Minutes of the Nevada State Legislature Assembly Committee on Health and Welfare

Date: <u>May 16, 1979</u> Page: 1

- MEMBERS PRESENT: Chairman Bennett Mr. Glover Mr. Chaney Mr. Brady Mr. Craddock
- MEMBERS ABSENT: Mrs. Cavnar Mr. Getto
- GUESTS PRESENT: Donna Green, Student Dr. Jankovich, Rural Clinics Ted Oleson, American Civil Liberties Union Harvey Riceberg, Sahara Rancho Pharmacy & SNF & ICF John Carr, Health Services Shirley Palt, Health Division - Bureau of Health Fac. Senator Ford George Bennett, Nevada State Bd. of Pharmacy, Sec.

Chairman Bennett convened the meeting at 5:08 p.m.

<u>SB 81</u>

Shirley Pate, Bureau of Health supported the measure. This measure would make files available to anyone.

SB 351

John Carr, Bureau of Health stated his organization supported this bill in its present form.

Ted Oleson, American Civil Liberties Union stated they also were in favor of the bill. The state should require and enforce minimum standards for jails. If the State did not do this, the Federal Government would probably mandate they adhere to federal guidelines formulated (Exhibit # 1)

SB 331

Harvey Riceberg, Sahara Rancho Pharmacy & S.N.F. and I.C.F, supported the measure. He said medicines were supplied to persons in nursing homes, convelescent facilites, etc. (not hospitals) packaged one dose per unit. Many of the one dose units are sealed, are enclosed in plastic, or packaged in some way as to be tamper-proof. There is no possibility of these drugs becoming contaminated. When a person no longer requires the medication due to death, or other reasons, all medicines for that person must be destroyed. These medications are very costly and many are in no way damaged. SB 331 would authorize the return of certain of these sealed individual dosage unit to be returned for credit to the pharmacy. The State Board of Pharmacy is in favor of this measure. They already had a list of That Board would regulate this function, that would be safe for return to the pharmacies. drugs The Board would insure that all entities adhered to safe practices. He distributed to members of the Committee samples of individually packaged dosage units. Mr. Riceberg estimated they destroyed up to \$100,000 worth of these individual dosage units per year. The amount varied with each facility.

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SB 331 - continued

Mr. Brady asked if these units could be effected by heat. He was informed that all drugs were effected by heat. The damage from handling would be less between the health facilty and the pharmacy than from handling prior to its original delivery to the pharmacy from the manufacturer.

Mr. Riceburg said the dosage units in the nursing facilites were handled exclusively by the medical staff. They were kept in a proper storage area, were dispensed to the patient one at a time and the packaging was removed at the bedside of the patient. The medicine was under full control at all times.

Mr. Craddock said one of the sample items distributed to the Committee as examples of the type of units that would, under this bill, be returnable was a syringe that definitely not tamper-proof. The cap was easily removed and the needle exposed.

Mr. Riceburg said that it was an inappropriate item for return and the Board would rigidly control the returnable items, The syringe was a bad example. The sealed ampules were the proper samples.

Mr. George Bennett, Secretary, Nevada State Board of Pharmacy supported <u>SB 331</u>. He said the only medical dosages that could be returned would be those approved by the FDA. The only items approved now were the ampules and the sealed vials. When the FDA approved other items, the Nevada Board of Pharmacy would in turn approve the same packaging for return. Returnable drugs are specified.

Mr. Russ MacDonald, representing Washoe County said because of its economic impact, they endorsed the bill,

Mr. George Bennett added that this bill appled to nursing homes and special licensed institutions only. There was a great economic impact. The money derived from the return of the druges would be dispensed to the patient or his representative. Many of the returnable drugs were very expensive.

Senator Ford spoke in favor of <u>SB 331</u>. She said the cost of good drugs destroyed each year was criminal. She said those drugs deemed returnable would be strictly controlled by the Board. Many of these drugs were paid for by the State and anything than can be done to lessen the costs of medical care should be done. She stated she had gone into a nursing home and observed the method of drug handling.and it was very stringently controlled.

Mr. Craddock expressed concern over the syringe that was not tamper-proof.

Mr. Brady echoed the concern, and added there was potential for great damage if items had been tampered with or was contaminated were returned for resale.

Mr. George Bennett assured the Committee that particular item would not

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SB 331 - continued (Mr. G. Bennett speaking)

be eligible for return. The items eligible for return would be approved by the Welfare Department. The full purchase price of the drug would not be refundable. There would be a fee for handling.

Mr. George Bennett suggested amending <u>SB 331</u> by adding on line 11 after the word "vials"- and sealed tamper-proof syringes.

AB 834

Dr. Rebecca Jankovich, Director for rural clinics, stated they were in faovr of AB 834. Rural clinics are part of Division of Mental Hygiene and Mental Health. They are in receipt of a federal grant for the operation of community mental health centers. The rural clinics governing board was originally developed to be in compliance with funding requirements for Public Law 9463. The specification in the proposed bill for membership, powers and functions of board members are directly out of the federal law that they must follow in order to continue receiving the federal monies, The bill is being proposed because the governing board does set general policies for rural clinics which are not already set by the Division of Mental Hygiene and Mental Retardation or other state or federal sources. They are subject to suit should be health clinic be a party in a malpractice suit. The members of the board are concerned because they do not receive liability insurance coverage for their participation in a policy setting body. Because they are not a statutory board, the Attorney General's office verifies the position of the board - they are not afforded any liability or tort suite coverage. They could be named as individual defendants. To be covered under the state's insurance, they must become a statutory board. It will cost no more to operate as a statutory board than as a nonstatutory board. Presently, the rural clinics operating budget covers the travel expenditures, postage, telephone, stationary, and NIC coverage. The total cost for the governing board to the Agency is \$8,000 a year. These funds would have to be expended to maintain the board whether or not it is a statutory board, as long as they receive the federal funds. If the State elects not to receive the Community Health Center funds that require the board - the citizen input of the board is still good. Adverse criticisms and decisions could perhaps be avoided if citizens who are receiving services have the opportunity to influence policy. During the 17 months the board has been in existance, there has been no conflicts in policy setting.

Mr. Brady questioned line 17 that reads "Not less than four female members".

Dr. Jankovich replied that Public Law 9436 requres that the membership of the governing board be representative of the area served. Over 50% of the population in rural Nevada are women therefore the governing board must have that percentage of women. For the same reason there must be advocates for youth, elderly, and American Indians. They have negotiated some of this with the Federal Government. They cannot require a youth or elderly person to be on this board. It would be to condition in the maintain board membership.

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Minutes of the Nevada State Legislature Assembly Committee on HEALTH AND WELFARE Date: May 16, 1979

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Mr. Glover commented this bill was going to have to go to Ways and Means Commitee because of the fiscal note.

Dr. Jankovich replied this was already in the budget and did not necessitate an increase.

Mr. Glover objected to putting into State statutes board requirements for specific numbers of women or men. He added it was late in the session to try to amend the bill.

Chairman Bennett asked if Dr. Desibio approved of this measure and was informed that he was aware of the bill and had had his staff submit it, although he had not made a definite statement as to his position.

Chairman Bennett commented <u>AB 834</u> did have a fiscal impact and was informed addition of budget categories was not required, it does not change their operating budget.

Mr. Bill Bible's opinion was that Ways and Means did not necessarily have to hear the bill. The Chairman of Ways and Means could, if he so chose, have the measure re-referred to his committee.

Chairm Bennett said he would confer with the Ways and Means Chairman.

Dr. Jankovich, referring to earlier testimony and questions, suggested changing the wording of the bill to say - "The board shall be composed of individuals that are representative as to employment, age, sex, place of residence, and other demographic characteristics." (EXHIBIT # 2)

The Committee agreed they much preferred this wording to the wording in the bill.

Mr. Brady stated he would not vote "yes" on the measure without a change in the wording.

SB 466

Mr. Glover moved to Do Pass <u>SB 466</u>. Mr. Brady seconded the motion; Chairman Bennett, Mr. Chaney, Mr. Craddock, Mr. Glover and Mr. Brady voted "yes". Motion carried.

SB 159

Chairman Bennett said he had an amendment - On page 1, Section 1, Subsection 2, line 15, add: Licensed pharmacies compounding or packing prescriptions are exempt from this provision.

Mr. Glover moved to Do Pass As Amended <u>SB 159</u>. Mr. Brady seconded the motion. Chairman Bennett, Mr. Chaney, Mr. Craddock, and Mr. Brady voted "yes". Motion carried.

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SB 412

Mr. Glover moved to Indefinitely Postpone <u>SB</u> 412. Mr. Brady seconded the motion. Chairman Bennett, Mr. Chaney, Mr. Craddock Mr. Glover and Mr. Brady voted "yes". Motion carried.

AB 834

Mr. Craddock moved to Do Pass As Amended AB 834 (exhibit # 2).

After Committee discussion it was decided to hold this bill.

SB 81

Mr. Glover moved to Do Pass <u>SB 81</u>. Mr. Craddock seconded the motion. Chairman Bennett, Mr. Craddock, Mr. Glover and Mr. Chaney voted "yes". Mr. Brady voted "no". Motion carried.

SB 351

Mr. Chaney moved to Do Pass <u>SB 351</u>. Mr.Glover seconded the motion Chairman Bennett, Mr. Chaney, Mr. Craddock, Mr. Glover and Mr. Brady voted "yes". Motion carried.

SB 331

Mr. Glover Moved to Do Pass <u>SB 331</u>. Mr. Brady seconded the motion. Chairman Bennett, Mr. Chaney, Mr. Craddock, Mr. Glover and Mr. Brady voted"Yes". Motion carried

AB 742

Mr. Chaney moved to Do Pass AB 742. Mr. Craddock seconded the motion. Chairman Bennett, Mr. Chaney, and Mr. Craddock voted "Yes". Mr. Glover and Mr. Brady voted "No". Motion failed.

AB 743

Mr. Chaney moved we Indefinitely Postpone AB 743, Mr. Brady seconded the motion.

Mr. Craddock said <u>AB 742</u> and <u>AB 743</u> were worthy of consideration. No Action.

Mr. Glover moved to suspend the 5 day advance notice of meeting rule. Mr. Brady seconded the motion, Motion carried unanimously.

Meeting adjourned at 6:15 p.m.

Respectfully submitted:

M. Rehertson MARJORIE D. ROBERTSON, SECRETARY

(Committee Minutes)

ASSEMBLY HEALTH AND WELFARE COMMITTEE

GUEST LIST

Date: 5/16

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Ted Oleson	American Civil Cub- ties Union	- ť		5.6. 351
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HEALTH AND WELFARE COMMITTEE

LEGISLATIVE ACTION

DATE May 16, 1979

SUBJECT SB 466

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HEALTH AND WELFARE COMMITTEE

LEGISLATIVE ACTION

DATE May 16, 1979

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		60th NEVADA	LEGISLATUR	E			
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60th	NEVADA	LEGISLATURE

HEALTH AND WELFARE COMMITTEE

LEGISLATIVE ACTION

<u>May 16, 1979</u> DA

SUBJECT SB 8	1	•				
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HEALTH AND WELFARE COMMITTEE

LEGISLATIVE ACTION

DATE	May	16,	1979	· ,
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SUBJECT SB 351

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HEALTH AND WELFARE COMMITTEE

LEGISLATIVE ACTION

DATE 1	<u>May 16,</u>	1979	
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SUBJECT SB 331

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HEALTH AND WELFARE COMMITTEE

		LEGISL	ATIVE ACT	ION			
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SUBJECT AB 742							
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Suit blasts Douglas jail

United Press International

The American Civil Liberties Union has filed suit in Reno claiming that the Douglas County Jail is not fit to keep prisoners in and that prisoners' rights are being violated by jail policies and conditions.

The action was filed in U.S. District Court on behalf of Miguel deCruz and six other prisoners. It claims that on at least one occasion, the sewage system backed, up covering the jail-area floor with several inches of sewage.

The suit asks that Douglas County's District Attorney's Office, the county commissioners and Sheriff Jerry Maple be enjoined from keeping prisoners in the jail because it is "improper to hold any number of prisoners."

It calls on the court to order conditions upgraded and policies and practices of the jail brought into line with constitutional guarrantees. The suit asks a special master or human rights committee be appointed to make sure the complaints are taken care of.

The jail was built in 1915 and expanded somewhat later to a maximum capacity of 24 inmates. The suit says the jail has held up to 38 prisoners, forcing installation of four bunks in cells designed to hold two, and claims that, "often prisoners have to sleep on the floor."

It claims the jail lighting and ventilation are inadequate and that health care for inmates is "virtually non-existant." It charges that prisoners most often get TV dinners and that even those are often not properly prepared. In addition, the action complains that the rights of Spanish-speaking prisoners are being violated by jail policies forbidding the prisoners from writing their families in Spanish for security reasons. It says that effectively prevents them from communicating with their families.

Finally, it says discipline is being imposed on prisoners in the jail without due process.

In addition to DeCruz, the prisoners named as plaintiffs on the suit are Joe Hernandez, Robert Lupien, Carlos Salazar, William Harvey, Roger Hoetnick and Louis Robles.

A sheriff's spokesman said there were 22 prisoners in the facility Monday, two less than the jail's designed maximum.

The suit says: "By reason of the manner in which the defendants operate and maintain the Douglas County Jail, plaintiffs have been and are now subject to unsafe and unhealthy living conditions, including severe overcrowding, inadequate sanitary and health facilities, inadequate food service facilities and diet and the imposition of discipline without due process of law."

There was some money budgeted to upgrade ventilation and other equipment at the jail in the Douglas County budget for the coming year, but those funds were cut amid concerns that tax cuts would reduce county revenues. There is also a proposal for a special bond election being considered by the county which would ask taxpayers for money to construct a new jail facility.

EXHIBII A ---- 291

JOHN H. CARR, M.D., M.P.H., F.A.A.P. STATE HEALTH OFFICER



EXHIBIT 1

(702) 885-4475

NEVADA STATE DIVISION OF HEALTH

BUREAU OF HEALTH FACILITIES CAPITOL COMPLEX 505 EAST KING STREET CARSON CITY, NEVADA 89710

August 4, 1976

MEMORANDUM

- TO: John H. Carr, M.D. State Health Officer
- FROM: William L. Thomason, D.D.S. (M) Administrator, Bureau of Health Facilities

SUBJECT: Correctional Institution Health and Sanitation Regulations

The following is a synopsis of the information we have collected relative to rules and regulations of jails and prisons:

Inspection:

38 states have inspection of all jails.

25 states have inspection at specified intervals.

Standards:

34 states have legislative authority to prescribe standards for local jails, which include Nevada (NRS 444.335).

Enforcement:

12 states authorize specific enforcement measures such as orders closing institutions, seeking injunctions, etc.

13 states are silent on explicit remedies but authorize appropriate corrective action in general terms.

Regulatory Agency:

31 states have state level regulatory agencies.

8 states have both state and county level regulatory agencies.

8 states have county regulatory agencies only.

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August 4, 1976

Memo: Correctional Institution Health and Sanitation Regulations Page 2

Regulatory Agency: (continued)

Of the 31 states that have regulatory agencies at the state level;

25 states operate through a corrections agency,

6 states operate through an independent or designated agency.

The Areas of Inspection are:

Administrative area, including record-keeping procedures;

Health and medical services;

Offenders' leisure activities, employment, education and work programs;

Offenders' housing and recreation programs;

Food service

Observation of rights of offenders.

Of the 32 inquiries sent to other states and correction oriented organizations we have had 16 responses. The following are excerpts of responses from several states:

Utah:

"The Division of Corrections is currently writing a manual on procedures for fails."

New Mexico:

"There are no regulations of jails in the Health Agency."

Idaho:

"The Department of Health and Welfare has no jurisdiction over nor regulation for penal institutions."

Hawaii:

"The Department of Health has no specific rules and regulations for health facilities within penal institutions."

Wisconsin:

"The Department of Health and Social Services - Division of Corrections is currently developing a draft of Operational Procedures." (They also express the concern: "The question arises as to the inmate's right to sue in the event we cannot produce the requirements as established in our manual.") August 4, 1976 Memo: Correctional Institution Health and Sanitation Regulations Page 3

Illinois:

"The Department of Corrections has health and sanitation covered in the Administrative manual."

Massachusetts:

"The Department of Corrections is in the process of developing standards for health care in correctional institutions."

Minnesota:

"The Department of Corrections has just undertaken the task of developing a comprehensive health care policy manual for use in all of our penal institutions."

New Jersey:

"The Division of Correction and Parole has standards that are used in evaluating the medical care within our state correctional institutions."

North Carolina:

"The Department of Corrections - Division of Prisons has a set of medical policies."

California:

"The Department of Corrections Administration Manual covers health care."

Of the responding states, none has Health Agency regulations for penal institutions.

The Nevada Revised Statutes provide for placement of responsibilities for inspection of jails, treatment and condition of prisoners with the County Commissioners:

NRS 211.020 Duties of the Board of County Commissioners: Supervision; inspection; precaution. The Board of County Commissioners shall:

- 1. Have the care of building, inspecting and repairing such jail.
- 2. Once every 3 months, inquire into the state thereof, as respects the security thereof, treatment and condition of the prisoners.
- 3. Take all necessary precautions against escape, sickness or infection.

WLT/WJW/cif

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EXHIBIT



JOHN H. CARR, M.D., M.P.H., F.A.A.P. State Health Officer

PHONE (702) 885-4740

STATE OF NEVADA - Capitol Complex DEPARTMENT OF HUMAN RESOURCES

DIVISION OF HEALTH CARSON CITY. NEVADA 200700 89710

August 25, 1976

MEMORANDUM

TO: BOARD OF HEALTH FROM: John H. Carr, M.D. State Health Officer

SUBJECT: Penal Institution Standards

This is an early outline of some items for consideration by the Board should it undertake a study of the rules and regulations concerning jails.

JHC/bws

EXHIBIT

A

PENAL INSTITUTION STANDARDS

1. Healthfulness

- 1.1 Healthfulness shall include adequate exercise and sleep, proper diet, provisions for personal hygiene, and a clean safe environment.
- 1.2 Access to medical (including emergency medical treatment) and dental care shall be provided.

2. Sanitation and Cleanliness

2.1 Penal institutions shall meet recognized standards set forth by the Consumer Health Protection Services Bureau of the Nevada State Division of Health.

3. Safety

- 3.1 Penal institutions shall meet the requirements set forth in the <u>Occupational Safety and Health Standards</u> adopted by the Department of Occupational Safety and Health, Nevada Industrial Commission, under the provisions of the Nevada Occupational Safety and Health Act of 1973 (NRS 618).
- 3.2 Penal institutions shall comply with applicable portions of the <u>National Fire Protection Association</u> (NFPA) 101, 1973 edition, adopted by the State Fire Marshal.
- 3.3 Penal institutions shall comply with appropriate codes of the <u>Uniform</u> Building Code, 1976 edition.

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EXHIBIT

RURAL CLINICS COMMUNITY MENTAL HEALTH CENTER GOVERNING BOARD

Rural Clinics Community Mental Health Center Governing Board: Creation; number, qualifications and appointment of members.

- There is hereby created the Rural Clinics Community Mental Health Center Governing Board composed of 7 members appointed by and responsible to the Governor and serving at the pleasure of the Governor.
- 2. The members of the board shall be selected with special reference to their ability and fitness to provide community input on mental health services in compliance with PL 94-63 which requires a governing body to be established. Each of the rural bodies advising one of the seven Rural Clinic's satellite offices will submit to the Governor a list of their membership complete with individual resumes. The Governor may appoint one member from each of the rural advisory bodies to serve on the Governing Body as a representative of the rural catchment area within which the member resides. The Governor's selections shall be in accordance with the composition requirements stated in subsection 3 below.
- 3. The board shall be composed of individuals residing in the rural counties (excluding Clark and Washoe Counties) and are representative as to employment, age, sex, place of residence, and other demographic characteristics, at least one-half of whom are not providers of health care. At least 50% of the board shall be women. The board shall consist of at least one member from each of the following categories:
 - a) One youth advocate
 - b) One elderly advocate
 - c) One Native American
 - d) One low-income representative whose income is between 40-60% of the State median income as established by the State Welfare Division.

EXHIBIT # 2

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STATE OF NEVADA DEPARTMENT OF HUMAN RESOURCES DIVISION OF HEALTH BUREAU OF CONSUMER HEALTH PROTECTION SERVICES CAPITOL COMPLEX

CARSON CITY, NEVADA 89710

TELEPHONE (702) 885-4750

May 16, 1979

The Honorable Marion D. Bennett Chairman Assembly Health and Welfare Committee Legislative Building Carson City, Nevada 89710

RE: SB 159 SECOND REPRINT

The question has arisen that a pharmacy may not be exempt from a manufacture license as the wording is now. That certainly was not the intent. To clarify, I am proposing an amendment that should make this clear.

On page 1, Section 1, Sub. 2, line 15, add: <u>Licensed</u> pharmacies compounding or packing prescriptions are exempt from this provision.

Remark Elementer

James A. Edmundson Commissioner of Food and Drugs

JAE:jas

CC: George Bennett

note: I concur -George T. Bennett, Acc. Nev. Ed g Pharmacy

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EXHIBIT B