MEMORANDUM

Date: September 24, 2026

To: Southern Nevada District Board of Health

From: Cassius Lockett, PhD, MS, *District Health Officer*

Subject: **Administration Division Monthly Report – August 2026**

Executive Summary

The Office of Communications issued 6 News Release, placed advertisements to promote services for the Southern Nevada Community Health Clinic in the Las Vegas Pride magazine, as well as Caring for Our Community campaign on google ads. Staff further designed facilitator guide materials for the SPARK Youth Advisory Council. As of September 1, 2026, the Health District had 791 employees. Human Resources posted 5 employment opportunities, held 65 interviews, extended 17 job offers, and onboarded 4 new hires.

Office of Communications

News Releases Disseminated:

- Southern Nevada Community Health Center celebrates National Health Center Week Aug. 2-8
- Youth vaping remains a serious challenge as Clark County students return to school
- New approaches to substance misuse prevention take center stage at annual summit
- Build healthy habits during Childhood Obesity Awareness Month with the 5-2-1-0 Challenge

- Fresh, affordable produce returns to Bonneville Transit Center this fall
- 10th annual Southern Nevada event honors lives lost to overdose and promote prevention

Press:

- Extreme heat
- Cyclosporiasis cases
- Youth vaping
- Childhood vaccinations
- Overdose deaths and prevention efforts

Four hundred seventeen news clips related to the Health District, local news coverage and national coverage of public health topics were compiled in August. Coverage includes traditional print, broadcast, digital and online media outlets. A complete list is available at https://media.southernnevadahealthdistrict.org/download/oc/202608-PI-Report.pdf.

Advertisements, Projects Completed and Social Media Summary:
In August, staff placed advertisements to promote services for the Southern Nevada Community Health Clinic in the Las Vegas Pride magazine, as well as Caring for Our Community campaign on google ads. The Office of Communications assisted the Health Equity team to redesign materials for the Brian Health is Community Health campaign, developed outreach flyers for the Brain Health and Sleep Health program and designed facilitator guide materials for the SPARK (Students Promoting Awareness Responsibility & Knowledge) Youth Advisory Council**.**

The Office of Communications facilitated responses to 155 public information inquiries related to Health District programs and services, vaccine clinic requests, health fair invitations, and complaints. The team also received 92 internal project requests, including graphic design, website content updates, photography, advertising, marketing, outreach materials, and translation services. Staff continued regular updates to Health District websites, including SNHD.org and SNCHC.org.

On social media, staff promoted Back-to-School vaccination clinics, Chic Trend, CredibleMind, Fight the Bite, lead testing services (English and Spanish), Strip Club (fentanyl and xylazine test strips), Sudden Unexpected Infant Death Syndrome, Water Watcher, and Board of Health recognitions. Staff also created a video for the Southern Nevada Substance Misuse and Overdose Prevention Summit.

Community Outreach and Other:

- Three Square Food Bank/Supplemental Nutrition Assistance Program, Low Income Energy Assistance Program and Temporary Assistance for Needy Families program clients processed: 37
- Department of Welfare & Supportive Services Medicaid/Supplemental Nutrition Assistance Program applications: 220

Government Affairs Update:

- Provided legislative update and facilitated a discussion of legislative priorities with the Health Executive Council.
- Continued outreach and coordination on the Public Health Sector Legislative Request for Funding to Support Disease Surveillance, Investigation and Response, including discussions with the public health policy strategy group, LCB and legislators.

- Continued planning a legislative site visit for the Nurse-Family Partnership program.
- Finalized and submitted the annual State Public Health Fund expenditure report.
- Continued compiling the SB118 annual report.

Meetings and Events of Note:

- 08/01: La Oportunidad Expo
- 08/06: Meeting with Senator Fabian Doñate on public health priorities.
- 08/06: National Health Center Week Event
- 08/07: Meeting with Senator Fabian Doñate and other local health authorities on the
- Public Health Sector Legislative Request for Funding to Support Disease Surveillance, Investigation and Response.
- 08/11: Meeting of the Joint Interim Standing Committee on Health and Human Services, where the Legislative Request for Funding to Support Disease Surveillance, Investigation and Response was discussed and approved during the work session.
- 08/12: CitiesLEAD Project Meeting.
- 08/13: 2026 Southern Nevada Substance Misuse and Overdose Prevention Summit, with participation from congressional delegation staff.
- 08/17: La Oportunidad Post-Event Debrief Meeting
- 08/17: Meeting with Senator Cortez Masto, the Nevada Primary Care Association and FQHC staff.
- 08/17: Ogden Foundation / SNHD Beyond the Scoreboard Meeting
- 08/18: Community Partners Meeting Nevada Department of Human Services Division of Social Services
- 08/18: Facilities Advisory Board August 18, 2026
- 08/18: Healthy Start Family Huddle.
- 08/19: Meeting with a regional representative in the Office of Senator Cortez Masto regarding the Nurse-Family Partnership program.
- 08/20: Big Cities Health Coalition Policy Workgroup.
- 08/25: Meeting with the Governor's Health Policy Advisor and other local health authorities
- 08/27: Accreditation meeting/documentation
- 08/28: Meeting of the Joint Interim Standing Committee on Revenue, where a version of the tobacco pricing proposal was discussed and approved during the work session.
- 08/31: Nevada Health Authority Summer Stakeholder Update Workshop.
- Meetings with the Public Health Policy Strategy Group.
- Meetings related to the State Public Health Funds and SB118.

Please see Appendix A for the following:

- Media, Collateral and Community Outreach Services
- Monthly Website Page Views
- Social Media Services

Facilities

Monthly Work Orders	Aug 2025	Aug 2026		YTD FY26	YTD FY27	
Maintenance Responses	309	653	↑	676	1,207	↑
Electrical Work Orders	23	59	↑	83	109	↑
HVAC Work Orders	39	116	↑	76	261	↑
Plumbing Work Orders	7	30	↑	23	47	↑
Preventive Maintenance	8	16	↑	91	32	↓
Security Responses	1,715	1,537	↓	4,173	3,074	↓

Finance

Total Monthly Work Orders	Aug 2025	Aug 2026		YTD FY26	YTD FY27	
Purchase Orders Issued*	564	475	↓	1,095	1,063	↓
Grants Pending – Pre-Award**	2	2	=	10	6	↓
Grants in Progress – Post-Award***	7	4	↓	11	13	↑

*Includes purchase requests and p-card transactions.
**Grant applications and NCCs created and submitted to agency
***Subgrants routed for signature and grant amendments submitted
No-Cost Extensions and Carryover requests are not quantified in this report.

Grants Expired – August 2026						
KEY: P=Pass-through, F=Federal, S=State, O=Other						
Project Name	***Grantor***	***End Date***	***Amount***	***Reason***	***FTE***	***Comments***
State of Nevada, Ryan White Part B Eligibility, (hcrwbe26)	P-HRSA	8/31/2026	$15,979.00	End of project period	0.97	Not expected to renew
State of Nevada, National Violent Death Reporting System (nvdrs_26)	P-CDC	8/31/2026	$147,315.00	End of project period	0.87	Expected FY2027 renewal
Centers for Disease Control and Prevention, Overdose Data to Action (ODTA) Limiting OD through Collaborative Action in Localities (odta_24)	F-CDC	8/31/2026	$2,550,000.00	End of extended budget period	10.05	Expected FY2027 renewal

Grants Expired – August 2026						
KEY: P=Pass-through, F=Federal, S=State, O=Other						
Project Name	***Grantor***	***End Date***	***Amount***	***Reason***	***FTE***	***Comments***
Centers for Disease Control and Prevention, Overdose Data to Action (ODTA) Limiting OD through Collaborative Action in Localities (odta_26)	F-CDC	8/31/2026	$2,550,000.00	End of project period	9.10	Expected FY2027 renewal
Clark County, HIV Status-Neutral Rapid Prevent Program (ppcsna26)	P-HRSA	8/31/2026	$325,000.00	End of project period	2.20	Not expected to renew
State of Nevada, Opioid Overdose Death Registry Surveillance (sudors26)	P-CDC	8/31/2026	$262,333.00	End of project period	1.34	Expected FY2027 renewal
NUE1EH001398-05-01, Strengthening Environmental Health Capacity, Water Quality Data, Amendment 1 (wqdata25)	F-CDC	8/31/2026	$339,032.00	End of project period	0.84	Amendment 2 supplement received

Grants Awarded – August 2026							
KEY: P=Pass-through, F=Federal, S=State, O=Other							
Project Name	***Grantor***	***Received***	***Start Date***	***End Date***	***Amount***	***Reason***	***FTE***
State of Nevada, Integrated HIV Program (nvehe_26)	P-CDC	8/4/2026	6/1/2026	5/31/2027	$2,090,623.00	FY2026 renewal	7.97
Advancing Healthy Equity to Address Diabetes, Amendment 3 (codpp_24)	P-CDC	8/25/2026	8/1/2026	6/29/2027	$51,923.00	FY2027 renewal	0.30
1 U01EH001386-01-00, CDC	F-CDC	8/25/2026	9/30/2026	9/29/2027	$228,571.00	FY2027 renewal	1.03

Foodborne Illness (fdill_27)							
NUE1EH001398-05-02, Strengthening Environmental Health Capacity, Water Quality Data, Amendment 2 (wqdata_25)	F-CDC	8/31/2026	9/1/2024	8/31/2027	$485,257.00	FY2027 supplement	0.84

Contracts Awarded – August 2026							
KEY: P=Pass-through, F=Federal, S=State, O=Other							
Project Name	***Grantor***	***Received***	***Start Date***	***End Date***	***Amount***	***Reason***	***FTE***
State of Nevada, State Public Health Fund, Year 2 of 2 (shf_27)	State= ILA	8/12/2025	8/1/2025	6/30/2027	$5,393,240.00	Year 2 of 2	35.05
State of Nevada, Safe Drinking Water, Year 2 of 2, (sdw_27)	O-ILA-P-EPA	7/1/2026	7/1/2026	6/30/2027	$182,170	Year 2 of 2	0.28

Human Resources (HR)

Employment/Recruitment:

- 791 Total Employees
- 4 New Hire, including 0 rehires and 0 reinstatements
- 9 Terminations
- 4 Promotions, 3 Flex-reclasses
- 3 Transfers, 0 Lateral Transfer, 1 Reassignments
- 0 Demotions, 1 Voluntary Demotion
- 37 Annual Increases
- 65 Interviews; 5 of the 65 interviewed were attended by recruiters
- 17 Offers extended (2 offers declined)
- 5 Recruitments posted
- Turn Over Rates
  - District Administration: 1.124%
  - Community Health: 1.411%
  - Disease Surveillance & Control: 0.000%
  - Environmental Health: 1.465%
  - Public Health & Preventive Care: 0.000%
  - FQHC: 0.000%

Projects in Progress/Other Items

- Recruitment meetings
- Strategy/Training meetings with Departments
- Credentialing Training
- Reports for Cheri
- Migrating files
- Webinars

Temporary Employees

- 7 Temporary Staff

Employee/Labor Relations

- 2 Coaching and Counseling, 1 Verbal Warning, 0 Written Warning, 0 Suspensions, 1 Final Written Warnings, 0 Terminations, 0 Probationary Releases
- 8 Grievances
- 1 Arbitration
- 200 Hours of Labor Meetings (with Union)
- 150 hours investigatory meetings
- 6 Investigations
- 29 Complaints & Concerns
- 100 Hours ER/LR Meetings with managers or employees
- Number of EEOC/NERC and EMRB cases: 4

Training/Meetings Attended by Staff

- Monthly JLMC Meeting
- SEIU Meetings

Projects in Progress/Other Items

- New Leaders Orientation Guide
- Disciplinary Document – How-To Guide in NEOGOV
- Employee Relations/Labor Relations Standard of Procedures (SOP)
- Grievance Log and Official Complaints Report, Investigation Log for Leadership
- Supervisors, managers, and directors monthly check-up meetings

Interns

There were a total of 26 interns providing 752 applied public health practice hours in August 2026.

Interns and Clinical Rotations	Aug 2026	YTD
Total Number of Interns [1]	26	83
Internship Hours [2]	752	1,858

[1] Total number of students, residents, and fellows

[2] Approximate hours students, residents, and fellows worked in applied public health practice

Safety

July

- Inquiries: 39
- Investigations: 1

August

- Inquiries: 52
- Investigations: 2

Training (In-Person and Online)

- New Hire Orientation:
  - 08/10/2026: 1 new hire
  - 08/17/2026: 1 new hire
  - 08/31/2026: 1 new hire
- New Hire Quarterly:
  - 08/18/2026: 4 participants
- FQHC Health Center Week:
  - 08/06/2026: Customer Services Training: 60 participants

Informatics

A. EpiTrax

1. Work with the Epidemiology and Surveillance teams to monitor systems and applications, investigate and resolve issues, and provide ongoing user account support.
2. Continued configuring and validating FHIR responses in collaboration with Skylight and eHealth Exchange to ensure accurate data exchange and interoperability for IZ Gateway and UMC.
3. Completed the Pediatric COVID Mortality and RSV Mortality forms, both awaiting review.
4. Enhance the EpiTrax user interface so that unsaved-change alerts are displayed only when a user modifies data and attempts to leave the page without saving, improving usability and reducing unnecessary alerts as the WebIZ integration module is implemented.
5. Continue reviewing vaccine information pulled from WebIZ into EpiTrax to ensure that only vaccines relevant to the associated disease condition are displayed, such as influenza vaccine information for influenza cases. Work with Epi to finalize the vaccine mapping list and obtain ACDC and ODS approval.
6. Resolved an attachment access issue caused by duplicate EpiTrax user accounts by removing duplicates and ensuring each user has a unique account.
7. Update the EpiTrax hantavirus condition configuration to align with current CDC surveillance guidance, maintaining separate disease conditions for Hantavirus Pulmonary Syndrome (HPS) and non-HPS hantavirus infection.
8. Designed the ICAR data flow and proposed a solution for ACDC to extract ICAR data into the data warehouse for Epi analysis; the flow has been reviewed and approved by ACDC, and the next step is implementation.
9. EpiTrax User Requests:

EpiTrax Requests	Nov 2025	Dec 2025	Jan 2026	Feb 2026	Mar 2026	Apr 2026	May 2026	June 2026	July 2026	Aug 2026
EpiTrax Requests Completed	13	16	15	12	6	4	1	1	6	8
EpiTrax Requests Opened	55	57	53	48	49	49	51	50	48	42
EpiTrax New Requests	11	18	11	7	7	4	3	0	4	2

B. Electronic Message Staging Area (EMSA)

1. Continue to work on EMSA2, including mapping new LOINC and ICD10-CM codes, integrating incoming labs, data processing, susceptibility panel result and reviewing logic for exceptions and errors.

2. Onboarded 40 new facilities for Electronic Case Reporting (eCR).
3. Ongoing coordination and reconciliation of Child Lead FirstMed Health and Wellness reporting and CPL patient address data.
4. Coordinating with ACDC to review NSPHL HAI ELR reports.
5. Updated ELR logic for HAI to create EpiTrax cases for out-of-jurisdiction clients for surveillance and HAI purposes.
6. Update the new Hepatitis C logic to reopen a case when a new viral load positive lab is detected within the same MMWR year as the lab collection date, rather than assigning it to the OOE new queue or linking it to the old case; also reopen the case when seroconversion is detected.
7. Reviewed the EMSA2 logic and identified missing ELRs that were not processed into EpiTrax, primarily due to existing logic definitions; the affected ELRs have been processed and entered into EpiTrax.
8. ELRs and eCRs Volume:

ELRs	Nov 2025	Dec 2025	Jan 2026	Feb 2026	Mar 2026	Apr 2026	May 2026	June 2026	July 2026	Aug 2026
Total Received	118,343	135,111	132,370	131,135	128,645	121645	139,688	124,164	133,612	121,612
Total Processed	117,087	135,038	152,490	127,198	127,322	134784	123,641	139,387	139,387	128,117
Under Review	1,039	1,421	2,420	6,876	3,598	3205	3,535	3,441	3,441	4,601
Event Updated	15,949	19,496	22,630	18,703	18,408	20325	18,577	23,305	23,305	17,665
Event Created	7,206	8,516	9,472	10,536	11,040	10601	9,212	8,302	8,302	9,692

eCRs	Nov 2025	Dec 2025	Jan 2026	Feb 2026	Mar 2026	Apr 2026	May 2026	June 2026	July 2026	Aug 2026
Total Received	49,580	52,372	49,968	47,280	53,828	195745	98,732	76,415	87,961	88,158
Total Processed	100,899	49,846	45,993	44,829	58,061	122234	172,869	79,450	68,171	77,250
Under Review	84,776	87,028	90,631	93,220	106,893	150551	161,456	173,374	197,153	207,206
Event Updated	9,733	4,190	3,467	4,215	4,182	6041	10,191	3,849	3,033	3,381
Event Created	784	599	428	484	541	1297	2,097	674	676	787

C. Data Warehouse

1. Continued monitoring and maintenance of the data warehouse.
2. Resolved the qa_dictionary table logic issue involving the same questions appearing on multiple forms.
3. Added the person facility comment column to the warehouse tables.
4. Maintained and updated automation scripts.
5. Downloaded up-to-date Las Vegas weather data into the data warehouse for Epi to use for CSTE-related vector control analysis.

D. Dashboard

1. Continued development of the Wastewater Dashboard, completed wastewater concentration data by facility, continued standardizing methods with the state dashboard (WVAL vs. PPMOV), and continued replicating the dashboard for other diseases.
2. Added new PILLARS Power BI Dashboard pages for Race/Ethnicity and Low Birth Weight, Education and Low Birth Weight, Age and Low Birth Weight, and Insurance and Low Birth Weight.

E. Southern Nevada Public Health Laboratory (SNPHL)

1. Created 7 new healthcare sites for Outreach.
2. Revisions made to the Laboratory Response Network (LRN) for Francisella testing.
3. Re-design and re-configuration of Clinical Lab results report.
4. Built new tests and algorithms for Microalbumin/Creatinine ratio.
5. Built new security roles for staff so that they can run reports.
6. Updated 8 existing panels/tests to accommodate new changes.
7. Resolved syncing issues between Outreach and Harvest.
8. Applied changes to HIV result messages to resolve ingestion by system at the state.
9. SNPHL Requests:

SNPHL Requests	Nov 2025	Dec 2025	Jan 2026	Feb 2026	Mar 2026	Apr 2026	May 2026	June 2026	July 2026	Aug 2026
Requests Completed	50	56	58	47	65	66	15	59	59	71
Requests Opened	48	67	56	50	60	72	54	55	61	83

F. Electronic Health Record (EHR) System

1. Modified Combatting Antimicrobial Resistant Gonorrhea and Other STIs (CARGOS) reports to capture additional data.
2. Resolved Point of Care testing issues at FQHC Fremont and Decatur Labs.
3. Conducted Monthly Q/A check for the Healthy Start program.
4. Built Intimate Partner Violence (IPV) Questions in eCW.
5. Updated Syphilis/RPR testing panels in eCW.
6. Resolved TB Skin testing documentation issue in eCW.
7. Resolved eBO routing issue due to disk space issues.
8. Resolved eCW SFTP issues resulting in missing reports.
9. EHR Requests and Reports.

EHR Requests	Nov 2025	Dec 2025	Jan 2026	Feb 2026	Mar 2026	Apr 2026	May 2026	June 2026	July 2026	Aug 2026
Requests Completed	22	27	29	30	33	31	16	40	35	18
Requests Opened	23	20	26	30	22	32	24	23	33	46

eCW Reports	Nov 2025	Dec 2025	Jan 2026	Feb 2026	Mar 2026	Apr 2026	May 2026	June 2026	July 2026	Aug 2026
FQHC	5	3	18	10	11	11	6	9	5	7
PPC	2	4	2	6	4	2	3	2	5	6

G. Clark County Coroner's Office (CCCO)

1. Electronic ordering system for SNPHL tests went live, coordinating with Forensic Supervisors to conduct training.
2. Revised and expanded public-facing statistics dashboard.
3. Created training guide for case management software for new hires - Completed, reviewed, and distributed to department heads.
4. Completed data requests:
   a. Heat related deaths to LVRJ
   b. Suicide reports to DPBH
   c. YTD OD data to LVMPD

H. Data Modernization Initiative (DMI)

1. Continued implementation of the Informatica Data Governance platform, working with Informatica technical support to resolve lineage errors in union tables, completed uploading all form field column definitions, continued setting up Epi accounts and preparing core field definitions for upload, and continued training for the CDGC Professional Certification.
2. CDC Message Validation, Processing, and Provisioning System (MVPS), reconciled 2024 and 2025 cases, removed the 2025 Botulism cases based on the case review outcome, and identified and deleted duplicate 2024 and 2025 C. auris cases resulting from duplicate submissions with the State.
3. Completed the 2026 NMI export for C. auris and exported 2024 and 2025 Typhoid cases and updated NMI.
4. Completed NETSS exports for Invasive Pneumococcal Disease and Varicella for 2024, 2025, and 2026.
5. Updated Legionella case status associated with outbreaks based on the review outcome.

I. National Syndromic Surveillance Platform/Electronic Surveillance System for the Early Notification of Community-Based Epidemics (ESSENCE)

1. Solved Syndromic Surveillance System connection issues with all feeds.

J. Other Projects

1. Maintain and enhance the iCircle web application, including user account support, site maintenance, data QA, and updates.
2. Ongoing collaboration with IT to develop the landing page and submission portal for wastewater submitter reporting and implement relational database ingestion from the document database.
3. Continued reviewing the CDC Wastewater Toolkit.
4. Updated the A3 document need statement and added visualizations for the OD2A project.
5. Reviewed an issue with the online morbidity form where the status could not be updated due to missing data and addressed the issue.
6. Prepared the AI application architecture diagram and interview questions for vendor and contractor interviews and product evaluation for the IC project, focused on building an AI solution that can process arious document types and generate valid eCRs compatible with EMSA2 XSLT for seamless ingestion into EpiTrax.
7. Reviewed the arbovirus and Accela vector control trap reports to identify discrepancies; found a logic issue in the Accela report query and notified IT to update it so the arbovirus report, public map, and Accela report use the same logic.
8. Continue identifying data gaps in the Query Connector with IZ Gateway, including missing information in the UI and improving FHIR endpoint queries to return the correct results; reported bugs and feature requests to Skylight, Audacious Inquiry, and eHealthExchange.
9. Reviewed and planned the antibiogram data and requirements to prepare the data for public release.
10. Continue working on consolidating the HAN MS Access database and Excel spreadsheet into a single system to eliminate the need for ACDC staff to document the same information in two places.
11. Reviewed Early Syphilis case count discrepancies between EpiTrax and the State.

K. National and State Meetings/Workshops

1. eHealth Exchange and SNHD Use cases with FHIR and IZ Gateway.
2. Statewide Syndromic Surveillance Workgroup.
3. BCHC Data Modernization Workgroup monthly call.
4. Data Modernization Learning Community (DMLC) monthly call.
5. PHAST Consortium Technical, Weekly Collaboration and Learning, R Shiny, Merge Request, and Manager Meetings.
6. CRISP Shared Services | SNHD IC Weekly Sync.
7. PubHealthAI Collaborative Network.
8. Pediatric RSV- & COVID-19-associated death reporting.
9. eCR Data Quality Workgroup Meeting.
10. CSTE Electronic Laboratory and Disease Reporting Subcommittee Call.
11. CSTE Frontline Tools Roundtable Discussion.
12. Ai4 2026 conference.
13. Vendor discovery with H2O.ai to evaluate its AI/ML platform and potential fit for our on-premise AI environment.

Information Technology (IT)

Service Requests	Aug 2025	Aug 2026		YTD FY26	YTD FY27	
Service Requests Completed	881	1,158	↑	1,822	2,208	↑
Service Requests Opened	968	1,307	↑	2,019	2,543	↑

Information Services System Availability 24/7	Aug 2025	Aug 2026		YTD FY26	YTD FY27	
Total System	94.55	79.27	↓	92.68	81.24	↓

Total Monthly Work Orders by Department	Aug 2025	Aug 2026		YTD FY26	YTD FY27	
Administration	260	295	↑	510	606	↑
Community Health	93	116	↑	188	213	↑
Environmental Health	165	164	↓	340	329	↓
Primary & Preventive Care	196	216	↑	401	394	↓
Disease Surveillance & Control	110	182	↑	242	342	↑
FQHC	125	250	↑	279	428	↑
Other	16	19	↑	31	71	↑

First Call Resolution & Lock-Out Calls	Aug 2025	Aug 2026		YTD FY26	YTD FY27	
Total number of calls received	968	1,307	↑	2,019	2,543	↑

Workforce Team – Public Health Infrastructure Grant (PHIG)

PHIG Team

- Workforce engagements:
  - Prepared the August 2026 Hiring Plan for submission to CDC
  - Fiscal review of Credit Card usage by PHIG Team; Reconciled/approved purchases
  - Attended the, "Restore This First" webinar on how to identify which I.T. systems should come back online after a cyber issue
  - Participated in the Finance-Administration Division meeting
  - Participated in the AI in Public Health: Considerations for Responsible Use
  - Participated in Looking Ahead: Making Informed Decisions for Public Health Sustainability
  - Participated in the Local PHIG Workforce Director Peer Network hosted by Big Cities Health Coalition (BCHC)
  - Participated in the PHIG Primary Investigator Peer Network hosted by the Association of State and Territorial Health Officials (ASTHO)
  - Participated in the Data Modernization Initiatives for Supporting Public Health Infrastructure Transformation: A National Extension for Community Healthcare Outreach (ECHO) Learning Series
  - Participated in the Sustaining Infection Prevention in Long-Term Care: Partnerships, Workforce, and Practical Solutions hosted by the National Association of County and City Health Officials (NACCHO)
  - Attended the National Network of Public Health Institutes: Open Forum Conference in Nashville – learning topics included Creating and Communicating a winning value proposition for Public Health, Cultivating the Next Generation: Indigenous-Led models for Workforce Transformation: and Cultivating Connection to grow and uplift the Public Health Workforce – Ms. Neal Recognized at the 2026 PHIG Impact Award
  - Selected to be a Mentor to another member of the conference, established a very good connection between the mentee and mentor
  - Attended the August 2026 Board of Health meeting
  - Participated in the Ad Hoc CDC Response All-STLT Update Call – Strengthening Agricultural Health: National Partner Approaches to Measles Prevention and Response

CDC Requirements

- Future Technical Assistance requests must be submitted through the Public Health Infrastructure Virtual Engagement (PHIVE) platform in lieu of an assigned Project Officer
- Finalized, reviewed, and approved June monthly hiring plan for submission to the CDC
- Received, Reviewed, and Initiated budget preparation and performance narrative for the NCC submission in August 2026
- Finalized and submitted the NCC Narrative, Abstract, and Budget for Year 5 through GrantSolutions to the CDC for review and potential approval

Performance Management

- Speed to results webinar from CI (Continual Impact): 1 hr.
- Facilitation of state Vax survey for DSC: 3 hrs.
- Negotiation for Change Management program on-site from ASTHO: 2 hrs.
- HR global compliance request fulfilment and pop-ups: 3 hrs.
- Completion of Cornell Public Health Leadership Essentials certificate program: 7 hrs.

Quality Improvement

- FQHC Clinic Alignment/OPs Focus Project support: 14 hrs.
- PMQI meeting admin.: 2.5 hrs.
- Hep B vax project: 5 hrs.
- State QI council plus staff catchup: 2.5 hrs.
- Support of DSC Overdose & Supply project: 2 hrs.
- Sept. Gemba Walk planning and admin: 4 hrs.
- Finance reimbursement process for out-of-pocket expenses: 3 hrs.
- QI maturity survey administration: 6 hrs.
- Formation of 3 new strike teams and training design: 5 hours

PHAB Reaccreditation

- Facilitate transition to Version 2026 of Standards & Measures affecting 11 existing documents requiring adjustment: 13 hrs.
- Contributor support: 2 hrs.
- Admin. : 2 hrs.
- PR/PO admin. for Accreditation document review consulting: 2 hrs.

PHIG

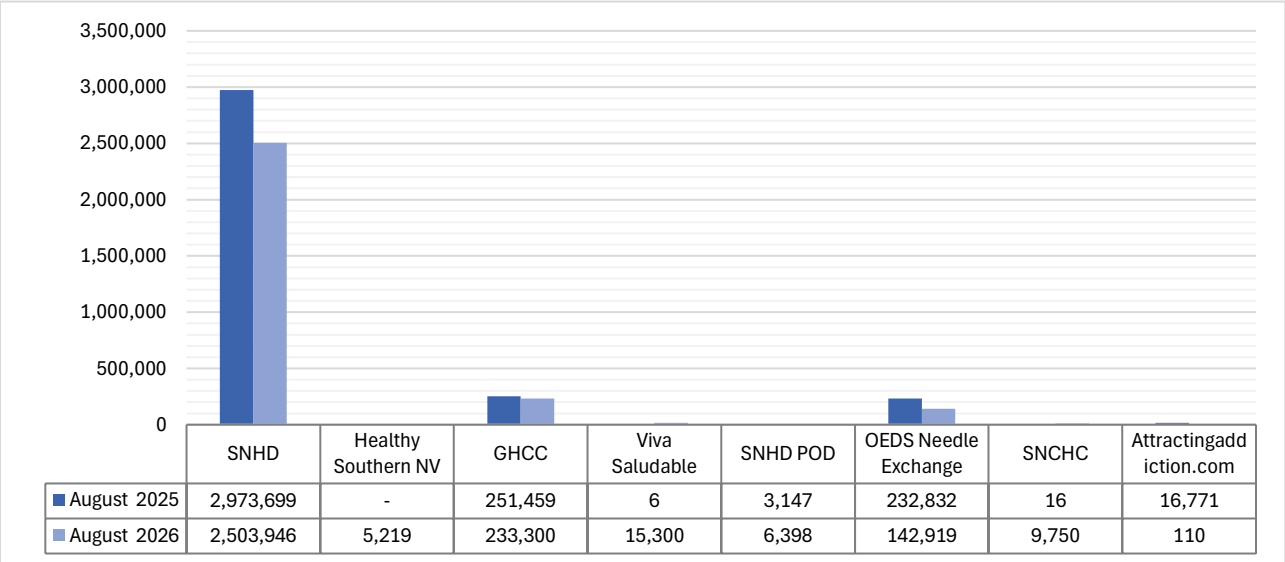
- Team-Purchasing card administration: 5 hours
- Breakout and PA briefing prep for Region 9 Hub conference: 3 hrs.
- NNPHI Open Forum @ Nashville over 3 days. Contact hours: 18
- Budget and program management for QI/Accreditation: 2 hours

Appendix A – Office of Communications

Media, Collateral and Community Outreach Services:	**Aug 2025**	**Aug 2026**		**YTD FY26**	**YTD FY27**	
Media – Digital/Print Articles	49	31	↓	70	70	=
Media - Broadcast stories	113	61	↓	160	190	↑
Collateral - Advertising/Marketing Products	9	14	↑	22	29	↑
Community Outreach - Total Volunteers[1]	3	10	↑			
Community Outreach - Volunteer Hours	76	810	↑	130	1,980	↑

[1]Total volunteer numbers fluctuate from month to month and are not cumulative.

Monthly Website Page Views:



	SNHD	Healthy Southern NV	GHCC	Viva Saludable	SNHD POD	OEDS Needle Exchange	SNCHC	Attractingaddiction.com
August 2025	2,973,699	-	251,459	6	3,147	232,832	16	16,771
August 2026	2,503,946	5,219	233,300	15,300	6,398	142,919	9,750	110

Social Media Services		**Aug 2025**	**Aug 2026**		**YTD FY26**	**YTD FY27**
Facebook SNHD	Followers	13,676	14,653	↑	N/A	N/A
Facebook GHCC	Followers	6,094	6,104	↑	N/A	N/A
Facebook SHC	Followers	1,619	1,593	↓	N/A	N/A
Facebook Food Safety	Followers	179	175	↓	N/A	N/A
Instagram SNHD	Followers	5,483	6,191	↑	N/A	N/A
Instagram GetHealthyCC	Followers	320	457	↑	N/A	N/A
Instagram @Ez2stop	Followers	152	159	↑	N/A	N/A
X (Twitter) EZ2Stop	Followers	417	404	↓	N/A	N/A
X (Twitter) SNHDflu	Followers	1,744	1,717	↓	N/A	N/A
X (Twitter) Food Safety	Followers	100	100	=	N/A	N/A
X (Twitter) SNHDinfo	Followers	9,964	9,831	↓	N/A	N/A
X (Twitter) TuSNHD	Followers	341	332	↓	N/A	N/A
X (Twitter) SoNVTraumaSyst	Followers	120	119	↓	N/A	N/A
Threads SNHD	Followers	944	1,041	↑	N/A	N/A
TikTok @Ez2stop	Views	49	52	↑	N/A	N/A
TikTok SNHD	Views	276	1,131	↑	N/A	N/A
YouTube SNHD	Views	174,957	171,561	↓	354,642	324,569

Note: Facebook, Instagram, Threads, Tiktok and X (Twitter) numbers are not cumulative.

Appendix B – Finance – Payroll Earnings Summary – August 1, 2026 to August 14, 2026

PAYROLL EARNINGS SUMMARY
August 1, 2026 to August 14, 2026

	Pay Period	Calendar YTD	Fiscal YTD	Budget 2027	Actual to Budget	Incurred Pay Dates to Annual
PUBLIC HEALTH & PREVENTATIVE CARE	$ 365,753.91	$ 5,684,236.61	$ 1,409,912.01	$ 9,361,710.71	15%	
ENVIRONMENTAL HEALTH	$ 685,907.02	$ 11,648,869.84	$ 2,878,589.18	$ 17,445,202.98	17%	
COMMUNITY HEALTH	$ 365,454.23	$ 5,687,979.24	$ 1,497,823.49	$ 8,524,651.64	18%	
DISEASE SURVIELLANCE & CONTROL	$ 360,075.87	$ 5,965,661.92	$ 1,504,804.65	$ 9,705,921.95	16%	
FQHC	$ 369,431.68	$ 5,974,155.55	$ 1,446,764.04	$ 10,077,384.93	14%	
ADMINISTRATION W/O ICS-COVID	$ 629,764.07	$ 11,219,199.75	$ 2,568,835.95	$ 17,951,980.28	14%	
TOTAL	**$ 2,776,386.78**	**$ 46,180,102.91**	**$ 11,306,729.32**	**$ 73,066,852.49**	15%	15%
FTE	794					
Regular Pay	$ 2,353,023.67	$ 37,115,758.73	$ 9,215,939.37			
Training	$ 34,952.40	$ 80,633.83	$ 42,088.12			
Final Payouts	$ -	$ 581,045.37	$ 308,569.09			
OT Pay	$ 53,557.59	$ 331,427.66	$ 124,003.86			
Leave Pay	$ 302,343.90	$ 6,981,867.04	$ 1,459,380.27			
Other Earnings	$ 32,509.22	$ 1,089,370.28	$ 156,748.61			
TOTAL	**$ 2,776,386.78**	**$ 46,180,102.91**	**$ 11,306,729.32**			

BI-WEEKLY OT/CTE BY DIVISION/DEPARTMENT
August 1, 2026 to August 14, 2026

Overtime Hours and Amounts | **Comp Time Hours Earned and Value**

ADMINISTRATION

Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	Value
Viote, Jorge		5.50	393.04	Duque, Armando	6.00	258.22
Silva-Minnich, Rosanna		5.00	339.61	Loyer, Tianna	15.00	332.09
Ruiz, George		17.25	778.45			
Chamberlain, Robert (Bob)		9.50	428.72			
Ubando, Marjorie		18.25	1010.52			
Martinez, Yolanda		8.00	325.86			
Thede, Stacy		6.00	220.80			
Viera, Maria		8.50	304.51			
Brown, Dominique		11.00	394.08			
Arzate, Mario		8.00	286.60			
Urena, Maite		12.75	456.77			
Ines, Heinrich		18.75	671.73			
Yell, Cindy		8.50	296.81			
Noches, Kimberly		6.00	315.60			
Thompson, Christopher		8.50	296.81			
Murphy Melissa		6.75	289.50			
Herrera Kelwen		9.00	305.81			
Sanabria Luis		10.00	339.80			
Nerveza Avery John		17.45	592.93			
Marquez Anthony		9.00	305.81			
Herrera Ortiz Maria		1.50	59.51			
De Lisle Ricky		2.25	91.64			
Total Administration		**207.45**	**8504.91**		**21.00**	**590.30**

COMMUNITY HEALTH SERVICES

Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	Value
Cardona, Anthony (Tony)		17.75	886.92	Alford, Camille	0.38	12.98
Thomas, Pamela		7.50	394.50	Anguiano, Cristina	1.88	51.05
O'Toole, Denise		8.50	383.59			
Gomez, Karen		29.00	1181.25			
Burghardt, Passhion		10.25	377.20			
Chaingan, Carlo		7.50	276.00			
Kiaha, Cassidy		13.25	474.68			
Terriquez, Elizabeth		8.50	296.81			
Kendle, Taylor		8.00	294.40			
Martinez Blanca		17.50	789.73			
Total Community Health Services		**127.75**	**5355.08**		**2.26**	**64.04**

FQHC-COMMUNITY HEALTH CLINIC

Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	Value
Medina, Mirelly		0.50	23.13	Valdes-Ayala, Beatriz	2.64	81.41
Delarmente, Joannah	FP_26 NO MILEAGE	0.25	18.80	Calito, Maria	0.15	3.77
Manaloto, Xcelza	FP_26 NO MILEAGE	0.25	18.80			
Garcia Jorge, Jose		0.50	39.57			
Alfaro Stacey		0.50	18.84			
Merino Jacquelin	RWAEIS26 NO MILEAGE	0.50	17.91			
Total FQHC-Community Health Clinic		**2.50**	**137.05**		**2.79**	**85.18**

PUBLIC HEALTH & PREVENTIVE CARE

Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	Value
Brantner, Lonita		22.50	1124.25	Rossi Boudreaux-Thibodeaux, Lester	3.00	99.93
Hamilton, Isabel		17.50	1071.94	Calderon, Aracely	28.50	1226.52
Maciel, Marisol		16.50	913.62	Arquette, Jocelyn	4.88	271.10
Enzenauer, Lizette		26.25	1649.65	McTier, Chika	30.00	1503.80
Castillo, Jocelyn		9.00	676.71	Contreras-Araiza, Alondra	12.75	708.30
Chongtai, Loriza		18.25	1520.77	Hodge, Victoria	10.88	422.46
Robles, Cynthia		1.50	83.06	Purugganan, Grace	21.75	1090.26
Sprance-Grogan, Carolyn		19.00	1163.82	Shin, Jennifer	23.25	1226.68
Kuahiwinui McGuire, Becky		15.00	918.80	Carrera, Bruna	16.50	394.08
Rossi Boudreaux-Thibodeaux, Lester		1.00	49.97	Young, Maita	20.10	1007.55
Salomon, Vicki		18.75	936.89	Delgado, Diana	24.76	1306.34
Arquette, Jocelyn		17.75	1479.10	Ruiz-Flores, Erika	9.75	476.62
Panganiban, Sheila		10.00	751.90	Kamami, Diana	9.75	476.62
McTier, Chika		3.25	244.37	Carcamo, Monica	22.50	749.51
Caballero, Lorena		13.50	593.31			
Hodge, Victoria		17.50	1019.27			
Villalobos, Yolanda		33.00	1489.24			
Navarro, Maria		16.00	722.04			
Mercado, Yarem		8.50	403.64			
Stockwell, Paul		14.00	647.59			
Carpenter, Leslie		17.50	1315.83			
Grijalva, Breanna		17.00	786.37			
Nagai, Sage		18.75	1409.82			
Wong, Michelle		9.00	659.94			
Young, Maita		2.35	176.69			
Ramirez Cofer, Andrea		4.00	150.69			
Zarret, Mariam		6.75	534.20			
Orozco, Carissa		15.25	1146.65			
Aucalla, Gennesis		16.50	638.52			
Ruiz-Flores Erika		17.50	1283.21			
Miranda Consuelo		20.75	743.38			
Garcia Ruby		16.00	588.80			
Espenilla Marko Rugy		27.50	1012.00			
Carbajal-Mazon Wendy		29.15	1044.32			
Fisher-Armstrong Gimmeko		20.75	985.37			
Corona Samantha		1.25	80.69			
Total Public Health & Preventative Care		**538.75**	**30016.42**		**238.37**	**10959.78**

ENVIRONMENTAL HEALTH

Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	Value
Hall, Nancy		16.75	1325.60	Northam, Korie	1.50	79.14
Harris, Sheila		5.00	276.85	Cavin, Erin	2.25	107.19
Kaderlik, Patricia		1.50	107.19	Johnson, Rabea	0.38	17.63
Sakamura-Low, Miki		2.75	211.99	Nguyen, Linda	1.50	71.46
Billings, Jacob		4.00	316.56	Thompson, William B	3.00	135.85
Piar, Diane		3.50	250.12	Southam, Jaclyn	3.75	149.33
Lett, Kendra		0.50	37.60	Valadez, Alexis	5.25	198.59
Cummins, Veronica		5.50	345.64	Ahmed, Maryam	2.25	80.88
Wills, Jerry		12.75	761.57	Constanza, Katherine	2.25	78.90
Rakita, Daniel		3.50	193.80	Castillo, Christopher Jay	1.88	65.93
Diaz-Ontiveros, Luz		6.00	340.43	Edmonds, Alexus	9.38	337.16
Michel, Guillermo		1.75	96.90	Wanene, Edna	3.75	124.92
Calzado, Neil		11.50	636.76	Erickson, Sarah	5.26	184.45
Craig, Jill		4.50	249.17	Stewart, Richard	0.75	25.62
Craig, Jill	FDILL_25	3.00	166.11	David, Anessa	0.75	23.74
Wade, Cynthia		2.75	148.27			
Ross, Alyssa		6.50	333.12			
Dunne, Rebecca		17.58	900.95			
Erickson, Sarah		1.50	78.90			
Herrera Carlos		3.25	170.95			
Roberts Jamie		1.75	92.05			
Nwaonumah Nosa		0.50	26.30			
Total Environmental Health		**116.33**	**7066.83**		**43.90**	**1680.79**

DISEASE SURVEILLANCE & CONTROL

Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	Value
Eddleman, Tabby		2.50	165.50	Raman, Devin	1.89	99.72
Polintan, Michael		17.00	849.44			
Alvarez Jeffrey	HIVPRV26	5.50	254.41			
Washburn Kacie	HIVPRV26	5.50	254.41			
Burgess Glenn	HIVPRV26	6.50	350.46			
Viote Angeles	HIVPRV26	5.50	261.18			
Baltazar Josephine Gladys	HIVPRV26	6.50	341.90			
Total Disease Surveillance & Control		**49.00**	**2477.30**		**1.89**	**99.72**
Combined Total		**1041.78**	**53557.59**		**310.21**	**13479.81**

Appendix C – Finance – Payroll Earnings Summary – August 15, 2026 to August 28, 2026

PAYROLL EARNINGS SUMMARY
August 15, 2026 to August 28, 2026

	Pay Period	Calendar YTD	Fiscal YTD	Budget 2027	Actual to Budget	Incurred Pay Dates to Annual
PUBLIC HEALTH & PREVENTATIVE CARE	$ 341,763.59	$ 6,029,477.88	$ 1,755,153.28	$ 9,361,710.71	19%	
ENVIRONMENTAL HEALTH	$ 683,709.28	$ 12,332,579.12	$ 3,562,298.46	$ 17,445,202.98	20%	
COMMUNITY HEALTH	$ 369,318.07	$ 6,057,297.31	$ 1,867,141.56	$ 8,524,651.64	22%	
DISEASE SURVIELLANCE & CONTROL	$ 353,902.62	$ 6,319,564.54	$ 1,858,707.27	$ 9,705,921.95	19%	
FQHC	$ 373,209.53	$ 6,347,365.08	$ 1,819,973.57	$ 10,077,384.93	18%	
ADMINISTRATION W/O ICS-COVID	$ 627,668.08	$ 11,885,222.05	$ 3,234,858.25	$ 17,951,980.28	18%	
TOTAL	**$ 2,749,571.17**	**$ 48,971,505.98**	**$ 14,098,132.39**	**$ 73,066,852.49**	19%	19%
FTE	794					
Regular Pay	$ 2,400,328.49	$ 39,522,726.24	$ 11,622,906.88			
Training	$ 2,046.86	$ 82,680.69	$ 44,134.98			
Final Payouts	$ -	$ 615,547.31	$ 343,071.03			
OT Pay	$ 13,564.01	$ 344,991.67	$ 137,567.87			
Leave Pay	$ 294,134.75	$ 7,276,319.12	$ 1,753,832.35			
Other Earnings	$ 39,497.06	$ 1,129,240.95	$ 196,619.28			
TOTAL	**$ 2,749,571.17**	**$ 48,971,505.98**	**$ 14,098,132.39**			

BI-WEEKLY OT/CTE BY DIVISION/DEPARTMENT
August 15, 2026 to August 28, 2026

Overtime Hours and Amounts | **Comp Time Hours Earned and Value**

ADMINISTRATION

Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	Value
Ubando, Marjorie		4.50	249.16	Duque, Armando	1.50	66.20
Taitano, Kyomi		1.00	43.95	Gonzales, Fabiana	2.25	87.37
Thede, Stacy		8.00	294.40	Ruelas-Villanueva, Francisco	4.65	163.06
Kuahiwinui-McGuire, Brandon		8.00	301.36	Loyer, Tianna	15.00	332.09
Ines, Heinrich		3.00	107.48			
Murphy, Melissa		17.25	739.80			
Sanabria, Luis		5.00	169.88			
Nerveza, Avery John		4.50	152.91			
De Lisle, Ricky		0.50	20.37			
Total Administration		**51.75**	**2079.31**		**23.40**	**648.71**

COMMUNITY HEALTH SERVICES

Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	Value
Thomas, Pamela		7.50	394.50	Anguiano, Cristina	1.88	51.05
Martinez, Azalia		5.50	224.03			
Chaingan, Carlo		7.50	276.00			
Terriquez, Elizabeth		7.50	261.89			
Kendle, Taylor		7.50	276.00			
Total Community Health Services		**35.50**	**1432.42**		**1.88**	**51.05**

FQHC-COMMUNITY HEALTH CLINIC

Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	Value
Diaz, Michelle		0.50	23.13	Valdes-Ayala, Beatriz	2.63	81.10
Medina, Mirelly		1.75	80.95	Servando, Maria Cristina	0.75	41.66
Lee, Miriam		0.75	56.39			
Total FQHC-Community Health Clinic		**3.00**	**160.47**		**3.38**	**122.77**

PUBLIC HEALTH & PREVENTIVE CARE

Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	Value
Calderon, Aracely		0.50	32.28	Arquette, Jocelyn	1.51	83.89
Stockwell, Paul	NVEHE_26	6.00	277.54	Hodge, Victoria	0.76	29.51
Ramirez Cofer, Andrea		6.00	226.03			
Delgado, Diana		6.00	474.84			
Guerrero, Grisly	GSSHC_26	6.00	284.93			
Relph, Kris	PPCSNA26	6.00	214.95			
Romualdo Daniel, Yareli		0.75	26.19			
Corona, Samantha		2.00	129.11			
Total Public Health & Preventative Care		**33.25**	**1665.87**		**2.27**	**113.40**

ENVIRONMENTAL HEALTH

Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	Value
Hall, Nancy		11.50	910.11	Johnson, Rabea	4.50	208.80
Houston, Donna		1.00	79.14	Ballard, Jessica	1.50	52.60
Navarrete, George (Larry)		0.50	39.57	Hall, Alyssa	1.88	65.93
Sheffer, Thanh		11.50	821.82	Wanene, Edna	2.63	87.61
Piar, Diane		5.00	357.31	Jones, Jalen	10.88	381.53
Ortiz-Rivera, Vanessa		1.25	89.33	Johanson, Jacob	0.75	23.13
Moreno, Kristina		1.50	99.29			
Cummins, Veronica		7.50	471.33			
Wills, Jerry		10.00	597.31			
Rakita, Daniel		6.50	359.91			
Michel, Guillermo		1.75	96.90			
Calzado, Neil		10.50	581.40			
Jufar, Lydia		2.50	134.79			
Ross, Alyssa		7.50	384.37			
Ahmed, Maryam		0.50	26.96			
Ballard, Jessica		-1.50	-78.90			
Ballard, Jessica	PH1EH_23 NO M	1.50	78.90			
Edmonds, Alexus		1.00	53.92			
Hall, Alyssa		5.00	263.00			
Gonzalez, Kimberly		4.50	236.70			
Figueroa, Natalya		3.75	187.38			
Erickson, Sarah		0.75	39.45			
Hernandez, Lilian		7.00	341.28			
Ryan, Erica		2.50	131.50			
Herrera, Carlos		20.75	1091.45			
Hernandez, Abel		8.75	426.59			
Thompson, Deshawn		1.00	52.60			
He, Shuhan		1.00	46.26			
Total Environmental Health		**135.00**	**7919.67**		**22.14**	**819.59**

DISEASE SURVEILLANCE & CONTROL

Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	Value
Holbert, Raychel	HIVPRV26	5.00	306.27	Raman, Devin	2.25	118.71
Total Disease Surveillance & Control		**5.00**	**306.27**		**2.25**	**118.71**
Combined Total		**263.50**	**13564.01**		**55.32**	**1874.23**

Appendix D – Risk Management Annual Report – Fiscal Year Ending June 30, 2026

Southern Nevada Health District

Risk Management Annual Report

Fiscal Year Ending June 30, 2026

Legal Department
August 2026

SOUTHERN NEVADA Community HEALTH CENTER

Risk Management Annual Report

Fiscal Year Ending June 30, 2026

Legal Department
August 2026

EXECUTIVE SUMMARY

This report provides a summary of the Southern Nevada Health District's Risk Management activities for Fiscal Year 2026. As part of Risk Management's strategy of developing a risk management culture, this report is shared with the Health District's Health Executive Council.

Risk Management continues to analyze current insurance market trends. The Risk Management team works in partnership with a private market insurance broker with a specialization in healthcare to ensure the Health District receives high-quality claims management and benefits from insurance. The Health District continues to realize the better rates from utilizing private market insurance rather than the Nevada public pool option.

RISK MANAGEMENT STRUCTURE AND GOALS

Risk Management

Risk Management is the process of identifying risks, assessing the likelihood and impact of their occurrence, and determining the most effective means of managing them or reducing them to an acceptable level. The aim is to reduce the frequency of risk events occurring and minimize the severity of their consequences if they do occur. The goal is to reach an optimal balance of risk, benefit, and cost while achieving business objectives. The Health District's Risk Management Program seeks to achieve this goal by being a resource to Health District programs and divisions in the areas of risk and claims management concepts, consulting, and education. Good risk management also ensures the Health District is in a stronger position to minimize financial losses, service disruption, bad publicity, threats to public health, and compensation claims.

Risk Management manages the Health District commercial liability programs, as well as ensuring the FQHC stays in compliance with the claim management aspects of being FTCA (Federal Tort Claims Act) deemed as a federal contractor. As program administrator, the Risk Manager manages demands and lawsuits of professional and general liability claims against the Health District and its employees.

Risk Management purchases the Health District's Employment Practices insurance and gets involved in strategy and any settlement discussions in cooperation with the Human Resources department.

Primary Risk Management activities include:

- ✓ Investigation, management, and disposition of professional liability claims and lawsuits
- ✓ Investigation, management, and disposition of general liability claims and lawsuits
- ✓ Risk education
- ✓ Risk assessment and loss control
- ✓ Commercial insurance purchasing
- ✓ Risk monitoring and reporting

INSURANCE POLICIES

The Health District maintains insurance coverage for exposure to a variety of potential claims. The primary coverages include:

- Professional Liability (Medical Malpractice)
- General Liability
- Employment Practices Liability (EPL)
- Automobile
- Property
- Cyber Risk & Privacy
- Workers' Compensation

For the coverage period (07/01/2025 - 07/01/2026), the Health District's insurance policies are as follows:

Coverage	Policy Period	Limits	Deductible
Professional Liability	07/01/2025 – 07/01/2026	$1M/$3M	$25K
General Liability	07/01/2025 – 07/01/2026	$1M/$3M	$25K
Employment Practices	07/01/2025 – 07/01/2026	$1M	$50K
Automobile	07/01/2025 – 07/01/2026	$1M	$3K
Real Property	07/01/2025 – 07/01/2026	$40M	$50K
Personal Property	07/01/2025 – 07/01/2026	$33M	$25K
Cyber Risk & Privacy	07/01/2025 – 07/01/2026	$2M	$25K
Workers' Compensation	07/01/2025 – 07/01/2026	Statutory/$2M	None

COST OF RISK

The Cost of Risk compares the Health District's risk management program expenditures to the Health District's fiscal year operating expenses. The Cost of Risk includes any paid claims (amounts paid in the fiscal year without regard to the year the claims arose), insurance premiums, and operational and administrative expenses. The Cost of Risk is outlined in the table below.

Cost of Risk Detail

	FY22	FY23	FY24	FY25	FY26
Professional Liability Insurance	$81,021.22	$75,847.00	$90,310.83	$70,768.00	$73,249.55
General Liability Insurance	$386,461.71	$431,147.68	$503,108.60	$4,232.00	$4,987.15
Employment Practices				$28,832.25	$31,897.30
Property Insurance				$162,699.00	$158,222.00
Auto Insurance			$6,103.00	$153,907.00	$171,973.00
Cyber Risk/Privacy				$37,164.00	$46,539.93
Workers' Compensation	$410,863.00	$493,366.00	$485,653.00	$268,146.00	$254,681.00
Subtotal	$878,345.93	$1,000,360.68	$1,079,072.43	$725,748.25	$741,549.93
Expenses–Outside Counsel	$120,870.58	$20,007.86	$111,377.00	$317,256.80	$134,068.39
Deductible	$36,870.20	$56,472.37	$87,530.45	$19,267.50	$28,000.00
Subtotal	$157,740.78	$76,480.23	$198,907.45	$336,524.30	$162,068.39
Total	**$1,036,086.71**	**$1,076,840.91**	**$1,277,979.88**	**$1,062,272.55**	**$903,648.32**

Total Health District Operating Expenses	$147,986,384	$124,913,443	$73,422,792	$62,500,803	$112,567,176
Cost of Risk (as % of Health District Operating Expenses)	.7%	.8%	1.7%	1.7%	.8%

Incident Reports

An important element of the Risk Management program is the identification, reporting, and analysis of incidents that occur on Health District properties. A reportable incident includes any occurrence that is inconsistent with routine Health District operations. Reporting and reviewing these events are a critical part of quality assurance, quality improvement, and risk mitigation. Health District leadership encourages staff to report any incident or opportunity for improvement.

Clinical occurrences, including medical responses to "Medical Emergency[i]" are analyzed separately by Quality Management Committee/Medical Event Committee to identify the basic or causal factors underlying the incident and potential improvement in processes or systems to reduce the likelihood of future incidents.

Incident Summary

In Fiscal Year 2026 (07/01/2025 - 06/30/2026), 111 incident reports were filed.

FY26 Incident Report Summary

1-Medical Emergency	2-Security	3-Injury	4-Theft	5-Property Damage	6-MVA	7-Misc
48	9	4	5	13	6	26

In Fiscal Year 2025 (07/01/2024 - 06/30/2025), 114 incident reports were filed.

FY25 Incident Report Summary

1-Bluebird	2-Security	3-Injury	4-Theft	5-Property Damage	6-MVA	7-Misc
48	22	2	1	18	4	21

In Fiscal Year 2024 (07/01/2023 - 06/30/2024), 111 incident reports were filed.

FY24 Incident Report Summary

1-Bluebird	2-Security	3-Injury	4-Theft	5-Property Damage	6-MVA	7-Misc
47	22	3	6	16	3	14

In Fiscal Year 2023 (07/01/2022 - 06/30/2023), 94 incident reports were filed.

FY23 Incident Report Summary

1-Bluebird	2-Security	3-Injury	4-Theft	5-Property Damage	6-MVA	7-Misc
39	15	3	11	17	4	5

HIPAA RISK ASSESSMENT

A HIPAA Risk Assessment is a tool that is designed to help healthcare providers conduct security risk assessments as required by the HIPAA Security Rule. The assessment helps identify risks that could possibly lead to HIPAA violations and/or security breaches.

An annual risk assessment is for the entire organization, all SNHD programs complete the assessment regardless of if they are a part of the covered entity. The assessment looks at two common areas in which a covered entity could possibly violate a HIPAA Security Rule, including security breaches. The two common areas are 1.) Unauthorized access and 2.) Disclosure of Protected Health Information ("PHI") and Personal Identifiable Information ("PII"). Review of these areas allows each program to review their practices and procedures, if any inconsistencies are found, and enact corrective action.

While HIPAA risk assessments focus on maintaining confidentiality and privacy for our patients and clients, this annual opportunity can lead to discussions regarding employee safety, building safety, and related issues. These are referred to the appropriate staff to address.

OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION (OSHA)

Nevada OSHA Complaint and Inspection Process[ii]

The Risk Manager or designee is the point of contact for any OSHA inspector and will accompany any OSHA inspector during an inspection. The Safety Officer and program supervisors/managers will work to resolve issues with the Risk Manager providing support, as appropriate.

The purpose of the General Safety Program (GSP) is to assist Southern Nevada Health District (SNHD) personnel establish a unified, District-wide injury/illness prevention policy and practice while maintaining compliance with OSHA and other federal, state, and local laws and/or standards. The GSP is supported by and works in concert with the Southern Nevada Health District Safety Plan (ADM-030).

[i]Effective 12/15/25 PPC-ADM-001-C/CHCA-021 replaces the term "Dr. Bluebird" with "Medical Emergency"
[ii] SNHD General Safety Program, rev. 28Feb2024, Section 14.4