



MINUTES

Southern Nevada District Board of Health Meeting September 28, 2017 – 8:30 A.M.

**Southern Nevada Health District, 280 S. Decatur Boulevard, Las Vegas, NV 89107
Red Rock Trail Conference Room A and B**

**BOARD:
(Present)** Marilyn Kirkpatrick – Chair, Commissioner, Clark County
Ricki Barlow – Councilmember, City of Las Vegas (*arrived at 8:39 a.m.*)
Scott Black – Councilmember, City of North Las Vegas
Bob Coffin – Councilmember, City of Las Vegas
Douglas Dobyne – Vice Chair, Regulated Business/Industry
Chris Giunchigliani – Commissioner, Clark County
Frank Nemeec – Secretary, At-Large Member, Physician (*arrived at 8:37 a.m.*)
Rich Shuman – Councilmember, City of Boulder City
Dan Stewart – Councilmember, City of Henderson

(Absent): Scott Nielson – At-Large Member, Gaming
Brian Wursten – Councilmember, City of Mesquite

**ALSO PRESENT:
(In Audience)** None

LEGAL COUNSEL: Annette Bradley, Legal Counsel

**EXECUTIVE
SECRETARY:** Joseph P. Iser, MD, DrPH, MSC, Chief Health Officer (**Absent**)

STAFF: Heather Anderson-Fintak, Emily Elzeftawy, Jason Frame, Andrew Glass, John Hammond, Jeremy Harper, Paul Klouse, Fermin Leguen, Sharon McCoy-Huber, Jacqueline Reszetar, George Ruiz, Jennifer Sizemore, Leo Vega, Jacqueline Wells

I. CALL TO ORDER

Chair Kirkpatrick called the Southern Nevada District Board of Health meeting to order at 8:32 a.m.

II. PLEDGE OF ALLEGIANCE

III. RECOGNITIONS

• **Environmental Health Badging**

The Oath of Office was administered to Jason Garcia, Environmental Health Specialist II and Tom Sheffer, Environmental Health Specialist II, by Jacqueline Reszetar, Director of Environmental Health.

IV. PUBLIC COMMENT: A period devoted to comments by the general public about those items appearing on the agenda. Comments will be limited to five (5) minutes per speaker. Please step up to the speaker's podium, clearly state your name and address, and spell your last name for the record. If any member of the Board wishes to extend the length of a presentation, this may be done by the Chairman or the Board by majority vote.

Michael Ervin, Atty SEIU, provided a summary of the recent negotiations for Article 20, Wages, and encouraged the board to approve the collaborative contract ratified by the members on September 14, 2017.

Carol Aiken, Administrative Assistant, Environmental Health, read a prepared statement for the record. **(Attachment 1)**

Mark Bergtholdt, Vice President of the SEIU Supervisors Unit, read a prepared statement for the record. **(Attachment 2)**

Joseph Ginty, SNHD, SEIU, believes Attachment C of the contract petition is incorrect.

Chris Mariano, Certified Pediatric Nurse Practitioner, read a prepared statement for the record. **(Attachment 3)**

Regena Ellis, SNHD, SEIU, following Ms. Mariano's statement, noted serving pediatric patients is a specialty within itself and was told that the clinic will be closed because it is not productive enough. On September 27, the nurses in the Tuberculosis Clinic were told that they would be seeing pediatric patients (refugee children) in the Tuberculosis Clinic, which is part of the patient load formerly seen by Ms. Mariano. There was no discussion with the employees to determine if they had the skills to work with pediatric population. Ms. Ellis believes this is a huge disservice to disenfranchised children and thinks the Board should be aware of these decisions that she considers systemic and dysfunctional. Regarding parking, there are sixteen reserved spots at the back of the building that take up parking that could be used for patients and employees. The employer has taken the stance the if employees do not park in the correct area, there will be disciplinary action, which is an inkling of the systemic issues at the District. The Clinical Services report indicates "Nurse staffing numbers continue to require monitoring and restriction of the number of walk-in services accepted for screening." There is also a presentation regarding an increase in STDs in this area. As patient care advocates, the recommendation is that the children that were seen in the Children's Clinic be seen by providers that are trained to do so.

Francine Oakley, SNHD, SEIU, explained that in addition to the monetary sacrifices that the employees have made, most workloads have increased and the employees have given more and more.

Lorraine Oliver, SNHD, SEIU, noted if every time a grant group went away and employees were released and to wait for the next grant, there would be an endless mode of training. Ms. Oliver suggested that the Board look at what grants have been lost in the past ten years and what happened. Ms. Oliver believes that as an option, Emergency Funds can be used to treat STDs and take care of the Children's Clinic until grant funds are determined. Ms. Oliver questions the inception of the Pharmacy and the Mobile Clinic and does not believe they are fiscally sensible. She does not believe the Board is getting a clear representation of how much money is coming in, as the District is now able to bill for many services. Ms. Oliver considers the letter from Dr. Iser as a threat to employees being paid from grant funds.

Al Sang, Environmental Health, Food Operations, has worked hard with the union and management to ensure fiscal responsibility, especially since 2008. Mr. Sang wholeheartedly believes that the experience, dedication and responsibilities are recognized and reflected in the latest agreement, ratified by eighty-five percent of the members. The experience and efficiency of the stewards is only recognized by pompous words from management. As the economy is vibrant and top management's salary is increasing, Mr. Sang questioned the disparity between the employees.

Victoria Harding, SNHD, SEIU, Chief Steward, General Unit, stated that the letter included by Dr. Iser was taken as fear-based leadership, and she deals with it every day by not giving it any credence and is not going to respond to it. Ms. Harding asked the Board to approve the contract. She asked the Board to consider the employees in grant funded positions with caring respect. Ms. Harding explained that shortly after the Personnel Reduction article was established, management started saying that when the grant goes, the employee goes, whereas the Personnel Reduction article indicates that seniority rules. This started to make grant funded employees fearful for their

jobs, particularly when there is the constant push for additional grant funds. Employees do not want to promote under a new grant and are fearful of moving to a new grant because they may suddenly lose their job.

Seeing no one else, Chair Kirkpatrick closed this portion of the meeting.

V. ADOPTION OF THE SEPTEMBER 28, 2017 AGENDA (for possible action)

Chair Kirkpatrick would like to table Consent Agenda Item 3, Petition #31-17, until a presentation is given to the Board at the October meeting. Also, the Primary Care Briefing in Section X will be tabled until the October meeting and there is no need for a Closed Session (Item XII). Member Giunchigliani asked to remove Consent Agenda Item 2, Petition 27-17 from the Consent Agenda for questions.

A motion was made by Member Giunchigliani seconded by Member Dobyne and carried unanimously to approve the September 28, 2017 Agenda as amended.

VI. CONSENT AGENDA: Items for action to be considered by the Southern Nevada District Board of Health which may be enacted by one motion. Any item may be discussed separately per Board Member request before action. Any exceptions to the Consent Agenda must be stated prior to approval.

1. APPROVE MINUTES/BOARD OF HEALTH MEETING: August 24, 2017 *(for possible action)*

A motion was made by Member Giunchigliani seconded by Member Dobyne and carried unanimously to adopt the August 24, 2017 Minutes as presented.

2. PETITION #27-17: For possible action to adopt Proposed Clinical Services Fee Schedule and Lab Services effective October 1, 2017; direct staff accordingly or take other action as deemed necessary

Member Giunchigliani, noting that some of the costs went up and some went down, asked what was the overall effect on the clients. Sharon McCoy-Huber, Financial Services Manager, noted the impact on the clients, uninsured or underinsured, remains the same because of discounts in prices, cash payments and the District is in the process of adding donations for those who cannot afford services. The fees that are being set are what have been contracted with the insurance companies and every insurance company has a different fee. For example, an Office Visit fee of \$150 would only recoup \$57 from Medicaid, which does not cover costs. Fermin Leguen, Chief Medical Officer and Director of Clinical Services, explained that a State Eligibility Worker is at the District several days per week to assist with Medicaid enrollments.

Member Giunchigliani suggested there should be a procedure in place to refer uninsured clients to apply for Medicaid, whether they qualify or not, to get them in the system. Dr. Leguen responded that although the Eligibility Worker is on site, but on a limited basis, the District will explore the feasibility of implementing this in its' process, as it is common practice in most primary care centers.

Member Coffin noted that he will support the Fee Schedule increase as he is also supporting the pay increase and they are related.

A motion was made by Member Giunchigliani seconded by Member Nemecek and carried unanimously to adopt the Proposed Clinical Services Fee Schedule and Lab Services effective October 1, 2017 as presented.

3. PETITION #31-17: For possible action to approve the Competitive Award and Software License and Support Upfront Agreement (SNHD-9-RFP-16-010) between the Southern Nevada Health

District and eClinicalWorks for purchase of an Electronic Health Records and Practice Management system; and Software License And Support Upfront Agreement For Employee Health Electronic Medical Records and Practice Management (SNHD-9-RFP-16-010), between the Southern Nevada Health District and eClinicalWorks, for purchase of an Employee Health Electronic Medical Records And Practice Management system. This is funded through the Capital Project Fund at \$245,250 for the Electronic Health Records and Practice Management System and \$7,500 for the Employee Health Electronic Health Records and Practice Management System; direct staff accordingly or take other action as deemed necessary

This item is tabled until a presentation is given to the Board at the October meeting.

VII. PUBLIC HEARING / ACTION: Members of the public are allowed to speak on Public Hearing / Action items after the Board's discussion and prior to their vote. Each speaker will be given five (5) minutes to address the Board on the pending topic. No person may yield his or her time to another person. In those situations where large groups of people desire to address the Board on the same matter, the Chair may request that those groups select only one or two speakers from the group to address the Board on behalf of the group. Once the public hearing is closed, no additional public comment will be accepted.

- 1. Memorandum #02-17: Consider/Adopt Amendments to District Emergency Medical Services (EMS) Regulations.** Public Hearing to consider adoption of proposed amendments. Staff recommend the Board of Health consider adoption of proposed amendments to the District Emergency Medical Services Regulations; direct staff accordingly or take other action as deemed necessary (**for possible action**)

John Hammond, Emergency Medical Services and Trauma System Manager and Laura Palmer, Emergency Medical Services and Trauma System Supervisor, presented the proposed changes to the regulations.

It was noted that section 1900.300 was in error and will be stricken from the proposed regulations.

A motion was made by Member Giunchigliani seconded by Member Stewart and carried unanimously to accept and approve the Amendments to the District Emergency Medical Services (EMS) Regulations as amended.

- 2. Variance Request to Operate a Public Bathing Place not in Compliance with the Nevada Administrative Code (NAC) 444.214; County of Clark, dba Sandy Valley Peace Park, located at 650 West Quartz Ave., Sandy Valley, Nevada, 89019; [Assessor's Parcel Number (APN) 200-36-401-003] for Health Permit PR0124753; Roland Wisdom, for the Owner(s), County of Clark;** The variance request would allow the petitioner to construct a spray pool on the grounds of an existing public park without modifying the existing park restroom facilities to meet the fixture requirements of NAC 444.214. Staff is of the opinion that granting the variance will not likely pose an unreasonable danger to public health or safety, and recommends approval of the variance; direct staff accordingly or take other action as deemed necessary (**for possible action**)

Paul Klouse, Environmental Health Manager and Jeremy Harper, Environmental Health Supervisor, Aquatic Health Program, presented the variance request and recommended approval with the following conditions:

1. The petitioner agrees to monitor and limit bather occupancy if the sanitary conditions of the existing bathhouse cannot be maintained;
2. The petitioner agrees to adhere to all other applicable requirements of the Public Bathing Places Public Spas Regulations, NAC 444;

3. Failure of the petitioner to prevent public health and safety issues, as determined by the health authority, will result in the voiding of this variance;
4. This variance is automatically terminated without further notice upon the closing of any sale transaction involving the subject property, or upon petitioner leasing or assigning operation of these public bathing pools and spas to any other person or entity.

Roland Wisdom, representing Clark County, agreed to all conditions.

A motion was made by Member Barlow seconded by Member Black and unanimously carried to approve the Variance Request to Operate a Public Bathing Place not in Compliance with the Nevada Administrative Code (NAC) 444.214; County of Clark, dba Sandy Valley Peace Park, located at 650 West Quartz Ave., Sandy Valley, Nevada, 89019; [Assessor's Parcel Number (APN) 200-36-401-003] for Health Permit PR0124753; Roland Wisdom, for the Owner(s), County of Clark as presented.

3. **PETITION #30-17:** For possible action to approve and authorize the Chief Health Officer to sign the General and Supervisory Units Collective Bargaining Agreement (CBA) Reopener of Article 20 - Wages to provide a 2.5% Cost of Living Allowance (COLA) in FY 2018 and FY 2019, and 2-Step increase in FY 2018 and FY 2019 for Health District employees current and active as of September 28, 2017 and extend the same salary changes to non-union employees not covered by the SEIU General or Supervisory collective bargaining agreements. Payments for FY 2018 will be retroactive to July 1, 2017; direct staff accordingly or take other action as deemed necessary

Andy Glass, Director of Administration, reported that the District is very pleased that an agreement has been made with the SEIU and the wage change proposal is fully supported.

Chair Kirkpatrick mentioned that she and Dr. Iser had discussion and it is his right as the Chief Health Officer to send the letter and she does not believe that it is retaliation. She reminded him that it is the Board's decision to determine what is in the best interest of the employees.

Member Giunchigliani thanked the new Board members for stepping up to the plate as the new contract has been a long time coming. She would like the focus to now be on becoming a healthy Health District with employees and management. Member Giunchigliani agrees with the Chair that Dr. Iser's letter (Attachment D) is the right of an officer but continues in her mind, to undermine the Board's position and it is time to move forward.

Member Coffin stated that management has a responsibility to the Board to bring a balanced budget and a duty to forecast beyond today's situation. He believes that any good Administrator knows what can happen in this economy and defends the actions of Dr. Iser if the motive is purely precautionary.

A motion was made by Member Giunchigliani seconded by Member Dobyne and unanimously carried to approve and authorize the Chief Health Officer to sign the General and Supervisory Units Collective Bargaining Agreement (CBA) Reopener of Article 20 - Wages to provide a 2.5% Cost of Living Allowance (COLA) in FY 2018 and FY 2019, and 2-Step increase in FY 2018 and FY 2019 for Health District employees current and active as of September 28, 2017 and extend the same salary changes to non-union employees not covered by the SEIU General or Supervisory collective bargaining agreements. Payments for FY 2018 will be retroactive to July 1, 2017 as presented.

VIII. **REPORT/DISCUSSION/ACTION**

1. **Review/Discuss Grant Funded Positions;** direct staff accordingly or take other action as deemed necessary (*for possible action*)

Sharon McCoy-Huber, Financial Services Manager, discussed current grant funded positions budgeted for this fiscal year. (**Attachment 4**) Ms. McCoy-Huber noted as grants expire, discussions occur as to how to retain staff within the organization.

Dr. Leguen explained that the extremely low number of children being seen at the Children's Clinic, on average five clients per day for the last twelve months, did not justify offering that service on a daily basis. Member Giunchigliani offered space at the Pathway from Poverty program to accommodate children under the age of five and suggested a different business paradigm, whereas sending services to where the needs are instead of waiting for clients to come to services.

Joann Rupiper, Chief Administrative Nurse, added that the Refugee Clinic is funded by Catholic Charities per visit and one of the reasons that the refugee census has gone down is due to federal travel policies. Through Catholic Charities, new refugees have a sponsor who is responsible for getting them a job and applying for Medicaid. The District does the initial medical screening and provider referral. Per contract, a flat fee is received from Catholic Charities for each individual adult screened by the District.

Chris Mariano, Pediatric Nurse Practitioner, was asked to provide additional information regarding the Children's Clinic.

Member Giunchigliani would not like to see the Children's Clinic shut down until there is a better handle on the situation as a Board.

Chair Kirkpatrick believes that this is an ongoing discussion so that 1) people do not feel intimidated to ask questions and 2) as the budget is being prepared, gaps can be determined and City Council can help with OAG or CDBG funds. She is concerned that that the board is not advised about grant positions being lost and about grant positions being eliminated without Board discussion.

Chair Kirkpatrick noted it would be helpful if items that are being worked on and grants that are coming to an end would be included in informational items so Board assistance can be pursued with Nevada representatives and other partners.

Mr. Coffin is surprised that the District is dependent upon so many sub grants held by other entities.

*Member Nemecek left the meeting at 10:01 a.m. and returned at 10:04 a.m.
Member Giunchigliani left the meeting at 10:37 a.m. and returned at 10:41 a.m.*

There was no action taken on this item.

- IX. BOARD REPORTS:** The Southern Nevada District Board of Health members may identify emerging issues to be addressed by staff or by the Board at future meetings, and direct staff accordingly. Comments made by individual Board members during this portion of the agenda will not be acted upon by the Southern Nevada District Board of Health unless that subject is on the agenda and scheduled for action.

Chair Kirkpatrick met with Environmental Health staff and discussed the importance of Board communications and understanding what staff is trying to accomplish so it can help when required. For instance, regarding regulations, Chair Kirkpatrick suggested it would be more beneficial if the need for changing regulations were presented to the Board first to get direction from the Board on how to move forward. Vector Control is struggling getting into the schools and Chair Kirkpatrick hopes the Board can provide some avenues to assist. She suggested ethnic health training on food service with the chefs at their venues. Chair Kirkpatrick thinks her suggestions were well received

and told EH staff that she would be asking the Board members to attend other staff meetings as she believes this will help get back to a healthy Health District.

Member Nemec expressed concern about the Hepatitis A outbreak in Southern California and asked if there were any outreach or surveillance programs for the homeless population in Southern Nevada. Dr. Fermin Leguen confirmed there is a surveillance program but it does not actively focus on the homeless population, however there are elements and resources that could be put in place for these individuals. Dr. Leguen will discuss with Dr. Michael Johnson, Director of Community Health, to discuss preventive measures. Joann Rupiper, Chief Administrative Nurse, added that it is her understanding that the homeless community here has high Hep A vaccination rates and Hep A has been a school immunization requirement for at least ten years. Hepatitis A vaccine outreach has been done for the homeless population in the immunization program for at least the last ten years. Vaccines are done with Project Homeless Connect, with funds provided by the state and Medicaid billing. The Board would like to collaborate with the District to bring in partners to implement a vaccination campaign among the homeless. Dr. Nemec believes that University Medical Center may be willing to provide funds for this as Hep A admissions are costly.

Victoria Harding, SNHD, SEIU, stated as a Disease Investigator, it is sad to find clients in the hospitals and often they don't give enough information upon check-in to be found as some are homeless. Often, by the time the report is received, the client has already been dismissed from the hospital. One thing that can be done is to train the Disease Investigators to injections for the vaccines on the spot.

Recapping the emerging issues, Member Giunchigliani noted them as:

1. Creation of a protocol to do outreach;
2. For now, the Children's Clinic will be status quo until it can be delved further into; and
3. There will be a regular informational item update on grants to include which are sub-grants and which are augmented by general fund.

Member Nemec left the meeting at 10:55 a.m. and did not return

X. HEALTH OFFICER & STAFF REPORTS (Information Only)

- CHO Comments - None
- Primary Care Briefing – *Tabled until next month*
- Status Update – Sexually Transmitted Diseases (**Attachment 5**) – Presented by Angel Stachnik, Senior Epidemiologist

Member Giunchigliani left the meeting at 11:20 a.m. and did not return

Members Coffin and Black would like more information regarding the percentage of repeat patients and percentage of sexual workers seen at the clinic. Dr. Leguen will provide.

- Program Update – Office of Epidemiology and Disease Surveillance Jail Intervention Project (**Attachment 6**) – Presented by Kathryn Barker, Epidemiologist

Member Dobyne left the meeting at 11:21 a.m. and returned at 11:25 a.m.

Member Stewart left the meeting at 11:40 a.m. and did not return

XI. INFORMATIONAL ITEMS

1. Board of Health

Letter from the City of Las Vegas reappointing LeQawn McDowell as the Public Health Advisory Board representative for the term July 1, 2017 – June 30, 2019.

2. Chief Health Officer and Administration Monthly Activity Report
3. Clinical Services Monthly Activity Report
4. Community Health Monthly Activity Report
5. Environmental Health Monthly Activity Report

XII.

CLOSED SESSION

Go into closed session pursuant to NRS 288.220 to discuss matters related to labor negotiations with Health District management representatives; and direct staff accordingly (*for possible action*)

The Closed Session was removed from the September 28, 2017 Agenda.

XIII.

PUBLIC COMMENT: A period devoted to comments by the general public, if any, and discussion of those comments, about matters relevant to the Board's jurisdiction will be held. No action may be taken upon a matter raised under this item of this Agenda until the matter itself has been specifically included on an agenda as an item upon which action may be taken pursuant to NRS 241.020. Comments will be limited to five (5) minutes per speaker. Please step up to the speaker's podium, clearly state your name and address, and spell your last name for the record. If any member of the Board wishes to extend the length of a presentation, this may be done by the Chairman or the Board by majority vote.

Darris Cole, SNHD, SEIU, read a prepared statement for the record. (*Attachment 7*)

Although Chair Kirkpatrick does not typically respond to Public Comment, she hopes an agenda item in the future that may address some of these issues.

Regena Ellis, SNHD, SEIU, noted the Pediatric Nurse Practitioner and the Registered Nurse that worked with her were not grant funded positions. The Pediatric Nurse Practitioner is no longer working in the Children's Clinic, it is closed, and she is working as a Registered Nurse and can no longer bill for her services. The Clinical Services report indicates that the Children's Clinic saw 160 children in last month, which is more than five per day. This administration is not interested in hearing resolutions and are only interested in a "management down" situation. When Member Giunchigliani stated the clinic is to be as status quo, the expectation is that it will be open, it is currently closed. Tomorrow morning the children who would have been seen by the Pediatric Nurse Practitioner will be seen by staff in the TB Clinic that have issues with seeing those children in that clinic. Ms. Ellis asked the Board if this clinic will be open and will services be provided there. Also, the TB Clinic does not have adequate parking space. The resolution is to move the reserved parking spaces to the front of the building

Victoria Harding, SNHD, SEIU, acknowledged that parking is an on-going issue that she is dealing with. Regarding grants, one client may have issues related to four different funding sources, however only one person is sent to manage this client. New evidence-based programs are added as times change. The global issue is how to provide public health services that are needed in this community.

Veralynn Orewyler, Legal Secretary, stated she has had the pleasure of working at the District for the last three years and her experience is that that Administration cares deeply, unfortunately, everyone can't be happy all the time. Ms. Orewyler acknowledged Annette Bradley, General Counsel and Heather Anderson-Fintak, Associate General Counsel for their professionalism and diligence behind the scenes.

Deborah Moran, Program/Project Coordinator, stated that she has been on and off grants during her tenure with the District. She is not sure that it is understood that a lot of employees that are on a grant today, were not always on a grant. They may have been paid through the general fund and then a grant is obtained and the employee is tasked with activities that are paid by the grant. When the

grant goes away, the employee's job is then threatened. There should be no distinction between a "grant" employee and a "regular" employee. Also, Ms. Moran feels that the grant funded positions list may be a little misleading as some of the positions have been vacant for a very long time and some employees are paid by more than one grant.

Seeing no one else, Chair Kirkpatrick closed this portion of the meeting.

XIV. ADJOURNMENT

Chair Kirkpatrick adjourned the meeting at 11:58 a.m.

Joseph P. Iser, MD, DrPH, MSc
Chief Health Officer/Executive Secretary

/jw

DRAFT