

IN A SPECIAL MEETING OF THE WHITE PINE COUNTY BOARD OF PUBLIC HEALTH HELD ON AUGUST 28, 2018 IN THE COUNTY LIBRARY CONFERENCE ROOM IN ELY, NEVADA

The Following Were Present:

- County Board of Public Health
- Dr. David Byun, Chairman
- Richard Howe, Member
- Shane Bybee, Member
- Carol McKenzie, Member
- Scott Henriod, Member
- Nichole Baldwin, Clerk of the Board
- Susan Lujan, Deputy Clerk

The Following Were Absent:

- Gary Perea, Member
- Steve Stork, Member

Guests Present

- Dr. Yun Namkung
- Dr. Joe Iser, SNHD
- Dr. John Packham, UNR School of Medicine
- Dr. Antonina Capurro, Nv. Div. of Public & Behavioral Health (State Dental Health Officer)
- Ms. Joelle Gutman, Regional Behavioral Health (By Telephone)

Others Present

There were none.

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Chairman Dr. David Byun called the meeting of the White Pine County Board of Public Health to order at 10:00 a.m. Chairman Byun proceeded to lead the Pledge of Allegiance.

PUBLIC COMMENT

There was none.

DISCUSSION ONLY ON APPOINTING YUN NAMKUNG, M.D., AS A DEPUTY HEALTH OFFICER PURSUANT TO WPC ORDINANCE 465

Chairman Byun introduced Dr. Yun Namkung to the Board and advised he is needed to serve as a Deputy Health Officer. Chairman Byun is here locally one week on, then one week off; Dr. Namkung would fulfill the time during which Chairman Byun is gone. He emphasized that someone needs to be available in this capacity at all times. Chairman Byun added that Dr. Namkung has been serving as a Primary Care Provider at the Hospital; he also has strong ties to our community. He was trained in Brooklyn, New York, and has a solid background of leadership/supervisory/management positions; he's been here for 5 years. WPC Clerk Nichole Baldwin advised that while this agenda item is for discussion only, per Ordinance #465 the Board of County Commissioners only can appoint Dr. Namkung at the next meeting as a Deputy Health Officer.

DISCUSSION/PRESENTATION ON: (A) UPDATE ON RURAL HEALTH OUTREACH; (B) BOARD OF HEALTH AND HEALTH DEPARTMENT; (C) ORAL HEALTH ISSUES

Chairman Byun introduced Dr. Joe Iser, Dr. John Packham, and Dr. Antonina Capurro to the Board. Dr. Capurro recalled for the assemblage that the mobile rural clinic initiative was first presented to White Pine County last March. She noted that the mobile clinic is not just for rural areas but also for the urban counties; a very small grant was obtained to purchase equipment and supplies for a Dental Hygienist, a Nurse and a Medical Assistant. She presented a Power Point, beginning with a photo of the mobile medical unit; she explained how that has been modified into a dental clinic unit. 11 Clinics have been done, in Nye, Esmeralda, White Pine, and Clark counties. Their startup costs ran just under \$50,000, and as she noted, they've been learning along the way. They used the portable equipment and drove the van to the site, so they could set up anywhere; in a parking lot

they used a privacy screen and were able to set up in public areas. She added they've also participated in Health Fairs. Target areas included Tonopah, Goldfield, Ely, and McGill; Beatty was added at the end of their trip. Dr. Capurro continued that Esmeralda had requested to add dental cleaning, and also if they could expand their offerings; for their first trip, they identified communities' needs. More advanced treatments were provided as needed; one was to seal molars against cavities, which she noted has proven to be 80% effective when applied. She advised that the mobile clinic is prepared to tackle virtually any situation that arises.

Dr. Joe Iser noted that Shindrix is a new vaccine which helps prevent shingles in adults. The mobile unit comes twice as often as usual during the vaccination periods, especially to give the second injections which are part of medical treatment. There was some discussion of various immunization needs depending upon the seasons, such as for the flu during the Fall/Winter, etc.

Dr. Capurro explained how they assist with Medicaid patients, and noted there has been a suggestion of rotating a Medicaid Dentist through the Hospital, much like the rotating specialist physicians who presently do that. The mobile unit is utilized for all ages; they assist parents and schools with getting children properly treated and providing preventative medicine; she added they're open to any ideas we might have. Member Scott Henriod noted there are several practitioners at the Health Fair who provide dental screening; he felt that could be a good venue for them to participate in. Dr. Iser advised that regarding immunizations, there are plenty of vaccines available for children throughout the counties, and they target both the uninsured and Medicaid population. They provide for both public/private, uninsured, insured, and children, as he explained. Community Health Nurses are asked to bring the non-vaccines for children; Shindrix was the most administered vaccine recently, as he reported. He noted the importance of data collection; people who have infectious diseases should be identified and treated, and perhaps even TB screenings are needed. He went through each month and noted how many people skip meals, both in the rural and urban areas; he also explained the effects of low blood sugar and how that is related to skipped or missing meals. He added that one participant had admitted to eating meals for only 4 out of 7 days, due to lack of resources. Nutrition and preventative medicine are being enhanced by use of the mobile unit, which besides medical care also provides education to the communities. Dr. Capurro noted that it's been found 46% of people in White Pine County hadn't seen a dentist during the past 5 years. Walk-in patients were done as well for dental assessments, and they are continuing case management for those who have come into the clinic. She added that Ms. Maureen Budahl has provided many assessments prior to the van's visits; Dr. Iser advised of possible funding needs there. It was emphasized that utilizing the van should be expanded, in order to get the most use out of it; that will greatly support their grant funding needs. He noted that they will be applying for Federal and State grants for continuation of service with the mobile unit. He did include that people having STD issues don't often come forward, as well as other sensitive issues; with those needs in mind a better needs assessment will be done.

Member Carol McKenzie noted that the Lund population is very small, and it's unknown how many people there might need or want to use the facility. However, she added that they do have some elderly who can't drive themselves; she asked if there might be a possibility that the van could stop there for an hour or two. Dr. Iser advised that as long as they are notified of these kinds of needs, he felt they could do that. During the discussion, Member Richard Howe advised that WPC Clerk Nichole Baldwin could draft a letter of support to the State. He continued to ask what White Pine County could do if the State was lacking in funds to help; perhaps we could assist with the fuel? Dr. Iser agreed, and noted that their just being able to plug into our electricity helps them, for which he thanked the Sheriff's Department. Dr. John Packham can also help apply for grants; if there are donations they may be made to the 501-C3 as they are a not-for-profit service. He advised that Ms. Budahl was going to approach the casinos and other businesses for donations, for example. He agreed that a letter of support would also go a long ways towards finding more funding.

Dr. Capurro advised that once they know where they want to go, they can assess the costs, which she noted will be less now that they have the equipment and personnel. Their calendar can then be forwarded to the State, as she explained. Lincoln County is showing more interest, and they will work with their providers towards bringing them on board with this mobile clinic as well.

Member Shane Bybee commented on the importance of continuity of care, not "just a 'one and done'" thing. He noted that people are visiting the mobile unit more than once; he suggested that we could focus on getting a space for their van and helping to organize a facility here to help reduce the overhead of bringing up a

big truck. Member Henriod asked about patients' medical records, especially with respect to HIPPA. Dr. Capurro noted there's a locked file in the Southern Nevada Health District; data is entered in a locked cell file, with only she and the dental hygienist having access, for the purpose of accessing the patient's history. Case management protocols are set by the State and are stringently followed, she assured the Board. Dr. Iser also noted that wifi access is also available in the van; they just require patient permission to release any of their information to a local dentist, for example. The Board thanked the doctors for their presentation.

Dr. Iser advised that he and Dr. Packham have been working on a long-term project for years; it began with grant funding and concerned how to share resources across jurisdictional lines. That project has been ongoing for the past 7 years; this mobile unit is again the same, involving sharing across jurisdictional lines. White Pine, Esmeralda, and Nye provided letters of support for this, as he noted. Dr. Packham advised that they look at what services are already provided and what is lacking, and then a determination is made as to how to go forward and include those services needed. Much data gathering is involved; Dr. Packham does this research and utilizes electronic surveys to gather the information. He explained they tap into existing data and ensure the local County leaders are receiving input from both Dr. Iser and the other counties who are participating in the project. He continued that the UNR School of Medicine is keen on working with rural counties, although they are now separated from UNLV. He clarified that the School "focuses on training physicians in primary care and addressing medically underserved areas of rural Nevada." This means data gathering from patients, providers, and community collaborators who are active in the County, such as this Board of Public Health. He commended Dr. Capurro as being a great partner in this effort; the School of Dentistry in UNLV brings in students and, with patients' permission, they are utilized as part of their training process. He added that the letter of support White Pine County wrote was used to assist with the resource sharing across jurisdictions; we should also be able to share across states similarly. Therefore, assessment of our public health needs is a great benefit to White Pine County. He added that if we wish to become a Department of Health—more than being a Board—they are our resource for suggestions, information, etc. We would need to make the decision at some point in the near future, whether or not to become a Department. He added that we're leaning on a national effort as to what could be done across various lines; he wishes Nevada to remain plugged into that project in any way we can. Dr. Iser added that he's happy to assist us at any time.

Dr. Packham advised that the survey begins with accumulating information, in order to assess our needs. Chairman Byun advised that the only data available is in the Hospital, and data gathering is vital. Such questions as what are our future projections; who is actually aging and remaining here in White Pine County; those kinds of questions will be included in the assessment, whereby we will be able to look 10 years into the future. This will be a process, he continued, and hopefully we can continue to share ideas; he added, "there's strength in numbers." The cross-jurisdictional concept is very important; it can reveal how we can expand our services, if we can actually be a Department or a District, and if we can self-sustain. We need to know what to do to accomplish that; he clarified there needs to be a symbiotic relationship with other jurisdictions. Member Bybee noted that in reviewing the figures, the people who are insured are much more than he had thought; however, there is a portion of our population who don't seek health care, and who don't have the resources to take care of those things. Dr. Packham noted that while the Health Fair is a good vehicle to obtain some of that information, there are many people who don't go to those. For data collection, he continued, we need to be creative; they've found that going through churches, etc., is one great way to obtain information. There are also civic groups; Lyons, Rotary, other clubs. Schools are also good, although not everyone speaks English, he noted. He felt perhaps a questionnaire—translated into Spanish, for example—might be effective. Member Richard Howe noted people are sometimes afraid of not having the money to seek medical help. Perhaps more knowledge of how a free exam could be made available, getting the word out; he felt that would be the most important issue. Member Carol McKenzie felt the Health Fair is good; many people don't have the money to go to the Hospital Clinic and at least there's someone there who could look at them. Dr. Iser noted that case management would be effective such as in controlling blood pressure, etc., and while not prescribing medication there are other things that could be done to encourage people to have themselves and their families checked. He added that STD's is something that they do treat.

At this point, Ms. Joelle Gutman, Regional Behavioral Health, joined the meeting by telephone. She noted that the Legislature is setting up a process to look at Behavioral Health in the State. In many states, funding is provided to jurisdictions to cover such items as health screenings, etc., but such is not the case in Nevada. She felt it would be possible to combine with other counties, and illustrated how that could be done, and in fact is being done in many areas. Assemblyman Yaeger had asked Dr. Iser to see, if this goes to the next Legislation, if there is a better configuration of serving areas than is currently being done. She is willing to work with the County, Chairman Byun, and Dr. Namkung on this research. Ms. Gutman offered some background information on the Board makeup: She is the Coordinator for Pershing, Lander, Humboldt, Elko, Lincoln and White Pine counties. She explained the inter-rurals that surround Washoe County and also Nye, Esmeralda and Clark counties at the southern end. Ms. Gutman cited PACE and law enforcement working towards trying to align with the health coalitions they have in their communities. She noted candidly that keeping White Pine and Lincoln counties out of the southern board would be in an effort to keep them "from being swallowed by the southern community," and specific issues and concerns may not be heard. She explained that Lincoln County will be paired with Dr. Iser's region; however, she wants White Pine County's feedback, and where we would feel most comfortable. Member Howe advised that we work more with Eureka and Elko counties, plus we are legally joined with Eureka and Lincoln counties. We are rural; he agreed with her assessment as to what could happen if we were to be assimilated by the southern area. He continued that we get great service from the south but we are aligned better, both territorially and rurally, with the counties she mentioned. Member Henriod noted that he has a great working relationship with Ms. Gutman and he would hate to see that go away. He's working with her on the TeleHealth process, and he wants to continue with that. Dr. Iser advised that the BDR to promote all this is to set up a law which would open all of this up, thus enabling cross-jurisdictional relationships.

Member Bybee asked Chairman Byun's opinion; he noted that 90% of referrals are either coming from the judicial or the law enforcement side. Chairman Byun noted that we either send people to the north or south region; while he can't take a specific position on this right now, he is asking us to keep an open mind. He noted that with respect to services, both geographical and imaginary lines come into play. He would be more enticed to go with the flow, with what the majority would want; however, he emphasized that we don't need to make a decision right now. Ms. Gutman advised that their Board got a BDR for a regional pilot project for frontier counties to create an emergency transport system, provide training for officers, case management, and Medicaid at an accelerated rate for certain mental health services. She would want White Pine County to be involved in that project, if the BDR is passed. Dr. Iser noted that some counties have had a Public Health Dept., a Social Services Health Dept., and a Behavioral Health Dept., all at once! In the long run, he would like White Pine County to have its own Health Department, but added that's down the road. Chairman Byun thanked Ms. Gutman and Drs. Capurro, Iser, and Packham, for their information and participation today.

**DISCUSSION/ACTION/APPROVAL OF MINUTES FROM THE JANUARY 24, 2018 SPECIAL MEETING OF THE WHITE PINE COUNTY BOARD OF PUBLIC HEALTH**

Chairman Byun entertained a motion to approve. Member Richard Howe made a motion to approve the January 24<sup>th</sup> set of minutes as requested. Member Shane Bybee seconded. Motion carried.

**PUBLIC COMMENT**

There was none.

ADJOURNMENT

At 11:09 a.m., Chairman Dr. David Byun entertained a motion to adjourn. Member Shane Bybee made the motion; Member Richard Howe seconded. Motion carried.

WHITE PINE COUNTY BOARD OF PUBLIC HEALTH  
STATE OF NEVADA

BY:

  
CHAIRMAN

ATTEST:

  
WPC CLERK OF THE BOARD