



Memorandum

Date: March 4, 2022

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 – February 2022

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

A. Chronic Disease Prevention Program (CDPP)

The Slam Dunk Health Program relaunched in January 2022 after being sidelined due to COVID-19 for the past 2 years. The school-based program is a partnership between the CDPP, CCSD, and the Las Vegas Aces WNBA team. The program encourages physical activity and fruit and vegetable consumption among elementary school youth and rewards winning classrooms with visits from Aces players and coaches. This year, 1,077 elementary school classrooms signed up to participate. This represents 18,880 students in 114 CCSD elementary schools. The program will run through early April.

CDPP sponsors the CCSD Safe Routes to School (SRTS) Program. With our support, the SRTS program completed a 'Walk and Roll' program during fall 2021 at 5 schools (estimated 4,000 children) and will be implementing a second 'Walk and Roll' program along with a 'Design Your Helmet' and Achievement Level Champion initiatives planned for spring 2022.

CDPP staff is working with 3 faith-based food pantries to implement the SWAP (Supporting Wellness at Pantries) Program. The SWAP Program helps pantry clients access healthier foods through a stoplight food ranking program and other environmental and systems changes to the pantry environment. Nutritional and environmental assessments were conducted to identify support needed to fully implement SWAP. Shelving and refrigeration have been provided to the pantries to support increased access to healthier foods and allow for foods to be displayed according to the stoplight system. SWAP training was provided in January to all 3 pantries. Pantry coordinators, volunteers and church leadership were all trained in the SWAP program and the program is now fully operational in all 3 pantries. CDPP will continue to provide technical assistance and support to the pantries.

CDPP staff submitted the Annual Status Report to the American Diabetes Association as part of our ADA recognition program. During 2021, the Diabetes Self-Management Education & Support (DSMES) program reached a total of 34

individuals who attended at least 1 DSMES class. Over 70% of participants were still meeting their physical activity goals 6-months after the last class and 96% of participants indicated they were 'Very Satisfied' with the class. Also in January, CDPP staff launched a virtual DSMES class that will run through March 9th. The next DSMES class is an in-person class scheduled for March.

B. Tobacco Control Program (TCP)

Island eNVy, the SNHD Native Hawaiian and Pacific Islander cessation initiative held their monthly event called 'Ohana Outing on January 14th at the Cowabunga Bay Chinese Lantern Festival. All attendees watched a short video on tobacco cessation before participating in the event. 130+ people attended the event.

Staff developed culturally appropriate educational materials to encourage tobacco cessation through the Spanish tobacco Quitline and promote smoke-free living among the Latinx community. A collaboration with 4 local Latino-owned restaurants was established for 8 weeks and concluded this month. The collaboration utilized Por Mi Por Ti Por Nosotros messaging to encourage cessation and smoke-free living among patrons through the distribution of materials. Collaboration resulted in the implementation of smoke-free minimum distance policies and positive feedback from staff and patrons.

Nine local businesses including convenience stores and restaurants voluntarily expanded their tobacco-free policy in January.

A new tobacco cessation video aimed at the Hispanic population featuring local community members sharing their own experience in quitting tobacco.

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 January, Nevada Institute for Children's Research and Policy (NICRP) staff finalized a report outlining findings of a focus group held in December 2021. The focus groups built upon the COVID-19 and Flu Vaccination Survey findings in an effort to better understand disparities in vaccine uptake among African American/Black young adults who are not yet vaccinated or have received a COVID-19 vaccine within the past three months.

Overall, focus group participants supported vaccinations in general. However, participants viewed the COVID-19 vaccine with more hesitation. The most common reasons for COVID-19 vaccine hesitancy were that participants believe the vaccine is too new without enough safety information and that they are concerned about side effects long term and also missing work after vaccination. Participants were generally less hesitant toward obtaining a flu vaccine. The most common reasons reported for flu vaccine hesitance were that respondents do not believe the vaccine is necessary, fear of potential side effects (missing work from feeling sick). Among all flu messaging samples shared, vaccine safety, and COVID-19 and flu vaccine co-messaging were most popular. A focus group with Hispanic young adults is currently being planned.

1. In January no new influential messengers in the faith community were trained by SNHD staff and contractors. To date, 137 influential messengers have been trained.
2. Staff and contractors participated in 1 community event to distribute information and promote vaccination in January. 47 events have occurred to date serving 6,436 people.
3. Seven pop up vaccine clinics were offered in REACH priority zip codes during January vaccinating 401 people for COVID-19 and 227 people for flu. A total of 4,292 individuals have been vaccinated to date through these efforts.
4. A targeted media campaign to promote flu vaccination among priority populations continued to air in January. The campaign resulted in over two million ad impressions this month.

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

COMMUNITY HEALTH – OEMSTS - Fiscal Year Data

February EMS Statistics	Feb. 2021	Feb. 2022	
Total Certificates Issued	51	71	↑
New Licenses Issued	45	42	↓
Renewal Licenses Issued (recert only)	0	3	↑
Driver Only	14	16	↑
Active Certifications: EMT	870	839	↓
Active Certifications: Advanced EMT	1761	1641	↓
Active Certifications: Paramedic	1884	1904	↑
Active Certifications: RN	63	58	↓

III. OFFICE OF PUBLIC HEALTH PREPAREDNESS (OPHP)

A. Planning and Preparedness

1. OPHP staff continue to assist the District and the community in responding to the COVID-19 pandemic. Many staff remain in SNHD ICS functions, as well as County MACC/MSST positions.
2. Staff continue to host and attend community meetings virtually with community and hospital partners.
3. Staff are working with internal staff who have been responding to the COVID response as well as external partners to develop an interim action report for SNHD and the region.
4. OPHP Manager, Supervisor, and Planner I/II attended 2022 Nevada Emergency Preparedness Association Summit from February 23-25 at M Resort. Topics included weapons of mass destruction, continuity of operations, planning with schools, and COVID activities with hospital coalitions.

5. OPHP staff assisted with receipt of home testing kits to provide to community-based organizations serving at-risk populations.
6. OPHP staff assisted with distribution of masks to SNHD staff as part of the HRSA Health Center COVID-19 N95 mask program.

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. 26 fit tests completed.
3. Planner I/II attended Continuity of Operations Training at Clark County Fire Station on February 22, 2022.

C. Hospital Preparedness Program (HPP)

1. 01 FEB – HPP participated in the State of Nevada Microplanning session for Southern Nevada.
2. 02 FEB – HPP Liaison, as the Deputy Planning Section Chief participated in the Southern Nevada Health District Incident Command System Planning meeting looking at the next operational period's needs.
3. 03 FEB – HPP Liaison, as Chair, Southern Nevada Healthcare Preparedness Coalition hosted the SNHPC Monthly meeting, developed the agenda, and built the presentation for the coalition members. Information updates included the monthly All-Hospital Radio Test for the Month of January 2022, upcoming planning meetings, upcoming training, and upcoming exercises. Also, the SNHPC offers community partners/HCC members to update the members on ongoing operations in their jurisdictions. Also, HPP Liaison met with Silver State Pediatric Skilled Nursing Facility to extend technical assistance for their emergency operations plan planning and membership to the Southern Nevada Healthcare Preparedness Coalition.
4. 07 FEB – HPP Liaison, as the Deputy Planning Section Chief participated in the Southern Nevada Health District Incident Command System Command & Staff meeting looking at the next operational period's needs.
5. 09 FEB – HPP Liaison, as the Deputy Planning Section Chief participated in the Southern Nevada Health District Incident Command System Planning meeting looking at the next operational period's needs.
6. 10 FEB – HPP participated in the University Medical Center of Southern Nevada's Emergency Management Committee Meeting. Updates provided included date and time of the March 2022 Southern Nevada Healthcare Preparedness Coalition meeting, date and time for the Radiation Response Table-top Exercise, Highly Infectious Disease Table-top Exercise, and Call Down Drills. Finally, HPP addressed the Pediatric Training Class in April 2022 reminding participants that without a minimum of thirty (30) participants, the class will be canceled.
7. 11 FEB – HPP Liaison participated in the Support to Local Health Authorities hosted by the State of Nevada.
8. 14 FEB – HPP Liaison, as the Deputy Planning Section Chief participated in the Southern Nevada Health District Incident Command System Command & Staff meeting looking at the next operational period's needs.

Also, OPHP participated with Information Technology to discuss IT survey outcomes and how IT can better support the team in OPHP.

9. 15 FEB – HPP participated in the State of Nevada Microplanning session for Southern Nevada.
10. 16 FEB – HPP hosted the Radiation Response Table-Top Exercise for the Southern Nevada Healthcare Preparedness Coalition. The focus was to validate/identify the SNHPC Radiation Response Annex to the SNHPC Response Plan. Members of the coalition participated in the exercise. Also, HPP Liaison, as the Deputy Planning Section Chief participated in the Southern Nevada Health District Incident Command System Planning meeting looking at the next operational period's needs.
11. 22 FEB – HPP participated in the State of Nevada Microplanning session for Southern Nevada. HPP Liaison, as the Deputy Planning Section Chief participated in the Southern Nevada Health District Incident Command System Command & Staff meeting looking at the next operational period's needs.
12. 23 FEB – HPP Liaison participated in the ASPR Medical Surge Response Exercise webinar discussing the surge estimator, documents, and calculations required to complete the MRSE. Also, Also, HPP Liaison, as the Deputy Planning Section Chief participated in the Southern Nevada Health District Incident Command System Planning meeting looking at the next operational period's needs.
13. 24 FEB – HPP Liaison attended two webinars titled: COVID-19 AAR Webinar & Closing the COVID-19 Test to Treatment Gap. Each webinar focused on different aspects of COVID-19 with varied viewpoints on each topic with multiple subject matter experts presenting research.
14. 28 FEB – HPP Liaison, as the Deputy Planning Section Chief, participated in the Southern Nevada Health District Incident Command System Command & Staff meeting looking at the next operational period's needs.

D. Grants and Administration

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

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.

In January, medical and non-medical volunteers were deployed to support hospital operations at three area hospitals during the Omicron surge. Medical and non-medical volunteers continue to support the COVID-19 vaccination site at SNHD South Clinic (formerly the site of the non-congregate shelter) as medics and support personnel. Volunteers assisted at the SNPHL with test kit assembly and specimen accessioning. Total "accepted" volunteers stand at about 570. MRC Coordinator recruited, vetted, assigned, deployed, and deactivated volunteers to all sites. MRC Coordinator continues to recruit and deactivate 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 the third quarter of this fiscal year.

MRC Volunteer Hours FY2022 Q3 COVID-19 Response and Non-Emergency
 (Economic impact rates updated July 2021)

Activity	January	February	March
SNHD COVID CLINIC	22.75		
SNPHL	2.25		
Hospital Support	101.75		
Total Hours	126.75		
Economic impact	\$4,927.96		

IV. VITAL RECORDS

A. Vital Statistics

February 2022 showed an 11% increase in birth certificate sales in comparison to February 2021. Death certificate sales showed a 6.9% increase for the same time frame. SNHD received revenues of \$37,232 for birth registrations, \$31,980 for death registrations; and an additional \$9,115 in miscellaneous fees.

COMMUNITY HEALTH Vital Statistics Program – Fiscal Year Data

Vital Statistics Services	Feb 2021	Feb 2022		FY 20-21 (Feb)	FY 21-22 (Feb)	
Births Registered	1,908	2,048	↑	16,831	17,613	↑
Deaths Registered	2,247	2,376	↑	16,473	17,002	↑
Fetal Deaths Registered	19	11	↓	118	132	↑

COMMUNITY HEALTH Vital Statistics Program – Fiscal Year Data

Vital Statistics Services	Feb 2021	Feb 2022		FY 20-21 (Feb)	FY 21-22 (Feb)	
Birth Certificates Sold (walk-in)	1	1		40	241	↑
Birth Certificates Mail	99	125	↑	774	823	↑
Birth Certificates Online Orders	3,242	3,630	↑	25,997	29,933	↑
Birth Certificates Billed	121	88	↓	791	759	↓
Birth Certificates Number of Total Sales	3,463	3,844	↑	27,602	31,756	↑
Death Certificates Sold (walk-in)	1	28	↑	36	220	↑
Death Certificates Mail	103	187	↑	814	1,018	↑
Death Certificates Online Orders	10,618	11,225	↑	74,308	79,522	↑
Death Certificates Billed	35	59	↑	356	446	↑
Death Certificates Number of Total Sales	10,757	11,499	↑	75,514	81,206	↑

COMMUNITY HEALTH Vital Statistics Program - Fiscal Year Data

Vital Statistics Sales by Source	Feb 2021	Feb 2022		FY 20-21 (Feb)	FY 21-22 (Feb)	
Birth Certificates Sold Valley View (walk-in)				.1%	.8%	↑
Birth Certificates Mail	2.9%	3.3%	↑	2.8%	2.6%	↓
Birth Certificates Online Orders	93.6%	94.4%	↑	94.2%	94.3%	↑
Birth Certificates Billed	3.5%	2.3%	↓	2.9%	2.4%	↓
Death Certificates Sold Valley View (walk-in)		.2%	↑		.3%	↑
Death Certificates Mail	1%	1.6%	↑	.1%	1.3%	↑
Death Certificates Online Orders	98.7%	97.6%	↓	98.4%	97.9%	↓
Death Certificates Billed	.3%	.5%	↑	.5%	.5%	

COMMUNITY HEALTH Vital Statistics Program – Fiscal Year Data

Revenue	Feb 2021	Feb 2022		FY 20-21 (Feb)	FY 21-22 (Feb)	
Birth Certificates (\$25)	\$86,575	\$96,100	↑	\$690,050	\$793,900	↑
Death Certificates (\$25)	\$268,925	\$287,475	↑	\$1,887,850	\$2,030,150	↑
Births Registrations (\$13)	\$35,646	\$37,232	↑	\$277,368	\$299,858	↑
Deaths Registrations (\$13)	\$30,225	\$31,980	↑	\$220,209	\$229,203	↑
Convenience Fee (\$2)	\$7,102	\$8,018	↑	\$55,582	\$63,942	↑
Miscellaneous Admin	\$737	\$1,097	↑	\$4,883	\$6,556	↑
Total Vital Records Revenue	\$429,210	\$461,902	↑	\$3,135,942	\$3,423,609	↑

COMMUNITY HEALTH Passport Program – Fiscal Year Data

B. Passport Services

Due to pandemic Passport Services moved to appointment only. Passport photos remain suspended. Passport services is showing 146% increase from this time last year.

Revenue	Feb 2021	Feb 2022		FY 20-21 (Feb)	FY 21-22 (Feb)	
Passport Execution/Acceptance fee (\$35)	\$11,060	\$24,045	↑	\$69,650	\$168,630	↑
Passport Photo Fee (\$12)						
Total Passport Program Revenue	\$11,060	\$24,045	↑	\$69,650	\$168,630	↑

V. HEALTH CARDS

A. Food Handling

1. Appointments
 - a. Currently booked through mid-May with available timeslots through May 31, 2022.
 - b. Deadline extended to June 30, 2022 for clients to obtain their Health Cards. No further extensions past the end of June.
 - c. Meeting with MGM properties to work out logistics of doing Health Cards at their site.
 - i. Aria would be the ideal location for the MGM group.
 - ii. Looking at the end of May 2022, several dates/sessions.
 - iii. Anticipate up to 4,000 MGM employees to be processed.
2. Other Items

East Las Vegas – per Sean, estimated completion of new location is end of May/early June.

SERVICES

	Feb 1 - 28	Jan 1 - 31	Dec 1 - 31	Nov 1 - 30	Oct 1 - 31
Food Handler Cards - New	997	1,034	944	1,088	1,294
Food Handler Cards - Renewals	3,079	3,160	2,848	3,350	3,788
Duplicates	133	134	144	167	164
CFSM (Manager) Cards	145	134	106	129	147
Re-Tests	491	525	408	473	537
Body Art Cards	159	161	132	146	145
TOTALS	5,004	5,148	4,582	5,353	6,075

REVENUE - Point of Sale

	Feb 1 - 28	Jan 1 - 31	Dec 1 - 31	Nov 1 - 30	Oct 1 - 31
Food Handler Cards - New	\$19,940.00	\$20,680.00	\$18,880.00	\$21,760.00	\$25,880.00
Food Handler Cards - Renewals	\$61,580.00	\$63,200.00	\$56,960.00	\$67,000.00	\$75,760.00
Duplicates	\$2,660.00	\$2,680.00	\$2,880.00	\$3,340.00	\$3,280.00
CFSM (Manager) Cards	\$2,900.00	\$2,680.00	\$2,120.00	\$2,580.00	\$2,940.00
Re-Tests	\$2,455.00	\$2,625.00	\$2,040.00	\$2,365.00	\$2,685.00
Body Art Cards	\$3,180.00	\$3,220.00	\$2,640.00	\$2,920.00	\$2,900.00
Late Fee	N/A	N/A	N/A	N/A	N/A
TOTALS	\$92,715.00	\$95,085.00	\$85,520.00	\$99,965.00	\$113,445.00

B. COVID-19 Activities

Continued oversight of door screener.

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 continues to collaborate with SNHD programs and grant subrecipients to plan and coordinate COVID-19 community strategies and events.
- 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	61	74
NAAT NG/CT	1027	1036
Syphilis	743	660
RPR/RPR Titers	132/79	93/94
Hepatitis Total	388	399
HIV/differentiated	407/8	387/8
HIV RNA	36	32

B. COVID-19 Testing

- 1. SARS-CoV-2 PCR extraction is currently performed on the KingFisher Flex platform only.
- 2. SNPHL goal is to maintain capacity of 1500-2000 tests/day with turn-around-time of <48 hours (TAT 2Day - currently at/near goal).
- 3. For February, the average daily testing was 501 and the average turnaround time was 26 hours days for PCR testing from the collection date to release the test report. The average laboratory total test capacity for SARS-CoV-2 using Panther Aptima NAAT testing is 136 tests per day.

		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
	Salmonella Serotype	8	10										
Shigella	Shigella Screen	6	1										
	Shigella Serotype	5	1										
SEC	STEC Screen	7	10										
	STEC Serotype	2	10										
Unknown	Stool Culture	0	1										
Vibrio	Vibrio ID	0	0										
	Vibrio Screen	0	0										
Yersinia	Yersinia Culture/ID	0	0										

D. Epidemiological Testing and Consultation

1. SNPHL participates in the SNHD Outbreak Investigation Committee and Foodborne Illness Taskforce. Conducted 6 outbreak investigations in February.
2. SNPHL continues to report results of influenza testing to the CDC National Respiratory and Enteric Virus Surveillance System (NREVSS). SNPHL performed January, 69 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; 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 the identification of potential biological weapons/agents on environmental daily samples within its unique BSL3 environment.

2021	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec
Select Agent Rule out (total PCR)	0											

3. NPHL is clinically validated for using Whole Genome Sequencing (WGS) for the identification of Campylobacter species (select species), pathogenic Escherichia coli, and Salmonella species. SNPHL is also validated for the determination of Salmonella serotypes and STEC (Shiga toxin-producing E. coli) serotypes and Shiga toxin genes.
4. SNPHL performed 16 Whole Genome Sequencing tests (WGS) as part of PulseNet Foodborne Outbreak Surveillance in February 2022.
5. SNPHL has completed validation for all bacterial groups on the Bruker MALDI-TOF instrument for streamlined screening of bacterial isolates, to decrease turnaround time and modernize microbiological identification methods.
6. SNPHL is validated for sequencing of SARS-CoV-2 and variants of concern through the identification of lineages and clades.
7. SNPHL has sustained capacity of sequencing many 48 SARS-CoV-2-positive RNA extracts per week with expectations of increasing this capacity with appropriate staffing, instrumentation, and method development. As of February 2022, SNPHL has sequenced 192 SARS-CoV-2-positive RNA extracts. The new Laboratory Technologist and Laboratory Assistant have completed their training and have been aiding in SARS-CoV-2 sequencing.
8. SNPHL is clinically validated for the identification of Campylobacter species (select species), pathogenic Escherichia coli, and Salmonella species. SNPHL is also validated for the determination of Salmonella serotypes and STEC (Shiga toxin-producing E. coli) serotypes and Shiga toxin genes.
9. SNPHL coordinates and participates with Environmental Health and Veritas Labs for Legionella surveillance.

2021	Jan	Feb	Mar	April	May	June	July	Aug	Sep	Oct	Nov	Dec
Legionella	0	0										

10. 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.
11. As part of the Gonococcal Isolation Surveillance Program (GISP) and enhanced GISP (eGISP), in February, a total of 61 clinical isolates, Neisseria gonorrhoeae (61 isolates) and Neisseria meningitidis (0 isolates), were collected and will be sent to either the regional laboratory for antimicrobial susceptibility testing (AST) or the CDC, respectively. Remnant NAATs or N. gonorrhoeae samples will be sent to the CDC for molecular-based AST testing as part of eGISP Part B.

F. All-Hazards Preparedness

1. SNPHL provides / assists testing for SNHD COVID-19 Emergency Incident Response, local community outreach, CCDCC 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 the chain of custody procedures.

G. February 2022 SNPHL Activity Highlights

1. SNPHL has a stable FEMA supply of Viral Transport Medium (VTM) used in COVID-19 collection kits.
2. The facility team plans to move the middle week of March and start construction Mid-March. The proposed warehouse also has a back lot that will allow us to move the mobile clinics and trailers. Our laboratory has packed and classified the items that will move to the warehouse.
3. The NextSeq 2000 whole genome sequencer has been used in SARS-CoV-2 sequencing in the Micro laboratory. The WGS capacity of SARS-CoV-2 is 192 samples per week. The laboratory is in the process to purchase one liquid handler to handle the COVID-19 samples and reduce human error.
4. We received several Qiagen reagents, computers, and kits. We are in the process to apply the new capital asset forms and give the computer to IT to check the network connection. The digital PCR and EZ-1 advance XL instruments have also delivered to the lab three weeks ago. Those instruments will be working on the COVID-19 wastewater project with Dr. Oh in UNLV.
5. Our laboratory received the APHL QI grant for improving sample submission error rates for COVID-19 samples. We have formally signed the APHL QI agreement and started to prepare the deliverable item of this project this month. That is the training slides and video for the providers who use our RSO system to submit the specimens.
6. Our laboratory identified the first Omicron variant BA.2 sublineage on Thursday, January 24, 2022, for Clark County and State. Our laboratory has informed CDC and submitted the original VTM tube to CDC on Monday, January 31, 2022. Our laboratory will keep sequencing the closed contact samples to help ODS to follow up the investigation. Currently, the sublineage BA.1.1 is more dominant than BA.1 in Clark County.

H. COMMUNITY HEALTH – SNP HL – Calendar Year Data

SNPHL Services	YTD- February 2021	February 2022	
Clinical Testing Services ¹	2373	3,601	↑
Epidemiology Services ²	171	541	↑
State Branch Public Health Laboratory Services ³	10477	11296	↑
All-Hazards Preparedness Services ⁴	9	9	
Environmental Health Services ⁵	0	0	

- 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, training, presentations and inspections, samples submitted to CDC or other laboratories' submissions.
- ⁴ Includes Preparedness training, teleconferences, Inspections.
- ⁵ Includes vector testing.