

# Southern Nevada Community Health Assessment Report 2020/2021

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# Overview



## Welcome

- MAPP Framework
- Community Health Assessment Changes & Updates

## Summary

- Forces of Change Assessment (FOCA)
- Community Themes & Strengths Assessment (CTSA)
- Local Public Health System Assessment (LPHSA)
- Community Health Status Assessment (CHSA)

## Identify

- Key Data Intersections

## Next Steps

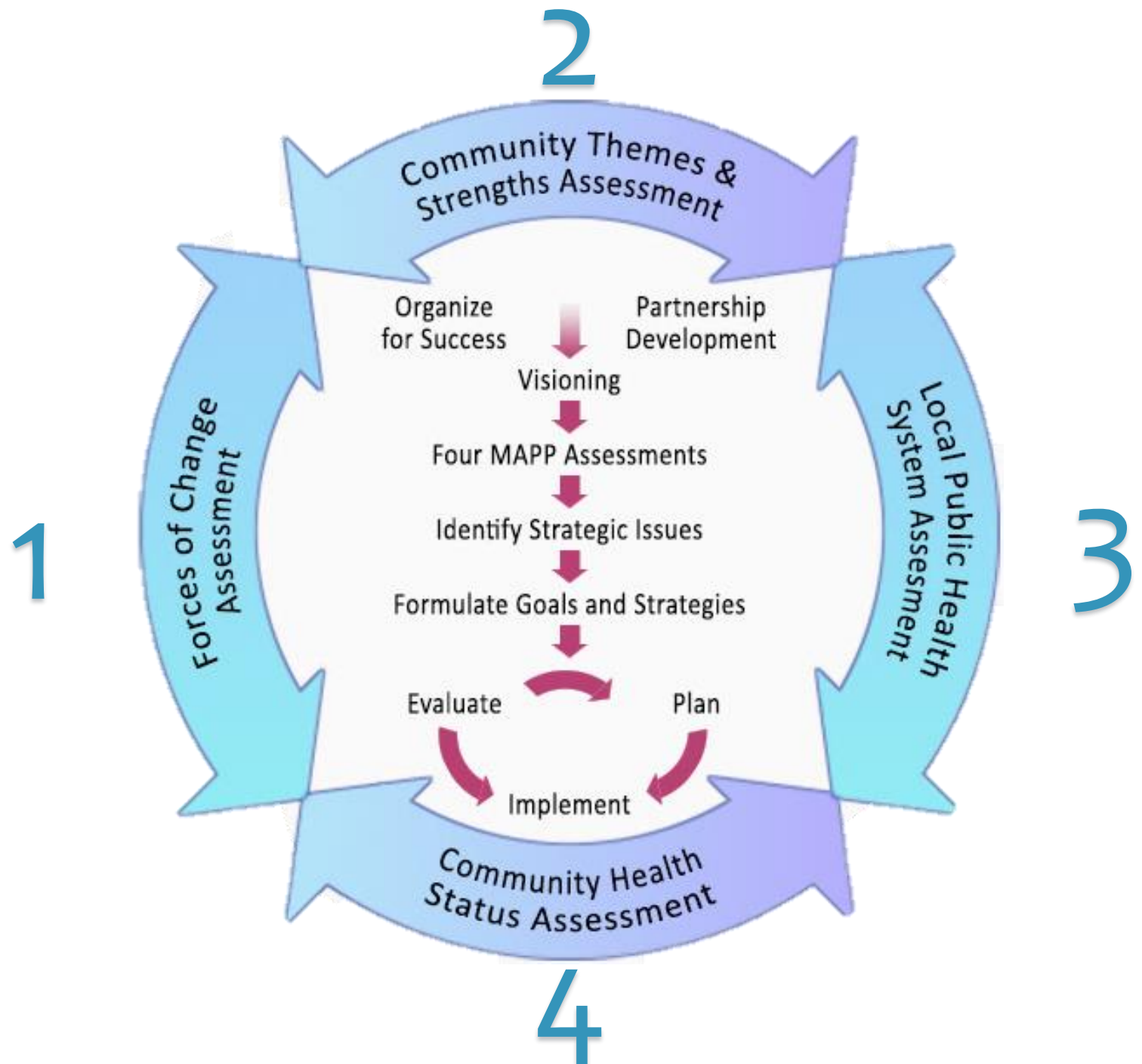
- CHA Priorities and CHIP planning Committee Presentation:  
Mid-October 2021 - *TBD*

## Acknowledgments

## Questions

# MAPP Framework

*Overview*



# What's Different?

*2016 vs 2020*

	2016 CHA Report	2020/2021 CHA Report
Steering Committee and Community Committee Involvement	✓	✓
Epidemiology Department Collected Data	✓	✓
Followed MAPP Framework	✓	✓
In-Person Meetings	✓	
Priorities Identified in CHA Process	✓	
Infographic Based		✓
More Health Indicators & ZIP Code Maps		✓
Report Findings of Reports when Received		✓
Virtual Meetings		✓
Established Review Panel		✓

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# Forces of Change Assessment

*Overview*

## Goal

Identify forces (trends, factors, or events) that influence the community and how its local public health system operates.

Answers the Questions:

- What is occurring or might occur that affects the health of our community or the local public health system?
- What specific threats or opportunities are generated by these occurrences?

## Methods

Design

- Developed based on National Association of County and City Health Officials' (NACCHO) guidelines
- CHA Steering Committee designed Survey – Survey Gizmo
- 22 Responses Received

# Forces of Change Assessment

## *Summary of Findings*



### Threats

- Severe unemployment
- Increase in number of uninsured persons
- Inequality of populations
- Increases in violence
- Lack of access to healthcare
- Poor quality of healthcare
- High costs of healthcare
- Need for vaccines to prevent disease spread
- Transportation
- Mental Health

### Opportunities

- Diversification of local economy
- Improvement of human and social services
- Universal health insurance and basic income
- Increased advocacy and/or activism
- Increased support for law enforcement
- Changed paradigm of healthcare delivery
- Increased number of providers
- Further develop UNLV SOM
- Increase funding and access to vaccines

# 2 Community Themes & Strengths

## *Overview*

The Nevada Institute for Children's Research and Policy (NICRP) conducted focus groups

1. Those experiencing homelessness
2. Members of the LGBTQ+ community
3. Parents
4. Seniors aged 55 and older
5. Primarily Spanish speakers
6. Members of the Black/African American community

- Round 1:
  - 7 focus groups
  - February 28th and March 21st, 2020
  - 70 individuals.
- Round 2:
  - 3 focus groups were held in
  - July/August of 2020
  - 15 individuals.

# Community Themes & Strengths Assessment

*Summary of Findings*

## Strengths

- Community supports a healthy lifestyle
- Community has adequate health and wellness activities

## Weaknesses

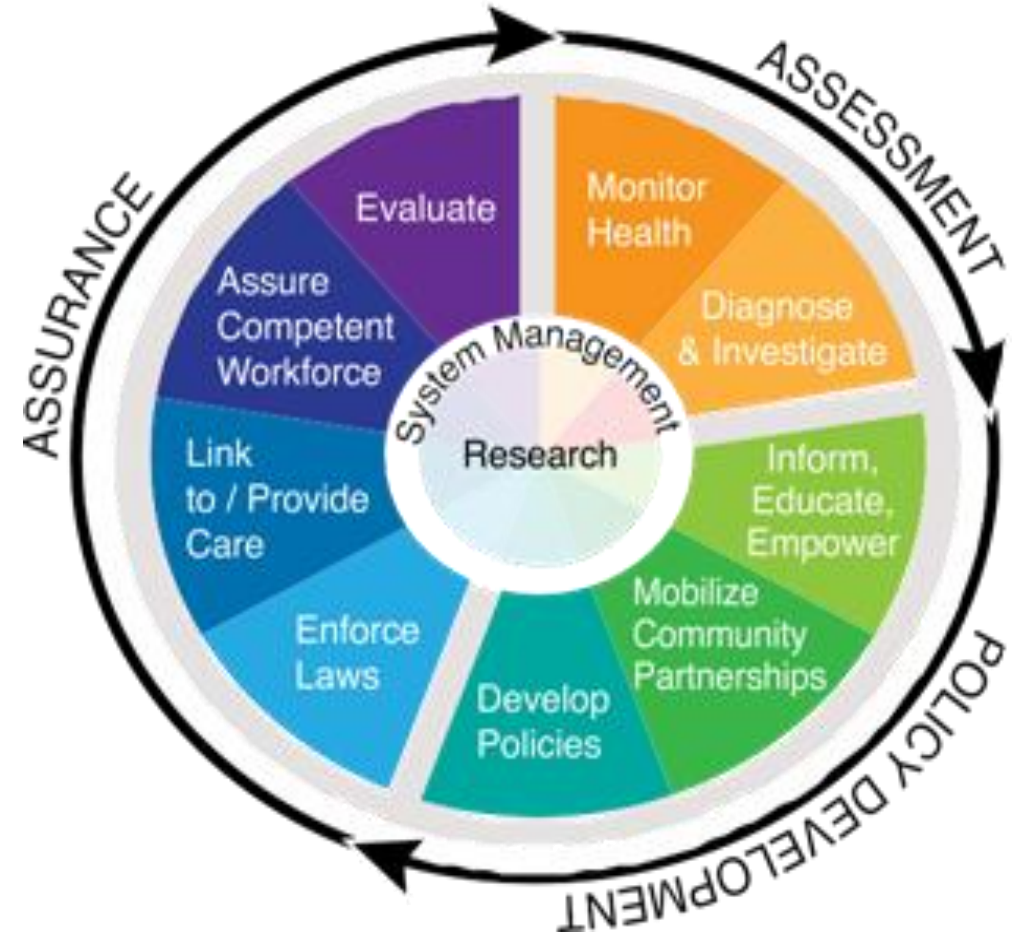
- Access to health care
- Mental health
- Health Insurance
- Community Safety
- Chronic Disease
- Transportation



# 3

## Local Public Health System Assessment Overview

- Survey collection from online surveys
- Two half-day virtual discussion meetings
- 5 breakout sessions, each one covering one Essential Service
- 37 Total Participants and 48 Completed Surveys



# Local Public Health System Assessment

*Summary of Findings*

## Strengths

- Collaboration and Community Partnerships
- Emergency Preparedness
- Surveillance Data
- Accessibility to Care (Telemedicine)

## Weaknesses

- Lack of Funding
- Data Sharing and Accessibility
- Increase Community Action
- Transportation

# 4

# Community Health Status Assessment

## Overview

### Community Health Status Assessment



- The Community Health Status Assessment (CHSA) collected, assessed, and reported on core health indicators about the health of residents to enable identification of health issues.
- The data displayed were collected from 2014-2018 to show change and 2016-2018 for averages, to support a comparable snapshot in time of the results.
- In addition to topic-specific health indicators, this report reviewed 67 health indicators.
  - *Of those 67 health indicators, 51 health indicators were reviewed by ZIP code.*

# Chapter 4 Infectious Disease



## HEALTH INDICATORS

- Active Tuberculosis Rates
- Rate of New Acute Hepatitis A Infections
- Rate of New Acute Hepatitis B Infections
- Rate of New Acute Hepatitis C Infections
- Rate of New Cases of HIV
- Rate of New Cases of Chlamydia
- Rate of New Cases of Gonorrhea
- Rate of New Cases of Syphilis (Primary & Secondary)
- Influenza & Pneumonia

# Community Health Status Assessment

## Infographic

## INFLUENZA & PNEUMONIA

### Summary

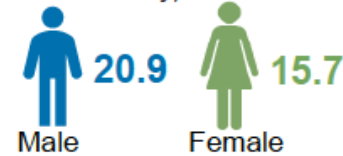
Influenza and pneumonia are one of the top 10 leading causes of death in Clark County. This health indicator represents number of deaths of reported cases of influenza and pneumonia per a 100,000 population. In Clark County, there were 18.1 per 100,000 deaths.

### Why is it important?

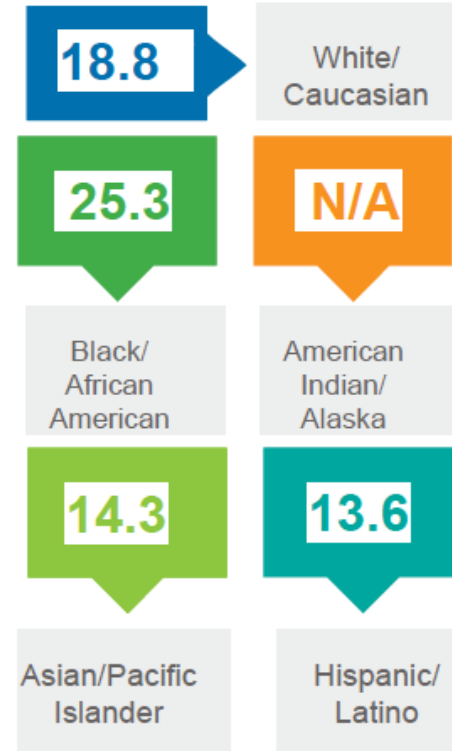
Influenza, better known as the flu, is a viral infection that is highly contagious and is typically characterized by fever and respiratory symptoms such as a cough. On the other hand, pneumonia is a more severe infection, leading to inflammation of the lungs, and can be a possible complication of influenza. Those most at risk for severe infection and death are the very young and the very old. The annual flu vaccine can help protect individuals from developing influenza. These vaccines are widely available throughout the flu season, which is typically early October into the spring and typically spikes January and February in Clark County. With public health efforts, such as epidemiological investigation and immunization services, providers and the community have an opportunity to work with and assist in the identification of gaps in vaccine standards and prevention policies to inform decision making around influenza and pneumonia.

Data Source: CDC WONDER, Underlying Cause of Death 2016-2018

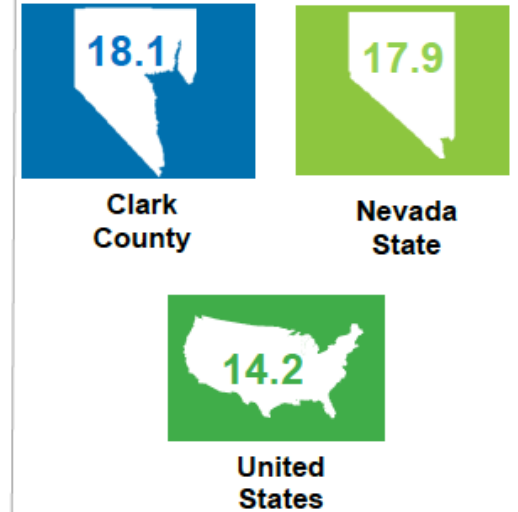
### Influenza & Pneumonia Mortality Rate by Sex (Per 100,000 Population) Clark County, 2016-2018



### Influenza & Pneumonia Death Rate by Race/Ethnicity (Per 100,000 Population) Clark County, 2016-2018



### Influenza & Pneumonia Mortality Rate Comparison (Per 100,000 Population), 2016-2018



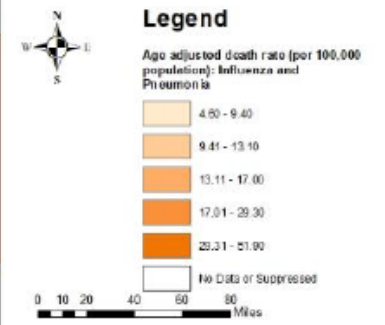
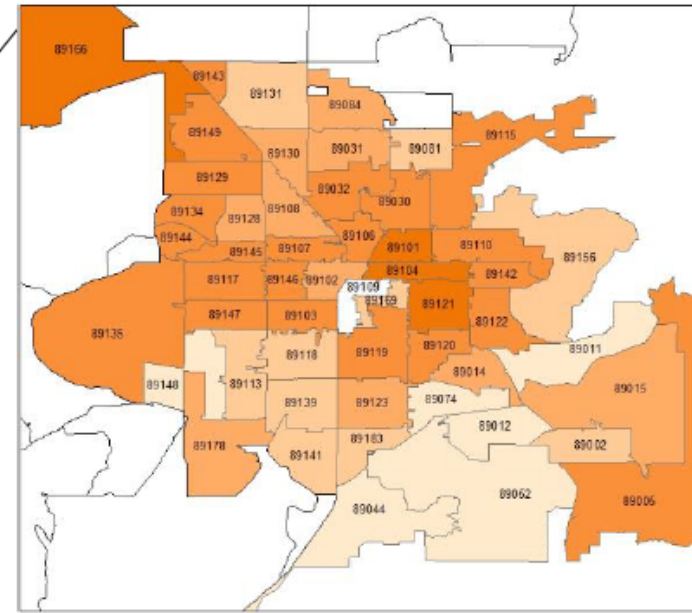
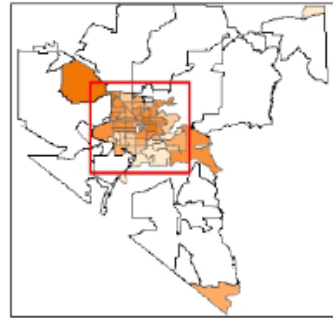
### How are we doing?

Influenza and pneumonia are among the top 10 causes of death in Clark County. From 2016-2018, the age-adjusted death rate was 18.1 per 100,000 population, lower than both the state and the national age-adjusted mortality rates. Rates were highest among people who identified themselves as Black/African American non-Hispanic (25.3 per 100,000 population), and male (20.9 per 100,000 population). The ZIP codes with the highest influenza and pneumonia mortality rates were 89104, 89121, 89109, 89166, and 89144.

# Community Health Status Assessment

## ZIP Code Map

**Influenza and Pneumonia Mortality**  
Clark County, 2016-2018

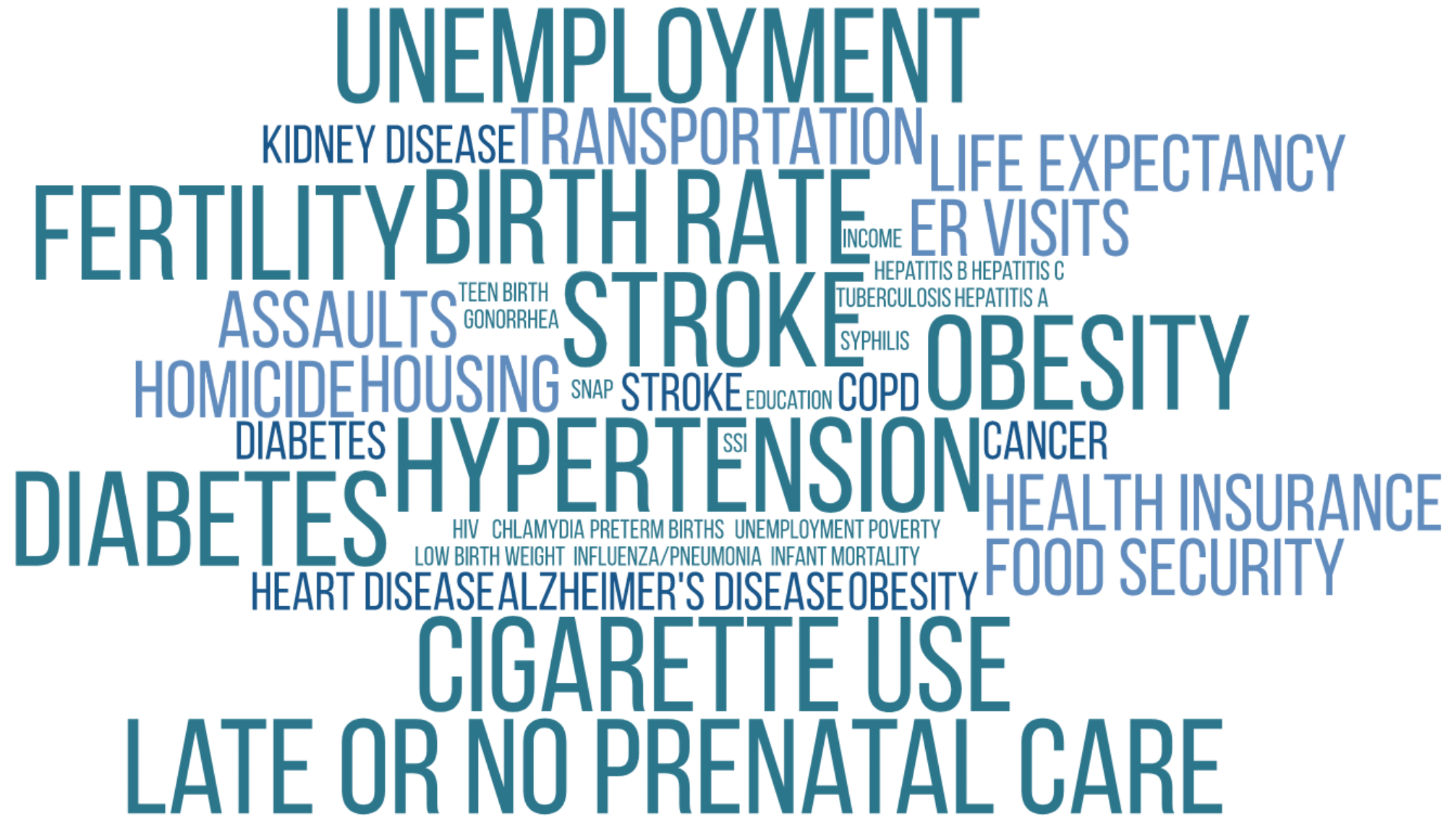


Data Source: CDC WONDER, Underlying Cause of Death 2016-2018

89002	11.8	89026	*	89074	6.9	89109	54	89128	15.7	89145	23.6
89004	*	89027	9.3	89081	11.7	89110	21.8	89129	20.4	89146	20
89005	17.4	89029	14.7	89084	15	89113	11.9	89130	15.9	89147	21.5
89007	*	89030	27.2	89085	*	89115	21.9	89131	12.2	89148	9.4
89011	4.6	89031	15.6	89086	*	89117	26.8	89134	18.9	89149	22.9
89012	8.4	89032	19.9	89101	51.2	89118	11.6	89135	17.5	89156	13.1
89014	15.4	89039	*	89102	17	89119	22.2	89138	*	89161	*
89015	16.2	89040	*	89103	19.4	89120	25.2	89139	12	89166	35
89018	*	89044	5.6	89104	38.2	89121	36	89141	12.1	89169	12.8
89019	*	89046	*	89106	22.7	89122	21.1	89142	22.2	89178	15
89021	*	89052	7.8	89107	22.6	89123	15.3	89143	27.3	89179	*
89025	*	89054	*	89108	16.8	89124	*	89144	29.3	89183	12.8
										89191	*

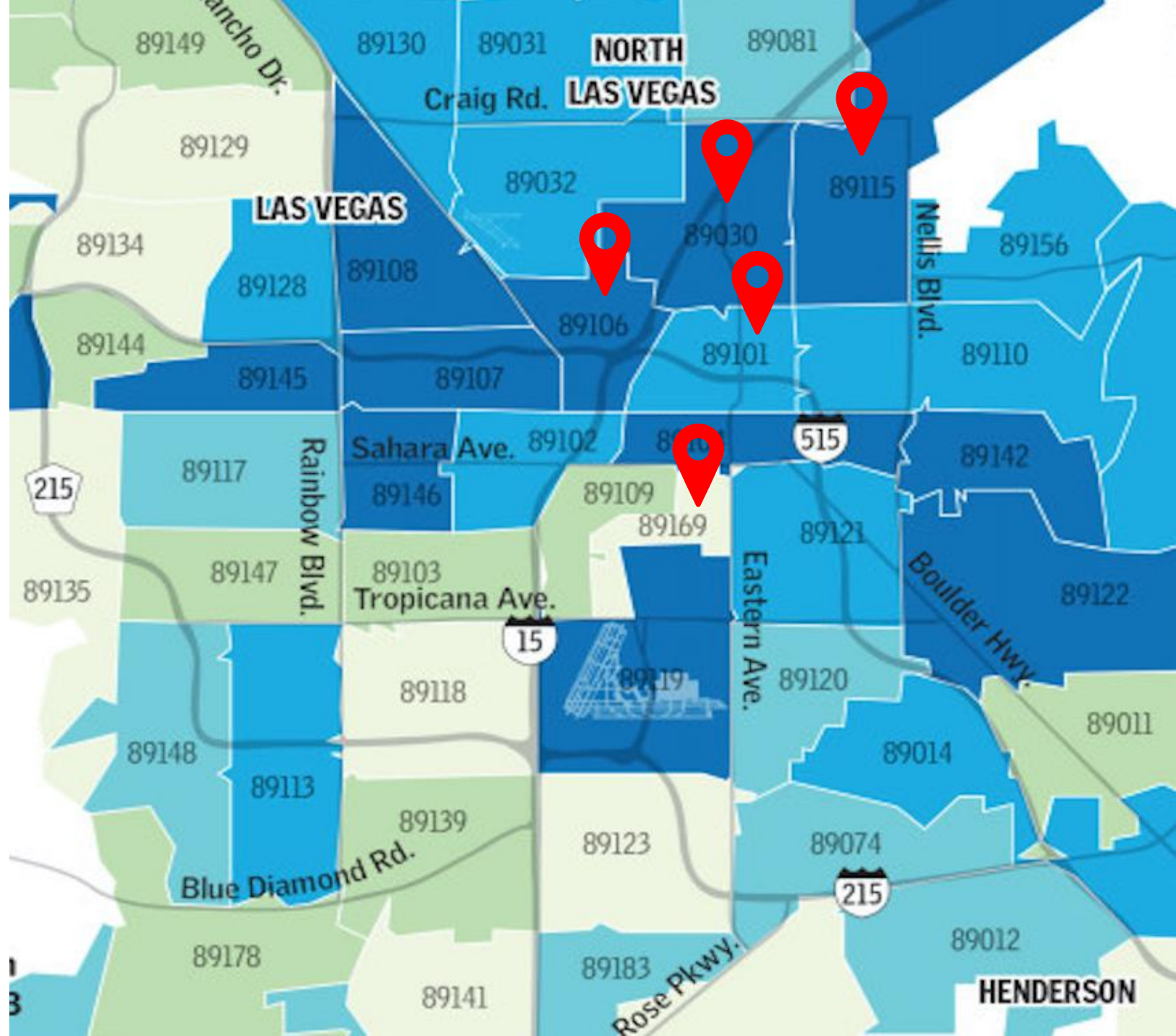
\* No Data or Suppressed

# Health Burdens Among ZIP Codes of Southern Nevada



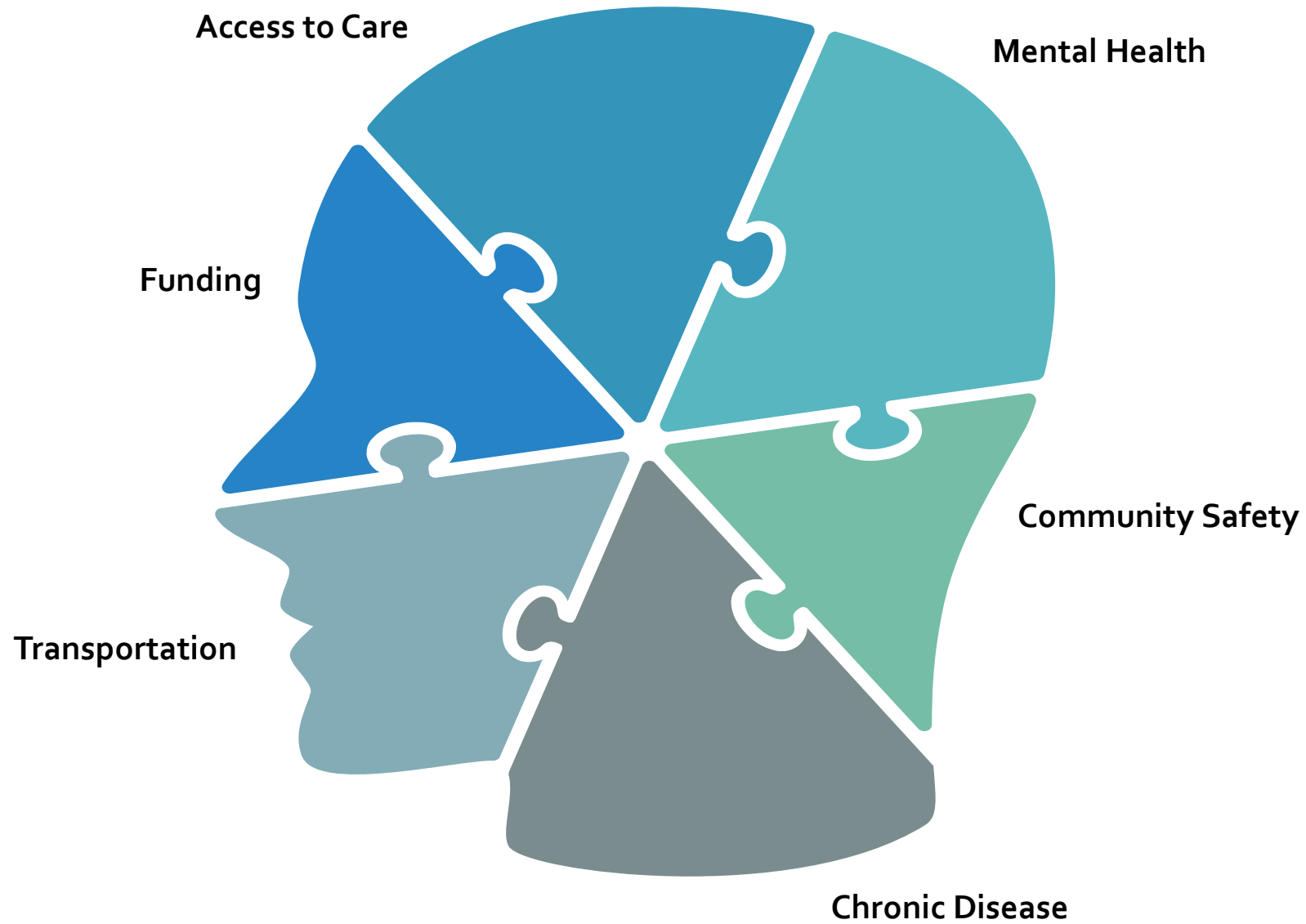
# Top 5 ZIP Codes with Greatest Health Burdens

- 89030
- 89101
- 89106
- 89115
- 89169





# Key Data Intersections





**Next Steps:** CHA Priorities and CHIP Planning  
Committee presentation:  
mid-October 2021 TBD



# *Thank You!*

*Dr. Fermin Leguen  
Dr. Michael Johnson  
Dr. Cassius Lockett  
Marlo Tonge  
Elizabeth Adelman  
Jessica Johnson  
Dr. Ying Zhang  
Maria Azzarelli  
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