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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.

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

OFFICERS: Chair Linda Strickland, Boulder City Councilwoman; Vice Chair Tim Jones, Business/Industry Member at Large; Secretary Jimmy Vigilante, Environmental Specialist Member at Large

BOARD MEMBERS: Stavros Anthony, Las Vegas City Councilman; Kathleen Boutin, Henderson City Councilwoman; Jim Christensen, MD; Physician Member at Large; Robert Eliason, North Las Vegas City Councilman; Chris Giunchigliani, Clark County Commissioner; Nancy Menzel, Registered Nurse Member at Large; John Onyema, MD, CPE, Physician Member at Large; Mary Beth Scow, Clark County Commissioner; Lois Tarkanian, Las Vegas City Councilwoman.

ALTERNATES: Kam Brian, Business/Industry Member at Large; Travis Chandler, Boulder City Councilman; Michael Collins, RN, Registered Nurse Member at Large; Susan Crowley, Environmental Member at Large; Karl Gustaveson, Mesquite City Councilman; Joe Hardy, MD, Physician Member at Large; Debra March, Henderson City Councilwoman; Frank Nemec, MD, Physician Member at Large; Steven Ross, Las Vegas City Councilman; Lawrence Weekly, Clark County Commissioner; Anita Wood, North Las Vegas City Councilwoman.
IN 2010, THE HEALTH DISTRICT CONTINUED TO OFFER SERVICES AT FULL SPEED—WHILE RESPONDING TO AN INTERNATIONAL FLU PANDEMIC, CLINIC CLOSURES AND OPENINGS, THE INTRODUCTION OF NEW FOOD REGULATIONS AND THE ONGOING NATIONAL RECESSION.

By the time we rang in the New Year, we were in the throes of the 2009 H1N1 influenza response. At the end of it all, the health district administered approximately 154,000 vaccines to community members.

Ironically, at the time we were preparing our reduced budgets, the Tobacco Control Program received a two-year $14.6 million grant to build upon our highly successful tobacco control programs while distributing more than 84 percent of the funding to partner agencies. Additionally, we were awarded a two-year $3.8 million grant for obesity prevention, which supports activities in afterschool programs, childcare centers and worksites. Both grants are part of the national initiative, Communities Putting Prevention to Work.

This past year the district was able to expand services to reach more of our rural constituents. We opened the doors to our new Mesquite clinic to offer environmental health services, immunizations and health card processing. We moved health card services in Laughlin to the space next to our environmental health office.

Just as things were settling down after the H1N1 response, the district was hit with another challenge—the closure of the North Las Vegas Public Health Center and the subsequent need to relocate staff and services, including the tuberculosis clinic. Our multi-talented facilities team rose to the occasion by moving the equipment and supplies from one location to another, and converting their own workshop into a new TB clinic.

In 2010, we also made substantial progress to ensure greater food safety by introducing our new food regulations and providing more comprehensive guidelines. Environmental Health staff trained more than 10,000 food handlers in less than three months—quite an undertaking! Additionally, we unveiled a new online feature to search food establishment inspections, one of the most requested public records maintained by the district.

Over the last two years, the health district has experienced a 30 percent decrease in property tax revenue, as well as cuts in state funding. Our agency worked diligently to be fiscally responsible, and in anticipation of revenue shortfalls, we implemented a voluntary furlough program, left vacant positions unfilled and initiated several cost-containment
measures, such as reductions in annual print costs, annual cell phone charges, annual lease expenses and interpreter services.

A sluggish economy and budget cuts didn’t stop employees from giving back to the community. In February, we offered the first-ever district-sponsored volunteer activity for staff. Fifty health district employees spent several hours at Three Square, a local food bank. What an awesome experience to work side-by-side to sort and package food and toiletry items for less fortunate families. Additionally, staff participated in onsite food and toy drives.

As the public health authority for our unique and high-profile community, we are challenged to meet the ever-evolving public health needs of both residents and visitors, as well as to anticipate the gaps in service that may result from the economic downfall. We remain committed to seeking out innovative solutions to respond to a greater demand for our essential services in an era of shrinking resources.

Top right: Dr. Sands speaks during a press conference announcing the Communities Putting Prevention to Work grant. Below: With staff at the Cambridge Community Outreach Center during National Public Health Week.
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 2010, 450 volunteers provided about 19,400 hours of service, which equates to more than $400,000 in paid labor. As part of their service, volunteers placed 5,743 confirmation calls to family planning clients and provided educational information to 6,390 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 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 participants with accurate information they can use to make informed choices about their health care.

In 2010, Salud en Acción volunteers assisted 567 Medicare/Medicaid beneficiaries and attended eight outreach events in the community.
Finance

The health district’s fiscal year 2011 budgeted revenue consists of:

- 47 percent regulatory revenues and fees,
- 29 percent Clark County property tax revenue allocation,
- 23 percent federal grants distributed by the State, and
- 1 percent State’s general fund.

Clark County’s fiscal year 2011 budgeted allocation of $21,351,437 represents a decrease of 14 percent from fiscal year 2010. 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, massage therapists and health club attendants receive a three-year health card; all others must be renewed every two years.

In 2010, 119,890 health cards were issued.

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 2010, staff registered 27,085 birth records and 13,873 death certificates.
FINANCIAL STATUS (2008-2011)

REVENUE

<table>
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<tr>
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<th>Actual 2008-2009</th>
<th>Actual 2009-2010</th>
<th>Budgeted 2010-2011</th>
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</thead>
<tbody>
<tr>
<td>Federal Funds (distributed by State)</td>
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<td>Federal Grants</td>
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<td>Program Contract Services</td>
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<td>24,942,525</td>
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<td>Donations</td>
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<td>General Receipts</td>
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<td>Interest</td>
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<td><strong>Total Revenue</strong></td>
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<td><strong>Total Capital Improvements</strong></td>
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EXPENDITURES

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<tr>
<td>Clinics &amp; Nursing Services</td>
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<td>Environmental Health</td>
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<td>Administration</td>
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<td><strong>Total Expenditures</strong></td>
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<td><strong>$64,393,766</strong></td>
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<td><strong>Total Capital Improvements</strong></td>
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ENDING FUND BALANCE

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<th>Actual 2008-2009</th>
<th>Actual 2009-2010</th>
<th>Budgeted 2010-2011</th>
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<td>General Fund</td>
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<td>Capital Improvements Fund</td>
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At a Glance: Revenue and Expenditures (2006-2011)
& Nursing Services Division provides services to more than 340,000 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, the Nurse Family Partnership Program, and the 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 2010, 13 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 2010, staff performed 3,356 examinations and 2,213 home visits. Additionally, the Special Projects team performed dental assessments and fluoride varnish application to 1,884 children at various elementary schools.

**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 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 2010, the program enrolled 108 clients.
REFUGEE HEALTH PROGRAM

The 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.

In 2010, staff screened 484 refugees. A total of 109 clients required follow-up for possible communicable disease: 72 for tuberculosis; 13 for hepatitis B; 10 for ova and parasites; and 15 for sexually transmitted disease. (Note: Some clients may have been referred for more than one disease.)

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.

Staff provides education, information, contraception, pregnancy testing and counseling to residents.

In 2010, the clinic and its delegate agencies served 16,017 clients. Of these, 9,617 were served by health district staff and the remaining 6,400 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.

WOMEN’S HEALTH CONNECTION

Family planning clinics are service providers for 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 2010, staff served 728 clients for 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 2010, 247 unduplicated clients were served.

**HIV/AIDS SURVEILLANCE**

Over the past 28 years in Clark County, 3,640 people have been diagnosed with HIV and 4,505 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.

**HIV TESTING AND COUNSELING**

In 2010, staff administered 20,612 HIV tests, of which 265 were positive. Of the tests administered, 6,196 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.

**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 2010, case management staff made 8,712 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 2010, 1,580 cases of gonorrhea and 7,642 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 15 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 2010, staff administered 1,336 HIV tests, of which two 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. 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 2010, 128 primary and secondary syphilis cases, 180 early latent syphilis cases and 5 congenital syphilis cases were reported in Clark County.

<table>
<thead>
<tr>
<th>Gay &amp; Lesbian Center</th>
<th>HIV tests</th>
<th>877</th>
<th>Positive</th>
<th>52</th>
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</thead>
<tbody>
<tr>
<td>Syphilis tests</td>
<td>1,891</td>
<td>Positive</td>
<td>75</td>
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<tr>
<td>Chlamydia tests</td>
<td>1,964</td>
<td>Positive</td>
<td>113</td>
<td></td>
</tr>
<tr>
<td>Gonorrhea tests</td>
<td>1,964</td>
<td>Positive</td>
<td>13</td>
<td></td>
</tr>
<tr>
<td>Twinrix vaccines given</td>
<td>420</td>
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<tr>
<td>Influenza vaccines given</td>
<td>94</td>
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<tr>
<td>Chlamydia tests</td>
<td>1,311</td>
<td>Positive</td>
<td>186</td>
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<tr>
<td>Gonorrhea tests</td>
<td>1,311</td>
<td>Positive</td>
<td>122</td>
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<tr>
<td>Number of encounters with HIV/AIDS clients seen by discharge planning</td>
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<table>
<thead>
<tr>
<th>Clark County Detention Center</th>
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<td>Syphilis tests</td>
<td>485</td>
<td>Positive</td>
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<tr>
<td>Number of encounters with HIV/AIDS clients seen by discharge planning</td>
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<table>
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<tr>
<th>City of Las Vegas Detention Center</th>
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<td>Syphilis tests</td>
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<td>Number of encounters with HIV/AIDS clients seen by discharge planning</td>
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<table>
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<th>Richard Steele Boxing Club &amp; Community Center</th>
<th>HIV tests</th>
<th>138</th>
<th>Positive</th>
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<td>Syphilis tests</td>
<td>69</td>
<td>Positive</td>
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<tr>
<td>Chlamydia tests</td>
<td>131</td>
<td>Positive</td>
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<tr>
<td>Gonorrhea tests</td>
<td>131</td>
<td>Positive</td>
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</table>
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 2010, staff administered a total of 278,033 immunizations to 174,825 clients.

ADOLESCENT IMMUNIZATION PROGRAM

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 2010, 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 2010, 2,557 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 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 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 in selected child care centers improved by 20 percent in 2010.

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 2010, staff administered 58,799 hepatitis A vaccines and 13,266 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 2010, staff provided case management services to approximately 313 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. There are 162 VFC Providers in Southern Nevada.

IN THE COMMUNITY

Staff partners with community organizations to provide immunizations, education and informational meetings as requested and needed. In 2010, staff participated in:

- 10 educational meetings
- 24 Shots 4 Tots clinics
- 17 Back to School clinics
- 44 flu clinics
- 2 Kindergarten Round Up clinics

As a result of outreach efforts, staff saw more than 4,000 clients and gave more than 6,000 vaccinations in 2010.
SHOTS 4 TOTS PROGRAM

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

Nursing Development/Community Outreach

This program offers nursing staff 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 2010, 130 educational opportunities were offered to 652 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 2010, approximately 80 students rotated through the Clinic & Nursing Services Division.

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 2010, clinic staff provided services to more than 19,037 unduplicated clients and laboratory staff processed 50,903 tests.

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 2010, there were 97 cases of active TB reported in Clark County. Of these cases, five clients are being treated for multi-drug resistant TB. A total of 58 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.

Additionally, staff presented 12 educational outreach programs to various agencies throughout the valley in 2010.
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 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 campaigns and worksite wellness tool kits. More than 6,000 individuals have registered for Walk Around Nevada since its inception in 2006.

HEALTHY SHOPPING TOOLS

Use these tools to help you make healthy choices while shopping.

- Watch a grocery store tour online.
- Attend a free Get Healthy grocery store tour given by a registered dietitian.
- Download a healthy shopping list.
- Download a healthy pantry list.
- Learn about reading food labels.

For details, go to www.GetHealthyClarkCounty.org
Nutrition

The program also advocates improved dietary choices through the Nutrition Challenge online program and social marketing campaigns. More than 3,300 people have registered for the Nutrition Challenge since its inception in 2006.

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 southern Nevada 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 2010, there were 42 submersion incidents and eight drowning deaths recorded among children 14 years and under. Seven of the drowning deaths involved children less than 4 years of age. These numbers are similar to 2009 totals and much lower than those prior to initiating the annual campaign in 2000.

The campaign has been conducted for the past 11 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.
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 and its community partners.

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 Clark County adults have declined from 30 percent to 22.9 percent and among Clark County youth rates have declined from 33 percent to 15.4 percent.

The Tobacco Control Program supports and develops community coalitions including the Nevada Tobacco Prevention Coalition and several others addressing the needs of local youth and special populations.

DISTRICT RECEIVES $18 MILLION IN GRANT FUNDS

In 2010, the Southern Nevada Health District became one of 11 agencies in the United States to receive U.S. Department of Health and Human Services (HHS) Communities Putting Prevention to Work grant funds to address both tobacco and obesity in Clark County. The two grants total $18.4 million. Grant activities focus on policy and environmental changes to reduce obesity, increase physical activity, improve nutrition and decrease smoking: four critical actions for combating chronic diseases and promoting healthier lifestyles.

“We credit the strength of our application to our strong community partnerships. Because of this collaboration, the collective effort resulted in a comprehensive and competitive proposal. More than 84 percent of the funding we receive will go to our partners to develop and implement programs, activities and jobs that are vital to launching a comprehensive community-based approach to preventing chronic diseases and helping people lead healthier lives,” said Dr. Lawrence Sands, chief health officer. The total amount distributed by HHS represents a one cent per day investment in funded communities – an investment designed to prevent chronic diseases and save our country money by reducing health care costs.
The Office of Emergency Medical Services & Trauma System provides medical direction and protocols for the county’s emergency response system. The EMS component of the trauma system is designed to provide initial assessment and management of 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 EMS office 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 EMS 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.

2010
EMS Certifications

CERTIFICATION STATUS

Applications received for certification via reciprocity 258
Applications received for certification via challenge 27
EMS training courses completed 52
New certifications issued 253
Renewal certifications issued 1,595
Total certifications issued 1,848

ACTIVE CERTIFICATIONS

First Responder 1
EMT-Basic 681
EMT-Intermediate 1,328
EMT-Paramedic 1,040

LICENSURE STATUS

New licenses issued 215
Renewal licenses issued 1,270
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 3
**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, 2010, 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; Troy Tuke, Clark County Fire Department; Larry Johnson, MedicWest Ambulance; Wilbert Townsend, Southern Nevada Injury Prevention Partnership; Leslie Johnstone, Health Services Coalition; Yvonne Smith-Hoch, Rehab Without Walls; Melissa Vaher; and Mary Ellen Britt, Regional Trauma Coordinator, Southern Nevada Health District.

Office of Emergency Medical Services & Trauma System
Manager Rory Chetelat affixes a bumper sticker on a health district vehicle after participating in a press conference kicking off the “Click It or Ticket” campaign to remind people to buckle up in the car.
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 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 2010, the Office of Epidemiology received 97,691 disease reports, 1,149 of which required further investigation by staff prior to reporting to the Nevada State Health Division. An additional 966 cases were reported that met the case definition, but did not require investigation.
In September 2010, the Office of Epidemiology deployed TriSanó®, an open source, citizen-focused surveillance and outbreak management system for infectious disease. The system will also be used to monitor environmental hazards and bioterrorism attacks, and will allow local, state and federal entities to track, control and prevent illness and death.

**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 are currently being developed for publication.

In addition, 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.

**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 2010, epidemiology staff documented 746 complaints and identified 37 incidents through the foodborne illness notification system.

**Respiratory Illness Surveillance**

This program tracks the spread of respiratory illnesses, including influenza, in the community throughout the year, providing insight into diseases that significantly impact individual health and the medical system each winter. In the spring of 2010, the Pediatric Early Warning Surveillance System was established with four local pediatric practices. The system is an expansion of health care provider-based surveillance system initiated in 2009 to track influenza in children, and now tracks 10 different viral respiratory pathogens.
## Clark County

### REPORTABLE DISEASE STATISTICS*

<table>
<thead>
<tr>
<th>Disease</th>
<th>2006-2010 Annual Rate</th>
<th>2010 Annual Rate</th>
<th>2006-2010 Annual Total</th>
<th>2010 Annual Total</th>
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<td>AIDS</td>
<td>11.10</td>
<td>6.75</td>
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<td>Amebiasis</td>
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<td>0.46</td>
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<td>Botulism-Intestinal (Infant)</td>
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<td>Brucellosis</td>
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<td>Campylobacteriosis</td>
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<td>5.17</td>
<td>111.8</td>
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<td>Chlamydia</td>
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<td>Encephalitis</td>
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<td>Giardia</td>
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<td>Gonorrhea</td>
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<td>Haemophilus Influenza (Invasive)</td>
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<tr>
<td>Hemolytic Uremic Syndrome (HUS)</td>
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<td>Hepatitis A</td>
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<td>Hepatitis B (Acute)</td>
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<tr>
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<td>HIV</td>
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<td>13.51</td>
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<td>Influenza***</td>
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<tr>
<td>Invasive Group A Strep.##</td>
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<td>Invasive Strep. Pneumoniae#</td>
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<tr>
<td>Legionellosis</td>
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<tr>
<td>Leprosy (Hansen’s Disease)</td>
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<td>0.00</td>
<td>0.6</td>
<td>0</td>
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<tr>
<td>Leptospirosis</td>
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<td>0.00</td>
<td>0.2</td>
<td>0</td>
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<tr>
<td>Listeriosis</td>
<td>0.17</td>
<td>0.05</td>
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<tr>
<td>Lyme Disease</td>
<td>0.19</td>
<td>0.10</td>
<td>3.8</td>
<td>2</td>
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<tr>
<td>Malaria</td>
<td>0.12</td>
<td>0.21</td>
<td>2.4</td>
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<tr>
<td>Measles</td>
<td>0.07</td>
<td>0.05</td>
<td>1.4</td>
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<tr>
<td>Meningitis, Aseptic/Viral</td>
<td>2.53</td>
<td>2.05</td>
<td>49</td>
<td>40</td>
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<tr>
<td>Meningitis, Bacterial</td>
<td>0.72</td>
<td>0.67</td>
<td>14</td>
<td>13</td>
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<tr>
<td>Meningococcal Disease</td>
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<td>4</td>
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<tr>
<td>Mumps</td>
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<td>0.00</td>
<td>9.4</td>
<td>0</td>
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<tr>
<td>Pertussis</td>
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<td>1.18</td>
<td>17.4</td>
<td>23</td>
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<td>Q Fever</td>
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<td>1</td>
<td>1</td>
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<tr>
<td>Relapsing Fever</td>
<td>0.00</td>
<td>0.00</td>
<td>0</td>
<td></td>
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<tr>
<td>Rocky Mountain Spotted Fever</td>
<td>0.01</td>
<td>0.00</td>
<td>0.2</td>
<td>0</td>
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<tr>
<td>Rotavirus</td>
<td>13.50</td>
<td>4.29</td>
<td>258</td>
<td>84</td>
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<tr>
<td>RSV (Respiratory Syncytial Virus)</td>
<td>63.32</td>
<td>56.82</td>
<td>1,220.4</td>
<td>1,111</td>
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<td>Rubella</td>
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<td>0.00</td>
<td>0.2</td>
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<tr>
<td>Salmonellosis</td>
<td>9.40</td>
<td>10.75</td>
<td>182.4</td>
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<td>Shiga-Toxin Producing E. Coli**</td>
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<td>17.8</td>
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<tr>
<td>Shigellosis</td>
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<tr>
<td>Streptococcus Pneumoniae (Drug Resistant, Invasive)#</td>
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<td>28.6</td>
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<tr>
<td>Syphilis (Early Latent)</td>
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<td>9.11</td>
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<tr>
<td>Syphilis (Primary &amp; Secondary)</td>
<td>5.34</td>
<td>6.56</td>
<td>103.2</td>
<td>128</td>
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<tr>
<td>Toxic Shock Syn</td>
<td>0.03</td>
<td>0.00</td>
<td>0.6</td>
<td></td>
</tr>
<tr>
<td>Toxic Shock Syn (Streptococcal)</td>
<td>0.14</td>
<td>0.10</td>
<td>2.6</td>
<td>2</td>
</tr>
<tr>
<td>Tuberculosis</td>
<td>4.71</td>
<td>4.96</td>
<td>91.4</td>
<td>97</td>
</tr>
<tr>
<td>Typhoid Fever</td>
<td>0.05</td>
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<td>1</td>
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<tr>
<td>Unusual Illness</td>
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<td>1</td>
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<tr>
<td>Vibrio (Non-Cholera)</td>
<td>0.12</td>
<td>0.05</td>
<td>2.4</td>
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<tr>
<td>West Nile Virus (Encephalitis)</td>
<td>0.19</td>
<td>0.00</td>
<td>3.8</td>
<td></td>
</tr>
<tr>
<td>West Nile Virus (Fever)</td>
<td>0.08</td>
<td>0.00</td>
<td>1.6</td>
<td></td>
</tr>
<tr>
<td>Yersiniosis</td>
<td>0.14</td>
<td>0.10</td>
<td>2.8</td>
<td></td>
</tr>
</tbody>
</table>

* 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 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 Jan. 18, 2011.

# Reported since September 2005. Children <5 years with S. pneu invasive disease are reported under Invasive S. pneu 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.
Injury Surveillance

Data collected by the Injury Surveillance Program works 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.

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 2010, staff responded to more than 42 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 2010, 52 alerts, technical bulletins and newsletters were distributed, reaching 56,533 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 and annually 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. Staff plans to release the next report in 2011.
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 (HHS), 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, performance 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 preventative 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 community 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. In 2010, the health district earned a score of 93 points out of 100 possible points during the annual Technical Assistance Review of its Mass Prophylaxis Annex.

• **Assistant Secretary for Preparedness and Response (ASPR)** – Helps health care systems develop plans, exercise plans and respond to public health emergencies. Program priorities include interoperable communication systems, hospital bed availability during an emergency (also used on a daily basis), personnel and volunteer management, fatality management planning in conjunction with the Clark County Office of the Coroner and Medical Examiner, and hospital evacuation planning.

• **Public Health Emergency Response (PHER)** – A three-phased grant to plan, prepare and administer H1N1 vaccine to the residents of Clark County. This funding provided free flu vaccine and resources to respond to ongoing and emerging outbreaks of influenza.

**PLANNING**

Planning staff worked with local and federal emergency agencies to plan, evaluate and participate in full scale and table top exercises, including the 2011 Nevada Statewide Exercise Series. Staff collaborated with federal, state and local partners to plan and conduct multiple exercises. Scenarios included a plane crash, anthrax release, pandemic influenza and a radiological terrorist event.

Additionally, staff collaborated with multiple agencies to provide input in the Statewide Medical Surge 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 manmade disasters that may overwhelm or exhaust local, medical resources. 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 2010, staff served as guest speakers to medical professionals on hospital preparedness topics. Additionally, staff partnered with the Nevada State Health Division to train acute care hospital emergency personnel on the HAvBED-bed availability tracking system, a necessary tool to provide and share medical information during a large scale disaster.

**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 also provides preparedness educational opportunities for health district employees.
The ReadyRN program, an emergency and disaster preparedness online course for nurses, was purchased with grant funds. The program covers topics from basic emergency management principles to the complex care of patients exposed to radiation. The health district provided this educational opportunity to health care professionals at acute-care hospitals, sub-acute care facilities, rehabilitation hospitals, skilled and long-term nursing care facilities, 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 educational bilingual 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 Medical Consequences of an Act of Terrorism, which is required by the State of Nevada for nursing license renewal. Since 2003, more than 2,000 health care professionals have received this training.

Training staff regularly meets with service organizations and individuals representing the Functional Needs Advisory Group who help ensure that health district preparedness plans are all-inclusive and appropriate for people with functional needs.

**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, 504 of 508 employees have been screened through the respiratory protection program.
MEDICAL RESERVE CORPS OF SOUTHERN NEVADA

The Medical Reserve Corps of Southern Nevada (MRC) is housed in the Office of Public Health Preparedness and supports the national mission of engaging health care and other volunteers to strengthen public health, emergency response and community resiliency.

During 2010, MRC volunteers supported 39 events, logging a total of 1,449 hours. Volunteers provided blood pressure screenings and first aid support, and distributed citizen and pet emergency preparedness information. In addition, volunteers attended Psychological First Aid, FEMA Incident Command System and mass fatality training and participated in volunteer staging and mass fatality exercises. In December, veterinary volunteers responded to a request by local animal control to staff the mobile pet clinic as a result of flooding in Mesquite and an avalanche warning on Mt. Charleston. Registered nurses also served in the American Red Cross shelter set up to support evacuees of the flooding.

Gracie, the Medical Reserve Corps of Southern Nevada’s mascot, serves as a reminder that pet owners need to be prepared to care for their pets in the event of a disaster. Gracie attends events that promote pet-preparedness, along with her owner MRC volunteer Susan Vondracek.
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 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 CDC Laboratory Response Network (LRN), which aids laboratories in preparing and responding to acts of bioterrorism and emerging diseases. In addition to performing LRN analyses for bioterrorism agents, staff provides training activities and coordinates with local first responders the collection of samples for testing of suspected biological agents. In addition, staff trains local laboratorians in isolating and reporting of pathogenic biological agents.

In 2010, SNPHL participated in an Environmental Protection Agency Chemical Agent shipping exercise. Staff successfully packaged and shipped 100 frozen artificial urine samples to NSPHL for testing within the expected time limits.

As a participant in the health district’s outbreak investigation team, the laboratory provides molecular testing capabilities for investigation of foodborne illness outbreaks and emerging infectious diseases. During 2010, laboratory staff participated in 167 epidemiological investigations/consultations, which is a 45 percent increase over 2009.

SNPHL received a $20,000 grant from the Association of Public Health Laboratories to establish and perform testing for an enhanced year round pediatric respiratory surveillance program. The Pediatric Early Warning Surveillance System (PEWSS) was established in four sentinel pediatric practices with testing initiated in June. In 2010, staff tested over 500 samples and performed more than 7,000 individual molecular analyses for a panel of 10 respiratory viruses.

As a participant in the CDC PulseNet program, SNPHL performs serotyping and DNA fingerprinting by Pulsed Field Gel Electrophoresis (PFGE) for Salmonella, Shigella and E. coli O157. The PFGE data is submitted to the CDC and is utilized for national foodborne outbreak disease surveillance. In 2010, staff analyzed over 400 reportable disease isolates and performed PFGE analysis on 252 isolates. Some analyzed samples were part of national foodborne illness outbreaks including Salmonella Enteritidis in shell eggs, Salmonella Typhi in frozen mamey fruit pulp and E. coli O157 in cheese.

In 2010, as part of its clinical testing for the health district, SNPHL staff performed more than 34,000 HIV and syphilis tests, which is an increase of 26 percent over 2009.

To ensure that samples are delivered promptly to SNPHL for testing, an in-house courier system is maintained. The courier system provides transport of samples from health district clinics, PEWSS surveillance sites and from local laboratories. In 2010, SNPHL provided over 5,900 courier services.

In 2010, SNPHL participated in more than 36 clinical proficiency testing events, which involve testing unknown samples utilizing the same techniques and methods used for routine sample testing. In 2010, SNPHL had an average passing score of 99 percent.
ENVIRONMENTAL HEALTH
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 485 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: 569
- Complaint-driven inspections: 38
- Child care plan reviews, preliminary, status checks, letters, revised plans: 31
- Child care site inspections under construction: 39
- Existing facility equipment and construction evaluations: 14
- New child care permits issued or amended (includes change of ownership): 67

**FOOD AND BEVERAGE ESTABLISHMENTS**

Environmental health specialists inspect approximately 17,193 permitted food establishments in Clark County a minimum of once a year as required by state law.

- Routine inspections: 24,413
- Special event inspections: 3,805
- Complaint-driven inspections: 1,615
- Mobile vendor inspections: 510

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: 2,205
- Food establishment site visits under construction: 3,653
- Existing facility equipment and construction evaluations: 1,934
- New food establishment permits issued or amended (includes change of ownership): 2,284
The Institutional Inspection Program inspects more than 462 permitted facilities, which include public, private and charter schools, local correctional facilities, summer camps and children’s homes.

- Routine school inspections: 898
- Complaint-driven inspections: 35
- School plan reviews, preliminary, status checks, letters, revised plans: 46
- School site inspections under construction: 48
- Existing facility equipment and construction evaluations: 1
- New school permits issued or amended: 29
- Routine correctional facility inspections: 10
- Correctional facility plan reviews, preliminary, status checks, letters, revised plans: 1
- Site inspections under construction: 1
- New correctional facility permits issued or amended: 1
- Routine summer camps and children’s home inspections: 10
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 2010, there were 366 permitted hotels and motels in Clark County, with a total of 169,531 rental rooms. Additionally, there were 155 permitted mobile home and RV parks with a total of 23,824 rental spaces.

- Routine hotel and motel inspections: 371
- Complaint-driven inspections: 268
- Public accommodation facility plan reviews, preliminary, status checks, letters, revised plans: 23
- Public accommodation site inspections under construction: 55
- Existing facility equipment and construction evaluations: 43
- New public accommodation facility permits issued or amended (includes change of ownership): 35
- Routine mobile home and RV park inspections: 155

PUBLIC BATHING PLACES

State law requires the 3,389 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: 3,781
- Complaint-driven inspections: 233

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: 718
- Public bathing site inspections under construction: 1,787
- Existing facility equipment and construction evaluations: 179
- New public bathing facility permits issued or amended (includes change of ownership): 368
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: 9
- Septic systems permitted: 82
- Loan certificates issued: 79
- Liquid waste pumping/hauling companies permitted: 42
- Pumping/hauling trucks permitted: 121

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 8 applications
- Transfer stations: 6, with 4 applications
- Public waste storage bin facilities: 4, with 0 applications
- Material recovery facilities: 9, with 4 applications
- Recycling centers: 28, with 9 applications
- Waste tire management facilities: 2, with 2 applications
- Waste tire haulers: 5
- Compost facilities: 0
- Construction and demolition waste short-term storage facilities: 1, with 1 application
- Waste asbestos transportation permits issued: 350
- Rejected load reports: 820
- Business license applications: 384
- Temporary Solid Waste Disposal Site Permits: 5, with 5 applications
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 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 2010, 185 establishments were licensed in Clark County.

- Tattoo, permanent make-up and body piercing establishment inspections: 347
- Temporary artist applications and inspections: 303
UNDERGROUND STORAGE TANKS

Staff conducts annual Environmental Protection Agency 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: 796
- Number of compliance inspections conducted: 801
- New USTs and status changes: 6 new, 12 changes of ownership
- Permanent closures: 16
- Plan reviews: 29
- Final inspections conducted: 63
- Facilities reported to NDEP for formal enforcement: 5
- Closure inspections and site assessments: 13
- Contaminated sites: 6

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: 4

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 Clinic & Nursing Services 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: 14,591
- Elevated blood lead level investigations: 14
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: 2,175
- Cases presented to the hearing officer for adjudication: 295
- Penalties assessed for illegal dumping by the hearing officer: $575,050

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: 81

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: 159
- Maps approved: 75
- Units/lots approved: 1,607

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
## 2010 Recycling Report

### Recycled Municipal Solid Waste (MSW)

<table>
<thead>
<tr>
<th>Category</th>
<th>2010</th>
<th>2009</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PAPER</strong></td>
<td>176,055.22</td>
<td>161,551.06</td>
<td>8.98%</td>
</tr>
<tr>
<td>Corrugated cardboard, newspaper,</td>
<td>paper,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>office paper, magazines, telephone</td>
<td>telephone</td>
<td></td>
<td></td>
</tr>
<tr>
<td>books, mixed paper, other paper</td>
<td>books,</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>METALS</strong></td>
<td>203,062.70</td>
<td>206,395.76</td>
<td>-1.61%</td>
</tr>
<tr>
<td>Aluminum containers, tin/steel</td>
<td>containers,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>containers, ferrous scrap metals,</td>
<td>tin/steel</td>
<td></td>
<td></td>
</tr>
<tr>
<td>non-ferrous scrap metals,</td>
<td>containers,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>appliances (white goods), mixed</td>
<td>appliances</td>
<td></td>
<td></td>
</tr>
<tr>
<td>metal</td>
<td>metal</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>PLASTIC</strong></td>
<td>12,230.67</td>
<td>16,620.04</td>
<td>-26.41%</td>
</tr>
<tr>
<td>Plastic (PET), plastic (HDPE),</td>
<td>plastic</td>
<td></td>
<td></td>
</tr>
<tr>
<td>mixed plastic, plastic film,</td>
<td>plastic</td>
<td></td>
<td></td>
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<tr>
<td>polystyrene, other (PVC, LDPE, PP)</td>
<td>polystyrene</td>
<td></td>
<td></td>
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<tr>
<td><strong>GLASS</strong></td>
<td>12,259.96</td>
<td>5,556.70</td>
<td>120.63%</td>
</tr>
<tr>
<td>Clear, green, amber/brown, mixed</td>
<td>glass</td>
<td></td>
<td></td>
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<tr>
<td>glass</td>
<td>glass</td>
<td></td>
<td></td>
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<tr>
<td><strong>ORGANIC MATERIAL</strong></td>
<td>59,099.57</td>
<td>58,312.73</td>
<td>1.35%</td>
</tr>
<tr>
<td>Yard debris, food waste,</td>
<td></td>
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<tr>
<td>biosolids, restaurant grease,</td>
<td></td>
<td></td>
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<tr>
<td>rendered animal matter, pallets/</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>wood</td>
<td></td>
<td></td>
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<tr>
<td><strong>SPECIAL WASTE</strong></td>
<td>9,152.95</td>
<td>3,729.27</td>
<td>145.44%</td>
</tr>
<tr>
<td>Used tires, paint, fluorescent</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>bulbs, lamp ballasts, mercury</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>devices and waste, household</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>hazardous waste</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TEXTILES</strong></td>
<td>2,117.68</td>
<td>2,853.42</td>
<td>-25.78%</td>
</tr>
<tr>
<td>Textiles, carpet/carpet pad</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td><strong>OTHER RECYCLED MSW</strong></td>
<td>1,256.77</td>
<td>1,225.12</td>
<td>2.58%</td>
</tr>
<tr>
<td>Toner cartridges, cell phones,</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>filters, transformers and</td>
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<tr>
<td>electrical equipment, computer</td>
<td></td>
<td></td>
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<tr>
<td>e-waste</td>
<td></td>
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</tr>
<tr>
<td><strong>TOTAL RECYCLED MSW</strong></td>
<td>475,235.51</td>
<td>456,244.10</td>
<td>4.16%</td>
</tr>
<tr>
<td><strong>CONSTRUCTION &amp; DEMOLITION DEBRIS</strong></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>(C &amp; D)</td>
<td>10,918.71</td>
<td>791.26</td>
<td>1280%</td>
</tr>
<tr>
<td>Asphalt, concrete, carpet,</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>carpet padding, drywall, wood,</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>plastic buckets</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>RECYCLED MSW AND C &amp; D GRAND TOTAL</strong></td>
<td>486,154.22</td>
<td>457,035.36</td>
<td></td>
</tr>
</tbody>
</table>

**Total MSW disposed of in the municipality:** 2,182,537

**Total MSW generated in municipality:** 2,657,773

*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.
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: 1,429 (Jan. 1-June 30, 2010)
- Routinely treated natural mosquito breeding areas: 101
- Mosquitoes submitted for WNv, WEE, STE analysis: 21,691; 0 positive for WNv
- Bird samples submitted WNv, WEE, STE analysis: 2; 0 positive (Nevada Department of Agriculture ceased testing birds on April 1, 2010)
- Animal samples submitted for rabies analysis: 68; 0 positive (Jan. 1-June 30, 2010)
- Rodent samples submitted for hantavirus analysis: 80; 0 positive
- Rodent samples submitted for plague analysis: 73; 0 positive
- Flea samples submitted for plague analysis: 118; 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: 3,263
THE “BIG 10”

First defined by U.S. Public Health Service agencies and other major public health organizations, the **10 Essential Public Health 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.
**2010 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 THE COMMUNITY. HEROES ARE NOMINATED BY STAFF FOR THEIR EFFORTS IN SUPPORTING ONE OR MORE OF THE 10 ESSENTIAL PUBLIC HEALTH SERVICES.**

*Diana Taylor, Director of Health Services | Clark County School District*

Diana Taylor works closely with the Southern Nevada Health District on many projects. In 2009, Taylor worked directly with the health district in response to the newly identified 2009 H1N1 influenza virus and subsequent outbreak in the community. During the spring and summer, she assisted the health district in developing guidelines to respond to identified cases in school children and outbreaks across the school district. She attended press conferences, along with health district staff, in response to the reported illnesses. In addition, she worked closely with staff to report school absenteeism data as part of the health district’s response to identify clusters of 2009 H1N1 influenza within the county’s school-age population.

She continues to work with the health district in response to many public health issues. In the past several years, she assisted with the development of MRSA training programs; she served as the point of contact in several gastrointestinal outbreaks as well as a chickenpox outbreak; and she coordinated the reporting of child height and weight data so the health district could start evaluating childhood obesity in Clark County.

*Kim Amato | Baby’s Bounty*

Baby’s Bounty is a non-profit agency that provides essential clothing and gear to babies born into at-risk families. Recipients include teen mothers, the homeless and people living in poverty. Each newborn receives a collection of new and gently used baby clothing, receiving blankets, bottles and other items such as strollers, portacribs and car seats. Founded by Kim Amato, the Baby’s Bounty has assisted more than 375 families.

Through collaboration with social service agencies, hospitals, homeless shelters, safe havens, schools and family court, new mothers at-risk are identified to receive assistance. Baby’s Bounty works with more than 50 social service providers in the Clark County area including: the Department of Welfare and Supportive Services, UMC, Nevada Partnership for the Homeless, WIC (Women, Infants, and Children), Catholic Charities and Shade Tree, among others.

Recently, Amato and Baby’s Bounty began a program with the Clark County Coroner’s office to address Clark County infant mortality rates. A new program called “Good Night, Sleep Tight” allows the organization to collect new or gently used ‘pack and plays’ and distributed them to families to ensure newborns have a safe sleep environment.
Public Health Heroes Kim Amato, left, and Diana Taylor, right, pose for a photo after receiving recognition at the Board of Health meeting.
Our Very Own Heroes: 
EMPLOYEES GIVE BACK

IN 2010, EMPLOYEES ROLLED UP THEIR SLEEVES AND FOCUSED ON ACTIVELY GIVING BACK TO THE COMMUNITY.

The district’s new Community Outreach Team organized several opportunities for staff, including food and toy drives and a group volunteer activity off-site.

_ThreeSquare, a local food bank_

In 2010, staff voted to support ThreeSquare, a local food bank. During a spring food drive, health district employees contributed 781 pounds of food, which equated to 610 meals. Staff also collected non-perishable items, such as diapers and toiletries.

In February, more than 50 health district employees volunteered their time and sorted more than 15,000 pounds of meat/chicken, which equated to about 12,000 meals. They also sorted and repackaged toiletry items.

_AFAN Toy Drive_

The holiday spirit of giving surged through the health district as staff donated more than 150 toys and games to the Aid for AIDS of Nevada (AFAN) toy drive. Donations
helped brighten the lives of some 300 children in the community who are affected and infected with HIV/AIDS.

**Pen Recycling**

The health district initiated a pen and pencil recycling program for employees. For every writing instrument collected, ThreeSquare receives $0.02. (To put it in perspective, every 17 pens equals one meal.) Additionally, the recycling efforts will help eliminate the staggering 1.6 billion pens that end up in landfills each year.

**Employee Blood Drives**

For over a decade, the health district has sponsored employee blood drives.

The 2010 employee drive drew in 34 donors and yielded 40 pints of blood.

Since United Blood Services started using electronic records in 2003, health district employees have contributed a total of 567 pints of blood, which potentially impacted 1,701 local patients.
PHONE DIRECTORY
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/Volunteers ................................. 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 .............................................................. 1-702-759-1682
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
Engineering ............................................................. 759-0661
Henderson ............................................................... 759-0501
Information and Complaints.................................... 759-0588
Mesquite ................................................................. 1-702-759-1682
Plan Review ............................................................. 759-1258
Public Swimming Pools ............................................ 759-0571
Public Water Systems ................................................ 759-0677
Septic Tanks ............................................................. 759-0660
Solid Waste Management ......................................... 759-0600
Spring Valley ............................................................ 759-0503
Subdivisions ............................................................. 759-0661
Tattoo/Body Piercing .................................................. 759-0677
UST Program ............................................................ 759-0603
Locations

CAMBRIDGE COMMUNITY OUTREACH CENTER
3900 Cambridge St., Suite 101
General Information 732-1781

EAST LAS VEGAS PUBLIC HEALTH CENTER
560 Nellis Blvd., Suites E-11 & 12
Health Cards 759-1340
Nursing 759-0900

HENDERSON PUBLIC HEALTH CENTER
520 E. Lake Mead Pkwy.
Environmental Health 759-0501
Health Cards 759-1515
Nursing 759-1040

LAUGHLIN PUBLIC HEALTH CENTER
3080 S. Needles Hwy., Suite 1800
General Information 759-1643

MESQUITE PUBLIC HEALTH CENTER
830 Hafen Ln.
General Information (702) 759-1682

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

SPRING VALLEY PUBLIC HEALTH CENTER
6330 Spring Mountain Rd., Suite C
Environmental Health 759-0503