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**Minutes FINAL
of the meeting of the
Nevada Office of Minority Health and Equity (NOMHE) Advisory Committee
Tuesday, August 18, 2020**

The Nevada Office of Minority Health and Equity (NOMHE) Advisory Committee held a public meeting on August 18, 2020, beginning at 10:00 a.m. at the following locations:

This Meeting was held via Conference call only:

In accordance with Governor Sisolak's Declaration of Emergency Directive 006: Subsections 1: the requirement contained in NRS 241.023 (1)(b) that there be a physical location designates for meetings of public bodies were a member of the public are permitted to attend and participate is suspended.

Teleconference number: (775) 687-0999, Access Code: 62151#

1. Call to Order, Roll Call

The meeting was called to order at 10:03 a.m. by Andre Wade, Chair. Present were Advisory Committee members Andre Wade, Cassandra Cotton, Reverend Dr. Karen Anderson, Andrea Gregg, Dr. Jennifer Kawi, Erik Jimenez, Dr. Gillian Barclay

Advisory Committee members absent: Dr. Crystal Lee (represented by proxy Ryan Martin)

QUORUM achieved.

Also present were Tina Dortch, Program Manager, NOMHE; Beth Hander, Deputy Director, DHHS-Director's Office; Tom McCoy; Alexandra Neal; Alisa Howard; Baldo Bobadilla, HiAP, Nevada Public Health Training Center; Janet Serial, NAACP Sparks/Reno; Jay Cafferata, UNR Nevada Public Health Training Center; Sara Hanafi, HiAP, Nevada Public Health Training Center; Mitch Harper; Pamela Atkins-Girouard; Will Rucker

Chair Mr. Wade welcomed Reverend Dr. Karen Anderson and she introduced herself. Dr. Anderson serves as the Pastor for the First AME Church in North Las Vegas. Dr. Anderson is a registered nurse and has 23 years in the health care and health care administration. She joined the ministry in 2004 and moved to Las Vegas this past November. Dr. Anderson has worked extensively with community

organizing and was the President of Metropolitan Congregations United. Dr. Anderson feels health care is critical and looks forward to contributing to the Advisory Committee.

Chair Wade commented Andrea Gregg's membership expires in 2020.

2. Public Comment

Chair Wade invited public comment. There was none.

3. Review/Approve Minutes from May 27, 2020, NOMHE Advisory Committee Meetings

Erik Jimenez motioned to approve the minutes from May 27, 2020. Seconded by Dr. Kawi. Motion carried unanimously; minutes approved with no changes.

4. NOMHE Advisory Committee Leadership – Chair and Vice Chair Elections

Tina Dortch stated there are two openings – the Chair and the Vice Chair and asked for nominations.

Chair Wade nominated Erik Jimenez for Chair. Mr. Jimenez accepted the nomination.

Chair Wade nominated Andrea Gregg for Vice Chair. Ms. Gregg accepted the nomination.

Cassandra Cotton nominated Dr. Gillian Barclay for Chair. Dr. Barclay accepted the nomination.

Cassandra Cotton nominated Ms. Gregg for Vice Chair. Ms. Gregg accepted the nomination.

A Zoom Poll was enacted for the Advisory Committee members to vote for Chair – Mr. Jimenez won the vote for the Chair and accepted the nomination.

Ms. Dortch invited a motion to accept Erik Jimenez as Chair and Andrea Gregg as Vice Chair.

Chair Wade motioned to accept Erik Jimenez as Chair and Andrea Gregg as Vice Chair. Dr. Kawi 2nd the motion, motion passed unanimously.

5. NOMHE Advisory Committee Sustainability Update

Budget

Chair Jimenez reviewed the budget spreadsheet. There is \$142,202 in current authority, \$129,035.12 has been spent, and \$41.76 projected to be spent which leaves an authority balance of \$13,125.12. Chair Jimenez asked if there were any questions from the Committee members.

Ms. Gregg clarified that for Fiscal Year July 1, 2019 through June 30, 2020 there was \$13,125.12 in under spent funds and asked if the money will roll over to the next Fiscal year 2020-2021.

Ms. Dortch said previously there was a grace period to allow for some carry forward dollars but that is no longer the case. The highlighted amount on the budget document (\$13,125.12) will be returned to the Treasurer's Office, State General Funds.

Chair Jimenez asked what the effects of the Special Legislative Session were on the NOMHE budget and asked if the NOMHE will experience any budget cuts.

Ms. Dortch replied she had a conversation with the Fiscal Analyst, outside of the \$13,125.12 which will return to the State General Fund the NOMHE will experience no funding cuts as the Advisory Committee fell under the COVID umbrella.

Dr. Kawai asked if the funds will be the same for Fiscal Year July 1, 2020 through June 30, 2021?

Ms. Dortch replied yes, the funds will be the same, the NOMHE was held harmless (not lose and not gain) and will begin the Fiscal Year with \$142,202.

Ms. Gregg clarified whether the \$13,125.12 was unspent or was it a deobligation?

Ms. Dortch replied it was unspent in a large part due to the Pandemic as no travel was allowed and no mission related sponsorships were allowed.

Chair Jimenez asked how grant funding is looking with regards to the CARES Act and have any new grant requests been received?

The NOMHE is in the process of additional hires which will be paid for with CARES dollars.

Ms. Cotton asked if money has been set aside for an administrative assistant?

Ms. Dortch asked if everyone had met Alexandra Neal and said the additional person to be hired would be CARES funded and would be project specific. Ms. Neal joined the NOMHE in early June and is paid with CDC Foundation funding. It is hoped to have two dedicated support people by the end of the month. Since August 2018 the NOMHE has been working through a UNR relationship which is how the support of folks like Sara Hanafi, Baldo Bobadilla, and Jay Cafferata happens.

Dr. Kawai asked when the projected budget for Fiscal 20-21 will be available?

Ms. Dortch said that budget is not available yet, typically the Advisory Committee views the previous Fiscal Year budget actuals and receives a projected budget in November.

6. NOMHE Advisory Committee Activities and Impact Report

Activities and Impact Overview

Ms. Dortch reviewed the handout entitled “NOMHE Program Manager Report” dated August 18, 2020. Ms. Dortch said the Governor’s Proclamation Recognizing Racism as a Public Health Crisis represents a huge accomplishment the NOMHE and the State. The Proclamation acts as an aspirational and motivating item results are starting to be seen already. One example is the work group that has been convened and charged with determining how to actionize the points from the Proclamation. Some of the short-term goals include looking for a way to unify messaging across the State agencies so that they can let folks know they have the proclamation and additional related actions are forthcoming. Long term goals include ways to ensure equitable organizational culture for the State employees and as well as equitable culture for community engagement activities.

The NOMHE is being integrated into the decision-making processes of the State beginning June 16th. Ms. Dortch has been meeting regularly with Caleb Cage, Governor’s Director of COVID Response Team. Some results of those meetings are the use of face shields for State agency personnel who may interact with persons who are hard of hearing or deaf to help with communication.

Ms. Dortch had a very robust engagement with UNR on July 24th regarding Clinical Trial Diversification and presented “Can Diversified Trials Reduce Health Disparities” regarding COVID and its impact on minority communities.

The NOMHE also seeks to support the Office of Public Health Investigations Epidemiology in vaccination awareness and Immunize Nevada. Ms. Dortch is working on a Supplemental Action Brief as a way to reflect the experiences of the NOMHE and its population, the reactions to vaccines, and to offer recommendations from our community vantage point. Then the subject matter experts can perhaps put into use.

Ms. Dortch is working several groups with the goal to increase and expand the stratification of data to include Sexual Orientation and Gender Identities Minorities (SOGI) to ensure that population is reflected and accepted as a demographic. Also, to create opportunities to get that information into the mainstream as well as start the process during the contact tracing stage and contact follow up stage.

Ms. Dortch is working with the State’s lead biostatistician to update the Nevada Minority Health Report by including vulnerability mapping which looks at such things as whether or not the household has a car. Ultimately maps and reports can be used to define equity goals for each of the indicators and promote responsiveness.

The NOMHE has been working with Advocacy and Workgroups such as the Deaf and Hard of Hearing Health Equity Alliance.

Ms. Dortch continues to work with the Nevada Minority Health Equity Coalition who received a significant CARES funding grant with the goal of engaging those community organizations in some of the more highly impacted zip codes.

Ms. Dortch also included in the handouts a white paper entitled “Health Disparities in Nevada” which she presented to the Legislature.

Chair Jimenez invited discussion or questions.

Ms. Cotton asked if the NOMHE helped with the census?

Ms. Dortch replied the NOMHE helped with the Complete Count Committee and has made recommendations and has helped create strategies. The returns have exceeded the 2010 returns.

Ms. Cotton would like to see the Complete Count Committee report.

Ms. Dortch commented the census takers have modified their approach to accommodate the limitations caused by the pandemic and the deadline is October. There was a discussion early in the process about marrying or combining contact tracing efforts with census taking efforts. Creative brainstorming sessions were being held. Ms. Dortch will share the report with all the Advisory Committee members.

Ms. Cotton said some census online responses did not take and many persons had to redo their response.

Ms. Dortch had not heard that but will inquire into that situation and include the information she finds out with the report.

Ryan Martin commented on behalf of Dr. Crystal Lee with regards to the Program Manager Report. There is anxiety in native communities regarding data sovereignty in clinical trials. Research is being done to determine who will be responsible for the clinical trials and for the data. Dr. Lee believes the vulnerability mapping will be a huge asset. Deaf and Hard of Hearing issues is an occupational hazard especially for the American Indian people especially for the occupational labor. The City of Las Vegas has the highest rate of American Indians that occupy the city and most of those work in the labor industry. Dr. Lee would like to know how to make a tribal specific report for American Indians in the State of Nevada.

Ms. Dortch asked for more specifics regarding the which indicators the report should reflect.

Chair Jimenez suggested that Ms. Dortch reach out to the Indian Commission and the tribal liaisons to get some data flow happening.

Ms. Dortch has worked with tribal liaison Delaney Mercer and has presented. Ms. Dortch believes Ms. Mercer meets every other month with the health directors from the tribal health centers. The NOMHE has the foundation to gather data and share but Ms. Dortch would like to make sure the report is responsive to Dr. Lee's requests. August 25th the NOMHE will host "All of Us" virtually. Ms. Dortch will send invitations. Clinical Trial participation will be discussed as well as COVID activity such as the non-invasive survey called the COPE Survey. Individuals who enroll in "All of Us" will be followed for the duration of the pandemic and monitor mental health impacts.

Ms. Gregg commented that Mr. Martin brought up a good point regarding the tribal specific report. Ms. Gregg asked what Ms. Dortch's role is with regards to the RFP for the Minority Health Equity Coalition?

The funding period is from September 1st through December 31st. How is Ms. Dortch planning to provide assistance to the applicants and avoid duplication of services or programming?

Ms. Dortch asked Mr. Martin if he would help promote the Request for Proposal through the tribal community. Ms. Dortch commented that as a non-officio ex-voting member of the Coalition she was involved in helping frame the context of the RFP and its purpose. She is not a part of the voting membership, so she won't be involved in the recipient selection. The ongoing management of the awardees will fall to the Coalition staff. Ms. Dortch strongly recommended including people who are differently abled in the target populations and having LGBTQ identified as a demographic. The RFP proposal has been sent to many organizations. Applicants are not required to be non-profits nor members of the Coalition; however, membership is free at this time due to the pandemic.

Signature Events

ALLY Action Group for SGM Healthcare Related Activities

Jay Cafferata directed the Committee's attention to the handout entitled "Cultural Competency Projects" and added information regarding a USA Today newspaper article that ranked Nevada as number one in the Nation to be the best state for LGBTQ folks. Since 2009 to 2019 Nevada passed 34 laws to protect the rights of LGBTQIA+ persons which is a huge accomplishment. One person who should be acknowledged for her tireless efforts is Brooke Malath.

Mr. Cafferata said, as you can see in the report, many groups are meeting Statewide to address the needs and concerns. A new Public Health Diversity Advisor at UNR will address specifically COVID concerns for many groups who are marginalized in the State of Nevada. The health conference "Making Health Happen" is now active on the website makinghealthhappen.org.

Ms. Dortch thanked Mr. Cafferata for his continued work on the regulations attached to recent legislation and asked if the regulation work was in the final stages.

Mr. Cafferata replied that on September 4th the State Board of Health will convene as the final piece in approving the regulations. Once the regulations go into effect (are codified) then the State will be able to enforce the laws which have been in force since July 2019.

Chair Mr. Jimenez thanked Ms. Malath for her work over the past years.

HiAP Work Plan Overview

Sara Hanafi gave a brief overview of Health in All Policies (HiAP). Health in All Policies is an approach that seeks to address the social determinates of health such as the neighborhood that we live in, access to transportation or economic stability. The overall goal of HiAP is to achieve health equity by engaging in intersect collaboration with public health agencies and non-traditional sectors. The two components include an online training module and the pilot projects. An online three-day training was recently hosted which covered all of the basics of HiAP, intersectional collaboration, action planning, etc. All of the information is in the process of being translated into an online asynchronous training series of

modules. Ms. Hanafi referenced the handout which contains information about the six modules. The training is hosted on the Nevada Public Health Training website at makinghealthhappen.org. The training is free and open to anyone who wishes to partake. The launch date will be August 24, 2020. Ms. Hanafi will share the link with Ms. Dortch and then Ms. Dortch can share with the Committee members.

Baldo Bobadilla gave an update on the HiAP Pilot Projects (see handout) including LatinX Health Action Network; Regional Transportation Commission Pedestrian Experience Index (PEI); Keep Truckee Meadows Beautiful (KTMB) Multiunit Housing Recycling Needs Assessment; Rural COVID-19 Community Development Infrastructure Project, Health in All Policies Intern, Office of Statewide Initiatives, and Elko County; Construction Health Worker Infection Control Training Program Research Project; Regional Transportation Commission of Southern Nevada Heat Impact Study; Rural Nevada Public Health Emergency Preparedness; and working with the Nevada Housing Department on the Rental Assistance Program.

Ms. Dortch thanked Ms. Hanafi and Mr. Bobadilla and said information regarding HiAP would be added to the NOMHE website.

Ryan Martin provided comments on behalf of Dr. Crystal Lee in response to the Health in All Policies Pilot (HiAP) Report.

- LatinX Health Action Network works in COVID-19 in their respective communities, Dr. Lee is conducting similar work in American Indian/Alaskan Natives (AI/AN) perceptions, barriers, challenges to receiving the COVID-19 vaccine.
- Rural COVID-19 Community Development Project, Dr. Lee recommends gaining tribal involvement to help facilitate the efforts of the Project to their tribal communities.
- Construction Health Worker ICT Project, Dr. Lee recommends collaboration with the Las Vegas Indian Center because the city of Las Vegas is home to a large population of American Indian labor workers that seek certification and training through the L.V. Indian Center.

Mr. Martin said to please feel free to contact him or Dr. Lee if you have any questions or thoughts. Thank you for the opportunity and looking forward to hearing from you or the NOHME in the future.

Mr. Bobadilla has reached out to the Reno Indian Colony and has spoken with their Planner but welcomes any pointers.

Ms. Cotton applauds both Ms. Hanafi and Mr. Bobadilla for their work and said that many health care institutions are looking at social determinates. The HiAP report hits on many of the topics of conversations Ms. Cotton has had within her hospice organization. Ms. Cotton has been involved with the culinary and other organizations regarding communication with Latinos and how information is getting to them.

7. NOMHE Advisory Committee Activity

NOMHE Advisory Committee Recommendation Letter to DHHS Director, Richard Whitley

Chair Mr. Jimenez directed the meeting to comments on the role of the NOMHE. In light of the two concurrent resolutions from Senator Spearman which were approved by both Houses in the Second Special Session and in the Governor's Proclamation there is a good role for the Advisory Committee to play.

Ms. Dortch invited the Advisory Committee to dialog and indicate any recommendations.

Chair Mr. Jimenez asked if everyone had had a chance to view the Governor's Proclamation which was included in the meeting materials? He directed attention to Ms. Dortch's document entitled "Examples/Topics NOMHE's Advisory Committee (AC) can share with Director Whitley" with the six bullet points and asked for possible next steps that can be recommended to the Director of DHHS and/or the Governor on how to make progress in regards to the Governor's Proclamation.

Chair Mr. Jimenez commented that the COVID crisis has highlighted the cracks in the system of data stratification. A better job can be done when collecting data from within minority communities such as collecting from a variety of sources such as law enforcement stops. Better data collection will help with better decision making. Where can NOMHE influence policy in the next legislative session or in actions now?

Dr. Kawi said many organizations, individuals and researchers are working in silos within their own communities or populations doing research and data gathering. Perhaps NOMHE can be the umbrella to facilitate integrating research or activities with contact information for the various entities.

Ms. Cotton agreed and elaborated that connecting those with similar focus or goals would provide a better picture of what's happening. Ms. Cotton commented it would be important to make sure the right people were at the table adequately representing populations.

Chair Mr. Jimenez said as an example, there is a lack of reaching out to those in the communities who are impacted by decisions made in Carson City, particularly with regards to health and safety. Chair Jimenez said under Ms. Dortch's direction there is a stakeholder's group ready to go at a moment's notice. From an agency side, some agencies interact with minority communities well, they produce materials in multiple languages, and some are not as successful. There are not similarities between agencies. Bullet number 4 on the handout "Examples/Topics NOMHE's Advisory Committee (AC) can share with Director Whitley" states "Agencies to identify health equity liaison/advocate who frames their respective work through equity lens and engages with NOMHE". Every state agency should be thinking about these issues and meeting with one another and with the community as well. Perhaps the NOMHE can facilitate discussions.

Ms. Cotton said she was asked to provide definitions regarding diversity. As an example, she was asked what does a Chief Diversity Officer look like? The conversations Ms. Cotton has heard have included having a Diversity Officer in health care organizations.

Dr. Gillian Barclay recommended looking at other sectors' efforts as private sector entities and academia have had this role for quite some time.

Chair Jimenez said making sure people have a seat at the table is always discussed and asked what does that table look like and what decisions would be made at that table?

Ms. Gregg suggested those people are on this call today and should be included at that table. There is a lot of good work in motion now, how is that good work leveraged?

Chair Jimenez asked if the NOMHE would like to discuss the recommendations on the handout or review and write a letter to the Director and Governor?

Ms. Dortch commented the bullets are examples and meant to spur conversation and thought. She directed the Advisory Committees attention to the included NRS 232 handout which frame how the NOMHE and Ms. Dortch function. The creation of recommendations for the Director is clearly within the NOMHE's wheelhouse. Ms. Dortch suggested it is a good time to do some reflection.

Mr. Wade asked if the NOMHE has the capacity to enact some of the ideas generated by the Advisory Committee. Perhaps the office can grow?

Chair Jimenez suggested perhaps it is a good time to ask for more funding and to look at the statutes. It's not best to have a one-person office to address what are possibly the biggest holes in the State.

Mr. Martin said with regards to tribal and American Indian representation, as an example, in New Mexico there are 19 Pueblo tribes and each Pueblo tribe is represented by a Governor or someone on an equal playing field with the State Governor or State Leadership. There are Apache and Navajo tribes as well. It's important to include a representative from each tribal community at their government level to have a seat at the table. It can be difficult to understand the unique arrangements or needs of a tribe. Mr. Martin referenced the NRS definition of minority groups and asked if it is appropriate to identify tribes as minority groups as tribes are sovereign in their own nation and in their own government. In New Mexico's State codes they have tribal governments separate from minority groups.

Chair Jimenez said another issue that has come up during conversations with other agencies is the lack of training those who deliver services to marginalized communities. There should be a conversation about training for people who interact with those communities to ensure they can interact in a culturally competent and responsible way. Is there a role for training through NOMHE or possible partnering with another group?

Ms. Cotton commented that in her 41 years in her organization a training would be started, a person would go to the training, and when that person left the organization so did the training. Ms. Cotton said it would be good for the NOMHE to be involved in creating the environment or setting for the table, perhaps by email suggestions. Returning to, as an example, the definition for a Chief Diversity Officer, the suggestion can be made to an organization that they need one as well as ongoing mandatory

training. Ms. Cotton is proud that the Governor's Proclamation was created and is going to be proud of the work the NOMHE will do to back up the Proclamation.

Mr. Wade suggested possibly NOMHE create a tool kit or best practice guide for things such as training, policies and procedures, documents or marketing materials. A listing of the training resources would be helpful.

Ms. Cotton agreed and commented that as leaders this group should be able to have these conversations and take leadership steps.

Alisa Howard teaches community health workers to go out and work in the community. There are eight competencies that are taught during the eight-week training. Cultural competency is included in every section of the curriculum, such as communication or ethics. It's important those going out into the communities feel comfortable and if they don't, then to identify the barriers or issues. Ms. Howard and Mr. Wade held a training recently for Foundations for Recovery. Ms. Howard asked the African American peer recovery specialist how often cultural competency training was held and the answer was it was only held now because of the recent racial issues. Ms. Howard agrees listing the training resources on the NOMHE website would be very helpful. Perhaps it would be good to work with the licensing board or non-profit board to make training mandatory. Maybe NOMHE could be the repository for cultural diversity and competency certificates.

Chair Jimenez reiterated the common themes: 1) NOMHE become a data and resource hub and have a training or procedures checklist; 2) getting the people already involved in this work at the table, perhaps a directive from Director Whitley or the Governor stating "convene and formalize the process"; 3) ensure all groups are represented in the Nevada Revised Statutes; and 4) a conversation regarding resources and the budget may need to be held.

Ms. Gregg commented one part that is missing is the K through 12 student population and the integration of these conversations at earlier ages. Diversity in the curriculum and cultural competency should be fostered in the upcoming generation.

Mr. Wade asked if a strategic plan type document should be compiled to outline the topics to be worked on and re-visited at each quarterly meeting?

Dr. Kawai agreed and pointed out documentation and rationale will be needed if additional funds are requested.

Chair Jimenez asked if anyone would be opposed if he drafted a document?

Dr. Kawai agreed.

Mr. Wade suggested Chair Jimenez draft the document and send it to Ms. Dortch for dissemination to the Advisory Committee members to be discussed at the next meeting.

Chair Jimenez invited a motion.

Mr. Wade moved to create a planning document that outlines the points previously mentioned. Dr. Kawai seconded. Motion passed unanimously.

8. Scheduling & Agenda Topics

Scheduling Meetings

Ms. Dortch stated that the next meeting will take place on November 17, 2020, from 2 pm to 4 pm and asked if that meeting date and time worked for everyone.

February 16, 2021, 10 am to 12 pm and May 18, 2021, 10 am to 12 pm are the following meeting dates.

Ms. Dortch thanked everyone for providing a proxy and thanked Mr. Martin and Ms. Howard for attending the meeting.

Proposed Agenda Topics

Ms. Dortch asked if anyone had agenda topic for the next meeting.

Mr. Wade asked if conversations could begin regarding BDRs that might affect minority health.

Ms. Dortch clarified if a report was desired listing the BDRs that are already identified, or to recommend BDRs.

Mr. Wade said it would be a report on BDRs that have been submitted to Legislature.

Chair Jimenez asked for agenda items to be emailed to Ms. Dortch.

9. Public Comment

Chair Jimenez called for public comment.

Janet Serial, Sparks-Reno NAACP said the UNR School of Medicine, Diversity Health Series: COVID-19 Disparities and Northern Nevada's Response virtual event may be of interest to the NOMHE Advisory Committee. The NCAAP has thanked the Governor for the Proclamation and putting forth steps which should be taken including financially supporting the NOMHE and the Commission on Minority Affairs. Ms. Serial commented on transformative change such as moving funding from one area to another which sometimes does not require legislative approval. A sustainability plan needs to be created and the perhaps the NOMHE could work with community organizations.

There were no further public comments.

10. Adjournment

Chair Jimenez called for a motion to adjourn the meeting.

Dr. Kawai moved to adjourn the meeting, Ms. Gregg seconded, and the motion carried. The meeting was adjourned at 12:04.