AGENDA
Wednesday, August 29, 2018 – 6:00 PM

CONSENT AGENDA: ALL ITEMS MARKED WITH A SINGLE ASTERICK (*) ARE PART OF THE CONSENT AGENDA AND REQUIRE NO DELIBERATION BY THE UNITED BOARD OF HEALTH. ANY BOARD MEMBER MAY REMOVE AN ITEM FROM THIS AGENDA TO BE CONSIDERED SEPARATELY.

PROCEED TO BOTTOM OF THIS DOCUMENT FOR APPEARANCE & EXECUTIVE SESSION GUIDELINES

In accordance with the provisions of the Americans with Disabilities Act (ADA), persons in need of a special accommodation in order to participate in this proceeding should, within two (2) days prior to the proceeding, request necessary accommodations by contacting GCHD’s Executive Office Coordinator at 409-938-2273, or via email at awolff@gchd.org.

ANY MEMBERS NEEDING TO BE REACHED DURING THE MEETING MAY BE CONTACTED AT 409-938-2288

REGULARLY SCHEDULED MEETING

Meeting Called to Order
Pledge of Allegiance

*Item #1 ACTION ...........................................Agenda

*Item #2 ACTION........................................... Excused Absence(s)

*Item #3 ACTION ...........................................Consider for Approval Minutes from July 25, 2018

*Item #4 ACTION...........................................Annual Policy/Plan Reviews
  a)  Fiscal Management Policy
  b)  Records Management Plan
  c)  Anti-Fraud Policy
  d)  Drug-Free Workplace Policy
  e)  Employee Assistance Program Policy
  f)  Employee Corrective Action Policy
  g)  Performance Evaluations Policy
  h)  Separation of Employment Policy
  i)  Sexual Harassment Policy
  j)  Vehicular Accidents/Incidents Policy
  k)  Volunteer Policy
  l)  Infection Control Plan Policy

*Item #5 ACTION ...........................................Consider for Approval Appointments and Re appointments to the Animal Services Advisory Committee

*Item #6 ACTION ...........................................Consider for Approval Revision to Appendix A in Purchasing Policy

*Item #7 ACTION ...........................................Receive and File Amended Quarterly Compliance Report (approved at the United Board of Health meeting on July 25, 2018)

*Item #8.............................................................Informational Reports
  a)  CHW June 2018 Financial Report
  b)  Morbidity Report
  c)  Letter of Support for Alliance for Community Solutions
  d)  Letter from Judge Henry Regarding Board Appointments and Re-Appointments
  e)  Letter to Cities Regarding Board Appointments and Re-Appointments
Item #9 EXECUTIVE SESSION

Texas Government Code Section 551.071, Consultation with Attorney: the Galveston County Health District United Board of Health will enter into an executive session as permitted under the Texas Open Meetings Act, Chapter 551 of the Texas Government Code, pursuant to Section 551.071 of the Government Code: to seek the advice of its attorney about pending or contemplated litigation or on a matter in which the duty of the attorney to the Galveston County Health District under the Texas Disciplinary Rules of Professional Conduct of the State Bar of Texas clearly conflicts with the Open Meetings Act relating to 18- CV-1123; ex rel. Timothy Burton v. The Galveston County Health District.

Item #10

Reconvene Regular Open Meeting

Item #11 ACTION

Possible Action from Executive Session

Item #12

Executive Report

Item #13 ACTION

Consider for Approval July 2018 Financial Report

Item #14 ACTION

Consideration of Proposed Fees
   a) Vital Statistics
   b) Environmental Fees

Item #15

Follow Up to Discussion Regarding Marinas and Water Quality

Item #16

Update on Proposed Electronic Sign at the Animal Resource Center

Item #17

Update from the Bylaws Sub Committee

Adjournment

Next Meeting: September 26, 2018

Appearances before United Board of Health

A citizen desiring to make comment to the Board shall submit a written request to the Chief Executive Officer by noon on the Wednesday preceding the Wednesday Board meeting. A statement of the nature of the matter to be considered shall accompany the request. The Chief Executive Officer shall include the requested appearance on the agenda, and the person shall be heard if he or she appears.

Executive Sessions

The United Board of Health may recess into closed meeting (Executive Session) on any item listed on this agenda if the Executive Session is authorized under the Open Meetings Act pursuant to one or more the following exceptions: Tex. Gov’t Code §§ 551.071 (consultation with attorney), 551.072 (deliberation regarding real property), 551.073 (deliberation regarding a prospective gift or donation), 551.074 (personnel matters), 551.0745 (personnel matters affecting County advisory body), 551.076 (deliberation regarding security devices or security audits), and/or 551.087 (deliberations regarding economic development negotiations). The Presiding Officer of the United Board of Health shall announce the basis for the Executive Session prior to recessing into Executive Session. However, the United Board of Health may only enter into the Executive Session on any agenda item for which a separate Executive Session has not been separately posted if, prior to conducting the Executive Session, a majority of the Board votes to go into Executive Session. This motion requirement does not apply to any agenda item that has been previously noticed to constitute or include an Executive Session.
The steps for enacting this procedure shall be as follows:

1. A Board member recommends that the discussion, so long as it pertains to one of the permissible exceptions noted above, be moved to a closed forum;

2. Additional detail about the subject-matter and why it should be discussed by the Board in private be provided to citizens in attendance, and citizens be offered the opportunity to ask questions about the matter which are to be answered at the discretion of the Board; and

3. An action or vote to commence for moving into Executive Session be passed by a majority Board members.
United Board of Health
August 2018
Item #2
Excused Absence(s)

1. Dr. McGinnis
United Board of Health
August 2018
Item #3
Consider for Approval Minutes from July 25, 2018
Galveston County United Board of Health
July 25, 2018

Board Members
Present: Dr. Raimer
       Eric Froeschner
       Tim Rainey
       John Hackbarth, DDS
       Vanessa Johnson, Esq.
       Curtis Klages DVM

Staff Present: Kathy Barroso
              Dr. Keiser
              Ronnie Schultz
              Randy Valcin
              Ashley Tompkins
              Sandra Cuellar
              Richard Mosquera
              Amber Adams

Staff Present: Amy Weber
              Andrea Cortinas
              Paula Compton
              Lea Williams
              Kenna Pruitt
              Andy Mann
              Amanda Wolff

Excused Absence(s): Tripp Montalbo, Mary Jo Godinich, MD and Patrick McGinnis, MD

Unexcused Absence(s): None

Guests: None

Items # 1-7 Consent Agenda
A motion was made by Mr. Froeschner to approve the consent agenda items one through seven. Mr. Rainey seconded the motion and the Board unanimously approved the consent agenda items.

Item #8 Executive Report
Kathy Barroso, Chief Executive Officer, presented the July 2018 Executive Report to the Board.

Item #9 Consider for Approval June 2018 Financial Report
Andrea Cortinas, Controller, presented the June 2018 financial report to the Board. A motion to approve the financial report as presented was made by Dr. Hackbarth and seconded by Mr. Rainey. The Board unanimously approved the financial report.

Item #10 Consider for Approval Revisions Made to the Purchasing Policy
Andrea Cortinas, Controller, presented the Board with the revised purchasing policy. A motion was made to approve the purchasing policy as presented by Dr. Hackbarth and seconded by Mr. Rainey. The Board unanimously approved the motion.

Item #11 Consider for Approval Quarterly Compliance Report
Lea William, Director of Contracts, General Counsel, presented the quarterly compliance report to the Board. Mr. Froeschner made a motion to amend the report to show a “non preventable incident” on the incident reported on June 24, 2018. Dr. Klages seconded the motion and the Board unanimously approved the motion.
**Item #12 Update on Electronic Sign at the Animal Resource Center**

Ron Schultz, Director of Environmental Health, gave the Board an update on the status of the ARC electronic sign. No action was needed on this item.

*The meeting adjourned at 6:52 p.m.*

______________________________ _______________________________
Chair/Vice-Chairperson       Secretary/Treasurer

______________________________ _______________________________
Date                          Date

[Back to Agenda]
United Board of Health
August 2018
Item #4
Annual Policy/Plan Reviews

a) Fiscal Management Policy
b) Records Management Plan
c) Anti-Fraud Policy
d) Drug-Free Workplace Policy
e) Employee Assistance Program Policy
f) Employee Corrective Action Policy
g) Performance Evaluations Policy
h) Separation of Employment Policy
i) Sexual Harassment Policy
j) Vehicular Accidents/Incidents Policy
k) Volunteer Policy
l) Infection Control Plan Policy
Fiscal Management

Audience

This policy applies to Galveston County Health District, Galveston Area Ambulance Authority, Coastal Health & Wellness (collectively “the District”).

Purpose

The purpose of the District Fiscal Management Policy is to provide guidance on the accounting and administration of District local, federal and state funding and to establish accountability and provide adequate controls to effectively monitor revenue and expenditures as designated in the annual budget. This policy is intended to guide the District staff, as well as the United Board of Health and Coastal Health & Wellness Governing Board, in their responsibilities regarding fiscal management.

Internal Control Procedures

Each Board is responsible for the efficient, effective and financially sound operation of the organization that it oversees, and designates responsibility to designated District personnel to manage funds according to approved budgets, and to maintain the overall adequacy and effectiveness of the internal control system. An internal control system should provide reasonable assurance that an organization will accomplish effectiveness and efficiency of operations, provide reliability of financial reporting, and ensure compliance with applicable laws and regulations. Controls must ensure that assets are not exposed to unauthorized access and use. The designated District personnel have the responsibility to establish and maintain an adequate system of internal control and to furnish the Board(s), governmental agencies, District creditors, and other agencies reliable financial information on a timely basis.

To provide additional oversight, each Board will designate a group of Board members to function as a Finance Committee. The Finance Committee(s) will review monthly financial issues and/or reports of the organization for presentation to the entire Board(s). In addition, the Board(s) have the authority to approve and will incorporate into its own minutes such matters as (i) change of the organization’s name, (ii) adoption of the annual operating budget, (iii) selection or termination of the Chief Executive Officer, (iv) incurring debt, (v) investment policies (vi) designation of depository and investment banks (vii) purchase or sale of property, (viii) leasing of real property, (ix) institution, termination or settlement of any litigation, (x) opening up or closing checking or savings accounts, (xi) selection of the District’s public accountants, (xii) signature authorities, and other such duties as detailed in the Board(s) by-laws. Annually, the Board(s), by its action, may designate such duties to District employees, as it deems appropriate.
Financial Management Procedures

It is the responsibility of the designated District personnel to assess financial operations and present the Board(s) with the information necessary to effect short-term management and long-term planning. Monthly financial statements should be available to the Finance Committee(s), for ultimate approval by the Board(s), no later than thirty days after the end of the month to which they relate. Monthly financial statements should include the balance sheet and summary of operations, and should compare actual results to budgeted results with variances explained by executive officers. The District’s accounting system will be organized and operated on a fund basis. As such, the District will maintain a General Fund and such Special Funds as needed. The General Fund, along with the Galveston Area Ambulance Authority will operate on a fiscal year ending September 30th. Coastal Health & Wellness will operate on a fiscal year ending March 31st. A qualified independent public accountant, selected by the Board(s), will conduct an annual audit in compliance with the Single Audit Act and GASB 34 requirements. In addition, the District will have prepared, and kept up to date an annual operating budget of revenue and expenses by fund which has been approved by the appropriate Board(s), and will adhere to guidelines established by the Controller to assure compliance with other requirements such as, insurance and bonding, sub-recipient monitoring, and financial reporting.

Accounting for Assets, Liabilities & Fund Balance

The District holds numerous assets including cash, receivables, inventories, property and equipment. It is the responsibility of the designated District personnel along with the Board(s) and Finance Committee(s), to ensure that policies and procedures are in effect that provide for the appropriate handling and use of these assets, and that obligations are paid and accounted for in a timely manner.

The Board(s), along with District staff, should ensure the following:

1. That there is sufficient cash to meet financial obligations, both in the short-term and long-term.
2. The District has established and follows appropriate credit and collection policies to ensure that payments are pursued and collected.
3. Inventories, property, and equipment are sufficiently controlled to ensure that the assets are appropriately used to the benefit of the District.
4. Obligations to vendors are paid appropriately and timely, and that District staff attempt to secure goods and services of appropriate quality and cost.
5. Vendors are selected based on consistency with regulatory requirements.
6. Contracts with third-party payers reflect the nature and cost of the services provided.

In order to comply with GASB 34 requirements, fixed assets will be accounted for in a self-balancing group of accounts separate and distinct from the regular General Ledger.
accounts called the *General Fixed Asset Account Group*, and Long term Liabilities will be recorded in the *General Long Term Debt Account Group*.

**Revenue Procedures**
District staff along with the Board(s) and Finance Committee(s) assume responsibility for ensuring that District services are billed according to the Board approved fee schedule, and that billings support requirements of third-party payers, when applicable. Procedures should also be in place to assure compliance with reimbursement requirements of grantor organizations as specified. Unbudgeted or excess revenue will be presented to the appropriate Finance Committee(s) and Board(s) for review and recommendation related to the use of these funds.

**Cost Accounting & Estimating Procedures**
The District will adhere to standards established in Statements of Federal Financial Accounting Standards (SFFAS) No. 4 which include: (1) accumulating and reporting costs of activities on a regular basis for management information purposes, (2) establishing responsibility segments to match costs with outputs, (3) determining the full cost of government goods and services, (4) recognizing the costs of goods and services provided by one federal entity to another, and (5) using appropriate costing methodologies to accumulate and assign costs to outputs. Practices used by District in accumulating and reporting actual costs will be consistent with its practices used in estimating costs for all programs. The District accounting system will accumulate and report related costs, distinguishing between District paid, donated services, space or equipment, and any program income authorized to be treated as match.

**Property Management Procedures**
The Board(s) have designated the responsibility to designated District personnel to ensure that an appropriate system is in place that adequately records, safeguards, and maintains property according to local, federal, and state standards. The District will maintain detailed records of all property and equipment, which include the description, location, serial number, vendor, acquisition cost, depreciation, and disposition as designated in the *District Fixed Asset Guidelines*. As requested, the District will provide such reports to the granting agency to which the District is accountable, and will abide by disposition instructions of the funding agency when the useful life of the asset has been met. A fixed asset inventory will be conducted annually and reconciled to equipment records. All financial and programmatic records, supporting documents, statistical records and other required or pertinent records of the District will be retained as indicated in the *Records Management Guidelines*. 

Page 3 of 4
Compensation Procedures
The District follows compensation guidelines established by the FLSA (Fair Labor Standards Act). The Board(s), along with designated District personnel are responsible for (1) providing reasonable assurance that employees are paid at comparable rates for similar types of services in the local geographical area, and (2) that employee benefit programs are those of importance to employees, comparable to other competitors, and within the financial capabilities of the District. Normal work hours and payday schedules will be established by the Board(s). Currently, the District maintains a number of wage/salary structures utilizing a grade/step structure in each. The wage/salary structure used for a particular employee depends on their primary funding source. Employees are compensated on a bi-weekly basis with the pay period beginning on Thursday and ending on Wednesday. For all paid positions, District will maintain an up-to-date and complete job description. Reimbursement for salary and wages will be based on documented timesheets submitted by the employee and approved by a responsible supervisory official. All employees are required to use the District’s authorized time sheet for reporting work week hours.

Travel
Employees traveling on District business will be compensated based on criteria established in the District Travel Procedures.

Purchasing Procedures
It is the policy of the District to adhere to the guidelines established in OMB Circular 110 and the District Purchasing Policy when procuring items or services for District business. These guidelines establish procedures that include, but are not limited to the following requirements (1) procure only those items, which are required to perform the mission and/or fill a bona fide need of the District, and (2) procurement will be made with complete impartiality based strictly on the merits of supplier proposals and applicable related considerations such as delivery, quantity, etc. In addition, the Board(s) and designated District personnel are responsible for adhering to the following standards of conduct as follows: (1) No employee, officer, member of the United Board of Health, the Coastal Health & Wellness Governing Board or agent of the District will participate in the selection or award or administration of a contract if a conflict of interest, real or apparent, would be involved, and (2) Members of the Board of Health or Coastal Health & Wellness Governing Board, officers, employees, or agents of the District will neither solicit nor accept gratuities, favors or anything of monetary value form contractors or potential contractors or parties to sub-agreements.

Investment Procedures
It is the policy of the District to invest public funds in a manner which will provide the highest investment return with the maximum security while meeting the daily cash flow demands of the entity and conforming to all state and local statutes governing the investment of public funds. Investment of Health District funds will follow procedures outlined in District Investment Guidelines.
RECORDS MANAGEMENT POLICY

WHEREAS, the Local Government Records Act of 1989 (Title 6, Subtitle C, Local Government Code), provides that each local government must establish an active and continuing records management program; and

WHEREAS, the Galveston County Health District, Coastal Health & Wellness, and the Galveston Area Ambulance Authority (collectively “the District”) desires to adopt a plan for that purpose prescribing policies and procedures consistent with the Texas Local Government Records Act and in the interests of cost-effective and efficient record keeping; NOW, THEREFORE:

SECTION 1. DEFINITION OF RECORDS OF THE DISTRICT

All documents, papers, letters, books, maps, photographs, sounds or video recordings, microfilms, magnetic tapes, electronic media, or other forms of media, regardless of physical form or characteristic and regardless of whether public access to it is open or restricted under the laws of the state or federal government, created or received by the District or any of its officers or employees pursuant to law or in the transaction of public business, are hereby declared to be the records of the District and shall be created, maintained, and disposed of in accordance with the provisions of this ordinance or procedures authorized by it and in no other manner.

SECTION 2. RECORDS DECLARED DISTRICT PROPERTY

All records as defined in Section 1 of this plan are hereby declared to be property of the District. No official or employee of the District has, by virtue of his or her position, any personal or proprietary rights to such records even though he or she may have developed or compiled them. The unauthorized destruction, removal of files, or use of such records without authorized lawful permission is prohibited.

SECTION 3. POLICY

It is hereby declared to be the policy of the District to provide for efficient, economical, and effective controls over the creation, distribution, organization, maintenance, use and disposition of all District records through a system of integrated procedures for the management of records from their creation to their ultimate disposition, consistent with the requirements of the Local Government Records Act and generally accepted records management practices.

SECTION 4. RECORDS MANAGEMENT OFFICER

The District, through its Chief Executive Officer or CHW Clinical Director, shall designate an individual employed as its Records Management Officer. In the event of the resignation, retirement, dismissal, or removal of the Records Management Officer, the Chief Executive Officer or CHW Clinical Director shall promptly designate another individual to fulfill this role. The individual designated as the Records Management Officer shall file his or her
name with the director and librarian of the Texas State Library within thirty (30) days of the date of designation, as provided by law. The Records Management Officer for the District will be referred to as the Records Management Coordinator. The Records Management Coordinator shall:

1. Keep a master list, composed of all departmental main lists;
2. Monitor the Records Management Plan for compliance;
3. Provide assistance to Record Liaisons;
4. Report changes or non-compliance to applicable members of the executive staff; and
5. Actively support and promote the records management program throughout the District.

SECTION 5. RECORDS LIASON DESIGNATION AND DUTIES

The Records Management Liaisons will consist of at least one (1) Records Liaison for each District department. The Records Liaisons shall:

1. Compile a main list of all records in their department;
2. Keep an updated master list on-file with the Records Management Coordinator;
3. Become familiar with the destruction periods for the records in their respective departments;
4. Review the master records list for conformity when notified of retention policy changes by the Records Management Coordinator;
5. Provide recommendations to the Records Management Coordinator for consideration of the destruction of records in accordance with approved records' control schedules. The Chief Executive Officer or CHW Clinical Director shall render final approval of said considerations; and
6. Assist in educating staff in their respective departments about lengths of time their records should be kept.

SECTION 6. RECORDS CONTROL SCHEDULES

Appropriate record control schedules issued by the Texas State Library and Archives Commission shall be adopted by the Records Management Coordinator under the direction of the Chief Executive Officer or CHW Clinical Director, as provided by law. Any

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Deleted: SECTION 5. RECORDS MANAGEMENT COMMITTEE LIASONS

The Records Management Committee Liaisons shall:

Designate a minimum of one (1) Records Liaison contact for each department who will work with the Records Management Coordinator;

Provide recommendations to the Records Management Coordinator for consideration of the destruction of records in accordance with approved records' control schedules. The Chief Executive Officer or CHW Executive Director shall render final approval of said considerations; and

Actively support and promote the records management program throughout the Galveston County Health District.

Moved down [1]: Review the master records list for conformity when notified of retention policy changes by the Records Management Coordinator;

Provide recommendations to the Records Management Coordinator for consideration of the destruction of records in accordance with approved records' control schedules. The

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destruction of the District’s records will handled be in accordance with these schedules, as well as the Local Government Records Act.

SECTION 7. DESTRUCTION OF SCHEDULED RECORDS

**Offsite Records**
All records to be sent offsite shall be arranged for transportation by the Records Management Coordinator, who shall take the request to the Chief Executive Officer or CHW Clinical Director, as stated in Section 6 of this plan, for approval. Offsite records approved for destruction are securely destroyed off site and a certificate of destruction is kept on file.

**Onsite Records**
The Records Liaisons will monitor records kept within their department for destruction dates. At the time in which records kept within departments are due for destruction, the Records Liaison shall provide the Records Management Coordinator with a completed Disposition Log indicating the documents to be destroyed. The Records Management Coordinator shall take the request to the Chief Executive Officer or CHW Clinical Director, as stated in Section 6 of this plan, for approval. Onsite records approved for destruction are destroyed according to the Disposition Log (type of destruction marked and dated) and a copy of the Disposition Log is kept on-file by the Records Management Coordinator.

SECTION 8. DESTRUCTION OF UNSCHEDULED RECORDS
A record that is not listed under an adopted records control schedule or listed on a supplemental records control schedule may be destroyed if its destruction has been approved in the same manner as a record destroyed under an approved schedule and the Records Management Coordinator has submitted to and received confirmation from the State’s Records Management Library for the approved destruction authorization request.

This Plan is adopted on the 31st day of August, 2017.

_______________________________  ____________________
Ben G. Raimer, MD  Milton Howard, DDS
Chairman  Chairman
Galveston County Health District  Coastal Health & Wellness
United Board of Health  Governing Board

_______________________________  ____________________
Kathy Barroso, CPA  Mary McClure
Chief Executive Officer  Interim Executive Director
Galveston County Health District  Coastal Health & Wellness

Records Management Plan 3
Anti-Fraud Policy

**Audience**
This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority and Coastal Health & Wellness (collectively “District”) employees, volunteers, and contractors (business associates).

**Purpose**
The purpose of this policy is to provide guidelines and controls to aid in the prevention, deterrence, and detection of fraud, theft, waste, or abuse against the District. This policy expands upon the District’s Employee Ethics, Standards of Conduct, & Conflict of Interest Policy, and outlines more specific responsibilities and expectations related to fraud. In addition, it is the intent of this policy to comply with federal whistleblower protection rights and remedies under 41 U.S.C. § 4712, and the Texas Whistleblower Act as codified under §554.001 of the Texas Government Code.

**Definitions and Examples of Fraud, Theft, Waste, and Abuse**

**Fraud** is defined as an intentional deception designed to obtain a benefit or advantage or to cause some benefit that is due to be denied. Examples of fraud include, but are not limited to:
- Any dishonest or fraudulent act;
- Improperity in the handling or reporting of money or financial transactions;
- Forgery or alteration of any document or account belonging to the District (checks, timesheets, invoices, contractor agreements, bid documents, purchase orders, electronic files, and other financial documents);
- Misrepresentation of financial reports;
- Misappropriation of funds, securities, supplies, inventory, or any other asset including furniture, computers, fixtures or equipment;
- Authorizing or receiving payments for hours not worked;
- Disclosing confidential and proprietary information to outside parties;
- Accepting or seeking anything of material value from contractors, vendors, or persons providing services/materials to the District that may be construed to be an attempt to influence the performance of an employee’s official duty in the scope of employment for the District; and
- Destruction, removal, or inappropriate use of records, furniture, fixtures and equipment.

**Theft** is defined as the act of taking something from someone unlawfully. An example of theft is taking home a printer belonging to the District and retaining it for personal use.

**Waste** is the loss or misuse of District resources that result from deficient practices, system controls, or decisions. An example of waste is incurring a late fee when registering for a conference due to an oversight or lack of attention.
Abuse is the intentional, wrongful, or improper use of resources, or misuse of rank, position, or authority which causes the loss or misuse of resources, such as tools, vehicles, computers, copy machines, etc. An example of abuse would be using District equipment or supplies to conduct personal business.

Policy
The District’s policy is to promote consistent, legal, and ethical organizational behavior by:
- Assigning responsibility for reporting fraud, theft, waste and/or abuse;
- Providing guidelines to conduct investigations of suspected fraudulent behavior; and
- Making anti-fraud awareness training available annually.

Whistleblowing
The District firmly stands behind its policy declaring that employees will not be discharged, demoted or otherwise discriminated against in retaliation for whistleblowing, so long as it is performed in good faith. In addition, whistleblower rights and remedies cannot be waived by any agreement, policy, form, or condition of employment.

Whistleblowing is disclosing information that the employee reasonably believes in good faith is evidence of the following:
- Gross mismanagement of a federal or state issued contract or grant;
- Gross waste of federal, state or county funds;
- Abuse of authority relating to a federal or state issued contract or grant;
- Substantial and specific danger to public health or safety; and/or
- Violation of a law, rule, or regulation related to a federal or state issued contract or grant (including the competition for, or negation of the contract or grant).

An employee must disclose the fraud, waste, or abuse to one of the following individuals:
- A member of Congress or a representative of a congressional committee;
- An inspector general;
- A government accountability office;
- A federal, state or county employee responsible for contract or grant oversight or management at the relevant agency;
- An official from the Department of Justice or other law enforcement agency;
- A court or grand jury; or
- A management official or other employee of the contractor or grantee who has responsibility to investigate, discover or address misconduct.

Responsibility to Report Suspected Fraud
Each employee is required to report any suspected fraud, theft, waste, abuse or other dishonest conduct to the Chief Compliance Officer and/or the Human Resources Director. Supervisors are required to report suspected fraud, theft, waste, abuse or other dishonest conduct, including reports from employees or other individuals, to the Chief Compliance Officer and/or the Human Resources Director.

The identity of an employee or complainant who, in good faith, reports suspected fraud will be protected to the fullest extent allowed by law. Suspected improprieties and/or misconduct concerning an employee's ethical conduct should be reported to the Chief Compliance Officer and/or Human Resources Director.
Resources Director. All employees are responsible for the detection and prevention of fraud, misappropriations, and other irregularities. Each administrator shall be familiar with the types of improprieties that might occur within his or her designated area of responsibility, and shall remain alert for any indication of fraud. Any fraud that is detected or suspected must be reported immediately to the Chief Compliance Officer and/or Human Resources Director, and an internal investigation may subsequently commence. All employees will be held accountable to act within the organization’s code of conduct, which maintains that no form of fraud, theft, waste or abuse shall be tolerated.

A whistleblower who believes he/she is being retaliated against for making a report of suspected fraud should contact the Chief Compliance Officer or Human Resources Director immediately. A whistleblower who believes that he/she is being retaliated against may additionally contact an authoritative official or manager of the external oversight agency involved.

Guidelines for Handling a Report of Suspected Fraud, Theft, Waste, or Abuse
Whether the initial report is made to an employee’s supervisor, the Chief Compliance Officer, and/or Human Resources Director, the reporting employee/individual should immediately be instructed to:

• Not contact the suspected individual in an effort to determine facts or demand restitution;
• Refrain from further investigating the allegations;
• Observe strict confidentiality by not discussing the case, facts, suspicions, or allegations with anyone unless specifically asked to do so by the Chief Compliance Officer and/or Human Resources Director;
• Report any form of retaliation against him/her concerning report of the suspected fraudulent activity; and
• Understand that the identity of an employee or other individual who reports a suspected act of fraud will be protected as provided by this policy.

Responsibility of the Chief Compliance Officer
Under the direction of the Chief Executive Officer and/or CHW Clinical Director, the Chief Compliance Officer or other designated investigator shall document the allegation and conduct a pertinent and formal investigation. If the investigation substantiates the allegation of fraud, appropriate corrective action will be taken in accordance with District policy.

The Chief Compliance Officer or other designated investigator shall make every effort to protect the rights and the reputations of everyone involved in a report of suspected fraud, including the individual who in good faith alleges perceived misconduct, as well as the alleged violator(s).

Whistleblower Remedies
In accordance with federal and state law, if a good faith whistleblower is subjected to retaliation, any of the following remedies on behalf of the whistleblower may be enacted (or done so by his/her representative):

• Action to stop the reprisal;
• Action to reinstate the whistleblower to the position held prior to the reprisal, together with compensatory damages (including back-pay), employment benefits, and other terms and
conditions of employment that would apply to the person in that position if the reprisal had not been taken; and/or

- The provision of monetary compensation issued to the whistleblower in an amount equal to the total amount of all costs and expenses (including attorneys' fees and expert witnesses' fees) that were reasonably incurred by the whistleblower for bringing forth the complaint regarding the reprisal.

If relief is denied, the employee has the right to file a complaint in state or federal court (whichever forum is applicable under the circumstances) against the District for compensatory damages and other available relief.

**Quarterly Compliance Report.**
Investigated incidents of suspected fraud shall be reported to District boards on a quarterly basis. The Compliance Report shall include information including, but not limited to, the circumstances that triggered the investigation, the outcome of the investigation, and subsequent corrective action(s) enacted.

**Violations and Corrective Actions**
Employees who violate the Anti-Fraud Policy and/or related procedures will be subjected to corrective action up to and including termination, in accordance with the District's Corrective Action Policy. An employee who has engaged in any form of fraud, waste, or abuse; suspects or discovers fraudulent activity and fails to report his or her suspicions as required by this policy; or who intentionally reports false or misleading information is subject to such corrective action, up to and including termination.

**Anti-Fraud Awareness Training**
The Chief Compliance Officer and/or designee will conduct employee training and/or provide training materials to District managers during in-services and/or staff meetings on an annual basis.
Drug-Free Workplace

**Audience**
This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority and Coastal Health & Wellness (collectively “the District”) employees, volunteers, students, and contractors (business associates).

**Policy**
The District shall provide a drug-free workplace in compliance with the Drug-Free Workplace Act of 1988.

It is a violation of the *Drug-Free Workplace* policy to be under the influence of, or manufacture, use, possess, sell, trade, and/or offer for sale alcohol, illegal drugs, or intoxicants while representing the District, conducting District related business, during all working hours, while on District property, operating any vehicle owned by the District, and/or while present at District sponsored events.

**Drug/Alcohol Testing**
Prospective District employees shall be required to take a drug test AFTER a pending offer of employment. If the test returns a positive result, the pending offer shall be revoked and the candidate will receive notification of this revocation in the form of an Adverse Action letter. Prospective employees wishing to dispute a positive result may have the same sample retested at their own expense.

Employees may be required to take a “for cause” drug or alcohol test if approved by the Chief Executive Officer, CHW *Clinical Director* or designee. The Chief Executive Officer, CHW *Clinical Director*, or designee may approve “for cause” drug testing on an employee if a significant complaint from the public or a coworker is received and/or if the employee’s supervisor witnesses a behavioral change in the employee which has a negative effect on the work environment.

Supervisors are responsible for contacting Human Resources immediately if it is suspected that an employee is under the influence of drugs and/or alcohol while carrying out duties of their employment.

Any employee who is operating a company owned vehicle and is involved in a vehicle accident or incident that results in damage or injury to any vehicle, personal or private property, or person, regardless of fault, will be drug and alcohol tested immediately after the incident.

To assure compliance, District executives may initiate, as needed, random drug/alcohol testing in service areas where indicated (*Reference: Vehicle Accident/Incident policy*).
**Consequences**

Any employee who tests positive for illegal substances, including prescription drugs without a valid prescription, will be terminated immediately. Employees will be subject to the same consequences of a positive drug test if he/she refuses the screening or the test, adulterates or dilutes the specimen, substitutes the specimen with that from another person, refuses to sign required forms or refuses to cooperate in the testing process in such a way that prevents accurate completion of the test.

One of the goals of the *Drug-Free Workplace* policy is to encourage employees to voluntarily seek help with alcohol and/or drug related problems. Disciplinary action will not be taken against an employee who proactively voluntarily identifies him/herself as a user of illegal drugs or an abuser of alcohol prior to being identified through other means, and who obtains official documented counseling and/or rehabilitation through the District’s employee assistance program (EAP), and thereafter refrains from using illegal drugs and/or alcohol abuse in accordance with the provisions of this policy.

**Reporting to Outside Agencies**

Should an employee hold a license or certification from a state or federal agency (i.e. RN, paramedic, M.D., D.D.O., registered sanitarian, etc.), the District shall report the positive test result to the applicable agency in accordance with rules and regulations set forth by the licensing agency.

**Tobacco Use**

The District is dedicated to improving the health and well-being of the communities it serves. As part of this mission, all persons, including employees, volunteers, students, patients, visitors, vendors, contractors and others who appear at facilities designated for District business are prohibited from using tobacco products inside, around, or on the grounds, including the parking lots and roadways, of any District buildings, facilities and vehicles. Tobacco products include, but are not limited to, cigarettes, cigars, pipes, and other smoking products; dip, chew, snuff and any other smokeless tobacco products; and electronic products that deliver nicotine or other substances, such as electronic cigarettes or vaporizers.

The District strongly encourages tobacco users interested in quitting to learn more about free smoking cessation support by calling 1-877-YES-QUIT, or visiting www.yesquit.org.

**Assistance/Information**

Employees are encouraged to make use of the District’s employee assistance program if they are concerned that they or a family member may have a drug and/or alcohol problem. Employees proactively seeking treatment through the employee assistance program will receive no sanction for seeking such assistance.

**Confidentiality**

Information received by the District regarding drug test results and/or an employee’s mandatory or self-referral to the employee assistance program is confidential, and such information shall be made solely to those individuals on a need-to-know basis.
Violation

Any violation of this policy may result in appropriate corrective disciplinary action, up to and including suspension, with or without loss of pay, or termination. It is the intent of this policy to be in compliance with the Drug-Free Workplace Act of 1988.
**Employee Assistance Program**

**Audience/Eligibility**
This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority, and Coastal Health & Wellness (collectively “the District”) employees.

**Policy**
It is the District’s policy to provide an Employee Assistance Program (EAP) that provides confidential, professional assistance to help employees and/or their immediate family members to resolve problems that affect their personal lives and/or performance on the job.

**Self-Referrals**
Employees are encouraged to seek assistance for a personal problem by contacting the EAP before job performance is impaired. Self-referrals are confidential, and no contact is made between the EAP and supervisors. Vacation or Sick leave is to be used for any time missed from work due to a self-referral to the EAP. It is the employee’s responsibility to request supervisory approval for scheduled absences. *(Reference: Attendance policy)*

**Mandatory Referrals**
Supervisors may refer employees to the EAP based on documented deteriorating or unsatisfactory job performance. Employees with a mandatory referral to the EAP will use Administrative Leave for those appointments that occur during business hours *(Reference: Employee Leave policy)*.

If an employee is given a mandatory referral to the EAP and does not make contact with the EAP within the allotted timeframe, or does not complete the recommended treatment plan, the employee will be terminated from the employment of the District. *(Reference: Corrective Action and Employee Leave policies)*

Regardless of whether the employee is referred to the EAP, the usual disciplinary procedures for poor job performance will be followed if an employee's job performance continues to be unsatisfactory.

Mandatory referrals may also apply when an employee discloses substance abuse. *(Reference: Drug-free Workplace policy)*

**Confidentiality**
Contact between the EAP and an employee or his/her immediate family member is confidential. In the case of a mandatory referral, the *Release of Information* signed by the employee allows Human Resources to receive a report of attendance or absence from a session. The *Release of Information* does not allow Human Resource to receive information regarding the nature of the visit unless, in the judgment of EAP staff, an employee represents a threat to himself or others or unless otherwise required by law. Mandatory referrals to the EAP shall be kept confidential and maintained by Human Resources separate from other personnel records.
Employee Corrective Action

Audience
This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority, and Coastal Health & Wellness (collectively “the District”) employees.

Policy
When it is determined that an employee is not meeting expectations, the most directly accountable manager is expected to take fair, consistent, appropriate, and timely corrective action.

These important factors will be considered in all applications of corrective action:
- the seriousness of the offense;
- the employee’s past record; and
- the circumstances surrounding the particular case.

The procedures below may be used or skipped at any time at the approval of Human Resources and/or the Chief Executive Officer, CHW Clinical Director, or designee.

Initial Employment Period
It is recommended that corrective action situations involving employees who are in their initial employment period be dealt with by progressive corrective action. However, an employee in their initial employment period may be immediately dismissed without notification of intent to terminate and without an official appeal to the Chief Executive Officer or CHW Clinical Director. The Chief Executive Officer or designee have the authority to approve dismissals of Public Health and GAAA employees in their initial employment period as recommended by the Program Manager. The CHW Clinical Director or designee have the authority to approve dismissals of Coastal Health & Wellness employees in their initial employment period as recommended by the Program Manager.

Regular Employees
Progressive corrective action may be skipped at any time for those situations warranting immediate action, up to termination, depending on the severity of the infraction and the consequences to the public and/or organization and at the approval of Human Resources, the Chief Executive Officer, CHW Clinical Director, or designee.

Written corrective actions are expected to be issued to the employee within one business day of the infraction and/or after the conclusion of the investigation.

Supervisors at all levels are expected to utilize the GCHD Investigation Form whenever possible to document any issue(s), investigation notes and other pertinent information to ensure conformity and consistency in the resolution of documentation. Upon resolution, the Investigation Form shall be given to Human Resources for appropriate archiving.

Four types of corrective action are recognized. These are: verbal clarification, written warning, suspension, and dismissal.
**Progressive Corrective Action**

**Step 1: Verbal Clarification**

When a performance problem is first identified, the supervisor is expected to thoroughly discuss the problem with the employee within one business day of the incident and/or after the conclusion of the investigation. Bringing the problem to the attention of the employee is often enough to prompt him/her to correct it willingly. The “verbal clarification” should be given to the employee in private, out of earshot of other employees.

The offending employee will be given a verbal clarification by his/her supervisor. The supervisor, for purposes of letting the employee know that it is an official warning, will state, "This is a verbal clarification." The supervisor is expected to document the verbal clarification on the District Official Discipline Notice to maintain documentation for future reference. This documentation should be forwarded to Human Resources for filing in the employee’s personnel file.

**Step 2: Written Warning Corrective Action**

If satisfactory performance is not achieved by issuing the employee a verbal clarification, the supervisor and/or the next level of management is expected to:

(a) Promptly notify the employee that corrective action may occur immediately after an incident occurs. Let the employee know that as soon as the investigation is complete, and all relevant facts are gathered that you will meet with them to inform them of the outcome and any actions to be taken.

(b) Promptly notify the Human Resources Director of the incident and seek any guidance about facts needed.

(c) Investigate the incident by gathering all relevant facts, including the employee’s side of the incident.

(d) Within one workday of finishing the investigation:
   a. prepare a draft corrective action for review by the Human Resources Director, and
   b. issue the approved corrective action to the employee in private allowing time for the employee to write comments.

(e) Forward the corrective action along with any supporting documentation to Human Resources for filing in the employee’s personnel file.

Written corrective actions must include the following:

(a) Complete form (or memo in some cases)

(b) Copy of the verbal clarification attached (if applicable)

(c) Statement of the policy or procedure violated or in some circumstances the job description can be attached if the employee has done something that is not on his/her approved job description (attach copy).

(d) Statement of consequences of actions (i.e. adverse impact to district, disruption of workplace, impact on GCHD credibility, adverse impact on public member(s), etc.)

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Deleted: The District Official Discipline Notice form may be used for this purpose.

Deleted: warning
Clear detailed plan to correct infraction – training by whom, by when, review policy by when, etc.

Statement of what will happen if the same or similar infraction occurs in the future.

Step 3: Suspension
If a formal discussion and written corrective action with the employee have not resulted in corrective action, the next step based on the seriousness of the offense, is suspension without pay. A suspension is time off -not to exceed 10 working days- without pay for misconduct that is not serious enough to warrant immediate dismissal. Time periods for suspensions are based on FLSA status (salary/exempt vs. hourly/non-exempt), the seriousness of the infraction, and Department of Labor guidelines and regulations.

The supervisor and/or next level of management is expected to:

(a) Complete the steps above for investigating and writing a corrective action.
(b) Work with the Human Resources Director to determine length of time employee will be suspended.
(c) Obtain all approval signatures prior to meeting with the employee.
(d) Meet in private with the employee to review the areas of concern and issue the suspension (ensure that employee is aware of when to return to work and that the suspension is without pay).
(e) Inform the employee that his/her job is in jeopardy and that failure to correct the problem will result in further action which may include termination of employment.
(f) Meet with the employee upon his/her return to review the corrective action plan.
(g) Forward the corrective action along with any supporting documentation to Human Resources for filing in the employee’s personnel file.

Step 4: Dismissal
Based on the seriousness of the offense, the employee’s past record, and the circumstances surrounding the particular case, the supervisor can initiate the intent to terminate process by documenting, in writing, the reasons for dismissal and the steps that have been taken to correct the problem.

The supervisor and/or next level of management is expected to:

(a) Schedule a meeting with the Human Resources Director to discuss if dismissal is appropriate.
(b) Assist the Human Resources Director in developing a chronology of the employee’s personnel file (to include verbal clarifications, corrective actions, personnel evaluations, etc.).
(c) Upon approval to proceed with the intent to terminate process from the Human Resources Director, Chief Executive Officer, CHW Clinical Director, or designee, assist the Human Resources Director in drafting an “intent to terminate” notice for the signature of the Director level manager. The “intent to terminate” notice will include:

- the intent to process the action,
- the reason(s) for the action,
- the effective date, and
● signature of the Director level manager
● the employee’s right to rebut the allegations in writing within 3 working days to the
Chief Executive Officer, CHW Clinical Director, or designee.

(d) Meet with the employee in private to issue the “intent to terminate” notice.
(e) Notify the employee that he/she will be placed on paid administrative leave for the three-day
rebuttal period.

The Chief Executive Officer, CHW Clinical Director or designee will issue a final termination letter to
the employee if he/she decides not to rebut the allegations in writing within the allotted time frame.

Should the employee decide to rebut the allegations in writing, the Chief Executive Officer, CHW
Clinical Director, or designee will consider the appeal and make the final determination regarding the
employment status of the employee. If the employee’s appeal is upheld, the Chief Executive Officer,
CHW Clinical Director, or designee may impose an alternative type of corrective action (other than
termination) such as a suspension without pay, demotion, transfer, etc.

Situations Warranting Immediate Dismissal
Serious problems of behavior that threaten or disrupt district operations or the work of other employees
will result in immediate action to stop the behavior. This action may range from removal of the
employee from the work site, suspension, or immediate dismissal.

Where an employee threatens or significantly disrupts operations or the work of other employees, the
progressive corrective action plan need not be followed.

Violation of any of the following rules will be considered adequate justification for immediate dismissal
for the first offense skipping the intent to terminate (not an all-inclusive list):

● use, sale, possession, transfer, manufacture, distribution, dispensation, purchase or
reporting to work under the influence or effects of alcohol, illegal narcotics, or any non-
medically prescribed controlled drug or substance on company property;
● stealing or attempting to steal property from any individual on District premises, or
stealing or attempting to steal property from the District;
● bodily assault upon any person, or fighting on District property;
● indecent conduct on District premises;
● possession of firearms or any dangerous weapons (or explosives) on District property;
● threatening, intimidating, coercing, or interfering with other employees;
● insubordination to supervisor, refusal to perform supervisor’s assignments (unless
assignment violates the law), or directing abusive or threatening language toward any
District supervisor, employee, or representative;
● disclosing business information of a confidential nature to unauthorized persons, or any
action by an employee that would create poor public relations;
● fraud committed by knowingly accepting pay for time not worked;
● acts of sabotage, or other interference with District projects;
● conviction of a felony that shows relationship between the position and reason for
conviction;
- job abandonment (absence for three consecutive working days without notifying supervisor);
- unsafe operation of equipment in a negligent manner or destruction of District material or property or the property of fellow employees (the purpose of this provision is to impress upon each employee the need to observe responsible, intelligent, and safe working practices for his own and his co-workers' safety as well as the protection of valuable District property);
- abusive language directed toward employees, management, the District, customers, patients, or vendors;
- falsification of documents;
- testing positive for any amount of illegal drugs, prescription drugs without a valid prescription, or alcohol;
- failure to complete an ordered drug and/or alcohol test; or
- violation of rules of licensure or certification board.

Other inappropriate behavior may be determined to be of equal seriousness with those listed and an employee may be given corrective action/dismissal based on those additional types of behaviors.

**Forms**

- District Official Discipline Notice
- GCHD Investigation Form
Performance Evaluations

Audience
This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority, and Coastal Health & Wellness (collectively “the District”) employees.

Policy
It is the District’s policy that each employee’s performance be evaluated at the conclusion of the initial six-month period of employment; six-months after the employee has been transferred, promoted, or demoted; with a significant change in job responsibilities; and at least annually. The period of time for completing performance evaluations will coincide with the beginning of the calendar year.

Objective
The objective of the employee performance evaluation is to:

- Obtain an official, objective and comprehensive summary of an employee's performance for reference in employment matters;
- Assess job-related strengths and competencies;
- Encourage effective communication between the employee and the supervisor(s);
- Identify and document individual contributions to the District’s mission and Strategic Health Plan;
- Evaluate whether or not goals/expectations from the prior review period were accomplished and set new goals for the new review period;
- Allows supervisors to identify, recognize, and appreciate employee instances of exceptional performance as well as identify performance problems requiring an improvement plan or other future corrective measures.

General Objectives during Performance Evaluation Period

- review and update job descriptions to ensure they meet the mission and business needs of the District and reflects actual work performed;
- review and summarize reports and performance measures that assess employee job performance over the entire review period;
- ensure that each employee understand their supervisor's evaluation of their essential job expectations and have opportunity to seek clarification and direction;
- assure each employee is evaluated based on essential job functions and categories of expectations to include strategic requirements of the District as a whole as well as that specific to their service area;
- provide each employee a summary of their job-related strengths, weaknesses, trainings, and future expectations, and a plan for development/improvement, noting any corrective actions taking over the past review period; and
- obtain a review and assessment of every evaluation by the next level of management (if applicable) to assess the immediate supervisor’s performance in completing the evaluation, to identify performance concerns, and to make recommendation to improve supervisory and employee performance.
Violation
Corrective disciplinary action up to and including, suspension, or dismissal will be taken against any supervisor willfully violating this policy.

Exceptions
Any deviations from the performance evaluation process or timeline must be reviewed and approved by the Chief Executive Officer or designee. If an employee is on Family and Medical Leave (FMLA) or another leave of absence at the normally scheduled time for a performance evaluation, the performance review may be deferred until the employee returns to work.

Forms
- Confidential Performance Evaluation
Separation of Employment

Audience
This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority, and Coastal Health & Wellness (collectively “the District”) employees.

Policy
In order to meet public service commitments, it is the District’s policy that most employees who choose to resign their employment with the District will give at least two weeks notice prior to his/her last day of employment. Furthermore, management and Coastal Health & Wellness medical and dental providers are expected to give four weeks advance notice due to advanced patient appointment schedules and business commitments.

Request for exceptions must be submitted, in writing, to the Chief Executive Officer, CHW Clinical Director, or designee. Only legitimate, unavoidable circumstances will be considered by the Chief Executive Officer, CHW Clinical Director, or his/her designee.

Employees wishing to resign are to submit a written notice of resignation prior to the effective date of resignation. The notice must be submitted to the supervisor(s) for forwarding to Human Resources.

Upon separation, employees are expected to comply with the requirements of the District’s employee retirement plan.

Accrued Leave Payouts
If an employee is involuntarily separated from employment due to a reduction in force, or as a result of corrective action, the employee will receive the full balance of accrued, unused vacation leave and compensatory time.

If an employee voluntarily resigns from employment with at least two weeks’ advance written notice (with the exception of providers and management, who must give four weeks’ advance written notice), the employee will receive the full balance of accrued, unused vacation leave and compensatory time.

Unless an exception is granted by the Chief Executive Officer, CHW Clinical Director, or designee, if an employee voluntarily resigns from employment with less than two weeks’ advance written notice (with the exception of providers and management, who must give four weeks’ advance written notice), the employee will not receive payment for accrued or unused vacation leave. (Reference: Employee Leave policy)

Sick leave and Wellness leave are not compensable upon separation of employment.
Checkout Interview
Human Resources shall meet with the exiting employee on or just prior to the employee’s last day of work to determine the final disposition of the following:

- verify the employee's forwarding address (for W-2 purposes);
- complete benefit paperwork;
- discuss insurance conversions;
- assure the employee returns all District property (keys, id badge, etc.);
- assure all travel advances and expense reports are balanced;
- determine method of delivery for final paycheck; and
- assess any other separation of employment matters.

Exit Survey
Human Resources shall provide the departing employee the GCHD Exit Survey after the employee’s last day of work. The purpose of the survey is for the organization to obtain feedback from employees who decide to end their employment with GCHD. The feedback on both favorable and unfavorable employment matters will be combined with feedback received by others. The written results of the survey will be forwarded to the Chief Executive Officer, CHW Clinical Director, and the employee’s respective manager or director.

Laws
It is the intent of this policy to be in compliance with the Fair Labor Standards Act and the Texas Payday Law.

Violation
Violation of this policy will be noted in the employee’s personnel file and may result in loss of accrued, unused vacation leave as outlined above.
Sexual Harassment

Audience
This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority and Coastal Health & Wellness (collectively “the District”) employees, volunteers, students, and contractors (business associates).

Policy
The District is committed to maintaining a workplace free of sexual harassment. Sexual harassment is a violation of Title VII of the Civil Rights Act of 1964 (as amended) and, as an employer, the District can be held responsible for sexual harassment committed by its employees and agents.

Sexual harassment is any unwelcome sexual advance, request for sexual favor and other verbal or physical conduct of a sexual nature when:

- submission to such conduct is made either explicitly or implicitly a term or condition of employment (quid pro quo);
- submission to or rejection of such conduct by an individual is used as a basis for employment decisions affecting such individual (quid pro quo);
- such conduct has the purpose or effect of substantially interfering with an individual's work performance or creating an intimidating, hostile, or offensive working environment.

Behaviors such as (but not limited to) verbal or physical advances, requests for sexual favors, making sexually explicit derogatory or suggestive remarks, making inappropriate statements or gestures based on gender, or displaying of sexually oriented books, magazines, photos, cartoons, or objects that are offensive or objectionable are common to claims of sexual harassment.

The legal definition of sexual harassment, as developed by the courts, includes different types of sexual conduct, such as:

- **Quid pro quo** - the Latin phrase meaning "something for something." This type of harassment occurs when, for example, a supervisor makes unwelcome sexual advances at a subordinate employee and submission to the advances is an expressed or implied condition of employment for receiving job benefits; or, refusal to submit to the demands results in a loss of a job benefit or in termination of employment.

- **Hostile environment** - relentless and continuing unwelcome sexual conduct that interferes with an employee's work performance or that creates an intimidating, hostile, abusive or offensive work environment.

- **Harassment by non-employees** - the agency may be liable for the sexual harassment of employees by customers, or other third parties, if we had some degree of control to stop the improper behavior.

Sexual harassment may occur in a variety of situations and circumstances. Although it is not possible to catalog every situation or conduct that constitutes sexual harassment, the following guidelines may be helpful.
The victim, as well as the harasser, may be a male or female.
- The victim does not have to be of the opposite gender.
- The harasser can be the victim's supervisor, a supervisor from another area, a co-worker, customer, vendor, volunteer, or contractor.
- The victim does not have to be the person who is harassed, but can be anyone adversely affected by the offensive conduct.
- The harasser's conduct is unwelcome.

Employees who experience sexual harassment should make it known to the harasser that their actions are not welcomed. The employee should indicate that they do not want the behavior to continue and that their actions make them uncomfortable. Any Employee who feels that he/she is a victim of sexual harassment must immediately report the matter to their supervisor, manager, director, Human Resources Director or the Chief Compliance Officer.

Confidentiality
Information related to the complaint and issues discussed with the Human Resources Director and/or Chief Compliance Officer will be treated as confidential. However, the ability to maintain such confidentiality may be limited by law or by the best interests of the District, the employee or other employees.

False Reporting
Any employee who makes an intentionally false accusation of harassment or discrimination is subject to corrective disciplinary action up to and including suspension or dismissal.

Investigation of Complaints
The Chief Compliance Officer and/or Human Resources Director will promptly initiate an investigation of the allegation. The Chief Compliance Officer and/or Human Resources Director will make every reasonable effort to determine the facts pertinent to the complaint.

The investigation may include, but is not limited to, interviews with witnesses and discussions with the involved parties. During the course of the investigation the alleged harasser may be placed on Paid Administrative Leave to allow for the investigator to work unimpeded. All investigations of sexual harassment complaints shall be conducted as discreetly as possible. The Chief Compliance Officer and/or Human Resources Director has final determination of whether allegations of harassment/discrimination are substantiated.

If findings support the charge of sexual harassment against the accused employee, that employee shall be subject to disciplinary action that may include (but is not limited to) suspension, probation, or dismissal.

Accusation of Sexual Harassment
Retaliation against or disciplining any person for reporting an allegation of sexual harassment is strictly prohibited. Any employee who makes an intentionally false accusation of sexual harassment shall be subject to disciplinary action, which may include, but is not limited to, suspension, probation, or dismissal.

Training
All employees must receive training on the District’s policy and procedures related to sexual harassment. Training will be provided for new employees during orientation and for existing employees on an annual basis. Human Resources will ensure the District’s compliance with this requirement.

**Law**

It is the intent of this policy to be in compliance with Title VII of the Civil Rights Act of 1964 (as amended).
Vehicular Accidents/Incidents

Audience
This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority, and Coastal Health & Wellness (collectively “the District”) employees who operate vehicles owned or leased by the District.

Policy
The District is committed to maintaining a safe and productive work environment for all employees and to ensuring that safe and efficient services are rendered to the citizens of Galveston County.

Post-Accident / Incident Drug and Alcohol Testing
Any employee involved in a vehicle accident or incident that results in damage to any vehicle, personal or private property, or injury to any person, regardless of fault, is required to immediately report the accident/incident to his/her supervisor. The supervisor is responsible for removing the employee who was operating the vehicle from active duty and coordinating a drug and alcohol test to be performed immediately on the employee.

If the accident/incident occurs during regular business hours, the supervisor is to contact Human Resources or the Risk and Safety Coordinator for guidance and drug testing locations. If the accident/incident occurs after regular business hours, the supervisor is responsible for contacting a drug testing company and requesting that a representative from the company come out and perform a field drug and alcohol test on the employee. The supervisor is required to stay with the employee until the testing is complete. In the event the accident is out of town and the supervisor is unable to be with the employee, the supervisor is expected to stay in constant communication with the employee until the testing is complete.

The supervisor is responsible for contacting the departmental director to discuss the circumstances of the accident or incident, and may recommend the employee be placed on paid administrative leave pending the outcome of the drug and alcohol test.

The following business day, the supervisor is responsible for notifying Human Resources of the event and for completing an Employee Incident or Injury Report form and submitting the report to the Risk and Safety Coordinator. Human Resources will consult with the supervisor and the departmental director regarding next steps.

Failure of an employee to complete the ordered drug and alcohol test will result in immediate termination. Any employee who tests positive for any amount of illegal drugs or prescription drugs without a valid prescription and/or alcohol will be terminated (Reference: Drug-free Workplace policy).

Mandatory Defensive Driving
Any employee who has had an accident/incident and/or receives a citation may be required to take, and successfully complete, an approved defensive driving and/or emergency vehicle operation course. The course will be at the employee’s expense and completed on the employee’s own time. The defensive driving course must be completed within the time period designated by Human Resources or the State of Texas, whichever is earlier. The employee is responsible for submitting documentation to Human
Resources within the designated timeframe. Failure to complete a mandated defensive driving and/or emergency vehicle operation course within the required time period may result in suspension or termination.

**Preventable Accidents/Incidents**

All vehicle accidents and incidents will be reviewed by the Risk and Safety Coordinator and/or the Chief Compliance Officer, along with the Risk and Safety Sub-Committee, to determine the cause(s) of the accident or incident and to assess whether the accident or incident was preventable. Employees with a pattern of preventable accidents will be subject to corrective disciplinary action.

**Violation**

Any violation of this policy may result in appropriate corrective disciplinary action, up to and including suspension or dismissal.

**Forms**

Employee Incident or Injury Report
Volunteer

**Audience**

This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority and Coastal Health & Wellness (collectively “District”) employees, volunteers, and contractors (business associates).

**Policy**

The Galveston County Health District is committed to providing the best programs and services to its clients and to the community. Volunteers help to improve community awareness of public health issues and services. Using volunteers helps educate and train potential future employees and is a cost-effective means of addressing workforce shortages.

*Generally, volunteers 18 years of age and above are accepted at the District; however, with the approval of the Chief Executive Officer, CHW Clinical Director, or designee, program-specific volunteer programs may be approved for an age exception as long as operational, legal, and risk reduction concerns are properly assessed.*

**Types of Volunteers**

A volunteer is considered an individual who, beyond the confines of paid employment or contract responsibilities, contributes time and service to assist in the accomplishment of a mission. Volunteers include:

- General public
- Those associated with community based organizations including faith based institutions
- Health Professionals
- Students - supervised by a faculty
- Licensed Professionals
  - those that do not go through the District’s LIP credentialing process (RNs, LVNs, EMTs, Non-certified X-Ray Technicians, Registered Dental Assistants, Dental Hygienists, etc.)
  - those that go through the District’s LIP credentialing process (MDs, Mid Levels, Dentists, etc.)
- Those legally required to do community service
- Public Health Emergency Preparedness volunteers

In accordance with the *Fair Labor Standards Act* as codified under 29 CFR §553.102 (2010), employees of the District may not “volunteer” time to the District. All hours worked must be compensated according to the *Hours Worked and Compensatory/Overtime policy.*
Orientation / Training

Volunteers will be trained on appropriate and required topics related to their area(s) of service. Human Resources will notify the volunteer of the specific date and time of the orientation and coordinate with a program area point of contact for assignment times and dates. Volunteers will be oriented / trained by the supervisor on matters specific to the area where they will work.

Immunization Requirements

Volunteers are required to receive the same vaccinations as employees and at their own expense. Exceptions will be made on a case-by-case basis by the Chief Nursing Officer depending upon area/department in which the employee works, type of vaccine/communicable disease, types of exposure risk(s), mode of transmission, period of volunteerism, types of volunteer duties, local epidemiological information, etc.

Insurance

All volunteers at the District are expected to stay within their discipline, scope of services and activities, approved privileges and established clinical practice guidelines. All students from professional schools are expected to have a memorandum of understanding in place prior to volunteering.

Volunteers are not covered under the District’s Workers’ Compensation insurance. Public Health Emergency Preparedness volunteers assisting in an emergency situation are protected under various state and federal laws.

Extenuating circumstances require volunteer activities and coverage to receive advanced review and approval from the Human Resources Director prior to volunteering.

Students who provide healthcare services in the Coastal Health & Wellness Clinic or within the Immunization Services area will be assigned a preceptor or an overseeing faculty member.

- "Preceptor" is the GCHD staff person assigned to supervise the volunteer
- "Overseeing faculty member" is the person associated with student’s teaching institution.

Violation

Any violation of this policy may result in appropriate corrective disciplinary action, up to and including suspension, probation, or dismissal.

Forms

- Volunteer Registration
- Volunteer Timesheet
- Confidentiality Agreement
- Volunteer Program Orientation Acknowledgement
I. Prevention of infectious diseases

1. Use of Standard Precautions
2. Occupational Health & Blood Borne Pathogens
3. Airborne/droplet precautions for TB, pandemic flu and other respiratory pathogens
4. Employee work practices
   1) Precautions regarding sharps and needles
   2) Employee health conditions
   3) Work environment precautions
      a. Food/drink precautions
      b. Safety
      c. EMS and Animal Services Vehicle practices
      d. Animal Services practices
      e. Proper handling, storage and transport of specimens
      f. Proper management of infectious waste

II. Management of employee exposures to infectious diseases

1. Responsibilities
   1) How to report
   2) Who is responsible
   3) How evaluations are done
   4) How decisions are made
   5) How to document

III. Reporting of suspected or confirmed diseases

IV. Plan for implementation, training, QA, etc.

V. References

VI. Appendices

VII. Forms
GALVESTON COUNTY HEALTH DISTRICT
INFECTION CONTROL PLAN

Objectives: These infection control guidelines have been established to provide guidance, procedures and plans for preventing the spread of infectious diseases, to promote safer work practices in caring for patients and others, and to assist staff in conforming to standards, evidence-based rules, regulations and practices.

Responsibilities:

- All GCHD staff, including volunteers and contractors, are responsible for following these and their own programs’ infection control guidelines if applicable.
- Managers and Supervisors are responsible for:
  - Understanding the general guidelines and those that apply to their departments or programs
  - Orienting their new staff to the applicable guidelines
  - Training staff periodically on the guidelines
  - Monitoring the practices of their staff in the workplace
  - Reporting any exposure incidents in the workplace to the Risk and Safety Coordinator
  - Counseling employees who need guidance or redirection in infection control practices
  - Modeling excellent infection control practices

I. Prevention of infectious diseases

1. Use of Standard Precautions

Standard precautions are designed to reduce the risk of transmission of bloodborne pathogens (BBP), and other pathogens transmitted by contact such as scabies, lice and methicillin resistant staphylococcus aureus (MRSA), etc. These precautions apply to all individuals in the work place, regardless of their diagnosis or presumed infection status. Standard Precautions apply to 1) blood, 2) all body fluids, secretions, and excretions (except sweat), regardless of whether or not they contain visible blood, 3) nonintact skin, and 4) mucous membranes. Standard Precautions are designed to reduce the risk of transmission of microorganisms from both recognized and unrecognized sources of infection. Standard precautions include the following categories:

  - **Hand Hygiene.** All employees are expected to practice hand hygiene in accordance with the most recent Centers for Disease Control (CDC) guidelines before and after every patient/client contact and in other instances including, but not limited to, administering immunizations, drawing blood, handling lab specimens, working with animals, after using the restroom and after coughing or sneezing. See appendix (a)

  - **Gloves:** Wear gloves (clean, nonsterile gloves are adequate) when touching blood, body fluids, secretions, excretions, and contaminated items. Put on clean gloves just before touching mucous membranes and nonintact skin. Change gloves between tasks and procedures on the same patient after contact with material that may contain a high concentration of microorganisms. Remove gloves promptly after use,
before touching noncontaminated items and environmental surfaces, and before going to another patient, and clean hands immediately to avoid transfer of microorganisms to other people or environments.

- **Mask, Eye Protection, and Face Shield:** Wear a mask and eye protection or a face shield to protect mucous membranes of the eyes, nose, and mouth during procedures and activities that are likely to generate splashes or sprays of blood, body fluids, secretions, and excretions.

- **Gown:** Wear a gown (a clean, nonsterile gown is adequate) to protect skin and to prevent soiling of clothing during procedures and activities that are likely to generate splashes or sprays of blood, body fluids, secretions, or excretions. Select a gown that is appropriate for the activity and amount of fluid likely to be encountered. Remove a soiled gown as promptly as possible and clean hands to avoid transfer of microorganisms to other people or environments.

- **Patient-Care Equipment:** Handle used patient-care equipment soiled with blood, body fluids, secretions, and excretions in a manner that prevents skin and mucous membrane exposures, contamination of clothing, and transfer of microorganisms to other people and environments. Ensure that reusable equipment is not used for another person until it has been cleaned and reprocessed appropriately. Ensure that single-use items are discarded properly. Common examples of such equipment include, but are not limited to needles and other sharps used in clinics, animal care departments, and in ambulances.

- **Environmental Control:** Ensure that the facility has adequate procedures for the routine care, cleaning, and disinfection of environmental surfaces, and other frequently touched surfaces, and ensure that these procedures are being followed.

2. **Occupational Health and Blood borne Pathogens**

   1) Any GCHD employee who would come into contact with blood through use of sharps (such as needles) or other contact is required to follow guidelines to avoid exposures.

   2) Use mouthpieces, resuscitation bags, or other ventilation devices as an alternative to mouth-to-mouth resuscitation methods in areas where the need for resuscitation is predictable.

   3) Respiratory etiquette: Employees are expected to contain respiratory secretions by covering the nose/mouth when coughing or sneezing, using tissues to contain respiratory secretions, disposing of used tissues in the nearest receptacle after use and performing hand hygiene after contact with respiratory secretions. All staff should take the responsibility of identifying any person coughing and offering tissues, so they may cover their mouth and nose when coughing.

   4) Patients suspected of having an airborne communicable disease (for example with a cough, fever or fever and rash) should be placed in areas away from others, such as in an exam room.

3. **Airborne/droplet precautions for tuberculosis (TB), Pandemic Flu and other respiratory pathogens**

   1. In addition to Standard Precautions, use Airborne Precautions for patients known or suspected to be infected with microorganisms transmitted by airborne droplet nuclei. (TB, measles, chicken pox)
1) **Patient placement.** Place the patient in a private room or, if available, a room that has appropriate high-efficiency filtration (HEPA) of room air before the air is circulated to other areas in the building. Keep the room door closed and the patient in the room.

2) **Respiratory Protection.** Wear respiratory protection (N95 respirator) when entering the room of a patient with known or suspected infectious pulmonary tuberculosis or other contagious condition as instructed by Health Authority. Susceptible persons should not enter the room of patients known or suspected to have measles (rubeola) or Varicella (chickenpox) if other immune staff is available. If susceptible persons must enter the room of a patient known or suspected to have measles or Varicella, they should wear an N95 respirator. EMS staff should wear an N95 respirator while transporting a patient with known or suspected infectious pulmonary TB or other contagious conditions in an ambulance.

3) **Patient Transport.** Limit the movement and transport of the patient from the room or ambulance to essential purposes only. If transport or movement is necessary, minimize patient dispersal of droplet nuclei by placing a surgical mask on the patient.

4) **Additional Precautions for Preventing Transmission of Tuberculosis.** Consult CDC “Guidelines for Preventing the Transmission of Tuberculosis in Healthcare Settings” for additional prevention strategies". See References

5) See Appendix (b) “GCHD Plan for Pandemic Influenza and Highly Infectious Respiratory Diseases"

2. In addition to Standard Precautions, use Droplet Precautions for a person known or suspected to be infected with microorganisms transmitted by droplets (large-particle droplets that can be generated by the person during coughing, sneezing, talking or the performance of procedures.)

4. **Employee work practices**

1. **Precautions regarding sharps and needles:**
   1) When working with needles, don’t be distracted. Focus and pay attention. Put used sharps into containers immediately. View the top of the container when inserting sharps. Keep the sharps container close to you to help in viewing. Don’t push needles down into the container with your hand. Don’t overfill sharps containers.
   2) Needles and sharps with engineered safety devices should be used when available.
   3) If sharps with engineered safety devices are not commercially available, precautions will be taken to reduce the likelihood of needlestick.
   4) Blood specimens must never be forcibly injected into vacutainer tubes when using a needle and syringe.
   5) Needles must not be routinely recapped. If recapping is necessary, the one-handed scoop method should be used.
   6) When carrying used sharps from an outreach work site, ensure that the sharps container is protected from spillage by enclosing it in a secure, hard-sided container (i.e. a plastic cooler) within the trunk or back of the automobile.
   7) If you have any questions about working with sharps, contact your supervisor.

2. **Employee health conditions**
   1) Cover cuts, abrasions or lacerations of skin with occlusive dressings. If compromised skin cannot be adequately protected, notify the supervisor, who will assure that the employee does not engage in tasks with exposure to blood or other potentially infectious materials.
2) Employees who are infected with a communicable disease transmitted through airborne or casual contact may not return to work until released by their medical provider who deems them non-infectious. Supervisors who suspect that an employee has a communicable illness may require that the employee seek medical attention and a release to return to work.

3) All employees must be in compliance with the Employee Immunization Policy. See appendix (c).

3. Work environment precautions
   a. Food/Drink/Personal care
      • Do not store food and drink in refrigerators or freezers used for medications or medical or lab test supplies, or on shelves or countertops where potentially infectious materials are present.
      • Supervisors will label refrigerators or freezers for contents (for example, medications only, or employee food)
      • Employees will not eat, drink, apply cosmetics or lip balm or handle contact lenses in potentially contaminated work areas where diagnostic procedures or treatments are performed, or areas where equipment and material contaminated with blood and body fluids are processed.
      • Employees will not eat, drink, apply cosmetics or lip balm or handle contact lenses in all patient care and lab areas or in the animal shelter.
      • Confine food and drink to designated employee break areas. Covered drinks may be acceptable in some non-patient care Health District areas.

   b. Safety: Refer to the GCHD Safety Manual, appendix (e).

   c. EMS and Animal Services Vehicle practices
      • See program specific procedures.

   d. Animal Services practices
      • Quarantine Procedures: See program specific information.
      • Post-Exposure Animal Bites: Follow State Animal Control Officer Manual, appendix (f).

   e. Proper handling, storage and transport of specimens. See program specific procedures for Epidemiology, Animal Control, Galveston Area Ambulance Authority, WIC, TB Control, Community Health Nursing, Immunization and STD/HIV Programs

   f. Proper management of infectious waste. See program specific procedures.
II. **Management of employee exposures to infectious disease**

1. **Responsibilities**

   1. **How to report:** Exposures that occur are to be reported immediately to the employee’s supervisor and to the Risk and Safety Coordinator by phone (409) 938-2425 or email. Employees that have an exposure after regular hours are to report to their supervisor and to the number above, leaving a voice message. The employee will be contacted on the next working day. For after-hours exposures, it is the employee’s responsibility to seek immediate medical attention at a local emergency room for blood borne pathogen exposures that may be high risk for HIV transmission. When reporting by phone, the employee will be guided to complete a set of written reports depending on the nature of the exposure.

   2. **Who is responsible:**

      **Employees:**
      - Are responsible for following GCHD and program specific infection control guidelines and work procedures that prevent exposure to blood borne pathogens (BBP), including immunization guidelines.
      - An employee whose job has occupational risk for exposure to BBP is expected to attend training on infection control at orientation and at least yearly.
      - Employees are responsible for immediately reporting exposure incidents to their supervisors and the Risk and Safety Coordinator and for following the post-exposure guidelines including completion of post-exposure follow up.

      **Supervisors:**
      - Are responsible for counseling employees who need guidance or redirection in their practices with regard to post-exposure management and
      - Are responsible for ensuring the immediate reporting of any infection control incidents or occurrences in the workplace to Risk and Safety Coordinator.
      - If a worker sustains several occupational exposures, the direct supervisor and the worker should review the duties and procedures of the job. Modifications of procedures and appropriate corrective action should be taken in accordance with policy and circumstances.

      **Risk and Safety Coordinator:**
      - Coordinates reports of employee injury to the Workers’ Compensation Insurance Carrier,
      - Notifies the CNO and GCHD Epidemiologist of such incidents
      - Tracks and trends employee injuries

      **CNO:** Notifies Epidemiology if the exposure involves a sharp.

      **GCHD Epidemiology:** is responsible for reporting all sharps injuries to the Department of State Health Services and conducts epidemiological assessment as directed by the Health Authority for patterns of exposures with significant health risk.
Health Authority: Fulfills Texas Health and Safety Code Health Authority responsibilities necessary to protect public and employee health.

3. How evaluations are done: Evaluations are done in accordance with workers compensation providers’ protocols.

4. How decisions are made: Decisions made are based on workers compensation recommendations.

5. How to document: The following documents are to be completed as indicated:
   - **Employee Incident or Injury Report**: Completed immediately after exposure by employee and sent to the Risk and Safety Coordinator for use in the WC claim.
   - **Notarized Statement**: Completed as soon as possible, but within 10 days, and given to the Risk and Safety Coordinator for WC claim.
   - **Sharps Reporting Form**: If the Exposure was from a sharp, a form is completed by the supervisor and sent to Epidemiology who will report it to Department of State Health Services as required.

III. Reporting of suspected or confirmed diseases. See attached GCHD Epidemiology Services 24/7 Reporting Protocol, appendix (h), and the Infectious Disease Report Form and Notifiable Conditions in Texas. See Forms 2 and 3.

IV. Plan for implementation, training and quality monitoring: The manager in each area of the Health District will be responsible for keeping updated guidelines, developing lists of procedures not limited to but including annual training documentation, tracking including orientation, monitoring for safety and compliance and reporting any workplace threats to employee health to the Risk and Safety Coordinator.

V. References
   - a. Guideline for Hand Hygiene in Health-Care Settings, October 25, 2002 / Vol. 51 / No. RR 16
   - d. Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health Care Settings, MMWR, December 30, 2005/Vol.re/No. RR-17
   - f. Guidelines for Infection Control in Health Care Personnel, 1998 CDC Special Article
VI. **Appendices**

a. CDC Hand Hygiene in Healthcare Settings  
   i. [https://www.cdc.gov/handhygiene/training/interactiveEducation/](https://www.cdc.gov/handhygiene/training/interactiveEducation/)

b. GCHD Plan for Pandemic Influenza and Highly Infectious Respiratory Diseases  
   i. [https://www.gchd.org/home/showdocument?id=5108](https://www.gchd.org/home/showdocument?id=5108)

c. GCHD Employee and Pre-Hire Immunization Policy  
   i. [https://www.gchd.org/home/showdocument?id=6069](https://www.gchd.org/home/showdocument?id=6069)

d. GCHD Volunteer Policy  
   i. [https://www.gchd.org/home/showdocument?id=5194](https://www.gchd.org/home/showdocument?id=5194)

e. GCHD Safety Manual Overview  
   i. [https://www.gchd.org/home/showdocument?id=4570](https://www.gchd.org/home/showdocument?id=4570)

f. DSHS Animal Control Manual  

g. U. S. Public Health Service Guidelines for the Management of Occupational Exposures to HBV, HCV and HIV and Recommendations for Post exposure Prophylaxis  
   i. [http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5011a1.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5011a1.htm)

h. GCHD 24/7 Disease Reporting Protocol  
   i. [www.gchd.org/notify](http://www.gchd.org/notify)

VII. **Forms**

1. Employee Incident or Injury Report:  
   a. [http://www.gchd.org/home/showdocument?id=5448](http://www.gchd.org/home/showdocument?id=5448)

2. Infectious Disease Reporting Form  
   a. [www.gchd.org/reports](http://www.gchd.org/reports)

3. Notifiable Conditions  
   a. [www.gchd.org/notify](http://www.gchd.org/notify)

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Updated August 2018  
Approved by the United Board of Health  

_________________________  ______________________  
Chairman, United Board of Health  Date

[Back to Agenda](#)
United Board of Health
August 2018
Item #5
Consider for Approval Appointments and Re appointments
to the Animal Services Advisory Committee
Consider for Approval Appointments and Reappointments to the Animal Services Advisory Committee
New term for member will be 10-01-18 to 9-30-2020

CITY OF HITCHCOCK

Member: Fard K. Abdullah
Phone: 409-986-5591
Email: zoieabdullah@yahoo.com
Term Expires 9-30-2020
Alternate: Mayor Dorothy Childress
Phone: 409-986-5591 option 4
Email: dchildress@cityofhitchcock.org

CITY OF KEMAH

Member: Kyle Burks
Phone: 281.334.1611
Email: kyle@strmarketplace.com
Term Expires 9-30-2020
Alternate: Matt Wiggins
Phone: 281.334.1611
Email: Mwiggins@kemah-tx.com

CITY OF LA MARQUE

Member: James Osteen
Phone: 409-938-9203
Email: j.osteen@ci.la-marque.tx.us
Term Expires 9-30-2020
Alternate: Police Chief Kirk Jackson
City of La Marque
Phone: 409-938-9220
Email: k.jackson@cityoflamarque.org

CITY OF TEXAS CITY

Member: Able Garza
Phone: 409-771-7103
Email: agarza@texas-city-tx.org
Term Expires 9-30-2020
Alternate: Nick Finan
Phone: 409-643-5927
Email: nfinan@texas-city-tx.org

GALVESTON COUNTY UNITED BOARD OF HEALTH

Member: Eric Froeschner
Phone: 281-236-1451
Email: froeschner@jandjtelecom.com
Term Expires 9-30-2020
Alternate: Curtis Klages, DVM, DACLAM
Phone: 409-938-2273
Email: aggiedvm2k@gmail.com
VETERINARIAN

Member: Jonathon Given, DVM
Phone: 409-925-4600
Email: jcgivedvm@gmail.com
13333 Tx Highway 6, Santa Fe, TX 77510
Term Expires 9-30-2020

NON-PROFIT ANIMAL WELFARE GROUP - POSITION 2

Member: Jerry Finch
Represents: Habitat for Horses
Phone: (409) 935-0277
Email: admin@habitatforhorses.org
Term Expires 9-30-2020

Alternate: Lark Tedesco
Represents: Habitat for Horses
Phone: 409-935-0277
Email: cruelty@habitatforhorses.org

NON-PROFIT ANIMAL WELFARE GROUP - POSITION 1

Member: Ms. Chris Krysher
Represents: PetProject
Phone: 281-534-2646
Email: petprojecttx@hotmail.com
Term Expires 9-30-2020

Alternate: Linda Lopez
Phone: 281-300-4644
Email: lindasuelopez@gmail.com

Alternate: Cynthia Kelley
Phone: 281-808-2157
Email: cwk2157@yahoo.com

Daily Operator of an Animal Shelter

Member: Amber Adams
Represents: ARC Manager
Phone: 409-948-2485
Email: aadams@gchd.org
Term Expires 9-30-2020

Alternate: Shivonne “Monique” Ryans
Phone: 409-948-2485
Email: smryans@gchd.org

VILLAGE OF TIKI ISLAND

Member: Karen Hearring
Phone:
Email: hearring@sbcglobal.net
Term Expires 9-30-2020

Alternate: Hunter Neblett
Phone:
Email:
United Board of Health
August 2018
Item #6
Consider for Approval Revision to Appendix A in Purchasing Policy
Purchasing Policy

AUDIENCE

This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority, and Coastal Health & Wellness (collectively “the District”) employees.

PURPOSE

The purpose of the District Purchasing Policy is to comply with the laws and procedures governing District purchasing in order to provide reasonably priced, high-quality goods and services to end users, while preserving organizational and financial accountability. This policy is applicable to all procurements regardless of funding source.

STATEMENT OF GENERAL POLICY

It is the policy of the District that all purchasing shall be conducted strictly on the basis of economic and business merit. To avoid violation of or the appearance of violation of the policies, District officials and employees are prohibited from:

- Seeking or accepting, directly or indirectly, any loans, services, payments, entertainment, trips or gifts of merchandise or money in any amount from a business or an individual doing or seeking to do business with the District.

- Participating in the selection, award and administration of a contract if he or she has a real or apparent conflict of interest. A conflict of interest would arise when the employee, any member of his or her immediate family, his or her partner, or an organization which employs or is about to employ any of the parties indicated herein, has a financial or other tangible personal benefit from a firm considered for a contract.

It is important to remember that the District Purchasing Department operates in full view of the public. The District intends to maintain a cost effective purchasing system conforming to good management practices.

PURCHASING AUTHORITY

Authority to make District purchases resides in the appropriate Board(s) or in Administration as delegated by the Board(s). The Purchasing Department is responsible for making purchases
of supplies, materials, equipment and for negotiating and making contracts for services and repairs to District owned and/or leased property. Purchases made using competitive bids shall be reviewed by the GCHD Chief Executive Officer or designee in accordance with the purchase contract.

GENERAL PURCHASING GUIDELINES

A. A central supply for the use of all departments will be maintained to warehouse generally used office and operating supplies. Departments may obtain items directly from Central Supply by requisition, without the necessity of a purchase order. If an item is not stocked in Central Supply, the purchasing department staff will use the appropriate purchasing method to obtain the item.

B. Items not normally stocked in Central Supply and not requiring competitive bids will usually be purchased through the Purchasing Department.

C. Competitive bidding is mandatory on any purchase or combination of purchases of like items and/or component purchases, separate purchases and sequential purchases which will equal or exceed $50,000. This applies to all contractual agreements and/or services and purchases or annual accumulative purchase of $50,000 or more. Any purchases made with vendors listed through the Texas Procurement and Support Services (TPASS) will satisfy the bid requirements, as will purchases which are purchased through legally constituted shared services agreements that have completed the competitive bid process including, but not limited to, HGAC, TACHC or TALHO.

D. Competition

All procurement transactions must be conducted in a manner providing full and open competition. Some of the situations considered to be restrictive of competition include but are not limited to:

- Placing unreasonable requirements on firms in order for them to qualify to do business
- Requiring unnecessary experience and excessive bonding
- Noncompetitive pricing practices between firms or between affiliated companies
- Noncompetitive contracts to consultants that are on retainer contracts
- Organization conflicts of interest
• Specifying only a “brand name” product instead of allowing “an equal” product to be offered
• Any arbitrary action in the procurement process

The District prohibits the use of statutorily or administratively imposed state, local or tribal geographical preferences in the evaluation of bids or proposals, except in cases where applicable Federal statutes expressly mandate geographical preference.

Vendors will be selected with regard to dependability and service record, nature of guarantee and warranty of product (when applicable), price and quality. The District will utilize small businesses, minority-owned firms, women’s business enterprises and labor surplus area firms when possible, provided this involves no sacrifice in quality, service or price.

E. Pursuant to Texas House Bill 89 [https://capitol.texas.gov/tlodocs/85R/billtext/html/HB00089I.htm](https://capitol.texas.gov/tlodocs/85R/billtext/html/HB00089I.htm) and Senate Bill 252 [https://capitol.texas.gov/tlodocs/85R/billtext/html/SB00252I.htm](https://capitol.texas.gov/tlodocs/85R/billtext/html/SB00252I.htm), the District must certify and verify that any business, parent company, company, affiliate, subsidiary, or “Vendor Companies” with which we have a contractual relationship:

1. Does not boycott Israel currently;
2. Will not boycott Israel during the contract term;
3. Is not identified on the Texas Comptroller’s list of companies known to have contracts with, engaged in business with, or provide supplies/services to, Iran, Sudan, or a foreign organization designated as a Foreign Terrorist Organization by the U.S. Secretary of State. (See Texas Government Code § 2270.808 and 2252.151-2252.154.

Contracting for-profit entities, providing goods and services, must submit a HB 89 Certification Form (see Appendix A) which provides written verification that the company/vendor does not and during the term of the contract will not boycott Israel.

The Purchase Order Terms and Conditions (see Appendix B) include a certification clause that the vendor certified that it is not a company identified on the Texas Comptroller’s list of companies known to have contracts with, or provide supplies or services to foreign organization designated as a Foreign Terrorist Organization by the US Secretary of State. The Vendor further certifies and verifies that neither Vendor, nor any affiliate, subsidiary, or parent company of Vendor, (if any the “Vendor Companies”) boycotts Israel, and Vendor agrees that Vendor and Vendor Companies will not boycott Israel during the term of this Purchase Order.
F. Under Section 2252.908 of House Bill 1295, any business entity that enters into a contract with the District that requires Board approval must submit a “Disclosure of Interested Parties” form (see Appendix C) to the Purchasing Department. This form is mandated by the Texas Ethics Commission.

https://www.ethics.state.tx.us/whatsnew/elf_info_form1295.htm

G. All goods, supplies, equipment and services will be purchased with prior appropriate approval.

H. The Purchasing department will maintain records sufficient to detail the history of procurement. These records will include rationale for the method of procurement, justification for the contractor selection/rejection, selection of contract type including justification when bids are not obtained, and the basis for the contract price.

I. Special procedures are available for and applicable to the purchase of particular goods and services, summarized under Special Purchases.

PURCHASE REQUISITIONS

Purchase requisitions prepared by the requesting department are required for all purchases. All purchase requisitions must be approved prior to issuing a purchase order. A purchase order is required prior to placing an order for supplies, goods, equipment and services unless pre-approved by the GCHD Chief Executive Officer or designee. Details for processing purchase requisitions are outlined in the Purchasing Procedures Manual.

PROCUREMENT METHODS

Materials and supplies not available from Central Supply are acquired through the Purchasing Department. Additionally, contracts for maintenance and repairs to facilities and equipment used by the District are handled by the Purchasing Department. Procedures for acquisitions through the Purchasing Department are outlined in the Purchasing Procedures Manual.

The District will use one of the following methods of procurement depending on the specifications of the purchase. The procurement methods are based on federal regulations, but with lower dollar thresholds to better accommodate the District’s needs.

A. MICRO-PURCHASES (Purchases less than $3,000):
1. Procurement by micro-purchase is the acquisition of supplies or services in which the aggregate dollar amounts does not exceed $3,000.00. To the extent practicable, the District will distribute micro-purchases equitably among qualified suppliers.

2. Open market purchases of less than $500.00 do not require quotes. Such purchases require staff to use their best judgement and the most appropriate and cost-effective method of acquisition on each requisition.

3. Open market purchases of $500.00 – $2,999.99 may be made after obtaining three verbal quotes, with the exceptions referenced below in Vehicle, Equipment and Facility Maintenance and Repair.

4. Vehicle, Equipment and Facility Maintenance and Repair: Open market purchases for vehicle, equipment, and facility maintenance or repair do not require three verbal quotes if the service performed is less than $3,000. Because of the administrative cost of requesting quotes would likely be more than the amount saved on quote comparison, considering personnel time, types of services needed, immediacy of the circumstances, etc., obtaining three verbal quotes is not required. Purchases must still be consistent with purchasing ethics and even though quotes are not required, purchases must still be in GCHD’s best interest.

B. SMALL PURCHASES (Purchases in excess of $3,000 but less than $50,000):

1. Small purchases are those relatively simple and informal procurement methods for securing services, supplies or other property that do not cost more than the Simplified Acquisition Threshold. For the District’s purposes, this threshold has been lowered to $50,000.

2. When using this method, open market purchases of $3,000.00 - $4,999.99 may be made after obtaining three properly documented verbal quotes.

3. Open market purchases of $5,000.00 and less than $50,000.00 may be made after obtaining three written quotes.
4. Waiver of Requirements: GCHD Chief Executive Officer or designee, at his/her discretion, may, depending on the circumstances surrounding a request, authorize a waiver of purchase requirements outlined in this policy for purchases less than $5,000. It is anticipated that such authorization is granted on limited occasions due to the special circumstances such as an emergency or unforeseeable circumstance.

C. SEALED BIDS AND COMPETITIVE PROPOSALS (Purchases of $50,000 or more)

1. If the capital expenditure is budgeted and the item is $50,000 or more, it must be competitively bid or purchased through state approved vendors, such as TPASS, HGAC, or Buy Board. Such purchases will be made after obtaining sealed competitive bids or sealed Requests for Proposals.

2. A sealed bid is a procurement method in which competing contractors, suppliers, or vendors are invited by openly advertising the scope, specifications, and terms and conditions of the proposed contract as well as the criteria by which the bids will be evaluated. Competitive bidding aims at obtaining goods and services at the lowest prices by stimulating competition, and by preventing favoritism.

3. A request for proposal (RFP) is a procurement method in which a solicitation is made often through a bidding process, by an agency or company interested in procurement of a commodity, service or valuable asset, to potential suppliers to submit business proposals. Proposals seeks the most advantageous good or services considering the price and other factors. A proposal is handled the same way as a sealed bid with the exception of the negotiation with vendor after the opening and the bid sheet states name only, no dollar amount.

4. General Information – The Procurement Agent or designee will ensure publication of the legally required notice at least twice in one or more newspapers of general circulation in the county which the work is to be performed. No specifications or unreasonable requirements will be written with the intent to exclude a potential bidder. Competitive bidding can be either lump sum or on a unit price basis. If unit price bids are solicited, the needed quantities of each item are to be estimated in the bid specifications. These estimates are to be based on the best available information. The
successful bidder’s compensation, however, will be based on the actual quantities supplied, furnished or contracted.

5. **Bid or Proposal Opening** – Bids/proposals will be received by the Procurement Agent or designee until the date and time specified in the bid/proposal advertisement. Bids/proposals may be submitted in hard-copy format or through electronic transmission ensuring the identification, security, and confidentiality of each response and the electronic bids/proposals remain effectively unopened until the assigned time. On the specified time, date and place, the Procurement Agent or designee will open all sealed bids/proposals. The bids/proposals will be opened in an open public forum. Anyone may attend. Bids will be read aloud and recorded on a bid receipt.

6. **Emergency or Unanticipated Events** – In case of an emergency or unanticipated event causing GCHD to close for business on the date of a Bid/Proposal submission deadline, the bid closing will automatically be extended to the same time of day specified in the provisions on the first business day in which normal GCHD processes resume. If conditions or any other unforeseen event causes delays in carrier service operations, GCHD may issue an addendum to all known Bidders interested in the project to extend the deadline. It will be the responsibility of the Bidder to notify GCHD of its interest in the Bid if these conditions are impacting their ability to turn in a submission within the stated deadline. GCHD reserves the right to make the final judgment call to extend any deadline.

7. **Cost or Price Analysis** – A cost or price analysis will be performed for procurements of $50,000 or more, including contract modifications. The method and degree of the analysis will depend on the facts surrounding the procurement. In addition, GCHD will make independent estimates before receiving bids or proposals.

8. **Evaluations** – Evaluations will be based on a written method and applied to all bids and proposals received and for selecting recipients.

9. **Recommendations** – After examining all of the bids or proposals, the Procurement Agent or designee will make recommendation to award to a
vendor. The final recommendation to award will then be forwarded to the
GCHD Chief Executive Officer or Controller for final approval.

10. **Appeal** – Any actual or prospective bidder who is allegedly aggrieved in
connection with the solicitation or award of the contract may appeal. The
appeal will be submitted in writing to the Chief Compliance Officer within
ten (10) business days of the action or decision being appealed. The
protester may appeal the decision of the Chief Compliance Officer to the
GCHD Chief Executive Officer who will defer policy matters to the United
Board of Health. Any such appeal shall be submitted in writing within ten
(10) business days of the action or decision being appealed. The decision of
the Board will be final. The Galveston County United Board of Health will
not consider any protests unless this procedure is followed.

11. **Exceptions To Bid** – Any exception to the bid specifications must be
submitted in writing and attached to the bid. The GCHD Chief Executive
Officer or designee will have the final decision on accepting or rejecting
any exceptions, alterations.

12. **Award** – In determining and evaluating the best bid/proposal, the District
will award to those whose bid/proposal is most advantageous. Factors that
will be considered may include, but not limited to, cost, quality, equality,
efficiency, utility, general terms, delivery, suitability of the service offered,
and the reputation of the service in general use will also be considered with
any other relevant items. In addition, consideration will be given to such
matters as contractor integrity, compliance with public policy, record of past
performance, and financial and technical resources.

   a. When the District only receives one bid/proposal, the bid/proposal
      may be accepted if such purchase is: recommended by the
      requesting Department and the Procurement Agent or designee;
      after reviewing the specifications to determine if they were
      restrictive; and the bid/proposal packets were sent to all known
      prospective bidders.

   b. If two or more responsible bidders/proposers submit identical bids,
      the bid award may be made by drawing lots.

13. **Bonds** – A vendor who is awarded a contract may be required to post bond.
    If it is required, the requirements will be included in the advertisement.
Requirements of a bond will be in accordance with requirements of the funding source or state laws as applied to Local Governments, whichever is most stringent.

14. Acquisition of Item After Award – Following award of a contract, the requisition is processed in the manner described in the Purchasing Procedures Manual.

15. Change Orders – A change order may be required when it becomes necessary to make changes after commenced contract has been made. The GCHD Chief Executive Officer or designee is authorized to approve increases to the original contract price of $5,000.00 or less. Change orders requiring increases to the contract price of more than $5,000.00 must be approved by the appropriate Board. However, the original contract price may not be increased by 25% unless the change order is necessary to comply with a federal or state statute, rule, regulation, or judicial decision after the contract was made. The contract price may not be decreased by 18% or more without the contractor’s consent. All change orders must have the written consent of the District and the contractor.

SPECIAL PURCHASES

A. Unbudgeted Capital Expenditures – Purchases of $5,000.00 or more not authorized in a Department’s current budget, or purchases necessitating an increase in Department’s current budget must be authorized by the appropriate Board and/or funding source prior to the purchase.

B. Noncompetitive Proposals – Items otherwise required to be competitively bid may be exempted from the competitive bid process by the appropriate Board if:

1. A prompt purchase is required, due to a public calamity, to meet a necessity of the citizens or preserve public property.

2. The purchase is necessary to preserve public health or safety of Citizens.

3. An After Hours Emergency – In such instances the Department must take the necessary action to obtain the needed goods or services. If, however, the Department is aware that the purchase involves an expenditure of $5,000.00 or
more, a reasonable effort should be made to contact the Chief Executive Officer or Controller and/or Procurement Agent for notification that an emergency exists. The next working day, the Department should contact the Procurement Agent or designee for procedures to secure payment of the goods or services.

4. A Sole Source Item - An item available from only one source may be purchased without competitive bidding, with the approval of the GCHD Chief Executive Officer or designee. Typical items in this category include, but not limited to, patented or copyrighted material, secret processes, natural monopolies, utility services, captive replacement parts or components for equipment, and films, manuscripts or books. A Sole Source letter must be attached to the Purchase Order.

C. Work in Progress – This may be exempted by the appropriate Board and paid for by the day, after it is performed

D. Land and Right-Of-Way Acquisition – The District generally does not purchase land. In the case that it becomes necessary, the intent to purchase must be approved by the Board and/or funding source. This is exempted by the Board from competitive bidding

INSPECTING, TESTING AND RECEIVING

Merchandise will be received at the receiving department before it is sent to or picked up by the ordering department. It is the responsibility of each Department to see that all purchased items conform to the specifications, quality and quantity on the order. Technical equipment, needing installation at that location, may be shipped directly to the department, per the direction of the IT Department. If the merchandise is not acceptable as determined by the requesting department or by receiving, the Procurement Agent or Buyer will then take action to obtain the correct merchandise.

PHARMACEUTICALS

All pharmaceuticals purchased by the District or transferred to the District for patient use, may not be given away, loaned or sold to any individual or entity.

HEALTH DISTRICT PROPERTY
A. **Receipt/Tagging of New Property** – the Purchasing Department will attach a property tag to all property as defined in the *Fixed Asset Guidelines*. An Asset Record Form will be completed and forwarded to the Accounting Department along with a copy of the applicable Purchase Order.

B. **Disposal of Surplus or Salvage Property** – An Asset Disposal Form will be completed for requests to dispose of equipment or property, with original being forwarded to the Accounting Department.

1. Surplus property (in excess of needs, but still useful) may be disposed by competitive bids, auction, donation, or transfer to another local government with the approval of the GCHD Chief Executive Officer or Controller. The Purchasing Department will attempt to realize the maximum benefit to the District in selling or disposing of surplus property. If efforts to sell or dispose of the property fail, property may be disposed of in the manner most advantageous for the District. Asset tags will be removed from property sold, disposed or transferred. District employees will be given the same opportunity afforded to other persons to bid on and purchase surplus property offered by competitive bids or auction.

2. Salvage property (valueless property of no use) may be disposed of by the Procurement Agent or designee, with the approval of the GCHD Chief Executive Officer or Controller, in the manner most advantageous to the District.
Appendix A

HOUSE BILL 89 AND SENATE BILL 252 CERTIFICATION AND VERIFICATION FORM:

I ______________________ (Authorized Representative’s Name), the undersigned representative of

(Vendor / Company Name) __________________________________ (Hereafter referred to as Company). Being an adult over 18 years of age, after being duly signed by the undersigned notary, do hereby certify and verify under oath that the company named above, under the provisions of Government Code 808.51c and 2252 that the Company or any affiliate, subsidiary, or parent of the Company, or “Vendor Companies”:

1. Does not boycott Israel currently;
2. Will not boycott Israel during the contract term;
3. Is not identified on the Texas Comptroller’s list of companies known to have contracts with, engaged in business with, or provide supplies/services to, Iran, Sudan, or a foreign organization designated as a Foreign Terrorist Organization by the U.S. Secretary of State. (See Texas Government Code § 2270.808 and 2252.151-2252.154.

Pursuant to Section 2270.001, Texas Government Code:

1. “Boycott Israel” means refusing to deal with, terminating business activities with or otherwise taking any action that is intended to penalize, inflict economic harm on or limit commercial relations with Israel or with a person or entity doing business in Israel or in an Israeli-controlled territory, but does not include an action made for ordinary business purposes; and
2. “Company” means a for-profit sole proprietorship organization, association, corporation, partnership, joint venture, limited partnership, limited liability partnership or any limited liability company, including a wholly owned subsidiary, majority owned subsidiary, parent company or affiliate of those entities of those entities or business associations that exist to make a profit.

By accepting this contractual offer, I hereby consent that the entity which I represent is not barred from contracting with the Galveston County Health District or any of its affiliated entities, collectively known as “The District”, as a result of these stipulations. Furthermore, I acknowledge that should the entity become disqualified from working with The District at any point during the duration of this contractual agreement due to these terms, a representative of the entity shall immediately notify the District’s Procurement Officer, at which point the District attains the right to immediately void this agreement (as well as any other agreement the District and the entity are engaged in).

_______________________________     __________
DATE SIGNATURE OF AUTHORIZED COMPANY REPRESENTATIVE
TERMS AND CONDITIONS
Appendix B

1. COMPLETE AGREEMENT: This Purchase Order, which consists of these terms and conditions, the conditions contained within the referenced bid number, the contract entered into between Galveston County Health District (“GCHD”) and Vendor (if any) and any other attached terms, conditions, and specifications of GCHD, is a binding contract which is the sole and exclusive agreement between the parties. It supersedes all other writings and is expressly conditioned upon Vendor's agreement to the conditions hereof. In addition, nothing herein shall be construed to be an acceptance of any terms of Vendor. In the event of any conflict between the term and conditions of this Purchase Order and any Contract entered into between the GCHD and the Vendor, the terms of the Contract shall prevail.

2. MODIFICATION: No modification of this Purchase Order shall be effective without GCHD’s prior written consent. No course of prior dealings, no usage of the trade and no course of performance shall be used to modify, supplement, or explain any terms used in this Purchase Order. GCHD will not be bound by any oral statement, verbal agreement, or other representation contrary to the written specifications, terms, and conditions of this Purchase Order.

3. CANCELLATION: GCHD reserves the right to cancel this Purchase Order anytime or for default in all or any part of this Purchase Order, if Vendor breaches any of the terms, conditions, or requirements hereof, or if the Vendor becomes insolvent or commits acts of bankruptcy, or at any time for any reason or no reason prior to acceptance of delivery by GCHD. If this Purchase Order is cancelled pursuant to Vendor’s default, then GCHD may obtain similar goods or services elsewhere, and charge the Vendor for any damages incurred. Such right of cancellation is in addition to and not in lieu of any other remedies which GCHD may have in law or equity.

4. TERMINATION: The performance of work under this Purchase Order may be terminated in whole or in part by GCHD in accordance with this provision. Termination of work hereunder shall be affected by the delivery to the Vendor of a "Notice of Termination" specifying the extent to which performance of work under the Purchase Order is terminated and the date upon which such termination becomes effective. Such right of termination is in addition to, and not in lieu of rights of GCHD set forth in Paragraph 3 above.

5. DELIVERY: Time is of the essence in this Purchase Order and if delivery of conforming goods or performance of services is not completed by the time(s) promised, GCHD reserves the right, in addition to its other rights and remedies, to cancel this Purchase Order to reject nonconforming goods or services in whole or in part on reason able notice to Vendor, and/or purchase substitute goods or services elsewhere and charge Vendor with any loss incurred. If delay in promised delivery is foreseen, Vendor will give written notice to GCHD, and the delivery date may be extended by GCHD for valid reasons. Vendor must keep GCHD advised at all times of status of Purchase Order. No substitutions or cancellations will be permitted without prior written approval of GCHD’s Purchasing Department. Delivery shall be made only on weekdays from 8:00 A.M. to 5:00 P.M., unless prior approval for other delivery times has been obtained. Any provisions herein for delivery of goods or performance of services by installments shall not be construed as making the obligation of Vendor severable. C.O.D. shipments will not be accepted.
6. **ACCEPTANCE OF PRODUCTS AND SERVICES:** All products furnished and all services performed under this Purchase Order shall be to the satisfaction of GCHD and in accordance with the specifications, terms, and conditions of the Purchase Order and any applicable contract. GCHD reserves the right to inspect the products furnished or the services performed, and to determine the quality, acceptability, and fitness of such products or services.

7. **INVOICING AND PAYMENT:** Vendor shall submit an itemized invoice showing GCHD Purchase Order number. Invoices must agree in all respects with this Purchase Order. Payment will normally be remitted within thirty (30) days after receipt of a properly submitted invoice. Failure to submit invoices in accordance with the requirements herein may delay payment. All cash discounts offered will be taken if earned. Cash discount will be calculated from date of receipt for properly submitted invoice at the Invoice Address specified on the face of this Purchase Order.

8. **TITLE & RISK OF LOSS:** The title and risk of loss of the goods shall not pass to GCHD until GCHD receives and takes possession of the goods at the point or points of delivery.

9. **ASSIGNMENT/DELEGATION:** The rights and responsibilities of the Vendor to furnish the goods and/or services specified herein shall not be subcontracted, assigned, transferred, mortgaged, pledged, delegated, or otherwise disposed of or encumbered in any way by the Vendor. Any such assignment or delegation by Vendor shall be wholly void and totally ineffective for all purposes.

10. **INDEPENDENT CONTRACTOR:** In performing any services hereunder, Vendor is, and undertakes performance thereof as, an independent contractor, with sole responsibility for all persons employed in connection therewith, including without limitation, exclusive liability for the payment of all Federal, State, and local Unemployment and Disability Insurance and all Social Security and/or other taxes and contributions payable in respect of such persons, from and against which liability Vendor agrees to indemnify, exonerate, and hold harmless GCHD.

11. **INSURANCE:** If this Purchase Order requires the presence on GCHD premises of Vendor’s employees, subcontractors or others under Vendor’s control, Vendor agrees, prior to commencement of any services hereunder, to transmit to GCHD certificates of insurance as specified in the contract between parties.

12. **INDEMNIFICATION:** Vendor shall indemnify, exonerate, hold harmless and defend GCHD from and against any actions or suits and any claims, liability, damage, loss, cost or expense as a result of bodily injury or death and/or property damage arising out of, or in connection with this Purchase Order, unless caused by the sole negligence of GCHD.

13. **WARRANTIES:** In addition to all warranties established by law, Vendor hereby warrants and agrees that:

   (a) All goods and services covered by this Purchase Order shall conform to the specifications, drawings, samples, other descriptions set forth herein or otherwise furnished or adopted by GCHD, and shall be merchantable, fit for the purpose intended, of best quality and workmanship, and free from all defects. GCHD shall have the right of inspection and approval, and may, at Vendor’s expense, reject and return non-conforming goods or require re-
TERMS AND CONDITIONS

performance of services, which are not in compliance with the requirements of this Purchase
Order. Defects shall not be deemed waived by GCHD’s failure to notify Vendor upon receipt of
goods or completion of services, or by payment of invoice.

(b) All articles and/or services provided hereunder meet or exceed the Safety Standards
established and promulgated under the Federal Occupational Safety and Health Administration
(Public Law 91-596) and its regulations in effect or proposed as of the date of this Purchase
Order.

(c) All goods delivered pursuant to this Purchase Order shall conform to standards established
for such goods in accordance with any applicable Federal, State, or local laws and regulations,
unless otherwise indicated herein.

(d) The use or sale of any goods delivered hereunder, or any part thereof, does not infringe any
adverse existing patent, trademark, copyright, or other intellectual property right.

Vendor shall indemnify, exonerate, and save harmless GCHD, its customers, users of its
products, and its and their successors and assigns, or any of them, from and against any and all
liability, damage, loss, cost or expense incurred in connection with any claim, suit or action for
actual or alleged infringement of any such rights, and Vendor shall defend, at its expense, any
such claim suit or action brought against GCHD, its customers, users of its products and its and
their successors and assigns, or any of them.

The foregoing warranties shall survive acceptance of goods and performance of services
hereunder.

14. NON-DISCLOSURE: Unless required by law or consented to in writing by GCHD, no disclosure,
description, or other communication of any sort shall be made by Vendor to any third party
regarding GCHD’s purchase of goods or services hereunder, or of the details and characteristics
thereof. Anything furnished to Vendor by GCHD pursuant to this Purchase Order, including and
without limitation, samples, drawings, patterns, and materials shall remain the property of
GCHD, shall be held at Vendor’s risk, and shall be returned upon completion of the work. No
disclosure or reproduction thereof in any form shall be made without GCHD’s prior written
consent.

15. FORCE MAJEURE: Neither party hereto shall be liable for delays or failure to perform any term,
condition, or covenant of this Purchase Order due to causes beyond its reasonable control
including, but not limited to, acts of God, strikes, epidemics, war, riots, flood, fire, sabotage,
material or labor restrictions by any government authority, any other natural disaster, or any
other circumstances of like character which are beyond the reason able control of either party.
In the event of such delay or failure to perform, the period specified for performance hereunder
may be extended for a period equal to the time lost by reasons of the delay, or the total
Purchase Order may be reduced by the performance (or portions thereof) omitted during such
delay. The provisions of this paragraph shall be effective notwithstanding that such
circumstances shall have been operative at the date of this Purchase Order.

16. GOVERNING LAW: This Purchase Order shall be governed in accordance with the laws of the
State of Texas. Venue shall lie in Galveston County.
17. **COMPLIANCE WITH LAW AND CERTIFICATIONS:** Vendor shall comply with all applicable federal, state, and local laws, statutes, ordinances, standards, orders, rules, and regulations, including, as applicable, workers’ compensations laws, minimum and maximum salary and wage statutes and regulations, prompt payment and licensing laws and regulations. Vendor certifies that Vendor is fully informed about and in regulation with Title VI of the Civil Rights Act of 1964, as amended (42 USC 2000(D)), Executive Order 11246, as amended (41 CFR 60-1 and 60-2), Vietnam Era Veterans Readjustment Act of 1974, as amended (41 CFR 60-250), Rehabilitation Act of 1973, as amended (41 CFR 60-741), Age Discrimination Act (42 USC 6101 et seq.), Non-segregated Facilities (41 CFR 60-74 1), Omnibus Budget Reconciliation Provision, Section 952, Fair Labor Standards Act of 1938, Sections 6, 7, and 12, as amended, Immigration Reform and Control Act of 1986, and Utilization of Small Business Concerns and Small Business Concern Owned and Controlled by Socially and Economically Disadvantaged Individuals (p196-507), the Americans with Disabilities Act of 1990 (42 USC .12101 et seq.) and all federal laws and regulations, executive orders, state laws, and local laws as are applicable.

Vendor also understands that Vendor is ineligible to receive a purchasing award with the GCHD if Vendor or its principals are listed in the government wide exclusions in the System for Award Management (Debarment and Suspension Orders Executive Orders 12549 and 12689).

As applicable, Vendor hereby certifies that it is not a company identified on the Texas Comptroller’s list of companies known to have contracts with, or provide supplies or services to a foreign organization designation as a Foreign Terrorist Organization by the United States Secretary of State. Vendor further certifies and verifies that neither Vendor nor any affiliate, subsidiary or partner company of Vendor, if any (the “Vendor Companies”):

i) boycotts Israel, and Vendor agrees that Vendor and Vendor Companies will not boycott Israel during the term of this Purchase Order. For purposes of this Purchase Order, the term “boycott” shall mean and include terminating business activities or otherwise taking any action that is intended to penalize, inflict economic harm on or limit commercial relations with Israel or with a person or entity doing business in Israel or in an Israeli-controlled territory.

ii) Has not engaged in business with Iran, Sudan, or a foreign terrorist organization identified on a list prepared by the Texas Comptroller (See Texas Government Code § 2270.808 and 2252.151-2252.154.

18. **BUYER’S PREMISES RULES:** If this Purchase Order requires presence on GCHD’S premises of Vendor’s employees subcontractors or others under Vendor's control, Vendor shall comply with all applicable rules of such premises, including without limitation those relative to environmental quality, safety, fire prevention, no smoking, traffic, and parking.

19. **ASSIGNMENT OF OVERCHARGE CLAIMS:** Vendor hereby assigns to GCHD any and all claims for overcharges associated with this Purchase Order arising under the antitrust laws of the United States, 15 U.S.C.A., Sec. 1 et seq. (1973), or arising under the antitrust laws of the State of Texas. Texas Business and Commerce Code Annotated, Sec.15.01, et seq. (1967).
20. **VENDOR'S AFFIRMATIONS**: By acceptance of this Purchase Order and/or furnishing any of the products or services specified herein, Vendor affirms the following:

   (a) That Vendor has not given, offered to give, nor intends to give at any time hereafter any economic opportunity, future employment, gift, loan, gratuity, special discount, trip favor, or service to a public servant in connection with this Purchase Order.

   (b) That Vendor has not violated the antitrust laws of this State, codified in Section 15.01, et seq., Texas Business and Commerce Code, or the Federal antitrust laws.

   (c) That no relationship, whether by relative, business associate, capital funding agreement, or any other such kinship, exists between Vendor and any current GCHD employee, or any person previously employed by GCHD within the immediate twelve (12) months prior to this award. If such relationship does exist, full disclosure must be made to the GCHD Purchasing Agent prior to acceptance of Purchase Order for appropriate administrative review and approval.

   (d) If Vendor is a corporation, that its Texas franchise taxes are current, or that the corporation is exempt from the payment of the franchise tax, or that the corporation is an out-of-state corporation that is not subject to Texas franchise tax, whichever is applicable.

21. **OPEN RECORDS**: All information, documentation, and other material submitted by Vendor in response to any solicitations or under any resulting contract thereof may be subject to public disclosure under the Texas Public Information Act (TX Gov't Code, Chapter 552). Vendors are hereby notified that GCHD strictly adheres to this statute and the interpretations thereof rendered by the Courts and/or Texas Attorney General’s office. Vendor shall be deemed to have knowledge of this law and how to protect their interest under it. Exceptions to disclosure of information as provided by this statute are intended to protect legitimate interests of the GCHD or Vendor, and are not intended to serve as a means to withhold or delay disclosure of information not covered by these exceptions.

22. **NON-WAIVER OF DEFAULTS**: Any failure of GCHD, at any time or from time to time, to enforce or require the strict keeping and performance of any of the terms and conditions of this Purchase Order, or to exercise a right hereunder, shall not constitute a waiver of such terms, conditions, or rights, and shall not affect or impair same, or the right of GCHD at any time to avail itself of same.

23. **SEVERABILITY**: In the event that any provision of this Purchase Order, or the application thereof to any person or circumstance, is determined by a competent Court of Law to be invalid, unlawful, or unenforceable to any extent, the remainder of this Purchase Order, and the application of such provision to persons or circumstances other than those to which it is determined to be unlawful, unenforceable, or invalid to any extent, shall continue to be valid and may be enforced to the fullest extent permitted by law.
Appendix C


The Texas Legislature adopted House Bill 1295 in 2015. HB 1295 added Section 2252.908 to the Government Code. Under this law, a governmental entity or state agency may not enter into certain contracts with a business entity unless the business entity submits a disclosure of interested parties to the governmental entity or state agency.

Specifically, any business entity that enters into a contract with Galveston County Health District (“GCHD”) or Coastal Health and Wellness (“CHW”) that:

1) requires an action or vote by the United Board of Health and Governing Board before the contract may be signed; or

2) has a value of at least $1 million,

must submit a “Disclosure of Interested Parties” form to the GCHD/CHW Purchasing Department prior to contract execution.

The following contracts are exempt from the Disclosure requirement:

- a sponsored research contract of an institution of higher education;
- an interagency contract of a state agency or an institution of higher education;
- a contract related to health and human services if:
  - the value of the contract cannot be determined at the time the contract is executed; and
  - any qualified vendor is eligible for the contract;
- a contract with a publicly traded business entity, including a wholly owned subsidiary of the business entity;
- a contract with an electric utility, as that term is defined by Section 31.002, Utilities Code; or
- a contract with a gas utility, as that term is defined by Section 121.001, Utilities Code.

Texas Ethics Commission mandates the “Disclosure of Interested Parties” form (Form 1295) must be filed electronically. Form 1295 is filed through the Texas Ethics Commission’s online reporting system (handwritten forms are not allowed).

The Texas Ethics Commission’s website is: www.ethics.state.tx.us. The area of the website pertaining to Form 1295 is: www.ethics.state.tx.us/whatsnew/elf_info_form1295.htm.

Once the business entity has completed the electronic filing of Form 1295, then the business entity must print out, and sign the form. The person completing the filing must also complete an “unsworn declaration.” Once Form 1295 is signed and unsworn declaration completed, the business entity must submit the completed Form 1295 and unsworn declaration to the GCHD/CHW Purchasing Department.

Please mail all required documents to:

Mailing Address:
The above process must be completed before the contract can be executed. No portion of the Form 1295 process commits GCHD or CHW to any type of award of contract.

After the Purchasing Department receives the completed, signed Form 1295 and unsworn declaration, the Department will, within 30 days, go the Texas Ethics Commission website to submit the electronic confirmation of the County’s receipt of the completed 1295 process. We hope this summary information is helpful to you. However, this information is not exhaustive, and all business entities are encouraged to visit the Texas Ethics Commission website, which contains Frequently Asked Questions, instructional videos, and much more information on HB1295/Section 2252.908 requirements and/or to consult with their own counsel.
United Board of Health
August 2018
Item #7
Receive and File Amended Quarterly Compliance Report (approved at the United Board of Health meeting on July 25, 2018)
# United Board of Health

**Quarter 3, 2018 – Compliance Report**

*(The information presented in this Report covers April, May, and June of 2018)*

## INTERNAL AUDITS

<table>
<thead>
<tr>
<th>DATE CONDUCTED/ DEPARTMENT</th>
<th>TYPE OF AUDIT &amp; FINDINGS</th>
<th>ACTION TAKEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>April 18, 2018—<strong>Accounting</strong></td>
<td><strong>Cash Audit:</strong> Accounting completed an audit of all District cash banks (covering January - March). The audit yielded no discrepancies, and all balances reconciled with amounts assigned.</td>
<td>No action taken. We will continue operating under our current protocol.</td>
</tr>
<tr>
<td>June 7, 2018—<strong>Accounting</strong></td>
<td><strong>Inventory Audit:</strong> Accounting completed an audit of all District inventory. The audit yielded that accounting could not locate four items—2 Monitors, Printer, and a Fax.</td>
<td>Disposal form and incident reports were submitted.</td>
</tr>
<tr>
<td>June 12 &amp; June 27, 2018 (Dickinson) June 5 &amp; June 26, 2018 (Texas City) June 26 &amp; June 27, 2018 (Galveston) - WIC</td>
<td>Per Health and Human Services Requirements, WIC conducted their bi-annual internal QA WIC audits. All areas were compliant.</td>
<td>No action taken.</td>
</tr>
</tbody>
</table>

## EXTERNAL AUDITS

<table>
<thead>
<tr>
<th>DATE CONDUCTED/ DEPARTMENT</th>
<th>TYPE OF AUDIT &amp; FINDINGS</th>
<th>ACTION TAKEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>May 15, 2018—<strong>Immunizations</strong></td>
<td><strong>Texas Department of State Health Services (&quot;DSHS&quot;) Program Review/Evaluation:</strong> DSHS completed a Program Review and Evaluation to determine whether the GCHD Immunizations Program was in compliance with the State’s Program Requirements. The Evaluation yielded no findings.</td>
<td>No action taken. We will continue operating under our current program and standards. GCHD received special recognition from DSHS for their exceptional service.</td>
</tr>
</tbody>
</table>
since GCHD was in compliance. DSHS Immunization Evaluation yielded exceptional findings. DSHS stated that the GCHD Immunizations Department consistently exceeds expectations and performs in a manner that goes above and beyond the call of duty.

### INCIDENT REPORTS

<table>
<thead>
<tr>
<th>DATE OF INCIDENT/ DEPARTMENT</th>
<th>COMPLIANCE/REPORTABLE ISSUES</th>
<th>ACTION TAKEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>04/04/2018-EMS</td>
<td>Vehicle was dispatched to stage at 83rd Street and Stewart Rd. for the Iron Man event. Two spotters helped direct driver; however, Medic still ended in a muddy ditch.</td>
<td>Medics received standard post-accident drug testing. The Risk and Safety Coordinator filed a claim, and vehicle was repaired.</td>
</tr>
</tbody>
</table>

- Preventable Incident
United Board of Health
Quarter 3, 2018 – Compliance Report
(The information presented in this Report covers April, May, and June of 2018)

<table>
<thead>
<tr>
<th>Date</th>
<th>Incident Description</th>
<th>Outcome</th>
</tr>
</thead>
</table>
| 4/14/2018-EMS | Medics stopped at Whataburger on Church St. near UTMB. Medic backed into a parking spot without a spotter and a tree limb struck the unit - breaking a light on the rear top side of unit.  
  - Preventable Incident                                                                                                                                  | Driver was transported to Urgent Care for standard post-accident drug testing. No claim submitted. Replaced light. |
| 4/17/2018-EMS | Medics began to administer IV Medications. While opening medicine, the Medic removed the end cap from an epi vial. The Medic used his finger nail on the right thumb to open the medication. In the opening process, Medic accidentally cut his thumb.  
  - Non-preventable Incident                                                                                                                                | GCHD filed a Workman’s Compensation claim.       |
| 05/02/2018-EMS | Four Medics assisted in loading a patient from a hospital bed onto a stretcher for transport. The Hospital Nursing Staff did not remove all leads from the patient, and a Medic began to remove remaining leads so patient could be successfully transported out of hospital room. In the process, Medic felt a sharp pain in her lower back while holding excess skin. While the Medic completed the transport, her pain intensified. Medic immediately reported injury, and was released from duty to seek medical attention  
  - Non-Preventable Incident                                                                                                                                | GCHD submitted a Workers’ Compensation claim. Medic is currently released to work, light duty |

Submitted by: Lea Williams, Esq. Director of Contracts/ General Counsel  
United Board of Health: July 25, 2018
## United Board of Health

### Quarter 3, 2018 – Compliance Report

*(The information presented in this Report covers April, May, and June of 2018)*

<table>
<thead>
<tr>
<th>Date</th>
<th>Event Description</th>
<th>Resolution</th>
</tr>
</thead>
<tbody>
<tr>
<td>05/08/2018-EMS</td>
<td>During patient transport, Medic placed laptop in his lap. When the Medic stood to get something for the patient, the laptop accidentally slipped out of Medic’s lap and struck an oxygen tank. The laptop’s screen cracked. Medics completed patient transport and reported damage to Supervisor.</td>
<td>Medic completed an equipment malfunction report and an incident report. Supervisor immediately provided a replacement laptop for use.</td>
</tr>
<tr>
<td></td>
<td><strong>Non-Preventable Incident</strong></td>
<td></td>
</tr>
<tr>
<td>05/8/2018—EMS</td>
<td>(Same team involved in the previous reported incident.) A laptop was damaged earlier in this Medic’s shift. The damage occurred with a replacement laptop that was issued the same day. The Medic placed the laptop on the dashboard. While in route, the laptop fell off the dashboard to the floorboard. The replacement laptop screen cracked and a dent was on right laptop corner.</td>
<td>Medic completed an equipment malfunction report and an incident report. Supervisor provided another replacement laptop for use. Identified safe place for laptop. Supervisor Training was provided to ensure proper laptop placement while in units.</td>
</tr>
<tr>
<td></td>
<td><strong>Preventable Incident</strong></td>
<td></td>
</tr>
<tr>
<td>05/14/2018—EMS</td>
<td>Medic set the shoreline down beside the ambulance, then drove over it while leaving the station.</td>
<td>Disciplinary action taken and documented in file, due to carelessness.</td>
</tr>
</tbody>
</table>
United Board of Health
Quarter 3, 2018 – Compliance Report

(The information presented in this Report covers April, May, and June of 2018)

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>5/27/2018-EMS</td>
<td>Medics responded to a patient who complained of coughing for four days. The patient denied any significant respiratory history. Patient was then asked of any history specifically of tuberculosis. Patient stated that she had a previous active Tuberculosis infection, and appeared confused that this could affect her lungs. Medics then donned personal protective masks and patient was given N95 mask prior to entering.</td>
<td>At UTMB, Patient tested negative for Tuberculosis. Medics tested negative for Tuberculosis as well. GCHD TB Program Manager conducted a First Responders Training for possible Tuberculosis Exposure.</td>
</tr>
<tr>
<td>05/31/2018-EMS</td>
<td>Medic was in the process of assisting partner in order to maneuver a stretcher. The Medics realized that all wheels were not on the ground. The Medics did not properly communicate stretcher movement, and the Patient was temporarily disconnected from the cardiac monitor and stretcher. Patient’s right shoulder came into contact with the ground, due to improper stretcher transport.</td>
<td>Required additional safety training regarding communication and stretcher movement. Emphasized that failing to plan, communicate, or work together are not sufficient excuses for failing to ensure patient safety and comfort.</td>
</tr>
<tr>
<td>6/13/2018-EMS</td>
<td>An EMS Unit was parked at Classic Ford in Galveston for service/repair. A Citizen clipped the Unit while driving his trailer. The unit sustained damage to the right rear panel and wheel well cover on the unit. The Citizen submitted insurance papers to the Fleet Coordinator along with his driver’s license in order to initiate an insurance claim.</td>
<td>GCHD filed a claim against the Citizen’s insurance. The Unit is in the process of being repaired.</td>
</tr>
</tbody>
</table>
### United Board of Health
### Quarter 3, 2018 – Compliance Report

*(The information presented in this Report covers April, May, and June of 2018)*

<table>
<thead>
<tr>
<th>Date</th>
<th>Description</th>
<th>Preventable Incident Details</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>06/13/2018—EMS</strong></td>
<td>Medic stripped down and removed his shoes to assist a boat in the evening. Medic cut his feet on the oyster reef and suffered damage. Immediately went to UTMB for treatment.</td>
<td>Per our Dress Code Policy, Medics are required to wear a uniform and be presentable, at all times. Medic received disciplinary action, since he should not have taken off clothes nor assisted the boat. This was not part of his standard duties.</td>
</tr>
<tr>
<td><strong>06/24/2018-EMS</strong></td>
<td>After providing services to a patient inside his RV, EMT exited the RV with equipment. The EMT lost his footing on the narrow steps and fell 3-4 steps landing on his right side. Patient’s family members witnessed the fall and assisted the EMT into a standing position. EMT suffered bruises, but did not request a medical evaluation. EMT reported the steps were narrowly constructed.</td>
<td>EMT informed his Supervisor of the fall and filed an Incident/Injury report. EMT did not want to seek a medical evaluation. However, the Risk and Safety Coordinator provided instructions on the process should he later determine that he would like a medical evaluation. GCHD did not file a Workers Compensation Claim.</td>
</tr>
<tr>
<td><strong>5/25/2018-ARC</strong></td>
<td>An employee attempted to move a cat from the intake room to the stray cat room. The Employee utilized a “used” cat box to carry the cat over. When opening the box to allow cat to walk into the new kennel, the Cat jumped and escaped from the cage. The cat was loose. Employee attempted to recover the cat, by grabbing the scruff on the back of the cat’s neck. The cat then bit her hand. Two visible punctures on the top of her hand.</td>
<td>GCHD filed a Worker’s compensation claim since employee requested medical attention. ARC administered First Aid. Cat was moved to rabies quarantine and bite report was completed. This employee was previously involved in same type of activity. Advised that she should have worn personal protective equipment and did not have on any gloves. Training was documented in her HR File.</td>
</tr>
</tbody>
</table>
### United Board of Health

#### Quarter 3, 2018 – Compliance Report

*(The information presented in this Report covers April, May, and June of 2018)*

<table>
<thead>
<tr>
<th>Date</th>
<th>Incident Description</th>
<th>Resolution</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/11/2018 — Direct Administration</td>
<td>While relocating medical supplies from large containers, an employee stuck her thumb on an open uncovered needle. The instrument was a short pricking needle used to draw blood for a glucometer. The Employee performed self-care and washed and applied an antiseptic.</td>
<td>Reported needle stick to Supervisor and to Chief Nursing Officer (“CNO”). Employee initially did not request a medical evaluation. Employee later requested a medical evaluation. A Workers Compensation Claim was filed.</td>
</tr>
</tbody>
</table>

*Non-Preventable Incident*
United Board of Health
Quarter 3, 2018 – Compliance Report

(The information presented in this Report covers April, May, and June of 2018)
United Board of Health
August 2018
Item #8
Informational Reports
COASTAL HEALTH & WELLNESS

Governing Board

FINANCIAL SUMMARY
For the Period Ending June 30, 2018

July 26, 2018

GCHD Board Room | 9850-A Emmett F. Lowry Expy. | Texas City, TX 77591
<table>
<thead>
<tr>
<th>CHW - BALANCE SHEET as of June 30, 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ASSETS</strong></td>
</tr>
<tr>
<td>Cash &amp; Cash Equivalents</td>
</tr>
<tr>
<td>$5,569,789</td>
</tr>
<tr>
<td>$5,566,547</td>
</tr>
<tr>
<td>$3,242</td>
</tr>
<tr>
<td>Accounts Receivable</td>
</tr>
<tr>
<td>14,481,991</td>
</tr>
<tr>
<td>13,154,153</td>
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<tr>
<td>1,327,838</td>
</tr>
<tr>
<td>Allowance For Bad Debt</td>
</tr>
<tr>
<td>(13,350,772)</td>
</tr>
<tr>
<td>(12,042,399)</td>
</tr>
<tr>
<td>(1,308,373)</td>
</tr>
<tr>
<td>Pre-Paid Expenses</td>
</tr>
<tr>
<td>138,564</td>
</tr>
<tr>
<td>53,979</td>
</tr>
<tr>
<td>84,585</td>
</tr>
<tr>
<td>Due To / From</td>
</tr>
<tr>
<td>(28,338)</td>
</tr>
<tr>
<td>(29,131)</td>
</tr>
<tr>
<td>793</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
</tr>
<tr>
<td><strong>$6,811,234</strong></td>
</tr>
<tr>
<td><strong>$6,703,149</strong></td>
</tr>
<tr>
<td><strong>$108,084</strong></td>
</tr>
<tr>
<td><strong>LIABILITIES</strong></td>
</tr>
<tr>
<td>Accounts Payable</td>
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<td>$73,097</td>
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<tr>
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<td>Accrued Salaries</td>
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<td>296,224</td>
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<tr>
<td>75,185</td>
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<td>Deferred Revenues</td>
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</tr>
<tr>
<td>50,110</td>
</tr>
<tr>
<td>61,764</td>
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<tr>
<td><strong>Total Liabilities</strong></td>
</tr>
<tr>
<td><strong>$556,381</strong></td>
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<tr>
<td><strong>$466,922</strong></td>
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<tr>
<td><strong>$89,458</strong></td>
</tr>
<tr>
<td><strong>FUND BALANCE</strong></td>
</tr>
<tr>
<td>Fund Balance</td>
</tr>
<tr>
<td>$6,260,512</td>
</tr>
<tr>
<td>$6,260,512</td>
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<tr>
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<tr>
<td>Current Change</td>
</tr>
<tr>
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</tr>
<tr>
<td>(24,286)</td>
</tr>
<tr>
<td><strong>$18,627</strong></td>
</tr>
<tr>
<td><strong>Total Fund Balance</strong></td>
</tr>
<tr>
<td><strong>$6,254,853</strong></td>
</tr>
<tr>
<td><strong>$6,236,226</strong></td>
</tr>
<tr>
<td><strong>$18,627</strong></td>
</tr>
<tr>
<td><strong>TOTAL LIABILITIES &amp; FUND BALANCE</strong></td>
</tr>
<tr>
<td><strong>$6,811,234</strong></td>
</tr>
<tr>
<td><strong>$6,703,149</strong></td>
</tr>
<tr>
<td><strong>$108,085</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CHW - REVENUE &amp; EXPENSES as of June 30, 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>REVENUE</strong></td>
</tr>
<tr>
<td>Actual</td>
</tr>
<tr>
<td>Budgeted</td>
</tr>
<tr>
<td>PTD Budget Variance</td>
</tr>
<tr>
<td>YTD Budget Variance</td>
</tr>
<tr>
<td>Current Month Revenue &amp; Expenses Actual</td>
</tr>
<tr>
<td>---------------------------------------------</td>
</tr>
<tr>
<td>County Revenue</td>
</tr>
<tr>
<td>$324,070</td>
</tr>
<tr>
<td>$324,070</td>
</tr>
<tr>
<td>($0)</td>
</tr>
<tr>
<td>($0)</td>
</tr>
<tr>
<td>DSRIP Revenue</td>
</tr>
<tr>
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</tr>
<tr>
<td>79,167</td>
</tr>
<tr>
<td>(79,167)</td>
</tr>
<tr>
<td>(237,500)</td>
</tr>
<tr>
<td>HHIS Grant Revenue</td>
</tr>
<tr>
<td>220,295</td>
</tr>
<tr>
<td>260,617</td>
</tr>
<tr>
<td>(40,321)</td>
</tr>
<tr>
<td>(55,622)</td>
</tr>
<tr>
<td>Patient Revenue</td>
</tr>
<tr>
<td>1,557,988</td>
</tr>
<tr>
<td>1,352,449</td>
</tr>
<tr>
<td>205,539</td>
</tr>
<tr>
<td>786,342</td>
</tr>
<tr>
<td>Other Revenue</td>
</tr>
<tr>
<td>9,908</td>
</tr>
<tr>
<td>11,187</td>
</tr>
<tr>
<td>(1,279)</td>
</tr>
<tr>
<td>(5,831)</td>
</tr>
<tr>
<td><strong>Total Revenue</strong></td>
</tr>
<tr>
<td><strong>$2,112,262</strong></td>
</tr>
<tr>
<td><strong>$2,027,490</strong></td>
</tr>
<tr>
<td><strong>$84,772</strong></td>
</tr>
<tr>
<td><strong>$487,390</strong></td>
</tr>
<tr>
<td><strong>EXPENSES</strong></td>
</tr>
<tr>
<td>Personnel</td>
</tr>
<tr>
<td>$558,922</td>
</tr>
<tr>
<td>$652,685</td>
</tr>
<tr>
<td>$93,764</td>
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<tr>
<td>$218,618</td>
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<tr>
<td>Contractual</td>
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<tr>
<td>47,607</td>
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<tr>
<td>60,260</td>
</tr>
<tr>
<td>12,653</td>
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<td>43,531</td>
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<tr>
<td>IGT Reimbursement</td>
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<tr>
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<tr>
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<td>30,807</td>
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<td>Travel</td>
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<tr>
<td>2,510</td>
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<tr>
<td>1,319</td>
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<td>1,058</td>
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<tr>
<td>Bad Debt Expense</td>
</tr>
<tr>
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</tr>
<tr>
<td>1,084,467</td>
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<tr>
<td>(223,906)</td>
</tr>
<tr>
<td>(812,859)</td>
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<tr>
<td>Other</td>
</tr>
<tr>
<td>86,568</td>
</tr>
<tr>
<td>83,628</td>
</tr>
<tr>
<td>(2,940)</td>
</tr>
<tr>
<td>(86,707)</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
</tr>
<tr>
<td><strong>$2,093,635</strong></td>
</tr>
<tr>
<td><strong>$2,027,490</strong></td>
</tr>
<tr>
<td><strong>($66,145)</strong></td>
</tr>
<tr>
<td><strong>($493,051)</strong></td>
</tr>
<tr>
<td><strong>CHANGE IN NET ASSETS</strong></td>
</tr>
<tr>
<td><strong>$18,627</strong></td>
</tr>
<tr>
<td><strong>$0</strong></td>
</tr>
<tr>
<td><strong>$18,627</strong></td>
</tr>
<tr>
<td><strong>($5,661)</strong></td>
</tr>
</tbody>
</table>

**HIGHLIGHTS**

- MTD increase in Fund Balance of $18,627.
- Revenues were $84,772 higher than budgeted this month. MTD/YTD revenues related to Private Insurance, Medicaid, Medicare and Contract Revenue were all higher than budgeted, but less than prior month.
- Expenses were ($66,145) higher MTD than budgeted. Bad Debt expense is recorded higher than budgeted. Also additional expenses were incurred in IT Software, Licenses, Intangibles ($500 OID Registry, $509 Lansweeper), and Professional Fees/Licenses/Inspections $796 for radiation license renewal.
### REVENUE

<table>
<thead>
<tr>
<th>Grouping</th>
<th>Description</th>
<th>Period Ending 6/30/18</th>
<th>MTD Budget</th>
<th>MTD Budget Variance</th>
<th>YTD Budget</th>
<th>YTD Budget Variance</th>
<th>Annual Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td>HHS</td>
<td>HHS GRANT REVENUE - Federal</td>
<td>$220,295</td>
<td>$200,617</td>
<td>($40,321)</td>
<td>$726,228</td>
<td>$781,850.00</td>
<td>($55,622)</td>
</tr>
<tr>
<td>Patient Rev</td>
<td>GRANT REVENUE - Title V</td>
<td>$4,302</td>
<td>$7,905</td>
<td>($3,603)</td>
<td>$12,657</td>
<td>$23,714</td>
<td>($10,056)</td>
</tr>
<tr>
<td>Patient Rev</td>
<td>PRIVATE INSURANCE</td>
<td>$133,368</td>
<td>$136,556</td>
<td>($3,188)</td>
<td>$473,500</td>
<td>$409,667</td>
<td>$63,833</td>
</tr>
<tr>
<td>Patient Rev</td>
<td>PHARMACY REVENUE - 340b</td>
<td>$51,235</td>
<td>$58,750</td>
<td>$7,245</td>
<td>$244,169</td>
<td>$176,260</td>
<td>$67,969</td>
</tr>
<tr>
<td>Patient Rev</td>
<td>MEDICARE</td>
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<td>$227,721</td>
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<td>$970,819</td>
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<tr>
<td>Patient Rev</td>
<td>MEDICARE</td>
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<td>$126,421</td>
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<td>$796,591</td>
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<td>$309,723</td>
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<tr>
<td>Other Rev</td>
<td>LOCAL GRANTS &amp; FOUNDATIONS</td>
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<td>$2,701</td>
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<td>$0</td>
<td>$0</td>
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<tr>
<td>Other Rev</td>
<td>MEDICAL RECORD REVENUE</td>
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<td>$1,354</td>
<td>$622</td>
<td>$5,641</td>
<td>$4,003</td>
<td>$1,778</td>
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<tr>
<td>Other Rev</td>
<td>MEDICAID REVENUE</td>
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<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Other Rev</td>
<td>MEDICAID INCENTIVE PAYMENTS</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>County</td>
<td>COUNTY REVENUE</td>
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<td>$324,070</td>
<td>($0)</td>
<td>$972,211</td>
<td>$972,211</td>
<td>($0)</td>
</tr>
<tr>
<td>Other Rev</td>
<td>CONTRACT REVENUE</td>
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<td>$853</td>
<td>$1,796</td>
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</tr>
<tr>
<td>Other Rev</td>
<td>LOCAL FUNDS / OTHER REVENUE</td>
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<td>$1,872</td>
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<tr>
<td>Other Rev</td>
<td>CONVENIENCE FEE</td>
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<td>$0</td>
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<td>Fund Balance</td>
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<td>$13,135</td>
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</tr>
<tr>
<td></td>
<td>Total Revenue</td>
<td>$2,112,262</td>
<td>$2,027,490</td>
<td>$84,772</td>
<td>$8,559,659</td>
<td>$8,082,469</td>
<td>$487,390</td>
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</tbody>
</table>

### EXPENSES

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
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<tr>
<td>Personnel Merit Compensation</td>
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</tr>
<tr>
<td>Personnel SALARIES, PROVIDER INCENTIVES</td>
<td>1,000</td>
</tr>
<tr>
<td>Personnel SALARIES, supplemental</td>
<td>0</td>
</tr>
<tr>
<td>Personnel SALARIES, O&amp;I</td>
<td>2,857</td>
</tr>
<tr>
<td>Personnel SALARIES, PART-TIME</td>
<td>8,405</td>
</tr>
<tr>
<td>Personnel Comp Pay</td>
<td>100</td>
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<tr>
<td>Personnel FICA EXPENSE</td>
<td>34,017</td>
</tr>
<tr>
<td>Personnel LIFE INSURANCE</td>
<td>896</td>
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<tr>
<td>Personnel LONG TERM DISABILITY INSURANCE</td>
<td>893</td>
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<tr>
<td>Personnel GROUP HOSPITALIZATION INSURANCE</td>
<td>29,177</td>
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<tr>
<td>Personnel WORKER'S COMP INSURANCE</td>
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<tr>
<td>Personnel EMPLOYER SPONSORED HEALTHCARE</td>
<td>123</td>
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<tr>
<td>Personnel HSA EXPENSE</td>
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<tr>
<td>Personnel PENSION / RETIREMENT</td>
<td>11,327</td>
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<tr>
<td>Contractual OUTSIDE LAB CONTRACT</td>
<td>23,548</td>
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<tr>
<td>Contractual OUTSIDE X-RAY CONTRACT</td>
<td>22,220</td>
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<tr>
<td>Contractual MISCELLANEOUS CONTRACT SERVICES</td>
<td>10,460</td>
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<tr>
<td>Personnel TEMPORARY STAFFING</td>
<td>11,786</td>
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<tr>
<td>Contractual CHW CONTRACT BILLING SERVICE</td>
<td>5,199</td>
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<tr>
<td>IG TGT REIMBURSEMENT</td>
<td>37,500</td>
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<td>Contractual JANITORIAL CONTRACT</td>
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<td>Contractual PEST CONTROL</td>
<td>80</td>
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<td>Contractual SECURITY</td>
<td>3,427</td>
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<td>Supplies OFFICE SUPPLIES</td>
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<td>Supplies OPERATING SUPPLIES</td>
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<td>Supplies OUTSIDE DENTAL SUPPLIES</td>
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<td>Supplies PHARMACEUTICAL SUPPLIES</td>
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<td>Supplies JANITORIAL SUPPLIES</td>
<td>0</td>
</tr>
<tr>
<td>Supplies PRINTING SUPPLIES</td>
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</tr>
<tr>
<td>Supplies UNIFORMS</td>
<td>5</td>
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<tr>
<td>Other POSTAGE</td>
<td>747</td>
</tr>
<tr>
<td>Other TELEPHONE</td>
<td>4,318</td>
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<td>Other WATER</td>
<td>851</td>
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<tr>
<td>Other ELECTRICITY</td>
<td>2,233</td>
</tr>
<tr>
<td>Travel TRAVEL, LOCAL</td>
<td>454</td>
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<td>Travel TRAVEL, OUT OF TOWN</td>
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<td>Travel LOCAL TRAVELING</td>
<td>417</td>
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<tr>
<td>Travel TRAVEL, OUT OF TOWN</td>
<td>737</td>
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<td>Other RENTALS</td>
<td>3,176</td>
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<td>Other LEASES</td>
<td>43,702</td>
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<td>Other MAINTENANCE / REPAIR, EQUIP.</td>
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<td>Other MAINTENANCE / REPAIR, AUTO</td>
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<td>Other FUEL</td>
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<tr>
<td>Other MAINTENANCE / REPAIR, BLDG.</td>
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<tr>
<td>Other MAINT/ REPAIR, IT Equip</td>
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<tr>
<td>Other MAINTENANCE / Preventive, AUTO</td>
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<tr>
<td>Other INSURANCE, AUTO/Track</td>
<td>116</td>
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<tr>
<td>Other INSURANCE, GENERAL LIABILITY</td>
<td>724</td>
</tr>
<tr>
<td>Other INSURANCE, BLDG. CONTENTS</td>
<td>1,479</td>
</tr>
</tbody>
</table>

**Total Revenue**: $2,112,262

**Total Expenses**: $2,027,490

**Total Expenses Variance**: $84,772

**Total Revenue Variance**: $8,559,659

**Total Expenses Variance**: $8,082,469

**Total Budget**: $487,390
Coastal Health & Wellness
Statement of Revenue and Expenses for the Period ending June 30, 2018

<table>
<thead>
<tr>
<th>Description</th>
<th>Period Ending 6/30/18</th>
<th>MTD Budget</th>
<th>MTD Budget Variance</th>
<th>YTD Actual</th>
<th>YTD Budget</th>
<th>YTD Budget Variance</th>
<th>Annual Budget</th>
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</thead>
<tbody>
<tr>
<td>Other COMPUTER EQUIPMENT</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$369</td>
<td>$0</td>
<td>($359)</td>
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<tr>
<td>Other OPERATING EQUIPMENT</td>
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<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0.00</td>
</tr>
<tr>
<td>Other BUILDING IMPROVEMENTS</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0.00</td>
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<tr>
<td>Other NEWSPAPER ADS</td>
<td>$1,054</td>
<td>$1,500</td>
<td>$446</td>
<td>$2,360</td>
<td>$4,500</td>
<td>$2,140</td>
<td>$18,000.00</td>
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<td>Other SUBSCRIPTIONS, BOOKS, ETC</td>
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<td>$125</td>
<td>$125</td>
<td>($225)</td>
<td>$375</td>
<td>$601</td>
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<tr>
<td>Other ASSOCIATION DUES</td>
<td>$2,614</td>
<td>$2,883</td>
<td>$66</td>
<td>$8,147</td>
<td>$9,648</td>
<td>$501</td>
<td>$34,592.00</td>
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<tr>
<td>Other IT SOFTWARE, LICENSES, INTANGIBLES</td>
<td>$13,715</td>
<td>$12,712</td>
<td>($1,003)</td>
<td>$117,719</td>
<td>$36,135</td>
<td>($79,584)</td>
<td>$152,540.00</td>
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<tr>
<td>Other PROF FEES/LICENSES/INSPECTIONS</td>
<td>$796</td>
<td>$191</td>
<td>($505)</td>
<td>$596</td>
<td>$572</td>
<td>($424)</td>
<td>$2,288.00</td>
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<tr>
<td>Other PROFESSIONAL SERVICES</td>
<td>$2,640</td>
<td>$1,342</td>
<td>($1,498)</td>
<td>$9,161</td>
<td>$4,025</td>
<td>($5,136)</td>
<td>$16,100.00</td>
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<tr>
<td>Other MEDIHAZARD WASTE DISPOSAL</td>
<td>$1,133</td>
<td>$483</td>
<td>($650)</td>
<td>$1,654</td>
<td>$1,450</td>
<td>($204)</td>
<td>$5,800.00</td>
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<tr>
<td>Other TRANSPORTATION CONTRACT</td>
<td>$548</td>
<td>$650</td>
<td>$104</td>
<td>$1,720</td>
<td>$1,950</td>
<td>$230</td>
<td>$7,800.00</td>
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<tr>
<td>Other BOARD MEETING OPERATIONS</td>
<td>$35</td>
<td>$29</td>
<td>($6)</td>
<td>$71</td>
<td>$88</td>
<td>$17</td>
<td>$350.00</td>
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<tr>
<td>Other SERVICE CHG - CREDIT CARDS</td>
<td>$536</td>
<td>$686</td>
<td>$149</td>
<td>$1,692</td>
<td>$2,055</td>
<td>$363</td>
<td>$8,220.00</td>
</tr>
<tr>
<td>Other CASHIER OVER / SHORT</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0.00</td>
</tr>
<tr>
<td>Other LATE CHARGES</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0.00</td>
</tr>
<tr>
<td>Other BAD DEBT EXPENSE</td>
<td>$1,308,373</td>
<td>$1,084,467</td>
<td>($223,906)</td>
<td>$4,066,289</td>
<td>$3,253,401</td>
<td>($812,859)</td>
<td>$13,013,605.00</td>
</tr>
<tr>
<td>Other MISCELLANEOUS EXPENSE</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0.00</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td>$2,093,635</td>
<td>$2,027,460</td>
<td>($66,145)</td>
<td>$6,575,520</td>
<td>$6,082,469</td>
<td>($493,051)</td>
<td>$24,329,877</td>
</tr>
<tr>
<td><strong>Net Change in Fund Balance</strong></td>
<td><strong>$16,627</strong></td>
<td><strong>$0</strong></td>
<td><strong>$22,514</strong></td>
<td><strong>$22,514</strong></td>
<td><strong>$0</strong></td>
<td><strong>$22,514</strong></td>
<td><strong>$0.00</strong></td>
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</tbody>
</table>
Medical Visits

<table>
<thead>
<tr>
<th>Prior Period</th>
<th>Current</th>
</tr>
</thead>
<tbody>
<tr>
<td>July</td>
<td>2,395</td>
</tr>
<tr>
<td>Aug</td>
<td>2,693</td>
</tr>
<tr>
<td>Sept</td>
<td>2,265</td>
</tr>
<tr>
<td>Oct</td>
<td>2,164</td>
</tr>
<tr>
<td>Nov</td>
<td>2,012</td>
</tr>
<tr>
<td>Dec</td>
<td>2,316</td>
</tr>
<tr>
<td>Jan</td>
<td>2,353</td>
</tr>
<tr>
<td>Feb</td>
<td>2,390</td>
</tr>
<tr>
<td>Mar</td>
<td>2,943</td>
</tr>
<tr>
<td>Apr</td>
<td>2,417</td>
</tr>
<tr>
<td>May</td>
<td>2,939</td>
</tr>
<tr>
<td>June</td>
<td>2,850</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>29,737</strong></td>
</tr>
</tbody>
</table>

Dental Visits

<table>
<thead>
<tr>
<th>Prior Period</th>
<th>Current</th>
</tr>
</thead>
<tbody>
<tr>
<td>July</td>
<td>950</td>
</tr>
<tr>
<td>Aug</td>
<td>998</td>
</tr>
<tr>
<td>Sept</td>
<td>964</td>
</tr>
<tr>
<td>Oct</td>
<td>903</td>
</tr>
<tr>
<td>Nov</td>
<td>878</td>
</tr>
<tr>
<td>Dec</td>
<td>926</td>
</tr>
<tr>
<td>Jan</td>
<td>931</td>
</tr>
<tr>
<td>Feb</td>
<td>913</td>
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<tr>
<td>Mar</td>
<td>1111</td>
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<tr>
<td>Apr</td>
<td>851</td>
</tr>
<tr>
<td>May</td>
<td>858</td>
</tr>
<tr>
<td>June</td>
<td>841</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>11,124</strong></td>
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</table>

Counseling Visits

<table>
<thead>
<tr>
<th>Prior Period</th>
<th>Current</th>
</tr>
</thead>
<tbody>
<tr>
<td>July</td>
<td>51</td>
</tr>
<tr>
<td>Aug</td>
<td>80</td>
</tr>
<tr>
<td>Sept</td>
<td>66</td>
</tr>
<tr>
<td>Oct</td>
<td>76</td>
</tr>
<tr>
<td>Nov</td>
<td>57</td>
</tr>
<tr>
<td>Dec</td>
<td>65</td>
</tr>
<tr>
<td>Jan</td>
<td>66</td>
</tr>
<tr>
<td>Feb</td>
<td>63</td>
</tr>
<tr>
<td>Mar</td>
<td>40</td>
</tr>
<tr>
<td>Apr</td>
<td>66</td>
</tr>
<tr>
<td>May</td>
<td>46</td>
</tr>
<tr>
<td>June</td>
<td>41</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>717</strong></td>
</tr>
</tbody>
</table>

Medical Visits Chart

Dental Visits Chart

Counseling Visits Chart
### Vists by Financial Class - Actual vs. Budget
As of June 30, 2018 (Grant Year 4/1/18-3/31/19)

<table>
<thead>
<tr>
<th></th>
<th>Annual HRSA Grant Budget</th>
<th>MTD Actual</th>
<th>MTD Budget</th>
<th>Over/(Under) MTD Budget</th>
<th>YTD Actual</th>
<th>YTD Budget</th>
<th>Over/(Under) YTD Budget</th>
<th>% Over/ (Under) YTD Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicaid</td>
<td>4,379</td>
<td>139</td>
<td>365</td>
<td>(226)</td>
<td>480</td>
<td>1,095</td>
<td>(615)</td>
<td>-56%</td>
</tr>
<tr>
<td>Medicare</td>
<td>3,703</td>
<td>271</td>
<td>309</td>
<td>(38)</td>
<td>836</td>
<td>926</td>
<td>(90)</td>
<td>-10%</td>
</tr>
<tr>
<td>Other Public (Title V, Contract)</td>
<td>1,064</td>
<td>92</td>
<td>89</td>
<td>3</td>
<td>297</td>
<td>266</td>
<td>31</td>
<td>12%</td>
</tr>
<tr>
<td>Private Insurance</td>
<td>3,417</td>
<td>110</td>
<td>285</td>
<td>(175)</td>
<td>370</td>
<td>854</td>
<td>(484)</td>
<td>-57%</td>
</tr>
<tr>
<td>Self Pay</td>
<td>30,379</td>
<td>2,085</td>
<td>2,532</td>
<td>(447)</td>
<td>5,869</td>
<td>7,595</td>
<td>(1,726)</td>
<td>-23%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>42,942</strong></td>
<td><strong>2,697</strong></td>
<td><strong>3,579</strong></td>
<td><strong>(882)</strong></td>
<td><strong>7,852</strong></td>
<td><strong>10,736</strong></td>
<td><strong>(2,884)</strong></td>
<td><strong>-27%</strong></td>
</tr>
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</table>

### Unduplicated Patients - Current vs. Prior Year
UDS Data Calendar Year
January through December

<table>
<thead>
<tr>
<th></th>
<th>Increase/ (Decrease) Prior Year % of Annual Target</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Unduplicated Patients</strong></td>
<td><strong>Current Year Annual Target Jan - June 2017 Actual Jan - June 2018 Actual</strong></td>
</tr>
<tr>
<td></td>
<td>Annual Target</td>
</tr>
<tr>
<td>Unduplicated Patients</td>
<td>16,345</td>
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</table>

### Unduplicated Patients - Current vs. Prior Year
HRSA Grant Year
April through March

<table>
<thead>
<tr>
<th></th>
<th>Increase/ (Decrease) Prior Year % of Annual Target</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Unduplicated Patients</strong></td>
<td><strong>Annual HRSA Grant Budget Apr - June 2017 Actual Apr - June 2018 Actual</strong></td>
</tr>
<tr>
<td></td>
<td>Annual Budget</td>
</tr>
<tr>
<td>Unduplicated Patients</td>
<td>14,198</td>
</tr>
</tbody>
</table>

* The Dental Clinic reopened on April 16, 2018.
<table>
<thead>
<tr>
<th>Condition</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>Jan to Jul 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amebiasis</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>AIDS*</td>
<td>21</td>
<td>9</td>
<td>10</td>
<td>10</td>
<td>3</td>
</tr>
<tr>
<td>Botulism</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Campylobacteriosis</td>
<td>41</td>
<td>31</td>
<td>45</td>
<td>41</td>
<td>36</td>
</tr>
<tr>
<td><em>Chlamydia trachomatis</em></td>
<td>1332</td>
<td>1439</td>
<td>1579</td>
<td>1648</td>
<td>852</td>
</tr>
<tr>
<td>Chikungunya</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>0</td>
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<tr>
<td>Creutzfeldt-Jakob Disease</td>
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<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
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<tr>
<td>Cryptosporidiosis</td>
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<td>2</td>
<td>8</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Cyclosporiasis</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Dengue</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Elevated Blood Lead</td>
<td>21</td>
<td>33</td>
<td>25</td>
<td>32</td>
<td>10</td>
</tr>
<tr>
<td>*E.coli, enterohemorrhagic</td>
<td>8</td>
<td>7</td>
<td>13</td>
<td>12</td>
<td>7</td>
</tr>
<tr>
<td>Gonorrhea</td>
<td>244</td>
<td>336</td>
<td>419</td>
<td>448</td>
<td>265</td>
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<tr>
<td>Haemophilus Influenza**</td>
<td>7</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<tr>
<td>Hepatitis, type A</td>
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<td>5</td>
<td>3</td>
<td>0</td>
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<tr>
<td>Hepatitis, type B (acute)</td>
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<td>3</td>
<td>4</td>
<td>4</td>
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<tr>
<td>Hepatitis, type C (acute)**</td>
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<td>0</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Hepatitis, type E (acute)</td>
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<td>0</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>HIV infection*</td>
<td>26</td>
<td>49</td>
<td>37</td>
<td>45</td>
<td>15</td>
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<tr>
<td>Influenza associated Pedi death</td>
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<td>0</td>
<td>0</td>
<td>0</td>
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<tr>
<td>Influenza isolate</td>
<td>1328</td>
<td>653</td>
<td>2340</td>
<td>3970</td>
<td>3201</td>
</tr>
<tr>
<td>Legionellosis</td>
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<td>3</td>
<td>4</td>
<td>4</td>
<td>0</td>
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</table>

Data subject to change, reflecting recent entry of information received from reporting sources.

*Please note: AIDS and HIV numbers are preliminary reports; therefore, these numbers are subject to change until CDC issues final report.

**From 1/2013 onward only acute Hepatitis C cases will be counted. *** From 1/2016 onward All Invasive Haemophilus Influenzae will be counted.

The Galveston County Health District (GCHD) is the local public health agency for Galveston County, Texas. GCHD provides services and programs that protect the everyday health and well-being of Galveston County.

P.O. Box 939 La Marque, Texas 77568 • (409) 938-7221
July 27, 2018

Joe Abrams, Chairman
Alliance for Community Solutions
19953 W 162nd Street
Olathe, KS 66062

RE: Support for an HMG Proposal being filed by the Alliance for Community Solutions under DR-4332

Dear Mr. Abrams,

By way of this letter, the Galveston County Health District (GCHD) is stating its support for the statewide mass notification system enhancement proposal being filed by the Alliance for Community Solutions (ACS) under the Hazard Mitigation Grant Program. As you know, we've been active ACS members for the past two years. We routinely use the ACS system and are excited about the prospects of seeing what is already a very good system become even better.

One of the system features we currently find of greatest use is the communication feature. During Hurricane Harvey, the communication feature helped us communicate with staff and others in the community about current situations that were developing. Although the system meets our current needs well, we know there's always room for improvement. Public expectations constantly change so we want to continually improve our ability to alert and warn the public of natural hazards that may threaten their safety or health.

One of the things we value most about the ACS concept is that it gives local government and organizations like ours, the opportunity to work collaboratively with other stakeholders to create mutually benefiting system tools and features. As a group, we can collectively conceive and prioritize the functionalities we want to build or enhance, and by working together, we can also find ways to meet the needs of our respective preparedness programs at an affordable cost. GCHD is looking forward to participating in the design and development of future enhancements currently being proposed.

We've been the beneficiaries of ACS enhancements developed by others and understand the importance of these types of systems in improving communication efforts. We look forward to contributing to a project that will provide benefits to a wide area of the State; including our own. We fully support this endeavor and please let us know if we can be of any further assistance.

Sincerely,

Kathy Barroso, CPA
Chief Executive Officer
August 29, 2018

Ms. Kathy Barroso, CEO
Galveston County Health District
P.O. Box 939
La Marque, Texas 77568

Re: United Board of Health

Dear Kathy,

At the August 8, 2018 meeting, Commissioners’ Court reappointed Mary Jo Godinich, M.D. (Medical Society), Tripp Montalbo, CEO (Mainland Medical Center), Dr. Curtis Klages (Veterinarian) and Patrick McGinnis, M.D. (Citizen at Large) for a term ending 04/30/20.

Additionally, the court appointed Dewey H. Brunt, P.E. (Engineer position) replacing Jason Lawrence for a term ending 04/30/20. Holly Lilley (vacant Food Service position) and Della Grusendorf Brown (vacant Registered Nurse position) were appointed for a term ending 4/30/19.

Attached are resumes/bios for your review and contact information.

Please let me know if I can be of any further help.

Sincerely,

Mark Henry

MH/dgm
TO: Mayors and City Council Members of Member Cities

FROM: Kathy Barroso, CPA
Chief Executive Officer

DATE: August 9, 2018

SUBJECT: United Board of Health Appointments & Re-Appointments

In accordance with the Health District Interlocal Agreement executed December 2002, the Commissioners’ Court of Galveston County will submit member governments nominees for United Board of Health positions. Approval by a majority of the member governments is required to confirm appointment of each board member.

On Wednesday, August 8, the Commissioners’ Court nominated the following:

**Term will be May 1, 2017 – April 30, 2019**

<table>
<thead>
<tr>
<th>Name</th>
<th>Represents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Holly Lilley</td>
<td>Food Service (new appointment)</td>
</tr>
<tr>
<td>Della Grusendorf Brown</td>
<td>Registered Nurse (new appointment)</td>
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**Term will be May 1, 2018 – April 30, 2020**

<table>
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<tr>
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<th>Represents</th>
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<tbody>
<tr>
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<td>Mainland Medical Center (re-appointment)</td>
</tr>
<tr>
<td>Curtis Klages, DVM</td>
<td>Veterinarian UTMB (re-appointment)</td>
</tr>
<tr>
<td>Mary Jo Godinich, MD</td>
<td>Medical Society (re-appointment)</td>
</tr>
<tr>
<td>Patrick McGinnis, MD</td>
<td>Citizen at Large (re-appointment)</td>
</tr>
<tr>
<td>Dewey H. Brunt, PE</td>
<td>Engineer (new appointment)</td>
</tr>
</tbody>
</table>

Please consider this request at your next City Council meeting and return a copy of the signed resolution by mail, fax or email to Amanda Wolff, Executive Office Coordinator/Assistant to CEO, P.O. Box 939, La Marque, TX 77568 (409)-938-2273 or awolff@gchd.org. For your convenience a draft resolution and information on members are attached. If you have any questions, please feel free to contact Amanda Wolff or myself at (409) 938-2273.

Attachments
RESOLUTION

STATE OF TEXAS
COUNTY OF GALVESTON

WHEREAS, members of the Galveston County United Board of Health are nominated by the Galveston County Commissioners' Court and confirmed by the Member Governments of the Health District, and

WHEREAS, the appointment of members are under consideration, and

WHEREAS, the Galveston Commissioners' Court has made its nominations,

NOW BE IT THEREFORE RESOLVED that this body endorses the following appointments:

Term will be May 1, 2017 – April 30, 2019

<table>
<thead>
<tr>
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<th>Represents</th>
</tr>
</thead>
<tbody>
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</tr>
<tr>
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<td>Engineer (new appointment)</td>
</tr>
</tbody>
</table>

ATTEST:

______________________________  ______________________________
City Secretary                    Mayor
Dewey H. Brunt III, P.E.

Dewey H. Brunt III, P.E., is Registered Professional Engineer in the State of Texas. He has more than 40 years of experience in managing, planning, designing, and constructing engineering projects in the private and public sectors. In the private sector, he manages a myriad of projects involving land development, canals and bulkheads, flood control, infrastructure maintenance and repairs, levees, hurricane surge protection, and dam spillways. In the public sector, he managed high-dollar, complex civil works projects for the U.S. Army Corps of Engineers, Galveston District, including coastal engineering, deep and shallow-draft navigation, flood control, wetlands creation, erosion control, beach restoration, groins and jetties, levees, hydraulic structures, dredging, and retaining walls. He received his Professional Engineer’s License in the State of Texas in 1980.

Mr. Brunt is currently employed as a Senior Project Manager for Huitt-Zollars, Inc. (Houston West Office), a multidiscipline Architect & Engineering Firm, since 2006. He was previously employed by the U.S. Army Corps of Engineers, Galveston District, where he served from 1975 through 2006, retiring in September 2006.

He received his Bachelor of Science in Civil Engineering from the University of Houston in 1975 and his Master of Science in Civil Engineering from the University of Houston in 1979. He was recently inducted into the University of Houston’s Academy of Distinguished Civil & Environmental Engineers in May 2017.

Mr. Brunt served on the Board of Directors for the Galveston Government Employees Credit Union from 1996 to 2006 where he served as Chairman of the Board.

He is married to the former Gloria Ann Robinson of La Marque, Texas. They have been married 42 years and have two sons, Jonathan and Christopher. He also has one grandson, Julian, of Memphis, TN.

Mr. Brunt is a military veteran, having served with the U.S. Navy in Viet Nam. He served one tour in Viet Nam, received the Viet Nam Service Medal, the Viet Nam Campaign Medal with Device, and was honorably discharged in 1972.

Mr. Brunt is a member of Gloria Dei Lutheran Church in Nassau Bay.
Holly Lilley  
2911 Misty Wind Ct.  
League City, Texas 77573  
832-858-6207  
holly.lilley@lilleyconcepts.com

Education  
Indiana University  Bloomington, Indiana  
Bachelor of Science: Public Administration  1981-1985

Elgin Community College  Elgin, Illinois  
Paralegal Certificate  2003-2005

Experience  
Lilley Investments, LLC  
Co-founder of Real Estate Investment Company (2009)  
• Purchased 2111 FM 517 Rd. E., Dickinson, Texas 77539 (2009)  
• Purchased 2022, 2106, 2114 Holly Dr., Dickinson, Texas 77539 (2017)

Lilley Hospitality, LLC  
Co-owner and operator of Dickinson Bar~B~Que & Steakhouse  
2009-Present

Lilley Entertainment, LLC  
Co-owner and operator of Marais Restaurant  
2015-Present

Barry Evans, Attorney at Law  
Legal Assistant  
2006-2010
DELLA GRUSENDORF BROWN, RN
2028 Sedona Drive • League City, Texas 77573
Cell: 281-725-1052 • Email: noblegermannurse@gmail.com

QUALIFICATIONS
• 20+ years of clinical healthcare experience
  o RN – 17 years
  o LVN – 6 months (prior to RN)
  o Emergency Medical Technician – Licensed Paramedic – 17 years

PROFESSIONAL EXPERIENCE

Houston Methodist Hospital System Houston, Texas January 2005-Present
Houston Methodist Specialty Physician Organization-Neurological Institute
Staff Nurse II April 2018-Present
  • Manage outpatient neurology practice
  • Serve as a liaison between patients, physicians, staff, and third-party organizations
  • Educate patients over disease process, care, procedures and medications
  • Oversee medication management, including refill authorizations, prior authorizations, and appeals
  • Obtain insurance authorizations for specialty procedures and admissions
  • Prepare patient forms and letters, including disability and DPS forms
  • Appointment scheduling and coordination

Houston Methodist Research Institute-Neurological Institute
Clinical Research Nurse February 2016-April 2018
  • Coordinated clinical research studies
  • Assessed and graded patients
  • Managed multiple complex clinical trials in different stages
  • Implemented research protocols – screening/enrolling subjects, obtain specimens, administer medications (po, subcutaneous, and IV), subject assessments
  • Prepared IRB and regulatory documents
  • Developed study tools
  • Trained staff on protocols/assessments
  • Reviewed research financials and assist with budget development
  • Served as a liaison between patients, physicians, staff, and sponsors

Houston Methodist Hospital System – Corporate IT
Instructional Designer – Senior Training Specialist May 2014-January 2016
  • Certified in 3 Epic clinical applications
  • Developed curriculum for training
  • Worked with analysts and subject matter experts to determine training concerns
  • Mapped appropriate training curriculums to end-user

Houston Methodist Hospital
Lead SuperUser January 2012-May 2014
  • Lead a team of more than 100 nurses
  • Developed Houston Methodist Hospital Lead Nurse SuperUser role
  • Created process for Annual Nurse Competency focused on EMR documentation
  • Collaborated with DNV work groups for nursing documentation optimization and training
  • Participated in numerous Go-Live projects including medical devices and EMR upgrades
  • Revised multiple nursing policies and procedures related to EMR optimization with documentation

Houston Methodist Hospital
Staff Nurse II – Neurosurgical Intensive Care Unit May 2010-May 2014
  • Direct patient care in critical care unit
  • Participated in regulatory surveys: Nursing Documentation Expert
    o DNV Stroke Certification
    o Hospital wide DNV Certification
    o Transplant Certification
  • SuperUser for unit

Houston Methodist Hospital
Clinical Documentation Nurse Specialist – CDMP August 2006-May 2010
  • Liaison nurse between coding and physician documentation
  • Concurrent physician documentation review
  • Reviewed of mortality documentation
  • Preceptor to new hires
  • Built education tools for team members and physicians

Houston Methodist Hospital San Jacinto Baytown, Texas January 2005-July 2006
Staff Nurse – Emergency Department
  • Direct patient care
  • Triage role
Spring Branch Medical Center  Houston, Texas  February 2008-January 2009
Utilization Review Nurse – Case Management Department – per diem position
• Reviewed concurrent patient documentation
• Good rapport with physician staff and nursing staff
• Documented patient status, including care and procedures for third-party vendors

University of Texas Medical Branch  Galveston, Texas  April 2005-March 2008
Clinical Staffing Solutions-Internal Staffing Agency
Per diem nurse, Emergency Department
• Lead nurse in Pediatric and Adult Medical areas
• Lead nurse in Psychiatric ED area

Travel Nursing
Agency Nurse, Multiple Emergency Departments
Trauma and Triage Experience
• Queen of the Valley Medical Center  Napa, California
• Trinity Medical Center  Brenham, Texas
• St. Vincent’s Hospital  Santa Fe, New Mexico
• Santa Rosa Medical Center  Santa Rosa, California
• Abilene Regional Medical Center  Abilene, Texas

Scott and White Hospital  Temple, Texas  January 2001-July 2002
Staff Nurse, Medical Intensive Care Unit
• Direct patient care in critical care unit
• Charge nurse experience
Staff Nurse, Emergency Department
• Direct patient care in Emergency Department
• Triage and trauma experience

Hillcrest Baptist Medical Center  Waco, Texas  September 1999-April 2002
Per diem nurse (RN), Emergency Department
• Direct patient care of emergency patients
• Triage and trauma experience
Licensed Vocational Nurse, Emergency Department
• Direct patient care
• Minor emergency patients
Emergency Technician, Paramedic
• Patient care technician

Providence Health Center  Waco, Texas  September 1997-January 2000
Emergency Technician, Emergency Department
Cardiology Technician, Non-invasive Cardiology Department

LICENSURE
Texas State Board of Registered Nurses  2001-Present
Texas Department of State Health Services – Licensed Paramedic  1997-2014

CERTIFICATIONS
Basic Life Support  Expires 04/2020

HOUSTON METHODIST HOSPITAL COUNCIL AND COMMITTEE INVOLVEMENT
Houston Methodist Neurological Institute Research Group, Member  2016-2018
SuperUser, Unit – Neurological ICU  2010-2014
SuperUser, Hospital Lead  2012-2014
Clinical Documentation, Technology, and Information Council, Member  2009-2014
Clinical Documentation, Technology, and Information Council, Chair  2011-2013
Clinical Documentation Team, Member  2009-2014
Care Management Improvement Committee: Cardiology, Member  2007

EDUCATION
McLennan Community College, Associate Degree in Nursing  Waco, Texas  2000
McLennan Community College, Certificate in Paramedicine  Waco, Texas  1997

PROFESSIONAL
American Association of Neuroscience Nurses  2018-Present
Northeast Amyotrophic Lateral Sclerosis Consortium, Member  2016-2018
American Nursing Informatics Association, Member  2011-2016
Emergency Nurse Association, Heart of Texas Chapter, Secretary/Treasurer  2002
**COMMUNITY SERVICE**

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<td>Houston Marathon, Committee Co-Chair</td>
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<td>Harris County Precinct Chair</td>
<td>2013</td>
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<td>Election Poll Clerk</td>
<td>2011-2014</td>
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<td>Election Alternate Judge</td>
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**AWARDS**

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<td>Outstanding Performance in Clinical Documentation Challenges, UHC</td>
<td>June 2006</td>
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<td>Recognizing Excellence Award, San Jacinto Methodist Hospital</td>
<td>October 2005</td>
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<tr>
<td>Recognizing Excellence Award, San Jacinto Methodist Hospital</td>
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United Board of Health
August 2018
Item #9
Executive Session

Texas Government Code Section 551.071, Consultation with Attorney: the Galveston County Health District United Board of Health will enter into an executive session as permitted under the Texas Open Meetings Act, Chapter 551 of the Texas Government Code, pursuant to Section 551.071 of the Government Code: to seek the advice of its attorney about pending or contemplated litigation or on a matter in which the duty of the attorney to the Galveston County Health District under the Texas Disciplinary Rules of Professional Conduct of the State Bar of Texas clearly conflicts with the Open Meetings Act relating to 18- CV-1123; ex rel. Timothy Burton v. The Galveston County Health District.

Back to Agenda
United Board of Health
August 2018
Item #10
Reconvene Regular Open Meeting
United Board of Health
August 2018
Item #11
Possible Action from Executive Session
United Board of Health
August 2018
Item #12
Executive Report
Disasters happen, now is time to prepare

The harsh reality of hurricanes, tropical storms and flooding is nothing new to Galveston County residents. When faced with a storm, properly preparing is vital when it comes to protecting family and property.

Galveston County Health District (GCHD) encourages families to take advantage of National Preparedness Month this September to prepare themselves for a wide variety of disasters they may find themselves facing.

This year’s theme is “Disasters Happen. Prepare Now. Learn Now.” “The theme this year gets to the heart of preparing for disasters. We have faced our share of storms in Galveston County and we’ve come to expect them, but being prepared can be the difference between life and death.”

Tips on how to prevent food poisoning while eating out

Galveston County Health District (GCHD) sanitarians routinely inspect more than 1,800 food service establishments for compliance with state regulations designed to protect the health and well-being of customers.

This September, in the spirit of Food Safety Month, GCHD consumer health services highlights five ways to prevent food poisoning while dining out.

Look for a valid permit

All properly permitted and inspected food service establishments are required to display their food service permit where customers can see it. The permit is bright yellow and contains the GCHD logo at the top and a seal at the bottom. Locate the permit and verify it’s not expired.

“A permit verifies the establishment met the proper safety requirements to prepare and serve food,” said Martin Entringer, GCHD consumer health services manager. “In addition, a permit confirms the establishment is in our system.”

Childhood obesity rates alarming

About one in six children in the U.S. is considered to be obese. That’s nearly 20 percent of all adolescents and is the highest rate ever recorded in the U.S.

A 2017 Centers for Disease and Prevention (CDC) report states that one in five adolescents ages 12-19, one in five children ages 6-11 and one in ten preschoolers ages 2-5 are considered obese.

September marks National Childhood Obesity Awareness Month and provides a chance to learn more about this serious health condition.
Above, Pepperjack, who was featured in People Magazine leading up to Clear the Shelters, found his forever home at the adoption event. Galveston County Animal Resource Center (ARC) on Aug. 18 participated in Clear the Shelters, a nation-wide pet adoption event. Twenty-seven pets were adopted during the one-day event.
27 pets found their forever homes at Clear the Shelters event

Galveston County Animal Resource Center (ARC) on Aug. 18 participated in Clear the Shelters, a nation-wide pet adoption event. Twenty-seven pets were adopted during the one-day event. The day included an appearance from the Mandalorian Mercs, who took photos with guests and adopted animals. There was also a food truck on site and each adopted pet went home with a bag full of goodies.
“The rate of obesity in children is very alarming,” said Eileen Dawley, Galveston County Health District (GCHD) chief nursing officer. “Childhood obesity is a public health problem and can lead to all sorts of health issues now and down the road.”

Obese children are at a higher risk for having chronic health conditions and diseases including asthma, sleep apnea, bone and joint problems and type 2 diabetes, as well as being more at-risk factors for heart disease like high blood pressure and high cholesterol, according to the CDC.

Children who are overweight or obese as preschoolers are five times as likely as normal-weight children to be overweight or obese as adults.

“As an adult, obesity can lead to a higher risk of type 2 diabetes, heart disease and cancer,” Dawley said. “Childhood obesity is also linked to a higher chance of early death in adulthood.”

There are several factors that may lead to childhood obesity: too much time spent being inactive; lack of sleep; lack of places to go to get physical activity; easy access to inexpensive, high calorie foods and sugary beverages; and lack of access to affordable, healthier foods.

“There are ways parents can help prevent obesity in their children,” Dawley said.

“Choose nutritious meals with fruits and veggies and encourage your children to drink more water as a no-calorie alternative. Find activities you enjoy as a family and be physically active with your children.”

And, don’t forget to be a role model. Choose healthy meals and snacks and set an example for children.

“We can all do our part to prevent childhood obesity,” Dawley said.
ARC hosts monthly low-cost vaccination clinics

The Galveston County Animal Resource Center (ARC) is happy to host a monthly low-cost pet vaccination clinic. The events are open to residents of any city and includes pet microchipping and county registration.

Low-cost vaccinations, flea control and heartworm testing and treatment services through ARC range from $15 for a rabies vaccine for both dogs and cats to $50 for the “dog works” package and $35 for the “cat works” package. Specific pricing is online at www.gchd.org/arc.

Microchips are available for all cats and dogs, regardless of jurisdiction, for just $20 each.

County regulation requires pet owners who live in the municipalities served by the ARC (Bayou Vista, Hitchcock, Kemah, La Marque, Texas City, Tiki Island and unincorporated Galveston County) to register their pets. There is no registration fee for pets that are already microchipped. Registration for pets that are not microchipped is $20 and includes a microchip. The fee is $15 for pet owners age 65 and older.

Clinics take place at ARC, located at 3412 25th Avenue North (Loop 197 North) in Texas City. Appointments are not needed. Cash, check and major credit cards are accepted. For more information, call the ARC at 409-948-2485. For a schedule of upcoming clinics, visit www.gchd.org/ARC.

Preparedness death,” said Randy Valcin, director of epidemiology and public health emergency preparedness.

Managed and sponsored by the Ready campaign, National Preparedness Month is designed to raise awareness and encourage Americans to take steps to prepare for emergencies in their homes, schools, organizations, businesses and places of worship.

Now is the time to learn life-saving skills such as CPR and first aid. Check insurance policies and coverage for any hazards that might be faced including a flood, wind damage and tornadoes.

Put together a disaster kit

From food and water to medicine, cash, batteries, radios and chargers, put together a preparedness kit. Be sure to have enough food and water for each person for at least three days. Plan on one gallon of water per day per person. Include a battery-operated flashlight and radio, manual can opener, as well as first aid, medication and hygiene items. Other supplies may include an extra cell phone battery, matches and a lighter and whistle.

Put it in writing

Planning is the best defense when it comes to preparing for a disaster. Develop a family emergency communication plan. It is possible family members may become separated from one another during a disaster, especially during the day when adults are at work and children are at school.

Make a plan for touching base and getting back together.

When it comes to medicine, put prescriptions, emergency contact information for family and doctors, insurance cards and identification together in a plastic bag. Do the same with photocopies of important documents including birth and marriage certificates, immunization records for children and adults, driver license and other photo IDs and Social Security cards. Have photo documentation of valuables.

Remember your four-legged family

In the hustle of dealing with a natural disaster, pets sometimes fall to the end of the list, or left off until the last minute. Plan for your pets now. Have copies of vaccination records, a current photo of your pet, an ample supply of food and water, a carrier or cage, medication, muzzle, collar and leash.

Evacuating

If evacuating by car, be sure to include road maps, blankets and pillows, clothes and sturdy shoes, rain gear, books, games and toys. Fill the gas tank and check the spare tire, take cash, checkbooks and credit cards and map out your evacuation route. For more information when planning for hurricane season and natural disasters, visit http://www.gchd.org/public-health-services/public-health-preparedness/natural-disasters and www.ready.gov.
Galveston County Health District (GCHD) EMS and Galveston Police Department (GPD) donated 172 backpacks to CASA of Galveston County this month. That means every Galveston County student in foster care started this school year off with a backpack filled with school supplies, donated by area residents and businesses. Pictured above are representatives from CASA of Galveston County, GCHD EMS and GPD.
Galveston County Health District’s (GCHD) WIC program celebrated World Breastfeeding Month and mothers as Stars of the Milky Way on Aug. 1, complete with a red carpet, games, prizes, face painting, balloons, snacks and a stop by the Chick-fil-A cow. The event was free and recognized mothers who are currently breastfeeding, those who have in the past and mothers pledging to try to breastfeed their baby.
tem to be routinely inspected.”

Check inspection scores

Food service establishments are inspected at least twice annually based on criteria established in the Texas Food Establishment Rules. Inspections may occur more frequently based on an establishment’s risk level, violations and complaints.

GCHD performs approximately 5,500 food service inspections annually. Inspection results, scored as demerits, are posted online at www.gchd.org/restaurantscores.

“It’s important to remember demerit scores reflect conditions at the time of the inspection and may not be an indication of current conditions,” Entringer continued. “We suggest reviewing demerit scores over a period of time for the best representation of an establishment’s overall conditions.”

The first indication of a restaurant’s overall cleanliness is the exterior. Take a look around to see if the building and grounds are well maintained. Once inside, make sure the tables, silverware and dishware are clean. Servers should be well-groomed and wearing clean uniforms. Restroom cleanliness also offers insight into a restaurant’s overall sanitation.

Be cautious with raw or undercooked food

Raw meat, poultry, eggs and seafood may carry bacteria that can cause illness, especially with those who have medical conditions. Proper thorough cooking kills potentially harmful bacteria, so make sure your food is not undercooked or raw.

Be careful with leftovers

Taking food to go is perfectly safe if you’re careful. Remember to refrigerate within two hours or one hour if the temperature is higher than 90 degrees.

Leftovers should be eaten within three to four days.

Gold Ribbon Awards

GCHD annually presents Gold Ribbon Awards to food service establishments with exemplary food safety practices. See a list of winning establishments at www.gchd.org/goldribbons.

Complaints

GCHD investigates sanitation complaints related to food service establishments. Complaints may be filed by filling out the form at www.gchd.org/complaints or by calling 409-938-2241.

Please provide contact information to allow GCHD to follow-up. Pictures may be submitted with complaints.

Foodborne Illness

Food poisoning is a common yet preventable public health problem. If you think you’ve become ill from eating at a restaurant in Galveston County, it’s important to quickly report it to GCHD. Prompt reporting gives GCHD epidemiologists the best chance at determining the source.

When you call, be prepared to offer information about your symptoms, what and where you recently ate and if you’ve seen a doctor.

Suspected foodborne illness may be reported to 409-938-2208 or 409-938-2215 during business hours or 1-888-241-0442 afterhours.
PUBLIC HEALTH PROGRAMS

ANIMAL SERVICES
Aug. 2-29, 2018
- There have been no reported cases of rabies.
- On Aug. 27, ARC hosted an animal control/shelter staff continuing education course for Department of State Health Services approved hours.

COMMUNITY HEALTH SERVICES
Breast Cancer Screenings
- A total of 52 screening mammograms and 23 Clinical Breast Exams (CBE) were provided to women of Galveston County that met the requirements of both BCCS and D’Feet programs.
- Staff processed 30 referrals from providers to have patients undergo diagnostic work-ups for breast cancer evaluation. There were two new cancer diagnoses during this time period.
- A total of five patients have been diagnosed with breast cancer to date in 2018. Outreach for the breast cancer screening programs was conducted at two health fair events and at two food bank sites.

Immunization Program
- The emphasis of the immunization program continues to be education, outreach and assisting clients in linking with their primary medical home for services, in addition to providing shots to the public.
- National Immunization Month is being observed this month and the immunization clinic has been very busy with school age children, college students and job seekers utilizing services.
- During this month, 15 cases of Perinatal Hepatitis B were case managed by immunization program staff.
- Texas Vaccine for Children (TVFC) activities included three unannounced site visits to providers to check storage and handling of vaccines, one newly recruited provider training, 10 quality assurance follow ups, four provider trainings and 11 other contacts for technical assistance.
- Immunization staff administered 1,643 shots during this time period, up from the 1,502 during the same time period last year.

HIV/STD Services
- The HIV/STD control program conducted 98 HIV, Syphilis and Hepatitis C virus tests July 21-Aug. 22, 2018.
  Within the testing effort, the program found:
  - One new positive Syphilis case, brought to treatment and counseled.
  - Two previous positive Syphilis cases, with previous documented history.
  - One previous positive HIV case, with previous documented history.
  - One new positive HIV case, referred for HIV services to UTMB.
  - Two new positive HCV cases that are pending referral to St. Hope.
Tuberculosis (TB) Control Services
- Currently the TB program is treating five confirmed TB cases and three new suspect cases. A total of 275 doses of Directly Observed Therapy (DOT) and Directly Observed Preventive Therapy (DOPT) were delivered to clients.
- A total of 59 clients were seen in chest clinic and 13 field visits were conducted during this time period.
- A large contact investigation was conducted this month that included testing 15 individuals for TB infection with no cases of Latent TB Infection (LTBI) identified in the investigation.

Public Health Nursing
- Diabetes Education
  - Weekly Diabetes 101 Class continues on a four-week cycle at the Texas City Mid-County Annex. These sessions include information on monitoring blood glucose levels, meal planning and healthy eating, reading food labels, carb counting and exercise/stress management. In addition, classes are being held monthly at the Nessler Center.

Women, Infants and Children (WIC)
- WIC is observing World Breastfeeding Month this month with two exciting events. WIC hosted Stars of the Milky Way with several partners participating including UTMB, several pregnancy centers, Burke’s Outlet, Chick Fil-A and Kara the Clown. The event celebrated breastfeeding mothers and offered crafts, games and prizes, along with a red carpet entrance for each mother. The second event was a breastfeeding pop quiz for GCHD employees. Staff took a pop quiz, learned new facts about the values of breastfeeding and in return, earned a special GCHD WIC pop socket for their participation.
- WIC hosted Cooking with Chef Lisa Lewis on Aug. 21 at its Texas City clinic. WIC is partnering with Galveston’s Own Farmers Market to offer monthly cooking classes. The menu included a Greek quinoa bowl, one-pan balsamic chicken and low-fat caramel corn.
- WIC served an estimated 4,233 participants in July 2018, down 1,165 participants compared to last July.

ENVIRONMENTAL and CONSUMER HEALTH SERVICES
- The Air Pollution Control Division staff is currently closing out the FY 2018 Texas Commission on Environmental Quality (TCEQ) contract objectives. Objectives include complaint investigations, major air source inspections, air permit reviews and air monitoring activities. The FY 2019 TCEQ contracts have been signed, executed and start on Sept. 1, 2018.
- Katie Wilson, water pollution team lead, attended the most recent Boater’s Waste Subcommittee meeting. Ted Driscoll, intern with Galveston Bay Foundation (GBF), reported on the Pump Don’t Dump survey he conducted. Driscoll went to various marinas and meetings and asked boaters to complete a survey, the findings of which indicated most boaters used pump out facilities, but that most live-aboards used on-land facilities as it was more convenient. GBF is encouraging marinas and restaurants to install more pump out stations, and they’re working to create a map with pump out locations to make it easier for boaters to find the closest stations. GBF has created flags for boaters to fly indicating that they pump out. This is an incentive to remind other boaters to pump out, and to show that they are environmentally friendly.
EPIDEMIOLOGY/ PUBLIC HEALTH EMERGENCY PREPAREDNESS (PHEP)

• On Aug. 7, 2018, epidemiology staff received a report that a 7-year-old Santa Fe female tested positive for Pertussis. The patient was treated and four household contacts were recommended for prophylaxis. On Aug. 12, 2018, staff received a report of a 4-month-old League City female who tested positive for Pertussis. The patient was treated and seven household contacts were recommended for prophylaxis. Pertussis is a serious respiratory infection that is vaccine-preventable.

• In late July, epidemiology staff received four non-related reports of legionella, a flu-like illness caused by waterborne bacterium inhaled from vapor.

• PHEP community outreach staff attended the Movie on the Dike on Aug. 18 and educated the community on how to protect themselves from Zika and other mosquito-borne diseases. She also set up a mosquito spray station where the community could spray themselves with repellent.

• On Aug. 13, 2018, MRC Coordinator Richard Pierce was invited to help UTMB, Clear Lake Regional and Mainland Medical Hospital staff provide Stop the Bleed training to an estimated 800 Texas City ISD teachers and staff.

• On Aug. 8, 2018, Galveston County Medical Reserve Corps (MRC) members held their August meeting and core competency training. (See picture below.)

GAAA UPDATES

• GAAA staff Ian Davis, Joann Baden and Ralph Tim assisted UTMB with Stop the Bleed training in Galveston County this month.

• On Aug. 6, GAAA staff participated in an active shooter tabletop exercise with Texas A&M University.

• On Aug. 30, GAAA offered a capnography class with continuing education credits offered.

Executive Office

• GCHD will be holding a stakeholder meeting on Thursday, Sept. 13, 2018 at the Mid-County annex from 9-10:30 am to unveil plans on our latest initiative, HEAL (Healthy Eating, Active Living). The HEAL initiative is part of the GCHD strategic plan to “Cultivate a Healthier and Safer Community.”
COMMUNITY OUTREACH

**Animal Services**
- On July 24, ARC hosted a low-cost vaccine clinic with 20 pets serviced.
- On Aug. 18, ARC hosted Clear the Shelters, part of a national adoption event, with 27 pets adopted that day.
- On Aug. 25, ARC hosted a low-cost vaccine clinic.
- On Aug. 25, ARC participated in Donuts and Dogs, a national Dog Day Event at Pointe Ann Apartments in Texas City.

**GAAA**
- On Aug. 15, GAAA, along with the Galveston Police Department, delivered 172 backpacks filled with school supplies to CASA of Galveston County. EMS Paramedic Joseph Russell helped spearhead the school supply drive.
- On Aug. 18, GAAA staff participated in a back-to-school drive at Coastal Community Federal Credit Union.

**Community Health Services**
- Public Health Nurses participated in 10 community outreach/health fair events and two food bank sites, providing breast cancer screening programs.
- Public Health Nurses participated in 10 health fairs/outreach events, providing information on GCHD services and a variety of health information to more than 220 participants. Services included 52 blood pressure and 34 blood glucose screenings with a total of 18 people having elevated blood pressures and seven having elevated blood glucose readings. These individuals were provided with educational information and referrals were made to their own medical provider, ER or Coastal Health & Wellness clinic, depending on the individual circumstances.
- A blood drive was sponsored at the Mid-County Annex on Aug. 14 with 18 participants donating, which will help save 72 lives.
- HIV/STD prevention team distributed 447 condom bags to Galveston County area businesses and currently have 76 individuals enrolled into the PrEP Program. The team picked up a new testing site at Brazos Place in Freeport.
- WIC staff participated in two health fairs celebrating the end of summer and back to school. Approximately 100 families and students received education on WIC services.

COMMUNICATION OFFICE

- **News Releases/Website News Posts**
  - National Immunization Month
  - World Breastfeeding Week/Month
  - Clear the Shelters
  - ARC vaccination clinic
  - Pets of the Week (4)
  - WIC cooking class
- **Social Media**
  - National Immunization Month
  - World Breastfeeding Week/Month
  - Clear the Shelters
  - ARC vaccination clinic
  - Pets of the Week (4)
  - ARC – Pepperjack in People Magazine
- GAAA school supply drive
- WIC cooking class
- MRC Movie at the Dike
- Heat safety 101
- Free breast cancer screenings
- Texas AgriLife disaster recovery event
- Galveston County MRC volunteers needed
- #WorkWednesday

- Videos
  - Pets of the Week (4)
  - Clear the Shelters

**HUMAN RESOURCES UPDATES**

**July 19-Aug. 23, 2018**

**GCHD and GAAA Career Opportunities**

- **Employee Onboarding** - Human Resources conducted new employee orientation for the following employee(s):
  - Ebubechukwu Okeke – PHEP Community Outreach Worker
  - Stephanie Acreman – Animal Care Technician
  - Chris Ray Davis – IT Associate
  - Melissa Cruz – Paramedic (internal)
  - Brandon Beck – Paramedic (internal)
  - Schannon Yodice – Staff Accountant (internal)

- **Job Offers** – The following candidate(s) were extended job offers and have future start dates:
  - Yvonne Garry - Paramedic
  - Sterling Snow – EMT Basic
  - Christopher Stamey – EMT Basic
  - Amber Birdwell – Animal Care Technician

- **Current Vacancies:**
  - Public Health vacancies:
    - Animal Services – Animal Care Technician (3), Crematorium Specialist, Volunteer Coordinator/Adoption Counselor
    - Accounting – Grant & Billing Coordinator
    - Community Health Services - D'Feet Clerk
    - Environmental Health Services - Air & Water Pollution Control Manager, Consumer Health Inspector
    - Executive Office - Administrative Assistant, Contract Analyst
    - Human Resources – Administrative Assistant
    - Information Technology – IT Director, IT Network Security Engineer, IT Specialist
  - GAAA Admin vacancies:
    - EMS Operations Manager
  - GAAA Field vacancies:
    - EMT Basic part-time (1)
    - EMT Advanced full-time (6)
    - EMT Advanced part-time (1)
    - Team Captain (1)
Senior Team Captain (1)

*Mainland Transfer Positions To Be Eliminated – EMT Basic (4) and Team Captain (4)*

Employee Activities
- **PHN Employee Wellness Activities**
  - Back to School Immunization Awareness Month educational materials and a display are provided in the employee break room.

- **Employee Wellness Committee**
  - The healthy snack bar continues to be well received.
  - The Knit & Crochet Club for employees meets weekly at lunch in the mid-county annex.
  - A weekly parking lot trash pickup happens each Friday.
  - The monthly “Healthy Salad Luncheon” activity resumed with 45 participants this month.
  - The pumpkin growing contest is underway with departments across the district participating.
  - A Book Club was started for employees to check out books.
  - GCHD is participating in the 10 Benches Memorial Project for Santa Fe ISD. Recycling boxes are at each GCHD site for employees to drop off used caps and lids to fund the project to place 10 benches at Santa Fe ISD.

**UBOH Contract Report: August 2018**

**Galveston County Health District**

1. The Department of State Health Services (“DSHS”) exercised its option to extend its Public Health Zika grant through the 2019 fiscal year, during which time the Health District will receive an additional $300,000.00 from DSHS for the provision of Zika response activities. Specifically, this grant mandates the Health District be responsible for, amongst other things, refining jurisdictional response plans and identification gaps, establishing incident management teams for Zika response efforts in preidentified high-risk areas of Galveston County, developing risk communication plans and targeted messaging through different public mediums regarding Zika risks and protective measures, and identifying resources for human and vector surveillance and control for families potentially impacted by the Zika virus.

2. A Memorandum of Agreement between the Health District and the Galveston County Independent School District (“GISD”) was executed, which formalizes the means and processes by which the Health District shall be permitted to use GISD facilities as dispensing sites for Strategic National Stockpile (“SNS”) issued medications, or for areas of refuge during other public health emergencies. The SNS is a federal program responsible for supplying life-saving pharmaceuticals, antidotes, medical supplies and other equipment necessary to mitigate the effects of an infectious disease outbreak, bioterrorism event, or other public health emergency.

3. The Fleet Vehicle Maintenance bid, approved for a one (1) year term beginning on August 17, 2018, was jointly awarded to Five Star Automotive and Classic Ford. This agreement permits for GCHD to receive discounted rates for standard vehicle repair and maintenance services when contracting with these vendors.
4. The Texas Commission on Environmental Quality ("TCEQ") renewed the Local Air Monitoring contract with the Health District for four years, effective September 1, 2018. During the agreement’s four-year tenure, TCEQ will reimburse the Health District in an amount up to $635,848.00 for fulfilling a variety of air quality testing and reporting requirements.

5. The Department of State Health Services ("DSHS") extended the GCHD Women, Infant and Children’s ("WIC") Nutrition Grant for the 2019 fiscal year. The WIC program will be afforded a total of $1,053,988.00 during this period to ensure that: i) WIC participants receiving food benefits also receive access to nutrition education classes; ii) an average of at least 20% of all pregnant women who enter the WIC Program are certified as eligible; iii) an average of at least 80% of clients enrolled in the WIC Program, excluding dual participants and transfer locked and/or migrant clients, participate as food benefit recipients each month; and iv) all participants who indicate during the enrollment process for the WIC Program that they have no source of health care are referred to at least one (1) source of health care at certification of eligibility.

Back to Agenda
United Board of Health
August 2018
Item #13
Consider for Approval July 2018 Financial Report
**GF - BALANCE SHEET**  
**as of**  
July 31, 2018

<table>
<thead>
<tr>
<th>Current Month</th>
<th>Prior Month</th>
<th>Increase/Decrease</th>
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<tr>
<td>Jul-18</td>
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<td><strong>Total Assets</strong></td>
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<tr>
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<td>$4,809,557</td>
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**HIGHLIGHTS**

- **MTD net increase in fund balance of** $5,945.
- **Revenues were** $3k higher than budgeted this month due to increased septic tank ($9.4k) and food service revenue ($5.3k) which offset lower than budgeted grant revenue ($12k).
- **YTD Revenues were** $1k higher than budgeted due mostly to insurance proceeds ($22k) and higher interest ($13k) which offset lower than budgeted vital statistics ($16k), immunization ($11k) and septic tank ($6k) revenues.
- **MTD expenses were** $25k lower than budgeted due to savings in personnel and maintenance/repair of IT equipment. These savings offset a Facilities vehicle that was expensed this month but budgeted in a prior month.
- **YTD expenses were** $259k lower than budgeted due mostly to savings in personnel, supplies and travel which offset unbudgeted Operation Coastal expenses.
- **YTD decrease in fund balance of** ($28,156). **Total fund balance of** $4.26M as of 7/31/18.

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**GF - REVENUE & EXPENSES**  
**as of**  
July 31, 2018

<table>
<thead>
<tr>
<th></th>
<th>Actual Jul-18</th>
<th>Budgeted Jul-18</th>
<th>PTD Budget Variance</th>
<th>YTD Budget Variance</th>
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<td><strong>REVENUE</strong></td>
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<td>County Revenue</td>
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<th>Supplies</th>
<th>Travel</th>
<th>Equipment/Capital</th>
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<th><strong>Total Expenses</strong></th>
<th><strong>Change in Net Assets</strong></th>
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<td>$28,003</td>
<td>$260,475</td>
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**GF - BALANCE SHEET as of July 31, 2018**

**GF Current Period Assets**

**GF Current Period Revenue**

**GF Current Period Expenses**

**GF Current Fund Balance**
HIGHLIGHTS

- MTD net decrease in fund balance of ($13,355).
- Revenues were $74k lower than budgeted this month due to lower Medicare ($32k), private insurance ($24k) and GAAA contract ($18k) revenues.
- YTD revenues were lower than budgeted by $462k due mostly to lower Medicare ($334k), private insurance ($171k), and water bill donations ($12k) which offset higher than budgeted GAAA contract ($22k), interest ($17k) and sale of fixed asset ($16k) revenues.
- MTD expenses were $60k lower than budgeted due mostly to salary/benefit lapses.
- YTD expenses were $832k lower than budgeted due mostly to salary/benefit lapses, savings in operating supplies, and an ambulance remount that was budgeted but has not occurred yet.

| Current Month | Prior Month | Increase  
|---------------|-------------|-----------
| Jul-18        | Jun-18      | (Decrease) |
| Cash & Cash Equivalents | 4,307,548 | 4,349,356 | (41,809) |
| Accounts Receivable | 672,536 | 366,759 | 305,777 |
| Pre-Paid Expenses | (1,914) | 18,108 | (20,022) |
| Other | 614 | 895 | (281) |
| Due To / From | (3,007) | (3,296) | 288 |
| **Total** | **$4,975,776** | **$4,731,823** | **$243,953** |

| Liabilities | Current Month | Prior Month | Increase  
|-------------|---------------|-------------|-----------
| Accounts Payable | 38,435 | 49,681 | (11,246) |
| Personnel | 279,447 | 229,967 | 49,481 |
| Deferred Revenues | 229,491 | 10,417 | 219,074 |
| **Total Liabilities** | **$547,373** | **$290,064** | **$257,309** |

| Fund Balance | Current Month | Prior Month | Increase  
|-------------|---------------|-------------|-----------
| Prior Year Fund Balance | 4,976,493 | 4,976,493 | 0 |
| Current Change | (548,090) | (534,734) | (13,355) |
| **Total Fund Balance** | **$4,428,403** | **$4,441,759** | **($13,355)** |

| Total Liabilities & Fund Balance | Current Month | Prior Month | Increase  
|-------------------------------|---------------|-------------|-----------
| **$4,975,776** | **$4,731,823** | **$243,953** |

GAAA - REVENUE & EXPENSES

<table>
<thead>
<tr>
<th>REVENUE</th>
<th>Actual Jul-18</th>
<th>Budgeted Jul-18</th>
<th>PTD Variance</th>
<th>YTD Variance</th>
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<td><strong>($73,669)</strong></td>
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<td>Travel</td>
<td>0</td>
<td>917</td>
<td>917</td>
<td>3,772</td>
</tr>
<tr>
<td>Equipment/Capital</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>169,652</td>
</tr>
<tr>
<td>Other</td>
<td>55,735</td>
<td>62,033</td>
<td>6,298</td>
<td>31,862</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td><strong>$472,602</strong></td>
<td><strong>$532,398</strong></td>
<td><strong>$59,796</strong></td>
<td><strong>$832,246</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CHANGE IN NET ASSETS</th>
<th>(Actual)</th>
<th>(Budgeted)</th>
<th>(PTD Variance)</th>
<th>(YTD Variance)</th>
</tr>
</thead>
<tbody>
<tr>
<td>($13,355)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

GV 911

GALVESTON COUNTY HEALTH DISTRICT | Financial Summary | 4 |
GAAA Actual Revenue & Expense Trends with Change in Net Assets

GAAA Actual Revenue vs Budget Trends with Variance

GAAA Actual Expenses vs Budget Trends with Variance
Fund Balance Trends
JUL 2016 to JUL 2018

Fund Balance Change by Period
JUL 2016 to JUL 2018

Back to Agenda
United Board of Health
August 2018
Item #14
Consideration of Proposed Fees

a) Vital Statistics
b) Environmental Fees
### Vital Statistic Services Fees

<table>
<thead>
<tr>
<th>Service/Item</th>
<th>Description</th>
<th>Fee Basis</th>
<th>Current Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Size Birth Certificate</td>
<td>Long form birth certificate format that contains all birth information; used most often to obtain a passport for a person born at home and/or before 1964. It's also typically required for purposes of dual citizenship, Indian Registry and immigration.</td>
<td>Texas Health and Safety Code Title 3. Chapter 191.0045. FEES. (d) A local registrar or county clerk who issues a certified copy of a birth or death certificate shall charge the same fees as charged by the bureau of vital statistics, including the additional fee required under Subsection (e), except as provided by Subsections (g) and (h).</td>
<td>$23.00</td>
</tr>
<tr>
<td>Wallet Size Birth Certificate</td>
<td>Small form birth certificate format; satisfies many purposes, including registering a child for school or sports.</td>
<td>Texas Health and Safety Code Title 3. Chapter 191.0045. FEES. (d) A local registrar or county clerk who issues a certified copy of a birth or death certificate shall charge the same fees as charged by the bureau of vital statistics, including the additional fee required under Subsection (e), except as provided by Subsections (g) and (h).</td>
<td>$23.00</td>
</tr>
</tbody>
</table>
## Vital Statistic Services Fees

2018

<table>
<thead>
<tr>
<th>Service/Item</th>
<th>Description</th>
<th>Fee Basis</th>
<th>Current Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abstract Size Birth Certificate</td>
<td>Short or abstract birth certificate format most commonly issued; satisfies most purposes, including registering a child for school or sports, obtaining a passport for a person born after 1963 if born in a hospital and obtaining a driver license in most states.</td>
<td>Texas Health and Safety Code Title 3. Chapter 191.0045. FEES. (d) A local registrar or county clerk who issues a certified copy of a birth or death certificate shall charge the same fees as charged by the bureau of vital statistics, including the additional fee required under Subsection (e), except as provided by Subsections (g) and (h).</td>
<td>$23.00</td>
</tr>
<tr>
<td>Search or Verification for Birth</td>
<td>A process of looking or confirming the birth of an individual. Verification letter states whether or not the record of a birth was filed with the State of Texas.</td>
<td>Texas Health and Safety Code Title 3. Chapter 191.0045. FEES. (a) The bureau of vital statistics may charge fees for providing services to the public and performing other activities in connection with maintenance of the vital statistics system, including: (1) performing searches of birth, death, fetal death, marriage, divorce, annulment, and other records.</td>
<td>$23.00</td>
</tr>
<tr>
<td>Full Size Birth Certificate Plastic Pouch (Envelope)</td>
<td>Plastic pouch that full size certificate may be placed into for protection.</td>
<td>The proposed fees are based on information regarding resale costs in other counties.</td>
<td>$2.00</td>
</tr>
<tr>
<td>Wallet Size Birth Certificate Plastic Pouch (Envelope)</td>
<td>Plastic pouch that wallet size certificate may be placed into for protection.</td>
<td>The proposed fees are based on information regarding resale costs in other counties.</td>
<td>$1.00</td>
</tr>
</tbody>
</table>
## Vital Statistic Services Fees

### 2018

<table>
<thead>
<tr>
<th>Service/Item</th>
<th>Description</th>
<th>Fee Basis</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Abstract Size Birth Certificate Plastic Pouch (Envelope)</td>
<td>Plastic pouch that abstract size certificate may be placed into for protection</td>
<td>The proposed fees are based on information regarding resale costs in other counties.</td>
<td>$1.50</td>
</tr>
<tr>
<td>Death Certificate</td>
<td>A certified copy of a death record; provides legal proof of a death registered with the State of Texas.</td>
<td>Texas Health and Safety Code Title 3. Chapter 191.0045. FEES. (d) A local registrar or county clerk who issues a certified copy of a birth or death certificate shall charge the same fees as charged by the bureau of vital statistics, including the additional fee required under Subsection (e), except as provided by Subsections (g) and (h).</td>
<td>$21.00</td>
</tr>
<tr>
<td>Death Certificate: Each Additional Copy</td>
<td>Each additional copy of the death certificate must be ordered at the same time.</td>
<td></td>
<td>$4.00</td>
</tr>
<tr>
<td>Search or Verification Fee for Death</td>
<td>A process of looking or confirming the death of an individual. Verification letter states whether or not the record of a death was filed with the State of Texas.</td>
<td>Texas Health and Safety Code Title 3. Chapter 191.0045. FEES. (a) The bureau of vital statistics may charge fees for providing services to the public and performing other activities in connection with maintenance of the vital statistics system, including: marriage, divorce, annulment, and other records.</td>
<td>$21.00</td>
</tr>
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</table>
## Vital Statistic Services Fees

<table>
<thead>
<tr>
<th>Service/Item</th>
<th>Description</th>
<th>Fee Basis</th>
<th>Current Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Notary: Acknowledgement of proof (1st Signature)</td>
<td>A formal declaration before an authorized official, such as a notary public, by someone who signs a document and confirms that the signature is authentic. Also, the certificate of the officer on such instrument indicating that the document has been so acknowledged.</td>
<td>The maximum fee a Texas Notary Public or its employer may charge for his/her services is $6.00 Texas Government Code Section 406.024 specifies the maximum fees for an official act that is performed by a notary public.</td>
<td>$6.00</td>
</tr>
<tr>
<td>Notary: Acknowledgement of proof, each additional signature</td>
<td></td>
<td></td>
<td>$1.00</td>
</tr>
<tr>
<td>Administering Oath or Affirmation</td>
<td>A solemn declaration, accompanied by a swearing to God or a revered person or thing, that one’s statement is true or that one will be bound to a promise. The person making the oath implicitly invites punishment if the statement is untrue or the promise is broken. The act of affirming the truth of a document, not an oath. &quot;I solemnly affirm and declare the foregoing to be a true statement.&quot;</td>
<td>The maximum fee a Texas Notary Public or its employer may charge for his/her services is $6.00 Texas Government Code Section 406.024 specifies the maximum fees for an official act that is performed by a notary public.</td>
<td>$6.00</td>
</tr>
</tbody>
</table>
# Vital Statistic Services Fees

<table>
<thead>
<tr>
<th>Service/Item</th>
<th>Description</th>
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<th>Current Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Expedited fee</td>
<td>Expedited services is available for birth and death certificates</td>
<td>The expedited service fee ensures the request will be processed the same day of receipt. The charge for the expedited service is <strong>$25.00</strong> ($6.00 GCHD expedited fee; $6.00 Vital Chek online vendor convenience fee, fees only apply to Web online request). This fee includes the expedited fee, credit card charge &amp; via mail out fee. Fees do not include the cost of the document.†</td>
<td><strong>$25.00</strong> ($6.00 GCHD fee; $6.00 Vital Chek fee)</td>
</tr>
</tbody>
</table>
### Environmental Health Services Fees

Effective October 1, 2018

#### Consumer Health – Food Service Establishments – Permitting, Inspections and Training

<table>
<thead>
<tr>
<th>Service/Item</th>
<th>Current Fee</th>
<th>Description</th>
<th>Fee Basis</th>
</tr>
</thead>
<tbody>
<tr>
<td>High Risk Food Permit</td>
<td>$300.00</td>
<td>Permit Fee for high risk food establishments</td>
<td>Chapter 437 of the Health and Safety Code allows a permit fee of no more than $300.00 for Health District food service permit fees.</td>
</tr>
<tr>
<td>Medium Risk Food Permit</td>
<td>$275.00</td>
<td>Permit Fee for medium risk food establishments</td>
<td>Chapter 437 of the Health and Safety Code allows a permit fee of no more than $300.00 for Health District food service permit fees.</td>
</tr>
<tr>
<td>Low Risk Food Permit</td>
<td>$250.00</td>
<td>Permit Fee for low risk food establishments</td>
<td>Chapter 437 of the Health and Safety Code allows a permit fee of no more than $300.00 for Health District food service permit fees.</td>
</tr>
<tr>
<td>Temporary Food Permit (submitted 2 business days before event)</td>
<td>$75.00</td>
<td>Permit fee for temporary food establishments (fee waived for non-profits)</td>
<td>Chapter 437 of the Health and Safety Code allows a permit fee of no more than $300.00 for Health District food service permit fees.</td>
</tr>
<tr>
<td>Late Temporary Food Permit (Submitted less than 2 business days before event)</td>
<td>$100.00</td>
<td>Permit fee for temporary food establishments not submitted in a timely manner (fee waived for non-profits)</td>
<td>Chapter 437 of the Health and Safety Code allows a permit fee of no more than $300.00 for Health District food service permit fees.</td>
</tr>
<tr>
<td>Temporary Food Permit (permitted on day of event)</td>
<td>$250.00</td>
<td>Permit Fee for temporary food establishments permitted on the day of the event</td>
<td>Chapter 437 of the Health and Safety Code allows a permit fee of no more than $300.00 for Health District food service permit fees.</td>
</tr>
<tr>
<td>Food Service Establishment Plan Review and Construction Fee</td>
<td>Large* $225.00, Medium* $200.00, Small* $175.00</td>
<td>Fee to review acceptability of proposed food establishment plans and conduct the pre-opening inspection</td>
<td>Chapter 437 of the Health and Safety Code allows Health Districts to review planning materials of food establishments. Administrative fee to cover cost of review and the pre-opening inspection.</td>
</tr>
<tr>
<td>Food Manager Class Registration</td>
<td>$50.00</td>
<td>One day course designed to educate food service managers on food handling regulations</td>
<td>Food manager course for food service managers required under GCHD food establishment permitting regulation.</td>
</tr>
<tr>
<td>Food Handler Certification</td>
<td>$25.00</td>
<td>Short course for food handlers working in local restaurants.</td>
<td>Administrative fee for shorter food handler class certification.</td>
</tr>
</tbody>
</table>
# Environmental Health Services Fees

**Effective October 1, 2018**

## Consumer Health – Food Service Establishments – Permitting, Inspections and Training

<table>
<thead>
<tr>
<th>Service/Item</th>
<th>Current Fee</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Potentially hazardous Food Vendors at a Farmer’s Market (Annual Food Permit)</td>
<td>$175.00</td>
<td>Fee assessed that allows vendors of farm products to operate under the Farmer’s Market permit</td>
<td>Fee required under GCHD policy on food service establishments</td>
</tr>
<tr>
<td>Childcare Facility Food Permit</td>
<td>$150.00</td>
<td>Food service permit fee for child care facility that prepares food on-site</td>
<td>Chapter 437 of the Health and Safety Code allows a permit fee of no more than $150.00 for day care center food services.</td>
</tr>
<tr>
<td>Group Day Home Inspection</td>
<td>$75.00</td>
<td>Inspection provided to assist Group day home operators in their compliance with group day home regulations.</td>
<td>General sanitation inspection provided as a service to group day home owners. We are not required by any regulation to provide this service.</td>
</tr>
<tr>
<td>Chlorine Test Strip</td>
<td>$5.00</td>
<td>Test strips used to check chlorine sanitizer levels in ware-washing operations.</td>
<td>Provided for public and staff to help measure Chlorine sanitizer levels.</td>
</tr>
<tr>
<td>Food Service Late Fee</td>
<td>$50.00 if not paid by due date</td>
<td>Administrative late fee assessed for all food permits not paid by the due date.</td>
<td>Fee approved by Board of Health</td>
</tr>
<tr>
<td>Food Service Late Fee</td>
<td>$100.00 if not paid 30 days after due date</td>
<td>Administrative late fee assessed for all food permits not paid by the due date.</td>
<td>Fee approved by Board of Health</td>
</tr>
</tbody>
</table>

## Consumer Health - On-Site Sewage Facilities (OSSFs) - Permitting, Inspections and Maintenance Agreements

<table>
<thead>
<tr>
<th>Service/Item</th>
<th>Current Fee</th>
<th>Description</th>
<th>Fee Basis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residential Septic</td>
<td>$250.00</td>
<td>Permit fee For residential OSSF. Includes the state septic system charge of $10.00.</td>
<td>Fee allowed under Ch. 366 Health and Safety Code</td>
</tr>
</tbody>
</table>
### Environmental Health Services Fees
**Effective October 1, 2018**

#### Consumer Health - On-Site Sewage Facilities (OSSFs) - Permitting, Inspections and Maintenance Agreements

<table>
<thead>
<tr>
<th>Service/Item</th>
<th>Current Fee</th>
<th>Description</th>
<th>Fee Basis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commercial Septic</td>
<td>$450.00</td>
<td>Permit fee for commercial OSSF. Includes the state septic system charge of $10.00.</td>
<td>Fee allowed under Ch. 366 Health and Safety Code</td>
</tr>
<tr>
<td>Maintenance Agreement fee for aerobic On-Site Sewage Facilities (OSSF)(One Time Fee)</td>
<td>$100.00</td>
<td>Additional fee to follow perpetual maintenance contracts for aerobic OSSFs.</td>
<td>Fee allowed under Ch. 366 Health and Safety Code</td>
</tr>
<tr>
<td>Septic Re-inspection - Residential</td>
<td>$125.00</td>
<td>Re-inspection fee for OSSF due to failed construction inspection. Charge is ½ of original permit fee.</td>
<td>Fee allowed under Ch. 366 Health and Safety Code</td>
</tr>
<tr>
<td>Septic Re-inspection - Commercial</td>
<td>$225.00</td>
<td>Re-inspection fee for OSSF due to failed construction inspection. Charge is ½ of original permit fee.</td>
<td>Fee allowed under Ch. 366 Health and Safety Code</td>
</tr>
<tr>
<td>Septic Subdivision Review</td>
<td>$100.00</td>
<td>Fee to review subdivision plans as required by regulations.</td>
<td>Fee allowed under Ch. 366 Health and Safety Code</td>
</tr>
<tr>
<td>Ground Water Review</td>
<td>$100.00</td>
<td>Charge to review presence of groundwater in Bolivar/Galveston Area.</td>
<td>Fee allowed under Ch. 366 Health and Safety Code</td>
</tr>
</tbody>
</table>

#### Consumer Health - Public and Semi-Public Pools, Spas and Interactive Water Features

<table>
<thead>
<tr>
<th>Service/Item</th>
<th>Current Fee</th>
<th>Description</th>
<th>Fee Basis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pool Permit, Spas and Interactive Water Features</td>
<td>$135.00</td>
<td>Swimming pool permit fee.</td>
<td>Cost of a swimming pool permit under the Galveston County Rules on Swimming Pool Sanitation. Allowed under Ch.341.064 Health and Safety Code.</td>
</tr>
</tbody>
</table>
## Environmental Health Services Fees

**Effective October 1, 2018**

### Consumer Health - Public and Semi-Public Pools, Spas and Interactive Water Features

<table>
<thead>
<tr>
<th>Service/Item</th>
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<th>Description</th>
<th>Fee Basis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pool Operator Class</td>
<td>$50.00</td>
<td>Training class to help people better operate public swimming pools.</td>
<td>Pool operator class provided by health district personnel to meet requirements of GCHD swimming pool regulation. Allowed under Ch. 341.064 of Health and Safety Code</td>
</tr>
<tr>
<td>Pool Permit Late Fee</td>
<td>$50.00 if not paid by due date</td>
<td>Administrative late fee assessed for all pool permits not paid by the due date.</td>
<td>Fee approved by Board of Health</td>
</tr>
<tr>
<td>Pool Permit Late Fee</td>
<td>$100.00 if not paid 30 days after due date</td>
<td>Administrative late fee assessed for all pool permits not paid by the due date.</td>
<td>Fee approved by Board of Health</td>
</tr>
</tbody>
</table>

### Consumer Health - Miscellaneous Fees

<table>
<thead>
<tr>
<th>Service/Item</th>
<th>Current Fee</th>
<th>Description</th>
<th>Fee Basis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexually Oriented Business (SOB) Permit</td>
<td>$1,000.00</td>
<td>Sexually oriented business permit fee.</td>
<td>Fee set by Commissioners Court for Sexually Oriented Businesses in unincorporated areas of the county under regulation passed by Commissioners Court.</td>
</tr>
<tr>
<td>AIDS Poster</td>
<td>$5.00</td>
<td>AIDS information poster.</td>
<td>Small poster required to be available at the health district for use in SOB’s under SOB regulation.</td>
</tr>
<tr>
<td>Rat Bait</td>
<td>$8.00</td>
<td>Rat bait to assist with community rodent control.</td>
<td>Four (4) pound packages of rat bait to assist consumers with rodent control issues on their property.</td>
</tr>
<tr>
<td>Duplicate Permit Fee</td>
<td>$20.00</td>
<td>Charge for copy of any permit issued under health district regulations.</td>
<td>Administrative fee</td>
</tr>
</tbody>
</table>

### Air and Water Pollution - Storm Water Permit

<table>
<thead>
<tr>
<th>Service/Item</th>
<th>Current Fee</th>
<th>Description</th>
<th>Fee Basis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Storm Water Permit</td>
<td>$200.00</td>
<td>Storm water permit fee for construction activities</td>
<td>Storm Water MS4 Pollution Control order for Erosion and Sediment Control; Illicit Discharge and Post-Construction to meet requirement of GCHD storm water policy</td>
</tr>
</tbody>
</table>

[Back to Agenda]
United Board of Health
August 2018
Item #15
Follow Up to Discussion Regarding Marinas and Water Quality
Marinas and Water Quality

Marine Sanitation Devices
Presentation Objectives

• Marina Water Quality
• Marina and Boating Statistics
• Marine Sanitation Devices (MSD) and Pump Out Stations 101
• Inspections and Enforcement
• Education
• What can you do?
Marina Water Quality

- Water quality not well understood or studied
- Most water quality impacts are localized within the marina
- Poor circulation within marinas – reduced flushing
  - Depressed dissolved O$_2$ Levels
  - Accumulation of pollutants
- Contaminants – fuel, cleaners, paints, heavy metals, etc.
- Fecal contamination
Boating by the Numbers

2013 – Most recent data from Galveston Bay Foundation
• Houston/Galveston area 93,000 registered boats
• 30 marinas in Galveston Bay including Clear Lake
• 6800 wet slips
• No data on liveaboards – changes from year to year
• 13 public pump out stations in Galveston County area
• 3 private facilities
This map displays the location of pump-out facilities for recreational boaters in the Galveston Bay/Clear Lake area as of March 2017. Zoom in or out, and click on a location to learn more about pumpout access and location.
What is a Marine Sanitation Device?

• A **Marine Sanitation Device**, commonly known as an “MSD” is a piece of machinery or a mechanical system that is dedicated to treat, process, and/or store raw, untreated sewage that can accumulate onboard water vessels.

• Section 312 of the CWA requires the use of operable, U.S. Coast Guard-certified MSDs on board vessels that are 1) equipped with installed toilets, and 2) operating on U.S. navigable waters (which include the three mile territorial seas).

• USCG has certified three kinds of Marine Sanitation Devices.
Marine Sanitation Device (MSD)

Type I

Type I is a on-board treatment device using a physical/chemical based system that relies on maceration and chlorination. After treatment the treated waste can be discharged, unless in “no discharge zone (NDZ)” Clear Lake is a NDZ (1995).
Marine Sanitation Device (MSD)

Type II

Type II is also an on-board treatment device that uses biological or aerobic digestion based system. After treatment the waste can be discharged, unless in “no discharge zone (NDZ)” Clear Lake is a NDZ (1995).
Marine Sanitation Device (MSD)

Type III

Type III is a holding tank or similar device that prevents the overboard discharge of treated or untreated sewage.
Marine Sanitation Device (MSD) – “Y” Valve
Pump out stations

• Stationary or portable
Who regulates - Inspections and Enforcement

- The U.S. Environmental Protection Agency (EPA) and the U.S. Coast Guard jointly regulate MSDs under CWA section 312.
- The EPA has issued regulations setting performance standards for MSDs which address fecal coliform and total suspended solids.
- The Coast Guard has issued regulations governing the design, construction, certification, installation and operation of MSDs, consistent with the EPA's standards.
Who can board a registered vessel to determine MSD compliance?

• Federal - United States Coast Guard

• State

“Any game warden, any peace officer of a municipality or other political subdivision of the state who is certified as a marine safety enforcement officer under 31.121 of the Parks and Wildlife Code is authorized to enforce these regulations”
GCHD MSD Inspection Issues

1. GCHD cannot board vessels

2. GCHD does not contract with some of the cities with marinas (Kemah, Galveston, Clear Lake Shores)

3. Discharges from vessels hard to identify

4. At the marina, word spreads fast that regulators on site, “Y” valves are closed
Another tool - Clean Water Certification

TCEQ

• The Clean Water Certification Program requires owners of boats with marine sanitation devices (MSDs) and owners of pump-out stations to obtain a decal, self-certifying that the MSD or pump-out station is operating properly to prevent the discharge of sewage into Texas waterways. The program is required under Texas law and is intended to protect and improve the quality of water in Texas.

• TCEQ Commission can delegate Clean Water Certification program to another governmental entity.
Yet another tool - Education

Dockwalker Team
Dock Walker Team
Galveston Bay Foundation
What can I do if I see someone discharging sewage?

- File a complaint with GCHD or TCEQ
- Report to Galveston Bay Action Network
- Collect citizen evidence (photos, samples, documentation)
- Texas law also authorizes any Texas Game Warden or certified marine safety enforcement officer to enforce the rules of the Clean Water Certification Program. To report a violation, contact [Operation Game Thief](https://www.galvestonbay.org/GBAN) at 1-800-792-4263.
Questions?
United Board of Health
August 2018
Item #16
Update on Proposed Electronic Sign at the Animal Resource Center

Back to Agenda
United Board of Health
August 2018
Item #17
Update from the Bylaws Sub Committee