



# Memorandum

**Date:** June 11, 2021

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

**From:** **Michael Johnson, PhD**, *Director of Community Health* MJ  
**Fermin Leguen, MD, MPH**, *District Health Officer* FL

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**Subject:** Community Health Division Monthly Activity Report – May 2021

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

**A. Chronic Disease Prevention Program (CDPP)**

With COVID-19 restrictions easing making it safer to resume in-person events and classes, we are ramping up our Diabetes Self-Management & Education (DSME) class offerings as well as our Barber/Beauty Shop Health Outreach Program (BSHOP/BeSHOP) screening events. CDP staff hosted a Volunteer Training for BSHOP volunteers. Six people were trained, some of which have already signed up to staff screening events. In April, 3 screening events were held at BSHOP/BeSHOP locations and CDPP staff participated in the Nevada Partners Health and Wellness Block Party providing BP screenings, education, and referral.

The CDPP is working with the YMCA to sponsor the Healthy Hearts Ambassador (HHA) Program, a Self-Monitoring Blood Pressure Program (SMBPP). The program kicked off in April with 15 participants. Two CDPP staff have been trained as Healthy Hearts Ambassadors and we are actively promoting the HHA program through SNHD clinics, E.H.R referrals, community partners, and materials distribution. Our sponsorship will provide for home BP monitors (if needed) and a 4-month membership to the YMCA for all class participants. Enrollment is ongoing on a rolling basis until early July. The maximum number of participants is 25.

In April, CDPP staff launched a community blood pressure education course, designed specifically for the African American community called, "Every Heartbeat is Life." The class is being taught by a CDPP Health Educator and CHW at the MLK Jr. Senior Center. As of the end of April, there are 12 people enrolled in the class. The class will run through early June.

CDPP staff participated in a training for the Healthy Interactions Virtual Maps platform. This platform will allow us to begin to offer DSME map classes online. We anticipate piloting a virtual DSME class by the end of October. In April, CDPP hosted an in-person DSME class with 5 participants and 2 completers. Two more in-person DSMES classes are scheduled in May.

Move Your Way: The CDPP is working with US HHS and Communicate Health on a Move Your Way initiative that will reach Spanish-speaking populations in Southern Nevada (Muévete A Tu Manera). In April, Move Your Way had a presence at the JET Foundation event, a virtual 5K event and sponsored a free, virtual physical activity class in Spanish. Over 500 people participated in the April Move Your Way events. Move Your Way events are scheduled throughout the spring and summer.

**B. Tobacco Control Program (TCP)**

Staff participated in a meeting with the UNLV Dean of School of Public Health and various other entities to discuss collaboration and action items in support of establishing a permanent tobacco-free campus policy. Staff assisted in the development of a comprehensive tobacco-free policy that will be presented to the UNLV policy committee in June. Staff worked with the State Tobacco Program as well as the Nevada Tobacco Quitline to ensure that all UNLV staff and students seeking to quit tobacco use through the Quitline will receive free nicotine replacement therapy to support them on their quit journey.

This month staff worked with the contracted media firm to develop a new Spanish-language tobacco cessation media campaign titled, "Our Kids Are Watching." Local children were recorded encouraging their parents to quit smoking. This media campaign will run on TV, radio, social media, print and direct mail. Additionally, staff worked with our media contractor to develop a communications/media initiative to educate both retailers and the public on the Tobacco 21 law. This campaign began in April and will run through June. It consists of radio ads, online and social ads, and targeted e-blasts to retailers.

Staff is collaborating with the Washoe County Health District on a statewide initiative that involves creating a series of tobacco retailer educational postcards that will be sent to tobacco retailer stores in Nevada. This month staff contracted with a print vendor to print and mail the postcards and finalized the project design with the media partner.

The Native Hawaiian/Pacific Islander and LGBTQ tobacco use survey was in field from March 1, 2021-April 10, 2021. In addition to surveys, 6 virtual focus group/listening sessions were conducted for the priority populations. This will help us gather qualitative data to improve programming. Survey results are currently being reviewed into a report.

**C. Other Efforts**

OCDPHP received a new, non-competitive CDC grant to continue our efforts to reach priority populations for our REACH grant (Hispanics and African Americans) with flu and COVID-19 information and to facilitate and promote vaccination. The notice of award was received in March. In April, we began working to develop contracts with partners and to plan for the required needs assessment with our project evaluator.

## **II. OFFICE OF PUBLIC HEALTH INFORMATICS (OPHI)**

- A. Continue to maintain and enhance the Trisano disease surveillance system.
- B. Continue to maintain and enhance the Electronic Message Staging Area (EMSA) systems, and updated EMSA to process Coronavirus ELRs.
- 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 to develop COVID-19 interface between instruments, COVID-19 POD app and Orchard, COVID-19 testing and reporting needed.
- E. Set up an inventory/purchasing mobile workstation for SNPHL.
- F. Work with IT to implement and maintain the Electronic Health Record (EHR) system for COVID-19 test ordering and COVID-19 vaccination.
- G. Upgrade SNHPL LIMS to the latest version including HL7 251 interface and security. Work with the CDC and APHL on the Public Health Laboratory Interoperability Project.
- H. Assist Office of Epidemiology and Disease Surveillance (OEDS), Office of EMS/Trauma System, Environmental Health (EH), and Clinical Services with various data requests, data exports, and report generation.
- I. Continue to enhance the iCircle web application for OEDS, and transmission of STD, HIV and Hepatitis testing data to CDC, and enhance a QA process between iCircle with eCW data.
- J. Continue to support Clark County Coroner's Office (CCCO) on data requests and reports.
- K. Work on COVID-19 Antigen Case Reporting.
- L. Continue to work with OEDS on OD2A and SVM projects. Deployed C2P application adding a condom option feature and implemented C2P and Express Lab Testing online lab result portal for clients and staff to be able to look up results.
- M. 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.
- N. Maintain and update COVID-19 dashboard, COVID-19 maps, lab testing and ED admission trend analysis and other urgent data requests.
- O. Maintain and automate COVID-19 patient notification application and perform QA for contact tracing and identification.
- P. Maintain and enhance COVID-19 lab results portal. Clients can access their results online.
- Q. Maintain applications to automate COVID-19 contacts upload for contact tracing and testing referral and produce COVID-19 DECIPHER report.
- R. Continue working on EpiTrax migration from Trisano and assist the state to migrate state NBS to EpiTrax. The whole state will use a single state-wide system (EpiTrax) next year. Completed COVID-19, HIV & TB custom logic migration for EpiTrax.
- S. Working on new RWCQM reports for Clark County Social Services.

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

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

May EMS Statistics	May 2020	May 2021	
Total Certificates Issued	39	56	↑
New Licenses Issued	10	53	↑
Renewal Licenses Issued (recert only)	0	3	↑
Driver Only	26	15	↓
Active Certifications: EMT	676	753	↑
Active Certifications: Advanced EMT	1565	1577	↑
Active Certifications: Paramedic	1766	1741	↓
Active Certifications: RN	57	64	↑

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

**A. Planning and Preparedness**

1. Following President Biden’s directive, OPHP staff began working from home in support of the COVID-19 response. Manager, 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. As of June 1, 2021 and with staff being fully vaccinated, these restrictions will gradually be lifted.

**B. 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. As of June 1, 2021 and with fully vaccinated staff, we will begin to resume more regular operations.
2. Employee Fit Testing: Essential SNHD staff continue to receive respirator fit testing; 19 fit tests completed.
3. A preparedness and security training was held on 5/17/2021, 12 employees attended.

**C. Hospital Preparedness Program (HPP)**

1. 4 MAY - OPHP participated in the weekly micro-planning session with the State of Nevada regarding COVID-19 vaccinations. Topics discussed included: Local Health Authority ordering and cap, private provider cap, and weekly metrics.
2. 6 MAY - OPHP hosted the Southern Nevada Healthcare Preparedness Coalition for the month of April 2021. Topics of discussion included All-Hospital Radio Test with thirteen (13) hospitals reaching 100%, presentation by the acting Clark County Coroner on the Capabilities and Responsibilities of the Clark County Office of Coroner/Medical Examiner's, Election of Vice Chair of the Coalition – Ms. Solomé Barton, City of North Las Vegas Emergency Management, and updates from community partners, information on upcoming training and exercises. The next meeting was also identified as 03June2021.
3. 13 MAY – HPP Liaison participated in the University Medical Center of Southern Nevada's Emergency Management Committee. HPP Liaison provided updates on the upcoming June Southern Nevada Healthcare Preparedness Coalition meeting, the midterm planning meeting for the Recovery Table-top Exercise scheduled in June, and announced the date of the National Healthcare Coalition Preparedness Conference in November/December in Orlando, Florida.
4. 17 MAY – OPHP hosted the midterm planning meeting for the Recovery Table-top Exercise scheduled for June 2021. Participants included members of the healthcare community, jurisdictional emergency management, behavioral health, tribal emergency management, and Veterans Affairs.
5. 18 MAY - OPHP participated in the weekly micro-planning session with the State of Nevada regarding COVID-19 vaccinations. Topics discussed included: Local Health Authority ordering and cap, private provider cap, and weekly metrics.
6. 19 MAY – HPP Liaison participated in two webinars and a virtual table-top exercise. The first webinar focused on Resources for Emergency Professionals Who Serve Communities that are Disproportionately Impacted by COVID-19, The Role of Social Determinants of Health As They Relate to Emotional Well-Being Amidst the COVID-19 Pandemic How Right Now Campaign, hosted by the Journal of Emergency Management. The second webinar identified as a priority by the Division of Public & Behavioral Health was Dialysis during Disasters: What Disaster Response Stakeholders need to know however by the Kidney Community Emergency Response (KCER) Coalition. The Virtual Table-Top Exercise hosted by McCarran International Airport was an Automated Transit System (Tram) Emergency Response Tabletop Exercise (TTX) based on an earthquake scenario. Members of the Airport Staff and community partners participated in this exercise.

7. 20 MAY – HPP Liaison participated in the Emergency Management Committee Meeting at San Martin Hospital. Updates provided to the group included announcement of the June Southern Nevada Healthcare Preparedness Coalition Meeting on 3June, the Recovery Table-top Exercise final planning meeting on 4June, the Recovery Table-top Exercise on 21June, and the date of the National Healthcare Coalition Preparedness Conference in November/December in Orlando, Florida.
8. 24 MAY – In preparation for accepting the role of Planning Section Chief, HPP Liaison attended the weekly COVID-19 Operations Briefing. The briefing included updates from key members of the Incident Command/Department Operations System within the Southern Nevada Health District.
9. 25 MAY – OPHP participated in the weekly micro-planning session with the State of Nevada regarding COVID-19 Vaccinations. Topics discussed included: Local Health Authority ordering and cap, private provider cap, and weekly metrics. Also, HPP liaison attended the SNHD Tactics Meeting discussing support to the Incident Action Plan briefed at the Operations Briefing on 24MAY2021.
10. 27 MAY – HPP Liaison attended a webinar on crisis communications and changing work environment during COVID-19 and other disasters. Also, the HPP Liaison attended the Planning Section meeting to approve the plan prior to the Operations briefing next week.

**D. Grants and Administration**

1. OPHP staff are supporting SNHD Vaccination and Testing ICS branches for COVID-19 response and supporting logistical needs.
2. Manager and Supervisor are coordinating year end purchases, end of year grant reporting, and administrative processes required for grant renewal with closing out of current grants. Primary federal grants ASPR, CDC, CRI managed by the program will be renewed on July 1, 2021.

**E. 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 Activities for April 2021:

In April, Medical and non-medical volunteers were deployed to support COVID-19 vaccination sites as vaccinators, medics, and support personnel. One volunteer resumed duties at the SNHD Food Handler Program. Total “accepted” volunteers increased to about 598. MRC Coordinator recruited, vetted, assigned, and deployed volunteers to all sites. MRC Coordinator continues to recruit volunteers and participates in planning and operations meetings as available. MRC also attended monthly NACCHO MRC Workgroup and PPAG meetings. The table below summarizes volunteer hours served in April.

**MRC Volunteer Hours FY2021 COVID-19 Response**

Activity	April
COVID-19 VAX POD	1435.75
SNPHL	0
Food-handler Support	4
Total Hours	1439.75
Economic Impact	\$59,416.41

**V. VITAL RECORDS**

**A. Vital Statistics**

May 2021 showed a 71% increase in birth certificate sales in comparison to May 2020. Death certificate sales showed a 13% increase for the same time frame. SNHD received revenues of \$40,794 for birth registrations, \$22,282 for death registrations; and an additional \$9,290 in miscellaneous fees for the month of May.

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

Vital Statistics Services	May 2020	May 2021		FY 19-20 (May)	FY 20-21 (May)	
Births Registered	2,039	1,923	↓	23,644	22,400	↓
Deaths Registered	1,557	1,614	↑	17,228	22,011	↑
Fetal Deaths Registered (new to report)	11	16	↑	186	39	↑

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

Vital Statistics Services	May 2020	May 2021		FY 19-20 (May)	FY 20-21 (May)	
Birth Certificates Sold (walk-in)	0	11	↑	27,621	64	↓
Birth Certificates Mail	123	94	↓	896	1,122	↑
Birth Certificates Online Orders	2,249	4,023	↑	14,473	38,957	↑
Birth Certificates Billed	94	82	↓	1,208	1,075	↓
<b>Birth Certificates Number of Total Sales</b>	<b>2,466</b>	<b>4,210</b>	<b>↑</b>	<b>44,198</b>	<b>41,218</b>	<b>↓</b>
Death Certificates Sold (walk-in)	0	22	↑	10,664	79	↓
Death Certificates Mail	83	132	↑	680	1,152	↑
Death Certificates Online Orders	6,648	7,499	↑	66,589	100,032	↑
Death Certificates Billed	66	66		446	535	↑
<b>Death Certificates Number of Total Sales</b>	<b>6,797</b>	<b>7,719</b>	<b>↑</b>	<b>78,379</b>	<b>101,798</b>	<b>↑</b>

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

Vital Statistics Sales by Source	May 2020	May 2021		FY 19-20 (May)	FY 20-21 (May)	
Birth Certificates Sold Valley View (walk-in)	0%	.3%	↑	62.5%	.2%	↓
Birth Certificates Mail	5%	2.2%	↓	2%	2.7%	↑
Birth Certificates Online Orders	91.2%	95.6%	↑	32.7%	94.5%	↑
Birth Certificates Billed	3.8%	1.9%	↓	2.7%	2.6%	↓
Death Certificates Sold Valley View (walk-in)	0%	.3%	↑	13.6%	.1%	↓
Death Certificates Mail	1.2%	1.7%	↑	.9%	1.1%	↑
Death Certificates Online Orders	97.8%	97.1%	↓	85%	98.3%	↑
Death Certificates Billed	1%	.9%	↓	.6%	.5%	↓

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

Revenue	May 2020	May 2021		FY 19-20 (May)	FY 20-21 (May)	
<b>Birth Certificates (\$25)</b>	\$61,650	\$105,250	↑	\$981,765	\$1,030,450	↑
<b>Death Certificates (\$25)</b>	\$169,925	\$192,975	↑	\$1,922,575	\$2,544,950	↑
<b>Births Registrations (\$13)</b>	\$24,531	\$40,794	↑	\$437,372	\$411,762	↓
<b>Deaths Registrations (\$13)</b>	\$20,774	\$22,282	↑	\$242,095	\$295,765	↑
<b>Convenience Fee (\$2) <small>new to report</small></b>	\$4,804	\$8,304	↑	\$33,378	\$82,556	↑
<b>Miscellaneous Admin</b>	\$163	\$986	↑	\$21,366	\$7,885	↓
<b>Total Vital Records Revenue</b>	<b>\$281,847</b>	<b>\$370,591</b>	<b>↑</b>	<b>\$3,638,551</b>	<b>\$4,373,368</b>	<b>↑</b>



**B. Passport Services**

Due to pandemic Passport Services moved to appointment only. Safety features for a full reopen are still in progress.

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

Revenue	May 2020	May 2021		FY 19-20 (May)	FY 20-21 (May)	
Passport Execution/Acceptance Fee (\$35)	\$0	\$20,650	↑	\$166,075	\$124,040	↓
Passport Photo Fee (\$12)	\$0	\$0		\$32,028	\$0	
<b>Total Passport Program Revenue</b>	\$0	\$20,650	↑	\$198,103	\$124,040	↓

**VI. HEALTH CARDS**

**A. Food Handling**

1. Appointments currently booked through June 30, 2021. Will be adding additional times based on increased occupancy levels and reduced social distancing (6 feet down to 3 feet).
2. Clients who do not need to test – duplicates, Food Safety Managers, certificates for approved training – no longer need to schedule appointments. Now seen as walk-ins on a “space available” basis.
3. I.T. to update scheduling system so clients no longer need to choose between first-time or renewing. Plan to roll-out for July 2021 appointments.
4. June 30 deadline extended to September 30, 2021. Website and recorded phone info updated.
5. I.T. reviewing “system logs” to try to determine why FormsAdmin system continues to go down. System outage typically requires a “server reboot” to restore.
6. I.T. to write a programming script to delete duplicate appointments for the same client.

**B. COVID-19 Activities**

Oversight of Door Screeners

1. Door screener at Decatur now reporting to Ray Chua. East LV door screeners overseen by Communications/Volunteer Coordinators.
2. Per Dr. Lohff, if no back-up staff available at lunch, okay not to have door screener since we have signage regarding not entering the building if client has symptoms.
3. Decision to be made regarding continuance of door screening by Dr. Lohff and IMT.

**COMMUNITY HEALTH Food Handler Education Program**

<b>Services</b>	<b>May 1 - 31</b>
Food Handler Cards – New	879
Food Handler Cards – Renewals	3,897
Duplicates	264
CFSM (Manager) Cards	180
Re-Tests	273
Body Art Cards	174
<b>Totals</b>	<b>5,667</b>

**COMMUNITY HEALTH Food Handler Education Program**

<b>REVENUE – Point of Sale (not including invoiced amounts)</b>	<b>May 1 - 31</b>
Food Handler Cards – New	\$17,580.00
Food Handler Cards – Renewal	\$77,940.00
Duplicates	\$5,280.00
Late Fee	N/A
CFSM (Manager) Cards	\$3,600.00
Re-Tests	\$1,365.00
Body Art Cards	\$3,480.00
<b>Totals</b>	<b>\$109,245.00</b>

**VII. SOUTHERN NEVADA PUBLIC HEALTH LABORATORY (SNPHL)**

**A. Clinical Testing**

SNPHL supports the SNHD Nursing Division with molecular and microbiology culture, Sexually Transmitted Disease (STD) testing. SNHD STD department and SNPHL cooperatively participate in the CDC Gonococcal Isolate Surveillance Project (GISP) as well as enhanced Gonococcal Isolate Surveillance Project (eGISP). SNPHL performs *N. gonorrhoeae* culture and submits isolates to CDC and Nursing provides the client information required by the project.

<b>Test Name</b>	<b>Monthly Count</b>	<b>Avg Year to Date</b>
GC Cultures	40	79
NAAT NG/CT	985	947
Syphilis	449	444
RPR/RPR Titers	61/104	119/106
Hepatitis Total	362	279
HIV/differentiated	346/6	323/11
HIV RNA	42	35

SNPHL testing helps meet SNHD Mission to affect individual patient care and enhance population surveillance efforts to identify/reduce disease transmission in Clark County. SNPHL continues to perform COVID-19 PCR tests. SARS-Cov-2 PCR extraction is currently performed on the King Fisher Flex, BGI/MGI or QiaCube platforms. COVID-19 PCR extraction/direct specimen are interpreted on either the BioFire, Hologic Panther, 7500Fast or QuantStudio-Dx or QuantStudio-5. Proprietary reagents/supplies have improved but are still a limiting factor in providing tests during this pandemic time of viral transition to a new post-outbreak normal. SNPHL goal is to maintain capacity of 1200-1500 tests/day) with turn-around-time of <48 hours (TAT 2Day- currently at/near goal). 1). Additional staffing to run 2-10hr shifts/day 5d/wk plus one shift on Saturdays, [hiring and interviews ongoing]. If testing requests to do not increase in the next 8 weeks, we will explore closing on Saturdays. 2). IT to create easy patient accession and direct report verification from SNPHL LIS into SNHD patient report portal, [ongoing, CCDC now on-line]. 3). Automation of specimen fluid handling, [equipment in house, pending validation/training]. 4). Sample pooling scheme for reagent cost effectiveness.

COVID-19	# PCR/#POS	COVID-19	# PCR/#POS
January	15,626 / 1802	July	
February	10,477 / 502	August	
March	12, 605/302	September	
April	11,346/476	October	
May	12,268/429	November	
June		December	

Missing clinical testing of reportable disease-causing organisms for all of microbiology.

SNPHL continues to perform routine testing of reportable disease specimens submitted to SNPHL. *Campylobacter* spp., *Salmonella* spp., *Shigella* spp., STEC, *Vibrio* spp., and *Listeria* spp. are all routinely sequenced by Whole Genome Sequencing as part of local and national public health surveillance effort in conjunction with CDC PulseNet. Local matches, if any, of isolates are reported to OEDS on a weekly basis to aid in disease investigation, and SNPHL and OEDS coordinate with CDC PulseNet, if required.

2021		Jan	Feb	Mar	April	May
Campylobacter	Campy ID	7	6	13	4	14
	Campy Screen	9	7	21	9	19
Neisseria species	Gonorrhoeae Culture	42	59	82	55	40
	Gram Stain/WBC	0	0	0	5	0
	Neisseria ID	2	1	9	1	1
	Haemophilus ID	1	0	4	0	0
Unknown ID	Bacterial ID	5	0	5	3	0
	WGS (PulseNet)	15	26	27	25	45
Salmonella	Salmonella Screen	8	17	22	10	24
	Salmonella Serotype	8	13	21	10	18
Shigella	Shigella Screen	1	8	7	8	7
	Shigella Serotype	0	5	2	5	4
STEC	STEC Screen	0	1	1	2	3
	STEC Serotype	0	1	1	1	1
Unknown	Stool Culture	0	5	0	11	0
Vibrio	Vibrio ID	0	0	3	0	0
	Vibrio Screen	0	0	3	0	0
	Yersinia Culture/ID	0	1	1	2	2

**B. Epidemiological Testing and Consultation**

1. SNPHL cooperative/collaboration testing supports the investigation activity of SNHD OEDS and Nursing Division to identify close contacts at risk for SARS-COVID-19 infection to rapidly activate mitigation/quarantine behavior and reduce disease transmission. Improvements in the SNHD patient result portal connection to the SNPHL report laboratory information system has helped accession input of patient data with subsequent improved report result turn-around time.
2. SNPHL participates in the SNHD Outbreak Investigation Committee and Foodborne Illness Taskforce. Conducted 3 outbreak investigations in March.
3. SNPHL continues to report results of influenza testing to the CDC National Respiratory and Enteric Virus Surveillance System (NREVSS). SNPHL performed in February #39 respiratory panels on the BioFire array and Flu #0 screening.
4. SNPHL cooperates with OEDS in testing of samples from sensitive cases and coordinating with various agencies for reportable diseases to refer samples for appropriate testing, as needed.

**C. State Branch Public Health Laboratory Testing**

1. SNPHL performs reportable disease isolate testing and confirmation. Isolates submitted by local laboratories are serotyped and/or confirmed by Whole Genome Sequencing; stored on-site; and results reported and/or samples submitted to CDC through various national programs; Public Health Laboratory Information System (PHLIS), National Antimicrobial Resistance Monitoring System (NARMS), and Influenza Surveillance, and PulseNet Bacterial Outbreak Surveillance
2. SNPHL’s additional mission is as a member of the CDC Laboratory Response Network (LRN) testing for identification of potential biological weapons/agents on environmental daily samples within its unique BSL3 environment.

2021	Jan	Feb	Mar	April	May
Select Agent Rule out (total PCR)	0	2	3	8	2

3. SNPHL is clinically validated for the identification of Campylobacter species (select species), pathogenic Escherichia coli, and Salmonella species, and for DNA-based identification of Salmonella serotypes. SNPHL performed #45 Whole Genome Sequencing tests (WGS) as part of PulseNet in May 2021. SNPHL is working on expanding to DNA-based typing of STEC (Shiga toxin-producing E. coli) to improve workflow and turn around time of reporting, as was done for Salmonella in April 2020. SNPHL plans to expand WGS-identification of the remaining PulseNet bacteria (Vibrio spp. and Listeria spp.). Future plans include using WGS-based identification of non-PulseNet pathogens as well in an effort to modernize microbiology. SNPHL plans to improve data analysis and data flow to improve current methods of data input and data sharing with OEDS.
4. SNPHL is in the process of validating the Bruker MALDI-ToF instrument for streamlined screening of bacterial isolates, to decrease turnaround time and modernize microbiological identification methods.
5. SNPHL is validated for sequencing SARS-CoV-2 and identifying variants of interest through the identification of lineages and clades as of mid-March 2021 SNPHL has sustained capacity of sequencing #24 SARS-CoV-2-positive RNA extracts per week with expectations of increasing this capacity with appropriate staffing and method development. As of May 2021, SNPHL has sequenced 174 SARS-CoV-2-positive RNA extracts. Sequence data for each sample is routinely uploaded to the international GISAID database to contribute to global efforts of understanding SARS-CoV-2. Currently, SNPHL works in collaboration with NSPHL in Reno and UNLV School of Medicine for overflow sequencing needs beyond current capacity. In the future, SNPHL plans to perform sequencing validation of other respiratory pathogens

6. SNPHL coordinates and participates with Environmental Health and Veritas Labs for Legionella surveillance.

2021	Jan	Feb	Mar	April	May
Legionella	0	1	1	1	11

7. SNPHL provides vector testing for Environmental Services; testing for Zika, West Nile, Western/Eastern Equine Encephalitis.
8. SNPHL is maintaining dedicated courier services 6d/wk to SNHD public health centers, CCDC and Southern Nevada hospital/commercial laboratories.

**D. All-Hazards Preparedness**

1. SNPHL provides/assists testing for SNHD COVID-19 Emergency Incident Response, local community outreach, CCDC jail-detention centers, institutions of higher education and long-term nursing facilities Rapid-Antigen POC (CDC-EUA: Abbott IDNow; Qiagen Sofia; BD Vector) with outbreak confirmation RT-PCR testing supported by SNPHL.
2. SNPHL continues to expand testing for COVID-19 by looking into different testing methods, new vendors and new supply chain pathways, as well as improving existing workflows
3. SNPHL participates on a multitude of conference calls with CDC; NV State and SNHD OPHP, local First Responders and sentinel laboratories (as well as 3x/wk with SNHD ICS) to ensure SNPHL response to possible biological or chemical agents and COVID-19 for the collection/reporting of correct test samples.
4. SNPHL staff continue on-going training of LRN protocols for biological agent confirmation and participate frequently in proficiency/competency surveys.
5. SNPHL currently has technical laboratory staff (#35 + 6 NG volunteers) trained and on-call to respond for emergency testing 24 hours per day/7 days per week. SNPHL routine service hours have expanded to 0600-2200 and Saturday (0800-1600) with limited staff.
6. SNPHL has worked with the National Guard to phase the draw-down of their forces. They will draw down 1 Guard member per month for June, July, and August with the final 3 leaving on September 2021.
7. SNPHL coordinates with training/exercises for First Responders including local Civil Support Team, HazMat, Federal Bureau of Investigation, and Las Vegas Metropolitan Police Department.
8. SNPHL provides information to local laboratorians on CDC packaging and shipping infectious substances and on chain of custody procedures.

**E. April 2021 SNP HL Activity Highlights**

1. Laboratory staff continue universal precautions; daily temp and symptoms screen, mask wearing, hand washing, protective garments and social distancing despite vigilance fatigue/after 12+ months of pandemic. The vast majority of training is now obtained from on-line opportunities.
2. Continue Influenza Surveillance with OEDS, interact on community communication message.
3. Creating a 4th duty section placing the cross-sectional COVID-19-19 core group under a dedicated COVID-19 section supervisor. The new supervisor started on May 3rd.
4. SNP HL has a stable FEMA supply of Viral Transport Medium (VTM) used in COVID-19 collection kits.
5. SNP HL works closely with Information Technology, OEDS departments and local community partners on the 2019 novel Coronavirus outbreak to perform on-site patient/specimen accession (into SNHD EMR) and to provide accurate rapid test results via the SNHD patient portal. SNP HL now has two on-site informaticians.
6. SNP HL continues to work with multiple distributors and manufacturers for COVID-19 testing supplies and consumables. There continues to be a shortage of various supplies and SNP HL is on allocation for specific reagents and consumables.
7. Lab Space Build-out: Total re-model into downstairs warehouse build out area is being explored, with different options examined.
8. The laboratory director position was vacated February 3, 2021. The new Director is scheduled to start on July 6. Dr. Kan brings 20 years of public health experience.
9. The laboratory manager position was vacated on March 12, 2021. The new Laboratory Manager will start on July 12<sup>th</sup>.

**COMMUNITY HEALTH–SNP HL – Fiscal Year Data**

SNP HL Services	May 2020	May 2021		FYTD 2019-2020	FYTD 2020-2021	
Clinical Testing Services <sup>1</sup>	6240	13647	↑	5486	2122	↓
Epidemiology Services <sup>2</sup>	17	18	↑	113	31	↓
State Branch Public Health Laboratory Services <sup>3</sup>	56	110	↑	20,910	34,623	↑
All-Hazards Preparedness Services <sup>4</sup>	13	4	↓	22	28	↑
Environmental Health Services <sup>5</sup>	841	156	↓	842	235	↓

<sup>1</sup> Includes N. Gonorrhoeae culture, GISP isolates, Syphilis, HIV, CT/GC molecular, Gram stain testing and COVID-19 Ab immunologic tests.

<sup>2</sup> Includes Stool culture, EIA, Norovirus PCR, Respiratory Pathogen PCR, Epidemiological investigations, or consultations.

<sup>3</sup> Includes COVID-19 PCR, WGS and LRN testing, proficiency samples, reporting to CDC, courier services, infectious substance shipments, teleconferences, trainings, presentations and inspections, samples submitted to CDC or other laboratories' submissions.

<sup>4</sup> Includes Preparedness training, teleconferences, Inspections.

<sup>5</sup> Includes vector testing.

