



## MINUTES

### SOUTHERN NEVADA HEALTH DISTRICT FACILITIES ADVISORY BOARD MEETING January 25, 2022, 3:00 P.M.

#### MEMBERS PRESENT

Alexis Mussi, *CEO, (Southern Hills) HCA*  
Todd Sklamberg, *CEO, (Sunrise) HCA*  
William Caron, *CEO, VA Southern Nevada*  
Leo Gallofin, *Director, Rawson-Neal*  
Kim Shaw, *CEO, (San Martin) Dignity Health*

Sam Kaufman, *CEO, (Henderson) UHS VHS*  
Sajit Pullarkat, *CEO, (Centennial Hills) UHS VHS*  
Leonard Freehof, *CEO, (Spring Valley) UHS VHS*  
Robert Freymuller, *CEO, (Summerlin) UHS VHS*  
Patrick Kelly, *Nevada Hospital Association*

#### MEMBERS ABSENT

Julie Taylor, *CEO, (Mountainview) HCA*  
Thomas Maher, *CEO, Boulder City*  
Curtis Ohashi, *CEO, Montevista*  
Vince Variale, *CEO, North Vista*  
Mason VanHouweiling, *CEO, UMC*

Lawrence Barnard, *CEO, (St. Rose) Dignity Health*  
Thomas Burns, *CEO, (Rose de Lima) Dignity Health*  
Christopher Loftus, *CEO, (Desert Springs) UHS VHS*  
Troy Mire, *CEO, (Spring Mountain) UHS VHS*  
Claude Wise, *CEO, (Valley) UHS VHS*

#### SNHD STAFF PRESENT

Fermin Leguen, *District Health Officer*  
Heather Anderson-Fintak, *General Counsel*  
Michael Johnson, *Director of Community Health*  
John Hammond, *EMS Manager*  
Chad Kingsley, *Regional Trauma Coordinator*

Joann Rupiper, *Chief Administrative Nurse*  
Karen White, *CFO*  
Christian Young, *Medical Director EMS*  
Andria Cordovez-Mulet, *Executive Assistant DHO*  
Theresa Ladd, *Administrative Secretary*

#### GUESTS

Marc Ogriofa, *Medical Director*  
City of Las Vegas Recuperative Care Center

Jocelyn Bluiitt-Fisher, *Community Resources Manager*  
City of Las Vegas Recuperative Care Center

**I. CALL TO ORDER/ROLL CALL**

Chair Freehof called the Southern Nevada Health District Facilities Advisory Board to order at 3:03 p.m. Theresa Ladd, Community Health Administrative Secretary conducted a roll call and determined that a quorum was present.

**II. FIRST PUBLIC COMMENT**

Public comment is a period devoted to comments by the general public on items appearing on the Agenda. All comments are limited to five (5) minutes.

Chair Freehof asked if anyone wished to address the Board pertaining to items appearing on the agenda. Hearing no one, the Public comment portion of the meeting was closed.

**III. ADOPTION OF THE JANUARY 25, 2022 AGENDA (for possible action)**

*A motion was made by Member Kaufman seconded by Member Mussi and carried unanimously to adopt the January 25, 2022 agenda as presented.*

**IV. CONSENT AGENDA**

Items for action to be considered by the Southern Nevada Health District Facilities Advisory Board 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/Facilities Advisory Board Meeting: April 27, 2021 (for possible action)

*A motion was made by Member Sklamberg seconded by Vice-Chair Mussi and carried unanimously to approve the Consent Agenda as presented.*

**V. REPORT/DISCUSSION/POSSIBLE ACTION**

The Facilities Advisory Board may take any necessary action for any item under this section. Members of the public are allowed to speak on action items after the Board's discussion and prior to their vote. Once the action item is closed, no additional public comment will be accepted.

1. Receive, Discuss and Approve 2022 Facilities Advisory Board Meeting Schedule; direct staff accordingly or take other action as deemed appropriate (**for possible action**)

*A motion was made by Member Shaw and seconded by Member Sklamberg and carried unanimously to approve the Facilities Advisory Board Meeting Schedule for 2022.*

2. Receive and Discuss Recuperative Care Program; direct staff accordingly or take other action as deemed appropriate (**for possible action**)

Dr. Marc Ogriofa, previously the Medical Director at the City of Las Vegas Recuperative Care Center, provided a broad verbal presentation on the City of Las Vegas Recuperative Care Program. The program was setup 18 months ago designed as a 40-bed unit to identify the most medically fragile and vulnerable homeless patients on the street. This incorporated folks with chronic medical conditions like very high hypertension, uncontrolled diabetes, some hospice patients and patients with non-healing wounds. Over the course of 18 months, RCC received patients from all valley hospitals and shelters as well as those identified on the street by the RCC MORE team. The RCC continually works on getting folks out of homelessness, either to assisted living, their own apartment, long term care facility, etc.

Done in conjunction with using lessons learned from Cashman Ctr. RCC has senior social workers and case managers working with patients to either get Social Security resolved, get them benefits, ID, birth certificates, etc. to assist them to get back on their feet, condition them

out of homelessness and give them the tools and education needed to manage their medical conditions.

RCC is working with community partners to identify gaps that you see that we aren't aware of and to make you aware of what we're doing and how we're trying to help.

Chair Freehof requested the presented RCC slides be sent to the Board.

## VI. SNHD REPORT/STAFF REPORT

Dr. Michael Johnson, Director of Community Health, introduced the following updates.

### COVID-19 Update

Dr. Cassius Lockett, Director of Disease Surveillance & Control, provided an update on COVID-19. COVID cases have plateaued in the US, under 700,000/per day, 200 cases per 100,000. Estimated as of January 17 the US had more than 15M estimated confirmed cases of Omicron. This is underestimated and underreported to the tune of approx. 1 in 4 which suggests the real percentages impacted in the last 4 weeks are between 18-23% of the US population in a 4-week span. This shows the power of this virus and its ability.

Flu-like activity continues to remain high in many states. Activity in Nevada ending the week of January 8, was low. Week ending January 15, increased to moderate.

Cases in Clark County, as of 6/7/21 last year, the 7-day case moving avg was 4,512, which is a 49% decrease compared to 7-day moving case avg of 2,256; seeing a decline in cases.

Estimated by middle of February, 45% of population will be infected by Omicron.

As per the *Nevada Hospital Assoc Point of Time Survey*, there have been a total of 23,617 hospitalizations.

There is a steady decline of the single day test positivity rate. Test positivity fell almost 10 points sequentially, now its 32.7. Dominate variant continues to be Omicron.

### EMS – ID/Divert Issues, re-districting of AMR/Community Ambulance

RTAB - Chad Kingsley, Regional Trauma Coordinator, provided an update on Regional Trauma Advisory Board (RTAB). Next 2 quarters will be focused on updating trauma regulations, projected to go to the Board in May; 3 workshops. Annual trauma report should be available June 2022. Will be working with Nellis Air Force Base as they begin to receive EMS traffic and working with Board of Health to begin integration into the EMS trauma system.

John Hammond, EMS Manager, provided an update on franchise changes between AMR Medic West and Community Ambulance (NOTE - EMS office does not do franchises). County franchise has a clause in it that allows the county to reassess the areas based on non-compliance as far as response times-southwest and south part of the valley (Mountains Edge/Southern Highlands Area). They removed the areas from AMR and granted to Community Ambulance. Approximately 30% of response area is covered Community Ambulance, 30% AMR, and 30% Medic West. May be further changes down the line.

Chair Freehof raised the question, "Is that new structure already in place?"

John responded, "I heard February 1."

*Internal Disaster* – Distributed 2 reports for internal disaster for last calendar year. Labeled *not* internal disaster, should be labeled "other statuses placed in the EM system at the time." EMS is only looks at internal disasters. Even though a facility is on GI divert, the facility should be able to determine the extent of the need and transfer as necessary, looking at internal disasters only. This year 600 hours total, an increase from last year's total of 1,300 hours for all hospitals being on internal disaster. Not a straight line, internal hours go up and down.

Made changes to the policy as it relates to internal disaster. Hospitals were shifted around within regions, changed that 1 hospital per region can be on internal disaster at any given time. May make further changes if not adequately serving the community.

### COVID-19 Vaccination Update

Ms. Joann Rupiper, Chief Administrative Nurse, provided an update on the COVID-19 vaccination operations.

Vaccine Changes – Pfizer boosters for those 12 and older; Moderna boosters for 18 and older; both spaced 5 months from last dose.

Current Situation – Moderna and Pfizer readily available; Pediatric Pfizer available.

Pharmacies have administered most of the vaccine to date and most vaccines administered are boosters.

Static sites will be monitored for utilization and adjusted as needed. GOTV efforts to address health equity access for underserved populations.

Total number administered in Clark County (as of January 12, 2022): Janssen (129,327), Moderna (942,200), Pfizer Peds (55,619) and Pfizer, Inc. (2,110,305) totaling 3,246,728.

Vaccine distribution administered by (as of January 12, 2022): Pharmacies (1,797,027), SNHD & Partners (888,851), Other (328,875), Veteran (68,169), Hospital (134,927) and Nellis AFB (28,879) totaling 3,246,022.

### **VII. FACILITIES ADVISORY BOARD REPORTS**

Chair Freehof asked the board if there were any emerging issues to be discussed and if there are any items to be placed on the agenda for the next meeting.

Chair Freehof raised the question as to whether the next FAB meeting could be held in person.

Theresa Ladd responded she will email the Board at least 30 days prior (by March 18) to obtain consensus on holding the next FAB meeting in-person.

Hearing no one, the Facilities Advisory Board Reports portion of the meeting was closed.

### **VIII. SECOND PUBLIC COMMENT**

Chair Freehof asked if anyone wished to address the Board.

Hearing no one, the Public comment portion of the meeting was closed.

### **IX. ADJOURNMENT**

Chair Freehof adjourned the meeting at 3:50 p.m.

/tcl