children (WIC) program. If a client has not applied through Idaho Department of Health and Welfare for eligibility in federal programs, the District determines eligibility for participation in the WIC program using federal guidelines specific to the program. Within the WIC program, the District distributes food checks to clients and controls unissued food checks. The Idaho Department of Health and Welfare issues and redeems food checks, controls the food checks issued, and reviews program compliance. The value of the food checks redeemed through the Idaho Department of Health and Welfare was \$5,265,708 for fiscal year 2025.

NOTE 3. VALUE OF VACCINE

The Idaho Department of Health and Welfare provides certain vaccines to the District at no cost to the District. The District charges only a flat rate administrative fee to administer the supplied vaccines. The value of the vaccines provided to the District by the Idaho Department of Health and Welfare was \$154,310 for fiscal year 2025.

NOTE 4. INDIRECT COST RATE

The District has not elected to use the 15-percent de minimis indirect cost rate allowed under the Uniform Guidance.



ZWYGART JOHN

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**Independent Auditor's Report on Internal Control Over
Financial Reporting and on Compliance and Other
Matters Based on an Audit of the Financial Statements
Performed in Accordance with *Government Auditing Standards***

Director, Board of Health
Southwest District Health (III)
13307 Miami Lane
Caldwell, Idaho 83607

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the cash basis financial statements of the governmental activities and the major fund information of Southwest District Health (III) (the District) as of and for the years ended June 30, 2025, and the related notes to the financial statements, which collectively comprise the District's cash basis financial statements, and have issued our report thereon dated September 23, 2026.

Internal Control Over Financial Reporting

In planning and performing our audit of the cash basis financial statements, we considered the District's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinions on the cash basis financial statements, but not for the purpose of expressing an opinion on the effectiveness of the District's internal control. Accordingly, we do not express an opinion on the effectiveness of the District's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or, significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether the District's cash basis financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of cash basis financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Zwygart John & Associates, CPAs PLLC

Nampa, Idaho
September 23, 2026



ZWYGART JOHN

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**Independent Auditor's Report on Compliance for Each Major Program
and on Internal Control Over Compliance Required in accordance
with the Uniform Guidance**

Director, Board of Health
Southwest District Health (III)
13307 Miami Lane
Caldwell, Idaho 83607

Report on Compliance for Each Major Federal Program

Opinion on Each Major Federal Program

We have audited Southwest District Health (III)'s compliance with the types of compliance requirements identified as subject to audit in the OMB *Compliance Supplement* that could have a direct and material effect on each of Southwest District Health (III)'s major federal programs for the year ended June 30, 2025. Southwest District Health (III)'s major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

In our opinion, Southwest District Health (III) complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2025.

Basis for Opinion on Each Major Federal Program

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America (GAAS); the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States (*Government Auditing Standards*); and the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Our responsibilities under those standards and the Uniform Guidance are further described in the Auditor's Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of Southwest District Health (III) and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion on compliance for each major federal program. Our audit does not provide a legal determination of Southwest District Health (III)'s compliance with the compliance requirements referred to above.

Responsibilities of Management for Compliance

Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules and provisions of contracts or grant agreements applicable to Southwest District Health (III)'s federal programs.

Auditor's Responsibilities for the Audit of Compliance

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on Southwest District Health (III)'s compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material, if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about Southwest District Health (III)'s compliance with the requirements of each major federal program as a whole.

In performing an audit in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding Southwest District Health (III)'s compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.
- Obtain an understanding of Southwest District Health (III)'s internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of Southwest District Health (III)'s internal control over compliance. Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

Report on Internal Control Over Compliance

A *deficiency in internal control over compliance* exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A *material weakness in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A *significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the Auditor's Responsibilities for the Audit of Compliance section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance. Given these limitations, during our audit we did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance may exist that were not identified.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Zwygart John & Associates, CPAs PLLC

Nampa, Idaho
September 23, 2026

State of Idaho
Southwest District Health (III)
Schedule of Findings and Questioned Costs
For the Years Ended June 30, 2025 and 2024

Section I - Summary of Auditor's Results

Financial Statements

Type of auditor's report issued: Unmodified

Internal control over financial reporting:

Significant deficiency(ies) disclosed? ☐ yes ☒ none reported

Material weakness(es) disclosed? ☐ yes ☒ none reported

Noncompliance material to financial statements noted? ☐ yes ☒ no

Federal Awards

Internal control over major programs:

Significant deficiencies disclosed? ☐ yes ☒ none reported

Material weaknesses disclosed? ☐ yes ☒ none reported

Type of auditor's report issued on compliance for major programs:

Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) Unmodified

Any audit findings disclosed that are required to be reported in accordance with 2CFR SECTION 200.516(A)? ☐ yes ☒ no

Identification of major programs:

CFDA Numbers

Name of Federal Program

10.557

Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)

Dollar threshold used to distinguish between Type A and Type B programs: \$1,000,000

Auditee qualified as low-risk auditee? ☐ yes ☒ no

State of Idaho
Southwest District Health (III)
Schedule of Findings and Questioned Costs (Continued)
For the Years Ended June 30, 2025 and 2024

Section II - Financial Statement Findings

No Matters Reported

Section III - Findings and Questioned Costs for Federal Awards

No Matters Reported

Prior Findings and Questioned Costs for Federal Awards

No Matters Reported

APPENDIX

HISTORY

The following is a chronological history of the basic health care services that the State has provided to the public.

- 1907 – The State Board of Health and counties that had local boards of health were statutorily authorized joint responsibility for public health.
- 1947 – A public health district law was enacted that permitted two or more counties to establish a public health district. Participation in the forming of the health districts was voluntary.
- 1970 – The legislature established a law that created seven mandatory public health districts. In Southwest District Health (III), the counties designated were Adams, Canyon, Gem, Owyhee, Payette, and Washington. The director of the State Department of Health and Welfare was designated fiscal officer for the various districts.
- 1976 – Legislative intent was expressed that the health districts are not State agencies, and that they be recognized as authorized governmental entities.
- 1986 – Idaho Code was amended to allow district health departments to promulgate rules and regulations without the State Board of Health's approval.
- 1993 – The legislature clarified the need for district health departments to use the Idaho Administrative Procedures Act for fees and rules.
- 2007 – Legislation changing Idaho Code, Section 39-412 to reflect a change in the compensation of Board members, to reference Idaho Code, Section 59-509(I)
- 2007 – Legislation changing Idaho Code, Section 39-411 composition of Districts' Boards of Health to allow those Districts comprised of eight counties to consist of not less than eight members and no more than nine members.
- 2008 – Legislation changing Idaho Code, Section 39-414 to change the language "For purposes of this chapter, a Public Health District is not a subdivision of the state and is considered an independent body corporate and politic, in terms of negotiating long term debt financing."
- 2021 - Legislation passed House Bill No. 316 which amended Idaho Code Sections 39-401, 39-411, 39-413, 39-414, 39-423, 39-434, and 39-425. This updated many provisions of Public Health Districts in Idaho and how they operate.

PURPOSE

The purpose of Southwest District Health (III) is to prevent disease, disability, and premature death; promote healthy lifestyles; and protect and promote the health and quality of an environment in which people can be healthy.

STATUTORY AUTHORITY

The statutory authority for the District is found in Idaho Code, Title 39, Chapter 4.

ORGANIZATION

The District is supervised by a six-member board appointed by the county commissioners of the counties served, plus one physician member, as allowed by Idaho Code, Section 39-411. Board members serve staggered five-year terms, and are reimbursed \$75 per working day plus all necessary travel expenses. The board appoints a director to administer and manage day-to-day activities of the District. Physicians and pharmacists provide medical consulting services to the District.

The District is organized into four major sections:

1. Administration – Provides day-to-day managerial guidance for the District.
2. General Support – Provides budget, accounting, billing/collections, accounts payable, building management, as well as administrative, personnel, purchasing, and information technology support for all divisions, sections, and satellite facilities throughout the District.

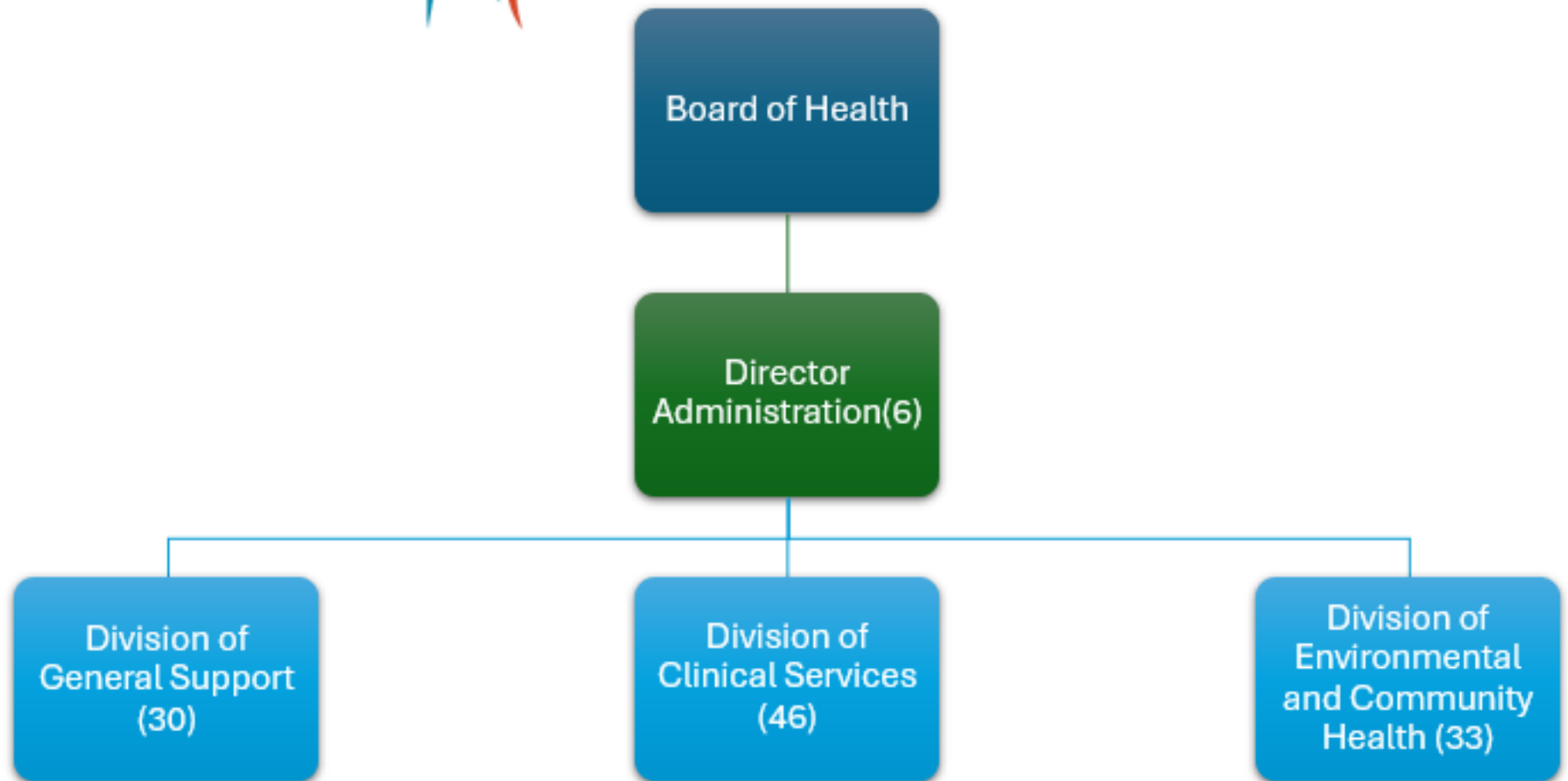
3. Clinic Services – Provides services such as family planning, immunization, tuberculosis services, sexually transmitted disease (STD) treatment, HIV/AIDS testing, communicable disease treatment and control. This division also provides nutrition assessment health and education services to residents and agencies throughout the District, including the administration of the Women, Infants, and Children (WIC) nutrition program.
4. Environmental and Community Health – Provides solid waste management services, food protection through inspection and licensing of food handling establishments, day care facility inspections, testing, certification and licensing of septic system installers and pumpers, review of subdivision engineering reports, drinking well water testing, and public health preparedness programs. This division also provides risk reduction education and awareness programs such as tobacco cessation, cancer education, diabetes, and physical activity/nutrition programs.

The District's central offices and clinics are located in Caldwell. Additionally, four satellite clinics are located in Emmett, Homedale, Payette, and Weiser. An organizational chart is attached.

FUNDING

Financing for the District comes from State General Fund appropriations; county contributions; contracts from federal, State, and private vendors; fees for providing client services; the sale of septic system permits; mortgage survey services; subdivision plan reviews; and food facility inspections. Also, some revenue is generated from donations. The amount included in the District's General Fund appropriation request is determined by Idaho Code, Section 39-425. The legislature sets the District's General Fund appropriation, which can be more or less than the amount requested.

The District also receives funds from contracts with the Idaho Department of Health and Welfare, Idaho Department of Environmental Quality, cities, other governmental agencies, as well as fees for public health services, environmental inspections, and licensing.



The numbers indicated in each division reflect the number of people on staff, not FTEs.



Nurse Family Partnership

Kristen Koprowski, RN, BSN, IBCLC

Serving First Time Moms in Canyon, Adams, Owyhee,
Payette Washington and Gem County

What is Nurse Family Partnership?

- Nurse Home-Visiting Program
- Early pregnancy through child's second birthday
- Receive education, health guidance, parenting support, and connections to community resources
- NFP is free to enrolled families



Who Can Enroll in Nurse Family Partnership?

Any woman who:

- Is pregnant with her first child
- Is pregnant 28 weeks or less
- Meets income requirements
- Lives in an area where NFP is available

Who We Are



Key Goals

<u>Goal</u>	<u>Why It Matters</u>
Healthy pregnancies	Supporting prenatal care, nutrition, healthy behaviors, and preparation for childbirth
Healthy child development	Helping parents provide safe, responsive, and developmentally appropriate care for child
Strong family futures	Supporting education, employment, and family planning, and personal goals

What We Do

Build a long-term trusting relationship by:

- **Listening** without judgment
- **Providing** reliable health and parenting information
- **Helping** mothers set goals that are meaningful to them
- **Celebrating** progress and building confidence
- **Supporting** problem-solving and self-advocacy



Relationship Based Care

- The nurse-client relationship is the foundation
- The same nurse visits consistently
- Visits provide a safe space
- Trust helps nurses recognize changes



Mental Health Support

- Normalize conversations about mental health and reduce stigma
- Use screening tools
- Ask about mood, stress, sleep, safety, and available support
- Observe changes in behavior, daily functioning, and mother-baby interactions
- Help distinguish common adjustment challenges from symptoms requiring professional evaluation

Mental Health Referrals

July 1, 2025 to June 30, 2026

- 66 referrals were made by NFP nurses to mental health services
- 16 were internal referrals to Southwest District Health onsite counselor



Encouraging Early Literacy

- Surround the baby with language, attention, and joyful interaction.
- Support early language and communication development.
- Strengthen attention and listening skills.
- Encourage closeness and bonding.



Mom Testimonials

When asked by surveys distributed at 10 and 24 months what the moms liked most about the NFP program....

“This program has helped me to know how to react to situations with my son, such as when he gets sick and when and how to teach him different things.”

“All the resources and information that is given to me by my nurse and she is able to answer any questions or concerns that I have and help me feel confident in taking care of my child.”

“ I love that they help soon to be mothers get ready for what the future holds with our littles, also that they help with where to get diapers, clothing and anything else we need!”

“They were always attentive to my son and me; they were the best thing in our lives.”



Spring 2025 Graduation



Nurse-Family Partnership Funding

Primary Funding

- Federal Funding: Maternal, Infant, and Early Childhood Home Visiting (MIECHV)
- Federal Agencies: HRSA and Administration for Children and Families (ACF)
- State Administrator: Idaho Department of Health and Welfare
- Local Recipient: Southwest District Health
- Grant Cycle: 2-year funding period (July-June)

Additional Funding

- Medicaid reimbursement for eligible services
- District funding, including opioid settlement

References

- Changent. *Nurse-Family Partnership*. changent.org
- U.S. Department of Health and Human Services. *Home Visiting Evidence of Effectiveness: Nurse-Family Partnership*. homvee.acf.gov
- National Home Visiting Resource Center. *Nurse-Family Partnership Model Profile*. nhvrc.org
- American Academy of Pediatrics. *Literacy Promotion: An Essential Component of Primary Care Pediatric Practice*. publications.aap.org
- Centers for Disease Control and Prevention. *Depression Among Women*. cdc.gov
- National Institute of Mental Health. *Perinatal Depression*. nimh.nih.gov



Parents as Teachers™

Patricia Kennings, MS, IMH-E
Program Manager



Parents as Teachers (PAT)

PAT is a national, evidence-based, FREE home-visiting program for families who are expecting or have children up to age 5 and who live in District 3.

Founding principle: A parent is a child's first and most influential teacher.



Program Goals

*PAT participation was associated with a significantly lower likelihood of Child Protective Services reinvolverment and was related to 50% fewer cases of suspected abuse and/or neglect.**

*Drazen, S. & Haust, M. (1996, August). *Lasting academic gains from an early home visitation program*. Paper presented at the Annual Meeting of the American Psychological Association, Toronto, Ontario, Canada.
Wagner, M. & Clayton, S.L. (1999). The Parents as Teachers Program: Results from Two Demonstrations. *The Future of Children: Home Visiting: Recent Program Evaluations*, 9(1), 91-115.

- ✦ Increase parent knowledge of early childhood development and improve parenting practices
- ✦ Provide early detection of developmental delays and health issues
- ✦ Prevent child abuse and neglect
- ✦ Increase children's school readiness and school success
- ✦ Improve family economic well-being
- ✦ Strengthen community capacity and connectedness

Services

- Personal Visits
 - In-home, community, or virtual
- Health and Developmental Screening
 - Early detection
- Resource Referrals
 - Resource connections
- Group Connections
 - Build social networks



Blue Ribbon Affiliate

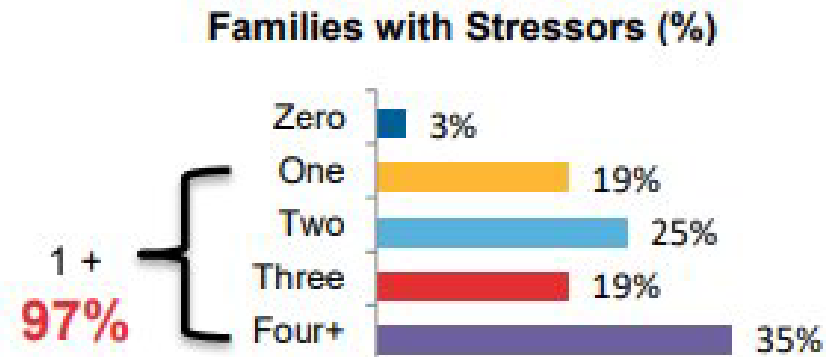
- PAT Certified Parent Educators
- Bachelor's degree
- Training in child development
- Minimum of two years experience with young children/families
- Two bilingual parent educators



Who We Serve

- ✦ Teen parents <21
- ✦ Children or parents with disabilities or chronic health condition
- ✦ Parents with mental illness
- ✦ HS diploma or GED not attained
- ✦ Low income
- ✦ Recent immigrant or refugee family
- ✦ Substance abuse
- ✦ Military deployment
- ✦ Very low birth weight
- ✦ Child abuse or neglect

- ✦ Court-appointed legal guardian and/or foster care
- ✦ Homeless or unstable housing
- ✦ Incarcerated parent(s)
- ✦ Death in the immediate family
- ✦ Intimate partner violence



2025-26 Affiliate Performance Report

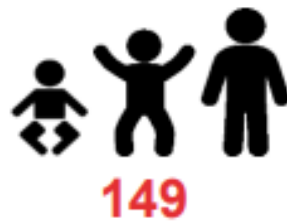
Families Served



56 referred this program year
for further assessment based
on screening/review

28 received follow-up services
this program year

Children Served



86 Potential delays/
concerns identified

Developmental	46
Social-emotional	13
Hearing	7
Vision	12
Physical Health	8

Personal Visits

1,162



Group Connections

Average # of group
connections per affiliate = 12

45 enrolled families attended



Significant Long-term Investments

- ✦ Reduced costs of child protection
- ✦ Reduced costs of K-12 special education and grade retention
- ✦ Reduced costs of criminal justice expenses

\$1.00 invested = \$1.75 to \$5.70 return*

*National Conference of State Legislatures (NCSL). *Home Visiting: Improving Outcomes for Children*. Available at: <https://www.ncsl.org/research/human-services/home-visiting-improving-outcomes-for-children635399078.aspx>



Parents As Teachers Funding

Primary Funding

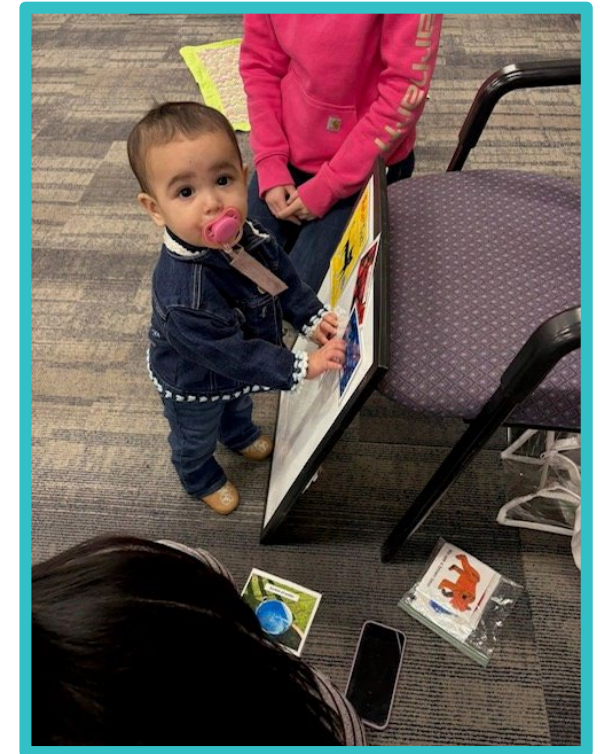
- Federal Funding: Maternal, Infant, and Early Childhood Home Visiting (MIECHV)
- Federal Agencies: HRSA and Administration for Children and Families (ACF)
- State Administrator: Idaho Department of Health and Welfare
- Local Recipient: Southwest District Health
- Grant Cycle: 2-year funding period (July-June)

Additional Funding

- Medicaid reimbursement for eligible services
- District funding, including opioid settlement

Testimonials

- ✧ “My children are amazed by every activity. They learn to do different things together and to share. It helps them manage their time, share with others, and develop the patience needed for the activities.”
- ✧ “Quality time! Connections, better parenting skills. I love this program and our parent educator is the best!!”
- ✧ “Regarding the support, I feel heard. I can talk openly and confidently about parenting, and I don't feel judged. She always looks for ways to help my family with resources.”
- ✧ “One of the greatest gifts this program has given us is helping my husband become more involved and confident in understanding autism. Through Miss Ana’s example and guidance, he has learned new ways to interact with Izaiah, connect with him, and celebrate his strengths. Watching their relationship grow has been incredibly meaningful for our family.”





Supporting Nutrition Across the Lifespan

Daniel Adams MHE, CHES®
Denice Ahlstrom MS, RDN, LD

Overview



- Why is nutrition education important?
- How is SWDH supporting nutrition education through various life stages?
- Questions and discussion

Why do we still need to provide nutrition education?



Southwest District has unique nutrition barriers

- **Food insecurity:** Every county in Southwest District has higher childhood food insecurity than the state average. (Indicators Idaho, 2023)
- **Poverty:** 10% of children in Idaho are in poverty (Indicators Idaho, 2023)
- **Rural areas and food deserts**
- **Cultural beliefs and traditions**
- **Language barriers**
- **Education**



WIC Program Overview

- WIC is a federal program administered through state WIC agencies
- Target population: Pregnant and postpartum women, infants, and children up to 5 years of age
- WIC provides nutritious foods, health services, nutrition education, and breastfeeding support.
- 6,300 active participants in SWDH WIC
 - *This institution is an equal opportunity provider.*



Preconception

- Folic acid is essential in the first few weeks of pregnancy to prevent neural tube birth defects.
- Vitamin Angels prenatal vitamins are free to any woman and are available at all WIC locations
- Vitamin Angels prenatal vitamins:
 - 2025: 337 bottles
 - 2026: 421 bottles so far



Supporting education by removing barriers

- Medicaid*
- SNAP (food stamps)*
- TAFI*
- Immunizations*
- Food bank/pantry
- Diaper bank
- WIC Peer Counseling
- Parents As Teachers
- Nurse Family Partnership
- Clinic
- Smoking Cessation
- Behavioral health and counseling
- Dental
- Car seat installation

Supporting Breastfeeding



- Peer Counseling program
- Breastfeeding classes
- Certified lactation specialists available for support/troubleshooting
- Breast Pumps and storage supplies
- Nursing bras (new!)

Setting Patterns

SERVING SIZES
THE SECRET IS IN YOUR HAND

Because hand sizes vary, compare your fist size to an actual measuring cup.

A fist or size of hand = 1 cup
1 cup = 8 oz. of milk or Yogurt
1 oz. of cold cereal
Whole fruit
Leafy vegetables

Size of hand = 1 slice of bread or 1/2 small Bagel

A thumb = 1 oz. of cheese
Eating low-fat cheese helps you meet the required servings from the dairy group.
1½ oz. of low-fat cheese counts as 8 oz. of milk or yogurt.

Handful = 1-2 oz. of snack food
Snacking can add up. Remember, one handful equals 1 oz. of nuts and small candies. 2 handfuls equals 1 oz. of chips or pretzels.

Palm = 3 oz. of meat
Choose lean meat, fish, and poultry. One palm-sized portion equals 3 oz. for an adult and 1½-2 oz. for a child under 5.

Thumb tip = 1 teaspoon
Keep high-fat foods—such as butter, oil, and mayonnaise—at a minimum. One teaspoon is equal to the end of your thumb, from the knuckle up. Three teaspoons equals one tablespoon.

Half of a fist = ½ cup
1/2 cup = 1/2 cup pasta or rice
Most fresh, frozen, or canned fruits and vegetables

To learn more about WIC and locate a clinic near you, please visit signupwic.com.
This institution is an equal opportunity provider. Read the full statement concerning your civil rights at www.fns.usda.gov/civil-rights/usda-non-discrimination-statement-at-her-fns-programs.

Adapted with permission from materials provided by Iowa WIC
Idaho WIC Program Form WIC 347 04/2025

IDAHO DEPARTMENT OF HEALTH & WELFARE
DIVISION OF PUBLIC HEALTH

- Influencing growth trajectory and taste preferences
- Modeling appropriate serving sizes
- Supporting parents through developmental stages
- Empowering family nutrition gatekeepers
- Supporting immediate and long-term wellness

Expanding access to nutrition education



**COOKING
MATTERS®**



Senior Produce Program: Supporting healthy aging through local food access



**INCREASE FOOD
ACCESS**



**PROMOTE
COMMUNITY
ENGAGEMENT**



**INCREASE
PHYSICAL
ACTIVITY**



**SUPPORT LOCAL
FARMERS**



Enhancing the Senior Produce Program with Backyard Gardeners

Canyon County Master Gardeners

In 2025:

3,186 lbs. produce donated

\$ 1,360 reinvested in the SPP

50+ types of produce

Booth resulted in purchasing and eating more fruits and veggies



Growth, Impact, and Demand

Since launching in 2021

- **\$61,570 invested in local agriculture**
- 2,098 participating households
- Voucher value increased from \$6 to \$10
- **95% voucher redemption rate in 2025**

Demand remains strong

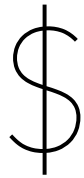
- Caldwell expanded to 150 voucher sets weekly in 2026
- Most available voucher sets are distributed each week
- In Emmett, all 37 voucher sets are often distributed within 15-30 minutes of market opening



Cooking Matters: Building Food and Nutrition Skills in Our Communities



Plan
meals



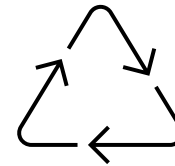
Budget
wisely



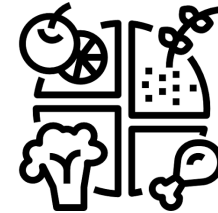
Read labels



Cook healthy
meals



Reduce
waste



Choose
nutrient-dense
foods

Participants gain confidence preparing healthy meals at home.

Cooking Matters reaches people across the lifespan

**Cooking
Matters for
Kids**

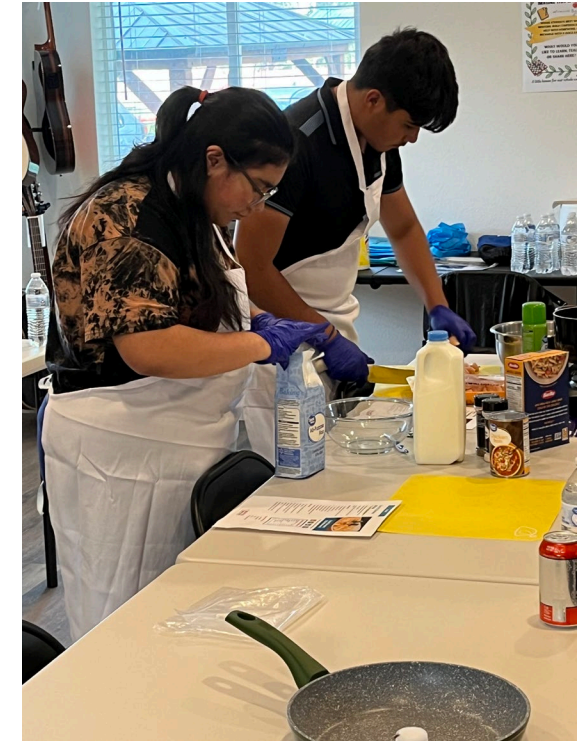
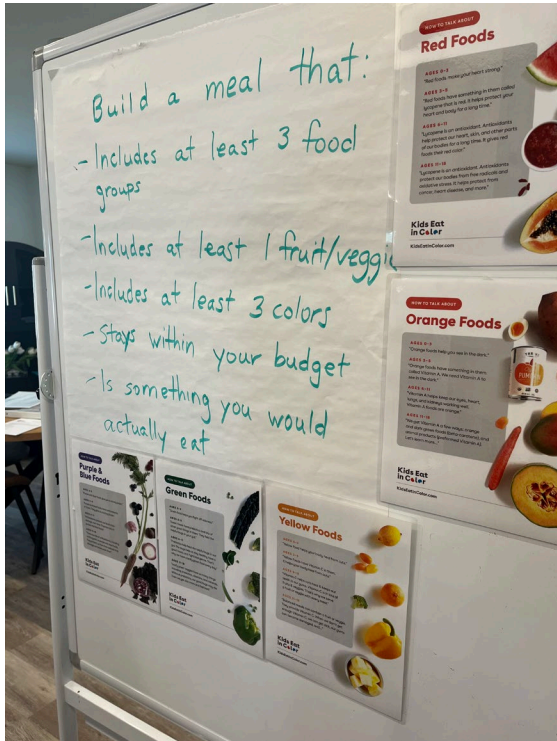
**Cooking
Matters for
Teens**

**Cooking
Matters for
Families**

**Cooking
Matters for
Adults**

- Single-session workshops
- Multi-session series
- Customized for community needs

Making Healthy Choices Easier: A Look at Our First Cooking Matters Cohort



Building healthier communities through nutrition

Healthy growth and development



Chronic disease prevention



Brain health and healthy aging



Quality of life and independence



Education • Skills Building • Healthy Food Access • Community Partnerships

How Can We Support Your Communities?



Questions?

Daniel Adams

208-296-0847

Daniel.Adams@swdh.id.gov

Denice Ahlstrom

208-455-5347

Denice.Ahlstrom@swdh.id.gov

References

- Ruani, M. A., Reiss, M. J., & Kalea, A. Z. (2023). Diet-Nutrition Information Seeking, Source Trustworthiness, and Eating Behavior Changes: An International Web-Based Survey. *Nutrients*, 15(21), 4515. <https://doi.org/10.3390/nu15214515>
- Do Nascimento, I. J. B., Pizarro, A. B., Almeida, J. M., Azzopardi-Muscat, N., Gonçalves, M. A., Björklund, M., & Novillo-Ortiz, D. (2022). Infodemics and health misinformation: a systematic review of reviews. *Bulletin of the World Health Organization*, 100(9), 544.
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- Univerity of Idaho Extension Indicators Idaho (2022 December 14) *Educational Attainment* . <http://www.indicatorsidaho.org/DrawRegion.aspx?Action=DrawRankings&RegionID=1&IndicatorID=100043>
- Rasmussen KM, Latulippe ME, Yaktine AL, editors. Review of WIC Food Packages: Proposed Framework for Revisions: Interim Report. Washington (DC): National Academies Press (US); 2016 Jul 6. 7, Promotion, Motivation, and Support of Breastfeeding with the WIC Food Packages. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK379063/>
- Zhu, C. and Zhang, W. (2026). “Early-life sugar restriction causally reduces adult cancer incidence and slows biological aging.” *Proceedings of the National Academy of Sciences*. <https://doi.org/10.1073/pnas.2610287123>

CONTRACT FOR SERVICES
Between
SOUTHWEST DISTRICT HEALTH BOARD OF HEALTH and NIKOLE ZOGG

This contract is entered into between the Southwest District Health (Public Health District 3) Board of Health, hereinafter referred to as "Board", and Nikole Zogg, hereinafter referred to as "Zogg", effective July 1, 2026, to engage the services of Zogg as the Director of Southwest District Health.

It is agreed by and between the Board and Zogg as follows:

1. EMPLOYMENT: Subject to the provisions herein set forth, Zogg is appointed as the Secretary and administrative officer of the Board and shall be appointed and employed as the Director of Southwest District Health in accordance with Idaho Code 39-413. Zogg is a salaried, at-will, Fair Labor Standards Act (FLSA) non-covered, exempt employee who shall devote such time as is required to complete her tasks as Director in a timely fashion. It is understood that Zogg may be required to devote more than 40 hours per week to complete said tasks and will do so without expectation of additional compensation beyond that set forth in this document or amendments thereto.
2. DUTIES: In addition to those functions specified in Idaho Code 39-413, Zogg is also to perform the duties customarily and routinely expected of a Chief Executive Officer, or an agency director and appointing authority as defined in Idaho Code. Those duties include, but are not limited to, ensuring District compliance with Title 39, Chapter 4, Idaho Code and other applicable Code sections, rules, contracts, and agreements; establish District executive operating procedures, policies, and protocols; determine and establish an organizational structure to fit the changing operational needs of the agency; exercise employee hiring and termination authority; determine and approve pay rates and promotions; maintain oversight of operating, personnel, and capital budgets; and, represent the Health District in the media, at public forums, and before the legislature and other governmental bodies. Further, to facilitate the timely handling of day-to-day District business, the Board hereby, and with this contract document, delegates to Zogg the authority to exercise on the Board's behalf the following duties outlined in Idaho Code 39-414, Powers and duties of the Board: 39-414(1), administer and enforce all state and district health laws, regulations, and standards; 39-414(4), enter into mutually voluntary contracts with other governmental or public agencies whereby the district agrees to render services to or for such agency in exchange for a charge reasonably calculated to cover the cost of rendering such services; 39-414(5), ensure money or payment received or collected by gift, grant, devise, or any other way shall be deposited to the respective division or sub-account of the public health district fund authorized by 39-422 Idaho Code; 39-414(8), enter into contracts with other governmental agencies as may be deemed necessary to fulfill the duties imposed upon the district in providing for the health of the citizens within the district; 39-414(10), accept, receive and utilize any gifts, grants, or funds and personal and real property that may be donated to it for the fulfillment of the purposes outlined in Title 39, Chapter 4; 39-414(11), recalculate and set a fee, higher or lower, for a fee previously approved and inserted into the District Fee Schedule by the Board when the cost to the District of any element of that fee is increased or decreased by a vendor. Fees for new services or procedures will be brought before the Board for approval prior to implementation.

NOTE: As the code sections cited herein are abbreviated summaries, the referenced sections of 39-414 are to be reviewed and used in the context of their entirety in the exercise of these delegated responsibilities. Zogg is also expected to perform all other functions and duties as from time to time may be prescribed by the Board or other controlling directives.

3. TERM OF EMPLOYMENT: The term of employment shall be for a period of one year commencing on July 1, 2026 and continuing through June 30, 2027. Either party may terminate this employment agreement by giving sixty (60) days written notice to the other party and upon the establishment of the reasons for termination as herein set forth. Zogg may give sixty (60) days notice of termination for personal or medical reasons. The Board may give sixty (60) days notice of termination to Zogg for any of the following reasons. To wit:

- a. Documented failure to substantially perform the duties in the Director's job description.
 - b. Documented lack of performance as determined by the Board.
4. COMPENSATION: For services rendered by Zogg under this agreement, compensation shall be paid to Zogg as follows:
- \$145,600 annually or \$70.00/hour effective July 1, 2026. This salary will be reviewed by March 1, 2027 and annually thereafter, to align with the budget setting process and with the fiscal year.
- PERFORMANCE AND EVALUATION: It is understood that a formal annual performance evaluation shall be conducted by the Board no later than March 1, 2027 and then by the same date annually thereafter.
5. PROFESSIONAL AFFILIATIONS: Zogg shall be permitted to participate in professional organizations such as the American Public Health Association (APHA), Idaho Public Health Association (IPHA), National Association of County and City Health Officials (NACCHO), and other similar job-related organizations. Southwest District Health shall pay membership, publication subscriptions, and meeting travel expenses if funds are available in the Board approved current fiscal year budget.
6. PROFESSIONAL GROWTH: From July 2026 through April 2027, Zogg is permitted to participate in the Executive Leaders Program (ELP) through the Center for Homeland Defense and Security at the Naval Postgraduate School. Zogg will complete all aspects of ELP on work time. All other costs are covered by the school (e.g., tuition, travel, etc.).
7. PERSONNEL BENEFITS: Zogg shall receive standard employee benefits in accordance with the personnel policies of Southwest District Health.
8. WORK-RELATED VOLUNTEER OPPORTUNITIES: Zogg shall be permitted to participate as a volunteer for organizations whose mission aligns with Southwest District Health. Volunteer work may be with local, state, or national organizations. Zogg shall prioritize responsibilities to Southwest District Health above volunteer commitments.
9. CONTRACT RENEWAL: Zogg shall be notified by the Board at least sixty (60) days in advance of the termination of this contract of the Board's intent not to renew this contract.

Signed this _____ day of _____, 2026.

Kelly Aberasturi
Chairman, Board of Health

Nikole Zogg
District Director, Southwest District Health

Resolution #XX-X

RESOLUTION TO REQUEST CLARIFICATION OF IDAHO CODE TITLE 56-203 SO THAT VERIFICATION OF LAWFUL PRESENCE IS NOT REQUIRED FOR PERMITS ISSUED BY HEALTH DISTRICTS.

WHEREAS, in 2025, the Idaho Legislature amended Idaho Code 56-203 through H135 clarifying when lawful presence must be verified, which includes any adult applying for public benefits. Public benefits are not defined in Idaho law, and

WHEREAS, federal law considers public benefits as something that is a common good and beneficial for all or most members of a community. Therefore, any public process providing a permit or approval to operate is considered a public benefit requiring lawful presence verification, and

WHEREAS, health districts issue permits to food service providers which can be considered a public health benefit under the federal definition of public benefit. and

WHEREAS, health districts issue land use permits for septic system installations which can be considered a public health benefit under the federal definition of public benefit, and

WHEREAS, Idaho Code 56-203 lists exceptions to verification of lawful presence which does not include permits for food service establishments or land use applications, and

WHEREAS, it is burdensome to landowners and food service establishments to provide verification of lawful presence when they have already obtained approval from other government agencies to rent or own space or land, and

WHEREAS, the legislative intent of H135 was to restrict access to public assistance and government resources to only citizens and not restrict restaurant cleanliness or land use approvals, and

THEREFORE, BE IT RESOLVED that the Idaho Association of Local Boards of Health seeks the addition of applications for permits and approvals be included in the list of exemptions in 67-7903 so that verification of lawful presence is not necessary in those situations.



Southwest District Health

Originator

Parties

Southwest District Health	Fruitland Middle School
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Document Type

Contract	☐ Amendment
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Summary

Name/Title:	CMB Program Implementation Fruitland MS
Description (long title):	CATCH My Breath Program Implementation Fruitland Middle School
FAIN#:	n/a
Funding Source:	State
SWDH Project Code:	95341260
Original Effective Date:	09/01/2026
Current Expiration Date:	06/01/2027
Total [Funding Amount or Cost of Service]:	1700
Allowable Indirect Rate:	0
Match Required:	NO
Match Amount:	0
FTE Supported:	n/a
District Funds Budgeted in Current FY:	0
Restrictions:	none
Target Population:	Youth in grades 5-12.
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
Hailee Ketchum	hailee.ketchum@swdh.id.gov	208.477.4162
Carol Braun	cbraun@fruitlandschools.org	208.452.3350

Applicable Law and/or Agreement

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

Public Impact

Scope of Work Summary (3-5 bullets)	SWDH to provide funding for Fruitland Middle School to implement CATCH My Breath. Program implemented in four lessons 45-50 minutes each. There are 4 versions of the program, each catered to different grade levels (5th, 6th, 7th/8th, and 9-12th).
Summary Public Impact (3-5 bullets)	To prevent youth e-cigarette use and vaping through education, advocacy, and skill-building. Reductions in nicotine vaping use and overall tobacco use. Increases in nicotine vaping knowledge and positive perceptions of a vape-free lifestyle.
Summary of Evidence-based (3-5 bullets)	The CMB Program is a peer-reviewed, evidence-based youth vaping prevention program developed by The University of Texas Health Science Center at Houston (UTHealth) School of Public Health. The program provides up-to-date information to equip students with the knowledge and skills they need to make informed decisions about the use of e-cigarettes.

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date	09/14/2026	09/14/2026	09/14/2026	09/14/2026		09/14/2026
Initials	LAZ	 Charlene Cariou	BS	MA		NZ

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



Southwest District Health

Originator

Parties

Southwest District Health	Idaho West Central Mountains Youth Advocacy Coalition
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Document Type

Contract	☐ Amendment
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Summary

Name/Title:	CMB Program Implementation YAC
Description (long title):	CATCH My Breath Program Implementation Idaho West Central Mountains Youth Advocacy Coalition (YAC)
FAIN#:	n/a
Funding Source:	State
SWDH Project Code:	95341260
Original Effective Date:	09/01/2026
Current Expiration Date:	06/15/2027
Total [Funding Amount or Cost of Service]:	3400
Allowable Indirect Rate:	0
Match Required:	NO
Match Amount:	0
FTE Supported:	n/a
District Funds Budgeted in Current FY:	0
Restrictions:	none
Target Population:	Youth in grades 5-12.
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
Hailee Ketchum	hailee.ketchum@swdh.id.gov	208.477.4162
Patty Giardina	WCM.YAC@gmail.com	208.830.0702

Applicable Law and/or Agreement

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

Public Impact

Scope of Work Summary (3-5 bullets)	SWDH to provide funding for Idaho West Central Mountains YAC to implement CATCH My Breath. Program implemented in four lessons 45-50 minutes each. There are 4 versions of the program, each catered to different grade levels (5th, 6th, 7th/8th, and 9-12th).
Summary Public Impact (3-5 bullets)	To prevent youth e-cigarette use and vaping through education, advocacy, and skill-building. Reductions in nicotine vaping use and overall tobacco use. Increases in nicotine vaping knowledge and positive perceptions of a vape-free lifestyle.
Summary of Evidence-based (3-5 bullets)	The CMB Program is a peer-reviewed, evidence-based youth vaping prevention program developed by The University of Texas Health Science Center at Houston (UTHealth) School of Public Health. The program provides up-to-date information to equip students with the knowledge and skills they need to make informed decisions about the use of e-cigarettes.

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date	08/27/2026		08/28/2026	08/31/2026		08/31/2026
Initials	LAK		BS	MA		NJ

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



Southwest District Health

Originator

Parties

Fruitland Middle School	Southwest District Health
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Document Type

Agreement	☐ Amendment
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Summary

Name/Title:	CMB Program Implementation
Description (long title):	CATCH My Breath Program Implementation
FAIN#:	n/a
Funding Source:	State
SWDH Project Code:	95341260
Original Effective Date:	09/08/2026
Current Expiration Date:	06/01/2027
Total [Funding Amount or Cost of Service]:	0
Allowable Indirect Rate:	0
Match Required:	NO
Match Amount:	0
FTE Supported:	n/a
District Funds Budgeted in Current FY:	0
Restrictions:	none
Target Population:	Youth in grades 5-12.
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
Raquel Nuñez	SWDH	Raquel.Nunez@swdh.id.gov
Maureen Seidel	Fruitland Middle School	mseidel@fruitlandschools.org

Applicable Law and/or Agreement

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

Public Impact

Scope of Work Summary (3-5 bullets)	SWDH to implement CATCH My Breath (CMB) with local school district. Program implemented in four lessons 45-50 minutes each by SWDH facilitator. There are 4 versions of the program, each catered to different grade levels (5th, 6th, 7th/8th, and 9-12th).
Summary Public Impact (3-5 bullets)	To prevent youth e-cigarette use and vaping through education, advocacy, and skill-building. Reductions in nicotine vaping use and overall tobacco use. Increases in nicotine vaping knowledge and positive perceptions of a vape-free lifestyle.
Summary of Evidence-based (3-5 bullets)	The CMB Program is a peer-reviewed, evidence-based youth vaping prevention program developed by The University of Texas Health Science Center at Houston (UTHealth) School of Public Health. The program provides up-to-date information to equip students with the knowledge and skills they need to make informed decisions about the use of e-cigarettes.

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date	09/09/2026	09/09/2026	09/09/2026	09/09/2026		09/09/2026
Initials	LK	 Charlene Cariou	BS	MH		NZ

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



Southwest District Health

Originator

Parties

IDHW	IDHW & SWDH
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Document Type

Subgrant	☒ Amendment
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Summary

Name/Title:	WIC & Breastfeeding Peer Counseling Services
Description (long title):	HC5992 WIC & Breastfeeding Peer Counseling Services
FAIN#:	257IDID1W5003, 247IDID1W5003, 267IDID7W1003
Funding Source:	State
SWDH Project Code:	33010, 33020, 33030, 33040, 33050
Original Effective Date:	10/01/2024
Current Expiration Date:	09/30/2027
Total [Funding Amount or Cost of Service]:	\$ 4,140,215.00
Allowable Indirect Rate:	33.84%
Match Required:	NO
Match Amount:	\$ 0.00
FTE Supported:	21
District Funds Budgeted in Current FY:	\$ 719,006.24
Restrictions:	NA
Target Population:	Current and future WIC and breastfeeding clients
If this is an amendment, briefly describe the change. Add funds, revise terms & conditions, scope of work and cost/billing procedures.	

Contacts

Contact Name (Internal & External)	Contact [Agency, Organization, Contractor, Vendor, Partner]	Contact Email or Phone Number
Kathy Puckett	IDHW	kathy.puckett@dhw.idaho.gov
Alyson Nielsen	SWDH	alyson.nielsen@swdh.id.gov

Applicable Law and/or Agreement

Idaho Statutes or Rules (select up to 3)	74-106, IC	N/A	N/A
Agreement	MOU with IDHW		

Public Impact

Scope of Work Summary (3-5 bullets)	1. Improve maternal, infant, and early childhood nutrition and health outcomes by providing nutrition education, breastfeeding support, supplemental foods, and referrals to health and social services. 2. Ensure compliance with federal and state WIC regulations, program integrity standards, and quality assurance protocols 3. Conduct eligibility assessments, including income screening, nutrition risk assessment, and required anthropometric/biochemical measurements.
Summary Public Impact (3-5 bullets)	1. Generates return on investment through dollars spent at local grocery stores, positively supporting local economies. 2. WIC participation improves birth outcomes, child growth, nutrition, cognitive development, and healthcare access. 3. Produces significant healthcare savings through reduction of low birth-weight and pre-term infants
Summary of Evidence-based (3-5 bullets)	1. Reduction of food insecurity 2. Improved maternal and infant health 3. Provides significant healthcare cost savings 4. Enhanced diet quality and child development 5. Increased breastfeeding success

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date		09/01/2026	09/01/2026	09/01/2026		09/01/2026
Initials		AN	EAK EAK	MA		NZ

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



Southwest District Health

Originator

Parties

Idaho Arts Charter	Southwest District Health
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Document Type

Agreement	☐ Amendment
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Summary

Name/Title:	CMB Program Implementation
Description (long title):	CATCH My Breath Program Implementation
FAIN#:	n/a
Funding Source:	State
SWDH Project Code:	95341260
Original Effective Date:	09/08/2026
Current Expiration Date:	06/01/2027
Total [Funding Amount or Cost of Service]:	0
Allowable Indirect Rate:	0
Match Required:	NO
Match Amount:	0
FTE Supported:	n/a
District Funds Budgeted in Current FY:	0
Restrictions:	none
Target Population:	Youth in grades 5-12.
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
Raquel Nuñez	SWDH	Raquel.Nunez@swdh.id.gov
Lauren DeNinno	Idaho Arts Charter	Lauren.DeNinno@idahoartscharter.org

Applicable Law and/or Agreement

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

Public Impact

Scope of Work Summary (3-5 bullets)	SWDH to implement CATCH My Breath (CMB) with local school district. Program implemented in four lessons 45-50 minutes each by SWDH facilitator. There are 4 versions of the program, each catered to different grade levels (5th, 6th, 7th/8th, and 9-12th).
Summary Public Impact (3-5 bullets)	To prevent youth e-cigarette use and vaping through education, advocacy, and skill-building. Reductions in nicotine vaping use and overall tobacco use. Increases in nicotine vaping knowledge and positive perceptions of a vape-free lifestyle.
Summary of Evidence-based (3-5 bullets)	The CMB Program is a peer-reviewed, evidence-based youth vaping prevention program developed by The University of Texas Health Science Center at Houston (UTHealth) School of Public Health. The program provides up-to-date information to equip students with the knowledge and skills they need to make informed decisions about the use of e-cigarettes.

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date	09/09/2026	09/09/2026	09/09/2026	09/09/2026		09/09/2026
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

Originator

Parties

Notus Jr/Sr High	Southwest District Health
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Document Type

Agreement	☐ Amendment
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Summary

Name/Title:	CMB Program Implementation
Description (long title):	CATCH My Breath Program Implementation
FAIN#:	n/a
Funding Source:	State
SWDH Project Code:	95341260
Original Effective Date:	09/08/2026
Current Expiration Date:	06/01/2027
Total [Funding Amount or Cost of Service]:	0
Allowable Indirect Rate:	0
Match Required:	NO
Match Amount:	0
FTE Supported:	n/a
District Funds Budgeted in Current FY:	0
Restrictions:	none
Target Population:	Youth in grades 5-12.
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
Kaydin Griffin	SWDH	Kaydin.Griffin@swdh.id.gov
Jennifer Wright	Notus Jr/Sr High	wrightj@notusschools.org

Applicable Law and/or Agreement

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

Public Impact

Scope of Work Summary (3-5 bullets)	SWDH to implement CATCH My Breath (CMB) with local school district. Program implemented in four lessons 45-50 minutes each by SWDH facilitator. There are 4 versions of the program, each catered to different grade levels (5th, 6th, 7th/8th, and 9-12th).
Summary Public Impact (3-5 bullets)	To prevent youth e-cigarette use and vaping through education, advocacy, and skill-building. Reductions in nicotine vaping use and overall tobacco use. Increases in nicotine vaping knowledge and positive perceptions of a vape-free lifestyle.
Summary of Evidence-based (3-5 bullets)	The CMB Program is a peer-reviewed, evidence-based youth vaping prevention program developed by The University of Texas Health Science Center at Houston (UTHealth) School of Public Health. The program provides up-to-date information to equip students with the knowledge and skills they need to make informed decisions about the use of e-cigarettes.

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date	09/08/2026	09/08/2026	09/08/2026	09/09/2026		09/09/2026
Initials	LA	 Charlene Cariou	BS	MA		NZ

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



Southwest District Health

Originator

Parties

Nampa School District	Southwest District Health
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Document Type

Contract	☐ Amendment
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Summary

Name/Title:	Nicotine INDEPTH Intervention Program Implementation
Description (long title):	Alternative to Suspension or Citation Nicotine Intervention Program Implementation
FAIN#:	n/a
Funding Source:	State
SWDH Project Code:	95341260
Original Effective Date:	09/01/2026
Current Expiration Date:	06/01/2027
Total [Funding Amount or Cost of Service]:	14800
Allowable Indirect Rate:	0
Match Required:	NO
Match Amount:	0
FTE Supported:	n/a
District Funds Budgeted in Current FY:	0
Restrictions:	none
Target Population:	Youth in grades 6-12.
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
Hailee Ketchum	SWDH	Hailee.Ketchum@swdh.id.gov
Steve LaBau	Nampa School District	slabau@nsd131.org

Applicable Law and/or Agreement

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

Public Impact

Scope of Work Summary (3-5 bullets)	Nampa School District to implement alternative to suspension/citation INDEPTH intervention program with students. Students referred to program if they violate school tobacco/vaping policy. Program implemented in four lessons 45-50 minutes each by NSD staff.
Summary Public Impact (3-5 bullets)	To provide a supportive, educational alternative to suspension or citation for students who violate school tobacco or vaping policies. Increases knowledge of nicotine addiction, vaping risks, and tobacco industry influences. Supports reductions in youth nicotine and tobacco use through education, behavior change, and cessation support.
Summary of Evidence-based (3-5 bullets)	The INDEPTH program by the American Lung Association was developed in partnership with the West Virginia University Prevention Research Center using established educational and public health frameworks. Evidence-informed intervention that addresses youth nicotine use through education and behavior change rather than punitive discipline.

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date	09/09/2026	09/09/2026	09/09/2026	09/09/2026		09/09/2026
Initials		 Charlene Cariou	BS	MH		NZ

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



Southwest District Health

Originator

Parties

Southwest District Health	Fruitland Middle School
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Document Type

Contract	☐ Amendment
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Summary

Name/Title:	CMB Program Implementation Fruitland MS
Description (long title):	CATCH My Breath Program Implementation Fruitland Middle School
FAIN#:	n/a
Funding Source:	State
SWDH Project Code:	95341260
Original Effective Date:	09/01/2026
Current Expiration Date:	06/01/2027
Total [Funding Amount or Cost of Service]:	1700
Allowable Indirect Rate:	0
Match Required:	NO
Match Amount:	0
FTE Supported:	n/a
District Funds Budgeted in Current FY:	0
Restrictions:	none
Target Population:	Youth in grades 5-12.
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
Hailee Ketchum	hailee.ketchum@swdh.id.gov	208.477.4162
Carol Braun	cbraun@fruitlandschools.org	208.452.3350

Applicable Law and/or Agreement

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

Public Impact

Scope of Work Summary (3-5 bullets)	SWDH to provide funding for Fruitland Middle School to implement CATCH My Breath. Program implemented in four lessons 45-50 minutes each. There are 4 versions of the program, each catered to different grade levels (5th, 6th, 7th/8th, and 9-12th).
Summary Public Impact (3-5 bullets)	To prevent youth e-cigarette use and vaping through education, advocacy, and skill-building. Reductions in nicotine vaping use and overall tobacco use. Increases in nicotine vaping knowledge and positive perceptions of a vape-free lifestyle.
Summary of Evidence-based (3-5 bullets)	The CMB Program is a peer-reviewed, evidence-based youth vaping prevention program developed by The University of Texas Health Science Center at Houston (UTHealth) School of Public Health. The program provides up-to-date information to equip students with the knowledge and skills they need to make informed decisions about the use of e-cigarettes.

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date	09/14/2026	09/14/2026	09/14/2026	09/14/2026		09/14/2026
Initials	LAZ	 Charlene Cariou	BS	MA		NZ

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



Southwest District Health

Originator

Parties

Southwest District Health	Idaho West Central Mountains Youth Advocacy Coalition
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Document Type

Contract	☐ Amendment
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Summary

Name/Title:	CMB Program Implementation YAC
Description (long title):	CATCH My Breath Program Implementation Idaho West Central Mountains Youth Advocacy Coalition (YAC)
FAIN#:	n/a
Funding Source:	State
SWDH Project Code:	95341260
Original Effective Date:	09/01/2026
Current Expiration Date:	06/15/2027
Total [Funding Amount or Cost of Service]:	3400
Allowable Indirect Rate:	0
Match Required:	NO
Match Amount:	0
FTE Supported:	n/a
District Funds Budgeted in Current FY:	0
Restrictions:	none
Target Population:	Youth in grades 5-12.
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
Hailee Ketchum	hailee.ketchum@swdh.id.gov	208.477.4162
Patty Giardina	WCM.YAC@gmail.com	208.830.0702

Applicable Law and/or Agreement

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

Public Impact

Scope of Work Summary (3-5 bullets)	SWDH to provide funding for Idaho West Central Mountains YAC to implement CATCH My Breath. Program implemented in four lessons 45-50 minutes each. There are 4 versions of the program, each catered to different grade levels (5th, 6th, 7th/8th, and 9-12th).
Summary Public Impact (3-5 bullets)	To prevent youth e-cigarette use and vaping through education, advocacy, and skill-building. Reductions in nicotine vaping use and overall tobacco use. Increases in nicotine vaping knowledge and positive perceptions of a vape-free lifestyle.
Summary of Evidence-based (3-5 bullets)	The CMB Program is a peer-reviewed, evidence-based youth vaping prevention program developed by The University of Texas Health Science Center at Houston (UTHealth) School of Public Health. The program provides up-to-date information to equip students with the knowledge and skills they need to make informed decisions about the use of e-cigarettes.

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date	08/27/2026		08/28/2026	08/31/2026		08/31/2026
Initials	LAK		BS	MA		NZ

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



Southwest District Health

Originator

Parties

Fruitland Middle School	Southwest District Health
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Document Type

Agreement	☐ Amendment
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Summary

Name/Title:	CMB Program Implementation
Description (long title):	CATCH My Breath Program Implementation
FAIN#:	n/a
Funding Source:	State
SWDH Project Code:	95341260
Original Effective Date:	09/08/2026
Current Expiration Date:	06/01/2027
Total [Funding Amount or Cost of Service]:	0
Allowable Indirect Rate:	0
Match Required:	NO
Match Amount:	0
FTE Supported:	n/a
District Funds Budgeted in Current FY:	0
Restrictions:	none
Target Population:	Youth in grades 5-12.
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
Raquel Nuñez	SWDH	Raquel.Nunez@swdh.id.gov
Maureen Seidel	Fruitland Middle School	mseidel@fruitlandschools.org

Applicable Law and/or Agreement

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

Public Impact

Scope of Work Summary (3-5 bullets)	SWDH to implement CATCH My Breath (CMB) with local school district. Program implemented in four lessons 45-50 minutes each by SWDH facilitator. There are 4 versions of the program, each catered to different grade levels (5th, 6th, 7th/8th, and 9-12th).
Summary Public Impact (3-5 bullets)	To prevent youth e-cigarette use and vaping through education, advocacy, and skill-building. Reductions in nicotine vaping use and overall tobacco use. Increases in nicotine vaping knowledge and positive perceptions of a vape-free lifestyle.
Summary of Evidence-based (3-5 bullets)	The CMB Program is a peer-reviewed, evidence-based youth vaping prevention program developed by The University of Texas Health Science Center at Houston (UTHealth) School of Public Health. The program provides up-to-date information to equip students with the knowledge and skills they need to make informed decisions about the use of e-cigarettes.

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date	09/09/2026	09/09/2026	09/09/2026	09/09/2026		09/09/2026
Initials	LK	 Charlene Cariou	BS	MH		NZ

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



Southwest District Health

Originator

Parties

IDHW	IDHW & SWDH
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Document Type

Subgrant	☒ Amendment
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Summary

Name/Title:	WIC & Breastfeeding Peer Counseling Services
Description (long title):	HC5992 WIC & Breastfeeding Peer Counseling Services
FAIN#:	257IDID1W5003, 247IDID1W5003, 267IDID7W1003
Funding Source:	State
SWDH Project Code:	33010, 33020, 33030, 33040, 33050
Original Effective Date:	10/01/2024
Current Expiration Date:	09/30/2027
Total [Funding Amount or Cost of Service]:	\$ 4,140,215.00
Allowable Indirect Rate:	33.84%
Match Required:	NO
Match Amount:	\$ 0.00
FTE Supported:	21
District Funds Budgeted in Current FY:	\$ 719,006.24
Restrictions:	NA
Target Population:	Current and future WIC and breastfeeding clients
If this is an amendment, briefly describe the change. Add funds, revise terms & conditions, scope of work and cost/billing procedures.	

Contacts

Contact Name (Internal & External)	Contact [Agency, Organization, Contractor, Vendor, Partner]	Contact Email or Phone Number
Kathy Puckett	IDHW	kathy.puckett@dhw.idaho.gov
Alyson Nielsen	SWDH	alyson.nielsen@swdh.id.gov

Applicable Law and/or Agreement

Idaho Statutes or Rules (select up to 3)	74-106, IC	N/A	N/A
Agreement	MOU with IDHW		

Public Impact

Scope of Work Summary (3-5 bullets)	1. Improve maternal, infant, and early childhood nutrition and health outcomes by providing nutrition education, breastfeeding support, supplemental foods, and referrals to health and social services. 2. Ensure compliance with federal and state WIC regulations, program integrity standards, and quality assurance protocols 3. Conduct eligibility assessments, including income screening, nutrition risk assessment, and required anthropometric/biochemical measurements.
Summary Public Impact (3-5 bullets)	1. Generates return on investment through dollars spent at local grocery stores, positively supporting local economies. 2. WIC participation improves birth outcomes, child growth, nutrition, cognitive development, and healthcare access. 3. Produces significant healthcare savings through reduction of low birth-weight and pre-term infants
Summary of Evidence-based (3-5 bullets)	1. Reduction of food insecurity 2. Improved maternal and infant health 3. Provides significant healthcare cost savings 4. Enhanced diet quality and child development 5. Increased breastfeeding success

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date		09/01/2026	09/01/2026	09/01/2026		09/01/2026
Initials		AN	EAK EAK	MA		NZ

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



Southwest District Health

Originator

Parties

Idaho Arts Charter	Southwest District Health
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Document Type

Agreement	☐ Amendment
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Summary

Name/Title:	CMB Program Implementation
Description (long title):	CATCH My Breath Program Implementation
FAIN#:	n/a
Funding Source:	State
SWDH Project Code:	95341260
Original Effective Date:	09/08/2026
Current Expiration Date:	06/01/2027
Total [Funding Amount or Cost of Service]:	0
Allowable Indirect Rate:	0
Match Required:	NO
Match Amount:	0
FTE Supported:	n/a
District Funds Budgeted in Current FY:	0
Restrictions:	none
Target Population:	Youth in grades 5-12.
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
Raquel Nuñez	SWDH	Raquel.Nunez@swdh.id.gov
Lauren DeNinno	Idaho Arts Charter	Lauren.DeNinno@idahoartscharter.org

Applicable Law and/or Agreement

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

Public Impact

Scope of Work Summary (3-5 bullets)	SWDH to implement CATCH My Breath (CMB) with local school district. Program implemented in four lessons 45-50 minutes each by SWDH facilitator. There are 4 versions of the program, each catered to different grade levels (5th, 6th, 7th/8th, and 9-12th).
Summary Public Impact (3-5 bullets)	To prevent youth e-cigarette use and vaping through education, advocacy, and skill-building. Reductions in nicotine vaping use and overall tobacco use. Increases in nicotine vaping knowledge and positive perceptions of a vape-free lifestyle.
Summary of Evidence-based (3-5 bullets)	The CMB Program is a peer-reviewed, evidence-based youth vaping prevention program developed by The University of Texas Health Science Center at Houston (UTHealth) School of Public Health. The program provides up-to-date information to equip students with the knowledge and skills they need to make informed decisions about the use of e-cigarettes.

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date	09/09/2026	09/09/2026	09/09/2026	09/09/2026		09/09/2026
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

Originator

Parties

Notus Jr/Sr High	Southwest District Health
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Document Type

Agreement	☐ Amendment
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Summary

Name/Title:	CMB Program Implementation
Description (long title):	CATCH My Breath Program Implementation
FAIN#:	n/a
Funding Source:	State
SWDH Project Code:	95341260
Original Effective Date:	09/08/2026
Current Expiration Date:	06/01/2027
Total [Funding Amount or Cost of Service]:	0
Allowable Indirect Rate:	0
Match Required:	NO
Match Amount:	0
FTE Supported:	n/a
District Funds Budgeted in Current FY:	0
Restrictions:	none
Target Population:	Youth in grades 5-12.
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
Kaydin Griffin	SWDH	Kaydin.Griffin@swdh.id.gov
Jennifer Wright	Notus Jr/Sr High	wrightj@notusschools.org

Applicable Law and/or Agreement

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

Public Impact

Scope of Work Summary (3-5 bullets)	SWDH to implement CATCH My Breath (CMB) with local school district. Program implemented in four lessons 45-50 minutes each by SWDH facilitator. There are 4 versions of the program, each catered to different grade levels (5th, 6th, 7th/8th, and 9-12th).
Summary Public Impact (3-5 bullets)	To prevent youth e-cigarette use and vaping through education, advocacy, and skill-building. Reductions in nicotine vaping use and overall tobacco use. Increases in nicotine vaping knowledge and positive perceptions of a vape-free lifestyle.
Summary of Evidence-based (3-5 bullets)	The CMB Program is a peer-reviewed, evidence-based youth vaping prevention program developed by The University of Texas Health Science Center at Houston (UTHealth) School of Public Health. The program provides up-to-date information to equip students with the knowledge and skills they need to make informed decisions about the use of e-cigarettes.

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date	09/08/2026	09/08/2026	09/08/2026	09/09/2026		09/09/2026
Initials	LA	 Charlene Cariou	BS	MA		NZ

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



Southwest District Health

Originator

Parties

Nampa School District	Southwest District Health
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Document Type

Contract	☐ Amendment
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Summary

Name/Title:	Nicotine INDEPTH Intervention Program Implementation
Description (long title):	Alternative to Suspension or Citation Nicotine Intervention Program Implementation
FAIN#:	n/a
Funding Source:	State
SWDH Project Code:	95341260
Original Effective Date:	09/01/2026
Current Expiration Date:	06/01/2027
Total [Funding Amount or Cost of Service]:	14800
Allowable Indirect Rate:	0
Match Required:	NO
Match Amount:	0
FTE Supported:	n/a
District Funds Budgeted in Current FY:	0
Restrictions:	none
Target Population:	Youth in grades 6-12.
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
Hailee Ketchum	SWDH	Hailee.Ketchum@swdh.id.gov
Steve LaBau	Nampa School District	slabau@nsd131.org

Applicable Law and/or Agreement

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

Public Impact

Scope of Work Summary (3-5 bullets)	Nampa School District to implement alternative to suspension/citation INDEPTH intervention program with students. Students referred to program if they violate school tobacco/vaping policy. Program implemented in four lessons 45-50 minutes each by NSD staff.
Summary Public Impact (3-5 bullets)	To provide a supportive, educational alternative to suspension or citation for students who violate school tobacco or vaping policies. Increases knowledge of nicotine addiction, vaping risks, and tobacco industry influences. Supports reductions in youth nicotine and tobacco use through education, behavior change, and cessation support.
Summary of Evidence-based (3-5 bullets)	The INDEPTH program by the American Lung Association was developed in partnership with the West Virginia University Prevention Research Center using established educational and public health frameworks. Evidence-informed intervention that addresses youth nicotine use through education and behavior change rather than punitive discipline.

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date	09/09/2026	09/09/2026	09/09/2026	09/09/2026		09/09/2026
Initials		 Charlene Cariou	BS	MH		NZ

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



Southwest District Health

Funder

Parties

ID Health & Welfare	SWDH
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Document Type

Grant Application			
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Summary

Name/Title:	Idaho Rural Health Transformation Grant - Infrastructure Grant
Description (long title):	Community Mobile Health Delivery
FAIN#:	
Funding Source:	Fed allocation to ID
SWDH Project Code:	
Original Effective Date:	9/30/2026
Current Expiration Date:	9/29/2028
Total [Funding Amount or Cost of Service]:	\$ 461,680
Allowable Indirect Rate:	10.00%
Match Required:	NO
Match Amount:	\$ 0.00
FTE Supported:	None
District Funds Budgeted in Current FY:	
Restrictions:	
Target Population:	Vehicle and equipment for EMT expansion in rural counties
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
Nikki Zogg	Director	Nikole.Zogg@swdh.id.gov

Applicable Law and/or Agreement

Idaho Statutes or Rules (select up to 3)	39-409	Choose an Item	Choose an Item
Agreement	Choose an item		

Public Impact

Scope of Work Summary (3-5 bullets)	- Planning grant to partner with prosecutor's office in various counties - Configure referral pathways - Deliver Parents as Teachers to families with children under 5 and mother participating to avoid incarceration.
Summary Public Impact (3-5 bullets)	- Less women in prison for minor crimes - Fewer children going into foster care because their parent or caregiver can still care for them - Financial savings for Jails and Courts - Decreases recidivism - Strengthen families
Summary of Evidence-based (3-5 bullets)	PAT is an evidence-based curriculum

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date						
Initials						

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



Southwest District Health

Funder

Parties

ID Health & Welfare	SWDH
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Document Type

Grant Application			
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Summary

Name/Title:	Idaho Rural Health Transformation Grant – Behavioral Health
Description (long title):	Increase capacity for counseling in-person and telehealth for rural communities
FAIN#:	
Funding Source:	Fed allocation to ID
SWDH Project Code:	
Original Effective Date:	9/30/2026
Current Expiration Date:	9/29/2031
Total [Funding Amount or Cost of Service]:	\$ 200,000
Allowable Indirect Rate:	10.00%
Match Required:	NO
Match Amount:	\$ 0.00
FTE Supported:	None
District Funds Budgeted in Current FY:	
Restrictions:	
Target Population:	Rural counties, people needing behavioral health support
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	Program Manager II Behavioral Health	Michelle.Schildhauer@swdh.id.gov

Applicable Law and/or Agreement

Idaho Statutes or Rules (select up to 3)	39-409	Choose an Item	Choose an Item
Agreement	Choose an item		

Public Impact

Scope of Work Summary (3-5 bullets)	- Planning grant to partner with prosecutor's office in various counties - Configure referral pathways - Deliver Parents as Teachers to families with children under 5 and mother participating to avoid incarceration.
Summary Public Impact (3-5 bullets)	- Less women in prison for minor crimes - Fewer children going into foster care because their parent or caregiver can still care for them - Financial savings for Jails and Courts - Decreases recidivism - Strengthen families
Summary of Evidence-based (3-5 bullets)	PAT is an evidence-based curriculum

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date						
Initials						

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



Southwest District Health

Funder

Parties

ID Health & Welfare	SWDH
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Document Type

Grant Application			
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Summary

Name/Title:	Idaho Rural Health Transformation Grant - Infrastructure Grant
Description (long title):	Healthcare Infrastructure Support
FAIN#:	
Funding Source:	Fed allocation to ID
SWDH Project Code:	
Original Effective Date:	9/30/2026
Current Expiration Date:	9/29/2027
Total [Funding Amount or Cost of Service]:	\$ 1,779,700
Allowable Indirect Rate:	10.00%
Match Required:	NO
Match Amount:	\$ 0.00
FTE Supported:	None
District Funds Budgeted in Current FY:	(Reserve of \$137,000 for vehicle replacements)
Restrictions:	
Target Population:	Improvements to SWDH Caldwell infrastructure. Fleet vehicles, roof, solar project, HR upgrade, financial software, IT, Prof education.
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
Don Lee	COO	Don.Lee@swdh.id.gov

Applicable Law and/or Agreement

Idaho Statutes or Rules (select up to 3)	39-409	Choose an Item	Choose an Item
Agreement	Choose an item		

Public Impact

Scope of Work Summary (3-5 bullets)	- Planning grant to partner with prosecutor's office in various counties - Configure referral pathways - Deliver Parents as Teachers to families with children under 5 and mother participating to avoid incarceration.
Summary Public Impact (3-5 bullets)	- Less women in prison for minor crimes - Fewer children going into foster care because their parent or caregiver can still care for them - Financial savings for Jails and Courts - Decreases recidivism - Strengthen families
Summary of Evidence-based (3-5 bullets)	PAT is an evidence-based curriculum

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date						
Initials						

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



Southwest District Health

Funder

Parties

ID Health & Welfare	SWDH
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Document Type

Grant Application			
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Summary

Name/Title:	Idaho Rural Health Transformation Grant – Substance Use Prevention
Description (long title):	Deliver Parenting with Love & Logic as primary prevention
FAIN#:	
Funding Source:	Fed allocation to ID
SWDH Project Code:	
Original Effective Date:	9/30/2026
Current Expiration Date:	9/29/2031
Total [Funding Amount or Cost of Service]:	\$ 200,000
Allowable Indirect Rate:	10.00%
Match Required:	NO
Match Amount:	\$ 0.00
FTE Supported:	None
District Funds Budgeted in Current FY:	
Restrictions:	
Target Population:	Vehicle and equipment for EMT expansion in rural counties
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	Program Manager II Behavioral Health	Michelle.Schildhauer@swdh.id.gov

Applicable Law and/or Agreement

Idaho Statutes or Rules (select up to 3)	39-409	Choose an Item	Choose an Item
Agreement	Choose an item		

Public Impact

Scope of Work Summary (3-5 bullets)	- Planning grant to partner with prosecutor's office in various counties - Configure referral pathways - Deliver Parents as Teachers to families with children under 5 and mother participating to avoid incarceration.
Summary Public Impact (3-5 bullets)	- Less women in prison for minor crimes - Fewer children going into foster care because their parent or caregiver can still care for them - Financial savings for Jails and Courts - Decreases recidivism - Strengthen families
Summary of Evidence-based (3-5 bullets)	PAT is an evidence-based curriculum

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date						
Initials						

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



Southwest District Health

Originator

Parties

Syringa Middle School	Southwest District Health
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Document Type

Agreement	☐ Amendment
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Summary

Name/Title:	CMB Program Implementation
Description (long title):	CATCH My Breath Program Implementation
FAIN#:	n/a
Funding Source:	State
SWDH Project Code:	95341260
Original Effective Date:	09/08/2026
Current Expiration Date:	06/01/2027
Total [Funding Amount or Cost of Service]:	0
Allowable Indirect Rate:	0
Match Required:	NO
Match Amount:	0
FTE Supported:	n/a
District Funds Budgeted in Current FY:	0
Restrictions:	none
Target Population:	Youth in grades 5-12.
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
Raquel Nuñez	SWDH	Raquel.Nunez@swdh.id.gov
Emily Steele	Syringa Middle School	esteele@caldwellschools.org

Applicable Law and/or Agreement

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

Public Impact

Scope of Work Summary (3-5 bullets)	SWDH to implement CATCH My Breath (CMB) with local school district. Program implemented in four lessons 45-50 minutes each by SWDH facilitator. There are 4 versions of the program, each catered to different grade levels (5th, 6th, 7th/8th, and 9-12th).
Summary Public Impact (3-5 bullets)	To prevent youth e-cigarette use and vaping through education, advocacy, and skill-building. Reductions in nicotine vaping use and overall tobacco use. Increases in nicotine vaping knowledge and positive perceptions of a vape-free lifestyle.
Summary of Evidence-based (3-5 bullets)	The CMB Program is a peer-reviewed, evidence-based youth vaping prevention program developed by The University of Texas Health Science Center at Houston (UTHealth) School of Public Health. The program provides up-to-date information to equip students with the knowledge and skills they need to make informed decisions about the use of e-cigarettes.

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date	09/08/2026	09/08/2026	09/08/2026	09/09/2026		09/09/2026
Initials	LA	 Charlene Cariou	BS	MH		NZ

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



Southwest District Health

Originator

Parties

Syringa Middle School	Southwest District Health
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Document Type

Agreement	☐ Amendment
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Summary

Name/Title:	CMB Program Implementation
Description (long title):	CATCH My Breath Program Implementation
FAIN#:	n/a
Funding Source:	State
SWDH Project Code:	95341260
Original Effective Date:	09/08/2026
Current Expiration Date:	06/01/2027
Total [Funding Amount or Cost of Service]:	0
Allowable Indirect Rate:	0
Match Required:	NO
Match Amount:	0
FTE Supported:	n/a
District Funds Budgeted in Current FY:	0
Restrictions:	none
Target Population:	Youth in grades 5-12.
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
Raquel Nuñez	SWDH	Raquel.Nunez@swdh.id.gov
Emily Steele	Syringa Middle School	esteele@caldwellschools.org

Applicable Law and/or Agreement

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

Public Impact

Scope of Work Summary (3-5 bullets)	SWDH to implement CATCH My Breath (CMB) with local school district. Program implemented in four lessons 45-50 minutes each by SWDH facilitator. There are 4 versions of the program, each catered to different grade levels (5th, 6th, 7th/8th, and 9-12th).
Summary Public Impact (3-5 bullets)	To prevent youth e-cigarette use and vaping through education, advocacy, and skill-building. Reductions in nicotine vaping use and overall tobacco use. Increases in nicotine vaping knowledge and positive perceptions of a vape-free lifestyle.
Summary of Evidence-based (3-5 bullets)	The CMB Program is a peer-reviewed, evidence-based youth vaping prevention program developed by The University of Texas Health Science Center at Houston (UTHealth) School of Public Health. The program provides up-to-date information to equip students with the knowledge and skills they need to make informed decisions about the use of e-cigarettes.

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date	09/08/2026	09/08/2026	09/08/2026	09/09/2026		09/09/2026
Initials	LA	 Charlene Cariou	BS	MH		NZ

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



Southwest District Health

Funder

Parties

ID Health & Welfare	SWDH
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Document Type

Grant Application			
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Summary

Name/Title:	Idaho Rural Health Transformation Grant – Behavioral Health
Description (long title):	Increase capacity for counseling in-person and telehealth for rural communities
FAIN#:	
Funding Source:	Fed allocation to ID
SWDH Project Code:	
Original Effective Date:	9/30/2026
Current Expiration Date:	9/29/2031
Total [Funding Amount or Cost of Service]:	\$ 200,000
Allowable Indirect Rate:	10.00%
Match Required:	NO
Match Amount:	\$ 0.00
FTE Supported:	None
District Funds Budgeted in Current FY:	
Restrictions:	
Target Population:	Rural counties, people needing behavioral health support
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	Program Manager II Behavioral Health	Michelle.Schildhauer@swdh.id.gov

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)	-Rural Health focus on early detection and mental health interventions; -Coordinate with other community resources to ensure ongoing treatment if needed -Offer virtual services if needed
Summary Public Impact (3-5 bullets)	- Increase access to behavioral health assessment, treatment and referral in rural communities in person and virtually -Overcome barriers of cost and travel by bringing services to SWDH hub locations
Summary of Evidence-based (3-5 bullets)	-Licensed mental health professional using evidence-based practices and assessments

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date						
Initials						

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



Southwest District Health

Funder

Parties

ID Health & Welfare	SWDH
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Document Type

Grant Application			
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Summary

Name/Title:	Idaho Rural Health Transformation Grant – Substance Use Prevention
Description (long title):	Deliver Parenting with Love & Logic as primary prevention
FAIN#:	
Funding Source:	Fed allocation to ID
SWDH Project Code:	
Original Effective Date:	9/30/2026
Current Expiration Date:	9/29/2031
Total [Funding Amount or Cost of Service]:	\$ 200,000
Allowable Indirect Rate:	10.00%
Match Required:	NO
Match Amount:	\$ 0.00
FTE Supported:	None
District Funds Budgeted in Current FY:	
Restrictions:	
Target Population:	Vehicle and equipment for EMT expansion in rural counties
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	Program Manager II Behavioral Health	Michelle.Schildhauer@swdh.id.gov

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)	- Services are primary prevention for youth substance misuse by conducting parenting education shown to decrease risky behaviors and likelihood of substance abuse -Collaborate with mental health providers, schools, juvenile probation to encourage parents whose kids may already be experimenting or having challenges with substance use -Provide Parenting with Love and Logic
Summary Public Impact (3-5 bullets)	- Increase access to evidence-based parenting education that helps parents have difficult conversations with their kids, set appropriate limits and provide guidance, strengthening the whole family -Bring effective parenting education to communities where it is not accessible.
Summary of Evidence-based (3-5 bullets)	-Parenting with Love and Logic has been implemented nationally and internationally for over 50 years. It's strategies are based on evidence from research on the model.

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date						
Initials						

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



Southwest District Health

Funder

Parties

ID Health & Welfare	SWDH
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Document Type

Grant Application			
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Summary

Name/Title:	Idaho Rural Health Transformation Grant - Infrastructure Grant
Description (long title):	Healthcare Infrastructure Support
FAIN#:	
Funding Source:	Fed allocation to ID
SWDH Project Code:	
Original Effective Date:	9/30/2026
Current Expiration Date:	9/29/2027
Total [Funding Amount or Cost of Service]:	\$ 1,779,700
Allowable Indirect Rate:	10.00%
Match Required:	NO
Match Amount:	\$ 0.00
FTE Supported:	None
District Funds Budgeted in Current FY:	(Reserve of \$137,000 for vehicle replacements)
Restrictions:	
Target Population:	Improvements to SWDH Caldwell infrastructure. Fleet vehicles, roof, solar project, HR upgrade, financial software, IT, Prof education.
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
Don Lee	COO	Don.Lee@swdh.id.gov

Applicable Law and/or Agreement

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

Public Impact

Scope of Work Summary (3-5 bullets)	The proposed project will create sustainable healthcare infrastructure that improves care coordination, expands mobile and telehealth service capacity, and enhances regional collaboration. A critical component of this effort is the replacement of the Caldwell facility roof, which will protect the building, equipment, records, and ongoing operations from water damage while
Summary Public Impact (3-5 bullets)	In addition, maintaining a reliable vehicle fleet is essential for ensuring staff can continue delivering public health services and resources across SWDH's large rural service area. These infrastructure investments will improve service delivery, strengthen system reliability, and support equitable access to care for rural communities throughout the district.
Summary of Evidence-based (3-5 bullets)	This proposal reflects priorities identified through the SWDH Master Facilities Plan and is informed by community health assessments, strategic planning efforts, and extensive stakeholder engagement. Supported by strong community partnerships, the project is designed to provide sustainable, scalable benefits that will strengthen public health infrastructure and improve health outcomes for rural Idaho communities beyond the grant period.

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date						
Initials						

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



Southwest District Health

Funder

Parties

ID Health & Welfare	SWDH
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Document Type

Grant Application			
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Summary

Name/Title:	Idaho Rural Health Transformation Grant - Infrastructure Grant
Description (long title):	Community Mobile Health Delivery
FAIN#:	
Funding Source:	Fed allocation to ID
SWDH Project Code:	
Original Effective Date:	9/30/2026
Current Expiration Date:	9/29/2028
Total [Funding Amount or Cost of Service]:	\$ 461,680
Allowable Indirect Rate:	10.00%
Match Required:	NO
Match Amount:	\$ 0.00
FTE Supported:	None
District Funds Budgeted in Current FY:	
Restrictions:	
Target Population:	Vehicle and equipment for EMT expansion in rural counties
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
Nikki Zogg	Director	Nikole.Zogg@swdh.id.gov

Applicable Law and/or Agreement

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

Public Impact

Scope of Work Summary (3-5 bullets)	The proposed project will create sustainable healthcare infrastructure that improves care coordination, expands mobile and telehealth service capacity, and enhances regional collaboration. A critical component of this effort is the replacement of the Caldwell facility roof, which will protect the building, equipment, records, and ongoing operations from water damage while
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Summary of Evidence-based (3-5 bullets)	This proposal reflects priorities identified through the SWDH Master Facilities Plan and is informed by community health assessments, strategic planning efforts, and extensive stakeholder engagement. Supported by strong community partnerships, the project is designed to provide sustainable, scalable benefits that will strengthen public health infrastructure and improve health outcomes for rural Idaho communities beyond the grant period.

Reviewer/Approve

	Program Manager	PM2	Division Administrator	Financial Officer	Legal*	Director
Date						
Initials						

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

PROXY

IDAHO ASSOCIATION OF DISTRICT BOARDS OF HEALTH 2026 ANNUAL CONFERENCE BUSINESS MEETING

Virtual
October 22, 2026

In accordance with the Bylaws of the Idaho Association of District Boards of Health

(Article VI, Section D – Voting), I authorize _____ to vote on
my behalf at the Idaho Association of District Boards of Health Business Meeting hosted
by Public Health – Idaho North Central District, virtually on October 22, 2026.

Board of Health Member

Date

Health District Name
