

**ADVISORY COUNCIL ON THE STATE PROGRAM FOR WELLNESS AND
THE PREVENTION OF CHRONIC DISEASE**

[DRAFT] MINUTES

APRIL 18, 2019

1:15 p.m.

The Advisory Council on the State Program for Wellness and the Prevention of Chronic Disease held a public meeting on 4/18/2019, beginning at 1:17 p.m., at the following locations:

Division of Public and Behavioral Health
4150 Technology Way, Room 303
Carson City, NV 89706

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

Teleconference Number: (415) 655-0002

Division of Health Care Financing and Policy
1210 Valley View, Suite 104
Las Vegas, NV 89146

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

BOARD MEMBERS PRESENT

Tom McCoy, Chair
Stacy Briscoe
Christina Demopoulos, DDS*
Erin Dixon
Tina Dortch
Karissa Loper (Proxy for Ihsan Azzam)
Ben Schmauss*
Rebecca Scherr, MD
Andrew Snyder
Christine Syverson*
*Present via telephone

BOARD MEMBERS NOT PRESENT

Ihsan Azzam, MD
Janae Ballingham
Chris Needham
Rebecca Scherr, MD

DIVISION OF PUBLIC AND BEHAVIORAL HEALTH STAFF PRESENT

Karissa Loper, MPH, Deputy Bureau Chief, Bureau of Child, Family, and Community Wellness, (CFCW), Division of Public and Behavioral Health (DPBH)
Kristi Robusto, PhD, MS, Section Manager, Chronic Disease Prevention and Health Promotion (CDPHP), CFCW, DPBH
Laura Urban, Food Security and Wellness Manager, Office of Food Security, CDPHP, CFCW, DPBH
Jeanne Broughton, Administrative Assistant III, CDPHP, CFCW, DPBH
Mallory Otto, Administrative Assistant II, CDPHP, CFCW, DPBH
Becky Follmer, Administrative Assistant II, CDPHP, CFCW, DPBH
Chungten Allen Pai, Evaluation and Surveillance Manager, CDPHP, CFCW, DPBH
Zarmish Tariq, Tobacco Prevention Coordinator, CDPHP, CFCW, DPBH
Anastasia Martel, 1815 Program Coordinator, CDPHP, CFCW, DPBH
Lily Helzer, Population Health Services Manager, CDPHP, CFCW, DPBH

OTHERS PRESENT

Maria Azzarelli, Manager, Southern Nevada Health District (SNHD)
Toni Orr, RN, Public Health Nurse, CCHHS
Abigail Wheeler, Elko County

1. Roll Call

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 Nevada Revised Statute (NRS) 439.518 § 2.

2. Approve Minutes from the January 17, 2019 Meeting

Chair McCoy asked if there were any corrections to the minutes from the January 17, 2019 meeting. No corrections were requested.

CHAIR MCCOY ENTERTAINED A MOTION TO APPROVE THE MINUTES WITH NO CORRECTIONS. A MOTION TO APPROVE WAS MADE BY TINA DORTCH, AND ANDREW SNYDER SECONDED THE MOTION WHICH PASSED UNANIMOUSLY WITHOUT PUBLIC COMMENT.

3. Presentation: Child and Adult Care Food Program for Early Care and Education Centers Gap Analysis (CACFP ECEC)

Laura Urban gave the presentation: [CACFP ECEC Gap Analysis](#)

Chair McCoy asked why Washoe County charges more for licensing than other counties.

Erin Dixon replied their Board requested them to conduct cost recovery for the permanent facilities which they did not feel taxpayers should be subsidizing, and research all costs that were going into having a fully trained inspector in the field to visit ECECs with kitchens, which is how the cost was determined. If needed, she can share a full breakdown with members.

Chair McCoy asked how many Washoe County facilities needed to be inspected, and at what specific cost.

Ms. Dixon replied she did not have the number at hand, but could get it for members.

Ms. Dortch asked Ms. Urban if one of the strategic partners on this project was Children's Advocacy Alliance (CAA).

Ms. Urban responded CAA did receive a subaward to help the State conduct the Gap Analysis, and she works with them frequently.

Ms. Dortch asked if there is an intersection between the Steering Committee for this project and the grant CAA received to work on childhood obesity prevention.

Ms. Urban responded CAA worked on Senate Bill 90 being presented this Legislative Session, which seeks to allocate \$50,000 to DPBH to improve nutrition education in ECECs, which is also in alignment with the State's Childhood Obesity Prevention workplan.

Chair McCoy asked what the typical food cost would be [for the ECECs] based on the Gap Analysis?

Ms. Urban replied she did not have that information, but she will contact the Nevada Department of Agriculture to obtain an average cost.

Maria Azzarelli asked how Nevada's participation in CACFP compared to a similarity situated state like New Mexico, where there are urban regions separated by rural areas.

Ms. Urban said she doesn't have that information but will investigate and report back to the Council.

Kristi Robusto stated while working through the 1305 grant, the Centers for Disease Control and Prevention (CDC) informed Nevada this lack of ECEC CACFP participation was a high priority based on the State's income demographics.

Ms. Dortch commented it seems to be a common theme the general population is unaware of the programs the State has available. She asked for others to offer an anecdotal response to her observation.

Stacy Briscoe stated Washoe County runs a summer food service program, and the cooks had little nutritional experience. It would be helpful to have a simple handbook for other staff involved in CACFP, not necessarily the person responsible for the paperwork. Additionally, doing some program publicity would be useful.

Chair McCoy thanked Ms. Urban for the presentation.

4. **Legislative Updates**

Chair McCoy presented the updates for the Senate Bills (SB) and Assembly Bills (AB) which affect CDPHP. [Legislative Updates](#)

Christina Demopoulos stated AB223 is still moving forward. The bill concerns offering a waiver within Medicaid for dental benefits for anyone over 21 years of age who has been diagnosed with diabetes and periodontal disease. Currently, there are no adult dental benefits for Medicaid recipients. There is causation between periodontal disease and cardiovascular diseases.

Ms. Dortch stated she was happy to hear SB254 was moving forward. The Department of Health and Human Services has identified Sickle Cell Anemia as a priority for funding, which may be available in the future. There is a very powerful and vocal group working on a State Action Plan. She encouraged everyone to continue watching this bill.

Chair McCoy asked Ms. Dortch if she knew how many Nevadans are affected by Sickle Cell Disease.

Ms. Dortch replied she did not know the exact number, but it is over 300,000 Nevadans.

Ms. Dixon asked if there was anything the Council could do to assist with bill passage, such as writing a letter.

Chair McCoy responded Council members can provide information and offer support for specific bills but writing a letter would be outside of the Council's authority.

Ms. Loper stated she thought the Council could write a letter of support, but it is more powerful for individuals to offer support for specific bills when they are being heard in committee hearings.

Ben Schmauss stated the Council should try to maximize their effect and would recommend writing a letter.

Ms. Loper stated we would have to confer with the Deputy Attorney General about a letter from the Council, and there was little time remaining to have the Council move forward this late in the Legislative Session.

Ms. Briscoe responded she would also highly support writing a letter. She has met with Governor Sisolak and believes he would be open to hearing the stance of the Council regarding these bills.

Ms. Loper stated she would find out more about writing a letter and let the Council know as soon as possible after today's meeting.

Chair McCoy thanked everyone for the information and support for identified bills.

Ms. Loper obtained the following information, which was shared with the Council members and all concerned on April 19th.

“We reached out to our Deputy Attorney General for clarification regarding the question that arose during yesterday's meeting about whether the Advisory Council could write a formal letter to support certain chronic disease related bills being heard this Session. The feedback we received indicates it is most impactful for members and their organizations to provide their feedback individually to the Committees or Bill Sponsors, rather than as a group, because the charge of this Advisory Council is to advise the Division of Public and Behavioral Health.

Therefore, any recommendations the group makes are made to the Division's Administrator (Please see NRS below). Providing individual feedback on specific legislation will not only expedite your ability to respond to the various bills, but as mentioned during the meeting, it may have greater strength/value at the Legislature as well.

NRS 439.518 Advisory Council: Establishment; purpose; appointment of members.

1. Within the limits of available money, the Division shall establish the Advisory Council on the State Program for Wellness and the Prevention of Chronic Disease to advise and make recommendations to the Division concerning the Program.”

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

Dr. Robusto presented the CDPHP Section Update. ([CDPHP Report](#))

Ms. Dixon stated she knows how overwhelming it is for CDPHP right now with staff changes and asked if there was anything the local health authorities could do to assist.

Dr. Robusto thanked Ms. Dixon for her offer and said she would reach out if support was needed.

Chair McCoy questioned if “moving up” was common with State employees and asked how Nevada compares with other states regarding stability of staff.

Dr. Robusto responded she was not confident saying exactly how Nevada compares with other states in terms of staff turnover or stability, since each state's functions and organizational structures can be very different this research would be difficult to conduct effectively.

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

Southern Nevada Health District (SNHD)

Ms. Azzarelli presented the report. ([SNHD Report](#))

Chair McCoy asked if program staff can compare the effectiveness of e-referral to the Tobacco Quitline versus provider information?

Ms. Azzarelli responded the e-referral process is very new and for many years the focus was on securing the process, but staff believe there is great potential for the e-referral process. The public still needs to be educated about the Quitline. One of the grant deliverables is to advertise the Quitline and another is to promote the provider e-referral process, however, funding is still an issue.

Chair McCoy questioned why the Quitline information isn't reaching providers, citing the referrals should be happening right there as the patient is answering health questions, but the providers do not seem to know about the Quitline.

Mr. Schmauss asked what the best practice is for disseminating information to providers.

Chair McCoy asked if a gap analysis had been completed.

Ms. Loper responded the CDC has done this work but as Ms. Azzarelli mentioned the issue is funding. Nevada does not have enough funding to conduct all the best practices as recommended by CDC: media/marketing, working with providers, funding the Quitline, ensuring enough staff to successfully administer and evaluate all activities, etc.

Mr. Schmauss asked what would enough funding look like?

Dr. Robusto replied CDC best practices recommend states allocate a certain amount of money to be dedicated for tobacco cessation. The most recent best practices document was published in 2014. A new document is expected to be released in late 2019 or early 2020, as the CDC uses current economic trends to determine the recommended amounts based on state-imposed taxes, tax revenue for tobacco, the amount of the state settlement from the Tobacco MSA, and population levels.

Ms. Azzarelli confirmed and added the CDC has a specific calculation of the amount to be spent per person for cessation interventions. All the recommendations can be found online and are very state-specific. Nevada's gap and struggle are due to a lack of enough funding. What SNHD can offer is based on grant funding. Healthcare providers are unaware of public health programming because they are very busy. There is not adequate funding for media campaigns, promotions, or anything of that nature. The states where tobacco cessation is more successful is because of strong and constant media campaigns. In 2010, Nevada was awarded \$15 million from the CDC, of which \$3 million was spent promoting the Quitline. That year there were 22,000 calls from Nevada. When there is proper media coverage, awareness is drastically improved and call volume increases significantly. CDC also recommends an exact amount Nevada should spend on media campaigns; overall, more money should be spent on tobacco control and prevention by the State.

Chair McCoy stated we would have greater freedom if there was State General Fund committed to addressing these issues; they are a real challenge and state money would make a huge difference.

Chair McCoy asked if there were any further comments or questions for SNHD. There were none.

Washoe County Health District (WCHD) Chronic Disease Prevention Program

Ms. Dixon presented the report. ([WCHD Report](#))

Chair McCoy asked if there were any comments or questions. There were no questions.

Carson City Health and Human Services (CCHHS)

Toni Orr presented the report. ([CCHHS Report](#))

Chair McCoy stated he was present when the county health rankings for the local health authorities were released. He asked if there would be any internal readjustment of priorities or programs to align with the results.

Ms. Dixon responded the results would have an impact, but not immediately. The agencies will utilize the data when conducting their strategic planning sessions and assess reallocation based on local and state priorities.

Ms. Azzarelli stated SNHD is constantly monitoring and utilizing their epidemiology department for statistics, which they use internally to prioritize funding decisions. The county health rankings are very useful, but not surprising.

Elko County

Ms. Wheeler presented on behalf of Elko. ([Elko County Report](#))

Chair McCoy responded one of the benefits of the Council is being able to utilize the various resources of the membership. He was pleased Elko could receive assistance from Dr. Azzam and the State's epidemiology department.

Chair McCoy asked if there were any questions for Elko. There were none.

7. Preventive Health and Health Services (PHHS) Block Grant Update

Kristi Robusto presented the update. ([PHHS Report](#))

Chair McCoy asked how does the seven (7) percent cut impact the grant activities.

Dr. Robusto responded every year CDC announces the amount Nevada has been allotted for the upcoming year. The seven (7) percent equates to a \$45,000 cut in the overall award compared to the current fiscal year. This cut reduces funding to the amount Nevada was allotted during the 2017-2018 funding cycle.

Chair McCoy asked if there were any further questions for Dr. Robusto. There were none.

8. Public Comment

Chair McCoy asked if there was any public comment. There was no public comment.

9. Adjournment

CHAIR MCCOY ENTERTAINED A MOTION TO ADJOURN THE MEETING. A MOTION TO ADJOURN WAS MADE BY MR. SCHMAUSS. MS. DIXON SECONDED THE MOTION WHICH PASSED UNANIMOUSLY.

THE MEETING ADJOURNED AT 2:55 P.M.