

55th Nevada Assembly 1969 Committee on Health and Welfare  
 Chairman Woodrow Wilson presiding Feb. 11, 1969

Members Present: Wilson, Homer, Swallow, Frazzini, Hafen, Brookman, Espinoza, May and Foote.

Absent: None

Chairman Wilson called the meeting to order at 2:40 P.M., and introduced the following guests: K. L. Elges, 2865 Idlewild Drive, Reno, Nevada, representing Nevada Nursing Home Association; Harold Faylor, 2893 Highway 50 east, Carson City, Nevada Nursing Home Association; Karl R. Harris, Director, Department of Health Welfare and Alcoholism, Carson City; Edward Krippen, M.D. State Health Officer, Carson City, Jerry Ashworth, 2865 Idlewild Drive, Reno; John L. Green, 5659 Duncan Drive, Las Vegas, Nev.; Esther Nicholson, 1701 N. Division St., Carson, League of Women Voters; Donna Walter, 46 Kinley Dr., Nev. Nursing Home Assn.; Lucille Wahrenbrock, 901 Grand Canyon, Reno, Nev. Nursing Home Assn; Max Faylor, 2898 Hiway 50, Carson City, Nevada Nursing Home Assn.

He requested Mr. Max Faylor of the Nevada Nursing Home Association to please explain their interest in AB 91. He said their purpose in being present at this hearing was to answer any questions on the bill that might come up.

Mr. Wilson intervened to tell him that the committee usually hears the proponents of the bill first and the opponents later.

Mr. John L. Green said the purpose of the bill is to meet the requirements of the Federal Medicare law, which states that by the first of the Fiscal year, July 1969, each state must have a law on their books requiring the licensing of nursing home administrators which meet the medicare requirements of the Department of Health and Welfare.

Mr. Hafen asked him if we were talking about licensing nursing homes. He said that even if there were a licensed nurse on duty in the home, would it still have to have a licensed administrator?

Mr. Green answered that each administrator, as an individual, must be licensed as a qualified administrator.

Mr. Faylor said that each hospital, nursing home or other facility that has nursing home beds must come under this act. "If we do not present this to the Nevada Legislature now, the State Government will have to do this, and we will have to leave it up to them to present it."

Mr. Swallow asked what it entails to become a licensed administrator of a nursing home. Mr. Faylor answered that an administrator has to pass an examination. If he hasn't applied to take the examination, he has until 1970, which gives him time to take anything he needs to know.

Mr. Swallow: "Could any intelligent person take and pass the examination".

## Assembly

Page 2 - Health &amp; Welfare Committee

Feb. 11, 1969

Mr. Faylor replied, "certainly. We are not going to make it that difficult".

Dr. Homer suggested there be an additional program whereby anyone being an administrator of one of these health care units would be necessarily knowledgeable of the regulations and stipulations and state rules and regulations pertaining to the operation of such a home. "He would have to make himself aware of all the regulations and comply with them."

Mr. Hafen: "The Board would draw up the requirements. Has the Board set up their requirements at this time?"

Mr. Faylor said that a few years ago, a person applied for admission to the Association who had a long rap sheet, had been a dope addict, etc. and we did not let him in our Association. In order to operate any other professional office, Dr., chiropractor, etc. they have to meet certain standards and pass. He said they would have to meet their standards and pass their examination.

Chairman Wilson asked why they had to meet the Federal criteria set down. What is the benefit. Miss Foote answered: "the money".

Mr. Green said the Federal law will require, in the near future, that in order to meet the requirements under Title 18 of the Federal law, an administrator of a nursing home must be more than a businessman; he must know the nursing home business, just as a hospital administrator must know the hospital, but is not usually a doctor. Further, he said, he believes the examination will be more rigid than that taken to become a general hospital administrator.

Mr. Espinoza asked if that meant that all people on the Board would be nursing home administrators. He said he did not agree with that and said he thought varying experiences would be better. Mr. Faylor replied that it was first drawn up to be only nursing home administrators, but there has been a change in this. He said they could appoint any member of the Health & Welfare Division to be on this Board. He said that all the professions appoint their own members to the board.

Mr. May, referring to Line 2 Page 2 of AB 91 "1. The director of the department of health, welfare and rehabilitation or, if he so designates as his representative, the state health officer; and \*\*\*" The director or his representative, the state health officer, can be a member of the board."

Mr. Bryan concurred with Mr. Espinoza that there should be a broader field other than hospital administrators on the Board.

Feb. 11, 1969

Assemblyman Foote, regarding whether or not people from the nursing home field should make up the Board. She said she felt they were certainly more qualified to make up the examinations to be given to future licensees than any other man who knew nothing about the field.

Mr. Ashworth said he would like to the committee to understand that long-term patient care is a very important factor today. With medicare and medicaid, etc., we are morally and ethically responsible for the care of these long-term patients. He said after a number of years "decay" can set in. He said the people appointed to these boards must be carefully chosen and must be people familiar with nursing home care and especially the care of the long-term patients. He said he felt that those who had been administrators for a long period of time were best qualified to serve on the board. He said they must also meet rigid standard of the Federal Government under the Medicare plan, and the nursing home administrators were very familiar with them.

Mr. Swallow expressed concern for the smaller and older nursing home facilities, such as his own area, where he said there were two nursing homes that he didn't feel could meet the standards.

Mr. Green said that if we don't establish these standards in our own State with our own people, we are going to have these standards laid on us by the by the Federal Government, and I can assure you they will be much more stringent than if we establish them within our own framework.

Assemblyman Brookman said many of these boards are set up population wise. She said that perhaps the smaller counties would not have to come under this. "I understand there is some way we can consider our small counties".

Mr. Faylor said he didn't see that the Board had anything to do with little or big counties. It doesn't mean Lander, for instance, is going to get any rougher shake than the larger ones. If someone in White Pine County cannot meet licensing requirements, it certainly doesn't mean we are going to divorce ourselves from White Pine County.

Mrs. Frazzini asked if the committee could have some idea of testing and qualifications that has been done.

Mr. Green said that at the present time there is no examination required for nursing home administrators. Anyone who walks in is free to operate if he meets the requirements of the facilities division to obtain his nursing home license. This licensing pertains to the facility and not to the individual who operates the facility.

Page 4 - Health &amp; Welfare Committee

Feb. 11, 1969

Mrs. Frazzini asked Mr. Green if this wasn't all in the law now. She said she thought all this was new.

Referring to Section 16, Mr. Faylor said this wouldn't be any more difficult than passing a test to become a licensed practical nurse. Your l.p.n.'s have to pass the same test.

Mr. May asked him how many nursing homes there are in the counties and state? He replied approximately 8, and said that Mr. Harris could give the figures on nursing home boards in the hospitals operated under and through the hospitals.

Chairman Wilson introduced Mr. Harris, Department of Health and Welfare Division. He directed a statement to Mr. Faylor. He said, Mr. Faylor, you must be confused about the way in which L.P.N.'s are licensed. They are licensed by the nursing board and do not license themselves. The point I want to make is that if you have only one other person on the board besides the nursing home administrators, it would make a lot of difference what their background was. Some of you are possibly RN's. There are a variety of backgrounds in nursing home administration. There is also the question of the relationship of the division of law. You now license the facility. Now you want to license the administrator. It gets a little touchy where you want to license the administrators and you have already licensed the nurses and the facility. It may get where a person authorized for licensing does not feel that the person was operating an acceptable facility. There is a possibility of conflict of 2 agencies, and neither one having any authority over the nursing home.

Dr. Edward Krippen, M.D., State Health Officer, Carson City.

To improve the quality of care, there have been instances where people went into nursing home businesses to make money, and the patients suffer. In other words, the money came ahead of the care of the patient. The idea here is to put enough "professionalism" in the nursing home business to cut out this sort of immorality". Their background should be related to medicine, nursing, etc. You can hire nurses if you have less than 100 beds, but if you have a larger facility, you must hire an administrator. I think the size of the facility is important as to licensing and what is necessary to be licensed. This is a different sort of area. We need uniformity in Nevada. As part of the licensing of a lab and directors and personnel in the lab, rather than having a separate board. This board should be set up similar to that of a laboratory board.

As far as "need", he said, they had 3 or 4 people applying for licenses right now. There is a need to have these people have some professional status. We also need some definite defining points; for instance, what is a hospital, what is an extended care facility, and what is a nursing home?"

He went on to say that he did not believe the medical laboratory law was under the last legislature. He said that a laboratory advisory committee is being appointed by the Board of Health, and stated that it would be comprised of at least 2 pathologists and 2 medical doctors. He said that he believed that there should be at least one physician on the nursing home administrators board.

Mr. Faylor said that the nursing home administrators feel very strongly about keeping all members of the board nursing home administrators. He said in the past 20 years, it has progressed from the old-age homes and poor farms to the nursing homes as they are today. He said they are very interested in upgrading the care of the old people and feel they are more rigid on their own members than the State would be.

Mr. May read from a document entitled "Professional and Occupational Licensing in the State,

"An examination of the methods of selecting members of occupational licensing boards reveals the direct role played by professional and trade associations in this process. Provisions in many licensing laws specify that the appointing authority, usually the Governor, must make appointments from lists submitted by these associations. For example, if an appointment is to be made to a pharmaceutical licensing board, the association of pharmacists in the state submits names of three practicing pharmacists to the Governor, and he must make his appointment from this list. Such a provision is found in the pharmacy laws of at least twenty-two states. Similar provisions govern the appointment of members to chiropody boards in at least eleven states, dental boards in twenty-six states, embalmer and funeral director boards in at least fifteen states, engineering boards in thirteen states, boards licensing registered nurses in thirty-two states, optometry boards in fourteen states, osteopathic boards in eighteen states and medical licensing boards in sixteen states. Even when licensing statutes do not require appointments to be made in this manner, many Governors have adopted the policy of consulting associations of licensed practitioners before making appointments."

He commented, "In light of what the Governor has said, I personally see nothing wrong in having the members appointed from that particular body".

Mr. Faylor said most of the people represented here in the Nevada State Nursing Homes are proprietary homes. He said they now had to meet the standards of "ECF" of the Federal Government. We have tried to eliminate these old types of nursing homes where the care is as it was 20 years ago. "We all meet these standards as nursing home administrators here. I believe we can upgrade



## Assembly

Page 6 - Health &amp; Welfare Committee

Feb. 11, 1969

and license the future administrators coming into the State.

A.B. 67. Chairman Wilson asked Mr. Harris to comment on A.B. 67. He said he had discussed this with Dr. McAllister, Superintendent of the State Hospital, and "he has suggested one change with which I concur. We do not believe that the Director of a mental health center has to be a Doctor or a psychiatrist. In other hospitals, the administrator is a specialized individual, and it is an unusual case where a Doctor would be the administrator. We have a psychiatrist in Las Vegas who is the Administrator of the out-patient facility. We are not saying it should not be a psychiatrist, or should be a social worker. We would like to have the freedom to choose the Director. If it were a psychiatrist or M.D., they would be more interested in treatment than administration of the Center."

Chairman Wilson said he thought it would be advisable to have Dr. McAllister come in. If he can meet with us on Thursday? I will put it on the agenda.

Mr. Swallow made a motion that the Committee ask Dr. McAllister to attend Thursday's meeting at 2:30 P.M., February 13, to discuss A.B. 67. Brookman seconded. Unanimously carried.

A.B. 47. Mr. Harris said he thought the intent of the bill was excellent. He said "we" (Nevada State Department of Health & Welfare) would like to see A.D.C. families put aside funds for their education. It is important that you understand that as of July 1, 1969, they will be allowed \$30 exempted income plus a certain percentage of their initial earnings. The children under A.D.C. that are not in school are not eligible for A.D.C. after age 16, and if they are in school, they can continue on ADC until age 18. I'm not sure how much money is going to come into the coffers under ADC. These people are poor in the first place."

He said he thought there was something up July 1st that will more or less resolve some of these problems.

Mr. Espinoza, regarding the \$30 exemption. "Is that per family". Mr. Harris answered "Yes, of earned income".

Mrs. Brookman: "If a child earns a certain part, it would be taken - if he is 18 and is going to school, does that take away from the Mother's A.D.C."

Chairman Wilson: "Would it be a cost factor in administering trust funds? Wouldn't that be a tremendous cost factor to the Welfare Division?"

Mr. Harris answered that it would cost to set up the procedure and administer rather small amounts of money.

Assemblyman Swallow requested permission to go back to AB 91, and to ask Mr. Harris a question. He said it seemed to him that we are embarking on a journey to separate the Nursing people from Health & Welfare. He asked if it wouldn't be better to keep them together somehow. He asked if there wasn't some way to insure each there couldn't be something done?

Mr. Harris stated that one of the problems in State Government at the present time is the number of advisory boards and the number of boards that have been assigned a specific responsibility. He said because they are responsible to it, the Health Division licenses the facility and the Health Division should have the expert test to see what is required to operate these facilities, and "we do run some character checks on the people who administer these facilities to see if they have a competency to take care of the patients."

He said there were two boards here who have a relationship in a nursing home; the board that says whether or not a person is qualified as an administrator, and the board that licenses the facility.

Mr. Swallow asked him if he had a suggestion how this problem could be resolved.

Mr. Harris answered that the two could be incorporated, and the licensing of the nursing home administrators be linked together with their own advisory board. The licensing of the home and individual administrators should be tied together.

A.B. 65 - Assemblyman Foote said she had an amendment drawn to include the glucose tolerance test.

Dr. Homer said he would like to have a concensus of opinion. "Is this a proper thing to amend this bill, or should it not be a separate bill? If it not contrary to the intent of the bill? Before we go ahead and add to the tests, I wanted to know how everyone felt about it. Wouldn't it be in the form of a separate bill?

Chairman Wilson mentioned that the committee did not as yet have a cost factor. He said that at the last meeting they were quoted a range of costs from \$12 to \$25 for administering this test. He said he would like comparative tests of a private lab, a State Lab, and the cost under a program such as Medicare or Medicaid.

Page 8 - Health &amp; Welfare Committee

Feb. 11, 1969

Dr. Homer introduced his legislative aid who has been assigned to work with him during this session of the legislature. She is Miss Juli Utt, and Dr. Homer said she had done a great deal of research in regard to the cost of the glucose tolerance test, and actual numbers of juveniles detained in our Nevada State Institutions who might be suffering from hyperglycemia. Dr. Homer asked Miss Utt to read to the committee her findings, and they are as follows:

"Cost of a glucose tolerance test is: 5 -hour test - \$12 to \$25.

Actual number of juveniles detained in 1967 (1968 figures not available(- 1,319 in Washoe County - this figure includes out-of-county juveniles detained in Washoe County.

Whittenberg Hall - Estimated cost per day \$18.00  
Average length of stay - 4.9 days  
Total expenditure - (approximately) \$116,336.00

Approximate cost of test - \$23,742 (\$25 for 6 hours)  
This does not take into account that the county could have the test done at cost - perhaps \$5.

Therefore, if we find only 20% of these juveniles have or are suffering from hypocleceemia, and are cured, we have justified the application of the test.

No figures available for repeating offenders."

Mrs. Frazzini asked if Miss Utt knew what this test costs now, and how does it vary throught the northern part of the state. She asked if Dr. Homer's aid could be requested to research this.

She then made a motion that A.B. 65 be held in abeyance for further testimony. Seconded by Brookman. Unanimously carried.

A.C.R. 11 - Mr. Espinoza suggested more specific study on this bill.

Mr. Swallow said that he thought it should be amended some way so that it could read: "as only the need arises".

Mr. Espinoza said he felt some research should be done to see when the last study was made, and that it might be the job of this committee to research back a bit.



Page 9 - Health &amp; Welfare Committee

Feb. 11, 1969

Mr. Wilson said that we had 3 different sets of administrators involved in the Welfare Division with 3 different philosophies. It made it very uncomfortable and very difficult to actually get this report compiled, but he said he had a different experience in studying the Nevada Court structure. He said the report was excellent and the committee had come out of this investigation with many fine suggestions for the State Bar. Whether or not the courts go along with it, the attorneys have something to put their teeth in and work on. He said it was a very constructive experience, and if the Legislative Counsel Bureau could come up with something anywhere near the job that was done in the court system, it would be worth the trouble, no matter what the cost would be. He stated further that he felt something had to be done at the State penal institution, which is over 100 years old. Something must be done in giving the inmates an opportunity to rehabilitate themselves. Whether we would like to go in to find new techniques and methods of training, or something in this area, I believe it is needed."

Dr. Homer said there were budgetary problems that needed to be gone into. He said we all realize the penal institution is 100 years old, but until we appropriate the money to rebuild it, he said, the committee would not do much good.

Chairman Wilson asked how the committee could make this known to the people that this sort of study is needed.

Assemblyman Frazzini said there are advisory boards to the juvenile detention facilities and also a prison commission. She said this is their job, but the committees just don't hear from them. "They are set up for this, just it just doesn't work."

Frazzini moved that ACR 11 be held for further study. Seconded by Swallow. Unanimously carried.

S.B. 63 - Chairman Wilson said that the first of the introducers of this bill was talking to him and is most anxious that this committee take some action on this. He asked for an opinion from the committee.

Miss Foote said she had asked the Senator what this was going to cost. She said there were always legal and other costs involved in a name change. Mrs. Frazzini agreed with Miss Foote that there would be costs involved in this respect. She said she thought Dr. Tillum was a fine superintendent and she personally felt it was a fine idea to name the hospital for him.

Page 10 - Health & Welfare Committee

Feb. 11, 1969

Chairman Wilson stated that if this was the consensus of opinion, he had no objection. He said, however, he felt they should have information regarding costs of changing the stationery, painting out old signs and painting in the name change, and this type of thing. He said that if they concurred, then he would appoint a committee.

Assemblyman Brookman said she believed lines 15 and 16 of the bill would take care of this. "2. In this chapter and throughout Nevada Revised Statutes, the phrase, 'Nevada state hospital' refers to the Sidney J. Tillim Memorial Hospital".

Assemblyman May asked if he was correct in assuming that unless otherwise specified, this would not become effective until July 1, 1969. He said he felt that would certainly allow for the financial arrangements to take care of themselves in changing the name by that date.

Assemblyman Foote said she had no objection to the changing of the name. She made a motion that SB 63 be passed out of committee for the consideration of Ways and Means. Brookman seconded. Unanimously carried.

Brookman introduced BDR 16-808, a proposal which permits licensed physicians to perform abortions. She explained this proposal called for total repeal of the abortion bill as it now reads.

May moved "DON'T PASS".  
Seconded by  
Unanimously carried.

Chairman Wilson adjourned the meeting at 4:45 P.M. and announced the next hearing on AB 77 would be held on Thursday, February 13, 2:30 P.M. in Room 39.