




# Memorandum

**Date:** January 24, 2019

**To:** Southern Nevada District Board of Health

**From:** Christopher D. Saxton, MPH-EH, REHS, *Director of Environmental Health*   
Joseph P. Iser, MD, DrPH, MSc, *Chief Health Officer*

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**Subject:** Environmental Health Division Monthly Report

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## I. FOOD OPERATIONS PROGRAM

### ENVIRONMENTAL HEALTH Food Operations Program – Fiscal Year Data

Food Operation Services	Dec. 2017	Dec. 2018		FY 17-18	FY 18-19	
Routine Inspections	883	1,055	↑	9,359	10,527	↑
Reinspections	131	142	↑	1,014	1,152	↑
Downgrades	101	112	↑	934	1,065	↑
Closures	9	9	→	82	110	↑
Special Events	32	61	↑	532	520	↓
Temporary Food Establishments & Tasting Event Booths	237	366	↑	3,548	3,408	↓
<b>TOTALS</b>	<b>1,393</b>	<b>1,745</b>	<b>↑</b>	<b>15,469</b>	<b>16,782</b>	<b>↑</b>

#### 1. Enforcement Actions and Investigations:

- A. **Fry Hard, 640 N. Eastern Ave.:** On December 1, the facility was closed for an Imminent Health Hazard (IHH), no hot water (68°F). The inspector documented 18 demerits. The facility was reinspected and reopened two days later with zero demerits.
- B. **Arata, 3250 N. Tenaya Way:** On December 4, the facility was closed for an IHH, operating without a functional hand sink. The facility repaired the issue and was reopened the next day.
- C. **Nacho Daddy, All Locations:** On December 12, SNHD and Nacho Daddy staff met to discuss November's Hold Order and a newly approved source of "Savage Scorpions." All locations now using scorpions from an approved supplier.

- D. **Max's Restaurant Prep, 1290 E. Flamingo Rd.:** On December 17, the facility was closed for an IHH, no hot water. The inspector documented 13 demerits. The facility was reinspected and reopened on December 19 with zero demerits.
  - E. **Seafood City Noodle Street, 7230 Arroyo Crossing Pkwy.:** On December 17, the facility was closed for an IHH, no hot water. The facility reopened two days later with zero demerits.
  - F. **Park MGM Eatly Bakery, 3770 S. Las Vegas Blvd.:** On December 20, staff issued a Cease and Desist Order for improperly labeled grab & go items. The items were removed until labels are approved by SNHD.
  - G. **Yummy Box Cafe, 4255 W. Spring Mountain Rd.:** On December 20, the facility was closed for an IHH, no water. The facility reopened the next day after repairs were completed.
  - H. **Winchell's Donut House #480, 4580 E. Tropicana Ave.:** On December 27, the facility was closed for an IHH, multigenerational cockroach infestation. After harborage areas were identified and remediated, the facility was reopened the next day with zero demerits.
  - I. **Mercado Rincon de Buenos Aires Restaurant, 5300 W. Spring Mountain Rd.:** On December 27, the facility was closed for an IHH, multigenerational cockroach infestation. The facility was reopened the next day with zero demerits.
2. **Foodborne Illness Investigations:**
- A. **Subway, 2568 Wigwam Pkwy.:** On December 3, staff responded to multiple complaints of suspected foodborne illness. The investigation resulted in an A grade.
  - B. **In N Out Burger, 1051 W. Sunset Rd.:** On December 4, staff responded to a lab-confirmed case of foodborne illness. The investigation resulted in an A grade.
  - C. **Hanu Korean BBQ, 3943 Spring Mountain Rd.:** On December 7, staff responded to a lab-confirmed case of foodborne illness. Staff observed and corrected issues of cross-contamination concerns. The investigation resulted in an A grade.
  - D. **In N Out Burger, 9610 W. Tropicana Ave.:** On December 17, staff responded to multiple complaints of suspected foodborne illness. The investigation resulted in an A grade.
  - E. **Chick-Fil-A, 1991 N. Rainbow Rd.:** On December 18, staff responded to multiple complaints of suspected foodborne illness. Staff observed and corrected issues of potential cross-contamination, cleaning frequency, and food in the temperature danger zone. The investigation resulted in a B downgrade. A reinspection was conducted on December 21 resulting in an A grade.
  - F. **City of Las Vegas Detention Center, 3300 Stewart Ave.:** On December 21, staff responded to multiple complaints of suspected foodborne illness. Staff observed and corrected multiple issues of foods in the temperature danger zone and malfunctioning equipment in use. The investigation resulted in an A grade.
3. **Onsite Intervention Training:**
- A. Onsite Intervention Training was held with the following facilities: Vince Neil's Restaurant, 360 E. Tropicana Ave.; Lotus of Siam, 620 E. Flamingo Rd.; Juicy Beets, 3900 Paradise Rd.; Brooklyn Pizza Co./Rocco's New York Deli, 1181 S. Buffalo Dr.; Tacos el Sinaloense Portable Unit, 110 W. Rolly St.; Sushi Café, 237 N. Stephanie St.; Viva el Taco, 30 N. Lamb Blvd.; MTO Café, 500 S. Main St.; and Canters Deli Café @ LINQ, 3535 S. Las Vegas Blvd.
4. **Supervisory/Managerial Conferences:**
- A. Conferences were held with the following facilities: Paris Baguette America, 3377 South Las Vegas Blvd.

**II. SOLID WASTE AND COMPLIANCE PROGRAMS**

**ENVIRONMENTAL HEALTH Solid Waste Management Authority (SWMA) Illegal Dumping Complaints and Hearing Officer Process – Fiscal Year Data**

Illegal Dumping and Hearing Officer Process	Dec. 2017	Dec. 2018		FY 17-18	FY 18-19	
Notices of Violations (New & Remails)	7	11	↑	42	59	↑
Adjudicated Hearing Cases	0	0	→	34	48	↑
Total Cases Received	78	123	↑	721	763	↑
Hearing Penalties Assessed	\$0	\$0	→	\$35,400	\$53,875	↑

**ENVIRONMENTAL HEALTH Restricted Waste Management – Fiscal Year Data**

Restricted Waste Management	Dec. 2017	Dec. 2018		FY 17-18	FY 18-19	
Inspections	178	129	↓	1,421	1,295	↓

**ENVIRONMENTAL HEALTH Underground Storage Tanks (UST) Full Compliance Inspections – Fiscal Year Data**

Underground Storage Tanks	Dec. 2017	Dec. 2018		FY 17-18	FY 18-19	
Compliance Inspections	19	83	↑	342	373	↑
Final Installation/Upgrade/Repair Inspections	4	6	↑	37	52	↑
Closure Inspections	0	1	↑	5	7	↑
Spill Report Investigations	0	0	→	8	4	↓
Reinspections	0	3	↑	3	23	↑

**ENVIRONMENTAL HEALTH Permitted Disposal Facilities (PDF) Inspections – Fiscal Year Data**

Permitted Disposal Facilities	Dec. 2017	Dec. 2018		FY 17-18	FY 18-19	
Inspections	24	17	↓	118	122	↑
Reinspections	1	1	→	18	11	↓

**1. Solid Waste Plan Review Program (SWPR):**

- A. **Permits issued – Rocky Mountain Recycling (MRF-Modification)**  
**Permit Removals – None**
- B. **Landfills – Apex Regional Landfill; Boulder City Landfill; Laughlin Landfill; Nellis Air Force Base; Timet; Sunrise Mountain (closed); and Wells Cargo**
- C. **Facility Applications Being Processed – Compost Plant (1); Landfill (1); Materials Recovery Facilities (2); Recycling Centers (8); and Waste Grease (1)**
- D. **Facilities planned for approval at DBOH meetings/SNHD Workshops in January: M.M.C. Inc. (Apex)**

**ENVIRONMENTAL HEALTH Asbestos Permitting Services – Fiscal Year Data**

Asbestos Permitting Services	Dec. 2017	Dec. 2018		FY 17-18	FY 18-19	
Asbestos Permits Issued	60	46	↓	387	379	↓
Revised Asbestos Permits Issued	3	0	↓	12	15	↑

**ENVIRONMENTAL HEALTH Subdivision Program – Fiscal Year Data**

Subdivision Plan Review	Dec. 2017	Dec. 2018		FY 17-18	FY 18-19	
Tentative Maps-Received	15	37	↑	125	154	↑
Tentative Maps-Lot Count	736	2,966	↑	7,129	11,905	↑
Final Maps-Received	16	34	↑	141	162	↑
Final Maps-Lot Count	261	1,232	↑	4,707	5,640	↑
Final Maps-Signed	20	16	↓	79	120	↑
Final Maps (Signed)-Lot Count	841	438	↓	2,689	5,179	↑
Improvement Plans-Received	18	20	↑	120	126	↑
Improvement Plans-Lot Count	344	1,075	↑	4,283	5,321	↑
Expedited Improvement Plans-Received	3	2	↓	24	17	↓
Expedited Improvement Plans-Lot	104	17	↓	835	1,352	↑
Fees Paid	\$12,399	\$34,626	↑	\$154,813	\$182,763	↑

**ENVIRONMENTAL HEALTH Individual Sewage Disposal System (ISDS) Program – Fiscal Year Data**

Individual Sewage Disposal Systems	Dec. 2017	Dec. 2018		FY 17-18	FY 18-19	
Residential ISDS Permits	4	7	↑	66	50	↓
Commercial ISDS Permits	4	3	↓	20	23	↑
Residential Pool Plan Reviews	5	5	→	36	37	↑
Loan Certifications	3	0	↓	12	7	↓
Tenant Improvements	16	9	↓	96	69	↓
Compliance Issues Resolved (pre-permitting)	1	1	→	11	16	↑
Compliance Cases Resolved (post-permitting)	0	0	→	20	0	↓

**2. ISDS Program Activity:**

- A. Staff continued to provide comments for Clark County and City of Henderson land use applications and technical review comments for the Clark County Mapping Team on proposed parcel maps.
- B. Staff continued to work with the Nevada State Division of Water Resources and local building departments (Clark County, City of Henderson, and City of Las Vegas) to address any potential ISDS issues via the Tenant Improvement process.

**3. Used Mattress and Bedding Program Activity:**

- A. There were no additional Used Mattress Sanitizers registered; the total remains at nine.
- B. Staff is working to conduct education and outreach to the gaming industry regarding the proper removal and disposal of used mattresses.

**ENVIRONMENTAL HEALTH Safe Drinking Water Program – Fiscal Year Data**

Safe Drinking Water Program	Dec. 2017	Dec. 2018		FY 17-18	FY 18-19	
Public Water System Sanitary Surveys	0	13	↑	35	42	↑
Public Water System Violation Letters	3	0	↓	8	3	↓
Public Water System Complaints	0	1	↑	0	2	↑

**4. Safe Drinking Water Activity:**

- A. Staff continued to monitor water hauling activities for the following water systems:
  - **Speed Vegas** water hauling activities are projected to continue until December 31, 2018. This deadline, set by NDEP on October 11, 2018, is justified by the permit’s water well construction project CL-0005960-18.
  - **Red Rock Visitor Center** water hauling activities are expected to end at an undetermined date (estimated completion of a treatment plant for the new water well).
  - **Red Rock Campground** water hauling activities are expected to end at an undetermined date (estimated completion of interconnecting with the **Red Rock Fire Station**).
  - **Laker Plaza Inc’s** water hauling received an approved extension until September 30, 2018. This deadline was recently justified by the permit consultant’s progress with the City of Henderson public water system intertie. Our staff will continue to evaluate the consultant’s progress to determine subsequent water hauling extensions. On October 29, 2018, our staff informed the permit’s representatives that their report to our office was 29 days past due.
  - **Spring Mountain Youth Camp’s** water source’s discharge rates have decreased to drought severity. They began emergency water hauling November 20, 2018. The preceding emergency water hauling lasted from October 2014 to October 2016.
- B. Staff continued to track analyte compliance issues with the National Primary Drinking Water Regulations and Secondary Standards. No *coliform*-present sample events occurred this month.
- C. SNHD staff conducted triennial sanitary surveys of the Nevada Division of Environmental Protection (NDEP) delegated public water systems. When a permit fails to address significant deficiencies within the prescribed survey deadline, the permit is required to conduct Tier 2 public notification until those deficiencies are fully corrected. The following permits have conducted Tier 2 public notification this month:
  - **Blue Diamond Saloon, McDonalds, and Terrible Herbst** (system design modifications without NDEP Bureau of Safe Drinking Water (BSDW) approval)

- **Mountain Springs Saloon** (system design modifications without NDEP BSDW approval)
  - **Certain Teed Gypsum** (sanitary defect corrections past due)
  - **Lhoist North America** (sanitary defect corrections past due)
  - **Blue Diamond Travel Center and Terrible Herbst** (sanitary defect corrections past due).
- D. The following permits have not initiated their required Tier 2 public notification:
- **Trails End General Store** (sanitary defect correction past due)
  - **Kings Row TP** (sanitary defect corrections past due)
- E. **Moapa Valley Water District** experienced a loss of water pressure on December 7 and notified SNHD. Water District staff responded to the emergency immediately. Their response involved isolating the main break, issuing precautionary Tier 1 notification to the affected service connections, repairing damaged assets, flushing the affected area, and accounting for 48-hours of coliform data. The entire event was concluded on December 13.
- F. On December 18, a **Luxor Resort** patron observed brown/black water from their hotel room's bathroom sink. On December 31, SNHD was notified of the issue by NDEP. The water system's Facilities Department stated that the water quality issues were related to a loss of pressure event created during water system repairs (e.g. addressing pin-hole leaks). Further information is being gathered: recommissioning process and duration of flushing the affected water system zones.

**III. VECTOR CONTROL OFFICE**

**ENVIRONMENTAL HEALTH Vector Control and Other EH Services -  
 Fiscal Year Data**

<b>Vector Control and Other EH Services</b>	<b>Dec. 2017</b>	<b>Dec. 2018</b>		<b>FY 17-18</b>	<b>FY 18-19</b>	
<b>West Nile Virus Surveillance Traps Set</b>	0	0	→	1,131	1,163	↑
<b>West Nile Virus Surveillance Mosquitoes Tested</b>	0	0	→	30,117	18,844	↓
<b>West Nile Virus Surveillance Submission Pools Tested</b>	0	0	→	1,115	827	↓
<b>West Nile Virus Surveillance Positive Mosquitoes</b>	0	0	→	1,238	66	↓
<b>West Nile Virus Surveillance Positive Submission Pools</b>	0	0	→	42	2	↓
<b>Saint Louis Encephalitis Positive Mosquitoes</b>	0	0	→	0	0	→
<b>Saint Louis Encephalitis Positive Submission Pools</b>	0	0	→	0	0	→
<b>Western Equine Encephalitis Positive Mosquitoes</b>	0	0	→	30	0	↓
<b>Western Equine Encephalitis Positive Pools</b>	0	0	→	1	0	↓
<b>Elevated Blood Level Home Investigations</b>	1	0	↓	4	5	↑
<b>Healthy Homes/Landlord Tenant Response (LLT)</b>	10	8	↓	33	54	↑
<b>Public Accommodations Inspections</b>	56	31	↓	215	232	↑
<b>Public Accommodations Complaints</b>	20	9	↓	87	113	↑
<b>Mobile Home/Recreational Vehicle Park Inspections</b>	0	2	↑	4	9	↑
<b>Mobile Home/Recreational Vehicle Park Complaints</b>	0	4	↑	13	18	↑

**IV. SPECIAL PROGRAMS**

**ENVIRONMENTAL HEALTH Special Programs - Fiscal Year Data**

Special Programs	Dec. 2017	Dec. 2018		FY 17-18	FY 18-19	
School Food Facility Inspections	71	59	↓	393	407	↑
School Food Facility Complaints	3	1	↓	6	2	↓
School Facility Inspections	77	68	↓	487	492	↑
School Facility Complaints	4	2	↓	15	14	↓
Child Care Facility Inspections	70	34	↓	214	190	↓
Child Care Facility Complaints	4	2	↓	17	21	↑
Body Art Facility Inspections	78	93	↑	258	338	↑
Body Art Facility Complaints	4	0	↓	18	10	↓
Body Art Artist Special Event Inspections	9	2	↓	17	242	↑
<b>Total Program Services Completed</b>	<b>319</b>	<b>260</b>	<b>↓</b>	<b>1,497</b>	<b>1,716</b>	<b>↑</b>

**1. Schools:**

- A. Solomon Schechter School Kitchen, 10100 Banbury Cross Dr.:** On December 4, the kitchen was closed during a routine inspection due to gross unsanitary conditions. Violations included: accumulation of food waste on countertops and floors; dirt and debris accumulating on floors and walls; food from unknown sources; inaccessible hand sink; spoiled and unlabeled food items in the reach-in refrigerator; chemicals stored near food products; and an inoperable reach-in refrigerator and warming oven. Staff also issued a Cease and Desist Order for a non-permitted caterer using the kitchen. The facility remains closed at this time.
- B. McWilliam Elementary School, 1315 Hiawatha Rd.:** On December 18, staff investigated complaints of increased gastrointestinal illness at the school. The school nurse reported that the cluster started around December 11 with absenteeism rates of 50-70 students each day. The head custodian reported that there had been no reports of emetic events at the school during the past two weeks. A school kitchen worker reported that she was out sick from December 5 to December 9 and returned to work after being asymptomatic for at least 48 hours. When staff asked the custodian about the procedures used to cleanup emetic events, the custodian reported a process that was not in compliance with Clark County School District (CCSD) procedures. Staff discussed the proper steps for cleaning emetic events. The school nurse will continue to track the number of students who are absent each day.
- C. Mack Middle School, 4250 Karen Ave.:** On December 28, staff investigated the lighting levels at various areas throughout the school. Lighting levels in several rooms were below the required standard of 30 foot-candles. Many light fixtures were found to have missing or broken bulbs. There were also two emergency lights that required repair. Work orders requesting repairs will be submitted so that adequate light can be provided at the school.

**2. Child Care:**

- A. Green Valley Christian Preschool, 711 Valle Verde Dr.:** On December 3, staff conducted a reinspection and found that facility staff had not corrected thirteen of the



violations noted at the previous inspection. The facility was placed in an intervention process that begins with onsite staff training by SNHD.

- B. Kids Turf Academy, 1380 E. Silverado Ranch Blvd.:** During a final inspection for a playground remodel, staff observed an entanglement hazard on the slide. A transition component at the top of the slide was not properly secured which could cause clothing items to become entangled. Entanglement hazards are associated with strangulation accidents on playgrounds. There were also several additional minor construction defects, so staff was unable to approve the new play equipment. Following adequate repairs, the play equipment was reinspected and the remodel was approved.

**V. FACILITY DESIGN ASSESSMENT & PERMITTING (FDAP)**

**ENVIRONMENTAL HEALTH Facility Design Assessment & Permitting Program - Fiscal Year Data**

Food Pre-Permitting Services	Dec. 2017	Dec. 2018		FY 17-18	FY 18-19	
Food Safety Assessment Meetings	6	10	↑	40	43	↑
Total Food Pre-Permitting Services	967	1,041	↑	5,382	6,827	↑
Total Service Request Intake	288	312	↑	1,331	2,021	↑
Total Service Request Released	230	280	↑	1,063	1,804	↑
Total Service Requests Currently in Pre-Permitting	983	1,577	↑			

**1. Enforcement Actions and Investigations:**

- A. Muniz Bar and Grill, 5715 S. Pecos Rd.:** Multiple construction issues were observed during a pre-permitting inspection. The floor tiles were broken in many locations and the grout was in disrepair. SNHD Regulations require all floors to be smooth, easily cleanable, and nonabsorbent. In addition, several of the refrigerators were not operational and needed repair. The existing three-compartment sink was missing one of the two faucets needed so that the all compartments of the sink could be filled with water. Once the required repairs were completed, staff conducted the final permitting inspection and approved the facility to stock and operate.
- B. Icy Juicy, 3400 S. Jones Blvd.:** A final inspection for a minor remodel was unable to be conducted since the facility had not been approved by Clark County Building and Fire Safety (CCBFS). The remodel included installation of new cooking equipment, which requires a review of the fire suppression system and cooking hood by CCBFS. The final inspection has not yet been rescheduled.
- C. Happy's Pizza, 300 W. Lake Mead Blvd.:** A Change of Permit Holder (CPH) inspection resulted in failure due to two IHHs and several uncontrolled risk factors for foodborne illness. Staff documented 18 demerits. SNHD Regulations require that facilities earn 10 demerits or less at a scheduled CPH permitting inspection. Violations included: refrigerator not holding temperature, multigenerational cockroaches on the prep table and under equipment, gross and unsanitary conditions including grease buildup throughout the facility, toxic levels of chlorine in the sanitizer bucket, soiled kitchenware stored as clean, no thermometers in the refrigerators, and two employees without food handler cards. The owner was

required to participate in a Food Safety Assessment Meeting (FSAM) prior to reinspection. All violations were subsequently corrected and the CPH was approved.

- D. **Able Baker Brewing, 1510 S. Main St.:** A plan review meeting was conducted with representatives for a new brewery, restaurant, and tavern near the Las Vegas Arts District. The facility will have rollup doors to create an open-air environment, but the plans did not indicate required protections against pests. Revised plans must be submitted to include air-curtains or other measures to prevent the entry of pests.

**VI. AQUATIC HEALTH PROGRAM**

**ENVIRONMENTAL HEALTH Aquatic Health Program - Fiscal Year Data**

Aquatic Health Program Services	Dec. 2017	Dec. 2018		FY 17-18	FY 18-19	
<b>New Projects Submitted to Plan Review</b>	84	45	↓	374	309	↓
<b>All Projects Released from Pool Plan Review</b>	41	83	↑	265	421	↑
<b>Total Operation Inspections</b>	400	217	↓	2,412	1,911	↓
<b>Complaint Investigations</b>	10	9	↓	144	114	↓
<b>Inactive Body of Water Surveys</b>	14	5	↓	43	40	↓
<b>Total Program Services Completed</b>	549	359	↓	3,238	2,795	↓

**Drowning/Near Drowning/Diving Incident Investigations at Permitted Facilities: 0**

**1. Enforcement Actions:**

- A. **Country Hills Homeowners Association (HOA), 698 S. Racetrack Rd.:** On December 11, the facility was closed during a routine inspection for a broken suction outlet cover. Damage to suction outlet covers can create an entrapment hazard due to uneven suction. The facility remains closed and the reinspection has not yet been scheduled.
- B. **24 Hour Fitness #74, 5035 W. Tropicana Ave.:** On December 12, staff responded to a complaint alleging mold accumulation in the men’s toilet areas. Heavy accumulation of black debris was observed at corners, edges, and stalls of the men’s toilet and urinal areas. The floor drain in the toilet area was inoperable and standing water was present. Management stated that an outside cleaning company services the facility four times a week and had provided services prior to the investigation. The complaint was substantiated.
- C. **Carriage Park Villas HOA, 2831 Wheelright Dr.:** On December 20, the facility was closed during a routine inspection for several IHHs. The gate accessing the pool enclosure was unlatched upon arrival. There was no lifesaving equipment, a dead bird was floating in the water, the recirculation system was not running, and the restrooms were boarded up. The operator was instructed to correct all violations before scheduling a reinspection.
- D. **Smokey Lane Condos, 100 Pulsipher Ln.:** On December 21, a survey of the facility was performed to evaluate decking material installed earlier in the year. Staff met with the HOA president and board members regarding the sealant for the stamped concrete decking. The deck was initially sealed in March and created a slippery surface causing a resident to fall. The HOA Board asked the contractor to correct the problem which resulted in another coat of sealant containing silica sand.

During the survey, the silica sand was observed to be deteriorating and contaminating the pool and spa with debris. The HOA president and board members were instructed to return the stamped concrete back to the original stamped concrete with a non-slippery surface prior to the 2019 Pool Season or submit a minor remodel within 30 business days.

- E. **24 Hour Fitness Center, 2556 Wigwam Pkwy.:** On December 24, staff responded to a complaint alleging that the toilets and urinals in the men's restroom were constantly out of order, with only three of seven operational. Upon arrival, three toilets and two urinals were operational. One toilet and one urinal were observed "Out of Service." The restroom facilities were compliant with Nevada Administrative Code (NAC) 444.214, as the maximum combined capacity for the facility's aquatic venues is 210 bathers. Management was informed of the minimum sanitary plumbing facilities required and stated that the necessary parts to repair the toilet and urinal have been ordered.
- F. **Rio Suites Hotel, 3700 W. Flamingo Rd.:** On December 27, staff closed the women's health spa during a routine inspection. Violations included a missing suction outlet cover for the jet system, noncompliant cover for the equalizer line, and insufficient area lighting since the underwater light was not working. The engineer and maintenance staff made the required repairs while staff was onsite, and the spa was approved to reopen.

## **VII. TRAINING AND COMPLIANCE**

1. Training Office staff participated in Incident Command Training on December 3 and 4.
2. Staff participated in a kick-off conference call for the National Association of County and City Health Officials (NACCHO) Mentorship Program on December 4.
3. Staff organized and gave the monthly EH Experience Days presentation to Touro University and University Medical Center interns on December 6.
4. Staff provided new hire EH Orientation training on Dec 7, 24, 26, 27, and 31.
5. Staff participated in the Industry Interaction Committee on December 7.
6. Staff participated in the Office of Public Health Preparedness (OPHP) Department Operations Center/Incident Command Tabletop Exercise and Workshop on December 7.
7. Staff participated in the Conference for Food Protection (CFP) Council III - Product Assessment Sub-Committee planning call on December 7.
8. Staff attended an Allergen Intervention Strategy Committee meeting on December 7. They also assisted in ordering supplies and training materials for the campaign.
9. Training Office staff assisted with development, presented at, and attended the Allergen Training for EH Food Operations staff on December 12.
10. Staff participated in the Solid Waste and Compliance sponsored tour of the Republic Services Landfill at Apex on December 12.
11. Staff participated in the EH Customer Satisfaction Survey meeting on December 14 and completed a Board of Health report for June 8 – September 8, 2018 (Attachment A).
12. Staff led and participated in the Trainer's Update meeting on December 18.
13. Staff attended the 2018 Foodborne Illness Wrap Up meeting on December 19.
14. Staff attended the Domain 9 Final Review meeting on December 27.
15. Training Office staff participated in the following special events: Cowboy Christmas and The Holiday Experience.
16. Training Office staff participated in standardization of Food Operations and Special Programs staff throughout the month. One SNHD Standard completed standardization and two Environmental Health Specialists (EHSs) completed the Standardization process.

17. Five EHSs completed training in the food program and were assigned to their Food Operations offices.
18. Training Office staff participated in Solid Waste and Compliance cross training.
19. Staff assisted in the Centers for Disease Control (CDC) Food Safety Practices and Beliefs Study throughout the month.
20. Staff participated in the Food Establishment Resource Library Website Update Project.
21. Staff participated in the EH Roundtable meetings throughout the month.
22. Special Processes staff met with various operators regarding submission of labels for review, waivers, operational plans, and HACCP plans. There are currently 13 cook chill/sous vide plans, 9 2-barrier plans, 7 other HACCP plans, 11 waivers, and 7 operational plans in review.
23. Special Processes staff provided guidance to Food Operations and Industry regarding label requirements. There are currently 14 facilities in label review.

**VIII. SPECIAL PROCESSES**

**ENVIRONMENTAL HEALTH Label Review – Fiscal Year**

**Data**

Label Review	Dec. 2017	Dec. 2018		FY 17-18	FY 18-19	
Facility Label Review Submissions	4	5	↑	29	46	↑
Facility Label Review Releases	4	5	↑	29	46	↑
Number of Labels Approved	75	87	↑	447	636	↑

**ENVIRONMENTAL HEALTH Special Processes Plan Review - Fiscal**

**Year Data**

Special Processes Review	Dec. 2017	Dec. 2018		FY 17-18	FY 18-19	
Cook Chill/Sous Vide Submissions	0	0	→	0	2	↑
Cook Chill/Sous Vide Releases	0	0	→	5	1	↓
2-Barrier ROP Submissions	0	0	→	0	2	↑
2-Barrier ROP Releases	0	1	↑	1	1	→
Other HAACP Special Processes Submissions (Including ROP of fish, unpasteurized durably packaged juice, preservation, curing, etc.)	0	0	→	4	0	↓
Other Special Processes Releases	0	0	→	1	1	→

**ENVIRONMENTAL HEALTH Special Processes Waivers & Operational Plans Review - Fiscal Year Data**

<b>Waivers &amp; Operational Plans Review</b>	<b>Dec. 2017</b>	<b>Dec. 2018</b>		<b>FY 17-18</b>	<b>FY 18-19</b>	
<b>Waiver Review Submissions</b>	0	0	→	2	1	↓
<b>Waiver Review Releases</b>	0	1	↑	3	1	↓
<b>Operational Plan Submissions</b>	0	1	↑	3	1	↓
<b>Operational Plan Releases</b>	0	0	→	2	2	→

CDS/hh

# EH CUSTOMER SATISFACTION SURVEY

## 06/08/2018 to 09/08/2018

### Introduction:

Prior to implementing the Environmental Health (EH) Customer Satisfaction Survey, the Southern Nevada Health District (SNHD) EH division did not have a formal method of assessing the regulated industry's perception of SNHD field staff. While customer complaints were handled on a case by case basis by EH management, the overall performance of EH field staff as a whole was not evaluated. The purpose of the survey was to allow the regulated community the opportunity to provide anonymous feedback concerning SNHD EH field staff performance. The data obtained could be utilized to identify weaknesses and inform training if necessary.

### Methods:

Questions were designed to assess EH Food Operations Staff customer service. An anonymous survey was created utilizing Survey Monkey and a link to the survey was provided via email after every inspection (916) and reinspection (914). A survey link was also included on the last page of every 916 and 914 report. If the facility was unable to receive the information via email, EH administrative personnel were instructed to mail or fax a copy of the survey containing the same questions and format as the online version. The survey was initiated November 2017 and was evaluated quarterly. Revisions to the survey questions were made based on the results from the previous quarter. The results below are for the period June 8, 2018 to September 8, 2018.

### Results and Conclusions:

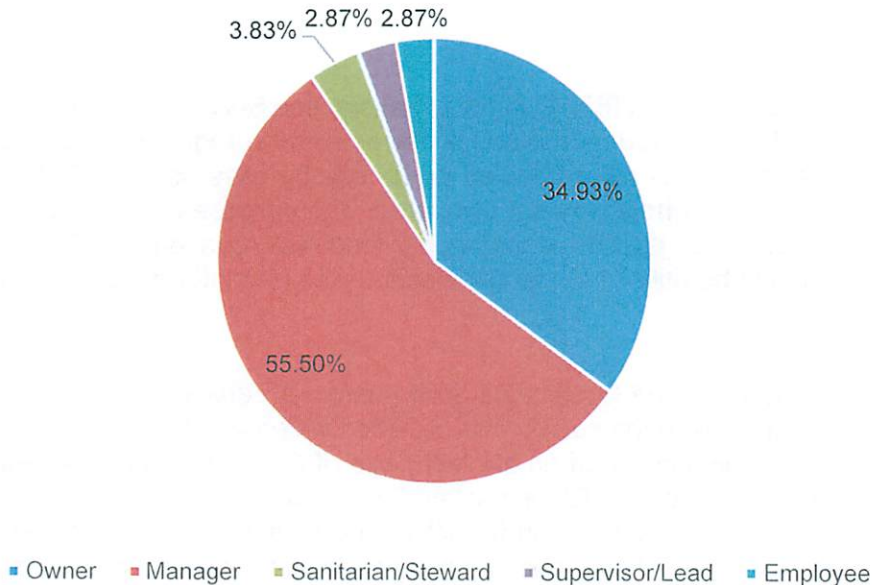
The survey provided valuable quantifiable data concerning the SNHD EH field staff customer service skills including communication, knowledge, and professionalism. Additional details about the survey participants were also obtained via multiple demographic and firmographic questions.

During field inspections, SNHD Food Operations staff interacted with a variety of facility representatives. Question 1 was designed to discern the role of the respondent within the regulated food establishment.

N=209

Q1. What is your role in the facility?								
	06/08/2018-07/07/2018		07/08/2018-08/07/2018		08/08/2018-09/08/2018		06/08/2018-09/08/2018	
	Answered	67	Answered	73	Answered	69	Answered	209
Answer Choices	Skipped	0	Skipped	0	Skipped	0	Skipped	0
Owner	40.30%	27	35.62%	26	28.99%	20	34.93%	73
Manager	50.75%	34	56.16%	41	59.42%	41	55.50%	116
Sanitarian/Steward	4.48%	3	2.74%	2	4.35%	3	3.83%	8
Supervisor/Lead	1.49%	1	4.11%	3	2.90%	2	2.87%	6
Employee	2.99%	2	1.37%	1	4.35%	3	2.87%	6

Q1. What is your role in the facility?  
Results Throughout Survey



Results suggest that respondents represent a variety of positions within the facility. Responses indicated that a majority (55.5%) of people responding were at the manager level. However, facility owners also comprised a large portion (~35%) of respondents. Employees, sanitation/stewards, and supervisor/leads composed very similar portions of the remaining approximately 10%.

To promote confidence in results, it was important to receive as many survey responses as possible. SNHD set a primary goal of obtaining feedback from at least 10% of the facilities receiving inspections and reinspections. However, the SNHD permitting system made calculating accurate response rates difficult. Simply calculating the “percent surveys per 916s and 914s completed” as shown in the second chart below assumes a one to one ratio between inspections/reinspections completed and surveys submitted. This assumption may not be valid. Many food establishments have multiple permits and therefore, may receive more than one 916 or 914 but are unlikely to submit more than one survey per visit.

Question 2 was designed to determine how many inspections and reinspections were completed during a single visit and thus increase accuracy in calculated response rates. Each “answer choice” was multiplied with the “number of responses” to determine the product as reported below. If the respondent answered “>10” then 11 was used to determine the product. The sum of the “product of answer choices and surveys completed” was calculated to represent “the total inspections accounted for”. The “percent of inspected facilities completing survey” was then calculated by dividing the “number of surveys completed” by the calculated “total inspections accounted for”.

**Environmental Health (EH) Division Monthly Report for December 2018 – Attachment A**

N=209

Q2. How many inspections did you receive on the last visit?								
Answer Choices	06/08/2018-07/07/2018		07/08/2018-08/07/2018		08/08/2018-09/08/2018		06/08/2018-09/08/2018	
	Number of responses	* Product of answer choice and surveys completed	Number of responses	* Product of answer choice and surveys completed	Number of responses	* Product of answer choice and surveys completed	Number of responses	* Product of answer choice and surveys completed
1	35	35	41	41	29	29	105	105
2	10	20	15	30	23	46	48	96
3	3	9	8	24	5	15	16	48
4	8	32	5	20	3	12	16	64
5	6	30	2	10	2	10	10	50
6	0	0	0	0	0	0	0	0
7	0	0	0	0	2	14	2	14
8	0	0	0	0	2	16	2	16
9	4	36	1	9	0	0	5	45
10	1	10	0	0	0	0	1	10
>10	0	0	1	11	3	33	4	44
<b>Total inspections accounted for</b>	172		145		175		492	

Date Range:	Number of 916 and 914 combined	Number of Surveys Completed	% Surveys per 916 and 914 completed	Total Inspections Accounted For	* Percent of Inspected Facilities Completing Survey
06/08/2018 – 07/07/2018	2154	68	3.1%	172	7.99%
07/08/2018-08/07/2018	2356	76	3.2%	145	6.15%
08/07/2018 – 09/08/2018	2359	69	2.9%	175	7.41%
06/08/2018-09/08/2018	7049	209	3.0%	492	6.98%

Responses to Question 2 indicate that nearly half of the facilities received more than one inspection/reinspection. While the calculated “% surveys per 916 and 914 completed” was low (3%), the “percent of inspected facilities completing survey” (~7%) was much closer to the SNHDs 10% goal.

In addition, to receiving as many responses as possible, it was important to ensure that feedback was received from a variety of establishment types. Questions 3 and 4 were designed to provide insight into the type of facilities that were responding to the survey.

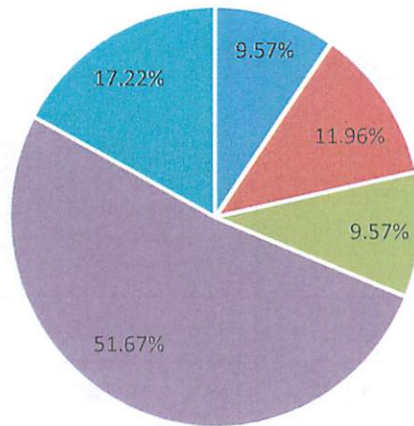


Environmental Health (EH) Division Monthly Report for December 2018 – Attachment A

N=209

Q3. What type of facility do you identify with?								
Answer Choices	06/08/2018-07/07/2018		07/08/2018-08/07/2018		08/08/2018-09/08/2018		06/08/2018-09/08/2018	
	Answered	67	Answered	73	Answered	69	Answered	209
	Skipped	0	Skipped	0	Skipped	0	Skipped	0
Corporate chain 2-5 outlets	10.45%	7	12.33%	9	5.80%	4	9.57%	20
Corporate chain >5 outlets	5.97%	4	16.44%	12	13.04%	9	11.96%	25
Franchise	11.94%	8	4.11%	3	13.04%	9	9.57%	20
Individual/Family owned	46.27%	31	58.90%	43	49.28%	34	51.67%	108
Resort/Casino	25.37%	17	8.22%	6	18.84%	13	17.22%	36

Q3. What type of facility do you identify with?



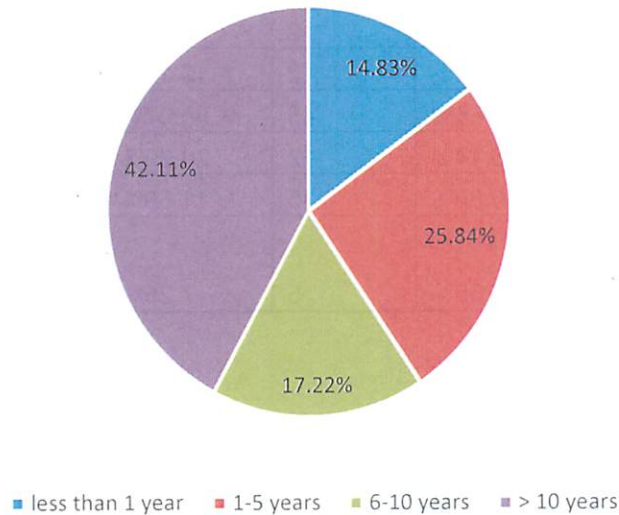
■ Corporate chain 2-5 outlets ■ Corporate chain >5 outlets ■ Franchise ■ Individual/Family owned ■ Resort/Casino

Environmental Health (EH) Division Monthly Report for December 2018 – Attachment A

N=209

Q4. How long has the facility been in business?								
	06/08/2018-07/07/2018		07/08/2018-08/07/2018		08/08/2018-09/08/2018		06/08/2018-09/08/2018	
Answer Choices	Answered	67	Answered	73	Answered	69	Answered	209
	Skipped	0	Skipped	0	Skipped	0	Skipped	0
< 1 year	14.93%	10	10.96%	8	18.84%	13	14.83%	31
1-5 years	28.36%	19	32.88%	24	15.94%	11	25.84%	54
6-10 years	22.39%	15	13.70%	10	15.94%	11	17.22%	36
> 10 years	34.33%	23	42.47%	31	49.28%	34	42.11%	88

Q4. How long has the facility been in business?



The results to Questions 3 and 4 indicate that a variety of establishment types chose to participate in the survey. Approximately half (51%) of the respondents were affiliated with an independently owned establishment. Corporate chains and franchises accounted for approximately 30% of the responses and the remaining respondents were associated with resorts/casinos (~17%). In addition, almost half (42%) of the respondents were affiliated with a facility that had been in business for greater than 10 years and 26% had been in business 1-5 years. Facilities in business for 6 to 10 years and less than 1 year had the least amount of participation but still represented a significant portion of responses (17% and ~15% respectively).

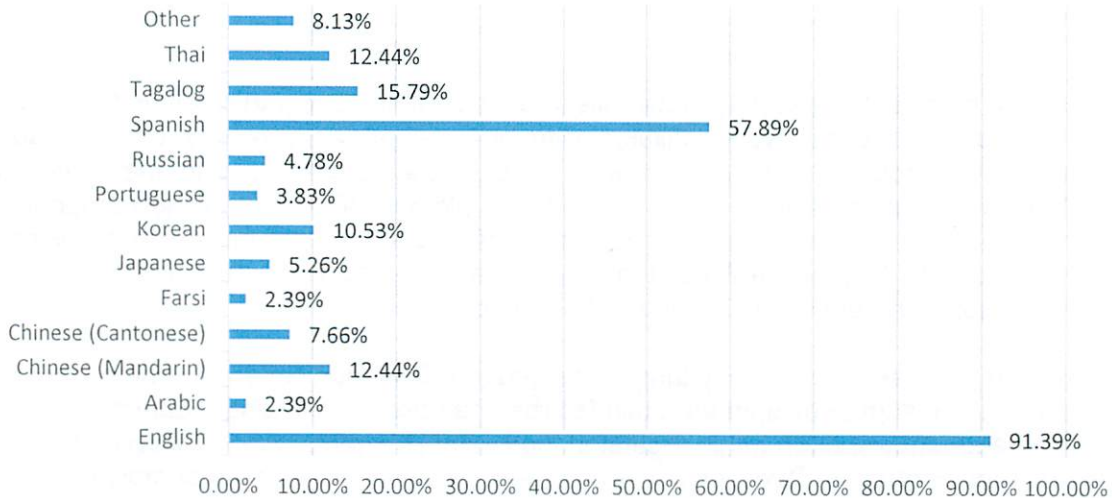
Clark County has a very diverse population with many languages spoken. Communication is vital to ensuring public health. However, the variety of languages spoken within facilities can pose a challenge. Questions 5 and 6 were designed to assess the languages spoken within regulated food establishments. While Question 5 aimed to gauge the variety of the different languages, Question 6 was created to determine the single primary language spoken within the facility.

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N=209

Q5. What languages are spoken in your facility? (select all that apply)								
	06/08/2018-07/07/2018		07/08/2018-08/07/2018		08/08/2018-09/08/2018		06/08/2018-09/08/2018	
	Responses		Responses		Responses		Responses	
Answer Choices	Answered	67	Answered	73	Answered	69	Answered	209
	Skipped	0	Skipped	0	Skipped	0	Skipped	0
English	89.55%	60	94.52%	69	89.86%	62	91.39%	191
Arabic	0.00%	0	1.37%	1	5.80%	4	2.39%	5
Chinese (Mandarin)	14.93%	10	8.22%	6	14.49%	10	12.44%	26
Chinese (Cantonese)	10.45%	7	5.48%	4	7.25%	5	7.66%	16
Farsi	1.49%	1	0.00%	0	5.80%	4	2.39%	5
Japanese	2.99%	2	4.11%	3	8.70%	6	5.26%	11
Korean	5.97%	4	8.22%	6	17.39%	12	10.53%	22
Portuguese	2.99%	2	2.74%	2	5.80%	4	3.83%	8
Russian	1.49%	1	2.74%	2	10.14%	7	4.78%	10
Spanish	56.72%	38	61.64%	45	55.07%	38	57.89%	121
Tagalog	10.45%	7	16.44%	12	20.29%	14	15.79%	33
Thai	19.40%	13	6.85%	5	11.59%	8	12.44%	26
Other (please specify)	10.45%	7	6.85%	5	7.25%	5	8.13%	17

Q5. What languages are spoken in your facility?  
(select all that apply)



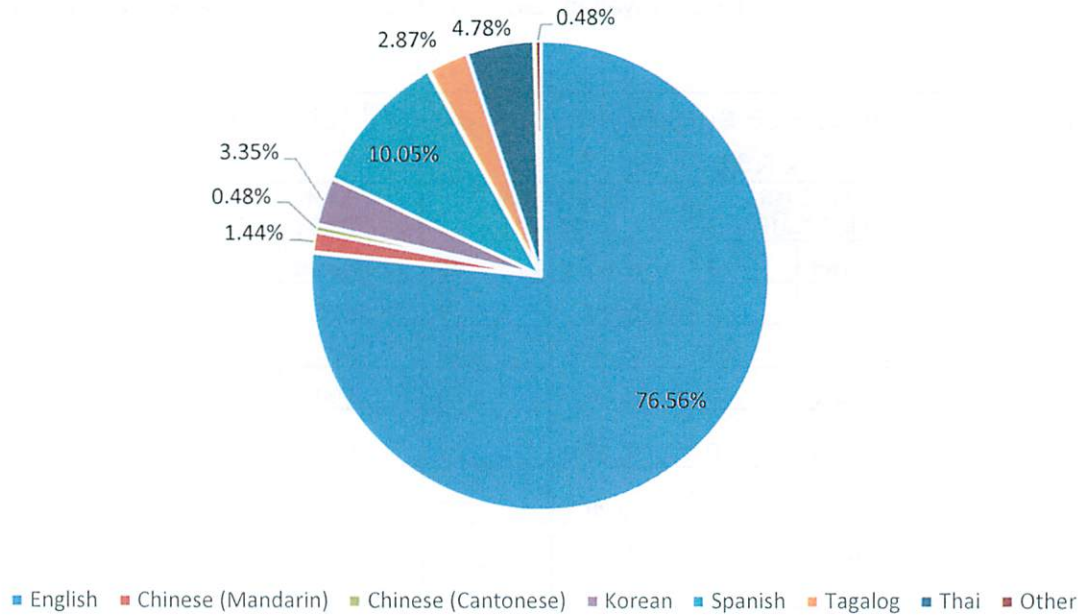
**Environmental Health (EH) Division Monthly Report for December 2018 – Attachment A**

While a majority of respondents (91%) reported English as a language spoken within the facility, the responses to Question 5 demonstrated the diversity of food handlers within Clark County facilities. Respondents reported that Spanish was spoken in over half the facilities (~58%). In addition, each specified language was selected by at least 5 respondents. Furthermore, a variety of languages were specified under the “other” answer choice including: Hindi, Marathi, Amharic, Samoan-Pilipino-Hawaiian, German, French, Vietnamese, English, and Thai.

N=209

Q6. What is the primary language spoken in your facility? (choose one)								
	06/08/2018-07/07/2018		07/08/2018-08/07/2018		08/08/2018-09/08/2018		06/08/2018-09/08/2018	
Answer Choices	Answered	67	Answered	73	Answered	69	Answered	209
	Skipped	0	Skipped	0	Skipped	0	Skipped	0
English	67.16%	45	80.82%	59	81.16%	56	76.56%	160
Arabic	0.00%	0	0.00%	0	0.00%	0	0.00%	0
Chinese (Mandarin)	0.00%	0	0.00%	0	4.35%	3	1.44%	3
Chinese (Cantonese)	0.00%	0	1.37%	1	0.00%	0	0.48%	1
Farsi	0.00%	0	0.00%	0	0.00%	0	0.00%	0
Japanese	0.00%	0	0.00%	0	0.00%	0	0.00%	0
Korean	1.49%	1	1.37%	1	7.25%	5	3.35%	7
Portuguese	0.00%	0	0.00%	0	0.00%	0	0.00%	0
Russian	0.00%	0	0.00%	0	0.00%	0	0.00%	0
Spanish	20.90%	14	6.85%	5	2.90%	2	10.05%	21
Tagalog	0.00%	0	6.85%	5	1.45%	1	2.87%	6
Thai	10.45%	7	2.74%	2	1.45%	1	4.78%	10
Other (please specify)	0.00%	0	0.00%	0	1.45%	1	0.48%	1

Q6. What Is The Primary Language Spoken In Your Facility?  
(Choose One)



The responses to Question 6 indicated that 23.4% of the facilities completing the survey spoke a primary language other than English. It is also important to note that the survey was only offered in English. Therefore, it is likely that facilities without English as a primary language are underrepresented by the survey results. Since the majority of EH staff only speak English and the SNHD Food Regulations are only available in English, conveying food safety and promoting compliance with regulations may be difficult.

The purpose of Question 7 was to determine if respondents felt that language diversity negatively influenced communication between EH and facility staff. Since language should not be an obstacle for facilities that primarily communicate in English, participation in Question 7 was limited to facilities indicating another primary language.

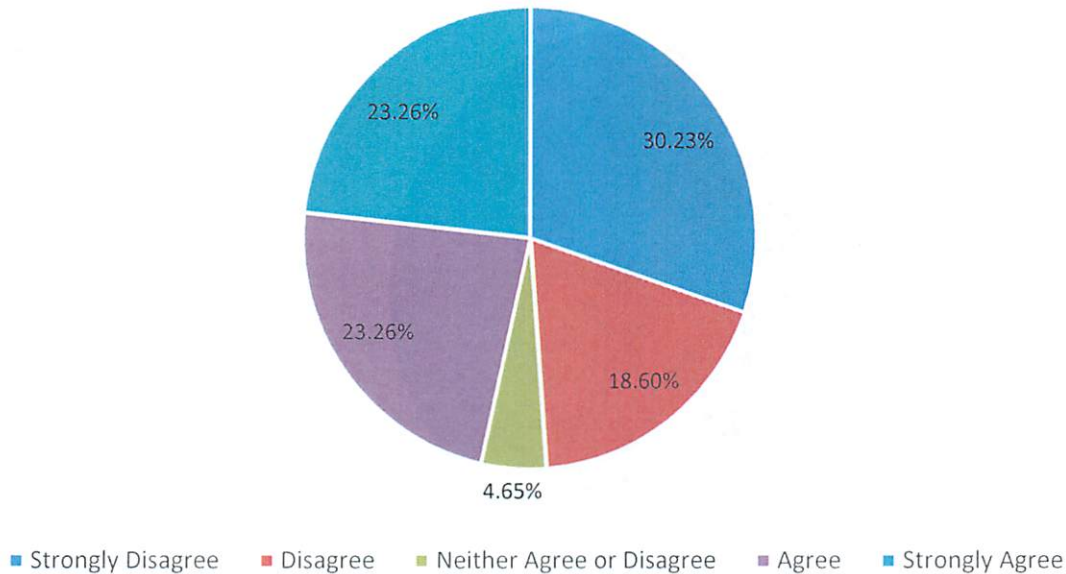
N=43

Q7. During your last inspection, language was a barrier in written or verbal communication with the inspector.

Date Range	Answer Choices										Responses			
	Strongly Disagree		Disagree		Neither Agree or Disagree		Agree		Strongly Agree		Total	Weighted Average	Answered	Skipped
06/08/2018-07/07/2018	20.00%	4	20.00%	4	5.00%	1	30.00%	6	25.00%	5	20	3.2	20	47
7/08/2018-08/07/2018	54.55%	6	27.27%	3	9.09%	1	9.09%	1	0.00%	0	11	1.73	11	62
08/08/2018-09/08/2018	25.00%	3	8.33%	1	0.00%	0	25.00%	3	41.67%	5	12	3.5	12	57
06/08/2018-09/08/2018	30.23%	13	18.60%	8	4.65%	2	23.26%	10	23.26%	10	43	2.91	43	166

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Q7. During your last inspection, language was a barrier in written or verbal communication with the inspector.



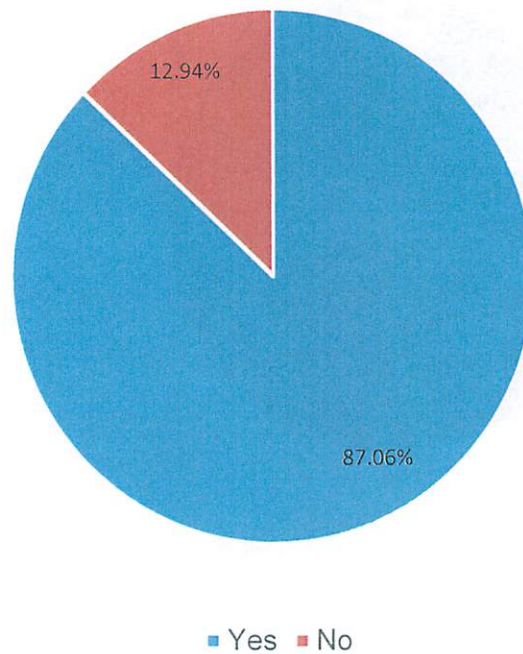
Despite SNHD attempts to compensate for differences in languages via nonverbal communication, translated guidance documents, and translation services, language barriers remain a significant challenge. Nearly half of the responses to Question 7 indicated that language was a communication barrier. Regardless of the language spoken, SNHD’s goal is to continually improve written and verbal communication with facilities.

There are occasions when facility staff request that the 916 or 914 reports be sent to a person that was not present during the inspection. Since the survey link was provided with the reports, respondents to the survey may not have been present during the inspection. Therefore, the survey respondent may not have directly observed staff performance during the visit. Question 8 assesses whether the respondent was present during the inspectors visit.

N=201

Q8. Were you Present During the Last Inspection?								
Answer Choices	06/08/2018-07/07/2018		07/08/2018-08/07/2018		08/08/2018-09/08/2018		06/08/2018-09/08/2018	
	Responses		Responses		Responses		Responses	
	Answered	64	Answered	70	Answered	67	Answered	201
	Skipped	3	Skipped	3	Skipped	2	Skipped	8
Yes	92.19%	59	88.57%	62	80.60%	54	87.06%	175
No	7.81%	5	11.43%	8	19.40%	13	12.94%	26

Q8. Were You Present During The Last Inspection?



The results indicated that approximately 13% of the respondents were not present during the inspection and therefore, would not be directly aware of the inspectors performance during the visit. Since the two following questions were designed to assess SNHD staff's interaction and performance during inspections, participation in Questions 9 and 10 were limited to respondents that were present. If 'no' was marked for Question 8, then the two following questions were automatically skipped.

For Question 9, respondents were asked to rate their agreement with multiple statements. Answer choices ranged from "strongly disagree" (1 point) to "strongly agree" (5 points).

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N=165

Q9. Based on your last inspection, please rate your agreement with the following statements:

	Date Range	Answered	Skipped	Strongly Disagree		Disagree		Neither Agree or Disagree		Agree		Strongly Agree		Total	Weighted Average
During the inspection, the inspector helped me to understand the requirements based on the regulations.	06/08/2018-07/07/2018	56	11	3.57%	2	3.57%	2	10.71%	6	16.07%	9	66.07%	37	56	4.38
	07/08/2018-08/07/2018	59	14	5.08%	3	0.00%	0	1.69%	1	8.47%	5	84.75%	50	59	4.68
	08/08/2018-09/08/2018	50	19	12.00%	6	0.00%	0	2.00%	1	12.00%	6	74.00%	37	50	4.36
	06/08/2018-09/08/2018	165	44	6.67%	11	1.21%	2	4.85%	8	12.12%	20	75.15%	124	165	4.48
During the inspection, the inspector was open to receiving and answering questions.	06/08/2018-07/07/2018	56	11	3.57%	2	3.57%	2	10.71%	6	14.29%	8	67.86%	38	56	4.39
	07/08/2018-08/07/2018	59	14	5.08%	3	0.00%	0	0.00%	0	11.86%	7	83.05%	49	59	4.68
	08/08/2018-09/08/2018	50	19	12.00%	6	0.00%	0	4.00%	2	8.00%	4	76.00%	38	50	4.36
	06/08/2018-09/08/2018	165	44	6.67%	11	1.21%	2	4.85%	8	11.52%	19	75.76%	125	165	4.48
The inspector was knowledgeable about the regulations.	06/08/2018-07/07/2018	56	11	3.57%	2	1.79%	1	10.71%	6	19.64%	11	64.29%	36	56	4.39
	07/08/2018-08/07/2018	59	14	5.08%	3	0.00%	0	0.00%	0	13.56%	8	81.36%	48	59	4.66
	08/08/2018-09/08/2018	50	19	10.00%	5	2.00%	1	0.00%	0	12.00%	6	76.00%	38	50	4.42
	06/08/2018-09/08/2018	165	44	6.06%	10	1.21%	2	3.64%	6	15.15%	25	73.94%	122	165	4.5

Q9. Based On Your Last Inspection, Please Rate Your Agreement With The Following Statements:

- During the inspection, the inspector helped me to understand the requirements based on the regulations.
- During the inspection, the inspector was open to receiving and answering questions.
- The inspector was knowledgeable about the regulations.



Overall, respondents were satisfied with the inspector’s knowledge of the regulations and ability to convey regulatory requirements. In addition, responses indicated that the inspectors were willing to receive and answer questions. On average, respondents rated their agreement between 4 (agree) and 5 (strongly agree) for all three statements.

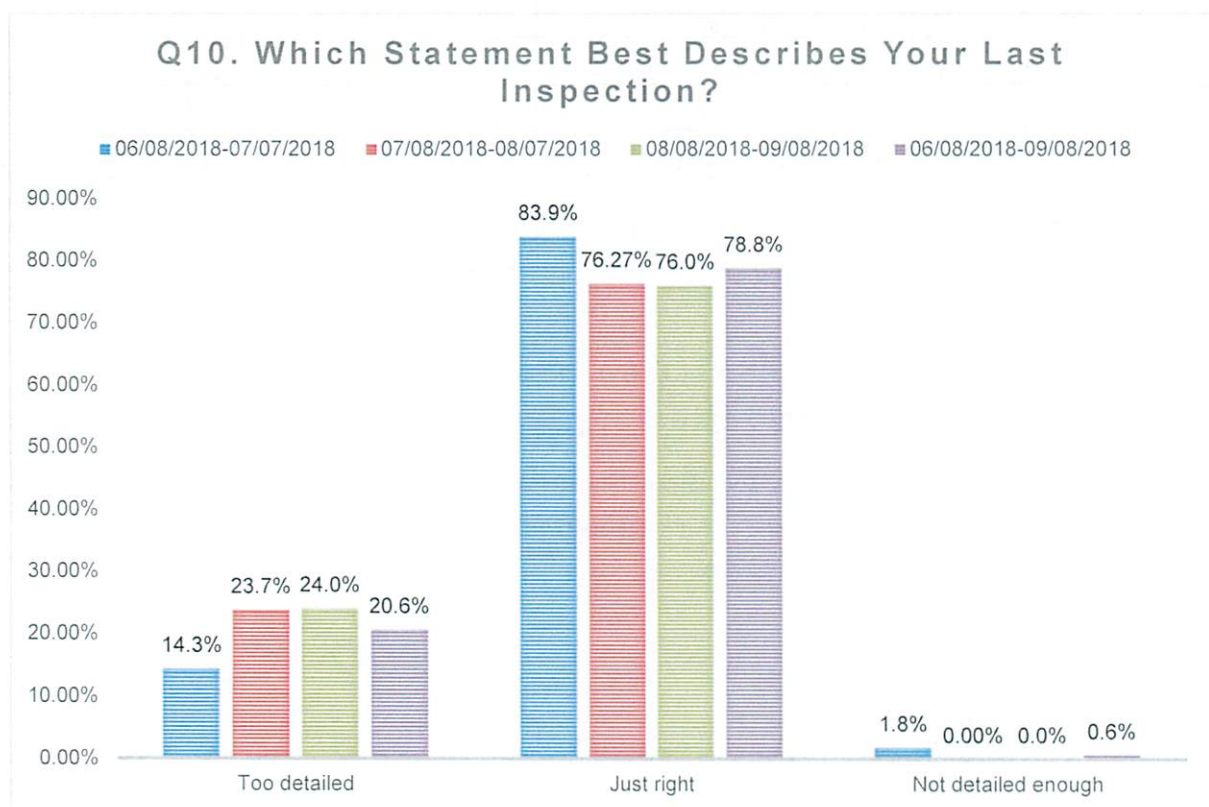


**Environmental Health (EH) Division Monthly Report for December 2018 – Attachment A**

While Question 9 references inspector interactions and knowledge, Question 10 was designed to describe the level of detail during the inspection.

N=165

Q10. Which statement best describes your last inspection?								
Answer Choices	06/08/2018-07/07/2018		07/08/2018-08/07/2018		08/08/2018-09/08/2018		06/08/2018-09/08/2018	
	Responses		Responses		Responses		Responses	
	Answered	56	Answered	59	Answered	50	Answered	165
	Skipped	11	Skipped	14	Skipped	19	Skipped	44
Too detailed	14.29%	8	23.73%	14	24.00%	12	20.61%	34
Just right	83.93%	47	76.27%	45	76.00%	38	78.79%	130
Not detailed enough	1.79%	1	0.00%	0	0.00%	0	0.61%	1



A majority of respondents (~79%) felt that the level of detail during the inspection was “just right”. Approximately 21% described the inspection as “too detailed” and less than 1% felt that the inspection was “not detailed enough.”

While Questions 9 and 10 are specific to onsite visits, Question 11 is based on written communication and accessibility of resources. Since their presence during the inspection should not influence the response, Question 11 was available to all survey respondents. Similar to Question 9, respondents were asked to rate their agreement with multiple statements in Question 11. Answer choices ranged from “strongly disagree” (1 point) to “strongly agree” (5 points).

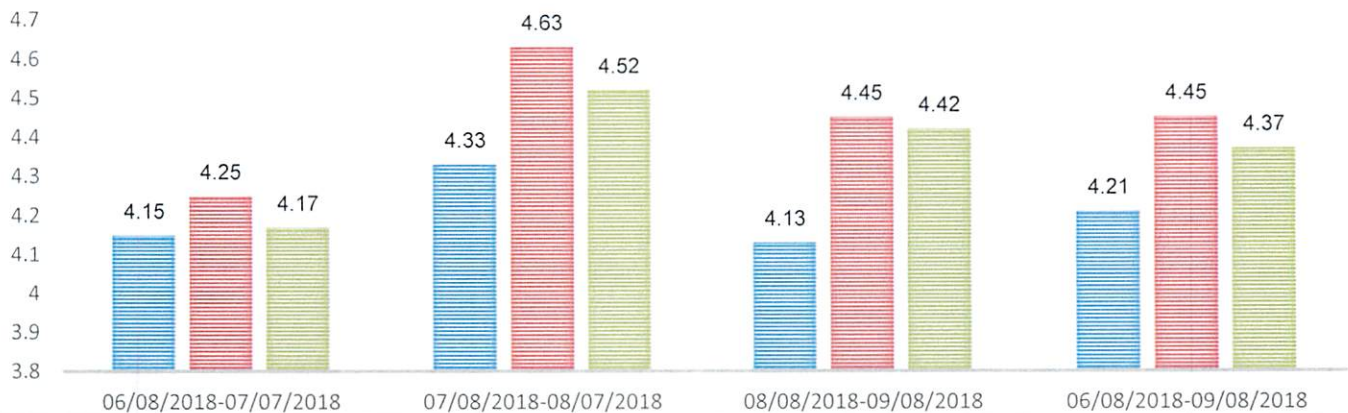
**Environmental Health (EH) Division Monthly Report for December 2018 – Attachment A**

N=165

Q11. Rate your agreement with the following statements:															
	Date Range	Answered	Skipped	Strongly Disagree		Disagree		Neither Agree or Disagree		Agree		Strongly Agree		Total	Weighted Average
The last inspection report is a fair representation of the facility.	06/08/2018-07/07/2018	60	7	5.00%	3	3.33%	2	10.00%	6	35.00%	21	46.67%	28	60	4.15
	07/08/2018-08/07/2018	67	6	4.48%	3	1.49%	1	8.96%	6	26.87%	18	58.21%	39	67	4.33
	08/08/2018-09/08/2018	60	9	10.00%	6	5.00%	3	5.00%	3	21.67%	13	58.33%	35	60	4.13
	06/08/2018-09/08/2018	187	22	6.42%	12	3.21%	6	8.02%	15	27.81%	52	54.55%	102	187	4.21
I know how to correct violations described in the inspection report.	06/08/2018-07/07/2018	60	7	3.33%	2	1.67%	1	13.33%	8	30.00%	18	51.67%	31	60	4.25
	07/08/2018-08/07/2018	67	6	2.99%	2	0.00%	0	2.99%	2	19.40%	13	74.63%	50	67	4.63
	08/08/2018-09/08/2018	60	9	5.00%	3	0.00%	0	5.00%	3	25.00%	15	65.00%	39	60	4.45
	06/08/2018-09/08/2018	187	22	3.74%	7	0.53%	1	6.95%	13	24.60%	46	64.17%	120	187	4.45
I know how to access Health District resources on the website (handouts, standard operating procedures, logs, etc.).	06/08/2018-07/07/2018	60	7	5.00%	3	0.00%	0	11.67%	7	40.00%	24	43.33%	26	60	4.17
	07/08/2018-08/07/2018	67	6	2.99%	2	0.00%	0	4.48%	3	26.87%	18	65.67%	44	67	4.52
	08/08/2018-09/08/2018	60	9	8.33%	5	0.00%	0	0.00%	0	25.00%	15	66.67%	40	60	4.42
	06/08/2018-09/08/2018	187	22	5.35%	10	0.00%	0	5.35%	10	30.48%	57	58.82%	110	187	4.37

**Q11. Rate Your Agreement With The Following Statements:**

- The last inspection report is a fair representation of the facility.
- I know how to correct violations described in the inspection report.
- I know how to access Health District resources on the website (handouts, standard operating procedures, logs, etc.).



**Environmental Health (EH) Division Monthly Report for December 2018 – Attachment A**

Overall, respondents agreed with the reports portrayal of the facility and reported having the knowledge to correct violations. In addition, responses indicated that the person taking the survey was aware of how to access SNHD resources. On average, respondents rated their agreement between 4 (agree) and 5 (strongly agree) for all three statements.

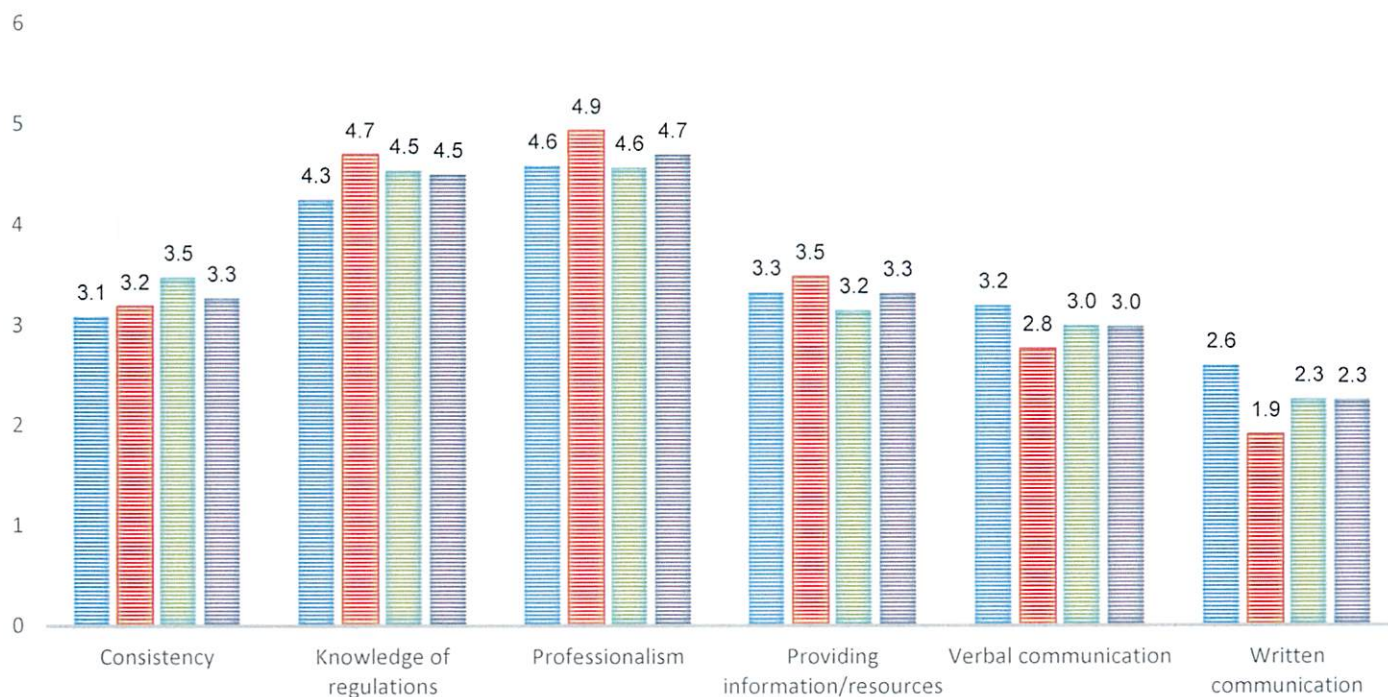
Questions 12 asked respondents to rank several staff performance categories from most favorable to least favorable. The highest score indicates that the category was ranked best when compared to the other answer choices.

N=187

<b>Q12. Based on your experience, how would you rank the Southern Nevada Health District's performance in the following areas?</b>				
<b>Answer Choices</b>	<b>06/08/2018-07/07/2018</b>	<b>07/08/2018-08/07/2018</b>	<b>08/08/2018-09/08/2018</b>	<b>06/08/2018-09/08/2018</b>
	<b>Answered 45</b>	<b>Answered 47</b>	<b>Answered 54</b>	<b>Answered 146</b>
	<b>Skipped 22</b>	<b>Skipped 26</b>	<b>Skipped 15</b>	<b>Skipped 63</b>
Consistency	3.09	3.19	3.48	3.27
Knowledge of regulations	4.25	4.7	4.54	4.5
Professionalism	4.59	4.94	4.57	4.7
Providing information/resources	3.33	3.49	3.15	3.32
Verbal communication	3.2	2.77	3	2.99
Written communication	2.6	1.91	2.26	2.25

## Q12. Based On Your Experience, How Would You Rank The Southern Nevada Health District's Performance In The Following Areas?

■ 06/08/2018-07/07/2018 ■ 07/08/2018-08/07/2018 ■ 08/08/2018-09/08/2018 ■ 06/08/2018-09/08/2018



Staff knowledge of regulations and professionalism received the highest ranking, followed by provision of information/resources and consistency. Although written communication received the lowest ranking, it is important to remember that respondents were required to put answer choices in order. Results do not necessarily imply a deficiency in written communication. In addition, positive feedback was received for questions referring to written reports. Furthermore, it is currently unclear what aspects of written communication prompted the low ranking. SNHD is aware that improvements would be beneficial and is currently working to update the website and guidance documents.

### Next Steps:

Due to the overwhelmingly positive feedback from November 2017 to September 2018, specific training for staff was not identified. General communication training was provided to all EH staff July 20, 2018 by Michèle Samarya-Timm (REHS, Masters Certified Health Education Specialist) and focused on improving staff members' abilities to express themselves while performing routine risk-based inspections.

The customer satisfaction survey will transition from the Food Operations program to Solid Waste and Compliance programs (Permitted Disposal Facilities, Restricted Waste Management, Public Accommodations, and Mobile Home Parks) in January 2019.