



# Memorandum

**Date:** January 26, 2023

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

**From:** Christopher D. Saxton, MPH-EH, REHS, *Director of Environmental Health* CS  
 Fermin Leguen, MD, MPH, *District Health Officer* FL

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**Subject:** Environmental Health Division Monthly Report - December

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## I. FOOD OPERATIONS PROGRAM

### ENVIRONMENTAL HEALTH Food Operations Program – Fiscal Year Data

Food Operation Services	Dec. 2021	Dec. 2022		FY 21-22	FY 22-23	
<b>Routine Inspections</b>	1,307	1,158	↓	11,202	11,288	↑
<b>Reinspections</b>	128	117	↓	903	1,042	↑
<b>Downgrades</b>	108	117	↑	803	961	↑
<b>Closures</b>	5	6	↑	107	79	↓
<b>Special Events</b>	46	81	↑	362	553	↑
<b>Temporary Food Establishments &amp; Tasting Event Booths</b>	255	491	↑	2,839	3,836	↑
<b>TOTALS</b>	<b>1,849</b>	<b>1,970</b>	<b>↑</b>	<b>16,216</b>	<b>17,759</b>	<b>↑</b>

### 1. Enforcement Actions and Investigations:

- A. **Olivo Taco, 2025 E. Sahara Ave.:** On December 8, the facility was closed for an Imminent Health Hazard (IHH), sewage or liquid waste not disposed of in an approved manner. The inspector documented 14 demerits. Other violations included: multiple unlabeled, in-use chemical spray bottles; multiple items stored in the basin of the only hand sink during active food service; and insect screen not in place for main entry door during open food handling. The facility was reinspected and reopened with zero demerits on December 9.
- B. **Waterlicious (Sunset Water Store), 1004 W. Sunset Rd.:** On December 14, the facility was closed for an unapproved change of permit holder (CPH)/operating without a valid health permit. Other violations included: three-compartment sink faucet severely corroded with calcium buildup and unable to reach all three

compartments; hot water handle corroded and unable to turn on; water profusely leaking due to improper attachment of piping; hand sink not properly stocked with soap and disposable paper towels; and no backflow prevention device installed. The inspector documented 14 demerits. Per Plan Review staff, the operator was given permission to open and operate the next day while processing the CPH.

- C. Carnitas Don Claudio Portable Unit for the Service of Food (PUSF), 3020 E. Bonanza Rd.:** On December 15, the unit was closed for an IHH, liquid waste not disposed of in an approved manner. Other violations included: water at hand sink and three-compartment sink at 56°F; water heater not turned on; time/temperature control for safety (TCS) food in the temperature danger zone; liquid petroleum system not maintained to meet local Fire Department standards and other applicable laws; cooking under hood when hood is turned off; employee food intermingled with food for customers; and complete absence of sanitizer solution in open food areas during active food preparation. The inspector documented 27 demerits. The unit was reinspected and reopened with zero demerits on December 21.
- D. Southern Express Soul Food, 2810 S. Maryland Pkwy.:** On December 27, the facility was closed for failure to meet a 48-hour compliance schedule deadline for hot water repairs. After the necessary repairs were made, the facility was reopened on December 28.
- E. Fogo de Chao, 360 E. Flamingo Rd.:** On December 28, inspectors responded to a complaint and closed the facility for an IHH, no hot water. The inspectors documented 22 demerits. Other violations included: expired foods; foods exposed to possible contamination; and a hand sink not functioning properly. The facility was reinspected and reopened with six demerits on December 29.
- F.** Staff closed 11 unpermitted food vending complaint investigations.
- 2. Food Safety Assessment Meetings (FSAMs):**

  - A.** An FSAM was held with the following facility: Luvbeth's Catering PUSF, 3755 W. Hacienda Ave.
- 3. Foodborne Illness Investigations:**

  - A. 888 Korean BBQ, 4215 Spring Mountain Rd. – Investigation Update:** An unopened box of oysters was sampled, and lab tested at the request of the State with support from the Centers of Disease Control and Prevention (CDC) and Food and Drug Administration (FDA). The oysters tested positive for norovirus and were contaminated before reaching the restaurant. The manufacturer instituted a recall and all remaining product at the restaurant and supplier was discarded. No further illnesses have been reported.
  - B. Hachi, 3410 S. Jones Blvd. – Investigation Update:** Unopened packages of enoki mushrooms were sampled from the supplier and lab tested at the request of the State with support from the CDC and FDA. The mushrooms tested positive for listeria and were contaminated before reaching the restaurant. The manufacturer recalled the mushrooms, and all remaining product was discarded. No further illnesses have been reported
- 4. Onsite Intervention Training:**

  - A.** Onsite Intervention Training was held with the following facilities: Mr. Chopstix, 6135 S. Fort Apache Rd.; New China Cuisine Restaurant, 5515 Camino Al Norte; Top Dogg BBQ Smokehouse, 4955 E. Craig Rd.; Sinaloa Tacos #3 PUSF, 2218 E. Cheyenne Ave.; and The Smashed Pig, 509 Fremont St.

## II. SOLID WASTE AND COMPLIANCE PROGRAMS

### ENVIRONMENTAL HEALTH Solid Waste Management Authority (SWMA) Illegal Dumping Complaints and Hearing Officer Process – Fiscal Year Data

Illegal Dumping and Hearing Officer Process	Dec. 2021	Dec. 2022		FY 21-22	FY 22-23	
Notices of Violations (New & Remails)	15	12	↓	53	31	↓
Adjudicated Hearing Cases	10	6	↓	37	20	↓
Total Cases Received	58	79	↑	555	477	↓
Total Cases Referred to Other Agencies	16	16	→	118	117	↓
Hearing Penalties Assessed	\$6,000	\$14,250	↑	\$57,700	\$45,750	↓

### ENVIRONMENTAL HEALTH Restricted Waste Management – Fiscal Year Data

Restricted Waste Management	Dec. 2021	Dec. 2022		FY 21-22	FY 22-23	
Inspections	197	187	↓	1,535	1,412	↓

### ENVIRONMENTAL HEALTH Underground Storage Tanks (UST) Full Compliance Inspections – Fiscal Year Data

Underground Storage Tanks	Dec. 2021	Dec. 2022		FY 21-22	FY 22-23	
Compliance Inspections	3	0	↓	21	13	↓
Final Installation/Upgrade/Repair Inspections	1	3	↑	7	5	↓
Closure Inspections	0	1	↑	7	5	↓
Spill Report Investigations	0	0	→	0	0	→

### ENVIRONMENTAL HEALTH Permitted Disposal Facilities (PDF) Inspections – Fiscal Year Data

Permitted Disposal Facilities	Dec. 2021	Dec. 2022		FY 21-22	FY 22-23	
Inspections	19	15	↓	119	124	↑
Reinspections	2	2	→	14	18	↑

#### 1. Solid Waste Plan Review Program (SWPR):

- A. **Permits Issued** – APEX Materials – Cape Horn (Recycling); Clean Harbors (Waste Grease); and Western Automotive Cores (Recycling)
- B. **Landfills** – Apex Regional Landfill; Boulder City Landfill; Laughlin Landfill; Nellis Air Force Base (Post Closure Monitoring); Timet; Sunrise Mountain (Post Closure Monitoring); and Wells Cargo
- C. **Facility Applications Being Processed** – Recycling Centers (5) and Waste Grease (2)
- D. **Facilities Planned for Approval at DBOH Meetings/SNHD Workshops in**

January: None

**ENVIRONMENTAL HEALTH Asbestos Permitting Services – Fiscal Year Data**

Asbestos Permitting Services	Dec. 2021	Dec. 2022		FY 21-22	FY 22-23	
Asbestos Permits Issued	51	67	↑	439	517	↑
Revised Asbestos Permits Issued	5	11	↑	43	74	↑

**ENVIRONMENTAL HEALTH Subdivision Program – Fiscal Year Data**

Subdivision Plan Review	Dec. 2021	Dec. 2022		FY 21-22	FY 22-23	
Tentative Maps-Received	22	13	↓	120	90	↓
Tentative Maps-Lot Count	1,429	1,367	↓	9,612	6,311	↓
Final Maps-Received	36	17	↓	177	131	↓
Final Maps-Lot Count	1,705	754	↓	10,007	6,248	↓
Final Maps-Signed	202	9	↓	122	130	↑
Final Maps (Signed)-Lot Count	835	434	↓	5,931	6,304	↑
Improvement Plans-Received	28	16	↓	168	121	↓
Improvement Plans-Lot Count	1,568	912	↓	9,672	6,609	↓
Expedited Improvement Plans-Received	0	0	→	0	0	→
Expedited Improvement Plans-Lot Count	0	0	→	0	0	→

**ENVIRONMENTAL HEALTH Individual Sewage Disposal System (ISDS) Program – Fiscal Year Data**

Individual Sewage Disposal Systems	Dec. 2021	Dec. 2022		FY 21-22	FY 22-23	
Residential ISDS Permits	12	7	↓	61	39	↓
Commercial ISDS Permits	0	2	↑	4	2	↓
Commercial Holding Tank Permits	4	0	↓	10	20	↑
Residential Tenant Improvements	17	25	↑	142	169	↑
Residential Certifications	0	0	→	9	2	↓
Compliance Issues	3	7	↑	33	62	↑

**ENVIRONMENTAL HEALTH Safe Drinking Water Program – Fiscal Year Data**

Safe Drinking Water Program	Dec. 2021	Dec. 2022		FY 21-22	FY 22-23	
Public Water System Sanitary Surveys	12	1	↓	48	33	↓
Public Water System Violations Issued	0	1	↑	10	8	↓
Public Water System Complaints	0	0	→	0	0	→

2. **Safe Drinking Water Activity:**

- A. Five *coliform*-present results were reported from routine monitoring events: City of Henderson (one *coliform*-present result); Red Rock Canyon Visitor Center BLM (three *coliform*-present results); and Trout Canyon Land and Water Users Association (one *coliform*-present result). All original and repeat samples were *Escherichia coli*-absent.
- B. Staff continued to monitor water hauling activities for multiple public water systems (PWSs): Trout Canyon; Laker Plaza; Red Rock Campground; Spring Mountain Youth Camp; and Cowboy Trail Rides.
- C. Staff continued to field and guide complainants regarding water quality issues and water availability within private residence, rental properties, and commercial facilities.
- D. **Blue Diamond Water Coop Inc. (NV0000092):** On December 1, staff counselled the PWS team about duties following an emergency event. The event discussed was caused by a heavy excavator striking and subsequently rupturing a water transmission line between Blue Diamond and Cactus Joes. Staff outlined Tier 1 Public Notification, customer listing, disinfection, and water quality testing efforts. On December 2, the PWS team accomplished the following: repairs of the damaged transmission line and physical delivery of Tier 1 Public Notification to their service area. On December 8, staff checked on the PWS team's recommissioning efforts (disinfection and water quality testing). The PWS team stated that their lead operator was out of town, and PWS staff had been unable to complete disinfection and water quality testing; Tier 1 notification was still in effect. Staff counselled the PWS team about ongoing follow-up with their service area. On December 14, staff talked to the PWS's lead operator. The PWS was still operating under their Tier 1 Public Notification; disinfection and water quality testing had not yet occurred. On December 21, the PWS team accounted for their recommissioning process. Disinfection was completed on December 20, and the first of two consecutive days of *coliform* testing was confirmed. Laboratory results were reported by email from the laboratory on December 28. All results were *coliform*-absent and residual disinfectant levels had normalized (0.8 to 1.15 mg/L free chlorine).
- E. **Red Rock Canyon Visitor Center BLM (NV0005011):** On December 14, staff counselled the PWS team about having a treatment technique trigger. This trigger occurred after having two *coliform*-positive results (three total). The PWS's Level 1 Assessment (self-administered) and corrective actions are required to be reported by January 14, 2023.

**III. VECTOR CONTROL OFFICE**

**ENVIRONMENTAL HEALTH Vector Control and Other EH Services -  
Fiscal Year Data**

<b>Vector Control and Other EH Services</b>	<b>Dec. 2021</b>	<b>Dec. 2022</b>		<b>FY 21-22</b>	<b>FY 22-23</b>	
<b>West Nile Virus Surveillance Traps Set</b>	0	1	↑	1,571	1,722	↑
<b>West Nile Virus Surveillance Mosquitoes Tested</b>	2,231	1	↓	18,250	28,845	↑
<b>West Nile Virus Surveillance Submission Pools Tested</b>	158	1	↓	1,337	2,132	↑
<b>West Nile Virus Surveillance Positive Mosquitoes</b>	0	0	→	42	0	↓
<b>West Nile Virus Surveillance Positive Submission Pools</b>	0	0	→	1	0	↓
<b>Saint Louis Encephalitis Positive Mosquitoes</b>	0	0	→	0	0	→
<b>Saint Louis Encephalitis Positive Submission Pools</b>	0	0	→	0	0	→
<b>Western Equine Encephalitis Positive Mosquitoes</b>	0	0	→	0	0	→
<b>Western Equine Encephalitis Positive Pools</b>	0	0	→	0	0	→
<b>Mosquito Activity Complaints</b>	0	0	→	20	73	↑
<b>Elevated Blood Level Home Investigations</b>	0	0	→	1	2	↑
<b>Legionella Residential Investigations</b>	0	1	↑	4	9	↑
<b>Legionella Travel Associated Investigations</b>	1	9	↑	7	12	↑
<b>Public Accommodations Inspections</b>	44	18	↓	184	200	↑
<b>Public Accommodations SB4 Inspections</b>	99	46	↓	442	444	↑
<b>Public Accommodations Complaints</b>	10	3	↓	93	65	↓
<b>Mobile Home/Recreational Vehicle Park Inspections</b>	1	4	↑	13	29	↑
<b>Mobile Home/Recreational Vehicle Park Complaints</b>	1	1	→	8	11	↑

**IV. SPECIAL PROGRAMS**

**ENVIRONMENTAL HEALTH Special Programs - Fiscal Year Data**

Special Programs	Dec. 2021	Dec. 2022		FY 21-22	FY 22-23	
School Food Facility Inspections	24	11	↓	426	433	↑
School Food Facility Complaints	1	0	↓	2	4	↑
School Facility Inspections	27	8	↓	506	511	↑
School Facility Complaints	2	2	→	32	16	↓
Summer Food Service Surveys	9	0	↓	40	57	↑
Child Care Facility Inspections	50	3	↓	223	121	↓
Child Care Facility Complaints	3	6	↑	10	15	↑
Body Art Facility Inspections	69	53	↓	251	212	↓
Body Art Facility Complaints	1	4	↑	5	29	↑
Body Art Artist Special Event Inspections	0	2	↑	10	171	↑
<b>Total Program Services Completed</b>	<b>202</b>	<b>89</b>	<b>↓</b>	<b>1,505</b>	<b>1,569</b>	<b>↑</b>

**1. Schools:**

**A. Mack Middle School, 4250 Karen Ave.:** Staff investigated a complaint alleging that the restrooms were inoperable with nonfunctioning faucets and overflowing toilets that created a bad sewage smell in the cafeteria. School administration reported that they have not had any issues with toilets flooding and that the sinks were operational; however, vandalism by the students causes the sinks to flood the counter tops. Staff observed that the toilets and faucets were working as required without overflowing. The sewer smell had been investigated by staff following a complaint in November. There is sometimes a sewer smell in the cafeteria on Monday after the pipes have dried out over the weekend. The smell occurs in the cafeteria restrooms and custodian closet but goes away once the toilets start getting used. The school will be going through a modernization soon that will include improving the sewer system. Staff detected a slight sewer odor inside the custodial closet near the mop sink. No smell was detected outside the closet. The complaint was not substantiated at the time of the investigation.

**2. Child Care:**

**A. Kids R Us Academy, 2760 S. Jones Blvd.:** Staff investigated a complaint alleging that the facility had a cockroach infestation. Staff found no evidence of infestation and the facility was receiving monthly pest control as required by regulation. The complaint was not substantiated at the time of the investigation.

**B. Imagination Station Early Learning Center, 4185 Vegas Valley Dr.:** Staff investigated a complaint alleging that unsanitary practices were occurring. The classrooms were clean, and the infant room was supplied with booties to prevent contamination from outside areas. Facility staff were able to demonstrate and explain disinfecting and sanitation procedures for various activities and appropriate products were being used for sanitizing and disinfecting. The complaint was not substantiated at the time of the investigation.

**3. Body Art:**

**A. Top Cat Tattoo Club, 1056 S. Main St.:** Staff investigated a complaint alleging that the facility was causing infections in tattoo patrons and was operating without a valid

health permit. Staff surveyed the facility and found tattoo stations fully stocked with equipment and supplies, as well as a feline pet. A representative of the business reported that the business had been open for approximately two months after moving from a previous permitted location. The business representative was informed that the shop did not have a valid health permit and could not transfer the permit from its previous location. A Cease and Desist Order for all body art activities was issued and the representative was instructed to contact Plan Review to apply for a permit.

**V. PLAN REVIEW PROGRAM**

**ENVIRONMENTAL HEALTH Plan Review Program - Fiscal Year Data**

Food Pre-Permitting Services	Dec. 2021	Dec. 2022		FY 21-22	FY 22-23	
<b>Food Safety Assessment Meetings</b>	0	3	↑	3	5	↑
<b>Total Pre-Permitting Services</b>	1,272	821	↓	7,898	7,448	↓
<b>New Project Submissions</b>	161	208	↑	1,643	1,647	↑
<b>Released Projects</b>	300	227	↓	1,856	1,578	↓
<b>Total Service Requests Currently in Pre-Permitting</b>	1,176	1,479	↑			

**1. Enforcement Actions and Investigations:**

- A. Top Sushi and Oyster 2, 9830 S. Las Vegas Blvd.:** A final permitting inspection was conducted but the facility did not have a Certificate of Occupancy (CO) from the Building Department or verification that the drinking water was disinfected after construction. Additionally, the floor plan was different than the approved plan. Food establishments that undergo construction must have approval from the Building Department to occupy the space before receiving health permit approval. When new plumbing supply lines are installed, SNHD Regulations require testing to verify the absence of harmful bacteria in the drinking water. The permit is pending receipt of the CO, water testing results, and an updated floor plan.
- B. Allen Brothers, 6560 S. Tioga Way:** Staff conducted a CPH inspection of a meat processing warehouse where meat is cut, portioned, and packaged for local facilities. The concrete floor was not smooth and easily cleanable. Throughout the facility, the floor was crumbling around the trough drains and exhibited cracks, divots, exposed aggregate, and pooled water. The applicant agreed to resurface or replace the flooring within six months and will notify SNHD when the work is scheduled. The permit was approved with stipulations.
- C. Happyfastdelicious, 2625 S. Decatur Blvd.:** Staff found the following violations at a final permitting inspection: the tile floor was improperly repaired; caulking at the three-compartment sink and hand sink was in disrepair; a light bulb was out and missing a shield in the hood; there was a gap between the hood filters; and there was a storage unit from the previous owner that was left outside by the back door. SNHD Regulations require floors to be smooth and easily cleanable, seams must be sealed, light bulbs must be shielded and operable, and hood filters must be tight-fitting. The applicant agreed to make repairs, and the permit was approved with stipulations.



- D. Memaw's Gumbo, 1725 E. Warm Springs Rd.:** During a CPH inspection, staff found several maintenance items requiring correction including: soiled restrooms and ware washing areas; holes in walls; chipped floors; lights with no protective shields; and storage of unused equipment. SNHD Regulations require that floors and walls be smooth and easily cleanable, lights above open food preparation areas must be shielded or shatterproof, and the facility must be maintained in a clean condition. The permit was approved with a stipulation to correct the maintenance issues within 10 days.
- E. Pollo Campero, 4521 E. Charleston Blvd.:** A CPH inspection failed due to excessive demerits. Violations included improper handwashing; hand sinks with no hot water; unlabeled chemicals; sanitizer solution too strong; soiled dishes stored as clean; gaps at exterior doors that could allow pest entry; inaccurate thermometers; and inadequate refrigeration. SNHD Regulations require food handlers to scrub their hands for at least 15 seconds under warm running water, chemicals must be labeled and used at the proper strength, dishes must be washed thoroughly, doors to the exterior must be pest-proof, and refrigeration must hold food at 41° or below. An FSAM was conducted to ensure that the person-in-charge (PIC) had adequate food safety knowledge. After all critical and major violations were corrected, a second final permitting inspection was approved.

## VI. AQUATIC HEALTH PROGRAM

### ENVIRONMENTAL HEALTH Aquatic Health Operations Program - Fiscal Year Data

Aquatic Health Operations	Dec. 2021	Dec. 2022		FY 21-22	FY 22-23	
<b>Total Operation Inspections</b>	261	262	↑	3,085	3,574	↑
<b>Complaint Investigations</b>	3	11	↑	108	132	↑
<b>Inactive Body of Water Surveys</b>	10	3	↓	45	57	↑
<b>Drowning/Near Drowning/Accident Investigations at Permitted Facilities</b>	1	0	↓	19	27	↑
<b>Total Program Services Completed</b>	265	276	↑	3,257	3,790	↑

#### 1. Aquatic Health Operations

- A. La Serena at the Heights NW Spa, 2951 Siena Heights Dr.:** Routine inspections were conducted for the pool and spa and the spa was closed. The chlorine level was high in the spa, above 30 parts per million (ppm). Failure to maintain proper chemical concentrations is a health hazard to bathers. Also, the south gate was not self-latching which could allow the entry of unsupervised children. All IHHs were corrected at the reinspection and the spa was reopened.
- B. Santiago Estate, 4650 Carey Ave.:** A routine inspection of the seasonally closed pool resulted in the assignment of two compliance schedules. A section of the barrier was missing a screw, which compromised the strength of the barrier making it easier for a person to gain access. The circulation pump had been replaced without the required remodel submission. A remodel protects bather health by ensuring changed equipment will maintain proper turnover times, flow rates, filtration, and disinfection for the system. Venue management has provided proof of the repaired barrier and the remodel application is still pending submission.

- C. Tides On Hacienda, 5272 Tamarus St.:** A survey to evaluate the backflow prevention device resulted in an IHH closure for a gap in the barrier exceeding seven inches. Failure to maintain the barrier to prevent unauthorized access increases the risk of near drowning/drowning incidents. A plywood board was temporarily installed by onsite maintenance to eliminate the risk. A reinspection is pending the completion of permanent repairs.
- D. 24 Hour Fitness, 2090 Village Center Cir.:** A complaint investigation was valid due to black and green mold-like substances in the men's locker room area. Mold is an indicator of unsanitary conditions and evidence that required cleaning and disinfecting procedures are not being followed. Property management and the qualified operator (QO) were notified immediately, and maintenance began cleaning and disinfecting the area.
- E. Coronado Palms Condos, 8000 Badura Ave.:** Routine inspections of the pool and spa resulted in an IHH closure of the spa due to chlorine levels being too low and the amount of cyanuric acid being too high. Low disinfectant combined with high cyanuric acid prevent adequate disinfection of the water. The aquatic venue was approved to resume operations following a reinspection the following week.
- F. Treasure Island Hotel and Casino, 3300 S. Las Vegas Blvd.:** Routine inspections were performed and one spa with a bromine level of 0.5 ppm was closed. Bromine disinfectant levels are required to be between 3 and 8 ppm. Lack of disinfectant is an IHH due to the increased likelihood of infectious organisms being spread between bathers. The operator indicated that there had been issues with the automated chemical feed system earlier that week and provided proof that a work order was pending for repairs. The required water chemistry logs showed multiple days with bromine levels below acceptable levels. The QO demonstrated knowledge of the acceptable minimum bromine levels but had not been logging the post-correction bromine levels. The QO was informed that he must log corrected chemical levels. A reinspection was performed to verify completed repairs for the chemical feeder and all chemical levels were within acceptable ranges. The logs indicated that all chemical levels were acceptable for the week between the inspection and reinspection. The spa was allowed to reopen to the public.
- G. MB Delano Bathhouse, 3950 S. Las Vegas Blvd.:** Routine inspections conducted for the women's and men's spas resulted in written compliance schedules. A 30-day compliance schedule was issued for the backflow prevention device. Certified testing is required annually to reduce the risk of contaminating the water supply. A 15-day compliance schedule was issued to submit a remodel application to Plan Review for chemical controller equipment that has been replaced without SNHD approval. Staff is currently awaiting compliance verification.
- H. Ann Losee Village 4, 5485 Ayers Cliff St.:** A routine inspection of the pool resulted in closure for several IHHs. Upon arrival, the entrance gate was not self-closing which could allow the entry of unsupervised children; no functional piece of safety equipment was present within the enclosure; and chlorine levels were too low. Without safety equipment, the aquatic facility cannot ensure public safety by preventing potential drownings and low chlorine levels can lead to the spread of disease. Management and the QO were notified. A reinspection is still pending.

**ENVIRONMENTAL HEALTH Aquatic Health Plan Review  
Program - Fiscal Year Data**

Aquatic Health Plan Review	Dec. 2021	Dec. 2022		FY 21-22	FY 22-23	
<b>Total Pre-Permitting Services</b>	449	518	↑	3,520	3,401	↓
<b>New Project Submissions</b>	82	88	↑	358	480	↑
<b>Released Projects</b>	36	44	↑	370	509	↑
<b>Total Projects Currently in Plan Review</b>	346	446	↑			

**2. Aquatic Health Plan Review:**

- A. Tropical Vista, 6100 Schmidt St.:** Pre-plaster inspections were conducted and not approved at the pool and wading pool. A portion of the enclosure was less than six feet high, the gate latching hardware had been installed less than 42 inches from the finished grade, hand/footholds were present in the enclosure, and gates were not self-closing and self-latching. SNHD Regulations include specific requirements for barriers and enclosures to reduce the likelihood of unattended children accessing the pool area. Additionally, the handrails and grab rails had not been installed, construction of the hygiene facility was not completed, the filtration equipment was not installed, and equipment room lighting was less than 30-foot candles. Reinspections are still pending.
- B. Fairways at Southern Highlands, 10925 Southern Highlands Pkwy.:** A plumbing inspection for the installation of new suction outlet fitting assemblies (SOFAs) and skimmers was conducted at the spa. The sumps for the SOFAs were compliant and the approved skimmers were onsite but had not yet been installed. The inspection was approved contingent upon the contractor submitting photos of the installed skimmers. When the photos were submitted, staff saw that the deck around the spa had been removed, but that work had not been included in the approved application. The contractor revised the application, and it was approved. A final inspection is still pending.
- C. Deer Springs Apartments, 8850 Echelon Point Dr.:** A resubmitted plan review was conducted and not approved on the Building 1 pool and spa because the design flow was too low for the system, the total dynamic head requirement for the system to operate effectively under both clean and dirty filter conditions was not provided, and the pipe size was too small. The contractor was instructed to make necessary corrections and submit revised plans. Revised plans are still pending.
- D. Luxor Hotel and Casino, 3900 S. Las Vegas Blvd.:** A plumbing inspection was not approved for one of the spas which was undergoing a remodel to replace all SOFAs. The locations of the suction outlets for the hydrotherapy jet and equalizer line had been switched, and the distance between the suction outlets for the filtration system did not meet the required minimum distance of 36 inches. The contractor submitted a revised application with the required corrections and the plumbing inspection was approved. A final inspection is still pending.

**VII. REGULATORY SUPPORT**

- 1. Regulatory Support Office (RSO) staff participated in or performed the following activities and participated in the following external meetings: Conference for Food Protection (CFP) Allergen Committee, CFP Food Safety Management Systems Committee, National Environmental Health Association (NEHA) Food Safety Program Committee, Association of Food and Drug Officials (AFDO) Partnership for Food Protection (PFP)

Training and Credentialing and Review of Survey Competencies meetings, NEHA Leadership Academy mentor meetings; National Association of County and City Health Officials (NACCHO) Mentorship meetings; cohort calls and meetings; Violation Standards Document updates, and standardization workbook updates.

2. RSO staff provided pre-standardization training for 11 staff on December 12.
3. Special Processes staff facilitated the Risk Factor Study Classroom Training for the 2023 Risk Factor Data Collection and conducted field training on December 14 and 16.
4. Special Processes staff began preparing for the 2024 Intervention Strategy with planning meetings and collecting cooling data throughout the month.
5. Special Processes staff began preparing for inspecting facilities that have Hazard and Critical Control Point (HACCP) plans with planning meetings and reviewing facility files.
6. Special Processes staff met with various operators, in a virtual setting via phone calls and WebEx meetings, regarding submission of labels for review, waivers, operational plans, and HACCP plans. There are currently seven cook chill/sous vide plans, six 2-barrier plans, 16 other HACCP plans, 10 waivers, and one operational plan in review.

### VIII. SPECIAL PROCESSES

#### ENVIRONMENTAL HEALTH Label Review – Fiscal Year Data

Label Review	Dec. 2021	Dec. 2022		FY 21-22	FY 22-23	
Facility Label Review Submissions	21	17	↓	135	125	↓
Facility Label Review Releases	24	14	↓	153	125	↓
Number of Labels Approved	278	162	↓	2,206	1,617	↓

#### ENVIRONMENTAL HEALTH Special Processes Plan Review - Fiscal Year Data

Special Processes Review	Dec. 2021	Dec. 2022		FY 21-22	FY 22-23	
Cook Chill/Sous Vide Submissions	0	0	→	2	2	→
Cook Chill/Sous Vide Releases	0	0	→	3	2	↓
2-Barrier ROP Submissions	0	1	↑	0	6	↑
2-Barrier ROP Releases	0	2	↑	0	7	↑
Other HAACP Special Processes Submissions (Including ROP of fish, unpasteurized durably packaged juice, preservation, curing, etc.)	0	0	→	1	4	↑
Other Special Processes Releases	1	1	→	2	3	↑

**ENVIRONMENTAL HEALTH Special Processes Waivers & Operational Plans Review - Fiscal Year Data**

<b>Waivers &amp; Operational Plans Review</b>	<b>Dec. 2021</b>	<b>Dec. 2022</b>		<b>FY 21-22</b>	<b>FY 22-23</b>	
<b>Waiver Review Submissions</b>	0	1	↑	7	7	→
<b>Waiver Review Releases</b>	0	1	↑	7	8	↑
<b>Operational Plan Submissions</b>	0	0	→	1	1	→
<b>Operational Plan Releases</b>	0	0	→	3	2	↓

CDS/hh