

NORTHERN NEVADA

# Public Health+

## EMPLOYEE POLICY MANUAL

2023

Fiscal Year 2024 Version

Fiscal Year 2024 Version Adopted by  
the District Board of Health  
September 28, 2023

NORTHERN NEVADA

# Public Health+

## VISION

*A healthy community*

## MISSION

**To protect and enhance the well-being and quality of life for all in Washoe County.**

## Record of Policy Manual Changes

### Northern Nevada Public Health

#### Employee Policy Manual

Previously approved changes in Green    New updates in Red

Item #	Status	Change	Date Submitted
A.	Update	Health Insurance Portability and Accountability Act (HIPAA) Confidentiality and Security Policy and Protocol	5/23/24
B.	Update	Refund Policy	7/28/22
C.	NEW	Relationships in the Workplace	2/22/24
D.	NEW	Wellness Policy	5/23/24
E.	Update		
F.	Update		
G.	NEW		
H.	NEW		
I.	Update		
J.	Update		
K.	Update		
L.	Update		
M.	Updated		
N.	Update		
O.	Update		
P.	NEW		
Q.	Update		
R.	NEW		
S.	Update		

Computer links throughout the document have been updated to current links.

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### Forms, Reference Documents Lists and Links

#### A. HR Related Documents

- Washoe County Code, Chapter 5 – Administration and Personnel
- Washoe County Personnel Handbook (5-11-23 version) –5.025 – 5.341
- Northern Nevada Public Health Infection and Bloodborne Pathogen Exposure Control Manual
- Labor Relations/Employee Association Contracts
- Washoe County Internet and Intranet Acceptable Use Policy
- Washoe County Human Resources – Policy, Procedures, and Forms

#### B. Financial

- Washoe County Code, Chapter 15 – County Finances, Purchasing
- Washoe County Accounts Payable Procedure Manual
- Washoe County Internal Controls Procedures Manual
- Washoe County Grants Management Policy Manual
- Washoe County Pro Card User Guide
- Washoe County Purchasing Manual

#### C. Plans

- Northern Nevada Public Health Emergency Operations Plan
- Northern Nevada Public Health Evacuation Procedure
- Northern Nevada Public Health Emergency Action Plan
- Northern Nevada Public Health Active Shooter Procedure
- Washoe County Complex Evacuation Policy and Procedures
- Washoe County Emergency Action Plan Policy

#### D. Forms and Policies

- Customer Conduct Policy (NNPH)
- Customer/Client Rights (Discrimination and Harassment) (NNPH)
- Customer Suspension Policy (NNPH)
- Media Policy D-4 – Press Release (NNPH)
- Media Policy D-5 – Media Advisory (NNPH)
- Media Policy D-6 – Consent and Release

### **Introduction**

The Northern Nevada Public Health Employee Policy Manual is intended to provide general information about departmental policies.

### **Legal Notice**

The policies and statements contained herein may include information taken from other original source documents such as the Washoe County Code and the Agreements, which exist between Washoe County and the recognized Employee Associations. This manual does not alter the provisions of the Code or the Agreements in any way, nor does it affect the relationships defined therein. Therefore, these and other pertinent source documents should be consulted for complete and up-to-date versions of the policies and statements set forth in this Policy Manual.

This document supersedes all prior Northern Nevada Public Health Employee Policy Manuals. This Policy Manual is subject to change at any time. Employees will be notified of new policies and policy updates upon acceptance. A current copy of the Policy Manual also can be located on the Northern Nevada Public Health website.

Washoe County Policies are discussed with employees attending Washoe County New Employee Orientation through Washoe County Human Resources. Northern Nevada Public Health employees are required to read multiple policies when hired and the link to the Washoe County Human Resources - Policy, Procedure, and Forms website is included in Appendix A of this manual.

***Updated 4/13/15***

## 2 - ACCIDENT AND INJURY REPORTING

### **DESCRIPTION:**

#### **1) Personal Injury:**

If any occupationally related injury or illness results in:

- Absence from work
- Necessity for transfer to another job or termination of employment
- Loss of consciousness
- Restriction of work or movement
- Medical treatment of any kind, including first aid

- a. The employee shall report the incident to the Supervisor and complete the C-1 "Notice of Injury or Occupational Disease" form immediately; (located on the Health SharePoint site under Forms Policies & Procedures & Info, Notice of injury – DR C-1 or under or on the Risk Management site <https://washoenv.sharepoint.com/sites/Comptroller/SitePages/Worker's-Compensation.aspx> and click on C1 Fillable-form.
- b. The employee and Supervisor will sign and date the form; (if the employee is incapacitated the form can be completed and signed by the supervisor and sent through the process. The employee's signature will be obtained as soon as possible and forwarded to Risk Mgmt).
- c. The Supervisor shall complete the "Supervisor's Report of Injury form"; (located on the Health SharePoint site under Forms Policies & Procedures & Info, or on the Risk Management site <https://washoenv.sharepoint.com/sites/Comptroller/SitePages/Worker's-Compensation.aspx> and click on "Supervisor's Report of Injury Form". Forward both forms to the Division Director for review and signature.
- d. The Division Director will be responsible for ensuring both forms are forwarded to the Northern Nevada Public Health Administrative Health Services (AHS) division - to the person handling Risk Management issues or HR Representative within 24 hours of the injury/illness.
- a) The Northern Nevada Public Health AHS office personnel handling Risk Management issues or HR Representative completes the C-3 "Employer's Report of Industrial Injury" forms and notifies the Administrative Health Services Officer (AHSO) or Fiscal Compliance Officer (FCO) in the absence of the AHSO. The AHSO or FCO will initial the form to show they have been made aware of the situation. The AHS person who handles Risk Management issues or HR Representative will forward all three forms to Risk Management within three (3) calendar days of injury.

In the event of death, regardless of the time between injury and death, or the length of the illness, the Supervisor shall be responsible for the completion of all required paperwork in steps a – c.



2) **Liability and Property Loss:**

If one or more of the following occurs:

- Personal injury to a non-employee
  - Damage to property of others (non-vehicle)
  - Damage to County property (non-vehicle)
  - Incidents which may result in liability to the Department.
- a) The employee shall report the incident to the Supervisor; and within one (1) business day of the incident, complete and submit the Saf-7 "Washoe County Liability and Property Loss Report" form;  
<http://eww/comptroller/Pages/CLAIMS.aspx> and click on the SAF 7 (Liability and Property Loss Form) and submit it to the Division Director, through their Supervisor;
- b) The Division Director shall submit the form to the Northern Nevada Public Health Administrative Health Services (AHS) personnel within two (2) business days of the incident.
- c) The AHS personnel who handle Risk Management issues will have the form reviewed and initialed by the Administrative Health Services Officer (AHSO) or Fiscal Compliance Officer (FCO) in the absence of the AHSO and will send the form and/or advise Risk Management within 3 days of the incident.

3) **Vehicle Accident:**

An Employee driving any vehicle (County, rental, or personal), who is involved in an accident during the course of assigned duties shall:

- a) Immediately notify the appropriate law enforcement agency for investigation at the scene, regardless of the extent of damage; if local law enforcement will not respond and a county vehicle is involved, advise dispatch a county vehicle was involved and request they dispatch a Deputy Sheriff to the scene to do a report. (Risk Mgmt. needs this report);
- b) After notifying law enforcement contact your immediate Supervisor and give a preliminary verbal report; if Supervisor is unavailable, call the Northern Nevada Public Health (NNPH) main number (328-2410) and give a preliminary verbal report to the AHS person who handles Risk Management issues or the HR Representative.

- c) Within one (1) business day, the employee must complete the Saf-5 “Washoe County Vehicle Accident Report” form and submit it to the NNPH’s AHS person who handles Risk Management issues; through his/her Supervisor and Division Director; (form located on the Health SharePoint site under Forms; <https://washoenv.sharepoint.com/sites/Health/SitePages/Forms.aspx>, or on the Risk Management site <https://washoenv.sharepoint.com/sites/Comptroller/SitePages/Claims.aspx> and click on the SAF 5 (Vehicle accident Report Form). If the employee is incapacitated the supervisor can fill out this form and route it. Employee signature will be obtained as soon as possible.
- d) Accidents involving any vehicles when law enforcement does not respond: Employee should obtain, complete and file the Nevada Department of Motor Vehicles “Driver’s Report of Traffic Accident SR-1: form and submit a copy to the NNPH AHS person who handles Risk Management issues (NV DMV SR-1 form located at:) <http://www.dmvnv.com/pdfforms/sr1.pdf>
- e). Each County Vehicle contains a “Red Envelope” in the glove compartment which outlines the instructions employees should follow when a motor vehicle accident occurs. These instructions apply to county and non-county vehicles alike. Following the enumerated instructions listed on the Red Envelope will provide Risk Mgmt. with all the information they need to properly administer any related claim. An Employee using a non-county vehicle for business purposes can obtain the Red Envelope instructions from the NNPH AHS person who handles Risk Management issues or <https://washoenv.sharepoint.com/sites/Comptroller/sitePages/claims.aspx>
- f). Do not sign any form(s) or materials presented by the insurance carrier(s) of the opposing party. All such materials are to be forwarded to the District Health Officer, who will advise Risk Management.

*Update 5/11/23*

### 3 - ALTERNATIVE WORK SCHEDULES

#### **DESCRIPTION:**

Northern Nevada Public Health evaluates each request for an Alternative Work Schedule or Flexible Hybrid Agreement individually. Alternative Schedules/Flexible Hybrid Agreements are to enhance public service and are granted at the sole discretion of the employer and are not an employee entitlement. Alternative work schedules or Flexible Hybrid Agreements can be discontinued at any time by management.

- Alternative Work Schedule form is used for a variation of the standard Monday – Friday 5–8-hour schedule (work hours occurring between 6am-6pm). Example: Work 7:30-4 with ½ hour lunch. This form is completed by the employee and approved by their supervisor and division director. A copy of the form is maintained by the supervisor, and one is placed in the employee’s department HR personnel file. Division Directors can establish set hours of operation for their programs (example – one program may not allow anyone to start before 7am or leave before 4pm, while another may require staff to work between the hours of 8am-6pm.) Hours will vary based on individual program needs.
- Flexible Hybrid Agreement is used for any 4-10 hour shifts or a 4-9’s and 1-4 hour shift schedule, as well as for any employee who works remotely (hybrid/telecommuting) at all, even if only occasionally. The employee must complete the Flexible Hybrid Agreement Seamless Doc form and route it electronically through seamless docs for approval by their supervisor and Division Director, and the Flexible Hybrid Agreement requires the employee to review and complete all hybrid forms, training, guidelines, checklist etc. A copy of all hybrid agreements and all related forms are placed in the department personnel file and a copy is provided to County HR for the employee’s personnel file if needed.

#### **1) Purpose**

Northern Nevada Public Health is dedicated to excellence in public service. The purpose of this procedure is to provide flexibility in work schedules to meet the business needs of Northern Nevada Public Health. Each department should determine if the Alternative Work Schedule Program or the Flexible Hybrid Schedule would be effective in meeting their business needs. **Participation in the Alternative Work Schedule Program or Flexible Hybrid Agreement is at the sole discretion of the employer and is NOT an employee entitlement.** It should be understood that not every job is adaptable to an alternative work schedule or flexible hybrid agreement. This procedure provides an effective business tool to enhance public service and employee performance. This procedure also provides new opportunities for efficiency, potential expanded hours for customer service and a possible recruiting tool to attract new talent.

Nothing in this procedure supersedes Nevada Revised Statutes, Washoe County Code, and Personnel Handbook, Labor Agreements or FLSA regulations.

### 2) **Eligibility**

Every department may, upon approval of their department head, provide alternative work schedules or Flexible Hybrid schedules to employees. Each participating department shall determine which work schedules, if any, are available for employees. Such determinations shall be made based upon the business needs, staffing and coverage requirements, etc. Operational needs must be met: Each division must have coverage in-office daily during the core hours of operation (M-F; 8am-5pm), with a manager on duty daily.

Individual employees may be permitted, with the consent of their supervisor and the approval of appropriate management, to work alternative schedules or flexible hybrid schedules. Approval of an alternative work schedule or flexible hybrid schedule for individual employees will be based upon consideration of the employee's job performance, office operating requirements, employee's attendance and timeliness, and any disciplinary issues. Certain positions may not be eligible for an alternative work schedule or flexible hybrid schedule due to program needs or the job duties assigned to the position. Every employee working an alternative work schedule or flexible hybrid schedule shall do so in accordance with a written agreement, approved by the appropriate management (Alternative work schedule and Flexible Hybrid Agreement are approved by the employee's Supervisor and their Division Director) and the employee. Probationary employees may be eligible for alternative work schedules and/or Flexible Hybrid schedule, in special circumstances, with the approval of the department head.

Alternative work schedules of 5-8-hour shifts or Flexible Hybrid schedules of 4-10-hour shifts, 4-9-hour and 1-4 hour shift, or variations of the standard work hours/workdays, which best accommodate business needs may be considered. Working remotely (even if just occasionally for training etc.) must be approved through the Flexible Hybrid Agreement process. Northern Nevada Public Health and Washoe County no longer allow the 9-80 schedule.

Alternative Work Schedules and Flexible Hybrid Agreements are a privilege, not a right; and any employee can be removed from either of these types of schedules by management for any reason with a 2-day notice.

Public Health staff working on a schedule other than Mon-Fri 5-8-hour shifts are to revert to a 5-8-hour schedule for all weeks that include a paid holiday, when

attending training courses or other situations where an employee needs to work 8-hour days for a project, assignment or if it is required by their supervisor. Holiday Pay is counted as part of the employees' 40 hours and part of the part-time staffs planned working hours. Pre-approval from management is required for any overtime, including extra hours worked during a holiday week.

- **SPECIAL NOTE** – Northern Nevada Public Health **DOES NOT** offer the ½ hour paid lunch option mentioned in the Washoe County Recommendations of Flexible and Hybrid Schedules document under the “Flexible or Alternative Schedule Options” section - “Department Considerations” area. This option is **NOT** available for any Health District employee, no matter what their schedule is.

### 3) Form

The Alternative Work Schedule form is located on the Northern Nevada Public Health Intranet page under “Forms” and **employees must attach a memo (or include the information on the form) explaining the benefits and impacts the alternative schedule will have on the program.**

<https://washoenv.sharepoint.com/sites/Health/SitePages/Forms.aspx>

The Flexible Hybrid Agreement and all related forms, guidelines and check lists related to the flexible hybrid agreement are located on the County HR website:

<https://washoenv.sharepoint.com/sites/Inside-Washoe-HR/SitePages/Future-of-Work.aspx?from> (Flexible Hybrid Work Agreement, Hybrid Work Environment Checklist, Hybrid Working Guide, Recommendations for Flexible and Hybrid Schedules, Communication Guidelines and Virtual Meeting Etiquette Guidelines).

Employees must document in the “Additional Departmental Terms” section of the Flexible Hybrid Agreement form, an explanation of the benefits and impacts their flexible hybrid schedule will have on the program. Also, if working remotely is it on an occasional as needed basis or on a set schedule.

*Update 7/5/2023*

### **DESCRIPTION:**

**Northern Nevada Public Health does not allow animals in our facility; it does allow Service Animals, and service animal trainees in accordance with “Americans with Disabilities Act,” Title III. Therapy dogs, such as Paws 4 Love dogs are allowed in the building and at vaccine events.**

**Pets should be left at home.**

The definition of a “Service Animal” will include a dog or miniature horse, which is individually trained to do work or perform tasks for a person with a disability. Service animals are allowed to accompany people with disabilities in all areas where members of the public are allowed to go.

ADA information [https://www.ada.gov/service\\_animals\\_2010.htm](https://www.ada.gov/service_animals_2010.htm)

**Staff may ask two questions to determine if it is a service animal – see below:  
According to NRS 651.075**

A place of public accommodation may:

(a) Ask a person accompanied by an animal:

- (1) If the animal is a service animal or service animal in training; and
- (2) What tasks the animal is trained to perform or is being trained to perform.

What kind of animal is that? The answer should be “service”.

OR: is your dog a service animal required because of a disability? Answer should be yes.

YOU MUST NOT ASK WHAT THE DISABILITY IS.

Service animals in training are also welcome.

What service/task/work has it been trained to provide?

Examples of such work or tasks include guiding people who are blind, alerting people who are deaf, pulling a wheelchair, alerting and protecting a person who is having a seizure, reminding a person with mental illness to take prescribed medications, calming a person with Post Traumatic Stress Disorder (PTSD) during an anxiety attack, or performing other duties. Service animals are working animals, not pets. **The work or task a dog has been trained to provide must be directly related to the person’s disability. Dogs whose sole function is to provide comfort or emotional support do not qualify as service animals under the ADA.** Petting a cat or dog reduces blood pressure, however having high blood pressure is not a disability, and the animal hasn’t been trained to lower blood pressure, it’s a byproduct of petting a dog or cat. Same for anxiety disorders, ADHD, etc.

***Updated 7/20/23***

## 5 - AUTHORITY: HEALTH OFFICER TO APPROVE DIVISIONAL AND PROGRAMMATIC PROTOCOLS AND POLICIES

### **DESCRIPTION:**

- 1) The District Health Officer shall conduct an administrative review of the Divisional Policy and Protocol manuals on an annual or bi-annual basis as required. Upon completion of the review the District Health Officer will sign both the review and the approval cover documents, which will contain other appropriate approval signatures, including Consulting Medical Directors as required. The District Health Officer will provide a summary of all Protocol and Policy Manuals reviewed to the District Board of Health to allow the Board to review any specific policies or protocol, and to ask questions.

Authorized by the District Board of Health at their April 26, 2012, meeting.

*Added - 5/14/12*

## 6 - AUTHORITY: HEALTH OFFICER TO REVIEW AND APPROVE NEW AND CONTINUING GRANT APPLICATIONS AFTER CONDUCTING A PRE-APPLICATION ASSESSMENT

### **DESCRIPTION:**

#### **Pre-Application Assessment**

A pre-application assessment evaluates the following factors and should be done in consultation with the Administrative Health Services Officer and District Health Officer (DHO).

Pre-Application Assessment shall be done in advance of the submission of the Grant Application for new and continuing grants.

#### **Financial Factors:**

- a) Total anticipated project cost (including reimbursable and non-reimbursable costs and costs associated with sub-granting)
- b) Match requirements and sources
- c) Program income considerations
- d) Staffing requirements (including salary and benefits increases for multi-year grants)
- e) Plan for sustaining/terminating the program in the event of loss of grant funding or end of the grant term

#### **Programmatic Factors:**

- a) Alignment with the Northern Nevada Public Health mission and County strategic priorities
- b) Community and service delivery benefits
- c) Provision or expansion of services to address critical needs as determined by District Health Officer
- d) Department's capacity to administer the requirements of the grant.

#### **Application - "Request to Submit" Form**

All Northern Nevada Public Health grant applications must be approved by the Administrative Health Services Officer and District Health Officer or the District Board of Health prior to application. Board approval for applications is only necessary when required by the granting agency.

All grant applications will require the "Request to Submit" form be completed and sent through the appropriate approval process.

***Updated 9/3/19***



### **DESCRIPTION:**

All employees who handle cash or participate in fiscal transactions shall annually read the Washoe County Ordinances on cash handling and the Washoe County Internal Controls Procedures Manual. Upon completion of the review of the above documents, employees will sign an acknowledgement form which shall be sent to Administrative Health Services for retention.

### **PROCESS FOR HANDLING INCOMING COUNTY FUNDS:**

- 1) **Each division shall prepare and maintain a fully documented procedure manual concerning all aspects of its cash handling policies and procedures. The manual should be maintained in an up-to-date manner and readily available to all personnel.**
  - a) All funds must be accounted for and kept in a locked secure location when not being used during business hours.
  - b) All funds taken in by an employee/division must be processed for deposit and turned into Administrative Health Services (AHS) in a timely manner (within 1 business day, **notify AHS if an exception is required**). This will help the Treasurer's office process payments accurately.
  - c) All currency (bills) should all be stacked in order; heads up and all facing the same direction with the largest bills on the bottom.
  - d) Administrative Health Services will do a combined deposit of all funds on the following business day.
  - e) A Daily Cash Receipt **or Accela Cashier Summary** form must be completed by each employee/division for all funds accepted by that employee into that division in the form of cash, check, **money orders**, credit card, or coins. The Daily Cash Receipt **or Accela Cashier Summary** form must be signed by the person counting the funds and completing the form.
  - f) All funds must be double counted (**by a different person**) within the division in which they were accepted prior to being sent to Administrative Health Services for deposit.
    - i) The person doing the double count must reconcile the cash register receipt or computer printouts with the Daily Cash Receipt **or Accela Cashier Summary** form and the actual funds or credit slips to ensure accuracy.

The person doing the double count is required to run a calculator tape of all entries on the Daily Cash Receipt (DCR) **or Accela Cashier Summary form** and attach the calculator tape to the DCR form. Then run a calculator tape of the cash, coins, checks and/or credit receipts to ensure all items are recorded accurately on the DCR form.

## CASH HANDLING (Continued)

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This calculator tape is to be attached to the Cash, checks and/or Credit Card receipts. The totals on the calculator tapes should match the total on the top of the DCR form as well as the Cash Register receipt or computer printout.

- ii) Once all items have been double counted (funds counted, calculator tapes run and all totals verified) the person who did the double count signs the second line on the Daily Cash Receipt or **Accela Cashier Summary form** documenting they have verified the accuracy of the funds and documents.
- g) All employees are to follow the County's overall process for Cash Handling **and the division's process for cash handling as outlined in the division's procedure manual for cash handling.**

*Updated 5/11/23*

### **DESCRIPTION:**

All employees who are issued a County/Health District cell phone must read and sign the NNPH Cell Phone Policy located on the Northern Nevada Public Health website as "NNPH Cell Phone Policy"; <https://washoenv.sharepoint.com/sites/Health/SitePages/Policies-&-Procedures.aspx> or obtain a copy from the Northern Nevada Public Health HR Representative.

Cell phones are to be used for County/Public Health business only. They are not to be used for personal use except in an emergency situation as outlined in section #2 of the Cell Phone Policy.

Individually signed cell phone policy acknowledgement forms are to be submitted to the Northern Nevada Public Health HR Representative and placed in the employee's personnel file.

### **PERSONAL USE OF CELL PHONES AND OTHER MOBILE DEVICES:**

Caution should be used when using cell phones, iPads and other mobile devices with cameras during work time so as to protect the private information of fellow employees and customers (e.g., medical records information, addresses, and personal phone numbers).

So as to guarantee the protection of customer's private information, cell phones, iPads or other mobile devices with cameras are not permitted at customer service desks while customers are being assisted.

Employees are encouraged to use common sense when making or receiving personal cell phone calls at work. For example, employees should speak quietly and reserve personal or intimate details for non-work hours.

Personal cell phone usage at work must never include language that is obscene, discriminatory, offensive, prejudicial or defamatory in any way (such as jokes, slurs and/or inappropriate remarks regarding a person's race, ethnicity, sex, sexual orientation, religion, color, age or disability).

Employees should turn off ringers or change ringers to "mute" or "vibrate" during training, conferences and the like; when meeting with clients or serving customers; and if an employee shares a workspace with others.

***Updated 9/6/19***

### **DESCRIPTION:** Washoe County Code of Conduct

Given that Northern Nevada Public Health employees are required to adhere to the policies set by Washoe County the following Code of Conduct is required to be followed by all Health District Employees.

This Code of Conduct sets forth Washoe County's expectations of its employees in their interactions with the public and each other and reflects the core values set out in Washoe County's Value Statement:

**We Value Community, Quality Public Service, Teamwork, People, Communication, Integrity, Professionalism and Progressive Thought.**

This Value Statement and the following Code of Conduct recognize the Washoe County's most valuable asset is its employees and reflects Washoe County's commitment to recognizing that everyone deserves to be treated with dignity and respect. Employees, while on duty, are expected to conduct themselves at all times in a manner consistent with this Code of Conduct, and a failure to do so may lead to discipline up to and including discharge. Off duty conduct at a significant level, that negatively affects County operations or brings discredit to the organization may be cause for disciplinary action up to and including discharge.

### **CODE OF CONDUCT**

#### **Honesty**

- A commitment to honesty requires a good faith intention to be accurate, sincere and straightforward, to seek out the truth, and to avoid misrepresentation.
- Honesty is the cornerstone upon which public trust is built. For the public to have faith in its public employees, employees shall always be honest in their dealings with the public and each other.

#### **Respect**

- Employees shall acknowledge the fundamental dignity and worth of others and their opinions.
- Respect reflects a commitment to attempt to resolve conflicts at the lowest level in a respectful and straightforward manner.
- Respect creates an environment in which ideas can be exchanged, concerns can be appropriately voiced, problems can be solved, and employees' contributions to the organization are recognized, and requires employees at all levels to interact in a professional and dignified manner.

### **Duty to Serve the Public**

- Washoe County employees shall commit themselves to high professional, ethical, and moral standards in their dealings with the public and their fellow employees.
- Duty to public service embraces the unique responsibility to respond in emergencies, to work as a team and with a spirit of cooperation within the organization and our community.
- Duty to public service requires that Washoe County employees be accountable to each other, the County organization, and the public for their conduct at work and for their off duty conduct which negatively affects Washoe County.

### **Tolerance**

- Employees shall accept and value differences and refrain from negative judgement based solely on those differences.
- Washoe County, as an organization and a community, is strengthened by a diversity of experiences, backgrounds, preferences, perspectives, and talents.
- Employees' ability to embrace diversity promotes and enhances our progress.

### **Fairness**

- Employees shall endeavor to listen, understand, and perform their duties without prejudice or favoritism.

### **Courtesy**

- Employees shall be courteous, polite and considerate in dealing with each other and the public.

### **Compliance with other adopted Policies**

- Employees shall comply with all other applicable adopted policies: such as Workplace Violence, Discrimination policies, etc.

***Added 6/30/2017***

### **DESCRIPTION: NRS 281A.400**

Wording updated to NRS 2017 version

A code of ethical standards is hereby established to govern the conduct of public officers and employees:

- 1) A public officer or employee shall not seek or accept any gift, service, favor, employment, engagement, emolument or economic opportunity which would tend to improperly influence a reasonable person in the public officer's or employee's position to depart from the faithful and impartial discharge of the public officer's or employee's public duties.
- 2) A public officer or employee shall not use the public officer's or employee's position in government to secure or grant unwarranted privileges, preferences, exemptions or advantages for the public officer or employee, any business entity in which the public officer or employee has a significant pecuniary interest, or any person to whom the public officer or employee has a commitment in a private capacity to the interests of that person. As used in this subsection, "unwarranted" means without justification or adequate reason.
- 3) A public officer or employee shall not participate as an agent of government in the negotiation or execution of a contract between the government and any business entity in which the public officer or employee has a significant pecuniary interest.
- 4) A public officer or employee shall not accept any salary, retainer, augmentation, expense allowance or other compensation from any private source for the performance of the public officer's or employee's duties as a public officer or employee.
- 5) If a public officer or employee acquires, through the public officer's or employee's public duties or relationships, any information which by law or practice is not at the time available to people generally, the public officer or employee shall not use the information to further a significant pecuniary interest of the public officer or employee or any other person or business entity.
- 6) A public officer or employee shall not suppress any governmental report or other official document because it might tend to affect unfavorably a significant pecuniary interest of the public officer or employee.
- 7) Except for State Legislators who are subject to the restrictions set forth in subsection 8, a public officer or employee shall not use governmental time, property, equipment or other facility to benefit a significant personal or pecuniary interest of the public officer or employee. This subsection does not prohibit:
  - a) A limited use of governmental property, equipment or other facility for personal purposes if:
    - i) The public officer or employee who is responsible for, and has authority to authorize the use of such property, equipment, or other facility, has

- established a policy allowing the use or the use is necessary as a result of emergency circumstances.
  - ii) The use does not interfere with the performance of the public officer's or employee's public duties.
  - iii) The cost or value related to the use is nominal; and
  - iv) The use does not create the appearance of impropriety.
  - b) The use of mailing lists, computer data, or other information lawfully obtained from a governmental agency which is available to members of the general public for nongovernmental purposes; or
  - c) The use of telephones or other means of communication if there is not a special charge for that use. If a governmental agency incurs a cost as a result of a use that is authorized pursuant to this subsection or would ordinarily charge a member of the general public for the use, the public officer or employee shall promptly reimburse the cost or pay the charge to the governmental agency.
- 8) A State Legislator shall not:
- a) Use governmental time, property, equipment, or other facility for a nongovernmental purpose or for the private benefit of the State Legislator or any other person. This paragraph does not prohibit:
    - i) A limited use of state property and resources for personal purposes if:
      - (a) The use does not interfere with the performance of the State Legislator's public duties.
      - (b) The cost or value related to the use is nominal; and
      - (c) The use does not create the appearance of impropriety.
    - ii) The use of mailing lists, computer data, or other information lawfully obtained from a governmental agency, which is available to members of the general public, for nongovernmental purposes; or
    - iii) The use of telephones or other means of communication if there is not a special charge for that use.
  - b) Require or authorize a legislative employee, while on duty, to perform personal services or assist in a private activity, except:
    - i) In unusual and infrequent situations where the employee's service is reasonably necessary to permit the State Legislator or legislative employee to perform that person's official duties; or
    - ii) Where such service has otherwise been established as legislative policy.
- 9) A public officer or employee shall not attempt to benefit a significant personal or pecuniary interest of the public officer or employee through the influence of a subordinate.
- 10) A public officer or employee shall not seek other employment or contracts through the use of the public officer's or employee's official position.

***Updated 9/6/19***

### **DESCRIPTION:**

All Northern Nevada Public Health staff are to keep confidential all information pertaining to persons receiving services from Northern Nevada Public Health. No one is to remove any files from Northern Nevada Public Health premises or to disclose any information to unauthorized persons including, without limitation, friends, family, acquaintance, or the news media.

All Northern Nevada Public Health employees sign an Oath of Confidentiality upon hire indicating they understand that unauthorized disclosure of client or any confidential information may result in disciplinary action and /or personal civil liability for damages.

When the employee signs the acknowledgment form for the review of the Northern Nevada Public Health Employee Policy Manual, they are affirming they have read and will abide by the Northern Nevada Public Health Confidentiality Policy.

*Added 6/1/17*



## 12 - CONTACT-EXTERNAL AGENCIES/DEPARTMENTS

### **DESCRIPTION:**

Any employee acting as a representative of Northern Nevada Public Health shall notify the Supervisor and Division Director prior to any work-related contact of officials outside Northern Nevada Public Health. Such officials shall include:

Board of Health Members	County Manager	City Manager
Assistant County Manager	Elected Officials	Federal Health Officials
State Health Division Administrator	State Health Officer	

The Division Director shall advise the District Health Officer or Deputy Health Officer of the reason(s) for the contact, and the District Health Officer or Deputy Health Officer shall determine who shall make the contact.

If an employee is contacted directly by one of the above officials, that contact shall be reported as soon as possible to the Supervisor and Division Director, who shall notify the District Health Officer and/or Deputy Health Officer.

Administrative Health Services (AHS) provides administrative guidance and oversight for fiscal activities, human resources, and information technology for Public Health. The services and contacts can be provided by AHS. AHS can act as a liaison for the employees, or the employees can work directly with external agencies for routine work-related activities.

***Updated 5/12/23***

### 13 - CULTURALLY AND LINGUISTICALLY APPROPRIATE SERVICES (CLAS)

#### **DESCRIPTION:**

Northern Nevada Public Health (NNPH) is committed to developing and maintaining public health services and materials that are culturally competent, consumer-guided, and community-based. Cultural competence is an essential requirement for our organization to provide effective services to our diverse populations. The purpose of this policy is to provide guidance to employees on adopting and practicing culturally competent services.

#### **POLICY:**

- a) NNPH shall adopt the National Standards for Culturally and Linguistically Appropriate Services (CLAS) in health and health care from the U.S. Department of Health and Human Services, Office of Minority Health  
<https://minorityhealth.hhs.gov/assets/pdf/checked/finalreport.pdf>
- b) These standards are intended to advance health equity, improve quality, and help eliminate health care disparities by providing a blueprint to implement culturally and linguistically appropriate services. Adoption of these standards is intended to help advance better health and health care in the United States.
- c) The CLAS standards as implemented by NNPH are intended to be broadly inclusive of diverse racial, ethnic, sexual and other cultural and linguistic groups, and are intended to serve as general guidelines and not as mandatory requirements.
- d) This policy shall be included in orientation materials for all new staff.

#### **PROCEDURES:**

- 1) Non-Discrimination in Provision of Services. NNPH will implement nondiscriminatory practices in accordance with federal law in the delivery of direct services. NNPH shall:
  - a) Adopt a non-discrimination policy prohibiting discrimination to clients included in, but not limited to the following protected characteristics: race, gender, religion, color, national origin, age, disability, pregnancy, veteran status, genetic status, and sexual orientation. The policy shall state whom to contact in instances of possible discrimination.
  - b) Post the policy in an area visible to clients or at the point of service and make it available to clients upon request.
  - c) Make available to clients the procedures for requesting reasonable accommodations in the receipt of services. In addition, the procedures should be posted in an area visible to clients or at the point of service.
  - d) Make available to clients the procedures for requesting interpretation services, including American Sign Language, in the receipt of services. In addition, the procedures should be posted in an area visible to clients or the point of service.

These procedures shall be available in languages and formats (e.g., for persons with disabilities) appropriate to the population being served.

- 2) Requests for Proposals. All Requests for Proposals or Qualifications (RFP/Q) should, as appropriate, include a statement informing respondents that by responding to a RFP, they agree to follow federal law as it relates to non-discriminatory practices and to provide culturally competent services, including:
  - a) Demonstrating previous experience with providing services to the diverse ethnic, linguistic, sexual or cultural population to be served.
  - b) The current ability of the agency's staff, volunteers, and Board to provide the specific services solicited to the diverse ethnic, linguistic, sexual or cultural population to be served; and
  - c) The specific outcome measures, qualitative and quantitative, which demonstrate that the program provides culturally and linguistically competent services.
- 3) Technical Assistance and Training
  - a) In order to integrate cultural and linguistic competence into its processes and programs, NNPH shall offer staff training on cultural and linguistic competency, including population-specific and skills-based training activities. This training is included in the NNPH Workforce Development Plan and found at <https://www.train.org/main/welcome>.

#### **DEFINITIONS:**

Cultural Competence: A set of attitudes, skills, behaviors, and policies that enable organizations and staff to work effectively in cross cultural situations. It is the ability to function effectively and provide services to customers within the context of their cultural and linguistic needs.

Cultural and Linguistic Competence: A set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals that enables effective work in cross-cultural situations. "Culture" refers to integrated patterns of human behavior that include the language, thoughts, communications, actions, customs, beliefs, values, and institutions of racial, ethnic, religious, or social groups. "Competence"~ implies having the capacity to function effectively as an individual and an organization within the context of the cultural beliefs, behaviors, and needs presented by consumers and their communities.

National CLAS Standards (CLAS): A set of standards intended to advance health equity, improve quality, and help eliminate health care disparities by establishing a blueprint for health and health care organizations.

*Added 7/6/17*

## 14 - CUSTOMER CONDUCT, RIGHTS AND SUSPENSION

### **DESCRIPTION:**

A Customer Conduct Policy, Customer/Client Rights Under the Discrimination and Harassment Policy and a Customer Suspension Policy have been created to outline the acceptable conduct of customers and customer's rights along with a process for suspending a customer's privileges.

The policies are available under the forms section of this manual and posted on the Northern Nevada Public Health (NNPH) intranet under <https://washoenv.sharepoint.com/sites/Health/SitePages/Policies-&-Procedures.aspx>.

Employees should review and be aware of the policies and follow the "Staff Actions Steps" below.

### **Staff Action Steps for Customer Conduct Policy Violation**

1. At any point in the interaction, any staff, may contact security or 911.
2. Staff should ask the customer to please discontinue their action or behavior that is not in compliance with our Customer Conduct Policy.
3. Should this not work, let the customer know that they are violating the policy.
4. If the customer has any questions or concerns, or continues their actions or behaviors, notify a supervisor.
5. The Supervisor may discuss the situation with the customer, reiterating the policy violation. If requested a copy of the policy will be provided to the customer.
6. If the customer is unable to comply with the policy, the Supervisor shall let the customer know that his or her Health District privileges may be suspended, as stated in the NNPH **Customer Suspension Policy**.

### **Staff Action Steps for NNPH Customer/Client Discrimination and Harassment Policy**

– For use when customers state they have been discriminated or harassed by Health District staff

1. Immediately notify their Supervisor or Division Director of the customer's complaint.
2. The Supervisor will provide the customer with a copy of the NNPH Customer/Client Discrimination and Harassment Complaint Form, for the client to complete.
3. The Supervisor shall collect the form from the customer and make a copy for the client to retain.
4. Provide original complaint form to the District Health Officer for review and investigation.

For more information regarding the above policies, refer to the NNPH Policy Manual.

Appendix D

***Updated 7/21/23***

### **DESCRIPTION:**

#### **Mandatory FEMA Trainings:**

All Northern Nevada Public Health (NNPH) Employees:

- IS-100\* and IS-700\* (or its equivalent) within 90 days of hire
- IS-200\* (or its equivalent) within 1 year of hire
- ICS Refresher Course every 2 years. To be completed online through the Bridge Learning Center
- IS 907 or an Active Shooter Awareness Training equivalent

\* IS 100, IS 700, IS 200, and IS 907 are all offered online, and sometimes in a classroom setting. The FEMA Courses can be found at: <https://training.fema.gov/nims/>

Along with the above listed trainings, staff in certain job classifications will need to take additional FEMA courses as described below.

**Staff in the following job classifications must also take ICS-300\*\* within 2 years of hire** (or notification).

\* Administrative Assistant \* Air Quality Specialist \*Community Health Worker & Community Organizer, \*Business Technologist \* Disease Intervention Specialist \* Environmental Engineer \* Environmental Health Specialist \* Licensed Engineer \*Program Assistant \*Public Health Investigator \*Statistician \*Technology Systems Developer

**Staff in the following job classifications must also take ICS-300\*\* and ICS-400\*\* within 2 years of hire** (or notification):

\* Air Quality Supervisor \* Advanced Practice Registered Nurse \* \* Director of Programs and Projects \* Epidemiologist \* Environmental Health Specialist Supervisor \* Epidemiology Program Manager \* Fiscal Compliance Officer \* Government Affairs Liaison \*Grant Coordinator \*Health Educator & Health Educator Coordinator \* Health Equity Coordinator \* Management Analyst \* Media & Communication Specialist \* Nurse Practitioner Supervisor \* Program Coordinator \* Public Health Nurse \*Public Health Nurse Supervisor \* Registered Dietitian Nutritionist \* Senior Air Quality Specialist \* Senior Environmental Health Specialist \* Senior Public Health Nurse

Staff in the following job classifications must also take **ICS-300\*\***, and **ICS-400\*\***, and **IS-800.B NRF**, within 2 years of hire (or notification):

\* Administrative Health Services Officer \* Division Director \* District Health Officer & Deputy Health Office \*Emergency Medical Services Coordinator \* Public Health Communications Program Manager \* Public Health Preparedness Program Staff \* All PHP staff (EMS, PHP and Statisticians if in EPHP)

## EMPLOYEE TRAININGS (Continued)

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**\*\* ICS 300 and ICS 400** are only offered in classroom format. For more information about upcoming training opportunities, contact Kelly Echeverria Emergency Management Administrator at [KEcheverria@washoecounty.us](mailto:KEcheverria@washoecounty.us) or sign up for **ICS 300 and 400 classes** through the Nevada State Department of Emergency Preparedness - [http://dem.nv.gov/training/Training\\_Calendar/](http://dem.nv.gov/training/Training_Calendar/)

These training requirements were recommended by the Department Emergency Management Council and adopted by the District Health Officer and Division Directors on February 28, 2011, and updated on January 15, 2014.

### **County Required Trainings:**

<b>Training / Course</b>	<b>Time Frame</b>	<b>Frequency</b>
Drug Awareness	Upon hire	Every 2 years for employee and yearly for supervisors
Defensive Driving	As soon as possible upon hire (any employee who may drive for any type of County work related business – trainings etc.)	On-line refresher course every 3 years
County Policy (Preventing Harassment/Discrimination)	Online as part of new hire orientation for permanent employees, Intermittent Hourly or Per Diem	Every 2 years
Workplace Violence	Upon hire	Every 2 years
Internet and intranet acceptable use policy	Upon hire	Every year
Cyber Security Training	Upon hire	Every year
Diversity Equity & Inclusion for employees	Upon hire	Every 2 years
Title VI-Overview of Compliance	Upon hire	Every 2 years

### **Health Required Trainings:**

<b>Training / Course</b>	<b>Time Frame</b>	<b>Frequency</b>
HIPAA	Upon hire	Every 2 years
Quality Improvement	Upon hire for permanent employees only. Not required for Int Hrly or Per Diem	On-line One time only

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**EMPLOYEE TRAININGS (Continued)**

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<b>Northern Nevada Public Health Overview</b>	<b>All permanent new hires employed after July 2013</b>	<b>One time only</b>
<b>Washoe County Employee Policy Manual</b>	<b>Upon hire</b>	<b>When updated – approximately every 2 years.</b>
<b>Bloodborne Pathogen - PowerPoint Presentation</b>	<b>All CCHS and specific EHS staff - 1<sup>st</sup> time in person training</b>	<b>Yearly – when advised or policy is updated. Yearly online</b>

<b><u>Biennial Policy Review</u></b> – NNPH Emergency Action Plan WC Emergency Action Plan/Policy Code of Conduct, Public Records Policy		Approximately every 2 years starting in 2017
Infection Control Manual and Bloodborne Pathogen manuals	All CCHS and specific EHS staff when <b>hired</b>	When manuals are updated. Advised of update

***Proposed Update 5/11/23***

### **DESCRIPTION:**

Department recognitions maximum limit is \$25.00.

Retirement recognitions maximum limit is \$50.00.

Per County Code: 5.410 Departmental employee recognition programs: County departments may recognize an employee's years of employment or may recognize an employee's service to the county or both, by presenting service awards such as certificates, frames for certificates, medals, ribbons, pins, emblems, badges, or other types of service awards not to exceed \$25 and that have no value outside of the recognition for county service. Service pins, emblems and other forms of recognition should bear reference to Washoe County or the department recognizing the individual. Inappropriate forms of recognition would include flowers and items of clothing or jewelry which bear no reference to Washoe County or the department. The milestones of achievement to be recognized are: years of service in five-year multiples (5, 10, 15, 20...) Retirement awards of the same type may also be granted, the cost of which shall not exceed \$50.

**Accepting Gifts or Favors** – See Code of Ethical Standards in this manual.

A public officer or employee shall not seek or accept any gift, service, favor, employment, engagement, emolument or economic opportunity, which would tend to improperly influence a reasonable person in the public officer's or employee's position to depart from the faithful and impartial discharge of the public officer's or employee's public duties.

A public officer or employee shall not use the public officer's or employee's position in government to secure or grant unwarranted privileges, preferences, exemptions or advantages for the public officer or employee, any business entity in which the public officer or employee has a significant pecuniary interest, or any person to whom the public officer or employee has a commitment in a private capacity to the interests of that person. As used in this subsection, "unwarranted" means without justification or adequate reason.

**NEW 5/11/23**



### **DESCRIPTION:**

Families of staff receive services under the same conditions that apply to the general public. If the service allows for a sliding fee scale, the family member must qualify according to the same criteria that apply to the general public. Staff will not qualify their family members for services at a reduced cost; this must be done by another staff member. This policy also applies to District Board of Health family members.

When a staff member experiences acute symptoms of illness, appropriate care and testing will be provided, according to department capabilities, and the individual will be referred to a private health care provider.

Work required immunizations or lab testing will continue to be provided to employees at no charge. Required physical examinations will be performed at Public Health expense, through a designated outside contractor.

*Approved prior to 2012*

### **DESCRIPTION:**

Northern Nevada Public Health (NNPH) is required by law to maintain the privacy of protected health information, given this, all NNPH employees are required to:

- 1) Complete HIPAA on-line training every two years at <http://www.webnettraining.com>
- 2) Not use or share client information unless:
  - i) authorized by the client in writing,
  - ii) sharing with other professionals treating the client,
  - iii) required for billing of services to health plans or other entities,
  - iv) required to improve client care or to contact the client,
  - v) the information will help with public health and safety issues such as: prevent the spread of disease, help with product recalls, report adverse reactions to medications, report suspected abuse, neglect, or domestic violence, or prevent or reduce a serious threat to anyone's health or safety,
  - vi) responding to government requests, lawsuits, and legal actions such as court or administrative orders or subpoenas. Due to the complexity of dealing with government requests, lawsuits and legal actions consult the Deputy District Attorney assigned to the Health District before giving out information,
  - vii) sharing information for health research so long as the client name is redacted and no other personally identifying information is included,
  - viii) it is for worker's compensation claims, responding to organ and tissue donation requests from organ procurement organizations,
  - ix) in working with a medical examiner or funeral director when an individual die.
- 3) Services provided through contracts will require a business associate agreement with the contractor if they have access to client protected information.
- 4) Client appointment reminders are allowed under the HIPAA Privacy Rule without client authorizations (pursuant to the Office for Civil Rights, 12/19/2002).
- 5) Let your supervisor know promptly if a breach occurs that may have decreased the privacy of customer health information.
- 6) The following is restricted by all Public Health employees in regard to the client protective health information, you cannot: create or manage a directory of clients; create or maintain psychotherapy notes; market services or sell personal information; or contact patients for fundraising.

Federal law authorizes the imposition of penalties for privacy violations. Enforcement of these penalties lies with federal authorities but can include employment disciplinary action, up to and including termination, depending on the situation. In the event a monetary penalty is assessed by the federal authorities against an employee of Northern Nevada Public Health, the payment will be the sole responsibility of that person.

**Civil Penalties:** Persons, including health plans, providers and clearinghouses, which violate federal privacy standards will be subject to civil liability. Penalties can range from \$100-\$50,000 or more for each violation, up to a maximum of \$1.5 million for identical provisions during a calendar year depending on whether the violation is willful neglect or not.

**Federal Criminal Penalties:** Criminal penalties have monetary penalties along with potential jail sentences up to ten years depending on the level of knowledge of the breach of information. Penalties will be higher for actions designed to generate monetary gain.

***ADDED 6/2/17***

**DESCRIPTION:**

The HIPAA Security Rule focuses on the safeguarding of Electronic Protected Health Information (ePHI). The primary goal of the Security Rule is to protect the confidentiality, integrity and availability of ePHI.

All employees are required to follow the Washoe County Information Security Policy located at

[https://www.washoecounty.us/humanresources/files/hrfiles/TS\\_%20Security\\_Policy\\_8\\_2005.pdf](https://www.washoecounty.us/humanresources/files/hrfiles/TS_%20Security_Policy_8_2005.pdf) and complete the HIPAA training every two years from <http://www.webnettraining.com>.

- 1) **Employees are not to use unauthorized personal mobile devices (laptops, smartphones, external drives etc.) to store, access, send or process ePHI or confidential data unless: they are password protected; auto logoff or password protected screen savers are used; and encryption of stored data by acceptable encryption software approved by a Business Technologist.**
- 2) Access to ePHI is granted only to individuals authorized.
- 3) Northern Nevada Public Health (NNPH) computer equipment should only be used for authorized purposes in the pursuit of accomplishing your specific duties.
- 4) Disclosure of ePHI via electronic means is strictly forbidden without appropriate authorization.
- 5) Installation of software without prior approval is prohibited.
- 6) Do not use computer equipment to engage in any activity that is in violation of the NNPH policies and procedures or is illegal under local, state, federal, or international law.
- 7) All NNPH computer systems are subject to audit.
- 8) All computers should be manually locked, locked via a screen saver, or logged off when unattended.
- 9) Computer screens with ePHI or confidential data should not be viewable by the public.
- 10) Shut down your computer when you leave for an extended period of time.
- 11) You must access NNPH information utilizing your username and password!
- 12) Password sharing is not permitted.
- 13) Maintain your password in a secure and confidential manner.
- 14) Let your supervisor know promptly if an electronic breach occurs that may have decreased the privacy of client health information. Upon resignation, termination or transfer of employee all NNPH network and PC access is terminated, all ePHI and computer equipment should be retrieved.

## HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA) CONFIDENTIALITY AND SECURITY POLICY AND PROTOCOL

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### PROTOCOLS

#### Roles and Responsibilities

1. Overall Responsible Party (ORP)

For NNPH the Administrative Health Services Officer serves as the ORP. Within individual divisions the Directors serve in this role. The ORP signs applicable grant documentation pertaining to surveillance, prevention, and health care on a yearly basis, and certifies appropriate handling and maintenance of security measures. Additionally, the position reviews current security and confidentiality protocols as well as assessment of evolving technology in collaboration with Washoe County's Technology Services. The ORP ensures security and confidentiality of relevant information and establishment of appropriate measures to ensure proper delivery of revised security and/or confidentiality information to the Division's users.

2. Site Security Officer (SSO)

Program Supervisors in the specific programs operate in the role of SSO for their program area. If the Program Supervisors are not available, the appropriate Program Coordinator becomes the interim SSO.

All security-related issues and/or concerns for each program shall be reported immediately to this position. This position maintains oversight and signature authority of security-related accessibility to the Division's physical site locations, as well as database(s) and IT network-related accessibility. The SSO also maintains the Division's oversight of annual staff security training completion and associated databases.

3. HIPAA Privacy and Security Staff

Overall HIPAA privacy and security activities are provided through NNPH's Administrative Health Services Division. The Administrative Health Services Officer serves as the HIPAA Privacy Officer. All HIPAA and Personal Health Information (PHI) related protocols, issues, and partnerships with any outside vendor or community partner are reviewed by the Assistant District Attorney assigned to represent NNPH.

4. Program Staff

All program staff, contractors, and volunteers are expected to maintain security and confidentiality of all PHI as a requirement of their positions and to safeguard the public's trust. As public health professionals working for a government agency or people connected to these programs, we depend upon the cooperation of the public and of the medical community to help us to accomplish our mission. Any breach of confidentiality, whether deliberate or inadvertent, could jeopardize this cooperation and seriously damage our ability to protect public health. Therefore, any breach in confidentiality would be considered grounds for termination. Protection of this trust and responsibility carries into challenging any situation that is a potential breach of security to safeguard data and PHI. These situations may include questioning colleagues and co-workers if a situation risks a potential breach of security.

## HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA) CONFIDENTIALITY AND SECURITY POLICY AND PROTOCOL (Continued)

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Employees, interns, contractors, and volunteers will not divulge in any conversations with any unauthorized person or persons including, but not limited to; friends, family, acquaintances, or the news media any confidential information obtained as a result of their affiliation with NNPH.

### 5. New Hires, Interns, Contractors, and Volunteers

Any new hires or transfers, student interns, contractors, or volunteers with NNPH will be required to read the confidentiality policy. The new employee, intern, contractor or volunteer and the designee will sign a statement of confidentiality before the person is assigned duties that expose him/her to confidential material which will be retained in the person's personnel file.

### Annual Training

All employees are required to complete HIPAA training every two years. Staff within CCHS may be required to complete additional training yearly. Documentation of successful completion of this training will be retained in the employee's personnel file.

## WORKSPACE

### 1. Access

Computer(s) containing electronic surveillance data must not be left unattended. Authorized staff have access to the common work areas; however, only appropriate staff have access to data systems and/or file rooms containing hard copy records.

### 2. Keys

Keys to doors, desks, and cabinets shall be issued only to employees who need these keys to perform their duties. The issuance of door keys is to be documented. Employees are responsible for keeping all keys, desks, and cabinets secure. Employees are not to make any unauthorized copies or loan or give their keys to any unauthorized individuals. Lost keys are to be reported to a supervisor immediately.

When employment is terminated, the departing employee will turn in all keys. Return of the keys is to be documented and kept in the departing employee's personnel file. At the discretion of the supervisor or ORP, any lock may be changed and keys for that lock reissued.

### 3. Photocopying, Printing and Photography in Work Areas

There should be no printing or copying of materials with identifying information on general use or non-secure printers or copiers. All printing/copying of such documentation shall occur within the confines of a secure office or administrative area and the print/copy job shall be removed immediately upon completion. Any unnecessary copies shall be shredded immediately, as well as originals once their use is obsolete. Only the mandatory number of copies of such information shall be

## HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA) CONFIDENTIALITY AND SECURITY POLICY AND PROTOCOL (Continued)

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copied/printed. Any extra or test copies shall be shredded immediately upon completion.

Instances requiring the use of copiers in non-secure areas may arise; however, these circumstances should be kept to an absolute minimum and the copier/printer shall not be left unattended.

Users should not take photographs within the confines of any of the NNPH's secured areas where data is visible to ensure printed or computerized information relative to PHI is not inadvertently included in such photos.

### 4. Windows

Rooms containing PHI must not be easily accessible by a window. Window access is defined as having a window that would allow easy entry into a room containing sensitive data. A window with access may be one that opens and is on the first floor of the building. If the office has windows, they must be secured.

### 5. Cleaning and Building Maintenance Access to Areas

Access to work areas by cleaning crews and other building maintenance personnel, outside of the contracted janitorial service, must be granted only during hours when personnel are available for escort. Keys to offices containing confidential data, documents, computers, hard drives, etc. are to be different from the usual office keys and only be used to open these offices.

In addition, the contracted janitorial service contract is for a high-security setting. Background checks are required. Fidelity Bonds are carried by each individual with \$5,000,000 per occurrence assigned to Washoe County.

### 6. Visitors

When it is necessary for non-employees to enter the work area, the employee who invited the visitor to his/her office is responsible for escorting and making sure that the visitor is not exposed to confidential information. Employees are to challenge anyone encountered in a work area that is unescorted and not recognized as a member of the office staff.

## DATA COLLECTION, USE, AND STORAGE

### 1. Authorized Data & Database Usage

User accounts for confidential databases are maintained by the NNPH and Washoe County's designated Business Technologist (BT) within NNPH Administrative Health Services and Washoe County Technology Services staff. BT staff works with program specific SSOs and Technology Services to ensure network security and access. All security groups and database access are controlled by a "need-to-know" basis, limiting unnecessary access to PHI.

## HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA) CONFIDENTIALITY AND SECURITY POLICY AND PROTOCOL (Continued)

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SSOs are responsible for granting or restricting access to databases. User accounts shall be deleted or deactivated immediately upon termination of employment or a change in duties and responsibilities. Additionally, the SSO is responsible for maintain an updated list of all persons (including Technology Services staff, student interns, and contractors) with authorized access to

surveillance data and include the date the person completed the annual security training (see Security Training).

Personnel outside of NNPH's Sexual Health and TB programs may gain access to confidential information only if the request for such information 1) has been authorized in writing by the ORP, 2) is deemed an expressed and justifiable public health need, 3) does not compromise or impede surveillance activities, and 4) does not negatively affect public perception of confidentiality of the surveillance system.

Employees that use databases containing client level data (PHI) must log out of the database before leaving their desk. In addition, computers that have the capability to access secure databases must be equipped with a password protected screensaver that activates after no more than ten (10) minutes of inactivity per Washoe County Tech Services security policy.

### 2. Postal/Mailing Services

#### Incoming

Incoming mail marked confidential shall only be opened by the intended recipient and SSO should ensure that policies are in place to keep mail from being opened in mail rooms or by other staff.

#### Outgoing

Confidential information should be mailed in a manner that does not allow information to be revealed without opening the envelope. The number of documents per envelope shall be kept to a minimum. All such information shall be put inside colored paper and be folded towards the inside of the documentation prior to placement inside the envelope. Envelopes shall be taped shut as added security. All such confidential information mailed from NNPH shall be marked "*Confidential*". Other methods that provide delivery tracking can also be used whenever feasible, i.e., certified mail.

When mailing confidential information, use the following procedure:

- Confidential documents are to be folded inside colored paper to eliminate any chance that the document could be read through the envelope.
- The envelope is to be stamped or in some way identified as "confidential".
- The address is to be checked to make sure it is correct.
- The envelope is to be sealed and taped shut with reinforced tape.
- Confidential mail is not to be entrusted into the care of anyone who is not an employee of Northern Nevada Public Health or Mail Room personnel of Washoe County.



3. Mail Slots/In-baskets

Confidential inter-office mail or faxes should be placed in a brown manila envelope, sealed and hand delivered. If that person is not available to receive the envelope, it may be placed in the recipients' mail slot. The envelope is not to be left in the hanging basket on an office door.

4. Telephone Exchange of Confidential Information

The exchanges of confidential information between program personnel at NNPH and with personnel within other health jurisdictions, inside of or outside of Nevada, are part of normal activities. Confidential information will not be left on voice mail unless it is specifically identified as a confidential message system.

5. Portable Devices

Laptops and other portable devices that receive or store information with personal identifiers must incorporate the use of encryption software. Information must be encrypted and stored on an external storage device or on the laptop's removable hard drive. The external storage device or hard drive containing the data must be separated from the laptop and held securely when not in use. The decryption key must not be on the laptop. Other portable devices without removable or external storage components must employ the use of encryption software that meets federal standards.

All removable or external storage devices containing personal identifiers must: (1) include only the minimum amount of information necessary to accomplish assigned tasks, (2) be encrypted or stored under lock and key when not in use, and (3) with the exception of devices used for backups, devices should be sanitized immediately following a given task. Before any device containing sensitive data is taken out of the secured area, the data must be encrypted. Methods for sanitizing a storage device must ensure that the data cannot be retrievable using Undelete or other data retrieval software. Hard disks that contain identifying information must be sanitized or destroyed before computers are labeled as excess or surplus, reassigned, or before they are sent off-site for repair.

6. E-Mail

Confidential information can be emailed via internal computer network to appropriate program staff; however, no emails to external addresses are allowed unless they are encrypted using Washoe County Technology Services specified system. Encrypted email provided to external entities must follow this policy. Staff must place #secure# into the subject line of the email to access the encryption system.

7. Fax

Confidential information may be faxed only when the following conditions are met:

- The receiving FAX machine is known to be in a secure location.
- The authorized person receiving the document is expecting the transmission and standing by to receive it.

## HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA) CONFIDENTIALITY AND SECURITY POLICY AND PROTOCOL (Continued)

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- Extra care is taken to prevent confidential information from inadvertently being transmitted to the wrong place.
- Confidential documents are not to be left unattended and are to be removed from the FAX tray immediately after transmission.

### 8. NNPH Provided Cell Phones

The following actions will help ensure confidentiality:

- When the cell phone is not in use, it will be stored in a staff person's desk.
- The phone will be turned off and locked in a desk or file cabinet at the end of each day.
- Any private text communications will be deleted once the business with the client has been completed.
- Texts will not be backed up to another system.

### 9. Online Client Searches

Employing online searches for client location information can be used after other routine sources of receiving information have been exhausted. A minimum amount of information should be used to conduct the searches to limit the amount of PHI that is kept in search archives. In addition, social security numbers should not be used for searches, although the social security number may be revealed in the search output provided by the database.

### 10. Interdivisional Data Sharing

Identifying information from Division databases may be shared/matched only after review and approval by the ORP. The ORP will limit such activities to other systems that demonstrate a justifiable need for the data or provide enhanced information for public health planning. The decision to allow such activity will also be weighed against the benefits and risks of allowing access to specific data and, as necessary, upon certification that the level of security established by the other registry is at least equivalent to the standards described in this document. The final decision regarding the sharing of registry data and data matches remains the sole discretion and responsibility of the ORP.

### 11. Data Release Procedures

To ensure patient confidentiality, the Division will ensure data release procedures incorporate numerator and denominator rules, as appropriate, in a consistent manner that provides for reasonable public health data access.

De-identification of client level data is the preferred course before releasing such data for analysis, research, or other purposes, if approved by the SSO or ORP. Access to any surveillance information containing names, or multiple variables considered as PHI by HIPAA, for research purposes (that is, for other than routine surveillance purposes) must be contingent on a well demonstrated need, Institutional Review Board (IRB) approval, if necessary, receipt of written request and approval by the SSO and ORP. All such requests must be submitted in writing to the SSO who will assess such data requests, based on public health relevance, business need and associated data confidentiality assurances.

## HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA) CONFIDENTIALITY AND SECURITY POLICY AND PROTOCOL (Continued)

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Access to surveillance data or information without names for research purposes beyond routine surveillance may still require IRB approval.

Prior to granting access to the data, the requestor must sign a statement certifying that he or she will comply with the security and confidentiality standards of NNPH. Signing this statement indicates that the requestor (1) understands the penalties for unauthorized disclosure, (2) assures that the data will be stored in a secured area, (3) agrees to sanitize or destroy any files, diskettes, or other storage devices that contained the data set when the research project is completed and (4) agrees to provide written notice of data destruction.

Aggregate surveillance data are available to the public. The Program will confer with NNPH's Division of Epidemiology and Public Health Preparedness when data suppression may be utilized due to small data sets.

The privacy of medical records is protected under NRS. 449.720. Additional protections for communicable disease records are found in NRS 441A.220, NRS 441A.230, NAC 441A.300 and NAC 441A.305.

### 12. Non-Public Health Access

Requests to access surveillance information or data for non-public health purposes, such as litigation, discovery, or court order, must be reviewed by the ORP with the appropriate program area's legal counsel. After that approval, access to the data shall be granted only to the extent required by law. All subpoenas and other legal papers requesting the disclosure of confidential information served to any work unit within the programs shall be referred to the ORP for consultation with the assigned Washoe County District Attorney.

### 13. Data Transfers

Data transfers must be encrypted when any moderately or highly sensitive files, any moderately or highly critical information, or any limited access/proprietary information is being transmitted either electronically or physically. Such data should be sent via the Secure Data Network (SDN) or other approved data network.

### 14. Security of Records Taken Offsite

Except when necessary for the purposes of field work (such as detention center visits, off-site testing, disease investigation activities) all confidential documents, computer hardware and software containing confidential information are not to be removed from the premises or the immediate control of NNPH. All confidential files are to be kept locked and secure after hours or whenever the office is closed.

Information taken from NNPH for fieldwork must be limited and kept secure. When it is necessary to carry confidential documents in the field, they are to be kept secure at all times in a locked briefcase in a locked car or preferably in a locked trunk. Surveillance work material should be returned to the office and secured at the end of the workday.

## HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA) CONFIDENTIALITY AND SECURITY POLICY AND PROTOCOL (Continued)

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The SSO, Program Supervisor, or ORP may grant exceptions if storage security can be maintained by the staff person.

When identifying information is taken from the secured area and included online lists, supporting notes, or other hard-copy format, these documents must contain only the minimum amount of information necessary for completing a given task and, where possible, must be coded to disguise any term that could easily be associated with disease status.

Before taking any storage media containing sensitive data out of a secured area, the data must be encrypted. Methods for sanitizing storage media must ensure that the data cannot be retrievable using undelete or other data retrieval software.

### 15. Shredding of Documents

As appropriate, confidential documents are to be shredded by a crosscut shredder or locked shredder before discarded in the trash.

## RECORD RETENTION

All confidential records are stored within secured file rooms or cabinets accessible only by authorized users. Records must be kept according to approved retention guidance and labeled, boxed, and stored in an undisclosed secure location (Refer to NNPH's Record Retention Policy). Only authorized users may have access to document storage locations for review, retrieval, and destruction of such records.

Records meeting the requirement for destruction shall be shredded onsite by authorized users only. Bulk record destruction is provided by Washoe County Records Management staff at the designated, secure Washoe County records storage facility. Records of such activities shall be maintained by the Administrative Health Services Officer and Washoe County Community Services Department, with the SSO having access to the destruction records.

## BREACHES OF CONFIDENTIALITY

Any employee who becomes aware of a breach of confidentiality or a potential breach of confidentiality will immediately take appropriate corrective action. The person directly responsible for the security of the information (SSO), Program Supervisor, and the ORP will be notified. An immediate investigation will follow.

If a breach is determined to have resulted in the release of private information about one or more individuals, it must be reported to the Administrative Health Services Officer.

## NONDISCLOSURE STATEMENT FOR EMPLOYEES, INTERNS, CONTRACTORS, AND VOLUNTEERS

Employees are asked to sign a Nondisclosure Statement. The signed Nondisclosure Statement will be kept in the employee's personnel file.

**Updated 5/23/24**

### **DESCRIPTION:**

Northern Nevada Public Health is a department within Washoe County and in accordance with Section 6 C, D, and E. of the Interlocal Agreement establishing Northern Nevada Public Health– follows all Washoe County Human Resources policies and procedures.

- Information on Job Opportunities, Job Specifications and Salaries, Recruitment and Selection Process, Governance, Diversity and Student Initiatives can be found at: <https://www.washoecounty.us/humanresources/index.php> under **“Careers”**
- Information on Health Benefits, Retirement Planning, Employee Assistance Program, Supplemental Benefits, Continuing Education, Other Benefits, Washoe County Retirees (History of the Retiree Program), Worker’s Compensation, Telemedicine and Special Notices can be found at: <https://www.washoecounty.us/humanresources/index.php> under **“Benefits”**
- Information on Labor Relations and Associations can be found at: <https://www.washoecounty.us/humanresources/index.php> under **“Labor Relations”**
- Information on Policies & Guidelines and Forms is located at: <https://www.washoecounty.us/humanresources/index.php> under **“Policies”**
- Information on Manager’s Toolkits, EPS Programs, New Employee info and the Learning Center can be found at: <https://www.washoecounty.us/humanresources/index.php> under **“Learning and Development”**
- The Human Resources Mission Statement, Merit Personnel System, Governance and the Washoe County Remuneration Study are located at: <https://www.washoecounty.us/humanresources/index.php> under **“About HR”**
- In the section under “About HR” there is a FAQ tab that provides information to staff on many of the Frequently Asked Questions. <https://www.washoecounty.us/humanresources/index.php>

Added 9/11/19

## 21 - INCOMPATIBLE ACTIVITIES

**DESCRIPTION:**        **Washoe County Code, Personnel Handbook  
Sections 5.334 through 5.339 (January 2009)**

5.334 Full-time service required: Each employee shall, during his hours of duty as an employee and subject to such other laws, rules or regulations as pertain thereto, devote his full-time attention and efforts to County employment. A full-time employee may not engage in additional part-time work for the County.

[§1, Ord. No. 729; A Ord. No. 828]

5.335 Incompatible activities: Prohibition. Employees shall not engage in any employment, activity or enterprise which has been determined to be inconsistent, incompatible or in conflict with their duties as Washoe County officers and employees, or with the duties, functions or responsibilities of their appointing authorities or departments by which they are employed. [§158, Ord. No. 213]

5.337 Incompatible activities: Specific prohibitions. Employees shall not engage in any employment, activity or enterprise which is inconsistent, incompatible or in conflict with their duties as Washoe County officers and employees, or with the duties, functions or responsibilities of their appointing authorities or departments by which they are employed, including but not limited to:

1. Except for the limited use authorized in section 5.340, the use for private gain or advantage of the County's time, facilities, equipment and supplies.
2. The use for private gain or advantage of a badge, uniform, prestige or influence of their county positions of employment.
3. The receipt or acceptance by employees of any money or other consideration from anyone other than the County for the performance of an act which the employees would be required or expected to render in the regular course of hours of their County employment or as a part of their duties as employees.
4. The performance of an act other than their capacity as employees, which act may later be subject, directly or indirectly, to control, inspection, review, audit, or enforcement by such employees or the department by which they are employed.

[§158, Ord. No. 213; A Ord. Nos. 492, 1053]

5.339 Incompatible activities: Designation. Each appointing authority may determine and describe in writing additional specific activities which, for employees under his jurisdiction, will be considered inconsistent, incompatible, or in conflict with their duties as employees, and shall provide a copy to each such employee.

[§159, Ord. No. 213; A Ord. No. 492]

### **Determination of incompatible activities is made by the District Health Officer.**

Northern Nevada Public Health employees who take or teach a class, which is not required as part of their job duties and which requires their absence during normally scheduled work hours shall seek advance written approval from their Supervisor, Division Director and the District Health Officer and are required to cover the absence with annual or personal leave, comp time, or a flex schedule.

Employees who are taking or teaching a class required by their job do not need to utilize personal leave or flex schedules but are required to seek advanced approval from their Supervisor, and Division Director.

Employees who are required to take classes to maintain licensure of any kind are required to offset or use leave unless law, ordinance or contract requires otherwise, but are still required to seek advanced written approval from their supervisor and Division Director and the District Health Officer.

In all cases, management (Supervisor, Division Director and/or District Health Officer) has the sole discretion to approve or deny the request and whether the employee will be required to use leave or flex time based on the needs of the Department, the impacts on the department, employee scheduling, the availability of leave, employee work performance, and any other factors deemed relevant.

The request must be in written or e-mail form. In order to be considered, the request must be within the following guidelines:

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## INCOMPATIBLE ACTIVITIES (Continued)

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public health emergencies and work outside of Public Health cannot interfere with the employee's responsibilities during a public health emergency.

Any employee who wishes to work outside of Northern Nevada Public Health must have prior approval from the District Health Officer before doing so.

Employees are to submit a request for permission to work outside of Public Health to the District Health Officer through their Supervisor and Division Director.

The letter or memo should state:

1. Employee's name, position, division (within Northern Nevada Public Health) and program, along with a list of their primary duties within Public Health.
2. Name of company, job title, list of duties and hours for the position desired outside of Public Health.
3. Dates and hours of proposed 2nd job (if available) Example: Seasonal (weekends Oct – Dec) or Summer May – Aug (lifeguard at water park 6-9p.m).
4. Employee must specify that the 2nd job will not impact their availability or overall ability to perform their duties at Northern Nevada Public Health in anyway.

As indicated above – employees shall not engage in any employment activities or enterprise which may be determined to be inconsistent, incompatible or in conflict with their duties as a Washoe County officer or employee.

An employee can also not accept money or other consideration for the performance of an act which the employee would be required or expected to render in the regular course of hours of their employment or as a part of their duties as a Public Health employee.

***Updated 7/10/19***



### **DESCRIPTION:**

**NRS 6.190 Jury Duty Item #4** – Each summons to appear for jury duty must be accompanied by a notice to the employer of the person summoned. The notice must inform the employer that the person has been summoned for jury duty and must include a copy of the provisions of subsections 1, 2 and 3. **The person summoned, if the person is employed, shall give the notice to his or her employer at least 3 days before the person is to appear for jury duty.**

**Washoe County Personnel Handbook 5.269 Leave of Absence Item #4** – A leave of absence with pay must be granted to any employee who is required by law to appear or serve as a witness or juror in a case before a grand Jury or tribunal of the United States Government, the State or Nevada or a political subdivision thereof, or when subpoenaed to give a deposition that is related to his employment. The employee must be paid his regular salary while on leave of absence but must remit to his department head for deposit in the county general fund, all fees which he receives as a witness, juror or when subpoenaed to give a deposition on job-related matters. The Employee may retain amounts received as reimbursement for mileage and per diem. Court leave must not be charged against the employee's vacation credit.

All Public Health employees must notify their supervisor of their receipt of a jury summons and submit a copy of the card/letter or document that indicates what date the employee is to report to jury duty to their supervisor at least 3 days prior to the date they are to report for jury duty.

*Added 5/27/15*

### **DESCRIPTION:**

All staff are to communicate and get prior approval from their supervisor for any time they will be out of the office (meetings, trainings, seminars, appointments, vacation, use of Comp Leave or Personal Leave, or extended sick leave). Employees are to utilize the leave request method established by their supervisor (emails, team message, written leave slip, etc.). Employees should verify with their supervisor what the preferred out of office or leave request method is for their program.

This allows supervisors the ability to ensure requested leave is documented, so they can monitor staffing levels, ensure the leave does not interfere with business needs and/or arrange for another employee to provide coverage if needed.

If calling in sick or need to be out for an emergency, staff should notify their supervisor prior to the start of their shift. If the employee is unable to make the call, they should have a family member or friend notify the supervisor of the situation prior to their shift if possible.

Staff are not allowed to use leave earned in the same pay period they earn it. All leave earned must be processed through a full payroll cycle before it can be used. Leave taken is withdrawn from the employees leave bank before any leave earned is added to their leave bank for that pay period.

Supervisors are not to approve leave requests for use of Vacation time, Comp Leave or Personal leave unless the employee has adequate leave time accumulated in their leave bank prior to submitting the request for the time off. Employees are not allowed to request time off based on the time they anticipate earning between when they request the leave and when they plan to take the time off. Example: Employee plans a weeks' vacation for Sept and submits their leave request in June. At the time they submit the leave request they only have 24 hrs of vacation in their leave bank - this request would be denied. If an employee has leave approved (they had adequate time on the books when they requested the leave) but the employee used some of their leave and now they do not have adequate leave to cover the approved time off - the leave can be cancelled, and the department is **not** responsible for any cost the employee incurs due to the cancelled vacation. It is the employee's responsibility to ensure they have adequate leave time available for all leave they request.

### ***Breaks/Meal Period***

All employees shall be allowed at least a one-half (1/2) hour meal period scheduled approximately in the middle of the employee's workday. This period of time shall be considered the employee's time and not hours worked.

## LEAVE REQUEST - BREAKS (Continued)

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All employees shall be granted two fifteen (15) minute rest periods during the shift, which shall NOT be combined. Such breaks shall not be taken within one (1) hours of the employees starting time, quitting time, or meal breaks, and may not be accumulated or used to supplement meal breaks, arrive at work late or leave work early.

The 15-minute rest periods shall be taken during each four-hour shift, without loss of pay and the employee shall not be required to make up such time.

Employees who are required to work four (4) or more hours beyond their regular shift shall be granted a fifteen (15) minute rest period.

***NEW 5/15/23***

### **DESCRIPTION:**

Pursuant to Washoe County Personnel Handbook 5.269, the District Health Officer may grant a leave of absence (leave without pay) for 30 working days or less, per employee, per calendar year. Leave without pay taken pursuant to the provisions of the Family and Medical Leave Act (described in Washoe County Personnel Handbook-5.270) is considered separate.

Leave without pay used to create an alternate/adjusted schedule will only be granted in conjunction with an approved alternate schedule request.

Employees must submit an “Application for Leave/Overtime Authorization” form prior to the date of use. The form shall be submitted to Northern Nevada Public Health’s HR Representative, through their Supervisor and Division Director.

Northern Nevada Public Health’s HR Representative will confirm the employee’s eligibility and forward the form to the District Health Officer for final approval.

*Updated 8/9/2023*

### **DESCRIPTION:**

It is a professional responsibility and a legal requirement for any employee whose position requires an active license, certificate, or registration to always maintain a current one on file. This includes maintaining a valid driver's license. All positions that require the employee to drive as part of their job duties (or to drive to a meeting, trainings etc.) must maintain a valid driver's license and have it in their possession while driving.

All personnel whose position requires a license, certificate, or registration will provide a copy to their supervisor on or before the expiration date of the previous one. The Supervisor will forward a copy of the license, certificate, or registration to Northern Nevada Public Health (NNPH) HR Representative for tracking purposes.

If an employee fails to provide a copy of his or her license, certificate, or registration they will be removed from the work schedule and unable to return until they have provided a copy of their current active license, certificate, or registration. Failure to maintain a required license, certificate, or registration may result in disciplinary action up to and including termination.

**Example:** In accordance with the Washoe County Job Specifications the following positions require a license, certificate or registration:

- District Health Officer (if physician)
- All Nursing positions (RN, LPN, APRN, Nursing Supervisor, etc.) Community Health Nutritionist
- Environmental Health Specialist (all levels)
- Positions working in the Lab (certification as an Office Lab Assist) EPI Center Director (if practicing physician)
- Licensed Engineer (all levels)
- Any position that may need to drive to offsite locations, to perform inspections, attend trainings, or while performing any aspect of their job duties

### **REFERENCES**

Washoe County Job Specifications  
Nevada Nurse Practice Act  
WCNA Contract

***Update 4/15/21***

## 26 - LONG DISTANCE TELEPHONE CALLS

### **DESCRIPTION:**

Long-distance telephone calls shall be for Northern Nevada Public Health business only. All long-distance telephone calls should be made on the employee's assigned telephone line.

Collect calls to Northern Nevada Public Health (NNPH) are acceptable from employees on travel status.

*Approved prior to 2012*

### **DESCRIPTION:      Media Contact Procedure**

Employees of Northern Nevada Public Health (NNPH) are required to adhere to all Washoe County Codes and Policies, and the NNPH Media Policy which governs traditional and nontraditional media.

The NNPH Media Policy applies to emergency, traditional, non-traditional, paid, non-paid, and earned media encounters for the purpose of public information and education, public relations, marketing, media relations, and the dissemination of public health information to maximize the NNPH ability to successfully manage factors such as the content, consistency, timing, and frequency of messaging.

### **DEFINITIONS:**

#### **Emergency:**

Emergency Media refers to any media contact needed as a result of unexpected, serious, public health or agency occurrences or situations urgently requiring prompt action.

#### **Traditional Media (Time-honored media forms)**

Traditional Media refers to newspapers, magazines, television, radio, billboards, mass transit bus signs, bus shelters, movie advertising, and direct mail.

#### **Non-traditional Media**

Non-traditional Media refers to social media and social media sites including, but not limited to, blogs, mobile applications, Twitter, Facebook, YouTube, Flickr, LinkedIn, MySpace, etc.

#### **Paid Media Advertising (Media placement gained by payment)**

Paid Media Advertising is any form of communication that is gained by payment. Paid Media Advertising may include traditional and non-traditional media.

#### **Non-Paid Media**

##### **Earned Media (Acquired as a result of previous effort, action, or payment)**

Earned Media refers to favorable publicity gained through previous promotional efforts and may include publicity gained through editorial influence.

#### **Public Service Announcements (Without charge)**

Public Service Announcements, also known as PSAs, are messages in the public interest disseminated by the media without charge, with the objective of raising awareness and/or changing public attitudes and behavior towards a social issue.

### **Proactive Encounters**

Proactive communication refers to any communication initiated with the media by the NNPH and may include, but is not limited to:

- News releases (these provide information to media outlets)
- Media advisories (these are often used in conjunction with a news release about an event or activity, such as the flu immunization kick-off event or a press conference, and they serve as an invitation to media representatives to attend)
- Advertising campaigns
- Public service announcements
- Community calendar items
- Announcements/acknowledgements (e.g., of employees, partnerships, etc.)
- Phone calls and/or e-mails to pitch a story.
- Website and social media postings
- Press conferences and other events for which media attention is determined to be beneficial.

### **Reactive Encounters**

Reactive communication pertains to information provided in response to inquiries or social media postings that can be received from a variety of sources, including:

- Reporters
- Writers, including free-lancers.
- News anchors
- Producers
- Editors
- Assignment editors/managers
- News directors
- Still/video photographers
- Websites
- Bloggers

Reactive responses can be provided through a variety of mechanisms, including:

- News releases - Appendix D-4- Sample News Release.
- Media advisories - Appendix D-5 – Sample Media Advisory.



- Written media statements, position papers, Letters to the Editor, opinion pieces
- Providing comments – in person, over the phone, via email
- Participation in interviews – in person, over the phone, via email
- Participation in panel discussions
- Press conferences, briefings, NNPH -coordinated special events.
- Social media comments, including blogs.
- Any interactions which can be attributed to NNPH and documented by media representatives via writing, audio/video/still recording or live broadcast.

### **ADMINISTRATIVE PROCEDURES:**

#### **1) General**

- a) **All communication with the media shall be coordinated as follows:**
  - i) **Proactive** communication on behalf of NNPH must be approved by Division management and the NNPH Communications Manager prior to its initiation/distribution. Division Directors or Program Supervisors may authorize staff to make routine website and social media content postings without Communications Manager's approval, however, NNPH website configuration or layout and design of the Home Page must be approved by the Communication Manager or the District Health Officer prior to initiation.
  - ii) **Reactive** communication messages must be approved by the Communications Manager, prior to responding, with any substantive comment and, before a commitment to respond is made. If the Communications Manager is not available, then Division Director or District Health Officer should be contacted for direction.
- b) Every effort will be made to respond to media inquiries within a reasonable time frame – usually within 30 – 60 minutes after receipt of inquiry depending upon ability to validate inquiry and prepare the appropriate response and/or spokesperson.
- c) Every effort will be made to post or distribute approved press releases, media advisories, blogs, and social media posts through the Washoe County website and appropriate social media channels within a reasonable timeframe, particularly if it is in response to a public health emergency, crisis or agency occurrence, usually within 1 – 2 hours following approval. \*\*  
In non-emergency events every effort will be made by the Communications Manager to respond to a request to approve a communication document within 24 hours.  
In the absence of the Communications Manager or designee, the Northern Nevada Public Health

Business Technologist or NNPH staff trained to access the County's website Content Management System (Cascade) may be required to distribute/post such information.

- d) The Communications Manager will help determine if, and/or ensure that:
  - i) NNPH is the appropriate agency to initiate communication with, or respond to, a media inquiry.
  - ii) Key NNPH messages are identified.
  - iii) Message development is consistent with similar, previous, and forthcoming NNPH messages and inter-divisional efforts and, if not, changes are appropriately explained.
  - iv) NNPH messages are coordinated with or approved by impacted NNPH divisions, other involved agencies, organizations, or departments as needed prior to being provided to the media.
  - v) The most appropriate NNPH subject matter expert serves as the spokesperson for the identified topic or issue, depending upon availability.
  - vi) Language interpreters are appropriate, needed and available.
  - vii) NNPH is in compliance with all federal and state patient/client privacy regulations (e.g., HIPAA)
  - viii) The media deadline can be met.
  - ix) The spokesperson and media representative both have received appropriate preparation.
  - x) NNPH employees and clients are protected from unwarranted and/or inappropriate contact from the media.
- e) Whenever possible the Communications Manager or designee will distribute press releases, media advisories, blogs, and social media posts through the Washoe County website and appropriate social media channels. In the absence of the Communications Manager and/or in times when emergency media contacts are required to respond to a public health crisis or agency occurrence, Northern Nevada Public Health Business Technologist or NNPH staff trained to access the County's website Content Management System (Cascade) may be required to distribute/post such information.
- f) To ensure compliance with federal and state patient/client privacy regulations, any WCHD client/patient participating in an interview, video or still photo shoot must sign a consent form prior to the interview, video or photo shoot taking place. See Appendix D-6- Consent and Release Form (available on the NNPH intranet).
- g) The Associated Press (AP) Stylebook is the primary reference tool to be used when developing and editing written communication for the media.

## **2) Media Access**

- a) When interacting with NNPH employees for the purpose of interviews, news gathering or news-related photography or videography (excluding events open to the public) media representatives shall be escorted by the Communications Manager or a designated staff member who will facilitate the interview, news gathering and/or recording session.
- b) The Communications Manager shall attempt to attend all in-person and phone interviews. The Communications Manager shall review written responses.

## **3) Documentation of Media Encounters**

### **a) Proactive**

To ensure awareness of media encounters and potentially widespread news coverage, a copy of appropriate proactive media communication may be distributed by the Communications Manager to:

- i. All County employees
- ii. All NNPH employees
- iii. District Board of Health members
- iv. Washoe County, Reno, Sparks, Nevada State government officials
- v. Other appropriate individuals outside of NNPH with vested interest in the topic and/or with whom subsequent communication needs to be coordinated.

### **b) Reactive**

Any NNPH representative, who responds to a media inquiry, conducts an interview, writes a story to be published in a newspaper, or writes a blog published on the internet must notify the NNPH Communications Manager prior to starting the response. The entry must be reviewed and approved by NNPH Communications Manager prior to publishing.

These media contacts are reported automatically to:

- i. Interviewee/spokesperson
- ii. District Health Officer or Deputy Health Officer
- iii. Administrative Assistant to the District Health Officer
- iv. NNPH Division Directors Division
- v. Administrative Secretary or Admin Assistant (to inform support staff, who might receive related calls)
- vi. NNPH Communications Manager and designees

- vii. Supervisor
- viii. Administrative Health Services Administrative Assistant I
- ix. District Board of Health Members

Once received, the Communications Manager or person completing the form shall forward it separately via email to any NNPH employee referred to in the encounter and other appropriate individuals within and outside of NNPH (e.g., County Communications Manager, County PIO, and state-level PIOs) who have a vested interest in the topic and/or with whom subsequent communication needs to be coordinated.

#### **4) Monitoring Media Coverage**

- a) Whenever possible, coverage resulting from proactive and reactive media contact should be monitored by the Communications Manager for things such as breadth and depth of coverage, positioning of the story, need to modify subsequent messaging, and accuracy.
- b) Whenever appropriate, coverage of the story may be provided for feedback sessions, follow-up-training, and archival purposes, and distributed via hard or electronic copy as needed to:
  - i. Interviewee/spokesperson
  - ii. District Health Officer
  - iii. NNPH Division Directors
  - iv. District Board of Health Members
  - v. Public Health-Communications Manager or designees
  - vi. Any Public Health employee quoted and/or listed as part of the encounter.
  - vii. Other appropriate individuals within and outside of NNPH (e.g., County Communications Manager and PIO, state-level PIOs) who have a vested interest in the topic and/or with whom subsequent communication needs to be coordinated.

*\*\* In some emergency cases it may be necessary to coordinate release of information after regular business hours and in conjunction with dissemination of information using communication systems of partner agencies, such as the State of Nevada Department of Emergency Management, the Nevada Department of Health and Human Services Division of Public and Behavioral Health, the Washoe County Regional Emergency Operations Center, and the Washoe County School District.*

***Proposed Update 5/11/23***

### **DESCRIPTION:**

In an effort to reduce the serious health hazards caused by exposure to secondhand smoke, all meetings and conferences hosted or sponsored by Northern Nevada Public Health shall be held in a 100% smoke-free facility. Exceptions to this Smoke Free policy can only be granted by the District Health Officer (DHO).

Policy approved by District Board of Health 1/24/13.

*Updated 4/10/15*

### **DESCRIPTION:**

If you are conducting office business, fieldwork, inspections, attending or conducting meetings, seminars, or conferences, where you are representing Northern Nevada Public Health (NNPH) or Washoe County in an official capacity, you are expected to represent the office in a clean, professional manner and dress appropriately for your job function. All staff must wear attire that is consistent with the personal appearance policy as well as required personal protective clothing and equipment and meet customer facility dress standards.

### **Slacks, Pants, Shorts, and Skorts**

Slacks that are similar to Dockers and other makers of cotton or synthetic material pants, wool pants, dressy capris, jeans that do not have holes or are not worn-out, nice-looking dress synthetic pants, and leggings and any spandex or other form-fitting pants that are covered to mid-thigh by a sweater/blouse/shirt or dress are acceptable. Inappropriate slacks or pants include sweatpants and exercise pants. When forecasted temperatures are over 74 degrees Fahrenheit: shorts or skorts are allowed in office environment except when meeting with external customers or other Government agencies; and are allowed during inspections or field work; and when appropriate to wear they don't ride halfway up the thigh while sitting or standing. At no time are shorts or skorts allowed during high-risk duties, such as inspecting industrial facilities or visiting construction sites.

### **Skirts, Dresses, and Skirted Suits**

Casual dresses and skirts are acceptable so long as they don't ride halfway up the thigh while sitting or standing. Mini-skirts, dresses with less than two inches of material on the shoulder (e.g. some sun dresses), dresses that have an unobstructed view of undergarments or cleavage, and beach dresses are inappropriate for the office, fieldwork and inspections.

### **Shirts, Tops, Blouses, Jackets and Lab Coats**

Dress shirts, shell tops or shell blouses, sweaters, polo shirts, turtlenecks, suit jackets, sport jackets, lab coats, and NNPH issued clothing are acceptable for work. Shirts, tops, blouses etc. all need to be of appropriate length to adequately cover the abdominal area.

### **Medical Scrubs**

Scrubs are acceptable attire for Clinic positions only; they are not acceptable as office attire.

### **Inappropriate attire for work includes:**

1. Any style of shirt with less than two inches of material on the shoulders.
2. Midriff tops.

**Inappropriate attire for work includes:**

3. Shirts that reveal cleavage and undergarments.
4. Sheer shirts without undergarments covered.
5. Shirts with words, terms, logos (larger than one-inch square), pictures, cartoons, or slogans; with the exception of NNPH and public health logos.
6. Shirts with any potentially offensive words or designs.
7. Tops with a bare back.
8. Sweatshirts.
9. T-shirts unless worn under another blouse, shirt, jacket, dress (note that t-shirts are allowed while doing field work that does not require interactions with the public, but must not have logos, slogans, cartoons, pictures etc.); and,
10. Apparel with team/sports logos, the only exception is UNR Wolf Pack clothing can be worn on Fridays or any “show your UNR support” day approved by the District Health Officer.
11. Any item with political, racial, or individual organization logo, pictures, cartoons, slogans, symbol or statements of any kind (except Public Health, Washoe County, UNR, or other sanctioned public health partners).

**Shoes and Footwear**

Athletic or walking shoes, loafers, clogs, sneakers, boots, flats, dress heels, sandals and leather deck-type shoes are acceptable for work. Flip-flops and slippers are inappropriate for the office. Closed toe and closed heel shoes are required on inspections, field work and other high-risk duties.

**Jewelry, Tattoos, Perfume, Cologne, Hats and Head Coverings**

Jewelry should be in good taste. Tattoos and/or body piercings that are offensive or culturally insensitive should be covered. Hats and head coverings are not allowed unless required for work, religious or cultural purposes, or medical reasons. Hats may be worn outside for sun protection as long as they do not violate other portions of this policy (offensive words, logos etc.).

Due to allergies - perfumes, cologne, scented lotions, scented deodorants, and air fresheners should be used sparingly (**very minimum amount**) or not at all. Unscented lotions and deodorants are preferable.

Management reserves the right to determine the appropriateness of clothing. If you question the suitability of an item of clothing, do not wear it until you clear it with your supervisor. If an employee is determined to be wearing inappropriate clothing, management will take action on a case-by-case basis.

***Updated 7/21/23***

### **DESCRIPTION:**

Employees are limited on the personal use of County or personal electric or electronic devices during work time. Personal business should be conducted on non-work hours. Employees may use their personal devices without limitations during their lunch or break times.

Due to the potential hazards and the increase in power usage, employees are not allowed to utilize space heaters, fans, or other electronic devices not specifically approved or provided by the County or Public Health.

The use of laptops, note pads, notebooks, I-Pad, phones, and other electronic devices (whether personal or County owned), for non-business purposes during business hours shall be in compliance with the Washoe County internet and Intranet Acceptable Use Policy.

According to the Washoe County Internet and Intranet Acceptable Use

Guidelines updated in 2023. The original version was approved by the Board of County Commissioners and amended by ordinance #1343 effective July 22, 2002; and Washoe County Personnel Handbook section 5.340:

<https://www.washoecounty.gov/humanresources/files/hrfiles/Internet-and-Intranet-Acceptable-Use-Guidelines.pdf> can also see Washoe County Personnel Handbook (5-11-23 version) –5.025 – 5.341

Washoe County is not responsible for the loss or damage of any personal property or equipment. Employees who choose to bring personal property or equipment onto the County property or in County vehicles do so at their own risk.

***Update 5/12/23***



### **DESCRIPTION:**

Each employee is responsible for reporting any changes of record (e.g., address, telephone number, marital status, insurance beneficiary, military status, etc.) to the Northern Nevada Public Health's HR Representative to keep all personnel records current.

Each employee shall be requested by their division's Administrative Liaison to validate/update contact information on a quarterly basis to maintain the department's emergency contact list.

*Approved prior to 2012*

### **DESCRIPTION:**

The appropriate program or division code will be used when making copies.

Bulk Copies - The Washoe County Print In Plant is no longer printing in-house. Instead, DigiComm has been realigned to provide print management services on behalf of Washoe County and serves as the liaison between our Washoe County departments and outside professional print vendors to provide the best possible outcomes for our departments, while providing due diligence and responsible government practices to our taxpaying residents. Departmental staff route all print requests exclusively through Digital Communications via electronic print requisition(s).-If you are requesting a quote or modifying a current requisition, email Digital Communications. Should you have any questions, please contact Digital Communications.

Copies being made for customers who are waiting should take priority over all other copy jobs.

Use of copy machines, computers and other equipment falls under the **County Code 5.340 Ownership of county computer system; de minimis use of county property, equipment or other county facilities authorized; restrictions and prohibitions.** See full County Code at <http://www.washoecounty.us/clerks/cco/code/Chapter005.pdf>

### **5.340 Item 2-4**

2. The board of county commissioners authorizes the limited use for personal purposes by county officers and employees of county property, equipment or other facility if:

- (a) The use does not interfere with the performance of public duties including duties of both the officer/employee and other county staff or interfere with the provision of county services.
- (b) The cost or value related to the use is nominal; and
- (c) The use does not create the appearance of impropriety.

This section does not prohibit the use of mailing lists, computer data or other information lawfully obtained from a county agency which is available to members of the general public for nongovernmental purposes. Further, this section does not prohibit the use of telephones and electronic mail (e-mail) if there is not a special charge for that use. If there is a special charge for that use, then the use is not prohibited but the officer or employee must reimburse the cost or pay the charge to the county in accordance with subsection 3 below, unless the use is made necessary because the officer or employee is attending to county business.

## PHOTOCOPYING (Continued)

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3. Except as provided in subsection 2 above, if the county incurs a cost as a result of a use that is authorized hereunder, or if the county would ordinarily charge a member of the general public for the use, the county officer or employee shall reimburse the cost or pay the charge to the county.

4. Except as otherwise provided herein, a county officer or employee shall not use any county time, property, equipment, or other facility to benefit that officer's or employee's private business interests. This prohibition includes but is not limited to selling products for private business, solicitation related to private business or personal interests, mass mailings, keeping private business accounts, or similar uses.

Also see Washoe County Internet and Intranet Acceptable Use Guidelines.

<https://www.washoecounty.gov/humanresources/files/hrfiles/Internet-and-Intranet-Acceptable-Use-Guidelines.pdf>

*Update 5/12/23*

### ***DESCRIPTION:***

Northern Nevada Public Health follows the Washoe County Public Records Request Policy.

#### **1. Purpose**

This Washoe County public-records-request policy is intended to establish a process for responding to public records requests that are made to Washoe County governmental agencies.

#### **2. Records Official**

Each agency must appoint a person (a “records official”) to oversee the agency’s response to public records requests. An agency shall immediately forward to its records official or the official’s designee all public records requests that the agency receives. On receiving the public records request, the records official or designee shall determine the timeline required to promptly respond to the request and the response’s content. In handling the records request, the records official shall follow the procedure in this policy’s section 4.

#### **3. What is a Public Record?**

Under Nevada law, a governmental entity’s books and records are considered public, unless declared by law to be confidential. A governmental entity’s books and records include information and other documents created or accumulated in the course of conducting public business that document the activities and business of public employees.

A public record is generally a documentary “record” and not simply a request for information. If a record does not already exist, there is generally no duty to create a record in response to a public records request. But when an agency has a computer program that can readily compile the requested information, the agency is not excused from its duty to produce and disclose that information.

A record is not available to the public if it is declared by law to be confidential. A record may also be confidential if it is privileged or if a common-law balancing-of-the-interests test shows that the public interest in disclosure is outweighed by other interests such as privacy, the ability of the agency to perform its function, or other substantial concerns. However, there is a strong presumption in favor of disclosure, so exemption, exception, or balancing tests must be narrowly construed.

**4. Procedures**

- a. All requests for public records should be immediately forwarded to the agency's records official or the official's designee who shall ensure that the request is logged in the agency's records request log.
  - i. The records official or designee shall acknowledge receipt of the request in writing to the requester. If the requestor submits the request by e-mail, this acknowledgement also may be sent by e-mail.
  - ii. The records official or designee shall forward the request to the employee who may best be able to respond or where the records are maintained.
- b. The records official shall ensure that, within five business days from the date the agency receives the request, one of the following occurs:
  - i. the requester inspects the record or receives copies of the record, as requested.
  - ii. if the agency does not have legal custody of the record, written notice of that fact and the name and address of the governmental entity that has legal custody of the record, if known, is provided to the requester.
  - iii. if the record has been destroyed under the agency's records- retention schedule, written notice of that fact is provided to the requester.
  - iv. if the agency cannot provide the record by the end of the fifth business day after the request is received, written notice of that fact and a date and time on which the record will be available for the person to inspect, or copy is provided to the requester; or
  - v. if, when acknowledging receipt of the records request under this policy's section 4(a)(i), the records official knows that the agency cannot provide the record within five business days of receiving the request, the acknowledgement shall so state and provide the date and time on which the records will be available for the requestor's copying or inspection.

**5. Fees**

An agency may charge a fee for providing a copy of a public record. However, the fee is limited as described herein and must not exceed the actual cost to the agency to provide the copy of the public record unless a specific statute or regulation sets a fee

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that the governmental entity must charge for the copy. An agency shall not charge a fee for providing a copy of a public record if a specific statute or regulation requires the governmental entity to provide the copy without charge. An agency may waive all or a portion of a charge or fee for a copy of a public record.

“Actual cost” means the direct cost incurred by the agency in providing the public record, including without limitation, the cost of ink, toner, paper, media, and postage. The term does not include a cost that a governmental entity incurs regardless of whether or not a person requests a copy of a particular public record.

An agency shall prepare and maintain a list of the fees that it charges at each office in which the agency provides copies of public records. An agency shall post, in a conspicuous place at each office in which the governmental entity provides copies of public records, a legible sign or notice which states:

- (a) The fee that the governmental entity charges to provide a copy of a public record; or
- (b) The location at which a list of each fee that the governmental entity charges to provide a copy of a public record may be obtained.

An agency may budget the agency’s projected-annual costs for receiving, reviewing, and responding to public records requests. Regardless of the costs an agency incurs in determining its public-records-request costs for budget purposes, the agency shall not charge a requestor more than the actual cost of responding to a request, unless otherwise provided by law.

**Postage:**

The requestor is responsible for estimated postage.

**6. Payment:**

Payment may be made by check or money order made out to the agency. A department may also accept payment by cash or credit card if those means are readily available and deemed acceptable by the department.

**Court reporter transcripts:**

In addition to the actual cost of the medium in which the copy of the transcript is provided, the fee charged for a copy of each page of a court reporter transcript is the fee per page set forth in the contract between the governmental entity and the court reporter.

## **7. Penalties**

In addition to any relief awarded pursuant to NRS 239.011, if a court determines that a governmental entity willfully failed to comply with the provisions of this chapter concerning a request to inspect, copy or receive a copy of a public book or PUBLIC record, the court must impose on the governmental entity a civil penalty of:

(a) For a first violation within a 10-year period, \$1,000. (b) For a second violation within a 10-year period, \$5,000. (c) For a third or subsequent violation within a 10-year period, \$10,000.

## **8. General Policies for Processing Public Records Requests**

a. All public records, unless declared by law to be confidential, must be open at all times during office hours to inspection by any person, and may be copied.

b. Original public records must not be removed from the agency during inspection by members of the public and must be monitored by an employee while any review is being conducted.

c. An agency shall make reasonable efforts to assist the requestor to focus the request in such a manner as to maximize the likelihood the requester will be able to promptly receive a copy of the information being requested.

d. Confidential records of federal, state, and local governments shared with the agency MUST NOT be disclosed without prior written authorization from that government agency. Further, mere possession of records or information may not mean that the agency has legal custody or control over those records.

e. If a record contains information deemed confidential, a request to inspect or copy the record cannot be denied if the confidential information can be redacted, deleted, concealed or separated from the record so the remainder of the record can be inspected or copied.

f. If an agency denies a request because the public book or record, or part thereof, is confidential, the agency shall provide notice of that fact and a citation to the specific statute or other legal authority that makes the public book or record, or a part thereof, confidential.

g. Public records must be provided in any medium in which they are readily available. The records official or the official's designee shall not refuse to provide a

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copy of the record in a readily available medium because the official or designee has already prepared or would prefer to provide the copy in a different medium.

- h. If requested, an agency shall provide a copy of a public record in an electronic format by means of an electronic medium. But nothing requires an agency to provide a copy of a public record if an electronic format or by means of an electronic medium if: (i) the public record was not created or prepared in an electronic medium; and is not available in an electronic format; or providing the public record in an electronic format or by means of an electronic medium would give access to proprietary software or would require the production of information that is confidential and that cannot be redacted, deleted, concealed or separated from information that is not otherwise confidential.
- i. Electronic databases that contain the electronic mail addresses or telephone numbers of individuals that have provided the addresses or numbers for the purpose of or in the course of communicating with the agency are confidential and may not be disclosed in its entirety as a single unit unless in response to an order issued by a court. However, individual telephone numbers or electronic mail addresses of a person are not confidential and may be disclosed individually.
- j. Public Records Requests must be responded to no later than the end of the fifth business day after the date on which the request is received by the agency. The response may include an estimate of the time it will require to provide access or a copy.
- k. Public records requests may be written or verbal.
- l. If the person responding in the agency where the records are maintained or who is responsible for the subject matter of the request has questions concerning inspection or reproduction of a requested document, he or she should consult the records official and/or his or her designee. Likewise, if the records official and/or his or her designee have questions concerning inspection or reproduction of a requested document, he or she should consult the chief or his or her designee in the agency where the records are maintained, or which is responsible for the subject matter of the request.



- m. In appropriate situations, the agency's assigned deputy district attorney should be consulted for determining whether:
  - i. the item requested is a public record, available for review and reproduction.
  - ii. the item requested is a public record which some special legal considerations might dictate should not be made available for inspection and reproduction; and
  - iii. if a legal balancing test is to be performed, the requestor should be informed and then notified as soon as a decision has been made. Balancing tests should be performed without delay.
- n. Copyrighted materials may be duplicated—without risk of infringement— when reproduction is for the specific purpose of: "criticism, comment, news reporting, teaching, scholarship, or research.". When the records official or designee is aware that some other use is intended, consultation with the District Attorney's Office may be necessary to insure there is no infringement by reproduction of copyrighted material.
- o. The number of hours spent on a matter is generally not confidential information.

## 9. Definitions

"Record of a local governmental entity" or "record" means information that is created or received pursuant to a law or ordinance, or in connection with the transaction of the official business of any office or department of a local governmental entity, including, without limitation, all documents, papers, letters, bound ledger volumes, maps, charts, blueprints, drawings, photographs, films, newspapers received pursuant to NRS 247.070, recorded media, financial statements, statistical tabulations and other documentary materials or information, regardless of physical form or characteristic.

"Non-record materials" means published materials printed by a governmental printer, worksheets, unused blank forms except ballots, brochures, newsletters, magazines, catalogs, price lists, drafts, convenience copies, ad hoc reports, reference materials not relating to a specific project and any other documentation that does not serve as the record of an official action of a local governmental entity.

"Agency" means as agency, board, commission bureau, council, department, division, authority or another unit of Washoe County.



## **NORTHERN NEVADA PUBLIC HEALTH - PUBLIC RECORDS REQUEST POLICY ADDENDUM**

Effective: August 26, 2021

### **1. Purpose**

The purpose of this addendum is to add clarity to the Washoe County Public Records Request policy adopted by the District Board of Health on July 22, 2021.

### **2. Fees**

This section clarifies Section 5 of the Washoe County Public Records Request policy. A fee may be charged for providing a copy of a public record. However, the fee is limited as described herein and must not exceed the actual cost to the agency to provide the copy of the public record unless a specific statute or regulation sets a fee that the governmental entity must charge for the copy.

Actual cost to fulfill the public records requests shall be charged to the requestor of public records:

- a. PAPER COPIES shall be provided at \$0.05 per page. Any records that require redaction shall be provided by paper copy.
- b. ELECTRONIC STORAGE (thumb drives, CDs) shall be provided at the actual cost of the device.
- c. POSTAGE shall be charged to the requester at actual cost.
- d. PERSONNEL COSTS shall be charged at the rate of \$30.42 per hour (\$0.51 per minute), which represents the costs incurred by the Health District per hour for the lowest paid full-time staff position. This office shall waive personnel costs for requests that can be filled in 2 hours or less.
- e. Any other actual costs that may be incurred in the filing of the request.
- f. A list of fees that may be charged shall be posted at each office in which copies of public records are provided. The list of fees shall be posted, in a conspicuous place at each office in which the governmental entity provides copies of public records, a legible sign or notice which states:

- i. The fee that the governmental entity charges to provide a copy of a public record;  
or
- ii. The location at which a list of each fee that the governmental entity charges to provide a copy of a public record may be obtained.

This section clarifies Section 5 of the Washoe County Public Records Request policy.

- a. The Records Official shall notify the requestor of the estimated cost to fulfill the records request. Payment of at least half of the estimated amount must be paid prior to work beginning on the request.
- b. Payment must be provided by money order and made payable to “Northern Nevada Public Health.”
- c. The remainder of the amount shall be due prior to the release of records.
- d. Upon request, all or a portion of the costs of fulfilling a public records request may be waived.

Related requests may be aggregated for the purpose of determining the number of hours spent fulfilling them. Related requests may include requests from the same person on the same or similar subject matter and/or requests made close in time to one another.

This section clarifies and replaces Section 7.i of the Washoe County Public Records Request policy. Electronic databases that contain the electronic mail addresses or telephone numbers of individuals that have provided the addresses or numbers for the purpose of or in the course of communicating with the agency are confidential and may not be disclosed in its entirety as a single unit unless in response to an order issued by a court. Individual telephone numbers or electronic mail addresses of a person may be confidential and may not be disclosed.

***New 7/16/2021 – approved by DBOH 7/22/21***

***Added Fee Section & Public Health Records Request Policy Addendum 10/1/2021***

### **DESCRIPTION:**

#### **Leave:**

When leave is anticipated, an employee must receive authorization in advance using the leave instrument required within their division. In case of emergency, verbal approval for the use of leave shall be obtained from the Supervisor. Vacation leave, personal leave **and comp time leave** being requested should already be accrued and reflected on the employees leave bank prior to requesting authorization from the supervisor. Employees can find their leave balances on their current pay stub.

#### **Public Meetings, Committees, or Organizations:**

Employees requesting to attend public meetings or participate as members of committees, or organizations during work hours (which are not required by their position or supervisor) shall submit their written request through the Supervisor and Division Director for approval. The request shall indicate the times, inclusive dates, and reason(s) for the request. The Division Director or designee shall determine whether the request is work related. If the request is not work related, the employee shall submit their request on the leave instrument required within their division through the Supervisor and Division Director or District Health Officer for approval.

#### **Employee Association Activities:**

Release time for Employee Association Activities shall be granted in accordance with the Agreements between Washoe County and the recognized Employee Associations. An employee requesting time shall complete the leave instrument required within their division and shall submit the form through the Supervisor and Division Director to the District Health Officer for approval.

#### **Overtime:**

Overtime should be authorized in advance. In all cases where overtime is necessary, it shall be authorized by the responsible Supervisor before being worked, approved or liquidated by the subordinate employee, unless emergency prevents prior approval. The authorization will include the type of compensation to be received by the employee.

Employees are not eligible for overtime or comp earned until they have hit their 40 hrs for the week. All hours worked should be recorded on the day they are actually worked until the employee hits their 40 hours for the week (Holiday, Vacation, Comp Leave and Personal Leave hours are part of the employees 40 hours). Overtime and Comp Earned should normally be recorded at the end of the week after the 40hr limit has been met. Exception: Overtime, Comp Earned and Straight in Lieu of Sick need to be recorded on the last day of the week the employee actually worked. OT, Comp Earned and Straight in Lieu of Sick cannot be recorded on a day an employee is on leave (Holiday, Vacation,

## RECORDING OF TIME – APPROVAL FOR LEAVE/OVERTIME (Continued)

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Comp Leave, Personal Leave, or Sick leave, unless they are on pre-approved Vacation/Comp or Personal leave and are required to work hours on that day which is at the end of the week after they have hit their 40 hrs - Example on Vacation 8-5pm on Friday but end up working 6-8pm on a required project = 8 hrs vacation and 2 hrs OT). Example: Work Mon 9.50 hrs Reg, Tue 8 hrs Reg, Wed 8 hrs reg. Then Vacation on Thurs for 8 hr and Fri for 8 hrs. Time entry would be Mon - 9.5 reg with short text saying what the extra time was for. Tue - 8 reg; Wed - 6.5 reg and 1.5 OT (with short text earned Monday & enter the reason); Thurs - 8 Vac; Fri - 8 Vac This equals 40 hrs worked and 1.5 OT, but you are not reporting it on a day you were not here.

Employees are to enter a short text in the payroll system for all Overtime or Comp Time Earned. The short text must state why the extra hours were needed/worked. The short text should provide justification for all Overtime and Comp Time Earned. Staff are not to earn comp time, overtime or straight in lieu of sick and use sick leave in the same day.

### **Sick Leave:**

Overtime, comp earned and straight in lieu of sick are not to be recorded on the same day sick leave is used. Employees can use sick leave and other leave (vac, personal or comp leave taken) in the same day but are not allowed to earn overtime/comp earned or straight in lieu of sick in the same day they use sick leave. If they work extra hours on a day, they used sick leave - all hours actually worked should be recorded as regular hours up to their normal work hours for that day; if they did not work enough hours to reach their normal work hours, then they can record the remaining hours as sick leave. (Example: an employee who works a normal 8-hour shift has a doctor appointment in the morning and misses 4 hours of work, but then works 7 hours. The employee would record 7 hours as regular time and 1 hour of sick leave. If sick leave is used within the same week that overtime is worked - the employee can either flex (use less sick leave on the day they were out sick and record the extra hours as regular hours on the day they actually worked them) or use straight in lieu of sick for the extra hours worked up to the number of hours of sick leave used in the same week (but not on the same day).

Employees are not eligible for Overtime/Comp Earned or Straight in Lieu of Sick until they have hit their 40 hours for the week, which includes regular work hours, vacation time, personal leave, Holiday pay and comp leave taken.

*Example: Employee works 2 hours on Monday and is out sick for 6 hours; works 11 hours on Tues, 8 hours on Wed, 11 on Thurs and 8 on Friday. Payroll entry options:*

#### *Option 1 (Flex):*

Mon	Tues	Wed	Thur	Fri	Sat	Sun	
2 hrs reg	11 hrs reg	8 hrs reg	11 hrs reg	8 hrs reg			= 40 hrs

#### *Option 2 (Straight in Lieu of Sick):*

Mon	Tues	Wed	Thur	Fri	Sat	Sun	
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## RECORDING OF TIME – APPROVAL FOR LEAVE/OVERTIME (Continued)

2 hrs reg, 6 hrs sick leave	11 hrs reg	8 hrs reg	11 hrs reg	2hrs reg, 6 hrs straight in lieu of sick			= 46 hrs

Straight in lieu of sick hours are paid at regular hourly rate – not at time and ½.

Link to examples of time entries: (document is on the Public Health SharePoint under “Info” – Examples of timecard entries)

<https://washoenv.sharepoint.com/sites/Health/Documents/Forms/AllItems.aspx?id=%2Fsites%2FHealth%2FDocuments%2FExamples%20of%20timecard%20entries%2Epdf&parent=%2Fsites%2FHealth%2FDocuments>

### **Mileage Reimbursement** -Per Washoe County Travel Procedure (Dec 2022)

Mileage reimbursement within Washoe County/Carson City

- The general guidance is that a county officer or employee is reimbursed for mileage in excess of his/her normal commute. This applies to when the employee travels directly from home to the location and when the employee travels from his/her assigned work location for the day.
- Consistent with WCC 5.361(2), employees are encouraged to carpool. Only the vehicle owner is allowed to claim mileage reimbursement.
- When an employee uses his/her personal vehicle for the county’s convenience, he/she will be reimbursed at the current IRS standard mileage reimbursement rate. In the event an employee does not report to their principal work location before going directly to a scheduled meeting, conference, seminar, etc. the amount of mileage that is reimbursable is only the mileage over and above the employee’s normal commuting mileage from their principal residence to their principal work location.

See WC Travel Procedure for additional travel information- located on the Comptrollers website under Account Payable section.

<https://washoenv.sharepoint.com/sites/Comptroller/Accounts%20Payable%20%20Travel/Forms/AllItems.aspx?id=%2Fsites%2FComptroller%2FAccounts%20Payable%20%20Travel%2FT%20Travel%20%2D%20December%202022%2Epdf&parent=%2Fsites%2FComptroller%2FAccounts%20Payable%20%20Travel>

Driving from the Reno/Sparks area to Incline Village or Vya via a California route is classified as local travel. A request to travel form is not needed, since you are just driving through a section of California to get to a work location within the Tahoe Basin (Incline Village/Vya). At times the California route may be faster, safer or could be the only route

open due to inclement weather. When entering mileage for this route please include why you went this way instead of through Nevada (Example – NV route closed due to weather).

How to Enter mileage in Employee Self-Serve (ESS):

- Log into your Employee Self-Serve (ESS) account, Click on Daily View tab, use arrows to get to the date you need to enter your mileage on.
- Enter your Rec CCTR or Rec Order number; skip the Att/abs type column,
- Under the Wage Type column enter 3R10; skip the Work Week column.
- On the Int Meas unit column enter “MI” for Mileage (mi)
- Under contact enter the number of miles driven.
- At the end of the line click on “Details” this will open a text box where you can write the required info: Where you started from (NNPH is acceptable for the Public Health main location), was it RT (round trip) or 1-way, where you went (address is important) and what was the business purpose for the travel.

Example: RT NNPH to 1010 Lake Street Renown clinic to 152 Plumb Ln St Mary’s clinic to NNPH -delivered flu kits

***Proposed Update 5/15/23***

### **DESCRIPTION:**

Each employee is responsible for the timely submittal of an accurate and complete timecard thru the ESS Portal. Payroll Dept. recommends employees enter their time daily (when payroll system is open) to reduce the number of missing hours if there is an unexpected absence.

Each Supervisor/Division Director or designee shall review the timecard for accuracy prior to approval; verifying that timecards have been entered for all of their staff and released by internal NNPH payroll deadlines. Inaccurate timecards will be returned to the employee.

The Public Health District's timecard deadline is 5p.m. on Thursday of the week prior to payday. All time must be entered, released and approved by the Supervisor prior to 5p.m. Due to holidays payroll deadlines may be adjusted; employees will be notified of earlier payroll deadlines via e-mail.

Supervisor/Division Director or designee is responsible for ensuring all timecards for their staff are entered and accurate. If an employee is on leave and their timecard has not been entered, the Supervisor may submit a request to the Public Health HR Representative to have the employee's time entered. (Request must include employee's name, dates, hours, breakdown of accounts the hours are to be encoded too etc.).

If a full-time or permanent part-time employee fails to complete their timecard, annual leave will be encoded by the department's HR Representative if the supervisor is unable to provide information on time worked. If Annual Leave is not available in the employee's leave bank, other leave types may be used to fulfill the minimum time requirements for the employee if available. If there is not enough time available Leave Without Pay (LWOP) will be entered – all LWOP must be pre-approved by the District Health Officer or Deputy District Health Officer using the appropriate leave form.

Seasonal or intermittent hourly employees do not have minimum time requirements established in ESS. If the employee fails to enter their timecard; their supervisor should follow up with the employee. If no time is entered, no paycheck is issued. Any time that is worked but not entered will need to be entered during the next pay period.

If a supervisor fails to approve an employee's timecard, the department's HR Representative can approve the requisite number of hours to give the employee their budgeted hours for the pay period. Compensatory time earned, overtime, mileage reimbursement, etc. must be approved in SAP by the employee's Supervisor or designated substitute. If a supervisor or designated substitute is experiencing SAP approval/program issues, they may request assistance with the approval of the extra compensation after they



have verified the validity of the entries and provide approval to the department's HR Representative. If the Supervisor or designated substitute is unavailable, the HR Representative can approve the additional compensation. The HR Representative will follow up with the Supervisor by sending a screen shot of the approved hours to the Supervisor(s) for their review. If the entries are not accurate the Supervisor can have the HR Representative make any necessary adjustments or wait and instruct the employee to make the necessary adjustments after payroll has reopened.

**Employees are responsible for reviewing their pay statements and reporting any issues, errors, adjustments, or any items that do not calculate correctly to their HR Rep or Payroll immediately for verification. All employees are responsible for reporting any over or under payment of funds from the County immediately to their HR Rep or Payroll.**

*Proposed Updated 5/11/23*

## 36 - RECORDS RETENTION

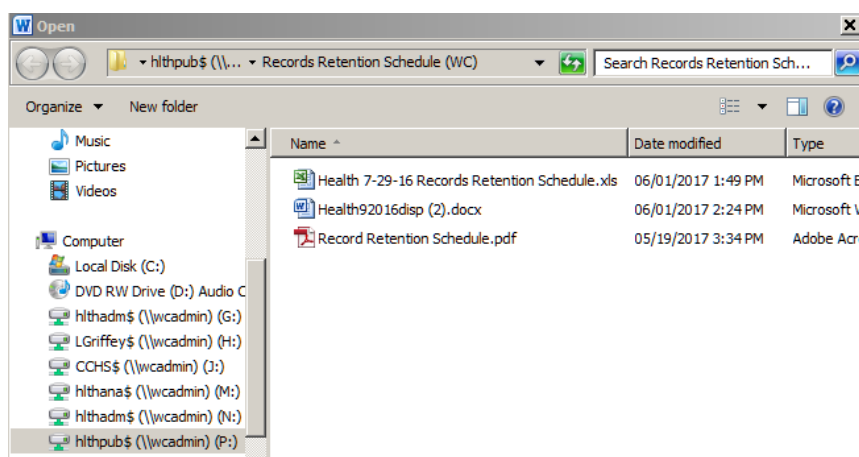
### DESCRIPTION:

Northern Nevada Public Health generally follows the Washoe County, Nevada Records Management Program Records Retention Schedule, unless a specific grant requires documents related to that grant to be maintained for a longer time period. Documentation related to grants is maintained for the period required by the grant or the records retention schedule whichever period is longer.

Medical records are maintained on a different schedule per NRS.

NRS 629.051(7) prohibits a provider of health care from destroying the health care records of a person who is less than 23 years of age on the date of the proposed destruction of the records. Health care records means any reports, notes, orders, photographs, X rays or other recorded data or information whether maintained in written, electronic or other form which is received or produced by a provider of health care, or any person employed by a provider of health care, and contains information relating to the medical history, examination, diagnosis or treatment of the patient. A longer federal retention requirement would trump those numbers. So, if the document meets the definition of a medical record, 629.051(7) requires that it not be destroyed until the person has attained the age of 23 years and the record has been retained at least 5 year or for any longer period provided by federal law.

The regular retention schedule, Public Health condensed version, and the Health (medical) Records Retention Schedule is available on the Health Public Drive.



When sending files for Records Retention, indicate on the box label what type of records are enclosed and the specific records retention time frame for the type of files enclosed, so files are retained for the appropriate period of time.

***New 6/1/17***

**DESCRIPTION:**

**NORTHERN NEVADA PUBLIC HEALTH REFUND POLICY**

**PURPOSE:**

It is the purpose of this policy to establish a refund policy for Northern Nevada Public Health (NNPH).

**PROCEDURES:**

In order to request a refund, a written request must be submitted utilizing the [Request for Refund form \(click here\)](#). No refunds are done at customer service windows. The request must be mailed, faxed, e-mailed, or delivered to NNPH:

Northern Nevada Public Health  
1001 East Ninth Street  
Reno, NV 89512

Air Quality Management (AQM) - Fax (775) 784-7225 - [aqmdadmin@nnph.org](mailto:aqmdadmin@nnph.org)  
Environmental Health Services (EHS) - Fax (775) 328-6176 - [healthhs@nnph.org](mailto:healthhs@nnph.org)  
Vital Statistics (Birth/Death Records) - Fax (775) 785-4184  
Community & Clinical Health Services (CCHS) - Fax (775) **328-3750**

**For AQM & EHS:**

- If within ten working days of receiving payment for a permit or initial documentation is received by NNPH staff from a partner jurisdiction (City of Reno, City of Sparks, Washoe County), staff determines the customer was not required to have a permit, a full refund, including the 4% Regional Technology Fee, may be given.
- After the ten working days, all refund requests will be subject to a deduction of 10% for Administrative fees in addition to the 4% Regional Technology Fee.
- Refund eligibility period is 90 days from the date the fee was submitted, or initial documentation is received by NNPH from a partner jurisdiction
- A refund is not available if field staff completed the work associated with a fee submitted for services.
- Annual permit fees are non-refundable upon the first day of the renewal period (i.e. a May 1st renewal that is paid will not be refunded if requested on or after May 1st)

**REFUND POLICY (Continued)**

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- Late fees are non-refundable.
- If NNPH staff determine a different permit is required, and the staff work completed has not exceeded work required for the new permit, the full original permit fee may be returned (or if technology allows, applied to the new permit). Examples of this may include, the wrong food facility permit is selected, the wrong AQM asbestos fee was paid for demolition, or it is determined that a well deepening must be converted to a new well permit.

- If the AQM or EHS Division Director determines that an error in billing or other issue, initiated by NNPH or a partner jurisdiction on behalf of NNPH occurred, a partial or full refund (including all fees) may be issued if approved by the District Health Officer or Deputy District Health Officer.

### **For Vital Statistics (Birth/Death Records)**

- A ten-dollar search fee is non-refundable.

Refunds for amounts less than \$5.00 will not be paid per [Washoe County Code 15.435](#) and [NRS 354.220-354.240](#).

Refunds will be processed per the noted methods:

- Refunds made by check could take up to 3-4 weeks to process.
- Refunds will only be issued to the party that originally issued the payment.
- No cash refunds will be processed unless an established policy or procedure exists for the operational unit. Refunds for cash payments will be processed immediately and refunded by check.
- Refunds for payments made by check will be refunded by check after the original payment check has cleared.
- Refunds for payments made by credit or debit card will be refunded as a credit back to the original card only. NNPH does not keep card information on file. If the customer cannot be reached a check will be issued. If the customer can be reached, but the original card is no longer active, a check will be issued.

**Adopted by the District Board of Health: February 28, 2013; revised October 24, 2019; revised September 24, 2020, revised July 28, 2022.**

REFUND POLICY (Continued)

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### **Request for Refund forms:**

- Air Quality Management Request for Refund Form - [https://www.nnph.org/files/air-quality/Forms\\_and\\_Applications/AQM-Refund-Request.pdf](https://www.nnph.org/files/air-quality/Forms_and_Applications/AQM-Refund-Request.pdf)
- Community & Clinical Health Services Request for Refund Form – request form from CCHS Medical Billing Staff. [https://www.nnph.org/files/cchs/cchs\\_forms/CCHS-Refund-Request.pdf](https://www.nnph.org/files/cchs/cchs_forms/CCHS-Refund-Request.pdf)
- Environmental Health Services Request for Refund Form - <https://www.nnph.org/files/ehs/forms/environmental/EHS-Refund-Request.pdf>

## 38 – RELATIONSHIPS IN THE WORKPLACE – NEW

### DESCRIPTION:

#### **Northern Nevada Public Health Policy on Relationships in the Workplace**

Northern Nevada Public Health is a large employer, and as a result, the potential for family members and romantic partners working together exists. Employees should be cognizant and ensure that their interactions do not create an actual or predictable perception of unfairness, favoritism, or nepotism. The purpose of this policy is to identify when family and intimate or sexual relationships may cause issues in the workplace, or a perception of issues related to nepotism, unfairness, or favoritism at work. This policy provides standards and disclosure procedures to prevent those problems from occurring.

To avoid any potential or perceived conflicts:

- Employees must abide by the Washoe County Personnel Handbook. (specifically, 5.089-5.892)
- Employees may not make, participate in, or influence any employment decisions involving a family member or romantic partner.
- No hiring authority shall hire relatives or romantic partners of any current employee in the same division/office unless recommended by a committee with the following participants, and final approval by the District Health Officer. A request for committee review may be submitted by the hiring manager.
  - WCEA Representative (or appropriate Association, invited)
  - Health Officer or Deputy Health Officer
  - The Division/Office Director
  - A Division/Office Director of another Division/Office
  - DBOH liaison for the Division/Office

- Family members, or romantic partners, may work together on division/office or districtwide projects (e.g. internal committees) however, shall require division director(s) approval.
- Those with decision making authority shall recuse themselves from decisions that could impact their family members or romantic partner's immediate work environment.
- Employees shall inform their supervisor of any relationships that may fall under this guidance.

As the definition of family continues to evolve, the Health District has expanded the definition of family for purposes of this guidance to include the following:

- A spouse, child, parent or sibling of the person; Spouse includes domestic partner.
- Any corresponding in-law, step, or current foster/guardian relation
- Persons involved in a romantic or sexual relationship, whether physical or through communications occurring within the last two years.
- An aunt, uncle, niece, nephew, grandparent, or grandchild or first cousin of the person.

Approved by DBOH 2/22/24

### **DESCRIPTION:**

#### **ID BADGES:**

All paid employees are issued County ID Badges with door (key) access. Employees are to be aware and maintain the security of Public Health at all times:

- 1) Do not grant access to secure areas to non-employees or employees who do not have a valid work-related reason to be in that area.
  - a) Do not allow non-employees to enter a security door ahead or behind you.
  - b) All customers, delivery personnel or student interns (who are not issued a keyed badge) should be escorted by an authorized Public Health or County employee to their destination. Staff should be escorting the individuals back out of the area also.
- 2) If you misplace or lose your County ID Badge – contact the Public Health HR Representative immediately at 328-2403 or the main Admin number 328-2410 (if it is after hours – leave a message), so the badge can be deactivated and replaced; or so a temporary hold can be placed on the card access while you try to locate it.
- 3) Any problems with ID Badges and security access should be reported to the Public Health HR Representative immediately.
- 4) All employees are required to follow the Washoe County Identification Badge Policy, which can be found at:  
[https://www.washoecounty.us/humanresources/files/hrfiles/ID\\_Badge\\_policy\\_1\\_16\\_09.pdf](https://www.washoecounty.us/humanresources/files/hrfiles/ID_Badge_policy_1_16_09.pdf)

#### **COUNTY/HEALTH DISTRICT ISSUED EQUIPMENT:**

All County or Public Health owned equipment (Computers, Laptops, iPads, Tablets, etc.) are to be kept secure at all times.

- 1) Any County or Public Health equipment that is lost or stolen is to be reported to the Department and Information Technology staff immediately so access to the confidential information can be blocked. This includes personal equipment that contains confidential information related to Public Health customer/client confidential information, etc.
- 2) All equipment using Air Watch software can be remotely locked by IT.
- 3) Do not keep the encryption code or passwords with the equipment. The encryption/password is our first line of security for equipment, so it should be memorized or kept in a separate location from the equipment.
- 4) County Property Loss form SAF 7 (Liability and Property Loss Form) should be completed for all equipment that is lost or stolen – the form is available on the County website at <http://eww/comptroller/Pages/CLAIMS.aspx>

***New 8/2/17***

### **DESCRIPTION:**

The District Health Officer is authorized to execute agreements on the Board of Health's behalf not to exceed a contract amount of \$100,000. Contracts amounting to over \$100,000 must be approved by the District Board of Health and Board of County Commissioners. The terms of such agreements may not exceed the period for which funds have been appropriated and are available. In the event of an emergency, the Health Officer may execute an interim agreement in excess of \$100,000 to ensure continuation of essential services, provided the agreement is brought before the Board of Health at its next regular meeting for ratification and extension of its term. (Approved by the District Board of Health 6/28/18 #6I)

Given that Grant Awards are contracts the District Health Officer is authorized to accept and execute sub-awards that don't exceed a **contract** amount of \$100,000.

The District Health Officer is not authorized to sign Interlocal or Cooperative Agreements. All Interlocal and Cooperative Agreements must be signed by the Chairman of the District Board of Health.

Employees are not authorized to sign contracts of any amount for any purpose on behalf of Northern Nevada Public Health. Contracts are defined in the-Northern Nevada Public Health Contracts Administrative Procedure.

*Updated 3/25/2021*



### **DESCRIPTION:**

The District Health Officer or his designee shall sign all official Northern Nevada Public Health correspondence to:

- District Board of Health Members
- Washoe County Manager
- Washoe County Assistant County Manager
- City Managers
- State Health Division Administrator
- State Health Officer
- Federal Health Officials
- Elected officials
- Other local government official

The Administrative Health Services Officer may sign required certifications related to federal grants to include the annual indirect cost rate proposal, fiscal reports and routine reimbursement requests (approved by DBOH 9/27/18 #6E).

Division Directors or their designees may sign routine correspondence to those individuals noted above (except District Board of Health Members) if it does not involve a statement of Northern Nevada Public Health policy, or address personnel or fiscal matters. A copy of such correspondence shall be provided to the District Health Officer.

***Updated 9/11/2019***

### **DESCRIPTION:**

All Northern Nevada Public Health Staff must follow the Technology and Equipment process implemented by the County as of June 2023.

All forms and links are located on the Public Health Intranet site under Forms, Policies and Procedures and Info section.

- Employees must read and complete the **Washoe County Internet and Intranet Acceptable Use Guidelines** and turn the form into the department HR Rep annually.
- Employees must complete the **Washoe County Technology Equipment Check In and Out Form**  
<https://washoecountynv.seamlessdocs.com/f/EquipmentCheckInandOutForm>
  - Listing the EQ#'s for all equipment they have been issued.
  - If issued multiple pieces of equipment and there is not enough room on the form to list all EQ#s, the employees can do a 2<sup>nd</sup> form and write "2<sup>nd</sup> Form" on the top line by their name. This is a seamless doc form and must be completed/signed on the computer.
  - Employees need to fill in the name and email address of the supervisor before submitting the form electronically.
  - Supervisors will review the form, sign it electronically and fill in the name and email address of the HR Rep.
- Employees must read the **Washoe County Technology Guidelines**.
- When leaving employment (leaving the County/Public Health completely or moving/promoting to another division/department within Public Health or the County) the employee must complete the **Washoe County Technology Equipment Return Form** electronically on the computer and send it via Seamless docs to their supervisor. Supervisor will review and send it to the HR Rep.  
<https://washoecountynv.seamlessdocs.com/f/EquipmentReturnForm>
- If any equipment is damaged, lost or stolen, the employee who was issued the equipment must complete the **Washoe County Equipment, Damage, Loss and Theft Form** on the computer (Seamless Doc form)  
<https://forms.washoecounty.us/f/EquipmentDamageLossTheft>
- Employees must read and sign the Computer Damage, Loss and Theft Guidelines and turn the completed form into the department HR Rep.

**NEW 7/5/2023**

### **DESCRIPTION:**

Northern Nevada Public Health follows the Washoe County Flexible Hybrid Agreement and process effective 2023.

Employees must use the Washoe County Flexible Hybrid Agreement form to apply for either an alternative work schedule 4-10-hour shift, 4-9 & 1-4 hour schedule or working remotely (full, part time, or even just 1 or 2 times a year) this includes intermittent hourly staff who may complete trainings or other duties off property:

**The Washoe County Flexible Hybrid Agreement must be completed annually.** Hybrid and flexible work are options that management may choose to make available to employees when appropriate. It is not a universal employee benefit; employees do not have a “right” to a hybrid or flexible work schedule and this work option may be terminated by either the employee or county (supervisor/division director) at any time.

The new Hybrid Work information and documents are available on the following link <https://washoenv.sharepoint.com/sites/Inside-Washoe-HR/SitePages/Future-of-Work.aspx?from> or by going to - Inside Washoe Home page, clicking on Human Resources, then Inside HR, scroll down and click on Organization Effectiveness, scroll down and click on Future of Work to access these forms, guidelines and policies:

- Flexible Hybrid Work Agreement (Seamless Doc, must be done through computer, seamless doc system)
- Hybrid Work Environment Checklist
- Hybrid Working Guide
- Recommendations for Flexible and Hybrid Schedules
- Communication Guidelines
- Virtual Meeting Etiquette Guidelines

All of the above forms/guidelines must be read and completed prior to applying for a Hybrid Work schedule. The Hybrid Work Environment Checklist includes two (2) Bridge Learning Center courses - Remote Working Health and Safety and Setting up an Ergonomic Workspace at Home, located under “Policy Training” section in the Bridge Learning Library. Both must be completed prior to applying for hybrid work schedule.

If completing a Flexible Hybrid Agreement, the employee must document in the “Additional Departmental Terms” section of the Flexible Hybrid Agreement form - an explanation of the benefits and impacts their flexible hybrid schedule may have on the program and indicate when they may work remotely (list out if set schedule if only occasionally as needed and approved by supervisor that explanation works too).

- **NOT all positions are eligible** for hybrid schedules/telecommuting, hybrid schedules/ telecommuting **is a privilege not a right**, it is based on business needs, employee attendance and job performance and is at the discretion of their Supervisor, Division Director and District Health Officer.

Employees must reapply annually.

- **SPECIAL NOTE** – Northern Nevada Public Health **DOES NOT** offer the ½ hour paid lunch option mentioned in the Washoe County Recommendations of Flexible and Hybrid Schedules document under “Flexible or Alternative Schedule Options” section - “Department Considerations” area. This option is **NOT** available for any Health employee, no matter what their schedule is.

### I. POLICY

Washoe County is dedicated to excellence in public service. This policy establishes guidelines for hybrid/telecommuting work schedules, an arrangement where an employee can work from home. The Flexible Hybrid Agreement polices, and guidelines are being implemented by the County to further improve provision of services to the public. Not all positions are amenable to a hybrid/telecommuting assignment; therefore, assignments will be made based on business necessity, at the sole discretion of management, and employees may be re-assigned based on the County’s business needs. Employees retain all rights to which they are entitled under any applicable Collective Bargaining Agreement, federal, state or local law, and nothing in this policy should be construed otherwise.

- Hybrid /Telecommuting must occur at one’s residence and that residence must be within the Northern Nevada region or neighboring California communities such as Truckee, South Lake Tahoe or Susanville. Any exception will require written approval by the County Manager.
- Working remotely during business travel is permitted.

### II. HYBRID/TELECOMMUTING PROCESS

1. ***Eligibility.*** Not all positions are appropriate or eligible for a hybrid/telecommuting arrangement; therefore, the Division Director shall determine which positions and employees are suitable for hybrid/telecommuting within their division. Employees seeking a hybrid/telecommuting arrangement may apply using the Flexible Hybrid Agreement and by completing all required forms, training, and reading all related policies & guidelines. The primary factor for consideration shall be whether an assignment to a hybrid/telecommuting arrangement meets the business needs of the department and Washoe County. Other factors include, but are not limited to:
  - a. **Job Responsibilities.** The manager and employee will discuss current job responsibilities and determine what tasks are appropriate for hybrid/telecommuting arrangements. Such factors in determining whether an employee can work a hybrid schedule/telecommute include, but are not limited to, the nature of the work which will be performed, including the need for, and amount of interaction with the public, co-workers, and subordinates required by the position.
  - b. **Equipment Needs.** The manager, technology services, and employee will review the physical workspace needs, equipment requirements, and the appropriate location for the telework. The employee will confirm that he or she has access to space conducive to performing hybrid/telework.

- c. **Work Performance.** To be eligible for hybrid/telecommuting, an employee must be and remain in good standing with Washoe County. The manager will take into consideration the employee's work performance, both prior to and during the assignment to a hybrid/telecommuting position.
  - d. **Work Hours.** The manager and employee must agree to a work schedule prior to hybrid/telecommuting. During the agreed upon work schedule, the employee shall only perform County work and is required to seek prior approval for any change in schedule, overtime, or leave of any kind.
  - e. **Time Recording.** The employee is required to maintain accurate records of their hours worked and descriptions of the work they perform and to forward those records to their supervisor each week.
  - f. **Regular Communication.** The manager or designee and employee must remain in frequent communication during the hybrid/telecommuting period. An appropriate level of communication between manager and employee will be agreed upon in advance.
- 2) **Intellectual Property.** Products, documents, and records produced or created in connection with county business are the property of Washoe County.
  - 3) **Safety.** Employees are expected to maintain their home workspace in a safe manner, free from safety hazards. Injuries sustained by the employee in a home office location and in conjunction with his or her regular work duties may be eligible for worker's compensation. Employees are responsible for notifying their manager and Risk Management of such injuries as soon as practicable. The employee is liable for any injuries sustained by visitors to his or her home worksite.

**While working a hybrid schedule/telecommuting, the employee is responsible for:**

- i. The protection of all County owned property and equipment against theft and damage.
- ii. The safeguarding of records, files, correspondence, and other County owned and business-related materials. Consistent with Washoe County's expectations of information security for employees working at the office, hybrid/telecommuting employees will be expected to ensure the protection of proprietary County and information accessible from their home office. Steps include the use of locked file cabinets and desks, regular password maintenance, virus protection software, and any other measures appropriate for the job and the environment. Employees must adhere to the document security matrix and take all precautions necessary to ensure that confidential and sealed information is not accessible.
- iii. Maintaining a working voice line to make and receive work-related telephone calls. A landline or cell phone, paid for by the employee unless otherwise stated in the

## TELECOMMUTING – HYBRID SCHEDULE (Continued)

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Flexible Hybrid Agreement-form is acceptable as long as the service is available at all times during the employee's work hours.

- iv. Reading and understanding all applicable County policies/guidelines and agrees to continue to follow them during their hybrid/telecommuting assignment to include, but not limited, to the *Washoe County's Worker's Compensation Policy*, *Washoe County's Internet and Intranet Acceptable Use Guidelines* and *Washoe County Information Security Policy*, and acknowledges that all information, whether personal or professional maintained on County owned computer equipment and/or the County Computer system is the property of Washoe County.

Washoe County is not responsible for the care, maintenance, upkeep, repair or otherwise of computer or other employee-owned property, which is used by the employee. Washoe County and Northern Nevada Public Health are NOT responsible for office supplies employees use while working remotely/telecommuting (cost of paper, toner, ink etc.). The employees must purchase their own office supplies and maintain their own personnel equipment.

**Working a hybrid schedule/Telecommuting is not designed to be a replacement for appropriate childcare.** Although an individual employee's schedule may be modified to accommodate childcare needs, the focus of the arrangement must remain on job performance and meeting business demands. Prospective hybrid workers/ telecommuters are encouraged to discuss expectations of hybrid work/telecommuting with family members beforehand.

The employee will periodically make the proposed worksite available for reasonable inspection by their department head and/or designee, a Washoe County Safety Officer, a Technology Services staff person, or other employees deemed necessary by the County to assure compliance with County policies and/or to repair, inspect, or install County property or equipment. Failure to allow such access may result in denial of the request for a hybrid work arrangement/to telecommute, termination of the Flexible Hybrid Agreement, and/or discipline up to and including termination of employment.

### III. PROCEDURES

1. An employee is required to complete and sign the Flexible Hybrid Agreement (Seamless Doc) form, review all Hybrid guidelines/policies and complete all related training and forms.
2. Approval or disapproval is determined by the Division Director, designee and Technology Services. Any disapproval is not subject to an appeal.
3. All approved Flexible Hybrid Agreement forms shall be forwarded to the department Human Resource Representative through Seamless Doc process for placement in the personnel file.

#### **IV. TERMINATION OF HYBRID/TELECOMMUTING ARRANGEMENTS**

All hybrid/telecommuting arrangements are at the will of County management and are not employee entitlements. A department head may therefore terminate a hybrid/telecommuting arrangement upon reasonable notice to the employee (not less than 2 days). Department heads who approve hybrid/telecommuting arrangements will periodically review all such arrangements to ensure the County's business needs are being met, that hybrid/telecommuting employees are in compliance with the Flexible Hybrid Agreement, guidelines and policies, and all other applicable County policies, and to determine the appropriateness of continuing the hybrid/telecommuting agreement.

Updated 7/5/2023

### **DESCRIPTION:**

Prior to termination of service with Northern Nevada Public Health an employee should give at least two weeks' written notice. Per Washoe County Personnel Handbook 5.295, failure to give at least 2 weeks written notice constitutes cause for denial of future employment with Washoe County. Once written notice is received from an employee, the original shall be sent to the Northern Nevada Public Health HR Representative.

When an employee terminates service with Northern Nevada Public Health, the employee shall turn in all Public Health equipment, supplies, keys, and identification cards to their Supervisor, Division Director, or designee.

The employee shall report to the Northern Nevada Public Health's HR Representative prior to the last day of employment to complete all required personnel documents. Employees voluntarily leaving employment or retiring must submit a written letter of resignation or sign the Employee Certification of Resignation form in advance.

SAP processing of the termination/transfer will not be completed until the HR Representative has received all required personnel documents and the supervisor has verified all equipment, ID badges, keys and property have been turned in. Failure by an employee to complete all required steps may delay final leave bank payouts.

*Updated 4/23/15*



### **DESCRIPTION:**

Northern Nevada Public Health travel policy:

Before an employee travels outside of Washoe County or Carson City/Tahoe Basin, the employee must obtain appropriate approvals from their department. Prior to approving travel, the supervisor and/or the division director must verify that budget authority exists to cover the required travel and sufficient funds are available.

All requests for travel should be submitted to the approving authority as far in advance as possible: 30 days is recommended. Travel reservation or commitments can be made only after proper approvals are obtained and forms are submitted through Health Administration to the Comptroller's Office.

Travel requests not submitted in a timely manner can be denied by management even if funding is available.

There are administrative staff in each division who can assist employees with completing their travel paperwork. Check with your supervisor to find out who in your division can assist you.

Public Health has internal procedures and processes for travel that must be followed. The latest Employee Travel Policy is located on the Public Health intranet site, under "Policies & Procedures". You can access it by going to the Public Health Share point, clicking on the Forms, Policies & Procedures & Info drop down arrow, choose Policies and Procedures, then scroll down the list to "Travel Policy". Here is the link to that document:

<https://washoenv.sharepoint.com/sites/Health/Documents/Forms/AllItems.aspx?id=%2Fsites%2FHealth%2FDocuments%2FTravel%20Policy%2Epdf&parent=%2Fsites%2FHealth%2FDocuments>

Washoe County Travel Policy:

<https://washoenv.sharepoint.com/sites/Comptroller/Accounts%20Payable%20%20Travel/Forms/AllItems.aspx?id=%2Fsites%2FComptroller%2FAccounts%20Payable%20%20Travel%2FTravel%20%2D%20December%202022%2Epdf&parent=%2Fsites%2FComptroller%2FAccounts%20Payable%20%20Travel>

Driving from the Reno/Sparks area to Incline Village or Vya via a California route is classified as local travel. A request to travel form is not needed, since you are just driving through a section of California to get to a work location within the Tahoe Basin (Incline Village/Vya). At times the California route may be faster, safer or could be the only route open due to inclement weather. When entering mileage for this route please include why you went this way instead of through Nevada (Example – NV route closed due to weather).

***NEW 7/26/2023***

### DESCRIPTION:

County vehicles should always be used when performing inspections of any kind and when performing job-related duties where a fine or citation may be issued during normally scheduled working hours.

Private automobiles should be used when county vehicles are not available and for attendance of meetings, training etc., or when an employee is responding to an after-hours incident.

County Vehicles should be used for official business only and should be driven only by employees. County vehicles may be used for lunch if an employee is in the field and the lunch location is proximate to where the employee's job duties require them to be, or if there is an official business purpose for the lunch. Passengers are restricted to other employees or individuals on official business. All non-employees must sign a County Waiver of Liability (see HR Representative or Risk Management form) before riding in a county vehicle. All waivers must be turned in to the Public Health HR Representative.

The Washoe County Code, Chapter 5 & **Washoe County Personnel Handbook (5-11-23 version) –5.025 – 5.341** was amended by adding new language reflecting the County's policy of supporting the use of private vehicles for conduct of County business pursuant to County Travel Regulation ordinance, and other matters properly related thereto:

- The policy of the Board of County Commissioners is that private vehicles may be used whenever "practicable" in the conduct of county business as described in the Travel Regulation ordinance. (see County Code 5.389 and 5.391).
- Reimbursement will be made pursuant to section 5.361(4) of the ordinance.
- It is the employee's responsibility to assure that their personal automobile insurance policy is appropriate for the use of their private vehicle for the conduct of county business.

#### 5.361 Travel Expenses

4. **Private vehicles.** Private vehicles may be used to conduct county business whenever practicable. The rate of the mileage allowance is the standard mileage reimbursement rate allowed by the Internal Revenue Service to be deducted from federal income tax and which is in effect at the time the mileage is traveled as determined by the county comptroller....

7. No compensation shall be allowed for transportation to or from a county officer's or employee's home and principal business office.

The BCC Ordinance Amendment changes the way Washoe County administers reimbursement for use of private vehicles by employees when conducting County

## USE OF COUNTY VEHICLES (Continued)

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business. Previously we only reimbursed 50% of the IRS rate when a motor pool vehicle was available, but an employee chose to use their own private vehicle. Now with the Board policy changed to allow use of private vehicles whenever “practicable”, the full IRS reimbursement is offered. And is easily done using the ESS timesheet entry system.

### **Employees driving County vehicles or driving personal vehicles for County business shall:**

- Have a valid driver’s license.
- Provide verification of same to the Northern Nevada Public Health’s HR Representative.
- Comply with the County’s relevant policies and procedures, (e.g., defensive driving policy, use of safety belts, service station, vehicle maintenance, motor pool, and parking of vehicles).
- Comply with all traffic regulations.
- Pay for parking tickets and moving violations.
- Secure the vehicle, valuables, and equipment during routine stops.
- Lock the County vehicle at the end of the workday in an area designated by the County.
- Be responsible for keeping vehicles clean.
- Report any and all damage to a county vehicle immediately to their supervisor and complete the appropriate accident reports. See process under Accident & Injury Reporting. Pictures should be taken, if possible, to show the extent of the damage, submit pictures with the accident report to Administrative Health Services.
- Report any mechanical issues with County vehicles to Equipment Services in a timely manner.

### **Vehicle Accident:**

An Employee driving any vehicle (County, rental, or personal), involved in an accident during the course of assigned duties shall:

- Immediately notify the appropriate law enforcement agency regardless of the extent of damage; if local law enforcement will not respond and a county vehicle is involved, advise dispatch a county vehicle was involved and request they dispatch a Deputy Sheriff to the scene to do a report. (Risk Mgmt. needs this report).

After notifying law enforcement contact your immediate Supervisor to give a preliminary verbal report; if Supervisor is unavailable, call the Public Health main line (328-2410) to give a verbal report to the Administrative Health Services (AHS) person covering Risk Management issues.

## USE OF COUNTY VEHICLES (Continued)

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Within one (1) business day, the employee must complete the Saf-5 “Washoe County Vehicle Accident Report” form and submit it through his/her Supervisor and Division Director to the AHS person covering Risk Management issues; (form located on [eww.health](http://eww.health) under Forms & Info, HR Forms & Info, Risk Management forms <http://eww/comptroller/Pages/CLAIMS.aspx> (click on SAF5 Vehicle Accident Report Form)

Accidents involving any vehicles when law enforcement does not respond: Employee should obtain, complete and file the Nevada Department of Motor Vehicles “Driver’s Report of Traffic Accident SR-1” form and submit a copy to the AHS person covering Risk Management issues (NV DMV SR-1 form located at <http://www.dmvnv.com/pdfforms/sr1.pdf> or on NV DMV Website).

Each County Vehicle contains a “Red Envelope” in the glove compartment which outlines the instructions employees should follow when a motor vehicle accident occurs. These instructions apply to county and non-county vehicles alike. Following the enumerated instructions listed on the Red Envelope will provide Risk Mgmt. with all the information they need to properly administer any related claim. An Employee using a non-county vehicle for business purposes can obtain the Red Envelope instructions from the NNPH AHS person covering Risk Management issues or <https://washoenv.sharepoint.com/sites/Comptroller/sitePages/claims.aspx>

Do not sign any form(s) or materials presented by the insurance carrier(s) of the opposing party. All such materials are to be forwarded to the Administrative Health Services Officer, who will advise Risk Management.

***Update 5/16/2023***

**DESCRIPTION:**

Northern Nevada Public Health is committed to creating a culture that is supportive of staff health and wellbeing.

The intended outcome of this policy is to identify, promote, and ensure access to resources that sustain and improve the health and wellness of NNPH staff.

**Northern Nevada Public Health Employee Wellness Policy**

The objectives of this policy are to:

- Foster a thriving workforce.
- Maximize employee recruitment, retention, engagement, and productivity.
- Promote the physical and mental wellbeing of individual employees.
- Create an organizational climate and culture that is conducive to wellness.
- Promote Work-Life Balance through flexible policies in the workplace.

As such, Northern Nevada Public Health, in conjunction with Washoe County, provides and promotes several wellness resources including:

- Wellness screenings
- COVID-19/influenza vaccines
- Flexible hybrid schedules
- A Fitness Center
- An Employee Assistance Program
- A subscription to a mental health application (i.e., Calm)

**NEW 5/23/2024**

## APPENDIX LINKS/FORMS

Copy and paste the below links to your browser to access the forms.

### Appendix A: HR Related Documents

- Washoe County Personnel Handbook (5-11-23 version) –5.025 – 5.341  
- [2022-WC-Personnel-Handbook\\_05-11-23\\_Bookmarked.pdf \(washoecounty.gov\)](#)
- Washoe County Code, Chapter 5 – Administration and Personnel:  
<https://www.washoecounty.us/clerks/cco/code/Chapter005.pdf>
- Public Health Infection and Bloodborne Pathogen Exposure Control Plan:  
<http://eww/health/Shared%20Documents/2017%20Infection%20and%20BBP%20Plan%20-%20with%20appendices.pdf>
- Labor Relation/Employee Association Contracts:  
<https://www.washoecounty.us/humanresources/laborrelations.php>
- Washoe County Internet and Intranet Acceptable Use Policy:  
<https://www.washoecounty.us/repository/files/13/Internet%20and%20Intranet%20Acceptable%20Use%20Policy%20June%2028%202011.pdf>
- Washoe County Human Resources - Policy, Procedure, and Forms  
<http://www.washoecounty.us/humanresources/Policies/policiesfullisting.php>

### Appendix B: Financial

- Washoe County Code, Chapter 15; County Finances, Purchasing:  
[https://library.municode.com/nv/washoe\\_county/codes/code\\_of\\_ordinances?nodeId=CH15COFIPU](https://library.municode.com/nv/washoe_county/codes/code_of_ordinances?nodeId=CH15COFIPU)
- Washoe County Accounts Payable Procedure Manual: (click OK when box appears)  
<https://washoenv.sharepoint.com/sites/Comptroller/Accounts%20Payable/Forms/AllItems.aspx?id=%2Fsites%2FComptroller%2FAccounts%20Payable%2FAP%20Manual%2011%2D1%2D19%2Epdf&parent=%2Fsites%2FComptroller%2FAccounts%20Payable>
- Washoe County Internal Control Procedures Manual:  
<http://eww/comptroller/Accounting/Washoe%20County%20Internal%20control%20Procedures%20Manual.pdf#search=internal%20control%20procedure%20manual>

## APPENDIX (Continued)

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- Washoe County Grant Management Policy Manual:  
<https://washoenv.sharepoint.com/sites/InsideWashoe-OCM/Grants%20Documents/Forms/AllItems.aspx?id=%2Fsites%2FInsideWashoe%2DOCM%2FGrants%20Documents%2FWashoe%20County%20Policy%20Manual%202020%20Final%2Epdf&parent=%2Fsites%2FInsideWashoe%2DOCM%2FGrants%20Documents> (click OK when box appears)
- Washoe County Pro Card User Guide:  
[http://intranet.washoecounty.us/comptroller/\\_layouts/15/WopiFrame.aspx?sourcedoc=/comptroller/Purchasing%20Forms/Washoe%20County%20ProCard%20User%20Guide%20-%20March%202017.docx&action=default&DefaultItemOpen](http://intranet.washoecounty.us/comptroller/_layouts/15/WopiFrame.aspx?sourcedoc=/comptroller/Purchasing%20Forms/Washoe%20County%20ProCard%20User%20Guide%20-%20March%202017.docx&action=default&DefaultItemOpen)
- Washoe County Purchasing Manual:  
<https://washoenv.sharepoint.com/sites/Comptroller/Purchasing%20Forms%20%20Misc/Forms/AllItems.aspx?id=%2Fsites%2FComptroller%2FPurchasing%20Forms%20%20Misc%2FPURCHASING%20MANUAL%20UPDATE%20March%202020%2Epdf&parent=%2Fsites%2FComptroller%2FPurchasing%20Forms%20%20Misc>

### **Appendix C: Plans**

- Public Health Emergency Operations Plan:  
<https://washoenv.sharepoint.com/sites/Health/SitePages/Policies-&-Procedures.aspx>
- Northern Nevada Public Health Evacuation Procedure (2014):  
<https://washoenv.sharepoint.com/sites/Health/SitePages/Policies-&-Procedures.aspx>
- Northern Nevada Public Health Emergency Action Plan:  
<https://washoenv.sharepoint.com/sites/Health/SitePages/Policies-&-Procedures.aspx>
- Northern Nevada Public Health Active Shooter (10/22/14):  
<https://washoenv.sharepoint.com/sites/Health/SitePages/Policies-&-Procedures.aspx>
- Washoe County Complex Evacuation Policy and Procedure:  
[http://eww/comptroller/\\_layouts/15/WopiFrame.aspx?sourcedoc=/comptroller/Risk%20Management%20Forms/Current%20EVACPOL.doc&action=default&DefaultItemOpen=1](http://eww/comptroller/_layouts/15/WopiFrame.aspx?sourcedoc=/comptroller/Risk%20Management%20Forms/Current%20EVACPOL.doc&action=default&DefaultItemOpen=1)
- Washoe County Emergency Action Plan Policy: (Scroll down to Emergency Action Plan)  
<https://washoenv.sharepoint.com/sites/Health/SitePages/Policies-&-Procedures.aspx>

## **Appendix D: Forms & Policies**

- Customer Conduct Policy (Northern Nevada Public Health Policy) - Click on the link then choose Customer Conduct policy from the list. (scroll down to policy)  
<https://washoenv.sharepoint.com/sites/Health/SitePages/Policies-&-Procedures.aspx>
- Customer/Client Rights (Discrimination and Harassment) - Click on the link then choose Customer Rights Discrimination Harassment (scroll down to policy)  
<https://washoenv.sharepoint.com/sites/Health/SitePages/Policies-&-Procedures.aspx>
- Customer Complaint Form (Discrimination and Harassment) - Click on the link  
<https://washoenv.sharepoint.com/sites/Health/SitePages/Forms.aspx> then choose Customer Complaint Form
- Customer Suspension Policy (Northern Nevada Public Health Policy) - Click on the list then choose Customer Suspension Policy. (scroll down to policy)  
<https://washoenv.sharepoint.com/sites/Health/SitePages/Policies-&-Procedures.aspx>
- Media Policy D-4 – Press Release (Northern Nevada Public Health) (Sample below and located on the Public Health Public Drive under Media/forms)
- Media Policy D-5 - Media Advisory (Northern Nevada Public Health) (Sample below and Located on the Health Public Drive under Media forms)
- Media Policy D-6 – Consent and Release  
(Sample below and Located on the Public Health - Public Drive under Media forms)

***Updated 07/25/2023***



**MEDIA CONTACT**

**Scott Oxarart, Communications Manager**

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**Nevada public health authorities recommend  
ceasing of e-cigarette, vaping product use**

*3 deaths reported in U.S. from severe pulmonary disease linked to vaping*

**Sept. 6, 2019** – Carson City Health and Human Services, Southern Nevada Health District and Northern Nevada Public Health are warning the public of the potential for severe lung illness associated with the use of electronic cigarettes (e-cigarettes). The public health authorities are advising people not to use vaping products and e-cigarettes. These products should never be used by youth, young adults, pregnant women, and people who do not currently use tobacco products.

The Centers for Disease Control and Prevention (CDC) reported 450 potential cases and three deaths associated with severe Lung illness. At this time, investigators have not identified any specific product or compound that is linked to all cases; however, all patients have reported e-cigarette product use or vaping. In many cases, but not all, patients reported recently using products containing tetrahydrocannabinol (THC).

There have been no reported cases in Nevada. The public health authorities will work with health care providers to investigate suspected cases in respective jurisdictions.

The patients who have been hospitalized have reported experiencing a gradual start of symptoms, including:

- Respiratory symptoms (cough, shortness of breath, or chest pain)
- Gastrointestinal symptoms (nausea, vomiting, or diarrhea)
- Non-specific symptoms (fatigue, fever, or weight loss)

The Nevada health authorities advise people who use e-cigarettes to seek medical care right away if any of these symptoms are experienced. People seeking help quitting tobacco

products, including e-cigarettes, can contact the Nevada Tobacco Quitline at 1-800-Quit-Now. Additional information for the public includes:

- Never buy these products off the street
- Avoid modifying e-cigarette products or adding any substances to products
- If you need help quitting tobacco products, call 1-800-Quit-Now.

Finally, the FDA encourages the public to submit detailed reports of any unexpected tobacco or e-cigarette-related health product issues at its Safety Reporting Portal or by calling 1-800-222-1222.

###



## MEDIA ADVISORY

### MEDIA CONTACT

Serving Reno, Sparks and all of Washoe County, Nevada. Washoe County is an Equal Opportunity Employer.

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### Media Advisory: Health District to Officially Change Name to Northern Nevada Public Health

*Media are invited to attend launch event*

**Aug. 31, 2023. Reno/Sparks, Nev.** – Washoe County’s public health authority is changing its name from Washoe County Health District to Northern Nevada Public Health (NNPH) and media are invited to attend the launch event.

#### New Name. Same Programs and Services

The name change was done to give the organization more autonomy as its own brand with its own governing board, the District Board of Health. The change residents and customers will see will include a new website ([www.NNPH.org](http://www.NNPH.org)), new logo and colors, updated outdoor signage and new emails ([example@NNPH.org](mailto:example@NNPH.org)). The guidance, protection and services to residents in Reno, Sparks and Washoe County are not changing as this is only a name and branding update.

**What:** Washoe County Health District officially becomes Northern Nevada Public Health (NNPH)

**When:** Thursday, Aug. 31, 2023. 11 a.m.

**Where:** 1001 E. Ninth St., Building B – NNPH’s main location

**Who:** Event comments will be made by District Health Officer Kevin Dick

**Media contacts:** Interviews will be conducted upon request after the event.

Scott Oxarart

Northern Nevada Public Health Communications Manager

[soxarart@nnph.org](mailto:soxarart@nnph.org)

*Northern Nevada Public Health (NNPH) has jurisdiction over all public health matters in Reno, Sparks, and Washoe County through the policy-making District Board of Health. NNPH consists of five divisions: Administrative Health Services, Air Quality Management, Community and Clinical Health Services, Environmental Health Services and Epidemiology & Public Health Preparedness. [To learn more, visit our website.](#) ###*

## Consent and Release Form

For valuable consideration, I hereby irrevocably consent to and authorize the use and reproduction by Northern Nevada Public Health (NNPH), or anyone authorized by the NNPH, of any and all slides, videotapes or photographs which you have taken of me or my family, for any purpose whatsoever, without further compensation to me. All materials shall constitute NNPH property, solely and completely.

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Signature of Parent or Guardian if Minor:

\_\_\_\_\_

Date: \_\_\_\_\_

**NNPH**

NNPH.org



Please contact Laurie Griffey for  
questions or comments at,  
[lgriffey@nnph.org](mailto:lgriffey@nnph.org)