

Southern Nevada Health District

Southern Nevada Health Disc. report to the community

SOUTHERN NEVADA HEALTH DISTRICT

2009 Report to the Community



VISION

Healthy people in a healthy Southern Nevada

MISSION

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

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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 TWO-YEAR TERMS.



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Message from the Chief Health Officer



Lawrence Sands, DO, MPH Chief Health Officer

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

IN THE MIDST OF A WORLDWIDE INFLUENZA PANDEMIC AND ONE OF THE BIGGEST RECESSIONS TO DATE, THE SOUTHERN NEVADA HEALTH DISTRICT EXPERIENCED A ROLLERCOASTER OF HIGHS AND LOWS IN 2009.

Due to a sluggish economy and declining revenues, we were forced to reduce the 2009-2010 budget by \$3.3 million. Yet the health district still managed to achieve significant accomplishments during the past year.

During the 2009 session, the Legislature passed two initiatives that benefit health district operations: Assembly Bill 249, which enables the district to write regulations to address public nuisances, and Senate Bill 340, which ultimately gives authority to the district to serve as the local lead agency for tobacco prevention and control in Clark County.

New revenue for programs was generated by receiving a grant from United Way for the Shots 4 Tots program, totaling \$92,850; receiving supplemental funding for our family planning grant in the amount of \$92,000 and receiving an infertility prevention project grant for \$50,000. Additionally, the Office of Public Health Preparedness received funding from nine grant sources, totaling \$11,548,520.

Many programs implemented new processes such as an electronic document filing system for medical records in the Office of Epidemiology; foodborne illness team protocols for investigation of foodborne illness complaints; and web-based and social networking technologies.

Following the nation's largest hepatitis C exposure notification in 2008, the health district's Outbreak Investigation Team completed and released its final hepatitis C outbreak investigation report in December 2009. The outbreak's total economic cost to the community, which involved 63,000 patients, is estimated to be between \$16 million and \$21 million. Through a joint effort by the Nevada State Health Division, the University of Nevada, Las Vegas and the health district, Nevada was selected as a pilot site for the CDC's "One & Only" safe injection practices campaign, which aims to raise awareness about safe injection practices.

In order to ensure access to public health services throughout the community, the health district finalized a lease agreement with the City of Mesquite to open a new service center, which is now



Dr. Sands speaks to a reporter during an H1N1 clinic

fully operational. Additionally, district staff successfully negotiated lease reductions for the Spring Valley and East Las Vegas Public Health Centers.

Several programs successfully created and/or updated regulations, including those for the trauma system, child care facilities, septic systems and tattoo establishments. Additionally, many programs created videos to facilitate training of staff and constituents to address topics such as bomb awareness, injury and care; tuberculosis care and treatment; H1N1 vaccine administration, and flu safety among health care workers.

Other successes in 2009 include the transfer of clinical STD testing from the health district's internal lab to the Southern Nevada Public Health Laboratory; the health district's assistance to the Nevada State Health Division in receiving strategic national stockpile supplies; development of a Spanish language drowning prevention program; the complete redesign of the health district website; the successful negotiation of a data sharing agreement with the Center for Health Information Analysis at UNLV; and, for the sixth year in a row, national recognition of the health district's financial reporting for fiscal year 2008.

In retrospect, these accomplishments reflect the ingenuity and dedication of staff in the midst of financial adversity and a national full-scale public health emergency response to the 2009 H1N1 influenza. Fueled by our mission to protect the community, we will continue to seek out opportunities for funding and partnerships to ensure our ability to deliver services in the most cost-efficient means possible during these difficult economic times. I am confident that the Southern Nevada Health District will continue to successfully meet our challenges in the months and years ahead while providing our community with essential public health services.



administration



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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.



Rosanna Silva-Minnich, community outreach and information specialist, organizes 900 pounds of food collected by staff to donate to a local food bank.

Finance

Of the health district's fiscal year 2010 budgeted revenue, 49 percent of funding comes from regulatory revenues and fees, 35 percent is allocated from Clark County property tax revenue, 13 percent from federal grants distributed by the State, and 2 percent from the State's general fund.

Clark County's fiscal year 2010 allocation of \$24,942,525 represents a decrease of 12 percent from fiscal year 2009. The funding is based on the assessed valuation of all taxable property in the county. Due to the economic downturn, it is predicted that property tax valuation will continue to decrease for the next four years.

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 and health club attendants receive a three-year health card; all others must be renewed every two years.

In 2009, 116,922 health cards were issued.



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ON OUR WEBSITE

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- Order birth and death certificates.
- Access public notices.
- Find out how to apply or renew health cards.
- View health card movie schedules and locations.
- Check out volunteer opportunities.
- Access Board of Health agendas and minutes.
- Seek job opportunities and apply online.
- View current and past budget reports.
- Request public and medical records.
- Get directions to public health centers.
- Find SNHDflu and SNHDinfo on Twitter.
- Become a fan on Facebook.
- Watch videos on our YouTube channel.

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 2009, staff processed 29,584 birth records and 13,689 death certificates.

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 2009, 417 volunteers provided about 17,350 hours of service, which equates to more than \$351,337 in paid labor. As part of their service, volunteers placed 9,587 confirmation calls to family planning clients.

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 the Association for the Advancement of Retired Persons Senior Community Service Employment Program, Catholic Charities Senior Community Service Employment Program, Area Health and Education Center of Southern Nevada, Nevada Department of Health and Human Services, University of Nevada, Las Vegas and 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 the participants with accurate information they can use to make informed choices about their health care.

In 2009, Salud en Acción volunteers assisted 392 Medicare/ Medicaid beneficiaries and attended 10 outreach events in the community.

REVENUE

	Actual 2007-2008	Actual 2008-2009	Budgeted 2009-2010
Federal Funds (distributed by State)	8,630,562	9,134,335	7,734,823
Federal Grants	1,651,603	1,637,192	1,598,838
State Funding	1,678,292	1,067,270	1,385,705
Fee for Service	7,340,981	6,871,724	7,284,214
Regulatory Revenue	22,009,800	22,028,715	23,328,057
Program Contract Services	2,652,518	2,644,428	2,593,306
County Tax Revenue	25,473,000	28,182,950	24,942,525
General Receipts	58,333	45,305	8,125
Interest	1,497,698	1,443,100	1,500,000
Total Revenue	\$70,992,787	\$73,055,019	\$70,375,593
Total Capital Improvements	\$35,421	\$39,201	\$47,800

EXPENDITURES

Clinics & Nursing Services	19,221,694	20,834,398	23,085,262
Environmental Health	13,572,009	15,242,662	15,579,730
Community Health	8,091,703	8,606,149	7,737,099
Administration	18,808,328	21,199,574	23,949,165
Total Expenditures	\$59,693,734	\$65,882,783	\$70,351,256
Total Capital Improvements	\$946,771	\$906,512	\$2,649,000

ENDING FUND BALANCE

General Fund	\$28,231,570	\$26,878,134	\$10,043,882
Capital Improvements Fund	\$1,424,833	\$1,557,522	\$1,608,594

WEBSITE GETS FACELIFT

The Southern Nevada Health District launched a redesigned website with new features that allow users to maneuver around the site with ease. Visitors are able to search for programs and information without having to know the organizational structure of the health district. The new home page includes an area for popular searches and a "how do I?" section to help users find the information they need. "Hot Topics" is another new feature that links users to information highlighted by the health district, such as H1N1 influenza or other topics featured in the news.





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nursing services division provides services to more than 400,000 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, a liaison nurse with Child Protective Services, the Nurse Family Partnership Program, and the new Refugee Health Program.

LEAD CASE MANAGEMENT PROGRAM

Nursing staff works with the Office of Epidemiology and Environmental Health Division to eliminate childhood lead exposure as a significant 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.

In 2009, 10 children were referred for case management.

MATERNAL CHILD HEALTH PROGRAM

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. Nurses also conduct Healthy Kids exams in congregate settings located throughout the community and at public health centers.

During 2009, staff performed 3,356 examinations.

NURSE FAMILY PARTNERSHIP PROGRAM

The Nurse Family Partnership Program, a national initiative, 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 two. 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 2009, the program enrolled 98 clients.

return

ON OUR WEBSITE

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- 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.

REFUGEE HEALTH PROGRAM

The new Refugee Health Program is a joint partnership with Catholic Charities and was developed in response to the growing number of refugees entering the community with numerous unmet health care needs. These clients face many 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.

Last year, a total of 637 clients were seen and 109 were referred for follow-up with a health care provider for communicable diseases such as TB, hepatitis and STDs.

Family Planning Services

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.

The program provides education, information, contraception, pregnancy testing and counseling to Clark County residents.

In 2009, the clinic and its delegate agencies served approximately 17,223 clients, 9,830 of which were served by health district staff.

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.

WOMEN'S HEALTH CONNECTION

Family planning clinics are service providers for the Women's Health Connection, a breast and cervical cancer early detection program. The program is free for eligible women who reside in Nevada, and is funded by the Centers for Disease Control and Prevention (CDC).

Women age 40 and older are eligible to receive annual pelvic exams and pap smears, clinical breast exams and some diagnostic services. Women age 50 and older are eligible to receive program services and an annual mammogram.

In 2009, staff served 686 clients for the Women's Health Connection.

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 more than 25 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 2009, 310 unduplicated clients were served.

HIV/AIDS SURVEILLANCE

Over the past 28 years in Clark County, 3,580 people have been diagnosed with HIV and 5,301 people have been diagnosed with AIDS. Of those diagnosed with AIDS, 48 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.

HIV TESTING AND COUNSELING

In 2009, staff administered 20,601 HIV tests, of which 261 were positive. Of the tests administered, 6,184 were rapid HIV tests, which use oral fluids instead of blood.

Rapid tests improve access in both clinical and nonclinical settings, helping to increase the number of people who learn their HIV status.



NURSING CASE MANAGEMENT

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 2009, case management staff made 7,494 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 2009, there were 1,573 cases of gonorrhea and 8,274 cases of chlamydia 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 15 SAPTA-funded substance abuse agencies in Clark County. Through this outreach program, staff regularly provide HIV testing and counseling, TB testing and/or chest X-rays, disease and transmission education, and referrals to community agencies.

In 2009, staff administered 1,260 HIV tests, of which four were positive.

SYPHILIS ELIMINATION PROGRAM

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 Center of Southern Nevada to provide an onsite clinic that offers rapid testing for HIV; testing and treatment for syphilis, gonorrhea and chlamydia; and vaccination for hepatitis A and B.

In 2009, there were 85 primary and secondary syphilis cases, 138 early latent syphilis cases and 4 congenital syphilis cases.

Immunization Program

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

In 2009, staff administered a total of 248,460 immunizations to 129,359 clients.

ADOLESCENT IMMUNIZATION PROGRAM

The Adolescent Immunization Program was initiated in 2008 in response a 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 2009, a 90 percent compliance rate was achieved for the booster dose.



ADULT/WORKPLACE VACCINATION PROGRAM

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 2009, 2,981 clients were served.

CHILD CARE VACCINATION PROGRAM

The Child Care Vaccination Program was created to support state statute mandating children attending child care be up-to-date on all vaccinations required for their age. 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 500 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 improved by 10 percent in 2009.

HEALTH CARD CLINIC

The Health Card Clinic provides hepatitis A vaccination and tuberculosis 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 2009, staff administered 60,506 hepatitis A vaccines and 14,019 tuberculosis skin tests.

PERINATAL HEPATITIS B PROGRAM

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 2009, staff administered 23,097 hepatitis B birth doses and 79 HBIG birth doses at Clark County birthing centers. Additionally, staff provided case management services to approximately 151 newborns, expectant mothers and household contacts.

VACCINES FOR CHILDREN PROGRAM

The Vaccines for Children Program (VFC), 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.

Nursing Development/Community Outreach

This program provides nursing staff with educational opportunities presented in 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 2009, 167 educational opportunities were offered to 961 attendees.

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

In 2009, approximately 116 students rotated through the Clinic & Nursing Services Division.

NURSE FAMILY PARTNERSHIP EARNS GOOD MARKS

After the Nurse Family Partnership (NFP) completed its first full year, it received a report card from the program's national office assessing its effectiveness. Based on the report card, success of the program is evident: 98 percent of the 76 babies born to date were full-term and were born at a healthy birth weight. More than 90 percent of mothers participating in the program initiated breast feeding.

"Our clients range in age from 13 to 35 years old. These are women who are at risk of giving birth prematurely or delivering lower birth weight babies," said Gwen Osburn, community nurse health manager. "Independent studies have found that young women who participate in this public health program are more likely to graduate from high school and have lower enrollment in social assistance programs. The program is an investment in the future."

It is estimated that every dollar invested in the NFP can yield as much as a five dollar return. The goals of the NFP are ambitious but aim to help clients become an economically self-sufficient family.

Sexually Transmitted Diseases 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 2009, STD clinic staff provided services to more than 18,784 unduplicated clients and laboratory staff processed 48,052 tests.

Tuberculosis Surveillance & Clinical Services

The Tuberculosis (TB) 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 2009, there were 87 cases of active TB reported in Clark County. Of these cases, five clients are being treated for multi-drug resistant TB. A total of 82 contact investigations were conducted and one was identified as an outbreak and required additional resources from the CDC. The successful identification of disease, along with completion of therapy, is necessary to prevent further spread of TB and to curb drug-resistant strains.





community health



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 & Health Promotion

The Office of Chronic Disease Prevention and Health Promotion educates residents about healthy choices, promotes behaviors that lead to improved health, and participates in community partnerships to encourage healthy lifestyles through development of policies and changes to the physical environment that support healthy choices. 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 diseases, which include cardiovascular disease, cancer and diabetes, are now among the most prevalent and costly of health problems. Most are preventable by changing risk behaviors, such as tobacco use, physical inactivity and poor dietary choices. The nationally recognized efforts of the Chronic Disease Prevention Program include campaigns at schools, worksites and community venues to promote healthy eating, increase levels of physical activity and increase awareness of chronic disease risk factors. Programs are tailored to meet the needs of at-risk communities to reduce health disparities.

Physical Activity

The Chronic Disease Prevention Program promotes increased levels of physical activity through the Walk Around Nevada online program, TV Turn Off Week, social marketing return

ON OUR WEBSITE

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- Join the Nutrition Challenge.
- Get information about smoking cessation.
- Participate in the Walk Around Nevada program.
- Check out the Get Healthy Clark County 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.

campaigns and worksite wellness tool kits. More than 5,600 individuals have registered for Walk Around Nevada since its inception in 2006.

Nutrition

The program also advocates improved dietary choices through the Nutrition Challenge online program and social marketing campaigns. More than 2,700 people have registered for the Nutrition Challenge since its inception in 2006.

In 2009, an online program to promote healthier choices among children was launched. To date, 69 participants have registered for the Kids Challenge.

Staff supports and participates in many community coalitions:

- Community Partners for Better Health—a coalition promoting healthy lifestyles within communities of color
- Clark County Diabetes Group—a coalition promoting awareness and early diagnosis of diabetes
- Partners for a Healthy Nevada—a Clark County coalition addressing obesity
- Regional Open Space Work Group—a Clark County partnership addressing open space and trails

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.

In 2009, there were 59 submersion incidents and 10 drownings recorded among children 14 years and under. Nine of the drownings involved children less than 4 years of age. These numbers are similar to 2008 totals and much lower than those prior to initiating the annual campaign in 2004.

The campaign has been conducted for the past 10 years and has been supported by a combination of funding from the health district, Clark County Safe Kids, an Outside Agency Grant from Clark County and local businesses.



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 PROGRAM

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. Tobacco use in Clark County has been on a steady decline largely in part to efforts of the health district.

The program is guided by the CDC's "Best Practices for Comprehensive Tobacco Control Programs" document. Staff has expanded programming to diverse communities disproportionately affected by tobacco use and helped to increase public awareness of the dangers of exposure to secondhand smoke. Since the program's inception in 1999, smoking rates among adults have declined from 30 percent to 22.9 percent and among children have declined from 33 percent to 17 percent.

The Tobacco Control Program supports and develops community coalitions including:

- CIAA (Clean Indoor Air Alliance)
- XPOZ—a youth tobacco prevention organization
- Urban Fuel—a young adult tobacco prevention coalition
- CRUSH—a lesbian, gay, bisexual and transgender tobacco prevention brand



Emergency Medical Services & Trauma System

The Emergency Medical Services & Trauma System (EMSTS) Office coordinates emergency medical services by providing medical direction and protocols for the county's emergency response system. Additionally, the office has the authority to plan, implement and monitor the Clark County trauma care system.

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). The office also oversees the reinstatement of expired EMT certificates and grants reciprocity to EMTs who have been certified in other counties or states meeting the requirements of Clark County. Additionally, ambulance and firefighter attendants are issued licenses by the health district. All ambulance services, air ambulance services and firefighting agencies providing emergency medical care are permitted through the health district.

Continuing Medical Education and Training Centers

All certified and licensed medical attendants aboard ambulances or other medical rescue vehicles, such as fixed-wing aircraft and helicopters, must complete training and continuing education classes conducted by a public or private agency approved by the health district.

QUALITY IMPROVEMENT

The office provides quality improvement oversight within the emergency medical services (EMS) system. The office oversees quality improvement projects and reviews patient complaints when they are received. Health district EMS regulations require each permitted ambulance service (private and fire department) to have a quality improvement director to ensure compliance with 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 and evaluate trauma care in the system, monitor trends in system performance and make recommendations for system improvements.

MEDICAL ADVISORY BOARD

The Southern Nevada Health District Medical Advisory Board (MAB) provides emergency medicine recommendations to the chief health officer. The MAB makes recommendations and assists in the ongoing design, operation, evaluation and revision of the EMS system. Membership consists of one medical director and one operations director from each permitted agency.



CERTIFICATION STATUS

ACTIVE CERTIFICATIONS

First Responder	3
EMT-Basic	788
EMT-Intermediate	. 1,381
EMT-Paramedic	. 1,023

LICENSURE STATUS

New licenses issued198
Renewal licenses issued1,270
Paid full-time fire departments 6
Volunteer fire departments11
Private ambulance services
Special purpose stand-by ambulance services
Helicopter ambulance services





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 by assisting in the ongoing design, operation, evaluation and revision of the trauma system.

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 Dec. 31, 2009, 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; Allen Marino, MD, MAB Chairman; William Wagnon, MountainView Hospital; Troy Tuke, Clark County Fire Department; Larry Johnson, MedicWest Ambulance; Deborah Kreun, ThinkFirst-Nevada; Scott Cassano, United Healthcare; Suzanne Cram, Desert Canyon Rehabilitation Hospital; Susan Hilger; and Mary Ellen Britt, Regional Trauma Coordinator, Southern Nevada Health District.



Epidemiology

Epidemiology is the basic 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. The office conducts disease surveillance, investigates individual cases and disease outbreaks, and analyzes population-level disease data to understand and facilitate control of the diseases and conditions that are most important to the health and well being of Southern Nevada residents and visitors. Staff also educates health care providers, agency partners and the general public about diseases of public health concern.

SURVEILLANCE PROGRAMS

Reportable Disease Investigation and Surveillance

State and local laws require health care providers, hospitals, medical laboratories, blood banks, schools, child care centers, nursing homes and correctional facilities to report more than 60 different diseases and conditions to the health district. The Office of Epidemiology conducts surveillance and investigates all reportable diseases with the exception of HIV/AIDS, sexually

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- Check dates and locations for EMS training opportunities in Clark County.
- Download EMS regulations, manuals and forms.
- View the "Clark County Health Status Reports."
- Access the antibiogram newsletter.
- Get emergency preparedness planning and kit information.
- View health district preparedness plans.
- View monthly disease statistics.
- Download norovirus guidelines in extended care and nursing homes.
- Join the Health Alert Network.

transmitted diseases and tuberculosis, which are investigated by Clinic & Nursing Services staff. Disease reports are investigated to determine the sources of the infection, to identify outbreaks, and to implement control measures to prevent and stop the spread of disease.

In 2009, the Office of Epidemiology received 136,562 disease reports, 4,233 of which required further investigation by staff prior to reporting to the Nevada State Health Division. A significant number of these investigations were due to the 2009 H1N1 pandemic.

Antimicrobial Resistance Surveillance

In conjunction with Nevadans for Antibiotic Awareness (NAA), staff enlisted the cooperation of commercial and hospital laboratory personnel to participate in a county-wide antimicrobial resistance surveillance project. In 2009, financial support from the CDC was discontinued. As a result, the NAA executive subcommittee determined the coalition would not be able to continue and transferred its remaining funds to the Nevada Public Health Foundation.

In 2009, staff continued routine surveillance of invasive Streptococcus pneumoniae in children under the age of 5, as well as invasive drug-resistant Streptococcus pneumoniae (DRSP) in all age groups as reportable in Clark County. Staff also evaluated the results of a four-year study of DRSP. The survey was terminated in January 2009.

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. Summary reports regarding chronic disease conditions and related behaviors (such as tobacco use and physical activity) are currently being developed for publication.

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.

CLARK COUNTY REPORTABLE DISEASE STATISTICS*

Disease	Annual Average Rate (2005-2009)	Annual Average Total (2005-2009)	Annual Rate (2009)	Annual Total (2009)
AIDS	12.2	233.6	10.4	206
Amebiasis	0.5	9.8	0.2	4
Botulism-Intestinal (Infant)	0.0	0.4	0.0	0
Brucellosis	0.1	1	0.0	0
Campylobacteriosis	5.7	110.2	5.8	115
Chlamydia	369.9	7,108	416.3	8,274
Coccidiodomycosis	3.0	57.2	2.8	56
Cryptosporidiosis	0.4	7	0.2	3
Dengue Fever	0.1	1.2	0.1	2
Encephalitis	0.1	2.6	0.1	2
Giardia	4.1	77.8	3.6	71
Gonorrhea	111.2	2,115.2	79.2	1,573
Haemophilus Influenza (Invasive)	0.6	11.6	0.8	15
Hemolytic Uremic Syndrome (HUS)	0.1	1	0.1	1
Hepatitis A	0.5	8.8	0.5	9
Hepatitis B (Acute)	1.6	31.4	1.5	29
Hepatitis C (Acute)	0.3	5.2	0.1	1
Hepatitis D	0.0	0	0.0	0
HIV	15.7	299.4	12.3	245
Influenza***	63.1	1,248.8	278.4	5,548
Invasive Group A Strep.##	0.7	13	0.2	4
Invasive Strep. Pneumoniae#	1.7	2.4	0.0	0
Legionellosis	0.6	11.4	0.5	9
Leprosy (Hansen's Disease)	0.0	0.6	0.0	0
Leptospirosis	0.0	0.2	0.0	0
Listeriosis	0.0	3	0.0	2
Lyme Disease	0.2	3.4	0.1	4
Malaria	0.2	1.8	0.2	0
Maarla	0.1	1.2	0.0	1
	3.0	57	1.9	38
Meningitis, Aseptic/Viral Meningitis, Bacterial	0.8	14.4	0.4	8
Meningoroccal Disease	0.8	4	0.4	2
	0.2			4
Mumps Pertussis	1.0	9.6 18.8	0.2	9
Q Fever	0.1	10.0	0.5	2
	0.0	0	0.0	0
Relapsing Fever		0.2		0
Rocky Mountain Spotted Fever	0.0 19.1	356.8	0.0 5.5	109
Rotavirus				
RSV (Respiratory Syncytial Virus)	69.2	1,307.4	61.7	1,225
	0.0	0.2	0.0	0
Salmonellosis	8.8	169	8.4	166
Shiga-Toxin Producing E. coli**	0.8	14.6	0.7	14
Shigellosis	5.6	109	3.4	68
Streptococcus Pneumoniae (drug-resistant, invasive)#	1.6	30	1.7	34
Syphilis (Early Latent)	6.4	124.6	6.9	138
Syphilis (Primary and Secondary)	5.1	97.8	4.3	85
Toxic Shock Syndrome	0.1	1.2	0.1	1
Toxic Shock Syndrome (Streptococcal)	0.1	2.6	0.0	0
	4.7	90	4.4	87
Typhoid Fever	0.0	0	0.0	0
Unusual Illness	0.1	2.6	0.0	0
Vibrio (Non-Cholera)	0.1	2.4	0.2	4
West Nile Virus (Encephalitis)	0.2	4.8	0.3	6
West Nile Virus (Fever)	0.1	2	0.2	4
Yersiniosis	0.1	2.8	0.1	2

*Rates are cases per 100,000 population per month or per year. Annual rates are aggregations of monthly rates. County population monthly estimates obtained via linear spline estimation. Reported cases include confirmed, probable and suspect (since Feb. 2008) status. HIV/AIDS and tuberculosis case counts provided by other health district programs. #Reported since Sept. 2005. Children <5 years with S. pneumo invasive disease are reported under Invasive S. pneumo if not drug resistant. Rates computed using population <5 years as denominator. #Reported since March 2007. **E. Coli 015:H7 instead of STEC was reported prior to 2006. ***Novel type A influenza (H1N1) added since May 2009.


In 2009, epidemiology staff documented 536 complaints and identified 30 incidents through the foodborne illness notification system.

Influenza Surveillance

This program tracks the spread of influenza in the community throughout the year, providing insight into a disease that significantly impacts individual health and the medical system each winter. In addition to tracking laboratory-confirmed cases, influenza activity and trends are tracked through sentinel sites and death certificate surveillance. This data is forwarded to the CDC for regional and national statistics of influenza. Although this program is ongoing, the 2009 H1N1 pandemic placed new emphasis on influenza surveillance, and the program was expanded to evaluate school absenteeism and local laboratory testing as well as traditional sources of data.

Childhood Lead Surveillance

Staff conducts surveillance of pediatric blood lead levels, and works with Clinic & Nursing Services and Environmental Health staff to identify and manage lead poisoning among children.

During 2009, staff received 14,821 reports for children under the age of 18 years, of which 18 percent showed an exposure to lead.

Injury Surveillance

Data collected by the Injury Surveillance Program works to enhance the understanding of the risk factors and causes of 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.

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 2009, staff responded to more than 16 incidents, 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 that allows providers to choose how they prefer to receive critical information. The office also provides information to the public and health care providers through newsletters, notices and alerts.

In 2009, 78 alerts, technical bulletins and newsletters were distributed, reaching 122,183 health care providers.

Health Data Analysis and Reporting

The Office of Epidemiology collects local health data from public health partners to monitor and measure both communicable and chronic diseases/conditions among county residents. Statistics on notifiable diseases and conditions are compiled and distributed monthly to partners and the public.

Health Status Reports

The series of *Clark County Health Status Reports* consolidates available local and national data from various sources to provide data and observations on the occurrence, prevalence, patterns and trends of selected measures of health and well-being of county residents. The first report was released in 2007, and the most recent *Clark County Health Status Report 2007 Supplement, Volume II* was released in January 2009. The reports provide practical information that can support informed decisions, actions and planning aimed at improving the health of our population. In addition to providing the standard reports, the office responds to requests for information and data analysis from community partners and residents.

2009 H1N1 INFLUENZA DOMINATES MORE THAN A FLU SEASON

Once the 2009 H1N1 influenza virus made international news in the spring of 2009, it was "game on" for public health agencies throughout the country to respond once vaccine became available in October. Due to the public's high demand for the vaccine, the CDC responded by identifying priority groups at highest risk for complications to be targeted for vaccination. These groups included: pregnant women, emergency responders and health care professionals, household contacts and caregivers of newborns, young people 6 months-24 years and adults 25-64 years with health conditions.

As soon as vaccine was received, the health district responded immediately by holding daily and weekend vaccination clinics. At year's end, the health district had administered 48,919 doses of FluMist® and 51,350 injectable doses to those who were unable to receive the inhaled vaccine. In order to meet the high demand, the health district called upon Medical Reserve Corps volunteers, the pool of health district volunteers, and contracted for additional medical staff and nurses to assist.

Much of the funding to distribute vaccine was covered by federal grants. At year's end, the health district expended \$766,443 for health district staff time, which totaled 37,796 hours for the H1N1 response. Contracted medical staff logged 9,622 hours, Medical Reserve Corps volunteers logged 610 hours, which equates to \$25,217 in "donated" wages (based on the U.S. average medical salary of \$41.34), and health district volunteers logged 345 hours.



Public Health Preparedness

The Office of Public Health Preparedness (OPHP) works with other health district programs to prepare for and respond to the consequences of manmade 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, which includes the CDC. Funds are intended to upgrade local public health jurisdictions' preparedness and response to bioterrorism, outbreaks of infectious diseases, and other public health threats and emergencies. The grants include:

- **Public Health Emergency Preparedness (PHEP)** Provides for the development of incident management, internal communication, crisis and emergency risk communication, exercise design, testing and improvement of health district plans, as well as funding for increased laboratory capabilities for the Southern Nevada Public Health Laboratory.
- Cities Readiness Initiative (CRI) A CDC-sponsored program that enables cities to
 provide preventive medications to their entire populations within 48 hours of a public health
 emergency. In 2009, the health district's Mass Prophylaxis Plan was updated, enabling the
 health district's ability to respond more efficiently to an event requiring medication dispensing
 such as H1N1. 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 community and other local businesses to develop a project to
 provide medications to their staff, families and visitors during an emergency.

- Assistant Secretary for Preparedness and Response (ASPR) – Helps health care systems prepare for and respond to public health emergencies. Program priorities include interoperable communication systems, hospital bed tracking, personnel and volunteer management, fatality management planning and hospital evacuation planning.
- **Public Health Emergency Response** A three-phased grant to plan, prepare and administer H1N1 vaccine to Clark County residents.

PLANNING

OPHP planning staff works with local and federal emergency agencies to plan, evaluate and participate in full scale and table top exercises. In 2009, the health district participated in the National Level Exercise 2010 and the North Las Vegas Earthquake and Hazmat exercise. Staff also provided input to the Statewide Mass Evacuation and Shelter plan, which included medical/special needs shelters.

Additionally, staff trained businesses for H1N1 vaccine distribution and continuity of operations during the 2009 H1N1 pandemic.

In the spring of 2009, the State of Nevada received its allocation of antiviral and personal protective equipment countermeasures from the federal stockpiles at the Southern Nevada Receiving, Staging and Storage (RSS) location. Health district staff assisted the Nevada State Health Division with inventory management, helped repackage the material for distribution to 14 hospitals, and escorted the antiviral deliveries to ensure the proper chain-of-custody procedure was followed. The Las Vegas Metropolitan Police Department worked with the health district to provide security escorts from the RSS to the hospitals in accordance with the district's transportation plan.



FEDERAL DIRECTIVES

- Southern Nevada Health District Emergency Operations Plan
- Southern Nevada Health District Continuity of Operations Plan
- Automated Detection System Annex in collaboration with the United States Postal Service
- Cities Readiness Initiative Mass
 Prophylaxis Annex
- H1N1 Operations Manual
- Highly Infectious Respiratory Disease
 Annex
- Isolation and Quarantine Annex
- Mass Vaccination Annex
- Pandemic Influenza Annex
- Public Health Annex to the Clark County Emergency Operations Plan
- Respiratory Protection Annex
- Shelter In Place Annex

The directives, created and annually updated by the Office of Public Health Preparedness, are integrated into current response plans. Exercises are held to test the plans to assure staff, residents and visitors that they are operational and effective. Additionally, plans are implemented and evaluated during real world events.



TRAINING

The OPHP training staff provides educational opportunities in public health preparedness to health district staff, community partners and health care professionals. Staff participates in health and wellness fairs, and distributes materials on topics such as hand washing, flu prevention, emergency preparedness, and pet preparedness in English and Spanish, as well as in Braille and audio tapes for the blind. Trainers also make educational presentations to numerous agencies and businesses throughout the valley.

Staff has ensured 99 percent of health district personnel are trained in the Incident Command System in accordance with the National Incident Management System, the nationally recognized system of disaster management. Trainers provided Point of Dispensing (POD) just-in-time training and refresher courses prior to POD openings during the 2009 H1N1 pandemic.

Staff provide access to the ReadyRN program, an online course for nurses in emergency and disaster preparedness. Additionally, staff has developed a course on the Medical Consequences of an Act of Terrorism that is required by the State of Nevada for nursing license renewal. Staff has presented this course to more than 2,000 health care professionals in Las Vegas.

PUBLIC HEALTH PREPAREDNESS NURSE

The Public Health Preparedness Nurse administers programs designed to protect the health of staff if called to support disaster services. Programs include providing immunizations to employees and Medical Reserve Corps volunteers, annually fit-testing employees and Medical Reserve Corps volunteers with respirators through a respiratory protection program and providing bloodborne pathogen training.

To date, 510 of 514 employees have been screened through the health district's respiratory protection program.

MEDICAL RESERVE CORPS

The Medical Reserve Corps of Southern Nevada (MRC) is sponsored by the Office of the U.S. Surgeon General with the mission to improve the health and safety of communities across the country by organizing and utilizing public health, medical and other volunteers. The local MRC supports this national mission and is housed in the Office of Public Health Preparedness. The local unit consists of 312 registered volunteers.

In 2009, MRC volunteers augmented health district staff in greeting and screening clients and administering vaccine in H1N1 clinics. In December, MRC mental health and veterinary volunteers assisted the American Red Cross following a large apartment fire. Volunteers regularly meet the Surgeon General's Priorities for Public Health by promoting public health and emergency preparedness for families and pets, as well as providing weight and blood pressure screenings and first aid support, at community and sporting events.

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 designated as a 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 health hazards.

The laboratory is licensed by the State of Nevada to perform moderate and high complexity clinical testing and is registered with the Laboratory Response Network (LRN), which aids laboratories in preparing and responding to acts of bioterrorism. In addition to performing LRN analyses for bioterrorism agents, staff provides ongoing training activities and coordination with local first responders regarding the collection of samples for testing of suspected biological agents. Additional training is provided to local laboratorians regarding isolation and reporting of pathogenic biological agents.

The laboratory maintains an in-house courier system for transporting reportable disease isolates from local laboratories and clinics. The system provided over 5,800 courier services in 2009, an increase of 10 percent from 2008.

In 2009, the health district transferred its clinical testing to the laboratory. As a result, staff performed more than 25,000 HIV and sexually transmitted disease analyses last year.

The reportable disease isolates received at SNPHL are further characterized with additional testing such as serotyping and Pulsed Field Gel Electrophoresis (PFGE). Results are then reported to the CDC.

In 2009, staff analyzed and reported over 400 isolates and participated in more than 100 epidemiological investigations or consultations. SNPHL added the capacity to perform PFGE testing for Salmonella, Shigella, and E. coli O157, which enhanced its ability to identify the start of a foodborne disease outbreak.

The laboratory was the first in Southern Nevada to receive approval from CDC to perform molecular Influenza A H1N1 testing. Staff performed over 4,000 influenza analyses since April 2009. To further enhance an understanding of the circulating strain of influenza virus in Clark County, staff established a year-round enhanced pediatric influenza surveillance program.



environmental health





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.



CHILD CARE AND NURSERY FACILITIES

The 505 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: 949
- Complaint-driven inspections: 50
- Child care plan reviews, preliminary, status checks, letters, revised plans: 35
- Child care site inspections under construction: 62
- Existing facility equipment and construction evaluations: 0
- New child care permits issued or amended (includes change of ownership): 81

FOOD AND BEVERAGE ESTABLISHMENTS

Environmental health specialists inspect the county's approximate 16,840 permitted food establishments a minimum of once a year as required by state law.

- Routine inspections: 24,504
- Special event inspections: 3,740
- Complaint-driven inspections: 1,518
- Mobile vendor inspections: 610

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: 1,751
- Food establishment site visits under construction: 3,581
- Existing facility equipment and construction evaluations: 988
- New food establishment permits issued or amended (includes change of ownership): 2,857



INSTITUTIONS

The Institutional Inspection Program inspects more than 464 permitted facilities, which include public, private and charter schools, local correctional facilities, summer camps and children's homes.

- Routine school inspections: 886
- Complaint-driven inspections: 23
- School plan reviews, preliminary, status checks, letters, revised plans: 29
- School site inspections under construction: 52
- Existing facility equipment and construction evaluations: 2
- New school permits issued or amended: 32
- Routine correctional facility inspections: 9
- Correctional facility plan reviews, preliminary, status checks, letters, revised plans: 1
- Site inspections under construction: 2
- New correctional facility permits issued or amended: 1
- Routine summer camps and children's home inspections: 13

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 2009, there were 363 permitted hotels and motels in Clark County, with a total of 167,684 rental rooms. Additionally, there were 157 permitted mobile home and RV parks with a total of 23,868 rental spaces.

- Routine hotel and motel inspections: 361
- Complaint-driven inspections: 291
- Public accommodation facility plan reviews, preliminary, status checks, letters, revised plans: 16
- Public accommodation site inspections under construction: 38
- Existing facility equipment and construction evaluations: 22
- New public accommodation facility permits issued or amended (includes change of ownership): 39
- Routine mobile home and RV park inspections: 159

PUBLIC BATHING PLACES

State law requires the 3,536 public swimming pools and spas located at public parks, apartment complexes, hotels, RV parks, homeowner's associations and sports complexes be inspected annually to ensure proper operation.

- Routine pool and spa inspections: 4,431
- Complaint-driven inspections: 252

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: 1,093
- Public bathing site inspections under construction: 1,042
- Existing facility equipment and construction evaluations: 140
- New public bathing facility permits issued or amended (includes change of ownership): 377

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 onsite wastewater system plan reviews, permitting and inspections for these systems.

- Parcel maps reviewed: 39
- Septic systems permitted: 98
- Loan certificates issued: 65
- Liquid waste pumping/hauling companies permitted: 40
- Pumping/hauling trucks permitted: 129

INDIVIDUAL SEWAGE DISPOSAL SYSTEM REGULATIONS UPDATED

In February 2009, the Southern Nevada District Board of Health approved revised Regulations Governing Individual Sewage Disposal Systems and Liquid Waste Management. Individual sewage disposal systems (ISDS), commonly known as septic tank systems, provide sewer collection and treatment in areas where public sewers are not available.

The revised regulations offer a "user friendly" way to understand septic systems by including additional information that was not shown in the previous regulations. Subjects such as tenant improvements, chamber system leach fields, subsurface drip disposal systems, and mound systems are now clearly defined, and other concepts such as dosing tanks, sand layer, and nitrogen removal systems are explained.

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- Access NCIAA compliant 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 zoonotic disease report.
- Learn more about the Virginia Graeme Baker Pool & Spa Safety Act.
- Learn more about starting a home-based food business.
- Find out what you can recycle and where to take it.

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, followup on rejected load reports and issue waste asbestos transport permits.

Permitted disposal facilities in Clark County:

- Landfills: 9, with 1 application
- Transfer stations: 6, with 1 application
- Public waste storage bin facilities: 3, with 1 application
- Material recovery facilities: 8, with 1 application
- Recycling centers: 22, with 7 applications
- Waste tire management facilities: 1, with 1 application
- Waste tire haulers: 1
- Compost facilities: 1
- Construction and demolition waste short-term storage facilities: 1, with 1 application
- Waste asbestos transportation permits issued: 357
- Rejected load reports: 382
- Business license applications: 342
- Temporary Solid Waste Disposal Site Permits: 2, with 5 applications

TATTOO, PERMANENT MAKEUP AND BODY PIERCING

Health district regulations, which were updated in 2009, 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. Revised regulations allow shops using singleuse equipment to operate without an autoclave and set the minimum age to receive a tattoo to 14 years old.

In 2009, 185 establishments were licensed in Clark County.

- Tattoo, permanent make-up and body piercing establishment inspections: 378
- Temporary artist applications and inspections: 498

UNDERGROUND STORAGE TANKS

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

- Active UST facilities in Clark County: 801
- Number of compliance inspections conducted: 811
- New USTs and status changes: 12 new, 34 changes of ownership
- Permanent closures: 15
- Plan reviews: 59
- Final inspections conducted: 108
- Facilities reported to NDEP for formal enforcement: 6
- Closure inspections and site assessments: 15
- Contaminated sites: 7

USED MATTRESSES, BEDDING AND UPHOLSTERED FURNITURE

In October 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: 9





Childhood Lead Poisoning Prevention Program

The CDC grant funded Childhood Lead Poisoning Prevention Program (CLPPP) is administered through the Environmental Health Division with significant contributions from staff in Clinic & Nursing Services and the Office of Epidemiology. The CLPPP 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: 10,905
- Elevated blood lead level investigations: 8

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: 1,788
- Cases presented to the hearing officer for adjudication: 266
- Penalties assessed for illegal dumping by the hearing officer: \$509,430

2009 Recycling Repo

	(Qualities in	eported in the numb	,
RECYCLED MUNICIPAL SOLID WASTE (MSW)	2009	2008	% Change
PAPER Corrugated cardboard, newspaper, office paper, magazines, telephone books, mixed paper, other paper	161,551.06	177,187.58	-8.82%
METALS Aluminum containers, tin/steel containers, ferrous scrap metals, non-ferrous scrap metals, appliances (white goods), mixed metal	206,395.76	295,860.64	-30.24%
PLASTIC Plastic (PET), plastic (HDPE), mixed plastic, plastic film, polystyrene, other (PVC, LDPE, PP)	16,620.05	20,762.50	-19.95%
GLASS Clear, green, amber/brown, mixed glass, other glass	5,556.70	3,258.51	70.53%
ORGANIC MATERIAL Yard debris, food waste, biosolids, restaurant grease, rendered animal matter, pallets/wood	55,012.73	69,720.05	-21.09%
SPECIAL WASTE Used tires, paint, fluoresent bulbs, lamp ballasts, mercury devices and waste, household hazardous waste	3,729.27	4,098.48	-9.01%
TEXTILES Textiles, carpet/carpet pad	2,853.42	1,825.87	56.28%
OTHER RECYCLED MSW Toner cartridges, cell phones, filters, transformers and electrical equipment, computer e-waste	1,225.12	994.68	23.17%
TOTAL RECYCLED MSW	452,944.10	573,708.31	-21.05%
CONSTRUCTION & DEMOLITION DEBRIS (C & D) Asphalt, concrete, carpet, carpet padding, drywall, wood, plastic buckets	791.26	17,287.20	-95%
RECYCLED MSW AND C & D GRAND TOTAL	453,735.36	590,995.52	
Total MSW disposed of in the municipality: *	2,181,722	2,449,878	-11%
Total MSW generated in municipality: **	2,634,666	3,023,586	

* 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.

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: 79

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: 233
- Maps approved: 91
- Units/lots approved: 5,298

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: 287

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.

- Responses to citizen generated complaints of stagnant swimming pools: 2,547
- Routinely treated natural mosquito breeding areas: 101
- Mosquitoes submitted for WNv, WEE, STE analysis: 18,255; 256 positive for WNv
- Bird samples submitted WNv, WEE, STE analysis: 16; 0 positive
- Animal samples submitted for rabies analysis: 143; 2 bats positive
- Rodent samples submitted for hantavirus analysis: 29; 0 positive
- Rodent samples submitted for plague analysis: 62; 0 positive
- Flea samples submitted for plague analysis: 18; 0 positive



THE HARDEST WORKING FISH IN THE VALLEY

As part of the West Nile virus control program, staff responds to citizen complaints of stagnant residential swimming pools. Fueled by the dramatic increase in abandoned homes, pool complaint responses grew by 172 percent in three short years.

These stagnant bodies of water are immediately treated with chemicals to prevent mosquito breeding, however the chemicals are expensive and non-renewable. With that in mind, staff sought out a more cost efficient and sustainable way to control mosquito breeding and turned to the little *Gambusia affinis*, or mosquito fish, for help.

Mosquito fish are the most commonly used and most effective biological control agents for mosquitoes in the world. They are well suited for this work as they target food near the surface of the water, like mosquito larvae, and breed live so they populate an area quickly. Years ago these fish were introduced into the Las Vegas wash channels to control mosquitoes and are now abundant.

Last year, staff started using these fish as long term control treatments in neglected swimming pools. Staff traps fish from the wash channels, transports them to holding pens at the health district and then places them in abandoned pools.

The fish have been extremely successful in managing mosquito larvae and reducing the program's dependence on chemical control. Additionally, chemical costs have been reduced by as much as 36 percent, or \$25,000.

Waste Management Audits

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

• Waste management audits: 2,877



public health in action

PUBLIC HEALTH DEALS

WITH THE HEALTH

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DISEASE RATHER

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AND ITS FOCUS

ON POPULATIONS

AND COMMUNITIES,

RATHER THAN THE

INDIVIDUAL PATIENT.

—Harvard Public Health Review, 2000, "Future of 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.
- 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.
- 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 Hero Awards are presented during National Public Health Week to honor individuals whose extraordinary contributions help to protect and promote health in community. Heroes are nominated by staff for their efforts in supporting one or more of the 10 Essential Public Health Services.

PUBLIC HEALTH FLIGHT/99TH AEROSPACE MEDICINE SQUADRON/NELLIS AIR FORCE BASE

The Public Health Flight/99th Aerospace Medicine Squadron has contributed significantly to the health of Southern Nevadans as it continues to work closely with the health district to investigate and control outbreaks. In 2008, Public Health Flight tested, counseled and managed more than 2,500 active duty service members, their families and retirees during the hepatitis C outbreak. Its team members have assisted the health district during large-scale illness outbreaks like the 2004 casino norovirus outbreak, and assisted the health district in giving flu shots during large immunization clinics.

QUEST DIAGNOSTICS LABORATORIES-LAS VEGAS

Quest Diagnostics Laboratories–Las Vegas is recognized for its continued assistance and partnership with the health district during routine disease surveillance or an outbreak investigation. Quest assists the health district in producing an annual report that helps determine antibiotic resistance patterns, and it is the only Southern Nevada laboratory that provides reportable test results electronically on a daily basis. In 2008, Quest partnered with the health district during its response to the hepatitis C investigation by putting together a team to create customized testing panels to assist patients and ensure efficient testing. Quest also provided statistics on the number of HIV and hepatitis tests performed during the three month period following the hepatitis C outbreak announcement, allowing the district to assess the magnitude of testing in the community.

RUBEN SAAVEDRA, MD

Dr. Saavedra, medical director of the Community Outreach Medical Center, has worked with the health district for many years. In 2008, he provided assistance to the Office of HIV/AIDS to help manage the ongoing syphilis outbreak. In addition, he has worked with health district staff to provide HIV and syphilis testing, referrals and discharge planning within the Clark County Detention Center, City of Las Vegas and North Vegas jails to ensure that patients with HIV and STDs receive appropriate counseling, treatment and follow up. Additionally, Dr. Saavedra serves as the medical provider for the health district's new Refugee Program, which helps promote the health of recent refugees and protects the community from potentially infectious diseases.





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Telephone Directory

GENERAL INFORMATION

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

ADMINISTRATION

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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	759-0846
Vital Records	759-1010

CLINIC & NURSING SERVICES

Administrative Office	759-1301
East Las Vegas Clinic	. 759-0900
Henderson Clinic	759-1040
HIV/AIDS Clinic	759-0702
Immunization Program	759-0850
Laboratory	759-1317
Mesquite Clinic	759-1682
Perinatal Hepatitis B	. 759-0858
STD Clinic	759-0708
TB Treatment & Control	759-1369
Workplace Vaccination Program	759-0878

COMMUNITY HEALTH

Administrative Office	759-1364
Chronic Disease Prevention & Health Promotion	759-1270
Emergency Medical Services & Trauma System	759-1050
Epidemiology	759-1300
Public Health Preparedness	759-1342
Southern Nevada Public Health Laboratory	759-1020

ENVIRONMENTAL HEALTH

Administrative Office	759-0588
East Las Vegas	759-0620
Engineering	759-0661
Henderson	759-0501
Information and Complaints	759-0588
Mesquite	759-1682
Plan Review	759-1258
Septic Tanks	759-0660
Solid Waste Management	759-0600
Spring Valley	759-0503
Subdivisions	759-0661
Swimming Pools	759-0571
Tattoo/Body Piercing	759-0677
UST Program	759-0603
Water Systems	759-0677



Locations



CAMBRIDGE COMMUNITY OUTREACH CENTER 3900 Cambridge St., Ste. 104 General Information 732-1781



EAST LAS VEGAS PUBLIC HEALTH CENTER 560 Nellis Blvd., Ste. E-12 Nursing 759-0900 Environmental Health 759-0620



HENDERSON PUBLIC HEALTH CENTER 520 E. Lake Mead Pkwy. Nursing 759-1040 Environmental Health 759-0501



MESQUITE PUBLIC HEALTH CENTER 830 Hafen Ln. General Information 759-1682



SPRING VALLEY PUBLIC HEALTH CENTER 6330 Spring Mountain Rd., Ste. C General Information 759-0503



RAVENHOLT PUBLIC HEALTH CENTER 625 Shadow Ln. General Information 759-1000



2009 Southern Nevada District Board of Health

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

John Middaugh, MD, Director of Community Health; Glenn Savage, Director of Environmental Health; Bonnie Sorenson, Director of Clinic & Nursing Services; Scott Weiss, Director of Administration

P.O. Box 3902, Las Vegas, NV 89127 | 702.759.1000 | www.SNHD.info