

# Memorandum

**Date:** July 24, 2025

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

From: Xavier Gonzales, PhD, Community Health Director

Cassius Lockett, PhD, District Health Officer

**Subject:** Community Health Division Monthly Activity Report – June 2025

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

## A. Chronic Disease Prevention Program (CDPP)

CDPP partnered with the YMCA to offer a free, community Blood Pressure Self-Monitoring Class. The 12-week class wrapped up in May with eleven (11) of sixteen (16) participants completing the program. 50% of the participants decreased their blood pressure from an elevated or higher level to normal or a lower stage.

During May, CDPP staff **provided four (4) Diabetes Self-Management, Education & Support classes**. Two (2) of the classes were provided on-site at SNHD, and two (2) classes were offered at community sites including low-income senior housing properties. A total of <u>55 people participated</u> in a DSMES class in May and <u>76% of participants</u> completed the course. The DSMES class press release <u>generated an earned media story on Channel 8</u> in which our Senior Health Educator and class facilitator were interviewed along with three (3) DSMES class participants. CDPP staff were presenters on a **Project ECHO** webinar and shared data on our <u>physical activity quality improvement measure for the ADA Recognition Program to 21 participants.</u>

CDPP staff and BeSHOP partners hosted **Salon Talk: Don't Put Your Health on Pause** on May 18<sup>th</sup> during National Women's Health Week at Ego Tripp Salon. Councilwoman Summers Armstrong and Senator Dina Neal both participated. Other panelists spoke on topics including perimenopause, menopause, mental health and their impact on cardiovascular health. Over <u>40 people attended</u> the event. CDPP staff provided on-site BP screening. <u>Eight (8) people were screened</u> during the event and received education and referrals as appropriate.

CDPP staff in partnership with Mountain Top Faith Ministries conducted a 6-week **With Every Heartbeat is Life (WEHIL)** cardiovascular education class for fifteen (15) people. Of the fifteen (15) registered, twelve (12) completed the class. The average blood pressure reading <u>dropped</u> <u>from 138/81 mmHG to 123/81 mmHG</u> from pre-to-post <u>and nine (9) of the twelve (12) class</u> participants lowered their blood pressure to a normal stage.

Our CDPP team partnered with CCSD Safe Routes to School Program to increase the number of schools who reach Achievement Level Program (ALP) status. At the end of the 2024-2025 school year, <u>53 schools received ALP recognition status surpassing the goal of 48 schools</u>. This included eleven (11) schools who met the Platinum level (highest level), seven (7) schools who met the Gold level, ten (10) schools who met the Silver level, and 25 schools who met the Bronze level.

The 2025 Move Your Way Summer Initiative kicked off in May. The initiative promotes physical activity over the hot summer months by providing free access to local pools and supporting aquatic activities for youth. A sister initiative in the Hispanic community provides educational materials and resources at community events. Two (2) Move Your Way Summer events were held in May at local pools reaching over 1,000 people. Three (3) community outreach events in the Hispanic community were held reaching over 700 people. The initiative will continue until early September.

CDPP staff provided an overview of the <u>5210 initiative</u> and available educational materials to **27 SNHD FQHC healthcare providers** in May.

## B. Tobacco Control Program (TCP) Update

In May, staff worked alongside NTCSC to distribute and create tobacco educational postcards for the 2025 Legislative Session. Additionally, staff helped to create policy fact sheets focused on tobacco registries and quit lines.

The TCP staff implemented the fourth annual **No Menthol May** initiative. This program raises awareness about the dangers of menthol tobacco and vaping, highlights the impact of targeted menthol marketing, and connects communities to cessation resources. The campaign includes an educational toolkit featuring print materials, social media content, videos, and multiple events held in priority population communities. Originally hosted exclusively by local faith-based organizations, the 2025 campaign expanded to include local community organizations and Black-owned businesses that serve the priority population. In total, **82 events were held this year** to promote No Menthol May, including:

- Historic Westside Drive-In Movie on May 2<sup>nd</sup>
- Jazz in the Park concert series on May 10<sup>th</sup>, 17<sup>th</sup>, 23<sup>rd</sup>, and 31<sup>st</sup>
- Coffee and Conversations on May 8<sup>th</sup> and May 22<sup>nd</sup>
- Run-It-Back Game Night on May 24<sup>th</sup>

 Faith-Based No Menthol May on May 4<sup>th</sup>, May 11<sup>th</sup>, May 18<sup>th</sup>, May 25<sup>th</sup> in fourteen (14) churches.

Staff collaborated with community organizations, including the Mexican Patriotic Committee and Latinas in Power, to promote the tobacco-free initiative Por Mi, Por Ti, Por Nosotros at culturally significant events like the Cinco de Mayo Celebration at Paradise Water Park and the Mother's Day Brunch. These efforts included bilingual signage and announcements, reinforcing a commitment to healthier lifestyles and tobacco-free spaces. Additionally, through the African American focused Because We Matter program staff engaged priority populations through various local events, raising awareness about tobacco-related issues and cessation resources. Collectively, these initiatives reached over 10,500 people in person and more than 20,500 virtually, fostering community-wide conversations about tobacco-free living.

In May, seven (7) businesses including several banks and eating establishments expanded their tobacco policy to limit smoking near entrances and exits to businesses.

## 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.

The Committee continued its review of the SNHD Paramedic Mentorship/Internship Program.

#### 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 Committee continued its review of protocols related to Childbirth/Obstetric Emergencies, Pediatric Pain Management, and Electrical Therapy protocols. They approved the recommendation to allow AEMTs and Paramedics to continue the administration if IV antibiotics during interfacility transports.

#### 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 (1) medical director of each firefighting/franchised agency; 2) One (1) 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 heard reports from the Education and DDP committees.

## D. <u>OEMSTS – June 2024 / 2025 Data</u>

	June	June		Mo. Fiscal Average
June EMS Statistics	2024	2025		2024-2025
Total certificates issued	139	118	$\downarrow$	318
New licenses issued	122	114	$\downarrow$	85
Renewal licenses issued (recert only)	1	0	$\downarrow$	228
Driver Only	45	57	<b>1</b>	53
Active Certifications: EMT	946	951	<b>1</b>	897
Active Certifications: Advanced EMT	1898	1898	=	1891
Active Certifications: Paramedic	2091	2210	<b>↑</b>	2134
Active Certifications: RN	70	84	<b>↑</b>	73

# III. OFFICE OF PUBLIC HEALTH PREPAREDNESS (OPHP)

# A. Planning and Preparedness

- Staff continued collaboration with Clark County an Impacted Persons Database.
   Currently working with community partners such as Las Vegas Resiliency Center for
   extension of services and other limited uses of the minimal necessary patient
   information for response and recovery operations. SNHD and community partners from
   Clark County Office of Emergency Management were able to successfully get AB50
   through the Nevada Legislative session.
- 2. OPHP continued to review and revise emergency operation plans, threat response guides, and test these plans through internal and external training and exercises.
- 3. The Planners continue to review and revise the CHEMPACK, Nuclear and Radiation, Administrative Preparedness, Mass Care Support, and Highly Infectious Disease plans.
- 4. Planners continue to update the Nevada Continuity tool to streamline the process of generating a usable Continuity of Operations Plan (COOP). Planner has created a working group to complete the COOP process.
- 5. Our Planners have compiled departmental COOPs to create agency COOP and have submitted them to the program Supervisor.
- 6. OPHP Planners are holding a meeting with COOP planning team to discuss future expectations.

- 7. Fifteen SNHD employees were FIT tested for personal protective equipment during the month of June.
- 8. Planners perpetuated revision of SNHD Basic EOP and Direction and Control Annexes.
- 9. OPHP's Senior Planner is working on revising the BioWatch Plan.
- 10. Senior Planner met with representatives from the Closed POD Working group to discuss the direction of the working group and a revamp of the working group materials. Material review is underway.
- 11. Staff continue to participate in NACCHO's Virtual Leaning Collaborative for the Inclusion of MCH Populations in Emergency Preparedness and Response.
- 12. Senior Planner participated in Resources & Supply Chain Work Group and the Health Equity Work Group. Staff also participated in several other working groups that resulted from the State of Nevada Division of Public and Behavioral Health Public Health Preparedness Strategic Plan.
- 13. The PHP Planner held a Biological Incident Tabletop Exercise on June 23<sup>rd</sup> at the Rainbow Library.
- 14. OPHP planners are developing a Recovery Annex based on lessons learned from real world events and exercises.
- 15. The Clinical Advisor and OPHP management attended the monthly Local Emergency Planning Committee (LEPC) at Station 18.
- 16. Our Planner is coordinating with Catholic Charities to provide presentation of Extreme Heat Preparedness to members.

# B. Training, Exercises and Public Health Workforce Development:

- 1. OPHP Trainers continue to provide ICS Position Specific training to fifteen (15) preassigned SNHD Emergency Personnel.
- 2. The Senior Planner, Clinical Advisor attended AWR-140 Radiological/Nuclear WMD Operations Course.
- 3. OPHP staff participated in TB TTX on June 17<sup>th</sup>OPHP.
- 4. The OPHP staff participated in Biological TTX on June 23<sup>rd</sup>.
- 5. Our OPHP team continues to support the City of Las Vegas ICS 300/400 training schedule.
- 6. CPR training was provided to eleven (11) SNHD staff & MRC volunteers on June 11<sup>th</sup> 12<sup>th</sup>.
- 7. Two (2) SNHD staff were certified as CPR instructors and will support future courses offered at SNHD.
- 8. The New Hire Orientation was not provided in June. The next orientation is July 16<sup>th</sup>.
- 9. Planners have developed the After-Action Report for Excessive Heat Seminar and held AAR meeting.
- 10. OPHP Trainers provided an Introduction to Radiological/Nuclear WMP Operations (AWR-140) course at SNHD on June 16<sup>th</sup>, to 35 SNHD staff.
- 11. Senior Planners participate in SNHD's Website Committee.

- 12. Our staff presented at the Resort Emergency Management Working group.
- 13. Senior Planner and Supervisor attended a meeting at USPS to discuss site specific emergency management response protocols relating to the (BDS) Biohazard Detection System.
- 14. OPHP Planners signed up for the COOP Course that will be held in September.

## C. Southern Nevada Healthcare Preparedness Coalition (SNHPC)

- 1. The SNHPC meeting was held June 5<sup>th</sup> at 280 S. Decatur office.
- 2. Senior Planner and Clinical Advisor participate in NDMS/FCC FSE Initial Planning Meeting.
- 3. Trainers and Clinical Advisor continue updating the First Receiver Decontamination Training Program and plan for relaunch in Fall/Winter 2025.
- Ongoing planning for Pediatric Disaster Response and Emergency Management and Medical Management of Chemical, Biological, Nuclear and Explosive (CBRNE) Events courses in 2026.
- 5. OPHP Trainers continue to manage the upcoming TEEX Personal Protective Measure for Biological Events PER-320 course on September 30<sup>th</sup>.
- 6. Cybersecurity education by Cybersecurity & Infrastructure Security Agency (CISA) presentation is confirmed for October SNHPC meeting.
- 7. Planners attended the UMC Emergency Preparedness Meetings.
- 8. Planners continue efforts for the SNHPC August workshop.
- 9. A Senior Planner and Clinical Advisor conducted initial coordination for Hospital Area Command Full Scale Exercises to be held in October.

#### C. Fusion Center Public Health Analyst:

- 1. Disseminating public health information between SNHD and the Southern Nevada Counter Terrorism Center (SNCTC).
- 2. Providing public health input for threat assessments on special event assessment rating (SEAR) 2, 3, and 4 events, such as 4<sup>th</sup> of July celebrations.
- 3. Participating in weekly counter terrorism analytic group (CTAG) meetings.
- 4. Attended Department of Homeland Security training for Analysts.
- 5. Developing appropriate connections to increase communication between SNHD, SNCTC and its partner organizations.
- 6. Collaborating with five (5) surrounding fusion centers on areas of public health concern. Produce and distribute monthly joint public health bulletins.
- 7. Monitored and advised select Fusion Center contacts of potential medical event of concern.

#### D. Grants and Administration:

- 1. OPHP continues to monitor and review grant spending for year-end closeout.
- 2. Our manager continues to plan for FY2026 First budget augmentation considering projected special revenue fund budget allocations.

- 3. OPHP staff continue to complete budget and scope of work plan activities for SNHD finance and coordination of quarterly progress reports for state.
- 4. The OPHP Manager continues to represent Community Health Division management on various SNHD working group committees.
- 5. Our staff updated the State on Preparedness Planning, Operations, Exercises, Training and Evaluation (POETE) working group.

## E. <u>Medical Reserve Corps (MRC) of Southern Nevada:</u>

- 1. The MRC Coordinator attended NACCHO PPAG meeting, MRC national program meetings, SNHPC meeting, planned training and activities for upcoming months, sent out newsletters, and continued to recruit and deactivate volunteers. We have purged inactive volunteers from our roster, which now totals 240.
- 2. MRC Coordinator attended American Red Cross Shelter Fundamentals Overview class.
- 3. Our MRC Coordinator attended Introduction to Radiological/Nuclear WMD training.
- 4. On June 18<sup>th</sup>, 24 volunteers attended an MRC quarterly meeting, training on personal and family preparedness.

#### MRC Volunteer Hours FY2025 Q4

(Economic impact rates updated April 2025):

Activity	April	May	June
Training	11		48
<b>Community Event</b>	22	15	
SNHD Clinic			
Total Hours	33	15	48
Economic impact	\$1,361.91	\$628.77	\$2,221.92

## IV. VITAL RECORDS

**A.** June is currently showing a **26% increase in birth certificate** sales in comparison to June 2024. **Death certificate** sales currently showing a **0% increase** in comparison to June 2024. SNHD received revenues of \$ 35,854 for birth registrations, \$22,022 for death registrations; and an additional \$8,878 in miscellaneous fees.

## **COMMUNITY HEALTH Vital Statistics Program Birth/Deaths Registered – Fiscal Year Data**

	June	June		FY 23-24	FY 24-25	
Vital Statistics Services	2024	2025		(June)	(June)	
Births Registered	2,041	1,823	+	23,745	24,595	<b>1</b>
Deaths Registered	1,637	1,760	<b>1</b>	21,158	21,866	<b>1</b>
Fetal Deaths Registered	13	19	<b>↑</b>	197	198	<b>1</b>

COMMUNITY HEALTH Vital Statistics Program Birth/Deaths Certificates – Fiscal Year Data									
Vital Statistics Services	June 2024	June 2025		FY 23-24 (June)	FY 24-25 (June)				
Birth Certificates Sold (walk-in)	17	1	<b>+</b>	557	67	<b>\</b>			
Birth Certificates Mail	106	139	<b>↑</b>	1,511	1,481	<b>4</b>			
Birth Certificates Online Orders	3,283	4,113	<b>1</b>	42,265	46,309	<b>1</b>			
Birth Certificates Billed	40	110	<b>1</b>	1,282	1,339	<b>1</b>			
Birth Certificates Number of Total Sales	3,446	4,363	<b>1</b>	45,615	49,196	<b>1</b>			
Death Certificates Sold (walk-in)	23	44	<b>1</b>	390	275	<b>4</b>			
Death Certificates Mail	200	175	<b>+</b>	1,892	1,986	<b>↑</b>			
Death Certificates Online Orders	7,403	7,393	<b>\</b>	91,673	94,866	<b>1</b>			
Death Certificates Billed	23	39	<b>↑</b>	440	501	<b>1</b>			
Death Certificates Number of Total Sales	7,649	7,650	<b>1</b>	94,395	97,628	<b>1</b>			

COMMUNITY HEALTH Vital Statistics Program Birth/Deaths Cert. Sales by Source – Fiscal Year Data										
Vital Statistics Sales by Source	June 2024	June 2025		FY 23-24 (June)	FY 24-25 (June)					
Birth Certificates Sold Valley View (walk-in)	.5%		<b>\</b>	1.2%	.1%	<b>+</b>				
Birth Certificates Mail	3.1%	3.2%	<b>↑</b>	3.3%	3%	<b>\</b>				
Birth Certificates Online Orders	95.3%	94.3%	<b>V</b>	92.7%	94.1%	<b>1</b>				
Birth Certificates Billed	1.2%	2.5%	<b>1</b>	2.8%	2.7%	<b>\</b>				
Death Certificates Sold Valley View (walk-in)	.3%	.6%	<b>1</b>	.4%	.3%	<b>←</b>				
Death Certificates Mail	2.6%	2.3%	<b>4</b>	2%	2%					
Death Certificates Online Orders	96.8%	96.6%	<b>\</b>	97.1%	97.2%	<b>↑</b>				
Death Certificates Billed	.3%	.5%	<b>1</b>	.5%	.5%					

COMMUNITY HEALTH Vital Statistics Program Birth/Deaths Certificates Sales – Fiscal Year Data									
Revenue	June 2024	June 2025		FY 23-24 (June)	FY 24-25 (June)				
Birth Certificates (\$25)	\$86,150	\$109,075	<b>1</b>	\$1,140,375	\$1,229,900	<b>↑</b>			
Death Certificates (\$25)	\$191,225	\$191,250	<b>↑</b>	\$2,359,875	\$2,440,700	<b>↑</b>			
Births Registrations (\$13)	\$28,782	\$35,854	<b>1</b>	\$395,005	\$417,040	<b>→</b>			
Deaths Registrations (\$13)	\$22,334	\$22,022	+	\$273,104	\$280,706	<b>→</b>			
Convenience Fee (\$2)	\$6,706	\$8,332	<b>1</b>	\$87,426	\$94,062	<b>→</b>			
Miscellaneous Admin	\$394	\$546	<b>1</b>	\$7,560	\$8,094	<b>↑</b>			
Total Vital Records Revenue	\$335,591	\$367,079	<b>1</b>	\$4,263,345	\$4,470,502	<b>→</b>			

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

**B.** PASSPORT SERVICES – Passport Services is appointment only.

	June	June		FY 23-24	FY 24-25	
Applications	2024	2025		(June)	(June)	
Passport Applications	567	732	<b>1</b>	7,877	8,707	<b>1</b>
	June	June		FY 23-24	FY 24-25	
Revenue	2024	2025		(June)	(June)	
Passport Execution/Acceptance fee (\$35)	\$19,845	\$25,620	<b>1</b>	\$275,695	\$304,745	个

## V. HEALTH EQUITY

- A. The Health Equity program works towards establishing community partnerships and collaborations to increase the capacity of communities to address health disparities.
  - 1. During the month of May, the Health Equity team implemented three (3) workshops with the staff of the Southern Nevada Health District. With the goal of maintaining the organizational capacity to address the needs of the community, the following workshop topics provided were, two (2) sessions of Intro to Health Equity, and one (1) session for Into to Implicit Bias.

# VI. SOUTHERN NEVADA PUBLIC HEALTH LABORATORY (SNPHL)

## A. Clinical Testing:

- 1. SNHD Nursing Division:
  - a. Molecular and microbiology culture.
  - b. Sexually Transmitted Disease (STD) testing.
- 2. SNHD STD Department:
  - Participates in the CDC Gonococcal Isolate Surveillance Project (GISP) and the enhanced Gonococcal Isolate Surveillance Project (eGISP).
  - b. SNPHL performs NAAT and culture testing of N. gonorrhoeae isolates and submits them to a reference laboratory for the determination of antibiotic susceptibility patterns.
  - c. SNPHL has joined eGISP Part B to expand culture-independent testing for antimicrobial resistance genes of gonococcal isolates.
- 3. The total monthly samples tested are listed in the table below:

Test Name	Monthly Count	Avg Year to Date
GC Cultures	33	37

NAAT NG/CT	1488	1527
Syphilis	603	817
RPR/RPR Titers	75/15	130/46
Hepatitis Total	2016	2428
HIV/differentiated	491/8	727/20
HIV RNA	100	117

# COVD testing:

- Performed SARS-CoV-2 PCR extraction on the KingFisher Flex platform exclusively.
- SNPHL maintains a capacity of 2000 tests/day with a turnaround-time of <48
  hours (current TAT two-day currently at / near goal).</li>
- For June, the average daily testing was nine (9) and the average turnaround time was 66 hours from collection date to release of the report.
- IT created easy patient accession and direct report verification from SNPHL LIMS into SNHD patient report portal.
- Incorporate high throughput instruments such as Eppendorf 5073 automation of specimen fluid handling station.
- Since the script problem of Tecan instrument cannot be resulted by manufacture, we asked SNHD Contracts and SNHD Purchasing to discuss with manufacture to return this instrument if it is feasible.

Monthly summary of COVD PCR/NAAT testing:

Month	# PCR & NAAT/#POS	Month	# PCR & NAAT/#POS
January	471/74	July	
February	656/55	August	
March	630/22	September	
April	195/22	October	
May	141/9	November	
June	190/43	December	

#### Reportable disease reports:

 SNPHL continues to perform routine testing of reportable disease specimens submitted by community stakeholders. Isolates tested 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:

		Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec	Total
Campylobacter	Campy ID	9	4	3	2	2	5							25
	Campy Screen	12	8	4	3	6	10							43
Neisseria species	Gonorrhoeae Culture	33	32	47	48	30	33							223
	Gram Stain/WBC	0	5	0	0	0	5							10
	Neisseria ID	2	0	0	0	0	0							2
	Haemophilus ID	0	0	0	0	1	0							1
Unknown ID	Bacterial ID	0	0	0	0	2	0							16
	WGS (PulseNet)	14	12	20	8	26	25							111
Salmonella	Salmonella Screen	3	6	14	13	11	10							57
	Salmonella Serotype	3	7	13	13	9	8							53
Shigella	Shigella Screen	2	5	3	6	4	0							20
	Shigella Serotype	2	4	3	0	1	1							11
STEC	STEC Screen	0	3	3	1	5	4							16
	STEC Serotype	0	0	1	0	1	1							3
Unknown	Stool Culture	1	5	1	4	5	5							21
Vibrio	Vibrio ID	0	0	0	1	0	3							4
	Vibrio Screen	1	0	0	3	0	5							9

## B. **Epidemiological Testing and Consultation:**

- 1. SNPHL participates in the SNHD Outbreak Investigation Committee and Foodborne Illness Taskforce. There were zero (0) samples for GI outbreak investigation in June.
- 2. SNPHL continues to report results of influenza testing to the CDC National Respiratory and Enteric Virus Surveillance System (NREVSS). In June, SNPHL performed zero (0) respiratory panels on the BioFire.

# C. Emergency response and reportable disease isolate testing report:

- 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 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.
- 3. SNPHL performed 25 Whole Genome Sequencing tests (WGS) as part of PulseNet Foodborne Outbreak Surveillance in June 2025.
- 4. SNPHL uses Bruker MALDI-TOF instrument for streamlined screening of bacterial isolates. A total # of 173 bacterial organisms have been identified in June.
- 5. SNPHL is validated for sequencing of SARS-CoV-2 and variants of concern through the identification of lineages and clades.
- 6. SNPHL has sustained capacity of sequencing many 96 SARS-CoV-2-positive RNA extracts per week with expectations of increasing this capacity with appropriate staffing, instrumentation, and method development. As of May 2025, SNPHL has sequenced 25 SARS-CoV-2-positive RNA extracts.
- 7. SNPHL coordinates and participates with Environmental Health and Veritas Labs for Legionella surveillance.

2025	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Legionella	3	22	0	26	62	45						

8. SNPHL provides vector testing for Environmental Services, Viral testing for Zika, West Nile, Western Equine Encephalitis, and Saint Louis encephalitis. Our facility hosted a CDC demonstration for the Vector team. In June, we tested a total of 987 mosquito pool samples. There were zero (0) positive WNV mosquito pool samples identified in May. Environmental Health released the test result to the public after we informed the test result to them.

- 9. As part of the Gonococcal Isolation Surveillance Program (GISP) and enhanced GISP (eGISP), in June, a total of 30 clinical isolates, Neisseria gonorrhoeae eleven (11) isolates and Neisseria meningitidis two (2) isolate, 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.
- 10. SNPHL performs C. auris PCR screening using Real-Time PCR platform. We performed a total of 1102 samples in June.

#### D. All-Hazards Preparedness:

- 1. The SNPHL provides/assists testing for SNHD COVD 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 COVD Biosafety Training/Guidelines to Non-Traditional testing sites.
- 3. Our 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.
- 5. Provided onsite training for COVD online ordering applications for long-term care facilities.
- 6. Supplied Biosafety Guidance to Sentinel Sites regarding Monkeypox.
- 7. Furnished Monkeypox and Bivalent COVD Booster vaccination to laboratory staff.
- 8. Perpetual Biosafety Training and guidance to SNPHL personnel.
- 9. The laboratory received double door autoclave and awaiting the local contractor to extend the dry wall and power connection before installation.

#### E. June 2025 SNPHL Activity Highlights:

- 1. SNPHL maintains a consistent supply of Viral Transport Medium (VTM) for COVID collection kits, even after the cessation of ELC COVID funding. The reagents for PCR and WGS are expected to be depleted by August 2025.
- 2. Proficiency tests of CAP BCPV-B Blood Cell Identification; FH9-BHematology Automated Diff Series; VM-BViral Markers; HC6-B Chlamydia/GC by NAA, and QF-A M.tuberculosis are 100% grade in June 2025.
- Phoenix controls completed the integrate system adjustment for the new sensors and dampler installed by SunBelt company and ATC for recalibrate the BSC and chemical hood on the second floor.
- 4. According to the WGS and genomic data analysis, the Omicron variant LP.B.1.1 lineages are domain lineages in June, from the samples received in the laboratory. Our laboratory will keep sequencing the closed contact samples to help ODS to follow up on the investigation.

- 5. New influenza surveillance season showed that A/H3 and A/H1, and B/Victoria are major subtypes of influenza.
- 6. SNPHL participates in the CDC Avian Flu surveillance project by sending the testing guidance and specimen collection procedure to the local hospitals through HAN system. Any ICU patient with influenza A positive must send the specimen to our laboratory to do influenza subtyping to rule out avian influenza. There was no suspect avian flu sample received in the lab in June.
- 7. The new design may focus on building BSL-3 and Micro lab in the 2<sup>nd</sup> floor and leaving semi shell for the 1<sup>st</sup> floor in the Phase I project.
- 8. A local contractor from CWF is set up to install a new double door autoclave for the BSL-3 laboratory. We are currently awaiting the final state inspection. At this moment, the new autoclave has successfully passed the chamber inspection; however, we are still pending the second inspection for the steam generator.
- 9. The new additional test items for clinical chemistry, hematology and urinalysis will be formally open on Tuesday, July 1<sup>st</sup>. The outreach email has sent to FQHC and DPP division.

#### F. COMMUNITY HEALTH – SNPHL – Calendar Year Data

June SNPHL Services 2024 2025

Clinical Testing Services <sup>1</sup>	4,909	5,501	1
Epidemiology Services <sup>2</sup> State Branch Public Health Laboratory Services <sup>3</sup>	419	324	$\rightarrow$
All-Hazards Preparedness Services <sup>4</sup>	0	0	
	3	4	<b>↑</b>
Environmental Health Services <sup>5</sup>	805	510	<b>↓</b>

<sup>&</sup>lt;sup>1</sup> Includes N. Gonorrhoeae culture, GISP isolates, Syphilis, HIV, CT/GC molecular, Gram stain testing, and COVD Ab immunologic tests.

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

<sup>&</sup>lt;sup>3</sup> Includes COVD 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.

<sup>&</sup>lt;sup>4</sup> Includes Preparedness training, teleconferences, and Inspections.

<sup>&</sup>lt;sup>5</sup> Includes vector testing.