

**City of Carson City
Agenda Report**

Date Submitted: July 7, 2015

Agenda Date Requested: July 16, 2015

Time Requested: 15 minutes

To: Carson City Board of Health
From: Board of Health Chairman (Susan Pintar)

Subject Title: Discussion Only: Present and discuss the Community Coalition which is a multi-disciplinary team with representation from Carson Tahoe Hospital, Carson City Health and Human Services, Carson City Sheriff's Department, Carson City's Fire Department, FISH, Ron Wood Resource Center, and Nevada Health Center. (Mary Jane Ostrander – mostrander@carson.org, Ed Epperson and Ritta Sheppard - Carson Tahoe Hospital)

Staff Summary: The Community Coalition serves as a multi-disciplinary team that identifies the most vulnerable Carson City residents, those who are frequent users of the emergency services, the hospital, and the jail/court system. Monthly meetings allow team members to share the resources available, discuss barriers that prevent the resident from stabilizing, and collectively prepare a case plan to meet the resident's basic needs. The goal is to provide community services in an effective and efficient manner without duplication. Updates are communicated to the Community Coalition members throughout the month on resident's successes, barriers, and failures.

Type of Action Requested: (check one)
 Resolution Ordinance
 Formal Action/Motion Other (Specify) Information Only

Does This Action Require A Business Impact Statement: Yes No

Recommended Board Action: Presentation and discussion only

Explanation for Recommended Board Action: N/A

Applicable Statute, Code, Policy, Rule or Regulation: NRS 217.300

Fiscal Impact: No General Fund Impact

Explanation of Impact: N/A

Funding Source: N/A

Alternatives: N/A

Supporting Material: N/A

Prepared By: Nicki Aaker, MSN, MPH, RN

Reviewed By: N. Aaker Date: 7/7/15
(Department Head)
Nicki Aaker Date: 7/7/15
(City Manager)
[Signature] Date: 7/7/15
(District Attorney)
[Signature] Date: 7/7/15
(Finance Director)

Board Action Taken:

Motion: _____ 1) _____ Aye/Nay
2) _____

(Vote Recorded By)