STATE BOARD OF HEALTH
DRAFT MINUTES
March 11, 2016
9:00 a.m.

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

Division of Public and Behavioral Health
Rawson Neal Training Room
1650 Community College Drive
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)
Monica Ponce, DDS (Las Vegas)
Judith Bittner, (Carson City)

BOARD MEMBERS NOT PRESENT
Joan Anjum, RN

DIVISION OF PUBLIC & BEHAVIORAL HEALTH (DPBH) STAFF PRESENT:
Julia Peek, DPBH, Deputy Administrator Community Services
Chad Westom, DPBH, PAIS
Michael Schmidt, DPBH, RCP
Adrian Howe, DPBH, RCP
Kirsten Coulombe, DPBH, Deputy Administrator Administrative Services
Karen Beckley, DPBH, RCP
Paul Shubert, DPBH, HCQC
Joe Pollock, DPBH Deputy Administrator Regulatory Services
Leon Ravin, M.D., DPBH, SNAMHS
Minou Nelson, DPBH, HCQC

OTHERS PRESENT:
Linda Anderson, Sr. Deputy Attorney General, Attorney General's Office (AG)
Barry Lovgren, Self
Stephen Sweet, Saint Mary's Hospital
Diane Bowers, Saint Mary's Hospital
Brian Reeder, Ferrari Public Affairs
Nicki Aaker, Carson City HHS
Dr. Joseph Iser, Chief Health Officer, Southern Nevada Health District
Kevin Dick, District Health Officer, Washoe County Health
Darris Peterson, Evia
Ed Vance, Evia
Jonathan Boyin, Las Ventanas
Chris Jones, UMC

Becky Christensen, UMC
Jim Kelly, KDR Physicians Hospital
David Kojoal
John Garcia, HCPMV

Chairman Jones opened the meeting at 9:03 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 11, 2015 meeting.

Chairman Jones asked if there was any public comment.

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

REPORTS (Informational)

Nicki Aaker, MSN, M PH, RN, Director for Carson City Health and Human Services, provided a written and verbal report which is attached hereto as Exhibit "A." Public Health Accreditation – site visit took place February 9-10, 2016. The report will be submitted to our agency and the Public health Accreditation Board (PHAB) and will be used to make the decision as to whether or not we are accredited or receive an action plan. Community Health Assessments – We are partnering with Carson Valley Medical Center (CVMC) in Douglas County and Carson Tahoe Health (CTH) on their Community Health Needs Assessments. Clinical Services – In 2015, 1,893 unduplicated patients were seen in Carson City. Environmental Health – In 2015, the Environmental Health Program received 27 complaints against food establishments. Tobacco Program – We continue to work with Western Nevada College to move toward a smoke-free campus.

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 "B". The current Zika virus outbreak continues to cause concerns as more travel-acquired cases are reported in the U.S. The Health District's Tobacco Control Program staff members have recently expanded the availability of training to a broad range of health-related service providers. In December 2015, the Health District staff trained 20 client specialists with the Las Vegas Urban League prisoner reentry program on the delivery of brief tobacco use interventions and emerging tobacco products. The Health District staff is assisting with SafeTALK trainings in Clark County

Kevin Dick, District Health Officer for Washoe County Health District, gave a verbal report. It was reported that there has been a mild flu season in Washoe County. In January 2016, the District revised its REMSA response format. In February the FY17 budget was reviewed.

Chief Medical Officer – No report

CONSENT AGENDA

CHAIRMAN JONES ENTERTAINED A MOTION ON THE CONSENT AGENDA. A MOTION TO APPROVE WAS MADE BY DR. SHAH. MR. SAEMAN SECONDED THE MOTION WHICH PASSED UNANIMOUSLY.

Item 4. Case #677: Las Ventanas Memory Care Unit So. Nevada: Request for Variance to Nevada Administrative Code (NAC449.218, "Floor space; windows and doors; privacy; storage space; bedding; personal furnishings; lighting. (NRS 449.0302)." (Kyle Devine, Chief, Bureau of Health Care Quality and Compliance, Division of Public and Behavioral Health)

Mr. Devine submitted a written statement regarding this variance which is attached hereto as Exhibit "C."

There was no public comment.

CHAIRMAN HUNT ENTERTAINED A MOTION ON AGENDA ITEM 4. A MOTION TO APPROVE WAS MADE BY DR. SHAH. DR. PENNELL SECONDED THE MOTION WHICH PASSED UNANIMOUSLY.

4. Consideration and adoption of proposed regulation LCB file no. R144-13RP4 amendments to Nevada Administrative Code 457 & 459. The proposed regulations amend and modify existing language to make regulations more clear, current and compatible with the intent and scope of the Radiation Control Program (RCP). Introduction of new language which aids the RCP to carry out its regulatory role more effectively. Present regulations that need to be adopted, as soon as possible, in order to maintain compliance with the requirements of the U.S. Nuclear Regulatory Commission (NRC). Repeals redundant and/or outdated regulations. (Karen Beckley, Radiation Control)

Ms. Beckley gave a verbal overview of the proposed regulation and submitted a written statement which is attached hereto as Exhibit "D." A summary of the changes to NAC:

- Maintain compatibility and compliance with the requirements of the US Nuclear Regulatory commission
- Amends and modifies existing language to make regulations more clear, current and compatible with the intent and scope of the Radiation Control Program
- Introduces new language regarding Radiation Safety Officer Requirements
- Outlines the process of decommissioning facilities safely
- Fees for duplicate mammography technologist certificates
- Broaden regulations fee structure for certain specific licenses to provide for a reduction in fees

CHAIRMAN JONES ENTERTAINED A MOTION ON AGENDA ITEM 4. A MOTION TO APPROVE WAS MADE BY MR. PENNEL. DR. SHAH SECONDED THE MOTION WHICH PASSED UNANIMOUSLY.

PUBLIC COMMENT

Mr. Barry Lovgren commented that for the past several years he has been working to help facilitate access to services for pregnant women affected by substance abuse problems in Nevada. Mr. Lovgren stated that the last Needs Assessment for substance abuse issues was competed in 1998. It is unclear what the current needs are. Now that Public Health has been integrated with Behavioral Health the supervision rests with the Board of Health.

The meeting was adjourned at 10:43 am.

DRAFT

Exhibit "A"

State Board of Health
Carson City Health and Human Services Report
March 11, 2016

Public Health Accreditation

Our site visit took place on February 9 – 10, 2016. The site visitors are in the process of writing the final report. The report will be submitted to our agency and the Public Health Accreditation Board (PHAB) and will be used to make the decision as to whether or not we get accredited or receive an action plan. I would like to thank Julia Peek for representing the Nevada DPBH at the community partner's session.

Community Health Assessments

We are partnering with Carson Valley Medical Center (CVMC) in Douglas County and Carson Tahoe Health (CTH) on their Community Health Needs Assessments. Four different assessments will be completed – 1) Community Themes and Strengths, 2) Local Public Health System Performance, 3) Community Health Status, and 4) Forces of Change. After completion of the assessments, we will be collaborating with partners in Carson City and Douglas County to coordinate data dissemination to all the partners and to the public.

Clinical Services

In 2015, 1,893 unduplicated patients were seen in Carson City of which 1,632 were females and 261 were male. In comparison to 2014, the female patients decreased by 1.3% and the male patients decreased by 5%. The majority of the female and male patients seen were in the 20-24 age group. Of all the patients seen,

71% were below 100% of federal poverty level (FPL)
17% were 101%-150% of FPL
6% were 151-200% of FPL
3% were 201-250% of FPL
3% were over 250% of FPL

27% had Medicaid (a slight increase from 2015)
12% had private insurance (a 115% increase)
61% were uninsured (a 9% decrease)

At the Community Clinic in Douglas County, 870 unduplicated patients were seen of which 784 were females and 86 were male. In comparison to 2014, the female patients increased by 132% and the male patients 138%. The majority of the female and male patients seen were in the 20-24 age group. Of all the patients seen,

71% were below 100% of federal poverty level (FPL)
15% were 101%-150% of FPL
7% were 151-200% of FPL
2% were 201-250% of FPL
2% were over 250% of FPL

29% had Medicaid
13% had private insurance
59% were uninsured

Environmental Health

In 2015 the Environmental Health program received 27 complaints against food establishments. Of those 27 complaints, 12 (44%) were confirmed, 15 (55%) were unconfirmed and two (2) an official notice was issued. The top four complaints were improper food handling; foodborne illness; insects, rodents, animals; and contaminated foods. There was a 35% increase in overall complaints against food establishments compared to 2014. Of the complaints received in 2015, 37% were in the category of insects, rodents, animals vs. only 11% in 2014.

Public Health Preparedness

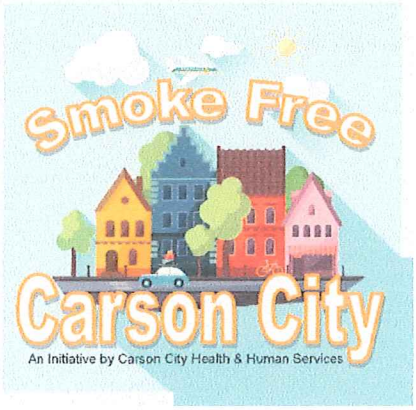
January and February 2016 activities included:

- Submitted grant application for budget period 5 for Public Health Emergency Preparedness and Hospital Preparedness grants (flat funding).
- Collaborating with stakeholders on West Region Medical Surge plan and Healthcare Evacuation Annex.
- Participating with Washoe County and Division of Public and Behavioral Health in development of Regional Isolation and Quarantine Plan and Bench Book.

- Practiced Volunteer Reception Center set-up with Washoe County MRC and State Emergency Registration of Volunteers program.
- Conducted Incident Action Plan training for staff.
- Participating on planning team for 5th Annual Rural Preparedness Summit in Fallon June 21-23, 2016.
- Working with UNR MPH student to develop a Concept of Operations Plan for Infectious Disease (Ebola funding).
- Finalizing Infectious Disease Control Plan for East Fork Fire EMS.
- Participated in Emergency Managers Workshop, local LEPC meetings, Crisis Standards of Care advisory group; Douglas County Coalition and Rural Healthcare Preparedness Partners meetings.

Chronic Disease Prevention and Health Promotion

Tobacco Program – We are continuing to work with Western Nevada College to move toward a smoke-free campus. CCHHS, Washoe County Health Department and the State of Nevada 's Tobacco Program have collaborated in an advertising campaign highlighting the health risks of secondhand smoke in multi-unit housing which aired on major television stations. Carson City has no smoke-free multi-housing units. All units have been contacted and upon initial contact none are interested in becoming a smoke-free facility. We are in the process of determining our next steps. Any ideas or suggestions would be appreciated.



Adolescent Health Education Program (AHEP) – There are two spring break education sessions scheduled at the Carson City Community Center. The Be Proud! Be Responsible! session is scheduled for March 28th – 29th, 8:30 am – Noon, for ages 13-18. The Promoting Health Among Teens session is scheduled for March 28th – 31st for ages 9-12. A marketing plan is being developed. Staff has attended a "Hanging Out or Hooking Up? teen relationship Train-the-Trainer event.

Safe Routes to School Program – March 16, 2016 is Nevada Moves Day. Various events are planned for walking and biking to school.

Human Services

The annual Point in Time Count was completed on January 28, 2016. The event was reorganized with the street count being conducted by Deacon Craig who is very familiar with the homeless camps in Carson City. In conjunction with the count, a resource center took place at the Carson City Community Center with 16 resource organizations. Following are the results of the count:

- Street Count – 46
- Interviews Conducted – 27
- School Count –
  - Doubled Up – 329
  - Motel – 36
  - Sheltered – 17
  - Unsheltered – 3
  - Unaccompanied Youth – 11

The most recent job fair hosted by CCHHS and the Carson City Chamber of Commerce took place on February 26th. Thirty-nine employers and 12 employment/education resources were available for attendees. There were 362 job seekers of which 40 were veterans.

Respectively submitted,

Nicki Aaker, Director
Carson City Health and Human Services

Exhibit "B"

DATE: March 11, 2016

TO: State Board of Health Members

FROM: Joseph Iser, MD, DrPH, MSc, Chief Health Officer

SUBJECT: Chief Health Officer Report

Syphilis Outbreak

The Health District has identified a 128 percent increase in reported syphilis cases in Clark County since 2012 and is officially considering the increase to be an outbreak for early syphilis cases. Early syphilis is an infection that has been acquired within the previous 12 months. Men account for 615 of the 694 cases that were diagnosed in 2015. The Health District is urging health care providers, especially those who treat young men, to immediately report a diagnosis to the Health District and begin prompt treatment for patients and their partners.

According to the Centers for Disease Control and Prevention (CDC), there were 5,979 cases of primary and secondary syphilis in the United States and men accounted for 59 percent of cases reported in 2000. In 2014, there were 19,999 cases with men accounting for 91 percent and men who have sex with men were 83 percent of men impacted. Syphilis can also increase the risks of HIV transmission. Racial and ethnic disparities continue across the country with regard to syphilis and other sexually transmitted infections. In 2014, primary and secondary syphilis rates among African-Americans were 5.4 times higher than the rate for whites. Congenital syphilis rates also increase when rates of disease increase among women.

In Nevada, rates of primary and secondary syphilis were the highest in the West with a rate of 12.8 cases per 100,000; in comparison, Wyoming had a rate of 0.7 cases per 100,000.

Zika Virus

The current Zika virus outbreak continues to cause concern as more travel-acquired cases of Zika virus disease are reported in the United States and amid reports of sharp increases in pregnant women giving birth to babies with birth defects and poor pregnancy outcomes, a link not associated with previous outbreaks. The CDC is recommending special precautions for pregnant women, women who are trying to become pregnant, and their partners.

The virus is generally spread to people through mosquito bites. To date, the species known to transmit the virus, *Aedes aegypti* and *Aedes albopictus,* have not been detected in Clark County. The Southern Nevada Health District's vector surveillance program has updated its methods in recent years to include traps specifically designed for capturing the *Aedes* species, as these mosquitoes are also capable of vectoring chikungunya and Dengue Fever, diseases that are emerging in the United States.

There is also evidence that the virus can be spread by sexual transmission from a man to his partners. In known cases of likely sexual transmission, the men had Zika symptoms. But the virus can be spread before, during, and after men have symptoms.

Zika virus disease usually presents as a mild illness with symptoms that last several days to a week. The most common symptoms of the disease are fever, rash, joint pain, and conjunctivitis. The illness rarely requires hospitalization or results in death. The Centers for Disease Control and Prevention has issued travel notices for regions and countries where Zika virus transmission is ongoing. Local vector-borne transmission of Zika has not been reported in the United States, but cases of Zika have been reported in returning travelers. The Health District has sent samples of potential travel-associated cases to the CDC for testing, with no positive results received to date.

Tobacco Control Activities

The Southern Nevada Health District's Brief Tobacco Use Intervention is an evidence based process used by health care providers to identify current smokers and refer them to cessation resources. The Health District's Tobacco Control Program staff members have recently expanded the availability of this training to a broad range of health-related service providers. In December 2015, Health District staff trained 20 client specialists with the Las Vegas Urban League prisoner reentry program on the delivery of brief tobacco use interventions and emerging tobacco products. Additionally, staff distributed 2,000 educational materials promoting the Tobacco Quitline.

Also in the month of the December, staff provided training to 40 Clark County Healthy Start personnel as part of a national Truth Initiative project. Truth staff provided a major component of the training and Health District Tobacco Control Program staff provided a presentation on local resources, brief tobacco use interventions, the Tobacco Quitline, and emerging tobacco products.

Tobacco Control Program staff is also working with the Nevada Division of Welfare and northern Nevada partners to coordinate a program that will include training Welfare Division staff on delivering Brief Tobacco Use Interventions. In addition, media spots will be developed to air in Welfare Division offices.

Injury Prevention Program

Health District staff is assisting with SafeTALK trainings in Clark County. SafeTALK is a suicide alertness training that is available to everyone. Trainings are conducted throughout the state three to five times per month and Health District staff assists with training in Clark County. SafeTALK educates participants to recognize the warning signs indicating the risk of suicide and how to connect people with resources and aid. The Clark County School District is sending several staff members to the training in order to conduct its own trainings of its staff in the future. Additionally, there are plans to train more than 500 supervisors with the Las Vegas Metropolitan Police Department in the SafeTALK program by April 2016.

UNLV Coaches Challenge

The Health District wrapped up its annual UNLV Coaches Challenge in December. The program encourages elementary school students in grades 1-5 to engage in daily physical activity and to eat fruits and vegetables. The 2015 program had 11,490 students signed up from 352 different elementary school classrooms representing 78 different elementary schools. Participating students tracked their fruit and vegetable consumption and their physical activity to earn points for their classrooms. The winning classrooms were selected in December, and each received tickets to either a UNLV men's or women's basketball game. In addition, UNLV Head Coaches will visit all the winning classrooms in the spring of 2016.

Exhibit "C"

Mr. Chairman and members of the Board, for the record my name is Paul Shubert, Health Facilities Inspection Manager for the Bureau of Health Care Quality and Compliance. I am presenting case number 677.

This request is from Las Ventanas Retirement Community a Residential Facilities for Groups. Variance #677 is an application to vary Nevada Administrative Code (NAC) 449.218(3). The regulation states, "The combined size of the panes of glass of the windows in a bedroom in a facility that was issued a license on or after January 14, 1997, must equal not less than 10 percent of the floor space in the room.

Las Ventanas Retirement Community is a 60 bed residential facility for groups which provides assisted living services for elderly or disabled persons. The facility recently completed construction to add an additional 16 residential beds for persons with Alzheimer's disease.

Exhibit "C"

The facility is requesting a variance to the requirement for window sizes. The proposal is to maintain the current window sizes in the new construction although they do not meet the requirement of 10% of the floor space in the room.

The facility has provided evidence of hardship for strict compliance with the regulation. The facility's contractor has provided a cost estimate of $50,852 to install new windows which meet the requirement as described in the regulation.

Granting this variance would not impair the purpose of the regulation or cause a substantial detriment to public health. The intent of the regulation is to provide sufficient window size to provide ambient light in the room as a quality of life measure. The widows while undersized, do provide adequate ambient light.

A variance with similar circumstances was granted to Sterling Ridge in September 2015.

Staff recommends the Board of Health approve Case #677: Las Ventanas Retirement Community, request for variance to NAC 449.218(3) regarding floor space to window size percentages.

If members of the Board have any questions for the facility regarding this variance, a representative is available.

Unless there are questions, this concludes my presentation.

Exhibit "D"

BOH TESTIMONY
March 11, 2016
Proposed NAC 457 & 459 Revisions

Good Morning, Mr. Chairman and Members of the Board.

For the record, my name is Karen Beckley, Manager of the Radiation Control Program. With me today, is Mr. Michael Schmidt, Radiation Control Specialist, lead for the program in the development of regulations.

The proposed regulations to Nevada Administrative Code 457 relating to Cancer & 459 relating to Hazardous Materials, repeal redundant and/or outdated regulations. Amend and modify existing language to make regulations more clear, current and compatible with the intent and scope of the Radiation Control Program, which is to protect and enhance the health and safety of the public.

Here is a summary of the changes to NAC:

- Maintains compatibility and compliance with the requirements of the U.S Nuclear Regulatory Commission.
- Amends and modifies existing language to make regulations more clear, current and compatible with the intent and scope of the Radiation Control Program.
- Introduces new language regarding Enforcement.
- Introduces new language regarding Radiation Safety Officer Requirements.
- Outlines the process of decommissioning facilities safely.
- Fees for duplicate mammography technologist certificates.
- Broaden regulation fee structure for certain specific licenses to provide for a reduction in fees.

The Division of Public and Behavioral Health has held several opportunities for the public, regulated community, licensees, registrants and stakeholders to provide input and comments regarding the proposed regulations, including the economic impact the proposed regulations may have on small business and the public. A Small Business Impact Questionnaire was mailed to all Radiation Control Program licensees and registrants in October, 2015, 307 responses were received out of 2,946 Small Business Impact Questionnaires distributed. Negative comments revealed there was a perceived increase in Radiation Producing Machine (RPM) registration fees. The proposed regulations do not increase RPM registration fees, as it was determined by analysis of the comments that respondents miss-read proposed regulations. Respondents were contacted to correct the perceived impact. Negative comments also revealed a perception of new regulation requiring a Radiation Safety Officer for RPM registrants. Comments revealed respondents miss-read proposed regulation which clarifies training and education of Radiation Safety Officers for specific licenses not RPM registrants. Respondents were contacted to correct the perceived impact.

A Public Workshop was conducted Tuesday, January 12, 2016, via videoconference, in Carson City at Division of Public and Behavioral Health, Carson City, and in Las Vegas at the Division of Health Care Financing and Policy. Approximately, 40 members of the regulated community participated in the public workshop. Eight attendees provided testimony opposing the new language regarding Enforcement in section 11 part 3 of the proposed regulation.

Summation of comments were as follows taken from the Public Workshop minutes:

1. Section 11 part 3 is potentially harmful to business because of the $2000.00/day fine for violations.

2. Adopting enforcement regulations from Mammography and applying to Nuclear Medicine may be vague and inconsistent in regards to the inspection and enforcement process.
3. Suggested language to section 11 part 3, if the violation is corrected within 30 days or immediately if the violation is repeated no fine.

The Radiation Control Program did publish a proposed amendment to Section 11 of the proposed regulations addressing the concerns of the public workshop attendees. An informational bulletin was released January 29, 2016, through the RCP Listserv containing the proposed amendment to Section 11. Summations of public comment, from 6 respondents, were supportive of the amendment to Section 11. There was no opposing comment, to the amendment of Section 11. An errata sheet is attached with the staff memo explaining the amendment to the section.

Other public comments at the Public Workshop had already been addressed in the current proposed regulations.

Thank you for your continued support of the Radiation Control Program. This concludes my remarks, pending any questions that you may have at this time.