

MINUTES

Southern Nevada District Board of Health Meeting January 24, 2019 – 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:	Marilyn Kirkpatrick – Chair, Commissioner, Clark County Scott Black – Vice Chair, Councilmember, City of North Las Vegas
(Present)	Bob Coffin – Councilmember, City of Las Vegas <i>(arrived at 8:37 a.m.)</i> Tick Segerblom – Commissioner, Clark County Frank Nemec – At-Large Member, Physician Scott Nielson – At-Large Member, Gaming Dan Stewart – Councilmember, City of Henderson <i>(arrived at 8:43 a.m.)</i> Brian Wursten – Secretary, Councilmember, City of Mesquite
(Absent):	Nicole Brisson – Regulated Business/Industry Michele Fiore – Councilmember, City of Las Vegas Rich Shuman – Councilmember, City of Boulder City
ALSO PRESENT: (In Audience)	None
LEGAL COUNSEL:	Annette Bradley, Esq.
EXECUTIVE SECRETARY:	Joseph P. Iser, MD, DrPH, MSc, Chief Health Officer

STAFF: Heather Anderson-Fintak, Ernest Blazzard. Michelle Cintron, Emily Elzeftawy, Robert Fyda, Andrew Glass, Amy Hagan, John Hammond, Jeremy Harper, Dan LaRubio, Fermin Leguen, Joanne Rupiper, Christopher Saxton, John Shannon, Karla Shoup, Jennifer Sizemore, Herb Sequera, Mimi Ujiie, Victoria Volz, Jacqueline Wells

I. CALL TO ORDER

Chair Kirkpatrick called the Southern Nevada District Board of Health meeting to order at 8:35 a.m.

II. PLEDGE OF ALLEGIANCE

III. OATH OF OFFICE

The Oath of Office was administered to new Board of Health member Tick Segerblom, Clark County Commissioner, by Michelle Cintron, Executive Administrative Assistant.

IV. <u>RECOGNITIONS</u>

- Dr. Iser introduced John Shannon, incoming Director of Administration who started with the District on January 7. Mr. Shannon will be replacing Andy Glass, who will be retiring on February 1st.
- Jeff Quinn, Manager, Office of Public Health Preparedness, was published in the September/October 2018 edition of "Health Security". His article, *"#VegasStrong, One Year Later*", answers some of the questions regarding challenges encountered during the October 1 tragedy and outlines public health's next steps.

V. <u>PUBLIC COMMENT</u>: 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.

Mr. Brian Brundage, board member of the Nevada Highway Patrol Association, and representing that association, himself, first responders and 911 operators, asked for the Board's permission to discuss the necessity of more high-level trauma centers in the valley. Chair Kirkpatrick advised that this issue is not on the agenda, however, he was welcome to speak at the second Public Comment. The Chair added that in February the Board will be receiving education, as there are new members on the Board. Discussions will explain what a trauma center is and explain the levels. In March, discussions will occur related to the needs assessment tool.

Victoria Harding, SNHD/SEIU finds that one of the things interesting with the proposed Fee Schedule is that the District tests and vaccinates for the flu but does not provide Tamiflu to treat the flu. It also does not provide treatment for Hepatitis C. Ms. Harding understands that due to financial restraints, there are many things that the District would love to do, but is unable to do, however, these are all things to look out for. The District works with HIV, syphilis, chlamydia, gonorrhea and TB clients and will actively treat them. Ms. Harding works with the infectious diseases, which the District does not treat for. Everyone does not have the ability to get the treatment they need and Ms. Harding wonders where the role in public health falls in helping these clients and what the Districts wants to do for southern Nevada. She believes this is the time to think of changes to these issues and to be bold. It is time to get things to the legislature to get funding, to get things done.

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

VI. ADOPTION OF THE JANUARY 24, 2019 AGENDA (for possible action)

A motion was made by Member Nielson seconded by Member Nemec and carried unanimously to approve the January 24, 2019 Agenda as presented.

- VII. <u>CONSENT AGENDA</u>: 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. <u>APPROVE MINUTES/BOARD OF HEALTH MEETING</u>: November 15, 2018 (for possible action)
 - 2. Petition #01-19: Approval of Interlocal Contract with Nevada Department of Health and Human Services on Communicable Disease Reporting and Clinical Services Connections to HealtHIE Nevada; direct staff accordingly or take other action as deemed necessary (for possible action)
 - 3. <u>PETITION #04-19: Approval of Amendment to Interlocal Space Lease Agreement between</u> <u>Henderson City Hall and Southern Nevada Health District</u>; direct staff accordingly or take other action as deemed necessary *(for possible action)*

A motion was made by Member Segerblom seconded by Member Wursten and carried unanimously to approve the Consent Agenda presented.

VIII. <u>PUBLIC HEARING / ACTION</u>: 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.

 <u>Review/Discuss/Approve Variance Request to Operate One Public Bathing Place Not in</u> <u>Compliance with the Nevada Administrative Code (NAC) 444.116, 444.134 and 444.168;</u> <u>Town Center Enclave, LLC, dba Trilogy in Summerlin, located at 4201 Sunrise Flats</u> <u>Street, Las Vegas, Nevada, 89135; [Assessor's Parcel Number (APN) 164-24-117-011] for</u> <u>Health Permit PR0128798, Jeremy Fritz, for the Owner(s), Town Center Enclave, LLC;</u> direct staff accordingly or take other action as deemed necessary (for possible action)

Karla Shoup, Environmental Health Manager, and Jeremy Harper, Environmental Health Supervisor, presented the variance request. Staff is of the opinion that circumstance exist which satisfy the requirements for a variance, and that granting a variance from these regulations will not be detrimental or pose a danger to public health and safety. Approval of the variance was recommended with the following conditions:

- 1. The petitioner agrees to maintain the existing walkway area around the pool accessible and free from obstructions;
- 2. The petitioner agrees to adhere to all other applicable requirements of the Public Bathing Places 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 non-transferable upon closing of any sale transaction involving the subject property. New owners must apply in writing for continuation of any variance conditions.

Mr. Jeremy Fritz and Mr. Scott Burden, for the Owner(s), Town Center Enclave, LLC, agreed to adhere to all conditions.

A motion was made by Member Nielson seconded by Member Coffin and carried unanimously to approve the Variance Request to Operate One Public Bathing Place Not in Compliance with the Nevada Administrative Code (NAC) 444.116, 444.134 and 444.168; Town Center Enclave, LLC, dba Trilogy in Summerlin, located at 4201 Sunrise Flats Street, Las Vegas, Nevada, 89135; [Assessor's Parcel Number (APN) 164-24-117-011] for Health Permit PR0128798, as presented.

2. Review/Discuss/Approve Variance Request to Operate One Public Bathing Place Not in Compliance with the Nevada Administrative Code (NAC) 444.132; Hotspur Resorts Nevada LTD, dba JW Marriott, located at 211 North Rampart Blvd, Las Vegas, Nevada 89145; [Assessor's Parcel Number (APN) 138-29-401-011] for Health Permit PR0013737, Adil Kanji, for the Owner(s), Hotspur Resorts Nevada LTD; direct staff accordingly or take other action as deemed necessary (for possible action)

Ms. Shoup and Mr. Harper presented the variance request. Staff is of the opinion that circumstance exist which satisfy the requirements for a variance, and that granting a variance from these regulations will not be detrimental or pose a danger to public health and safety. Approval of the variance was recommended with the following conditions:

- 1. The petitioner agrees to follow the approved lifeguard staffing plan during all hours of operation;
- 2. The petitioner agrees that any documentation related to the lifeguard plan, lifeguard inservicing, and lifeguard auditing results is made available to SNHD upon request;

- 3. The petitioner agrees to adhere to all other applicable requirements of the Public Bathing Places Spas Regulations, NAC 444;
- 4. 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;
- 5. This variance is non-transferable upon closing of any sale transaction involving the subject property. New owners must apply in writing for continuation of any variance conditions.

Adil Kanji, for the Owner(s), Hotspur Resorts Nevada LTD agreed to adhere to all conditions.

A motion was made by Member Segerblom seconded by Member Wursten and carried unanimously to approve the Variance Request to Operate_One Public Bathing Place Not in Compliance with the Nevada Administrative Code (NAC) 444.132; Hotspur Resorts Nevada LTD, dba JW Marriott, located at 211 North Rampart Blvd, Las Vegas, Nevada 89145; [Assessor's Parcel Number (APN) 138-29-401-011] for Health Permit PR0013737 as presented.

3. <u>Review/Discuss/Approve Variance Request for 4721 Aspen Ave, Mount Charleston, NV</u> <u>per Nevada Revised Statutes (NRS) 278.377 to: 1) permit the installation of a conventional</u> <u>septic system on an undersized lot where no parcel map or subdivision map has been</u> <u>filed; 2) allow a structure and septic system to be on different lots; 3) allow a reduced</u> <u>setback from the property line; and 4) waive design standards for trench separation</u> <u>distance</u>; direct staff accordingly or take other action as deemed necessary (for possible action)

Herbert Sequera, Environmental Health Manager, Dan LaRubio, Engineer/Supervisor and Robert Fyda, Environmental Supervisor, presented the variance request.

Staff recommends approval of the variance with the following conditions outlined below.

- 1. The property owner will record a dedicated easement for the septic system with the Clark County Surveyor's Office within one year after construction is completed.
- The property owner agrees to adhere to all the other applicable requirements of the SNHD Regulations Governing Individual Sewage Disposal Systems and Liquid Waste Management.
- 3. Permitting of the ISDS must be commenced within one (1) year of the date hereof. If the construction has not been commenced within that period, this variance shall automatically expire and be of no further force and effect, unless application is made and approved for an extension of time prior to the expiration date by the applicant or the applicant's successor(s) in interest.
- 4. The applicant and his successor(s) in interest shall abide by all local governmental regulations requiring connection to community sewage systems. Use of the ISDS shall be discontinued and the structure it serves shall be connected to any community sewage system constructed in the future to within four hundred (400) feet of the applicant's property line when connection can be made by gravity flow and the owner(s) are notified and legally required to do so.

A motion was made by Member Segerblom seconded by Member Coffin and carried unanimously to approve the Variance Request for 4721 Aspen Ave, Mount Charleston, NV per Nevada Revised Statutes (NRS) 278.377 to: 1) permit the installation of a conventional septic system on an undersized lot where no parcel map or subdivision map has been filed; 2) allow a structure and septic system to be on different lots; 3) allow a reduced setback from the property line; and 4) waive design standards for trench separation distance as presented. 4. <u>Review/Discuss/Approve Variance Request to Permit and Install a New Individual Sewage</u> <u>System (ISDS) on an Undersized Lot Served by a Domestic Well Water Supply with a</u> <u>Shallow Absorption Field (APN 125-34-310-018)</u>; direct staff according or take other action as deemed necessary (for possible action)

Mr. Sequera, Mr. LaRubio and Mr. Fyda presented the variance request and determined that the petitioners, Ray and Hannah Fraser met all requirements and that granting the variance will not be detrimental or pose a danger to the public health and safety. The variance was recommended for approval with the following conditions:

- 1. The ISDS will be limited to the existing conventional one thousand (1,000) gallon septic tank with a proposed shallow absorption leach field until municipal sewer is available.
- 2. The ISDS may not be located in an area subject to vehicular traffic, any area to be paved or within ten (10) feet of any tree.
- 3. Permitting of the ISDS must be commenced within one (1) year of the date hereof. If the construction has not been commenced within that period, this variance shall automatically expire and be of no further force and effect, unless application is made and approved for an extension of time prior to the expiration date by the applicant or the applicant's successor(s) in interest.
- 4. The applicant and his successor(s) in interest shall abide by all local governmental regulations requiring connection to community sewage systems. Use of the ISDS shall be discontinued and the structure it serves shall be connected to any community sewage system constructed in the future to within four hundred (400) feet of the applicant's property line when connection can be made by gravity flow and the owner(s) are notified and legally required to do so.

The petitioners agreed to adhere to all conditions.

A motion was made by Member Segerblom seconded by Member Wursten and carried unanimously to approve the Variance Request to Permit and Install a New Individual Sewage System (ISDS) on an Undersized Lot Served by a Domestic Well Water Supply with a Shallow Absorption Field (APN 125-34-310-018) as presented.

 PETITION #02-19: Consider/Adopt Proposed Revisions to Southern Nevada Health District Clinical Services and Lab Services Fee Schedule; direct staff accordingly or take other action as deemed necessary (for possible action)

Ernest Blazzard, Financial Services Manager, noted the fee scheduled was developed working in conjunction with the Clinical Services team, both management and individual contributors to maximize the accessibility of services to the largest number of individuals in southern Nevada. presented the proposed revisions. The idea is to create an affordability factor for patients who need the District's services. The fee schedule is organized into several different sections which comprise dental services, office visits, medications, etc. The price of these services will fluctuate frequently and dramatically, and Mr. Blazzard proposed Board review on an intermittent level as needed instead of on an annual basis. This will also provide the District an opportunity to explore new levels of service and examine prices.

The Chair opened Public Comment.

Regena Ellis, SEIU, would like the Board to think about where the District is in terms of being a safety net for individuals who cannot afford services and if they are uninsured/underinsured, has the agreement from the contracted billing company been reviewed by the Board. She also asked

the Board to consider how the patients will be billed in the future if they are unable to pay and if they will be sent to collections. Ms. Ellis would like to make sure people have somewhere to go when they need services and they will not be sent to a collection agency.

Seeing no one else, the Chair closed Public Comment.

Mr. Blazzard stated the District has a long-standing policy of never turning anyone away for services and the level of services offered are so the people who need it most and who can least afford it, can come and get services they need. If the patient is in a position where they cannot afford to pay, a very strict policy is in place where the District will work with the patient to make services available.

Dr. Fermin Leguen, Chief Medical Officer and Director of Clinical Services, added as a compliment to fee schedule, there is also a sliding fee schedule, which is based on federal poverty levels. Every year, the federal government publishes a table with poverty levels and it is used across the country, mostly by health centers, to be able to deliver services to uninsured patients to ensure affordability. This mechanism offers discounted services based on the ability to pay.

Chair Kirkpatrick asked if clients were sent to collections or turned away. Dr. Leguen explained there is a hardship policy in place. If a client is unable to pay, the fee is then waived. Also, a payment plan is provided for those who cannot afford to provide full amount of fee for that visit. If the patient has not paid the fee in eighteen months, it is considered a write-off. Dr. Iser added if the patient is insured, there may be a co-pay involved.

Member Nielson asked Mr. Blazzard to explain the pricing disparities. Mr. Blazzard noted the prices were determined from working with multiple sources from the insurance companies and are normal and customary fees.

In response to Member Nielson's question regarding additional training to prevent overcharging or undercharging, Mr. Blazzard stated one of the goals is to implement the Electronic Health Records System, which will address many of these challenges.

Member Nemec confirmed that the District uses a billing services and asked if it has guidelines regarding sending a client to collections. Mr. Blazzard explained it is at the discretion of the District, however, there is long-standing policy that after eighteen months without payment, the account is written off.

Member Coffin noted a high markup versus acquisition fee on some of the proposed fees. Todd Bleak, Pharmacist, noted the medication fee schedule is based on a discount off the average wholesale price. This methodology is utilized for insurers to reimburse for medications. The District's acquisition costs are lower than many other providers as it has access to federal program 340B discount program, which allows for the purchase of discounted drugs. This discount is used to stretch the District's resources to the underserved.

Joann Rupiper, Chief Administrative Nurse, clarified that BMG processes the District's insurance claims. When an insured client is at the District and it is determined what is believed that the insurance will pay, the District will collect that co-pay/deductible, however, there may be a difference when claim is submitted. At this time, the billing company will invoice that difference to the patient, who is directed by the District to come in to discuss payment/payment arrangement or write-off. Documentation must be received from the client in order to prove due diligence to the insurance company. Uninsured clients go immediately through the hardship process.

Vice Chair Black believes that two concepts 1) the ability to offer service and bill an appropriate dollar amount for that service based on industry standards and 2) the mechanism by which the

patients pay or do not pay, based on their circumstances, have been merged together. He believes the issue at hand are services and the cost of those services. He would like to focus more on expanding and aligning the fee schedule to the industry standards, then have a secondary conversation about the billing aspects with a various range of patients, to include a flow chart outlining the process from the time a patient walks through the door by category (insured/uninsured/Medicaid/Medicare).

A motion was made by Vice Chair Black seconded by Member Nielson and carried unanimously to approve the Proposed Revisions to Southern Nevada Health District Clinical Services and Lab Services Fee Schedule as presented and bring back the billing to discuss the process.

IX. <u>REPORT/DISCUSSION/ACTION</u>

1. <u>Review/Discuss Proclamation Declaring January 2019 as "National Radon Action Month</u> <u>in Southern Nevada"</u>; direct staff accordingly or take other action as deemed necessary (for possible action)

Nadia Noel, Radon Education Coordinator, University of Nevada Cooperative Extension, read a prepared statement for the record requesting proclamation of January 2019 as "National Radon Action Month in Southern Nevada". (*Attachment 1*)

A motion was made by Member Segerblom seconded by Member Coffin and carried unanimously to accept the Proclamation Declaring January 2019 as "National Radon Action Month in Southern Nevada" as presented.

2. <u>Receive/Discuss and Approve Legislative Priorities for 2019</u>; direct staff accordingly or take other action as deemed necessary (for possible action)

Dr Iser discussed the legislative priorities that were developed in conjunction with the Department of Health and Human Services, Washoe County Health District, State of Nevada, American Cancer Society, American Heart Association, Nevada State Medical Association and others.

1. Public Health Improvement Fund

The Health District will work with its local and state counterparts to support a bill draft request sponsored by the Legislative Committee on Health Care that will appropriate a dedicated funding stream to build public health infrastructure and capacity.

2. Chronic Disease Reporting

The Health District will support legislation that mandates laboratories report chronic diseases markers to the Division of Public and Behavioral Health and the local health authorities. Chronic disease markers provide vital information about a population's risk for developing chronic diseases as well as increased cancer deaths.

3. Nevada Clean Indoor Air Act Modernization

Nevada, along with the rest of the United States, has seen an increase in the use of ecigarette products. Additionally, the state recently passed recreational marijuana laws. Currently, the Nevada Clean Indoor Air Act only addresses conventional/traditional tobacco products. The Health District will work with partners regarding legislation that ensures the Nevada Clean Indoor Air is updated to address current and emerging gaps in the statute in addition to conventional and other combustible products.

4. E-cigarette Revenue Bill

The Health District will support legislation that will tax electronic cigarette products at a rate equivalent to traditional tobacco products.

5. Tobacco 21

More than 90 percent of smokers start before the age of 21. Tobacco 21 laws are proven effective in preventing smoking initiation among high school students. The Health District will support raising the age to buy tobacco products in Nevada from 18 to 21.

6. Medicaid Enhancements

The Health District will monitor Medicaid legislation and support changes that will enhance access for patients and reimbursements for providers.

A motion was made by Member Segerblom seconded by Member Wursten and carried unanimously to accept the Legislative Priorities for 2019 as presented.

Member coffin left the meeting at 10:15 am and did not return

3. <u>Receive Update and Discuss Property Search</u>; direct staff accordingly or take other action as deemed necessary (for possible action)

Andy Glass, Director of Administration, reported the District is at the point where it has engaged a Broker to assist with looking at the shopping center where the District is currently housed. Negotiations have gone back and forth with the owner of the property, originally starting with an asking price of \$10.5M. After receiving authorization from the Board at the September 2018 meeting to proceed with negotiations, a counter offer of \$7.5M was made by the District. The owner responded with an offer of \$9.25M. The District is now at a point that it needs Board authorization to proceed with final negotiation on this property.

Member Nielson recalls, from the Finance Committee meeting, discussion regarding both purchase and leasing of space, and the recommendation was to go forward and continue conversations from both aspects as the Finance Committee was not convinced that purchasing was the best move. Mr. Glass reported that leasing versus purchasing had been reviewed and purchasing, at the right price, is the right direction to go for both the short and long term.

Mr. Glass introduced Mr. Hayim Mizrachi, Broker, MDL Group, who reported the need for the District is approximately 13,000 square feet that is available within the entire 85,000 square feet of the property. The lease rate is \$1.22 per square foot for the 13,000 square feet. Regarding negotiations, they are at the point of negotiating a sale price, if there is a sale. The seller has moved considerably. Mr. Mizrachi does not believe negotiations are done and would like to proceed to get to a final point in order to put together a final analysis to determine what actual acquisition versus leasing looks like.

Chair Kirkpatrick is concerned about taking on this cost with contract negotiations pending, knowing that the economy is likely to dip and whether the grants/positions will be received. Also, most of the property has been empty for ten years and the flat roof is an issue. Ernest Blazzard, Financial Services Manager, noted with respect to income generated by this property, as landlords, much of the costs will leverage and will essentially pay for itself.

Member Stewart questioned if purchasing additional property is something the Board wants to do. Mr. Mizrachi noted this was not just an idea to buy a property, as the driving factor is the space need for the District to fulfill, to put District employees in a space where they can carry out their jobs.

Vice Chair Black stated he has toured the main building in recent months and does not suspect that the Board would disagree that the District is bursting at the seams in places, however, there are many factors at play. Mr. Black clarified that the agenda item was to "Receive Update and Discuss Property Search", and he believes this has been done and additional data points are required, such as, in the existing facility, what is the lease-out and would the District be privy to the revenues that it is generating. He would also like to know what lease terms would look like. Mr. Black submitted to the Chair that the Board either gather real time or in another mechanism,

data points that the Board would like to see because timing is of the essence in terms of being prudent, thorough and looking at the other factors the District is facing such as negotiations, grants and positions that are trying to be filled. Funding, timing and sustainability are some of the main points he would like to see addressed.

Member Nielson is looking for a venue or forum to get more specifics about factual circumstances. The actual need should be justified, how to pay for it, identify the assumptions behind cash flow generated and the quality and terms of leases need to be identified. Member Nielson suggested the creation of a sub group to look at these issues and determine if there is a decision to be made. Dr. Iser advised that all the information is available, however, he was asked by Chair Kirkpatrick to make the presentation more generic to determine whether to move forward.

Chair Kirkpatrick asked for all the information to be provided to the Board for review, however, she is not willing to continue negotiations.

A motion was made by Vice Chair Scott Black to meet and form a committee within 60 days to discuss at the level of detail needed in order to be conclusive about a decision which is yet to be determined. Dr. Iser asked for direction to move forward as opposed to a motion. Chair Kirkpatrick clarified, stating that staff has been directed that another forum is desired to discuss details over the next sixty days. Mr. Nielson added this direction will also allow Mr. Mizrachi to communicate with the landlord, basically saying that their counter-proposal was not accepted, however, the situation is still being studied. Mr. Mizrachi commented that there is a contingency in the Letters of Intent that defines absolute contingency on Board approval and lists first quarter board meeting dates.

X. <u>BOARD REPORTS</u>: The Southern Nevada District Board of Health members may identify and comment on Health District related issues. 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. *(Information Only)*

There were no Board Reports.

XI. CHO COMMENTS (OR HEALTH OFFICER & STAFF REPORTS)

- Dr. Iser reported the District has been working with one of the national tuberculosis centers in California and the HIV/STD Prevention Training Center to provide training to District staff, the other local health jurisdictions, Utah, surrounding counties in Arizona and California to provide a two-day training, one on tuberculosis, the other on HIV/STDs. The working group has approved this training and an agenda and dates are pending.
- The Accreditation Site Visit occurred approximately two weeks ago. It went well, and results should be received in March. Dr. Iser thanked Emily Elzeftawy, (former) Acting Accreditation Coordinator, Mimi Ujiie, Quality & Performance Improvement Coordinator, and all District staff for their efforts.
- Dr. Iser reported another budget is being created by Dr. Antonina Capurro, Nevada State Dental Health Officer, to support the rural dental/medical health program. This budget will again go before the State for approval.
- Mr. Glass outlined the Strategic Plan timeline (Attachment 2)

XII. INFORMATIONAL ITEMS

- **1.** Appointment Letter from Clark County
- 2. Chief Health Officer and Administration Monthly Activity Reports
- 3. Clinical Services Monthly Activity Reports

- 4. Community Health Monthly Activity Reports
- 5. Environmental Health Monthly Activity Reports

The Chair close Open Session and move to Closed session at 10:59 a.m.

XIII.

CLOSED SESSION – To Be Held Prior to Adjournment

Go into closed session, pursuant to NRS 241.015(3)(b)(2), to receive information from the Health District's Attorney regarding potential or existing litigation involving a matter over which the Board has supervision, control, jurisdiction or advisory power, and to deliberate toward a decision on the matter and pursuant to NRS 288.220 for the purpose of conferring with Health District management regarding labor issues; and direct staff accordingly. *(For possible action)*

Vice Chair Black resumed Open Session at 11:10 a.m.

XIV. <u>PUBLIC COMMENT</u>: 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.

Rosemary Ensign, SNHD Food Safety Training Program employee, noted earlier conversation discussed buying or leasing a building for future or additional services, however, there is a need for space now for current services. There were lines out the door yesterday for the Food Safety Training Program. Ms. Ensign advised the request for additional space is not something that management is asking for something for the future, the need is now, as this building is bursting at the seams. Ms. Ensign noted she does not ever stand on the side of management because she does not tend to agree, however, she feels it is in the best interest of the District to purchase versus leasing, as it would provide income versus leasing and flushing the money down the toilet. Ms. Ensign has been with the District for twenty years, and over that time, other than the fact for services that are elective, she does not ever recall turning away a client because they could not pay.

Mr. Julio DeLeon, Ice Cream Man Depot, (accompanied by five other individuals) addressed the Board regarding the issue with illegal, unlicensed corn vendors. He asked for the Board's assistance in getting them off the streets as they create problems and diseases. These illegal vendors are selling right in front of the schools, which is very concerning. He has reported this issue to the police, School District, school police, Health District and is now seeking the Board's assistance.

Emily Elzeftawy, Executive Administrative Analyst, thanked all staff for their work in putting together the District's accreditation efforts.

Al Lopez, organizer for the Sheet Metal Workers Union, visits different job sites throughout the day with co-workers and noted with regard to the new restaurant/kitchen buildings on the strip, conditions are breaking down when it comes to passing inspections. on strip. The inspectors are not on the same page when enforcing regulations. Mr. Lopez hopes to have discussions to clarify and have consistency throughout inspections. Christopher Saxton, Director of Environmental Health, will meet with Mr. Lopez after this meeting to arrange for full discussion.

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

XV. ADJOURNMENT

The Vice Chair adjourned the meeting at 11:17 a.m.

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

/jw