



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

Thursday, June 27, 2002 - 8:00 A.M.

Chairman Crowley called the meeting of the District Board of Health to order at 8 a.m. and the Pledge of Allegiance was held. She noted that she had been provided with the Affidavits of Posting and Mailing of Agenda meeting notices, as required by Nevada's Open Meeting Law. The Affidavits will be incorporated into the Official Minutes.

Board Members

Present:

Susan Crowley	Chairman, Henderson
Gary Reese	Councilman, Las Vegas
Jim Christensen, MD	Physician Member At-Large
Sherry Colquitt, RN	Appointee, Las Vegas
Robert Eliason	Councilman North Las Vegas
Paul Henderson	Councilman, Mesquite
Erin Kenny (telephonically)	Commissioner, Clark County
Steven Kirk	Councilman, Henderson
Stephanie Smith	Councilwoman, North Las Vegas

Absent:

Donna Fairchild	Councilwoman, Mesquite
Joseph Hardy, MD	Councilman, Boulder City
Chip Maxfield	Commissioner, Clark County
Donalene Ravitch, RN	Appointee, Boulder City

Executive Secretary:

Donald S. Kwalick, MD, MPH

Legal Counsel:

Stephen Minagil, Esquire

Staff: Clare Schmutz; Karl Munninger; Jane Shunney, RN; Dr. Joe Heck; Angus MacEachern; Ed Wojcik; Rose Bell; Maureen Fanning; Jeanne Palmer; Jennifer Sizemore; Sandra Schulz; Shannon Randolph; Eddie Ridenour; Forrest Hasselbauer; Darrell Irick; Leo Vega; and Recording Secretaries Diana Lindquist and Montana Garcia

ATTENDANCE:

<u>NAME</u>	<u>REPRESENTING</u>
Todd Jaynes	MFR
Fred Couzens	Las Vegas Mercury

I. CONSENT AGENDA

These are matters considered to be routine by the District Board of Health and 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.

Chairman Crowley explained that staff had requested to modify Item #7 - Petition #27-02, *Revision of District Administrative, Public Record and Medical Services Fee/Reimbursement Schedules for Fiscal Year 2002-2003* by dropping the changes to the Emergency Medical Services Fee Schedule and addressing them at another time.

Member Smith moved for approval of the Consent Agenda with the recommended changes. Motion was seconded by Member Reese and carried unanimously.

1. Approve Minutes/Board of Health Meeting - 05/23/02
2. Approve Payroll/Overtime for Periods of: - 04/27/02 – 05/10/02
3. Approve Accounts Payable Register - #831: 04/22/02 - 05/03/02; #832: 05/06/02 – 05/20/02
4. Petition #24-02 - Amendment to the Interlocal Agreement with Clark County Social Services (CCSS) for Up to \$268,732 in Social Worker Case Manager Services to Health District HIV Positive Patients (*Annual Renewal*)
5. Petition #25-02 - Request to Set a Public Hearing Date of August 22, 2002 to Adopt Regulations Governing Family/Group Care Homes and Child Care Centers
6. Petition #26-02 - Interlocal Contract with Clark County for Public Health Nurse Liaison Services for Child Protective Services
7. Petition #27-02 - Revision of District Administrative, Public Record and Medical Services Fee/Reimbursement Schedules for Fiscal Year 2002-2003
8. Petition #28-02 - Resolution #02-02 - Adjustments to Fiscal Year 2001-2002 Appropriations
9. Petition #30-02 - New Classification Specification to Allow Recruitment of Staff For Bioterrorism Preparedness Activities
10. Petition #31-02 - New Classification Specification for the Nursing Division

II. PUBLIC HEARING/ACTION

- 1. Memorandum #09-02** - Public Hearing to Consider/Adopt Amendments to District Emergency Medical Services (EMS) Regulations. All Sections of the Regulations are being amended with the exception of Section 1800 "Disciplinary Action".

Chairman Crowley opened the public hearing.

Dr. Kwalick introduced, Jane Shunney, RN, Assistant to the Health Officer and Acting EMS Program manager who briefly explained that staff has attempted to update the regulations over the past several months. Additionally, four public workshops have been conducted in the last several months which Dr. Heck chaired.

Dr Heck, EMS Operational Medical Director briefly reviewed and summarized the proposed changes which were undertaken over the past 8 months and have been the most comprehensive changes since the regulations were originally written. The reason for the major overhaul is that over the course of several years there have been a lot of intermittent changes that have resulted in regulations conflicting with each other or not keeping up with the changes in the Nevada Revised Statutes (NRS) and/or the Nevada Administrative Code (NAC). All the stakeholders involved and entities were represented at the four public workshops. The current proposed regulations represent the collaborative efforts and consensus from the staff, entities, stakeholders and the Medical Advisory Board.

The entire regulation manual has been reorganized so that it has a more logical flow which will take the individual through a step-wise process starting with training, certification, licensure and then to permitting. Some basic definitions were changed or added to keep in line with the different terms that are being utilized in the EMS industry throughout the country. The proposed changes include a clear delineation between certification and licensure. One change that had to be added because of a requirement of the NRS, is that for anyone to enter a paramedic level training program they must be employed by an agency that allows them to provide paramedic level care. Staff and the state EMS Office recognize this as a problem and plan to go before the next legislative session to ask that the requirement be taken out of the statutes such that the NRS will enable an individual to enroll in the paramedic program without being an employee of an Advanced Life Support (ALS) service. Staff also removed a requirement for each provider to have merit badges, Advanced Cardio Life Support, Pediatric Advanced Life Support and Cardiopulmonary Resuscitation (ACLS, PALS, CPR) to show that they are competent. In the past Staff has required the client to have these cards current at all times. This has resulted in a huge logistical burden on the EMS clerical staff who were sending out a 30 day letter to approximately 2800 certified providers when they were coming close to their cards expiring. The National Registry of Emergency Medical Technicians only requires that an individual, at the time of certification, show proof of a current card. Therefore, the agency will be responsible to ensure that their individuals stay current. The recertification process has also changed. The District will only initially certify those individuals who are trained in Clark County and will recertify only those who continue to live or work in the community. A new requirement section for the licensing of air ambulances has been added to the licensure section. Since there is no statutory authority for the District to issue a temporary license for EMS, it has been deleted and reworded to provide for a provisional license as required by the statutory authority.

The background check process on individuals will be changed to indicate as approved by the Chief Health Officer in order to allow a more comprehensive background check on potential EMS attendants. Specific provisions have been incorporated in the separate sections on each level of provider that stipulate no individual can function independently. Separate subsections on special purpose permit and critical care transport services were clearly defined. A section on

air ambulance services was added with certain requirements. Also added was a requirement for employers and certificate holders to notify the District EMS office if there has been any corrective action taken against an employee for any EMS related activity. Due to significant changes in the NRS, the Do Not Resuscitate section of the regulations has been completely rewritten.

Brief discussion followed as Member Christensen asked about global competence by a direct observer. Dr. Heck explained that upon completion of the initial training program a written certification exam, and depending on the level of certification, a protocol exam is administered and a skills check list is completed. Every two years for recertification attendants are required to submit documentation of a certain number of hours of continuing education in addition to re-demonstrating their skills to a certified EMS instructor. Paramedics are required to do a field internship when they complete their initial training program. Staff also conducts periodic case reviews. It is especially difficult in the EMS system to do outcome analysis or studies with the difficulties of getting informed consent in the EMS system. This is a big issue that EMS systems around the country are faced with. Through the Quality Improvement (QI) process targeted issues are picked that each agency evaluates for a given period of time and that information is brought back to the monthly QI meeting for review to see how the system is working as whole to take care of the particular issue.

Chairman Crowley asked if any member of the public wished to speak. There was no response.

Member Reese moved to follow Staff's recommendation with all conditions to approve amendments to the District EMS Regulations. Motion was seconded by Member Smith and carried unanimously.

III. REPORT/DISCUSSION/ACTION

1. Board of Health Legal Counsel Contract Review Committee Report/Recommendation

Member Colquitt commented that the committee had met to review Mr. Minagil's contract and for his outstanding service to CCHD over the past 2 years, and moved to approve the following recommendations:

- a. Extension of Legal Counsel contract to June 30, 2004
- b. Hourly increase from \$178 to \$196 per hour effective June 30, 2002
- c. Hourly increase from \$196 to \$200 per hour effective June 30, 2003
- d. Automobile Allowance of \$100 monthly

After brief discussion concerning the effective dates being June 30th instead of July 1st, Member Colquitt amended her motion to change the dates to reflect July 1st of the following dates:

- a. Extension of Legal Counsel contract to July 1, 2004
- b. Hourly increase from \$178 to \$196 per hour effective July 1, 2002
- c. Hourly increase from \$196 to \$200 per hour effective July 1, 2003
- d. Automobile Allowance of \$100 monthly

Motion was seconded by Member Smith and carried unanimously.

IV. CITIZEN PARTICIPATION

Citizen participation is a period devoted to comments by the general public about matters relevant to the Board's jurisdiction. 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, no vote may be taken on a matter not listed on the posted agenda and any action on such items will have to be considered at a later meeting.

Chairman Crowley asked if any member of the public wished to be heard on subjects that are relevant to the Board's jurisdiction. There was no response.

V. HEALTH OFFICER & STAFF REPORTS

Dr. Kwalick introduced Clare Schmitz to give an update on the status of the recycling regulations and applications.

Clare Schmutz gave a brief report on the Solid Waste Hearing Officer process. During the June 19th meeting, the Hearing Officer heard 21 cases. Of those 21, all were settled or adjudicated for a total of \$29,250 in fines. To date there have been four Hearing Officer sessions. Sixty cases have been heard with a total of \$95,670 in penalties levied and \$47, 770 collected. This money will remain with the Health District to be used in the recycling and solid waste programs.

He reported that recycling regulations adopted in December 2001 gave companies interested in the recycling business until May 24, 2002 to submit applications. Eighteen (18) companies submitted applications that met the deadline.

Staff has reviewed nine of these applications and sent discrepancy letters back to the individuals. Staffs review of the remaining nine applications is in process. The applications are checked for their jurisdictional compliance. After staff deems them complete, an inspection of the facility will be conducted and the applications submitted to the Board of Health for final approval.

He announced that on June 14, 2002, the State Board of Health adopted regulations governing private and public schools.

Dr. Kwalick commented the District has been approved by the Centers for Disease Control for \$3.8 million dollars in bioterrorism funds with \$2.3 million of those funds earmarked for a Southern Nevada Public Health Laboratory.

VI. INFORMATIONAL ITEMS

Duly Noted

A. Board of Health:

1. Access to Care Resolution and Congressional Delegation Letter

B. Chief Health Officer & Administration:

1. Mid May 2002 - Mid June 2002 Monthly Activity Report
2. Financial Data - Revenues and Expenditures for Fund 705 (Operating), 706 (Capital Reserve), and 762 (Liability Reserve) for the Month of May 2002
3. Emergency Medical Services Medical Advisory Board Annotated Agenda, May 2002
4. Health Education May 2002 Monthly Report
5. Epidemiology May 2002 Monthly Report
6. Public Information May 2002 Report
7. Clark County Department of Air Quality Management Monthly Activity Report, May 2002

C. Environmental Health:

1. May 2002 Monthly Activity Report
2. Listing of Food Establishments in Plan Review for the Period of 05/01/02 to 05/30/02
3. Letter of Appreciation

D. Nursing and Clinics:

1. May 2002 Monthly Activity Report

VII. ADJOURNMENT

There being no further business to come before the Board, Chairman Crowley adjourned the meeting at 8:30 a.m.

SUBMITTED FOR BOARD APPROVAL

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

/mg