

Memorandum



Date: March 26, 2026

To: Southern Nevada District Board of Health

From: Lourdes Yapjoco, MSN-PH, RN, CCM, Director of Public Health & Preventive Care *ly*
Cassius Lockett, PhD, District Health Officer *cl*

RE: PUBLIC HEALTH & PREVENTIVE CARE BOARD OF HEALTH REPORT – February 2026

The Public Health and Preventive Care (PPC) Division is dedicated to protecting and promoting the health of our community. Through a range of clinical services, programmatic initiatives, and community outreach efforts, PPC works to prevent disease, support wellness, and ensure access to essential health resources for all residents. Our goal is to create a healthier, more equitable community by addressing public health needs with care, collaboration, and evidence-based practices.

I. Immunization Program

A. Immunization Program Activities

1. During the period of February 1–28, 2026, there were no new vaccine recommendations or official policy changes issued by the Centers for Disease Control and Prevention (CDC), the Advisory Committee on Immunization Practices (ACIP), and the American Academy of Pediatrics.

The Southern Nevada Health District continues to implement the 2026 immunization schedules released earlier in January 2026. The CDC published the updated Child and Adolescent Immunization Schedule, while the American Academy of Pediatrics (AAP) also released its annual immunization schedule for pediatric providers. Clinics are continuing to review these schedules and ensure alignment with current clinical guidance.

Additionally, Immunize.org released updated educational resources and clinical reference materials to support providers in implementing the 2026 immunization schedules and maintaining best practices in vaccine administration, storage, and documentation.

The immunization programs continue to focus on:

- Ensuring adherence to current vaccine storage and handling standards
- Ongoing staff education and training related to immunization schedules
- Maintaining accurate vaccine documentation and forecasting within clinical systems

At this time, no new vaccine products, safety alerts, or ACIP voting recommendations were issued during the February 2026 reporting period.

Immunization program staff will continue to monitor updates from the CDC, ACIP, AAP, and Immunize.org and, under the direction of the Chief Medical Officer, provide updates to the Board as new guidance becomes available.

2. During the reporting period, a total of 1,151 clients were seen across the four public health centers. In total, 2,681 vaccines were administered to individuals in the Southern Nevada community.
3. The four public health centers have successfully maintained the capacity to accommodate same-day appointments. A total of 264 same-day appointments were provided across the centers during this reporting period.

B. Immunization Outreach Activities

1. Immunization outreach clinics in February 2026 - 9 clinics, 362 vaccines were administered to 139 clients. The clinics were held at CCSD Family Support Center, CCDC, Mexican Consulate, Help of Southern Nevada, and East Las Vegas Community Center.

II. **Community Health Nursing**

A. Maternal Child Health

The Maternal Child Health (MCH) nurse received no referrals for elevated blood lead levels and no new newborn screening referrals for the month of February. There are 7 active clients enrolled in the Lead program in February.

B. Nurse Family Partnership (NFP)

The Southern Nevada Health District Nurse-Family Partnership (NFP) is an evidence-based community health nursing program that provides services to pregnant first-time mothers across the nation including here in Las Vegas. At present, 119 pregnant and new parents are participating in our program. Three nurse home visitors (NHV) are serving fifty-three families in the Maternal, Infant and Early Childhood Home Visiting (MIECHV) Program, a grant from the Nevada Division of Public and Behavioral Health while 1 NHV is currently being trained. Once she is ready, she will be able to serve an additional 25 clients. Collectively, the teams completed 121 in person home visits in February with one family graduating from the program this month. All program participants are receiving education, support, and resources from their own personal nurse to improve their pregnancy outcomes, improve the growth and development of their children, and to increase the economic self-sufficiency of the families.

C. Healthy Start Initiative- Enhanced

The Southern Nevada Health District's Healthy Start (HS) Initiative Program is supported by the Health Resources and Service Administration (HRSA) of the U.S. Department of Health and Human Services (HHS). There were 80 families served in February 2026. In-person program outreach was conducted at Nevada Health Centers WIC North Las Vegas, Nevada Health Centers WIC Tropicana, Alonso Medical Center, Anthem Community Wellness Center, Sunrise Children's Foundation, Volunteers in Medicine, Pearson Community Center, and Sunrise Library. Program outreach was also conducted at various DWSS locations. Additionally, HS hosted a community baby shower in partnership with Health Plan of Nevada Medicaid, for pregnant moms and moms with newborns. At this event, 128 attendees were provided a variety of education and community resources. A community health worker (CHW) II was hired this month and started the onboarding process for the Healthy Start Program. She will be involved in both program outreach as well as the community consortium.

D. Embracing Fatherhood

Embracing Fatherhood of Southern Nevada (EFSN) continues to support fathers with children ages 0-3 in the community. Home visits include education, community resources, and screenings. Currently there are a total of 12 active families enrolled in the Embracing Fatherhood program. We received one referral in February.

E. Nursing Education

There was 1 nursing CEU course offered, and 8 certificates were issued in the month of February.

III. **Sexual Health Outreach and Prevention Program (SHOPP)**

- A. Express Testing (ET) is a program that conducts testing for sexually transmitted infections (STI's) for asymptomatic patients, without requiring a provider exam.. ET completed 248 screening encounters for the month of February.

- B. The **Congenital Syphilis Case Management Program (CSCMP)** is a program to address the high rate of congenital syphilis in the community. The CSCMP nurses, in coordination with perinatal Hep B and HIV programs, continue to meet monthly to plan future targeted education sessions to increase knowledge and awareness of these diseases and available resources. The team is currently serving 44 active clients and participated in 2 educational community events.
- C. SHOPP houses the **Complex STI Navigation services** including the **Neurosyphilis Emergent Onsite Navigation (NEON)** program, which provides critical linkage services to patients suspected of neurosyphilis, and **Home Administered Treatment for STI's (HATS)**, which delivers STI treatment in the field for patients who are unable to access clinic-based care. There were four new referrals for complex STI services. In collaboration with SNHD Office of Disease Surveillance (ODS) team members, multiple clients were evaluated and successfully treated by the SHOPP HATS team during the month of January. The Complex STI CHNs collaborated with the CSCM team to provide educational training for students attending the Galen College of Nursing.
- D. The SHOPP **Rapid PREVENT** program has a total of 29 enrolled clients, with the goal of HIV prevention. CHW's for this initiative work collaborative with Express Testing to assess and provide linkage to care services and community resources.
- E. SHOPP's **Pathways to Better Health (PBH)** program serves pregnant/postpartum mothers and follows until the infant turns one year of age. The Community Health Workers support, educate and provide linkages and referrals with the goal of improving health outcomes during and after pregnancy for both moms and babies. This program now has a total of 42 active clients.

V. Street Medicine (SM) – Introduction of New Program

- A. Program Launch & Staffing
The Street and Medicine program continues to deliver essential primary care services directly to unhoused individuals- meeting them where they are, in line with the recognized philosophy of street medicine: going to the people and centering their needs. The APRN and Senior Community Health Nurses conduct primary care visits with the added support of two CHWs who focus on engagement and linkage to identified community resources, including housing, insurance and psychosocial services.
- B. Community Engagement & Collaboration
The Street Medicine team in collaboration with Help of Southern Nevada, Whitney Ranch Library and Clean the World, City of North Las Vegas Fabulous February Homeless outreach, and the Henderson Homeless Response Team provided primary care to clients at multiple outreach events for the unhoused. In addition, the Street Medicine team provided services in Boulder City.
- C. Approach & Intent
This primary care initiative embraces a harm-reduction and trauma-informed care model—focused on building trust through consistent outreach, nonjudgmental engagement, and accountability in meeting patients where they are. Community partnerships will play an instrumental role in both piloting and scaling the program effectively.
- D. Street Medicine completed 46 primary care visits in February.

VI. Tuberculosis (TB) Clinic

TB clinic has five (5) new adult TB active cases and zero (0) pediatric cases for the month of February 2026.

VII. Employee Health Nursing – February 2026

- A. There were zero (0) SNHD employees who tested positive for COVID-19. Zero (0) PCR tests were conducted. Zero (0) tests from outside entities.
- B. Employee New Hire and Annual Tuberculosis (TB) testing continues, and annual catch-up TB testing is ongoing. Thirty (30) Tuberculosis tests were completed.
- C. Employee New Hire and Annual FIT Testing Medical Evaluations continue. Thirteen (13) medical clearances were completed.
- D. Vaccine Clinics
 - 1. February 1 – February 28, 2026
 - 2. Employees Total: 6
 - a) 0 COVID-19 Updated booster.
 - b) 2 Influenza Vaccines
 - c) 6 other vaccines
 - d) 0 Hepatitis B Vaccines- Immz Policy
 - 3. Total Vaccines Given: 8
- E. New Hire/Onboarding: Six (6) new hires were onboarded.
- F. Employee Health Nurse Accomplishments:
 - 1. Completed Bloodborne Pathogen (BBP) Training SOP.
 - 2. Assisted with development of the PPC Newsletter.
- G. Policies and procedures continue to be reviewed and updated.

VIII. PPC Administrative Updates

- A. PPC began a newsletter to highlight each of the division's programs. The introductory issue went out in February..
- B. The expanded use of the electronic health record system (eClinicalWorks) has improved patient access to online self-scheduling. Over 90% of patient visits in the Immunization clinics now use eCW' s online check-in system.

Client Encounters by Locations											
Location	DECATUR PHC	Bonanza PHC	Henderson PHC	Mesquite PHC	Fremont PHC	UNLV	Homeless Outreach	Other Outreach	School Based Outreach	Mobile Clinic	TOTAL
Immunization Clinics and Outreach	647	295	170	39	0		15	57	67		1,290
Immunization Records Issued and Transcription	147	42	16	7	0						212
SHOPP Express Testing (ET)	170		0	1	18	30	0	29			248
TB Treatment & Control	1,045										1,045
CHN Home Visits ^	246										246
TOTAL	2,255	337	186	47	18	30	15	86	67		3,041

^ Data reporting began 7/1/2025

Client Encounters by Program						
Program	Feb 2025	Feb 2026		FY 24-25	FY 25-26	
Immunization Clinics and Outreach**	2,296	1,290	↓	23,705	17,812	↓
Immunization Records Issued and Transcription	171	212	↑	2,967	2,399	↓
SHOPP Express Testing	224	248	↑	1,954	1,510	↓
TB Treatment & Control	1,199	1,045	↓	11,691	10,356	↓
CHN Home Visits^		246	↑		2,066	↑
TOTAL	3,890	3,041	↓	40,317	34,143	↓

^ Data reporting began 7/1/2025

Total Client Immunizations Administered by Locations											
Location	DECATUR PHC	Bonanza PHC	Henderson PHC	Mesquite PHC	Fremont PHC	UNLV	Homeless Outreach	Other Immunization Outreach	School Based Outreach	Mobile Clinic	TOTAL
Total Immunizations Administered	1,574	685	342	80	0		47	150	165		3,043

*Includes Family centers, School clinics, and Immunization Outreach BTS clinics

**Includes BTS encounters by clinic, outreach, and COVID teams

Total Client Immunizations Administered by Locations						
Program	Feb 2025	Feb 2026		FY 24-25	FY 25-26	
Total Immunizations Administered	7,063	3,043	↓	69,640	38,857	↓

Immunization Clinic and Outreach Programs

	Feb 2025	Feb 2026		FY 24-25	FY 25-26	
Immunizations						
Flu Vaccine Given	791	305	↓	7,857	2,763	↓
COVID Vaccine Given	474	24	↓	3,311	615	↓
TB Skin Test *		2	↑		68	↑
Newborn Screening	0	1	↑	0	6	↑
Immunization Record Review and Release Only*		182	↑		2,182	↑
Transcription of Immunization Records Only*		30	↑		217	↑
Same Day Appts *		264	↑		4,194	↑
Referred to Civil Surgeon for Medical Assessment*		5	↑		32	↑
Vaccine Counseled **		59	↑		437	↑

*Started data collection 07/01/2025

**Counseled related to travel or routine vaccinations; no vaccine provided at appointment.

	Feb 2025	Feb 2026		FY 24-25	FY 25-26	
Vaccines for Children (VFC)						
Number of VFC Compliance Visits	1	6	↑	40	47	↑
Number of IQIP Visits	17	16	↓	26	32	↑
Number of Follow Up Contacts	25	106	↑	255	338	↑
Number of Annual Provider Training	1	6	↑	45	45	→
Number of State Requested Visits	10	23	↑	123	112	↓

	Feb 2025	Feb 2026		FY 24-25	FY 25-26	
Perinatal Hepatitis B						
# of Expectant Women	13	19	↑	13	12	↓
# of Infants	59	42	↓	65	51	↓
Total # of Infants Delivered	4	0	↓	25	18	↓
New Cases	5	6	↑	30	32	↑
Closed Cases	6	6	→	54	38	↓

	Feb 2025	Feb 2026		FY 24-25	FY 25-26	
Childcare Program						
Childcare Audits	10	10	→	54	60	↑
Baseline Immunization Rate	77%	76%	↓	79%	81%	↑
# of Final Audits	10	10	→	54	60	↑
Final Immunization Rate	96%	96%	→	93%	96%	↑
# of Records Reviewed	832	1004	↑	4702	4815	↑

Community Health Program

	Feb 2025	Feb 2026		FY 24-25	FY 25-26	
Nursing Field Services						
MCH Team Home Visit Encounters	10	17	↑	109	122	↑

	Feb 2025	Feb 2026		FY 24-25	FY 25-26	
NFP (Team 1)						
Referrals	22	22	→	135	129	↓
Enrolled	14	6	↓	65	56	↓
Active	126	119	↓			

	Feb 2025	Feb 2026		FY 24-25	FY 25-26	
NFP (Expansion Team)**						
Referrals	1	0	↓	23	0	↓
Enrolled	1	0	↓	14	0	↓
Active	28	0	↓			

Staff recruitment in process 2026

	Feb 2025	Feb 2026		FY 24-25	FY 25-26	
MCH						
# of Referrals Received	0	5	↑	32	39	↑
# from CPS	0	5	↑	24	28	↑
# of Lead Referrals	0	0	→	6	7	↑
# of Total Admissions	0	3	↑	28	27	↓

	Feb 2025	Feb 2026		FY 24-25	FY 25-26	
Thrive by 0 - 3						
Referrals	26	37	↑	277	348	↑
One-Time Home Visits	0	3	↑	26	46	↑
Enrolled	1	1	→	22	19	↓
Active	26	15	↓			

	Feb 2025	Feb 2026		FY 24-25	FY 25-26	
Healthy Start						
Referrals	41	31	↓	181	232	↑
Enrolled	4	8	↑	46	53	↑
Active	59	80	↑			

	Feb 2025	Feb 2026		FY 24-25	FY 25-26	
Embracing Fatherhood						
Referrals	1	1	→	3	11	↑
Enrolled	0	0	→	2	6	↑
Active	2	12	↑			

Tuberculosis Program

Tuberculosis	Feb 2025	Feb 2026		FY 24-25	FY 25-26	
Number of Case Manager Encounters^		123	↑		723	↑
Number of Unduplicated Clients Seen by a Provider^		31	↑		401	↑
Number of Clients encounters by TB Clinic Nurse^(duplicated patients)		340	↑		3125	↑
Number of Monthly Electronic Disease Notifications Clinic Clients (Class B)	80	67	↓	565	585	↑
New Active Clients^		5	↑		32	↑
Number of Clients Receiving LTBI Treatment^		286	↑		2204	↑
Outreach Activities during the Month - Presentations, Physician Visits, Correctional Visits, etc.	4	5	↑	47	51	↑
Directly Observed Therapy (DOT) Field, clinic and televideo encounters	1,199	890	↓	10,072	9,707	↓

^ No data available; data reporting started 7/1/2025

Sexual Health Outreach and Prevention Program (SHOPP)

	Feb 2025	Feb 2026		FY 24-25	FY 25-26	
SHOPP - Express Testing (Asymptomatic Patients)						
# of Screening encounters	185	248	↑	1,713	1,510	↓
# of Clients Screened	185	248	↑	1,713	1,506	↓
# of Clients with positive STI identified	20	24	↑	158	170	↑
STI Positivity Rate %*		10	↑		11	↑
SHOPP All CHW Linkages						
# of clients referred to Linkage	14	27	↑	139	152	↑
# of clients linked to care	14	27	↑	135	152	↑
SHOPP- Congenital Syphilis Case Management Program (CSCMP)						
# of Referrals (pregnant, post-partum, infants)	8	9	↑	63	67	↑
# of Clients enrolled in CM caseload)	7	7	→	43	41	↓
# of Infants being followed	38	44	↑			
# of Provider/ Community trainings	13	14	↑			
# of Provider/ Community trainings	3	2	↓	23	27	↑
SHOPP -Services for Unhoused Patients with Resources and Engagement in core (SURE)						
# of Outreach events	6	3		41	45	↑
SHOPP- Complex STI Navigation						
# of Clients referred	4	0	↓	34	40	↑
# of Clients navigated	3	1	↓	32	31	↓
# of Home administered treatment of STI (HATS)*	0	6	↑	13	37	↑
*No data available; data reporting started 7-1-2025						
Non- cumulative						

Street Medicine Program

Street Medicine	Feb 2025	Feb 2026		FY 24-25	FY 25-26	
Number of Clients Engaged^		57	↑		79	↑
Number of Primary Care Initial Visits^		34	↑		50	↑
Number of Primary Care Follow Up Visits^		12	↑		18	↑
Number of Referrals / Linkage to Resources^		24	↑		28	↑

^ No data available; data reporting started 1/1/2026