



Mission: To protect and promote the health, the environment and the well-being of Clark County residents and visitors.

MINUTES
CLARK COUNTY HEALTH DISTRICT
DISTRICT BOARD OF HEALTH MEETING
625 Shadow Lane
Las Vegas, Nevada 89106
Clemens Room - 8:00 A.M.
Thursday, February 24, 2000

The meeting of the District Board of Health was called to order at 8:03 A.M. by Vice-Chairman Jim Crowley and the Pledge of Allegiance held. Vice-Chairman Crowley noted that she had been provided with Affidavit of Posting and Mailing of Agenda and the public notice, as required by Nevada's Open Meeting Law. The Affidavits will be incorporated into the Official Minutes.

Present:

Susan Crowley	Vice-Chairman, Henderson
Jim Christensen, MD	Physician Member At-Large
Sherry Colquitt, RN	Appointee, Las Vegas
Alice Fessenden	Appointee, Mesquite
Joseph Hardy, MD	Councilman, Boulder City
Mary Kincaid	Commissioner, Clark County
Donalene Ravitch, RN	Appointee, Boulder City
Gary Reese	Councilman, Las Vegas
Stephanie Smith	Councilwoman, North Las Vegas

Absent:

Paula Brown	Chairman, North Las Vegas
Amanda Cyphers	Councilman, Henderson
Paul Henderson	Councilman, Mesquite
Erin Kenny	Commissioner, Clark County

Executive Secretary:

Donald S. Kwalick, MD, MPH

Legal Counsel:

Ian Ross, Esquire

Staff: David Rowles; Michael Naylor; Clare Schmutz; Fran Courtney, RN; Jane Shunney, RN; Rose Bell, PhD; Karl Munninger; Mike Sword; Ed Wojcik; LaRue Scull; Glenn Savage; Harold Glasser; Art Bashor; recording secretaries, Diana Lindquist and Montana Garcia

PUBLIC ATTENDANCE:

<u>NAME</u>	<u>REPRESENTING</u>
Larry Johnson	Valley Hospital
Karla Perez	Valley Hospital
Teri McGuinness	City of North Las Vegas
Dick Serdoz	Nevada Department of Environmental Protection
Gina Stoneking	Nevada Department of Agriculture
Jennifer Simich	Republic Silver State Disposal
Steve Strawn	Environmental Technologies
Joe Paulk	New-Com, Inc.
Jennifer Powers	Clark County School District
James Sohns	Nevada Car Owners Association
Lara Carver	Clark County School District
Robert W. Hall	Nevada Environmental Coalition
Roy Theiss	City of Boulder City
Eric Beiningger	CCLS
Gina Kaczman	Self
Ken Kaczman	Self
Fred Couzens	Self

I. CONSENT AGENDA:

These are matters considered to be routine by the District Board of Health and which may be enacted by one motion. Any item, however, may be discussed separately per Board Member request before action. Any exceptions to the Consent Agenda must be stated prior to approval.

Vice-Chairman Crowley stated that Staff requested the removal of *Petition #05-00, Installation and Operations of Hydrogen Sulfide Monitoring Stations for the City of Henderson and the Clark County Sanitation District*, and; *Petition #07-00, Approval of Burgundy Group Software Consultants to Perform Complex Oracle Database Software Conversion of Current VAX-VMS Immunization Application*, which will be scheduled at a later date.

Vice-Chairman Crowley remarked that she would abstain from voting on the Consent Agenda due to a Conflict of Interest on Memorandum #03-00. Member Christensen disclosed in reference to *Petition #08-00*, that one of his nurse practitioners works at UMC and her time is reimbursed through the Ryan White Care Act not necessarily Ryan White I. Also in reference to #10-00, a family member worked at Valley Hospital one day a week.

*Member Smith moved for approval of the Consent Agenda with *removal of *Petition # 05-00 and #07-00*. Motion was seconded by Member Ravitch and carried with Member Crowley abstaining on Memorandum #03-00.*

- 1. Minutes/Board of Health Meeting - 01/27/00**
- 2. Payroll/Overtime for Periods of: 12/25/99 - 01/07/00 & 01/08/00 - 01/21/00**
- 3. Accounts Payable Register - #775: 12/17/99 - 01/0600 & #776: 01/07/00 - 01/20/00**
- 4. * Petition #05-00 – ~~Installation and Operations of Hydrogen Sulfide Monitoring Stations for the City of Henderson and the Clark County Sanitation District~~**

5. **Petition #06-00** - Revised Health Card Fee and Expiration Date for Child Care and Adult Group Care Workers
6. * ~~**Petition #07-00** - Approval of Burgundy Group Software Consultants to Perform Complex Oracle Database Software Conversion of Current VAX-VMS Immunization Application~~
7. **Petition #08-00** - Ryan White Title I AIDS Service Awards for Fiscal Year 2000/2001 - \$2,540,807 Recommended for 13 Agencies
8. **Petition #10-00** - Selection of Valley Hospital to Provide X-ray Services on a Fee for Service Basis
9. **Petition #11-00** - Particulate Matter Emission Control Research Advisory Committee Vacancy/Recruitments
10. **Memorandum #03-00** - Proposed Basic Remediation Company (BRC) Landfill

II. **PUBLIC HEARING/ACTION**

No Public Hearings Scheduled

III. **REPORT/DISCUSSION/ACTION**

1. **Presentation of Africanized Bees** by Gina Stoneking, Nevada Department of Agriculture (Dr. Hardy Requested Item)

Gina Stoneking stated that the Africanized honey bees (AHB) are temperamental relatives of the common garden honey bee known as the European honey bee. They defend their colonies more intensively and with less provocation than other bees. The AHB was first introduced into Brazil in 1956 in an attempt to upgrade honey production. The bees were accidentally released and have been steadily moving north every since. The AHB crossed the United States border into Texan in 1990. Surveys released that the AHB is traveling north and west in the United States. Thus far the AHB has been detected in Texas, New Mexico, all counties of Arizona, Southern California and entered Nevada in the spring of 1998.

In Nevada the AHB can be found in all of Clark County and Southern Nye County. The Nevada department of Agriculture is continuing to monitor the northward movement of the AHB by maintaining a trapline in Lincoln, Nye, Mineral and Lyon Counties. The northward movement of the AHB will be limited to temperature because of their tropical nature.

Africanized honey bees look just like the common European honey bee. Only a lab analysis can tell them apart. Both bees have the same sting. It is the number of stings received that poses the threat. Foraging honey bees, gathering food and water, are not defensive and do not pose as much of a threat as the entire colony of honey bees. At certain times of the year, part of the colony separates from the rest and flies out looking for a new home. While on the move, the bees are called a "swarm." The bees are no defensive at this time if left alone.

Citizens reporting honey bee colonies or swarms are referred to a professional pest control company. The Southern Nevada Pest Control Association has a hotline telephone #385-5853. There is a new "bee control" entry in the Yellow Pages of the Sprint Telephone Directory. Bees on public property are reported to the respective authority for control. Legislatively appropriated funds have been provided to the Nevada Department of Agriculture for the control of AHB and

Imported Fire Ants. Control is conducted by sub-contracted pest control companies for circumstances which warrant the Nevada Department of Agriculture's intervention.

The best way to avoid a stinging incident is to avoid honey bee colonies and prevent them from establishing in the urban yard. In the event that a colony is disturbed and bees start to attach, *run away and seek shelter* and notify emergency personnel by calling 911.

Beekeepers have their bees under quarantine. The area under quarantine includes all of Clark County and Southern Nye County. This quarantine requires:

- Notification of all beekeeping activities with the quarantine zone
- All movement of honey bee colonies out of the quarantine zone be certified as non-Africanized
- That all honey bee colonies that are found to be Africanized with the zone be requeened with a non-Africanized queen

Beekeepers requeen their hives by taking out the queen every year to be tested. If the queen has any Africanized genes at all she will not be able to produce them within a year. At this point, the beekeeper will take the queen out and put a new queen in the hive from a non-Africanized zone, such as ordering a new domicile European variety queen from New Jersey or Montana. This yearly method will ensure that the queen will be producing European babies no matter what. The bee keepers are pretty much trustworthy.

Numerous presentations, workshops, school assemblies and fair booths have been conducted to promote AHB awareness and community preparedness. This includes 30 second television public service announcement and radio information that is being aired within the Southern Nevada communication media. Also, glossy colored brochures have been produced in cooperation with the Las Vegas Convention and Visitor's Authority.

Further discussion ensued between Gina Stoneking and Board Members concerning the bees. The dominate gene comes through the queen bee and is determined by whether she has mated with a European or Africanized drone. The queen goes out on only one mating flight and she will mate with drones that are not in the hive. Once the drones have mated they die. If the queen mates with Africanized drones she will have Africanized bees.

It is estimated that about 75% of the bees in Las Vegas or in Southern Nevada are Africanized at this point. As far as wild hives, it is estimated that there are approximately 160 wild bee hives in the community. Generally when the Africanized bee enters a new zone, in approximately two to three years all of the honey bees in the area would be Africanized. It is something that the community is going to have to learn to live with. The best way for the Department of Agriculture to handle the situation at this time is through education and training.

Honey bees are good for the community. One meal a day comes from honey bee pollination. The Africanized bees do produce honey, pollinate and do everything that other bees do which is important for the Southern Nevada area. Since the community needs bees, the Africanized bees are sort of a blessing for pollination. There is also a danger because they can be public health threat. The Africanized bees have been responsible for seven deaths nationwide. However, European bees can be just as aggressive at times and have also caused deaths in sensitive individuals.

IV. CITIZEN PARTICIPATION

Vice-Chairman Crowley stated that items raised under this portion of the Agenda cannot be acted upon by the Board of Health until the notice provisions of Nevada's Open Meeting Law has been complied with. Therefore any action on such items will have to be considered at a later meeting.

Vice-Chairman Crowley asked if any member of the public wished to be heard.

Robert Hall representing the Nevada Environmental Coalition expressed concern that the Board Members may not know what is really going on with air quality issues. He stated that the environmental community was prepared to make a strictly factual presentation to the Board Members from A to Z on what they have learned over the past four years. Suggestions would be made as to how the issues could be resolved. The first one would be to do an audit of the Air Quality Division, in particular on the local Offset Credit Program. The second situation had to do with a letter he had received from the Board Chairman asking that he make 15 copies of information that he wanted submitted to the Board. Mr. Hall indicated that he would make one copy available. Concern was also expressed on the District charging \$431 for records of which \$350 was research time when the documents should have been readily available to the investigators to make copies.

District staff has asked the Board Members to approve a fee for copies to the public. He remarked that this was creating a wall between the Board and the public and it is meant to keep the environmental community out. The solution or alternative to this problem is to sue the Board and subpoena the documents. The environmental community would rather not take this course of action. He stated that there was great respect for Dr. Kwalick and his staff, however, there is an extreme concern about the administration at the District. He indicated that he had been in touch with legal counsel in Washington, D.D. concerning issues here at the District. He asked the Board to consider his request and take 4 to 6 hours to allow the environmental community to present the evidence they have to the Board.

In reference to fluoride, he suggested that the Board and staff proceed with caution. He recommended that the Board Members look at the International Journal of Fluoride on the web at www.fluoride-journal.com. Information on this site has literature from respected prestigious scientific journals around the world including the Journal of American Medical Association and the Journal of the American Dental Association. Also, suggested was another site on the web, nofluoride.com. He presented a revision of his report on the Clark County Health District for staff to distribute to the Board Members.

James Sohns, President of Nevada Car Owners Association and also a member of the Nevada Environmental Coalition expressed concern about *Petition #07-00, Approval of Burgundy Group Software Consultants to Perform Complex Oracle Database Software Conversion of Current VAX-VMS Immunization Application*. Contact was attempted with the Burgundy Group at the address in Gilbert, Arizona. No contact was available. In checking with the Gilbert Library the reference to the address that was given for the Burgundy Group does not come up under the spelling of Burgundy Group.

Corporate papers filed with the Secretary of State on 10/1/98 gives a West Oxford address and they are not at that address either. A little change in named to Burgandy came out at 3660 E. University, Mesa, Arizona. Through a telephone call to a gentleman by the name of John Pace resulted in indication that Patrick Dennis McCormick and Douglas Lawrence worked for them. However, some questions need to be asked. According to the paperwork, is it completed after the \$249,040? Or, is this going to be a ongoing thing? The paperwork says software but to get into the web you need hardware. Where is the hardware is the issue? Will Mr. Rowles furnish a list of other companies who can perform this task? There are other companies in town that could do this very same thing at a more reasonable cost than \$249,000 and change. What makes this group have unique

qualifications to be the only ones to do this? I understand this is how Oracle make their money. In talking to different people what I have learned is that one step comes in, then another step is needed and so on. They sell purchasing connections which can get very expensive. Is this something that is going to have a price tag of about 5 million dollars when it is done? Why the different organization names? For this reason and several others he asked that the Board, as representatives of the community, take a closer look at these issues.

Vice-Chairman Crowley explained that normally the Board does not have to respond to comment right away. However she informed Mr. Sohns that the items had been pulled from the Consent Agenda in order to allow for further review.

Vice-Chairman Crowley asked if any one else wished to speak. There was no response.

V. HEALTH OFFICER & STAFF REPORTS

1. Dr. Kwalick, Chief Health Officer

Dr. Kwalick commented that Dr. Rose Bell would be giving a brief report on the Influenza Surveillance Project. He commended staff from the Epidemiology office for the hard work they have put into the project.

2. Dr. Bell, Epidemiology Manager

Dr. Bell, Epidemiology Manager, also thanked the staff from the Epidemiology section for their hard work and gave a brief overview on influenza and surveillance.

Influenza is a highly contagious respiratory illness. Spread is person to person by droplets. Symptoms include fever, cough, sore throat, fatigue, muscle aches, headache, runny nose and watery eyes. The incubation period is 1 to 3 days. The period of infectivity is 3 to 5 days in adults and up to 7 days in children. The usual recovery time is 1 to 2 weeks. Serious complications such as pneumonia may occur. Annually influenza causes 20,000 deaths and 100,000 hospitalizations nationwide.

There are three types of influenza: A and B which causes annual winter epidemics and C which may cause sporadic mild infections. Viruses mutate continually, which is why having the flu the year before may not confer immunity to the next year's influenza and is why the vaccine is changed yearly. That is the reason individuals must get a shot every year. However, vaccination is the primary method of prevention. It is safely prepared from inactivated viruses and offers 70 to 90% effectiveness in health adults, which is why one individual will say every now and then that they had the flu but had been vaccinated. Generally, these individuals have another virus or bacterial illness, but they could actually have had influenza but had received the vaccine. In the elderly, effectiveness is lower but does reduce complications. The risk of infection is often reduced by frequent hand washing and avoiding contact with infected persons.

Surveillance – Public health surveillance is the ongoing, systematic collection, analysis, interpretation, and dissemination of health data. The health data includes reports from health care providers, laboratories, schools and sales of anti-diarrheal medications which can give an indication that an outbreak might be occurring in the community. There are two major types of disease surveillance: Passive Surveillance which is that data obtained through provider initiated reports and Active Surveillance where data is obtained through health department solicited reports. The Health District is working with the Centers for Disease Control and Prevention (CDC). The CDC in turn are collaborating with the World Health Organization in the U.S. Influenza Sentinel Physician Surveillance Network. The program objective is to monitor influenza-like illnesses which is defined as a fever of 100 degrees or greater, with a cough or sore throat that is not due to another diagnosis such as strep throat. The program goals are to

characterize the prevailing strains in the community, measure the impact of disease and to disseminate information back to health care providers and the public. The program components consist of weekly reports by providers of patients meeting influenza-like illness criteria and for the total number of patients seen. This enables staff to calculate the percentage of influenza-like illness cases for that week. A limited number of throat cultures are collected to confirm and identify the strain and to determine if the strains are in the current vaccine. This helps CDC to plan next year's vaccine. Staff also reviews death certificates to look at the percentage of deaths due to pneumonia because they are frequently related to influenza. Reported outbreaks are also monitored.

The U.S. Influenza Surveillance System is divided into 9 regions. The mountain region in which Nevada falls has the largest land area, but not the largest population. Clark County makes up almost a third of the whole mountain region reporting sites. There are 19 sentinel sites including emergency rooms, hospitals, urgent cares, group, schools, and private practice physicians. These sites have a patient base of approximately 8,400 a week. Staff plans to expand the District's active surveillance system, to include a gastrointestinal illness component, to develop an "ALERT" network and have an internet information web site.

Dr. Bell handed out a copy of a brochure on the Control and Prevention of Communicable Disease in group care settings.

3. Jeanne Palmer, Health Education and Information Manager

Jeanne Palmer informed the Board Members that the Clark County Health District had received the 1999 Safe Kids Coalition Community Angel Award for the drowning prevention program. Health Education staff developed the materials and distributed them to hospitals, pediatrician's offices all over the community. Drowning in this community is an important and serious problem. Last year there were 10 drownings and 52 near drownings in Clark County. These numbers reflect those incidents that were visited by emergency system providers, so the number could be more. A more extended campaign is planned for the spring.

4. Michael Naylor, Air Quality Division Director

Michael Naylor commented that the Las Vegas Valley has experience excellent air overall this calendar year. The rain will help to keep the PM10 down for a couple of months. Also, there have been low levels of carbon monoxide. The carbon monoxide season is over so there will not be much carbon monoxide until approximately next November. Staff has been diligently working on regulations to address the control of dust from disturbed vacant land. A draft regulation entitled Regulation 46 is being developed to control dust on vacant lots, open areas, unpaved parking lots, unpaved roads. Also at the request of the County, a category will be added on easements and possibly on unpaved road shoulders.

He briefly explained that the workshop conducted on February 23, 2000 in the vacant land rule, was well attended by approximately 40 people. It featured an appearance by Jo Crumbaker, Director of Planning and Analysis for the Air Division in Maricopa County. Maricopa County's vacant land rules are actually replacing a rule that is currently in force by the EPA. The EPA has had a vacant land rule in effect since 1998. Maricopa County is advancing a rule that they hope will replace the federal rule and the latest version had been adopted a week earlier. The version that Clark County presented at the workshop is modeled very closely from the latest Maricopa County rule. Maricopa County has cooperatively worked with EPA to develop an approvable rule. Staff will keep the Board apprized as public hearings are forthcoming.

Dames and Moore is preparing a best management practices to assist construction site employees with implementing better dust control procedures. The report is expected to be finalized in March and it will be distributed to the Board at that time.

5. David Rowles, Administrative Services Director

David Rowles explained that staff is attempting to arrange meetings with an architect to prepare some preliminary drawings for the Board to vote on in terms of constructing a free standing approximately 3,700 square foot TB clinic on the South perimeter of the main health center where the newly purchased property is located. The current TB clinic is little more than 1,500 square feet. With the current TB caseload there is concern of being able to treat the clients in a timely manner. The most adequate use of that property would be to put a free standing clinic there and to demolish the current residences which are in various stages of disrepair. Staff will be coming back to the Board for approval for an architect to design final blueprint drawings, then go out to bid and bring the bids back to the Board for approval. Also, staff will also be asking for the Board's concurrence next month for the architect to design a two-story warehouse building to replace the current one. This will almost double the size of current storage. The current metal building will be demolished to allow for additional parking spaces.

In regard to Health Card data, during January and February, there were 10,377 health card clients served. This is approximately 800 more than served in 1999.

Staff is continuing to pursue the University of Nevada, Reno in regards to the Small Business Assistance Program.

6. Fran Courtney, Nursing and Clinics Director

Fran Courtney, RN announced that effective March 1, 2000 the water supply will be fluorinated. A celebration will be a tap water toast at the Community College of Southern Nevada at the West Charleston Campus beginning at 11:30 a.m.

VI. INFORMATIONAL ITEMS

Duly Noted

1. Financial Data - Revenues, Expenditures, and Cash Flows for Fund 705 (Operating), 706, (Capital Reserve), and 762 (Liability Reserve) for the Month of January
2. Listing of Food Establishments in Plan Review for the Period of 01/01/00 to 01/31/00 Environmental Health Division
3. Emergency Medical Services Board Meeting Minutes and 01/05/00 Annotated Agenda
4. Air Pollution Control Reports:
 - a) Air Pollution Control Hearing Officer Annotated Agendas
 - b) Monthly Report , January 2000 (Air Quality, Enforcement Activity, Permitting, Source Compliance, Regulation Development and Legislative Wrap-Up)
5. Home Health Service/Transitional Care Advisory Board Meeting Minutes
6. Letter from United States Department of Health and Human Services, Office of Inspector General and Audit Services on the Clark County Health District Audit Report for the Period of July 1, 1998 through June 30, 1999
7. Staff Recognition: Letters of Appreciation

VII. ADJOURNMENT

There being no further business to come before the Board, Vice-Chairman Crowley adjourned the meeting at 9:15 a.m.

SUBMITTED FOR BOARD APPROVAL

Donald S. Kwalick, MD, MPH, Chief Health Officer
Executive Secretary

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