



# Memorandum

**Date:** August 27, 2020

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

**From:** **Michael Johnson, PhD**, *Director of Community Health* *M.J.*  
**Fermin Leguen, MD, MPH**, *Acting Chief Health Officer* *FL*

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**Subject:** Community Health Division Monthly Activity Report – July 2020

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

### **Chronic Disease Prevention Program (CDPP)**

CDPP staff continues to support walkability efforts in Henderson by conducting walking audits in priority census tracts. Walking audits are used to supplement GIS data collected during the REACH grant-funded 10- minute walk assessment project. As a result of those efforts, the City of Henderson updated their Parks and Recreation Master Plan to include recommendations that would increase the number of Henderson residents who have 10-minute walkable access to a park, trail, recreation center or open space. Additionally, the City of Henderson adopted a goal in their strategic plan to increase the percentage of residents who have 10-minute walkable access to a park, trail, recreation center or open space by 3% each year. As a result of our collaborative efforts with the City of Henderson, in the last year the city has exceeded that goal and increased the percentage of residents with 10-minute walkable access to a park, trail, recreation center or open space by 8%.

As part of our efforts to prepare to resume operations of many of our programs that were suspended due to the pandemic, staff developed Safety Protocols for three specific programs - the Barbershop Health Outreach Program (BSHOP), the Diabetes Self-Management & Education (DSME) Program (classes) and the Comunidad en Accion faith-based program. Each protocol is specific to the individual program and includes the safety and sanitation protocols that we will utilize to ensure safe operations when it is appropriate to resume modified classes and programs. The protocols were all developed using CDC guidance and state and local public health requirements as appropriate. They also complied with specific requirements by an appropriate oversight agency (i.e. the Nevada Cosmetology Board). The safety protocols were shared with our Division Director and we will make modifications as necessary. We plan to resume DSME classes and BSHOP screenings in the fall however we were able to resume the Comunidad en Accion workshops in June at TCM and ICLV churches. These workshops are focused on physical activity and healthy eating and are conducted entirely in Spanish. We partner with local promotoras to teach the curriculum which was developed to be implemented in places of faith. Three workshops were held during June. Two were in-person workshops because

the facility was large enough to allow for social distancing. A third workshop was held virtually. A total of 38 people attended one of the June workshops. CDDP staff continues to work with promotoras in both churches to identify policy, systems and environmental change strategies to improve the nutrition and physical activity environment at both churches that are hosting the Comunidad en Accion program.

The Soda Free Summer (SFS) (Verano sin Soda) initiative launched in June. The initiative raises awareness of the dangers of excess sugar-sweetened beverage (SSB) consumption and encourages people to reduce or eliminate their SSB consumption over the summer months in place of healthier beverage options. The initiative was developed to reach the Hispanic community and will run through July and typically runs annually over the summer months. This year, the initiative is largely virtual and includes a partnership with promotoras working in the community. In June staff provided a virtual training on SSB and the initiative to 20 promotoras. Promotoras then conducted 2 virtual community meetings and provided education to over 50 people in June who also pledged to reduce or eliminate their SSB consumption during the summer. In addition, SNHD and the promotora organization posted several messages in Spanish on our social media accounts to promote the initiative. As a result of our efforts, over 2,283 people were reached in June.

#### **Tobacco Control Program (TCP)**

The largest source of electronic referrals to the Nevada Tobacco Quitline in the State of Nevada come from University Medical Center. Patients are screened and tobacco user contact information is securely transferred electrically to the Quitline. A media campaign promoting the Quitline aired on social media and online radio (Spotify and Pandora) in June resulting in over 1 million impressions. A cessation specialist then follows up with the patient to offer free telephonic cessation services for anyone 13 and older. In June, 307 referrals were received with 6,122 to date.

In June, staff provided technical assistance to four businesses who expanded smoking or vaping policies. One of these businesses is a local bar that is exempt from the Nevada Clean Indoor Air Act.

Staff worked with 23 multi-unit housing properties to implement smoke-free policies in June. Staff provided smoke-free policy implementation toolkits to over 25 property managers. All properties are listed on the online smoke-free housing directory available on the Get Healthy and Viva Saludable websites. A multi-faceted media campaign began airing in June and will continue through September. Staff has provided technical assistance around the smoke-free housing topic to other communities around the nation at the request of the CDC. The SNHD online smoke-free housing directory currently contains 62,907 smoke-free units available in Southern Nevada.

Staff developed a document summarizing how SNHD worked with businesses given the change in Nevada tobacco law to prohibit vaping under the Nevada Clean Indoor Air Act as a result of SB 263. The law took effect on January 1, 2020. SNHD developed a press release, social media campaign, sent letters to businesses, updated pertinent webpages and collateral materials. This report was developed at the request of the bill sponsor.

### **Community Outreach**

In response to the impact of the COVID-19 pandemic and related economic fall out on communities of color and older adults in Clark County, OCDPHP quickly and efficiently leveraged multiple resources to launch a community campaign specifically to reach these priority populations. The culturally and linguistically appropriate campaign provided resources for chronic disease prevention and self-management and encouraged people to prioritize their health. The campaign ran throughout June on multiple media mediums including, social media, connected TV, web banners and e-blasts and reached an estimated 764,563 people. As part of the campaign, our Division Director was a guest on the June Healthier Tomorrow radio program to talk specifically about COVID-19 in the African American community. The Healthier Tomorrow radio program is a monthly radio program that airs on KCEP 88.1 FM and is sponsored by the Chronic Disease Prevention Program.

## **II. OFFICE OF EPIDEMIOLOGY AND DISEASE SURVEILLANCE – July 2020 Activities Report**

### **A. Surveillance and Investigations**

#### **1. Number of Confirmed and Probable Cases of Selective Illnesses Reported**

	July 2019	July 2020		FYTD 2019 19-20	FYTD 2020 20-21	
<b>Sexually Transmitted</b>						
Chlamydia	1301	916	↓	1301	916	↓
Gonorrhea	504	349	↓	504	349	↓
Primary Syphilis	19	5	↓	19	5	↓
Secondary Syphilis	40	14	↓	40	14	↓
Early Non-Primary, Non-Secondary <sup>1</sup>	23	7	↓	23	7	↓
Syphilis Unknown Duration or Late <sup>2</sup>	98	10	↓	98	10	↓
Congenital Syphilis (presumptive)	6	3	↓	6	3	↓
<b>Moms and Babies Surveillance</b>						
HIV Pregnant Cases	3	4	↓	3	4	↑
Syphilis Pregnant Cases	17	5	↓	17	5	↓
Perinatally Exposed to HIV	0	0	→	0	0	→
<sup>1</sup> Early Non-Primary, Non-Secondary= CDC changed the case definition from Early Latent Syphilis to Early Non-Primary, Non-Secondary						
<sup>2</sup> Syphilis Unknown Duration or Late=CDC changed the case definition from Late Latent Syphilis to Syphilis Unknown Duration or Late						
<b>Vaccine Preventable</b>						
Haemophilus influenzae, invasive disease	1	0	↓	15	8	↓
Hepatitis A	19	0	↓	84	12	↓
Hepatitis B, acute	1	0	↓	12	1	↓
Hepatitis B, chronic	86	41	↓	358	251	↓
Influenza	10	0	↓	821	800	↓

	July 2019	July 2020		FYTD 2019 19-20	FYTD 2020 20-21	
<b>Meningococcal disease (Neisseria Meningitidis)</b>	0	0	→	1	1	→
<b>Pertussis</b>	3	0	↓	33	4	↓
<b>Enterics</b>						
<b>Campylobacteriosis</b>	16	4	↓	82	50	↓
<b>Giardiasis</b>	9	1	↓	36	16	↓
<b>Rotavirus</b>	9	0	↓	46	13	↓
<b>Salmonellosis</b>	22	11	↓	77	52	↓
<b>Shiga toxin-producing Escherichia coli (STEC)</b>	2	0	↓	20	10	↓
<b>Shigellosis</b>	10	0	↓	42	13	↓
<b>Other</b>						
<b>Coccidioidomycosis</b>	9	6	↓	49	86	↑
<b>Hepatitis C, acute</b>	1	0	↓	13	1	↓
<b>Hepatitis C, chronic</b>	536	205	↓	4036	2461	↓
<b>Invasive Pneumococcal Disease</b>	7	2	↓	153	136	↓
<b>Lead Poisoning</b>	9	3	↓	103	53	↓
<b>Legionellosis</b>	2	0	↓	9	8	↓
<b>Meningitis, aseptic</b>	13	0	↓	46	40	↓
<b>Meningitis, Bacterial Other</b>	2	0	↓	18	10	↓
<b>RSV</b>	9	0	↓	1851	1273	↓
<b>Streptococcal Toxic Shock Syndrome (STSS)</b>	1	0	↑	20	19	↓
<b>New Active TB Cases Counted (&lt;15 yo)</b>	0	0	→	0	0	→
<b>New Active TB Cases Counted (&gt;= 15 yo)</b>	6	0	↓	6	0	↓

**2. Number of Cases Investigated by OEDS**

Monthly DIIS Investigations CT/GC/Syphilis/HIV/TB	Contacts	Clusters <sup>1</sup>	Reactors/ Symptomatic/ Xray <sup>2</sup>	OOJ/FUP <sup>3</sup>
Chlamydia	10	0	33	0
Gonorrhea	2	0	20	0
Syphilis	16	1	84	1
HIV/AIDS (New to Care/Returning to Care)	11	0	22	0
Tuberculosis	160	0	6	0
<b>TOTAL</b>	<b>199</b>	<b>1</b>	<b>165</b>	<b>1</b>
<sup>1</sup> Clusters= Investigations initiated on named clusters (clusters= named contacts who are not sex or needle sharing partners to the index patient)				
<sup>2</sup> Reactors/Symptomatic= Investigations initiated from positive labs or reported symptoms				
<sup>3</sup> OOJ= Investigations initiated Out of Jurisdiction reactors/partners/clusters; Fup= Investigations initiated to follow up on previous reactors, partners, or clusters				
Monthly DIIS Investigations Other Communicable Diseases				
Confirmed Case (Clinical and Lab Required)	Confirmed Case (Lab Only)	Full Investigation	OOJ with Investigation	OOJ without Investigation
40	25	12	0	0

**3. Disease and Outbreak Investigations**

**2019 Novel Coronavirus (COVID-19):** As of August 1, SNHD had 43,147 cases (542% increase since June 1st) and 688 deaths (101% increase since June 1st). The Health District activated the Incident Command System to expand our efforts in COVID-19 Response and gain access to additional staffing and resources. The Health District continues to meet with the Clark County emergency managers, Fire, EMS, School Officials, hospital emergency response and infection control staff to communicate the current response and plan for continued partnership. The Office of Epidemiology and Disease Surveillance (OEDS) at SNHD is receiving and following up on reports of confirmed illness, conducting disease investigations, contact tracing, providing assessment and evaluation information, and working with local medical providers to determine levels of risk and recommended actions for anyone who may be ill or exposed. OEDS is monitoring travelers from high risk countries for signs and symptoms of COVID-19 to detect and confirm any cases in Clark County. OEDS is making recommendations of isolation and quarantine for individuals that are diagnosed with COVID-19 or have been identified as exposed to someone with COVID-19. OEDS and the Southern Nevada Public Health Laboratory are working in coordination with Clark County

hospitals and other medical providers to provide guidance for testing and sample collection for Clark County residents and visitors. Contact tracing efforts include training and implementing additional contact tracers from the Environmental Health Program, Medical Reserve Corp, UNLV students, Clark County, the National Guard and City of North Las Vegas Library Staff. This is an ongoing response effort.

#### **4. Non-communicable Reports and Updates**

- a. Naloxone 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 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. OEDS has implemented a policy for SNHD staff to carry and administer Naloxone. OEDS has also been given permission at The Clark County Detention Center to place Naloxone in a person's property at the facility.

The following Naloxone trainings/distributions have taken place in the month of July:

7/02/20 – Westcare (200 kits distributed)

7/10/20 – Westcare (275 kits distributed)

7/10/20 – Foundation for Recovery (470 kits distributed)

7/24/20 – Westcare: Women's Shelter (1 trained, 100 kits distributed)

- b. Overdose Data to Action Grant (OD2A):** Due to COVID-19 response, there are no new updates.

#### **B. Prevention-Community Outreach/Provider Outreach/Education**

The Center and Huntridge Family Clinic have been successfully offering HIV/STD/PrEP/PEP services to the community since the reopening of the clinic.

OEDS staff is still working through the final phases of the Collect 2 Protect Project and the Home HIV Testing awareness project with Informatics.

**C. High Impact HIV/STD/Hepatitis Screening Sites**

Testing is currently being offered at TRAC B for HIV and Hep C. Also, The Center is offering screenings for HIV, Hep C, Gonorrhea, Chlamydia and Syphilis to the community Mon-Thurs from 1pm-5pm. AHF is also offering HIV and STD screenings at their clinic locations.

<b>Office of Disease Surveillance- HIV Prevention Screening/Testing Efforts</b>						
<b>Prevention - SNHD HIV Testing</b>	<b>Jul-19</b>	<b>Jul-20</b>		<b>FY 19-20</b>	<b>FY 20-21</b>	
<b>Outreach/Targeted Testing</b>	825	434	↓	825	434	↓
<b>Clinic Screening (SHC/FPC/TB)</b>	662	126	↓	662	126	↓
<b>Outreach Screening (Jails, SAPTA)</b>	424	0	↓	424	0	↓
<b>TOTAL</b>	1911	560	↓	1911	560	↓
<b>Outreach/Targeted Testing POSITIVE</b>	9	2	↓	9	2	↓
<b>Clinic Screening (SHC/FPC/TB) POSITIVE</b>	5	0	↓	5	0	↓
<b>Outreach Screening (Jails, SAPTA) POSITIVE</b>	1	0	↓	1	0	↓
<b>TOTAL POSITIVES</b>	15	2	↓	15	2	↓

**D. Staff Facilitated/Attended the following Trainings/Presentations**

- a. 07/01/2020: Ending the Epidemic (EHE) Preliminary Findings Meeting facilitated by the University of Nevada Reno attended by OEDS Health Educator Staff; 3 SNHD OEDS staff attendees.
- b. 07/01/2020: Community Health Assessment Steering Committee Meeting facilitated by OEDS Health Educator Staff; 2 SNHD OEDS staff attendees.
- c. 07/02/2020: International Association of Providers of AIDS Care (IAPAC) regarding Fast Track Cities (FTC) Clark County teleconference attended by OEDS Health Educator Staff; 3 SNHD OEDS staff attendees.
- d. 07/02/2020: Health Equity Quality Improvement Meeting attended by OEDS Health Educator Staff; 1 SNHD OEDS staff attendee.
- e. 07/02/2020: SNHD "Crisis Counseling Update" attended by OEDS Health Education Staff; 2 OEDS staff attendees.
- f. 07/06/2020. Ending the Epidemic (EHE) Workgroup Monthly Call attended by OEDS Health Educator Staff. 1 SNHD OEDS staff attendee.
- g. 07/07/2020: Southern Nevada Substance Misuse and Overdose Prevention Summit planning meeting coordinated and hosted by OEDS Health Educator Staff; 7 people in attendance from multiple agencies; 1 SNHD OEDS staff attendee.
- h. 07/07/2020: "Crisis Call Centers/Hubs" part 4 of 7- Nevada Crisis Care Response Virtual Summit attended by OEDS Health Educator Staff; ~92 people in attendance; 1 SNHD OEDS staff attendee.
- i. 07/08/2020: "Introduction to Community Needs Assessment: Finding the Data" webinar attended by OEDS Health Educator Staff; 1 SNHD OEDS staff attendee.
- j. 07/08/2020: "Youth and Young Adult HIV Prevention Planning Group" planning meeting. 6 people in attendance including the LGBTQ Center of Southern Nevada

and the Nevada Division of Public and Behavioral Health. 1 SNHD OEDS staff in attendee.

- k. 07/09/2020: High Intensity Drug Trafficking Area (HIDTA) and Las Vegas Metropolitan Police Department (LVMPD) overdose prevention plan teleconference discussion attended by OEDS Health Educator Staff; 7 SNHD OEDS staff attendees.
- l. 07/10/2020: Nevada Coalition for Suicide Prevention (NCSP) bi-monthly meeting attended by OEDS Health Educator Staff; ~10 people in attendance from multiple agencies; 1 SNHD OEDS staff attendee.
- m. 07/10/2020: Overdose Data to Action (ODTA) surveillance and prevention programs presentation during Nevada Opioid Funding Stakeholders Meeting by OEDS Health Educator Staff; ~40 attendees including State of Nevada Coordinator, behavioral health policy boards, and mobile crisis teams; 3 SNHD OEDS staff in attendance.
- n. 07/10/2020: Clark County Children's Mental Health Consortium (CCCMHC) meeting attended by OEDS Health Educator Staff as a representative; ~30 people in attendance from multiple agencies; 1 SNHD OEDS staff attendee.
- o. 07/10/2020: Southern Nevada HIV Prevention Planning Group (SoN HPPG) meeting attended by OEDS Health Educator Staff as Public Health Co-Chair/facilitator. 21 people in attendance including SNHD Clinical services, SNHD Teen Pregnancy Prevention Program, Planned Parenthood, AHF, UNLV, ASP Cares, AFAN, Pacific AIDS Education and Training Center, Trac B, The Nevada Division of Public and Behavioral Health, and the LGBTQ Center of Southern Nevada. 2 SNHD OEDS staff in attendance.
- p. 07/13/2020: "Zero Suicide Academy Session 7: CBT/DBT - SP Part 1" webinar hosted by CASAT attended by OEDS Health Educator Staff; ~75 people in attendance from multiple agencies; 2 SNHD OEDS staff attendees.
- q. 07/13/2020: Community Health Improvement Plan (CHIP) update presented to the Public Health Advisory Board by OEDS Health Educator Staff; 2 SNHD OEDS staff attendees.
- r. 07/14/2020: "Mobile Crisis Teams" part 5 of 7- Nevada Crisis Care Response Virtual Summit attended by OEDS Health Educator Staff; ~95 people in attendance; 1 SNHD OEDS staff attendee.
- s. 07/14/2020: "A Path to Reproductive Justice" webinar hosted by the American Public Health Administration attended by 2 OEDS Health Educator Staff; ~1200 people in attendance; 2 SNHD OEDS staff attendees.
- t. 07/14/2020-7/16/2020: "HIV Rapid Testing, Counseling and Safety Certificate Program Training" hosted by and training by SNHD OEDS staff. 5 people in attendance; 2 OEDS Health Education staff presented.
- u. 07/15/2020: Crisis Counseling Assistance and Training Program (CCP) DTAC Training Day 1 hosted by the Nevada Department of Health and Human Services and facilitated by FEMA attended by OEDS Health Educator Staff; ~43 people in attendance; 1 SNHD OEDS staff attendee.



- v. 07/15/2020: Prevention, Advocacy, Choices, Teamwork (PACT) virtual coalition meeting attended by OEDS Health Educator Staff; ~40 people in attendance from multiple agencies; 1 SNHD OEDS staff attendee.
- w. 07/15/2020: Forces of Change Assessment (FOCA) launched by OEDS Health Educator to attain information regarding the community health assessment; multiple agencies participating.
- x. 07/15/2020: Community Health Assessment Steering Committee meeting facilitated by OEDS Health Educator Staff; attendees from multiple agencies; 1 SNHD OEDS staff attendee.
- y. 07/16/2020: Crisis Counseling Assistance and Training Program (CCP) DTAC Training Day 2 hosted by the Nevada Department of Health and Human Services and facilitated by FEMA attended by OEDS Health Educator Staff; ~43 people in attendance; 1 SNHD OEDS staff attendee.
- z. 07/16/2020: Community Presentation practice meeting coordinated and hosted by OEDS Health Educator Staff; 4 people in attendance; 2 SNHD OEDS staff attendees.
- aa. 07/16/2020: Nevada Public Health Association (NPHA) Panel test and run through coordinated by SNHD OEDS Health Educator Staff; 6 people in attendance from various community agencies; 2 SNHD OEDS staff attendees.
- bb. 07/16/2020: "Ending the HIV Epidemic: A Plan for America Stakeholder" webinar attended by OEDS Health Educator Staff; 2 SNHD OEDS staff attendees.
- cc. 07/17/2020: Health Equity through Cross-Sector Partnerships Nevada Public Health Association (NPHA) Panel Discussion moderated and hosted by OEDS Health Educator Staff; 30 people in attendance; 2 SNHD OEDS staff attendees.
- dd. 07/17/2020: Overdose Detection and Mapping Application Program (ODMAP) Leadership Meeting attended by OEDS Health Educator Staff; 3 SNHD OEDS staff attendees.
- ee. 07/20/2020: "Zero Suicide Academy Session 8: CBT/DBT - SP Part 2" webinar hosted by CASAT attended by OEDS Health Educator Staff; ~70 people in attendance from multiple agencies; 2 SNHD staff attendees.
- ff. 07/21/2020: "Essential Principles and Practices" part 6 of 7- Nevada Crisis Care Response Virtual Summit attended by OEDS Health Educator Staff; ~90 people in attendance; 1 SNHD OEDS staff attendee.
- gg. 07/21/2020: Child Death Review (CDR) Board virtual meeting attended by OEDS Health Educator Staff as a representative; ~ 35 people in attendance; 2 SNHD OEDS staff attendees.
- hh. 07/21/2020: SNHD Accreditation Meeting attended by OEDS Health Educator Staff; 2 SNHD OEDS staff attended.
- ii. 07/21/2020: "SNHD Workforce Development Meeting". Approximately 6 in attendance including 1 OEDS Health Educator staff attendee.
- jj. 07/22/2020: "Youth and Young Adult HIV Prevention Planning Group" planning meeting. 7 people in attendance including the LGBTQ Center of Southern Nevada and the Nevada Division of Public and Behavioral Health. 2 SNHD OEDS staff in attendee.

- kk.** 07/22/2020: "Types of Coronavirus Testing and Sex in the Time of COVID-19" for COVID-19 and Your Health for the Ryan White Part A Consumer Forum Webinar presented by Cheryl Radeloff. Approximately 10 in attendance.
- ll.** 07/23/2020: "Psychological First Aid: Helping Others in Times of Stress" training hosted by CASAT attended by OEDS Health Educator Staff; ~43 people in attendance; 1 SNHD OEDS staff attendee.
- mm.** 07/23/2020: Southern Nevada Opioid Advisory Council (SNOAC) coordinated, hosted, and attended by Health Educator Staff; ~65 attendees from agencies including LVMPD, substance misuse treatment, substance misuse prevention, recovery community, medical providers, and state of Nevada; 4 SNHD OEDS staff attendees.
- nn.** 07/23/2020: Health Equity Quality Improvement Meeting attended by OEDS Health Educator Staff; 1 SNHD OEDS staff attendee.
- oo.** 07/27/2020: "Care Transitions: The Role of Connectedness in Preventing Suicide" webinar hosted by NOVA attended by OEDS Health Educator Staff; ~250 people in attendance; 1 SNHD OEDS staff attendee.
- pp.** 07/27/2020: "Zero Suicide Academy Session #9: Transition" webinar hosted by CASAT attended by OEDS Health Educator Staff; ~70 people in attendance from multiple agencies; 2 SNHD OEDS staff attendees.
- qq.** 07/27/2020: "Stimulant Overdose and Harm Reduction" webinar attended by OEDS Health Educator Staff; ~75 people in attendance from multiple agencies; 1 SNHD OEDS staff attendees.
- rr.** 07/27/2020: "OD2A Eval CoP: Defining Performance Indicators" webinar attended by OEDS Health Educator Staff; 1 SNHD OEDS staff attendee.
- ss.** 07/27/2020: Nevada Institute for Children's Research and Policy (NICRP) Facilitator Meeting attended by OEDS Health Educator Staff; ~8 people in attendance; 2 SNHD OEDS staff attendees.
- tt.** 07/28/2020: "Statewide Summit" part 7 of 7- Nevada Crisis Care Response Virtual Summit attended by OEDS Health Educator Staff; ~85 people in attendance; 1 SNHD OEDS staff attendee.
- uu.** 07/28/2020: Southern Nevada Substance Misuse and Overdose Prevention Summit planning meeting coordinated and hosted by OEDS Health Educator Staff; 5 people in attendance from multiple agencies; 1 SNHD OEDS staff attendees.
- vv.** 07/28/2020: Local Public Health System Assessment (LPHSA) Day 1 facilitated by OEDS Health Educator Staff; ~30 people in attendance from multiple agencies; 3 SNHD OEDS staff attendees.
- ww.** 07/28/2020: "Youth and Young Adult HIV Prevention Planning Group" planning meeting at the LGBTQ Center of Southern Nevada. 3 in attendance, 1 SNHD OEDS staff attendee.
- xx.** 07/29/2020: "AD for Opioid Safety: An Overview for New OD2A Programs" webinar hosted by National Resource Center for Academic Detailing attended by 2 OEDS Health Educator Staff; ~150 people in attendance; 2 SNHD OEDS staff attendees.

- yy.** 07/29/2020: Local Public Health System Assessment (LPHSA) Day 2 facilitated by OEDS Health Educator Staff; ~30 people in attendance from multiple agencies; 2 SNHD OEDS staff attendees.
- zz.** 07/29/2020: "SPNS Capacity Building Assistance Initiative Planning Call". 7 people in attendance, 1 SNHD OEDS staff attendee.
- aaa.** 07/29/2020: SNHD/UNLV HIV Rapid Testing, Counseling, Safety and Certificate Vendor Discussion. 5 people in attendance. 2 SNHD OEDS staff attendees.
- bbb.** 07/30/2020: Southern Nevada Substance Misuse and Overdose Prevention (SNSMOP) Summit Presenter Orientation hosted and coordinated by OEDS Health Educator Staff; 2 people in attendance; 1 SNHD OEDS staff attendee.
- ccc.** 07/30/2020: Southern Nevada Regional Housing Authority (SNHRA) General Meeting attended by OEDS Health Educator Staff; ~6 people in attendance; 1 SNHD OEDS staff attendee.
- ddd.** 07/31/2020: "Suicide Prevention and COVID-19: Safety Planning and Other Resources During a Pandemic" webinar hosted by the Mental Health Technology Transfer Center (MHTTC) attended by OEDS Health Educator Staff; ~200 people in attendance; 1 SNHD OEDS staff attendee. 06/02/2020: AB 124 "Resources for Sexual Assault Survivors" meeting with NDPBH and Sexual Assault Advocates; one OEDS Health Educator staff attendee.
- eee.** 06/05/2020: SNHD/UNLV HIV Rapid Testing Training Curriculum and Materials Development Meeting attended by 1 OEDS Health Educator.
- fff.** 06/17/2020: "HIV and Hepatitis C Screening in Practice in a Rural Patient-Centered Medical Home Setting" hosted by Nevada AETC; 1 OEDS Health Education staff in attendance.
- ggg.** 06/24/2020: Las Vegas Ryan White Part A TGA Planning Council Meeting; 1 SNHD OEDS staff attendee.

- E. Other: Communicable Disease Statistics:** June 2020 and Qtr 2 2020 disease statistics are attached. (see table 1).

### **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, and updated EMSA to process Coronavirus ELRs.
- C.** Continue to test EpiTrax system (new version of Trisano) internally, and work with Utah and EpiTrax consortium for Trisano to EpiTrax migration
- D.** 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.
- E.** Assist SNPHL with new instrument preparation, data extraction and reporting needed.

- F. Work with IT to implement and maintain the Electronic Health Record (EHR) system and implement eCW Telehealth.
- G. Assist Office of Epidemiology and Disease Surveillance (OEDS), Office of EMS/Trauma System, Environmental Health (EH), Clinic Services with various data requests, data exports, and report generation.
- H. Continue to enhance the iCircle web application for OEDS, and transmission of STD, HIV and Hepatitis testing data to CDC.
- I. Continue to support Clark County Coroner's Office (CCCO) on Cognos reports and new CME replacement.
- J. Continue to work with OEDS on OD2A and SVM projects.
- K. Work with NVHIE to enhance COVID-19 surveillance by automating COVID-19 hospitalization notification, and extract demographics, lab tests and treatment information from HIE CCDs for public health surveillance.
- L. Maintain and update COVID-19 dashboard, COVID-19 maps, lab testing and ED admission trend analysis and other urgent data requests.
- M. Maintain automate COVID-19 patient notification application and perform QA for contact tracing and identification.
- N. Maintain an online portal of COVID-19 lab results. Clients are able to access their results online.
- O. Deployed a test order and report system for SNHD COVID-19 POD testing events.
- P. Maintain applications to automate COVID-19 contacts upload and produce COVID-19 DECIPHER report.
- Q. Continue to work with CDC and UMC to onboard COVID electronic case reporting.
- R. Work with the state contractor (Deloitte) on development of contact tracing and tracking (CTT) system, and upload contacts into the CTT for contact tracing and testing referral.
- S. Completed 2019-2020 ELC HIS final progress report and PHEP 4<sup>th</sup> Quarter report.
- T. Received ELC Data modernization, and ELC care and enhancement detection grants.
- U. Recruiting new PHIS staff to enhance public health information systems.

**IV. OFFICE OF EMERGENCY MEDICAL SERVICES & TRAUMA SYSTEM (OEMSTS)****A. Regional Trauma Advisory Board (RTAB) Member Nominating Committee**

The RTAB Member Nominating Committee is a committee that consists of RTAB standing members with the purpose of reviewing nominations for non-standing members to serve a two-year term and make their recommendations to the RTAB.

The RTAB Member Nominating Committee met to discuss and vote on new members to fill the following expiring seats on 7/1/20: 1) General Public; 2) Health Education and Prevention Services; 3) Legislative/Advocacy; 4) Payers of Medical Benefits for Victims of Trauma; 5) Public Relations/Media; and 6) Private Franchised Providers of Advanced Emergency Care.

**B. Regional Trauma Advisory Board (RTAB)**

The RTAB is an advisory board with the primary purpose of supporting the Health Officer's role to ensure a high-quality system of patient care for the victims of trauma within Clark County and the surrounding areas. The RTAB makes recommendations, and assists in the ongoing design, operation, and evaluation of the system from initial patient access to definitive patient care.

The Chairman introduced the new members for the 2020 – 2022 term.

The Board heard a committee report from the Southern Nevada Injury Prevention Partnership (SNIPP) that was held in February 2020.

The Board reviewed the Hemorrhage Control protocol and gave recommendations to be referred to the Medical Advisory Board.

The Board reviewed and discussed the trauma transport data for 4th quarter 2019 and 1st quarter 2020.

The Board discussed restructuring the SNIPP and Trauma System Advocacy Committee (TSAC) meeting.

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

July EMS Statistics	July 2019	July 2020	
Total certificates issued	39	91	↑
New licenses issued	36	83	↑
Renewal licenses issued (recert only)	0	0	=
Driver Only	40	29	↓
Active Certifications: EMT	604	800	↑
Active Certifications: Advanced EMT	1448	1648	↑
Active Certifications: Paramedic	1741	1859	↑
Active Certifications: RN	44	59	↑

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

1. Planning and Preparedness: Following President Trump's directive, OPHP staff began working from home in support of the COVID-19 response. Manager, supervisor, senior planners, trainers, MRC volunteer coordinator, analyst and administrative staff may be serving in their SNHD and/or ICS positions in support of both SNHD and/or the MACC/MSST for the Southern Nevada community and hospital needs.
2. Following SNHD leadership direction, all non-essential meetings have been postponed for staff to attend all essential COVID-19, SNHD, community partner, and hospital meetings.

**PHP Training and PH Workforce Development**

1. Following SNHD leadership direction, all non-essential training has been postponed focusing on the COVID-19 response and training needs
2. Four New Hire Emergency Preparedness trainings were held by OPHP training staff and SNHD security.
3. Employee Fit Testing: Essential SNHD staff continue to receive respirator fit testing. 60 fit tests completed.

**Hospital Preparedness Program (HPP)**

1. 06 JUL – Virtual Southern Nevada Healthcare Preparedness Coalition convened to discuss on-going issues in the community, update on county operations, and maintain the required HCC meeting schedule in the face of a global pandemic.
2. 22 JUL – Office of Public Health Preparedness Hospital Preparedness Program Liaison attended a webinar reference on the changes to the Conditions of Participation in Emergency Management regulated by the Centers for Medicare and Medicaid Services. The information was current but only addressed a small amount of information on the requirements under the conditions of participation but highly recommended that hospitals/healthcare organizations start developing their After-Action Report-Improvement Plan.
3. 27 JUL – OPHP convened the initial Concepts & Objectives Meeting with members of the coalition reference the future Medical Surge – BURN Tabletop Exercise in 2021. Members were able to dial in to the WebEx platform, provide input, and contribute to the Tabletop Exercise development process.

**Grants and Administration**

OPHP staff are supporting SNHD and MACC/MSST COVID-19 response and logistical needs.

**Medical Reserve Corps (MRC) of Southern Nevada**

MRC coordinator works in conjunction with SNHD and community partners for volunteers needed for the COVID-19 response.

MRC volunteers are still suspended from regular positions at SNHD Main and East Clinics, Foodhandler Safety Program, and Pharmacy due to restrictions of COVID-19. Medical and non-medical volunteers are deployed to three locations to support COVID response activities: Medical volunteers at community test collection sites; Laboratory Assistants are assisting SNPHL with test accessioning, kit assembly, and general assistance; Medical and non-medical volunteers are performing Contact Tracing at SNHD OEDS. Total "accepted" volunteers remain steady at 401. MRC Coordinator recruited, vetted, assigned, and deployed volunteers to all three sites. MRC Coordinator continues to recruit volunteers for test collection sites, OEDS, and SNPHL positions and participate in planning and operations meetings as available. See table below.

**MRC Volunteer Hours 2020 COVID-19 Response**

<b>Month</b>	<b>Cashman I/Q</b>	<b>SNHD OEDS/ Contact Tracing</b>	<b>SNPHL</b>	<b>Test Collection</b>	<b>Total Hours</b>	<b>Equivalent in \$</b>
<b>April</b>	872.75	12.5	----	----	885.25	<b>\$22,511.91</b>
<b>May</b>	603	456.50	72.75	----	1132.25	<b>\$28,793.12</b>
<b>June</b>	172.25	784	58	----	1014.25	<b>\$25,792.38</b>
<b>July</b>	----	452	9	203	664	<b>\$18,060.80</b>

\$ amounts calculated using standard Independent Sector rate of \$25.43 for FY2020, \$27.20 for FY2021, for general volunteers, not a pro bono rate.

After receiving more complete documentation, volunteer statistics were revised for previous months.

**VI. VITAL RECORDS**

July 2020 showed a 32% decrease in birth certificate sales in comparison to July 2019. Death certificate sales showed a 17% increase for the same time frame. SNHD received revenues of \$36,192 for birth registrations, \$24,611 for death registrations; and an additional \$7,667 in miscellaneous fees for the month of July.

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

Vital Statistics Services	July 2019	July 2020		FY 19-20 (July)	FY 20-21 (July)	
<b>Births Registered</b>	2,393	2,283	↓	2,393	2,283	↓
<b>Deaths Registered</b>	1,571	1,876	↑	1,571	1,876	↑

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

Vital Statistics Services	July 2019	July 2020		FY 19-20 (July)	FY 20-21 (July)	
Birth Certificates Sold (walk-in)	3,804	4	↓	3,804	4	↓
Birth Certificates Mail	110	100	↓	110	100	↓
Birth Certificates Online Orders	1,245	3,374	↑	1,245	3,374	↑
Birth Certificates Billed	131	103	↓	131	103	↓
<b>Birth Certificates Number of Total Sales</b>	<b>5,290</b>	<b>3,581</b>	<b>↓</b>	<b>5,290</b>	<b>3,581</b>	<b>↓</b>
Death Certificates Sold (walk-in)	1,277	14	↓	1,277	14	↓
Death Certificates Mail	59	82	↑	59	82	↑
Death Certificates Online Orders	5,777	8,281	↑	5,777	8,281	↑
Death Certificates Billed	36	34	↓	36	34	↓
<b>Death Certificates Number of Total Sales</b>	<b>7,149</b>	<b>8,411</b>	<b>↑</b>	<b>7,149</b>	<b>8,411</b>	<b>↑</b>

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

Vital Statistics Sales by Source	July 2019	July 2020		FY 19-20 (July)	FY 20-21 (July)	
Birth Certificates Sold Valley View (walk-in)	71.9%	.1%	↓	71.9%	.1%	↓
Birth Certificates Mail	2.1%	2.8%	↑	2.1%	2.8%	↑
Birth Certificates Online Orders	23.5%	94.2%	↑	23.5%	94.2%	↑
Birth Certificates Billed	2%	2.9%	↑	2%	2.9%	↑
Death Certificates Sold Valley View (walk-in)	17.9%	.2%	↓	17.9%	.2%	↓
Death Certificates Mail	.8%	1%	↑	.8%	1%	↑
Death Certificates Online Orders	80.8%	98.5%	↑	80.8%	98.5%	↑
Death Certificates Billed	.5%	.4%	↓	.5%	.4%	↓



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

Revenue	July 2019	July 2020		FY 19-20 (July)	FY 20-21 (July)	
Birth Certificates (\$20)	\$105,800	\$89,525	↓	\$105,800	\$89,525	↓
Death Certificates (\$20)	\$171,576	\$210,275	↑	\$171,576	\$210,275	↑
Births Registrations (\$13)	\$52,169	\$36,192	↓	\$52,169	\$36,192	↓
Deaths Registrations (\$13)	\$22,369	\$24,611	↑	\$22,369	\$24,611	↑
Miscellaneous	\$4,278	\$7,667	↑	\$4,278	\$7,667	↑
<b>Total Vital Records Revenue</b>	<b>\$356,192</b>	<b>\$368,270</b>	<b>↑</b>	<b>\$356,192</b>	<b>\$368,270</b>	<b>↑</b>

**NOTE:** Decline in birth certificate sales during COVID-19 pandemic.

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

Due to the pandemic, Passport Services did a partial reopening in July. Safety features for a full reopen are in progress.

Revenue	July 2019	July 2020		FY 19-20 (July)	FY 20-21 (July)	
Passport Execution/Acceptance fee (\$35)	\$23,380	\$4,480	↓	\$23,380	\$4,480	↓
Passport Photo Fee (\$12)	\$4,092	Closed		\$4,092	Closed	
<b>Total Passport Program Revenue</b>	<b>\$27,472</b>	<b>\$4,480</b>	<b>↓</b>	<b>\$27,472</b>	<b>\$4,480</b>	<b>↓</b>

**VII. HEALTH CARDS****A. Food Handling & Body Art Cards**

- Operations suspended during the month of July due to COVID-19 response activities.
- Food Handler Cards and Body Art Cards suspended “until further notice.”
- E-mail inquiries coming in via website. Responses provided within one business day.

**B. COVID-19 Activities**

- Food Handling and Business Group staff members continue to work assignments to support the District’s COVID-19 response.
  - SNHD Call Center
    - Currently operating seven days a week, two shifts (days – 7:00 am to 3:00 pm, swing – 3:00 pm to 11:00 pm).
  - Six staff members doing contact tracing. Case assignments being made daily
    - Samantha Hamilton, Health Records Assistant, selected to assist with training new contact tracing staff members.
    - Six staff members working remotely beginning July 24, 2020.
  - COVID-19 test results line, 702.759.1901, launched this month
    - Primarily staffed by three Maxim temp employees, backed up by call center staff.
    - Voicemail messages being returned, typically during evening shift.
    - Results available in 7 to 10 business days.
  - Providing information and assisting clients to schedule testing through our website, [www.snhd.info/get-tested](http://www.snhd.info/get-tested)



## June 2020: Clark County Disease Statistics\*

Disease	2018		2019		2020	
	June	YTD	June	YTD	June	YTD
<b>VACCINE PREVENTABLE</b>						
Haemophilus influenzae, invasive disease	1	8	2	14	0	8
Hepatitis A	5	22	21	65	1	12
Hepatitis B, acute	2	12	3	11	0	1
Hepatitis B, chronic	20	169	56	272	38	210
Influenza	7	854	19	811	0	800
Meningococcal disease (Neisseria meningitidis)	0	3	0	1	0	1
Mumps	0	4	0	1	0	0
Pertussis	2	21	3	30	0	4
<b>SEXUALLY TRANSMITTED</b>						
Chlamydia	1141	6765	1090	6717	1058	5851
Gonorrhea	277	1724	318	1830	291	1628
Syphilis (Early non-primary, non-secondary)	42	218	35	212	32	170
Syphilis (Primary & Secondary)	47	274	45	291	52	311
<b>CONGENITAL CONDITIONS</b>						
Congenital Syphilis	4	9	0	13	2	16
Hepatitis C virus infection, perinatal	0	1	0	1	0	0
<b>ENTERICS</b>						
Amebiasis	1	2	1	5	1	4
Campylobacteriosis	15	57	14	66	9	46
Cryptosporidiosis	3	4	1	3	1	7
Giardiasis	5	26	5	27	2	15
Rotavirus	3	18	7	37	0	13
Salmonellosis	20	83	9	55	10	41
Shiga toxin-producing Escherichia coli (STEC)	1	8	4	18	0	10
Shigellosis	5	45	5	32	1	13
Vibriosis (non-cholera Vibrio species infections)	2	2	0	1	0	3
Yersiniosis	0	0	0	1	0	1
<b>OTHER</b>						
Brucellosis	0	0	0	1	0	0
Coccidioidomycosis	11	93	12	40	15	80
Ehrlichiosis/Anaplasmosis	2	3	0	0	0	0
Encephalitis	0	1	0	1	0	0
Exposure, Chemical or Biological	0	3	1	7	0	0
Hepatitis C, acute	4	11	3	12	0	1
Hepatitis C, chronic	337	1551	530	3500	341	2256
Hepatitis E, acute	0	1	0	0	0	1
Invasive Pneumococcal Disease	9	129	18	146	7	134
Lead poisoning	17	115	18	94	6	50
Legionellosis	1	6	2	7	0	8
Listeriosis	0	1	1	5	0	0
Lyme disease	1	7	5	8	0	2
Malaria	0	1	2	4	0	0
Meningitis, Aseptic	1	11	13	33	5	40
Meningitis, Bacterial Other	2	13	2	16	0	10
Meningitis, Fungal	0	4	0	3	0	2
Q Fever	1	1	0	2	0	0
RSV	4	1281	10	1842	1	1273
Rabies, animal	1	4	0	0	2	6
Rabies, exposure to a rabies susceptible animal	0	1	0	1	9	65
Spotted Fever Rickettsiosis	1	2	0	1	0	1
Streptococcal Toxic Shock Syndrome (STSS)	4	21	1	19	3	19
West Nile virus neuroinvasive disease	0	0	1	2	0	0



## Quarter 2, 2020: Clark County Disease Statistics\*

	2018		2019		2020		Rate (Cases per 100,000 per quarter)		Quarter Rate Comparison
Disease	Qtr 2	YTD	Qtr 2	YTD	Qtr 2	YTD	Qtr 2 (2015-2018 aggregated)	Qtr 2 (2020)	Change b/t current & past 5-year?
VACCINE PREVENTABLE									
Haemophilus influenzae, invasive	3	8	5	14	0	8	0.256217108	.	.
Hepatitis A	15	22	48	65	2	12	0.64054277	.	.
Hepatitis B, acute	7	12	8	11	2	2	0.301970163	.	.
Hepatitis B, chronic	79	169	171	272	78	209	2.580472303	3.439174669	↑
Influenza	110	854	126	809	9	800	5.170095218	.	.
Influenza-associated pediatric mortality	0	0	0	2	0	0	.	.	.
Meningococcal disease ( <i>N. meningitidis</i> )	1	3	0	1	0	1	.	.	.
Mumps	1	4	1	1	0	0	.	.	.
Pertussis	9	21	12	30	0	4	0.805253768	.	.
SEXUALLY TRANSMITTED									
Chlamydia	3545	6940	3352	6774	2558	5925	138.7558815	112.7872923	↓X
Gonorrhea	1295	2536	1339	2609	954	2149	48.09561144	42.06375172	↓X
HIV	83	198	102	212	20	95	4.840673221	0.881839659	↓X
Stage 3 HIV (AIDS)	29	59	44	73	16	55	2.086339309	0.705471727	↓X
Syphilis (Primary & Secondary)	129	274	144	291	144	312	4.987082928	6.349245542	↑
Syphilis (Early non-primary, non-secondary)	120	218	103	211	82	172	4.941328943	3.8155426	↓X
CONGENITAL CONDITIONS									
Congenital Syphilis	6	9	9	13	4	16	0.201313442	.	.
Hepatitis C, Perinatal Infection	1	1	0	1	0	0	.	.	.
ENTERICS									
Amebiasis	1	2	1	5	1	4	.	.	.
Campylobacteriosis	38	57	35	66	23	47	1.464097761	1.014115607	↓
Cryptosporidiosis	4	4	2	3	3	7	.	.	↑
Giardiasis	12	26	17	27	7	15	0.558187271	.	↓
Rotavirus	15	18	31	37	1	13	1.162127568	.	↓
Salmonellosis	58	83	37	55	17	47	2.09549992	0.74956371	↓X
Shiga toxin-producing <i>E. coli</i> (STEC)	6	8	14	18	2	10	0.448379939	.	↓
Shigellosis	25	45	21	32	3	14	0.768651324	.	↓
Vibriosis (Non-choleira <i>Vibrio</i> species infection)	2	2	0	1	1	3	.	.	↑
Yersiniosis	0	0	0	1	0	1	.	.	.
OTHER									
Coccidioidomycosis	30	93	20	40	44	81	1.08892271	1.940047249	↑X
Encephalitis	0	1	1	1	0	0	.	.	.
Exposure, Chemical or Biological	0	3	2	7	0	0	.	.	.
Hepatitis C, acute	9	11	8	12	1	1	0.320271385	.	.
Hepatitis C, chronic	925	1551	1790	3498	919	2256	24.88051132	40.52053231	↑X
Invasive Pneumococcal Disease	40	129	63	146	33	134	1.857574034	1.455035437	↓
Lead Poisoning	45	93	49	81	10	50	1.610507537	.	↓
Legionellosis	2	6	4	7	2	8	0.228765275	.	↓
Listeriosis	0	1	2	5	0	0	.	.	.
Lyme Disease	2	7	5	8	0	2	0.173861609	.	↓
Malaria	1	1	3	4	0	0	.	.	.
Meningitis, Aseptic	2	11	25	33	15	40	0.411777495	0.661379744	↑
Meningitis, Bacterial Other	4	13	9	16	4	11	0.36802444	.	↑
Meningitis, Fungal	1	4	0	3	1	2	.	.	↑
RSV	81	1281	144	1842	17	1273	3.742599901	0.74956371	↓X
Rabies, animal	4	4	0	0	5	5	.	.	↑
Animal bite from a rabies susceptible species	1	1	1	1	37	66	1.631403369	.	↑
Spotted Fever Rickettsiosis	1	2	1	1	0	1	.	.	↓
Streptococcal Toxic Shock Syndrome (STSS)	8	21	8	19	9	19	0.329421996	.	↑
Tuberculosis, Active	18	30	11	18	16	26	0.814404379	0.705471727	↓
West Nile Virus neuroinvasive disease	0	0	2	2	0	0	.	.	↓

\*Use of illness in data aggregation for cases other than STD or TB (since Jan-2013) causes changes in cases reported here from previously released reports. Numbers are provisional including confirmed, probable, and suspect cases that are reportable to CDC. HIV/AIDS/TB case counts are provided on a quarterly basis. Rate suppression denoted by '.' for rates corresponding to case counts < 12.

~Diseases not reported in the past five years (aggregate data) and not reported during the current reporting period are not included in this report.

0~Confidence intervals (not shown) for the quarterly disease incidence rates provided a basis for an informal statistical test to determine if the current quarterly rates changed significantly from those of the previous 5-year aggregated rates. Green text represents rates that decreased significantly, whereas red text represents rates that increased significantly. Statistically significant changes are indicated by 'X.'