

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

**DRAFT MEETING MINUTES
STATE BOARD OF HEALTH**

September 2nd, 2022
9:00 am

MEETING LOCATIONS:

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

Physical Meeting Locations:

Rawson-Neal Psychiatric Hospital
Training Room B (193)
1650 Community College Drive, Las Vegas, NV 89146

Nevada Division of Public and Behavioral Health
Hearing Room 303
4150 Technology Way, Suite 300, Carson City, NV 89706

Online Meetings Link:

https://teams.microsoft.com/dl/launcher/launcher.html?url=%2F%20%23%2F%2Fmeetup-join%2F19%3Ameeting_YTBhMmY4MDMtNmIxNC00OWYyLTkZmQtZWY4ZGI5ZGNhNDY1%40thread.v2%2F0%3Fcontext%3D%257b%2522Tid%2522%253a%2522e4a340e6-b89e-4e68-8eaa-1544d2703980%2522%252c%2522Oid%2522%253a%2522455656b7-d121-4709-ba81-3f70d51b1100%2522%257d%26CT%3D1661462289111%26OR%3DOutlook-Body%26CID%3DD72E7CAE-C2B3-48C9-A9C0-E07457EE20AC%26anon%3Dtrue&type=meetup-join&deeplinkId=ff4b2d77-4c24-4551-ad17-1dc0a1bed260&directDI=true&msLaunch=true&enableMobilePage=false&suppressPrompt=true

Phone Number:

+1-775-321-6111
Phone Conference Number: 655 825 021#

1. CALL TO ORDER/ROLL CALL – Dr. Jon Pennell, Chair

BOARD MEMBERS PRESENT:

Dr. Jon Pennell, DVM
Dr. Jeffery Murawsky, M.D.
Ms. Judith Bittner (online)
Dr. Monica Ponce, DDS (online)
Charles Smith

BOARD MEMBERS ABSENT EXCUSED:

Dr. Trudy Larson, M.D.

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

Autumn Blattman, Executive Assistant, Division of Public and Behavioral Health (DPBH); Dr. Ihsan Azzam, Chief Medical Officer, DPBH; Lisa Sherych, Administrator, DPBH; Kayla Samuels, Management Analyst, DPBH; Joanne Malay, Deputy Administrator, DPBH; Kyle Devine, Bureau Chief, DPBH; Bradley Waples, Health Facilities Inspector, DPBH; Vicki Ives, Health Program Manager, DPBH; Aundrea Oguishi, Health Program Specialist, DPBH; Bobbie Sullivan, Emergency Medical Services Representative, DPBH; Lindsey Kinsinger, Health Program Manager, DPBH; Nathan Orme, Public Information Officer, DPBH; Steve Gerleman, Health Facilities Inspector III, DPBH

OTHERS PRESENT:

Andria Cordovez Mulet, Southern Nevada Health District; Dr. Colleen Lyons, Carson City Health and Human Services; Pierron Tackes, Attorney General's Office; Allison Genco; Bobbi Jones; Brenna Martinez, Saint Mary's Regional Medical Center; Carson City Fire Department; Dr. Cassius Lockett, Southern Nevada Health District; Cathy Short; Colleen Lyone; Dr. Tedd McDonald, Mineral and Churchill County; Elizabeth Kessler; Emma Duarte; Joan Hall; John Burton; Kevin Haywood; Lea Case; Linda Anderson; Rani R. Reed; Samantha Sato, Carrara Nevada; Steve Messinger; Troy Ross; Tyler Shaw, Ferrari Reeder Public Affairs; Tyson McBride, Pershing County;

Chair Pennell opened the meeting at 9:02am.

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

1. ACTION ITEM: Review and Approval of meeting minutes from the June 3rd, 2022 Board of Health Meeting – Dr. Jon Pennell, Chair

Chair Pennell asked if there were any additions or corrections to the March 4th, 2022, Board of Health meeting minutes. Chair Pennell said page eight (8), after Dr. Tedd McDonald's report, stated that Dr. Azzam gave a brief overview of his report. The information had previously been stated and can be deleted. Chair Pennell asked if the public or the Board members had any additional corrections to the June 3rd, 2022 meeting minutes. None heard.

CHAIR PENNELL REQUESTED A MOTION FOR THE APPROVAL OF THE JUNE 3RD, 2022 BOARD OF HEALTH MEETING MINUTES WITH PAGE 8 EDIT. A MOTION BY JEFFERY MURAWSKY TO APPROVE THE JUNE 3RD, 2022 BOARD OF HEALTH MEETING MINUTES WITH PAGE 8 EDIT WAS MADE AND SECONDED BY CHARLES SMITH. THE MOTION PASSED UNANIMOUSLY.

2. INFORMATIONAL ITEM – Quarterly County Health District Reports

Carson City Health and Human Services – Dr. Colleen Lyons, Director of Carson City Health and Human Services (CCHHS)

Dr. Colleen Lyons presented the report for [Carson City Health and Human Services](#) in place of Nikki Aaker, Director of Carson City Health and Human Services (CCHHS).

Chair Pennell thanked Dr. Lyons and asked the Board if they had any questions.

Chair Pennell asked if there was any public comment. None heard.

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

Chair Pennell stated that Kevin Dick was entered into the record as not being able to attend this meeting to represent Washoe County Health District.

Autumn Blattman confirmed no one from Washoe County Health District would be presenting.

Southern Nevada Health District – Dr. Cassius Lockett

Dr. Cassius Lockett presented the [Southern Nevada Health District \(SNHD\) report](#).

Chair Pennell thanked Dr. Lockett and asked the Board for any questions.

Chair Pennell stated that he appreciated the information and had not heard about the vending machines.

Mineral & Churchill County – Dr. Tedd McDonald, M.D., County Health Officer

Tedd McDonald introduced himself as the Community Health Officer for Mineral County and Churchill County and the Medical Director for the Churchill County Health Department. The Central Nevada Health District project is ongoing. Dr. McDonald said he had a chance to meet with the Interim Finance Committee August 17th who provided the authorization to continue to work towards having a Central Nevada health district, which was a big a big step and at this point the counties are continuing to work on making sure there is Medicare and Medicaid recognition and develop policies, procedures, and to make sure the county outlines staff and has the resources to be able to meet the goal of having a health district established by June of 2023. Dr. McDonald said the county is preparing for vaccine season and has ordered flu vaccines, as well as ordered bivalent COVID-19 vaccines. Pods for vaccinations for Churchill County, Mineral County, Eureka and Pershing Counties have already been scheduled. For senior citizens, mobile units will be available. Counties are also working with the school district for their needs. The school district has gone back to school and has done well. There have been no issues. The Novavax vaccine is actively being used for those patients or clients who are vaccine naive and is being used as an alternative for those who may have concerns about messenger RNA vaccines. Cases in Churchill County have dropped to where there has been one (1) incidence as of August 23rd. The peak for Churchill County was in mid-July where the county had 87 active cases in one (1) day. There have been three (3) or four (4) hospitalizations. Churchill County has had a decrease in rating that has been passed on to the Board of Health and will be using that in the community needs assessment and planning for the next year. Mineral County had its second meeting last month of the Southern Nevada Behavioral Health Task Force, led by Kim Donahue, who is the regional behavioral health coordinator. The initial meeting was a strengths, weaknesses, opportunities, and threats (SWOT) analysis and will have another meeting on September 8th, and process evaluating the needs for Southern District of Behavioral Health will continue. Dr. McDonald said he loved the idea of the vending program and is going to present that to the county board of health, saying it is an excellent idea given that a lot of the organizations are moving away from providing free testing kits.

Chair Pennell thanked Dr. McDonald and asked the Board if they had any questions.

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

Dr. Ihsan Azzam, introduced himself as the State Chief Medical Officer and presented the [Division of Public and Behavioral Health report](#).

Chair Pennell thanked Dr. Azzam for mentioning animals in his report on Monkey Pox and that it is quite different than the outbreak in 2003, which seemed like it was quickly contained.

Chair Pennell said there are a number of reports from other health district officers that have been entered into the record and asked if any other health officer would like to make verbal comments. None heard.

- 3. ACTION ITEM: Discussion and Possible Approval of Variance #732 regarding requirements of R046-20AP religious exemption to vaccine objections through form submission and written statement, and a request for the waiver of submission of form for vaccination exemption requested by Mr. Jeremy Mancuso – Kyle Devine, Health Bureau Chief, Child, Family & Community Wellness, DPBH**

Chair Pennell said the meeting agenda was posted in accordance with Nevada Open Meeting Law.

Kyle Devine introduced himself as the Chief of the Bureau of Child, Family and Community Wellness. Mr. Devine presented Variance Request #732 from the Nevada Administrative Code (NAC) 392, as amended by Legislative Council Bureau (LCB) file number R046-20AP relating to student immunization exemptions. The request was submitted by Mr. Mancuso on January 31, 2022. Mr. Devine said the request was brought before the Board at the last meeting on June 3rd. Nevada Revised Statute (NRS) 392.437 provides that a public school shall not refuse to enroll a child as a pupil because the child has not been immunized per NRS chapter 392.435 if the parents or guardian of the child has submitted to the Board of Trustees of the school district, a written statement, indicating that their religious beliefs prohibits immunization of such child. LCB file number R046-20AP amended Chapter 392 of the Nevada Administrative Code requiring the parents' or guardians' written statements be submitted on a form provided by the Division of Public and Behavioral Health. Mr. Devine said Mr. Mancuso filed this variance request asking to not use the standard form provided by the Division of Public and Behavioral Health as required. Mr. Devine said after the last Board meeting, staff discovered that although the applicant was sent notice of the meeting, including the agenda, the staff report to the Board was not included, as is required by Nevada Administrative Code 439.230. To assure Mr. Mancuso had all pertinent information to respond to staff analysis and recommendations, staff attempted to call Mr. Mancuso to obtain contact information. As staff received no reply, on June 28th, staff did e-mail notice of this meeting, along with the report to Mr. Mancuso so that he could have all the information and be able to present at this meeting if he desired. As staff did not receive the response, it is believed that Mr. Mancuso may have received the information through the e-mail, and as such, staff continue to believe that the utilization of the standard form does not cause any undue burden and continues to recommend the denial of this variance.

Chair Pennell thanked Mr. Devine and asked the Board if they had any questions. None heard.

Chair Pennell asked if Mr. Mancuso was present. Mr. Mancuso was not present.

Chair Pennell asked if there was any public comment. None heard.

CHAIR PENNELL REQUESTED A MOTION FOR ACTION ITEM 4. A MOTION FOR DENIAL TO VARIANCE #732 WAS MADE BY DR. MURAWSKY AND SECONDED BY MR. SMITH. THE MOTION TO DENY VARIANCE #732 WAS APPROVED UNANIMOUSLY.

4. ACTION ITEM: Discussion and Possible Approval of Variance #734 regarding requirements and precautions regarding safety from fire in NAC 449.211 & NAC 449.229 submitted by P. Theresa Brushfield, RFA Et al. – Steve Gerleman, Health Facilities Inspector III, Health Care Quality & Compliance (HCQC), DPBH

Steve Gerleman introduced himself as the Health Facility Inspection Manager for the Bureau of Health Care Quality and Compliance. Mr. Gerleman said he is presenting case #734 for P. Theresa Brushfield, RFA Et. al. to obtain variance to Nevada Administrative Code 449.211 and Nevada Administrative Code 229, which requires compliance with the residential facility for groups fire safety codes to include fire sprinkler systems and fire alarm systems and its components, per the regulations adopted by the State Fire Marshall pursuant to Chapter 477 of the Nevada Administrative Code and all local authorities having jurisdiction. Mr. Gerleman said Ms. Brushfield indicated that a number of the residential facilities for groups that she is associated with are experiencing marketplace difficulties due to supply chain delays for obtaining parts related to the installation of fire sprinkler systems and communicating components of the fire alarm systems. The Bureau of Health Care Quality and Compliance acknowledges supply chain delays exist and that a number of different providers are experiencing similar delays, such as obtaining a fire sprinkler heads and delays with fire damper actuators. Fortunately, these delays were limited to a few weeks at most. However, ordering an emergency generator can take months. Mr. Gerleman said Ms. Brushfield, and her affiliated residential facilities for groups' solution is not to be held to the fire safety standards by not providing fire protection to the residents with early detection, early notification, and fire suppression, and enabling the occupants to leave the building. Mr. Gerleman said the facilities' solution is not acceptable. The tradeoff between the market delays and the fire, no fire protection for three or more elderly and disabled residents is a

risk that must be avoided for all occupants within the residential facility for groups homes. Once the residential facility completes their license application, the Bureau Health Care Quality and Compliance makes a request to the Nevada State Fire Marshall to conduct their survey to satisfy both the NRS and NAC for the residential facilities for groups, which would also satisfy the NRS 449.307 requirement for licensed healthcare facilities for the Bureau of Health Care Quality and Compliance, especially for those non-Medicare certified facilities, like residential facilities for groups. Mr. Gerleman said the State Fire Marshall approval would not be granted if the fire sprinkler system or the fire alarm system were not installed or installed but were not working. The State Fire Marshall uses the International Fire Code for all state licensing facilities and the Bureau of Health Care Quality and Compliance uses the National Fire Protection Association standards to match Medicare requirements for reimbursement. There are both some common and non-common requirements between the International Fire Code in Nevada or the National Fire Protection Association standards. The Nevada Board of Health and Division of Public and Behavioral Health cannot speak on behalf of the state Fire Marshal's position whether they can accept or approve because they are an independent agency. Mr. Gerleman said Ms. Brushfield suggested that there is a high demand for residential facilities for groups, which should be the impetus for getting affiliated residential facility groups open without functioning fire protection features. The Bureau of Health Care Quality and Compliance empirically has been reported to and from both internal agency sources and external sources that census rates have been low in the recent times, as indicated in the variance memorandum. Quantitatively, there is no real time way to collect facility census for residential facilities for groups. However, the Bureau of Health Care Quality and Compliance does have their surveyors collect census data mainly for residential facilities, for groups and skilled nursing facilities. All residential facilities are surveyed once a year, which is required by NRS review of the statewide residential facility for groups, statements of deficiencies, which include each residential facility for groups, census data and compared against their license number of beds for the fiscal year 2021, which between July 1, 2021, and June 30, 2022, revealed that of the 390 licensed residential facilities for grouped during that time period had a 70.5% occupancy rate or restated there was a 29.5 vacancy rate. The Bureau of Health Care Quality and Compliance is empathetic towards all facility types during these recent and trying times and would like to see all perspective facility operators be successful in getting license and after obtaining their license. However, the Bureau of Health Care Quality and Compliance also must help ensure that patients, clients, staff members, visitors, even owners and operators are providing and receiving proper care in a safe and protected environment. The primary reason the state agency cannot support the removal of the fire safety in the residential facilities for groups fire safety code is the risk for the resident in an unprotected harm. The Bureau of Health Care Quality and Compliance did notify the variance applicant that the agency would not be able to support their variance requests and would be recommending to the Board to deny variance case #734 to allow to not meet the residential facilities for groups fire safety codes 449.211 and 449.229. At the time of this notification, staff were open to discuss other alternatives, but have not heard anything from the variance applicant since the notification on July 18, 2022. Mr. Gerleman said he is not sure if the facility has representatives present pursuant to questions.

Chair Pennell thanked Mr. Gerleman and asked the Board if they had any questions. None heard.

Chair Pennell asked if Ms. Brushfield was present. Ms. Brushfield was not present.

Chair Pennell asked if there was any public comment.

Dr. Murawsky said as he understands the issues related to supply chain and delay on materials, however in his opinion, it is a liability issue and though the risk of fire may be low, the risk exists. Dr. Murawsky said he has sympathy for the owner to get these operational and does not think it is appropriate to forgo fire protection in a facility

CHAIR PENNELL REQUESTED A MOTION FOR ACTION ITEM 5. A MOTION FOR DENIAL OF VARIANCE #734 WAS MADE BY MR. SMITH AND SECONDED BY DR. MURAWSKY. THE MOTION TO DENY VARIANCE #734 WAS APPROVED UNANIMOUSLY.

5. ACTION ITEM: Consent Agenda Items – *State Board of Health Members*

Chair Pennell asked if there were any items that should be removed from the consent agenda.

Dr. Murawsky asked to pull item ii from the consent agenda.

Chair Pennell asked if there was any public comment to pull agenda item ii. None heard.

CHAIR PENNELL REQUESTED A MOTION ON CONSENT AGENDA ITEMS a-hh. APPROVAL OF CONSENT AGENDA ITEMS a-hh AS PRESENTED WAS MADE BY DR. MURAWSKY AND SECONDED BY MR. SMITH. THE MOTION PASSED UNANIMOUSLY.

Dr. Murawsky disclosed that he has a conflict of interest with consent agenda item ii because the facilities requesting the waiver are with the same company that he is employed. Dr. Murawsky abstained from discussion.

Ms. Tackes disclosed she did discuss the conflict of interest with Dr. Murawsky. It is a required disclosure as well as a required abstention as referenced in NRS 281A.

Mr. Waples said consent agenda item ii was to allow for certified nursing assistants that are enrolled in school be able to assist the nursing staff with providing care and allow the nursing staff to focus on other care. This is a need that was spoken from many different healthcare facilities.

Dr. Pennell asked if there were any questions from the Board members. There were no additional questions.

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

CHAIR PENNELL REQUESTED A MOTION ON CONSENT AGENDA ITEM ii. APPROVAL OF CONSENT AGENDA ITEM ii AS PRESENTED WAS MADE BY MR. SMITH AND SECONDED BY DR. PONCE. DR. MURAWSKY ABSTAINED. THE MOTION WAS APPROVED.

- 6. ACTION ITEM: Consideration and Possible Adoption of Proposed Regulation Amendments to Chapter 457, 459, 449, and 652 of the Nevada Administrative Code (NAC), relating to Assembly Bill (AB) 471. The proposed regulations establish certain fees to support the system for the reporting of information on cancer and other neoplasms; authorizes certain health care facilities and providers of healthcare to abstract or report information to the system; and clarifies language regarding the administrative penalty for failure to correctly report information on cancer and other neoplasms. LCB File No. R010-22 – *Aundrea Ogushi, Program Manager, Nevada Central Cancer Registry, DPBH***

Andrea Ogushi introduced herself as the Program Manager for the Nevada Central Cancer Registry and presented regulation R010-22 for the Board's consideration. The regulations were developed by DPBH, working with stakeholders including the Nevada Hospital Association and the Nevada Rural Health Partners to amend NAC 457, 459, 449 and 652. The proposed changes to NAC added a fee of 6% of the renewal fee for the licensure renewal cost for mammography, other radiological machines, surgical center for ambulatory patients, facility for the treatment of irreversible renal disease, facility for hospice care, program of hospice care, facility for intermediate care, facility for skilled nursing agency to provide personal care services in home or rural clinic and renewal of licensure to operate medical laboratories except for laboratories that only perform waived human immunodeficiency virus testing (HIV). The proposed changes add language to clarify the definition and demonstrate the difference between a report and an abstract, which is the terminology used in referencing the format in which cancer case data is submitted to the state registry. Additionally, the regulations provide a methodology to clearly and easily determine if the facility is required to submit an abstract or a report based on the definition included in the amended regulations. The proposed changes add language to expand the authority of the Nevada Central Cancer Registry to enforce cancer reporting requirements for providers who not only diagnose and provide treatment, but also refer a case of cancer or other neoplasm. Proposed changes remove confusing language concerning the term "initial diagnosis" and clarify the requirement for submitting a report or an abstract to be only active or newly reportable diagnosis, as defined in the amended regulations. The changes in the regulations add clarifying language to further describe the intent behind the current non-reporting fees in NAC and increase the time allowed for corrective action to submit abstract or report on cancer or other neoplasms. A public workshop for the proposed regulations was held

on May 26th, 2022. Two members of the public offered comment: one member asking for clarification if their facility is currently actively reporting and another caller in favor of the regulations to provide gratitude to the division for working collaboratively with community stakeholders throughout this process.

Chair Pennell thanked Ms. Oguishi and asked if there were any questions from the Board Members. There were no questions.

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

CHAIR PENNELL REQUESTED A MOTION ON AGENDA ITEM 7. APPROVAL OF REGULATION R010-22 AS SUBMITTED WAS MADE BY DR. MURAWSKY AND SECONDED BY DR. PONCE. DR. MURAWSKY ABSTAINED. THE MOTION TO APPROVE REGULATION R010-22 WAS APPROVED UNANIMOUSLY.

7. **ACTION ITEM: Consideration and Possible Adoption of Proposed Regulation Amendments to Chapter 450B of the Nevada Administrative Code (NAC), Emergency Medical Services. The proposed regulations remove obstacles for advancement that no longer serve the public's best interest which include removing the advanced emergency medical technician requirement. LCB File No. R079-22 – Shana Rhinehart, Management Analyst I, Office of Vital Records, DPBH**

Bobbie Sullivan introduced herself as the Program Manager for the Emergency Medical Services Program. Ms. Sullivan said Shana Rhinehart was unable to attend the meeting. Ms. Sullivan said in approximately 2015, based on recommendation from the Emergency Medical Services Advisory Board, the requirement was put into place into regulation under NAC 450B.720 number eight (8). The requirement being that, for an emergency medical technician to attend a paramedic training program, they must first be certified as an advanced emergency medical technician (EMT). Current standards, which this program recognizes for national education standards and scope of practice, that requirement is no longer seen as the industry standard. A public workshop was held to discuss the topic among our stakeholders. We received one question as to partial training, which was addressed. The rest was in support of this change. Staff would like to remove the burden of requiring an emergency medical technician to first be certified as an advanced emergency medical technician in order to take a paramedic program of training.

Chair Pennell thanked Ms. Sullivan and asked if there were any questions from the Board Members. There were no questions.

Chair Pennell asked if there was any public comment.

Sandy Warkoh with the Carson City Fire Department introduced herself as Chief of Emergency Medical Services (EMS). Ms. Warkoh said she is in support of the change to NRS to remove the advanced EMT requirement to attend a paramedic program. Ms. Warkoh said to her knowledge, there has been no data to support that the requirement increases passing rates in paramedic programs. In addition, there continues to be a paramedic shortage in the Northern Nevada region and there is competition now with in-hospital. As the healthcare shortage has continued, people are seeing more in-hospital jobs and positions open for paramedics, and this is leaving gaps in our community to hire qualified paramedics. Additionally, the state is losing students to out of state paramedic programs where this requirement was not in place and some of those students have, after their internship, chosen to stay in the state in which they attended their paramedic program. Ms. Warkoh said she would like to support that students are kept in-state and remove that requirement for them to attend paramedic programs and thanked the Board for their time and consideration.

Chair Pennell thanked Ms. Warkoh for her input.

Chair Pennell asked if there was any additional public comment. There was no additional public comment.

CHAIR PENNELL REQUESTED A MOTION ON AGENDA ITEM 8. MOTION FOR THE APPROVAL OF

REGULATION R079-22 AS SUBMITTED WAS MADE BY DR. MURAWSKY AND SECONDED BY MR. SMITH. THE MOTION TO APPROVE REGULATION R079-22 WAS APPROVED UNANIMOUSLY.

8. **ACTION ITEM: Consideration and Possible Adoption of Proposed Regulation Amendments to Chapter 652 of the Nevada Administrative Code (NAC), Medical Laboratories. The proposed addition/changes of regulations to NAC 652 in LCB File No. R126-21 include creating regulation for a Licensed laboratories for specimen collection, regulations that allow for medical officers in the Armed Forces to be able to receive necessary medical training in a healthcare center in Nevada, updating and clarifying personnel certification qualifications, adding dentists as laboratory directors of Exempt laboratories and revising the scope of the duties of a General Supervisor of a Licensed laboratory. – Bradley Waples, Health Facilities Inspector III, Health Care Quality and Compliance, DPBH**

Mr. Waples introduced himself as the manager for the Medical Laboratory Services with the Bureau of Health Care Quality and Compliance. Mr. Waples presented proposed regulations noted as LCB file number R126-21 relating to creating the regulation for licensed laboratory for the purpose of specimen collection only with a fee structure that is not overly burdensome on the laboratory. Also changing regulation to allow for medical officers that are employed by the Armed Services in the United States to be able to provide clinical laboratory services without the requirement of applying for and obtaining state laboratory personnel certification and a hospital as part of a training program pursuant to an agreement between the Armed Services and the hospital. Regulation changes needed to clarify qualifications for personnel certifications. Changes in regulation to allow for general supervisor of a licensed laboratory that will receive the laboratory operations of a standalone emergency department that is associated with the main laboratory of a hospital. A regulation change to allow for dentists that are licensed in the state of Nevada to be laboratory directors of the exempt laboratories, and allowing the certified nurse assistants and students enrolled in an accredited school of professional nursing be able to perform point of care tests that have been classified as wave tests by the Food and Drug Administration as long as the person would apply for and obtain a State of Nevada appointed care analyst laboratory certification. The Public Workshop was held on the proposed regulations on July 11th, 2022. There were 30 individuals in attendance of the public workshop. There was one comment that was made during the workshop, which supported the ability for a general supervisor of a licensed laboratory located in the hospital, which was associated with the standalone emergency department to oversee and be the general supervisor of the standalone emergency department. There were no comments in opposition to the proposed regulation changes in NAC 652 during the public workshop. The proposed regulations were also heard by the Medical Laboratory Advisory Committee on March 25th, 2022. There was one recommendation for section 11 of the proposed regulation changes that refers to allowing dentists to be laboratory directors of exempt laboratories, which perform the wave laboratory test. A separate vote was taken by the committee, which found the majority of the committee members to be in support of dentists to be laboratory directors of exempt laboratories. There were no revisions made in section 11 of the proposed regulation for changes allowing dentists to be laboratory directors of exempt laboratories based on the majority of the Medical Laboratory Advisory Committee members voting to support the regulation change. There were no other recommendations to the proposed regulation changes made by the Medical Laboratory Advisory Committee. Mr. Waples said based upon the small business impact study, the positive supportive responses from the public workshop and the recommendation for approval of the proposed regulation changes to any NAC 652 by the Medical Laboratory Advisory Committee, which would include the majority approval of section 11 by the Board, he would recommend the adoption of the LCB file R126-21.

Chair Pennell thanked Mr. Waples and asked if the Board Members had any questions.

Dr. Murawsky asked in the exemption for the Armed Services in section 7, subsection 6, if it is saying a medical officer employee is referencing M.D.s and D.O.s or if it needs to include dentists in the exemption to provide clinical laboratory services.

Mr. Waples said that was primarily for people in the respiratory care arena and that was for the purpose of them being able to draw a specimen and run tests.

Dr. Murawsky said in the armed forces, a medical officer is an M.D. or a D.O. only. Dentists are dental officers and people in the medical core are the other individuals. Dr. Murawsky asked if it needs to be clarified because looking at their job title, dentists are in the Medical Corps. A captain in the army who is a physician is a medical officer but a respiratory therapist who is a captain in the army is not a medical officer, that is a Medical Corps member who is a captain. All the branches are like that. Dr. Murawsky asked if that is something that needs to be clarified or is the regulation using the state's definition of medical officer which is all these people who perform medical therapy. Dr. Murawsky said he does not want the regulation to limit something they do not want to limit or be confusing. Dr. Murawsky said he does not think the regulation defines medical officer other than the uses in the definition of medical officer the state has in other places, which is the state's definition of medical officer, which is someone who performs those services.

Pierron Tackes, Deputy Attorney General, said the regulation would then follow the state's definition of medical officer, which is used in statute in other places.

Chair Pennell asked if there were any additional questions. There were no additional questions.

Chair Pennell asked if there were any public comments. There were no public comments.

CHAIR PENNELL REQUESTED A MOTION ON AGENDA ITEM 9. MOTION FOR THE APPROVAL OF REGULATION R126-21 AS SUBMITTED WAS MADE BY DR. MURAWSKY AND SECONDED BY MR. SMITH. THE MOTION TO APPROVE REGULATION R126-21 WAS APPROVED UNANIMOUSLY.

9. INFORMATIONAL ITEM: Report to the State Board of Health on the State Environmental Commission – Charles Smith, State Board of Health Member

Mr. Smith introduced himself as the health department representative that sits on the Nevada State Environmental Commission and said he would like to give a summary of the last meeting. Mr. Smith presented the [Nevada State Environmental Commission Update](#).

Chair Pennell thanked Mr. Smith and asked if there were any questions from the Board members. There were no questions or comments.

10. INFORMATIONAL ITEM: Update on resolution passed by the Board of Regents of the Nevada System of Higher Education concerning COVID-19 and the health and safety of NSHE faculty, staff, and students – Keri Nikolajewski, Interim Chief of Staff, Board of Regents, NSHE

Ms. Tackes said she does not know if there is someone to present the agenda item, but it is included in the supporting materials and is a notice to the Board of Health regarding this resolution that the Board of Regents passed and sent to the Board of Health. To the extent that any members would like to take action, that will need to be on an agenda for a future item. The current item is merely an informational item. If any discussion is wanted, that can occur now, but to the extent that any action is wanted, the Board will have to put that on a future agenda.

Chair Pennell thanked Ms. Tackes and asked if there was any discussion from the Board members.

Dr. Murawsky stated he thinks the Board will need to discuss at a future meeting whether the Board should ask each institutional President for their plan on how they are going to manage just so the Board has it. So they understand how they are faring, their locality based on their individualized response. Dr. Murawsky reiterated that he thinks the Board should discuss that for a future agenda item.

11. INFORMATIONAL ITEM: Update on medical laboratory compliance agreements after the State of Nevada public health emergency ended. - Bradley Waples, Health Facilities Inspector III, Bureau of Health Care Quality and Compliance (HCQC), DPBH

Mr. Waples introduced himself as acting manager for Medical Laboratory Services. Beginning with the June 5, 2020, Board of Health (BOH) meeting through the June 3, 2022, BOH meeting, the Medical Laboratory agency of the Division of Public and Behavioral Health (DPBH) submitted to the Board for approval, 67 compliance agreements for the regulations contained within the Nevada Administrative Code (NAC). Of the 67 compliance agreements that were submitted for approval, there were 40 that would have been affected by the lifting of the Governor's Emergency Declaration which ended on May 20, 2022. On April 19, 2022, an email was distributed to all laboratories that had submitted compliance agreements to the BOH for approval, to prepare for the lifting of the Governor's Directive which would terminate the terms of the agreements. Individuals that had wanted to work for laboratories that were performing COVID-19 specimen collection and/or testing without applying for and obtaining a State of Nevada laboratory personnel certification, were notified in the same way that they would need to adhere to the regulations in NAC 652 and obtain the personnel certification according to the laboratory functions that they would be performing. Laboratory directors that were also allowed to be on the premises of the laboratory in which they are directing at least once a quarter during the pandemic, were also notified that they would need to adhere to NAC 652.370(2) which requires the laboratory director to be on the site of the laboratory at least once a month. All notifications were distributed by email. The notifications that were sent by email which were returned undeliverable, were also contacted by phone if a contact phone number was available. On Friday May 6, 2022, the Governor announced that the Emergency Directive would be lifted effective May 20, 2022. On Tuesday May 10, 2022, a final email was sent out from the Division which informed the laboratories and laboratory directors with compliance agreements and laboratory personnel working under the Governor's Emergency Directive, that on May 20, 2022, the terms of the compliance agreements would be terminated and that all personnel would be required to come into compliance with the Nevada laboratory regulations stated in NAC 652. Of the compliance agreements, there were 20 agreements under NAC 652.195 that were submitted to the Board to allow for laboratories with State of Nevada exempt laboratory licensure to provide human specimen collection and/or waived testing at locations other than the address where the laboratory is located. With some exceptions, most laboratories that are licensed as Exempt laboratories, perform specimen collection and/or waived testing only at the address of the laboratory. Operation at multiple locations is primarily only available to laboratories that are licensed as Licensed laboratories. Of the 20, there were nine (9) laboratories that are performing COVID testing only at the location of their laboratory, six (6) laboratories that closed their operation, three (3) laboratories that converted to mobile specimen collection and testing laboratories performing COVID testing, and two (2) laboratories that responses have not been received but staff continue to try to communicate with. Compliance agreements under NAC 652.370(2): there were five (5) agreements that were submitted to the BOH to allow for laboratory directors of State of Nevada Licensed laboratories to be on site of the laboratory that they direct at least once quarterly and to meet virtually at least once a month. This agreement allowed them to not be in close contact with others to travel to distant parts of Nevada to meet the regulatory requirement. Our Medical Laboratory Service agency will confirm compliance when there are State inspections performed to ensure that the laboratory directors are on site of their laboratories at least once a month. Compliance agreements under NAC 652.4855: there were six (6) agreements that were submitted to the BOH to allow for laboratory specimen collection and/or testing personnel to work under the direction of a laboratory license by the State but not require the personnel to have apply for and obtain a laboratory personnel license. The personnel were required to have documentation of training and competency prior to collection and/or testing which was determined by the laboratory and approved by the laboratory director to ensure the safety of the patients and the specimens that were collected and to ensure the quality and reliability of the patient test results that were reported. The Medical Laboratory Service agency will confirm compliance when there are State inspections performed to ensure that all specimen collection personnel and laboratory testing personnel have documentation of training and competency as well as meeting the required educational and experience requirements for the laboratory testing that they are performing. There were nine (9) agreements that were submitted under NAC 652.397(1) in order to allow Registered Nurses (RN's) that are licensed by their board in the State of Nevada, to be laboratory directors of laboratories that perform waived COVID testing. One (1) school found a qualified laboratory director to be the laboratory director of their school COVID testing laboratory. There were seven (7) school laboratories that requested to be closed. There was one (1) school laboratory which a response has not been received, but staff are still in communication with. It should be noted that beginning on April 25, 2020, through August 5, 2022, the Nevada Medical

Laboratory Services has inspected and approved 623 laboratory applications that were submitted to the State for providing various methodologies of COVID testing. In addition, the agency has received and processed an additional 126 federal CLIA certificate applications that were submitted by pharmacies in Nevada to provide COVID testing under the federal Public Readiness and Emergency Preparedness (PREP) Act.

Chair Pennell thanked Mr. Waples and asked the Board if they had any questions or comments.

Dr. Murawsky stated that he wanted to extend his personal thanks for all of the hard work the department put in in getting all of those laboratory requests processed so there could be appropriate testing facilities for patients throughout the pandemic and maintain the usual laboratory services for all the normal diseases that did not stop because of the pandemic. It is great to have this report to transition from the pandemic phase into an ongoing COVID phase, so it is known where the industry is at this point in bringing things back to normal. Comprehensive report.

Chair Pennell asked if there were any additional comments. There were no additional comments.

12. INFORMATIONAL ITEM: Update on State of Nevada immunization rates for children, impacts on immunization rates for children and plans to increase immunization rates. – Kristy Zigenis, Health Program Manager II, Child, Family and Community Wellness (CFCW), DPBH

Vickie Ives said she will be presenting for Kristi Zigenis and presented the [Immunization Rates for Children Updates](#).

Chair Pennell thanked Ms. Ives for a very thorough report and asked if there were any questions or comments from the Board members.

Dr. Murawsky said Ms. Ives mentioned the exemption increases in the youngest children that pre-kindergarten and asked if those exemption increases are seen across all vaccines or if there are particular vaccines that are seeing increases in exemptions.

Ms. Ives said she would have to get the data and respond back because she only has the overall exemption rate at hand, but staff can provide the answer.

Dr. Murawsky said he thinks the concern is making sure if there is a particular disease or if it is all disease, there will need to be action to inform the healthcare community that they need to be on the lookout for diseases that have not been seen in a generation. There will be a generation that is defined by diseases that have not been seen for the generation with physicians that have never seen them. Positions in the healthcare systems will need to be reeducated to look for things that they have not seen before.

Chair Pennell asked if there were any other questions and discussion. There were no additional questions or comments from Board Members.

13. ACTION ITEM: Recommendations for future agenda items. – State Board of Health Members

Chair Pennell asked if there were any recommendations for future agenda items. There were no recommendations.

14. GENERAL PUBLIC COMMENT (Action may not be taken on any matter brought up under this agenda item until scheduled on an agenda for a later meeting)

Dr. Colleen Lyons introduced herself as the Carson City Health Officer. Dr. Lyons said she appreciated the state's presentation regarding immunization rates in children and is very glad to see the higher immunization rates among generally marginalized communities, those being the Blacks and Hispanics. It is interesting to note that the Asians and White population are declining or avoiding immunizations. Dr. Lyons said when there is that outbreak of disease, they

likely will be in a better social economic position to finally get those immunizations when there is that measles outbreak, or that first case of pneumococcal disease. Dr. Lyons said she agrees with the Board's comment regarding educating physicians on having seen these, and that she has been in practice long enough to have seen a number of H- flu, meningitis and a smattering of measles. But, yes, providers will need to be educated to look for these diseases. In regard to Monkey Pox, at the last Board meeting, information was put out about the lesions looking like pastorals, but of course the whole process starts as macules, so Dr. Lyons advised anyone with a rash and a fever needs to be seen.

Joan Hall introduced herself as the President of the Nevada Rural Hospital Partners. Ms. Hall said she missed her opportunity on item seven (7). Ms. Hall said she wanted to thank the Division of Public and Behavioral Health staff who allowed both Nevada Rural Hospital Partners and the Nevada Hospital Association to express their internal concerns on the regulations, especially as it related to reporting, abstracting, and some of the timelines. The Division heard and listened to the individuals and in the end, developed regulations that the industry could support. Ms. Hall said she wanted to let the Board know that the industry appreciates them.

Kayla Samuels asked if Chair Pennell could facilitate, or allow her to facilitate, the identification of any individuals joining the meeting over phone so that support staff may accurately transcribe minutes.

Chair Pennell allowed Ms. Samuels to execute her request.

Ms. Samuels asked the individual calling from (702) 806-7439 to identify themselves. There was no response from the individual.

Chair Pennell asked if there was any additional public comment. There was no additional public comment.

15. Adjournment – Jon Pennell, Chair

Chair Pennell adjourned the meeting at 10:52am