

MINUTES

SOUTHERN NEVADA DISTRICT BOARD OF HEALTH MEETING

November 17, 2022 - 11:00 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

Marilyn Kirkpatrick, Chair - Commissioner, Clark County (in-person) MEMBERS PRESENT:

Scott Nielson, Vice-Chair – At-Large Member, Gaming (in-person) Frank Nemec, Secretary – At-Large Member, Physician (via WebEx) James Adams – Council Member, City of Boulder City (in-person) Scott Black - Council Member, City of North Las Vegas (via WebEx)

Bobbette Bond – At-Large Member, Regulated Business/Industry (in-person)

Olivia Diaz - Council Member, City of Las Vegas (via WebEx) Karen Dutkowski – Council Member, City of Mesquite (via WebEx) Tick Segerblom – Commissioner, Clark County (via WebEx)

ABSENT: Brian Knudsen – Council Member, City of Las Vegas (in-person)

Michelle Romero - Council Member, City of Henderson

ALSO PRESENT: Linda Anderson, Georgi Collins, Cara Evangelista, Timothy Grigsby, Maya (In Audience)

Holmes, Stephen Minagil, Javier Rivera-Rojas, Sabrina Santiago, Stacie Sasso,

Brisa Stephani, Virginia Valentine, Jennifer Young

LEGAL COUNSEL: Heather Anderson-Fintak, General Counsel

EXECUTIVE SECRETARY: Fermin Leguen, MD, MPH, District Health Officer (absent)

STAFF: Adriana Alvarez, Rashida Alvarez, Maria Azzarelli, Tanja Baldwin, Tawana

> Bellamy, Sherhonda Brathwaite, Amanda Brown, Lori Bryan, Nicole Bungum, Victoria Burris, Harold Collins, Andria Cordovez Mulet, Stephanie Cortes, Shea Crippen, Aaron DelCotto, Brandon Delise, Lily Dominguez, Daniele Dreitzer, Emily Elzeftawy, Brian Felgar, Kimberly Franich, Jacques Graham, Michelle Guzman, John Hammond, Heather Hanoff, Richard Hazeltine, Carmen Hua, Jennifer Johnson, Jessica Johnson, Michael Johnson, Matthew Kappel, Mikki Knowles, Fernando Lara, Josie Llorico, Brandi Miller, Christy Munaretto, Semilla Neal, Joe O'Neill, Veralynn Orewyler, Laura Palmer, Kyle Parkson, Neleida Pelaez, Luann Province, Alexis Romero, Larry Rogers, Christopher Saxton, Karla Shoup, Candice Sims, Jennifer Sizemore, Randy Smith, Will Thompson,

Shylo Urzi, Leo Vega, Jorge Viote, Donnie Whitaker, Edward Wynder

I. **CALL TO ORDER and ROLL CALL**

The Chair called the Southern Nevada District Board of Health Meeting to order at 11:06 a.m. Andria Cordovez Mulet, Executive Assistant, administered the roll call and confirmed quorum.

II. PLEDGE OF ALLEGIANCE

III. RECOGNITION

- 1. Human Resources Department
 - NEOGOV Connect Advocate Award

On behalf of the Board of Health, the Chair announced that the Human Resources Department was awarded the NEOGOV Connect Advocate Award. NEOGOV provided this award to organizations that they recognize as leaders and advocates who have mastered the various products, offered in NEOGOV, and have had successful implementations. HR staff quickly mastered the Onboard product implementation, while continuing to train staff on both the Insight and Onboard products. The Board of Health congratulated the HR Department for this recognition.

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.

Brisa Stephani, co-owner of Impact Food Safety and Environmental Health Services, commented that they have the same credentials, REHS, as the Health District inspectors but provide food safety consulting for industry. Ms. Stephani advised that they currently represent about 10% of the 23,000 permits in the City and wanted to comment on the proposed 2023 Food Regulations. Ms. Stephani wanted to thank all those involved in the process, such as Candice Sims and Aaron DelCotto, who have been great contacts and easy to work with. Ms. Stephani advised that the industry had a few concerns lingering in regards to enforcement of the proposed regulations. Ms. Stephani stated that Las Vegas was not the hardest because of the regulations, as almost every state has similar regulations, but they are the hardest because of the way they choose to enforce them or what is written. Ms. Stephani requested training, before they start issuing violations, be provided during the first inspection after the regulations are approved, so that food establishments have time to make adjustments. Further, Ms. Stephani asked for training on how the changes would be implemented, in regards to what violations would be written in the report and how many points or the value that comes with the violation. Ms. Stephani stated that another concern was regarding the certificate requirement for a person in charge that was written in Chapter 2, which stated that each permit holder must designate a certified person in charge be present at the food establishment during all hours of operation. Ms. Stephani indicated that that person had to take an 8-hour class or a self-study course and pass a proctored test to get certified. She indicated that there were only six approved programs in the country. As written, they could require every permit to have a certified person. This requirement also has the potential to overwhelm the options currently available, like what they were experiencing with health cards, where there were not enough appointments, especially in other languages. For example, Serve Safe is one of those six approved programs. Ms. Stephani indicated that, since the last Board of Health, they looked into the Nevada Restaurant Association and the number of classes they offer, in-person, for that. Ms. Stephani indicated that occupancy was limited and that the Nevada Restaurant Association offers one English class per month and only three Spanish classes per year in the whole city. She indicated that they have seen people taking advantage of that and overcharging for the same class. Also, Ms. Stephani indicated that they may start seeing fake certificates, like they see fake health cards where scams start to pop-up and take advance of people, especially disproportionately affecting those that are not fluent in English. Ms. Stephani indicated that they have seen high-level chefs with tremendous food safety knowledge that take the test for the certificate in other languages and fail multiple times because they do not translate well. Ms. Stephani appreciated that the Health District compromised by not applying the requirement to low-risk establishments and indicated that the current regulations did require that the person in charge by knowledgeable, but it did not require the certificate. Therefore, Ms. Stephani requested that a violation of that requirement be a core item as mentioned in the previous Board of Health meeting by Environmental Health management, meaning that with the current inspection report it would be a zero-point violation and would not affect the overall inspection grade. Ms. Stephani advised that the Board of Health previously discussed the possibility that the Health District develop a program so that industry can obtain the certificates more easily. Ms. Stephani requested that the Health District pursue that option and include different languages because that would help resolve the concerns about potential scammers, price gouging and provide more options for industry to access. Ms. Stephani

advised that, as consultants, they had been asked to offer the class and proctor the test. However, she advised that, although they would financially benefit from this, she was speaking against it because as it is written it is not the best for industry. Ms. Stephani advised that they could make every high-risk permit have multiple people certified to cover every shift and they could make each permit have a separate set of the certified people and that standard would be unrealistic. Ms. Stephani advised it would be really hard for industry and would be unreasonable to meet. Ms. Stephani concluded that they wanted to make sure that the enforcement level did not affect that and that it be applied in a reasonable manner, that was fair and took into consideration all the layers of food safety and prevention that already existed within each establishment. Ms. Stephanie concluded that they looked forward to the Board's response and thanked the Board for their time and careful consideration.

Cara Evangelista stated that Ms. Stephani was her business partner, and that they represent a lot of food permits from big and small. She commented on the agenda item of the proposed Food Regulations, Ms. Evangelista indicated that she would comment about moving forward, after the regulation was approved. Ms. Evangelista advised that the first item was that industry would like to be part of the conversation on how the new regulations would be implemented during an inspection. She requested something similar to public workshops where industry was allowed discussion with the Health District during the regulation process. Ms. Evangelista stated that, as she discussed previously, the Health was one of the hardest health departments in the country, not because of the regulation but because of how they do an inspection. For example, an inspection of a restaurant by the Health Department was an unannounced inspection and three violations could cause a B downgrade on that first inspection, which was recorded and posted to the public. As a comparison, in Maricopa County in Phoenix, which also adopted the FDA Food Code, there was first an unannounced inspection and if there was a downgrade during that inspection, there would be a second inspection appointment three days later. If there was a downgrade at that second inspection, the restaurant would receive a third inspection about seven days later. If there was a downgrade on the third inspection, then there was a downgrade recorded and posted to the public. The Health District would have one unannounced inspection with three violations and there was automatically a downgrade. In Maricopa County, you get three chances before they post that downgrade. Ms. Evangelista indicated that was one example, however the majority of jurisdictions were very similar, that the actual enforcement of the regulation with multiple inspections, including appointments with the facility, before posting the downgrade. Ms. Evangelista advised that industry requested consideration on how the new regulations were written and how many demerits a new violation costs because, while the new regulations look good and they appreciate everything and all the compromises, they do not have any concerns. It was how it was implemented during the inspection that could really affect a restaurant. Ms. Evangelista requested training sessions on all new changes, any new inspection forms and how many demerits the regulations will be counted as during an actual inspection. Ms. Evangelista thanked the Health District staff that previously stated they would provide procedures for the vomit clean-up plan. Ms. Evangelista requested other templates, for instance the new par cooking requirements, that will require new SOPs, logs and any other new procedures for easier implementation. Ms. Evangelista stated that, in 2010, during the new regulation, HACCP plans were submitted and backlogged for 2-3 years for approval. Ms. Evangelista advised that currently HACCP plans could take six months for approval. Ms. Evangelista advised that for the new HACCP exemptions for sushi rice, kimchi, masa, etc. they requested a simple exemption form and submittal process to avoid any large backlog or cease and desist. Ms. Evangelista requested, if possible, that the form be similar to the new dog patio exemption form found in the appendix of the new regulation for easy submittal. Ms. Evangelista further requested that the simple exemption be submitted to the regular inspector currently doing this to avoid a backlog. Ms. Evangelista thanked the Health District for putting the one-year implementation, as that was what they had asked for. Ms. Evangelista concluded that they requested that industry be allowed to be a part of the conversation on the new regulations and how they would be written during the inspection. Ms. Evangelista further requested training sessions for new regulations and the forms, new templates for easier implementation, simple exemption for submittal of sushi rice, kimchi, and masa, etc., to the regular inspector and the one-year implementation. Ms. Evangelista advised that industry partners wanted to thank Environmental Health staff and Ms. Sims for working with everyone during this process and all the phone calls and hoped that Ms. Sims would continue to lead the process through implementation and form development. Ms. Evangelista stated that their clients could not talk enough about Ms. Sims and how she was really trusted. Ms. Evangelista thanked everyone for the process.

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

V. ADOPTION OF THE NOVEMBER 17, 2022 MEETING AGENDA (for possible action)

A motion was made by Vice-Chair Nielson, seconded by Member Bond and carried unanimously to approve the November 17, 2022 Agenda, as presented.

- VI. CONSENT AGENDA: Items for action to be considered by the Southern Nevada District Board of Health which may be enacted by one motion. Any item may be discussed separately per Board Member request before action. Any exceptions to the Consent Agenda must be stated prior to approval.
 - 1. APPROVE MINUTES/BOARD OF HEALTH MEETING: October 27, 2022 (for possible action)
 - 2. PETITION #12-23: Approval of an Interlocal Contract between the Southern Nevada Health District and the City of Henderson to provide services to support the Southern Nevada Health District Community Partnership to Promote Health Equity, Year 5 grant awarded to the SNHD by the Centers for Disease Control and Prevention (CDC Award #NU58DP006578-05-00), referred to as Racial and Ethnic Approaches to Community Health (REACH); direct staff accordingly or take other action as deemed necessary (for possible action)

A motion was made by Member Adams, seconded by Vice-Chair Nielson and carried unanimously to approve the November 17, 2022 Consent Agenda, as presented.

- VI. PUBLIC HEARING / ACTION: Members of the public are allowed to speak on Public Hearing / Action items after the Board's discussion and prior to their vote. Each speaker will be given five (5) minutes to address the Board on the pending topic. No person may yield his or her time to another person. In those situations where large groups of people desire to address the Board on the same matter, the Chair may request that those groups select only one or two speakers from the group to address the Board on behalf of the group. Once the public hearing is closed, no additional public comment will be accepted.
 - 1. MEMORANDUM #04-23: Review, Discuss, and Approve the Proposed 2023 Food Regulations; direct staff accordingly or take other action as deemed necessary (for possible action)

Candice Sims, Environmental Health Supervisor, presented the Proposed 2023 Food Regulations. Larry Rogers, Environmental Health Manager, and Aaron DelCotto, Environmental Health Manager, were also present. Ms. Sims summarized the major changes in the proposed regulation and outlined the benefits to the industry and the implementation plan.

Further to an inquiry from the Chair, Ms. Sims provided examples of critical (handwashing, food temperatures) and priority foundation (sanitizer buckets too low, chef knowledge, not leading to food borne illness) violations.

Further to an inquiry from the Chair, Ms. Sims advised that anyone would be allowed to attend the training sessions on the implementation of the revised regulations. Ms. Sims further advised that if a facility had a large enough gathering of individuals, Health District staff would bring the training to the facility.

Ms. Sims advised that the revised regulations would be effective on May 1, 2023, and that the first routine inspection after May 1, 2023, would be educational only.

Ms. Sims expressed her thanks to Health District staff, from Environmental Health and Legal Services, along with industry and other governmental agencies for their time and collaboration and the Board of Health for their dedication and comments.

Further to an inquiry from the Chair regarding the option of the Health District providing the food manager certification, Ms. Sims advised that there was no prohibition and that the Health District would educate the public on falsified certificates.

The Chair opened the Public Comment.

Cara Evangelista thanked Chair Kirkpatrick for her comments and supported the Health District making classes, especially in other languages because then people would know it was real and they were not going to price gouge. Further, Ms. Evangelista raised the issue of fake permits and that it popped up during COVID when it got backed up. Ms. Evangelista stated that there was a special processing authority that goes with HACCP at the Health District and that the Health District releases a list of approved process authorities so, possibly, they could create a list of approved people that could proctor the test or organizations. Ms. Evangelista stated that they were okay with the process outlined for new inspections as that was how it was conducted in 2010 and they did not have problems. Ms. Evangelista stated that the people would get extra help anyway and that the inspector would set them up if they had to get another inspection because of some issues. Ms. Evangelista asked that when they do train, when they do that first inspection after May 2023, like in 2010, they actually wrote what was potentially a violation for the next inspection. Ms. Evangelista thanked the Board for their support for the new certificate.

Virginia Valentine, President of the Nevada Resort Association, started with thanking Mr. Saxton, Ms. Sims and the rest of the staff. Ms. Valentine stated that early in the process they requested a red-line version of the Food Regulations and it was quickly produced. Further, Ms. Valentine stated that they requested a side-by-side comparison which was very helpful to identify where changes were made and helped with doing their review. Ms. Valentin expressed support for Ms. Evangelista's comments regarding the time frame and CFPN's. Ms. Valentine advised that she had been told that there are many version of the Spanish language and that sometimes those translations, tests and training documents do not make sense when you try to apply those across the really diverse workforce that we were fortunate to have. Ms. Valentine stated that they concurred with the recommendations and would urge staff to confirm that permitting would have no less than a calendar year before the first inspection following the effective date of the adopted food code before the new provisions are enforced for downgrade purposes. Ms. Valentine stated that compliance was a mutual goal that everyone wanted. Ms. Valentine stated that given the scope of the changes they think that the one-year timeframe is reasonable. Ms. Valentine also encouraged a very robust training program for the new food regulations. Ms. Valentine hoped that everyone was on the same page so that we all had the same understanding and the same expectations. Ms. Valentine further asked that if there were revisions or new forms being developed that it be done in collaboration with the industry, so that they have a good understanding of what the Health District is looking for and that they may have some valuable input. Ms. Valentine stated that between the training program and the one-year grace period, she thought that those things working together were going to help everyone achieve the desired outcome, which was a safe, food and easily understood food code and one that everyone had a clear understanding of the expectations. Ms. Valentine concluded by thanking everyone for working with them during the process and for being patient with their input, especially for the early draft.

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

Chair Kirkpatrick confirmed the desire to be flexible with some of the outdoor venues and inquired as to who should be contacted if there are any questions or issues that arise. Mr. DelCotto outlined that with the special events, such as the Formula 1 and Super Bowl, he would encourage vendors to talk to them about the permitting to ensure an open conversation. Mr. DelCotto advised that any issues with the new regulations can contact him or his supervisors. Ms. Sims further advised that decisions made regarding the large events would be supervisor and/or manager decisions to keep the consistency on decisions.

Member Bond stated that there may be an opportunity to have some of the workforce involved, especially on the translation when developing materials. Chair Kirkpatrick stated that there were a

lot of schools, along with training opportunities that could be contacted to ensure that we are training correctly. Ms. Sims advised that there are currently a number of staff that speak different languages, and they could involve the industry in those conversations.

Member Segerblom left the meeting at 11:48 a.m. and did not return.

A motion was made by Vice-Chair Nielson, seconded by Member Adams and carried unanimously to approve the Proposed Food Regulations, with minor reference corrections and removal of one remaining subscript, as presented, are not implemented before May 1, 2023, followed by a one-year grace period on inspections.

VII. REPORT / DISCUSSION / ACTION

1. Presentation on the Community Health Improvement Plan (CHIP); direct staff accordingly or take other action as deemed necessary (for possible action)

Carmen Hua, Health Educator, and Dr. Timothy Grigsby, UNLV, presented on the Community Health Improvement Plan (CHIP). Ms. Hua provided an overview of the MAPP framework that was utilized for the development of the CHIP. Ms. Hua further outlined the implementation plan, steering committee, goals and process timeline. Dr. Grigsby highlighted the following four priority areas, and the goal of each priority area, that were selected by the community for the CHIP:

- 1. Chronic Disease The goal was to decrease the prevalence of heart disease, lower respiratory disease, and cancer related deaths by smoking among the identified target populations by the Chronic Disease Sub-committee (i.e., Non-Hispanic Black/African American, 65+ and by ZIP).
- Access to Care The goals were to (i) increase access to care in identified target populations by Access to Care Subcommittee (i.e., uninsured and undocumented populations), (ii) increase patient confidence in choosing primary care physicians with assistance of care coordinators, and (iii) fewer undocumented and LGBTQ+ individuals will access emergency departments (ED) for non-urgent health problems.
- 3. Transportation The goals were to (i) increase awareness of transportation options that facilitate access to basic needs and services, and (ii) increase availability of general transportation resources available to the community.
- 4. Funding The goal was to increase the Nevada's public health system's readiness and ability to be responsive to health needs of the community.

Member Diaz left the meeting at 11:59 a.m. and did not return.

Dr. Grigsby outlined the next steps of presenting the CHIP to the Public Health Advisory Board and publish on the Healthy Southern Nevada website.

Member Black left the meeting at 12:06 p.m. and did not return.

Chair Kirkpatrick requested that a list of the Health District's programs be provided to the Public Health Advisory Board.

Further to an inquiry from Member Bond on the implementation of a "free supervisor" for the mental health provider program to students, Dr. Grigsby advised that with the high cost of education there was a barrier for students to obtain a proctorship or an individual to oversee their internship and clinical hours. The CHIP committee was trying to find ways to make this barrier less impactful and harmful to those students.

Member Bond left the meeting at 12:28 p.m.

Member Nemec raised a deficiency of training programs, both for producing doctors and medical schools and post graduate residency programs, along with retention of physicians due to the intense competition from managed care groups. Member Nemec inquired as to no attention to

fentanyl overdose, seatbelt use, and other items that promoted acute illnesses. Dr. Grigsby stated that mental health/substance use was an area discussed but was not voted into the top four areas.

Member Bond returned to the meeting at 12:30 p.m.

VIII. BOARD REPORTS: The Southern Nevada District Board of Health members may identify and comment on Health District related issues. Comments made by individual Board members during this portion of the agenda will not be acted upon by the Southern Nevada District Board of Health unless that subject is on the agenda and scheduled for action. (Information Only)

As this was his last meeting, Member Adams stated that he was proud of serving on the Board of Health.

As this was her last meeting, Member Dutkowski thanked the Board of Health.

Chair Kirkpatrick requested a regional discussion on trauma, transportation, EMS and a system of care that is beneficial. Member Bond agreed.

IX. HEALTH OFFICER & STAFF REPORTS (Information Only)

DHO Comments

On behalf of Dr. Leguen, Chris Saxton, Director of Environmental Health, presented the DHO Monthly Report and Divisional Monthly Reports.

COVID-19 Surveillance and Contact Tracing Update

Matthew Kappel, Senior Epidemiologist, advised that the community transmission remained red and the case rate was green. On October 22nd, the case rate was 28.7 per 100,000 population and as of November 10th, the case rate was 41.7 per 100,000 population. On November 10th, the 7-day average for COVID-19 hospital admissions was 6.5 per 100,000 population and the percentage of in-patient beds used by COVID-19 patients was at 3.2%.

Member Nemec left the meeting at 12:41 p.m. and did not return.

Mr. Kappel advised that as of November 14th there were 3,465 COVID-19 cases, 174 hospitalizations and 38 deaths reported since the last Board of Health meeting. Between October 30th and November 12th, the 7-day average of cases per day decreased by 9.7% from 131 to 118.3 cases per day. Mr. Kappel confirmed that the true numbers were underreported due to the availability of at-home test kits. Between October 30th and November 12th, the 7-day average of hospitalizations increased by 30.6% from 17.3 to 22.6; the 7-day moving average of deaths declined by 64.3% from 2.8 to 1.0; and the test positivity decreased by 19.2% from 20.8 to 16.8. Mr. Kappel advised that the Health District had 35 in-house contact tracers and 100 contracted through March 2023. The Health District continues to support outbreak and cluster investigations in high-risk vulnerable settings and testing at three CSN locations.

X. INFORMATIONAL ITEMS

- 1. Administration Division Monthly Activity Report
- 2. Community Health Division Monthly Activity Report
- 3. Community Health Center (FQHC) Division Monthly Activity Report
- 4. Disease Surveillance and Control Division Monthly Activity Report
- 5. Environmental Health Division Monthly Activity Report
- 6. Primary & Preventive Care Division Monthly Activity Report

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

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

XII. ADJOURNMENT

The Chair adjourned the meeting at 12:46 p.m.

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

