



# Dane County

## Meeting Agenda - Final

### Board of Health for Madison and Dane County - Executive Committee

*Consider:*

*Who benefits? Who is burdened?*

*Who does not have a voice at the table?*

*How can policymakers mitigate unintended consequences?*

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Monday, November 19, 2018

9:30 AM

The Atrium; 2300 S Park St, Room 2022, Madison

- CONFERENCE CALL

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If you need an interpreter, translator, materials in alternate formats or other accommodations to access this service, activity or program, please call the phone number below immediately.

Si necesita un intérprete, un traductor, materiales en formatos alternativos u otros arreglos para acceder a este servicio, actividad o programa, comuníquese inmediatamente al número de teléfono que figura a continuación.

Yog tias koj xav tau ib tug neeg txhais lus, ib tug neeg txhais ntawv, cov ntaub ntawv ua lwm yam los sis lwm cov kev pab kom siv tau qhov kev pab, kev ua num los sis kev pab cuam no, thov hu rau tus xov tooj hauv qab no tam sim no.

Please contact Public Health Madison and Dane County at 608 266 4821 or [health@cityofmadison.com](mailto:health@cityofmadison.com).

#### 1. CALL TO ORDER / ROLL CALL

REQUEST FOR CHANGES IN AGENDA ORDER

#### 2. CONSIDERATION OF MINUTES

[2018 MIN-328](#) EXECUTIVE COMMITTEE-BOARD OF HEALTH FOR MADISON AND DANE COUNTY MEETING MINUTES FROM AUGUST 22, 2018

**Attachments:** [BOH-EXEC COMM MTG MINUTES-COUNTY 8-22-2018](#)

#### 3. PUBLIC COMMENT

#### 4. DISCLOSURES AND RECUSALS

Members of the body should make any required disclosures or recusals under the Ethics Code.

## 5. ACTION ITEMS

- 5.a. [2018 RPT-346](#) 2018 TAX LEVY REPORT OF PUBLIC HEALTH MADISON & DANE COUNTY FOR PRIVATE SEPTIC SYSTEMS

**Attachments:** [TaxLevy2018](#)

- 5.b. [2018 BOH RES-022](#) BOH RESOLUTION #2018-23 AUTHORIZATION TO ACCEPT FUNDS FROM WISCONSIN DEPARTMENT OF HEALTH SERVICES TO SUPPORT THE PUBLIC HEALTH EMERGENCY PREPAREDNESS AND COMMUNICABLE DISEASE PREVENTION PROGRAMS

**Attachments:** [BOH RES 2018-23 PHEP and Comm Disease Prevention](#)

## 6. ADJOURN

*NOTE: If you need an interpreter, translator, materials in alternate formats or other accommodations to access this service, activity or program, please call the phone number below at least three business days prior to the meeting.*

*NOTA: Si necesita un intérprete, un traductor, materiales en formatos alternativos u otros arreglos para acceder a este servicio, actividad o programa, comuníquese al número de teléfono que figura a continuación tres días hábiles como mínimo antes de la reunión.*

*LUS CIM: Yog hais tias koj xav tau ib tug neeg txhais lus, ib tug neeg txhais ntawv, cov ntawv ua lwm hom ntawv los sis lwm cov kev pab kom siv tau cov kev pab, cov kev ua ub no (activity) los sis qhov kev pab cuam, thov hu rau tus xov tooj hauv qab yam tsawg peb hnuv ua hauj lwm ua ntej yuav tuaj sib tham.*