

Steve Sisolak
Governor

Richard Whitley, MS
Director



**DEPARTMENT OF
HEALTH AND HUMAN SERVICES**
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
Helping people. It's who we are and what we do.



Lisa Sherych
Administrator

Ihsan Azzam,
Ph.D., M.D.
Chief Medical Officer

**STATE BOARD OF HEALTH
MEETING MINUTES
June 4th, 2021
9:00 a.m.**

MEETING LOCATIONS:

This meeting was held online, by phone, and at a physical location.

Meeting Link:

<https://nvhealth.webex.com/nvhealth/j.php?MTID=ma2f389786827d3f157e2b016794639c6>

Meeting number (access code): 187 171 9645

Meeting password: JruWeMY3z49

Join By Phone:

Phone: 1-415-655-0001
(Access code: 187 171 9645)

Physical Meeting Location:

Nevada Division of Public and Behavioral Health (DPBH)
4150 Technology Way
Room #303
Carson City, Nevada 89706

1. Call to order/roll call – Dr. Jon Pennell, Chair

BOARD MEMBERS PRESENT:

Dr. Jon Pennell, DVM (Online)
Dr. Jeffrey Murawsky, M.D. (Online)
Dr. Monica Ponce, DDS (Phone)
Charles (Tom) Smith (Online)
Judith Bittner (Online)

BOARD MEMBERS ABSENT EXCUSED:

Dr. Dipti Shah, M.D.

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

Joseph Filippi, Executive Assistant; Rex Gifford, Administrative Assistant III; Dr. Ihsan Azzam, Chief Medical Officer; Lisa Sherych, Administrator DPBH; Pierron Tackes, Attorney General's Office (DAG); Teresa Hayes, Health Program Manager III Environmental Health Services (EHS); Steve Gerleman, Health Facilities Inspector Manager, (HCQC); Lindsey Doolittle, Environmental Health Specialist IV, DPBH; Robin Allen, Environmental Health Specialist III (EHS); Scott Burt, Environmental Health Specialist 4

OTHERS PRESENT:

Nikki Aaker, Director, Carson City Health and Human Services (CCHHS); Dr. Colleen Lyons, Health Officer, (CCHHS); Mark Ambach; Dr. Michael Johnson, Southern Nevada Health District (SNHD)

Joseph Filippi opened the meeting at 9:00 a.m.

Roll call was taken, and it was determined that a quorum of the State Board of Health was present.

Chair Pennell transferred control of the Board of Health meeting to Vice Chair Murawsky.

2. Public Comment

Vice Chair Murawsky opened the meeting in accordance with the public open meeting laws and regulations then asked for public comments. Vice Chair Murawsky asked Mr. Filippi if there were any public comments received. Mr. Filippi informed Vice Chair Murawsky that there were no public comments by email, request, or fax received. Vice Chair Murawsky asked if any members of the public had any comments, and none were received.

3. Consideration and Approval of previous Board of Health Minutes from March 5th, 2021 – Dr. Jeffery Murawsky, Vice Chair

Vice Chair Murawsky moved on from public comment and asked for approval of the March 5th, 2021 meeting minutes. Vice Chair Murawsky reminded the Board Members that the meeting minutes were sent to them ahead of time. Vice Chair Murawsky asked the Board Members for a motion to approve and a second.

VICE CHAIR MURAWSKY REQUESTED A MOTION TO APPROVE THE MARCH 5TH, 2021 BOARD OF HEALTH MEETING MINUTES. A MOTION BY DR. PENNELL TO APPROVE THE MARCH 5TH, 2021 BOARD OF HEALTH MEETING MINUTES MADE AND SECONDED BY DR. PONCE APPROVAL OF THE MARCH 5TH, 2021 BOARD OF HEALTH MEETING MINUTES PASSED UNANIMOUSLY.

Dr. Lyons informed the Commission that the electronic meeting packet she received had the meeting minutes from the December Board of Health meeting. Vice Chair Murawsky stated that the Board Member's packets had the correct minutes and asked Mr. Filippi if the correct meeting minutes were on the website. Mr. Filippi checked and assured Vice Chair Murawsky that the correct meeting minutes were on the website.

4.—Informational Item – Health Department/District Reports:

Carson City Health and Human Services – Nicki Aaker, Director, Carson City Health and Human Services (CCHHS)

Nikki Aaker, Carson City Health and Human Services (CCHHS) reported for Carson City Health and Human Services. The CCHHS report is listed as Exhibit “A”

Ms. Aaker asked Dr. Lyons to update the Board on what she has been working on for the last 3 months. Dr. Lyons informed the Board that she is a 4th generation native Nevadan and that she has attended the University of Nevada Reno (UNR) School of Medicine as well as serving 7 years in the military and establishing a private practice in Carson City for 19 years as well as working with the Veterans Administration (VA) in Gardnerville for 5 years in addition to now working at CCHHS. She is also a volunteer editor for the Nevada Family Physician magazine which she forwarded a copy to Mr. Filippi. The issue was about affordable housing and homelessness issues in Nevada. Dr. Lyons gave the copy to the Board see what the magazine is about and in case they would like to submit content to reach over 800 family physicians in the state.

Dr. Lyons attended End Violence Towards Women in which she has some ideas for the committee later this month. She also stated she attended Disaster Epidemiology. Next week she will attend Food and Drug Safety about cannabis dispensaries and tattoo parlors. Dr. Lyons stated that they have kept up with the COVID vaccine medical monitoring progress sites and she is participating in the Behavioral Health Task Force.

Ms. Aaker continued the report stating that they are still performing active COVID response. CCHHS is operating under a multi-agency coordinated group response to COVID. Along with herself there are the Emergency Managers from the quad counties (Carson County, Storey County, Douglas County, Lyon County). They meet regularly to discuss challenges and how to move forward. They were meeting monthly prior to COVID and kept the partnership because of its value.

Ms. Aaker talked about the Chronic Disease Division in which the division is working on a quality improvement project. They are working on a video to brand the division and get information out to the public about what the division does. In the past some of the high school students did not know what the health department does, so the department is working on letting the public know what they do.

Adolescent Health Care is going to be a staff change. Veronica Galas, who oversees Clinical Services, will be transferring to the Adolescent Health Program as soon as CCHHS gets a new Division Manager. Ms. Aaker is excited to have Ms. Galas in the Adolescent Health Program due to her years of experience.

Tobacco Control staff have been participating with the Nevada Tobacco Coalition and the legislature. SB263 funding was reinstated. It is very important work that they are doing dealing with teens vaping. Staff have been doing presentations and they have participated with the Carson City Youth Center to gain feed -back from the youth about youth advocacy. They had high participation and a lot of feed-back to work with. Staff are also working on video clips to persuade youth not to use the vaping flavors and to resist pressure from peers and the tobacco companies.

Clinical Services has nurses going to home bound residents to give them the COVID vaccination. Under the Community Health Improvement Plan, which included Behavioral Health, there was a Carson City Behavioral Health Task Force meeting where they did a situation Strength, Weaknesses, Opportunities, and Threats (SWAT) analysis that will guide CCHHS goals into next year.

Epidemiology did not have anything significant to report to this Board at this time.

Ms. Aaker stated that the Quad Counties preparedness project is still vaccinating everyone and having vaccination events. As far as Human Services Division, which works under the CCHHS organization, they sent out a community needs assessment to the community which includes community services organizations. We are going to use that information to identify gaps in services and use that information to guide goals and also it will be used for the Carson City Behavioral Health Task Force.

Ms. Aaker highlighted that Human Services has a Community Health Worker that collaborates with the specialty courts in Carson City to find transitional housing for individuals that are in a treatment court or a mental health court. That program is called CCSHARES with is funded with the Indigent Accident Fund money. The statistics from June to September 2020 there were 7 men that occupied the house that were funded by CCHHS. The average stay was 47 days. 4 of the men, or 54%, transitioned home out of transitional housing. Ms. Aaker asked the Board if they had any questions.

After confirming that the Board did not have any questions Vice Chair Murawsky thanked Ms. Aaker for her presentation.

Washoe County Health District – Kevin Dick, Health Officer, Washoe County Health District (WCHD)

Mr. Kevin Dick, District Health Officer was unable to present the report for the Washoe County Health District (WCHD). His report is attached hereto as Exhibit “B.”

Mr. Filippi informed the Board that Mr. Dick was unable to present the report for the Washoe County Health District and that he would be happy to communicate any questions the Board may have about the WCHD report to Mr. Dick.

Southern Nevada Health District – Dr. Fermin Leguen, Health Officer, Southern Nevada Health District (SNHD)

Dr. Leguen, Chief Health Officer for the Southern Nevada Health District was unable to present the report for the Southern Nevada Health District (SNHD). The report was presented by Dr. Michael Johnson. The SNHD report is attached hereto as the State of Nevada Board of Health hereto known as Exhibit “C”.

Dr. Johnson informed the Board that SNHD is continuing their COVID-19 response. SNHD is especially focusing on getting people vaccinated. They began administering vaccinations for adolescents 12 years-old and older starting in May. It is challenging working with the Clark County School District to accomplish vaccinations, but they are making progress. The COVID-19 matrix continues to look good; cases continue to decline, and hospitalizations are plateauing and stable. COVID-19 related mortality continues to decline, and the positivity rate is at 3.8% below the 5% threshold from the Center for Disease Control and Prevention (CDC). These are all encouraging indicators.

Dr. Johnson stated that there are slightly more than 7 million people that go through Mc Carran International Airport over a weekend, and it takes a couple of weeks before large events like this to reflect in any of our COVID-19 indicators. Our hope is that there is not an increase in any of the matrix since everything seems to be getting back to normal in Las Vegas. We have as many of the COVID-19 variants as other states surrounding us do. The COVID variant B1617.2, which is the variant that came from India, was detected at the Southern Nevada Public laboratory as well as other variants that the SNHD continues to monitor.

Dr. Johnson let the Board know that the SNHD is working on a collaborative investigation with the Food and Drug Administration (FDA) and the CDC on the Real Water bottled drinking water, contamination. In March

SNHD announced that they received 5 reports of severe Acute Non-viral Hepatitis in children between November 23rd, 2020 and December 3rd, 2020 and there are currently 16 probable cases. This includes one fatality who was in their 60's that had underlying medical conditions. The 16 probable cases include children and adults that were all hospitalized and have been subsequently released. The initial investigation found the children ranged from 7 months old to 5 years of age. The range of the adult cases is from 32 to 71 years of age. The most common symptoms recorded were nausea, vomiting, fatigue, and dizziness.

Dr. Johnson reports that Real Water has been shut down. Consumers, retailers, and restaurants have been advised not to continue selling, drinking, serving, or using the water to cook with. There are a couple of more lawsuits that have been filed against the company. SNHD will continue to keep everyone updated on this investigation.

Dr. Johnson stated that the influenza season has not been that bad. Comparing this week this year from the same week last year there were 1483 influenza related hospitalizations and 59 deaths last year. This year there are only 50 influenza related hospitalizations and 6 deaths. It is believed that many of the mitigation measures such as staying home and wearing a mask have contributed to a lower influenza season not only in Nevada, but around the United States. SNHD is working towards being normal which bring their workforce back to the office from telecommuting. A lot of the money from COVID is coming in helping them to launch grants and begin their scopes of work. SNHD just received a notice of award for 22.6 million for the Health Disparities Health Equity Grant helped with many of the issues within the health district.

Dr. Johnson asked if the Board had any questions. The Board did not have any questions.

State of Nevada, Division of Public and Behavioral Health - Ihsan Azzam, Ph.D., M.D., Chief Medical Officer

Dr. Ihsan Azzam, Chief Medical Officer reported for the State of Nevada. The report is hereto known as Exhibit "D." Dr. Azzam gave a brief overview of his report.

Dr. Azzam began his report saying: You already have a copy of my report so I will just summarize some important points. The current situation continues to be cautiously encouraging. The COVID-19 Pandemic continues to regress in the United States and Nevada, with a slow and steady decline in the Daily reported Test Positivity Rate, frequency of cases and death, and hospitalization.

More than 60% of the American adults have already received at least one dose of the COVID-19 vaccine, and almost 50% of the U.S. population are fully vaccinated. This impressive progress toward increasing rates of fully immunized individuals is reflected in a significant reduction of new COVID cases that dropped to its lowest level in Nevada. Ranging from 124 to 425 cases per day. Since the beginning of the pandemic, there have been almost 325,000 COVID cases reported in Nevada, and almost 50% of all Nevada residents have been tested for COVID-19.

So far, there have been more than 3.4 million individual testing encounters. More than 10% of Nevada residents have tested positive for COVID-19. At the same time, the Test Positivity Rate, has been steadily declining. As of June 2nd, the 14-day Test Positivity Rate in Nevada was 3.7%. The World Health Organization (WHO) target of 5% has been met for almost 3 weeks now. The number of COVID cases has been steadily declining over the last two weeks. As of the 1st of June, there were 124 newly diagnosed COVID-19 cases.

As vaccination rates continue to increase, the number of COVID cases continues to decrease. COVID-related hospitalization also continues to decline in Nevada and nationwide. Compared to 2,225 cases in December, there were 226 hospitalized confirmed and suspected COVID-19 cases as of June 1st.

Since the beginning of the pandemic, there have been more than 5,500 COVID-associated deaths in Nevada. However, COVID-related deaths continued to decline, with some day-to-day fluctuations.

The pace of vaccination seems to be slowing down. From about 16,000 vaccine doses administered each day two weeks ago and a high of nearly 30,000 in mid-April, only about 13,000 vaccine doses are administered daily over the last seven days. This is similar to the national average, about 40% of Nevada residents are fully vaccinated and about 50% of Nevadans aged 12 and older have already initiated vaccination.

It is important to mention that compliance with non-pharmaceutical measures such as facemask use and social distancing have reduced morbidity, hospitalization, and mortality burdens of influenza significantly, as Dr. Johnson (SNHD) mentioned in Clark County, Nevada, and nationwide. Recent studies have shown that at least 67% of the burden of influenza in the United States was reduced due to these two measures. This observation can inform longer term disease prevention and any other seasonal viruses that usually circulate during the flu season. Dr. Azzam concluded his report and asked if the Board had any questions.

Vice Chair Murawsky asked Dr. Azzam about the life-lost comparison in the Health Disparity Analysis. He asked if there was going to be more in the analysis to help us understand how deeply COVID-19 impacted different communities across Nevada in different ways.

Dr. Azzam explained that there was a study by Kyra Morgan and our Analytics Office of the Department of Health that studied this. Dr. Azzam explained that it is concept that probably could stand alone, but when you add other parameters knowing that more underserved populations had a higher level of infection. Also the rate of death was higher among racial ethnic groups and underserved populations, so the initial life-lost perimeter is another parameter showing that, while the number of individuals that passed away during COVID was lower, the rate of death was higher among ethnic racial groups. Additionally, the number of years, which is very important, are significantly higher because they were younger. The people who really passed away among racial ethnic groups were identified as an underage group.

Dr. Azzam complemented the Office of Analytics for their excellent report highlighting the life-lost perimeter. This is a metric that was not done, as far as he knew, in other states. We still need to dig-down to see how much this information can add to our knowledge. Dr. Azzam mentioned that Lisa Sherych, the DPBH Administrator stated that we need to know what is happening among the racial ethnic minority groups. That was not initially included, so we added that about 2 weeks before this report.

Vice Chair Murawsky stated that was very important data and that it is very important to share across the state. This information helps to drive where we work and place our effort to do the things that we do. Vice Chair Murawsky thanked Dr. Azzam and his staff for all of their efforts putting this together and sharing with the Board.

Vice Chair Murawsky asked if the Board had any other questions. No questions were received. Vice Chair Murawsky thanked everyone for their efforts getting us through COVID. The work of the health departments and the districts making this happen, and creating the infrastructure, providing guidance and helping with the difficult things were all very important to keep Nevadans safe, moving forward, and helping get out of this.

Your continued efforts to take us the rest of the way are appreciated by us and by all. You don't get told you are appreciated enough, so thank you.

5. – Item for Possible Action - Consent Agenda Items – Dr. Jon Pennell, Chair

Vice Chair Murawsky explained that the consent agenda was in 2 sections that had a few variances, and the rest were compliance agreements. These were in the packets received by the Board. Vice Chair Murawsky asked the Board if they had any questions about the consent agenda items, if they had any items that they wished to remove.

Hearing no objections Vice Chair Murawsky asked the Board of Health members for a motion to approve as submitted.

VICE CHAIR MURAWSKY REQUESTED A MOTION TO APPROVE THE CONSENT AGENDA. A MOTION BY CHAIR PENNELL TO APPROVE OF THE CONSENT AGENDA WAS MADE AND SECONDED BY DR. PONCE. THE CONSENT AGENDA ITEMS WERE APPROVED UNANIMOUSLY.

6.- Informational Item – Update on Sentinel Events according to NRS 439.843 Presented by Jesse Wellman, Biostatistician, Office of Analytics

Agenda Item tabled and voted to place on the next Board meeting agenda.

7. - Item For Possible Action – Discuss and plan for State Board of Health Members to meet at physical locations. – State Board of Health Members

Vice Chair Murawsky asked the Board if they would like to return to a central location for the meeting, one in northern Nevada and one in southern Nevada.

Chair Pennell was favorable to physically meeting at a location and having hybrid meetings too.

Mr. Smith stated that he was fine getting together with everyone in southern Nevada.

Ms. Bittner said she had no problem meeting in Carson City.

Dr. Ponce did not have an objection to meeting at a physical location.

Vice Chair Murawsky told Mr. Filippi that the board would like to have a physical location in southern Nevada and offered the Boards help to Mr. Filippi to find a meeting location if needed. Mr. Filippi thanked Vice Chair Murawsky for his offer. Mr. Filippi stated that historically the Board of Health would meet at the Grant Sawyer Building in Las Vegas and asked if the Board Members would be comfortable meeting there again. Vice Chair Murawsky affirmed that the Board Members would be comfortable meeting there. Mr. Filippi offered to schedule the next Board of Health meeting at the Grant Sawyer Building. Dr. Johnson offered to let the Board of Health meet at the SNHD building and stated that with their newer technology it should not be a problem to connect the Board of Health meeting.

Mr. Filippi confirmed with the DPBH Information Technology (IT) staff that DPBH does have the ability to connect with the SNHD meeting rooms. Mr. Filippi then asked if the Board Members had a preference as to which room they would like to use. Vice Chair Murawsky asked the Board Members if they had a preference and they unanimously said that they did not have a preference.

Dr. Johnson let the Board know that if they chose to utilize the SNHD room to meet just let him know and he will reserve the room for the Board of Health. Chair Pennell said that the SNHD Red Rock Room is larger, and it might encourage the public to come to the meeting.

Mr. Filippi said that he would reach out to the SNHD to reserve the Red Rock Room and thanked the Board Members.

8. – Item for Possible Action - Future Agenda Items

Vice Chair Murawsky asked the Board Members if they had any ideas for future Board of Health agenda items. After hearing no suggestions Vice Chair Murawsky suggested that after coming out of the legislative session he would like someone to give the Board of Health an overview of what they could expect to see regarding requests for new regulations or updated to regulations that the Board of Health may have to approve. That way Board Members can get ready and provide the best input that they can.

Mr. Filippi clarified that Vice Chair Murawsky would like an overview of pending legislative regulations resulting from the 81st Legislative Session. Vice Chair Murawsky confirmed that was correct. Mr. Filippi asked a follow up question to clarify if it was just DPBH regulations, or the entire DHHS regulations and Vice Chair Murawsky stated just the regulations that Mr. Filippi believes would impact the Board of Health such as Nevada Administrative Codes (NAC), or other new positions or policies that the Board would need to approve or review. That would help the Board members gain knowledge to maybe ask some initial questions that would make the presentations more focused and more valuable.

Vice Chair Murawsky asked if any of the Board Members had any other suggestions for future Board of Health meetings. The Board Members did not have any suggestions.

Public Comment

Vice Chair Murawsky asked if there were any public comments. No public comments were received.

Meeting Adjourned at 10:19 am