



MINUTES

Southern Nevada District Board of Health Meeting

625 Shadow Lane
Las Vegas, Nevada 89106
Clemens Room

Thursday, September 24, 2009 - 8:30 A.M.

Vice Chair Strickland called the meeting of the Southern Nevada District Board of Health to order at 8:31 a.m. and led the Pledge of Allegiance. Vice Chair Strickland noted that a quorum was present. Stephen F. Smith, Esq., Legal Counsel confirmed the meeting had been noticed in accordance with Nevada Revised Statutes 241.020(2) and (3).

Board Members Present:

Linda Strickland
Tim Jones
Stavros Anthony
Ricki Barlow
Kathleen Boutin
Susan Crowley
Robert Eliason
Donna Fairchild
Joseph Hardy, MD
Lawrence Weekly

Vice Chair, Councilmember, Boulder City
Secretary, At-Large Member, Regulated Business/Industry
Councilman, Las Vegas
Councilman, Las Vegas
Councilwoman, Henderson
At-Large Member, Environmental Specialist
Councilman, North Las Vegas
Councilmember, Mesquite
At-Large Member, Physician
Commissioner, Clark County

Absent:

Chris Giunchigliani
Jim Christensen, MD
Mary Jo Mattocks, RN

Chair, Commissioner, Clark County
At-Large Member, Physician
At-Large Member, Registered Nurse

Executive Secretary:

Lawrence Sands, DO, MPH

Legal Counsel:

Stephen F. Smith, Esq.

Other SNHD Board of Health Members/Alternates Present:

Lonnie Empey
Jimmy Vigilante

Alternate At-Large Member, Environmental Specialist
Alternate At-Large Member, Regulated Business/Industry

Other SNHD Board of Health Members/Alternates Not Present:

Travis Chandler
Tom Collins
Karl Gustaveson

Councilmember, Boulder City Alternate
Commissioner, Clark County Alternate
Councilman, Mesquite Alternate

Debra March
Frank Nemec, MD
John Onyema, MD
Steven Ross
Barbara Ruscigno, RN
Anita Wood

Councilwoman, Henderson Alternate
Alternate At-Large Member, Physician
Alternate At-Large Member, Physician
Councilman, Las Vegas Alternate
Alternate At-Large Member, Registered Nurse
Councilwoman, North Las Vegas Alternate

Staff: Scott Weiss; John Middaugh, MD; Angus MacEachern; Glenn Savage, Jennifer Sizemore; Bonnie Sorensen; Jo Alexander; Stephanie Bethel; Jerry Boyd; Dennis Campbell; Rory Chetelat; Alice Costello; Arta Faraday; Steve Goode; Mary Ellen Harrell; Forrest Hasselbauer; Brian Labus; Eddie Larsen; Ann Markle; Dante Merriweather; Veronica Morata-Nichols; Gwen Osburn; Mars Patricio; Walter Ross; Patricia Rowley; Jane Shunney; Leo Vega; Deb Williams; Valery Klaric and Shelli Clark, recording secretary

ATTENDANCE:

<u>NAME</u>	<u>REPRESENTING</u>
Petya Balova	LEA
Fred Couzens	Las Vegas Tribune
Tom Davis	Justice & Associates
Craig Erskine	Self
Bill Fairchild	Self
Jeff Gerber	PGAL
L. E. Hawley	NCII
Marty Johnson	Silver Dollar Recycling, Inc.
Mason Joseph	JACO Environmental Inc.
Dana Moss	PGAL
Fidanis Ndokama	Touro University
Rolando Posado	EK Recycling
Scott Schlabsz	ESCI/JACO Environmental Inc.
Cliff Vellinga	Silver Dollar Recycling, Inc.

OATH OF OFFICE:

Southern Nevada District Board of Health Elected Members and Alternates

Vice Chair Strickland asked Stephen F. Smith, Board Legal Counsel to proceed with administering the Oath of Office to the elected members and alternates present. Mr. Smith administered the Oath of Office to Robert Eliason – City of North Las Vegas.

I. CONSENT AGENDA

These are matters considered to be routine by the Southern Nevada District Board of Health and may be enacted by one motion. Any item, however, 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:** 8/27/09
- 2. Approve Payroll / Overtime for Periods:** 7/25/09 – 8/07/09; 8/08/09 – 8/21/09; 8/22/09 – 9/04/09
- 3. Approval Voluntary Furlough Program Reports for Periods:** 6/29/09 – 8/07/09; 8/08/09 – 8/21/09; 8/22/09 – 9/04/09

4. **Approve Accounts Payable Registers: #1192:** 8/06/09 – 8/13/09; **#1193:** 8/14/09 – 8/20/09; **#1194:** 8/21/09 – 8/27/09; **#1195:** 8/28/09 – 9/03/09
5. **Petition #30-09:** Approval of Interlocal Contract with Nevada Division of Environmental Protection for Administration of Federal Safe Drinking Water Act in Southern Nevada

Vice Chair Strickland asked if there were any discussion on the items brought forward on the Consent Agenda. Seeing none, she called for a motion to approve the Consent Agenda as presented.

A motion was made by Member Fairchild to approve the Consent Agenda as presented; seconded by Member Jones and was unanimously approved.

II. PUBLIC HEARING / ACTION

1. **Memorandum #19-09:** Application for Approval for EK Recycling to Operate a Solid Waste Management Facility – Recycling Center, Located at 4545 N. Lamb Boulevard, North Las Vegas, NV 89081 (APN: 140-06-610-023)

Vice Chair Strickland declared the public hearing open.

Walter Ross, environmental health supervisor/engineer, and Dante Merriweather, environmental health specialist II, spoke relative to this matter. Mr. Ross said that EK Recycling has met all requirements for a Recycling Center as specified in Section 4 of the Regulations governing Recycling Centers.

Staff recommends approval based on conditions as outlined in the memorandum and a final inspection. Rolando Posada of EK Recycling and Petya Balova of LEA Engineering were present to answer questions of the Board.

Vice Chair Strickland asked the applicant if he understood and agreed to the conditions as outlined in the memorandum; Mr. Posada responded affirmatively. The facility will recycle metals.

Vice Chair Strickland asked if anyone else wished to testify on this item. Seeing none, she closed the public hearing.

A motion was made by Member Crowley to approve the application with the conditions as outlined; seconded by Member Hardy and was unanimously approved.

2. **Memorandum #21-09:** Application for Approval for Silver Dollar Recycling, LLC to Operate a Solid Waste Management Facility – Recycling Center, Located at 3870 Losee Road, North Las Vegas, NV 89030 (APN 139-12-104-011)

Vice Chair Strickland declared the public hearing open.

Walter Ross, environmental health supervisor/engineer spoke relative to this matter. Mr. Ross said that Silver Dollar Recycling, Inc. has met all requirements for a Recycling Center as specified in Section 4 of the Regulations governing Recycling Centers.

Staff recommends approval based on conditions as outlined in the memorandum and a final inspection. Cliff Vellinga of Silver Dollar Recycling and Tom Davis of Justice & Associates were present to answer questions of the Board.

Vice Chair Strickland asked the applicant if he understood and agreed to the conditions as outlined in the memorandum; Mr. Vellinga responded affirmatively.

Vice Chair Strickland asked if anyone else wished to testify on this item. Seeing none, she closed the public hearing.

Member Crowley asked how financial assurance is determined for closure and suggested staff bring the information back to future meeting. Mr. Vellinga said that he had to determine how much material was on site, and if the facility were to vacate the premises, what the expense would be to remove the materials and clean up the land – buildings would remain intact. Cost is calculated and a bond would be given to the submitted sufficient to cover those expenses.

Mr. Ross said cost estimates vary with facility and scenarios. Each business has a different financial assurance mechanism, such as a bond. Financial assurance must be in place prior to the issuance of the permit.

Scott Weiss, director of administration, said staff is looking at updating the financial assurance process, including a business' processes over time, and financial assurance could increase or decrease – all costs should be consistent with today's dollars. Environmental health staff is providing a list of all permitted facilities to Mr. Weiss, including financial assurances and when determined, to ensure all information is up-to-date and consistent with current operations.

Glenn Savage, director of environmental health, said at least once a year permit holders will work with their inspector to update the financial assurance documents.

A motion was made by Member Crowley to approve the application with the conditions as outlined; seconded by Member Fairchild and was unanimously approved.

3. **Memorandum #22-09:** Application for Approval for JACO Environmental to Operate a Solid Waste Management Facility – Recycling Center, Located at 2711 E. Craig Road, Ste. C&D, North Las Vegas, NV 89030 (APN 139-01-301-002 ptn)

Vice Chair Strickland declared the public hearing open.

Walter Ross, environmental health supervisor/engineer, and Arta Faraday, senior environmental health specialist, spoke relative to this matter. Mr. Ross said that JACO Environmental has met all requirements for a Temporary Permit to Operate a Recycling Center as specified in Section 4 of the Regulations Governing Temporary Permits To Operate Solid Waste Disposal Sites. JACO Environmental is the first solid waste facility to receive a temporary permit.

Staff recommends approval based on conditions as outlined in the memorandum and a final inspection. Mason Joseph, representing JACO Environmental Inc., was present to answer questions of the Board.

Vice Chair Strickland asked the applicant if he understood and agreed to the conditions as outlined in the memorandum; Mr. Joseph responded affirmatively.

Four categories had not been complied with at time of application. Mr. Joseph said all paperwork has been submitted; the only outstanding piece is the financial assurance will be submitted once the application is approved.

The facility is currently leasing the land where the business is located. The operations will move to a larger facility on the same property around the first of the year – the lease agreement has been signed. A full permit will be sought once the move is complete. As no special use permit was required, the City administratively approved the application – operations will be completely indoors.

Member Weekly would like to have seen all items prior to administrative approval. He said the business could have better landscaping outside the facility, particularly around the buffer by the street.

Vice Chair Strickland asked if anyone else wished to testify on this item. Seeing none, she closed the public hearing.

A motion was made by Member Crowley to approve the application with the conditions as outlined; seconded by Member Fairchild and was unanimously approved.

III. REPORT / DISCUSSION / ACTION

1. Memorandum #23-09: Contract with Medical Resources Staffing Services

Scott Weiss, director of administration presented this item and noted the NRS citation on the memorandum should read 332.112 (2). Temporary staffing may be necessary due to demands of the H1N1 influenza outbreak and vaccination campaign. The district currently contracts with Medical Resources Staffing and the existing agreement was amended to accommodate for H1N1 planning purposes. Ordinarily this type of contract would go out for bid, but due to the federally declared public health emergency, staff was able to sign a contract and bring the information to the Board for acceptance. The budget for this program is under phase III of the Public Health Emergency Response (PHER) grant, which was just approved, which is designated for implementation of mass vaccination programs.

Medical Resources Staffing placed a newspaper add to recruit RNs. We do not have an exclusive agreement with this company as we may recruit staff from other agencies as the need arises. Bonnie Sorenson, director of clinics & nursing services, reported that fifty RNs have already been recruited. We are requesting drug screens and background checks to be performed on each recruit. This recruitment affords nurses in the community the opportunity for additional employment. Nurses are not prohibited from working with other agencies during their off-hours at hospitals/clinics.

Vice Chair Strickland thanked Mr. Weiss for the information noted that the report was accepted.

2. Petition #31-09: Approval of a Revised Voluntary Unpaid Furlough Program for Employees of the Southern Nevada Health District, Effective through June 30, 2010

This item was originally approved by the Board in April 2009 as a cost savings measure. A revised program is coming back to the Board for consideration to be consistent with recent changes to NRS.

Since the program was implemented the District has seen savings of approximately \$9,000 (**attachment #1**). The request is to extend the program through June 30, 2010. SB243 allows for PERS contribution to be maintained up to 96 hours. The program needs to be revised to reflect this amendment, in addition to increasing the number of hours staff may request during the fiscal year. The intent of SB243, under Section 4, allows employees to take up to 96 hours

of furlough leave and be held harmless, whether in the case of mandatory furloughs at the state level, or voluntary furloughs at the local level, to help local jurisdictions with financial needs.

Member Weekly inquired about possible implementation of a voluntary separation program. Angus MacEachern, human resources administrator, reported that staff has looked internally at the number of years of service credit employees have versus cost of replacement, and there is no solid number available at present. Potential savings are incumbent upon an individual's status of retirement – an employee's retirement is based on the highest salary over the last thirty-six months. Further loss of institutional knowledge poses a major loss to the district – training replacements could be very expensive. Design of a potential program is critical to ensure the District does not incur extra costs. If the District were to consider a voluntary separation program, mechanisms will be in place to address former employees and potential re-employment on a contractual basis.

Furlough leave is subject to approval and cannot result in a negative impact on services. All job classifications have a clause that under emergency conditions staff may be called back to work and be reassigned duties due to the nature of the emergency.

A motion was made by Member Fairchild to approve the revised voluntary furlough program as submitted; seconded by Member Boutin and was unanimously approved.

3. Receive Report from the Replacement Facility Committee; Direction to Staff

Member Jones reported the Replacement Facility Committee met on September 17th. Previously the Board approved moving forward with obtaining engineering plans for the new facility to be "shovel ready" in anticipation of any stimulus funding. The architects reviewed cost saving measures, including a new location or structural changes. Jeff Gerber and David Moss, architects from PGAL, noted that the current replacement facility yields \$81.7 million in total project costs. The main problem with the current location is maintaining operations during construction, which adds to the project expense. A significant portion of the expense is protecting for risks that would potentially be in place to protect the public, including off-site parking for patrons and staff, and safe ways to construct a building while the public is on site. Discussion about potential new locations ensued, which will allow for faster construction and reduced costs.

Member Barlow noted that staff was very concerned about construction costs at the last committee meeting. Staff also took into consideration the Board's direction to receive information from each jurisdiction regarding available land and facilities to offset the cost of the building. Mr. Weiss said the district does not have the ability to generate debt, we would need to work with the County for a bond. Currently the district has a bond reserve for replacement building expenses, which would offset the total bond amount. Originally the projection was fifteen years of County-funded support, and the district would pay back the debt service for fifteen years. The last calculation with cost increases showed an increase to twenty-two years of county-funded support. Following the last committee meeting staff ran new projections, as well as figuring in potential Build America bonds allowing for reduction in cost of bonds, based on estimates the fund balance would allow the district to fund the debt for seven years and the county would need to supplement the debt service for the next thirteen years. No other jurisdictions currently are contributing to the expense of the new building, other than monies collected through property taxes.

Member Barlow recommended a parcel in the Enterprise Park, at Lake Mead and Martin Luther King, as a potential new location. Maps were displayed of Enterprise Park (**attachment #2**).

Parcel 14, designated as "Urban Chamber," is being offered as a potential location by the City of Las Vegas, which is only 2.5 miles from the current main facility. A widening and landscaping project for Martin Luther King Blvd. will be completed soon, due to the large amount of commuter traffic; bus lines also run along the boulevard.

The project cost could be reduced to \$69.4 million, including a contribution to land costs projected at \$6.8 million. The timeframe for the project would also be reduced to fourteen months down from the original thirty-three months. Square footage costs would be reduced 10% as well; however there could be additional savings of 20-30% due to reduction in construction costs in today's dollars.

If the main facility were to move to this proposed location, potentially the clinic at Lake Mead and McDaniel could be relocated to this new location, saving approximately \$200,000 annually in lease expenses. Additionally leased space at the 400 Shadow Lane building would no longer be necessary as staff would be relocated back to the main facility, which is another \$500,000 in annual savings. In total the district would be looking at a potential \$20.7 million in savings with the relocation of the main facility.

Member Barlow noted he presented this idea to the Mayor and City Council and they are supportive of this proposal to be partners with the health district and share the expense of a new building by making land available. This change would require county approval before plans could go forward. He hopes that the other jurisdictions would also be able to provide assistance in support of the regional health district and board, versus having the county be responsible for the entire project. The City is ready to move forward if the Board and the County agree with the proposed changes.

Dr. Sands said the main facility is but one component of the district's facility program – a central main facility for administration and services is key, but the district will continue to operate public health centers and offices in outlying areas to best serve the needs of the community. The most mitigating need presently is replacing the main facility, as it does not meet today's standards and we have outgrown the capacity for which it was designed.

Mr. Weiss said that from a process standpoint, if the Board agrees with the changes, staff will work with Real Property Management and County Management to provide updated figures and ensure there is support from the County Commission for funding contribution, as well as the land contribution from the City of Las Vegas. Once approved, the project will need to go to Debt Management for consideration as well.

Member Jones suggested that an agenda item be brought forward to address the change of location. Member Fairchild commended the City of Las Vegas for stepping up to the plate in these difficult economic times. She also commended staff for the recent updating of the Clemens Room. Member Weekly also commended Members Jones and Barlow for their creative efforts in moving the replacement facility forward. He encouraged Board members to do all they can to help the health district – the health district is a first responder. Vice Chair Strickland also commended the City of Las Vegas for offering land to the health district and noted the spirit of cooperation shown.

A motion was made by Member Weekly to follow the Committee's direction and agendize a Board item for further discussion and potential action; seconded by Member Fairchild and was unanimously approved.

Member Weekly asked to be excused from the meeting and complimented Vice Chair Strickland for her performance in chairing the meeting.

Dr. Sands referenced the handout before the Board, which provides the information sought regarding space needs, as requested at the August Board of Health meeting. The district would like to continue partnerships with each jurisdiction and develop public health centers in different regions of the county to ensure easy access to needed services. The district does offer limited services in both Mesquite and Laughlin. The Henderson Public Health Center serves the southeast region, including Boulder City. The Laughlin office offers environmental health services only, as well as health cards.

4. Receive Report on FY10 Budget Reductions; Direction to Staff

Dr. Sands reported revisions to the budget approved in March were made as a result of the 2009 legislative session and the subsequent reallocation of property tax revenue in both Clark and Washoe Counties to the state general fund. Staff has worked diligently to restructure programs in a tiered approach to accommodate the loss of property tax funding. Dr. Sands recognized staff for their efforts in generating cost savings and finding ways to maintain services to the community.

Mr. Weiss presented a PowerPoint on the lease allocation breakdown, cost saving activities and FY10 budget reductions impact (**attachment #3**). He also expressed his gratitude to division directors and staff for working together unitedly with this difficult task. The impacts were done with a realistic approach, however as situations arise, any changes will be brought back to the Board.

Mr. Weiss briefly shared information regarding the lease allocation and space needs. The City of Mesquite offered space at a reasonable rate for office space at the hospital. Clark County also renegotiated the lease for the Cambridge Community Center, which is at a much lower rate. Maps for each individual location were also provided.

In preparing the FY10 budget staff developed a tiered approach to budget reductions in anticipation of declining revenues for future fiscal years, which resulted in \$1.6 million of pre-identified reductions in tiers I-III. With the passage of AB543, the district ultimately faced a loss of almost \$3.2 million in funding. Cost saving activities implemented to date include:

- FY10 supply budget reduced by 5%
- Initiation of analysis of all health district programs and a tiered reduction plan of cuts based on the projected impact on public health services to the community
- Initiation of a review process to approve filling vacant positions and/or creating new positions – currently there are 46.5 open positions and a vacancy rate of 7.8%
- Implementation of alternate work weeks and schedules to reduce overtime – current YTD savings of \$45,910; voluntary furlough program – current YTD savings of \$8.639; increased use of online training to reduce payroll and travel expenses
- Full review of all facility leases – negotiated 17.8% reduction for the Spring Valley location
- Additional collaboration opportunities – UMC Laughlin will provide immunization services for health card applicants in Laughlin
- Planned implementation of paperless Board of Health meetings
- Replacement of local printers with multi-function printers, generating \$4,000 monthly in maintenance and supply expense; staff has also been asked to print in grayscale
- Investigating ways to reduce record storage and/or maintenance costs by converting to an electronic management system

- Review of energy usage, including temperature adjustments at each facility and looking at NV Energy's rebate program

It is anticipated that property tax valuations will be down 10-12% for the coming year, and possibly even higher. FY11 budget reductions will even more drastic.

As environmental health is self-sufficient, the division was not included in the program impact evaluation. For the administration, community health and nursing divisions the primary cuts were to travel, training and reduction of overtime. All vacant positions have been defunded as well, resulting in \$800,000 cost savings. Immunization inventory will be kept at a lower level, to be more consistent with the demands for vaccine in past years and due to the fact that some vaccines are widely offered in the community – if demand increases vaccine will be acquired immediately. Participation in health fairs, program and client incentives including for outreach activities, redistribution of job duties, reduction of x-ray costs, reduction in remodels, elimination of twenty-five district cell phones and freezing the technology refresh program round out other budget reduction activities. Budget reductions per division equate to: Administration - \$1,733,794 (55%); Nursing - \$1,106,016 (35%); and Community Health - \$312,197 (10%). Total reductions from the FY10 budget amount to \$3,152,005.

The Board commended staff for the reductions implemented as well as cost savings efforts. Dr. Sands also thanked staff for their willingness to make changes and sacrifices. With all budget reductions in place, services must maintain at current levels – we are unable to take on new projects at this time unless another program is reduced or eliminated if no new funding sources are available. If the budget situation continues to worsen, other cost containment strategies may need to be considered, such as offering some services on certain days of the week and not others, or reducing the number of clients served in some programs. The district will receive funding for H1N1 activities, but restrictions may prevent their use to sustain infrastructure. An announcement for available funding from the Recovery Act will assist with chronic disease and health promotion efforts if we are successful in securing this grant.

Additional cuts may be necessary dependent upon property tax valuation, and any potential legislative action. Seeking other funding opportunities is critical to maintain the services we provide to the community.

Member Boutin suggested appointing a committee to review jurisdictional budget cuts and contingency plans. The City of Henderson opted to avoid cuts to services, but reduced employee incentives, such as elimination of travel, tuition reimbursement and reduction to cost of living adjustments. Dr. Sands said the district has been monitoring budget activities at the local level and how reductions are addressed – the voluntary furlough program was instituted based on its success enjoyed in other jurisdictions. Mr. Weiss noted that the nursing division is submitting an application for a Healthy Start grant, which will provide much needed funds for that division. Service levels are consistent even with the budget reductions; however staff may need to come back to the Board for direction if the economic situation continues to plummet, resulting in the need for more drastic measures.

IV. PUBLIC COMMENT

Public Comment is 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.

Vice Chair Strickland asked if anyone wished to address the Board. Seeing none, she closed the Public Comment portion of the meeting.

V. HEALTH OFFICER & STAFF REPORTS

Safe Injection Practices Campaign

Nevada State Health Division (NSHD) had submitted a grant application to CDC in partnership with UNLV and the health district to receive funding to evaluate a safe injection practices campaign in Nevada. The award was approved in the amount of \$250,000, and the bulk of the award will go to UNLV for the evaluation efforts. Two months ago there was no financial support for this program and today there is close to \$1 million in funding to promote this important campaign, including the earmark with support from Senator Reid to assist in our ongoing response to the hepatitis C outbreak. The Safe Injection Coalition also received funding from the CDC Foundation to help produce and develop materials in piloting and implementing a safe injection practices campaign. Dr. Sands will keep the Board informed as the project progresses.

Immunization Program Update – Bonnie Sorenson, Director of Clinics & Nursing Services; Veronica Morata-Nichols, Public Health Nurse Manager

Dr. Sands invited Bonnie Sorenson, director of clinics & nursing services, and Veronica Morata-Nichols, public health nurse manager, to update the Board on the immunization program efforts to raise our immunization rates in light of continuing funding cuts from the state. Dr. Sands recognized Members Barlow and Weekly for their support of the immunization program and providing outreach opportunities for the underserved populations in their respective areas. Recently Nevada moved to 46th in the nation in terms of childhood immunization rates.

Ms. Sorenson echoed her appreciation to Members Barlow and Weekly for their support. She said that staff is actively pursuing numerous grant opportunities. Family planning received \$170,000 applied to the Title X grant to provide services to the community. This is especially important as some women are finding themselves with no insurance for the first time and our services are greatly needed by the community. The United Way provided \$92,000 for an immunization initiative with 100 Black Men, who also received \$92,000.

Back-to-School events were very successful and approximately 10,000 students were immunized by the health district. Ms. Sorenson said in terms of Nevada's ranking of 46th nationally is based on data that is two years old. Last year providers had an immunization rate of 62% in their offices – this year that number fell to 56.8%. People do not have insurance and are not visiting doctors and receiving immunizations. We need to continue promoting immunizations as best we can with the limited resources we have.

Currently staff is seeing 200 people daily for seasonal flu vaccine. The community is also seeking the H1N1 vaccine, which is not available at present. Staff recently completed the campaign to immunize middle school students with the Tdap vaccine in partnership with Clark County School District, which result in a 90% completion rate. Taking vaccines into the schools has a positive impact and yield tremendous results. Two nurses are auditing day care center records and finding that there is lack of enforcement of immunization laws – if a child's immunizations are not current they are to be excluded from day care. Last year the day care immunization rate was 29% and this year the rate has increased to 69.8%.

Ms. Morata-Nichols reported that October 24th is being celebrated as "Make a Difference Day" and staff, along with 100 Black Men of Las Vegas, will coordinate a Shots 4 Tots event at Lorenzi Park (**attachment #4**). The target population will be ages 6-months through 4 years of age, and caregivers of infants less than 6 months of age. H1N1 vaccine will be offered that day, depending

upon availability. All immunizations administered at this event will be free of charge due to the grant received from the United Way. Staff will walk the neighborhood on October 22nd and 23rd in preparation of this event. Neighborhood walks yield extremely positive results. All Board members are invited to attend this important event. Newsweek and USA Today have been invited to this event. Penn and Teller are hoping to attend.

Ms. Sorenson said stimulus money was made available for vaccine purchase in Nevada in the amount of \$917,000 for a two-year period. Vaccination shortfalls are in the fourth Tdap, Prevnar and Hib, which are due when children are 18-months old. Staff is using the stimulus money for campaigns and vaccine purchase to improve the immunization rate for this category, which will then provide free vaccination for these particular immunizations.

NSHD recently notified staff that as of January 1st the district's allocation of the state's federal immunization grant budget will be reduced by \$250,000. This affects 2.5 FTEs assigned to the VFC program in the nursing division. Dr. Sands is working with the state to try and resolve this issue. All three local health authorities in the state were affected by this announcement. Over the last three years federal funds received by the district's immunization program has decreased from over \$900,000 to just over \$500,000 due to more of the federal grant dollars remaining at the state level. The state provides services to the rural and frontier areas, as well as the quality assurance component, and provides support to the different immunization coalitions.

Ms. Sorenson noted that the health reform package there will be money to fund home visitations programs for evidence-based practice models – the district participates in the nurse-family partnership program and some monies could be used to fund these positions. The informatics position has been filled and will be in place beginning in January, which will assist in looking for available grant dollars.

Vice Chair Strickland asked if there is a penalty for day care centers for failure to enforce immunization requirements. Ms. Sorenson said a license could be revoked. Forums for day care providers were held in cooperation with environmental health staff, with over 150 attendees. It was stressed that their licenses could be in jeopardy for not enforcing this important requirement. Each day care facility also holds a business license and Dr. Sands encouraged Board members to address this issue in their respective jurisdictions. Staff will also alert business licensing of a day care's failure to comply with statutory requirements.

Member Fairchild noted the importance of this information and it was given at the request of Board members. She expressed concern that two-thirds of the Board have left the meeting and noted her frustration. She asked if reports could be made sooner or ensure that Board members stay for the entire meeting. Mr. Smith, legal counsel, noted that quorum was lost when Member Boutin left the meeting some twenty minutes earlier. Dr. Sands noted the information is captured in the minutes for Board members to review, but that is no substitute for a face-to-face discussion.

Novel H1N1 Influenza Virus Update: John Middaugh, MD – Director of Community Health

Dr. Sands said we will continue to provide updates on Novel H1N1 Influenza in southern Nevada, as well as funding. Staff is transitioning from a planning committee to an incident command structure, as some vaccine could be available in the next two weeks.

Member Barlow noted he was late for a senior health fair and asked to be excused. He said he will read the update in the minutes.

John Middaugh, director of community, said H1N1 is widespread over the country; New York City has over 1 million affected with virus alone. The National Association of Colleges and Universities

reported that more than half of the 162 participating institutions have reported outbreaks. The good news continues to be that the illness is mild and the hospitalization rate is low. The virus continues to be stable since the initial mutation in April, and remains sensitive to the antiviral agents. Most older adults are still spared by the virus. Over 85% of adults over the age of 60 have existing antibodies protecting them from the new H1N1 strain.

The weekly reports will provide more comprehensive information on the occurrence of the virus in the community. Staff is working diligently to discuss and come to a uniform agreement with the state on all policy issues, including school closure and use of facial masks, as well as vaccine distribution plans. The state and local health officers met this week and unanimously agreed to adopt the CDC's new guidelines on school closure. The partnership with the school district continues to excel in terms of electronic communication with parents, staff and students as well as implementation of vaccine clinics.

Seasonal flu vaccine is being administered and we are encouraging the community to be immunized right away – vaccine is plentiful. Once the H1N1 vaccine is available, clients can receive both vaccines at the same time. The first bolus of H1N1 vaccine, FluMist, will be in Nevada the first week of October – there will be 3 million doses available nationally and Nevada will receive 26,000 doses of which between 15,000 and 18,000 doses will come to the health district. 46 million doses will be available nationwide in mid-October. The health district will focus primarily on healthcare workers and first responders with our first allocation of vaccine. Once additional shipments arrive, we will target the other high-risk groups. We have no knowledge when the additional shipments will arrive. The largest challenge will be to educate the community about the targeted high-risk groups and the limited vaccine amounts initially. Eventually there will be ample vaccine for whomever is seeking it. Clinical trials are showing that one dose is showing immunity in adults; however children through age 10 will need two doses.

We continue to partner with the state health division to phase in clinics for high-risk target groups, and as vaccine becomes more plentiful we will support distribution widely to those providers who wish to administer vaccine, including pharmacies. We are hopeful that anyone who wants vaccine will be able to receive it and we'd like to vaccinate everyone.

Some early reports show the outbreak could peak in October, thereby alleviating the need for mass vaccination; other reports say it may not peak until late in the flu season. The vaccination campaign is a six-month vaccine program to ensure that we provide vaccine rapidly in anticipation of a peak in the outbreak, as well as providing a sustained vaccination effort. Even with the large number of tourists in town over the weekend for the boxing event we are not seeing a surge in illness at this time. Even those who may receive the vaccine in March or April 2010 will be protected for the following flu season.

There continues to be conflicts about use of masks and respirators. Some clinics have staff in full protective gear, which is against the current recommendation. There needs to be a comfort level with our own stakeholders, physicians, healthcare providers, first responders and law enforcement and that they trust the health district and the information we provide. Once the initial high-risk target groups have been vaccinated we will provide vaccine to anyone seeking it, pending availability of vaccine.

FluMist is a modified live virus; the injected H1N1 vaccine is an inactivated virus. There are some injected vaccines that are live viruses. FluMist cannot be used in pregnant women, children under the age of 2, or anyone with certain medical conditions. Reports of influenza in the community have been reported throughout the summer, at a higher rate than in the past and they continue to be high. Illness is mild and those infected recover rapidly. Hospitalization rates are low as well.

VI. INFORMATIONAL ITEMS

DULY NOTED

A. Chief Health Officer and Administration:

1. Monthly Activity Report, Mid-August 2009 – Mid-September 2009
2. Financial Data: Revenue and Expenditure Report for General Fund, Capital Reserve Fund and Public Health Laboratory Fund for the Month of August 2009
 - a. Grant and Agreement Tracking Report, as of September 14, 2009
3. Public Information Monthly Report, August 2009

B. Community Health:

1. Monthly Activity Report, August 2009
 - a. Swine Flu Update #8
 - b. EPIS Report
 - c. August 2009 Disease Statistics

C. Environmental Health:

1. Monthly Activity Report, August 2009
 - a. Letters of Appreciation

D. Clinics and Nursing:

1. Monthly Activity Report, August 2009
 - a. In-service calendar
 - b. Letters of Appreciation
 - c. Academic Pharmacy Magazine Article

VII. ADJOURNMENT

There being no further business to come before the Board, Vice Chair Strickland adjourned the meeting at 10:51 a.m.

SUBMITTED FOR BOARD APPROVAL

Lawrence Sands, DO, MPH, Chief Health Officer
Executive Secretary

/src

attachments

Attachment #1

A voluntary furlough shall have no effect on the following:

1. ***Terms of employment:***

- a. Performance evaluations, merit increases, or general salary adjustments;
 - b. Longevity, anniversary, or seniority dates;
 - c. Vacation and sick leave accruals during the furlough period.
2. A voluntary furlough shall not constitute a break in service.
 3. Employees will receive no compensation during periods of voluntary furlough.
 4. In accordance with Nevada Revised Statutes, ~~[employees will not receive PERS service credit during periods of voluntary furlough]~~ the District will report, and the employee shall receive, PERS service credit during periods of voluntary furlough, up to the statutory annual limit of 96 hours, for all PERS-eligible service. Annual furlough leave that exceeds 96 hours is not PERS-compensable under state law.
 5. Employees exempt from overtime provisions established by the Fair Labor Standards Act must take furlough time in work day (8 hour) increments. Furlough hours may not total more than 40 hours in one bi-weekly pay period.
 6. Non-exempt employees shall be approved for furloughs of not less than ~~[four (4) hours]~~ two (2) hour increments. Furlough hours may not total more than 40 hours in one bi-weekly pay period.
 7. Employees may choose to take holidays as unpaid furlough days.

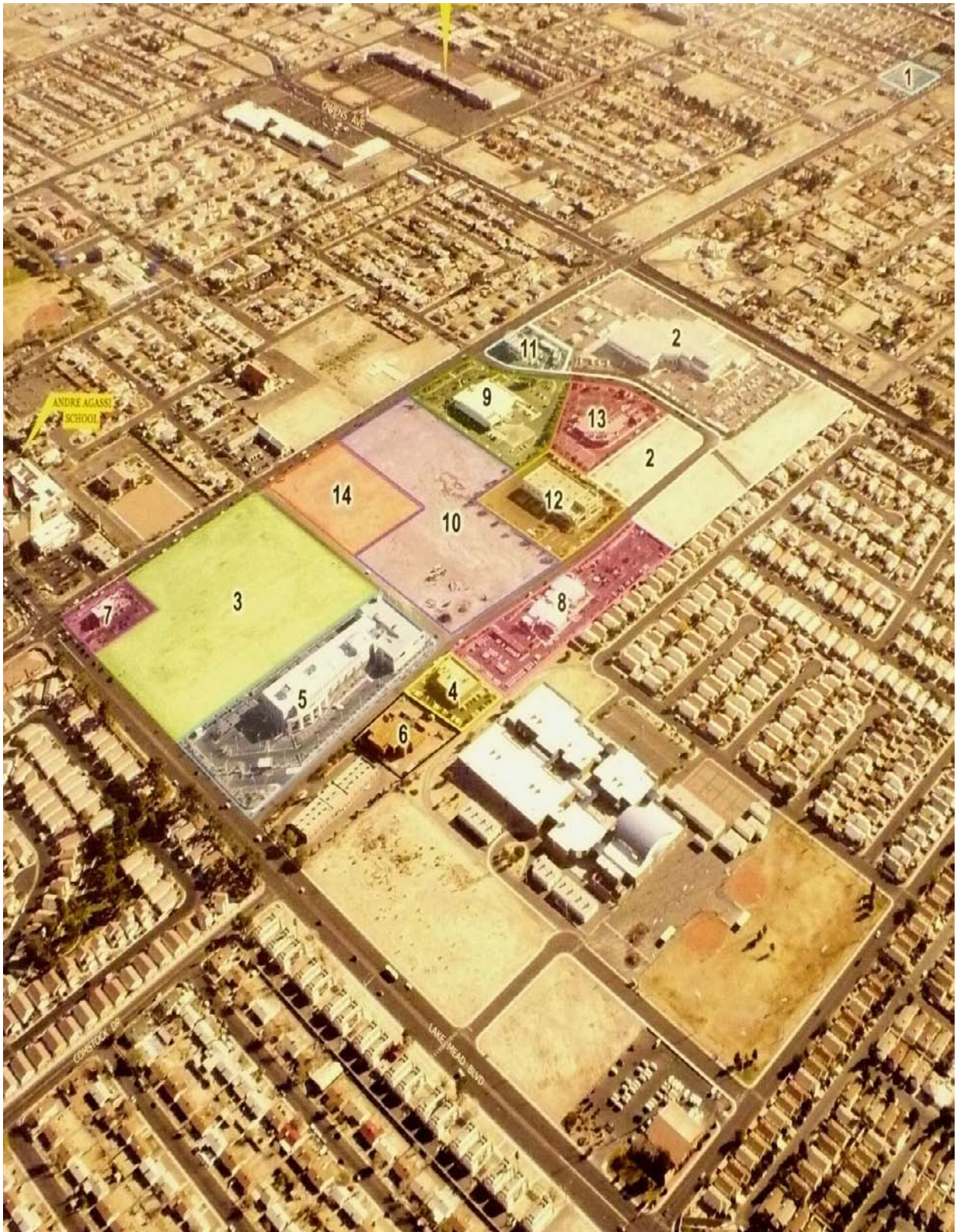
IV. PROTOCOL:

1. The use of voluntary furlough shall not result in the need for overtime from the employee or other employees.
2. Employees in leave of absence without pay status will not be allowed voluntary furlough.
3. Employees with accrued vacation balances in excess of maximum accrual balances may not take voluntary furlough until such leave balances are at or below the maximum amounts allowed.
4. Employees may replace scheduled paid vacation time with unpaid furlough upon request.
5. ~~[Employees in FMLA status are not eligible for voluntary unpaid furlough]~~ Employees may request the use of voluntary furlough in conjunction with Family Medical Leave Act (FMLA) usage, unless in leave of absence without pay status. Voluntary furlough for a purpose covered by the Federal Family Medical Leave Act (FMLA) shall be recorded as FMLA usage.
6. SNHD staff will provide reports to the Board of Health no less than annually detailing the savings from this program.

V. REFERENCES:

Board of Health Approval 4/23/2009; Related SNHD Policies; *Collective Bargaining Agreement*, Article 27, Section 4 – Vacation Usage; *Personnel Code*, Section 84 - Leaves of Absence

Attachment #2





Lease Allocation Breakdown

Maps of Public Health Centers/ Satellite Locations

As of Aug. 31, 2009

SOUTHERN NEVADA HEALTH DISTRICT

LEASE ALLOCATION BREAKDOWN

As of August 31, 2009

LOCATION	SQ FT	RATE PER SQ FT	LEASE TERM DATE	ALLOCATION	SPECIALIZED SPACE USE	SQ FT
North Las Vegas QCA Management 1820 E Lake Mead	9544 \$	1.53	2/28/2010	Nursing 23% Nursing 32% Nursing 26%	Exam Rooms Office Space Common Area Rest Rooms, Closets, Etc.	2150 3037 2436 1921 <u>9544</u>
East Las Vegas BJS Sunrise 560 N Nellis Blvd	13854 \$	1.50	12/31/2009	Nursing 7% Nursing 16% Nursing 9% EH 25% HC and VR 43% HC and VR 43% HC and VR 43%	Exam Rooms Office Space Common Area Exam/Movie Rooms Office Space Common Area Rest Rooms, Closets, Etc.	1016 2182 1225 3417 1494 916 568 3036 <u>13854</u>
400 Shadow	20168 \$	2.03	1/31/2011	OCDHP 13% EH 28% Nursing 30% EPI 29% Nursing 30%		2603 5654 1263 5793 4855 <u>20168</u>
Spring Valley	5149 \$	1.68	12/31/2011	EH 100%		<u>5149</u>

Henderson	23200 \$	2.37	6/30/2016 EH 18.5%		4292
Coast Center			Nursing 5%	Exam Rooms	1200
			Nursing 25%		5760
520 E Lake Mead Dr			HC & VR 25%		5800
			CDC BIO & PHEP 26.5%		<u>6148</u>
					<u>23200</u>
Laughlin	1600 \$	2.10	12/31/2010 EH 40%		640
El Mirage			HC 25%		400
3080 S Nedles Hwy			Nursing 35%		<u>560</u>
					<u>1600</u>
Mesquite	2000 \$	0.66	8/31/2014 EH 40%		800
MMC of Nevada			HC & VR 30%		600
830 Hafen Lane			Nursing 12%		240
			Nursing 18%	Exam Rooms	<u>360</u>
					<u>2000</u>
Cambridge					
Clark County	1444 \$1.00/per year		8/31/2014 Health Card 100%		<u>1444</u>
3900 Cambridge					



LEGEND:

EPI – Epidemiology

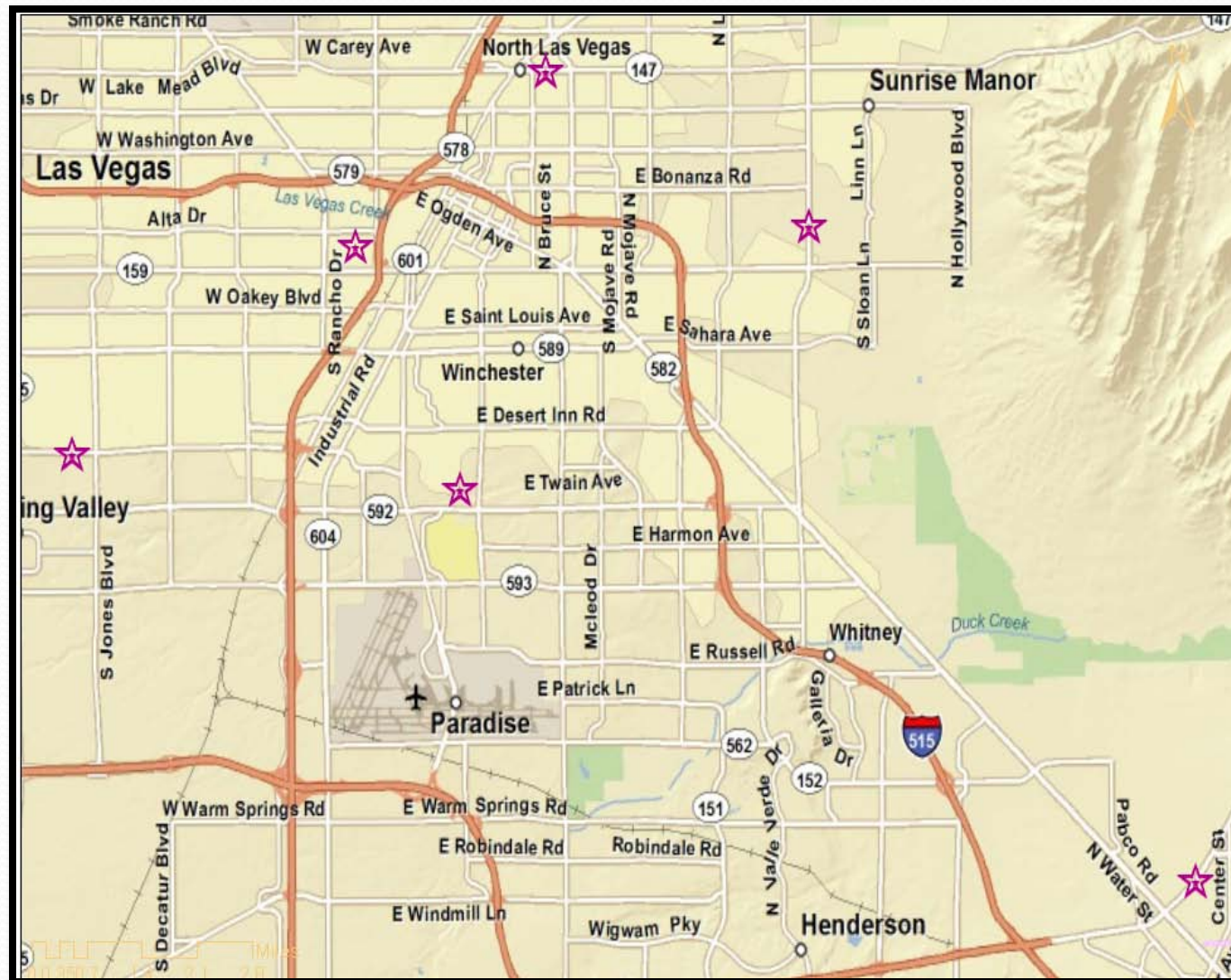
EH – Environmental Health

HC – Health Cards

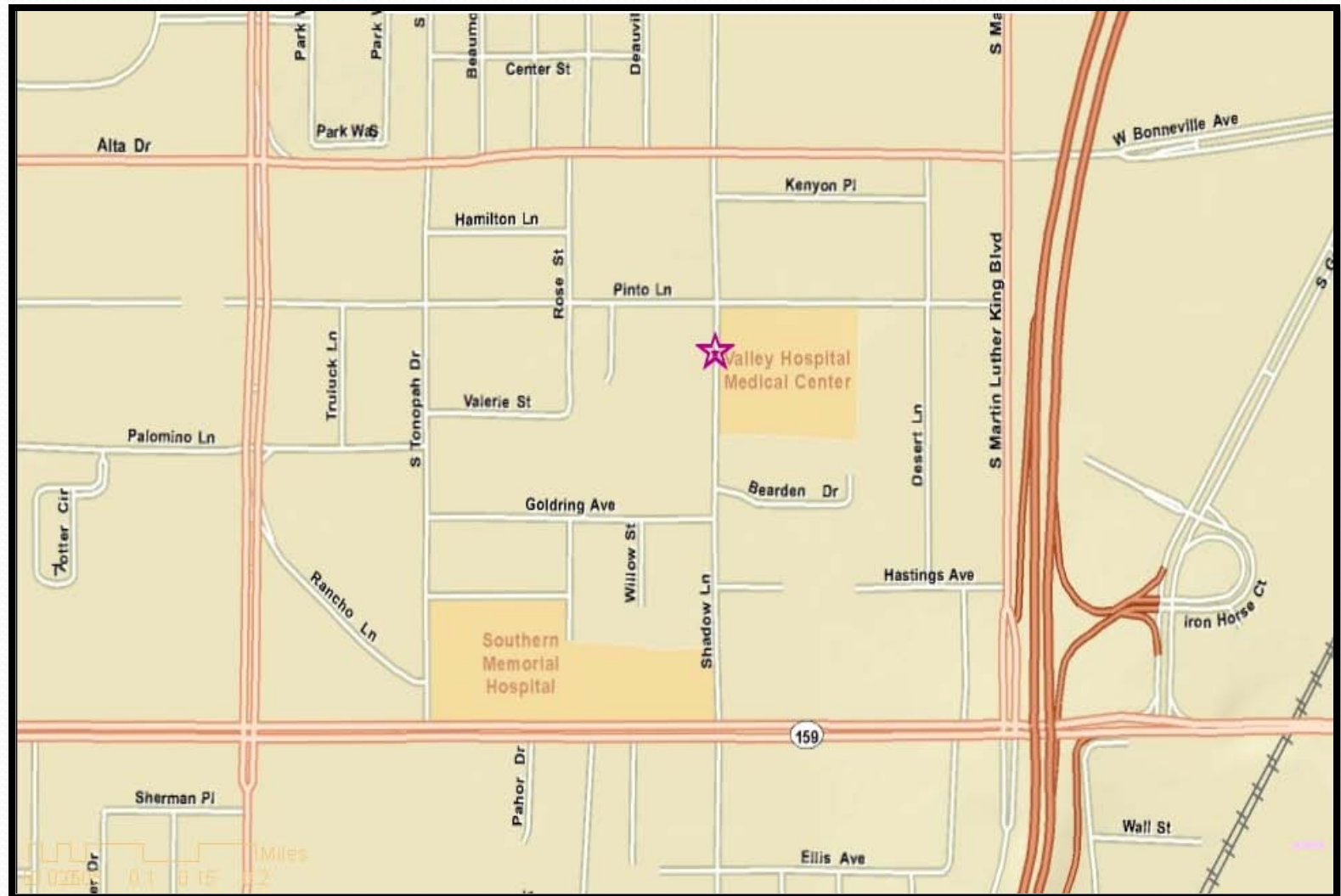
PHEP – Public Health Emergency Preparedness

VR – Vital Records

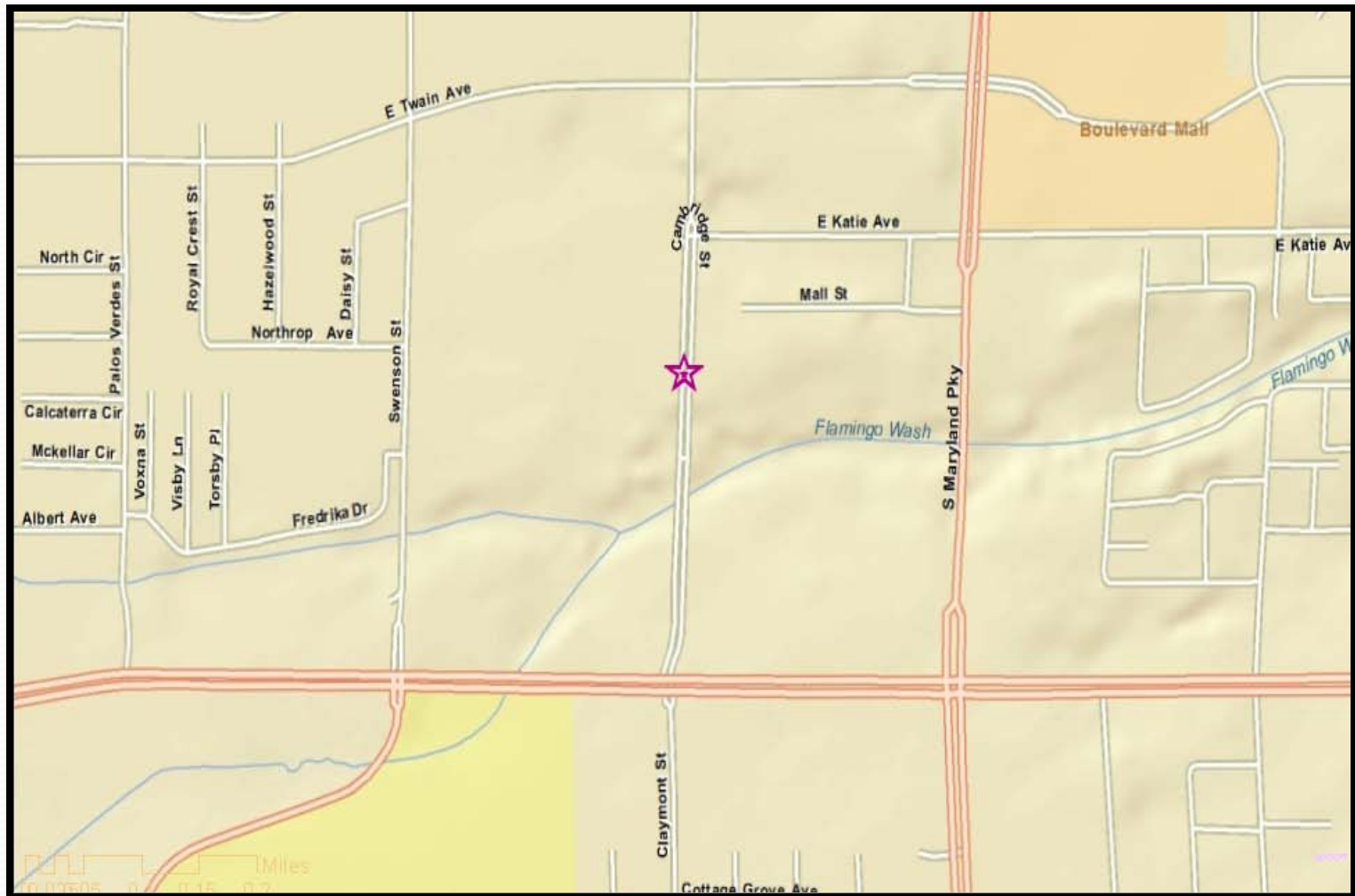
Southern Nevada Health District Locations



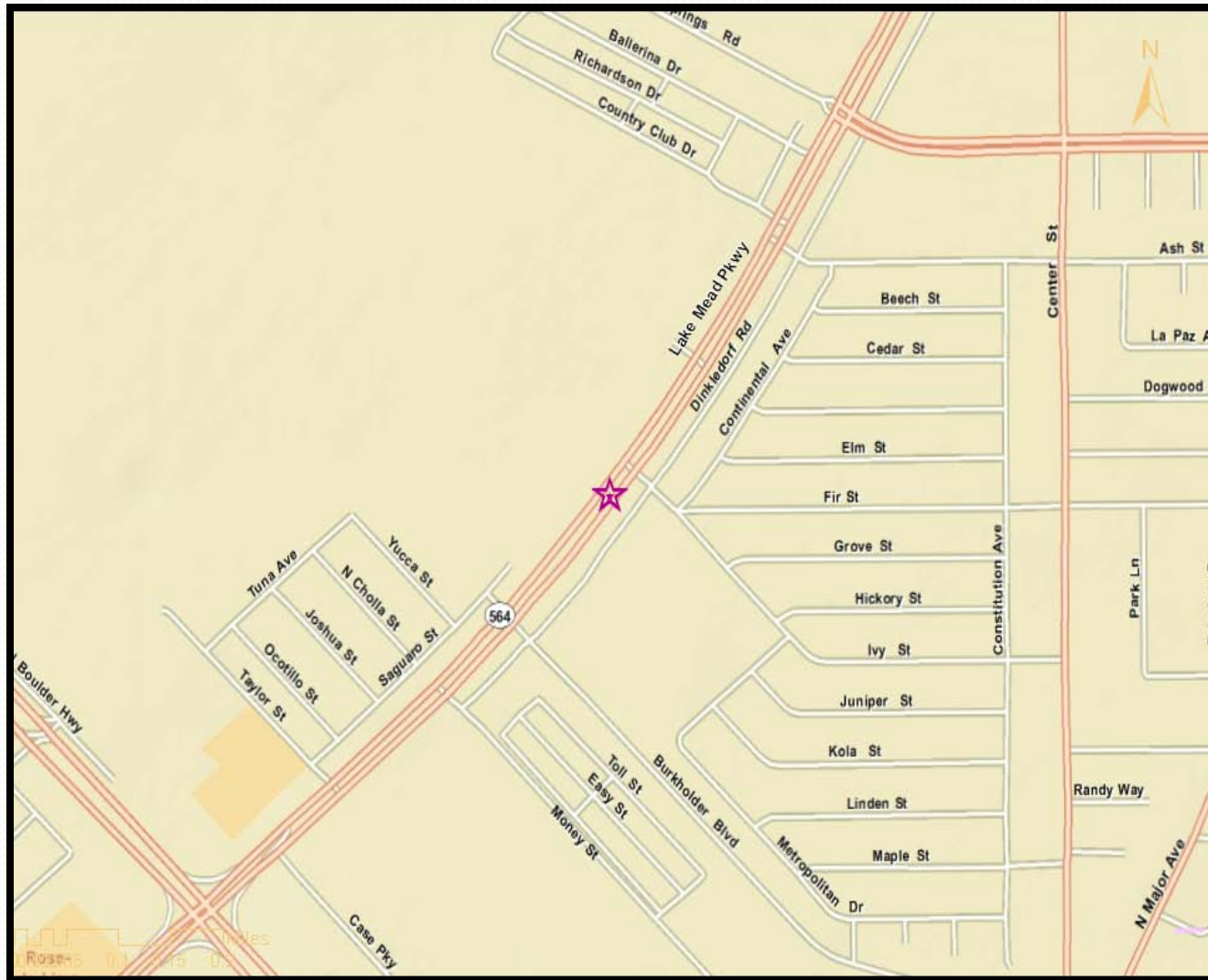
Ravenholt Public Health Center



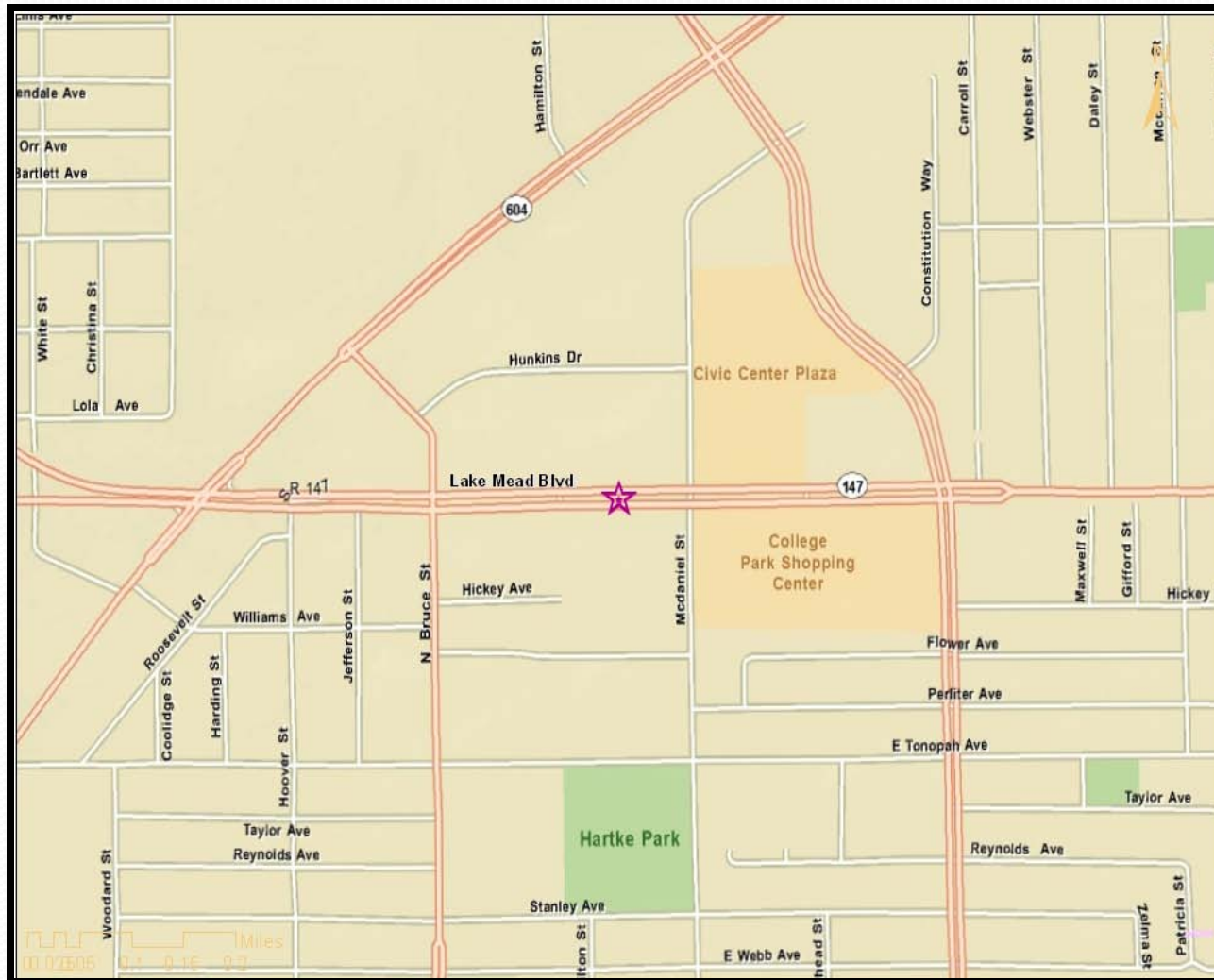
Cambridge Community Outreach Center



Henderson Public Health Center



North Las Vegas Public Health Center



Cost Saving Activities

Southern Nevada Health District
September 2009

Progress of Cost Saving Activities

- Reduced FY10 supply budget by 5 percent.
- Initiated analysis of all health district programs and created tiered reduction plan of cuts based on the projected impact on public health services to the community.
 - During FY10 budget planning, six tiers were identified.
 - Implemented alternative budget reductions totaling \$3.2 million, which included tiers II, III, IV and V. *(The impact of reductions will be provided separately by program.)*

Cost Saving Activities (continued)

- Initiated a review process to approve filling vacant positions and/or creating new ones.
 - Process involves recommendations from the division directors, review by Human Resources and Finance, and is approved by the executive team.
 - As of Sept. 18, 2009, there are 46.5 open positions. Currently, the vacancy rate is 7.8 percent.

Cost Saving Activities (continued)

- Reviewed and instituted programs to reduce payroll costs:
 - Currently, all divisions are evaluating the use of alternate work weeks and schedules to reduce overtime. Year to date, overtime costs have been reduced by \$45,910.
 - Instituted voluntary furlough program. Year to date, staff have logged 293 hours, resulting in \$8,639 savings.
 - Initiated online training to reduce payroll and travel costs.

Cost Saving Activities (continued)

- Implemented a review process of facility leases.
 - Successfully negotiated a 17.8 percent reduction in rent at the Spring Valley location.
- Sought out collaboration opportunities.
 - Negotiated with UMC Laughlin to provide the immunization services for health card applicants in Laughlin.
- Approached the Board of Health about reducing paper use and potentially implementing an electronic system.

Cost Saving Activities (continued)

- Reviewed printer and copier costs.
 - As a result, the health district replaced local printers with multi-function printers. The cost savings is approximately \$4,000 per month, including maintenance and supply expense.
- Currently investigating ways to reduce record storage and/or maintenance costs by converting to an electronic management system.
- Continue to review energy usage.
 - Began adjusting or increasing the temperature in each facility, especially during closed hours.
 - Began researching NV Energy's rebate program to replace current lighting with more energy efficient systems.

FY10 Budget Reductions Impact

Southern Nevada Health District
September 2009

Division-Program	Amount	Impact: Consequences of FY 2010 Budget Reductions
Nursing-General	(\$20,789)	<ul style="list-style-type: none"> Majority of staff travel and training is being eliminated for staff. Impact: Opportunities for learning will need to be online, obtained locally, through third-party reimbursement or grant funded. Closely monitoring overtime using alternate work schedules to meet the needs.
Nursing-Ryan White Part A	(\$4,913)	<ul style="list-style-type: none"> Educational offerings to staff are reduced except for what is grant funded or through third-party reimbursement. Limited educational supplies for clients will be available. When feasible, will reproduce educational materials in-house or use free materials when available.
Nursing-Maternal Child Health	(\$21,785)	<ul style="list-style-type: none"> No travel and training for staff unless grant funded or required for participation in a program like Nurse Family Partnership. Will reproduce educational materials in-house when feasible and limit purchases to grant funds. No dues or membership renewals in MCH organizations. Salary savings through frozen positions. Presently writing for additional grants to supplement staffing needs.

Division-Program	Amount	Impact: Consequences of FY 2010 Budget Reductions
Nursing-Immunizations	(\$674,139)	<ul style="list-style-type: none"> Reduce the vaccine purchased directly by the District. Impact: Our inventory will be maintained at a lower level. Example: Flu is more available in the community by other organizations...less of a demand on the District. We can purchase it quickly if needed. We purchased immunization vaccines in FY 09 that were part of our FY10 beginning inventory.
Nursing-Tuberculosis (TB)	(\$256,213)	<ul style="list-style-type: none"> Reduced our subsidy for rent, food, utilities and transportation cost for clients that are indigent. Impact: We have arranged and negotiated with relatives and others to assist clients. We have shortened the time this incentive is available once the client is not contagious. Save on travel by using more video phones for DOT (Direct Observed Therapy). Cost sharing of outbreaks with insurers, institutions or business involved.
Nursing-Family Planning	(\$30,486)	<ul style="list-style-type: none"> Reduced travel/training to only what is covered by the grant. Reduced Family Planning services to three locations, which additionally reduced the costs of maintaining the clinic location (Spring Valley) for supplies, birth control methods, etc.

Division-Program	Amount	Impact: Consequences of FY 2010 Budget Reductions
Nursing-Sexually Transmitted Disease (STD)	(\$2,050)	<ul style="list-style-type: none"> • Reductions taken in travel and training not covered by a grant. We have brought a trainer on-site to reduce costs and provide education to more staff • Moved the on-site lab to a less complex lab license requiring a less expensive license and staffing model that will produce salary savings. • Moved other testing to SNPHL. • Reduced MD hours in the clinic. By doing mostly urine based GC/CT testing, more clients can be seen in a shorter period of time.
Nursing-Auto-Immune Deficiency Syndrome (AIDS)	(\$87,878)	<ul style="list-style-type: none"> • Salary savings by not funding one position. Re-evaluating how many health fairs and outreach events we can participate in. Focus on more high risk venues like jails and detention centers that have traditionally produced more positive test results. Limiting overtime, using more adjusted schedules to do evening events.
Nursing-Substance Abuse Prevention & Treatment Agency (SAPTA)	(\$7,762)	<ul style="list-style-type: none"> • Reduced cost associated with X-rays, medical supplies and educational / office supplies. Staff is looking for other funding sources.
Nursing Total	(\$1,106,016)	

Division-Program	Amount	Impact: Consequences of FY 2010 Budget Reductions
Community Health-Chronic Disease Prevention & Health Promotion (CDPHP)	(\$42,011)	<ul style="list-style-type: none"> Eliminate physical activity and nutrition program incentives, an evidence-based component of behavior change programs documented to increase participation and adoption of healthy behaviors, especially among participants with the lowest personal motivation. Staff will continue to search for private and grant resources to support incentives.
Community Health-Epidemiology (EPI)	(\$122,718)	<ul style="list-style-type: none"> Eliminated funding for the vacant Epidemiology supervisor. Filling this position would expand leadership capacity for disease surveillance and outbreak response. Epidemiology Manager supervises 10 direct reports, which includes positions that would have reported to this supervisor.
Community Health-Office of Public Health Preparedness (OPHP)	(\$69,967)	<ul style="list-style-type: none"> The vacant Project Coordinator position has been unfunded from OPHP, the position was responsible for the coordination efforts of the Community Readiness Initiative (CRI) program within OPHP. The elimination of the position has moved the responsibilities of CRI planning to the PHP Planner II. Responsibility for tracking of the Points of Distribution (POD) cage inventory and design has been assigned to Administrative staff. The elimination of this position has increased the responsibilities for current staff.

Division-Program	Amount	Impact: Consequences of FY 2010 Budget Reductions
Community Health- Office of Public Health Preparedness (OPHP)	(\$71,000)	<ul style="list-style-type: none"> This funding was for IT contractual services that assist OPHP with Continuity of Operative Planning (COOP) and network security programming. The funding was moved into the PHEP grant which has decreased the amount of funds available for required travel intended to support technical assistance and planning with the State and CDC.
Community Health- Emergency Medical Services (EMS)	(\$6,500)	<ul style="list-style-type: none"> Reduction eliminated support for the annual EMS symposium and EMS week activities, limiting our education outreach to EMS providers. The symposium was an education strategy to reach EMS instructors and thereby improve the quality of care.
Community Health Total	(\$312,197)	

Division-Program	Amount	Impact: Consequences of FY 2010 Budget Reductions
Administration-Finance	(\$313,537)	<ul style="list-style-type: none"> Reduction of reserve for liability insurance claims of \$34,500. We increased our deductible and based on current actuary, we are fully funded. The following vacant positions will not be filled: Grant Analyst (\$82,806) – this position is vacant and will not be filled. We are using existing staff. Associate Attorney (\$109,301) – this position is vacant and will not be filled. We are using existing staff. Senior Accountant (\$86,930) – this position is vacant and will not be filled. We are using existing staff.
Administration-Public Information	(\$40,430)	<ul style="list-style-type: none"> Elimination of the entire travel budget will prevent staff from attending the National Public Health Information Coalition (NPHIC) Conference, the 3CMA Conference and training on website development. Conference sessions include CDC presentations and trainings as well as the latest information, updates, and communication resources related to timely issues such as the H1N1 virus. Staff will eventually be able to access training and conference materials online for use in developing communication products and strategies for the public. (\$7,700)

Division-Program	Amount	Impact: Consequences of FY 2010 Budget Reductions
Administration-Public Information (continued)		<ul style="list-style-type: none"> • Elimination of client incentives will impact outreach activities. Collateral items were purchased for district-wide outreach activities and supported the outreach efforts of a variety of district programs. Items also served to increase awareness of the health district and our services and programs. Staff members conducting outreach activities continue to have access to printed materials, including brochures, fact sheets and flyers, for distribution at outreach events. (\$23,240) • Elimination of the meeting meals and recognition awards will impact the health district's ability to conduct internal staff appreciation events related to National Public Health Week. No alternative events are planned by the public information office at this time. (\$9,700)
Administration-Health Cards	(\$104,257.00)	<ul style="list-style-type: none"> • Reduced other department supplies, such as PVC cards and ribbons. Reduced consumption of PVC cards and ribbons by instituting a new process for using temporary cards and reduced costs due to lower demand. • Reduction for X-Ray costs. Per CDC guidelines, review of symptoms to be done in lieu of X-Ray when appropriate. Cost and time savings realized by client. • Eliminated funding for vacant Health Records Assistant position due to the reduction of Health Cards volume; needs are still being met.

Division-Program	Amount	Impact: Consequences of FY 2010 Budget Reductions
Administration-Maintenance	(\$252,032)	<ul style="list-style-type: none"> • Eliminate funding for the Central Supply Assistant position that is currently vacant; workload has been redistributed to existing staff. • Reduction of overtime for Maintenance and Janitorial staff by using alternate work schedules. • Security implemented alternate work schedule (note: \$12,000/month cost savings.) • Requests for remodels have been reduced. • Reduced energy costs. We are evaluating energy management opportunities to address this reduction. This includes reviewing the NV Energy program to replace the lighting system with more efficient options. • Elimination of large construction dumpster. • Eliminated 25 cell phones department wide.
Administration-Information Technology (IT)	(\$981,038)	<ul style="list-style-type: none"> • The Technology Refresh Program, TRP, has been put on hold. IT refreshes 110 PCs a year in addition to printers. PCs will only be replaced if the cost of repair will exceed its value. • We have reduced some of the vendor contracts. IT has networked all of the copiers to provide additional printing resources. Printing to copiers is much more cost effective than printing to a printer.

Division-Program	Amount	Impact: Consequences of FY 2010 Budget Reductions
Administration-Human Resources (HR)	(\$42,500)	<ul style="list-style-type: none"> Reduced advertising for recruitment activities. Currently have an approximate 7.8% vacancy rate. The budget for employee physicals has been decreased by 35% as we no longer require physicals for new hires. The funds for new employee physicals will be utilized for special hazardous materials physicals as required by OSHA. Other savings have been generated by switching to online training programs.
Administration Total Nursing Total Community Health Total	(\$1,733,794)-55% (\$1,106,016)-35% (\$312,197)-10%	
Total Budget Reductions	(\$3,152,005)	



Shots 4 Tots Make a Difference Day

Southern Nevada Health District (SNHD) in partnership with United Way of Southern Nevada, 100 Black Men of Las Vegas and Nevada State Health Division invite you to join us for a day of "Making a Difference" in the health of your community. We can do this one shot at a time.

WHEN: Saturday, October 24, 2009
10 am until 4 pm

WHERE: Lorenzi Park, 3333 W. Washington Avenue, Las Vegas, Nevada 89107

SNHD will be giving free childhood immunizations and Novel H1N1 Influenza vaccines (subject to availability).

Our target population will be children 6 months old through 4 years of age, and caregivers of infants less than 6 months of age..

Please join us. A flyer with all the details will be forwarded as soon as it is finalized.

For contact information and questions please call:

Michelle Stanton with SNHD: (702) 759-0898

E-mail: Stanton@snhdmail.org

or

Terrence Readus with 100 Black Men of Las Vegas: (702) 759-0866

E-mail: readus@snhdmail.org

SAVE THE DATE