



**UTAH COUNTY**  
**BOARD OF HEALTH**

151 SOUTH UNIVERSITY AVENUE  
PROVO, UTAH 84601

**MINUTES**  
**September 22, 2025**

Members Present:			
Carl Hanson, Chair	X	Sonia Pineda	X
Jeffrey Ogden, Vice-chair	X	Ryan Schooley	X
Christopher Gordon	X	Julie Fullmer	X
Amelia Powers Gardner	X	Francine Jensen	X
Jordan Singleton	X	Wendy Dau	X
Scott Smith	X		

**Others present:**

Eric Edwards, MPA, MCHES	UCHD Executive Director
Tyler Plewe	UCHD Deputy Director
Heather Murrish	UCHD Secretary
Zachary Zundel	Deputy County Attorney

Number of people in attendance: 9

**1. Welcome by Prof. Carl Hanson, Board of Health Chair**

**2. Approval of minutes from July 28, 2025**

The minutes will be approved in the next meeting on November 17<sup>th</sup>, 2025

**3. UCHD Finances Update**

Eric provided a financial update for the Health Department, noting that with 29% of the fiscal year remaining, 54% of the department's budgetary funds are still available. This strong financial position is largely due to efforts made earlier in the year when division directors were asked to identify efficiencies and cost-saving measures. Over the past few years, departments like Nursing and Health Promotion have reduced or eliminated positions from their staffing plans, which Eric estimates has saved over \$600,000. Operational refinements and other efficiencies have also contributed to the savings. Since approximately 70% of the department's budget is tied to staffing and personnel, there are limits to how much can be cut without affecting services. Eric expressed pride in the divisions for managing to reduce costs without compromising public health services. He

healthier communities. Eric noted the challenges of retrofitting older cities like Provo and the importance of working with newer cities during the planning stages.

The Communications Division was instrumental in producing the Annual Impact Report and has also led rebranding efforts to improve how public health information is communicated. Natalie Butler has presented the Electronic Community Health Assessment, which is now being adopted by other health departments. This tool increases response rates without straining department resources and includes a new data privacy process, a ticketing system in Qualtrics, and an Institutional Review Board (IRB) process for state-level compliance. Environmental Health continues to manage nearly 500,000 vehicle emissions tests annually, a critical task as population and development increase. Their work helps protect air, land, and water quality. Emergency Preparedness has strengthened its partnership with the Sheriff's Office and recently completed a new emergency management facility near the jail complex. This Level 5 response center is fully equipped with a kitchen, showers, cots, a classroom, and more, making it capable of operating 24/7 during major events. It is also located near the 911 Response Center and will serve as a safe space for families during emergencies.

Health Promotion and Prevention continues to focus on improving public wellness through proactive education and prevention strategies. One of their recent initiatives was the Suicide Trail Signage project, alongside ongoing efforts in asthma prevention over the past year. Their work centers on raising awareness about leading causes of illness and empowering individuals and families to make healthier decisions. Dr. Jordan Singleton inquired about the older adult fall prevention program, and Eric explained that the department's long-standing "Stepping On" program was recently discontinued due to funding cuts. It has since transitioned to Intermountain Health, where it will be hosted at the UVRMC campus with expert-led sessions on medication management, core strength, and fall prevention. While not yet implemented in Utah County, other regions have successfully used Tai Chi as an evidence-based method to reduce falls among older adults.

The department is also piloting an opioid prevention program in partnership with school nurses, starting in Superintendent Wendy Dau's district and expanding to Nebo and Alpine. The Nursing Division has conducted over 3,500 home visits, supporting child health, development, and family self-sufficiency. These visits extend beyond prenatal care to include postpartum follow-ups, screening for depression, and connecting families to behavioral health and vocational resources. Immunization efforts remain strong, with over 50,000 vaccines administered to more than 25,000 individuals last year, helping maintain high

emphasized that physicians should focus on educating patients rather than shaming them, helping individuals make informed decisions. Dr. Christopher Gordon agreed, stressing that respectful, informed discussions are the best way to guide people toward healthier choices.

## 5. *West Nile Virus Update*

Curtis Jones, the Epidemiology Bureau Director, provided an update on the West Nile Virus (WNV) in Utah County, noting a significant increase in cases this year. So far, 14 cases have been reported, with 12 classified as neuroinvasive. This is a sharp rise compared to previous years—3 cases in 2024, none in 2023 and 2022, and just 1 in 2021. The virus is transmitted through the bite of an infected mosquito and cannot be spread from person to person, though it can be transmitted through blood donations, which are screened. Most cases appear in August and September, and the incubation period ranges from 2 to 14 days. About 80% of infected individuals show no symptoms, while 20% develop mild, non-neuroinvasive symptoms such as fever, headache, body aches, joint pain, nausea, vomiting, and rash. Less than 1% develop severe neuroinvasive symptoms, including seizures, disorientation, encephalitis, meningitis, paralysis, vision loss, and difficulty waking. These more serious cases are more likely to seek medical care.

Curtis explained that the increase in cases may be linked to a rise in standing water pools across the county, as reported by Jason Bird, which provides breeding grounds for mosquitoes. The epidemiology team identifies and classifies cases based on symptoms reported by healthcare providers, then works with patients to determine possible exposure locations. This information is shared with Jason Bird's team to target mosquito control efforts. The virus is diagnosed primarily through IgM blood tests, though spinal taps are sometimes used. Some cases were cerebrospinal fluid (CSF) negative but still met the case definition. Dr. Dr. Singleton asked whether different viruses were involved, but Curtis clarified that it is the same virus presenting with different symptom severities. He also noted that most severe cases involved individuals over 50 or those with weakened immune systems.

To raise public awareness, the Utah County Health Department produced a social media video featuring Commissioner Powers Gardner, filmed in the new Communications media room. This prerecorded content can be reused as needed and has already shown strong engagement. Eric Edwards praised the collaboration, highlighting the cost-effectiveness of the new media room and the importance of public education during a year with high infectious disease activity. He also noted that additional cases may still emerge before colder weather sets in. Dr. Scott Smith inquired about the geographic distribution of cases, and Curtis



David Flinders, who provided standing orders and made high-level medical decisions. Michael's role focused on day-to-day clinical support, including diagnosis, treatment, and recommendations, while also taking on administrative responsibilities such as HIPAA compliance, privacy, hiring, volunteer coordination, and grant management. Two years ago, after Michael became the Nursing Director, the position was reopened and filled, but the new nurse practitioner left earlier this year for another opportunity. At the same time, budget restructuring was necessary, prompting Michael to explore more cost-effective ways to maintain services.

Rather than rehiring for the full-time position, the department opted to contract the previous nurse practitioner, who was already trained and well-regarded. She continues to take calls and consult with Dr. Miner, helping to distribute the workload. Administrative duties were redistributed among Michael and his five bureau directors. This new model has been in place for several months and is functioning well, though Michael emphasized that he would prefer to reinstate the full-time position when financially feasible. The change has saved approximately \$200,000, and additional cost-saving measures—such as reducing satellite office hours and reallocating staff—have saved around \$75,000 in time-limited positions and over half a million dollars overall.

Ryan Schooley asked whether retention has been a challenge due to other job opportunities. Michael responded that the position is still relatively new, so long-term data is limited, but acknowledged that post-COVID, it has become harder to compete with rising salaries in the medical field. While Human Resources works to keep salaries competitive, they are not always ideal. Dr. Singleton inquired about the compensation structure for the contracted nurse practitioner. Michael explained that it includes both a monthly stipend and hourly pay, with a cap in place to control costs. So far, the department has remained within budget, saving an additional \$150,000 from the nursing budget.

Prof. Hanson then asked Dr. Ogden about the possibility of partnering with local medical programs like BYU's to support staffing. Dr. Ogden noted that many primary care physicians experience burnout and may retire early, not from exhaustion but from the demands of full-time work. He suggested that some might be interested in volunteer opportunities that offer intellectual stimulation and a chance to contribute without the pressure of a full-time role. Dr. Singleton added that during his time with the CDC, retired doctors often returned to volunteer and found it rewarding, suggesting that this could be a viable option for the department to explore.

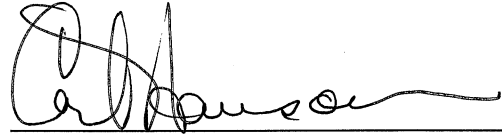
## 8. *Employee Changes*

Eric Edwards provided a brief update on staffing changes within the department.

**11. MOTION: Dr. Scott Smith motioned to adjourn the meeting, seconded by Dr. Jeffery Odgen. No Discussion. Motion carries and approved unanimously.**

A handwritten signature in cursive script, reading "Eric Edwards", positioned above a horizontal line.

Eric Edwards, MPA, MCHES  
Executive Director / Local Health Officer  
Utah County Health Department

A handwritten signature in cursive script, reading "Carl Hanson", positioned above a horizontal line.

Carl Hanson  
Chair  
Utah County Board of Health