I. CALL TO ORDER and ROLL CALL
Chair Black called the Southern Nevada District Board of Health Meeting to order at 9:01 a.m. Andria Cordovez Mulet, Executive Assistant, administered the roll call.

II. PLEDGE OF ALLEGIANCE

III. FIRST PUBLIC COMMENT: A period devoted to comments by the general public about those items appearing on the agenda. Comments will be limited to five (5) minutes per speaker. Please 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 Chair or the Board by majority vote.

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

IV. ADOPTION OF THE MARCH 25, 2021 MEETING AGENDA (for possible action)
A motion was made by Member Knudsen seconded by Member Stewart and carried unanimously to approve the March 25, 2021 Agenda as presented.
V. CONSENT AGENDA: Items for action to be considered by the Southern Nevada District Board of Health which may be enacted by one motion. Any item may be discussed separately per Board Member request before action. Any exceptions to the Consent Agenda must be stated prior to approval.

1. APPROVE MINUTES/BOARD OF HEALTH MEETING: February 25, 2021 (for possible action)

2. PETITION #35-21: Approval of Intrastate Interlocal Contract between Public Agencies, a Contract between the State of Nevada, Department of Conservation and Natural Resources and the Southern Nevada Health District for the underground storage tank program; direct staff accordingly or take other action as deemed necessary (for possible action)

3. PETITION #36-21: Approval of Amendment to an Interlocal Agreement with the Bureau of Behavioral Health Wellness and Prevention within the Nevada Division of Public and Behavioral Health and the Southern Nevada Health District for the purpose of sharing protected information with state contracted Resilience Ambassadors; direct staff accordingly or take other action as deemed necessary (for possible action)

A motion was made by Member Knudsen seconded by Member Nielson and carried unanimously to approve the March 25, 2021 Consent Agenda as presented.

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

1. Staff Recommends Denial of Variance Request for an Application to Construct a Septic System located at 4731 Knotty Pine Way, Mount Charleston, Nevada; direct staff accordingly or take other action as deemed necessary (for possible action)

Robert Fyda, Environmental Health Engineer/Supervisor, presented the variance request to obtain the approval for an Application to Construct a Septic System located at 4731 Knotty Pine, Mount Charleston, Nevada. Mr. Fyda was accompanied by Joey DeBlanco, the engineer for the petitioner. Mr. Fyda provided a background on the property and the waivers. (Attachment #1) Mr. Fyda advised that staff does not recommend approval of the variance request. However, Mr. Fyda stated that if the Board of Health approves the request, staff recommends six (6) conditions of approval.

Member Nielson inquired as to why there was not agreement on the terms of how the septic tank would be installed. Mr. Fyda advised that staff felt that the property line send back was a little too aggressive. Mr. Fyda continued that normally staff would like to see it at 5 feet, as the problem could be that sewage tends to go underground and sometimes it can cross property lines if too close.

Member Knudsen inquired whether the property owner on the adjacent property had any issues with the design. Mr. Fyda advised that no comments from the property owner have been received. Mr. Fyda advised that formal public notice was issued but the property owner has not individually been notified.

Chair Black inquired whether there were any health and safety concerns that contributed to staff’s recommendation for denial. Mr. Fyda advised that the only concern would be that possibly if there was ever a sewage backup or an overflow that it would cross property lines. However, after speaking with Mr. DeBlanco and judging by the topography that the lot to the south is higher,
therefore, if there was to be a sewage overflow it most likely would be contained to the existing property. Mr. Fyda confirmed that the lot in question was currently vacant land.

Mr. DeBlanco advised that the petitioner had issue with two of the conditions. Firstly, the first condition related to the requirement to obtain written approval for the reduced property line separation from the owner(s) of 4723 Knotty Pine Way before construction was completed. Mr. DeBlanco suggested that the condition be amended to replace “written authorization” for “written approval” as the neighbor does not have any writes over the property in question. Secondly, the last condition related to the requirement for the construction to commence within one (1) year of the date hereof. Mr. DeBlanco requested that two (2) years be provided to commence construction due to the impact of the pandemic, decline in the economy and contractor availability.

Member Bond raised that consideration must be given to staff’s recommendation. Member Bond further stated that it was important to obtain written approval from the neighbor because if there was an issue with septic system, who is responsible.

Chair Black inquired from General Counsel on the mechanism to obtain written approval from the neighbor, from a legal standpoint. Ms. Bradley advised that it was not clear, if there was an issue with the septic tank, how to compensate the neighbor in some way and that there were several unknown with the situation.

Member Nielson commented that the Board of Health previously granted several variances in the past because in Mount Charleston, the lots are very small and there weren’t community sewers. Mr. Nielson continued that he didn’t believe that, by providing written approval, the neighbor would be giving up any rights. Ms. Bradley agreed that the neighbor would not be giving up any legal rights and would still have the ability to sue.

Member Segerblom commented that the petitioner should be asked to redesign the building so that there is space for the septic system. He further stated that he didn’t want to have the neighbor sue the petitioner if the Health District approved it.

Mr. Fyda advised that the petitioner did later the building structure and the design submitted was the second iteration. Mr. Fyda further advised that the lot was difficult, in general as there were utilities on the street that they must maintain setbacks.

Further to questions, Mr. Fyda advised that, based on the soils profile and the design, they meet the design standards. He further stated that the soil percolates very well and he doesn’t foresee any issues but it was hard to say, the ground water is fairly deep, he doesn’t know how far bedrock would be and from the boring it would be safe to say, besides sewage possibly surfacing on the neighbor’s property, he doesn’t foresee any public health and safety issues.

Mr. Fyda inquired as to the process if the petitioner was unable to obtain written approval from the neighbor. Ms. Bradley advised that the petitioner would be able to re-submit his request for approval to the Health District and make any further agreements in that regard.

Chair Black opened Public Comment.

Seeing no one, the Chair closed the Public Comment portion.

A motion was made by Member Knudsen seconded by Member Adams and carried by a vote of 8-2 to approve the Variance Request for an Application to Construct a Septic System located at 4731 Knotty Pine, Mount Charleston, Nevada with the following conditions:

• Petitioner will obtain written approval for the reduced property line separation from the owner(s) of the property located at APN 129-36-111-017, also known as 4723 Knotty Pine Way, Mt. Charleston, NV 89124 before construction is completed.
• Petitioner will provide verification from a Nevada licensed professional land surveyor (PLS) that the septic system is installed within the property boundaries prior to final approval of the installation.

• Petitioner will submit a Cone of Influence letter signed by a State of Nevada registered professional engineer stating the separation distance, absorption trench depth, and that the stress influence of the building foundation will not adversely affect the leach field and septic tank and the stress influence of the leach field and septic tank will not adversely affect the building foundation.

• Petitioner and their 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 feet (400') of the Petitioner’s property line when connection can be made by gravity flow and the owner(s) are notified and legally required to do so.

• Petitioner and their successor(s) will abide by the operation and maintenance requirements of the most current SNHD regulations governing individual sewage disposal systems. Construction of the ISDS must be commenced within two (2) years 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 Petitioner or Petitioner’s successor(s) in interest.

AYES __________________ NAYS __________________
1. Adams 1. Bond
2. Black 2. Segerblom
3. Diaz
4. Dutkowski
5. Knudsen
6. Nemec
7. Nielson
8. Stewart

VII. REPORT / DISCUSSION / ACTION

1. Review, Discuss, and Approve Southern Nevada Health District Fee Schedule: direct staff accordingly or take other action as deemed necessary (for possible action)

Karen White, Chief Financial Officer, provided a summary of the Sliding Fee Discount Scale and Fee Schedule. (Attachment #2)

Regarding the Sliding Fee Discount Schedule, Ms. White reminded the Board that, as a requirement for many federal grants we are required to offer services on a sliding fee scale discount based on federal poverty guidelines (FPG), which change annually. The sliding fee scale offered to our patients is based on a family size and income. Ms. White advised that the Sliding Fee Discount Scale, as presented, was approved by the Community Health Center Governing Board on February 25, 2021.

Ms. White outlined the pros and cons of the two choices for setting the sliding fee for patients, (i) a percentage of changes and (ii) a flat fee method. Ms. White advised that the Health District currently uses the percentage of changes and is proposing the flat fee method.

Further to a question from Member Knudsen regarding the difference between the Community Health Center and the Health District on the sliding fee scale, Ms. White advised that Family Planning and Sexual Health Clinic would go up to 250% of the FPG and a flat fee of $60. The Ryan White Program is under the Community Health Center and has very specific rules on charges based on total income. Ms. White outlined that the sliding fee scale applies to all clinical programs offered
at the clinic and does not apply to the immunization program. Ms. White confirmed that service is never denied to any patients.

Member Knudsen requested an update report after an evaluation period. The Board of Health agreed on an evaluation period of 6 months prior to an update report being provided.

Ms. White proceeded with a presentation on the Master Fee Schedule, which is reviewed annually and updated when necessary. To assist in reviewing the commonly used fees in Las Vegas, Ms. White purchased a Fee Analyzer that outlines all the common codes and a charge range. In preparing for the presentation, Ms. White selected the 60% range, which means that we would be higher than 60% of the organizations in the Fee Analyzer.

Member Diaz inquired as to the proposed fees for individuals 65 years and older. Ms. White advised that as many individuals 65 years and older qualify for Medicare, Medicare would pay first and then the patient would pay 20% of what Medicare states and the patient could apply for the sliding fee discount to cover the 20%.

A motion was made by Member Knudsen seconded by Member Nielson and carried unanimously to approve the Community Health Center Sliding Fee Discount Scale and Fee Schedule, as presented, and direct staff to provide the Board of Health with an update, including volume data, and evaluated period in six months.

2. **Receive, Review, Discuss and Accept the Single Audit Report from Eide Bailey**: direct staff accordingly or take other action as deemed necessary *(for possible action)*

Richard Walker and Tamara Miramentes of Eide Bailey joined the meeting to present the Single Audit Report. *(Attachment #3)* Mr. Walker advised that they are specifically reporting on their Independent Auditor’s Report for each major Federal Program for the Health District, their report on internal control over compliance as it relates to the Federal Programs and their report on the Schedule of Expenditures of Federal Awards required by the Uniform Guidance. For the Report, Mr. Walker advised that the following six programs were audited:

- Injury Prevention and Control – CFDA 93.136
- Substance Abuse and Mental Health Services – CFDA 93.243
- Immunization Cooperative Agreements – CFDA 93.268
- Racial and Ethnic Approaches to Community Health – CFDA 93.738
- Public Health Emergency Preparedness – CFDA 93.069

During the Audit, Mr. Walker advised that there were no instances of noncompliance or issues identified as a control issue or control finding. Mr. Walker confirmed that an unmodified opinion was issued as it relates to these six programs.

Mr. Walker advised that, in addition to their Report, there are certain required communications to be disclosed to the Board of Health. The full scope of the required communications was provided in November 2020 with the Financial Statement Audit in November 2020; this Report is submitted as an addendum to that communications. Within that addendum, Mr. Walker further advised that there were no significant difficulties encountered during the single audit, no misstatements were identified as a result of the single audit procedures and there were no disagreements with management.

A motion was made by Member Stewart seconded by Member Knudsen and carried unanimously to accept the Single Audit Report, as presented.
3. **Receive, Discuss and Accept Budget Updates**: direct staff accordingly or take other action as deemed necessary (*for possible action*)

Ms. White advised that an extension was requested from the Department of Taxation for submitting the Budget for Fiscal Year 2021. Therefore, the draft Budget will be presented to the Board of Health at their next meeting. Ms. White advised that the reasons for the extension request were due to the revisions to the organizational structure, discussed at the last Board of Health meeting, and the complications with COVID-19 to determine which grants will be available.

4. **Petition #38-21: Plan of Correction to the State of Nevada Department of Taxation to the Fiscal Year 2020 Annual Audit Report, Finding Note 2: Noncompliance with Nevada Revised Statutes Budget Requirements**: approve or direct staff accordingly or take other action as deemed necessary (*for possible action*)

Ms. White presented the Plan of Correction to the State of Nevada Department of Taxation to the Fiscal Year 2020 Annual Audit Report, Finding Note 2: Noncompliance with Nevada Revised Statutes Budget Requirements. (*Attachment #4*)

Ms. White advised that the Financial Audit was submitted to the Nevada Department of Taxation. After a review of the Financial Audit and Findings, the Nevada Department of Taxation was interested in the Finding #2020-002 as it related to Nevada Revised Statutes (NRS). The Nevada Department of Taxation requested an update on the Findings be provide to the Board of Health and them. Ms. White provided the following update:

- NRS 354.598005 related to not advising the Board of Health of any budget augmentations related to the additional grants received last year. To remediate budgetary noncompliance issues in the future, the budget will be reviewed at least twice during the year to determine if a budget augmentation is needed, and a budget augmentation will be completed each year, as required and presented to the Board of Health for review and approval.
- NRS 354.626 related to not including cost allocations to each of the programs and did not include fund transfers. To remediate this issue in the future, all transfers and cost allocation will be budgeted accordingly, and the Board of Health will be advised of any significant changes to the budget as well as any deficit spending to be incurred.

Member Nielson advised that the Finance Committee also requested a plan of correction from the Finance Department to address these situations and stated that this petition was appropriate, not only for the Nevada Department of Taxation but also internally with the Board of Health.

*A motion was made by Member Knudsen seconded by Member Dutkowski and carried unanimously to accept the Plan of Correction to the State of Nevada Department of Taxation to the Fiscal Year 2020 Annual Audit Report, Finding Note 2: Noncompliance with Nevada Revised Statutes Budget Requirements.*

5. **Receive Report, Discuss and Approve Implementation of Senate Bill 4**: direct staff accordingly or take other action as deemed necessary (*for possible action*)

Christopher Saxton, Director of Environmental Health, provided an update on the implementation of Senate Bill 4 and advised that there have been 92 inspections/re-inspections, that equates to 180 staff hours, over the last month. The inspections/re-inspections continue to go well and there have been no fines ordered.

*A motion was made by Member Knudsen seconded by Member Bond and carried unanimously to accept the report on the implementation of Senate Bill 4, as presented.*
6. **Receive Report and Discuss the Monthly Update on the Legislative Session**: direct staff accordingly or take other action as deemed necessary *(for possible action)*

Bradley Mayer provided the Board of Health with an overview of recent developments in the legislative session that relates to the health District. Mr. Mayer touched upon the following bills:

- AB59 – revises various provisions relating to tobacco
- AB345 – revises provisions related to substance use disorders and safe injection sites
- AB192 – revises provisions governing the testing of pregnant women for certain sexually transmitted infections
- SB275 – revises provisions relating to HIV modernization
- SB209 – related to employers providing time off to employees for COVID-19 vaccination
- AB360 – revises provisions relating to vapor products
- AB343 – provides for walking audits of urbanized areas
- SB318 – makes various changes relating to improving access to governmental services for persons with limited English proficiency
- SB341 – revises provisions relating to disparity in health outcomes
- SB109 – revises provisions relating to the collection of sexual orientation information by governmental agencies
- AB389 – revises provisions governing the taxation of certain tobacco products
- AB260 – provides for the confidentiality of contact tracing information
- SB349 – revises provisions relating to solid waste exemptions and unpackaged products at farmer’s markets
- SB325 – establishes provisions relating to pharmacists dispensing and insurance companies to cover HIV prevention drugs
- AB177 – revises provisions relating to prescription labelling in the native language of the client

Member Knudsen raised the announcement on March 22, 2021 by the Nevada Attorney General on a $45 million settlement for Nevada with a consulting firm in its role in Nevada’s opioid epidemic and the Health District’s role in the allocating of funds. As the announcement was recent, Dr. Leguen advised that there was no established route for allocation of funds. Ms. Bradley suggested Health District staff internally determine ways that the Health District can utilize funding and then raise it with the Nevada Attorney General’s Office or the Nevada Department of Health and Human Services. Chair Black requested a discussion at the next meeting on how the Health District can utilize any allocated funds.

VIII. **BOARD REPORTS**: 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)*

Seeing none, the Chair closed this portion of the meeting.

IX. **HEALTH OFFICER & STAFF REPORTS** *(Information Only)*

- **DHO COMMENTS**

In addition to this written report, Dr. Leguen advised that the influenza cases are extremely less than last year, which could be the biggest impact of the use of masks and social distancing.
• **COVID Update** ([Attachment #5](#))

Dr. Michael Johnson, Director of Community Health, advised that over the last two months there has been a steady decrease in the number of new COVID-19 cases; the 7-day moving average is 121 cases per day, which is down from 195 cases a couple weeks ago. Dr. Johnson further advised that hospital capacity was strong. The mortality rate is also declining, with a 7-day moving average of 3.9 deaths, which is down from 6.6 a couple weeks ago. The positivity rate continues to decline, with a 7-day moving average of 5.0%, which is down from 6.2% a couple weeks ago. Further to questions, Dr. Johnson stated that testing has declined slightly, however the Health District will be increasing testing efforts. Dr. Leguen advised of a recent agreement with an organization that will be taking over testing at UNLV, which will replace the National Guard, so they can continue to assist with the vaccination campaign.

• **Vaccination Campaign Update** ([Attachment #6](#))

JoAnn Rupiper, Chief Administrative Nurse, provided an update on the COVID-19 vaccination campaign by reviewing the current vaccine site locations (Cashman, LVCC, SNHD Decatur and the Community Partners). Ms. Rupiper advised that, in early April, the location of the vaccine site within LVCC will be moved to the South Hall, which is larger than the current space used. Ms. Rupiper advised that the Strike Teams are continuing with the Senior Living Facilities by pharmacies, The Center, Homeless Populations and Community Centers. Ms. Rupiper further advised of the new Mobility Unit, which consists of the RTC Program, Opportunity Village (which is pending), Homebound Program and Employer Program. Ms. Rupiper advised that, based on the Becker Report, Nevada was #34 having 13-14% of the population fully vaccinated and Clark County was #13 having 86% of distributed vaccines administered. Ms. Rupiper advised that, as of March 23, 2021, a total of 829,824 vaccines (first and second doses) have been administered, which is an increase from February 3, 2021 when 174,700 (first and second doses) were administered.

Further to questions from Member Bond and Member Diaz on unfilled appointments, Ms. Rupiper advised that a call center has been established to assist individuals make appointments and recently walk-ins have been permitted. Ms. Rupiper confirmed that any walk-ins were not being restricted to the tiers. Ms. Rupiper further advised that, to assist with second dose appointments, Salesforce sends a reminder either via SMS text message or email. Ms. Rupiper advised that traditional forms of advertisements, such as social media, radio, community partners, etc., would be used to advise the community of any walk-in availability.

• **HIV Modernization**

Dr. Johnson advised that SB 275 on HIV Modernization is extremely complex and contains several amendments that are being reviewed by Health District staff. At the next meeting, the Board of Health will receive a detailed presentation on SB 275 and other related bills.

X. **INFORMATIONAL ITEMS**

1. Administration Monthly Activity Report  
2. Clinical Services Monthly Activity Report  
3. Community Health Monthly Activity Report  
4. Environmental Health Monthly Activity Report  
5. FQHC Monthly Activity Report

XI. **SECOND PUBLIC COMMENT**: A period devoted to comments by the general public, if any, and discussion of those comments, about matters relevant to the Board’s jurisdiction will be held. Comments will be limited to five (5) minutes per speaker. If any member of the Board wishes to extend the length of a presentation, this may be done by the Chair or the Board by majority vote.

Seeing no one, the Chair closed this portion of the meeting.
XII. **ADJOURNMENT**

The Chair adjourned the meeting at 11:29 a.m.

Fermin Leguen, MD, MPH
District Health Officer/Executive Secretary

/acm