MINUTES OF THE SENATE COMMITTEE ON HUMAN RESOURCES AND EDUCATION

Seventy-fourth Session May 23, 2007

The Senate Committee on Human Resources and Education was called to order by Chair Maurice E. Washington at 4:52 p.m. on Wednesday, May 23, 2007, in Room 2135 of the Legislative Building, Carson City, Nevada. Exhibit A is the Agenda. Exhibit B is the Attendance Roster. All exhibits are available and on file in the Research Library of the Legislative Counsel Bureau.

COMMITTEE MEMBERS PRESENT:

Senator Maurice E. Washington, Chair Senator Barbara K. Cegavske, Vice Chair Senator Dennis Nolan Senator Joseph J. Heck Senator Valerie Wiener Senator Steven A. Horsford Senator Joyce Woodhouse

GUEST LEGISLATORS PRESENT:

Assemblyman Bernie Anderson, Assembly District No. 31 Assemblywoman Kathy McClain, Assembly District No. 15 Assemblywoman Bonnie Parnell, Assembly District No. 40

STAFF MEMBERS PRESENT:

Marsheilah D. Lyons, Committee Policy Analyst Joe McCoy, Committee Policy Analyst Sara Partida, Committee Counsel Betty Ihfe, Committee Secretary

OTHERS PRESENT:

Scott Craigie, Nevada State Medical Association
Craig Kadlub, Clark County School District
Jennifer Stoll-Hadayia, MPA, Public Health Program Manager, Washoe County
District Health Department
Michael J. Willden, Director, Department of Health and Human Services

Michael Hackett, American Cancer Society Al Bellister, Nevada State Education Association

Lonnie Shields, Nevada Association of School Administrators; Clark County Association of School Administrators and Professional-technical Employees

Anne Loring, Washoe County School District Joyce Haldeman, Clark County School District

CHAIR WASHINGTON:

We will have testimony on three bills today. They are <u>Assembly Bill (A.B.) 182</u>, <u>A.B. 354</u> and <u>A.B. 460</u>. We will also consider several Senate bills for concur or not concur action.

- **SENATE BILL 110 (2nd Reprint)**: Revises provisions governing the administration of examinations to pupils enrolled in the public schools. (BDR 34-474)
- **SENATE BILL 112 (2nd Reprint)**: Enacts provisions governing the sale of products containing materials that are used in the manufacture of methamphetamine and other controlled substances. (BDR 40-27)
- SENATE BILL 142 (2nd Reprint): Revises provisions governing certain forms used by hospitals in this State. (BDR 40-602)
- <u>SENATE BILL 244 (2nd Reprint)</u>: Revises provisions governing the collection of data relating to the tracking of waiting times for emergency medical services at hospitals. (BDR 40-94)
- <u>SENATE BILL 396 (2nd Reprint)</u>: Revises provisions relating to subsurface installations. (BDR 40-1386)
- ASSEMBLY BILL 182 (2nd Reprint): Makes various changes concerning the Fund for a Healthy Nevada. (BDR 40-158)
- ASSEMBLY BILL 354 (2nd Reprint): Revises provisions governing the health of pupils. (BDR 34-850)
- ASSEMBLY BILL 460 (2nd Reprint): Revises provisions regarding public schools and educational personnel. (BDR 34-1279)

CHAIR WASHINGTON:

We will open the hearing on A.B. 354.

ASSEMBLY BILL 354 (2nd Reprint): Revises provisions governing the health of pupils. (BDR 34-850)

ASSEMBLYWOMAN BONNIE PARNELL (Assembly District No. 40):

The bill you have before you is the result of cooperation between the League of Women Voters of Las Vegas Valley, the Nevada Health Care Reform Project (NHCRP), the Nevada State Medical Association (NSMA) and the Nevada Public Health Foundation (NPHF). <u>Assembly Bill 354</u> is an attempt to address childhood obesity by using the existing framework within our schools to create proactive events in our communities and throughout the State. Currently, twice during their elementary school years, children are given hearing, visual and scoliosis checks.

On page 2, lines 13 and 14, it states the screenings will take place "before the completion of the first year of initial enrollment in elementary school." This is one of the most important parts of this bill. Regardless of which year a child enters the system, by the end of that first year of enrollment, the school nurse or another qualified health care provider will conduct a height and weight measurement and a hearing, visual and scoliosis screening. Previously, a child may have been in school for several years before he or she was screened. If a child had a problem, sometimes it would not be discovered before it led to learning or behavioral difficulties. Also, on page 2, line 15, you will see the words "two grades" have been crossed out. This deletion ensures we are not increasing the workload on our school nurses. We are stating in the wording there are to be screenings only twice during children's elementary school years.

Since these screenings are required by law, on page 3, lines 22-30, it suggests collaboration with other qualified health care providers to ease the workload on our school nurses. In lines 34-41, it explains that the results of the screenings will be in a totally unidentifiable format. One of the reasons this information is so important is it allows the State Health Officer of the Health Division of the Department of Health and Human Services (DHHS) to apply for grants. If we do not have information compiled, it is difficult for the State to make a case for the assistance needed.

Initially, this bill had a fiscal note of \$75,000. That amount would have been used for a statewide meeting on childhood heath-related issues. The fiscal note was removed when the language on page 5, lines 31-36, was added directing the Legislative Committee on Health Care (LCHC) to convene that meeting.

SENATOR HECK:

Conducting these assessments is vitally important, especially as we see the incidents of childhood obesity increasing. With the critical shortage of school nurses who are preoccupied with the case management of chronically ill children, where are the nurses going to find the time to do these assessments? Was any consideration given to allowing the first aid and safety assistants perform the height and weight screenings?

ASSEMBLYWOMAN PARNELL:

Because we did not want to add to the nurses' workload, we left the number of mandated screenings at two. That is why we also included the collaboration language, so other health care providers could assist the school nurses.

SENATOR HECK:

In Henderson, we have Touro University, and I think those students would appreciate the opportunity to come into the schools. I am not sure if the first aid and safety assistants would be considered as qualified health care providers, but perhaps some language to allow that as an option could be included.

ASSEMBLYWOMAN PARNELL:

If you would provide the appropriate language for that option, we would amend it into the bill.

SENATOR WOODHOUSE:

In the Clark County School District (CCSD) through some school partnerships, businesses are matched one-on-one with at-risk schools. Some health care providers in the business community work with their match schools and assist the school nurses with the screenings.

ASSEMBLYWOMAN PARNELL:

On page 3, lines 22 and 23, it does allow each school district's board of trustees to decide their policy on collaboration. Of course, the

collaborations in the CCSD are going to look very different from collaborations in the White Pine County School District.

CHAIR WASHINGTON:

The word collaboration is broad enough to include a variety of opportunities and resources for assistance. The key word is "qualified" health care providers. While I am not opposed to the height and weight screenings specified on page 2, lines 24-26, is there an "opt-out" provision in the bill if parents do not want their child to participate in the screenings? Is it stipulated that a written notification is required by the parents?

ASSEMBLYWOMAN PARNELL:

Yes. On page 3, lines 31-33 the current law provides for a written statement by the parent or guardian for the child to not participate. It is important to mention again that the information gathered in the representative sampling must exclude any identifiable information relating to a particular child.

CHAIR WASHINGTON:

Will the school districts send out a notification prior to the screenings, so parents are aware of when they will be conducted?

SCOTT CRAIGIE (Nevada State Medical Association):

Yes, before any health-related activities can be conducted, the school district is required to send a notice home. Usually, it is a parent consent form rather than a non-consent form, so there is no mistaking the intention of the parent.

CHAIR WASHINGTON:

In the notification to the parents, will there be a list of the screenings to be conducted?

Mr. Craigie:

It probably would be for the reason I just mentioned. I will find out and let you know.

CHAIR WASHINGTON:

Should we codify in the statute that a notification will be sent to the parents indicating when the screenings will be conducted and what the tests are?

MR. CRAIGIE:

I do not object to that at all, but I do wonder if it would affect the representative sampling collection. There could be a reference in the statute requiring a parental consent form.

SENATOR HORSFORD:

In my district, there are already several regular and charter schools that have strong collaboration or partnerships. The Sunrise Children's Foundation has a full-time nurse who works with schools. The Nevada Health Centers also work with some of the schools. With the permissive language about collaborating, in your discussions with the school boards, how committed do you think they will be to carrying out these partnerships in the schools where they are needed? Does the language in this bill give the type of local autonomy or flexibility we are looking to accomplish?

ASSEMBLYWOMAN PARNELL:

Is there language we could include to show that the individual school also has the authority to enter into collaborations?

SENATOR WIENER:

Could that language include both the board of trustees and the individual schools?

Mr. Craigie:

One of the positive things about including the board of trustees is at each of their meetings, their legal counsel is present. To the extent there are any questions about prospective collaborations, that counsel would be available to make sure the collaborations would be appropriate. These decisions would be made in all 17 school districts in the State at the board of trustees' level.

SENATOR HORSFORD:

Is there a way to achieve having the policy set by the board of trustees and still have the schools involved in helping to identify the opportunities and the collaborations?

Mr. Craigie:

Yes, there is. Some of the people who have worked on this bill and who have agreed with its intent are here today. While I am representing

the NSMA, others present are from the NHCRP and the NPHF. We all support A.B. 354 because it has such strong potential for our children and their health.

CRAIG KADLUB (Clark County School District):

We appreciate your acceptance of our amendments to this bill as they significantly reduce the potential workload for the nurses. If the CCSD would have had to weigh, measure and document 100,000 students, assuming each screening could even be accomplished in 3 minutes, it would have amounted to over 5,000 hours.

When the head nurses of each district met, while they appreciated the language of using qualified health care personnel as volunteer helpers, they were skeptical that the number of volunteer hours could be maintained year after year for something mandated in statute. There was also concern about the time it would take to locate and train the needed numbers of volunteers. This did not appear to be a practical solution to them. The critical piece of this bill for the CCSD is on page 2, line 26. It proposes a representative sampling of students be used. On page 2, lines 31-33, it states, "The Health Division of the Department of Health and Human Services shall define 'representative sample' in collaboration with the school districts" This language does reduce the nurses' workload, but still allows the Health Division to get the information it needs, so we support it.

As a suggestion about the board of trustees language on page 3, line 22, perhaps the word "designee" could be added. This would allow the chief nurse in a school district or the principal of a school to investigate or identify productive collaborations.

SENATOR HECK:

As a related issue, the shortage of nurses in schools could be addressed, at least in part, if the Department of Education would reevaluate the requirements to be a school nurse. Many pediatric nurses would love the opportunity to work in the schools, but they do not have the required bachelor's degree.

SENATOR WIENER:

The two concerns I had about <u>A.B. 354</u> were the collection and confidentiality of the personal information. I am pleased that the confidentiality of the personal identifying information has been addressed satisfactorily.

I support the representative sampling method rather than the random sampling method. Random sampling gives us lots of numbers, but representative sampling gives us meaningful information such as reflecting the differences in geographical locations. The data will be especially helpful to the Advisory Council on the State program for Fitness and Wellness as they make their recommendations. One of the major charges to that group is to address the health of young people and to work through education to make positive changes. This bill will assist them in fulfilling that charge.

JENNIFER STOLL-HADAYIA, MPA (Public Health Program Manager, Washoe County District Health Department):

For the record, we support A.B. 354.

CHAIR WASHINGTON:

Would the Washoe County District Health Department (WCDHD) participate in whatever collaboration is developed by the school district or its designee?

Ms. Stoll-Hadayia:

Absolutely, we feel there is a great need in our community for accurate data about the body mass index of school children. We would be happy to assist in defining the representative sample and collecting and analyzing the data. We are pleased to offer our technical assistance.

CHAIR WASHINGTON:

Senator Wiener, do you wish to offer an amendment about the aggregated data with the names of those individuals to be held in confidence?

SENATOR WIENER:

No, because on page 3, lines 38-41, it states that no personal identifying information would be released. It is the data we want because we are seeing the number of overweight children growing to crisis levels. With a representative sampling, we should be able to identify specific problems in specific locations and suggest specific remedies. This bill is definitely going in the right direction.

CHAIR WASHINGTON:

We have a written testimony (<u>Exhibit C</u>) submitted by Ruth Mills to be added to the record. Ms. Mills is president of the NHCRP and extends support for A.B. 354.

We will close the hearing on A.B. 354.

There are three amendments being proposed for this bill. One concerns notification to the parents by the school district; the second concerns qualified health care providers, and the third concerns wording to allow for broad collaboration.

SENATOR HORSFORD MOVED TO AMEND AND DO PASS AS AMENDED A.B. 354.

SENATOR WOODHOUSE SECONDED THE MOTION.

THE MOTION CARRIED. (SENATOR CEGAVSKE WAS ABSENT FOR THE VOTE.)

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CHAIR WASHINGTON:

We will open the hearing on A.B. 182.

ASSEMBLY BILL 182 (2nd Reprint): Makes various changes concerning the Fund for a Healthy Nevada. (BDR 40-158)

ASSEMBLYWOMAN KATHY McClain (Assembly District No. 15):

My intent with this bill was to find a way to dissolve the Task Force for the Fund for a Healthy Nevada (Task Force) and collapse it into the Grants Management Advisory Council (GMAC) which would save staff and Legislator's time. There were five bills addressing this subject, <u>A.B. 599</u>, <u>Senate Bill (S.B.) 64</u>, <u>S.B. 65</u>, <u>S.B. 83</u> and <u>S.B. 164</u>. I collapsed all five bills into A.B. 182.

- ASSEMBLY BILL 599: Increases the administrative cap on certain allocations distributed from the Fund for a Healthy Nevada. (BDR 40-1409)
- SENATE BILL 64: Expands the use of certain allocations made from the Fund for a Healthy Nevada. (BDR 40-240)
- **SENATE BILL 65**: Revises provisions governing the allocation of money from the Fund for a Healthy Nevada. (BDR 40-242)

<u>SENATE BILL 83 (1st Reprint)</u>: Revises provisions governing the Grants Management Advisory Committee of the Department of Health and Human Services. (BDR 18-593)

SENATE BILL 164 (1st Reprint): Revises provisions governing the Fund for a Healthy Nevada. (BDR 40-95)

Assembly Bill 182 is an attempt to establish a more efficient method of allocating the tobacco funds which currently go through the Task Force. Through the DHHS, the GMAC had set up a system with four different subcommittees. Those subcommittees included the GMAC and the Task Force members. In their various areas of expertise, the subcommittees looked at grants from the Master Settlement Agreement (MSA), which is the tobacco settlement money. The categories are the Title XX Social Service Grant, the Children's Trust Fund, the Community Service Block Grants (CSBG), the Family Resource Centers (FRC) and the Family to Family Connection funds. Allocating them into different areas seemed to be more efficient.

If it meets with your approval, I will go through the bill page-by-page, and I will point out the changes to indicate how all the bills were consolidated.

On page 3, line 4, we have added "and person with disabilities" to the overall provisions for the Senior RX and for the Disabled RX programs. At one time the wording "to the extent money is available" was removed from the entire bill, but we put that phrase back throughout the bill wherever it was appropriate. We did this because we do not want to set up the expectation that if the tobacco money is not available, it would be replaced by monies from the General Fund.

Page 3, lines 42-45 and page 4, lines 1-9 actually delete the reference to the Task Force itself. This came out of S.B. 164.

ASSEMBLYWOMAN McCLAIN:

On page 4, lines 10-12, we maintained the 2 percent of the money in the fund that goes to the State Treasurer for administration. From <u>A.B. 599</u>, we took the language where the percentage for administration had been split out for each of the different areas. Those areas are the Independent Living Grants, the Senior RX, the Disabled RX, and they were collapsed all that into one fund which is 5 percent of the money. This is on page 4, lines 13-17.

We put in the language from <u>S.B. 164</u>, page 3, lines 16-24 into <u>A.B. 182</u> on page 4, lines 33-41. On lines 43 and 44 and continuing on page 5, lines 1and 2, we replaced the Task Force with the GMAC. The 30 percent for the Senior RX was not changed on page 5, lines 18-25. On page 5, lines 34-39, rather than listing all the agencies to receive reports, we put in "and any other committees or commissions the Director deems appropriate."

ASSEMBLYWOMAN McCLAIN:

On page 5, lines 41-45 and page 6, lines 1-11, we made a change because we had \$350,000 coming off the top. On page 6, lines 12-14, we put the \$200,000 back in. That money rolls over every year. The remaining \$150,000 was going to dental programs, but by adding dental programs into the Senior Rx and the Disability RX, we no longer needed to take that money off the top.

The language on page 5, lines 1-17 grants authority to the GMAC for the actual allocation to go through the subcommittee process. <u>Senate Bill 164</u> included the LCHC as the authority, but we thought it would be clearer to keep it with the GMAC.

On page 6, lines 15-23, it is changed back to be allocated to the assisted living facilities. We changed some of the allocations from the tobacco cessation money, and we put the extra 5 percent back into the Disabled RX and the disabled fund that helps with their independent living.

On page 6, lines 38-44, we reduced the tobacco cessation money from 20 percent to 15 percent, although originally, I had put in 10 percent. In 2008, there will be more money distributed along with the MSA, so we found that the tobacco cessation portion, which is 15 percent, would be held harmless. That fund will not lose any money; it just shows a lower percentage. By doing that, we can put more money back into the disabled community and the Disabled RX program.

CHAIR WASHINGTON:

Are those funds guaranteed that you said are coming back?

ASSEMBLYWOMAN McCLAIN:

They are as guaranteed as anything is in the MSA.

Originally, I wanted 2 percent out of that fund to go into evaluations and needs assessments; however, the Assembly Committee on Ways and Means did not agree, so we went with 10 percent to the disabled fund and 5 percent to the Disabled RX. On page 7, lines 14 and 15, the language was changed from "for persons caring" to "the care or relief of informal caretakers." It is on page 7, lines 22-29, where the Disabled RX was changed to 5 percent with the other benefits such as dental, vision and hearing aids added.

We did not change the request to go from a two-year grant cycle to a competitive round every four years. We did not put that in <u>A.B. 182</u> since it failed in <u>S.B. 541</u>. The language was on page 4, lines 43-44 of <u>S.B. 541</u>.

<u>SENATE BILL 541</u>: Makes various changes concerning the policies and procedures of the Task Force for the Fund for a Healthy Nevada. (BDR 40-241)

ASSEMBLYWOMAN McCLAIN:

On page 7, lines 22-32, it states the Senior RX and the Disabled RX only refers to not being able to transfer the money to the prescription programs from other parts of the tobacco settlement money. Basically, it means the prescription programs cannot be subsidized with tobacco money allocated to the other areas.

On page 8, lines 5-7, that is where the Task Force from <u>S.B. 65</u> is deleted. On page 9, lines 3-11, it is referring to the prescription programs where we added in the dental, vision and hearing aid language. We did the same on page 10, lines 23-28.

SENATE BILL 65: Revises provisions governing the allocation of money from the Fund for a Healthy Nevada. (BDR 40-242)

On page 14, lines 1-36, we clarified the membership of the GMAC. In those lines we increased the members from 11 to 15. We noted that members serving on the GMAC cannot be employed by anyone who receives grant money. From S.B. 83 we kept the school district or its designee language and kept the two members who possess knowledge, skill, and experience in provision of services to children. We added one member who possesses knowledge, skill and experience of provisions of services to people with disabilities, another member skilled in cessation of tobacco use and another member experienced in providing

health care services to children. We added one representative who is a member of the Nevada Commission on Aging, but is not a member of the Legislature. In lines 40-43, we added when their terms would start and expire.

<u>SENATE BILL 83 (1st Reprint)</u>: Revises provisions governing the Grants Management Advisory Committee of the Department of Health and Human Services. (BDR 18-593)

We established the effective dates for a particular grant cycle which is in the second year of the tobacco money. Round one began last spring; this spring is round two. In the spring of 2008, the new money will be received, the new percentages will take effect, and the GMAC will be fully in place.

SENATOR HECK:

In A.B. 182, page 7, lines 5 and 6, where the bill addresses the money that goes to children's health services, I have a concern we are going to put in the statute a particular area of health emphasis. As the chair of the Children's Health Services subcommittee last time, we tried to make a more equitable distribution of those limited funds. In the past, a majority of the funds did go to oral health. There are significant other monies for children's oral health programs from the Health Division and other sources, so I am hesitant to place a priority on one particular area of children's health instead of allowing the GMAC to determine where the money should go.

ASSEMBLYWOMAN McCLAIN:

That same concern was discussed in the Assembly when we included language with an emphasis on tobacco use prevention programs for children. The language is not a mandate. It is more a policy statement that the money be used for oral health, but it does not have to be.

SENATOR HORSFORD:

The GMAC is not the grants management entity for just the tobacco money, is it? It is for all the programs, is it not?

ASSEMBLYWOMAN McClain:

It is not for all the grants in the State, but it does cover the tobacco money and the monies from the Title XX, the Children's Trust Fund, the CSBG, the FRC and the Family to Family grants.

SENATOR HORSFORD:

Does the GMAC membership reflect those different funds adequately? The membership seems to emphasize health care. Not all those funds you mentioned have the same focus. Specifically, why was the representative from the Juvenile Justice Services, Division of Child and Family Services, the DHHS removed?

ASSEMBLYWOMAN McCLAIN:

The current membership on the GMAC became the first 11 members. I wanted to make sure we had representation from the Task Force on the GMAC. The change of the juvenile justice member came from <u>S.B. 83</u> which passed out of the Senate.

SENATOR HORSFORD:

Removing the juvenile justice member is not something you requested, correct?

ASSEMBLYWOMAN McCLAIN:

Correct.

SENATOR HORSFORD:

Is it possible to get a matrix from the staff of all various funds and how much is in each fund, so we can make sure we have equitable representation on the GMAC? The GMAC makes a lot of funding decisions, and I would like to be comfortable about representation.

MARSHEILAH D. LYONS (Committee Policy Analyst):

We can get that for you by tomorrow.

CHAIR WASHINGTON:

In <u>S.B. 164</u>, page 4, lines 12-15 and on page 5, lines 42-44 continuing to lines 1 and 2 on page 6, we asked the GMAC to forward their funding recommendations to the LCHC. Is there any particular reason that has not been included in A.B. 182?

ASSEMBLYWOMAN McClain:

When we spoke with Michael J. Willden, Director, DHHS, he did not have a problem with sending reports to the LCHC. When we looked at the GMAC in general, there are many committees and commissions that would receive

reports. Mr. Willden will send reports to LCHC. Since the DHHS prepare more than 100 different reports, he indicated one more would not be a problem.

CHAIR WASHINGTON:

This is not that kind of a report. What <u>S.B. 164</u> intended is for the allocation recommendations that the GMAC makes in regard to the tobacco funds to be sent to the LCHC. We want to make sure those recommendations are not arbitrarily sent to the Interim Finance Committee without any oversight provided by the LCHC. This is especially important since we abolished the Task Force. If you have no qualms about it, I would like to have that in A.B. 182.

ASSEMBLYWOMAN McCLAIN:

That is probably fine, but I was just concerned about having another layer of approval. Are you talking about approval?

CHAIR WASHINGTON:

In $\underline{S.B.\ 164}$, page 5, line 43 and 44 and page 6, lines 1 and 2 is the wording which says, "The Department shall consider recommendations from the Legislative Committee on Health Care"

ASSEMBLYWOMAN McCLAIN:

After the subcommittees make their recommendations to the GMAC, then you are asking for the GMAC to go to the LCHC?

CHAIR WASHINGTON:

We would like the GMAC's recommendations forwarded to the LCHC, especially since we abolished the Task Force. The other question I have is about the drop in percentages from 20 percent to 15 percent in dealing with the tobacco cessation programs. Since there is no guarantee for those funds, my concern is how to maintain that level and maybe later reconstitute others. I think both the CCSD and the Washoe County School District (WCSD) have done a great job doing what the Task Force assigned them to do which was to reduce the use of tobacco products. I would not want to diminish their efforts in any way.

ASSEMBLYWOMAN McCLAIN:

The percentage change was the compromise because we needed to increase the disability portions. Since the ballot question on smoking passed, we felt the secondhand smoke problems, at least in public, had been addressed. Since

money-wise it was going to be held harmless monetarily, we thought this was the time to make some shifts.

CHAIR WASHINGTON:

I am indicating the change is a concern, and we will want to work on it.

ASSEMBLYWOMAN McCLAIN:

The people I have been working with on this bill agree that would be fine with them.

SENATOR WIENER:

In addition to the exclusion of the juvenile justice member, I noticed a broad-based nonprofit organization was removed. When we see the matrix, will the Committee have an opportunity to discuss this again? I want to do this right.

MICHAEL J. WILLDEN (Director, Department of Health and Human Services):

The GMAC oversees the six funds. They are Title XX which is about \$14 million, the Children's Trust Fund which is about \$2 million to \$3 million, the CSBG which is mostly formula money that goes to community action agencies and amounts to \$3.2 million and the tobacco dollars with which you all are familiar. The GMAC also oversees the distribution of the money to the FRCs and to the Family to Family programs which together are about \$3 million to \$3.5 million. The matrix of the various funds and the dollars the GMAC oversees will be helpful to us.

With regard to the change in the GMAC membership and deleting the juvenile justice representative, since they are similar services, we thought instead of specifying one member from children's services and one from juvenile justice, we would designate two representatives from children's services.

The only concern the DHHS has with the bill is on page 14, lines 35 and 36, where language was added. It states "An entity who employs a member of the Advisory Committee is not eligible to receive a grant." We have no problem with that language except that in rural Nevada, school districts act as the fiscal agent of the FRCs. Our concern is that language may not allow us to have school district employees or the superintendents of schools sit on the GMAC. Currently, at least one superintendent is a member. We want to make

sure the relationship of being a fiscal intermediary for the FRC is not a problem. Superintendents are not an employee of the entity, but they do have a fiscal relationship.

CHAIR WASHINGTON:

Please work with our Committee counsel to resolve this concern and make sure the language is clear.

ASSEMBLYWOMAN McCLAIN:

For the record, that was an amendment added in the Assembly Committee on Ways and Means; it was not in my original bill.

MR. WILLDEN:

We concur with that intent. We want to make sure the superintendent can still sit on the GMAC.

My last comment is not any difficulty with the bill; it is an amendment for your consideration. Over the past few weeks, it has become apparent to us that we have an opportunity in our AIDS Drug Assistance Program (ADAP) program. The DHHS pays for certain medications in that program and we thought we were able to run those payments through the Senior RX and the Disability RX programs to benefit those individuals and the program (Exhibit D). Under Medicare Part B, there is something called true out-of-pocket expenses (trOOp). When an individual spends a certain amount of money on his or her prescription drugs, it counts toward their trOOp. That means when they go into the donut hole and come out of the donut hole, it is part of that calculation. This amendment is new because we thought we were fine, but on a second read, legal counsel advised us to change some language which would allow the ADAP program to run their money through the Disability RX program. There is no fiscal note involved; it is just how the money flows.

Since that money counts toward the trOOp and will allow the ADAP money to serve more people, we prepared the amendment. In summary, we are taking expenses out of ADAP and running them through the Disability RX program which counts toward trOOp; therefore, when the person comes through the donut hole, Medicare Part D pays, and we do not have to spend as much money. In other words, we leverage federal dollars, so the money goes further.

MICHAEL HACKETT (American Cancer Society):

The American Cancer Society (ACS) is in support of this bill and the amendment. When the bill was introduced in the Assembly, we had some objections to it; however, we have compromised and are satisfied with the result. Obviously, our desire is not to see the tobacco funding cut to any level, so if this Committee decided to keep it at 20 percent, we would not argue with that decision. However, the compromise is fair with the level cut by 5 percent to 15 percent. The difference will be made up by booster payments which the State will begin receiving in April 2008. The result is the actual dollars for tobacco use prevention programs are consistent for the next biennium with what they are right now.

As far as the emphasis on child tobacco use prevention programs, the current language is fine; however, if it is the Committee's pleasure and the bill sponsor agrees, we would be willing to work together to find another level or degree of clarification.

Our only other concern with this bill is the effective date which is July 1, 2007. Since the booster payments would not be received until April 2008, we want to avoid any reduction in the money that is allocated for these tobacco use prevention programs. Again, the ACS is in support of A.B. 182.

Ms. Stoll-Hadayia:

There are two parts of this bill which the WCDHD would like to address. The first is the effective date of July 1, 2007. Currently, funded tobacco prevention grantees have a two-year grant cycle with the Task Force. Their second year begins on July 1, 2007. Our concern is if this bill requiring 5 percent of the tobacco allocation to be reallocated goes into effect on July 1, 2007, how will that impact the currently funded grantees? We do not see a way we can keep those grantees funded at their current level, and at the same time reallocate 5 percent from that allocation to other issues.

Our second concern is on page 6, lines 43 and 44. The language suggests a focus on children's programs. The Washoe County District Attorney's Office has advised me that even though it is not a mandate, the language does create the possibility for the GMAC to allocate all of the funding to children's health programs. Since it is not the intent of this bill, there is no reason to create that possibility. Our recommendation is to delete that language altogether in order to prevent that possibility from becoming a reality.

ASSEMBLYWOMAN McCLAIN:

I would like to see more emphasis on prevention of tobacco use by children than trying to get older people to quit smoking. I feel the same about children's oral health, but they can both be removed from the bill.

As for the effective date issue, the second year grants are already approved, so a date change is not going to affect them at all. The reason we put July 1, 2007 is so the GMAC membership would be in place for the upcoming year. If this date prevails, when the 2008 funding is available and the new percentages go into effect, the newest members on the Committee will be well-oriented.

CHAIR WASHINGTON:

If we need some language clarifying that, perhaps the date should only apply to the GMAC membership.

ASSEMBLYWOMAN McCLAIN:

We did try to do that, but we may not have accomplished it.

SARA PARTIDA (Committee Counsel):

On page 17, lines 15-19, that concern is addressed. It states, "Notwithstanding the provisions of this act, an award of money granted by the Task Force for the Fund for a Healthy Nevada pursuant to the *Nevada Revised Statute* (NRS) 439.630 on or before June 30, 2007, remains in effect and the Grants Management Advisory Committee shall monitor the award of money pursuant to the NRS 232.385."

SENATOR HORSFORD:

Why would we not have an emphasis on children's health programs? There is nothing in the bill that says we are required to do only programs related to children. We do not have enough money to do everything.

Ms. Stoll-Hadayia:

Actually, the data we have on smoking nationally and for Nevada shows, at this time, smoking rates in children are not on the rise. In Nevada, smoking rates are rising in specific adult populations such as people in the lower socioeconomic status and in adults in communities of color, specifically Latinos and African Americans. The reason for that is fairly straightforward in that the MSA made it so that the tobacco industry could not target children anymore. Instead, they aggressively target adults and young adults,

18 years old and older. We are seeing the smoking rates in those populations continuing to rise, whereas children's rates are not rising as much.

There is a good deal of policy out there which protects children in a way we do not protect adults from tobacco industry marketing. Our data is showing different trends. In reviewing grant applications to the GMAC, it would be our expectation, as a grantee, that we would demonstrate where our need is. If there is a demonstration of need for children or a demonstration need for adults, we would expect to compete equally as opposed to there being language in the bill that would direct the GMAC to favor children's programs. Our legal counsel is saying they could do that. We would rather compete with the data at hand and have the best program with the greatest needs be selected.

SENATOR HORSFORD:

While there may be a greater number of adults who are currently smoking, there are still enough young people smoking that we still need those prevention programs. I would rather target our money instead of spreading it too widely.

Was there discussion about requiring performance-based outcomes on any of the grants for which the GMAC is responsible? Is it required by statute and are there benchmarks for every grantee?

ASSEMBLYWOMAN McCLAIN:

Yes, there was discussion about this. That is one of the really positive outcomes of having the GMAC and the subcommittees in those different areas spend time looking at performance and outcomes. Not having the Task Force removes an additional layer of oversight.

CHAIR WASHINGTON:

You prefer a two-year time period in reapplying for grants instead of a four-year time period. As I understand it, your concern is to open the process more often for the grantees who want to compete for the dollars. Our intent is if a grantee has met the performance indicators, there should be some provision where they could resubmit a simplified request. After a four-year grant cycle is up, the grantee could then reapply.

ASSEMBLYWOMAN McCLAIN:

When the Task Force was originally formed, it was a competitive, every-year cycle. We then went to the two-year grant cycle where the first year

is competitive. In the second year, if the grantee met their performance measures, all they had to do was submit a budget and prove they were on target. Stretching the grant cycle out to four years seems too long as so many things can happen.

CHAIR WASHINGTON:

I think the intent was to basically have the grantees report the second year, but not have them go through the actual grant process again.

ASSEMBLYWOMAN McCLAIN:

That is the way it is now, but the original request was to make it a four-year cycle.

CHAIR WASHINGTON:

I am defending the applicant because applying for a grant is a cumbersome and time-consuming process. A lot of time is spent putting the application together for the next cycle. If the grantee has met the performance indicators and their financial records are in order, there ought to be an opportunity to submit a brief application and move into the next cycle.

ASSEMBLYWOMAN McCLAIN:

My concern about a four-year cycle is it may seem to the grantees more like an entitlement rather than a competitive process.

SENATOR WIENER:

Another thought about a longer cycle is there are new things that come along, or there might be a point where the grantee is ready to include something extraordinary, or there is something we did not know about two years earlier which might be of benefit to the entire State. I do not want to see innovative projects frozen out because someone gets a two-year bye. Applying for grants is a tough process; it is both frustrating and exhilarating. When new people come along who have a great something to provide, we would not want to miss out on it. It is a balancing act.

CHAIR WASHINGTON:

Evaluations are conducted. If applicants are not meeting their performance standards or are failing their evaluations, they quite naturally would not receive the grant for the next grant cycle. There are pluses and minuses either way.

When you mentioned the 20 percent and the 15 percent earlier, that money is not guaranteed. There may need to be a compromise on this, but I will talk with our Committee counsel to see if what I have in mind is possible.

We will consider this bill again in our work session. We will close the hearing on A.B. 182 and open the hearing on A.B. 460.

ASSEMBLY BILL 460 (2nd Reprint): Revises provisions regarding public schools and educational personnel. (BDR 34-1279)

ASSEMBLYMAN BERNIE ANDERSON (Assembly District No. 31):

The crisis in the teaching shortage here in Nevada is very real. The level of compensation is part of that discussion; however, as has been demonstrated by research, the single most important factor that impacts student achievement is the quality of the teacher in the classroom.

Assembly Bill 460 requires that an administrator conducting an evaluation of a teacher shall personally observe that teacher in the classroom for at least one hour, and it lists specific factors that must be included on any evaluation of a teacher. We feel it is not too much to ask of an administrator to actually observe the performance of the teacher for an hour before writing an evaluation, thus ending a practice that many of us have euphemistically called "drive-by evaluation."

In addition to my written testimony (<u>Exhibit E</u>), Al Bellister, a retired director of research at the Nevada State Education Association (NSEA) is here to testify. This Committee has heard this legislation in previous sessions, and I thought we would try it one more time. I understand there were some concerns about dollars being attached to it. The dollars were stripped from the bill in the Assembly, so the fiscal note no longer applies.

CHAIR WASHINGTON:

In the bill on page 1, lines 1 through 5, are those the sections that have been stripped away?

ASSEMBLYMAN ANDERSON:

Yes, they were the money sections that would have dealt with potential problems. As a former classroom teacher for 33 years, I experienced going from using a pen and ink grade book system to a computer system. As a result of

those changes, much of the style of teaching has changed. During that evolution, the school administrator no longer had the time to spend in the classroom actually observing the teacher and giving them their professional evaluation.

Teachers need to be observed in order to get that all-important feedback to improve their teaching. This benefits both the teacher and the students. Not doing observations does not mean the administrators are not good administrators, it means they are busy administrators. However, without those observations and encouragement from their administrators, how can we retain teachers in the classroom? Teachers do not stay in the classroom because they will become rich or famous; they do it for many other reasons. I think one contributing factor to losing teachers is that they are not observed and encouraged by their supervising administrator. Assembly Bill 460 is a good piece of legislation. I urge your passage of it.

CHAIR WASHINGTON:

Is <u>S.B. 328</u> currently on general file in the Assembly? There are a couple of differences between it and this bill. In <u>A.B. 460</u>, page 3, lines 8-14, there is a 60-minute evaluation with 30 minutes being consecutive. In <u>S.B. 328</u>, we had a 45-minute evaluation. Is there a reason behind the times you have suggested?

SENATE BILL 328 (3rd Reprint): Revises provisions governing educational personnel. (BDR 34-473)

ASSEMBLYMAN ANDERSON:

Yes, there is. The first time we brought this legislation forward, there were some concerns raised in the Office of the Governor relative to the amount of time being spent by the administrators doing observations and evaluations. This bill reflects the consensus language agreed to by administrators. They felt 30-minute observations for a post-probationary teacher and 45 minutes for the probationary teacher were reasonable. That is particularly significant since we moved from the 55-minute, six-period days at the high school level to the 105-minute to 125-minute, every-other-day schedule. Making those changes dramatically changed the nature of classroom instruction. As administrators can only observe a particular class maybe two days in one week or three in the next, the 30 minutes seemed more workable.

CHAIR WASHINGTON:

In <u>S.B. 328</u>, section 8, beginning on page 5, lines 17 through page 7, line 10, basically deals with the administrator's observations and evaluations of teachers. This provision was agreed upon by the NSEA. As we process this bill, we would like to retain that section.

ASSEMBLYMAN ANDERSON:

I do think those issues have been melded together using similar language. I look forward to the passage of the bills.

AL BELLISTER (Nevada State Education Association):

The NSEA supports <u>A.B. 460</u>. We believe observations and evaluations of teacher performance in the classroom conducted by administrators is a valuable tool to improve teacher quality. It addresses, in part, the issue of teacher retention. When you look at national surveys about why teachers leave the profession, they cite salary, but they also cite a lack of administrative support. This bill goes toward improving that situation.

In <u>A.B. 460</u>, I am going to focus on lines on page 3, lines 34-36 which refer to correcting any deficiencies reported in the teacher's evaluation. Not all administrators conduct observations poorly, but unfortunately some do. When this happens, it is a tragedy. What has been distributed to you is a portion of two actual evaluations (<u>Exhibit F</u>) conducted by an administrator. At the top of the page is one of a probationary teacher in the Douglas County School District (DCSD). As you see, this evaluation was conducted on or before December 1, so the teacher had been in the classroom only three months. The teacher has been rated as unsatisfactory. Item B shows what the administrator is recommending. Look at the brevity of these comments. The excerpt on the bottom half of the page is of a probationary teacher in the CCSD. This teacher was also rated as unsatisfactory, and, again look at the brevity of the comments.

The NSEA's position on <u>A.B. 460</u> is for the administrator to tell the teacher what the deficiencies are, but also tell the teacher what is needed to correct them. Give the teacher the administrative support to correct the deficiencies. That makes the teacher better in the classroom and that is especially needed if it is at the beginning of a teaching career. This bill begins to address how these observations and evaluations can be improved.

In an article by a superintendent from Rhode Island who is a leader in the American Association of School Administrators, she wrote about the importance of instructional leadership and improving the ways teachers are observed in classrooms. She concludes her article with "We know that 150 observations is too lofty a goal, but we found that if we scale back to 75 observations a year of a teacher's performance in the classroom, that is a manageable number." All we are asking for is 60 minutes during the course of a year. The NSEA urges your support of A.B. 460.

LONNIE SHIELDS (Nevada Association of School Administrators; Clark County Association of School Administrators and Professional-technical Employees):

If this is a problem, we also want it solved. I do not believe it is widespread. Administrators do a lot of evaluations. The policies in the school districts require them to be done. When I was a principal in the WCSD, every year I was expected to do 45-minute observations on all my post-probationary teachers and at least 3, 45-minute observations on my probationary teachers. It is unlikely that has changed since I left the district, but if there are principals who are not doing effective evaluations, they should be. If some administrators need corrective action, we should be taking care of that. This legislation is something most administrators have already been doing, so the Nevada Association of School Administrators can support the bill.

ANNE LORING (Washoe County School District):

If this is happening in the WCSD, it should not be. We support this legislation.

JOYCE HALDEMAN (Clark County School District):

It is our expectation that everything in the bill is already being accomplished. However, having it put in statute gives it "more teeth;" therefore, we can better take care of those issues. We are supportive of the bill.

SENATOR HORSFORD:

What is the penalty for a principal if this is not done either by the existing policies or by what is envisioned in this bill?

Ms. Haldeman:

If appropriate observations are not being conducted, the teacher can go through a grievance process and have that brought to the administrator's attention. In the CCSD, every principal reports to a regional superintendent who would have

a conference with that principal. That principal can certainly be disciplined if he or she is not following the practices.

SENATOR HORSFORD:

I just wish everything did not start with a grievance process. It seems like observations are the administrator's responsibility. If principals are not doing their job, a teacher should not have to file a complaint against them.

MR. SHIFLDS:

Principals are evaluated also. As I understand <u>A.B. 460</u>, the principals will have to keep a list of the times they are in the classrooms and the observations they conduct. Before it was in the law, when I was evaluated as principal, my supervisors checked my observation log, reviewed some examples of the evaluations I wrote, sat in with me on an evaluation and made sure I was performing appropriately. If a principal is not doing a proper job, a report goes into his or her evaluation and steps can be taken to suspend or dismiss.

SENATOR WOODHOUSE:

When I was a principal, the written logs and reports that Ms. Haldeman and Mr. Shields have explained were required. All the evaluations I conducted went to my supervisor. Administrators do know what and how evaluations are or are not being conducted.

SENATOR WOODHOUSE MOVED TO DO PASS A.B. 460.

SENATOR WIENER SECONDED THE MOTION.

THE MOTION CARRIED. (SENATOR CEGAVSKE WAS ABSENT FOR THE VOTE.)

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CHAIR WASHINGTON:

The Committee needs to concur or not concur on several bills. They are S.B. 110, S.B. 112, S.B. 142, S.B. 244 and S.B. 396.

SENATE BILL 142 (2nd Reprint): Revises provisions governing certain forms used by hospitals in this State. (BDR 40-602)

This bill is supported by the DHHS. The amendment eliminates references in existing law to the uniform billing form, "UB 82," and requires all information to be submitted electronically in a complete, accurate and timely fashion.

SENATOR HORSFORD MOVED TO CONCUR WITH AMENDMENT NO. 905 TO S.B. 142.

SENATOR HECK SECONDED THE MOTION.

THE MOTION CARRIED. (SENATOR CEGAVSKE WAS ABSENT FOR THE VOTE.)

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<u>SENATE BILL 112 (2nd Reprint)</u>: Enacts provisions governing the sale of products containing materials that are used in the manufacture of methamphetamine and other controlled substances. (BDR 40-27)

This amended language is requested by the Retail Association of Nevada and has been agreed to by the Office of the Attorney General. It amends section 7 which is on page 3, lines 3-15 and deals with the dosage of the blister packs and the gel contents in the capsules. It also requires that the number of transactions be kept for each calendar day, and the retailer must keep his log book based on the federal law.

SENATOR HECK MOVED TO CONCUR WITH AMENDMENT NO. 919 TO S.B. 112.

SENATOR HORSFORD SECONDED THE MOTION.

THE MOTION CARRIED. (SENATOR CEGAVSKE WAS ABSENT FOR THE VOTE.)

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SENATE BILL 110 (2nd Reprint): Revises provisions governing the administration of examinations to pupils enrolled in the public schools. (BDR 34-474)

The amendment changes the date from July 1, 2008 to March 1, 2008. It requires all the school districts to comply and report on their testing and the effectiveness of their tests.

SENATOR HECK:

Why do we not want all schools to have to do this?

CHAIR WASHINGTON:

The DCSD testified the way they provide their testing information is quite good, and it tracks the progress of their students effectively. They stated their record of achievement is quite good, and this requirement would be a backward step to what they are already doing.

SENATOR HECK:

It would still be worthwhile to have them report to the LCHC. The DCSD said their system tracks well, so why not make the report and let the Legislative Committee on Education make a decision.

SENATOR WIENER:

In the provision on page 2, lines 6-15 regarding the tests, unless it was adopted by the school district before July 1, 2007, all those tests we were shown on those lists have already been adopted. They ought to be able to give those tests if they so desire, is that not correct?

CHAIR WASHINGTON:

If the Committee does not mind, I would like to confer with the DCSD, and then we can discuss this more in conference committee.

SENATOR HORSFORD MOVED TO NOT CONCUR WITH AMENDMENT NO. 819 TO S.B. 110.

SENATOR CEGAVSKE SECONDED THE MOTION.

THE MOTION CARRIED UNANIMOUSLY.

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<u>SENATE BILL 244 (2nd Reprint)</u>: Revises provisions governing the collection of data relating to the tracking of waiting times for emergency medical services at hospitals. (BDR 40-94)

SENATOR HORSFORD MOVED TO NOT CONCUR WITH AMENDMENT NO. 699 TO S.B. 244.

SENATOR HECK SECONDED THE MOTION.

THE MOTION CARRIED UNANIMOUSLY.

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<u>SENATE BILL 396 (2nd Reprint)</u>: Revises provisions relating to subsurface installations. (BDR 40-1386)

SENATOR WIENER MOVED TO CONCUR WITH AMENDMENT NO. 698 TO S.B. 396.

SENATOR HORSFORD SECONDED THE MOTION.

THE MOTION CARRIED UNANIMOUSLY.

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With no further business to come before the Senate Committee on Human Resources and Education, the meeting is adjourned at 6:41 p.m.

	RESPECTFULLY SUBMITTED:
	Betty Ihfe, Committee Secretary
APPROVED BY:	
Senator Maurice E. Washington, Chair	
DATE:	