I. CALL TO ORDER and ROLL CALL
The Vice-Chair 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. RECOGNITION

- **UNLV Tobacco-free Zone**
  Malcolm Ahlo, Senior Health Educator/Tobacco Control Coordinator
  Maria Azzarelli, Manager of the Office of Chronic Disease Prevention

The Vice-Chair, on behalf of the Board of Health, recognized Malcolm Ahlo, Senior Health Educator/Tobacco Control Coordinator and Maria Azzarelli, Manager of the Office of Chronic Disease Prevention. Eliminating secondhand smoke exposure by creating tobacco- & smoke-free spaces where people can live, work, learn and play is a goal for the Southern Nevada Health District’s Tobacco Control Program. For nearly 20 years we have been working tirelessly to add The University of Nevada Las Vegas (UNLV) to the list of over 2,000+ colleges and universities who have adopted a tobacco-free policy. In September of 2021, the University Policy Committee, Provost and President unanimously approved the passage of the UNLV Smoke-free and Tobacco-free Campus Policy. SNHD’s Malcolm Ahlo, Senior Health Educator/Tobacco Control Coordinator in the Office of Chronic Disease Prevention and Health Promotion and Maria Azzarelli, former Tobacco Control Coordinator and current Manager of the Office of Chronic Disease Prevention have worked toward the passage of this policy for two decades through coalition building, early passage of a smoke-free dormitory policy, on-campus media, providing grant funding to campus organizations, campus advocacy events, technical assistance, surveying, and providing cessation services. These and other efforts have laid the foundation for the passage of UNLV’s gold-standard policy. The policy will prohibit smoking, using electronic smoking devices, or using other tobacco products on any UNLV campus. This policy will affect all UNLV faculty, staff, students, clients, contractors, vendors, visitors, lessees, and individuals residing on campus. In addition, the selling or promotion of tobacco products and marijuana/ cannabis is also prohibited on the UNLV campus and at UNLV -sponsored events and publications. The policy will go into effect in the Fall of 2022. UNLV recognizes that the negative health impacts of smoking and electronic smoking devices affect not only those using tobacco but also the people who are around them. With the passage of this policy (UNLV) is committed to providing a safe and healthy on-campus environment. This achievement could not have been accomplished without the perseverance and dedication of Dean Dr. Shawn Gerstenberger and Max Gakh with the UNLV School of Public Health. Their leadership, guidance and passion were key to the passage of this monumental policy. The Board of Health jointly expressed their congratulations to Mr. Ahlo and Ms. Azzarelli.

*Member Dutkowski joined the meeting at 9:03 a.m. via Webex*
*Member Stewart joined the meeting at 9:04 a.m. via Webex*

- **SNHD Vaccination Efforts – City of Las Vegas and Mexican Consulate**
  Vaccination Team, Southern Nevada Health District
  JoAnn Rupiper, Chief Administrative Nurse
  Sarah Lugo, Senior Community Health Nurse
  Merylyn Yegon, Community Health Nurse Supervisor
  Alondra Contreras-Araiza, Community Health Nurse II

The Vice-Chair, on behalf of the Board of Health, recognized that at the Health Fair and Family Fiesta at the East Las Vegas Community Center on October 9th Councilwoman Olivia Diaz, on behalf of the City of Las Vegas, Consul of Mexico Julian Escutia Rodriguez, on behalf of the Consulate of Mexico in Las Vegas, R.E.A.C.H. and Mi Familia Vota recognized the entire SNHD Vaccination Team and the following nurses: JoAnn Rupiper, Chief Administrative Nurse; Sarah Lugo, Senior Community Health Nurse; Merylyn Yegon, Community Health Nurse Supervisor; Alondra Contreras-Araiza, Community Health Nurse II. The Board of Health jointly expressed their congratulations to the Vaccination Team and nurses.
- **Environmental Health Badging**
  Gary Martens, Environmental Health Specialist II

Dr. Leguen administered the Oath of Office to Mr. Martens. The Board of Health jointly expressed their congratulations to Mr. Martens.

IV. **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, the Vice-Chair closed the First Public Comment portion.

V. **ADOPTION OF THE OCTOBER 28, 2021 MEETING AGENDA (for possible action)**

The Vice-Chair advised that there would be an “EMS Update” added under Item X – DHO Comments.

A motion was made by Member Nielson seconded by Member Diaz and carried unanimously to approve the October 28, 2021 Agenda as amended.

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

1. **APPROVE MINUTES/BOARD OF HEALTH MEETING:** September 23, 2021 (for possible action)

2. **PETITION #06-22:** Approval of an Interlocal Contract between the Southern Nevada Health District and the City of Henderson to provide services to support the Southern Nevada Health District Community Partnership to Promote Health Equity, Year 4 grant awarded to the SNHD by the Centers for Disease Control and Prevention (CDC Award # NU58DP006578-04-00). The CDC refers to this grant award as Racial and Ethnic Approaches to Community Health (REACH); direct staff accordingly or take other action as deemed necessary (for possible action)

3. **PETITION #10-22:** Approval of an Interlocal Agreement between Clark County, Nevada and the Southern Nevada Health District to continue and enhance the Rapid stART project under the Ending the HIV Epidemic initiative; direct staff accordingly or take other action as deemed necessary (for possible action)

4. **PETITION #11-22:** Approval of an Interlocal Agreement between Clark County, Nevada and the Southern Nevada Health District for Public Health Nurse Liaison Services for the Department of Family Services for the period from October 1, 2021 to June 30, 2022; direct staff accordingly or take other action as deemed necessary (for possible action)

5. **PETITION #14-22:** Approval of a Lease Agreement with 2830 Fremont Street, LLC for the new SNHD East Las Vegas location; direct staff accordingly or take other action as deemed necessary (for possible action)

6. **PETITION #16-22:** Approval of an Interlocal Sublease Agreement between the City of Las Vegas and the Southern Nevada Health District for the temporary East Las Vegas clinic at 2950 East Bonanza Road, Las Vegas; direct staff accordingly or take other action as deemed necessary (for possible action)
7. **PETITION#17-22: Approval of a Lease Agreement with All Saints Episcopal Church to increase access to sexual health services;** direct staff accordingly or take other action as deemed necessary (*for possible action*)

A motion was made by Member Diaz seconded by Member Nemec and carried unanimously to approve the October 28, 2021 Consent Agenda as presented.

**Member Kirkpatrick joined the meeting at 9:14 a.m. in-person**

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

1. **Variance Request for an Application to Construct Septic System located at 4841 Knotty Pine Way, Mount Charleston, Nevada with the following provisions:** 1) allow installation of a septic system on an undersized lot; 2) allow a reduced property line setback; and 3) waive a design standard regarding absorption trench depth; 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 4841 Knotty Pine Way, Mount Charleston, Nevada. Mr. Fyda outlined that the request was for a new septic system on a 0.07 acre lot and the applicant was seeking the following waivers: (1) a reduced property line setback from 10 feet to 5 feet, (2) allowance for installation on an undersized lot, and (3) a trench depth of 8 feet to meet the minimum area. Mr. Fyda advised that staff is of the opinion that granting the variance would not endanger public health or safety and recommended approval of the application with the conditions outlined in the materials.

Dale Martin, the representative for the owner, was in attendance and did not provide any additional information.

The Vice-Chair opened Public Comment. Seeing no one, the Vice-Chair closed the Public Comment portion.

Member Kirkpatrick inquired whether the application contained a nitrate removal component. Mr. Fyda advised that there was no nitrate removal component and was not aware of any nitrate issue on Mount Charleston. Mr. Fyda further advised that there was a public water system that was monitored on a fairly regular basis. Member Kirkpatrick stated that the Board of Health would need to start paying attention to the nitrates and the water quality.

A motion was made by Member Kirkpatrick seconded by Member Nielson and carried unanimously to approve the Variance Request for an Application to Construct a Septic System located at 4841 Knotty Pine Way, Mount Charleston, Nevada with the following conditions:

1. The applicants 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 applicants' property line when connection can be made by gravity flow and the owner(s) are notified and legally required to do so.
2. The applicants and their successor(s) will abide by the operation and maintenance requirements of the most current SNHD regulations governing individual sewage disposal systems.
3. Construction 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 applicants or the applicants’ successor(s) in interest.

VIII. REPORT / DISCUSSION / ACTION

1. Receive Report, Discuss and Approve 2022 Board of Health Meeting Schedule; direct staff accordingly or take other action as deemed necessary (for possible action)

The Board was advised that the proposed 2022 meeting schedule followed the timeline approved by the Board in previous years.

Member Kirkpatrick raised a possible conflict with the Southern Nevada Water Authority for the November meeting starting at 9:00 a.m. Dr. Leguen advised that the November 2021 meeting was moved to 11:00 a.m. to avoid that conflict. Following discussion, the Board agreed that the November 2022 meeting would start at 11:00 a.m.

A motion was made by Member Knudsen seconded by Member Nielson and carried unanimously to approve the 2022 Board of Health Meeting Schedule, as amended.

IX. 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)

Member Adams advised that the Boulder City Library District was interested in mobile on-site services, similar to those offered at the Clark County Library District. Dr. Leguen agreed this was a positive initiative and advised that the Health District will start working with the Boulder City Library District on this initiative.

Member Kirkpatrick requested an update on mobile food units and illegal vending at a future meeting.

X. HEALTH OFFICER & STAFF REPORTS (Information Only)

- DHO Comments

In addition to the DHO Monthly Report, Dr. Leguen recognized the nurses, volunteers, testing staff, contact tracers, surveillance staff, public health preparedness staff, and everyone that has been engaged and supportive of the pandemic response activities. Dr. Leguen advised that he was pleased at how the Health District’s work has been recognized by the community. In particular, the nurses have been committed and dedicated to the pandemic response activities, often working weekends and after hours, for almost two years and is proud to see their efforts recognized by the community.

Dr. Leguen advised that the Community Health Center East Las Vegas location will stop offering services on November 10th and will be temporarily re-located to 2950 E Bonanza Road, Las Vegas, NV 89111 until March/April 2022. At that time, the East Las Vegas location will be permanently re-located 2830 Fremont Street, Las Vegas, NV 89104.
EMS Update

John Hammond, EMS & Trauma Systems Manager, provided an updated from the November 20th Regional Trauma Advisory Board (RTAB) meeting. Mr. Hammond advised that RTAB discussed Step 4 patients and the necessity to transport them to a trauma center versus a non-trauma center. Following a healthy discussion, RTAB concluded that there would be no changes to the Step 4 criteria as currently outlined in the Clark County EMS System Emergency Medical Care Protocols.

Member Bond advised that there was a request for the data that was used for the revision previously made to the protocols regarding Step 4 patient transports. Mr. Hammond advised he was working on the request however trying to obtain what data was specifically being requested. Once completed, Mr. Hammond advised that he will share the information with board members.

COVID-19 Surveillance and Contact Tracing Update (Attachment #1)

Dr. Cassius Lockett, Director Disease Surveillance & Control, advised that, from October 11th to 24th, the 7-day moving average of COVID-19 cases declined by 21%, from 368 to 293 cases. Over the 30 days preceding October 24th, most cases were unvaccinated at 77%, with 23% being vaccinated and 20% of the cases were over the age of 65. As of October 27th, there were 435 hospitalizations, 115 ICU admissions and 71 ventilators. Dr. Lockett advised that the highest rate of hospitalizations was over the age of 65. From October 11th to 24th, the 7-day moving average of deaths declined by 35%, from 10.1 to 6.6. Over the 30 days preceding October 24th, 87% deaths were unvaccinated and 100% of the fully vaccinated deaths were over the age of 65. From October 11th to 24th, the positivity rate has declined by 9%, from 7.6% to 6.9%. As of October 24th, the 14-day moving average was 6.5%. Dr. Lockett outlined that there has been an increase in breakthrough cases however they were still extremely rare. From July to October, the percent of breakthrough cases increased from 13% to 23%. There have been 10,991 cases among fully vaccinated people (0.9699% of fully vaccinated), of those 4.2% were hospitalizations (459 breakthrough hospitalizations) and 1.6% were deaths (180 breakthrough deaths). Dr. Lockett advised that most breakthrough cases, approximately 94%, were mild, which confirms that the vaccines are very effective in preventing severe illness, hospitalizations, and death. Dr. Lockett concluded that case rates remain high in the African American community. Further, Dr. Lockett reiterated that breakthrough cases, hospitalizations and deaths are rare and mostly affect the 65 years and older population, with underlying health conditions.

Member Nemec inquired as to the effect of the rapid at-home tests on the test positivity rate, as the test positivity rate is used to determine the current mask mandate and other restrictions and felt that the metrics were skewed. Dr. Lockett advised that the at-home test kits are not included in the test positivity rate, however advised that the rapid tests administered as local pharmacies are included. Dr. Leguen further advised that the metrics are not skewed at this time, however, may be in the very near future should the federal government move toward the utilization of at-home testing. Further to an inquiry from Member Nielson, Dr. Leguen advised that the Health District’s role in distributing at-home tests was contingent to federal and state assistance and would coordinate with community and industry partners.

Member Kirkpatrick advised that there was a metric on the Health District’s website on the CCSD testing initiative and commended the work done with the CCSD, testing kiosks and gift card incentives. Member Kirkpatrick further stated that Clark County was working with the Health District on testing for international travelers.

Member Diaz inquired whether there was a correlation between the increase in vaccination efforts and the test positivity rate. Dr. Leguen advised that it was very evident that the vaccination efforts were positive in the community and was supported by the data as most of the cases are unvaccinated.
Member Nemec inquired whether the test positivity rate reflected both symptomatic and asymptomatic individuals. Dr. Leguen advised that testing is available to anyone in the community whether symptomatic or asymptomatic, our surveillance system captures information regarding the presence/absence of symptoms, but that information is not reliable since customers may decide against disclosing their symptomatic status when asking for testing. Nevertheless, this information is available in our system, and can be shared with board members at their request.

- Vaccination Campaign Update

JoAnn Rupiper, Chief Administrative Nurse, provided an update on the COVID-19 vaccination campaign. Ms. Rupiper advised that there are currently 13 statis vaccination sites, including the schools, CSN and welfare offices, along with 3-4 pop-up locations per week. Ms. Rupiper advised that the main focus is on the booster doses. There has been a light increase in the clinic and there will be more data with the Modera and Jansen booster doses. Ms. Rupiper advised that there is a lot of capacity at the clinics and that preparations are underway for the pediatric doses. The team is working with the schools on strike teams and capability of vaccinations in the schools, along with charter and private schools. Ms. Rupiper advised that the large medical offices will be receiving vaccines to administer. Ms. Rupiper advised that the health equity team was coordinating the next incentive to be distributed and working on a town hall event in the African American community. The Health District was working with the Clark County Medical Society and Nevada State Immunization Program on a COVID-19 Vaccine Town Hall to urge local healthcare providers to administer the vaccine in their offices. Ms. Rupiper advised that homebound vaccinations are continuing with three days a week.

Member Kirkpatrick inquired as to how the addition of the 5-11 years old population will affect Clark County’s vaccination rate. Dr. Leguen advised that with this addition the eligible population will increase in more than 200,000 in Clark County, however the numerator remains the same, and therefore, initially the vaccination rate will decrease. Dr. Leguen further advised that the main challenge is educating parents and encouraging them to vaccinate their children.

XI. INFORMATIONAL ITEMS
1. Administration Monthly Activity Report
2. Community Health Monthly Activity Report
3. Disease Surveillance and Control Monthly Activity Report
4. Environmental Health Monthly Activity Report
5. Primary & Preventive Care Monthly Activity Report

XII. 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 Vice-Chair closed the Second Public Comment portion.

XIII. ADJOURNMENT

The Vice-Chair adjourned the meeting at 10:31 a.m.

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

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