Memorandum

Date: May 23, 2024

To: Southern Nevada District Board of Health

From: **Cassius Lockett, PhD,** *Deputy District Health Officer-Operations*
Fermin Leguen, MD, MPH, *District Health Officer*

Subject: Community Health Division Monthly Activity Report – April 2024

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

A. Chronic Disease Prevention Program (CDPP)

The CDPP staff partnered with 100 Black Men of Las Vegas to sponsor the March virtual kids cooking class. The March recipe featured a diabetes-friendly meal. Sixty families participated in the class. Ingredient bags with diabetes prevention and self-management educational materials were provided to all class participants.

Community Health Workers (CHWs) of CDPP participated in two (2) community outreach events in March - the Neighborhood Housing Services Women's Day event and the Black Family Expo. CHWs provided blood pressure screenings, education, and referral and recruited for Diabetes Self-Management Education & Support (DSMES) classes. In addition, CHWs distributed chronic disease prevention education and resources. The events reached a total of 125 people.

In partnership with the YMCA of Southern Nevada, CDPP started a free 16-week community Blood Pressure Self-Management Program at the Durango YMCA in March. Enrollment is ongoing until the class max enrollment of 25 people is met. In addition to coaching and education, class participants receive a free blood pressure monitor for home use and a 4-month membership to the Y to practice healthy habits.

Our CDPP staff led three (3) tours of a local grocery store in March. Tours were provided in Spanish at Marketon. Participants learned how to read a food label, received tips on how to eat healthy with chronic conditions, and how to shop healthy on a budget. Twelve people, including participants from one of our DSMES classes, participated in the tours.

The CDPP staff provided four (4), in-person DSMES classes (2 English/2 Spanish) in March. Classes were provided at SNHD and offsite at the James Downs Towers Senior Apartments. Thirty-seven people participated in the classes and 84% of participants completed the course.

B. **Tobacco Control Program (TCP)**

The SNHD TCP launched a newly named initiative titled, Play Hard Breathe Easy - Smoke-Free Parks. The project is designed to encourage the adoption of comprehensive tobacco and smoke-free parks policies. Staff will provide technical assistance regarding model policy practices throughout the nation.

Our TCP staff recently updated their English and Spanish-language online smoke-free housing directory to refine the search features. All of the properties (over 60,000) included in the directory have self-reported that they have apartment or condominium buildings where all units within are 100% smoke-free. Smoke-free policies can vary by property and may solely include tobacco products, electronic cigarettes, cannabis, or a combination of these. The TCP provides technical assistance to local communities to help them adopt new or expand their existing smoke-free policies. In March, a media campaign promoting the directory was launched and over 700 smoke-free units were added to the directory.

In March, eighteen local high school sports teams partnered with SNHD's vaping prevention teen initiative, BreakDown, which promotes vape-free lifestyles to student athletes. Additionally, information was shared through a social media campaign tailored for the Nevada Interscholastic Activities Association. Key youth identified in local high schools throughout Southern Nevada continued to share vaping prevention messaging on their social media accounts.

This month, 20 businesses in Clark County implemented and/or expanded their smoke and vape free policy. Locations include food establishments, medical, and shopping facilities. Staff provided technical assistance including model policy language, access to downloadable signage and cessation resources.

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

A. **Education Committee**
The Education Committee assists the OEMSTS, the Medical Advisory Board (MAB), and the QI Directors Committee in researching, developing, editing, and approving new and existing education for initial training and continuing education purposes. Members include volunteer representatives from permitted agencies, receiving hospitals, and individuals involved with the training of EMS professionals.

The Committee continued its discussion of the education outlines for the Hyperkalemia, Push Dose Pressors, Bradycardia and Adult/Pediatric Overdose protocols.

B. **Drug/Device/Protocol Committee (DDP)**
   The DDP Committee assists the OEMSTS, the Medical Advisory Board (MAB), and the QI Directors Committee in researching, developing, and editing new and existing protocols. Members include volunteer representatives from permitted agencies, receiving hospitals, and individuals involved with the training of EMS professionals.

   DDP continued working on proposed revisions to the Clark County EMS Emergency Medical Care Protocols.

C. **Medical Advisory Board (MAB)**
   The primary mission of the MAB is to support the Health Officer's role to ensure quality patient care within the EMS system by making recommendations and assisting in the ongoing design, operation, and evaluation of the EMS system from initial patient access to definitive patient care. The members include: 1) One medical director of each firefighting/franchised agency; 2) One operational director of each firefighting/franchised agency; 3) Chairman of the Regional Trauma Advisory Board; and 4) An employee of the District whose duties relate to the administration and enforcement of EMS Regulations as an ex-officio member.

   MAB heard sub-committee reports from the Education and Drug/Device/Protocol committees.

D. **Regional Trauma Advisory Board (RTAB)**
   RTAB is an advisory board with the primary purpose of supporting the Health Officer's role to ensure a high-quality system of patient care for the victims of trauma within Clark County and the surrounding areas. The RTAB makes recommendations, and assists in the ongoing design, operation, and evaluation of the system from initial patient access to definitive patient care.

   RTAB reviewed the 4th Quarter 2023 trauma transport data, conducted the election of new Non-Standing Members, and discussed the application from Sunrise Hospital to upgrade from a Level II to a Level I Trauma Center.

E. **Clark County Trauma Transport Data (01/01/2023 to 12/31/2023)**

Total Transports	Step 1	Step 2	Step 3	Step 4	Discharged	Admitted	OR	ICU	Death	Transfer
14,674	6%	6%	32%	56%	56%	28%	4%	9%	1%	1%

Out of Area (OOA) Transports	
1,159	8%

Prepared by the Office of Emergency Medical Services & Trauma System and Office of Informatics

Notes:

1. Out of Area Transports does not include non-trauma hospitals.
2. Out of Area defines compliance with EMS catchment zones. All EMS transports are protocol identified trauma patients delivered to a trauma center outside of their designated catchment zone.
3. Out of Area review threshold is 5% as was established by the Regional Trauma Advisory Board (RTAB). All data is reviewed by the RTAB on a quarterly basis.

F. OEMSTS – April 2023 / 2024 Data

EMS Statistics	April 2023	April 2024	
Total certificates issued	88	79	↓
New licenses issued	36	52	↑
Renewal licenses issued (recert only)	0	0	=
Driver Only	32	36	↑
Active Certifications: EMT	859	876	↑
Active Certifications: Advanced EMT	1689	1836	↑
Active Certifications: Paramedic	1930	2034	↑
Active Certifications: RN	68	72	↑

III.   OFFICE OF PUBLIC HEALTH PREPAREDNESS (OPHP)

A. Planning and Preparedness

1. Continuance of drafting the Shelter Support Annex and Administrative Preparedness Annex.
2. Planners continue to review and revise the CHEMPACK, Nuclear and Radiation, Administrative Preparedness, Mass Care Support, and Highly Infectious Disease plans. Met with Human Resources to discuss staffing and activation triggers for preparedness annex.
3. Planner updates to Threat Response Guides (TRGs) for Anthrax, Plague, Tularemia, Botulism, and Viral Hemorrhagic Fever (VHF). The VHF TRG was sent to subject matter experts within the District for review. All TRGs will have a Public Information and Warning component added to complete PHEP grant requirement.
4. Assistance provided to revisions of COVID-19 AAR.
5. Planners continue to update Nevada Continuity tool in order to streamline the process of generating a usable Continuity of Operations Plan (COOP).
6. Senior Planner and Planner I continue to transition closed POD program management to Planner I. Coordinating the setup of the Closed POD Working Group with the LVCVA and Boyd Gaming as Co-Chairs.
7. Fourteen SNHD employees were fit tested for personal protective equipment.
8. OPHP staff are participating in the various working groups to develop the state DPBH Strategic Plan.
9. Senior Planner conducted the Jurisdictional Risk Assessment for southern Nevada.
10. Planner I participated in EOP review for Faith Lutheran Jr./Sr. High School.

11. Planner I participated in State of Nevada Department of Education EOP Working Group.
12. Planner I coordinated automation of emergency notification system updates with IT and Human Resources.
13. Received and processed requests for HPP grant funding of emergency response equipment (City of NLV FD, Mountain View Hospital, Summerlin Hospital).
14. Senior Planner continued to review *Aedes aegypti* Invasive Mosquito Plan and Community Reception Center Plan.
15. Planner I reviewed updates to notification annex and began planning automated upload of employee data into call down system.
16. Planner I participated in Faith Lutheran Jr./Sr. High School plan review.
17. Planner I continuing to update MCM annex for first responders based on updated personnel counts from community partner agencies.

B. **Training, Exercises and Public Health Workforce Development:**

1. Trainers continue to develop Position Specific Task Books and related training curricula. April training for Logistics Section Chief was postponed until June.
2. Continued work with Clark County and a software developer on an Impacted Persons Database.
3. Extending work on reviewing and revising plans, threat response guides, and planning for exercises coming up in the next few months.
4. Participation in work groups to develop the State Department of Public and Behavioral Health, Public Health Preparedness 5-year Strategic Plan.
5. A New Hire Orientation for Emergency Preparedness and Security is provided every other month and did not occur in April.
6. Trainers conducted the ICS 300 course at Decatur campus April 16th – 18th with thirteen students (including eleven SNHD staff) on the Emergency Personnel List and two community partners.
7. Six (6) SNHD employees participated in CPR Training
8. Planning efforts are being coordinated for the upcoming recovery workshop.
9. Trainers provided ICS 300 training to community partners at the Clark County MACC on April 2nd - 4th.
10. Senior Planner and Planner I continue to coordinate with Environmental Health, SNPHL, and EPA on exercise development for the EPA Water Laboratory Alliance Advanced Practice full scale exercise.
11. COOP tool training has been provided by Planners to Managers, Supervisors, and those delegated to update each Division, Department and Program at the SNHD.
12. Planner I continued to plan for May 9th SNHD COOP tabletop exercise.
13. Planner I applied for NACCHO MCM Working Group.

C. **Southern Nevada Healthcare Preparedness Coalition (SNHPC)**

1. SNHPC Clinical Advisor and OPHP Planner conducted the April 18th Pediatric Surge tabletop and medical response surge exercise for all hospitals.
2. Our PHP continues to coordinate management of upcoming First Receiver Decontamination training with Mtn View Tenaya Hospital on June 26th and UMC Hospitals on August 14th.
3. PHP Trainer continues to promote and manage upcoming TEEX Pediatric Disaster Response & Emergency Preparedness course May 7th - 8th, 2024.
4. Trainer coordinating return of the following courses to Las Vegas; TEEX Medical Preparedness & Response to Bombing Incidents, TEEX Medical Management of CBRNE Events and Radiological Training for Hospital Personnel in September.
5. Senior PHP Planner, Clinical Advisor, Trainer, and Planner 1 conducted the Medical Response Surge Exercise on April 18th.
6. Our Senior Planner, Clinical Advisor, Trainer, and Planner I conducted the Redundant Communications Drill on April 18th.

D. **Fusion Center Public Health Analyst:**

1. Currently recruiting for a new Public Health Analyst.

E. **Grants and Administration:**

1. OPHP received carryover subawards for PHEP and CRI grants and an amendment to the current CRI budget.
2. OPHP submitted the Scopes of Work for budget period 1 for the new PHEP/CRI cooperative agreement which begins on July 1st.
3. Continuing recruitment a Public Health Fusion Center Analyst.
4. Yet recruiting for Senior Public Health Preparedness Planner.

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

1. MRC Coordinator planned training and activities for upcoming months, sent out newsletters, and continues to recruit and deactivate volunteers.
2. MRC Coordinator attended monthly NACCHO MRC Workgroup meeting & SNHPC meetings and participated in the Waterpark Frenzy exercise.
3. Two MRC Volunteers provided blood pressure screening at Power of the Word Ministry April 13th.
4. Two (2) MRC Volunteers provided a first aid station at the annual Walk MS event April 6th.
5. Three (3) MRC Volunteers provided first aid at the UNLV Native American Alumni's Powwow for the Planet on April 19th - 20th.

6. Three (3) MRC Volunteers assisted North Las Vegas police by role playing in their Tactical Emergency Casualty Care course on three dates.
7. MRC provided two (2) in-person training sessions: Psychological First Aid and Cultural Competence. These were offered to MRC Volunteers, some SNHD staff, and CERT Volunteers.

MRC Volunteer Hours FY2024 43

(Economic impact rates updated April 2024):

Activity	April	May	June
Training	104	0	0
Community Event	42	0	0
SNHD Clinic	0	0	0
Total Hours	**146**	**0**	
Economic impact	**$5,864.29**	**0**	**0**

IV.   VITAL RECORDS

A. April 2024 is currently showing a 7% increase in birth certificate sales in comparison to April 2023. Death certificate sales currently showing an 15% decrease in comparison to April 2023. SNHD received revenues of $ 33,631 for birth registrations, $25,506 for death registrations; and an additional $8,400 in miscellaneous fees.

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

Vital Statistics Services	Apr 2023	Apr 2024		FY 22-23 (Apr)	FY 23-24 (Apr)	
Births Registered	1,672	1,864	↑	20,120	20,012	↓
Deaths Registered	1,633	1,949	↑	17,733	17,727	↓
Fetal Deaths Registered	19	17	↓	166	173	↑

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

Vital Statistics Services	Apr 2023	Apr 2024		FY 22-23 (Apr)	FY 23-24 (Apr)	
Birth Certificates Sold (walk-in)	2	22	↑	328	524	↑
Birth Certificates Mail	140	121	↓	1,231	1,266	↑
Birth Certificates Online Orders	3,391	3,543	↑	37,128	35,381	↓
Birth Certificates Billed	47	147	↑	1,070	1,145	↑
Birth Certificates Number of Total Sales	3,580	3,833	↑	39,757	38,316	↓

Death Certificates Sold (walk-in)	22	31	↑	171	346	↑
Death Certificates Mail	188	185	↓	1,661	1,516	↓
Death Certificates Online Orders	7,271	8,409	↑	81,173	76,915	↓
Death Certificates Billed	39	48	↑	352	370	↑
Death Certificates Number of Total Sales	7,520	8,673	↑	83,357	79,147	↓

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

Vital Statistics Sales by Source	Apr 2023	Apr 2024		FY 22-23 (Apr)	FY 23-24 (Apr)	
Birth Certificates Sold Valley View (walk-in)	.1%	.6%	↑	.8%	1.4%	↑
Birth Certificates Mail	3.9%	3.2%	↓	3.1%	3.3%	↑
Birth Certificates Online Orders	94.7%	92.4%	↓	93.4%	92.3%	↓
Birth Certificates Billed	1.3%	3.8%	↑	2.7%	3%	↑
Death Certificates Sold Valley View (walk-in)	.3%	.4%	↑	.2%	.4%	↑
Death Certificates Mail	2.5%	2.1%	↓	2%	1.9%	↓
Death Certificates Online Orders	96.7%	97%	↑	97.4%	97.2%	↓
Death Certificates Billed	.5%	.6%	↑	.4%	.5%	↑

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

Revenue	Apr 2023	Apr 2024		FY 22-23 (Apr)	FY 23-24 (Apr)	
Birth Certificates ($25)	$89,500	$95,825	↑	$993,925	$957,900	↓
Death Certificates ($25)	$188,000	$216,825	↑	$2,083,925	$1,978,675	↓
Births Registrations ($13)	$32,578	$33,631	↑	$369,759	$331,721	↓
Deaths Registrations ($13)	$21,801	$25,506	↑	$232,284	$228,774	↓
Convenience Fee ($2)	$7,264	$7,822	↑	$79,698	$65,348	↓
Miscellaneous Admin	$971	$578	↓	$6,885	$6,458	↓
Total Vital Records Revenue	$340,114	$380,187	↑	$3,766,476	$3,568,876	↓

COMMUNITY HEALTH Passport Program – Fiscal Year Data

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

Applications	Apr 2023	Apr 2024		FY 22-23 (Apr)	FY 23-24 (Apr)	
Passport Applications	827	759	↓	7,743	6,589	↓

Revenue	Apr 2023	Apr 2024		FY 22-23 (Apr)	FY 23-24 (Apr)	
Passport Execution/Acceptance fee ($35)	$28,945	$26,565	↓	$271,005	$230,615	↓

V.   HEALTH EQUITY

A. The Health Equity program received a No Cost Extension from the Center for Disease Control to build, leverage, and expand infrastructure support for COVD prevention and control among populations that are at higher risk and underserved.

   1. The program continues to collaborate with SNHD programs and grant subrecipients to plan and coordinate COVD community strategies and events.

B. The Health Equity Program works towards reducing health disparities through increasing organizational capacity and implementing community strategies.

   1. During this reporting period, the Health Equity program conducted organizational and community trainings, covering Implicit Bias, Health Equity 101, Cultural Competence and Diabetes.

C. The Health Equity Program works towards establishing community partnerships and collaborations to increase the capacity of communities to address health disparities.
   1. The program continues to collaborate: Al Maun and Golden Rainbow to increase the capacity of the community to address health disparities through their diabetes prevention and Management program and a food distribution program to address food insecurities.

VI.   SOUTHERN NEVADA PUBLIC HEALTH LABORATORY (SNPHL)

A. Clinical Testing:

   1. The SNHD Nursing Division: molecular and microbiology culture, Sexually Transmitted Disease (STD) testing.

   2. SNHD STD department: the CDC Gonococcal Isolate Surveillance Project (GISP) as well as enhanced Gonococcal Isolate Surveillance Project (eGISP). SNPHL performs NAAT and culture testing of N. gonorrhoeae isolates and submits isolates to a reference laboratory for the determination of antibiotic susceptibility patterns. SNPHL has also joined eGISP Part B to expand culture-independent testing for antimicrobial resistance genes of gonococcal isolates.

3. A total monthly samples tested is listed in the following table:

Test Name	Monthly Count	Avg Year to Date
GC Cultures	41	55
NAAT NG/CT	1281	1208
Syphilis	1004	917
RPR/RPR Titers	175/71	159/76
Hepatitis Total	1333	1130
HIV/differentiated	719/22	653/20
HIV RNA	102	94

4. COVD testing:

- SARS-CoV-2 PCR extraction is currently performed on the KingFisher Flex platform only.
- SNPHL is to maintain the capacity of 2000 tests/day with a turnaround-time of <48 hours (TAT 2Day- currently at / near goal).
- For April, the average daily testing was nine (9) and the average turnaround time was 39 hours for PCR testing from the collection date to the release of the test report.
- IT created easy patient accession and direct report verification from SNPHL LIMS into SNHD patient report portal.
- Incorporate high throughput instruments such as Eppendorf 5073 automation of specimen fluid handling station.
- Molecular laboratory will add Tecan instrument after installing the updated script for the SARS-CoV-2 WGS procedure. The Tecan contract is subject to review by our contract office due to the unresolved problems.

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

Month	# PCR& NAAT/#POS	COVD	# PCR$ NAAT/#POS
January	1,144/148	July	
February	1,160/77	August	
March	680/42	September	
April	204/18	October	
May		November	
June		December	

5. Reportable disease reports:

    - SNPHL continues to perform routine testing of reportable disease specimens submitted by community stakeholders. Isolates tested are reported to OEDS on a weekly basis to aid in disease investigation, and SNPHL and OEDS coordinate with CDC PulseNet if required.
    - A monthly summary of reportable diseases tests is listed as follows:

		Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec	Total
Campylobacter	Campy ID	5	5	2	6									16
	Campy Screen	11	17	3	15									46
Neisseria species	Gonorrhoeae Culture	48	85	47	41									221
	Gram Stain/WBC	0	0	0	0									5
	Neisseria ID	0	0	0	0									0
	Haemophilus ID	7	0	2	1									10
Unknown ID	Bacterial ID	0	0	0	0									0
	WGS (PulseNet)	27	24	16	30									97
Salmonella	Salmonella Screen	14	10	12	19									55
	Salmonella Serotype	13	10	12	16									51
Shigella	Shigella Screen	10	10	4	10									34
	Shigella Serotype	7	10	2	3									22
STEC	STEC Screen	10	2	2	4									18

	STEC Serotype	1	1	1	0								3
Unknown	Stool Culture	5	6	2	0								13
Vibrio	Vibrio ID	0	0	1	0								1
	Vibrio Screen	0	0	1	3								4
Yersinia	Yersinia Culture/ID	1	2	1	0								4

B. Epidemiological Testing and Consultation:

1. SNPHL participates in the SNHD Outbreak Investigation Committee and Foodborne Illness Taskforce. There was one (1) case for GI outbreak investigation in April.
2. SNPHL continues to report results of influenza testing to the CDC National Respiratory and Enteric Virus Surveillance System (NREVSS). In April, SNPHL performed 34 respiratory panels on the BioFire.

C. Emergency response and reportable disease isolate testing report:

1. SNPHL performs reportable disease isolate testing and confirmation. Isolates submitted by local laboratories are serotyped and/or confirmed by Whole Genome Sequencing; stored on-site; and results reported and/or samples submitted to CDC through various national programs; Public Health Laboratory Information System (PHLIS), National Antimicrobial Resistance Monitoring System (NARMS), and Influenza Surveillance, and PulseNet Bacterial Outbreak Surveillance.

2. SNPHL's additional mission is as a member of the CDC Laboratory Response Network (LRN) testing for the identification of potential biological weapons/agents on environmental daily samples within its unique BSL3 environment.

2024	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec
Select Agent Rule out (total PCR)	0	0	1	1								

3. SNPHL is clinically validated for using Whole Genome Sequencing (WGS) for the identification of Campylobacter species (select species), pathogenic Escherichia coli, and Salmonella species. SNPHL is also validated for the determination of Salmonella serotypes and STEC (Shiga toxin-producing E. coli) serotypes and Shiga toxin genes.

4. SNPHL performed 30 Whole Genome Sequencing tests (WGS) as part of PulseNet Foodborne Outbreak Surveillance in April 2024.

5. SNPHL uses Bruker MALDI-TOF instrument for streamlined screening of bacterial isolates. A total # of 165 bacterial organisms have been identified in April.

6. SNPHL is validated for sequencing of SARS-CoV-2 and variants of concern through the identification of lineages and clades.

7. SNPHL has sustained capacity of sequencing many 192 SARS-CoV-2-positive RNA extracts per week with expectations of increasing this capacity with appropriate staffing, instrumentation, and method development. As of April 2024, SNPHL has sequenced 12 SARS-CoV-2-positive RNA extracts.

8. SNPHL is clinically validated for the identification of Campylobacter species (select species), pathogenic Escherichia coli, and Salmonella species. SNPHL is also validated for the determination of Salmonella serotypes and STEC (Shiga toxin-producing E. coli) serotypes and Shiga toxin genes.

9. SNPHL coordinates and participates with Environmental Health and Veritas Labs for Legionella surveillance.

2024	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Legionella	29	6	13	11								

10. SNPHL provides vector testing for Environmental Services, Viral testing for Zika, West Nile, Western Equine Encephalitis, and Saint Louis encephalitis. Our facility hosted a CDC demonstration for the Vector team. In April, we tested a total of 398 mosquito pool samples. There was no positive WNV mosquito pool samples identified in April. Environmental Health released the test result to the public after we informed the test result to them.

11. As part of the Gonococcal Isolation Surveillance Program (GISP) and enhanced GISP (eGISP), in April, a total of 31 clinical isolates, Neisseria gonorrhoeae ten (10) isolates and Neisseria meningitidis one (1) isolate, were collected and will be sent to either the regional laboratory for antimicrobial susceptibility testing (AST) or the CDC, respectively. Remnant NAATs or N. gonorrhoeae samples will be sent to the CDC for molecular-based AST testing as part of eGISP Part B.

D. All-Hazards Preparedness:

1. SNPHL provides / assists testing for SNHD COVD Emergency Incident Response, local community outreach, CCDC jail-detention centers, institutions of higher education, and long-term nursing facilities Rapid-Antigen POC (CDC-EUA: Abbott IDNow; Qiagen Sofia; BD Vector) with outbreak confirmation RT-PCR testing supported by SNPHL.

2. SNPHL provides COVD Biosafety Training/Guidelines to Non-Traditional testing sites.

3. SNPHL coordinates with training/exercises for First Responders including local Civil Support Team, HazMat, Federal Bureau of Investigation, and Las Vegas Metropolitan Police Department.

4. SNPHL provides information to local laboratorians on CDC packaging and shipping infectious substances and the chain of custody procedures.

5. Provided onsite training for COVD online ordering applications for long-term care facilities.

6. Supplied Biosafety Guidance to Sentinel Sites regarding Monkeypox.

7. Furnished Monkeypox and Bivalent COVD Booster vaccination to laboratory staff.

8. Perpetual Biosafety Training and guidance to SNPHL personnel.

E. April 2024 SNPHL Activity Highlights:

1. SNPHL has a stable CDC supply of Viral Transport Medium (VTM) used in COVD collection kits.

2. Passed the proficiency test with CAP CM-A UA with Urine Sed Photos: Urinalysis, CAP AHIV 4/23/2024, and CAP GIP 4/25/2024 BioFire with 100% graded.

3. The clinical health laboratory purchased three (3) instruments for clinical testing to enhance the community health service. SNPHL received the urine analysis and Hematology instruments. The validation for both instruments is being performed right now. The clinical chemistry instrument will be purchased using the FY25 GF budget.

4. The validation report of warrior panel has been completed in the Emergency Response laboratory.

5. According to the WGS and genomic data analysis, the Omicron variant JN.1., lineages are domain lineages are domain lineages in April, from the samples received in the laboratory. Our laboratory will keep sequencing the closed contact samples to help ODS to follow up on the investigation.

6. Identified zero Monkeypox positive test result in April 2024. The Whole Genome sequencing of April Monkeypox Positive samples has been completed. The clade for this case is IIb and the lineage is B.1.20 for three (3) sequencing data analyses.

7. According to the data of influenza surveillance in this flu season, the A/H3 and A/H1 are major subtypes of influenza and the percentage of ratio between three (3) subtypes are 53%, 20%, and 26%, respectively.

8.   SNPHL participates in the CDC Avian Flu surveillance project by sending the testing guidance and specimen collection procedure to the local hospitals through HAN system. Any ICU patient with influenza A positive must send the specimen to our laboratory to do influenza subtyping in order to rule out avian influenza.

9.   SNPHL has validated the RSV subtyping method using PCR method and will share the data of environmental surveillance with CDC.

10. The document of the Shell and Core Basis of Design has been signed by Chief of Facilities Officer and Laboratory Director. The total number of SF for the new lab will be 12,600sf.

F.   **COMMUNITY HEALTH – SNPHL – Calendar Year Data**

April SNPHL Services	2023	2024	
Clinical Testing Services [1]	4,380	5,542	↑
Epidemiology Services [2]	1,601	540	↓
State Branch Public Health Laboratory Services[3]	4,310	0	↓
All-Hazards Preparedness Services [4]	10	5	↓
Environmental Health Services [5]	0	409	↑

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

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

[3]   Includes COVD PCR, WGS, and LRN testing, proficiency samples, reporting to CDC, courier services, infectious substance shipments, teleconferences, training, presentations and inspections, samples submitted to CDC or other laboratories' submissions.

[4]   Includes Preparedness training, teleconferences, and Inspections.

[5]   Includes vector testing.