

**STATE BOARD OF HEALTH
DRAFT MINUTES
June 12, 2015
9:00 a.m.**

Division of Public and Behavioral Health
4150 Technology Way, Room 303
Carson City, Nevada

Division of Aging and Disability Services
Early Intervention Services
3811 W Charleston, Room #112
Las Vegas, Nevada

Division of Aging and Disability Services
Early Intervention Services
1020 Ruby Vista Drive, Suite 102
Elko, Nevada

BOARD MEMBERS PRESENT:

Stephen Jones, MD (Las Vegas)
Brian Saeman, ESQ (Carson City)
Dipti Shah, MD (Las Vegas)
Jon Pennell, DVM (Las Vegas)

BOARD MEMBERS NOT PRESENT

Michael Cate
Joan Anjum, RN
Monica Ponce, DDS

DIVISION OF PUBLIC & BEHAVIORAL HEALTH (DPBH) STAFF PRESENT:

Marta Jensen, Acting Administrator
Tracey Green, Chief Medical Officer
Laura Freed, Deputy Administrator
Raul Martinez, Administrative Assistant II, Administration
Cindy Ulch, Environmental Health Supervisor, Community Health Services
Steve Tafoya, Emergency Medical Services Manager

OTHERS PRESENT:

Linda Anderson, Sr. Deputy Attorney General, Attorney General's Office (AG)
Barry Lovgren, Self
Nicki Aaker, Director, Carson City Health and Human Services
Joseph Iser, Chief Health Officer, Southern Nevada Health District
Daniel Lurupio, Southern Nevada Health District
Kevin Dick, District Health Officer, Washoe County Health District
Bob Sack, Washoe County Health District
David McNinch, Washoe County Health District
Jeannette Belz, Nevada Psychiatric Association
Joanna Jacob, Ferrari Public Affairs
Jancy Ulch
Melanie Harrill

Chairman Jones opened the meeting at 9:01 a.m. Dr. Jones indicated the meeting agenda was posted at the following locations: Nevada Division of Public and Behavioral Health, Carson City; Washoe County Health District, Reno; Nevada State Library and Archives, Carson City; Grant Sawyer State Office Building, Las Vegas; Early Intervention Services, Elko; Legislative Building,

Carson City; on the Internet at the Nevada Division of Public and Behavioral Health website: <http://www.health.nv.gov>; and the Legislative Counsel Bureau website: <http://www.leg.state.nv.us> in accordance with the Nevada Open Meeting Law.

Roll call was taken and it was determined that a quorum of the State Board of Health was present. Chairman Jones asked if there were any changes to the draft minutes from the September 12, 2014 meeting.

Dr. Pennell stated he was present at the last meeting and did not call in.

Dr. Green informed the Board that item number four would not be presented due to a posting error.

Chairman Jones asked if there was any public comment. Barry Lovgren made a public comment.

Barry Lovgren inquired as to when would be an appropriate time to give public comment on item number four that was pulled from the agenda.

Linda Anderson responded that the end of the meeting would be appropriate.

CHAIRMAN JONES ENTERTAINED A MOTION TO APPROVE THE MINUTES. A MOTION TO APPROVE WAS MADE BY DR. PENNELL. DR. SHAH SECONDED THE MOTION WHICH PASSED UNANIMOUSLY.

REPORTS (Informational)

Nicki Aaker, MSN, M PH, RN, Director for Carson City Health and Human Services, gave a written and verbal report which is attached hereto as Exhibit "A".

Susan Pintar, MD, Carson City and Douglas County Health Officer, was not present and no report was submitted.

Kevin Dick, District Health Officer for Washoe County Health District, submitted a written report and is attached hereto as Exhibit "B".

Joseph Iser, MD, DrPH, MSc, Chief Health Officer for Southern Nevada Health District, gave a written and verbal report which is attached hereto as Exhibit "C".

Tracey D. Green, MD, Chief Medical Officer, introduced Marta Jensen as the acting administrator for the Division of Public and Behavioral Health. She also let the Board know Richard Whitley is now the acting director for the Department of Health and Human Services.

Dr. Green stated Nevada is moving forward with fully integrated delivery of healthcare services. The goal is to improve our rankings and look at the access to healthcare, service delivery and enrollment.

The Primary Care Office has expanded to recruit and retain physicians through the J-1Visa program and the loan repayment program.

The nursing program is working on using fully integrated healthcare centers so there is a single point of entry for all healthcare needs in one location.

Regulations surrounding childcare will also be looked at to improve lifetime health.

A prescription drug abuse bill was passed during the legislative session. There is a prescription drug monitoring program that allows the physician to look up the patient's history to look for prescription drug abuse. A reversal drug can now be prescribed for overdoses.

Dr. Green also gave a brief summary on the review of NRS 233B.100, that was originally requested by Barry Lovgren. The NRS and NAC codes conflict with one another and need to be corrected. The Division will be following NRS, which reflects a decision needs to be made on a petition within 30 days.

Mr. Lovgren also requested an appeal process for decisions made. The Division will need to see if a supplemental appeal process is necessary since the Board members do receive all letters that are sent in from the public.

Mr. Lovgren requested that all regulations be adopted within six months after a petition. A blanket six month is not something the Division is able to do with all the tasks that need to be done during this process.

CONSENT AGENDA

Laura Freed, Deputy Administrator for Regulatory Services, stated item 3c will be tabled from the consent agenda at the request of the Southern Nevada Health District.

CHAIRMAN JONES ENTERTAINED A MOTION ON THE CONSENT AGENDA. A MOTION TO APPROVE ITEMS A, B AND D WAS MADE BY DR. PENNELL. DR. SHAH SECONDED THE MOTION WHICH PASSED UNANIMOUSLY.

PUBLIC COMMENT

Barry Lovgren informed the Board that a Gap's Analysis was conducted in 2013, which identified a problem with the lack of public supervision of state agency operations. Having to remove from the agenda the proposed revisions to NAC 458 is one example. The revision of NAC 458 could have been considered today if the protocols were followed in the Division's policy and checklist for adoption of regulations.

Division policy calls for the Board to meet every other month. This would facilitate the Board's ability to supervise the Division, which has also been ignored. Mr. Lovgren wanted it noted that the March meeting was never rescheduled which means the Board hasn't met for six months.

Mr. Lovgren's previous petition had four elements. The last element requested the petitioner to be notified when a petition is granted, not just denied. The Division's response is silent on this element which violated the policy if this element was granted, or the policy and regulation if it was denied.

Mr. Lovgren's overriding hope is that the Board will address the chronic systemic difficulty with inadequate public supervision.

Dan Lurupio from the Southern Nevada Health District came forward asking why item 3c had been tabled.

Joe Pollock with Nevada Environmental Health Program stated he spoke with Jackie Resitar from the Southern Nevada Health District this morning. She had asked for this item to be tabled.

The meeting was adjourned at 9:52 am.



CARSON CITY, NEVADA
CONSOLIDATED MUNICIPALITY AND STATE CAPITAL

State Board of Health
Carson City Health and Human Services Report
June 12, 2015

Clinical Services – For the time period January 1 – April 29, 2015, clinic staff saw 1,922 unduplicated patients for a total of 2,892 visits compared to 2,047 patients for a total of 2,896 visits for the same time period in 2014. Many Title X sites have seen dramatic reductions in patient volumes as newly-insured patients migrate to primary care providers; however, this is not the case for CCHHS. These numbers reflect a decrease in the number of immunizations given in the clinic which is due to the school located vaccination program.

Clinical Services has been collaborating with your department to offer Medicaid enrollment services one day a week at our office. For the time period November 2014 – March 2015,

- 109 individuals have been assisted and received eligibility determination,
- 98 individuals have enrolled in Medicaid, and
- 11 individuals have been provided insurance information and referred to the Health Insurance Exchange.

Community Health Nursing in Douglas County – The clinic will be moving into their new location at the new Community and Senior Center during the last full week of June.

School Located Vaccination and Community Vaccination Clinics – Clinics are being scheduled beginning September 2015.

Environmental Health Regional Partnership with Douglas County – The partnership is going well. In 2014, 448 routine inspections were conducted. Staff conducted 25 scored follow-up inspections. In addition, 159 temporary events were inspected. There were 14 complaints submitted against food establishments: 3 (21%) were confirmed and 11(79%) were unconfirmed.

Environmental Health – Carson City – In 2014, 547 routine inspections were conducted. Staff conducted 17 scored follow-up inspections. In addition, 119 temporary events were inspected. There were 31 complaints submitted against food establishments: 6 (19%) were confirmed and 25(80%) were unconfirmed.

Carson City Health & Human Services

900 East Long Street • Carson City, Nevada 89706 • (775) 887-2190 • Hearing Impaired–Use 711

Clinical Services (775) 887-2195 Fax: (775) 887-2192	Public Health Preparedness (775) 887-2190 Fax: (775) 887-2248	Human Services (775) 887-2110 Fax: (775) 887-2539	Disease Control & Prevention (775) 887-2190 Fax: (775) 887-2248	Chronic Disease Prevention & Health Promotion (775) 887-2190 Fax: (775) 887-2248
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EXHIBIT "A"

Epidemiology – From January – April 2015, there were 10 investigations conducted for possible measles. No cases were confirmed. In Carson City, 1.4% of the school children have an exemption from vaccinations and within Douglas County, 1.8% have an exemption.

Remote Area Medical (RAM) Event - RAM event is scheduled for October 16-18 at Carson High School and October 9-11 in Yerington. Karen Allen from CCHHS is the Triage Coordinator for the event. It is anticipated that up to 800 people a day will be seen. This event was held in Reno last year.

Public Health Preparedness – A Family Assistance Center Exercise was conducted in April in collaboration with Carson City Emergency Management and the Carson City Sheriff's Office. Washoe County assisted with this exercise. CCHHS helped plan the Rural Preparedness Summit which was attended by some of our staff.

Chronic Disease Prevention and Health Promotion – Within our Tobacco program, the Quitline is being promoted by in person training of area healthcare providers on the Quitline, and providing them with a Quitline fact sheet, brief intervention information, and magnets to distribute to patients.

A Care Binder was developed for distribution to HIV positive individuals contacted through our Ryan White program. This binder is designed to be a reference and tool to keep important information in one place.

Within our Abstinence program, the coordinator is working with the Storey County School District Family Life Committee for inclusion of the program into the health curriculum. Also, the coordinator is exploring new partnerships for both the Abstinence and PREP programs.

Public Health Accreditation Update – On May 18, 2015 our documentation was submitted. Over 1,000 documents were submitted as part of this process. The completeness review is in progress.

Respectively yours,

Nicki Aaker, Director
Carson City Health and Human Services

**WASHOE COUNTY
HEALTH DISTRICT**
ENHANCING QUALITY OF LIFE

June 3, 2015

To: State Board of Health Members
From: Kevin Dick
Washoe County District Health Officer
Subject: June 2015 Washoe County District Health Officer Report

Regional Emergency Medical Services

Work on Regional EMS oversight and development of the EMS program continues. Response data is being compiled and analyzed to provide a better understanding of system performance. A meeting of the EMS Advisory Board is scheduled for June 4, 2015. The Advisory Board will discuss an approach to revising the REMSA Franchise response zones, and the development of a 5-year EMS system strategic-plan.

Truckee Meadows Healthy Communities

Commissioner Lucey provided funds in the amount of \$13,122 to support the Truckee Meadows Healthy Communities Initiative's Community Hubs project in the 89502 zip code. The 89502 Project supports access to healthcare and social services, access to healthy foods, and community safety for residents of 89502. The first Community Hub meeting will be held on July 22, 2015. The Health District worked with the Commissioner and his staff to assist with the funding arrangements.

The Health District assisted the Food Bank with preparation of a C4C Community Pilots Grant funding proposal to the Arnold Foundation through Feeding America to provide funding for community planning activities in conjunction with Truckee Meadows Healthy Communities to address food insecurity, health, housing, and income/poverty within the 89502 zip code. If funded, the first year of the grant award will allow for additional planning within the 89502 zip code in an effort to determine root causes of food insecurity, prioritized health and housing issues, and poverty.

Information on Truckee Meadows Healthy Communities is available at <http://www.truckeemeadowshealthycommunities.com/>.

Community Health Improvement Plan

The first Community Health Improvement Plan (CHIP) Steering Committee meeting took place on May 14, 2015. In an effort to orient Steering Committee members to the project, Sara Dinga and I provided the committee information related to the Health District's Fundamental Review process, the Community Health Needs Assessment, and a timeline for development of the CHIP. Furthermore, Steering Committee members discussed their primary roles and responsibilities which include: supporting the Health District's CHIP planning efforts; acting as an Ambassador to the CHIP process; and providing recommendations to guide the CHIP development process. Finally, Steering Committee members discussed next steps to include selection of priority issues at the next meeting to be held on June 11, 2015. CHIP Steering Committee meetings will be held the second Thursday of each month.

OFFICE OF THE DISTRICT HEALTH OFFICER
1001 East Ninth Street | P.O. Box 11130 | Reno, Nevada 89520
ODHO Phone: 775-328-2416 | Fax: 775-328-3752 | washoecounty.us/health
Serving Reno, Sparks and all of Washoe County, Nevada. Washoe County is an Equal Opportunity Employer.



Public Health
Prevent. Promote. Protect.

EXHIBIT "B"

Subject: June 2015 Washoe County District Health Officer Report

Date: June 3, 2015

Page 2 of 2

Food Regulations

At its regularly scheduled meeting on May 28, 2015, the Washoe County District Board of Health conducted a public hearing to take comment and consider adoption of proposed amendments to the Regulations of the Washoe County District Board of Health Governing Food Establishments. By unanimous vote (5-0 with two absent) the Board approved the proposed amendments. The amended regulations provide a standardized regulatory foundation (Standard 1) based on the FDA Model Food Code; a critical building block necessary for meeting and implementing other aspects of the FDA's Voluntary National Retail Food Regulatory Program Standards. The amended regulations provide a framework for risk based inspections focused on the top five foodborne disease risk factors.

Fees

On April 23, 2015 the District Board of Health adopted fees for Air Quality and Environmental Health for which there were previously no charges for services. The fees were proposed in accordance with Fundamental Review recommendations to improve cost recovery for services provided.

Budget

The Board of County Commissioners approved an FY 16 budget for the Health District of \$20,021,160. The budget includes a general fund transfer of \$10,076,856 to the Health Fund.

Fundamental Review

Progress implementing the recommendations from the Public Health Foundation's Fundamental Review of the Health District continues. The current dashboard of progress implementing of the Fundamental Review recommendations implementation is attached.

Attachment:

Fundamental Review Dashboard

Fundamental Review Recommendation Status

Legend:

May 28, 2015

Complete
Underway
Underway - Regulatory, Budget, Policy Analysis or Issue Resolution Necessary or in Process
Underway but Progress Stalled or Delayed
Not Yet Underway - No Changes Necessary
Parking Lot
Not Recommended

Status	Goal
1	Place WIC organizationally where it is most closely aligned with similar functions
a.	WIC moved to CCHS effective 1/21/14
2	Develop a DBOH orientation manual and program
a.	Design an orientation program and compile a draft manual
3	Strengthen customer focus, exploring the potential for user groups to share consumer viewpoints
a.	Land development user group established
4	Critically examine clinic appointment scheduling from a patient access perspective
a.	Staffing IZ five days a week, accept IZ walk ins on a limited basis
b.	Extended IZ hours established.
c.	Staffing Vital Statistics five days a week
d.	Discussion has begun with Interactive Voice Response software companies
5	Update fee schedules and billing processes for all clinical and environmental services
a.	Third-party billing service began July 1, 2014
b.	Identify costs for permits and services that could be included in fee schedules/propose
c.	Identify costs for regulatory programs that could be included in fee schedules/propose
d.	Identify community and clinical services for which reimbursement is available/bill

Fundamental Review Recommendation Status

6	Explore tiered level of services for Environmental Health programs and inspections
	a. Consider the desire & support for this type of tiered structure and this item within the larger context
7	Participate in the business process analysis across all building permitting in the county
	a. ILA and contract with Accela signed. 16-month implementation proceeding.
8	Develop infrastructure to support the District Health Officer
	a. The Office of the District Health Officer was established on July 1, 2014. Staffing in process.
9	Implement time coding for employees
	a. Time coding in EHS has been expanded, AQM timecoding is underway. CCHS timestudy occurring.
10	Perform cost analysis of all programs
	a. A proposed schedule approved on June 26, 2014 by DBOH. Pilot analysis of Administration completed.
11	Perform assessment of needed administrative and fiscal staffing to increase efficiencies
	a. Will be performed in conjunction with program const analysis. See 10a
12	Demonstrate a concerted effort among all parties to address tensions regarding overhead/direct costs
	a. Additional General Fund transfer provided in FY 15 adopted budget to support unrecoverable indirect costs.
13	Align programs and services with public demand
	a. Shifted home visiting resources to provide additional clinical services on June 1, 2014
	b. Assess changes in service levels and program alignment with respect to CHA CHIP, SP or funding
14	Conduct a CHA in concert with current partner organizations
	a. Complete.
15	Develop metrics for organizational success and improved community health
	a. In FY15, continue to identify metrics that help to manage programs and resources and tell our story
16	Continue current collaborative action plan to resolve REMSA oversight issues
	a. Franchise Agreement approved, Regional EMS Oversight Program and Advisory Board established.
17	Maintain current levels of local and state financial support
	a. Action on this recommendation is captured under Recommendation 12 above
	b. Advocate sustaining or enhancing funding through State agencies
18	Conduct a governance assessment utilizing NALBOH criteria
	a. Completed January 16, 2014. Determine future schedule to repeat.
19	Undertake an organizational strategic plan to set forth key Health District goals and objectives
	a. Conduct a strategic planning initiative following the completion of the CHA and a CHIP
20	Implement a performance management system
	a. Use results of program cost analysis, performance metrics and SP to develop & implement performance mgmt. syst

Fundamental Review Recommendation Status

21	Consider alternative governance structures
	a. This is not a recommendation for staff action
22	Take a greater leadership role to enhance the strong current State/Local collaboration
	a. Health District efforts to focus on internal and local issues
	b. Seek direction from DBOH on a greater leadership role
23	Develop an organizational culture to support quality by taking visible leadership steps
	a. Cross-Divisional Q-Team established and Div. QI projects conducted. Additional mgmt. training completed.
24	Seek Public Health Accreditation Board accreditation
	a. Seek DBOH direction on this recommendation once the CHA, CHIP and the SP are completed

Acronyms: IZ - Immunizations

ILA - Interlocal Agreement

CHA - Community Health Assessment

CHIP - Community Health Improvement Plan

SP - Strategic Plan

QI - Quality Improvement

DBOH - District Board of Health

NALBOH - National Association of Local Boards of Health



DATE: June 12, 2015
TO: State Board of Health Members
FROM: Joseph Iser, MD, DrPH, MSc, Chief Health Officer
SUBJECT: District Health Officer Report

Healthy Southern Nevada

The Southern Nevada Health District and community partners, including the UNLV School of Nursing, UNLV School of Community Health Sciences, Dignity Health-St. Rose Dominican, University of Nevada School of Medicine, and United Way of Southern Nevada have launched the Healthy Southern Nevada website. This first-of-its-kind website is a source of community health information and population data available to planners, policy makers, and community members to use as a tool for conducting community assessments, strategic planning and community health improvement and advocacy activities. The website is available at: www.HealthySouthernNevada.org.

The Healthy Southern Nevada website features a number of tools for users. The "Find Health Data" section allows the user to view more than 100 economic, social and health indicators for Clark County, and the "Promising Practices" section is a collection of documented approaches to improving community health and quality of life from around the country. Additional tools can assist in generating reports, indexing socioeconomic needs, comparing health indicators, and finding health disparities. This website is also integral to the health district's current efforts to complete a Community Health Assessment and Community Health Improvement Plan as part of the [Public Health Accreditation](#) process. In addition, this information is intended to be a resource for all interested audiences, including but not limited to hospitals and health care providers, other public health agencies, health coalitions, non-profits, city planners, policy makers, educators, local service providers, and students.

Additional [HealthySouthernNevada.org](http://www.HealthySouthernNevada.org) partners include representatives from the: American Heart Association; Center for Progressive Policy and Practice, LLC; Clark County Social Service; Clark County School District; Federal Reserve Bank of San Francisco; Las Vegas Chamber of Commerce; March of Dimes, and; Nevada HAND.

Accreditation Update

- The Strategic Planning subcommittee hosted an internal management retreat on April 20, 2015. During the retreat, the Health District's mission, vision and value's statement were reviewed and discussed. A Strength, Weakness, Opportunities, and Threats (SWOT)

EXHIBIT "C"

analysis was conducted, and the beginning stage of identifying goals and objectives was completed.

- The Community Health Assessment Steering Committee met on April 22, 2015, and identified the health priorities that will be disseminated to the Community Health Improvement Plan subcommittee to use during the Community Health Improvement Planning process.
- The Community Health Assessment subcommittee is currently working to combine the four Mobilizing Action through Planning and Partnerships (MAPP) assessments into the Community Health Assessment document. A draft of the assessment will be presented to the Board of Health at the May 2015 meeting.
- The Community Health Improvement Plan subcommittee is finalizing their community partner welcome letter. The welcome letter will invite designated community partners to be involved in the Community Health Improvement planning process. The subcommittee is planning to have the first community partner meeting in June 2015.
- The Quality Improvement Team subcommittee presented the Plan Do Study Act cycle to the Leadership Team. The study is currently being revised based on feedback received.
- The Nevada Public Health Training Survey that was administered to staff closed on April 17, 2015. The Health District is working with the Nevada Public Health Training Center to extract the data which will be used for the Workforce Development Plan.
- All accreditation subcommittees are currently presenting their respective gap analyses to the A-Team.

Coaches Challenge

More than 10,000 Clark County School District elementary schools participated in the Health District's 8th annual Coaches Challenge program. This year's Coaches Challenge program included students from 87 elementary schools. Participating classes collectively earned a total of 300,719 points, the most since the program began in 2007. Each point equals a serving of fruit or vegetables or 15 minutes of physical activity.

This year's Coaches Challenge winning classrooms represent 5 elementary schools. They were visited by UNLV head coaches:

- **1st Grade- Hoggard Elementary School:** Softball coach Lisa Dodd, 1:30 p.m., Thur. May 14, Mabel Hoggard Elementary School, 950 N Tonopah Dr Las Vegas, 89106
- **2nd Grade - Fay Galloway Elementary School:** Women's basketball coach Kathy Olivier, 1 p.m., Wed. May 13, Fay Galloway Elementary School, 701 Skyline Rd Henderson, 89002
- **3rd Grade - Park Elementary School:** Football coach, Tony Sanchez, 11 a.m., Wed. May 13, John S Park Elementary School, 931 Franklin Ave Las Vegas, 89104
- **4th Grade - Harmon Elementary School:** Track & field coach, Yvonne Wade, 10:30 a.m., Tue. May 19, Harmon Elementary School 5351 Hillsboro Lane, LV 89120
- **5th Grade - John Vanderburg Elementary School:** Men's basketball coach, Dave Rice, 9 a.m., Wed. May 13. Vanderburg Elementary School, 2040 E. Desert Shadow Trail, Henderson 89012

The annual Coaches Challenge is a collaborative effort between the Southern Nevada Health District, the Clark County School District and UNLV Athletics. The Challenge encourages grade-school children to choose healthy food and to participate in physical activity. Each year, the winning classrooms receive tickets to UNLV sporting events and the grand prize winning classrooms receive a visit from a UNLV head coach.

Senate Bill 314

Senate Bill 314 was signed by Governor Sandoval. This bill will add an administrative health officer position, change the current composition of the Southern Nevada District Board of Health, and add an advisory board. The fiscal impact to the Health District is estimated to be:

Costs for new staff member:

Salaries & benefits	\$340,266
Vehicle expense	7,200
Travel	6,000
Dues & memberships	<u>2,500</u>
Total	\$355,966

Costs for advisory committee meetings

Approximate Total	\$ 30,000
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Add Costs to Health District \$386,000

Soda Free Summer

The Southern Nevada Health District kicks off its 3rd annual Soda Free Summer Challenge on June 8, 2015, in an effort to encourage children and adults to choose water or other healthier beverages and reduce or eliminate sugary drinks. Participants can use the Soda Free Summer Challenge tracker tools on the Get Healthy Clark County website:

<http://gethealthyclarkcounty.org/spotlights/soda-free-summer.php>.

In Nevada, 36.3 percent of adults drink at least one soda or fruit drink per day; the national average is 26.3 percent, according to the 2012 Behavioral Risk Factor Surveillance System (BRFSS). Nevadans between the ages of 18 and 34 consume more sugary fruit drinks than their counterparts in all states except Mississippi as well as the highest rates among non-Hispanic and Hispanic adults in the same age range:

- 30.2 percent of black/non-Hispanic adults consumed at least one soda per day; the national average is 20.9 percent
- 32.2 percent of Hispanic adults consumed at least one soda per day; the national average is 22.6 percent

Adults and children can reduce their risk of obesity and obesity-related illnesses, diabetes, tooth decay and even gout by making healthier beverage choices such as water, fat-free or 1 percent milk, seltzer or unsweetened tea or coffee. Cutting out one can of soda per day can reduce caloric intake by about 150 calories and 10 teaspoons of sugar. Healthier drink choices include water, fat-free or 1 percent milk, seltzer or unsweetened tea or coffee.