



Memorandum

Date: February 22, 2024

To: Southern Nevada District Board of Health

From: Maria Azzarelli, Acting Director of Community Health *MA*
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Fermin Leguen, MD, MPH, District Health Officer *FL*

Subject: Community Health Division Monthly Activity Report – January 2024

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

A. Chronic Disease Prevention Program (CDPP)

The 2023 Pop-Up-Produce Stands ended with the December market. In total, the 2023 markets sold over \$4,500 worth of produce, and over 40% of all sales were SNAP sales. In 2024, we will be working with our partners to more than double the number of markets from six (6) to thirteen (13). We will start with a market in February and then go to a regular monthly schedule from April to June and September to November with two (2) markets each month.

In December, our website spotlights, social media, and blogs included a focus on healthy holidays with nutrition, physical activity, tobacco cessation, self-management, and stress management tips. Sliders, social media, and blog posts were provided in English and Spanish and linked people to available resources including programming resources on Get Healthy and Viva Saludable websites.

CDPP staff met with staff from the Southern Nevada Community Health Center (SNCHC) to receive and process BSHOP/BeSHOP client referrals. The SNCHC will join Nevada Health Centers as referral locations for BSHSOP/BeSHOP clients who don't have a Primary Care Provider and/or don't have health insurance or medical home and need follow-up care. The SNCHC will follow-up with clients to schedule an appointment, two (2) attempts via phone and/or text will be made to contact the client. The clinic will update OCDPHP on the status of the referral. The LOU is completed and on file.

To help expand the reach and availability of our Diabetes Self-Management Education and Support (DSMES) classes, CDPP supported training for three (3) new people [one (1) CHW, one (1) health educator and one (1) faith-based community partner] to be trained as a DSMES facilitator. Their training was completed in December.

CDPP continues to provide support for the CCSD Safe Routes to School (SRTS) Program. In December, a walk audit was completed at Booker Elementary School. In addition, SRTS also conducted one (1) assembly, one (1) bike rodeo, one (1) educational presentation, one (1) family engagement activity and distributed safety materials to 17 schools.

B. Tobacco Control Program (TCP)

Staff promoted the Because We Matter initiative to two (2) faith-based partners: Faith Foundation Ministries, and Tabernacle of Praise Church. Throughout the year, Because We Matter partnered with ten (10) different African American faith-based organizations on a 3-month educational and outreach series to educate youth and adults about flavored tobacco products, including menthol use; inform on policy change solutions; promote cessation resources; and raise awareness of associated harms to the health of the Black community. The December 2023 promotion reached over 200 individuals.

Staff participated in the 24th annual Christmas en el Barrio event on 12/23/23 hosted by the Mexican Patriotic Committee at Civica Nevada Career & Collegiate Academy in North Las Vegas. The event's mission was to provide toys, food and community resources to families in high need. Staff provided linguistically appropriate tobacco cessation resources and educational materials on the dangers of vaping products. Branded banners were placed throughout the event premises, including on stage. Consistent live announcements promoting Spanish-language cessation services were read from the main stage. The event had an estimated reach of over 2,000 attendees who were primarily Spanish speakers.

In December, 25 local high school sports teams partnered with SNHD's teen vaping prevention initiative, BreakDown. Teams shared tailored social media messages to promote vape-free lifestyles to student athletes. Additionally, information was shared through a social media promotion developed for the Nevada Interscholastic Activities Association. Influential youth from local high schools throughout Southern Nevada continued to share vaping prevention messaging on their social media accounts.

Staff assisted twenty-one local businesses in implementing new or expanding their existing smoke and vape-free policies in December 2023. The businesses include medical facilities, convenience stores, and food establishments.

Tobacco prevention staff were featured on the Healthier Tomorrow Radio Program focused on the African American community hosted on KCEP Power 88.1 FM, where they discussed smoking

and vaping health concerns, menthol flavoring, tobacco marketing, and staff promoted the brand, Nevada Tobacco Quitline cessation services, and the upcoming tobacco-free summit.

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

A. 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 reviewed the 3rd Quarter 2023 trauma transport data, election of new Chair & Vice Chair, and discussed tracking interfacility transfer times.

B. OEMSTS – January 2023 / 2024 Data

EMS Statistics	January 2023	January 2024	
Total certificates issued	86	116	↑
New licenses issued	53	69	↑
Renewal licenses issued (recert only)	6	16	↑
Driver Only	30	39	↑
Active Certifications: EMT	829	957	↑
Active Certifications: Advanced EMT	1636	1876	↑
Active Certifications: Paramedic	1919	2064	↑
Active Certifications: RN	65	73	↑

III. OFFICE OF PUBLIC HEALTH PREPAREDNESS (OPHP)

A. Planning and Preparedness

1. Continuance of drafting the Shelter Support Annex and Administrative Preparedness Annex.
2. Planners continue to review and revise the CHEMPACK, Nuclear and Radiation, Administrative Preparedness, Mass Care Support, and Highly Infectious Disease plans. Met with Human Resources to discuss staffing and activation triggers for preparedness annex.
3. Planner updates to Threat Response Guides for Anthrax, Plague, and Tularemia.

4. Reviewed and revisions of COVID AAR according to SWOT analysis and interviews completed by contractor and interns.
5. Planner sent invites to current and potential Closed POD partners to a Closed POD Seminar in February 2024.
6. Twenty SNHD employees were fit tested for personal protective equipment.
7. OPHP staff are participating in various working groups to develop the state DPBH Strategic Plan.
8. Senior PHP Planner reviewed and revised Annex T-K: Invasive Aedes Aegypti and Aedes Albopictus Mosquito-Borne Disease Response.

B. Training, Exercises and Public Health Workforce Development:

1. SNHPC Clinical Advisor and OPHP Planner reviewed and revised Pediatric Surge Annex SNHPC Plan.
2. OPHP Trainers continue to develop Position Specific Task Books and related training curricula. Incident Commander and Safety Officer Position Specific Training completed on January 30th for 15 SNHD staff.
3. Twelve SNHD employees attended the New Hire Orientation for Emergency Preparedness and Security.
4. OPHP Trainers are coordinating ICS 300 course offering at Decatur campus April 16th – 18th for recent SNHD staff identified on the Emergency Personnel List.
5. Six SNHD employees participated in CPR Training
6. Assist where needed in current ICS for TB outbreak.
7. Planning efforts are being coordinated for the upcoming recovery workshop.
8. Pediatric Surge Tabletop midterm planning meeting conducted on Jan 4th.
9. Pediatric Surge Tabletop final planning meeting scheduled for Feb 21st.
10. Perpetual planning for the Pediatric Surge Tabletop 1 scheduled for 3rd – 13th.
11. Consistent planning for the Pediatric Tabletop 2/MRSE scheduled for 4th – 18th.
12. SNHPC Clinical Advisor and OPHP Trainer provided ICS 300 training to community partners at LVMPD.
13. OPHP Planner participated in the FEMA Exercise Design and Development Training.
14. OPHP Planner participated in FEMA Planning Section Chief training.
15. OPHP staff attended the TEEX EOC course for training on roles within the Clark County MACC.
16. OPHP staff will attend the Nevada Preparedness Summit Feb 28th – 29th. The PHP Supervisor is speaking on the county-wide Impacted Persons Database that is being developed as a corrective action from the October 1, 2017 shooting.

C. Southern Nevada Healthcare Preparedness Coalition (SNHPC)

1. The SNHPC bimonthly meeting was held January 4th.
2. The SNHPC Clinical Advisor and Readiness and Response Coordinator completed review of two (2) hospital emergency operations plans.

3. The SNHPC Clinical Advisor supports ongoing planning for Super Bowl 2024 response.
4. SNHPC Clinical Advisor and OPHP Planner reviewed and revised Pediatric Surge Annex.
5. SNHPC Clinical Advisor and OPHP Planner continued planning for March 2024 Pediatric Surge tabletop and medical response surge exercise.
6. SNHPC Clinical Advisor and OPHP Trainer attended the initial state-wide Coalition Clinical Advisor workgroup meeting Jan. 24th.
7. Empower de-identified data requested, received, and displayed on GIS map. The map uploaded to CAT.
8. Senior PHP Planner attended Emergency Preparedness meetings with UMC and Mountain View hospitals.

D. Fusion Center Public Health Analyst:

1. Public Health Analyst continues to provide support to the Southern Nevada Counterterrorism Center and assist in the development of special event assessments.

E. Grants and Administration:

1. OPHP is awaiting carryover subawards for PHEP and CRI grants and an amendment to the current CRI budget.
2. OPHP is recruiting a Senior Administrative Assistant and Public Health Fusion Center Analyst.
3. Second Quarter progress reports were completed and submitted.

F. Medical Reserve Corps (MRC) of Southern Nevada:

1. Nineteen MRC Volunteers attended Naloxone training at SNHD. This training prepared volunteers for opioid emergencies at first aid stations.
2. MRC Coordinator planned training and activities for upcoming months, sent out newsletters, and continues to recruit and deactivate volunteers.
3. MRC Coordinator attended monthly NACCHO PPAG Workgroup meeting.
4. MRC Coordinator gave a presentation at the Facilities Advisory Board Meeting to promote the use of volunteers in hospitals.

MRC Volunteer Hours FY2024 Q3

(Economic impact rates updated August 2023):

Activity	January	February	March
Preparedness Exercise	27	0	0
Community Event/BP	0	0	0
SNHD Clinic	4.5	0	0
Total Hours	27	0	0
Economic impact	\$858.60	0	0

IV. VITAL RECORDS

A. January 2024 is currently showing a 5% decrease in birth certificate sales in comparison to January 2023. Death certificate sales currently showing an 4% decrease in comparison to January 2023. SNHD received revenues of \$32,968 for birth registrations, \$27,833 for death registrations; and an additional \$8,387 in miscellaneous fees.

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

Vital Statistics Services	Jan 2023	Jan 2024		FY 22-23 (Jan)	FY 23-24 (Jan)	
Births Registered	2,262	1,787	↓	14,878	13,716	↓
Deaths Registered	2,142	1,919	↓	12,444	11,890	↓
Fetal Deaths Registered	20	14	↓	116	116	

COMMUNITY HEALTH Vital Statistics Program Birth/Deaths Certificates – Fiscal Year Data

Vital Statistics Services	Jan 2023	Jan 2024		FY 22-23 (Jan)	FY 23-24 (Jan)	
Birth Certificates Sold (walk-in)	20	57	↑	316	430	↑
Birth Certificates Mail	131	149	↑	821	892	↑
Birth Certificates Online Orders	3,789	3,472	↓	25,324	24,326	↓
Birth Certificates Billed	76	122	↑	772	781	↑
Birth Certificates Number of Total Sales	4,016	3,800	↓	27,233	26,429	↓
Death Certificates Sold (walk-in)	18	62	↑	121	249	↑
Death Certificates Mail	147	147		1,067	1,061	↓
Death Certificates Online Orders	9,647	9,215	↓	56,825	52,357	↓
Death Certificates Billed	40	39	↓	238	245	↑
Death Certificates Number of Total Sales	9,852	9,463	↓	58,251	53,912	↓

COMMUNITY HEALTH Vital Statistics Program Birth/Deaths Cert. Sales by Source – Fiscal Year Data

Vital Statistics Sales by Source	Jan	Jan		FY 22-23	FY 23-24	
	2023	2024		(Jan)	(Jan)	
Birth Certificates Sold Valley View (walk-in)	.5%	1.5%	↑	1.2%	1.6%	↑
Birth Certificates Mail	3.3%	3.9%	↑	3%	3.4%	↑
Birth Certificates Online Orders	94.3%	91.4%	↓	93%	92%	↓
Birth Certificates Billed	1.9%	3.2%	↑	2.8%	3%	↑
Death Certificates Sold Valley View (walk-in)	.2%	.7%	↑	.2%	.5%	↑
Death Certificates Mail	1.5%	1.6%	↑	1.8%	2%	↑
Death Certificates Online Orders	97.9%	97.4%	↓	97.6%	97.1%	↓
Death Certificates Billed	.4%	.4%		.4%	.5%	↑

COMMUNITY HEALTH Vital Statistics Program Birth/Deaths Certificates Sales – Fiscal Year Data

Revenue	Jan	Jan		FY 22-23	FY 23-24	
	2023	2024		(Jan)	(Jan)	
Birth Certificates (\$25)	\$100,400	\$95,000	↓	\$680,825	\$660,725	↓
Death Certificates (\$25)	\$246,300	\$236,575	↓	\$1,456,275	\$1,347,800	↓
Births Registrations (\$13)	\$37,648	\$32,968	↓	\$253,500	\$227,409	↓
Deaths Registrations (\$13)	\$26,611	\$27,833	↑	\$162,565	\$154,700	↓
Convenience Fee (\$2)	\$8,154	\$7,234	↓	\$54,414	\$49,672	↓
Miscellaneous Admin	\$686	\$1,153	↑	\$4,284	\$4,923	↑
Total Vital Records Revenue	\$419,799	\$400,763	↓	\$2,611,863	\$2,445,229	↓

COMMUNITY HEALTH Passport Program – Fiscal Year Data

B. PASSPORT SERVICES – Passport Services is appointment only. Passport photos remain suspended.

Applications	Jan	Jan		FY 22-23	FY 23-24	
	2023	2024		(Jan)	(Jan)	
Passport Applications	863	724	↓	5,192	4,373	↓
Revenue	Jan	Jan		FY 22-23	FY 23-24	
	2023	2024		(Jan)	(Jan)	
Passport Execution/Acceptance fee (\$35)	\$30,205	\$25,340	↓	\$181,720	\$153,055	↓

V. HEALTH EQUITY

- A. The Health Equity program received a No Cost Extension from the Center for Disease Control to build, leverage, and expand infrastructure support for COVID prevention and control among populations that are at higher risk and underserved.
 - 1. The program continues to collaborate with SNHD programs and grant subrecipients to plan and coordinate COVID community strategies and events.
- B. The Health Equity Program works towards reducing health disparities through increasing organizational capacity and implementing community strategies.

VI. SOUTHERN NEVADA PUBLIC HEALTH LABORATORY (SNPHL)

A. Clinical Testing:

- 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 a reference laboratory for the 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. A total monthly samples tested is listed in the following table:

Test Name	Monthly Count	Avg Year to Date
GC Cultures	48	48
NAAT NG/CT	1240	1240
Syphilis	907	907
RPR/RPR Titers	138/76	138/76
Hepatitis Total	1022	1022
HIV/differentiated	615/16	615/16
HIV RNA	91	91

- 4. COVID testing:
 - SARS-CoV-2 PCR extraction is currently performed on the KingFisher Flex platform only.

- SNPHL is to maintain the capacity of 2000 tests/day with a turnaround-time of <48 hours (TAT 2Day- currently at / near goal).
- For January, the average daily testing was 55 and the average turnaround time was 54 hours for PCR testing from the collection date to the release of the test 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.
- Molecular laboratory will add Tecan instrument after installing the updated script for the SARS-CoV-2 WGS procedure. The field person from Tecan will come to fix the script in January.

A monthly summary of COVID PCR/NAAT testing is listed as follows:

Month	# PCR& NAAT/#POS	COVID	# PCR\$ NAAT/#POS
January	1,144/148	July	
February		August	
March		September	
April		October	
May		November	
June		December	

5. 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:

	Vibrio Screen	0												0
Yersinia	Yersinia Culture/ID	1												1

B. Epidemiological Testing and Consultation:

1. SNPHL participates in the SNHD Outbreak Investigation Committee and Foodborne Illness Taskforce. There were two (2) cases for GI outbreak investigation in January.
2. SNPHL continues to report results of influenza testing to the CDC National Respiratory and Enteric Virus Surveillance System (NREVSS). In January, SNPHL performed 55 respiratory panels on the BioFire.

C. 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.

2024	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec
Select Agent Rule out (total PCR)	0											

3. 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.
4. SNPHL performed 27 Whole Genome Sequencing tests (WGS) as part of PulseNet Foodborne Outbreak Surveillance in January 2024.
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 192 SARS-CoV-2-positive RNA extracts per week with expectations of increasing this capacity with appropriate staffing, instrumentation, and method development. As of January 2024, SNPHL has sequenced 91 SARS-CoV-2-positive RNA extracts.
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.

2024	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Legionella	29											

10. 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 January, we tested a total of zero mosquito pool samples. There was no positive WNV mosquito pool samples identified in January. Environmental Health released the test result to the public after we informed the test result to them.
11. As part of the Gonococcal Isolation Surveillance Program (GISP) and enhanced GISP (eGISP), in January, a total of 48 clinical isolates, Neisseria gonorrhoeae ten (10) isolates and Neisseria meningitidis five (5) 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.

D. All-Hazards Preparedness:

1. SNPHL provides / assists testing for SNHD COVID 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. 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. Perpetuated Biosafety Training and guidance to SNPHL personnel.

E. January 2024 SNPHL Activity Highlights:

1. SNPHL has a stable CDC supply of Viral Transport Medium (VTM) used in COVD collection kits.
2. Passed the CAP MVP, CAP Infectious Disease, Resp, Biofire Respiratory Virus panel, CAP SARS-CoV-2, CAP MEGN proficiency test in January 2024.
3. The clinical health laboratory purchased three (3) instruments for clinical testing to enhance the community health service. SNPHL received the urine analysis and Hematology instruments. Currently, the validation for both instruments has begun.
4. Our Emergency Response laboratory started to validate the warrior panel and verification process with CDC.
5. According to the WGS and genomic data analysis, the Omicron variant JN.1*, BA.2.*, EG.5.* lineages are domain lineages, 24%, 62%, and 5% respectively, in January, 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.
6. Identified zero Monkeypox positive test result in January 2024. The Whole Genome sequencing of January Monkeypox Positive samples has been completed. The clade for this case is IIb and the lineage is B.1.20 for three (3) sequencing data analyses.
7. According to the data of influenza surveillance in this flu season, the A/H3 and A/H1 are major subtypes of influenza and the percentage of ratio between three (3) subtypes are 68%, 19%, and 21%, respectively.
8. 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 in order to rule out avian influenza.

9. SNHD Facilities is working on installing more security cameras in the BSL-3 laboratory in January 2024.
10. The builder/Architect for the SNPHL Lab expansion project has met facility team and laboratory staff to discuss the laboratory design. The builder/Architect had on-site visits and had lab tours. We all agreed to have weekly meetings to review and update the lab design on Thursdays at 9am.

F. COMMUNITY HEALTH – SNPHL – Calendar Year Data

January SNPHL Services	2023	2024	
Clinical Testing Services ¹	4,323	5,231	↑
Epidemiology Services ²	530	1,378	↑
State Branch Public Health Laboratory Services ³	9,247	265	↓
All-Hazards Preparedness Services ⁴	8	6	↓
Environmental Health Services ⁵	0	29	↑

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

² Includes Stool culture, EIA, Norovirus PCR, Respiratory Pathogen PCR, Epidemiological investigations, or consultations.

³ Includes COVID 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, and Inspections.

⁵ Includes vector testing.