



**NOTICE OF REGULAR MEETING
OF THE WEBER-MORGAN HEALTH DEPARTMENT**

Notice is hereby given that the Weber-Morgan Board of Health will hold its regularly scheduled meeting at the Weber-Morgan Health Department **Annex Building**, 455 23rd St, 2nd Floor Auditorium, Ogden, Utah commencing at **4:00 p.m.** on **Monday, June 22, 2026.**

Agenda for the meeting will consist of the following:

Welcome	Dr. Lee Schussman
Information Items	
1) Friend of Public Health Award	Brian Cowan
2) New Employee Introduction	Brian Cowan
Action Items	
3) Approval of April 2026 Meeting Minutes	Dr. Lee Schussman
4) 2026 Fee Schedule	Michela Harris and Lekelsi Talbot
Information Items	
5) Finance Report	Adriana Pruitt
6) CHA Survey	Kirk Soplar
7) Directors Report	Brian Cowan
8) Chairs Report	Dr. Lee Schussman
9) Adjourn	

*In compliance with the Americans with Disabilities Act, individuals needing auxiliary Communication aids or other services for this meeting should contact Elvira Odeh at eodeh@webercountyutah.gov giving at least three days' notice.
Dated this 19th of June 2026.*

Weber-Morgan Board of Health
Minutes of Meeting
April 27, 2026

The Weber-Morgan Board of Health held its regular meeting on April 27, 2026, in the Health Department Annex at 455 23rd Street. The meeting was called to order at 4:00 p.m. with Dr. Lee Schussman presiding.

BOARD MEMBERS PRESENT:

Lee Schussman	Ryan Barker - Virtual
Ken Johnson	Sharon Bolos - Virtual
Frank Brown	Tiffany Bears - Virtual
Vaughn Nickerson	Ali Martinez - Virtual
Cheryle Allen	Bonnie Wahlen- Virtual

BOARD MEMBERS ABSENT:

Shaun Myers	Jed Burton	Gina Butters
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STAFF MEMBERS PRESENT:

Brian Cowan	Cami Sullenger	Bryce Sherwood	Korina Beltran
Scott Braeden	Ryan Klinge	Sean Hansen	Brad Child
Amy Carter	Lekelsi Talbot	Sherrie Waters	Zach Heuscher
Kirk Spolar	Jarelyn Cox	Lori Buttars	

OTHERS PRESENT:

Chris Crockett

Welcome and Introductions – Dr. Lee Schussman

Dr. Lee Schussman calls the meeting to order at 4:02 p.m. and welcomes those in attendance.

New Employee Introduction

Information Only

Brian Cowan introduced a new staff member, Rachelle Jones, to the Board of Health. She has joined the nursing division and holds a Master of Public Health degree and is a registered nurse. Rachelle brings prior experience in child and maternal health from Arizona, as well as public health and nursing experience in Alaska. The board welcomes Rachelle Jones.

Approval of Board of Health Minutes of February 23, 2026.

Motion Passes

A **MOTION** is made by Vaughn Nickerson and **SECONDED** by Ken Johnson to approve the minutes as written. The **MOTION** passes unanimously.

501 (3) Creation Proposal

Motion Passes

Chris Crockett provided the Board of Health with an overview of the process and considerations involved in creating a 501(c)(3) governmental nonprofit foundation to support the Health Department through grant funding, donations, and fundraising

opportunities. Chris Crockett explained that the Weber Community Foundation was created several years ago to allow organizations and donors to contribute funds for charitable purposes that could then be directed to county programs according to donor intent. Although governmental entities can already accept tax-deductible donations directly, Chris Crockett noted that many organizations and grant opportunities restrict funding to registered 501(c)(3) nonprofits, which has prompted the Health Department to explore creating its own nonprofit entity. Brian Cowan explained that the discussion was initiated after the department's newly hired grant writer identified numerous grants available only to nonprofits, with roughly 40-50 of nearly 100 tracked grant opportunities requiring 501(c)(3) status. Chris Crockett outlined the process for establishing a nonprofit, including identifying the organization's purpose, selecting and registering a name, filing Articles of Incorporation, creating bylaws, appointing a governing board, and applying to the IRS for tax-exempt status, a process expected to take six months to a year. Dr. Lee Schussman asked questions regarding board governance, fiduciary responsibilities, and whether the nonprofit would remain clearly connected to the governmental organization. Chris Crockett explained that the governance structure could be customized through bylaws and emphasized the importance of transparency regarding how donated funds would ultimately support Health Department programs. Ken Johnson asked whether a separate group could independently create a nonprofit associated with the Health Department, and Chris Crockett clarified that organizations substantially controlled or funded by government entities would still be treated as governmental nonprofits subject to additional oversight requirements. Vaughn Nickerson asked whether there were actual grant opportunities available and whether additional staffing would be necessary to manage the nonprofit. Brian Cowan confirmed that grant opportunities do exist and stated that current department staff could likely manage the nonprofit without additional personnel, though grant-funded positions could potentially be added in the future. Ali Martinez asked regarding mission creep and asked how the Health Department would ensure that future grant-funded activities remain aligned with the department's statutory responsibilities. Brian Cowan responded that the nonprofit's bylaws, strategic planning efforts, community health assessments, and community health improvement plans would guide funding decisions and maintain alignment with the department's mission. Bryce Sherwood added that the grant writer is currently tracking approximately 98 grants from organizations such as the Ash Grove Charitable Foundation, Costco, Daniels Fund, and Dell Foundation, many of which require 501(c)(3) status. Frank Brown commented that the large number of potential grants highlighted a significant funding opportunity and expressed support for establishing a dedicated Health Department nonprofit rather than operating under the county's existing foundation. Chris Crockett also noted that the county could provide an interim pathway through the Weber Community Foundation while the Health Department pursued its own nonprofit status, and Brian Cowan confirmed that Michela Harris has been working towards a temporary arrangement with Weber County. A **MOTION** is made by Bonnie Wahlen and **SECONDED** by Vaughn Nickerson to approve the 501 (c) (3) Creation Proposal. The **MOTION** passes unanimously.

Finance Report

Adriana Pruitt presented the final approved 2026 budget, noting a total fund balance utilization of approximately \$937,000, a marginal \$40,000 increase from the tentative budget, primarily due to employee HSA contributions and a corrected duplication of travel funds. A first-quarter financial update indicated expenditures and revenues tracking near 20-22%, consistent with expectations, while tax revenue remains low at

Information Only

approximately 1% due to its typical collection later in the fiscal year. Adriana Pruitt noted that tax revenues are expected to increase significantly by mid-year, with full reconciliation occurring toward year-end. The WIC budget line was clarified as an annual entry that will be reflected at the end of the year. Overall, the department is on track with projected expenses and revenues, with more detailed percentage comparisons to be provided in future quarterly reports.

Annual Report

Information Only

Brian Cowan presented the 2025 Annual Report, highlighting key community demographics, including a service population of approximately 288,000 residents, a median age of 35, a life expectancy of 78.3 years, a median household income of \$93,007, and 8.4% of households below the poverty level. Division accomplishments included Administration: Reduced purchasing, training, and travel request processing time from 17 days to 2 days through a quality improvement project. Clinic and Nursing Services: Improved internal referral processes and strengthened connections for home visitation and related programs. Environmental Health: Completed a five-year vehicle emissions grant, resulting in 211 vehicle repairs and 148 vehicle replacements. Community Health: Developed the "Path of Hope" memorial garden at the Ogden Botanical Gardens, promoting recovery and healing. WIC Program: Implemented updated federal guidance expanding eligible food items (e.g., canned fish, tofu, and produce) and integrated these into nutrition education. Operational statistics reflected substantial service delivery, including nearly 11,000 vaccinations, over 7,900 birth certificates issued, 1,800 food service inspections, and extensive community outreach efforts. The department reported a total 2025 budget of approximately \$13.4 million, primarily funded through grants and contracts, with most expenditures allocated to salaries and benefits. Communicable disease data showed shifts in trends, including decreased COVID-19 activity, increased influenza cases, and chlamydia remaining a leading reportable condition, with other diseases such as hepatitis C and tuberculosis also noted. Clarification was provided by Amy Carter that reported streptococcal infections refer specifically to invasive cases identified through mandatory laboratory reporting.

Director's Report

Information Only

Brian Cowan requested that all Board of Health members complete the annual Open and Public Meetings Act training, with instructions to be sent by Elvira, and asked members to notify her upon completion. Brian Cowan also provided updates on upcoming conferences, including the Utah Association of Local Boards of Health conference at the Davis Conference Center, noting flexible attendance options, and the National Association of Local Boards of Health conference scheduled for October 12–14 in San Antonio, Texas, with travel costs covered. Ken Johnson added that presentation proposal deadlines are approaching and advised board members to assist. Brian Cowan reported on a successful March collaboration with the Weber County Animal Shelter, where 18 individuals received 28 vaccinations, over 300 animals were vaccinated and microchipped, and 12 adoptions occurred, with plans for the event to continue in the future. Brian Cowan gives an update on the measles outbreak, indicating 607 cases statewide since June 2025, with recent declines, while Weber-Morgan reported only two cases in January 2026 and none since, including no recent wastewater detections. In response to questions, staff estimated approximately 10,000 contact tracing notifications for the two cases, supported by community partners such as schools and local organizations. Amy Carter added to the discussion, noting a current hospitalization rate of approximately 8% (about 51 cases), with some complications, such as

encephalitis, requiring longer-term monitoring before accurate rates can be determined.

Chairs' Report

Dr. Lee Schussman discussed the possibility of periodically sharing public health, epidemiology, and medical literature with Board members, including a recent JAMA article on population health policy and reports from the local epidemiologist. Ken Johnson noted that some journal articles may require paid access and that sharing materials could depend on distribution permissions. The Board members expressed support for the idea of sharing public health updates and resources. Dr. Schussman thanked the Health Department and Board members for their continued work, stating that the department's annual report demonstrates the positive impact being made in the community.

Information Only

The Meeting adjourns at 5:03 p.m.

The next meeting will be held on June 22, 2026.

DRAFT



Request for Fee Adjustments and New Clinical Services Effective July 01, 2026

Clinical Nursing Services conducted a fee analysis and consulted WMHD's medical provider, Dr. Gregory Gochmour, to review several service areas where enhancements could improve patient care and accessibility. Based on his clinical expertise and recommendations, we are proposing the implementation of new services and/or expansion of existing services, to better meet patient needs and improve overall service effectiveness.

Travel Vaccines:

Proposed to apply a \$10 increase above actual cost of travel vaccine

Oral Typhoid Vaccine **Fee: \$120** (Increase of \$10)

Injectable Typhoid Vaccine **Fee: \$133** (Increase of \$10)

Yellow Fever Vaccine **Fee: \$206** (Increase of \$10)

Immigration I-693 Medical Examination:

Immigration lab and Physical **Fee: \$350** (Increase of \$10)

I-693 Vaccine Verification **New Fee: \$40**

STI Clinic Testing & Treatment:

STI screening **Fee: \$60** (increase of \$10)

Doxycycline Post-Exposure Prophylaxis (Doxy PEP) Prescription:

Proposed New Service and Fee

New Fee: \$20 Initial Treatment and Education

\$40 Additional Medication Dispensing (15-dose supply)

Doxycycline Post-Exposure Prophylaxis (Doxy PEP) is an evidence-based prevention strategy that can significantly reduce bacterial sexually transmitted infections (STI) incidence among eligible high-risk populations. Incorporating Doxy PEP into a local health department STD screening and treatment clinic would strengthen comprehensive sexual health services, support public health disease prevention goals, reduce STI transmission, and provide patients with an additional tool to protect their sexual health.

Doxy PEP involves taking a single 200 mg dose of doxycycline within 72 hours after unprotected sexual exposure to reduce the risk of acquiring certain bacterial STIs. Clinical

studies have demonstrated that Doxy PEP significantly reduces the incidence of chlamydia, syphilis, and, to a lesser extent, gonorrhea among individuals at elevated risk for these infections.

Presumptive Tx Chlamydia and Gonorrhea infections:

Proposed Change in Service, No Change to Fee

Fee: \$20 per antibiotic treatment needed per CDC treatment guidelines

Presumptive treatment is a proactive public health practice that allows patients to be treated immediately when a sexually transmitted infection is strongly suspected, without waiting for laboratory confirmation.

This approach reduces the spread of disease, prevents avoidable complications, and decreases the likelihood of patients being lost to follow-up before treatment is started. It is also a cost-effective strategy that helps prevent more serious and expensive health outcomes by addressing infection early.

Implementing presumptive treatment supports the health and safety of the community while ensuring timely, equitable access to care.

Record Replacements:

TB Proof of Treatment Card **New Fee: \$10**

Records Copy **Fee: \$10** (Increased from \$2, including any printed records)

Replacement Card **Fee: \$10** (Increased from \$5, vaccine & yellow fever cards)

Laboratory Titer Order:

Proposed New Service and Fee

New Fee: \$20

Providing laboratory titer reduces delays in obtaining required health clearances, and supports compliance with public health, educational, and occupational requirements.

Laboratory titers are commonly used to verify immunity to vaccine-preventable diseases, including Hepatitis B, Varicella, Measles, Mumps, and Rubella. Documentation of immunity is often required for school enrollment, healthcare personnel, and other employment settings. Providing access to these services through the health department reduces barriers to care, promotes public health and safety, and enables timely identification of individuals who may need vaccination or other preventive interventions.

X-ray Order:

Proposed Fee for Existing Clinical Service

New Fee: \$20

WMHD currently provides chest X-ray orders at no charge for patients who receive tuberculosis (TB) testing through our clinic and require follow-up evaluation after a positive result.

WMHD proposes implementing a fee for chest X-ray orders requested by individuals who require additional imaging for school or employment requirements or individuals who report a history of a prior positive TB test. Repeat TB testing is generally not recommended for previous positive cases, staff must review the individual's history, assess the appropriateness of the request, issue the order, document the service, and follow-up as needed.

Implementing a fee would help offset the administrative and clinical resources required to provide this service while continuing to offer a convenient option for individuals who need TB clearance or screening documentation.

Vital Records – State fees approved in the 2026 Legislative Session

OVRS Fee Name	Previous Fee	New Fee
Birth Certificate (1st copy)	\$22	\$25
Death Certificate (1st copy)	\$30	\$35
Marriage/Divorce (1st copy)	\$18	\$25
Amendment	\$5	\$25
Expedite Processing	\$15	\$25
Shipping (US only)	\$0	\$1

**Note: The shipping fee is retained by WMHD*