5:00 PM, Tuesday, April 12, 2022
Training Center
3131 O Street
Lincoln, NE 68510

<table>
<thead>
<tr>
<th>AGENDA ITEM</th>
<th>DESCRIPTION</th>
<th>SUPPORTING DOCUMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>CALL TO ORDER</td>
<td>Roll Call</td>
<td></td>
</tr>
<tr>
<td>APPROVAL OF AGENDA</td>
<td></td>
<td>Agenda</td>
</tr>
<tr>
<td>APPROVAL OF MINUTES</td>
<td>Regular Meeting – February 8, 2021</td>
<td>Minutes</td>
</tr>
<tr>
<td>PUBLIC SESSION</td>
<td>Any person wishing to address the Board of Health on a matter not on this Agenda may do so at this time.</td>
<td></td>
</tr>
<tr>
<td>DEPARTMENT REPORTS</td>
<td>A. Health Director Update – Lopez</td>
<td>Monthly Report</td>
</tr>
<tr>
<td></td>
<td>B. Minority Health Summit – Randa, Kakarlapudi, Humm</td>
<td></td>
</tr>
<tr>
<td></td>
<td>C. Legislative Review – Flowerday, Lopez</td>
<td></td>
</tr>
<tr>
<td>CURRENT BUSINESS Action Items</td>
<td>A. Proposed Revisions to Food Safety Program Policy 222.30 – Routine Food Establishment Inspections – Daniel</td>
<td>Proposed Policy revisions and related staff memos</td>
</tr>
<tr>
<td></td>
<td>B. Proposed Revisions to Food Safety Program Policy 222.85 – Food Advisory Committee – Daniel</td>
<td></td>
</tr>
<tr>
<td></td>
<td>D. Proposed Revisions to Waste Management and Hazardous Materials Policy 211.01 – After Action Review for HazMat Incidents - Hanisch</td>
<td></td>
</tr>
<tr>
<td>CURRENT BUSINESS Information Items</td>
<td>A. Lead Program – Holmes, Kernen, Kakarlapudi</td>
<td></td>
</tr>
</tbody>
</table>
AGENDA ITEM | DESCRIPTION | SUPPORTING DOCUMENTS
--- | --- | ---
**FUTURE BUSINESS** | Request for Information/Topics for Future Agendas |  
**ANNOUNCEMENTS** | Next Regular Meeting – May 10, 2022 - 5:00 PM |  
**ADJOURNMENT** |  |  

Additional Information: **Glossary of Abbreviations**

This agenda will be kept continually current and will be available for public inspection within the Lincoln-Lancaster County Health Department during normal working hours. A copy of the Open Meetings Law is posted at the meeting site.

The City of Lincoln complies with Title VI of the Civil Rights Act of 1964 and Section 504 of the Rehabilitation Act of 1973 guidelines. Ensuring the public’s access to and participating in public meetings is a priority for the City of Lincoln. In the event you are in need of a reasonable accommodation in order to attend or participate in a public meeting conducted by the City of Lincoln please contact Geri Rorabaugh at the Lincoln-Lancaster County Health Department at 402-441-8093 as soon as possible before the scheduled meeting date in order to make your request.
TO:   Board of Health Members, Media and
       Interested Parties

FROM:  James Michael Bowers, President

SUBJECT: Meeting Notice and Tentative Agenda

DATE:  March 29, 2022

5:00 PM, Tuesday, April 12, 2022
Training Center
3131 O Street
Lincoln, NE 68510

The tentative agenda is as follows:

I.  CALL TO ORDER – Bowers
    A.  Roll Call

II. APPROVAL OF AGENDA – Bowers

III. APPROVAL OF MINUTES – Bowers
    A.  Regular Meeting – February 8, 2022

IV. PUBLIC SESSION

Those wishing to speak on items relating to other Board of Health business not on the
agenda may speak during the public session portion of the agenda. Each speaker is
limited to five (5) minutes. Time limits maybe extended or reasonably decreased at the
discretion of the Board President. The public session period will be limited to one (1)
hour.

V. DEPARTMENT REPORTS

    A.  Health Director Update – Lopez
    B.  Minority Health Summit – Randa, Kakarlapudi, Humm
    C.  Legislative Review – Flowerday, Lopez
VI. CURRENT BUSINESS – Action Items

A. Proposed Revisions to Food Safety Program Policy 222.30 – Routine Food Establishment Inspections – Daniel
B. Proposed Revisions to Food Safety Program Policy 222.85 – Food Advisory Committee – Daniel
D. Proposed Revisions to Waste Management and Hazardous Materials Policy 211.01 – After Action Review for HazMat Incidents - Hanisch

VI. CURRENT BUSINESS – Information Items

A. Lead Program – Holmes, Kernen, Kakarlapudi

VIII. FUTURE BUSINESS

A. Request for Information/Topics for Future Agenda

IX. ANNOUNCEMENTS

Next Regular Meeting – May 10, 2022 - 5:00 PM

X. ADJOURNMENT

This agenda will be kept continually current and will be available for public inspection within the Lincoln-Lancaster County Health Department during normal working hours. A copy of the Open Meetings Law is posted at the meeting site.

The City of Lincoln complies with Title VI of the Civil Rights Act of 1964 and Section 504 of the Rehabilitation Act of 1973 guidelines. Ensuring the public’s access to and participating in public meetings is a priority for the City of Lincoln. In the event you are in need of a reasonable accommodation in order to attend or participate in a public meeting conducted by the City of Lincoln please contact Angel Edwards at the Lincoln-Lancaster County Health Department at 402-441-8093 as soon as possible before the scheduled meeting date in order to make your request.
I. ROLL CALL

The meeting of the Board of Health was called to order at 5:03 PM by James Michael Bowers at the Lincoln-Lancaster County Health Department. Members present: Stacie Bleicher, James Michael Bowers, Sean Flowerday, Jay Jarvis, Dustin Loy, Jacqueline Miller, Tom Randa, Rick Tast (ex-officio).

Members absent: Katie Garcia, Jasmine Kingsley, Candace Berens (ex-officio), and John Ward (ex-officio).

Staff present: Patricia Lopez, Gwendy Meginnis, Kerry Kernen, Scott Holmes, David Humm, Raju Kakarlapudi, Renae Rief, Brian Baker, Kylie Gokie, Jesse Davy, and Janette Johnson.

II. APPROVAL OF AGENDA

Mr. Bowers asked if there were any corrections to the agenda. No corrections were requested.

Motion: Moved by Dr. Miller to approve the agenda as printed. Second by Dr. Loy. Motion carried by a 6-0 roll call vote.

III. APPROVAL OF MINUTES

Mr. Bowers asked if there were any corrections to the minutes. No corrections were requested.

Motion: Moved by Dr. Bleicher that the January 11, 2022 minutes be approved as printed. Second by Mr. Randa. Motion carried by a 7-0 roll call vote.

IV. PUBLIC SESSION

No one came forward.
V. DEPARTMENT REPORTS

A. Health Director Update

Director Lopez encouraged the Board to review the Department report, highlighting the 260 bat calls received in August 2021 by Animal Control and the Health Promotion & Outreach chronic disease prevention work to complete 11 community conversations to advance efforts of the Minority Health Initiative grant and the Community Health Assessment.

The Lincoln-Lancaster County Health Department was presented the Union College Community Partnership award for our support of their academic programs and assistance in creating a safe campus environment to continue their learning. This collaboration provides an avenue for Public Health Nursing students to gain experience through rotations at the Department. Several present and past employees came to the Department as a result of this mutual effort.

Community conversations with equity groups continue with completion by March 31. The remaining equity groups include: blind-partnering with the Commission for the Blind and Federation for the Blind, local chapter; older adults-partnering with Aging Services; and unhoused-partnering with CenterPointe for those with severe and persistent mental illness, partnering with Matt Talbot and People’s City Mission for the working family population, partnering with the HUB and Cedars for unhoused youth/young adult, and partnering with Friendship Home for those experiencing domestic violence. The results will be included in the CHIP prioritization process. The community conversations with the culture centers and the communities they serve are completed. Currently, community conversations are scheduled for the four quadrants of the City and are being scheduled in the core of the City as well as in the north and south areas of rural Lancaster County. Board members are invited to participate in the community conversation in the quadrant where they reside.

The Department’s Healthy Families America program has been providing virtual home visits to families over the last three weeks due to the COVID risk dial and increase in positive cases. This protocol is assessed weekly with plans to return to in-person home visits when practical. The program has maintained the current caseload during this time.

Director Lopez announced that the mask mandate has been extended for two weeks, until February 25. This decision was based upon hospitalization numbers and proportionally high Lancaster County positivity rates. Board members will receive the situational reports by email. UNL and LPS report proportionally lower positivity rates, and wastewater testing has also seen a decrease in numbers.
COVID test kits received by the Department will be made available to schools, child cares, and culture centers. These tests have a feature where individuals can Facetime with a medical professional who will watch them take the test and provide guidance on the result.

**Staff Presentations – Child Care Health Program**

Environmental Public Health Child Care Health Program staff, Renae Rief, provided a presentation on their Child Care Health Consultation Services. The child care program assists centers to develop practices and procedures, offers trainings throughout the year for center staff, and cultivates relationships with the centers where they are comfortable consulting the Department on issues as they arise. A key resource in this effort has been regular communication with child care centers and various health organizations via Zoom to discuss best practices and learn from each other to create and maintain the healthiest environment possible for the children in their care. The program also receives on-line illness reports from centers that Department staff can respond to and provide the most consistent and current guidance for the centers and families they serve.

**Discussion:**
No discussion or action requested from the Board.

**Staff Presentation – Safe Kids Lincoln-Lancaster County**

Health Promotion & Outreach Division Manager, David Humm, and Injury Prevention Coordinator, Brian Baker, provided an overview of the Safe Kids program which focuses efforts on unintentional injury for children 14 years of age and younger. The Health Department is the lead agency and coordinates activities in the Child Passenger Safety, Sports Injury Prevention, Bike & Pedestrian Safety, Fire & Burn Prevention, Water Safety, and Home Safety task forces.

Through a grant from Safe Kids Nebraska, the Sports Injury Prevention Task Force developed an on-line coach’s course (The Game Plan), videos, handouts, tip sheets, and posters for use by youth sports organization leaders, coaches, and families of the young athletes on dehydration, concussions, and overuse injuries. This material is easily accessible at [www.safekidslincoln.org](http://www.safekidslincoln.org) on the Sports Injury Prevention page.

The Child Passenger Safety Task Force provides car seat checks for community members every month throughout the year. Additionally, they coordinate 3-5 events each year with culture centers and agencies for low income, ethnic/racial minority families. At these events, parents work one-on-one with a certified technician to learn how to properly install and use their car seat. Data collected by the technicians at these events show a 75% misuse rate which reinforces the need to continue this service.

Our staff also provides Child Care Transportation Training every month for licensed child care providers that transport children. This training is required under the Nebraska DHHS Children’s Services Licensing Under Child Care Centers regulation.
Discussion:
No discussion or action requested from the Board.

VI. CURRENT BUSINESS (Action Items)

A. LB 859

Director Lopez provided an overview of the public health impact on a local level posed by LB 859.

A recommendation was made that the Board approve submission of a letter of opposition of LB 859.

Motion: Moved by Mr. Flowerday. Second by Dr. Miller. Motion carried by a 7-0 roll call vote.

B. LB 1138

Director Lopez provided an overview of the public health benefit locally and across the state offered through LB 1138.

A recommendation was made that the Board of Health approve submission of a letter of support for LB 1138.

Motion: Moved by Dr. Miller. Second by Mr. Randa. Motion carried by a 7-0 roll call vote.

VII. CURRENT BUSINESS (Information Item)

A. Legislative Review

Director Lopez discussed three pieces of legislation: LB 756 which could negatively impact local health departments and put the burden of dealing with the manufacture of methamphetamine which contaminate properties and presents health risks on the departments; LB 956 which could have unintended consequences if changes in the provisions relating to confidential public health information were made; and, LB 954 which would preempt certain county and municipality resolutions or ordinances relating to electronic smoking devices under the Nebraska Clean Indoor Air Act which would prohibit local regulations on restriction of flavored tobacco, vapor, or nicotine products which could negatively impact efforts to decrease youth initiation and use of tobacco/vapor products.
VIII. FUTURE BUSINESS

Mr. Bowers suggested information on lead in the community.

IX. ANNOUNCEMENTS

Next Meeting – March 8, 2022 at 5:00 PM.

X. ADJOURNMENT

Motion: Moved by Dr. Miller that the meeting adjourn. Second by Dr. Bleicher. Motion carried by a 7-0 roll call vote. The meeting was adjourned at 6:25 PM.

Janette Johnson
Recording Secretary

Dr. Katie Garcia
Vice President
ANIMAL CONTROL

Animal Control in the process of hiring an ACO I to replace Randy Sipp who retired in March after 40 years of service. We hope to the position filled in the next few weeks.

May 1, 2022 is the date that out “busy season” starts and we will make adjustments with existing staff so we have a 3rd shift night officer 5 days per week. This is the second year we will have a night officer and we hope this provides better service to the public especially during the busy times when we get multiple bat calls during the night and very early morning hours.

The Animal Control Advisory committee will meet April12th. This will be the first in person meeting of the Advisory committee in the past 2 years. The Committee will be reviewing new and revised ordinance changes. These ordinances will be advanced to the Board of Health with recommendations from the Advisory Committee.

A smaller group of division managers are meeting to prepare strategies for Board of Health involvement and engagement in several areas and with the community. After a recent review with Director Lopez and timeline is being drafted and will come to the Board for discussion in May at the soonest.

COMMUNITY HEALTH SERVICES

Home Visitation

Healthy Families America (HFA) received notification of our HFA site visit for accreditation which is scheduled for March 5-7, 2023. Staff will be spending the next year to prepare for this onsite visit which occurs every 4 years.

Public Health Clinic

Refugee Statistics for 2021-2022 (unduplicated)

<table>
<thead>
<tr>
<th>Month</th>
<th># of adult refugees served</th>
<th># of children refugees served</th>
<th>Nationality</th>
</tr>
</thead>
<tbody>
<tr>
<td>October</td>
<td>6</td>
<td>7</td>
<td>Sudan/Syrian/Myanmar</td>
</tr>
<tr>
<td>November</td>
<td>19</td>
<td>13</td>
<td>Afghanistan</td>
</tr>
<tr>
<td>December</td>
<td>25</td>
<td>27</td>
<td>Afghanistan</td>
</tr>
<tr>
<td>January</td>
<td>22</td>
<td>33</td>
<td>Afghanistan</td>
</tr>
<tr>
<td>February</td>
<td>55</td>
<td>46</td>
<td>Afghanistan</td>
</tr>
</tbody>
</table>
## WIC

### Caseload (Participation)

<table>
<thead>
<tr>
<th></th>
<th>Total</th>
<th>State:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>4,023 (+73 Feb 2021)</td>
<td>34,896 (+190 Feb 2021)</td>
</tr>
<tr>
<td>Main</td>
<td>2,701 (+42 Jan 2022)</td>
<td></td>
</tr>
<tr>
<td>Cornhusker Clinic</td>
<td>1,322 (+0 Jan 2022)</td>
<td></td>
</tr>
<tr>
<td>%Enrolled with Benefits</td>
<td>91.04% (+1.24% Jan 2021)</td>
<td></td>
</tr>
</tbody>
</table>

### Participants by Category/Breastfeeding Information

<table>
<thead>
<tr>
<th></th>
<th>LLCHD</th>
<th>State of Nebraska</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Women</strong></td>
<td>776 (19.3%)</td>
<td>7,082 (20.4%)</td>
</tr>
<tr>
<td><strong>Total Children</strong></td>
<td>2,477 (61.6%)</td>
<td>20,351 (58.3%)</td>
</tr>
<tr>
<td><strong>Total Infants</strong></td>
<td>770 (19.1%)</td>
<td>7,438 (21.3%)</td>
</tr>
<tr>
<td>Infants Receiving Breastmilk</td>
<td>269 (6.7%)</td>
<td>2,572 (7.7%)</td>
</tr>
<tr>
<td>Infants Exclusive Breastmilk</td>
<td>96 (2.4%)</td>
<td>929 (2.7%)</td>
</tr>
</tbody>
</table>

### Mentoring:

#### Students

<table>
<thead>
<tr>
<th></th>
<th>UNL: Rose Kroeger, Carrie Dawdy, Tina Dinh, Jacob Kitchen</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interns</td>
<td></td>
</tr>
<tr>
<td>Volunteers</td>
<td></td>
</tr>
<tr>
<td>LMEP Residents</td>
<td>Dr. Aly Wurster &amp; Dr. Aubrey Walker</td>
</tr>
</tbody>
</table>
**WIC Qi—No Show Rates:**

<table>
<thead>
<tr>
<th>Month</th>
<th>FFY 21 Main Office</th>
<th>FFY 21 North Office</th>
<th>FFY 21 LLCHD Overall</th>
</tr>
</thead>
<tbody>
<tr>
<td>October</td>
<td>14.2%</td>
<td>16.7%</td>
<td>15.0%</td>
</tr>
<tr>
<td>November</td>
<td>13.6%</td>
<td>14.5%</td>
<td>13.9%</td>
</tr>
<tr>
<td>December</td>
<td>14.1%</td>
<td>14.2%</td>
<td>14.2%</td>
</tr>
<tr>
<td>January</td>
<td>13%</td>
<td>17.7%</td>
<td>14.6%</td>
</tr>
<tr>
<td>February</td>
<td>14.1%</td>
<td>11%</td>
<td>13.2%</td>
</tr>
<tr>
<td>March</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>April</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>May</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>June</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>July</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>August</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>September</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Average</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- There were 19 working days in February. The February caseload was 4,023 (+73 from Feb 2021 and +42 from Jan 2021).
- No-show rates decreased compared to the previous month (-1.4%).

**Dental Clinic Services:**

- Total number of clients served (unduplicated count): 479
- Total number of patient encounters (duplicated client count): 608
- Total number of patient visits (duplicated provider appointments/visits): 858
- Total number of Racial/Ethnic and White non-English speaking patients: 368 (77%)
- Total number of children served: 295 (62%)
- Total number of clients enrolled in Medicaid: 406 (85%)
- Total number of all clients with language barriers: 250 (52%)

(Arabic, Chinese, Farsi, French, Karen, Kurdish, Russian, Spanish, Ukranian, Vietnamese, Other)
There was an increase of 35 provider visit when compared to January 2022 and a decrease of 184 provider visits when compared to February 2021. The failed appointment rate for February was 17% compared to 19% in January.

**Student Rotations:** 1

UNMC College of Dentistry dental student – 2

UNMC College of Dentistry dental hygiene students - 8

**Community Outreach Services Total: 267**

**Fluoride Varnish Program:**

CEDARS: 25
Educare: 147
K Street Early Head Start: 95
ENVIRONMENTAL PUBLIC HEALTH

Outdoor Air Quality Monitoring

**Air Quality Goal:** Protect human health and the environment by maintaining air quality that does not impact human health, that prevents illnesses and diseases caused by poor air quality, and that protects the plants, animals, water, and soil upon which human life depends.

**Indicator:** Maintain ‘Good’ air quality at least 90% of days measured.

**Strategies (What we do):** Monitor air for Ozone (O₃) and fine Particulate Matter (PM₂.₅).

**Indicator Description:** The United States Environmental Protection Agency’s (US EPA) Air Quality Index (AQI) establishes color-coded characterizations of air quality based on the National Ambient Air Quality Standards (NAAQS). The Lincoln/Lancaster County area’s AQI is determined based on monitoring conducted for Ozone and PM₂.₅.

**Indicator Rationale:** Air quality that meets the criteria for ‘Good’ in the EPA’s Air Quality Index (AQI) is considered satisfactory, and poses no significant risk to public health. Maintaining ‘Good’ air quality also helps to avoid more stringent Federal requirements, which could hamper economic development.

**Funding Source(s):** Air pollution emission fees, user fees, general fund, and grants fund the program.

**History & Background:** The Health Department has been delegated authority by the US EPA and the Nebraska Department of Environment and Energy (NDEE) to manage the Title V Operating Permits program and to regulate other sources of air pollution in Lincoln and Lancaster County. Local regulations reflect Federal and State air quality laws and regulations. The Air Pollution Control Advisory Board (APCAB) advises the LLCHD on all air quality matters. Fine particulate matter (PM₂.₅) is monitored year-round, and Ozone is monitored March 1 through October 31 to assess compliance with the health-based NAAQS. Ozone and PM₂.₅ data is also used to provide AQI data to the public.
**Air Quality Summary:** The graph compares the percentage of ‘Good’ days (shown in green) for the past 5 years, compared to the current indicator of 90% ‘Good’ days. In FY2021, 85.7% of days measured were in the ‘Good’ category for air quality based on monitoring data for both Ozone and PM$_{2.5}$. Most days that were not in the ‘Good’ category of air quality were ‘Moderate’ (yellow), though there was 1 day in 2021 where the 24-hour AQI was in ‘Unhealthy for Sensitive Groups’ (orange) category. Still, the air quality in Lancaster County continues to meet EPA air quality standards and does not pose significant public health risks.

**Fine Particulate Matter Monitoring:** Lincoln’s air quality is continuously monitored for fine particulate matter, called PM$_{2.5}$. Higher levels of PM$_{2.5}$ can trigger heart attacks, asthma attacks and breathing problems for people with COPD. In Lancaster County, elevated levels of PM$_{2.5}$ are the primary reason for poorer air quality days. There are two Federal standards (NAAQS) for PM$_{2.5}$, listed as follows:

- **Annual Average:** 12 micrograms per cubic meter ($\mu$g/m$^3$)
- **24-Hour Average:** 35 micrograms per cubic meter ($\mu$g/m$^3$)

Compliance with the annual standard is based on the average of three consecutive years. Compliance with the 24-hour standard is based on the 98th percentile of the maximum daily average concentrations, averaged over 3 consecutive years. PM$_{2.5}$ monitoring data shows a stable trend in for both annual and 24-hour averages. The 3-year averages for the past 5 years are provided in the graphs below, with each year representing the last year in the associated 3-year averaging period. As shown below, Lincoln/Lancaster County PM$_{2.5}$ levels are well below both Federal standards.
**Ozone Monitoring:** Ground level ozone (also referred to as ‘smog’) is associated with aggravation of COPD, asthma, and irritation of the lungs. Ozone forms when the sun interacts with hydrocarbons (VOCs) and Nitrogen Oxides (NO$_X$). Ozone formation is increased when temperatures are warmer, and accordingly, ozone is not monitored during winter months. Ozone is transported by prevailing winds, which tend to be from the south and southeast during warmer months, thus the LLCHD’s monitor is located in Davey, NE (about 12 miles north of central Lincoln). The NAAQS for ground-level ozone is 0.070 parts per million (ppm).

Over the past 15 years, there has been a consistent trend in decreased NO$_X$ and VOC emissions from the industrial sector in Lancaster County, with the most significant factor being attributed to an approximately 70% reduction of NO$_X$ emissions from Nebraska Public Power District’s Sheldon Station near Hallam. While NO$_X$ is also emitted from a variety other industrial, commercial, and residential fuel combustion sources, motor vehicles are now the largest source of NO$_X$ emissions.
Many growing communities see increasing levels of ozone primarily due more vehicles and urban sprawl, which increases fuel consumption due to vehicle miles driven, thus increasing air pollution. Newer, more efficient vehicles with more stringent pollution control and better fuel economy, the growing number of hybrid and EV vehicles, and efforts to promote commuting by bicycle, bus, and walking will help ensure our ongoing compliance with the NAAQS.

Lincoln/Lancaster County have maintained Federal “attainment” status for air quality for over two decades, and our levels of ozone are still significantly lower than the NAAQS standard. Compliance with the ozone NAAQS is based on a 3-year average of the 4th highest daily maximum 8-hour concentration. The 3-year averages for the past 5 years are provided in the graph above, with each year representing the last year in the associated 3-year averaging period. As shown, ozone concentrations for Lincoln/Lancaster County remained stable for several years before decreasing in 2020 and 2021.

**The State of Lincoln’s Air:** We are happy to report that Lincoln/Lancaster County was once again recognized by the American Lung Association in their *State of the Air 2021* report ([link](#)) for having exceptionally clean air. We again received a ‘A’ ratings for both ozone and ‘short-term’ (24-hour) PM$_{2.5}$ pollution levels, and were recognized as being the among the cleanest areas in the nation for ozone and short-term PM$_{2.5}$ pollution. Lincoln/Lancaster County also earned a ‘passing’ grade for the annual PM$_{2.5}$ concentration.
Controlled Burning, Wildfires, and Smoke Pollution: Agricultural burning, conservation burning, and wildfires all produce smoke that contains many harmful pollutants, including PM$_{2.5}$ and nitrogen oxides (NO$_X$). PM$_{2.5}$ can embed deep in the lungs and even pass directly into the bloodstream. Higher levels of PM$_{2.5}$ can trigger heart attacks, asthma attacks and breathing problems for people with COPD. Increased emissions of NO$_X$ can lead to elevated levels of Ozone, causing aggravation of COPD, asthma, and irritation of the lungs.

Agricultural and prescribed conservation burning in Lancaster County and other nearby Nebraska counties has grown steadily over the past several years, and at times, it does contribute to PM$_{2.5}$ levels experienced in Lancaster County.

However, local prescribed burning continues to pale in comparison to the burning of tallgrass prairie in the Flint Hills area of Kansas and Oklahoma. On average, about 2.2 million acres are burned in the Flint Hills ecoregion ever year. That represents an area 4 times the size of Lancaster County. In 2021, about 1.9 million acres were burned in the Flint Hills, a decrease from the 2.65 million acres burned in 2020.

The smoke resulting from these fires often makes its way to Lincoln via southerly springtime winds, sometimes increasing our PM$_{2.5}$ concentrations to levels that can be unhealthy for all people, regardless of their health status. The NO$_X$ generated by this burning has also led to higher Ozone levels in Lincoln. The lower number of acres burned in 2021, combined with favorable weather conditions, limited smoke impacts to Lancaster County. There were only 3 days in throughout March, April, and May of 2021 where the daily average AQI reached the ‘moderate’ (yellow) category. There were no ‘unhealthy for sensitive groups’ (orange) AQI days during that time.

While no specific actions have been taken that are expected to significantly reduce smoke levels experienced in Lincoln in the spring of 2022, the LLCHD has continued to focus on ensuring people are informed of potential health impacts from smoke. The Air Quality Program issued a news release on March 15, 2022 encouraging residents to monitor air quality using the AQI.
throughout the springtime burning season, usually starting mid-March and ending early-May. ([https://www.lincoln.ne.gov/News/2022/3/15](https://www.lincoln.ne.gov/News/2022/3/15))

During the springtime burning season, Air Quality Program staff use internet air quality modeling and fire map resources to closely monitor and anticipate potential smoke impacts from agricultural and conservation burning in Kansas and Oklahoma. Staff also coordinate closely with officials from the Nebraska Department of Environment and Energy (NDEE), the Nebraska Department of Health and Human Services (NE DHHS), the National Weather Service (NWS) and the Douglas County Health Department to monitor and predict smoke impacts for Lancaster County and other parts of southeast Nebraska. The Kansas Department of Health and Environment (KDHE) shares their air quality modeling data and information on likely heavy burn periods.

Based on information received from the NWS and their own in-house predictive modeling, the NDEE coordinates with the NE DHHS to issue smoke advisories to warn residents of potential smoke impacts. These smoke advisories are the product of an ever-growing partnership between local, state, and national agencies, and have allowed the LLCHD Air Quality Program to focus on issuing advisories only when AQI values are expected to reach the ‘Unhealthy for Sensitive Groups’ (orange) category. The NWS will also continue to issue county-level ‘air quality alerts’ when forecasting data predicts significant smoke impacts.

In recent years, Lancaster County has also experienced poor air quality resulting from a far less predictable source of smoke...wildfires. In 2021, the highest daily AQI for Lancaster County was 107, which falls in the ‘unhealthy for sensitive groups’ (orange) category. The source of this elevated value was smoke from wildfires in Manitoba and Saskatchewan, Canada. These wildfires were located about 800-1,000 miles north of Lincoln, yet still had a significant impact on our air quality. While the current collaborative efforts between the LLCHD, NDEE, NWS, and other agencies were borne out of the desire to anticipate smoke impacts from controlled burning in the Flint Hills ecoregion, the results have been instrumental in anticipating and keeping the public informed of wildfire smoke impacts, as well.

Air Quality Program staff work to mitigate local smoke impacts by carefully reviewing requests for open burning permits in Lancaster County. That review often leads to placing conditions in open burning permits that restrict applicants to burning when winds are likely to carry smoke away from any nearby affected populations. An additional restriction that is standard in all of the LLCHD’s burn permits is that permitted burns cannot be conducted when the AQI is 75 or higher (i.e., mid-moderate or worse). This helps to ensure that any open burning in the county does not contribute to worsen air quality when the AQI is approaching the ‘Unhealthy for Sensitive Groups’ (orange) category.
**Partnerships & Efficiencies:** The NDEE contracts with LLCHD to conduct Air Quality Monitoring and passes Federal money to LLCHD that partially funds this work. This assures maximum efficiency and immediate access to local air quality data allowing real-time decision making on Health Advisories. LLCHD works closely with NDEE, NDHHS, and the National Weather Service to determine when conditions might present health risks and issue health advisories.
TO: Board of Health

FROM: Justin L. Daniel, REHS, CP-FS, Environmental Health Supervisor
Environmental Public Health Division

DATE: March 31, 2022

SUBJECT: Proposed Revisions to Food Safety Program Policy 222.30 – Routine Food Establishment Inspections

Lincoln-Lancaster County Health Department’s Food Safety Program conducts routine food establishment inspections to evaluate the food handling practices and overall compliance with the State of Nebraska and City of Lincoln Food Codes. Routine inspections are required by law and conducted to identify existing or potential hazards and make recommendation for corrective action. These actions support the Food Safety Program goal of reducing foodborne illnesses by providing safe food to the public. Environmental Public Health reviews policies on a regular basis to verify they are current. Staff reviewed policy 222.30, Routine Food Establishment Inspections and it was reviewed by the Food Advisory Committee on March 30th.

The proposed revisions include:

- Language clean-up in sections I – III.
- Section IV identified specific items to check during a routine inspection. This section was deleted and replaced with a statement that routine food establishment inspections are conducted as standardized per policy 222.01, Food Safety Program Quality Improvement and Standardization.
- Language was changed to allow the inspection report to be provided to the Person in Charge by either printed or electronic copy.
- Language was changed stating that LLCHD will email an inspection report to the business owner email on record.

This Policy was reviewed by the Food Advisory Committee on March 30, 2022, and they recommended approval of these revisions.

Staff recommend that the Board of Health approve the revisions to Policy 222.30 – Routine Food Establishment Inspections.
**POLICY STATEMENT:**
Routine inspections of food establishments shall be conducted as standardized as per policy 222.01 Food Safety Program Quality Improvement and Standardization. by the Nebraska Department of Agriculture, the Nebraska Food Code, the Nebraska Pure Food Act, the Lincoln Food Code, and this policy. Inspection intervals are established by Policy 222.38, Inspection Intervals. Routine and follow-up inspections shall be unannounced unless there are unusualmitigating circumstances. Environmental Health Specialists shall conduct inspections in accordance with this policy.

**PROCEDURE:**
I. Upon entering the establishment, the Environmental Health Specialist (EHS) will introduce herself/himself, request to see the person in charge (PIC) and state the purpose of the visit. A business card and/or city employee identification should be presented to the PIC.

II. The EHS will wear an effective means of hair restraint and wash his/her hands before proceeding to conduct the inspection. The EHS will record observations and deficiencies during a routine or follow-up inspection in an appropriate manner so that proper entries may be made on the inspection report as identified by the Nebraska Department of Agriculture (NDA) through standardization.

III. The EHS will carry a food thermometer, minimum/maximum recording thermometer, alcohol sanitizing wipes, sanitizer test strips, flashlight, and digital camera. The thermometers will be sanitized prior to use with an alcohol wipe or another approved sanitizer. Additional recommended inspection tools to have available include a black permanent marker, extra pens, and extra batteries. In addition, the EHS will utilize a computer and printer to generate a paper copy or email of the inspection report to the PIC at the time of inspection.

IV. The EHS will inspect the establishment as standardized per policy 222.01, Food Safety Program Quality Improvement and Standardization. Areas of concern during the inspection will include but not be limited to the following:

A. Food supplies;
B. Food Protection;
C. Food Temperatures;
D. Health and hygiene practices of employees;
E. Sanitary design, construction, and installation of equipment and utensils and their state of repair;
F. Sanitization, cleanliness, storage and handling of equipment and utensils;
G. Water supply is from an approved source, hot water available, and has adequate pressure;
H. Sewage is properly disposed of into public sewer or approved private facilities (LLCHD’s Water Program shall be notified of any food establishments using a private on-site sewage system);
I. Plumbing is properly installed and maintained with no cross connections or back siphonage;
J. Toilet facilities;
K. Hand-washing facilities are provided, convenient, and adequately supplied in all food preparation, food dispensing, and warewash areas;
L. Garbage disposal is adequate;
M. Pest control;
N. Floors, walls, and ceilings clean and in good repair;
O. Adequate and shielded lighting is provided;
P. Ventilation facilities are provided and maintained;
Q. Suitable lockers, coat racks, or dressing rooms are provided and kept clean;
R. Compliance with the Lincoln Smoking Regulation Act (LMC 8.50) and the Nebraska Clean Indoor Air Act of 2008;
S. Outdoor sanitation;
T. Items of special concern in F-memos prepared by NDA; and
U. Compliance with Food Manager and Alcohol Manager permits and other applicable Food Handler and Alcohol Server/Seller permits and record keeping requirements.

V. After completing the inspection process, the EHS will determine a suitable location in the establishment and complete enter all pertinent information in the InspectTab inspection computer program. The EHS shall document specific Nebraska Food Code, Nebraska Pure Food Act and Lincoln Food Code sections where deficiencies were identified, comment specifically what each deficiency was, and provide a recommendation for correction when possible. All violations including "grandfathered" items will be recorded as violations. Responsible Beverage Server/Seller Training non-compliance will be marked as “Out of Compliance” on the inspection report, and an Official Notice will be issued identifying the specific violations. Include vegetable on Official Notice and alcohol compliance check.
VI. If a Food Enforcement Notice is issued, or the EHS determines that a follow-up inspection is needed, the “follow-up” box must be checked on the inspection report. Follow-up inspections will be done using the appropriate report format in the inspection program. 

VII. Once the inspection report is complete, the EHS will review the report with the PIC in a suitable environment where distractions are limited. The EHS shall explain all deficiencies and clarify any violations. After the review is complete, both the PIC and the EHS will sign the digital report and the EHS will provide the PIC with a printed-paper or electronic copy.

VIII. When the EHS returns to the office, the inspection report shall be filed into the establishment’s digital file. While in the InspecTab Report Manager, the EHS shall select the appropriate report to be filed and complete the following steps:

A. Select the “Send to Mail Drop w Cover” button to generate the risk factor report to the mail drop with a cover letter to be sent to the business owner email on record. 

B. Select the “EMAIL” button if a Notice of Violation or a Food Enforcement Notice was issued. The report shall be emailed to the Food Team, Supervisor, Office Manager and Division Manager.
TO: Board of Health

FROM: Justin L. Daniel, REHS, CP-FS, Environmental Health Supervisor
Environmental Public Health Division

DATE: March 31, 2022

SUBJECT: Proposed Revisions to Food Safety Program Policy 222.85 – Food Advisory Committee

Lincoln-Lancaster County Health Departments Food Safety Program works closely with The Food Advisory Committee (FAC). The objective of the FAC is to advise the Lincoln-Lancaster County Board of Health regarding the effective regulation of the food industry as a means to protect the health of the public. Having continuous collaboration with FAC partners provides a formal process to provide equal input on the regulation of the food industry. Such input is incorporated into program policies and codes to support the Food Safety Program goal of reducing foodborne illnesses by providing safe food to the public. Environmental Public Health reviews policies on a regular basis to verify they are current. Staff reviewed policy 222.85, Food Advisory Committee, and it was reviewed by the Food Advisory Committee on March 30th.

Revisions to this policy are very minimal:
- Nebraska Restaurant Association has changed names to Nebraska Hospitality Association
- Section 5 of the Bylaws was changed so that meetings are not limited to being held at the health department.
- The signature line for the Board of Health President has been removed.

This Policy was reviewed by the Food Advisory Committee on March 30, 2022, and they recommended approval of these revisions.

Staff recommend that the Board of Health approve the revisions to Policy 222.85 – Food Advisory Committee.
POLICY STATEMENT:

The Food Advisory Committee is established to advise the Lincoln-Lancaster County Board of Health regarding the effective regulation of the food industry as a means to protect the health of the public. Members of the Committee will be appointed by the Board of Health nominations prepared by the Health Director or his/her designee. The Health Director will solicit nominees from the Nebraska Restaurant Hospitality Association, Nebraska Grocery Industry Association, the general public and any other entity with an interest in the operation of the program. The Committee shall have at least 12 members; eight will represent the industry and four the general public. At no time will the number of industry members exceed the general public representatives by more than six members.

PROCEDURE:

I. The members of the committee shall be appointed in accord with Policy 100.30 - Appointments and Functions of the Department Advisory Committee.

II. The Food Advisory Committee shall meet at least once a year. The Committee shall review the Food Code, program policies, compliance with FDA’s Voluntary National Retail Food Regulatory Program Standards, and annual report. Additional meetings may be called by the Health Director, Board of Health, or Committee Chair.

III. The objectives of the Food Advisory Committee as specified in the committee by-laws (Exhibit 1) are:

1. Advise the Department about ways to meet and maintain the FDA’s Voluntary National Retail Food Regulatory Standards for LLCHD’s Food Safety Program.

2. Assess the degree of compliance with and regulation of the Lincoln Food Code to assure that the health of the public is protected.

3. Provide guidance regarding objectives for the effective food safety education in Lincoln-Lancaster County.

4. Review and propose revisions to the Lincoln Food Code and LLCHD food program policies.

5. Review the annual report of the program to assure the effectiveness of the program.
Lincoln Lancaster County Health Department
Food Advisory Committee By-laws

Rules

Article I - Name

The name of the committee shall be: Food Advisory Committee.

Article II - Objectives

1. Advise the Department about ways to meet and maintain the FDA’s Voluntary National Retail Food Regulatory Program Standards for LLCHD’s Food Safety Program.
2. Assess the degree of compliance with and regulation of the Lincoln Food Code to assure that the health of the public is protected.
3. Provide guidance regarding objectives for the effective food safety education in Lincoln-Lancaster County.
4. Review and propose revisions to the Lincoln Food Code and LLCHD food program policies.
5. Review the annual report of the program to assure the effectiveness of the program.

Article III – Membership

Section 1 - Number
The membership of this committee shall consist of at least twelve members. The Health Director or his/her designee shall serve as an ex-officio, non-voting member.

Section 2 - Composition
At least four members shall represent the general public, without conflict of interest. At least eight shall represent regulated establishments. If additional members are added above the minimum, the number of industry representatives over consumer members may not exceed six. The Nebraska RestaurantHospitality Association, the Nebraska Grocery Industry Association and the Lincoln Public Schools shall each have a representative on the Committee.

Section 3 - Appointment
The members of the Food Advisory Committee shall be appointed by the Lincoln-Lancaster County Board of Health. The Health Director or his/her designee shall prepare a slate of nominees from the Nebraska RestaurantHospitality Association, Nebraska Grocery Industry Association, any interested organization, and the public.

Section 4 - Term of Office
Except for the industry members from the Nebraska RestaurantHospitality Association, the Nebraska Grocery Industry Association, and the Lincoln Public Schools, appointments shall be for four-year terms. The members representing the Nebraska RestaurantHospitality Association, the Nebraska Grocery Industry Association, and the Lincoln Public Schools, shall not have a term limit. No other member may serve more than two full consecutive terms. Vacancies occurring through resignation, or for other
Exhibit 1

reasons, shall be filled by the Board of Health. The person so appointed shall hold membership for the unexpired term of the former member. Terms for members shall expire in the month of January.

Section 5 - Meetings
Regular meetings of the Committee shall be held at least once each calendar year in the Health Department at a time and place agreed upon by the Committee members. Special meetings may be called at any time by the chair or Health Director or his/her designee. Notices of all meetings shall be mailed and posted by the secretary, to the membership and public in accord with the Nebraska Open Meetings Law. In addition, all meetings shall be conducted in conformance with the Nebraska Open Meetings Law. The Minutes of each meeting shall be prepared and filed with the Lincoln-Lancaster County Health Department within 10 days.

Section 6 - Quorum
For regular or special meetings of the Food Advisory Committee, a quorum shall consist of a simple majority of the current voting membership. The affirmation by a simple majority of current members is required for any official action of the committee.

Section 7 - Rules of Order
Roberts' Rule of Order will be used at meetings. By agreement of all members present, business may be conducted by consensus.

Section 8 - Presence of Members
Each member is expected to attend all meetings of the Food Advisory Committee. Upon two consecutive absences, the Chair shall notify the member that a third consecutive absence shall be cause to request resignation of said member's appointment.

Article IV - Officers

Section 1 - Number of Officers and Their Duties
The Officers of the Committee shall include the chair and vice chair. Staff will serve as secretary to the committee, without vote. Their duties shall be such as are usually performed by such Officers, and such other duties as the Committee shall prescribe.

Section 2 - Election
The officers shall be elected by the Committee from a slate previously prepared and submitted by a subcommittee on nominations.

The election of the Officers shall be voted by ballot; a majority of the votes cast shall be necessary to elect.

Section 3 - Term of Office
The term of office shall be two years. All officers shall be eligible for reelection.
Article V - Subcommittees

Section 1 - Appointment
Such subcommittees as the Committee considers necessary shall be appointed by the chair. The chair of all subcommittees shall be members of the parent committee.

Article VI - Amendments
The By-laws may be amended or annulled subject to approval of the Board of Health at any regular meeting by a majority vote of the entire membership, provided notice of the proposed adoption, amendment, or annulment shall have been sent to each member two weeks before such meeting.

Ratified by the Lincoln-Lancaster County Board of Health this 14th day of October, 2008

__________________________________
Lisa Peterson, President
TO: Board of Health

FROM: Justin L. Daniel, REHS, CP-FS, Environmental Health Supervisor  
Environmental Public Health Division

DATE: March 31, 2022

SUBJECT: Proposed Revisions to Food Safety Program Policy 222.04 – Enforcement Hearings, Administrative Meetings and Inspection Report Appeals

Lincoln Municipal Code 8.20, Lincoln Food Code gives the Health Director the authority to hold Enforcement Hearings with a food establishment permit holder or designated Person in Charge (PIC). Additionally, the Food Safety Program Supervisor or Environmental Public Health Division Manager may hold an administrative meeting with a food establishment permit holder or designated PIC as a step in progressive enforcement to solve compliance issues. Having an updated enforcement policy provides clear guidance on ensuring compliance with the State of Nebraska and City of Lincoln Food Codes. Enforcement is periodically needed to support Food Safety Program goal of reducing foodborne illnesses by providing safe food to the public. Environmental Public Health reviews policies on a regular basis to verify they are current. Staff reviewed policy 222.04, Enforcement Hearings, Administrative Meetings and Inspection Report Appeals, and it was reviewed by the Food Advisory Committee on March 30th.

This policy was completely rewritten during this update to be consistent with current code language and program procedures. Due to the extent of the changes, a marked-up version is not being provided. Following are the most significant modifications:

- Language was changed throughout the policy from Administrative Hearing to Enforcement Hearing for consistency with code language.
- Specific procedures for Enforcement Hearings were removed from the policy, and instead references to Lincoln Food Code, Section 8.20.290, Enforcement Hearings were inserted.
- Notification Proceedings are referenced in the policy via Lincoln Food Code, Section 8.20.320, Notice, Service.
- New language was added on Administrative Meetings and Inspection Report Appeals

This Policy was reviewed by the Food Advisory Committee on March 30, 2022, and they recommended approval of these revisions.

Staff recommend that the Board of Health approve the revisions to Policy 222.04 – Enforcement Hearings, Administrative Meetings and Inspection Report Appeals.
### POLICY STATEMENT:
The Health Director may hold an enforcement hearing as designated in Lincoln Food Code 8.20.290 with a food establishment permit holder or designated Person in Charge (PIC) to show cause why the food establishment’s permit should not be suspended or revoked, or to determine a required resolution for compliance with the Lincoln Food Code.

The Food Safety Program Supervisor or Environmental Public Health (EPH) Division Manager may hold an administrative meeting with a food establishment permit holder or designated PIC as a step in progressive enforcement to solve compliance issues.

### PROCEDURE:

I. **Enforcement Hearings**
   A. An enforcement hearing may be held with a food establishment permit holder or designated PIC when the criteria listed in Policy 222.31, Food Service Establishment Enforcement Policy is met, including when violations identified during an inspection represent an immediate and substantial health hazard to the public, or when more than one inspection identifies repeat priority or priority foundation violations, or the overall sanitation level is below average, or for other violations of the Lincoln Food Code the Health Director determines need to be addressed.

   B. Enforcement hearings shall be held in accordance with Lincoln Food Code 8.20.290.

   C. A notice of the enforcement hearing will be served in accordance with LMC 8.20.320 Notice; Service. The notice will include date, location, time, and reason for the enforcement hearing.

   D. The enforcement hearing will be attended by the Environmental Health Specialist (EHS) who conducted the inspection, the Food Safety Program Supervisor and/or the EPH Division Manager, and the Health Director or the Health Director’s appointed hearing officer. At the Health Director’s discretion, additional staff may be requested to attend the enforcement hearing. The hearing shall be recorded for documentation of proceedings.

   E. The designated hearing officer shall prepare a written recommendation for the Health Director who will make the final determination.
II. **Administrative Meetings**

A. The Food Safety Program Supervisor or EPH Division Manager may hold an administrative meeting with a food establishment permit holder or designated PIC when the food establishment has received enforcement action or upon recommendation of the EHS. This meeting is informal and used to discuss solutions for compliance and explain future consequences if compliance is not achieved and maintained, including an enforcement hearing, permit suspension or revocation. The Food Safety Consultant may participate in this meeting and be assigned to assist the food establishment management in developing and implementing active managerial control measures needed in their food establishment.

B. An administrative meeting may also be held to discuss an appeal request of a food establishment inspection from the permit holder or PIC. This appeal must be submitted in writing.

1. If an appeal of an inspection is received, the inspection will not be posted on the website or released to the public until the outcome of the appeal has been determined. The appellant must provide evidence supporting their appeal of specific violation(s).

2. If the determination of the appeal changes violations marked on the inspection report, the Food Team Supervisor will ensure the needed revisions be made to the inspection report. This then becomes the official inspection report. A revised inspection report will be provided to the food establishment.

3. If the determination of the appeal is that the inspection report stands as issued, the appellant will be notified of this decision.
TO: Board of Health

FROM: Brock W. Hanisch, MS, MPH, REHS, Environmental Health Supervisor
Environmental Public Health Division

DATE: March 31, 2022

SUBJECT: Proposed Revisions to Environmental Public Health Program Policy 211.01 – After Action Reviews for HazMat Incidents

A specific procedure with clear guidance on how to review operations and outcomes of significant hazardous material (HazMat) incidents is essential to ensure continued safety and quality improvement. Exchange of knowledge and experience among responders allows for constructive post-incident review and future planning during similar events. HazMat incidents that meet specific criteria will undergo an After Action Review, whereby actionable items are addressed and information disseminated to sister agencies.

Changes to this policy are minimal as seen in the attached copy and were reviewed after a recent HazMat incident whereby this policy was followed. The last date of review by the Board of Health was in March of 2016.

This Policy was reviewed by all LLCD Emergency Response/HazMat Team members and recommended revisions discussed.

Staff recommend that the Board of Health approve the revisions to Policy 211.01 – After Action Reviews for HazMat Incidents.
POLICY STATEMENT:
To protect and promote the public’s health, a procedure has been developed to discuss and review the operations and outcomes of significant hazardous material (HazMat) incidents, exchange knowledge and experience among responders, and allow for constructive post-incident review and future planning during similar events. HazMat incidents that meet the following criteria will undergo an After Action Review (AAR):

- Negative health effects to the public
- Long term environmental damage
- City-ordered evacuation or shelter in place actions
- Chemical exposures causing injuries or fatalities
- Staff injuries or death from any cause related to incident

PROCEDURE:
I. Following a significant HazMat incident, an AAR may be requested by any of the following staff: Emergency Responder, Section Supervisor, Environmental Public Health Division Manager, or the Health Director.

II. An AAR will be completed at the next regularly scheduled ER team meeting when a majority of staff are able to attend. In certain cases, particularly those involving significant public impacts and/or serious injuries and/or deaths, an AAR may be completed prior to the next regularly scheduled team meeting, at the discretion of the Section Supervisor or other member of the Management Team. Incidents involving significant staff injury or death will occur within 24 hours of the event.

III. At a minimum, an AAR will be attended by those individuals directly involved in the incident and the Section Supervisor. Other important attendees may include responders or other individuals who fulfilled one or more of the following roles during the event:

- A position within the Unified Command structure
- A position within the HazMat Branch or HazMat Group
- Safety Officer or Assistant Safety Officer
- Liaison to the responsible party during clean up

An AAR will be facilitated by the Section Supervisor, a member of the Management Team, or their designee.
IV. AARs will include and incorporate the following elements:

- A brief overview of the incident and the agencies present
- A description of each role fulfilled by ER responders or other LLCHD staff
- An evaluation of the overall response
- Issues or concerns that were encountered or that hampered the response
- Equipment breakdowns, loses, or shortcomings
- Areas for improvement
- Assignment of staff to follow up on recommendations or track improvements

V. All discussion points, findings, outcomes and improvement recommendations developed during an AAR will be documented. The completed AAR will be scanned into ACCELAD the case file. A copy of the AAR will be provided the Division Manager within five (5) working days.