

MINUTES

SOUTHERN NEVADA DISTRICT BOARD OF HEALTH MEETING

March 24, 2022 - 9:00 a.m.

Meeting was conducted In-person and via Webex Event
Southern Nevada Health District, 280 S. Decatur Boulevard, Las Vegas, NV 89107
Red Rock Trail Rooms A and B

MEMBERS PRESENT: Scott Black – Chair, Council Member, City of North Las Vegas (in-person)

Brian Knudsen – Vice-Chair, Council Member, City of Las Vegas (in-person)

James Adams – Council Member, City of Boulder City (in-person)
Olivia Diaz – Council Member, City of Las Vegas (via Webex)
Karen Dutkowski – Council Member, City of Mesquite (via Webex)
Marilyn Kirkpatrick – Commissioner, Clark County (in-person)
Frank Nemec – At-Large Member, Physician (in-person)
Scott Nielson – At-Large Member, Gaming (via Webex)

Michelle Romero – Council Member, City of Henderson (via Webex)

ABSENT: Bobbette Bond – At-Large Member, Regulated Business/Industry

Tick Segerblom - Commissioner, Clark County

ALSO PRESENT: Georgi Collins, Dawn Christensen, Kim Dokken, Maya Holmes, Breanna Huber,

(In Audience) Jonathan Rodriguez, David Ruiz, Stacie Sasso, Irene Skarlatos

LEGAL COUNSEL: Heather Anderson-Fintak, General Counsel

EXECUTIVE SECRETARY: Fermin Lequen, MD, MPH, District Health Officer

STAFF: Elizabeth Adelman, Erik Anderson, Maria Azzarelli, Josephine Baltazar,

Stephanie Bethel, Haley Blake, Will Broer, Amanda Brown, Lori Bryan, Anna Burgess, Cory Burgess, Nikki Burns-Savage, Victoria Burris, Jonathan Bustinza, Dee Cabinte, Eliana Camacho, Monica Carcamo, Symaron Ciccone, Andria Cordovez Mulet, Stephanie Cortes, Rebecca Cruz-Nanez, Beverly Cuasito, Aaron DelCotto, Audrey de Oliveira, Karnjit Dhillon, Jessica Dietz, Amanda DiGoregorio, Lily Dominguez, Vincent Fenimore, Jennifer, Fennema, Gimmeko Fisher-Armstrong, Jason Frame, Dominick Franchino, Kimberly Franich, Peter Froio, Monica Galaviz, Cecilia Garay, Tina Gilliam, Michelle Goodsell, Sandra Gordon, Nicole Grandt, John Hammond, Heather Hanoff, Victoria Harding, Jeremy Harper, Richard Hazeltine, Valerie Herzog, Donna Houston, Carmen Hua, Victoria Hughes, Danielle Jamerson, Brenda Jamison, Jessica Johnson, Bria Jones, David Kahananui, Candice Konold, Theresa Ladd, Kevin Lam, Cassius Lockett, Cort Lohff, Chris Elaine Mariano, Dante Merriweather, Betsy McLellan, Kim Monahan, Deborah Moran, Jim Muth, Monika Nelson, Linda Nguyen, Francine Oakley, Erin O'Malley, Veralynn Orewyler, Epifania Paman-Lobo, Kyle Parkson, Luann Province, Cheryl Radeloff, Misty Robinson, Larry Rogers, Alexis Romero, Stephanie Ruiz, Christopher Saxton, Karla Shoup, Candice Sims, Jennifer Sizemore, Margo Slater, Marnita Smith-Dent, Jackie Southam, Amy Stines, Tiffany Tate, Ronique Tatum-Penegar, Victoria Taylor, Deshawn Thompson, Louis Thompson, Will Thompson, Randall Ulrich, Laura Valentino, Leo Vega, Jorge Viote, Brian Weissenburger, Candyce White, Karen

I. CALL TO ORDER and ROLL CALL

The Chair called the Southern Nevada District Board of Health Meeting to order at 9:02 a.m. Andria Cordovez Mulet, Executive Assistant, administered the roll call and confirmed quorum.

II. PLEDGE OF ALLEGIANCE

III. RECOGNITION

Public Health Accreditation

Chair Black advised that, earlier this month, the Health District was awarded 5-year accreditation status through the Public Health Accreditation Board (PHAB). This milestone accomplishment is official recognition that SNHD meets the rigorous standards of PHAB, which works to advance and transform public health practice by championing performance improvement, strong infrastructure, and innovation. Accreditation means that SNHD is committed to continuous quality improvement so that it can meet our community's needs as effectively as possible. The initial Accreditation start date was in 2016, the Action Plan was received in 2019 and, due to the pandemic, an extension to respond was granted. All documentation was submitted to PHAB on January 4, 2022. There has been an enormous amount of time, work, dedication and support put into the entire process starting from 2016 to present day. On behalf of the Board of Health, Chair Black thanked all those that worked on Accreditation in the past, present, and future, including Richard Hazeltine, Carmen Hua, Cheryl Radeloff, Devin Raman, Emily Elzeftawy, Heather Anderson-Fintak, Jeff Quinn, Jennifer Bowers, Jennifer Sizemore, Karla Shoup, Kimberly Franich, Kyle Parkson, Larry Rogers, Laura Valentino, Michael Polintan, Randall Ulrich, Rebecca Cruz-Nanez, Stephanie Cortes, and Victoria Harding. Further, Chair Black advised that the Health District is now the 3rd Accredited Health District in Nevada!

- Disease Surveillance and Control COVID-19 Contact Tracing Team
 Chair Black recognized Dr. Cassius Lockett, Kimberly Franich, Danielle Jamerson, Victoria Hughes,
 Candyce White, Haley Blake, Alice Ngari, Karnjit Dhillon, Symaron Ciccone, Kent Williams, Toria Taylor,
 and Peter Froio as the internal COVID-19 Contact Tracing Team. Chair Black noted that the contact
 tracing team had been and continues to be the direct line of communication for people who are suffering
 from COVID-19 and those that have been exposed. This team had led the Health District's effort with
 case interviewing, contact tracing and data collection for the most vulnerable and high-risk populations
 in Southern Nevada and has interviewed thousands and thousands of cases. This internal team of
 contact tracers are assigned the most challenging, complex, and sensitive cases. This work required
 compassion, for those most deeply affected by the pandemic.
- **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 Chair closed the First Public Comment portion.

V. ADOPTION OF THE MARCH 24, 2022 MEETING AGENDA (for possible action)

The Chair requested that the presentation on the 2020 Southern Nevada Trauma System Report, under Item X, be postponed to the April Board of Health meeting.

A motion was made by Member Knudsen, seconded by Member Kirkpatrick and carried unanimously to approve the March 24, 2022 Agenda, as amended.

- VI. <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>: February 24, 2022 (for possible action)
 - 2. PETITION #32-22: Approval of an Amendment to the Interlocal Agreement between the Southern Nevada Health District and the Nevada Division of Public and Behavioral Health to provide Resilience Ambassadors to the Office of Disease Surveillance as part of Nevada's Resiliency Project in response to the COVID-19 pandemic; direct staff accordingly or take other action as deemed necessary (for possible action)
 - 3. PETITION #33-22: Approval of an Interlocal Agreement between the Southern Nevada Health District and Clark County, Nevada on behalf of the Department of Family Services for services provided to the Thrive by Zero to Three Prevention Services Program for the period from April 2022 (date of award) to September 30, 2022; direct staff accordingly or take other action as deemed necessary (for possible action)
 - 4. PETITION #34-22: Approval of an Amendment to the Interlocal Agreement between the Southern Nevada Health District and Clark County, Nevada for medical core and support services for HIV/AIDS infected and affected clients in Las Vegas, Ryan White, transitional grant area; direct staff accordingly or take other action as deemed necessary (for possible action)

A motion was made by Member Knudsen, seconded by Member Adams and carried unanimously to approve the March 24, 2022 Consent Agenda, as presented.

- 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.
 - MEMORANDUM #02-22: Review, Discuss and Approve Environmental Health Proposed Body <u>Art Regulations</u>; direct staff accordingly or take other action as deemed necessary (for possible action)

Karla Shoup, Environmental Health Manager, and Dante Merriweather, Senior Environmental Health Supervisor, presented the Proposed Body Art Regulations. Ms. Shoup advised that currently there were two sets of regulations, which will sunset upon approval of the Proposed Body Art Regulations, and the proposal was to combine the regulations and bring them in alignment with the Nevada Administration Code 444 on Invasive Body Decoration Establishment. Ms. Shoup further advise that the Proposed Body Art Regulations would be presented to the State Board of Health in June, with an implementation of July 1, 2022.

Chair Black opened Public Comment.

Bruce Woodbury, attorney for Microbladers which is a permanent make-up training facility. Mr. Woodbury advised that they were pleased with the status of the proposed regulations. Mr. Woodbury stated that they had suggested some amendments but advised they were no longer necessary and was confident in the assurances received. Mr. Woodbury further expressed appreciation for the staff, and members of the Board of Health, for their time and efforts provided to his clients.

David Ruiz, Beloved Family Tattoos, inquired as to the proposed regulations related to the sink requirements. Ms. Shoup advised that the proposed regulations was amended for the sink ratios to be one sink per four workstations, which was a request from the industry.

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

Member Knudsen inquired as the presentation at the State Board of Health. Ms. Shoup advised that if the Board of Health approved the proposed regulations, a presentation would be made to the State Board of Health for final approval.

Member Kirkpatrick inquired whether the sink requirements had to wait until July 1st. Ms. Shoup advised that if the Board of Health approved the proposed regulations, staff would work with industry on the sink requirements prior to July 1st.

Member Kirkpatrick further advised that the body art industry was the easiest to work with during the COVID-19 restriction closures, as they were already the cleanest and most sanitary. Member Kirkpatrick thanked staff and industry on working together.

A motion was made by Member Adams seconded by Member Kirkpatrick and carried unanimously to approve the Environment Health Proposed Body Art Regulations, and the sunset of the current regulations.

VIII. REPORT / DISCUSSION / ACTION

Receive and Approve Recommendations from the March 21, 2022 Finance Committee
 meeting regarding the FY2022-2023 Budget; direct staff accordingly or take other action as
 deemed necessary (for possible action)

Karen White, Chief Financial Officer, presented the FY2022-2023 Budget, which begins on July 1, 2022 and ends on June 30, 2023, with the following highlights:

Overview

- Staffing is projected to grow from 780.1 FTE to 8.25.1 FTE, a 5.8% increase
- 78 positions that were vacant for over 6 months were eliminated and 40 contact tracers are outsourced
- Combined revenues was projected at \$148.4M, a 12.3% increase
- Informatics Department has been reorganized and will be under the Disease Surveillance & Control Division

Revenues - General

- Property tax allocation projected at \$29.7M, an increase of 5.0%
- Charges for Services revenues is \$26.3M, flat compared to current fiscal year; any increase will be reflected in a budget augmentation planned during the next fiscal year

Revenues - Special Revenue

- Grant revenues are projected at \$104M, an increase of 45.7%
- Community Health Grants are projected at \$50.4M, an increase of \$37.9M; ELC Covid Grant total is \$41.3M
- All grants issued on or before 02/28/2022 are included in this budget, a budget augmentation to include future grants will occur next fiscal year

Revenues - Combined Revenues by Source

- Intergovernmental (Grants) \$104M 58%
- Other \$1.7M 1%
- Licenses/Permits \$18.9M 10%
- Charges for Services \$26.3M 15%
- Property Taxes \$29.7M 16%

Expenditures – Combined Expenditures

- General Fund expenditures is \$76.7M, a decrease of 1.1% compared to FY2022
- Combined expenditures for all funds add up to \$180.6M
- Total salaries and benefits for all funds are projected at \$89.6M, about 50% of total expenditures

Ms. White reviewed the Expenditures and Revenues vs. Expenditures by Division. Ms. White then reviewed a 2-year fund reserve projection with the fund reserve percentage. Ms. White outlined and compared the FY2022 and FY2023 Fund Balance for the General Fund, Capital Projects Fund, Bond Reserve (Building) Fund, and Insurance Liability Fund. Ms. White further reviewed the FTE Staffing by Division, comparing FY2022 and FY2023.

Member Nielson provided a summary of the March 21, 2022 Finance Committee meeting.

Dr. Leguen confirmed that the contact tracer positions that were eliminated were contract positions.

A motion was made by Member Nielson, seconded by Chair Black and carried unanimously to accept the recommendations from the Finance Committee and approve the FY2023 Budget, as presented.

2. Receive, Discuss and Approve Billing Fee Schedule Updates; direct staff accordingly or take other action as deemed necessary (for possible action)

Ms. White provided the Clinical Billing Fee Schedule Update and advised that, as there was a more comprehensive review done last year, this year there were only a few fees that needed to be updated, which are mostly new codes or fees that have not been used in the past. Ms. White outlined the updated fees for primary care services and medications and confirmed that patients on the sliding fee scale pay between \$7 and \$22 for medications. Ms. White further outlined two new vaccines that the Community Health Center will start to offer.

Commissioner Kirkpatrick raised the high prices of medications and suggested that the Health District encourage the legislature and/or congressional delegation to bring to light the rising cost of medications. Chair Black suggested that Bradley Mayer could prepare an approach for the Board of Health with the appropriate information/questions to assist the Board of Health to advocate at the state and federal level on the rising cost of medications.

Member Nemec suggested that the Health District providers should only prescribe generic medication. The Board was supportive of a recommendation for Health District physicians, as applicable and as appropriate given their medical training and knowledge, prescribe generic medication, unless there was something contraindicative, before the name-brand medication. Dr. Leguen advised that the recommendation would be used as an educational tool as the best option for the population the Health District served.

A motion was made by Member Knudsen, seconded by Member Adams and carried unanimously to approve the Clinical Billing Fee Schedule Updates, and recommended that Health District physicians, as applicable and as appropriate given their medical training and knowledge, prescribe generic medication, unless there was something contraindicative, before a name-brand medication.

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 of a recent visit to the Immunization Clinic and recognized staff. Member Adams advised that a question on the form referred to 'hearing impaired' and advised that was an outdated term and should be amended to either 'deaf' or 'hard of hearing'.

X. <u>HEALTH OFFICER & STAFF REPORTS (Information Only)</u>

DHO Comments

In addition to the DHO Monthly Report, Dr. Leguen advised that today marked World TB Day, which was celebrated all over the world. Here in Clark County, the Health District's TB Clinic offers TB management services to the community and serves as a reference source to providers. Further, the TB Clinic offers preventive therapy for TB and participates in screening as part of the Refugee Program.

Dr. Leguen advised that the investigation in the Secrets of Siam restaurant was concluded by law enforcement. The Environmental Health Division and Epidemiology Team are still finalizing their investigation.

Dr. Leguen further advised that Clark County was selected for a national study in nutrition, which will approach Clark County residents and offer physical exams and surveys on nutrition. This study will complement the study being conducted by the Federal government across the country. Further to an inquiry from Member Kirkpatrick, Dr. Leguen advised that the residents will be selected randomly.

2020 Southern Nevada Trauma System Report

This item was postponed to the April Board of Health meeting.

Updates to Aquatic Venue Drain Cover Standards

Jeremy Harper, Environmental Health Supervisor, and Candice Konold, Senior Environmental Health Specialist, presented an update on the changes to national standards that impact how drain covers used in pools and spas are tested.

COVID-19 Surveillance and Contact Tracing Update

Dr. Cassius Lockett, Director Disease Surveillance & Control, advised that, from March 6th to 19th, the 7-day moving average of COVID-19 cases declined by 35.7%, with the most cases remaining unvaccinated. The 7-day moving average of hospitalizations, from March 9th to 22nd, declined by 38%, from 184 to 114, with approximately 62% being unvaccinated and of the fully vaccinated 60% being over the age of 65. The 7-day moving average of deaths declined by 34%, from 5.3 to 3.5, 71% being unvaccinated and of the fully vaccinated 100% being over the age of 65. The test positivity rate has declined by 14%.

Member Kirkpatrick inquired whether the Health District was ready in the event there was another surge. Dr. Lockett confirmed that the Health District was ready to respond in short order.

Member Knudsen inquired whether an after-action review would be completed. Member Kirkpatrick advised that one was done on the MACC, with 144 participants that would be submitted to the State for September 1st, and she would share the report.

Dr. Leguen advised that State Senator Donate was also preparing a report on the local response and needs related to the pandemic.

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 Chair closed the Second Public Comment portion.

XIII. ADJOURNMENT

The Chair adjourned the meeting at 10:46 a.m.

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

/acm



MINUTES

SOUTHERN NEVADA DISTRICT BOARD OF HEALTH MEETING

February 24, 2022 – 9:00 a.m. Meeting was conducted via Webex Event

MEMBERS PRESENT: Scott Black – Chair, Council Member, City of North Las Vegas (in-person)

Brian Knudsen – Vice-Chair, Council Member, City of Las Vegas (in-person)

James Adams - Council Member, City of Boulder City (via Webex)

Bobbette Bond – At-Large Member, Regulated Business/Industry (via Webex)

Olivia Diaz – Council Member, City of Las Vegas (via Webex)
Karen Dutkowski – Council Member, City of Mesquite (via Webex)
Marilyn Kirkpatrick – Commissioner, Clark County (in-person)
Frank Nemec – At-Large Member, Physician (in-person)
Scott Nielson – At-Large Member, Gaming (via Webex)

Michelle Romero - Council Member, City of Henderson (via Webex)

Tick Segerblom – Commissioner, Clark County (via Webex)

ABSENT: None

ALSO PRESENT: Linda Anderson, Carl Bottorf, Georgi Collins, Dawn Christensen, Vanessa Dixon, (In Audience) Maya Holmes, Breanna Huber, Col Brent Johnson, Jerry Keating, Lt Col Jeremy

Maya Holmes, Breanna Huber, Col Brent Johnson, Jerry Keating, Lt Col Jeremy Kilburn, Daniel Llamas, Bradley Mayer, Tamara Miramontes, Lindsey Miller, Kathleen Peterson, John Recicar, Pete Ronza, Stacie Sasso, Ryan Scherr, Maj Stephanie Streit, Virginia Valentine, Clinton Wahl, Richard Walker, Cassidy

Wilson

LEGAL COUNSEL: Heather Anderson-Fintak, General Counsel

EXECUTIVE SECRETARY: Fermin Leguen, MD, MPH, District Health Officer

STAFF: Elizabeth Adelman, Adriana Alvarez, Rashida Alvarez, Maria Azzarelli, Mark

Brathwaite, Mary Bulloch, Nicole Bungum, Cory Burgess, Victoria Burris, Donna Buss, Joe Cabanban, Maria Cenabre, Mee Kee Chong-Dao, Andria Cordovez Mulet, Stephanie Cortes, Shea Crippen, Rebecca Cruz-Nanez, Aaron DelCotto, Brandon Delise, Regena Ellis, Joanne Engler, Jennifer, Fennema, Jason Frame, Dominick Franchino, Kimberly Franich, Robert Fyda, Tina Gilliam, Michelle Goodsell, Nicole Grandt, John Hammond, Heather Hanoff, Victoria Harding, Raychel Holbert, Richard Hazeltine, Linly Hazlett, Victoria Hodge, Carmen Hua, Jessica Johnson, Michael Johnson, Chad Kingsley, Candice Konold, Theresa Ladd, Cassius Lockett, Cort Lohff, Leena Lopez, Sandy Luckett, Chris Elaine Mariano, Ryan McGahen, Alicia Mitchell, Deborah Moran, Christy Munaretto, Christian Murua, Mike Neszmery, Francine Oakley, Veralynn Orewyler, Kyle Parkson, Luann Province, Katarina Pulver, Zuwen Qiu-Shultz, Jacquelyn Raiche-Curl, Devin Raman, Larry Rogers, JoAnn Rupiper, Vicki Salomon,

Bergtholdt, Xandee Bernabe, Stephanie Bethel, Ibeth Bojorquez, Sherhonda

Mashawn Sandifer, Christopher Saxton, Karla Shoup, Jennifer Sizemore, Jackie Southam, Dorian Stonebarger, Ronique Tatum-Penegar, Will Thompson, Randall Ulrich, Laura Valentino, Leo Vega, Michelle Villanueva, Karen White,

Edward Wynder, Christian Young

I. CALL TO ORDER and ROLL CALL

The Chair called the Southern Nevada District Board of Health Meeting to order at 9:00 a.m. Andria Cordovez Mulet, Executive Assistant, administered the roll call and confirmed quorum.

II. PLEDGE OF ALLEGIANCE

Member Segerblom joined the meeting at 9:02 a.m. Member Bond joined the meeting at 9:02 a.m.

III. OATH OF OFFICE

There was no oath of office administered.

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 Chair closed the First Public Comment portion.

V. ADOPTION OF THE FEBRUARY 24, 2022 MEETING AGENDA (for possible action)

A motion was made by Member Knudsen, seconded by Member Nemec and carried unanimously to approve the February 24, 2022 Agenda, as amended.

RECOGNITION

On behalf of the Health District and Board of Health, Chair Black recognized JoAnn Rupiper, Chief Administrative Nurse, who will be retiring as of March 1, 2022. Ms. Rupiper, most recently, had oversight of the Clinical Services area and played an integral part to the COVID-19 vaccination efforts. Chair Black expressed the Board's appreciation and acknowledged Ms. Rupiper's service to the Health District.

Chair Black recognized Edward Wynder, the new Associate General Counsel. Mr. Wynder advised that he previously worked at the Health District from 2007-2012 in Environmental Health. At that time, he left the Health District and went to law school.

- VI. <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>: January 27, 2021 (for possible action)
 - 2. PETITION #29-22: Approval of an Interlocal Agreement between the Southern Nevada Health
 District and the Regional Transportation Commission of Southern Nevada to provide
 services to support the SNHD Community Partnership to Promote Health Equity (REACH);
 direct staff accordingly or take other action as deemed necessary (for possible action)

3. PETITION #30-22: Approval of the First Amendment to the Interlocal Sublease Agreement between the Southern Nevada Health District and the City of Las Vegas 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)

A motion was made by Member Knudsen, seconded by Member Nemec and carried unanimously to approve the February 24, 2022 Consent Agenda as presented.

- 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.
 - MEMORANDUM #01-22: Review/Discuss/Approve Environmental Health Business Impact
 Statement on Proposed Body Art Regulations; direct staff accordingly or take other action as deemed necessary (for possible action)

Mark Bergtholdt, Environmental Health Supervisor, presented the Business Impact Statement on the Proposed Body Art Regulations (Attachment #1). Mr. Bergtholdt outlined that currently there were two regulations related to body art facilities, (i) SNHD Regulations Governing the Sanitation and Safety of Tattoo Facilities, and (ii) SNHD Regulations Governing the Sanitation and Safety of Piercing Facilities, neither of which have been updated since 2005. Mr. Bergtholdt further outlined the process taken by staff in reviewing and consolidating the regulations. Mr. Bergtholdt advised that three public workshops were held, along with a small business impact statement hearing and regulation hearing. Further, Business Impact Surveys were sent to the same individuals as the public workshops. Mr. Bergtholdt advised that 25 responses were received; 18 were either neutral or positive and 7 were negative. The negative comments related to the cost of new jewelry standards, number of allowable apprentices for body art and microblading, and cost of increased testing of sterilizers. Following a review of the survey responses, staff made changes to the proposed regulations to mitigate the impact on businesses. In conclusion, (i) the proposed revisions to the regulations were not likely to impose a direct significant economic burden, (ii) directly restrict the formation, operation, or expansion of regulated business, (iii) the proposed regulations will not impact the cost to enforce these regulations, and (iv) there will be no change in the Health District revenue as a result of the regulations. Ms. Bergtholdt advised that a public hearing on the SNHD Regulations Governing the Sanitation and Safety of Body Art Establishments at the March 2022 Board of Health meeting.

Chair Black opened Public Comment.

Member Nielson inquired whether the cost to the Health District for inspections in regulating the industry was appropriate. Ms. Bergtholdt advised that staff reviewed the cost and did not see any increase in the cost to the Health District.

Member Kirkpatrick joined the meeting at 9:14 a.m.

Chair Black advised that he was contacted by a business and received positive feedback on the process of working with staff to address issues raised during the workshops.

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

A motion was made by Member Knudsen seconded by Member Kirkpatrick and carried unanimously to approve the Environment Health Business Impact Statement on Proposed Body Art Regulations.

VIII. REPORT / DISCUSSION / ACTION

 Receive, Discuss and Approve the Mike O'Callaghan Military Medical Center to operate as a Level III Trauma Center within the Southern Nevada Trauma System; direct staff accordingly or take other action as deemed necessary (for possible action)

Col Brent Johnson, MDG Commander of the Mike O'Callaghan Military Medical Center (MOMMC) presented an overview of the trauma experience and the application for the MOMMC to operate as a Level III Trauma Center within the Southern Nevada Trauma System. In summary, Col Johnson advised the positives of designating MOMMC as a Level III Trauma Center:

- Strategically positioned to help the Air Force medical mission and support the community need:
- Develop new and reinforce current partnerships within the community;
- Community support from State and Local Government, educational institutions, and established trauma centers; and
- Participate in State and national data sharing for benchmarking and quality improvement.

Member Nemec inquired as to the activation fees that will be charged. Dr. Jeremy Kilburn advised that the proposed activation fee was \$975. Dr. Stephanie Streit confirmed that the billing process was transparent and fell under the Department of Defence and Defence Health Agency Universal Billing Office.

Member Bond expressed her support and stated this initiative was filling an important role that serves the community.

Member Kirkpatrick expressed her support and thanked staff for their efforts.

Member Romero inquired as to the logistics of receiving ambulance and walk-ins, while maintaining the security of the base. Col Johnson advised that MOMMC is on the opposite side of the highway from Nellis Air Force Base, outlined the procedure for accepting in-bound ambulance and transports, and advised that at present they will not accept walk-ins.

Chair Black advised that a letter of support was submitted by Congressman Horsford (**Attachment #2**).

Chad Kingsley, Regional Trauma Coordinator, outlined the conditions associated with the approval, (i) ACS-COT verification and subsequent renewals, and (ii) participation in the Southern Nevada Trauma System.

A motion was made by Member Nemec, seconded by Member Kirkpatrick and carried unanimously to approve the Mike O'Callaghan Military Medical Center to operate as a Level III Trauma Center within the Southern Nevada Trauma System with the following conditions: (i) ACS-COT verification and subsequent renewals of verification, and (ii) participation in the Southern Nevada Trauma System as designed by the Southern Nevada Trauma System Plan.

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

Richard Walker of Eide Bailly presented the highlights of the Single Audit Report (**Attachment #3**), which was issued February 15, 2022. The salient points outlined were:

- Total Federal Expenditures included in the SEFA \$59,249,774
- Three Programs Audited (i) Coronavirus Relief Fund, (ii) Epidemiology & Lab Capacity, and (iii) FEMA Public Assistance Disaster Grants
- Non non-compliance issues
- Highest type of report offered unmodified
- No difficulties encountered
- No misstatements were identified
- No disagreements with management

Chair Black inquired as to the number of unmodified audits were required to be viewed as low risk. Mr. Walker advised that two consecutive years of unmodified financial audits and single audits were required, and this would be the first in the cycle.

A motion was made by Member Knudsen, seconded by Member Kirkpatrick and carried unanimously to accept the recommendations of the Finance Committee and accept the Single Audit Report.

Member Kirkpatrick recognized the work of the Finance Department.

3. Receive, Discuss and Approve Southern Nevada Health District Updated Clinical Sliding Fee Discount Scale; direct staff accordingly or take other action as deemed necessary (for possible action)

Karen White, Chief Financial Officer, provided an Update to the Clinical Sliding Fee Discount Scale. Ms. White advised that offering a Sliding Fee Schedule for qualifying patients was a requirement for HHS, HRSA and various other pass-through grants. Ms. White advised that the Sliding Fee Schedule was tied to Federal Poverty Guidelines (FPG) that normally changes every year in January; there was an increase of 4.7%.

- Primary Care: Sliding Fees range from \$20 to \$55, then Full Charge for incomes 200% above FPG
- Family Planning: Sliding Fees range from \$0 to \$60, then Full Charge for incomes 200% above FPG
- Sexual Health Clinic: Sliding Fees range from \$20 to \$60, then Full Charge for incomes 250% above FPG
- Ryan White: Sliding Fees range from \$0 to \$55, then Full Charge for incomes 200% above FPG
- Ryan White Limits:
 - Equal to and below 100% No Charge to Patients
 - Over 100% up to and equal to 200% of FPG, patient pays no more than 5% of their total income
 - Over 200% and up to and equal to 300% of FPG, patient pays no more than 7% of their total income
 - Over 300% of FPG, patients pay no more than 10% of their total income
- More than 8 persons, add \$4,540 of allowable income for each additional person

Ms. White outlined the application process for applying for the sliding fee.

Member Segerblom left the meeting at 9:56 a.m. and did not return.

Member Kirkpatrick inquired as to the rates of the FPG. Dr. Leguen advised that staff would share concerns with the HRSA Project Officer and other venues to the attention of the Federal Government. Ms. White also mentioned that it can be raised with the lobbyists that work with the National Association of Community Health Centers.

Ms. White outlined that last year the Health District changed from a percentage of charges to a flat fee and advised that with the change to a flat fee, the Health District is now collecting 83% of what is owed by self-pay patients, as opposed to 42%.

Further to an inquiry from Member Knudsen, Ms. White confirmed that the Sliding Fee Discount Scale was also applicable to the Southern Nevada Community Health Center and was required to be approved on an annual basis.

Member Bond requested information on the distribution of patients related to the sliding fee scale. Ms. White advised that the information was available and committed to provide it at a future meeting.

A motion was made by Member Knudsen, seconded by Member Kirkpatrick and carried unanimously to accept the recommendations of the Finance Committee and approve the Updated Clinical Sliding Fee Discount Scale, as presented.

4. Receive, Discuss and Accept the Classification and Compensation Study Report by Pontifex Consulting Group and Approve Implementation of the Non-represented Employee Classification & Compensation Plan, effective July 9, 2022; direct staff accordingly or take other action as deemed necessary (for possible action)

Jennifer Fennema, Director of Human Resources, introduced Pete Ronza from Pontifex Consulting Group and Jerry Keating, Core 4 Consulting. Ms. Fennema advised that Mr. Ronza was retained to provide a comprehensive review of the classification and compensation, specifically for the non-represented employees, of which are approximately 87, at the Health District. Ms. Fennema further stated that the study was key in recruitment and retention.

Mr. Ronza provided an overview of the Classification and Compensation Study, and outlined that a compensation system attracts, retains and motivates and the purpose of the study being, (i) internal equity, (ii) external competitiveness, (iii) process equity, (iv) culturally appropriate, and (v) financial responsibility. Mr. Ronza outlined the various steps undertaken in their study, including the economic impacts, review of job descriptions, competitive labor market analysis, and labor market competitors.

Dr. Leguen advised that the motivation of this project was that the Health District had been struggling for years to attract and retain talent. Dr. Leguen recognized that salary was not the only solution but it was an important element. As a government organization, Dr. Leguen advised that there was not an intention to match the salaries in the private sector. Dr. Leguen further advised that the intention was to be able to attract and retain talent.

Jerry Keating, Core 4 Consulting, outlined that this study only addresses the non-represented staff. Ms. Keating advised that he, along with Mr. Ronza, Ms. Fennema and Ms. White, met with the executive team of SEIU 1107 to discuss the next steps with the study and how it will affect their members. Mr. Keating advised that in the previous negotiations on the current collective bargaining agreement, there was agreement that further discussions would take place once this study was completed. Mr. Keating advised that leadership is waiting to hear from the SEIU executives on discussions on the next steps. As this implementation plan does not come into effect until July 9,

2022, Mr. Keating advised that it will allow for appropriate budgeting and time to meet with SEIU executives to develop a course of action as it applies to their members.

Further to a question from Member Kirkpatrick, Mr. Keating advised that there was a discrepancy by HR staff in determining whether a position was union or exempt.

Member Kirkpatrick stated that huge strides had been made with the union and she does not want there to be any contentious issues with the union. She suggested that the discussions take place now, with the union representatives on site, and not the SEIU executive team.

Mr. Keating advised that the intention to sit down with the union was sooner rather than later and stated that they are waiting to hear from the union on availability. He continued that the intention was to obtain approval from the Board of Health on the implementation plan to develop clear direction for both represented and non-represented employees, now that the appropriate policies and procedures are in place. Mr. Keating advised that management intention was to sit down with the union to show them the benefits, that will good for all employees.

Member Kirkpatrick advised that all Health District employee have worked tremendously hard these last few years and wanted to ensure that there was open communication. She stated that the Health District can not support the community without the great employees. Member Kirkpatrick stated that any contention with the union ended during COVID-times, with employees working outside of their job classification. She wanted to make clear that the Health District can not go back to a contentious environment with the union.

Dr. Leguen stated that the Health District will not go backwards and would not ignore the employees. He stated that this was something that can be solved; leadership recognized there was an issue and had to address it. Dr. Leguen continued that the positions that were identified have to be addressed with the union and leadership at the Health District. Dr. Leguen stated that leadership has the best interests in addressing this issue properly and does not see the issue with some positions being misaligned as a barrier. Dr. Leguen confirmed that there will not be full implementation of the plan until the issues with the positions was resolved.

Chair Black stated that 87 individuals were outlined in this portion of the study. Chair Black reiterated Member Kirkpatrick's comments that the Health District employees were going above and beyond. He stated that it appeared that the intent was to recruit, retain and motivate these non-represented employees but wanted to confirm that these concepts were for all staff. In essence, a two phased approach (non-represented and represented), with one objective. Chair Black inquired whether the communication and dialogue on the second phase could be expedited.

Mr. Keating advised that the study for all employees was already completed, since when performing a classification and compensation study, the entire organization has to be reviewed. It was only a matter of meeting with SEIU to provide them with the position that applies to their members.

Member Knudsen applauded leadership for raising the issue and asking how the Health District can be better. Member Knudsen requested that the Board of Health be updated on a regular basis on the communication and process.

Ms. Fennema outlined that leadership was requesting acceptance of the classification and compensation study and approval to implement the ranges for the non-represented stuff as of July 9, 2022, to bring employees that are below the minimum range up to the minimum range. The cost for the implementation is approximately \$180,000. Ms. Fennema stated that it would ensure that leadership is moving forward and developing a positive working relationship with the union.

Member Diaz commented that the positions were highly technical and had an expertise that the Health District was competing with nationally. Member Diaz stated that there may be an opportunity

to look at professional development for existing employees. Member Diaz suggested a tracking mechanism on the effectiveness of the plan.

A motion was made by Member Knudsen, seconded by Member Nemec and carried unanimously to (i) accept the Classification and Compensation Study Report, (2) approve the Implementation of the Non-represented Employee Classification & Compensation Plan, effective July 9, 2022, and (3) direct staff to provide monthly updates on the implementation.

Member Bond left the meeting at 11:15 a.m. and did not return.

IX. <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 items raised.

X. <u>HEALTH OFFICER & STAFF REPORTS (Information Only)</u>

DHO Comments

In addition to the DHO Monthly Report, Dr. Leguen raised that 3.4 million doses of the COVID-19 vaccine have been administered in Clark County, 72% of the eligible population have initiated the vaccine process and 58% of the eligible population have completed the vaccine process. Dr. Leguen advised that the influenza season has been mild, which is similar to last year, and a reflection of the mitigation efforts of the community in preventing the spread of COVID-19. Dr. Leguen further advised that February was American Heart Month, with multiple activities across the community, and February 7th was National HIV Awareness Day and the Health District and community partners offered multiple events across the community.

COVID-19 Surveillance and Contact Tracing Update (Attachment #4)

Dr. Cassius Lockett, Director Disease Surveillance & Control, advised that, from February 6-19th, the 7-day moving average of COVID-19 cases declined by 73.6%, from 605 to 159 cases, with the most remaining unvaccinated. The 7-day moving average of hospitalizations, from February 10-23rd, declined by 56%, from 921 to 402, with approximately 80% being unvaccinated and 72% being over the age of 65. The 7-day moving average of deaths declined by 72%, from 17.1 to 4.8. The test positivity rate has declined by 54.8%, from 17.7% to 8%. During the month of February, there was a slight decline of breakthrough cases from 43 to 41%. Further to a question, Dr. Lockett advised that fully vaccinated was classified in his presentation as having two doses of the COVID-19 vaccine.

Member Diaz inquired as to how the breakthrough cases are affecting the various demographics in Clark County. Dr. Lockett advised that staff is still monitoring and addressing health disparities in the community.

Member Nemec inquired as to genome testing and the nasal vaccine. Dr. Lockett confirmed that the Health District has a robust testing capacity and continues to have testing kiosks and clinics in the community. Dr. Lockett advised that there was no release date for the nasal vaccine.

Aquatic Facilities Permitting

Candice Konold, Senior Environmental Health Specialist, presented on the aquatic permit plan review and plan approval process, and outlined the common factors that contribute to a delay in the process.

Member Kirkpatrick inquired as to the timeline for reviewing and approving the permit plans. Karla Shoup, Environmental Health Manager, advised that there was a 30-day window for plan reviewers to review new projects. Member Kirkpatrick inquired as to what could be done to expedite the process. Ms. Shoup advised that additional staff would shorten the review times but there were still constraints with the fee schedule. Member Kirkpatrick advised that the Board of Health should look at the budget and determine if additional staff can be added. Member Nielson inquired whether an expediting fee was available. Ms. Shoup advised that there was an expediting fee for inspections but not plan reviews. Member Nielson indicated that additional resources were required.

XI. <u>INFORMATIONAL ITEMS</u>

- 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. <u>SECOND 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. 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.

Jacquelyn Raiche-Curl, Chief Steward for the Supervisor Unit, SEIU, had comments related to the Class and Compensation Study. Ms. Raiche-Curl stated that the meeting that Pontifex had with the union was with SEIU, Pontifex, Mr. Riccardi; no one from management was present which is highly unusual when discussion business and doing some type of change to policy and procedure. She stated that they cancelled the meeting on behalf of the Health District as they do not consider Mr. Riccardi as SNHD representation. Ms. Raiche-Curl stated that she wanted to clarify that since he went on and on about how many times he was working with the Union. Ms. Raiche-Curl stated that the last two session of negotiations were highly contentious. Ms. Raiche-Curl stated that that last one they had, where they did come up with a very good contract and was thankful for the support that they received from the Board of Health on getting that contract. Ms. Raiche-Curl stated that they had no success in negotiating anything until the last session, at which point all other articles in the contract, except for the wage portion, was held hostage and they were not allowed to open or discuss anything for any other article. Ms. Raiche-Curl stated that they were not allowed to open anything or else they would not approve the wage negotiation section. At which time, Ms. Raiche-Curl stated that, as the supervisor representative, she felt bad that she was not able to adequately represent her unit, being the supervisors who were working extensive hours, beyond a 40-hour work week, many of which 60 to 70 hours through COVID-19 times. Ms. Raiche-Curl stated that she can provide names, and stated that Stephanie, who was a supervisor at the convention center vaccination site, worked 5-6 days a week for 10 hours. Ms. Raiche-Curl stated that she worked 60-70 hours with a broken collarbone and did not take a single day off through that timeframe as incident commander. Ms. Raiche-Curl stated that Mee Kee, who was filling multiple roles as employee health nurse, as well as taking over additional responsibilities, she worked 50-60 hour weeks. Ms. Raiche-Curl stated that there were a number of others that she did not have the names at the top of her head. Ms. Raiche-Curl stated that, at that time, she desperately wanted to negotiate the opportunity for comp time, or the ability to earn that, but was denied even the opportunity because we were told if we didn't take what management was offering out that time that they would not settle the contract and therefore, employees would not get their raises on time because of the state law stating that there is a sunset clause. Ms. Raiche-Curl stated that with the previous contract, the Health District

would not even start negotiations with the supervisors until the May Board of Health meeting, when she had to come to the meeting and petition for the Health District to actually meet with the supervisor unit because they refused to do joint negotiations. Ms. Raiche-Curl stated that their contract expires June 30th. Ms. Raiche-Curl stated that, at the first negotiation session with Mr. Riccardi, she had never been treated so hideously in her life while management sat by mute. She stated that Mr. Riccardi berated them in such a horrific manner. Ms. Raiche-Curl stated that she wished she recorded him to play it back for the Board of Health, because it was the most unprofessional exchange in her career. Ms. Raiche-Curl stated that she appreciated Member Kirkpatrick's comments today. Ms. Raiche-Curl stated that she understood what Dr. Leguen was trying to do but that it would be nice if he started reaching out to the union executives when they reach out to him. Ms. Raiche-Curl stated that she was concerned about pay equity. She stated that they had to fight very hard the last two contracts for any type of raise. Ms. Raiche-Curl stated that just before their last contract, many chief management positions, including Dr. Leguen, receive a raise and many people were just elevated to new directorships. Ms. Raiche-Curl stated that the reason there are retention concerns is because the Health District does not do exit interviews anymore and does not look at the fact that there are certain areas that have great retention issues than others. She stated that if you do not do exit interviews or transfer interviews, why are there some areas where everybody mass exits, while other areas do not have those same problems. Ms. Raiche-Curl stated that if the Health District starts talking to those employees and finding out why are they more likely to work in one area and desperately wanted to leave another, that may give you some insight.

Victoria Harding stated that Ms. Raiche-Curl said a lot that she was going to say. Ms. Harding stated that the attorneys for SEIU will be contacting the Health District because in the Class and Compensation materials approved today there were four bargaining unit eligible employee positions listed, which means that was just an unfair labor practice by bargaining without SEIU related to their job. Ms. Harding stated that she knows these are errors, but the errors occurred because no one sat down and talked to them. Ms. Harding stated that in the last bargaining, she provided the new listing of job classifications, what needed to be there, what needed to be changed for the contract to move forward. The most the Health District did was make a committee to determine what the job classifications that are union eligible and not, and that it has not been discussed with them. Therefore, there is an unfair labor practice that just occurred today because no one listened. Ms. Harding stated that there has been not one communication between the Health District and SEIU and they don't know anything of what is happening. Ms. Harding stated that the Health District is changing the actual job descriptions; they are becoming more general. So, for people working out of class, for determining what duties are in any position, and they are changing titles. Ms. Harding stated that this affects the classification seniority, it affects layoffs, it affects their exemption and overtime, and they are changing so many things. This is not about giving us extra money because we'll take extra money. This is about everything that they are doing to everybody's current job. She Harding stated that we want to find good people and have them come to the Health District, but there will be a mass exodus here in many areas. Ms. Harding stated that it was really dire here. They don't want to be contentious but if they are not invited to the table then they can't help, they can't help the employees, and they can't help the community. Ms. Harding stated that it is time to bring them to the table.

Ryan Scherr, Integrity Pools, expressed his thanks to staff for their work on aquatic facilities permits. He further expressed his frustration from time to time in having aquatic plans processed. He advised that there is an intake, then a 30 days for the review period, they submit comments and then there is a re-review of the entire project which can raise additional issues, with the plan being placed back on the queue for another 30 days, which would lead to 60 or 90 days to get a permit. Mr. Scherr further stated that plans are reviewed by new staff and then reviewed by their supervisors, so then two sets of comments are received for the same project. Mr. Scherr suggested that the process should be the same as the rest of the municipalities, so the plan reviewers are not the inspectors. Mr. Scherr stated that the current process muddles things up because the plan reviewers have to stop what they are doing all the time to go out and do inspectors. Mr. Scherr indicated that his company has lost business because people think that they are taking too long and someone could do it better and faster.

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

XIII. <u>ADJOURNMENT</u>

The Chair adjourned the meeting at 12:09 p.m.

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

/acm



Body Art Regulation Revision Business Impact Statement Presentation

Southern Nevada Health District
Division of Environmental Health
Consumer Health Section
Special Programs Office



Introduction

- Health District regulates tattoo and piercing establishments since late 1990's by regulations adopted under the authority of Nevada Revised Statutes 439.
- There are 473 active permits within Clark County and 3,100 active body art card holders
- During the past year staff have been updating the regulations that govern the sanitation and safety of tattoo and piercing establishments.
- As part of that revision, NRS 237.090 requires a presentation of the Business Impact statement before a public hearing on the regulations.

Drafting the Business Impact Statement

- Staff scheduled three public workshops.
 - December 21, January 6 and January 13
- Notices for the workshops, small business impact statement hearing, and regulation hearing were properly noticed in accordance with NRS 241
- Developed a dedicated webpage with a memorable shortcut (snhd.info/bodyartregs) for posting of
- Advertised webpage on District's home page

Workshops

- The three workshops were attended by 59 body art card and permit holders
- Business impact surveys were sent via email and available during workshops
- Surveys could be submitted until January 31
- Issues that impacted the attendees' businesses included:
 - Standards for jewelry
 - Number of allowed apprentices for body art and microblading
 - Cost of increased testing of sterilizers

Survey Results

- The Health District received 25 surveys
- 18 of the 25 were either neutral or positive about the impact
 - Increased income through more procedure areas
 - Decreased cost of opening because of decreased need for sinks in each procedure area.
- 7 of the 25 had negative comments
 - Cost of new jewelry standards
 - Cost of sterilization indicators
 - Cost of complying with blood borne pathogen requirements

Findings

- Changes made to the proposed regulations to mitigate the impact on businesses.
 - Apprenticeship
 - Jewelry standards
- Industry concerned about blood-borne pathogen standards
 - Regulations reflect current OSHA standards for industry
- Industry concerned about construction requirements
 - Will not affect existing establishments until major remodel or change of permit holder
- Industry concerned about cost of records retention
 - No significant change from current requirements

Conclusions

- After a review of the comments submitted during the public workshops and the data submitted in the form of the business impact survey, Health District staff concluded;
 - 1. The proposed revisions to the regulations are not likely to impose a direct and significant economic burden or
 - 2. Directly restrict the formation, operation, or expansion of regulated businesses.
 - 3. The proposed regulations will not impact the cost to enforce these regulations.
 - 4. There will be no change in the Health District revenue as a result of these regulations.

Next steps

- Approval of the Business Impact Statement
- Holding a public hearing on the SNHD Regulations Governing the Sanitation and Safety of Body Art Establishments at the next SNHD Board of Health Meeting.

Questions





COMMITTEE ON WAYS AND MEANS COMMITTEE ON THE BUDGET COMMITTEE ON ARMED SERVICES

CONGRESS OF THE UNITED STATES HOUSE OF REPRESENTATIVES WASHINGTON, D.C. 20515

Dr. Fermin Leguen, MD, MPH District Health Officer Southern Nevada Health District

Dear Dr. Leguen,

I am writing to express my enthusiastic support for the efforts of the Mike O'Callaghan Military Medical Center (MOMMC) at Nellis Air Force Base (AFB) to receive a designation as a Level III Trauma Center.

The MOMMC has received initial approval from the State of Nevada to apply for the Level 3 designation, subject to approval by the Southern Nevada Health District (SNHD), and I strongly urge the State and the District to complete the next steps leading to final approval of this application.

Nellis AFB is located in an area that is experiencing a shortage of trauma care and has been identified by the Health Resources and Services Administration, an agency of the U.S. Department of Health and Human Services, as an area that also has a shortage of healthcare providers. To address these shortages, MOMMC has collaborated with the Southern Nevada Health District and local emergency medical service agencies for the past two years, facilitating a long-term sustainable and mutually beneficial relationship.

During the critical care pilot program between August 1, 2020, and July 31, 2021, MOMMC cared for 100 non-Department of Defense patients. This pilot helped MOMMC and Nellis AFB to craft and perfect a process allowing outside agencies and individuals access to the base. In addition, this partnership enhances United States military medical response and treatment capabilities to ensure every Soldier, Airman and Marine injured in battle has optimal trauma response, enhancing their chance for survival.

In short, the care provided by the Mike O'Callaghan Military Medical Center fills a critical need in both our military and civilian communities, and I encourage your strong consideration of this application, which will take that care to the next level. In the meantime, if you have any questions, please feel free to reach out to Larry Hamm (larry.hamm@mail.house.gov) in my office or by phone at (702) 963-9371. Thank you in advance for your time and consideration.

Congressman Steven Horsford 4th District, Nevada

DC OFFICE 562 Cannon House Office Building WASHINGTON, DC 20515 PHONE: 202-225-9894

DISTRICT OFFICE 2550 N Las Vegas Blvd, Suite 500 NORTH LAS VEGAS, NV 89030

PHONE: 702-963-9360



CPAs & BUSINESS ADVISORS

SOUTHERN NEVADA HEALTH DISTRICT

Single Audit

REPORT OVERVIEW

- Reporting package includes three audit reports
 - Independent Auditors Report Issued November 17, 2021
 - Auditor's Report Government Auditing Standards Issued November 17, 2021
 - Single Audit Report Issued February 15, 2022



SINGLE AUDIT OVERVIEW

- Total Federal Expenditures included in the SEFA
 - \$59,249,774
- Three programs were audited
 - Coronavirus relief Fund CFDA 21.019
 - Epidemiology & Lab Capacity CFDA 93.323
 - FEMA Public Assistance Disaster Grants 97.036
- Schedule of Findings and Questioned Costs
 - No noncompliance issues identified related to Federal programs
- Type of Report Issued
 - Unmodified



REQUIRED COMMUNICATIONS WITH GOVERNANCE

- This Communication is an addendum to the required communications presented in November 2021
- No significant difficulties encountered during the single audit
- No misstatements were identified as a result of our single audit procedures
- No disagreements with Management



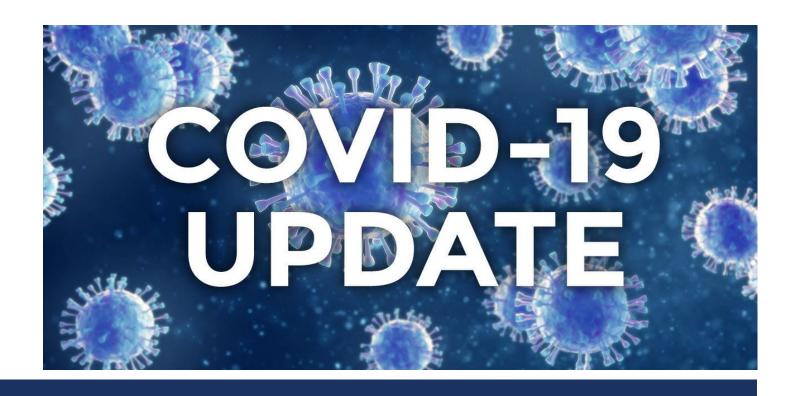


CPAs & BUSINESS ADVISORS

QUESTIONS?

This presentation is presented with the understanding that the information contained does not constitute legal, accounting or other professional advice. It is not intended to be responsive to any individual situation or concerns, as the contents of this presentation are intended for general information purposes only. Viewers are urged not to act upon the information contained in this presentation without first consulting competent legal, accounting or other professional advice regarding implications of a particular factual situation. Questions and additional information can be submitted to your Eide Bailly representative, or to the presenter of this session.





CASSIUS LOCKETT, PHD

Director of Disease Surveillance & Control February 24, 2022

SNHD COVID-19 DASHBOARD: CASES

COVID-19 Case Summary

Data updated: February 22, 12:00 AM

Total Confirmed Cases: 486,576 (20989.6 per 100K)

Total Probable Cases: (per 100K per 30-Day Period)

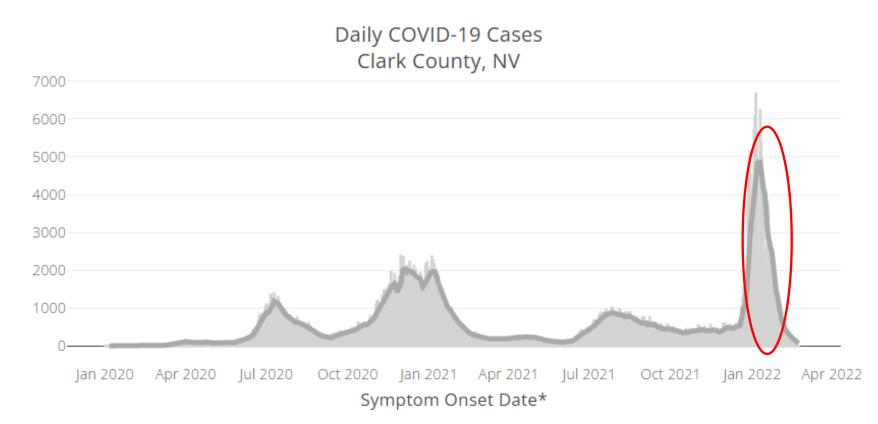
Probable Cases (14 Day Average):

Multisystem Inflammatory Syndrome in Children (MIS-C) Cases:

Total Hospitalizations: 24,481 (1056.0 per 100K)

Total Deaths: 7,371 (318.0 per 100K)

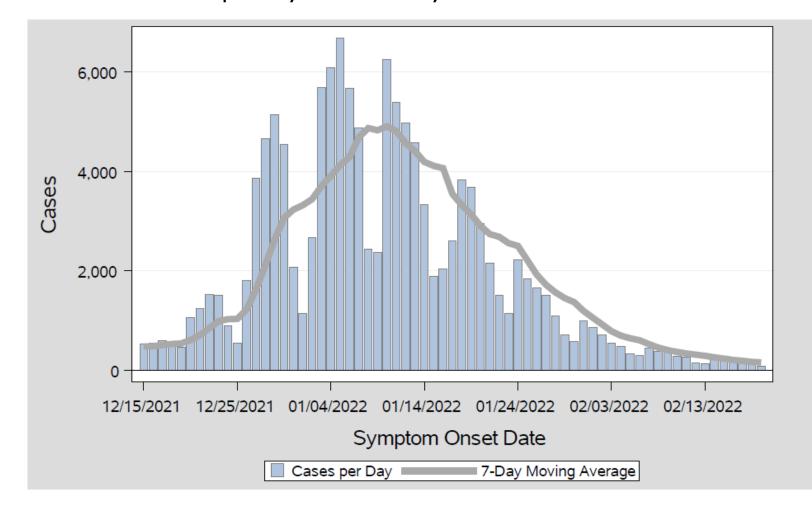
Cases Reported in Last 7 Days: 1,088 (46.9 per 100K)



http://www.southernnevadahealthdistrict.org/covid-19-dashboard/

Data as of Feb 22nd

COVID-19 Cases per Day, Clark County, Nevada

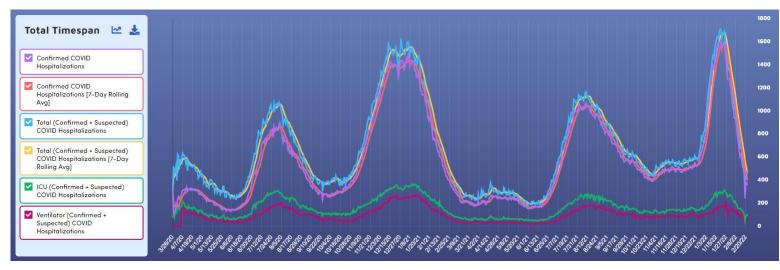


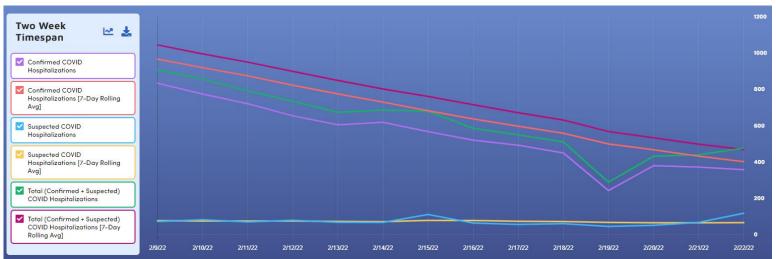
COVID-19 CASES

RECENT TRENDS

Data as of Feb 22nd

COVID-19 Hospitalizations, Clark County NV

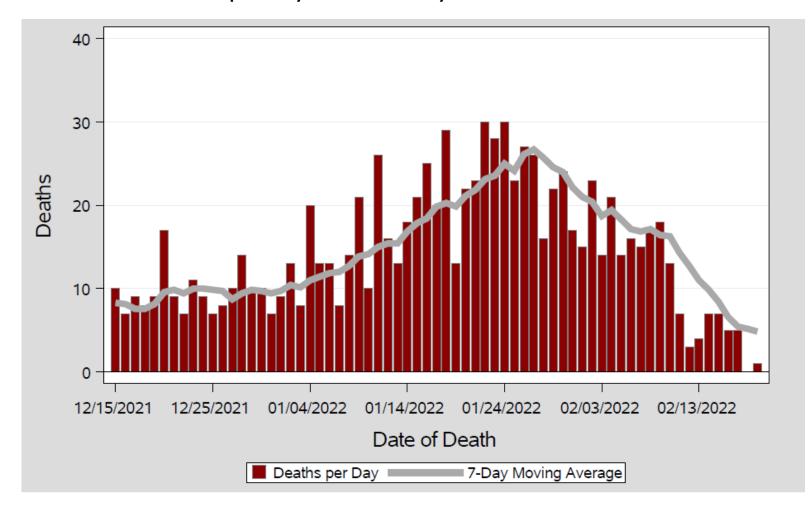




COVID-19 HOSPITALIZATION

RECENT TRENDS

COVID-19 **Deaths** per Day, Clark County, NV

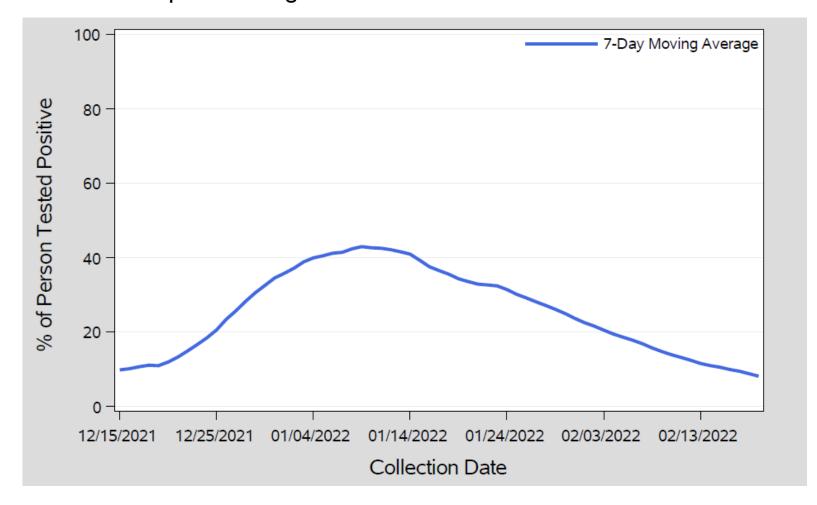


COVID-19 DEATHS

RECENT TRENDS

Data as of Feb 22nd

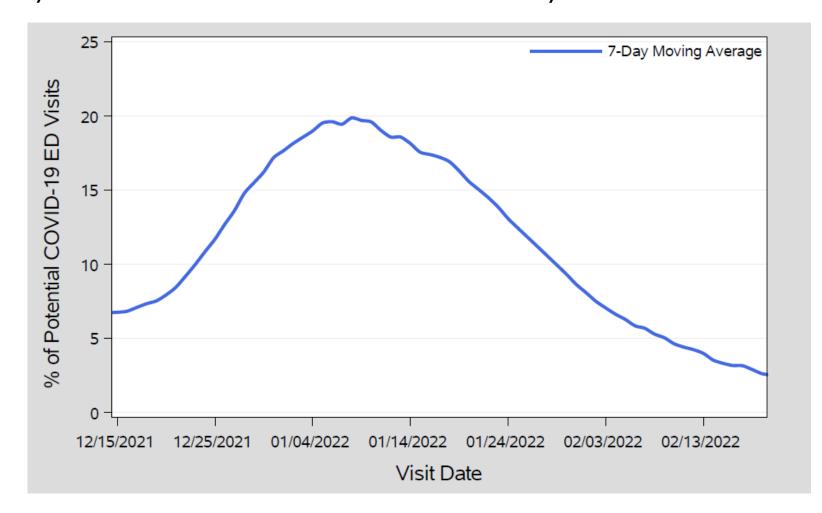
Percent of People Receiving COVID-19 Viral Tests Who Have Positive Results



Data as of Feb 22nd

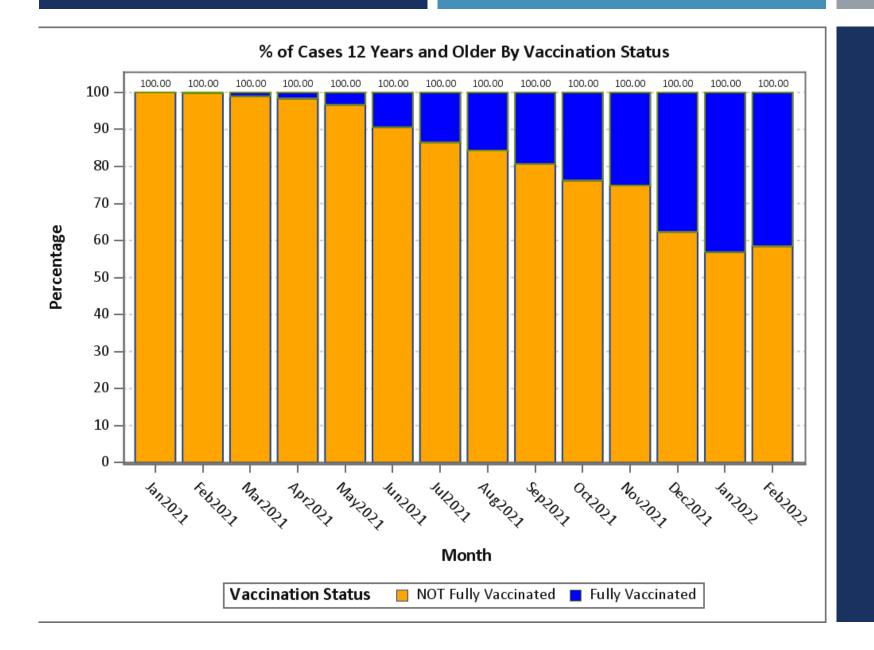
COVID-19 VIRAL TESTS

Syndromic Surveillance: Percent of EDVisits Potentially Related to COVID-19

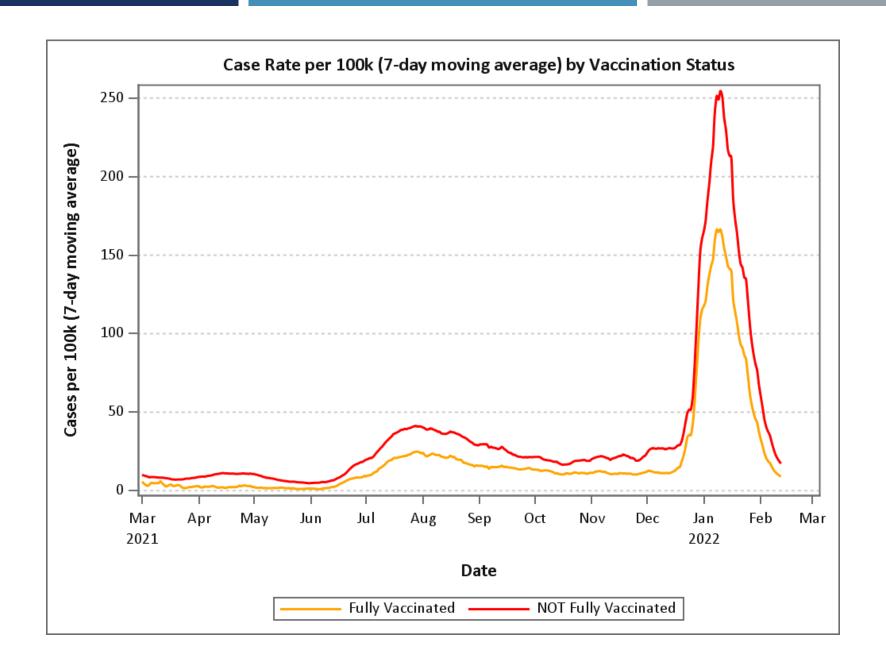


Data as of Feb 22nd

SYNDROMIC SURVEILLANCE



PERCENTAGE OF CASES AMONG 12 YEARS+ BY VACCINATION STATUS



INVESTIGATORS, CONTACT TRACERS, CALL CENTER STAFF

Case Investigations and Contact Tracers

ELC CT Staff: 47 in house (as of Feb 25, 2022)

- Priority COVID investigations including outbreaks and school support team
- Assist with specimen collection at
 - Community testing sites
 - Three CSN testing sites
 - METS clinic at SNHD (3-6 CTs)

100 contracted CTs on original team; contract extended through September 2022

150 contact tracers (ends February 2022)

Questions





TO: SOUTHERN NEVADA DISTRICT BOARD OF HEALTH DATE: March 24, 2022

RE: Approval of amendment to Interlocal Agreement with the Nevada Division of Public and Behavioral Health to extend the current agreement through May 29, 2026

PETITION #32-22

That the Southern Nevada District Board of Health approve the attached Amendment between the Bureau of Behavioral Health Wellness and Prevention within the Nevada Division of Public and Behavioral Health and the Southern Nevada Health District (SNHD).

PETITIONERS:

Fermin Leguen, MD, MPH, District Health Officer FL
Cassius Lockett, PhD, Director of Disease Surveillance and Control CL
Victoria Burris, MPH, Communicable Disease Manager VB

DISCUSSION:

This amendment is between the Bureau of Behavioral Health Wellness and Prevention within the Nevada Division of Public and Behavioral Health and the Southern Nevada Health District (SNHD). It is the second amendment to the original interlocal agreement which provides Resilience Ambassadors (RAs) to the SNHD Office of Disease Surveillance as part of the Nevada Resiliency Project's response to the COVID-19 pandemic. The amendment extends this agreement, which was originally set to expire on May 30,2022, through May 29, 2026.

Case and contact names, phone numbers, email addresses, and primary spoken language will be provided to the RA supervisor as a daily report. The RA supervisor will assign clients to the RAs, who will then call and/or email the clients to initiate social and behavioral health services.

FUNDING:

There is no cost associated with this petition.

CETS# N/A	BA 3170
REF# C 17946	CAT: 27/14
	GL 7060

INTERLOCAL CONTRACT BETWEEN PUBLIC AGENCIES

A Contract Between the State of Nevada Acting by and through its Department of Health and Human Services Division of Public and Behavioral Health

Public Entity #1:	Bureau of Behavioral Health and Wellness and Prevention
Address:	4126 Technology Way, Suite 200
City, State, Zip Code:	Carson City, Nevada 8706
Contact:	Dawn Yohey
Phone:	775-461-6533
Email:	dyohey@health.nv.gov

Public Entity #2:	Southern Nevada Health District
Address:	280 South Decatur Boulevard
City, State, Zip Code:	Las Vegas, Nevada 89701
Contact:	Karen White, Chief Financial Officer
Phone:	702-268-0390
Email:	Cfo.grants@snhd.org

WHEREAS, NRS 277.180 authorizes any one or more public agencies to contract with any one or more other public agencies to perform any governmental service, activity or undertaking which any of the public agencies entering into the contract is authorized by law to perform; and

WHEREAS, it is deemed that the services hereinafter set forth are both necessary and in the best interests of the State of Nevada.

NOW, THEREFORE, in consideration of the aforesaid premises, the parties mutually agree as follows:

1. **REQUIRED APPROVAL**. This Contract shall not become effective until and unless approved by appropriate official action of the governing body of each party.

2. **DEFINITIONS**

TERM	DEFINITION	
State	The State of Nevada and any State agency identified herein, its officers, employees and immune contractors.	
Contracting Entity	The public entities identified above.	
Fiscal Year	The period beginning July 1st and ending June 30th of the following year.	
Contract	Unless the context otherwise requires, 'Contract' means this document titled Interlocal Contract Between Public Agencies and all Attachments or Incorporated Documents.	

CETS# N/A	BA 3170		
REF# C 17946	CAT: 27/14		
	GL 7060		

3. **CONTRACT TERM.** This Contract shall be effective as noted below, unless sooner terminated by either party as specified in **Section 4**, **Termination**.

Effective From:	May 30, 2022	To:	May 29, 2026
Effective Floin.	Iviay 50, 2022	1	Way 29, 2020

- 4. **TERMINATION**. This Contract may be terminated by either party prior to the date set forth in **Section 3**, **Contract Term**, provided that a termination shall not be effective until <u>30</u> days after a party has served written notice upon the other party. This Contract may be terminated by mutual consent of both parties or unilaterally by either party without cause. The parties expressly agree that this Contract shall be terminated immediately if for any reason State and/or federal funding ability to satisfy this Contract is withdrawn, limited, or impaired.
- 5. **NOTICE**. All communications, including notices, required or permitted to be given under this Contract shall be in writing and directed to the parties at the addresses stated above. Notices may be given: (a) by delivery in person; (b) by a nationally recognized next day courier service, return receipt requested; or (c) by certified mail, return receipt requested. If specifically requested by the party to be notified, valid notice may be given by facsimile transmission or email to the address(es) such party has specified in writing.
- 6. **INCORPORATED DOCUMENTS**. The parties agree that this Contract, inclusive of the following Attachments, specifically describes the Scope of Work. This Contract incorporates the following Attachments in descending order of constructive precedence:

ATTACHMENT A:	SCOPE OF WORK AND DELIVERABLES
ATTACHMENT B:	BUSINESS ASSOCIATE ADDENDUM

Any provision, term or condition of an Attachment that contradicts the terms of this Contract, or that would change the obligations of the State under this Contract, shall be void and unenforceable.

7. **CONSIDERATION**. The parties agree that the services specified in *Section 6, Incorporated Documents* at a cost as noted below:

\$ 0					
Total Contract or installments paya	ıble at:				
Total Contract Not to Exceed:	\$ 0.00		H	 	

Any intervening end to a biennial appropriation period shall be deemed an automatic renewal (not changing the overall Contract term) or a termination as the result of legislative appropriation may require.

8. **ASSENT**. The parties agree that the terms and conditions listed in the incorporated Attachments of this Contract are also specifically a part of this Contract and are limited only by their respective order of precedence and any limitations expressly provided.

9. INSPECTION & AUDIT

A. <u>Books and Records</u>. Each party agrees to keep and maintain under general accepted accounting principles full, true and complete records, agreements, books, and document as are necessary to fully disclose to the State or United States Government, or their authorized representatives, upon audits or reviews, sufficient information to determine compliance with all State and federal regulations and statutes.

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- B. <u>Inspection & Audit</u>. Each party agrees that the relevant books, records (written, electronic, computer related or otherwise), including but not limited to relevant accounting procedures and practices of the party, financial statements and supporting documentation, and documentation related to the work product shall be subject, at any reasonable time, to inspection, examination, review, audit, and copying at any office or location where such records may be found, with or without notice by the State Auditor, Employment Security, the Department of Administration, Budget Division, the Nevada State Attorney General's Office or its Fraud Control Units, the State Legislative Auditor, and with regard to any federal funding, the relevant federal agency, the Comptroller General, the General Accounting Office, the Office of the Inspector General, or any of their authorized representatives.
- C. <u>Period of Retention</u>. All books, records, reports, and statements relevant to this Contract must be retained a minimum three years and for five years if any federal funds are used in this Contract. The retention period runs from the date of termination of this Contract. Retention time shall be extended when an audit is scheduled or in progress for a period reasonably necessary to complete an audit and/or to complete any administrative and judicial litigation which may ensue.
- 10. **BREACH REMEDIES**. Failure of either party to perform any obligation of this Contract shall be deemed a breach. Except as otherwise provided for by law or this Contract, the rights and remedies of the parties shall not be exclusive and are in addition to any other rights and remedies provided by law or equity, including but not limited to actual damages, and to a prevailing party reasonable attorneys' fees and costs. It is specifically agreed that reasonable attorneys' fees shall not exceed \$150.00 per hour.
- 11. **LIMITED LIABILITY**. The parties will not waive and intend to assert available NRS Chapter 41 liability limitations in all cases. Contract liability of both parties shall not be subject to punitive damages. Actual damages for any State breach shall never exceed the amount of funds which have been appropriated for payment under this Contract, but not yet paid, for the fiscal year budget in existence at the time of the breach.
- 12. **FORCE MAJEURE**. Neither party shall be deemed to be in violation of this Contract if it is prevented from performing any of its obligations hereunder due to strikes, failure of public transportation, civil or military authority, acts of public enemy, acts of terrorism, accidents, fires, explosions, or acts of God, including, without limitation, earthquakes, floods, winds, or storms. In such an event the intervening cause must not be through the fault of the party asserting such an excuse, and the excused party is obligated to promptly perform in accordance with the terms of the Contract after the intervening cause ceases.
- 13. INDEMNIFICATION. Neither party waives any right or defense to indemnification that may exist in law or equity.
- 14. **INDEPENDENT PUBLIC AGENCIES**. The parties are associated with each other only for the purposes and to the extent set forth in this Contract, and in respect to performance of services pursuant to this Contract, each party is and shall be a public agency separate and distinct from the other party and, subject only to the terms of this Contract, shall have the sole right to supervise, manage, operate, control, and direct performance of the details incident to its duties under this Contract. Nothing contained in this Contract shall be deemed or constructed to create a partnership or joint venture, to create relationships of an employer-employee or principal-agent, or to otherwise create any liability for one agency whatsoever with respect to the indebtedness, liabilities, and obligations of the other agency or any other party.
- 15. WAIVER OF BREACH. Failure to declare a breach or the actual waiver of any particular breach of the Contract or its material or nonmaterial terms by either party shall not operate as a waiver by such party of any of its rights or remedies as to any other breach.
- 16. **SEVERABILITY**. If any provision contained in this Contract is held to be unenforceable by a court of law or equity, this Contract shall be construed as if such provision did not exist and the non-enforceability of such provision shall not be held to render any other provision or provisions of this Contract unenforceable.
- 17. **ASSIGNMENT**. Neither party shall assign, transfer or delegate any rights, obligations or duties under this Contract without the prior written consent of the other party.

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- 18. OWNERSHIP OF PROPRIETARY INFORMATION. Unless otherwise provided by law any reports, histories, studies, tests, manuals, instructions, photographs, negatives, blue prints, plans, maps, data, system designs, computer code (which is intended to be consideration under this Contract), or any other documents or drawings, prepared or in the course of preparation by either party in performance of its obligations under this Contract shall be the joint property of both parties.
- 19. PUBLIC RECORDS. Pursuant to NRS 239.010, information or documents may be open to public inspection and copying. The parties will have the duty to disclose unless a particular record is made confidential by law or a common law balancing of interests.
- 20. **CONFIDENTIALITY**. Each party shall keep confidential all information, in whatever form, produced, prepared, observed or received by that party to the extent that such information is confidential by law or otherwise required by this Contract.
- 21. **FEDERAL FUNDING**. In the event, federal funds are used for payment of all or part of this Contract, the parties agree to comply with all applicable federal laws, regulations and executive orders, including, without limitation the following:
 - A. The parties certify, by signing this Contract, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in this transaction by any federal department or agency. This certification is made pursuant to Executive Orders 12549 and 12689 and Federal Acquisition Regulation Subpart 9.4, and any relevant program-specific regulations. This provision shall be required of every subcontractor receiving any payment in whole or in part from federal funds.
 - B. The parties and its subcontractors shall comply with all terms, conditions, and requirements of the Americans with Disabilities Act of 1990 (P.L. 101-136), 42 U.S.C. 12101, as amended, and regulations adopted thereunder, including 28 C.F.R. Section 35, inclusive, and any relevant program-specific regulations.
 - C. The parties and its subcontractors shall comply with the requirements of the Civil Rights Act of 1964 (P.L. 88-352), as amended, the Rehabilitation Act of 1973 (P.L. 93-112), as amended, and any relevant program-specific regulations, and shall not discriminate against any employee or offeror for employment because of race, national origin, creed, color, sex, religion, age, disability or handicap condition (including AIDS and AIDS-related conditions.)
 - D. Clean Air Act (42 U.S.C. 7401–7671q.) and the Federal Water Pollution Control Act (33 U.S.C. 1251–1387), as amended. Contracts and subgrants of amounts in excess of \$150,000 must contain a provision that requires the non-Federal award to agree to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act (42 U.S.C. 7401–7671q) and the Federal Water Pollution Control Act as amended (33 U.S.C. 1251–1387). Violations must be reported to the Federal awarding agency and the Regional Office of the Environmental Protection Agency (EPA).
- 22. **PROPER AUTHORITY**. The parties hereto represent and warrant that the person executing this Contract on behalf of each party has full power and authority to enter into this Contract and that the parties are authorized by law to perform the services set forth in *Section 6, Incorporated Documents*.
- 23. **GOVERNING LAW JURISDICTION**. This Contract and the rights and obligations of the parties hereto shall be governed by, and construed according to, the laws of the State of Nevada. The parties consent to the exclusive jurisdiction of and venue in the First Judicial District Court, Carson City, Nevada for enforcement of this Contract.
- 24. ENTIRE AGREEMENT AND MODIFICATION. This Contract and its integrated Attachment(s) constitute the entire agreement of the parties and as such are intended as a complete and exclusive statement of the promises, representations, negotiations, discussions, and other agreements that may have been made in connection with the subject matter hereof. Unless an integrated Attachment to this Contract specifically displays a mutual intent to amend a particular part of this Contract, general conflicts in language between any such Attachment and this Contract shall be construed consistent with the terms of this Contract. Unless otherwise expressly authorized by the terms of this Contract, no modification or amendment to this Contract shall be binding upon the parties unless the same is in writing and signed by the respective parties hereto, approved by the Office of the Attorney General.

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IN WITNESS WHEREOF, the parties hereto have caused this Contract to be signed and intend to be legally bound thereby. SOUTHER NEVADA HEALTH DISTRICT Public Entity #1 Authorized Signature Title Date DIVISION OF PUBLIC AND BEHAVIORAL HEALTH Administrator, DPBH Lisa Sherych Date Title DEPARTMENT OF HEALTH AND HUMAN SERVICES Director, DHHS Richard Whitley, MS Date Title APPROVED BY BOARD OF EXAMINERS Signature – Board of Examiners On: Date Approved as to form by: Date Deputy Attorney General for Attorney General

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ATTACHMENT A

SCOPE OF WORK AND DELIVERABLES

CETS# N/A	BA 3170
REF# C 17946	CAT: 27/14
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Scope of Work Substance Abuse and Mental Health Services Administration (SAMHSA), Crisis Counseling Program (CCP)

Southern Nevada Health District, hereinafter referred to as Health District, agrees to provide the following services and reports according to the identified timeframes:

The Crisis Counseling Program (CCP) is a supplemental assistance program available to Substance Abuse Block Grant (SABG) and Health Disparity (HD) to fund mental health assistance and training activities in areas which have been Presidentially declared a disaster.

The mission of the CCP is to assist individuals and communities in recovering from the effects of natural and human-caused disasters, as well as behavioral and substance use concerns. CCP also addresses health disparities in our high-risk and underserved communities through the provision of community-based outreach and psycho-educational services. The CCP supports short-term interventions that involve the counseling goals of assisting disaster survivors in understanding their current situation and reactions, mitigating stress, assisting survivors in reviewing their disaster recovery options, promoting the use or development of coping strategies, providing emotional support, and encouraging linkages with other individuals and agencies who may help survivors in their recovery process (recover to their pre-disaster level of functioning). The State of Nevada, Department of Health and Human Services (DHHS), Division of Public and Behavioral Health (DPBH), has been provided the Program Award.

PURPOSE:

The Nevada CCP program serves to provide early triage, intervention, and referral of services in response to the impacts of COVID-19 on Nevada's population. Early triage, intervention, and referral to services can reduce the risk of mental health disorders for those impacted by COVID-19. Expansion of crisis services is necessary to ensure individuals, families, and communities are provided supports to build resiliency and to ensure linkage and referral to needed services and timely access to care. Nevada's CCP is focused on a population health approach that encourages health coping and active stressor management, resiliency, and compassion. Nevada's CCP program builds upon existing resources within the state, county, and local communities and recognizes the inherent value in community outreach and partnerships

The CCP provides Resilience Ambassadors to community-based organizations to meet the need of the state. The program is not intended for those that are seriously mentally ill (SMI), but to enhance Nevada's healthcare workforce, which has been operating under crisis since March 2020. Health District has been identified as a key partner to support the delivery of CCP services to Clark County in Nevada.

The key difference between traditional mental health services and crisis counseling is the way services are provided. In contrast to the crisis counseling services provided through the CCP, mental health treatment, as typically defined within the mental health community, implies the provision of assistance to individuals for an existing pathological condition or disorder. Typically, the mental health professional and client will discuss various treatment options and agree to certain interventions and treatment goals.

Crisis counseling individual and group encounters serve to engage people and encourage them to talk about their experiences and teaches ways to manage stress. These activities can help Resilience Ambassadors identify people who may need referrals to behavioral health treatment. They also enhance social and emotional connections to others in the community and promote effective coping strategies and resilience. Resilience Ambassadors work closely with community organizations to familiarize themselves with available resources and to link impacted population to needed services.

ELIGIBLE SERVICES:

The Resilience Ambassador(s) assigned to **Health District** provides the following services to achieve the mission and support Nevadans.

Individual Crisis Counseling: Helps survivors understand their reactions, improve coping strategies, review their
options, and connect with other individuals and agencies that may assist them.

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- Basic Supportive or Educational Contact: General support and information on resources and services available to disaster survivors.
- Group Crisis Counseling: Group sessions led by trained Resilience Ambassadors who offer skills to help survivors
 cope with their situations and reactions.
- Public Education: Information and education about typical reactions, helpful coping strategies, and available disaster-related resources.
- Community Networking and Support: Relationship building with community resource organizations, Faith-based groups, and local agencies.
- Assessment, Referral, and Resource Linkage: Adult and child needs assessment and referral to additional disaster relief services or mental health or substance abuse treatment.
- Distribution of Educational Materials: Flyers, brochures, tip sheets, educational materials, and Web site
 information developed and distributed by CCP staff.

CCP PROGRAM CAPACITY:

The Division of Public and Behavioral Health will provide up to four (4) community Resilience Ambassador to be embedded within the **Health District** to provide eligible services. Capacity will be determined based on caseload, COVID-19 community need, and based on reported services. Engagement of Ambassador or reassignment of Ambassador will be based on program activity and joint review of program support by both Southern Nevada Health District and Division of Public and Behavioral Health.

DELIVERY OF SERVICES:

Due to the COVID-19 nationwide emergency and the need to protect the safety and health of all Americans, crisis counseling services will be delivered by in-person following Centers for Disease Control COVID-19 protocols and any Executive Directive issued by the State of Nevada Governor, via phone, internet, virtually and through social media. Delivery of services requires that each Resilience Ambassador has personal protective equipment, engages in social distancing, and IS not placed in direct contact with individuals without appropriate safeguards. It is expected that many Resilience Ambassador services can be delivered virtually without in-person interactions, which is consistent with the practice of social distancing to prevent the spread of COVID-19. In addition, Resilience Ambassadors are not considered essential in-person services during a pandemic. For those ambassadors that are embedded within community-based organizations and who will be providing services on-site, ambassadors are not to be placed in an environment which does not have the appropriate level of safeguards or an environment which is heavily impacted by COVID-19.

CCP MODEL:

The CCP is designed to provide immediate behavioral health support, primarily relying on face-to-face contacts with survivors in their communities and/or through phone or internet based on recommendations from the CDC. The CCP provides these support-centered services to survivors or those impacted by COVID.

Eight key principles guide the CCP approach.

- 1. Strengths-based: Resilience ambassadors assume natural resilience in individuals and communities, and promote independence rather than dependence on the CCP, other people, or organizations. Resilience ambassadors help survivors regain a sense of control.
- 2. Outreach-oriented: Resilience ambassadors take services into the communities rather than wait for survivors to come to them.
- 3. More practical than psychological in nature: CCP is designed to prevent or mitigate adverse repercussions of disasters rather than to treat them. Resilience ambassadors provide support and education, listen to survivors, and accept the content at face value. Resilience ambassadors help survivors to develop a plan to address self-identified needs and suggest connections with other individuals or organizations that can assist them.

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- 4. **Diagnosis-free**: Resilience ambassadors do not classify, label, or diagnose people; they keep no records or case files. The CCP does not provide mental health or substance use treatment, or critical incident stress debriefing. Services are supportive and educational in nature.
- 5. Conducted in nontraditional settings: Resilience ambassadors make contact with survivors in their homes and communities, not in clinical or office settings.
- **6. Culturally aware:** The CCP model embraces cultural and spiritual diversity as reflected in culturally relevant outreach activities that represent the communities served.
- 7. Designed to strengthen existing community support systems: Resilience ambassadors support, but do not organize or manage, community recovery activities. Likewise, the CCP supplements, but does not supplant or replace, existing community systems.
- 8. Provided in ways that promote a consistent program identity: Resilience ambassadors should work together early to establish a unified identity. The CCP strives to be a single, easily identifiable program, with services delivered by various local agencies.

SOUTHERN NEVADA HEALTH DISTRICT SHALL:

- Actively participate with the State's CCP Program by embedding Resilience Ambassador into the COVID-19 process and providing a workstation following COVID-19 protocols;
- · Participate in monthly program and caseload reviews, and engage with outreach and communication;
- Communicate with Resilience Ambassador Supervisor and identify resources required for the Ambassador to include additional training, review, or challenges with expectations of services;
- Site Coordinators are allowed to attend CCP training at no cost;
- Approve or reject potential candidates provided through the State's Master Service Agreement (MSA) for Temporary Employment Services;
- Allow candidate to participate and complete all required training;
- Allow access of the Resilience Ambassador Supervisor to the Crisis Counselor on-site.
- COVID RESPONSIBILITIES:
 - All Centers for Disease Control and Prevention (CDC) and State of Nevada Governor Executive Directives must be complied with. This includes ensuring that each CCP Resilience Ambassadors has personal protective equipment, engages in social distancing, and is not placed in direct contact with individuals without appropriate safeguards. Appropriate safeguards may include a barrier or separate to prevent direct exposure. It is expected that many Resilience Ambassador services can be delivered virtually without in-person interactions, which is consistent with the practice of social distancing to prevent the spread of COVID-19. In addition, Resilience Ambassadors are not considered essential in-person services during a pandemic. For those ambassadors that are embedded within community-based organizations and who will be providing services on-site, ambassadors are not to be placed in an environment which does not have the appropriate level of safeguards or an environment which is heavily impacted by COVID-19. The potential of contagion to staff and/or survivors is too great a risk to take to jeopardize the safety of our team members. As part of the guidance for Nevada, face coverings and social distancing is required. Community-based organizations are required to provide hand sanitizer, personal protective equipment (PPE) and to mitigate risk to employees and those who utilize services. In addition, each community-based organization is required to provide DPBH with the precautions and guidance being required at each facility in response to COVID-19 as part of the CCP.
- Allow access to case information for those who agree to be contacted by a Resilience ambassador. The RA supervisor will receive a daily report, generated and emailed by the Health District's Informatics staff, comprised of consenting client information collected from the TriSano system, to include case and contact names, phone numbers, email addresses, and primary spoke language. The RA supervisor will assign clients to the Resilience

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ambassador, who will then call and/or email the clients to initiate services. Client lists will be stored in Excel spreadsheet on DBPH laptops and will be deleted 2-3 business days after creation. All lists, printed or electronic, will be stored and destroyed in accordance with HIPAA requirements.

DIVISION OF PUBLIC AND BEHAVIORAL HEALTH SHALL:

- Provide access to all required training for Resilience Ambassador and Southern Nevada Health District coordination staff assigned to Resilience Ambassador, Site Coordinator and designated key staff;
- Provide computer, hot spot for internet access and phone to Resilience Ambassador in the event services are required after May 29, 2022;
- Provide joint coordination of Resilience Ambassador,
- Ensure data collection tools are available for the Resilience Ambassador;
- Engage in weekly meetings with Resilience Ambassador Supervisor for program evaluation;
- Engage with Resilience Ambassador for Quality Improvement and review of data collection;
- Provide payment directly to Resilience Ambassador at no expense to Southern Nevada Health District;
- Process all data and reporting required for the federal grant award;
- Engage the Southern Nevada Health District in communication, outreach and program updates.
- · Providing regular data reports, and
- Provide the mental health training and engagement with Resilience Ambassador.
- Honor and observe, in connection with the transactions contemplated by this Contract, any and all applicable laws prohibiting the transfer of personally identifiable information about individuals.

Any contractor utilized or retained by the Division of Public and Behavioral Health shall have Worker's Compensation insurance and insurance in commercially reasonable amounts covering the types of work or services that such contractor shall perform in accordance with this Contract. The State shall assist Health District with obtaining contractor proof of insurance coverage as needed.

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ATTACHMENT B

Business Associate Addendum

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ATTACHMENT B BUSINESS ASSOCIATE ADDENDUM

BETWEEN

Division of Public and Behavioral Health Bureau of Behavioral Health Wellness and Prevention

Hereinafter referred to as the "Covered Entity"

and

Southern Nevada Health District

Hereinafter referred to as the "Business Associate"

PURPOSE. In order to comply with the requirements of HIPAA and the HITECH Act, this Addendum is hereby added and made part of the Contract between the Covered Entity and the Business Associate. This Addendum establishes the obligations of the Business Associate and the Covered Entity as well as the permitted uses and disclosures by the Business Associate of protected health information it may possess by reason of the Contract. The Covered Entity and the Business Associate shall protect the privacy and provide for the security of protected health information disclosed to the Business Associate pursuant to the Contract and in compliance with the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 ("HIPAA"), the Health Information Technology for Economic and Clinical Health Act, Public Law 111-5 ("the HITECH Act"), and regulation promulgated there under by the U.S. Department of Health and Human Services (the "HIPAA Regulations") and other applicable laws.

WHEREAS, the Business Associate will provide certain services to the Covered Entity, and, pursuant to such arrangement, the Business Associate is considered a business associate of the Covered Entity as defined in HIPAA, the HITECH Act. the Privacy Rule and Security Rule; and

WHEREAS, Business Associate may have access to and/or receive from the Covered Entity certain protected health information, in fulfilling its responsibilities under such arrangement; and

WHEREAS, the HIPAA Regulations, the HITECH Act, the Privacy Rule and the Security Rule require the Covered Entity to enter into a contract containing specific requirements of the Business Associate prior to the disclosure of protected health information, as set forth in, but not limited to, 45 CFR Parts 160 & 164 and Public Law 111-5.

THEREFORE, in consideration of the mutual obligations below and the exchange of information pursuant to this Addendum, and to protect the interests of both Parties, the Parties agree to all provisions of this Addendum.

- I. DEFINITIONS. The following terms shall have the meaning ascribed to them in this Section. Other capitalized terms shall have the meaning ascribed to them in the context in which they first appear.
 - 1. **Breach** means the unauthorized acquisition, access, use, or disclosure of protected health information which compromises the security or privacy of the protected health information. The full definition of breach can be found in 42 USC 17921 and 45 CFR 164.402.
 - 2. **Business Associate** shall mean the name of the organization or entity listed above and shall have the meaning given to the term under the Privacy and Security Rule and the HITECH Act. For full definition refer to 45 CFR 160.103.
 - 3. CFR stands for the Code of Federal Regulations.
 - 4. Contract shall refer to this Addendum and that particular Contract to which this Addendum is made a part.

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- 5. Covered Entity shall mean the name of the Division listed above and shall have the meaning given to such term under the Privacy Rule and the Security Rule, including, but not limited to 45 CFR 160.103.
- 6. Designated Record Set means a group of records that includes protected health information and is maintained by or for a covered entity or the Business Associate that includes, but is not limited to, medical, billing, enrollment, payment, claims adjudication, and case or medical management records. Refer to 45 CFR 164.501 for the complete definition.
- 7. **Disclosure** means the release, transfer, provision of, access to, or divulging in any other manner of information outside the entity holding the information as defined in 45 CFR 160.103.
- 8. Electronic Protected Health Information means individually identifiable health information transmitted by electronic media or maintained in electronic media as set forth under 45 CFR 160.103.
- 9. **Electronic Health Record** means an electronic record of health-related information on an individual that is created, gathered, managed, and consulted by authorized health care clinicians and staff. Refer to 42 USC 17921.
- 10. Health Care Operations shall have the meaning given to the term under the Privacy Rule at 45 CFR 164.501.
- 11. Individual means the person who is the subject of protected health information and is defined in 45 CFR 160.103.
- 12. Individually Identifiable Health Information means health information, in any form or medium, including demographic information collected from an individual, that is created or received by a covered entity or a business associate of the covered entity and relates to the past, present, or future care of the individual. Individually identifiable health information is information that identifies the individual directly or there is a reasonable basis to believe the information can be used to identify the individual. Refer to 45 CFR 160.103.
- 13. Parties shall mean the Business Associate and the Covered Entity.
- 14. **Privacy Rule** shall mean the HIPAA Regulation that is codified at 45 CFR Parts 160 and 164, Subparts A, D and E.
- 15. Protected Health Information means individually identifiable health information transmitted by electronic media, maintained in electronic media, or transmitted or maintained in any other form or medium. Refer to 45 CFR 160.103 for the complete definition.
- 16. Required by Law means a mandate contained in law that compels an entity to make a use or disclosure of protected health information and that is enforceable in a court of law. This includes but is not limited to: court orders and court-ordered warrants; subpoenas, or summons issued by a court; and statues or regulations that require the provision of information if payment is sought under a government program providing public benefits. For the complete definition refer to 45 CFR 164.103.
- 17. Secretary shall mean the Secretary of the federal Department of Health and Human Services (HHS) or the Secretary's designee.
- 18. Security Rule shall mean the HIPAA regulation that is codified at 45 CFR Parts 160 and 164 Subparts A and C.
- 19. **Unsecured Protected Health Information** means protected health information that is not rendered unusable, unreadable, or indecipherable to unauthorized individuals through the use of a technology or methodology specified by the Secretary in the guidance issued in Public Law 111-5. Refer to 42 USC 17932 and 45 CFR 164.402.
- 20. USC stands for the United States Code.

II. OBLIGATIONS OF THE BUSINESS ASSOCIATE.

- Access to Protected Health Information. The Business Associate will provide, as directed by the Covered Entity, an individual or the Covered Entity access to inspect or obtain a copy of protected health information about the Individual that is maintained in a designated record set by the Business Associate or, its agents or subcontractors, in order to meet the requirements of the Privacy Rule, including, but not limited to 45 CFR 164.524 and 164.504(e) (2) (ii) (E). If the Business Associate maintains an electronic health record, the Business Associate or, its agents or subcontractors shall provide such information in electronic format to enable the Covered Entity to fulfill its obligations under the HITECH Act, including, but not limited to 42 USC 17935.
- Access to Records. The Business Associate shall make its internal practices, books and records relating to the use
 and disclosure of protected health information available to the Covered Entity and to the Secretary for purposes of
 determining Business Associate's compliance with the Privacy and Security Rule in accordance with 45 CFR
 164.504(e)(2)(ii)(H).
- Accounting of Disclosures. Promptly, upon request by the Covered Entity or individual for an accounting of disclosures, the Business Associate and its agents or subcontractors shall make available to the Covered Entity or the individual information required to provide an accounting of disclosures in accordance with 45 CFR 164.528,

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- and the HITECH Act, including, but not limited to 42 USC 17935. The accounting of disclosures, whether electronic or other media, must include the requirements as outlined under 45 CFR 164.528(b).
- 4. Agents and Subcontractors. The Business Associate must ensure all agents and subcontractors to whom it provides protected health information agree in writing to the same restrictions and conditions that apply to the Business Associate with respect to all protected health information accessed, maintained, created, retained, modified, recorded, stored, destroyed, or otherwise held, transmitted, used or disclosed by the agent or subcontractor. The Business Associate must implement and maintain sanctions against agents and subcontractors that violate such restrictions and conditions and shall mitigate the effects of any such violation as outlined under 45 CFR 164.530(f) and 164.530(e)(1).
- 5. Amendment of Protected Health Information. The Business Associate will make available protected health information for amendment and incorporate any amendments in the designated record set maintained by the Business Associate or, its agents or subcontractors, as directed by the Covered Entity or an individual, in order to meet the requirements of the Privacy Rule, including, but not limited to, 45 CFR 164.526.
- 6. Audits, Investigations, and Enforcement. The Business Associate must notify the Covered Entity immediately upon learning the Business Associate has become the subject of an audit, compliance review, or complaint investigation by the Office of Civil Rights or any other federal or state oversight agency. The Business Associate shall provide the Covered Entity with a copy of any protected health information that the Business Associate provides to the Secretary or other federal or state oversight agency concurrently with providing such information to the Secretary or other federal or state oversight agency. The Business Associate and individuals associated with the Business Associate are solely responsible for all civil and criminal penalties assessed as a result of an audit, breach, or violation of HIPAA or HITECH laws or regulations. Reference 42 USC 17937.
- Breach or Other Improper Access, Use or Disclosure Reporting. The Business Associate must report to the Covered Entity, in writing, any access, use or disclosure of protected health information not permitted by the Contract, Addendum or the Privacy and Security Rules. The Covered Entity must be notified immediately upon discovery or the first day such breach or suspected breach is known to the Business Associate or by exercising reasonable diligence would have been known by the Business Associate in accordance with 45 CFR 164.410, 164.504(e)(2)(ii)(C) and 164.308(b) and 42 USC 17921. The Business Associate must report any improper access, use or disclosure of protected health information by: The Business Associate or its agents or subcontractors. In the event of a breach or suspected breach of protected health information, the report to the Covered Entity must be in writing and include the following: a brief description of the incident; the date of the incident; the date the incident was discovered by the Business Associate; a thorough description of the unsecured protected health information that was involved in the incident; the number of individuals whose protected health information was involved in the incident; and the steps the Business Associate is taking to investigate the incident and to protect against further incidents. The Covered Entity will determine if a breach of unsecured protected health information has occurred and will notify the Business Associate of the determination. If a breach of unsecured protected health information is determined, the Business Associate must take prompt corrective action to cure any such deficiencies and mitigate any significant harm that may have occurred to individual(s) whose information was disclosed inappropriately.
- 8. **Breach Notification Requirements.** If the Covered Entity determines a breach of unsecured protected health information by the Business Associate has occurred, the Business Associate will be responsible for notifying the individuals whose unsecured protected health information was breached in accordance with 42 USC 17932 and 45 CFR 164.404 through 164.406. The Business Associate must provide evidence to the Covered Entity that appropriate notifications to individuals and/or media, when necessary, as specified in 45 CFR 164.404 and 45 CFR 164.406 has occurred. The Business Associate is responsible for all costs associated with notification to individuals, the media or others as well as costs associated with mitigating future breaches. The Business Associate must notify the Secretary of all breaches in accordance with 45 CFR 164.408 and must provide the Covered Entity with a copy of all notifications made to the Secretary.
- 9. **Breach Pattern or Practice by Covered Entity.** Pursuant to 42 USC 17934, if the Business Associate knows of a pattern of activity or practice of the Covered Entity that constitutes a material breach or violation of the Covered Entity's obligations under the Contract or Addendum, the Business Associate must immediately report the problem to the Secretary.
- 10. **Data Ownership.** The Business Associate acknowledges that the Business Associate or its agents or subcontractors have no ownership rights with respect to the protected health information it accesses, maintains, creates, retains, modifies, records, stores, destroys, or otherwise holds, transmits, uses or discloses.
- 11. Litigation or Administrative Proceedings. The Business Associate shall make itself, any subcontractors, employees, or agents assisting the Business Associate in the performance of its obligations under the Contract or

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Addendum, available to the Covered Entity, at no cost to the Covered Entity, to testify as witnesses, or otherwise, in the event litigation or administrative proceedings are commenced against the Covered Entity, its administrators or workforce members upon a claimed violation of HIPAA, the Privacy and Security Rule, the HITECH Act, or other laws relating to security and privacy.

- 12. Minimum Necessary. The Business Associate and its agents and subcontractors shall request, use and disclose only the minimum amount of protected health information necessary to accomplish the purpose of the request, use or disclosure in accordance with 42 USC 17935 and 45 CFR 164.514(d)(3).
- 13. Policies and Procedures. The Business Associate must adopt written privacy and security policies and procedures and documentation standards to meet the requirements of HIPAA and the HITECH Act as described in 45 CFR 164.316 and 42 USC 17931.
- 14. **Privacy and Security Officer(s).** The Business Associate must appoint Privacy and Security Officer(s) whose responsibilities shall include: monitoring the Privacy and Security compliance of the Business Associate; development and implementation of the Business Associate's HIPAA Privacy and Security policies and procedures; establishment of Privacy and Security training programs; and development and implementation of an incident risk assessment and response plan in the event the Business Associate sustains a breach or suspected breach of protected health information.
- 15. Safeguards. The Business Associate must implement safeguards as necessary to protect the confidentiality, integrity, and availability of the protected health information the Business Associate accesses, maintains, creates, retains, modifies, records, stores, destroys, or otherwise holds, transmits, uses or discloses on behalf of the Covered Entity. Safeguards must include administrative safeguards (e.g., risk analysis and designation of security official), physical safeguards (e.g., facility access controls and workstation security), and technical safeguards (e.g., access controls and audit controls) to the confidentiality, integrity and availability of the protected health information, in accordance with 45 CFR 164.308, 164.310, 164.312, 164.316 and 164.504(e)(2)(ii)(B). Sections 164.308, 164.310 and 164.312 of the CFR apply to the Business Associate of the Covered Entity in the same manner that such sections apply to the Covered Entity. Technical safeguards must meet the standards set forth by the guidelines of the National Institute of Standards and Technology (NIST). The Business Associate agrees to only use or disclose protected health information as provided for by the Contract and Addendum and to mitigate, to the extent practicable, any harmful effect that is known to the Business Associate, of a use or disclosure, in violation of the requirements of this Addendum as outlined under 45 CFR 164.530(e)(2)(f).
- 16. **Training.** The Business Associate must train all members of its workforce on the policies and procedures associated with safeguarding protected health information. This includes, at a minimum, training that covers the technical, physical and administrative safeguards needed to prevent inappropriate uses or disclosures of protected health information; training to prevent any intentional or unintentional use or disclosure that is a violation of HIPAA regulations at 45 CFR 160 and 164 and Public Law 111-5; and training that emphasizes the criminal and civil penalties related to HIPAA breaches or inappropriate uses or disclosures of protected health information. Workforce training of new employees must be completed within 30 days of the date of hire and all employees must be trained at least annually. The Business Associate must maintain written records for a period of six years. These records must document each employee that received training and the date the training was provided or received.
- 17. Use and Disclosure of Protected Health Information. The Business Associate must not use or further disclose protected health information other than as permitted or required by the Contract or as required by law. The Business Associate must not use or further disclose protected health information in a manner that would violate the requirements of the HIPAA Privacy and Security Rule and the HITECH Act.
- III. PERMITTED AND PROHIBITED USES AND DISCLOSURES BY THE BUSINESS ASSOCIATE. The Business Associate agrees to these general use and disclosure provisions:

1. Permitted Uses and Disclosures:

- a. Except as otherwise limited in this Addendum, the Business Associate may use or disclose protected health information to perform functions, activities, or services for, or on behalf of, the Covered Entity as specified in the Contract, provided that such use or disclosure would not violate the HIPAA Privacy and Security Rule or the HITECH Act, if done by the Covered Entity in accordance with 45 CFR 164.504(e) (2) (i) and 42 USC 17935 and 17936.
- b. Except as otherwise limited by this Addendum, the Business Associate may use or disclose protected health information received by the Business Associate in its capacity as a Business Associate of the Covered Entity, as necessary, for the proper management and administration of the Business Associate, to carry out the legal

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- responsibilities of the Business Associate, as required by law or for data aggregation purposes in accordance with 45 CFR 164.504(e)(2)(A), 164.504(e)(4)(i)(A), and 164.504(e)(2)(i)(B).
- c. Except as otherwise limited in this Addendum, if the Business Associate discloses protected health information to a third party, the Business Associate must obtain, prior to making any such disclosure, reasonable written assurances from the third party that such protected health information will be held confidential pursuant to this Addendum and only disclosed as required by law or for the purposes for which it was disclosed to the third party. The written agreement from the third party must include requirements to immediately notify the Business Associate of any breaches of confidentiality of protected health information to the extent it has obtained knowledge of such breach. Refer to 45 CFR 164.502 and 164.504 and 42 USC 17934.
- d. The Business Associate may use or disclose protected health information to report violations of law to appropriate federal and state authorities, consistent with 45 CFR 164.502(j)(1).

2. Prohibited Uses and Disclosures:

- a. Except as otherwise limited in this Addendum, the Business Associate shall not disclose protected health information to a health plan for payment or health care operations purposes if the patient has required this special restriction and has paid out of pocket in full for the health care item or service to which the protected health information relates in accordance with 42 USC 17935.
- b. The Business Associate shall not directly or indirectly receive remuneration in exchange for any protected health information, as specified by 42 USC 17935, unless the Covered Entity obtained a valid authorization, in accordance with 45 CFR 164.508 that includes a specification that protected health information can be exchanged for remuneration.

IV. OBLIGATIONS OF COVERED ENTITY

- 1. The Covered Entity will inform the Business Associate of any limitations in the Covered Entity's Notice of Privacy Practices in accordance with 45 CFR 164.520, to the extent that such limitation may affect the Business Associate's use or disclosure of protected health information.
- 2. The Covered Entity will inform the Business Associate of any changes in, or revocation of, permission by an individual to use or disclose protected health information, to the extent that such changes may affect the Business Associate's use or disclosure of protected health information.
- 3. The Covered Entity will inform the Business Associate of any restriction to the use or disclosure of protected health information that the Covered Entity has agreed to in accordance with 45 CFR 164.522 and 42 USC 17935, to the extent that such restriction may affect the Business Associate's use or disclosure of protected health information.
- 4. Except in the event of lawful data aggregation or management and administrative activities, the Covered Entity shall not request the Business Associate to use or disclose protected health information in any manner that would not be permissible under the HIPAA Privacy and Security Rule and the HITECH Act, if done by the Covered Entity.

V. TERM AND TERMINATION

1. Effect of Termination:

- a. Except as provided in paragraph (b) of this section, upon termination of this Addendum, for any reason, the Business Associate will return or destroy all protected health information received from the Covered Entity or created, maintained, or received by the Business Associate on behalf of the Covered Entity that the Business Associate still maintains in any form and the Business Associate will retain no copies of such information.
- b. If the Business Associate determines that returning or destroying the protected health information is not feasible, the Business Associate will provide to the Covered Entity notification of the conditions that make return or destruction infeasible. Upon a mutual determination that return, or destruction of protected health information is infeasible, the Business Associate shall extend the protections of this Addendum to such protected health information and limit further uses and disclosures of such protected health information to those purposes that make return or destruction infeasible, for so long as the Business Associate maintains such protected health information.
- c. These termination provisions will apply to protected health information that is in the possession of subcontractors, agents, or employees of the Business Associate.

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GL 7060

- 2. Term. The Term of this Addendum shall commence as of the effective date of this Addendum herein and shall extend beyond the termination of the contract and shall terminate when all the protected health information provided by the Covered Entity to the Business Associate, or accessed, maintained, created, retained, modified, recorded, stored, or otherwise held, transmitted, used or disclosed by the Business Associate on behalf of the Covered Entity, is destroyed or returned to the Covered Entity, or, if it not feasible to return or destroy the protected health information, protections are extended to such information, in accordance with the termination.
- 3. **Termination for Breach of Contract**. The Business Associate agrees that the Covered Entity may immediately terminate the Contract if the Covered Entity determines that the Business Associate has violated a material part of this Addendum.

VI. MISCELLANEOUS

- 1. **Amendment.** The parties agree to take such action as is necessary to amend this Addendum from time to time for the Covered Entity to comply with all the requirements of the Health Insurance Portability and Accountability Act (HIPAA) of 1996, Public Law No. 104-191 and the Health Information Technology for Economic and Clinical Health Act (HITECH) of 2009, Public Law No. 111-5.
- 2. Clarification. This Addendum references the requirements of HIPAA, the HITECH Act, the Privacy Rule and the Security Rule, as well as amendments and/or provisions that are currently in place and any that may be forthcoming.
- 3. **Indemnification.** Each party will indemnify and hold harmless the other party to this Addendum from and against all claims, losses, liabilities, costs and other expenses incurred as a result of, or arising directly or indirectly out of or in conjunction with:
 - a. Any misrepresentation, breach of warranty or non-fulfillment of any undertaking on the part of the party under this Addendum; and
 - b. Any claims, demands, awards, judgments, actions, and proceedings made by any person or organization arising out of or in any way connected with the party's performance under this Addendum.
- 4. Interpretation. The provisions of the Addendum shall prevail over any provisions in the Contract that may conflict or appear inconsistent with any provision in this Addendum. This Addendum and the Contract shall be interpreted as broadly as necessary to implement and comply with HIPAA, the HITECH Act, the Privacy Rule and the Security Rule. The parties agree that any ambiguity in this Addendum shall be resolved to permit the Covered Entity and the Business Associate to comply with HIPAA, the HITECH Act, the Privacy Rule and the Security Rule.
- 5. **Regulatory Reference.** A reference in this Addendum to a section of the HITECH Act, HIPAA, the Privacy Rule and Security Rule means the sections as in effect or as amended.
- 6. Survival. The respective rights and obligations of Business Associate under Effect of Termination of this Addendum shall survive the termination of this Addendum.

IN WITNESS WHEREOF, the Business Associate and the Covered Entity have agreed to the terms of the above written agreement.

Compliance with this section is acknowledged by signing the contract signature page of this packet.

Reference C2200117

Interlocal Contract – Revised: December 2021



TO: SOUTHERN NEVADA DISTRICT BOARD OF HEALTH DATE: 3/24/2022

RE: Approval of the Interlocal Agreement Between Clark County, Nevada on behalf of the Department of Family Services and the Southern Nevada Health District

PETITION #33-22

That the Southern Nevada District Board of Health approve the attached Interlocal Agreement between Clark County, Nevada on behalf of the Department of Family Services and the Southern Nevada Health District for services provided to the Thrive by Zero to Three Prevention Services Program for the period from April 2022 (date of award) to September 30, 2022.

PETITIONERS:

Margarita DeSantos, RN, BSN, Community Health Nurse Manager MD

Cortland Lohff, MD, MPH, Chief Medical Officer and Director of Primary and Preventative Care

Fermin Leguen, MD, MPH, District Health Officer

DISCUSSION:

The Interlocal Agreement allows the Southern Nevada Health District to contact families and provide home visiting services to families with children ages zero to three years, who have been brought to the attention of the Department of Family Services, but do not meet the requirement of an investigation to prevent harm and neglect. Prevention services will be based on the Healthy Start model, using a Community Health Worker approach. Services provided will include parent education and skill development, referrals to needed community resources for physical, mental, emotional, and financial stability, and identifying supportive relationships for families. These services will be provided by community health workers supported by a community health nurse to ensure the safety of children ages zero to three years. The budget period is from April 2022 to September 30,2022.

FUNDING:

The funding for this agreement of up to \$150,000 was made available to the Southern Nevada Health District from Clark County, Nevada on behalf of the Department of Family Services. This funding will cover the following: salaries and fringe benefits for 2 FTE (2,296 hours) community health workers, 0.6 FTE (618 hours) for the community health nurse, 0.06 FTE (62 hours) for the Community Health Nursing Supervisor for training and supervision, 0.7 FTE (764 hours) for the Program Coordinator for assistance with training and maintenance of daily operations, and 0.6 FTE (651 hours) of an administrative assistant for data entry and clerical support.

CBE NO. 606087-21

INTERLOCAL AGREEMENT THRIVE BY ZERO TO THREE PREVENTION SERVICES

This INTERLOCAL AGREEMENT herein after referred to as "AGREEMENT" is entered into on this , 2022 by and between CLARK COUNTY, Nevada, on behalf of the Department of Family Services, hereinafter referred to as "COUNTY" and SOUTHERN NEVADA HEALTH DISTRICT, hereinafter referred to as "SNHD" for THRIVE BY ZERO TO THREE PREVENTION **SERVICES**

WITNESSETH:

WHEREAS, NRS 277.180 authorizes public agencies to contract with any one or more other public agencies to perform any governmental service, activity, or undertaking which any of the public agencies entering into the contract is authorized by law to perform;

WHEREAS, NRS 432B.290(2)(m) authorizes an organization that has entered into a written agreement with an agency that provides child welfare services to provide assessments or services and that has been trained to make such assessments or provide such services;

WHEREAS, SNHD is the public health authority for Clark County, Nevada, organized pursuant to NRS Chapter 439, and governed by the Southern Nevada Health District Board of Health;

WHEREAS, the County, through its Clark County Department of Family Services, hereinafter referred to as CCDFS, desires to have the services of SNHD to assist CCDFS in preventing harm and neglect to children ages zero to three who have come to the attention of CCDFS, but do not meet the requirement of investigation; and

WHEREAS, SNHD has the expertise, qualifications and resources available, and has agreed to provide the resources necessary to prevent and/or mitigate the effects of child neglect and abuse intervention services to children as required.

NOW, THEREFORE, the parties mutually agree as follows:

ARTICLE I: SCOPE OF WORK

SNHD will provide goods and/or services set forth in Exhibit A - Scope of Work attached hereto as project action.

ARTICLE II: TERM OF AGREEMENT

The term of this AGREEMENT shall be from date of award through September 30, 2022. Notwithstanding the foregoing provision, either party may terminate AGREEMENT, without cause, upon giving ninety (90) days written notice to the other party. In the event the Budget Act and Fiscal Fund Out provision is invoked, AGREEMENT shall expire June 30th of the current fiscal year. Termination due to the failure of COUNTY or SNHD to appropriate monies shall not relieve the parties' obligations under AGREEMENT incurred through June 30th of the fiscal year for which monies were appropriated for their operations.

ARTICLE III: PRICE, PAYMENT, AND SUBMISSION OF INVOICE

COUNTY agrees to pay SNHD for goods and/or services provided as outlined in Exhibit A, Scope of Work, for not to exceed amount of \$150,000, based on approved budget appropriations.

If COUNTY rejects an invoice as incomplete, SNHD will be notified within thirty (30) calendar days of receipt and SNHD will have thirty (30) days to correct the invoice and resubmit.

Invoices shall be submitted as follows:

DFS Fiscal Unit 500 S. Grand Central Parkway, 5th floor Las Vegas, Nevada 89155

SNHD must notify COUNTY in writing of any changes to SNHD'S remit payment address or other pertinent information that may affect issuance of payment, and allow thirty (30) days for the change to be processed.

COUNTY is not responsible for late payments on inaccurate invoices and/or incomplete or unsatisfactory deliverables or milestones. COUNTY does not pay late fees or charges. Final payment may be withheld until all deliverables have been submitted and accepted or final services have been rendered.

ARTICLE IV: FISCAL FUNDING OUT CLAUSE

In accordance with the Nevada Revised Statutes (NRS 354.626), the financial obligations under AGREEMENT between the parties shall not exceed those monies appropriated and approved by COUNTY for the then current fiscal year under the Local Government Budget Act. AGREEMENT shall terminate and COUNTY'S obligations under it shall be extinguished at the end of any of COUNTY'S fiscal years in which COUNTY'S governing body fails to appropriate monies for the ensuing fiscal year sufficient for the payment of all amounts which could then become due under AGREEMENT. COUNTY agrees that this section shall not be utilized as a subterfuge or in a discriminatory fashion as it relates to AGREEMENT. In the event this section is invoked, AGREEMENT will expire on the 30th day of June of the current fiscal year. Termination under this section shall not relieve COUNTY of its obligations incurred through the 30th day of June of the fiscal year for which monies were appropriated.

ARTICLE V: AMENDMENT / ENTIRE AGREEMENT

Amendment to AGREEMENT may be made only upon mutual consent in writing, by the parties hereto and executed with the same formality attending the original. Executed AGREEMENT, together with any attachments, contains the entire agreement between COUNTY and SNHD relating to the rights granted and obligations assumed by the parties hereto. Any prior agreements, promises, negotiations or representations, either oral or written, relating to the subject matter of agreement not expressly set forth in AGREEMENT are of no force or effect.

ARTICLE VI: SUBCONTRACTS

AGREEMENT is entered into to secure the services of SNHD. Services specified in this AGREEMENT shall not be subcontracted by SNHD without the written consent of COUNTY.

ARTICLE VII: ASSIGNMENTS

Neither party may assign or delegate all or any part of AGREEMENT without the written consent of both parties, and executed with the same formality as attending this original.

ARTICLE VIII: NOTICES

Any notice required or permitted to be given hereunder shall be in writing and shall either be delivered personally to the party to whom such notice is given, or sent to it by United States registered or certified mail, postage prepaid and return receipt requested, addressed or delivered to such party at the address or addresses designated below (or such other address or addresses as may hereafter be designated by a party) by written notice to the other party:

To COUNTY: Department of Family Services

> Attention: Administrator of Human Services 121 South Martin Luther King Boulevard

Las Vegas, Nevada 89106

To SNHD Southern Nevada Health District

Attention: Veralynn Orewyler

Contract Administrator, Legal Department

280 South Decatur Boulevard Las Vegas, Nevada 89107

ARTICLE IX: POLICIES AND PROCEDURES

SNHD agrees to abide by all quality assurance, utilization review, peer review and consultation, standardized reporting, credentialing, and policies and procedures mutually established by COUNTY and SNHD.

ARTICLE X: INSURANCE

SNHD, at its own expense, agrees to obtain and maintain in full force and effect during the term of this AGREEMENT, insurance in commercially reasonable amounts calculated to protect itself and the COUNTY from any and all claims of any kind of nature for damage to property or personal injury, including death, made by anyone, that may arise from activities performed or facilitated by this AGREEMENT. Such insurance shall include medical malpractice coverage on SNHD's employees and officers as applicable.

ARTICLE XI: WAIVER AND SEVERABILITY

Any waiver of a breach of any provision of AGREEMENT shall not be deemed a waiver of any other breach of the same or different provision. In the event any provision of AGREEMENT is rendered invalid or unenforceable by any valid act of Congress or the Nevada State Legislature, or declared null and void by any court of competent jurisdiction, or is found to be in violation of State Statutes and/or regulations, said provision(s) hereof will be immediately void and may be renegotiated for the sole purpose of rectifying the non-compliance. The remainder of the provisions of AGREEMENT not in question shall remain in full force and effect.

ARTICLE XII: LAW OF VENUE

AGREEMENT shall be governed by the laws of the State of Nevada.

IN WITNESS WHEREOF, the parties hereto have caused AGREEMENT to be signed and intend to be legally bound thereby.

SNF	HD JTHERN NEVADA HEALTH DISTRICT		UNTY ARK COUNTY, NEVADA:
	FERMIN LEGUEN, MD, MPH District Health Officer	BY:	JAMES B. GIBSON, CHAIR Clark County Commissioners
App	roved as to form:	ΑT	ΓEST
BY:_		BY:	
	HEATHER ANDERSON-FINTAK, ESQ. General Counsel Southern Nevada Health District		LYNN MARIE GOYA County Clerk
			Approved as to form: Steven Wolfson, District Attorney
		BY	
			ELIZABETH A. VIBERT Deputy District Attorney

EXHIBIT A

SCOPE OF WORK

TO PROVIDE THRIVE BY ZERO TO THREE PREVENTION SERVICES

I. RESPONSIBILITIES OF SNHD

SNHD shall:

- A. Provide prevention services using a home visiting model to include services such as parent education, parent and child skill development, and supportive relationships and networks for families who have children ages zero to three who may be in danger of becoming victims of child abuse and neglect ("Services");
- B. Participate in training related to recognizing possible abuse and neglect;
- C. Have regular contact with and alert COUNTY to needed Child Welfare intervention to prevent serious neglect/abuse from occurring to these most vulnerable youth;
- D. Accept a minimum of 35 referrals from COUNTY per month;
- E. Provide services to all referred families voluntarily accepting the offer of Services;
- F. Provide feedback to COUNTY on attempted/actual contact with identified families, assessment of the need of families to accept and receive supportive services, including but not limited to, parenting education and skill development, vocational assistance, access to medical/community resources for physical, emotional, mental and financial stability, and identifying supportive relationships and networks to ensure the safety of children ages zero to three;
- G. Meet monthly with COUNTY to discuss cases with barriers to receiving supportive services or who may need specific or additional supports not previously identified, including evidence to support a COUNTY investigation;
- H. Provide COUNTY with monthly statistics;
- I. Have Criteria and Referral documentations; and
- J. Invoice COUNTY on a monthly basis to include documentation of number of hours for families served and services provided.
- K. Keep any client data and information received or obtained about foster youth participants confidential to anyone outside of this project consistent with NRS 432B.280 through NRS 432B.290 and the federal Child Abuse Prevention and Treatment Act (CAPTA).

II. RESPONSIBILITIES OF COUNTY

COUNTY shall:

- A. Provide eligibility criteria for services. Based on criteria, COUNTY staff shall identify and refer to SNHD any youth ages zero to three who have been brought to the attention of COUNTY, and do not meet the requirement of investigation, but who demonstrate the need for support services to prevent the possibility of future abuse/neglect;
- B. Ongoing support/technical assistance as requested by SNHD;
- C. Meet monthly with SNHD to discuss cases with barriers to receiving supportive services or who may need specific or additional supports not previously identified;
- D. Have Criteria and Referral documentations; and
- E. Create a monthly Meeting Agenda.

III. PRICE & PAYMENT

COUNTY agrees to pay SNHD based on approved budget appropriations as shown in Section V of this Scope of Work.

IV. BACKGROUND CHECKS

- A. SNHD agrees that the COUNTY shall complete a background check on all employees, volunteers, mentors or contracted staff engaged in providing services under this SOW within thirty (30) days of the execution of this SOW and prior to any direct contact with children.
- B. SNHD will provide COUNTY with a list of Employee(s) assigned to perform the task outlined in this SOW. This list shall be e-mailed and scheduled with the COUNTY's Human Resources at DFShumanresources@clarkcountynv.gov.
- C. A complete background check will include having the individual's information (i.e. fingerprints) searched through the following databases:
 - a) NCIC (National Crime Information Center),
 - b) NCJIS (Nevada Criminal Justice Information System)
 - c) SCOPE II (Shared Computer Operation for Protection and Enforcement), and
 - d) CANS (Child Abuse and Neglect Search in Nevada and in any state the employee has resided during the last (5) years).
- D. COUNTY requires that SNHD or an employee of SNHD shall not have any of the criminal convictions, charges or pending charges outlined in Attachment 1.
- E. Failure to complete background checks on all employees engaged in providing services under this AGREEMENT will result in suspension of services and or termination of agreement.

V. <u>BUDGET</u>

Personnel Cost	Not to exceed \$150,000
TOTAL	Not to exceed \$150,000

ATTACHMENT 1

Certification of Compliance with Background Check Requirements

COUNTY requires that a provider of services to children in the custody of the Clark County Department of Family Services ("DFS") or a provider's employee or agent are subject to an adequate background check to ensure that the provider and/or provider's employees or agents who come in contact with children referred by DFS do not have any of the criminal convictions, charges or pending charges for any of the following:

- 1. Murder, voluntary manslaughter, involuntary manslaughter or mayhem;
- 2. Any felony involving the use or threatened use of force or violence or the use of a firearm or other deadly weapon;
- 3. Assault with intent to kill or to commit sexual assault or mayhem;
- 4. Battery which results in substantial bodily harm to the victim;
- 5. Battery that constitutes domestic violence that is punishable as a felony;
- 6. Battery that constitutes domestic violence, other than a battery described in subparagraph (5), within the immediately preceding 3 years;
- 7. Sexual assault, statutory sexual seduction, incest, lewdness, indecent exposure or an offense involving pornography and a minor;
- 8. A crime involving pandering or prostitution, including, without limitation, a violation of any provision of NRS 201.295 to 201.440, inclusive;
- 9. Abuse or neglect of a child, including, without limitation, a violation of any provision of NRS 200.508 or 200.5083 or contributory delinquency;
- 10. A violation of any federal or state law regulating the possession, distribution or use of any controlled substance or any dangerous drug as defined in chapter 454 of NRS;
- 11. A violation of any federal or state law prohibiting driving or being in actual physical control of a vehicle while under the influence of intoxicating liquor or a controlled substance that is punishable as a felony;
- 12. A violation of any federal or state law prohibiting driving or being in actual physical control of a vehicle while under the influence of intoxicating liquor or a controlled substance, other than a violation described in subparagraph (11), within the immediately preceding 3 years;
- 13. Abuse, neglect, exploitation, isolation or abandonment of older persons or vulnerable persons, including, without limitation, a violation of any provision of NRS 200.5091 to 200.50995, inclusive, or a law of any other jurisdiction that prohibits the same or similar conduct; or
- 14. Any offense involving arson, fraud, theft, embezzlement, burglary, robbery, fraudulent conversion, misappropriation of property or perjury within the immediately preceding 7 years; or
- 15. In addition, the provider must check, "Statewide Central Registry" means the Statewide Central Registry for the Collection of Information Concerning the Abuse or Neglect of a Child established by NRS 432.100. to determine whether there has been a substantiated report of child abuse or neglect made against the employee or agent of provider.

¹ An adequate background check includes having the person's information (i.e. fingerprints) searched through the following databases: NCIC (National Crime Information Center) NCJIS (Nevada Criminal Justice Information System),, SCOPE II (Shared Computer Operation for Protection and Enforcement), and CANS (Child Abuse and Neglect Search in Nevada and in any other state where the provider or provider's employee or agent has resided during the last five (5) years).



TO: SOUTHERN NEVADA DISTRICT BOARD OF HEALTH DATE: March 24, 2022

RE: Approval of the Amendment to the Interlocal Agreement Between Clark County, Nevada and the Southern Nevada Health District for Medical Core & Support services for HIV/AIDS Infected & Affected Clients in Las Vegas, Ryan White, Transitional Grant Area

PETITION #34-22

That the Southern Nevada District Board of Health approve the Amendment to the Interlocal Agreement with Clark County, Nevada for medical core and support services for HIV/AIDS infected and affected clients in Las Vegas, Ryan White, transitional grant area.

PETITIONERS:

Fermin Leguen, MD, MPH, District Health Officer FZ
Cortland Lohff, MD, MPH, Director of Primary and Preventive Care

Dave Kahananui, Sr. FQHC Manager

DISCUSSION:

The original Interlocal Agreement had a term ending on February 28, 2022. The Amendment to the Interlocal Agreement is for a 7-month extension, through September 30, 2022. It is anticipated, at that time, additional funding will be acquired to continue ongoing Ryan White Part A services. During this period, SNHD agrees to continue providing services as required by Clark County within the scope of this Agreement.

FUNDING:

Ryan White Grant Part A Funding

AMENDMENT NO. 5 RFP NO. 604274-16 CONTRACT FOR MEDICAL CORE & SUPPORT SERVICES FOR HIV/AIDS INFECTED & AFFECTED CLIENTS IN LAS

FOR HIV/AIDS INFECTED & AFFECTED CLIENTS IN LAS VEGAS, RYAN WHITE, TRANSITIONAL GRANT AREA

THIS AMENDMENT is made and entered into this _____ day of _____ 2022, by and between CLARK COUNTY, NEVADA (hereinafter referred to as "COUNTY"), and SOUTHERN NEVADA HEALTH DISTRICT (hereinafter referred to as "PROVIDER").

WITNESSETH:

WHEREAS, the parties entered into an agreement under RFP Number 604274-16, entitled Contract for Medical Core & Support Services for HIV/AIDS Infected & Affected Clients in Las Vegas, Ryan White, Transitional Grant Area dated March 21, 2017 (hereinafter referred to as CONTRACT); and

WHEREAS, the parties desire to amend the CONTRACT.

NOW, THEREFORE, the parties agree to amend the CONTRACT as follows:

1. SECTION I: TERM OF CONTRACT, PAGE 1

ORGINALLY WRITTEN:

COUNTY agrees to retain PROVIDER for the period from date of award through February 28, 2018, with the option to renew for four (4), one -year period subject to the provisions of Sections II and VIII herein. During this period, PROVIDER agrees to provide services as required by COUNTY within the scope of this Contract.

REVISED TO READ:

COUNTY agrees to retain PROVIDER for the period from date of award through February 28, 2018, with the option to renew for four (4), one-year periods and a 7-month extension through September 30, 2022, subject to the provisions of Sections II and VIII herein. During this period, PROVIDER agrees to provide services as required by COUNTY within the scope of this Contract.

2. The revisions contained herein are effective as of March 1, 2022.

Except as expressly amended herein, the terms and conditions of the CONTRACT shall remain in full force and effect.

COUNTY: COUNTY OF CLARK, NEVADA	PROVIDER: SOUTHERN NEVADA HEALTH DISTRICT	
By: JESSICA COLVIN Chief Financial Officer	By:FERMIN LEGUEN, MD, MPH District Health Officer	
APPROVED AS TO FORM: STEVEN B. WOLFSON, District Attorney By:	APPROVED AS TO FORM: This amendment is approved as to form; signature to be affixed after governing By: body approval.	
ELIZABETH VIBERT Deputy District Attorney	HEATHER ANDERSON-FINTAK, ESQ. General Counsel Southern Nevada Health District	
	Date	



Memorandum #02-22

Date:

March 24, 2022

To:

SOUTHERN NEVADA DISTRICT BOARD OF HEALTH

From:

Mark Bergtholdt, EH Supervisor me

Karla Shoup, EH Manager XS

Chris Saxton, MPH-EH, REHS, Director of Environmental Health

Fermin Leguen, MD, MPH, District Health Officer

Subject:

Presentation of the Proposed Body Art Regulations

I. BACKGROUND:

The Health District is given the authority to regulate businesses that affect public health. In the late 1990's, the Health District passed the original versions of the tattoo and piercing regulations, making it one of the first local health departments in the nation to regulate these businesses. While the tattoo regulations were last updated in 2007, the piercing regulations have never been updated. In 2017, the State of Nevada adopted new provisions within the Nevada Administrative Code (NAC 444) to regulate these facilities.

Starting early in 2021, staff at the Health District reviewed the current state regulations and a model body art code developed by the National Environmental Health Association to identify changes that might be needed in the Health District's current regulations. A number of issues were identified and addressed. As a result of the review, the existing tattoo and piercing regulations were combined into one comprehensive document.

A listening session was conducted on August 5, 2021, for the regulated industry to identify desired changes for any new regulations. The issues brought forward at this meeting were documented and added to the regulations when possible.

Following review with SNHD's legal department, a public notice was published on December 6, 2021, alerting the public of the intention to propose the new regulation, with a public comment period open until January 31, 2022. The public notice was posted as required and sent to the regulated community of both the facilities and all of the members of the public who hold valid body art cards via e-mail. Included in the e-mail were links to the business impact survey and a pdf document of the business impact survey that could be either completed online or printed and returned. The public notice was also posted in the local government offices and sent to the other

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Nevada Health Authorities, local government business license agencies, and the three Clark County tribes. The notice was also sent by postal mail to the various business organizations in Clark County including the Nevada Resort Association. Finally, the Health District also posted the notice in most of the Clark County newspapers.

Public workshops were conducted on December 21, January 6, and January 13, to receive comment not only about the content of the regulations, but also the impact these proposed changes could have on the regulated businesses. Prior to each workshop, the agenda was posted as required and sent via e-mail to each facility and valid body art card holder address that the Health District had on file. Additionally, the agenda was posted in the local government offices throughout Clark County.

The proposed regulations are a near complete rewrite of the existing two regulations that regulate tattooing and piercing. Below is a list of the biggest changes in the proposed regulations:

- Combined the two regulations into one comprehensive body art regulation
- Defined standards for jewelry used for initial piercings based on input from industry
- Incorporated suggestions from industry related to the body art card apprentice program
- Increased the frequency of testing for autoclaves
- Required improved monitoring of sterilization cycles with appropriate indicators
- Improved consent form questions based on input from industry
- Added waiver language similar to Food and Aquatic Health Regulations
- Required ultrasonic cleaning as the first step in the processing of reusable equipment

II. <u>RECOMMENDATION</u>:

The Health District recommends approval of the proposed Body Art Regulations.

Attachment A: Proposed Regulations

Attachment B: Business Impact Statement (BIS)

Attachment C: BIS Notification E-mail

Attachment D: Required Public Notice and Posting Verification Attachment E: Additional Public Notice Posting and Advertising

Attachment F: December 21 Public Workshop Agenda, Minutes, and Sign-In Sheets and

Postings

Attachment G: January 6 Public Workshop Agenda, Minutes, and Sign-In Sheets and

Postings

Attachment H: January 13 Public Workshop Agenda, Minutes, and Sign-In Sheets and

Postings

Attachment I: Spreadsheet of survey results and individual surveys.

Attachment J: February 4 Public Workshop Agenda, Minutes and Sign-In Sheets, Postings

and Written Comments submitted to the Health District

ATTACHMENT A

SOUTHERN NEVADA HEALTH DISTRICT REGULATIONS GOVERNING THE SANITATION AND SAFETY OF BODY ART ESTABLISHMENTS

WHEREAS, the Southern Nevada Health District is a public health authority organized pursuant to Nevada Revised Statutes, Chapter 439 with jurisdiction over all public health matters within Clark County, Nevada; and

WHEREAS, the Southern Nevada District Board of Health is the Southern Nevada Health District's governing body and is authorized to adopt Regulations to protect and promote the public health and safety in the geographical area subject to its jurisdiction; and

WHEREAS, in accordance with the authority granted pursuant to Nevada Revised Statutes, Chapter 439, the Board hereby adopts Regulations to attain standards that promote the sanitary and safe practice of body art and in body art establishments to prevent and control the spread of communicable disease; and

WHEREAS, the Board believes that the following Regulations are designed to protect and promote the public health and safety, it does therefore publish, promulgate and order compliance within Clark County, Nevada with the substantive and procedural requirements hereinafter set forth.

SOUTHERN NEVADA HEALTH DISTRICT REGULATIONS GOVERNING THE SANITATION AND SAFETY OF BODY ART ESTABLISHMENTS

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Section 1 DEFINITIONS

- 1.1 **Agency of jurisdiction** means the local building department, safety authority, fire marshal, business licensing, police or other federal, state or local health agency, federal regulatory agencies, or departments of agriculture that have jurisdiction concerning construction, operation, maintenance, and public safety of a **body art establishment**.
- 1.2 **Apprentice** means a person who is registered with the **Health Authority** to work under the direct supervision of a **body artist** in learning the occupation of **body artist**.
- 1.3 **Approved** means acceptable to the **Health Authority** or **agency of jurisdiction** based on compliance with the law, conformance with appropriate, accepted, or recognized industry standards and good public health practice.
- 1.4 **Bloodborne pathogen** means infectious microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV) [Occupational Safety and Health Administration [OSHA] definition at 29 CFR 1910.1030(b)].
- 1.5 **Body art** means the practice of physical body adornment by permitted **body** art establishments and body artists using, without limitation, the following techniques: piercing, tattooing, camouflage, micropigmentation, permanent makeup, and microblading. This definition does not include practices that are considered medical procedures or extreme body modifications, which are prohibited in body art establishments.
- 1.6 **Body art establishment** means a place of business, where **body art** is performed, offered, sold or given regardless of profit status of the business.
- 1.7 **Body artist** means a person issued a **body art** or **microblading card** under the provisions of these Regulations set forth in Section 8.
- 1.8 **Branding** means the process in which a mark or marks are burned into human skin tissue with the intention of leaving a permanent mark.
- 1.9 **Camouflage** means a method of disguising or concealing permanently blotchy or irregularly pigmented skin, acne scarring, existing **tattoos** or other permanent skin irregularities by blending pigments into the skin using **tattooing** methods or use of saline during **tattoo** procedures to cover up, mask, or alter an existing **tattoo** so that it is either rendered less noticeable or takes on a different design, thereby obliterating the original design.
- 1.10 Class V chemical indicator means a quality control indicator that reacts to temperature and pressure over a certain time interval to indicate **sterilization** conditions were met inside the pack.
- 1.11 **Communicable disease** means a disease which is caused by a specific infectious agent or its toxic products, and which can be transmitted, either directly or indirectly, from a reservoir of infectious agents to a susceptible host organism.

- 1.12 **Contamination** means the presence or potential presence of blood, infectious materials or other types of impure materials that have been introduced or potentially introduced to any work surfaces, **equipment** or **devices** rendering the surface, **equipment** or **device** unsafe for use.
- 1.13 **Cross-contamination** means the transfer of bacteria, viruses, microorganisms, or other harmful substances from one surface to another through improper or unsanitary **equipment**, procedures, or products.
- 1.14 **Device** means any or all instruments, apparatus and contrivances, including their components, parts and accessories, intended to pierce or create a semi-permanent or permanent mark on the skin.
- 1.15 **Disinfect** means to destroy or inhibit pathogenic and other kinds of microorganisms by physical and/or chemical means.
- 1.16 **Disinfectant** means a product that is a registered with the United States Environmental Protection Agency that destroys, neutralizes or inhibits the growth of infectious microorganisms, including the human immunodeficiency virus, the hepatitis B virus and Mycobacterium tuberculosis.
- 1.17 **Environmental surface** means the surface of any furniture, **equipment**, fixtures, walls, floors, ceilings, lavatories, toilets, tables, countertops, cabinets, or similar surface which is part of a **body art establishment**.
- 1.18 **Equipment** means all machinery, containers, vessels, tools, **devices**, implements, storage areas, and sinks fixtures that are used in conjunction with the storage or application of **body art** or are used within the **equipment** processing room.
- 1.19 Health Authority means the officers and agents Southern Nevada Health District.
- 1.20 **Health permit** means the document issued by the **Health Authority** that authorizes a person to operate a **body art establishment**.
- 1.21 **Hot water** means water temperature between 90 degrees and 120 degrees Fahrenheit (°F).
- 1.22 **Jewelry** means any personal ornament inserted into a pierced area.
- 1.23 **Mentor body artist** means a person who has held a **body art** card for four or more years.
- 1.24 **Linens** means sheets, covers, blankets, pillowcases, drapes, towels, or any other similar item used to cover a table, mat, or a **patron** during a **body art** procedure.
- 1.25 **Microblading** means a technique in which incisions are made into the dermis using a manual tool equipped with needles. The incisions are then filled with pigment to mimic natural hair. **Microblading** is limited to the parts of the face and may be permanent.
- 1.26 **Microblading artist** means a person issued a **microblading card** under the provisions of these Regulations set forth in Section 8.
- 1.27 **Microblading card** means a card issued by the **Health Authority** to a person who is limited to practicing **microblading**.
- 1.28 **Nuisance** includes any unlawful act(s) or omission(s), which annoys, injures or endangers the safety, health, comfort or repose of any considerable number of persons, offends public decency, or in any way renders a considerable number

- of persons insecure in life or the use of property as defined by NRS 202.450.
- 1.29 **Owner** means any person, individual, partnership, corporation, company, association or like entity that owns, leases, or proposes to own or lease a **body art establishment**.
- 1.30 **Patron** means anyone, including employees of the **body art establishment**, who are undergoing a **body art** procedure.
- 1.31 **Permanent makeup** means a **tattoo**, whether permanent, semipermanent, or temporary, which includes eyebrows, eyelids, lips, and other parts of the body for beauty marks, hair imitation, , or areola re-pigmentation. This term includes any procedures whether referred to as, without limitation, permanent makeup, micro-derma-pigmentation, micro-pigment implantation, **microblading**, microneedling with the use of pigment, derma-graphics, cosmetic **tattooing**, or any other similar procedures and for the purpose of these Regulations has the same meaning as **tattoo**.
- 1.32 **Permit holder** means the person or entity that is legally responsible for the operation of the **body art establishment**.
- 1.33 **Personnel** means anyone employed or contracted within the **body art** establishment.
- 1.34 **Piercing** means the act of penetrating the skin or mucous membranes, to make, generally permanent in nature, a hole to attach **jewelry**.
- 1.35 Responsible person means the individual designated by the permit holder as being responsible for acting on the permit holder's behalf and assuring the body art establishment and body artists are in compliance with these Regulations.
- 1.36 **Sewage** means the water-carried waste created in and to be conducted away from residences, industrial establishments and public buildings.
- 1.37 **Sharps** means any object that can purposely or accidentally cut or penetrate the skin or mucosa, including without limitation pre-**sterilized**, single-use needles; scalpel blades; and razor blades.
- 1.38 **Sharps container** means a closable, puncture-resistant, leakproof (on sides and bottom) container made specifically to be a **sharps container** that meets National Institute for Occupational Safety & Health standards and that can be closed for handling, storage, transportation, and disposal.
- 1.39 **Spore test** means a bacterial endospore test designed to assess whether **sterilization** has occurred. It is also known as biological **spore test** or biological spore monitor.
- 1.40 **Solid waste** means all waste that is not liquid waste or biohazardous waste generated by the facility.
- 1.41 **Special event** means a public gathering that is temporary and held for a specific purpose, and which includes **body art** activities.
- 1.42 **Standard precautions** mean the minimum infection prevention practices that apply to all individual care, regardless of suspected or confirmed infection status of the **patron** or **body artist** in any setting where **body art** is delivered. These practices are designed to protect both the **body artist** and **patron** from spreading **communicable diseases**. **Standard precautions** include hand hygiene, use of personal protective **equipment** (e.g., gloves and masks),

- cough etiquette, the safe handling of **sharps**, the use of sterile instruments and **devices**, and ensuring clean, **disinfected environmental surfaces**.
- 1.43 **Sterilize** means a cleaning process which results in the total destruction of all forms of microbial life.
- 1.44 **Sterilizer** means an autoclave or similar device that can **sterilize** reusable **equipment** using heat, pressure or chemicals and meets ANSI/AAMI ST79 as described in NAC 444.00759.
- 1.45 **Tattoo** means any act of placing ink or other pigment into or under the skin or mucosa by the use of needles or any other method used to puncture the skin, resulting in permanent or temporary colorization of the skin or mucosa. This includes all forms of permanent cosmetics.
- 1.46 **Ultrasonic cleaner** means any medical grade machine that uses ultrasonic acoustic wavelengths and aqueous solutions to remove **contamination** from instruments.
- 1.47 Visiting body artist means a body artist who does not reside or routinely operate within the jurisdiction of the Health Authority, but who may occasionally perform body art procedures during a limited timeframe in a sponsoring body art establishment. Such individuals must be sponsored by a body art establishment, which holds a current health permit in good standing issued by the Health Authority.
- 1.48 Workstation means an area where body art procedures are performed.
- 1.49 **Waiver** means a written agreement between the **Health Authority** and the **permit holder** that authorizes a modification of one or more regulatory requirements in these Regulations and has no impact on the health and safety of **patrons**.

Section 2 IMMINENT HEALTH HAZARDS TO PUBLIC HEALTH AND SAFETY

- 2.1 Imminent hazards to public health and safety include, but are not limited to:
 - 2.1.1 Substantial damage to the **body art establishment** caused by accident, or natural disaster, such as earthquake, wind, fire, rain, or flood.
 - 2.1.2 Loss of electrical power to critical systems, such as lighting or sterilization **equipment** for a period of two or more hours.
 - 2.1.3 A water outage that impacts the **body art establishment** for a period of two or more hours.
 - 2.1.4 A water supply that is not approved by the **Health Authority** or which has a cross connection, back flow, or back siphonage condition.
 - 2.1.5 **Sewage** that is not disposed of in an **approved** and sanitary manner.
 - 2.1.6 Nonfunctioning or lack of toilet or hand washing facilities.
 - 2.1.7 Infestation, harborage, or propagation of vermin.
 - 2.1.8 The presence of toxic or noxious gases, vapors, fumes, mists, or particulates in concentrations immediately dangerous to life or health, or in concentrations sufficient to cause harm or a public **nuisance**.
 - 2.1.9 A **body artist** or other employee infected with a **communicable disease** that can be transmitted as a result of performing the **body art**procedure.
 - 2.1.10 **Responsible persons** or **body artists** not practicing strict standards of cleanliness, personal hygiene, and **standard precautions**.
 - 2.1.11 **Equipment** that by condition, design, construction, or use poses an immediate risk of entrapment, fall, pinch, crush, tip, or other cause of injury.
 - 2.1.12 **Environmental surfaces**, furnishings, mats, procedure tables, pillows, cushions, **linens**, robes, garments, chairs, or other items within **body art establishment** that are stained with blood or bodily fluids, soiled, or infested with vermin; or are in an otherwise unsanitary condition.
 - 2.1.13 The presence of uncontrolled **solid waste** within or on the premises of a **body art establishment** in quantity and duration as to create a **nuisance**.
 - 2.1.14 Improper disposal of biohazardous waste or **sharps**.
 - 2.1.15 Any sharp instrument such as a needle or razor that is not appropriately placed in a **sharps container** immediately after use.
 - 2.1.16 Reuse of single-use **equipment** or pigments on another **patron** or on the same **patron** during a different **body art** session.

- 2.1.17 Lack of properly **sterilized** instruments, **equipment** or needles that come in contact with pigment or the skin.
- 2.1.18 A lack of adequate, currently tested, and fully functional **sterilization equipment** on the premises unless exclusively using pre-**sterilized equipment**, instruments or needles.
- 2.1.19 Any other item determined to be an imminent health hazard by the **Health Authority**.
- 2.2 Presence of imminent health hazard

If the imminent health hazard affects people or is unmitigated, then the **permit holder** or **responsible person** must

- 2.2.1 Immediately notify the **Health Authority** by either phone or e-mail.
- 2.2.2 Cease operations of the **body art establishment** until the hazard can be mitigated.
- 2.2.3 Notify the **Health Authority** once the hazard has been mitigated and that the facility will be resuming operation.
- 2.2.4 Failure to notify **Health Authority** may result in summary suspension of the **health permit**.

Section 3 FACILITIES AND EQUIPMENT

3.1 Body art workstations

- 3.1.1 Each **body artist** must have a **workstation** which has a minimum area of 80 square feet.
- 3.1.2 Each **body art establishment** must have at least one **workstation** that can be screened from the public and other **patrons** to provide privacy.

3.2 Floors, Walls, Ceilings

- 3.2.1 Floors, walls, and ceilings less than 10 feet high in **workstations** or restrooms must be made of a smooth, durable, nonabsorbent, nonporous material that is easily **cleanable**.
- 3.2.2 Carpet is prohibited in **workstations** and **restroom** areas.
- 3.2.3 Floors must be kept clean and in good repair and **disinfected** if contaminated with bodily fluids or other biohazardous spills.
- 3.2.4 The materials used in constructing the walls and ceilings must be joined along the edges so there are no open spaces or cracks.
- 3.2.5 Floor and wall junctures in **workstations** and restroom areas must be coved.
- 3.2.6 Studs, joists, rafters, and beams, if under 10 feet high, must not be left exposed in **body art** work areas or restrooms.
- 3.2.7 The **body art establishment** must be separated from any food establishment or room where food is prepared, or any adjacent businesses by walls extending from floor to ceiling.
- 3.2.8 The **body art establishment** cannot be located within a private residence, including, without limitation, an apartment, condominium or other multi-family dwelling or a single-family dwelling.

3.3 Furniture

3.3.1 Tables, chairs, cushions or any similar items used in the **workstation** must be constructed of smooth, durable, and easily cleanable material that is free of cuts and tears.

3.4 Lighting

- 3.4.1 At least 50 lumens per square foot of light must be provided in the workstation at the level where the body art work is to occur. At least 20 lumens per square foot of light, measured at 30 inches above the floor, shall be provided in all other areas of the body art establishment.
- 3.4.2 Overhead lights and lights used in the **body art workstations** must be

shielded or constructed of shatterproof materials.

3.5 Handsinks

Hand sinks must:

- 3.5.1 Be permanently plumbed to potable water and sewer,
- 3.5.2 Provide cold and hot water,
- 3.5.3 Be supplied with liquid soap and single-use paper towels in dispensers and
- 3.5.4 Be sized at a minimum of 10 inches by 10 inches by 8 inches deep to prevent **contamination** of the areas outside of the sink basin.
- 3.5.5 Lined, covered **solid waste** containers must be provided adjacent to each hand sink. These containers must have self-closing lids with hands-free control and must be easily cleanable, kept clean, and be emptied daily.

Hand sinks in workstations

- 3.5.6 **Workstation** hand sinks must be unobstructed (e.g., no doors), such that the **body artists** can easily access the hand sinks without having to touch any surface with their hands while travelling to and from the hand sink.
- 3.5.7 A minimum of one hand sink for every four **workstations** is required.
- 3.5.8 The maximum distance from any procedure table to a **workstation** hand sink is 15 feet unless otherwise **approved** by the **Health Authority**.

Hand sinks in restrooms

3.5.9 All restrooms must have a hand sink that meets the requirements of sections 3.5.1 to 3.5.5.

3.6 Water supply

3.6.1 The water supply for each **body art establishment** must be from a permitted public water system.

3.7 Plumbing

- 3.7.1 The plumbing system must be installed and maintained in such a manner that there is no cross connection between potable and non-potable water systems.
- 3.7.2 Adequate backflow or back siphonage protection must be installed on the water system in compliance with all applicable codes.
- 3.7.3 Plumbing fixtures must be permanently installed in compliance with all applicable codes.

3.8 **Sewage** Disposal

3.8.1 **Sewage** must be disposed of by means of an approved municipal sewer system or other permitted **sewage** Disposal System which is

- approved by the Health Authority.
- 3.8.2 **Sewage** spills must be remediated in a manner that eliminates potential disease transmission, offensive odors, **sewage** solids, and **sewage** litter.
- 3.8.3 **Sewage** discharge, sewer pipe leaks, spills, or backflow onto the ground must be stopped and/or contained within four hours and the **body art establishment** must cease operations until the leak, spill, or backflow has been remediated

3.9 **Solid waste** disposal

- 3.9.1 Each **body art establishment** must have waste receptacles of sufficient number and size inside the establishment to store **solid** waste so that the waste does not exceed the capacity of the containers
- 3.9.2 Indoor waste receptacles must be:
 - 3.9.2.1 Emptied at a frequency that prevents waste from becoming a **nuisance**.
 - 3.9.2.2 Lined and maintained clean.
 - 3.9.2.3 At least one waste receptacle must be located within each workstation and equipment processing room.
- 3.9.3 Outside waste receptacles must be:
 - 3.9.3.1 Designed and constructed to have tight-fitting lids, doors, or covers.
 - 3.9.3.2 Constructed and installed so that accumulation of debris, and pest attraction and harborage, are minimized and effective cleaning of the area can be performed,
 - 3.9.3.3 Emptied at a frequency so that the waste receptacle does not become a **nuisance**.

3.10 Biohazardous waste disposal

- 3.10.1 Each **body art establishment** must implement a written operating plan to manage biohazardous waste in accordance with these Regulations. This written operating plan must be available for review by the **Health Authority** and **body art establishment personnel**. The operating plan must include the following:
 - 3.10.1.1 Description of training for **personnel** and **body artists** on handling and disposal of biohazardous waste;
 - 3.10.1.2 Procedures for segregating, labeling, packaging, transporting, storing, and treating biohazardous waste;
 - 3.10.1.3 Procedures for decontaminating biohazardous waste spills;
- 3.10.2 **Body art establishments** that offer both **tattooing** and **piercing**

services must include waste management procedures specific to each specialty, if procedures vary. The written operating plans must be updated when Regulations, **body art establishment** policies, or procedures change.

- 3.10.2.1 Each **permit holder** or **responsible person** must train new **personnel** on the operating plan as part of their work responsibilities. This training must be provided prior to commencement of duties. Refresher training must be completed annually by all **personnel**.
- 3.10.2.2 All biohazardous waste management records must be maintained onsite for 3 years and must be available for review by the **Health Authority**.
- 3.10.3 Biohazardous waste which may release liquid blood or bodily fluids when compressed or may release bodily fluids when handled must be contained in an appropriate red or orange bag and labeled with the international biohazard symbol. The bag and its waste must then be disposed of by a waste hauler authorized to dispose of biohazardous waste. Contaminated waste which does not release liquid or dried bodily fluids when handled may be contained in a covered receptacle and disposed of through normal, approved disposal methods.
- 3.10.4 Surfaces contaminated with biohazardous waste must be decontaminated as part of the cleaning process.
- 3.10.5 In the event of blood flow, products used to absorb blood, must be
 - 3.10.5.1 single-use and
 - 3.10.5.2 If considered a biohazardous waste as described in 3.10.3 be disposed of immediately after use in covered biohazardous waste containers
- 3.10.6 Gauze or other absorbent material used to absorb fluids during the process of **tattooing**:
 - 3.10.6.1 can be used continuously until the session ends or the material is no longer absorbing; and
 - 3.10.6.2 must be properly disposed of.
- 3.10.7 Storage and Containment
 - 3.10.7.1 Bags: Biohazardous waste (except **sharps**) must be packaged and sealed at the point of origin in impermeable, red plastic bags. The international biological hazard symbol must be at least 6 inches in diameter on bags 19 by 14 inches or larger, and at least 1 inch in diameter on bags smaller than 19 by 14 inches.

- 3.10.7.2 Storage: Storage of biohazardous waste in the **body art establishment** must not exceed 30 days. The 30-day
 period begins when the first item of biohazardous waste is
 placed into a red bag or when a **sharps container** is
 sealed.
- 3.10.7.3 Storage areas for biohazardous waste must have restricted access and be designated in the written operating plan.

 They must be located away from pedestrian traffic, be pest free, and be maintained in a sanitary condition.
- 3.10.7.4 Containment: Packages of biohazardous waste must remain sealed until picked up by biohazardous waste hauler, except when compacted in accordance with the requirements of these Regulations. Ruptured or leaking packages of biohazardous waste must be placed into larger packaging without disturbing the original seal.
- 3.10.7.5 All packages containing biohazardous waste must be visibly identifiable with the international biological hazard symbol and one of the following phrases: "biohazardous waste," "biohazard," "infectious waste," or "infectious substance." The symbol must be red, orange, or black and the background color must contrast with that of the symbol or comply with the requirements cited in 29 CFR subparagraph 1910.1030(g)(1)(B) and (C), Occupational Exposure to **Bloodborne Pathogen** Standard.

3.11 Sharps and sharps containers

- 3.11.1 Sharps must be discarded at the point of origin into an approved sharps container. Sharps containers must be sealed when full. A sharps container is considered full when materials placed into it reach the designated fill line.
- 3.11.2 Permanently mounted **sharps container** holders must bear the phrase and the international biological hazard symbol if this information on the **sharps container** is concealed by the holder/mount.
- 3.11.3 All outer containers must be rigid, leak resistant and puncture resistant. Reusable outer containers must be constructed of smooth, easily cleanable materials and must be decontaminated prior to replacing the inner container.
- 3.11.4 The international biological hazard symbol must be at least 6 inches in diameter on outer containers 19 by 14 inches or larger, and at least 1 inch in diameter on outer containers less than 19 by 14 inches.

- 3.11.5 A **sharps container** must be provided in each **workstation** for disposal of sharp objects that come in contact with blood and/or bodily fluids.
- 3.11.6 **Sharps containers** must be properly disposed of as described in the written operating plan required by these Regulations.

3.12 Labeling

- 3.12.1 Biohazardous waste bags and **sharps containers** must be labeled with the name and address of the **body art establishment** and address.
- 3.12.2 If a bag or **sharps container** is placed into a larger bag prior to transport, the label for the exterior bag must comply with the same labeling requirements listed above.

3.13 **Equipment** processing room

- 3.13.1 This Section does not apply to **body art establishments** that exclusively use prepackaged, single-use, **sterilized equipment** and supplies.
- 3.13.2 **Equipment** processing and sterilization must be performed in a separate room that meets the following requirements:
 - 3.13.2.1 Separated and isolated from the **work stations**, lounging areas, retail areas, food preparation or other activities that may cause **contamination** of **equipment** or work surfaces,
 - 3.13.2.2 Properly identified with signs that include the universal symbol for biohazard waste and secured to prevent unauthorized persons from entering.
 - 3.13.2.3 Surfaces, cabinets and drawers made of smooth nonporous, nonabsorbent easily cleanable materials.
 - 3.13.2.4 Has distinct, separate areas for the cleaning, wrapping, packaging, handling and storage of **sterilized equipment**.
 - 3.13.2.5 Equipped with at least one, two-compartment utility sink with cold and **hot water** used exclusively for cleaning and **disinfecting** instruments.
 - 3.13.2.5.1 The utility sink must not be used for hand washing.
 - 3.13.2.5.2 3.13.2.5 does not apply to **body art establishments** constructed prior to the effective date of these Regulations.
 - 3.13.2.6 Equipped with an **ultrasonic cleaner** that must be covered during the cleaning process to minimize aerosolization of its contents and is of sufficient size to fully submerge the largest instruments being **sterilized**.

3.13.2.8 The sterilizer may be kept at the workstation if	r
	r
3.13.2.8.1 The sterilizer does not require any wate	
supply or sewage connections and	
3.13.2.8.2 The reusable equipment and/or jewelry	is
3.13.2.8.2.1 Cleaned in a procedure room	
3.13.2.8.2.2 Stored in a manner that prevents	
contamination	
3.13.2.8.2.3 Is sterilized unwrapped and	
3.13.2.8.2.4 Used immediately after sterilizing	
3.13.2.9 Equipped with a sterilization log.	
3.13.2.10 A copy of the operational manuals for all sterilization	and
cleaning equipment must be kept on the premises of	the
establishment.	
3.13.2.11 Provide a physical separation of at least 18 inches	
between the each of the following: sterilizer, ultrason	
cleaner and utility sink used for rinsing and scrubbing	9
contaminated tools. Subsequent to Health Authority	ont.
approval, a nonporous barrier may be installed to preveross-contamination.	veni
3.13.2.12 No other services such as retail sales, piercing or	
tattooing must occur within the equipment processing	าต
room.	. 9

3.13.3 **Equipment** and **devices** used to clean and **sterilize body art** materials and reusable instruments must be suitable for their intended use. The **equipment** and **devices** must be, kept clean, well maintained and used according to manufacturer's instructions.

Section 4 GENERAL SANITATION

4.1 Public areas

The entire premises of the **body art establishment** must be kept clean, sanitary and in good physical condition at all times.

- 4.1.1 The **body art establishment** must be free of pests, including insects, rodents, and vermin.
- 4.1.2 **body art establishments** must be in compliance with the Nevada Clean Indoor Air Act, NRS 202.2483.

4.2 Service animals

No animals of any kind are allowed in a **body art establishment** except service animals used by persons with disabilities in accordance with the Americans with Disabilities Act of 1990 Regulations and fish in aquariums.

4.3 Cleaning and disinfecting

- 4.3.1 Furniture, fixtures, surfaces and **equipment** which cannot be submerged in liquid, including, without limitation, the motor housing of a tattoo machine, must be cleaned in accordance with the manufacturer's directions then **disinfected** by manually wiping the surface with a **disinfectant**.
- 4.3.2 **Disinfectant** must be used in accordance with the manufacturer's instructions, including, prescribed contact time.
- 4.3.3 All reusable instruments are to be cleaned and **sterilized** after each use in the **equipment** processing room. Instruments must be:
 - 4.3.3.1 Soaked in an enzymatic or other appropriate cleaning solution, scrubbed to remove debris,
 - 4.3.3.2 Rinsed and inspected,
 - 4.3.3.3 Processed through an ultrasonic cleaner,
 - 4.3.3.4 Rinsed
 - 4.3.3.5 Air-dried before being stored in a clean place or before sterilization,
 - 4.3.3.6 inspected for wear and cleanliness, and
 - 4.3.3.7 If needed, placed in a sealed sterilization package with a class V chemical indicator or class VI chemical indicator.
 - 4.3.3.8 Items 4.2.3.1-4.2.3.6 may be accomplished using an automated instrument washer.

4.4 Sterilization

- 4.4.1 **Sterilizers** must be kept clean, in good working order and must either
 - 4.4.1.1 be operated in the **equipment** processing room
 - 4.4.1.2 or at the **workstation** if the requirements of section 3.13.2.8 are met.
- 4.4.2 After being cleaned, all reusable instruments must be **sterilized** by one of the below methods:
 - 4.4.2.1 Contained in sterilization packaging and subsequently **sterilized**, then stored or
 - 4.4.2.2 If unwrapped or unpackaged, subsequently **sterilized**, then used immediately.
- 4.4.3 After the sterilization process is complete,
 - 4.4.3.1 The sterilization indicators must be inspected to determine if the **equipment** was adequately processed.
 - 4.4.3.2 The packages, if used, must be marked with date of sterilization and the initials of the person who performed the sterilization.
 - 4.4.3.3 If the **sterilized** tools are not immediately used, they must be stored inside their sterile packages and placed in a cabinet, drawer, or tightly covered container used only for the storage of packaged, **sterilized** instruments.
 - 4.4.3.4 At the conclusion of the sterilization cycle, the following information must be written into the sterilization log:
 - 4.4.3.4.1 The date of the load:
 - 4.4.3.4.2 A list of the contents of the load:
 - 4.4.3.4.3 The exposure time and temperature;
 - 4.4.3.4.4 Name of the individual performing the sterilization; and
 - 4.4.3.4.5 For cycles of positive biological indicators, how the items were cleaned and proof of a negative test before reuse
- 4.4.4 **Equipment** packed in peel-packs or heat-sealed plastic and **sterilized** at a permitted **body art establishment** will be considered sterile for a maximum of three months. Commercially available single-use ethylene oxide or gamma radiation **sterilized equipment** must be used in accordance with the manufacturer's recommendations and expiration dates.
- 4.4.5 **Sterilizers** are not required in **body art establishments** that exclusively use prepackaged, single-use, **sterilized equipment** and

- supplies and are **approved** by the **Health Authority** to operate without a **sterilizer**.
- 4.4.6 **Body art establishments** that do not use prepackaged, single-use, **sterilized equipment** and supplies will need to meet the requirements of this sections 3.14, 4.4 and 4.5 of these Regulations. Installation of **equipment** to meet the requirements must be done in compliance with section 10.3 of these Regulations.

4.5 Sterilizer testing

- 4.5.1 This Section does not apply to **body art establishments** that exclusively use prepackaged, single-use, **sterilized equipment** and supplies.
- 4.5.2 The **sterilizer** must be tested after the initial installation, any subsequent service or repair and at least once each month using a **spore test**. The **spore test** must be verified by an independent laboratory.
- 4.5.3 Two years of **spore test** records must be kept on premises available for immediate review. Three years of **spore test** records must be available to the **Health Authority** upon request. The most recent test must be made available to the public upon request.
- 4.5.4 The operator of the **sterilizer** must verify the **spore test** is not expired prior to use.
- 4.5.5 The **sterilizer** must be loaded, operated, and maintained according to the manufacturer's specifications.
- 4.5.6 Procedure for Responding to a Positive **spore test**
 - 4.5.6.1 If the mechanical (e.g., time, temperature, pressure) and chemical (internal or external) indicators suggest that the **sterilizer** is not functioning properly, the **sterilizer** must be removed from service and sterilization operating procedures reviewed to determine if operator error could be responsible.
 - 4.5.6.2 Procedures taken to remedy the situation must be documented in the sterilization log referenced in section 4.4.3.4.
 - 4.5.6.3 Reprocess all items processed since the last negative spore test in a separate sterilizer that has negative spore test results.
 - 4.5.6.4 Retest the **sterilizer** with a **spore test** and appropriate mechanical, and chemical indicators after correcting any identified procedural problems.

- 4.5.6.5 If the repeat **spore test** is negative, and mechanical and chemical indicators are within normal limits, the **sterilizer** may be put back in service.
- 4.5.6.6 The following are required if the repeat **spore test** is positive:
 - 4.5.6.6.1 The **sterilizer** must be removed from service until it has been inspected or repaired and the exact reason for the positive test has been determined. Repairs must be performed by a factory authorized service professional, who is certified to repair and maintain the specific **sterilizer** being serviced.
 - 4.5.6.6.2 Before placing the **sterilizer** back in service, rechallenge the **sterilizer** with biological indicator tests in three consecutive empty chamber sterilization cycles after the cause of the **sterilizer** failure has been determined and corrected.

4.6 Single-use equipment

- 4.6.1 Single-use, prepackaged, pre-sterilized equipment and supplies must obtained from commercial suppliers or manufacturers.
 - 4.6.1.1 Maintain receipts of purchase for all disposable, single-use and pre-**sterilized** instruments for a minimum of 90 days after use.
 - 4.6.1.2 Receipts must be made available to the **Health Authority** upon request.
- 4.6.2 Single-use items must not be reused for any reason.
- 4.6.3 Single-use items must not be re-sterilized if expired.
- 4.6.4 Single-use items must be kept dry, and stored in a closed cabinet, drawer, or tightly covered container reserved for the storage of such items.
- 4.6.5 The **Health Authority** must be notified by the **permit holder** in writing before a **body art establishment** changes from using single- use **equipment** to reusable **equipment**.
 - 4.6.5.1 The **permit holder** must provide an **approved sterilizer**.
 - 4.6.5.2 The **approved sterilizer** must have a negative **spore test** that is no older than 30 days.; and
 - 4.6.5.3 The **sterilizer** must not be used until it has been **approved** by the **Health Authority**,

4.6.5.4 Until the **Health Authority** approves the **sterilizer**, the **body art establishment** must continue to use prepackaged, single-use, pre-**sterilized equipment** and supplies.

4.7 Dyes and pigments

- 4.7.1 All inks, dyes, and pigments must be specifically manufactured for performing **body art** procedures.
- 4.7.2 Inks, dyes and pigments must be used prior to expiration dates.
- 4.7.3 Inks, dyes and pigments must be commercially manufactured.
- 4.7.4 Only distilled water or sterile water dispensed from an unopened single-use container can be used for the mixing of inks, dyes, or pigments. Diluting with potable water is not acceptable. Such dilution must be single-use for the individual procedure. Immediately before a **tattoo** is applied, the quantity of the dye to be used must be transferred from the dye bottle and placed into single-use plastic cups or caps.
- 4.7.5 Upon completion of a **tattoo**, all single-use items and their contents must be discarded. Including unused portions of inks, dyes and pigments.
- 4.7.6 For individuals performing **microblading** or manual procedures, once the needle grouping (blade) is attached to the handpiece it cannot be removed and the entire assembly must be disposed of into the **sharps container**.
- 4.8 Materials used in **body art** work preparation and application
 - Materials such as mimeograph paper, markers, alcohol, lubricants, razors, etc. used in preparation for the application of a **body art** work must be kept clean and in good condition.
 - 4.8.1 All materials which are designed for multiple use (e.g., markers) must only be applied directly to clean, unbroken skin. If such materials come into contact with blood or bodily fluids, they cannot be reused and must be immediately discarded.

4.9 **Equipment** used for practice

- 4.9.1 **Equipment** used for practice must be set aside in a designated location.
- 4.9.2 Single-use **equipment** that has expired may be set aside to use for practice if the following conditions are met:
- 4.9.3 **Equipment** is labeled "EXPIRED. FOR PRACTICE ONLY. NOT FOR USE ON PATRONS" on the outside of the container.
 - 4.9.3.1 Expired **equipment** is not to be used on **patrons**.

4.9.3.2 Expired **equipment** is not kept in the same area as the **equipment** to be used for **patrons**.

Section 5 RESPONSIBLE PERSON, BODY ARTISTS, PERMIT HOLDERS AND VISITING BODY ARTISTS

5.1 Responsible person

- 5.1.1 The **permit holder** must designate a **responsible person** or persons to act on their behalf within the **body art establishment**. A **responsible person** must be present during all hours of operation and any time a **body art** procedure is being performed.
- 5.1.2 The **responsible person** must ensure that all applicable permits, certifications and licenses that are required are visible to **patrons** and the public and are properly displayed in the locations indicated by the **Health Authority** and other AGENCIES OF JURISDICTION.
- 5.1.3 The **responsible person** is held accountable for compliance with all requirements of these regulations
- 5.1.4 Violation of any one or a combination of these Regulations by the **body** art establishment, the responsible person, any personnel, body artist, or visiting body artist may result in the summary suspension, pending revocation, of the health permit and interruption of business operations while the matter is resolved with the Health Authority.
- 5.1.5 The **responsible person** may also act as an Event Coordinator during a **body art special event.**

5.2 **Body artist**

- 5.2.1 All **body artists** must complete training and obtain a **body art** card as described in section 8 of these Regulations prior to working as a **body artist**.
- 5.2.2 **Body artists**, while on duty, must:
 - 5.2.2.1 Utilize or wear effective hair restraints if they have hair over the ears:
 - 5.2.2.2 Have clean hands and fingernails;
 - 5.2.2.3 Wear clean outer garments; and
 - 5.2.2.4 Have good personal hygiene.
- 5.2.3 The **body artist** must be free of any skin rash, sores, viral or bacterial infection or other illness that may be transmitted to a **patron** as result of carrying out the **body art** procedure.
- 5.2.4 **Body artist**s cannot perform body art services outside of the permitted body art establishment or body art **special event**.

5.2.5 **Body artists** must not perform **body art** procedures while under the influence of an intoxicating substance, including without limitation alcohol or cannabis. Alcoholic beverages are not permitted in the **workstation**. Evidence that the **body artist** is applying **body art** while inebriated is sufficient cause for summary suspension and possible revocation of the **body art** card.

5.3 **Permit holders**

- 5.3.1 **Permit holders** are required to comply with the State of Nevada Occupational Safety and Health Standards for General Industry (29 CFR Part 1910.1030) regarding occupational exposure to **bloodborne pathogens**.
- 5.3.2 **Permit holders** or the **responsible person** are responsible for:
 - 5.3.2.1 Ensuring that **body artists** have a current **body art** card and comply with all applicable health, safety, sanitation and sterilization Regulations of the **Health Authority** and other agencies.
 - 5.3.2.2 Maintaining a list of all **body artists** who currently work at the establishment and who have worked at the establishment within the preceding two years. The list shall include the legal name, date of birth, residential and mailing address, phone number, description of duties, and copy of the **body art** card for each **body artist**.
- 5.3.3 It is the responsibility of the **permit holder** or **responsible person** to ensure that all **personnel**, contractors, and agents of the **body art establishment** understand and adhere to the Regulations.

5.4 Visiting body artists

- 5.4.1 The **permit holder** may also hire **body artist**s who have been approved to work as **visiting body artist**s by the Health Authority.
- 5.4.2 **Visiting body artist**s from other jurisdictions must be hosted by a **body** art establishment with a valid health permit for a period of time no longer than 14 consecutive days.
- 5.4.3 Each **visiting body artist** must make application to the **Health Authority** for each time interval in which they would like to participate.
- 5.4.4 While performing **body art** procedures within the jurisdiction of the **Health Authority**, **visiting body artists** must comply with all applicable Regulations. Failure to do so may result in revocation of permission to participate.
- 5.4.5 **Visiting body artists** must not perform procedures in any location outside of the **body art establishment** or **special event** for which they

are registered.

5.4.6 Once the **approved** visitation period ends, the **visiting body artist** is no longer permitted to practice **body art** in Clark County.

Section 6 PATRONS

- 6.1 **Patron** age requirements and other age restrictions
 - 6.1.1 The age of all **patrons** must be verified by
 - 6.1.1.1 reviewing a government issued identification document that has
 - 6.1.1.1.1 Not expired
 - 6.1.1.1.2 Contains a photograph of the patron, and
 - 6.1.1.1.3 Contains the **patron's** birthdate.
 - 6.1.1.2 review of the **patron's** identification must be indicated on the **patron** consent form prior to performing the procedure.
 - 6.1.2 The photographic identification document of **patrons who are** 21 years of age or younger must be photocopied and kept with the **patron's** paperwork.
 - 6.1.3 If the **patron** is less than 18 years of age and is not an emancipated minor, the parent or legal guardian must present their photographic identification document and a copy of the proof of custody or guardianship to the **body artist** prior to the procedure. A copy of the of the photographic identification of the **patron**, and their parent or legal guardian along with the proof of custody or guardianship must be attached to the completed consent form.
 - 6.1.4 If the client is an emancipated minor, a certified copy of the decree of emancipation issued to the minor pursuant to NRS 129.080 to 129.140, inclusive. A copy of the photographic identification and copy of the decree of emancipation must be attached to the completed consent form.
 - 6.1.5 Body art establishments are prohibited from applying body art not specifically exempted by these regulations to persons less than fourteen years old.
- 6.2 **Patron** consent form

Before administering **body art**, the **patron** must complete a **patron** consent form.

6.3 Contents of **patron** consent form

The **patron** consent form must contain the following:

- 6.3.1 **Patron's** name, date of birth, phone number and address;
- 6.3.2 Documentation of parental or custodial consent for **patrons** who are less than 18 years of age;

- 6.3.3 **Body artist's** name as indicated on **body art** card;
- 6.3.4 A risk notification section that provides information detailing the risks and possible consequences of a **body art** procedure must include risks including, but not limited to, the following:
 - 6.3.4.1 **Body art** can cause swelling, bruising, discomfort, bleeding, and pain;
 - 6.3.4.2 **Body art** can cause allergic reactions;
 - 6.3.4.3 **Body art** can cause irreversible changes to the human body; and **body art** has a risk of infection.
 - 6.3.4.4 Any effective removal of the **body art** work may leave permanent scarring and disfigurement.
- 6.3.5 **Patron** evaluation section that asks at a minimum the following questions that evaluate **Patron's** condition for receiving **body art** without violating their medical privacy. This section must include the following statement: Consult a physician prior to the procedure if you have any concerns about any of the questions below:
 - 6.3.5.1 Have you eaten within the past 4 hours?
 - 6.3.5.2 Are you under the influence of drugs or alcohol?
 - 6.3.5.3 Have you ingested anticoagulants (such as heparin or warfarin), antiplatelet drugs, or nonsteroidal anti-inflammatory drugs (NSAIDS) (such as aspirin, ibuprofen, etc.) in the last 24 hours?
 - 6.3.5.4 Have you ingested any medication that can inhibit the ability to heal a skin wound?
 - 6.3.5.5 Do you have any allergies or adverse reactions to dyes, pigments, latex, iodine, or other such products?
 - 6.3.5.6 Do you have hemophilia, epilepsy, a history of seizure, fainting, narcolepsy, or other conditions that could interfere with the **body art** procedure?
 - 6.3.5.7 Do you have a history of skin diseases that might inhibit the healing of the **body art** procedure?
 - 6.3.5.8 Do you have any **communicable diseases** (i.e., hepatitis A, hepatitis B, HIV, or any other disease that could be transmitted to another person during the procedure)?
 - 6.3.5.9 Do you have diabetes, high blood pressure, heart condition, heart disease, or any other conditions that could interfere with the **body art** procedure?
- 6.3.6 A work section that documents the following:

	6.3.6.1	Type of body art procedure,
	6.3.6.2	Location on body,
	6.3.6.3	Design, if applicable,
	6.3.6.4	Jewelry styles and sizes, if applicable,
	6.3.6.5	Expiration date and batch and/or lot number of all sterilized equipment used or pre-sterilized that will be applied to or inserted under the skin,
	6.3.6.6	Expiration date, brand, color, batch and/or lot number of all inks, dyes, and pigments used in the body art procedure,
	6.3.6.7	Date of body art procedure,
	6.3.6.8	Any complications that occurred during the body art procedure, and
	6.3.6.9	Signature of body artist .
6.3.7	An informe	ed consent section that includes the following:
	6.3.7.1	Patrons are voluntarily obtaining services of their own free will and volition,
	6.3.7.2	Patrons have had the opportunity to read and understand the document,
	6.3.7.3	Patrons have the ability to ask questions about the procedure,

6.3.8 The **patron** must sign a copy of the notice, or, if the **patron** is less than 18 years of age and is not an emancipated minor, the parent or legal guardian consenting to the **body art** procedure must sign the **patron** consent form.

Patrons have received and understand written and verbal

6.4 **Patron** assessments

6.3.7.4

aftercare.

- 6.4.1 **Body art** must not be administered to any person under the influence of drugs or alcohol. The **body artist** and **responsible person** are responsible for making reasonable observations and inquiries to determine that the **patron** is sober, and not under the influence of intoxicating substances.
- 6.4.2 The skin surface where the **body art** will be applied must be visibly free of rash, pimples, or infection or any other visible condition which would interfere with the healing process.

6.5 Record keeping

- 6.5.1 **Patron** consent forms must be:
 - 6.5.1.1 At the physical location of the **body art establishment**

	unless written permission is granted otherwise by the
	Health Authority;
6.5.1.2	Maintained in an orderly manner, filed by month and year to facilitate retrieval of records;
6.5.1.3	Kept on premises for a minimum of two years and
6.5.1.4	Made available to the Health Authority upon request.

Section 7 BODY ART PROCEDURES

General procedures

- 7.1.1 Aseptic techniques must be used for all **body art** procedures and when handling any clean or **sterilized body art equipment**.
- 7.1.2 Before performing **body art** procedures, **body artists** must thoroughly wash their hands in a hand sink in the following manner:
 - 7.1.2.1 Remove all rings, watches, and bracelets surrounding hands. Turn on warm water, wet hands, and apply soap;
 - 7.1.2.2 Rub hands together, outside the stream of water, for 20 seconds while making a soapy lather;
 - 7.1.2.3 Rinse hands with fingers pointed up toward the faucet and rinse down to your wrists; and
 - 7.1.2.4 Pat dry with a clean disposable towel.
- 7.1.3 Use a new clean disposable towel to turn off the handles of the sink.
- 7.1.4 **Body artists** must wash their hands if, at any point, there is an interruption which causes the procedure to cease. Upon returning to the **patron**, **body artists** must again wash their hands before donning fresh gloves.

7.2 Glove use

- 7.2.1 During **body art** procedures and prior to handling **sterilized equipment**, **body artists** must wear latex, nitrile or vinyl exam gloves.

 These gloves must be discarded after each procedure to prevent **cross--contamination** and when damaged, or when interruptions occur
 in the procedure.
 - 7.2.1.1 Prior to, during, and after a **body art** procedure, the **body artist** must wear exam gloves and use aseptic techniques
 to ensure that the instruments and gloves are not
 contaminated. This includes, but is not limited to:
 - 7.2.1.1.1 When setting up the procedure area. This set up includes touching containers, ink bottles barrier films, and exteriors of sterile packaging.
 - 7.2.1.1.2 When prepping skin, applying stencils, or drawing designs on the skin.
 - 7.2.1.1.3 Once the procedure is completed, cleaning or applying dressings to the procedure site.
 - 7.2.1.1.4 When tearing down and **disinfecting** the

procedure area.

7.3 Preparing for **tattoo** procedure

- 7.3.1 All **body art workstations**, surfaces of **equipment**, furnishings, and articles used during a **body art** procedure must be covered with a protective, impermeable barrier. Barriers must be single-use and discarded after each **patron**.
- 7.3.2 If shaving is necessary, single-use razors or safety razors with single-service blades must be used. Blades must be discarded in an appropriate **sharps container** after each use, and reusable holders must be **sterilized** after use.
- 7.3.3 Before a **tattoo** procedure is performed, the procedure site must be prepped with an antiseptic in accordance with the manufacturer's instructions.
- 7.3.4 Substances applied to the **patron's** skin to transfer designs from a stencil or paper must be dispensed from containers in a manner to prevent **contamination** of the unused portion. Use of a spray bottle to apply liquid to the skin is acceptable. All creams and other semi-solid substances must be removed from containers with a spatula. Individual portions of dyes or pigments in clean single-use containers must be used for each **patron**. Any remaining unused dye or pigment and the single-use container(s) must be discarded immediately following service.
- 7.3.5 Large batch containers of dyes or pigments that are used to dispense product into the single-use containers are permitted. Dye or pigment must not be reintroduced for any reason into these batch containers after it has been dispensed for single-use, even if unused.

7.4 **Piercing** procedures

- 7.4.1 Before a **piercing** procedure is performed, the procedure site must be prepped with an antiseptic applied in accordance with the antiseptic manufacturer's instructions.
- 7.4.2 **Piercing** needles must be individually packaged and **sterilized**, used once, then immediately disposed of in a **sharps container**.
- 7.4.3 **Piercing** needles are not reusable under any circumstances.
- 7.4.4 All **jewelry** and instruments that directly aid in the **piercing**, or that may come in contact with instruments that are used during the **piercing**, such as forceps or needle holders, must be properly **sterilized** in accordance with the procedures described in section 4.4.
- 7.4.5 The **body artist** must wear new exam gloves during each procedure.
- 7.4.6 **Piercing** guns are permitted exclusively for ear lobe **piercing** and are

not to be used for other body piercings.

7.4.7 Jewelry

All **jewelry** used for initial **piercing**s must be obtained from a commercial **jewelry** supplier

All custom manufactured **jewelry** used for initial **piercings** must meet the following standards:

- 7.4.7.1 Made of materials that meet ASTM, ISO or equivalent standards for implantation. Examples of these include but are not limited to:
 - 7.4.7.1.1 steel that is ASTM F138 compliant or ISO 5832-1 compliant,
 - 7.4.7.1.2 steel that is ISO 10993-6, 10993-10, and/or 10993-11 compliant,
 - 7.4.7.1.3 unalloyed titanium that is ASTM F67 or ISO 5832-2 compliant,
 - 7.4.7.1.4 alloyed titanium (Ti6Al4V ELI) that is ASTM F136 compliant or ISO 5832-3 compliant,
 - 7.4.7.1.5 alloyed titanium (Ti6Al7Nb ELI) that is ASTM F1295 compliant or ISO 5832-11 compliant, and
 - 7.4.7.1.6 any polymer or plastic material that is ISO 10993-6, 10993-10, and/or 10993-11 compliant and/or meets the U.S.

 Pharmacopeia (USP) Class VI classification. This includes but is not limited to polytetrafluoroethylene (PTFE) that is ASTM F754 compliant.
- 7.4.7.2 Solid 14 karat or higher yellow, white, or rose gold that is nickel free and cadmium free. Gold **jewelry** used for initial **piercing** cannot be:
 - 7.4.7.2.1 plated,
 - 7.4.7.2.2 gold filled, or
 - 7.4.7.2.3 gold overlay/vermeil.
- 7.4.7.3 Solid unalloyed or alloyed platinum that is nickel free and cadmium free.
- 7.4.7.4 Unalloyed niobium (Nb) that is ASTM B392 compliant. This includes but is not limited to:
 - 7.4.7.4.1 commercial grade 2 niobium and

- 7.4.7.4.2 commercial grade 4 niobium that contains 1% zirconium.
- 7.4.7.5 Glass that is lead free. This includes, but is not limited to:
 - 7.4.7.5.1 quartz,
 - 7.4.7.5.2 borosilicate, and
 - 7.4.7.5.3 soda-lime.
- 7.4.7.6 All threaded or press-fit **jewelry** used for initial **piercings** must not expose any threads or other crevices after final assembly.
- 7.4.7.7 For body **jewelry** purposes, surfaces and ends must be smooth, free of nicks, scratches, burrs, stamps, hallmarks, and polishing compounds.
- 7.4.7.8 Metals must have a consistent mirror finish on surfaces that frequently come in contact with tissue.
- 7.4.7.9 All **jewelry** used for initial **piercing** on people older than 12 years must be ASTM F2999 compliant.
- 7.4.7.10 All **jewelry** used for initial **piercing** on people 12 and younger must be ASTM F2923 compliant.

7.4.8 **Jewelry** Receipts

Purchase records for jewelry purchased for initial piercings must:

- 7.4.8.1 Be maintained on premises for a minimum of 90 days after purchase.
- 7.4.8.2 Be retained for a minimum of two years. All two years of records must be available to **Health Authority** upon request.
- 7.4.8.3 Be made available to the **Health Authority** upon request.
- 7.4.8.4 List the name of the seller
- 7.4.8.5 List the number and type of **jewelry** purchased
- 7.4.8.6 List the name of the manufacturer of the **jewelry** purchased
- 7.4.8.7 List the country of origin of the **jewelry**
- 7.4.8.8 Contain information indicating date of **jewelry** manufacturing and **jewelry** material composition.

7.5 Single-use items-rules and prohibitions

- 7.5.1 Single-use items must not be reused for any reason. After use, all needles, razors and other **sharps** must be immediately disposed of in **sharps containers**.
- 7.5.2 A single **body art** session that is interrupted for a brief amount of time,

such as, to use the RESTROOM or break for drinking water, does not require disposal of all single- use items being used on a single **patron**. Using the same supplies to complete the **body art** session on a single **patron** does not constitute a case of reuse.

7.5.3 Products used in the application of stencils must be dispensed and applied on the area to be **tattoo**ed with a suitable clean, single-use product and used in a manner to prevent **contamination** of the original container and its contents.

7.6 Contamination of items

Any item or instrument used for **body art** that becomes contaminated during the procedure must be immediately removed from the procedure area and replaced before the procedure resumes

7.7 Reusable Spatulas

Spatulas made of a washable, non-absorbent material and designed for multiple use may be **sterilized** and used again. Spatulas made of wood or otherwise designed for single-use must be discarded after a single-use. Single-use tubes or containers must be discarded following the **tattoo** procedure.

7.8 Unused dye or pigment

Any remaining unused dye or pigment and the single-use container(s) must be discarded immediately following service.

7.9 Linens

- 7.9.1 If **linens** are used, clean **linens** must be used for each **patron** and laundered after each use.
- 7.9.2 Clean **linens**, tissues or single-use paper products must be stored in a clean, enclosed storage area until needed for immediate use.
- 7.9.3 Used **linens** must be stored in a closed or covered container until laundered.
- 7.9.4 Used **linens** must be laundered in a washing machine with laundry detergent and chlorine bleach or by a commercial laundry service.

7.10 Bandaging

Any bandaging or other products applied to the area of the body on which the procedure was performed must be single-use and manufactured for the sole purpose of wound care, cleaning or medical care.

7.11 Aftercare instructions

- 7.11.1 The written aftercare instructions must include the following:
 - 7.11.1.1 The name, address and telephone number of the **body art** establishment.
 - 7.11.1.2 The name of the **body artist** who performed the procedure as it appears on their **body art** card;
 - 7.11.1.3 A detailed description of how to care for the **body art**,

- including a description of any necessary cleaning and bandaging;
- 7.11.1.4 Possible side effects from the **body art** procedure;
- 7.11.1.5 Any restrictions on various activities;
- 7.11.1.6 Instructions on, signs of an infection or allergic reaction and when to consult a physician;
- 7.11.1.7 The expected duration for healing; and
- 7.11.1.8 A statement in the same font and size as the facility's aftercare instructions that states: "If an infection or adverse reaction occurs at your procedure site, contact your personal physician for treatment and report to the Southern Nevada Health District special programs at (702) 759-0677 or bodyart@snhd.org."
- 7.11.2 The **body artist** will provide both verbal and written aftercare instructions to each **patron** following each procedure
- 7.11.3 The written aftercare instructions can be provided in either a print or digital form.
- 7.11.4 Written aftercare instructions must also be posted in a prominent and conspicuous area where it can be readily observed by **patrons**.
- 7.11.5 The content of the written aftercare instructions must be **approved** by the **Health Authority**.
- 7.12 Infection control plan contents

Pursuant to NAC 444.00777, an infection control plan must:

- 7.12.1 Be reviewed annually by all **personnel**.
- 7.12.2 Be submitted to the **Health Authority** for approval when any change is made to the infection control program.
- 7.12.3 Be provided to the **Health Authority** upon request.
- 7.12.4 Include the following:
 - 7.12.4.1 The types **body art** procedures performed in the **body art establishment**;
 - 7.12.4.2 Procedures for cleaning and **disinfecting** surfaces;
 - 7.12.4.3 Procedures for cleaning, **disinfecting**, packaging, sterilizing and storing reusable instruments and **equipment**;
 - 7.12.4.4 Procedures for protecting clean instruments and sterile instrument packs from exposure to dust and moisture during storage;
 - 7.12.4.5 A set-up and tear-down procedure for all **body art**

- procedures performed in the body art establishment;
- 7.12.4.6 Techniques and procedures to prevent the **contamination** of instruments, **equipment**, surfaces or the procedure area during a **body art** procedure;
- 7.12.4.7 Procedures for the safe handling and disposal of **sharps** and biohazardous waste;
- 7.12.4.8 The records required to be maintained by the **responsible person** to demonstrate that the infection control plan is properly operated and managed; and
- 7.12.4.9 Any additional scientific data or other information, as required by the **Health Authority**, to support the determination that the infection control plan and the operations of the **body art establishment** are sufficient to protect the public health.

7.13 Infection reporting required

7.13.1 Any infection resulting from the **body art** procedure, which becomes known to the **body artist** or the **body art establishment**, must be immediately reported to the **Health Authority** by phone or by e-mail.

7.14 Reporting adverse events

- 7.14.1 **Body artists** must report all adverse events relating to or suspected of being related to materials used during a **body art** procedure to the **Health Authority**, including the name of the **body artist**, **patron** information, description of adverse event(s), and a complete description of materials involved including lot and/or batch codes. This reporting will help identify outbreaks and identify products with manufacturing defects. A record of this reporting must be maintained with the complaint of injury form in **patron** records.
- 7.14.2 Copies of reports for all adverse events that occurred at the **body art establishment** must be maintained by the **body art establishment**, available upon request, for three years after the event. Adverse reactions that occur when using Federal Drug Administration (FDA)-regulated products should be reported to the FDA MedWatch program and noted in the MedWatch Individual Case Safety Report ID (ICSR).

7.15 Food

- 7.15.1 Eating or drinking by anyone is prohibited in the **workstation** and any other location where instruments or supplies are stored or cleaned such as the **equipment** processing room.
- 7.15.2 An enclosed beverage, such as bottled water, is allowed at the workstation while the body artist is working on patron.

7.16 Prohibited acts

The following acts are expressly prohibited by the **Health Authority** in **body art establishments** and **body art special events**:

- 7.16.1 Any extreme body modification such as
 - 7.16.1.1 Scarification
 - 7.16.1.2 Branding
 - 7.16.1.3 Cutting
 - 7.16.1.4 Skin peeling
 - 7.16.1.5 Implantation,
 - 7.16.1.6 Suspension piercing,
 - 7.16.1.7 Dermal punching,
 - 7.16.1.8 Single point piercing,
 - 7.16.1.9 Voluntary amputation
 - 7.16.1.10 Tongue and/or penis splitting,
 - 7.16.1.11 Neck rings,
 - 7.16.1.12 Or otherwise determined by the **Health Authority**.
- 7.16.2 **Tattoo** or **permanent makeup** removal by means of:
 - 7.16.2.1 Surgery,
 - 7.16.2.2 Treatment with a chemical or substance (e.g. **tattoo** remover), or
 - 7.16.2.3 Medical **device** such as infrared coagulator or laser.
- 7.16.3 The injection into the human body of:
 - 7.16.3.1 Botulinum toxin,
 - 7.16.3.2 Prescription numbing agents, or
 - 7.16.3.3 Any substance other than dyes or pigments **approved** for **tattooing**.

Section 8 BODY ART CARD REQUIREMENTS AND FEES

8.1 Purpose

The purpose of this section is to ensure that each **body artist** has a base level of knowledge regarding the spread of disease through the practice of **body art**. This is done through using an **apprentice/mentor body artist** training system.

- 8.2 Application for body art card
 - Application for a **body art** card must be made to the **Health Authority** on forms **approved** by the **Health Authority**.
- 8.3 Items required for application
 - In addition to the **body art** card application form, the following items must be provided to the **Health Authority**:
 - 8.3.1 Proof of completion of the American Red Cross training in Preventing Disease Transmission (PDT) or equivalent training.
 - 8.3.2 A government issued identification document that has
 - 8.3.2.1 Not expired;
 - 8.3.2.2 Contains a photograph of the **applicant** and
 - 8.3.2.3 Contains the **applicant's** birthdate, showing that the applicant is at least 18 years of age.
 - 8.3.3 Fees for the written exam (non-refundable) and **body art** card as determined by the **Health Authority** Fee Schedule.
 - 8.3.4 Proof of training
 - 8.3.4.1 If the applicant has not completed a minimum of six months of training or experience or if documentation of training or experience is unavailable,
 - 8.3.4.1.1 The applicant must enter into a Health and Sanitation apprenticeship with a mentor body artist at a permitted body art establishment within Clark County.
 - 8.3.4.1.2 The name of the **mentor body artist** and their **mentor body artist body art** card number sponsoring the apprenticeship must be indicated on the "Body Art Card Application" form.
 - 8.3.4.1.3 Upon completion of a minimum of six months training, the applicant must return to the **Health Authority** with written proof from their **mentor** of training and experience in order to obtain their body art card.

8.3.4.2 If the applicant has worked in a **body art establishment** outside of Clark County, written proof from a previous employer that the applicant has a minimum of six months experience or training as a **body artist** in a permitted **body art establishment** will be accepted. The written proof must:

8.3.4.2.1	Show current date,
0.3.4.2.1	SHOW CUITCHT date.

- 8.3.4.2.2 Be on company letterhead of former employer,
- 8.3.4.2.3 List specific dates of experience or training,
- 8.3.4.2.4 Contain printed name and signature of the person writing the letter of proof,
- 8.3.4.2.5 If the applicant is/was the **owner** of the establishment that is outside of Clark County, a copy of the establishment's business license with the applicant's name on it will meet the requirements of proof of experience.

8.4 Written exam

- 8.4.1 After an application for a new **body art** card has been accepted the applicant will take a written exam.
- 8.4.2 A passing score for the exam is 80% or higher correctly answered questions.
- 8.4.3 If an applicant does not pass the written exam, a new appointment to retake the exam can be made; however, the exam fee must be paid again.
- 8.5 Exam study and organizational materials

The applicant may access study materials to assist in preparing for the **body art** card exam by visiting the **Health Authority's** website: www.southernnevadahealthdistrict.org in the **body art** card section.

8.6 Microblading card

- 8.6.1 A person who limits their practice to microblading only parts of the face may apply for a microblading card following the steps outlined in 8.2 to 8.5 of these regulations, except:
- 8.6.2 A microblading card is not a body art card.
- 8.7 **Mentor body artist** card

A **mentor body artist** may sponsor

- 8.7.1 no more than five **apprentice**s at any one time
- 8.7.2 no more than fifteen **microblading apprentice**s at any one time.
- 8.8 **Body art** card, **mentor body artist** card and **microblading card** renewal **Body art** cards **mentor body artist** cards and **microblading card** must be

renewed every two years.

- 8.9 Expired body art cards mentor body artist and microblading card cards
 - 8.9.1 Body artists mentor body artists and microblading artists must not perform body art procedures if their card is expired. Performing body art procedures with an expired body art, mentor body artist or microblading card is a violation of these Regulations and is subject to enforcement provisions of Section 11 of these Regulations, up to and including denial of a future body art card or mentor body artist or microblading card.
 - 8.9.2 If the **body artist** allows their **body art** card or **microblading card** to expire for more than 1 year, they will be required to repeat the application process, including retaking the basic sanitation examination with a passing score and paying all applicable fees.
 - 8.9.3 If a **mentor body artist** allows their card to expire for more than 1 year, they will
 - 8.9.3.1 Be required to repeat the application process (including retaking the basic sanitation examination with a passing score and paying all applicable fees).
 - 8.9.3.2 Be issued a **body art** card upon successful completion of the application process.
 - 8.9.3.3 No longer be able to sponsor **apprentices** for a period of two years.
- 8.10 Valid card in **body artist**'s possession

A valid **body art, mentor body art** or **microblading card** must be in the **body artist's** possession, either on their person or readily available in their personal affects, at all times while engaged in the practice of **body art** work.

- 8.11 Issuance of an apprentice body art, body art or mentor body artist cards
 - 8.11.1 **Apprentice body art** cards will be issued for applicants who have not completed the six-month training requirement but have passed other requirements.
 - 8.11.2 **Microblading apprentice** cards will be issued for applicants who have not completed the six-month training requirement but have passed other requirements
 - 8.11.3 The permanent **body art** or **microblading card** will be issued after documentation of the required six-month experience has been received.
 - 8.11.4 A mentor body artist card can be issued upon request after providing evidence of four consecutive years of experience. Evidence can be shown by holding a body art card issued by the Health Authority, and/ or by providing evidence of experience in a jurisdiction

outside of the **Health Authority**.

8.11.5 Issuance of the **body art** card or **mentor body artist** card is conditional upon full compliance with these Regulations.

8.12 **Body art** and **mentor body artist** card transfer prohibition

All cards are issued to an individual and are not transferable from person to person.

8.13 Existing **body art** cards

A **body artist** who holds a **body art** card at the time these Regulations are adopted can apply for a **mentor body artist** card without the four years' experience before June 30, 2023.

8.14 Existing apprentice cards

Any **apprentice** who received their **body art** card prior to the adoption these Regulations may continue as an **apprentice** until they meet the requirements of being eligible to apply for their **body art** card.

8.15 **Permit holder's** joint responsibility

The **permit holder** has joint responsibility with the **body artist** in ensuring that each individual they hire or consent to take as an **apprentice** obtains a **body art** card in accordance with these Regulations. Allowing individuals to practice as a **body artist** within a **body art establishment** without a valid **body art** card is grounds for enforcement action, up to and including suspension of the **health permit** for the **body art establishment**.

Section 9 BODY ART SPECIAL EVENTS

- 9.1 **Special event body artist** application
 - 9.1.1 An event permit may be issued by the **Health Authority** for educational, sales, or convention purposes.
 - 9.1.2 The event permit can be valid from 1 to 14 days. The length of an event determines the necessary fees based on the **Health Authority**'s current Fee Schedule.
 - 9.1.3 An application must be accompanied by payment of applicable fees at least 30 days prior to the start of the event. A late fee will be assessed if the application and fee are not received a minimum of 30 days prior to the start date of the event. Applications submitted less than 30 days prior to the start of the event may not be accepted, subject to the discretion of the **Health Authority**.
 - 9.1.4 During the **special event**, all **body art** procedures must be conducted inside an **approved** location that has the sanitary facilities as described in section 9.3.
 - 9.1.5 A person who wishes to obtain an event permit must:
 - 9.1.5.1 Submit a completed "Special Event Permit Application" to the **Health Authority**, at least 30 days prior to the event
 - 9.1.5.2 Provide proof of experience by any of the following ways:
 - 9.1.5.2.1 Provide a copy of their registration or **body art** card issued by another **Health Authority**,
 - 9.1.5.2.2 Provide a copy of a current business license of the **body art establishment** that they currently working at, or
 - 9.1.5.2.3 A letter from the Event Coordinator that states that the artist has the minimum experience specified in section 8.5.1.
 - 9.1.5.3 Pay the appropriate fees
- 9.2 **Special Event** Coordinator
 - 9.2.1 If more than one **body artist** will be participating, each entity hosting a **special event** must designate a **Special Event** Coordinator (Event Coordinator) who is responsible for each artist's compliance with the applicable Regulations and operational procedures over the span of the **special event**.
 - 9.2.2 The Event Coordinator must make application and pay all applicable fees designated by the **Health Authority**.

- 9.2.3 The Event Coordinator must provide **equipment** and supplies to correctly dispose of all **sharps** and biohazardous waste.
- 9.2.4 The Event Coordinator or designee must be available during the inspection of the **body artists** and throughout the duration of the **special event**.
- 9.2.5 If the **special event** exclusively uses single-use, prepackaged, **sterilized equipment** obtained from commercial manufacturers then **sterilization equipment** is not necessary.
- 9.2.6 If any sterilization equipment is used to sterilize reusable equipment, then a spore test must be performed and passed for no more than seven days prior to the date of the event. A copy of the spore test must be provided to the Health Authority prior to the start of the special event.
- 9.2.7 The Event Coordinator must provide an appropriate number of conveniently located hand washing facilities with liquid soap, paper towels and hot and cold water under adequate pressure and drained in accordance with local plumbing codes.
- 9.2.8 When submitting an application for a **special event**, the Event Coordinator must provide to the **Health Authority**
 - 9.2.8.1 A copy of the **patron** consent form and **patron** aftercare. These forms must:
 - 9.2.8.1.1 Meet the requirements outlined in sections 6.2, 6.3 and 7.11 of these Regulations.
 - 9.2.8.1.2 Must be used by all **body artists** at the event for consent and aftercare.
 - 9.2.8.2 A floor plan of the event that indicate the location of booths that may have **body artists**. Each booth must be at least 50 square feet of floor space for each working **body artist**.
 - 9.2.8.3 The type of flooring in the booths.
 - 9.2.8.4 The location of the hand washing facilities.
 - 9.2.8.5 If provided, the location of **sterilizer** and cleaning facilities
 - 9.2.8.6 A copy of the agreement between the Event Coordinator and biohazardous waste hauler for the appropriate disposal of all **sharps** and other biohazardous waste.
 - 9.2.8.7 Water supply and wastewater disposal methods.
- 9.3 **Special event** operational requirements
 - 9.3.1 The event permit will consist of a wrist band that must be worn on the wrist by the artist during the entirety of the **special event**.

- 9.3.2 Compliance is required with all of the requirements of these Regulations, including without limitation:
 - 9.3.2.1 Provision of **disinfecting** single-use hand wipes, **approved** by the **Health Authority**, in addition to the hand washing requirements of this Section;
 - 9.3.2.2 At least 50 lumens per foot of light in a fixture shielded with a solid barrier or a bulb constructed of shatterproof materials at the level where the **body art** work is being applied.
 - 9.3.2.3 Provision of **equipment** and supplies to properly clean and **disinfect** the area used for **body art** work.
 - 9.3.2.4 Ability to clean and **sterilize** reusable **equipment** using the **equipment** provided by the Event Coordinator.
 - 9.3.2.5 Provision of **equipment** and supplies to correctly dispose of all **sharps** and biohazardous waste.
 - 9.3.2.6 Provision of **equipment** and supplies to dispose of all non-hazardous **solid waste**.
 - 9.3.2.7 Smooth, nonabsorbent flooring that can be cleaned and **disinfected** or disposed of.
- 9.3.3 All areas where **body art** takes place will be inspected and **body** artists will be interviewed by the **Health Authority**.
- 9.3.4 Upon successful completion of the inspection and interview, an event permit will be issued.
- 9.3.5 No **body art** procedures can be performed until after the Event Permit is issued.
- 9.3.6 The **approved** event consent form and aftercare instructions will be used to provide consent and aftercare instructions to the **patrons**.
- 9.4 Event permit suspension

Event permits issued under the provisions of these Regulations may be suspended by the **Health Authority** for failure of the Event Coordinator, or permitted event **body artists**, to comply with the requirements of these Regulations.

Section 10 HEALTH PERMIT, CHANGE OF PERMIT HOLDER, AND WAIVERS, AND FEES

10.1 Health permit required

All **body art establishments** must have a valid **health permit** issued by the **Health Authority** in order to operate.

10.2 **Health permit** exemptions and prohibitions

- 10.2.1 A physician, or a person working under the direct supervision of a physician, performing **body art** work in the physician's office or clinic, is exempt from these Regulations.
- 10.2.2 No **health permits** will be issued to private residences, including apartments, condominiums, multi-family or single-family dwellings for **body art** work activities.
- 10.2.3 **Body art** performed in a location other than a permitted, **body art establishment** or **special event** is in violation of these Regulations and will be ordered to cease and desist all activities. If the individual also holds a **body art** card, the **body art** card is subject to suspension or revocation.

10.3 New and remodeled body art establishments permits

- 10.3.1 To qualify for a permit, an applicant must:
 - 10.3.1.1 Be an **owner**, prospective **owner**, person legally in charge, **owner** designee, or an officer of the legal ownership of the **body art establishment**;
 - 10.3.1.2 Pay the applicable fees at the time the application is submitted; and
 - 10.3.1.3 Comply with the requirements of these Regulations.

10.3.2 Application submission

- 10.3.2.1 Applications for a permit must be made in a manner required by the **Health Authority**.
- 10.3.2.2 Applications must be submitted at least 30 days before:
 - 10.3.2.2.1 Construction begins, if the facility has not yet been built;
 - 10.3.2.2.2 The opening date of any **body art**establishment if located inside existing
 construction; and/or
 - 10.3.2.2.3 The effective date of a change of **permit** holder.

10.3.3 Contents of the application

The application must include:

- 10.3.3.1 Proof of location, such as a lease, deed, or other legally executable document,
- 10.3.3.2 **Equipment** specifications, such as the name and model number of the **sterilizer**, if applicable,
- 10.3.3.3 A written infection control plan designed to eliminate or minimize **personnel** exposure to blood or OPIM as required in 29 CFR 1910.1030(b),
- 10.3.3.4 Copy of a current **body art** card of a **responsible person**,
- 10.3.3.5 A proposed **patron** consent form that meets the requirements of 6.2 and 6.3,
- 10.3.3.6 Proposed aftercare instructions that meet the requirements of section 7.11,
- 10.3.3.7 For new or remodeled **body art establishments**, plans must be submitted that include the dimension of each **workstation**, the location of plumbing fixtures, floor, wall and ceiling materials, light levels, locations of **sharps containers**, and the locations of the **sterilizer** and **ultrasonic cleaner**, if used, in **equipment** processing room.

10.4 Permit conditions

- 10.4.1 Permit approval for a **body art establishment** is contingent upon compliance with applicable laws and Regulations including local building ordinances and codes. In the event that there are any conflicts between these requirements, the more stringent requirement must be met.
- 10.4.2 Pre-approval inspection

At the time of the final permitting inspection, the **permit holder** or **responsible person** must provide the following,

- 10.4.2.1 **Equipment** to be used in the facility to administer **body art**
- 10.4.2.2 The results of a **spore test** conducted after the **sterilizer** was installed. The **spore test** must have been performed no earlier than 30 days prior to the inspection and must indicate that the **sterilizer** is functioning adequately
- 10.4.3 If the **Health Authority** determines, after inspection, that the proposed **body art establishment** can be operated in accordance with the provisions of these Regulations, a **health permit** will be issued to the applicant.

- 10.5 Change of **permit holder** of an operating body art establishment
 - 10.5.1 An existing **body art establishment**, at the time of change of **permit holder**, must meet the requirements of these Regulations prior to issuance of a permit.
 - 10.5.2 The **Health Authority** may issue a permit to a new **permit holder** of an existing **body art establishment** after a properly completed application is submitted and reviewed, fees are paid, and an inspection is passed.
 - 10.5.3 A facility will be required to bring any aspect of the **body art establishment** into compliance with the current Regulations, laws and codes when ownership changes.
 - 10.5.4 Notification of **Health Authority**The **owner** or **permit holder** will notify the **Health Authority** in writing by e-mail or letter of any changes in the **permit holder**.

10.6 Waivers

10.6.1 Conditions of waiver

The **Health Authority** may grant a **waiver** by modifying or waiving the requirements of these Regulations if, in the opinion of the **Health Authority**, public health and safety will not be impacted as a result of an **approved waiver**.

- 10.6.1.1 The **Health Authority** may impose conditions on the **body** art establishment relating to the mitigation of hazards.
- 10.6.1.2 If the **waiver** is granted, the **permit holder** must comply with all operational plans, procedures, and conditions stipulated in the **waiver**.
- 10.6.1.3 Failure to meet any the **waiver** conditions may result in immediate closure pending revocation of the **waiver** and violations against the **health permit**.
- 10.6.2 Documentation of proposed **waiver** and justification

A **body art establishment** seeking a **waiver** must apply in the manner required by the **Health Authority**. The application must include, but not be limited to:

- 10.6.2.1 A statement of the proposed **waiver** of the regulatory requirement citing relevant Regulation section numbers.
- 10.6.2.2 A statement of how the intent of the Regulations will be met with regard to elimination or mitigation of the any hazards resulting from **waiver** of the Regulation and the reasons why public health and safety would not be jeopardized if the **waiver** was granted.

- 10.6.2.3 An operational plan, if required, that includes information relevant to the **waiver** requested.
- 10.6.2.4 Approvals from other agencies having jurisdiction.
- 10.6.2.5 Any other information required by the **Health Authority** to make a determination on the **waiver**
- 10.6.3 A **health permit** cannot be issued until a **waiver** determination is made.
- 10.6.4 If additional information is requested by the **Health Authority**, but not provided within ten business days, the **waiver** application may be denied.
- 10.6.5 **Waivers** are not transferrable from one business **owner** or location to another.
- 10.6.6 The appeal process of denial of a **waiver** is to submit a variance petition to the District Board of Health.
- 10.7 **Health permit** payment of fees
 - 10.7.1 **Health permit** fees must be paid annually.
- 10.8 Prohibition of the transfer of the **health permit**

Health permits are not transferable from person to person or location to location.

10.9 Permit modifications

Proposed modifications in the type of operations to be conducted by a **body art establishment** are not be allowed unless **approved** by the **Health Authority**. The modification process may include, but not be limited to, submission of a construction or **waiver** application, complete with plans and information describing the proposed modifications in design, **equipment**, and operations.

- 10.10 Health permit posted
 - 10.10.1 The current **health permit** must be posted in plain view of the general public and must not be altered or defaced in any manner.
 - 10.10.2 The **permit holder** must also post, in public view within the premises, next to the **health permit**, in a plain font with a minimum 0.5 inch height the following statement: "This facility is permitted by the Southern Nevada Health District (SNHD). Resources and information can be found on SNHD's website using the QR code below. SNHD can be reached at 702 759 0677 or bodyart@snhd.org." and a QR code at least 1 inch square that links to the **Health Authority**'s website on **body art** regulation.
- 10.11 Deletion of the health permit

To remove a **body art establishment** from regulatory oversight and have the associated **health permit** deleted, the **owner** or **permit holder** must notify the **Health Authority** in writing of permanent closure of the establishment.

Section 11 ENFORCEMENT AND INSPECTIONS

11.1 Documentation of conditions

- 11.1.1 The **Health Authority** shall address conditions necessary to protect public health and may impose specific requirements in addition to the requirements specified in these Regulations.
- 11.1.2 The **Health Authority** shall prepare a report describing any deficiencies discovered during the inspection including corrective actions, and applicable deadlines for compliance.
- 11.1.3 The **Health Authority** shall document the conditions that necessitate the imposition of additional requirements and the underlying public health rationale.
- 11.1.4 A copy of the completed report will be furnished to the **permit holder**, **responsible person** or **body artist**, and a copy of the report will be maintained in the **Health Authority**'s file in accordance with its records retention policy.

11.2 Failure to correct a deficiency

- 11.2.1 Failure to correct a deficiency within the period specified in the written report is a violation of these Regulations.
- 11.2.2 Violations that constitute an imminent threat to public health and safety are addressed in Section 2 of these Regulations and are a violation of these Regulations.
- 11.2.3 **Health permits** may be revoked or suspended for violation of these Regulations in accordance with the procedures set forth in section 12.

11.3 Responsibilities

- 11.3.1 Responsibilities of the **Health Authority**
 - 11.3.1.1 The responsibilities of the **Health Authority** include informing the **permit holder** how to obtain a copy of these Regulations, and that the **permit holder** is responsible for compliance with these Regulations.
 - 11.3.1.2 Failure to provide the above information does not prevent the **Health Authority** from taking authorized action, or seeking remedies, if the **permit holder** fails to comply with these Regulations or an order, warning, or directive of the **Health Authority**.
- 11.3.2 Responsibilities of the **permit holder**

To retain the **permit**, the **permit holder** must:

11.3.2.1 Post the **health permit** in a location in the **body art**

- **establishment** that is clearly conspicuous to the **patron**.
- 11.3.2.2 Immediately discontinue operations and notify the **Health Authority** if an imminent health hazard exists.
- 11.3.2.3 Allow the **Health Authority** access to the **body art establishment** during normal operating hours or upon request.
- 11.3.2.4 Comply with directives of the **Health Authority**, including, without limitation, time frames for corrective actions specified in inspection reports, supervisory conferences, compliance schedules, notices, orders, warnings, and other directives issued by the **Health Authority** concerning the **permit holder's body art establishment**.
- 11.3.2.5 Comply with all applicable federal, state and local governmental requirements as related to the operation of a **body art establishment**. The responsibility of upholding these requirements falls solely on the **permit holder**, and failure to do so may result in **permit** suspension or revocation.
- 11.3.2.6 Accept notices issued and served by the **Health Authority**.

11.4 Inspections

- 11.4.1 Inspection authority
 - 11.4.1.1 Upon presenting proper identification, the **Health Authority** must have the right of access, entrance, inspection, and investigation of any **body art establishment** permitted by these Regulations.
 - 11.4.1.2 The right of access pursuant to this Section, includes, but, is not limited to access for the purpose of:
 - 11.4.1.2.1 Routine inspection;
 - 11.4.1.2.2 Inspection or investigation to determine if there has been a violation of NAC Chapter 444 or these Regulations;
 - 11.4.1.2.3 Verification of compliance with previously written violation notices:
 - 11.4.1.2.4 Collection of samples or specimens;
 - 11.4.1.2.5 Examination, review, and copying of relevant documents and records;
 - 11.4.1.2.6 Obtaining photographic or other evidence needed to enforce these Regulations; and

- 11.4.1.2.7 Questioning any **personnel** present.
- 11.4.1.3 If the **Health Authority** is refused access, the **Health Authority** must:
 - 11.4.1.3.1 Inform the person that access is a condition of the acceptance and retention of the **health permit**; and
 - 11.4.1.3.2 Provide details of the denial of access on an inspection report form and the **body art establishment** will be posted as closed.

11.5 Interfering with the **Health Authority**

- 11.5.1 It is a violation of these Regulations for a person to interfere with, deny, or delay an inspection conducted by the **Health Authority**.
- 11.5.2 As specified in NRS 199.300, it is unlawful for any person to directly or indirectly intimidate a public employee.
- 11.6 Issuing report and obtaining acknowledgment of receipt
 - 11.6.1 At the conclusion of the inspection, the **Health Authority** must:
 - 11.6.1.1 Review a copy of the completed inspection report, and any corresponding notice to correct violations with the **permit holder** or the **responsible person**; and
 - 11.6.1.2 Obtain a signed acknowledgement of receipt on the report.

 If an electronic report, the acknowledgement may be by other means.
 - 11.6.2 Refusal to sign acknowledgement
 - 11.6.2.1 Should the **permit holder** or **responsible person** refuse to sign the acknowledgment on the report, the **Health Authority** must inform the refusing party that:
 - 11.6.2.1.1 Refusal to sign an acknowledgment does not nullify the inspection report or the **permit holder's** obligation to correct the violations noted in the inspection report within the time frames specified, and
 - 11.6.2.1.2 An acknowledgment of receipt does not constitute an agreement with findings.
 - 11.6.2.2 The refusal will be documented on the report.
 - 11.6.2.3 The inspector will provide a copy of the inspection report to the **permit holder** or **responsible person**.

11.7 Inspection frequency

11.7.1 The inspection frequency will be a minimum of once per calendar year.

11.7.2 The frequency may be increased based upon non-compliance of the **body art establishment**.

11.8 Follow-up inspection

- 11.8.1 The **Health Authority** will inspect the premises after any failed inspection upon notification that the hazard has been eliminated, after the time designated to correct the violation has lapsed or to remove the closure signs after verifying corrections of violations. The **Health Authority**, in its sole discretion, may accept other evidence of correction of the hazard in lieu of inspecting the premises.
- 11.8.2 Failure to correct the violations that resulted in the failed inspection or after the **body art establishment** was posted closed by the **Health Authority**, will result in additional follow-up inspections and assessment of the appropriate fees and continued closure if appropriate.

11.9 Public information

11.9.1 The **Health Authority** shall treat the inspection report as a public document and shall make it available for disclosure to a person who requests it pursuant to NRS 239.

11.10 Appeal process

- 11.10.1 A person aggrieved by an action taken by the **Health Authority** may request a meeting in writing with the inspector responsible for the action and the program supervisor within 10 business days from the date of the inspection or investigation.
- 11.10.2 If the meeting does not resolve the issue, the aggrieved person may submit a written request for a meeting with the division director or section manager within 10 business days from receipt of the request for a meeting.

Section 12 PERMIT SUSPENSION, REVOCATION, HEARINGS

- 12.1 Summary suspension; reinstatement of suspended permit
 - 12.1.1 The **Health Authority** may suspend a **health permit** for failure of the **permit holder** to comply with the requirements of these Regulations.
 - 12.1.2 The **Health Authority** may post a **body art establishment** closed for the following:
 - 12.1.2.1 If conditions exist at a **body art establishment** which present an imminent health hazard, the **Health Authority** may, upon written notice, immediately suspend the operating permit and order the immediate closure of the **body art establishment** or
 - 12.1.2.2 For repeated violations of these Regulations during a follow-up inspection of a failed routine inspection. The closure is effective upon receipt of the written notice by the responsible person or permit holder. The closure statement on the inspection report constitutes written notice.
 - 12.1.3 Closure signs must be conspicuously posted at each entrance leading into the **body art establishment**.
 - 12.1.4 Concealment, mutilation, alteration, or removal of Closure signs by any person without permission from the **Health Authority** constitutes a violation of these Regulations.
 - 12.1.5 The **Health Authority** shall conduct a re-inspection of the **body art establishment** for which the permit was summarily suspended within
 two business day after receiving notice from the **permit holder** stating
 that the conditions cited in the summary suspension order no longer
 exist.
- 12.2 Suspension and revocation
 - 12.2.1 The **permit holder** may request a hearing within five business days of the summary suspension.
 - 12.2.2 The **Health Authority** shall hold a hearing, if requested, within ten (10) business days of receipt of the request for hearing.
 - 12.2.3 The **Health Authority** will permanently revoke a permit, unless a request for a hearing is filed with the **Health Authority** by **permit holder** within five business days.
 - 12.2.4 The **Health Authority** may, after a hearing, suspend or revoke a **body** art establishment for violation of NRS Chapter 444, these Regulations,

- or an order issued by the Health Authority.
- 12.2.5 Unless a hearing is requested as required herein, the suspension or revocation order shall take effect 15 calendar days after the date of issuance of the notice of suspension or revocation.
- 12.2.6 A notice of suspension or revocation must include the following:
 - 12.2.6.1 The reasons for the suspension or revocation with reference to the specific provisions of NRS Chapter 444, and these Regulations.
 - 12.2.6.2 The **body art establishment** has a right to request a hearing within 15 calendar days after issuance of the notice;
 - 12.2.6.3 The suspended **permit** shall be revoked after fifteen calendar days after receipt of the suspension notice have lapsed unless a hearing is requested.
- 12.3 Suspension or revocation of an **apprentice body art** card, a **body art** card, **microblading card** or **mentor body artist** card
 - 12.3.1 The **Health Authority** may suspend or revoke an **apprentice body art** card, a **body art** card, **microblading card** or **mentor body artist** card if the **body artist** performed in such a manner as to create on-going or egregious unsanitary, unsafe, or unhealthful conditions.
 - 12.3.2 **Body artist** may request a hearing within five business days of the summary suspension.
 - 12.3.3 The **Health Authority** shall hold a hearing, if requested, within ten business days of the receipt of the request for hearing.
 - 12.3.4 The **Health Authority** will permanently revoke an **apprentice body art** card, a **body art** card, **microblading card** or **mentor body artist** card, unless a request for a hearing is filled with the **Health Authority** by the **body artist** within five business days.
 - 12.3.5 The Health Authority may, after a hearing, suspend or revoke an apprentice body art card, body art card, microblading card or mentor body artist card for violation of NRS Chapter 444, these Regulations, or an order issued by the Health Authority.
 - 12.3.6 Unless a hearing is requested as required herein, the suspension or revocation order shall take effect 15 calendar days after the date of issuance of the notice of suspension or revocation.
 - 12.3.7 A notice of suspension or revocation must include the following:
 - 12.3.7.1 The reasons for the suspension or revocation with reference to the specific provisions of NRS Chapter 444 and these Regulations;

- **12.3.7.2** The **body artist** has a right to request a hearing within five calendar days after issuance of the notice;
- 12.3.7.3 The apprentice body art card, body art card, microblading card or mentor body artist shall be revoked fifteen calendar days after receipt of the suspension notice and the body artist shall cease practicing body art at that time unless a hearing is requested.

12.4 Notice and service of notice

- 12.4.1 A notice issued in accordance with these Regulations is considered properly served if it is served by one of the following methods:
 - 12.4.1.1 The notice is personally served by the **Health Authority** to the **responsible person** or **permit owner**; and/or
 - 12.4.1.2 Sending the notice by registered or certified mail, return receipt requested, to the last known address of the **owner**.
- 12.4.2 The **Health Authority** shall file a copy of the notice in the **permit holder**'s file.

12.5 Reinstatement

- 12.5.1 When a **permit** has been suspended or revoked, an application may be made for reinstatement. Such application must include a verified statement declaring that the reason for the suspension or revocation of the **permit** has been eliminated.
- 12.5.2 If upon investigation by the **Health Authority**, it is determined that all reasons for suspension or revocation have been eliminated and all provisions of these Regulations have been complied with, the **Health Authority** shall reinstate said **permit**.

12.6 Hearings and appeals

- 12.6.1 All hearings provided for in these Regulations shall be conducted in accordance with NRS Chapter 233B.
- 12.6.2 Nothing herein contained shall be construed as denying the rights of appeal to the courts after administrative remedies as herein above have been exhausted.

12.7 Post suspension action

Once the **permit** has been suspended, as specified in Section 12.2 of these Regulations, the **permit holder** must discontinue all activity associated with the **body art establishment** in question. Failure to do so may result in the **Health Authority** requesting an injunction from the District Court of Jurisdiction against continued operation by the **permit holder**.

Section 13 MISCELLANEOUS

13.1 Severability clause

Should any section, paragraph, sentence, phrase, or provision of these Regulations be held invalid for any reason, the remainder of these Regulations must not be affected.

13.2 Effective date

- 13.2.1 These Regulations became effective upon approval by the Nevada State Board of Health.
- 13.2.2 These Regulations were adopted at a duly noticed public hearing.

ATTACHMENT B



BUSINESS IMPACT STATEMENT PROPOSED BODY ART REGULATIONS

Board of Health Presentation on February 24, 2022

The Southern Nevada Health District (Health District) staff will present before the District Board of Health (BOH) a petition to adopt a prosed replacement of both the Southern Nevada Health District Regulations Governing the Sanitation and Safety of Tattoo Establishments and the Southern Nevada Health District Regulations Governing the Sanitation of Body Piercing Establishments. The two regulations will be combined into one regulation, the Southern Nevada Health District Regulations Governing the Sanitation and Safety of Body Art Facilities. This Business Impact Statement serves as an analysis of the fiscal impact the proposed changes will have on businesses.

Pursuant to Nevada Revised Statues (NRS) 237, the following information has been prepared and is available at 280 South Decatur Boulevard, Las Vegas, Nevada or a copy may be obtained online at: www.southernnevadahealthdistrict.org.

ISSUES AND FACTORS TO BE CONSIDERED

Under the authority of NRS 439, the Health District is authorized to adopt regulations to regulate sanitation and sanitary practices in the interest of public health within its jurisdiction. From time to time, the Health District reviews the regulations to determine if any revisions are needed. In the past the Health District promulgated two regulations that govern the safety and sanitation of body art facilities, the Southern Nevada Health District Regulations Governing the Sanitation and Safety of Tattoo Establishments and the Southern Nevada Health District Regulations Governing the Sanitation of Body Piercing Establishments. The last time the piercing regulations were revised were in the late 1990s, the last time the tattoo regulations were revised was in 2009. Since that time, there have been improvements in the application of the regulation along with changes within the regulated industry that necessitated a revision of the regulations.

METHODOLOGY FOR THE PROPOSED REVISIONS TO THE CURRENT REGULATIONS

Health District staff reviewed the current regulations, compared them with the State of Nevada Regulations, along with the Body Art Model Code developed by the National Environmental Health Association and other nearby public health jurisdictions. Health District staff also held a listening session where members of the regulated industry were invited to provide input on what they want to see changed in the existing regulations.

Health District staff then drafted the revisions to the regulations and after legal review, published them and held three workshops to solicit comments and gather data about the impact the regulations will have on the community.

MANNER IN WHICH COMMENT WAS SOLICITED:

1. The Health District held three public workshops to solicit input from affected businesses regarding the proposed changes to the regulations. Workshops were held on December 21, 2021, January 6, 2022, and January 13, 2022.

The public notice for the workshops and other methods to review the proposed changes, were duly posted on the SNHD (SNHD.info) and State of Nevada Public Notice (notice.nv.gov) websites, in the SNHD main office located at 280 S. Decatur Blvd., Las Vegas, Nevada. Notices were also provided to the main government centers and city halls of local municipalities (Clark County, Las Vegas, North Las Vegas, Henderson, Boulder City, Mesquite, and Laughlin).

This public notice provided the date and time of the Public Workshops and Public Hearings and instructions on how to provide comments for those who could not attend Public Workshops.

- The public notice was printed in the Boulder City Review, El Mundo, Las Vegas Review Journal, El Tiempo, Mohave Valley Daily News and Laughlin Nevada Times, newspapers.
- 3. The public notice was mailed or emailed to the following associations: Las Vegas Metro Chamber of Commerce, Clark County Nevada Chamber of Commerce, Women's Chamber of Commerce, Henderson Chamber of Commerce, Boulder City Chamber of Commerce, Mesquite Chamber of Commerce, Latin Chamber of Commerce, Las Vegas Asian Chamber of Commerce, Retail Association of Nevada, Nevada Hotel and Lodging Association, Nevada Food Safety Task Force, Dairy Council of Nevada, Laughlin Chamber of Commerce, Nevada Mobile Vendors Association
- 4. The public notice was emailed to the State of Nevada, Washoe County Health District and Carson City Health District, and the tribes in Clark County.
- 5. The public notice and the agendas for the workshops were sent to each of the e-mail addresses in the Health District's databases for body art facilities and body art card holders. Included in each of the e-mails was a copy of the business impact survey with instructions on how to complete it.

DATES AND LOCATIONS OF PUBLIC WORKSHOPS:

- 1. December 21, 2021, 1:00 p.m. SNHD Public Health Center, 280 South Decatur Boulevard, Las Vegas, in the Red Rock Conference Room and online,
- 2. January 6, 2022, 9:00 a.m. SNHD Public Health Center, 280 South Decatur Boulevard, Las Vegas, in the Red Rock Conference Room and online.
- 3. January 13, 2022 SNHD Public Health Center only online.

SUMMARY OF COMMENTS, DATA, OR VIEWS RECEIVED:

During the comment period ending on January 31, 2022, the Health District received 25 responses. Below is a table that summarizes the responses to the questions asked:

Question	Number Y	Number N	Number with estimated	Range of cost	Number with
			cost		explanation
Will the proposed Body Art Regulations impose a direct and significant economic burden upon your business? If yes, please provide an estimate.	7	18	2	Thousands to \$125,000	7
Will the proposed Body Art Regulations directly restrict the formation, operation, or expansion of your business?	9	16	N/A	N/A	9
Will the proposed Body Art Regulations have an estimated beneficial economic effect on your business? If yes, please provide an estimate.	7	18	6	\$0 to \$20,000	11
Do you anticipate any indirect economic effects to your business as a result of the proposed Body Art Regulations? If yes, please provide an estimate.	7	18	0	N/A	8

ESTIMATED ECONOMIC EFFECT ON BUSINESSES:

1. Adverse Effects:

- Respondents indicated that increased costs could result from:
 - the standards for jewelry,
 - o the requirement to have a separate area for cleaning equipment,
 - the requirement of having to include a Class V or better sterilization

- indicator,
- o the requirement for increased frequency of testing of the sterilizer
- o the requirement to have, in addition to the required sharps containers, other biohazardous waste handling equipment and procedures to properly dispose of blood and other potentially infections material.
- o the requirement to collect and store the documentation related to procedures, artists, and patrons.
- Respondents in the microblading industry expressed concerns that income
 would be reduced by limiting the number of apprentices that each mentor
 artist could train.

2. Beneficial Effects:

- Respondents indicated that reducing the size of each workstation could increase revenues as more artists could occupy a given space
- Respondents indicated that revenues could increase as a result of the addition of the apprentice program.
- Respondents indicated that the cost to start or expand a business may be reduced due to a reduction in the required number of hand sinks to be installed and the allowance for smaller-sized workstations
- Reducing the frequency of routine inspections to once per year will make more efficient use of Health District staff.

3. Direct Effects:

- Construction costs of equipment processing rooms in new establishments that do not use pre-sterilized equipment may increase start-up costs.
- Smaller workstation requirements and shared hand sinks may reduce construction costs for new businesses.
- A more generalized standard for jewelry will allow industry to find best pricing when purchasing these supplies
- The cost for increased frequency of autoclave testing and Class V test strips for those business that are required to have an autoclave are estimated to be less than \$300 annually.
- The passing of the regulations may have additional direct effects, however at this time, those effects cannot be quantified.

4. Indirect Effects:

- Allowing a more expansive requirement for jewelry standards will support all commercial suppliers of jewelry and encourage competition in that industry.
- The requirement for equipment processing areas may translate to increased usage of pre-sterilized equipment.
 - The passing of the regulations may have additional indirect effects,

however at this time, those effects cannot be quantified.

DESCRIPTION OF THE METHODS CONSIDERED TO REDUCE THE IMPACT ON BUSINESSES AND A STATEMENT REGARDING WHETHER THE HEALTH DISTRICT USED ANY OF THE METHODS:

To mitigate economic impact on industry, the Health District implemented the following methods:

At each workshop Health District staff notified the participants that existing businesses would not need to meet the new structural requirements of the proposed regulations.

After the workshops, the Health District made two modifications to the regulations:

- (1) that jewelry used for initial piercings be purchased from a commercial supplier. The requirement for the materials standard and safety now falls upon the jewelry supplier. Any custom-made jewelry will need to be made from material that meets the specific standards identified within the regulations.
- (2) the number of apprentices for microblade artists was increased to a maximum of fifteen at any one time. This was done to accommodate microblading schools.

The comment that additional biohazardous waste handling would adversely impact the business is not substantiated. These requirements are the same as the current OSHA requirements to prevent the spread of bloodborne pathogens in a workplace and only apply when there is a spill of biohazardous material. The addition of the requirements to the regulations would not increase the cost to a business as they should already be in compliance with this provision.

No additional costs would be associated with collection and storage of documentation related to procedures, artists, and patrons, as current regulations already require this.

ESTIMATED COST TO LOCAL GOVERNMENT FOR THE ENFORCEMENT OF THE PROPOSED REGULATIONS:

The proposed regulations will not impact the costs to the Health District for the enforcement of these regulations.

ESTIMATED REVENUES EXPECTED TO BE GENERATED BY THE PROPOSED CHANGES AND THE WAY THE FUNDS ARE TO BE USED:

No changes in Health District revenue are proposed by promulgating these regulations.

DO THE PROPOSED REGULATION CHANGES INCLUDE PROVISIONS THAT

ARE DUPLICATIVE OR MORE STRINGENT THAN EXISTING LOCAL, STATE, OR FEDERAL STANDARDS?
Yes No
WILL THIS CHANGE HAVE A SIGNIFICANT ECONOMIC IMPACT ON BUSINESSES?
YesX No
REASONS FOR THE CONCLUSIONS REACHED REGARDING THE IMPACT ON BUSINESSES:
Based on input from the affected businesses and modifications to the proposed regulations to mitigate economic impact, the Health District has concluded that the proposed revisions to the regulations are not likely to impose a direct and significant economic burden upon a large number of businesses or directly restrict the formation, operation, or expansion of a large number of businesses.
The proposed regulations are duplicative and more stringent than Chapter 444 of the Nevada Administrative Code (NAC). The Health District is the local Health Authority as defined in NRS 439. As the local Health Authority, the Health District has the power to adopt regulations to prevent and suppress communicable diseases. These regulations, while duplicative and more stringent than NAC 444, give the Health District the ability to protect its residents and visitors better than the authority provided in NAC 444.
Pursuant to NRS 237.090, the BOH will hold a PUBLIC HEARING considering this Business Impact Statement at its regular meeting on Thursday, February 24, 2022 at 9:00 a.m. in the Red Rock Conference Room, 280 South Decatur Blvd., Las Vegas, Nevada. The BOH will review and consider approval of the proposed Body Art Regulations at a PUBLIC HEARING on Thursday, March 24, 2022, at the same time and location above.
I, Christopher Saxton, certify that, to the best of my knowledge or belief, the information contained in the statement was prepared properly and is accurate:
Director of Environmental Health

ATTACHMENT C

From: Body Art

Subject: Public Notice - Proposed Body Art Regulations
Date: Monday, December 6, 2021 2:31:16 PM

Attachments: 2021.12.06 Survey for the proposed Body Art Regulations.pdf

The Southern Nevada Health District is proposing an update and revision of the two Health District regulations that govern the sanitation and safety of tattoo and piercing establishments. The Health District is proposing to combine the two regulations into one regulation that governs the sanitation and safety of body art establishments. Proposed revisions will reflect the Nevada State Regulations addressing invasive body art that can be found in Chapter 444 of the Nevada Administrative Code and improve the public health of Southern Nevada.

This revised regulation has been scheduled to go to the Health District's Board of Health on March 24, 2022 for public hearing. In preparation for that hearing the Health District is holding three workshops; December 21, 2021 at 1:00 p.m., January 6, 2022 at 9:00 a.m. and January 13, 2022 at 1:00 p.m. At this time, the workshops will be hybrid events with both in- person and remote participation offered. If you want to participate in person please appear at the Red Rock Conference Room in the Health District Office's, 280 S. Decatur, Las Vegas Nevada at any one of the meetings mentioned above. If you wish to participate remotely using a web-based meeting system, please send a reply to this message with the meeting day and time that you wish participate in. You will be sent a link on the day that the official agenda is published, no less than four days before the meeting date. You can also find the link when the official agenda is published on this webpage: https://www.southernnevadahealthdistrict.org/news-info/public-notices/. If you chose to not attend any of the meetings, you can submit your comments in writing by sending an e-mail to bodyart@snhd.org or by postal mail to Body Art Program, SNHD, PO Box 3902, Las Vegas, NV 89127.

A copy of the proposed regulations can be found here:

 $\frac{https://media.southernnevadahealthdistrict.org/download/eh/2021/body-art/20211129-Body-Art-Regs-WORKING-DRAFT.pdf$

As part of the process, the Health District is required to complete a Small Business Impact Statement. Attached to this e-mail is a business impact survey that you can fill out and return by January 31, 2022. You can complete and submit the survey any number of ways. The survey can be completed and submitted online here: https://www.southernnevadahealthdistrict.org/permits-and-regulations/proposed-body-art-regulations-business-impact-survey/. You can complete and return the survey by attaching it to an e-mail sent to bodyart@snhd.org. You can submit the completed form by postal mail sent to SNHD, PO Box 3902 Las Vegas Nevada 89127. Finally, you can drop off the form in person at the Health District's Environmental Health Office located at 333 N. Rancho, Las Vegas. This survey is an opportunity for you to provide valuable input on how the changes will financially impact your business.

Thank you.

ATTACHMENT D



PUBLIC NOTICE

NOTICE IS HEREBY GIVEN that three Public Workshops have been scheduled to take testimony on the proposed *Southern Nevada Health District Regulations Governing the Sanitation and Safety of Body Art Establishments (Body Art Regulations)*. Testimony from these workshops and written comments will be used to complete the *Business Impact Statement (BIS)* pursuant to Nevada Revised Statute (NRS) 237.080. A Public Hearing to review and take testimony on the BIS for the proposed Body Art Regulations will be held before the Southern Nevada District Board of Health (BOH) on Thursday, February 24, 2022 at 9:00 a.m. in the Red Rock Conference Room at the Southern Nevada Health District (SNHD) Public Health Center located at 280 South Decatur Boulevard, Las Vegas, Nevada and/or virtually at the same date and time, pursuant to NRS 237.090. A Public Hearing to review and approve the proposed Body Art Regulations will be held before the BOH on Thursday, March 24, 2022 at 9:00 a.m. in the Red Rock Conference Room at the SNHD Public Health Center located at 280 South Decatur Boulevard, Las Vegas, Nevada and/or virtually at the same date and time.

The Environmental Health Division is proposing to update and replace the existing Southern Nevada Health District Regulations Governing the Sanitation and Safety of Tattoo Establishments and the Clark County Health District Regulations Governing the Sanitation of Body Piercing Establishments. The update will include a consolidation of the two regulations into one and reflect the current needs of the southern Nevada community.

Copies of the proposed Body Art Regulations will be available for review in the EH Division, 280 South Decatur Boulevard, Las Vegas, Nevada, between the hours of 8:00 a.m. to 4:30 p.m. Copies can be requested at that time for a charge of one dollar per page. The same may be viewed on the SNHD website, www.southernnevadahealthdistrict.org/news-info/public-notices/. Copies of the BIS will be available for review as stated above no later than February 9, 2022.

Business owners and interested parties may submit data, views, and comments as to whether the proposed regulations will impose a direct and/or significant economic burden upon a business or directly restrict the formation, operation, or expansion of a business. A summary of all workshop testimony and comments submitted by January 31, 2022, to Mark Bergtholdt, Environmental Health Supervisor, Southern Nevada Health District, P.O. Box 3902, Las Vegas, Nevada 89127, or emailed to bodyart@snhd.org will be included in the BIS presented to the BOH. All interested persons may appear at the BOH PUBLIC HEARINGS and submit data, views, or arguments regarding the BIS and proposed Body Art Regulations. The BOH will consider fully all written and oral submissions on the proposed Body Art Regulations prior to taking action thereon. Questions may be directed to SNHD's Environmental Health Division at (702) 759-0677.

NOTE: If this item is not presented for Public Hearing at the SNHD Board of Health meetings scheduled for February 24, 2022 and March 24, 2022, it will be presented for public hearing at the SNHD Board of Health meetings scheduled for April 28, 2022 and May 26, 2022, at the same time and location noted above.



Chris Saxton, MPH-EH, REHS Director of Environmental Health December 6, 2021

Date

Prior to the PUBLIC HEARINGs, there will be three WORKSHOPS for the public to present its views regarding the *Impact upon Business* of the proposed *Body Art Regulations*:

- 1. December 21, 2021 Tuesday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.
- 2. January 6, 2022, Thursday, 9:00 a.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.
- 3. January 13, 2022, Thursday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Persons wishing to participate in these three workshops may either appear in person at the location described above or may do so remotely by using the link that will be provided in the agenda published no later than 3 business days prior to the workshop. The agenda and link for remote participation can be found at www.southernnevadahealthdistrict.org/news-info/public-notices/.

Public Notices

Public Notice

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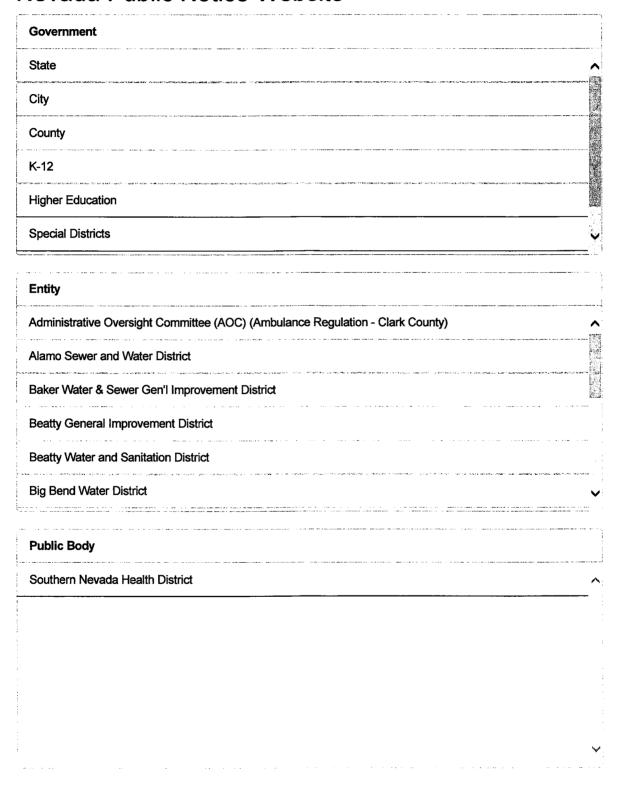
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- Take the **Business Impact Survey**
- Read the Proposed Body Art Regulations

Request for Proposals (RFP) 22RFP005 Uniformed Security Services

The Southern Nevada Health District requests proposals from experienced and qualified security firms to provide uniformed security services at Health District facilities and at non-Health District facilities for events operated by the Health District.

Nevada Public Notice Website



https://notice.nv.gov/ 12/15/2021

Results for Southern Nevada Health District

9

Subscribe to this public body's notice RSS feed (/RSS/PublicBody/1732)

Results are limited to the last 7 days and for all dates in the future.

Not	iice	Date Posted	Event Date	Time	Status	Туре
S	Solid Waste Mangement Authority Hearing Officer Administrative Hearing (https://www.southernnevadahealthdistrict.org/news- info/public-notices/)	12/1/2021	12/9/2021	9:00 AM	Scheduled	Hearing
S	Proposed Body Art Regulations Workshop (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	12/21/2021	1:00 PM	Scheduled	Workshop
S	Proposed Body Art Regulations Workshop Agenda (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/15/2021	12/21/2021	1:00 PM	Scheduled	Workshop
S	Proposed Body Art Regulations Workshop (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	1/6/2022	9:00 AM	Scheduled	Workshop
S	Proposed Body Art Regulations Workshop (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	1/13/2022	1:00 PM	Scheduled	Workshop
S	Proposed Body Art Regulations Business Impact (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	2/24/2022	9:00 AM	Scheduled	Hearing
S	Proposed Body Art Regulations (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	3/24/2022	9:00 AM	Scheduled	Hearing



https://notice.nv.gov/

08:30 ର୍ AM	City of Boulder City (https://www.bcnv.org/AgendaCenter/ViewFile/Agenda/_12152021-1517
	lress, No Website & Link to Website
Public No	tice Access
	s wishing to post public notices must first register (/Account/Register) for an account. It is ed to use your government issued email address.
	ccount/Register)

Next Steps after you register

Send an email to deptadmin@admin.nv.gov (mailto:deptadmin@admin.nv.gov) with the following information:

- 1. Your name and email address.
- 2. The type of Government (i.e. State, City, County, K-12, Higher Education, Special Districts).
- 3. The area or "Entity" your Government type represents. For example, if your Government type is County, tell us which County i.e. Churchill, Clark, Douglas, etc.
- 4. The name of the Public Body (aka Committee/Council/Board) you will be posting for? Please list all of the Public Bodies you will be responsible to post notices for.
- 5. After you send the email with this information, you will receive an email or phone call back from the Department of Administration's Director's Office to confirm your account has been successfully enrolled. If you have questions, please email deptadmin@admin.nv.gov (mailto:deptadmin@admin.nv.gov).

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ATTACHMENT E

12/15/2021 2:00 PM FROM: Sonv Health District TO: +17022939245 P. 2

CERTIFICATE OF POSTING OPEN MEETING NOTICE NRS 241.020(3)(b)

I certify that I posted the public notice and agenda for the meetings identified below more than three working days prior to the meeting in accordance with NRS 241.020 (3)(b):

SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

December 21, 2021 Tuesday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:	Boulder City, City Hall	
Address of Location;	401 California Avenue	
City, State, ZIP:	Boulder City, NV 89005	
•	,	
Dute/Time of Posting:	12/16/2021 @ 8:02 am	
Printed Name:	Bridgette Rodriguez	anno con con con contrata (sanca
Signature:	78. Rodingrif	
	Please return this certificate via FAX to:	

Special Programs Section, Southern Nevada Health District (702) 759-1486

Thank you.



FROM

TO

Name: Bridgette Rodriguez

Phone: 702-293-9208 Fax: 17027591486

E-mail: Brodriguez@bcnv.org

Sent: 12/16/21 at: 8:05:09 AM 2 page(s) (including cover)

Subject: Attached Image

Comments:

12/15/2021 2:06 PM FROM: SoNV Health District TO: +17024553558 P.

CERTIFICATE OF POSTING

OPEN MEETING NOTICE NRS 241.020(3)(b)

I certify that I posted the public notice and agenda for the meetings identified below more than three working days prior to the meeting in accordance with NRS 241.020 (3)(b):

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Taking place at:

December 21, 2021 Tuesday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Clark County Government Center
500 South Grand Central Parkway
Las Vegas, NV 89155
121521 4:30 pm
Karishadden
Karishadden

Please return this certificate via FAX to: Special Programs Section, Southern Nevada Health District (702) 759-1486

Thank you.

CERTIFICATE OF POSTING

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Taking place at:

December 21, 2021 Tuesday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:	Henderson City Hall	
Address of Location:	240 Water Street	_
City, State, ZIP:	Henderson, NV 89015-7227	
Date/Time of Posting:	11:30 12-16-21	
Printed Name:	Manay Heffernan	
Signature:	Mull	
	Please return this certificate via FAX to:	
	Special Programs Section, Southern Nevada Health District	

Thank you.

(702) 759-1486

12/15/2021 2:12 PM FROM: SoNV Health District TO: +17023824803

2021 DEC 15 P 2: 28

CERTIFICATE OF POSTING OPEN MEETING NOTICE NRS 241.020(3)(b)

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Taking place at:

December 21, 2021 Tuesday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:		Las Vegas City Hall	
Address of Location:		495 South Main Street	
City, State, ZIP:		Las Vegas, NV 89101	
Date/Time of Posting:	12-15-21		3:00 pm
Printed Name:	BARNEY	JENKINS	
Signature:	3		
_ /	Please retur	n this certificate via FAX to:	
		tion, Southern Nevada Healt	n District

Thank you.

(702) 759-1486

CERTIFICATE OF POSTING

OPEN MEETING NOTICE NRS 241.020(3)(b)

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Taking place at:

December 21, 2021 Tuesday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:	Laughlin Clark County Community Resource Center
Address of Location:	55 Civic Way
City, State, ZIP:	Laughlin, NV 89029
Date/Time of Posting:	12/16/2021 8:20am
Printed Name:	Tina Gish
Signature:	(Olive)
	Please return this certificate via FAX to:

Thank you.

Southern Nevada Health District (702) 759-1458

12/15/2021 14:59

12/15/2021 2:19 PM FROM: SoNV Health District TO: +17026493846 Р. 2

CERTIFICATE OF POSTING

OPEN MEETING NOTICE NRS 241.020(3)(b)

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Taking place at:

December 21, 2021 Tuesday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:	North Las Vegas City Hall	
Address of Location	n: 2250 North Las Vegas Boulevard	
City, State, ZIP:	North Las Vegas, NV 89030	
Date/Time of Posti	ng: 12 15 2021 - 2:40 PM	
Printed Name:	1 Nustine McDowell	
Signature:	A the Metowell	
	Places we this contition to via FAV to:	

Please return this certificate via FAX to: Special Programs Section, Southern Nevada Health District (702) 759-1486

Thank you.

PROOF OF PUBLICATION

STATE OF NEVADA) COUNTY OF CLARK) SS:

> SO NEVADA HEALTH DISTRICT PO BOX 3902 LAS VEGAS NV 89127-3902

Account #

22345

Ad Number

0001173562

Denzila Watts, being 1st duly sworn, deposes and says: That she is the Legal Clerk for Boulder City Review, a weekly newspaper regularly issued, published and circulated in the City of Boulder City, County of Clark, State of Nevada, and that the advertisement, a true copy attached for, was continuously published in said Boulder City Review in 1 edition(s) of said newspaper issued from 12/09/2021 to 12/09/2021, on the following days:

12 / 09 / 21



PUBLIC NOTICE

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-S- Chris Saxton, MPH-EH, REHSDIrector of Environmental Health Date December 6, 2021

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PUB: Dec. 9, 2021 Boulder City Review

I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct.

Dated: December 17, 2021

ISI D. Watta

LEGAL ADVERTISEMENT REPRESENTATIVE

www.elmundo.net Diciembre 10 del 2021 | 5

Las Vegas Metropolitan Police Department

Acompañan oficiales a 250 niños a hacer compras navideñas

Por Roberto PELÁEZ

"Qué mañana tan especial. Gracias a los oficiales y civiles de LVMPD que hicieron esto posible".

"Gracias por seguir haciendo esto; espero se den cuenta de lo maravillosos que son y lo noble de su gesto".

"La gente de LV debería estar orgullosa de sus oficiales". Las palabras anteriores son sólo una muestra de las que externaron, a modo de agradecimiento, muchos padres, luego que los oficiales de la Policía Metropolitana acompañaran a 250 niños a hacer compras.

Los propios agentes, encargados de la tranquilidad ciudadana, precisaron: "a lo largo del año ayudamos a menores que es muy probable atraviesen momentos difíciles; nunca olvidamos sus palabras de agradecimiento, sus caras, sus sonrisas... poner una nota de alegría en sus rostros es una experiencia tremenda, pretendemos hacer sus vacaciones más hermosas y felices".

Trascendió que el llamado 'Programa Santa Cops' correspondiente a este año resultó el más grande de cuantos se han efectuado, los oficiales acompañaron a 250 niños a hacer compras a una tienda Macy's, "gracias, dijeron, a las contribuciones hechas a @lvmpdfoundation, a la tienda, y claro, por la posibilidad de poder ayudar", destacaron.

Se ha hablado y escrito mucho sobre la generosidad,

Recordatorio a usuarios

Restricciones y menos agua desde el 10. de enero

Por Nuestros SERVICIOS

Las actuales restricciones para el consumo de agua limitan actualmente el riego a un día a la semana, y se extienden hasta el 28 de febrero del 2022.

Con las temperaturas en el sur de Nevada bajando a niveles normales, la Autoridad del Agua les recuerda a residentes y dueños de negocios que deben cambiar sus relojes de riego y regar solo en el día de riego asignado; es obligatorio cumplir el riego de invierno.

Seguir las restricciones es clave, se supo que por la escasez de agua en el río Colorado se reducirá en 7 mil millones de galones la cantidad que el sur de Nevada puede tomar del Lago Mead a partir del próximo primero de enero.

Si los dueños de propiedades cambian su reloj de riego, la comunidad ahorra más agua de la que se recortará.

Las restricciones de riego de invierno limitan el riego de césped y por goteo a un día por semana; encuentre su día de riego en ajustatureloj.com. Está prohibido regar los domingos. Ahorrar



Para reducir el consumo de agua la autoridad correspondiente insta a los propietarios a cambiar el tipo de jardín.

agua es tarea de todos, nadie debe quedar indiferente ante esta situación de escasez.

Cumplir las restricciones es ley. Regar cuando no sea su día de riego asignado o permitir que el agua se escurra o fluya fuera de su propiedad se considera desperdicio de agua y puede resultar en una multa que aumenta si es reincidente.

La sugerencia es regar el césped con rociadores a media mañana para evitar la congelación y evitar se forme hielo en el césped y las banquetas. El riego por goteo debe operar una vez cada siete a 14 días, árboles y plantas necesitan menos agua que el césped.

Para más información sobre cómo conservar agua, incluidos los programas de conservación, las restricciones de riego de temporada, prevenir y reportar el desperdicio de agua, visite el sitio de internet www.snwa.com.



Los oficiales de LVMPD acompañaron a los infantes y se tomaron fotos junto a Santa. Por su parte los padres se mostraron muy agradecidos por el hermoso y sensible gesto.

la acción de dar, brindar algo, compartir, sin recibir ni esperar nada a cambio, se trata de una actitud abierta, desinteresada, trae consigo una 'carga' de felicidad, de paz interior, alegría.

Todo lo anterior lo tienen en cuenta los padres para

agradecer, muchos de ellos han tomado parte en anteriores eventos de este tipo, consideran que es una acción de esas que se tardan en olvidar, se agradecen siempre.

"Participé en la 'compra con un policía' en el 2002, aun guardo algunas cosas que compramos en aquella oportunidad, son un hermoso recuerdo, y casi 20 años después volvemos; nuestros oficiales merecen todo el respeto, la admiración y el agradecimiento, es un programa sensible que nos llega muy dentro", dejó sentado con voz entrecortada una de las madres, que no pudo disimular las lágrimas.

'Compra con un policía', el 'Programa Santa Cops', la llamada 'Noche Nacional de Unidad', son algunos de los eventos que organiza la Policía en su aspiración de vincularse a la comunidad, ayudar a padres con niños enfermos, y lo mejor es que estos gestos tan generosos resisten el paso del tiempo, por eso no resultan una sorpresa las palabras de agradecimiento de los padres.

"Dios siga bendiciendo a todos los involucrados, gracias por todo lo que hacen, por el servicio que prestan a la comunidad, en nombre de mi familia les deseamos felices fiestas, un magnífico fin de año y próspero 2022", comentó emocionada una madre con su pequeño en brazos.



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Copies of the proposed Body Art Regulations will be available for review in the EH Division, 280 South Decatur Boulevard, Las Vegas, Nevada, between the hours of 8:00 a.m. to 4:30 p.m. Copies can be requested at that time for a charge of one dollar per page. The same may be viewed on the SNHD website, www.southernnevadahealthdistrict.org/news-info/public-notices/. Copies of the BIS will be available for review as stated above no later than February 9, 2022.

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-S-	December 6, 2021
Chris Saxton, MPH-EH, REHS	Date

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PROOF OF PUBLICATION

STATE OF NEVADA) COUNTY OF CLARK) SS:

> SO NEVADA HEALTH DISTRICT PO BOX 3902 LAS VEGAS NV 89127-3902

Account # 22345

Ad Number 0001172488

Denzila Watts, being 1st duly sworn, deposes and says: That she is the Legal Clerk for El Tiempo, a weekly newspaper regularly issued, published and circulated in the City of Las Vegas, County of Clark, State of Nevada, and that the advertisement, a true copy attached for, was continuously published in said El Tiempo in 1 edition(s) of said newspaper issued from 12/08/2021 to 12/08/2021, on the following days:

12 / 08 / 21



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PUB: Dec. 8, 2021 El Tiempo

I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct.

Dated: December 17, 2021

ISI D. Watta

LEGAL ADVERTISEMENT REPRESENTATIVE

AFFIDAVIT OF PUBLICATION

STATE OF NEVADA)
COUNTY OF CLARK) SS:

SO NEVADA HEALTH DISTRICT PO BOX 3902 LAS VEGAS NV 89127-3902 Account #

22345

Ad Number

0001172485

Leslie McCormick, being 1st duly sworn, deposes and says: That she is the Legal Clerk for the Las Vegas Review-Journal and the Las Vegas Sun, daily newspapers regularly issued, published and circulated in the City of Las Vegas, County of Clark, State of Nevada, and that the advertisement, a true copy attached for, was continuously published in said Las Vegas Review-Journal and / or Las Vegas Sun in 1 edition(s) of said newspaper issued from 12/07/2021 to 12/07/2021, on the following days:

12 / 07 / 21

LEGAL ADVERTISEMENT REPRESENTATIVE

Subscribed and sworn to before me on this 7th day of December, 2021

Notary

MARY A. LEE

Notary Public, State of Nevada Appointment No. 21-7624-01

My Appt. Expires Dec 15, 2024



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-S- Chris Saxton, MPH-EH, REHSDirector of Environmental Health Date December 6, 2021

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PUB: Dec. 7, 2021 LV Review-Journal

4 : 1



LEGAL INVOICE

START STOP	NEWSPAPER REFERENCE / P	O DESCRIPTION	PRODUCT	SIZE / QTY	BILLED UNITS	TIMES RUN	AMOUNT
12/07 12/07	10001172485	regulations governing the sanitation and safety	Review-Journal	1.00 x 197 Li	197	1	448.24

Erin O Malley

TOTAL AMOUNT DUE \$448.24

CREDIT REP / PHONE #		ADVE	RTISER INFORMATION	
Kelly	BILLING PERIOD	BILLED ACCOUNT NUMBER	ADVERTISER / CLIENT NUMBER	ADVERTISER / CLIENT NAME
(702) 387-5271		22345	22345	SO NEVADA HEALTH DISTRICT

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LAS VEGAS REVIEW-JOURNAL

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BILLING PERIOD	ADVERTISER / CLIENT NAME
	SO NEVADA HEALTH DISTRICT
OTAL AMOUNT DUE	TERMS OF PAYMENT
\$448.24	Due on the 15th of the month.

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PAGE#	BILLING DATE	BILLING ACCOUNT NAME AND ADDRESS	REMITTANCE ADDRESS
1	12/07/2021		
BILLED ACCOUNT NUMBER		SO NEVADA HEALTH DISTRICT	Las Vegas Review-Journal
22345		PO BOX 3902	PO Box 920
		LAS VEGAS NV 89127-3902	Las Vegas NV 89125-0920
AD ORDER NUMBER			
0001172485			

Laughlin Nevada Times **Proof of Publication**

I, Sandi Kalischak , am the legal representative of the printer and publisher of LAUGHLIN NEVADA TIMES , a weekly newspaper circulated in the English language on Wednesday in the Laughlin area, County of Clark, State of Nevada.				
Notice Type: Legal Ad Description Public Notice				
That the notice, of which the annexed is a printed copy, has been published in each regular and entire issue of said newspaper and not in any supplement thereof on the following dates, to-wit:				
Laughlin Nevada Times: 12/8/2021				
Representative Signature				
I certify (or declare) under penalty of perjury the foregoing is true and correct as subscribed and sworn to before me this				
8 day of2021				
Notary Public				
My commission expire 10 · (3 · 2.5				

STATE OF NEVADA)

County of Clark

PUBLIC NOTICE

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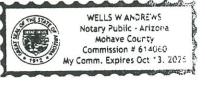
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www.southernnewadahealthdistrict.org/news-info/public-notices/. Publish: Laughlin Nevada Times
Decembor 8, 2021 #54824



Mohave Valley Daily News **Proof of Publication**

My commission expire 10.13-25

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www.southernnevadahealthdistrict.org/news-info/public-notices/.
Publish: MOHAVE VALLEY DAILY NEW/S
December 5, 2021

WELLS W ANDREWS Notary Public - Arizona Mohave County Commission # 614060 My Comm. Expires Oct 13, 2025

ATTACHMENT F



NOTICE PUBLIC WORKSHOP AGENDA PROPOSED BODY ART REGULATIONS

1:00 p.m., December 21, 2021 Southern Nevada Health District Red Rock Conference Room 280 S Decatur, Las Vegas, NV

To participate remotely either:

- Use this Webex Event address for attendees:
 - o https://snhd.webex.com/snhd/onstage/g.php?MTID=e009da2c0325a839bf39bcda57b14f461
 - This link is for public attendees only.
- Call into the meeting:
 - o Dial (415) 655-0001 and
 - Use Access Code 2551 773 4587
- For other governmental agencies who use video conferencing capability
 - The video address is 25517734587@snhd.webex.com

	The video address is 2551//5456/(w/simd.webex.com			
I.	Introductory Remarks	Introductory Remarks and Introduction of SNHD Staff		
		by EH Staff		
II.	Public Comments	Participants in the room can step up to the speaker's		
		podium; clearly state your name and organization. Spell		
		your last name for the record. If you are participating		
		remotely please 'do this'. Comments will be limited to		
		• •		
		five (5) minutes per speaker.		
III.	Major Changes to Current	EH Staff		
	Regulations			
	_			
IV.	Public Comments Taken	EH Staff		
	Regarding Proposed Southern			
	Nevada Health District	Link to draft regulations: 20211129-Body-Art-Regs-		
	Regulations Governing the	WORKING-DRAFT.pdf		
	Sanitation and Safety of Body Art	(southernnevadahealthdistrict.org)		
	Establishments			
VI.	Summary & Final SNHD	Discussion of next steps by EH staff		
	Comments	• •		
VII.	Adjournment	EH Staff		

(cont.)



THIS AGENDA HAS BEEN POSTED IN THE MAIN LOBBY OF THE FOLLOWING LOCATIONS: 1) CLARK COUNTY GOVERNMENT CENTER, 500 S. Grand Central Parkway, Las Vegas, NV; 2) LAS VEGAS CITY HALL, 495 S. Main Street, Las Vegas, NV; 3) NORTH LAS VEGAS CITY HALL, 2250 N. Las Vegas Boulevard, North Las Vegas, NV; 4) HENDERSON CITY HALL, 200 Water Street, Henderson, NV; 5) BOULDER CITY, CITY HALL, 401 California Avenue, Boulder City, NV; 6) MESQUITE CITY HALL, 10 E. Mesquite Boulevard, Mesquite, NV; 7) SOUTHERN NEVADA HEALTH DISTRICT, 280 S. Decatur Boulevard, Las Vegas, NV; and 8) CLARK COUNTY COMMUNITY RESOURCE CENTER, 55 Civic Way, Laughlin, NV. This Agenda is also available on the Southern Nevada Health District Internet Website at http://www.southernnevadahealthdistrict.org and on the Nevada Public Notice website at https://www.southernnevadahealthdistrict.org and supporting materials, please contact Erin O'Malley at (702) 759-1626.

NOTE: Disabled members of the public who require special accommodations or assistance at the meetings are requested to notify Erin O'Malley, Administrative Assistant at the Southern Nevada Health District, by calling (702) 759-1626.



MINUTES

SOUTHERN NEVADA HEALTH DISTRICT WORKSHOP FOR PROPOSED BODY ART REGULATIONS

December 21, 2021 - 1:00 p.m.

Meeting was conducted in person and via Webex Event
Southern Nevada Health District, 280 S Decatur Boulevard, Las Vegas, NV 89107
Red Rock Trail Rooms A and B

STAFF PRESENT: Karla Shoup – Consumer Health Programs Manager

Mark Bergtholdt - Supervisor, Special Programs

Dante Merriweather - Senior Environmental Health Specialist, Special Programs

Michelle Goodsell – Environmental Health Specialist II, Special Programs James Muth – Environmental Health Specialist II, Special Programs

Erin O'Malley – Administrative Assistant II, Special Programs

ALSO PRESENT: Kalawelo Kaiwi, Mari Gonzales, Leyla Fowler, Ainjil Chipp, Marko Greisen,

(In Audience) Robert Gonzalez, Luis James Tanuis Jr.

ALSO PRESENT: Albert Conant, Yalanda Baldon, May Crouse, Jeffrey McIntosh

(Via Webex Event)

I. INTRODUCTORY REMARKS and INTRODUCTION OF SNHD STAFF

Mark Bergtholdt called the meeting to order at 1:03 p.m. He requested anyone in the audience who had not signed into the meeting yet to do so. He then introduced the SNHD staff members attending the meeting.

Mark Bergtholdt provided website address, www.SNHD.info, where agenda for meeting and body art regulations under discussion. He also provided directions for audience members and Webex Event attendees on how to present their comments at the meeting.

II. 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.

Seeing no one, Mark Bergtholdt closed the First Public Comment portion.

III. MAJOR CHANGES TO CURRENT REGULATIONS

Dante Merriweather presented an overview of the changes proposed for the regulations. Theses revisions were made after a review of the Nevada State Administrative Code, the National Environmental Health Association Body Art Model Code and input received from the public.

Numerous clarifications are proposed. More than fifty redundant or obsolete definitions have been removed. Language proposing the granting of waivers of the regulations has been included. There are some proposed changes to the mandatory language within the consent forms, and the imminent health hazards section of the regulations has been streamlined to include consolidated instructions for corrective action.

The largest proposed change to the two regulations for Tattooing and Body Piercing is the combining of them into one set of Body Art Regulations. Also proposed are changes to the body art card that will set a minimum level of experience for an artist before they can take on any apprentices. The proposed regulations will also limit the number of apprentices that an artist can have at any one time.

From an operational standpoint, the hand sink requirements have been more clearly defined, including a clarification that hand sinks must be permanently plumbed to potable water and sanitary sewer. The hand sinks must be a minimum size and there must be at least one hand sink for every four workstations, located no more than 15 feet from a procedure table. Any facility in compliance with the current hand sink requirements are fine until a change of ownership occurs or a remodel of the facility.

Also proposed are detailed requirements for an equipment processing room for any facility that uses reusable equipment that needs to be sterilized. Additionally, the minimum testing for the sterilizer has been increased from once a year to monthly. This is the minimum requirement adopted by the state. Each sterile pack must include a class five or six indicator to indicate proper sterilization conditions reached the surface of the equipment. For facilities that use reusable equipment, an ultrasonic cleaner must be used on equipment prior to processing the equipment in a sterilizer.

There is a proposal to set conditions for expired equipment that can be stored within the facility. These conditions include allowing the equipment to be used only for practice when it is properly labeled and stored.

There are also proposed minimum requirements for jewelry and improved instructions for handling solid waste and biohazardous waste.

These changes have made the Regulations more concise, reducing the number of pages from 67 to 59 pages.

This is a broad overview of the main items that have been altered, expanded, or deleted in this revision. All concerned parties are strongly urged to closely read and review the proposed revisions in a timely manner and present any concerns to the Southern Nevada Health District as soon as possible.

IV. PUBLIC COMMENTS TAKEN REGARDING PROPOSED SOUTHERN NEVADA HEALTH DISTRICT REGULATIONS GOVERNING THE SANITATION AND SAFETY OF BODY ART ESTABLISHMENTS

Public comments were taken by Regulations section.

1. <u>Definitions:</u> This section is where all the definitions are. Words that are defined in these Regulations will appear in **bold text through the Regulations**.

Leyla Fowler made note of piercing definition, quoting "to make, generally permanent in nature, a hole, mark, or scar." She stated fellow body art artists did not feel that was the definition of piercing. For them, piercing is placing body jewelry or adorning the body, not purposefully making a permanent mark or scar. She requested the wording be addressed.

Mark Bergtholdt asked how she would address that wording. Ms. Fowler said that is how she would like it addressed, that "piercing is adorning the body and inserting jewelry." They are not purposefully making a permanent mark or scar.

Audio issues were noted as affecting some Webex Event attendees. The issues were acknowledged, and suggestions provided for fixing the issue.

Ms. Fowler returned to the podium to state she noticed a change was made in definitions to add journey body artists and wondered if consideration was given to a master system versus a journey system. Mr. Bergtholdt stated the wording would be taken under consideration.

Ms. Fowler requested years of experience be taken into consideration in regard to needing four years before accepting apprentices and when renewing expired body art cards, so those with years of experience are exempted from retaking the body exam and starting over.

2. <u>Imminent Health Hazards</u>: These are the conditions that require immediate closure of a body art establishment.

Audio issues continued to affect two Webex Event attendees. Mark Bergtholdt noted the problem was being worked on that answers would be provided as soon as possible.

Marko Greisen provided comment on previous regulation section, 1.28, and questioned whether lash enhancement should be included. Believes lashes are a cosmetology issue and not related.

Leyla Fowler requested that online participants be made public and was concerned the lack of participation from industry meant the majority of shops did not know about the meeting. Mr. Bergtholdt stated emails were sent out to the shops and artists using the email addresses the health district had one file. Karla Shoup added that two more workshops would be held and confirmed that those workshops would be following the same agenda.

A list of Webex Event participants was added to the screens in the conference room.

No comments provided by audience or Webex Event attendees on Section 2.

3. <u>Facilities and Equipment</u>: This section describes the minimum requirements for a body art establishment.

Kalawelo Kaiwi asked question about equipment, processing of instruments and jewelry. He stated new factory jewelry is placed in a statum. Mr. Kaiwi said the statum is considered a type of autoclave and he uses it on non-sterile jewelry, not just instruments. Mark Bergtholdt requested clarification on the process of using a statum. Mr. Kaiwi advised a statum is an autoclave in cassette form. He requested clarity on placing it in a processing room, as he said they are not using it on hazardous, or biohazardous reusable jewelry – it is being used on new jewelry. He requested clarity, as the proposed regulations state sterilizing equipment must be placed in a processing room, not in the procedure room where it is currently placed, and that a new processing room would then need to be added. Mr. Bergtholdt then asked if Mr. Kaiwi would like to see wording to the effect that if the equipment is to be used for single-use new jewelry, it can be placed in the procedure room. Mr. Kaiwi stated he would simply like clarity on the wording and Mr. Bergtholdt said it would be taken under advisement.

Leyla Fowler requested clarification on section 3.10.3 – biohazardous waste disposal. Would like to know if the trash cans in the procedure rooms would now be considered biohazard

waste versus regular waste, and what impact that would have on having biohazard pick up sufficient enough for multiple artists in one studio. Ms. Fowler asked if they could still dispose of waste that is not liquid releasable waste in the regular trash. Mr. Bergtholdt stated that is correct, but that the wording can be clarified.

Kalawelo Kaiwi commented on the processing room and the two-compartment utility sink requirement. Requested a definition of a two-compartment utility sink for these regulations and wanted to know if it can be porous, like a sink to wash clothes. Mark Bergtholdt stated it can be any two-compartment utility sink, as opposed to a food preparation sink. He stated the health district would look at clarifying the wording.

Leyla Fowler commented on Section 3.13 – equipment processing room. While her shop has a processing room, she asked if current shops would need to remodel to meet the new proposed specifications, or if these requirements would be for new shops only. Mark Bergtholdt stated these proposed specifications would be for new shops or any shops going through a remodel or change of ownership, which would require the shop come into compliance at that time.

Marko Greisen commented on the new proposed lighting requirements requiring that lighting be made of materials that do not shatter. Mark Bergtholdt stated that the materials surrounding or covering exposed lighting should not be made of a material that shatters, not the bulbs themselves. Bulbs should not be exposed.

Marko Greisen commented on Section 3.11.5, which requires a sharps container at each workstation. He asked if a workstation has two beds, will one sharps container be sufficient. Mark Bergtholdt said the health district can look into that situation.

Erin O'Malley read question from Webex Event attendee Jeffrey McIntosh, "With the current COVID restrictions, why is the amount of sinks being changed?" Mark Bergtholdt stated he could not comment specifically on that, but that it was a request from outside the health district and the change would match up with the Body Art Model Code from the National Environmental Health Association and the state requirements. Leyla Fowler requested clarity on Mr. Bergtholdt's comment that the change was a request from "outside." Mr. Bergtholdt stated a listening session was held in September and that's where the number of hand sinks was brought up. He stated health district staff had also been discussing the number of hand sinks per station.

Ainjil Chipp requested clarification on closed screening for private stations. She wanted to know if that requirement pertains to private studios that are not open to the public. Mark Bergtholdt stated this would be taken under consideration.

Leyla Fowler also requested clarification as to if the screening regulation would pertain "across the board," as there are several open-space studios. She also wanted to know if someone could attend more than one workshop to comment on the changes. Mark Bergtholdt stated that yes, multiple workshops could be attended for comment and that comments could also be sent in via email to bodyart@snhd.org.

Erin O'Malley read comment from Webex Event attendee Albert Conant, "Please define private studio." Mark Bergtholdt stated the health district will take defining a private studio under consideration. Karla Shoup asked if anyone would like to comment on the definition of a private studio. Ainjil Chipp stated she owns a private studio, which is not open to the public, is by appointment only, and does not have posted hours. Mr. Bergtholdt drew attention back to Ms. Chipp's previous comment on section 3.12, which requires at least one

workstation that can be screened from the public and other patrons for privacy, stating if there is one body art workstation, it inherently is private. Ms. Chipp responded that there have been mixed messages from inspectors regarding this issue, as some inspectors stated that since it is a private studio screening is not needed, however other inspectors have commented there needs to be at least one rolling, movable screen in case two artists are working at the same time.

Erin O'Malley read comment from Webex Event attendee Albert Conant, "We are all public shops."

4. <u>General Sanitation</u>: This section describes the minimum sanitation requirements for a body art establishment.

Leyla Fowler commented on Section 4.3.3.7 – if needed, placed in a sealed sterilization package with a class V chemical indicator or class VI chemical indicator. Ms. Fowler asked if the definition of indicator has changed and wanted to know if rolls of self-sealing with a note inside indicating date and sterilization are still allowed under this definition. Mark Bergtholdt stated this is one of the changes to the regulations and requires each package contain a class 5 or 6 indicator, which means the conditions for sterilization occurred at the surface of the equipment. Temperature, time, and pressure are all measured. Mr. Bergtholdt clarified that this is different indicator that's different from the package and different from the tape. He stated some indicators are only temperature sensitive, while others are temperature and pressure sensitive. The health district is wanting an indicator that shows sterilization on the surface of the equipment met time, temperature, and pressure conditions. Mr. Bergtholdt stated these types of indicators are available for approximately twenty cents apiece. He agreed with comment from the audience that steristrips meet these conditions. Ms. Fowler requested confirmation that after jewelry, tubing, and other equipment is sterilized, each individual item should have a steristrip placed inside the packaging. Mr. Bergtholdt confirmed that is the requirement and explained the reason for this change is that inspectors have seen packs that are not being processed properly, so this new requirement will make sure sterilization is occurring at the surface of the equipment.

Leyla Fowler commented on the same Section 4.3.3.7 – class V chemical indicator – that the sterilizer currently used in her establishment is a steam sterilizer and she wanted to confirm that was still okay. Mark Bergtholdt confirmed it was okay.

Leyla Fowler requested clarification on the number of indicators needed for packages that contain multiple pieces of jewelry that have not been cut apart. Mark Bergtholdt stated if it is one pack, one indicator is needed – one indicator per pack. Mr. Bergtholdt clarified that when he says "indicator" he means chemical indicator, not mechanical.

Erin O'Malley read a comment from Webex attendee Albert Conant, who requested an example of the product. Mark Bergtholdt stated that typing "class 5 chemical indicator sterilizer" on any search engine should show these products.

Leyla Fowler commented on Section 4.4.4 – Equipment packed in peel-packs or heat-sealed plastic and sterilized in house. Requested clarification regarding studios with multiple locations sterilizing at one location and distributing to the other locations. Wording is "per studio, per use." Mark Bergtholdt confirmed the wording and stated they would take the multiple studio scenario under consideration.

Kalawelo Kaiwi presented photo on his smart phone of the class 5 indicator he had searched for via the internet. Mark Bergtholdt confirmed the photo was of one of the indicators under discussion.

Kalawelo Kaiwi commented that sterilizing pouches already have an indicator on them. Requested confirmation that the indicators under discussion were in addition to the indicators on the pouch. Mark Bergtholdt confirmed that this is correct, as indicators on the packaging are not class 5 as they only indicate temperature, and the health district would like an indicator of time, pressure, and temperature.

Leyla Fowler commented on Section 4.7.4 – Only distilled water or sterile water dispensed from an unopened single-use container can be used for the mixing of inks, dyes, or pigments. She wanted to know if there were options other than the gallon-sized containers generally found. Mark Bergtholdt stated sterile water containers can be found in sizes less than one gallon and advised once a container of sterile water is opened the water is no longer sterile. Ms. Fowler stated it would be best to not continue purchasing gallon-sized containers, as it must be tossed after it has been opened.

5. Responsible persons and other body art establishment employees: This section describes the responsibilities of each person working in a body art establishment.

Marko Greisen commented on Section 5.1.1 – The permit holder must designate a responsible person or persons to act on their behalf within the body art establishment. A responsible person must be present during all hours of operation and any time a body art procedure is being performed. He requested clarification on how this would work if an artist was working on a day that the owners were not in the shop. Mark Bergtholdt asked what the process would be if the health district showed up on a day when the person acting on behalf of the permit holder was not present; would the person working in the establishment allow the health district entry for an inspection and be the responsible person at that time. Mr. Greisen stated they would allow entry, and Mr. Bergtholdt said that is the definition of a responsible person. Karla Shoup advised there are additional responsibilities for the responsible person outlined in the regulation, and that the person must be capable of meeting them. Mr. Greisen clarified that the person can change, and Ms. Shoup confirmed. She reiterated that the responsible person is capable and willing to fulfill the responsibilities outline in this section of the regulations.

Marko Greisen requested additional clarification on the wording "accountable for compliance with all requirements issued by all relevant state, county, and local agencies of jurisdiction where the body art establishment conducts business." He stated that person doesn't hold any legal right to that business or responsibility, per the definition.

Leyla Fowler requested clarification on Section 5.3.2.2 – maintaining a list of all body artists who no longer work in the establishment, and the reasoning behind the requirement to keep their information for two years. Mark Bergtholdt stated he believes that requirement came from the state and would investigate it. He stated the health district might need the information in case of an outbreak investigation involving someone who may no longer work in the establishment. Mr. Bergtholdt requested feedback on if industry would like to see something less or something more regarding that requirement. Ms. Fowler replied that she would like to see something less, as once the person leaves her establishment, they are their own entity and questioned holding on to their information.

6. <u>Patrons</u>: This section describes the minimum requirements for a patron and what they must be advised.

Leyla Fowler commented on Section 6.1 – patron age requirements – noting that the age requirement was removed. Mark Bergtholdt responded that it was not believed that an age requirement was necessary, as each business could set their own limit according to their practices. Kalawelo Kaiwi questioned whether providing services for patrons under a certain age might be considered statutory rape when touching anything on the torso. Mr. Bergtholdt stated that is not something the health district enforces; the health district enforces public health regulations and moral issues are enforced by other agencies, such as the police. Ms. Fowler stated she felt the lack of an age requirement was concerning. Karla Shoup stated she agreed and that it was something the health district would take under consideration. She advised a pediatrician and/or other medical professionals might be contacted to gather their opinions. Ms. Fowler stated the body art industry has relied on certain regulations so they can say "Absolutely not" and wondered why items like this were being removed.

Ainjil Chipp commented that she believes an age limit is required due to some of the requests from parents she has received over the years for piercings on their minor children. Ms. Chipp also requested reassurance that when a parent sues because the artist did, or did not, provide a requested service — or someone feels they were discriminated again — the health district will back them up. She stated providing a set of standards is important, as minors cannot speak for themselves. Karla Shoup asked if there is a minimum age that Ms. Chipp would recommend. Ms. Chipp stated sixteen may be acceptable to some artists but felt any piercings that require a minor to take their shirt or pants off should not be allowed.

Webex attendee Albert Conant commented that children under fourteen requesting piercings should be sent to pediatricians, and that piercing under that age could be considered child endangerment. He stated tattooing anyone under age eighteen should be limited. Requested age limit be added back into the regulations.

Leyla Fowler commented that ear lobe piercings would not be included in any minimum age requirements. She reiterated that anything that requires taking the shirt or pants off a minor should have an age requirement.

Marko Greisen commented that he agreed with Leyla Fowler's recommendation to exclude ear lobe piercings from minimum age requirements. He stated that for permanent makeup he recommends a minimum age limit of sixteen with a parent present, as a sixteen-year-old can drive and get a license.

Leyla Fowler commented on Section 6.3.5 – patron evaluation must include the following statement, "Consult a physician prior to the procedure if you have any concerns about any of the questions below:" requesting clarification on what this wording means. Should the tattoo or piercing be halted at that time until the person has consulted a doctor? Mark Bergtholdt clarified that a doctor would only need to be consulted if the client had concerns with the other questions in the evaluation.

Leyla Fowler requested the wording be reviewed on section 6.3 in regards to risk notification, as it seems to place blame on the body art establishment or artist if an infection occurs due to improper aftercare and they have no control over what the client does after they leave. Mark Bergtholdt stated the risk notification section is to advise the client of possible adverse reactions and side effects of body art. Ms. Fowler stated she is not averse to the risk notification, as that has always been part of the regulations, but is concerned with the wording. Karla Shoup advised her that if she has any suggestions for the wording to please email them to the health district.

7. <u>Body Art Procedures</u>: This section describes the minimum steps and conditions of any body art procedure.

Kalawelo Kaiwi commented on Section 7.4.7 – jewelry standards ASTM F138 and ISO. He said the standards of jewelry compliance in three countries – Japan, Europe, and United States – provide percentages of materials in the jewelry, but the proposed regulations do not state percentages and are very specific standards. The grade of material is not defined. He said industry has been using 316L standard for years, which specifies the base material from which the jewelry originates. Mr. Kaiwi stated there is little compliance with ASTM F138. He acknowledged the titanium ASTM F136 standard jewelry is widely available, but the steel ASTM F138 is not. Mr. Kaiwi questioned whether industry can use jewelry that complies with the material content of ASTM F138. Karla Shoup said she believed the standard came from the Body Art Model Code, and Mark Bergtholdt said it might also be part of state code. Both indicated the health district can investigate the issue, as this is new to the regulations. Mr. Kaiwi stated 316L steel has been used for years and questioned whether there was any data or statistics to show that standard was unsafe. He also advised 316L is commonly used in medical instruments and medical implants, and that the F138 standard would limit jewelry purchases to high end shops at higher cost. Ms. Shoup stated the health district would investigate.

Leyla Fowler commented that she is also concerned with this section of the regulations regarding jewelry standards and advised this would require her to purchase jewelry from three specific jewelry companies to meet the standard. She said this would have a huge financial impact on piercing businesses. Ms. Fowler requested the standard be returned to the 316L standard industry has been following for years. Mark Bergtholdt stated he had just reviewed NAC 444, which the health district regulations must meet. Those regulations identify ASTM standard F138 and ISO 5832-1 as the minimum requirements for the steel that needs to be in jewelry. Kalawelo Kaiwi spoke from the audience, questioning whether the 316L standard falls into that same standard. Other audience members said it did. Ms. Fowler commented on the requirement to provide mill certificates and ISO certificates. She stated there are only three major companies that provide the ISO compliancy certification, and they would be unable to use multiple suppliers that they have been purchasing from for years. This would cause costs to rise and cost them the relationships they have with these suppliers. Karla Shoup reiterated that the health district would look into the matter and requested those who are concerned about a financial impact on their business due to the new regulation complete the business impact survey.

Kalawelo Kaiwi asked whether the 316L standard complies with the ASTM F138 standard. Karla Shoup and Mark Bergtholdt stated they needed to investigate this. Mr. Kaiwi requested additional wording in the proposed regulation to clarify the standard and if 316L would comply. He said there is no data that proves someone fell ill or was hospitalized due to the material used, but that infections may occur with how clients care for their new piercings. He requested clarity on if 316L meets the standard proposed in this regulation. Mr. Bergtholdt said the health district would review that section.

Webex attendee Albert Conant commented that his shop uses sterilized 316L needles and jewelry. He stated they provide a good product and believes 316L should be included in the regulations.

Lou Tanuis commented on externally versus internally threaded jewelry. He asked if there was any data to show that in a healed piercing, damage had occurred directly from the externally threaded jewelry. He stated that if done properly, externally and internally threaded jewelry should have the same safe, damage-free outcome if 316L compliant jewelry

is used. Mark Bergtholdt stated the health district would investigate the issue. He then reviewed NAC 444 and advised it requires all threaded or press-fit jewelry must have internal tapping or threading.

Leyla Fowler commented that industry has been operating for years under the previous standards and was not aware changes had occurred at the state level. She requested the health district attempt to have these new regulations reversed or direct her to anyone who could assist. Mark Bergtholdt advised this would need to be taken to the state level, as the new standards were part of the body art regulation changes made in 2017. When Ms. Fowler questioned whether there was any leeway in relation to this section of the regulations, Mr. Bergtholdt again advised the health district would review this issue and he would speak with his counterparts at the state level for more information. He also stated this new standard is part of the National Body Art Model code. Ms. Fowler stated this section of the national standards were not enacted in other cities, and that their current suppliers cannot show the certification required because they are not in "the same club" as the other jewelry companies that can show certification. She requested the proposed regulation be reworded. Mr. Bergtholdt requested confirmation that she would like to have 316L included as one of the standards, and Ms. Fowler stated she would like it included.

Mark Bergtholdt questioned the statement that other cities had tried to enact these standards and had issues. Kalawelo Kaiwi approached the podium to state this was attempted in Seattle and Portland and there was a sense that this standard was very biased on the behalf of material made in the Unites States. He said material sourced from Europe and Asia meets the standards of federal regulations in regard to implant-grade products, but when these specific codes are required for compliance there are only specific companies that meet them. Mr. Kaiwi stated he felt this specific guideline does not come down to safety, but instead is biased towards certain companies selling merchandise and jewelry. He also advised that wait times for these companies now have six month waiting lists for their products.

Kalawelo Kaiwi commented on the section of the regulation requiring certificates and records be held for three years. He questioned how the health district would be able to determine which material is which in a jewelry lot. Karla Shoup stated this requirement has to do with product recalls, and the establishment would keep records of the patrons and what items were used. If the health district becomes aware of a recall they can ask if any facilities used that product and make sure the patrons are notified. Mr. Kaiwi requested clarity regarding documenting the origin of products and questioned if this was related to recalls. Mark Bergtholdt confirmed documentation of product origin is needed for recalls. He also stated that if a patron becomes ill from a particular piece of jewelry, such as poisoning from a piece of metal leaching, the records can be used to trace back from the shop to the supplier and then to the manufacturer.

Kalawelo Kaiwi requested confirmation that in 2017 a law was passed requiring internal threading of jewelry. Mark Bergtholdt confirmed this to be the case and stated the health district regulations can be no less stringent than the state's regulations.

Leyla Fowler commented that she and other shops would like to see the wording changed so that they can continue to use their suppliers, who can provide mill certification but not the certification required by this new regulations. She requested the material they are currently using be added back into the regulations.

8. <u>Body Art Card</u>: This section describes the various body art cards and the limitations of each card.

Marko Greisen provided comment on Section 8.3.4.1.3, requesting clarification on the wording "sponsor no more than ten apprentices at any one time." Mark Bergtholdt stated this was requested by industry, as there are some businesses that have a model of paying for training and accepting tens of people every six months, but not providing proper apprenticeship training within that time. He said the new requirement would be each journey or master artist can only have ten apprentices practicing at any one time under them for the length of six months. Mr. Greisen said this requirement would greatly impact their business, as they have five to ten apprentices that start at the beginning of each month for a six-month training session. Mr. Bergtholdt questioned how many artists are employed by the business, and Mr. Greisen explained their business model. Mr. Bergtholdt asked Mr. Greisen what his proposal would be for this section. Mr. Greisen stated he would propose no more than ten apprentices per month in a sound environment with a proper curriculum and employees to support the training. He said in his business they have one master artist and two journey people, with approximately forty to fifty apprentices. He stated 80% of their business was training and 20% service. Karla Shoup asked if a distinction should be made between a shop and an educational facility. Mr. Greisen stated he though so, as his facility is like a school and how it is treated. He then commented that he felt that people needed four years of experience before they could take on an apprentice, which Mr. Bergtholdt stated was the key with this new regulation.

Ainjil Chipp commented that she wants to see a two-year apprenticeship for body art, but even a one-year apprenticeship would be more appropriate than the current six months. She stated she is unfamiliar with permanent makeup training or piercing, but that ten apprentices for a tattoo artist would be too much. Ms. Chipp requested clarity between the different procedures and the number of apprentices each type of artist could accept at one time. She felt a tattoo artist should only have one apprentice at a time.

Marko Greisen agreed that a one-year apprenticeship would be best, and that people need more experience. He also clarified that his business does not have ten apprentices in the facility at one time; they are all scheduled so there are a few at a time. Mr. Greisen also commended on Section 8.8.1 – Body artists and journey body artists must not perform body art procedures if their body art or journey body artist cards are expired. He states he agrees with that statement, and then questioned the section that states current body art card holders can apply for a journey body art card without the four years' experience. Mark Bergtholdt said this is necessary as the health district cannot change the rules on them, and that this would act as a "sunset clause." The section captures those card holders who are already in the system. Mr. Bergtholdt also emphasized an artist must apply for a journey card before accepting apprentices as a key part of the proposed regulations.

Webex attendee Albert Conant commented that his business is taking care of customers and making sure tattoos and/or piercings are done properly, safely, hygienically. They are not in the business of trying to sell or selling certifications to other artists. Apprentices are watched very closely, and he stated the idea of having ten apprentices in a shop that is not a school is "crazy" unless multiple journeymen are there monitoring the apprentices. Mr. Conant commented that four years should be the minimum for somebody training someone else in the art of tattooing, as well as piercing. Due to the amount of training required, he suggested an artist have eight years of experience before training others. He stated he looks for the most experience possible when hiring.

Ainjil Chipp commented that attendees at the earlier listening session proposed ten years' experience for tattooing and two-year apprenticeships. She said she wanted to remind everyone of these proposals, since not everyone attending this meeting attended the last one, and she wanted to make sure everyone was informed. Mark Bergtholdt responded that

the purpose of the health district is to protect public health, not to ensure businesses are running at high quality. He stated the minimum requirement for public health is blood borne pathogens in a body art shop; the health district does not regulate the quality of the artists there. Mr. Bergtholdt said there had even been a push to eliminate the body art card, questioning its public health significance. He advised OSHA should ensure that, but since OSHA does not visit regularly the health district is stepping into that role with the card, ensuring that people understand bloodborne pathogens. Ms. Chipp stated she is aware that artists are responsible for the type and quality of the artwork done by their apprentices, which is why she felt the more experience the better to take on an apprentice. She stated she felt the minimal training could hurt somebody due to the apprentice not receiving proper education. Ms. Chip commented that requiring a lengthier apprenticeship would require people to take it seriously and the apprentice would receive an education to better protect the people they are tattooing. Mr. Bergtholdt thanked Ms. Chipp for her comments and stated they would be taken into consideration. He then stated the health district cannot regulate ugly body art, as that is not the district's job. Ms. Chipp responded that the issue she was concerned with was opening the skin and causing an abrasion susceptible to a host of different bloodborne pathogens and other diseases that the public can be protected from with better education.

Kalawelo Kaiwi commented that if safety is the main concern and not quality, he would like to request again that the jewelry aspect of the proposed regulations be reviewed. Mark Bergtholdt stated the district was committed to looking into that description.

Marko Greisen commented that permanent makeup, tattooing, and piercing are all slightly different. Karla Shoup stated that from the health district standpoint, trying to protect public health is the main concern, which comes back to bloodborne pathogens. She explained this is why the regulations were combined, since the focus on public health is the same regardless of the different nuances seen in the industry.

Leyla Fowler commented on the fees for cards not being present in the proposed regulations. Mark Bergtholdt stated these are listed in a separate fee schedule, not in the regulations. She asked if anything had changed, and he stated no.

9. <u>Body Art Special Events</u>: This section describes the conditions and requirements for body art special events.

Mark Bergtholdt clarified that a special event permit is still required, even if an artist has a body art card – no change.

No comments provided by audience or Webex Event attendees on Section 9.

10. <u>Health Permit</u>: This section describes how a permit is issued, various exemptions, what information needs to be posted by the body art establishments, and what information needs to be shared with the health district.

Leyla Fowler requested confirmation that currently open studios would not be required to remodel if proposed regulations are adopted. Mark Bergtholdt confirmed this to be the case.

Leyla Fowler inquired if the waiver process could be utilized to waive the body art jewelry material requirements proposed in Section 7 of the Regulations. Karla Shoup explained the waiver process and advised the health district needs to investigate the jewelry issue before confirming the proposed regulation change will be pursued as written. She stated this

change is a state law and there is little room to change it. Ms. Shoup requested assistance from industry in evaluating if the current health district jewelry regulations have presented a risk or hazard to public health and requested any substantiating information they can provide. She explained that when a waiver is submitted a risk is identified, and an explanation provided for why that regulation cannot be complied with and the alternative method that will be used to mitigate the risk. Ms. Shoup stated waivers are accepted in the pool program, and they would like to introduce them to the body art program, as well.

Webex attendee Albert Conant suggested wording changes to proposed regulations stating that whenever there are specific labels or standards listed in the regulations, the words "or equivalent" be used to cover the constantly changing metal materials. He stated there are many different standards with jewelry, and if they provide the same protection then "or equivalent" wording would resolve some of that problem.

11. <u>Enforcement</u>: This section describes how the health district will enforce these regulations.

No comments provided by audience or Webex Event attendees on Section 11.

12. <u>Permit Suspension:</u> This section describes what action can be taken and how the health district can suspend and revoke the permit.

No comments provided by audience or Webex Event attendees on Section 12.

13. Necessary Legal Language:

Leyla Fowler commented on the "Miscellaneous" section of the language, stating the wording can be interpreted to mean that these regulations have already taken effect and requested clarification. Karla Shoup said there are still several steps left before the proposed changes get to the implementation and documentation. Mark Bergtholdt said this language is in the regulations for when these changes are adopted. He confirmed there is still a long way to go.

Kalawelo Kaiwi requested an explanation of why single point piercings or dermal anchors are not allowed. Mr. Bergtholdt responded that this was a decision made when these regulations were first drafted. Single point piercings were considered a medical procedure and if a facility wants to do single point piercings, they can get a contract with a doctor to perform this procedure under their supervision. Mr. Kaiwi requested additional clarification as to why it is considered a medical procedure. Mr. Bergtholdt explained that medical personnel at the health district made that determination and continue to make that determination.

V. <u>SECOND PUBLIC COMMENTS:</u> A period devoted to comments by the general public, if any, on any subject, and discussion of those comments. Comments will be limited to five (5) minutes per speaker.

A question was asked about whether minutes of the meeting would be made available. Karla Shoup stated yes, the minutes will be posted online.

Leyla Fowler stated she did not see this meeting and its date posted on the website; she only knew about the meeting from an email she received. Mark Bergtholdt stated the meeting information was posted on the website under Public Notices. Ms. Fowler questioned when the minutes would be available online, and Ms. Shoup stated it would be posted once Erin O'Malley was able to type them.

Mr. Bergtholdt thanked Ms. Fowler for her comment and stated he can have these meetings and the minutes posted on the Body Art webpage, but these notices can also be found in the Public Notices section of the health district website.

No further comments and Mr. Bergtholdt closed the second public comments portion.

VI. SUMMARY and FINAL SNHD COMMENTS

This is the first of three public workshops. Additional workshops will be held on January 6th, at 9:00 a.m. and January 13th, at 1:00 p.m. SNHD will take any public comment on the proposed regulations, any data on the impact to businesses, until January 31st, 2022. Comments can be made in person in an upcoming workshop, or they can be emailed to Special Programs at bodyart@snhd.org.

Mark Bergtholdt requested everyone complete a Business Impact Survey, which is an opportunity to provide input to the health district on the impact these proposed regulations will have on business. Surveys were included in the email sent out on Monday, December 6th, 2021. Audience members could also take a blank form from the ones provided at the table near the door. Mr. Bergtholdt requested completed forms be returned following the directions at the bottom of the survey.

VII. ADJOURNMENT

Mark Bergtholdt adjourned the workshop at 3:15 p.m.

MEETING	Workshop for Proposed Body Art Regulations	DATE	12/21/2021	
FACILITATOR	Mark Bergtholdt	TIME	1:00PM	
LOCATION	Red Rock Conference Room and virtual			



NO. NAME (PLEASE PRINT)	BUSINESS NAME/ PROGRAM/ AGENCY/ AFFILIATION	EMAIL	PHONE	SIGNATURE
Kalawelo Kajwi MARIGONZAIS Legla Fowler Anyl Chipp	Body drist			
Legla Fowler	Crown Electric			2
Hingil Chapp	Rayo Tarroo			

MEETING Workshop for Proposed Body Art Regulations 12/21/2021

FACILITATOR Mark Bergtholdt 1:00PM

LOCATION Red Rock Conference Room and virtual



NO. NAME (PLEASE PRINT)	BUSINESS NAME/ PROGRAM/ AGENCY/ AFFILIATION	EMAIL	PHONE	SIGNATURE
MARICO GREISEN	Miceobladees			
				_

MEETING	Workshop for Proposed Body Art Regulations	DATE	12/21/2021	
FACILITATOR	Mark Bergtholdt	TIME	1:00PM	
LOCATION	Red Rock Conference Room and virtual			



NO.	NAME (PLEASE PRINT)	BUSINESS NAME/ PROGRAM/ AGENCY/ AFFILIATION	EMAIL	PHONE	SIGNATURE
	Robert Gardes				
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		,		X	
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CERTIFICATE OF POSTING

OPEN MEETING NOTICE NRS 241.020(3)(b)

I certify that I posted the Agenda for the meetings identified below *more than three working days prior* to the meeting in accordance with NRS 241.020 (3)(b):

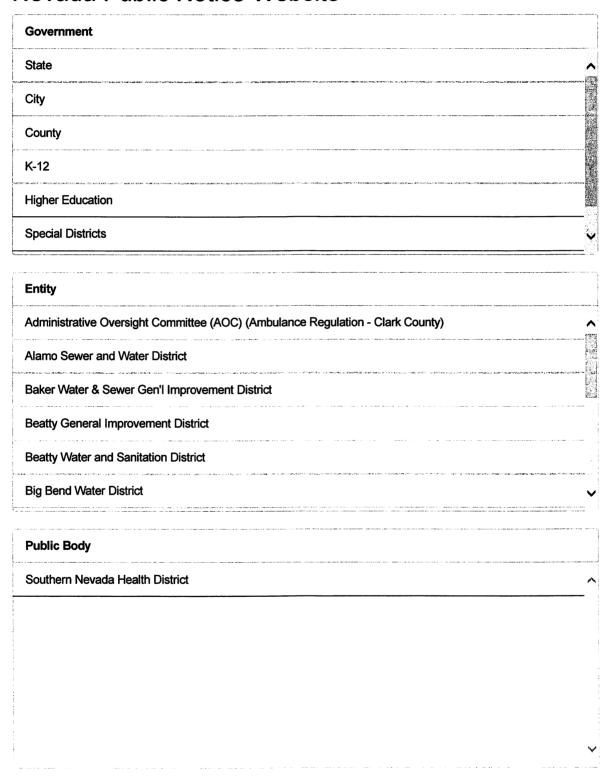
SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

December 21, 2021 Tuesday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:	Southern Nevada Health District
Address of Location:	280 South Decatur Boulevard
City, State, ZIP:	Las Vegas, NV 89107
Date/Time of Posting:	12/15/21, 9:30 a.m.
Printed Name:	Heather Hanoff
Signature:	Heather Hanoff
-	1//

Nevada Public Notice Website



https://notice.nv.gov/

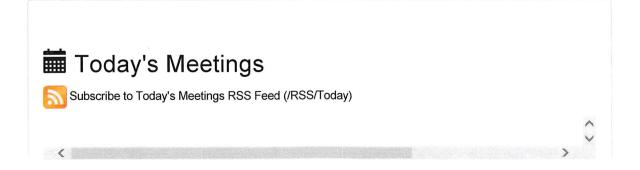
Results for Southern Nevada Health District



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Results are limited to the last 7 days and for all dates in the future.

Not	lice	Date Posted	Event Date	Time	Status	Туре
હ	Solid Waste Mangement Authority Hearing Officer Administrative Hearing (https://www.southernnevadahealthdistrict.org/news- info/public-notices/)	12/1/2021	12/9/2021	9:00 AM	Scheduled	Hearing
S	Proposed Body Art Regulations Workshop (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	12/21/2021	1:00 PM	Scheduled	Workshop
S	Proposed Body Art Regulations Workshop Agenda (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/15/2021	12/21/2021	1:00 PM	Scheduled	Workshop
S	Proposed Body Art Regulations Workshop (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	1/6/2022	9:00 AM	Scheduled	Workshop
S	Proposed Body Art Regulations Workshop (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	1/13/2022	1:00 PM	Scheduled	Workshop
S	Proposed Body Art Regulations Business Impact (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	2/24/2022	9:00 AM	Scheduled	Hearing
S	Proposed Body Art Regulations (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	3/24/2022	9:00 AM	Scheduled	Hearing



https://notice.nv.gov/

08:30 <i>⊗</i> AM	City of Boulder City (https://www.bcnv.org/AgendaCenter/ViewFile/Agenda/_12152021-1517) ▲ ✓
	sss, No Website & Link to Website
Public Notic	ce Access
	wishing to post public notices must first register (/Account/Register) for an account. <i>It is</i> to use your government issued email address.
Decister //Acc	ount/Register)

Next Steps after you register

Send an email to deptadmin@admin.nv.gov (mailto:deptadmin@admin.nv.gov) with the following information:

- 1. Your name and email address.
- 2. The type of Government (i.e. State, City, County, K-12, Higher Education, Special Districts).
- 3. The area or "Entity" your Government type represents. For example, if your Government type is County, tell us which County i.e. Churchill, Clark, Douglas, etc.
- 4. The name of the Public Body (aka Committee/Council/Board) you will be posting for? Please list all of the Public Bodies you will be responsible to post notices for.
- 5. After you send the email with this information, you will receive an email or phone call back from the Department of Administration's Director's Office to confirm your account has been successfully enrolled. If you have questions, please email deptadmin@admin.nv.gov (mailto:deptadmin@admin.nv.gov).

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12/15/2021 2:00 PM FROM: Sonv Health District TO: +17022939245 P. 2

CERTIFICATE OF POSTING OPEN MEETING NOTICE NRS 241.020(3)(b)

I certify that I posted the public notice and agenda for the meetings identified below more than three working days prior to the meeting in accordance with NRS 241.020 (3)(b):

SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

December 21, 2021 Tuesday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:	Boulder City, City Hall	
Address of Location;	401 California Avenue	
City, State, ZIP:	Boulder City, NV 89005	
•	,	
Dute/Time of Posting:	12/16/2021 @ 8:02 am	
Printed Name:	Bridgette Rodriguez	anno con con con contrata (sanca
Signature:	78. Rodingrif	
	Please return this certificate via FAX to:	

Special Programs Section, Southern Nevada Health District (702) 759-1486

Thank you.



FROM

TO

Name: Bridgette Rodriguez

Phone: 702-293-9208 Fax: 17027591486

E-mail: Brodriguez@bcnv.org

Sent: 12/16/21 at: 8:05:09 AM 2 page(s) (including cover)

Subject: Attached Image

Comments:

12/15/2021 2:06 PM FROM: SoNV Health District TO: +17024553558 P.

CERTIFICATE OF POSTING

OPEN MEETING NOTICE NRS 241.020(3)(b)

I certify that I posted the public notice and agenda for the meetings identified below more than three working days prior to the meeting in accordance with NRS 241.020 (3)(b):

SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

December 21, 2021 Tuesday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Clark County Government Center
500 South Grand Central Parkway
Las Vegas, NV 89155
121521 4:30 pm
Karishadden
Karishadden

Please return this certificate via FAX to: Special Programs Section, Southern Nevada Health District (702) 759-1486

Thank you.

CERTIFICATE OF POSTING

OPEN MEETING NOTICE NRS 241.020(3)(b)

I certify that I posted the public notice and agenda for the meetings identified below more than three working days prior to the meeting in accordance with NRS 241.020 (3)(b):

SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

December 21, 2021 Tuesday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:	Henderson City Hall
Address of Location:	240 Water Street
City, State, ZIP:	Henderson, NV 89015-7227
Date/Time of Posting:	
Printed Name:	Manay Heffernan
Signature:	Merle
	Please return this certificate via FAX to:
	Special Programs Section, Southern Nevada Health District

Thank you.

(702) 759-1486

12/15/2021 2:12 PM FROM: SoNV Health District TO: +17023824803

2021 DEC 15 P 2: 28

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I certify that I posted the public notice and agenda for the meetings identified below more than three working days prior to the meeting in accordance with NRS 241.020 (3)(b):

SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

December 21, 2021 Tuesday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:		Las Vegas City Hall	
Address of Location:		495 South Main Street	
City, State, ZIP:		Las Vegas, NV 89101	
Date/Time of Posting:	12-15-21		3:00 pm
Printed Name:	BARNEY	JENKIN-S	
Signature:	3		
_ /	Please retur	n this certificate via FAX to:	
		tion, Southern Nevada Healt	n District

Thank you.

(702) 759-1486

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I certify that I posted the public notice and agenda for the meetings identified below more than three working days prior to the meeting in accordance with NRS 241.020 (3)(b):

SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

December 21, 2021 Tuesday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:	Laughlin Clark County Community Resource Center
Address of Location:	55 Civic Way
City, State, ZIP:	Laughlin, NV 89029
Date/Time of Posting:	12/16/2021 8:20am
Printed Name:	Tina Gish
Signature:	(Olive)
	Please return this certificate via FAX to:

Thank you.

Southern Nevada Health District (702) 759-1458

12/15/2021 14:59

12/15/2021 2:19 PM FROM: SoNV Health District TO: +17026493846 Р. 2

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SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

December 21, 2021 Tuesday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:	North Las Vegas City Hall	
Address of Location	n: 2250 North Las Vegas Boulevard	
City, State, ZIP:	North Las Vegas, NV 89030	
Date/Time of Posti	ng: 12 15 2021 - 2:40 PM	
Printed Name:	1 Nustine McDowell	
Signature:	A the Metowell	
	Places we this contition to via FAV to:	

Please return this certificate via FAX to: Special Programs Section, Southern Nevada Health District (702) 759-1486

Thank you.

ATTACHMENT G



NOTICE PUBLIC WORKSHOP AGENDA PROPOSED BODY ART REGULATIONS

9:00 a.m., January 6, 2022 Southern Nevada Health District Red Rock Conference Room 280 S Decatur, Las Vegas, NV

To participate remotely either:

- Use this Webex Event address for attendees:
- https://snhd.webex.com/snhd/onstage/g.php?MTID=e29a94940e33f1f65f3b4fc097ae14507
 This link is for public attendees only.
- Call into the meeting:
 - o Dial (415) 655-0001 and
 - o Use Access Code 2552 660 0289
- · For other governmental agencies who use video conferencing capability
 - o The video address is 25526600289@snhd.webex.com

I.	Introductory Remarks	Introductory Remarks and Introduction of SNHD Staff			
	•	by EH Staff			
		A period devoted to comments by the general public about those items appearing on the agenda. Participants in the room can step up to the speaker's podium; clearly state your name and organization. Spell your last name for the record. If you are participating remotely please submit request to speak via Webex Raise Your Hand or Chat functions. Comments will be limited to five (5) minutes per speaker. If any member of the panel wishes to extend the length of a presentation, they can upon request of the speaker.			
III.	Major Changes to Current Regulations	EH Staff			
IV.	Public Comments Taken	EH Staff			
	Regarding Proposed Southern				
	Nevada Health District	Link to draft regulations: 20211129-Body-Art-Regs-			
	Regulations Governing the	WORKING-DRAFT.pdf			
	Sanitation and Safety of Body Art	(southernnevadahealthdistrict.org)			
	Establishments				
V.	Second Public Comment	A period devoted to comments by the general public, if			



any, and discussion of those comments, about matters
relevant to the Health District Board's jurisdiction will
be held. Comments will be limited to five (5) minutes
per speaker. If any member of the panel wishes to
extend the length of a presentation, they can upon
request of the speaker. See above for instructions for
submitting public comment.

VI. Summary & Final SNHD Comments	Discussion of next steps by EH staff
VII. Adjournment	EH Staff

(cont.)

THIS AGENDA HAS BEEN POSTED IN THE MAIN LOBBY OF THE FOLLOWING LOCATIONS: 1) CLARK COUNTY GOVERNMENT CENTER, 500 S. Grand Central Parkway, Las Vegas, NV; 2) LAS VEGAS CITY HALL, 495 S. Main Street, Las Vegas, NV; 3) NORTH LAS VEGAS CITY HALL, 2250 N. Las Vegas Boulevard, North Las Vegas, NV; 4) HENDERSON CITY HALL, 200 Water Street, Henderson, NV; 5) BOULDER CITY, CITY HALL, 401 California Avenue, Boulder City, NV; 6) MESQUITE CITY HALL, 10 E. Mesquite Boulevard, Mesquite, NV; 7) SOUTHERN NEVADA HEALTH DISTRICT, 280 S. Decatur Boulevard, Las Vegas, NV; and 8) CLARK COUNTY COMMUNITY RESOURCE CENTER, 55 Civic Way, Laughlin, NV. This Agenda is also available on the Southern Nevada Health District Internet Website at https://www.southernnevadahealthdistrict.org and on the Nevada Public Notice website at https://www.southernnevadahealthdistrict.org and on the Nevada Public Notice website at https://notice.nv.gov. For copies of agenda and supporting materials, please contact Erin O'Malley at (702) 759-1626.

NOTE: Disabled members of the public who require special accommodations or assistance at the meetings are requested to notify Erin O'Malley, Administrative Assistant at the Southern Nevada Health District, by calling (702) 759-1626.



MINUTES

SOUTHERN NEVADA HEALTH DISTRICT WORKSHOP FOR PROPOSED BODY ART REGULATIONS

January 6, 2022 – 9:00 a.m.

Meeting was conducted in person and via Webex Events

Southern Nevada Health District, 280 S Decatur Boulevard, Las Vegas, NV 89107

Red Rock Trail Rooms A and B

STAFF PRESENT: Karla Shoup – Consumer Health Programs Manager

Mark Bergtholdt - Supervisor, Special Programs

Dante Merriweather – Senior Environmental Health Specialist, Special Programs

Michelle Goodsell – Environmental Health Specialist II, Special Programs James Muth – Environmental Health Specialist II, Special Programs Erin O'Malley – Administrative Assistant II, Special Programs

ALSO PRESENT: Robert Gonzales, Mari Gonzales, Kalawelo Kaiwi, Ainjil Chipp, Marko Greisen,

(In Audience) Danielle Greisen, Cesar Fernandez

ALSO PRESENT: Kathy Davis-Rees, Giselle Reyes, Albert Conant, Karla Delarosa, Hardline (Via Webex Events) Hemill, Josh Peattie, Dale Parris, Vanessa Nornberg-Barey, Adolfo Medina, Mo

Fatu, Wendy Chester, Benjamin Lepore, Emily Rocha

I. INTRODUCTORY REMARKS and INTRODUCTION OF SNHD STAFF

Mark Bergtholdt called the meeting to order at 9:04 a.m. He requested anyone in the audience who had not signed into the meeting yet to do so and stated the name and email address of Webex Events attendees was collected when they entered the meeting. He then introduced the SNHD staff members attending the meeting.

Mark Bergtholdt provided the website address, www.SNHD.info, where the agenda for the meeting and body art regulations under discussion are posted. Mr. Bergtholdt stated this would be attendees' opportunity to provide input on the proposed regulations. He also provided directions for audience members and Webex Events attendees on how to present their comments at the meeting.

II. 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.

Seeing no one, Mark Bergtholdt closed the First Public Comment portion.

III. MAJOR CHANGES TO CURRENT REGULATIONS

Dante Merriweather presented an overview of the changes proposed for the regulations. These revisions were made after a review of the Nevada State Administrative Code, the National Environmental Health Association Body Art Model Code and input received from the public.

We are proposing numerous clarifications. More than fifty redundant or obsolete definitions have been removed. Language proposing the granting of waivers of the regulations has been included. There are proposed changes to the mandatory language within the consent forms, and the imminent health hazards section of the regulations has been streamlined to include consolidated instructions for corrective action.

The largest proposed change to the two regulations for Tattooing and Body Piercing is combining them into one set of Body Art Regulations. We are also proposing changes to the body art card that will set a minimum level of experience for an artist before they can take on any apprentices. The proposed regulations will also limit the number of apprentices that an artist can have at any one time.

From an operational standpoint, the hand sink requirements have been more clearly defined, including a clarification that hand sinks must be permanently plumbed to potable water and sanitary sewer. The hand sinks must be a minimum size and there must be at least one hand sink for every four workstations, located no more than fifteen feet from a procedure table. Any facility in compliance with the current hand sink requirements are fine until a change of ownership occurs or a remodel of the facility.

The minimum size of a workstation has been decreased from one hundred square feet to eighty square feet.

Also proposed are detailed requirements for an equipment processing room for any facility that uses reusable equipment that needs to be sterilized. Additionally, the minimum testing for the sterilizer has been increased from once a year to monthly. This is the minimum requirement adopted by the state. Each sterile pack must include a class five or six indicator to indicate proper sterilization conditions reached the surface of the equipment. For facilities that use reusable equipment, an ultrasonic cleaner must be used on equipment prior to processing the equipment in a sterilizer.

Finally, there is a proposal to set conditions for expired equipment that can be stored within the facility. These conditions include allowing the equipment to be used only for practice when it is properly labeled and stored. There are also proposed minimum requirements for jewelry and improved instructions for handling solid waste and biohazardous waste.

These changes have made the Regulations more concise, reducing the number of pages from 67 to 59 pages.

This is a broad overview of the main items that have been altered, expanded, or deleted in this revision. All concerned parties are strongly urged to closely read and review the proposed revisions in a timely manner and present any concerns to the Southern Nevada Health District as soon as possible.

Mark Bergtholdt spoke about the results of the previous workshop. Minutes for the workshop have been posted to the website, and he stated the health district is in the process of revising the proposed regulations to take the following into account:

1. Section 1

- a. Changing the word journey to mentor;
- b. Adding a definition for microblading.

2. Section 4

Providing a provision for a sterilizer to be located in a procedure workstation as long as:

- a. The sterilizer is not connected to water or sewer;
- b. Equipment and/or jewelry cleaned in a processing room is not packaged for sterilization and is used immediately after sterilizing.

3. Section 6

Added a minimum age of fourteen years old that a facility can apply body art not exempted by the regulations.

- 4. Section 7
 - a. Lessening the specifications on initial piercing jewelry including
 - Not requiring internal threading, but requiring no exposed threads when assembly is complete:
 - ii. All jewelry must be obtained from a reputable firm. If custom jewelry is made ASTM standards for metals will apply;
 - b. Removing the requirement to maintain material certificates. Information provided by them is to be retained on the supplier receipts.
- 5. Section 8
 - a. Decreasing the number of apprentices a mentor body artist can support to five;
 - b. Carving out microblading and increasing the number of apprentices that a mentor microblading artist can support to fifteen.

Based upon the comments received in this meeting, the Health District will make those revisions and publish them.

IV. PUBLIC COMMENTS TAKEN REGARDING PROPOSED SOUTHERN NEVADA HEALTH DISTRICT REGULATIONS GOVERNING THE SANITATION AND SAFETY OF BODY ART ESTABLISHMENTS

Public comments were taken by Regulations section. Copies of the originally proposed regulations were made available to meeting attendees.

1. <u>Definitions:</u> This section is where all the definitions are. Words that are defined in these Regulations will appear in bold text through the Regulations.

No comments provided by audience or Webex Events attendees on Section 1.

2. <u>Imminent Health Hazards</u>: These are the conditions that require immediate closure of a body art establishment.

No comments provided by audience or Webex Events attendees on Section 2.

3. <u>Facilities and Equipment</u>: This section describes the minimum requirements for a body art establishment.

No comments provided by audience or Webex Events attendees on Section 3.

4. <u>General Sanitation</u>: This section describes the minimum sanitation requirements for a body art establishment.

No comments provided by audience or Webex Events attendees on Section 4.

5. Responsible persons and other body art establishment employees: This section describes the responsibilities of each person working in a body art establishment.

No comments provided by audience or Webex Events attendees on Section 5.

Patrons: This section describes the minimum requirements for a patron and what they must be advised.

Webex Events attendee Albert Conant commented he had concerns with patron ID. He stated that he recognized that industry requested fourteen years of age be put in the regulations as the minimum age, however patrons under twenty-one years of age or eighteen years of age do not have any identification other than a school identification. Mr. Conant said he recognized that when parents register a student for school, the parent presents a birth certificate and the parent's ID; the school then creates an identification card for the minor. He commented they would lose many customers if a school identification, along with a birth certificate and identification from a parent listed on the birth certificate, could not be used. Mr. Conant commented that he would to have school ID as an acceptable form of identification.

Benjamin Lepore commented that he was concerned with requiring all the lot numbers, batch numbers, expiration dates of everything being used on a patron, including colors and the brands of inks. He said he thought this was too much, especially when doing full color saturation, realism tattoos. Mr. Lepore said it was a lot to record every single time, especially in a high-volume shop. He commented that the Health District is already inspecting that materials are not expired during inspections, and that the additional requirements would take up a lot of time that is not needed.

Webext Event attendee Albert Conant commented that he agreed with previous speaker. He said their ink is inspected, they use sterilized distilled water for mixing, and they are using disposable needles so documenting all those items being used are excessive. Mr. Conant commented that when doing multiple colors and these other types of things, this documentation is a restraint and impacts the ability of them to do business.

7. <u>Body Art Procedures</u>: This section describes the minimum steps and conditions of any body art procedure.

Mark Bergtholdt read into the record a letter received from Black & Wadhams Attorneys at Law on behalf of Koolsville Tattoos and addressed to Scott Black, chairperson of the Southern Nevada Health District Board of Health. A copy of the letter is attached to these meeting minutes.

Webex Events attendee Vanessa Nornberg commented that she is representing Metal Mafia, one of the largest supplies in the United States, supplying jewelry to five thousand plus jewelry stores and tattooing/piercing shops across the country for the last seventeen and a half years. She said they have produced millions of pieces of 316L steel used in piercings, and that the steel is 316L not ASTM standard because it is not produced in the United States. Ms. Nornberg commented the ASTM standard is only applied to American products and there are several regulatory bodies around the world that produce those same regulatory standards in each country. She stated the JIS organization in Japan, which is the largest steel producing country in the Asian basin where a lot of suppliers create the jewelry they sell in the United States. Ms. Nornberg commented that the JIS standards are very similar to the ASTM F standards as well as the AISI, which is the American Iron and Steel Institute. She said she had a chart she could show the Health District so it could see the numbers and understand the material makeup of 316L surgical implant grade steel is similar among all the bodies. Ms. Nornberg commented that while only the ASTM and ISO standards are included in the proposed regulations, then many suppliers around the country who have equivalent

360L steel are precluded that meet those standards and can provide certificates that their steel is 360L and not some lesser grade. She suggested the legislation be modified to include the other governing bodies because a significant amount of jewelry on the market is 360L standards that are almost the same from regulatory body to regulatory body. Mark Bergtholdt responded that she could send this information and any recommended changes that she would propose to bodyart@snhd.org. He thanked her for her comment.

8. <u>Body Art Card</u>: This section describes the various body art cards and the limitations of each card.

Webex Events attendee Albert Conant commented on the apprentice card. He commented their apprentice program includes teaching anyone in the program the entire process of tattoo and body piercing, which takes a very long time. Mr. Conant commented that they would lke to see the apprentice card length of time to be as the length of the mentor card. For instance, if it is a one-year card or a two-year card that's fine, but they don't believe the six-month period of time for apprentices is adequate.

Webex Events attendee Emily Rocha had a question regarding permanent makeup and apprentice cards, as she did not see anything in the regulations that required them to complete more than just brows. She commented she has seen a lot of people getting signed off for brows, and then they are doing lips and small tattoos and messing it up because all they learned was microblading. Ms. Rocha commented it is a manual tool, not a machine, and can be learned over time, but when it comes to an apprenticeship it should be required. Mark Bergtholdt thanked her for her comment.

Webex Events attendee Albert Conant commented that he would like to see a separate card for permanent makeup versus tattooing and body piercings. He said there is a different set of rules, standards, and processes for tattoo artists versus cosmetic tattooing or permanent makeup.

Karla Shoup requested attendees send in emails with specifics on the differences they would like to see between those apprenticeship programs, as it would be helpful.

Webex Events attendee Emily Rocha commented that she agreed with Albert regarding separation of cards but did not agree with his comment regarding permanent makeup artists not being artists. She commented different tools are used for permanent makeup versus tattoo artists. She agreed they should be separated. Ms. Rocha commented there should be some type of label on the card and that regulations would have to be figured out for permanent makeup artists to do tattoo. She commented there are a lot of tattoo artists that can do permanent makeup.

Danielle Greisen commented that she agreed with previous commenters regarding separating body art cards between tattoo artists and permanent makeup.

9. <u>Body Art Special Events</u>: This section describes the conditions and requirements for body art special events.

No comments provided by audience or Webex Events attendees on Section 9.

10. <u>Health Permit</u>: This section describes how a permit is issued, various exemptions, what information needs to be posted by the body art establishments, and what information needs to be shared with the health district.

No comments provided by audience or Webex Events attendees on Section 10.

11. <u>Enforcement</u>: This section describes how the health district will enforce these regulations.

Webex Events attendee Albert Conant commented that in the future a tattoo mentor be included on the board when working through these regulations instead of just this process. He commented this would help identify some of the problems that might be encountered and could speed up the adjustments to regulations.

12. <u>Permit Suspension:</u> This section describes what action can be taken and how the health district can suspend and revoke the permit.

No comments provided by audience or Webex Events attendees on Section 12.

13. <u>Necessary Legal Language:</u>

No comments provided by audience or Webex Events attendees on Section 13.

Mark Bergtholdt then opened the meeting to comments on any of the regulations.

Marko Greisen of Microbladers commented on Section 8, stating that he was going back to the apprenticeships and how many people can have. He stated their business was all about apprenticeships, with a curriculum and process, including almost 400 hours of classroom time through the six-month period. Mr. Greisen commented it doesn't make sense to have one and half students every single month. He stated they have a three thousand square foot facility built around education. Mr. Greisen commented that they are concerned about being limited to ten a month due to the market growing and having seven to ten people that want to enroll every month. He stated they don't take more than ten. Mr. Greisen said people come from all over the country to attend their program. He commented that he wanted it on record that their business is primarily around the mentorship and apprenticeship. He said the restricting them to one and a half people would shut down their business. Mark Bergtholdt asked if he was present for the first part of the meeting where they talked about raising the limit to fifteen per instructor. Mr. Greisen confirmed he did hear that and questioned if that would basically mean two and a half students could enroll in the program over the course of the six months. Mr. Bergtholdt said if there was one instructor.

Marko Greisen wanted to know how they would handle payroll if they had to add employees but didn't need them all the time due to changes in the market. He stated students rotate in and out of the classrooms and are never more than three to five apprentices at a time in the building in a day, as everyone is constantly rotating. He commented that they never have twenty to thirty people trying to learn under one person at a time. Mr. Greisen stated that three to five people can learn from one person at a time. He offered to show their curriculum privately to the health district to show what they do, as the program is very comprehensive and thorough. He commented that not everyone is operating the same way. Mr. Greisen said he has friends who are tattoo artists that teach their apprentices one-on-one and said it should be that way. He stated their program is a bit different and he wanted to make sure this was added to the comments.

Marko Greisen commented on a message to his wife left by Dante Merriweather regarding limiting microblading to the face. He stated that his wife is known for is her work on areolas, which is not part of the face. Mr. Greisen commented that she does that for a lot of people, a lot of time at no charge and it is something she is passionate about.

Ainjil Chipp commented that she had to step out of the meeting to renew her health card and missed a large part of it. She said she did catch the beginning of the meeting where some changes were announced as far as age requirements and such. Ms. Chipp commented that she wanted to go back

to the apprenticeships and asked if she had missed any comments regarding increasing the length of apprenticeships for tattooing. Mark Bergtholdt stated there was a comment and requested her comment on the matter. Ms. Chipp commented she still thinks it needs to be raised. She stated that based on Marko Greisen's comments, there is a big distinction between piercing apprenticeships, tattoo apprenticeships, and permanent makeup. Ms. Chipp questioned if it would be difficult to make it specific to each craft. She commented that tattoo apprenticeships should be limited to one or two at a time and a minimum one-year apprenticeship, but she would prefer two years. She stated she could not comment on piercing but felt whatever piercers feel is appropriate is fine.

Danielle Greisen commented that maybe the number of apprentices per journey artists need not be specified. She also commented on categorizing the differences between tattooing, permanent makeup, and microblading. Ms. Greisen stated the message she received from Dante Merriweather was that microblading would be specified as separate. She commented she would like to see microblading included with cosmetic tattooing as permanent makeup. Ms. Greisen stated microblading is a technique used with cosmetic tattooing, so it should be included with that category. She commented that microblading is done to either the hairline or eyebrows, while cosmetic tattooing is for lips, restoration of the areola, and other parts of the body.

Webex Events attendee Giselle Reyes commented she considers herself a permanent makeup/cosmetic tattoo artist, offering eyebrows, lips, and areolas. She asked if the plan was to separate permanent makeup from regular tattooing, how would areola work be classified since it is not on the face? Mark Bergtholdt thanked her for her comment. He stated the proposal was for microblading only to be isolated to the face; anything that was going to be a tattoo and was permanent in nature would need to fall under the tattoo requirements. Ms. Reyes thanked him. Mr. Bergtholdt then stated that if there was any language she would like to propose, she could send it to bodyart@snhd.org to be taken into consideration.

V. <u>SECOND PUBLIC COMMENTS:</u> A period devoted to comments by the general public, if any, on any subject, and discussion of those comments. Comments will be limited to five (5) minutes per speaker.

Marko Greisen commented that he would like to say thank you for working towards making it a safer industry. He stated that based on the comments made, maybe the health district could work with more of the businesses and artists and leverage them as business owners and operators to get more involved with proposed regulations to create a better, safer, more regulated industry.

Karla Shoup thanked everyone in attendance for their participation. She stated their feedback is very important as they are "on the front line" and their involvement was appreciated. Ms. Shoup said there would be one more workshop in the next week.

Erin O'Malley read a comment from Webex Attendee Albert Conant who suggested possibly having a tattoo school permit.

VI. SUMMARY and FINAL SNHD COMMENTS

This is the **second** of three scheduled public workshops. An additional workshop will be held on January 13, 1:00 p.m. The health district will take any comments about the proposed regulations and any data on the impact to businesses until January 31, 2022.

Mark Bergtholdt requested that if anyone felt these regulations would adversely affect or benefit a business, a business impact survey should be completed. He stated this is an opportunity to provide input to the health district on what impact these proposed changes will have on businesses. He said

the surveys were included in the e-mail sent out on Monday December 6 and were included when this agenda was sent. Mr. Bergtholdt stated attendees could also take a blank form as they left and return it by following the instructions at the bottom of the survey. Mr. Bergtholdt stated they will be making changes and hoped to have them published by the next workshop on January 13, 2022. He stated anyone who participated in the workshop would be notified once the changes were posted on the body art revision page.

Webex Events attendee Emily Rocha commented that her studio offers continuing education for established tattoo artists, in person and online. She asked if they would be required to have the journey or mentor card to continue providing this training to established artists. Mark Bergtholdt stated if the person already had a body art card, then no.

Mark Bergtholdt thanked everyone for their participation.

VII. ADJOURNMENT

Mark Bergtholdt adjourned the meeting at 9:56 a.m.

Tisha R. Black James L. Wadhams

C. Joseph Guild III J. Rusty Graf



Brigid M. Higgins Robert K. Sparks Jesse A. Wadhams Christopher V. Yergensen

> Sean Higgins (1966-2020)

January 5, 2021

<u>Sent via email:</u> bodyart@snhd.org <u>And Sent via mail</u> Southern Nevada Health District P.O. Box 3902 Las Vegas, NV 89127

Re: Proposed Body Art Regulations

Dear Mr. Scott Black,

Black & Wadhams has been retained by Koolsville Tattoos, LLC ("Koolsville") that owns and operates multiple tattoo and piercing shops here in Clark County, Nevada. After reviewing the proposed regulation changes and specifically the proposed metal requirement changes by the Southern Nevada Health District under Section 7, the changes in the regulations will significantly and financially affect all of the Body Art businesses that are located within the county.

The costs that are associated with acquiring F-138 as the standard jewelry are significantly more expensive to produce which results in a more expensive finished product. The new jewelry will cost several times that of the existing body art jewelry. Body Art businesses that receive any of their revenue through piercings will have a significant fiscal impact which could result in businesses and body art professionals having to close their doors or lose their employment.

The American Society for Testing and Materials ("ASTM") has set a standard for jewelry to be safe to use in your body for prolonged periods of time. Not only is the "F-138" steel more expensive to manufacture than "316L", which will result is less or negative revenue for those body art businesses, there is a fundamental lack of scientific evidence establishing that 316L steel has been harmful to patrons over the last three decades or that it fails to be safe in a human body for prolonged periods of time.

This public comment shall further stand as our request to the Southern Nevada Health District to provide the scientific support for the proposed change to the minimum steel requirements as it relates to long term care and safety of the patrons who are receiving piercings.

January 5, 2022 Page **2** of **2**

Simply, what is the metallurgical difference between "F-138" and "316L." It is the point of this public comment to state that there is no scientific difference between "F-138" and "316L."

Respectfully,

BLACK & WADHAMS

/s/ Rusty Graf

Rusty Graf, Esq.

JRG/jp

MEETING	Workshop for Proposed Body Art Regulations	DATE	1/6/2022	
FACILITATOR	Mark Bergtholdt	TIME	9:00 a.m.	
LOCATION	Red Rock Conference Room and virtual			



NO. NAME (PLEASE PRINT)	BUSINESS NAME/ PROGRAM/ AGENCY/ AFFILIATION	EMAIL	PHONE	SIGNATURE
Robert Generalis	Kodsville TAHOOS			
MACi Gronzales	Koolsville Trafforg			
Kalawelo Kaini				
MARTO GREISEW	MICROBIAGERS			
Angelique Chipp	Kayo Tattoo			
Canull Fulson	Prond 50			
CREAT Fernandez	trona 50			

1 Workshop for Proposed Body Art Regulation
2 Workshop for Proposed Body Art Regulation
3 Workshop for Proposed Body Art Regulation
4 Workshop for Proposed Body Art Regulation
5 Workshop for Proposed Body Art Regulation
6 Workshop for Proposed Body Art Regulation
7 Workshop for Proposed Body Art Regulation
8 Workshop for Proposed Body Art Regulation
9 Workshop for Proposed Body Art Regulation
10 Workshop for Proposed Body Art Regulation
11 Workshop for Proposed Body Art Regulation
12 Workshop for Proposed Body Art Regulation
13 Workshop for Proposed Body Art Regulation
14 Workshop for Proposed Body Art Regulation

Event Star Event Start Time	User Type	FirstN
January 6, 9 00 am San Francisco Time	Attendee	Kathy
January 6, 9 00 am San Francisco Time	Attendee	Giselle
January 6, 9 00 am San Francisco Time	Attendee	ALBER
January 6, 9 00 am San Francisco Time	Attendee	Karla
January 6, 9 00 am San Francisco Time	Attendee	Karla
January 6, 9 00 am San Francisco Time	Attendee	Hardli
January 6, 9 00 am San Francisco Time	Attendee	Josh
January 6, 9 00 am San Francisco Time	Attendee	dale
January 6, 9 00 am San Francisco Time	Attendee	Vanes
January 6, 9 00 am San Francisco Time	Attendee	Adolfo
January 6, 9 00 am San Francisco Time	Attendee	Mo
January 6, 9 00 am San Francisco Time	Attendee	Wend
January 6, 9 00 am San Francisco Time	Attendee	Benjai
January 6, 9 00 am San Francisco Time	Attendee	emily

	User Type	FirstName	LastName	Email
ime	Attendee	Kathy	Davis-Rees	
ime	Attendee	Giselle	Reyes	
ime	Attendee	ALBERT	CONANT	
ime	Attendee	Karla	Delarosa	
ime	Attendee	Karla	Delarosa	
ime	Attendee	Hardline	hemhill	
ime	Attendee	Josh	Peattie	
ime	Attendee	dale	Parris	
ime	Attendee	Vanessa	Nornberg-Barey	
ime	Attendee	Adolfo	Medina	
ime	Attendee	Mo	Fatu	
ime	Attendee	Wendy	Chester	
ime	Attendee	Benjamin	Lepore	
ime	Attendee	emily	rocha	

Invited	Registered	Attended	Join Time	Leave Time	Attendance Duration	Registration Date/Time
Yes	Yes	Yes	9:02 am San Francisco Time	9:56 am San Francisco Time	54.0 mins	December 30, 2021 2:07 pm San Francisco Time
Yes	Yes	Yes	9:06 am San Francisco Time	9:56 am San Francisco Time	50.0 mins	December 29, 2021 8:29 pm San Francisco Time
No	Yes	Yes	8:58 am San Francisco Time	9:56 am San Francisco Time	57.0 mins	January 6, 2022 8:56 am San Francisco Time
No	Yes	Yes	9:02 am San Francisco Time	9:09 am San Francisco Time	6.0 mins	January 6, 2022 8:59 am San Francisco Time
No	Yes	Yes	9:09 am San Francisco Time	9:17 am San Francisco Time	7.0 mins	January 6, 2022 8:59 am San Francisco Time
No	Yes	Yes	9:00 am San Francisco Time	9:56 am San Francisco Time	56.0 mins	January 6, 2022 8:58 am San Francisco Time
No	Yes	Yes	9:00 am San Francisco Time	9:56 am San Francisco Time	56.0 mins	January 6, 2022 8:59 am San Francisco Time
No	Yes	Yes	9:02 am San Francisco Time	9:56 am San Francisco Time	54.0 mins	January 6, 2022 9:01 am San Francisco Time
No	Yes	Yes	9:03 am San Francisco Time	9:56 am San Francisco Time	53.0 mins	January 5, 2022 1:49 pm San Francisco Time
No	Yes	Yes	9:05 am San Francisco Time	9:56 am San Francisco Time	50.0 mins	January 6, 2022 9:02 am San Francisco Time
No	Yes	Yes	9:03 am San Francisco Time	9:56 am San Francisco Time	53.0 mins	January 6, 2022 8:56 am San Francisco Time
No	Yes	Yes	8:54 am San Francisco Time	9:56 am San Francisco Time	61.0 mins	December 30, 2021 5:24 am San Francisco Time
No	Yes	Yes	9:05 am San Francisco Time	9:53 am San Francisco Time	48.0 mins	January 6, 2022 9:05 am San Francisco Time
No	Yes	Yes	8:39 am San Francisco Time	9:56 am San Francisco Time	77.0 mins	January 6, 2022 8:36 am San Francisco Time

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OPEN MEETING NOTICE NRS 241.020(3)(b)

I certify that I posted the Agenda for the meetings identified below *more than three working days prior* to the meeting in accordance with NRS 241.020 (3)(b):

SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

January 6, 2022 Thursday, 9:00 a.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:	Southern Nevada Health District		
Address of Location:	280 South Decatur Boulevard		
City, State, ZIP:	Las Vegas, NV 89107		
Date/Time of Posting:	12-29-21, 8:00 am.		
Printed Name:	Heather Haroff		
Signature:	Heather Hanoly		
	//		



Home (/) Print Shop v Informatics v OC OEDS v Human Resources v Travel Request (/travel-request)

OC Service Request Form

Your request has been sent.		
Ticket Number	618	
Project Name	Minutes from BA Regulations 1.06.22 Workshop	
Project Type	Website	
Project Description	Please add the attached meeting minutes for the proposed Body Art Regulations 1.06.2022 Workshop to Public Notices page and Body Art Revisions page.	
Project Deadlines	As soon as possible. Thank you.	

View Submitted Request (http://forms.cchd.org/#/61df630b5fb6f90654f761ed)

Submit Another Request (/oc/oc-service-request)

From: One Touch Mail Administrator

To: Erin O"Malley

SUCCESS: Your 4 page fax was successfully delivered to 702-267-1401 on 12/29/2021 09:39:26 Subject:

Date: Wednesday, December 29, 2021 9:43:12 AM

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OC Service Request Form

Your request has been sent.			
Ticket Number	588		
Project Name	Post Agenda for Jan 6, 2022 BA Regulations Workshop		
Project Type	Website		
Project Description	Post agenda for the January 6, 2022, public meeting regarding proposed changes to Body Art Regulations.		
Project Deadlines	12/29/2021		

View Submitted Request (http://forms.cchd.org/#/61cb5bb65fb6f926407abc82)

Submit Another Request (/oc/oc-service-request)

Body Art Regulation Revisions

Revision of Health District Regulations on Tattoo, Permanent Makeup and Piercing

The Southern Nevada Health District is proposing an update and revision of the two Health District regulations that govern the sanitation and safety of tattoo and piercing establishments. The Health District is proposing to combine the two regulations into one regulation that governs the sanitation and safety of body art establishments. Proposed revisions will reflect the Nevada State Regulations addressing invasive body art that can be found in Chapter 444 of the Nevada Administrative Code and improve the public health of Southern Nevada.

- . Existing Tattoo Regulations
- Existing Body Piercing Regulations
- Proposed Body Art Regulations PDF
- Comparison table of sections within existing and proposed regulations PDF

The Health District is seeking comments about these proposed changes at a series of listening sessions and workshops.

- August 5, 2021 Listening Session Agenda and Summary
- December 21, 2021 Workshop Agenda
- January 6, 2022 Workshop Agenda
- January 13, 2022 Workshop Agenda coming soon

Business Impact Survey

As part of the process, the Health District is required to complete a Small Business Impact Statement. The Health District is seeking your input on the impact these revisions may have on your facilities. Please complete and submit the survey in one of these ways:

- Complete and submit the survey online.
- Download, complete and submit the fillable survey :
 - By email: Send to bodyart@snhd.org.
 - By postal mail: Send to SNHD Body Art Program, PO Box 3902, Las Vegas, NV 89127.
 - o In person: Bring to the Environmental Health Office located at 333 N. Rancho Dr., Ste. 450, Las Vegas, NV 89106.

Additional Information

If you cannot attend any of the meetings, you can submit your comments in writing by sending an e-mail to **bodyart@snhd.org** or by postal mail to SNHD Body Art Program, PO Box 3902, Las Vegas, NV 89127.

The Business Impact Statement is scheduled to be heard at the regularly scheduled Southern Nevada District Board of Health meeting in February. The proposed regulations will be heard at the regularly scheduled Southern Nevada District Board of Health meeting in March.

Updated on: December 28, 2021

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SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

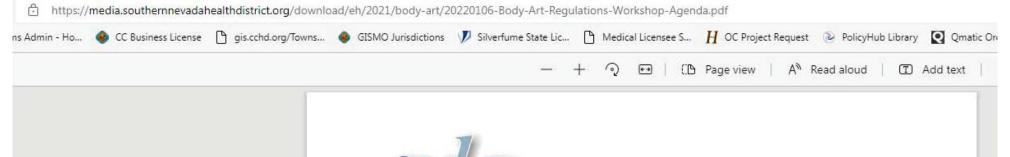
Taking place at:

December 21, 2021 Tuesday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:	Henderson City Hall	
Address of Location:	240 Water Street	_
City, State, ZIP:	Henderson, NV 89015-7227	_
Date/Time of Posting:	12/29/2021 1:15 pm	
Printed Name:	Alexandro Zavala alex zavala	
Signature:	alix zavala	
	Please return this certificate via FAX to: Special Programs Section, Southern Nevada Health District	

Thank you.

(702) 759-1486





NOTICE PUBLIC WORKSHOP AGENDA PROPOSED BODY ART REGULATIONS

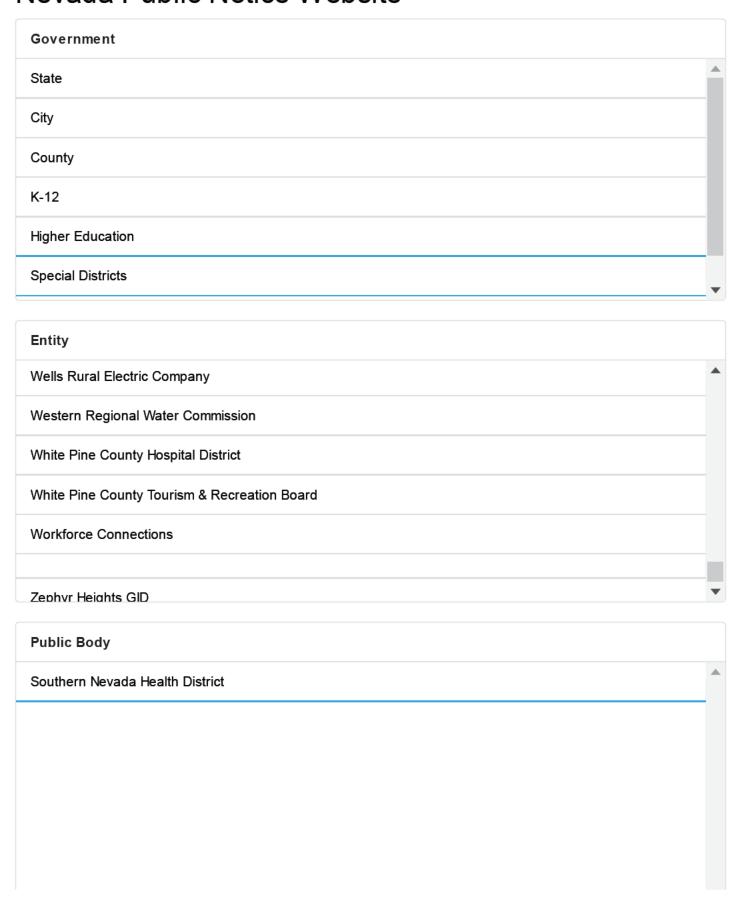
9:00 a.m., January 6, 2022 Southern Nevada Health District Red Rock Conference Room 280 S Decatur, Las Vegas, NV

To participate remotely either:

- · Use this Webex Event address for attendees:
- https://snhd.webex.com/snhd/onstage/g.php?MTID=e29a94940e33f1f65f3b4fc097ae14507
 This link is for public attendees only.
- · Call into the meeting:
 - o Dial (415) 655-0001 and
 - Use Access Code 2552 660 0289
- · For other governmental agencies who use video conferencing capability
 - The video address is 25526600289@snhd.webex.com

I.	Introductory Remarks	Introductory Remarks and Introduction of SNHD Staff by EH Staff
II.	Public Comments	A period devoted to comments by the general public about those items appearing on the agenda. Participants in the room can step up to the speaker's podium; clearly state your name and organization. Spell your last name for the record. If you are participating remotely please submit request to speak via Webex Raise Your Hand or Chat functions. Comments will be limited to five (5) minutes per speaker. If any member of the panel wishes to extend the length of a presentation, they can upon request of the speaker.
III.	Major Changes to Current Regulations	EH Staff
IV.	Public Comments Taken Regarding Proposed Southern	EH Staff
	Nevada Health District Regulations Governing the	Link to draft regulations: 20211129-Body-Art-Regs- WORKING-DRAFT pdf

Nevada Public Notice Website



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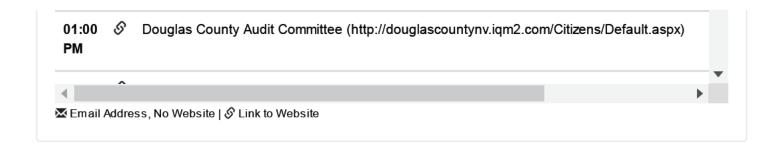
No	tice	Date Posted	Event Date	Time	Status	Туре
S	Proposed Body Art Regulations Workshop (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	1/6/2022	9:00 AM	Scheduled	Workshop
S	Proposed Body Art Regulations Workshop Agenda (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/29/2021	1/6/2022	9:00 AM	Scheduled	Workshop
S	So.N HPPG (https://snhd.webex.com/shnd/j.php? MTID=m3f366523ee2752e71bd7e4f6d5cd42e2)	12/28/2021	1/7/2022	1:00 PM	Scheduled	Meeting
S	Proposed Body Art Regulations Workshop (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	1/13/2022	1:00 PM	Scheduled	Workshop
છ	Proposed Body Art Regulations Business Impact (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	2/24/2022	9:00 AM	Scheduled	Hearing
S	Proposed Body Art Regulations (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	3/24/2022	9:00 AM	Scheduled	Hearing

Today's Meetings



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09:30 & Nevada Indian Commission (https://nevadaindiancommission.org/meetings-agendas-minutes/)



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- 1. Your name and email address.
- 2. The type of Government (i.e. State, City, County, K-12, Higher Education, Special Districts).
- 3. The area or "Entity" your Government type represents. For example, if your Government type is County, tell us which County i.e. Churchill, Clark, Douglas, etc.
- 4. The name of the Public Body (aka Committee/Council/Board) you will be posting for? Please list all of the Public Bodies you will be responsible to post notices for.
- 5. After you send the email with this information, you will receive an email or phone call back from the Department of Administration's Director's Office to confirm your account has been successfully enrolled. If you have questions, please email deptadmin@admin.nv.gov (mailto:deptadmin@admin.nv.gov).

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SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

December 21, 2021 Tuesday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:	Boulder City, City Hall		
Address of Location:	401 California Avenue		
City, State, ZIP:			
		## A TOTAL STORY OF THE STORY O	
Date/Time of Posting:	12/29/2021 @ 3:12 pm		
Printed Name:	Bridgette Rodriguez	pirkining	
Signature:	B. Rodrigue		
- AM			

Please return this certificate via FAX to: Special Programs Section, Southern Nevada Health District (702) 759-1486

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SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

December 21, 2021 Tuesday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:	Clark County Government Center	
Address of Location:	500 South Grand Central Parkway	
City, State, ZIP:	Las Vegas, NV 89155	
Date/Time of Posting:	12/29/21 11:30 a.m.	
Printed Name:	Cyndi Baroni	
Signature:	C Barani	

Please return this certificate via FAX to: Special Programs Section, Southern Nevada Health District (702) 759-1486

12/29/2021 9:40 AM FROM: SoNV Health District TO: +17023824803

Р.

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OPEN MEETING NO. 29 A 9:51

NRS 241.020(3)(b)

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SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

December 21, 2021 Tuesday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:	Las Vegas City Hall	•
Address of Location:	495 South Main Street	
City, State, ZIP:	Las Vegas, NV 89101	
Date/Time of Posting: 12-		_
Printed Name: 5m	NEG TORKINS	
Signature:	Please return this certificate via FAX to:	

Special Programs Section, Southern Nevada Health District (702) 759-1486

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Taking place at:

December 21, 2021 Tuesday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:	North Las Vegas City Hall
Address of Locatio	n: 2250 North Las Vegas Boulevard
City, State, ZIP:	North Las Vegas, NV 89030
Date/Time of Posti	ng: 12 29 2021 @ 10:05 AM
Printed Name:	1 Justine McDowell
Signature:	Ashiel Coull
	Diago return this partition to via FAY to:

Please return this certificate via FAX to: Special Programs Section, Southern Nevada Health District (702) 759-1486

ATTACHMENT H



NOTICE PUBLIC WORKSHOP AGENDA PROPOSED BODY ART REGULATIONS

1:00 p.m., January 13, 2022 Southern Nevada Health District Red Rock Conference Room 280 S Decatur, Las Vegas, NV

To participate remotely either:

- Use this Webex Event address for attendees:
- https://snhd.webex.com/snhd/onstage/g.php?MTID=e63fb2a67f29134cf11d1831a641bc027
- This link is for public attendees only.
- Call into the meeting:
 - o Dial (415) 655-0001 and
 - Use Access Code 2557 347 4142
- For other governmental agencies who use video conferencing capability
 - o The video address is 25573474142@snhd.webex.com

I.	Introductory Remarks	Introductory Remarks and Introduction of SNHD Staff
	-	by EH Staff
П.	Public Comments	A period devoted to comments by the general public about those items appearing on the agenda. Participants in the room can step up to the speaker's podium; clearly state your name and organization. Spell your last name for the record. If you are participating remotely please submit request to speak via Webex Raise Your Hand or Chat functions. Comments will be limited to five (5) minutes per speaker. If any member of the panel wishes to extend
		the length of a presentation, they can upon request of the speaker.
III.	Major Changes to Current Regulations	EH Staff
IV.	Public Comments Taken	EH Staff
	Regarding Proposed Southern Nevada Health District Regulations Governing the Sanitation and Safety of Body Art Establishments	Link to draft regulations: 20211129-Body-Art-Regs-WORKING-DRAFT.pdf (southernnevadahealthdistrict.org)
V.	Second Public Comment	A period devoted to comments by the general public, if



an	y, and discussion of those comments, about matters
re	levant to the Health District Board's jurisdiction will
be	held. Comments will be limited to five (5) minutes
pe	r speaker. If any member of the panel wishes to
ex	tend the length of a presentation, they can upon
re	quest of the speaker. See above for instructions for
su	bmitting public comment.

VI. Summary & Final SNHD Comments	Discussion of next steps by EH staff
VII. Adjournment	EH Staff

(cont.)

THIS AGENDA HAS BEEN POSTED IN THE MAIN LOBBY OF THE FOLLOWING LOCATIONS: 1) CLARK COUNTY GOVERNMENT CENTER, 500 S. Grand Central Parkway, Las Vegas, NV; 2) LAS VEGAS CITY HALL, 495 S. Main Street, Las Vegas, NV; 3) NORTH LAS VEGAS CITY HALL, 2250 N. Las Vegas Boulevard, North Las Vegas, NV; 4) HENDERSON CITY HALL, 200 Water Street, Henderson, NV; 5) BOULDER CITY, CITY HALL, 401 California Avenue, Boulder City, NV; 6) MESQUITE CITY HALL, 10 E. Mesquite Boulevard, Mesquite, NV; 7) SOUTHERN NEVADA HEALTH DISTRICT, 280 S. Decatur Boulevard, Las Vegas, NV; and 8) CLARK COUNTY COMMUNITY RESOURCE CENTER, 55 Civic Way, Laughlin, NV. This Agenda is also available on the Southern Nevada Health District Internet Website at https://www.southernnevadahealthdistrict.org and on the Nevada Public Notice website at https://www.southernnevadahealthdistrict.org and on the Nevada Public Notice website at https://www.southernnevadahealthdistrict.org and on the Nevada Public Notice website at https://notice.nv.gov. For copies of agenda and supporting materials, please contact Erin O'Malley at (702) 759-1626.

NOTE: Disabled members of the public who require special accommodations or assistance at the meetings are requested to notify Erin O'Malley, Administrative Assistant at the Southern Nevada Health District, by calling (702) 759-1626.



AMENDED

NOTICE PUBLIC WORKSHOP AGENDA PROPOSED BODY ART REGULATIONS

1:00 p.m., January 13, 2022
Southern Nevada Health District
Red Rock Conference Room
280 S Decatur, Las Vegas, NV
THIS MEETING WILL BE HELD VIRTUALY
THERE WILL BE NO IN PERSON OPTION

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III.	Major Changes to Current Regulations	EH Staff
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	Nevada Health District Regulations Governing the	Link to draft regulations: 20211129-Body-Art-Regs- WORKING-DRAFT.pdf



	Sanitation and Safety of Body Art Establishments	(southernnevadahealthdistrict.org)
V.	Second Public Comment	A period devoted to comments by the general public, if any, and discussion of those comments, about matters relevant to the Health District Board's jurisdiction will be held. Comments will be limited to five (5) minutes per speaker. If any member of the panel wishes to extend the length of a presentation, they can upon request of the speaker. See above for instructions for submitting public comment.
VI.	Summary & Final SNHD Comments	Discussion of next steps by EH staff
VII.	Adjournment	EH Staff

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MINUTES

SOUTHERN NEVADA HEALTH DISTRICT WORKSHOP FOR PROPOSED BODY ART **REGULATIONS**

January 13, 2022 – 1:00 p.m. Meeting was conducted virtually via Webex Events

STAFF PRESENT: Karla Shoup - Consumer Health Programs Manager

Mark Bergtholdt – Supervisor, Special Programs

Dante Merriweather - Senior Environmental Health Specialist, Special Programs

Michelle Goodsell – Environmental Health Specialist II, Special Programs James Muth - Environmental Health Specialist II, Special Programs Erin O'Malley – Administrative Assistant II, Special Programs

ALSO PRESENT: (via Webex Events) Albert Conant, Cristian Ogando, Emily Eichorn, Cesia De León, Lydia Dudoit, Josh Peattie, Rebecca Bryant, Karla Delarosa, Yhara Rivera, Dave L., Miguel Zavala, Sean Dowdell, Adolfo Medina, Tamara Ferrigno, Mari Gonzales, Emily Rocha, Benjamin Lepore, Benaiah Poindexter, Rusty Graf, Anessa Moore, Nilson Corea, Tattoos By Monk, Call-in User 4 (audio only), Call-in User 5

(audio only)

I. INTRODUCTORY REMARKS and INTRODUCTION OF SNHD STAFF

Mark Bergtholdt introduced the SNHD staff members attending the meeting. He called the meeting to order at 1:06 p.m. and stated the name and email address of Webex Events attendees were collected when they entered the meeting. He

Mark Bergtholdt provided the website address, www.SNHD.info/bodyartregs, where the supporting documents and agenda for the meeting are posted and reviewed the agenda with the attendees.

II. 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.

Mark Bergtholdt opened the First Public Comment portion of the meeting and requested attendees raise their hand (via Webex) if they would like to participate. Seeing no one, he closed the First Public Comment portion of the workshop.

III. MAJOR CHANGES TO CURRENT REGULATIONS

Dante Merriweather presented an overview of the changes proposed for the regulations. These revisions were made after a review of the Nevada State Administrative Code, the National Environmental Health Association Body Art Model Code and input received from the public.

We are proposing numerous clarifications. More than fifty redundant or obsolete definitions have been removed. Language proposing the granting of waivers of the regulations has been included. There are proposed changes to the mandatory language within the consent forms, and the imminent health hazards section of the regulations has been streamlined to include consolidated instructions for corrective action.

The largest proposed change to the two regulations for Tattooing and Body Piercing is combining them into one set of Body Art Regulations. We are also proposing changes to the body art card that will set a minimum level of experience for an artist before they can take on any apprentices. The proposed regulations will also limit the number of apprentices that an artist can have at any one time.

From an operational standpoint, the hand sink requirements have been more clearly defined, including a clarification that hand sinks must be permanently plumbed to potable water and sanitary sewer. The hand sinks must be a minimum size and there must be at least one hand sink for every four workstations, located no more than fifteen feet from a procedure table. Any facility in compliance with the current hand sink requirements are fine until a change of ownership occurs or a remodel of the facility.

The minimum size of a workstation has been decreased from one hundred square feet to eighty square feet.

Also proposed are detailed requirements for an equipment processing room for any facility that uses reusable equipment that needs to be sterilized. Additionally, the minimum testing for the sterilizer has been increased from once a year to monthly. This is the minimum requirement adopted by the state. Each sterile pack must include a class five or six indicator to indicate proper sterilization conditions reached the surface of the equipment. For facilities that use reusable equipment, an ultrasonic cleaner must be used on equipment prior to processing the equipment in a sterilizer.

Finally, there is a proposal to set conditions for expired equipment that can be stored within the facility. These conditions include allowing the equipment to be used only for practice when it is properly labeled and stored. There are also proposed minimum requirements for jewelry and improved instructions for handling solid waste and biohazardous waste.

These changes have made the Regulations more concise, reducing the number of pages from 67 to 59 pages.

This is a broad overview of the main items that have been altered, expanded, or deleted in this revision. All concerned parties are strongly urged to closely read and review the proposed revisions in a timely manner and present any concerns to the Southern Nevada Health District as soon as possible.

Mark Bergtholdt stated that due to the previous two workshops, some draft language has been added to the proposed regulations. He emphasized that he could not make promises that the

drafted language would be in the final regulations. Mr. Bergtholdt said he would read out the draft language when the appropriate section was introduced for comment. He stated comments would be taken by section and requested that anyone who had a comment raise their hand (via Webex).

IV. PUBLIC COMMENTS TAKEN REGARDING PROPOSED SOUTHERN NEVADA HEALTH DISTRICT REGULATIONS GOVERNING THE SANITATION AND SAFETY OF BODY ART ESTABLISHMENTS

1. <u>Definitions:</u> This section is where all the definitions are. Words that are defined in these Regulations will appear in **bold text through the Regulations**.

Mark Bergtholdt stated some definition changes were under consideration, including the word "mentor" to replace "journey" in Section 1.23. He stated the Health District is considering adding "microblading," which means a technique in which incisions are made into the dermis using a manual tool equipped with needles. The incisions are then filled with pigment to mimic natural hair. Microblading is limited to parts of the face and is meant to be semi-permanent. Mr. Bergtholdt stated under consideration is a definition of "microblading artist" to be added, meaning a person issued a microblading card under the provision of these regulations set forth in Section 8. A "microblading card" is under consideration, which means a card issued by the Health Authority to a person who is limited to practicing microblading. He then asked for any comments on Section 1.

Emily Rocha from Seven Tattoo Studio commented that she was seeing public chat disabled in her app. Erin O'Malley and Mark Bergtholdt responded that comments were being received from other attendees. Ms. Rocha stated she had a question regarding the comment about microblading. She asked if someone has a body art card, would there be a separate one for people only performing microblading? And if the artist does all types of permanent makeup, will there be something on the card stating they can do microblading?

Rebecca Bryant from Permanent Makeup by Rebecca stated she had a question regarding microblading the definition of it being semi-permanent. She stated it was her understanding that all tattooing is permanent, and the pigment particles stay in the skin for a lifetime, even though they may not be visible. Ms. Bryant questioned why microblading is being labeled as semi-permanent. Mark Bergtholdt stated it is the Health District's understanding that it only goes into a layer of skin that is sloughed off, so it does fade over time. Ms. Bryant asked if she could discuss the issue at a future time, and Mr. Bergtholdt asked for her input. She stated microblading does go into the dermis and dermis live cells that don't all exfoliate. She said the epidermis exfoliates, but what is left is in the skin. Mr. Bergtholdt stated the Health District would take this into consideration.

Albert Conant commented that in the previous definition of "journey" it had journey as a person who had a body art card for four or more years. He stated he believed the last time this was discussed the time period was moved to six years. Mr. Conant requested clarification on the proposed language. Mark Bergtholdt commented the Health District was proposing no changes, which is in Section 8.

Karla Calero stated she was going to comment, but her question had already been answered.

2. <u>Imminent Health Hazards</u>: These are the conditions that require immediate closure of a body art establishment.

Emily Eichorn stated she wanted to comment on something a previous participant had asked about pigments being considered semi-permanent for microblading versus tattooing. She said it was her understanding from research she had done that the difference is not just the level the pigment reaches, but that semi-permanent does not have metals while permanent tattooing has metals in the pigments used. Ms. Eichorn asked if this research was correct. Mark Bergtholdt thanked her for the information she provided.

Hearing no comments on Section 2, Mark Bergtholdt moved to Section 3.

3. <u>Facilities and Equipment</u>: This section describes the minimum requirements for a body art establishment.

Mark Bergtholdt stated the Health District is considering adding 3.13.2.8, which states a sterilizer can be kept at a workstation if the sterilizer does not require any water supply or sewage connections, and the reusable equipment and/or jewelry is cleaned in a procedure room, stored in a manner that prevents contamination, is sterilized unwrapped, and used immediately after sterilizing.

Sean Dowdell commented that he had two questions, one pertaining to the sterilizers and workstations. He commented that the top of the line sterilizer in the industry is called a statim G4 and G6000. Mr. Dowdell stated his shop uses the G4s, which require a water source, and they are currently hooked up in workstations for immediate use. He said when sterilizing jewelry or needles, it sterilizes in three and a half minutes, uses exhaust through the P trap in the plumbing, and then the jewelry and needles are used right away. Mr. Dowdell commented he thinks the language on that should be changed to say if it requires a water source that it is hooked up to the water source and still viable.

Sean Dowdell commented that his second question on Section 3 was regarding hand sinks. He commented that he is trying to figure out why, with all the universal precautions being implemented to make things more stringent, the Health District is lessening the requirement for asepsis on hand sinks — one per four stations when the rule has been one per station up to this point. He commented he believes this is a step backwards with asepsis in the studio environment for cleanliness. Mark Bergtholdt thanked him for his comment and stated it would be taken into consideration. He responded to the statim comment by saying if the statim is connected to water and sewer then a waiver could be applied for to install it within the facility. Mr. Bergtholdt stated all the ones he had seen had their own tank and did not have any waste associated with them. Mr. Dowdell said it comes with an extra cost in order to eliminate the self-serve tank and can be hooked into plumbing. He said it is a cleaner, more viable sterilizer used in that fashion. Mr. Bergtholdt thanked him again for his comment and said a solution will be available if the regulations are approved as proposed.

4. <u>General Sanitation</u>: This section describes the minimum sanitation requirements for a body art establishment.

Mark Bergtholdt stated the only thing the Health District is suggesting be changed is allowing the sterilizer to be at the workstation, and equipment in peel-packs or heat-sealed plastic can be sterilized at a permitted body art establishment, which broadens where packs can be sterilized.

Emily Eichorn commented to ask if the Health District was making sterilizers mandatory or would still allow single-use products. Mark Bergtholdt explained that the regulations have

provisions stating that if single-use products are used exclusively, a sterilizer will not be required.

5. Responsible persons and other body art establishment employees: This section describes the responsibilities of each person working in a body art establishment.

Mark Bergtholdt stated the Health District is considering clarifying Section 5.1.3 so that the responsible person will be held accountable for compliance with all requirements of these regulations and nothing else. He said Section 5.1.3 currently includes all the other laws and regulations for facilities.

Emily Rocha commented on the responsible person section and said their studio is open late so she would need a few responsible persons. She asked if she would need to update the Health District each time the responsible persons changed. Mark Bergtholdt replied that the Health District will not keep track of the responsible person at the facility but said when the Health District inspects the facility it is expected the responsible person will speak up and be able to answer questions.

Miguel Zavala of Stedfast Tattoo Parlor commented on the responsible person section, stating many shops are not open nine to five like the Health District and asked if the responsible person must have the Health District's hours. He asked how the shop should correlate the responsible person with a health inspection when they do not know when an inspection will occur. Mark Bergtholdt stated that any time the business is open, a person must be designated as a responsible person. Mr. Zavala asked if that meant they needed multiple responsible people, and Mr. Bergtholdt stated they did. Mr. Bergtholdt said a responsible person is also needed for code enforcement or other inspections, and a person is needed who will step up and say they know the answers to the questions that will be asked.

6. <u>Patrons</u>: This section describes the minimum requirements for a patron and what they must be advised.

Mark Bergtholdt stated the Health District is considering adding Section 6.1.5 that states body art establishments are prohibited from applying body art not specifically exempted by these regulations to persons less than fourteen years old.

Benjamin Lepore commented that he would like to talk about Section 6.3.6.5 and 6.3.6.6, the requirement for all expiration date and batch and/or lot number of all sterilized equipment used or pre-sterilized that will be used and applied under the skin, and the expiration date, brand, color, batch and/or lot number of all inks, dyes, and pigments used in the body art procedure. He commented that he would like to see these removed and believes these are "overkill" or an "overstretch" of what needs to be recorded on the release forms. Mr. Lepore commented this will clog up the system in a high-volume shop and that there isn't enough evidence of infections and issues due to not recording these things. Mark Bergtholdt thanked him for his comment.

Emily Rocha commented that she had a question regarding 6.3.5 which requires questions regarding the patron's condition. She asked if this is something to add to consent forms and how the Health District would like industry to implement asking the client if they've eaten in the last four hours and questions like that. Mark Bergtholdt stated these are clarifications on what should be asked on a consent form, improving upon current regulations. Ms. Rocha commented she has sometimes had to eject a client because they tell her they have not been drinking when clearly, they have been. She asked if this section is to cover industry legally if,

for instance, the client is under the influence but not showing it. She requested additional clarification on the patron evaluation section. Mr. Bergtholdt said it could be used that way and suggested she speak with her attorney about whether somebody could be excluded based on how they answer a question. He stated this is a conversation that can be had with a patron to identify contraindications that would not permit somebody to receive a tattoo.

Emily Rocha commented that if they are having this conversation with a client and asking questions, a lot of which are already on the consent forms - besides if they have eaten in the last four hours – she would like to know how the Health District would like this included in the consent forms. She asked if this could just be a yes or no, or if specific verbiage is required by the Health District. Ms. Rocha stated she does permanent makeup and her consent forms are yes and no, but the tattoo artists have clients initial, so she wanted to see if the Health District had any specific requirements. Mark Bergtholdt stated as long as the questions are on the consent forms, it would be sufficient.

Albert Conant commented that he had concerns with government-issued identification. He said when they have minors come in with their parent and their birth certificate, generally the only identification most minors have is a school photo i.d. He asked if that was acceptable, because if not they would have to refuse a lot of clients and lose business. Mark Bergtholdt stated that would be acceptable.

Erin O'Malley read a comment from Lydia Dudoit into the record, as she did not have a microphone. Ms. Dudoit commented that recording dates and lot numbers of disposables and ink, et cetera, increases the risk of cross contamination when more things are brought in and out of the station like paperwork, et cetera, to write that down. Ms. O'Malley asked if anything needed to be added to the comment and Ms. Dudoit indicated not. Mark Bergtholdt thanked her for her comment.

7. <u>Body Art Procedures</u>: This section describes the minimum steps and conditions of any body art procedure.

Mark Bergtholdt said the Health District is considering adding this statement to Section 7.4.7, "All jewelry used for initial piercings must be obtained from a reputable jewelry supplier. All custom manufactured jewelry used in initial piercings must meet the following standards:" and then it goes on to 7.4.7.1.

Mark Bergtholdt said the Health District is also considering a change to 7.4.7.6, "All threaded or press-fit jewelry used for initial piercings must not expose any threads or other crevices after final assembly."

Mark Bergtholdt said for jewelry receipts the Health District is rolling the material certificate information into the receipt. He said the Health District is suggesting, "Purchase records for jewelry purchased for initial piercings must: be maintained on premises for a minimum of ninety days; be maintained for a period of two years; be available upon request, and include the number and type of jewelry purchased, list the name of the manufacturer of the jewelry purchased, list the country of origin of the jewelry, list the lot number or other information indicating the location, date, and time of manufacturing of the jewelry." Mr. Bergtholdt stated this is all included in Section 7.4.8, and Section 7.4.9 will be deleted – material certificate.

Rebecca Bryant commented on the previous section of the regulations and asked if the Health District will provide a list of blood centers that would disqualify patrons from having a procedure done. She stated they have everything from heart medications to vitamin E that

could possibly affect bleeding in a procedure. Ms. Bryant commented that she wondered if the Health Department could set a protocol for this, instead of her advising her client to ask their doctor if they can have the procedure done due to the medication they are taking. Mark Bergtholdt stated the Health District can look into that but pointed out heparin and warfarin are identified in the regulations, as well as antiplatelet drugs. He said most people who are on anticoagulants probably know they are. Karla Shoup stated she believes the purpose of that question (on client forms) is also to function as a "heads up" for the artist that there may be more bleeding during the procedure so the artist can be prepared.

Vanessa Nornberg commented that she was representing Metal Mafia and requested clarification on what is meant by reputable jewelry supplier. Mark Bergtholdt stated common sense decisions on this. He said anybody who could order and point to the company from which they bought it would be considered a reputable supplier. Mr. Bergtholdt stated Metal Mafia would be considered a reputable supplier. Ms. Nornberg commented that she wondered if guidelines would be offered by the Health District to people purchasing to make sure they are finding reputable suppliers and "gating" this, if needed. Mr. Bergtholdt replied that the Health District doesn't have guidelines and is using common sense definitions of "reputable." He said this would not include someone making jewelry in their garage and boxing it.

Sean Dowdell representing Club Tattoo commented he had a two-part question. He referred to Vanessa's question and commented it seemed a big ambiguous regarding jewelry suppliers. Mr. Dowdell asked how the Health District would react when a studio was found piercing with externally threaded jewelry or using non-ASTM F138 or 136 implant-grade materials, and what would happen to studios in these situations moving forward. Mark Bergtholdt responded that the Health District is suggesting that they can use non-ASTM standard items if purchased from a reputable firm. Mr. Dowdell stated there are several shops piercing with externally threaded jewelry that is not ASTM F136 or 138 and asked what would happen to those companies. Mr. Bergtholdt stated if it was sourced from reputable supplies, there would be no changes. Karla Shoup stated that with these regulations, there would be a one-year transition. Mr. Dowdell commented that in the current proposed regulations it states ATSM F138 and F136 is a new standard and internally tapped jewelry in the guidelines. He asked what would happen to studios not using those materials and internally threaded jewelry. Mr. Bergtholdt stated it was taken under advisement from the previous workshops and there are drafts to some proposed regulations that the Health District is considering. He stated he read those regulations out to the attendees. Mr. Dowdell stated he agreed with these regulations, but that thirty to forty percent of the studios do not currently abide by them and that there would have to be a follow-through to make sure they are either no longer piercing or using. He said the reputable distributorships make little to no sense unless their materials usage follows the guidelines. Mr. Bergtholdt thanked him for his comment and stated it would be taken under consideration.

Rebecca Bryant and Erin O'Malley reviewed how to "raise a hand" in Webex and how to "chat."

Sean Dowdell of Club Tattoo commented regarding Section 7.16.1, under "The following acts are expressly prohibited by the Health Authority in body art" item 7.16.1.8 single point piercing should be struck. He commented these are antiquated thoughts, as single point piercings have been around for fifteen years at this point and is a procedure he invented. Mr. Dowdell stated it has been proven safe and has been around a long time with long-standing standards in place. He commented it makes no sense to exclude (sic) it from items such as skin peeling, cutting, branding and that single point piercing is piercing with one hole instead

of two. Mr. Dowdell commented that it does not belong in this section and should be removed. Mark Bergtholdt thanked him for his comment.

Erin O'Malley announced to all attendees that anyone using an iPad could access the "chat" function in Webex with the "smiley face" icon at the bottom of their screen.

8. <u>Body Art Card</u>: This section describes the various body art cards and the limitations of each card.

Mark Bergtholdt commented that the Health District is considering some changes to the section. He stated a person limiting their practice to microblading only parts of the face may apply for a microblading card, a mentor can take up to fifteen microblading apprentices at any one time, and a person with a body art card can take up to five apprentices at any one time.

Albert Conant commented on Section 8.3.1 which mentions American Red Cross and PDT. He commented that his shop is a member of the Alliance of Professional Tattooists and a lot of their training is received through them. Mr. Conant commented he wanted to see more than American Red Cross indicated in the section, because they go to conferences and receive extra training from the Alliance of Professional Tattooists. He commented that the section talks about six months of training and that previously it was twelve months. Mr. Conant asked if they would be required to have that training every six months, or if he was misreading. Mark Bergtholdt stated it was a slight "misread," as it was meant for a person who is new needing a minimum of six months of training.

Emily Rocha commented on body art cards for apprentices training for permanent makeup. She commented she would like the wording to be more specific regarding the six-month requirement. Ms. Rocha stated her apprenticeships are two years, but someone trying to apprentice with her was expelled from an apprenticeship at a different location and was trying to collect a letter from the previous location and then complete the remaining time with her. She commented she would like it stated that if an apprentice doesn't complete an apprenticeship they have to start over again, as she did not believe proper training can be done if collecting a month here and there. Mark Bergtholdt thanked her for her comment.

Erin O'Malley read a comment from Lydia Dudoit into the record, as she did not have a microphone. Ms. Dudoit commented to request the Health District consider changing it to permanent makeup artist on one card and body art artists on a different card, rather than just microblading. She commented that permanent makeup and microblading have the same healing, aftercare, and procedure prep. Ms. Dudoit stated she does both permanent makeup and body art.

Albert Conant commented to agree with separate designations on the card for permanent makeup versus body art. He commented he also could see the apprenticeship program for body art lasting at least two years in many cases, so the idea that somebody could complete it in six months is "kind of crazy." Mark Bergtholdt thanked him for his comment.

Erin O'Malley read a comment from Lydia Dudoit into the record, as she did not have a microphone. Ms. Dudoit commented that if the Health District did not differentiate permanent makeup and body art, then unconstrained permanent makeup artists would be allowed to perform body art without proper training, and vice versa. Mark Bergtholdt thanked her for her comment.

9. <u>Body Art Special Events</u>: This section describes the conditions and requirements for body art special events.

Emily Rocha commented that she had a question on this section, as it was discussed in a previous section that stations were going from one hundred square feet to eighty. She asked if the same would apply for special events. Mark Bergtholdt stated that special events currently allow two artists in one hundred square feet, and no changes were proposed.

10. <u>Health Permit</u>: This section describes how a permit is issued, various exemptions, what information needs to be posted by the body art establishments, and what information needs to be shared with the health district.

Emily Eichorn commented to ask if any participants could explain the difference between body art and permanent makeup. Mark Bergtholdt stated that generally permanent makeup uses the same techniques as tattoo or other body art, it's just usually limited to the face and areola. He said microblading is a technique that is a sub-part of permanent makeup.

Rebecca Bryant commented there is another fundamental difference between permanent makeup and body art; in permanent makeup the artist has to understand skin tone - color mixing to look natural on the skin – as opposed to using certain chosen colors and not taking skin tone so much into account when creating a certain effect. Mark Bergtholdt thanked her for her comment.

11. <u>Enforcement</u>: This section describes how the health district will enforce these regulations.

Hearing no comments on Section 11, Mark Bergtholdt moved to Section 12.

12. <u>Permit Suspension:</u> This section describes what action can be taken and how the health district can suspend and revoke the permit.

Mark Bergtholdt stated he would combine comments for Section 12 and 13.

13. Necessary Legal Language:

Hearing no comments on Section 12 or 13, Mark Bergtholdt stated he would wait two to three minutes for anyone to provide comments on any section of the regulations. He stated that if anyone had a comment, they could raise their hand or comment in the chat for Erin O'Malley to call on them.

Rebecca Bryant of Permanent Makeup by Rebecca commented that she was not able to respond to the attendee who mentioned the difference in microblading being content of the pigment. She stated semi-permanent and permanent actually refer to the depth at which the pigment is inserted into the skin, not the quality of pigment.

Tamara Ferrigno of MM Ink commented she had seen mention of an apprentice card, which is self-explanatory, body art card, and journey body art. She requested clarification on the difference between the body art card and the journey body art card. Mark Bergtholdt stated the journey/mentor body art card allows the artist to accept apprentices, while a body art card cannot take apprentices. The journey body art card is requested by a card holder who has at least four years' experience. Ms. Ferrigno asked how she could receive one of those cards

since she has been in the industry for a while. Mr. Bergtholdt stated they would be issued when the regulations come into effect, upon request.

Dave Lepenske asked about the regulation regarding having a bio waste can and sharps container in the stations. Mark Bergtholdt stated there is no requirement to have a biohazardous waste can in the procedure area unless someone will be producing biohazardous waste above and beyond the sharps.

Rebecca Bryant commented that she would like clarification regarding hand sinks, and the two-section sink that is required, as well as the separate room for cleaning and sterilization. She asked if there needs to be a separate room for cleaning and sterilization, or if it can be done in the treatment room. Ms. Bryant also asked why the two-section sink, and if it is something that is going to be implemented. Mark Bergtholdt stated any currently operating facility would not be required to complete any construction to come into compliance with the facility construction requirements. He said the two-compartment sink is used to wash and rinse the reusable equipment, and if a facility uses all disposables the Health District could consider there is no need for a processing room.

Emily Rocha commented that she would like the Health District to allow a studio to apply for a visiting artist who is coming to town. She provided an example of a visiting artist who did not speak English and said they may not understand the wording. Ms. Rocha asked if the studio would be allowed to apply for the visiting artist. Mark Bergtholdt stated that could be considered.

Emily Rocha commented with a question regarding lot numbers. She stated somebody commented it would be too much work to record each individual color, and it could possibly cause cross-contamination. Ms. Rocha said her studio mostly handles black and gray realism and asked if an artist usually uses a certain color, if they can default the records for certain times periods when the ink is received. Mark Bergtholdt stated he could not comment on how this will come out, but he imagined if they had something they would default to and probably put into some sort of electronic form, that would be acceptable to the Health District. He clarified that what the Health District is looking for is a way to trace back material to where it came from if somebody contracted something. Mr. Bergtholdt said that was the key to having that information available.

Erin O'Malley read a comment from Lydia Dudoit into the record, as she did not have a microphone. Ms. Dudoit asked if digital release forms or an app could be used if it had all the required information. Mark Bergtholdt stated yes.

Seeing no further comments, Mark Bergtholdt moved to the next agenda item.

V. <u>SECOND PUBLIC COMMENTS:</u> A period devoted to comments by the general public, if any, on any subject, and discussion of those comments. Comments will be limited to five (5) minutes per speaker.

Seeing no comments, Mark Bergtholdt closed the Second Public Comments portion of the workshop.

VI. SUMMARY and FINAL SNHD COMMENTS

Mark Bergtholdt stated this is the third and final scheduled public workshop. He said an additional workshop may be held in February. Mr. Bergtholdt stated the Health District will

take any comments about the proposed regulations and any data on the impact to businesses until January 31, 2022.

Mark Bergtholdt requested that attendees please complete a business impact survey if they had not already done so. He stated the survey could be found on the health district website where the agenda was located – <u>SNHD.info/bodyartregs</u>. Mr. Bergtholdt said the business impact survey is used to determine the impact on businesses and it is important to turn that in based on the regulations as they stand now. He said the surveys were included in the e-mail sent with the agenda.

Mark Bergtholdt thanked everyone for their participation.

VII. ADJOURNMENT

Mark Bergtholdt adjourned the meeting at 2:25 p.m.

	Meeting Name	Meeting Start Time	Meeting End Time	Name	Attendee Email	Join Time	Leave Time	Attendance Duration	Connection Type
1	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	ALBERT CONANT		2022-01-13 12:51:25	2022-01-13 14:24:16	93 mins	Desktop app
2	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	Cristian Ogando		2022-01-13 12:52:33	2022-01-13 14:24:35	93 mins	Mobile app
3	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	Emily Eichorn		2022-01-13 12:52:50	2022-01-13 14:24:35	92 mins	Desktop app
4	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	Cesia De León		2022-01-13 12:53:53	2022-01-13 14:24:35	91 mins	Mobile app
5	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	Lydia Dudoit		2022-01-13 12:56:58	2022-01-13 14:24:22	88 mins	Desktop app
6	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	Josh Peattie		2022-01-13 12:58:16	2022-01-13 14:24:21	87 mins	Desktop app
7	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	Rebecca Bryant		2022-01-13 13:00:21	2022-01-13 14:24:30	85 mins	Mobile app
8	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	Karla Delarosa		2022-01-13 13:00:23	2022-01-13 14:24:20	84 mins	Mobile app
9	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	Yhara Rivera		2022-01-13 13:02:08	2022-01-13 14:24:35	83 mins	Mobile app
10	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	Call-in User_4		2022-01-13 13:03:09	2022-01-13 14:24:30	82 mins	Other app
11	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	Dave L		2022-01-13 13:04:50	2022-01-13 14:24:21	80 mins	Mobile app
12	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	Miguel Zavala		2022-01-13 12:56:24	2022-01-13 14:14:45	79 mins	Mobile app
13	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	sean dowdell		2022-01-13 12:59:59	2022-01-13 14:16:06	77 mins	Mobile app
14	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	sean dowdell		2022-01-13 12:59:59	2022-01-13 14:16:06	77 mins	Other app
15	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	sean dowdell		2022-01-13 12:59:59	2022-01-13 14:16:06	77 mins	Mobile app
16	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	sean dowdell		2022-01-13 12:59:59	2022-01-13 14:16:06	77 mins	Mobile app
17	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	sean dowdell		2022-01-13 12:59:59	2022-01-13 14:16:06	77 mins	Mobile app
18	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	sean dowdell		2022-01-13 12:59:59	2022-01-13 14:16:06	77 mins	Mobile app
19	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	sean dowdell		2022-01-13 12:59:59	2022-01-13 14:16:06	77 mins	Mobile app
20	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	sean dowdell		2022-01-13 12:59:59	2022-01-13 14:16:06	77 mins	Mobile app
21	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	sean dowdell		2022-01-13 12:59:59	2022-01-13 14:16:06	77 mins	Mobile app
22	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	sean dowdell		2022-01-13 12:59:59	2022-01-13 14:16:06	77 mins	Mobile app
23	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	sean dowdell		2022-01-13 12:59:59	2022-01-13 14:16:06	77 mins	Mobile app
24	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	sean dowdell		2022-01-13 12:59:59	2022-01-13 14:16:06	77 mins	Mobile app
25	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	sean dowdell		2022-01-13 12:59:59	2022-01-13 14:16:06	77 mins	Mobile app
26	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	Adolfo Medina			2022-01-13 14:24:35		Mobile app
27	Workshop for Proposed Body Art Regulations			_			2022-01-13 14:24:30		Other app
28	Workshop for Proposed Body Art Regulations			· ·			2022-01-13 14:24:35		Mobile app
29	Workshop for Proposed Body Art Regulations		2022-01-13 16:00:00				2022-01-13 14:24:35		Mobile app
30	Workshop for Proposed Body Art Regulations		2022-01-13 16:00:00	•			2022-01-13 13:51:21		Mobile app
31	Workshop for Proposed Body Art Regulations			Valdez tattoosbymonk@gmail.com			2022-01-13 14:24:35		Mobile app
32	Workshop for Proposed Body Art Regulations			Valdez tattoosbymonk@gmail.com			2022-01-13 14:24:35		Other app
33	Workshop for Proposed Body Art Regulations						2022-01-13 13:43:59		Mobile app
34	Workshop for Proposed Body Art Regulations			•			2022-01-13 14:24:20		Mobile app
35	Workshop for Proposed Body Art Regulations		2022-01-13 16:00:00	•			2022-01-13 14:24:16		Mobile app
36	Workshop for Proposed Body Art Regulations		2022-01-13 16:00:00				2022-01-13 13:46:14		Mobile app
37	Workshop for Proposed Body Art Regulations		2022-01-13 16:00:00	, 0			2022-01-13 14:02:45		Desktop app
38	Workshop for Proposed Body Art Regulations						2022-01-13 13:05:19		Mobile app
39	Workshop for Proposed Body Art Regulations	2022-01-13 13:00:00	2022-01-13 16:00:00	Nilson Corea		2022-01-13 13:52:42	2022-01-13 13:52:52	1 mins	Mobile app

From: Sean Dowdell
To: Body Art

Subject: Re: Agenda - Body Art Regulations Workshop February 4, 2022, 11:00 a.m. - Virtual Only (No In Person Option)

Date: Thursday, January 20, 2022 1:12:06 PM

It looks like your team listened to nearly nothing from the actual industry feedback.

A lot of these new regulations make zero sense, I am not sure whoever wrote most of the new requirements understands most of what is in here.

The idea is to make the industry safer and you guys just made it worse.

Thank you, Sean Dowdell Club Tattoo | Grey Daze | drINK'd

On Thu, Jan 20, 2022 at 1:51 PM Body Art < bodyart@snhd.org > wrote:

As a result of the three workshops held this past December and January, where the Health District took testimony and comment about the proposed body art regulations, the Health District drafted some changes to address the concerns raised by the participants. A fourth workshop will be held online starting at 11:00 a.m. on Friday, February 4, 2022 to receive comments about those changes. A copy of the proposed regulations can found here: www.snhd.info/bodyartregs.

The proposed changes to the regulations published on December 6 are noted in the attached redline version of the document. Words that are in red strikeout font are to be removed. Words in blue colored font are to be added. Also attached to this e-mail is the Public Notice of this fourth workshop and the Agenda for that workshop.

If you wish to participate in the workshop, please use the link found in the agenda.

Sincerely,



Mark Bergtholdt

Environmental Health Supervisor Southern Nevada Health District | Environmental Health | Special Programs

Mailing Address: P.O. Box 3902, Las Vegas, NV 89127

Physical Address: 333 N. Rancho Dr., Suite 450, Las Vegas, NV 89127

Our Mission: To assess, protect, and promote the health, the environment, and the well-being of Southern Nevada communities, residents, and visitors.

Office Phone: 702-759-0625

bergtholdt@snhd.org







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SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

January 13, 2022 Thursday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:	Southern Nevada Health District	
Address of Location:	280 South Decatur Boulevard	
City, State, ZIP:	Las Vegas, NV 89107	
Date/Time of Posting:	1-6-22 9:30 am	
Printed Name:	Heather Hanoff	
Signature:	Geather Hanoll	

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Address of Location:	280 South Decatur Boulevard
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Entity	•				
Springs Preserve Board of Trustees					
Stagecoach General Improvement District					
State Grazing Board District N-3					
Sun Valley General Improvement District					
Tahoe Douglas Visitors Authority					
Tahoe Water Suppliers Association	•				
Public Body					
Southern Nevada Health District	_				
	-				

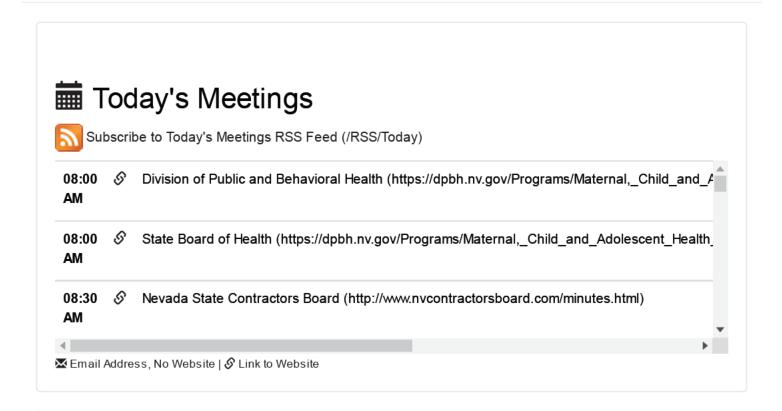
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No	tice	Date Posted	Event Date	Time	Status	Туре
છ	Proposed Body Art Regulations Workshop (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	1/6/2022	9:00 AM	Scheduled	Workshop
છ	Proposed Body Art Regulations Workshop Agenda (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/29/2021	1/6/2022	9:00 AM	Scheduled	Workshop
S	So.N HPPG (https://snhd.webex.com/shnd/j.php? MTID=m3f366523ee2752e71bd7e4f6d5cd42e2)	12/28/2021	1/7/2022	1:00 PM	Scheduled	Meeting
S	Apex Materials LLC Moccasin Rd - Recycling Center (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	1/5/2022	1/13/2022	9:00 AM	Scheduled	Workshop
S	Proposed Body Art Regulations Workshop Agenda (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	1/6/2022	1/13/2022	1:00 PM	Scheduled	Workshop
S	Proposed Body Art Regulations Workshop Revised Agenda (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	1/11/2022	1/13/2022	1:00 PM	Revised	Workshop
છ	Proposed Body Art Regulations Workshop (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	1/13/2022	1:00 PM	Scheduled	Workshop
S	Proposed Body Art Regulations Business Impact (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	2/24/2022	9:00 AM	Scheduled	Hearing
S	Proposed Body Art Regulations (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	3/24/2022	9:00 AM	Scheduled	Hearing



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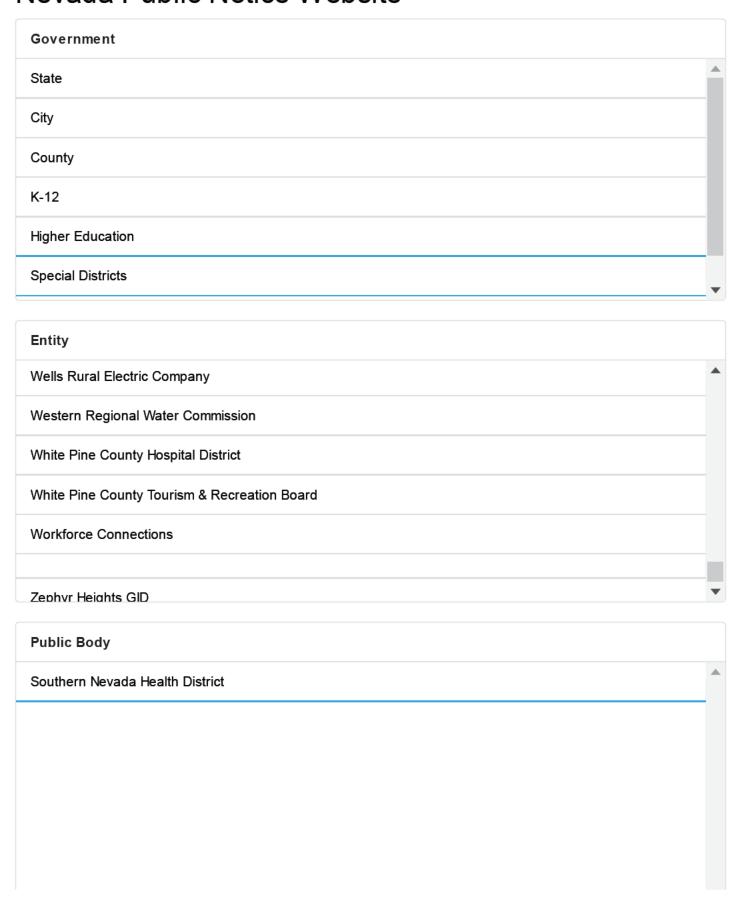
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Send an email to deptadmin@admin.nv.gov (mailto:deptadmin@admin.nv.gov) with the following information:

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- The type of Government (i.e. State, City, County, K-12, Higher Education, Special Districts).
- The area or "Entity" your Government type represents. For example, if your Government type is County, tell us which County i.e. Churchill, Clark, Douglas, etc.
- 4. The name of the Public Body (aka Committee/Council/Board) you will be posting for? Please list all of the Public Bodies you will be responsible to post notices for.
- 5. After you send the email with this information, you will receive an email or phone call back from the Department of Administration's Director's Office to confirm your account has been successfully enrolled. If you have questions, please email deptadmin@admin.nv.gov (mailto:deptadmin@admin.nv.gov).

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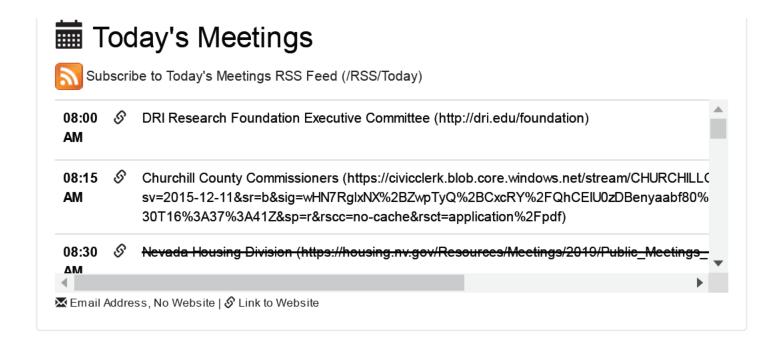


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Notice		Date Posted	Event Date	Time	Status	Туре
S	Proposed Body Art Regulations Workshop (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	1/6/2022	9:00 AM	Scheduled	Workshop
S	Proposed Body Art Regulations Workshop Agenda (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/29/2021	1/6/2022	9:00 AM	Scheduled	Workshop
S	So.N HPPG (https://snhd.webex.com/shnd/j.php? MTID=m3f366523ee2752e71bd7e4f6d5cd42e2)	12/28/2021	1/7/2022	1:00 PM	Scheduled	Meeting
S	Apex Materials LLC Moccasin Rd - Recycling Center (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	1/5/2022	1/13/2022	9:00 AM	Scheduled	Workshop
S	Proposed Body Art Regulations Workshop Agenda (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	1/6/2022	1/13/2022	1:00 PM	Scheduled	Workshop
S	Proposed Body Art Regulations Workshop (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	1/13/2022	1:00 PM	Scheduled	Workshop
S	Proposed Body Art Regulations Business Impact (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	2/24/2022	9:00 AM	Scheduled	Hearing
S	Proposed Body Art Regulations (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	3/24/2022	9:00 AM	Scheduled	Hearing



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- 2. The type of Government (i.e. State, City, County, K-12, Higher Education, Special Districts).
- The area or "Entity" your Government type represents. For example, if your Government type is County, tell us which County i.e. Churchill, Clark, Douglas, etc.
- 4. The name of the Public Body (aka Committee/Council/Board) you will be posting for? Please list all of the Public Bodies you will be responsible to post notices for.
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SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

January 13, 2022 Thursday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:	Boulder City, City Hall	
Address of Location;	401 California Avenue	***************************************
City, State, ZIP:	Boulder City, NV 89005	
Date/Time of Posting:	1/6/2022 @ 12:46	
Printed Name:	Bridgette Rudriduez	
Signature;	18. Wodney	and the second
······································	Please return this codificate via FAX to:	

Thank you.

Special Programs Section, Southern Nevada Health District (702) 759-1486

1/11/2022 11:30 AM FROM: SoNV Health District TO: +17022939245 P.

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SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

January 13, 2022 Thursday, 1:00 p.m., virtually.

Name of Location:	Boulder City, City Hall
Address of Location;	401 California Avenue
City, State, ZIP:	Boulder City, NV 89005
Date/Time of Posting	1/11/2022 11:44 ans
Printed Name:	Stracey Brounfield
Signature:	BEBLU
	Please return this certificate via FAX to:
	Special Programs Section, Southern Nevada Health District

Thank you.

(702) 759-1486

1/11/2022 11:38 AM FROM: SoNV Health District TO: +17024553558

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SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

January 13, 2022 Thursday, 1:00 p.m., virtually.

Name of Location:	Clark County Government Center	
Address of Location:	500 South Grand Central Parkway	
City, State, ZIP:	Las Vegas, NV 89155	
Date/Time of Posting	MARCIE Whelan	
Printed Name:	MARCIE WhilAN	
Signature:	Marcin Whila	
	Please return this certificate via FAX to:	
	Special Programs Section, Southern Nevada Health District	

Thank you.

(702) 759-1486

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Taking place at:

January 13, 2022 Thursday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:	Clark County Government Center		
Address of Location:	500 South Grand Central Parkway		
City, State, ZIP:	Las Vegas, NV 89155		
Date/Time of Posting: Printed Name: Signature:	Please return this certificate via FAX to: Special Programs Section, Southern Nevada Health District		
	(702) 759-1486		

1/0/2022 II.00 AM TROM, DONY MEATON DISCITOR TO, 11/0420/1901 P. .

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Taking place at:

January 13, 2022 Thursday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:	Henderson City Hall
Address of Location:	240 Water Street
City, State, ZIP:	Henderson, NV 89015-7227
Date/Time of Posting:	3:30 01/06/2022
Printed Name:	Chelsea Palacias
Signature:	Chuseop.

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CERTIFICATE OF POSTING OPEN MEETING NOTICE NRS 241.020(3)(b)

I certify that I posted the public notice and agenda for the meetings identified below more than three working days prior to the meeting in accordance with NRS 241.020 (3)(b):

SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

January 13, 2022 Thursday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:	Las Vegas City Hall
Address of Location:	495 South Main Street
City, State, ZIP:	Las Vegas, NV 89101
Date/Time of Posting: Printed Name:	1-6-22 /1:30 AM
Signature:	
	Please return this certificate via FAX to: Special Programs Section, Southern Nevada Health District (702) 759-1486
	· 1/04//27*1400

1/11/2022 12:43 PM FROM: SoNV Health District TO: +17023824803

TROPIVED OITY OLERK

CERTIFICATE OF POSTING 2022 JAN 11 P 12: 49

OPEN MEETING NOTICE NRS 241.020(3)(b)

I certify that I posted the public notice and agenda for the meetings identified below more than three two working days prior to the meeting in accordance with NRS 241.020 (3)(b):

SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

January 13, 2022 Thursday, 1:00 p.m., virtually.

Name of Location	n: Las Vegas City Hall	
Address of Locat	ion: 495 South Main Street	
City, State, ZIP:	Las Vegas, NV 89101	
Date/Time of Pos	sting: 1-11-22 1.'30 pm	
Printed Name:	Sonney FERENS	
Signature:	A JAN	
	Please return this certificate via FAX to: Special Programs Section, Southern Newarla Health District	

Thank you.

(702) 759-1486

CERTIFICATE OF POSTING

OPEN MEETING NOTICE NRS 241.020(3)(b)

I certify that I posted the public notice and agenda for the meetings identified below *more than three* working days prior to the meeting in accordance with NRS 241.020 (3)(b):

SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

January 13, 2022 Thursday, 1:00 p.m., Southern Nevada Health District Public Health Center, 280 South Decatur Boulevard, Las Vegas, in Red Rock Conference Room and/or virtually.

Name of Location:	Laughlin Clark County Community Resource Center		
Address of Location:	55 Civic Way		
City, State, ZIP:	Laughlin, NV 89029		
Date/Time of Posting:	1 4 2022 12pm		
Printed Name:	Tina Gilh		
Signature:	Que		

Please return this certificate via FAX to: Southern Nevada Health District (702) 759-1458

CERTIFICATE OF POSTING

OPEN MEETING NOTICE NRS 241.020(3)(b)

I certify that I posted the public notice and agenda for the meetings identified below *more than three* two working days prior to the meeting in accordance with NRS 241.020 (3)(b):

SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

January 13, 2022 Thursday, 1:00 p.m., virtually.

Name of Location:	Laughlin Clark County Community Resource Center
Address of Location:_	55 Civic Way
City, State, ZIP:	Laughlin, NV 89029
Date/Time of Posting:	1/11/2002 4pm
Printed Name:	Tina Gish
Signature:	(Space)

Please return this certificate via FAX to: Southern Nevada Health District (702) 759-1458

To:

CERTIFICATE OF POSTING

OPEN MEETING NOTICE NRS 241.020(3)(b)

I certify that I posted the public notice and agenda for the meetings identified below more than three two working days prior to the meeting in accordance with NRS 241.020 (3)(b):

SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

January 13, 2022 Thursday, 1:00 p.m., virtually,

Name of Location	Mesquite City Hall	
Address of Location:	10 East Mesquite Boulevard	
City, State, ZIP:	Mesquite, NV 89027	yeer.
Date/Time of Posting	Jan. 11, 2022 2:00 pm	Andrie
Printed Name:	JULIE GOODSELL	
Signature:	Aulie Goodsell	
		riccional s.

Please return this certificate via FAX to: Special Programs Section, Southern Nevada Health District (702) 759-1486

1/11/2022 12:50 PM FROM: Sonv Health District TO: +17026493846 P. 2

CERTIFICATE OF POSTING

OPEN MEETING NOTICE NRS 241.020(3)(b)

I certify that I posted the public notice and agenda for the meetings identified below more than three two working days prior to the meeting in accordance with NRS 241.020 (3)(b):

SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

January 13, 2022 Thursday, 1:00 p.m., virtually.

Name of Location:	North Las Vegas City Hall		
Address of Location:	2250 North Las Vegas Boulevard		
City, State, ZIP:	North Las Vegas, NV 89030		
Date/Time of Posting: _ Printed Name: Signature:	1/12/2022 Justine McDowell Astrie McDowell		

Please return this certificate via FAX to: Special Programs Section, Southern Nevada Health District (702) 759-1486



Home (/) Print Shop * Informatics * OC OEDS * Human Resources * Travel Request (/travel-request)

OC Service Request Form

Your request has been sent.	
Ticket Number	594
Project Name	Post Agenda for January 13, 2022, BA Regulations Workshop
Project Type	Website
Project Description	Please post the attached Agenda for the January 13, 2022, BA Regulations workshop to the Public Notices page and Body Art Revisions page, https://www.southernnevadahealthdistrict.org/permits-and-regulations/body-art/body-art-regulation-revisions/.
Project Deadlines	By 1/07/2022, please.

View Submitted Request (http://forms.cchd.org/#/61d4b7b35fb6f913c04e3b1e)

Submit Another Request (/oc/oc-service-request)



Home (/)

Print Shop ♥

Informatics *

OC ▼ OEDS ▼ Human Resources ▼

Travel Request (/travel-request)

♣ ERIN O'MALLEY

< Back ■			
🖺 Pendir	g - OC PROJECT REQ	UEST	
Ticket Number:			
594			
Contact Person Information			
Requester Full Name:			
Erin O'Malley			
Requester Department:			
ADM HVR			
Requester Email:			
omalley@snhd.org			
Paguarter Dhana Mumbar			
Requester Phone Number: (702) 759-1626			
Project Request Informatio	1		
Project Request Informatio	ı		
Project Name:			
Project Name: Post Agenda for January 13, 2022, BA Report Type of Project:			
Project Name: Post Agenda for January 13, 2022, BA Re			
Project Name: Post Agenda for January 13, 2022, BA Reg Type of Project:	ulations Workshop		
Project Name: Post Agenda for January 13, 2022, BA Ref Type of Project: Website content Please describe your project request in deta Please post the attached Agenda for the Ji	ulations Workshop		
Project Name: Post Agenda for January 13, 2022, BA Ref Type of Project: Website content Please describe your project request in deta Please post the attached Agenda for the Ji Body Art Revisions page, https://www.sout	ulations Workshop I. nuary 13, 2022, BA Regulations workshop to the I emnevadahealthdistrict.org/permits-and-regulatio		
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Modified By		
SnhdPhpUser		



Home (/) Print Shop * Informatics * OC OEDS * Human Resources * Travel Request (/travel-request)

OC Service Request Form

Your request has been sent.		
Ticket Number	610	
Project Name	Amended Agenda for BA Regulations Jan 13 Workshop	
Project Type	Website	
Project Description	Please post the attached Amended Agenda to the website on Public Notice page and Body Art Regulations Revision Page - had to remove in- person option.	
Project Deadlines	ASAP - meeting is in 2 days.	

View Submitted Request (http://forms.cchd.org/#/61ddc2d95fb6f91b28b62cb4)

Submit Another Request (/oc/oc-service-request)



Home (/) Print Shop v Informatics v OC OEDS v Human Resources v Travel Request (/travel-request)

OC Service Request Form

Your request has been sent.		
Ticket Number	665	
Project Name	Add 1.13.2022 BA Regs Workshop minutes to website	
Project Type	Website	
Project Description	Please add the attached workshop minutes to the website on the Body Art Regulations Revisions page	
Project Deadlines	By 1/28/22 if possible.	

View Submitted Request (http://forms.cchd.org/#/61f03e8f5fb6f90378649d18)

Submit Another Request (/oc/oc-service-request)

ATTACHMENT I

Results of Business Impact Surveys

			W3 W3	est	#3 explain	4 #4 Explain	#5 #5 estimate	#S explain	#6 #6 estimate	#6 explain	
12/6/2021	Brow Engel	Mylynda Vance	N		N		N		N		
12/6/2021	SCALP PRODIGY	BENAIAH POINDEXTER	N		N		N		N		
	iShape Brows & Permanent							would be able to rent out stations and accept more artist to work with me. I am estimating it		Any changes or requirements can cause other businesses to either have disadvantage or	
12/7/2021	Makeup, LLc	Portia Ijidakinro	N		Y	It will help a lot if I would to expand my business since the sink requirement has changed.		to additional\$3-5k month revenue.	Y	advantagestoward others.	
12/7/2021	Edgy Brows Studio	Yhara Rivera	N		N N	1	Y 800		N		
12/16/2021	Beauty by Okubo	Renata o Pickering	N		N	1	N		N		
	Black Diamond Custom Tattoos	Eric Garcia	Y th	ousands	Would require additional build out, permits etc	Would impose hardship	N		N	Does not seem to serve a purpose or solve a problem	
	EdgvBrowsStudio	Yhara Rivera #2	N		Y	I will be able to add more beds and not worry about so many sinks			N N		
12/16/2021	Rising From The Ashes Tattoo clownytattoos		N N		N.		N N		N N		
12/29/2021	ciownytattoos	Hector Arelianes P	N		N N		N		N		
12/20/2021	Babes with Blades Microblading	Malia Patrocinio									
		Wendy Chester	N		N N		N		N		
1/1/2022	Jessxink IIc	Jessica Gonzalez N	N		N N		N		N		
12/29/2021		KarlaDelarosa	N		N.		N		N		
1/2/2022	LLC AMARIN	Marina Bragina	N		i N		N		N		
								As I am currently in the middle of expanding to a new location, the current sink			
								requirements would be of a significantly larger cost opposed to following the sink			
								requirements of the new regulations. I am workingwith my new landlord to delay our build			
1/5/2022	Black Rhino Tattoo	Igor Montano	N		N	1	Y 20000	until the new regulations are put into place. The regulationchanges are all a good thing.	N		
1							1	The changes to artist workstation limitations will likely allow us to add more stations which	l I		
								means we canhire more full-time artists. I estimate this will increase our monthly income by			
	Black Sacrament Tattoo	Jordan Lee	N		N		Y 6000	approximately \$2000-6000a month.			
1/13/2022	Fired Up Beauty Lounge	Emily Eichorn	N		N		N	DI FACE CEE ATTACHES MOTES. THE OWN CHOOSE SEMEST COOLST HESE SECONDS AND	N		
4.440.70000	Crown Electric Tattoo Company	LEYLA FOWLER			See attached notes	See attached notes		PLEASE SEE ATTACHED NOTES - THE ONLY SHOP TO BENEFIT FROM THESE PROPOSALSWILL BE CLUB TATTOO. THE REST OF US WILL BE PUT OUT OF BUSINESS		See attached notes	
1/15/2022	Crown Electric Tattoo Company	LEIDAFOWLER	-		See attached notes	See actocited notes	"	BE CLOB TATTOO, THE REST OF 03 WILE BE FOT OUT OF BUSINESS	-	dee attacried riotes	
										As described above, the significant impact on our business could result in our company not	
						Body Piercing is an appreciable percentage (in excess of 40%) of our busienss. Because the				providing the service any longer. Whether this is indirect or direct, this impact is significant	
					change in the regulations regarding piercing will cause a significant financial impact on our	costs of the jewelry will exceed the amounts to be charged, this change in regualtions will				and not necessary. There is no scientific difference in the long term effects of the use of the	
					business. The change from 316L to F138 type of metal and the internal threaded jewlery	cause the process not to be profitable. This will force my company to stop offering this				F138 versus the 316L metal jewelry. The proponents of this change it he regulations of the	
					used for piercing will cause the costs of the process to exceed the current charge for this	service and remove it from the list of services provided by our five (5) shops in Clark County,				SNHD are in favior of this due to their desire to benefit financially from the closing of	
1/14/2022	Koolsville Tattoos, LLC	Robert Gonzales	Y	125,000	service. Y	NV.	N C	See responses above 3&4)	Υ	competitors and the selling of the vastly more expensive lewelry itself.	
1/16/2022	Permanent Makeup by Rebecca	Rebecca Bryant P	N		N	1	Υ	I will be able to add a body art room in my facility now that the size requirement will be lower	N		
					as a tattooer, we experience a very small amount of blood daily. I think its extensive to have						
					to go outand purchase even more sanitary equipment. In addition to that the periodic pick	Tattoo shops already have restrictions on space, additional construction would be needed		do NOT believe that there would be any beneficial economic effects, this would financially			
		Hunter Blood			up service, wither it beweekly, bi-weekly, monthly, this would impact the shop economically.	which wouldfurther slow down shop and possibly have to let artists go. less artist , less room for work and clientele.ect	l.	impact theshop as well as the artists and customer's and could drive more tattooers to tattoo from home.		the pandemic hit the tattoo industry hard in many ways, with these regulations it would take	
1/14/2022	Three Arrows Tattoo	Hunter Blood 1	1		economically.	room for work and clientele,ect	N	tattoo from nome.	1	us evenlonger to get back on our feet from after quarantine.	
										The tattoo industry has already been struggling with the pandemic. There has been losses of	
					Since we do not have piercing services, I am writing based purely on tattooing. We					clientele, working artist, supply issues and higher/more costly sanzation. With these proposed	
					encounter very little blood droplets in the daily tattooing proceure. I do not aconsider it a	Tattoo shops are a tight fitting narrow space. The regulations would require more		I do not believe that there would be any beneficial economic effects should these proposed		regulations, it would worsent many livlihood situations. Many are experienceing difficulties	
					biohazard to the extent of needing to purchases of spearate receptacles, biohazard bags,	receptacles an dmore spacial expansions. We woul need more room for treating and		regulations occur. I think shops sould lose artists and space, as well as be financially		with the cost of working. If these regulations pass, clients will be placed in more expensive	
					labels and all the necessary storage for all listed, in addition to weekly/monthly	storing bioharzard waste, which would lead to the need of firing artists. Less artists, less		impacted with the need for additional consturction in shops. The need for additional		situations to makeup for the new regulations' costs, and many artisrs would either lose	
					disposal/pickup services. This amount of new accomodations would drastically impact the	room for work and customers, merchandise and supplies, more room for health operations		sanitation rooms, labeling materials, packaging, storing, etc. will have an enormous negative		business, or chose unsavory routes, such as unregulated working from home, mobile tattoos,	
1/18/2022	Three Arrows Tattoo	Matilda Dao	٧		shop economically.	that aren't deemed necessary in the eyes of a tattooer in a functioning tattoo shop.	N	impact on every tattoo shop.	Υ	and choose other much less sanitary work environments.	
I					I cannot speak on piercing, since I dont' have it in the shop but during a tattoo procedure,		1 1		l 1		
1					we do encounter very minimal blood droplets. I would NOT consider teh amount of blood		1		l I		
I					from the process of an epidemial abrasion being acknowledged as a quantity to justify it as a		1 1		l 1		
1					biohazard to an extent there a tattoo shop woul dneed to purchease spearate receptacles,	Tattoo shops are ususally a tight-fitted space as is, the regulations requiring the shop for	1		l I	In this time of our current economic situation, world-wide, tattoo artists/shops are already	
I					purchase biohzardous bags, purchase biohazadous labels, purchase and build an entire	more receptacles and additional room for treating and storing bioharzard waste will require	1 1	losing tattoo artists to accomodate for storage space and the expense of proivding a build-	l 1	experiencing a hard time keeping up iwht the cost of working. If these biohazard regulations	
		Robert Simmons	.		storage area/room and also purchase a weekly/monthly pickup or disposal service. This	most tattoo shops to fire some attoo artists in order to accommodate for the extra room	L. I	out for additional sanitzed room, labeling, materilas, packaging, storing, etc will have an	l. 1	pass, tattoo artists/shops would need to hearge more. In turn, we would lose buiness, furhter	
1/13/2022	Three Arrows Tattoo	Robert Simmons 1	1		amount of accoomodations would impact the shop drastically.	needed for the revised regulations.	N	enormous negative impact on every tattoo shop.	<u> </u>	promoting clients to find a "cheapter alternative" (i.e. unrgulated house and mobile tattoos)	
1					I cannot speak on piercing, since I dont' have it in the shop but during a tattoo procedure,		1		l I		
I					we do encounter very minimal blood droplets. I would NOT consider teh amount of blood		1 1		l 1		
1					from the process of an epidemial abrasion being acknowledged as a quantity to justify it as a		1		l I		
I					biohazard to an extent there a tattoo shop woul dneed to purchease spearate receptacles.	Tattoo shops are ususally a tight-fitted space as is, the regulations requiring the shop for	1 1		l I	In this time of our current economic situation, world-wide, tattoo artists/shops are already	
I					purchase biohzardous bags, purchase biohazadous labels, purchase and build an entire	more receptacles and additional room for treating and storing bioharzard waste will require	1 1	losing tattoo artists to accomodate for storage space and the expense of proivding a build-	l I	experiencing a hard time keeping up iwht the cost of working. If these biohazard regulations	
1					storage area/room and also purchase a weekly/monthly pickup or disposal service. This	most tattoo shops to fire some attoo artists in order to accommodate for the extra room	1	out for additional sanitzed room, labeling, materilas, packaging, storing, etc will have an	l I	pass, tattoo artists/shops would need to hearge more. In turn, we would lose buiness, furhter	
1/13/2022		Riley Baxter	Y		amount of accoomodations would impact the shop drastically.	needed for the revised regulations.	Y	enormous negative impact on every tattoo shop.	Y	promoting clients to find a "cheapter alternative" (i.e. unrgulated house and mobile tattoos)	
								•			



Proposed Body Art Regulations Business Impact Survey

Please complete and return the attached business impact survey for the proposed Body Art Regulations. You can add additional pages as necessary to complete your responses. A copy of the proposed regulations can be found https://download/eh/2021/body-art/20211129-Body-Art-Regs-WORKING-DRAFT.pdf. Please review the regulations thoroughly to assist with your response. This survey can also be completed online at the following website: https://www.southernnevadahealthdistrict.org/permits-and-regulations/proposed-body-art-regulations-business-impact-survey/

gula	ations-business-impact-survey/
1.	Business Name: Black Diamond Custom Tattoos
2.	Name of person completing survey: Eric Garcia
3.	Will the proposed Body Art Regulations impose a direct and significant economic burden upon your business? If yes, please provide an estimate.
	Yes No No If yes, estimated effect in dollars: thousands
	Explain: Would require additional build out, permits etc
4.	Will the proposed Body Art Regulations directly restrict the formation, operation, or expansion of your business?
	Yes No
	Explain: Would impose a hardship
5.	Will the proposed Body Art Regulations have an estimated beneficial economic effect on your business? If yes,
	please provide an estimate.
	Yes No No If yes, estimated effect in dollars:
	Explain:
6.	Do you anticipate any indirect economic effects to your business as a result of the proposed Body Art Regulations? If yes, please provide an estimate.
	Yes No No If yes, estimated effect in dollars:
	Explain: Does not seem to serve a purpose or solve a problem

Please return this before January 15, 2022 by: 1) the link at the top of the page, 2) email to bodyart@SNHD.org, 3) regular mail {P Box 3902 Las Vegas NV 89127, 4} deliver in person to 333 N Rancho Ste 450 M-F 8-3pm

From: Black Rhino Tattoos

To: Body Art

Subject: New Body Art Regulations Business Impact Survey Submission

Date: Wednesday, January 05, 2022 1:15:04 PM

1. B	usiness	Name
------	---------	------

Black Rhino Tattoos

2. Name of person completing survey

Igor Montano

- 3. Will the proposed Body Art Regulations impose a direct and significant economic burden upon your business?
 - No
- 4. Will the proposed Body Art Regulations directly restrict the formation, operation, or expansion of your business?
 - No
- 5. Will the proposed Body Art Regulations have an estimated beneficial economic effect on your business?
 - Yes

If yes, please provide an estimate in dollars.

\$20,000.00

Please explain.

As I am currently in the middle of expanding to a new location, the current sink requirements would be of a significantly larger cost opposed to following the sink requirements of the new regulations. I am working with my new landlord to delay our build until the new regulations are put into place. The regulation changes are all a good thing.

- 6. Do you anticipate any indirect economic effects to your business as a result of the proposed Body Art Regulations
 - No



Proposed Body Art Regulations Business Impact Survey

Please complete and return the attached business impact survey for the proposed Body Art Regulations. You can add additional pages as necessary to complete your responses. A copy of the proposed regulations can be found https://download/eh/2021/body-art/20211129-Body-Art-Regs-WORKING-DRAFT.pdf. Please review the regulations thoroughly to assist with your response. This survey can also be completed online at the following website: https://www.southernnevadahealthdistrict.org/permits-and-regulations/proposed-body-art-regulations-business-impact-survey/

1.	Business Name: BEAVM INK LV
2.	Name of person completing survey: WENDY CHESTER
3.	Will the proposed Body Art Regulations impose a direct and significant economic burden upon your business? If yes, please provide an estimate.
	Yes No No If yes, estimated effect in dollars:
	Explain:
4.	Will the proposed Body Art Regulations directly restrict the formation, operation, or expansion of your business?
	Yes No X
	Explain:
5.	Will the proposed Body Art Regulations have an estimated beneficial economic effect on your business? If yes,
	please provide an estimate.
	Yes No No No If yes, estimated effect in dollars:
	Explain:
6.	Do you anticipate any indirect economic effects to your business as a result of the proposed Body Art Regulations? If yes, please provide an estimate.
	Yes No No If yes, estimated effect in dollars:
	Explain:

Please return this before January 15, 2022 by: 1) the link at the top of the page, 2) email to bodyart@SNHD.org, 3) regular mail {P Box 3902 Las Vegas NV 89127, 4} deliver in person to 333 N Rancho Ste 450 M-F 8-3pm

From: Black Sacrament Tattoo

To: Body Art

Subject: New Body Art Regulations Business Impact Survey Submission

Date: Saturday, January 08, 2022 10:54:31 PM

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П	0	น๖	iness		all	ıe

Black Sacrament Tattoo

2. Name of person completing survey

Jordan Lee

- 3. Will the proposed Body Art Regulations impose a direct and significant economic burden upon your business?
 - No
- 4. Will the proposed Body Art Regulations directly restrict the formation, operation, or expansion of your business?
 - No
- 5. Will the proposed Body Art Regulations have an estimated beneficial economic effect on your business?
 - Yes

If yes, please provide an estimate in dollars.

\$6,000.00

Please explain.

The changes to artist workstation limitations will likely allow us to add more stations which means we can hire more full-time artists. I estimate this will increase our monthly income by approximately \$2000-6000 a month.

- 6. Do you anticipate any indirect economic effects to your business as a result of the proposed Body Art Regulations
 - No

From: Brow Engel
To: Body Art
Subject: New Body Art Regulations Business Impact Survey Submission
Date: Monday, December 06, 2021 10:11:42 PM

1. Business Name
Brow Engel
2. Name of person completing survey
Mylynda Vance

3. Will the proposed Body Art Regulations impose a direct and significant economic burden upon your business?

• No

your business?

business?

Art Regulations

No

No

No

4. Will the proposed Body Art Regulations directly restrict the formation, operation, or expansion of

5. Will the proposed Body Art Regulations have an estimated beneficial economic effect on your

6. Do you anticipate any indirect economic effects to your business as a result of the proposed Body

From: Crown Electric Tattoo Company

To: Body Art

Subject: New Body Art Regulations Business Impact Survey Submission

Date: Saturday, January 15, 2022 12:30:46 PM

1. Business Name

Crown Electric Tattoo Company

2. Name of person completing survey

LEYLA FOWLER

- 3. Will the proposed Body Art Regulations impose a direct and significant economic burden upon your business?
 - Yes

Please explain.

PLEASE SEE ATTACHED NOTES

- 4. Will the proposed Body Art Regulations directly restrict the formation, operation, or expansion of your business?
 - Yes

Please explain.

PLEASE SEE ATTACHED NOTES

- 5. Will the proposed Body Art Regulations have an estimated beneficial economic effect on your business?
 - No

Please explain.

PLEASE SEE ATTACHED NOTES - THE ONLY SHOP TO BENEFIT FROM THESE PROPOSALS WILL BE CLUB TATTOO. THE REST OF US WILL BE PUT OUT OF BUSINESS

- 6. Do you anticipate any indirect economic effects to your business as a result of the proposed Body Art Regulations
 - Yes

Please explain.

PLEASE SEE ATTACHED NOTES

ADDENDUM

NOTES FOR BUSINESS IMPACT SURVEY

Adding Vapor Line Sterilization Tabs is really going to impact our cost of sales. For 250 strips, it costs \$33. This is not currently part of our budget. Along with the added cost of these little strips, this will impact the use of our autoclave by having to sterilize dozens of small packs rather than the one long separated ones that we currently do.

We have been providing Spore Tests twice a year. Now you are asking for monthly. This is going to cost \$60 for 6 tests. We have been paying \$20 per year for our tests, not the increased cost will be \$120 per year.

Trash bags. Use biohazard bags and have pickup on a regular basis? From what company? Who is going to pick up daily, and how do we afford purchasing biohazard bags? The amount of blood that occurs during a tattoo is not enough to justify this as biohazard. It just isn't there. Not enough body fluid to justify this new proposal. If this is the case, then we should see every casino, every clinic, every baby changing station in the entire city, every day care, every nursing home, every public trash receptacle in the city will need to have a RED BAG, a separate daily storage area for these red bags, and weekly or monthly pick up from companies who will not even talk to us about opening an account for this. You are really asking for A LOT when you say we each tattoo shop has to have a separate area for holding these red bags until they are picked up. You are also asking us to purchase biohazard labels. This will be an added cost to our budget. For a box of 250 impermeable red biohazard bags, it will cost \$56.99. If you are requiring us to use a Red Bag in every station, that is 7 stations for us on a daily basis! That's 49 bags per week, 156 bags per month. The 13 gallon trash bags that we currently use are adequate and sufficient.

Requiring us to add additional rooms for holding these bags is seriously putting a huge problem on our shoulders. Most tattoo shops are small as it it. How do we afford to build a separate area? We would need to fire an artist just to use his/her station for storing red bags??

For daily or weekly pickup, we have contacted BIO ONE, STERICYCLE, and Republic Services which advertises that they pick up Red Bags, but we can't get a response. NO ONE is responding to this search for pick up service. This is not in our current budget. We are not multi-million dollar companies. We are small businesses, that feed and provide for families. We pay taxes. We hope that our government and health authorities care about keeping us in business, not burying us in expenses that we can't handle.

Please add an explanation as to why we need to keep a file or folder with our jewelry purchase invoices? ALL of our purchases are digital, our purchase histories are online. So what is the point of our having to keep a file or folder with stacks of paper. We need to find the space to do this too?

Now we need to talk about the MAJOR increase in price for the cost of our jewelry if you are seriously going to insist that we purchase jewelry from only 3 companies. This is VERY unexpected, that these 3 companies are going to be awarded ALL jewelry purchase business in the US?? How did these 3 companies get so lucky as to grab the monopoly on putting hundreds of other jewelry vendors out of business? Along with awarding the 3 companies mentioned above, our own local CLUB TATTOO clearly has a massive steak in this!!!

We have used 316L surgical steel for DECADES. No one has ended up in the hospital because of a piece of jewelry being 316L surgical steel. NO ONE goes to the emergency room because of the quality of jewelry that we use here in Las Vegas. This jewelry is quality and it is how we earn our living, along with keeping the jewelry manufacturers and sales people in business. This request is out of line. It will literally put most body piercers or shops out of business. We can't afford the prices that these 3 companies charge and our customers won't pay \$80-\$100 for a standard piercing that costs them \$20 today. Requiring us to meet ASTM standards would triple our cost of sales, making it next to impossible to charge a fair price to customers. This would put our budget way out of order, and would put many shops and many piercers out of business. Keep in mind we pay weekly payroll tax to the State of Nevada, weekly, monthly, quarterly and yearly. We pay fees for Business Licenses and Health Permits. We are contributing to our State and City. What you folks are proposing will be putting a lot of shops and piercers and artists out of business. Families in

dire circumstances. For what? So that Club Tattoo can prevail as the only shop in town?

In closing, we want to remind you that we are always very aware of health hazards and keeping our shop at an exceptional level of sterilization. We are very aware of keeping our customers and our artists and piercers in a safe and clean environment. Since the pandemic, we are all seeing a slow down in business. We are tax paying citizens, we are people who support our families. We can't afford some of these changes you are requiring. We would need to charge our customers more, which they can't afford either. This is our industry. We take great pride in what we do and how we serve the body art public. Please don't place so many un-due burdens on our budgets. Please don't make this so difficult for us to afford, that many quality shops, like Crown Electric Tattoo Company, who are serious about the welfare of their customers and employees, are put out of business. This would ABSOLUTELY lead to people getting pierced and tattoo'd in private homes in unsafe unsanitized areas which will ABSOLUTELY lead to infections and complaints. Please work with us and find a more reasonable solution to your concerns. The Health District has failed to do anything about the local hotels from throwing "tattoo parties", letting artists rent rooms at cheaper prices and putting valid legal professionals out of business. Those of us who PAY FOR THE PERMITS AND LICENSES do not appreciate that these non-licensed artists are allowed to tattoo and pierce in unsanitized hotel rooms. We are just as concerned as you are, so please work with us on some of these unfair and unexpected financial burdens that you are considering placing on shops and families and customers.

Thank You.

Leyla Fowler (<u>lfowler14@cox.net</u>) 702-860-3757

Crown Electric Tattoo Company

From: clownytattoos To: **Body Art** New Body Art Regulations Business Impact Survey Submission Subject: Date: Wednesday, December 29, 2021 5:50:55 PM 1. Business Name clownytattoos 2. Name of person completing survey **Hector Arellanes** 3. Will the proposed Body Art Regulations impose a direct and significant economic burden upon your business? No 4. Will the proposed Body Art Regulations directly restrict the formation, operation, or expansion of your business? No 5. Will the proposed Body Art Regulations have an estimated beneficial economic effect on your business? No

6. Do you anticipate any indirect economic effects to your business as a result of the proposed Body

Art Regulations

No

From: To: Subject: Date:	EdgyBrowsStudio Body Art New Body Art Regulations Business Impact Survey Submission Thursday, December 16, 2021 4:31:16 PM			
1. Business Nar	me			
EdgyBrows	sStudio			
2. Name of pers	2. Name of person completing survey			
Yhara Rive	та			
3. Will the proposition of the second	osed Body Art Regulations impose a direct and significant economic burden upon your			
• No				
4. Will the proposition your business?	osed Body Art Regulations directly restrict the formation, operation, or expansion of			
• Yes	S .			
Please explain.				
I will be abl	e to add more beds and not worry about so many sinks			
5. Will the proposition business?	osed Body Art Regulations have an estimated beneficial economic effect on your			
• Yes	5			
If yes, please pr	rovide an estimate in dollars.			
\$800.00				
Please explain.				
I will be abl	le to rent 3 beds			
6. Do you antici Art Regulations	pate any indirect economic effects to your business as a result of the proposed Body			

No



Proposed Body Art Regulations Business Impact Survey

Please complete and return the attached business impact survey for the proposed Body Art Regulations. You can add additional pages as necessary to complete your responses. A copy of the proposed regulations can be found https://media.southernnevadahealthdistrict.org/download/eh/2021/body-art/20211129-Body-Art-Regs-WORKING-DRAFT.pdf. Please review the regulations thoroughly to assist with your response. This survey can also be completed online at the following website: https://www.southernnevadahealthdistrict.org/permits-and-regulations/proposed-body-art-regulations-business-impact-survey/

1.	Business Name:				
2.	Name of person completing survey:				
3.	Will the proposed Body Art Regulations impose a direct and significant economic burden upon your business? If yes, please provide an estimate.				
	Yes No If yes, estimated effect in dollars:				
	Explain:				
4.	Will the proposed Body Art Regulations directly restrict the formation, operation, or expansion of your business?				
	Yes No				
	Explain:				
5.	Will the proposed Body Art Regulations have an estimated beneficial economic effect on your business? If yes,				
	please provide an estimate.				
	Yes No If yes, estimated effect in dollars:				
	Explain:				
6.	Do you anticipate any indirect economic effects to your business as a result of the proposed Body Art Regulations? If yes, please provide an estimate.				
	Yes No No If yes, estimated effect in dollars:				
	Explain:				

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From: To: Subject: Date:	Fired Up Beauty Lounge Body Art New Body Art Regulations Business Impact Survey Submission Thursday, January 13, 2022 2:34:37 PM
1. Business Nan	ne
Fired Up Be	eauty Lounge
2. Name of person	on completing survey
Emily Eicho	orn
3. Will the propo business?	sed Body Art Regulations impose a direct and significant economic burden upon your
• No	
4. Will the propo your business?	sed Body Art Regulations directly restrict the formation, operation, or expansion of
• No	
5. Will the propo business?	sed Body Art Regulations have an estimated beneficial economic effect on your
• No	
6. Do you anticip Art Regulations	pate any indirect economic effects to your business as a result of the proposed Body
• No	

From:

Jessxink Ilc
To:
Body Art
Subject:
New Body Art Regulations Business Impact Survey Submission
Date:
Monday, January 03, 2022 1:25:17 PM

1. Business Name		
Jessxink IIc		
2. Name of person completing survey		
Jessica Gonzalez		
3. Will the proposed Body Art Regulations impose a direct and significant economic burden upon your business?		
• No		
4. Will the proposed Body Art Regulations directly restrict the formation, operation, or expansion of your business?		
• No		
5. Will the proposed Body Art Regulations have an estimated beneficial economic effect on your business?		
• No		
6. Do you anticipate any indirect economic effects to your business as a result of the proposed Body Art Regulations		
• No		

From: iShape Brows & Permanent Makeup, LLc

To: Body Art

Subject: New Body Art Regulations Business Impact Survey Submission

Date: Tuesday, December 07, 2021 11:06:36 AM

1. Business Name

iShape Brows & Permanent Makeup, LLc

2. Name of person completing survey

Portia Ijidakinro

- 3. Will the proposed Body Art Regulations impose a direct and significant economic burden upon your business?
 - No
- 4. Will the proposed Body Art Regulations directly restrict the formation, operation, or expansion of your business?
 - Yes

Please explain.

It will help a lot if I would to expand my business since the sink requirement has changed.

- 5. Will the proposed Body Art Regulations have an estimated beneficial economic effect on your business?
 - Yes

If yes, please provide an estimate in dollars.

\$3,000.00

Please explain.

I would be able to rent out stations and accept more artist to work with me. I am estimating it to additional \$3-5k month revenue.

- 6. Do you anticipate any indirect economic effects to your business as a result of the proposed Body Art Regulations
 - Yes

Please explain.

Any changes or requirements can cause other businesses to either have disadvantage or advantages toward others.



Proposed Body Art Regulations Business Impact Survey

Please complete and return this business impact survey for the proposed Body Art Regulations. You can add additional pages as necessary to complete your responses. A copy of the proposed regulations can be found at www.snhd.info/bodyartrevisions.

Please review the regulations thoroughly to assist with your response. All questions are required.

1. Business Name Koolsville Tattoos, LLC		2. Name of Person Completing Survey Robert Gonzales	
3. Will the propos	ed Body Art Regulations impose a direct	and significant economic burden upon your business?	
Yes No	Please explain.		
Estimate in dollars \$125,000	business. The change from 316L to F1	g piercing will cause a significant financial impact on our 38 type of metal and the internal threaded jewlery used for ess to exceed the current charge for this service.	
	ed Body Art Regulations directly restrict t	he formation, operation, or expansion of your business?	
Yes No	,	tage (in excess of 40%) of our busienss. Because the costs	
V	of the jewelry will exceed the amounts t	to be charged, this change in regualtions will cause the orce my company to stop offering this service and remove it	
5. Will the propos	ed Body Art Regulations have an estimate	ed beneficial economic effect on your business?	
Yes No	Please explain.		
✓	See responses above.		
Estimate in dollars			
6. Do you anticipa	ate any indirect economic effects to your	business as a result of the proposed Body Art Regulations?	
Yes No	Please explain.		
✓	service any longer. Whether this is indirect scientific difference in the long term effects proponents of this change it he regulations	on our business could result in our company not providing the or direct, this impact is signiifcant and not necessary. There is no of the use of the F138 versus the 316L metal jewelry. The of the SNHD are in favior of this due to their desire to benefit and the selling of the vastly more expensive jewelry itself.	



Proposed Body Art Regulations Business Impact Survey

Please complete and return the attached business impact survey for the proposed Body Art Regulations. You can add additional pages as necessary to complete your responses. A copy of the proposed regulations can be found https://media.southernnevadahealthdistrict.org/download/eh/2021/body-art/20211129-Body-Art-Regs-WORKING-DRAFT.pdf. Please review the regulations thoroughly to assist with your response. This survey can also be completed online at the following website: https://www.southernnevadahealthdistrict.org/permits-and-regulations/proposed-body-art-regulations-business-impact-survey/

1.	Business Name: Karla Delarasa			
2.	Name of person completing survey: Karla Delarosa			
3.				
	Yes No V If yes, estimated effect in dollars:			
	Explain:			
4.	Will the proposed Body Art Regulations directly restrict the formation, operation, or expansion of your business?			
	Yes No			
	Explain:			
5.	Will the proposed Body Art Regulations have an estimated beneficial economic effect on your business? If yes,			
	please provide an estimate.			
	Yes No No If yes, estimated effect in dollars:			
	Explain:			
6.	Do you anticipate any indirect economic effects to your business as a result of the proposed Body Art Regulations? If yes, please provide an estimate.			
	Yes No V If yes, estimated effect in dollars:			
	Explain:			

Please return this before January 15, 2022 by: 1) the link at the top of the page, 2) email to bodyart@SNHD.org, 3) regular mail {P Box 3902 Las Vegas NV 89127, 4} deliver in person to 333 N Rancho Ste 450 M-F 8-3pm

From:

LLC AMARIN

To:

Body Art

Subject:

New Body Art Regulations Business Impact Survey Submission

Date:

Sunday, January 02, 2022 10:53:44 PM

1. Business Name

LLC AMARIN

No

LLC AMARIN
2. Name of person completing survey
Marina Bragina
${\it 3. Will the proposed Body Art Regulations impose a direct and significant economic burden upon your business?}$
• No
4. Will the proposed Body Art Regulations directly restrict the formation, operation, or expansion of your business?
• No
5. Will the proposed Body Art Regulations have an estimated beneficial economic effect on your business?
• No
6. Do you anticipate any indirect economic effects to your business as a result of the proposed Body Art Regulations

From: To: Subject: Date:	Permanent Makeup by Rebecca Body Art New Body Art Regulations Business Impact Survey Submission Sunday, January 16, 2022 9:39:46 AM
1. Business Nar	me
Permanent	Makeup by Rebecca
2. Name of pers	on completing survey
Rebecca B	ryant
3. Will the propo business?	osed Body Art Regulations impose a direct and significant economic burden upon your
• No	
4. Will the proposition your business?	osed Body Art Regulations directly restrict the formation, operation, or expansion of
• No	
5. Will the propo business?	osed Body Art Regulations have an estimated beneficial economic effect on your
• Yes	
Please explain.	
I will be abl	e to add a body art room in my facility now that the size requirement will be lowered to 80 sq ft

6. Do you anticipate any indirect economic effects to your business as a result of the proposed Body Art Regulations

No

From: To: Subject: Date:	Rising From The Ashes Tattoo Body Art New Body Art Regulations Business Impact Survey Submission Thursday, December 16, 2021 10:44:39 AM
1. Business Na	me
Rising From	m The Ashes Tattoo
2. Name of pers	on completing survey
1	
3. Will the propulation business?	osed Body Art Regulations impose a direct and significant economic burden upon your
• No	
4. Will the propy your business?	osed Body Art Regulations directly restrict the formation, operation, or expansion of
• No	
5. Will the prop business?	osed Body Art Regulations have an estimated beneficial economic effect on your
• No	
6. Do you antici Art Regulations	pate any indirect economic effects to your business as a result of the proposed Body
• No	

From:

SCALP PRODIGY From: To: **Body Art** New Body Art Regulations Business Impact Survey Submission Subject: Date: Monday, December 06, 2021 9:56:02 PM 1. Business Name SCALP PRODIGY 2. Name of person completing survey **BENAIAH POINDEXTER** 3. Will the proposed Body Art Regulations impose a direct and significant economic burden upon your business? No 4. Will the proposed Body Art Regulations directly restrict the formation, operation, or expansion of your business? No 5. Will the proposed Body Art Regulations have an estimated beneficial economic effect on your business? No

6. Do you anticipate any indirect economic effects to your business as a result of the proposed Body

Art Regulations

No

From: Three Arrows Tattoo

To: Body Art

Subject: New Body Art Regulations Business Impact Survey Submission

Date: Friday, January 14, 2022 9:51:07 PM

1. Business Name

Three Arrows Tattoo

2. Name of person completing survey

Hunter Blood

3. Will the proposed Body Art Regulations impose a direct and significant economic burden upon your business?

Yes

Please explain.

as a tattooer, we experience a very small amount of blood daily. I think its extensive to have to go out and purchase even more sanitary equipment. in addition to that the periodic pick up service, wither it be weekly, bi-weekly, monthly. this would impact the shop economically.

4. Will the proposed Body Art Regulations directly restrict the formation, operation, or expansion of your business?

Yes

Please explain.

Tattoo shops already have restrictions on space, additional construction would be needed which would further slow down shop and possibly have to let artists go. less artist, less room for work and clientele, ect...

5. Will the proposed Body Art Regulations have an estimated beneficial economic effect on your business?

No

Please explain.

i do NOT believe that there would be any beneficial economic effects. this would financially impact the shop as well as the artists and customer s and could drive more tattooers to tattoo from home.

6. Do you anticipate any indirect economic effects to your business as a result of the proposed Body Art Regulations

Yes

Please explain.

the pandemic hit the tattoo industry hard in many ways. with these regulations it would take us even longer to get back on our feet from after quarantine.

riley baxter Body Art Body art Friday, January 14, 2022 5:18:31 PM From: To: Subject: Date:

necessary to or	and return this business impact survey for the proposed Body Art Regulations. You can add additional pages as emplete your responses. A copy of the proposed regulations can be found at www.snhd.infa/bodyartrevisions.
1	Pease review the regulations thoroughly to assist with your response. All questions are required.
1. Business Name	2. Name of Person Completing Survey
3. Will the propose	d Body Art Regulations impose a direct and significant economic burden upon your business? Please explain.
Estimate in dollars	I cannot speak on piercing since I don't have it in the shop but during a tattoc procedure, we do encounter very minimal blood droplets. I would NOT consider the amount of blood from the process of an epidermal abrasion being acknowledges as a quartify to justify it as binhazard to an extent where a tattoo shop excidenced to purchase separate receptacles, purchase beforegardes, purchase before are storage area-income and also pruchase.
aily/monthly/yearly?	weekly/monthly pickup or disposal service. This amount of accommodations would impact the shop drastically.
	receptacles and additional room for treating and storing biohazard waste will require most tattoo shops to fire some tattoo artists in order to accommodate for the extra room needed for the revised regulations.
5. Will the propose	d Body Art Regulations have an estimated beneficial economic effect on your business? Please explain:
Estimate in dollars	losing tattoo artists to accommodate for storage space and the expense of providing a build-out for additional sanitized room, labeling, materials, packaging, storing, etc will have an enormous negative impact on every tattoo shop.
e. Do you anticipal	te any indirect economic effects to your business as a result of the proposed Body Art Regulations? Please explain:
	procedure and the second secon



Proposed Body Art Regulations Business Impact Survey

Please complete and return this business impact survey for the proposed Body Art Regulations. You can add additional pages as necessary to complete your responses. A copy of the proposed regulations can be found at www.snhd.info/bodyartrevisions.

Please review the regulations thoroughly to assist with your response. All questions are required.

1. Business Name		2. Name of Person Comple	eting Survey						
THREE	ARROWS TATTOO	MATHILDA	DAO						
3. Will the propose	d Body Art Regulations impose a direct	and significant economic burd	en upon your business?						
Yes No	Please explain.		_						
Estimate in dollars	Since we do not have piercing services, I of droplets in the daily tattooing procedure. I separate receptacles, biohazard bags, lab monthly disposal/pickup services. This ame economically.	do not consider it a biohazard to els, and all the necessary storage	the extent of needing purchases of for all listed, in addition to weekly/						
4. Will the propose	d Body Art Regulations directly restrict	the formation, operation, or exp	pansion of your business?						
Ì 3 (□	Please explain. Tattoo shops are a tight fitting narrow space. The regulations would require more receptacles and more spacial expansions. We would need more room for treating and storing biohazard waste, which would lead to the need of firing artists. Less artists, less room for work and customers, merchandise and supplies, more room for health operations that aren't deemed necessary in the eyes of a tattooer in a functioning tattoo shop.								
5. Will the propose	d Body Art Regulations have an estimat	ed <u>beneficial</u> economic effect (on your business?						
Estimate in dollars	Please explain. I do not believe that there would be any build think shops sould lose artists and space, a construction in shops. The need for addition will have an enormous negative impact on	as well as be financially impacted nal sanitation rooms, labeling, ma	with the need for additional						
6. Do you anticipat	e any indirect economic effects to your	business as a result of the pro	posed Body Art Regulations?						
Yes No	Please explain. The tattoo industry has already been strugartists, supply issues, and higher/more cosmany livelihood situations. Many are alreategulations pass, clients will be placed in mand many artists would either lose business home, mobile tattoos, and choose other mand many artists.	tly sanization. With these propose dy experiencing difficulties with th nore expensive situations to makeu s, or chose unsavory routes, such	d regulations, it would worsen e cost of working. If these p for the new regulations' costs, as unregulated working from						

Please return this before January 15, 2022. Email to bodyart@SNHD.org; mail to PO Box 3902, Las Vegas NV 89127; or deliver in person to the Environmental Health Office at 333 N. Rancho Dr., Ste. 450, Las Vegas, NV 89106.



Proposed Body Art Regulations Business Impact Survey

Please complete and return this business impact survey for the proposed Body Art Regulations. You can add additional pages as necessary to complete your responses. A copy of the proposed regulations can be found at www.snhd.info/bodyartrevisions.

Please review the regulations thoroughly to assist with your response. All questions are required.

1. Business Name		2. Name of Person Completing Survey
Three /	Arrows Tattoo	Robert Simmons
3. Will the proposed	l Body Art Regulations impose a direct a	nd significant economic burden upon your business?
Yes No	Please explain.	
Estimate in dollars paily/monthly/yearly?	blood droplets. I would NOT consider the amour as a quantity to justify it as biohazard to an ex purchase biohazard bags, purchase biohazard la	in the shop but during a tattoo procedure, we do encounter very minimal to follood from the process of an epidermal abrasion being acknowledged tent where a tattoo shop would need to purchase separate receptacles, abels, purchase and build an entire storage area/room and also purchase a . This amount of accommodations would impact the shop drastically.
D D	l Body Art Regulations directly restrict th	ne formation, operation, or expansion of your business?
X \(\bar{\pi}\)	Tattoo shops are usually a tight-fitted receptacles and additional room for tattoo shops to fire some tattoo artis	space as is, the regulations requiring the shop for more retreating and storing biohazard waste will require most sts in order to accommodate for the extra room needed the revised regulations.
	Please explain. losing tattoo artists to accommoda build-out for additional sanitized r	d beneficial economic effect on your business? ate for storage space and the expense of providing a oom, labeling, materials, packaging, storing, etc will negative impact on every tattoo shop.
6. Do you anticipate	e any indirect economic effects to your b	usiness as a result of the proposed Body Art Regulations?
× □	In this time of our current economic experiencing a hard time keeping up we tattoo artists/shops would need to chart	c situation, world-wide, tattoo artists/shops are already ith the cost of working. If these biohazard regulations pass, ge more. In turn, we would lose business, further promoting native" (i.e. unregulated house and mobile tattoos)

Please return this before January 15, 2022. Email to bodyart@SNHD.org. mail to PO Box 3902, Las Vegas NV 89127; or deliver in person to the Environmental Health Office at 333 N. Rancho Dr., Ste. 450, Las Vegas, NV 89106.

From: To: Subject: Date:	Babes with Blades Microblading Body Art New Body Art Regulations Business Impact Survey Submission Wednesday, December 29, 2021 2:53:09 PM
1. Bus	iness Name
В	Babes with Blades Microblading
2. Nam	ne of person completing survey
N	Malia Patrocinio
3. Will busine	the proposed Body Art Regulations impose a direct and significant economic burden upon your ess?
	• No
	the proposed Body Art Regulations directly restrict the formation, operation, or expansion of usiness?
	• No
5. Will busine	the proposed Body Art Regulations have an estimated beneficial economic effect on your ess?
	• No
_	you anticipate any indirect economic effects to your business as a result of the proposed Body gulations
	• No

From: To: Subject: Date:	Beauty by Okubo Body Art New Body Art Regulations Business Impact Survey Submission Thursday December 16, 2021 9:44:26 PM
Date:	Thursday, December 16, 2021 8:44:36 PM
1. Business I	Name
Beauty I	by Okubo
2. Name of p	erson completing survey
Renata	o Pickering
3. Will the probusiness?	oposed Body Art Regulations impose a direct and significant economic burden upon your
• 1	No
4. Will the proyour busines	oposed Body Art Regulations directly restrict the formation, operation, or expansion of ss?
• 1	No
5. Will the probusiness?	oposed Body Art Regulations have an estimated beneficial economic effect on your
• 1	No
6. Do you and Art Regulation	ticipate any indirect economic effects to your business as a result of the proposed Body ons

No

ATTACHMENT J



MINUTES

SOUTHERN NEVADA HEALTH DISTRICT WORKSHOP FOR PROPOSED BODY ART **REGULATIONS**

February 4, 2022 – 11:00 a.m. Meeting was conducted virtually via Webex Events

STAFF PRESENT: Karla Shoup - Consumer Health Programs Manager

Mark Bergtholdt - Supervisor, Special Programs

Dante Merriweather - Senior Environmental Health Specialist, Special Programs

Michelle Goodsell – Environmental Health Specialist II, Special Programs

ALSO PRESENT: Justine Marciano, Igor Montano, Lani Gillespie, Lani Soleil, Emily Rocha, (via Webex Events)

Kathy David-Rees. Emily Eichorn, Edward Wynder, Tyson Taumaoe, Vanessa

Nornberg-Barey, Josh Peattie, Dale Parris, Kalawelo Kaiwi

I. INTRODUCTORY REMARKS and INTRODUCTION OF SNHD STAFF

Mark Bergtholdt introduced the SNHD staff members attending the meeting. He called the meeting to order at 11:04 a.m.

Mark Bergtholdt stated the Health District would be taking public comments on any agenda item in the meeting. He requested that specific comments on the regulations be held until agenda item three. Mr. Bergtholdt said a presentation on the proposed draft regulations would occur after the first public comment. He stated the Health District would then receive comments on the proposed changes and that it was an opportunity for attendees to provide input. Mr. Bergtholdt said there would be a second period for public comments, and then some final words before closing the meeting.

Mark Bergtholdt said the proposed regulations with changes could be found on the Health District website at www.snhd.info/bodyartregs in the document titled "Redline Version of Proposed Body Art Regulations Posted December 6, 2021."

II. 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.

Mark Bergtholdt opened the First Public Comment portion of the meeting and requested attendees raise their hand (via Webex) if they would like to participate. Seeing no one, he closed the First Public Comment portion of the workshop.

III. PUBLIC COMMENTS TAKEN REGARDING PROPOSED SOUTHERN NEVADA HEALTH DISTRICT REGULATIONS GOVERNING THE SANITATION AND SAFETY OF BODY ART ESTABLISHMENTS

Mark Bergtholdt stated that after receiving comments regarding the draft regulations, the Health District is proposing the following changes to the final version of the regulations that will be presented to the Board of Health in March:

The first change is in Section 3.13.2.8. This sets the conditions needing to be met where a sterilizer can be located in a workstation.

The second change if in Section 4.4.4. This provides for a facility to sterilize equipment in one facility and then transport it to another.

The third change is in Section 5.1.3. It requires facilities to meet only the requirements of the regulations and not all federal, state, and local requirements.

The fourth change is in Section 6.1.5 and sets a minimum age for a body art patron for applying body art not exempted by the regulations.

The fifth change is in Section 6.5.1.3. "Kept in digital or print form" has been removed.

The sixth change is in Section 7.4.7. The standards of jewelry have been changed so that any jewelry is obtained from commercial suppliers. Any custom-made jewelry must meet the specific ASTM standard for the material. The Health District is also proposing a change where any initial piercing jewelry must not have any exposed threads when assembled.

The seventh change is in Section 7.4.8. The Health District is proposing to "roll up" the Material Certificate into the jewelry receipt. All jewelry will need to be able to be traced back to the manufacturer. The information on the receipt should identify where and when the jewelry was manufactured.

The last change is in Section 8. The Health District is proposing to add a definition to microblading that microblading is a specific technique limited to the face. The Health District is also proposing to change "journey" artist to "mentor," and limiting the number of apprentices to five per mentor for body art and fifteen per mentor for microblading.

Mark Bergtholdt requested that anyone who would like to comment on these changes raise their hand (via Webex) or type in the Chat box to be recognized. He said he would list each of the changes and take comments on them.

1. <u>Section 3.13.2.8</u> - This sets the conditions needing to be met where a sterilizer can be kept at a workstation.

Seeing no comments on Section 3.13.2.8, Mark Bergtholdt moved to Section 4.4.4.

2. <u>Section 4.4.4</u> - Provides for a facility to sterilize equipment in one facility then transport it to another.

Seeing no comments on Section 4.4.4, Mark Bergtholdt moved to Section 5.1.3.

3. <u>Section 5.1.3</u> - Requires facilities to meet only the requirements of the regulations and not all federal, state, and local requirements.

Lani Gillespie commented that if industry is not following any FDA or state standards, what is the point of the health department. Mark Bergtholdt stated that what the Health District is saying that industry is not required to meet any additional regulations above and beyond what the regulations state. Ms. Gillespie asked, "The regulations set forth by the health department?" Mr. Bergtholdt stated yes.

4. <u>Section 6.1.5</u> – This sets a minimum age for a body art patron for applying body art not exempted by the regulations.

Seeing no comments on Section 6.1.5, Mark Bergtholdt moved to Section 6.5.1.3.

5. <u>Section 6.5.1.3</u> – Patron consent forms must be kept on premises. Redundant language removed.

Seeing no comments on Section 6.5.1.3, Mark Bergtholdt moved to Section 7.4.7.

6. Section 7.4.7 - The standards of jewelry have been changed so that jewelry is obtained from commercial suppliers. Any custom-made jewelry must meet the specific ASTM standard for the material. The Health District is also proposing a change where any initial piercing jewelry must not have any exposed threads when assembled.

Lani Gillespie commented that not all commercial jewelry suppliers meet ASTM or ISO standards. Mark Bergtholdt stated that is correct. He said it is the responsibility of the jewelry supplier to have materials manufactured in a safe manner that does not allow material to leach or fall out of the metals. Ms. Gillespie commented that not all jewelry suppliers, especially ones overseas, have standards like ASTM or ISO. Mr. Bergtholdt said he understood, but the liability will fall on the supplier.

Lani Gillespie commented that the Health District is eliminating Section 7.4.9 - material certificates - which is the only way for manufacturers to prove their materials are meeting standards. Mark Bergtholdt stated the liability falls on the supplier to sell a safe product. Ms. Gillespie commented that not all of them do, so how does the shop show that they are. Mr. Bergtholdt stated that is a liability and becomes a civil matter. Karla Shoup stated the Health District is not requiring them, and if they are a commercial jewelry supplier, they can meet whatever safety standards are relevant for their location. Lani Gillespie commented the relevant standards are ASTM or ISO. Mark Bergtholdt stated the are many other standards that are equivalent, and that the Health District decided to say the liability goes back to the manufacturer and not the Health District. Ms. Shoup stated the Health District is trying to get industry to obtain jewelry from commercial manufacturers rather than people making jewelry in their garage. Ms. Gillespie commented that her point is that not every jewelry supplier conforms to these standards, which are important. She commented that Section 7.4.7 states any custom manufactured jewelry needs to meet ASTM or ISO standards, so why wouldn't a commercial jewelry supplier have to do the same? Mr. Bergtholdt stated the commercial jewelry supplier regulation is enforced by the liability laws of the state. He said the Health District does not need get into an area where there is a requirement for ASTM that is above and beyond the liability of the supplier. Mark Bergtholdt said the jewelry must come from a commercial supplier and it is the commercial supplier's responsibility to provide safe material. Lani Gillespie asked if the correct way to confirm suppliers are providing safe materials is by following ASTM or ISO standards. Mr. Bergtholdt stated that was a business decision that

could be chosen, or the business could choose to obtain jewelry from other suppliers that do not meet those standards but may sell materials that meet other standards. Ms. Gillespie asked if Mr. Bergtholdt knew what the other standards were, as jewelry mass-produced in other countries do not have these standards. He said he understood, but that the Health District has chosen to go with liability falling on the business supplying the jewelry. Mark Bergtholdt stated it is the responsibility of the person selling the material to make sure it is safe, and that a business owner can choose to obtain material from one supplier or another. Lani Gillespie commented to confirm that he was saying that business owners have the option of purchasing from a mass commercial jewelry supplier that is providing safe body jewelry or not. Mr. Bergtholdt said the jewelry must be obtained from a commercial manufacturer. Ms. Gillespie commented that he did not seem to understand that not all commercial jewelry suppliers produce a product made of safe materials. Mr. Bergtholdt said all commercial suppliers are subject to the liability provisions of the law and the Health District is not taking a position on what standards are appropriate for body jewelry, just that it must come from a commercial supplier. He stated the Health District did not want to see jewelry made in a garage (for lack of a better word).

Lani Gillespie asked if the Health District was taking "evidence" in any manner besides this meeting. Mark Bergtholdt stated she could speak at the Board of Health meetings if she wished, or if she would like to propose something different then she could propose it. He said this is the stance the Health District is currently taking.

Emily Eichorn commented that she thought the Health District was trying to offer a layer of protection to industry so that no one could go after artists because they did not manufacture the jewelry. She asked if this was correct. Mark Bergtholdt stated this is correct, and that it is a legal matter.

Lani Gillespie commented to ask why ASTM standards are being added if the suppliers they are purchasing jewelry from will not be held to that standard. Mark Bergtholdt stated the ASTM standard is for custom jewelry, so if someone makes jewelry in their shop, they need to use material that meets ASTM standards. Ms. Gillespie asked how the Health District would be able to tell that such places are using materials that meet ASTM or ISO standards. Mr. Bergtholdt stated that is why the receipt is needed. She said the mill certificates are the only way to know, and he said that is why the receipts must have the information to trace back the material. Lani Gillespie asked if this would mean mill certificates, and Mark Bergtholdt stated that would be one way to do it.

7. Section 7.4.8. The Health District is proposing to "roll up" the Material Certificate into the jewelry receipt. All jewelry will need to be able to be traced back to the manufacturer. The information on the receipt should identify where and when the jewelry was manufactured.

Vanessa Nornberg-Barey commented via Webex chat requiring a lot number on jewelry is problematic and actually unnecessary because what matters in terms of safety is not the manufacturing process, but the materials used in the manufacture of the jewelry. This information is provided on the metal certificates that should be required from any reputable manufacturer. Lot numbers are problematic, because in order to guarantee the integrity and safety of the piece of jewelry, the metal must bear no marks, nicks, or crevices. In addition, even if the manufacturer were to mark it on the bag in which the jewelry is sold, that bag or packaging would be removed and discarded at the time the piece is sterilized, making it difficult for the piece to be tracked. Finally, most jewelry used in initial piercings looks the same and is difficult to distinguish between manufacturers. Mark Bergtholdt stated that the Health

District understood that the lot number only needs to be recorded if one is provided by the supplier. He stated industry needs to keep copies of the receipts for jewelry that is purchased. Ms. Nornberg-Barey commented that receipts are easy to provide and keep, but the wording calls for lot numbers and questioned if the wording would be amended. Mr. Bergtholdt said the Health District can take that under consideration.

8. <u>Section 8.</u> The Health District is proposing to add a definition to microblading that microblading is a specific technique limited to the face. The Health District is also proposing to change "journey" artist to "mentor," and limiting the number of apprentices to five per mentor for body art and fifteen per mentor for microblading.

Emily Eichorn commented that this section confused her in past meetings. She stated she has a body art card and can do microblading and machine work. Ms. Eichorn asked if there would be two separate cards in the future – one for microblading just on the face and one for permanent makeup or body art. Mark Bergtholdt stated that the definition of body art includes microblading so only the one card would be needed for both microblading and body art. Emily Eichorn stated she would be renewing her body art card next week and wanted to verify it would be a body art card. Mr. Bergtholdt stated this is correct, and it would always be a body art card.

Emily Eichorn commented again to ask if this would cover camouflage. Mark Bergtholdt stated it would include camouflage, and that if done through permanent makeup techniques would need to be done under a body art card and camouflage done through microblading techniques would be limited to the face.

Mark Bergtholdt asked if there were any further comments on any of the regulations. Hearing none, he moved to the second public comment portion of the agenda.

IV. SECOND PUBLIC COMMENTS: A period devoted to comments by the general public, if any, on any subject, and discussion of those comments.

Mark Bergtholdt stated the second public comment portion of the meeting would last no less than two minutes and could go as long as wanted by attendees. He said comments could be on any subject and requested anyone wishing to comment raise their hand (via Webex) before speaking.

Seeing no comments, Mark Bergtholdt closed the Second Public Comments portion of the workshop.

V. <u>ADJOURNMENT</u>

Mark Bergtholdt stated this is the last of the public workshops. Using the input provided at the previous three workshops and the fifty-four surveys submitted, the business impact statement has been drafted and is in final review. The business impact statement will be published on February 9th and heard before the Board of Health at the February 24th meeting at 9:00 a.m. A link to that meeting can be found on the agenda posted on the Health District website. The agenda will be posted on the body art regulation page at www.snhd.info/bodyartregs. Once the business impact statement has been heard, the regulations will be heard at the March 24th meeting at 9:00 a.m. The link for that meeting will also be included on that page.

Mark Bergtholdt thanked everyone for their participation and adjourned the meeting at 11:33 a.m.



NOTICE PUBLIC WORKSHOP AGENDA PROPOSED BODY ART REGULATIONS

11:00 a.m., February 4, 2022
Southern Nevada Health District
THIS MEETING WILL BE HELD VIRTUALY
THERE WILL BE NO IN PERSON OPTION

To participate remotely either:

- Use this Webex Event address for attendees: https://snhd.webex.com/snhd/onstage/g.php?MTID=ec909eeefaf8e739de18abbeabc5a248d
- This link is for public attendees only.
- Call into the meeting:
 - o Dial (415) 655-0001 and
 - Use Access Code 2550 840 2089
- For other governmental agencies who use video conferencing capability
 - o The video address is 25508402089@snhd.webex.com

I.	Introductory Remarks	Introductory Remarks and Introduction of SNHD Staff by EH Staff
II.	Public Comments	A period devoted to comments by the general public about those items appearing on the agenda. If you wish to speak, please submit request to speak via Webex Raise Your Hand or Chat functions. Comments will be limited to five (5) minutes per speaker. If any member of the panel wishes to extend the length of a presentation, they can upon request of the speaker.
III.	Public Comments Taken Regarding Proposed Southern Nevada Health District Regulations Governing the Sanitation and Safety of Body Art Establishments	EH Staff Link to draft regulations: https://www.southernnevadahealthdistrict.org/permits-and-regulations/body-art/body-art-regulation-revisions/
IV.	Second Public Comment	A period devoted to comments by the general public, if any, and discussion of those comments, about matters relevant to the Health District Board's jurisdiction will be held. Comments will be limited to five (5) minutes per speaker. If any member of the panel wishes to extend the length of a presentation, they can upon request of the speaker. See above for instructions for



submitting public comment.

V. Adjournment

EH Staff

(cont.)

THIS AGENDA HAS BEEN POSTED IN THE MAIN LOBBY OF THE FOLLOWING LOCATIONS: 1) CLARK COUNTY GOVERNMENT CENTER, 500 S. Grand Central Parkway, Las Vegas, NV; 2) LAS VEGAS CITY HALL, 495 S. Main Street, Las Vegas, NV; 3) NORTH LAS VEGAS CITY HALL, 2250 N. Las Vegas Boulevard, North Las Vegas, NV; 4) HENDERSON CITY HALL, 200 Water Street, Henderson, NV; 5) BOULDER CITY, CITY HALL, 401 California Avenue, Boulder City, NV; 6) MESQUITE CITY HALL, 10 E. Mesquite Boulevard, Mesquite, NV; 7) SOUTHERN NEVADA HEALTH DISTRICT, 280 S. Decatur Boulevard, Las Vegas, NV; and 8) CLARK COUNTY COMMUNITY RESOURCE CENTER, 55 Civic Way, Laughlin, NV. This Agenda is also available on the Southern Nevada Health District Internet Website at https://www.southernnevadahealthdistrict.org and on the Nevada Public Notice website at https://www.southernnevadahealthdistrict.org and on the Nevada Public Notice website at https://www.southernnevadahealthdistrict.org and on the Nevada Public Notice website at https://www.southernnevadahealthdistrict.org and supporting materials, please contact Erin O'Malley at (702) 759-1626.

NOTE: Disabled members of the public who require special accommodations or assistance at the meetings are requested to notify Erin O'Malley, Administrative Assistant at the Southern Nevada Health District, by calling (702) 759-1626.

tendance (Event ID	Event Key Event Name	Event Start Date	Event Start Time	Event End Time	FirstName L	astName	Email	Registered	Attended	d Okay to	seTitle	Company	Phone	Address 1 Addre	s 2 City	State/P	rovPostal/Zip Code	Country/Region
1 216516654461385542	25508402089 Workshop for Edits to Proposed Body Art Regulations	February 4, 2022 San Francisco Time	11 00 am San Francisco Time	1 00 pm San Francisco Time	justine n	narciano		Yes	Yes	No		Banter by Piercing Pagoda						United States of America
2 216516654461385542	25508402089 Workshop for Edits to Proposed Body Art Regulations	February 4, 2022 San Francisco Time	11 00 am San Francisco Time	1 00 pm San Francisco Time	Igor N	∕lontano		Yes	Yes	Yes		Black Rhino Tattoos			Las Vegas	. NV	89142	United States of America
3 216516654461385542	25508402089 Workshop for Edits to Proposed Body Art Regulations	February 4, 2022 San Francisco Time	11 00 am San Francisco Time	1 00 pm San Francisco Time	Igor N	∕lontano		Yes	Yes	Yes		Black Rhino Tattoos			Las Vegas	. NV	89142	United States of America
4 216516654461385542	25508402089 Workshop for Edits to Proposed Body Art Regulations	February 4, 2022 San Francisco Time	11 00 am San Francisco Time	1 00 pm San Francisco Time	lani g	illespie		Yes	Yes	No	Owner	La Linea Body Art						United States of America
5 216516654461385542	25508402089 Workshop for Edits to Proposed Body Art Regulations	February 4, 2022 San Francisco Time	11 00 am San Francisco Time	1 00 pm San Francisco Time	Lani S	oleil		Yes	Yes	No	Owner	La Linea Body Art						United States of America
6 216516654461385542	25508402089 Workshop for Edits to Proposed Body Art Regulations	February 4, 2022 San Francisco Time	11 00 am San Francisco Time	1 00 pm San Francisco Time	Lani S	oleil		Yes	Yes	No	Owner	La Linea Body Art						United States of America
7 216516654461385542	25508402089 Workshop for Edits to Proposed Body Art Regulations	February 4, 2022 San Francisco Time	11 00 am San Francisco Time	1 00 pm San Francisco Time	Lani S	oleil		Yes	Yes	No	Owner	La Linea Body Art						United States of America
8 216516654461385542	25508402089 Workshop for Edits to Proposed Body Art Regulations	February 4, 2022 San Francisco Time	11 00 am San Francisco Time	1 00 pm San Francisco Time	Emily F	tocha		Yes	Yes	No	manager	seven tattoo studio			Lv	Nv	89118	United States of America
9 216516654461385542	25508402089 Workshop for Edits to Proposed Body Art Regulations	February 4, 2022 San Francisco Time	11 00 am San Francisco Time	1 00 pm San Francisco Time	Kathy D	Davis-Rees		Yes	Yes	Yes	Corporate Initiatives Director	NIMA			Las Vegas	. NV	89169	United States of America
10 216516654461385542	25508402089 Workshop for Edits to Proposed Body Art Regulations	February 4, 2022 San Francisco Time	11 00 am San Francisco Time	1 00 pm San Francisco Time	Emily E	ichorn		Yes	Yes	Yes	Fired up Beauty Lounge	Fired up Beauty Lounge			Henderso	n NV	89052	United States of America
11 216516654461385542	25508402089 Workshop for Edits to Proposed Body Art Regulations	February 4, 2022 San Francisco Time	11 00 am San Francisco Time	1 00 pm San Francisco Time	Edward V	Vynder		Yes	Yes	No		SNHD						United States of America
12 216516654461385542	25508402089 Workshop for Edits to Proposed Body Art Regulations	February 4, 2022 San Francisco Time	11 00 am San Francisco Time	1 00 pm San Francisco Time	Tyson T	aumaoe		Yes	Yes	Yes		Hideout tattoo						United States of America
13 21651665446138554	25508402089 Workshop for Edits to Proposed Body Art Regulations	February 4, 2022 San Francisco Time	11 00 am San Francisco Time	1 00 pm San Francisco Time	Vanessa N	lornberg-Barey		Yes	Yes	Yes	CEO	Bombshell Accessories, Inc			SECAUCU	IS NJ	07094	United States of America
14 21651665446138554	25508402089 Workshop for Edits to Proposed Body Art Regulations	February 4, 2022 San Francisco Time	11 00 am San Francisco Time	1 00 pm San Francisco Time	Vanessa N	lornberg-Barey		Yes	Yes	Yes	CEO	Bombshell Accessories, Inc			SECAUCU	IS NJ	07094	United States of America
15 216516654461385542	25508402089 Workshop for Edits to Proposed Body Art Regulations	February 4, 2022 San Francisco Time	11 00 am San Francisco Time	1 00 pm San Francisco Time	Josh P	eattie		Yes	Yes	Yes		Black & Wadhams						United States of America
16 21651665446138554	25508402089 Workshop for Edits to Proposed Body Art Regulations	February 4, 2022 San Francisco Time	11 00 am San Francisco Time	1 00 pm San Francisco Time	Dale P	arris		Yes	Yes	Yes	President	Metal Mafia			Secaucus	NJ	07094	United States of America
17 21651665446138554	25508402089 Workshop for Edits to Proposed Body Art Regulations	February 4, 2022 San Francisco Time	11 00 am San Francisco Time	1 00 pm San Francisco Time	Dale P	arris		Yes	Yes	Yes	President	Metal Mafia			Secaucus	NJ	07094	United States of America
18 21651665446138554	25508402089 Workshop for Edits to Proposed Body Art Regulations	February 4, 2022 San Francisco Time	11 00 am San Francisco Time	1 00 pm San Francisco Time	Dale P	arris		Yes	Yes	Yes	President	Metal Mafia			Secaucus	NJ	07094	United States of America
19 21651665446138554	25508402089 Workshop for Edits to Proposed Body Art Regulations	February 4, 2022 San Francisco Time	11 00 am San Francisco Time	1 00 pm San Francisco Time	Dale P	arris		Yes	Yes	Yes	President	Metal Mafia			Secaucus	NJ	07094	United States of America
20 21651665446138554	25508402089 Workshop for Edits to Proposed Body Art Regulations	February 4, 2022 San Francisco Time	11 00 am San Francisco Time	1 00 pm San Francisco Time	Dale P	arris		Yes	Yes	Yes	President	Metal Mafia			Secaucus	NJ	07094	United States of America
21 21651665446138554	25508402089 Workshop for Edits to Proposed Body Art Regulations	February 4, 2022 San Francisco Time	11 00 am San Francisco Time	1 00 pm San Francisco Time	Dale P	arris		Yes	Yes	Yes	President	Metal Mafia			Secaucus	NJ	07094	United States of America
22 216516654461385542	25508402089 Workshop for Edits to Proposed Body Art Regulations	February 4, 2022 San Francisco Time	11 00 am San Francisco Time	1 00 pm San Francisco Time	Kalawelo K	aiwi		Yes	Yes	Yes		Primal Soul Studio			Henderso	n NV	89011	United States of America

Attend

CERTIFICATE OF POSTING

OPEN MEETING NOTICE NRS 241.020(3)(b)

I certify that I posted the public notice and agenda for the meetings identified below *more than three* working days prior to the meeting in accordance with NRS 241.020 (3)(b):

SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

February 4, 2022 Friday, 11:00 a.m., virtually.

Name of Location:	Southern Nevada Health District	_
Address of Location:	280 South Decatur Boulevard	
City, State, ZIP:	Las Vegas, NV 89107	
Date/Time of Posting:	1-25-2022 11:30 am	_
Printed Name:	Heather Hanoff	
Signature:	Heather Hanoff	
	V 1/	

Please return this certificate via FAX to: Southern Nevada Health District (702) 759-1458

Thank you.

Nevada Public Notice Website

Government	
City	^
County	
K-12	
Higher Education	
Special Districts	
Libraries	¥
Entity	
Springs Preserve Board of Trustees	•
Stagecoach General Improvement District	
State Grazing Board District N-3	
Sun Valley General Improvement District	
Tahoe Douglas Visitors Authority	
Tahoe Water Suppliers Association	
	*
Public Body	
Southern Nevada Health District	A
	~

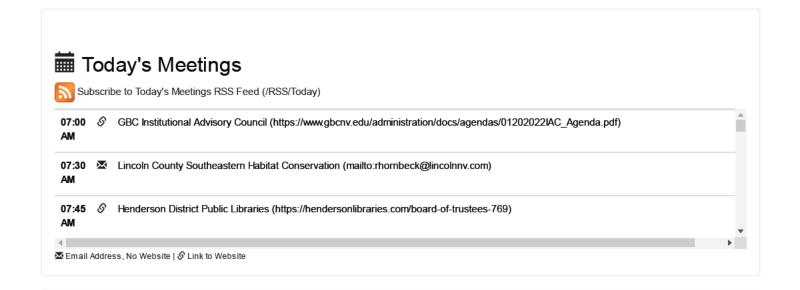
Results for Southern Nevada Health District

Subscribe to this public body's notice RSS feed (/RSS/PublicBody/1732)

Results are limited to the last 7 days and for all dates in the future.

No	tice	Date Posted	Event Date	Time	Status	Type
S	Apex Materials LLC Moccasin Rd - Recycling Center (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	1/5/2022	1/13/2022	9:00 AM	Scheduled	Workshop
S	Proposed Body Art Regulations Workshop Agenda (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	1/6/2022	1/13/2022	1:00 PM	Scheduled	Workshop

S	Proposed Body Art Regulations Workshop Revised Agenda (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	1/11/2022	1/13/2022	1:00 PM	Revised	Workshop
S	Proposed Body Art Regulations Workshop (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	1/13/2022	1:00 PM	Scheduled	Workshop
S	Regional Trauma Advisory Board (https://media.southernnevadahealthdistrict.org/download/meetings/rtab/2022/20220119/20220119-rtab-agenda.pdf)	1/12/2022	1/19/2022	2:30 PM	Scheduled	Meeting
S	Southern Nevada District Board of Health - Public Health Advisory Board Meeting (https://www.southernnevadahealthdistrict.org/meetings/january-21-2022-900-a-m/)	1/14/2022	1/21/2022	9:00 AM	Scheduled	Meeting
S	District Health Officer Annual Review Committee (https://www.southernnevadahealthdistrict.org/meetings/january-21-2022-200-p-m/)	1/18/2022	1/21/2022	2:00 PM	Scheduled	Meeting
S	SNCHC Finance & Audit Committee Meeting (https://www.southernnevadahealthdistrict.org/meetings/january-25-2022-1100-a-m/)	1/18/2022	1/25/2022	11:00 AM	Scheduled	Meeting
S	Southern Nevada District Board of Health - Finance Committee (https://www.southernnevadahealthdistrict.org/meetings/january-25-2022-100-pm/)	1/18/2022	1/25/2022	1:00 PM	Scheduled	Meeting
S	Southern Nevada Health District Facilities Advisory Board (https://snhd.webex.com/snhd/onstage/g.php?MTID=ee651f6a2c1f32d0047da67671df6724d)	1/18/2022	1/25/2022	3:00 PM	Scheduled	Meeting
S	SNCHC Quality Credentialing and Risk Management Committee (https://www.southernnevadahealthdistrict.org/meetings/january-26-2022-200-p-m/)	1/18/2022	1/26/2022	2:00 PM	Scheduled	Meeting
S	Proposed Body Art Regulations Workshop (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	1/20/2022	2/4/2022	11:00 AM	Scheduled	Workshop
S	Proposed Body Art Regulations Business Impact (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	2/24/2022	9:00 AM	Scheduled	Hearing
S	Proposed Body Art Regulations (https://www.southernnevadahealthdistrict.org/news-info/public-notices/)	12/6/2021	3/24/2022	9:00 AM	Scheduled	Hearing



Public Notice Access

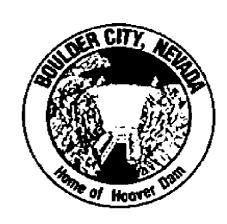
Public Bodies wishing to post public notices must first register (/Account/Register) for an account. It is recommended to use your government issued email address.

Register (/Account/Register)

Send an email to deptadmin@admin.nv.gov (mailto:deptadmin@admin.nv.gov) with the following information:

- 1. Your name and email address.
- 2. The type of Government (i.e. State, City, County, K-12, Higher Education, Special Districts).
- 3. The area or "Entity" your Government type represents. For example, if your Government type is County, tell us which County i.e. Churchill, Clark, Douglas,
- 4. The name of the Public Body (aka Committee/Council/Board) you will be posting for? Please list all of the Public Bodies you will be responsible to post notices for
- 5. After you send the email with this information, you will receive an email or phone call back from the Department of Administration's Director's Office to confirm your account has been successfully enrolled. If you have questions, please email deptadmin@admin.nv.gov (mailto:deptadmin@admin.nv.gov).

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FROM

TO

Name: Bridgette Rodriguez

Phone: 702-293-9208 Fax: 17027591486

E-mail: Brodriguez@bcnv.org

Sent: 1/20/22 at: 10:24:20 AM 2 page(s) (including cover)

Subject: Attached Image

Comments:

1/20/2022 9:55 AM FROM: SoNV Health District TO: +17022939245 P.

OPEN MEETING NOTICE

NRS 241.020(3)(b)

I certify that I posted the public notice and agenda for the meetings identified below more than three working days prior to the meeting in accordance with NRS 241.020 (3)(b);

SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

February 4, 2022 Friday, 11:00 a.m., virtually.

Name of Location:	Boulder City, City Hall					
Address of Location:	401 California Avenue					
City, State, ZIP:	Boulder City, NV 89005					
Date/Time of Posting:		·				
Printed Name:	Bridgette Podriguez					
Signature:	B. Ridrag	BERKENNERHENDE FESTENSTENSSSEG				

Please return this certificate via FAX to: Special Programs Section, Southern Nevada Health District (702) 759-1486

Thank you.

2

1/20/2022 9:55 AM FROM: SoNV Health District TO: +17024553558 P.

CERTIFICATE OF POSTING

OPEN MEETING NOTICE NRS 241.020(3)(b)

I certify that I posted the public notice and agenda for the meetings identified below more than three working days prior to the meeting in accordance with NRS 241.020 (3)(b):

SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

February 4, 2022 Friday, 11:00 a.m., virtually.

Name of Location:	Clark County Government Center
Address of Location:	500 South Grand Central Parkway
City, State, ZIP:	Las Vegas, NV 89155
Date/Time of Posting: Printed Name: Signature:	MARCIC Whe/AN Please return this certificate via FAX to:
	Special Programs Section, Southern Nevada Health District

Thank you.

(702) 759-1486

1/20/2022 9:57 AM FROM: SoNV Health District TO: +17023824803

CHY CLERK

CERTIFICATE OF POSTING OPEN MEETING NOTICE NRS 241.020(3)(b)

I certify that I posted the public notice and agenda for the meetings identified below more than three working days prior to the meeting in accordance with NRS 241.020 (3)(b):

SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

February 4, 2022 Friday, 11:00 a.m., virtually.

Name of Location	n. Las Vegas City Hall
Address of Loca	tion: 495 South Main Street
City, State, ZIP:	Las Vegas, NV 89101
·	
Date/Time of Po	sting: 1-20-2022 11.00 Am
Printed Name:	Lanvie Conkins
Signature:	LB J Jan
_	
	Please return this certificate via FAX to:
•	Special Programs Section, Southern Nevada Health District
	(702) 759-1486

Thank you.

CERTIFICATE OF POSTING

OPEN MEETING NOTICE NRS 241.020(3)(b)

I certify that I posted the public notice and agenda for the meetings identified below *more than three* working days prior to the meeting in accordance with NRS 241.020 (3)(b):

SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

February 4, 2022 Friday, 11:00 a.m., virtually.

Name of Location:	Laughlin Clark County Community Resource Center
Address of Location:	55 Civic Way
City, State, ZIP:	Laughlin, NV 89029
Date/Time of Posting: Printed Name: Signature:	tina Gish
	Diament and the state of the st

Please return this certificate via FAX to: Southern Nevada Health District (702) 759-1458

Thank you.

From: Julie Goodsell Fax: 17023465295 To: Fax: (702) 759-1486 Page: 1 of 2 01/20/2022 12:33 PM



 ***************************************	·····	 	

City of Mesquite Postings

Note:

To: From: Julie Goodsell

Phone: (702) 346-5295 * 2208

Fax: (702) 759-1486 Fax: 17023465295

Date: 01/20/2022

Pages: 2

OPEN MEETING NOTICE NRS 241.020(3)(b)

I certify that I posted the public notice and agenda for the meetings identified below more than three working days prior to the meeting in accordance with NRS 241.020 (3)(b):

SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

February 4, 2022 Friday, 11:00 a.m., virtually.

Name of Location:	Mesquite City Hall
Address of Location:	10 East Mesquite Boulevard
City, State, ZIP:	Mesquite, NV 89027
Date/Time of Posting	1.90.9099 19:30 pm
Printed Name:	JULIE GOODSELL
Signature:	Julie Goodsell

Please return this certificate via FAX to: Special Programs Section, Southern Nevada Health District (702) 759-1486

Thank you.

1/20/2022 10:05 AM FROM: SoNV Health District TO: +17026493846 P. 2

CERTIFICATE OF POSTING

OPEN MEETING NOTICE NRS 241.020(3)(b)

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SOUTHERN NEVADA HEALTH DISTRICT PROPOSED BODY ART REGULATIONS WORKSHOP

Taking place at:

February 4, 2022 Friday, 11:00 a.m., virtually.

Name of Location:	North Las Vegas City Hall	
Address of Location: _	2250 North Las Vegas Boulevard	
City, State, ZIP: _	North Las Vegas, NV 89030	<u> </u>
	una la anthana	
Date/Time of Posting:_	1:40 pm Jan 20th 2022	_
Printed Name: _	1 Nustine Masowell	
Signature:	flore Medoney	
	V	

Please return this certificate via FAX to: Special Programs Section, Southern Nevada Health District (702) 759-1486

Thank you.

Mark Bergtholdt

From: Edward Wynder

Sent: Thursday, February 24, 2022 3:10 PM

To: Karla Shoup; Mark Bergtholdt

Subject: FW: MicroBladers

Attachments: Email From Marko Greisen.pdf

Can you please review these suggestions and your response. Also, please include these in the summary of public comments and staff's responses that will be presented to the Board.

Edward Wynder, Esq. Associate General Counsel Southern Nevada Health District 280 S. Decatur Blvd. Las Vegas, NV 89107 702-759-1178 wynder@snhd.org

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From: Joanne M. Aguilar <JMA@juwlaw.com> **Sent:** Thursday, February 24, 2022 2:13 PM **To:** Edward Wynder <wynder@SNHD.ORG>

Cc: Bruce L. Woodbury <blw@juwlaw.com>; Marko Greisen <marko@microbladers.com>

Subject: RE: MicroBladers

THIS EMAIL IS FROM BRUCE L. WOODBURY

Edward,

Thank you for all of your kind assistance regarding the proposed regulations. My client has spelled out for us the existing concerns with the proposal as it stands and has agreed that I can forward it to you without waving attorney-client privilege (See attached email from Marko Greisen, dated February 24, 2022). So, the following are our questions and concerns which I hope can be addressed by you and the staff before contacting Board members. By the way, you have an excellent chairman and group of Board members, as well as a very good staff and legal/department.

- 1. Is the hearing at which final action can be taken on March 24, 2022, at 9 a.m.?
- 2. Since it is much different than tattoos and body piercing shops, what is it about local permanent makeup artists, especially well-established businesses which focus on education and training, that has led to the desire to regulate and limit them? As is often said, "if it ain't broke, don't fix it."

- 3. Our proposals on granting a waiver for an establishment like ours would help a great deal and are justified. That would put the focus on the establishment, not just the mentors.
- 4. A grace period of 10 weeks to replace a mentor who resigns or is terminated is hereby requested in order to prevent an employer from being at the mercy of its mentors-employees.
- 5. Perhaps, as mentioned in one public hearing by a staff person, a designation as a <u>school</u> should be one of the categories for microblading entities because that is essentially what our client's business is.

Please give consideration to these matters and get back to me when you can.

Thanks,

Bruce L. Woodbury

From: Edward Wynder < wynder@SNHD.ORG > Sent: Thursday, February 24, 2022 7:54 AM

To: Bruce L. Woodbury < blw@juwlaw.com > Cc: Joanne M. Aguilar < JMA@juwlaw.com >

Subject: RE: MicroBladers

The regulations do not address this situation.

Edward Wynder, Esq. Associate General Counsel Southern Nevada Health District 280 S. Decatur Blvd. Las Vegas, NV 89107 702-759-1178 wynder@snhd.org

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From: Bruce L. Woodbury < blw@juwlaw.com>
Sent: Wednesday, February 23, 2022 5:22 PM
To: Edward Wynder < wynder@SNHD.ORG>
Cc: Joanne M. Aguilar < JMA@juwlaw.com>

Subject: Re: MicroBladers

Thank you. Is there anything that covers a situation where a mentor resigns or is terminated and another mentor with all of the required experience is not readily available?

Sent from my iPhone

On Feb 23, 2022, at 4:44 PM, Edward Wynder <wynder@snhd.org> wrote:

<image002.jpg>

Edward Wynder, Esq. Associate General Counsel Southern Nevada Health District 280 S. Decatur Blvd. Las Vegas, NV 89107 702-759-1178 wynder@snhd.org

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----Original Message-----From: Edward Wynder

Sent: Wednesday, February 23, 2022 4:42 PM To: Bruce L. Woodbury < blue juwlaw.com > Cc: Joanne M. Aguilar < JMA@juwlaw.com >

Subject: RE: MicroBladers

Bruce, 8.13 of the proposed regulations allow those who hold body art cards at the time the regulations are adopted to apply and received a mentor card without the four year requirement.

Edward Wynder, Esq. Associate General Counsel Southern Nevada Health District 280 S. Decatur Blvd. Las Vegas, NV 89107 702-759-1178 wynder@snhd.org

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----Original Message-----

From: Bruce L. Woodbury <blw@juwlaw.com>
Sent: Wednesday, February 23, 2022 4:04 PM
To: Edward Wynder <wynder@SNHD.ORG>

Cc: Joanne M. Aguilar < JMA@juwlaw.com>

Subject: Re: MicroBladers

Edward,1 or 2 of our mentors may not yet have the required longevity to get a card right away, making the assurance of a waiver for a good existing business essential. I'm verifying that. Thanks

Sent from my iPhone

> On Feb 23, 2022, at 1:18 PM, Edward Wynder <wynder@snhd.org> wrote:

_

>

Joanne M. Aguilar

From: Marko Greisen <marko@microbladers.com>

Sent: Thursday, February 24, 2022 2:03 AM

To: Joanne M. Aguilar

Cc: Bruce L. Woodbury; Danielle Greisen

Subject: Re: Retainer Agreement

Hi Joanne,

Mr. Woodbury asked me during our call earlier today to send him an email of our conversation. He had mentioned that he connected with SNHD, and per his and their conversation, we should currently be good for up to 45 apprentices during the six month period. This was always my understanding. Based on that senario we'd need to always keep two employees on staff full-time in addition to my wife. That would mean we'd have 15 apprentices under my wife, and the two other sets of 15 apprentices under two other artists employed by us. So are student apprentices apprenticing under our employees or MicroBladers? From where I stand, it's the employees right? I mean if that employee were to quit, what would we do with those apprentices who were under them, even though they worked for us and the student paid MicroBladers for 6-months of training?

We welcome regulations, it often helps our industry become safer, and we embrace that, but we feel these regulations are more focused around an individual artist or tattoo shop, and not an established branded permanent makeup academy such as ours. People come to MicroBladers for our training program, not necessarily to apprentice under a certain artist. That's what happens in the tattoo world. It's the reputation of our brand and well constructed continuing education that brings people through our doors. There should be no reason why we can't accept at least 10 students each month or 60 students in a six month period with the minimum of two mentor body art card holders employed. To have two full-time 'mentor' body art card holders on payroll just isn't financially doable without having to increase the apprenticeship tuition cost by 200%. This inturn would affect our business.

Now granted in the proposed regs, it states: **Section 8.13** Existing body art cards: A body artist who holds a body art card at the time these Regulations are adopted can apply for a journey mentor body artist card without the four years' experience before June 30, 2023.

To others, that might sound great, but we would strongly disagree, and here's why. First, let's just say we have our two current employees apply with SNHD for a mentor body artist card before June 30, 2023. In this case, we would be able to have up to 45 apprentices, but this also puts us in a very vulnerable position as the employer. Why? First, these employees would know that without them staying employed after 6/30/23, our business could seriously suffer, leaving us in a position that these employees could hold us hostage if we don't increase their hourly/salary wage, or grant them any extra time off, or whenever other demands may arise. Basically I am saying we'd be at their mercy. So you may ask, why not just replace them? Well it's not that easy, first and foremost, finding talented artists is hard enough. Now add the fact that anyone we'd hire after June 30, 2023 would need to have a minimum of four years of experience AND apply for a mentor body art card. To find a talented artist, in addition to them having a minimum of four years of experience is going to be extremely difficult in a city like ours. Also to our knowledge, those four years would require them to have held a body art licence for four consecutive years without ever letting their licence lapse. This is still relatively a new industry. My wife was one of the first artists in this city to start microblading, and that was just under 6 years ago. So again, to find an artist that's talented, and good with students, and has four consecutive years under their belt, sure the heck isn't going to be easy per these proposed regs, which states post June 30, 2023: Section 8.11.4 A journey mentor body artist card can be issued upon request after maintaining their a body art card issued by the Health Authority for a minimum of four consecutive years in good standing.

If the SNHD considered granting employers a grace period of 8-10 weeks to replace that mentor, that would help, but it couldn't be any less than that - if both employees quit on us, we'd be screwed! As I mentioned in the beginning of this email. MicroBladers should be able to accept at least 10 apprentices each month if our SNHD Establishment Licence has a minimum of two registered licenced artists with SNHD and hold a mentor body art card. That would be my wife and one other full time employee. To require us to have three full-time employees with that level of experience on our payroll would put our business through financial hardship under our current tuition pricing model.

It appears to us that the SNHD has based much of these proposed regulations on smaller businesses that are more 80% services and 20% training. We are the opposite, our business is 80% training and 20% services. Even services that are booked with us are used for training purposes such as observations. For the smaller business, this won't affect them at all. I say that because any artist that holds a mentor body art card would be able to take 30 apprentices under them in a period of a year, but keep in mind that many of these potential mentor body art card holders mostly operate out of a private salon studio suite that isn't any larger than 300 sq ft. - we are nearly have 10x that amount of space at MicroBladers designed and developed for a proper training environment.

Currently our two employees are Tautiana Bellamy (full time) and Alyssa Dillard (part time). Both of them were originally students that we later hired to join our team. Alyssa Dillard first graduated our training program back in June 2018 and started working for us September 2019. As for Tautiana Bellamy, she first graduated our training program back in February 2020 and started working for us in August of 2020. Currently Tautiana has 2.5 years of experience and Alyssa has just about 4 years. With that said, we hope to continue to work with them but as soon as they realize we can't operate without them, the dynamics will change unfortunately. See what the SNHD doesn't understand is that we are a well-known brand that has staff, not a standalone artist who is self-employed offering apprenticeship.

Is it possible that MicroBladers could hold two types of permits with SNHD? Currently we have a body art establishment permit, could we also apply to be permitted as a school with them as well which would allow us to continue to operate as is? My wife and I are also happy to meet with any of the board members to explain the type of impact these limitations would put on business. We've put a lot of sweat, tears, and our savings into growing this business to what it is today. We have been operating under the current status quo with no issues, and to the best of our knowledge have an overall good record with SNHD.

Best,

Marko Greisen

Brand Development/Partnerships Text only: (702)219-2002 Web: www.microbladers.com

E -mail

-man

: ma	rko <u>@microbladers.com</u>
	Managaman and participation of the first control described from processing belowers.

Mark Bergtholdt

From: Edward Wynder

Sent: Wednesday, March 09, 2022 4:17 PM

To: Mark Bergtholdt; Karla Shoup

Subject: FW: MicroBladersFrom Subject Received Size Categories

Attachments: Re: MicroBladers

FYI

Edward Wynder, Esq.
Associate General Counsel
Southern Nevada Health District
280 S. Decatur Blvd.
Las Vegas, NV 89107
702-759-1178
wynder@snhd.org

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From: Edward Wynder

Sent: Wednesday, March 9, 2022 4:15 PM **To:** Bruce L. Woodbury <blw@juwlaw.com>

Cc: Marko Greisen <marko@microbladers.com>; Joanne M. Aguilar <JMA@juwlaw.com>

Subject: RE: MicroBladersFrom Subject Received Size Categories

Dear Mr. Woodbury,

Thank you for your email sent February 24, 2022, regarding the proposed body art regulations. The proposed regulations are scheduled for possible action on March 24, 2022, at 9 a.m. Staff has considered your and your clients' comments, concerns, requests, and suggestions.

Although techniques may vary, tattoo, body piercing, and permanent makeup have much in common from a safety and sanitation standpoint. The proposed body art regulations dealing with apprentices arose from industry concerns and are the result of significant communication between industry and staff, including a listening session in August 2021 and four subsequent public workshops. During these meetings a number of individuals in industry raised concerns about mentor artists taking on more apprentices than they can adequately train. These regulations arose from this dialogue.

After reviewing your comments and the email from your client that you provided, staff have come up with the following modification which they will present to the Board of Health at the hearing on March 24:

8.11.4: A mentor body artist card can be issued upon request after providing evidence of four consecutive years of experience. Evidence can be shown by holding a body art card issued by the Health Authority and by providing evidence of experience in a jurisdiction outside of the Health Authority.

As for the other requests, staff believes the best way to proceed is through the waiver process already included in the proposed regulations. This process allows the Health District to grant waivers from specific regulations on a case-by-case basis. For example, the waiver process would allow your clients to show how their processes protect the public, even when they are down a mentor for 10 weeks. Waiver processes just like this are common to the Health District's other environmental health regulations and have functioned well in accommodating the individual needs of business while protecting the public. Of course, staff cannot comment on any specific waiver request now, but the waiver process provided in the regulations is the best way to address each facility's unique situation while ensuring the public is protected.

Thank you for your attention to this matter.

Sincerely,

Edward Wynder, Esq. Associate General Counsel Southern Nevada Health District 280 S. Decatur Blvd. Las Vegas, NV 89107 702-759-1178 wynder@snhd.org

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From: Joanne M. Aguilar < JMA@juwlaw.com>
Sent: Wednesday, March 9, 2022 11:00 AM
To: Edward Wynder < wynder@SNHD.ORG>

Cc: Bruce L. Woodbury <blue juwlaw.com>; Marko Greisen <marko@microbladers.com>

Subject: MicroBladers

THIS EMAIL IS FROM BRUCE L. WOODBURY

Edward,

Can I expect a response this week? The hearing is only two weeks away now. Please let me know.

Thank you

Bruce L. Woodbury

Joanne M. Aguilar

Secretary for Bruce L. Woodbury Jolley Urga Woodbury & Holthus 50 S. Stephanie, Suite 202 Henderson, NV 89012 T 702.699.7500 F 702.699.7555 jma@juwlaw.com

WOODBURY HOLTHUS at law

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Body Art Regulation Revision

Southern Nevada Health District
Division of Environmental Health
Consumer Health Section
Special Programs Office



Current Regulations

- Special Programs Office uses two regulations to protect public health in body art facilities
 - SNHD Regulations Governing the Sanitation and Safety of Tattoo Facilities
 - Been in existence since the early 1990s
 - Last updated in 2005
 - SNHD Regulations Governing the Sanitation and Safety of Piercing Facilities
 - In existence since the early 1990s
 - Not updated in 2005
- State of Nevada regulations
 - Nevada Administrative Code 444 Invasive Body Decoration Establishments
 - Promulgated in 2017

Process of developing proposed regulations— Review Current Local and State Regulations

- Staff reviewed current regulations
 - Removed any obsolete language
 - Vaccination requirements
 - Tuberculosis testing requirements
 - Booths at Special Events
 - Consolidated the two regulations into one
 - Clarified language
 - Added waiver language similar to aquatic health and food programs
- Reviewed State of Nevada regulations
 - Added appropriate language such to proposed regulation
 - Jewelry standards
 - Processing room
 - Monthly testing of sterilizers
 - Ultrasonic Cleaners

Process of developing proposed regulations— Review National Model Code

- Reviewed the National Environmental Health Associations Body Art Model Code
 - A model code by local regulators and industry with support from the National Environmental Health Association
 - Latest version was drafted in 2019
 - The Health District is currently participating on the committee to draft the next version
 - Added
 - Class V indicators in each pack
 - Consent form questions
 - Improved record keeping requirements for traceback

Public Listening Session – August 5, 2021

- Held a listening session
 - Provided industry an opportunity to provide input on what they want in the next revision
 - Issues brought forward included:
 - Increasing the number of workstations per hand sink
 - Increasing the requirements for apprentices
 - Increasing jewelry standards
 - Decreasing minimum workstation area
 - Location of facilities
 - How are artists who are practicing in residential areas handled

Final drafting

- Health District staff reviewed the comments made during the listening session
- Added language where possible
- Sent draft to legal for review
- Published draft
- Scheduled workshops

Public Workshops

- Staff scheduled three public workshops.
 - December 21, January 6 and January 13
- Notices for the workshops, small business impact statement hearing, and regulation hearing were
 - Published in most all local newspapers
 - Posted at various local government offices
 - Sent to all of the local business license agencies
 - Sent to the State of Nevada and the two other local health agencies
 - Sent to e-mail addresses in the division's database
 - Sent to e-mail addresses in the body art card database

Public workshops (cont.)

- Developed a dedicated webpage with a memorable shortcut (snhd.info/bodyartregs) for posting of
 - Current regulations
 - Proposed regulations
 - Agenda of public meetings
 - Minutes of public meetings
 - Small business impact survey document and form
- Prominently advertised webpage on District's home page

Public workshops (cont.)

- Agenda for the three workshops were posted as required
 - In our building
 - On our website
 - The State of Nevada website
- Also sent to the
 - Local jurisdictions
 - E-mail addresses
 - Facilities
 - Card holders
 - Posted on the body art regulation revision page

Workshops (cont.)

- The three workshops were attended by 59 card and permit holders
- Comments on each section were taken
- After each public workshop minutes were drafted
 - Sent to the participants
 - Posted on our website

Workshop Highlights

- Broadening the standards for jewelry
- Providing a provision to have a sterilizer within the procedure area.
- Requiring a minimum age
- Decreasing the number of apprentices for body art.
- Increasing the number of apprentices for microblading

Business Impact Statement

- After the comment period closed on January 31
 - A business impact statement was drafted and published on February 9
 - It was heard and approved by this board at the February meeting

Final Workshop – February 4, 2022

- Changes made to the regulations as a result of the workshops in December and February were drafted.
- Held a fourth workshop in February to let public see final draft and accept additional feedback.
- Attended by 12 individuals.
- Minutes were published and one change to the regulations was made as a result of the comment.

Next steps

- Presentation of the regulations at the State Board of Health meeting in June.
- Staff will be developing an implementation plan.
- Implementation will begin July 1, 2022.
- Staff will hold quarterly industry workshops starting in June after the State Board of Health approval of the regulations.

Questions





FY 2022-2023 Budget Presentation (July 1, 2022 to June 30, 2023)

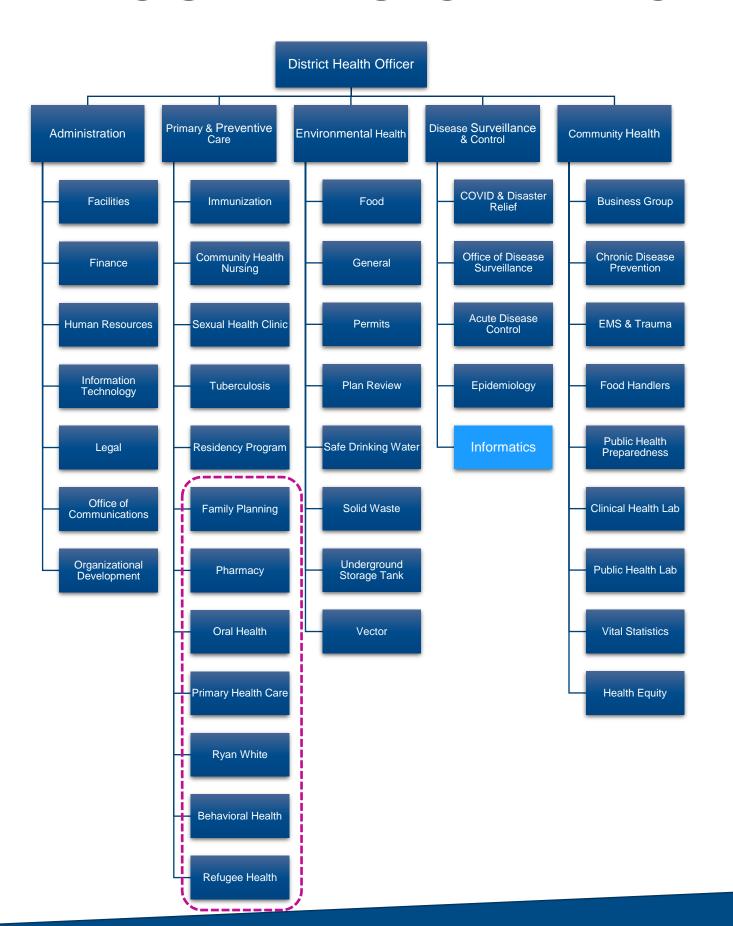
Board of Health Meeting March 24, 2022

OVERVIEW

FY 2022 YEAR-TO-DATE ACTIVITIES

- Staffing at the district is projected to grow from 780.1 FTE FY22
 Adopted to 825.1 FTE at the end of current fiscal year a 5.8%
 increase.
- 78 positions that were vacant for over 6 months were eliminated as of February 2022. 40 Contract Tracers are outsourced.
- FY 2022 Combined revenues is projected at \$148.4 M, a 12.3% increase compared to \$130.6 M in FY 2021.
- Informatics department has been reorganized and will be under Disease Surveillance & Control in FY 2023.

INFORMATICS DIVISION REORGANIZATION -





REVENUES GENERAL REVENUE

- Property Tax allocation projected at \$29.7 M in FY 2023 an increase of 5.0% compared to \$28.3 M in current fiscal year.
- Charges for Services revenues in FY 2023 is \$26.3 M, flat compared to current fiscal year. Any increase will be reflected in a budget augmentation planned during next fiscal year.

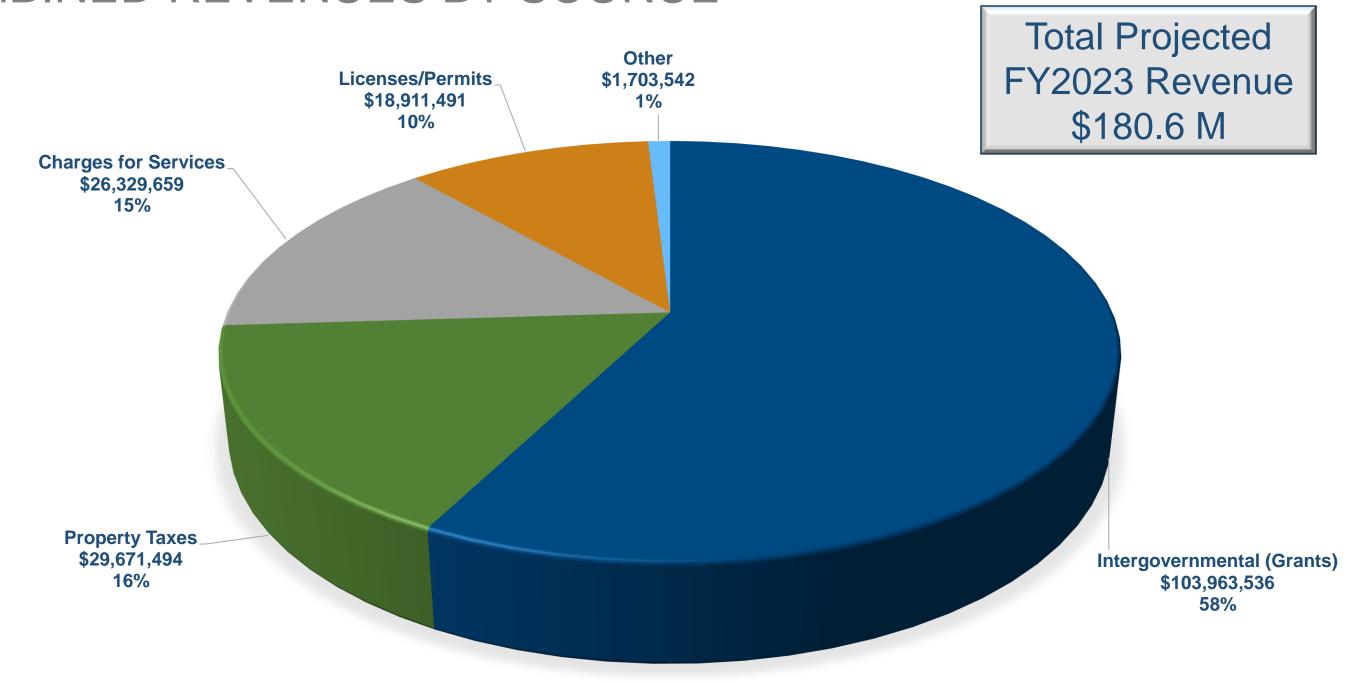
REVENUES

SPECIAL REVENUE

- Grant revenues are projected at \$104 M an increase of 45.7% compared to \$71.2 FY 2022 estimate.
- Community Health Grants are projected at \$50.4 M total, an increase of \$37.9 M (net). ELC Covid Grant total is \$41.3 M
- All grants issued on or before 02/28/2022 are included in this budget, a budget augmentation to include future grants will occur next fiscal year.

REVENUES

COMBINED REVENUES BY SOURCE

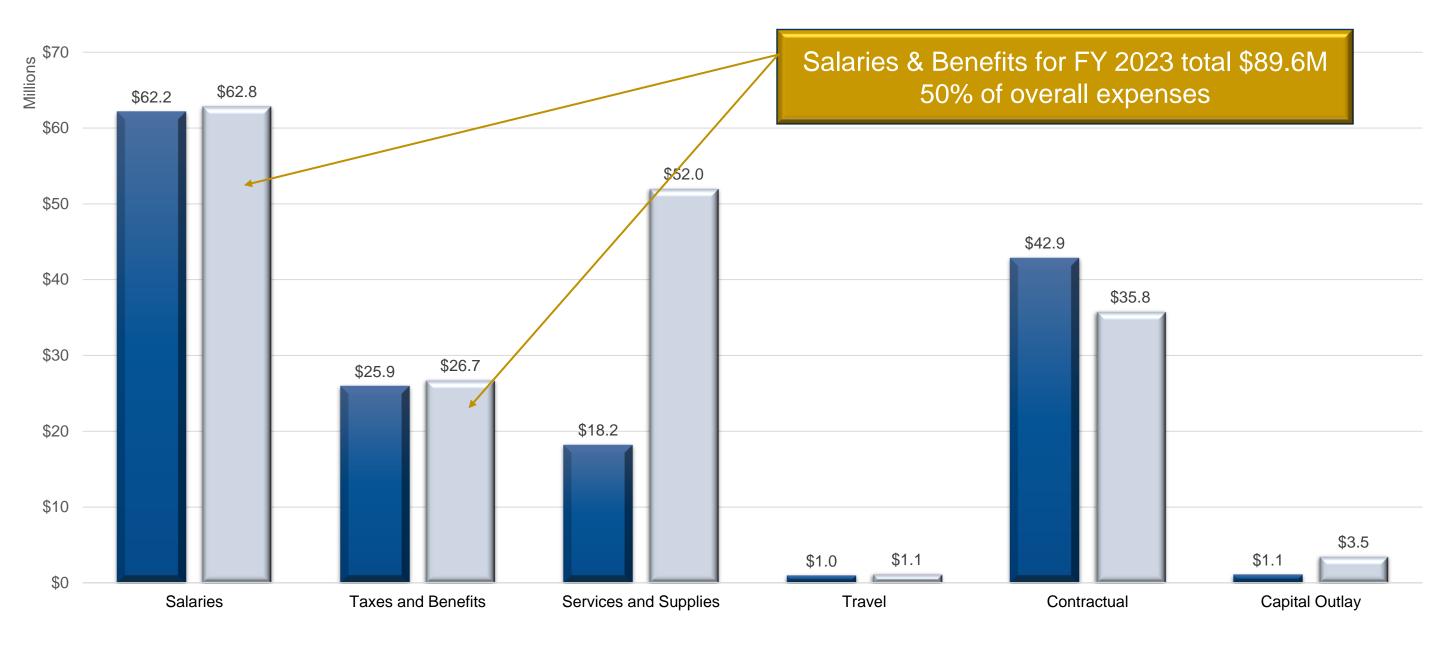


EXPENDITURES COMBINED EXPENDITURES

- General Fund expenditures total is \$76.7 M in FY 2023 a decrease of 1.1% compared to FY2022 Adopted \$77.6 M
- Combined expenditures for all funds add up to \$180.6 M
- Total salaries and benefits for all funds are projected at \$89.6 M about 50% of total expenditures

EXPENDITURES

COMBINED EXPENDITURES BY CATEGORY

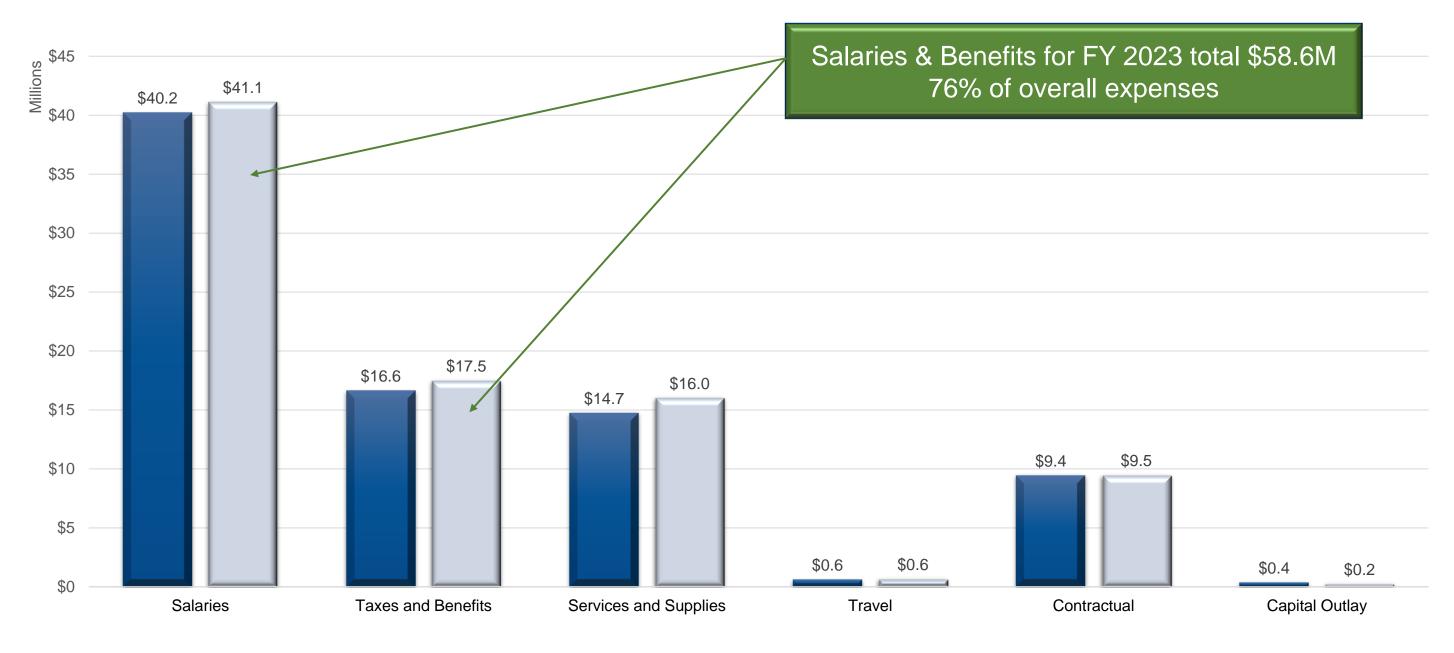


■ FY 2022 ESTIMATED

■ FY 2023 PROPOSED

EXPENDITURES

GENERAL FUND EXPENDITURES BY CATEGORY

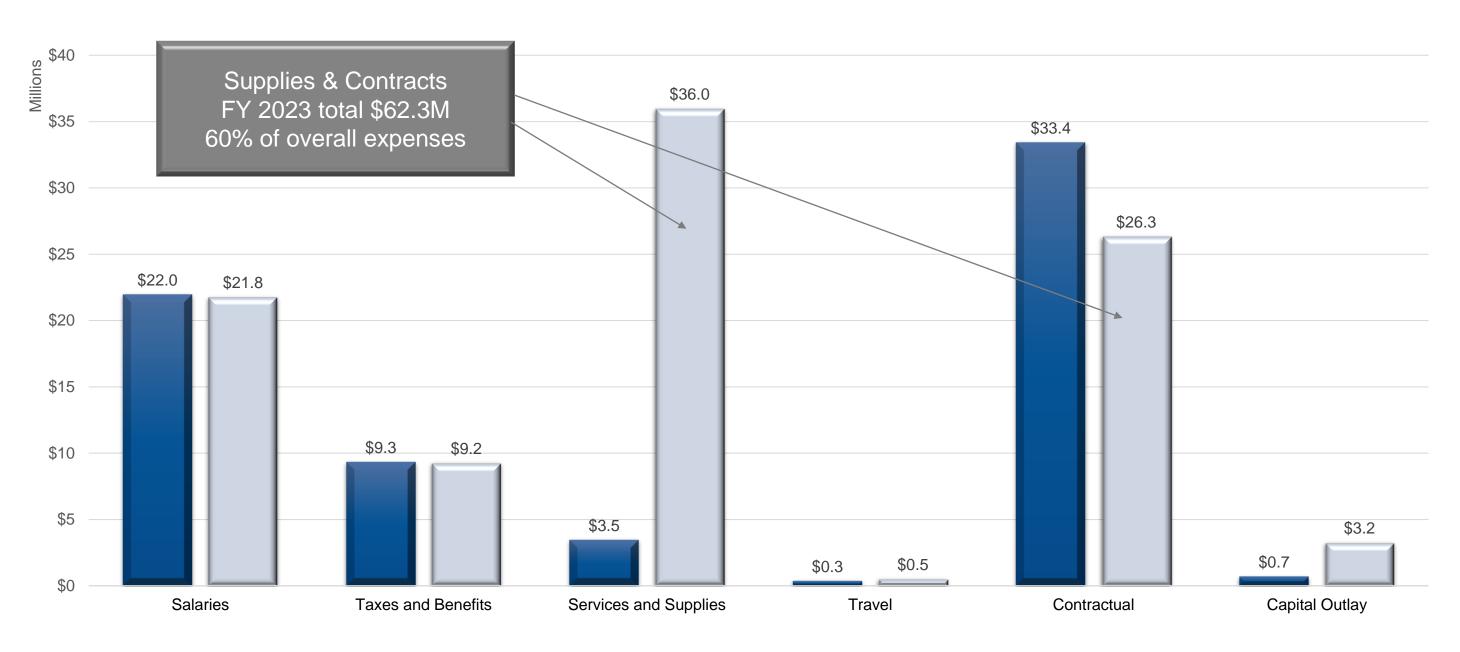


■ FY 2022 ESTIMATED

■ FY 2023 PROPOSED

EXPENDITURES

SPECIAL REVENUE (GRANT) FUND EXPENDITURES BY CATEGORY

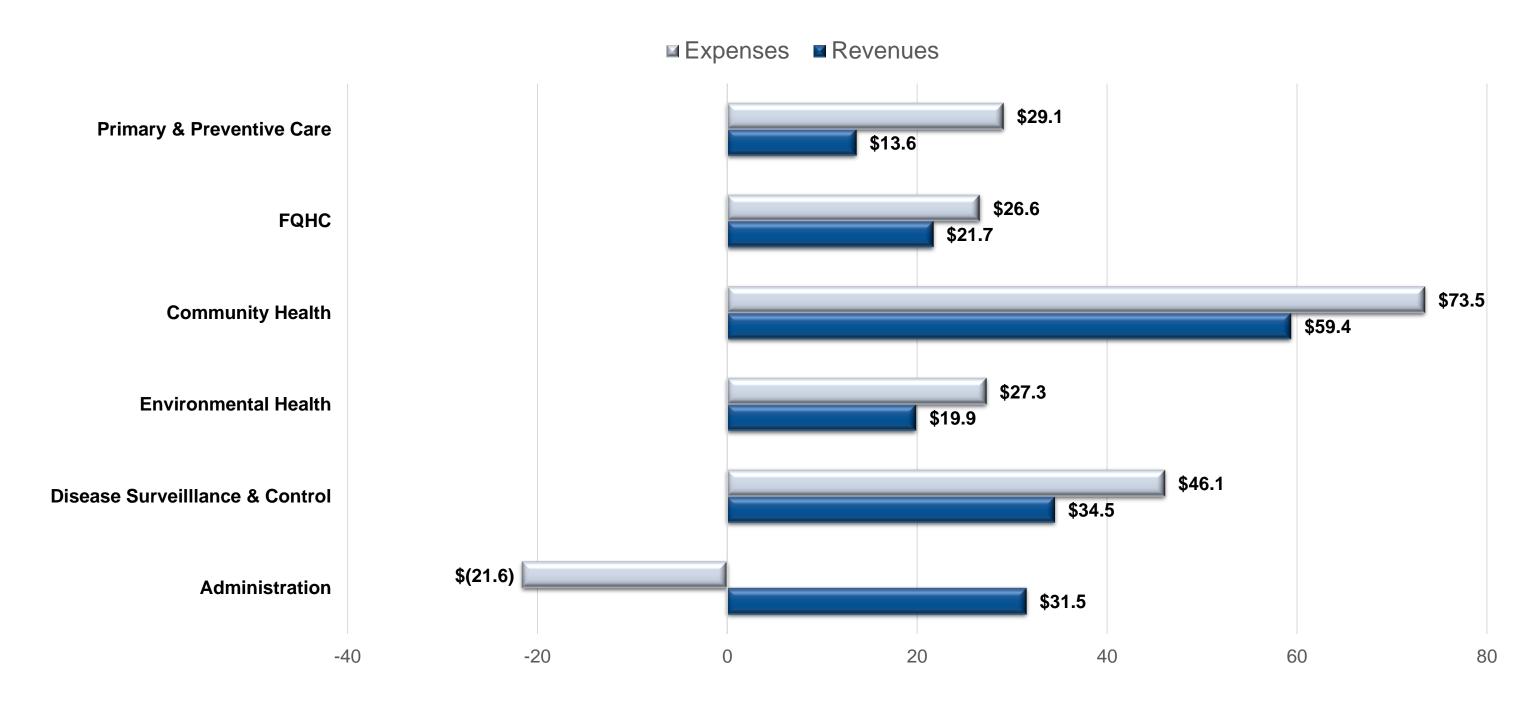


■ FY 2022 ESTIMATED

■ FY 2023 PROPOSED

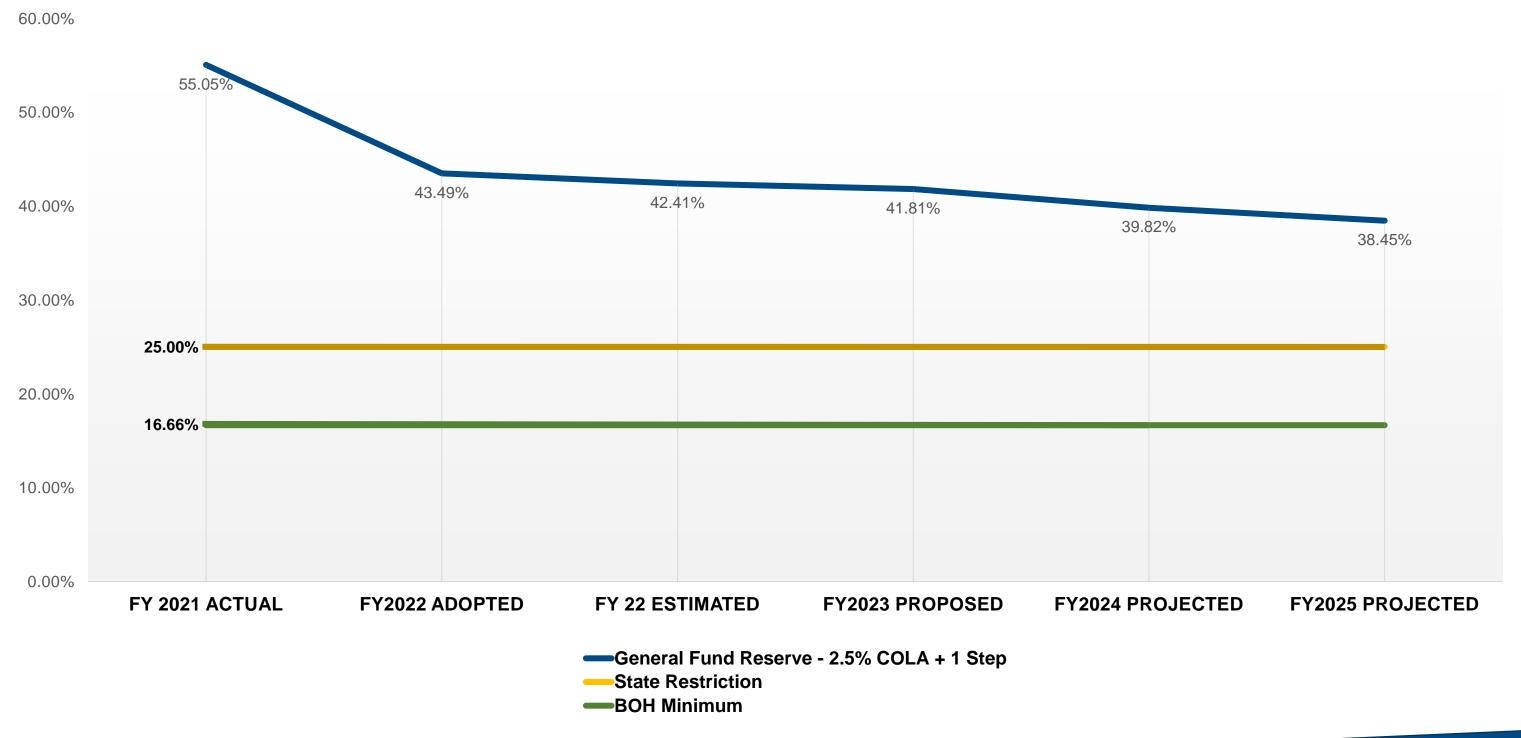
REVENUES VS. EXPENDITURES

COMBINED FUNDS BY DIVISION



FUND RESERVE

GENERAL FUND RESERVE 2 YR PROJECTION



FUND BALANCE

GENERAL FUND

	2020/21	2020/21 2021/22		2022/23	
	(CAFR) Actuals	Adopted	Estimated	Tentative	
Beginning Fund Balance	\$30,109,146	\$32,463,689	\$35,304,646	\$32,666,047	
Revenues	\$68,513,099	\$77,572,695	\$77,170,613	\$76,738,165	
Expenditures	(\$47,093,985)	(\$65,321,765)	(\$66,102,388)	(\$57,147,054)	
Other Financing Sources (Uses):					
Transfer In/(Out)	(\$16,223,614)	(\$12,250,929)	(\$11,068,225)	(\$19,591,111)	
Change in Fund Balance	\$5,195,500	\$0	(\$2,638,599)	(\$2,000,000)	
Ending Fund Balance	35,304,646	\$32,463,689	\$32,666,047	\$30,666,047	

FUND BALANCE CAPITAL PROJECTS FUND

	2020/21		2021/22	
	(CAFR) Actuals	Adopted	Estimated	Tentative
Beginning Fund Balance	\$2,655,376	\$1,799,477	\$3,047,433	\$2,202,433
Revenues	\$36,332	\$80,000	\$40,000	\$80,000
Expenditures	(\$894,275)	(\$3,129,477)	(\$1,385,000)	(\$2,282,433)
Other Financing Sources (Uses):				
Transfer In/(Out)	\$1,250,000	\$1,250,000	\$500,000	\$0
Change in Fund Balance	\$392,057	(\$1,799,477)	(\$845,000)	(\$2,202,433)
Ending Fund Balance	\$3,047,433	\$0	\$2,202,433	\$0

FUND BALANCE

BOND RESERVE (BUILDING) FUND

	2020/21	2021/2	22	2022/23	
	(CAFR) Actuals	Adopted	Estimated	Tentative	
Beginning Fund Balance	\$3,258,770	\$3,562,855	\$3,536,394	\$2,990,479	
Revenues	(\$72,376)	\$55,000	\$54,085	\$55,000	
Expenditures	\$0	(\$2,367,855)	(\$100,000)	(\$3,045,479)	
Other Financing Sources (Uses):					
Transfer to In/(Out)	\$350,000	(\$1,250,000)	(\$500,000)	\$0	
Change in Fund Balance	\$277,6245	(\$3,562,855)	(\$549,915)	(\$2,990,479)	
Ending Fund Balance	\$3,536,394	\$0	\$2,990,479	\$0	

FUND BALANCE INSURANCE LIABILITY FUND

	2020/21	2021/2	2	2022/23
	Actuals	Adopted	Estimated	Tentative
Beginning Fund Balance	\$160,567	\$170,767	\$161,697	\$160,197
Revenues	\$2,777	\$10,100	\$3,500	\$10,100
Expenditures	(\$1,647)	(\$8,000)	(\$5,000)	(\$8,000)
Other Financing Sources (Uses):				
Transfer In(Out)	\$0	\$0	\$o	\$0
Change in Fund Balance	\$1,130	\$2,100	(\$1,500)	\$2,100
Ending Fund Balance	\$161,697	\$172,867	\$160,197	\$162,297

STAFFING

FTE BY DIVISION

Divisions	2019/20 Actual	2020/21 Actual	2021/22 Adopted	2021/2022 ESTIMATED *	2022/23 PROPOSED	FTE Change Proposed vs Estimated	% FTE Change Proposed vs Estimated
Administration	148.1	154.5	125.1	163.0	143.5	(19.50)	-12.0%
Community Health	140.4	114.9	117.4	115.4	119.0	3.60	3.1%
Disease Surveillance & Control (1)	-	183.0	189.1	197.0	165.0	(32.00)	-16.2%
Environmental Health	181.0	172.0	167.9	173.0	172.0	(1.00)	-0.6%
FQHC - Primary & Preventive Care (2)	92.9	88.1	72.6	88.3	85.3	(3.00)	-3.4%
Primary & Preventive Care (2)	-	151.0	108.1	148.0	140.3	(7.70)	-5.2%
Clinical Services Division (2)	85.0	-	-	-	-	-	0.0%
Total	647.4	863.5	780.1	884.7	825.1	(59.6)	-6.7%

^{*} Estimated FTE count was before vacant positions were eliminated

⁽¹⁾ Disease Surveillance & Control Division was created in FY22 formerly named Communicable Disease & Prevention

⁽²⁾ FQHC - Primary & Preventive Care was under Clinicial Services which was renamed Primary & Preventive Care in FY22

TO BE DETERMINED

ADDITIONAL ITEMS

- Additional federal and state grants may be approved after the current cut-off of 02/28/2022 and will be addressed in the planned budget augmentation next fiscal year.
- COVID-19 timeline
- Timing of new hires and attrition



QUESTION AND ANSWER

RECOMMENDATION

Approval of the FY 2023 budget as presented.

To be submitted to the County on or before April 1, 2022, pending further instructions.



FY 2022-2023 Budget Presentation Board of Health Meeting

March 24, 2022

Updates to SNHD Fee Schedule



Board of Health Meeting March 24, 2022

Fee schedule review

• Last year a more comprehensive review of the fee schedule.

This year there are only a few fees that need to be updated.

These are mostly new codes or fees that have not used in the past.

CPT/HCPCS

Description
Full fee Proposed New schedule
Fees

Primary care services

•			
99381	INITIAL PREVENTIVE MEDICINE NE	\$172.00	\$184.00
99382	INITIAL PREVENTIVE MEDICINE NE	\$172.00	\$189.00
99383	INITIAL PREVENTIVE MEDICINE NE	\$172.00	\$191.00
99384	INITIAL PREVENTIVE MEDICINE NE	\$172.00	\$210.00
99385	INITIAL PREVENTIVE MEDICINE NE	\$172.00	\$240.00
99386	INITIAL PREVENTIVE MEDICINE NE	\$172.00	\$269.00
99387	INITIAL PREVENTIVE MEDICINE NE	\$172.00	\$274.00
99394	PERIODIC PREVENTIVE MED EST PA	\$172.00	\$186.00
99395	PERIODIC PREVENTIVE MED EST PA	\$172.00	\$209.00
99396	PERIODIC PREVENTIVE MED EST PA	\$172.00	\$225.00
99397	PERIODIC PREVENTIVE MED EST PA	\$172.00	\$235.00
81025	Urine Pregnancy Test	\$17.00	\$34.00
87808	Trichomonas Vaginalis	\$17.00	\$45.00
87905	Bacterial Vaginosis	\$17.00	\$37.00
87389	IAAD IA HIV-1 AG W/HIV-1 & HIV-2 AI	\$39.00	\$43.00
J7300	IUD Device - Paragard	\$492.00	\$568.00
J7301	IUD Device - Skyla	\$486.00	\$550.00
J7297	IUD Device - Liletta	\$104.00	\$200.00
	The IUD are coverd by the FP grant so patients	s in FP are not char	ged
	The 10D are covern by the FF grant so patients	s in Fr are not charg	zeu

Office Visits

Medications

Patients on the sliding fee Scale pay between \$7 and \$22

CPT/HCPCS	Description	Full fee schedule	Proposed New Fees
	Medications		
Q0144	Azithromycin Powder 1gm	24.94	28.30
S4993	Birth Control Pills - Apri (28 tabs)	26.12	29.41
S4993	Birth Control Pills - Aviane (28 tabs)	30.10	33.13
S4993	Birth Control Pills - Nora - B (28 tabs)	31.60	34.54
S4993	Birth Control Pills - Sprintec (28 tabs)	27.59	30.78
S4993	Birth Control Pills - Tri Lo Sprintec (28 tabs)	125.56	122.35
S4993	Birth Control Pills - Tri-Sprintec (28 tabs)	27.90	36.46
J8499	Cefixime 400mg	23.69	23.82
J0696	Ceftriaxone sodium 500mg INJ	0.00	14.17
J3490	Clotrimazole Vaginal Cream (1%)	5.56	8.84
J8499	Cycloserine 250mg	62.18	66.88
J1050	DepoProvera 150mg/mL IM	83.76	57.75
S4993	Emergency Birth Control - Plan B	33.38	31.20
J8499	Fluconazole 150mg	29.82	15.87
J8499	Linezolid 600 mg Tab	157.22	146.94
J1050	Medroxyprogesterone 150mg/ml IM	83.76	57.80
J8499	Moxifloxacin 400 mg Tab	23.30	26.76
J8499	Metronidazole 500 mg		5.55
J3490	Metronidazole Vaginal Gel TUBE	3.96	23.28
S4993	NEW DAY TAB 1.5MG 1 NSTR@	39.53	31.94
J8499	Streptomycin 1 gram VIAL	80.25	80.00
99070	Vandazole Vaginal Gel TUBE	139.56	135.43
J8499	Vitamin B-6 50mg	0.01	0.02
J2001	Xylocaine-Mpf 1% VIAL	2.10	6.96
Q0144	Zithromax 1 gm powder	126.16	123.50
J8499	Zyvox 600mg	274.26	10.97

New Vaccines

	CPT/HCPCS	New Fees
PCV15 (Vaxneuvance)	90671	420.00
PCV20 (Prevnar 20)	90677	450.00

Discounts are offered to uninsured patients.

(VFC for children 0-18 years and 317 for adults 19 years and older)



QUESTIONS AND DISCUSSION



DATE: March 24, 2022

TO: Southern Nevada District Board of Health Members

FROM: Fermin Leguen, MD, MPH, District Health Officer

SUBJECT: District Health Officer Report

Coronavirus Disease 2019 (COVID-19)

COVID-19 metrics have continued to steadily decline in Clark County, and the Southern Nevada Health District will begin updating its dashboard on a weekly basis. The last daily update to the dashboard occurred on Friday, March 11. The Health District's COVID-19 dashboard, aggregate and trend reports are now updated and posted each Wednesday.

Daily COVID-19 counts reflect newly reported cases that were tested in the preceding days, and the Health District redistributes these cases by symptom onset or diagnosis date to better reflect disease trends in the community. While COVID-19 remains in the community at lower levels, other disease metrics and trends along with the new CDC framework will provide better insight for monitoring the level of disease in Clark County.

The CDC's new recommendations are focused on minimizing severe disease, limiting strain on the health care system, and enabling those at highest risk to protect themselves against infection and severe disease. The new framework is designed to help communities determine which prevention strategies at different points of an outbreak are needed to prevent disruptions from COVID, increase protection from severe disease and reduce strains on health care facilities, and save lives. The updated metrics help individuals assess their risk and determine if they need additional precautions such as masks based on their location and health status.

The Health District is committed to gathering, analyzing, and reporting local COVID-19 data to assist with and direct the ongoing COVID-19 response. Data are integral for anticipating new trends, identifying emerging variants, planning ongoing vaccination and testing initiatives, and keeping the public and response partners informed.

The Health District's COVID-19 dashboard and reports are available at www.covid.southernnevadahealthdistrict.org/cases/.

Coronavirus Disease 2019 (COVID-19) — N95 Mask Program

The Health District is participating in the Health Resources and Services Administration (HRSA) Health Center COVID-19 N95 Mask Program through its Southern Nevada Community Health Center. The program provides any member of the community with up to three N95 respirators. People who would like to receive them can visit the main public health center at 280 S. Decatur Blvd. and request them at the front desk. The N95s are available while supplies last.

The Health District is also providing masks to community partners and service providers so they can be distributed to their clients.

Influenza Surveillance

In Clark County, for the season as of February 26, 2022, there have been 52 influenza-associated hospitalizations and six influenza-associated deaths reported. The percentage of emergency department and urgent care clinic visits for influenza-like-illness (ILI) increased slightly from 1.4% in week 7 to 1.6% in week 8. Approximately 38% of area emergency department and urgent care clinic visits for ILI were made by children 0-4 years of age, which was higher than week 7 (28%). Twenty-three percent of area emergency department and urgent care clinic visits for ILI were made by adults 18-44 years of age, which was lower than week 7 (29%). Influenza A has been the dominant type circulating. Nationwide, seasonal influenza activity has decreased in recent weeks, but sporadic activity continues across the country. During week 8, 1.5 percent of patient visits reported through the U.S. outpatient ILI Illness Surveillance Network (ILINet) were due to respiratory illness that included ILI. This percentage was below the national baseline of 2.5%. Among the 55 states/jurisdictions, the respiratory illness activity level in Nevada was minimal. The Health District will continue to update the public on flu activity and encourage flu vaccinations for everyone 6 months of age and older.

Pop-up Produce Markets

The Health District's Office of Chronic Disease Prevention and Health Promotion is partnering with the Regional Transportation Commission of Southern Nevada (RTC) and the Veggie Buck Truck to once again schedule pop-up produce markets at the Bonneville Transit Center (BTC) in spring and fall with an additional location at the Health District's main facility. Patrons will pay about a dollar for a pound of fresh fruit or vegetables. The partnership is an effort to increase access to low-cost, healthy fresh fruit and vegetables. For more information, call the Office of Chronic Disease Prevention and Health Promotion at (702) 759-1270 or visit the Get Healthy Clark County Farmers Markets page.

The schedule for this season's pop-up produce markets is:

Bonneville Transit Center (BTC), 12:30 p.m. 101 E. Bonneville Ave., Las Vegas, NV 89101	Southern Nevada Health District, 9 a.m. 280 S. Decatur Blvd., Las Vegas, NV 89107
Market will be open while supplies last	Market will be open while supplies last
Wednesday, April 6	Wednesday, April 13
Wednesday, May 4	Wednesday, May 11
Wednesday, June 1	Wednesday, June 8
Wednesday, September 7	Wednesday, September 14
Wednesday, October 5	Wednesday, Oct. 12
Wednesday, November 2	Wednesday, November 9

Nutrition education and resources will be available at the Southern Nevada Health District pop-up produce markets.

A pilot project was launched in September 2021, with three pop-up markets held on consecutive Wednesdays. The markets served about 185 attendees and nearly 700 pounds of fresh produce were sold over the course of the three market days. Forty-five percent of these sales were SNAP/EBT, WIC, farmers markets coupons and Double Up Food Buck coupons.

The BTC is typically accessed by about 9,000 customers each day. The markets are open to everyone. Customers can use their Supplemental Nutritional Assistance Program (SNAP) benefits at the pop-up

markets. People who use SNAP will be eligible for Double Up Food Bucks and earn a coupon they can apply to future produce purchases at participating locations. The Double Up Food Bucks program doubles the value of SNAP benefits, helping people to bring even more healthy food into their homes. Customers can use cash, debit, or credit cards.

For a list of local farmers markets, including those that accept EBT, SNAP and debit or credit cards, visit the <u>Get Healthy Clark County Farmers Markets</u> page.

Secret of Siam Investigation

The Health District is working with partner agencies to investigate a potential association between THC toxicity and the consumption of food or drink in people who ate at Secret of Siam, located at 5705 Centennial Center, Las Vegas, NV 89149. The food establishment is currently closed.

Several dozen patrons have reported they consumed items from the restaurant between January 28, 2022, and February 14, 2022, and experienced symptoms. Initial signs and symptoms included hallucinations, blurry vision, increased heart rate, disorientation or confusion, dizziness, loss of consciousness, dry mouth, and numbness or tingling in extremities. Some patrons who reported they did not intentionally consume or use marijuana in the previous 30 days tested positive for THC on a laboratory toxicological screen. All patrons have recovered. Additional reports of similar symptoms in additional patrons are under investigation.

The restaurant is closed while the investigation continues, and food testing is being conducted to identify the source of contamination. The Health District has created a self-reporting survey on its website to identify additional patrons and gather information about which food or drink items could be possible sources. The Health District is encouraging all patrons who dined at the restaurant during January 24-February 14, 2022 — whether they experienced symptoms or not — to complete the survey. The survey is available at www.snhd.info/siamsurvey.

People may also contact the Health District at (702) 759-1300 if they have any questions or need assistance with the survey.

NHANES

The National Health and Nutrition Examination Survey (NHANES), the most comprehensive survey of the health and nutritional status of the U.S. population, is coming once again to Clark County, NV, beginning March 11, 2022.

All counties and cities in the United States have a chance to be selected for the NHANES and, this year, Clark County is one of 15 counties selected to be part of this initiative. Each year, only 5,000 residents nationwide are chosen to participate in NHANES, conducted by the National Center for Health Statistics (NCHS), part of the Centers for Disease Control and Prevention (CDC). NHANES provides important national data about critical public health issues. NHANES serves as the nation's 'health check-up' by going into communities throughout the country to collect health information. The survey provides a wealth of important data about many of the major health and nutritional issues affecting the country.

Since 1960, NHANES has had a prominent role in improving the health of all people living in the U.S. NHANES data address critical health concerns, such as obesity, diabetes, and cardiovascular disease. Public health officials, legislators, and physicians use this information to develop sound

health policies, direct and design health programs, and services, and expand the health knowledge of the nation. NHANES data also help produce national references and standardized growth charts used by pediatricians across the country. NHANES collects a broad range of data that impact the lives of everyone in the country, regardless of age, addressing everything from air quality to vaccinations and the low-fat and "light" foods found in grocery stores. Now more than ever, collecting timely information on the status of the nation's health is critical.

Residents will have an invitation-only opportunity to participate in NHANES. Addresses are randomly sampled within Clark County. By selecting participants this way, when combining data from all counties visited this year, NHANES data can more accurately represent the U.S. population. Households are sent one or more letters inviting them to be part of NHANES by completing a brief online questionnaire to see if anyone in their home is eligible to participate. Those eligible are contacted by an NHANES representative to set up a telephone health interview at a convenient time, followed by a health examination that takes place in the NHANES mobile examination center. While no medical care is provided directly in the mobile examination center, a report on physical findings is given to each participant, along with an explanation of those findings from survey medical staff. All information collected in the survey is kept confidential and individual privacy is protected by law. More information is available at www.cdc.gov/nchs/nhanes/participant.htm.

National Women and Girls HIV/AIDS Awareness Day

To commemorate National Women and Girls HIV/AIDS Awareness Day on Thursday, March 10, the Southern Nevada Health District provided free Express HIV Testing at its Sexual Health Clinic located at 280 S. Decatur Blvd. More information about services available at the Sexual Health Clinic are available on the Health District's website.

National Women and Girls HIV/AIDS Awareness Day is an opportunity to support women and girls who are living with HIV and to encourage others to be tested for HIV. According to the Centers for Disease Control and Prevention (CDC) for every 100 women with HIV, 90 knew their HIV status. While HIV diagnoses among women declined 7 percent between 2014 and 2018, the decline varied among race and ethnicity. Hispanic and Black/African American women continue to be more impacted by HIV than their white counterparts.

Testing is an opportunity for women and girls to learn their HIV status so they can take steps to protect their health. Routine testing is recommended for women who are at a high risk of infection. The Health District also offers free, at-home HIV, chlamydia and gonorrhea testing through its Collect2Protect program. The kits are available on the Health District's Collect2Protect page and provide a convenient and private testing option.

According to the CDC, just 7 percent of women who could benefit from pre-exposure prophylaxis (PrEP) were prescribed the medication in 2018. PrEP is a medication that can be provided to people who do not have HIV but are at a high risk of infection. PrEP can help prevent people from becoming infected with the virus. For more information about women and PrEP, visit the CDC's Let's Stop HIV Together webpage.

Early diagnosis is critical for people with HIV so that they can benefit from antiretroviral therapy (ART). ART reduces HIV levels in the bloodstream, reduces HIV-related illnesses, and lowers the risk

of transmitting HIV to intimate partners. With ART, HIV-positive people can remain healthy for many years.

Community Meetings

Week ending 02/27:

Weekly:

· Attended the White House IGA Weekly Briefing

Bi-weekly (every two weeks):

• Participated in a meeting with representatives from DHHS on COVID-19

Monthly:

- Participated in the Southern Nevada Community Health Center Finance & Audit Committee meeting
- Participated in the individual Southern Nevada District Board of Health Agenda Review meetings with Councilman Black, Councilman Knudsen, Scott Nielson, Bobbette Bond, Commissioner Kirkpatrick, Councilwoman Dutkowski, Councilwoman Diaz, and Councilwoman Romero
- Participated in the Southern Nevada District Board of Health meeting
- Participated in the Southern Nevada Community Health Center Governing Board meeting

Media/Interviews/Panelist/Presenter:

Media Briefing on COVID-19

Professional Development/Conferences:

- Attended the Kirk Kerkorian School of Medicine at UNLV Research Seminar Series Development of Health Behavior Instruments for Clinical Researchers Confirmation
- Attended the Pandemic Preparedness: Now is the Time webinar

Ad-hoc Meetings:

• Attended the Special Session of the CDC COVID-19 All-STLT Update call

Week ending 02/20:

Weekly:

- Participated in the CDC COVID-19 All State, Tribal, Local, and Territorial Update call
- Participated in a Hospital CEO Medical Surge Update call
- Attended the White House IGA Weekly Briefing

Monthly:

- Participated in the Monthly County Health Officer meeting
- Participated in the individual Southern Nevada District Board of Health Agenda Review meetings with Councilman Adams

Quarterly:

Participated in the February FQHC Quarterly meeting

Media/Interviews/Panelist/Presenter:

- Interview with Telemundo on COVID-19 Q&A
- Media Briefing on COVID-19

- Interview with Mary Hynes (Review-Journal) for a Black History Month Profile
- Interview with Yaimee Bell (Telemundo) for a Black History Month Profile

Professional Development/Conferences:

- Attended the "Wellbeing Wednesdays Episode 6 New Directions: Federal Solutions and Other Steps to Overcome the Nation's Overdose Crisis" webinar facilitated by the CDC
- Attended the "Integrating HIV/STI Prevention into Primary Care Practice" webinar facilitated by The Pacific AIDS Education and Training Center Nevada

Ad-hoc Meetings:

 Participated in individual briefings with the Board of Health members regarding the Classification and Compensation Study

Week ending 02/13:

Professional Development/Conferences:

- Attended the CDC webinar on the pediatric COVID-19 vaccination for children ages 6 months to 4 years
- Attended the "2021 CEFOI Faculty-Led Session 4: Leading an Effective Team" webinar facilitated by NACHC

Ad-hoc Meetings:

- Participated in a meeting with Senator Donate
- Participated in a meeting with the Governor's Office and local health authorities
- Participated in individual briefings with the Board of Health members regarding the Classification and Compensation Study

Week ending 02/06:

Weekly:

- Participated in the CDC COVID-19 All State, Tribal, Local, and Territorial Update call
- Participated in a Hospital CEO Medical Surge Update call

Biweekly (twice a week):

Participated in a meeting with representatives from Clark County and UMC on COVID-19

Quarterly:

Participated in the Desert Meadows AHEC Quarterly Board meeting

Media/Interviews/Panelist/Presenter:

• Media Briefing on COVID-19

<u>Professional Development/Conferences:</u>

- Attended the "PCMH Health Equity Technical Assistance Symposium" (2-days)
- Attended the "Latest on the Omicron Variant, Therapeutics, and COVID-19 in People Who Are Immunocompromised" webinar

Ad-hoc Meetings:

Participated in a meeting with Mary Jarrell and Stephanie Stokes (Intermountain Healthcare)

- Participated in a meeting with Pete Ronza (Pontiflex Consulting Group) and Jerry Keating (Core 4 Consulting) regarding the Compensation and Class Study
- Participated in a meeting with representatives from the State and Comagine Health regarding the Pathways Community Health Workers (CHWs) project
- Attended the Black History Month Art Exhibit and Community Awards hosted by Commissioner McCurdy

Updates to Aquatic Venue Drain Cover Standards





Candice Konold, Senior Environmental Health Specialist Jeremy Harper, Environmental Health Supervisor Aquatic Health Plan Review - Southern Nevada Health District March 24, 2022

What changed?

- The American National Standard for Suction Outlet Fitting Assemblies for Use in Pools, Spas, and Hot Tubs (ANSI/APSP/ICC-16 2017)
 - Testing procedures were modified to address the risk of hair entrapment through the cover
 - New testing procedures have resulted in different flow rates and sump and pipe requirements for existing cover designs
 - O SOFAs manufactured after May 24, 2021 must conform to the new standard

Labeling

- "Old" drain covers are embossed with ASME/ANSI A112.19.8 (2007, 2008a, or 2009b), ANSI/APSP-16 2011, or VGB 2008
- "New" SOFAs are embossed with VGBA 2017 and a manufactured date after May 24, 2021

Do existing drain covers have to be replaced RIGHT NOW?

- If your existing covers are:
 - Sized appropriately,
 - In good condition, and
 - Within their installation life span
 - then NO, they do not need to be replaced immediately. But...
- Identical replacement covers, i.e., those that have the exact same model number and are tested to the exact same standard, may be difficult or impossible to find.

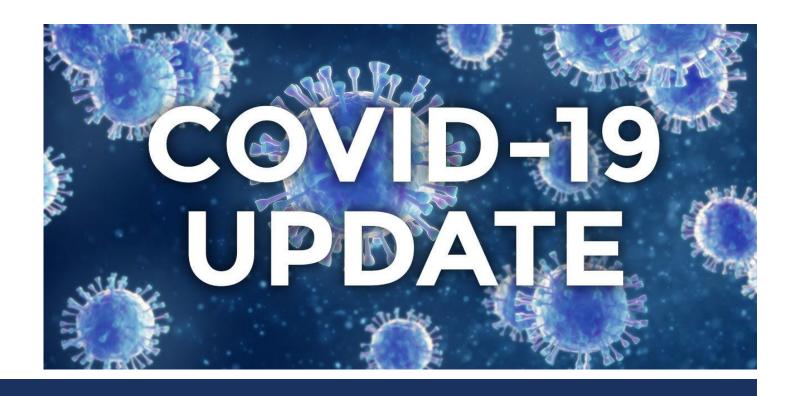
What do I need to do?

- Find out what is installed in your venue and when it will reach the end of its installation life.
- Find out what is behind the existing cover.
 - Things such as pipe size and length, sump dimensions, and how the pipe is positioned in the sump need to be determined.
- Look for a replacement to use when a cover does need replacing.
 - This can be a cover that is identical in both model number and testing standard to the existing cover, or
 - A completely different cover that meets the needs of your venue.

What do I need to do? continued

- Talk to a Nevada-licensed contractor.
 - O Major changes may be needed at the aquatic venue to keep a venue compliant when a new cover needs to be installed, such as splitting outlets (drains). Reaching out to a contractor in advance will help you be prepared for the eventual switch to a new SOFA.
 - A different SOFA may not be your only option. Changing a pump may also be a way to achieve compliance.
- Check with the SNHD before making any changes.
 - O Most likely, a Minor Remodel (Non-substantial Alteration) will be needed if anything other than an identical cover will be installed. Written approval must be granted before any work begins to ensure the intended SOFA will be approvable and avoid additional fees and delays.





CASSIUS LOCKETT, PHD

Director of Disease Surveillance & Control March 24, 2022

Community Transmission

	03/10/2022	03/11/2022	03/12/2022
COVID Positive Test Rate (7-Day Average)	3.7%	3.6%	3.6%
New cases per 100,000 population per 7 days	20.4	19.2	19.3

Testing and Vaccination Status

	03/10/2022	03/11/2022	03/12/2022
Persons tested per 1,000 population per 7 days	10.7	10.5	10.4
% Population 16 Yrs and Older that Initiated Vaccination	82.8%	82.8%	82.8%

Community Level

	03/10/2022	03/11/2022	03/12/2022
New COVID admissions per 100,000 population per 7 days	5.9	5.7	5.4
% Inpatient beds used by COVID patients (7-Day Average)	3.3%	3.1%	3.0%
% ED visits due to COVID (7-Day Average)	2.6%	2.6%	2.5%

RISK METRICS

SNHD COVID-19 DASHBOARD: CASES

COVID-19 Case Summary

Dashboard updated on: March 22, 2022

Data as of: March 21, 2022

Total Confirmed Cases: 494,521 (21332.4 per 100K)

Total Probable Cases: 24,422 (23.1 per 100K per 30-Day Period)

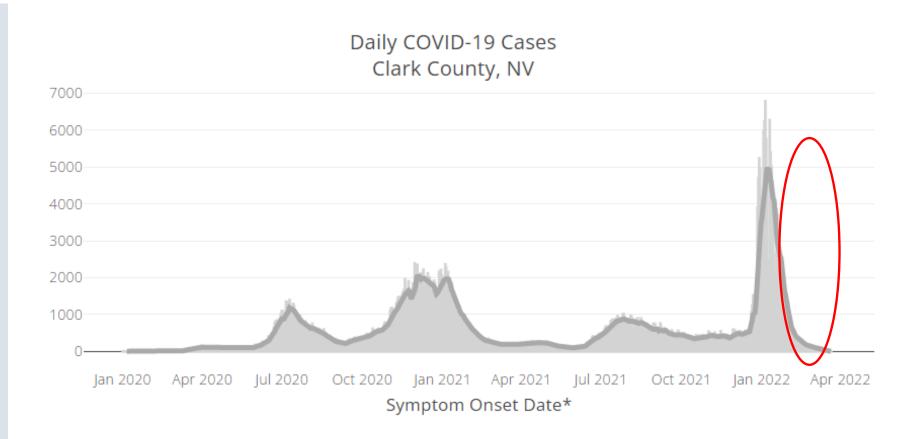
Probable Cases (14 Day Average):

Multisystem Inflammatory Syndrome in Children (MIS-C) Cases: 108

Total Hospitalizations: 25,435 (1097.2 per 100K)

Total Deaths: 7,739 (333.8 per 100K)

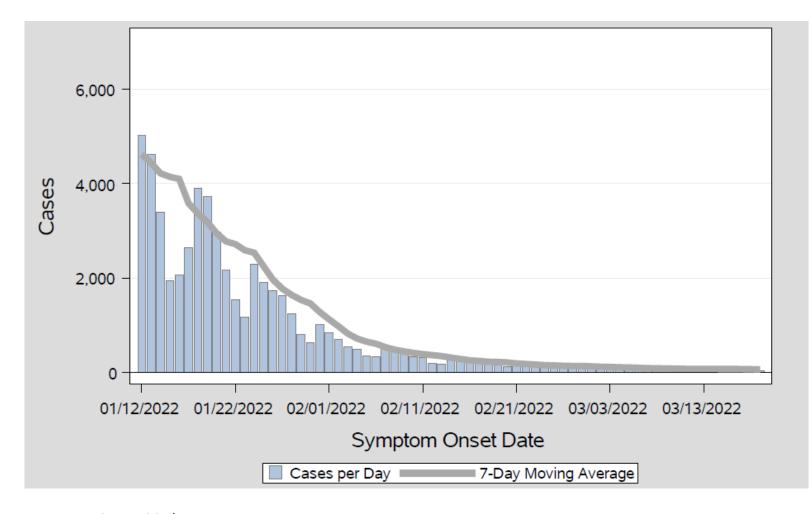
Cases Reported in Last 7 Days: 468 (20.2 per 100K)



http://www.southernnevadahealthdistrict.org/covid-19-dashboard/

Data as of March 22nd

COVID-19 Cases per Day, Clark County, Nevada

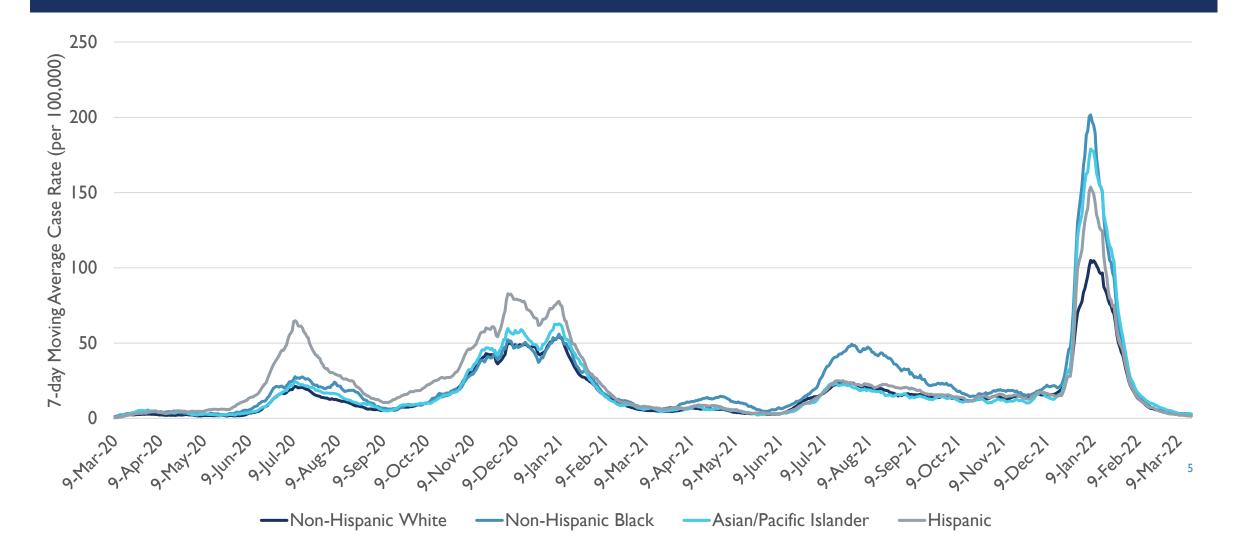


Data as of Mar 22nd

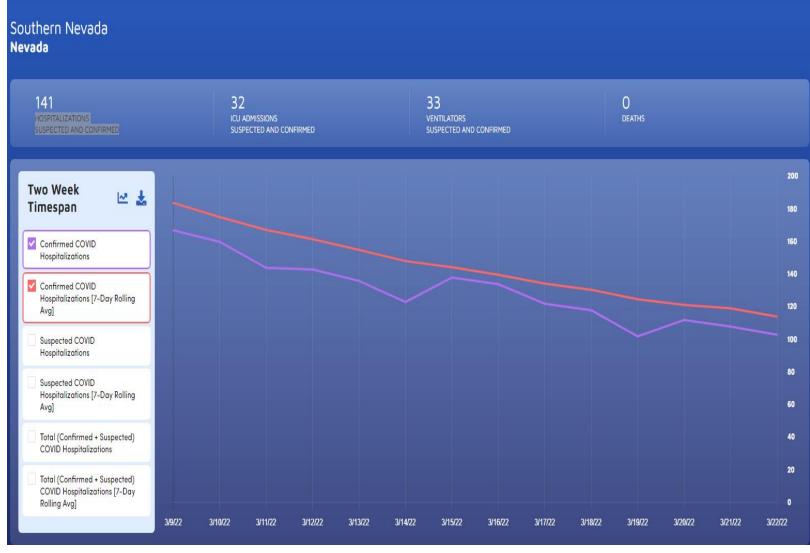
COVID-19 CASES

RECENT TRENDS

CASE TREND BY RACE/ETHNICITY



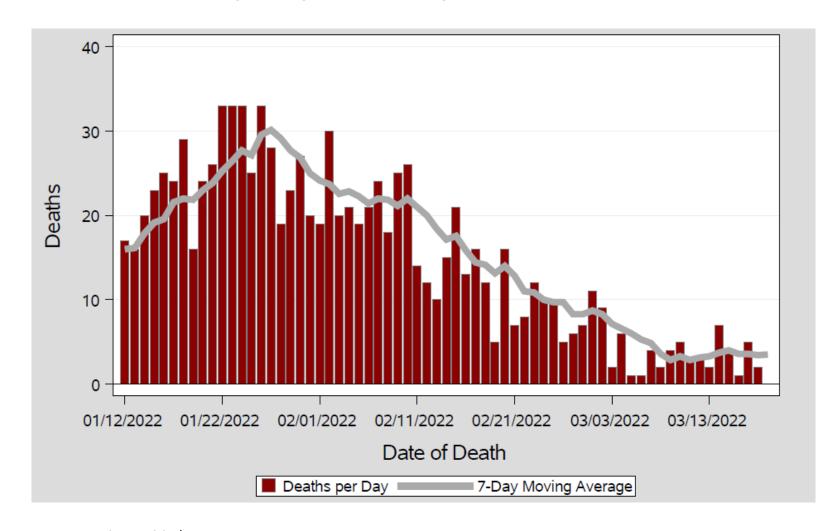
COVID-19 Hospitalizations, Clark County NV



COVID-19 HOSPITALIZATION

RECENT TRENDS

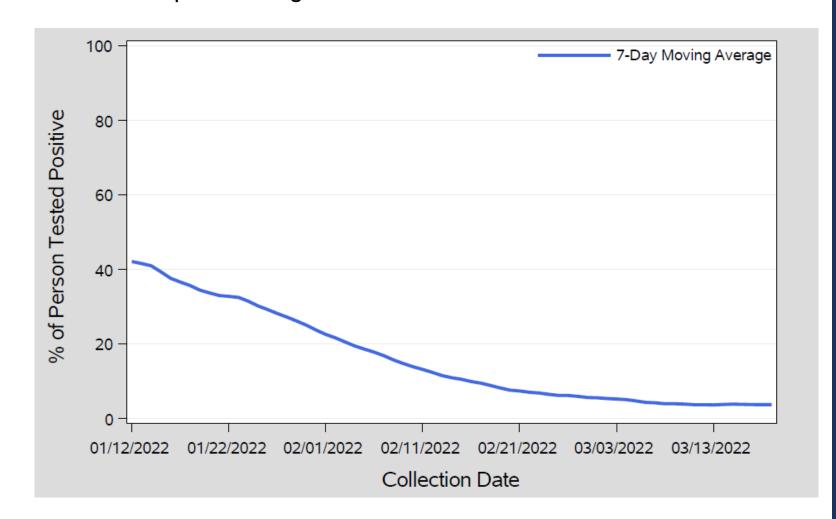
COVID-19 **Deaths** per Day, Clark County, NV



Data as of Mar 22nd

COVID-19 DEATHS RECENT TRENDS

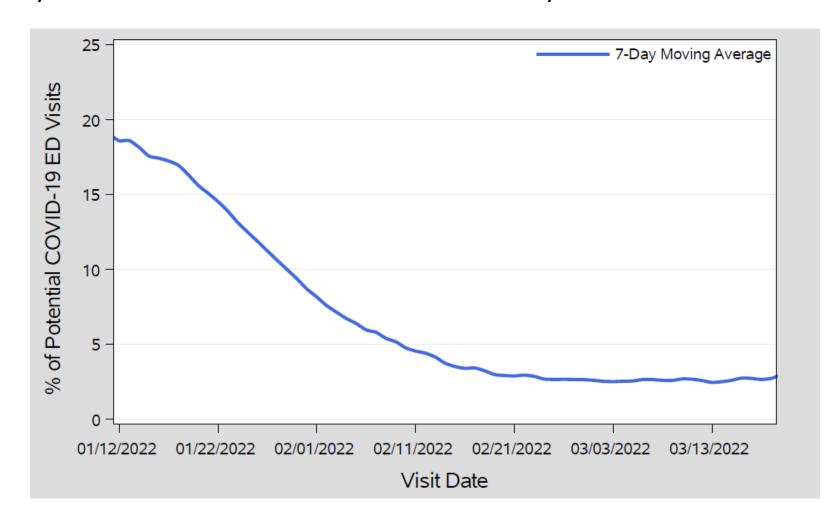
Percent of People Receiving COVID-19 Viral Tests Who Have Positive Results



Data as of Mar 22nd

COVID-19 VIRALTESTS

Syndromic Surveillance: Percent of ED Visits Potentially Related to COVID-19



Data as of Mar 22nd

SYNDROMIC SURVEILLANCE

INVESTIGATORS, CONTACT TRACERS, CALL CENTER STAFF

Case Investigations and Contact Tracers

ELC CT Staff: 45 in house

- Priority COVID investigations including outbreaks and school support team
- Assist with specimen collection at
 - Community testing sites
 - Three CSN testing sites
 - METS clinic at SNHD (2 CTs)

100 contracted CTs on original team; contract extended through September 2022

Questions



MEMORANDUM



Date:

March 24, 2022

To:

Southern Nevada District Board of Health

From:

Fermin Leguen, MD, MPH, District Health Officer

Subject:

Administration Division Monthly Report - February 2022

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Appendix B — Finance — Payroll Earnings Summary — February 5 to 18, 2022	. 16
ppendix C – Finance – Payroll Earnings Summary – February 19 to March 4, 2022	. 19

Executive Summary

In summary, all the departments continue to see an increase in activity and outreach. The Office of Communications issued 11 News Releases and responded to several media requests for interviews/statements from staff, mainly on the COVID-19, the Secret of Siam investigation and opioids/fentanyl. Construction for the new clinic at the Fremont Street location has commenced and is now anticipated to be completed in May 2022. The Finance Department noted that 3 grants expired, and 16 grants were awarded. As of March 4, 2022, the Health District had 734 active employees, with a total number of vacancies of 23.5 FTEs and a total number of positions in recruitment of 55 FTEs. The Human Resources Department arranged 88 interviews, extended 14 job offers and successfully completed 2 new hires.

Office of Communications

News Releases Disseminated:

- February 28, 2022: National Health Survey is Coming to Clark County
- February 25, 2022: Southern Nevada Health District COVID-19 Update
- February 25, 2022: Southern Nevada Health District disease investigation update
- February 18, 2022: Southern Nevada Health District COVID-19 Update
- February 18, 2022: Southern Nevada Health District posts disease investigation survey
- February 15, 2022: Drive-thru COVID-19 Testing Site at Texas Station Ends Sunday; Sam Boyd Stadium Site Operation Ending March 10, Closed This Sunday
- February 11, 2022: Southern Nevada Health District COVID-19 Update
- February 10, 2022: Southern Nevada Health District COVID-19 Update
- February 4, 2022: Southern Nevada Health District COVID-19 Update
- February 3, 2022: Southern Nevada Health District, Southern Nevada HIV Awareness Consortium will observe National HIV/AIDS Awareness Day with Free Services
- February 1, 2022: February is American Heart Month

Press:

During February, the Office of Communications responded to media requests and Health District staff participated in interviews. Topics included:

- COVID-19:
 - o Daily metrics and updates
 - Omicron variant/subvariant identified
 - Declining cases
 - o COVID medication available
 - o Mask mandate removed
 - o Texas, Fiesta testing sites closed
 - o State of Nevada launches vaccine QR code
 - School district and mask mandates
 - Large events/conventions return
- National Black HIV/AIDS Awareness Month activities
- American Heart Month
- Secret of Siam investigation
- Opioids/fentanyl

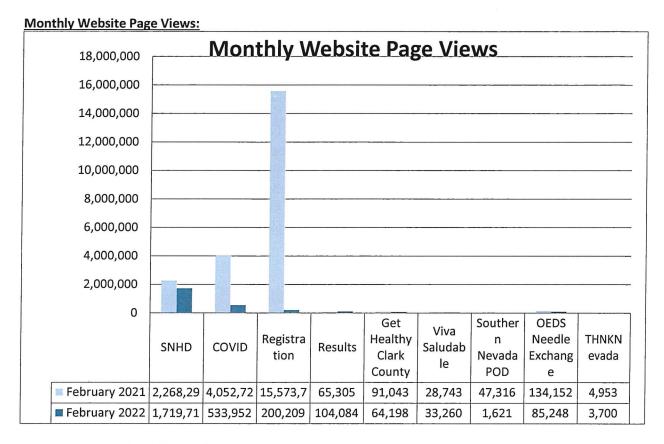
More than 250 news clips related to the Health District, local news coverage and national coverage of public health topics were compiled in February. Coverage includes traditional print, broadcast, digital and online media outlets. A complete list is available at

https://www.southernnevadahealthdistrict.org/download/oc/202202-oc-media-report.pdf

Media, Collateral and Community Outreach Services:

	Feb 2021	Feb 2022		YTD	YTD	
		reb 2022		FY21	FY22	
Media - Print Articles	104	67	$ \Psi $	650	710	á
Media - Broadcast stories	184	183	4	932	1.913	á
Collateral - Advertising/Marketing Products	52	50	$ \Psi $	403	456	á
Community Outreach - Total Volunteers ¹	0	5	á			-
Community Outreach - Volunteer Hours .	0	480	á.	. 0	4,015	á
feet to the contract of the co						

¹Total volunteer numbers fluctuate from month to month and are not cumulative.



Please see Appendix A for the following:

- Products Completed
- Advertising Placed
- Social Media Summary
- Website Updates/Postings
- Community Outreach
- Community/Partner Meetings and Events of Note
- Social Media Services

Contracts Administration

Period of Performance	Requests Received	Requests w/Expectations of Expedited Completion	% of Expedited Requests Received	Requests Processed
February 1 – 28, 2022	25	8	32%	27

Facilities

Monthly Work Orders	Feb 2021	Feb 2022		YTD FY21	YTD FY22	
Maintenance Responses	195	158	Ψ	1279	1169	4
Electrical Work Orders	5	12	个	69	75	1
HVAC Work Orders	14	2	Ψ	107	45	4

Plumbing Work Orders Preventive Maintenance **Security Responses**

4	11	1	59	61	1
9	21	1	129	169	1
870	1343	个	7459	9252	1

Finance

Total Monthly Work Orders by Department	Feb 2021	Feb 2022		YTD FY21	YTD FY22	
Grants Pending – Pre Award*	15	6	\downarrow	48	58	1
Grants in Progress – Post Award**	16	31	↑	112	167	↑
Purchase Orders Issued	483	388	+	2672	3404	↑

^{*} Grant application was created and submitted to agency
** Grant application was approved – is being routed for signature

Grants Expired – Febru	ary 2022					
Project Name	Grantor	End Date	Amount	Reason	FTE	Comments
Dignity Community	O-Dignity	2/28/2021	\$113,148	end of	0.00	renewed
Self-Measured Blood				performance		
Pressure Program			D.	period		
(digbp_21)						
Clark County Rapid	PT-HRSA	2/28/2022	\$120,300	end of	1.97	fiscal year 2023
Start Program				performance		in progress
(eherpd22)				period		
Ryan White HIV/AIDS	PT-HRSA	2/28/2022	\$1,152,456	end of	12.01	Amendment #5
Part A program				performance		in progress to
(rwa_21)				period		extend end date

Grants Awarde	d – Februar	y 2022				margarith and	
Project Name	Grantor	Received	Start Date	End Date	Amount	Reason	FTE
Special Projects of National Significance (dtchc_22)	PT-HRSA	2/4/2022	9/1/2021	8/31/2022	\$45,000	fiscal year 2022 renewal, year 2 of 2	0.36
Refugee Health Program (rhp_22)	PT-ACF	2/8/2022	10/1/2021	9/30/2022	fee for services	fiscal year 2022 renewal	0.00
Clark County Rapid Start Program (eherpd22)	PT-HRSA	2/10/2022	7/1/2021	2/28/2022	\$120,300	new effort	1.97
COVID-19 Vaccine Incentivizatio n Program (ccvax_22)	PT-US Treasury	2/9/2022	11/1/2021	6/30/2022	\$100,000	new effort	0.00

Grants Awarde	ed – Februa	ry 2022					
Project Name	Grantor	Received	Start Date	End Date	Amount	Reason	FTE
Epidemiology Laboratory Capacity - AMD Project COVID-19 (elcvam22)	PT-CDC	2/8/2022	7/1/2021	9/30/2022	\$660,210	new effort	0.00
American College of Preventive Medicine COVID-19 (hcvapm22)	PT-CDC	2/17/2022	12/3/2021	7/30/2022	\$150,000	new effort	0.01
PACT Coalition Marijuana Prevention and Education (mjpe_22)	PT- SAMHSA	2/17/2022	10/1/2021	9/30/2022	\$125,000	fiscal year 2022 renewal	0.30
Association of Public Health Laboratories - Quality Improvement s (aplqi_22)	PT-CDC	2/18/2022	2/10/2022	6/30/2022	\$10,000	new effort	0.06
Public Health Analytical Project (snctc_22)	PT-DHS	2/22/2022	10/1/2021	9/30/2023	\$106,500	fiscal year 2022 renewal	1.00
Retail Food Retail - Conformance with Retail Program Standards (rfbase22)	PT-FDA	2/22/2022	2/1/2022	12/31/2022	\$50,773	new effort	0.27
Retail Food Retail - Update of Food Establishment Resource Library Documents (rfferl22)	PT-FDA	2/22/2022	2/1/2022	12/31/2022	\$16,341	new effort	0.10
Retail Food Retail - Mentorship Project (rfment22)	PT-FDA	2/22/2022	2/1/2022	12/31/2022	\$17,889	new effort	0.01
Retail Food Retail - Attendance at	PT-FDA	2/22/2022	2/1/2022	12/31/2022	\$7,305	new effort	0.00

Grants Awarde	Grants Awarded – February 2022												
Project Name	Grantor	Received	Start Date	End Date	Amount	Reason	FTE						
Pacific Region Seminar (rftrn_22)													
Public Health Preparedness Program - Cities Readiness Initiative - CarryOver (crico_22)	PT-CDC	2/24/2022	7/1/2021	6/30/2022	\$97,765	carry over	0.00						
Health Center program, amendment #1 (hcnap_22)	F-HRSA	2/25/2022	2/1/2022	1/31/2023	\$289,667	addition supplemental funding for primary care HIV prevention portion	2.03						
STD Surveillance Program Supplemental Continuation (stds2_22)	PT-CDC	2/25/2022	3/1/2022	12/31/2022	\$1,199,260	fiscal year 2022 renewal	11.00						

Human Resources

Employment/Recruitment:

- New Job Titles/Classification Specifications: Quality Assurance Analyst, Laboratory Safety Officer
- 734 active employees as of March 4, 2022
- 2 New Hires, including 0 rehires and 0 reinstatements
- 10 Terminations, including 3 retirements
- 3 Promotions, including 0 Flex-reclass
- 1 Transfer
- 0 Demotions
- 35 Annual Increases
- 88 interviews
- 14 job offers extended
- 19 recruitments posted Updating NEOGOV system
- Turnover rates
 - o Administration: 1.45%
 - o Community Health: 0.00%
 - Disease Surveillance & Control: 1.49%
 - Environmental Health: 1.20%Primary & Preventive Care: 3.16%
- 48 Evaluations received and recorded in One Solution

- Total number of vacancies: 23.5 FTEs
- Total number of positions in recruitment: 55 FTEs

Temporary Employees

- 124 Temporary Staff, 7 New Agency Temporary Staff Members, 1 New Agency Temporary Staff
 Member- No Show
 - 2 Agency Temporary Staff Member assignments terminated/resigned
- 93 temporary staff from MedaSource supporting the LVCC Vaccination Clinics
- 8 temporary staff from Maxim with 3 pending positions open
- 18 temporary staff from Robert Half with 2 pending positions
- 4 temporary staff from Manpower with 0 position open
- 0 RPHontheGO 1 pending position

Tuition Reimbursements: 2

Benefits

- 19 new hires started benefits
- 6 changes in benefits
 - o 0 changes effective immediately
- 8 terminations from benefits
- Short term disability claims: 1
- 0 Flexible Spending Arrangements effective 2/1/2022
- Meetings presented for employees
 - o Benefit Orientation: 6 attendees
 - o Bereavement Meetings: 0
- COBRA Administration: 8
- COBRA QE Notices: 0

FMLA

- FMLA LEAVE REQUESTS
 - New: 11RTW: 7
- Conversations to discuss leave questions: 1
- Intermittent: 2 employees
- Block of FMLA leave: 9 employees
- Recertifications: 0 employees
- Denials: 0 employees

Retirements

- Withdrawals, rollovers, and purchase of service credit: 6
- Loans: 3
- Plan changes: 17
- New accounts: 5

Employee/Labor Relations

To be included in next month's report.

Trainings/Meetings Attended by Staff:

- PRC Meeting
- Position Control Meeting

- NEOGOV Onboard Implementation Meetings
- NEOGOV Training
- Training Managers in NEOGOV
- Primary Care Association Meeting-FQHC
- Gilead Grant Meeting
- Exit Interview Process Presentation
- Bi-weekly Recruitment / Position Control meeting
- Team Bi-weekly meetings
- Petroglyph A/V Training

Projects in Progress/Other items

- COVID policy updates and formatting
- Software Developer Apprenticeship Program
- Job Descriptions: Janitor Supervisor, Safety Officer and Security Supervisor
- Roseman Career Fair
- Case Management Certificate Program
- Recruitment Brochure Physician Kim
- AWS structure for PPC
- Freemont Clinic Staffing
- Job Descriptions: Epidemiologist Supervisor, Epidemiologist, DDCS
- Mentoring CDC representative
- Implementation of Position Review Committee (PRC)
- FQHC Chief Operations Officer Recruitment
- Comp & Class Briefings/Implementation planning
- HRSA Site Visit Planning
- Personnel Code Planning/Revision/Update
- TPA FMLA/ADA Implementation
- HR Service Model
- HR Communication Updates
- NEOGOV Training/Implementation
- Dyna File Implementation
- Privileging & Credential Implementation
- Amending, creating new and current contracts
- Evaluate update background process
- · Evaluate, review, update Onboarding
- Evaluate, review, update Orientation
- Evaluate, review, update Off-Boarding

Leena Lopez on behalf of Jennifer Fennema, Director of Human Resources

- Investigations
- Organizational Development
- Training
- Meetings with employees
- Committee/Team/Employee engagement meetings
- Leadership Meetings
- Leadership reports/plans/projects

Clerical Activity

- Admin Leave communication/upkeep
- Bilingual Process

- Mid-Cycle Pay Changes
- NEOGOV trainings and preparation
 - o Includes updating and formatting the NEOGOV guidebook and preparing to launch Onboard.
- NPDB Registration/Privileging
- ONESolution and Employee Information updates
 - o Includes inputting performance evaluations, updating license information, creating and inputting Personnel Change Forms, and processing OOC and HRIS forms.
- Recruitment Assistance
 - Includes background checks, Onboarding Part One, creating fillable interview notes, editing/formatting job descriptions and new hire packets, recruitment meetings, creating ID badges.
- Records Management
 - o Includes filing, scanning & indexing existing files into DynaFile, and records destruction.
- SharePoint
 - o Includes new hire welcomes and general site maintenance.
- Verifications of Employment

Other Clerical Activity

- Employee assistance
- Public assistance (usually recruitment or vital records questions)
- · Answer phones and office door, check and respond to voice mails
- Update, edit, and create packets as needed (new hires, benefits, ADA, etc.)
- · Format forms as needed
- Check and distribute mail, send mail
- Compile monthly reports
- Schedule meetings/reserve meeting rooms
- Employee vaccination rate tracking
- Submit orders to print shop
- Set up and schedule Empower site visits

Information Technology

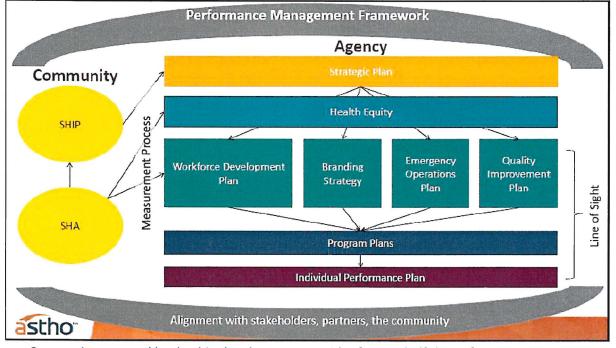
Service Requests	Feb 2021	Feb 2022		YTD FY21	YTD FY22	
Service Requests Completed	819	1039	1	5894	7463	个
Service Requests Opened	845	1009	1	6064	7411	1
Service Requests Open over 30 days	192	122	4	963	892	1
Information Services System Availability 24/7	Feb 2021	Feb 2022		YTD FY21	YTD FY22	
Information Services System Availability 24/7 Total System			1	1.0 =	–	1

Administration	286	363	1	2015	2702	个
Community Health	205	264	1	1593	1694	1
Environmental Health	129	142	1	920	910	4
Clinical Services	199	270	1	1366	2157	1
	Feb	Feb		YTD	YTD	
First Call Resolution & Lock-Out Calls	2021	2022		FY21	FY22	
Total number of calls received	845	1009	1	6064	7411	1
Number of first call resolutions	0 -	1	\downarrow	8	4	4
Number of Lock-out calls	3	0	4	78	16	V

Organizational Development & Strategy Officer

Impacting the District through interventions for performance, process, quality and strategy.

- Scheduling a meeting with leadership to finalize planning from May 2021
 - Will tie to Health Equity, Workforce Development, Branding Strategy, Emergency Operations Plan and QI/Performance Management Plan, CHA and CHIP
 - Watching State actions as they develop their first SHIP and SHA
 - Graphic below shows relationship between documents



- Contracting external leadership development provider for two half-days of training on-site followed by a third half-day for presentation of case studies in Leadership.
 - The audience is planned to include Management Steering Committee and key leaders from within FQHC
- Update on the LMS (Learning Management System)
 - Waiting for contractor to schedule configuration allowing support of
 - FQHC and required training documentation
 - Chronic Disease Prevention Health Promotion diabetes e-learning for the public
 - One-stop reporting for Divisions and Programs to monitor and assign specific training to their audiences

- Reminder notices to supervisors of team members completing training to encourage application and retention of knowledge
- Central Safety Committee
 - Collaborated with the Co-Chair in OPHP to update the Evacuation Training module.
 - Moved some information from legacy training to the intranet to allow more frequent updates
- Quality Improvement/Performance Improvement
 - o Identified provider of QI training to train leaders across the Health District on choosing QI projects and documenting progress to the final report.
 - Training will be a hybrid of in-person and virtual support and coaching to give each program experience in launching their own QI project.
- Updating Public Health Lab Job Descriptions:
 - o This work continues with completion slated for April 1, 2022.
- Study of Finance/Accounting group
 - Observe processes and will apply QI cycles to show improvement in
 - Working better together
 - Productivity
 - Over 130 hours spent on gathering data in SWOT form from internal team members and "customers" of this group across the Health District
 - 2 OD staff are embedded in teams that have been identified as priority based on workload, staffing and other factors
 - o A third OD staff member will begin documenting processes in the second week of March
 - The team will support Finance by documenting processes for Health District "customers" and facilitating training sessions as needed
- Workforce Development Team
 - Considering new training options
 - Working with Legal and HR to define mandatory training requirements and which, if any, audiences can be exempted
- Policy updates in process by this team
 - Evacuation
 - Safety
 - o QI
 - o Performance Management
 - Workforce Development

Appendix A – Office of Communications

Products Completed:

Newsletters:

Listening Session for 2022 Food Regulations 2-11-22

Flyers, Postcards, Posters, Fact Sheets:

- COVID-19 vaccine community clinics
- 2022-02-23 "With Every Heartbeat is Life Reunion"
- 2022-02-06 "Release the Pressure" event
- Brochure: HR recruitment for Clinical Staff Physician
- Brochure: Environmental Health Division (text updates)
- Fact Sheet: "Suggestions for providing food to people without housing"

Social Media:

- Graphics weekly testing locations
- Graphics weekly vaccination clinics
- Graphics Vax Facts (6 total)
- Graphics flu vaccine (5 total)
- Graphics weekly vaccine update (4 total)
- Graphic Presidents Day closure notice
- Graphic SNHD statement on masks
- · Graphic Infant formula recall
- Graphic COVID-19 5-day isolation
- Graphic National Condom Day
- Collage Wear Red Day

Monitor graphics:

President Day closure notice

Sliders:

- For SNHD.info
 - President Day closure notice
- For GetHealthyClarkCounty.org
 - Lunar New Year

Signs:

- "Mask Use Encouraged" for food handler lobby
- Annex A Check-in

Recordings:

Food Handler Card deadline extension to April 30

Videos:

• 11-minute overview video of our clinical services and disease prevention programs

Other:

- Developed \$200,000 marketing plan to promote the Southern Nevada Community Health Center
- Health Equity tablecloth

Advertising Placed:

- Las Vegas Kids Directory National Infant Immunization Week 2022
- SNAP cardholder RTC bike share discount (in Spanish)

Social Media Summary:

COVID 19 prevention, vaccine availability and general information

Website Updates/Postings:

- COVID site
 - o daily aggregate reports, trends, and maps
 - o weekly city reports
 - o daily vaccine counts
 - o weekly vaccine snapshots
 - new breakthrough case reports
 - updated testing and vaccine calendars as needed

SNHD site

- o posted weekly influenza surveillance reports
- updated tattoo regulation appendices
- o change "illegal vending" to "unpermitted vending" language
- o added page on the policy for food service on school grounds
- o posted Body Art Regulations business impact statement
- o extended final Food Handler Card deadline to June 30, 2022
- o updated some of the Vaccine Information Statements
- added language ownership transfer process on Aquatic Health Ownership Transfer pages
- revised language on suction outlet fitting assemblies' page
- o replaced Emergency Medical Care protocol manager with updated version
- updated vital records statistics for 2021
- o added infant formula recall information to Hot Topics
- o updated Public Accommodations application
- o posted public health updates, advisories, and technical bulletins
 - 2022-02-07 "Availability of monoclonal antibody therapies for COVID-19"
 - 2022-02-10 "Mask mitigation requirements for licensed health care facilities"
 - 2022-02-24 "Availability of Paxlovid and Molnupiravir for treatment of COVID-19"
 - 2022-02-25 "Updated quarantine interim clinical considerations for COVID-19 vaccine use"

Public Notices

- Seeking Input on Potential Business Impact of Proposed Trauma System Regulations
- Solid Waste Management Authority Hearing 2-17-2022
- Solid Waste Management Authority Hearing 2-23-2022

News releases postings

- "February is American Heart Month"
- "Southern Nevada Health District, Southern Nevada HIV Awareness Consortium will observe National HIV/AIDS Awareness Day with free services"
- Southern Nevada Health District COVID-19 Update
- "Southern Nevada Health District statement"
- o Southern Nevada Health District COVID-19 Update
- "Drive-thru COVID-19 testing site at Texas Station ends Sunday; Sam Boyd Stadium operations ending March 10, closed this Sunday"
- "Southern Nevada Health District posts disease investigation survey"
- Southern Nevada Health District COVID-19 Update
- "Southern Nevada Health District disease investigation update"
- Southern Nevada Health District COVID-19 Update
- "National Health Survey is coming to Clark County

WebEx recordings

- SNCHC Finance & Audit Committee
- o Board of Health
- SNCHC Governing Board

- Meeting agendas
 - o SNCHC Finance & Audit Committee
 - o Trauma System Regulations Workshop
 - o Board of Health
 - SNCHC Governing Board
- Approved meeting minutes
 - SNCHC Finance & Audit Committee
 - o Board of Health
 - SNCHC Governing Board

Community Outreach:

- February 3, 2022: 500 flyers clinic distributed to Rainbow Library, Centennial Library and YMCA
- February 7, 2022: 200 flyers clinic distributed to ZIP codes 89119 & 89108
- February 10, 2022: 500 flyers clinic distributed to ZIP codes 89014 & 89015
- February 17, 2022: 500 flyers clinic distributed to Outreach Mi Familia Vota
- February 25, 2022: 200 flyers clinic distributed to ZIP codes 89123 & 89054

Community/ Partner Meetings and Events of Note:

- February 28, 2022: CDC update call
- February 23, 2022: ICS Planning Meeting/Ops briefing
- February 22, 2022: ICS general staff/tactics meeting
- February 22, 2022: GOTVax Microplanning
- February 16, 2022: ICS Planning Meeting/Ops briefing
- February 15, 2022: GOTVax Microplanning
- February 14, 2022: CDC update call
- February 14, 2022: Planning Meeting/OP Briefing Vaccination ICS
- February 10, 2022: NIIW Planning Meeting
- February 9, 2022: ICS Planning meeting
- February 8, 2022: GOTVax Microplanning
- February 7, 2022: ICS general staff/tactics meeting
- February 7, 2022: CDC update call
- February 2, 2022: ICS Planning meeting

Social Media Services		Feb 2021	Feb 2022		YTD FY21	YTD FY22
*Facebook SNHD	Likes/ Followers	9,730	12,789	1	9,730	12,789
*Facebook GHCC	Likes/ Followers	6,163	6,168	1	6,163	6,168
*Facebook SHC	Likes/ Followers	1,672	1,686	1	1,672	1,686
*Facebook THNK/UseCondomSense	Likes/ Followers	5,667	5,540	4	5,667	5,540
*Facebook SNHD THNK Project	Likes/ Followers	48	47		48	47
*Facebook Food Safety	Likes/ Followers	58	108	1	58	108
*Instagram SNHD	Followers	3,014	3,731	1	3,014	3,731

*Instagram Food Safety	Followers	485	528	1	485	528
*Twitter EZ2Stop	Followers	420	437	1	420	437
*Twitter SNHDflu	Followers	1,774	1,921	1	1,774	1,921
*Twitter Food Safety	Followers	87	94	1	87	94
*Twitter GetHealthyCC	Followers	348	344	1	348	344
*Twitter SNHDinfo	Followers	9,308	10,359	1	9,308	10,359
*Twitter TuSNHD	Followers	311	339	1	311	339
*Twitter THNK/ UseCondomSense	Followers	731	720	Ψ.	731	720
*Twitter SoNVTraumaSyst	Followers	133	130	4	133	130
YouTube SNHD	Views	23,063	43,179	个	225,179	633,361
YouTube THNK/UseCondomSense	Views	374	248	V	2,928	2,430

^{*}Facebook, Instagram and Twitter numbers are not cumulative.

Appendix B – Finance – Payroll Earnings Summary – February 5 to 18, 2022

PAYROLL EARNINGS SUMMARY February 5, 2022 to February 18, 2022

		Pay Period	C	alendar YTD		Fiscal YTD		Budget 2022	Actual to Budget	Incurred Pay Dates to Annual
PRIMARY & PREVENTATIVE CARE	S	354,118.70	\$	1.444.885.12	\$	6,099,955.30	\$	8.009,554.00	76%	
ENVIRONMENTAL HEALTH	S	507,583.92	S	2.095,379.37	\$	8.610.740.51	S	12,655,509.00	68%	
COMMUNITY HEALTH	\$	300,968.36	S	1.289.307.72	\$	5.279.273.15	S	8.113.247.00	65%	
DISEASE SURVIELLANCE & CONTROL	\$	348.671.99	\$	1.450,714.41	\$	6,106,639.48	S	11,119,452.00	55%	
FQHC	\$	152,843.22	\$	640.916.99	\$	2.681.196.68	S	5.027,720.00	53%	
ADMINISTRATION W/O ICS-COVID	\$	363,252.09	S	1.527,235.30	\$	7,074,793.76	S	9,426,684.00	75%	
ICS-COVID General Fund	\$		\$		\$		3	9,420,084.00	0%	
ICS-COVID Grant Fund	\$		\$	Market Barrier	\$	107,525.82			ESCHAL WHERE	# SEPONALL
TOTAL	S	2,027,438.28	S	8,448,438.91	S	35,960,124.70	S	54,352,166.00	66%	65%
FTE		745								_
Regular Pay	\$	1.817.927.90	S	6.583.249.92	S	27,504,856.10				
Training	S	5.888.57	\$	18.508.70	\$	120.402.90				
Final Payouts	S	1.503.15	\$	210.906.17	\$	462.049.14				
OT Pay	\$	14,118.93	\$	76.782.34	\$	624,264.78				
Leave Pay	S	173,029.09	\$	1.455,160.43	\$	5.920.861.95				
Other Earnings	\$	14.970.64	\$	103,831.35	\$	1,327,689.82				
TOTAL	s	2,027,438.28	S	8,448,438.91	S	35,960,124.69				

BI-WEEKLY OT/CTE BY DIVISION/DEPARTMENT February 5, 2022 to February 18, 2022

Overtime Hours and Amounts

Comp Time Hours Earned and Value

ADMINISTRATION

Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	<u>Value</u>
AGUILAR GONZALEZ, MARIA M		6.00	169.65			
GO, JOEL F		0.50	14.87			
GOMEZ, ESTEBAN		6.00	169.65			
HARP, ELIU B		6.00	178.47			
MARTINEZ, YOLANDA		6.00	178.47			
MASTERS, CHRISTOPHER		14.00	384.72			
PALMER, MICHAEL J		8.00	439.80			
RUIZ, GEORGE		5.00	192.15			
STEVENS, MICHAEL P		0.50	20.22			
THEDE, STACY		14.00	395.85			
BOJORQUEZ, IBETH		8.75	493.24			
GALAVIZ, MONICA		5.00	289.20			
MCKNIGHT, ANTOINETTE		6.75	326.13			
PLAIR, TONIA M		9.00	424.44			
TRAN, AMY		2.00	101.73			
WILCOX, TERESA E		2.00	107.04			
ZIELINSKI, LYNDA S		6.00	404.37			
Total Administration		105.50	4290.00		0.00	0.00

1.50

64.04

COMMUNITY HEALTH

Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	<u>Value</u>
				THOMAS, PAMELA S	0.75	21.28
Total Community Health		0.00	0.00		0.75	21.28

PRIMARY & PREVENTIVE CARE

Employee	Project/Grant Charged to	Hours	Amount	Employee	<u>Hours</u>	<u>Value</u>
ENZENAUER, LIZETTE	IMMCD_21	0.75	37.20	NAVARRO, MARITES L	0.75	32.02
ARQUETTE, JOCELYN M	IMMCD_21	1.00	67.40	WOODS, ROSANNA	0.75	32.02
MIRANDA, BELEM		0.50	15.26			
PETERSON, HOLLY	IMMCD_21	2.00	96.63			
NAVARRO, MARITES L		0.00	0.00			
RODRIGUEZ, SANDY		1.50	45.77			
VILLALOBOS, YOLANDA	HCVD4_21	4.50	148.30			
WOODS, ROSANNA		0.00	0.00			
MACIEL PEREZ, MARISOL	IMMEQ_21	1.00	44.79			
MARIANO, CHRIS ELAINE L		4.00	256.14			
BURQUEZ AHUJA, LILIA		0.50	21.28			
DEL ROSARIO, EDNA		12.25	458.46			
MORALA, DENNIS		0.75	36.24			
CRUZ, STACY		0.25	8.45			
D'COSTA, TERESA K		0.25	13.04			
ANDERSON, RENITA		12.50	411.94			
CUASITO, BEVERLY V	HCVD4_21	3.00	104.09			
DIONISIO, KIRSTEN	HCVD4_21	4.50	217.42			
MEDINA, VALERIA		0.50	16.04			
MORENO, LAURA J	HCVD4_21	16.00	501.36			
VARA, KARINA E	HCVD4_21	9.00	288.77			
DALTON, BRENDAN	EHERD_22	0.25	13.74			
LANGDOK, LAURIE C		0.50	21.28			
YUMUL, JESSICA	EHERD_22	0.25	12.40			

ENVIRONMENTAL HEALTH

75.75 2836.00

Total Primary & Preventative Care

Employee	Project/Grant Charged to	<u>Hours</u>	Amount	Employee	Hours	<u>Value</u>
BILLINGS, JACOB T	China gett to	6.00	374.67	BUCHER, BRADON	2.63	70.77
BLACKARD, BRITTANIE		6.25	265.97	CAVIN, ERIN M	9.00	365.13
CAMPA, RAYMOND		4.00	198.42	COHEN, VALERIE NICOLE S	8.25	334.70
DARANG, CHASE		6.00	242.64	DIAZ-ONTIVEROS, LUZ	9.00	242.64
KAPLAN, KRISTOPHER		4.50	206.62	FENG, YUZHEN	19.50	661.25
ORTIZ RIVERA, VANESSA		4.50	234.77	GRANDT, NICOLE	4.50	141.48
PARANGAN, CHRISTOPHER D		9.00	424.44	JONES, MALLORY	9.00	236.34
PIAR, DIANE M		7.25	398.57	KNOWLES, MIKKI M	10.50	414.86
PONTIUS, KEVIN		6.00	313.02	LIZON, ANDREW	6.75	177.26
REYES, ABEGAIL		4.00	161.76	LUCAS, BRIANNA A	5.25	182.60
RICH, VICTORIA		9.75	483.65	MCCANN, ALEXANDRA	8.25	216.65
SABANDITH, VETAHYA		6.00	236.34	MICHEL, GUILLERMO	9.00	236.34
SHARIF, RABEA		5.75	307.74	MUTH, JAMES W	8.25	325.96
SHEFFER, THANH V		9.50	522.26	NORTHAM, KORIE	9.00	384.21
SOUTHAM, JACLYN		6.75	287.25	PONTIUS, KEVIN	1.88	65.21
VALADEZ, ALEXIS		4.00	161.76	RAMAKRISHNAN, VEENA	3.75	127.16
WELLS, JORDAN		5.50	216.65	REYES, ABEGAIL	1.50	40.44
HALL, LATONIA V		6.25	326.06	ROBINSON, GARY P	6.38	245.82
GARCIA, JASON M		1.00	53.52	THEIN, KELSEY	8.63	226.49
SUMERA, ERIK J		1.25	65.21	VALADEZ, ALEXIS	2.25	60.66
				WARD, JESSICA Y	5.63	151.65
				CLARK, DEBORAH M	1.88	70.46
				MACDAVID, HEATHER R	2.25	82.46
Total Environmental Health	_	113.25	5481.32		153.00	5060.53

DISEASE SURVEILLANCE & CONTROL

Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	Value
DHILLON, KARNJIT S	EL2DS_20	0.50	18.71			
NGARI, ALICE K		0.25	9.36			
PEREZ, MELANIE J		0.25	11.79			
ARIAS, JULIUS F		1.50	101.09			
FOLEY, JAMES M		4.00	157.56			
FUQUA, MATTHEW		8.00	332.16			
MONTGOMERY, JOSHUA M		6.50	357.34			
O'CONNOR, KELLI J		2.00	104.34			
REYES, REBECCA		5.00	254.33			
DELISE, BRANDON		3.00	164.93			
Total Disease Surviellance & Control	-	31.00	1511.61		0.00	0.00
Combined Total	_	325.50	14118.93		155.25	5145.84

Appendix C – Finance – Payroll Earnings Summary – February 19 to March 4, 2022

PAYROLL EARNINGS SUMMARY February 19, 2022 to March 04, 2022

		Pay Period	C	Calendar YTD		Fiscal YTD		Budget 2022	Actual to Budget	Incurred Pay Dates to Annual
PRIMARY & PREVENTATIVE CARE	\$	342,919.01	\$	1,852,395.80	\$	6,507,465,98	S	8.009,554.00	81%	
ENVIRONMENTAL HEALTH	\$	508.362.06	S	2,603,741,43	\$	9.119.102.57	\$	12,655,509.00	72%	
COMMUNITY HEALTH	\$	308,951.25	S	1.598.258.97	\$	5.588.224.40	S	8.113,247.00	69%	
DISEASE SURVIELLANCE & CONTROL	\$	345.242.09	S	1,797.268.20	\$	6,453,193.26	S	11.119,452.00	58%	
FQHC	\$	151.853.27	\$	796.374.89	\$	2,836,654.58	S	5,027,720.00	56%	
ADMINISTRATION W/O ICS-COVID	\$	372,988.14	\$	1.918.288.12	\$	7,465.846.58	S	9.426.684.00	79%	
ICS-COVID General Fund	\$		\$	-	\$		D	9,420,084.00	0%	
ICS-COVID Grant Fund	\$		\$		\$	107,525.82				
TOTAL	S	2,030,315.82	S	10,566,327.41	S	38,078,013.19	S	54,352,166.00	70%	69%
FTE		733								
Regular Pay	S	1.623.553.97	S	8.213.913.15	S	29,135,519,33				
Training	S	2.844.67	\$	21.353.37	\$	123,247.57				
Final Payouts	S	1,419,49	\$	290.095.80	\$	541.238.77				
OT Pay	\$	14.593.63	\$	91.375.97	\$	638.858.41				
Leave Pay	\$	359.053.40	S	1.816.907.11	\$	6.282,608.63				
Other Earnings	\$	28,850.66	\$	132,682.01	\$	1.356.540.48				
TOTAL	S	2,030,315.82	S	10,566,327.41	S	38,078,013.19				

BI-WEEKLY OT/CTE BY DIVISION/DEPARTMENT February 19, 2022 to March 04, 2022

Overtime Hours and Amounts

Comp Time Hours Earned and Value

ADMINISTRATION

Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	<u>Value</u>
CARMEN, KYLE		8.00	219.84			
GO, JOEL F		2.25	66.93			
GOMEZ, ESTEBAN		6.00	169.65			
HARP, ELIU B		6.00	178.47			
MARTINEZ, YOLANDA		11.50	342.07			
MASTERS, CHRISTOPHER		16.00	439.68			
RUIZ. GEORGE		3.50	134.51			
THEDE, STACY		38.00	1.074.45			
VUKSANOVIC, DAN		8.00	284.40			
BOJORQUEZ, IBETH		9.50	535.52			
GALAVIZ, MONICA		27.00	1,561.68			
MCKNIGHT, ANTOINETTE		4.25	205.34			
PLAIR, TONIA M		2.50	117.90			
WILCOX, TERESA E		2.00	107.04			
CARLOCK, CARL E	EL2DS_20	3.50	165.06			
YUMUL, JOSEPH Y		0.50	28.92			
Total Administration		148.50	5631.46		0.00	0.00

COMMUNITY HEALTH

Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	<u>Value</u>
MEE, CHRISTINA L		2.50	130.43	ANDRADE, JESSICA N	1.50	29.75
Total Community Health		2.50	130.43		1.50	29.75

PRIMARY & PREVENTIVE CARE

Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	<u>Value</u>
ARQUETTE, JOCELYN M	IMMCD_21	2.50	168.49	AGUILAR, BECKYS	0.75	26.09
AYALA, JACQUELINE	IMMCD_21	1.75	48.09	CARPENTER, LESLIE M	0.38	13.38
NAGAI, SAGE	IMMCD_21	0.50	24.16	HODGE, VICTORIA	0.38	10.91
SIMON, MARIA X	IMMCD_21	1.00	48.32	ELLIS, REGENA M	1.50	64.04
CAREW, KASHONA I	FPNV_22	3.50	160.70			
VILLALOBOS, YOLANDA	HCVD4_21	9.00	296,60			
DEL ROSARIO, EDNA		17.75	664.29			
MORALA, DENNIS		2.25	108.71			
NAVARRO, MARIA S		6.00	197.73			
ANDERSON, RENITA		10.75	354.27			
DOMINGUEZ, LILIANA	HCVD4_21	6.50	243.26			
ESCARENO, JANETT	HCVD4_21	6.00	202.68			
MORENO, LAURA J	HCVD4_21	1.00	31.34			
OREA-VALENCIA, MIRELLY	HCVD4_21	8.25	293.29			
VARA, KARINA E	HCVD4_21	10.75	344.91			
DALTON, BRENDAN	EHERD_22	0.25	13.74			
DIAZ VILLA, BANESSA	RWAEIS21	0.50	17.35			
YUMUL, JESSICA		0.25	12.40			
Total Primary & Preventative Care	=	88.50	3230.33		3.00	114.41

BI-WEEKLY OT/CTE BY DIVISION/DEPARTMENT February 19, 2022 to March 04, 2022

Overtime Hours and Amounts

Comp Time Hours Earned and Value

ENVIRONMENTAL HEALTH

Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	<u>Value</u>
BILLINGS, JACOB T	FDILL_22	7.00	437.12	BROWN, TEVIN	4.13	108.32
CAMPA, RAYMOND		8.50	421.64	BUCHER, BRADON	4.50	121.32
FENG, YUZHEN		11.00	559.52	DIAZ-ONTIVEROS, LUZ	0.75	20.22
KAPLAN, KRISTOPHER		1.50	68.87	KADERLIK, PATRICIA A	3.00	121.71
KNOWLES, MIKKI M		3.50	207.43	KNOWLES, MIKKI M	6.00	237.06
LETT, KENDRA A		10.25	534.74	LIZON, ANDREW	3.00	78.76
MARTUCCI, GRACIELA I		3.25	197.78	MICHEL, GUILLERMO	3.75	98.48
ORTIZ RIVERA, VANESSA		4.75	247.81	PEREZ VILLANUEVA, ANGEL	6.00	157.56
PARANGAN, CHRISTOPHER D		2.50	117.90	REYES, ABEGAIL	0.75	20.22
PIAR, DIANE M		6.00	329.85	ROBINSON, GARY P	7.13	274.74
SHARIF, RABEA		3.25	173.94	SANDERS, JENNIFER C	1.13	31.92
SHEFFER, THANH V		4.00	219.90	SHARIF, RABEA	15.00	535.20
BARAJAS, ALEXIS		4.00	243.42	THOMPSON, WILLIAM B	4.13	139.88
DIPRETE, LAUREN K	FDILL_22	1.50	96.05	VALADEZ, ALEXIS	0.75	20.22
NAVARRETE, GEORGE		1.25	84.24	KENNEDY, DANIEL J	3.00	91.83
GRIGGS, ZACHARY		1.25	49.24	CLARK, DEBORAH M	2.25	84.56
KURTTI, DONNA M		4.00	188.64	SMITH, JESS W	12.00	377.28
GARCIA, JASON M		3.00	160.56			
LUTHER, JENNIFER		4.50	177.26			
SMITH, JESS W		2.00	94.32			
Total Environmental Health	-	87.00	4610.23		77.25	2519.29

DISEASE SURVEILLANCE & CONTROL

Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	<u>Value</u>
DHILLON, KARNJIT'S	EL2DS_20	0.50	18.71	RAMAN, DEVIN C	0.75	33.70
NGARI, ALICE K	EL2DS_20	0.50	18.71	ROSSI BOUDREAUX THIB, DUSTIN M	9.75	375.96
MONTGOMERY, JOSHUA M	HIVPRV22	7.75	426.06			
O'CONNOR, KELLI J	HIVPRV22	7.00	365.19			
ROSSI BOUDREAUX THIB, DUSTIN M	HIVPRV22	0.00	0.00			
WEDDLE, DANIEL M		0.75	34.44			
QIU SHULTZ, ZUWEN		2.00	128.07			
Total Disease Surviellance & Control	-	18.50	991.18		10.50	409.66
Combined Total		345.00	14593.63		92.25	3073.10
	=					



Memorandum

Date: March 4, 2022

To: Southern Nevada District Board of Health

From: Michael Johnson, PhD, Director of Community Health

Fermin Leguen, MD, MPH, District Health Officer

Subject: Community Health Division Monthly Activity Report – February 2022

I. OFFICE OF CHRONIC DISEASE PREVENTION & HEALTH PROMOTION (OCDPHP)

A. Chronic Disease Prevention Program (CDPP)

The Slam Dunk Health Program relaunched in January 2022 after being sidelined due to COVID-19 for the past 2 years. The school-based program is a partnership between the CDPP, CCSD, and the Las Vegas Aces WNBA team. The program encourages physical activity and fruit and vegetable consumption among elementary school youth and rewards winning classrooms with visits from Aces players and coaches. This year, 1,077 elementary school classrooms signed up to participate. This represents 18,880 students in 114 CCSD elementary schools. The program will run through early April.

CDPP sponsors the CCSD Safe Routes to School (SRTS) Program. With our support, the SRTS program completed a 'Walk and Roll' program during fall 2021 at 5 schools (estimated 4,000 children) and will be implementing a second 'Walk and Roll' program along with a 'Design Your Helmet' and Achievement Level Champion initiatives planned for spring 2022.

CDPP staff is working with 3 faith-based food pantries to implement the SWAP (Supporting Wellness at Pantries) Program. The SWAP Program helps pantry clients access healthier foods through a stoplight food ranking program and other environmental and systems changes to the pantry environment. Nutritional and environmental assessments were conducted to identify support needed to fully implement SWAP. Shelving and refrigeration have been provided to the pantries to support increased access to healthier foods and allow for foods to be displayed according to the stoplight system. SWAP training was provided in January to all 3 pantries. Pantry coordinators, volunteers and church leadership were all trained in the SWAP program and the program is now fully operational in all 3 pantries. CDPP will continue to provide technical assistance and support to the pantries.

CDPP staff submitted the Annual Status Report to the American Diabetes Association as part of our ADA recognition program. During 2021, the Diabetes Self-Management Education & Support (DSMES) program reached a total of 34

individuals who attended at least 1 DSMES class. Over 70% of participants were still meeting their physical activity goals 6-months after the last class and 96% of participants indicated they were 'Very Satisfied' with the class. Also in January, CDPP staff launched a virtual DSMES class that will run through March 9th. The next DSMES class is an in-person class scheduled for March.

B. Tobacco Control Program (TCP)

Island eNVy, the SNHD Native Hawaiian and Pacific Islander cessation initiative held their monthly event called 'Ohana Outing on January 14th at the Cowabunga Bay Chinese Lantern Festival. All attendees watched a short video on tobacco cessation before participating in the event. 130+ people attended the event.

Staff developed culturally appropriate educational materials to encourage tobacco cessation through the Spanish tobacco Quitline and promote smoke-free living among the Latinx community. A collaboration with 4 local Latino-owned restaurants was established for 8 weeks and concluded this month. The collaboration utilized Por Mi Por Ti Por Nosotros messaging to encourage cessation and smoke-free living among patrons through the distribution of materials. Collaboration resulted in the implementation of smoke-free minimum distance policies and positive feedback from staff and patrons.

Nine local businesses including convenience stores and restaurants voluntarily expanded their tobacco-free policy in January.

A new tobacco cessation video aimed at the Hispanic population featuring local community members sharing their own experience in quitting tobacco.

C. Other Efforts

OCDPHP has received additional funding from the CDC to support COVID-19 and flu vaccine education and delivery among our REACH grant priority populations (African Americans and Hispanics). OCDPHP staff are working with community partners to train influential messengers in the community, promote vaccine update and increase accessibility to vaccines among these populations. In January, Nevada Institute for Children's Research and Policy (NICRP) staff finalized a report outlining findings of a focus group held in December 2021. The focus groups built upon the COVID-19 and Flu Vaccination Survey findings in an effort to better understand disparities in vaccine uptake among African American/Black young adults who are not yet vaccinated or have received a COVID-19 vaccine within the past three months.

Overall, focus group participants supported vaccinations in general. However, participants viewed the COVID-19 vaccine with more hesitation. The most common reasons for COVID-19 vaccine hesitancy were that participants believe the vaccine is too new without enough safety information and that they are concerned about side effects long term and also missing work after vaccination. Participants were generally less hesitant toward obtaining a flu vaccine. The most common reasons reported for flu vaccine hesitance were that respondents do not believe the vaccine is necessary, fear of potential side effects (missing work from feeling sick). Among all flu messaging samples shared, vaccine safety, and COVID-19 and flu vaccine co-messaging were most popular. A focus group with Hispanic young adults is currently being planned.

- 1. In January no new influential messengers in the faith community were trained by SNHD staff and contractors. To date, 137 influential messengers have been trained.
- 2. Staff and contractors participated in 1 community event to distribute information and promote vaccination in January. 47 events have occurred to date serving 6,436 people.
- 3. Seven pop up vaccine clinics were offered in REACH priority zip codes during January vaccinating 401 people for COVID-19 and 227 people for flu. A total of 4,292 individuals have been vaccinated to date through these efforts.
- 4. A targeted media campaign to promote flu vaccination among priority populations continued to air in January. The campaign resulted in over two million ad impressions this month.

II. OFFICE OF EMERGENCY MEDICAL SERVICES & TRAUMA SYSTEM (OEMSTS)

COMMUNITY HEALTH - OEMSTS - Fiscal Year Data

	Feb.	Feb.	
February EMS Statistics	2021	2022	
Total Certificates Issued	51	71	1
New Licenses Issued	45	42	4
Renewal Licenses Issued (recert only)	0	3	1
Driver Only	14	16	1
Active Certifications: EMT	870	839	4
Active Certifications: Advanced EMT	1761	1641	4
Active Certifications: Paramedic	1884	1904	1
Active Certifications: RN	63	58	4

III. OFFICE OF PUBLIC HEALTH PREPAREDNESS (OPHP)

A. Planning and Preparedness

- OPHP staff continue to assist the District and the community in responding to the COVID-19 pandemic. Many staff remain in SNHD ICS functions, as well as County MACC/MSST positions.
- 2. Staff continue to host and attend community meetings virtually with community and hospital partners.
- 3. Staff are working with internal staff who have been responding to the COVID response as well as external partners to develop an interim action report for SNHD and the region.
- OPHP Manager, Supervisor, and Planner I/II attended 2022 Nevada Emergency Preparedness Association Summit from February 23-25 at M Resort. Topics included weapons of mass destruction, continuity of operations, planning with schools, and COVID activities with hospital coalitions.

- 5. OPHP staff assisted with receipt of home testing kits to provide to community-based organizations serving at-risk populations.
- 6. OPHP staff assisted with distribution of masks to SNHD staff as part of the HRSA Health Center COVID-19 N95 mask program.

B. PHP Training and PH Workforce Development

- Following SNHD leadership direction, all non-essential training has been postponed focusing on the COVID-19 response and training needs.
- Employee Fit Testing: Essential SNHD staff continue to receive respirator fit testing. 26 fit tests completed.
- 3. Planner I/II attended Continuity of Operations Training at Clark County Fire Station on February 22, 2022.

C. Hospital Preparedness Program (HPP)

- 01 FEB HPP participated in the State of Nevada Microplanning session for Southern Nevada.
- 2. 02 FEB HPP Liaison, as the Deputy Planning Section Chief participated in the Southern Nevada Health District Incident Command System Planning meeting looking at the next operational period's needs.
- 3. 03 FEB HPP Liaison, as Chair, Southern Nevada Healthcare Preparedness Coalition hosted the SNHPC Monthly meeting, developed the agenda, and built the presentation for the coalition members. Information updates included the monthly All-Hospital Radio Test for the Month of January 2022, upcoming planning meetings, upcoming training, and upcoming exercises. Also, the SNHPC offers community partners/HCC members to update the members on ongoing operations in their jurisdictions. Also, HPP Liaison met with Silver State Pediatric Skilled Nursing Facility to extend technical assistance for their emergency operations plan planning and membership to the Southern Nevada Healthcare Preparedness Coalition.
- 07 FEB HPP Liaison, as the Deputy Planning Section Chief participated in the Southern Nevada Health District Incident Command System Command & Staff meeting looking at the next operational period's needs.
- 5. 09 FEB HPP Liaison, as the Deputy Planning Section Chief participated in the Southern Nevada Health District Incident Command System Planning meeting looking at the next operational period's needs.
- 6. 10 FEB HPP participated in the University Medical Center of Southern Nevada's Emergency Management Committee Meeting. Updates provided included date and time of the March 2022 Southern Nevada Healthcare Preparedness Coalition meeting, date and time for the Radiation Response Table-top Exercise, Highly Infectious Disease Table-top Exercise, and Call Down Drills. Finally, HPP addressed the Pediatric Training Class in April 2022 reminding participants that without a minimum of thirty (30) participants, the class will be canceled.
- 7. 11 FEB HPP Liaison participated in the Support to Local Health Authorities hosted by the State of Nevada.
- 8. 14 FEB HPP Liaison, as the Deputy Planning Section Chief participated in the Southern Nevada Health District Incident Command System Command & Staff meeting looking at the next operational period's needs.

- Also, OPHP participated with Information Technology to discuss IT survey outcomes and how IT can better support the team in OPHP.
- 9. 15 FEB HPP participated in the State of Nevada Microplanning session for Southern Nevada.
- 10. 16 FEB HPP hosted the Radiation Response Table-Top Exercise for the Southern Nevada Healthcare Preparedness Coalition. The focus was to validate/identify the SNHPC Radiation Response Annex to the SNHPC Response Plan. Members of the coalition participated in the exercise. Also, HPP Liaison, as the Deputy Planning Section Chief participated in the Southern Nevada Health District Incident Command System Planning meeting looking at the next operational period's needs.
- 11. 22 FEB HPP participated in the State of Nevada Microplanning session for Southern Nevada. HPP Liaison, as the Deputy Planning Section Chief participated in the Southern Nevada Health District Incident Command System Command & Staff meeting looking at the next operational period's needs.
- 12. 23 FEB HPP Liaison participated in the ASPR Medical Surge Response Exercise webinar discussing the surge estimator, documents, and calculations required to complete the MRSE. Also, Also, HPP Liaison, as the Deputy Planning Section Chief participated in the Southern Nevada Health District Incident Command System Planning meeting looking at the next operational period's needs.
- 13. 24 FEB HPP Liaison attended two webinars titled: COVID-19 AAR Webinar & Closing the COVID-19 Test to Treatment Gap. Each webinar focused on different aspects of COVID-19 with varied viewpoints on each topic with multiple subject matter experts presenting research.
- 14. 28 FEB HPP Liaison, as the Deputy Planning Section Chief, participated in the Southern Nevada Health District Incident Command System Command & Staff meeting looking at the next operational period's needs.

D. Grants and Administration

OPHP staff are supporting SNHD and MACC/MSST COVID-19 response and logistical needs.

E. Medical Reserve Corps (MRC) of Southern Nevada

MRC coordinator works in conjunction with SNHD and community partners for volunteers needed for the COVID-19 response.

In January, medical and non-medical volunteers were deployed to support hospital operations at three area hospitals during the Omicron surge. Medical and non-medical volunteers continue to support the COVID-19 vaccination site at SNHD South Clinic (formerly the site of the non-congregate shelter) as medics and support personnel. Volunteers assisted at the SNPHL with test kit assembly and specimen accessioning. Total "accepted" volunteers stand at about 570. MRC Coordinator recruited, vetted, assigned, deployed, and deactivated volunteers to all sites. MRC Coordinator continues to recruit and deactivate volunteers and participates in COVID-19 planning and operations meetings as available. MRC also attended monthly NACCHO MRC Workgroup and PPAG meetings. The table below summarizes volunteer hours served in the third quarter of this fiscal year.

MRC Volunteer Hours FY2022 Q3 COVID-19 Response and Non-Emergency (Economic impact rates updated July 2021)

Activity	January	February	March
SNHD COVID CLINIC	22.75		
SNPHL	2.25		
Hospital Support	101.75		
Total Hours	126.75		
Economic impact	\$4,927.96		

IV. VITAL RECORDS

A. Vital Statistics

February 2022 showed an 11% increase in birth certificate sales in comparison to February 2021. Death certificate sales showed a 6.9% increase for the same time frame. SNHD received revenues of \$37,232 for birth registrations, \$31,980 for death registrations; and an additional \$9,115 in miscellaneous fees.

COMMUNITY HEALTH Vital Statistics Program - Fiscal Year Data

				FY 20-	FY 21-	
	Feb	Feb		21	22	
Vital Statistics Services	2021	2022		(Feb)	(Feb)	
Births Registered	1,908	2,048	1	16,831	17,613	1
Deaths Registered	2,247	2,376	1	16,473	17,002	1
Fetal Deaths Registered	19	11	4	118	132	1

COMMUNITY HEALTH Vital Statistics Program - Fiscal Year Data

Vital Statistics Services	Feb 2021	Feb 2022		FY 20-21 (Feb)	FY 21-22 (Feb)	
Birth Certificates Sold (walk-in)	1	1		40	241	1
Birth Certificates Mail	99	125	1	774	823	1
Birth Certificates Online Orders	3,242	3,630	1	25,997	29,933	1
Birth Certificates Billed	121	88	4	791	759	4
Birth Certificates Number of Total Sales	3,463	3,844	个	27,602	31,756	1
Death Certificates Sold (walk-in)	1	28	1	36	220	1
Death Certificates Mail	103	187	1	814	1,018	1
Death Certificates Online Orders	10,618	11,225	1	74,308	79,522	1
Death Certificates Billed	35	59	1	356	446	1
Death Certificates Number of Total Sales	10,757	11,499	1	75,514	81,206	个

COMMUNITY HEALTH Vital Statistics Program - Fiscal Year Data

	Feb	Feb		FY 20-21	FY 21-22	
Vital Statistics Sales by Source	2021	2022		(Feb)	(Feb)	
Birth Certificates Sold Valley View (walk-in)				.1%	.8%	1
Birth Certificates Mail	2.9%	3.3%	1	2.8%	2.6%	4
Birth Certificates Online Orders	93.6%	94.4%	1	94.2%	94.3%	个
Birth Certificates Billed	3.5%	2.3%	4	2.9%	2.4%	4
Death Certificates Sold Valley View (walk-in)		.2%	1		.3%	1
Death Certificates Mail	1%	1.6%	1	.1%	1.3%	个
Death Certificates Online Orders	98.7%	97.6%	4	98.4%	97.9%	4
Death Certificates Billed	.3%	.5%	1	.5%	.5%	

COMMUNITY HEALTH Vital Statistics Program – Fiscal Year Data

Revenue	Feb 2021	Feb 2022		FY 20-21 (Feb)	FY 21-22 (Feb)	
Birth Certificates (\$25)	\$86,575	\$96,100	1	\$690,050	\$793,900	1
Death Certificates (\$25)	\$268,925	\$287,475	1	\$1,887,850	\$2,030,150	1
Births Registrations (\$13)	\$35,646	\$37,232	1	\$277,368	\$299,858	1
Deaths Registrations (\$13)	\$30,225	\$31,980	1	\$220,209	\$229,203	1
Convenience Fee (\$2)	\$7,102	\$8,018	1	\$55,582	\$63,942	1
Miscellaneous Admin	\$737	\$1,097	1	\$4,883	\$6,556	1
Total Vital Records Revenue	\$429,210	\$461,902	1	\$3,135,942	\$3,423,609	1

COMMUNITY HEALTH Passport Program – Fiscal Year Data

B. Passport Services

Due to pandemic Passport Services moved to appointment only. Passport photos remain suspended. Passport services is showing 146% increase from this time last year.

	Feb	Feb		FY 20-21	FY 21-22	
Revenue	2021	2022		(Feb)	(Feb)	
Passport Execution/Acceptance fee (\$35)	\$11,060	\$24,045	个	\$69,650	\$168,630	1
Passport Photo Fee (\$12)						
Total Passport Program Revenue	\$11,060	\$24,045	1	\$69,650	\$168,630	1

V. HEALTH CARDS

A. Food Handling

1. Appointments

- a. Currently booked through mid-May with available timeslots through May 31, 2022.
- b. Deadline extended to June 30, 2022 for clients to obtain their Health Cards. No further extensions past the end of June.
- c. Meeting with MGM properties to work out logistics of doing Health Cards at their site.
 - i. Aria would be the ideal location for the MGM group.
 - ii. Looking at the end of May 2022, several dates/sessions.
 - iii. Anticipate up to 4,000 MGM employees to be processed.

2. Other Items

East Las Vegas – per Sean, estimated completion of new location is end of May/early June.

SERVICES	Feb 1 - 28	Jan 1 - 31	Dec 1 - 31	Nov 1 - 30	Oct 1 - 31
Food Handler Cards - New	997	1,034	944	1,088	1,294
Food Handler Cards - Renewals	3,079	3,160	2,848	3,350	3,788
Duplicates	133	134	144	167	164
CFSM (Manager) Cards	145	134	106	129	147
Re-Tests	491	525	408	473	537
Body Art Cards	159	161	132	146	145
TOTALS	5.004	5.148	4.582	5.353	6.075

REVENUE - Point of Sale	
Food Handler Cards - New	
Food Handler Cards - Renewals	
Duplicates	
CFSM (Manager) Cards	
Re-Tests	
Body Art Cards	
Late Fee	

Fel	b 1 - 28	Jan 1 - 31	Dec 1 - 31	Nov 1 - 30	Oct 1 - 31
\$19	,940.00	\$20,680.00	\$18,880.00	\$21,760.00	\$25,880.00
\$61	,580.00	\$63,200.00	\$56,960.00	\$67,000.00	\$75,760.00
\$2	,660.00	\$2,680.00	\$2,880.00	\$3,340.00	\$3,280.00
\$2	,900.00	\$2,680.00	\$2,120.00	\$2,580.00	\$2,940.00
\$2	,455.00	\$2,625.00	\$2,040.00	\$2,365.00	\$2,685.00
\$3	,180.00	\$3,220.00	\$2,640.00	\$2,920.00	\$2,900.00
	N/A	N/A	N/A	N/A	N/A

TOTALS \$92,715.00 \$95,085.00 \$85,520.00 \$99,965.00 \$113,445.00

B. COVID-19 Activities

Continued oversight of door screener.

VI. HEALTH EQUITY

The Health Equity program received funding from the Center for Disease Control to build, leverage, and expand infrastructure support for COVID-19 prevention and control among populations that are at higher risk and underserved.

- A. The program continues to collaborate with SNHD programs and grant subrecipients to plan and coordinate COVID-19 community strategies and events.
- B. The program continues to participate in community-based coalitions and workgroups addressing COVID-19 health disparities, testing and vaccination initiatives.

VII. SOUTHERN NEVADA PUBLIC HEALTH LABORATORY (SNPHL)

A. Clinical Testing

SNPHL Supports:

- 1. The SNHD Nursing Division: molecular and microbiology culture, Sexually Transmitted Disease (STD) testing.
- 2. SNHD STD department: the CDC Gonococcal Isolate Surveillance Project (GISP) as well as enhanced Gonococcal Isolate Surveillance Project (eGISP). SNPHL performs NAAT and culture testing of N. gonorrhoeae isolates and submits isolates to reference laboratory for determination of antibiotic susceptibility patterns. SNPHL has also joined eGISP Part B to expand culture-independent testing for antimicrobial resistance genes of gonococcal isolates.
- 3. Total monthly samples tested are listed as follows:

Test Name	Monthly Count	Avg Year to Date
GC Cultures	61	74
NAAT NG/CT	1027	1036
Syphilis	743	660
RPR/RPR Titers	132/79	93/94
Hepatitis Total	388	399
HIV/differentiated	407/8	387/8
HIV RNA	36	32

B. COVID-19 Testing

- 1. SARS-CoV-2 PCR extraction is currently performed on the KingFisher Flex platform only.
- 2. SNPHL goal is to maintain capacity of 1500-2000 tests/day with turn-around-time of <48 hours (TAT 2Day currently at/near goal).
- 3. For February, the average daily testing was 501 and the average turnaround time was 26 hours days for PCR testing from the collection date to release the test report. The average laboratory total test capacity for SARS-CoV-2 using Panther Aptima NAAT testing is 136 tests per day.

- 4. IT created easy patient accession and direct report verification from SNPHL LIMS into SNHD patient report portal
- 5. Incorporate high throughput instruments such as Eppendorf 5073 automation of specimen fluid handling station
- 6. A monthly summary of COVID-19 PCR testing is listed as follows:

Month	# PCR/#POS	COVID-19	# PCR/#POS
January	35322/14313	July	
February	11532/1407	August	
March		September	
April		October	
May		November	
June	A	December	

C. Reportable Disease Reports

- SNPHL continues to perform routine testing of reportable disease specimens submitted to SNPHL. of isolates are reported to OEDS on a weekly basis to aid in disease investigation, and SNPHL and OEDS coordinate with CDC PulseNet, if required.
- 2. A monthly summary of reportable diseases tests is listed as follows:

		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Campylobacter	Campy ID	5	1										
	Campy Screen	6	2										
Neisseria species	Gonorrhoeae Culture	86	61			_							
	Gram Stain/WBC	16	0										
	Neisseria ID	4	0										
	Haemophilus ID	4	0										
Unknown ID	Bacterial ID	3	0			n. 50							
	WGS (PulseNet)	14	16										
Salmonella	Salmonella Screen	10	10			3							

	STONE ON	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
	Salmonella Serotype	8	10										
Shigella	Shigella Screen	6	1										
	Shigella Serotype	5	1			V Vers							
SEC	STEC Screen	7	10										
	STEC Serotype	2	10										
Unknown	Stool Culture	0	1										
Vibrio	Vibrio ID	0	0										
	Vibrio Screen	0	0										
Yersinia	Yersinia Culture/ID	0	0			Tagest olialias							

D. Epidemiological Testing and Consultation

- SNPHL participates in the SNHD Outbreak Investigation Committee and Foodborne Illness Taskforce. Conducted 6 outbreak investigations in February.
- 2. SNPHL continues to report results of influenza testing to the CDC National Respiratory and Enteric Virus Surveillance System (NREVSS). SNPHL performed January, 69 respiratory panels on the BioFire.

E. Emergency Response and Reportable Disease Isolate Testing Report

- SNPHL performs reportable disease isolate testing and confirmation. Isolates submitted by local laboratories are serotyped and/or confirmed by Whole Genome Sequencing; stored on-site; and results reported and/or samples submitted to CDC through various national programs; Public Health Laboratory Information System (PHLIS), National Antimicrobial Resistance Monitoring System (NARMS), and Influenza Surveillance, and PulseNet Bacterial Outbreak Surveillance
- SNPHL's additional mission is as a member of the CDC Laboratory Response Network (LRN) testing for the identification of potential biological weapons/agents on environmental daily samples within its unique BSL3 environment.

2021	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec
Select Agent Rule out	0											
(total PCR)												

- 3. NPHL is clinically validated for using Whole Genome Sequencing (WGS) for the identification of Campylobacter species (select species), pathogenic Escherichia coli, and Salmonella species. SNPHL is also validated for the determination of Salmonella serotypes and STEC (Shiga toxin-producing E. coli) serotypes and Shiga toxin genes.
- 4. SNPHL performed 16 Whole Genome Sequencing tests (WGS) as part of PulseNet Foodborne Outbreak Surveillance in February 2022.
- SNPHL has completed validation for all bacterial groups on the Bruker MALDI-TOF instrument for streamlined screening of bacterial isolates, to decrease turnaround time and modernize microbiological identification methods.
- 6. SNPHL is validated for sequencing of SARS-CoV-2 and variants of concern through the identification of lineages and clades.
- 7. SNPHL has sustained capacity of sequencing many 48 SARS-CoV-2-positive RNA extracts per week with expectations of increasing this capacity with appropriate staffing, instrumentation, and method development. As of February 2022, SNPHL has sequenced 192 SARS-CoV-2-positive RNA extracts. The new Laboratory Technologist and Laboratory Assistant have completed their training and have been aiding in SARS-CoV-2 sequencing.
- 8. SNPHL is clinically validated for the identification of Campylobacter species (select species), pathogenic Escherichia coli, and Salmonella species. SNPHL is also validated for the determination of Salmonella serotypes and STEC (Shiga toxin-producing E. coli) serotypes and Shiga toxin genes.
- 9. SNPHL coordinates and participates with Environmental Health and Veritas Labs for Legionella surveillance.

2021	Jan	Feb	Mar	April	May	June	July	Aug	Sep	Oct	Nov	Dec
Legionella	0	0										

- SNPHL provides vector testing for Environmental Services; testing for Zika, West Nile, Western/Eastern Equine Encephalitis. Our facility hosted a CDC demonstration for the Vector team.
- 11. As part of the Gonococcal Isolation Surveillance Program (GISP) and enhanced GISP (eGISP), in February, a total of 61 clinical isolates, Neisseria gonorrhoeae (61 isolates) and Neisseria meningitidis (0 isolates), were collected and will be sent to either the regional laboratory for antimicrobial susceptibility testing (AST) or the CDC, respectively. Remnant NAATs or N. gonorrhoeae samples will be sent to the CDC for molecular-based AST testing as part of eGISP Part B.

F. All-Hazards Preparedness

- SNPHL provides / assists testing for SNHD COVID-19 Emergency Incident Response, local community outreach, CCDC jail-detention centers, institutions of higher education, and long-term nursing facilities Rapid-Antigen POC (CDC-EUA: Abbott IDNow; Qiagen Sofia; BD Vector) with outbreak confirmation RT-PCR testing supported by SNPHL.
- SNPHL provides COVID-19 Biosafety Training/Guidelines to Non-Traditional testing sites.
- 3. SNPHL coordinates with training/exercises for First Responders including local Civil Support Team, HazMat, Federal Bureau of Investigation, and Las Vegas Metropolitan Police Department.
- SNPHL provides information to local laboratorians on CDC packaging and shipping infectious substances and the chain of custody procedures.

G. February 2022 SNPHL Activity Highlights

- 1. SNPHL has a stable FEMA supply of Viral Transport Medium (VTM) used in COVID-19 collection kits.
- 2. The facility team plans to move the middle week of March and start construction Mid-March. The proposed warehouse also has a back lot that will allow us to move the mobile clinics and trailers. Our laboratory has packed and classified the items that will move to the warehouse.
- The NextSeq 2000 whole genome sequencer has been used in SARS-CoV-2 sequencing in the Micro laboratory. The WGS capacity of SARS-CoV-2 is 192 samples per week. The laboratory is in the process to purchase one liquid handler to handle the COVID-19 samples and reduce human error.
- 4. We received several Qiagen reagents, computers, and kits. We are in the process to apply the new capital asset forms and give the computer to IT to check the network connection. The digital PCR and EZ-1 advance XL instruments have also delivered to the lab three weeks ago. Those instruments will be working on the COVID-19 wastewater project with Dr. Oh in UNLV.
- Our laboratory received the APHL QI grant for improving sample submission error dates for COVID-19 samples. We have formally signed the APHL QI agreement and started to prepare the deliverable item of this project this month. That is the training slides and video for the providers who use our RSO system to submit the specimens.
- Our laboratory identified the first Omicron variant BA.2 sublineage on Thursday, January 24, 2022, for Clark County and State. Our laboratory has informed CDC and submitted the original VTM tube to CDC on Monday, January 31, 2022. Our laboratory will keep sequencing the closed contact samples to help ODS to follow up the investigation. Currently, the sublineage BA.1.1 is more dominant than BA.1 in Clark County.

H. COMMUNITY HEALTH - SNPHL - Calendar Year Data

SNPHL Services	YTD- February 2021	February 2022	
Clinical Testing Services ¹	2373	3,601	1
Epidemiology Services ²	171	541	1
State Branch Public Health Laboratory Services ³	10477	11296	个
All-Hazards Preparedness Services ⁴	9	9	
Environmental Health Services ⁵	0	0	

Includes N. Gonorrhoeae culture, GISP isolates, Syphilis, HIV, CT/GC molecular, Gram stain testing, and COVID-19 Ab immunologic tests.

Includes Stool culture, EIA, Norovirus PCR, Respiratory Pathogen PCR, Epidemiological investigations, or consultations.

Includes COVID-19 PCR, WGS, and LRN testing, proficiency samples, reporting to CDC, courier services, infectious substance shipments, teleconferences, training, presentations and inspections, samples submitted to CDC or other laboratories' submissions.

⁴ Includes Preparedness training, teleconferences, Inspections.

5 Includes vector testing.



Memorandum

Date: March 8, 2022

To: Southern Nevada District Board of Health

Cassius Lockett, PhD, Director of Disease Surveillance & Control Fermin Leguen, MD, MPH, District Health Officer From:

Subject: Disease Surveillance & Control Division Monthly Activity Report - February 2022

Division of Disease Surveillance and Control A.

1. Number of Confirmed and Probable Cases of Selective Illnesses Reported

	Feb 2021	Feb 2022		FYYTD 20-21	FYYTD 21-22	
Sexually Transmitted						
Chlamydia	1069	854	4	8841	7623	4
Gonorrhea	655	419	4	4657	4276	4
Primary Syphilis	14	5	+	156	164	1
Secondary Syphilis	52	12	4	286	248	4
Early Non-Primary, Non-Secondary ¹	48	13	4	328	378	1
Syphilis Unknown Duration or Late ²	77	45	4	630	820	1
Congenital Syphilis (presumptive)	0	0	→	29	20	4
Moms and Babies Surveillance			,			
HIV Pregnant Cases	3	4	1	21	15	4
Syphilis Pregnant Cases	10	14	↑	83	133	1
Perinatally Exposed to HIV	2	0	+	6	9	1

Early Non-Primary, Non-Secondary= CDC changed the case definition from Early Latent Syphilis to Early Non-Primary, Non-

Syphilis Unknown Duration or Late=CDC changed the case definition from Late Latent Syphilis to Syphilis Unknown Duration or Late

Vaccine Preventable						
Haemophilus influenzae, invasive disease	0	0	\rightarrow	1	2	1
Hepatitis A	0	0	→	1	1	→
Hepatitis B, acute	0	1	↑	3	3	>
Hepatitis B, chronic	36	55	1	73	113	1
Influenza	3	17	1	15	32	1

	Feb 2021	Feb 2022		FYYTD 20-21	FYYTD 21-22	
Enteric Illness					-	
Campylobacteriosis	12	3	4	15	7	4
Cryptosporidiosis	2	0	4	4	1	4
Giardiasis	3	3	>	7	10	1
Rotavirus	1	12	1	1	14	1
Salmonellosis	13	5	4	26	10	4
Shiga toxin-producing Escherichia coli (STEC)	2	1	4	4	9	1
Shigellosis	6	0	4	8	3	4
Other						
Coccidioidomycosis	13	5	4	28	16	4
Hepatitis C, acute	0	0	>	0	1	1
Hepatitis C, chronic	265	218	4	598	441	4
Invasive Pneumococcal Disease	13	8	4	24	42	1
Lead Poisoning	7	6	4	22	19	4
Legionellosis	1	1	→	2	4	1
Lyme Disease	0	0	>	1	0	4
Meningitis, aseptic	7	0	4	10	1	4
RSV	1	111	↑	5	453	1
Streptococcal Toxic Shock Syndrome (STSS)	3	4	1	5	5	>
New Active TB Cases Counted (<15 yo)	0	0	→	0	0	→
New Active TB Cases Counted (>= 15 yo)	0	0	→	3	0	+

2. Number of Cases Investigated by ODS

Monthly DIIS Investigations CT/GC/Syphilis/HIV/TB	Contacts	Clusters ¹	Reactors/ Symptomatic/ Xray ²	OOJ/ FUP³
Chlamydia	40	0	78	0
Gonorrhea	45	1	109	0
Syphilis	59	2	187	1
HIV/AIDS (New to				
Care/Returning to Care)	11	0	38	0
Tuberculosis	40	0	10	0
TOTAL	195	3	422	1

Clusters= Investigations initiated on named clusters (clusters= named contacts who are not sex or needle sharing partners to the index patient)

Reactors/Symptomatic= Investigations initiated from positive labs or reported symptoms

³ OOJ= Investigations initiated Out of Jurisdiction reactors/partners/clusters

Fup= Investigations initiated to follow up on previous reactors, partners, or clusters

Mont	Monthly DIIS Investigations Other Communicable Diseases										
Confirmed Case	Confirmed		OOI	OOJ							
(Clinical and Lab	Case	Full	with	without							
Required)	(Lab Only)	Investigation	Investigation	Investigation							
83	21	47	0	0							

- 3. COVID-19 Specific Staffing and Response
 - a. Contact Tracers (CTs) SNHD
 - i. SNHD Staff, Current Total: 45
 - 1. Lead CTs 8
 - 2. Contact Tracers; investigators and outreach 37
 - ii. Contracted Contact Tracers, Current Total: 250
 - CSAA team of 100
 - CSAA team of 150
 - b. Testing
 - 50% of team working the College of Southern Nevada (CSN) (3 sites) outreach testing on any testing day, overall >80% CTs rotating to testing sites.
 - 6% assisting SNHD with in-house clinical testing at METS clinic.
 - c. Contact Tracing/Outreach
 - School Team A dedicated team of Contact Tracers who have been assigned to support the schools are currently scheduled onsite at CCSD and will remain indefinitely to support CCSD response.
 - Priorities CTs prioritize outbreak reports, and reports of multiple cases in settings of high-risk transmissions and vulnerable populations. This may include, but is not limited to, CCDC, homeless shelters, daycares, and congregate settings.
- 4. Disease and Outbreak Investigations
 - a. Influenza: Influenza surveillance for Clark County, Nevada includes data collected from local acute care hospitals and other healthcare providers. In Clark County, for the season as of 2/19/2022, 49 influenza-associated hospitalizations and 6 deaths associated with influenza have been reported. The percentage of emergency room (ER) and urgent care clinic visits for ILI declined to 1.4% in week 7. Approximately 28% of area ER and urgent care clinic visits for ILI were made by children 0-4 years of age. Influenza A has been the dominant type circulating.
 - b. **2019 Novel Coronavirus (COVID-19):** As of February 28, Clark County had 488,194 cases; 7,489 deaths, and 107 cases of MIS-C (Multisystem Inflammatory Syndrome in Children). The Health District continues to utilize the Incident Command System to

expand our efforts in COVID-19 response and gain access to additional staffing and resources. The Health District continues to meet with Clark County emergency managers, Fire, EMS, School Officials, hospital emergency response and infection control staff to communicate the current response and plan for continued partnership. The Office of Disease Surveillance (ODS) at the SNHD is receiving and following up on reports of confirmed illness. conducting disease investigations, contact tracing, and working with local medical providers to determine levels of risk and recommended actions for anyone who may be ill or exposed. ODS is making recommendations of isolation and guarantine for individuals that are diagnosed with COVID-19 or have been identified as exposed to someone with COVID-19. Currently SNHD has contact tracers including staff from SNHD, CSAA and other partnering agencies responding to reports of positive cases and maintain community testing sites, and strike teams for testing. This is an ongoing response effort.

- c. **COVID-19 Variants:** The Southern Nevada Health District continues to monitor for new and/or emerging variants.
- d. THC Investigation: DSC is investigating reports of THC toxicity among patrons that consumed food or drink from a local restaurant. Symptoms being reported include hallucinations, tachycardia, blurry vision, confusion, dry mouth, numbness or tingling in extremities, and loss of consciousness. Some of the ill sought medical attention and tested positive for THC, denying any marijuana use 30 days prior to their test. The Las Vegas Metro Police Department (LVMPD) is conducting food testing to identify the source of contamination. A self-reporting survey has been created to identify additional ill individuals and information on food or drink items that could be the possible source. DSC is working collaboratively with LVMPD and Environmental Health (EH) to investigate these findings. This is an ongoing investigation.
- e. Norovirus Investigation: ACDC is investigating a possible Norovirus outbreak at the Shade Tree. The reported symptoms include nausea, vomiting, abdominal pain, fever, and diarrhea. A total of four illnesses have been reported. Two ill individuals sought medical attention and were diagnosed with acute viral illness. However, the causative agent is still unknown. All available stool samples have been submitted to SNPHL for testing and the results are pending. A walkthrough of the facility was conducted by EH and the facility has begun implementing the prevention and control recommendations provided. This is an ongoing investigation, an update to follow.
- f. Listeria Outbreak: ACDC, in collaboration with EH, SNPHL and NSPHL, is assisting in CDC's ongoing investigating of an outbreak of Listeria monocytogenes. This outbreak is associated with prepackaged lettuce from various brands. The investigation includes 13 cases from 6 jurisdictions [CA (4), DC, GA, HI (4), MD, WA & NV]. Specimen collection dates range from August 19, 2014–December 20, 2021. Eleven illnesses occurred in 2021. Information on hospitalization is available for 11 patients and all 11 were

hospitalized, there is one reported death. One illness is pregnancy-associated. Retail sampling of two local grocery stores will be conducted. This is an ongoing investigation, an update to follow.

5. Non-communicable Reports and Updates

a. Naloxone Training: SNHD is training and distributing naloxone (Narcan) to first responders and members of key community sectors throughout Nevada to better respond to the large-scale burden of opioid overdoses. SNHD is receiving naloxone via State Targeted Response funding through the Center for the Application of Substance Abuse Technologies (CASAT) at the University of Nevada, Reno. ODS has implemented a policy for SNHD staff to carry and administer Naloxone. ODS has also been given permission at the Clark County Detention Center to place Naloxone in a person's property at the facility.

The following Naloxone trainings/distributions have taken place in the month of February:

02/18/22 - Fremont Street Experience (5 trained, 10 doses distributed)

02/22/22 - Venetian/Palazzo Security (100 doses distributed)

02/22/22 - Henderson Police Department (350 doses distributed)

02/22/22 - SNHD (180 doses distributed)

02/22/22 - Nevada Dept. of Wildlife (25 doses distributed)

b. Overdose Data to Action Grant (ODTA): The ODTA team has been creating materials and a video demonstrating how to use the fentanyl test strips. This training will be used for both internal and external stakeholders to ensure those providing test strips in the community provide education regarding the proper use of fentanyl test strips. The L2A team has been reaching out to community partners in rural Clark County to identify locations such as Mesquite and Boulder City where mobile services would be best utilized. These conversations are in the planning phase with the goal to provide substance use linkage services at least quarterly to identified sites. The L2A team recently participated in North Las Vegas' first pop up mobile support services for the homeless and housing challenged within their city limits. Going forward, the L2A team will be participating in this effort monthly.

B. Prevention - Community Outreach/Provider Outreach/Education

Ongoing promotion of Collect2Protect (C2P) online service for those requesting testing for gonorrhea, chlamydia, and HOME HIV test kits. ODS continues to work with OOC to help promote C2P on SNHD web sites, social media and with the help of community partners. The Center, Huntridge Family Clinic and AHF continue to offer ongoing HIV/STD, PrEP/PEP, and rapid stART services to the community.

Express Testing in SHC/Annex A services continues to do well. Walk in Services have resumed making it much easier for the community to access services with limited barriers. Outreach events this month include Hawks Gym and Fun Hog Ranch Bar. Both are monthly recurring events targeting MSM. HIV and syphilis testing are offered along with information on PrEP/PEP and condoms. ODS staff

work with the managers of the businesses to help promote prior to the outreach event.

C. High Impact HIV/STD/Hepatitis Screening Sites

Testing is currently being offered at Trac-B for HIV and Hep C. Also, The Center is offering screenings for HIV, Hep C, Gonorrhea, Chlamydia and Syphilis to the community Mon-Thurs from 1pm-5pm and every Saturday from 9am-2pm. AHF is also offering HIV and STD screenings at their Wellness clinic locations on Mondays, Wednesdays, and Fridays, and on their MTU.

Office of Disease Surveillance- HIV Preven	tion Screer	ning/Testi	ng Eff	orts		
Prevention - SNHD HIV Testing	Feb-21	Feb-22		FY 20- 21	FY 21- 22	
Outreach/Targeted Testing	813	316	+	5637	6968	1
Clinic Screening (SHC/FPC/TB)	433	174	+	2430	1721	4
Outreach Screening (Jails, SAPTA)	35	30	+	311	400	1
TOTAL	1281	520	4	8378	9089	1
Outreach/Targeted Testing POSITIVE	4	4	→	36	60	1
Clinic Screening (SHC/FPC/TB) POSITIVE	4	1	+	11	6	4
Outreach Screening (Jails, SAPTA) POSITIVE	0	0	→	1	2	1
TOTAL POSITIVES	8	5	4	48	68	1

D. Staff Facilitated/Attended the following Trainings/Presentations

- 1. 02/2/2022: "Congenital Syphilis Panel" for UNLV's School of Nursing NURS 350 "Population Based Nursing in the Community" facilitated by ODS Health Educator, ~30 people in attendance.
- 2. 02/02/2022: "Harm Reduction 201 Training" facilitated by 2 ODS Health Educators; 15 people in attendance.
- 3. 02/02/2022: Community Health Improvement Plan (CHIP) Sub-Group Goals Meeting facilitated by ODS Health Educator; 15 people in attendance, 3 SNHD ODS staff attendees.
- 02/3/2022: Southern Nevada Opioid Advisory Committee (SNOAC)
 General Council Meeting facilitated by ODS Health Educator; 71 people in
 attendance; 2 SNHD ODS staff attendees.
- 02/3/2022: Senate Bill (SB) 275 Advisory Task Force HIV Exposure Modernization represented by ODS Health Educator as task force member, 15 people in attendance.
- 02/04/2022: Clark County Children's Mental Health Consortium (CCCMHC) meeting attended by ODS Health Educator Staff as representative; ~42 people in attendance from multiple agencies; 1 SNHD ODS staff attendee.
- 7. 02/07/2022: "National Black HIV/AIDS Awareness Day", facilitated by the Southern Nevada health Consortium, 40 people in attendance, 7 SNHD ODS staff attendees.

- 02/8/2022 02/9/2022: National Network of Disease Intervention Training Centers COVID-19 Leadership: Best Practices for Team Leads; 1 SNHD ACDC staff attendee.
- 02/9/2022: "Morbidity and Mortality Reporting and Overview of Public Health Detailing" for UNLV's School of Nursing NURS 350 "Population Based Nursing in the Community" presented by 2 ODS Health Educator, 9 people in attendance.
- 10. 02/10/2022: "Motivational Interviewing Training" facilitated by ODS Health Educator Staff; 8 people in attendance; 4 SNHD ODS staff attendees.
- 11. 02/15/2022: Child Death Review (CDR) Board virtual meeting attended by ODS Health Educator Staff as a representative; ~45 people in attendance from multiple agencies; 2 SNHD ODS staff attendees.
- 12. 02/16/2022: "Adult Mental Health First Aid" training organized and facilitated by ODS Health Educator Staff and Dignity Health representative; 10 people in attendance; 5 SNHD staff attendees.
- 13. 02/17/2022: "Clark County's Plan to End the HIV Epidemic" presentation for the Center for AIDS Research UCSD; 2 SNHD ODS Health Educators presented; ~15 people in attendance.
- 14. 02/17/2021: Senate Bill (SB) 275 Advisory Task Force HIV Exposure Modernization represented by ODS Health Educator as task force member, 15 people in attendance.
- 15. 02/17/2022: Nevada Interim Legislature Session Joint Health and Human Services (HHS) Committee on Harm Reduction Options presented by ODS Health Educator; ~15 people in attendance.
- 16. 02/19/2022: "HIV and STIs in Nevada" for the Center's Advocacy Network; presented by ODS Health Educator; 22 participants in attendance.
- 17. 02/22/2022: "SafeTALK Suicide Prevention" training facilitated by 2 ODS Health Educator Staff; 11 people in attendance; 6 SNHD ODS staff attendees.
- 02/22/22-02/23/22: CSTE Vector Borne Disease Forecasting Workshop; 1 SNHD ACDC staff attendee.
- 19. 02/23/2022: Public Health Detailing for First Person Medical Henderson; ODS Health Educator as representative; 6 people in attendance.
- 02/23/2022: "Joint Southern and Northern Nevada HIV Prevention Planning Group Meeting", facilitated by the Southern Nevada HIV Prevention Planning Group, Fentanyl Test Strip Training provided by ODS Health Educator ~30 in attendance, 4 SNHD staff attendees.
- 21. 02/24/2022: U.S. Consumer Product Safety Commission (CPSC) State Designee Conference Call attended by OEDS Health Educator Staff as a representative; ~60 people in attendance representing each US state.

E. Other

Communicable Disease Statistics: Quarter 4 2021 and January 2022 disease statistics are attached (see Table 1).

II. OFFICE OF PUBLIC HEALTH INFORMATICS (OPHI)

- A. Continue to maintain and enhance Trisano disease surveillance system.
- B. Continue to maintain and enhance Electronic Message Staging Area (EMSA) systems, and updated EMSA to process Coronavirus ELRs.
- C. Continue to work on the Southern Nevada Public Health Laboratory (SNPHL) Laboratory Information Management System (LIMS) system to interoperate with other internal and external systems. Informatics is also assisting with the changes that need to be made to the LIMS to accommodate new instruments and testing offered by the Clinical Laboratory.
- D. Assist SNPHL to develop COVID-19 interface between instruments, COVID-19 POD app and Orchard, COVID-19 testing and reporting as needed.
- E. Work with IT to implement and maintain the Electronic Health Record (EHR) system for COVID-19 test ordering and COVID-19 vaccination. Working on import COVID-19 testing demographic data from POC application into eCW.
- F. Continue to work on CDC Influenza SARS-CoV-2 multiplex assay, CDC Subtyping, and CDC Genotyping order mapping.
- **G.** Assist Office of Epidemiology and Office of Disease Surveillance (OEDS), Office of EMS/Trauma System, Environmental Health (EH), Clinic Services with various data requests, data exports, and report generation.
- H. Continue to enhance the iCircle web application for OEDS by adding new form for STD TracB site questions, and transmission of STD, HIV and Hepatitis testing data to CDC, and enhance a QA process between iCircle with eCW data.
- I. Continue to support Clark County Coroner's Office (CCCO) on new CME implementation, data requests and reports.
- Continue to work with OEDS on SVM projects.
- K. Enhance COVID-19 surveillance by automating COVID-19 hospitalization notification, and extract demographics, lab tests and treatment information from HIE CCDs for public health surveillance.
- L. Completed interface between COVID-19 POD App to eCW.
- M. Complete Vector Control GIS maps for EH.
- N. Work with Wellpartner on prescription notification from eCW.
- O. Work with Epi team to automate Trisano update for COVID-10 death reporting.
- P. Maintain and update COVID-19 dashboard, COVID-19 maps, lab testing and ED admission trend analysis and other urgent data requests.
- Q. Maintain automated COVID-19 patient notification application and perform QA for contact tracing and identification.
- R. Maintain and enhance COVID-19 lab results portal to include NSPHL overflow test results. Clients can access their results online.
- S. Maintain applications to automate COVID-19 contacts upload for contact tracing and testing referral and produce COVID-19 DECIPHER report.

- T. Continue working on EpiTrax migration from Trisano and address issues identified from UAT test.
 - Testing Pentaho reports from EpiTrax data warehouse.
 - Deployed EpiTrax NMI system for testing.
 - 3. Added security measures to EpiTrax warehouse.
- U. Continue to work with state on DMI project including eCR onboarding and RCKMS training.
- V. Enhance Syndromic Surveillance System for the Early Notification of Community Based Epidemics (ESSENCE) for new providers and future support.
- W. Onboarded 12 providers from backlog for COVID-19 test reporting.
- X. Continue bi-weekly meetings with NV HIE for improving COVID-19 race/ethnicity collection and reporting.
- Y. Continue to work with UNLV for COVID-19 data geocoding, analysis and reporting. UNLV updated workplan with a new Pl.
- **Z.** Completed various reports including: 2021 UDS; Lab Report; Provider report for Pharmacy; FPAR Annual Report; EHE CDC Reporting; National Weather Service Reports; ELC Grant Reports; Suicide Report; and Homeless Deaths Report.
- AA. Continue working with Epi office to improve grant reporting process for Yale project.
- BB. Continue working on Health Disparity project with the state.
- **CC.** Completed PHEP Grant work plan for next year.
- DD. Completed ELC monthly grant reports.

Table 1



January 2022: Clark County Disease Statistics*

	202	20	202	21	202	22
Disease	Jan	YTD	Jan	YTD	Jan	YTD
VACCINE PREVENTABLE						
Haemophilus influenzae, invasive	0	0	1	1	2	
Hepatitis A	7	7	1	1	1	
Hepatitis B, acute	0	0	3	3	0	
Hepatitis B, chronic	48	48	37	37	58	5
Influenza	516	516	12	12	15	1
Pertussis	3	3	0	0	0	
SEXUALLY TRANSMITTED				-		
Chlamydia	1236	1236	1020	1020	858	85
Gonorrhea	457	457	598	598	460	46
Syphilis (Early non-primary, non-secondary)	35	35	59	59	38	3
Syphilis (Primary & Secondary)	52	52	58	58	45	4
CONGENITAL CONDITIONS			-	-		
Congenital Syphilis	3	3	5	5	2	
Hepatitis C, Perinatal Infection	0	0	1	1	0	
ENTERICS	-		- '			
Amebiasis	2	2	0	0	1	
Campylobacteriosis	11	11	3	3	4	
Cryptosporidiosis	3	3	2	2	1	
Giardiasis	3	3	4	4	7	
Rotavirus	2	2	0	0	2	
Salmonellosis	9	9	13	13	5	
Shiga toxin-producing E. coli (STEC)	8	6	2	2	8	
Shigellosis	3	3	2	2	3	
Vibriosis (Non-cholera Vibrio species infection)	2	2	0	0	0	
Yersiniosis	2	2	0	0	0	
OTHER				-	-	
Coccidioidomycosis	11	11	15	15	9	
Exposure, Chemical or Biological	0	0	1	1	0	
Hepatitis C, acute	0	0	0	0	1	
Hepatitis C, chronic	462	482	333	333	223	22
Invasive Pneumococcal Disease	47	47	11	11	34	3
Lead Poisoning	22	22	15	15	13	1
Legionellosis	4	4	1	1	2	
Listeriosis	Ö	0	0	0	1	
Lyme Disease	2	2	1	1	0	
Malaria	1	1	0	0	1	
Meningitis, Aseptic	5	5	3	3	1	
Meningitis, Aseptic	4	4	0	0	0	
RSV	788	788	4	4	342	34
Rabies, exposure to a rabies susceptible animal	9	5	25	25	33	3
Streptococcal Toxic Shock Syndrome (STSS)	2	2	23	23	1	3

[&]quot;The total number of cases presented in this report is subject to change due to possible delays in reporting and processing. Cases are counted based on CDC case definitions. HIV/AIDS/TB case counts are provided on a quarterly basis.

[~]Diseases not reported in the past two years or during the current reporting period are not included in this report.

[~]Hepatitis C, chronic, numbers have changed due to surveillance decisions within the Office of Epidemiology & Disease Surveillance.

Monthly rates & monthly rate comparisons were removed from the Clark County Disease Statistics monthly report after July 2018 due to new data suppression rules adopted by the Office of Epidemiology & Disease Surveillance. Please see the Clark County Disease Statistics quarterly report for quarterly rates & quarterly rate comparisons.



Quarter 4, 2021: Clark County Disease Statistics*

	20	19	20	20	20	21		per 100,000 uarter)	Quarter Rate Comparison
Disease	Qtr 4	YTD	Qtr 4	YTD	Qtr 4	YTD	Qtr 4 (2016-2020 aggregated)	Qtr 4 (2021)	Change b/t current & past 5-year?
VACCINE PREVENTABLE									
Haemophilus influenzae, invasive	5	25	4	12	4	13	0.14	-	1
Hepatitis A	6	101	4	18	1	2	0.10	-	1
Hepatitis B, acute	3	18	3	12	5	16	0.08		t
Hepatitis B, chronic	113	589	120	468	126	542	1.35	1.80	1
Influenza	642	1478	20	884	24	71	5.69	0.34	ΙX
Influenza-associated pediatric mortality	1	3	0	0	0	0			-
Meningococcal disease (N. meningitidis)	2	3	0	0	00	0		-	-
Mumps	1 8	44	0	5	0	22	211	-	
SEXUALLY TRANSMITTED		44	U		A		0.14		1
Chlamydia	3520	14080	2200	13164	2903	10400	20.02	41.44	
Gonorrhea	1383	5467	3290 1790	5801	1609	12439 7009	60.06 25.32	41.44 22.97	1X
HIV	78	391	56	293	73	421	1.54	1.04	1X
Stage 3 HIV (AIDS)	48	155	18	108	29	174	0.68	0.41	1X
Syphilis (Early non-primary, non-	40	100	10	100	28	1/4	0.00	0.41	
secondary)	92	398	130	407	135	651	2.06	1.93	Ť
Syphilis (Primary & Secondary)	153	638	168	642	161	723	2.73	2.30	†
CONGENITAL CONDITIONS	100	- 000	100	012	101	720	2.70	2.00	
Hepatitis C, Perinatal Infection	0	2	2	2	2	5			1
Congenital Syphilis	11	38	13	43	8	32	0.16	-	
ENTERICS		- 00	10	10	0	- CAL	0.10	-	
Amebiasis	1	7	1	8	0	2			1
Campylobacteriosis	45	150	35	127	19	122	0.60	0.27	1X
Cryptosporidiosis	4	16	2	11	3	16	0.00	0.2.	†
Giardiasis	8	55	8	30	14	43	0.20	0.20	†
Rotavirus	11	64	6	21	7	29	0.18		i
Salmonellosis	31	145	18	120	31	149	0.55	0.44	Ť
Shiga toxin-producing E. coli (STEC)	11	39	8	26	5	54	0.16		i
Shigellosis	33	79	11	52	14	70	0.37	0.20	Ī
Vibriosis (Non-cholera Vibrio species infection)	0	4	0	3	2	4	•	-	Ť
Yersiniosis	4	7	1	5	3	11		-	t
OTHER		D							
Coccidioidomycosis	26	97	46	166	42	163	0.68	0.60	1
Encephalitis	1	2	0	1	0	1			
Exposure, Chemical or Biological	1	10	0	0	0	2			i
Hepatitis C, acute	7	24	0	4	0	2	0.09		į
Hepatitis C, chronic	1403	6408	875	4187	709	3247	11.23	10.12	Ť
Invasive Pneumococcal Disease	72	247	29	179	48	129	0.95	0.69	1
Lead Poisoning	25	138	22	96	16	94	0.58	0.23	TX
Legionellosis	8	25	4	25	6	22	0.08		†
Listeriosis	1	6	1	2	2	2			1
Lyme Disease	0	12	1	4	3	13		-	Ť
Malaria	2	10	0	1	1	2			1
Meningitis, Aseptic	14	78	11	66	7	33	0.18	-	1
Meningitis, Bacterial Other	7	29	10	24	3	11	0.12		1
Meningitis, Fungal	0	4	1	4	0	4			1
RSV	720	2707	7	1733	1699	2304	6.10	24.25	†X
Spotted Fever Rickettsiosis	3	6	0	0	0	1			1
Streptococcal Toxic Shock Syndrome (STSS)	7	30	3	22	1	18	0.07	*	1
Tuberculosis, Active	11	45	12	51	15	53	0.26	-	Ť
West Nile Virus neuroinvasive disease	0	34	0	0	0	0			No Change

[&]quot;Use of illness onset date in data aggregation for cases other than STD or TB (since Jan-2013) causes changes in cases reported here from previously released reports. Numbers are provisional including confirmed, probable, and suspect cases that are reportable to CDC. HIV/AIDS/TB case counts are provided on a quarterly basis. Rate suppression denoted by "for rates corresponding to case counts < 12.

[~]Diseases not reported in the past five years (aggregate data) and not reported during the current reporting period are not included in this report.

^{0~~}Confidence intervals (not shown) for the quarterly disease incidence rates provided a basis for an informal statistical test to determine if the current quarterly rates changed significantly from those of the previous 5-year aggregated rates. Green text represents rates that decreased significantly, whereas red text represents rates that increased significantly. Statistically significant changes are indicated by "X."



Memorandum

Date: March 24, 2022

To: Southern Nevada District Board of Health

From: Christopher D. Saxton, MPH-EH, REHS, Director of Environmental Health

Fermin Leguen, MD, MPH, District Health Officer

Subject: Environmental Health Division Monthly Report

I. FOOD OPERATIONS PROGRAM

ENVIRONMENTAL HEALTH Food Operations Program – Fiscal Year Data

	Feb.	Feb.		FY	FY	
Food Operation Services	2021	2022		20-21	21-22	
Routine Inspections	1,698	2,032	1	13,003	14,962	1
Reinspections	152	156	个	1,023	1,197	1
Downgrades	137	158	个	968	1,127	个
Closures	14	9	$\overline{\mathbf{A}}$	108	126	个
Special Events	7	47	个	95	438	个
Temporary Food Establishments & Tasting Event Booths	11	587	1	139	3,611	1
TOTALS	2,019	2,989	个	15,336	21,461	1

1. Enforcement Actions and Investigations:

- A. Paleteria y Neveria Mexicana Snack Bar, 865 N. Lamb Blvd.: On February 1, the facility was closed for an Imminent Health Hazard (IHH), no potable water or hot water. The inspector documented five demerits. The facility was reinspected and reopened with three demerits on February 2.
- B. Pho 90, 4355 Spring Mountain Rd.: On February 3, the facility was closed for an IHH, pest infestation. The inspector documented 27 demerits. The facility was reinspected and reopened with zero demerits on February 11.
- C. Greek Delights Mobile, 4181 Pioneer Ave.: On February 4, the unit was closed for an IHH, lack of adequate refrigeration. Other violations included: multiple time/temperature control for safety (TCS) foods stored in the temperature danger zone; hand sink not stocked appropriately; excessive food debris observed

throughout the unit creating conditions conducive to pest infestation; hot holding unit turned off while being used to hold TCS foods; cooked chicken partially frozen and thawing on the counter at ambient temperature; and plastic grocery or garbage bags being used for direct food storage. The inspector documented 20 demerits. The unit was reinspected and reopened with zero demerits on February 10.

- D. T & M Catering, 1935 Fremont St.: On February 5, the unit was closed for an IHH, lack of water in the water tanks. Other violations included: food handler not able to wash hands due to a lack of hot water and backdoor left open. The inspector documented 13 demerits. The unit was reinspected and reopened with three demerits on February 10.
- E. Stewart Ave. and North Fogg St.: On February 8, a joint complaint investigation for unpermitted food vending was conducted with Las Vegas Metro Northeast Area Command (NEAC) and Clark County Business License. The investigation resulted in confiscation of food and equipment.
- F. Rocco's NY Pizza and Pasta, 3999 S. Las Vegas Blvd.: On February 9, the facility was closed for an IHH, sewage backing up in the entire facility. The inspector documented 40 demerits. The facility was reinspected and reopened with six demerits on February 11.
- G. Frank and Fina's Cocina, 4175 S. Grand Canyon Dr.: On February 10, the facility was closed for an IHH, pest infestation. The inspector documented 27 demerits. The facility was reinspected and reopened with zero demerits on February 18.
- H. Nuevo Vallarta #4 Mobile, 4181 Pioneer Ave.: On February 16, the unit was closed for an IHH, liquid waste not disposed of in an approved manner. Other violations included: multiple TCS foods held in the temperature danger zone; liquid petroleum system not installed and maintained to meet local Fire Department standards and other applicable laws; food stored under the three-compartment sink next to chemicals; open windows leading directly into a food preparation area not screened; cold holding unit and hot holding unit not holding/maintaining proper temperatures; thermometer missing and thermometer not functioning in enclosed hot holding unit and cold holding equipment; and water inlet backflow valve damaged and missing. The inspector documented 31 demerits. The unit was reinspected and reopened with zero demerits on February 18.
- Auntie Anne's Pretzels and Cinnabon, 4300 Meadows Ln.: On February 23, the facility was closed for an IHH, gross unsanitary conditions including pest infestation. The inspector documented nine demerits. The facility is still closed at this time.
- J. Firerock Steakhouse Bar, 5990 Centennial Center Blvd.: On February 24, the facility was closed for an IHH, no potable water or hot water. The inspector documented 13 demerits. The facility was reinspected and reopened with zero demerits on February 24.
- K. Staff closed 22 unpermitted food vending complaint investigations.

2. Food Safety Assessment Meetings (FSAMs):

A. FSAMs were held with the following facilities: Express Care, 439 Rock Quarry Way; Street Taos al Vapor, 555 E. Lone Mountain Rd.; and Tacos La Carretas, 4130 Spring Mountain Rd

3. Foodborne Illness Investigations:

- A. Tacos Tijuana, 2554 E. Tropicana Ave.: On February 4, staff responded to a lab-confirmed case of illness. SNHD observed multiple risk factors for foodborne illness including foods stored in the temperature danger zone and expired foods. The investigation resulted in a B downgrade.
- B. Secret of Siam, 5705 Centennial Center Blvd.: On February 10, staff responded to a case of lab-confirmed THC intoxication, by surveying the restaurant and

- discussing cannabis, approved source, and personal item storage with the person-in-charge (PIC). On February 14, after receiving many more complaints, SNHD returned to the restaurant with Las Vegas Metropolitan Police Department (LVMPD) and State Business Licensing staff. This is an ongoing investigation. The restaurant has been closed by LVMPD.
- C. AYCE Restaurant, 4141 S. Pecos Rd.: On February 24, staff responded to a labconfirmed case of illness associated with shellfish. SNHD responded by collecting shellfish information and reviewing shellfish storage and preparation with the PIC.
- **D.** The Shade Tree, 1 W. Owens.: On February 24, staff responded to several reports of illness. SNHD performed a walkthrough of the kitchen and facility with management and shared several resources on outbreak prevention.
- **E. Palermo's Pizza, 1370 E. Flamingo Rd.:** On February 25, staff responded to several reports of illness. SNHD observed multiple risk factors for foodborne illness including missed handwashes and foods stored in the temperature danger zone. The investigation resulted in a B downgrade.

4. Onsite Intervention Training:

A. Onsite Intervention Training was held with the following facilities: Pho4Real, 3401 S. Jones Blvd.; Japaneiro, 7315 W. Warm Springs Rd.; and Tacos and Miches, 301 S. Decatur Blvd.

5. Supervisory/Managerial Conferences:

A. Conferences were held with the following facilities: Best Mobile, 827 N. Main St.; Mon Ami Gabi, 3655 S. Las Vegas Blvd.; and Paleteria y Neveria Mexicana, 865 N. Lamb Blvd.

6. Community Outreach:

A. On February 24, staff gave a food safety presentation emphasizing active managerial control to the beverage managers at the Aria Resort and Casino.

II. SOLID WASTE AND COMPLIANCE PROGRAMS

ENVIRONMENTAL HEALTH Solid Waste Management Authority (SWMA) Illegal Dumping Complaints and Hearing Officer Process – Fiscal Year Data

Illegal Dumping and Hearing Officer	Feb.	Feb.		FY	FY	
Process	2021	2022		20-21	21-22	
Notices of Violations (New & Remails)	0	0	→	38	60	1
Adjudicated Hearing Cases	11	12	1	70	49	4
Total Cases Received	81	86	个	790	728	4
Total Cases Referred to Other Agencies	7	25	个	140	165	1
Hearing Penalties Assessed	\$11,500	\$23,500	个	\$60,850	\$81,200	1

ENVIRONMENTAL HEALTH Restricted Waste Management – Fiscal Year Data

Restricted Waste Management	Feb. 2021	Feb. 2022		FY 20-21	FY 21-22	
Inspections	307	312	个	2,243	2,160	+

ENVIRONMENTAL HEALTH Underground Storage Tanks (UST) Full Compliance Inspections – Fiscal Year Data

	Feb.	Feb.		FY	FY	
Underground Storage Tanks	2021	2022		20-21	21-22	
Compliance Inspections	118	115	4	775	468	4
Final Installation/Upgrade/Repair Inspections	7	2	4	50	30	4
Closure Inspections	2	1	4	7	8	1
Spill Report Investigations	1	0	4	5	7	1

ENVIRONMENTAL HEALTH Permitted Disposal Facilities (PDF) Inspections – Fiscal Year Data

	Feb.	Feb.		FY	FY	
Permitted Disposal Facilities	2021	2022		20-21	21-22	
Inspections	19	19	\rightarrow	143	162	1
Reinspections	1	0	4	12	15	1

1. Solid Waste Plan Review Program (SWPR):

- A. Permits Issued APEX Materials Moccasin (RC)
- B. Landfills Apex Regional Landfill; Boulder City Landfill; Laughlin Landfill; Nellis Air Force Base (Post Closure Monitoring); Timet; Sunrise Mountain (Post Closure Monitoring); and Wells Cargo
- C. Facility Applications Being Processed Recycling Centers (4), Material Recovery Facilities (2), and Class I Landfill (1)
- D. Facilities Planned for Approval at DBOH Meetings/SNHD Workshops in March: None

ENVIRONMENTAL HEALTH Asbestos Permitting Services – Fiscal Year Data

	Feb.	Feb.		FY	FY	
Asbestos Permitting Services	2021	2022		20-21	21-22	
Asbestos Permits Issued	76	69	4	706	578	4
Revised Asbestos Permits Issued	3	10	个	35	56	1

ENVIRONMENTAL HEALTH Subdivision Program – Fiscal Year Data

Subdivision Plan Review	Feb. 2021	Feb. 2022		FY 20-21	FY 21-22	
Tentative Maps-Received	24	27	个	134	187	个
Tentative Maps-Lot Count	1,902	3,474	个	10,527	16,353	1
Final Maps-Received	25	37	个	182	258	1
Final Maps-Lot Count	1,686	1,919	个	9,464	13,969	1
Final Maps-Signed	20	14	4	160	150	4
Final Maps (Signed)-Lot Count	1,174	636	4	7,891	7,290	4
Improvement Plans-Received	31	24	4	185	227	1
Improvement Plans-Lot Count	2,288	1,483	4	10,484	12,960	↑
Expedited Improvement Plans-Received	1	0	4	17	0	4
Expedited Improvement Plans-Lot Count	4	0	4	1,367	0	4
Fees Paid	\$33,540	\$47,203	个	\$357,019	\$349,818	4

ENVIRONMENTAL HEALTH Individual Sewage Disposal System (ISDS) Program – Fiscal Year Data

Individual Sewage Disposal Systems	Feb. 2021	Feb. 2022		FY 20-21	FY 21-22	
Residential ISDS Permits	9	8	4	77	81	1
Commercial ISDS Permits	0	1	1	3	5	1
Commercial Holding Tank Permits	3	2	4	13	13	→
Residential Tenant Improvements	19	40	1	203	211	1
Residential Certifications	1	2	个	6	12	1
Compliance Issues	6	4	4	64	49	+

ENVIRONMENTAL HEALTH Safe Drinking Water Program – Fiscal Year Data

	Feb.	Feb.			FY	FY	
Safe Drinking Water Program	2021	2022			20-21	21-22	
Public Water System (PWS) Sanitary Surveys)	1	个	35	49	1
Public Water System Violations Issued	2:	3	2	4	41	19	4
Public Water System Complaints)	0	>	0	0	>

2. Safe Drinking Water Activity:

- A. Two *coliform*-present sample events were reported (SCPPA Apex Generating Station and Tropicana Resort and Casino). All original and repeat samples were *Escherichia coli*-absent.
- B. Staff continued to monitor water hauling activities for multiple public water systems: Trout Canyon, Laker Plaza, Red Rock Visitor Center, Red Rock Campground, Spring Mountain Youth Camp, Goodsprings Elementary School (ES) Clark Community Center, Sandy Valley ES, and Virgin Hyperloop.

- **C.** Staff continued to field and guide complaintants regarding water quality issues and water availability within private residences and rental properties.
- D. Aravada Springs (PWS NV0004140): Water system plans were conditionally approved for construction in June 2021. Construction has not yet finished.
- E. Bermuda Palms Management LLC (PWS NV0000147): The PWS team communicated a resolution to their sole remaining significant deficiency. All Tier 2 violations are now resolved.
- F. Blue Diamond Water Co Op Inc (PWS NV0000092): No noteworthy progress has been made by the PWS team to resolve Tier 2 violations for significant, unresolved deficiencies and Tier 2 public notification. Board training and technical assistance was received from the Rural Community Assistance Cooperation.
- G. Desert Paradise MHP (PWS NV0000149): The PWS team received guidance regarding the creation of a maintenance schedule for their point of use treatment plant strategy.
- H. Desert Sunrise Water Users Assoc (PWS NV0000426): On February 16, the point of contact (POC) communicated their service area's census. Conclusions regarding permitting will be communicated in March.
- I. DWR POU 74505 (NV0004137; aka Wallflower): Staff continued to remind the PWS team about their non-compliance regarding the Bureau of Safe Drinking Water (BSDW) receiving a permit application. No noteworthy progress was received regarding sanitary survey deficiencies being resolved and monitoring from the well.
- J. Fort Apache Ann NE (PWS NV0000430): Staff continued to conclude no noteworthy progress has been made by the PWS team regarding public water system permitting with the BSDW. Technical assistance from Nevada Rural Water Association is ongoing yet has also concluded no noteworthy progress is being attempted by the POC.
- K. Virgin Hyperloop (PWS NV0001184): The site team utilizes commercially bottled water to satisfy all human consumption needs. Staff continued to field questions from site representatives while a BSDW conclusion is reached regarding permitting.
- L. Yellow Pines Solar Project (PWS TBA): The site team envisions utilizing commercially bottled water to satisfy all human consumption needs. Staff continued to field questions from site representatives while a BSDW conclusion is reached regarding permitting.

III. VECTOR CONTROL OFFICE

ENVIRONMENTAL HEALTH Vector Control and Other EH Services - Fiscal Year Data

Vector Control and Other EH Services	Feb. 2021	Feb. 2022		FY 20-21	FY 21-22	
West Nile Virus Surveillance Traps Set	0	0	→	1,426	1,578	1
West Nile Virus Surveillance Mosquitoes Tested	0	0	>	13,048	19,627	1
West Nile Virus Surveillance Submission Pools Tested	0	0	>	996	1,368	1
West Nile Virus Surveillance Positive Mosquitoes	0	0	>	210	82	4
West Nile Virus Surveillance Positive Submission Pools	0	0	>	8	2	+
Saint Louis Encephalitis Positive Mosquitoes	0	0	>	0	0	>
Saint Louis Encephalitis Positive Submission Pools	0	0	→	0	0	>
Western Equine Encephalitis Positive Mosquitoes	0	0	→	0	0	>
Western Equine Encephalitis Positive Pools	0	0	>	0	0	>
Mosquito Activity Complaints	0	0	>	19	20	个
Elevated Blood Level Home Investigations	0	0	>	3	2	4
Legionella Residential Investigations	0	2	1	7	6	4
Legionella Travel Associated Investigations	0	0	>	3	7	个
Legionella Healthcare Associated Investigations	0	0	>	0	1	1
Public Accommodations Inspections	49	40	4	302	284	4
Public Accommodations SB4 Inspections	84	74	4	700	599	4
Public Accommodations Complaints	5	13	个	93	127	个
Mobile Home/Recreational Vehicle Park Inspections	54	51	4	166	126	+
Mobile Home/Recreational Vehicle Park Complaints	3	0	4	14	8	4

IV. SPECIAL PROGRAMS

ENVIRONMENTAL HEALTH Special Progra	ms - Fisc	al Year D	ata			
Special Programs	Feb. 2021	Feb. 2022		FY 20-21	FY 21-22	
School Food Facility Inspections	31	108	1	122	590	1
School Food Facility Complaints	0	0	>	0	3	1
School Facility Inspections	90	116	个	226	698	1
School Facility Complaints	0	5	个	3	23	个
Summer Food Service Surveys	0	0	>	8	40	个
Child Care Facility Inspections	30	17	4	247	252	1
Child Care Facility Complaints	1	1	>	12	11	4
Body Art Facility Inspections	9	16	1	233	289	1
Body Art Facility Complaints	2	5	个	13	20	个
Body Art Artist Special Event Inspections	0	0	>	1	13	1
Total Program Services Completed	163	268	个	865	1,939	个

1. Schools:

- A. Desert Oasis High School, 6600 W. Erie Ave.: Staff investigated a complaint alleging multiple restrooms were being closed on a regular basis due to ongoing vandalism. Staff investigated four restrooms in separate areas of the school. Vandalism was documented in all four restrooms to include broken and missing soap dispensers, missing and damaged paper towel and toilet tissue dispensers, damaged walls and tiles broken and missing stall doors, and broken and missing privacy panels between stalls. Staff also noted toilets that were out of order due to damage or being intentionally clogged with tissue and plastic debris. Staff closed an additional restroom while onsite due to damaged and absence of soap, paper towels, and toilet tissue dispensers. The complaint was valid; however, administration and custodial staff were taking appropriate corrective action when necessary to keep as many restrooms open as possible.
- B. Canyon Springs High School, 350 E. Alexander Rd.: Staff investigated a complaint alleging that all restrooms were closed except for the quad restrooms even though there are over 3,000 students on campus. Only the quad restrooms were open at the time of the inspection. The restrooms had paper towels on the floor and in the hand sink and students waiting in line to use the facility not during peak lunch hours. School staff stated that restroom use was limited to the quad restrooms during class hours and an additional restroom in the 300's hall during the lunch hour due to excessive vandalism, fighting, and safety concerns. The complaint was valid. Staff gave directives for corrective actions including implementing administrative control measures to open the restrooms to accommodate the quantity of students on campus.
- C. Mesivta of Las Vegas, 2600 Lake Sahara Dr.: Staff conducted a routine inspection and noted the school had constructed walls inside the building to create more classroom space. There was no documentation to indicate that school administrative staff had contacted SNHD Plan Review for approval prior to the construction. Staff directed school administration to contact the Plan Review office for processing.

D. Stanford Elementary School, 5350 Harris Ave.: While conducting a routine inspection, SNHD staff smelled cigarette smoke outside the building at the dumpster area and observed school staff members sitting near the area. SNHD staff found evidence of cigarette smoking, including an accumulation of cigarettes butts in a dustpan, cigarettes butts and burnt residue on the ground, and a strong smell of smoke in the dumpster area. Smoking is prohibited on school property per Nevada Revised Statutes (NRS) 202.2483. This survey report was not reviewed with the school but was sent to CCSD Risk Management.

2. Body Art:

A. Fool's Gold Tattoo, 5025 S. Eastern Ave.: Staff delivered copies of the 2019 and 2021 outstanding invoices to the facility owner. The owner paid the 2021 invoice at the time of delivery and will contact SNHD administrative staff regarding the disputed invoice from 2019. During delivery, staff conducted a routine inspection and noted that the facility was operating outside the parameters of the current health permit. The shop had a piercing room containing piercing equipment and completed piercing consent forms despite not having a piercing permit. A Cease and Desist Order was issued to discontinue all piercing activities until obtaining a permit.

V. PLAN REVIEW PROGRAM

ENVIRONMENTAL HEALTH Plan Review Property Data	ogram - l	Fiscal Ye	ar			
Food Pre-Permitting Services	Feb. 2021	Feb. 2022		FY 20-21	FY 21-22	
Food Safety Assessment Meetings	1	0	4	5	4	4
Total Pre-Permitting Services	1,369	1,203	4	11,922	10,255	+
New Project Submissions	223	233	个	1,961	2,115	个
Released Projects	223	231	1	2,228	2,288	1
Total Service Requests Currently in Pre- Permitting	1,193	1,219	个			

1. Enforcement Actions and Investigations:

- A. Aloha Mamacita, 4195 S. Grand Canyon Dr.: A final permitting inspection was conducted, and staff found multiple penetrations in the walls of the kitchen, a household ice shaver, and a slow-draining floor sink under the three-compartment sink. SNHD Food Regulations require walls to be smooth and easily cleanable, food equipment to be National Sanitation Foundation (NSF)/American National Standards Institute (ANSI) sanitation certified, and adequate drainage of wastewater. The permit was approved with stipulations.
- B. Gourmet China, 6360 N. Simmons St.: A Change of Permit Holder (CPH) inspection resulted in closure due to food safety violations and insufficient food safety knowledge. Violations included: improper cooling, improper food storage and temperatures, and unlabeled chemicals. SNHD Regulations require that the PIC demonstrate basic food safety knowledge and that a CPH inspection result in no greater than 10 demerits. The owner was directed to study food safety requirements and attend an FSAM. A reinspection will be scheduled after corrections have been completed and the owner successfully passes the FSAM.

- C. Wet Nightclub, 4636 Wynn Rd.: Staff performed final permitting inspections for two bars and observed several violations which resulted in failed inspections. Violations included: walk-in cooler and one reach-in cooler inoperable; inadequate hot water from the three-compartment sink; absence of sanitizer and sanitizer test strips; no probe thermometer onsite; and air curtain above the receiving door leading into a food preparation area was missing. Final permitting inspections are pending completion of the required corrections.
- D. The Pepper Club, 921 S. Main St.: A final permitting inspection resulted in failure due to incomplete/ improper construction. Staff observed that not all equipment had been installed and food equipment had been improperly plumbed. Passing a final permitting inspection requires that all equipment is onsite and properly installed, construction is completed, and the permitted areas are clean and ready for food deliveries. A subsequent follow-up inspection verified corrections and the permits were approved.
- E. On Demand Sushi, 11350 Southern Highlands Pkwy.: During a final permitting inspection, staff found that equipment specified in the approved plan was missing. The missing equipment included a small refrigerator, an ice machine, and a drain board for the dish machine. The missing equipment was not crucial for operation of the facility; therefore, staff was able to approve the permit and schedule a follow-up inspection. Staff returned one week later to approve the remaining equipment.
- F. Reddy Ice, 6420 Cameron St.: Staff conducted a CPH inspection resulting in approval; however, the facility was informed that they need to apply for a waiver for a sump pump. The facility has a concrete pit located below the assembly line that is used to catch all leaks and runoff water that occurs during the ice bagging process. The pit does not have a drain, so the facility uses a submersible pump to remove the water from the pit and into a nearby floor sink. Sump pumps are prohibited for use inside a food establishment without a waiver. The waiver is still pending approval.
- G. Gorditas Betancourt, 4180 S. Sandhill Rd.: During a CPH inspection, staff found that the floor sink at the three-compartment sink was backing up. SNHD Regulations require proper disposal of wastewater and overflowing wastewater inside the establishment is an IHH. The inspection resulted in a failure and the facility remains closed. A reinspection will be scheduled once corrective actions have been completed.
- H. Easy Bake Take Out Pizza and Market, 3250 Civic Center Dr.: During a CPH inspection, staff found numerous violations including: unapproved equipment requiring a remodel, an inaccurate thermometer, improper cooling, sanitizer concentration too high, cleaned dishes stored with food debris, and commingling of employee personal food with items with food for the facility. The inspection resulted in failure with 22 demerits. A reinspection was approved after corrections were made.

VI. AQUATIC HEALTH PROGRAM

ENVIRONMENTAL HEALTH Aquatic Health Operations Program - Fiscal Year Data

	Feb.	Feb.		FY	FY	
Aquatic Health Operations	2021	2022		20-21	21-22	
Total Operation Inspections	120	377	个	2,108	2,746	1
Complaint Investigations	1	5	个	84	142	个
Inactive Body of Water Surveys	6	8	个	46	26	4
Total Program Services Completed	127	390	个	2,238	2,914	个

Drowning/Near Drowning/Diving Incident Investigations at Permitted Facilities: 0

1. Aquatic Health Operations

- A. Decatur Pines, 6741 N. Decatur Blvd.: A routine inspection of the spa resulted in closure for an IHH. The disinfectant residual and cyanuric acid levels in the spa were too high. Improperly maintained water chemistry jeopardizes bather safety by increasing the likelihood of transmission of waterborne illnesses. Staff are currently awaiting verification of corrective actions. The facility remains closed until reinspection.
- B. Caesars Palace Hotel and Casino, 3570 S. Las Vegas Blvd.: A routine inspection of the Qua Health spa resulted in IHH closures for six of the nine aquatic venues. Staff found water chemistry out of compliance and advised the qualified operator. Violations included high bromine residuals, maximum water temperature exceeded in four of the spas, and suction outlet covers or the bottom floor not visible due to cloudy water. Health risks associated to high bromine levels include skin and respiratory reactions. Temperatures above 104°F can lead to unconsciousness and result in drowning. People may not see bathers in distress when water clarity is compromised. After corrective actions were made by the qualified operator, staff were able to conduct reinspections and the facility was reopened to bathers.
- C. Club Wyndham Grand Desert, 265 E. Harmon Ave.: A routine inspection of the spa resulted in an IHH closure. The east entry gate was propped open by a padlock, which prevented the gate from self-latching while children played adjacent to the enclosure. Failure to maintain an adequate barrier presents a drowning risk for small children, especially with the spa being at an unsupervised aquatic venue. Property management was notified, and the barrier latch issue was corrected. Staff conducted the reinspection, and the spa is currently open for use.
- D. Ely Apartments, 9750 Peace Way: A routine inspection of the spa resulted in an IHH closure. The level of chlorine disinfectant was greater than 20 parts per million (ppm). High chlorine levels can cause severe skin, eye, and lung irritation to bathers. Additionally, cyanuric acid levels were too high. High cyanuric acid levels reduce the efficacy of the disinfectant. A reinspection was conducted the next business day and the spa was approved to reopen and operate.
- E. Silverado Lanes Townhomes Pool, 10005 S. Maryland Pkwy.: A routine inspection of the pool resulted in a 30-day written compliance schedule to obtain annual testing on an expired backflow prevention device. Failure to maintain current testing for backflow prevention devices can result in device failure and contamination of the drinking water supply. Within the allotted timeframe, staff received verification of the device's testing certification and the venue is now compliant.

- F. Elysian at Tivoli Apartments, 8791 Alta Dr.: Staff responded to a complaint alleging that the facility posted the wrong qualified operator information at the aquatic venue. During discussions with property management, it was discovered a new operator was recently hired. Staff observed that the previous operator information had been removed from the signage. The complaint was unsubstantiated, and management was instructed to post the new qualified operator information.
- G. Valley View Senior Apartments, 1600 S. Valley View Blvd.: Staff responded to a complaint alleging no smell of chlorine and bird feathers and tree debris within the aquatic venue. Staff observed small amounts of plant debris, possibly resulting from windy weather, good water clarity, visible drain cover pattern, and chlorine residual within regulatory requirements. The complaint was unsubstantiated.
- H. Lake Las Vegas Sports Club, 101 Via Vin Santo Rd.: A routine inspection resulted in an IHH closure of all three aquatic venues due to elevated cyanuric acid and free chlorine levels. Staff verified corrective actions at the reinspection eleven days later and the facility is currently open to bathers.

ENVIRONMENTAL HEALTH Aquatic Health Plan Review Program - Fiscal Year Data

	Feb.	Feb.		FY	FY	
Aquatic Health Plan Review	2021	2022		20-21	21-22	
Total Pre-Permitting Services	614	770	1	4,266	5,380	1
New Project Submissions	72	81	1	434	554	1
Released Projects	55	61	1	484	490	1
Total Projects Currently in Plan Review	363	327	4	Fisher.		

2. Aquatic Health Plan Review:

- A. Luxor Hotel and Casino, 3900 S. Las Vegas Blvd.: A final remodel inspection for the installation of a disinfectant pump at the Women's Health Club Large Spa resulted in closure. Upon arrival, patrons were in the spa even though the venue was supposed to be closed until a final remodel inspection was approved. Violations included free chlorine at 15 ppm and pH above 8.0, both of which are higher than the allowed maximum. Additionally, the chemical controller was not displaying accurate water chemistry values. After the qualified operator corrected the free chlorine and the pH within an acceptable range and calibrated the controller so it displayed accurate values, the final inspection was approved, and the spa was reopened.
- B. Bloom Apartments, 7075 W. Gowan Rd.: A final remodel reinspection was conducted for the installation of a filter at the North Spa. The spa had previously failed a final inspection due to the filtration pump having an incorrect impeller. The impeller was restored to the approved size and the system flow was within the acceptable range, so the remodel was approved. During the inspection, the latching hardware for all gates and doors was in the process of being replaced. The facility was instructed to request an inspection before opening the pool area to ensure that all gates and doors are compliant.
- C. Stonegate Apartments, 5150 Spyglass Hill Dr.: A pre-plaster inspection conducted at the Greens Pool resulted in failure. Violations included filtration equipment present but not plumbed, equipment room walls and curbing not completed, area lighting less than the required 10-foot candles, no contrasting edge

- markings at the stairs, and handrails and grab rails not yet installed or not at a compliant height. The doors from the clubhouse and the hygiene facilities into the enclosure could not be inspected because there was no access to the clubhouse. It also appeared that the deck sloped into the pool in multiple locations. A reinspection is still pending.
- D. The English Hotel, 921 S. Main St.: A final permitting inspection conducted at the pool resulted in failure. Violations included a hand/foothold on the enclosure, one of three gates not adequately self-closing and self-latching, one area of deck uneven and posing a trip hazard, and area lighting levels less than the required 10-foot candles. At the reinspection, corrections had been made but area lighting was still not compliant. Area lighting was corrected and approved at the second reinspection.

VII. REGULATORY SUPPORT

- 1. Regulatory Support Office (RSO) staff continued to train ten new Environmental Health Specialists (EHSs) from the November and December 2021 groups.
- 2. On February 25, Special Processes staff surveyed multiple retail facilities to ensure recalled baby formula was not available for sale.
- 3. RSO staff participated in or performed the following activities: oversaw the EH portion of the Accela conversion project; reviewed and attended meetings for the draft Food Regulations; presented on grant applications and awards at the Food Operations Staff meeting; and participated in several external meetings: Conference for Food Protection (CFP) Allergen Committee, CFP Food Safety Management Systems Committee, and National Environmental Health Association (NEHA) Food Safety Program Committee.
- 4. Special Processes staff met with various operators in a virtual setting via phone calls and WebEx meetings regarding submission of labels for review, waivers, operational plans, and Hazard and Critical Control Point (HACCP) plans. There are currently six cook chill/sous vide plans, five 2-barrier plans, 12 other HACCP plans, 24 waivers, and one operational plan in review.

VIII. SPECIAL PROCESSES

ENVIRONMENTAL HEALTH Label Revieus	ew – Fiscal Y	ear				
	Feb.	Feb.		FY	FY	
Label Review	2021	2022		20-21	21-22	
Facility Label Review Submissions	21	27	个	100	183	个
Facility Label Review Releases	19	27	个	90	198	个
Number of Labels Approved	267	289	1	1,322	2,762	1

ENVIRONMENTAL HEALTH Special Processes Plan Review - Fiscal Year Data

	Feb.	Feb.		FY	FY	
Special Processes Review	2021	2022		20-21	21-22	
Cook Chill/Sous Vide Submissions	0	0	>	2	2	>
Cook Chill/Sous Vide Releases	0	1	个	1	4	个
2-Barrier ROP Submissions	0	0	>	4	0	4
2-Barrier ROP Releases	0	0	>	5	0	4
Other HAACP Special Processes Submissions (Including ROP of fish, unpasteurized durably packaged juice, preservation, curing, etc.)	1	0	4	5	2	+
Other Special Processes Releases	0	0	>	2	2	>

ENVIRONMENTAL HEALTH Special Processes Waivers & Operational Plans Review - Fiscal Year Data

	Feb.	Feb.		FY	FY	
Waivers & Operational Plans Review	2021	2022		20-21	21-22	
Waiver Review Submissions	3	1	4	13	12	4
Waiver Review Releases	4	1	4	10	10	>
Operational Plan Submissions	0	0	>	1	1	>
Operational Plan Releases	0	0	>	1	4	1

CDS/hh



Memorandum

Date: March 24, 2022

To: Southern Nevada District Board of Health

From: Cortland Lohff, MD, Chief Medical Officer, Director of Primary & Preventive Care

Fermin Leguen, MD, MPH, District Health Officer

RE: Primary & Preventive Care Divison Monthly Report – February 2022

PREVENTIVE SERVICES – CLINICAL SERVICES REPORT

I. Immunization Program

A. Immunization Program Activities

- 1. There were 63 reminder calls made to parents/guardians of children 2-35 months who are not up to date with their immunization for the month of February.
- There were 562 successful reminder calls and postcards sent out on February 15, 2022 to adults age 65 years and older who did not receive their doses of Prevnar, Pneumovax and/or Td/Tdap vaccination.

B. Immunization Outreach Activities

- The Nevada State Flu grant provided 485 vaccines to 227 clients in Clark County.
 There were a total of 10 outreach clinics conducted. Vaccines provided included;
 Flu, Covid-19, Tdap, Pneumonia, MMR, Shingles, Hepatitis A and Hepatitis B with clinics at the following locations:
 - a. There were 3 clinics held at Clark County Detention Center (CCDC).
 - b. Two clinics were held at The Courtyard.
 - c. One clinic was held with Harm Reduction.
 - d. One clinics was held at the Boulder City Library.
 - e. One clinic was held at the Mexican Consulate.
 - f. The Flu clinic at the Episcopal Church was resumed on February 16, 2022 with 2 clinics. The clinics hours are every Wednesday from 10:00am-2:00pm.
- 2. Vaccines were administered to insured, uninsured and underinsured children and adults on a first come first serve basis. Vaccines administered were Covid-19 Flu, Hepatitis A and B, Tdap, HPV, MMR, and Shingles.
- 3. The Perinatal Hepatitis B Program Coordinator attended the CDC Hepatitis B and Pregnancy Webinar this month.



II. COVID-19 Vaccine Campaign

A. Community COVID-19 Vaccine Static Clinics

- There were 3,284 COVID-19 vaccines administered at 10 static sites held at 3 CSN sites, 4 CCSD, Galleria Mall, Boulevard Mall, and Evening and Weekend Sites.
- 2. COVID-19 Vaccination program continue to utilize National Guard, contract companies, and community partners to staff sites.
- 3. Got Vax Activities included 39,326 vaccine clinic flyers distributed in selected zip codes in partnership with Mi Familia Vota, Promotoras Las Vegas, Dream Big Nevada Nevada, and Nevada Homeless Alliance.

B. Community COVID-19 Pop-Up Sites

- There were 491 COVID-19 vaccines administered through 46 pop-up and strike team activities. These include health equity areas, occupational, long-term care, and homebound clinics.
 - 2. Community partnerships administering vaccine included: Clark County Fire, Touro University, UNLV School of Medicine and Care with Purpose Medical Center.
 - 3. As requested from State partners, long term care facilities were administered vaccine through SNHD and partnerships with UNLV School of Medicine.
 - 4. Homebound services were provided for all jurisdiction in Clark County. SNHD and contract ambulance companies resume homebound services.

III. Community Health Nursing

A. Maternal Child Health

- 1. There were no new reported childhood lead cases for the month of February.
- 2. There were two referrals for the Newborn Screening Program that required follow-up by the field nurse.

B. Nurse Family Partnership (NFP)

The Southern Nevada Health District-Nurse-Family Partnership (NFP) has 127 active clients. Forty-five are participating through the Maternal, Infant and Early Childhood Home Visiting (MIECHV) Program made available through the Nevada Division of Public and Behavioral Health under the Affordable Care Act (ACA).

Telephone and video conference visits were utilized to engage and provide education, support, and essential resources during the COVID-19 surge.

C. Embracing Healthy Baby

The Southern Nevada Health District's Embracing Healthy Baby Program Community Health Workers (CHWs) are managing cases with minimal guidance from the program Community Health Nurse. Telephone, virtual and home visits continue with enrolled families. The program is providing services primarily through telehealth. Education and referrals to needed services continue to be provided to families. The program served 60 families in February 2022.



There was no program outreach in February due to the surge in COVID-19 cases in the county. Outreach will resume in March 2022.

IV. Tuberculosis Clinic

- A. There were 6 new active adult TB cases reported by the TB Clinic during this period. There were no new pediatric active TB case reported by the TB Clinic during February.
- B. The Refugee Health Program served 42 adults in February.

V. Employee Health Nurse

- A. Chris Mariano is temporarily filling the Employee Health Nurse position. The position is currently in the recruitment process.
- B. A total of 137 Covid-19 tests conducted in February. Eighty-five Covid-19 Rapid tests were conducted. Fifty-two Covid-19 PCR tests were conducted. Eight employees tested positive for Covid-19.
- C. Employee Annual TB testing continued for the month of February. There were 19 TB tests completed.
- D. There were no new employee Blood Borne Pathogen or TB exposure cases for February.

VI. Preventive Services Administration

A. Clinical Services Division continues to retain Nevada State Board of Nursing approval to provide Continuing Education credits for SNHD Nursing staff. There were no CEU's offered in February.

CLINICAL SERVICES DIVISION MONTHLY REPORT February 2022

Clinical Services Client Encounters by Locations

Location	DECATUR PHC	ELV PHC	Hend PHC	Mesquite PHC	Laughlin	Mobile Clinic		Targeted Populations	TOTAL
Immunization	1,380	376	204	45	0	0	0	256	2,261
Immunization Records Issued	406	39	14	2	NEED TO				461
Newborn Metabolic Screening	0	0	0	0					0
TB Treatment & Control	913	East late.				HEARING			913
SAPTA Services								34	34
TOTAL	2,699	415	218	47	0	0	0	290	3,669



Clinical Services Client Encounters by Program

	Feb	Feb				
Program	2021	2022		FY 20-21	FY 21-22	
Immunizations	7,004	2,261	4	38,620	28,351	Ψ.
Immunization Records Issued	156	461	1	2,472	6,648	1
COVID-19 Vaccine Given*	0	3,775	1	0	74,127	个
Newborn Met. Screening	0	0	→	8	4	4
TB Treatment & Control	929	913	+	6,415	6,893	1
SAPTA Services	28	34	↑	159	183	1
TOTAL	8,117	7 🕩 14	*	47,674	116,206	个

^{*}Funded by COVID Grant Funds

Clinical Services Immunization Program

Immunizations	Feb 2021	Feb 2022		FY 20-21	FY 21-22	
Flu Vaccine Given	302	662	1	10,854	7,732	4
Gratis	21	133	1	866	1,654	1
COVID Vaccine*	n/a	455	+	n/a	4,422	4

^{*}Given by Immunization Clinics

	Feb	Feb				
Vaccines for Children (VFC)*	2021	2022	2022		FY 21-22	
Number of VFC Compliance Visits	0	6	个	54	53	4
Number of IQIP Visits*	0	10	1	19	21	1
Number of Follow Up Contacts	0	41	1	395	330	+
Number of Annual Provider Training	0	4	1	15	47	1
Number of State Requested Visits	0	100	1	622	832	1

	Feb	Feb				
Perinatal Hepatitis B	2021	2022		FY 20-21	FY 21-22	
# of Expectant Women	18	17	4	20	15	4
# of Infants	77	79	1	79	77	4
Total # of Infants Delivered	4	3	4	4	26	1
New Cases	5	5	>	33	30	4
Closed Cases	0	7	1	45	34	+

Childcare Program	Feb 2021	Feb 2022		FY 20-21	FY 21-22	
Childcare Audits	0	13	1	8	46	1
Baseline Immunization Rate	n/a	71%	4	75%	75%	>
# of Re-Audits	0	11	1	5	51	1
Re-Audit Immunization Rate	n/a	94%	4	91%	93%	个
# of Records Reviewed	0	911	1	748	3,790	个



Covid-19 Vaccine Campa	ıgn
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	Feb	Feb				
COVID-19 Vaccine Campaign	2021	2022		FY 20-21	FY 21-22	
# of Healthcare Provider Compliance Visits	0	2	1	0	12	1
# of Newly Enrolled Healthcare Provider Education Sessions	0	8	1	0	17	个
# of Potential Healthcare Provider Recruitment Sessions	0	4	1	0	15	1
# of Healthcare Provider Contacts	0	117	1	0	237	1

^{*}Data collection started January 2022

Clinical	Services	Communit	y Health	Program

Nursing Field Services	Feb 2021	Feb 2022		FY 20-21	FY 21-22	
MCH Team Home Visit Encounters	7	9	1	78	84	个
	Feb	Feb				
NFP	2021	2022		FY 20-21	FY 21-22	
Referrals	9	9	→	86	139	个
Enrolled	3	9	1	44	73	个
Active	145	127	4			
	Feb	Feb				
MCH	2021	2022		FY 20-21	FY 21-22	
# of Referrals Received**	2	1		33	21	1
# from CPS*	2	1		12	11	1

MCH	2021	2022	FY 20-21	FY 21-22	
# of Referrals Received**	2	1	33	21	4
# from CPS*	2	1	12	11	4
# of Lead Referrals	0	0	7	3	1
# of Total Admissions	1	1	15	9	4

	Feb	Feb				
EHB	2021	2022		FY 20-21	FY 21-22	
Referrals	2	8	1	48	131	1
Enrolled	0	9	1	46	58	1
Active	34	60	1			

	Feb	Feb				
Thrive by 0 - 3	2021	2022		FY 20-21	FY 21-22	
Referrals	27	46	1	546	635	1
Enrolled	0	2	1	29	13	4
Active	17	13	4			



Clinical Services Tuberculosis Program

Tuberculosis	Feb 2021	Feb 2022		FY 20-21	FY 21-22	
Number of Case Management Activities*	184	274	→	1,254	1,908	1
Number of Monthly Pulmonary Specialist Clinic Clients Seen	23	22	+	176	178	1
Number of Monthly Electronic Disease Notifications Clinic Clients (Class B)	5	15	^	11	91	↑
Outreach Activities during the Month - Presentations, Physician Visits, Correctional Visits, etc.	0	4	+	0	4	^
Directly Observed Therapy (DOT) Field, clinic and televideo encounters	718	601	+	4,973	4,713	4

^{*}New EMR system- Counting only successful activities

Substance Abuse Prevention & Treatment Agency	Feb	Feb				
(SAPTA)	2021	2022		FY 20-21	FY 21-22	
# of Site Visits	4	4	→	12	19	1
# of Clients Screened	28	34	1	159	183	1
# of TB Tests	27	32	1	103	155	1
# of Assessments only	1	2	1	16	28	1

SOUTHER NEVADA COMMUNITY HEALTH CENTER (FQHC) OPERATIONS

Division Information/Highlights: The Southern Nevada Community Health Center (SNCHC), a division of the Southern Nevada Health District (SNHD), mission is to serve residents of Clark County from underserved communities with appropriate and comprehensive outpatient health and wellness services, emphasizing prevention and education in a culturally respectful environment regardless of the patient's ability to pay.

February Highlights:

Administrative:

 Submission of HRSA UDS Report initially submitted on 2/11/2022, inquiries from the HRSA reviewer were received on 2/26/22, then responses to HRSA Reviewer Inquiries sent back on 3/7/2022 and the Final Submission was accepted by HRSA on 3/9/22.

COVID-19 Vaccine Clinic Facility: COVID-19 Response

- NCS Facility was converted into a Health Center COVID-19 vaccination clinic on May 2021
 - o To date, the health center has administered 39,403 COVID-19 vaccinations.



I. HIV / Ryan White (RW) Program:

- A. The HIV/Medical Case Management (MCM) program received 10 referrals in December. There were 2 pediatric clients and 2 pregnant women living with HIV were referred to the program.
- B. There were 238 visits for the Ryan White Program: There were 10 initial provider visits, 102 established provider visits, 18 nurse visits and 102 lab visits in the month of February. There were 8 Ryan White clients seen for Behavioral Health; by either the Licensed Clinical Social Worker (LCSW) or the Psychiatric Advanced Practice Registered Nurse (APRN).
- C. The Ryan White Program continues to implement the Rapid stART project, which has a goal of rapid treatment initiation for newly diagnosed patients with HIV. The program continues to receive referrals and accommodate clients on a walk-in basis.
- D. The Ryan White Program dietitian continues to provide medical nutritional therapy.

II. Family Planning (FP):

- A. FP Program services at East Las Vegas and Decatur Public Health Centers served 218 clients; 366 of them were unduplicated.
- B. The East Las Vegas Family Planning Clinic served 156 clients; 152 of them were unduplicated.
- C. The Decatur Family Planning Clinic served 221 clients; 214 of them were unduplicated.

III. Family Health (FH):

- A. FH providers saw 361 patients in the month of February.
- B. 31 patients were under the age of 18.
- C. 23 were from the Refugee Health Clinic.

IV. Pharmacy Services:

- A. Dispensed 1,379 prescriptions for 1,068 clients.
- B. Pharmacist assessed/counseled 29 clients in clinics.
- C. Assisted 16 clients to obtain medication financial assistance.
- D. Assisted 8 clients with insurance approvals.



IV. Eligibility Case Narrative and Eligibility Monthly Report:

Eligibility Monthly Report							
February 2022							
Total number of referrals received	Total number of referrals received 41						
Total number of applications submitted Medicaid/SNAP/TANF: 25 Hardship: 1							

- Eligibility support continues to increase with new operational adjustments.
 - Recruitment continues for additional Eligibility Workers to help convert uninsured patients to insured patients.
- In 2021 Eligibility submitted 348/639 assistance applications or 54.46% of patients starting the application process.
- This year, 26/41 of the applications started were successfully submitted, or a conversion rate of 63.4%.
- Eligibility services is offered to patients at our East Las Vegas Center, Decatur Center, Mobile Unite, Community Events, and the Vaccine Center.

V. Refugee Health Program:

A. The Refugee Health Program provided services to 56 patients in February.

VI. Quality & Risk Management:

Quality:

COVID-19 Testing:

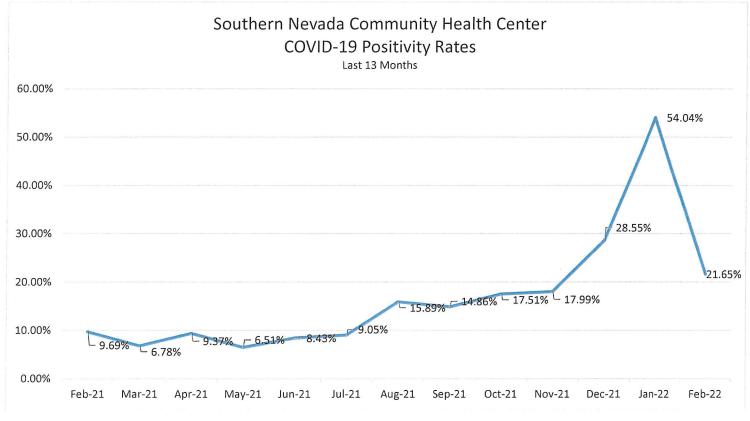
April 2020 to February 2022, SNCHC completed 86.816 COVID-19 tests. In February 2,240 tests were conducted, with a reduction in the positive rate to 21.65%.

The SNCHC and the SNHD continue to encourage those experiencing symptoms to remain at home, or if they have been in close contact with a person who is COVID-19 positive or think they have been exposed; they should be tested. SNCHC and SNHD also encourages the public to get the COVID-19 vaccine.

SNCHC is participating in dispensing of an antiviral medication for patients who test positive, who have fewer than five (5) days of symptoms, have exacerbating health conditions and comorbidities, and/or are over the age of 65. SNCHC dispensed the antiviral medication to 11 patients in February.

SNCHC was also chosen to participate in the Federal N95 mask distribution program and we have received started distributing the masks.







Asian

Asian

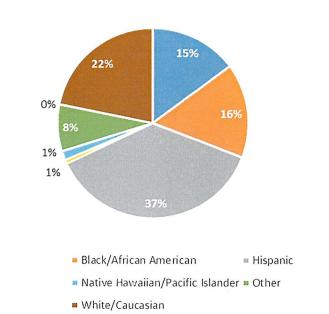
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Native American

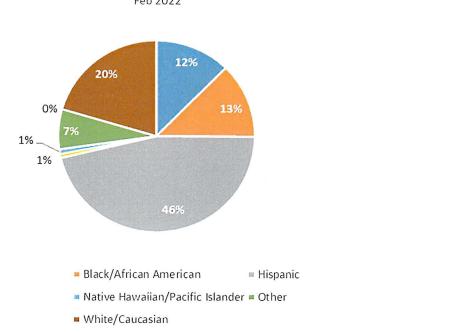
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Native American

Southern Nevada Community Health Center COVID-19 Testing by Race and Ethnicity (Negative Result)

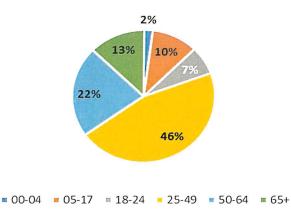


Southern Nevada Community Health Center COVID-19 Testing by Race and Ethnicity (Positive Result)

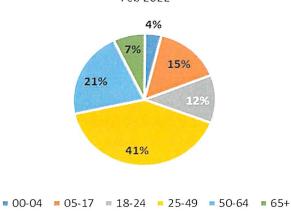








Southern Nevada Community Health Center COVID-19 Testing by Age Group (Positive Result)



COVID-19 Vaccine Program:

The Southern Nevada Community Health Center began administering the COVID-19 vaccine in May 2021, as part of HRSA's COVID-19 Vaccine Program. The vaccine site is located at the SNHD main location inside the NCS Building. Through the end of February, SNCHC has administered 39,403 doses of COVID-19 vaccine in Southern Nevada



Calendar	Year	2022						1						1				
otal Doses Admini	stered Ove	rall-	5483	3														
	First	Doses	S	econd Dos	2 5	1	hird Dose	<u>!</u> 5	В	ooster Dos	ses	Ped (A	ge 5-11) 1s	st Dose	Ped (A	ge 5-11) 2r	nd Dose	
	Pfizer	Moderna	Pfizer	Moderna	Janssen	Pfizer	Moderna	Janssen	Pfizer	Moderna	Janssen	Pfizer	Moderna	Janssen	Pfizer	Moderna	Janssen	Totals
Jan-22	300	64	305	70	92	22	8		1441	698	108	366			379			385
Feb-22	153	33	237	58	50	7	3		508	195	48	91			247			1630
Mar-22														•		•		(
Apr-22											•							(
May-22						•						• • • • • • • • • • • • • • • • • • • •					•	(
Jun-22			***************************************												***************************************			(
Jul-22																		
Aug-22			***************************************					•										
Sep-22						•							•			•		
Oct-22			***************************************															
Nov-22																		
Dec-22												***************************************						(
Total	453	97	542	128	142	29	11	0	1949	893	156	457	0	0	626	0	0	5483
				Company	Pfizer	Moderna	Janssen	ALL				Company	Pfizer	Moderna	Janssen	ALL		
			2022	Totals	4056	1129	298	5483			Overall	Totals	26563	9778	3062	39403		
			ishin ku gi ki	Totals	73.97%						Service Control	10(015	67.41%					

Telehealth:

The Health Center saw 39 patients via telehealth, or 2.92% of the patients that were seen in February. The Health Center implemented telehealth following the need for modified clinic operations as we continue to navigate the COVID-19 pandemic. The goal of the Health Center is to continue fulfilling its mission to provide safe, quality healthcare to the community amid the COVID-19 public health emergency. Health Center patients are seen by providers via audio (telephone) and video via Healow, an app by eClinicalWorks. Telehealth will continue to be offered, even following the COVID-19 pandemic.

SNCHC Visits:

There were 1,336 patient visits to the Health Center in February. There was a 4.34% cancellation rate that factored into February's 25.97% no-show rate.

Risk Management

Health Insurance Portability and Accountability Act (HIPAA):

There were no HIPAA breaches at the Health Center in February.



Exposure Incidents:

There were no exposure incidents at the Health Center in February.

Medical Events:

There were three medical events at the Health Center in February. All three events were handled appropriately by the clinical staff and closed without issue.

Patient Satisfaction:

The Health Center received 134 patient satisfaction surveys in February. Overall survey completion 94.8%. Breakdown

Family Health: 49.2%Family Planning: 18.8%Ryan White: 32.0%

Approximately 10.02% of patients seen at the Health Center in February took the patient satisfaction survey. Overall Satisfaction rating for February was 97.7%

The Health Center received generally favorable responses from survey participants when asked about ease of scheduling an appointment, wait time to see their provider, care received from providers and staff, understanding of health care instructions following their visit, hours of operation, and recommendation of the Health Center to friends and family.

SNCHC Patient Satisfaction Survey:

- 1. Service received during your visit?
 - 49.2% Family Health
 - 18.8% Family Planning
 - 32.0% Ryan White
- 2. Southern Nevada Health District (SNHD) location?
 - Main: 100%
 - East Las Vegas: 0.00%
- 3. Do you have health insurance?
 - ⁴ Yes 63.3%
 - [™] No − 36.7%
- 4. How long have you been a patient at the Southern Nevada Health District/Southern Nevada Community Health Center?
 - Less than 6 months 42.2%
 - 6 months to a year 12.5%
 - ⁴ 1-3 years 35.2%

 - 5+ years − 0.8%



- 5. How did you hear about us?
 - Friends and/or Family 55.55%
 - Referral from another Provider/Resource 22.7%
 - Search Engine (e.g. Google) − 7.0%
 - ♣ SNHD Website 8.6%
 - [™] Social Media 1.6%
 - Other Ads 4.7%
- 6. Ease of scheduling an appointment? 92.2% Positive
 - № 75.07% Excellent
 - 17.2% Good
 - [™] 7.0% Average
- 7. Wait time to see provider? 93.88% Positive
 - 68.88% Excellent
 - 1 25.0% Good
 - 4.7% Average
 - 1.6% Poor
- 8. Care received from providers and staff? 100% Positive
 - № 79.7% Excellent
 - 1 20.3% Good
 - № 0% Poor
- 9. Understanding of health care instructions following your visit? 97.6% Positive
 - ₱ 78.1% Excellent
 - 19.5% Good
 - 1 2.3% Average
 - № 0% Poor
- 10. Hours of operation? 96.9% Positive
 - 63.3% Excellent
 - **33.6%** Good
 - 1.6% Average
 - 1.6% Poor
- 11. Recommendation of our health center to friends and family? 95.3% Positive
 - 82.8% Extremely Likely
 - 12.5% Somewhat Likely
 - 4.7% Neutral



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Southern Nevada Community Health Center	Completed	ted Pt												
	Provider Visits	rVisite	Cancelled Visits	d Vicite	No chow Wirite	. Vicita			Tel	Telehealth Visits	sits		Total Scheduled	eduled
				51515		SISIN	Audio	Audio Visit	Tel	Televisit	Total Telehelath Visits	ath Visits	Patients	nts
Family Health Clinic	361	#REF!	32	2.40%	125	9.36%	32	82.05%	2	5.13%	34	2 54%	557	11 270%
Behavioral Health Clinic		#REF!		%00.0		0.00%		0.00%		0.00%	C	%00 0	200	0.00%
Family Planning Clinic	·	#REF!	9	0.45%	78	5.84%	1	2.56%		0.00%	-	0.07%	303	22 68%
Refugee Clinic		#REF!	9	0.45%	o	0.60%		0.00%		0.00%	C	0.00%	5 5	5 24%
Ryan White		#REF!	14	1.05%	136	10.18%		0.00%	4	10.26%	4	0.30%	411	30.76%
Totals	892	#REF!	28	4.34%	347	25.97%	33	84.62%	9	15.38%	39	2,92%	1336	1-
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