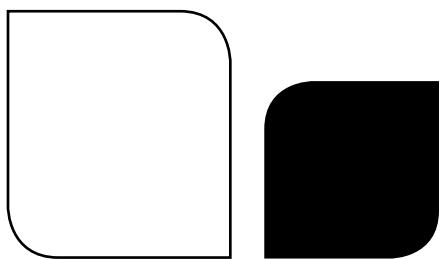




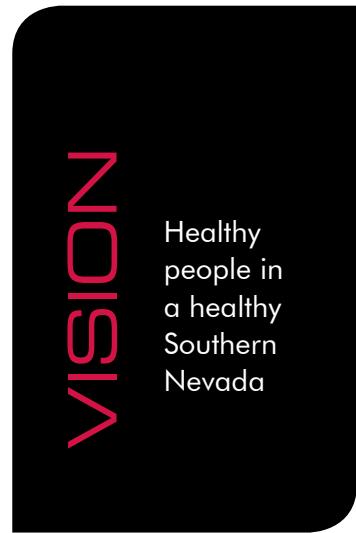
health District

2011

This report covers activities from calendar year 2011 and fiscal year 2011-2012. Current leadership is reflected.



REPORT TO THE
community



MISSION

To protect and promote the health,
the environment and the well-being
of Southern Nevada residents and
visitors

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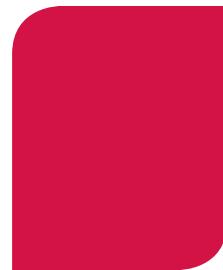
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Southern Nevada DISTRICT BOARD OF HEALTH

The Southern Nevada District Board of Health is the public health policy board representing all entities in Clark County, as well as the medical community, and the environmental and business industries. Board members and alternates serve 2-year terms.



2012 OFFICERS | Chair Tim Jones, Business/Industry Member at Large; Vice Chair, Vacant; Secretary Jimmy Vigilante, Environmental Specialist Member at Large.

2012 BOARD MEMBERS | Sam Bateman, Henderson City Councilman; Bob Beers, City of Las Vegas Councilman; Jim Christensen, MD; Physician Member at Large; Chris Giunchigliani, Clark County Commissioner; Allan Litman, Mesquite City Councilman; Nancy Menzel, Registered Nurse Member at Large; Bill Noonan, Gaming Member at Large; John Onyema, MD, CPE, Physician Member at Large; Mary Beth Scow, Clark County Commissioner; Lois Tarkanian, Las Vegas City Councilwoman; Anita Wood, North Las Vegas City Councilwoman, Rod Woodbury, Boulder City Councilman.

2012 ALTERNATES | Kam Brian, Business/Industry Member at Large; Michael Collins, RN, Registered Nurse Member at Large; Susan Crowley, Environmental Member at Large; Pamela Goyne-Brown, North Las Vegas Councilwoman; Karl Gustaveson, Mesquite City Councilman; Joe Hardy, MD, Physician Member at Large; Peggy Leavitt, Boulder City Councilwoman; John Marz, Henderson City Councilman; Frank Nemec, MD, Physician Member at Large; Steven Ross, Las Vegas City Councilman; Stan Smith; Gaming Member at Large; Lawrence Weekly, Clark County Commissioner.

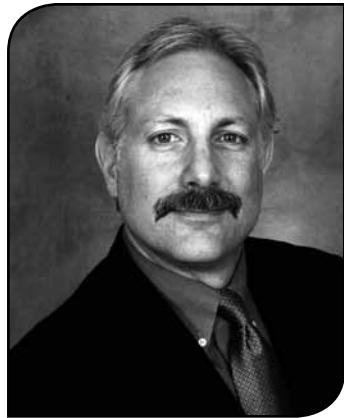
BOARD
MEMBERS



ALTERNATES



Message from the CHIEF HEALTH OFFICER



Lawrence Sands, DO, MPH
Chief Health Officer

2011 PROVED TO BE ANOTHER YEAR OF EXTRAORDINARY ACCOMPLISHMENTS AND INNOVATIONS FOR THE SOUTHERN NEVADA HEALTH DISTRICT AND I ATTRIBUTE THIS TO THE COLLABORATION BETWEEN STAFF AND MANAGEMENT TO WORK TOWARDS THE GREATER GOOD.

Thanks to the federal funding from the Communities Putting Prevention to Work initiative, we continue to work with partners to address obesity and tobacco use issues in the community. By sharing a common vision and partnering with other organizations, the tobacco control program was able

to accomplish much loftier goals. In 2011, staff and partners developed media campaigns; promoted smoking cessation services; created an online database of all trails in Southern Nevada; supported efforts to incorporate, expand and connect bike lanes; worked to integrate fitness and nutrition curriculum into existing child care and afterschool programs; and developed smoke-free policies in public and private multi-housing units, as well as campuses. To support the program's efforts, the health district adopted a smoke-free campus policy that prohibits tobacco use on the grounds and parking lot.

As an agency, we hosted and coordinated events to allow employees the opportunity to contribute to several of our community's worthwhile organizations and causes. In April, employees, family and friends got back to nature at Vegas Roots Community Garden (formerly Tonopah Community Garden) by tending beds, watering rows, digging up weeds and collecting eggs. To benefit local children, staff generously donated school supplies in August and some 272 toys in December. Additionally, staff contributed to the United Way annual campaign, two blood drives, the Box Tops for Education fundraiser, and our pen recycling program, which benefits Three Square. I am inspired by our employees' generosity and genuine desire to help build a better community.

February brought the start of the legislative session which proved to be especially challenging. As with many sessions the results were mixed – some state responsibilities were shifted to the local level (minus the requisite funding), and the Nevada Clean Indoor Air Act was weakened (despite our best efforts). In the "win" column we can point to several initiatives to address wellness, childhood obesity, nutrition and physical activity.

Environmental health staff successfully wrote three sets of regulations to protect the community from lead exposure in paint, food and consumer products, all of which have been approved by the District Board of Health and the Nevada State Board of Health. In addition,

the “Temporary Permit to Operate a Solid Waste Management Facility” regulations were amended and approved. Staff wrote three additional sets of regulations addressing public health in housing, vector control and the sanitation/safety of massage establishments that are pending approval next year.

Last year, we implemented TriSano®, which is an open source disease surveillance and investigation solution. The project, a collaborative effort among Information Technology, Community Health and Nursing staff, has streamlined our reporting and surveillance activities and expanded our capabilities to safely exchange data in real time with community partners. As a result, we have received local, state and national recognition for the system’s underlying architecture, as well as the hard work of staff.

One of the most uplifting events of the year occurred in August, when we recognized the first-ever graduates of the Nurse-Family Partnership program, an initiative that assists women who are pregnant with their first child. The event celebrated the achievements of 31 mothers who worked with specially trained nurses to become self-sufficient, productive and responsible parents and to provide their babies with the best possible start in life.

To address Nevada’s ranking as the state with the second highest teen pregnancy rate, the Teen Pregnancy Prevention Program was created with a \$5 million, 5-year federal grant in 2010. This year, staff hit the ground running by implementing two innovative programs, designed predominantly for inner city African American and Hispanic teen males. Through agreements with Clark County Juvenile Justice Services and Clark County Department of Family Services, staff offered the programs to high-risk youth in foster care or the juvenile detention and probation system.

In October we had a close call when zombies took over our website. Thankfully we were able to use the hacked system to illustrate the importance of flu – and zombie – prevention.

To round out the year, the health district investigated an outbreak associated with the Rock ‘n Roll Las Vegas Marathon. After receiving reports of illness among runners the Office of Epidemiology developed a survey for race participants. The survey was posted to the marathon Facebook page as well as to the health district’s Facebook page and links to the survey were tweeted by race participants. Of the 44,000 runners, 1,146 responded by submitting an online survey. This was the first time the health district used social media to investigate an outbreak and it proved to be a useful and innovative tool.

It has been a year of tremendous accomplishments and the dedicated staff and management of the health district looks forward to another year of protecting and promoting the health of the community we serve as we celebrate our 50th anniversary in 2012.

administration





The operations of the
Health Cards and Vital Records sections fall under the umbrella of the Administration Division. Support services are provided by the Finance, Human Resources, Information Technology and Facilities sections, as well as the Public Information Office, which includes the Community Outreach program.



Community Outreach

The Southern Nevada Health District's commitment to the health of the community is enhanced by the contributions of community partners. Volunteer opportunities at the health district vary for people who wish to contribute their time, talent and skills to promote public health.

In 2011, 380 volunteers provided approximately 15,631 hours of service, which equates to more than \$296,989 in paid labor. As part of their service, volunteers placed 8,509 confirmation calls to family planning clients and provided educational information to 11,297 contacts at the Ravenholt and Henderson Public Health Centers.

Volunteers assist through two key programs:

COMMUNITY VOLUNTEERS

Community volunteers support numerous programs and projects to enhance the health district's public service. The volunteer program consists of individuals from AARP's Senior Community Service Employment Program, Catholic Charities' Senior Community Service Employment Program, University of Nevada Las Vegas and the College of Southern Nevada. Volunteers range in age and status from college students to retirees.

SALUD EN ACCIÓN

Salud en Acción provides Medicare advocacy to the Hispanic community by offering one-on-one counseling, eligibility referrals and assistance with the appeal process. The goal of the program is to provide participants with accurate information they can use to make informed choices about their health care.

In 2011, Salud en Acción staff and volunteers assisted 492 Medicare/Medicaid beneficiaries and attended a variety of outreach events in the community.

STAFF VOLUNTEER CONTRIBUTIONS

Vegas Roots Community Garden (formerly Tonopah Community Garden) | On April 30, more than 40 health district employees participated in supporting our partners at the Tonopah Community Garden. Staff and family members participated in a number of tasks including clearing away rocks, smoothing paths, watering, painting and planting.

Nevada Youth Alliance | In August, staff collected 13 boxes of school supplies for the Nevada Youth Alliance. School supplies were distributed to children at the organization's 13th Annual Community Back to School Health & Educational Fair.

Positively Kids Toy Drive | In December, staff collected more than 272 toys which were donated to Positively Kids. Positively Kids is a non-profit organization that provides skilled in-home nursing services to children with chronic and terminal illnesses.

Additionally, staff contributed to the United Way annual campaign, two blood drives, the Box Tops for Education fundraiser, and a pen recycling program, which benefits Three Square.



@your fingertips

- Order birth and death certificates.**
- Access public notices.**
- Find out how to apply for or renew health cards.**
- Get information about food safety training.**
- Access Board of Health agendas, minutes and audio recordings of meetings.**
- Apply for job opportunities online.**
- View budget reports.**
- Locate available internships and resident rotations.**
- Request public and immunization records, public health data and morbidity reports.**
- Get directions to public health centers.**
- Sign up for "The Perspective" e-newsletter.**
- Become a fan on Facebook.**
- Follow SNHDflu, SNHDinfo and tuSNHD (en español) on Twitter.**
- Watch educational videos.**

Finance

The health district is funded through regulatory revenue and fees, a county property tax allocation set in state statute, federal grants received through the state, and direct federal grants. The health district receives less than 1 percent of its funding from the state general fund. The finance section of the health district is responsible for the financial administration of all health district funds and has received a Certificate of Achievement of Excellence in Financial Reporting for the past 8 years.

According to *Investing in America's Health: A State-by State Look at Public Health Funding and Key Health Facts*, published by Trust for America's Health in March 2012, the FY 2010-2011 national median state investment in public health per capita was \$30.09. The State of Nevada ranked 51st, contributing \$3.45.

Health Cards

A health card is required of anyone working as a food handler, child care employee, adult group care employee, massage therapist, reflexologist, aesthetician, barber, health club attendant, tattoo artist, permanent make-up artist, body piercing technician or in a profession that requires tuberculosis screening prior to employment. Food handlers, massage therapists and health club attendants receive a 3-year health card; all others must be renewed every 2 years.

In 2011, 112,869 health cards were issued. Of those, 43,406 were first-time applicants.

Vital Records

The Vital Records section is the repository for all birth and death records in Clark County. Records are available at the health district for births since 1973 and for deaths since 1988. Nevada records prior to these dates can be obtained from the State Office of Vital Records in Carson City.

In 2011, staff registered 26,847 birth records and 14,386 death certificates.

REVENUE

	Actual FY 2009-2010	Actual FY 2010-2011	Budgeted FY 2012
Federal Grants - Indirect	\$13,947,975	\$9,463,763	\$7,302,623
Federal Grants - Direct	2,351,437	10,105,237	10,694,984
State Funding	987,147	979,488	500,000
Fee for Service	6,558,578	6,128,946	6,812,856
Regulatory Revenue	23,142,972	22,978,296	23,445,397
Program Contract Services	2,835,603	2,308,693	2,883,120
County Tax Revenue	24,942,525	21,406,846	19,870,482
Donations	12,556	13,777	14,050
General Receipts	17,870	21,097	9,823
Interest Income	732,424	683,871	700,000
Total Revenue	\$75,529,087	\$74,090,014	\$72,233,335
Total Capital Improvements	\$47,259	\$70,649	\$60,000

EXPENDITURES

Clinics & Nursing Services	\$20,003,301	\$19,527,890	\$21,920,544
Environmental Health	14,875,882	14,901,773	15,602,594
Community Health	12,339,907	16,786,519	16,407,516
Administration	17,174,676	20,231,785	20,932,852
Total Expenditures	\$64,393,766	\$71,447,967	\$74,863,506
Total Capital Improvements	\$627,100	\$1,363,248	\$2,605,726

ENDING FUND BALANCES

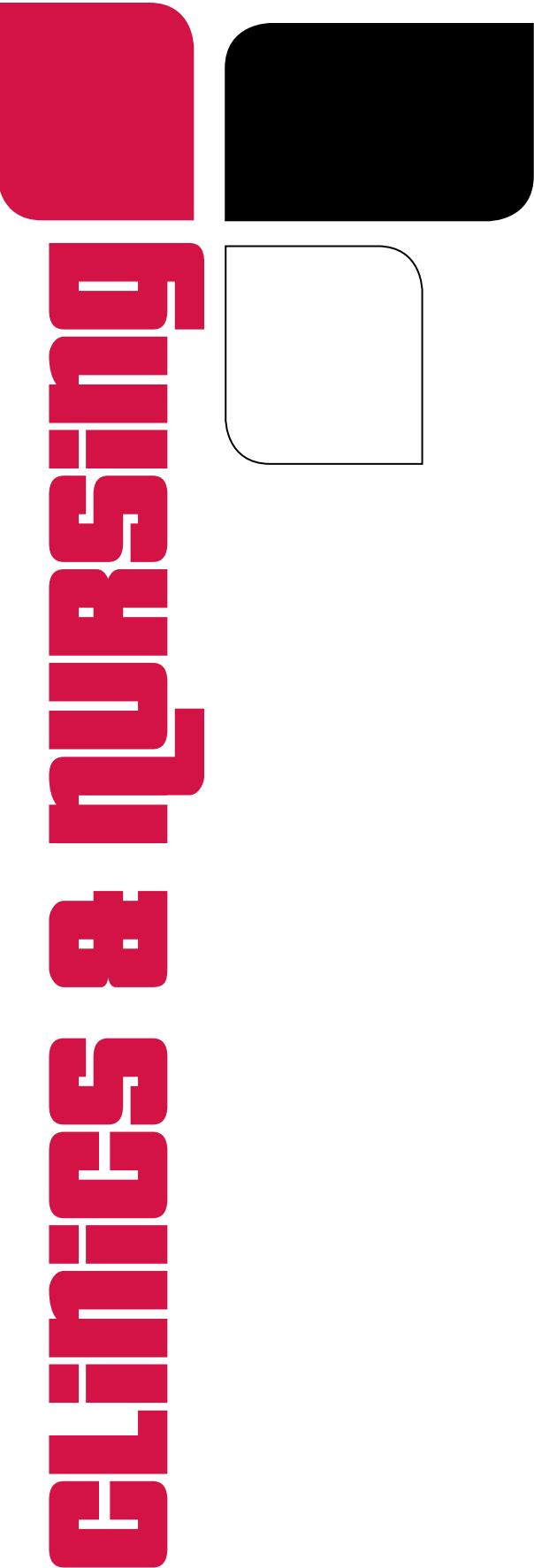
General Fund	\$32,409,640	\$28,332,469	\$2,897,719
Capital Improvements Fund	\$3,689,934	\$4,641,199	\$3,797,934



Finance office staff pose with their reporting awards.

FACT

A Certificate of Achievement for Excellence in Financial Reporting is presented by the Government of Finance Officers Association of the United States and Canada to government units and public employee retirement systems whose comprehensive annual financial systems (CAFRs) achieve the highest standards in government accounting and financial reporting.





The Clinics & Nursing Services Division

provides services to more than 336,500 clients each year. Services are provided regardless of a client's ability to pay. Nursing services and clinics are available at several locations throughout the Valley. The health district also partners with community agencies to provide testing, immunizations and outreach at various locations and special events throughout the year.



Community Health Nursing/ Home Visitation

The Community Health Nursing/Home Visitation Program consists of the Lead Case Management Program, the Maternal Child Health Program, the Nurse Family Partnership Program, and the Refugee Health Program.

LEAD CASE MANAGEMENT

Nursing staff works with the Office of Epidemiology and Environmental Health Division to eliminate childhood lead exposure as a health risk in Clark County. The nurse assigned to this program receives referrals for children with elevated blood lead levels to ensure they receive appropriate medical intervention and their exposure source is eliminated. The program has now been integrated into the Maternal Child Health Program.

In 2011, 11 children were referred for case management.

MATERNAL CHILD HEALTH

The Maternal Child Health Program provides case management services to families upon referrals from neonatal intensive care units and Child Protective Services. The majority of the clients have cognitive and emotional issues or a child who demonstrates delayed growth and development. Nurses provide education, physical assessments and referrals to other services when appropriate, and monitor the child's growth and development. Staff also conducts Healthy Kids exams in congregate settings throughout the community and at public health centers.

During 2011, staff performed 3,277 examinations and 2,219 home visits. Additionally, the Special Projects team performed dental assessments and fluoride varnish application to 1,616 children at various elementary schools.

NURSE-FAMILY PARTNERSHIP

The national initiative Nurse-Family Partnership Program provides education, guidance and life coaching to low-income, high-risk first-time mothers. Women are enrolled within the first 28 weeks of pregnancy and home visitation continues until the child reaches the age of 2. This evidence-based program has documented success in reducing incidences of child abuse, neglect, childhood injuries and hospitalizations. It also has been successful at encouraging young women to return to school to finish their education and to join the work force.

In 2011, the program enrolled 58 new clients and served 152 families. Additionally, 31 first-time mothers graduated from the program last year.





BUILDING BETTER FUTURES

On Aug. 9, the health district recognized 31 first-time mothers as the inaugural graduates of the Nurse-Family Partnership program, an evidence-based community health initiative recognized for its ability to foster long-term success for first-time mothers, their babies and society.

The program pairs first-time expectant mothers with community health nurses as they work together throughout pregnancy until the baby's second birthday.

Clients range in age from 13 to 35 years and typically lack prenatal care and risk giving birth prematurely or delivering lower birth weight babies. Prenatal care is vital to ensure babies are born healthy.

Independent studies found that Nurse-Family Partnership participants are more likely to graduate from high school and less likely to enroll in social assistance programs. The program is an investment in the future and it is estimated that for every dollar spent the program can yield as much as a five dollar return in savings.

Specially trained nurses help vulnerable mothers achieve healthy pregnancies, become knowledgeable and responsible parents, and provide their babies with the best possible start in life. The relationship between mother and nurse provides the foundation for strong families, and lives are forever changed – for the better.

REFUGEE HEALTH

The Refugee Health Program, a joint partnership with Catholic Charities, was developed in response to the growing number of refugees entering the community with numerous unmet health care needs. These clients face language and cultural barriers to accessing the health care system. Without proper case management, this can ultimately have an adverse impact on the health of the whole community.

In 2011, staff screened 492 refugees. A total of 109 clients required follow-up for possible communicable disease: 72 for tuberculosis; 17 for hepatitis B; 10 for ova and parasites; and 14 for sexually transmitted disease. (Note: Some clients may have been referred for more than one disease.)

Family Planning

The Family Planning Program, funded by a federal Title X grant, assures access to family planning services and promotes healthy pregnancies and the prevention of unintended pregnancies. Staff provides education, information, contraception, pregnancy testing and counseling to residents.

In 2011, the clinic and its delegate agencies served 15,185 clients. Of these, 8,685 were served by health district staff and the remaining 6,500 were provided services by Planned Parenthood of Southern Nevada.

Staff recruits agencies and providers to participate in the family planning program to increase client access to services. The health district develops training, guidelines, protocols and procedures for the provision of services provided by staff, partner agencies and providers.

TEENAGE PREGNANCY PREVENTION

The Southern Nevada Health District received funding from the Office of Adolescent Health to address the high rates of teen pregnancy rates in Southern Nevada. Nevada teens have the second highest pregnancy rate in the U.S. at 90 pregnancies per 1,000 females, age 15-19 years. This same group has sexually transmitted infection rates up to five times higher than the adult population, representing over 32 percent of all newly acquired sexually transmitted infections. The need to educate teens about reducing their sexual risk behavior, delaying sexual activity, reducing their number of partners and increasing condom use is critical to their overall sexual health and is a vital component in reducing teen pregnancy and birth rates. The health district educates this at-risk population using two evidence-based programs: "Be Proud, Be Responsible" and "iCuidate!" These programs are currently available to high-risk youth in the Juvenile Justice System and Division of Youth and Family Services.

A total of 253 teens participated in the 2010-2011 pilot phase. The overall program goal is to reduce teen pregnancy and birth rates in Southern Nevada by 10 percent.

HIV/AIDS/STD Surveillance

The Office of HIV/AIDS provides ongoing prevention and awareness programs throughout the community. The health district has provided testing, counseling and case management services for HIV-positive individuals for 29 years. The office distributes educational and prevention materials, makes medical and community service referrals, and partners with other organizations to offer testing and education in non-traditional settings such as prisons, homeless shelters, nightclubs and outreach events.

EARLY INTERVENTION CLINIC

The staff introduces newly diagnosed HIV patients to the medical care system. Clients receive education about their individualized treatment plans and doctor visit schedules. This program is funded by the Ryan White Part A federal grant.

In 2011, 214 unduplicated clients were served.

HIV/AIDS SURVEILLANCE

Over the past 29 years in Clark County, 3,744 people have been diagnosed with HIV and 4,696 people have been diagnosed with AIDS. Of those diagnosed with AIDS, 39 percent have died.

The Office of HIV/AIDS receives more than 1,500 HIV/STD-related leads from laboratories and health care providers each month, which require staff investigation to track the epidemic.

FACT

The Immunizations Program webpages had 127,120 page views in 2011.



@your fingertips

Learn what to expect when visiting the STD, TB and Family Planning clinics.

Download immunization forms and vaccine information sheets.

Get immunization schedules developed by CDC.

Check dates and locations of specialty clinics, such as HIV, immunization and lead screening.

Find local medical service providers for the uninsured and underinsured.

View monthly disease statistics.

Learn more about the vaccines recommended for specific age groups.

Follow ez2stop on Twitter for HIV and STD information.

Watch educational videos.

HIV TESTING AND COUNSELING

In 2011, staff administered 18,445 HIV tests, of which 243 were positive. Of the tests administered, 5,374 were rapid HIV tests, which can produce results in 20 minutes. Rapid tests improve access in both clinical and non-clinical settings, helping to increase the number of people who learn their HIV status.

HIV CASE MANAGEMENT

Nursing case managers receive referrals from medical providers and HIV community-based organizations to facilitate the delivery of coordinated medical care for severely ill clients. This program is funded by the Ryan White Part A federal grant.

In 2011, case management staff made 8,122 client contacts.

SEXUALLY TRANSMITTED DISEASE SURVEILLANCE

Staff conducts interviews and investigative services following the diagnosis of syphilis, gonorrhea and chlamydia. Staff also provides partner notification.

In 2011, 1,847 cases of gonorrhea and 8,817 cases of chlamydia were reported in Clark County.

SUBSTANCE ABUSE PREVENTION AND TREATMENT AGENCY

The health district administers the Substance Abuse Prevention and Treatment Agency (SAPTA) program, which provides essential services to 16 SAPTA-funded substance abuse agencies in Clark County. Through this outreach program, staff regularly provides HIV testing and counseling, tuberculosis (TB) testing and/or chest X-rays, disease and transmission education, and referrals to community agencies.

In 2011, staff administered 1,214 HIV tests, of which one was positive.

SYPHILIS ELIMINATION

This program specifically addresses the current syphilis outbreak in Clark County. The program prioritizes and targets interventions and testing to populations at greatest risk. The Office of HIV/AIDS partners with the Gay & Lesbian Community Center of Southern Nevada to provide an on-site clinic that offers rapid testing for HIV; testing and treatment for syphilis, gonorrhea and chlamydia; and vaccination for hepatitis A and B. Other community partners include Clark County Juvenile Detention Center; Clark County Detention Center; City of Las Vegas Detention Center and Richard Steele Boxing Club & Community Center.

In 2011, 128 primary and secondary syphilis cases, 166 early latent syphilis cases and 3 congenital syphilis cases were reported in Clark County.

Immunizations

The Immunization Program is designed to work with diverse community partners to prevent illness, disability and death from vaccine preventable diseases. All recommended childhood, adolescent and adult immunizations, including influenza vaccine, are available at the district.

In 2011, staff administered a total of 172,773 immunizations to 82,983 clients.

ADOLESCENT IMMUNIZATIONS

The Adolescent Immunization Program was initiated in 2008 in response to the new state mandate requiring students to have a booster of Tdap (tetanus-diphtheria-pertussis) before entering seventh grade. The program partners with all public and private schools in Clark County to provide the vaccinations in the school setting.

In 2011, a 95 percent compliance rate was achieved for the booster dose among students attending Clark County schools.

ADULT/WORKPLACE VACCINATION

The goal of this program is to promote vaccine awareness and prevention of disease through vaccination. Staff members focus their educational outreach efforts on businesses, community organizations, group homes, and acute and long-term care facilities.

In 2011, 1,561 clients were served.

HEALTH CARD CLINIC

The Health Card Clinic provides hepatitis A vaccination and TB screening for clients obtaining a health card. A health card is required of anyone working as a food handler, child care employee, adult group care employee, massage therapist, reflexologist, aesthetician, barber, health club attendant, tattoo artist, permanent make-up artist, body piercing technician or in a profession that requires tuberculosis screening prior to employment. The clinic also offers TB skin testing for the general public.

In 2011, staff administered 54,335 hepatitis A vaccines and 12,427 tuberculosis skin tests.

IMMUNIZATION IN CHILD CARE

The Immunization in Child Care Program was created to support state statute mandating children attending child care be up-to-date on all age-appropriate vaccinations. Staff ensures all children have a record on file and audits the record for completeness. If necessary, staff vaccinates children or refers them to their private provider. The program is then re-audited in 90 days. Staff has more than 170 licensed child care centers on file to be audited. Though significant deficiencies in the immunization rates of children in the child care population have been identified since the program's inception, immunization rates in selected child care centers either had a minimum baseline rate of 90 percent or improved by 10 percent in 2011.

PERINATAL HEPATITIS B

The Perinatal Hepatitis B Prevention Program is a national program that provides services for infants and household contacts of women infected with hepatitis B. Babies born to infected mothers receive hepatitis B immune globulin (HBIG) to prevent transmission of the disease.

In 2011, staff provided case management services to approximately 377 newborns, expectant mothers and household contacts.

SHOTS 4 TOTS

Shots 4 Tots is an immunization initiative within the Immunization Program in partnership with United Way of Southern Nevada, selected Vaccines for Children Program (VFC) providers and child care centers. It is designed to increase immunization rates by 20 percent by improving access to immunizations and educating parents, business leaders, selected child care centers and selected VFC providers about the need for timely immunizations.

In 2011, 31,023 children between the ages of 0-10 were vaccinated through the Shots 4 Tots program and 87,592 vaccines were given.

VACCINES FOR CHILDREN

The Vaccines for Children Program, which began Oct. 1, 1994, represents an unprecedented approach to improving vaccine availability nationwide by providing vaccine at no cost to VFC-eligible children through enrolled public and private health care providers. Staff provides consultation to private providers who enroll in the program. The assessment and feedback of a private provider's practice is required by the CDC to ensure program guidelines are followed, and children are being properly immunized in a timely manner. There are 146 VFC Providers in Southern Nevada.

WHO IS ELIGIBLE FOR VFC VACCINE?

Children through 18 years of age must meet at least one of these criteria:

- **Medicaid eligible** | A child who is eligible for the Medicaid program.
- **Uninsured** | A child who has no health insurance coverage.
- **American Indian or Alaska Native** | As defined by the Indian Health Care Improvement Act (25 U.S.C. 1603).
- **Underinsured** | A child who has private health insurance but the coverage does not include vaccines, covers only selected vaccines.

Nursing Development/ Community Outreach

This program offers nursing staff educational opportunities using various formats, such as satellite broadcasts, speakers and didactic programs. Continuing education units are available for many of these programs. Additionally, staff participates in community outreach to promote health district services.

In 2011, 78 educational opportunities were offered to 303 attendees.

Staff also provides nursing, medical, pediatric and physician assistant students with various experiences to introduce them to the concepts of public health.

In 2011, approximately 227 students rotated through the Clinic & Nursing Services Division.



Staff receives CPR training.

Sexually Transmitted Disease Clinic

The Sexually Transmitted Disease (STD) Clinic provides testing, counseling, treatment, follow-up services and partner notification for clients seeking services for sexually transmitted infections. The program works to reduce the incidence of disease by early intervention in the disease process.

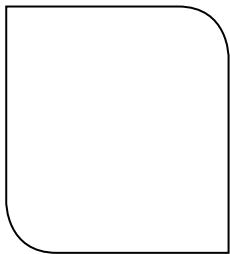
In 2011, clinic staff provided services to more than 19,141 unduplicated clients and laboratory staff processed 6,286 tests in-house and approximately 60,000 tests were accessioned for outsourced reference laboratory testing.

Tuberculosis Surveillance & Clinical Services

The Tuberculosis Treatment & Control Clinic integrates clinic services, field services, case management, directly observed therapy, surveillance and educational outreach activities to rapidly identify and diagnose TB disease, treat active cases and conduct contact investigations.

In 2011, there were 85 cases of active TB reported in Clark County. Of these cases, no new clients are being treated for multi-drug resistant TB. A total of 63 contact investigations were conducted. It was noteworthy that there were genotype linkages of three cases to a previous outbreak in 2009. The program held four cohort reviews. The successful identification of disease, along with completion of therapy, is necessary to prevent further spread of TB and to curb drug-resistant strains.

Additionally, staff presented 19 educational outreach programs to various agencies in 2011.



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The Community Health

Division encompasses programs that monitor and improve community health status, assure readiness and response to public health emergencies and promote healthy behaviors.



Chronic Disease Prevention and Health Promotion

The Office of Chronic Disease Prevention and Health Promotion works in partnership with multidisciplinary agencies and organizations and members of the community to foster and provide creative, culturally appropriate, population and evidence-based health promotion programming within the community to promote healthy behaviors. The programs, administered by professionally trained health educators, encourage people to get moving, be safe, eat better, and live smoke-free.

CHRONIC DISEASE PREVENTION

Chronic disease prevention, which include cardiovascular disease, cancer and diabetes are now among them most prevalent and costly of health problems. Most are preventable by changing risk behaviors, such as tobacco use, physical inactivity and poor dietary choices. Since 2010 many program activities have been funded through the Communities Putting Prevention to Work Initiative (CPPW) from the Centers for Disease Control and Prevention and are designed to affect successful policy, systems or environmental changes.

Activities in 2011 include:

- Working with a local Farmer's Market to integrate Electronic Benefit Transfer (EBT) machines in three local markets. EBT machines accept credit and debit cards as well as Supplemental Nutrition Assistance Program (SNAP) benefits increasing access to fresh produce for SNAP recipients.
- Working with local jurisdictions to integrate evidence-based physical activity and nutrition curriculum into after-school programs and developing policies to increase physical activity and access to healthy foods.



TREKKING FROM "NEON TO NATURE"

The health district, with the assistance of its partners and local jurisdictions, launched the Neon to Nature online tool to help residents and visitors locate walking and hiking trails throughout the area. The interactive site is available at www.GetHealthyClarkCounty.org.

Neon to Nature highlights Southern Nevada's more than 600 miles of rural and urban, off-street trails. Visitors to the site can search for trails based on difficulty, terrain or location. Detailed information about each trail is provided, such as location and length, the surface type, its level of difficulty, photos and any of the trails' associated amenities.

There are many miles of trails in Southern Nevada but knowing exactly where to go and what to expect will help you to enjoy one of the best reasons to live in the Las Vegas Valley.

FACT

The Walk Around Nevada program had approximately 44,319 logins in 2011.

- Working with local child care centers and directors to integrate evidence-based physical activity and nutrition curriculum into programs and develop and adopt policies for child care centers that increase access to physical activity and healthy foods. To date, over 92 centers are implementing the program and 59 have adopted policies.
- Working with the Clark County School District to make school meals healthier for students through the establishment of a menu policy that eliminates trans-fats from district prepared meals.
- Implementing a healthy vending policy at the health district which increased access to healthy foods for clients and employees.
- Implementing an evidence-based program at nine local churches that serve African Americans to provide education, programming and social support for healthy living.

INJURY PREVENTION

The Injury Prevention Program focuses on three areas of prevention: drowning, falls among seniors, and suicide.

DROWNING PREVENTION

Health promotion and emergency medical services staff work with community partners to conduct an annual drowning prevention awareness and education campaign. The campaign emphasizes constant adult supervision; the use of barriers such as isolation fencing, door alarms, and electrically operated pool covers; CPR training and proper rescue equipment that is easily accessible. The A B C & D's of Drowning Prevention campaign has been conducted for the past 12 years and has been supported by a combination of funding from the health district, Clark County Safe Kids, and other community partners and local businesses.

Provisional data at the close of 2011 reflected 35 submersion incidents and 4 drowning deaths. Three of the drowning deaths were among children under 4 years of age. The total of 35 submersion incidents is the lowest recorded since data collection began in 1994. The previous low was 39 submersion incidents in 2004. The number of both drowning deaths (4) and drowning deaths among children less than 4 years of age (3) are the same as 2004 which are the lowest recorded since 1994. There are two more possible submersion incidents and 1 possible drowning death still under investigation at the time of this report.

FALL PREVENTION

Falls and fall-related injuries impose an enormous burden on individuals, society and the nation's health care systems. One-third of adults over the age of 65 fall each year. In response, the health district is working with community partners to replicate an evidence-based senior fall prevention education program in Clark County.

SUICIDE PREVENTION

By collaborating with community partners, staff strives to reduce the suicide rate in Clark County. In addition to supporting the creation of a statewide suicide prevention program, staff coordinated a public information campaign to increase awareness and reduce the stigma associated with suicide.

TOBACCO CONTROL

The Tobacco Control Program has four major goals: prevent youth initiation of smoking; promote smoking cessation among youth and adults; eliminate secondhand smoke exposure; and eliminate health disparities among diverse populations.

The tobacco control program was also the recipient of CPPW funding and activities include:

- Supporting the expansion of tobacco-free campus policies at the health district and many community organizations, and protecting approximately 600,000 employees and clients from the dangers of secondhand smoke.
- Working with public and private multi-unit housing to develop smoke-free policies. A total of 3,021 smoke-free units are available in Clark County.
- Increasing participation in smoking cessation programs and developing a cessation referral network. To date over 21,000 Clark County residents have attempted to quit smoking.
- Developing and implementing a social venue-based counter marketing (SVCM) initiative targeting hard to reach segments of the population. To date, the Tobacco Control Program has worked with partners to produce 216 SVCM events, reaching a total of almost 170,000 people.
- Working with partners to remove smoking from multiple high profile community events including Bite of Las Vegas, Telemundo Fair, Las Vegas Gay and Lesbian Pride Festival, the Clark County Fair and Rodeo, and Pet-a-Palooza.



@your fingertips

Sign up for the Get Healthy Meal Planner.

Join the Nutrition Challenge.

Get information about smoking cessation.

Find local trail information on the online Neon to Nature program.

Access the community calendar of healthy events for adults and children.

Follow Get Healthy on Facebook, Twitter and YouTube.

Check out the blog and send in your questions. (Now available in Spanish, too.)

Watch videos on healthy weight, diabetes, tobacco prevention and drowning prevention.

Visit the Spanish version of the "Get Healthy" website at www.vivasaludable.org.

www.GetHealthyClarkCounty.org

Emergency Medical Services & Trauma System

The Office of Emergency Medical Services & Trauma System (EMSTS) provides regulatory oversight, medical direction and protocols for the county's emergency medical response system. The EMS component of the EMSTS is designed to provide initial assessment and management of ill and injured patients and safe transport to the most appropriate health care facility.

CERTIFICATION, LICENSING AND PERMITTING

The office, in compliance with applicable regulations, determines an individual's qualifications to be certified as an emergency medical technician (EMT). All ambulance services, air ambulance services and firefighting agencies that provide emergency medical care must be permitted by the health district. All EMTs who are employed by these agencies must be licensed. Licenses are issued by the EMSTS to EMTs who complete the necessary requirements and pass the protocol exam appropriate to their level of certification.

INITIAL TRAINING AND CONTINUING MEDICAL EDUCATION

Initial training and continuing medical education classes conducted by a public or private agency must be approved by the district. All certified EMTs must submit documentation of completion of continuing medical education biennially.

QUALITY IMPROVEMENT

The office provides continuous quality improvement oversight of the EMSTS system, including response to complaints. Each permitted ambulance service must have a quality improvement director to ensure compliance with EMS regulations and protocols regarding patient care.

The cornerstone of the trauma system performance improvement process is the Trauma Medical Audit Committee (TMAC). The TMAC is a multidisciplinary medical review committee that meets regularly to review, monitor and evaluate trauma system performance and make recommendations for system improvements.

MEDICAL ADVISORY BOARD

The Southern Nevada Health District Medical Advisory Board (MAB) provides recommendations to the Chief Health Officer and assists in the ongoing design, operation, evaluation and revision of the EMS system. Membership consists of a medical director and an operations director from each permitted agency.

REGIONAL TRAUMA ADVISORY BOARD

The Clark County Regional Trauma Advisory Board (RTAB) supports the Chief Health Officer's role to ensure a quality system of patient care for the victims of trauma within Clark County and surrounding areas by making recommendations and assisting in the ongoing design, operation, evaluation and revision of the system from initial patient access to definitive patient care.



RTAB MEMBERSHIP

- A trauma medical director from each designated trauma center
- A trauma program manager from each designated trauma center
- Chairman of the Medical Advisory Board
- One administrator from a non-trauma center hospital
- One person representing the public providers of advanced emergency care
- One person representing the private franchised providers of advanced emergency care
- One person representing health education and prevention services
- One person representing the payors of medical benefits for the victims of trauma
- One person representing rehabilitation services
- One person representing the general public
- An ex officio member from the Southern Nevada Health District

As of July 1, 2011, RTAB members include: John Fildes, MD, University Medical Center; Gregg Fusto, RN, University Medical Center; Michael Metzler, MD, Sunrise Hospital & Medical Center; Melinda Case, RN, Sunrise Hospital & Medical Center; Sean Dort, MD, St. Rose Dominican Hospitals-Siena Campus; Kim Dokken, RN, St. Rose Dominican Hospitals-Siena Campus; David Slattery, MD, MAB Chairman; Kimball Anderson, Southern Hills Hospital; Scott Vivier, Henderson Fire Department; Eric Dievendorf, American Medical Response-Las Vegas; Wilbert Townsend, SNIPP; Leslie Johnstone, Health Services Coalition; Linn Billingsley, Melissa Vaher; and Mary Ellen Britt, Regional Trauma Coordinator, Southern Nevada Health District.



2011 EMS CERTIFICATIONS

CERTIFICATION STATUS

Applications received for certification via reciprocity	272
EMS training courses completed	63
New certifications issued	191
Renewal certifications issued	1,573
Total certifications issued	1,764

ACTIVE CERTIFICATIONS

EMT-Basic	566
EMT-Intermediate	1,347
EMT-Paramedic	1,106

LICENSURE STATUS

New licenses issued	171
Renewal licenses issued	1,389
Paid full-time fire departments	6
Volunteer fire departments	11
Private ambulance services	3
Special purpose stand-by ambulance services	3
Helicopter ambulance services	2
Fixed-wing air ambulance services	2

Epidemiology

Epidemiology is the core science of public health, studying and describing the patterns of disease in the community and discovering the reason for those patterns. The Office of Epidemiology works with a broad range of diseases from anthrax to herpes zoster, infectious to non-infectious and acute to chronic. Staff conducts disease surveillance, investigates individual cases and disease outbreaks, and analyzes disease data in order to better understand and control the diseases and conditions that are most important to the health and well-being of Southern Nevada residents and visitors. The staff also informs health care providers, agency partners and the general public about diseases of public health concern.

DISEASE SURVEILLANCE AND DATA INTERCHANGE

Over the past 2 years, the Southern Nevada Health District has undertaken the modernization of its disease surveillance systems. This project is based upon requirements identified by the Office of Epidemiology (working with statewide partners) for implementation of a disease surveillance system with the capacity to accurately facilitate rapid disease reporting, the administration of counter measures, and the ability to track health outcomes related to biological, chemical, or other environmental exposures.

A key piece of this system is TriSano®, an open source disease investigation and surveillance application, which allows for the collection and analysis of standardized data on reportable diseases. TriSano® went live in the fall of 2010 in the Office of Epidemiology and is being evaluated and modified for use in other health district offices. As an open source tool, one of the strengths of the system is the ability to extend and enhance the system through collaboration with other health departments.

As developed by the health district, this system allows multiple types of electronic reports, including electronic laboratory reports, to be submitted in an automated fashion, saving time and effort on the part of hospitals throughout the valley. Hospitals are currently in different stages of development, with some facilities already providing test data to the health district on a regular basis, with the goal of having all hospitals in the valley electronically submitting laboratory reports in the near future.

The complete implementation of this system in Southern Nevada will not only allow hospitals to meet meaningful use target goals set by the Health Information Technology for Economic and Clinical Health (HITECH) Act, but will provide the framework to better protect the health of Southern Nevada residents and visitors for years to come.

SURVEILLANCE PROGRAMS

REPORTABLE DISEASE INVESTIGATION AND SURVEILLANCE

State and local laws require Clark County health care providers, hospitals, medical laboratories, blood banks, schools, child care centers, nursing homes and correctional facilities to report all cases of more than 60 different diseases and conditions to the health district when they occur. The Office of Epidemiology is responsible for compiling, analyzing data, and reporting findings for reportable diseases. Disease reports are investigated to

CLARK COUNTY REPORTABLE DISEASE STATISTICS*

Disease	Annual Average Rate (2007-2011)	Annual Average Total (2007-2011)	Annual Rate (2011)	Annual Total (2011)
AIDS	11.64	227.6	10.49	203
Amebiasis	0.47	9.2	0.47	9
Botulism-Intestinal (Infant)	0	0	0	0
Brucellosis	0.2	0.4	0	0
Campylobacteriosis	5.73	112	5.12	99
Chlamydia	412.44	8,063.4	455.69	8,817
Coccidioidomycosis	3.42	66.8	4.96	96
Cryptosporidiosis	0.36	7	0	0
Dengue Fever	0.11	2.2	0.05	1
Encephalitis	0.09	1.8	0	0
Giardia	3.72	72.8	2.48	48
Gonorrhea	94.11	1,840.4	95.46	1,847
Haemophilus Influenza (Invasive)	0.62	12.2	0.78	15
Hemolytic Uremic Syndrome (HUS)	0.04	0.8	0.05	1
Hepatitis A	0.39	7.6	0.26	5
Hepatitis B (Acute)	1.54	30.2	1.03	20
Hepatitis C (Acute)	0.31	6	0.21	4
Hepatitis D	0	0	0	0
HIV	14.22	278.2	12.20	236
Influenza**	67.41	1,315.8	23.72	459
Invasive Group A Strep.##	0.65	12.8	0	0
Legionellosis	0.61	12	0.57	11
Leprosy (Hansen's Disease)	0.03	0.6	0.05	1
Leptospirosis	0	0	0	0
Listeriosis	0.13	2.6	0.10	2
Lyme Disease	0.21	4.2	0.16	3
Malaria	0.14	2.8	0.31	6
Measles	0.08	1.6	0.05	1
Meningitis, Aseptic/Viral	2.26	44.2	1.34	26
Meningitis, Bacterial	0.61	12	0.16	3
Meningococcal Disease	0.14	2.8	0.05	1
Mumps	0.46	9	0	0
Pertussis	0.82	16	1.03	20
Q Fever	0.05	1	0	0
Relapsing Fever	0	0	0	0
Rocky Mountain Spotted Fever	0.01	0.2	0	0
Rotavirus	8.16	159.8	2.27	44
RSV (Respiratory Syncytial Virus)	61.11	1,194.4	65.59	1,269
Rubella	0.01	0.2	0	0
Salmonellosis	8.81	172.4	6.98	135
Shiga-Toxin Producing E. coli#	1.24	24.2	2.69	52
Shigellosis	4.48	87.8	1.18	35
Streptococcus Pneumoniae (IPD)###	1.93	37.6	3.10	60
Syphilis (Early Latent)	8.34	163.2	8.53	165
Syphilis (Primary and Secondary)	5.27	103	6.62	128
Toxic Shock Syndrome	0.04	0.8	0.05	1
Toxic Shock Syndrome (Streptococcal)	0.09	1.8	0.05	1
Tuberculosis	4.63	90.6	4.39	85
Typhoid Fever	0.08	1.6	0.16	3
Unusual Illness	0.10	2	0.10	2
Vibrio (Non-Cholera)	0.13	2.6	0.16	3
West Nile Virus (Encephalitis)	0.28	5.4	0.52	10
West Nile Virus (Fever)	0.08	1.6	0.05	1
Yersiniosis	0.11	2.2	0	0

Rates are cases per 100,000 population per month or per year. County population monthly estimates were obtained via linear spline estimation with the computed time series aligned at the middle of each month. The July 1st population estimates/projections were adopted as denominators in annual rates calculations. Demographic estimates for 2000 going forward were provided by the state demographer as of Apr-2011 (governor-certified population estimates for July 1st of 2000 was revised to 1,425,723 compared to previously released 1,394,440). At the compilation of this report population estimates were available up to year 2010 (only projections were available for 2011 and beyond).

*OOE reported cases include confirmed, probable and suspect (since Feb-08) status. HIV/AIDS case counts provided by Office of HIV/AIDS/STD; TB case counts provided by TB clinic. STD data (excluding HIV/AIDS) extracted from STD-MIS as of 06FEB2012.

**Reporting of novel type A influenza (reclassified as INFLU OUTBRK per CDC recommendations as of Jan-11) started in May-09.

#E. COLI 015:H7 instead of STEC was reported prior to 2006.

##Reported since Mar-07.

###S. pneumo invasive diseases (reported since Sep-05) previously reported under separate categories grouped together as of Jan-11 per CDC recommendations.



ROCK, ROLL AND TWEET

In December, the health district investigated an outbreak associated with the Rock 'n Roll Las Vegas Marathon. After receiving reports of illness among runners the Office Epidemiology developed a survey for race participants. The survey was posted to the marathon's Facebook page as well as to the health district's Facebook page and links to the survey were tweeted by race participants. Of the 44,000 runners, 1,146 responded by submitting an online survey. This was the first time the health district used social media to investigate an outbreak and it proved to be a useful and innovative tool.

Specimens provided by marathon participants were positive for sapovirus and negative for all other pathogens. The findings of the investigation point to the source of the sapovirus outbreak among marathon runners as a common exposure on the morning before the race, most likely at the health and fitness expo; however, it was not possible to determine which common exposure was responsible for the outbreak.

determine the sources of the infection, identify outbreaks and to implement control measures to prevent and stop the spread of disease. Statistics on reportable diseases and conditions are compiled and distributed monthly and annually to agency partners and the public.

In 2011, the Office of Epidemiology received 92,471 disease reports, of which 2,443 were determined to meet disease case definitions. Of those, 1,454 required additional investigation by staff prior to being reported to the Nevada State Health Division.

CHRONIC DISEASE SURVEILLANCE

This program tracks various chronic disease indicators at the county level, including physical activity, fruit and vegetable consumption, asthma, diabetes, obesity/overweight, cancer and tobacco use. Survey data is assessed to determine health disparities by sex and race-ethnic groups and to determine preventable risk behaviors that can lead to chronic disease. Program capacity is also being expanded through analysis of death certificate and hospital discharge data in order to assess the overall health of the community. Summary reports regarding chronic disease conditions and related behaviors are currently being developed for publication.

Program staff evaluates the Communities Putting Prevention to Work grant by assisting the Office of Chronic Disease Prevention and Health Promotion in examining process and outcome components related to tobacco prevention and obesity/physical activity initiatives. Through this endeavor, the program is partnering with the Clark County School District to collect height, weight and body mass index data of schoolchildren on an ongoing basis.

FOODBORNE ILLNESS SURVEILLANCE

An important function of the Office of Epidemiology is to receive and investigate complaints from the public regarding possible foodborne illness. Staff monitors the complaints to detect foodborne

outbreaks and works with Environmental Health and Southern Nevada Public Health Laboratory staff to conduct investigations.

In 2011, epidemiology staff documented 721 complaints and identified 43 incidents through the foodborne illness notification system.

INJURY SURVEILLANCE

Data collected by the Injury Surveillance Program is analyzed to enhance the understanding of the risk factors and causes of injury-related deaths and injuries experienced in Clark County. The overarching goal of the program is to collect and analyze local data, and report on the findings in order to support strategic planning for the reduction in the mortality and injury rates.

RESPIRATORY ILLNESS SURVEILLANCE

This program tracks rates of respiratory illnesses, including influenza, in the community throughout the year, providing insight into diseases that significantly impact individual health and the medical system throughout the year. In 2010, the Pediatric Early Warning Sentinel Surveillance (PEWSS) system was established with four local outpatient pediatric practices. PEWSS is an expansion of a health care provider-based surveillance system initiated in 2009 to track only influenza in children. It now tracks 10 different viral respiratory pathogens. In 2011, respiratory illness surveillance was further enhanced by additionally tracking viral respiratory illness in pediatric and adult ICU patients at two local hospitals. This new surveillance program is called the Hospital Early Warning Surveillance System.

OUTBREAK INVESTIGATION AND PUBLIC HEALTH EVENT RESPONSE

The Office of Epidemiology investigates and implements interventions to control outbreaks and unusual occurrences of disease, including foodborne illness, vaccine-preventable diseases, and health care-acquired infections.

In 2011, staff responded to more than 27 public health events and outbreaks, working with other health district programs and partner agencies to prevent and control the transmission of disease in the community.

HEALTH ALERT NETWORK

The Office of Epidemiology distributes timely health-related information to the medical community through its Health Alert Network using broadcast fax, e-mail and a web-based system. The office also provides information to the public and health care providers through newsletters, notices and alerts. In 2011, 66 alerts, technical bulletins and newsletters were distributed, reaching 64,799 health care providers and public health partners.

Public Health Preparedness

The Office of Public Health Preparedness (OPHP) works with other health district programs and community partners to prepare for and respond to the consequences of man-made and naturally occurring emergencies including infectious disease outbreaks, bioterrorism events and other public health threats.

The office is funded from several federal grant sources from the Department of Health & Human Services (HHS), which includes the Centers for Disease Control and Prevention (CDC). Funds are intended to build community resilience, strengthen the core capabilities necessary for preparedness according to Presidential Policy Directive/PPD 8 and upgrade local public health jurisdictions' preparedness and response to public health threats. The grants include:

- **Public Health Emergency Preparedness (PHEP)** | PHEP funding is now aligned with the national response framework target capabilities. The grant provides for the planning and training of health district personnel to increase response capability to real events. The grant also provides for the development of incident management, internal communication, crisis and emergency risk communication, exercise design, performance and improvement of health district plans, epidemiology surveillance and laboratory capabilities.
- **Cities Readiness Initiative (CRI)** | A CDC-sponsored program that enables cities to provide preventive medications to their populations within 48 hours of a public health emergency. The health district continues to work with local and federal law enforcement, the Clark County Office of Emergency Management, the Clark County School District, and other community partners to enhance CRI planning activities. The health district has initiated partnerships with the resort properties, health care systems and other local businesses to continue development of the business/resort partner dispensing site project to provide medications to their staff, families and visitors during an emergency. A few of these partnerships were tested in a full-scale exercise on May 9-11, 2011. The health district earned a score of 96 out of 100 possible points during the annual CDC Technical Assistance Review conducted in June 2011.
- **Assistant Secretary for Preparedness and Response (ASPR)** | Assists health care system, e.g. hospitals, ambulatory surgery centers, long-term care, etc., to develop and exercise plans and respond to public health emergencies. Program priorities include interoperable communication systems, hospital bed availability/tracking, personnel/volunteer management, fatality management planning in conjunction with the Clark County Office of the Coroner and Medical Examiner. In the past year, the health district participated in the development of the Medical Surge Area Command, a component of the Clark County Emergency Operations Plan.

FACT

Public health deals with the health and well being of the population as a whole. It is best distinguished from clinical medicine by its emphasis on preventing disease rather than curing it and its focus on populations and communities, rather than the individual patient.

—Harvard Public Health Review, 2000, "Future of Public Health"

PLANNING

Planning staff worked with local, state and federal emergency agencies to plan, evaluate and participate in numerous full scale and table top exercises including the 2011 Nevada Statewide and County Exercise Series. Exercise scenarios with community partners included medical surge capability (a hospital's ability to receive a large influx of patients), biological agent release (included transport of a portion of medical supplies from the CDC Strategic National Stockpile), statewide cyber-terrorism, Improvised Nuclear Device, and radiological release exercises.

Additionally, staff collaborated with multiple agencies to provide input in the Statewide Medical Surge Plan, an annex to the State Comprehensive Emergency Management Plan.

HEALTH CARE FACILITIES

Staff continued to support local health care facilities by assisting in the development of emergency operations plans and exercises to test their response to natural and man-made disasters. Staff also participates in the facilities' emergency management committee meetings and serves as a resource to hospital emergency planners through the Southern Nevada Healthcare Preparedness Association.

In 2011, staff served as guest speakers to medical professionals on hospital preparedness topics. Staff partnered with the Nevada State Health Division to train acute care hospital emergency personnel on the HAvBED-bed availability tracking system, a tool to provide and share medical information during a large scale disaster. Staff began working with the State of Nevada Bureau of Healthcare Quality and Compliance to develop tools to assist long-term care facilities in Nevada to strengthen their emergency operations plans and supporting annexes. These tools will help facilities integrate their plans with local and community preparedness plans for identified hazards.



WEBSITE Z

As people celebrated Halloween and prepared for the holiday season, the health district offered a new twist to the same old preparedness message by offering tips for fending off zombies, and more importantly, the flu, on an undead section of its website.

The special section offered tips about preventing the flu and avoiding zombie viruses, along with flesh-eating facts and a survival guide. It was noted the health district could not inoculate people from a zombie attack but it could offer a tried and true method to fight the flu! It was further stressed that being fit and healthy certainly won't hurt your chances should you find yourself in a faceoff (possibly in the literal sense) with a zombie.

Getting vaccinated is your best shot at beating the flu. Less flu means less fatigue (more energy for fighting off the undead), less coughing and congestion (more speed and focus when running for your life), and less fever and muscle aches (making it more likely you will not suffer from the fever and muscle aches associated with a zombie attack).

Flu is serious and every year thousands of people become severely ill from it. A sense of complacency can set in when there are no vaccine shortages or new strains of flu that serve to draw more attention to the issue. The website was designed to spark a renewed interest in flu prevention and appeal to a younger crowd that may not be as motivated to get vaccinated.



@your fingertips

Download EMS regulations, manuals and forms.

Get emergency preparedness planning and kit information.

View monthly disease statistics.

Join the Health Alert Network.

Watch videos on how to create a disaster supply kit and foodborne illness myths.

TRAINING

The Office of Public Health Preparedness has ensured 99 percent of health district staff is trained in the Incident Command System in accordance with the National Incident Management System, the nationally recognized system of disaster management. Training staff offers preparedness educational opportunities for district employees on a monthly basis.

The ReadyRN program, an emergency and disaster preparedness online course for nurses, was purchased with grant funds and completed during 2011. The program covered topics from basic emergency management principles to the complex care of patients exposed to radiation. The health district provided this educational opportunity to 360 health care professionals at acute-care hospitals, sub-acute care facilities, rehabilitation hospitals, skilled and long-term nursing care facilities, the Clark County School District, Veteran's Administration medical facilities, as well as health district nursing staff and Medical Reserve Corps volunteers.

Staff participates in health and wellness fairs throughout Clark County and distributes bilingual educational materials about citizen and pet emergency preparedness, hand washing and flu prevention. Upon request, materials are also available in closed captioned DVDs for the hearing impaired as well as in Braille and audio tapes for the blind.

Staff presents a four-hour course on the NRS 632.343 Medical Consequences of an Act of Terrorism, which is required by the State of Nevada for initial nursing licensure. Since 2003, more than 2,000 health care professionals have received this training.

Training staff regularly meets with service organizations as well as individuals with functional and/or access needs through the Functional Needs Advisory Group. This group reviews health district preparedness plans and ensures they are inclusive and appropriate for people with functional and access needs.



PUBLIC HEALTH PREPAREDNESS NURSE

The Public Health Preparedness Nurse administers programs designed to protect the health of staff in support of routine and emergency operations. Activities include providing immunizations, annual respirator fit-testing through a respiratory protection program to employees and Medical Reserve Corps volunteers, and providing bloodborne pathogen training to health district staff. The Public Health Preparedness Nurse consults with the district's respiratory program medical director and collaborates with health district programs to provide appropriate respiratory protection for employees responding to outbreaks in the community.

To date, 511 of 515 employees have been screened through the respiratory protection program.

MEDICAL RESERVE CORPS OF SOUTHERN NEVADA

The Medical Reserve Corps (MRC) of Southern Nevada is a community-based civilian volunteer program that utilizes local health care professionals and others to build and support the community's public health infrastructure and address a wide range of challenges from public health education to disaster response.

The MRC supports the U.S. Surgeon General's mission of engaging health care and other volunteers to strengthen public health, emergency response and community resiliency. The MRC has 215 medical, non-medical, veterinary, mental health, and other volunteers.

During 2011, MRC volunteers supported 37 events, logging a total of 1,182 hours. Volunteers provided blood pressure screenings and first aid support, and distributed citizen and pet emergency preparedness information. Nurse volunteers assisted health district nurses by providing vaccinations at local flu clinics, and assisted other local volunteer groups by administering flu vaccine at community events. MRC volunteers staffed a preparedness exhibit at the 2011 Western Veterinary Conference. In addition, volunteers attended FEMA Incident Command System training and participated in staging exercises.

Southern Nevada Public Health Laboratory

The Southern Nevada Public Health Laboratory (SNPHL) is operated by the Southern Nevada Health District in partnership with the University of Nevada School of Medicine. SNPHL is a designated branch of the Nevada State Public Health Laboratory (NSPHL). The laboratory enhances the public health surveillance capabilities of the district and its ability to identify potential public health hazards.

The laboratory is licensed by the State of Nevada to perform moderate and high complexity clinical testing and is registered with the Centers for Disease Control and Prevention (CDC) Laboratory Response Network (LRN) for bioterrorism testing. The LRN provides assistance, training and testing methods for member laboratories to prepare and respond to acts of bioterrorism and emerging diseases. In addition to performing LRN analyses, SNPHL staff coordinates with local first responders to standardize the collection of environmental samples for bioterrorism testing. In 2011, SNPHL coordinated and provided testing materials for a county-wide proficiency testing system for first responder agencies. SNPHL staff also trains local laboratorians on transportation of pathogenic biological agents.

TESTING AND EVALUATION PROJECT

In 2011, SNPHL staff participated in the federal Bio-operational Testing and Evaluation project. This joint federal exercise included participants from the Federal Bureau of Investigation, CDC and Environmental Protection Agency (EPA). Staff successfully processed and cultured 10 environmental swabs and submitted the results back to the LRN within the expected 24 hour turnaround time.

OUTBREAK INVESTIGATION

As a participant in the health district's outbreak investigation team, the laboratory provides molecular and microbiological testing capabilities for investigation of foodborne illness outbreaks and emerging infectious diseases. During 2011, laboratory staff participated in 151 epidemiological investigations/consultations, including multiple norovirus outbreaks. In partnership with the Office Epidemiology, SNPHL provided laboratory support for these outbreaks which included provision of sample collection kits and instructions, loaner refrigerators for sample storage, sample pickup and test analysis. In 100 percent of the outbreak investigations, SNPHL met the expected turnaround time of 48 hours for completion of norovirus testing.

SURVEILLANCE

In 2011, SNPHL and Office of Epidemiology expanded the year round pediatric respiratory surveillance program from four to five sentinel pediatric practices. The Pediatric Early Warning Sentinel Surveillance (PEWSS) system sites provided over 900 samples in 2011 and SNPHL staff performed more than 11,000 individual respiratory virus molecular analyses. The SNPHL and Office of Epidemiology also established the Hospital Early Warning Sentinel Surveillance program for the 2011-12 influenza season. Two local hospitals began collecting samples from Intensive Care Unit patients who meet specific criteria established by the Office of

Epidemiology. The results of surveillance of laboratory-confirmed hospitalized patients with respiratory virus infections will allow for characterization of patients at higher risk for severe morbidity and mortality.

CDC PULSENET PROGRAM

As a participant in the CDC PulseNet program, SNPHL performs serotyping and molecular subtyping by Pulsed Field Gel Electrophoresis (PFGE) for *Salmonella*, *Shigella* and *E. coli* O157. The PFGE data is submitted to the CDC and utilized for national foodborne outbreak disease surveillance. In 2011, staff performed advanced testing on over 350 reportable disease isolates and performed PFGE analysis on 183 isolates. In 2011, SNPHL staff successfully provided molecular subtyping test results related to a number of national foodborne illness outbreaks including *Salmonella* in alfalfa sprouts, cantaloupe and ground turkey.

HIV AND SYPHILIS TESTING

In 2011, as a component of the clinical testing provided to the health district, staff performed more than 40,000 HIV and syphilis tests, which is an increase of 18 percent over 2010.

IN-HOUSE COURIER

SNPHL maintains an in-house courier system to ensure that samples are delivered promptly to the laboratory for testing. The courier system provides transport of samples from health district clinics, respiratory surveillance sites and local laboratories. In 2011, SNPHL staff provided over 6,000 courier services.

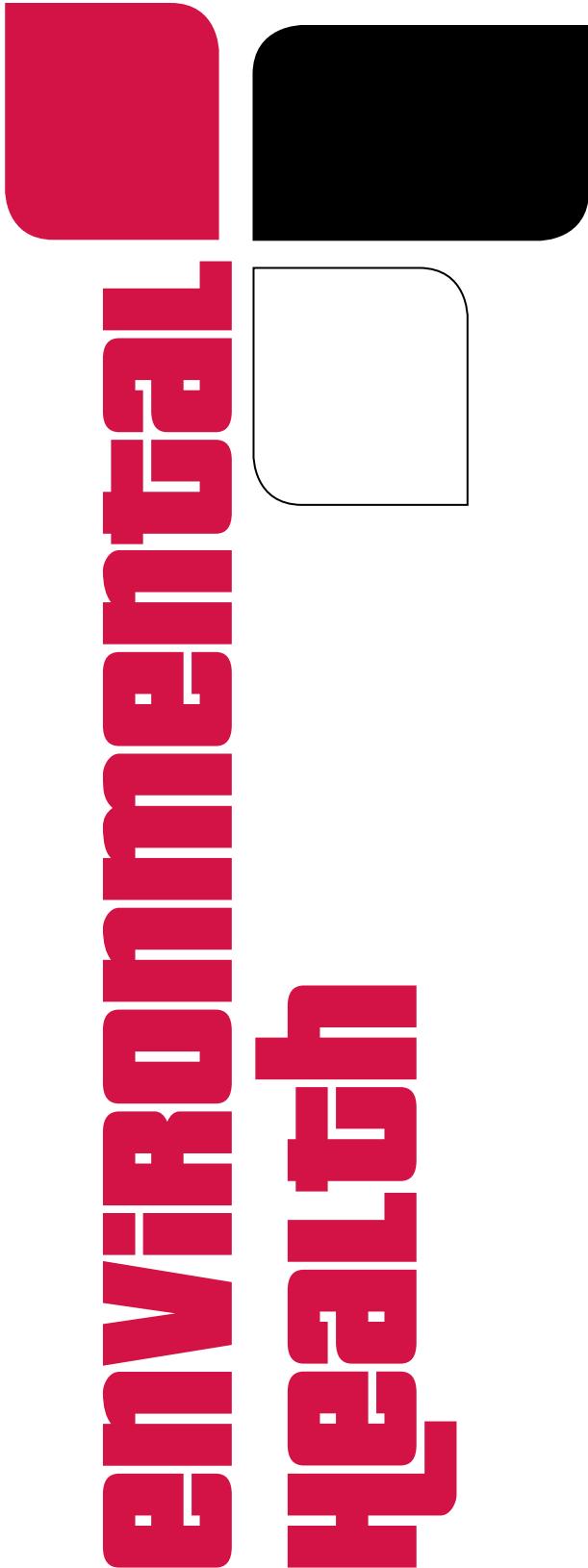
PROFICIENCY TESTING

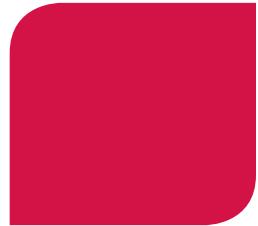
In 2011, SNPHL staff analyzed over 300 proficiency testing samples. Proficiency testing involves the analysis of unknown samples utilizing the same techniques and methods used for routine samples testing. The unknown sample test results are submitted to the proficiency testing agency and compared to the expected test result. In 2011, SNPHL received an average passing score of 99 percent correct for clinical and LRN proficiency testing.

REPORTING

SNPHL reports test results on a regular weekly, monthly or quarterly basis to a number of CDC programs including Gonococcal Isolate Surveillance Project; National Respiratory and Enteric Virus Surveillance System; Public Health Laboratory Information System; National Antimicrobial Resistance Monitoring System; PulseNet and Laboratory Response Network.







The programs of the

Environmental Health Division are designed to identify and sustain environmental conditions that promote public health. They ensure proper sanitation, safe food, proper disposal of waste and toxic materials, and the management of public health hazards in the environment. As the county's Solid Waste Management Authority, the health district provides regulatory oversight of all permitted solid waste disposal facilities and recycling centers.



Inspection & Plan Review Programs

CHILD CARE AND NURSERY FACILITIES

The 468 permitted child care facilities are regularly inspected to ensure compliance with health, sanitation and safety regulations, which were updated in 2009.

- Routine child care inspections: 509
- Complaint-driven inspections: 38
- Child care plan reviews, preliminary, status checks, letters, revised plans: 20
- Child care site inspections under construction: 23
- Existing facility equipment and construction evaluations: 5
- New child care permits issued or amended (includes change of ownership): 16

FOOD AND BEVERAGE ESTABLISHMENTS

Environmental health specialists inspect approximately 17,101 permitted food establishments in Clark County a minimum of once a year as required by state law.

- Routine inspections: 21,653
- Special event inspections: 4,388
- Complaint-driven inspections: 1,634
- Mobile vendor inspections: 315

Plans for new construction and remodeling of food establishments are submitted for approval to the Environmental Health Division.

- Food establishment plan reviews, preliminary, status checks, letters, revised plans: 1,137
- Food establishment site visits under construction: 1,352
- Existing facility equipment and construction evaluations: 374
- New food establishment permits issued or amended (includes change of ownership): 1,078

FACT

There were 191,006 online searches of restaurant inspections in 2011.



INSTITUTIONS

The Institutional Inspection Program inspects more than 488 permitted facilities, which include public, private and charter schools, local correctional facilities, summer camps and children's homes.

- Routine school inspections: 902
- Complaint-driven inspections: 37
- School plan reviews, preliminary, status checks, letters, revised plans: 18
- School site inspections under construction: 17
- Existing facility equipment and construction evaluations: 1
- New school permits issued or amended: 9
- Routine correctional facility inspections: 8
- Correctional facility plan reviews, preliminary, status checks, letters, revised plans: 0
- Site inspections under construction: 1
- New correctional facility permits issued or amended: 1
- Routine summer camps and children's home inspections: 8

PUBLIC ACCOMMODATIONS AND DRY CAMPING FACILITIES

Hotels and motels are inspected at least once a year to ensure rooms are clean, the furniture is in good repair, no insects or vermin are present, rooms are equipped with proper ventilation, fire alarms are present and linens are clean. In 2011, there were 347 permitted hotels and motels in Clark County, with a total of 168,957 rental rooms. Additionally, there were 150 permitted mobile home and RV parks with a total of 23,783 rental spaces.

- Routine hotel and motel inspections: 365
- Complaint-driven inspections: 254
- Public accommodation facility plan reviews, preliminary, status checks, letters, revised plans: 22
- Public accommodation site inspections under construction: 7
- Existing facility equipment and construction evaluations: 8
- New public accommodation facility permits issued or amended (includes change of ownership): 13
- Routine mobile home and RV park inspections: 152

PUBLIC BATHING PLACES

The 4,724 public swimming pools and spas located at public parks, apartment complexes, hotels, RV parks, homeowner's associations and sports complexes are routinely inspected to ensure proper operation.

- Routine pool and spa inspections: 3,949
- Complaint-driven inspections: 229

Plans for public swimming pools and spas are submitted by architects, engineers and contractors for review. Final construction inspections are conducted to ensure adherence to statewide regulations. Preliminary inspections and progress checks are conducted in conjunction with the overall approval process. Additionally, the Environmental Health Division issues new and renewal certifications for pool companies, operators, technicians and technician apprentices.

- Public bathing facility plan reviews, preliminary, status checks, letters, revised plans: 1,094
- Public bathing site inspections under construction: 554
- Existing facility equipment and construction evaluations: 39
- New public bathing facility permits issued or amended (includes change of ownership): 313



@your fingertips

Search restaurant inspections and see a 5-year inspection history.

View the 2010 Food Regulations.

Take the 2010 Food Regulations online training.

View the new lead regulations (Lead in Candy and Other Foods Consumed by Children, Lead in Consumer Products, Lead Paint Hazard Prevention and Control).

Access NCIAA complaint form.

Report illegal dumping, unsanitary conditions at a food establishment and illegal vendors.

Access regulations, forms, applications, checklists and fee schedules for regulated businesses and individuals.

Download the zoonotic disease report.

Learn more about starting a home-based food business.

Find out what you can recycle and where to take it.

Watch educational videos.

SEPTIC SYSTEMS

In areas where public sewers are not available, individual sewage disposal systems provide the functions of both sewer collection and treatment plant. Staff provides on-site wastewater system plan reviews, permitting and inspections for these systems.

- Parcel maps reviewed: 10
- Septic systems permitted: 97
- Loan certificates issued: 57
- Liquid waste pumping/hauling companies permitted: 48
- Pumping/hauling trucks permitted: 120

PERMITTED SOLID WASTE DISPOSAL FACILITIES

The Permitted Disposal Facilities program staff conducts inspections with varying frequencies each calendar year on all permitted disposal sites in Clark County. In addition, staff investigates unpermitted solid waste handling facilities, follow-up on rejected load reports and issue waste asbestos transport permits.

Permitted disposal facilities in Clark County:

- Landfills: 9, with 5 applications
- Transfer stations: 5, with 3 applications
- Public waste storage bin facilities: 4, with 0 applications
- Material recovery facilities: 7, with 2 applications
- Recycling centers: 36, with 8 applications
- Waste tire management facilities: 2, with 1 application
- Waste tire haulers: 10
- Compost facilities: 1, with 1 application
- Construction and demolition waste short-term storage facilities: 1, with 0 applications
- Waste asbestos transportation permits issued: 360

- Rejected load reports: 546
- Business license referrals: 364
- Temporary Solid Waste Disposal Site Permits: 11, with 6 applications

TATTOO, PERMANENT MAKEUP AND BODY PIERCING

Health district regulations require operators at tattoo, permanent makeup and body piercing establishments to receive vaccinations for hepatitis A and B, and to complete courses on preventing disease transmission, first aid and CPR.

Body art regulations were updated in 2009, and allow shops using only single-use, or disposable, equipment to operate without an autoclave, which sterilizes equipment. (Former regulations required all facilities to have a sterilizer even if they didn't use it.) The revisions also set the minimum age to receive a tattoo at 14 years of age with written consent from a parent or guardian.

In 2011, 180 establishments were licensed in Clark County.

- Tattoo, permanent make-up and body piercing establishment inspections: 412
- Temporary artist applications and inspections: 270

UNDERGROUND STORAGE TANKS

Staff conducts annual Environmental Protection Agency (EPA) compliance inspections of underground storage tanks (USTs) for the Nevada Department of Environmental Protection (NDEP). This program inspects installations, repairs, upgrades and suspected leaks of USTs.

- Active UST facilities in Clark County: 793, with 3 pending
- Number of compliance inspections conducted: 798
- New USTs and status changes: 11 new, 11 changes of ownership
- Permanent closures: 7
- Plan reviews: 34
- Final inspections conducted: 46
- Facilities reported to NDEP for formal enforcement: 5
- Closure inspections and site assessments: 14
- Contaminated sites: 4

USED MATTRESSES, BEDDING AND UPHOLSTERED FURNITURE

In 2007, the Southern Nevada District Board of Health passed new regulations governing the sale and disposal of used mattresses, bedding and upholstered furniture.

- Cease and desist orders issued against violators: 7

Childhood Lead Poisoning Prevention Program

The CDC-grant funded Childhood Lead Poisoning Prevention Program is administered through the Environmental Health Division with significant contributions from staff in the Clinic & Nursing Services Division and the Office of Epidemiology. The program is a partnership of several community agencies working to eliminate childhood lead exposure as a significant health risk in Clark County.

- Total childhood blood level screenings: Approximately 15,000
- Elevated blood lead level investigations: 11

Illegal Dumping Investigations & Enforcement

The Solid Waste and Compliance section of the Environmental Health Division enforces regulations pertaining to proper handling and disposal of solid waste. The section investigates all complaints of illegal dumping in Clark County.

- Illegal dumping complaints received: 1,683
- Cases presented to the hearing officer for adjudication: 286
- Penalties assessed for illegal dumping by the hearing officer: \$512,250

Public Water Systems

The health district works with the Nevada State Health Division to administer the Safe Drinking Water Program in Clark County. Public water systems are permitted by the state health division, and monitored and inspected locally by health district staff.

- Public ground water systems monitored: 83

Subdivision Review

Staff maintains a geographical information system (GIS) database and reviews every tentative map, final map and improvement plan package submitted for subdivisions. Plans are reviewed with regard to sewage disposal, water pollution, water quality and water supply facilities.

- Maps/plans reviewed: 139
- Maps approved: 81
- Units/lots approved: 2,078





LEAD REGULATIONS PROMOTE SAFETY

The activities of the Childhood Lead Poisoning Prevention Program resulted in approximately 55,000 blood lead tests being conducted in Clark County, and every pre-K, kindergarten and child care facility that was built prior to 1978 being screened for lead hazards. During the 2009 legislative session a bill was passed that encourages health care providers to test all children under the age of 6 for elevated blood lead levels and requires information to be reported to the health authority.

It was found that about 20 percent of children tested have lead in their bloodstream. There is no acceptable level of lead in a child's blood and even a slightly elevated level can impact a child's health and development.

As a result, the health district proposed three sets of regulations that were adopted by the Southern Nevada District Board of Health in 2011: Regulations Governing Lead in Consumer Products; Regulations Governing Lead in Candy and Other Foods Consumed by Children; Regulations Governing Lead Paint Hazard and Control.

The approved regulations establish definitions and set standards for the appropriate identification, notification, recall or remediation of lead sources that are likely to be a hazard to children. The standards set by the regulations are based on those set by the U.S. Food and Drug Administration for food products, the Consumer Product Safety Commission for consumer products and the EPA for permissible lead levels in paint. An important component is the provision contained in the regulations governing consumer products that allows the health district to issue a "hold order"—a way to compel a retailer to temporarily remove suspect products from sale and distribution sites for testing and public notification as appropriate.

These regulations represent an important step forward for the health district and its partners in their efforts to protect and promote the health of the community.

Target Sector Inspection

Target Sector Inspections (TSI) are conducted through an interlocal contract with NDEP. The TSI program audits small quantity generators of hazardous waste and specific businesses identified by the NDEP to ensure proper handling and reporting.

- Target Sector Inspections: 300

Vector Control

Vector control staff conducts surveillance, control and public education of animal diseases communicable to humans: rabies, plague, hantavirus, West Nile virus (WNv), Western Equine Encephalitis (WEE) and St. Louis Encephalitis (STE). Staff maintains a GIS database on disease distribution and control activities.

- Routinely treated natural mosquito breeding areas: 104
- Mosquitoes submitted for WNv, WEE, STE analysis: 28,729; 311 positive for WNv
- Bird samples submitted WNv, WEE, STE analysis: 3; 0 positive (Nevada Department of Agriculture ceased testing birds on April 1, 2010)
- Rodent samples submitted for hantavirus analysis: 122; 0 positive
- Rodent samples submitted for plague analysis: 124; 0 positive
- Flea samples submitted for plague analysis: 79; 0 positive

Waste Management Audits

Waste management audit inspections ensure area businesses manage waste properly to protect public health and the environment.

- Waste management audits: 3,684

FACT

The purpose of public health:

- Prevents epidemics and the spread of disease
- Protects against environmental hazards
- Prevents injuries
- Promotes and encourages healthy behaviors
- Responds to disasters and assists communities in recovery
- Assures the quality and accessibility of health services

2011 Recycling Report

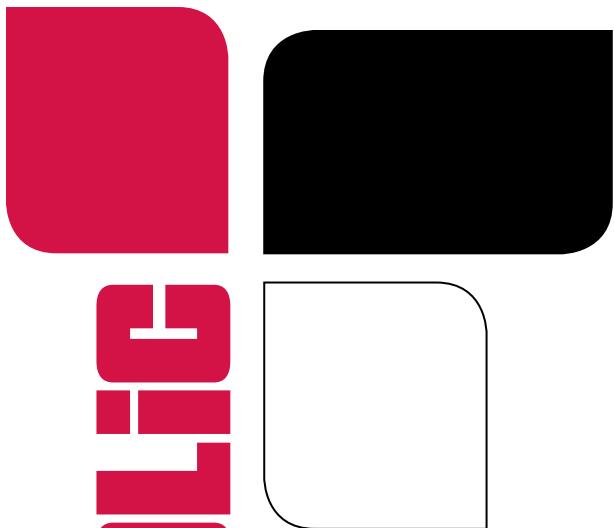
CLARK COUNTY, NEVADA

(Quantities reported in the number of tons)

RECYCLED MUNICIPAL SOLID WASTE (MSW)	2011	2010	% Change
PAPER Corrugated cardboard, newspaper, office paper, magazines, telephone books, mixed paper, other paper	185,338.43	176,055.22	5.27%
METALS Aluminum containers, tin/steel containers, ferrous scrap metals, non-ferrous scrap metals, appliances (white goods), mixed metal	307,224.48	203,062.69	51.30%
PLASTIC Plastic (PET), plastic (HDPE), mixed plastic, plastic film, polystyrene, other (PVC, LDPE, PP)	14,223.34	12,230.67	16.29%
GLASS Clear, green, amber/brown, mixed glass, other glass	14,010.35	12,259.96	14.28%
ORGANIC MATERIAL Yard debris, food waste, biosolids, restaurant grease, rendered animal matter, pallets/wood	45,476.09	59,099.57	-23.05%
SPECIAL WASTE Used tires, paint, fluorescent bulbs, lamp ballasts, mercury devices and waste, household hazardous waste	11,729.31	9,153.04	28.15%
TEXTILES Textiles, carpet/carpet pad	1,781.00	2,117.69	-15.90%
OTHER RECYCLED MSW Toner cartridges, cell phones, filters, computer e-waste	431.62	1,256.77	-65.66%
TOTAL RECYCLED MSW	580,214.62	475,235.61	22.09%
CONSTRUCTION & DEMOLITION DEBRIS (C & D) Asphalt, concrete, carpet, carpet padding, drywall, wood, plastic buckets	2.54	10,918.71	
RECYCLED MSW AND C & D GRAND TOTAL	580,217.16	486,154.22	
Total MSW disposed of in the municipality: *	2,016,669	2,182,537	-7.60%
Total MSW generated in municipality: **	2,596,884	2,657,773	-2.29%

* This number can be found in the spreadsheet at the following link: <http://nevadarecycles.gov/main/forms.htm>

** Total MSW generated is the sum of recycled MSW (tabulated above) plus the quantity of MSW disposed of in a landfill, which was reported as generated in the municipality.



**Heroes in
Public
Health**

The “Big 10”

The 10 Essential Public Health Services were first defined by representatives from U.S. Public Health Service agencies and other major public health organizations. The Essential Services describe the fundamental framework for developing public health programs and activities that should be undertaken in all communities.

1. Monitor health status to identify and solve community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate and empower people about health issues.
4. Mobilize community partnerships and action to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.
6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
8. Assure a competent public and personal health care workforce.
9. Evaluate effectiveness, accessibility and quality of personal and population-based health services.
10. Research for new insights and innovative solutions to health problems.

Public Health HEROES

PUBLIC HEALTH HEROES ARE PRESENTED DURING NATIONAL PUBLIC HEALTH WEEK TO HONOR INDIVIDUALS WHOSE EXTRAORDINARY CONTRIBUTIONS HELP TO PROTECT AND PROMOTE HEALTH IN THE COMMUNITY. HEROES ARE NOMINATED BY HEALTH DISTRICT STAFF FOR THEIR EFFORTS IN SUPPORTING ONE OR MORE OF THE 10 ESSENTIAL PUBLIC HEALTH SERVICES.

Patrick Fogerty and Michael Schultz | New York-New York Hotel & Casino and ARK Restaurant Corporation

Patrick Fogerty and Michael Schultz serve as the liaisons between New York-New York Hotel & Casino and ARK Restaurant Corporation and the health district. Mr. Fogerty and Mr. Schultz were recognized for their diligence regarding health district policies and regulations that impact their permitted establishments—whether they are leased outlets or hotel-owned food facilities. Both work closely with health district staff when they are obtaining new equipment or implementing new property practices to make sure they remain in compliance with health district permits, regulations and policies. Mr. Fogerty and Mr. Schultz maintain on-the-job training for all staff to ensure food handlers have an in-depth understanding of safe food handling practices. The two developed mock food inspection programs to support ARK Restaurant Corporation and property-owned food safety practices and public health policies, all of which ensure that the public and New York-New York's customers are protected.

Candice Nichols, Executive Director | Gay & Lesbian Community Center of Southern Nevada

Candice Nichols has worked closely with the health district's office of HIV/AIDS/STDs since 2004. Recently, Ms. Nichols made the Gay & Lesbian Community Center of Southern Nevada available as an outreach site where anyone in the community can access HIV or STD testing. Ms. Nichols and the Center serve as a critical component of the health district's HIV/STD testing and counseling program. In addition to testing, at-risk individuals who visit the Center can also receive hepatitis A and B vaccinations. The goal of this outreach is to empower people with knowledge about their health and disease status, and allows them to take control of their lives.

Pediatric Early Warning Sentinel Surveillance Sites | Foothills Pediatrics, Fremont Children's Clinic, Lake Mead Pediatrics and Southwest Medical Associates

The Pediatric Early Warning Sentinel Surveillance (PEWSS) system was initiated in response to the 2009 H1N1 influenza outbreak. It was developed to identify and track influenza in the community and in mid-2010, the system was expanded to cover the most common viral respiratory illnesses.

PEWSS has been successful in providing an up-to-date picture of respiratory illness in Southern Nevada, and has provided valuable information to both the medical and public health communities. The success of this system is based on the voluntary participation of

the five physician's offices that make up the network, all of whom have maintained their commitment to the system. The surveillance system information is reported to the medical community on a weekly basis. Information about the viral activity in the community can aid a physician in assessing the treatment options for patients. Through the hard work and dedication of the surveillance sites, the PEWSS system has provided (and continues to provide) valuable insight into disease patterns in our community.

Physicians receiving awards: Dr. Claudia Garcia and Dr. Ralph Conti, Foothills Pediatrics; Dr. Blair Duddy, Fremont Children's Clinic; Dr. Emmanuel Taguba, Lake Mead Pediatrics; and Dr. Rutu Ezhuthachan, Southwest Medical Associates.

Aurora Wong, Coordinator | Hepatitis B Free Las Vegas

Aurora Wong created the Hepatitis B Free Las Vegas coalition to address the high rates of chronic hepatitis B infection among Asian Americans and Pacific Islanders in Southern Nevada, who have higher rates of infection than the general population.

Since September, Ms. Wong put together a coalition of 20 community partners, including the health district, and 100 stakeholders to develop an approach to educate and contain infection among the local Asian-American community. Her goal is to prevent new infections, to encourage testing and to help people who are infected with chronic hepatitis B become connected with resources and an appropriate system of care.

Public Health Heroes received recognition from Dr. Sands during the April 2011



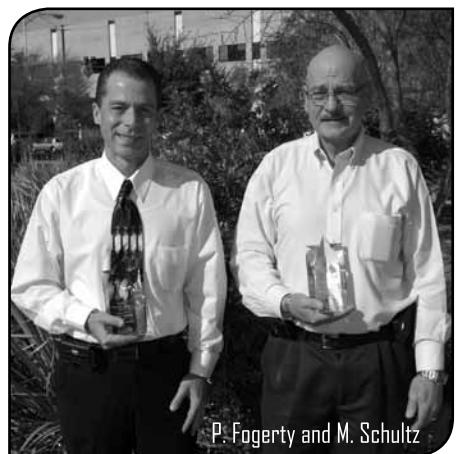
PEWSS physicians



C. Nichols



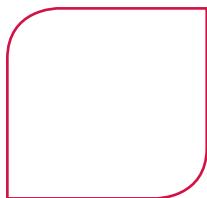
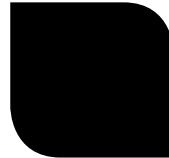
A. Wong



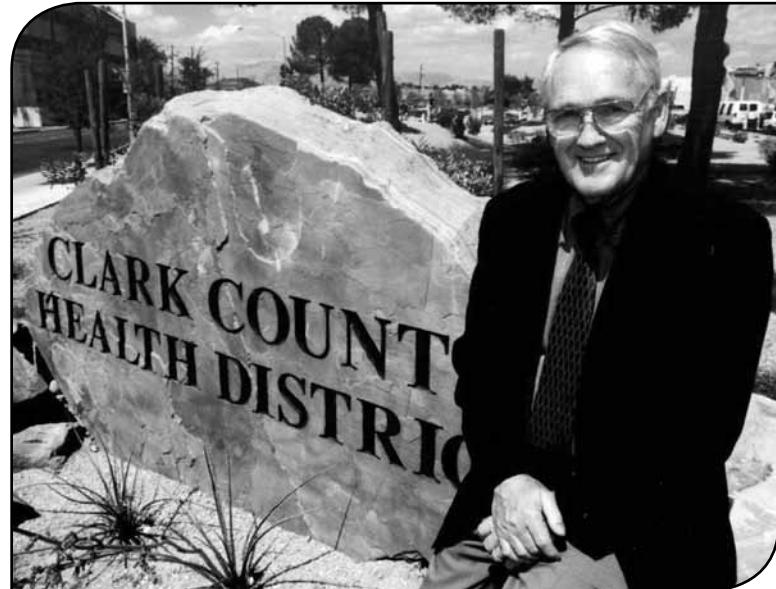
P. Fogerty and M. Schultz

Our Very Own HEROES

Employees rolled up their sleeves and actively gave back to the community. The district's Community Outreach Team planned several volunteer opportunities for staff, including the collecting toys for Positively Kids and helping maintain the Vegas Roots Community Garden (formerly Tonopah Community Garden).



In MEMORIAM



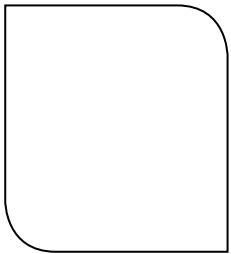
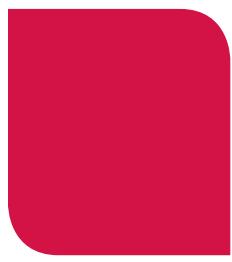
OTTO HAKON RAVENHOLT, MD MAY 17, 1927 – MARCH 18, 2012

Dr. Otto Ravenholt was appointed as the first chief health officer of the Southern Nevada Health District (formerly the Clark County Health District) in 1963 before retiring in 1997.

During his 35-year tenure at the health district, Dr. Ravenholt spearheaded many public initiatives including stricter sanitation control, training for food handlers, reducing infant mortality rates, raising immunization rates, and animal control programs.

He will be remembered as a good friend, husband, father, grandfather and a dedicated public servant.

DIRECTOR



Telephone DIRECTORY

GENERAL INFORMATION

Main Number.....	759-1000
Emergency Hotline.....	759-4636 (INFO)
Website	www.SNHD.info

ADMINISTRATION

Administration	759-1204
Chief Health Officer.....	759-1201
Community Outreach	759-0881
Health Cards.....	759-1099
Human Resources	759-1101
Public Information Office.....	759-1390
Salud en Acción.....	759-0874
Vital Records	759-1010

CLINIC & NURSING SERVICES

Administration	759-1301
East Las Vegas Clinic.....	759-0900
Henderson Clinic.....	759-1040
Immunizations.....	759-0850
Mesquite	(702) 759-1682
Perinatal Hepatitis B	759-0858
Sexual Health Clinic.....	759-0702
TB Treatment & Control	759-1369
Workplace Vaccinations	759-0878

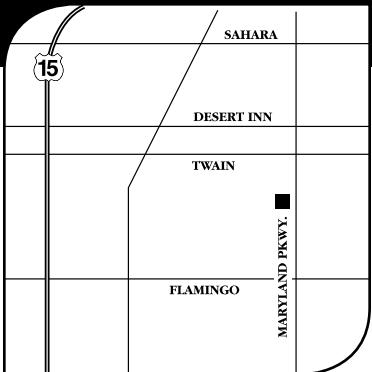
COMMUNITY HEALTH

Administration	759-1364
Chronic Disease Prevention & Health Promotion.....	759-1270
Emergency Medical Services & Trauma System	759-1050
Epidemiology	759-1300
Public Health Preparedness	759-1671
Southern Nevada Public Health Laboratory	759-1020

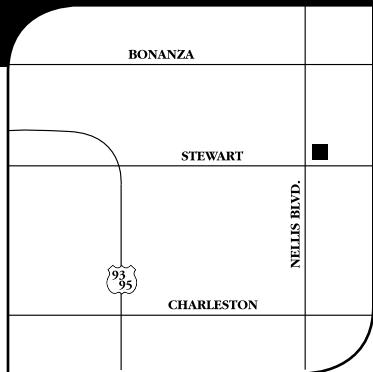
ENVIRONMENTAL HEALTH

Administration	759-0589
Food & Beverage Establishments	
• East Las Vegas and Henderson	759-0501
• North Las Vegas.....	759-0502
• Spring Valley.....	759-0503
• Strip Properties.....	759-0620
Information and Complaints.....	759-0588
Laughlin.....	(702) 759-1643
Mesquite	(702) 759-1682
Pool Plan Review and Pool Operator Testing	759-0571
Restaurant Plan Review.....	759-1258
Septic Tanks.....	759-0660
Solid Waste Management.....	759-0600
Subdivision and Solid Waste Plan Review.....	759-0661
Tattoo/Body Piercing	759-0677
UST Program.....	759-0603
Water Systems	759-0677

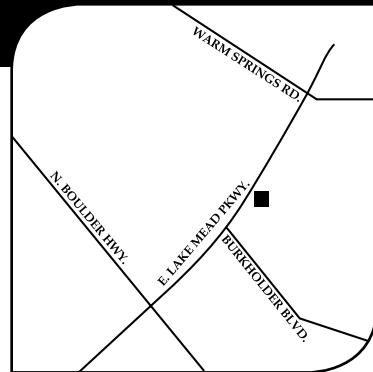
Locations



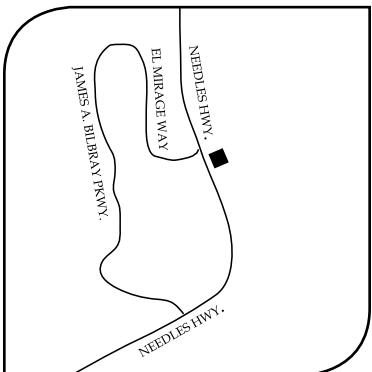
**CAMBRIDGE COMMUNITY
OUTREACH CENTER**
3900 Cambridge St., Ste. 104
Las Vegas, NV



**EAST LAS VEGAS
PUBLIC HEALTH CENTER**
560 Nellis Blvd., Ste. E-12
Las Vegas, NV

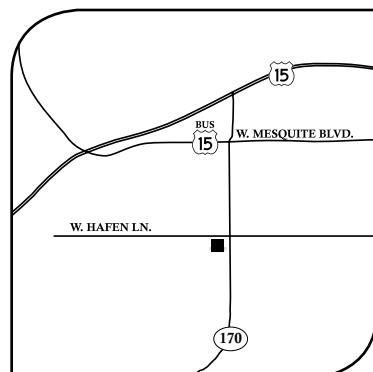


**HENDERSON
PUBLIC HEALTH CENTER**
520 E. Lake Mead Pkwy.
Henderson, NV



**LAUGHLIN
PUBLIC HEALTH CENTER**
3080 S. Needles Hwy., Suite 1800
Laughlin, NV

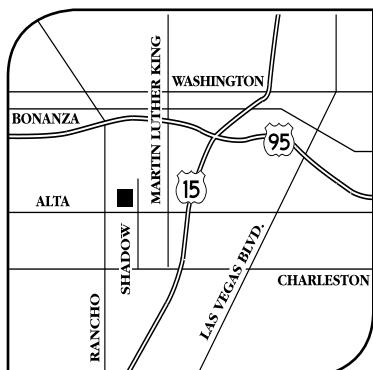
Due to the recent closure of the main building at 625 Shadow Lane, services vary at each location and are subject to change. Visit www.SNHD.info or call (702) 759-INFO (4363) for up-to-date information.



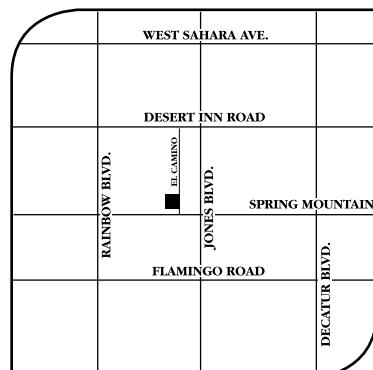
**MESQUITE
PUBLIC HEALTH CENTER**
830 Hafen Ln.
Mesquite, NV



**RAVENHOLT
PUBLIC HEALTH CENTER**
625 Shadow Ln.
Las Vegas, NV



**SHADOW PROFESSIONAL
CENTER**
400 Shadow Ln.
Las Vegas, NV



**SPRING VALLEY
PUBLIC HEALTH CENTER**
6330 Spring Mountain Rd., Ste. C
Las Vegas, NV



Lawrence K. Sands, DO, MPH, Chief Health Officer

Rory Chetelet, Acting Director of Administration | **John Middaugh, MD**, Director of Community Health |
Glenn Savage, Director of Environmental Health | **Bonnie Sorenson**, Director of Clinic & Nursing Services
P.O. Box 3902, Las Vegas, NV 89127 | 702.759.1000 | www.SNHD.info