



MINUTES

SOUTHERN NEVADA DISTRICT BOARD OF HEALTH PUBLIC HEALTH ADVISORY BOARD MEETING

January 12, 2026 – 8:30 A.M.

Meeting was conducted In-person and via Microsoft Teams

Southern Nevada Health District, 280 S. Decatur Boulevard, Las Vegas, NV 89107
Red Rock Trail Conference Room

- MEMBERS PRESENT:** Kenneth Osgood, Chair – At-Large Member, Physician (*in-person*)
Susan VanBeuge, Vice-Chair – At-Large Member, Nurse (*in-person*)
Ronald Kline – Member, City of North Las Vegas (*in-person*)
Paul Klouse – Member, City of Boulder City (*via Teams*)
Brian Labus – At-Large Member, Environmental Health (*in-person*)
Holly Lyman – Member, City of Henderson (*in-person*)
Jennifer Young – Member, City of Las Vegas (*in-person*)
- ABSENT:** N/A
- ALSO PRESENT:** Toluwanimi Barbarinde, Cade Grogan, Matthew Winterhawk
- LEGAL COUNSEL:** Edward Wynder, Associate General Counsel
- EXECUTIVE SECRETARY:** Cassius Lockett, PhD, MS, District Health Officer
- STAFF:** Adriana Alvarez, Emily Anelli, Tawana Bellamy, Daniel Burns, Nancy Cadena, Andria Cordovez Mulet, Aaron DelCotto, Jason Frame, Bob Kingston, Anil Mangla, Brian Northam, Shannon Pickering, Luann Province, Alexis Romero, Chris Saxton, Karla Shoup, Randy Smith, Rosanne Sugay, Lourdes Yapjoco, Lei Zhang
- I. CALL TO ORDER AND ROLL CALL**
- The Chair called the Public Health Advisory Board meeting to order at 8:30 a.m. Andria Cordovez Mulet, Executive Assistant, administered the roll call and confirmed a quorum was present.
- II. PLEDGE OF ALLEGIANCE**
- III. FIRST PUBLIC COMMENT:** A period devoted to comments by the general public about those items appearing on the agenda. Comments will be limited to five (5) minutes per speaker. Please clearly state your name and address and spell your last name for the record. If any member of the Board wishes to extend the length of a presentation, this may be done by the Chair or the Board by majority vote.

Matthew Winterhawk expressed concern about a process issue he has observed across Nevada boards and commissions, including this one. He stated that meeting minutes were frequently placed at the start of agendas and approved months after the meetings occur, often without meaningful review or discussion. He emphasized that minutes were an important part of the public record, documenting questions, concerns, and oversight, and should not be treated as a formality. He stated that delayed or cursory approval undermines transparency and public confidence, and urged the Advisory Board to ensure minutes were reviewed in a timely, thorough, and transparent manner. He thanked the Advisory Board for the opportunity to place his concerns on the record.

Seeing no one further, the Chair closed this portion of the meeting.

IV. ADOPTION OF THE JANUARY 12, 2026 MEETING AGENDA *(for possible action)*

A motion was made by Member Lyman, seconded by Member Labus, and carried unanimously to approve the January 12, 2026 Agenda, as presented.

V. CONSENT AGENDA: Items for action to be considered by the Southern Nevada District Board of Health Public Health Advisory Board which may be enacted by one motion. Any item may be discussed separately per Board Member request before action. Any exceptions to the Consent Agenda must be stated prior to approval.

1. APPROVE MINUTES/PUBLIC HEALTH ADVISORY BOARD MEETING: October 13, 2025 *(for possible action)*

A motion was made by Member Lyman, seconded by Vice-Chair VanBeuge, and carried unanimously to approve the January 12, 2026 Consent Agenda, as presented.

VI. REPORT / DISCUSSION / ACTION

1. Update on Seasonal Respiratory Diseases; direct staff accordingly or take other action as deemed necessary *(for possible action)*

Dr. Rosanne Sugay, Medical Epidemiologist, provided an update on seasonal respiratory diseases, specifically Influenza A and B, SARS-CoV-2, and RSV.

Member Klouse joined the meeting at 8:47 a.m.

Member Lyman inquired as to the efficacy of the influenza vaccine this year. Dr. Sugay reported that current data indicate pediatric vaccine effectiveness remained at approximately 80%, while effectiveness in preventing infection among adults was estimated at 30–40%. She noted that, regardless of infection rates, available reports consistently show that vaccination reduces the severity of illness. Dr. Lockett advised that the team was currently working to pull together data on hospitalizations for influenza.

- 2. Update on Immunization Rates and Outreach;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

Shannon Pickering, Community Health Nurse Manager, and Lourdes Yapjoco, Director of Public Health and Preventive Care and Chief Administrative Nurse, provided an update on the immunization rates and outreach in the community.

Further to an inquiry from Member Labus on any changes to the hepatitis B vaccination recommendations, Ms. Pickering stated that the program was not expected to see significant impact, as it serves clients who are either untested for hepatitis B surface antigen or already known to be positive, and service numbers have remained steady in recent months. Ms. Yapjoco noted that broader impacts may be seen in hospital settings, particularly regarding birth-dose hepatitis B vaccine recommendations. Dr. Lockett emphasized the importance of education, noting that prior to universal hepatitis B vaccination recommendations in 1991, cases exceeded 200,000 annually and declined significantly afterward, highlighting the virus's high transmissibility. He stressed that education will be critical as some vaccines shift from universal to high-risk or shared clinical decision-making recommendations. Ms. Lourdes added that ongoing education efforts for providers, parents, and the community will continue, noting that the vaccines remain available and covered, and that staff are preparing for workflow adjustments while continuing discussions with parents on the importance of vaccination.

- 3. Update on the Sexual Health Outreach and Prevention Program (SHOPP);** direct staff accordingly or take other action as deemed necessary *(for possible action)*

Ms. Pickering provided an overview of the Sexual Health Outreach and Prevention Program (SHOPP).

Member Osgood noted national reports indicating an increase in congenital (newborn) syphilis and asked whether Nevada had seen a similar rise, particularly among pregnant women. Ms. Pickering responded that while increases have been observed nationally, Nevada had experienced a decrease in cases over the past year, attributing the improvement to ongoing education, treatment efforts, and increased awareness.

- VII. BOARD REPORTS:** The Southern Nevada District Board of Health Public Health Advisory Board members may identify and comment on Health District related issues. Comments made by individual Board members during this portion of the agenda will not be acted upon by the Southern Nevada District Board of Health Public Health Advisory Board unless that subject is on the agenda and scheduled for action. ***(Information Only)***

There were no items raised.

- VIII. HEALTH OFFICER & STAFF REPORTS *(Information Only)***

- DHO Comments

Dr. Lockett expressed concern regarding recent changes to the childhood immunization schedule, noting the removal of several vaccines – including hepatitis A and B, rotavirus, COVID-19, influenza, RSV, and meningococcal disease – from universal recommendations and their shift to high-risk or shared clinical decision-making use. He highlighted particular concern about meningococcal disease, emphasizing its high fatality rate despite its rarity, and noted that universal adolescent vaccination led to more than a 90% reduction in cases since 2005. He reported a recent increase in meningococcal cases in 2024, particularly among adults ages 30-60 and individuals with HIV. Dr. Lockett explained that Nevada has mechanisms in place, including legislation adopted during the Governor’s special session and authority under NRS 441A.200, that allows the State Board of Health to pause or decline implementation of ACIP recommendations. He stated that state partners plan to further discuss these authorities at an upcoming State Board of Health meeting to explore additional protections for the community.

- IX. SECOND PUBLIC COMMENT:** A period devoted to comments by the general public, if any, and discussion of those comments, about matters relevant to the Board’s jurisdiction will be held. Comments will be limited to five (5) minutes per speaker. If any member of the Board wishes to extend the length of a presentation, this may be done by the Chair or the Board by majority vote.

Seeing no one, the Chair closed this portion of the meeting.

X. ADJOURNMENT

The Chair adjourned the meeting at 9:34 a.m.

Cassius Lockett, PhD, MS
District Health Officer/Executive Secretary

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