



Memorandum

Date: October 7, 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*

Subject: Community Health Division Monthly Activity Report – October 2021

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

A. Chronic Disease Prevention Program (CDPP)

A Move Your Way event was held in partnership with North Las Vegas, Councilman Black and Commissioner Kirkpatrick. The event featured free entrance to the pool at Silver Mesa Recreation Center as well as games and giveaways. Over 650 people participated in the event. The final Move Your Way event will be held in September as part of Childhood Obesity Awareness Month.

CDPP worked with our partners at the University of Nevada-Extension (UNR-E) to promote National Farmers Market Week in August. A coordinated social media campaign to provide information on area farmers markets and promote those that accept SNAP as a form of payment ran during the week. In addition, staff from UNR-E were onsite at 2 local farmers markets to distribute handouts, recipe cards, flyers and nutrition incentives during the week.

The Verano Sin Soda campaign wrapped up in August. The annual initiative is directed to the Latinx community and encourages people to reduce or eliminate their consumption of sugar-sweetened beverages over the summer. CDPP worked with Promotoras Las Vegas to implement the annual program. In total, over 758,500 people were directly or indirectly reached through this year's campaign. 2021 program highlights include:

- 21 people signed a pledge to reduce or eliminate soda and sugar-sweetened beverage consumption.
- Education including water bottles, healthy beverage recipes, and educational materials in English and Spanish was provided at 4 community events that reached over 500 people.
- Over 758,000 people were reached via earned or social media including radio interviews, Facebook and Facebook Live events as well as posts on other social media platforms.

The CDPP worked with the Southern Nevada Breastfeeding Coalition and the Kijiji Sisterhood to sponsor several activities to promote breastfeeding during World Breastfeeding Month in August. Activities included a Breastfeeding Resource Fair during Native Breastfeeding Week at the Inter-Tribal Council of Nevada. This event served over 20 people. A 'Latch-On' event was also held in August with over 18 participants or supporters. Finally, a Human Milk Donation Drive to celebrate Black Breastfeeding Week was held reaching over 30 people and collecting over 1,500 oz of breastmilk for donation. The CDPP also launched a breastfeeding campaign to commemorate National Breastfeeding Month. The campaign ran on several media platforms including print, social media and web in both English and Spanish. The campaign featured images of local women from our priority population and their children. Campaign messages focused on 5 themes identified from a previous breastfeeding survey. The campaign also promoted available resources and community activities mentioned above. Staff from the SNHD Maternal and Child Health Program was a guest on the Healthier Tomorrow radio program in August to talk about breastfeeding.

In August, CDPP staff partnered with UNLV, Immunize Nevada and Blade Masters barbershop to facilitate a tele town hall Shop Talk event. Shop Talk provided information about the COVID-19 vaccine and the impact of contracting COVID-19 with underlying chronic health conditions such as hypertension or heart disease. Robo callouts reached 902 attendees who joined the tele townhall. Of those, 14 entered the que to ask questions with 12 questions being screened to ask questions. Over 40 people were also connected with information to make a COVID-19 vaccine appointment.

CDPP participated in the Healthy Senior Day event at the Heinrich YMCA. Educational materials, handouts and other resources were provided to 23 seniors who participated in the event.

In August 3 CDPP team members, including 2 Health Educators and our CHW, were trained as new facilitators of the Maps Diabetes Self-Management & Education (DSME) course. Training was provided by Healthy Interactions. One of our new facilitators will be shadowing our Diabetes Coordinator as she provides a Maps DSME course scheduled for September.

B. Tobacco Control Program (TCP)

Staff has identified 41 teen social media influencers in Southern Nevada. The identified teen influencers are trained as message ambassadors for our youth vaping prevention movement called BreakDown. Teens will post to their personal social media accounts (Instagram, SnapChat and Tik Tok) preapproved social media blocks with vape prevention and educational messages. The teens will use their personal social media networks and influence to amplify their vape-free lifestyle to combat the influx of pro-vape imagery and promotion on social media. All identified teen influencers have to meet a minimum social media influencer score, impression and reach to be a part of the BreakDown team.

CRUSH is the Southern Nevada Health District's Lesbian, Gay, Bisexual, Transgender tobacco prevention initiative. On Friday, August 6, 8 high profile local drag queens hosted a performance at Area 15 to promote tobacco cessation and the tobacco-free lifestyle. These performers are popular in the community as 4 of them have been featured on the national TV show RuPaul's Drag and the other 4 are resident queens at various LGBTQ+ nightclubs in Southern Nevada. In addition to performing in the show, all 8 performers posted tobacco prevention

messages on their social media networks amplifying our CRUSH movement with their followers.

C. Other Efforts

OCDPHP has received additional funding from the CDC to support COVID-19 and flu vaccine education and delivery among our REACH grant priority populations (African Americans and Hispanics). OCDPHP staff are working with community partners to train influential messengers in the community, promote vaccine update and increase accessibility to vaccines among these populations.

In August:

1. Work continued on the needs assessment. Survey activities in the African American and Hispanic communities continued and over 182 survey responses have been collected to date.
2. 21 influential messengers were trained by SNHD staff and contractors.
3. Staff and contractors participated in 9 community events to distribute information and promote vaccination to an estimated 1,036 people.
4. 10 new partnerships were formed to support vaccination efforts.
5. Work on media activities continues. A campaign to promote flu vaccination among priority populations is being revised and paid media will begin in September. Twenty new communication products were developed and deployed to support vaccination efforts. Over 60,499 were reached through various communication efforts/campaigns.
6. Seven pop up vaccine clinics were held in priority areas. Eighty-eight people were vaccinated at these events and 95% of those were representatives from one of our priority populations.

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

A. Education Committee

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

Following the selection of a new Chair and Vice Chair, the committee discussed the need to develop an education component for cardiac arrest management. Also discussed was a change in the scope of practice to allow EMTs to monitor already established saline locks for interfacility transports.

B. 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 DDP continues its work on proposed revisions to the Clark County EMS System Emergency Medical Care protocols, including target temperature management and post resuscitation.

C. Medical Advisory Board (MAB)

The primary mission of the MAB is to support the Health Officer's role to ensure quality patient care within the EMS system by making recommendations and assisting in the ongoing design, operation, and evaluation of the EMS system from initial patient access to definitive patient care. The members include: 1) One medical director of each firefighting/franchised agency; 2) One operational director of each firefighting/franchised agency; 3) Chairman of the Regional Trauma Advisory Board; and 4) An employee of the District whose duties relate to the administration and enforcement of EMS Regulations as an ex-officio member.

The Board discussed issues related to reports heard from the Education, DDP and QI Directors Committees.

D. 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 Board welcomed the re-appointed RTAB non-standing members selected for the July 2021–June 2023 term.

The Board reviewed and discussed the trauma transport data for 1st quarter 2021.

COMMUNITY HEALTH – OEMSTS - Fiscal Year Data

August EMS Statistics	Aug. 2020	Aug. 2021	
Total Certificates Issued	57	67	↑
New Licenses Issued	51	61	↑
Renewal Licenses Issued (recert only)	0	5	↑
Driver Only	26	14	↓
Active Certifications: EMT	822	766	↓
Active Certifications: Advanced EMT	1673	1624	↓
Active Certifications: Paramedic	1873	1782	↓
Active Certifications: RN	59	63	↑

CLARK COUNTY TRAUMA TRANSPORT DATA (01/01/2021 to 06/30/2021)

Total Transports	Step 1	Step 2	Step 3	Step 4	Discharged	Admitted	OR	ICU	Death	Transfer
6910	7%	7%	34%	52%	56%	27%	2%	10%	2%	1%

Out of Area (OOA) Transports	
858	12%

Prepared by the Office of Emergency Medical Services & Trauma System and Office of Informatics

Notes:

1. Out of Area Transports does not include non-trauma hospitals.
2. Out of Area defines compliance with EMS catchment zones. All EMS transports are protocol identified trauma patients delivered to a trauma center outside of their designated catchment zone.
3. Out of Area review threshold is 5% as was established by the Regional Trauma Advisory Board (RTAB). All data is reviewed by the RTAB on a quarterly basis. Current Out of Area overage is being evaluated by the RTAB as an ongoing perspective review of data.

III. OFFICE OF PUBLIC HEALTH PREPAREDNESS (OPHP)

A. Planning and Preparedness

1. 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.
3. Staff are continuing to work with Organizational Development to locate and provide documentation for accreditation.
4. Staff are working with internal staff who have been responding to the COVID-19 response as well as external partners to develop an interim after action report for SNHD and the region.

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
2. Employee Fit Testing: Essential SNHD staff continue to receive respirator fit testing. 54 fit tests completed.
3. One New Hire Emergency Preparedness training was held by OPHP training staff and SNHD security with 22 attendees.

C. Hospital Preparedness Program (HPP)

1. 01 SEP – HPP Liaison provided a presentation on Public Health and Emergency Management – Partnership for Success” to the National Homeland Security Conference in Las Vegas.
2. 02 SEP – HPP Liaison, as the Chair, Southern Nevada Healthcare Preparedness Coalition (SNHPC) convened the September 2021 meeting

for the SNHPC Members. Discussed at this meeting were upcoming training and exercise, the status of the August All-Hospital Radio Test, Community Partner updates, and a review of the Preparedness Plan, Response Plan, and SNHPC Charter during this meeting. Following this meeting, the HPP Liaison, as the Planning Section Chief for the Incident Command Team (Testing) hosted the weekly planning meeting for Operations Period 78.

3. 07 SEP – HPP Liaison, as Planning Section Chief, hosted the Operations Period Brief of Ops Period 78.
4. 08 SEP – HPP Liaison, as Planning Section Chief, provided support to the ICS (Testing) team for the weekly tactics meeting.
5. 09 SEP – HPP Liaison, as Planning Section Chief, hosted the Planning Meeting for Operational Period 79 starting Monday, 13 SEP 2021. The HPP Liaison also supported the McCarren Triennial Airport Exercise receiving report(s) and update(s) from the Emergency Operations Center at the airport. The HPP liaison also attended the Emergency Management Committee Meeting at University Medical Center of Southern Nevada through a virtual platform. Updates from the HPP Liaison to the EM Committed at UMCSN included upcoming Healthcare Coalition Meeting for October, planning meeting for the upcoming Highly Infectious Disease Table-Top Exercise, the Great Nevada ShakeOut in October, the Multi-Jurisdiction IED Workshop ~ Fire/EMS/HOSP, and the Pediatric Disaster Response & Emergency Preparedness Course in April of 2022.
6. 13 SEP – HPP Liaison attended the weekly microplanning session with the State of Nevada re: COVID-19 efforts in southern Nevada. Also, as Planning Section Chief, hosted the Operations Period Brief for Operations Period #79 starting at 1600 (4:00 p.m.) today.
7. 14 SEP – HPP Liaison attended the weekly tactics meeting for the Incident Command System Team (COVID-19 Testing). Also, HPP Liaison attended Human Resources Training on Recruitment Training For Interview Panel Members: Interviewing without HR.
8. 15 SEP – HPP Liaison with the Office of Public Health Preparedness met with the State Division of Public and Behavioral Health to conduct the Annual Site Visit and discuss Budget Period 2 from the 2020 – 2021 period. HPP answered all questions addressed from the state during the visit and provided five achievements for HPP during the aforementioned Budget Period.
9. 16 SEP – HPP Liaison, as Planning Section Chief, hosted the Planning Meeting for the SNHD ICS (Testing) team to discuss the plans for the upcoming Operational Period.
10. 17 SEP – HPP Liaison hosted a meeting with several healthcare organizations to discuss their personnel protective equipment in case of a radiation event. Input due by mid-October.
11. 21 SEP – HPP Liaison, as Planning Section Chief, participated and supported the Tactics meeting for the SNHD ICS (Testing) team.
12. 22 SEP – HPP Liaison hosted the Concepts and Objectives/Initial Planning Meeting for the scheduled Highly Infectious Disease Table-Top Exercise in 2022. The presentation discussed, the identified disease, symptoms, and

objectives for the exercise. Also, the HPP Liaison attended the Emergency Management Committee meetings at Rose de Lima and Siena Hospitals yesterday supporting the community healthcare emergency management cycle. Updates from the HPP Liaison included the next Southern Nevada Healthcare Preparedness Coalition meeting on 7 October 2021, planning for National Disaster Medical System table-top exercise in June 2022, the Great Nevada ShakeOut in October, and the Pediatric Disaster Response & Emergency Preparedness Course in April 2022.

13. 23 SEP – HPP Liaison participated in the San Martin Emergency Management Committee Meeting providing updates to the group which included the next Southern Nevada Healthcare Preparedness Coalition meeting on 7 October 2021, planning for National Disaster Medical System table-top exercise in June 2022, the Great Nevada ShakeOut in October, and the Pediatric Disaster Response & Emergency Preparedness Course in April 2022. The HPP Liaison, as the Planning Section Chief, hosted the Planning meeting for Operations Period 81, starting Monday 27 September 2021. Finally, the HPP Liaison attended an Active Shooter Workshop hosted by the Cybersecurity and Infrastructure Security Agency (CISA) which included presentation on strategies to respond to an active shooter.
14. 24 SEP – HPP Liaison participated with the OPHP leadership, PHEP Senior Planner, and representative from the State of Nevada to discuss the potential of conducting a Community Assessment for Public Health Emergency Response (CASPER) to determine the effectiveness of the response of the State response to COVID-19 in the community.
15. 27 SEP – HPP Liaison participated in the weekly Microplanning session with the State of Nevada, SNHD leadership, and OPHP members to discuss the current state of vaccination operations in southern Nevada, potential vaccine deliveries, and potential preparation for booster shot delivery. HPP Liaison, as Planning Section Chief, hosted the Operations Brief to the Incident Command System (ICS) COVID-19 Testing team.
16. 28 SEP – HPP Liaison participated in the Incident Command System (ICS) COVID-19 Testing team tactics meeting, supporting the Operations Section Chief. Also, the HPP Liaison participated in a webinar regarding the update to the Comprehensive Planning Guide version 3, understanding the changes, additions, deletions, and summary of changes that impact planning efforts for the HPP Program.
17. 29 SEP – HPP Liaison with the OPHP Training Officer provided/facilitated an Active Shooter Response Table-Top Exercise to Transitional Care of Las Vegas. This exercise provided the healthcare facility to apply their Active Shooter annex of their Emergency Operations Plan to the scenarios in the table-top exercise.

D. Grants and Administration

1. OPHP staff are supporting SNHD and MACC/MSST COVID-19 response and logistical needs.
2. Manager and Supervisor continue with grant related contracts for new fiscal year to spend down federal funding according to grant scopes of work.
3. Vacancies due to promotion continue to be filled with new hires.

4. OPHP staff are in the process of being cross-trained to be able to be serve as backup for critical positions within program and for agency during sustained COVID-19 emergency.

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 August 2021:

In August, Medical and non-medical volunteers were deployed to support the COVID-19 vaccination site at the SNHD South Clinic (formerly the site of the non-congregate shelter) as medics and support personnel. Volunteers assisted at the SNPHL and at the Back-To-School immunization clinic. Total “accepted” volunteers stand at about 594. MRC Coordinator recruited, vetted, assigned, and deployed volunteers to all sites. MRC Coordinator continues to recruit volunteers and participates in COVID-19 planning and operations meetings as available. MRC also attended monthly NACCHO MRC Workgroup and PPAG meetings. The table below summarizes volunteer hours served in August.

F. MRC Volunteer Hours FY2022 Q1 COVID-19 Response and Non-Emergency

(Economic impact amounts updated July 2021)

Activity	July	August	September
COVID-19 VAX POD	138.5	147.75	
SNPHL	54	128.5	
SNHD Records Q.A.	48.5	0	
Back-to-School	81	154.75	
Total Hours	322	431	
Economic Impact	\$12,692.71	17,044.09	

IV. VITAL RECORDS

A. Vital Statistics

September 2021 showed a 14% increase in birth certificate sales in comparison to September 2020. Death certificate sales showed a 16% increase for the same time frame. SNHD received revenues of \$36,868 for birth registrations, \$30,355 for death registrations; and an additional \$8,658 in miscellaneous fees.

COMMUNITY HEALTH Vital Statistics Program – Fiscal Year Data

Vital Statistics Services	Sept 2020	Sept 2021		FY 20-21 (Sept)	FY 21-22 (Sept)	
Births Registered	2,020	2,227	↑	6,340	6,561	↑
Deaths Registered	1,946	2,131	↑	5,828	6,265	↑
Fetal Deaths Registered	18	12	↓	46	55	↑

COMMUNITY HEALTH Vital Statistics Program – Fiscal Year Data

Vital Statistics Services	Sept 2020	Sept 2021		FY 20-21 (Sept)	FY 21-22 (Sept)	
Birth Certificates Sold (walk-in)	3	26	↑	13	76	↑
Birth Certificates Mail	102	92	↑	294	336	↑
Birth Certificates Online Orders	3,118	3,580	↑	10,800	13,308	↑
Birth Certificates Billed	88	83	↓	295	292	↓
Birth Certificates Number of Total Sales	3,311	3,781	↑	11,402	14,012	↑
Death Certificates Sold (walk-in)	2	32	↑	18	86	↑
Death Certificates Mail	84	107	↑	293	347	↑
Death Certificates Online Orders	8,862	10,249	↑	26,274	28,638	↑
Death Certificates Billed	42	79	↑	118	188	↑
Death Certificates Number of Total Sales	8,990	10,467	↑	26,703	29,259	↑

COMMUNITY HEALTH Vital Statistics Program - Fiscal Year Data

Vital Statistics Sales by Source	Sept 2020	Sept 2021		FY 20-21 (Sept)	FY 21-22 (Sept)	
Birth Certificates Sold Valley View (walk-in)	.1%	.7%	↑	.1%	.5%	↑
Birth Certificates Mail	3.1%	2.4%	↓	2.6%	2.4%	↓
Birth Certificates Online Orders	94.2%	94.7%	↑	94.7%	95%	↑
Birth Certificates Billed	2.7%	2.2%	↓	2.6%	2.1%	↓
Death Certificates Sold Valley View (walk-in)		.3%	↑	.1%	.3%	↑
Death Certificates Mail	.9%	1%	↑	1.1%	1.2%	↑
Death Certificates Online Orders	98.6%	97.9%	↓	98.4%	97.9%	↓
Death Certificates Billed	.5%	.8%	↑	.4%	.6%	↑

COMMUNITY HEALTH Vital Statistics Program – Fiscal Year Data

Revenue	Sept 2020	Sept 2021		FY 20-21 (Sept)	FY 21-22 (Sept)	
Birth Certificates (\$25)	\$82,775	\$94,525	↑	\$285,050	\$350,300	↑
Death Certificates (\$25)	\$224,750	\$261,675	↑	\$667,575	\$731,475	↑
Births Registrations (\$13)	\$33,345	\$36,868	↑	\$114,738	\$133,263	↑
Deaths Registrations (\$13)	\$26,715	\$30,355	↑	\$79,406	\$85,436	↑
Convenience Fee (\$2)	\$6,800	\$7,976	↑	\$23,026	\$28,114	↑
Miscellaneous Admin	\$742	\$682	↓	\$1,939	\$2,807	↑
Total Vital Records Revenue	\$375,127	\$432,081	↑	\$1,171,734	\$1,331,395	↑

COMMUNITY HEALTH Passport Program – Fiscal Year Data

B. Passport Services

Due to pandemic Passport Services moved to appointment only. Passport photos remain suspended.

Revenue	Sept 2020	Sept 2021		FY 20-21 (Sept)	FY 21-22 (Sept)	
Passport Execution/Acceptance fee (\$35)	\$8,610	\$20,895	↑	\$19,460	\$64,295	↑
Passport Photo Fee (\$12)						
Total Passport Program Revenue	\$8,610	\$20,895	↑	\$19,460	\$64,295	↑

V. HEALTH CARDS

A. Food Handling

1. Appointments
 - a. Currently booked through December 27, 2021 with the deadline to obtain a card being December 31, 2021.
 - b. Continually updating Larry Rogers and Aaron DelCotto in Environmental Health.
 - Inspectors to start asking for cards January 2021 and will give workers one-month to be in compliance.
 - Demerits for not having a card to start early 2021. One demerit penalty instead of three points through end of 2022.
2. Audio test rolled out this month and is being used at both Decatur and Henderson.
 - a. Beneficial to clients who truly need the accommodation.
 - b. Clients who fail the audio food safety test admit that they did not study before coming in.
3. East Las Vegas Move
 - a. Health Cards will shut down at close-of-business November 10, 2021.
 - b. Health Cards will not be located at the temporary site with Immunizations and Family Planning.
 - c. Health Cards staff to be temporarily re-assigned to Decatur. Will increase appointments to absorb East LV clients.

SERVICES	Sep 1-30	Aug 1-31	Jul 1-30	Jun 1-30	May 1-31
Food Handler Cards - New	1,296	1,325	1,270	1,071	879
Food Handler Cards - Renewals	4,330	3,953	3,708	4,512	3,897
Duplicates	203	229	210	271	264
CFSM (Manager) Cards	153	154	131	161	180
Re-Tests	609	597	442	407	273
Body Art Cards	170	170	113	151	174
TOTALS	6,761	6,428	5,874	6,573	5,667

REVENUE - Point of Sale	Sep 1–30	Aug 1–31	Jul 1–30	Jun 1–30	May 1–31
Food Handler Cards - New	\$25,920.00	\$26,500.00	\$25,400.00	\$21,420.00	\$17,580.00
Food Handler Cards - Renewals	\$86,600.00	\$79,060.00	\$74,160.00	\$90,240.00	\$77,940.00
Duplicates	\$4,060.00	\$4,580.00	\$4,200.00	\$5,420.00	\$5,280.00
CFSM (Manager) Cards	\$3,060.00	\$3,080.00	\$2,620.00	\$3,220.00	\$3,600.00
Re-Tests	\$3,045.00	\$2,985.00	\$2,210.00	\$2,035.00	\$1,365.00
Body Art Cards	\$3,400.00	\$3,400.00	\$2,260.00	\$3,020.00	\$3,480.00
Late Fee	N/A	N/A	N/A	N/A	N/A
TOTALS	\$126,085.00	\$119,605.00	\$110,850.00	\$125,355.00	\$109,245.00

B. COVID-19 Activities

Continued oversight of door screeners

VI. HEALTH EQUITY

The Health Equity program received funding from the Center for Disease Control to build, leverage, and expand infrastructure support for COVID-19 prevention and control among populations that are at higher risk and underserved.

- A. The program selected and onboarded 9 community organizations through the Request for Proposals (RFP) process. Organizations will carry out grass root initiatives to address COVID-19 health disparities.
- B. The program continues to participate in community-based coalitions and workgroups addressing COVID-19 health disparities, testing and vaccination initiatives.

VII. SOUTHERN NEVADA PUBLIC HEALTH LABORATORY (SNPHL)

A. Clinical Testing SNPHL Supports

1. The SNHD Nursing Division: molecular and microbiology culture, Sexually Transmitted Disease (STD) testing.
2. SNHD STD Department: the CDC Gonococcal Isolate Surveillance Project (GISP) as well as enhanced Gonococcal Isolate Surveillance Project (eGISP). SNPHL performs NAAT and culture testing of N. gonorrhoeae isolates and submits isolates to reference laboratory for determination of antibiotic susceptibility patterns. SNPHL has also joined eGISP Part B to expand culture-independent testing for antimicrobial resistance genes of gonococcal isolates.
3. Total monthly samples tested are listed as follows:

Test Name	Monthly Count	Avg Year to Date
GC Cultures	65	63
NAAT NG/CT	1055	1259
Syphilis	485	542
RPR/RPR Titers	76/114	89/74
Hepatitis Total	675	166
HIV/differentiated	407/6	354/12
HIV RNA	26	41

B. COVID-19 Testing

1. SARS-Cov-2 PCR extraction is currently performed on the King Fisher Flex platform only.
2. SNPHL goal is to maintain capacity of 1,000-1,500 tests/day) with turn-around-time of <48 hours (TAT 2Day - currently at/near goal).
3. For September, the average daily capacity was 1,118 and average turnaround time 27.2 hours days for PCR testing. The average laboratory total test capacity for SARS-CoV-2 including Aptima NAAT testing is 337 test per day.
4. IT created easy patient accession and direct report verification from SNPHL LIS into SNHD patient report portal.
5. Incorporate high through put instrument such as Eppendorf 5073 automation of specimen fluid handling station
6. Working on a CCSD initiative to evaluate COVID-19 on random selected samples of Clark County students and staff.
7. A monthly summary of COVID-19 PCR testing is listed as follows:

COVID-19	# PCR/#POS	COVID-19	# PCR/#POS
January	15,626/1802	July	28,334/3,215
February	10,477/502	August	25,759/3,080

COVID-19	# PCR/#POS	COVID-19	# PCR/#POS
March	12,605/302	September	21,688/2,504
April	11,346/476	October	
May	12,268/429	November	
June	13,881/661	December	

C. Reportable Disease Reports

- SNPHL continues to perform routine testing of reportable disease specimens submitted to SNPHL 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.
- A monthly summary of reportable diseases tests is listed as follows:

2021		Jan	Feb	Mar	April	May	June	July	Aug	Sep
Campylobacter	Campy ID	7	6	13	4	14	19	10	7	2
	Campy Screen	9	7	21	9	19	25	15	10	4
Neisseria species	Gonorrhoeae Culture	42	59	82	55	40	49	47	68	65
	Gram Stain/WBC	0	0	0	5	0	2	0	5	0
	Neisseria ID	2	1	9	1	1	6	2	2	2
	Haemophilus ID	1	0	4	0	0	3	3	6	1
Unknown ID	Bacterial ID	5	0	5	3	0	9	5	37	14
	WGS (PulseNet)	15	26	27	25	45	62	27	36	51
Salmonella	Salmonella Screen	8	17	22	10	24	19	13	16	14
	Salmonella Serotype	8	13	21	10	18	20	11	15	9
Shigella	Shigella Screen	1	8	7	8	7	12	7	3	3
	Shigella Serotype	0	5	2	5	4	6	3	2	3
STEC	STEC Screen	0	1	1	2	3	17	8	4	3
	STEC Serotype	0	1	1	1	1	16	2	0	1
Unknown	Stool Culture	0	5	0	11	0	5	0	5	5
Vibrio	Vibrio ID	0	0	3	0	0	1	1	5	0
	Vibrio Screen	0	0	3	0	0	5	3	8	1
	Yersinia Culture/ID	0	1	1	2	2	2	0	1	

D. Epidemiological Testing and Consultation

- SNPHL participates in the SNHD Outbreak Investigation Committee and Foodborne Illness Taskforce. Conducted 2 outbreak investigations in September.
- SNPHL continues to report results of influenza testing to the CDC National Respiratory and Enteric Virus Surveillance System (NREVSS). SNPHL performed in September, 47 respiratory panels on the BioFire.

E. Emergency Response and Reportable Disease Isolate Testing Report

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 such as the Public Health Laboratory Information System (PHLIS), National Antimicrobial Resistance Monitoring System (NARMS), and Influenza Surveillance, and PulseNet Bacterial Outbreak Surveillance
2. There were no B. anthracis rule outs submitted to SNPHL in September. We received a single isolate for r/o Brucella and a single isolate for r/o Burkholderia mallei/pseudomallei. Both were negative and completed in September.
3. The infant bot case is complete, pending results on infant formula testing.
4. 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	June	July	Aug	Sep
Select Agent Rule out (total PCR)	0	2	3	8	2	1	0	2	2

5. 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.
6. SNPHL performed 51 Whole Genome Sequencing tests (WGS) as part of PulseNet in September 2021.
7. SNPHL is now using whole genome sequencing and toxin testing to type of STEC (Shiga toxin-producing E. coli), improving workflow and turnaround time of reporting.
8. SNPHL has validated one group of bacteria for the Bruker MALDI-TOF instrument for streamlined screening of bacterial isolates, to decrease turnaround time and modernize microbiological identification methods.
9. SNPHL is validated for sequencing SARS-CoV-2 and identifying variants of interest through the identification of lineages and clades.
10. SNPHL has sustained capacity of sequencing a number of 48 SARS-CoV-2-positive RNA extracts per week with expectations of increasing this capacity with appropriate staffing and method development. As of September 2021, SNPHL has sequenced 198 SARS-CoV-2-positive RNA extracts.
11. SNPHL coordinates and participates with Environmental Health and Veritas Labs for Legionella surveillance.

2021	Jan	Feb	Mar	April	May	June	July	Aug	Sep
Legionella	0	1	1	1	11	1	0	4	6

12. SNPHL provides vector testing for Environmental Services; testing for Zika, West Nile, Western/Eastern Equine Encephalitis. Our facility hosted a CDC demonstration for the Vector team. There were 2 positive mosquito pools for WNV in September.

F. 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 provides COVID-19 Biosafety Training/Guidelines to Non-Traditional testing sites.
3. SNPHL coordinates with training/exercises for First Responders including local Civil Support Team, HazMat, Federal Bureau of Investigation, and Las Vegas Metropolitan Police Department.
4. SNPHL provides information to local laboratorians on CDC packaging and shipping infectious substances and on chain of custody procedures.

G. September 2021 SNPHL Activity Highlights

1. Laboratory starts to receive COVID-19 samples from CCSD on September 1, 2021. SNPHL received a total number of 2,039 COVID-19 samples from the first day of September.
2. SNPHL has a stable FEMA supply of Viral Transport Medium (VTM) used in COVID-19 collection kits.
3. Lab Space Build-out: Total re-model into downstairs warehouse build out area is being explored, with different options examined. Minor change of the office design has been submitted for approval. Construction completion date is planned for 1/31/2022.
4. Laboratory has paid the fee, \$88,500, for the invoice submitted by UMC for the COVID-19 testing performed in 2020.
5. Interview the additional laboratory manager applicants position on Friday, October 8, 2021. Five applicants for the laboratory Administrative Coordinator position have been selected for interview.
6. The State ELC grant coordinator approved the laboratory's request to use the ELC money to purchase two 7500 DX Fast Real-Time PCR platforms. In late September, the purchasing procedure was initiated. These devices will aid our laboratory in increasing COVID-19 PCR testing capacity.
7. The laboratory was also given permission to spend ELC funds to purchase an EpMotion 5073 liquid handling station, a NextSeq 2000 whole genome sequencing, and a Milli-Q IQ7000 purification equipment for COVID-19 WGS and PCR testing.
8. SNPHL's COVID-19 whole genome sequencing data has been successfully uploaded to TERRA, the state sequencing database. Because SNPHL requires additional time to complete their stock of samples in their laboratory, SNPHL has temporarily halted sending sequencing samples to them.

9. On Tuesday, September 14, 2021, the state laboratory inspected our laboratory. On Monday, September 27, 2021, the laboratory received an upgraded state laboratory license.
10. Laboratory received new certificate from CDC DSAT and have uploaded in our eFSAP website. The expiration date for this new certificate is September 25, 2023.

H. COMMUNITY HEALTH – SNP HL – Calendar Year Data

SNPHL Services	YTD September 2020	YTD September 2021	
Clinical Testing Services ¹	5,474	3,394	↓
Epidemiology Services ²	112	302	↑
State Branch Public Health Laboratory Services ³	12,916	29,669	↑
All-Hazards Preparedness Services ⁴	11	2	↓
Environmental Health Services ⁵	52	491	↑

1. Includes N. Gonorrhoeae culture, GISP isolates, Syphilis, HIV, CT/GC molecular, Gram stain testing and COVID-19 Ab immunologic tests.
2. Includes Stool culture, EIA, Norovirus PCR, Respiratory Pathogen PCR, Epidemiological investigations, or consultations.
3. 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.
4. Includes Preparedness training, teleconferences, Inspections.
5. Includes vector testing

