

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

EMERGENCY STATE BOARD OF HEALTH
Meeting Minutes
September 10th, 2021
9:00 a.m.

MEETING LOCATIONS:

This meeting was held online, or by phone. The online and phone meeting location is:

Meeting Link:

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<https://zoom.us/j/93761644696?pwd=NHI3VE1BcUR5WjM4OFNQenBrcHFUdz09>

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Meeting ID: 937 6164 4696

(Passcode: 543698)

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

BOARD MEMBERS PRESENT:

Dr. Jon Pennell, DVM (Online)

Dr. Jeffrey Murawsky, M.D. (Online)

Mr. Charles (Tom) Smith (Online)

Ms. Judith Bittner (Online)

BOARD MEMBERS ABSENT EXCUSED:

Dr. Trudy Larson

Dr. Monica Ponce

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

Joseph Filippi, Executive Assistant, DPBH; Lisa Sherych, Administrator DPBH; Julia Peek, Deputy Administrator, DPBH; Debi Reynolds, Deputy Administrator, DPBH; Joanne Malay, Deputy Administrator, DPBH; Dr. Ihsan Azzam, Chief Medical Officer, DPBH; Pierron Tackes, Attorney General's Office DAG; Julie Slabaugh, Attorney General's Office, DAG; Brent Geerhart, IT Technician, DPBH; Rex Gifford, Administrative Assistant III; Karissa Loper, Health Bureau Chief, DPBH; Theresa Wickham, Agency Manager, DPBH; Christina Brooks, Agency Manager, DPBH; Chadinma Njoku, Health Facilities Inspector III, DPBH; Tammy Ritter, Community Health Nurse III, DPBH; Stanley Cornell, Clinical Program Manager III, DPBH; Nathan Orme, Education & Information Officer, DPBH; Susan Lynch, Hospital Administrator, DPBH; Drew Cross, Psychiatric Nurse IV, DPBH; Deann Anderson, Health Information Director, DPBH; Lindsey Kinsinger, Health Program Manager II, DPBH; Nichole Batien, Health Program Manager II, DPBH; Christopher Abernathy, Forensic Specialist IV, DPBH; Brook Maylath, Health Facilities Inspector II, DPBH; Kyle Devine, Clinical Program Manager II, DPBH;

OTHERS PRESENT:

Duane Young, Governor's Office; Yvanna Cancela, Governor's Office; Megin Delaney, Governor's Office; Brody Leiser, Principal Deputy Fiscal Analyst, LCB; Charity Felts, Deputy Attorney General, DAG; Gregory Ott, Chief Deputy Attorney General, DAG; Kareen Filippi, Executive Assistant, DHHS; Candice McDaniel, Programs Department Director, DHHS; Shannon Litz, Public Information Officer, DHHS; Tawny Chapman, Executive Assistant, DHHS; Elvira Saldana, Executive Assistant, DHHS; Deborah Hassett, Deputy Director, DHHS; Jessica Adams, Department Division Administrator, ADSD; Steven Higginson, Director Nursing Services I, ADSD; Jessica Kemmerer, Management Analyst III, DHCFF; April Caughron, IT Manager II, DHCFF; Logan Kuhlman, Personnel Officer I, DHCFF; Beth Slamowitz, Sr Physician, DHCFF; Antonina Capurro, Deputy Division Administrator, DHCFF; Kyril Plaskon, Public Information Officer, DHCFF; Ross Armstrong, Division Administrator, DCFS; Kathryn Roose, Deputy Division Administrator, DCFS; Danielle Ward, Administrative Assistant II, DCFS; Lisa Alfred, Personnel Analyst II, DCFS; Sharrilyn Vondrak, Personnel Officer III, DCFS; Sheryl Johnson, Administrative Services Officer I, DCFS; Laura Freed, Director Administration, ADMIN; Dr. Fermin Leguen, District Health Officer, SNHD; Kevin Dick, District Health Officer, WCHD; Michael Long; Christine Armendariz; Paul Lunkwitz; Abby (NLN); Kellen (NLN); Holly Flamer; Josh Braun; Ian Gallager; Dr. Naughton; Mike Donte; Valarie White; Tiffany Garcia; Sheryl Johnson; Chezna (NLN); Jonnie Guajardo; Kelly Evans; Unknown; News 3; NBC; Kim Smith; Kathy Poag; Cameron Parks Vandenberg; Zach Bright; Susy Esquivel; Kevin Ranft; Steve Zachowski; KLAS; Brittany Walker; Michael Lyle; FOX 5 Las Vegas; Sheniz Moonie; Jon Gaja; Katelyn Newberg; John Treanor; Michelle Carlson; Jennifer Frishmann; Jeff Hagg; Bruno Bevilacqua; Siobhan McAndrew; Shadaba Asad; Kenny Ramis; Denise Stokich; John Smith; Ashley Wyke; Paige Barnes; Wendy Knorr; Holly Flammer; Michael Muehle; Sam Metz; Jimmy Lau; James Ferber; Allison Genco; David Bradfield; Adam Slamowitz

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 opened the meeting in accordance with the public open meeting laws and regulations. Chair Pennell then read Item 2, the only item on the agenda and asked DuAne Young, Nevada Office of the Governor to present Item 2.

2. – Item for Possible Action – Consideration and Possible Adoption of Proposed Emergency Statement and Emergency Regulations amending Nevada Administrative Code (NAC) Chapter 441A, relating to COVID-19 vaccinations for State employees and State contractors working in State-operated, licensed healthcare settings or State-operated detention facilities – DuAne Young, Nevada Office of the Governor and Candice McDaniel, Deputy Director, Department of Health and Human Services (DHHS).

Chair Pennell called on Mr. Young to present agenda item 2.

Mr. DuAne Young greeted everyone and stated that he is the policy director for the office of Governor Sisolak. It is my pleasure to stand before you today with the Department of Health and Human Services Director and special COVID Liaison to the Governor's Office Candice McDaniel. Mr. Young explained that Ms. McDaniel will walk the Board through the Governor's Medical Advisory Team (MAT) decision that led to this. Then Mr. Young will guide the Board through the policy and reasons as to why we are here today. We also have Dr. Asad who serves on the MAT team and advises the governor on these issues. Mr. Young then yielded to Ms. McDaniel.

Ms. McDaniel thanked Mr. Young and stated at the request of Governor Sisolak, on August 5th the MAT recommended that employees who work with and serve vulnerable populations or are employed in congregate care settings are to be fully vaccinated for COVID-19 and show that proof of vaccination to their employer. The goal of this recommendation is to increase COVID-19 vaccination for those who serve and work with vulnerable populations. Including those in high risk occupations and high risk settings in order to really protect those who are served by these systems. Ms. McDaniel yielded back to Mr. Young.

Mr. Young stated that as the Board reviews this policy, I want you to understand the Governor's Office has affirmed its obligation to protect those entrusted in their care within institutional settings. Many of us, when we signed up to be state servants took an oath and a vow to serve those who could not, and did not, have a voice or the ability to protect and serve themselves. With that we are bringing forth the requirement that all Department of Health and Human Services Employees (DHHS), Contractors, or transfers who enter our institutions for vulnerable populations within the normal scope of their employment, as well as Department of Corrections (NDOC) employees, must receive all necessary doses of the COVID-19 vaccine to become fully vaccinated on or before November 1st, 2021. Understand that this has ramifications beyond the policy of just protecting staff but protecting those in their care. This policy will also require new hires to be vaccinated prior to their start date.

This policy will allow for medical exemptions as we know that there are individuals whose medical physicians have advised them not to take the COVID-19 vaccination. This will just simply require verification of that.

We also know that their individuals with closely held religious beliefs. While many religious leaders of varying faiths have come forward and said that the COVID-19 vaccine is part of their religious and moral duty, we know that there are some with closely held religious beliefs that object to this, so there will be exemptions for those individuals who are outside of those religions that have already come forward saying this is an acceptable practice and in good faith for their fellow man.

Understand, in light of President Biden's announcement yesterday on federal vaccination mandates for federal Medicaid and Medicare providers with certain requirements for participation, most of, if not all of the DHHS

buildings, except those which are forensic in nature, would be captured under this requirement because of their Medicare and Medicaid billing relationship.

I want to talk to you about the reality of how we arrived at this. Of the 18 correctional facilities across Nevada, as of yesterday, there were 4,538 inmates who have contracted COVID-19 infections. Also 1,104 staff members have contracted COVID-19. That is within the setting. Including 49 inmates and 3 staff. The current overall vaccination percentages of the NDOC is 43% vaccinated, 57% are unvaccinated. I want to pause and thank Director Daniels for his leadership and his vision in this area of proactively trying and standing up and recognizing that it is us who protect inmates that don't leave. There is a cost to the state of 9.2 million dollars in overtime since the course of the pandemic to cover the shifts of those officers who have been infected with COVID-19.

The most significantly epidemiological code for COVID infections occurred between October 2020 and January of 2021. Unfortunately, we are seeing another wave of COVID now and we are back to where we were in December in hospitalizations. They are increasing and bed capacity is decreasing. We obviously don't want to repeat the winter of 2020, but given this trend, if we don't take swift action, we are facing that direction.

In the two state run psychiatric hospitals 95% of the infections have been from staff of these facilities. Again, an obligation to protect those we are entrusted to our care. Within the Division of Family Services (DCFS) with facilities that have shown 63% COVID infections with staff. As a reminder many of these facilities serve children under 12 who cannot be vaccinated. Staff enter and leave everyday whereas the residents stay. Often the residents stay anywhere from 90 days to 9 months.

In conclusion, as I pause for any questions that you have, I understand that this policy has been met with some controversy. I understand that many people feel as if their rights are being imposed on. What I say, is in order to change the trajectory of our path of state, in order to protect the people who are entrusted to our care, we must take big and bold actions and we must require mandates for vaccinations for employees that are serving these vulnerable populations. Thank you for your time today.

Chair Pennell thanked Mr. Young and Ms. McDaniels then asked the Board if they had any questions.

Dr. Murawsky thanked the presenters for laying out the fundamental reasons behind why vaccination in this population is so critical given the rates of disease seen. I understand within the MAT recommendation framework it really spoke to vulnerable populations, and this is clearly a vulnerable population. Beyond the current federal mandates, we think these will be complementary to requirements that have just been laid out for Medicare and Medicaid providers to help in the health care space and the corrections space. Do we see that there are further groups that we may need to cover through emergency regulation?

Mr. Young answered. He thanked Dr. Murawsky for the question and said that we have all struggled and wanted to go bigger and bolder, so under emergency regulations we have the scope of about 120 days. I was excited by the federal action, and I think that this will certainly be complementary. At this time, we felt that the scope of our authority within NRS under the request should really be shaped to state employees. To simplify this my grandmother always taught me; clean your own house before you comment on someone else's. So we hope by taking this action it will encourage all of our partners in the private sector to have the courage to take similar actions throughout all types of business and organizations in Nevada.

Dr. Murawsky thanked Mr. Young and stated that we as a Board required vaccination for employees who worked for vulnerable populations under statute for a very long time. This is just an expansion given the current

situation with a new virus that need to be addressed through the same mechanism, so thank you and thank you for the explanation on the emergency regulations which are very clear.

Chair Pennell clarified that Dr. Murawsky's statement, before Mr. Young's response, of "we feel these will be complementary" is not the Board of Health and Chair Pennell stated that the Board of Health has not met to discuss this topic before today.

Dr. Murawsky stated that Chair Pennell is correct. He, Dr. Murawsky, feels that way.

Chair Pennell asked Mr. Young about the unintended consequences of the regulations and asked Mr. Young what if there are a lot of resignations from staff?

Mr. Young answered that one of the things the government must weigh is how to perform the services to the public. I know the NDOC as well as DHHS have provided contingency plans for staffing, but if there is mass resignations or people that are asked to leave, due to their insubordination, will certainly affect the operations of the state. I will tell you that the state is examining every thing in its power, its toolbox, in terms of administrative and legal actions that tend to be able to fill those positions as well as to offer overtime to those individuals that may have to cover. We know that this has been arduous and continuous. It is found in many other states. While people are upset about it they realize they became a public servant for a reason. They came to serve the public. They came to uphold their duty, and many will eventually comply. While they may feel that their personal freedom is encroached their sense of duty, for many individuals, their sense of dedication to the State of Nevada, its residents, its most vulnerable and let's face its economy. Because we don't want to see those budget cuts again. Their sense of duty to that, I believe, will allow them to rise to the occasion and do the right thing.

Chair Pennell thanked Mr. Young for his answer and asked if the Board had anymore questions. The Board did not have any more questions.

PUBLIC COMMENT

Chair Pennell stated that this would be public comment for Item 2 only and reread the action item. Chair Pennell reminded the public that this is a public comment period. Not a period for public questions. He also reminded everyone how public comments can be sent into the Board and that for those who give public comment online, or by phone, will be limited to 2 minutes. Chair Pennell also stated that the Board members have received all comments that were sent to the Board of Health up until the start of the Board of Health meeting today and that those comments were entered into the public record.

Mr. Filippi let the Board know that Dr. Ponce was able to join the meeting and that she is in attendance.

Michael Long, Registered Nurse, I am licensed in the State of Nevada. I apologize, I just came off of a night shift working in a COVID I.C.U. (Intensive Care Unit) and I am very concerned with the position the Board of Health is going to take on this matter. I know that it is related to specifically the NDOC and the other state entities. My biggest concern is related to those who will resign, those that will leave this position based on their concerns related to the health and safety of these vaccinations are in their best interest. In addition to that I have seen a significant amount of patients being admitted into my I.C.U. that are vaccinated. I have held a family member's hand when they have looked at me in the eyes and said "Why are they in the I.C.U.? They are vaccinated." And I just look at them and I said I am sorry they are here, and we will do our best. The reality is that we have people who are vaccinated that are coming in COVID positive. They are out there, and they don't know. A lot of them are not symptomatic. A lot of them are carrying it and passing it on. There is not any

mechanism right now based on this emergency order to be testing those that are vaccinated. It seems very contra-indicated to be alienating a large portion of the employees that are providing care to the needy that should be protected, but we don't know for sure, and you have no mechanism to protect those when you have vaccinated staff that will continue to come into work and could still be spreading it. Thank you,

Tonya Armendariz, Correctional Officer with NDOC for 13 years. I speak for myself. We are in the middle of a pandemic. It is effecting all of us in some form in some kind of way. I am vaccinated. Others are arguing about their body and their rights and are continuing to place us, the inmates, the public, myself. I have kids that are unvaccinated because they don't qualify to be vaccinated at this point. Those who, because of their rights, and because of their beliefs are supposed to have 2 tests weekly. I have heard excuses, well I have no more appointments left, I wasn't able to go, I'm going on vacation, I have heard so many excuses and this isn't right. All of the protests and the division. It does not represent all of us. These excuses, it doesn't represent all of us. And right now, my daughter was exposed twice to COVID while in school. She is vaccinated thank goodness, and my daughters are sick. One is at home, she is 9 years old, she can't be vaccinated. I feel that as a Corrections Officer I have a duty to these inmates.

Paul Lunkwitz, President of FOP (Fraternal Order of Police), Nevada Seal Lodge 2. I submitted comments earlier I would like to summarize them. Personal to the president's address last night 100, plus, employees will have to test weekly or get vaccinated. I believe that the tests that have already been happening have been done at the correctional facilities, and I am speaking about NDOC (Nevada Department of Corrections) where I was an officer for 21 years. This is an inconvenience for people, but we were doing it we continued to do it. Whether people have a problem with it now or not I can't speak on that. I would like to comment the previous gentleman's testimony when he said 9.2 million dollars in overtime. What do you guys think that is going to look like when you lose 57% of your staff. You already have a very hard problem on staffing correctional facilities in Nevada even when there is not a pandemic. Even when there is not a vaccine mandate. It is a drastic issue to staffing. They are already working overtime. People are being forced overtime once every other day a lot of times at High Desert. This is the reality of the situation whether you lose 57, 40, or 30 percent people are standing up and they do not want to be forced into something. The alternative of being tested I'm not sure if that is such a big problem. The way the department had been doing it is that you go in and you get tested on the way to work. I can't see why this is something that has to be mandated and infringe on peoples right to what goes into their body. I submitted more articulate comments. I hope you all had a chance to read them. I stand in opposition to forcing this on us. The legalities of it are going to carry on for years. The expenses of terminating someone and them going trough the appeals process. Thank you for your time.

Abby (NLN) I am going to start this off as a state employee with an other agency. I am going to say that maybe a third are against this vaccine, and I will go on with what that gentleman said. Are you willing to lose at least one third of your staff and spend all the money and resources to hire and train new people and experience people. Study after study of this vaccine has been showing the delta variant, for those who are vaccinated are contracting delta variant. They are spreading it around and they are asymptomatic. Therefore, they are going to work, they are sick, they don't know they are sick, and they are giving it to me and to anyone else. I am actually home sick today from work. I have symptoms, I know I am sick, I called in and said I can't make it. So why should I have to be around a bunch of other people who are asymptomatic and are spreading it to me when the vaccine actually killed my dad, and I'm being punished for it. Then you have nations, such as Israel, who have vaccination rate and their cases are increasing. And now people are concerned the new MU variants, top scientists are saying its evading the vaccine. Why should we be forced to take something that is not even

working. When it is being evaded and the vaccine is still emergency use authorized. I know they say Pfizer is fully approved, but they only approved the Comirnaty, not the vaccine they are giving you. Comirnaty will not be available for a few more years, so you are still injecting everybody with a vaccine that is emergency use authorized. Where is the evidence that COVID has ever been truly isolated, and the evidence that you can differentiate between each and every strain you are saying is out there.

Kellen (NLN) a nurse that works with NDOC, I actually want to say that I have been in the thick of this with my fellow coworkers in medical. For over 2 years we have been on the front line we have come to work every day. We have treated all of the inmates that have tested positive for COVID. We have been right there with the staff who have been positive, and I have made personal phone calls to see how they are doing and do status checks. I want to say as far as my particular facility goes, I have seen a large amount of vaccinated inmates and staff come down with COVID. Test positive, have symptoms, spread it around. I don't understand how we have been on the front lines for a couple of years now, and now they are going to turnaround and those of us who do not want to take it for whatever personal reasons, whether it be for our own health. How are they going to turnaround and thank us for that hard work by saying you are going to be fired if you don't do this. Thank you.

Holly Flamer, Medicaid provider working in the mental health field. I was working with homeless and addicted individuals when COVID first started happening, and now I work with foster care kids. I have been unvaccinated through this entire time period and have also been exposed to COVID at least 10 times and I never got it. I have gotten all the tests. I have gotten all the antibody tests and I just don't seem to get this virus. I have very, very serious religious objections to wanting to get this vaccine. I don't understand that there are lots of people who don't get this virus from what I understand. The vaccine is not working in a large part of the population. I personally can't quit my job this is my lively hood. I am a Ph.D. doctorate graduate. I can't just turn away from my entire lively hood and my pension, but I am also scared to death. Absolutely shaking in my boots, the potential of having to have this vaccine in order to keep my job and keep helping the people that I do. Especially after 2 years of not getting this virus. I have been in locked rooms with children that have had it for over an hour. I have been in locked cars. I really hope that you will make considerations and at least, the very least, offer medical and religious exemptions for those of us who do not want to do this. Thank you.

Josh Braun, Correctional Officer, I have been a Nevada Correctional Officer for almost 10 years now. As an employee for the State of Nevada myself, and all employees around the state have gone through it all, to include our families and children. I only have 2 minutes and more to say so I will just mention a few. Under staffing, pay freezes, pay cuts, health insurance getting worse, empty promises of things getting better, and to top it all off the reason we are all here today our vaccine mandate. I am not going to sit here and talk about masks and vaccination because we can all look up facts that support our own beliefs. It's not about that, it is deeper. It is about freedom and the freedom of choice. Men and women in this military have fought for our freedoms, and some have paid the ultimate price. Well, it is our turn now, the citizens of the United States of America to fight for our freedoms. What we are asking is for that freedom of choice. Freedom to choose to get the vaccine or not to get the vaccine, and for our choices to be respected, and not to be discriminated against because of them. Per the directive last night there is a choice. To either receive the vaccine or continue weekly testing. After all that state employees have been through we are just asking for that choice. One thing that I have learned about being a state employee is being able to get the job done with the minimum resources available and necessary. Another thing I have learned is that we are all more united than meets the eye. I understand that I am just a number, but I also understand that all branches of state and local services are already working with the minimum number of employees. And I am talking pre-COVID. What I want you all to ask yourselves is before voting on this is, are

you prepared to continue with half the numbers you currently have now. It's not too late. Please make the correct decision. Thank you.

Ian Gallagher, work from home programmer/developer, slowly but surely you have been kind of slowly ostracizing my coworkers, my company. I can't join any events simply because I am not vaccinated. It is like I am a black sheep, or a plague although I have not been sick since November of last year. I have been around people who have been COVID infected. I at one point have had COVID, like I said in November of last year. I thankfully recovered fully. It was a pretty minor deal for me I am probably in a more not as critical category as far as age and health. The bottom line is that we can sit here and talk about the virus, the testing, the methods, the vaccine, what ingredients it has, how big it is, whether the vaccine is effective or not, go over the numbers. We can sit here and moan over this for the rest of our lives, the bottom line is there is this thing called basic human rights and one of those rights is what we put into our body, what we eat, what we drink, that is a human right. We get to choose what to drink, what to eat, when and how. This is a violation of our human rights, forcing people to vaccinate themselves. And forcing people to have these conversations with their family as to whether they will have a job. To be able to put food on their tables. That is a terrible thing, and I don't think that is good in any way. I hope that you can see the nature of how this could look like something the Nazis would do. Like they did to mentally ill patients before they started executing Jews. It is a terrible thing; we should not be doing this to our own citizens.

Dr. Naughton works for NDOC in Carson City, In a perfect world it would be great if everybody was vaccinated. We see that people who are vaccinated are getting infected again. Over at the hospital in Reno and Carson City the hospitals are seeing people who are vaccinated as sick as the ones who are vaccinated. Most of the people who are getting admitted now are unvaccinated, but the problem that I see with mandating a vaccination is there is so much resistance to it. I am afraid our staffing would be even worse than it is now. I would love to see everybody vaccinated because I think it would help but forcing people to do something they don't like is never a good thing. Again, I say that people who are unvaccinated are at greater risk of being on a ventilator and dying when those people who are vaccinated, even if they get reinfected. We had people get reinfected in NNCC (Northern Nevada Correctional Center) and the other camps, so far none of them had to be put on a ventilator or have had any serious illness like we were seeing when the first wave went through. It is a decision that needs to be taken into account of all of the problems associated with it. Right now what we are doing is we are testing everybody, when they come in on their first day of work and that is not negotiable, and nobody likes to get tested, I don't either, but I think it is the best.

Mike Donte, I have been a Nevada Corrections Officer with NDOC for little over 9 years. Both of my colleagues covered everything but the question comes down to. I know both sides of the spectrum. I have a medical exemption. I am not allowed to take any vaccines, but I still feel bad for the people who have taken the vaccine and those that can't. At what point in history will the powers that be, have made a decision that they will start busting down peoples doors to take a vaccine? That's the question you really have to ask. There is a freedom of choice, I understand both sides of the spectrum. The people that are scared. The people who are not scared. It goes back and forth and it becomes a "he said, she said" game. It is a question that you have got to ask yourself. What is right and what is wrong? Is it really right to force people to take a vaccine? Just like Lunkwitz said 75%, approximately, at High Desert Prison are not vaccinated, so if they say "ok you don't have a job anymore" 75% of your workforce is gone. That means the National Guard is going to have to run the prison, and that is going to be a mess itself. If there is 75% of the people have questions about the vaccine and are not sure whether they want to take it or not has to be brought up to you. Why aren't people taking it? That is a

concern to be talked about. Nothings perfect, it is like the smallpox vaccine. Everyone that I know in the military that took the vaccine has not gotten smallpox. People who have taken the COVID vaccine are still getting it, so I leave you with that question, what is really going on with the so called vaccine?

Valarie White, I am just speaking to oppose any kind of move on this Board's part to support mandating vaccinations for any state employees, or any employees, or any individual in this state. It should be obvious to all Board members as Americans that mandating this vaccination is unconstitutional. Have they reached out to legal experts to confirm this? It should be obvious to them if they are moving to mandate this for any employees in this state then they are acknowledging I don't respect the constitution. I don't wish to follow the law of our land. I am going against what this country was founded on. The constitution has lead this country for decades, for centuries. If they are going to say yes we want all employees to take this vaccination, we are going to mandate it. They are spitting on the constitution. It is wrong, and if they can't see the difference between the constitution and some little edict executive order from a "president" then they should not be on the Board. They should remove themselves and resign. If you can't follow the constitution resign. That is all I have to say. Thank you.

Tiffany Garcia, I am a local activist here in Clark County. I wanted to jump up here real quick along with the other countless doctors, nurses, and attorneys that are participating today in opposition to this mandate. Simply for the fact that it is effecting countless Americans. Countless studies have gone out and a lot of young children from the age of 12 and forward have passed away due to this. I think for what it is worth more strategic studies need to be done, but I think forcing the population and our children to get this vaccination is a step in the wrong direction. I think it is time that the Board stands on the constitution and with the American people, and do what is right. That is all I have got to say.

Mr. Filippi let the Board know there were no other comments and Mr. Filippi asked the public if they had any more comments.

Valary White, I would just like to know where I can access this recording to review it later because I missed part of the meeting. Can you provide the link some place where it will be posted?

Mr. Filippi answered that she can email the email address that is posted on the agenda, stateboh@health.nv.gov and request the recording and we will try to get that to you as well as the meeting minutes once they are drafted.

Valary White asked if there was a 30 day wait for that? Mr. Filippi answered yes. Valary White said that seems quite long, why is that? Mr. Filippi answered that it takes time to transcribe the minutes mam.

Sheryl Johnson, this is more of a question than a public comment. If they decide to go ahead and mandate this for state employees will they also be taking the responsibility for the risk any of the state employees have as far as side effects, death, break throughs, any long term effects of the vaccine they are forcing us to take? Thank you.

Mr. Filippi thanked Sheryl Johnson for her question and stated that public comment is not really a question and answer session. Mr. Filippi then referred to Chair Pennell if he or the Board would like to answer the question.

Chair Pennell replied that he might ask that question to council after public comment time is over.

Mr. Filippi asked if anyone else would like to make a public comment. There were no further public comments. Chair Pennell closed the public comment period. Chair Pennell thanked everyone for participating and giving their position on the agenda item.

Chair Pennell stated that Dr. Azzam, Nevada's Chief Medical Officer, at the last Board meeting presented statistics and percentages of cases in Nevada. Chair Pennell asked Dr. Azzam if he had any idea on the breakthrough cases in Nevada that are hospitalized?

Dr. Azzam thanked Chair Pennell for the question and stated that most of the people who are hospitalized are unvaccinated. I just want to mention that the vaccine is 93% to 94% effective, so eventually out of 200 million individuals who are fully vaccinated you are talking about 10 million people who are not protected. There is nothing perfect. There is no vaccine that is perfect, so eventually breakthrough cases are happening and 10 million who are vaccinated could end up developing the infection. The good news is that if you are fully vaccinated the vaccine is going to protect you from severe illness and death. Certainly not everyone out of the 10 or 12 million people have extremely great health, so while they are vaccinated they may develop a breakthrough infection and they may end up in the hospital. They are having comorbidities they are severely ill previously. Eventually the vaccine is extremely protective, but not for everyone. We need to know that most of the people in the hospital are not vaccinated. The last numbers I heard of was about 95% of the hospitalized individuals are not vaccinated.

Chair Pennell thanked Dr. Azzam and asked if one of the Deputy Attorney Generals could answer that or not. It has come up on responsibility that the state faces for this. If one of you want to answer?

Julie Slabaugh, Chief Deputy Attorney General representing the Department of Health and Human Services replied that she doesn't believe that this is the time to give their legal advice in a public meeting. That would be attorney client privilege that we will discuss after this meeting with the Board and the Division and the Department.

Chair Pennell thanked Ms. Slabaugh and asked if the Board members had any questions, if not Chair Pennell requests a motion concerning action item NAC 441 related to COVID vaccinations for state employees and state contractors working in state licensed health care settings or state operated detention facilities.

CHAIR PENNELL REQUESTED A MOTION TO APPROVE THE CONSIDERATION AND ADOPTION OF PROPOSED EMERGENCY STATEMENT AND EMERGENCY REGULATIONS AMENDING NEVADA ADMINISTRATIVE CODE (NAC) CHAPTER 441A, RELATING TO COVID-19 VACCINATIONS FOR STATE EMPLOYEES AND STATE CONTRACTORS WORKING IN STATE-OPERATED, LICENSED HEALTHCARE SETTINGS, OR STATE OPERATED DETENTION FACILITIES AS SUBMITTED. THE MOTION TO APPROVE THE REGULATION WAS SUBMITTED BY DR. MURAWSKY AND SECONDED BY MS BITTNER. THE REGULATION WAS APPROVED UNANIMOUSLY WITHOUT ABSTENTIONS.

Chair Pennell opened the passed agenda item for Board member questions and comments.

Dr. Murawsky stated that Mr. Young and Dr. Azzam clearly outlined the contingency work that is being done to address many of the concerns that were raised on the public side, and I am sure our DAGs have more guidance

they can provide in those departments as concerns about staffing are raised. That is why I was able to motion, I think that we have a good plan in that space. I think Dr. Azzam figured out clearly the breakthrough infections and the protections that we have had and that this recommendation is clearly in line with the MAT recommendations in the larger picture. As well as the guidance that came out at a federal level.

Chair Pennell thanked Dr. Murawsky and asked if there were any other Board members that would like to comment. Hearing none Chair Pennell asked for a vote on the agenda item.

Chair Pennell said I, Dr. Murawski said I, and Ms. Bittner said I.

Chair Pennell asked all those Board members opposed please say “nay”. No “nays” were heard. Chair Pennell then asked the Board if they had any abstentions. No abstentions were heard. The motion carried.

3. GENERAL PUBLIC COMMENT

Chair Pennell opened the meeting to public comments and started informed everyone that no action will be taken on this agenda item until scheduled on an agenda for a later meeting and that the same considerations will apply for testimony.

Chezna (NLN) (in audible) Just had a question to put out there about natural immunity, someone who and contracted COVID. Somebody who already had COVID would have to get the shot as well. I just thought it was an additional outlet for people who are hesitant to get the shot. If they had COVID would they have to get the shot? That is all, I was just putting that out there for consideration.

Valerie White, I just know based on lots of reading that this COVID has. The numbers that you have are based on a PCR test, largely, which have been found to be unreliable because they don't singularly identify COVID. All the data that you are relying on is questionable from the beginning. The data that you are getting from the federal government from the CDC where you have Fauci who lies to an FDA who is unreliable as well. You doctors, you people on the Board. You are just continuing the lie out of D.C. Out of our captured president. You should resign because you are not representing the people. You are ignoring the facts. There are medications and procedures to help people get over this, so what it looks like is as long as there is any kind of illness on this planet you are going to need to control us. Take away our constitutional rights and freedoms. You need to resign, and you need to put your head on your pillow every night knowing that you are traitors to this country. That is all. Traitors.

Paul Lunkwitz on my count you had 2 people that voted “yea” and there are 5 Board members, so I am kind of confused as to how the motion carries when you have less than 50% that voted to approve this. All be it I am not as familiar with your normal procedures, but in almost every voting situation you have to have more than 50% to approve a motion. I am very confused as to 2 people can approve this when nobody else voted. If you could please explain that I would very much appreciate it. Additionally, this was in my comments, we are talking about a “vulnerable” population, every single one of them was offered the COVID shot, and they had a choice to take that. Now the employees who protect the community are not having that same choice. If you could please explain the voting, I would really appreciate that. Thank you.

Mr. Filippi addressed Chair Pennell and stated that he heard Chair Pennell, Dr. Murawsky, Mr. Smith, and Ms. Bittner motion to approve. That is 4 out of the 6 voting members who did approve. There were no “nays” so

that is a majority to pass the motion that was approved earlier in the meeting. I hope that answers your question Paul.

Michael Long, thank you for taking another comment. It is my understanding the Board has now passed this. Forcing this on a significant amount of employees across the state. My concern now if you are going to have employees left in the state that are now vaccinated, when are you going to start testing them? Because we know that they are carrying and if they are asymptomatic you are still bringing that back to vulnerable adults and vulnerable populations. I feel that there is definitely prudence to test any staff that is going to be bringing potential harm to an establishment. Thank you.

Jonnie Guajardo, local activist. I just want to remind everyone on the phone here is that the survival rate of COVID-19 does exceed the survival rate of the vaccine. I did want to remind everyone there that you did take an oath to protect the people who don't have voices as you said earlier, so it comes down to doing the right thing. It seems like you all had your minds made up before this call even started. Because you took an oath to be a puppet. Thank you.

Kelly Evans, My husband is in the military and has had to deal with this mandate. He received an email yesterday they have fast tracked this because the only vaccine that is available at this point is still experimental. I hope that gives everybody on this call a little bit of hope. This is still an illegal mandate. Thank you.

Josh Braun, thank you for taking my comment again. My only question is are we going to get the option of continual testing for those who choose not to get the vaccine, and or medical or religious exemptions going to be granted? That's my only question. Thank you.

Abby (NLN) Thank you once again for taking my comment. You guys have the doctors that say that the COVID wards are full of unvaccinated people, but by your own, the CDC's definition of unvaccinated is that you can have both vaccines, but unless 14 days has passed you are still unvaccinated. I could have had 2 doses of Pfizer or Moderna one week ago, I am still unvaccinated. I could have had the vaccine 13 days ago; I am still unvaccinated. How many of those people in the hospital, when they say they are unvaccinated, have received full doses of Pfizer or Moderna or have received the single dose of Johnson & Johnson within the past 14 days? Since by the CDC's definition they are still considered unvaccinated. Why is there no study going on for that? Thank you

Unknown, I just want to second that I hope you guys will consider religious and medical exemptions especially religious exemptions. I live alone. I don't have a family. If I were to get COVID I am not putting anyone at risk. I believe that it is my right fully to decide whether or not I die. It is my choice to choose if I get COVID and end up on a ventilator I don't think that option should be taken away from me religiously and spiritually. I just really hope that you guys will put something out about exemptions for us who really want to keep our jobs and who are passionate about helping others, but also do not want to put something like this into our bodies. For our own health and religious freedoms. Thank you very much for the opportunity for us to provide comment.

There were no more open public comments.

Chair Pennell informed the Board that they will take a 5 minute break and return at 10:07 am.

The Board of Health meeting was reconvened at 10:07 am. Mr. Filippi took a Board of Health member roll call to verify quorum. The following Board of Health members were present:

Dr. Jon Pennell
Ms. Judith Bittner
Dr. Murawsky
Mr. Charles Smith

Mr. Filippi informed Chair Pennell that 4 out of the 6 members were present verifying quorum.

Chair Pennell reconvened the Board of Health meeting. Chair Pennell stated that he did not want any confusion on the record for the vote. Chair Pennell asked for a roll call vote and asked Mr. Filippi to read off the Board member's name and instructed the Board members to answer the vote whether you are "for", "I", "nay", or "Abstain". The Chair voted "for", "I".

Mr. Filippi read off the Board Members names. The votes are as follows:

Mr. Smith voted "I"
Ms. Bittner voted "I"
Dr. Murawsky voted "I"

Mr. Filippi verified that there were 4 "I" votes and asked if there were any "nay" votes. None were heard. Mr. Filippi then turned the meeting back over to Chair Pennell.

4. Adjournment – Jon Pennell, Chair

Chair Pennell stated that as far as the question on this the agenda was posted online and if the questions are coming up about religious or medical exemptions please read the bill and look at item number 4. I think that should clarify some of the things. I thank everyone today for your participation. I think the Board of Health and the state members that were here today, and I will adjourn this meeting. Thank you.

Meeting Adjourned at 1:39 p.m.