



MINUTES

SOUTHERN NEVADA DISTRICT BOARD OF HEALTH MEETING

August 22, 2024 – 9:00 a.m.

Meeting was conducted In-person and via Microsoft Teams

Southern Nevada Health District, 280 S. Decatur Boulevard, Las Vegas, NV 89107
Red Rock Trail Rooms A and B

- MEMBERS PRESENT:** Marilyn Kirkpatrick, Chair – Commissioner, Clark County (*in-person*)
Scott Nielson, Vice-Chair – At-Large Member, Gaming (*in-person*)
Nancy Brune, Secretary – Council Member, City of Las Vegas (*in-person*)
Scott Black – Mayor Pro Tem, City of North Las Vegas (*in-person*)
Bobbette Bond – At-Large Member, Regulated Business/Industry (*in-person*)
Joseph Hardy – Mayor, City of Boulder City (*in-person*)
Frank Nemeec – At-Large Member, Physician (*in-person*)
Brian Knudsen – Mayor Pro Tem, City of Las Vegas (*in-person*)
Jim Seebock – Council Member, City of Henderson (*in-person*)
- ABSENT:** Pattie Gallo – Mayor Pro Tem, City of Mesquite
Tick Segerblom – Commissioner, Clark County
- ALSO PRESENT:** Georgi Collins, Kiran Gill, Olivia GrafMank, Maya Holmes, Deborah Kuhls, Brian Labus, Bradley Mayer, Maria McKinney, Francesca Petrucci, Shana Tello, Nicholas Voell-White
(In Audience)
- LEGAL COUNSEL:** Heather Anderson-Fintak, General Counsel
- EXECUTIVE SECRETARY:** Fermin Leguen, MD, MPH, District Health Officer
- STAFF:** Elizabeth Adelman, Emily Anelli, Jacqueline Ayala, Maria Azzarelli, Tawana Bellamy, William Bendik, Haley Blake, Lori Bryan, Daniel Burns, Nikki Burns-Savage, Victoria Burris, Nancy Cadena, Andria Cordovez Mulet, Shea Crippen, Susan Crutchfield, Rebecca Cruz-Nañez, Cherie Custodio, Gerard Custodio, Christian DeHaan, Aaron DelCotto, Lauren DiPrete, Rebecca Drew, Rayleen Earney, Regena Ellis, Kaylina Fleuridas, Jason Frame, Kimberly Franich, Jacques Graham, Sarah Hall, Maria Harris, Raychel Holbert, Carmen Hua, Victoria Hughes, Dan Isler, Danielle Jamerson, Jessica Johnson, Tiana Jones, Horng-Yuan Kan, Matthew Kappel, Theresa Ladd, Dann Limuel Lat, Cassius Lockett, Jocelyn Lopez, Anilkumar Mangla, Marisol Maciel, Chris Elaine Mariano, Elisea Melendez, Samantha Morales, Christian Murua, Semilla Neal, Todd Nicolson, Brian Northam, Verallynn Orewyler, Kyle Parkson, Luann Province, Katarina Pulver, Cheryl Radeloff, Devin Raman, Vivek Raman, D’Mari Reed, Larry Rogers, Alexis Romero, Kim Saner, Aivelhyn Santos, Chris Saxton, Dave Sheehan, Karla Shoup, Jennifer, Sizemore, Randy Smith, Autum Sparlin, Rosanne Sugay, Erik Sumera, Ronique Tatum-Penegar, Candyce Taylor, Will Thompson, Rebecca Topol, Danielle Torres, Shylo Urzi, Lizbeth Vasquez, Jorge Viote, Edward Wynder, Merylyn Yegon, Tearra Yuen, Ying Zhang

I. CALL TO ORDER and ROLL CALL

The Chair called the Southern Nevada District Board of Health Meeting to order at 9:03 a.m. Andria Cordovez Mulet, Executive Assistant, administered the roll call and confirmed quorum. Ms. Cordovez Mulet provided clear and complete instructions for members of the general public to call in to the meeting to provide public comment, including a telephone number and access code.

II. PLEDGE OF ALLEGIANCE

III. OATH OF OFFICE

Ms. Cordovez Mulet administered the Oath of Office to Chair Kirkpatrick, Vice-Chair Nielson and Secretary Brune.

IV. RECOGNITIONS

1. “Immunization Neighborhood” Immunization Champion (National Adult and Influenza Immunization Summit)

- COVID-19 Immunization Staff

The Chair recognized the COVID-19 Immunization Staff for being a National Winner of the “Immunization Neighborhood” Champion at the National Adult and Influenza Immunization Summit. This award recognized the Health District’s efforts in administering the COVID-19 vaccine throughout Clark County to increase access, including the underground tunnels and encampments. On behalf of the Board of Health, the Chair congratulated staff on this recognition.

2. Successful Delivery of Back-to-School Services

- SNHD Immunization Staff

The Chair recognized the Back-to-School vaccination efforts that ran from July 29th to August 15th. The Health District was able to successfully serve our community to ensure that children were ready for the new school year. The Health District’s Immunization staff could not have done this alone – the IZ Clinic and Project, COVID-19 Outreach, Facilities, Communications, IT, MRC, volunteers and many others all helped make this effort a success. On behalf of the Board of Health, the Chair congratulated the entire team on their efforts.

3. Southern Nevada Substance Misuse Overdose Prevention Summit

- Jeffrey Alvarez, Lori Bryan, Belen Campos-Garcia, Rebecca Cruz-Nañez, Brandon Delise, Raychel Holbert, Carmen Hua, Victoria Hughes, Jessica Johnson, Samantha Morales, Marco Mendez, Katarina Pulver, Cheryl Radeloff, Rosanne Sugay

The Southern Nevada Substance Misuse and Overdose Prevention Summit was held on August 1, 2024. The theme of this event was “The Beat of the Community: Exploring the Changing Substance Use Movement”. Over 200 participants, representing numerous agencies attended from across Nevada. Several agencies were a part of the funding and planning of this event including: LVMPD’s LIMA team, Nevada Attorney General’s Office,

There is No Hero in Heroin, The Center, PACT Coalition, Behavioral Health Group, Nevada HIDTA, UNLV School of Public Health, Nevada Institute for Children’s Research and Policy, Trac-B Exchange, and SNHD. On behalf of the Board of Health, the Chair recognized staff who were integral in the planning and execution of this very successful event.

4. Southern Nevada Health District – August Employees of the Month

- Mallory Jones and Prut Udomwattawee

The Chair recognized the Employees of the Month. Each month the Health District, and the Board of Health, recognized those employees that went above and beyond for the Health District and our community and that best represented the Health District’s C.A.R.E.S. Values. On behalf of the Board of Health, the Chair congratulated these exceptional employees.

- V. FIRST PUBLIC COMMENT:** A period devoted to comments by the general public about those items appearing on the agenda. Comments will be limited to five (5) minutes per speaker. Please clearly state your name and address and spell your last name for the record. If any member of the Board wishes to extend the length of a presentation, this may be done by the Chair or the Board by majority vote.

Seeing no one, the Chair closed the First Public Comment period.

VI. ADOPTION OF THE AUGUST 22, 2024 MEETING AGENDA *(for possible action)*

A motion was made by Member Nielson, seconded by Member Black, and carried unanimously to approve the August 22, 2024 Agenda, as presented.

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

1. APPROVE MINUTES/BOARD OF HEALTH MEETING: July 25, 2024 *(for possible action)*

A motion was made by Member Black, seconded by Member Nielson, and carried unanimously to approve the August 22, 2024 Consent Agenda, as presented.

- VIII. PUBLIC HEARING / ACTION:** Members of the public are allowed to speak on Public Hearing / Action items after the Board’s discussion and prior to their vote. Each speaker will be given five (5) minutes to address the Board on the pending topic. No person may yield his or her time to another person. In those situations where large groups of people desire to address the Board on the same matter, the Chair may request that those groups select only one or two speakers from the group to address the Board on behalf of the group. Once the public hearing is closed, no additional public comment will be accepted.

1. Variance Request to install an Incinerator Septic System (ECOJOHN®) in lieu of a Traditional Septic System, and to install the system on an undersized lot located at 2130

Via Vita St., Mt. Charleston, NV 89124; direct staff accordingly or take other action as deemed necessary. *(for possible action)*

Daniel Isler, Environmental Health Engineer Supervisor, presented the variance request to install an Incinerator Septic System (ECOJOHN®) in lieu of a Traditional Septic System, and to install the system on an undersized lot located at 2130 Via Vita St., Mt. Charleston, NV 89124. Mr. Isler advised that the staff recommended denial of Variance Issue #1 – Incinerator System. Should the Board of Health, deny Variance Issue #2, staff recommended approval of Variance Issue #2 – Minimum Lot Size, under the condition that a conventional ISDS with a soil absorption system is installed; providing that all trees located within ten feet from the absorption system are removed; and conditions 1, 2, and 3 outlined in the memorandum. Nicholas Voell-White, the representative for the petitioners, and Maria McKinney, the petitioner, were in attendance.

The Chair opened for Public Comment.

Mr. Voell-White advised that soil testing at the property resulted in mostly rocky and difficult to get the right absorption, as the property had a slope. Mr. Voell-White advised that the property was small, and trees would have to be removed, which the petitioner did not want to remove.

Seeing no one further, the Chair closed the Public Comment.

Member Hardy inquired as to whether odors were an issue with the incinerator and whether the soil on the property was unique rocky soil. Mr. Voell-White advised that there were no issues with odor and that the soil was generally the same as other properties in the area.

Further to an inquiry from Member Hardy, Mr. Isler clarified that the previous application for a variance request from the petitioners was not denied. Mr. Isler stated that that staff requested the soil information on the percolation tests that were not provided and the petitioners elected to submit an application for the incinerator system.

The Chair advised of a new type of septic system that was brought to Moapa Valley was not successful and inquired whether the state had to approve the incinerator system. Mr. Voell-White advised that the incinerator system was approved in other states.

Ms. McKinney advised that they found a representative for the incinerator system that had been approved in Arizona and Utah. Ms. McKinney advised that there was one well for the neighborhood and they would obtain electricity from solar, propane and generators.

Member Black inquired whether the incinerator system was in operation in southern Nevada and whether it would have to be approved by the state. Member Black stated that it appeared that a traditional septic system could be installed with challenges. Mr. Burns advised that the incinerator system was not in operation in Southern Nevada and did not require state approval. Mr. Burns advised that he understood that the purpose of the incinerator system was to maintain the trees on the property. Ms. McKinney advised that she did not want to remove the trees as they were what drew her to the property.

The Chair advised that she was uncomfortable with the new technology; however, was willing to hold the variance request a month to allow for research from other states.

Further to an inquiry from Member Brune on the number of trees that would need to be removed, Ms. McKinney provided the Board with a diagram of the property. Mr. Voell-White advised that approximately 5-10 trees would have to be removed and would not be able to be replanted as the property was small.

Member Hardy indicated that he would be interested to visit to property to see the trees that would have to be removed and that postponing a decision on the variance request was reasonable.

Member Knudsen stated that there had been a number of variance requests regarding septic systems during his time on the Board. Member Knudsen advised that his position would remain consistent to follow staff recommendations.

Member Seebock stated that trees on the property would have to be removed prior to construction of the house. Member Seebock stated that proceeding with a new technology opened potential challenges in the future and he would be in favor of a traditional septic system. Member Seebock indicated proceeding with the incinerator option created a regulatory precedent with many unknowns.

Ms. Anderson-Fintak advised the Board of the option to request staff to perform additional research in other jurisdictions to be presented at the next meeting.

After discussion, the following motion was made:

A motion was made by Member Seebock, seconded by Member Bond, and carried unanimously to deny the Variance Issue #1 related to the Incinerator System, and approve the Variance Issue #2 related to the Minimum Lot Size, located at 2130 Via Vita St., Mt. Charleston, NV 89124 under the condition that a conventional ISDS with a soil absorption system is installed; providing that all trees located within ten feet from the absorption system are removed; and the following conditions:

- 1. Petitioner and their successor(s) in interest shall abide by all local governmental regulations requiring connection to community sewage systems. Use of the ISDS shall be discontinued and the structure it serves shall be connected by any community sewage system constructed in the future to within four hundred (400) feet of the applicant's property line when connection can be made by gravity flow and the owner(s) are notified and legally required to do so.*
- 2. Petitioners and their successor(s) will abide by the operation and maintenance requirements of the most current SNHD Regulations governing individual sewage disposal systems.*
- 3. Permitting of the ISDS must be completed within one year of the date of approval of the variance. If the permit has not been approved within that period, this variance shall automatically expire and be of no further force and effect, unless application is made and approved for an extension of time prior to the expiration date by Petitioners or their successor(s) in interest.*

IX. REPORT / DISCUSSION / ACTION

- 1. Receive, Discuss and Approve the Board of Health Committees and Committee Membership for FY2025;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

The Board of Health was provided with a summary of the Committee Participation Interest Forms received.

A motion was made by Chair Kirkpatrick, seconded by Member Hardy, and carried unanimously to approve the composition of the SNHD Board of Health Committees as follows:

<u>At-Large Member Selection Committee (Term 2024-2026)</u>	<u>DHO Annual Review Committee</u>	<u>DHO Succession & Planning Committee</u>	<u>Finance Committee</u>	<u>Nomination of Officers Committee</u>
Scott Black Pattie Gallo Joseph Hardy Marilyn Kirkpatrick Frank Nemec	Scott Black Nancy Brune Joseph Hardy Marilyn Kirkpatrick Jim Seebock	Scott Black Nancy Brune Pattie Gallo Marilyn Kirkpatrick Frank Nemec	Scott Black Bobbette Bond Nancy Brune Marilyn Kirkpatrick Scott Nielson Jim Seebock	Scott Black Bobbette Bond Nancy Brune Marilyn Kirkpatrick Frank Nemec

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

The Chair advised of the joint meeting with the Health District and Board of County Commissioners on September 5, 2024 to discuss trauma systems, catchment areas and emergency departments.

The Chair advised that she had been contacted regarding mpox in the community and requested an update. Dr. Leguen advised that there were currently no new or acute issues with mpox in the community. Dr. Leguen reminded that there was a vaccine for mpox that had been offered to the community, with added efforts to provide the vaccine, and other medical assistance, to individuals with mpox or at risk of exposure to mpox. Dr. Leguen advised that he would request that the surveillance team provide a more detailed report, along with updated information on the Health District’s website.

Member Black expressed his thanks to Health District staff for attending the Back-to-School event hosted by him and Chair Kirkpatrick.

The Chair advised of the signing celebration event with the union representatives for the Collaborative Bargaining Agreements.

XI. HEALTH OFFICER & STAFF REPORTS (*Information Only*)

- DHO Comments

Dr. Leguen provided his written report.

- Legionella Update

Devin Raman, Senior Disease Investigation and Intervention Specialist, commenced the presentation from the Disease Surveillance and Control perspective.

Following an inquiry from the Chair, Ms. Raman advised provider awareness was the main focus for testing and noted that Legionnaires' Disease was under tested, and under reported.

*Member Nemec left the meeting at 10:22 a.m.
Member Nemec returned to the meeting at 10:25 p.m.*

Member Nielson inquired regarding the requirements for public notification of a Legionella cluster investigation. Ms. Rama advised that public notification was part of the public health investigation and if there was a case of Legionella at a resort facility, there would be a media release and guest notification. Ms. Raman advised that the Health District works with the resort facilities throughout the investigation process.

William Bendik, Laboratory Manager, presented from the Southern Nevada Public Health Laboratory perspective.

Mr. Bendik advised that samples for Legionella were from both resorts and residences.

Robert Cole, Senior Environmental Health Specialist, presented from the Environmental Health perspective.

Further to an inquiry as to whether a patient could be linked to a specific location for contracting Legionnaires' Disease, Mr. Cole advised that DNA analysis from a water sample could be matched to a swab sample from a patient's lungs.

Member Black inquired as to the requirements for facilities to have a Water Management Plan. Mr. Cole advised that only medical facilities were required to have a Water Management Plan, however many major resort properties had a Water Management Plan voluntarily.

*Member Hardy left the meeting at 10:46 a.m.
Member Hardy returned to the meeting at 10:50 a.m.*

- Mosquito Control / West Nile Virus / St. Louis Encephalitis Update

Vivek Raman, Environmental Health Supervisor, commenced the presentation from the Environmental Health perspective.

Mr. Bendik presented from the Southern Nevada Public Health Laboratory perspective.

Matthew Kappel, Senior Epidemiologist, presented from the Disease Surveillance and Control perspective.

Member Knudsen left the meeting at 11:01 a.m.

Member Knudsen returned to the meeting at 11:04 a.m.

Member Seebock left the meeting at 11:04 a.m.

Member Nemeec left the meeting at 11:05 a.m. and did not return.

Member Seebock returned to the meeting at 11:06 a.m.

Mr. Raman concluded with the long-term next steps.

Further to an inquiry from the Chair regarding best practices for a framework for a mosquito abatement district, Dr. Leguen advised that staff was in the process of researching mosquito abatement districts to prepare a proposal for the Board of Health, including costs.

Mr. Raman advised that, historically, Southern Nevada is the most active for West Nile Virus. Mr. Rama further advised that Washoe County and Douglas County have mosquito abatement districts and the establishment of a mosquito abatement district was not unprecedented for Nevada.

Dr. Leguen reiterated the Chair's earlier comments regarding the signing celebration event with the union representatives later in the day. Dr. Leguen expressed his pride in the negotiations team on the collaboration with the union to reach a positive outcome.

XII. INFORMATIONAL ITEMS

1. Administration Division Monthly Activity Report
2. Community Health Division Monthly Activity Report
3. Community Health Center (FQHC) Division Monthly Report
4. Disease Surveillance and Control Division Monthly Activity Report
5. Environmental Health Division Monthly Activity Report
6. Primary & Preventive Care Division Monthly Activity Report

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

Seeing no one, the Chair closed the Second Public Comment portion.

XIV. ADJOURNMENT

The Chair adjourned the meeting at 11:16 a.m.

Fermin Leguen, MD, MPH
District Health Officer/Executive Secretary
/acm



AGENDA

SOUTHERN NEVADA DISTRICT BOARD OF HEALTH MEETING

August 22, 2024 – 9:00 A.M.

Meeting will be conducted In-person and via Microsoft Teams

Southern Nevada Health District, 280 S. Decatur Boulevard, Las Vegas, NV 89107

Red Rock Trail Conference Room

NOTICE

Microsoft Teams:

<https://events.teams.microsoft.com/event/46fe78ba-a4be-4190-b21c-e40dbed1fa57@1f318e99-9fb1-41b3-8c10-d0cab0e9f859>

To call into the meeting, dial (702) 907-7151 and enter Phone Conference ID: 998 913 966#

NOTE:

- Agenda items may be taken out of order at the discretion of the Chair.
- The Board may combine two or more agenda items for consideration.
- The Board may remove an item from the agenda or delay discussion relating to an item on the agenda at any time.

I. CALL TO ORDER AND ROLL CALL

II. PLEDGE OF ALLEGIANCE

III. OATH OF OFFICE

IV. RECOGNITIONS

1. “Immunization Neighborhood” Immunization Champion (National Adult and Influenza Immunization Summit)

- COVID-19 Immunization Staff

2. Successful Delivery of Back-to-School Services

- SNHD Immunization Staff

3. Southern Nevada Substance Misuse Overdose Prevention Summit

- Jeffrey Alvarez, Lori Bryan, Belen Campos-Garcia, Rebecca Cruz-Nañez, Brandon Delise, Raychel Holbert, Carmen Hua, Victoria Hughes, Jessica Johnson, Samantha Morales, Marco Mendez, Katarina Pulver, Cheryl Radloff, Rosanne Sugay

4. Southern Nevada Health District – August Employees of the Month

- Mallory Jones and Prut Udomwattawee

V. **FIRST PUBLIC COMMENT:** A period devoted to comments by the general public about those items appearing on the agenda. Comments will be limited to five (5) minutes per speaker. Please clearly state and spell your name for the record. If any member of the Board wishes to extend the length of a presentation, this may be done by the Chair or the Board by majority vote. **There will be two public comment periods. To submit public comment on either public comment period on individual agenda items or for general public comments:**

- **By Teams:** Use the Teams link above. You will be able to provide real-time chatroom messaging, which can be read into the record or by raising your hand. Unmute your microphone prior to speaking.
- **By telephone:** Call 702-907-7151 and when prompted to provide the Meeting ID, enter 998 913 966#. To provide public comment over the telephone, please press *5 during the comment period and wait to be called on.
- **By email:** public-comment@snhd.org. For comments submitted prior to and during the live meeting, include your name, zip code, the agenda item number on which you are commenting, and your comment. Please indicate whether you wish your email comment to be read into the record during the meeting or added to the backup materials for the record. If not specified, comments will be added to the backup materials.

VI. **ADOPTION OF THE AUGUST 22, 2024 AGENDA** *(for possible action)*

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

1. **APPROVE MINUTES/BOARD OF HEALTH MEETING:** July 25, 2024 *(for possible action)*

VIII. **PUBLIC HEARING / ACTION:** Members of the public are allowed to speak on Public Hearing / Action items after the Board's discussion and prior to their vote. Each speaker will be given five (5) minutes to address the Board on the pending topic. No person may yield his or her time to another person. In those situations where large groups of people desire to address the Board on the same matter, the Chair may request that those groups select only one or two speakers from the group to address the Board on behalf of the group. Once the public hearing is closed no additional public comment will be accepted.

1. **Variance Request to install an Incinerator Septic System (ECOJOHN®) in lieu of a Traditional Septic System, and to install the system on an undersized lot located at 2130 Via Vita St., Mt. Charleston, NV 89124;** direct staff accordingly or take other action as deemed necessary. *(for possible action)*

IX. **REPORT / DISCUSSION / ACTION**

1. **Receive, Discuss and Approve the Board of Health Committees and Committee Membership for FY2025;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

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

XI. HEALTH OFFICER & STAFF REPORTS *(Information Only)*

- DHO Comments
- Legionella Update
- Mosquito Control / West Nile Virus / St. Louis Encephalitis Update

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

XIV. ADJOURNMENT

NOTE: Disabled members of the public who require special accommodations or assistance at the meeting are requested to notify the Administration Office at the Southern Nevada Health District by calling (702) 759-1201.

THIS AGENDA HAS BEEN PUBLICLY NOTICED on the Southern Nevada Health District’s Website at <https://snhd.info/meetings>, the Nevada Public Notice website at <https://notice.nv.gov>, and a copy will be provided to any person who has requested one via U.S mail or electronic mail. All meeting notices include the time of the meeting, access instructions, and the meeting agenda. For copies of agenda backup material, please contact the Administration Office at 280 S. Decatur Blvd., Las Vegas, NV 89107 or (702) 759-1201.



MINUTES

SOUTHERN NEVADA DISTRICT BOARD OF HEALTH MEETING

July 25, 2024 – 9:00 a.m.

Meeting was conducted In-person and via Webex

Southern Nevada Health District, 280 S. Decatur Boulevard, Las Vegas, NV 89107
Red Rock Trail Rooms A and B

- MEMBERS PRESENT:** Marilyn Kirkpatrick, Chair – Commissioner, Clark County (*in-person*)
Scott Nielson, Vice-Chair – At-Large Member, Gaming (*in-person*)
Frank Nemece, Secretary – At-Large Member, Physician (*in-person*)
Scott Black – Mayor Pro Tempore, City of North Las Vegas (*in-person*)
Bobbette Bond – At-Large Member, Regulated Business/Industry (*in-person*)
Nancy Brune – Council Member, City of Las Vegas (*via WebEx*)
Pattie Gallo – Council Member, City of Mesquite (*via WebEx*)
Tick Segerblom – Commissioner, Clark County (*in-person*)
- ABSENT:** Joseph Hardy – Council Member, City of Boulder City
Brian Knudsen – Mayor Pro Tempore, City of Las Vegas
Jim Seebock – Council Member, City of Henderson
- ALSO PRESENT:** Linda Anderson, Christopher Boyd, Liz Casiello, James Facer, Jamarvin
(In Audience) Harvey, Todd Hightower, Maya Holmes, Deborah Kuhls, Bradley Mayer,
Paola Mena, Teddy Parker, Kristine Perez, Daniel Purcell, Lisa Rogge, Stacie
Sasso, Damien Soup, Mahogany Turfley
- LEGAL COUNSEL:** Heather Anderson-Fintak, General Counsel
- EXECUTIVE SECRETARY:** Fermin Leguen, MD, MPH, District Health Officer
- STAFF:** Elizabeth Adelman, Talibah Abdul-Wahid, Jason Agudo, Adriana Alvarez,
Rashida Alvarez, Anna Angeles, Bonnie Archie, Larry Armstrong, Jacqueline
Ayala, Maria Azzarelli, Tanja Baldwin, Tawana Bellamy, Haley Blake, Murphy
Boudreaux, Jennifer Bowers, Nicole Bungum, Cory Burgess, Daniel Burns,
Victoria Burris, Erika Bustinza, Nancy Cadena, Belen Campos-Garcia,
Willys Chang-Mah, Nicole Charlton, Mary Cooper, Andria Cordovez Mulet,
Rebecca Cruz-Nañez, Corey Cunningham, Gerard Custodio, Nevena
Cvijetic, Liliana Davalos, Jeffrey Dawson, Brandon Delise, Chris DeLisle,
Aaron DelCotto, Rayleen Earney, Regena Ellis, Kaylina Fleuridas, Jason
Frame, Nick Gabler, Cheri Gould, Jacques Graham, Heather Hanoff,
Amineh Harvey, Richard Hazeltine, Victoria Hughes, Dan Isler, Molly
Jacobs, Danielle Jamerson, Jessica Johnson, Horng-Yuan Kan, Theresa
Ladd, Heidi Laird, Josie Llorico, Cassius Lockett, Sandy Lockett, Anilkumar
Mangla, Cassondra Major, Kimberly Monahan, Brian Northam, Erin
O’Malley, Lorraine Oliver, Joi Oliveros, Veralynn Orewyler, Kyle Parkson,
Pitchaya Pattasema, Jill Perlstein, Phillip Pilares, Jeff Quinn, Larry Rogers,
Alexis Romero, Arc Rufo, Kim Saner, Aivelhyn Santos, Dave Sheehan,
Steven Shore, Karla Shoup, Jennifer, Sizemore, Randy Smith, B.J. Souza,

Candice Stirling, Shaqweta Summerville, Will Thompson, Greg Tordjman, Renee Trujillo, Pash Usufzy, Jorge Viote, DJ Whitaker, Edward Wynder, Lourdes Yapjoco

I. CALL TO ORDER and ROLL CALL

The Chair called the Southern Nevada District Board of Health Meeting to order at 9:02 a.m. Andria Cordovez Mulet, Executive Assistant, administered the roll call and confirmed quorum. Ms. Cordovez Mulet provided clear and complete instructions for members of the general public to call in to the meeting to provide public comment, including a telephone number and access code.

II. PLEDGE OF ALLEGIANCE

III. OATH OF OFFICE

Ms. Cordovez Mulet administered the Oath of Office to Members Bond and Nemecc.

IV. RECOGNITIONS

1. Maria Azzarelli, Nicole Bungum, and Rayleen Earney (Office of Chronic Disease Prevention and Health Promotion)

- U.S. Department of Health and Human Services – Office of Disease Prevention and Health Promotion – Healthy People 2030 Champion Spotlight on “*Southern Nevada Health District: Setting Targets to Drive Improvements in Disease Prevention and Health Promotion*”

The U.S. Department of Health and Human Services developed a spotlight blog post regarding the Health District’s Office of Chronic Disease Prevention and Health Promotion’s designation as a Healthy People 2030 Champion. The spotlight distributed at the national level on June 20, 2024, was titled, “*Southern Nevada Health District: Setting Targets to Drive Improvements in Disease Prevention and Health Promotion.*” Program Manager Maria Azzarelli, Supervisor Nicole Bungum, and Health Educator Rayleen Earney were featured in the spotlight discussing the team’s various successes to reduce the burden of chronic disease throughout the years. On behalf of the Health District and the Board, the Chair congratulated the employees for this accomplishment.

Member Nielson joined the meeting at 9:07 a.m.

2. Southern Nevada Health District – July Employees of the Month

- Lisa Cole and Phillip Pilares

The Chair recognized the Employees of the Month. Each month the Health District, and the Board of Health, recognized those employees that went above and beyond for the Health District and our community and that best represented the Health District’s C.A.R.E.S. Values. On behalf of the Health District and the Board, the Chair congratulated these exceptional employees.

3. Southern Nevada Health District – Manager/Supervisor of the Quarter

- Tanja Baldwin and Kimberly Franich

The Chair recognized the Manager/Supervisor of the Quarter. Each quarter two individuals are selected, as nominated by staff, to recognize leadership, teamwork efforts, ideas, or accomplishments, and best represent the Health District's C.A.R.E.S. Values. On behalf of the Health District and the Board, the Chair congratulated these exceptional employees.

- V. **FIRST PUBLIC COMMENT:** A period devoted to comments by the general public about those items appearing on the agenda. Comments will be limited to five (5) minutes per speaker. Please clearly state your name and address and spell your last name for the record. If any member of the Board wishes to extend the length of a presentation, this may be done by the Chair or the Board by majority vote.

Seeing no one, the Chair closed the First Public Comment period.

VI. **ADOPTION OF THE JULY 25, 2024 MEETING AGENDA** *(for possible action)*

A motion was made by Member Black, seconded by Member Nielson, and carried unanimously to approve the July 25, 2024 Agenda, as presented.

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

1. **APPROVE MINUTES/BOARD OF HEALTH MEETING:** June 27, 2024 *(for possible action)*
2. **PETITION #36-24: Approval of the Construction Agreement between the Southern Nevada Health District and KOR Building Group, LLC to build a Behavioral Health Clinic at 280 Decatur Blvd.;** direct staff accordingly or take other action as deemed necessary *(for possible action)*
3. **PETITION #40-24: Approval of a contract for Data Security Posture Management Software as a Service (SaaS) between Escape Velocity Holdings Inc. dba Trace3 LLC and the Southern Nevada Health District;** direct staff accordingly or take other action as deemed necessary *(for possible action)*
4. **PETITION #01-25: Approval of an Equipment Sale Agreement with STERIS Corporation for the purchase of an Autoclave – AMSCO 250LS Small Steam Sterilizer;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

A motion was made by Member Nielson, seconded by Member Bond, and carried unanimously to approve the July 25, 2024 Consent Agenda, as presented.

VIII. CLOSED SESSION

Go into closed session, pursuant to NRS 288.220 for the purpose of conferring with Health District attorney regarding labor issues.

The Board did not require a Closed Session.

IX. PUBLIC HEARING / ACTION: Members of the public are allowed to speak on Public Hearing / Action items after the Board's discussion and prior to their vote. Each speaker will be given five (5) minutes to address the Board on the pending topic. No person may yield his or her time to another person. In those situations where large groups of people desire to address the Board on the same matter, the Chair may request that those groups select only one or two speakers from the group to address the Board on behalf of the group. Once the public hearing is closed, no additional public comment will be accepted.

1. PETITION #02-25: Approve and Authorize the District Health Officer to sign General and Supervisory Units Collective Bargaining Agreements (CBAs) both to be effective upon approval by the Board, as follows:

- a. FY25 – 5% Cost of Living Adjustment (COLA); 1-Step increase in FY25 for those who have not reached the Final 14th Step of the Salary Schedule;
- b. FY26 – 4% COLA; 1-Step increase in FY25 for those who have not reached the Final 14th Step of the Salary Schedule;
- c. Terms and Conditions of Article 20 will be retroactively applied;
- d. Extend the Same Financial Changes to Non-Union Employees Not Covered by the SEIU General or Supervisory Collective Bargaining Agreements; and direct staff accordingly or take other action as deemed necessary. *(for possible action)*

Teddy Parker, of Parker Nelson & Associates, spokesperson representing the Health District's management negotiation team, advised that the Health District and SEIU reached a tentative agreement on the Collective Bargaining Agreements (CBA) on July 3, 2024. Mr. Parker outlined that the CBAs were for 2 years, and the Health District increased the first year COLA to 5% from the last offer. Mr. Parker further advised that the direction of the Board was taken into consideration.

Further to an inquiry from Member Nielson on the potential outcome of the Health District's end fund balance, Mr. Parker confirmed that the Health District would comply with the necessary levels of funding.

Member Segerblom thanked Mr. Parker and noted the positive comments he received from the union.

The Chair opened for Public Comment.

Seeing no one, the Chair closed the Public Comment.

A motion was made by Member Black, seconded by Member Segerblom, and carried unanimously to approve and authorize the District Health Officer to sign General and Supervisory Collective Bargaining Agreements (CBAs) both to be effective upon approval by the Board of Health, as presented.

X. REPORT / DISCUSSION / ACTION

- 1. Receive, Discuss and Approve the Recommendations from the Nominations of Officers Committee for the Officers (Chair, Vice-Chair and Secretary) of the Southern Nevada District Board of Health for a One Year Term Beginning July 1, 2024;** direct staff accordingly or take other action as deemed necessary (*for possible action*)

The Chair provided a summary of the Nomination of Officers Committee meeting on July 23, 2024.

A motion was made by Member Nemece, seconded by Member Segerblom, and carried unanimously to approve the recommendation from the Nomination of Officers Committee and appoint Marilyn Kirkpatrick as Chair, Scott Nielson as Vice Chair, and Nancy Brune as Secretary of the Southern Nevada District Board of Health for FY2025.

- 2. Receive, Discuss and Approve the Recommendations from the Nominations of Officers Committee for the Officers (Chair and Vice-Chair) of the Public Health Advisory Board for a One Year Term Beginning July 1, 2024;** direct staff accordingly or take other action as deemed necessary (*for possible action*)

The Chair provided a summary of the Nomination of Officers Committee meeting on July 23, 2024.

A motion was made by Member Nemece, seconded by Member Black, and carried unanimously to approve the recommendation from the Nomination of Officers Committee and appoint Kenneth Osgood as Chair and Susan VanBeuge as Vice Chair of the Public Health Advisory Board for FY2025.

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

Member Nemece requested additional information on the small steam sterilizer that was approved in the Consent Agenda. Dr. Leguen advised that, due to the technical nature of the equipment, he will obtain additional information to be provided to the Board, along with the procurement process.

Member Segerblom encouraged the Health District to communicate with Clark County to discuss the possibility of a mosquito abatement district.

The Chair outlined her experience working with CCSD students to develop an app that would be presented to the Board of Clark County Commissioners. The Chair inquired about the possibility of doing something similar with students at the Health District, allowing students to learn and contribute to public health interventions. Member Bond advised that the Culinary Health Fund would support this initiative. Dr. Leguen agreed to explore this initiative through the Office of Communications. Member Black raised the work of the Water Conservation Youth Council, noted

the work done with students through the Office of Chronic Disease Prevention and Health Promotion and suggested a Public Health Youth Advisory Council.

The Chair raised recent discussions at the Patient Protection Board, particularly around targeted Medicaid reimbursements, an update to the Medicaid billing system, start-up costs for Graduate Medical Education (GME), and the utilization of FQHCs for primary care.

XII. HEALTH OFFICER & STAFF REPORTS (*Information Only*)

- DHO Comments

In addition to his written report, Dr. Leguen advised that West Nile Virus was a growing concern in the community. Dr. Leguen advised that there were 19 human cases of West Nile Virus in the community. Staff from the Office of Disease Surveillance and Environmental Health were working together on education, field work and surveillance. Dr. Leguen further confirmed that mosquitos with West Nile Virus have been identified in 44 zip codes. The Health District continued the discussion of feasibility of a mosquito abatement district to allow for more standardized mosquito control across the community.

- Community Status Assessment Survey Launch

Carmen Hua, Health Educator II, provided an update on the Community Health Assessment.

The Board members requested that the flyers be sent to them for circulation.

XIII. INFORMATIONAL ITEMS

1. Administration Division Monthly Activity Report
2. Community Health Division Monthly Activity Report
3. Community Health Center (FQHC) Division Monthly Report
4. Disease Surveillance and Control Division Monthly Activity Report
5. Environmental Health Division Monthly Activity Report
6. Primary & Preventive Care Division Monthly Activity Report

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

Rory Kuykendall, representing the Culinary Union, submitted a written public comment and addressed the Board regarding ghost kitchens. Mr. Kuykendall noted that the ghost kitchen model raised food safety concerns and concerns regarding violations or tracing illness back to shared facilities.

Joey Chavez, worker at Citizen's Kitchen and Bar, stated that kitchen workers rely on the Health District to inspect restaurant work areas. Mr. Chavez confirmed that he has seen Health District staff doing routine inspections to ensure workers were safe and to keep the public safe. Mr.

Chavez stated that the Health District should prioritize regulating virtual restaurants and ghost kitchens so that kitchen workers are protected by the same enforcement and inspections that are important to public health.

Seeing no one further, the Chair closed the Second Public Comment portion.

XV. ADJOURNMENT

The Chair adjourned the meeting at 9:55 a.m.

Fermin Leguen, MD, MPH
District Health Officer/Executive Secretary
/acm

DRAFT



Memorandum

Date: August 22, 2024

To: SOUTHERN NEVADA DISTRICT BOARD OF HEALTH

From: Daniel Isler, PE, REHS, *Environmental Health Engineer/Supervisor* *DI*
Daniel Burns, PE, REHS, *Environmental Health Engineer/Manager* *DB*
Chris Saxton, MPH-EH, REHS, *Environmental Health Director* *CS*
Cassius Lockett, PhD, *Deputy District Health Officer-Operations* *CL*
Fermin Leguen, M.D., MPH, *District Health Officer* *FL*

Subject: Variance request to install an incinerator septic system (ECOJOHN®) in lieu of a traditional septic system; and to install the system on an undersized lot.

I. BACKGROUND:

Todd and Maria McKinney, Owners (“Petitioners”), are requesting a variance to permit and install a waste combustion (incinerator) system instead of a conventional individual sewage disposal system (ISDS) on an undersized lot served by municipal water, located at Assessor’s Parcel Number (APN) 129-02-410-065, also known as 2130 Via Vita St., Mt. Charleston, NV 89124 (“Subject Property”).

Petitioners request a variance from Section 11.12 of the *Southern Nevada District Board of Health Regulations Governing Individual Sewage Disposal Systems and Liquid Waste Management* (“SNHD ISDS Regulations”), which states that “A septic tank shall not be installed independently without a soil absorption system to receive the septic tank effluent.” In lieu of effluent disposal via a soil absorption system, Petitioners are proposing an effluent disposal system in which the effluent is pumped from the septic tank into an above ground proprietary waste incinerator manufactured by ECOJOHN®.

Petitioners further request a variance from Section 9.1 of the SNHD ISDS Regulations, which requires that wastewater effluent “be disposed of by a soil absorption system or by some other manner approved by the Health Authority provided such disposal does not create a nuisance or hazard to public health.” Petitioners proposed use of an incinerator as an alternative to a conventional soil disposal system that has not been fully evaluated or approved by SNHD for use in Clark County.

Petitioners further request a variance from Section 11.20.2 of the SNHD ISDS Regulations, which requires a minimum lot size of 0.25 acres for the installation of an ISDS on a lot served by municipal water. The Subject Property has an area of approximately 0.13 acres.

Petitioners state the following with regards to these requirements:

1. There must be circumstances or conditions which are unique to the applicant, and do not generally affect other persons subject to the regulation:

"The lot sizes and topography of this particular site does not allow for the required size of septic system. This would not apply to other properties under these regulations as they do not have the same conditions."

2. There must be circumstances or conditions which make compliance with the regulation unduly burdensome and cause a hardship to and abridge a substantial property right of the applicant, and the variance is necessary to render substantial justice to and preserve the property rights of the applicant. Please indicate in what manner compliance with the regulation would be burdensome or cause a hardship on your business or how the free use of your property may be affected (if economic factors are an issue, please include estimates regarding the costs that would be incurred by compliance):

"Without this septic system the property would not be able to have plumbing fixtures and therefore could not be used as a home/residence for the client. In addition, if a septic system was proposed on the property, many existing old growth trees would need to be removed to accommodate, and therefore reduce the quality of the site and surrounding neighborhood."

3. Granting the variance will not be detrimental or pose a danger to public health and safety. Please provide evidence that the variance request, if approved, will not adversely affect the safe and sanitary operation of the applicant(s) pool, spa, or food establishment:

"This variance would allow the client to safely dispose of their sewage without disturbing the natural landscape of the area. Adhering to the county odor rules and visible emission regulations will make sure that the use of this home will not adversely affect public health and safety."

The Subject Property is depicted in Attachment C as Lot 3 of Block 4 of the recorded subdivision known as Camp Lady of the Snows, which was approved in 1959. The property has not been improved since the adoption of the current SNHD ISDS Regulations in 2009.

Examination of the Clark County Assessor's records and parcel genealogy show that the Petitioners are the second owners of the property and obtained the Subject Property in March 2022. An analysis of the surrounding area shows that there are three public water system wells and 49 permitted septic systems within a square mile of the Subject Property.

II. RECOMMENDATION:

Variance Issue #1 – Incinerator System (Sections 9.1 and 11.12 of the SNHD ISDS Regulations)

Staff believes that granting this ECOJOHN® variance poses a danger to public health and the environment. The proposed system involves pumping wastewater effluent into the above ground incinerator. A reliable source of electricity is necessary to run the pump and power the incinerator, and propane is necessary to provide fuel for the combustion process. Failure of any component of the system can potentially cause wastewater effluent to be released into the environment.

Furthermore, there is limited guidance available from jurisdictions outside Clark County regarding whole-building incinerators such as the one proposed by the Petitioners. Although the Clark County Fire Department and Division of Air Quality have not indicated that they would be opposed to such a system (Attachments E and F), they also lack a regulatory framework to adequately evaluate the air quality, nuisance odor, and fire safety risks of the system.

Staff recommends DENIAL of Variance Issue #1. If the Board of Health approves the variance, staff recommend also approving the undersized lot (Variance Issue #2) and requiring all the conditions outlined in Section III.

Variance Issue #2 – Minimum Lot Size (Section 11.20.2 of the SNHD ISDS Regulations)

The Subject Property has an area of approximately 0.13 acres, which is smaller than the minimum lot size of 0.25 acres required by the SNHD ISDS Regulations. Lot size variances have been approved for other properties on Mt. Charleston, some of which were as small as 0.06 acres.

Petitioners initially applied for a permit to install a conventional ISDS in August 2023, at which time they were informed by staff that they would need to apply for a variance from the lot size requirements. To avoid removing trees, however, Petitioners later revised their application, replacing the soil absorption system with the proposed ECOJOHN® system. Staff would recommend approval of a variance from the lot size requirements, as such variances are common for properties on Mt. Charleston, but on the condition that Petitioners install a conventional ISDS with a soil absorption system.

Should the Board DENY Variance Issue #1, Staff recommends approval of Variance Issue #2 under condition that a conventional ISDS with a soil absorption system is installed; providing that all trees located within ten feet from the adsorption system are removed; and also with conditions 1, 2, and 3 outlined in Section III.

III. CONDITIONS:

1. Petitioners and their successor(s) in interest shall abide by all local governmental regulations requiring connection to community sewage systems. Use of the ISDS shall be discontinued and the structure it serves shall be connected to any community sewage system constructed in the future to within four hundred (400) feet of the applicant's

property line when connection can be made by gravity flow and the owner(s) are notified and legally required to do so.

2. Petitioners and their successor(s) will abide by the operation and maintenance requirements of the most current SNHD Regulations governing individual sewage disposal systems.
3. Permitting of the ISDS must be completed within one year of the date of approval of the variance. If the permit has not been approved within that period, this variance shall automatically expire and be of no further force and effect, unless application is made and approved for an extension of time prior to the expiration date by Petitioners or their successor(s) in interest.
4. The system must be designed by a professional engineer licensed in Nevada, must be installed by an installer pre-approved by ECOJOHN®, and must be installed in accordance with the Installation Instructions (Attachment H) provided in the Owner's Manual.
5. Petitioners and their successor(s) must obtain all applicable Clark County Building and Fire permits.
6. Petitioners and their successor(s) must maintain a backup generator and propane tank to provide adequate electricity and fuel in the event of a power outage.
7. Petitioners and their successor(s) will adhere to the Cleaning and Maintenance Schedule (Attachment G) included within the Owner's Manual, including properly disposing of waste ash. If the system fails due to improper or inadequate maintenance, resulting in sewage overflows, nuisance odors, or other nuisances or hazards to public health, this variance will be void and the incinerator will need to be replaced with a traditional soil absorption system.

Attachments:

- A. Variance Candidate Application
- B. Justification Letter from the Petitioners
- C. Recorded Plat for Camp Lady of the Snows
- D. Proposed Septic Tank and Waste Incinerator Plan
- E. Clark County Fire Department Email
- F. Clark County Division of Air Quality Email
- G. Cleaning and Maintenance Schedule
- H. Installation Instructions
- I. Public Notice

Attachment A: Variance Candidate Application (Page 1 of 3)



VARIANCE CANDIDATE WORKSHEET

PART I:

ESTABLISHMENT INFORMATION

Name of Facility/Establishment: McKinney's Residence
Health Permit Number: _____ Date of Inquiry: 04/03/2024
Name of Operator/ Agent: NEO & Associates
Address of Operator/ Agent: 2115 Huntington Drive Unit C, San Marino, CA 91108
Contact Information of Operator/ Agent:
Office Phone: 702-625-0752 Cell Phone: _____
Fax Number: _____ Email Address: nickvw@neo-inc.com
If corporation, the name/title of individual to sign for Variance document:
Name: Nicholas Voell-White
Title: Design Director

OWNER INFORMATION

Name of Property Owner: McKinney, Maria and Todd
Address of Property Owner: 2130 Via Vita, Mt. Charleston, NV 89124
Contact Information of Property Owner:
Office Phone: _____ Cell Phone: 702-606-8210
Fax Number: _____ Email Address: tarhead812@gmail.com

PROPERTY INFORMATION

Property Address: 2130 Via Vita, Mt. Charleston, NV 89124
Assessor's Parcel Number (APN): 129-02-410-065
Describe location within larger facility (i.e. hotel/casino/resort, etc.):
A single family home on a private property

Describe Variance Issue (s): (Include sections of the Regulation or Nevada Administrative Code that applies to the request for a variance)

Existing lot (5,684 SF) is smaller than required lot size per NAC 444.790 / SNHD ISDS 11.20.2 Minimum 1/4 ac. (10,900 SF) lot required
The required size of septic system per NAC 444.8354 and an assumed 60 min. / in. percolation rate and a 1,200 G septic tank would be 250' of distribution line
Based on NAC 444.792 & 444.794 SNHD ISDS 14 & figures 7 & 8 - would cover most of the site and require the removal of most, if not all site trees

Attachment A: Variance Candidate Application (Page 2 of 3)

PART II:

Nevada Administrative Code 439.240 states in general that certain conditions or circumstances must be shown to exist in order for a Board of Health to approve a request for a Variance from adopted public health regulations. A variance application letter (as noted below in PART III) MUST specifically address each of the following issues:

1. There must be circumstances or conditions which are unique to the applicant, and do not generally affect other persons subject to the regulation. **Please indicate how your request is unique to your situation and is, therefore, not likely to affect other persons subject to the regulations:**

The lot sizes and topography of this particular site does not allow for the required size of septic system. This would not apply to other properties under these regulations as they do not have the same site conditions.

2. There must be circumstances or conditions which make compliance with the regulation unduly burdensome and cause a hardship to and abridge a substantial property right of the applicant, and the variance is necessary to render substantial justice to and preserve the property rights of the applicant. **Please indicate in what manner compliance with the regulation would be burdensome or cause a hardship on your business or how the free use of your property may be affected (if economic factors are an issue, please include estimates regarding the costs that would be incurred by compliance):**

Without this septic system the property would not be able to have plumbing fixtures and therefore could not be used as a home / residence for the client. In addition if a septic system was proposed on the property, many existing old growth trees would need to be removed to accommodate, and therefore reduce the quality of the site and surrounding neighborhood.

3. Granting the variance will not be detrimental or pose a danger to the public health and safety. **Please provide evidence that the variance request, if approved, will not adversely affect the safe and sanitary operation of the applicant(s) pool, spa, or food establishment:**

This variance would allow the client to safely dispose of their sewage without disturbing the natural landscape of the area. Adhering to the county odor rules and visible emission regulations will make sure that the use of this home will not adversely affect public health and safety.

Attachment A: Variance Candidate Application (Page 3 of 3)

NAC 439.240 Approval by State Board of Health. (NRS 439.150, 439.190, 439.200)

1. The State Board of Health will grant a variance from a regulation only if it finds from the evidence presented at the hearing that:
 - (a) There are circumstances or conditions which:
 - (1) Are unique to the applicant;
 - (2) Do not generally affect other persons subject to the regulation;
 - (3) Make compliance with the regulation unduly burdensome; and
 - (4) Cause a hardship to and abridge a substantial property right of the applicant; and
 - (b) Granting the variance:
 - (1) Is necessary to render substantial justice to the applicant and enable the applicant to preserve and enjoy his or her property right; and
 - (2) Will not be detrimental or pose a danger to public health and safety.
 2. Whenever an applicant for a variance alleges that he or she suffers or will suffer economic hardship by complying with the regulation, the applicant must submit evidence demonstrating the costs of compliance with the regulation. The Board will consider the evidence and determine whether those costs are unreasonable.
- [Bd. of Health, Variances Reg. §§ 2.7-2.8, eff. 10-16-80; A 2-5-82; 1-19-84]

PART III:

A Variance Application Letter, which includes all information provided by the applicant on his worksheet, must be submitted in writing to the Environmental Health Division (EHD) Director no later than 40 days before the monthly Board of Health Meeting. **The Application letter must be on the owner's letterhead signed by the Owner/Corporate Officer specifically listing which part(s) of the Regulation the proposed Variance covers with this completed Worksheet as an attachment. The written Application Letter must take particular care in providing statements and evidence of circumstances or conditions and reasons why the District Board of Health should grant the Variance as listed in NAC 439.240 as shown at the top of this page. ALL information you have provided in PART I and II of this Worksheet must be included in the body of the letter.** The evidence required may include 8 1/2" x 11" or 11" x 17" detailed drawings and/or photographs.

The Variance process is outlined in Nevada Administrative Code (NAC) 439.200 through 439.260 with the exception that an application fee is payable to SOUTHERN NEVADA HEALTH DISTRICT (SNHD).

This section to be completed by SNHD staff ONLY

Next closing date is: _____ for the _____ BOH Meeting.

Referred by: _____

(Print Name of REHS)

Completed by: _____ Date: _____

(Print Name of REHS if not by supervisor)

Received by: _____ Date: _____

(Owner/Operator/Agent)

Reviewed by: _____ Date: _____

(Signature of SNHD Manager)

Attachment B: Justification Letter from Petitioners



NEO & Associates
2130 Via Vita - McKinney's Residence
Justification Letter
04/04/2024

To: Southern Nevada Health District
280 S. Decatur Blvd.
Las Vegas, NV. 89107

From: NEO & Associates

Re: Parcel # 129-02-410-065

To whom this may concern:

I hereby make application and petition the Southern Nevada District Board of Health for a variance to the Regulations Governing Individual Sewage Disposal and Liquid Waste Management Section 10 and Nevada Department of Environmental Protection Policy.

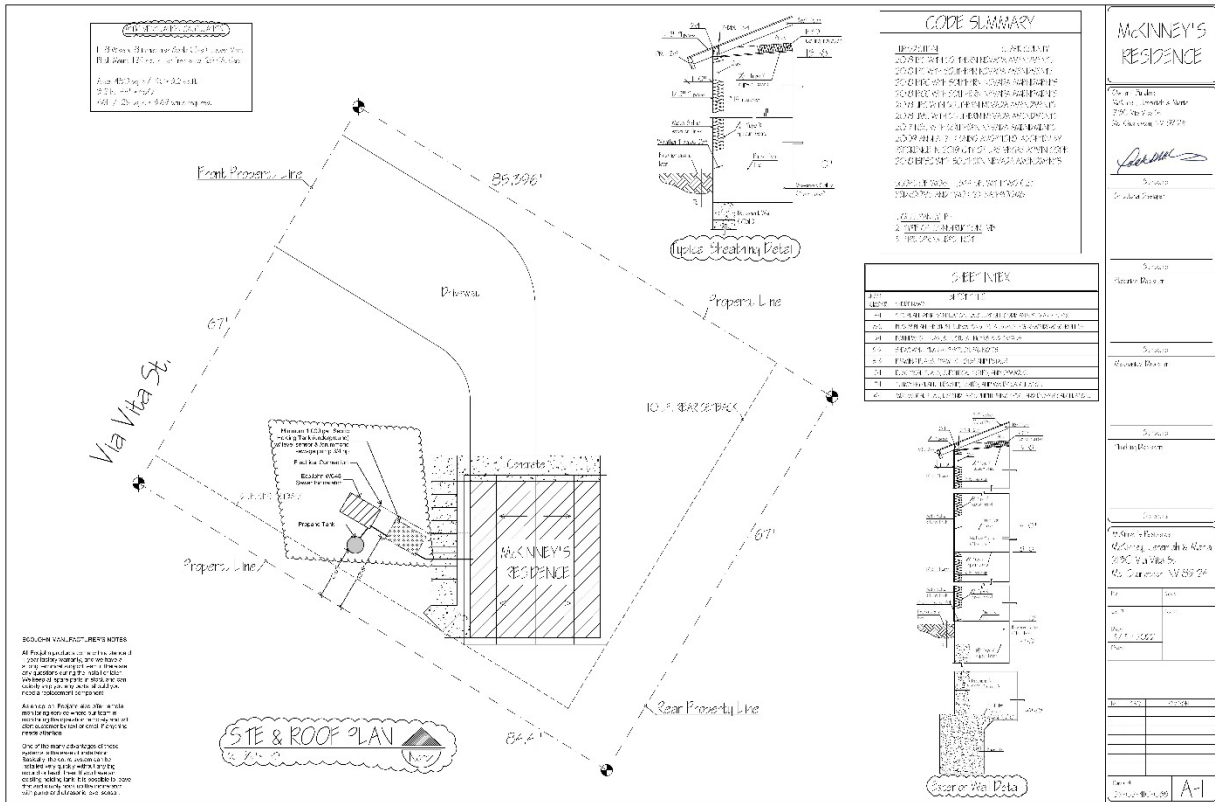
This variance request is made to permit construction of an ISDS on a lot with a septic density greater than the maximum for a conventional septic system.

The legal description of said property is APN # 129-02-410-065, further described as the McKinney's Residence.

Our client has owned the property since 2022 and they wish to construct a new single family home to reside in.

Thank you for your consideration,
NEO & Associates
Nicholas Voell-White

Attachment D: Proposed Septic Tank and Waste Incinerator Plan



Attachment E: Clark County Fire Department Email



Todd Mckinney <tarhead812@gmail.com>

EcoJohn's SepticJohn Information

Wayne Dailey <WDailey@clarkcountynv.gov>
to: Todd Mckinney <tarhead812@gmail.com>
cc: Jorge Gonzalez <Jorge.Gonzalez@clarkcountynv.gov>

Thu, Oct 26, 2023 at 4:40 PM

Hello Todd,

Thanks for sending this information for review. I do not see anything provided with this package that would trigger a permit or inspection requirement from the fire department for this equipment or system. You mentioned that you would be running this off propane. If this requires the installation of a new propane tank, there is a requirement to pull a permit and have inspections from CCFD for that installation. Those are generally handled by the tank/propane supplier. If that is the case, you can follow-up with them.

I would assume that building permits will be required for items like the gas lines, plumbing and electrical, but you should verify that with them.

Please let me know if you need further.

Respectfully,

Wayne Dailey, CFM
Assistant Fire Chief
Fire Prevention Bureau
Clark County Fire Department
Office: 702-455-2048
Cell: 702-249-1513
WDailey@ClarkCountyNV.Gov



[Quoted text hidden]

Attachment F: Clark County Division of Air Quality Email

4/4/24, 11:24 AM

NEO & Associates Inc Mail - Residential sewage (toilet) incinerator



Nicholas Voell-White <nickvw@neo-inc.com>

Residential sewage (toilet) incinerator

AQ Small Business Assistance Program <AQBAP@clarkcountynv.gov>
To: Nicholas Voell-White <nickvw@neo-inc.com>

Wed, Apr 3, 2024 at 12:35 PM

Nicholas, so after speaking with my co-worker, we do not have any specific regulations regarding residential sewage incinerators or emissions except our nuisance odor regulations under section 40 found here.
https://www.clarkcountynv.gov/Environmental%20Sustainability/Current%20Rules%20and%20Regulations/SECT43_07-01-04.pdf

However, you might want to check with the building dept. on codes for the area.

I hope that helps,

Respectfully,

Wally Evans

Senior Air Quality Specialist

Small Business Assistance Program

702-455-4728 – Direct Line

725-287-2823 - Cell

702-455-5942 – Main Office

702-383-9994 - Fax

Email: Wallace.Evans@ClarkCountyNV.gov

Web Link: Clark County, NV (clarkcountynv.gov)

NOTE: Clark County DES Business Hours: M-Th 7:30 am to 5:30 pm, closed on Fridays.

Attachment G: Cleaning and Maintenance Schedule

5. CLEANING & MAINTENANCE

In order to maximize Incinerator, it is imperative to occasionally do maintenance on the system. Below is more information on how to service the system.

REMOVAL OF ASH

The Incinerator needs periodic cleaning of ashes. The ashes is not suitable to sue as fertilizer or compost and must be disposed of as household trash in accordance with state and local codes;

Before cleaning out ashes, the steps below must be followed”

To clean out the collection tray, follow these steps:

1. Stop the burn cycle when it is in cooling or standby mode
2. Change the mode to Hand Op and start the burner, run the burner for 30 minutes
3. Let it cool down for 30 minutes and then inspect the collection tray and plenum
4. If there is still water in the tray, repeat step 2
5. If there is no liquid in the tray or plenum, proceed with steps below:
 - a. Let the incinerator cool down for 2 hours
 - b. Open the burn chamber door and slowly pull out the burner tray so it can be inspected
 - c. Remove deflector plate
 - d. Vacuum out the ashes
 - e. Rotate the collection tray 180 degrees and re-install it in the burn chamber
 - f. Install deflector plate on top of tray
 - g. Close burn chamber door and power up the PLC
 - h. Go to Maintenance page and reset Maintenance Time
 - i. Done

MAINTENANCE SCHEDULE

Component	Maintenance Task	After	Every	Every	Every	Every	Every
		First	50	100	Month	500	1000
		20	Hrs	Hrs		Hrs	Hrs
		Hrs					
INCINERATOR System	General Inspection *				•		
Incinerator Tray	Clean out Ashes *				•		
Incinerator Tray	Inspect and Rotate Tray 180°				•		
Waterless Urinal	Replace Urine Filter					•	
Incinerator	Inspect Electrodes on Burner, ensure they are correctly aligned						•
Pumps	Inspect for leakages	•	•	•	•		
Toilet	Inspect for leakages	•			•		
Power	Check power and power Connection				•		

TABLE 5-1. MAINTENANCE SCHEDULE

***Perform service more often when operating in a hot or dusty environment**
***Cleaning out the ashes may be required to do more frequently depending on the heaviness of black water. I.e. 350 gallon of medium heavy black water transform into 4 lbs. of ashes.**

Attachment H: Installation Instructions (Page 1 of 7)

1. INTRODUCTION

Thank you for purchasing an ECOJOHN® product. Please take a few minutes to read this manual, then keep it in a safe place where it can be easily located if needed by your professional service technician.

The ECOJOHN® Waste Combustion Models – WC5 Mini, WC5, WC32, WC48, and WC64 (in this manual called **incinerator**) are designed to incinerate wastewater from a waste tank. Through the incineration process the wastewater water gets burned by use of propane, natural gas, or diesel fuel - the only remains will be a small amount of sterile ash. Maintenance and emptying of ash only need to be done periodically. It is important that the size of system and holding tank is sized correctly based on usage. If system is not sized correctly, there is a potential for overloading.

All products are manufactured at Ecojohn's factory in Arkansas, USA. Each product goes through a series of testing and quality control processes to ensure a highly quality built product.

TECHNICAL SPECIFICATIONS

ITEM	WC5 Mini	WC5	WC32	WC48	WC64
Fuel	Propane/Natural Gas Diesel (No 1 or 2 Oil), Kerosene, JP8 Jet Fuel	Propane/Natural Gas Diesel (No 1 or 2 Oil), Kerosene, JP8 Jet Fuel	Propane/Natural Gas Diesel (No 1 or 2 Oil), Kerosene, JP8 Jet Fuel	Propane/Natural Gas Diesel (No 1 or 2 Oil), Kerosene, JP8 Jet Fuel	Propane/Natural Gas Diesel (No 1 or 2 Oil), Kerosene, JP8 Jet Fuel
Operating Voltage	12VDC, 120V AC, 240V AC	12VDC, 120V AC, 240V AC	12VDC, 120V AC, 240V AC	12VDC, 120V AC, 240V AC	12VDC, 120V AC, 240V AC
Burning Capacity	12 Gal/Day	37 Gal/Day	75 Gal/Day	150 Gal/Day	300 Gal/Day
People per Day	1	2	4	8	16
Fuel Consumption	Propane: 0.18 GPH	Propane: 0.29 GPH Gas: 0.29 Therm/hr Diesel: 0.27 GPH	Propane: 0.48 GPH Gas: 0.49 therm/hr Diesel: 0.42 GPH	Propane: 0.79 GPH Gas: .88 therm/hr Diesel: 0.72 GPH	Propane: 1.32 G Gas: 1.58 therm. Diesel: 1.12 GPI
Max Manifold Pressure Propane	14" w.c	10" w.c	10" w.c	10" w.c	10" w.c
Min Manifold Pressure Propane	11" w.c	9.5" w.c	9.5" w.c	9.5" w.c	9.5" w.c
Max Manifold Pressure Nat Gas		3.5" w.c	3.5" w.c	3.5" w.c	3.5" w.c
Min Manifold Pressure Nat Gas		3.0" w.c	3.0" w.c	3.0" w.c	3.0" w.c
Firing Rates (Diesel)	N/A	0.5-0.6 GPH	0.6-0.65 GPH	0.9-1.0 GPH	1.1-1.8 GPH
Max Hourly BTU Input (Gas)	18,000	50,000	100,000	175,000	250,000
Max Hourly BTU Input (Diesel)	N/A	70,000	100,000	175,000	250,000
Electrical	1.5 amp, 12VDC 1 amp, 120VAC 0.5 amp, 240VAC	4 amp, 120VAC 2 amp, 240VAC	4 amp, 120VAC 2 amp, 240VAC	4 amp, 120VAC 2 amp, 240VAC	4 amp, 120VAC 2 amp, 240VAC
Breaker Size	15 Amp	20 Amp	20 Amp	20 Amp	20 Amp
Ambient Operating Temperature	+32 °F (0 °C) to 150 °F (60 °C)	+32 °F (0 °C) to 150 °F (60 °C)	+32 °F (0 °C) to 150 °F (60 °C)	+32 °F (0 °C) to 150 °F (60 °C)	+32 °F (0 °C) to 150 °F (60 °C)
Dimension	24" x 16" x 25"	36" x 23" x 27"	46" x 24" x 27"	53" x 35" x 27"	64" x 45" x 27"
Collection Tray Volume (Gal)	0.75	1.5	3	6	12

TABLE 1-1. TECHNICAL SPECIFICATIONS

Attachment H: Installation Instructions (Page 2 of 7)

2. SAFETY

The incinerator is a safe, convenient appliance when assembled and used properly. However, as with all gas-fired and diesel-fired products, certain safeguards must be observed. Failure to follow these safeguards may result in damage or injury. If you have questions concerning assembly or operation, consult your dealer, gas/diesel appliance serviceman, or Ecojohn technical support.

WARNING

Read all instructions before proceeding. Do not operate this unit until you have read thoroughly and understand completely all instructions and safety rules contained in this manual. Save this manual and review frequently for continuing safe operation and instructing possible third-party users.

NOTICE

In the event that a problem arises, or service is required, reference the system data plate on the unit and contact your Ecojohn dealer, installer, or Ecojohn technical support for support: 1-866-ECOJOHN.

DANGER

OWNER'S RESPONSIBILITY

Incorrect installation, adjustment, and use of the incinerator could result in severe personal injury, death, or substantial property damage from fire, carbon monoxide poisoning, soot or explosion

System is only designed to incinerate wastewater. If other items are placed in the system, including but not limited to, disposal of hazardous material such as oils or corrosives, it may create a safety hazard

DO NOT ALTER THE ORIGINAL DESIGN

Tampering with or altering the burner design could seriously impair performance, resulting in loss of static pressure, damage to the system components, reduced air volume, heavy smoke, flame impingement, appliance sooting, hot gas puff-back, and asphyxiation or fire hazards.

LP-gas containers with their control valves shall be installed in compliance with the requirements of NFPA 1192/ANSI A119.2 or Title 24 CFR Part 3280.

FOR YOUR SAFETY

DO NOT store or use gasoline, or other flammable vapors and liquids in the vicinity of this or any other appliance

SPECIAL CARE MUST BE TAKEN TO KEEP SMALL CHILDREN AWAY FROM HEATED SURFACES

Attachment H: Installation Instructions (Page 3 of 7)

CAUTION

ELECTRICAL CAUTION

1. If any accessory is used on this appliance that requires an external electrical power source, the accessory when installed must be electrically grounded in accordance with local codes. In the absence of local codes, the following standards apply:

(U.S.) ANSI/NFPA No. 70-Latest Edition.

2. Do not cut or remove the grounding prong from the plug.
3. Keep the electrical supply cord and fuel supply hose away from any heated surface.

Depending on model, the incinerator will require 120V/240VAC or 12VDC input voltage.

3. INSTALLATION

NOTICE

PRE-APPROVED INSTALLER

- Contact Ecojohn for information on pre-approved installers.

PRE-INSTALLATION

1. The system meets the requirements of **NSF P157, Incinerating Toilet Systems – Health and Sanitation**
2. The installation must conform with the following, as applicable.
 - a. Local codes or, in the absence of local codes
 - ANSI Z21.61 - 1983 (1996) Gas Fired Toilet
 - CGA 5.2 - 1972 (2009) Gas Fired Toilet
 - b. Local codes or, in the absence of local codes,
CSAB 140.0-03 Oil Burning Equipment: General Requirements
 - c. THE INSTALLATION OF THE EQUIPMENT SHALL BE IN ACCORDANCE WITH THE REGULATION OF AUTHORITIES HAVING JURISDICTION AND CSA STANDARD B139.
3. Keep the area surrounding the appliance free of combustible materials, gasoline, and all other flammable liquids and vapors.
 - In order to install the incinerator, please refer to the instructions below. Install and use the incinerator and tanks in a dry and well ventilated space. See minimum clearances below.

Minimum front/back clearance (electrical panel side): 5"
Minimum side clearance (burner compartment side and tray access door sides): 12"

Attachment H: Installation Instructions (Page 4 of 7)

CAUTION

- When unloading or moving the incinerator, make sure to take necessary precautions. Use a pallet jack or forklift to move it; internals can get damaged if incinerator is dropped in the moving/handling process.

COMBUSTION AIR SUPPLY

WARNING

Do not restrict the flow of air to the appliance

NOTICE

If the room where the incinerator is being installed is small, or if the room has a ventilation fan, it is recommended that the combustion air be supplied to the furnace room through intakes from the outside of the building. The intakes must terminate facing down in order to avoid obstruction from rain, snow, leaves, etc. Openings must have one square inch of free area per 1,000 Btu.

VENTILATION SYSTEM

The chimney is built up by 6" (I.D) and 8" (O.D) double-wall modules that are very easy to handle and mount. The chimney has been closely tested so it is fire resistant, suitable for all kinds of fuel and appliances and for use at continuous operating temperatures of up to 2100 degrees F.

The WC5 Mini requires a 3" Type B vent pipe system.

NOTICE

Periodic examination of the venting system is required.

VENTILATION INSTALLATION

Before connecting any Propane or power to the unit, the vent system needs to be installed. Please follow these directions when installing the vent.

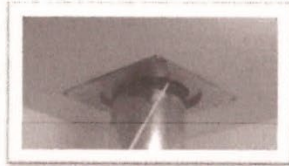
1. **Place incinerator:** Position incinerator at desired location. The unit should be positioned at least 5 inches from combustible surfaces. The flue outlet collar should be placed between the rafters or joists above, if possible.
2. **Frame Support Opening:** Drop a plumb bob to the center of the toilet's flue outlet and mark this center point on the ceiling. Cut a hole in the ceiling for the Chimney Pipes.



PICTURE 3-1. FRAME SUPPORT OPENING

3. **Install Support:** For installation into a flat ceiling, you may use a Firestop.

Attachment H: Installation Instructions (Page 5 of 7)



PICTURE 3-2. INSTALL SUPPORT

4. **Cut Roof Opening:** Cut an opening in the roof directly above the opening below, and at least 4 inches larger than the chimney's outside diameter to provide at least a 2-inch clearance all around the chimney. The chimney must be centered within the opening and maintain the 2-inch clearance to combustibles.
5. **Install Firestop Radiation Shield:** A Firestop Radiation Shield is required in multistory installations at each floor where the chimney penetrates into the attic. Note: a Firestop Radiation Shield is not installed where the chimney penetrates through the roof.
6. **Assembly Chimney Sections:** Lower the female end of the first Chimney Section through the Firebox. Twist-lock it clockwise onto the male end of the Anchor Plate on the incinerator. Turn Pipe Sections firmly clockwise to lock them together.



PICTURE 3-3. ASSEMBLY CHIMNEY SECTIONS AND ATTACH TO ANCHOR PLATE

7. **Install Attic Insulation Shield:** Install the Attic Insulation shield where the chimney passes into an attic. Slip the Attic Insulation Shield over the Chimney and Firestop Radiation Shield until the base sits squarely on the framed opening.
8. **Install Roof Support:** Use the Adjusted Roof Support to fasten the chimney pipe above the ceiling or on the roof.



PICTURE 3-4. INSTALL ROOF SUPPORT

9. **Attach Flashing:** In new constructions, assemble the Chimney Sections to a point above the roof, then slip the Flashing before extending the chimney above the roof. Allow space to permit sliding the next Chimney Section up through the Flashing. Always insure the chimney remains vertical (use level), and that at least a 2-inch clearance to combustible materials is maintained all around. Install the upper edge of the Flashing under the roofing. Nail to the roof along the upper edge of the Flashing. Be sure to follow local

Attachment H: Installation Instructions (Page 6 of 7)

building practices, as needed. Seal all nail heads with a non-hardening waterproof sealant. Do not put screws through the Flashing into the Chimney Pipe.

- 10. Finish Top:** Apply a high-temperature (500°F), non-hardening waterproof sealant around the chimney at the point where the Storm Collar will meet the chimney just above the Flashing. Slide the Storm Collar down over the chimney to the top of the Flashing. Tighten and seal the Storm Collar against the sealant. After installing sufficient Chimney Sections to meet the height requirement, attach the Chimney Cap onto the top of the chimney by holding the collar of the cap and twist locking it clockwise onto the chimney. Use an Extended Roof Bracket if the chimney extends more than 5 feet above the roof.

- 11. Ventilation installation is now complete.**

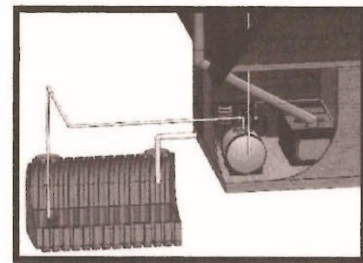


DRAWING 3-5 & 3-6 CHIMNEY INSTALLATION LAYOUT

HOSE/TANKS INSTALLATION

Use with Septic/In-Ground Holding Tank

1. Install a sewage grinder pump into the in-ground septic/holding tank.
2. Install 2" pvc piping from sewage tank up to a secondary waste tank (optional for WC5/WC32/WC48/WC64 systems) – **For WC5/WC32/48/64 the waste line can connect directly to the incinerator without a secondary tank. Note, the sewage pump has to be a manual pump model similar to a Zoeller 803**
3. Install piping from bottom of secondary waste container to the waste pump.
4. **Connect the waste pump to a check valve. The check valve should be installed as close to the waste pump as possible. Install pipe from the check valve to incinerator's waste inlet. DRAWING 3-6.**
5. (Optional Step) If you are also installing a royal mist container, place the container on the provided stand.
6. (Optional Step) install tubing from the outlet of the royal mist to the inlet of the dosing pump.
7. (Optional Step) install tubing from the outlet of the dosing pump to a tee connection in the check valve piping.
8. **Hose and tank installation is now complete**



Attachment H: Installation Instructions (Page 7 of 7)

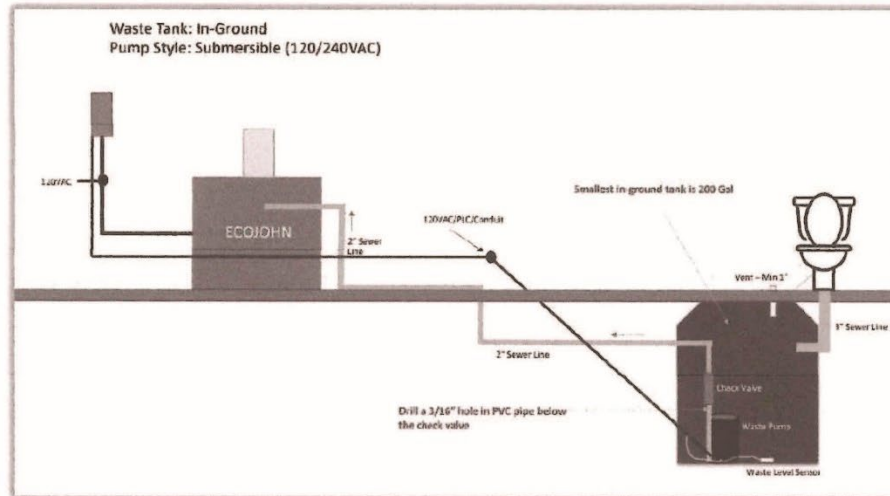
Use with an above ground holding tank

1. Install pvc pipe from toilet outlet and fixtures to a waste tank.
2. Install waste line from bottom of primary waste tank to the macerator pump.
3. Connect the macerator pump to a check valve. The check valve should be as close to the macerator pump as possible.
4. Install a waste line from the check valve to incinerator's waste inlet.
5. (Optional Step) If you are also installing a royal mist container, place the container on the provided stand.
6. (Optional Step) install tubing from the outlet of the royal mist to the inlet of the dosing pump.
7. (Optional Step) install tubing from the outlet of the dosing pump to a tee connection in the check valve piping.
8. **Hose and tank installation is now complete**

NOTICE

- If the waste holding tank is setup higher up than the incinerator, make sure there is a loop or release valve on the pipe from the waste pump that prevents black water from siphoning into the burn chamber. If there is no loop, black water could fill up the burn chamber, which will result in failing ignition of burner.
- If the waste holding tank is installed below the toilet, ensure there is a check valve installed right above the submerged waste pump

BELOW ARE LAYOUTS OF THE FIVE MOST COMMON TANK SETUPS:



Attachment I: Public Notice



PUBLIC NOTICE

The Southern Nevada District Board of Health will conduct a PUBLIC HEARING on Thursday, August 22, 2024 at 9:00 AM during its regular monthly meeting in the Red Rock Conference Room at the Southern Nevada Health District at 280 S. Decatur Blvd., Las Vegas, Nevada, to approve or deny a variance request filed by Todd and Maria McKinney ("Petitioners"), to permit and install a new individual sewage disposal system on the property located at 2130 Via Vita St., Mt. Charleston, NV 89124, APN 129-02-410-065.

The variance request is made to allow the Petitioners to permit the installation of a septic tank and effluent disposal system not in accordance with the *Southern Nevada District Board of Health Regulations Governing Individual Sewage Disposal Systems and Liquid Waste Management*. The variance will allow the Petitioners to install an ECOJOHN® waste combustion (incinerator) system in lieu of a soil absorption system on an undersized lot.

All interested persons may appear at the hearing and state their positions. All written and oral submissions will be considered by the Southern Nevada District Board of Health. Written comments must be forwarded by August 21, 2024 to:

Daniel Isler, P.E., REHS
Environmental Health Engineer/Supervisor
Southern Nevada Health District
P.O. Box 3902
Las Vegas, Nevada 89127
isler@snhd.org

The variance application is available for review at the Southern Nevada Health District, 280 S Decatur Blvd, Las Vegas, Nevada 89107. Please contact Cherie Custodio at (702) 759-0660 to schedule an appointment to review the application during the normal business hours of 8:00 AM to 4:30 PM.

- S -

Chris Saxton, MPH-EH, REHS
Environmental Health Director

August 6, 2024
Date



N Engineering & Architecture, Inc.
Architects • Interior Design
365 S. Rockwood
2100 Kingston Drive
San Marino, CA 91108
626.598.1511

DESIGN CONSULTANT

NOT FOR CONSTRUCTION

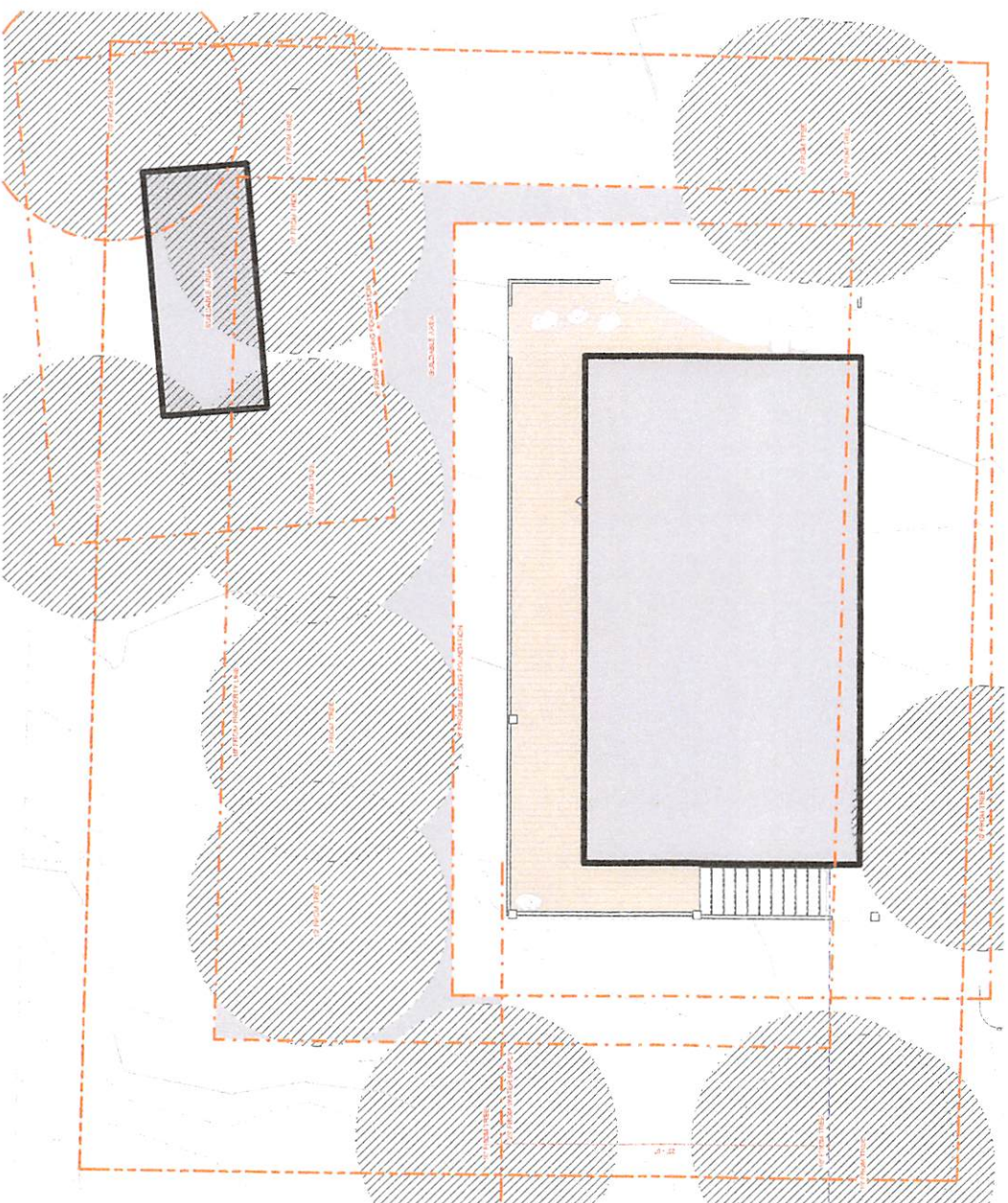
MILHARADA CABIN
2130 VIA VITA STREET
LAS VEGAS, NV 89124

NO.	DESCRIPTION	DATE

SEWER SITE PLAN

Date Issued: 08/27/24
A020

8/27/2024 6:54:55 PM
Scale: 1/4" = 1'-0"
Sheet: 1



SEWER SITE PLAN



Committee Participation Interest Form Summary

SUMMARY OF COMMITTEE INTEREST FORMS – FY2025

At-Large Member Selection Committee	DHO Annual Review Committee	DHO Succession & Planning Committee	Finance Committee	Nomination of Officers Committee
Scott Black Joseph Hardy	Scott Black Jim Seebock	Scott Black	Scott Black Scott Nielson	

BOARD OF HEALTH COMMITTEE MEMBERS – FY2024

At-Large Member Selection Committee	DHO Annual Review Committee	DHO Succession & Planning Committee	Finance Committee	Nomination of Officers Committee
Scott Black Pattie Gallo Joseph Hardy Marilyn Kirkpatrick Frank Nemec	Scott Black Nancy Brune Joseph Hardy Marilyn Kirkpatrick Jim Seebock	Scott Black Nancy Brune Pattie Gallo Marilyn Kirkpatrick Frank Nemec	Scott Black Bobbette Bond Nancy Brune Marilyn Kirkpatrick Scott Nielson	Scott Black Bobbette Bond Nancy Brune Marilyn Kirkpatrick Frank Nemec

MOTION

Motion to approve the composition of the SNHD Board of Health Committees, as discussed.





DATE: August 22, 2024

TO: Southern Nevada District Board of Health Members

FROM: Fermin Leguen, MD, MPH, District Health Officer *FL*

SUBJECT: District Health Officer Report

Substance Misuse and Overdose Prevention Summit

On August 1, the Southern Nevada Health District, partners and community members convened for the 2024 Substance Misuse and Overdose Prevention Summit. Titled “The Beat of Community: Exploring the Changing Substance Use Movement,” the summit focused on addressing and prioritizing the evolving needs of the local response to the overdose crisis. The summit was held at the Cox Pavilion 4505 S. Maryland Parkway, Las Vegas, NV 89154 and coordinated by the Health District in collaboration with the PACT Coalition, Nevada HIDTA’s Overdose Response Strategy, and the Nevada Institute for Children’s Research & Policy.

Participants in the summit addressed ways of bringing attention to the needs of people who use drugs and their loved ones as well as emphasized the flexibility that is needed to embrace fresh perspectives and innovative approaches to the overdose crisis.

Topics of the summit included:

- Surveillance of the local drug supply
- Exploring strengths and readiness for substance misuse prevention in Southern Nevada
- Understanding the efficacy and benefits of overdose prevention sites
- Trauma-informed care
- Digital outreach
- Field-based Wound Care for non-clinicians

The keynote speaker was Sam Rivera, executive director of OnPoint NYC, a New York-based overdose prevention site. Rivera was recognized as one of Time Magazine’s 100 Most Influential People of 2023.

The summit also included the showing of “Silence in the Streets,” a documentary film about the challenges faced by people who live in urban environments, the social determinants of health for those in U.S. cities and the barriers people face when seeking health care.

National Community Health Center Week

The Southern Nevada Community Health Center celebrated National Health Center Week August 4-10, by raising awareness of its services, celebrating its dedicated employees, and showing appreciation for patients with giveaways and raffle prizes.

Community health centers provide comprehensive care to more than 30 million patients at 14,500 sites throughout the country. National Health Center Week is a time to spotlight the ways in which these vital organizations improve the well-being of the communities they serve by increasing access to care and improving health outcomes for vulnerable populations.

Nationally, one in 11 Americans are health center patients. Of those:

- 19% are uninsured
- 61% are publicly insured
- 90% are low-income
- 64% are members of racial and/or ethnic minority groups

At the local level, the Southern Nevada Community Health Center, a Federally Qualified Health Center, offers services at its main location at 280 S. Decatur Blvd., Las Vegas, NV 89107, and a second location at the Fremont Public Health Center at 2380 E. Fremont St., Las Vegas, NV 89104. Services provided include primary care, family planning, the Ryan White Program, behavioral health, sexual health, refugee health, pharmacy, telehealth and enabling services.

In 2023, the Southern Nevada Community Health Center served 9,863 patients for a total of 23,351 patient encounters, of which 11,154 (47.8%) were provided to uninsured patients. The Southern Nevada Community Health Center offers services on a sliding fee scale, which allows patients to pay according to their income and federal poverty levels, and no one is turned away due to an inability to pay. In 2023, sliding fee adjustments saved Southern Nevada Community Health Center patients more than \$2.8 million for health care services provided.

For more information about the Southern Nevada Community Health Center, go to www.snchc.org. For information about National Health Center Week, visit <https://healthcenterweek.org/about-nhcw/>.

Legionnaires' Disease Investigation

On July 26, the Health District announced it was investigating two travel-associated cases of Legionnaires' disease in guests who stayed at Caesars Palace Hotel and Casino. On two occasions during the last six months, individuals were diagnosed with Legionnaires' disease shortly after a stay at Caesars Palace Hotel and Casino. One individual stayed during December 2023; the other individual stayed during June 2024.

Water sampling was conducted after learning of each case. Water sampling after the first case was conducted in the Augustus Tower, guest rooms and other identified potential sources, and all samples tested negative for *Legionella*. Water sampling from the property's Palace Tower was conducted in July after learning of the second case. Nineteen initial samples were taken at various points in the water system. One sample tested positive for *Legionella*; all other samples tested negative. The facility conducted remediation of the water system and subsequent testing came back negative. The facility is cooperating with the Health District's investigation and steps to notify guests of the potential for exposure and ways to minimize risk were implemented.

Symptoms of Legionnaires' disease will usually begin within two to 10 days after exposure to the bacteria. However, people should watch for symptoms such as cough, shortness of breath, fever, muscle aches and headaches for up to two weeks after exposure. Guests who stayed at Caesars Palace prior to July 11, 2024, and have not developed symptoms are not at risk for disease. Guests whose stay at Caesars Palace included time from July 11, 2024 to July 24, 2024 and who experienced symptoms up to 14 days after their stay should report their illness to the Health District using a survey posted on its website at <https://survey.alchemer.com/s3/7913781/24-036-Investigation-Survey-Caesars-Palace>.

People who are at increased risk of getting sick include:

- People 50 years or older
- Current or former smokers
- People with chronic lung disease
- People with weakened immune systems
- People who take drugs that can weaken their immune systems (after a transplant operation or chemotherapy)
- People with underlying illnesses such as diabetes, kidney failure, or liver failure

More information on Legionnaire's disease is available on the Centers for Disease Control and Prevention website at www.cdc.gov/legionella/index.html.

National Obesity Month

September is Childhood Obesity Awareness Month, a time to learn about how to prevent obesity and reduce the stigma around it, and the Health District's Office of Chronic Disease Prevention and Health Promotion, along with Partners for a Healthy Nevada Coalition will be promoting the 5-2-1-0 guidelines. These evidence-based recommendations can help children — and people of all ages — adopt healthier lifestyles.

The 5-2-1-0 guidelines encourage people to:

- Eat 5 fruits and vegetables each day
- Get 2 hours or less of recreational screen time each day
- Get 1 hour of physical activity each day
- Drink 0 sugary beverages each day

Obesity is a complex, chronic disease with many contributing factors. Children with obesity are more likely to be diagnosed with related chronic diseases such as type 2 diabetes, high blood pressure, and heart disease. They are also more likely to have obesity as adults. In Clark County, approximately 15% of high school students have obesity and 17% are overweight. In Nevada, 33% of children entering kindergarten already have obesity or are overweight. Nationwide, the Centers for Disease Control and Prevention reports that approximately 19.3% of children (14.4 million) have obesity.

Racial and ethnic disparities in obesity underscore the need to address social determinants of health such as poverty, education and housing, to remove barriers to health. In the United States, 25% of Hispanic children; 24.2% of non-Hispanic Black children; 16.1% of non-Hispanic white children; and 8.7% of non-Hispanic Asian children have obesity.

During Childhood Obesity Awareness Month and throughout the year, the Health District promotes access to its free programs and resources that help families live healthier lives. For activities and events scheduled during the month as well as resources in English and Spanish, go to the [Get Healthy Clark County](#) and Spanish-language [Viva Saludable](#) websites or call (702) 759-1270.

Mosquito Surveillance Update

As of August 12, Health District Environmental Health staff have set 2,092 traps throughout Clark County and submitted 2,444 sample pools, representing 38,687 mosquitoes, to the Southern Nevada Public Health Laboratory for analysis. Of the sample pools submitted, 385 tested positive for West Nile virus in 46 ZIP codes and 21 tested positive for St. Louis encephalitis in eight ZIP codes.

In Clark County, there have been 22 cases of West Nile virus reported in humans, 11 neuroinvasive cases — all requiring hospitalization — and 11 non-neuroinvasive cases. There have been no reported deaths this season. There was minimal West Nile virus activity reported in 2020, 2021, and 2023. In 2019, 43 confirmed human cases were reported. Two human cases of West Nile Virus were reported in 2023. West Nile virus is spread to people through the bite of an infected mosquito.

Most people infected with the virus will not develop symptoms. People who become ill may develop fever, headache, nausea, vomiting and fatigue. Some people may develop a neuroinvasive form of the disease that causes encephalitis (inflammation of the brain) or meningitis (inflammation of the membranes surrounding the brain and spinal cord). About one in five people infected with West Nile virus will develop symptoms that can include fever, headache, body aches, vomiting, diarrhea or rash. About one in 150 will develop more serious, sometimes fatal, illness. People who think they might have West Nile should talk with their health care provider.

The Health District continues to urge people to Fight the Bite and reduce the risk of mosquito-borne illnesses by taking preventive measures:

- Eliminate standing water and other breeding sources around their homes. *Aedes aegypti* breed in small containers that collect rain or irrigation water, such as children's toys, wheelbarrows and plant saucers, and even bottle caps.
- Prevent mosquito bites by using an Environmental Protection Agency (EPA)-registered insect repellent. Wear loose-fitting, long-sleeved shirts and pants.
- Report mosquito activity to the Health District's surveillance program at (702) 759-1633. To report a green pool, people should [contact](#) their local code enforcement agency.

More Fight the Bite tips and resources are available at www.southernnevadahealthdistrict.org/programs/mosquito-surveillance/mosquito-bite-prevention/ and on the Centers for Disease Control and Prevention website at www.cdc.gov/mosquitoes/prevention/index.html.

The Health District's seasonal mosquito surveillance reports are available at www.southernnevadahealthdistrict.org/programs/mosquito-surveillance/arbovirus-update/.

Community Meetings

Week ending 08/04:

Media/Interviews/Panelist/Presenter/Events:

- Attended the “2024 Southern Nevada Substance Misuse and Overdose Prevention Summit” facilitated by the Southern Nevada Health District

Professional Development/Conferences:

- Attended the “Voices From the Field: Centering Lived and Living Experience in Overdose Prevention” webinar facilitated by The National Council
- Attended the “Syphilis and HIV Update and Review” webinar facilitated by the Pacific AETC
- Attended the “Stopping Syphilis - The HHS Summer Seminar Series” webinar facilitated by Rose Li & Associates

Ad-hoc Meetings:

- Participated in a meeting with Commissioner Segerblom regarding a grant for the Southern Nevada Community Health Center

Week ending 07/28:

Monthly:

- Participated in the individual Southern Nevada District Board of Health Agenda Review meeting with Councilwoman Gallo, Councilman Black, and Scott Nielson
- Participated in the Southern Nevada District Board of Health meeting

Quarterly:

- Participated in the Southern Nevada Health District Regional Trauma Advisory Board (RTAB) meeting

Annually:

- Participated in the Southern Nevada District Board of Health Nomination of Officers Committee meeting

Week ending 07/21:

Monthly:

- Participated in the Southern Nevada Community Health Center Finance and Audit Committee meeting
- Participated in the Southern Nevada Community Health Center Governing Board meeting
- Participated in the individual Southern Nevada District Board of Health Agenda Review meeting with Commissioner Kirkpatrick, Commissioner Segerblom, and Mayor Hardy

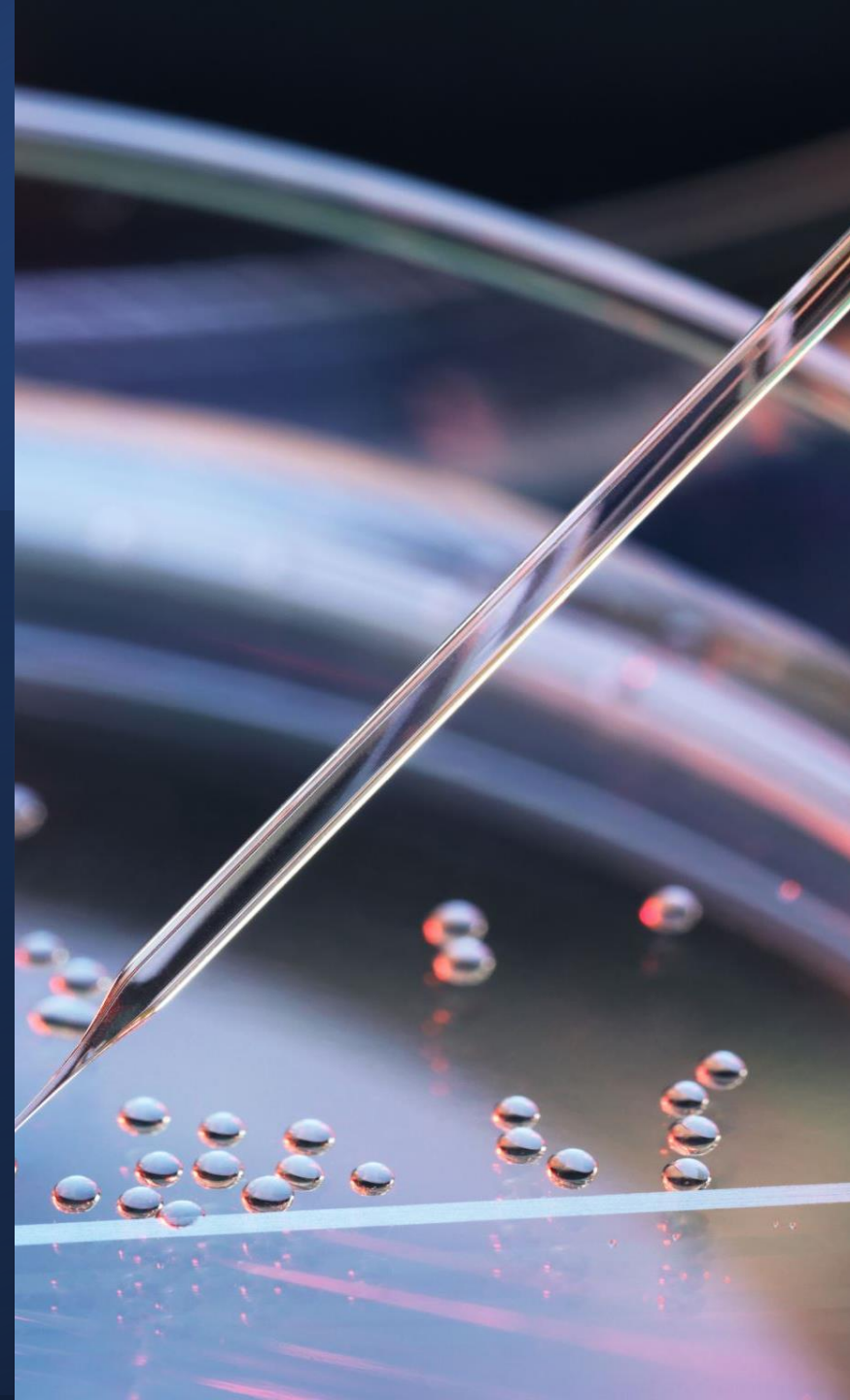
Ad-hoc Meetings:

- Participated in a meeting with Commissioner Kirkpatrick regarding the expansion to the Southern Nevada Public Health Lab (SNPHL)

Legionella Program Southern Nevada Health District

August 22, 2024
Board of Health

Devin Raman, MPH
Senior Disease Investigation and Intervention Specialist
Acute Communicable Disease Control
Division of Disease Surveillance and Control



Legionellosis 101

•History

- First identified cases in 1976 at an American Legion Convention with reports of illness within 2 weeks after.
 - 221 total cases of pneumonia
 - 2/3 hospitalized
 - 34 deaths
- *Legionella pneumophila* was isolated and found to be the cause of death

•Transmission

- Spread through breathing in contaminated water droplets
 - Mistifiers, showers, fountains, etc.
- Primary route of transmission is droplets and NOT person to person

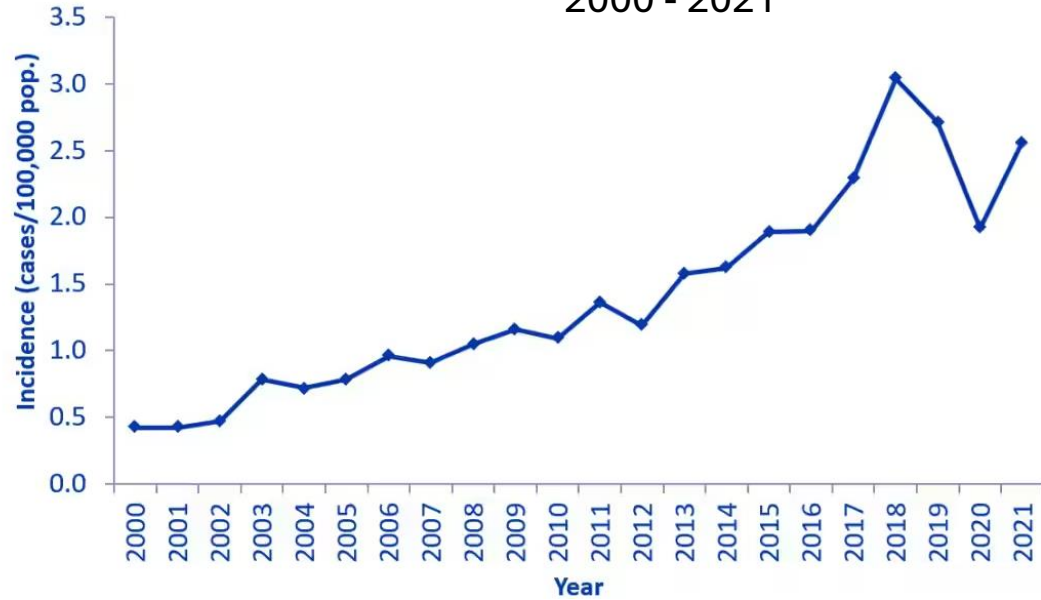
Legionellosis

101

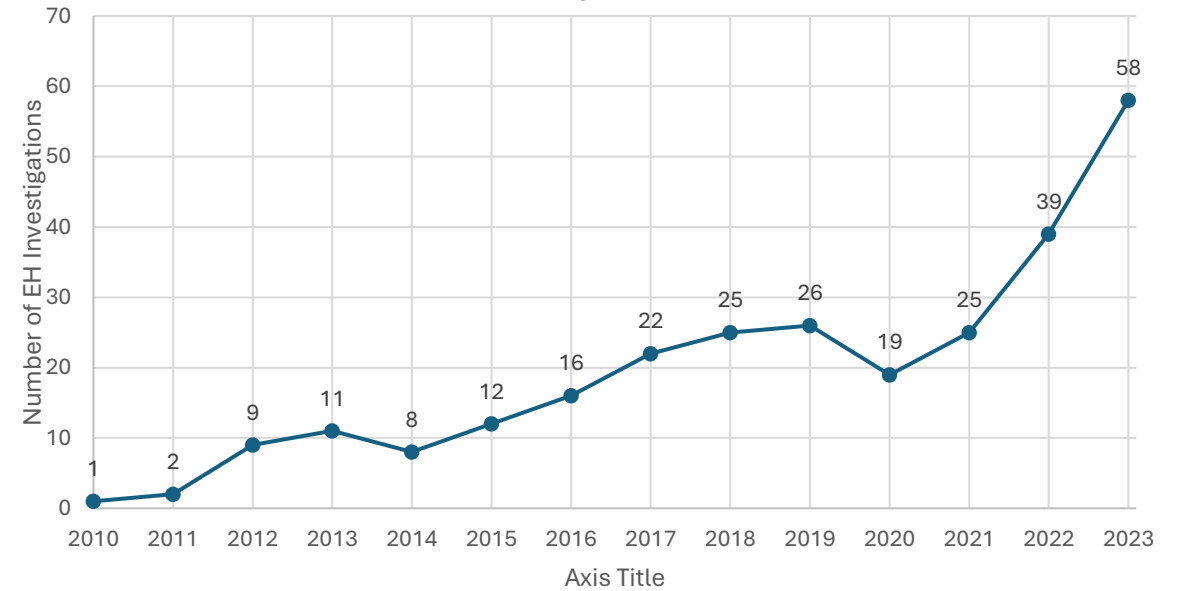
- **Clinical presentation**
 - Legionnaire's Disease (LD) – severe pneumonia
 - Fever, cough, difficulty breathing, muscle aches
 - Incubation: 2-14 days
 - 10% case fatality rate in the community
 - 25% case fatality rate in healthcare facilities
 - More at risk:
 - 50 years and older
 - Immunocompromised
 - Tobacco smoking
 - Pontiac Fever – mild respiratory disease
 - Fever, cough, muscle aches
 - Incubation: few hours-3 days
 - Self-resolves
- **Treatment** - antibiotics
- **Prevention**
 - Public education during suspected clusters
 - Environmental health measures

Legionellosis

Legionnaire's Disease in the United States, 2000 - 2021



Environmental Health *Legionella* Investigations in Clark County, NV, 2010-2023



Legionellosis in Clark County, NV 2024

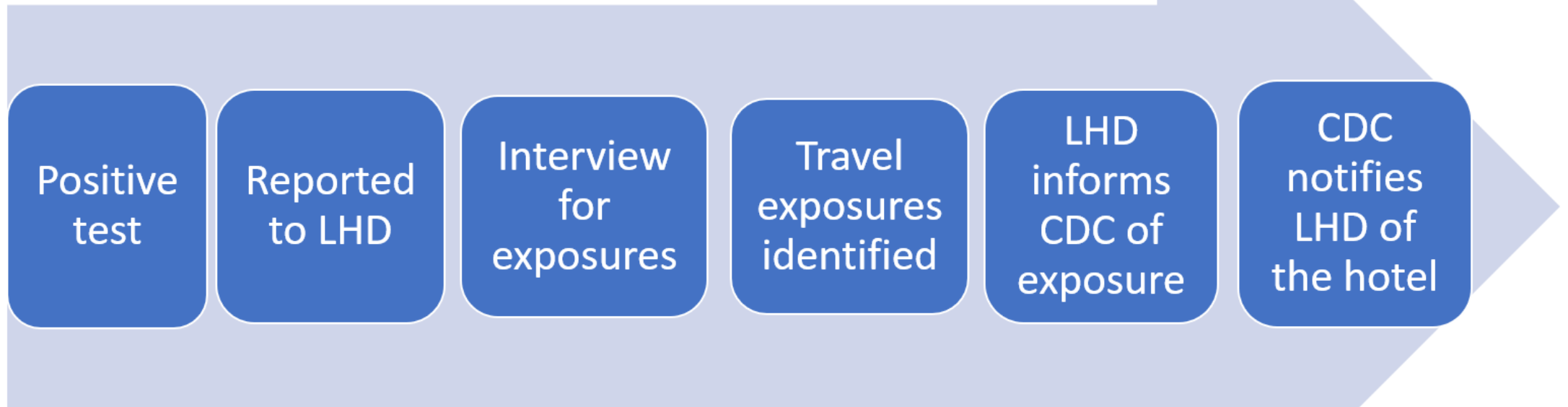
As of July 31, 2024:

25 total cases reported

- **Local case** – a case residing in Clark County, NV
 - 15 cases reported
 - 2 healthcare facility associated
 - 13 sporadic local cases
 - 15 hospitalizations
 - 2 deaths
- **Travel associated case** – a case in a non-Clark County resident that is known to have been in Clark County at an identifiable facility/resort/place of potential exposure during their incubation period.
 - 10 cases reported

Reporting Travel Associated Cases

SNHD



- LHD – local health department
- CDC – Centers for Disease Control and Prevention

Reporting Travel Associated Cases

SNHD

Receive
notification
from CDC

DSC confirms
info provided
by CDC

DSC and EH
schedule site
visit

- DSC – Division of Disease Surveillance and Control
- CDC – Centers for Disease Control and Prevention

DSC Investigation of Travel Associated Cases

National practice: EH sampling after 2 cases

SNHD practice: EH sampling after single case

- Proactive sampling as opportunity for early remediation
- Received a NACCHO Promising Practice award in 2017

DSC's Role On-site for TACs

- Verify guest stay, dates, and room number provided
- Provide answers to facility regarding investigation
- Support EH during their assessment
- Notification letter provided

- EH – Environmental Health
- NACCHO – National Association of County and City Health Officials
- DSC – Disease Surveillance and Control
- TACs – Travel Associated Cases

DSC Investigation of Travel Associated Cases

- EH – Environmental Health
- DSC – Disease Surveillance and Control
- TACs – Travel Associated Cases

DSC's Role in Cluster Investigations of TACs

- CDC consultation call conducted with SNHD and state epidemiologist.
- Meeting with the facility to discuss full investigation
- Public notification and case finding initiated
 - Public notifications (per statute)
 - media release
 - guest notifications
 - Use of survey to gather illness reports
- Identify extent of contamination (facility testing)
- Mitigation efforts (remediation and additional testing)

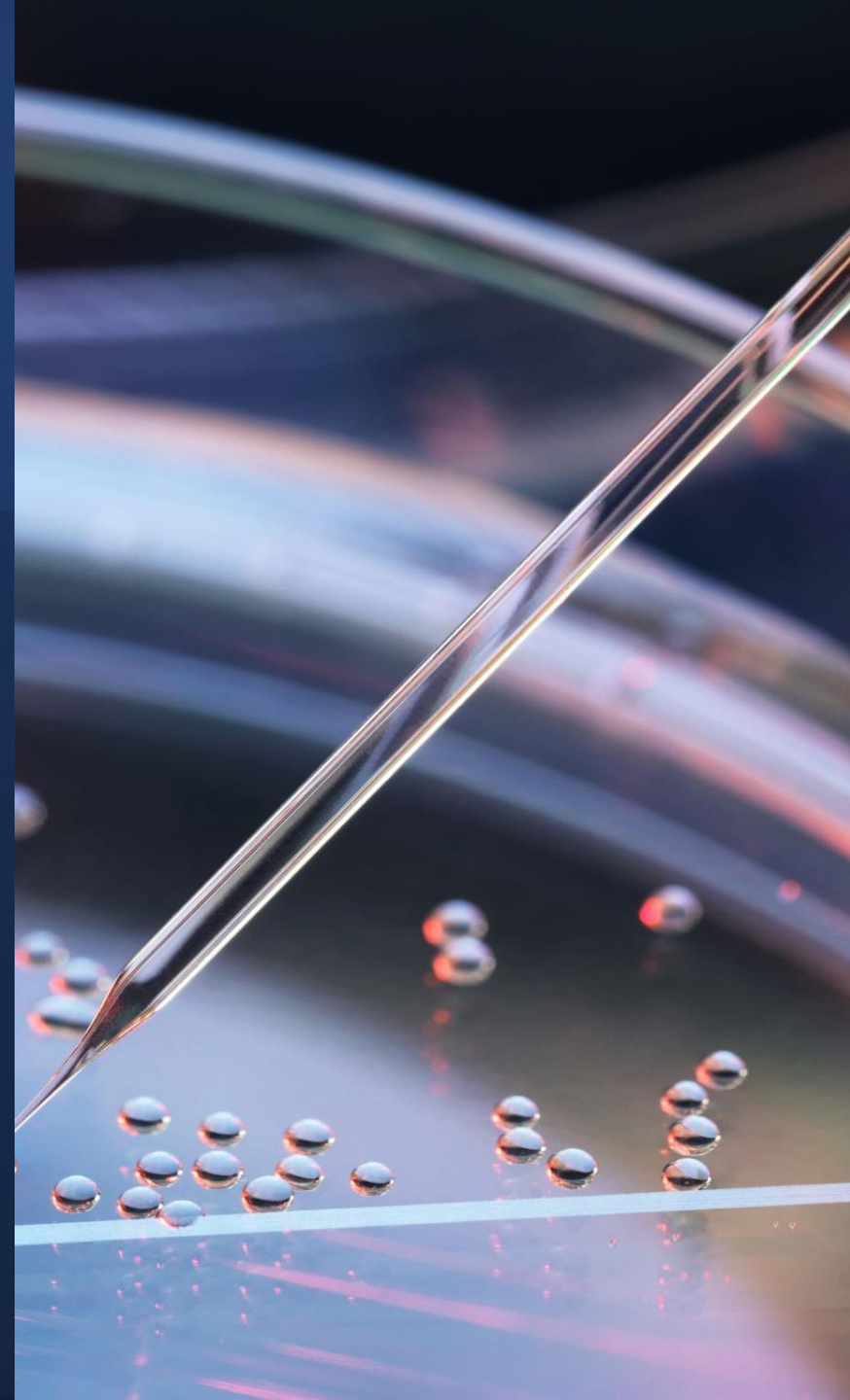
DSC's Strategies

- Strengthen existing collaboration and partnerships (DSC-EH-CDC and facilities)
- Conduct meetings and events targeting high risk facilities to educate and assist their understanding and importance of water management plans

SNPHL *Legionella* Testing

Southern Nevada Public Health Laboratory

William Bendik, MPH MLS (ASCP)



SNPHL *Legionella* Testing

- SNPHL- Southern Nevada Public Health Laboratory
- ELITE- Environmental *Legionella* Isolation Techniques Evaluation
- EH- Environmental Health

Test development: *Legionella* testing began at SNPHL in August of 2023. It presented as an opportunity to provide faster and more accurate test results to SNHD EH and SNHD Epidemiologists following a *Legionella* clinical case investigation. Testing was previously performed at a local contract laboratory.

Testing standards: Testing of environmental water samples for *Legionella* species is primarily certified through the CDC ELITE process. Certification is renewed annually by successfully completing 2 “blind” survey panels containing *Legionella* or non-*Legionella* bacteria. Participating laboratories are not only graded on the correct values but are also compared to one another for consistency in methods.

SNPHL *Legionella* Testing

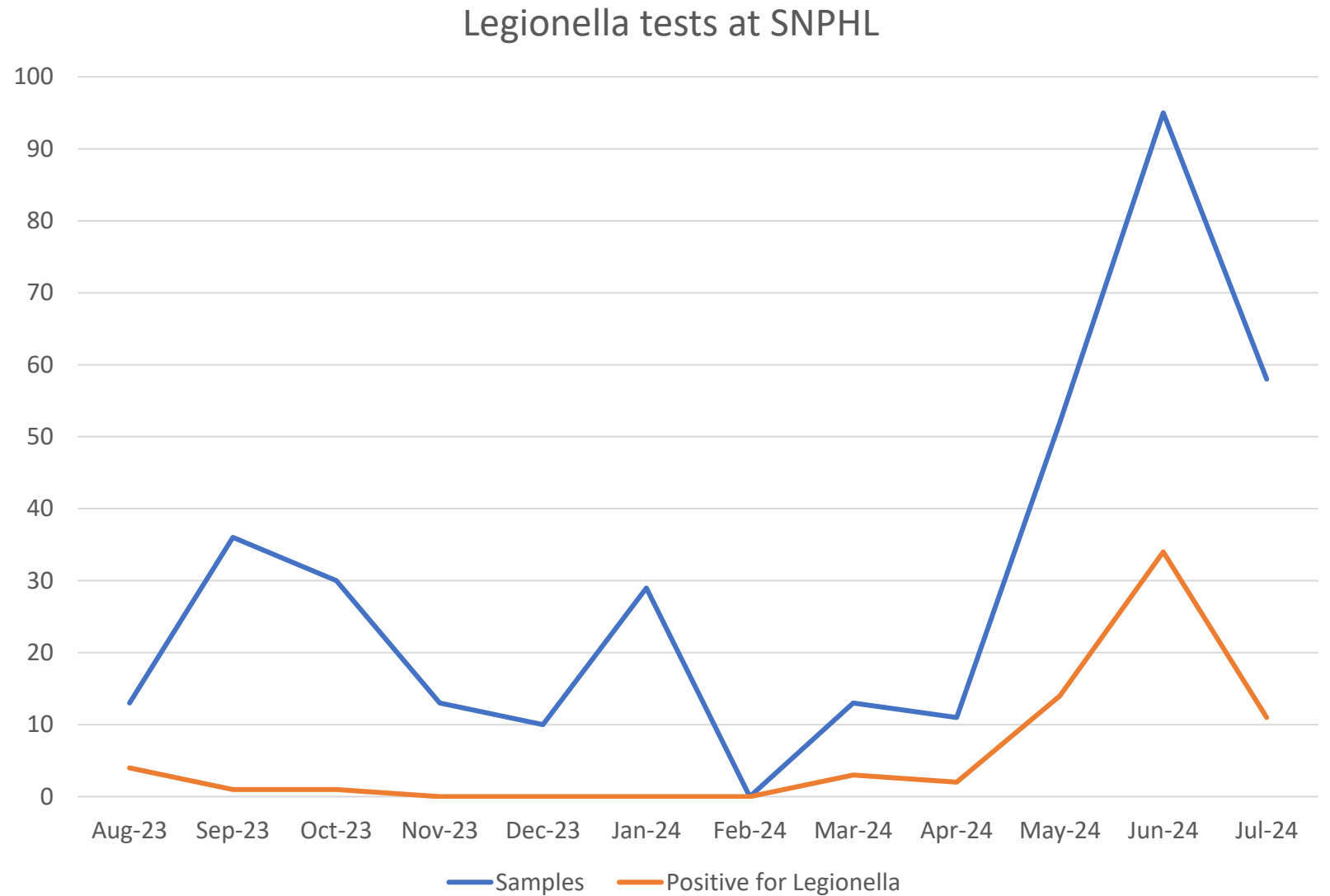
Sharing the burden: *Legionella* water sample testing is broken down at SNPHL into 2 major stages. The specialized work is performed in 2 departments:

1. Sample intake and processing: samples are delivered to SNPHL by EH staff and received at the front desk. Front desk staff are responsible for Chain of Custody and notification to Virology department. Virology department staff are responsible for filtering and concentrating solids (including possible *Legionella* bacteria) using a vacuum manifold and preparing the samples onto specialized microbiology growth media (agar).
2. Inspection for growth, confirmation, and reporting: The prepared agar plates are delivered to the Microbiology department, where they are incubated and inspected daily for growth that appears like *Legionella*. Any colonies resembling *Legionella* are tested, confirmed and serotyped. Plates with growth confirmed to be *Legionella* are also quantified for CFUs. Reports are prepared and sent over to SHND EH once all testing is completed.

- SNPHL- Southern Nevada Public Health Laboratory
- EH- Environmental Health
- CFU- Colony Forming Units

SNPHL *Legionella* Testing

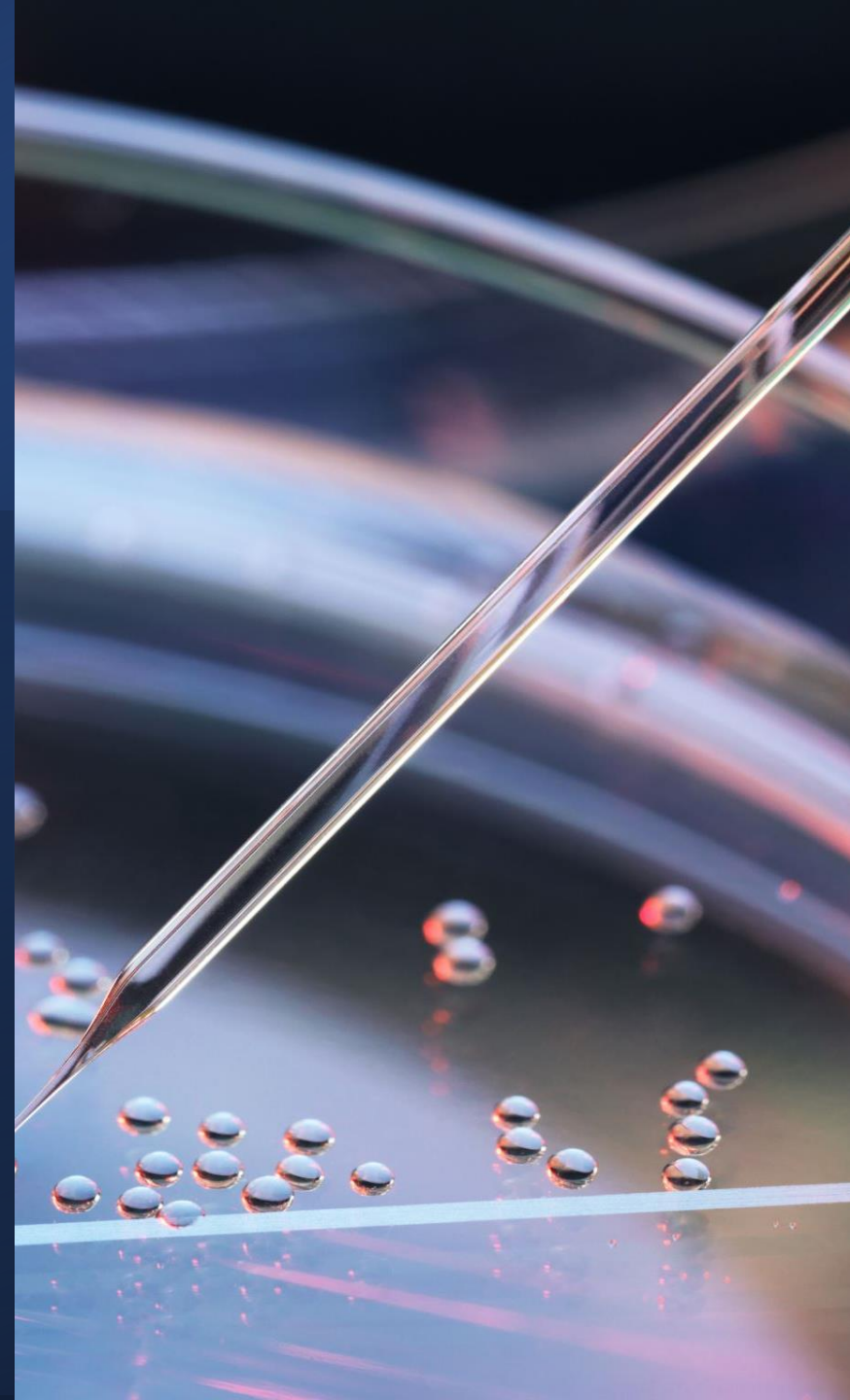
• SNPHL- Southern Nevada Public Health Laboratory



SNHD *Legionella* Program

Environmental Health Response

Robert Cole, REHS



SNHD *Legionella* Program: A Preventative Approach

Legionella Prevention

- Water Management Programs (WMP's) – keeping *Legionella* out of water systems
- Water Sampling – checking for *Legionella* growth
- Outreach Projects – educating the community about risk and prevention strategies



Misting Systems on a Humid Day

Legionella
Investigations:
Bridging the Gap
Between Facilities
and SNHD

SNHD *Legionella* Seminar on February 29, 2024

- 90 attendees from the resort community
 - Attendees consisted of risk management, facilities, legal, engineering, and housekeeping staff
- Environmental Health (EH) and Acute Communicable Disease Control (ACDC) discussed Epidemiology, Single Case and Outbreak investigations for Legionnaires' disease
- Question and answer sessions were held after each presentation with topics such as sampling locations, HIPAA protection, and flushing protocol were discussed

SNHD *Legionella* Program: Looking Ahead

Upcoming SNHD *Legionella* Seminar scheduled for early 2025

- SNHD and Nevada Department of Health collaboration
- Full day event is planned to discuss *Legionella* topics and The basics of Water Management Programs
- Target audience is Resort, Hotel and Medical Facility staff

SNHD *Legionella*
Program: Looking
Ahead

SNHD WMP Evaluation Tool

- As part of a CDC grant, SNHD staff is developing a Water Management Program (WMP) evaluation tool specific to Hotels
- Many WMP's are written to satisfy a memorandum or regulation specific to the facility, and are often inadequate for Legionella prevention
- The SNHD WMP evaluation tool will be used to assign a score to the WMP based on current CDC guidelines

SNHD *LEGIONELLA* PROGRAM

Field Photos of Sampling Sites



Cooling Towers



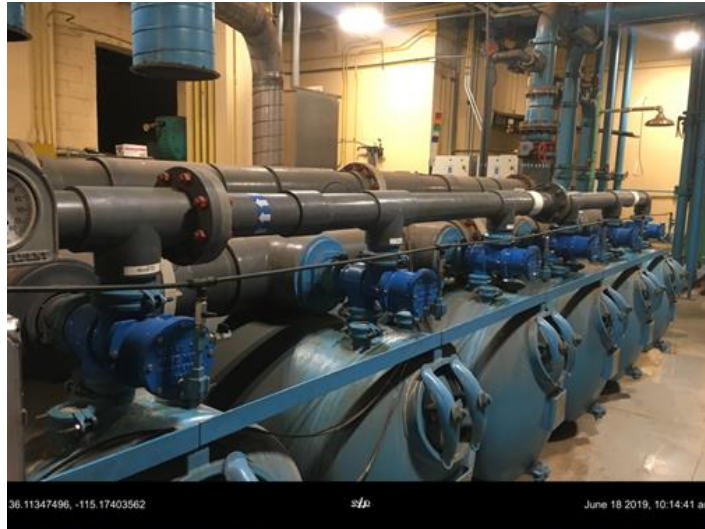
Community Park Sprinklers



Contaminated Misting System at Job Site

SNHD *LEGIONELLA* PROGRAM

Field Photos of Sampling Sites



Unconventional Sampling Sites

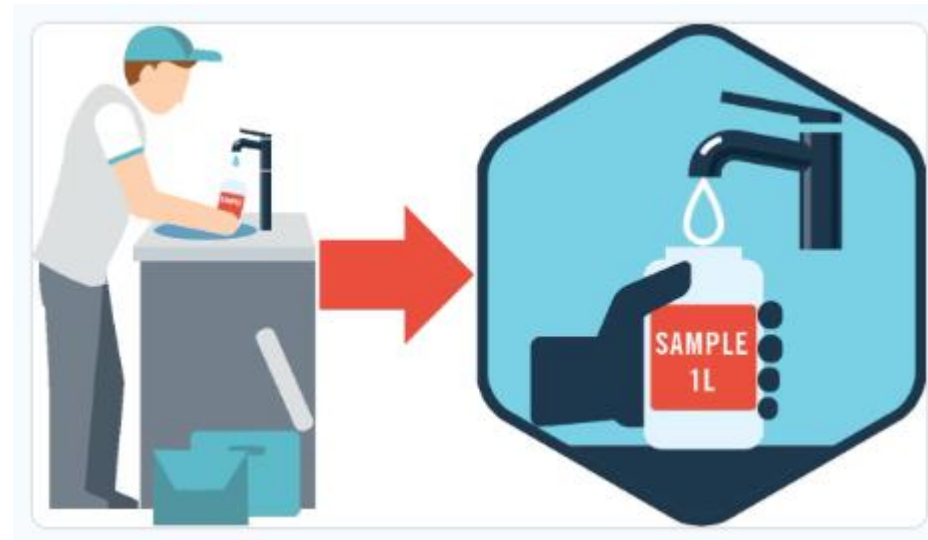


Evaporative Coolers at a Nursery

Environmental Sampling

Sampling

- Two types
 - Water sample
 - Collection of water from different sources around the building
 - Tells us about the health of the building's water system
 - Swab samples
 - Wipe a swab around the fixtures
 - Tells us about the fixture itself
- Sampling hot water returns is done on a case-by-case basis



CDC *Legionella* Sampling Guide

<https://www.cdc.gov/legionella/downloads/cdc-sampling-procedure.pdf>

Photo Credit: CDC

Travel-Associated Investigation

Sample

- Negative water sample results?
 - No further action for Environmental Health team
- Positive water sample results?
 - Facility is required to conduct remediation of the water system to control *Legionella* risk
 - Facility is required to conduct post remediation sampling to monitor *Legionella* levels for the next 14 months

*1 CFU/ml is considered positive

Remediation Plans

Remediation Efforts

- SNHD EH staff will review the facility remediation plans prior to an event
- EH staff reviews chlorine remediation plans for potential issues with water safety for occupied guest rooms
- EH staff guide facility to the strategic point to sample, once remediation of water system has taken place

Residential Investigations

SNHD investigates confirmed cases of Legionnaires' Disease in local residents with no hotel exposure.

- EH contacts the patient or family member and offers no-cost residential sampling.
 - Single Family Homes
 - Condominiums
 - Apartments
 - AIRBNBs
- Samples may also be taken at other potential exposures sites.
 - Job site – Dry wall manufacturing
 - Medical Facilities – Dialysis center
 - Recreation – Day spa
- Education is provided to the patient and family regarding *Legionella* and prevention measures.



Residential Hot Tub

Residential Investigation Procedures

Sample

- Negative results?
 - No further action
- Positive results?
 - SNHD makes recommendations on preventative measures that the resident can take to reduce Legionella presence in their water systems:
 - Routine flushing of all fixtures
 - Routine water heater maintenance
 - Cleaning or replacing water fixtures

Questions?

Lauren DiPrete

Environmental Health Supervisor

Outbreak Response

Southern Nevada Health District

702-759-1504

diprete@snhd.org

Robert Cole

Sr. Environmental Health Specialist

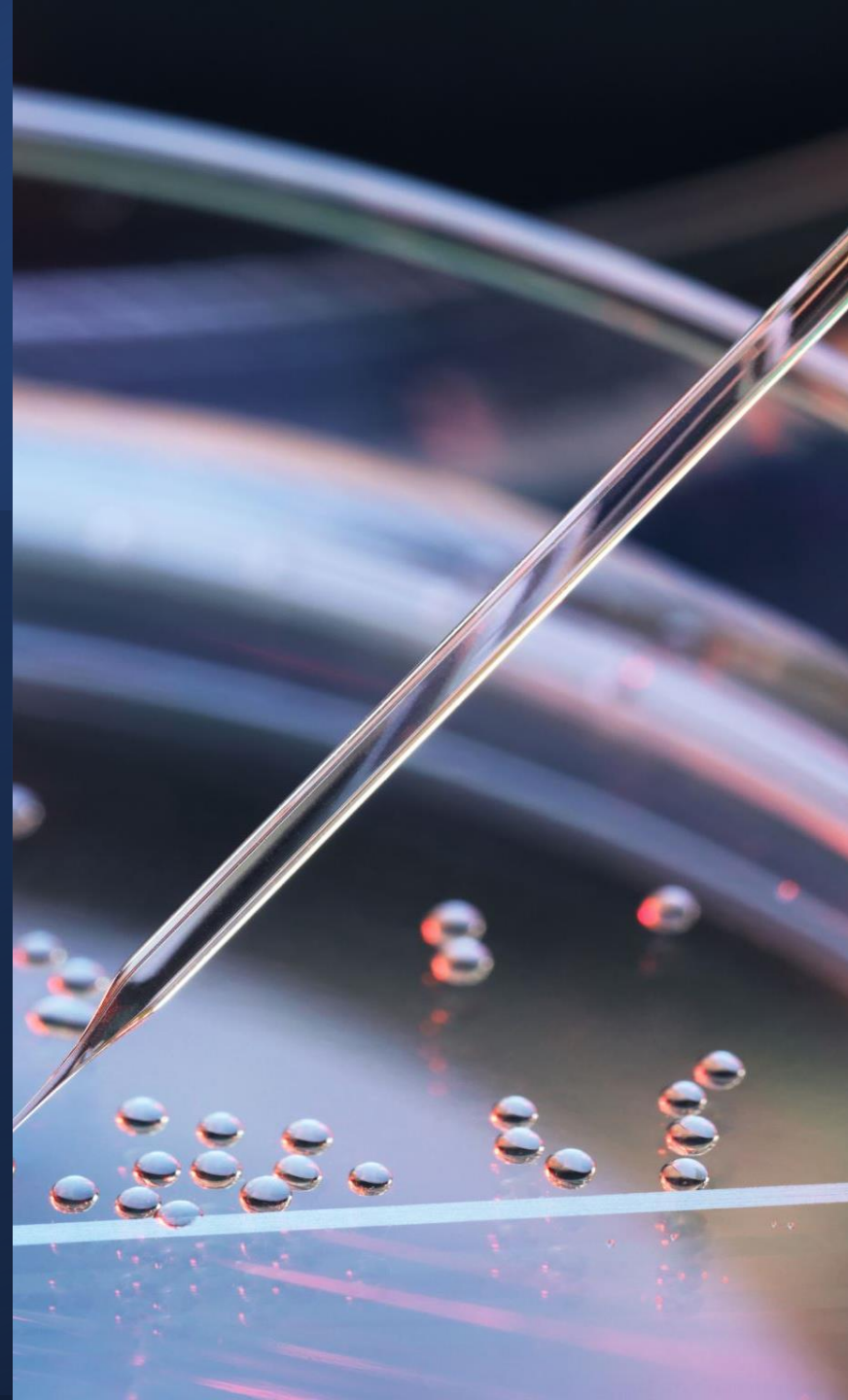
Outbreak Response

Southern Nevada Health District

702-759-0608

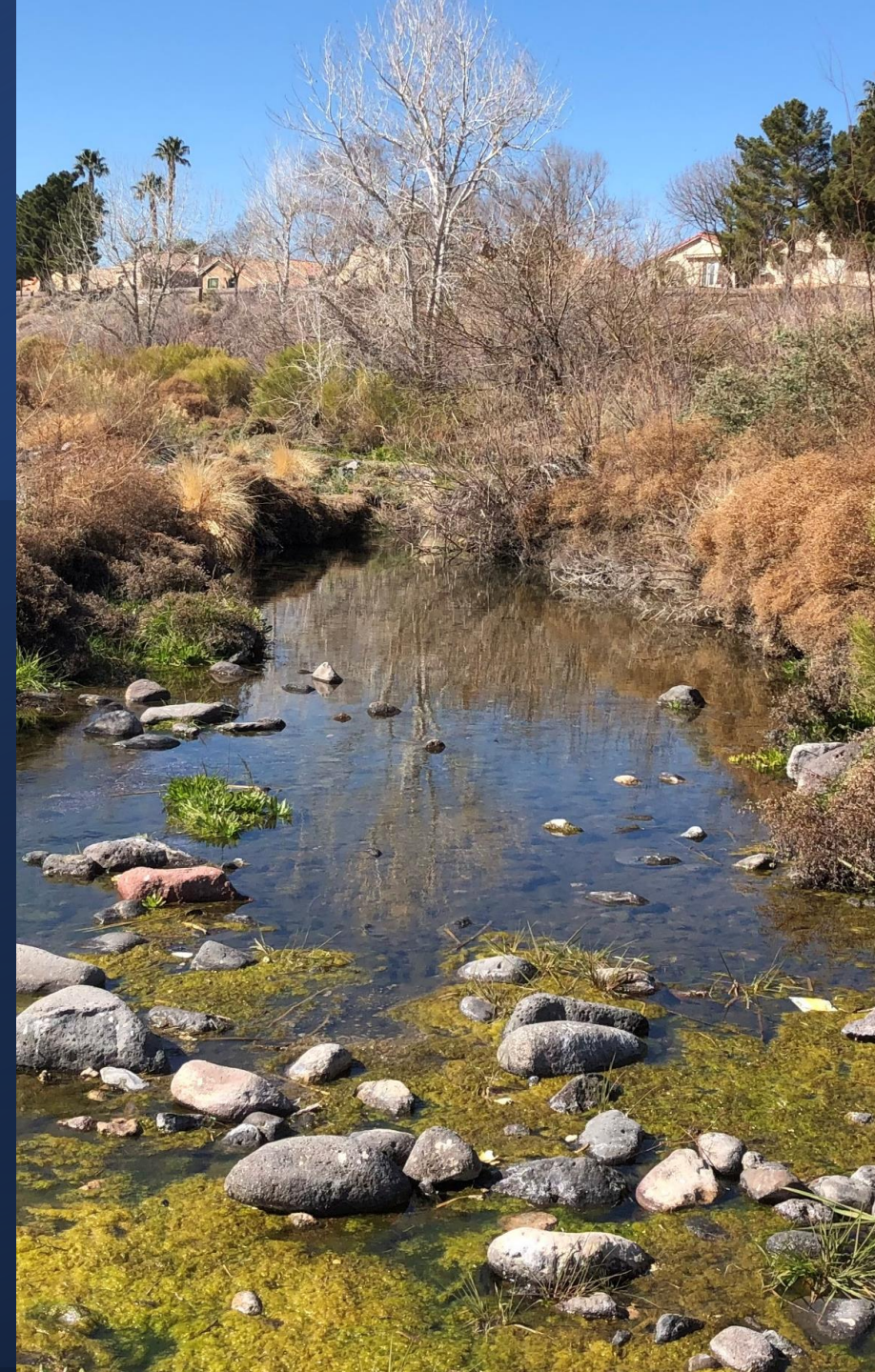
coler@snhd.org

Thank you



MOSQUITO DISEASE SURVEILLANCE, EDUCATION & PREVENTION

ENVIRONMENTAL HEALTH



ENVIRONMENTAL HEALTH: PROGRAM OBJECTIVES



Routine surveillance to determine species, abundance, and disease status



Counterpart notification for breeding site interventions (Code Enforcement, Parks & Recreation, Public Works)



Community education on breeding, biting, and disease prevention



No coordinated mosquito abatement across Clark County

SURVEILLANCE

Routine Sentinel sites

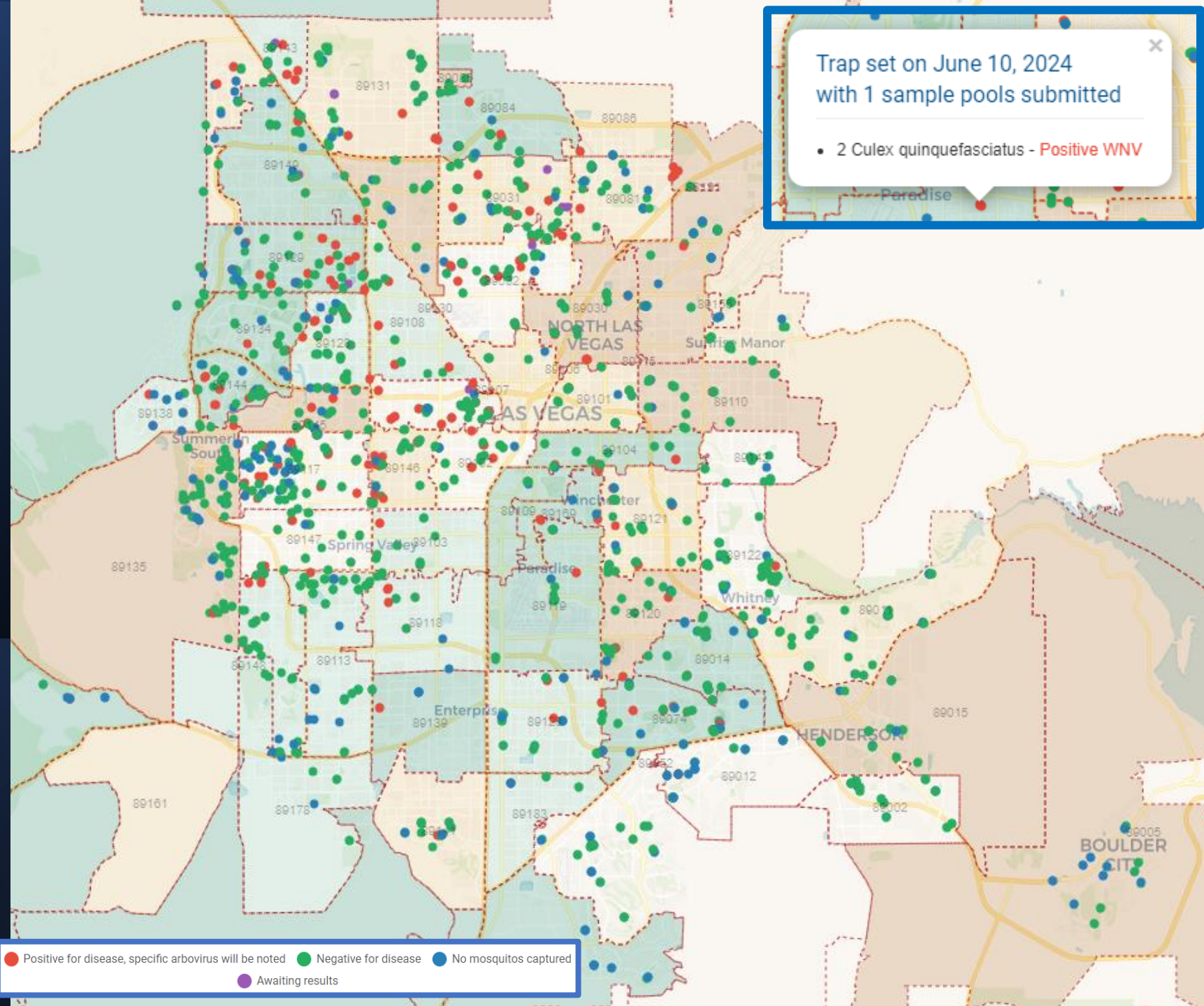
- Wetlands
- Washes
- Parks
- Bird Preserves

Unique Sites

- Citizen Complaints

Web Site Information

- Updated Mapping



DISEASE TRANSMISSION



- ***Culex* species – Drivers of disease:**
- **West Nile Virus, St. Louis Encephalitis**
- **Most common and widespread mosquito**
- **Primarily feed on birds / Dusk and Dawn**
- **Breed in abandoned pools, wash channels, culverts**
- **Can fly up to a mile**

	Traps Set	Mosquitoes Trapped	Submission Vials	WNV + Mosquito Vials	SLEV + Mosquito Vials	Zip codes with WNV	Reported Human WNV cases
2022	3,246	43,516	3,280	0	0	0	0
2023	3,701	68,634	3,149	27 (1%)	0	13	2
2024 *	2,188	39,070	2,476	384 (15%)	21 (1%)	46	26

* As of 8/15/24

NUISANCE BITING



- *Aedes aegypti* – Drivers of nuisance calls
- Aggressive, daytime and relentless biter (ankles)
- Primarily feed on people
- Breed in small water sources – tires, planters, buckets
- Short flight range (50 – 100 meters)
- Spread Dengue and Yellow Fever

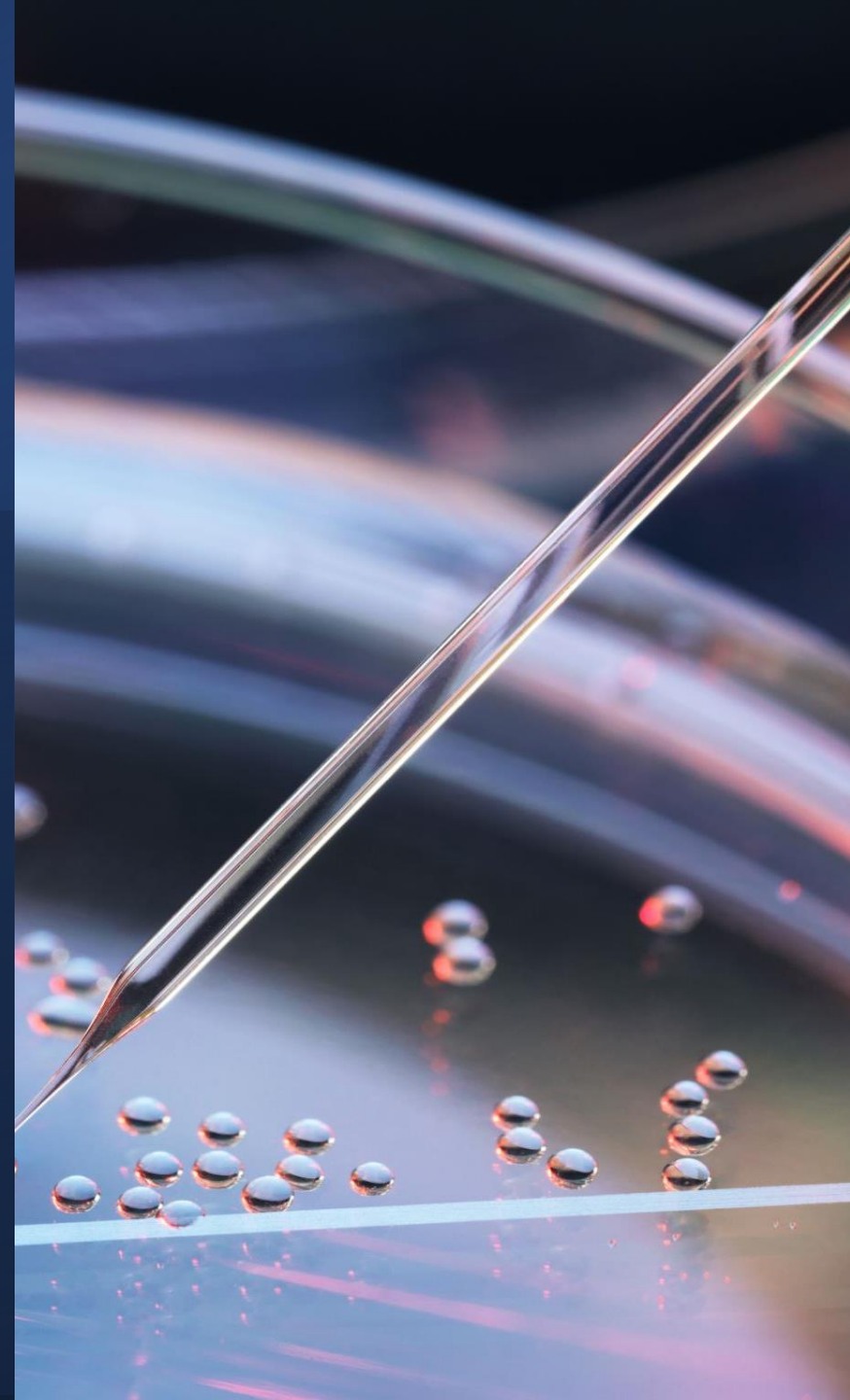
	Citizen complaints	Number of <i>Aedes aegypti</i> trapped*	Zip Codes with Aedes Identified
2021	34	138	6
2022	101	618	12
2023	739	7,409	43
2024*	440	1,807	47

* Female counts only

** As of 8/15/24

Vector Arbovirus Testing 2024

*SOUTHERN NEVADA PUBLIC HEALTH LABORATORY
(SNPHL)*





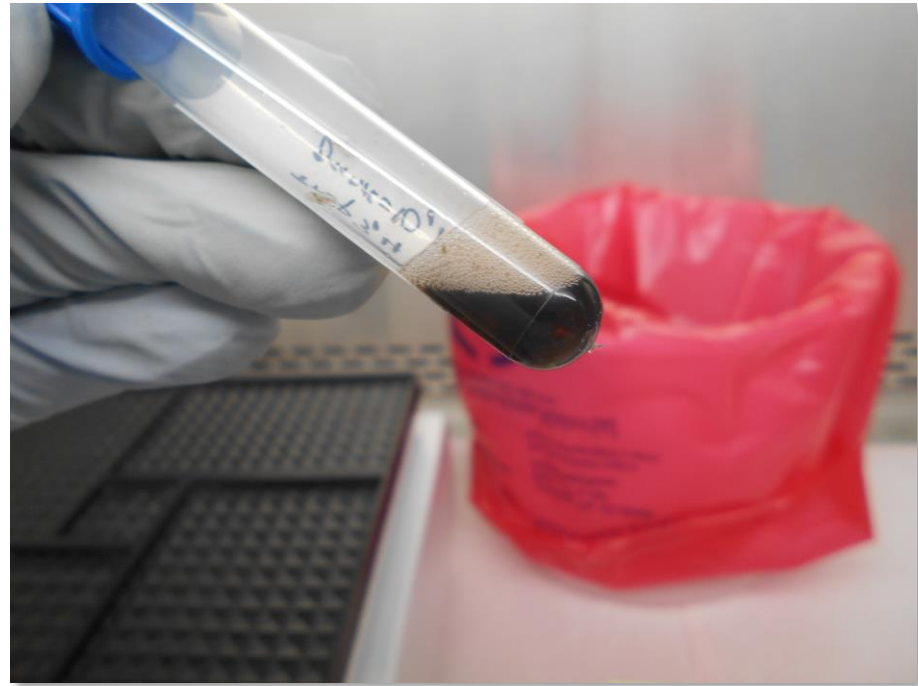
Vector Arbovirus (*arthropod-borne virus*) Testing Information

- **Test method:**
 - Multiplexed Polymerase Chain Reaction (PCR) - sensitive and specific
- **Viral Targets:**
 - West Nile Virus (**WNV**), St. Louis Encephalitis virus (**SLE**), Western Equine Encephalitis virus (**WEE**), Dengue Virus (New in 2024), Zika virus (not currently tested)
- **Testing capacity:**
 - Samples are picked up from SNHD Environmental Health mosquito sorting laboratory and tested weekly. Test batches are 93 mosquito pools per run. Each run takes 2 laboratory staff approximately one full 8-hour day to process.
 - SNPHL is validating instrumentation to help increase sample throughput. These changes would allow 372 samples to be tested at one time.
 - Vector testing is performed in the SNPHL Virology department by Dr. Sui Ching Sikes and her team (4 laboratory techs and 2 technicians, who are also responsible for several other testing activities including *Legionella* processing, COVID and respiratory virus testing, and *Candida auris* PCR testing.

DATA SHARING AND COMMUNICATION WITH LOCAL AND FEDERAL PARTNERS

- Vector testing started at Southern Nevada Public Health Lab (SNPHL) in Spring of 2018.
- The SNPHL testing season follows the Southern Nevada Health District (SNHD) Environmental Health (EH) department mosquito trapping schedule
(~April-October).
- Since 2018, SNPHL has tested over 15,000 mosquito pool samples, with an annual average of about 2,200 pools.
- Results from mosquito pool samples are immediately reported to SNHD Environmental Health. When positive samples are detected, SNHD Environmental Health will notify SNHD Office of Communications (for public messaging) and SNHD local jurisdictional counterparts for possible mitigation.
- Test results are also shared with the Nevada Department of Agriculture, and data can be added to the CDC national arbovirus surveillance network (ArboNET).
- Testing of mosquito samples serves as an early-warning system for potential increased exposure of arbovirus to human communities (residents and visitors).

Mosquito “Smoothie”



EPIDEMIOLOGY & DISEASE SURVEILLANCE

DISEASE SURVEILLANCE & CONTROL



ARBOVIRUS OVERVIEW

CLARK COUNTY, NV

Currently, there are two viruses found locally in Clark County:

- West Nile Virus (WNV):
 - A global vector-borne disease
 - First identified in the U.S. in 1999
 - First identified in Clark County in 2004
 - Primarily spread by *Culex* species but detected in *Aedes aegypti* this year
- St. Louis Encephalitis (SLE):
 - A related virus with similar transmission to WNV
 - First human case reported in 2007, with the first mosquitoes identified in Clark County in 2015
 - Last human case reported in Clark County was 2016

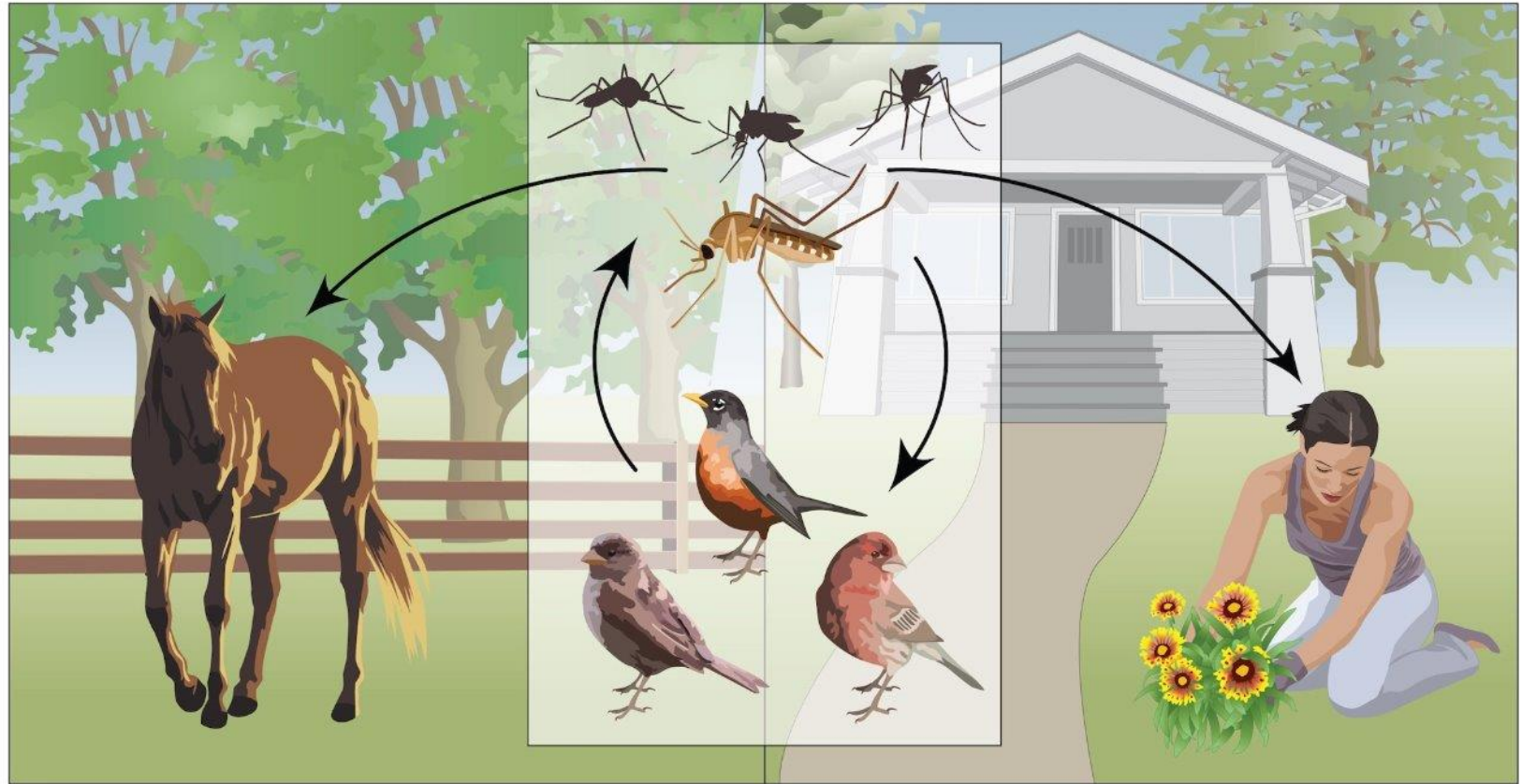
Seasonality:

- Cases of both viruses primarily occur during mosquito season, from summer through fall (April through October).

TRANSMISSION

- **Mosquitoes** (*Culex* species) are the primary vector.
- **Birds:** Serve as the main hosts, amplifying the virus.
- **Mosquito-Bird-Human Cycle:** Mosquitoes transmit the virus between birds and then to humans.
- **Humans** are dead-end hosts.
- **No human-to-human** transmission.

West Nile Virus Transmission Cycle



CS315321

Centers for Disease Control and Prevention

Source: CDC

IMPACTS ON HEALTH

Symptoms:

- Most people do not feel sick
- About 1 in 5 develop a fever and other symptoms (non-neuroinvasive), including headache, body aches, joint pains, vomiting, diarrhea, or rash
- Symptoms may develop within 2 to 14 days (typically 2 to 6 days) and can be several weeks in immunocompromised individuals.

Severe Illness (neuroinvasive):

- About 1 in 150 infected people develop serious, sometimes fatal illness, such as encephalitis or meningitis

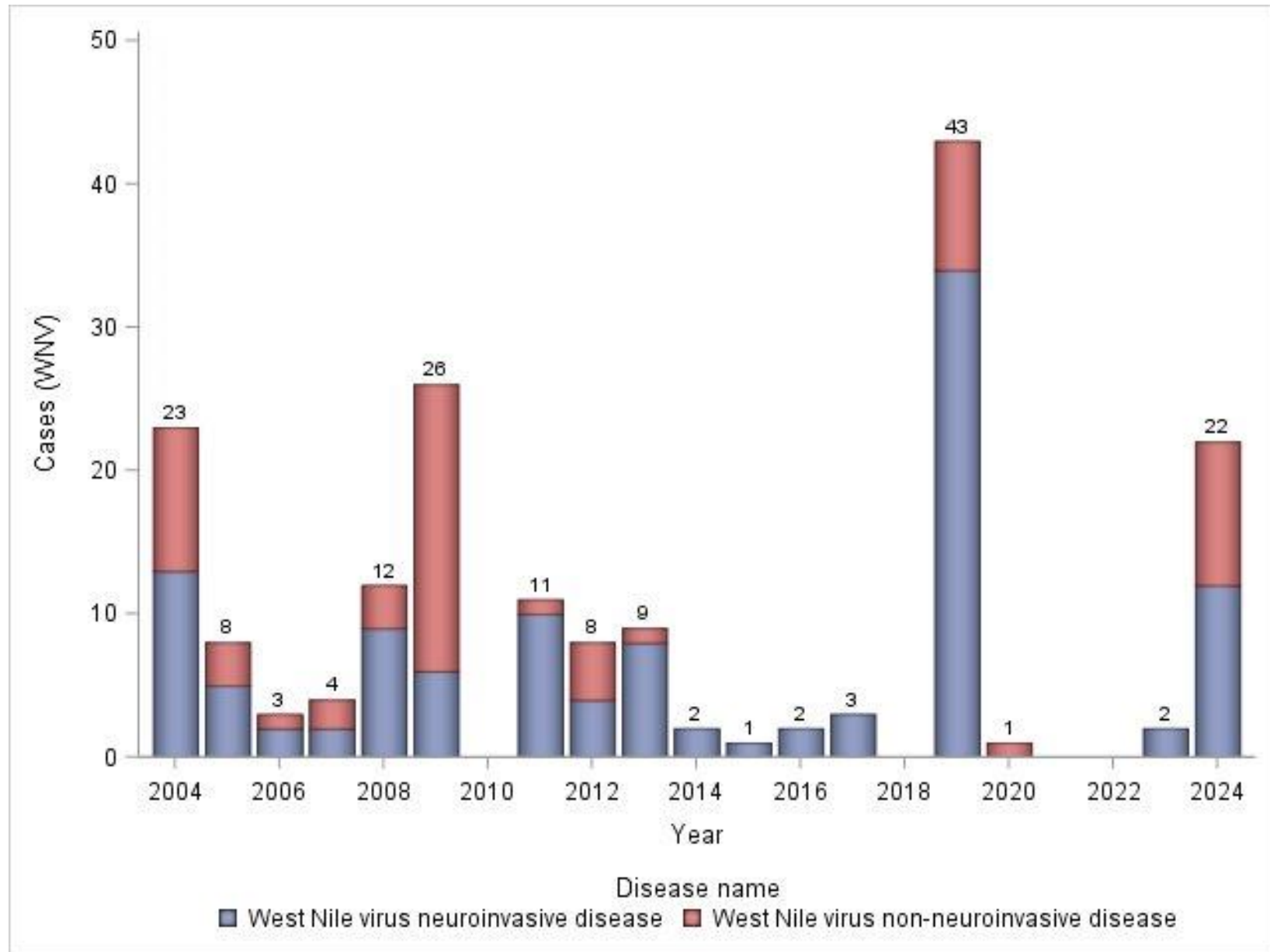
Treatment:

- No vaccines or specific treatments for WNV in humans

Prevention:

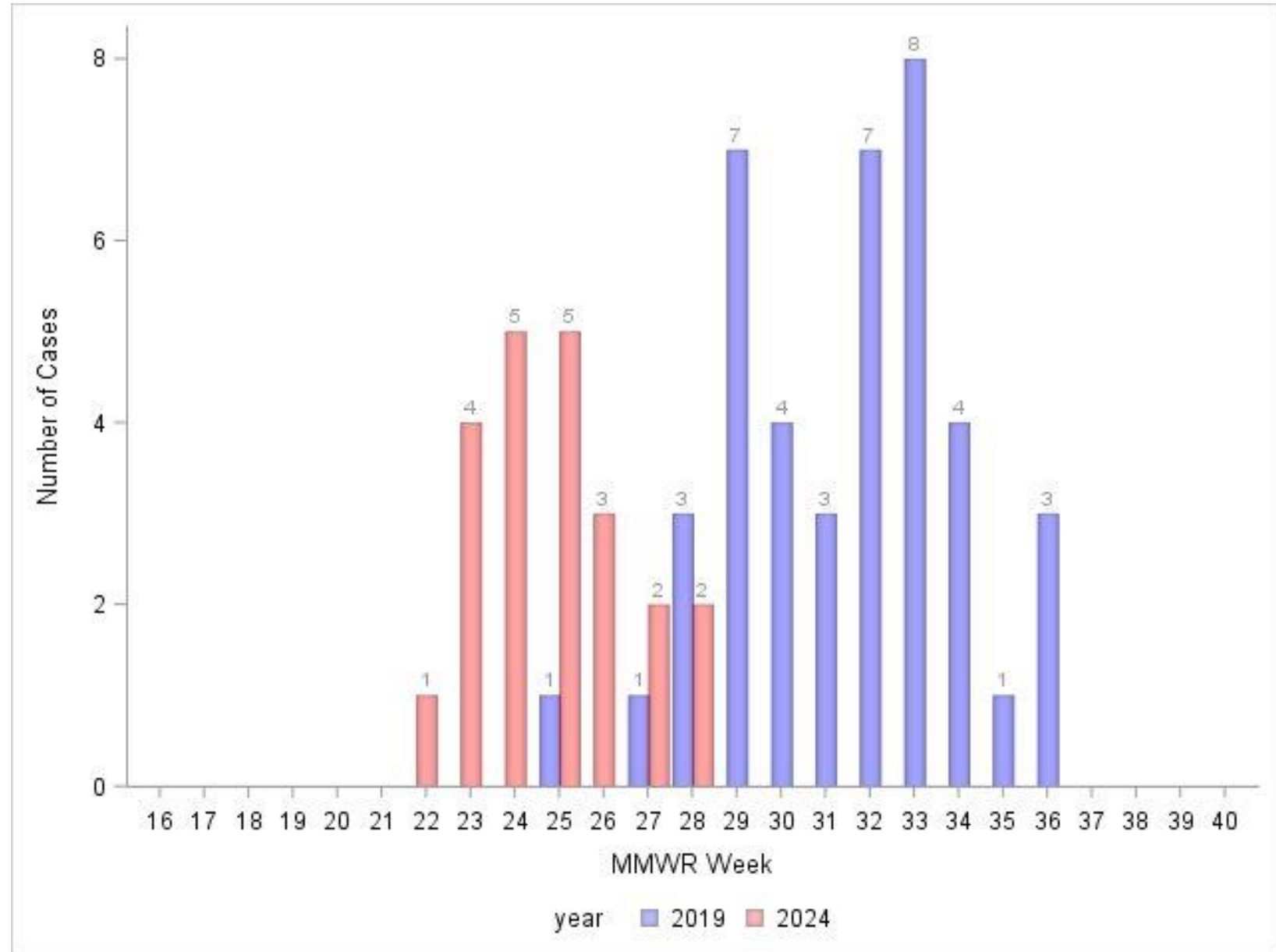
- Reduce risk by preventing mosquito bites
- For example, eliminate standing water, use repellent with DEET or Picaridin, wear protective clothing

WNV Cases in Clark County, NV (2004-2024)



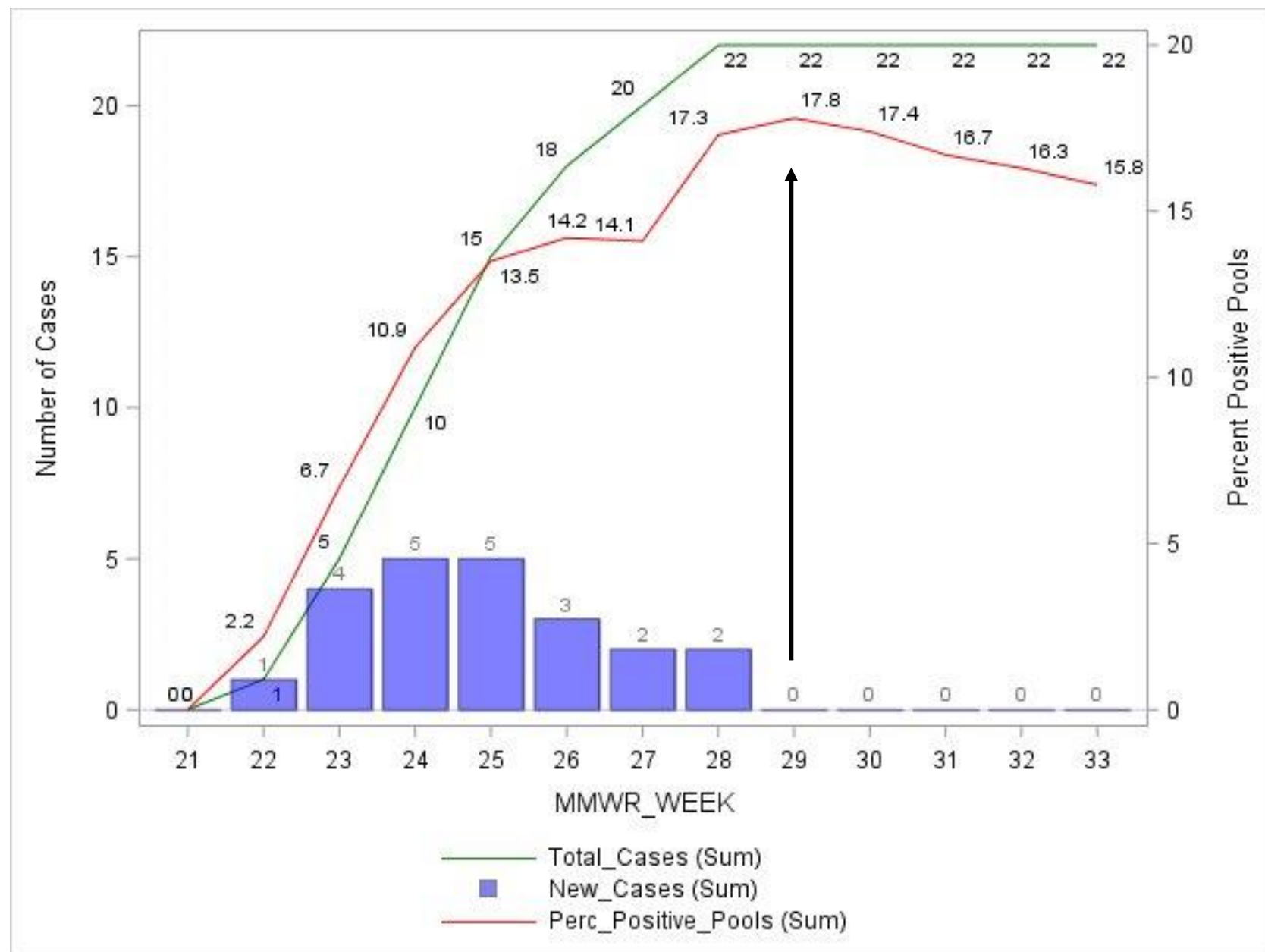
COMPARISON OF WNV ACTIVITY: 2019 vs. 2024

- **2019:** Most cases were identified later in the mosquito season
- **2024:** Cases are being identified earlier in the season
- **Trend:** Shift in case distribution, with earlier detection of cases in 2024 compared to 2019



CURRENT WNV SURVEILLANCE SUMMARY: WEEK

- The number of cases may change due to delays in reporting and ongoing investigations until the end of the season
 - No new cases (date of symptom onset) have been reported in the past 5 weeks
- After week 29, following severe heat, the positivity rate has been gradually decreasing



**LONG TERM:
COMMUNITY
IMPORTANCE**



- No single coordinated mosquito abatement across Clark County
- Mosquito disease has proven unpredictable over 20 years of surveillance in Clark County
- *Aedes aegypti* will continue to expand and entrench itself – calls for service will increase
- The community needs a consistent and organized Integrated Mosquito Management Plan / Mosquito Abatement District
- Develop emergency abatement responses: WNV, Dengue, Zika

MEMORANDUM



Date: August 22, 2024

To: Southern Nevada District Board of Health

From: Kim Saner, J.D., M.A., SPHR, *Deputy District Health Officer-Administration* 
 Fermin Leguen, MD, MPH, *District Health Officer* 

Subject: Administration Division Monthly Report – July 2024

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Office of Communications 2

Contracts Administration 3

Facilities 3

Finance 4

Health Cards 8

Human Resources (HR) 9

Information Technology (IT) 10

Workforce Team – Public Health Infrastructure Grant (PHIG) 11

Appendix A – Office of Communications 13

Appendix B – Finance – Payroll Earnings Summary – June 22, 2024 to July 5, 2024 15

Executive Summary

The Office of Communications issued six News Release. In July, Office of Communications staff produced creative advertisement for the Bridge Vaccine Confidence campaign and for the Fight the Bite mosquito awareness campaign. Staff replied to 266 public information email inquiries. Staff received 12 health fair requests and organized participation for various community events, including the La Oportunidad Expo and the Move Your Way campaign as part of The City of North Las Vegas Parks and Rec Month Celebration. Health Cards served 12,799 total clients, which included 2,507 clients renewing online. Due to extreme temperatures in July, walk-in testing for Health Cards was suspended. However, additional same-day appointments were made available at the Decatur, Fremont, Henderson, Laughlin and Mesquite offices. Construction commenced on the Behavioral Health Clinic at the Decatur Location. Facilities staff constructed additional hoteling and office spaces for Environmental Health staff. As of August 6, 2024, the Health District had 813 active employees. Human Resources arranged 75 interviews, extended 15 job offers (one offer declined) and onboarded 13 new staff. There were seven terminations, six promotions, no flex-reclasses, no transfers and two demotions. There were 10 employment opportunities posted.

Office of Communications

News Releases Disseminated:

- Southern Nevada Health District launches tool providing mental health and well-being resources
- Five new West Nile virus cases reported in Clark County
- Health District offers back-to-school vaccinations
- Southern Nevada Health District conducting Legionnaires' disease investigation at Caesars Palace Hotel and Casino
- Southern Nevada Community Health Center celebrates National Health Center Week Aug. 4-10

Press:

- *Legionella* investigation at Caesars Palace
- Heat-related deaths
- Las Vegas Athletic Club drowning
- West Nile virus
- Back-to-school vaccinations
- COVID-19 uptick

Eight hundred and ninety news clips related to the Health District, local news coverage and national coverage of public health topics were compiled in July. Coverage includes traditional print, broadcast, digital and online media outlets. A complete list is available at [202407-PI-Report.pdf \(southernnevadahealthdistrict.org\)](#)

Advertisements, Projects Completed and Social Media Summary:

In July, staff produced creative advertisement concepts for the Bridge Vaccine Confidence campaign, created support materials for the Fight the Bite mosquito awareness campaign, and provided continuous support for the Office of Chronic Disease Prevention and Health Promotion smoking cessation and nutrition initiatives. Additionally, the Office of Communications received and responded to two hundred sixty-six public information email inquiries and fulfilled one hundred thirty internal project requests. These requests included graphic design, website content, advertising and marketing, outreach materials, and translation services. Staff updated Health District websites including SNHD.info, snchc.org and GetHealthyClarkCounty.org.

On social media, staff focused on promoting the HPV vaccine reminder, Back-to-School services, Beat the Heat, Board of Health employee recognitions, CredibleMind, Zero HIV Stigma Day, Clark County Cooling Stations, Fight the Bite, National Minority Mental Health Awareness Month Health Equity Chat Podcast, Southern Nevada Walk Audits, LVMPD Human Trafficking Task Force, News Releases, Get Healthy Clark County Move More this Summer, July Fourth, and BBQ Food Safety.

Community Outreach and Other:

Staff received twelve health fair requests and organized Health District program participation for various community events, including the La Oportunidad Expo and the Move Your Way campaign as part of The City of North Las Vegas Parks and Rec Month Celebration.

- Three Square Food Bank/Supplemental Nutrition Assistance Program, Low Income Energy Assistance Program and Temporary Assistance for Needy Families program: 12
- Department of Welfare & Supportive Services Medicaid/Supplemental Nutrition Assistance Program applications: 135

Meetings and Events of Note:

- July 02: Nevada Weather Service briefing
- July 11: Back to School Planning meeting
- July 16: SNHD Legislative update meeting
- July 17: Media training
- July 17: National Public Health Information Coalition/CDC Monthly Communication call
- July 18: COOP Cybersecurity Tabletop After Action/Improvement Planning meeting
- July 22: Event planning Sexual Health Education & Testing health fair
- July 22-26: 2024 NACCHO 360 Annual Conference
- July 29: Reaccreditation briefing
- July 31: 2024 Las Vegas Grand Prix Planning meeting

Please see Appendix A for the following:

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

Contracts Administration

Period of Performance	Requests Received	Requests w/Expectations of Expedited Completion	% of Expedited Requests Received	Requests Processed
July 1-31, 2024	37	29	78%	34

Facilities

Monthly Work Orders	June 2023	June 2024		YTD FY23	YTD FY24	
Maintenance Responses	221	161	↓	2,265	2,288	↑
Electrical Work Orders	5	12	↑	94	123	↑
HVAC Work Orders	21	16	↓	134	239	↑
Plumbing Work Orders	9	7	↓	74	94	↑
Preventive Maintenance	10	28	↑	233	342	↑
Security Responses	2,406	2,322	↓	27,719	29,788	↑

Current Projects

Decatur Location

- Upgraded technology in three conference rooms
- Installed cooling stations (mistifiers and canopies)
- Completed moving COVID-19 staff into main building
- Created a new office for Executive Leadership Admin

Monthly Work Orders	July 2023	July 2024		YTD FY24	YTD FY25	
Maintenance Responses	201	218	↑	201	218	↑
Electrical Work Orders	2	19	↑	2	19	↑
HVAC Work Orders	17	17	-	17	17	-
Plumbing Work Orders	12	17	↑	12	17	↑
Preventive Maintenance	22	25	↑	22	25	↑
Security Responses	2,374	2,406	↑	2,374	2,406	↑

Current Projects

Decatur Location

- Created additional hoteling and permanent office space for Environmental Health
- Created “plans review” room for Environmental Health
- Construction on Behavioral Health Clinic started

SNPHL Location

- Completed upgrade of DI Water System

Finance

Total Monthly Work Orders by Department	July 2023	July 2024		YTD FY24	YTD FY25	
Purchase Orders Issued	529	606	↑	529	606	↑
Grants Pending – Pre-Award	5	1	↓	5	1	↓
Grants in Progress – Post-Award	9	11	↑	9	11	↑

* 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 – July 2024						
KEY: P=Pass-through, F=Federal, S=State, O=Other						
Project Name	Grantor	End Date	Amount	Reason	FTE	Comments
State of Nevada, Epidemiology and Laboratory Capacity, Advanced Molecular Detection, (ecva2_22)	P-CDC	7/31/2024	\$1,205,880	End of project	2.00	Expecting a new award from the state
State of Nevada, Epidemiology and Laboratory Capacity Detection Equipment (ecvcon22)	P-CDC	7/31/2024	\$303,000	End of project	0.00	Project not expected to renew

Grants Expired – July 2024						
KEY: P=Pass-through, F=Federal, S=State, O=Other						
Project Name	Grantor	End Date	Amount	Reason	FTE	Comments
State of Nevada, Epidemiology and Laboratory Capacity Office of Public Health Investigations and Epidemiology, Amendment #1(ecvhom23)	P-CDC	7/31/2024	\$1,439,232	End of project	0.80	Project not expected to renew
State of Nevada, Office of State Epidemiology, Epidemiology and Laboratory Capacity Program (el2con24)	P-CDC	7/31/2024	\$429,419	End of project	0.00	Funding was supplemental and not expected to renew
State of Nevada, Epidemiology and Laboratory Capacity Program, Amendment #2 (elcont24)	P-CDC	7/31/2024	\$510,509	End of budget period	2.94	The renewal for FY2025 is in progress
State of Nevada, Epidemiology and Laboratory Capacity, Specials Project (elcvam23)	P-CDC	7/31/2024	\$580,616	End of project	0.00	Expecting a new award from the state
NU62PS924642-02-02 CDC Integrated HIV Programs, Year 2 of 4, Amendment #2 (hivehe22)	F-CDC	7/31/2024	\$2,144,080	End of project	3.20	Expecting a new award from the state
NU62PS924642-03-02 CDC Integrated HIV Programs, Year 3 of 4, Amendment #2 (hivehe23)	F-CDC	7/31/2024	\$1,750,827	End of project	2.55	Expecting a new award from the state
NU62PS924642-04-02 CDC Integrated HIV Programs, Year 4 of 4 (hivehe24)	F-CDC	7/31/2024	\$1,886,202	End of project	1.96	Expecting a new award from the state
State of Nevada, HIV Prevention and Surveillance	P-CDC	7/31/2024	\$3,228,825	End of budget period	12.88	The renewal for FY2025 is in progress

Grants Expired – July 2024						
KEY: P=Pass-through, F=Federal, S=State, O=Other						
Project Name	Grantor	End Date	Amount	Reason	FTE	Comments
Program, Year 3 of 3, Amendment #2 (hivprv23)						
State of Nevada, HIV Prevention and Surveillance Program, Amendment #2 (hivsrv23)	P-CDC	7/31/2024	\$241,104	End of budget period	1.30	The renewal for FY2025 is in progress
National Association of County and City Health Officials, Using Effective Media Campaigns to Raise Awareness about Syphilis Project (symed_24)	CONTRACT	7/31/2024	\$31,999	End of project	0.00	Project not expected to renew
State of Nevada, Office of State Epidemiology, COVID-19, Amendment #1 (elcvd_24)	P-CDC	7/31/2024	\$2,310,517	End of budget period	64.00	The renewal for FY2025 is in progress

Grants Awarded – July 2024							
KEY: P=Pass-through, F=Federal, S=State, O=Other							
Project Name	Grantor	Received	Start Date	End Date	Amount	Reason	FTE
NUE1EH001398-05-00 Water Quality Data Program, Year 5 of 5 (wqdata_25)	F-CDC	7/1/2024	9/1/2024	8/31/2025	\$190,000	Continued effort	0.47
U01EH001369-05-00 CDC Food Illness, Safety Culture, Year 5 of 5, (fdill_25)	F-CDC	7/1/2024	9/30/2024	9/29/2025	\$192,586	FY2025 renewal	1.20
Comagine Health, Advancing Health Equity to address diabetes (AHEAD)Amendment #1, (codpp_24)	P-CDC	7/1/2024	6/30/2024	6/29/2025	\$50,961	Extension of end date and addition of funds	0.30

Grants Awarded – July 2024							
KEY: P=Pass-through, F=Federal, S=State, O=Other							
Project Name	Grantor	Received	Start Date	End Date	Amount	Reason	FTE
FPHPA006516-03-00 Office of the Assistant Secretary for Health, Title X, Family Planning, Amendment #1 (fp_24)	F-OASH	7/5/2024	4/1/2024	3/31/2025	\$1,454,883	Addition of funds awarded	11.15
H79TI084749-03 FR-CARA/Substance Abuse and Mental Health Services_Projects of Regional and National Significance, Year 3 of 5 (frcar_25)	F-SAMHSA	7/24/2024	9/30/2024	9/29/2025	\$500,000	FY2025 renewal	1.85
State of Nevada, Office of State Epidemiology, COVID-19, Amendment #1 (elcvd_24)	P-CDC	7/25/2024	10/1/2023	7/31/2024	\$12,310,517	Change in end date	64.00
State of Nevada, Hepatitis Prevention and Control (aduhep24)	P-CDC	7/26/2024	5/1/2024	4/30/2025	\$26,904	FY2024 renewal	0.15
H49MC52122-02-00, Healthy Start Initiative-Eliminating Racial/Ethnic Disparities, Year 2 of 5, Amendment #2 (pphs_25)	F-HRSA	7/30/2024	9/30/2024	9/29/2025	\$1,100,000	FY2025 renewal	10.09

Contracts Awarded – July 2024							
KEY: P=Pass-through, F=Federal, S=State, O=Other							
Project Name	Grantor	Received	Start Date	End Date	Amount	Reason	FTE
Environmental Protection Agency, Safe Drinking water,	P-EPA	7/1/2023	7/1/2024	6/30/2025	\$150,000	Continued effort	0.97

Contracts Awarded – July 2024							
KEY: P=Pass-through, F=Federal, S=State, O=Other							
Project Name	Grantor	Received	Start Date	End Date	Amount	Reason	FTE
Year 2 of 2 (sdw_25)							
Environmental Protection Agency, Under Ground Storage Tanks, Year 4 of 4 (ust_25)	P-EPA	7/1/2021	7/1/2024	6/30/2025	\$212,500	Continued effort	1.68

Health Cards

- Walk-ins for testing, which were introduced earlier this year, were temporarily discontinued in early July due to extreme temperatures and the need to wait outdoors at some locations. At present, clients may schedule testing appointments as follows:
 - Advance appointments for our Decatur, Fremont, and Henderson offices open each weekday morning at 6 a.m. for that day in the following week.
 - Additional same-day appointments at our Decatur and Fremont offices open for booking each working day by 7:30 a.m. as staffing allows.
 - Same-day appointments for our Laughlin and Mesquite offices open for booking each working day at 5:00 a.m.
- For the month of July, we averaged 81 “passing and paying” online renewal clients per day, with a total of 2,507 clients renewing online.
- A card number lookup system was added to our website, allowing food handler and body art clients to look up their own card number and check the status of their card. It also allows employers to verify an employee’s card status.
 - For food handler cards: www.snhd.info/foodhandlerlookup
 - For body art cards: www.snhd.info/bodyartlookup

CLIENTS SERVED	July 2024	June 2024	May 2024	Apr 2024	Mar 2024	Feb 2024
FH Cards – New	6,740	6,836	7,409	7,088	6,428	6,181
FH Cards – Renewals	986	970	1,069	758	551	458
FH Cards – Online Renewals	2,507	2,312	2,371	1,808	1,071	638
Duplicates	538	503	612	532	469	537
CFSM (Manager) Cards	252	279	253	286	195	241
Re-Tests	1,649	1,568	1,685	1,633	1,369	1,333
Body Art Cards	127	97	107	113	125	112
TOTALS	12,799	12,565	13,506	12,218	10,208	9,500

Human Resources (HR)

Employment/Recruitment:

- 0 New job titles for July
- 813 active employees as of August 6, 2024
- 12 New Hires, including 0 rehires and 0 reinstatements
- 7 Terminations, including 0 retirements
- 6 Promotion, 0 Flex-reclasses
- 0 Transfers, 3 Lateral Transfer
- 2 Demotions
- 37 Annual Increases
- 38 Evaluations received and recorded in Financial Enterprise
- 75 Interviews
- 15 Offers extended (1 offer declined)
- 10 Recruitments posted
- Turn Over Rates
 - Administration: 0.00%
 - Community Health: 0.00%
 - Disease Surveillance & Control: 1.76%
 - Environmental Health: 0.50%
 - Public Health & Preventive Care: 1.86%
 - FQHC: 1.87%

Temporary Employees

- 26 Temporary Staff
- 0 New Agency Temporary Staff Member
- 0 Agency Temporary Staff Members assignment ended

Employee/Labor Relations

- 3 Coaching and Counseling, 0 Verbal Warnings, 0 Written Warnings, 0 Suspensions, 0 Final Written Warning, 0 Terminations, 1 Probationary Releases
- 5 Grievances
- 2 Arbitrations
- 60 Hours of Labor Meetings (with Union)
- 40 hours investigatory meetings
- 2 Investigations
- 10 Complaints & Concerns
- 100 Hours ER/LR Meetings with managers or employees
- Number of EEOC/NERC and EMRB cases: 4

Interns

There were a total of 23 interns and 670 applied public health practice hours in July 2024.

Interns and Clinical Rotations	July 2024	YTD
Total Number of Interns ¹	23	23
Internship Hours ²	670	670

¹Total number of students, residents, and fellows

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

Safety

- 3 Incidents
- 4 Follow-ups
- 48 Inquiries
- 1 Emergency Evaluation
- 6 “If You See Something, Say Something” Comments

Training (In-Person and Online)

- Leadership Development Program Kick-Off Meeting – 7 Participants
- Heat Illness Prevention Trainings – 605 Completed

New Hire Orientation

- July 8th – 7 New Hires
- July 22nd – 5 New Hires

Information Technology (IT)

Service Requests	July 2023	July 2024		YTD FY24	YTD FY25	
Service Requests Completed	1,117	1,355	↑	1,117	1,355	↑
Service Requests Opened	1,269	1,543	↑	1,269	1,543	↑

Information Services System Availability 24/7	July 2023	July 2024		YTD FY24	YTD FY25	
Total System	97.61	94.31	↓	97.61	94.31	↓

*Total Monthly Work Orders by Department	July 2023	July 2024		YTD FY24	YTD FY25	
Administration	298	374	↑	28	374	↑
Community Health	81	142	↑	81	142	↑
Environmental Health	244	238	↓	244	238	↓
**Primary & Preventive Care	258	325	↑	258	325	↑
**Disease Surveillance & Control	206	130	↓	206	130	↓
**FQHC	139	232	↑	139	232	↑
Other	13	12	↓	13	12	↓

First Call Resolution & Lock-Out Calls	July 2023	July 2024		YTD FY24	YTD FY25	
Total number of calls received	1,269	1,543	↑	1,269	1,543	↑

Workforce Team – Public Health Infrastructure Grant (PHIG)

Workforce Team

- Workforce engagements:
 - Worked with all PHIG recipients to develop year three (BP3) progress report, budget requests, goals, milestones, and progress of current projects.
 - Met with Human Resources to discuss budget revisions impacting their operations within the PHIG workplan.
- All-Hands Retreat 2025 – Started to develop “strawman” agenda for the event. Theme will align with October Breast Cancer Awareness month, TENTATIVELY.

CDC Requirements

- Submitted travel request to two upcoming CDC PHIG National Partner Events for the PHIG Team Members (3):
 - Regional Hub Meeting – September 4-5, 2024, in Long Beach, CA
 - Open Forum Meeting – September 1-20, 2024, in Chicago, IL

Non-Competing Continuations Application Process – A2 (Foundational Capabilities) Budget Period (BP) 3

- Developed the NCC Application Narrative, worked with internal PHIG recipients on budget needs, goals, milestones, internal process, and expectations.
- Met with Finance on timeline for NCC Application submission and requirements.
- Met with PHIG Accountant and Budget Analyst to discuss the impact of union negotiated salary on PHIG projects.
- Met with SNHD Finance throughout the PHIG NCC application to ensure team was on track to submit NCC application by August 1, 2024.
- Met required timeline to submit PHIG NCC application for A2 (Foundational Capabilities) funding for budget period 3.

Performance Management

- Began the planning for revising Strategic Plan Priorities starting in August 2024. Expected completion by late October of this year.
- Delivered 2.5 hours of support to 3 persons throughout the month to better utilize the dashboard tool.
- Attended 3-hours of Strategic Planning / Performance Management from Region 9 PHIG and ASTHO at no cost.
 - Discussed data integrity and backup plan with Dashboard vendor to drive local procedures for data storage related to Strategic Planning and Reaccreditation project Dashboard.

Quality Improvement

- Scheduled follow up group-coaching for participants of Boundary Spanning Leadership workshop that took place in June. This should be an effective way to optimize learnings from the big group and make the learning “stick”.
 - The intent of the workshop is to help leaders work across program boundaries when solving quality and process issues.
 - ASTHO has gathered requests from participants from the workshop to craft an interactive session to address challenges and gain practice in learnings from the two-day workshop.

- SNHD is eligible for a total of 3 of these 90-minute follow-on sessions if demand arises. There is no cost for the sessions under the Technical Assistance arm of the PHIG grant.
- Trained 13 leaders from PPC QI Team in use of the QI Project Charter. The Charter acts as a project reporting tool and guides teams through each phase of the PDSA cycle.
 - This form is the basis for tracking the growth of a QI mindset across the Health District as a requirement for Reaccreditation (beyond the more localized benefits of quality to our patients, partners, and stakeholders).
 - Preparing for the next phase of training for all PPC staff in the use of 1-page Just Did It forms. These forms allow us to build a quality mindset while making incremental improvements that do not need a full QI project with team and resource of time for multiple meetings.
 - The forms are being tracked in the same QI repository as the Charters from more complete QI projects.
- Increased participation in a large QI project facilitated by the Health Equity team around Behavioral Health scheduling processes.
 - Being closer to this project will allow the testing and evaluation of the new QI tools and processes to drive as much QI as possible with the least amount of paperwork and time burdens.

PHAB Reaccreditation

- Met with 39 contributors to Reaccreditation documentation for alignment and briefing on next steps and procedures.
- SNHD is on track for Reaccreditation in March 2027.
- Met, virtually, with Merced County, CA to learn about their experience with the Reaccreditation Readiness Assessment.
 - SNHD will utilize this opportunity for feedback from the accrediting authority one year before we make our final submission.
 - This should allow us time to upgrade documentation before submission for a greater margin of success.
- Attended 90 minutes of training from PHAB on Foundational Public Health Services and how it is incorporated into Reaccreditation requirements.

PHIG

- Refined and focused projects for consulting and software tools used by the entire District.
- PHIG is planned to cover 100% of consulting costs for document and process review through the Reaccreditation date in 2027.

Appendix A – Office of Communications

Media, Collateral and Community Outreach Services:

Media – Digital/Print Articles

Media - Broadcast stories

Collateral - Advertising/Marketing Products

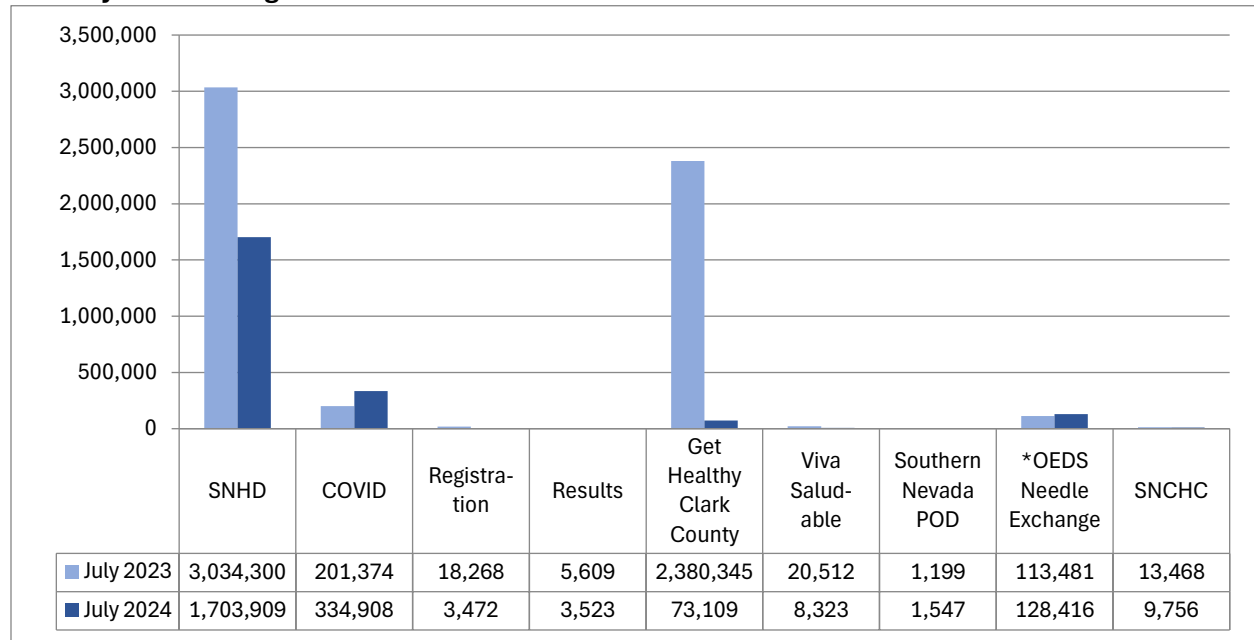
Community Outreach - Total Volunteers¹

Community Outreach - Volunteer Hours

	July 2023	July 2024		YTD FY24	YTD FY25	
Media – Digital/Print Articles	30	102	↑	30	102	↑
Media - Broadcast stories	76	232	↑	76	232	↑
Collateral - Advertising/Marketing Products	16	28	↑	16	28	↑
Community Outreach - Total Volunteers ¹	9	7				
Community Outreach - Volunteer Hours	720	504	↓	720	504	↓

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

Monthly Website Page Views:



Social Media Services		July 2023	July 2024		YTD FY24	YTD FY25
Facebook SNHD	Followers	13,310	13,447	↑	N/A	N/A
Facebook GHCC	Followers	6,127	6,121	↓	N/A	N/A
Facebook SHC	Followers	1,656	1,643	↓	N/A	N/A
Facebook THNK/UseCondomSense	Followers	5,401	5,291	↓	N/A	N/A
Facebook Food Safety	Followers	138	168	↑	N/A	N/A
Instagram SNHD	Followers	4,272	4,660	↑	N/A	N/A
Instagram Food Safety	Followers	528	525	↓	N/A	N/A
Instagram GetHealthyCC	Followers	74	208	↑	N/A	N/A
**Instagram @Ez2stop	Followers	0	146	↑	N/A	N/A
X (Twitter) EZ2Stop	Followers	434	429	↓	N/A	N/A
X (Twitter) SNHDflu	Followers	1,857	1,855	↓	N/A	N/A
X (Twitter) Food Safety	Followers	100	103	↑	N/A	N/A
X (Twitter) SNHDinfo	Followers	10,415	10,415	-	N/A	N/A
X (Twitter) TuSNHD	Followers	339	345	↑	N/A	N/A
X (Twitter) THNK/ Use Condom Sense	Followers	695	679	↓	N/A	N/A

Social Media Services		July 2023	July 2024		YTD FY24	YTD FY25
X (Twitter) SoNVTraumaSyst	Followers	128	126	↓	N/A	N/A
*Threads SNHD	Followers	441	823	↑	N/A	N/A
**TikTok @Ez2stop	Views	0	19	↑	N/A	N/A
YouTube SNHD	Views	186,818	189,047	↑	186,818	189,047
YouTube THINK / UseCondomSense	Views	216	200	↓	216	200
<p>Note: Facebook, Instagram and X (Twitter) numbers are not cumulative. *Meta (Facebook) has created a platform Threads to compete with X (Twitter) on July 5, 2023. SNHD has joined this platform and will start tracking our follower count. **Ez2stop syphilis campaign added to TikTok and Instagram.</p>						

Appendix B – Finance – Payroll Earnings Summary – June 22, 2024 to July 5, 2024

PAYROLL EARNINGS SUMMARY
June 22, 2024 to July 5, 2024

	Pay Period	Calendar YTD	Fiscal YTD	Budget 2025	Actual to Budget	Inurred Pay Dates to Annual
PUBLIC HEALTH & PREVENTATIVE CARE	\$ 307,182.28	\$ 4,255,634.97	\$ 307,182.28	\$ 8,752,968.00	4%	
ENVIRONMENTAL HEALTH	\$ 607,269.11	\$ 8,473,372.04	\$ 607,269.11	\$ 16,165,526.00	4%	
COMMUNITY HEALTH	\$ 286,931.14	\$ 4,465,804.93	\$ 286,931.14	\$ 8,845,899.00	3%	
DISEASE SURVIELLANCE & CONTROL	\$ 343,772.50	\$ 5,444,385.25	\$ 370,899.28	\$ 9,652,903.00	4%	
FQHC	\$ 322,291.79	\$ 4,520,029.25	\$ 322,291.79	\$ 9,532,374.00	3%	
ADMINISTRATION W/O ICS-COVID	\$ 564,579.41	\$ 7,382,240.05	\$ 564,579.41	\$ 14,907,050.00	4%	
ICS-COVID General Fund	\$ -	\$ -	\$ -	\$ -	0%	
ICS-COVID Grant Fund	\$ -	\$ -	\$ -	\$ -		
TOTAL	\$ 2,432,026.23	\$ 34,541,466.49	\$ 2,459,153.01	\$ 67,856,720.00	4%	4%

FTE	800
Regular Pay	\$ 1,839,114.16
Training	\$ 218.88
Final Payouts	\$ 13,422.13
OT Pay	\$ 15,381.95
Leave Pay	\$ 526,818.46
Other Earnings	\$ 37,070.65
TOTAL	\$ 2,432,026.23

BI-WEEKLY OT/CTE BY DIVISION/DEPARTMENT
June 22, 2024 to July 5, 2024

Overtime Hours and Amounts

Comp Time Hours Earned and Value

ADMINISTRATION						
Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	Value
Cardona, Anthony (Tony)		10.00	442.98	Price Keri	15.00	490.89
Galaviz, Monica		18.50	1172.07			
Arriaga, Jocelyn		4.00	148.03			
Tran, Amy		28.75	1645.37			
Thede, Stacy		2.00	61.91			
Masters, Christopher		4.50	139.31			
Arzate, Mario		1.00	30.12			
Maldonado, Julie		6.75	357.45			
Kuahiwiniui-McGuire, Brandon		3.50	105.43			
Veron, Michelle		5.00	258.18			
Wright, Michael		10.00	516.36			
Addison, Leonda		1.00	36.11			
Murphy, Melissa		6.50	234.73			
Total Administration		101.50	5148.05		15.00	490.89

COMMUNITY HEALTH SERVICES						
Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	Value
				Barry Nancy	0.38	12.27
Total Community Health Services		0.00	0.00		0.38	12.27

FQHC-COMMUNITY HEALTH CLINIC						
Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	Value
Diaz Villa, Banessa		0.25	9.51	Avalos Mayra	0.50	19.56
Pineda, Allison		0.50	16.31			
Total FQHC-Community Health Clinic		0.75	25.82		0.50	19.56

PUBLIC HEALTH & PREVENTIVE CARE

<u>Employee</u>	<u>Project/Grant Charged to</u>	<u>Hours</u>	<u>Amount</u>	<u>Employee</u>	<u>Hours</u>	<u>Value</u>
Maciel-Perez, Marisol	IMMEQ_22	6.50	310.70			
Enzenauer, Lizette		26.50	1403.28			
Robles, Cynthia		23.00	1072.56			
Polintan, Michael	IMMEQ_22	13.00	575.88			
Polintan, Michael	IMMCD_22	3.00	132.90			
Nagai, Sage	IMMEQ_22	5.50	348.45			
Wong, Michelle	IMMEQ_22	6.00	361.30			
Total Primary & Preventative Care		83.50	4205.07		0.00	0.00

ENVIRONMENTAL HEALTH

<u>Employee</u>	<u>Project/Grant Charged to</u>	<u>Hours</u>	<u>Amount</u>	<u>Employee</u>	<u>Hours</u>	<u>Value</u>
Taylor, George		6.00	380.12	Cavin Erin	5.25	221.74
Billings, Jacob		7.00	478.40	Santiago Anthony	1.50	63.35
Diaz, Nathan		5.75	364.29	Jones Mallory	3.75	116.58
Edwards, Tara		8.00	533.28	Sabandith Vetahya	1.25	38.86
Sheffer, Thanh		20.00	1204.33	Bieser Nickolas	1.25	35.08
Woods, Heather		3.50	210.76	Hall Alyssa	2.25	63.15
Piar, Diane		10.00	602.17	Concepcion Derrell Glen	0.25	6.83
Ortiz-Rivera, Vanessa		3.25	195.70	Hernandez Lilian	1.00	27.34
Rich, Victoria		8.00	457.84			
Sanders, Jennifer		2.25	107.55			
Choi, Jessica		2.50	122.72			
Darang, Chase		2.50	119.50			
McCann, Alexandra		1.00	46.63			
Jones, Mallory		7.25	338.09			
Thein, Kelsey		2.25	104.92			
Wells, Jordan		1.50	69.95			
Jufar, Lydia		0.25	10.81			
Bidinger, Joy		4.50	204.46			
Gonzalez, Kimberly		2.75	115.78			
Decicco, Natalya		7.00	294.70			
Hernandez, Lilian		1.00	41.01			
Total Environmental Health		106.25	6003.01		16.50	572.93

DISEASE SURVEILLANCE & CONTROL

<u>Employee</u>	<u>Project/Grant Charged to</u>	<u>Hours</u>	<u>Amount</u>	<u>Employee</u>	<u>Hours</u>	<u>Value</u>
				Raman Devin	1.13	52.62
Total Disease Surveillance & Control		0.00	0.00		1.13	52.62
Combined Total		292.00	15381.95		33.50	1148.27



Memorandum

Date: August 22, 2024

To: Southern Nevada District Board of Health

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

Subject: Community Health Division Monthly Activity Report – July 2024

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

A. Chronic Disease Prevention Program (CDPP) Update

The 2024 Move Your Way (MYW) Initiative kicked off in May. Move Your Way promotional and educational materials will be distributed at community events and sponsored pool parties that provide free admission for families during the summer to promote physical activity. In June, the CDPP team participated in four (4) events reaching over 850 people. The Move Your Way initiative will run through Labor Day.

In June, the CDPP's Barbershop Health Outreach Program (BSHOP) hosted Shop Talk: Cut to the Chase on June 27th at Masterpiece Barber School and Salon Talk: A Healthy You is a Beautiful You at The Beauty Spot on June 1st. Shop Talk was an interactive event featuring experts addressing topics specific to men's health including heart disease, mental health, and prostate health. Over 50 men attended Shop Talk. Twelve (12) men received a BP screening/referral, and thirteen (13) men received a referral for mental health services. The event was featured in a new story on Channel 3. Over 30 women attended Salon Talk, which also featured expert panelists addressing topics such as heart disease, mental health, and stress management. Seventeen (17) women received a BP screening/referral at Salon Talk. The salon owner is also planning a follow up activity addressing stress management and physical activity through yoga.

CDPP staff provided three (3) in-person DSMES classes in June, two (2) classes in English and one (1) class in Spanish. Two (2) classes were offered at the Arthur Sartini Senior Housing Complex and one (1) class was offered at SNHD. A total of 38 people attended at least one (1) class and 26 (68%) completed both classes.

The CDPP sponsored a free, evidence-based Diabetes Prevention Program (DPP) class for the community. The DPP class was facilitated by our partner, AAA Healthcare Institute and held at Nevada Partners. The class began in fall 2023 and wrapped up in June 2024 (maintenance is ongoing). In total, fourteen (14) participants registered for the class and eleven (11) completed the course. Of those that completed the course, 73% reduced their weight and increased their physical activity. 36% of completers reduced their A1c to within goal range (5.1% - 6.7%) and significantly reduced their risk of developing type 2 diabetes. CDPP is sponsoring another community DPP class which began at the end of June.

CDPP sponsored a free, community Self-Monitoring Blood Pressure Program (SMBPP) at the Durango YMCA. The class began in March with 25 participants and ended in June. The class was offered in English and Spanish. 21 people completed the course (84%). Of those that completed the course, 62% were able to lower their BP from elevated, stage 2, or stage 1 to the normal range and 10% were able to lower their BP but not to the normal range yet.

Our CDPP staff participated in a walk audit for the Nellis Air Force Base Transportation Study being developed by The Regional Transportation Commission (RTC). RTC is conducting walk audits in the study area with community members and stakeholders. The purpose of the study is to make streets safer and make the community a more welcoming, accessible and inclusive place to walk and bike. The results from the walk audits and the Nellis Transportation Study will also be used to inform the transportation assessment activity included in our REACH grant.

B. Tobacco Control Program (TCP) Update

The SNHD TCP's African American initiative titled Because We Matter, partnered with twelve (12) local churches for No Menthol May. No Menthol May is an opportunity to engage local faith leaders to help improve community health and reduce disparities related to tobacco use. Approximately 85% of African American adults who smoke use menthol cigarettes. Staff provided educational materials, including social media ads, videos, handouts, branded promotional items, and the Nevada Tobacco Quitline cessation information. These resources aim to raise community awareness about population-specific tobacco issues, flavoring in tobacco products, the risks of menthol tobacco products, tobacco marketing, and the harm to African Americans. Staff engaged the community, distributed educational and promotional materials, and presented on No Menthol May topics during outreach activities.

Because We Matter partnered with the 2024 Jazz in the Park Festival to offer performances every Saturday May 11th - June 8th. Staff provided educational materials on tobacco-related topics, including vaping, flavoring, and menthol, and promoted the Nevada Tobacco Quitline to attendees at all five (5) events. These events are smoke and vape-free. A total of three (3) events occurred in May with over 4,000 people in attendance.

The TCP is collaborating with statewide partners to conduct tobacco purchase assessments in tobacco retail settings statewide. These tobacco purchase assessments assess a retailer's adherence to Nevada's tobacco laws including ID verification. Additionally, tobacco retailers will be given a Tobacco Retailer toolkit to educate them on how to be a Responsible Retailer. The surveys began on April 1st, with 600 stores completed in Southern Nevada through the end of May.

The TCP’s Hispanic/Latinx initiative, Por Mi Por Ti Por Nosotros, Viva Saludable partnered with the Mexican Patriotic Committee’s annual Cinco de Mayo event; CCSD’s Mariachi competition, and Latinas in Power (LIP) painting event to promote tobacco-free lifestyles and cessation resources. Nearly 4,000 individuals attended the events.

The SNHD Tobacco Control Program's Native Hawaiian/ Pacific Islander initiative, Island eNVy, is partnered with the fourth Annual May Day event in Las Vegas on May 5th. This family friendly event was smoke and vape-free with over 450 in attendance.

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

A. OEMSTS – July 2023 / 2024 Data

EMS Statistics	July 2023	July 2024	
Total certificates issued:	84	96	↑
New licenses issued:	73	86	↑
Renewal licenses issued (recert only):	0	1	↑
Driver Only:	30	48	↑
Active Certifications: EMT:	909	926	↑
Active Certifications: Advanced EMT:	1777	1950	↑
Active Certifications: Paramedic:	1973	2109	↑
Active Certifications: RN:	64	64	=

III. OFFICE OF PUBLIC HEALTH PREPAREDNESS (OPHP)

A. Planning and Preparedness

1. Staff continued collaborating with Clark County and a software developer on an Impacted Persons Database. They are currently working through the legal implications of providing patient data to Resiliency Center for extension of services.
2. OPHP continued to review and revise plans, threat response guides, and both internal and external training.
3. OPHP Supervisor presented on responder mental health concerns after a disaster/incident and the Impacted Persons Database at the National Homeland Security Conference in Miami Beach, FL.
4. Planner I continued to draft the Administrative Preparedness Annex.
5. Planners continue to review and revise the CHEMPACK, Nuclear and Radiation, Administrative Preparedness, Mass Care Support, and Highly Infectious Disease plans.

- They met with Human Resources to discuss procurement, payroll, contracts, and personnel needs for preparedness annex.
6. Planner continued to update 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.
 7. Assistance was provided to the revisions of the COVID AAR.
 8. Planners continue to update the Nevada Continuity tool in order to streamline the process of generating a usable Continuity of Operations Plan (COOP).
 9. Fifty SNHD employees were fit tested for personal protective equipment.
 10. Planner I met with ThrivePoint Academy leadership to provide review of their EOP and recommend improvements based on Nevada DOE EOP Checklist.
 11. Planners collaborated with OOC to begin concept and objectives for Biological Game in (tentative) January 2025.
 12. Planner I was accepted as a reviewer for Project Public Health Ready 2024 review cycle.
 13. Planner I participated in State of Nevada Department of Education EOP Working Group. (ongoing).
 14. Planner I coordinated automation of emergency notification system updates with IT and Human Resources.
 15. Received and processed requests for HPP grant funding of emergency response equipment (City of NLV FD, Mountain View Hospital, Summerlin Hospital).
 16. Senior Planner continued to review *Aedes aegypti* Invasive Mosquito Plan and Community Reception Center Plan. Planner I began complete rewrite of Emergency Operations Basic Plan.

B. Training, Exercises and Public Health Workforce Development:

1. Trainers continue to develop Position Specific Task Books and related training curricula. Finance Section Chief training was provided on July 31st for six emergency personnel staff. Second offering of PST for Incident Commander, Safety Officer, PIO and Liaison Officer scheduled for August 8th.
2. New Hire Orientation for Emergency Preparedness and Security was provided on July 17th for fourteen new employees. CPR Training was not provided in July.
3. Senior Planner and Planner I continue to coordinate with Environmental Health, SNPHL, and EPA on full scale exercise to be conducted in August.
4. Planner I completed COOP After Action Report and held After Action Report Meeting.
5. Planner I attended DSLR PHEP NOFO & Exercise Supplemental Guidance Seminar.
6. Planner I have begun planning efforts for the Extreme Heat Seminar planned for March 2025.

C. Southern Nevada Healthcare Preparedness Coalition (SNHPC)

1. Trainer confirmed UMC Hospital for First Receiver Decontamination Training on August 14th. Currently working with Mountain View Tenaya Hospital for additional training date in Q4 of this calendar year.
2. Our Trainer continues to support Hospital Radiation training offered at UMC Hospital on September 17th. Flyers were distributed to SNHPC hospital contacts.
3. The trainer is coordinated TEEX Medical Preparedness & Response to Bombing Incidents at North Las Vegas OEM February 26th - 27th. TEEX Medical Management of CBRNE Events and Radiological Training for Hospital Personnel tentatively planned for September or October 2025, location TBD.
4. Twenty Hospital Area Command bags for standalone emergency departments assembled. Training for standalone ED staff coordinated with the Fire Department.
5. Planners and Clinical Advisor have begun drafting the Patient Movement and Resource Management Annexes.
6. Planners and Clinical Advisor continue to promote Evacuated training being held August 12th and 13th.

D. Fusion Center Public Health Analyst:

1. Coordinated production and distribution of monthly joint fusion center public health bulletin.
2. Disseminated public health information between SNHD and the Southern Nevada Counter Terrorism Center (SNCTC).
3. Provided public health input on threat assessment projects.
4. Reviewed special events for public health concerns.
5. Developed appropriate connections to increase communication between SNHD, SNCTC and its partner organizations.

E. Grants and Administration:

1. OPHP is awaiting Notice of Sub-Awards for FY 2025 and no cost extensions from FY 2024.
2. Hired a new Senior Administrative Assistant who will start on August 5th.

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. Volunteer Management Plan was updated and submitted for approval.

2. MRC Coordinator attended Nevada Academy of Family Physicians Summer CME conference exhibit hall to distribute public health materials and recruit volunteers.
3. MRC Volunteers served at SNHD Main and East clinics to help with back-to-school rush, printing vaccine records and offering general help.

MRC Volunteer Hours FY2025 Q1

(Economic impact rates updated April 2024):

Activity	July	August	September
Training			
Community Event			
SNHD Clinic	35.5		
Total Hours	35.5		
Economic impact	\$1,215.40		

IV. VITAL RECORDS

- A. July 2024 is showing a 22% decrease in birth certificate sales compared to July 2023. Death certificate sales currently showing a 21% increase in comparison to July 2023. SNHD received revenues of \$29,993 for birth registrations, \$24,531 for death registrations; and an additional \$7,804 in miscellaneous fees.

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

Vital Statistics Services	July 2023	July 2024		FY 22-23 (July)	FY 23-24 (July)	
Births Registered	1,813	1,853	↑	1,813	1,853	↑
Deaths Registered	1,351	1,896	↑	1,351	1,896	↑
Fetal Deaths Registered	16	17	↑	16	17	↑

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

Vital Statistics Services	July 2023	July 2024		FY 22-23 (July)	FY 23-24 (July)	
Birth Certificates Sold (walk-in)	42	13	↓	42	13	↓
Birth Certificates Mail	162	130	↓	162	130	↓
Birth Certificates Online Orders	4,262	3,276	↓	4,262	3,276	↓
Birth Certificates Billed	130	140	↑	130	140	↑
Birth Certificates Number of Total Sales	4,596	3,559	↓	4,596	3,559	↓
Death Certificates Sold (walk-in)	17	7	↓	17	7	↓
Death Certificates Mail	186	188	↑	186	188	↑
Death Certificates Online Orders	6,664	8,124	↑	6,664	8,124	↑

Death Certificates Billed	41	55	↑	41	55	↑
Death Certificates Number of Total Sales	6,908	8,374	↑	6,908	8,374	↑

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

Vital Statistics Sales by Source	July 2023	July 2024		FY 22-23 (July)	FY 23-24 (July)	
Birth Certificates Sold Valley View (walk-in)	.9%	.4%	↓	.9%	.4%	↓
Birth Certificates Mail	3.5%	3.7%	↑	3.5%	3.7%	↑
Birth Certificates Online Orders	92.7%	92%	↓	92.7%	92%	↓
Birth Certificates Billed	2.8%	3.9%	↑	2.8%	3.9%	↑
Death Certificates Sold Valley View (walk-in)	.2%	.1%	↓	.2%	.1%	↓
Death Certificates Mail	2.7%	2.2%	↓	2.7%	2.2%	↓
Death Certificates Online Orders	96.5%	97%	↑	96.5%	97%	↑
Death Certificates Billed	.6%	.7%	↑	.6%	.7%	↑

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

Revenue	July 2023	July 2024		FY 22-23 (July)	FY 23-24 (July)	
Birth Certificates (\$25)	\$114,900	\$88,975	↓	\$114,900	\$88,975	↓
Death Certificates (\$25)	\$172,700	\$209,350	↑	\$172,700	\$209,350	↑
Births Registrations (\$13)	\$38,636	\$29,993	↓	\$38,636	\$29,993	↓
Deaths Registrations (\$13)	\$20,098	\$24,531	↑	\$20,098	\$24,531	↑
Convenience Fee (\$2)	\$8,454	\$7,036	↓	\$8,454	\$7,036	↓
Miscellaneous Admin	\$553	\$768	↑	\$553	\$768	↑
Total Vital Records Revenue	\$355,341	\$360,653	↑	\$355,341	\$360,653	↑

COMMUNITY HEALTH Passport Program – Fiscal Year Data

B. PASSPORT SERVICES – Passport Services is appointment only.

Applications	July 2023	July 2024		FY 22-23 (July)	FY 23-24 (July)	
Passport Applications	750	694	↓	750	694	↓
Revenue	July 2023	July 2024		FY 22-23 (July)	FY 23-24 (July)	
Passport Execution/Acceptance fee (\$35)	\$26,250	\$24,290	↓	\$26,250	\$24,290	↓

V. HEALTH EQUITY

- A. The Health Equity program received a No Cost Extension from the CDC COVID-19 Disparities Grant. This extension aims to enhance infrastructure support for COVID-19 prevention and control among underserved populations at higher risk.
 - 1. The program maintains collaborations with SNHD programs and grant subrecipients to plan and coordinate COVID-19 community strategies and events.
- B. The Health Equity Program works toward reducing health disparities through increasing organizational capacity and implementing community strategies.
- 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 with 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. SNHD Nursing Division:
 - a. Molecular and microbiology culture.
 - b. Sexually Transmitted Disease (STD) testing.
- 2. SNHD STD Department:
 - a. Participates in the CDC Gonococcal Isolate Surveillance Project (GISP) and the enhanced Gonococcal Isolate Surveillance Project (eGISP).
 - b. SNPHL performs NAAT and culture testing of *N. gonorrhoeae* isolates and submits them to a reference laboratory for the determination of antibiotic susceptibility patterns.
 - c. SNPHL has joined eGISP Part B to expand culture-independent testing for antimicrobial resistance genes of gonococcal isolates.
- 3. The total monthly samples tested are listed in the table below:

Test Name	Monthly Count	Avg Year to Date
GC Cultures	39	46
NAAT NG/CT	1415	1252

Syphilis	777	876
RPR/RPR Titers	125/45	154/69
Hepatitis Total	1504	1208
HIV/differentiated	672/12	645/19
HIV RNA	113	98

4. COVID testing:

- Performed SARS-CoV-2 PCR extraction on the KingFisher Flex platform exclusively.
- SNPHL maintains a capacity of 2000 tests/day with a turnaround-time of <48 hours (current TAT two-day currently at / near goal).
- For July, the average daily testing volume was 71 with an average turnaround time of 29 hours from collection date to release of the 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.

Monthly summary of COVID PCR/NAAT testing:

Month	# PCR & NAAT/#POS	COVID	# PCR & NAAT/#POS
January	1,144/148	July	716/166
February	1,160/77	August	
March	680/42	September	
April	204/18	October	
May	115/17	November	
June	365/77	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	4	2	2						26
	Campy Screen	11	17	3	15	5	3	4						58
Neisseria species	Gonorrhoeae Culture	48	85	47	41	24	36	39						320
	Gram Stain/WBC	0	5	0	0	5	0	0						10
	Neisseria ID	0	0	0	0	1	1	1						3
	Haemophilus ID	7	0	2	1	0	0	0						10
Unknown ID	Bacterial ID	0	0	0	0	0	1	12						13
	WGS (PulseNet)	27	24	16	30	24	19	20						160
Salmonella	Salmonella Screen	14	10	12	19	12	15	14						96
	Salmonella Serotype	13	10	12	16	14	12	11						88
Shigella	Shigella Screen	10	10	4	10	6	3	3						46
	Shigella Serotype	7	10	2	3	5	3	2						32
STEC	STEC Screen	10	2	2	4	1	4	3						26
	STEC Serotype	1	1	1	0	1	2	1						7
Unknown	Stool Culture	5	6	2	0	6	0	0						19
Vibrio	Vibrio ID	0	0	1	0	0	0	0						1
	Vibrio Screen	0	0	1	3	0	1	0						5
Yersinia	Yersinia Culture/ID	1	2	1	0	0	0	0						4

B. Epidemiological Testing and Consultation:

1. SNPHL participates in the SNHD Outbreak Investigation Committee and Foodborne Illness Taskforce. There were zero cases for GI outbreak investigation in July.

2. SNPHL continues to report results of influenza testing to the CDC National Respiratory and Enteric Virus Surveillance System (NREVSS). In July, SNPHL performed 31 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	2	0	0					

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 20 Whole Genome Sequencing tests (WGS) as part of PulseNet Foodborne Outbreak Surveillance in July 2024.
5. SNPHL uses Bruker MALDI-TOF instrument for streamlined screening of bacterial isolates. A total # of 207 bacterial organisms have been identified in July.
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 July 2024, SNPHL has sequenced 195 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	58	96	75					

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 June, we tested a total of 527 mosquito pool samples. There were 116 positive WNV mosquito pool samples identified in July. 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 July, a total of 21 clinical isolates, Neisseria gonorrhoeae eight (8) isolates and Neisseria meningitidis two (2) 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 COVID online ordering applications for long-term care facilities.
6. Supplied Biosafety Guidance to Sentinel Sites regarding Monkeypox.
7. Furnished Monkeypox and Bivalent COVID Booster vaccination to laboratory staff.
8. Perpetual Biosafety Training and guidance to SNPHL personnel.

E. July 2024 SNPHL Activity Highlights:

1. SNPHL has a stable CDC supply of Viral Transport Medium (VTM) used in COVID collection kits.
2. Passed the proficiency test with CAP HIV-NB 2024 Clinical Lab 100% graded. July 17th: CAP Viral Markers (VM1, VM5)-B Clinical Lab 100% July 17th.
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 contract for clinical chemistry instruments is under development in the Contract Office.
4. The Board of Health has approved the petition to purchase double-door autoclave and it will take six (6) months to deliver the double door autoclave to SNPHL.
5. According to the WGS and genomic data analysis, the Omicron variant JN. 1.1., lineages are domain lineages are domain lineages in July, 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. According to the data of influenza surveillance in this flu season, the A/H3 and A/H1 and B/Victoria are major subtypes of influenza and the percentage of ratio between three (3) subtypes are 47%, 29%, and 24%, respectively.
7. 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. There was no suspect avian flu sample received in the lab in July.
8. The new design may focus on building BSL-3 and Micro lab in the 2nd floor and leave semi shell for the first floor. It anticipates completing this design in two to three weeks.
9. SNPHL will start to add Dengue PCR testing for Mosquito samples on the week of July 8th.
10. Outreach, the new electronic ordering system, formally GOLIVE on Wednesday, May 8th. We discussed with IT at Sunrise Hospital to establish Outreach electronic communication ordering and report tool on Friday, July 26th.

F. COMMUNITY HEALTH – SNPHL – Calendar Year Data

June SNPHL Services	2023	2024	
Clinical Testing Services ¹	4,448	5,587	↑
Epidemiology Services ²	1,445	592	↓
State Branch Public Health Laboratory Services ³	174	0	↓
All-Hazards Preparedness Services ⁴	6	6	
Environmental Health Services ⁵	0	602	↑

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

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

³ Includes COVID 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.



AT THE SOUTHERN NEVADA HEALTH DISTRICT

MEMORANDUM

Date: August 20, 2024

To: Southern Nevada Community Health Center Governing Board

From: Randy Smith, Chief Executive Officer, FQHC *RS*
Fermin Leguen, MD, MPH, District Health Officer *FL*

Subject: Community Health Center FQHC Operations Officer Report – July 2024

Division Information/Highlights: The Southern Nevada Community Health Center, a division of the Southern Nevada Health District, mission is to serve residents of Clark County from underserved communities with appropriate and comprehensive outpatient health and wellness services, emphasizing prevention and education in a culturally respectful environment regardless of the patient's ability to pay.

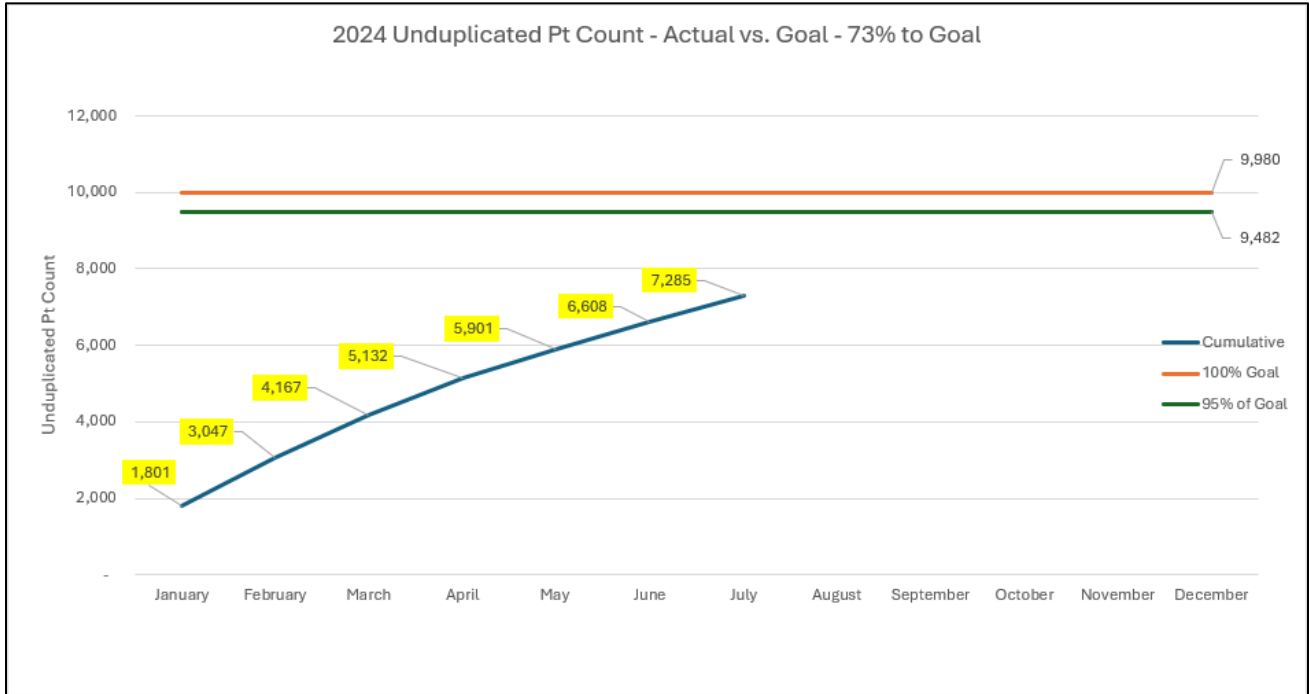
July Highlights

Administrative

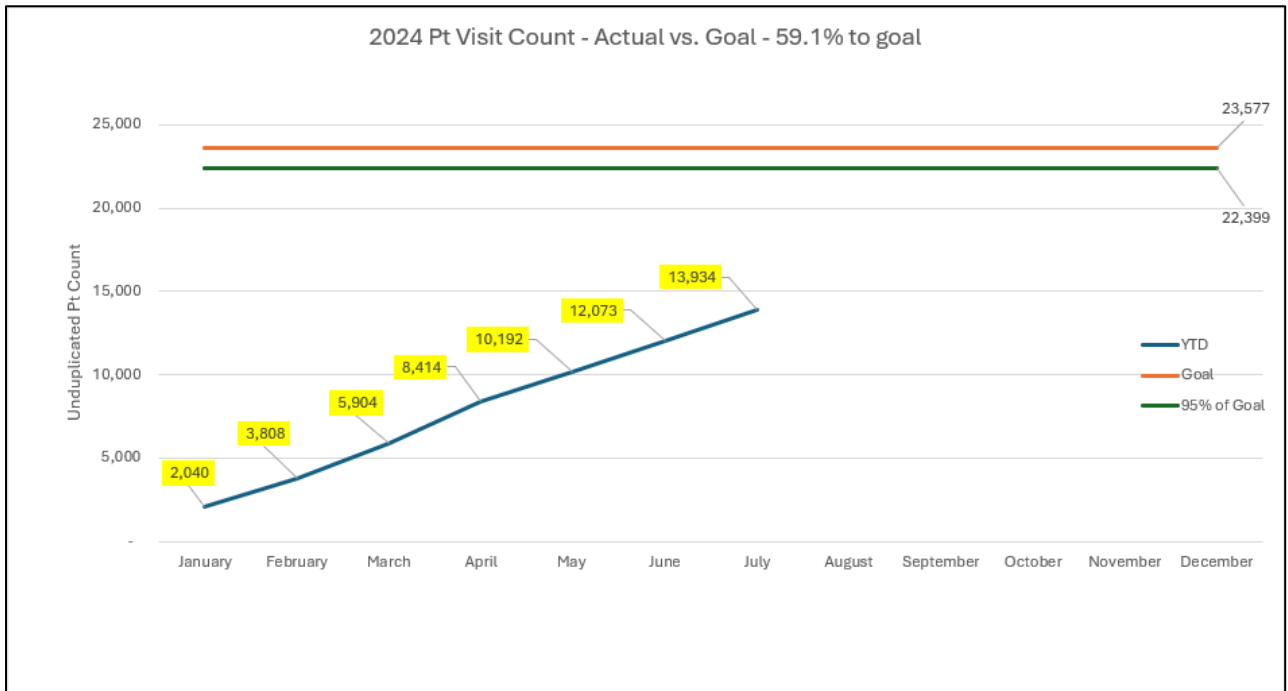
- National Health Center Week was celebrated for employees and patients during the week of August 6th. The health center's newly formed Employee Engagement Committee planned for and coordinated activities for the week.
- The health center's Federal Tort Claims Act (FTCA) redeeming application was approved for coverage in CY25.
- HRSA released a New Access Point opportunity to fund approximately 77 awards nationwide. Applications are due September 30, 2024.
- The buildout of the new Behavioral Health Clinic at Decatur is underway. The projected completion date is September 6th.
- The Medical Director recruitment is active. Two candidates are scheduled for interviews on August 15th.
- A new APRN begins on August 20th.

Access

Unduplicated Patients through July of 2024 = 73.0% to annual goal of 9980 unduplicated patients:



Patient Visits through July of 2024 – 59.1% to goal of 23,577 patient visits:



Provider Visits by Program and Site – July 2024

Facility	Program	JULY '25	JULY '24	JULY YoY %	FY25 YTD	FY24 YTD	FY YTD YoY%
Decatur	Family Health	613	312	49%	613	312	49%
Fremont	Family Health	266	128	52%	266	128	52%
Total	Family Health	879	440	50%	879	440	50%
Decatur	Family Planning	126	140	-11%	126	140	-11%
Fremont	Family Planning	112	120	-7%	112	120	-7%
Total	Family Planning	238	260	-9%	238	260	-9%
Decatur	Sexual Health	579	511	12%	579	511	12%
Fremont	Sexual Health	109			109		
ASEC	Sexual Health	68	111	-63%	68	111	-63%
Total	Sexual Health	756	622	18%	756	622	18%
Decatur	Behavioral Health	124	104	16%	124	104	16%
Fremont	Behavioral Health	130			130		
Total	Behavioral Health	254	104	59%	254	104	59%
Decatur	Ryan White	286	223	22%	286	223	22%
Fremont	Ryan White	16			16		
Total	Ryan White	302	223	26%	302	223	26%
FQHC Total		2,429	1,649	32%	2,429	1,649	32%

Pharmacy Services

	Jul-23	Jul-24		FY24	FY25		% Change YOY
Pharmacy Services	1,214	1,413	↑	1,214	1,413	↑	16.4%
Client Encounters (Pharmacy)	1,681	2,317	↑	1,681	2,317	↑	37.8%
Prescriptions Filled	36	43	↑	36	43	↑	19.4%
Client Clinic Encounters (Pharmacist)	15	30	↑	15	30	↑	100.0%
Financial Assistance Provided	-	14	↑	-	14	↑	-

- A. Dispensed 2,317 prescriptions for 1,413 clients.
- B. Pharmacist completed 43 client clinic encounters.
- C. Assisted 30 clients to obtain medication financial assistance.
- D. Assisted 14 clients with insurance approvals.

Family Planning Services

- A. Moving into the new fiscal year, the Family Planning program looks to build upon its success over the past three months. Demand for services continues to be steady and provider readiness to see additional patients is increasing. The program's workflows and experience will be a great help to the broader health center program as the team implements a new HRSA performance measure around pregnancy intentions. This measure, along with prenatal and birth weight measures have been included in the health center's strategic plan.

HIV / Ryan White Care Program Services

- A. The Ryan White program received 55 referrals between July 1st and July 31st. There was one (1) pediatric client referred to the Medical Case Management program in July and the program received two (2) referrals for pregnant women living with HIV during this time.
- B. There were 884 total service encounters in the month of July provided by the Ryan White program Linkage Coordinators, Eligibility Workers, Care Coordinators, Nurse Case Managers and Community Health Workers. There were 380 unduplicated clients served under these programs in July.
- C. The Ryan White ambulatory clinic had a total of 528 visits in the month of July: 42 initial provider visits, 220 established provider visits including nine (9) tele-visits to established clients. There were 21 nurse visits and 245 lab visits. There were 63 Ryan White encounters provided by the behavioral health team during the month of July and 44 unduplicated clients served. There were 27 Ryan White clients seen by the Registered Dietitian under Medical Nutrition services in July.
- D. The Ryan White clinic continues to implement the Rapid stART project, which has a goal of rapid treatment initiation for newly diagnosed patients with HIV. The program continues to receive referrals and accommodate clients on a walk-in basis. There were 10 patients seen under the Rapid stART program in July.

FQHC-Sexual Health Clinic (SHC)

- A. The FQHC-Sexual Health Clinic (SHC) clinic provided 1,666 unique services to 1,015 unduplicated patients for the month of July. There were 97 unduplicated patients seen at the All-Saints Episcopal Church (ASEC) Outreach Clinic. There are currently more than 100 patients receiving injectable treatment for HIV prevention (PrEP).
- B. The FQHC-SHC completed subject enrollment in a research project in collaboration with the University of San Diego, California (UCSD) looking at STI's as a tool for HIV prevention. The FQHC-SHC continues to collaborate with UMC on referrals for evaluation and treatment of neurosyphilis. The SHC is collaborating with the PPC- Sexual Health and Outreach Prevention Programs (SHOPP) with the Gilead FOCUS grant to expand express testing services for asymptomatic patients and provide linkage to care for patients needing STI, Hepatitis C or HIV treatment services.
- C. The FQHC-SHC clinical support team attended Domestic Violence 101 training provided by SafeNest to maintain partnership in the Preferred Provider Network referral program.
- D. The FQHC-SHC staff continues to see patients for Mpox evaluation and referral for vaccine.
- E. One Medical Assistant is continuing orientation in FQHC-SHC.

Refugee Health Program (RHP)

Services provided in the Refugee Health Program for the month of July 2024

Client required medical follow-up for Communicable Diseases	-
Referrals for TB issues	10
Referrals for Chronic Hep B	0
Referrals for STD	3
Pediatric Refugee Exams	21
Clients encounter by program (adults)	66
Refugee Health screening for July 2024	66
Total for FY24-25	66

Eligibility and Insurance Enrollment Assistance

As a team, Eligibility Workers submitted a total of 57 applications for the month of July.

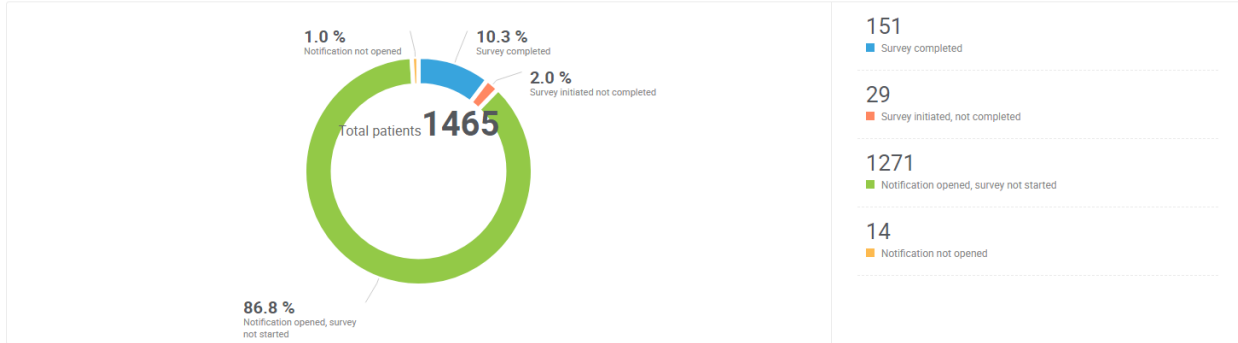
Applications	Status
37	Approved
5	Denied
14	Pending

Patient Satisfaction: See attached survey results.

SNCHC continues to receive generally favorable responses from survey participants when asked about ease of scheduling an appointment, wait time to see their provider, care received from providers and staff, understanding of health care instructions following their visit, hours of operation, and recommendation of the Health Center to friends and family.

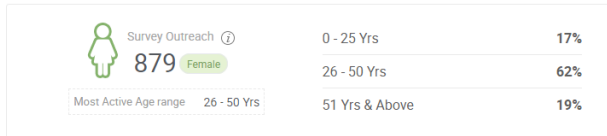
SNCHC Patient Satisfaction Survey – July 2024

Overview

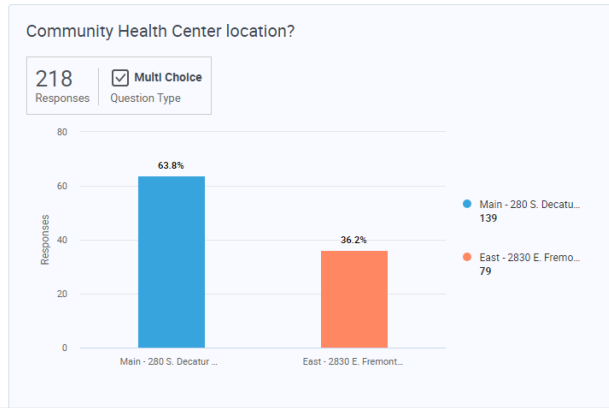
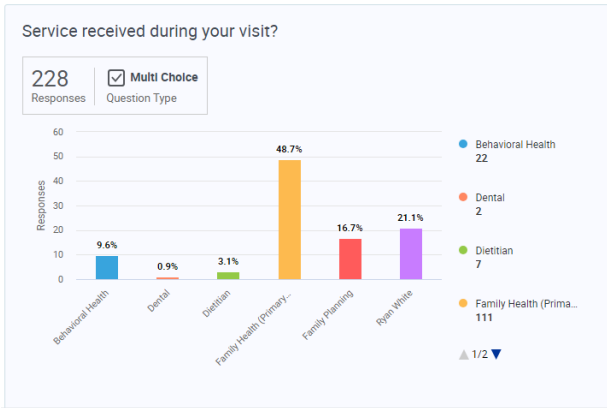


151	Survey completed
29	Survey initiated, not completed
1271	Notification opened, survey not started
14	Notification not opened

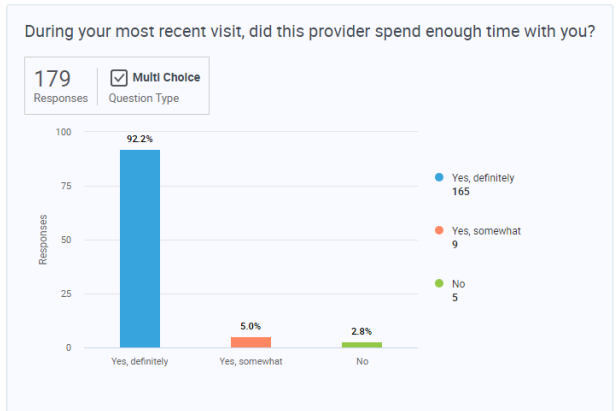
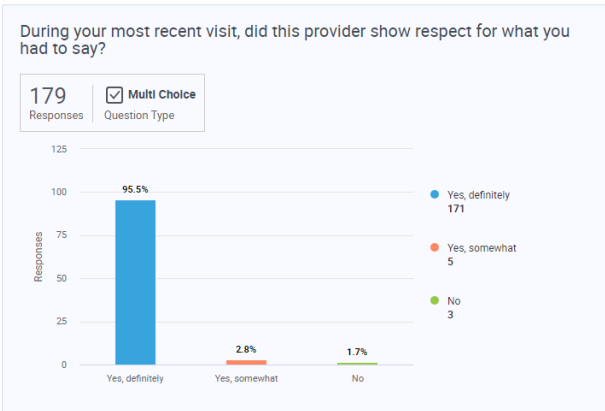
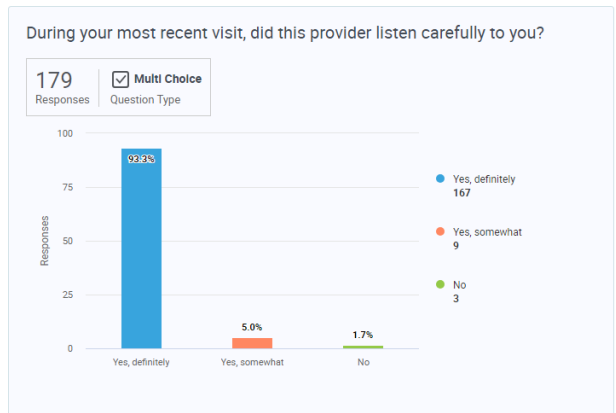
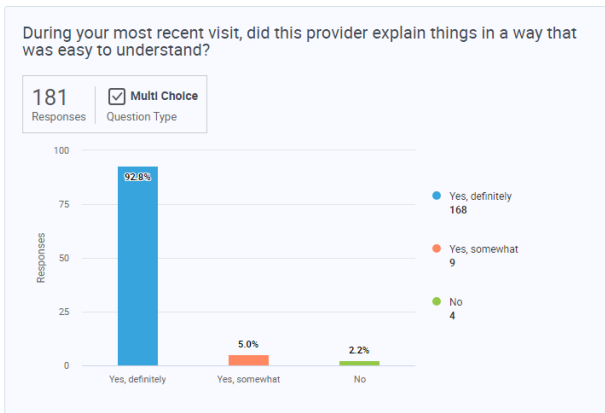
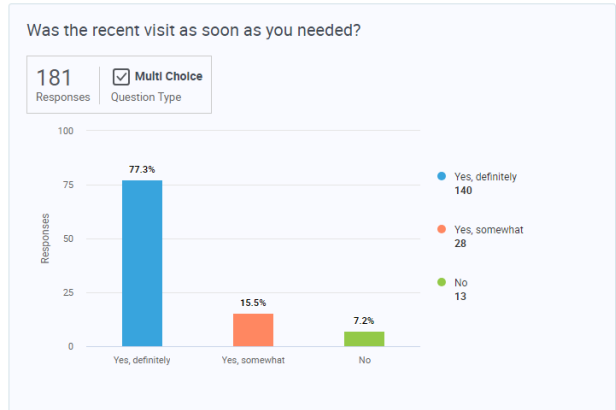
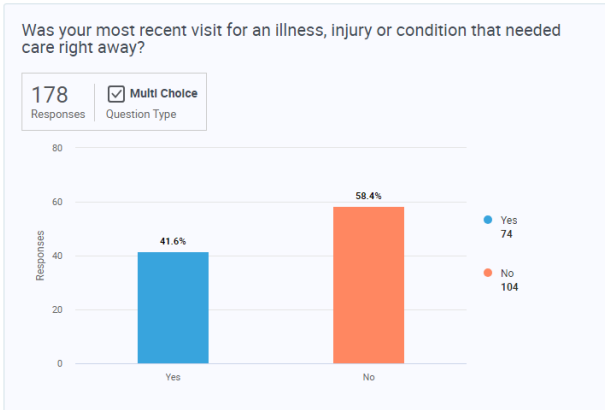
Gender



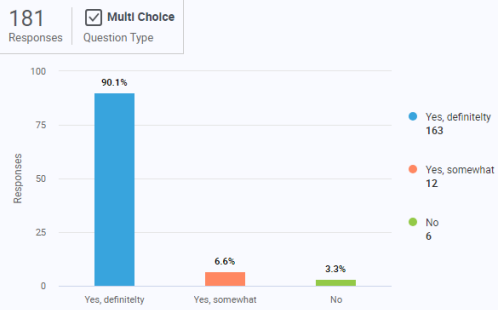
Service and Location



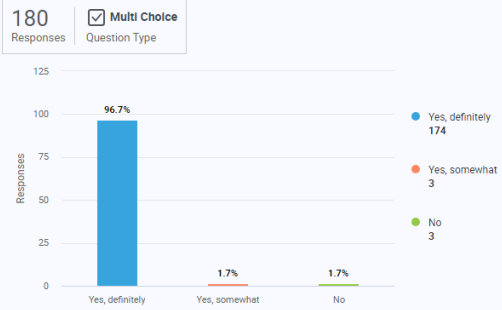
Provider, Staff and Facility



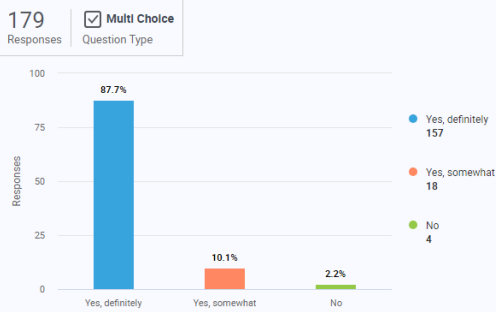
Thinking about your most recent visit, were the staff as helpful as you thought they should be?



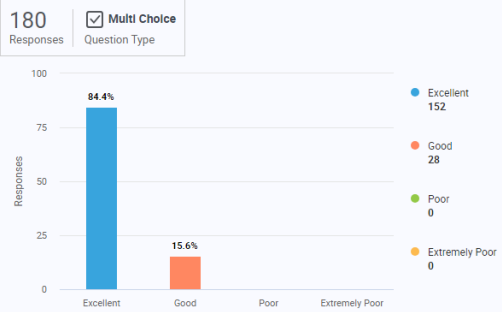
Thinking about your most recent visit, did the staff treat you with courtesy and respect?



Thinking about your recent visit, was it easy to schedule an appointment?



Thinking about the facility, how was the overall cleanliness and appearance?



How would you rate the overall care you received from your provider, where 0 is the worst and 10 is the best?

179

Responses

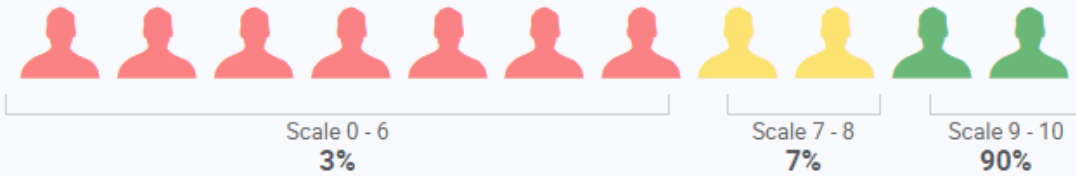
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Numbers

Question Type

87

Net Promoter Score (NPS)



6

Scale 0 - 6

12

Scale 7 - 8

161

Scale 9 - 10

General Information

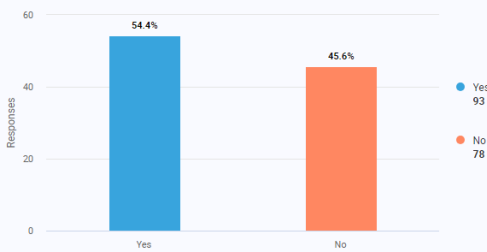
Do you have health insurance?

171

Responses

Multi Choice

Question Type



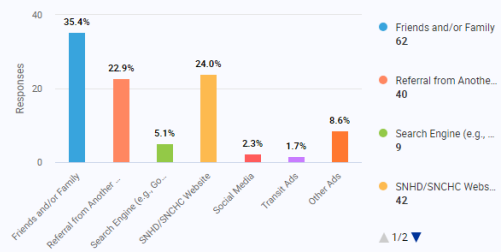
How did you hear about us?

175

Responses

Multi Choice

Question Type





Memorandum

Date: August 22, 2024

To: Southern Nevada District Board of Health

From: **Anilkumar Mangla, MS, PhD, MPH, FRIPH**, *Director of Disease Surveillance & Control*
Cassius Lockett, PhD, *Deputy District Health Officer-Operations*
Fermin Leguen, MD, MPH, *District Health Officer*

Subject: Disease Surveillance & Control Division Monthly Activity Report – July 2024

A. Division of Disease Surveillance and Control

1. Number of Confirmed and Probable Cases of Selective Illnesses Reported

*This section has been modified to reflect calendar year reporting instead of fiscal year reporting, effective February 2023. This change is in line with MMWR reporting.

	July 2023	July 2024		YTD 23	YTD 24	
Sexually Transmitted						
Chlamydia	1011	898	↓	7207	7041	↓
Gonorrhea	481	394	↓	3283	2999	↓
Primary Syphilis	21	9	↓	137	90	↓
Secondary Syphilis	28	14	↓	203	137	↓
Early Non-Primary, Non-Secondary¹	60	19	↓	367	334	↓
Syphilis Unknown Duration or Late²	111	63	↓	865	799	↓
Congenital Syphilis (presumptive)	1	4	↑	31	20	↓
Moms and Babies Surveillance						
HIV Pregnant Cases	1	2	↑	17	29	↑
Syphilis Pregnant Cases	19	7	↓	108	77	↓
Perinatally Exposed to HIV	0	0	→	1	18	↑
¹ Early Non-Primary, Non-Secondary= CDC changed the case definition from Early Latent Syphilis to Early Non-Primary, Non-Secondary ² Syphilis Unknown Duration or Late=CDC changed the case definition from Late Latent Syphilis to Syphilis Unknown Duration or Late						
	July 2023	July 2024		YTD 23	YTD 24	
Vaccine Preventable						
Haemophilus influenzae, invasive disease	1	4	↑	20	30	↑
Hepatitis A	1	1	→	4	4	→
Hepatitis B, acute	3	3	→	17	21	↑
Influenza	22	11	↓	188	697	↑

	July 2023	July 2024		YTD 23	YTD 24	
Pertussis	3	1	↓	15	37	↑
RSV	14	8	↓	679	1934	↑
Enteric Illness						
Amebiasis	1	0	↓	2	3	↑
Campylobacteriosis	21	12	↓	119	130	↑
Cryptosporidiosis	0	2	↑	5	18	↑
Giardiasis	8	3	↓	41	33	↓
Rotavirus	18	6	↓	86	105	↑
Salmonellosis	18	11	↓	116	83	↓
Shiga toxin-producing Escherichia coli (STEC)	9	3	↓	33	43	↑
Shigellosis	4	4	→	42	78	↑
Yersiniosis	1	2	↑	9	24	↑
Other						
Candida auris	44	132	↑	345	1068	↑
Carbapenem-resistant Enterobacterales (CRE)	20	49	↑	89	355	↑
Coccidioidomycosis	21	12	↓	158	119	↓
Hepatitis C, acute	0	1	↑	1	9	↑
Invasive Pneumococcal Disease	12	7	↓	137	150	↑
Lead Poisoning	19	1	↓	106	77	↓
Legionellosis	3	5	↑	21	18	↓
Meningitis, aseptic	7	0	↓	16	14	↓
Meningitis, Bacterial Other	1	0	↓	3	2	↓
Streptococcal Toxic Shock Syndrome (STSS)	3	3	→	20	25	↑
New Active TB Cases Counted (<15 yo)	0	1	↑	2	3	↑
New Active TB Cases Counted (>= 15 yo)	6	7	↑	44	40	↓

2. Number of Cases Investigated by ODS

Monthly DIIS Investigations CT/GC/Syphilis/HIV/TB	Contacts	Clusters ¹	Reactors/ Symptomatic/ Xray ²	OOJ/ FUP ³
Chlamydia	27	0	38	3
Gonorrhea	12	1	20	0
Syphilis	22	0	182	1
HIV/AIDS (New to Care/Returning to Care)	34	2	107	0
Tuberculosis	16	0	15	1
TOTAL	111	3	362	5

¹ Clusters= Investigations initiated on named clusters (clusters= named contacts who are not sex or needle sharing partners to the index patient)
² Reactors/Symptomatic= Investigations initiated from positive labs or reported symptoms
³ OOJ= Investigations initiated Out of Jurisdiction reactors/partners/clusters
 Fup= Investigations initiated to follow up on previous reactors, partners, or clusters

3. ACDC COVID-19 Activities

ACDC is transitioning Covid public health response to align with state guidance and CDC recommendations. Universal case investigation has not been recommended by the CDC since 2022. Surveillance for Covid-19 will prioritize hospitalizations and deaths while maintaining ongoing laboratory surveillance and adjusting as needed per the NVDPBH requirements.

4. Disease and Outbreak Investigations

- a. **Mpox:** As of July 29, 2024, Clark County had 316 cases of mpox.
- b. **Shigella Sonnei Cluster:** ACDC and OIE staff are conducting an ongoing investigation into a local cluster of *Shigella sonnei*. Approximately 24 persons have this serotype with closely matching whole genome sequencing, which is a significant portion of the *Shigella* cases reported to SNHD this year. Hypothesis generating questionnaires were administered to the affected individuals, however a common source of illness was not identified. This investigation was re-opened.
- c. **Legionellosis cluster:** On June 11, 2024, ACDC received a report from a local hospital reporting 3 cases of Legionellosis on the same day. A cluster investigation was initiated because all three cases resided within a small radius geographically. Three additional cases were identified in the same geographic area in the previous two months. ACDC, OIE and Environmental Health consulted with the CDC and environmental health set up a rigorous testing schedule based on the epidemiological findings of this investigation. SNHD has partnered with the state to assess and evaluate two state licensed facilities during this investigation. This investigation is ongoing.
- d. **Legionellosis Investigation associated with hotel and resort:** The Southern Nevada Health District is investigating two travel-associated cases of Legionnaires' disease in guests who stayed at Caesars Palace Hotel and Casino. On two occasions during the last six months, individuals were diagnosed with Legionnaires' disease shortly after a stay at Caesars Palace Hotel and Casino. One individual stayed during December 2023; the other individual stayed during June 2024. Water sampling was conducted after learning of each case. Water sampling after the first case was conducted and all samples tested negative for Legionella. Water sampling from the property's Palace Tower was conducted this month after learning of the second case. Nineteen initial samples were taken at various points in the water system. One sample tested positive for Legionella; all other samples tested negative. The facility conducted remediation of the water system and subsequent testing has come back negative. The facility is cooperating with the Health District's investigation and steps to notify guests of the potential for exposure and ways to minimize risk are underway. This investigation is ongoing.
- e. **Large Scale TB Contact Investigation:** ODS received a report of an active TB case in June 2024 that involved an exposure within the Clark County

School District. ODS has coordinated onsite testing at SNHD that will be held August 5 and 6.

- f. **West Nile Virus Season:** WNV season began with an extremely high positivity rate in mosquitoes beginning in May 2024. The first human case was reported in June. In the month of July, ACDC conducted 16 WNV investigations with 7 of those being classified as cases.

5. Non-communicable Reports and Updates

- a. Naloxone Training: SNHD is training and distributing naloxone (Narcan®) to first responders and members of key community sectors throughout Nevada to better respond to the large-scale burden of opioid overdoses. SNHD is receiving naloxone through SAMHSA’s First Responders-Comprehensive Addiction and Recovery Act (FR-CARA) grant which began on September 30, 2022. SNHD is also distributing naloxone through the CDC’s Overdose Data to Action (OD2A) funding. ODS has implemented a policy for SNHD staff to carry and administer Naloxone. ODS has also been given permission at the Clark County Detention Center to place Naloxone in a person’s property at the facility.

The following Naloxone trainings/distributions have taken place in the month of July:

Naloxone Distribution	Agency	# Trained	# of Naloxone doses distributed
7/2/2024	SNHD Pharmacy		180
7/2/2024	Foundation for Recovery		504
7/2/2024	Desert Winds		48
7/2/2024	Wellpath		312
7/3/2024	Las Vegas Comprehensive Treatment Center		312
7/3/2024	The Center		720
7/10/2024	Las Vegas Valley Water District		96
7/10/2024	AIDS HEALTHCARE FOUNDATION		312
7/10/2024	Puentes		216
7/10/2024	Rio Hotel and Casino		48
7/10/2024	Silverton Casino		24
7/10/2024	NDOC - Southern Desert	22	192
7/11/2024	SNHD - Pharmacy Fremont		72
7/11/2024	Hope Christian Health Center		216
7/11/2024	The Cupcake Girls		408
7/11/2024	Henderson Police Dept		264
7/11/2024	Las Vegas Fire and Rescue		240
7/11/2024	Henderson Police Dept		-3

7/11/2024	Olive Crest	11	
7/11/2024	SNHD - L2A		3
7/16/2024	Sco-ville		4
7/16/2024	Outreach	55	110
7/17/2024	Wells Cargo	30	
7/17/2024	Boulder City Police Dept		48
7/17/2024	Valley View Community Cares		816
7/17/2024	Nevada Highway Patrol		24
7/17/2024	Arkos Health		192
7/18/2024	Clark County Coroner's office		96
7/18/2024	Henderson Comprehensive Treatment Center		312
7/18/2024	Olive Crest		24
7/18/2024	Sierra Sage Clinical Services		24
7/18/2024	Happy Campers		96
7/18/2024	Fifth Sun Project		24
7/18/2024	UNLV - Pharmacy		408
7/18/2024	MGM Resorts		60
7/18/2024	Boulder City Municipal Court	12	72
7/18/2024	Outreach	55	110
7/18/2024	Outreach	10	20
7/18/2024	UNLV Health Mojave Counseling		24
7/24/2024	Crossroads		300
7/23/2024	UNLV - Cardiff Project	5	
7/24/2024	Crossroads	15	
7/31/2024	FAITH Behavioral Health	5	
Total		220	6928

- b. Overdose Data to Action (ODTA): The ODS ODTA Health Education team monitors the Fentanyl (FTS) and Xylazine (XTS) Test Strip Program.

The following participating agencies and internal SNHD programs received FTS and XTS during the month of July:

FTS Distribution		
7/2/2024	The Center	(400 strips)
7/3/2024	Wellpath at CCDC	(300 strips)
7/3/2024	SNHD Pharmacy	(300 strips)
7/3/2024	Desert Winds Recovery/ First Dawn Recovery	(300 strips)
7/9/2024	SNHD Linkage to Action Team	(100 strips)
7/10/2024	Valley View Community Cares	(2400 strips)
7/17/2024	Sco-ville	(300 strips)
7/17/2024	Comprehensive Treatment Center	(300 strips)

7/24/2024	Trac-B/Impact Exchange	(500 strips)
7/24/2024	Happy Camper Overdose Response	(1000 strips)
7/24/2024	Crossroads of Southern Nevada	(300 strips)
7/31/2024	Sin Sity Sisters of Perpetual Indulgence Inc	(300 strips)
7/31/2024	Henderson Angels	(300 strips)
7/31/2024	Catholic Charities	(300 strips)
Total FTS:		7,100
XTS Distribution		
7/2/2024	The Center	(300 strips)
7/3/2024	Desert Winds Recovery/ First Dawn Recovery	(300 strips)
7/10/2024	Scoville	(300 strips)
7/10/2024	Valley View Community Cares	(2600 strips)
7/17/2024	Happy Camper Overdose Response	(1000 strips)
7/17/2024	Southern Nevada Health District	(100 strips)
7/17/2024	Trac-B/Impact Exchange	(500 strips)
7/24/2024	Catholic Charities	(300 strips)
Total XTS:		5,400

6. Prevention - Community Outreach/Provider Outreach/Education

- a. Ongoing promotion continues of the [Collect2Protect](#) (C2P) program, an online service for those requesting testing for gonorrhea, chlamydia, and at-home HIV test kits. The C2P program allows users to order an at-home HIV test kit conveniently and privately, at no cost and get their results at home. Test kits for chlamydia and gonorrhea are also available for a fee. Express Testing will also be available at SNHD’s main public health center, 280 S. Decatur Blvd., Las Vegas, for those who are asymptomatic and would like to get tested and know their HIV status. ODS continues to work with OOC to help promote C2P on SNHD web sites, social media and with the help of community partners. The Center, and AHF continue to offer ongoing HIV/STD, PrEP/PEP, and rapid stART services to the community.

Free HIV testing is also available from 8 a.m. – 4:30 p.m. at the Southern Nevada Health District, 280 S. Decatur Blvd., Las Vegas, NV 89107 through the Express Testing/Annex A clinic.

- b. ODS continues to collaborate with community partners to participate at various outreach events. This month we were a part of the City of North Las Vegas Jumpin' July Pop-Up Event at Tonopah Park. Tonopah Park is located at 204 E. Tonopah Ave. and is very close to the homeless shelters and services off Owens and Main St. The City of North Las Vegas holds this event periodically to focus on areas where our homeless populations congregate in order to provide numerous services onsite that they may need. The locations will rotate as determined by the organizers. Our continued collaboration and presence at events like these in the community is key to gaining community trust and to help destigmatize HIV/STI testing which is vital to ending the HIV epidemic.

- c. Distribution is ongoing - TB Surveillance developed a laminated flyer titled "Is it TB?" The content includes messaging that encourages providers to "think TB" when talking to their patients about their risks and symptoms. Additionally, there is reporting information and a QR code that links to the provider education training:
<https://lp.constantcontactpages.com/su/p26ucWo/TBRRegistration>

B. High Impact HIV/STD/Hepatitis Screening Sites

Testing is currently offered at Trac-B for HIV and Hep C. Also, The Center is offering screenings for HIV, Hep C, Gonorrhea, Chlamydia and Syphilis to the community Monday-Thursday from 1pm-5pm and every Saturday from 9am-2pm. AHF is also offering HIV and STD screenings at their Wellness Clinic locations on Monday, Wednesday, and Friday, and on their MTU.

Office of Disease Surveillance- HIV Prevention Screening/Testing Efforts						
Prevention - SNHD HIV Testing	June-23	June-24		YTD 23	YTD 24	
Outreach/Targeted Testing	865	657	↓	7195	7259	↑
Clinic Screening (SHC/FPC/TB)	183	312	↑	2338	2399	↑
Outreach Screening (Jails, SAPTA)	322	227	↓	1905	1702	↓
Collect2 Protect	12	4	↓	115	63	↓
TOTAL	1382	1200	↓	11553	11423	↓
Outreach/Targeted Testing POSITIVE	2	1	↓	46	22	↓
Clinic Screening (SHC/FPC/TB) POSITIVE	1	0	↓	7	4	↓
Outreach Screening (Jails, SAPTA) POSITIVE	1	0	↓	8	2	↓
Collect2 Protect POSITIVE	0	0	→	0	0	→
TOTAL POSITIVES	4	1	↓	61	28	↓

C. Staff Facilitated/Attended the following Trainings/Presentations

1. 07/01/2024: Launched CredibleMinds platform and hosted a launch party for community partners; 7 people in attendance; 2 SNHD ODS staff attendees.
2. 07/01/2024: Presentation to Valley Health residents on Health Education in ODS/SNHD; 10 people in attendance; 1 ODS health educator attendee.
3. 07/02/2024: Facilitated Training of Trainers on Overdose Response with Naloxone; 6 people in attendance; 1 ODS health educator attendee.
4. 07/03/2024: Completed interview about CredibleMinds in Spanish with Univision; 1 person in attendance; 1 ODS health educator attendee.
5. 07/05/2024: Provided CredibleMinds interview to ARC News3LV; 4 people in attendance; 1 ODS health educator attendee.
6. 07/08/2024: Presented to the Public Health Advisory Board on the Community Status Assessment Survey and Updates; 40 people in attendance; 2 ODS health educator attendees.
7. 07/09/2024: Presented at Nevada 2-1-1 meeting for CHA and SNSMOPS; ~30 people in attendance; 1 ODS health educator attendee.
8. 07/10/2024: Meeting with Pima County to provide technical assistance on SNHD's Naloxone Distribution plan; 4 people in attendance, 2 ODS health educator attendees.

9. 07/10/2024: Facilitated "Mental Health in Corrections; 2 people in attendance; 2 ODS health educator attendees.
10. 07/10/2024: Podcast interview on the Community Status Assessment survey with "A Healthier Tomorrow" hosted by Will Rucker; 4 people in attendance; 2 SNHD ODS Staff attendees.
11. 07/10/2024: Facilitated Naloxone Training implementation with Warden at Southern Desert Correctional Center; 6 people in attendance, 2 SNHD ODS staff attendees.
12. 07/10/2024: Attended AG's SURG meeting as appointed representative from Clark County, NV; 60 people in attendance, 1 ODS health educator attendee.
13. 07/11/2024: Presented on CredibleMinds to SNHD and CPLC mitigation meeting; 10 people in attendance; 5 SNHD ODS staff attendees.
14. 07/15/2024: Facilitated meeting with Las Vegas Metro Narcotics and Safety leadership Re: Fentanyl Exposure Risk and Training initiatives; 10 people in attendance, 3 SNHD ODS attendees.
15. 07/16/2024: Presented on CredibleMinds at the Nevada Goes Falls Free Coalition meeting; 14 people in attendance; 2 SNHD ODS health educator attendees.
16. 07/17/2024: Hosted CDC for a SUID/SDY Grant Site Visit and facilitated a community partner meeting; 15 people attended; 6 SNHD ODS staff attendees.
17. 07/17/2024: Attended Southern Nevada Health Consortium Meeting facilitated by the Southern Nevada Health Consortium; 20 people in attendance; 1 ODS health educator attendee.
18. 07/18/2024: Attended Clark County Task Force Meeting as appointed representative; 20 people in attendance, 1 ODS health educator attendee.
19. 07/23/2024: Co-facilitated "Youth Mental Health First Aid" training; 15 people in attendance, 4 SNHD ODS staff attendees.
20. 07/24/2024: Provided CredibleMinds interview to "A Healthier Tomorrow" podcast; 3 people in attendance; 1 ODS health educator attendee.
21. 07/24/2024: Presented on CredibleMinds at PACT Coalition monthly meeting; ~30 people in attendance; 3 SNHD ODS staff attendees.
22. 07/24/2024 – 07/25/2024: Facilitated Empower Change Rapid HIV Testing and Counseling Training; 13 attendees; 4 ODS staff attendees.
23. 07/25/2024: Attended and Presented at SNOAC General Meeting; ~75 people in attendance, 5 SNHD ODS attendees.
24. 07/25/2024: Presented to the Southern Nevada District Board of Health on the Community Health Assessment Update and Survey Launch; 60 people in attendance; 1 ODS Health Educator attendee.
25. 07/30/2024: Facilitated "Mental Health First Aid for Adults; 22 people in attendance; 1 ODS health educator attendee.
26. 07/31/2024: Attended Las Vegas Ryan White TGA Part A Planning Council Meeting as appointed representative; 30 people in attendance; 2 SNHD ODS staff attendees.

D. Other

1. Communicable Disease Statistics: June 2024 and Quarter 2 2024 disease statistics are attached (see Table 1).



Memorandum

Date: August 22, 2024

To: Southern Nevada District Board of Health

From: Christopher D. Saxton, MPH-EH, REHS, *Director of Environmental Health* CS
 Cassius Lockett, PhD, *Deputy District Health Officer-Operations* J
 Fermin Leguen, MD, MPH, *District Health Officer* FL

Subject: Environmental Health Division Monthly Report

I. FOOD OPERATIONS PROGRAM

ENVIRONMENTAL HEALTH Food Operations Program – Fiscal Year Data

Food Operation Services	July 2023	July 2024		FY 23-24	FY 24-25	
Routine Inspections	1,866	2,445	↑	1,866	2,445	↑
Reinspections	160	213	↑	160	213	↑
Downgrades	136	199	↑	136	199	↑
Closures	13	17	↑	13	17	↑
Special Events	46	44	↓	46	44	↓
Temporary Food Establishments & Tasting Event Booths	232	164	↓	232	164	↓
TOTALS	2,453	3,082	↑	2,453	3,082	↑

1. Enforcement Actions and Investigations:

- A. **Sugar Factory American Brasserie, 3717 S. Las Vegas Blvd.:** On July 1, the facility was closed for an Imminent Health Hazard (IHH), no hot water. The inspector documented 19 demerits. The facility was reinspected and reopened with zero demerits later that day.
- B. **Golden Nugget Claim Jumper, 129 E. Fremont St.:** On July 8, the facility was closed for an IHH, pest infestation. The inspector documented 20 demerits. The facility was reinspected and reopened with zero demerits on July 11.
- C. **Golden Nugget Banquet Kitchen 2nd Floor, 129 E. Fremont St.:** On July 8, the area was closed for an IHH, pest infestation. The inspector documented three demerits. The facility was reinspected and reopened with zero demerits on July 11.

- D. **Mimosas Gourmet 3455 S. Durango Dr.:** During a complaint investigation on July 8, the facility was closed for two IHHs, improper wastewater disposal and lack of handwashing facilities. The inspector documented 11 demerits. The bar was reinspected and reopened with zero demerits on July 9. The restaurant was reinspected and reopened with three demerits on July 10.
 - E. **Amari Restaurant, 6825 Tom Rodriguez St.:** On July 11, the facility was closed for an IHH, no hot water. The inspector documented 32 demerits. The facility was reinspected and reopened with nine demerits on July 12.
 - F. **888 BBQ, 4801 Spring Mountain Rd.:** On July 11, the facility was closed for two IHHs, pest infestation and improper wastewater disposal. Sewage was overflowing at the grease interceptor and inside the floor sinks. The inspector documented 11 demerits. The facility was reinspected and reopened with three demerits on July 30.
 - G. **Las Vegas Superstore Seafood, 4801 Spring Mountain Rd.:** On July 11, the facility was closed for an IHH, improper wastewater disposal. The inspector documented 14 demerits. The facility was reinspected and reopened with nine demerits on July 16.
 - H. **Santiago's Taco Shop, 777 E. Twain Ave.:** On July 11, the facility was closed for an IHH, lack of adequate refrigeration. The inspector documented eight demerits. The facility was reinspected and reopened with zero demerits on July 15.
 - I. **Carl's Donuts Processing, 6350 Sunset Corporate Dr.:** On July 12, the facility was closed for an IHH, pest infestation. The inspector documented 30 demerits. The facility was reinspected and reopened with zero demerits on July 15.
 - J. **Hummus #3, 7645 S. Rainbow Blvd.:** On July 17, the facility was closed for an IHH, lack of adequate refrigeration. The inspector documented 25 demerits. The facility was reinspected and reopened with three demerits on July 19.
 - K. **7-Eleven #26071 Snack Bar, 3635 N. Las Vegas Blvd.:** On July 19, the facility was closed for an IHH, no hot water. The inspector documented 19 demerits. The facility was reinspected and reopened with zero demerits on July 24.
 - L. **Capriotti's Sandwich Shop, 170 N. Boulder Hwy.:** On July 22, the facility was closed for an IHH, lack of adequate refrigeration. None of the three refrigeration units onsite were holding food at the proper temperatures. The facility was reinspected and reopened with three demerits the next day.
 - M. **Basil N Lime Authentic Thai Cuisine, 3665 S. Fort Apache Rd.:** On July 23, the facility was closed for an IHH, pest infestation. The inspector documented 31 demerits. The facility was reinspected and reopened with zero demerits on July 25.
 - N. **Menya Musashi, 4825 S. Rainbow Blvd.:** On July 24, the facility was closed for an IHH, no hot water. The inspector documented 23 demerits. The facility was reinspected and reopened with zero demerits on July 25.
 - O. **El Pollo Loco #6054, 2505 E. Tropicana Ave.:** On July 26, the facility was closed for an IHH, lack of adequate refrigeration. The inspector documented 16 demerits. The facility was reinspected and reopened with zero demerits on July 26.
 - P. Multi-agency responses for unpermitted food vendor complaints were conducted in conjunction with Clark County Business Licensing, City of Las Vegas Business Licensing, the United States Department of Agriculture, and the Las Vegas Metropolitan Police Department.
 - Q. Staff closed 15 unpermitted food vending complaint investigations.
2. **Onsite Intervention Training:**
- A. Onsite Intervention Training was held with the following facilities: Supermercado los Compadres, 4381 Stewart Ave.; Nigerian Cuisine, 5006 S. Maryland Pkwy.; Ramen Aku East, 4031 S. Maryland Pkwy.; Seafood City Supermarket, 3890 S. Maryland

Pkwy.; Antojitos Guayabitos Mobile Vendor; 888 BBQ, 4801 Spring Mountain Rd.; and Mimosa's Gourmet, 3455 S. Durango Dr.

3. Supervisory/Managerial Conferences:

- A.** A conference was held with the following facility: Laos Thai Street Food, 860 E. Twain Ave.

ENVIRONMENTAL HEALTH Outbreak Response – Fiscal Year Data

Outbreak Response	July 2023	July 2024		FY 23-24	FY 24-25	
Legionella Travel Associated Investigations	2	5	↑	2	5	↑
Legionella Residential Investigations	2	2	→	2	2	→

4. Outbreak Response:

- A. Liberty Wellness Center, 3970 Paradise Rd.:** On July 11, staff provided a complimentary consultation for this facility that is not regulated by SNHD in response to a lab-confirmed case of foodborne illness. Staff provided educational resources, and the management staff were receptive to the help.
- B. Houston's Hot Chicken, 1500 N. Green Valley Pkwy.:** On July 29, staff responded to a lab-confirmed case of foodborne illness. Staff observed foodborne illness risk factors including improper sanitizing of raw chicken areas and foods held in the temperature danger zone. The investigation resulted in a B downgrade. A reinspection is still pending.
- C. CrunCheese, 4284 Spring Mountain Rd.:** On July 30, staff responded to a lab-confirmed case of foodborne illness. The investigation resulted in an A grade.
- D. Jersey Mike's Subs, 2345 Via Inspirada:** On July 30, staff responded to multiple reports of foodborne illness. Staff discovered that the walk-in cooler had gone down earlier that week but had been repaired right before SNHD staff arrived. The investigation resulted in an A grade.
- E. Hattie B's Hot Chicken, 3708 S. Las Vegas Blvd.:** On July 31, staff responded to multiple reports of foodborne illness. The investigation resulted in an A grade.

II. SOLID WASTE AND COMPLIANCE

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

Illegal Dumping and Hearing Officer Process	July 2023	July 2024		FY 23-24	FY 24-25	
Notices of Violations (New & Remails)	0	0	→	0	0	→
Adjudicated Hearing Cases	8	3	↓	8	3	↓
Total Cases Received	70	67	↓	70	67	↓
Total Cases Referred to Other Agencies	17	29	↑	17	29	↑
Hearing Penalties Assessed	\$6,250	\$1,500	↓	\$6,250	\$1,500	↓

ENVIRONMENTAL HEALTH Restricted Waste Management – Fiscal Year Data

Restricted Waste Management	July 2023	July 2024		FY 23-24	FY 24-25	
Inspections	252	328	↑	252	328	↑

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

Underground Storage Tanks	July 2023	July 2024		FY 23-24	FY 24-25	
Compliance Inspections	69	106	↑	69	106	↑
Final Installation/Upgrade/Repair Inspections	0	1	↑	0	1	↑
Closure Inspections	2	1	↓	2	1	↓
Spill Report Investigations	1	1	→	1	1	→

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

Permitted Disposal Facilities	July 2023	July 2024		FY 23-24	FY 24-25	
Inspections	22	26	↑	22	26	↑
Reinspections	1	1	→	1	1	→

III. VECTOR SURVEILLANCE

ENVIRONMENTAL HEALTH Vector Surveillance and Other EH Services - Fiscal Year Data

Vector Surveillance and Other EH Services	July 2023	July 2024		FY 23-24	FY 24-25	
West Nile Virus Surveillance Traps Set	435	479	↑	435	479	↑
West Nile Virus Surveillance Mosquitoes Tested	5,106	6,591	↑	5,106	6,591	↑
West Nile Virus Surveillance Submission Pools Tested	386	430	↑	386	430	↑
West Nile Virus Surveillance Positive Mosquitoes	31	3,371	↑	31	3,371	↑
West Nile Virus Surveillance Positive Submission Pools	1	116	↑	1	116	↑
St. Louis Encephalitis Surveillance Positive Mosquitoes	0	136	↑	0	136	↑
St. Louis Encephalitis Surveillance Positive Submission Pools	0	6	↑	0	6	↑
Mosquito Activity Complaints	29	51	↑	29	51	↑
Public Accommodations Inspections	11	6	↓	11	6	↓
Public Accommodations Complaints	25	29	↑	25	29	↑
Mobile Home/Recreational Vehicle Park Inspections	0	0	→	0	0	→
Mobile Home/Recreational Vehicle Park Complaints	0	2	↑	0	2	↑

IV. EH ENGINEERING

1. Solid Waste Plan Review Program (SWPR):

- A. **Permits Issued** – Boulder Sand and Gravel - Hollywood (Recycling) and Werdco Sand and Gravel (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); Waste Grease (3); Materials Recovery (1); Waste Tire Management (1); and Storage Bin (1)
- D. **Facilities Planned for Approval at DBOH Meetings/SNHD Workshops in August:** None

ENVIRONMENTAL HEALTH Asbestos Permitting Services – Fiscal Year Data

Asbestos Permitting Services	July 2023	July 2024		FY 23-24	FY 24-25	
Asbestos Permits Issued	63	80	↑	63	80	↑
Revised Asbestos Permits Issued	7	11	↑	7	11	↑

ENVIRONMENTAL HEALTH Subdivision Program – Fiscal Year Data

Subdivision Plan Review	July 2023	July 2024		FY 23-24	FY 24-25	
Tentative Maps-Received	16	21	↑	16	21	↑
Tentative Maps-Lot Count	632	1,577	↑	632	1,577	↑
Final Maps-Received	24	14	↓	24	14	↓
Final Maps-Lot Count	971	421	↓	971	421	↓
Final Maps-Signed	24	16	↓	24	16	↓
Final Maps (Signed)-Lot Count	913	892	↓	913	892	↓
Improvement Plans-Received	19	16	↓	19	16	↓
Improvement Plans-Lot Count	711	590	↓	711	590	↓
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	July 2023	July 2024		FY 23-24	FY 24-25	
Residential ISDS Permits	4	4	→	4	4	→
Commercial ISDS Permits	0	0	→	0	0	→
Commercial Holding Tank Permits	0	0	→	0	0	→
Residential Tenant Improvements	21	17	↓	21	17	↓
Residential Certifications	1	0	↓	1	0	↓
Compliance Issues	9	11	↑	9	11	↑

ENVIRONMENTAL HEALTH Safe Drinking Water Program – Fiscal Year Data

Safe Drinking Water Program	July 2023	July 2024		FY 23-24	FY 24-25	
Public Water System Sanitary Surveys	1	2	↑	1	2	↑
Public Water System Violations Issued	1	13	↑	1	13	↑

2. Safe Drinking Water Activity:

A. Twelve *coliform* positive results were reported from routine monitoring events. Other than where noted, those samples were *E. coli* negative.

- **Cowboy Trail Rides:** One routine sample was both *coliform* and *E. coli* positive. The repeat samples were both *coliform* and *E. coli* negative.
 - **First Sloan Industrial Water System:** One routine sample was *coliform* positive. The repeat samples were *coliform* negative.
 - **Las Vegas Valley Water District:** Three routine samples were *coliform* positive. The repeat samples were *coliform* negative.
 - **North Las Vegas Utilities:** One routine sample was *coliform* positive. The repeat samples were *coliform* negative.
 - **Shetland Water District:** One routine sample was both *coliform* and *E. coli* positive. Four repeat samples were *coliform* positive and *E. coli* negative. This triggered a Treatment Technique Assessment which staff completed on July 18. Corrective actions by the public water system team are required by August 10.
 - **Spring Mountain Youth Camp:** One routine sample was *coliform* positive. The repeat samples were *coliform* negative.
- B.** Staff continued to monitor water hauling activities for multiple public water systems: Trout Canyon; Laker Plaza; Red Rock Campground; Cowboy Trail Rides; Spring Mountain Youth Camp; Coyote Springs Golf Course; Solar project adjoining Silverhawk Generating Station; and SCPPA Apex Generating Station.
- C.** Staff continued to monitor the Tier 1 nitrate issue at Blue Diamond and Rainbow NW Plaza public water system.
- D.** Staff collaborated with the Nevada Division of Environmental Protection (NDEP) Bureau of Safe Drinking Water (BSDW) regarding the invalidation of multiple copper samples at public water systems (2023 to date). The invalidations were a result of improper laboratory analytical methods at Asset Laboratory-Las Vegas. The effected public water systems have been notified.

V. SPECIAL PROGRAMS

ENVIRONMENTAL HEALTH Special Programs - Fiscal Year Data

Special Programs	July 2023	July 2024		FY 23-24	FY 24-25	
School Food Facility Inspections	0	0	→	0	0	→
School Food Facility Complaints	0	1	↑	0	1	↑
School Facility Inspections	0	1	↑	0	1	↑
School Facility Complaints	0	3	↑	0	3	↑
Summer Food Service Surveys	0	13	↑	0	13	↑
Child Care Facility Inspections	25	56	↑	25	56	↑
Child Care Facility Complaints	2	5	↑	2	5	↑
Body Art Facility Inspections	72	75	↑	72	75	↑
Body Art Facility Complaints	7	6	↓	7	6	↓
Body Art Artist Special Event Inspections	3	2	↓	3	2	↓
Total Program Services Completed	109	166	↑	109	166	↑

1. **Child Care:**

- A. Kid City USA Las Vegas 2, 5120 S. Eastern Ave.:** During a routine inspection, staff observed several violations that require a follow-up inspection. Violations included: excessive sanitizer strength; appropriate cleaning processes not being followed; sanitizer used to clean the diapering station; disinfectant used to clean mouth toys; improper diapering procedures; inadequate supply of hot water in the infant room; and hazards accessible to children. A reinspection is still pending.
- B. New Future Learning Daycare Center, 4610 Monterrey Ave.:** During a routine inspection, staff observed several violations that require follow-up inspection. Violations included excessive sanitizer strength; appropriate cleaning processes not being followed; disinfectant being used to clean mouth toys and tabletops; cracked playground equipment; a climbable outdoor barrier; and foot covers in the infant room not being worn correctly. A reinspection is still pending.
- C. Bizzy Bee Daycare, 1915 Simmons St.:** As a result of repeated non-complaint inspections, an intervention conference was held with the permit holder and Assistant Director. During the intervention, staff reviewed recurrent violations that included hazards accessible to children. Additionally, food safety and proper cleaning were discussed. Staff assisted the facility representatives in developing a plan to provide training to facility staff in diapering procedures, handwashing, and proper cleaning. The facility representatives will be required to create routine facility cleaning schedules and logs for various surfaces found in the facility and the logs will be maintained for 30 days. Staff also provided additional resources that can be used by the facility representatives to assist in development of their training program and will continue to monitor the facility to ensure that it remains in compliance with the SNHD Regulations.
- D. KinderCare Learning Center, 3570 N. Buffalo Dr.:** As a result of repeated non-complaint inspections, an intervention conference was held with a regional representative and the facility's Director. During the intervention, staff reviewed recurrent violations that included improper diapering procedures; inadequate hot water supplies; inadequate maintenance of furnishings; and inadequate cleaning of toys. Staff assisted the facility representatives in developing a plan to provide training to facility staff on appropriate diapering and cleaning procedures. Staff also provided additional resources that can be used by the facility representatives to assist in development of their training program and will continue to monitor the facility to ensure that it remains in compliance with the SNHD Regulations.

2. **Body Art:**

- A. Posh Tattoo LV 8930 S. Maryland Pkwy.:** During a routine inspection, staff observed evidence of unpermitted piercing including multiple piercing instruments, sterilized jewelry pouches, and an in-use autoclave with no records of a spore test. The permit holder was ordered to suspend piercing operations and submit an application to SNHD for a piercing permit. Written approval by SNHD must be given before the facility can resume piercing operations.
- B. All "N" Tattoo, 3430 E. Tropicana Ave.:** Staff investigated a complaint alleging that there was no hot water at the hand sinks and artists were working without valid health cards. No hot water was available and there was no responsible person with body art knowledge onsite at the time of the investigation. The hot water was fixed while the inspector was onsite. Staff will follow up to ensure that the facility remains in compliance.
- C. Pogi Tattoo, 3460 E. Sunset Rd.:** During a routine inspection, staff found an added workstation that was not approved by SNHD. An enclosed utility room had been converted into a workstation with the addition of a plumbed handwashing sink. The

room was in use at the time of the inspection. Staff took the unapproved workstation out of service and the permit holder was instructed to submit plans for a remodel. The room is not to be used until written approval is received from SNHD. The permit holder submitted plans for a remodel and a final inspection is still pending.

VI. PLAN REVIEW PROGRAM

ENVIRONMENTAL HEALTH Plan Review Program - Fiscal Year Data

Food Pre-Permitting Services	July 2023	July 2024		FY 23-24	FY 24-25	
Food Safety Assessment Meetings	1	0	↓	1	0	↓
Total Pre-Permitting Services	1,152	914	↓	1,152	914	↓
New Project Submissions	255	216	↓	255	216	↓
Released Projects	350	196	↓	350	196	↓
Total Service Requests Currently in Pre-Permitting	1,615	1,365	↓			

1. Enforcement Actions and Investigations:

- A. Arata Sushi, 3250 N. Tenaya Ave.:** During a Change of Permit Holder (CPH) inspection, staff found violations that included food stored on the floor, gaps at the back door, and an unapproved ice machine. SNHD Regulations require food to be stored at least six inches off of the floor, exterior doors to be weather tight, and that equipment meet American National Standards Institute (ANSI) standards for sanitation. The operator agreed to purchase additional shelving for food storage, seal the gap at the exterior door, and replace the ice machine. The permit was approved with stipulations.
- B. Substance, 450 Fremont St.:** During a pre-permitting inspection, staff found that the equipment ordered for the back bar did not fit inside the bar area due to concrete enclaves. The contractor modified the enclaves to ensure that the equipment would fit according to the approved plans. A final permitting inspection was conducted, and the permit was approved.
- C. Taqueria El Gil, 4966 Boulder Hwy.:** During a final permitting inspection, staff found a drive-thru window that was not protected from the entry of flying pests and a food service sink that was directly connected to sewer. SNHD Regulations require exterior openings that lead into a food preparation area to be protected from flying pests and backflow protection for food equipment. The health permit was approved with stipulations.
- D. Cowabunga Canyon, 7055 S. Fort Apache Rd.:** Plans were reviewed for an open-air permit. The permit application was submitted with a request to have the final permitting inspection the next day. SNHD Regulations require plans to be submitted for review 30 days prior to the anticipated operation date to allow for processing and review time. In this case, the owner was able to submit a Temporary Food Establishment permit and operate for up to 14 days until the permanent health permit could be issued. The health permit was approved within two weeks.
- E. Rio Gift Shop, 3700 W. Flamingo Rd.:** During a CPH inspection, staff found the walk-in cooler holding temperatures between 43-46°F. SNHD Regulations require refrigeration to hold food at 41°F or below. The walk-in was taken out of service and

the time/temperature control for safety (TCS) food was removed and stored in an operational refrigeration unit. The permit was approved with stipulations.

- F. **888 Seafood Market, 4375 S. Buffalo Dr.:** Food Operations staff referred this facility to Plan Review due to an unapproved remodel and expansion. The operator had expanded into a neighboring suite and added 16 new live seafood tanks and a walk-in cooler. SNHD Regulations require submission of plans for review and approval prior to remodeling. The plans were approved, and the remodel inspection was approved with stipulations to provide a one-inch air gap for drain lines from the food equipment, remove bricks from under the reach-in refrigerator, and seal non-moveable equipment to the floor. A final permitting inspection is still pending for the second suite since that is under a separate permit.
- G. **Costco Wholesale Grocery, 801 S. Pavilion Center Dr.:** During a pre-permitting inspection for a restroom remodel, staff found an unpermitted, temporary restroom trailer in use. Wastewater storage tanks that are larger than 500 gallons must be permitted by SNHD. The contractor has submitted a Temporary Holding Tank application. A final remodel inspection is still pending.
- H. **The Spot, 8410 W. Desert Inn Rd.:** Food Operations staff referred this facility to Plan Review due to an unapproved remodel. The permit holder failed to submit plans after three months, so the new equipment was taken out of use. Once the equipment was taken out of use, the operator submitted remodel plans, but they were inaccurate because they did not include a fryer at the cookline. Revised plans were submitted, and a final remodel inspection is pending Fire Prevention approval.
- I. **Rally's, 6416 W. Cheyenne Ave.:** Plans were reviewed and approved with stipulations. The plumbing plans did not show all of the waste line connections from the floor sinks to the grease interceptor. Additionally, a hand sink may be required at one of the drive-thru windows, but a further evaluation will be made during a pre-permitting inspection.

VII. AQUATIC HEALTH PROGRAM

ENVIRONMENTAL HEALTH Aquatic Health Operations Program - Fiscal Year Data

Aquatic Health Operations	July 2023	July 2024		FY 23-24	FY 24-25	
Total Operation Inspections	687	874	↑	687	874	↑
Complaint Investigations	68	55	↓	68	55	↓
Inactive Body of Water Surveys	9	7	↓	9	7	↓
Drowning/Near Drowning/Accident Investigations at Permitted Facilities	7	11	↑	7	11	↑
Total Program Services Completed	771	947	↑	771	947	↑

1. Aquatic Health Operations

- A. **Turnberry Tower West, 322 E. Karen Ave.:** A routine inspection at the pool resulted in an IHH closure for a broken drain cover. A damaged drain cover poses an entrapment hazard and increases the risk of drowning. The drain cover was replaced, and the pool was reinspected and approved to reopen the same day.
- B. **Borgata Condominiums, 4400 S. Jones Blvd.:** A routine inspection at the pool resulted in an IHH closure due to multiple violations. The pool had high cyanuric acid

and gaps in the enclosure that measured greater than eight inches. High cyanuric acid reduces the effectiveness of chlorine and gaps in the enclosure increase the risk of drowning. The gaps were temporarily repaired. The venue is currently closed, and a reinspection will be done once the permanent repairs are completed.

- C. Lake Las Vegas Sports Club, 101 Via Vin Santo:** A routine inspection at the spa resulted in an IHH closure due to multiple violations. A gate did not self-latch and the cyanuric acid was high. A gate that doesn't work properly increases the risk of drowning. Following corrective actions, the spa was reinspected and approved to reopen the same day.
- D. Top Golf Level 3 Pool, 4627 Koval Ln.:** A routine inspection and two complaint investigations at the pool resulted in an IHH closure due to multiple violations. A supervisory conference was also required. Lifeguards were inattentive and not following their approved lifeguard plan. Inadequate lifeguard surveillance increases the risk of drowning. The pool's disinfection system was off while the pool was accessible to bathers and a door was unable to self-latch. Inadequate disinfection can expose bathers to pathogens that can make them sick. The supervisory conference was held six days later, and the pool was approved to reopen after a reinspection was conducted.
- E. Stonegate Apartments, 5075 Spyglass Hill Dr.:** A routine inspection at the pool resulted in an IHH closure due to multiple violations. A gate did not self-close and there was no functional safety equipment present in the enclosure. Failure to maintain functional safety equipment poses an increased drowning risk by preventing adequate assistance during a water rescue. Following corrective actions, the pool was reinspected and approved to reopen the same day.
- F. Nobel Park Apartments, 5353 W. Desert Inn Rd.:** A survey at the spa resulted in an IHH closure due to high chlorine. High chlorine concentration can cause eye, skin, and lung irritation. Following corrective action, the spa was reinspected and approved to reopen the same day.
- G. Chateaux Bordeaux, 1616 N. Torrey Pines Dr.:** A reinspection at the pool failed due to multiple violations. The pool had no detectable chlorine and high cyanuric acid. Inadequate disinfection exposes bathers to pathogens that can make them sick. A reinspection is still pending, and the pool remains closed.
- H. The Avondale Apartments, 9225 W. Charleston Blvd.:** A routine inspection at a spa resulted in a written compliance schedule. A drain cover in the spa had been changed without approval and the circulation pump did not have working gauges. A 30-day compliance schedule was issued to provide working gauges and to either submit for a remodel or reinstall the approved covers. Verification of corrective actions is still pending.
- I. Summit on Boulder Apartments, 760 S. Boulder Hwy.:** A routine inspection at the spa resulted in an IHH closure due to multiple violations. The spa had high chlorine, and an entrance gate did not self-close or self-latch. Following corrective actions, the spa was reinspected and approved to reopen the same day.
- J. Eva Garcia Mendoza Plaza, 1950 N. Walnut Rd.:** A routine inspection at the pool resulted in an IHH closure due to broken glass on the pool deck which can result in bather lacerations. A reinspection is still pending, and the pool remains closed.

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

Aquatic Health Plan Review	July 2023	July 2024		FY 23-24	FY 24-25	
Total Pre-Permitting Services	392	518	↑	392	518	↑
New Project Submissions	47	77	↑	47	77	↑
Released Projects	151	106	↓	151	106	↓
Total Projects Currently in Plan Review	485	422	↓			

2. Aquatic Health Plan Review:

- A. The Alowyn Homes at Centennial, 129 E. Rome Blvd.:** During a final remodel inspection for a spa heater replacement, a strong smell of chlorine was present when entering the pump room. Liquid chlorine bleach was being stored in an uncovered bucket instead of an appropriate container. Storing chemicals in this manner is a hazard as it allows the buildup of chlorine vapor, which poses a risk to operators and equipment. Also, potential contamination from other chemicals can lead to unanticipated reactions. The issue was corrected, and the spa was allowed to remain open.
- B. California Hotel, 12 E. Ogden Ave.:** A final remodel inspection for a suction outlet fitting assembly (SOFA) remodel found that the SOFAs to be installed did not match the approved application and that the appropriate sump depth was not provided for the installed covers. Without the proper sump and plumbing configuration, the flow rating of the SOFAs is unknown. Incorrect flow through the SOFAs can lead to water chemistry issues and possible entrapment hazards. The contractor was able to find SOFAs that were appropriate for the site conditions.
- C. Rome South Senior Apartments, 325 E. Rome Blvd.:** A pre-plaster inspection of the spa resulted failure due to issues with the adjacent stair riser heights exceeding the ½ inch tolerance, and the wall drain configurations missing sumps. Failure to maintain compliant riser heights may lead to a tripping hazard. Failure to maintain compliant sump depths may lead to a suction entrapment hazard. The issues have been corrected and the pre-plaster reinspection was approved.
- D. Green Valley Highlands, 2821 Glendevon Cir.:** An interior final remodel inspection was conducted. The pool did not have a tile line or floating buoy line denoting pool depth greater than five feet. This line/buoy assists in letting bathers know that the pool depth is increasing and can increase the risk of drowning. The contractor installed the required floating buoy line and submitted photos of the correction. The remodel was approved.
- E. Venetia at Inspirada Townhomes, 2544 Venetia Pointe St.:** Lighting and pre-plaster inspections were conducted for the new pool. A section of the pool was not provided with adequate area lighting and two sections of the pool enclosure were not sufficient in height. Two weeks later, a reinspection was conducted, and the project was approved to proceed with construction.
- F. Noble Park Apartments Spa E, 5353 W. Desert Inn Rd.:** A plumbing inspection was not approved for a SOFA remodel. Each suction outlet cover contained both jet and circulation pump pipes. The proposed SOFA is not approved to operate with multiple pipes connected to the sump. The contractor decided to eliminate one pipe from each drain cover. The plumbing reinspection was conducted and approved.

VIII. REGULATORY SUPPORT

1. Staff participated in or performed the following activities and participated in the following external meetings: Council for Food Protection (CFP) leadership meetings; 2024 Retail Flexible Funding Model (RFFM) Mentorship Team meetings; National Environmental Health Association (NEHA) Food Safety Program committee meeting; Integrated Food Safety System, Regulatory Laboratory Training System Steering Committee meeting; 2024 intervention strategy data collection; submitted interim reports for three RFFM grants; updated standardization procedures; and provided pre-standardization training.
2. Staff welcomed Jamie Roberts, Nosa Nwaonumah, Mercer Wright, and Abel Hernandez to the Food Inspection Training Program on July 8.
3. Derrell Concepcion and Erica Ryan were released from training on July 19. Erica Ryan was welcomed to the Special Processes Team.
4. Staff facilitated and presented at the quarterly Food Safety Partnership meeting on July 22.
5. Staff attended the 2024 NEHA Annual Educational Conference in Pittsburgh, Pennsylvania. Staff served as a NEHA Technical Advisor moderating some sessions and presented as a panelist on “The Importance of Succession Planning and Sustainability Protocols,” on July 15 through 18.
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 Hazard and Critical Control Point (HACCP) plans. There are currently seven cook chill/sous vide plans, seven 2-barrier plans, 24 other HACCP plans, six waivers, and five operational plans in review.

IX. SPECIAL PROCESSES

ENVIRONMENTAL HEALTH Label Review – Fiscal Year Data

Label Review	July 2023	July 2024		FY 23-24	FY 24-25	
Facility Label Review Submissions	25	18	↓	25	18	↓
Facility Label Review Releases	21	40	↑	21	40	↑
Number of Labels Approved	303	375	↑	303	375	↑

ENVIRONMENTAL HEALTH Special Processes Plan Review - Fiscal Year Data

Special Processes Review	July 2023	July 2024		FY 23-24	FY 24-25	
Cook Chill/Sous Vide Submissions	0	0	→	0	0	→
Cook Chill/Sous Vide Releases	1	0	↓	1	0	↓
2-Barrier ROP Submissions	0	0	→	0	0	→
2-Barrier ROP Releases	0	0	→	0	0	→
Other HACCP Special Processes Submissions (Including ROP of fish, unpasteurized durably packaged juice, preservation, curing, etc.)	0	0	→	0	0	→
Other Special Processes Releases	0	0	→	0	0	→

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

Waivers & Operational Plans Review	July 2023	July 2024		FY 23-24	FY 24-25	
Waiver Review Submissions	0	0	→	0	0	→
Waiver Review Releases	0	0	→	0	0	→
Operational Plan Submissions	0	0	→	0	0	→
Operational Plan Releases	0	0	→	0	0	→

ENVIRONMENTAL HEALTH Cottage Food Operations Registrations - Fiscal Year Data

Cottage Food Operations Registrations	July 2023	July 2024		FY 23-24	FY 24-25	
Registrations Approved Without Voluntary Label Review	15	5	↓	15	5	↓

Memorandum



Date: August 22, 2024

To: Southern Nevada District Board of Health

From: Lourdes Yapjoco, MSN-PH, RN, CCM, Director of Primary & Preventive Care *LY*
Cassius Lockett, PhD, Deputy District Health Officer-Operations *CL*
Fermin Leguen, MD, MPH, District Health Officer *FL*

RE: PRIMARY & PREVENTIVE SERVICES BOARD OF HEALTH REPORT – July 2024

I. Immunization Program

A. Immunization Program Activities

1. The COVID-19 vaccination continues in all four Public Health Centers. A total of 222 COVID-19 vaccines were administered in the PHCs. Flu vaccines will resume in late August or September for the upcoming Flu 2024-2025 season with the new formulation.
2. For the month of July, there were 3,701 clients seen with 9,254 vaccines administered in all four PHCs and with the Immunization Outreach Program efforts for Back to School (BTS).
3. There were 596 immunization records reviewed.
4. Back-to-School services have started for the 2024-2025 school year and working with community partners to decrease long lines in June, July and August. The Immunization Outreach Program has assisted in increasing services for children 18 years and younger. The first day of school for Clark County School District is August 12, 2024.
5. The collaboration with the American Cancer Association and the HPV Learning Collaborative is continuing in Year 2. Year 2 preliminary data continues to be in process and Mid-Year data is getting reviewed in collaboration with epidemiology. An in-service has been provided to immunization staff discussing ways to increase HPV vaccination starting at the age of 9 years old.

B. Immunization Outreach Activities

1. A total of 5 outreach clinics were conducted in partnership with CCSD Family Support Center. 1,011 vaccines were administered to 389 clients.
2. There were 143 immunization records transcribed in NV WebIZ, and missing immunizations were administered to clients if needed. In addition, there were 73 clients who were up to date with immunizations and a copy was provided to clients at the CCSD Family Support Center.
3. The additional clinic resource for Back-to-School (BTS) administered 1651 vaccines to 654 clients in July. The clinic is for students 19 years old and under who need school immunizations. The clinic was initiated in June to increase immunization services for students and be able to register before school starts on 8/12/2024.
4. A report from CCSD showed that 4002 students received vaccines for 2023-2024 FY at CCSD from School-Based Health Centers and Health-Related Partnerships. The total vaccines administered was 10,712 for the 2023-2024 FY.
5. A back-to-school clinic was held at East Las Vegas Community Center on 7/27/2024. 85 vaccines were administered to 29 clients.

II. COVID-19 Vaccine Campaign

A. Community COVID-19 Vaccine Static Clinics and Pop-Up Sites

1. There were 195 COVID-19, 112 Back-to-school vaccines and 2 RSV vaccines administered through 36 static and pop-up sites. These activities include clinics focused on the following population groups: seniors, high-risk population groups, historically underserved communities, adolescents, and people experiencing homelessness.
2. The COVID-19 Vaccination program continues to operate the following static vaccine sites:
 - El Mercado in the Boulevard Mall, Thur-Sat, 1100-1700
 - Fremont Public Health Clinic, Tues-Fri, 0800-1700
3. Community partnerships and collaborations included REACH, Nevada Homeless Alliance, First Church of God and La Oportunidad.
4. Through the In-Home Vaccine program there were 4 COVID vaccines and 2 RSV vaccines administered to this high-risk population group. This program continues to be offered to people who need medical equipment to leave home, have an increased health risk if they leave their home, have cognitive special needs, or are bedridden. Appointments can be made through the Call Center at (702) 759-0850.
5. Vaccine outreach for people experiencing homeless living in encampments, tunnels and shelters continues once a month in collaboration with SNHD Office of Disease and Surveillance, SNHD's Sexual Health Outreach Prevention Program, and HELP of Southern Nevada. Although we are continuing with these partnerships, July's outreach was canceled due to excessive heat warnings.

B. MPOX vaccinations

1. Mpx vaccine has been commercialized and is no longer available to order through the National Stockpile as of April 30, 2024.
2. A total of 8 vaccines were administered through static clinics and pop-up sites.
3. Mpx vaccination continues to be administered at 3 static sites:
 - El Mercado in the Boulevard Mall, Thurs- Sat, 1100-1700
 - SNHD Fremont Public Health Center, Tues-Fri, 0800-1700
 - SNHD Sexual Health Clinic, Monday-Thurs, 0900-1500
4. A collaboration with SNHD Sexual Health Clinic continues to provide a community health nurse for in-room education and mpx vaccine administration for eligible clients.
5. Ongoing community partner calls are conducted regularly for updates and activity coordination.

C. Additional projects

1. Poster presentation accepted at National Immunization Conference. This presentation concludes results from the survey that was conducted to address motivation factors, information sources, and barriers in health equity population groups.
2. SNHD was awarded the National Adult and Influenza Summit's Immunization Neighborhood-National Champion.

III. Community Health Nursing

A. Nursing Education

There were no Nursing CEU's offered for the month of July 2024.

B. Maternal Child Health

There were two new lead referrals for the month of July. There were no new referrals from the Newborn Screening Program for the month of July.

B. Nurse Family Partnership (NFP)

The Southern Nevada Health District-Nurse-Family Partnership (NFP) has 188 active families. Fifty-two are participating in the Maternal, Infant and Early Childhood Home Visiting (MIECHV) Program. Sixty-four are participating through the Temporary Assistance for Needy Families (TANF) funding. Both grants are from the Nevada Division of Public and Behavioral Health.

Both teams continue to provide outreach to the community, enroll participants, offer services, and distribute essential referrals to families. Professional relationships and partnerships with various community service providers and referral sources are prioritized and maintained for both SNHD's Nurse Family Partnership and Healthy Start programs.

C. Healthy Start Initiative- Enhanced

The Southern Nevada Health District's Healthy Start Initiative Program is supported by the Health Resource and Service Administration (HRSA) of the U.S. Department of Health and Human Services (HHS). There was a total of twenty-nine active families served through July 2024.

In-person program outreach was conducted at Women's Health Associates of Southern Nevada (WHASN) City Center, WHASN Central, Stupak Community Center, Catholic Charities, and UNLV Pediatric Clinic.

IV. Sexual Health Outreach and Prevention Program (SHOPP)

A. Express Testing provided 233 screening encounters.

B. The Congenital Syphilis Case Management Program (CSCMP) is a program to address the high rate of congenital syphilis in the community. The CSCM nurse, in coordination with perinatal Hep B and HIV programs, continue to meet monthly to plan future targeted education sessions to increase knowledge and awareness of these diseases and available resources. The team met to review upcoming Academic detailing opportunities and are developing educational materials. Educational binder inserts are ready to be distributed to hospitals.

C. Members of SHOPP team attended Mental Health First Aid Training, Clinical Education for Academic Detailing and Point of Care Syphilis training.

D. SHOPP Team attended 4 POP Up Homeless events, as well as providing Express Testing every Friday at Fremont site and 3 outreach clinics at Aid For Aides of Nevada.

E. SHOPP houses a Neurosyphilis Emergent Onsite Navigation (NEON) program which aims to provide critical linkage services to patients suspected of neurosyphilis. Six referrals were received in the program and the CSCM nurse, in coordination with the Sexual Health Clinic and the University Medical Center's Wellness Center staff navigated the patients to UMC ER for the appropriate medical evaluation, diagnostic tests, and treatment.

- F. SHOPP manager and supervisor continue to develop and collaborate on subgrant: *A Status Neutral Approach to Improve HIV Prevention and Health Outcomes for Racial and Ethnic Minorities*. This is an innovative initiative that reframes how traditional HIV services are delivered and aims to retain people in care, regardless of HIV status. People whose HIV test is non-reactive will enter care through a prevention pathway that meets individualized needs for services that are comprehensive, continuous, and culturally responsive. Engaging people, particularly individuals considered high-risk, in HIV prevention will help to reduce the incidence rates of HIV. The three CHW's for this initiative continue their orientation.

V. Tuberculosis (TB) Clinic

- A. TB clinic has eight (8) new adult TB active cases and one (1) pediatric case that was reported for the month of July 2024. There was a total of nine (9) cases for the month of July 2024.

VI. Employee Health Nursing

- A. There were thirteen (13) SNHD employees who tested for COVID-19 in July 2024, zero (0) PCR tests conducted at CSN Charleston/North Las Vegas locations. Thirteen (13) tests from outside entities. Thirteen (13) employees tested positive for COVID in July 2024.
- B. Employee New Hire and Annual Tuberculosis (TB) testing continued for the month of July 2024. Annual catch-up TB testing is ongoing. Seventeen (17) Tuberculosis tests were completed in July 2024.
- C. Employee New Hire and Annual FIT Testing Medical Evaluations continued for the month of July 2024. Eight (8) medical clearances were conducted.
- D. There are no employee Blood Borne Pathogens exposure case for the month of July 2024.
- E. There are no new employee TB exposure cases for the month of July 2024.

F. Vaccine Clinics

- July 1 – July 31, 2024
Employees Total: 0 employees
 - 0 COVID – 19 Updated boosters.
 - 0 Influenza Vaccines
 - 0 other vaccinesTotal vaccines given: 0

- G. Policies and procedures continue to be reviewed and updated.



**Clark County School District
Annual Review of School-Based Health Centers and
Health-Related Partnerships**

Southern Nevada Health District:

- An MOA with the District is in effect through July 27, 2028.

Number of Services for Students (from July 1, 2023, through June 30, 2024)	Total Students: 4,002 clients received vaccines. Total Vaccines administered: 10,712 vaccines were administered
Types of Services	General Immunizations
Schools Served	CCSD Family Support Center– 27 clinics Pop-up clinics - 24 C. H. Decker ES, Hal Smith ES Ernest A. Becker Sr. MS, B. Mahlon Brown JHS, Francis H. Cortney JHS, Frank F. Garside JHS, Barbara and Hank Greenspun JHS, Thurman White Academy of the Performing Arts MS, Gibson MS, Carroll Johnston MS, Ed Von Tobel MS, JD Smith MS Boulder City HS, Cheyenne HS, Cimarron-Memorial HS, Ed W. Clark HS, Mojave HS, Palo Verde HS, Rancho HS, Western HS, Valley HS, Spring Valley HS
Insurance Information	Total: Uninsured/Unknown Insurance: 4,002 clients
Other Information	The Southern Nevada Health District has held immunization clinics throughout the 2023–2024 school year at CCSD sites at no cost to District students. The total estimated benefit does not include the cost of vaccines. Vaccines administered were provided by the State Vaccine for Children Program.
Total Estimated Benefit to District	\$ 438,580.00

PUBLIC HEALTH AND PREVENTIVE CARE

MONTHLY REPORT

July 2024

Client Encounters by Locations										
Location	DECAT PHC	ELV PHC	Hend PHC	Mesquite PHC	Laughlin	Mobil e	Homele ss	Targeted Population	*Other BTS	TOTAL
Immunization	1,428	835	280	112	0	0	0	0	1046	3,701
Immunization Records Issued	459	25	111	1						596
Newborn Metabolic Screening	0	0	0	0						0
SHOPP	269						4			273
TB Treatment & Control	1,400									1,400
SAPTA Services								6		6
TOTAL	3,556	860	391	113	0	0	4	6	1,046	5,976

Client Encounters by Program						
Program	July 2023	July 2024		FY 23-24	FY 24-25	
Immunizations**	4,889	3,701	↓	4,889	3,701	↓
Immunizations Records Issued	600	596	↓	600	596	↓
COVID-19 Vaccine Given*	262	195	↓	262	195	↓
Newborn Met. Screening	1	0	↓	1	0	↓
SHOPP	171	269	↑	171	269	↑
TB Treatment & Control	1558	1400	↓	1,558	1,400	↓
SAPTA Services	31	6	↓	31	6	↓
TOTAL	7,512	6,167	↓	7,512	6,167	↓

Total Client Immunizations Administered by Locations										
Location	DECAT UR	ELV PHC	Hend PHC	Mesquite PHC	Laughlin	Mobil e	Homele ss	Targeted Populatio	*Other BTS	TOTAL
Total Immunizations Administered ***	3,715	2103	528	221	0	0	0	0	2687	9,254

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

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

*** New category added 07/01/2024

Immunization Program

Immunizations	July 2023	July 2024		FY 23-24	FY 24-25	
Flu Vaccine Given	0	0	→	0	0	→
Gratis	102	47	↓	102	47	↓
COVID Vaccine*	292	222	↓	292	222	↓

*Given by Immunization Clinics

Vaccines for Children (VFC)	July 2023	July 2024		FY 23-24	FY 24-25	
Number of VFC Compliance Visits	1	0	↓	1	0	↓
Number of IQJP Visits	1	0	↓	1	0	↓
Number of Follow Up Contacts	11	20	↑	11	20	↑
Number of Annual Provider Training	1	0	↓	1	0	↓
Number of State Requested Visits	27	18	↓	27	18	↓

Perinatal Hepatitis B	July 2023	July 2024		FY 23-24	FY 24-25	
# of Expectant Women	16	17	↑	16	17	↑
# of Infants	64	66	↑	64	66	↑
Total # of Infants Delivered	1	4	↑	1	4	↑
New Cases	5	0	↓	5	0	↓
Closed Cases	3	17	↑	3	17	↑

Childcare Program	July 2023	July 2024		FY 23-24	FY 24-25	
Childcare Audits	0	1	↑	0	1	↑
Baseline Immunization Rate	0%	83%	↑	0%	83%	↑
# of Final Audits	0	1	↑	0	1	↑
Final Immunization Rate	0%	83%	↑	0%	83%	↑
# of Records Reviewed	0	52	↑	0	52	↑

Covid-19 Vaccine Campaign

COVID-19 Vaccine Campaign	July 2023	July 2024		FY 23-24	FY 24-25	
# of COVID-19 Vaccines administered	262	195	↓	262	195	↓
# of Monkeypox Vaccine administered	24	8	↓	24	8	↓
# of Influenza Vaccine administered	0	0	→	0	0	→
# of Healthcare Provider Compliance Visits	0	0	→	0	0	→
# of Newly Enrolled Healthcare Provider Education Sessions	8	0	↓	8	0	↓
# of Potential Healthcare Provider Recruitment Sessions	8	0	↓	8	0	↓
# of Healthcare Provider Contacts	289	0	↓	289	0	↓

Community Health Program						
	July 2023	July 2024		FY 23-24	FY 24-25	
Nursing Field Services						
MCH Team Home Visit Encounters	6	16	↑	6	16	↑
	July 2023	July 2024		FY 23-24	FY 24-25	
NFP (Team 1)						
Referrals	19	18	↓	19	18	↓
Enrolled	5	6	↑	5	6	↑
Active	107	122	↑			
	July 2023	July 2024		FY 23-24	FY 24-25	
NFP (Expansion Team)						
Referrals	10	6	↓	10	6	↓
Enrolled	8	2	↓	8	2	↓
Active	64	64	→			
	July 2023	July 2024		FY 23-24	FY 24-25	
MCH						
# of Referrals Received	1	5	↑	1	5	↑
# from CPS	0	3	↑	0	3	↑
# of Lead Referrals	1	2	↑	1	2	↑
# of Total Admissions	1	5	↑	1	5	↑
	July 2023	July 2024		FY 23-24	FY 24-25	
EHB *						
Referrals	3	n/a	↑	3	n/a	↑
Enrolled	3	n/a	↑	3	n/a	↑
Active	47	9	↓			
*Phasing to Healthy Start						
	July 2023	July 2024		FY 23-24	FY 24-25	
Thrive by 0 - 3						
Referrals	56	44	↓	56	44	↓
One-Time Home Visits	3	5	↑	3	5	↑
Enrolled	1	2	↑	1	2	↑
Active	11	19	↑			
	July 2023	July 2024		FY 23-24	FY 24-25	
Healty Start**						
Referrals	N/A	17	^	N/A	17	^
Enrolled	N/A	9	^	N/A	9	^
Active	N/A	29	^			
**New program as of 01/01/2024						
^No data available						

Tuberculosis Program

Tuberculosis	July 2023	July 2024		FY 23-24	FY 24-25	
Number of Case Management Activities*	243	228	↑	243	228	↓
Number of Monthly Pulmonary Specialist Clinic Clients Seen	26	28	↑	26	28	↑
Number of Monthly Electronic Disease Notifications Clinic Clients (Class B)	21	73	↑	21	73	↑
Outreach Activities during the Month - Presentations, Physician Visits, Correctional Visits, etc.	5	5	→	5	5	→
Directly Observed Therapy (DOT) Field, clinic and televideo encounters	1,316	1,172	↓	1,316	1,172	↓

*New EMR system- Counting only successful activities

Substance Abuse Prevention & Treatment Agency (SAPTA) **	July 2023	July 2024		FY 23-24	FY 24-25	
# of Site Visits	2	1	↓	2	1	↓
# of Clients Screened	38	6	↓	38	6	↓
# of TB Tests	31	2	↓	31	2	↓
# of Assessments only	7	4	↓	7	4	↓

** Funding ends 09/30/2024

Sexual Health Outreach and Prevention Program (SHOPP)

SHOPP - Express Testing	July 2023	July 2024		FY 23-24	FY 24-25	
# of Screening encounters	200	233	↑	200	233	↑
# of Clients Screened	197	233	↑	197	233	↑
# of Clients with positive STI identified	21	14	↓	21	14	↓
SHOPP- Linkage	July 2023	July 2024		FY 23-24	FY 24-25	
# of clients referred to Linkage	19	14	↓	19	14	↓
# of clients linked to care	13	12	↓	13	12	↓
SHOPP- Congenital Syphilis Case Management Program (Nurse)	July 2023	July 2024		FY 23-24	FY 24-25	
# of Referrals (pregnant, post-partum, infants)	19	7	↓	19	7	↓
# of Clients enrolled in CM	5	5	→	5	5	→
# of Active pregnant/ postpartum clients	16	50	↑			
# of Infants being followed	12	23	↑			
# of Provider/ Community trainings	1	4	↑	1	4	↑
SHOPP - Services for Unhoused Patients with Resources and Engagement in care (SURE)	July 2023	July 2024		FY 23-24	FY 24-25	
# of Outreach events	N/A	4	^	N/A	4	^
SHOPP- Complex STI Navigation	July 2023	July 2024		FY 23-24	FY 24-25	
# of Clients referred	N/A	6	^^	N/A	6	^^
# of Clients navigated	N/A	6	^^	N/A	6	^^

*Outreach started 03/01/2024

^ No data available

^^ No data available - data collecting began 12/01/2023