

**THE ADVISORY COUNCIL ON THE STATE PROGRAM FOR WELLNESS AND THE
PREVENTION OF CHRONIC DISEASE
MINUTES
APRIL 20, 2017
1:15 p.m.**

The Advisory Council on the State Program for Wellness and the Prevention of Chronic Disease held a public meeting on 4/20/2017, beginning at 1:15 p.m., at the following locations:

Division of Public and Behavioral Health
4126 Technology Way
2nd Floor Conference Room
Carson City, NV 89706

Bureau of Health Care Quality & Compliance
4220 S. Maryland Parkway
Building D, Suite 810
Las Vegas, NV 89119

Division of Health Care Financing & Policy
1010 Ruby Vista Drive
Suite 102
Elko, NV 89801

Division of Health and Human Services
Aging and Disability Services Division
2667 Enterprise Road
Reno, NV 89513

BOARD MEMBERS PRESENT

Tom McCoy, JD, Chair
Stacy Briscoe, RD
Andre' DeLeón
Christina Demopoulos, DDS, MPH
Jacquie Ewing-Taylor, PhD
Karissa Loper, MPH (Proxy for John DiMuro)
Angela Rodriguez, MBA PHR, SCHRMC
Erin Russell, PhD
Ben Schmauss, MPH
Deborah Williams, MPA, MPH, CHES

BOARD MEMBERS NOT PRESENT

Aubree Carlson
Cassandra Cotton, MA
Jeff Muehleisen
John DiMuro, DO, MBA
Senator Joe Hardy, MD
Assembly Woman Amber Joiner, MA
Rebecca Scherr, MD

DIVISION OF PUBLIC AND BEHAVIORAL HEALTH STAFF PRESENT

Shannon Bennett, Section Manager, Immunization Program, Bureau of Child, Family and Community Wellness (BCFCW), Division of Public and Behavioral Health (DPBH)
Jenni Bonk, MS, Section Manager, Chronic Disease Prevention and Health Promotion (CDPHP), BCFCW, DPBH
Masako Berger, Health Systems Manager, CDPHP, BCFCW, DPBH
Jeanne Broughton, Administrative Assistant III, CDPHP, BCFCW, DPBH
Maribel Cuervo, Connecting Kids to Coverage Coordinator, CDPHP, BCFCW, DPBH
Deborah Duchesne, Health Program Specialist I, Maternal Child Health Program, DPBH
Margie Franzen-Weiss, Diabetes Control and Prevention Coordinator, CDPHP, BCFCW, DPBH
Reena Gupta, CDC Public Health Associate Program Assignee, CDPHP, BCFCW, DPBH
Debbie Kawcak, Tobacco Cessation Coordinator, CDPHP, BCFCW, DPBH

Jennifer Krupp, Heart and Stroke Coordinator, CDPHP, BCFCW, DPBH
Mojde Mirarefin, Chronic Disease Evaluator, CDPHP, BCFCW, DPBH
David Olsen, Policy, Systems and Environmental Change Manager, CDPHP, BCFCW, DPBH
Rosemary Orantes, Administrative Assistant II, Oral Health, BCFCW, DPBH
Shawna Pasqual, Program Officer I for Women's Health Connection (WHC) Provider
Education and Training, CDPHP, BCFCW, DPBH
Kristi Robusto, PhD, Obesity Control and Prevention Coordinator, CDPHP, BCFCW, DPBH
Amanda Santos, Community Health Worker (CHW) Program Coordinator, CDPHP, BCFCW,
DPBH
Rose Sutherland, School Health Program Coordinator, CDPHP, BCFCW, DPBH
Laura Urban, Food Security and Wellness Manager, CDPHP, BCFCW, DPBH

OTHERS PRESENT

Chris Needham, Director of Health and Wellness for Hometown Health and Renown
Erin Dixon, Washoe County Health District (WCHD)
Bobbi Shanks, Elko County School District and Elko County Health Board
Margo Teague, Elko County Health Board

1. Roll Call

Chairman Tom McCoy

Roll call was taken and it was determined a quorum of the Advisory Council on the State Program for Wellness and the Prevention of Chronic Disease (CWCD) was present, per NRS 439.518 § 2.

2. Vote on minutes from the January 19, 2017 meeting

Mr. McCoy asked if there were any corrections to the minutes from the January 19, 2017 meeting. Deborah Williams requested two corrections.

MR. MCCOY ENTERTAINED A MOTION TO APPROVE THE MINUTES WITH THE CORRECTIONS. A MOTION TO APPROVE WAS MADE BY MS. WILLIAMS. MS. BRISCOE SECONDED THE MOTION WHICH PASSED UNANIMOUSLY WITHOUT PUBLIC COMMENT

3. Review of Committee Openings, Reappointments, and Appointment of Non-voting Member

Mr. McCoy asked Ms. Bonk to give a recap of the term expirations.

Ms. Bonk: There are six members who are either past the expiration of their term, or approaching the end of their term. The bylaws allow for three consecutive two-year terms. The following member's terms have expired or will soon. Rebecca Scherr's term expires in June 2017, and she is eligible for one more term. Jeff Muelheisen's term expires in May 2017, and he is eligible for one more term. Dr. Demopoulos's term expired in January 2016, and she is eligible for reappointment to a second term. Mr. McCoy's second term expired in January 2016, and he is eligible for one more term; however, the bylaws allow for the chair to have

more than three terms. The second term for Ms. Cotton and Ms. Rodriguez expired in January 2016, and each is eligible for one more term.

The bylaws allow for a non-voting member to be added to the Advisory Council. Due to his impression on the Council at the last meeting, Mr. Chris Needham has been invited to this meeting to determine if he can be added as a non-voting member.

Mr. McCoy: We have discussed non-voting members in the past and have seen some outstanding candidates. Some of these people have made a wonderful addition to the board. This is especially true when we can add some people, such as Mr. Needham, who have special expertise in a particular area of chronic disease. I personally think he would be an excellent addition to this Council. I believe we can do this, but would ask Ms. Bonk to look at the bylaws for clarification.

Ms. Bonk: Article 4.3 of the bylaws states:

“A majority of the voting members may (a) appoint committees or subcommittees to study issues relating to wellness and the prevention of chronic disease, (b) remove a non-legislative member for failing to carry out the business of, or serve the best interests of, the Council, and (c) appoint nonvoting members to the Advisory Council.”

Mr. McCoy: According to the bylaw Ms. Bonk just read, I believe we have the ability to appoint Mr. Needham.

Dr. Russell: We just heard a list of people that may or may not want to continue with membership to this board. Could there be a place for Mr. Needham in one of those positions?

Ms. Bonk: Everyone on the list is eligible for reappointment. Each person has a specific role they play on the Council. I would suggest we move forward with the appointment of Mr. Needham as a non-voting member for now. Once we determine if there is a vacancy in a specific area he can fill, then the Council can address it at the next (or a future) meeting.

MR. MCCOY ENTERTAINED A MOTION TO APPOINT MR. CHRIS NEEDHAM TO THE ADVISORY COUNCIL AS A NON-VOTING MEMBER. THE MOTION TO APPOINT MR. NEEDHAM WAS MADE BY MR. SCHMAUSS. MR. DELEON SECONDED THE MOTION WHICH PASSED UNANIMOUSLY WITHOUT PUBLIC COMMENT.

Mr. McCoy: Welcome aboard Chris. We appreciate your presence and look forward to working with you.

Mr. McCoy: Ms. Bonk, would you go through the list of members who are up for reappointment again?

Ms. Bonk: Here is a second review of who is eligible for reappointment. Each person has an assigned role on the Council that is listed in the bylaws. Some of those listed are present

today and some are not. Those present are Dr. Demopoulos, Mr. McCoy, and Ms. Rodriguez. Those who are not here are Ms. Cotton, Ms. Scherr, and Mr. Muelheisen.

Mr. McCoy: The indication is those who want to stay on the Council need to submit an application for renewal, which must be approved by the Director. These members need to be sent an email to follow up with an application for renewal; or, they need to indicate they are stepping down from the Council.

Ms. Williams: I believe it was a form that needed to be completed and sent back.

Ms. Bonk: We will send that [form] to all members up for renewal before the next meeting to determine who is still interested.

Mr. Schmauss: Before the next meeting when we vote, I would like to see an attendance record for the Council members. One of the things we have been trying to do is strengthen our voice and have the ability to “move the needle”. We have some great people on the Council, but some people have not been able to attend the meetings, even by calling in. It is very important that new and existing members attend meetings. We only have four meetings a year. If the attendance record could be provided at the next meeting, it would be nice. We want to work together to provide good feedback and recommendations that are needed to take the limited resources we have and do good work. Is that something you would be open to addressing?

Mr. McCoy: Yes. I have been talking about this for quite a while. This body can look at someone whose attendance has been either zero or inconsistent and remove that person from the Council. I do not think it has ever been done, but we do have that authority. I would prefer we send out the notices and try to retain the previous level of interest. Staff can look at the attendance [of current members] and provide that information to the Council at the next meeting. If some people who are not attending still want to continue [serving] on the Council, then attendance is a valid area of consideration.

Mr. Schmauss: We are allowed to send proxies and at a minimum should have a standard to send a proxy to improve our standing a little bit. I am not trying to make it so we are removing members. I just want us to produce good work that can really help the state.

Ms. Bonk: We can put together a spreadsheet of attendance for the last few years before the next meeting. As a reminder, a list of those who attended is at the top of the minutes for each meeting.

Mr. DeLeón: It is my understanding that not everyone may have a proxy privilege. I believe it is only two or three people.

Ms. Bonk: You could be correct. I do not know if that is allowed. I know it is allowed for Dr. DiMuro, but I will have to look further at the bylaws.

Mr. McCoy: As I recall, appointed positions may have proxies.

Ms. Bonk: We will send out copies of bylaws to all members of the Council.

Mr. Deleon: Article 5.4 of the bylaws states:

“Should the State Health Officer or the Superintendent of Public Instruction be unable to attend a meeting he/she may designate a proxy.”

I believe the purpose is for voting. Basically, it would turn a voting member into a non-voting member for a meeting.

Mr. McCoy: If someone wanted to propose a change to the bylaws, I do not think the statute is against that idea. Thank you for the discussion. Ms. Bonk will be sending out letters to individuals who are up for renewal, and we will know which positions are vacant at the next meeting.

Ms. Demopoulos: Ms. Bonk, would you please check to see if the renewing members need to submit a curriculum vitae (CV) with the application? We had a change within the Oral Health Advisory Board and each renewing member needs to submit a CV.

Ms. Bonk: I believe we have done that in the past, but I will check and get clarification on the correct documentation.

4. Present Chronic Disease Prevention and Health Promotion (CDPHP) Section Updates and Program Reports

Jenni Bonk, CDPHP Section Manager, provided updates.

Staff Updates

We are excited to announce the recent promotion of Mr. David Olsen to our Policy & Systems Manager position. David has worked as an evaluator and coordinator for our Tobacco Program in the past. He will now supervise the Tobacco Program, the Cessation Program and the Comprehensive Cancer Control Program.

Mr. Tom Weber, who previously worked as the Connecting Kids to Coverage Grant Coordinator, has transitioned to the Women’s Health Connection (WHC) Evaluator position and is now an official state employee.

Jennifer Krupp joined the team as the Heart Disease and Stroke Prevention Coordinator. She has worked in numerous health-related areas in the past, including Nevada Medicaid.

We are continuing to recruit for remaining vacancies: a Health Resource Analyst 3, a Management Analyst 2, a Business Process Analyst 1, a Tobacco Coordinator, and a contracted Tobacco Youth Prevention Coordinator, although this position may be on hold until funding is better established.

Program Updates

Women's Health Connection and Colorectal Cancer Control

Women's Health Connection (WHC) completed and submitted the National Center for Chronic Disease Prevention and Health Promotion, Cancer Prevention and Control Programs for State, Territorial and Tribal Organizations Grant to begin June 30, 2017.

The national WHC Program is celebrating its 20th anniversary. Since its implementation, WHC has provided breast and cervical cancer screening services to over 57,536 Nevada women.

WHC has performed over 2,700 breast and cervical cancer screenings for women since June 30, 2016 and anticipates screening 5,587 women in FY17 [June 30, 2016-June 29, 2017]. WHC is working energetically to close out the current five-year grant which ends June 29, 2017.

WHC has added two Community Health Workers (CHW), for a total of four, within Nevada Health Center clinics. Two CHWs are in Las Vegas; one is in Carson City; and one is in Elko.

Nevada Colorectal Cancer Control Programs

As I just mentioned, the Colorectal Cancer Control Program (CRCCP) will be conducting further interviews for the Business Process Analyst 1 position.

CRCCP submitted the continuation grant application for year three of the five-year CDC grant.

Nevada Comprehensive Cancer Control Program (NCCCP)

NCCCP recently finished a partnership survey in collaboration with the Nevada Cancer Coalition (NCC). The associated report with a summary of the results will be released in April 2017.

In March, the NCCCP and NCC finished a series of Cancer Survivorship Focus Groups conducted in Reno, Las Vegas, Carson City, and Elko. Analysis of collected data is being conducted with a report on results expected in June 2017.

Community Health Worker Program

The CHW Program was awarded an Association of State and Territorial Health Officer (ASTHO) Technical Assistance Grant to host a series of tailored webinars and conference calls from national leading experts to address goals of certification, reimbursement mechanisms, and sustainability of the CHW Association and CHW workforce in Nevada.

The CHW Program trained an additional 45 students through the state hybrid training last month.

Connecting Kids to Coverage Project

Maribel Cuervo is the new Connecting Kids to Coverage Coordinator. Based on the latest Quarterly Reports submitted by the sub-grantees, as a result of program activities, a total of 37 children applied to Nevada Check Up; of those, 31 were newly enrolled and six were re-

enrolled. As for parents, 36 adults applied to Nevada Medicaid; of those, 32 newly-enrolled and four re-enrolled.

Diabetes Prevention and Control Program

The Diabetes Prevention and Control Program had a very successful partner meeting on March 30th in Las Vegas as part of the ASTHO Demonstration Project: *Strengthening State Systems to Improve Diabetes Management and Outcomes*. The goal of this grant is to have stakeholders meet and devise a diabetes state plan. The final plan will be completed and distributed by the end of July 2017, when this project ends.

Heart Disease & Stroke Prevention Program

The Heart Disease and Stroke Prevention Program continues to work with various community partners to reduce the burden of cardiovascular disease in Nevada. The new coordinator, Jennifer Krupp, has been meeting with various community partners and some of you may have met with her already. The annual meeting scheduled for May 2017 has been postponed until September, when stakeholders will meet to update and revise the Heart Disease and Stroke Strategic Plan for the State of Nevada.

The Blood Pressure Self-Monitoring Program continues to be successful and the program has been expanded to First Person Care Clinic, a federally qualified health center (FQHC) in Southern Nevada.

Food Security

The Office of Food Security (OFS) hosted the latest Governor's Council on Food Security meeting on March 15, 2017. The OFS was awarded funds to conduct a gap-analysis of current senior nutrition programs and the overall food systems supporting senior nutrition efforts. The study will assess funding and strategies needed to ensure senior nutrition program sustainability.

Obesity Prevention Program

The Obesity Prevention and Control Program has been actively tracking and working on DPBH documents related to legislative bills regarding obesity which could impact the program if passed.

In collaboration with the Early Childhood Obesity Prevention Workgroup, led by Children's Advocacy Alliance, a nearly finalized five-year early childhood obesity prevention state plan has been developed and steps toward implementation of certain activities have been identified.

The Nutrition Standards Policy for Business Enterprises of Nevada, often referred to as the DETR-BEN nutrition policy, passed in February 2017.

School Health Program

The Comprehensive School Physical Activity Program (CSPAP) professional development is being offered to all 17 school districts. Training has taken place in six school districts and 11 more trainings are scheduled to take place between April and June 29, 2017.

School wellness nutrition education trainings have been offered in Washoe, Elko, Carson City, and Clark Counties.

A Parent Guide to Student Wellness was distributed to the Washoe County School District (WCSD). This was a collaborative effort between DPBH, WCHD, and the WCSD Wellness Coordinator.

Tobacco Prevention and Control Program (TPCP)

On January 9th, the CDC began its TIPS from Former Smokers Campaign which will run through July 30th, 2017. This campaign is media-based, focused on tips from former smokers educating current smokers on the personal, life-threatening effects of smoking.

TPCP held a collaborative meeting with all partners that receive grant funding. This meeting included presentations and discussions on key topics including the 2016 Adult Tobacco Survey, the Master Settlement Agreement, and Tobacco 21.

In February, TPCP was awarded a new grant through the Substance Abuse Block Grant that will focus on youth prevention and creating tobacco merchant training.

Also in February, the Quitline made enhancements to receive electronic referrals through Nevada's Health Information Exchange.

On March 3rd, TPCP submitted the Quit Line Capacity Grant Application to receive continued federal funding to support the state's Quitline.

On March 7th, TPCP announced a Request for Applications seeking program or agency proposals for tobacco control activities to be funded from the Fund for a Healthy Nevada.

There are currently two vacancies for which the Section is recruiting in this Unit: The Tobacco Prevention Control Program Coordinator and the new contract position of Youth Prevention Coordinator associated with the Substance Abuse Block Grant.

Mr. McCoy: Something that is obvious throughout this report is the ongoing and continued development of CHW workers. Was there some level of grant funding for the CHW program?

Ms. Bonk: We use our PHHS block grant money to support the CHW program.

Mr. McCoy: What is the level of sustainability for this program? I know the goal is to get some kind of licensure for them.

Ms. Bonk: There is a meeting coming up to discuss legislation that occurred two years ago to establish pools of Community Health Workers. The meeting is on May 23rd. We are always working toward gaining reimbursement through Medicaid for our CHWs; it is a constant focus for the Section.

Mr. Schmauss: Does SB165 define obesity as a chronic condition?

Ms. Bonk: Yes. It identifies height and weight measurements in seventh and tenth grade in counties with populations of greater than 100,000.

Mr. Schmauss: When we were discussing this at the Legislature, the State Health Officer (SHO) was not present. It would help having the SHO [Dr. DiMuro] present or have someone from the program come and educate the Legislature. Of course, the voice of the SHO would be most valuable.

Ms. Loper: I will take the concern to Dr. DiMuro and let him know his testimony on SB165 has been requested.

Mr. Schmauss: Connecting Kids to Coverage seems pretty new. It just came out in January. Do we have any baseline? Thirty-seven children applied - is that a good number, or do you know?

Ms. Bonk: This is a brand-new grant, so there is no baseline. It is a pilot program which will expire in June 2018. Nevada was fortunate to be selected for project funding. We are using CHWs for this project and for that being the first report, the results were positive.

Mr. Schmauss: I just had a great tour of a clinic thanks to Ms. Russell. They serve a very large community. I would like to hear more about how the CHWs are working with groups like Optum and the community. It would be helpful to know how the partners and CHWs overlap.

Ms. Bonk: I will be happy to make that an agenda item and present on that topic at the next meeting.

Mr. DeLeón: This is a great program. It is unfortunate it was not able to tag on to the state program. This would be a great continuum of health for a large part of our population. It is wonderful this was able to get off the ground. Maybe this will give momentum to bringing that program back.

Ms. Bonk: I completely agree. Some of these pilot projects get support in the hope that some of them will 'take' and funding will be made available for sustainability, if it is successful.

Ms. Russell: There is so much great data in your report. It looks like there is going to be some Comprehensive Cancer data released in June. Is that something you can you bring back to the board?

Ms. Bonk: If you would like to request that topic as an agenda item at the next meeting, I will be happy to accommodate it.

Ms. Russell: Yes. I would like to request data on Comprehensive Cancer as an agenda item at the next meeting.

Mr. Schmauss: I would ask people to be mindful of time and offer a short presentation with time allowed for questions and answers at the end.

Ms. Bonk: I will be sure to relay that information to the presenters.

5. Present Local Health Authority (LHA) Chronic Disease Prevention and Health Promotion Updates and Program Reports

Southern Nevada Health District (SNHD)

Ms. Deb Williams, Chronic Disease Director, SNHD, provided updates.

We are currently funded through the Preventive Health and Health Services (PHHS) Block grant. SNHD is in the process of seeking accreditation and all documentation must be submitted by February 2018. One of the first steps is completing a Community Health Assessment and developing a Community Health Improvement Plan. Working with our community partners, we have selected three priorities. One of these is chronic disease prevention, so we do have a big piece of our community health improvement plan focused on chronic diseases. The plan and the chronic disease progress report can be found on our website, HealthySouthernNevada.org. The site offers a lot of data specific to Clark County. If you are interested in our accreditation process, you can find everything on that website.

One of the other programs in the chronic disease section at SNHD is the Injury Prevention Program. On April 3rd, we launched the annual Drowning Prevention campaign. Around 1999, Clark County had the highest drowning among children under four years of age in the country. When we recognized that, we started an annual safety campaign and now we are below the national average for that measure.

We have partnered with the PACT (Prevention, Advocacy, Choices, Teamwork) Coalition to convene the Southern Nevada Opioid Task Force Advisory Council. We are trying to foster a systems approach to opioid prevention and deal with a continuum of opioid intervention, from prescription drug misuse to intravenous drug use. We are trying to make sure we are all working together.

SNHD Program Updates

The 10th Anniversary of the Nevada Clean Indoor Air Act was last December. Dr. Iser, Southern Nevada's Chief Health Officer, participated in the event at the Governor's mansion in Carson City.

Tobacco Control staff continues to update and maintain the smoke-free housing directory. Staff continue to focus most efforts on youth prevention activities. More than 200 youths have been trained to help plan and implement tobacco control advocacy projects.

One of the biggest accomplishments of the SNHD Chronic Disease Prevention Program and one of the key objectives in our Partnerships to Improve our Community Health (PICH) Grant was the development and incorporation of a nutrition standards policy in the Nevada Department of Employment, Training and Rehabilitation (DETR), Business Enterprise Nevada (BEN) program. We began by working with DETR-BEN when we opened our new building. There was a concessions area we wanted to keep intact. Because we are local government, the Randolph-Shepard Act applied. DETR-BEN had the right of first refusal to operate the vending concession area. We started working with them to try to foster compliance with our SNHD policy. They decided that instead of working with us only on our own site, they would rather have a DETR-BEN policy which would apply statewide. The good news is it is nearing final approval and the policy will apply to more than 900 vending machines and 31 concession sites throughout the state. SNHD staff and DETR-BEN have worked closely with many jurisdictions, counties, and state agencies that will subsequently be positively impacted by the policy. While the PICH Grant is designed to address issues in Clark County, the fact that it grew into a statewide impact was good for them [DETR-BEN] too.

In February, the SNHD Diabetes and Heart Disease and Stroke programs collaborated on some "Million Hearts" activities. SNHD offered educational programs on-site and worked with local churches to help them engage in these activities, particularly with the Body and Soul program that is largely implemented in the black churches in Clark County.

SNHD continues to support the Care4life Diabetes Self-Management Program by establishing partnerships with 17 clinical and lay providers to refer clients into the program. Although the program has had a slow start, there are now almost 400 people enrolled.

Mr. McCoy: I was recently on a call with the Nevada Tobacco Prevention Coalition and there was some discussion that the Smoke-free Directory had generated some good responses from your media advertising on the radio. Is that something that is going to continue?

Ms. Williams: We hope so. We are going to continue to seek funding and look for new funding streams. Unfortunately, our grant does end in September 2017. The Nevada Cancer Coalition has been a fantastic partner on the directory. We will be looking to them to see how they can help.

Mr. McCoy: For everyone on the call and in this meeting, you work in the healthcare arena, please consider smoke-free venues for future meetings and functions. I encourage all of you to think of the message you send when you use a smoke-free environment.

Ms. Briscoe: When you say, DETR-BEN in regard to government buildings, which building(s) are you talking about?

Ms. Williams: The Randolph-Shepard Act is what authorizes DETR-BEN to operate in government buildings, whether state or local. Those sites must give DETR-BEN the right of first refusal. Randolph-Shepard does not mandate that only DETR-BEN can have concession in a government building, but it states that the blind services network has the first right of refusal.

Washoe County Health District (WCHD) Chronic Disease Prevention Program (CDPP)

Ms. Erin Dixon, Chronic Disease Director, WCHD, presented updates.

WCHD is actively engaged in the [public health] accreditation process.

The Wolf Pack Coaches Challenge pilot program year has ended: Washoe had four winning classrooms. The program promotes physical activity and dietary changes for elementary school students and is a collaborative with University of Nevada, Reno athletic coaches. The winning classrooms ranged in location from Lemon Valley to Incline.

The “We Order Well” (WOW) Program is moving along; it promotes smaller portion sizes and healthier menu items for kids.

WCHD has started a small project conducting analysis in communities with the highest need regarding public parks and open spaces to help identify if the spaces are being underutilized. WCHD is working with the City of Reno and Washoe County Parks Department primarily focusing in the 89502 zip code. We are having great results.

The Tobacco Program media campaign has launched. WCHD collaborated with Carson City Health and Human Services (CCHHS) on this project for television, radio, and Facebook in both English and Spanish. Our focus group asked for a positive message. Cessation messaging has gone out to all Reno City employees. We also did some outreach to the homeless population. About 70% of the homeless use tobacco, so that is a priority [population] for us.

WCHD is working on our Chronic Disease report card and update. This is our report on risk factors in Washoe County and should be out by the end of summer.

WCHD currently receives funding under the PHHS infrastructure. Those activities will end in October 2017 and we have submitted a proposal to shift activities under the objective of physical activity for youth and adults.

Ms. Briscoe: Our clinic is down by the river and we have had to move our Memorial Day Walk/Run because of homeless problems. Do you have any information about this?

Ms. Dixon: We have been working with the police, because we are aware of the adult males hanging out in parks and this is not conducive to others using the area. City of Reno is aware and they are working with Reno Police to adjust the way they handle people sleeping in the parks. We are working with all of them to try to find acceptable solutions.

Mr. DeLeón: I am looking at the last bullet of your [written] report, which is a very valuable piece. I assume you are working to get more data for the state, because looking at the health issues with the homeless and smoking it is important for a program like this to continue.

Ms. Dixon: The data surrounding homelessness and tobacco use is very difficult to obtain, especially with our current survey system. If anyone has a data source we would love to have it.

Mr. DeLeón: Unfortunately, I know all too well how difficult that data is to obtain. Even without the data, this is still a very powerful piece of information, because it gives rise to idea that you pay attention to the problem now, or it gets even bigger later. Please keep up the good work.

Mr. McCoy: Thank you everyone. This is an excellent example of collaboration that can come from within this Council, so there is value in what we do.

Carson City Health and Human Services (CCHHS)

Ms. Nicki Aaker, Director, Carson City Health and Human Services, provided updates. Ms. Aaker was not able to attend the meeting, so Deb Williams (SNHD) presented on her behalf.

The CCHHS Community Health Needs Assessment draft will be presented within the next week then released for public comment. It is anticipated that everything might be finished by the third week of April.

Diabetes education and training to providers continues to be a work in progress.

Under the Tobacco Prevention and Control Program, Western Nevada College continues to implement the smoke-free policy with their Healthy Campus Committee for students, staff, and faculty.

Youth advocacy training was completed with the Carson City Youth Group. Carson City has been actively reaching out to apartment complexes about smoke-free housing. They now have three to four complexes with smoke-free policies. CCHHS has also been active in engaging with law enforcement, fire prevention, code enforcement, and housing development to offer classes for housing managers and landlords about how to make multi-unit housing complexes safer and decrease crime rates and reduce fire incidents. This is not a mandatory training, but it is highly encouraged and has been well-received.

Elko County

Bobbi Shanks, Elko County School Nurse Coordinator, and Margo Teague presented updates.

Ms. Shanks: There is no formally recognized Local Health Department in Elko County, but we do have a Health Board. One of the major issues we have been working on is access to healthcare and the lack of providers in this area, especially for Medicaid and Medicare

patients. There is a lack of resources for mental health providers too. There are new school requirements coming (immunization), so we need to focus on that area. We are discussing the need for infrastructure. Anyone on the [Elko County Health] Board, or helping with the Board is a volunteer. We have very slim resources. It would be nice to have better infrastructure to assist the Board with their work. One source of funding is through the [PHHS] block grant.

Ms. Teague: The Board is in the process of completing focus groups and doing individual interviews to get some local input on where the citizens really want our help. We really want to identify our priorities as a community. We are looking to give the Health Board some direction by September 2017.

6. Present on Immunization Program

Ms. Shannon Bennett, Immunization Section Manager, gave the presentation on Nevada Immunization Rates.

Mr. DeLeón: I see a dip in the 2013 data. Is that because we don't have state-funded programs?

Ms. Bennett: It could be an anomaly or surveying could be off for that year.

Ms. Loper: I know the methodology changed in 2013, which changed the way they [CDC] were measuring the data. Also, you have to take national survey data with a grain of salt, because only about 300 families in Nevada are called each year. If the following year they call families that were not being compliant, then the data looks drastically different. We always look at data run out of Nevada WebIZ to make better comparisons.

Ms. Bennett: Nevada has always struggled with [children getting the] fourth dose of DTaP in the series. Statewide stakeholders have put forth a lot of effort into the reminder/recall phone/ mailing program. The reminder call to the parents really helps. Also, there have not been any vaccine shortages or recalls.

Ms. Briscoe: Are health care workers required to get flu vaccine?

Ms. Bennett: It is up to the hospital.

Ms. Russell: Is Nevada WebIZ just for patients or providers?

Ms. Bennett: There is a patient portal and if a patient's social security number is linked to their record in NV WebIZ, then they can look themselves up. If a person's social security number is not listed, then they can call their doctor and request to be linked to the portal, or call us [NV WebIZ Help Desk].

Ms. Russell: I commend you from the managed care point of view. It looks like you are doing a good job.

Dr. Demopoulos: I want to add to what Ms. Bennett said. We started working with Immunize Nevada a couple of years ago on integrating the human papillomavirus (HPV) message within our health care provider network. This morning I was on a call with the American Academy of Pediatrics (AAP) and they like what we have done in Nevada. We are going to work on a couple of projects on the national level. It was nice to have AAP reach out to me and help advance our work. It was nice that they recognized us and want to continue the model in other states.

Mr. McCoy: I participated in the webinar that you presented on oral cancer and HPV. It was very interesting and quite revealing. I hope many others have the opportunity to obtain the information that you presented.

Dr. Demopoulos: I can send the presentation to Ms. Bonk to include with the minutes. Also, it will be shared nationally by AAP.

Ms. Duchesne: It was mentioned the HPV vaccine is being marketed as cancer prevention, but for adult women it stops at age 26. If it is being marketed as cancer prevention, then why does it stop at that age?

Ms. Loper: The HPV vaccine is only recommended for those up to age 26 years, because studies showed people older than that do not have a great response to the vaccine. This means they did not build up any antibodies to HPV. Additionally, there are hundreds of types of HPV. The current vaccine we have only targets nine of those types which cause 80-90% of related cancers. By the age of 26, people probably already have had some form of HPV, and have cleared it themselves, or are living with the virus. Receiving a vaccine at that point is not going to help. Eleven to twelve-year-olds, in these studies, had the highest/best immune response; meaning they had the highest antibody response when they received the vaccine. HPV vaccination is cancer prevention because children are being vaccinated prior to any sexual contact.

7. Present Subcommittee on Patient-Centered Medical Homes (PCMH) Update

Mr. McCoy: In 2015, SB6 charged that CWCD establish a subcommittee on PCMH. I am the Interim chair of the subcommittee. We had our first meeting in January 2017. There is a bill working its way through the 79th Legislature. It is SB139 which addresses PCMHs from a reimbursement standpoint.

Ms. Bonk, do you have any additional comments about PCMH?

Ms. Bonk: Our next [subcommittee] meeting is scheduled for May 11th. It is a two-part meeting: there is a panel discussion scheduled from 10:30 a.m. to 12 p.m. that will include representatives from organizations such as MCOs, PERS, etc. The representatives will each give a two to three-minute presentation on PCMHs from their perspective. The second part

will be the regular PCMH Subcommittee meeting beginning at 1 p.m. We will be sending out the agenda soon. If you would like more information, please contact me.

8. Preventive Health and Health Services (PHHS) Block Grant Funding Allocations

Karissa Loper, MPH, Deputy Bureau Chief, Bureau of Child, Family and Community Wellness

DPBH will be holding an official public hearing on May 24th to discuss actual changes to the PHHS Block Grant Work Plan for federal fiscal year 2018 [Oct 1, 2017 – Sept 30, 2018]. This hearing is a requirement of the PHHS Block Grant.

After the presentation, Ms. Loper invited questions and public comment.

Ms. Duchesne: I am the Rape Prevention and Education Coordinator. I wanted to provide some clarification for slide number seven. We do provide educational workshops called “Hanging Out and Hooking Up” for healthy relationship information. These are “train the trainer” workshops for professionals and peer educators. The individuals trained in the workshops work with youth between the ages of 12-19 years. We do have people come from urban communities for the training, and we must do at least two rural trainings per year.

In addition to these activities, we completed a three-year campaign last year called, “She’s Not Old Enough.” This campaign addressed statutory rape.

We also have an awareness website that supports healthy relationship and sexual violence education.

Ms. Sutherland: We will report on additional activities that have been accomplished and will add this information into our annual report.

Ms. Loper: For clarification, on the second handout, for every objective where it says “Community Partners,” the dollar amount is the total received for all the objectives they may be working on.

Ms. Williams: Our [SNHD] work plan is specific for diabetes. Although we are working toward accreditation, we are not performing those activities with funding from the PHHS Block Grant.

Ms. Sutherland: We are asking the Council to take a close look to determine if we should be changing and/or adding any activities. Please let us know if you have any suggestions about expansion of activities. We need to make any changes prior to our presentation at the May 24th public hearing.

Ms. Williams: I want to make sure we are looking at the time period of October 1, 2016 through September 30, 2018, correct?

Ms. Sutherland: We want to show success on current activities that we are working on now, and we would like suggestions on expanding activities for 2017-2018.

Ms. Loper: We want to begin planning now for federal fiscal year 2018. If there has been no success or progress on a specific activity, then we strongly encourage you to keep working on them. If the activity has been completed, then a new activity can still be proposed. We need to keep it within these seven health objectives.

Ms. Sutherland: I want to make sure the grant coordinators that wish to put forth work plans and changes need to know we will be presenting on May 24th and must have all input prior to that date.

Ms. Briscoe: As a dietician, I see access to proper foods as a major obstacle for my patients. Many of them use SNAP benefits and there has been some discussion about limiting the types of food a recipient is able to purchase, such as soda and things of that nature. Is this something that is within the scope of what you are doing?

Ms. Bonk: I believe the regulation of SNAP benefits would fall under federal law.

Mr. Needham: We have done some research into this and it is under federal law. The government found it to be too laborious to enforce restricted foods policies. Renown is working on a grant to establish a “food pharmacy” and is working on the idea to “write a prescription” for a certain type of food which a person may need. Lack of proper food/nutrition is a major problem and can be a cause of chronic disease.

9. Legislative Bill Draft Requests (BDRs)

Jenni Bonk, CDPHP Section Manager, gave an update on the legislative BDRs that may affect DPBH in the current legislative session. She listed all the BDRs and the program each might affect. The manager from that program will be following the bill through the legislative process. The following BDRs were listed:

SB 139 – Establishes a PCMH advisory group under the CWCD; a work session was held 3/27; amendments changed language to “authorize” rather than require PCMH reimbursement; any changes in payment methodology by Medicaid would require approval from CMS at the federal level.

SB165 – Defines obesity as a chronic condition and requires height and weight measurements in 4th, 7th, and 10th graders in counties with populations >100k (this just passed out of the Senate); AB 273 is a similar requirement of BMI collection that failed the deadline.

SB189 – Revises the amount and type of training an employee of a child care facility is required to complete (amend, do pass).

AB113 – Requires an employer to make certain accommodations for a nursing mother (amend, do pass).

SB455 – Authorizes tax credits for employers who assist employees in paying for child care (amend, do pass).

SB147 – Authorizes tax credits for employers who assist employees in finding and paying for day care (mentioned, not agenized).

AB266 – Authorizes tax credits for employers who provide paid family medical leave for employees (amend, do pass).

SB410 – Revises provisions relating to reckless driving (related to Bike and Ped Board work) (notice of exemption).

SB 219 – An ACT relating to radiation; providing for the Division of Public and Behavioral Health of the Department of Health and Human Services and the State Board of Health to regulate tanning equipment and certain other sources of non-ionizing radiation; authorizing the Division to suspend, revoke or amend the license or registration of a person who violates certain provisions; providing a penalty; and providing other matters properly relating thereto (amended, and passed as amended).

S.B. 265 – An ACT relating to prescription drugs; requiring the Department of Health and Human Services to compile a list of prescription drugs essential for treating diabetes in this State; requiring the manufacturer of a prescription drug included on the list to reimburse a purchaser for a portion of the price of the drug in certain circumstances; requiring the manufacturer of a prescription drug included on the list to report certain information to the Department; requiring certain nonprofit organizations to report to the Department information concerning contributions received from drug manufacturers; requiring the Department to place certain information on its Internet website; authorizing the Department to impose an administrative penalty in certain circumstances; requiring a private school and an employer to allow a pupil or employee, as applicable, to keep and self-administer certain drugs; requiring an insurer to reimburse an insured for a portion of any deductible, copay or coinsurance paid for certain drugs; requiring an insurer to provide certain notice to insureds; providing a penalty; and providing other matters properly relating thereto (It has been to committee with no amendments and no votes).

AB388 – Heard by the Ways and Means Committee on 4/10/17. Assemblywoman Teresa Benitez-Thompson sponsored the bill, making an appropriation for the Women’s Health Connection Program (BDR S-915). The title is: An ACT making an appropriation to the Department of Health and Human Services for the cost of the WHC program; and providing

other matter properly relating thereto. The bill is declared exempt. WHC provided the summary sheet to the Ways and Means Committee on 4/10/17, stating the funds could be used to potentially screen 3,636 women.

AB 450 – To include e-cigarettes in the Nevada Clean Indoor Air Act and a few ancillary issues; did not make it out of committee (dead).

AB 269 – To tax e-cigarettes was read on the floor and is now with the Ways & Means Committee.

SB3 – Revises provisions governing the Breakfast After the Bell Program in public schools; Heard 2/21; Notice of Exemption.

10. Public Comment

Mr. McCoy: Is there any public comment?

There was no public comment.

11. Adjournment

MR. MCCOY ENTERTAINED A MOTION TO ADJOURN. A MOTION WAS MADE BY MS. WILLIAMS. MR. DÉLEÓN SECONDED THE MOTION. THE MEETING WAS ADJOURNED AT 3:50 P.M.