



MINUTES

Southern Nevada District Board of Health Meeting
330 S. Valley View Boulevard, Las Vegas, Nevada 89107
Conference Room 2
Thursday, August 22, 2013 - 8:30 a.m.

Rod Woodbury, Chair, called the meeting of the Southern Nevada District Board of Health to order at 8:38 a.m. and led with the pledge of allegiance. Annette Bradley, Legal Counsel, confirmed the meeting had been noticed in accordance with Nevada's Open Meeting Law.

Annette Bradley noted a quorum was present at the start of the meeting with Members Giunchigliani, Jones, Litman, Marz, Nelson, Nemec, Noonan, Scow, Tarkanian, Woodbury and Wood seated.

BOARD:
(Present)

Rod Woodbury – Chair, Councilmember, City of Boulder City
Chris Giunchigliani - Commissioner, Clark County
Timothy Jones – At-Large Member, Regulated Business/Industry
Allan Litman – Councilmember, City of Mesquite
John Marz – Councilmember, City of Henderson
Marietta Nelson – At-Large Member, Physician
Frank Nemec – At-Large Member, Physician
Bill Noonan – At-Large Member, Gaming
Mary Beth Scow – Chair, Commissioner, Clark County
Lois Tarkanian - Councilmember, City of Las Vegas
Lori Winchell - At-Large Member, Registered Nurse
Anita Wood – Councilmember, City of North Las Vegas

(Absent)

Bob Beers – Councilmember, City of Las Vegas
Susan Crowley – At-Large Member, Environmental Specialist
Wade Wagner - Councilmember, City of North Las Vegas

ALSO PRESENT:
(In Audience)

Douglas Dobyne – At-Large Alternate, Regulated Business/Industry

LEGAL COUNSEL: Annette Bradley, Esq.

**INTERIM EXECUTIVE
SECRETARY:** John Middaugh, M.D.

STAFF: Heather Anderson-Fintak, Mary Ellen Britt, Ray Chua, Richard Cichy, Dr. Thomas Coleman, Margarita DeSantos, Cara Evangelista, Elaine Glaser, John Hammond, Forrest Hasselbauer, Rose Henderson, Kaci Hickox, Amy Irani, Mars Patricio, Rick Reich, Brian Riddle, Patricia Rowley, Jane Shunney, Jennifer Sizemore, Bonnie Sorenson, Leo Vega, Dr. Nancy Williams; Valery Klaric and Jacqueline Wells, Recording Secretaries.

PUBLIC ATTENDANCE:

NAME

Kim Doldan

REPRESENTING

St. Rose Hospital

RECOGNITION OF SERVICE:

Chair Woodbury and the Board members recognized Dr. Middaugh for his hard work, dedication, and professionalism to the District, Board and community as Interim Chief Health Officer (CHO) for the past year.

- I. 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 step up to the speaker's podium, 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 Chairman or the Board by majority vote.

Cara Evangelista, SEIU Chief Steward of the General Unit, thanked Dr. Middaugh for helping the employees of the District at a rough time. Cara recalled that shortly after being appointed as Interim CHO, Dr. Middaugh met with Environmental Health staff and talked about issues that existed in that division. Cara stated that Dr. Middaugh is a great leader and will be missed and added that the employees are committed to work with next CHO, hoping to create the same relationship.

Seeing no one else, the Chair closed Public Comment.

II. ADOPTION OF THE AUGUST 22, 2013 AGENDA (for possible action)

The Chair called for a motion to adopt the agenda for the August 22, 2013 meeting as presented.

Motion made by Member Scow seconded by Member Jones and unanimously carried to adopt the August 22, 2013 Board of Health meeting agenda as presented.

- III. 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 MEETINGS:** July 25, 2013, July 30, 2013 and August 15, 2013 **(for possible action)**
- 2. PETITION #21-13:** Approval of new classification specifications for Records Information Management Supervisor; Senior Management Analyst; Senior Clinical Laboratory Scientist; direct staff accordingly or take other action as deemed necessary **(for possible action)**
- 3. PETITION #24-13:** Approval of revised classification specifications for Emergency Medical Services and Trauma System Manager; direct staff accordingly or take other action as deemed necessary **(for possible action)**
- 4. MEMORANDUM #07-13:** Request for Approval of Renewal of Authorization of Sunrise Hospital Medical Center as a Level II Trauma Center for the Treatment of Trauma; direct staff accordingly or take other action as deemed necessary **(for possible action)**
- 5. MEMORANDUM #08-13:** Request for Approval of Renewal of Authorization of St. Rose Dominican Hospitals – Siena Campus as a Level III Trauma Center for the Treatment of Trauma; direct staff accordingly or take other action as deemed necessary **(for possible action)**

Member Giunchigliani clarified through Dr. Middaugh and Mary Ellen Britt, Acting Emergency Medical Services and Trauma System Manager, that there were no internal changes submitted in Memorandums #07-13 and #08-13.

Motion by Member Giunchigliani seconded by Member Litman and unanimously carried to approve the Consent Agenda as presented.

- IV. 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.

There were no items to be presented.

Motion by Member Giunchigliani seconded by Member Winchell and unanimously carried to enter into Closed Session at 8:51 a.m.

v. **CLOSED SESSION – To Be Held Following the Public Hearings**

Go into closed session pursuant to NRS 241.015(2)(b)(2), to receive information from the Southern Nevada Health District's attorney regarding potential or existing litigation involving matters over which the Board has supervision, control, jurisdiction or advisory power and to deliberate toward a decision on the matter; **(for possible action)**

The Chair reconvened the Open Session at 9:50 a.m.

VI. **REPORT/DISCUSSION/ACTION**

1. **PETITION #23-13:** Request for Approval of Revision to Southern Nevada Health District Nursing Services Immunization Fee Schedule; direct staff accordingly or take other action as deemed necessary **(for possible action)**

Elaine Glaser, Director of Administration, explained the current fee schedule had been reviewed with the Affordable Care Act in mind. There are subtle changes and still no one is turned away due to inability to pay. Ms. Glaser added that District fees were compared to Washoe County, Carson City and Maricopa County are in range and reflect a break even cost.

Member Scow asked if the Administration Fee (\$16/one shot, \$25/two or more shots) is in addition to the cost of immunization to which Ms. Glaser confirmed and added that this cost is standard throughout the comparison counties.

Member Jones confirmed with Ms. Glaser that if someone has no funding, the gratis process is verbal.

Motion by Member Giunchigliani seconded by Member Jones and unanimously carried to approve the Revision to Southern Nevada Health District Nursing Services Immunization Fee Schedule as presented.

2. **Review and/or Update Board of Health Committees and Committee Memberships;** direct staff accordingly or take other action as deemed necessary **(for possible action)**

Attorney Annette Bradley advised that the Board committees are updated every August.

Member Wood asked what the rule is in regard to alternates serving on committees to which Ms. Bradley replied that alternates can serve as long as long as the regular member is not available.

Member Jones stated that the Board of Health committees list indicates that only elected members may serve on the At-Large Member Selection committee and he did not believe this to be correct and the committee, in his opinion, should include existing appointed members. Ms Bradley explained that the Board treats all members equally, but the statute requires that elected members select At-Large members.

Member Wood believes that At-Large members should not be on the selection committee as it would put the Board in a difficult position and thinks the At-Large Committee should remain elected members only. Member Giunchigliani added that because At-Large members are the unelected and if they serve on same committee to nominate themselves it makes it very awkward for members who have to make the decisions. Member Wood explained that typically it had been elected members only, but at one time Member Jones was the Board Chair, who is automatically a member of all committees.

Chair Woodbury asked if there are certain committees that he is required to be on as Board Chair and was advised by Ms. Bradley that he was automatically on all committees unless he chose to delegate to another member.

Chair Woodbury asked if there are any existing committee members that did not wish to continue serving. Member Wood replied that as of July 1, 2013 she has officially been an alternate and should be removed from the committees as Councilman Wagner is the official appointee to the Board.

Member Scow noted that Member Bateman is no longer a Board member and has been replaced by Member Marz.

The Chair proceeded to review all committees.

o **At-Large Committee**

There were 2 open seats vacated by Councilman Bateman and Member Wood.

Motion by Member Scow to replace Councilman Bateman and Member Wood with Members Marz and Wagner and appoint Member Giunchigliani as Chair seconded by Member Litman and carried unanimously.

The confirmed At-Large Committee is composed of:

1. Chris Giunchigliani, Chair
2. Al Litman
3. John Marz
4. Lois Tarkanian
5. Wade Wagner
6. Rod Woodbury

o **Audit Committee**

There was one open seat vacated by Councilman Bateman. Member Jones is interested in joining this committee and Members Crowley and Litman expressed interest in remaining on this committee.

Motion by Member Scow to replace Councilman Bateman with Member Marz and retain Member Beers as Chair seconded by Member Noonan and carried unanimously.

The confirmed Audit Committee is composed of:

1. Bob Beers, Chair

2. Susan Crowley
3. Al Litman
4. John Marz
5. Lori Winchell
6. Rod Woodbury

o **Chief Health Officer Annual Review Committee**

Current Members Scow, Noonan and Giunchigliani are still interested in remaining on this committee and Members Jones and Crowley are interested in joining this committee.

Motion by Member Scow to replace Member Tarkanian with Member Jones and appoint Chair Woodbury as Chair seconded by Member Nemec and carried unanimously.

The confirmed Chief Health Officer Annual Review Committee is composed of:

1. Rod Woodbury, Chair
2. Chris Giunchigliani
3. Frank Nemec
4. Tim Jones
5. Bill Noonan
6. Mary Beth Scow

o **Nomination of Officers Committee**

There is one seat vacated by Councilman Bateman. Member Litman is interested in remaining on this committee and Member Crowley has expressed interest in joining this committee.

Motion by Member Wood to replace Councilman Bateman with Member Crowley seconded by Member Giunchigliani and carried unanimously.

The confirmed Nomination of Officers Committee consists of:

1. Lois Tarkanian, Chair
2. Bob Beers
3. Susan Crowley
4. Tim Jones
5. Al Litman

o **CHO Succession Committee (Ad Hoc)**

Ms. Bradley noted that the current CHO Succession Committee is still on-going and asked if it is the intent of the Board for the changes to take affect after negotiations (for Dr. Middaugh's replacement) are completed if the composition of this committee changes. After discussion, it was determined that after Dr. Middaugh's replacement is confirmed, this committee will "die".

There is no motion or changes action necessary for this committee at this time.

The members of the CHO Succession Committee (Ad Hoc) remain as:

1. Tim Jones, Chair
2. Bob Beers
3. Susan Crowley
4. Frank Nemec
5. Mary Beth Scow
6. Rod Woodbury

o **Replacement Facility Committee (Ad Hoc)**

Chair Woodbury noted that this committee has not met in the last year. There is one seat vacated by Member Wood and no one has expressed interest in joining this committee. Ms. Bradley asked if the committee is still needed since it has not met over the last year and Member Giunchigliani advised that the committee may need to be kept in place to have a sounding board as negotiations go through. Member Jones added that another option may be to close the committee until needed and the full Board could make a decision at that time.

Motion by Member Nemec to replace Member Wood with Chair Woodbury and that this committee is suspended until called upon by the Chair seconded by Member Winchell and carried unanimously.

The confirmed Replacement Facility Committee (Ad Hoc) consists of:

1. Rod Woodbury, Chair
2. Susan Crowley
3. Bill Noonan
4. Mary Beth Scow
5. Lois Tarkanian
6. Lori Winchell

o **Medical Corridor Committee (Ad Hoc)**

The Chair noted that this committee has met only met one time in the last year. A second meeting was scheduled but there were no agenda items so it was cancelled. Member Giunchigliani noted that there could be the possibility of some redevelopment dollars that could come to the District and this committee should be kept intact.

Motion by Member Giunchigliani to leave this committee as is seconded by Member Jones and carried unanimously.

The Medical Corridor Committee continues to consist of:

1. Lois Tarkanian, Chair
2. Bob Beers
3. Chris Giunchigliani
4. Marietta Nelson
5. Mary Beth Scow
6. Lori Winchell

3. Receive Update Regarding the Chief Health Officer Selection and Appointment Status;

District operational options; and discuss and delegate follow up responsibilities; direct staff accordingly or take other action as deemed necessary (**for possible action**)

Ms. Bradley reported that she and Dr. Middaugh spoke with Dr. Iser and forwarded information to him regarding terms of agreement to a possible contract. A CHO Succession Committee is scheduled for Friday, September 6, 2013 at 9:00 a.m. and Dr. Iser will be available by phone for this meeting. Ms. Bradley added that there is no potential start date yet for Dr. Iser.

Dr. Middaugh recommended that Dr. Nancy Williams serve as Acting CHO until an agreement is reached with Dr. Iser. Dr. Middaugh noted that Dr. Williams does not want the Acting CHO role on a permanent or long term basis, but will serve until Dr. Iser is in place.

Dr. Middaugh introduced Dr. Williams to the Board, who stated that she is happy to fill the role and hopes she has the support of the Board during this transition period. Dr. Williams added that she is confident with this position because of the capable Division Directors and the support that

she will get from them. Dr. Williams will ensure that things that are already planned or in place will continue and will help make Dr. Iser's transition as smooth as possible.

Member Jones confirmed with Ms. Bradley that Dr. Iser is agreeable to the elements that were sent to the Board earlier in regard to contract terms.

Member Giunchigliani confirmed with Dr. Middaugh that Dr. Williams meets the DEA signatory requirements and added that if Dr. Williams is doing additional work she should be receiving additional pay. Member Giunchigliani added that she is still concerned about salary, termination language and annual leave cost breakouts in the contract drafted for Dr. Iser.

Dr. Williams added that she has several pre-approved vacation days in September that she will inform the Board of and adjust if necessary.

4. **Discuss and Approve, Consistent with Board Governance Policy BGP-006(2)(A), Board Governance Process**, the development and implementation of day-to-day operational policies and procedures by District management; direct staff accordingly or take other action as deemed necessary (*for possible action*)

Ms. Bradley reported that the District has been reviewing and updating operational policies and procedures so that they can be managed effectively and consistently. Section 2 of the Personnel Code provides that the District reserves the right to exercise customary managerial function which includes, among other things, the right to change and abolish policies. Article 10, Section 5, of the Collective Bargaining Agreement (CBA) seems to imply that some policy changes must be submitted to the Board, specifically "In the event the District seeks changes in a District-wide policy, the item must be placed on the Joint Labor Management Committee (JLMC) agenda for discussion prior to submittal to the Board of Health except in the case of an emergency." Ms. Bradley explained that submitting any changes to the JLMC is a non-issue; however, the Board is a general oversight board that provides broad policies on the goals and objectives of the District and operational policies is a customary managerial function for the District. In furtherance of that, as the District moves into collective bargaining discussions, the disconnect of this language between the Personnel Code and the Collective Bargaining Agreement can be corrected by having the Board affirm the District's managerial ability to effect operational policies and procedures, which is consistent with the Board Governance Policy that recognizes the Board's overall operational role and management's day to day operational function.

Member Jones confirmed with Ms. Bradley that this is simply a reiteration of the policy and procedure that the District has been following.

Ms. Bradley explained that the Board Governance Policy speaks to the overall function of the Board and the day to day managerial function of management. The Personnel Code speaks to the customary managerial role as well as day to day operations and the Collective Bargaining Agreement speaks to requiring that District-wide policies be provided to JLMC. The matter is submitting policies to the Board prior to submittal as day to day operational policies are a customary function.

Member Giunchigliani asked if this relates to confidentiality of records. Ms. Bradley advised that depending on how language in the CBA is interpreted, anything that affects District-wide would have to come to the Board for approval and implementing traditional operating functions does not require Board approval; it is a managerial and administrative component.

Member Giunchigliani requested future discussion in regard to public records and how the District determines which documents are confidential or not under State law. Member Giunchigliani added that at some point the conversation needs to occur in regard to District officers that are receiving longevity pay.

Member Scow stated that it is important to have clarification on items that need to come before the Board and confirmed with Ms. Glaser that major contracts come before the Board.

Motion made by Member Giunchigliani seconded by Member Wood and unanimously carried to affirm management's ability to implement operational policies and procedures.

VII. BOARD REPORTS: The Southern Nevada District Board of Health members may identify emerging issues to be addressed by staff or by the Board at future meetings, and direct staff accordingly. 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.

Seeing none, the Chair closed Board Reports.

VIII. HEALTH OFFICER & STAFF REPORTS

- Certified Food Safety Manager Card

Amy Irani, Acting Environmental Health Director, introduced Rose Henderson, Environmental Health Supervisor, who has been instrumental in development of the Food Establishment Resource Library and the Food Handler On-Line Training with the Public Broadcasting Service. Ms. Irani praised Ms. Henderson for designing this enhancement to the program and her exceptional work and dedication. Ms. Irani presented a brief presentation (Attachment 1) highlighting the implementation of the Certified Food Safety Manager Card, which is critical to the move toward risk-based inspections.

Effective September 1, 2013,
SNHD will enhance the
Food Handler Safety Program
by offering a
Certified Food Safety Manager
(CFSM) card
in addition to the current
Food Handler Safety Training
Card.



Why do we want to do this?

To promote and recognize enhanced training for the food safety professional



The U.S. Food and Drug Administration (FDA) recommends that all restaurants employ certified food protection (safety) managers.

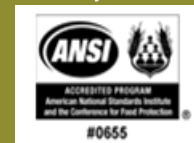
A 10-year study of retail food risks identified that the presence of a certified food protection manager was strongly correlated with higher compliance levels with food safety practices.



The SNHD 2010 Regulations Governing the Sanitation of Food Establishments identifies food protection manager certification as meeting one of three options for the knowledge requirement for a person in charge of a food establishment.



To qualify for this manager level card, a person must complete an ANSI accredited Certified Food Protection/Safety Manager home study or classroom course, then show food safety competency by taking and passing a proctored examination through an approved provider/proctoring service.



Those taking the initiative to complete this higher level of food safety training will provide proof of passing the proctored examination. They will not be required to take the online food handler safety training.




Information on ANSI accredited courses will be available on the SNHD website:

- The National Restaurant Association's ServSafe program
<http://www.servsafe.com/>
- Prometric
<http://www.prometric.com/foodsafety/default.htm>
- National Registry of Food Safety Professionals
<http://www.nrfsp.com/>
- Learn2Serve
<http://www.learn2serve.com/>



This food education option is a win for the individual, the food operation and the consumer...

- The expiration date on the CFSM card will match that on the examination certification. If exam was just taken, the card will be good for 5 years (food handler safety card is good for 3 years). Additionally, it will serve as visual recognition of their achievement.
- The food operation will have staff that have completed a higher level food safety training.
- Higher compliance with food safety practices as identified by the FDA reduces the risk of consumer food borne illness



Member Winchell inquired to the cost range of this advanced certification and was informed by Ms. Henderson that it varied, however Member Jones reported that he has completed the course and his cost was \$100.

Member Giunchigliani confirmed with Ms. Irani that this training is an incentive and not mandatory.

▪ TB Investigation and Neonatal ICU Status

Dr. Nancy Williams, Acting Chief Health Officer, recognized Kaci Hickox, Epidemic Intelligence Service (EIS) Officer from the CDC, Richard Cichy, Community Health Nurse Manager, and the TB Clinic staff for their outstanding efforts in this endeavor.

Dr. Williams reported that in May 2013 a woman delivered a set of extremely premature twins, Twin A died in June from extreme prematurity and Twin B remained in the neonatal ICU. In July the mother died and the autopsy indicated that cause of death was TB. Twin B was tested and diagnosed with TB and immediately placed in isolation. Prior to the birth of the twins, the mother had been ill off and on but was not hospitalized until one or two days before delivery (due to premature rupture of membranes), became ill a second time and was hospitalized again and subsequently passed away. Before her eventual death she became severely ill and had been transferred to a southern California hospital for more high level care. There are three hospitals involved, Hospital A which is where she was briefly admitted with premature rupture of membranes, Hospital B which is the main focus of efforts at his point as both she and the babies were there and Hospital C in California. Dr. Williams continued, stating that as soon as this diagnosis was reported in July, the epidemiologic investigation began to determine if the mother or infants were contagious with TB, identify those that could have been exposed and find out where the disease originated. Dr. Williams added that hospitals A and B have been very cooperative and her staff are investigating under the presumption that the woman was infectious starting at the time she was admitted to the hospital after the birth of her babies as that was a sign that she had taken a turn for the worse. Sixty-nine family members and friends were tested and of which 13 were positive, although 7 of those were foreign-born. Next steps will be to test

chest x-rays, two of those that tested positive have already had abnormal chest x-rays and are currently undergoing treatment and further evaluation in the TB clinic. The hospital staff has been prioritized for testing with 155 staff members tested to date, 4 have tested positive, although it has not been determined if exposure was recent or in the past. At this point, no sputum test has resulted identifying anyone with active TB. There is one person still under investigation that has had both a positive test and an abnormal chest x-ray. This individual is under treatment and will get sputum tests her over time to see if TB develops. Dr. Williams and staff are confident that the NICU staff, babies, parents and visitors had minimal exposure to TB, although this situation is continuously reassessed. Second-round testing will occur at a later date with hospital staff that had taken care of the patients as TB tests sometimes do not become positive until 8-10 weeks after exposure. Follow up will continue with the hospitals to ensure that all testing occurs in a timely manner and treatment, if needed, will occur as soon as possible. Notifications were sent to parents and pediatricians of the NICU babies that were in the hospital at the same time of the Twin A and B; however no testing is recommended at this time.

- Dr Middaugh thanked the Board members for their kind words and acknowledged the support of the leadership team, union and staff for the team effort over the last year and has confidence that Dr. Iser and will lead the District and continue the progress that has been made.

IX. INFORMATIONAL ITEMS

A. Board of Health

1. Letter from the City of Boulder City appointing Peggy Leavitt as alternate member of the Southern Nevada District Board of Health for the term July 1, 2013 – June 30, 2015.

B. Chief Health Officer and Administration

1. Monthly Activity Report - July 2013

C. Community Health:

1. Monthly Activity Report - July 2013

D. Environmental Health:

1. Monthly Activity Report - July 2013

E. Clinics and Nursing:

1. Monthly Activity Report - July 2013

- X. 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. No action may be taken upon a matter raised under this item of this Agenda until the matter itself has been specifically included on an agenda as an item upon which action may be taken pursuant to NRS 241.020. Comments will be limited to five (5) minutes per speaker. Please step up to the speaker's podium, 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 Chairman or the Board by majority vote.

Seeing no one, the Chair closed Public Comment.

XI. ADJOURNMENT

Chair Woodbury adjourned the meeting at 10:58 a.m.

NOTE: Disabled members of the public who require special accommodations or assistance at the meeting are requested to notify Valery Klaric or Jacqueline Wells in Administration at the Southern Nevada Health District by calling (702) 759-1201.

SUBMITTED FOR BOARD APPROVAL

Nancy Williams, M.D., MPH, Acting Chief Health Officer
Executive Secretary

/jw