

MINUTES

WAYS AND MEANS COMMITTEE

NEVADA STATE LEGISLATURE - 60th SESSION

February 16, 1979

Chairman Mello called the meeting to order at 7:30 a.m.

PRESENT: Chairman Mello, Vice-Chairman Bremner, Mr. Barengo, Mrs. Cavnar, Mr. Glover, Mr. Hickey, Mr. Mann, Mr. Rhoads, Mr. Vergiels, Mrs. Wagner, Mr. Webb.

ALSO PRESENT: Bill Bible, Fiscal Analyst; Judy Matteucci, Deputy Fiscal Analyst; Mike Alastuey, Deputy Budget Director; Dr. Ralph DiSibio, Department of Human Resources; Dr. John Carr, State Health Office; Paul Cohen, State Health Office; Gil Blonsley, Clark County Health District; Howard Clodfelter, Washoe County Health District; Laura Kerin, Special Childrens' Group.

DEPARTMENT OF HUMAN RESOURCES

CANCER CONTROL BUDGET

Dr. DiSibio presented this budget which is not included in the Executive Budget, and distributed a handout (Exhibit "A"). This program, which would be in the Health Department, provides for the establishment of a cancer registry in Northern Nevada. He said that information provided from deceased and living cancer patients would be turned over to the State Department of Vital Statistics for a state-wide registry in an effort to determine whether radiation fall-out from the atomic test site did cause radiation-induced cancers.

Mr. Rhoads asked what would be done to find cancer patients. Dr. DiSibio explained that the program would register the incidence of cancer, track it, and track treatment as it is given nationally and in the State. He said that there is currently no data in Northern Nevada, and this program would provide that data.

Mr. Glover asked who would receive the information. Dr. DiSibio said that it would primarily be computerized. By use of a hand register, each hospitalized patient being treated for cancer will be tracked, and then the information will be put into a central data center. He said that the data will not relate to a particular person, just the incidence of the disease, and that patients will not be tracked by name.

HEALTH DIVISION

OFFICE OF THE HEALTH OFFICER

Chairman Mello introduced Dr. John Carr, State Health Officer, and Paul Cohen, Administrator, Health Services Office.

Dr. Carr explained that this Division is primarily responsible for enforcing the public health laws in Nevada. He said that there are six bureaus besides the Office of Health Officer in the Health Division.

Assembly

Dr. Carr said that a new Account Clerk position is being requested to handle increased financial transactions for the Division.

Mr. Bremner asked if there was overspending in the in-state travel line item in the last year of the last biennium. Mr. Cohen said he did not believe so, but would get the figures together and present them to the Committee.

Chairman Mello commented that the in-state travel indicates a decrease. Dr. Carr replied that there has been a reduction in the number of meetings of the Board of Health from once a month to once every six weeks, and he said that some of the decrease is due to the removal of the nutrition section into a separate account.

Chairman Mello asked for an explanation of the unusually high dues and registration line item. Dr. Carr responded that the dues for some organizations have increased, as has the number of organizations to which the Health Officer must belong, but that primarily the line item provides dues in the Association of Territorial and State Health Officers which amounts to \$1,250.00 each year.

Mrs. Wagner asked about the Health Officer and staff traveling in the out-of-state travel category. Dr. Carr stated that he, Mr. Cohen, those in the business office, and the management analysts are included in the staff that would have to travel. He pointed out that these staff personnel usually do not travel, but that the budget reflects monies to have at hand in the event that they are required to travel.

Mrs. Wagner also asked about the Principal Account Clerk position, and commented that the work program last year shows \$11,122 and that it has now jumped to \$15,388. She asked for a comparison with other positions. Dr. Carr explained that this position was an underfill. He said that historically, the Health Division has promoted those in underfill positions, and during the last year, the Division promoted within the authorized level for this position.

Mr. Vergiels asked about the reconciliation revenue item. Dr. Carr and Mr. Cohen stated that they did not know what it represented; however, Mr. Bible answered that it is a residual balance from Fund 600 and was placed in this account for reversion purposes.

Mr. Rhoads asked about the increase in training expenses. Mr. Cohen stated that this includes upgrading of the quarterly monitoring of programs and training in fiscal auditing.

#### VITAL STATISTICS

Dr. Carr stated that this section is responsible for birth, death, divorce, marriage, and adoption information. Mrs. Wagner asked what the 50,000 pieces of confidential correspondence, as addressed in the program narrative, were. Dr. Carr stated this correspondence included court ordered birth, death, and adoption confidential records.

Mr. Barengo asked Dr. Carr to provide a list of all confidential documents and the authority for the confidentiality of this information to the Committee.

#### SILICOSIS PROGRAM

Dr. Carr stated that this program has been an item in the Division's budget for a number of years and provides compensation for silicosis victims and their survivors. Dr. Carr commented that it is his understanding that a Senate bill is being introduced which would take this program out of the Division, and the survivors would be paid out of the interest in the fund which would be established in the amount of \$190,681.

#### BUREAU OF COMMUNITY HEALTH SERVICES

Dr. Carr commented that there have been a considerable number of changes in the Bureau, and that some of the services, such as

nutrition, are now free-standing, while others are transfers to other budget accounts.

Mr. Vergiels asked if there have been position transfers, why the budget has been increased. Mr. Cohen explained that although six individuals were transferred out of the budget, an additional position was added administratively, plus two one-and-a-half additional nursing positions for rural county services are requested. He explained that those positions have a percentage funded by the State and a percentage funded by the county. Historically, a portion of the funds came from in-state travel; however, the in-state travel increase is needed to travel to rural Nevada, he said.

Mrs. Wagner asked why the contractual services item was being increased. Mr. Cohen explained that prior to the coming biennium, there was a cervical cancer program, which was funded by the National Cancer Institute. He said that that contract ends June 30, 1979, and although the four positions in this program will not be requested, a request is being made to allow the rural nurses \$14,950 the first year of the biennium and \$16,405 the second year to be able to contract out for pap smears.

Mrs. Wagner also asked about the decrease in medical and dental expenses. Mr. Cohen explained that for fiscal year 1978 and fiscal year 1979, drugs and medications used for the venereal disease program were included in this line item. He said that with the transfer of the VD program, there is a reduction in the expense amount. He added that the remaining \$6,000 is to be used for purchasing syringes, gowns, alcohol, and so forth.

#### TUBERCULOSIS CONTROL

Dr. Carr addressed the one-shot appropriation request of \$42,400, which he said would provide funds to meet the additional costs of hospitalization of TB patients. He added that there has been a 44% increase of reported TB in Clark County alone and added that it is difficult to predict the number of TB patients.

Chairman Mello asked if tuberculosis patients have one particular occupation in common. Gil Blonsley, Administrative Officer, Clark County Health District, responded that in Clark County in 1977, there were 23 patients, and 41 patients in 1978. Howard Clodfelter, Washoe County Health District, said that there was a program a few years ago to test for common occupation, but the rates became so low that the program was not cost-effective. He added that there does appear to be a high incidence of the disease among food service workers.

Mrs. Wagner asked if there were any statistical information on TB. Dr. Carr stated there had been a TB register to track patients.

#### DENTAL HEALTH

Dr. Carr stated that under this program, there are two fixed clinics for taking care of children up through age 13. He said the program does not include orthodontia or removal of teeth--these are covered under contract services. Dr. Carr stated that the Dental Hygienist position in the Carson City office has been vacant since March of 1977, because of the low salary.

Chairman Mello asked what type of salary would be needed to compete with private enterprise, and Dr. Carr stated that Personnel is doing an analysis now and that information would be given to the Committee by next session. Chairman Mello further asked if the position was needed, and Dr. Carr answered that it would be cost-effective to have the position as the dentist could then provide more services.

Mrs. Wagner asked about the increase in contractual services. Dr. Carr explained that this is for the dentist in the rural areas. He

went on to say that the agency had a contract with Welfare for dental service expenses at the customary expense rate in the rural areas, but this contract was dropped. He said that the Health Division picked up the services, but only paid at relative scale, therefore, many dentists would not participate because they would not receive their customary fees. The request for additional monies is to attempt to deal with this situation.

Chairman Mello asked if it would help to delete the existing positions that have been vacant since March and put those funds into the contractual services item, and Dr. Carr stated that it would help. Chairman Mello commented that it would also save the State some money.

Mr. Barengo questioned the out-of-state travel, and Dr. Carr stated that it is for the Bureau Chief of Dental Health, Carson City, to travel to conferences, etc.

#### BUREAU OF MATERNAL AND CHILD HEALTH

Dr. Carr explained that this program also includes crippled children's services and a family planning program. It also includes a Pregnancy Outcome Program, which is identified in a separate budget. He said that there is a metabolic screening program which was authorized by the 1977 Legislature and has been in operation since January of last year.

Dr. Carr went on to address the Title V positions in the budget. He explained that there are two clerical positions, one in Las Vegas and one in Reno, which are support staff for eligibility workers in the crippled children's program. He added that there is a Career Aide position requested for the central office to provide support in up-dating billings, which are 6-12 months behind. He explained that billings are determined on an individual application basis in terms of whether the parents can pay all of the services, a percentage of the services, or none of the services, and whether or not insurance benefits can be garnered.

Chairman Mello asked how that relates to the Blue Shield Plan, and Dr. Carr explained that a contract with Blue Shield was initiated to attempt to reduce the backlog of \$700,000 in billings, and that the agency has been working with Blue Shield since May or June of last year. He said that Blue Shield, however, is not sure that they can handle the situation. In view of the billing provision, Blue Shield is asking for increases that the agency is not prepared to agree to until it is determined whether or not Blue Shield can "deliver the goods." He added that it is unlikely that they can handle it.

Mrs. Wagner asked about the new location of the Special Children's Clinic and why the Capital Improvement Project is not being recommended by the Governor. She inquired if this was high on the list of priorities of the Health Division. Mr. Cohen answered that it definitely was. He stated that an application had been submitted for a Fleischmann grant about two years ago as part of the MH/MR package before Interim Finance. It was also the only priority for capital improvements to the Public Works Board. Mr. Cohen said that a house on Mill Street had been used by the program, but was declared unsafe by the Fire Marshal, and that the agency was given 30 days to move the children and the total program. He said that this was at the time that space was at a premium in Reno, and that the agency went to several other agencies, realtors, and the like, and was finally able to acquire a 5,000 square foot building in which to place not only the special children, but the crippled children, the speech and hearing clinic, and the infant stimulation program as well. However, he said there has been a tremendous rent increase, and the facility is now inadequate because of program growth and need. The agency now needs approximately 13,000 to 15,000 square feet. The Public Works Board put this need as number 17 on their list of "do not support" items, which was 84th

on the total list submitted by them. The agency has asked that it be allowed to pursue the Fleischmann grant on its own rather than through the Department, and Dr. DiSibio indicated that the request had neither been guaranteed or denied at this time.

Dr. Carr added that there has been tremendous concern over the situation and that the lessor has indicated that at the time the present lease expires, April, 1981, he would be willing to build to suit and then lease to the children's clinic and would be able, hopefully, to house a dental clinic as well. He said, however, that the rebuilding may not meet program needs and if the lessor cannot agree to certain improvements, the lease can be broken.

Mrs. Wagner asked about the request for \$55,936, and Dr. Carr said it was for a Psychologist V position. Mrs. Wagner then asked what the difference is between the Special Children's Clinic's budget request and the budget request the Health Division made to the Governor for this program. Mr. Cohen answered that the Special Children's Clinic requested fifteen additional staff positions, two of which have been shown in Title V, and two additional support staff which had been allocated to them. Mr. Cohen added that the money had been placed in the Medical Care category and that line position could not be added because of the Federal program reports asking for specific information about clients, criteria, and so forth, without which the agency could not justify additional staff until it could be determined how much of the contractual services personnel is actually complying with their contract and providing the required contract services. He said that it is the intention of the agency to determine if such position as an audiologist position is warranted full-time, and, if so, about \$10.00 per hour can be saved by converting this contract position to a State employee.

Mrs. Wagner asked about the status of caseload, and Dr. Carr replied that it has increased. He added that the agency is attempting to determine if an active case definition is one that is seen once a year, or once every six months, or if it is someone who has been terminated or has transferred. He said that this criteria is being developed at this time, and the information will be provided to the Committee.

Mrs. Wagner asked if the Psychologist V position is an M.D. or a Ph.D., and Dr. Carr stated that it is a Ph.D. position. Mrs. Wagner then asked if the two psychologist positions are currently filled and Dr. Carr said they were, but there will be a resignation in Las Vegas effective March 16. The resignation occurred within the last five weeks, and the replacement will be a Ph.D. Dr. Carr emphasized that the thrust of the program will remain the same with expansion.

Mrs. Wagner pointed out that while caseload has increased, there is no increase in staff, and asked if there was money in contractual services for this. Mr. Cohen replied that if the legislative money committees approve it, there will be money in contractual services. Mrs. Wagner asked for a listing of where those contractual services monies would be going and Mr. Cohen said that he would provide this information to the Committee.

Mr. Bremner asked for an explanation of the Senior Physician, Range B, half-time position. Mr. Cohen answered that this is the half-time pediatrician who is the Medical Director of the Las Vegas clinic as of January 22. Mr. Bremner asked if the Budget Division approved that position, and Mr. Cohen said it did. Mr. Alastuey interjected that funds for this position were displaced from contract services. Mr. Cohen added that the contract pediatricians were being paid \$40.00 per hour, and as State employees, the pediatricians are paid \$18.00 to \$19.00 per hour.

Mr. Hickey asked why there was no charge for services even though there may be an ability to pay. Dr. Carr said that although there is no charge, the agency has been advised to try and seek third party

reimbursement if the patients have it. Mr. Hickey requested information on those patients with insurance coverage for services and information on this problem in other states.

Chairman Mello asked what the insurance and refunds item was. Dr. Carr explained that this is money received by the crippled children's program where insurance companies have paid more than what the agency originally thought. He cited the example of a family paying 20% and crippled children's paying 80%. With a miscalculation of third party reimbursement, the agency would be entitled to receive more money back. Mr. Cohen added that if Blue Shield handled this component, the money would go through Blue Shield and the person who had the coverage, and the State would not be involved. It was projected that if this worked, the agency would experience a slight reduction in the first year of the biennium and a drastic reduction in the second year in these revenues.

Mr. Hickey asked for clarification of in-state travel expenses and the relationship to various pressures on the areas where services are delivered. Dr. Carr explained that it is a trade-off between service and dollars and commented that this is hard to equate. It is difficult for handicapped children to be brought to the clinic from outlying areas, and even though more economically feasible to do this, it has been the agency's policy to go to these children. He said that the agency is attempting to cost this out.

Chairman Mello introduced Laura Kerin, whose prepared remarks are attached as Exhibit "B." Mrs. Kerin concluded her remarks by bringing forward her seven year old daughter who suffers from Down's Syndrome. Mrs. Chris Baker was also present, and she has a two month old daughter waiting for services at the Special Children's Clinic which will be unavailable for at least 12 months. Mrs. Jane Francioli addressed the Committee and said that she is extremely pleased with her son's progress at the clinic. Mrs. Francioli distributed a handout (Exhibit "C") to the Committee.

Mrs. Wagner asked if the thrust of the program would be referral or treatment. Dr. Carr explained that if children can be treated on-site, then the thrust is treatment. However, the directional change anticipated is to get to lower age groups for earlier intervention. He reiterated that the thrust of the program will not change.

#### BUREAU OF HEALTH FACILITIES

Dr. DiSibio addressed a change in the budget on Page 267. The position, put there by the Governor, exists presently within this budget, but the proposal was to take it out and place it into Welfare's child care services. Welfare did not feel they could do the job with the manpower offered, and as a result, it is anticipated that the Division may approach the subcommittee to consider putting the existing two positions, one in the Health Division and one in the Welfare Division, in a youth and juvenile type of division.

Mr. Vergiels asked who notifies persons of meetings, changes in licensing requirements, or the setting or changing of regulations. Dr. Cohen said that the Bureau of Health Facilities keeps a list of all interested persons, and anyone who is interested, should notify the agency and they will be put on the list. Mr. Vergiels asked if a letter was sent out asking people if they wanted to be renewed on the mailing list. Mr. Cohen said he did not know, but would find out. Mr. Vergiels went on to say that Mr. Kosinski had sent a letter to Mr. Cohen asking that he contact certain persons relative to meetings, and those persons have said they were not notified, and when they called Mr. Cohen's office, they were told that under law they did not have to be notified. Mr. Cohen said he did not know about this and would have to find out. Mr. Vergiels also said that there is a compilation of literature relative to this issue which has been collected, and it is being traced so that assurance can be given that people are given the right to be heard and are given the right to add input into the proceedings.

Chairman Mello commented that the monies for "Other Government Services" goes to the Fire Marshal, but asked where it would go since the Fire Marshal's budget has been deleted in the Governor's recommendation for the next biennium. Mr. Cohen said that the funds are for Federal compliance with the Life Safety Code, and if there is no Fire Marshal, the agency will have to contract out with some entity for compliance under Title XVIII and Title XIX. Chairman Mello then asked where the funds would go, and Mr. Cohen said that if the Insurance Division would pick it up, it would go to Insurance. Mr. Alastuey added that the money would be the same if the Insurance Division could pick up the program; however, under the recommended staffing changes, there would be the possibility of having to add another position. Chairman Mello observed that with the addition of all the new positions, soon the Fire Marshal's office would be back to the same size that it is currently.

#### CONSUMER HEALTH PROTECTION SERVICES

Mr. Cohen stated that some of these positions are part of the Safe Drinking Water Programs. The last legislature had a budget account, 3195, in which State appropriations were put as a required match. By placing the water program into Consumer Protection, the agency responsible for administering both the primary and secondary water standards, it was felt that existing State appropriations were sufficient to comply with the Federal requirement of a 25% match. The increase from the work program to the agency request reflects the consolidation into this budget. There are six temporary positions funded out of these Federal funds.

Chairman Mello asked if there was enough money in Radioactive Disposal. Mr. Cohen answered that there was a change in the budget, and Mr. Alastuey explained that the oversight occurred because the two budgets came from two different offices in Human Resources. He said that the transfer is reflected under "Inspection," in the Radioactive Disposal account on Page 300, and the amounts shown as "Radioactive Disposal" should be changed to reflect \$16,105 the first year of the biennium and \$17,071 the second year.

Mrs. Cavnar asked if there was any radioactive monitoring of water. Dr. Carr said there was under the radiological section of the agency.

#### DRINKING WATER PROGRAM

Mr. Cohen stated that heretofore this has been a separate budget. By consolidating it into the Consumer Protection Services, there has been some savings to the State, as the agency only has to match 25%.

Chairman Mello asked exactly how much was saved, and Dr. Carr stated that \$36,132 for the first year of the biennium has been saved and it is projected that \$39,579 will be saved in the second year. Chairman Mello then asked if that would save some General Fund monies, and Dr. Carr stated that the General Fund would be reduced by \$1,000.

#### HEALTH DIVISION - NUTRITION

Dr. Carr stated that this program was previously included in both the Office of the Health Officer budget and the Community Health Services budget. He went on to say that the out-of-state travel has been in three other budgets in the past, but has been put into the Nutrition budget primarily to cut down on a great deal of internal paperwork.

Dr. Carr stated that a new position is requested for providing consultation and services to the correctional system as well as to the various childrens' homes and schools. Additionally, it is understood that BDR 16-71 under Chapter 209 of the NRS will require the State Health Officer to check these facilities twice a year for medical, nutritional, and sanitary adequacy.

Mr. Vergiels asked about the Nutritionist II position, and questioned the justification of adding this position if the person was going to make two visits a year to the Boys' and Girls' Schools. Dr. Carr stated that he would travel to all of the correctional facilities and that consultation services would be provided upon request by the various local jails.

Mr. Barengo questioned the increases in salaries upon the transfer from other accounts, and Dr. Carr answered that these were upgrades in the nutrition series.

#### IMPROVED PREGNANCY OUTCOME PROGRAM

Dr. Carr stated that this program is entirely Federally funded and may provide up to \$400,000 per year for five years. Nevada was selected as a participating state because it was felt that the infant mortality rate was too high. He said that the year following the inception of the program, the mortality rate dropped below the national average, and has remained there since that time. However, Dr. Carr pointed out that the agency has not turned down the money. In order to continue qualifying for the funds, the regional office told the central office it had to be expanded, as it was too weak and unable to handle the task. Dr. Carr pointed out that the agency is working with EOB in Clark County and with the Washoe and Clark County District Health Departments in putting together a preventive program for infants, young women, and pregnant women.

Chairman Mello asked if this program was approved after the last session of the Legislature. Dr. Carr said that it had been approved in October of 1978.

Chairman Mello inquired about what would happen after the five years expires, and Dr. Carr replied that it would depend on how the program is evaluated. Chairman Mello then asked if there was a possibility that the agency would request continuation on State funding after the five years, and Dr. Carr stated that the agency would have worked on this program by that time anyway and that this current program just gave an impetus to the agency.

Chairman Mello questioned where the Federal government found money for these programs in view of the fact they are trying to control deficit spending.

Mr. Glover asked if there were any restrictions on the economic level of people entering this program, and Dr. Carr responded that it is open to everybody. However, he pointed out that there are restrictions on the use of the funds. For example, the money cannot be used for hospital live-in services.

Dr. Carr commented that the balance of the Federal money under contracts goes to the Medical School, which is primarily for training awareness information for the rural programs. There is nothing in the first year that says anything about high income people being eligible or ineligible for the Maternal and Youth Programs in Washoe, but Dr. Carr pointed out that the income level is at 200% of the poverty level in the program, which means a person has to make less than \$6,000.

Mr. Rhoads asked for an explanation of why the central staff had to be increased because of this budget, and further asked if this meant that other budgets were cut because this budget was put in. Dr. Carr stated that in order to take this program, the Federal government required that a nurse corps be supplied. He added that the personnel in this budget represent the Federal determination of the State's need in personnel for this program. Mr. Rhoads then asked if another position had to be put in, and Dr. Carr responded that he did not believe so. The requested Account Clerk is for the entire growth of the organization and is not just because of this particular program.

Mr. Mann asked why the agency accepted the money if the program was not needed. Dr. Carr answered that it was his opinion that the program



is needed, and Nevada is just below the national average. Mr. Rhoads commented that the general attitude appears to be to take the money because it is there and Federal money is free. He stated that he thought every program should be carefully considered for its real value, not just because the money is there.

Mr. Vergiels asked if the agency had to take the money or lose other Federal money, and Dr. Carr said this funding is free-standing: if these monies are turned down, no other monies are involved.

Mrs. Wagner stated that it had not been demonstrated that there was a need for the program, and that this should be brought up in the subcommittee. Chairman Mello commented that the agencies will attempt to come up with as much justification as possible to retain their budgets.

Mr. Glover requested that Dr. Carr provide the Committee with a list of grants that have been available and were not pursued, and why they were not pursued.

#### SPECIAL SUPPLEMENTAL FOOD PROGRAM FOR WOMEN, INFANTS, AND CHILDREN

Dr. Carr stated that this is a nationwide program to improve the nutritional status of pregnant women, women who are lactating, and children through age five.

Dr. Carr addressed the positions and stated that by converting the Community Nutrition Worker to a State position, the hourly rate changed from \$4.00 to \$3.79, and the Public Health Nutritionist position hourly rate changed from \$10.00 to \$7.39 as a State employee. By converting such positions, which are temporary and contingent upon Federal funds, \$13,400 is saved in administrative overhead that can be put into program areas. Dr. Carr explained that this is the reason the positions are shown as State positions and not contractual services.

Mr. Mann commented that the problem, as he sees it, is that under Federal funding, positions are temporary. They are then requested for transfer to permanent, State positions. Mr. Cohen responded that temporary positions are just that and are dropped when Federal money is no longer provided. Mr. Mann then asked if these positions would be transferred into other departments, and Mr. Cohen said that this is a free-standing program.

Chairman Mello observed that the members of the Committee were pretty much average Nevadans. He asked how many of the budgets the Committee reviewed really affected their lives.

#### HEALTH AID TO COUNTIES

Mr. Clodfelter stated that aid to counties was requested on a \$1.10 capitation basis, but was cut by the Governor's office. He asked that this be reinstated based on the growth of the community, and if funds are not available, programs will have to be cut.

Mr. Clodfelter pointed out that the Crippled Children's Services program was given back to the agency, but has since been taken over by the counties at additional cost.

Mr. Clodfelter stated that several counties share in administration of the tuberculosis program. Another program is the Safe Drinking Water Act, and it has been determined that to continue the program as required by the Act, it will cost approximately \$7,000. Further, Mr. Clodfelter stated that it has been necessary to cut inspections in the consumer health service to three times a year instead of four due to decreasing funds. Some of the requested money will go for education of the food service managers.

Chairman Mello suggested that in view of Question 6, perhaps the locals will have to think of some programs that can no longer be afforded and Mr. Clodfelter said that right now, the State is only picking up 6% of the county programs. Chairman Mello pointed out that if the State assumes much of the tax burden, the counties will have more available money.

Chairman Mello asked how well the county commissioners were treating the program, and Mr. Clodfelter said they were well treated. Chairman Mello also asked how much of an increase the county commissioners gave the program and Mr. Clodfelter stated that this program has been kept within a 7% increase. Mr. Clodfelter distributed a handout (Exhibit "D") of the services provided by the Washoe County Health Office.

Mr. Blonsley distributed a handout (Exhibit "E") which is primarily statistical information dealing with the volume in the Clark County Health District programs. He said he also supported the \$1.10 capitation level in the first year of the biennium and the \$1.25 level in the second year. He stated that 7% of the Clark County Health Office funds are from the State.

Mr. Blonsley stated that money for the venereal disease program has remained at the same funding level for the past two years throughout America and will remain so for the next year--\$42 million. He went on to say that most of what the local health departments carry out are mandated services, and in most instances, are the obligation of the State Health Division and the health districts in Washoe and Clark counties. The services are carried out through a cooperative effort with that State health division that has the local community paying for a substantial portion of that service and deriving the rest of the support through contractual services or through the Aid to Counties category.

Chairman Mello asked if the counties would have to pick up the services if all laws for health services were repealed, and Mr. Blonsley replied that this was correct.

#### VENEREAL DISEASE CONTROL

Chairman Mello asked Dr. Carr to address the venereal disease control account. Dr. Carr said that VD control is a section of the Bureau of Community Health Services. Chairman Mello then requested Dr. Carr to address the one-shot appropriation request for the Bureau of Laboratory and Research. Dr. Carr said that the one-shot request is for an atomic absorption spectrograph which does 20 tests at one time. He said that a conservative estimate is that it will save one chemist and one assistant per year, or about \$30,000. The one-shot is a request for purchase of this equipment which is currently leased. Dr. Carr pointed out that the lease money had originally been requested in the agency request.

Mrs. Wagner asked if the two positions had been removed from the agency's budget and Dr. Carr replied that they had been removed.

Mr. Mann asked if the positions were existing positions or new positions. Dr. Carr stated that they were new positions that had not been requested in view of the one-shot request. Mr. Mann stated that since the positions didn't come out of existing positions, the agency had not saved any money. Dr. Carr agreed.

#### EMERGENCY MEDICAL SERVICES

Dr. Carr stated that this section is also part of Community Health Services and pointed out the section contains a Fleischmann grant of \$1 million. He added that \$76,500 of the General Fund request is for matching monies to upgrade ambulances for the rural counties. He went on to say the Office of Traffic Safety provided \$10,500 and local match totalled \$108,000 for the ambulance upgrade.

Chairman Mello asked if the Committee would become involved with the radio network in the 1980-81 biennium. Mr. Cohen replied that there is a request for \$20,000 for maintenance of the microwave radio network which was included in the original proposal that was submitted to the Fleischmann Foundation with the State Communications Board. Chairman Mello asked what would happen if the \$20,000 were not approved, and Mr. Cohen said that the agency would then be violating one of the conditions for receiving Foundation monies. Chairman Mello asked for a copy of the agreement with the Fleischmann Foundation, and Mr. Cohen said that he would provide it.

#### IMMUNIZATION PROGRAM

Dr. Carr stated that this program is Federally funded and the appropriation request was for secretarial support. He said that it is essentially a one-man operation, run by a public information officer.

#### FAMILY PLANNING

Dr. Carr said that this program is an all-rural program, since Washoe and Clark counties have their own programs, and is now in the Maternal and Child Health budget. He pointed out that the regular appropriation is intended to provide match for the Social Services Title XX monies. He pointed out that there has been a reduction in the Title XX monies of \$30,000 each year to \$21,500 the first year and \$28,477 the second year. He said that if the Title XX monies are reduced, the General Fund match can be reduced.

Mrs. Wagner asked Dr. DiSibio if a report on the decisions being made by the Director's office on this, pursuant to Title XX monies, could be made available to the Committee. Dr. DiSibio replied that a report would be distributed by February 21st.

Mr. Glover asked what the agency planned on doing with the original request. Dr. DiSibio explained that it was to expand the family services in rural areas and he added that documentation could be provided to support a need. He said that the agency is limited on the amount of money, as a minimally funded State, that can be obtained from the Federal government. He added that the only way to expand rural county services is through a State appropriation, but that it was determined that because of Question 6, expansion of the program in this manner was not possible. Dr. DiSibio added that the agency felt that if an additional \$3,000 could be added to the \$2,000 base, and Title XX monies could be increased, the program could remain. He also said, however, that because of other priorities at the department level, this now has to be changed.

#### DRUG LICENSING

Mr. Cohen stated that this is a direct outgrowth of the laetrile/gerovital bill of 1977. He pointed out that a change in the Chemist II position should be noted, and that it was felt that the program could be managed more economically through contractual services, which are shown as other contract services in the amount of \$15,000.

Chairman Mello asked what the other contractual services are for. Mr. Cohen replied that \$2,000 is for a medical-technical advisory team that was formed for laetrile/gerovital.

Mr. Mann asked about out-of-state travel, since gerovital is only manufactured in Nevada. Mr. Cohen explained that the training was out-of-state and concerned U. S. Food and Drug regulations, manufacturing practices, and drug plant practices, etc.

Chairman Mello also asked about the out-of-state travel, reminding Mr. Cohen that out-of-state travel and training are two different areas. Mr. Cohen replied that out-of-state travel is for the bureau chief to attend a National Association of Food and Drug Officials Conference once a year.

Mrs. Wagner asked for the actual or potential caseload, and how many drug manufacturers are requesting to be licensed for laetrile and how many for gerovital. Mr. Cohen replied that there has never been a bona fide application for laetrile licensing, and one application has been made for gerovital licensing in Las Vegas.

#### URANIUM MILLS LICENSING

Dr. Carr stated that this is actually a potential program that the agency was asked to look into and fund in the event that large corporations indicated some interest in mining and milling uranium. He said that there have been two so far. It is anticipated that the program would be supported by fees charged to companies applying for this sort of certification.

Mr. Mann asked why this person has to go out-of-state, and Dr. Carr replied that there is nothing in Nevada that allows for licensure and training, therefore, the out-of-state travel request.

Chairman Mello asked if SB 237 relates to this budget and Dr. Carr replied that it does.

Mrs. Wagner asked if the uranium mills licensing budget is predicated on the assumption that some people will file for licensing. Dr. Carr replied that this is all it is and that the program will not become effective until the agency actually has a legitimate application on file. He added that the program will be paid for by fees assessed to those being regulated, like the drug licensing budget.

#### RADIOACTIVE MATERIAL DISPOSAL

Dr. Carr stated that this is a budget that is under the State Health Officer and shows basically that there are funds coming into the agency from areas under the Division's inspection. He pointed out that the inspection line item had been addressed under the Consumer Protection budget discussion.

The meeting was adjourned at 10:30 a.m.

DATE: 2/16/1979

WAYS AND MEANS COMMITTEE

GUEST LIST

NAME (PLEASE PRINT)

GILL BLONSLEY

REPRESENTING:

Clark County Health District

Jane Francioli

Spec. Childrens Clinic

CANCER CONTROL BUDGET  
HEALTH DIVISION  
DEPARTMENT OF HUMAN RESOURCES

PRESENTATION

The purpose of the Cancer Control Budget is to establish a Cancer Registry for Northern Nevada to coordinate with the Southern Nevada Tumor Registry. Cancer data of all sites on living and deceased patients will be submitted to the State Department of Vital Statistics for a State-wide Cancer Registry. Salaries and fringe benefits of the Northern Cancer Council staff are included. Five pilot studies for research on the causes of Cancer in Nevada are included. Collection of this data in coordination with the studies being conducted by the State of Utah Medical School may enable Nevada Legislators and Congressmen to determine if the Radiation fallouts from the Atomic Test Site in Southern Nevada did cause Nevada, Arizona and Utah residents to contract Leukemia, or other radiation induced cancers.

435

CANCER CONTROL BUDGET  
 HEALTH DIVISION  
 DEPARTMENT OF HUMAN RESOURCES

2.5 FTE's	<u>79-80</u> <u>REQUEST</u>	<u>80-81</u> <u>REQUEST</u>
Salaries	\$32,500	\$34,450
Costs	4,875	6,201
TOTAL SALARIES	<u>\$37,375</u>	<u>\$40,651</u>
Out-of-State	875	875
In-State	7,000	7,000
 <u>Operating Expenses</u>		
Office Supplies	\$ 1,700	\$ 1,700
Communications	1,200	1,200
Postage	500	500
Printing & Duplicating	1,000	1,000
Contract Services	<u>21,600</u>	<u>21,600</u>
	\$26,000	\$26,000
<u>Equipment</u>	-0-	-0-
(Office Equipment & Rent furnished by University Med. School)		
 <u>Grants</u>		
4 sub-grants @\$2,000 each	<u>8,000</u>	<u>8,000</u>
	\$79,250	\$82,526

Laura Kerin, Chairman of the Parent's Group for Reno Special Children's Clinic, parent of a 7 year old girl with Down's Syndrome.

Chairman Don Mello and Members of the Assembly Ways and Means Committee:

My husband and I are here today with our daughter, Jennifer, to:

1. Testify to the value and effectiveness of early diagnosis, education and training of handicapped children.

AND

2. To call your attention to the barriers preventing the Reno Special Children's Clinic from performing the job they are needed to do.

Seven years ago when John and I were told our daughter was born with Down's Syndrome, we asked what that meant. The doctors explained that her potential intellectually would be limited to an IQ of 50. They predicted that she could be trained to walk, feed herself, and have minimal toileting skills by the age of six. By the age of 17, she would be capable of performing at a third grade level. She would probably never achieve literacy or be self-reliant.

Although discouraged, we sought help and Jennifer received quality training from the start in the State of California. As a result, she is now reading at the first grade level, performing math problems at the kindergarten grade level, and employing speech and language skills of a typical five year old. There is no reason to believe that she won't progress beautifully, and she is living proof of what a handicapped child can achieve if they receive early intervention.

In Reno, the Special Children's Clinic is the program which parents look to for this crucial help. The staff are highly competent, but the program faces incredible odds. It is these odds I would like to address now:

1. Although the present facility is too small and in violation of fire and safety codes, not to mention physical barriers, the Clinic's request for a new facility was rated #17 on the NOT RECOMMENDED list of Capital Improvement projects by the Public Works Board.

2. Although the case load has grown from 266 children in 1968 to 848 in 1978, and the waiting list of children needing services now numbers 170, the staff has only been increased by 1 permanent professional in 11 years. The Clinic is often unable to see a child for 12 to 14 months from the time of his initial application for services. Our children CAN NOT wait for services.

As our personal history proves, infants need help immediately, and a 14 month waiting period for service at this crucial time in their development is severely detrimental.

It costs approximately \$414.00 per year to serve each child in the 0 - 6 year old population at Special Children's Clinic. To incarcerate a child in a State Institution costs \$70.00 per day-- that is \$25,000.00 per year.

As Chairman of the Reno Special Children's Clinic Parent's Group, I am asking that you inquire for us WHY the Capital Improvement request was denied, and why this program is not being recommended for staff and budget increases. Jennifer's success story could be repeated over and over again if programs for these children were adequately funded.

Mr. Mello--since you were instrumental in developing the first Mental Retardation Center in the State--that evidently shows your concern--we thought perhaps you and your Committee would assist us with this matter.

EXHIBIT "B"  
(page 1 of 6 pages)





NAME

ADDRESS

PHONE

[Handwritten Name]	414 14th St Sparks Nev	331-6241
Penny Baker	414 14th St Sparks Nev	331-6241
[Handwritten Name]	1010 Humboldt Ave Reno, Va	329-7766
[Handwritten Name]	1010 Humboldt Ave Reno, Va	329-7766
[Handwritten Name]	13670 Mt Baldern Reno	329-4357
[Handwritten Name]	1490 [Handwritten Address]	329-1197
Joanne Muralo	2155 Oppio Wy Sparks	331-0638

PETITION

WE (THE PARENTS, RELATIVES, FRIENDS, NEIGHBORS, AND CONCERNED PARTIES) ARE SIGNING THIS PETITION, BECAUSE WE SUPPORT THE SPECIAL CHILDRENS CLINIC AND SPEECH AND HEARING CLINIC TO HAVE AN APPROPRIATE LOCATION, ADEQUATE FACILITIES AND AN INCREASE IN PERMANENT STAFF TO SERVE DEVELOPMENTALLY DELAYED CHILDREN (HANDICAPPED).

NAME	ADDRESS	PHONE
1. Linda K. Crosby	11523 Chesapeake <sup>Tr.</sup> Dr.	972-8747
2. C. R. Crosby	11523 Chesapeake R. Reno	972-8747
3. Della Dennis	11512 Chesapeake	972-0161
4. Nancy M. Dennis	11512 Chesapeake, Reno	972-0161
5. Nelda Lambert	11534 Chesapeake, Reno	972-8295
6. Tom Lambert	Same	Same
7. John Dutcher	11546 Chesapeake, Reno	677-0230
8. Walter Dutcher	" " " "	677-0230
9. Margaret Cummins	715 Wright Way	358-1931
10. Annie E. Cook	11558 Chesapeake	972-0811
11. Gary Helsing	11595 Chesapeake Dr.	972-8688
12. Carol Helsing	11595 Chesapeake Dr.	972-8688
13. Randy Helsing	257 W. CEDAR PKY SUN VALLEY	673-1368
14. <del>John</del> Ellis	11665 Chesapeake	972-3741
15. James Margraf	9015 N. J. KUBIK #11 <sup>RENO</sup>	972-3744
16. Belva Margraf	" "	" "
17. <del>John</del> Margraf	11660 Chesapeake Dr	" "
18. Mr. & Mrs. Geo. E. May	11680 Chesapeake Dr.	972-0853
19. Mr. & Mrs. Jim L. Christensen	11740 Chesapeake Dr.	972-3343
20. <del>John</del> Christensen	11760 Chesapeake Dr.	972-8553
21. Grand L. Lauder	11760 Chesapeake Dr.	972-8553
22. Robert Stock	11875 Chesapeake Dr.	972-7797
23. Cheryl Stock	11875 Chesapeake	972-7797
Thomas Spyer	11890 Chesapeake Dr.	

NAME	ADDRESS	PHONE
25. Julie Gallagher	11895 Chesapeake Dr. Reno, NV. 89506	677-0203
26.		
27. Sandra Myers	11905 Chesapeake Dr. Reno, NV. 89526	972-5024
28. Robin [unclear]	11925 Chesapeake Reno NV	972-7951
29. [unclear]	" " "	
30. Pat Martin	1061 Sageview Dr. Sparks	358-6983
31. Stephanie Rosco	545 5th St. Sparks, NV.	358-6263
32. Joseph M. Boyless	1158A CALIFORNIA, RENO NV.	348-7836
33. Richard B. [unclear]	1061 SAGEVIEW DR SPARKS	358-6983
34. John H. La Voy Jr.	62 Park St Reno	322-6436
35. Marlene Teixeira	11560 Mistletoe	972-1037
36. George Teixeira	11560 Mistletoe	972-1037
37. Rebu Easley	2685 Nelson way Sparks	358-2052
38. Homer Easley	2685 Nelson way Sparks	358-2052
39. Victoria R. Lane	11555 Mistletoe	972-7238
40. David W. Lane	11555 Mistletoe	972-7238
41. Joyce Robinson	11570 mistletoe	972-8120
42. [unclear]	11570 mistletoe	972-8120
43. Jim Cannon	11540 Pinyon way	972-0387
44. [unclear]	11510 Pinyon way	972-0387
45. Mary Paul	11625 Fir Dr	972-0149
46. [unclear]	11625 Fir Dr	972-0149
47. [unclear]	226 Waterfall St	972-1940
48. Sandy Albot	11517 Sitka St.	972-1443
49. [unclear]	11558 Chesapeake	972-0811
50. Kimberly Smith	190 Mill St. Reno.	323-8663
51. [unclear]	345 [unclear] Reno	722-4250
52. [unclear]	2430 Piedmont Rd Reno	747-5623
53. [unclear]	1645 Chaska Pl	786-0729
54. Joan Messery	Howlock, Nevada	273-2742
55. [unclear]	[unclear]	576-25-
56. [unclear]	603 Gould Reno.	486-6411
57. [unclear]	[unclear]	722 - 441

NAME	ADDRESS	PHONE
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Special Children's Clinic  
and  
Speech & Hearing Clinic  
460 California Ave., Reno 89509

FACT SHEET

BUILDING INADEQUACIES

Space

1. Inside:
  - a. Every office, classroom, lavatory and waiting area is too small to accommodate its intended purpose.
  - b. Hallways are utilized for storage and bookshelves. Pedestrian traffic is single file.
  - c. Professional offices are shared by contract consultants and staff leading to interruptions and disorganization.
  - d. Closed patient files are not readily available; they are stored at warehouse several miles distant.
  - e. No conference room is provided for group meetings.
  - f. Lounge or rest area for staff or clients is not provided.
  - g. Authorized smoking area for staff or clients is unavailable.
2. Outside:
  - a. Parking is inadequate.
    - (1) Parents stopping in alleyway to deliver or pickup children have received Reno Police Department traffic citations.
  - b. Outdoor physical education area is not provided.

Environment

1. Inaccessible to handicapped:
  - a. Professional offices are inaccessible to physically handicapped, parents with several children, and delivery people.
  - b. Stairway is steep and dangerous for children and adults.
2. Privacy is non existent. Walls are thin, voices and noises echo through air space in dropped ceiling. Confidential communication is impossible, noises and voices interruptive.
3. Poor building security:
  - a. Transients and drunks walk into preschool area from front door and alley entrance.

- b. There is no reception area on the first floor.
  - c. Vehicles in parking area have been vandalized and items stolen.
  - d. Preschool door was shot out by 38 cal. revolver. Minutes before, the room was filled with children and their parents.
  - e. Other windows have been shot but not penetrated.
4. Noise level exceeds 70 dB in professionals' offices. Testing or counselling is very difficult with that much distraction.
  5. Heating and cooling system inadequate, frequently malfunctioning.
  6. Lighting is inadequate upstairs.
  7. Smoking staff sit outside on curb in alley during good weather. Inclement weather forces them into the bottom of the stair well, smoke infiltrates all areas of the building affecting allergic children adversely.

Location

1. Far removed from other services for children.
2. Remote from public transportation effectively denying services to clients.
3. Surrounded by very heavy vehicle traffic on California Avenue, in Creek Place, in First National Bank parking lot, and in building parking lot.

Cost:

\$92,000 per year in rent

NEW BUILDING

Space

30,000 square feet (approximate)

Cost

\$2,000,000 ( to build on State property in close proximity to other children's health services.)

Population Comparison

Waiting List

1968 - 25 children (2-3 weeks waiting period)

1978 - 159 children (12-14 months waiting period)

Case Load

1968 - 266 active cases

1978 - 848 active cases

Staff

1968 - 5 permanent professional staff

1978 - 6 permanent professional staff

Population of Area Served

1970 - 224,000 (estimate)

1980 - 374,000 (projected)





# WASHOE COUNTY

"To Protect and To Serve"



DISTRICT HEALTH DEPARTMENT

WELLS AVE. AT NINTH ST.  
POST OFFICE BOX 11130  
RENO, NEVADA 89520  
PHONE: (702) 785-4290

THIS REPORT INDICATES THE CHANGES IN THE WORK LOAD OF THE  
WASHOE COUNTY DISTRICT HEALTH DEPARTMENT  
ONLY SHOWING 21 PROGRAMS OF OUR 49

<u>Program</u>	<u>Year 1976</u>	<u>Year 1977</u>	<u>Percent</u>	<u>Year 1978</u>	<u>Percent</u>
<u>Public Health Nursing -</u>					
Immunization Clinic Visits	17,790	9,401	-47%	25,874	175%
Child Health Clinics	2,438	2,341	- 4%	2,823	20%
Adult Health (Geriatric)	1,636	1,825	11%	2,796	53%
Venereal Disease	4,417	4,929	12%	5,095	3%
Cervical Cancer Screening		956		1,809	89%
Child Abuse and Neglect	619	622		743	19%
Hypertension Screening Referrals	374	2,863		4,640	62%
Visiting Nursing Service	3,725	4,096	10%	4,526	10%
Maternity and Infant Care	2,103	1,434	-31%	2,414	68%
Geriatric Clinic Visits		(6 mos) 1,364		(2,383-6 mos) 4,767	75%
Podiatry Clinic Visits		(3 mos) 318		(554-3 mos) 2,216	74%
<u>Environmental Services</u>					
Air Pollution					
Source Registration		434		514	18%
Citations and Notices	42	75	78%	162	116%
Liquid Waste (Septic)					
Permits	495	1,465	196%	1,872	28%
Test Holes	223	676	203%	773	14%

EXHIBIT "D"  
(page 1 of 3 pages)

<u>Program</u>	<u>Year 1976</u>	<u>Year 1977</u>	<u>Percent</u>	<u>Year 1978</u>	<u>Percent</u>
Engineering					
Variance Requests	27	52	93%	107	106%
Parcel Maps	116	155	34%	275	77%
Subdivision	12	80	566%	96	20%
Water Quality					
Samples for Loans		1,291		1,576	22%
Sanitary Surveys	10	20	100%	84	305%
Solid Waste					
Complaints	1,082	1,978	83%	1,483	-25%
Citations	83	174	109%	219	26%
Well Program					
Permits	NR	NR		564	
Inspections	NR	NR		1,551	
<u>Consumer Health</u>					
Number of Food Establishments	1,150	1,195	4%	1,430	20%
Motels/Hotels	326	336	3%	356	6%
Plan Review	1,100	2,001	82%	1,584	-21%
Epidemiology Investigations (Potential Food Poisoning)	134	126	-6%	269	135%

Source of Funding

State Funds	6%
Federal Funds	28%
Fees	2%
County (Ad Valorem)	64%

Utilization of Requested Increase in Aid to Counties (300-3207) -  
 Page 279 - State Health Division Budget

Geriatric & Podiatry Program

Present Funding

Federal	\$ 96,105
Fees	6,466
County	<u>47,377</u>
	\$149,948

Additional Funding Required for Personnel  
 & Outpatient Services 1979-80 \$ 15,727

Tuberculosis Program

Present Funding

State	\$ 24,301
County	<u>8,889</u>
	\$ 33,190

Additional Funding Required for 1979-80 \$ 5,536

Crippled Children's Service

Present Funding

Federal & State	\$ 16,400
County	<u>8,900</u>
	\$ 25,300

Additional Funding Required for 1979-80 \$ 3,036

Safe Drinking Water Act

Present Funding

Federal	\$ 36,000
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Additional Funding Required for 1979-80 \$ 7,000

Consumer Health

Additional Funding for Food Service In-  
 spections, Staff and Educational Program  
 for Food Service Managers Course \$ 25,200

TOTAL \$ 56,499

SUMMARY OF SERVICE VOLUME  
PROVIDED IN SELECTED  
CLARK COUNTY HEALTH DISTRICT PROGRAMS

February 15, 1979

EXHIBIT "E"

IMMUNIZATION

	<u>1977</u>	<u>1978</u>	<u>Per Cent Of Change</u>
Diphtheria, Tetanus and Pertussis (DPT)	12,202	13,835	+ 11.8
Diphtheria and Tetanus (DT)	24,323	4,948	-391.0
Oral Polio Vaccine	33,966	23,486	- 44.6
Rubella	631	335	- 88.3
Rubeola	786	331	-137.0
R/R Combined	6,367	1,122	-467.0
Mumps	603	6,488	+ 90.7
Mumps/Rubeola/Rubella	432	3,609	+ 88.0

Total Immunization 1978 -- 59,215 given to 36,528 persons

Clark County School District Records indicate overall immunization level of 63%

X-RAY AND TUBERCULOSIS CLINIC

	<u>1977</u>	<u>1978</u>	<u>Per Cent Of Change</u>
Skin Tests	15,206	22,700	+ 33
X-Ray	21,555	23,238	+ 7.2
Reported Cases of TB in Clark County	23	41	+ 43.9

VENEREAL DISEASE CLINIC

<u>Cases Reported - Clark County</u>	<u>1977</u>	<u>1978</u>	<u>Per Cent Of Change</u>
Gonorrhoea	4,048	3,786	- 3.9
Early Syphilis	34	80	+ 57.5
<u>Total Clinic Attendance</u>	15,115	16,910	+ 10.6

LABORATORY SUPPORT

	<u>1978</u>
Venereal Disease Clinic	51,617
Escort and Brothels	1,653
Water Bacteriology	<u>37</u>
TOTAL	53,307

EMERGENCY MEDICAL SERVICES

This activity coordinates the improvement and expansion of the Clark County Regional Emergency Medical Services (EMS) System. The EMS program provides for the training of personnel and the establishment of a regional EMS communication network to facilitate the implementation of medical direction of pre-hospital care.

EMS - Continued

During 1977, six new ambulances were purchased for the communities of Mt. Charleston, Goodsprings, Jean, Searchlight, Laughlin, and for the Las Vegas Fire Department. During 1978 three new ambulances were purchased for the communities of Henderson, Boulder City, and Moapa. Training was coordinated for 100 basic and advanced medical technicians and 50 new critical care nurses.

HEALTH CARD PROGRAM

Activities of the Health Card Program reflect the increase in community growth. During 1978, over 40,000 people were processed for health cards, compared to 1977, a 28 per cent increase.

<u>Foodhandlers</u>	<u>1977</u>	<u>1978</u>	<u>Per Cent Of Change</u>
Renewals	9,521	15,985	+ 40.4
New Applicants	21,075	23,675	+ 10.9
Non-Food Personnel	<u>3,591</u>	<u>4,140</u>	<u>+ 13.2</u>
<u>Total Health Cards Issued</u>	34,187	43,800	+ 21.9
Class Attendance	14,000	16,842	+ 16.8

SANITATION

<u>Inspections</u>	<u>1977</u>	<u>1978</u>	<u>Per Cent Of Change</u>
Food and Drink Establishments	20,177	21,169	+ 4.6
Public Accommodations	2,117	2,056	- 2.9
Institutions	882	1,161	+ 24.0
Citizens Complaints	<u>989</u>	<u>1,149</u>	<u>+ 13.9</u>
<u>Total Inspections Made</u>	24,165	25,535	+ 5.3

FOOD EPIDEMIOLOGY

	<u>1977</u>	<u>1978</u>	<u>Per Cent Of Change</u>
Alleged Reports	201	271	+ 25.8
Probable/Confirmed Cases	32	46	+ 30.4

NEW CONSTRUCTION AND REMODELING

	<u>1977</u>	<u>1978</u>	<u>Per Cent Of Change</u>
Average Monthly New Construction	104	171	+ 39.2
Average Monthly Remodeling	50	37	- 35.1
Average Monthly Number of Field Inspection	290	421	+ 31.1
Total Number of Establishments Approved for Operation	438	441	+ . 0.6

ENVIRONMENTAL ENGINEERING

	<u>1977</u>	<u>1978</u>	<u>Per Cent Of Change</u>
Individual Sewage Disposal Inspections	2,069	4,031	+ 49.1
Septic System Permits Issued	981	1,146	+ 14.4

SWIMMING POOLS

	<u>1977</u>	<u>1978</u>	<u>Per Cent Of Change</u>
Number of Public/Semi-Public Pools	8,141	8,511	+ 4.3
Number of New Pool Plans Reviewed	98	100	+ 2.0
Number of New Pool Plans Approved	61	73	+ 16.4

CERTIFICATION PROGRAM

	<u>1977</u>	<u>1978</u>	<u>Per Cent Of Change</u>
Licensed Technicians	84	91	+ 7.6
Apprentices	272	299	+ 9.0