



PUBLIC HEARING: EIPH FY22 BUDGET
Thursday, June 3, 2021
9:00 a.m.

Eastern Idaho Public Health
Conference Room
1250 Hollipark Drive – Idaho Falls, Idaho

Call-in Option: (720) 925-9299; Meeting ID: 948 9952 2616; Passcode: 156035
[Click here](#) to view the proposed budget.

AGENDA

1. Public Hearing Call to Order & Roll Call.....Commissioner Reed
2. Discussion on House Bill 316Geri Rackow/Steven Thomas
3. Review/Approve FY 2022 EIPH Budget (**Action**)Commissioner Reed
4. Adjourn.....Commissioner Reed

NOTICE OF PUBLIC HEARING

PUBLIC NOTICE IS HEREBY GIVEN that in accordance with 39-423, Idaho Code, the Budget Committee of Eastern Idaho Public Health (EIPH) will meet on

Thursday, June 3, 2021 at 9:00 a.m.

The Budget Committee, consisting of the chairman of the Boards of County Commissioners of Bonneville, Clark, Custer, Fremont, Jefferson, Lemhi, Madison, and Teton Counties, will consider and approve a final budget for EIPH for Fiscal Year 2022 (July 1, 2021 through June 30, 2022). The proposed budget of EIPH is \$9,497,157. The proposed budget request of the Counties is \$1,120,703. The following table sets forth the amounts to be appropriated and contributed by each county within EIPH's jurisdiction.

COUNTY APPORTIONMENT BY SOURCE			
COUNTY	EIPH Budget Request of the Counties Idaho Code 39-424	New County Funding Required in Accordance with HB 316 (Idaho Code 39-424A)	TOTAL FY2022 COUNTY APPORTIONMENT
Bonneville	\$571,176	\$193,486	\$764,662
Clark	\$5,525	\$1,871	\$7,396
Custer	\$28,040	\$9,499	\$37,539
Fremont	\$79,974	\$27,091	\$107,065
Jefferson	\$139,673	\$47,314	\$186,987
Lemhi	\$41,858	\$14,179	\$56,037
Madison	\$174,864	\$59,234	\$234,098
Teton	\$79,593	\$26,962	\$106,555
TOTAL	\$1,120,703	\$379,636	\$1,500,339

Any taxpayer may participate and be heard upon any part of the budget at the Public Hearing. Public participation is available in-person, in writing, or by phone:

**Eastern Idaho Public Health
Conference Room
1250 Hollipark Drive
Idaho Falls, ID 83401**

**Dial In: (720) 928-9299
Meeting ID: 948 9952 2616
Passcode: 156035**

Written public comment may be submitted to the address above, Attention: EIPH Board of Health, or electronically by e-mailing to EIPHboard@eiph.idaho.gov. The deadline for submitting written comment is 5:00 p.m. on Tuesday, June 1, 2021.

EIPH's Fiscal Year 2022 detailed budget proposal may be examined online at: www.EIPH.Idaho.gov

BOARD OF HEALTH AGENDA
Thursday, June 3, 2021
9:15 a.m.

Eastern Idaho Public Health – Conference Room
1250 Hollipark Drive, Idaho Falls

1. Call to Order and Roll Call.....Chairman Reed
2. Approval of Consent Agenda **(Action)**Chairman Reed
If a board member has an issue with something in the Consent Agenda, a request can be made to remove that item from the Consent Agenda for further discussion and a separate vote.
 - a. Approval of April 29, 2021 Board of Health Meeting Minutes
 - b. Subgrant Review/Approval
 - c. FY2021 Year-to-Date Financial Report
3. Conflict of Interest Policy Review Geri Rackow
4. Idaho Association of District Boards of Health Annual Meeting Geri Rackow
5. Ratify EIPH Compensation Policy & FY2022 Compensation Plan **(Action)**..... Geri Rackow
6. COVID-19 Situational Report
 - a. Regional Hospital Report.....Casey Jackman, Idaho Falls Community Hospital
 - b. COVID-19 Data Review.....James Corbett
 - c. Vaccination UpdateAmy Gamett
 - d. Consideration of EIPH COVID-19 Regional Response Plan **(Action)**..... Geri Rackow
7. Division Reports / Education
 - a. Community Health.....James Corbett
 - Community-Based Health Education Programs
 - b. Environmental HealthKellye Johnson
 - Approval of Revised Environmental Health Program Refund Policy **(Action)**
 - Memorandum of Understanding with Idaho Department of Environmental Quality
 - Subsurface Sewage Disposal Program
 - Land Development Program
 - c. Nutrition..... Angy Harwood
8. Board of Health Member Positions **(Action)**
 - a. Ratification of Reappointment of Commissioner Madsen **(Action)**
 - b. Physician Representative - Recognition of Dr. Barbara Nelson
 - c. Elections of Leadership Positions **(Action)**
9. EIPH Employee Recognition Geri Rackow
10. Executive Session – Personnel Matter [Idaho Code 74-206(1)(b)] **(Action)**
"To consider the evaluation, dismissal or disciplining of, or to hear complaints or charges brought against, a public officer, employee, or staff member..."

BOARD OF HEALTH MEETING MINUTES

April 29, 2021

7:00 a.m.

Virtual Meeting

PRESENT:

BOARD OF HEALTH MEMBERS

Bryon Reed, Commissioner, Chairman
Bill Leake, Teton County, Trustee
Blair Dance, Commissioner
Leah Madsen, Commissioner
Shayne Young, Commissioner
Barbara Nelson, MD, Vice Chair
Greg Shenton, Commissioner
Wayne Butts, Commissioner

STAFF MEMBERS

Gerri Rackow
James Corbett
Angy Harwood
Kellye Johnson
Amy Gamett
Steve Thomas

1. Call Board Meeting to Order

Chairman Reed called the meeting order at 7:00 a.m. This meeting is being held virtually and it is being streamed live through EIPH's YouTube channel. EIPH staff is present at the Idaho Falls office where there is also a space for the public to view in person.

2. COVID-19 Situational Report

a. Regional Hospital Report

Dr. Rachel Gonzales provided an update from the hospitals in our region and reported that they are not seeing a surge of COVID patients needing inpatient services at this time. They are working on processes to continue to care for COVID patients going forward. EIRMC currently has 16 COVID patients and staffing is adequate. Madison Memorial Hospital is partnering with BYU-I to provide COVID vaccine to the community.

b. COVID-19 Data Review

- Mr. Corbett reviewed the COVID Data Dashboard.
- Madison and Jefferson Counties have moved to the Minimal Risk Level and Bonneville County will move tomorrow to the Minimal Risk Level if the numbers stay down today.
- Testing positivity rate is decreasing.
- Information on the variant strains is reported on the state website.

c. Vaccination Rollout Update

- Ms. Gamett reviewed the statewide vaccine dashboard. Approximately 122,000 doses of COVID-19 vaccine have been administered throughout our health district, with nearly 50,000 of those doses being administered by EIPH. She reports that breakthrough cases are a small percentage.
- Pfizer is requesting approval from the Food and Drug Administration (FDA) to expand the use of its vaccine to include ages 12-15 years.
- The FDA recommended resuming the use of the Johnson & Johnson/Janssen Vaccine.
- EIPH will be moving towards on-site vaccinations for businesses. The goal is to make the vaccine easily accessible to anyone who wishes to receive it.

3. Approval of the Consent Agenda

MOTION: Commissioner Shenton made a motion to approve the April 29, 2021 Consent Agenda.

SECOND: Commissioner Young

ACTION: MOTION CARRIED UNANIMOUSLY

4. Legislative Update

Ms. Rackow provided an update on House Bill 316, the bill is on its way to the Governor for signature. The bill will go into effect 3/1/2022.

5. FY2021 Budget Adjustments

Mr. Thomas provided an update on the FY2021 budget and requested adjustments.

MOTION: Commissioner Shenton made a motion to approve the budget adjustments as presented.
SECOND: Commissioner Young
ACTION: MOTION CARRIED UNANIMOUSLY

6. Review/Approval of FY2020/2021 Capital Budget Allocations

Mr. Thomas proposed EIPH capital and operating reserve account designations.

MOTION: Commissioner Young made a motion to approve the operating reserve account designations as presented.
SECOND: Dr. Nelson
ACTION: MOTION CARRIED UNANIMOUSLY

7. Review/Approval of FY 2022 Compensation Plan

Ms. Rackow presented the FY2022 Change in Employee Compensation Plan (CEC).

MOTION: Mr. Leake made a motion to approve the CEC Plan as presented by Ms. Rackow
SECOND: Commissioner Shenton
ACTION: MOTION CARRIED UNANIMOUSLY

8. Review/Approval of Fiscal Year 2022 Budget Proposal

Ms. Rackow presented the FY2022 Budget Proposal. House Bill 316, once finalized, may require changes to the county appropriations later.

MOTION: Commissioner Butts made a motion to approve the FY 2022 Operating Budget as presented.
SECOND: Commissioner Shenton
ACTION: MOTION CARRIED UNANIMOUSLY

MOTION: Commissioner Dance made a motion to approve proposed FY 2022 County Contributions (historical apportionment, not including new amounts resulting from House Bill 316).
SECOND: Commissioner Young
ACTION: MOTION CARRIED UNANIMOUSLY

9. Revised 2021 Board of Health Meeting Schedule

Ms. Rackow presented the BOH meeting schedule for the remainder of 2021. The Board agreed on the schedule.

Chairman Reed adjourned the meeting at 9:10 a.m. The next meeting and Budget Hearing will be held on June 3, 2021 at 9:00 a.m.

Commissioner Bryon Reed, Chairman

Geri L. Rackow, Secretary

**EASTERN IDAHO PUBLIC HEALTH
SUBGRANT SUMMARY**

6/03/2021

NEW, RENEWED, & AMENDED SUBGRANTS

Subgrant/Contract Title	Grantor/Contractor	N (New) R(Renew) A(Amend)	Start Date	End Date	Last Funding Amount	New Funding Amount	Comments
Comprehensive Cancer	IDHW	A1	6/30/2020	6/29/2021	\$22,526.28	(\$12,000.00)	Reduced funding
COVID Vaccinations (Phase 3)	IDHW	N	5/3/2021	6/30/2024		\$447,796.00	Continued funding
Fit & Fall Proof/Physical Activity & Nutrition	IDHW	A1	7/1/2020	6/30/2021	\$85,373.00	(\$29,000.00)	Reduced funding
Housing Opportunities for Persons with AIDS (HOPWA)	Idaho Housing and Finance Association	R	6/1/2021	5/31/2024	\$95,725.00	\$97,542.00	3-year Renewal
Tuberculosis Control	IDHW	A3	1/1/2020	6/30/2022	\$4,694.00 (6 months)	\$10,947.00 (one year)	Extended term, added funding

Board Fiscal Notes
For the 10 Months Ended April 30, 2021
Board Meeting June 3, 2021

General Notes

- 1 For the 10 months ended April 30, 2021, EIPH's total expenditures for the year were 5.97% below the approved budget. This is based on the amended budget including new COVID funding amounts. COVID response is now 34.71% above budget but some of that is staff being moved out of other programs into COVID response support. Effect is to leave other divisions well under budget.
- 2 For the 10 months ended April 30, 2021, EIPH's total revenues were 18.62% above approved budget. Revenue now coming in related to the COVID response has pushed us well above original planned revenue year-to-date.

Month	Operating Account Balance	Operating Reserve Account Balance	Capital Reserve Account Balance	Total General Fund Cash Available	Millennium Fund Balance	Total Cash Available
Jul-20	366,590.24	4,601,414.16	1,731,382.32	6,699,386.72	98,349.29	6,797,736.01
Aug-20	432,984.31	4,606,179.18	1,731,382.32	6,770,545.81	96,930.24	6,867,476.05
Sep-20	543,176.21	4,360,096.17	1,731,382.32	6,634,654.70	84,841.51	6,719,496.21
Oct-20	347,272.11	4,363,523.62	1,731,382.32	6,442,178.05	84,025.61	6,526,203.66
Nov-20	550,266.00	4,366,752.51	1,731,382.32	6,648,400.83	80,585.99	6,728,986.82
Dec-20	409,835.16	4,369,911.98	1,731,382.32	6,511,129.46	77,119.88	6,588,249.34
Jan-21	976,779.52	4,372,655.41	1,731,382.32	7,080,817.25	76,401.27	7,157,218.52
Feb-21	1,116,285.36	4,374,600.81	1,731,382.32	7,222,268.49	75,906.29	7,298,174.78
Mar-21	1,138,335.04	5,276,115.86	1,731,382.32	8,145,833.22	74,501.56	8,220,334.78
Apr-21	1,333,148.70	5,277,786.74	1,731,382.32	8,342,317.76	71,766.27	8,414,084.03
May-21				-		-
Jun-21			-	-	-	-
Capital Reserve Detail						
	Restricted for Future Building Needs		1,387,000.00			
	Challis Building Replacement		600,000.00			
	Community Needs		172,500.00			
	Future 27th Payperiod		250,000.00			
	Future Operating Stabilization		600,000.00			
			3,009,500.00			
Designated and Authorized out of Operating Reserve						
	IT enhancements		150,000.00			
	Future Vehicle Purchases		240,000.00			
	Public Health Emergency		1,000,000.00			
	Building Maintenance		250,000.00			
	Legal Defense		100,000.00			
			1,740,000.00			
Cash Restricted by Grant or Donor.						
	Restricted for Mammograms		14,939.48			
	Regional Behavior Health Board		85,039.68			
	Citizen Review Pannel		41,122.44			
	State Home Visit		17,637.70			
	Millennium Fund		70,828.24			
	COVID Vaccine FEMA payments		654,540.00			
	FY21 State hold back		60,500.00			
	COVID Donations		217,744.24			
			1,162,351.78			

**Board Summary Report
Eastern Idaho Public Health
Expenditure Summary**

FY 2021

Last Updated 6/1/21 4:02 PM

DIVISION	Budget	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	YTD	Percent used	remaining
BOARD OF HEALTH	23,295	3,047.32	4,091.66	3,991.62	3,656.88	1,596.81	3,655.52	798.43	2,972.26	2,222.24	1,629.34	-	-	27,662.08	118.75%	-18.75%
EMERGENCY RESPONSE	1,644,100	44,346.44	101,800.56	104,434.29	155,330.76	134,297.30	182,743.15	201,755.37	300,143.02	327,196.00	388,573.56	-	-	1,940,620.45	118.04%	-18.04%
COMMUNITY HEALTH	1,572,008	84,764.95	100,721.48	96,134.52	94,322.23	66,499.29	83,759.78	63,729.43	61,692.29	75,716.44	128,521.06	-	-	855,861.47	54.44%	45.56%
HEALTHCARE TRANSFORMATION	61,369	2,606.19	2,122.37	2,242.66	3,709.26	2,118.00	2,176.42	2,055.77	2,056.96	2,981.96	3,957.13	-	-	26,026.72	42.41%	57.59%
CLINICAL SERVICES	3,085,207	146,767.70	192,716.94	257,250.37	242,748.32	163,799.04	345,803.19	142,075.33	129,876.90	153,028.04	147,733.43	-	-	1,921,799.26	62.29%	37.71%
NUTRITION	1,065,124	69,351.24	117,669.92	119,894.75	108,228.80	76,910.97	79,943.99	74,519.54	78,186.31	76,014.32	113,888.51	-	-	914,608.35	85.87%	14.13%
ENVIRONMENTAL	1,108,697	72,435.87	105,230.53	90,093.75	111,972.92	82,894.93	96,745.47	86,830.54	83,248.47	88,319.38	122,459.26	-	-	940,231.12	84.81%	15.19%
GENERAL SUPPORT	1,096,224	153,629.83	(11,688.24)	95,248.35	103,838.38	71,340.99	72,058.48	62,868.32	94,983.04	63,530.02	114,841.36	-	-	820,650.53	74.86%	25.14%
SUBTOTAL	9,656,024	576,949.54	612,665.22	769,290.31	823,807.55	599,457.33	866,886.00	634,632.73	753,159.25	789,008.40	1,021,603.65	0.00	0.00	7,447,459.98	77.13%	22.87%
BUILDING PROJECT	-	-	-	-	-	-	-	-	-	-	-	-	-	-	N/A	N/A
COMMUNICATIONS EQUIP	-	-	-	-	-	-	-	-	-	-	-	-	-	0.00	N/A	N/A
COMPUTERS	-	-	-	-	-	-	-	-	-	-	-	-	-	0.00	N/A	N/A
VEHICLES	68,171	-	-	22,723.53	-	-	45,447.06	-	-	-	-	-	-	68,170.59	100.00%	0.00%
EQUIPMENT	-	-	-	-	-	-	-	-	-	-	7,313.00	-	-	7,313.00	#DIV/0!	N/A
LOAN PAYMENT	-	-	-	-	-	-	-	-	-	-	-	-	-	0.00	#DIV/0!	#DIV/0!
CAPITAL OUTLAY TOTAL	68,171	-	-	22,723.53	-	-	45,447.06	-	-	-	7,313.00	-	-	75,483.59	110.73%	-10.73%
TOTAL	9,724,195	576,949.54	612,665.22	792,013.84	823,807.55	599,457.33	912,333.06	634,632.73	753,159.25	789,008.40	1,028,916.65	-	-	7,522,943.57	77.36%	22.64%

PERCENTAGE OF TIME ELAPSED AND TIME REMAINING **83.33%** **16.67%**

Operating Cash Inflow	1,465,853.52	664,891.87	569,549.66	709,578.81	868,059.17	659,715.34	1,266,798.74	866,802.62	1,653,472.00	1,273,678.13	-	-	-	9,998,399.86
Operating Cash Outflow	565,371.92	595,151.83	694,805.97	902,871.36	665,276.01	755,005.76	697,829.56	725,864.36	731,311.73	1,072,615.88	-	-	-	7,406,104.38
Cash Provided (Used) by Operations	900,481.60	69,740.04	(125,256.31)	(193,292.55)	202,783.16	(95,290.42)	568,969.18	140,938.26	922,160.27	201,062.25	-	-	-	2,592,295.48
Cash used for Capital Expenditures	-	-	22,723.53	-	-	45,447.06	-	-	-	7,313.00	-	-	-	75,483.59
Cash to (from) Reserve	900,481.60	69,740.04	(147,979.84)	(193,292.55)	202,783.16	(140,737.48)	568,969.18	140,938.26	922,160.27	193,749.25	-	-	-	2,516,811.89

BOARD SUMMARY REPORT
Eastern Idaho Public Health District
Revenue and Cash Flow

FY 2021

Last Updated 6/1/21 2:45 PM

CONTRACT REVENUE	BUDGET	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	YTD	Percent of Budget
Clinical Services Contract Total	695,700	43,717	15,430	66,284	66,739	85,637	56,156	79,430	53,298	47,398	38,724	-	-	552,813.70	79.46%
Nutrition Contract Total	1,157,278	87,591	82,311	131,731	134,337	130,197	91,631	95,097	88,308	93,457	90,403	-	-	1,025,061.47	88.58%
Environmental Health Contract Total	236,688	15,112	13,852	18,607	20,022	21,827	16,953	16,707	19,029	20,356	19,263	-	-	181,727.13	76.78%
Public Health Disaster	1,863,495	40,432	37,617	63,908	39,506	13,415	42,134	26,814	586,315	707,552	399,689	-	-	1,957,382.71	105.04%
Healthcare Transformation	69,500	24,349	4,167	10,897	4,928	5,272	738	(15,737)	653	34,063	4,912	-	-	74,240.90	106.82%
Community Health Contract Total	1,657,504	336,580	78,854	108,568	67,889	97,865	64,320	80,422	64,529	39,185	64,568	-	-	1,002,780.73	60.50%
TOTAL CONTRACTS	5,680,165	547,781	232,230	399,995	333,422	354,212	271,932	282,733	812,132	942,011	617,558	-	-	4,794,006.64	84.40%

FEE REVENUE		Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	YTD	Percent of Budget
Clinical Services Fees Total	1,104,000	113,310	79,845	107,795	155,615	229,197	177,934	83,055	177,018	367,182	358,757	-	-	1,849,706.69	167.55%
Community Health Fees Total	0	-	194,409	878	205	1,215	668	-	506	-	-	-	-	197,881.20	#DIV/0!
Environmental Health Fees Total	688,550	80,861	87,605	74,942	88,107	150,512	91,911	68,979	46,450	95,158	134,742	-	-	919,266.50	133.51%
TOTAL FEES	1,792,550	194,171	361,860	183,615	243,927	380,924	270,513	152,034	223,974	462,340	493,498	-	-	2,966,854.39	165.51%

SUB-TOTAL FEES & CONTRACTS	7,472,715	741,952	594,090	583,609	577,349	735,136	542,445	434,767	1,036,105	1,404,350	1,111,056	-	-	7,760,861.03	103.86%
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GENERAL RECEIPTS		Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	YTD	Percent of Budget
County Appropriations	1,120,703	145,960	-	134,246	69,118	117,902	72,657	158,951	65,125	76,549	122,354	-	-	962,861.42	85.92%
INTEREST	20,000	5,296	4,765	3,912	3,432	3,229	3,159	2,743	1,945	1,515	1,671	-	-	31,668.28	158.34%
STATE APPROPRIATIONS	1,191,400	585,950	-	-	-	-	-	605,450	-	-	-	-	-	1,191,400.00	100.00%
SURPLUS PROPERTY	0	-	-	700	-	-	-	-	-	500	-	-	-	1,200.00	N/A
REFUNDS	0	-	-	-	-	-	-	-	-	-	-	-	-	-	N/A
Miscellaneous	0	5	-	1,179	3,286	57	38,601	80	-	3,609	1,198	-	-	48,014.83	N/A
TOTAL GENERAL REVENUE	2,332,103	737,210	4,765	140,037	75,837	121,187	114,417	767,225	67,070	82,173	125,223	-	-	2,235,144.53	95.84%

GRAND TOTAL	9,804,818	1,479,163	598,855	723,647	653,186	856,324	656,862	1,201,991	1,103,176	1,486,524	1,236,279	-	-	9,996,005.56	101.95%
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		AMOUNT OF YEAR ELAPSED												83.33%	
Total Clinical Services	1,799,700	157,027	95,275	174,078	222,354	314,834	234,090	162,485	230,316	414,580	397,481	-	-	2,402,520.39	133.50%
Total Nutrition Revenue	1,157,278	87,591	82,311	131,731	134,337	130,197	91,631	95,097	88,308	93,457	90,403	-	-	1,025,061.47	88.58%
Total Environmental Revenue	925,238	95,973	101,457	93,549	108,129	172,339	108,864	85,686	65,479	115,514	154,004	-	-	1,100,993.63	119.00%
Total Healthcare Transformation	69,500	24,349	4,167	10,897	4,928	5,272	738	(15,737)	653	34,063	4,912	-	-	74,240.90	106.82%
Total Community Health	1,657,504	336,580	273,264	109,446	68,094	99,081	64,988	80,422	65,034	39,185	64,568	-	-	1,200,661.93	72.44%

CASH FLOW SUMMARY		Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	YTD	Percent of Budget
Total Revenue and Appropriations	9,804,818	1,479,163	598,855	723,647	653,186	856,324	656,862	1,201,991	1,103,176	1,486,524	1,236,279	-	-	9,996,005.56	
Decrease (Increase) Accounts Receivable		(13,309)	66,037	(154,097)	56,393	11,735	2,854	64,807	(236,373)	166,948	37,399	-	-	2,394.30	
Change in Accrued Exp/Revenue		11,578	17,513	74,484	(79,064)	(65,819)	111,880	(63,197)	27,295	57,697	(51,012)	-	-	41,355.60	
Total Expenditures	9,724,195	576,950	612,665	792,014	823,808	599,457	912,333	634,633	753,159	789,008	1,028,917	-	-	7,522,943.57	
Change in Cash		900,482	69,740	(147,980)	(193,293)	202,783	(140,737)	568,969	140,938	922,160	193,749	-	-	2,516,811.89	
Cash Balance Beginning of period		5,897,254	6,797,736	6,867,476	6,719,496	6,526,204	6,728,987	6,588,249	7,157,219	7,298,157	8,220,317	8,414,066	8,414,066	5,897,254.41	
Cash Balance End of Current Period		6,797,736	6,867,476	6,719,496	6,526,204	6,728,987	6,588,249	7,157,219	7,298,157	8,220,317	8,414,066	8,414,066	8,414,066	8,414,066.30	

Cash Balance Reserved by Board for Capital Projects		1,731,382	1,731,382	1,731,382	1,731,382	1,731,382	1,731,382	1,731,382	1,731,382	1,731,382	1,731,382	-	-	-	
Unrestricted Cash Balance		5,066,354	5,136,094	4,988,114	4,794,821	4,997,605	4,856,867	5,425,836	5,566,774	6,488,935	6,682,684	8,414,066	8,414,066	8,414,066.30	

Eastern Idaho Public Health Employee Compensation Policy

Revised 5/12/2021

It is the intent of Eastern Idaho Public Health (EIPH) to provide a competitive employee compensation and benefit package that will attract qualified applicants; retain employees who have a commitment to public service excellence; motivate employees to maintain high standards of productivity; and reward employees for outstanding performance. The long-term success of this system is contingent on a strategy of reasonable and appropriate funding to compensate employees based on their performance relative to specific measurements and standards.

- ~~• For FY2022, a 2% payline adjustment will be made to the State of Idaho's Compensation Schedule. Effectively, this increases the minimum, policy, and maximum pay for each pay grade (with one exception) by 2%. The result is that with no other changes in compensation, employees' current compa-ratios will decline.~~
- ~~• Several health districts have adopted policies of starting salaries at either 75% or 80% of policy. EIPH's policy is to start employees at the minimum pay rate (currently 70% of policy).~~
- ~~• It is EIPH's practice to critically analyze all positions that become vacated due to retirement or resignation, etc. At times, positions may not be refilled and critical tasks reassigned to other staff members. While we have managed this way for many years, with increased workload in some programs, our staff are stretched very thin, especially when covering for staff who call in sick or are on vacation.~~

AGENCY POLICY

It is the intent of this policy to ensure a consistent and fair approach to EIPH's hiring process and to provide specific parameters which determines salary rates for newly hired and permanent employees. EIPH adopts the Rules of Division of Human Resources and Personnel Commission, IDAPA 15.04.01, as required and incorporates into its Compensation Plan those items in Idaho Code 67-5309B. In addition to these rules and statutes, EIPH has adopted additional guidelines which are outlined in this plan.

SECTION 1: STARTING SALARY DECISIONS

EIPH hires all employees, permanent and temporary, at a rate that reflects the quantity and quality of candidates' experience and education levels. Starting salaries are based on the worth of that particular job to our agency, and not altered to meet a job applicant's personal, non-job related situation or expenses. Advanced salary placement may be at the appointing authority's discretion considering available budget, market, applicant's work experience and qualifications, and relationship to existing staff salaries within the pay grade assigned to the employee's classification. EIPH adheres to all state and federal wage laws.

When filling a vacant position, candidates may be hired at one of three levels. The levels are:

- LEVEL 1:** Generally, individuals should be hired at 70% of the job classification's pay scale. Possible exceptions may include hard-to-fill positions or those in difficult geographical areas, which would fall under Level 2.
- LEVEL 2:** Individuals that bring a level of experience to the position or those being recruited for hard-to-fill positions may be hired up to 85% of policy, depending on work experience and education. (See Appendix A.) Division Directors have authority to determine Level 2 pay in accordance with the District's "Hiring Salary Criteria for Level II Employees" found in Appendix A, without further approval from District Director. Any variation from the criteria must be approved by the District Director.
- LEVEL 3:** Individuals that have extensive experience and/or relevant education, or are being considered for hard-to-fill positions, may be hired at or above Policy (comparable to market rates). The starting salary for anyone hired at Level 3 must be approved by the District Director.

Appointed Positions

When an individual is appointed by the agency's Board of Health to a permanent position, his/her salary will be at the discretion of the District Board of Health.

SECTION 2: EXISTING EMPLOYEES

Acting Appointments

An employee serving in an elevated classification in an acting capacity will be paid in the new pay grade as though he or she had actually been promoted. At the expiration of the acting appointment, the employee will be returned to the class, pay grade, and pay rate held immediately preceding the acting appointment.

Compensatory Time

All employees, except executives, shall earn compensatory (comp) time when overtime is worked. Division Directors should monitor the accrual of comp time by their employees and discuss employees' comp time balances in excess of forty (40) hours with the District Director to determine the need for continued overtime. No employee may be authorized to earn comp time when his/her balance exceeds 40 hours without written authorization from the Director.

Demotions

If an employee is demoted for disciplinary reasons, the employee's salary shall be adjusted within the lower pay range with approval from the Division Director and Director.

Holiday Pay

Employees do not typically work on holidays; however, there are occasions when this is necessary. If such time is needed, employees must obtain written authorization from his/her Division Director, with a copy being provided to Human Resources. When possible, employees should adjust their time during the holiday week so that no more than 40 hours of time is coded.

Internal Salary Equity and Concerns

All employees are encouraged to discuss salary-related concerns with their supervisor to reach mutually satisfactory resolution at the lowest level possible. If an employee believes there is a problem with his/her compensation due to inequities within EIPH, he/she is strongly encouraged to bring this issue to the forefront. No retaliation will occur for expressing such concerns or using the problem-solving process. All requests for salary increases must be approved by the Division Director and then by the Director.

Geographic Pay Differential

In alignment with the District's mission, the Director may designate non-performance related premium pay for work locations where recruitment and retention is difficult due to economic conditions and cost of living. EIPH will determine the amount of geographic pay for these locations using survey data from the Idaho Division of Human Resources and economic indicators to determine eligible areas. For district specific classifications, the Director may designate a geographic differential for classifications with high turnover rates and extended vacancy rates. All employees in the same classification and same work location shall be provided an equitable geographic pay differential.

Geographic pay premiums are calculated on a percentage of base salary. Such percentage is translated to a cash amount per pay period and added to base pay.

Geographic pay is tied to work location. The geographic pay differential is discontinued when an employee takes an assignment at a work location not deemed eligible for a geographic differential. A geographic pay differential must begin and end at the start of the pay period and may not be divided by hourly or daily increments.

New Hire Salary Inequity

There may be occasion when a new person is hired into a job class at a higher pay rate than existing employees doing the same job. The District Director may approve an increase in pay for the existing staff to address the issue of internal salary equity.

On-call Time

On-call time will be granted to employees who are designated by their supervisor or the District Director to be on-call according to specific criteria for full or partial on-call shifts. The rate at which time off with pay will accumulate is one hour of On Call Time Earned (OCE) will be earned for each weekday during which an individual is required to be on-call; for each weekend day, two hours OCE will be earned, up to a total of no more than 9 hours per week. Any time actually worked while in on-call status will be coded on their time sheet as Actual time worked.

Overtime Pay

EIPH will rarely, and only when the District Directors determines it as a mission-critical necessity, provide cash compensation for overtime work. All employees will be informed of their status in relationship to overtime expectations as part of new employee orientation or pre-employment discussions. Unless cash payment is specifically authorized by the Director or designee, all overtime will result in compensatory time.

Performance Evaluations

In conducting the required annual evaluation or probation evaluation, EIPH will comply with the State's various performance standards levels. EIPH's philosophy is that frequent and on-going

feedback is needed between an employee and his/her supervisor in order for the employee to be successful on the job. All new employees, permanent and temporary, will have formal performance evaluations at three and six months from their hire date, and prior to completion of their entrance probation. Thereafter, annual performance evaluations will be conducted.

Promotions

Upon promotion or in cases where a position class has been upgraded, the employee's salary will be increased, at a minimum, to the beginning of the new pay range. However additional salary increase may be considered based on a case-by-case scenario by the District Director and Division Director with consideration of the promoted employee's current salary compared to other employees in like positions with similar education, experience, qualifications, market considerations, and budgetary constraints.

Reclassifications

When a position is reclassified to a class in a higher pay range, the employee's salary will be increased, if necessary, to the beginning of the new pay range. Any additional increase will be considered on a case-by-case basis and must be approved in advance by the Division Director and District Director.

If an employee's position is reclassified downward, the employee's salary will remain the same unless it is above the new pay range. In these instances, the employee's salary will be adjusted to the maximum hourly rate of the lower pay range.

Reinstatement

Per Idaho Division of Human Resources Rule 072.04, an employee reinstating from layoff shall be paid at the same rate the employee was receiving at the time of the layoff. All other reinstatements will be treated in the same manner as starting salaries.

Shift Differential

EIPH does not have a need for shift differential pay. Overtime work is minimal, but it is compensated for in accordance with Fair Labor Standards Act (FLSA) and state law requirements.

Transfers

Transfers will be addressed in the same manner as starting salaries. A lower or higher rate may be approved by the District Director, depending on the circumstances under which the transfer was made.

SECTION 3: SALARY INCREASES

Maintaining a competitive compensation system is based on the following philosophy as outlined in Idaho Code 67-5309A:

1. Advancement in pay shall be based on job performance and market changes.
2. Pay for performance shall provide faster salary advancement for higher performers based on a merit increase matrix.
3. Employees below the state's midpoint market average (policy) in a salary range who are meeting expectations in the performance of their jobs shall move through the pay range toward the midpoint market average.

EIPH agrees with the state philosophy (IC 67-5309A) that it is vital to fund necessary compensation adjustments each year to maintain market competitiveness in the compensation. In order to provide this funding commitment in difficult fiscal conditions, it may be necessary to increase revenues, or to prioritize and eliminate certain functions, programs or reduce the overall number of employees in a given year, or any combination of such methods. However, final implementation of such decisions is contingent upon approval by EIPH's Board of Health.

No employee shall advance in pay without a performance evaluation on file certifying that the employee meets the performance criteria of the assigned position. For merit pay purposes, when funding is available, EIPH considers employees who have successfully completed their entrance probation period with an "Achieves Performance Standards" evaluation rating or better. Employees on entry or promotional probation and those on a formal "Performance Improvement Plan" due to a "Does Not Achieve Performance" rating are not eligible for merit pay increases until such time their performance improves and is evaluated at "Achieves Performance Standards" or better rating. To qualify for any salary increase, the employee must have a current (completed within the last 12 months) performance evaluation on file.

Salary increases will be based on performance/merit, market/policy, or a combination of such factors **as outlined in the district's Board-approved Change in Employee Compensation Plan developed for each Fiscal Year.**

Cost Savings Bonuses

Cost Savings Bonuses may be considered on a case-by-case basis. Before the option is used, the cost savings must be quantified, verified by the District's Fiscal Officer, and carefully considered by the District Director before making any cash award. It is the intent of EIPH to award such a bonus in incremental payments as actual cost savings are realized. Cost saving bonuses will not exceed \$2,000 for any one suggestion.

Performance Bonuses

A performance bonus is a one-time lump sum payment to an employee to recognize exemplary service. EIPH may use performance bonuses throughout the year to recognize and reward an employee's performance. Amounts will vary and will relate to the base salary and the individual's performance on a project or overall basis. All performance bonuses will be based on the availability of funds. Performance bonuses up to a total of two thousand dollars (\$2,000) may be awarded to individuals each fiscal year (IC 67-5309D). A memo documenting such performance will be provided to the employee and placed in his/her personnel file.

Retention Pay

EIPH will determine the need for retention pay on a case-by-case basis. These awards are typically lump sum. If an employee indicates another competitive job offer or if the Agency deems market conditions exist, the District Director and Division Director will consider a retention award based on the market for the particular job and the salaries of all other employees in the same classification. If such retention awards are deemed appropriate in order to keep existing staff, the award may be considered for all employees in the same classification. Retention pay may be granted when an employee has completed at least six months of work that achieves performance standards.

Other Salary Adjustments

EIPH may consider other pay delivery options as outlined in IC 67-5309D as appropriate.

Salary Increases-Conditional

Temporary increases may also be awarded in recognition of additional assignments or acting appointments.

SECTION 4: ANNUAL REVIEW OF POLICY

Members of District’s Administrative Team will review this policy on a periodic basis and make recommendations to the Board for adjustments as appropriate.

Original Approval: By EIPH Board of Health on April 29, 2021

Revisions Ratified: By EIPH Board of Health on June 3, 2021

Bryon L. Reed, Board of Health Chairman

Geri L. Rackow, Director

REVISSED

APPENDIX A Hiring Salary Criteria for Level II Employees

NOTE: Increased percentage points may be granted by a Division Director for Level II employees if the employee has additional experience, education, skill, or licenses that would be of benefit to the agency and that are **NOT** a requirement of the job description.

<u>Education</u>	<u>% Allowed</u>
For each degree above the job's minimum requirement:	
Technical Degree or Associate Degree	2
BS/BA	2
Masters Degree	2
Doctorate	2
	Maximum of 8%
Example: The job requires high school diploma and the individual has BS degree would equal 4% increase over job class' minimum wage.	

<u>Experience</u>	<u>% Allowed</u>
Each year of related experience	2
	Maximum of 5 years or 10%
Example: If the employee worked for another health district doing a similar job they could receive a 2 percentage point increase for each year worked up to maximum of 10% increase over job class position minimum wage.	

<u>Bilingual</u>	<u>% Allowed</u>
Fluent in Spanish (verbal and written)	Maximum of 2%
Example: If the individual had bilingual skills that would be of benefit to the agency, the employee would receive 2% increase over job class position minimum wage.	

<u>Certificate or Professional License</u>	<u>% Allowed</u>
Related Professional License or Related Certification Only	2 Maximum of 2%

MAXIMUM CRITERIA PERCENTAGE ALLOWED OVER A JOB CLASS' MINIMUM WAGE IS 15%

Eastern Idaho Public Health Employee Compensation Plan

Fiscal Year 2022

Revised 5/12/21

It is the intent of Eastern Idaho Public Health (EIPH) to provide a competitive employee compensation and benefit package that will attract qualified applicants; retain employees who have a commitment to public service excellence; motivate employees to maintain high standards of productivity; and reward employees for outstanding performance. The long-term success of this system is contingent on a strategy of reasonable and appropriate funding to compensate employees based on their performance relative to specific measurements and standards.

In accordance with guidance from the Idaho Division of Human Resources and the Idaho Division of Financial Management, the following have been included in EIPH's Compensation Plan for FY 2022.

IMPLEMENTATION DATE:

1. Due to salary savings in FY2021, the FY2022 CEC will be implemented four weeks early on May 16, 2021. It will be reflected on employees' June 11, 2021 paycheck.
2. EIPH employees hired on or before May 14, 2021, will be eligible for the FY2022 CEC.

FY2022 COMPONENT 1 – Payline Move

The FY 2022 pay schedule will be adjusted upward by 2%. Therefore, any employee with a rate of pay that falls below the FY2022 minimum rate of his or her pay grade on June 13, 2021, must receive a rate adjustment to at least the new minimum. Performance is not a factor in these salary changes and probationary employees must also receive this increase.

- EIPH has 11 employees who will be impacted by this payline adjustment. All will be moved to the new payline minimum, effective May 16, 2021.

FY2022 COMPONENT 1 – Performance-Based Pay Increases

1. The performance-based pay increases will apply to permanent, temporary, group, and non-classified employees. *With the exception of the Health District Director, all non-classified employees, both temporary and permanent, are assigned a pay grade upon hire.*
2. To receive a performance-based pay increase, employees must:
 - a. Have a current (within the last 12 months) performance evaluation rating of "Achieves Performance Standards" or better, and
 - b. Complete the statewide respectful workplace and cyber security training.

3. For employees in a **probationary period**:
 - a. Full Time employees' CEC will be implemented at the successful completion of their probationary period and a performance evaluation with a rating of "Achieves Performance Standards" or higher.
 - b. Part time (less than 30 hours per week) employees' CEC will be implemented at the completion of six months of employment and with a performance evaluation with a rating of "Achieves Performance Standards" or higher.
 - o For FY2022, there is only one employee included in this category. This particular employee has been with our agency since April of 2018; however, only works one day per month. As a result, the employee has not met the 1040 hours' probationary period and won't for quite some time. This is a mission critical position for our agency and the employee is performing well in the position.

4. Change in Employee Compensation Distribution Matrix: As EIPH is not a state agency, but an independent governmental agency as set forth in Idaho Code 39-401 governed by an independent district board of health, EIPH's Board of Health has authorized the following performance-based matrix for FY2022.

		PERFORMANCE			
		(number in parentheses indicates the projected number of employees in each category; however, this is subject to change based on the completion of the performance evaluations)			
		Does not Achieve	Achieves	Solid	Exemplary
COMPA-RATIO DISTRIBUTION	100%+	0%	5.25% (0)	5.75% (5)	6.25% (1)
	90-99%	0%	5.50% (1)	6.00% (19)	6.50% (0)
	70-89%	0%	5.75% (22)	6.25% (53)	6.75% (12)

DIRECTOR PAY CHANGES

Any pay changes for the EIPH Director will be determined by the EIPH Board of Health. However, as directed by Idaho Division of Human Resources and Idaho Division of Financial Management, the EIPH Board of Health must make a recommendation of the Director's pay increase to the Governor for review/approval.

IN JULY 2020, IDAHO'S RESPONSE to the COVID-19 pandemic transitioned from a statewide response to a regional response, and the following plan was developed by the Board of Eastern Idaho Public Health (EIPH). The plan is applicable to the following counties within EIPH's region: Bonneville, Clark, Custer, Fremont, Jefferson, Lemhi, Madison, and Teton.

As outlined in Idaho Code §39-414(2), Idaho's public health districts shall "do all things required for the preservation and protection of the public health and preventive health..." The ultimate goal of this plan is to slow the spread of COVID-19 (a new highly infectious communicable disease), to protect public health, and to ensure during the COVID-19 pandemic that healthcare capacity is maintained for ALL patients needing care—not just COVID-19 patients. Furthermore, we want to minimize the impact to our economy, our children's education, and individuals' physical and mental health as much as possible while still protecting public health. EIPH's Board of Health and Director will be responsible for the implementation of this plan.

This plan will not be in effect indefinitely; however, it is not possible to determine the exact length of time it will be needed. The risk assessment and mitigation strategies included in the plan will be in effect until a COVID-19 vaccine is readily available to the public, treatment options for COVID-19 are readily available, other mitigating factors currently not known are identified—OR until the plan is modified or rescinded by the Board of Health.

THIS PLAN IS A FLUID DOCUMENT AND SUBJECT TO CHANGE AS MORE INFORMATION BECOMES AVAILABLE.

WHAT TO KNOW ABOUT EIPH'S COVID-19 RISK LEVELS:

- The risk levels may be applied at county, geographic, or regional level.
Different parts of EIPH's region may be at different risk levels.
- In **ALL** risk levels, practice everyday preventive measures (see page 3).

■ MOVEMENT BETWEEN LEVELS

- Advancement to a higher risk level can occur any time the identified rates of active cases exceeds a designated threshold for three consecutive days (see page 2).
- Reversal to lower risk level can occur when a county has been below a metric's threshold for the most recent consecutive 14-day period.
- EIPH officials will be in close communication and collaboration with elected officials of local jurisdictions within the region.

It is important to note that local elected officials have the authority to implement their own more restrictive measures to do what they feel is necessary to protect the public health of the residents within their jurisdictions.



COVID-19 HOTLINE • 208-522-0310 • 855-533-3160 (TOLL FREE)

E-mail: CovidQuestions@EIPH.Idaho.gov

HOSPITALIZATIONS ARE THE FOUNDATION OF THIS PLAN. The goal of the plan’s public health mitigation measures and recommendations is to slow the spread of COVID-19 in order to *protect individuals* and to *maintain healthcare capacity* in our region. The Risk Levels are based on the number of hospitalizations that we would expect to result from the positive cases of COVID-19. EIPH continually monitors the COVID-19 hospitalization rate for our eight-county district, which is reported on the Data Dashboard on our website (www.EIPH.Idaho.gov). Obviously, the higher number of cases, the more hospitalizations that will occur, putting stress on our hospitals’ ability to maintain capacity—not just physical bed capacity, but more importantly, healthcare personnel to care for the patients.

ACTIVE CASE RATES of COVID-19 are used to establish the Risk Levels in this plan. An active case is:

A confirmed or probable case of COVID-19 that is currently being monitored by EIPH. A case is considered infectious during the monitoring period, which is generally 10 days from onset of COVID-19 symptoms.

- **Confirmed Case:** A person with a positive laboratory test result for SARS-CoV-2, the virus that causes COVID-19, using a molecular amplification (PCR, NAA) technique.
- **Probable Case:**
 - ⇒ A person with a positive laboratory test result for SARS-CoV-2 (COVID-19) using a non-molecular amplification (antigen) technique OR
 - ⇒ A person who develops symptoms after being in close contact with a confirmed or probable case without being tested using a molecular amplification (PCR, NAA) technique.

For situational awareness, EIPH reports daily case counts of COVID-19, the number of active cases and rate by county, and much more on our website.

EIPH COVID-19 RISK LEVELS

Based on Rate of Active Cases per 10,000 population

(The numbers listed by county represent the approximate number of active cases needed for that county to reach the respective rates.)

	MINIMAL RISK <15/10,000	MODERATE RISK 15/10,000	HIGH RISK 30/10,000	CRITICAL RISK 45/10,000
LEVEL OF COMMUNITY TRANSMISSION	ON TRACK FOR CONTAINMENT	WIDESPREAD	ACCELERATED	TIPPING POINT
BONNEVILLE COUNTY	<180	180	360	540
CLARK COUNTY	0	case-by-case basis	case-by-case basis	case-by-case basis
CUSTER COUNTY	<6	6	13	19
FREMONT COUNTY	<20	20	40	60
JEFFERSON COUNTY	<45	45	90	135
LEMHI COUNTY	<12	12	24	36
MADISON COUNTY	<60	60	120	180
TETON COUNTY	<18	18	36	54
OTHER METRICS MONITORED	STAFFED HOSPITAL BED OCCUPANCY IS AT 100% AND SURGE CAPACITY ¹ CANNOT BE MAINTAINED OR CRISIS STANDARDS OF CARE ² ARE IMPLEMENTED			
	¹ The maximum number of patients that a hospital can safely expand to during a time of emergency. ² Guidance to help guide ethical decision-making for how to triage medical care when it has to be rationed. https://publicdocuments.dhw.idaho.gov/WebLink/DocView.aspx?id=11746&dbid=0&repo=PUBLIC-DOCUMENTS&cr=1			

PUBLIC HEALTH MITIGATION MEASURES *REGARDLESS* OF LEVEL OF COMMUNITY SPREAD

MINIMAL RISK Community Spread = On Track for Containment	MODERATE RISK Community Spread = Widespread	HIGH RISK Community Spread = Accelerated	CRITICAL RISK Community Spread = Tipping Point
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While EIPH's mitigation measures do not change between these three risk levels, it is important for us to provide situational awareness to the public regarding the level of community spread of the virus so individuals can make informed decisions for themselves and their families.

Everyone is asked to follow these everyday preventive measures to keep themselves safe and minimize the spread of COVID-19:

- Stay home if you are sick.
- Wash hands frequently for at least 20 seconds or use hand sanitizer.
- Maintain physical distance of at least 6 feet from others outside of your immediate family/household members whenever possible.
- Wear face coverings that fully cover the nose and mouth in public when physical distancing is not possible or is hard to maintain. ***This is important because one can be infected with the virus and spread it to others for up to two days before symptoms begin.***
- Carefully monitor your health (refer to [EIPH's COVID-19 Decision Tree](#) for more info).
- Seek a COVID-19 vaccine when it becomes available to you.
- If you are diagnosed with COVID-19, please follow recommendations from EIPH and the [Centers for Disease Control and Prevention](#) (CDC) for isolating during your infectious period (10 days from symptom onset). If you have close contact (within 6 feet for more than 15 minutes) with someone who has tested positive for COVID-19, you should quarantine for 10 days from your last close contact with them OR 7 days with a negative COVID-19 test conducted after day 5 of exposure unless you are fully vaccinated against COVID-19 in accordance with [current CDC guidance](#).



In addition, as risk levels increase, EIPH recommends the following:

- Schools should implement their School Board-approved plans for the various levels of community transmission.
- Hospitals should implement their contingency plans for handling an increased volume of hospitalizations.
- High-risk populations (older adults and people with underlying health conditions) and those caring for high-risk populations should take extra measures to protect themselves from the virus (see page 4).
- Consider other public health recommendations to minimize your exposure to COVID-19 (see page 4).
- EIPH will continue to work with local community leaders (elected officials, school officials, law enforcement, businesses, and other stakeholders) on enhanced mitigation strategies and education needs for their respective jurisdictions.

If the COVID-19 Pandemic reaches a critical level in EIPH's region, the EIPH Board of Health may recommend/ implement other measures based on specific situation(s) occurring within a respective county, a region, or the entire health district.

PUBLIC HEALTH RECOMMENDATIONS FOR SPECIFIC POPULATIONS/ACTIVITIES

HIGH-RISK POPULATIONS

Individuals at higher risk of severe illness with COVID-19 include older adults and people of any age with:

- Chronic lung, heart, kidney, or liver disease or someone who smokes
- Obesity, diabetes, hypertension, or high blood pressure
- Immunocompromised conditions
- Pregnancy

In addition to always following the key preventive measures of maintaining physical distance from others, wearing a face covering, and increased hand hygiene, take extra precautions to protect yourself, especially as the level of community transmission increases.

- Limit close physical interaction with other people, especially if they are sick.
- Make sure you have an adequate supply of food, medication, and other essential items. Use curbside and delivery services to minimize close contact with others.
- Maintain social connections with your loved ones from a distance or while taking extra precautions.
- If you live alone, seek out a “buddy” who can check on you and help provide support if needed.
- Avoid large gatherings of all types and being in crowds.
- Do not postpone seeking medical care for any of your health conditions. And, if you contract COVID-19, seek appropriate medical care early.

For more information, visit: <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/index.html>

BUSINESSES

- Ensure physical distancing as much as possible between: employees; employees and customers; and customers (rearrange seating) from other groups.
- Where feasible, provide teleworking opportunities for high-risk staff or if physical distancing between staff cannot be maintained.
- Require masks of employees and customers.
- Consider special business hours for high-risk individuals.
- Provide opportunities for increased hand hygiene for employees/customers.
- Increase cleaning/sanitizing of your facility.
- Provide contactless service where possible (curbside and delivery services, payment options, etc.).
- Provide signage, announcements, and physical markings to promote physical distancing and other protective measures.
- Implement policies that encourage employees to stay home when sick.
- Work with EIPH when you have a positive case or an exposure in your business (208-533-3219).

For more information, visit: https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/businesses-employers.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fcommunity%2F

COVID HELP NOW LINE

This resource offers statewide support for anyone challenged by the stress associated with the global pandemic.

Call or Text 986-867-1073 or Call Toll Free 866-947-5186

www.ioem.idaho.gov/covidhelpnow



CONGREGATE LIVING FACILITIES

This include nursing homes, assisted living facilities, correctional facilities, homeless shelters, and other shared housing facilities:

- Closely monitor health of all staff and residents. Ensure staff who are sick **DO NOT WORK** until COVID-19 is ruled out.
- Encourage staff to follow all public health recommendations outside of work.
- Consider 14-day quarantine for new residents to the facility per CDC guidelines.
- Cohort staff and residents as much as possible.
- Ensure physical distancing occurs as much as possible.
- Consider requiring staff to wear masks at all times while working inside the building.
- Use outdoor space as much as possible.
- High-risk staff should not have close contact with residents who have suspected or confirmed COVID-19, if possible.
- When residents temporarily leave the facility, follow public health recommendations for masking and physical distancing from others to prevent any possible exposure.
- Increase testing (screening and surveillance) as much as possible, in accordance with respective regulatory authority guidelines.
- Ensure plans are in place to handle an outbreak in the facility.
- Increase communication to residents and staff regarding policies, protective measures being implemented, and contingency plans.
- As risk levels increase, consider limiting visitors to the facility as well as residents leaving the facility to prevent possible exposures to residents.

For more guidance, visit: <https://coronavirus.idaho.gov/ltc/> and <https://www.cdc.gov/coronavirus/2019-ncov/community/shared-congregate-house/guidance-shared-congregate-housing.html>

TRAVEL

- Prior to travel, evaluate the COVID-19 risk level at your planned destination. Two good sources are: <https://globalepidemics.org/key-metrics-for-covid-suppression/> and <https://www.cdc.gov/coronavirus/2019-ncov/travelers/travel-during-covid19.html>. Also, check for any travel restrictions involving your destination.
- Do not travel if you are sick.
- During your trip, follow public health recommendations of maintaining physical distance between you and others, wear a face covering, wash your hands frequently, and avoid contact with anyone who is sick.
- As community transmission of COVID-19 increases, consider minimizing non-essential travel.
- Employers may consider asking employee to quarantine for 14-days following travel to minimize risk of exposure in the workplace.

GATHERINGS/SOCIAL EVENTS

Small gatherings of extended family members/friends are a primary source of spread of COVID-19, likely due to people feeling more comfortable in these more intimate settings and relaxing public health precautions.

- Do not attend any gathering if you are sick.
- Practice physical distancing from all individuals outside your household.
- Wear a face covering when you cannot physical distance.



Community-based Health Education Programs

Safe + Healthy
Communities

6

Years of higher education in Idaho colleges/universities

8

Counties to promote and implement programs

Timalee Geisler,
MHE

3

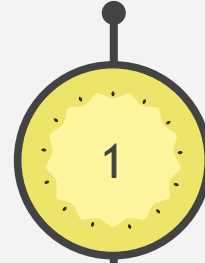
Programs to coordinate in FY 21:
Safe + Healthy Communities;
Tobacco Prevention and Control;
Tobacco Cessation

22

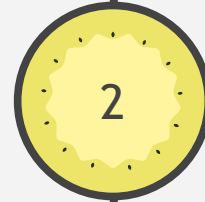
Years of providing Health Education programs to Eastern Idaho

Safe + Healthy Community Programs

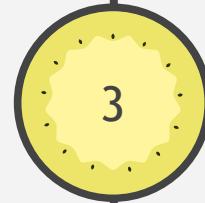
Fit and Fall Proof;
Fall Prevention



Age-Friendly Parks,
Recreation, and Public
Spaces

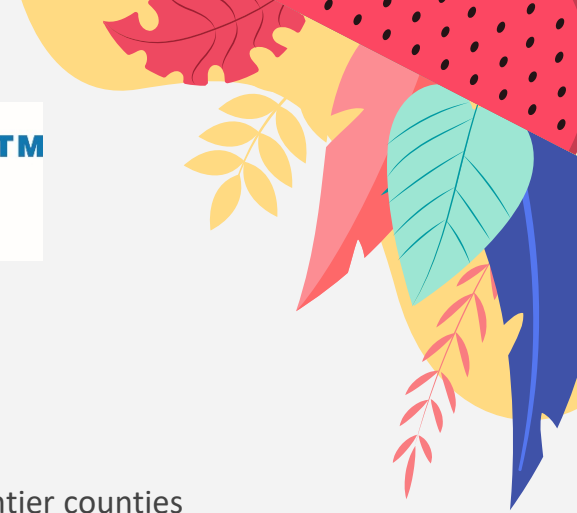


Be Active Kids Workshops;
training for child care
centers



Fit *and* Fall Proof™

- Established in 2014; classes began 2015
- Peer, volunteer-led community-based physical activity program
- Sustainable physical activity programs to underserved populations, rural and frontier counties
- Designed to help older adults maintain independence by improving mobility, balance, strength, and flexibility
- Each session lasts 10 weeks, held 2-3 times per week for at least 45 minutes
- Funded through a CDC block grant and state resources
- Administered by Health Education Specialists/coordinators





22

Class sites prior to
COVID-19

06

Sites restarted or
restarting: Driggs, Rigby
Senior Center, Idaho
Falls Senior Center,
Ucon, Ammon, Egin

17

Trained older adult class
leaders who are actively
leading class, five
additional scheduled to
be trained

Counties where Fit and
Fall Proof is held:
Bonneville, Fremont,
Jefferson, Madison,
and Teton

05

Years since Fit and Fall
Proof was implemented

16

Total participants
attending Fit and Fall
Proof before COVID-19;
116 attended their first
session

493

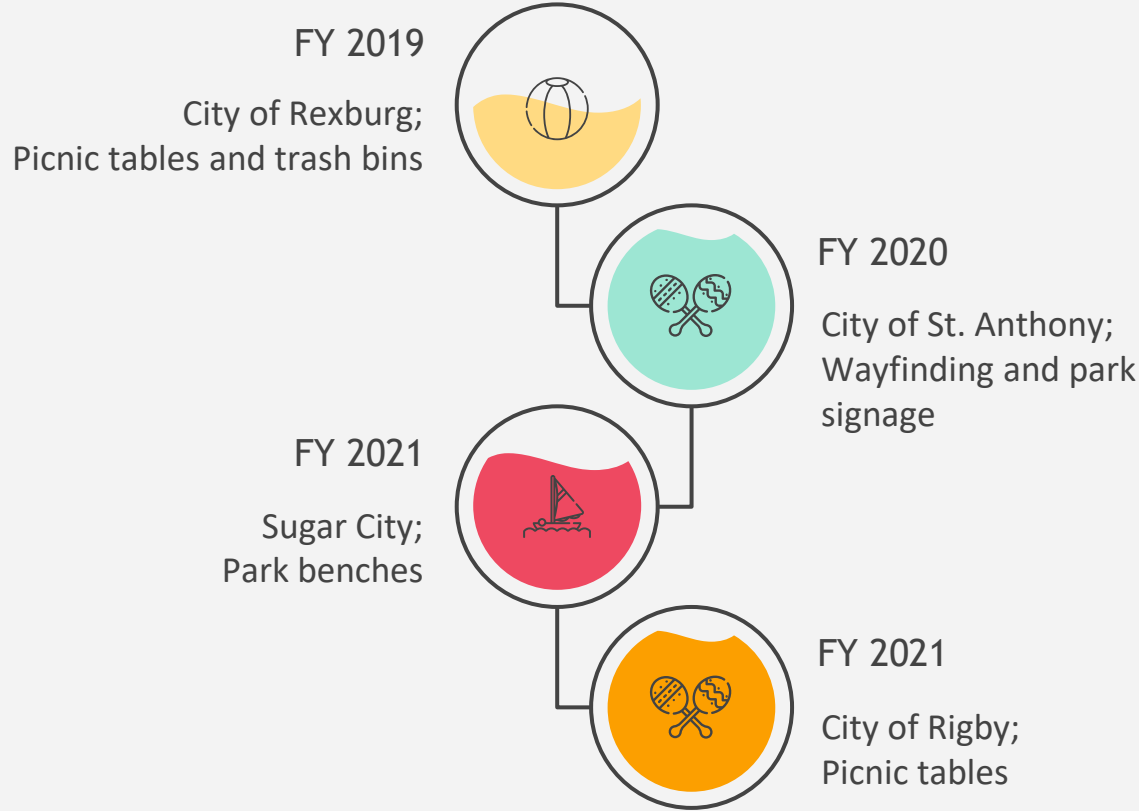


Age-Friendly Parks, Recreation, & Public Spaces

- Identify local parks and recreation staff to improve access to and use of park facilities
- Create awareness of and sustaining healthy changes in public parks for community members of all ages
- Conduct Park Amenities Assessments at a minimum of 8 parks
- Administer Park-Use Surveys in all 8 parks identified, online, and/or in neighborhoods
- Gather feedback and provide report to key stakeholders including parks officials and city leaders
- Assist parks officials with improvement choice and writing of mini-grant
- Non-permanent improvements such as benches, picnic tables, signage

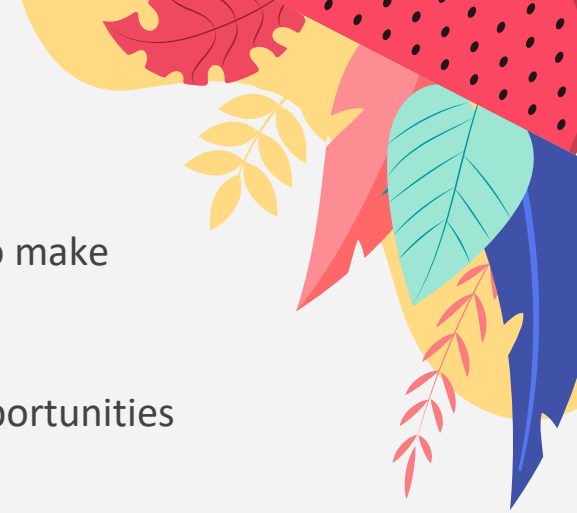


PARK IMPROVMENTS

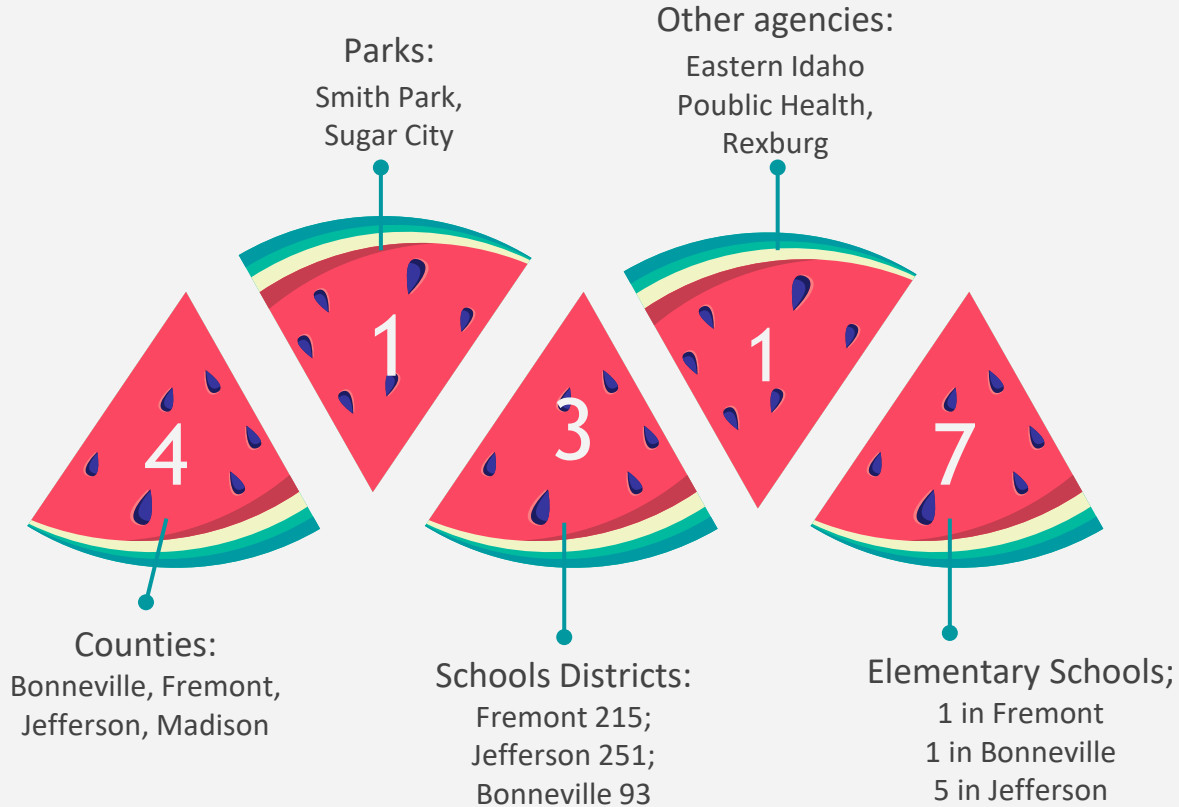


Fit and Fun Playscapes

- Partner with a minimum of 8 childcare providers, parks, or schools to make playground improvements and updates
- Use playground stencils to increase and improve physical activity opportunities
- Assess playground to ensure adequate space for stencil application
- Work with staff to determine design and location of playground stencils to encourage physical activity and learning
- Purchase supplies
- Coordinate volunteers
- Paint the playground

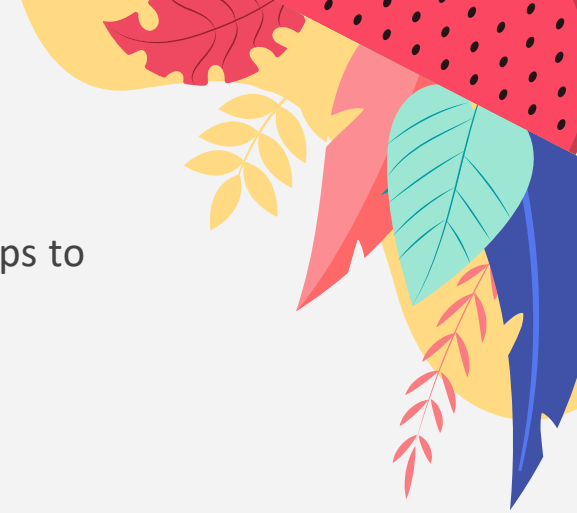


Fit and Fun Playscapes



Be Active Kids Trainings

- Partners with IdahoSTARS trainer to conduct Be Active Kids workshops to childcare providers
- Recruit childcare providers
- Plan, organize and schedule the workshops
- Assist the IdahoSTARS trainer with conducting the workshop
- Provide follow-up and technical assistance to childcare providers
- Award winning, innovative, and interactive health program for children ages birth to five
- Evidence-based and evidence-informed messages



Be Active Kids Trainings 2021



Childcare personnel
trained

14

7


Childcare centers
represented

Bonneville County
represented

1

3

Times the
workshop was
rescheduled due
to COVID-19



“The goal in life
is to die young,
as late as possible.”

—Ashley Montogue

EASTERN IDAHO PUBLIC HEALTH BOARD POLICY REFUNDS OF ENVIRONMENTAL HEALTH PERMITS

For a variety of reasons, individuals may request EIPH to refund fees paid for an Environmental Health permit. Such requests can occur in any of EIPH's Environmental Health programs. In order to honor such requests, but also cover EIPH's costs associated to work done on a permit by EIPH staff, it is necessary to establish some refund guidelines, which are outlined below.

POLICY

1. No refund of a permit will be given after the original expiration date of the permit, if applicable. In the Subsurface Sewage Disposal program, if the permit is renewed beyond the original one-year period, it is NOT eligible for a refund.
2. Full refunds of permit fees will only be honored if NO work has been completed on the application for service.
3. Refund amounts will be based on the amount of staff work completed.
 - However, for any refund request, no more than one-half of the permit fee paid will be refunded if any field work has been done by EIPH staff.

Date Approved: June 3, 2021

Bryon L. Reed, Chairman

Gerri L. Rackow, Secretary



Idaho Department of
Environmental Quality
1410 N. Hilton
Boise, ID 83706
www.deq.idaho.gov

Memorandum of Understanding

The Department of Environmental Quality and The Public Health Districts

1. Objective

The objectives of this Memorandum of Understanding (MOU) are to define roles of the Idaho Department of Environmental Quality (DEQ) and the Public Health Districts (Districts) and protect human health and the environment by: 1) maintaining and improving ground water and surface water quality in Idaho, 2) proper solid waste management, 3) proper wastewater management, and 4) assisting and supporting public water systems in the delivery of safe and reliable drinking water. This MOU sets forth a working arrangement of program delegation and program contract between the DEQ and the Districts to reduce duplicative efforts and to provide for a detailed description of program responsibilities and authorities.

2. Background

Through this MOU, the DEQ delegates certain authorities to the Districts. This memorandum expresses the roles and responsibilities, and clarifies the authority between the Districts and the DEQ. It is based on the desire of the Districts and the DEQ to provide the public with an effective environmental health delivery system based on utilization of agency core competencies. This approach prevents gaps and avoids duplication in services and strengthens the communication of both the Districts and the DEQ. The specific responsibilities and authorities are detailed in the program specific agreement sections of this MOU. The Public Water System program is by contract with the Districts and is not a delegated program. Where the term agency is used it can refer to either the Districts or to the DEQ.

This MOU is entered into pursuant to the authority set forth in Idaho Code § 39-414 and Idaho Code § 39-101 through § 39-130.

3. Authority and Intent

Whereas, the DEQ has responsibilities and rule making authority under the Idaho Environmental Protection and Health Act, Idaho Code § 39-101 et seq. and;

Whereas, these authorities provide for the agency's sole mission to be the protection of human health and the environment, and;

Whereas, the Districts were formed under the Public Health Districting Act, Idaho Code § 39-401 et seq., and;

Whereas, the Districts are directed to administer and enforce all state and district health laws, regulations, and standards with certain responsibilities to protect public health and the environment, and;

Whereas, Idaho Code § 39-414 authorizes the DEQ to delegate authorities and responsibilities to the Districts, and;

Whereas, pursuant to Idaho Code § 39-414, the Districts have the power to implement those authorities and responsibilities delegated by the DEQ, and;

Whereas, the DEQ and the Districts desire to avoid duplication and to prevent gaps in providing services to the citizens of the state, the DEQ and the Districts agree to the following sections.

4. General Program Agreements

The intent of the general program agreements is to outline roles and responsibilities of the Districts and the DEQ in these broad program areas.

4.1 General Principles

1. The DEQ and the Districts agree that communication and coordination on various topics is important. To further these principles, the Districts, as part of the Environmental Health Directors Work Group, will coordinate DEQ participation in periodic meetings, as appropriate, to ensure statewide consistency in all delegated programs.
2. The DEQ will notify the Districts of all public meetings and hearings pertaining to delegated programs, with the expectation that the Districts will participate as resources allow.
3. Non-compliance with statutes and administrative rules should be addressed first through education and technical assistance that is targeted to address the area of non-compliance. Enforcement is to be used only as the action of last resort when methods of education and assistance have failed to achieve compliance.

4.2 Rules, Standards, Technical Policies, and Guidelines

1. The DEQ and the Districts will work cooperatively in the preparation of rules, standards, technical policies, or guidelines in those program areas where joint responsibilities exist.
2. The DEQ will send draft documents outlined in Item 1 to the Districts for a thirty (30) day, when feasible, review and comment period prior to any formal public process.
3. The Districts will forward to the DEQ proposed draft changes to rules, standards, technical policies or guidelines following the procedures outlined in Item 2 above. This is in addition to the district board procedures for adoption of regulations as set forth in Idaho Code § 39-416.
4. The DEQ, or the Districts, will provide copies to each other of final rules, standards, technical policies, or guidelines adopted. This procedure is in addition to the requirements of the Administrative Procedures Act. Also, the DEQ will provide specific direction to the Districts regarding the implementation of DEQ final rules,

- standards, technical policies, and guideline changes for programs delegated to the Districts. This direction will be provided to the Districts in a timely manner.
5. The Districts, if requesting a formal interpretation of rules or guidance, will submit the request to the appropriate DEQ Bureau Chief. The Bureau Chief, in coordination with the Attorney General's office as appropriate, will draft a response and share that with the Districts. For those interpretations with statewide applicability, the DEQ Bureau Chief will ensure that the response is in a memo form and can be posted online in keeping with Executive Order 2020-02. This does not include normal day to day communications between the Health Districts and DEQ staff regarding implementation of the rules.
 6. Upon initiation of an appeal of a District decision regarding a DEQ-delegated program, the District should notify the DEQ state office program contact of the administrative appeal for the DEQ's evaluation to ensure consistent application of the DEQ rules. The DEQ, when appropriate, will provide interpretation of the DEQ rules to the District for consistency.

4.3 Coordinating Enforcement Actions

1. The Districts will take appropriate and timely enforcement actions as outlined within the specific protocols in this MOU. The DEQ may initiate enforcement actions after an enforcement referral package is received from the Districts.
2. The DEQ reserves the right to initiate enforcement actions if DEQ determines, after consultation with the Districts, that enforcement is necessary to protect public health and the environment. The DEQ will coordinate with the Districts in the event the DEQ determines it necessary to take such enforcement action.
3. The DEQ may request the Attorney General's Office provide legal consultation to the District's legal counsel when the District is preparing for cases in district court.
4. The DEQ will provide revisions of enforcement referral package templates, as appropriate, for subsurface sewage and non-municipal solid waste programs.

4.4 Management of Complaints

This section outlines the actions the DEQ and the Districts will take when receiving complaints that are the responsibility of the other agency.

1. Complaints, which are the responsibility of the other agency, will be referred to the other agency within one working day. Either agency, upon receiving a telephoned complaint, will refer the caller to the appropriate agency. Written complaints will be forwarded to the appropriate agency by fax, e-mail or mail and include the complainant's contact information whenever possible.
2. In referring complaints, one agency will not commit the other agency to any particular action.
3. If the agency referring a complaint requests notification of what actions were taken by the other agency, that agency will provide the information to the referring agency.
4. The DEQ may request that the Districts provide initial support for complaints generated in remote areas.

4.5 Consultations and Technical Assistance

This section defines when the agencies will provide technical assistance and consultation.

1. Each agency, within its resource limitations, will provide consultations, training, and technical assistance to the other upon request.
2. The DEQ will inform the Districts of pertinent training courses and vice versa, such as courses related to drinking water systems, subsurface sewage, solid waste, wastewater land application, hazardous wastes, septage, ground water quality, surface water quality, and source water protection.
3. The Districts will work with the DEQ to develop and present training courses of mutual interest.

4.6 Sharing and Dissemination of Information

This section defines procedures to work cooperatively in sharing and disseminating information between agencies and to the public.

1. Agency Information Sharing
 - a. The DEQ, within its resource limitations, will assist the Districts in joint program communications, including the development of written or audio-visual materials.
 - b. The Districts will make recommendations for written or audio-visual material to the DEQ through district appointed program contacts.
 - c. The DEQ and the Districts will inform each other of correspondence received from other state or federal agencies which concern activities in the district or in the DEQ regional offices.
 - d. The DEQ and the Districts shall coordinate and encourage the sharing of geographic information system (GIS) data. The DEQ and the Districts agree to minimize the duplication of digital data entry and to exchange data and/or technical resources in support of each organization's mutual GIS interests.

2. Information to the Public.

Risk communication is an important public health aspect of sharing and disseminating information related to the protection of public health. The DEQ may seek assistance from the Districts to help, as resources in both agencies allow, deliver prepared critical public health messages regarding matters such as unhealthy air quality; blue-green algae blooms in surface waters; bacterial sample results exceeding the primary contact recreation standard, hazardous material releases, and mercury events with exposures to the public.

4.7 Coordination of Programs

1. For coordination of environmental issues, Environmental Health Directors will help coordinate programs among the Districts as time and resources allow.
2. Representatives of the Districts will work with appropriate representatives of the DEQ when problems of mutual concern arise for which no agreement has been detailed in this document to determine a course of action.
3. Routine program meetings and discussions are desirable for both the Districts and the DEQ.


5. Protocols for Specific Programs

The roles and responsibilities of DEQ and the Districts, and the delegation of authority from DEQ to the Districts, with respect to specific programs are set forth in the following listed Protocols that are attached to, and incorporated as a part of this MOU.


- A. Subsurface Sewage Disposal
- B. Public Water Systems and Individual Drinking Water Facilities
- C. Solid Waste Management
- D. Sanitary Restrictions
- E. Pumpable Waste
- F. Water Pollution/Water Quality

This MOU shall be executed by the DEQ Director and the Public Health District Directors and replaces the Memorandum of Understanding dated Feb. 5, 2013. The term of this agreement shall be on-going unless otherwise revoked by any one of the signatory agencies following thirty (30) days written notice from the Director of the DEQ or the Chairman of the Idaho Association of Public Health District Directors. This agreement may be amended or extended through mutual written agreement of the parties. This agreement, when accepted by each agency, will be effective on the date of the DEQ Director's signature.


6. Signature Page




Jess Byrne
Director,
Department of Environmental Quality
Date: April 22, 2021



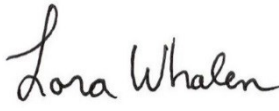
Carol Moehrle
Director,
Public Health – Idaho North Central District
Date: March 31, 2021




Russell A. Duke
Director,
Central District Health
Date: April 1, 2021




Maggie Mann
Director,
Southeastern Idaho Public Health
Date: March 31, 2021




Lora Whalen
Director,
Panhandle Health District
Date: April 20, 2021



Nikole Zogg
Director,
Southwest District Health
Date: April 8, 2021



Melody Bowyer
Director,
South Central Public Health District
Date: April 12, 2021



Geri L. Rackow
Director,
Eastern Idaho Public Health District
Date: April 12, 2021

Protocol A: Subsurface Sewage Disposal

The DEQ delegates the roles and responsibilities for subsurface sewage disposal as outlined in this MOU pursuant to the DEQ rules and guidance to the Districts. The subsurface sewage program regulations are the Individual/Subsurface Sewage Disposal Rules and Rules for Cleaning of Septic Tanks, IDAPA 58.01.03 (SSD Rules). Guidance is provided in the Technical Guidance Manual for Individual/Subsurface Sewage Disposal (TGM) and in the Nutrient Pathogen Evaluation Program for On-site Wastewater Systems.

The DEQ will:

1. Review plans and specifications for the following and provide written comment:
 - a. “Public Systems,” as defined in the SSD Rules.
 - b. “Large Soil Absorption Systems” as defined in the SSD Rules.
 - c. As requested by the Districts, the collection system only for those Central Systems that receive less than two thousand five hundred (2,500) gallons per day of blackwaste or wastewater, but that receive the blackwaste or wastewater from more than two (2) dwelling units or more than two (2) buildings under separate ownership. Collection system is the portion of the wastewater system or treatment facility in which wastewater is received from the premises of the discharger and conveyed to the point of treatment through a series of lines, pipes, manholes, pumps/lift stations and other appurtenances.
 - d. As requested by the Districts, TGM approved Alternative Systems in which the drainfield exceeds 1,500 square feet.
 - e. Septic Tank Effluent Pump (STEP) and Septic Tank Effluent Gravity (STEG) systems that discharge to wastewater collection systems with discharges to surface water or subsurface sewage disposal systems. The DEQ’s review will include the portions of the system downstream from the septic tank component(s). The Districts will be responsible for permitting and inspecting the septic tank component(s) of the system.
2. For any of those systems for which the DEQ reviews plans and specifications as set forth above, it shall provide comments to the Districts within 42 days of the date the plans and specifications were submitted to the DEQ. These comments are for use by the Districts in issuing or denying the individual or subsurface sewage disposal permits.
3. Review Alternative Systems that are not in the TGM through the Technical Guidance Committee and make decisions regarding the approval of such systems as provided in the SSD Rules.
4. Review all experimental system design plans and specifications, prior to the District issuing a permit.
5. Review the design of commercially manufactured blackwaste and wastewater treatment and storage components as provided in the SSD Rules, IDAPA 58.01.03.009 in conjunction with the Technical Guidance Committee.
6. Review and comment on standard operating procedures for Idaho Subsurface Sewage Disposal (revised 2018) upon request.
7. Periodically review subsurface sewage disposal system permit language upon request and provide written feedback.

8. Require nutrient-pathogen studies to be completed for Central Systems, and subdivisions with less than 5 acres per buildable lot, in nitrate priority areas and for Large Soil Absorption Systems.
9. When requested by the Districts, evaluate nutrient-pathogen studies for developments where the Districts have received an NP study. Provide written direction to the Districts concerning permitting limits associated with the proposed Central System or Large Soil Absorption System. Any pertinent comments or constraints will be defined in the documentation, which may include required minimum effluent quality, restrictions to drainfield and or well locations, or rejection of the project in its proposed configuration.
10. Perform annual audits assessing the Districts' performance in conducting site evaluations, issuing subsurface sewage disposal system permits, and completing inspections of subsurface sewage disposal systems. This will be conducted by the DEQ On-site Wastewater Coordinator.
11. Provide information on requirements for shallow injection wells and permitted systems with 20 or more people to Districts.
12. Provide periodic training on the SSD Rules to the Districts, and provide support for the Districts' Continuing Education training classes for the Septic System Installer's Licensing program at the request of the Districts.
13. Issue wastewater reuse permits for subsurface distribution of Class A through D wastewater under the Recycled Water Rules (IDAPA 58.01.17).
14. Post a list of installer registration permits on the DEQ webpage.

The Districts will:

1. Make permitting decisions pursuant to the SSD Rules and the TGM for all systems covered by the SSD Rules. Review of plans and specifications for those systems not reviewed by the DEQ, including:
 - a) the septic tank and drainfields for Central Systems as defined in IDAPA 58.01.03.003;
 - b) all other Standard Systems that are not Central, Public, or Large Soil Absorption Systems; and
 - c) approved Alternative Systems.
2. Perform onsite inspections of installed systems where a permit was issued by the Districts according to the most current SSD Rules, TGM, and Standard Operating Procedures. In rare circumstances when the Districts cannot be present for inspections of installed systems, the Districts may direct the installer to perform the inspection. The districts will ensure that any installer inspection of systems will include all necessary documentation.
3. Determine the site suitability for proposed subsurface sewage disposal systems as specified in the SSD Rules. The Districts shall provide the DEQ with a copy of the site evaluation report and subsurface sewage disposal application for each proposed Large Soil Absorption System.
4. Issue permits to installers of subsurface sewage disposal systems in accordance with the SSD Rules and the TGM. Send to the DEQ by March 1 a list of the installer registration permits and post on the Districts webpage a list of the installer registration permits issued or link to the DEQ webpage.

5. Provide Seepage Pit Permit documentation, as required in the SSD Rules, 58.01.03.008.11, to the DEQ.
6. Provide available information from the Districts' electronic databases on new and replacement subsurface sewage disposal permits to assist the DEQ in performing source water assessments or in assisting communities or public water systems in developing source water protection plans. The information provided to the DEQ will be limited to information that exists in these databases. New or unique data collection activities will not be required of the Districts to fulfill this commitment.
7. Issue tank only permits for projects with discharges to subsurface sewage disposal systems and not issue tank only permits for projects that discharge to municipal wastewater collection systems with land application or NPDES/IPDES permits.
8. Provide the DEQ with a copy of the Idaho Subsurface Sewage Disposal Standard Operating Procedures.

Enforcement—Sewage Disposal

1. The Districts will take appropriate action to enforce the SSD rules, including by taking all necessary administrative enforcement actions.
2. The Districts will be responsible for defending all administrative appeals of decisions by the Districts, which are brought before the Districts and the Districts' Boards of Health. The Districts will ensure all administrative appeals follow the appropriate administrative appeal process.
3. After exhausting all administrative remedies, the Districts may refer an enforcement matter related to implementing and enforcing the SSD rules to the local county prosecutor's office or to the DEQ. If referred to the DEQ, the Districts must use the Enforcement Referral Form (provided by DEQ) and provide any documentation related to the enforcement action to the DEQ. Due to statute of limitations concerns, the Districts should refer an enforcement matter to the DEQ no more than one year after the violation was discovered.
4. If the DEQ receives an enforcement referral from the Districts, the DEQ will use its enforcement discretion in determining whether to pursue additional administrative or civil enforcement action. If the DEQ decides to pursue the matter, the action will be considered a DEQ action and not a continuation of a District action.
5. Once the DEQ receives an enforcement referral from the Districts, the DEQ will notify the Districts of whether or not the DEQ will pursue the matter through additional action. If the DEQ determines not to pursue the matter, the Districts may choose to take additional action.
6. The DEQ reserves the right to initiate enforcement actions with respect to all persons or entities covered by the SSD rules without a referral when the DEQ determines, after consultation with the Districts, that DEQ action is necessary to protect public health and the environment. The DEQ will coordinate with the Districts in the event the DEQ determines that such action is necessary.
7. The DEQ will take the lead responsibility in defending the DEQ decisions regarding Nutrient Pathogen Studies.
8. The DEQ is responsible for enforcement actions associated with wastewater reuse permitting.

Notes on EIPH's Sewage Disposal Program

Individual/Subsurface Sewage Disposal Program



The septic program protects human health from infectious diseases and prevents contamination of the environment through proper handling, treatment and disposal of wastewater.

The Director of the Department of Environmental Quality (DEQ) through a Memorandum of Understanding has delegated the responsibility to the district health departments for Individual/Subsurface Sewage Disposal Rules- IDAPA 58, Title 01, Chapter 3. The state has provided an on-site coordinator to oversee the program and the state has formed a technical guidance committee to keep Idaho current with the latest in technology. The state then provides to the districts a Technical Guidance Manual, along with the rules to govern Idaho's septic disposal.

It is the intent of the regulations to ensure that blackwaste and wastewater generated in the State of Idaho are safely contained and treated and that blackwaste and wastewater contained in or discharged from each system:

- a. Are not accessible to insects, rodents, or other wild or domestic animals;
- b. Are not accessible to individuals;
- c. Do not give rise to a public nuisance due to odor or unsightly appearance;
- d. Do not injure or interfere with existing or potential beneficial uses of the waters of the State.

Program Process Steps:

1. Reviewing applications for disposing of wastewater (sized by bedroom for residential applications/ Number of people or wastewater flows from various establishments in gallons per day for non-residential). Plot plan and building plans are required with application.
2. Conduct an onsite to review plot plan's layout proposal and view test hole for soil type and determine if a limiting layer exists (bedrock or subwater).
3. Issue the disposal permit. Permit is valid for one (1) year.
4. Conduct inspections within 48 hours' notice of the installation being complete.
5. License and train septic system installers. Installer licenses are valid for one (1) calendar year and continuing education training is required once every three (3) year.
6. License septic tank pumper companies and vehicles. Licenses expire every March. Each truck is inspected and sewage disposal contract verified each year.





Protocol B: Public Water Systems (PWSs)

Contracts are utilized between the DEQ and the Districts for specific tasks in accordance with Idaho Code §§ 39-401 and 39-414(4). The DEQ and the Districts shall implement and conform to the most recent PWS Contract awarded. The PWS Contract is more detailed than this MOU, and in the event of a conflict, the PWS Contract terms shall prevail. Generally, the Districts supervise ground water PWSs with less than 25 service connections.

The DEQ will:

1. Review engineering and technical plans, specifications, and reports for public drinking water systems in accordance with Idaho Code §39-118.
2. Notify the appropriate district when new or revisions to source water assessments fall within their jurisdiction.
3. Ensure the Districts have the opportunity to be involved, as their resources allow, with the development of source water protection plans for public water systems within their jurisdiction.

The Districts will:

1. Provide available information from District office hard copy files or electronic storage media on public water systems that will assist the DEQ in performing source water assessments or in assisting communities or public water systems in developing source water protection plans. The information provided to the DEQ will be limited to information that exists in these storage formats. New or unique data collection activities will not be required or requested of the district to fulfill this commitment.

Protocol C: Solid Waste Management

This section outlines the roles and responsibilities of the agencies for the solid waste program. The governing laws are contained within the Idaho Solid Waste Facilities Act, Idaho Code § 39-7401 et seq. and the Solid Waste Management Rules, IDAPA 58.01.06. The Idaho Solid Waste Facilities Act, Idaho Code § 39-7401 et seq. provides specific authority to the DEQ and the Districts. These authorities are identified in subsection B. The Environmental Protection and Health Act, Idaho Code § 39-101 et seq. provides the DEQ the authority to promulgate rules to deal with problems related to solid waste management. Idaho Code § 39-414 provides that the District Board of Health may assume authority delegated to it by the DEQ and provides the DEQ the authority to delegate responsibilities to the District Board of Health.

A. Municipal Solid Waste Landfill (MSWLF) Sites

The DEQ will:

1. Inform the Districts of proposed facilities, sites, and systems and provide copies of relevant correspondence.
2. Issue certification letter of suitability for prospective MSWLFs to MSWLF applicants as prescribed in Idaho Code § 39-7401 et seq.
3. Issue commercial solid waste siting licenses as prescribed in Idaho Code § 39-7401 et seq.
4. Approve or disapprove final design including point of compliance, ground water monitoring program, alternative daily cover, alternative final cover, alternative closure, and alternative post-closure care requirements and financial assurance plans for MSWLFs.
5. Approve final surface grade of fill area if slope exceeds 15 percent.
6. Provide the Districts with locations of mapped MSWLFs and any associated data.
7. Serve as lead agency when scheduling and conducting jointly with the Districts the mandatory 3 – 5 year reviews of MSWLFs as set forth in Idaho Code § 39-7419.
8. Provide courtesy reviews and submit comments to the Districts on operation plans, closure, and post-closure plans as resources and staff availability allow.
9. Provide the Districts with copies of approved site certification applications, design plans, and approval letters.
10. Refer issues regarding operations, closure, and post-closure to the Districts.
11. Perform all other activities for which the DEQ is authorized under the Idaho Solid Waste Facilities Act, Idaho Code § 39-7401 et seq.

The Districts will:

1. Participate in periodic solid waste meetings.
2. Support solid waste regulatory interpretations and other decisions or recommendations.
3. Approve or disapprove MSWLF Operation Plans including plans for the disposal of processed waste tires in accordance with the Waste Tire Disposal Act. The approval process shall be conducted in a manner similar to the site certification process set forth in Idaho Code § 39-7408.

4. Approve or disapprove MSWLF Closure and Post-closure plans. The approval process shall be conducted in a manner similar to the site certification process set forth in Idaho Code § 39-7408.
5. Require MSWLF personnel to contact the DEQ prior to open burning as defined in Idaho Code § 39-7403(33) as part of any approved operation plan.
6. As needed, prepare and/or adopt technical guidance to meet operations, closure and post closure, except with respect to those alternative plans that need the DEQ prior approval.
7. Review and recommend to the DEQ approval or denial of alternative operating plans and alternative closure and post-closure plans.
8. Provide the DEQ with corrections or updates on locations of MSWLF sites and any associated data.
9. Conduct routine unannounced inspections of MSW landfills at least annually, as staff and resources allow.
10. Recertify operating procedures at intervals of no more than three years as specified in Idaho Code § 39-7419(2).
11. Conduct jointly with the DEQ the mandatory three to five year reviews of MSWLFs by Idaho Code § 39-7419.
12. Inspect MSWLF sites at time of closure, prior to removal of any earth-moving or solid waste processing equipment.
13. Provide courtesy reviews and submit comments to the DEQ on site certification applications and design plans as resources and staff availability allow.
14. Provide the DEQ with copies of approved operating plans, closure plans, post-closure plans and approval letters.
15. Work with counties and cities on solid waste management issues and refer any issues falling under the DEQ jurisdiction to the DEQ.
16. Perform all other activities for which the Districts are authorized under the Idaho Solid Waste Facilities Act, Idaho Code § 39-7401 et seq.

B. All Non-Municipal Solid Waste Facilities (NMSWFs) and Activities

The DEQ will:

1. In accordance with the Solid Waste Management Rules, IDAPA 58.01.06, review, approve, or disapprove siting and design applications, including review of plans and specifications for new or modified NMSWFs to assure that they will not cause or contribute to the pollution of air, surface water, or ground water. In accordance with the Solid Waste Management Rules, IDAPA 58.01.06, review, approve, or disapprove operations, closure and post-closure applications, including review of plans and specifications for new or modified Non-Hazardous Solid Waste Impoundments (NSWIs). Notify the Districts when reviewing siting of new or modified facilities.
2. Upon written request from city council or board of county commissioners, issue written authorization in compliance with Idaho Code § 39-6502 for waste tire storage sites.

3. Upon written request from city council or board of county commissioners, administer financial assurance for waste tire storage sites in compliance with Idaho Code § 39-6502.
4. Issue air permits, when required, for incinerators or compost facilities.
5. Approve or disapprove any other beneficial use, reuse or recycling of waste tires, chips or similar materials from waste tires.
6. Provide the Districts with locations of mapped Non-Municipal Solid Waste sites and any associated data.
7. Provide courtesy reviews and submit comments to the Districts on operation plans, closure and post-closure plans, excluding NSWIs, as resources and staff availability allow.
8. Provide the Districts with copies of approved site applications, design plans and approval letters.
9. Due to DEQ's specific technical expertise, DEQ will conduct unannounced NMSWF annual inspections, and investigate complaints relating to stand alone NSWI activities. When a NSWI is part of a NMSWF, DEQ will lead the NSWI portions of the unannounced NMSWF annual inspection, and investigate complaints relating to issues associated with the NSWI.

The Districts will:

1. Approve or disapprove applications for the operation, closure and post-closure care plans for NMSWFs, excluding NSWIs.
2. Provide regulatory oversight of the operations including unannounced annual inspections of NMSWFs, excluding NSWIs, as staff and resources allow.
3. Provide inspection reports and copies of all enforcement correspondence to the DEQ.
4. Be the lead agency for requirements relating to closure and post-closure of NMSWFs, excluding NSWIs.
5. Provide the DEQ with copies of approved operations plans, closure, closure/post-closure plans, and approval letters.
6. Provide the DEQ with corrections or updates on locations of NMSWFs sites and any associated data.
7. Provide courtesy reviews and submit comments to the DEQ on site approval applications and design plans as resources and staff availability allow.
8. Work with counties and cities on solid waste management issues, and refer any issues falling under the DEQ jurisdiction to the DEQ.
9. Refer complaints relating to NSWI activities to the DEQ

C. Enforcement—Solid Waste

The DEQ will:

1. Provide reports and copies of all enforcement correspondence to the Districts for all solid waste sites, unless determined to be attorney-client confidential.
2. Be the lead agency for corrective action under the Solid Waste Management Rules, IDAPA 58.01.06, where standards for ground water, surface water, or air are being violated.

3. Enforce all aspects of site, design, ground water monitoring and financial assurance requirements.
4. Evaluate, at the DEQ Regional Office level, all NMSWF enforcement referral packages submitted by the Districts and recommend to the program office a specific course of action. The Regional Administrator will: recommend to the program office whether or not the referred enforcement case is within the areas of this MOU; validate whether or not reasonable efforts were expended to resolve the issue at the local level; and, evaluate whether or not the enforcement referral package contains adequate data to support a formal enforcement action, and, when applicable, evaluate whether the matter requires DEQ resources or expertise. The DEQ Regional Administrator will make a recommendation to the program office to resolve the issue at the regional level or refer the case to the DEQ State Solid Waste Program Office for formal enforcement. The Solid Waste Program Office has final determination on all enforcement issues.
5. Provide timely notice to the respective district prior to conducting routine unannounced inspections for all solid waste sites.
6. Provide the Districts written documentation of any potential operational, closure or post-closure violations for all solid waste sites.
7. Upon referral from a district, take enforcement responsibility for disposal sites that have not received site certification per IDAPA 58.01.06

The Districts will:

1. Provide inspection reports and copies of all enforcement correspondence to the DEQ regional office solid waste contact.
2. For MSW Landfills enforce all aspects of operation, closure and post closure pursuant to Idaho Code § 39-7406(c). Except, however, the Districts may request, and DEQ may accept a timely enforcement referral package in the format provided by the DEQ from the District Director to the appropriate DEQ Regional Administrator if unable to get resolution at the local level through education and technical assistance, and DEQ resources or technical expertise is required.
3. For NMWSFs provide a timely enforcement referral package in the format provided by the DEQ from the District Director to the appropriate DEQ Regional Administrator if unable to get resolution at the local level through education and technical assistance.
4. Make staff available for consultation/participation for enforcement cases as requested by the DEQ. These activities could include participation in compliance conferences, as deemed necessary by the DEQ Regional Administrator, and participation in civil or criminal actions as requested by the DEQ State Solid Waste Program Office.
5. Provide written documentation to the DEQ of any potential design or ground water monitoring violations for all solid waste sites.
6. Investigate open dumps and attempt resolution through education and technical assistance.

Protocol D: Sanitary Restrictions

The DEQ delegates authority for the lifting or re-imposition of sanitary restrictions to the Districts for water and sewer systems as outlined below and pursuant to the procedures specified in Idaho Code § 50-1326 through 1329 and § 50-1334. When re-imposition of sanitary restrictions is required, the agency that was responsible for the review of plans and specifications and other information necessary to release sanitary restrictions is the responsible agency.

The DEQ will:

1. For public water and any wastewater systems for which the DEQ has reviewed plans and specifications, provide to the Districts a letter that will or will not recommend release of sanitary restrictions, and that indicates the form of the certificate of approval required on the plat.
2. Issue guidance on the approval for all sewer and water extension projects that are reviewed and approved for construction by the qualified licensed professional engineer (QLPE).
3. Initiate re-imposition of sanitary restrictions as provided in Idaho Code § 50-1326 for the public water and wastewater systems for which the DEQ has reviewed plans and specifications. Sanitary restrictions shall be re-imposed if construction is not in compliance with approved plans and specifications, or the facilities do not substantially comply with regulatory standards in effect at the time of facility construction pursuant to Idaho Code § 50-1326.
4. Ask the Districts to assist the DEQ or act on the DEQ's behalf with respect to the re-imposition of sanitary restrictions for systems for which the DEQ has reviewed plans and specifications. In the event the DEQ makes such a request, the DEQ shall provide adequate support to the Districts.

The Districts will:

1. For those public water and any wastewater systems for which the DEQ has reviewed plans and specifications, ensure that the certificate of approval in the form identified by the DEQ is placed on the final plat and sign the final plat as is required under Idaho Code § 50-1326. The certificate of approval for these systems shall not be signed until the District receives a letter from the DEQ recommending the release of sanitary restrictions.
2. For those water and sewer systems for which the Districts have reviewed plans and specifications or other information, issue to the owner or other responsible party the certificate of approval and ensure that the certificate of approval is signed on the final plat as is required under Idaho Code § 50-1326. The water systems addressed in this paragraph include those individual water facilities identified in Idaho Code § 50-1326.
3. Utilize the checklist located in the Land Development SOP for review of subdivisions served by shared well water systems expected or anticipated to serve less than 15 connections and less than an average of 25 people daily for at least 60 days out of the year. No DEQ engineering review would be conducted on well water system expected or anticipated to serve less than 15 connections and less than an average of 25 people daily for at least 60 days out of the year. District responsibilities are only to assure that the checklist is properly completed by the developer.

4. For those water and sewer system extensions for which a qualified licensed professional engineer (QLPE) has reviewed plans and specifications as provided in Idaho Code § 39-118(2)(d), and for which the DEQ has issued the general certificate of approval, ensure that the certificate of approval in the form identified by the DEQ is placed on the final plat and sign the final plat as is required under Idaho Code § 50-1326. The Districts must receive QLPE letter(s) for both water and sewer extensions.
5. Initiate re-imposition of sanitary restrictions as provided in Idaho Code § 50-1326 for the water and sewer systems for which the Districts have reviewed plans and specifications or other information. Sanitary restrictions shall be re-imposed if construction is not in compliance with approved plans and specifications, or the facilities do not substantially comply with regulatory standards in effect at the time of facility construction pursuant to Idaho Code § 50-1326.

Notes on EIPH's Land Development Program

Land Use Development (Subdivision) Program



Proper development of property and how wastewater generated on the property is managed and disposed of is critical when approving land development projects.

The Director of the Department of Environmental Quality (DEQ) through a Memorandum of Understanding has delegated the responsibility to the health departments for Idaho Code Title 50, Chapter 13, Plats and Vacations. From this, we review all subdivisions to ensure that the land is suitable for disposing of wastes in order to protect the public's health and the environment.

Program Process Steps-

1. Upon receipt of an application and preliminary plat, we determine if the property can first be served by a nearby municipal (city) system. (A Will-Serve Letter is either issued or a letter declaring the municipality cannot serve the development is received.)
2. Conduct onsite evaluation of proposed developments. Test holes are evaluated for potential limiting layer, such as bedrock or sub-water.
3. With results from the onsite, review the lot sizes on the plat to determine if the proposed drinking water and/or wastewater disposal systems have enough separation distance to comply with rules and regulations.
4. Sign the final plat, thus lifting sanitary restrictions so that lots can be sold.



LAND DEVELOPMENT	
—We reserve the right to adjust fees prior to signature of plat.—	
1 - 25 Lots*	\$100.00 per lot
26 - 40 Lots*	\$75.00 per lot
41 or more Lots*	\$50.00 per lot
<i>*Half of the fee is to be submitted with application, the remainder on signing of final plat.</i>	
Discharged to Central/Community/Large Soil Absorption System (LSAS)	
Due with Application	\$200.00 + \$40.00 per lot
Signature Fee	\$75.00
Short Plats (DEQ Approved) and Lot Line Adjustments	

Program Resources:

Idaho Code Title 50, Chapter 13, Plats and Vacations- <https://legislature.idaho.gov/statutesrules/idstat/Title50/T50CH13/>

Standard Operating Procedures (SOP) Manual- Version 2.0/06-2013

58.01.03- Individual/Subsurface Sewage Disposal Rules - <https://adminrules.idaho.gov/rules/current/58/580103.pdf>

Enforcement Obligations:

Re-imposition of Sanitary Restrictions-

Idaho Code section 50-1326 allows the re-imposition of sanitary restrictions on a plat by the issuance of a certificate of disapproval (after notice to the responsible party) with the opportunity to appeal. Unless otherwise requested by DEQ under the MOU, DEQ shall be the responsible party to re-impose sanitary restrictions on developments that utilize central sewer and water facilities which they approved or were approved by a QLPE. The HD is responsible for the re-imposition of sanitary restrictions on developments which utilize individual on-site sewage disposal systems and individual wells.

Protocol E: Pumpable Waste

The DEQ delegates authority for inspection, approval, and permitting of pumpable waste as described below and as per the Water Quality Standards, IDAPA 58.01.02; the Solid Waste Management Rules, IDAPA 58.01.06; the Individual/Subsurface Sewage Disposal Rules and Cleaning of Septic Tanks, IDAPA 58.01.03; the Wastewater Rules, IDAPA 58.01.16; and the Recycled Water Rules, IDAPA 58.01.17.

The domestic septage program regulations are specified in the Individual/Subsurface sewage Disposal Rules and Cleaning of Septic Tanks, IDAPA 58.01.03. Guidance for this program is also found in the “Technical Guidance Manual for Individual/Subsurface Sewage Disposal Systems” and the “Management of Pumpable Waste in Idaho” documents.

A. Solid Waste (examples: grease traps, sand traps, car wash sumps...)

Pumpable waste sites not covered below under Protocol E subsections B, C, or D, are regulated under the Solid Waste Management Rules and will be handled by DEQ and the Districts as outlined in the solid waste section of this MOU.

B. Domestic Septage

Activities associated with domestic septage are authorized by the Individual/Subsurface Sewage Disposal Rules and Cleaning of Septic Tanks, (IDAPA 58.01.03). The authority for implementing this program is partially delegated to the Districts as set forth below.

The DEQ will:

1. Approve the method and location of domestic septage disposal under the Individual/Subsurface Sewage Disposal Rules and Cleaning of Septic Tanks, IDAPA 58.01.03, if the disposal location is used for ongoing applications from one or more septic tank pumpers.
2. Approve operation plans and provide inspections at approved domestic septage disposal sites.
3. Post a statewide list of permitted septic tank pumpers on to the DEQ webpage.

The Districts will:

1. Approve the method and location of one-time disposal of domestic septage.
2. Provide inspections at one-time approved domestic septage disposal sites.
3. Inspect and permit domestic septic tank pumpers.
4. Send to the DEQ, by March 15th of each year, a list of septic tank pumpers who have been issued a permit for the current year, including disposal methods and locations. The names of pumpers licensed after March 1 and their disposal methods will be forwarded to the DEQ at the time of permitting.
5. Post on the Districts’ webpage a list of the permitted septic tank pumpers or a link to the DEQ webpage.

C. Municipal Biosolids Land Application

The DEQ will review and either approve or disapprove municipal biosolids sites as managed under section 650 of the Wastewater Rules, IDAPA 58.01.16.

The Districts will forward all inquiries for municipal biosolids to the DEQ regional office engineering manager.

D. Wastewater Land Application and Wastewater Reuse

The DEQ will:

1. Issue wastewater reuse permits for municipal and industrial wastewater reuse sites.
2. Interpret the Recycled Water Rules, IDAPA 58.01.17 and provide advice on implementation of these rules for proposed development.

The Districts will refer all wastewater land application and wastewater reuse proposals or submittals to the DEQ regional office engineering manager.

E. Enforcement—Pumpable Wastes

The DEQ will:

1. Provide reports and copies of all enforcement correspondence relating to solid waste and domestic septage to the Districts.
2. Be the lead agency for corrective action under the Individual/Subsurface Sewage Disposal Rules and Cleaning of Septic Tanks, IDAPA 58.01.03, when pumpers are land applying domestic septage without a disposal site approval or are not in compliance with the approved operations plan.
3. Provide the Districts with copies of any enforcement guidance.
4. Will enforce all aspects of domestic septic tank pumper rules, including revocation, or suspension of permits upon an appropriate enforcement referral from the Districts.
5. Provide for enforcement relating to pumpable wastes managed as solid wastes in accordance with the solid waste section of this MOU.

The Districts will:

1. Provide inspection reports along with copies of all enforcement correspondence to the DEQ.
2. Permit and conduct vehicle inspections for domestic septage.
3. Utilize available enforcement guidance (<https://www.deq.idaho.gov/media/60184534/final-enforcement-procedures-manual-070820.pdf>) when developing potential enforcement cases.

Protocol F: Water Pollution / Water Quality

This section outlines certain roles and responsibilities for addressing water pollution and water quality. The DEQ has responsibilities to protect surface and ground water quality.

A. Surface Water Quality

The DEQ will:

1. Conduct water pollution surveys in areas of concern and provide copies of studies to the Districts.
2. Work cooperatively with the Districts regarding sources of water pollution under the delegated authorities of this MOU.
3. Interpret any surface water samples collected by the Districts for compliance with the Water Quality Standards (IDAPA 58.01.02) and will advise the Districts when it is appropriate to conduct or post public health notices at recreation sites.
4. Fulfill DEQ's role as detailed in the Harmful Algal Bloom (HAB) response protocol.

The Districts will:

1. Notify the DEQ regarding available information on new, suspected, or known point and non-point sources of water pollution and work cooperatively under the DEQ's direction regarding the identified sources of water pollution.
2. At their discretion, conduct public health surveys including sampling of surface waters for *E. coli*, or other pathogens as appropriate, only in known areas where primary contact recreation occurs (beach surveys). The Districts will not sample surface waters in areas of secondary contact recreation unless under direct coordination with the Regional Office, Surface Water Quality Program Manager.
3. Provide assistance when possible with public health outreach under advisement from the DEQ regarding primary contact recreation sites.
4. Fulfill the District's role as detailed in the Harmful Algal Bloom (HAB) response protocol.

B. Ground Water

The ground water quality act directs all state agencies to incorporate the adopted ground water quality protection plan in the administration of their programs (I.C. § 39-126). This section of the Idaho Code also directs cities, counties, and other political subdivisions of the state to incorporate the ground water quality protection plan in their programs and authorizes and encourages them to implement ground water quality protection policies within their respective jurisdictions.

Idaho Code § 39-126 further states that whenever a state agency, city, county, or political subdivision of the state issues a permit or license which deals with the environment, the entity issuing the permit or license shall take into account the effect the permitted or licensed activity will have on the ground water quality of the state and may attach conditions to the permit or license in order to mitigate potential or actual adverse effects from the permitted or licensed activity on ground water quality of the state.

Administration of the Individual/Subsurface Disposal Rules and Cleaning of Septic Tanks includes aspects of both public health protection and protection of surface and ground water quality. Acceptance of delegation of this program includes the DEQ authority to protect surface and ground water quality.

The DEQ will:

1. Notify the appropriate district when ground water quality monitoring results of drinking water wells detect contaminants in excess of the drinking water standards.
2. Notify the appropriate district when aquifers or parts of aquifers are being proposed for recategorization or designation as a ground water quality management area.
3. Provide the Districts with information on the utilization and implementation of the Idaho Ground Water Quality Rule.
4. Work to develop a central repository for ground water quality data and provide the Districts with a format for providing data.
5. Provide guidance to the Districts on standard operating procedures for collecting a ground water quality sample.
6. Conduct activities in accordance with the January 2020 (or more recent if available) Idaho Ground Water Protection Interagency Cooperative Agreement when possible.

The Districts will:

1. Provide technical assistance to private well owners as requested and as resources allow.
2. Collect ground water quality samples in accordance with the district standard operating procedures.
3. Regarding ground water activities in which the Districts are involved, provide location information using GPS technology along with any analytical data, when available; and record IDWR well tag information if available. If the IDWR well tag information is not available, then the Districts may, at their discretion, attach the IDWR well tag (with owner permission) and record information. The importance of well tags is that they provide a unique identifier for the sampled wells.
4. Assist the DEQ in the development of a DEQ central repository for ground water quality data and designate a contact person for transfer of water quality data to the DEQ.
5. Conduct activities in accordance with the January 2020 (or more recent if available) Idaho Ground Water Protection Interagency Cooperative Agreement.

SEPTIC PROGRAM

SEPTIC PERMITS

Individual System

New.....	\$700.00
Expansion/Remodel.....	\$500.00
Failed/Repair.....	\$500.00

Central(2+ Connections)/Large Soil Absorption System

New	\$1,500.00
Repair	\$750.00

Tank Only / Vault Privy / Remediation.....	\$350.00
Permit Renewal/Transfer.....	\$50.00
Speculative Site Evaluation.....	\$300.00

(Apply fee to permit within 1 year.)

SEPTIC SYSTEM INSTALLER

Annual License for Installing Standard & Basic Alternative Systems.....	\$50.00
Annual License for Installing ALL Systems (including Complex Alternative).....	\$100.00

SEPTIC SYSTEM PUMPER

Annual License.....	\$40.00
Each Vehicle.....	\$20.00

Program Resources:

58.01.03- Individual/Subsurface Sewage Disposal Rules
<https://adminrules.idaho.gov/rules/current/58/580103.pdf>

Technical Guidance Manual
<https://eiph.idaho.gov/EH/Septic/WW-TECHNICAL%20GUIDANCE%20DOCUMENT-entire%201219-2.pdf>

Standard Operating Procedures (SOP)
Version 6- 04/2018

Enforcement Obligations:

1. Education and Technical Assistance- Informal resolution is attempted through education and technical assistance with the goal of voluntary compliance. Should the informal approach fail to resolve violations, more formal legal proceedings will be initiated.
2. Notice of Violation- The start of any enforcement action is initiated after an investigation of an alleged violation or an inspection shows a public health law or rule has been violated. The NOV will clearly identify the alleged violation(s), specify the statute, rule, regulation, order, or permit violated, state the amount of potential civil penalty associated with each violation and provide for a written response within 15 days.
3. Conduct a Compliance Conference - The recipient of a NOV shall be provided an opportunity to explain the circumstances of the alleged violation and, where appropriate, to present a proposal for remedying damage caused by the alleged violation and assuring future compliance. Recipients of an NOV shall have 15 days from the date of receipt of the NOV to contact the issuing Health District for the purposes of scheduling a compliance conference. Compliance conferences shall be held within 20 days of the date of receipt of the notice, unless a later date is agreed upon between the parties. If a compliance conference is not requested by the NOV recipient, the issuing Health District may proceed with civil enforcement action or a referral package to DEQ.
4. Consent Order - If the recipient and the Health District agree on a plan to remedy damage caused by the alleged violation and to assure future compliance, the two parties may enter into a consent order formalizing their agreement.

A consent order shall be effective immediately upon signing by both parties and shall preclude any civil enforcement action for the same alleged violation. If the parties cannot reach agreement on a consent order within 60 days after the receipt of the NOV or if the recipient does not request a compliance conference, the Health District may commence and prosecute a civil enforcement action in the district court in and for the county in which the alleged violation occurred.

5. Legal Action- When it becomes obvious that no resolution can be reached to correct the violation(s), a Legal Action Package should be prepared and submitted to legal counsel. The Legal Action Package should include:
 - A copy of the NOV.
 - A list of the alleged violations, supporting documentation for each violation, and the date each occurred.
 - Copies of all correspondence.
 - Copies of any lab reports, if applicable, to the case.
 - Copies of any photos taken.
 - Copies of plans and specifications, if applicable to the case.
 - A list of the actions taken to achieve compliance.
 - A short statement of the compliance history and a statement summarizing the present assessment of the case.