




Memorandum

Date: July 25, 2019

To: Southern Nevada District Board of Health

From: **Michael Johnson, PhD**, *Director of Community Health*
Joseph P Iser, MD, DrPH, MSc, *Chief Health Officer* 

Subject: Community Health Division Monthly Activity Report – May 2019

I. OFFICE OF CHRONIC DISEASE PREVENTION & HEALTH PROMOTION (OCDPHP)

1. Tobacco Control Program (TCP):

Staff provided technical assistance to The City of North Las Vegas City Council in the development of a tobacco-free parks policy. On May 22, 2019, the council voted unanimously to approve a smoke free parks and recreational facility ordinance. This policy covers 34 parks and recreational locations within the City of North Las Vegas. The ordinance prohibits smoking and tobacco use of any kind, including the use of electronic or vaporized smoking devices at any park, trail or recreational facility if within 100 feet of any of the following, sporting fields, spectator areas, restrooms, entrances to all recreation facilities, all sport and play areas.

Staff developed a social media campaign called “Reject Menthol” has been created and implemented. The “Reject Menthol” initiative highlights facts about the disproportionate use of menthol products within the African American Community. In addition to social media posting, supplementary traditional media was created. Counter-marketing promotion and education will continue through June 2019.

SNHD worked in conjunction with statewide partners to support the passage of SB 263 (e-cigarette/vapor bill) during the 2019 legislative session. Among the most important provisions of the law are the following: Taxes electronic cigarettes (e-cigarettes, hookahs, vape pens) and various related components as “Other Tobacco Products (OTP)” at a rate of 30% wholesale. Studies show that increasing the price of tobacco products reduces consumption especially among youth. SB 263 also requires retailers selling alternative nicotine or vapor products obtain a tobacco retailer license; Establishes a penalty for the licensee for underage tobacco sales; Establishes requirements for selling other tobacco products using the Internet; Includes e-cigarettes/vapor products under the Nevada Clean Indoor Air Act. (i.e. you cannot vape where you cannot smoke in Nevada); and makes an annual appropriation for tobacco prevention and control for \$2.5 million for SFY20 and SFY21.

2. Chronic Disease Prevention Program (CDPP):

The Slam Dunk Health Program wrapped up in May. The program encourages students to be active and eat fruits and vegetables and is sponsored by the Las Vegas Aces WNBA team and in partnership with the Clark County School District (CCSD). A total of 568 classrooms in 102 CCSD elementary schools signed up for the program totaling 13,315 students. Winning classrooms from each grade were recognized and received tickets to a Las Vegas Aces basketball game. Two Aces players made a classroom visit to the grand prize- winning classroom in May.

The Walk and Roll program, a partnership with the CCSD Safe Routes to School Program also wrapped up in May. The program was implemented at 9 local CCSD elementary schools established walking and biking programs at the school and encouraged students to walk or bike to school. Pre, mid and post data was collected for evaluation purposes. An average of 876 students at all the schools walked or biked to school prior to the program. During the program, an average of 971 students walked or biked to school and after the program ended, walking and biking rates continued to increase to an average of 1,031 students.

CDPP staff also worked with the University of Cooperative Extension to conduct 4 SPAN-ET (School Physical Activity and Nutrition – Environment) assessments at local elementary schools, two of which were conducted in May. The assessment involves assessing the physical activity and nutrition environment at the schools and working with school administration to identify opportunities to make improvements.

CDPP staff facilitated the Partners for a Healthy Nevada (PHN) coalition and the PHN School Wellness Taskforce meetings in May. Eighteen people attended the School Wellness Taskforce meeting and 32 people attended the PHN coalition meeting. Topics on the PHN agenda included an advocacy update on the Nevada Legislative Session, a presentation on the REACH-funded Health Impact Assessment and a summary of the Move Your Way campaign launch in Southern Nevada. The PHN School Wellness Taskforce has developed several materials to support organizations/programs working in local schools including a draft one-page flyer of the CCSD Wellness Policy, a draft of a PowerPoint presentation on the CCSD Wellness Policy, and an updated grid of CCSD elementary schools which have all been posted on a shared Google drive for task force members.

In May, OCDPP staff participated in the final 3 events of the Move Your Way campaign. On May 3, staff participated in the SNHD Baby Fest event (estimated 500 participants) and the Cinco de Mayo event at Shadow Rock Park (estimated 350 participants). On May 4th, staff participated in Get Outdoors Nevada Day in Boulder City (approximately 600 attendees). Also, in May OCDPP staff promoted and participated in a farmer's market/produce food distribution event in the Pathways from Poverty service area. Over 100 families received produce including apples, yams, oranges and orange juice at the event. The farmers market/food distribution is a partnership between Metro, Three Square and other Pathway from Poverty organizational partners.

CDPP staff has work collaboratively with SNHD Informatics, IT and Clinical Services staff to support implementation of the SNHD EHR. OCDPP staff developed model questions related to tobacco, diabetes, and hypertension which were shared with SNHD Clinical Services. E-referral to the Tobacco Quitline from SNHD went live in April. A process for

receiving referrals from the EHR for clients who indicate that they have prediabetes, diabetes and/or hypertension was finalized and CDDP staff developed a protocol and Standard Operating Procedure for responding to EHR referrals from Clinical Services. A Chronic Disease Resource List was developed and provided to SNHD Clinical Services staff who provide it to appropriate clients during their clinic visit. In May 15 follow up packets were mailed to SNHD clients who indicated they had prediabetes, diabetes and/or hypertension.

CDDP staff provided a diabetes Maps workshop at the Heinrich YMCA on May 24th. Eight participants attended (7 repeats and one new participant). CDDP staff will facilitate a Spanish-language Maps diabetes workshop in June.

Multiple media campaigns promoting CDDP programs, initiatives and activities were began airing during May. Media campaigns included messages to promote safe walking and biking to school, physical activity and our online physical activity programs, heart health and cardiovascular awareness and prevention. Campaigns are ongoing.

II. OFFICE OF EPIDEMIOLOGY AND DISEASE SURVEILLANCE MONTHLY REPORT

A. Surveillance and Investigations- June 2019 Activities Report

Office of Disease Surveillance

Morbidity Surveillance	June 2018	June 2019		FY17-18	FY18-19	
Chlamydia	1,157	936	↓	13,238	13,469	↑
Gonorrhea	431	340	↓	4,993	5,262	↑
Primary Syphilis	24	14	↓	201	233	↑
Secondary Syphilis	23	10	↓	366	300	↓
Early Non-Primary, Non-Secondary ¹	42	17	↓	457	419	↓
Syphilis Unknown Duration or Late ²	56	29	↓	616	680	↑
Congenital Syphilis (presumptive)	4	0	↓	19	24	↑
New Active TB Cases Counted (<15 yo)	0	0	→	1	3	↑
Number of TB Active Cases Counted (>=15 yo)	4	0	↓	69	44	↓

¹ Early Non-Primary, Non-primary, Non-Secondary=CDC changed the case definition from early Latent Syphilis to Early Non-Primary, Non-Secondary

² Syphilis Unknown Duration or Late=CDC changed the case definition from Late Latent Syphilis to Syphilis Unknown Duration or Late

Moms and Babies -- OEDS -- Data

Moms and Babies Surveillance	June 2018	June 2019		FY17-18	FY18-19	
HIV Pregnant Cases	4	1	↓	44	29	↓
Syphilis Pregnant Cases	7	5	↓	97	134	↑

Perinatally Exposed to HIV	4	2	↓	38	28	↓
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OEDS – Monthly Data

Monthly DIIS Investigations CT/GC/Syphilis/HIV	Contacts	Clusters ¹	Reactors/ Symptomatic/ X-ray ²	OOJ /FUP ³
Chlamydia	35	1	48	0
Gonorrhea	30	1	80	2
Syphilis	73	2	141	0
HIV/AIDS (New to Care/Returning to Care)	23	0	41	35
Tuberculosis	2	0	19	0
TOTAL	163	4	329	37

¹Clusters= Investigations initiated on named clusters (clusters= named contacts who are not sex or needle sharing partners to the index patient)

²Reactors/Symptomatic= Investigations initiated from positive labs or reported symptoms

³OOJ= Investigations initiated Out of Jurisdiction reactors/partners/clusters; Fup= Investigations initiated to follow up on previous reactors, partners, or clusters

B. Prevention-Community Outreach/Provider Outreach/Education

This month OEDS and community partners observed National HIV Testing day on June 27th. Events included testing and awareness at various community partners, The Center and the SHC. Promotion for the observance included social media, a press release and media advisory. OEDS staff provided interviews with media via SNHD OOC. National HIV Testing Day (NHTD) is an annual observance to encourage people of all ages to get tested for HIV and to know their status.

In addition, this month OEDS launched the Collect2Protect Project for self-collection of gonorrhea and chlamydia. OEDS started with a pilot project at The Center the week of June 17th. Instructions and kits are provided to clients presenting for HIV testing at The Center and risks are reviewed by OEDS staff. The objective of the Collect2Protect Project is to offer the self-collection kits online via the SNHD website once branded. Lastly, the OEDS PrEP Team launched the PrEP academic detailing campaign to community partners and providers. The goal is to increase awareness and availability of PrEP (pre-exposure prophylaxis) and PEP(post exposure prophylaxis) to those communities most affected by HIV.

C. High Impact Screening Sites (HIV, STD, Hepatitis):

- a. Mondays – Thursdays: The Center - LGBTQ Community of Nevada – Rapid HIV; target population - MSM, transgender.
- b. Mondays and Wednesdays: Trac-B Exchange - Rapid HIV and Hepatitis C testing; target population - IDU.
- c. Saturdays: Bi-weekly testing at CCDC for HIV, Syphilis, Hep C. Target Population

-incarcerated.

- d. 6/6 OEDS/AHF collaborated on an event at Salvation Army offering HIV and Hep C testing targeting the homeless and drug using population.
- e. 6/10: OEDS staff collaborated with AHF on the MTU to target MSM at Entourage Bath house for HIV and syphilis testing. Target population is MSM.
- f. 6/25 OEDS staff collaborated with the Harm Reduction Outreach team and offered testing at The Giving Project for Hep C. Harm Reduction Outreach in collaboration with community partners HELP of Southern Nevada, Foundation for Recovery, AIDS Healthcare Foundation, and Trac-B Exchange - HIV/HCV testing, distribution of Sterile syringes, Needle Recovery, Naloxone, Homeless services. Target population - Homeless, IDU.
- g. 6/16: OEDS staff collaborated with Center for Behavioral Health to offer Hep C testing. OEDS partnered with AHF on the MTU to offer testing at Entourage Bath House targeting high risk MSM.
- h. 6/23: OEDS staff collaborated with AHF to offer testing at Democracy Prep School targeting youth.
- i. 6/25: Harm Reduction monthly Outreach event with community partners AHF, HELP of SO. NV, Trac-B and SNHD/OEDS.
- j. 6/27: National HIV Testing Day observance. Testing events included The Center, AFAN, Community Counseling Center, Huntridge Family Clinic, Trac-B and SHC.
- k. 6/28: OEDS/AHF collaborating at an event targeting MSM in Commercial Center providing HIV and syphilis testing on the MTU.

D. Staff Facilitated/Attended Training/Presentations

- a. 6/2-6/5 Council for State and Territorial Epidemiologists annual conference attended by 8 OEDS staff members.
- b. 6/2: Educational Outreach Tabling for International Whore's Day March and Rally for approximately 50 attendees by 2 staff members.
- c. 6/2: Presentation "Data to Action for Behavioral Health Indicators" by Jessica Johnson at the Council of State and Territorial Epidemiologists (CSTE) Conference in Raleigh, North Carolina. 50 people in attendance.
- d. 6/2: Motivational Interviewing Training by Rebecca Cruz-Nañez for two SNHD resident physician interns.
- e. 6/3-6/4 Disease Surveillance Supervisor met with the NVDPBH HIV/AIDS Epidemiology Capacity Coordinator to regarding HIV surveillance.
- f. 6/5: Peer Recovery Specialist Enhanced Training on STI/HIV/Hepatitis for Peer Recovery Specialists by Jennifer Gratzke at Foundation for Recovery. Approximately 16 in attendance.
- g. 6/5: Heat Illness Awareness Presentation by Rebecca Cruz-Nañez for SNHD Environmental Health Division with approximately 45 EH personnel in attendance.

- h.** 6/6: iCircle Update and Discussion for Sexual Health Clinic at SNHD. Approximately 20 SNHD SHC staff members in attendance.
- i.** 6/6: Attended 18th Annual Nevada Child Abuse Prevention & Safety Conference "Taking Resilience to the Next Level" by 2 OEDS Staff at Nevada State College.
- j.** 6/7: Congenital Syphilis Presentation and Academic Detailing Session for Sunrise Children's Foundation WIC Program by Sandy King and Cheryl Radeloff. 8 in attendance. 1 OEDS staff audited presentation.
- k.** 6/10: Cardio-Pulmonary Resuscitation (CPR) certified training completed by Rebecca Cruz-Nañez at SNHD
- l.** 6/11: Presentation by Cheryl Radeloff and Rebecca Cruz-Nanez "HIV and STDs" for the Rape Crisis Center Advocates Training. Approximately 20 in attendance.
- m.** 6/13-6/14: Phlebotomy Training for 4 SNHD Staff : Gilead provided a non-branded staff educational presentation on Hep C and facilitating linkages to care. Speaker was Dr. Farabi; 11 staff attended.
- n.** 6/14: Congenital Syphilis Presentation and Academic Detailing Session for Nevada Health Centers WIC Program by Sandy King and Joshua Montgomery. 60 in attendance. 1 OEDS staff audited presentation.
- o.** 6/14: Jessica Johnson became certified as a facilitator for SAMHSA's Substance Abuse Prevention Specialist curriculum.
- p.** 6/17: iCircle Update and Discussion for OEDS. Approximately 10 SNHD SHC staff members in attendance.
- q.** 6/19: OEDS invited presentation at NYE CC meeting in Pahrump, NV on Harm Reduction Vending Project by Jessica Johnson. 20 people in attendance.
- r.** 06/19: Jennifer Gratzke attended Homeless Alliance Provider meeting attended by multiple organizations and 1 OEDS staff member.
- s.** 6/25: iCircle Update and Discussion for OEDS. Approximately 15 SNHD SHC staff members in attendance.
- t.** 6/25: Rebecca Cruz-Nañez. attended U.S. Consumer Product Safety Commission (CPSC) conference call as the State Designee Representative for Nevada - 32 in attendance.
- u.** 6/26: Attendance at Mental Health First Aid at Montevista Hospital. 4 OEDS in attendance and 13 community partners including Dignity Health and Opportunity Village.
- v.** 6/27: Focus Group Interview at Community Counseling Center to fulfill elements of the Nevada Integrated HIV Prevention and Care Plan 2017-2021. 2 OEDS lead the session and 12 participants in attendance.
- w.** 6/27: Media Interview for National HIV Testing Day for Fox News 5 by Cheryl Radeloff.
- x.** 6/27: "Hepatitis C" Presentation for Huntridge Clinic by Jennifer Gratzke. 2 in attendance.
- y.** 6/14, 6/20, 6/27: Weekly Communication Training by Rebecca Cruz-Nañez with OEDS staff member.

HIV Prevention -- OEDS – Data

Prevention - SNHD HIV Testing	June 2018	June 2019		FY17-18	FY18-19	
Outreach/Targeted Testing	710	267	↓	9,368	8,897	↓
Clinic Screening (SHC/FPC/TB)	703	387	↓	7,971	5,969	↓
Outreach Screening (Jails, SAPTA)	103	0	↓	1,523	952	↓
TOTAL	1,516	654	↓	18,862	15,818	↓
Outreach/Targeted Testing POSITIVE				138	116	↓
Clinic Screening (SHC/FPC/TB) POSITIVE				78	48	↓
Outreach Screening (Jails, SAPTA) POSITIVE				19	15	↓
TOTAL POSITIVES				235	179	↓

E. Disease and Outbreak Investigations

A. Disease reports and updates:

- a. ***Hepatitis A, outbreak declared:*** In 2019, Clark County has seen significant increases in Acute Hepatitis A cases. On June 19, 2019, SNHD declared an outbreak of HAV in those experiencing homelessness and/or drug use. As of June 30, 2019, there are 50 cases of Acute HAV associated with this outbreak. 94% were identified as drug users, and 74% were identified as homeless. The Office of Epidemiology and Disease Surveillance is working with the Clinical Services division to do targeted vaccine outreach to this population. OEDS has also engaged local hospitals and their emergency room departments encouraging vaccine administration to those most at risk for this disease. This outbreak is ongoing.
- b. ***Acute Flaccid Myelitis (AFM):*** SNHD received a report on June 13th of possible meningitis from a hospital. Upon further review by OEDS staff, it was determined this could be a suspect AFM case. OEDS worked with the hospital and CDC to procure specimens for testing and records for CDC to review and determine case status. CDC lab results were received, and all Enterovirus testing was negative. Case status is still pending review from CDC.
- c. ***Acute gastroenteritis at local resort and casino:*** On June 26th, OEDS received reports of increased gastrointestinal illnesses between 06/20 and 06/23 at an event hosted by the local resort and casino. SNHD's OEDS investigators collaborated with SNHD's Environmental Health to interview ill persons and conducted facility wide environmental assessments. The last reported case of illness was 06/24. Communication with the resort and casino's management suggest no additional complaints have been reported since the event. This investigation has been closed since no additional cases have been reported since last reported illness.

B. Non-communicable Reports and updates:

- a. **Narcan training:** The Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Substance Abuse Prevention (CSAP) awarded SNHD with the First Responders-Comprehensive Addiction and Recovery Act (FR-CARA) grant in



May 2019: Clark County Disease Statistics*

Disease	2017		2018		2019	
	May	YTD	May	YTD	May	YTD
VACCINE PREVENTABLE						
Haemophilus influenzae, invasive	0	14	1	7	1	12
Hepatitis A	0	0	6	17	16	38
Hepatitis B, acute	3	8	3	10	2	7
Hepatitis B, chronic	4	31	27	149	42	166
Influenza	65	553	52	847	27	807
Influenza-associated death in a person under 18	0	0	0	0	0	2
Meningococcal disease (<i>N. meningitidis</i>)	0	2	0	3	0	1
Mumps	0	1	0	4	0	0
Pertussis	2	26	4	19	1	22
SEXUALLY TRANSMITTED						
Chlamydia	1,077	5,174	1,218	5,666	1,102	5,636
Gonorrhea	387	1,742	451	2,090	433	2,151
Syphilis (Early non-primary, non-secondary)	37	172	40	176	23	162
Syphilis (Primary & Secondary)	38	194	41	226	36	217
CONGENITAL CONDITIONS						
Congenital Syphilis	0	8	1	5	1	7
Hepatitis C, Perinatal Infection	0	0	0	1	0	1
ENTERICS						
Amebiasis	2	4	0	1	0	4
Campylobacteriosis	13	48	14	42	15	49
Cryptosporidiosis	1	3	1	1	0	2
Giardiasis	4	14	2	21	5	20
Rotavirus	7	43	9	15	12	25
Salmonellosis	12	57	28	63	7	37
Shiga toxin-producing <i>E. coli</i> (STEC)	7	13	5	7	3	10
Shigellosis	11	24	12	40	7	22
Typhoid	0	1	0	0	0	2
Vibriosis (Non-cholera <i>Vibrio</i> species infection)	0	0	0	0	0	1
Yersiniosis	1	2	0	0	0	1
OTHER						
Coccidioidomycosis	8	47	9	82	4	33
Ehrlichiosis/Anaplasmosis	0	0	0	1	0	0
Encephalitis	0	1	0	1	0	0
Exposure, Chemical or Biological	0	0	0	3	0	5
Hepatitis C, acute	1	10	4	7	2	8
Hepatitis C, chronic	0	0	337	1,197	581	2,256
Hepatitis E, acute	0	0	0	1	0	0
Invasive Pneumococcal Disease	18	110	13	120	18	128
Lead Poisoning	9	57	22	84	13	55
Legionellosis	3	8	1	5	1	5
Listeriosis	0	0	0	1	1	4
Lyme Disease	1	7	1	6	0	3
Malaria	0	0	1	1	1	2
Meningitis, Aseptic	3	9	1	10	6	19
Meningitis, Bacterial Other	3	9	1	11	2	13
Meningitis, Fungal	1	1	1	4	0	4
Q Fever, acute	1	1	0	0	0	1
RSV	16	925	9	1,277	16	1,813
Rabies, animal	0	1	2	3	0	0
Rabies, exposure to a rabies susceptible animal	0	0	1	1	0	0
Spotted Fever Rickettsiosis	0	1	0	1	0	1
Streptococcal Toxic Shock Syndrome (STSS)	7	15	2	17	2	18
Streptococcal Disease, invasive, Group B	0	0	0	2	0	0
West Nile Virus neuroinvasive disease	0	1	0	0	0	1

*The total number of cases presented in this report is subject to change due to possible delays in reporting and processing. Cases are counted based on CDC case definitions. HIV/AIDS/TB case counts are provided on a quarterly basis.

~Diseases not reported in the past two years or during the current reporting period are not included in this report.

~~Hepatitis C, chronic, numbers have changed due to surveillance decisions within the Office of Epidemiology & Disease Surveillance.

~~~Monthly rates & monthly rate comparisons were removed from the Clark County Disease Statistics monthly report after July 2018 due to new data suppression rules adopted by the Office of Epidemiology & Disease Surveillance. Please see the Clark County Disease Statistics quarterly report for quarterly rates & quarterly rate comparisons.



September of 2017. The purpose of this 4-year FR-CARA grant is to train and distribute naloxone to first responders and members of other key community sectors throughout Nevada to better respond to the large-scale burden of opioid overdoses. Trainings continue in Nye County communities, Tonopah, and numerous first responder, medical, and treatment organizations.

The following Narcan trainings/distributions have taken place in the month of June:

6/6/19: NLV PD (66 trained, 140 distributed)

6/13/19: Panaca Town Center (7 trained, 50 distributed)

6/24/19: AG's Office (30 distributed)

**C. Other:**

- a. **Communicable Disease Statistics:** May 2019 disease statistics are attached. (see table 1 and 2)

**III. OFFICE OF PUBLIC HEALTH INFORMATICS (OPHI)**

- A. Continue to maintain and enhance Trisano disease surveillance system.
- B. Continue to maintain and enhance Electronic Message Staging Area (EMSA) systems.
- C. Continue to work on the Southern Nevada Public Health Laboratory (SNPHL) Laboratory Information Management System (LIMS) system to interoperate with other internal and external systems. Informatics is also assisting with the changes that need to be made to the LIMS to accommodate new instruments and testing offered by the Clinical Laboratory.
- D. Assist SNPHL with data extraction and reporting needed for the laboratory.
- E. Migrations to the new SNHD SFTP server continued.
- F. Work with IT to implement the Electronic Health Record (EHR) system.
- G. Assist Office of Epidemiology and Disease Surveillance (OEDS), Office of EMS/Trauma System, Environmental Health (EH) and Clinic Services with various data requests, data exports, and report generation.
- H. Continue to work on the iCircle web application for OEDS, and transmission of HIV testing data to CDC.
- I. Continue to work with the State to migrate STD data into the State NEDSS Base System (NBS).
- J. Update an online dashboard and provider report card for childhood lead poisoning prevention project.
- K. Update the Nevada Opioid Overdose Surveillance Dashboard.
- L. Developed Informatics Office QA/QI 2019-2020 Indicator report.
- M. Work with OEDS and IT to develop Expedited Partner Therapy (EPT) application. EPT is the clinical practice of treating the sex partners of patients diagnosed with chlamydia or gonorrhea by providing prescriptions or medications to the patient to take to his/her partner without the health care provider first examining the partner.

- N. Developed Informatics Office EMSA workflow guide and provided an EMSA training to OEDS staff.
- O. Established an Electronic Lab Report (ELR) exchange interface between SNHD and Clark County Detention Center (CCDC).

**IV. OFFICE OF EMERGENCY MEDICAL SERVICES & TRAUMA SYSTEM (OEMSTS)**

**1. June Meetings:**

**A. Drug/Device/Protocol Committee (DDP)**

The DDP Committee assists the OEMSTS, the Medical Advisory Board (MAB), and the QI Directors Committee in researching, developing, and editing new and existing protocols. Members include volunteer representatives from permitted agencies, receiving hospitals, and individuals involved with the training of EMS professionals.

The Committee met to discuss designation criteria for stroke and sepsis patients. In addition, a Doctor of Pharmacy was voted in as an ex-officio member to advise on medication issues.

**B. Priority Dispatch Taskforce**

The Taskforce met to discuss issues related to medical telemetry channels and frequency capacity.

**COMMUNITY HEALTH – OEMSTS - Fiscal Year Data**

| June EMS Statistics                   | June<br>2018 | June<br>2019 |   | FY17-<br>18<br>(June) | FY18-<br>19<br>(June) |   |
|---------------------------------------|--------------|--------------|---|-----------------------|-----------------------|---|
| Total certificates issued             | 32           | 38           | ↑ | 1695                  | 3205                  | ↑ |
| New licenses issued                   | 33           | 36           | ↑ | 424                   | 852                   | ↑ |
| Renewal licenses issued (recert only) | 0            | 0            | = | 1085                  | 1951                  | ↑ |
| Active Certifications: EMT            | 601          | 599          | ↓ |                       |                       |   |
| Active Certifications: Advanced EMT   | 1417         | 1428         | ↑ |                       |                       |   |
| Active Certifications: Paramedic      | 1293         | 1725         | ↑ |                       |                       |   |
| Active Certifications: RN             | 38           | 44           | ↑ |                       |                       |   |
| Driver Only                           | 0            | 40           | ↑ |                       |                       |   |

**V. OFFICE OF PUBLIC HEALTH PREPAREDNESS (OPHP)**

**1. Planning and Preparedness:**

- A. On June 2nd, OPHP conducted a MEGA full-scale point of dispensing (POD) exercise at the UNLV Thomas and Mack Center. This exercise focused on collaboration with Clark County to train approximately 200 County employees to staff a POD during a public health emergency where oral antibiotics are being dispensed to the public. This is the first time SNHD has collaborated with the County in this type of training and the first time the Thomas and Mack Center was tested as one of our public PODs. As a result of this exercise, the Health District has adopted an Interlocal Agreement with Clark County to utilize non-essential

County personnel to staff PODs if there were a need for a large-scale medical countermeasures campaign.

- B. OPHP participated in a webinar on Public Health's response in a Mass Shooting presented by NACCHO. OPHP discussed the operational support of members of SNHD across the community providing support during and after the event.
- C. OPHP planned and participated in an Ebola Virus Disease exercise with a front-line facility, Las Vegas HAZMAT, and an Ebola Assessment Hospital along with the Southern Nevada Public Health Lab and the Office of Epidemiology and Disease Surveillance. The exercise was to test the initial protocols for identifying an Ebola affected patient, coordinate with OEDS for potential EVD identification, coordinate patient transport, and admit to the Ebola Assessment Hospital.
- D. OPHP met with Encompass Health Rehabilitation of Henderson to conduct a tour and walk through of the facility to plan an Active Shooter Table Top Exercise (TTX) soon. This will assist the organization in updating/refining the Emergency Operations Plan post-exercise.
- E. OPHP met with Nevada Kidney Disease/Hypertension Center, Canyon Vista Rehab, Davita Dialysis, Spring Valley Surgery, and Trellis Skilled Nursing Facility to discuss the Center for Medicare & Medicaid Services (CMS) Conditions of Participation for emergency preparedness for this type of healthcare provider type. The meeting included a discussion on membership/participation in the Southern Nevada Healthcare Preparedness Coalition, Community Wide Exercise, the Hazard Vulnerability Analysis, and Communication Plan, each area required to meet CMS requirements.
- F. OPHP participated in the McCarran Airport Table Top Exercise – After Hours Tram Incident – as a community representative. Members of the McCarran Response team including Las Vegas Metropolitan Police, Las Vegas Fire, and numerous other representatives walked through the incident and McCarran's response to the event with its internal assets and external partners. The Southern Nevada Health District is a member of the McCarran's Emergency Operations Center and this training provides a comprehensive understanding of the response mechanism for the airport.
- G. OPHP provided instructional support to the City of Las Vegas Office of Emergency Management and the State of Nevada by presenting and certifying members of the Incident Command System – ICS 300, Intermediate Incident Command System for Expanding Incidents. Members of the community including SNHD were present for the two-day training course.
- H. OPHP participated in the Joint Commission Survey for Emergency Management and Environment of Care at Summerlin hospital demonstrating a whole community approach to emergency preparedness in the jurisdiction. Talking points and notes were developed for an informational page to provide a review to the community healthcare partners on the points of interest the Joint Commission is surveying with acute care hospitals.
- I. OPHP met with Encompass Health Rehabilitation of Henderson to discuss the Centers for Medicare & Medicaid Services (CMS) Conditions of Participation for Emergency Preparedness. The discussions covered membership in the Southern Nevada Healthcare Preparedness Coalition, emergency preparedness exercises, the coalition's Hazard Vulnerability Analysis, and Communication Plan.
- J. OPHP staff continue to conduct the monthly Incident Command Team, Directors, Managers and Supervisors call-down notifications. Call-down drills are deliverables

required by CRI grant to ensure public health staff readiness to respond to a disaster. This monthly test of the system ensures that District staff contact information is current in the event a notification to all SNHD staff is needed to be able to respond to public health threat.

- K. OPHP Senior Planner and Training Officer in participation with the City of Las Vegas OEM continue to conduct monthly ICS 300 and/or 400 classes. Once certified, OPHP will be able to independently provide ICS trainings for the Southern Nevada Health District workforce along with members of the community.
- L. OPHP staff continue to work with the Southern Nevada Counterterrorism Center to provide public health updates and alerts of local, national, and global interest.
- M. OPHP staff continue to participate in the monthly Southern Nevada Healthcare Preparedness Coalition, Homeland Security Urban Area Security Initiative, Local Emergency Preparedness Committee, Southern Nevada Adult Mental Health Coalition and individual hospital emergency management committee meetings.
- N. OPHP staff continue to work with SNHD Quality Improvement Coordinator to develop improvement plan action items for performance measures based on feedback provided from most recent Public Health Accreditation Board Accreditation site visit.

## **2. PHP Training and PH Workforce Development:**

A. OPHP Education and Training: OPHP Training Officers continue to conduct new employee Emergency Preparedness Training, Intro to OPHP departmental presentations, co-instruct Regional Decon Training for SNHPC partners, conduct CPR and First Aid courses at the Health District; support community partners to conduct and ensure SNHD staff have opportunities to attend training for agency required ICS courses.

- 3. **Employee Health Nurse:** SNHD staff continue to receive respirator fit testing (35), annual TB testing (17), and other workforce vaccinations based on Health District response to these threats (70).

## **4. Grants and Administration:**

A. OPHP is working with finance to close out end of the fiscal for multiple sub-grants from the state that ended on June 30, 2019. Currently, we are waiting to receive new Notice of Awards for FY20 PHEP, CRI, and HPP grants from the state. Personnel costs will continue to be paid but no major purchases will occur until we have fully executed awards.

B. OPHP staff is working to complete End of Year progress reports for FY19 grants.

## **5. Medical Reserve Corps of Southern Nevada (MRC of So NV):**

A. In June, five MRC volunteers assisted SNHD at the Main and East immunization clinic, Main Foodhandler Safety office, and Pharmacy. Nine MRC volunteers and the MRC Coordinator participated in the SNHD OPHP Mega POD preparedness exercise. MRC volunteer hours total 133 with a monetary value of \$3,188.67. The MRC Coordinator planned for coming events, recruited and processed new volunteers, and sent the monthly newsletter and bulletins.

B. CERT and Las Vegas Metropolitan Police Department Volunteer programs collaborated with MRC on the antibiotic packing for the first-responder emergency stockpile. Three non-MRC volunteers totaled 11.75 hours (\$290.11).

**IV. VITAL STATISTICS**

June 2019 showed a 6 decrease in birth certificate sales in comparison to June 2018. Death certificate sales showed an 8 decrease for the same time frame. SNHD received revenues of \$43,264 for birth registrations, \$22,039 for death registrations; and an additional \$3,705 in miscellaneous fees for the month of June.

**COMMUNITY HEALTH Vital Statistics Program – Fiscal Year Data**

| Vital Statistics Services | June 2018 | June 2019 |   | FY 17-18 (June) | FY 18-19 (June) |   |
|---------------------------|-----------|-----------|---|-----------------|-----------------|---|
| Births Registered         | 2,150     | 2,135     | ↓ | 26,927          | 26,810          | ↓ |
| Deaths Registered         | 1,371     | 1,415     | ↑ | 18,344          | 18,099          | ↓ |

| Vital Statistics Services                       | June 2018    | June 2019    |          | FY17-18 (June) | FY18-19 (June) |          |
|-------------------------------------------------|--------------|--------------|----------|----------------|----------------|----------|
| Birth Certificates Sold (walk-in)               | 3,321        | 3,185        | ↓        | 39,374         | 39,725         | ↑        |
| Birth Certificates Mail                         | 142          | 76           | ↓        | 1,737          | 1,137          | ↓        |
| Birth Certificates Online Orders                | 1,128        | 1,043        | ↓        | 12,429         | 13,923         | ↑        |
| Birth Certificates Billed                       | 117          | 120          | ↑        | 1,254          | 1,232          | ↓        |
| <b>Birth Certificates Number of Total Sales</b> | <b>4,708</b> | <b>4,424</b> | <b>↓</b> | <b>54,794</b>  | <b>56,017</b>  | <b>↑</b> |
| Death Certificates Sold (walk-in)               | 1,258        | 1,186        | ↓        | 14,267         | 13,082         | ↓        |
| Death Certificates Mail                         | 66           | 74           | ↑        | 978            | 732            | ↓        |
| Death Certificates Online Orders                | 6,208        | 5,632        | ↓        | 73,428         | 75,062         | ↑        |
| Death Certificates Billed                       | 31           | 33           | ↑        | 307            | 324            | ↑        |
| <b>Death Certificates Number of Total Sales</b> | <b>7,563</b> | <b>6,925</b> | <b>↓</b> | <b>88,980</b>  | <b>89,200</b>  | <b>↑</b> |

**COMMUNITY HEALTH Vital Statistics Program - Fiscal Year Data**

| Vital Statistics Sales by Source              | June 2018 | June 2019 |   | FY17-18 (June) | FY18-19 (June) |   |
|-----------------------------------------------|-----------|-----------|---|----------------|----------------|---|
| Birth Certificates Sold Valley View (walk-in) | 70.5%     | 72%       | ↑ | 71.9%          | 70.9%          | ↓ |
| Birth Certificates Mail                       | 3%        | 1.7%      | ↓ | 3.2%           | 2%             | ↓ |
| Birth Certificates Online Orders              | 24%       | 23.6%     | ↓ | 22.7%          | 24.9%          | ↑ |
| Birth Certificates Billed                     | 2.5%      | 3%        | ↑ | 2.3%           | 2%             | ↓ |
| Death Certificates Sold Decatur (walk-in)     | 16.6%     | 17.1%     | ↑ | 16%            | 14.7%          | ↓ |
| Death Certificates Mail                       | .9%       | 1.1%      | ↑ | 1.1%           | .8%            | ↓ |
| Death Certificates Online Orders              | 82.1%     | 81.3%     | ↓ | 82.5%          | 84.2%          | ↑ |
| Death Certificates Billed                     | .4%       | .5%       | ↑ | .3%            | .4%            | ↑ |



**COMMUNITY HEALTH Vital Statistics Program – Fiscal Year Data**

| Revenue                            | June<br>2018     | June<br>2019     |          | FY 17-18<br>(June) | FY 18-19<br>(June) |          |
|------------------------------------|------------------|------------------|----------|--------------------|--------------------|----------|
| Birth Certificates (\$20)          | \$94,160         | \$88,480         | ↓        | \$1,095,880        | \$1,120,340        | ↑        |
| Death Certificates (\$20)          | \$151,260        | \$138,500        | ↓        | \$1,779,600        | \$1,784,000        | ↑        |
| Births Registrations (\$13)        | \$46,527         | \$43,264         | ↓        | \$562,675          | \$557,596          | ↓        |
| Deaths Registrations (\$13)        | \$22,883         | \$22,039         | ↓        | \$272,181          | \$269,013          | ↓        |
| Miscellaneous                      | \$3,687          | \$3,705          | ↑        | \$44,925           | \$49,288           | ↑        |
| <b>Total Vital Records Revenue</b> | <b>\$318,517</b> | <b>\$295,988</b> | <b>↓</b> | <b>\$3,755,264</b> | <b>\$3,780,237</b> | <b>↑</b> |

\*Number will change once everything comes through (corrected 6.25.19)

**COMMUNITY HEALTH Passport Program – Fiscal Year Data**

**Passport Services**

Passport Services processed 734 passport applications and provided 404 photos

| Revenue                                  | June<br>2018 | June<br>2019    |  | FY 17-18<br>(June) | FY 18-19<br>(June) |  |
|------------------------------------------|--------------|-----------------|--|--------------------|--------------------|--|
| Passport Execution/Acceptance fee (\$35) | n/a          | \$25,690        |  | n/a                | \$219,345          |  |
| Passport Photo Fee (\$12)                | n/a          | \$4,848         |  | n/a                | \$40,896           |  |
| <b>Total Passport Program Revenue</b>    | <b>n/a</b>   | <b>\$30,538</b> |  | <b>n/a</b>         | <b>\$260,241</b>   |  |

\*SNHD opened Passport Services on August 1, 2018.