



MINUTES

SOUTHERN NEVADA DISTRICT BOARD OF HEALTH MEETING

June 26, 2025 – 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*)
Pattie Gallo – Mayor Pro Tem, City of Mesquite (*via Teams*)
Monica Larson – Council Member, City of Henderson (*in-person*)
Frank Nemec – At-Large Member, Physician (*in-person*)
Shondra Summers-Armstrong – Council Member, City of Las Vegas (*via Teams*)
- ABSENT:** April Becker – Commissioner, Clark County
Joseph Hardy – Mayor, City of Boulder City
- ALSO PRESENT:** (In Audience) Vincentiu Anghel, Christopher Boyd, Cara Evangelista, Madonna Gardner,
Jhordimae Hernandez, Allison Herzik, Dale Martin, Bradley Mayer, Jose Jaime
Morales, Brisa Stephani
- EXECUTIVE SECRETARY:** Cassius Lockett, PhD, District Health Officer
- LEGAL COUNSEL:** Heather Anderson-Fintak, General Counsel
- STAFF:** Marco Aguilar, Adriana Alvarez, Emily Anelli, Maria Azzarelli, Tanja Baldwin,
Tawana Bellamy, Haley Blake, Murphy Boudreaux, Amanda Brown, Lori Bryan,
Cory Burgess, Daniel Burns, Victoria Burris, Nancy Cadena, Belen Campos-
Garcia, Andria Cordovez Mulet, Susie Crutchfield, Rebecca Cruz-Nanez,
Cherie Custodio, Gerard Custodio, Brandon Delise, Lisa Falkner, Jason
Frame, Xavier Gonzales, Jacques Graham, Roberto Griffin, Richard Hazeltine,
Valerie Herzog, Carmen Hua, Dan Isler, Jessica Johnson, Sabine Kamm, Seth
Knowlton, Nami Kremer, Heidi Laird, Dann Limuel Lat, Sandy Luckett,
Cassandra Major, Anil Mangla, Blanca Martinez, Geoff Melly, Eric Matesen,
Marco Mendez, Kimberly Monahan, Samantha Morales, Kristina Moreno, Todd
Nicolson, Brian Northam, Kyle Parkson, Luann Province, Yin Jie Qin, Cheryl
Radeloff, Sfurti Rathi, Emma Rodriguez, Larry Rogers, Alexis Romero, Kim
Saner, Aivelhyn Santos, Chris Saxton, Karla Shoup, Jennifer Sizemore,
Cameron Smelcer, Randy Smith, Jacqueline Sripamong, Rosanne Sugay,
Ronique Tatum-Penegar, Will Thompson, William Thompson, Rebecca Topol,
Danielle Torres, Renee Trujillo, Shylo Urzi, Jorge Viote, Lauren Weber, Donnie
Whitaker, Edward Wynder, Merylyn Yegon, Gabrielle, Yup, 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. RECOGNITIONS

1. Danielle Jamerson

- First Place – Oral Presentation [Addressing Health Disparities among those Affected by Communicable Diseases: A Partnership with Disease Investigation Teams and a Family Resource Center] – Nevada Public Health Association

The Chair recognized Danielle Jamerson for being awarded first place for the presentation *“Addressing Health Disparities among those Affected by Communicable Diseases: A Partnership with Disease Investigation Teams and a Family Resource Center”* by the Nevada Public Health Association. Presentations were scored based on content, public speaking skills, and ability to answer questions from the audience. This presentation showcased the efforts of SNHD, and local partners, that successfully facilitated connections between clients affected by communicable disease to resources that address social determinants of health. This project demonstrated a successful approach to including wrap-round services during disease investigation and was shown to have benefited clients identified in high need zip codes. On behalf of the Southern Nevada Health District and District Board of Health, the Chair congratulated staff on this award.

Member Summers-Armstrong joined the meeting at 9:07 a.m.

2. Samantha Morales

- First Place – Creación Sobre Traducción: Creating Culturally Competent Training for Latino Audiences – Nevada Public Health Association

The Chair recognized Samantha Morales for being awarded first place for the presentation *“Creación Sobre Traducción (Creation over Translation): Creating Culturally Competent Training for Latino Audiences”* by the Nevada Public Health Association. As mentioned, presentations were scored based on content, public speaking skills, and ability to answer questions from the audience. This presentation showcased the extensive efforts of SNHD to create a culturally adapted version of an existing state-required training. On behalf of the Southern Nevada Health District and District Board of Health, the Chair congratulated staff on this award.

3. Brandon Delise, Jessica Johnson, Dr. Cassius Lockett and Dr. Ying Zhang

- Co-authored the published article *“Drug use and harm reduction practices of applicants to a public health vending machine service in Clark County, NV, 2021-2023”* in the Harm Reduction Journal

The Chair recognized Brandon Delise, Jessica Johnson, Dr. Cassius Lockett and Dr. Ying Zhang for co-authoring the article, “*Drug use and harm reduction practices of applicants to a public health vending machine service in Clark County, NV, 2021-2023*” in the Harm Reduction Journal. The study examined the demographics and drug use profiles of individuals that used the public health vending machines between January 2021 to June 2023 with comparison to nation-wide trends. The study concluded that demographic and drug use behaviors are consistent with county and nation-wide. It was noted that public health vending machines could be pivotal tools in the early detection of new risks to facilitate timely adaptation of harm reduction strategies. On behalf of the Southern Nevada Health District and District Board of Health, the Chair congratulated staff on this publication.

4. Kristina Moreno, Lauren Weber and Adriana Hemberger

Recognition from the Levy Restaurants for exceptional support during the Electric Daisy Carnival (EDC) 2025

The Chair recognized Kristina Moreno, Lauren Weber and Adriana Hemberger for their recognition from Levy Restaurants for their exceptional support during the Electric Daisy Carnival (EDC). Levy Restaurants commended staff on their preparedness, adaptability, and willingness to collaborate across agencies, corporations, and food vendors to address the unique public health demands of the event. On behalf of the Southern Nevada Health District and District Board of Health, the Chair congratulated staff on this recognition.

5. Southern Nevada Health District – June Employees of the Month

- Jennifer Loysaga and Kacie Washburn

The Chair recognized the June Employees of the Month; Jennifer Loysaga, Administrative Assistant in the Ryan White Program in the Southern Nevada Community Health Center, and Kacie Washburn, Disease Data Collection Specialist II in the Disease Surveillance and Control Division. 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 Southern Nevada Health District and District Board of Health, the Chair congratulated staff on this recognition.

The Chair recognized Ms. Cordovez Mulet for her continued assistance with the Board to ensure smooth meetings and for ensuring that employee recognitions are thoughtful, personal, and outline staff contributions to the Health District.

- IV. 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.

V. ADOPTION OF THE JUNE 26, 2025 MEETING AGENDA *(for possible action)*

The presentation “Rising Temperatures: Rising Responsibilities – How SNHD Safeguards Staff from Heat Illness” under Item X was moved to a future meeting.

A motion was made by Member Nielson, seconded by Member Black, and carried unanimously to approve the June 26, 2025 Agenda, as amended.

VI. 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:** May 22, 2025 *(for possible action)*
- 2. PETITION #35-25: Approval of insurance coverage renewals for Southern Nevada Health District’s Commercial Property, Automobile, General Liability, and Professional Liability for policy period 07/01/2025 – 07/01/2026;** direct staff accordingly or take other action as deemed necessary *(for possible action)*
- 3. PETITION #36-25: Approval of the Addition to the SNHD Employee Handbook to include Pawternity to Bereavement Leave;** direct staff accordingly or take other action as deemed necessary *(for possible action)*
- 4. PETITION #37-25: Approval of Workers’ Compensation Insurance Agreement renewal between the Southern Nevada Health District and Risk Administration Services (RAS) for policy period 07/01/2025-06/30/2026;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

A motion was made by Member Black, seconded by Member Brune, and carried unanimously to approve the June 26, 2025 Consent Agenda, as presented.

VII. 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 for an Application to Construct a Septic System located at 565 Straight St., Las Vegas, NV 89110 with the following provisions: 1) allow installation of a new denitrification septic system on an undersized lot;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

Daniel Isler, Environmental Health Engineer Supervisor, presented the variance request for an application to Construct a Septic System located at 565 Straight St., Las Vegas, NV 89110 with the following provisions: 1) allow installation of a new denitrification septic system on an

undersized lot. Mr. Isler advised that this was a re-application from a previously approved application by the Board in August 2022. Mr. Isler advised that the petitioner was not able to meet the condition that required construction of the system within one year. Mr. Isler advised that the property had an existing septic system on a lot that is 0.47 acres and has a private well. The petitioner would like to replace the septic system. Mr. Isler advised that the nearest sewer connection was more than 700 feet away. Mr. Isler advised that staff was proposing that the petitioner install a nitrogen removal system due to the water quality test showing a high nitrate level. Mr. Isler confirmed that staff was recommending approval of the variance, with conditions.

Dale Martin, representative for the petitioner, was in attendance. Further to an inquiry from the Chair regarding the reasons that the petitioner did not comply with the previous condition, Mr. Martin advised that the petitioner experienced financial issues due to COVID-19 and his employment. Mr. Martin advised that the petitioner opted to pursue a denitrification system to enhance the system at a greater cost than a regular septic system. Mr. Martin further confirmed that the petitioner was willing to install the denitrification system within the next two months, if approved by the Board. Further to an inquiry from the Chair, Mr. Isler advised that the homeowner was responsible for ensuring the proper maintenance of the system. Mr. Martin advised that he was a licensed provider and maintained most of the denitrification systems in Las Vegas. Further Mr. Martin confirmed that the petitioner understood that the denitrification system was an ongoing commitment to maintain.

The Chair opened for Public Comment.

Seeing no one, the Chair closed the Public Comment.

A motion was made by Member Brune, seconded by Member Nielson, and carried unanimously to approve the Variance Request for an application to construct a septic system located at 565 Straight St., Las Vegas, NV 89110 with the following provisions: 1) allow installation of a new denitrification septic system on an undersized lot, with the following conditions:

- 1. Petitioner will install an advanced treatment system in lieu of a conventional septic system.*
- 2. Petitioner and their successors in interest must ensure the advanced treatment system will be maintained for the life of the system. Petitioner and their successors must maintain an active maintenance agreement and provide testing to SNHD annually for the life of the system.*
- 3. Petitioner and their successors in interest shall abide by all local government 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 400 feet of the Petitioner's property line when connection can be made by gravity flow and the owner(s) are notified and legally required to do so.*
- 4. Petitioner and their successors in interest must abide by the operation and maintenance requirements of the most current SNHD regulations governing individual sewage disposal systems.*
- 5. Construction of the ISDS must be commenced within one (1) year of the date hereof. If the construction has not been commenced 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 Petitioner or Petitioner's successors in interest.

VIII. REPORT / DISCUSSION / ACTION

1. PETITION #33-25 – Approval of Augmentation to the Southern Nevada Health District FY2025 Budget; direct staff accordingly or take other action as deemed necessary *(for possible action)*

Donnie (DJ) Whitaker, Chief Financial Officer, presented the resolutions regarding the budget augmentation, as follows:

- **Resolution #03-25**
 - General Fund: Increase of the General Fund expenditure Budget by \$1,312,900, thereby increasing its appropriation from \$110,559,770 to \$111,872,670
- **Resolution #04-25**
 - Grant Fund (Special Revenue): Decrease of the Grant Fund (Special Revenue) expenditure budget by \$22,730,346, thereby decreasing its appropriation from \$85,231,149 to \$62,500,803

The Chair noted that vacancy savings helped retain staff that were on the reduced grants. Ms. Whitaker noted that with the vacancies of some positions, there was a reduction in salaries and benefits for this augmentation. Dr. Lockett noted that the Health District was trying to save as many employees as possible and not make any kind of reduction. Dr. Lockett thanked the Chair and the Governor's Office for the State Public Health Fund, and Clark County for the additional property taxes, that will help retain a lot of positions that were on the grants that were reduced.

Further to an inquiry from the Chair on the Ending Fund Balance, Dr. Lockett advised that there was a strong possibility that the \$3M contingency in the FY26 budget would be used. Ms. Whitaker advised that there were invoices that would come in June that would require adjustments so there was some flexibility to cover those invoices. If those adjustments were not needed, then there was the potential to increase the estimated Ending Fund Balance.

Further to an inquiry from the Chair, Ms. Whitaker advised that this was the final augmentation for FY25, and that it was anticipated that an augmentation for FY26 would be brought earlier than normal to the Board. Dr. Lockett advised that some grants were being approved monthly since the FY25 federal budget was not yet approved.

Member Bond requested an update at the end of the review to review any changes related to grants. Dr. Lockett advised that the Health District was reaching out to our congressional delegation to make them aware of any proposed reduction in funding. Heather Anderson-Fintak, General Counsel, advised that Emma Rodriguez, Communications & Legislative Affairs Administrator, could address that during the Legislative Update.

A motion was made by Member Nielson, seconded by Member Brune, and carried unanimously to accept the recommendations from the Finance Committee and approve Petition #33-25 related to the Budget Augmentation to the Southern Nevada Health District (i) General Fund (Resolution #03-25) and (ii) Grant Fund (Special Revenue) (Resolution #04-25)

Budget for the Fiscal Year Ending June 30, 2025, as presented, to meet the mandatory financial requirements of NRS 354.598005.

- 2. Receive, Discuss, and Approve Clark County's Fiscal Year 2026 Budget Pages for SNHD's Schedules B for Funds 7050, 7060, 7070, 7090, and Schedules F-1 & F-2 for Fund 7620;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

Ms. Whitaker advised that Clark County increased the property tax revenue allocated to the Health District, which revised the Fiscal Year 2026 Budget that was previously approved by the Board. Ms. Whitaker advised that Clark County requested that the revision be presented to the Board for approval.

A motion was made by Member Nielson, seconded by Member Brune, and carried unanimously to approve the Clark County's Fiscal Year 2026 Budget Pages for SNHD's Schedules B for Funds 7050, 7060, 7070, 7090, and Schedules F-1 & F-2 for Fund 7620, as presented.

- 3. PETITION #34-25 – Receive, Discuss, and Approve Food Handler Card Fee Adjustment;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

Cory Burgess, Health Cards Supervisor, presented a fee increase proposal for the Food Handler Safety Training Cards, as follows:

- Increase to \$25 in Calendar Year 2026
- Increase to \$30 in Calendar Year 2027

Member Nemec left the meeting at 10:04 a.m.

Further to an inquiry from the Chair on whether the increase will assist with challenges to obtain an appointment, Mr. Burgess advised that there were no longer issues with individuals obtaining appointments. Mr. Burgess advised that the Health District offered a combination of advance appointments and same day appointments.

Member Nemec returned to the meeting at 10:09 a.m.

Member Bond recognized the need for the additional revenue; however, noted that the Food Handler Safety Training Card was a job entry requirement and the increase could cause a barrier for individuals. Mr. Burgess advised that there were a number of different organizations, employers, and agencies that issued vouchers to their clients to obtain the Food Handler Safety Training Card. Member Bond noted that individuals may be required to obtain a number of different cards to become employed. Member Black advised that there were a number of community resources available that were funded through state and local funds. Further, Member Black advised that there were also resources for individuals to obtain uniforms, footwear, and bus passes. Member Black noted that the intention was not to create barriers for individuals, but the Health District needs to be in a position to remain viable and have the required funding.

Member Nemec raised the possibility of an e-card. Mr. Burgess advised that if individuals came in person for their test they received a physical card. Mr. Burgess advised that, since July 2022, the Health District offers an online renewal that could be done every other renewal, which provides the individual with a certificate to be downloaded, printed or saved to their phone. Mr. Burgess advised that individuals were supposed to have their card with them while working. The Chair suggested that the Health District look into requiring individuals to have their cards with them while working. Mr. Burgess advised that work had commenced on the ability of a mobile version of the card that could be saved to a mobile wallet; however, the initiative did not proceed as many employers were insisting that their employees have a physical card with them while working. Member Nemec noted that the reason employers required a physical card was because the Health District required a physical card. Dr. Lockett confirmed that the requirement and technology would be further explored.

Member Nielson indicated that the program could not continue at a projected loss of revenue. Member Nielson suggested that the second increase take place in 2028 or 2029.

Further to an inquiry from the Chair, Mr. Burgess advised that his staff had the capacity to handle any renewals that came in December, before the potential fee increase.

Member Black noted that an annual general fund subsidy was required for the program to break even.

Member Summers-Armstrong left the meeting at 10:33 a.m.

A motion was made by Member Black, seconded by Member Bond, and carried unanimously to approve Petition #34-25 related to a fee adjustment for the Food Handler Safety Training Card and Certified Food Safety Manager Card, commencing January 1, 2026, an increase to \$25, and commencing January 1, 2028, an increase to \$30. Prior to the increase on January 1, 2028, the Board of Health has requested an update on the revenue changes from the increase and any concerns received regarding individuals that have expressed that the increase was a potential barrier to obtain employment.

- IX. 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 requested the schedule of presentations to the Board on any proposed revisions to Environmental Health regulations.

X. HEALTH OFFICER & STAFF REPORTS (Information Only)

- DHO Comments

In addition to the written report, Dr. Lockett advised that the Health District began the Back-to-School Immunization campaign in June to ensure that students were up to date on their required vaccines. Dr. Lockett advised that, from June through October 2024, the Health District administered a total of 3,495 vaccinations, which was an increase from the previous year. Dr. Lockett advised that the peak months were July and August. During July and August

2024, the Health District administered 2,334 vaccinations. Dr. Lockett noted that there may be a decline this year. Dr. Lockett advised that the Health District has expanded clinic hours, added Friday and Saturday appointments, and scheduled outreach events until the middle of August. Appointments are available at any of our locations (Main, East Las Vegas, Henderson, Mesquite, and Fremont), with flexible hours. Dr. Lockett advised that appointments be scheduled at www.snhd.info/bts or by calling 702-759-0850. Further, Dr. Lockett reminded that students that receive a vaccination early may qualify for free backpacks and school supplies, while supplies lasted.

Dr. Lockett outlined two unrelated outbreaks of Legionnaires' disease reported in Clark County. Dr. Lockett advised that the Health District has confirmed multiple cases linked to guests who stayed at The Grandview and the Southpoint, which met the CDC outbreak case definition. The Health District has received over 100 guest surveys and data analysis is ongoing at the moment. However, remediation efforts were also ongoing at both facilities. At The Grandview, there are three confirmed cases of Legionnaires' disease, one probable case, and six probable cases of Pontiac Fever. At the Southpoint, there are two confirmed cases of Legionnaires' cases, two probable cases, and 25 probable cases of Pontiac Fever. Dr. Lockett advised that these were unrelated investigations. Dr. Lockett advised that the Health District issued a health alert to local providers to increase clinical awareness.

- Oyster Outbreak Investigation

Dr. Geoff Melly, CDC Epidemic Intelligence Service Officer assigned to the Health District, provided an update on the recent oyster outbreak investigation.

Further to an inquiry as to the length of time it took to notify the public and initiate the recall, Dr. Melly advised that the Health District must be conservative. The initial report was that the oysters were consumed, but that did not conclusively identify the oysters as being associated with the norovirus. Dr. Rosanne Sugay, Medical Epidemiologist, outlined that the timeline did seem long; however, that it was typical in outbreak investigations. Dr. Sugay advised that the Health District receives many calls, so an outbreak is not considered until there are two separate notifications received. Dr. Sugay indicated that, with a meal, staff must take into consideration all the ingredients that could have possibly been involved. Dr. Sugay advised that it took time to determine or form a very strong association that it was actually the oysters that were associated with the norovirus. Dr. Lockett added that in the past the FDA would have tested the oysters; however, they do not participate in these investigations immediately any longer. Dr. Lockett advised that the Health District had to rely on the epidemiological investigation to make the linkage.

Member Larson left the meeting at 10:48 a.m.

Dr. Melly advised that the Health District had initial indication to the oysters, but were caution as there are multiple ways for an individual to get norovirus. Dr. Melly advised that contaminated food source was one of the less likely ways, and that it was more likely from cross-contamination from improper hand hygiene. Dr. Melly advised that they wanted to ensure that they were confident with their assessment.

Member Larson returned to the meeting at 10:52 a.m.

Further to an inquiry from the Chair regarding the timeframe of the oysters being removed voluntarily from service, Dr. Sugay advised that the Environment Health team was out within a day of receiving the complaint looking for the lot numbers and working with restaurants to remove them from being served.

- Legislative Report

Ms. Rodriguez addressed the earlier inquiry regarding outreach to congressional delegates. Ms. Rodriguez advised that letters have been sent regarding the proposed fundings cuts, specifically regarding potential elimination of funding on smoking and health, and the Healthy Start program. The letters outlined the programs, their contributions to the community, and the effects on individuals and families. A copy of the letters will be provided to the Board members.

Member Summers-Armstrong returned to the meeting at 11:01 a.m.

Ms. Rodriguez and Bradley Mayer, Argentum Partners, outlined the following bills that were signed into law:

- AB591 – State Public Health Funding – \$15 million statewide, per capita, non categorical public health funding; SNHD to receive \$10,786,480 for the biennium, equally split between FY26 and 27
- AB360 – Revises provisions relating to testing for sexually transmitted diseases. (Syphilis Testing)
- AB50 – Revises provisions relating to victims of a mass casualty incident. (Mass Casualty Database)
- AB325 – Revises provisions relating to artificial intelligence. (AI in Emergencies)
- AB76 – Revises provisions relating to cannabis. (Cannabis Consumption Lounges)
- AB326 – Revises provisions relating to the designation of hospitals as centers for the treatment of trauma. (Rural Access Hospital Trauma Designation)
- SB24 – Provides for the certification and regulation of emergency medical responders. (Emergency Medical Responders)
- AB104 – Revises provisions relating to water. (Water Rights)
- AB352 – Revises provisions relating to businesses. (Cottage Food & Cosmetics)
- SB466 – Revises provisions governing the authority of the State Department of Agriculture relating to food and water. (Department of Agriculture Transfer)
- AB211 – Revises provisions relating to substandard properties. (Substandard Properties)
- SB9 – Revises provisions relating to Medicaid. (Medicaid Claims)
- SB348 – Makes revisions relating to laboratory testing. (Newborn Screening Fees)
- SB494 – Makes revisions relating to health and human services. (Nevada Health Authority)
- AB394 – Authorizes the Board of Regents of the University of Nevada to require certain institutions to adopt emergency response plans related to opioid overdoses. (Opioid Emergency Response Plans in Higher Education)
- AB331 – Makes an appropriation to the Division of Public and Behavioral Health of the Department of Health and Human Services for a grant program to expand the biennial survey administered pursuant to the Youth Risk Behavior Surveillance System developed by the Centers for Disease Control and Prevention of the United States Department of Health and Human Services. (YRBS)
- AB444 – Revises provisions relating to governmental administration. (Regulation Notifications)

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

- AB269 – Revises provisions relating to education. (Student Loan Repayment)

Ms. Rodriguez outlined the vetoed bills:

- SB295 – Revises provisions relating to food establishments. (Mobile Food Vendor)
- AB244 – Enacts prohibitions relating to the use of disposable foodware containers containing polystyrene foam by certain food establishments. (Styrofoam Ban)
- AB205 – Revises provisions governing sexual education. (Sexual Education Consent)

Ms. Rodriguez outlined the following legislation that did not advance:

- SB423 - Revises provisions governing public health. (Base Public Health Funding)
- SB435 - Revises provisions relating to nicotine products. (Vape Registry)
- AB536 - Revises provisions relating to tobacco. (Heated Tobacco Products)
- SB78 - Revises provisions relating to boards, commissions, councils and similar bodies. (State Licensing Board Overhaul)
- AB186 - Revises provisions governing pharmacists. (Expanded Authority for Pharmacists)
- SB118 - Revises requirements relating to coverage under Medicaid for certain services provided by pharmacists. (Medicaid Reimbursement for Pharmacists)
- AB297 - Revises provisions relating to Medicaid. (Postnatal Support)
- SB244 - Requires Medicaid to provide coverage of certain treatments for obesity. (Medicaid Obesity Treatment Coverage)

Member Bond requested a copy of the presentation.

Mr. Mayer thanked the Board for allowing him to be part of another legislative session on behalf of the Health District and advised the Board of the expertise and passion for public health by all Health District staff.

XI. INFORMATIONAL ITEMS

1. SNHD Financial Report, as of March 31, 2025
2. Administration Division Monthly Activity Report
3. Community Health Division Monthly Activity Report
4. Community Health Center (FQHC) Division Monthly Report
5. Disease Surveillance and Control Division Monthly Activity Report
6. Environmental Health Division Monthly Activity Report
7. Public Health & Preventive Care Division Monthly Activity Report

XII. 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.

- XIII. CLOSED SESSION:** Go into closed session, pursuant to NRS 241.015(4)(c), to receive information from the Health District's Attorney, regarding potential or existing litigation involving a matter over which the Board has supervision, control, jurisdiction or advisory power, and to deliberate toward a decision on the matter, and direct staff accordingly. *(for possible action)*

The Chair started the Closed Session at 11:28 a.m.

The Chair closed the Closed Session at 12:05 p.m.

XIV. ADJOURNMENT

The Chair adjourned the meeting at 12:05 p.m.

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



AGENDA

SOUTHERN NEVADA DISTRICT BOARD OF HEALTH MEETING

June 26, 2025 – 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/4ad473f0-31f0-4ba6-86a5-b650a93ff455@1f318e99-9fb1-41b3-8c10-d0cab0e9f859>

To call into the meeting, dial (702) 907-7151 and enter Phone Conference ID: 892 811 513#

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. RECOGNITIONS

1. Danielle Jamerson

- First Place – Oral Presentation [Addressing Health Disparities among those Affected by Communicable Diseases: A Partnership with Disease Investigation Teams and a Family Resource Center] – Nevada Public Health Association

2. Samantha Morales

- First Place – Creación Sobre Traducción: Creating Culturally Competent Training for Latino Audiences – Nevada Public Health Association

3. Brandon Delise, Jessica Johnson, Dr. Cassius Lockett and Dr. Ying Zhang

- Co-authored the published article “*Drug use and harm reduction practices of applicants to a public health vending machine service in Clark County, NV, 2021-2023*” in the Harm Reduction Journal

4. Kristina Moreno, Lauren Weber and Adriana Hemberger

- Recognition from the Levy Restaurants for exceptional support during the Electric Daisy Carnival (EDC) 2025

5. Southern Nevada Health District – June Employees of the Month

- Jennifer Loysaga and Kacie Washburn

IV. 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 892 811 513#. 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.

V. ADOPTION OF THE JUNE 26, 2025 AGENDA *(for possible action)*

VI. 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: May 22, 2025 *(for possible action)*

2. PETITION #35-25: Approval of insurance coverage renewals for Southern Nevada Health District's Commercial Property, Automobile, General Liability, and Professional Liability for policy period 07/01/2025 – 07/01/2026; direct staff accordingly or take other action as deemed necessary *(for possible action)*

3. PETITION #36-25: Approval of the Addition to the SNHD Employee Handbook to include Pawternity to Bereavement Leave; direct staff accordingly or take other action as deemed necessary *(for possible action)*

4. PETITION #37-25: Approval of Workers' Compensation Insurance Agreement renewal between the Southern Nevada Health District and Risk Administration Services (RAS) for policy period 07/01/2025-06/30/2026; direct staff accordingly or take other action as deemed necessary *(for possible action)*

VII. 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 for an Application to Construct a Septic System located at 565 Straight St., Las Vegas, NV 89110 with the following provisions: 1) allow installation of a new denitrification septic system on an undersized lot;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

VIII. REPORT / DISCUSSION / ACTION

1. **PETITION #33-25 – Approval of Augmentation to the Southern Nevada Health District FY2025 Budget;** direct staff accordingly or take other action as deemed necessary *(for possible action)*
2. **Receive, Discuss, and Approve Clark County’s Fiscal Year 2026 Budget Pages for SNHD’s Schedules B for Funds 7050, 7060, 7070, 7090, and Schedules F-1 & F-2 for Fund 7620;** direct staff accordingly or take other action as deemed necessary *(for possible action)*
3. **PETITION #34-25 – Receive, Discuss, and Approve Food Handler Card Fee Adjustment;** direct staff accordingly or take other action as deemed necessary *(for possible action)*

- IX. 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)*

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

- DHO Comments
- Rising Temperatures: Rising Responsibilities – How SNHD Safeguards Staff from Heat Illness
- Oyster Outbreak Investigation
- Legislative Report

XI. INFORMATIONAL ITEMS

1. SNHD Financial Report, as of March 31, 2025
2. Administration Division Monthly Activity Report
3. Community Health Division Monthly Activity Report
4. Community Health Center (FQHC) Division Monthly Report
5. Disease Surveillance and Control Division Monthly Activity Report
6. Environmental Health Division Monthly Activity Report
7. Public Health & Preventive Care Division Monthly Activity Report

- XII. 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.**

XIII. CLOSED SESSION – To Be Held Prior to Adjournment

Go into closed session, pursuant to NRS 241.015(4)(c), to receive information from the Health District's Attorney, regarding potential or existing litigation involving a matter over which the Board has supervision, control, jurisdiction or advisory power, and to deliberate toward a decision on the matter, and direct staff accordingly. *(for possible action)*

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

May 22, 2025 – 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 (*via Teams*)
April Becker – Commissioner, Clark County (*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 (*via Teams*)
Monica Larson – Council Member, City of Henderson (*in-person*)
Frank Nemec – At-Large Member, Physician (*in-person*)
Shondra Summers-Armstrong – Council Member, City of Las Vegas (*in-person*)

ABSENT: Pattie Gallo – Mayor Pro Tem, City of Mesquite

ALSO PRESENT: Andrew Acuna, Christopher Boyd, Deborah Kuhls, Bradley Mayer, Cameron Pfand, Lisa Rogge, Emily Sidebottom, Jeff Thomson, Nathan White
(In Audience)

EXECUTIVE SECRETARY: Cassius Lockett, PhD, District Health Officer

LEGAL COUNSEL: Heather Anderson-Fintak, General Counsel

STAFF: Adriana Alvarez, Kristen Anderson, Emily Anelli, Maria Azzarelli, Sean Beckham, Tawana Bellamy, Haley Blake, Murphy Boudreaux, Lori Bryan, Cory Burgess, Daniel Burns, Victoria Burris, Belen Campos-Garcia, Nicole Charlton, Andria Cordovez Mulet, Aaron DelCotto, Brandon Delise, Jason Frame, Kimberly Franich, Xavier Gonzales, Jacques Graham, John Hammond, Heather Hanoff, Amineh Harvey, Richard Hazeltine, Dan Isler, Danielle Jamerson, Jessica Johnson, Horng-Yuan Kan, Matthew Kappel, Theresa Ladd, Heidi Laird, Dann Limuel Lat, Josie Llorico, Randy Luckett, Blanca Martinez, Marco Mendez, Kimberly Monahan, Semilla Neal, Todd Nicolson, Brian Northam, Veralynn Orewyler, Kyle Parkson, Luann Province, Katarina Pulver, Emma Rodriguez, Larry Rogers, Alexis Romero, Kim Saner, Aivelhyn Santos, Chris Saxton, Dave Sheehan, Karla Shoup, Jennifer Sizemore, Cameron Smelcer, Randy Smith, Rosanne Sugay, Ronique Tatum-Penegar, Will Thompson, Rebecca Topol, Danielle Torres, Shylo Urzi, Jorge Viote, Donnie Whitaker, Edward Wynder, Lourdes Yapjoco, Merylyn Yegon, Lei Zhang

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. RECOGNITIONS

1. Dr. Cassius Lockett and Lei Zhang

- Co-authored the published article “*Towards Optimization of Community Vulnerability Indices for COVID-19 Prevalence*” in the BioMed Central (BMC) Public Health Journal

The Chair recognized Dr. Cassius Lockett and Lei Zhang for co-authoring the article, “*Towards Optimization of Community Vulnerability Indices for COVID-19 Prevalence*” in the BioMed Central (BMC) Public Health Journal. This study aimed to develop the community vulnerability index optimized for demographic-specific COVID-19 prevalence and apply it to Clark County. This study established that the incorporation of additional variables collectively contributed to its value in informing evidence-based policy decisions and guiding targeted interventions to mitigate the impact of COVID-19 on vulnerable communities. On behalf of the Southern Nevada Health District and District Board of Health, the Chair congratulated staff on this publication.

Member Summers-Armstrong joined the meeting at 9:05 a.m.

2. Overdose Education and Naloxone Distribution Program (Lori Bryan, Rebecca Cruz-Nañez, Brandon Delise, Jessica Johnson, Katarina Pulver)

- Best Program of the Year – Nevada Public Health Association

The Chair recognized the Overdose Education and Naloxone Distribution (OEND) program for being awarded the Best Program of the Year by the Nevada Public Health Association. The OEND program is a cornerstone of opioid overdose prevention in Clark County, which is dedicated to saving lives and empowering communities by increasing access to naloxone and providing comprehensive overdose prevention training.

Member Larson left the meeting at 9:07 a.m.

In 2024, the program experienced a remarkable 168% increase in naloxone distribution, providing over 85,000 doses across Clark County. This expansion was accompanied by a significant enhancement of overdose education efforts. By maximizing resource utilization, strengthening community partnerships, and prioritizing equitable distribution, the program is making a profound and measurable impact in the fight against opioid-related deaths. On behalf of the Southern Nevada Health District and District Board of Health, the Chair congratulated staff on this recognition.

Member Larson returned to the meeting at 9:08 a.m.

3. Southern Nevada Health District – May Employees of the Month

- Christopher Cooper and Yolanda Villalobos

The Board of Health recognized the May Employees of the Month; Christopher Cooper, Community Health Worker, and Yolanda Villalobos, Medical Assistant, both in the Southern Nevada Community Health Center. 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 Southern Nevada Health District and District Board of Health, the Chair congratulated staff on this recognition.

- IV. 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.

V. ADOPTION OF THE MAY 22, 2025 MEETING AGENDA *(for possible action)*

A motion was made by Member Nielson, seconded by Member Black, and carried unanimously to approve the May 22, 2025 Agenda, as presented.

- VI. 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:** April 24, 2025 *(for possible action)*
- 2. PETITION #31-25: Approval of the Interlocal Contract between the State of Nevada, Department of Conservation and Natural Resources, and the Southern Nevada Health District;** direct staff accordingly or take other action as deemed necessary *(for possible action)*
- 3. PETITION #32-25: Approval of the Interlocal Agreement between the Southern Nevada Health District and the City of North Las Vegas for acquisition and relocation of two modular structures;** 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 May 22, 2025 Consent Agenda, as presented.

VII. 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. MEMORANDUM #05-25: Request for Approval of Renewal of Authorization of University Medical Center as a Level I Trauma Center and Level II Pediatric Trauma Center; direct staff accordingly or take other action as deemed necessary *(for possible action)*

John Hammond, EMS & Trauma System Manager, presented the Renewal of Authorization of University Medical Center (UMC) as a Level 1 Trauma Center and Level II Pediatric Trauma Center. Mr. Hammond advised that the approval from the Board of Health would allow UMC to request the renewal of designation from the Nevada Department of Public and Behavioral Health. Mr. Hammond confirmed that UMC complied with regulations, in good standings with the Health District, and continued to provide all the requirements based on its designation. Mr. Hammond further advised that staff and the Regional Trauma Advisory Board recommended that the Board of Health approve the renewal application.

Further to an inquiry from Member Bond, Mr. Hammond advised that the renewal authorization would be valid for three years.

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 Nemec, and carried unanimously to approve the Renewal of Authorization of University Medical Center as a Level I Trauma Center and Level II Pediatric Trauma Center.

2. Variance Request for an Existing Septic System, SNHD Permit #ON0018648, located at 4860 North Bonita Vista Street, Las Vegas, NV to allow the septic system to remain on an undersized lot; direct staff accordingly or take other action as deemed necessary *(for possible action)*

Daniel Isler, Environmental Health Engineer Supervisor, presented the variance request for an existing septic system, SNHD Permit #ON0018648, located at 4860 North Bonita Vista Street, Las Vegas, NV to allow the septic system to remain on an undersized lot. Mr. Isler advised the property was being subdivided into four parcels, with the parcel with the existing septic system and residence being reduced to approximately 0.56 acres, being less than the required 1-acre. Mr. Isler advised that the Petitioner has an agreement for a sewer connection with the City of Las Vegas for the remaining three parcels. Mr. Isler shared that staff recommended approval of the variance, with conditions. Further to an inquiry from the Chair, Mr. Isler advised that the Petitioner wanted to continue using the existing house as a residence and therefore agreed to the septic system remaining now, but not upon the sale of the parcel.

The Chair opened for Public Comment.

Jeff Thomson, representative for the Petitioner, advised that he was available should the Board of Health have any questions, and that the property owner agreed to the staff's recommended conditions.

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

A motion was made by Member Becker, seconded by Member Bond, and carried unanimously to approve the Variance Request for an existing septic system, SNHD Permit #ON0018648, located at 4860 North Bonita Vista Street, Las Vegas, NV to allow the septic system to remain on an undersized lot, with the following conditions:

- 1. If, at any time, a community sewage system becomes available on Bonita Vista Street, the street adjacent to the property, the Petitioner and their successor(s) in interest shall connect to the public system, discontinue use of the ISDS, and properly abandon the ISDS in accordance with the most current SNHD ISDS Regulations.*
- 2. Petitioner and their successor(s) in interest shall comply with all operation and maintenance requirements outlined in the most current SNHD ISDS Regulations.*
- 3. This variance is not transferable to future property owners and does not guarantee replacement in the event of septic system failure. If the existing parent parcel is transferred to a new owner before the proposed Parcel Map MSM-23-600106 is recorded with the Clark County Recorder's Office, or if the child parcel on which the ISDS is located is transferred to a new owner at any time, this variance shall automatically expire and be of no further force or effect.*
- 4. If the proposed Parcel Map MSM-23-600106 is not recorded with the Clark County Recorder's Office within two years, this variance shall automatically expire and be of no further force and effect.*

VIII. REPORT / DISCUSSION / ACTION

There were no items heard.

- IX. 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 requested the back-to-school vaccine flyer and master vaccination calendar be sent to the Board members so they could include in their newsletters. Member Summers-Armstrong requested the materials in English and Spanish.

Member Summers-Armstrong requested a presentation about the Salon Talk and Barbershop Talk programs. Dr. Lockett advised that the key staff member that developed the programs was not available to attend the June Board of Health meeting; however, the presentation has been scheduled for the July Board of Health meeting.

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

- DHO Comments

In addition to the written report, Dr. Lockett advised that in collaboration with community partners, the Health District released the 2025 Community Health Assessment (CHA) which can be found on the healthysouthernnevada.org website. The CHA was a comprehensive evaluation of Clark County's health needs, strengths, and available resources. Dr. Lockett encouraged everyone to read the CHA. On April 30th, the Health District and various community partners met to review the key health indicators and identify the most pressing public health issues in our community. As a result, the top three health priorities selected are: (i) Access to Care, (ii) Chronic Disease, and (iii) Public Health Funding. Dr. Lockett advised that in collaboration with the Health Executive Council, it was determined that substance use was an important health priority to be included in the Community Health Improvement Plan (CHIP). Dr. Lockett advised that recently the Centers for Disease Control and Prevention (CDC) released data indicating that drug overdose deaths declined almost 30% in the U.S., except for in South Dakota and Nevada. Dr. Lockett confirmed that a drug overdose update would be provided later in the meeting.

Dr. Lockett advised that, on May 6th, the Health District announced an investigation into cases of acute gastroenteritis associated with the consumption of certain frozen half-shell oysters from South Korea. Initially, five Clark County residents reported illnesses involving nausea, vomiting, and diarrhea. Subsequently, more cases were identified. The investigation is currently ongoing. However, two cases from two different restaurants tested positive for the norovirus. Norovirus is a non-enveloped, single-stranded RNA virus, which means that it is resistant to certain disinfectants and super infectious. It is common to cruise ships. The Health District is coordinating with the Nevada Department of Public and Behavioral Health, along with the Food and Drug Administration (FDA) and the California Department of Public Health, as the oysters entered through California ports of entry. During the investigation, it was discovered that there is a statistically significant association with the oysters compared to other food items. A full report on this investigation will be provided at the June Board of Health meeting.

Dr. Lockett advised that some Health District staff participated in the Walk Around Nevada, which celebrated its 20th anniversary. Walk Around Nevada, which is a free app encouraging activity, launched in 2005 and has had over 12,000 people participate. There is a collective log of over one million miles. Those that complete the program, which requires 1,442 miles, receive a t-shirt and spot in the Walk Around Nevada Hall of Fame. To date, the Health District has had approximately 300 participants.

With respect to measles, Dr. Lockett advised that, as of May 16th, the CDC reported 1,224 confirmed cases from 31 states, which did not include Nevada. Of the confirmed cases, 30% are under 5 years old, 38% are between 5-19 years old, 32% are greater than 20 years old, and 1% of the cases have an unknown age. Dr. Lockett noted that it was important to highlight that 96% of the confirmed cases are unvaccinated or their vaccination status was unknown. Further, 13% of the cases were hospitalized, mainly in Texas. Dr. Lockett advised that overall, the risk in the U.S. remains low at this time, and the trend case count was decreasing in wastewater detection. However, with the upcoming summer and fall travel, Dr. Lockett suggested that the community remain vigilant. Dr. Lockett further advised that the Health District and the Clark County School District (CCSD) performed a tabletop exercise to learn and support each other if there is a case identified in our community. Dr. Lockett reminded

everyone, as Member Hardy indicated at the last meeting, there is no magic medicine to treat measles, except to receive the Measles, Mumps, Rubella (MMR) vaccine.

Dr. Lockett advised that two news releases would be issued today regarding multiple cases of Legionnaire's disease amongst guests who recently stayed at two separate hotels, The Grandview and South Point Hotel. Legionella is a bacteria virus, like norovirus, which causes Legionnaire's disease including severe pneumonia, shortness of breath, fever, and cough. Dr. Lockett advised that bacteria thrives in water systems that are stagnant. Dr. Lockett noted that the investigations involve two hotels that are unrelated, and remediation efforts are ongoing at both facilities. Dr. Lockett advised that both facilities were cooperating to make sure that their water systems were contamination free. Dr. Lockett advised that, to date, there have been five cases identified, with no deaths reported. Dr. Lockett further advised that a Health Alert would also be issued to medical providers to remain vigilant and look for additional cases.

Further to an inquiry from the Chair as to what is the CDC requirements to be considered an "outbreak," Dr. Lockett advised that if there are equal to two cases or more, within a year, it is considered an outbreak. Dr. Lockett advised that on May 15th both facilities were considered an outbreak internally.

Member Larson expressed concern due to the large senior population that frequents the South Point for various weekly activities and inquired how Legionnaires was contracted. Dr. Lockett advised that Legionnaires was contracted through aerosolization and mist from shower heads, water fountains, and any water source that creates a mist in the air. Dr. Lockett advised that the Environmental Health team can pinpoint the specific location through the various sampling strategies and techniques. Further, the Environmental Health team can mitigate exactly which areas to reduce exposure. Dr. Lockett further noted that a confidential survey will also be sent to guests at both locations to allow Health District staff to follow up if necessary.

The Chair noted that typically this situation involved a hotel room or group of rooms, and that the facilities normally have 5-6 different water systems so the specific contaminated water source could be deactivated quickly.

Member Hardy noted that Legionnaires could be treated with antibiotics and individuals should not delay care. Member Hardy noted that this was different from measles, where that is a vaccine for measles but not antibiotic.

The Chair inquired as to the Youth Photo Voice book, copies of which were provided to the Board of Health. Jessica Johnson, Health Education Supervisor, advised that the Youth Photo Voice book was part of the Community Health Assessment, wherein the Health District facilitated six focus groups, one including young people. This project was in collaboration with the Nevada Institute for Children's Research and Policy (NICRP), with a youth leader and youth participation from across the community to identify both strengths and challenges around physical and mental health. The Chair requested that copies of the book be sent to the elected officials in the community.

- Aquatic Health & Regulatory Update

Karla Shoup, Environmental Health Manager, provided an update on the Aquatic Health Program, Key Access and Risk Factor Surveys.

Further to an inquiry from the Chair, Ms. Shoup advised that for the last few years inspectors have been scheduled, which very few are being unannounced, so the pool operators are aware of an upcoming inspection.

Ms. Shoup outlined the three main reasons for closing a pool, being an inadequate disinfect level, non-functional gates or breaches in the enclosure, and broken, unsecured or missing drain covers.

Member Nielson advised that last year he received calls regarding a small crack in a drain cover. Member Nielson advised that he thought pool operators now understood that there is a zero-tolerance policy regarding cracked drain covers. Member Nielson advised that pool operators were being proactive by having an inventory of drain covers in stock that would limit the time that a pool would need to be closed. Ms. Shoup noted that each drain cover has an expiration date, which needs to be tracked.

Further to an inquiry from the Chair regarding access to unstaffed properties, Ms. Shoup advised that as the current pool regulations currently refer to 'keys' being provided to allow access to the pool areas, the Health District inspectors interpret that to also include an access code or card.

Member Larson left the meeting at 9:57 a.m. and did not return.

Jeremy Harper, Environmental Health Supervisor, provided an update on the Plan Review Process.

Further to an inquiry from the Chair about the staff dedicated to remodels, Mr. Harper advised there are five staff solely dedicated to remodels, and approximately 70% of the models received this year were for drain covers. Mr. Harper advised that in the last 6-8 months, facilities have tried to be proactive, and many of the large resort properties have submitted plan reviews for all their aquatic venues to have drain covers replaced this winter. Mr. Harper advised that approximately 30% of the permitted aquatic venues have submitted plans for remodels, out of 5,100 permitted aquatic venues.

Further to an inquiry from Member Summers-Armstrong regarding the use of a trusted or trained contractor to assist staff and an expedited process and fee, Ms. Shoup advised the surges in plan review were typically short-term and the Health District inspectors were trained and versed in the Aquatic Health Regulations. Further, Ms. Shoup advised that expedited inspections were available, but not for plan reviews. The Chair noted that there had previously been discussion regarding an expedited process and fee; however, it was difficult to find the appropriate balance. Mr. Harper noted that there was a very small number of contractors building pools.

- Legislative Update

Emma Rodriguez, Communications & Legislative Affairs Administrator, and Bradley Mayer, Argentum Partners, provided an update on the current legislative session.

Ms. Rodriguez outlined the following that related to public health funding:

- State Public Health Funding (previously referred to as SB118 funding) - \$15 million statewide, per capita, non-categorical public health funding; this would allocate \$10.7 over the biennium.
- SB423 – Base funding proposal for public health infrastructure; \$225,000 per county over the biennium

Ms. Rodriguez outlined the newly introduced bills from the Governor's Office:

- SB466 – Revises provisions governing the authority of the State Department of Agriculture relating to food and water. (Department of Agriculture Transfer)

Member Summers-Armstrong inquired whether the Health District would still be able to enforce local rules, once the supervisor was assigned to the Department of Agriculture. Ms. Rodriguez confirmed that was correct. Ms. Anderson-Fintak confirmed that all the Health District's regulations are approved by the state board of health, after they have been approved by this Board of Health. The change would require the regulations relating to food and water to be approved by the Department of Agriculture. Member Summers-Armstrong inquired whether the Department of Agriculture had the expertise that has been developed in the Department of Health and Human Services. Ms. Anderson-Fintak advised that part of SB466 included staff overseeing food and water from the Department of Health and Human Services would move to the Department of Agriculture.

- SB494 – Makes revisions relating to health and human services. (Nevada Health Authority)
- SB495 – Revises provisions relating to health care. (Health Care Workforce)

Ms. Rodriguez advised that AB50, which revises provisions relating to victims of a mass casualty incident (Mass Casualty Database), passed the Second House and was awaiting enrollment. The Chair commended Misty Robinson on the testimony provided in support of this bill.

Ms. Rodriguez outlined the following key bills still under consideration:

- AB205 – Revises provisions governing sexual education. (Sexual Education Consent)
- AB269 – Revises provisions relating to education. (Health Care Workforce)
- AB360 – Revises provisions relating to testing for sexually transmitted diseases. (Syphilis Testing)
- AB326 – Revises provisions relating to the designation of hospitals as centers for the treatment of trauma. (Trauma Designation)
- AB352 – Revises provisions relating to businesses. (Cottage Cosmetics & Food)
- SB295 – Revises provisions relating to food establishments. (Mobile Food Vendor)

Further to an inquiry from the Chair regarding enforcement of SB295, Ms. Rodriguez advised that there were many questions at the hearing on enforcement. Mr. Mayer advised that the language expressly allows an additional level of enforcement to confiscate equipment as part of the enforcement. The Chair stated the growing concern of mobile food vendors hiding

propane tanks around different venues. Member Summers-Armstrong raised growing concerns in Ward 5 with mobile food vendors. The Chair noted that meetings were held with sponsoring legislators for this bill wherein approximately 30 food truck owners attended and raised their concerns. Ms. Rodriguez noted that the Chamber of Commerce and the Nevada Resort Association also opposed this bill. Member Nielson noted the negative reflection on a tourist's experience coming to Las Vegas. Dr. Lockett confirmed the Health District's opposition to this bill.

- Drug Overdose Update

Brandon Delise, Senior Epidemiologist, provided an update on drug overdose deaths nationally and locally. Jessica Johnson, Health Education Supervisor, advised that she, and Mr. Delise, were part of the Clark County Opioid Task Force wherein gaps were identified that may be driving the persistent overdose increases. Ms. Johnson noted how the Health District was addressing the gaps, being (i) the opioid dashboard that is updated monthly with local data including drug check surveillance, (ii) linkage navigators in the Clark County Detention Centers and across five different partners, and (iii) partnering with the Foundation for Recovery. The Chair suggested that staff contact the Clark County School District, with the new superintendent.

Member Nemec left the meeting at 10:53 a.m. and did not return.

Member Summers-Armstrong inquired whether the Health District had a relationship with the Nevada Department of Corrections. Mr. Delise advised that the Health District works with the Nevada Department of Corrections for Naloxone training, which is done approximately three times a year.

Further to an inquiry from Member Bond, Mr. Delise advised that the data presented was only Clark County residents, and did not include tourists or temporary residents. Mr. Delise advised that the identifier for whether an individual was homeless was not accurate as an individual can claim a parent's or friend's residence. Mr. Delise further advised that the data shows that most overdoses are people that live in a residence, at a 3:1 ratio. Further, Mr. Delise advised that over the last few years overdoses have occurred within the 30-45 age group, with a recent high rate in the 60-65 age group. Further to an inquiry from the Chair, Mr. Delise advised that staff were working on accurately connecting EMS records and historical records with non-fatal overdose and fatal overdose, which should be available later this year.

Ms. Johnson noted that prevention programs were key and ensured that public safety partners and hospital partners were distributing Naloxone. Ms. Johnson advised that in 2024, the Health District did 83 training courses for over 1,300 people. Also in 2024, with nearly 100 partner agencies, the Health District distributed over 82,000 Naloxone doses; the distribution is on track this year to surpass last year's doses. The Chair noted that often more than one dose of Naloxone was needed. Mr. Delise advised that the Health District distributed the 4mg Naloxone nasal spray. Typically, 1-2 doses of the 4mg Naloxone brings back 85% of individuals who were overdosing, with the remaining 15% that may require three or more doses.

Ms. Johnson noted that the Health District distributes fentanyl and xylazine test strips to the community. In 2024, the Health District distributed over 122,000 test strips in partnership

with 54 agencies. Also, Ms. Johnson advised that the Health District instituted a mail-based distribution program, The Strip Club, for the test strips. Further, the Health District was the first in the continental U.S. to launch public health vending machines. Ms. Johnson further advised that the Health District started a 24/7 linkage for public safety at hospitals called the Southern Nevada Post Overdose Response Team (SPORT). Ms. Johnson also advised that the Health District was working with the Foundation for Recovery on an Overdose Ambassador Program, wherein they will go door-to-door in neighborhoods with elevated overdose risk and offer individuals Naloxone. Also, the Health District was working with county libraries to provide Naloxone kiosks.

Further to an inquiry from Member Bond on opioid settlement distribution, the Chair noted that many health districts/departments across the county did not receive opioid settlement funding. Dr. Lockett noted that the staff was doing a fantastic job and that funding sources were currently under review.

Member Black inquired whether the Health District had a capability of tracking utilization of Naloxone and the test strips, and whether there was concern about the shelf-life and loss of efficacy of the Naloxone. Mr. Delise advised that the Health District requests agencies to report if the doses provided to them are used, with approximately 5% of the Naloxone that is distributed does get reported of when it was used. Ms. Johnson noted that the best practice nationally was to provide Naloxone and the test strips without a lot of barriers. Ms. Johnson advised that the Health District strongly requests that the use is reported to the Health District, but it is not required. With respect to the shelf-life, Ms. Johnson advised that the Naloxone distribution team has worked with the agencies distributing Naloxone to encourage them to track the expiration date, along with the expiration dates being track by the Health District. Mr. Delise added that the Health District collects the Naloxone that will not be used in less than 6 months from expiry to be redistributed to agencies that consistently distribute Naloxone to a high-risk overdose group.

Member Brune left the meeting at 11:10 a.m. and did not return.

Further to an inquiry from Member Hardy regarding education that stimulants do not protect from an opioid overdose, Ms. Johnson advised that there was misconception, and education is provided in the overdose response training. Further, Ms. Johnson advised that education is provided on the death data about polysubstance use overdose, to ensure that they have an awareness, and that Naloxone is available to them.

XI. 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. Public Health & Preventive Care Division Monthly Activity Report

XII. 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.

XIII. ADJOURNMENT

The Secretary adjourned the meeting at 11:13 a.m.

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

DRAFT



TO: SOUTHERN NEVADA DISTRICT BOARD OF HEALTH

DATE: June 26, 2025

RE: *Approval of Insurance Renewals for Southern Nevada Health District's Commercial Property, Automobile, General Liability, and Professional Liability for policy period 07/01/2025 – 07/01/2026*

PETITION #35-25

That the Southern Nevada District Board of Health *approve insurance renewals for Southern Nevada Health District's Commercial Property (CHUBB), Automobile (CHUBB), General Liability and Professional Liability (Vantage), policies.*

PETITIONERS:

Cassius Lockett, PhD, District Health Officer *CL*
Heather Anderson-Fintak, General Counsel^{HAF}

DISCUSSION:

Last fiscal year, the Health District left Pool/PACT (Nevada Public Agency Insurance Pool) in favor of seeking private insurance coverage. Due to low claims and strong risk and safety management, the Health District was positioned for cost savings. For the policies that were previously changed in Pool, the Health District realized a savings of \$144,547. The Health District continues to benefit from the low claims and the premiums remain low. While there is an increase to the premiums in the amount of \$18,467 over last fiscal year, this is a cost savings of \$47,144 over the projected premiums, which were calculated based upon the current market rates.

FUNDING:

General Funds.



CHUBB

Coverage:	Commercial Property	
Limits:	Each Professional Incident: Professional Aggregate:	\$1,000,000 \$3,000,000
Deductibles:	Each Professional Incident: Professional Aggregate:	\$25,000 N/A
Annual Cost:	\$186,075.75 (including fees)	\$161,805.00 ¹

CHUBB

Coverage:	Automobile	
Limits:	Each Professional Incident: Professional Aggregate:	\$1,000,000 N/A
Deductibles:	Each Professional Incident: Professional Aggregate:	\$3,000 N/A
Annual Cost:	\$189,204.75 (including fees)	\$168,182.00

Vantage Risk Specialty Insurance

Coverage:	General & Professional Liability	
Limits:	Each Professional Incident: Professional Aggregate:	\$1,000,000 \$3,000,000
Deductibles:	Each Professional Incident: Professional Aggregate:	\$25,000 N/A
Annual Cost:	\$78,236.70 (including fees)	\$78,236.70

¹ The rate decreased due to additional information provided.

COMMERCIAL COVERAGE PROPOSAL
FOR
SOUTHERN NEVADA HEALTH DISTRICT
COVER PAGE

Submitted to:

CHUBB INSURANCE SOLUTIONS AGENCY INC
202 HALLS MILL ROAD
WHITEHOUSE STATION, NJ 08889

Attn: Scotty Allen

Information contained in this proposal is descriptive only. This proposal contains highlights or typical features available in our policies. These features are subject to change based upon underwriting and may or may not be available or apply to your policy. The precise coverage afforded is subject to the terms and conditions of the policies issued. The Company reserves the right, in its sole discretion, to amend or withdraw this Proposal if the Company becomes aware of any new, corrected or updated information that the Company reasonably believes would change its underwriting evaluation.

This quotation/proposal contemplates an integrated insurance program that includes all of the lines of business, terms and conditions outlined. The pricing and terms and conditions shown in this quotation/proposal cannot be separated. As such, if you reject individual components of the quote/proposal or any part of the program is cancelled and/or non-renewed, the terms and conditions of the remaining portion of the account are subject to reevaluation by the Company and all elements including program structure, pricing, as well as other terms and conditions will be subject to change.

This information is intended for producers that are properly licensed and authorized in at least one of the writing companies that comprise the Chubb Group of Insurance Companies (Chubb). If you are not a licensed and authorized Chubb producer, please direct this communication to the person in your office that holds such designations and contact Chubb to update the contact information for this policy.

For promotional purposes, Chubb refers to member insurers of the Chubb Group of Insurance Companies underwriting coverage: Federal Insurance Company, Vigilant Insurance Company, Pacific Indemnity Company, Great Northern Insurance Company, Northwestern Pacific Indemnity Company, Texas Pacific Indemnity Company, Chubb Custom Insurance Company, Chubb Indemnity Insurance Company, Chubb Insurance Company of New Jersey, Chubb National Insurance Company, Chubb Lloyds Insurance Company of Texas. Not all insurers do business in all jurisdictions.

SOUTHERN NEVADA HEALTH DISTRICT

PREMIUM SUMMARY

<u>Policy Type</u>	<u>Premium</u>	<u>Commission</u>	<u>Payment Options</u>
Commercial Property	\$171,390	15%	Annual/Direct Bill
Federal Insurance Company			
Policy No.: 3608-49-14			
Property	\$171,390		
Machinery Breakdown	Included in Property		
Taxes and Surcharges	\$0	0%	Prepaid
<hr/>			
TOTAL ACCOUNT			
PREMIUM	\$171,390		

Please note the underwriting company in which this quote is being offered. All insurers of the Chubb Group of Insurance Companies share the same financial ratings.

The portion attributable to Taxes, Surcharges and Other Charges is an estimate. The Insured is responsible for the total amount, if bound, shown on the premium bill and/or premium summary, regardless of the amount shown above.

Terrorism

Portion of premium attributable for Terrorism - Included in above premium

Property **\$9,858**

***Ensuing Fire** **\$0**

Machinery Breakdown **Included in Property**

**If you elect not to purchase coverage for terrorism and your policy provides commercial property insurance in a jurisdiction that has a statutory standard fire policy, the premium shown above for Ensuing Fire is the amount attributable to the insurance provided pursuant to that statutory standard fire policy. This coverage cannot be rejected.*

“Terrorism” refers to terrorism losses covered by the Terrorism Risk Insurance Act of the United States of America (15 USC 6701 note). Please refer to the Important Notice to Policyholders which outlines both the Federal Government’s and the Insurance Company’s obligation of payment under the Terrorism Risk Insurance Act.

CUSTOMARQ COMMERCIAL COVERAGE

Policy Number: 3608-49-14
Company: Federal Insurance Company
Effective Date: July 1, 2025 to July 1, 2026

PREMISES SCHEDULE

1. 280 S DECATUR BLVD, LAS VEGAS, NV 89107
2. 700 MARTIN LUTHER KING BLVD, LAS VEGAS, NV 89106
3. 2953 WESTWOOD DR, LAS VEGAS, NV 89109
4. 2830 FREMONT ST, LAS VEGAS, NV 89104
5. 2500 N BUFFALO DR, SUITE 240, LAS VEGAS, NV 89128
6. 150 N YUCCA ST, SUITES 3 & 4, MESQUITE, NV 89027
7. 3020 N WALNUT RD, LAS VEGAS, NV 89115
8. 304 E CARSON AVE, LAS VEGAS, NV 89101

PROPERTY INSURANCE

Deductible: \$25,000

Extended Period: Unlimited

The information shown above applies to:

- all premises coverages;
- all additional coverages; and
- debris removal coverage,

and all premises, unless corresponding specific information is shown as applicable to a specific premises or coverage.

PREMISES COVERAGES - BLANKET LIMITS		LIMITS OF INSURANCE
Blanket Number and Coverages		
1.	Building	\$40,183,444
2.	Personal Property EDP Property on Premises	\$33,293,600

PREMISES COVERAGES: If "Blanket" or "Loss Limit" is shown under Limits Of Insurance as applicable to a Premises, please refer to the "Premises Coverages – Blanket Limits" section or the "Loss Limits Of Insurance" section above to determine the Limits Of Insurance applicable to such Premises. "Blanket" limits are numbered for ease of reference. If a specific limit is shown under Limits Of Insurance for a Premises Coverage, that Limit applies to such coverage, even if a "Blanket" limit applies to other Premises Coverage at such premises.		LIMITS OF INSURANCE
Premises # 1 Bldg # 1: 280 S DECATUR BLVD, LAS VEGAS, NV 89107		
Building Automatic Increase in Limits 4% Discharge of Water Peril Deductible \$50,000 Leakage Fire Prot Peril Deductible \$50,000		Blanket 1
Personal Property Automatic Increase in Limits 4% Discharge of Water Peril Deductible \$50,000 Leakage Fire Prot Peril Deductible \$50,000		Blanket 2
EDP Property on Premises		Blanket 2

Discharge of Water Peril Deductible \$50,000 Leakage Fire Prot Peril Deductible \$50,000	
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Premises # 1 Bldg # 2: 280 S DECATUR BLVD, LAS VEGAS, NV 89107	
Building Automatic Increase in Limits 4% Discharge of Water Peril Deductible \$50,000 Leakage Fire Prot Peril Deductible \$50,000	Blanket 1
Personal Property Automatic Increase in Limits 4% Discharge of Water Peril Deductible \$50,000 Leakage Fire Prot Peril Deductible \$50,000	Blanket 2

Premises # 1 Bldg # 3: 280 S DECATUR BLVD, LAS VEGAS, NV 89107	
Building Automatic Increase in Limits 4% Discharge of Water Peril Deductible \$50,000 Leakage Fire Prot Peril Deductible \$50,000	Blanket 1
Personal Property Automatic Increase in Limits 4% Discharge of Water Peril Deductible \$50,000 Leakage Fire Prot Peril Deductible \$50,000	Blanket 2

Premises # 1 Bldg # 4: 280 S DECATUR BLVD, LAS VEGAS, NV 89107	
Building Automatic Increase in Limits 4% Discharge of Water Peril Deductible \$50,000 Leakage Fire Prot Peril Deductible \$50,000	Blanket 1

Premises # 1 Bldg # 5: 280 S DECATUR BLVD, LAS VEGAS, NV 89107	
Building Automatic Increase in Limits 4% Discharge of Water Peril Deductible \$50,000 Leakage Fire Prot Peril Deductible \$50,000	Blanket 1

Premises # 2: 700 MARTIN LUTHER KING BLVD, LAS VEGAS, NV 89106	
Building Automatic Increase in Limits 4% Discharge of Water Peril Deductible \$50,000 Leakage Fire Prot Peril Deductible \$50,000	Blanket 1
Personal Property Automatic Increase in Limits 4%	Blanket 2

Discharge of Water Peril Deductible \$50,000 Leakage Fire Prot Peril Deductible \$50,000	
EDP Property on Premises Discharge of Water Peril Deductible \$50,000 Leakage Fire Prot Peril Deductible \$50,000	Blanket 2

Premises # 3: 2953 WESTWOOD DR, LAS VEGAS, NV 89109	
Personal Property Automatic Increase in Limits 4% Discharge of Water Peril Deductible \$50,000 Leakage Fire Prot Peril Deductible \$50,000	Blanket 2
EDP Property on Premises Discharge of Water Peril Deductible \$50,000 Leakage Fire Prot Peril Deductible \$50,000	Blanket 2

Premises # 4: 2830 FREMONT ST, LAS VEGAS, NV 89104	
Personal Property Automatic Increase in Limits 4% Discharge of Water Peril Deductible \$50,000 Leakage Fire Prot Peril Deductible \$50,000	Blanket 2
EDP Property on Premises Discharge of Water Peril Deductible \$50,000 Leakage Fire Prot Peril Deductible \$50,000	Blanket 2

Premises # 5: 2500 N BUFFALO DR, SUITE 240, LAS VEGAS, NV 89128	
Personal Property Automatic Increase in Limits 4% Discharge of Water Peril Deductible \$50,000 Leakage Fire Prot Peril Deductible \$50,000	Blanket 2

Premises # 6: 150 N YUCCA ST, SUITES 3 & 4, MESQUITE, NV 89027	
Personal Property Automatic Increase in Limits 4% Discharge of Water Peril Deductible \$50,000 Leakage Fire Prot Peril Deductible \$50,000	Blanket 2
EDP Property on Premises Discharge of Water Peril Deductible \$50,000 Leakage Fire Prot Peril Deductible \$50,000	Blanket 2

Premises # 7: 3020 N WALNUT RD, LAS VEGAS, NV 89115	
Personal Property Automatic Increase in Limits 4% Inundation, Back-Up and Mudflow Peril Deductible \$25,000 Discharge of Water Peril Deductible \$50,000 Leakage Fire Prot Peril Deductible \$50,000	Blanket 2

Premises # 8: 304 E CARSON AVE, LAS VEGAS, NV 89101	
EDP Property on Premises	\$250,000

PREMISES COVERAGES	LIMITS OF INSURANCE
Machinery Breakdown	INCLUDED

ADDITIONAL COVERAGES – SPECIFIC LIMITS	LIMITS OF INSURANCE
Mobile Equipment Deductible \$10,000	\$56,504
Ocean Cargo Goods In Transit	\$50,000

EARTHQUAKE	LIMITS OF INSURANCE
Policy Annual Aggregate Limit	\$5,000,000
<i>Earthquake</i>	
Premises 1, 2, 3, 4, 5, 6, 7, 8	
Premises Annual Aggregate Limit	\$5,000,000
Per Occurrence Limit	\$5,000,000
Property Damage Per Premises/Per Occurrence Percentage Deductible	2%
Property Damage Minimum Dollar Deductible	\$50,000
FLOOD	LIMITS OF INSURANCE
Policy Annual Aggregate Limit	\$5,000,000
<i>Flood</i>	
<i>(Inundation, Back-Up and Mud Flow Included)</i>	
Premises 1, 2, 3, 4, 5, 6, 8	
Premises Annual Aggregate Limit	\$5,000,000
Per Occurrence Limit	\$5,000,000
Per Occurrence Waiting Period (Normal Business Hours)	24 Hours
Per Occurrence Dollar Deductible	\$50,000

OTHER PERIL MODIFICATIONS – SUBSIDIARY LIMITS	LIMITS OF INSURANCE
<i>Inundation, Back-up, Mudflow</i>	
Premises/Building 7/1	\$25,000

POLICY FORMS		
80-02-0280	07-03	SCHEDULE OF MORTGAGEES/LOSS PAYEES
80-02-1303	03-19	ADD'L PERIL-EQ LIMIT/DED OR WAITING PERIOD
80-02-1323	03-19	SUBSIDIARY LIMITS OF INSURANCE
80-02-1428	03-19	ADD'L PERIL-FLOOD LIMIT/DED OR WP PER OCC
80-02-0005	01-18	PROPERTY DECLARATIONS
80-02-0045	03-20	MALICIOUS PROGRAMMING EXCLUSION ADDED
80-02-0177	02-22	FUNGUS CLEAN UP OR REMOVAL PREM COV AMENDED
80-02-0210	01-15	PROPERTY SUPPLEMENTARY DECLARATIONS
80-02-0459	11-23	MALICIOUS PROGRAMMING AND SYSTEM - DEF AMEND
80-02-1000	03-19	BUILDING AND PERSONAL PROPERTY
80-02-1018	03-19	EXTRA EXPENSE
80-02-1047	07-03	MOBILE EQUIPMENT
80-02-1097	03-19	PROPERTY/BI CONDITIONS & DEFINITIONS
80-02-1357	03-19	WATER DEDUCTIBLE OR WAITING PERIOD
80-02-1658	01-15	CAP ON CERT. TERRORISM LOSSES (ALL PREMISES)
80-02-2208	07-20	VIRUS, BACTERIA OR MICROORGANISM EXCL ADDED
80-02-5188	06-05	VACANCY CONDITION ADDED
80-02-5407	03-19	OCEAN CARGO COVERAGE ADDED
80-02-5698	09-22	ERRORS IN SYSTEMS PROGRAMMING EXCL AMENDED
80-02-5702	10-22	AUTO INCREASE IN LIMITS PROVISION AMENDED
99-10-0996	04-18	IMPORTANT NOTICE-NY LOC INSPECTIONS

CUSTOMARQ PROPERTY HIGHLIGHTS

The precise coverage afforded is subject to the terms and conditions of the policies issued. The following features are subject to change based upon underwriting and may or may not be available or apply to your policy.

VALUATION

Replacement Cost
Cost of Replacement at any Location
Brands & Labels
Construction Fees
Customs Duties
Extended Warranties
Ordinance or Law
Selling Price on Finished Stock and Sold Personal Property
Replacement Cost on Personal Property of Others, Business Personal Property You Lease and
Personal Property of Employees
Replacement Cost on Research and Development Property if repaired, replaced or reproduced
Valuation on Tenants' I & B when not replaced – ACV
24 Months to Decide to Repair or Replace

\$ 250,000 BLANKET LIMIT OF INSURANCE

The automatic blanket limit applies to:

Accounts Receivable
Electronic Data Processing Property
Fine Arts
Leasehold Interest - Bonus Payment, Prepaid Rent, Sublease Profit, Tenants' Lease Interest
Leasehold Interest - Undamaged Tenant's Improvements & Betterments
Non-Owned Detached Trailers
Outdoor Trees, Shrubs, Plants or Lawns
Pair and Set
Personal Property of Employees
Public Safety Service Charges
Research and Development Property
Valuable Papers

The Blanket Limit of Insurance applies over all of the coverages shown above and may be apportioned at the time of loss. This Blanket Limit of Insurance applies separately at each covered premises shown in the Declarations and is subject to the Property Deductible specified in the Declarations.

Separate specific Limits of Insurance may be purchased for any of these coverages. If purchased, the blanket limit of insurance will apply in addition to the specific limit.

ADDITIONAL PROPERTY COVERAGES

The following Additional Coverages apply separately at each of your premises. In this proposal, any additional limits for these coverages that you have purchased are indicated at the described premises to which the increased limits apply. A policy level deductible applies to each of the Additional Coverages, unless otherwise indicated below or at the described premises

Any other location for:

Accounts Receivable	\$ 50,000
Building Components	\$ 50,000
EDP Property	\$ 50,000
Fine Arts	\$ 50,000
Personal Property	\$ 50,000
R&D Property	\$ 50,000
Valuable Papers	\$ 50,000

Debris Removal

25% of direct damage loss, plus:

Premises Shown in the	
Declarations	\$ 100,000
Any Other Location	\$ 25,000
In Transit	\$ 25,000

Deferred Payments \$ 25,000

Exhibition, Fair or Trade Show:

EDP Property	\$ 50,000
Fine Arts	\$ 50,000
Personal Property	\$ 50,000

Extra Expense \$ 100,000

Fungus Clean-Up
or Removal \$ 25,000

Installation:

Any Job Site	\$ 25,000
In Transit	\$ 25,000

In Transit for:

Accounts Receivable	\$ 25,000
Building Components	\$ 25,000
EDP Property	\$ 50,000
Fine Arts	\$ 25,000
Personal Property	\$ 25,000
Valuable Papers	\$ 25,000

Loss of Master Key \$ 15,000

Loss Prevention Expenses \$ 15,000

Mobile Communication

Property \$ 15,000

Minimum Deductible \$3,500

Money & Securities:

On Premises	\$ 15,000
Off Premises	\$ 15,000

Pollutant Cleanup or
Removal \$ 25,000

Processing Water \$ 10,000

Preparation of Loss Fees \$ 10,000

Newly Acquired Premises Or Newly Acquired Or Constructed Property for 180 days

Building	\$2,500,000
Personal Property	\$1,000,000
Personal Property at Existing Premises	\$ 100,000
EDP Equipment	\$1,000,000
Electronic Data	\$ 50,000
Communication Property	\$ 50,000
Fine Arts	\$ 25,000

COMMON POLICY CONDITIONS

POLICY FORMS		
80-02-9780	03-11	NOTICE OF CANCEL TO SCHEDULED PERSONS OR ORGS
80-02-9001	06-98	HOW TO REPORT A LOSS
80-02-9090	06-05	COMMON POLICY CONDITIONS
80-02-9757	12-99	NV MANDATORY-CANCELL,NON-RENEWAL & NOTICES
80-02-9790	03-12	COND - CIVIL UNIONS OR DOMESTIC PARTNERSHIPS
80-02-9800	12-08	INSURING AGREEMENT
99-10-0732	01-15	NOTICE TO POLICYHOLDERS-TRIPRA
99-10-0792	09-04	IMPORTANT NOTICE - OFAC
99-10-0872	06-07	AOD POLICYHOLDER NOTICE

The state in which this policy is issued may require that we advise you that if available, the following condition is added to your policy:

All references in the policy to “spouse” include a party to a civil union or domestic partnership recognized under the applicable law of the jurisdiction having authority.

This proposal does not apply to the extent that trade or economic sanctions or other laws or regulations prohibit Chubb from offering or providing insurance. To the extent any such prohibitions apply, this proposal is void ab initio.

StreamLabs Water Sensor Proposal

DETECT and PREVENT WATER LOSSES

Thank you for doing business with Chubb Insurance. We are always looking for ways to bring value to our insureds and as such, we are excited to offer you our [Internet of Things \(IoT\) water sensor risk mitigation solution](#) as we know that water leaks can not only cause expensive property damage, but also interrupt your company's ability to continue normal operations.

To help prevent water damage before it occurs, [Internet of Things \(IoT\)](#)-powered sensors from StreamLabs, Inc., a Chubb company, provide real-time alerts to leaks and changes in temperature or water pressure that can cause damage to critical infrastructure and valuable assets.

The features and benefits of the water leak detection system include:

- Around the clock remote monitoring for the presence of water leaks, overflows, pipe bursts, etc.
- Account management via online portal at no additional cost.
- Cellular connection - no need to connect to your internet system.
- Automatic alerts via email and SMS text 24/7 to an unlimited number of users.
- Ongoing technical support available via phone or email.
- Easy to install with no need for an electrician, plumber, or contractor.
- Extended warranty for the lifetime of the contract.

What our customers are saying...

"The sensors have been working great. They have saved us a few times already!"
College Facility Manager

"The sensor did its job. A pump which belongs to our anchor client on the lower level failed on a Friday evening. No damage because of the sensor, but if we didn't catch it early enough, who knows what would've happened. So, I'd consider this a SUCCESS!"

Risk Manager of Class A Office Buildings

This proposal includes a total of **five (5) cellular gateways and 32 sensors** at the annual cost outlined in the chart below. Please note that the device count is an estimate, and the final decision count is at your discretion. We are willing to collaborate with you to determine the appropriate sensor count for your specific requirements.

In addition to the annual solution fees, please note that there is an additional one-time charge for professional installation services, if required, as well as shipping charges. You have the option to independently install the equipment to save on the professional installation cost.

The annual recurring solution cost covers not only the equipment itself but also includes technical support, customer service, access to the online dashboard, 24/7 alert notification via text and email, and warranty coverage for all the equipment.

Equipment	Quantity	Cost per month	Annual Cost
4G Cellular Gateway (Signal) - LGMT-CAP3 *	5	\$30.00	\$1,800
Water Sensor - 3 ft rope	20	\$8.00	\$1,920
Water Sensor -Point of Leak	10	\$8.00	\$960
Temperature sensor	2	\$8.00	\$192
Total Solution Fees (recurs annually)			\$4,872

*Each sensor must be approx. 600 to 1,000 ft range of a gateway. Construction type and location will affect cellular range of gateway.

Examples of different buildings	Water Sensor Solution	Cost per Year (approximate)**
Highrise bldg: 36 stories, 526,000 sq ft.	18 gateways and 220 sensors	\$28,000
Manufacturer: 4 stories, 155,000 sq ft.	6 gateways and 80 sensors	\$10,000
Mixed Use bldg: 2 stories, 160,000 sq ft.	2 gateways and 44 sensors	\$5,000
Warehouse: 1 story, 20,000 sq ft.	1 gateway and 16 sensors	\$2,000

**Prices valid until March 15, 2025.

Priority Sensor Locations Include:

Near critical and high value equipment susceptible to water damage or freezing temperatures,

- Around known sources of potential water release – such as a chilled water pump or hot water boilers,
- In areas with heightened risk for water and temperature exposure.

We've heard from numerous clients that the return on investment of the sensor solution is undeniable – here are three clients' video testimonials:

- [Highwoods Properties](#)
- [Allen County Public Library](#)
- [Boston Medical Center](#)

If you choose to install a water risk mitigation solution, you may qualify for a policy discount. Kindly notify your insurance agent once the system is operational, allowing them to inform your property insurance company to facilitate any applicable policy discounts.

If you are interested in learning more, please contact me or your insurance agent. We look forward to hearing from you.

Again, thank you for doing business with Chubb!
Sincerely,

Elaine George CPCU, ARM, RPLU

[Digital IoT Operations](#)

1133 Avenue of the Americas, New York, NY

10036 M 718 490 9543 / E

elaine.george@chubb.com

Devices and products described herein are provided by StreamLabs, Inc., a wholly owned non-insurance subsidiary of Chubb which offers Internet of Things (IoT) enabled water monitoring, leak detection and water shut-off devices and systems for residential and commercial properties. The offer described herein is not an indication that insurance coverage is available under any Chubb policy for any particular incident. Chubb is the marketing name used to refer to subsidiaries of Chubb Limited providing insurance and related services. For a list of these subsidiaries, please visit our website at www.chubb.com. For more information about StreamLabs,

StreamLabs Point of Leak Sensor

The versatile StreamLabs wireless Point of Leak Sensor has a probe at the end of a three-foot cable that detects the presence of water and can be discretely hidden out-of-sight. The sensors use LoRaWAN® technology to send real-time alerts via text or email to prevent a potentially catastrophic event. Measurements = 1.46 inches x 2.81 inches x 0.75 inches. Cable length: 36 inches

StreamLabs Rope Sensor

The StreamLabs wireless Rope Sensor detects the presence of water anywhere along its three-foot rope, which uses two wires covered with conductive polymer. The rope is highly flexible for easy placement around equipment.

Sensor Measurements: 1.46 inches x 2.81 inches x 0.75 inches. Rope Measurement: 36 inches

StreamLabs Temperature Sensor

The StreamLabs Temperature Sensor is ideal for areas where extreme temperature levels can affect valuable assets, equipment or safety. The sensor features customizable settings and leverages LoRaWAN® technology to send real-time alerts via text or email to prevent a potentially catastrophic event.

Temperature Sensor Measurements = 1.46 inches x 2.81 inches x 0.75 inches

StreamLabs Signal (Gateway)

The StreamLabs Signal (gateway) leverages LoRaWAN® technology to provide building-wide connectivity to thousands of IoT assets. Easy to deploy, the Signal extends coverage in remote or hard-to-reach areas inside of commercial buildings such as hotels, convention centers, offices and retail stores. An electrical outlet is required. Sensors must be within 200 to 600 ft range of the Signal. Construction type and location of the building will affect the signal strength of the gateway.

This Notice pertains to the following quotation issued by an insurer of the Chubb Group of Insurance Companies. If you have more than one Chubb policy, you will receive individual notice(s) for each policy to which the Terrorism Risk Insurance Act applies.

Mailing Date May 19, 2025

Insured Name Southern Nevada Health District
Mailing Street Address 280 S. Decatur Blvd
Mailing City, State, Zip Las Vegas, Nevada 89107

Policy Type	Policy Number	Effective Date	Underwriting Company
Property	36084914	07/01/2025	Federal Insurance Company

CHUBB® IMPORTANT NOTICE TO POLICYHOLDER TERRORISM RISK INSURANCE ACT

You are hereby notified that pursuant to the Terrorism Risk Insurance Act (the "Act") we are making available to you insurance for losses arising out of certain acts of terrorism. Terrorism is defined as any act certified by the Secretary of the Treasury of the United States, to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of an air carrier or vessel or the premises of a United States Mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

You should know that the insurance provided by your policy for losses caused by acts of terrorism is partially reimbursed by the United States of America under the formula set forth in the Act. Under this formula, the United States of America pays 85% of covered terrorism losses that exceed the statutorily established deductible to be paid by the insurance company providing the insurance. Beginning in 2016, the Federal Share will be reduced by 1% per year until it reaches 80%, where it will remain.

However, if aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year, the Treasury shall not make any payment for any portion of the amount of such losses that exceeds \$100 billion.

If aggregate insured losses attributable to terrorist acts certified under the Terrorism Risk Insurance Act exceed \$100 billion in a calendar year and we have met our insurer deductible under the Terrorism Risk Insurance Act, we shall not be liable for the payment of any portion of the amount of such losses that exceeds \$100 billion, and in such case insured losses up to that amount are subject to pro rata allocation in accordance with procedures established by the Secretary of the Treasury.

The portion of your annual premium that is attributable to insurance for such acts of terrorism is: \$ 9,858

If you elect not to purchase coverage for terrorism and your policy provides commercial property insurance in a jurisdiction that has a statutory standard fire policy, the premium shown here for Ensuing Fire is the amount attributable to the insurance provided pursuant to that statutory standard fire policy. This coverage cannot be rejected. That amount is \$ 0

Important Notice

Form 99-10-0729 (Rev.01-15)

Property - Important Notice to Policyholder

Page 1 of 3

This Notice pertains to the following quotation issued by an insurer of the Chubb Group of Insurance Companies. If you have more than one Chubb policy, you will receive individual notice(s) for each policy to which the Terrorism Risk Insurance Act applies.

Mailing Date May 19, 2025

Insured Name Southern Nevada Health District
Mailing Street Address 280 S. Decatur Blvd
Mailing City, State, Zip Las Vegas, Nevada 89107

Policy Type	Policy Number	Effective Date	Underwriting Company
Property	36084914	07/01/2025	Federal Insurance Company

Under the Act, you have thirty (30) days from the date of this notice to consider whether or not you wish to maintain insurance for terrorism losses covered by the Act.

If you elect not to maintain this insurance, please so indicate by placing an “X” in the space provided on the next page, sign and return this disclosure notice to your agent or broker as soon as possible. By electing not to maintain this insurance, you agree that we may attach a terrorism exclusion or sublimits to your policy. If you do not sign and return this disclosure notice, you will be deemed to have decided to maintain this insurance, subject to the next paragraph.

If you elect to maintain this insurance, you must pay the premium disclosed above, otherwise we will avail ourselves of our normal remedies for nonpayment of premium, including cancellation of your policy in accordance with its terms.

This Notice pertains to the following quotation issued by an insurer of the Chubb Group of Insurance Companies. If you have more than one Chubb policy, you will receive individual notice(s) for each policy to which the Terrorism Risk Insurance Act applies.

Mailing Date May 19, 2025

Insured Name Southern Nevada Health District
Mailing Street Address 280 S. Decatur Blvd
Mailing City, State, Zip Las Vegas, Nevada 89107

Policy Type	Policy Number	Effective Date	Underwriting Company
Property	36084914	07/01/2025	Federal Insurance Company

Rejection of terrorism insurance:

☐ I hereby reject terrorism insurance and elect to have a terrorism exclusion, sublimit or other limitation included in my policy. I understand that I will have no, or limited, coverage for losses arising from acts of terrorism.

Policyholder/Applicant's Name: _____

Policyholder/Applicant's Signature: _____

Date: _____

IMPORTANT ACTION REQUIRED
THIS APPLIES TO NEW YORK CITY LOCATIONS ONLY
FAILURE TO ACT CAN RESULT IN NYC DOB FINES OF \$1,000 OR MORE
PER OBJECT WHICH WILL BE YOUR RESPONSIBILITY

Dear :

The NYC Department of Buildings now has an online technology where boiler inspections and violations will be entered and records stored. DOB NOW Safety will be the new platform for boiler inspections, as well as other DOB safety related inspections of elevators, facades, electrical and various other inspections. The transition to this system has modified the steps related to filing jurisdictional inspections including new requirements of owner email registration.

These steps include:

- Owner registration in the DOB NOW Safety System is required prior to filings being accepted.
- Licensed Professional/Inspector must input the owner registration information prior to filing.

To ensure conformance with the above requirements we are asking all owners of NYC property to register and to ensure that registration information is available to those local management personnel responsible in each building as well as your insurance agent/carrier.

Please provide the registration information for your NYC locations on the attached form. **Failure to complete registration and provide Chubb with this information will result in our inability to file inspections and can lead to missed inspection fines of \$1,000 or more per object.**

The registration process is quick, taking approximately a total of 5-10 minutes. Supplemental information on the registration process has been included on the attached pages.

Please disregard this letter if you have already completed the registration process with the City of New York for all covered locations and advised Chubb of all building registrant information.

Should you have any questions, please contact your Chubb representative or email us at nycboilers@chubb.com.

Enclosures



Building Registrant Owner Form

Complete this form for all New York City locations within 30 days and send it to Chubb at:
nycboilers@chubb.com

May 19, 2025

Customer: SOUTHERN NEVADA HEALTH DISTRICT

Policy Number: 36084914

[illegible]

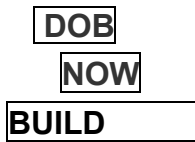
* If the same registrant applies to all locations, indicate "All Locations" after the email address on the first line

**FAILURE TO RETURN THIS FORM
CAN RESULT IN NYC DOB FINES OF \$1,000 OR MORE PER OBJECT.
CHUBB WILL NOT ACCEPT RESPONSIBILITY FOR FINES LEVIED BY THE CITY OF
NEW YORK DOB RESULTING FROM YOUR FAILURE TO COMPLY.**



Tip Sheet: Owner Registration in eFiling

If you are a **Building Owner, Building Manager, or Building Representative**, you can:



Enter job applications in
DOB NOW: *Build*



Review and confirm compliance
filings in DOB NOW: *Safety*

Register for **DOB NOW: *Build*** or **DOB NOW: *Safety*** by creating an eFiling account:

1. Go to www.nyc.gov/dobefiling, and click on the link to 'Register for electronic filing.'
2. Fill out the Electronic Filing Account Information form.

***NOTE:** Your address should be your mailing address, not the address of the building you own.*
3. Read the Agreement section, and click **Submit**.
4. You will receive two (2) emails. Your account will not be active until the second email is received.
 - a. In the first email, you **must** click a link to activate your account.
 - b. The second email confirms your enrollment. Once you receive the second email, your registration in eFiling will take effect the next day. You can then use your eFiling email and password at www.nyc.gov/dobnow.

***NOTE:** If you want to change your account information, such as email, phone, or mailing address, you will have to log in to eFiling.*

If you have any questions about DOB NOW, please contact www.nyc.gov/dobnowhelp

Rick D. Chandler P.E., Commissioner

nyc.gov/buildings

build safe|live safe

AUTOMOBILE INSURANCE

Policy Number: 7364-15-53
Company: GREAT NORTHERN INSURANCE COMPANY
Effective Date: July 1, 2025 to July 1, 2026

<u>Premium</u>	<u>Commission</u>	<u>Payment Options</u>
\$173,652.00	12.5%	Direct Bill
Taxes and Surcharges		
\$0.00	0%	Prepaid

<u>Coverage</u>	<u>Limits of Insurance</u>	<u>Symbol</u>
Liability	\$1,000,000	1
Auto Medical Payments	\$10,000	7
Uninsured/Underinsured Motorist Coverage	\$100,000	10
Physical Damage Coverage		
Comprehensive Deductible	\$3,000	7,8
Collision Deductible	\$3,000	7,8
Hired Car Physical Damage Coverage		8
Comprehensive Deductible	\$1,000	
Collision Deductible	\$1,000	
Physical Damage Limit	Actual Cash Value, or Cost of Repair, whichever is less, minus deductible for each covered auto, but no deductible applies to loss caused by fire or lightning	

Rating is based on the following:

	Annual Cost of Hire - Excess
IF ANY	Annual Cost of Hire - Primary

of Employees: 1,174

The following amendments will be attached to your Business Auto Policy:

SELECTED EXCLUSIONS, ENDORSEMENTS OR OTHER FORMS		
16-02-0153	01-06	PREMIUM STATEMENT - VARIOUS STATES
16-02-0153	01-06	PREMIUM STATEMENT - VARIOUS STATES
16-02-0282	02-04	COMPLIANCE W/APPLIC TRADE SANCTION LAWS
16-02-0251 (7)	09-16	SIGNATURE PAGE - GREAT NORTHERN INS. CO.
IL 00 03	09-08	CALCULATION OF PREMIUM
IL 00 17	11-98	COMMON POLICY CONDITIONS
IL 00 21	09-08	NUCLEAR ENERGY LIABILITY EXCLUSION ENDT
IL 01 10	09-07	NEVADA CHGS-CONCEALMENT, MISREP OR FRAUD
IL 02 51	09-07	NEVADA CHANGES-CANC & NONRENL
16-02-0214	11-24	BUSINESS AUTO COVERAGE FORM DECLARATIONS
16-02-0214	11-24	BUSINESS AUTO COVERAGE FORM DECLARATIONS
16-02-0214	11-24	SCHEDULE OF COVERED AUTOS YOU OWN
16-02-0214	11-24	BUSINESS AUTO COVERAGE FORM DECLARATIONS
16-02-0214	11-24	BUSINESS AUTO COVERAGE FORM DECLARATIONS
16-02-0214	11-24	BUSINESS AUTO COVERAGE FORM DECLARATIONS
16-02-0214	11-24	BUSINESS AUTO COVERAGE FORM DECLARATIONS
16-02-0214	11-24	BUSINESS AUTO COVERAGE FORM DECLARATIONS
16-02-0327	05-25	ADDITIONAL BENEFITS
16-10-0196	01-01	REDUCING AUTO LOSSES
16-10-0254	02-04	ADVISORY NOTICE TO POLICYHOLDERS - OFAC
99-10-0460	02-97	DIRECT BILL NOTICE TO POLICYHOLDERS
99-10-0872	06-07	IMPORTANT NOTICE
CA 00 01	11-20	BUSINESS AUTO COVERAGE FORM
CA 01 36	10-13	NEVADA CHANGES
CA 21 27	10-13	NEVADA UNINSURED MOTORISTS COVERAGE
CA 23 85	10-13	EXCL OF TERRORISM INVOLVING NUC/BIO/CHEM
CA 99 03	10-13	AUTO MEDICAL PAYMENTS COVERAGE
IL U 020	07-18	NV UM COV & MED PAY COV SEL/REJ

Coverage for terrorism involving nuclear, biological or chemical terrorism will be excluded.

Changes to the vehicle schedule which we receive subsequent to this quote may affect Experience Rating calculations and, therefore, the premium shown on the Premium Summary page above.

Schedule of Automobiles:

Auto No.	Yr & Model	Last 5 of VIN#	Liability Limit (In Thousands)	PIP Limit	APIP Limit	Med Pay Limit	Uninsured Limit (In Thousands)	Underinsured Limit (In Thousands)	Comp Ded	Coll Ded	Towing Limit	Rental Limit/ # of Days Varies
NV-1	17 Chev	58910	1000			10000	100	100	3000	3000		
NV-2	07 Chev	24953	1000			10000	100	100	3000	3000		
NV-3	09 Chev	53948	1000			10000	100	100	3000	3000		
NV-4	09 Ford	62464	1000			10000	100	100	3000	3000		
NV-5	15 Toyo	34362	1000			10000	100	100	3000	3000		
NV-6	17 Ford	39469	1000			10000	100	100	3000	3000		
NV-7	16 Chev	56925	1000			10000	100	100	3000	3000		
NV-8	19 Chev	01251	1000			10000	100	100	3000	3000		
NV-9	20 Chev	18706	1000			10000	100	100	3000	3000		
NV-10	13 Chev	41275	1000			10000	100	100	3000	3000		
NV-11	20 Chev	97544	1000			10000	100	100	3000	3000		
NV-12	24 Toyo	02364	1000			10000	100	100	3000	3000		
NV-13	24 Toyo	23842	1000			10000	100	100	3000	3000		
NV-14	09 Ford	86365	1000			10000	100	100	3000	3000		
NV-15	11 Ford	34165	1000			10000	100	100	3000	3000		
NV-16	16 Chev	97866	1000			10000	100	100	3000	3000		
NV-17	16 Chev	97868	1000			10000	100	100	3000	3000		
NV-18	16 Chev	95608	1000			10000	100	100	3000	3000		
NV-19	16 Chev	95058	1000			10000	100	100	3000	3000		
NV-20	16 Chev	98075	1000			10000	100	100	3000	3000		
NV-21	16 Chev	96580	1000			10000	100	100	3000	3000		
NV-22	16 Chev	59634	1000			10000	100	100	3000	3000		
NV-23	21 Ford	00916	1000			10000	100	100	3000	3000		
NV-24	21 Ford	00920	1000			10000	100	100	3000	3000		

Schedule of Automobiles:

Auto No.	Yr & Model	Last 5 of VIN#	Liability Limit (In Thousands)	PIP Limit	APIP Limit	Med Pay Limit	Uninsured Limit (In Thousands)	Underinsured Limit (In Thousands)	Comp Ded	Coll Ded	Towing Limit	Rental Limit/ # of Days Varies
NV-25	20 Chev	98457	1000			10000	100	100	3000	3000		
NV-26	21 Chev	04270	1000			10000	100	100	3000	3000		
NV-27	21 Chev	01726	1000			10000	100	100	3000	3000		
NV-28	21 Chev	99180	1000			10000	100	100	3000	3000		
NV-29	21 Chev	01627	1000			10000	100	100	3000	3000		
NV-30	21 Chev	01658	1000			10000	100	100	3000	3000		
NV-31	22 Hond	10812	1000			10000	100	100	3000	3000		
NV-32	22 Ram	64008	1000			10000	100	100	3000	3000		
NV-33	18 Chev	49703	1000			10000	100	100	3000	3000		
NV-34	23 Chev	09467	1000			10000	100	100	3000	3000		
NV-35	23 Chev	09704	1000			10000	100	100	3000	3000		
NV-36	23 Chev	09152	1000			10000	100	100	3000	3000		
NV-37	23 Chev	09356	1000			10000	100	100	3000	3000		
NV-38	23 Chev	09267	1000			10000	100	100	3000	3000		
NV-39	05 Trai	27577	1000			10000			3000	3000		
NV-40	08 Trai	88102	1000			10000			3000	3000		
NV-41	08 Trai	88101	1000			10000			3000	3000		
NV-42	08 Trai	88065	1000			10000			3000	3000		
NV-43	24 Chev	62647	1000			10000	100	100	3000	3000		
NV-44	24 Air-	02092	1000			10000			3000	3000		
NV-45	25 Chev	77443	1000			10000	100	100	3000	3000		

AUTOMOBILE INSURANCE (REVISED)

Policy Number: 7364-15-53
Company: GREAT NORTHERN INSURANCE COMPANY
Effective Date: July 1, 2025 to July 1, 2026

<u>Premium</u>	<u>Commission</u>	<u>Payment Options</u>
\$168,182.00	12.5%	Direct Bill
Taxes and Surcharges		
\$0.00	0%	Prepaid

<u>Coverage</u>	<u>Limits of Insurance</u>	<u>Symbol</u>
Liability	\$1,000,000	1
Auto Medical Payments	\$10,000	7
Uninsured/Underinsured Motorist Coverage	\$100,000	10
Physical Damage Coverage		
Comprehensive Deductible	\$3,000	7,8
Collision Deductible	\$3,000	7,8
Hired Car Physical Damage Coverage		8
Comprehensive Deductible	\$1,000	
Collision Deductible	\$1,000	
Physical Damage Limit	Actual Cash Value, or Cost of Repair, whichever is less, minus deductible for each covered auto, but no deductible applies to loss caused by fire or lightning	

Rating is based on the following:

	Annual Cost of Hire - Excess
IF ANY	Annual Cost of Hire - Primary
# of Employees:	810

The following amendments will be attached to your Business Auto Policy:

SELECTED EXCLUSIONS, ENDORSEMENTS OR OTHER FORMS		
16-02-0153	01-06	PREMIUM STATEMENT - VARIOUS STATES
16-02-0153	01-06	PREMIUM STATEMENT - VARIOUS STATES
16-02-0282	02-04	COMPLIANCE W/APPLIC TRADE SANCTION LAWS
16-02-0251 (7)	09-16	SIGNATURE PAGE - GREAT NORTHERN INS. CO.
IL 00 03	09-08	CALCULATION OF PREMIUM
IL 00 17	11-98	COMMON POLICY CONDITIONS
IL 00 21	09-08	NUCLEAR ENERGY LIABILITY EXCLUSION ENDT
IL 01 10	09-07	NEVADA CHGS-CONCEALMENT, MISREP OR FRAUD
IL 02 51	09-07	NEVADA CHANGES-CANC & NONRENL
16-02-0214	11-24	BUSINESS AUTO COVERAGE FORM DECLARATIONS
16-02-0214	11-24	BUSINESS AUTO COVERAGE FORM DECLARATIONS
16-02-0214	11-24	SCHEDULE OF COVERED AUTOS YOU OWN
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16-02-0327	05-25	ADDITIONAL BENEFITS
16-10-0196	01-01	REDUCING AUTO LOSSES
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99-10-0460	02-97	DIRECT BILL NOTICE TO POLICYHOLDERS
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CA 00 01	11-20	BUSINESS AUTO COVERAGE FORM
CA 01 36	10-13	NEVADA CHANGES
CA 21 27	10-13	NEVADA UNINSURED MOTORISTS COVERAGE
CA 23 85	10-13	EXCL OF TERRORISM INVOLVING NUC/BIO/CHEM
CA 99 03	10-13	AUTO MEDICAL PAYMENTS COVERAGE
IL U 020	07-18	NV UM COV & MED PAY COV SEL/REJ

Coverage for terrorism involving nuclear, biological or chemical terrorism will be excluded.

Changes to the vehicle schedule which we receive subsequent to this quote may affect Experience Rating calculations and, therefore, the premium shown on the Premium Summary page above.

Schedule of Automobiles:

Auto No.	Yr & Model	Last 5 of VIN#	Liability Limit (In Thousands)	PIP Limit	APIP Limit	Med Pay Limit	Uninsured Limit (In Thousands)	Underinsured Limit (In Thousands)	Comp Ded	Coll Ded	Towing Limit	Rental Limit/ # of Days Varies
NV-1	17 Chev	58910	1000			10000	100	100	3000	3000		
NV-2	07 Chev	24953	1000			10000	100	100	3000	3000		
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NV-6	17 Ford	39469	1000			10000	100	100	3000	3000		
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NV-9	20 Chev	18706	1000			10000	100	100	3000	3000		
NV-10	13 Chev	41275	1000			10000	100	100	3000	3000		
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NV-16	16 Chev	97866	1000			10000	100	100	3000	3000		
NV-17	16 Chev	97868	1000			10000	100	100	3000	3000		
NV-18	16 Chev	95608	1000			10000	100	100	3000	3000		
NV-19	16 Chev	95058	1000			10000	100	100	3000	3000		
NV-20	16 Chev	98075	1000			10000	100	100	3000	3000		
NV-21	16 Chev	96580	1000			10000	100	100	3000	3000		
NV-22	16 Chev	59634	1000			10000	100	100	3000	3000		
NV-23	21 Ford	00916	1000			10000	100	100	3000	3000		
NV-24	21 Ford	00920	1000			10000	100	100	3000	3000		

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Auto No.	Yr & Model	Last 5 of VIN#	Liability Limit (In Thousands)	PIP Limit	APIP Limit	Med Pay Limit	Uninsured Limit (In Thousands)	Underinsured Limit (In Thousands)	Comp Ded	Coll Ded	Towing Limit	Rental Limit/ # of Days Varies
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NV-30	21 Chev	01658	1000			10000	100	100	3000	3000		
NV-31	22 Hond	10812	1000			10000	100	100	3000	3000		
NV-32	22 Ram	64008	1000			10000	100	100	3000	3000		
NV-33	18 Chev	49703	1000			10000	100	100	3000	3000		
NV-34	23 Chev	09467	1000			10000	100	100	3000	3000		
NV-35	23 Chev	09704	1000			10000	100	100	3000	3000		
NV-36	23 Chev	09152	1000			10000	100	100	3000	3000		
NV-37	23 Chev	09356	1000			10000	100	100	3000	3000		
NV-38	23 Chev	09267	1000			10000	100	100	3000	3000		
NV-39	05 Trai	27577	1000			10000			3000	3000		
NV-40	08 Trai	88102	1000			10000			3000	3000		
NV-41	08 Trai	88101	1000			10000			3000	3000		
NV-42	08 Trai	88065	1000			10000			3000	3000		
NV-43	24 Chev	62647	1000			10000	100	100	3000	3000		
NV-44	24 Air-	02092	1000			10000			3000	3000		
NV-45	25 Chev	77443	1000			10000	100	100	3000	3000		

**Vantage Risk Specialty Insurance Company**

123 N. Wacker Dr., Suite 1300

Chicago, IL 60606

Toll Free: 833-552-1772

QUOTE**Date:** 05/16/2025**Quote #:** Q03HC0000060831**Renewal of Policy #:** P03HC0000060830

Dear Oscar:

We are pleased to offer the following Quotation on the captioned account:

Named Insured and Address: Southern Nevada Health District
280 S Decatur Blvd
Las Vegas, NV 89107-2936

Insurer: Vantage Risk Specialty Insurance Company

Proposed Policy Period: 07/01/2025 TO 07/01/2026
Both dates at 12:01 a.m. local time at the address of the Insured stated above.

LIMITS OF LIABILITY AND PREMIUM

HEALTHCARE PROFESSIONAL LIABILITY	
Per Claim Limit	\$1,000,000
Aggregate Limit	\$3,000,000
Per Claim Deductible	\$25,000
Aggregate Deductible	\$0
Retroactive Date	08/01/2015
Defense Expenses	Defense Outside the Limits
Deductible applies to	Loss and Expense

ABUSE OR MOLESTATION	
Per Claim Limit	\$1,000,000
Aggregate Limit	\$1,000,000
Per Claim Deductible	\$25,000
Aggregate Deductible	\$0
Retroactive Date	08/01/2015
<i>The above limits are shared with Professional Liability Limits.</i>	

HEALTHCARE GENERAL LIABILITY	
Each Occurrence Limit	\$1,000,000
Personal and Advertising Injury Limit	\$1,000,000
Damage to Premises Rented to you Limit	\$100,000

HEALTHCARE GENERAL LIABILITY	
Medical Payments	\$5,000
General Aggregate Limit	\$3,000,000
Products-Completed Operations Aggregate Limit	\$3,000,000
Bodily Injury & Property Damage Deductible	\$25,000
Personal and Advertising Injury Deductible	\$25,000
Aggregate Deductible	\$0
Defense Expenses	Defense Outside the Limits
Deductible applies to	Loss and Expense

Total Premium	\$75,000
TRIA Coverage Premium	Included
<i>Premium does not include applicable Taxes, surcharges & fees, which are broker's responsibility.</i>	
Minimum Premium Earned at Inception: 35%	

TERMS AND CONDITIONS

- Coverage offered under the Terrorism Risk Insurance Act is included.
- If this policy provides coverage to more than one Insured, but with different retroactive dates, they will be named with their applicable retroactive date on the Named Insured and Retroactive Date Endorsement.
- Cyber related claims are excluded.

THIS QUOTATION IS SUBJECT TO RECEIPT AND UNDERWRITING APPROVAL OF THE FOLLOWING

- Receipt of signed and dated Surplus Lines Broker Letter (Letter 001 0722), prior to binding.
- Name and email address of the person we should send deductible invoices to in the event of a claim.
- Signed application.

THE FOLLOWING WILL BE ATTACHED TO THE POLICY

HC DS 001 1222	DECLARATIONS // HEALTHCARE - COMMON
PL DS 001 1222	DECLARATIONS // HEALTHCARE PROFESSIONAL LIABILITY COVERAGE
GL DS 001 1222	DECLARATIONS // HEALTHCARE GENERAL LIABILITY COVERAGE
IL 00012 0122	SIGNATURE PAGE
IL 00002 0122	SCHEDULE // FORMS AND ENDORSEMENTS
HC 00001 1122	COMMON POLICY CONDITIONS
PL 00001 0824	COVERAGE PART // HEALTHCARE PROFESSIONAL LIABILITY (CLAIMS MADE)
GL 00001 0824	COVERAGE PART // HEALTHCARE GENERAL LIABILITY (OCCURRENCE)
IL 00015 0122	ENDORSEMENT // TRADE OR ECONOMIC SANCTIONS
IL 00017 1224	ENDORSEMENT // SERVICE OF SUIT
IL 00022 0122	ENDORSEMENT // CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM
HC 10012 1122	ENDORSEMENT // NOTICE OF CANCELLATION - CERTIFICATE HOLDERS
HC 10017 1122	ENDORSEMENT // EXCLUSION - CORRECTIONAL MEDICINE

HC 10022 0123	ENDORSEMENT // EXCLUSION - SEX TRAFFICKING
HC 10029 0423	ENDORSEMENT // EXCLUSION- BIOMETRIC INFORMATION PRIVACY CLAIM
HC 10042 0824	ENDORSEMENT // WHO IS AN INSURED CHANGE
PL 10002 0824	ENDORSEMENT // ABUSE OR MOLESTATION SUB-LIMIT
PL 10007 0323	ENDORSEMENT // EXCLUSION - OPIOIDS - WITH INDIVIDUAL PLAINTIFF CARVEBACK
PL 10012 1122	ENDORSEMENT // EXCLUSION - ABSOLUTE COMMUNICABLE DISEASE
PL 10030 0123	ENDORSEMENT // EXCLUSION - FEDERAL TORT CLAIMS ACT
GL 10001 1122	ENDORSEMENT // PRIMARY AND NON-CONTRIBUTORY INSURANCE WHERE REQUIRED BY WRITTEN CONTRACT(S)

IMPORTANT NOTICES

Please review this quote as it may differ from your requested coverage specifications. This quote is valid until the inception date of the policy period or 30 days after the date of this quote listed on page 1, whichever is sooner.

This Quotation is provided on the basis that all information given to Insurer by or on behalf of the Insured in its underwriting submission and/or in its responses to the underwriter's requests for information is reliable, truthful, and complete to the best of the Insured's information and knowledge. The Insurer relies on the "duty of disclosure" as it exists under applicable law and rejects any attempt to negate that duty wholly or partially.

The Insured, by accepting this Quotation, waives the effect of any purported disclaimers of the Insured's duty to disclose to underwriters all material facts to the best of its knowledge that may be contained in such submission or in its responses to questions or requests for information, or in emails, cdroms, or internet websites or any other sources used in providing or transmitting underwriting information. The terms and conditions of this offer of coverage may be amended or withdrawn should there be discovery of a material change to the submitted information.

Please feel free to contact me if you have any questions regarding this quotation. We appreciate the opportunity to quote this account.



NOTICE II DISCLOSURE OF TERRORISM INSURANCE PREMIUM

Coverage for acts of terrorism is included in your policy. You are hereby notified that the Terrorism Risk Insurance Act, as amended in 2019, defines an act of terrorism in Section 102(1) of the Act: The term "act of terrorism" means any act or acts that are certified by the Secretary of the Treasury, in consultation with the Secretary of Homeland Security, and the Attorney General of the United States, to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion. Under your coverage, any losses resulting from certified acts of terrorism may be partially reimbursed by the United States Government under a formula established by the Terrorism Risk Insurance Act, as amended. However, your policy may contain other exclusions which might affect your coverage, such as an exclusion for nuclear events. Under the formula, the United States Government generally reimburses 80% beginning on January 1, 2020, of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The Terrorism Risk Insurance Act, as amended, contains a \$100 billion cap that limits U.S. Government reimbursement as well as insurers' liability for losses resulting from certified acts of terrorism when the amount of such losses exceeds \$100 billion in any one calendar year. If the aggregate insured losses for all insurers exceed \$100 billion, your coverage may be reduced.

The portion of your annual premium that is attributable to coverage for acts of terrorism is \$0 and does not include any charges for the portion of losses covered by the United States government under the Act.

I ACKNOWLEDGE THAT I HAVE BEEN NOTIFIED THAT UNDER THE TERRORISM RISK INSURANCE ACT, AS AMENDED, ANY LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM UNDER MY POLICY COVERAGE MAY BE PARTIALLY REIMBURSED BY THE UNITED STATES GOVERNMENT AND MAY BE SUBJECT TO A \$100 BILLION CAP THAT MAY REDUCE MY COVERAGE, AND I HAVE BEEN NOTIFIED OF THE PORTION OF MY PREMIUM ATTRIBUTABLE TO SUCH COVERAGE.

Applicant's Signature

Print Name of the Signatory

Date

Vantage Risk Specialty Insurance Company

Insurance Company

Southern Nevada Health District

Named Insured



TO: SOUTHERN NEVADA DISTRICT BOARD OF HEALTH **DATE:** June 26, 2025

RE: Approval of the Addition to the SNHD Employee Handbook to include Pawternity to Bereavement Leave

PETITION #36-25

That the Southern Nevada District Board of Health approves the addition of Pawternity to the Bereavement Leave policy.

PETITIONERS

Cassius Lockett, PhD, *District Health Officer* 
Renee Trujillo, *Chief Human Resources Officer* 

DISCUSSION:

As part of our ongoing commitment to supporting the emotional well-being of our employees, we are expanding our bereavement leave policy to include Pawternity leave. This addition acknowledges the deep bond many employees share with their companion animals and recognizes the grief that can accompany the loss of a beloved pet.

Page 51 – Bereavement Leave

Addition

Losing a pet can be a significant emotional event, comparable to losing a family member. For this reason, employees may utilize up to two (2) days every twelve (12) months of sick or other accrued leave for the purpose of having time to grieve and process their feelings for the loss of their pet. For this purpose, "pet" refers to a domesticated animal kept for companionship and affection, like a dog or cat. This Pawternity leave will solo be approved by the employee's supervisor via a time off request.

FUNDING:

No funding required.

Bereavement Leave

Employees may take up to three (3) days for in-state and up to five (5) days out of state/country of paid bereavement leave upon the death of a member of their immediate family. For purposes of bereavement leave only, "Immediate family member" is defined as an employee's spouse, domestic partner, parents, stepparents, siblings, children, stepchildren, grandparent, parent-in-law, or grandchild.

The District may require verification of the need for the leave. The employee's supervisor and Human Resources will consider this time off on a case-by-case basis and it will be processed through Human Resources benefits program

Payment for bereavement leave is computed at the regular hourly rate to a maximum of ten hours for one day. Time off granted shall not be credited as time worked for the purpose of computing overtime.

Employees may utilize up to 5 days of sick or other accrued leave for the purposes of bereavement and attending services for anyone that is close to the employee. This leave will solo be approved by the employee's supervisor via a time off request.

Losing a pet can be a significant emotional event, comparable to losing a family member. For this reason, employees may utilize up to two (2) days every twelve (12) months of sick or other accrued leave for the purpose of having time to grieve and process their feelings for the loss of their pet. For this purpose, "pet" refers to a domesticated animal kept for companionship and affection, like a dog or cat. This Pawternity leave will solo be approved by the employee's supervisor via a time off request.

Jury Duty/Court Appearance

The District supports employees in their civic duty to serve on a jury. Employees must present any summons to jury duty to their supervisor as soon as possible after receiving the notice, but no less than 3 days prior to appearing for jury duty.

Regular full-time employees called to serve on jury duty during normal working hours will be paid their regular wages while on jury duty, provided that all jury pay is submitted to the District. Employees called but not selected to serve on the jury, and those employees dismissed after serving on jury duty shall report to work when excused with 5 hours or more remaining in their normally scheduled shift. Employees will receive time off for jury duty in accordance with applicable laws.

Employees cannot work within eight (8) hours before the time when the employee must appear for jury duty or between 5 p.m. on the day of their appearance for jury duty and 3 a.m. on the following day if their service lasted for four (4) hours or more on the day of their appearance for jury duty, including time traveling to and from court. If the jury duty/court appearance is scheduled on an employee's normal day(s) off, they will not receive pay for those days.



TO: SOUTHERN NEVADA DISTRICT BOARD OF HEALTH **DATE:** June 26, 2025

RE: *Approval of Workers' Compensation Insurance Agreement renewal between the Southern Nevada Health District and Risk Administration Services (RAS) for policy period 07/01/2025-06/30/26*

PETITION #37-25

That the Southern Nevada District Board of Health *approve the renewal of workers' compensation insurance policy agreement between the Southern Nevada Health District and Risk Administration Services (RAS).*

PETITIONERS:

Cassius Lockett, PhD, District Health Officer *[Signature]*
Renee Trujillo, Chief Human Resources Officer *[Signature]*

DISCUSSION:

In July 2024, the Health District changed its provider for workers' compensation insurance to utilize Risk Administration Services (RAS). The Health District is requesting to renew this policy for continued coverage in fiscal year 2025.

The premium for policy period 07/01/2024-06/30/2025 was \$268,146. The 2025 premium quote for 07/01/25-06/30/26 is \$254,681 representing a \$13,465 decrease year over year.

FUNDING:

Coverage:	Workers' Compensation	
Limits:	Bodily Injury By Accident	\$1,000,000 Each Accident
	Bodily Injury By Disease	\$1,000,000 Policy Limit
	Bodily Injury By Disease	\$1,000,000 Each Employee
Annual Cost:		\$254,681



Workers' Compensation Proposal

Insured 74231

Southern Nevada Health District
280 S Decatur Blvd Attn: Human Resources Benefits
Las Vegas, NV 89107
(702) 759-1000

Quote No. 434327
Effective Date: 7/1/2025
Expiration Date: 7/1/2026
Quote Date: 5/5/2025
Quote Good Through: 7/1/2025

Agent 1012-1628

Connell Insurance Inc DBA Higginbotham Insurance Agency
Inc.
PO Box 1840
Branson, MO 65615

Employers Liability

Bodily Injury By Accident	\$1,000,000	Each Accident
Bodily Injury By Disease	\$1,000,000	Policy Limit
Bodily Injury By Disease	\$1,000,000	Each Employee

Proposal Summary

Policy Unit	Remuneration	Total Estimated Premium and Surcharges
1 - Southern Nevada Health District - Nevada	\$31,083,182	\$254,681
Grand Total	\$31,083,182	\$254,681

This is an estimate only and based on information received at the time prospectus. If an installment payment plan is offered, a \$10 installment charge per invoice will apply. The installment charge is waived if the paperless option is selected.

Please see the following page(s) for detailed Unit information.



Workers' Compensation Proposal

Insured 74231

Southern Nevada Health District
280 S Decatur Blvd Attn: Human Resources Benefits
Las Vegas, NV 89107
(702) 759-1000

Quote No. 434327
Effective Date: 7/1/2025
Expiration Date: 7/1/2026
Quote Date: 5/5/2025
Quote Good Through: 7/1/2025

Agent 1012-1628

Connell Insurance Inc DBA Higginbotham Insurance Age
Inc.
PO Box 1840
Branson, MO 65615

Employers Liability

Bodily Injury By Accident \$1,000,000 Each Accident
Bodily Injury By Disease \$1,000,000 Policy Limit
Bodily Injury By Disease \$1,000,000 Each Employee

Unit 1 - Southern Nevada Health District

Nevada

Rating Period: 7/1/2025 - 7/1/2026

Classifications	Code No.	Premium Basis Total Estimated Remuneration	Rate Per \$100 of Remuneration	Estimated Premium
CLERICAL OFFICE EMPLOYEES NOC	8810	\$7,621,669	0.21	\$16,006
PHYSICIAN & CLERICAL	8832	\$5,569,513	0.46	\$25,620
HOME, PUBLIC, AND TRAVELING HEALTHCARE--ALL EMPLOYEES	8835	\$4,284,000	1.53	\$65,545
BUILDING OR PROPERTY MANAGEMENT - ALL OTHER EMPLOYEES	9015	\$1,620,000	2.85	\$46,170
MUNICIPAL, TOWNSHIP, COUNTY OR STATE EMPLOYEE NOC	9410	\$11,988,000	2.12	\$254,146
Total Manual Premium				\$407,487
\$1,000,000/1,000,000/1,000,000		1.1%		\$4,482
Subject Premium				\$411,969
Unmodified Premium				\$411,969
Experience Mod		0.61		(\$160,668)
Modified Premium				\$251,301
SCHEDULE DEBIT/CREDIT		12%		\$30,156
Standard Premium				\$281,457
Premium Discount		11.8%		(\$33,212)
Expense Constant				\$220
Terrorism Act		1%		\$3,108
DTEC Act		1%		\$3,108
Policy Premium				\$254,681

Total Premium and Surcharge(s):

\$254,681

This is a quotation only and is not a binder of insurance or a guarantee of insurability.



Memorandum

Date: June 26, 2025

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, Director of Environmental Health *CS*
Cassius Lockett, PhD, District Health Officer *CL*

Subject: Variance request for an Application to Construct a Septic System located at 565 Straight St., Las Vegas, NV 89110 with the following provisions: 1) allow installation of a new denitrification septic system on an undersized lot.

I. BACKGROUND:

Erik Trejo Cardoso, Owner ("Petitioner"), is requesting a variance to permit and install an individual septic disposal system (ISDS) on an undersized lot served by a private well, located at Assessor's Parcel Number (APN) 140-34-201-027, also known as 565 Straight St., Las Vegas, NV 89110 ("Subject Property").

Petitioner requests a variance from Section 11.20.2 of the *Southern Nevada District Board of Health Regulations Governing Individual Sewage Disposal Systems and Liquid Waste Management* (SNHD ISDS Regulations), which requires a minimum lot size of one acre for the installation of an ISDS on a lot served by a private well. The Subject Property has an area of approximately 0.47 acres.

Petitioner states 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:

"This property is surrounded by approximately five other houses, all which have their own wells. This well has been in use and serving this single family residence since approximately 1972 and does meet the minimum setback requirements to the current permitted ISDS, and the new proposed denitrification ISDS."

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):

"The current homeowner purchased this property with the sole intent to remodel (no plumbing changes) the S.F.R. The variance for the property size/individual wells issues is also to allow for the installation of a new denitrification ISDS. The current system installed in 1972 will be abandoned-removed as needed. The nearest community sewer is over 400ft away and would not be feasible nor affordable to connect."

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:

"Existing well is currently over 100' away from the existing permitted ISDS and would also be 100'+ from the new proposed denitrification ISDS location. See attached plot plan."

The Subject Property is depicted in Attachment C as Lot 48 (highlighted in yellow) of the Assessor's Parcel Map. The parcel was created prior to the adoption of the current SNHD ISDS Regulations in 2009 and no changes to the Subject Property have been recorded since adoption of the current regulations. There is an existing ISDS on the Subject Property, which was installed in 1972. The existing single family residence was constructed in 1974.

Examination of the Clark County Assessor's records and parcel genealogy show that the Petitioner is the fourth owner of the property and obtained the Subject Property in December 2021. An analysis of the surrounding area shows that there are 57 private and quasi-municipal wells and 100 permitted ISDS within one square mile of the Subject Property.

II. RECOMMENDATION:

The Subject Property has an area of approximately 0.47 acres, which is smaller than the minimum lot size of one (1) acre required by the SNHD ISDS Regulations. Lot size variances have been approved for other properties. The proposed ISDS can meet all the required setbacks on the undersized lot.

The existing leach field is less than 100 feet from the neighbor's well and this variance would allow the property owner to relocate the ISDS to meet the required setback distance from all nearby wells. The Petitioner is also planning on increasing the capacity of the ISDS to accommodate future expansion of the existing single family residence.

A water sample obtained from the well on the Subject Property in November 2021 contained a nitrite level that exceeds the concentration determined by the US EPA to cause adverse public health effects. While nitrates can occur naturally in groundwater, available data from the EPA suggests that a nitrite concentration of over 1 mg/L is likely due to human activity.

Staff are of the opinion that granting the variance would not endanger public health and safety if it is subject to the conditions outlined in Section III below. Staff recommends APPROVAL of the variance for the following reasons:

- The existing ISDS is within the zone of influence of a well on an adjoining property, so relocating the system may reduce the risk of degrading the neighbor's water quality.
- The existing system is more than 53 years old, which exceeds the typical life expectancy of an ISDS.
- The nearest feasible gravity-accessible sewer connection point is more than 700 feet from the Subject Property.
- Because the Subject Property has its own well, it does not use or consume any Colorado River water.
- Installation of an advanced treatment system will allow the Petitioner to continue using the property, while reducing the discharge of pollutants into the ground water.
- This variance was previously approved by the Board of Health on August 25, 2022, but the variance expired after one year because the applicant had not begun construction of the ISDS, nor applied for an extension of time.

If the Board of Health approves the variance, staff recommends approval with the following conditions outlined in Section III.

III. CONDITIONS:

1. Petitioner will install an advanced treatment system in lieu of a conventional septic system.
2. Petitioner and their successors in interest must ensure the advanced treatment system will be maintained for the life of the system. Petitioner and their successors must maintain an active maintenance agreement and provide testing to SNHD annually for the life of system.
3. Petitioner and their successors 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 400 feet of the Petitioner's property line when connection can be made by gravity flow and the owner(s) are notified and legally required to do so.
4. Petitioner and their successors in interest must abide by the operation and maintenance requirements of the most current SNHD regulations governing individual sewage disposal systems.
5. Construction of the ISDS must be commenced within one (1) year of the date hereof. If the construction has not been commenced 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 Petitioner or Petitioner's successors in interest.

Attachments:

- A. Variance Candidate Application
- B. Justification Letter from the Petitioner
- C. Assessor's Parcel Map
- D. Sewer Map of 565 Straight St.
- E. Proposed ISDS Plan
- F. Well Water Analysis
- G. Public Notice

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



VARIANCE CANDIDATE WORKSHEET

PART I:

ESTABLISHMENT INFORMATION

Name of Facility/Establishment: ERIK TREJO
Health Permit Number: S0732-H38-00 Date of Inquiry: _____
Name of Operator/Agent: HARDIN + SONS INC.
Address of Operator/Agent: 201 W. CHEYENNE AVE. NLV NV 89030
Contact Information of Operator/Agent:
Office Phone: 702-399-3878 Cell Phone: 702-379-9156
Fax Number: _____ Email Address: hardin.sons@gmail.com
If corporation, the name/title of individual to sign for Variance document:
Name: DALE MARTIN
Title: PRESIDENT HARDIN + SONS INC.

OWNER INFORMATION

Name of Property Owner: Erik Trejo
Address of Property Owner: 565 Straight St Las Vegas NV 89110
Contact Information of Property Owner: (702)788-5856
Office Phone: _____ Cell Phone: (702)788-5856
Fax Number: _____ Email Address: eriktrejo41@gmail.com

PROPERTY INFORMATION

Property Address: 565 Straight St Las Vegas NV 89110
Assessor's Parcel Number (APN): 140-34-201-027
Describe location within larger facility (i.e. hotel/casino/resort, etc.):

SINGLE FAMILY RESIDENCE

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

PROPERTY IS CURRENTLY SERVICED BY ITS OWN WATER WELL, AND
IS APPROX. 1/2 ACRE IN SIZE WHERE NORMALLY A MINIMUM OF
ONE ACRE IS REQUIRED FOR AN INDIVIDUAL WELL.
CURRENT OWNER WOULD ALSO LIKE TO INSTALL A NEW DENITRIFICATION
SEPTIC SYSTEM.

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:

THIS PROPERTY IS SURROUNDED BY APPROX. 5 OTHER HOUSES, ALL WHICH HAVE THEIR OWN WELLS. THIS WELL HAS BEEN IN USE AND SERVING THIS S.F.R. SINCE APPROX. 1972 AND DOES MEET THE MINIMUM SETBACK REQUIREMENTS TO THE CURRENT PERMITTED ISDS, AND THE NEW PROPOSED DENITRIFICATION ISDS.

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 incurred by compliance):

THE CURRENT HOMEOWNER PURCHASED THIS PROPERTY WITH THE SOLE INTENT TO REMODEL (NO PLUMBING CHANGES) the S.F.R. THE VARIANCE FOR THE PROPERTY SIZE/INDIVIDUAL WELLS ISSUES IS ALSO TO ALLOW FOR THE INSTALLATION OF A NEW DENITRIFICATION ISDS. THE CURRENT SYSTEM INSTALLED IN 1972 WILL BE ABANDONED-REMOVED AS NEEDED. THE NEAREST COMMUNITY SEWER IS OVER 400' AWAY AND WOULD NOT BE FEASIBLE NOR AFFORDABLE TO CONNECT.

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:

EXISTING WELL IS CURRENTLY OVER 100' AWAY FROM THE EXISTING PERMITTED ISDS AND WOULD ALSO BE 100'+ FROM THE NEW PROPOSED DENITRIFICATION ISDS LOCATION.
SEE ATTACHED PLOT PLAN.

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 Petitioner

Justification/Hardship Letter

May 6, 2025

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

From: Erik Trejo Cardoso
RE: Parcel # 140-34-201-027
565 Straight St, Las Vegas, NV 89110

To whom it 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 for the installation of an individual sewage disposal system (ISDS) on a lot served by an individual water well on a ½ acre. Municipal sewer is located over 400 feet away from this property. All of the adjoining lots have their own well and individual ISDS.

The legal description of said property is APN# 140-34-201-027, further described as Sunrise Manor PT SW4 NW4 SEC 34 20 62

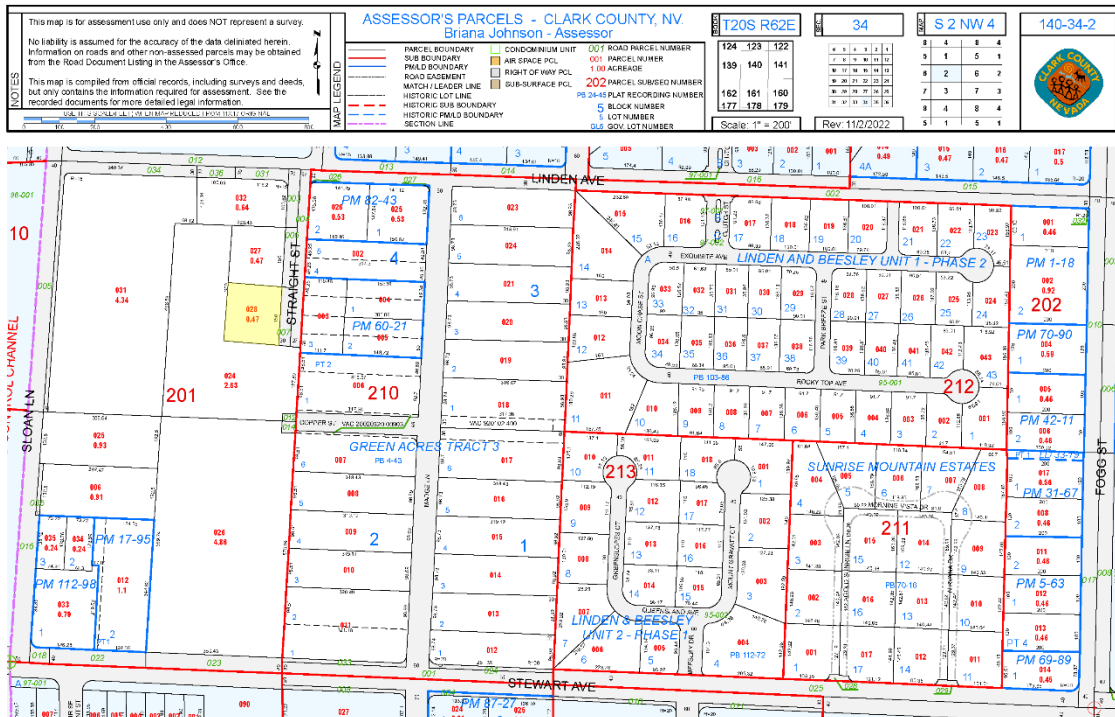
I have owned the property since September 28, 2021 and wish to apply for this variance.

Thank you for your consideration,



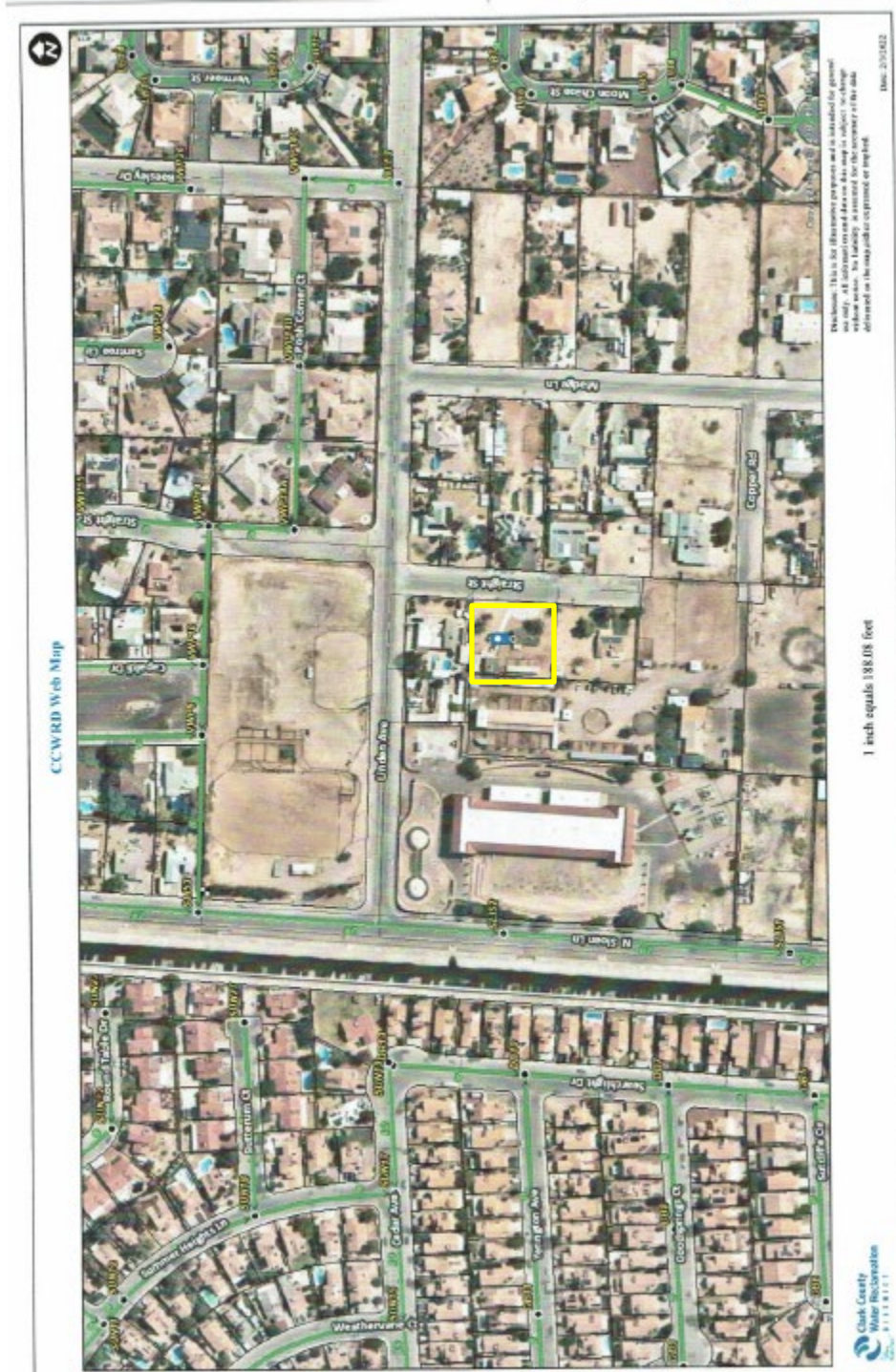
Erik Trejo Cardoso

Attachment C: Assessor's Parcel Map



TAX DIST 340

Attachment D: Sewer Map of 565 Straight St.



Attachment E: Proposed ISDS Plan

565 STRAIGHT ST.
APN # 140-34-201-027

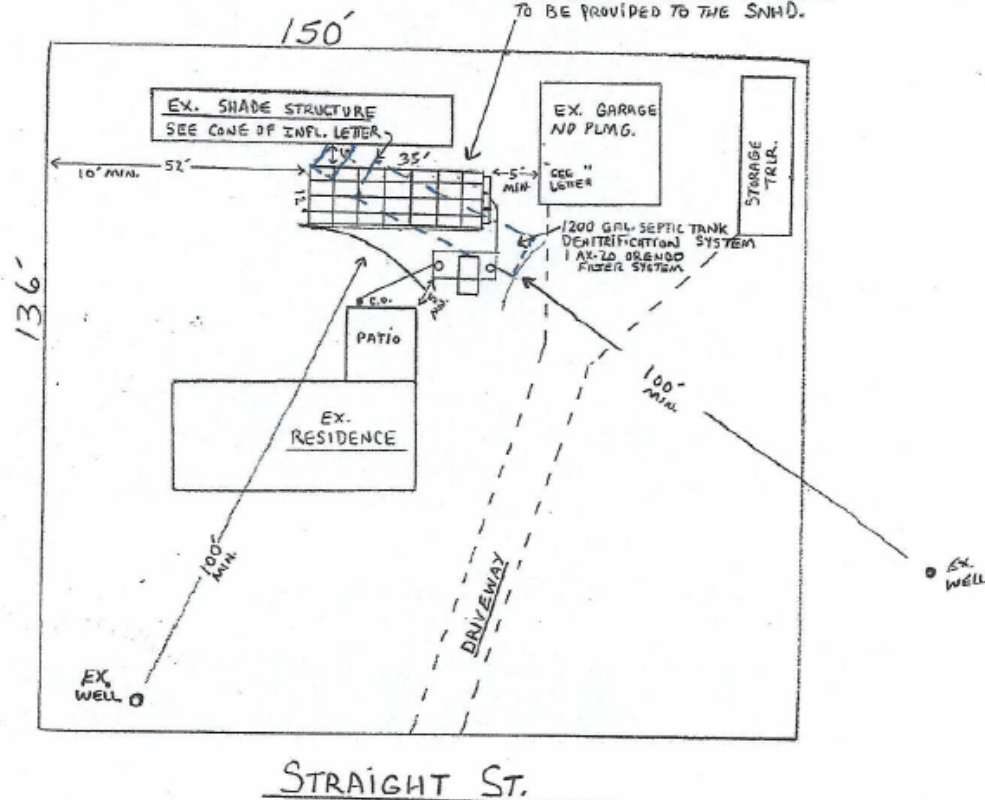


SCALE
1" = 30'

CHAMBER SYSTEM

1200 GALLON $\frac{1}{6}$ MPR = 408 S.F. REQ.
28 CHAMBERS = 420 S.F.
(3' x 5' CHAMBERS)

EX. TANK + LEACHFIELD TO BE
PUMPED + REMOVED OFF SITE TO
APEX LANDFILL. ALL PLOTS + RECEIPTS
TO BE PROVIDED TO THE SNHD.



Attachment F: Well Water Analysis (Page 1 of 2)



Silver State Labs-Las Vegas
3626 E. Sunset Road, Suite 100
Las Vegas, NV 89120
(702) 873-4478 FAX: (702) 873-7967
www.ssalabs.com

Analytical Report

WO#: 21111337
Date Reported: 12/7/2021

CLIENT: Erik Trejo **Collection Date:** 11/29/2021 7:52:00 PM
Project:
Lab ID: 21111337-01 **Matrix:** DRINKING WATER
Client Sample ID: Kitchen Sink

Analyses	Result	RL	Qual	Units	MCL	DF	Date Analyzed
DOMESTIC WATER PANEL							
ANIONS-SDWA (CL, F, NO2, NO3, SO4)				EPA 300.0		Analyst: DB	
Chloride	82.7	0.200		mg/L	400	2	12/1/2021 6:16:00 PM
Fluoride	0.923	0.100		mg/L	4.00	1	12/1/2021 5:55:00 PM
Nitrate as N	0.890	0.100		mg/L	10.0	1	11/30/2021 5:54:00 PM
Nitrite as N	1.08	0.100	*	mg/L	1.00	1	11/30/2021 5:54:00 PM
Sulfate	445	2.00		mg/L	500	20	12/1/2021 6:37:00 PM
DOMESTIC WATER PANEL							
HARDNESS (TOTAL) - SDWA, CALCULATION ONLY.				SM 2340 B		Analyst: KF	
Hardness (As CaCO3)	449	1.00		mg/L		1	12/6/2021 9:35:58 AM
Hardness, Calcium (As CaCO3)	71.9	1.00		mg/L		1	12/6/2021 9:35:58 AM
Hardness, Magnesium (As CaCO3)	377	1.00		mg/L		1	12/6/2021 9:35:58 AM
DOMESTIC WATER PANEL							
PH - SDWA				SM 4500H+ B		Analyst: JJF	
pH	8.67		*H	pH Units	8.50	1	11/30/2021 4:51:00 PM
DOMESTIC WATER PANEL							
TOTAL DISSOLVED SOLIDS - SDWA				SM 2540C		Analyst: DB	
Total Dissolved Solids	940	5.00		mg/L	1000	1	12/1/2021 1:06:00 PM
DOMESTIC WATER PANEL							
METALS-SDWA 200.7				EPA 200.7		Analyst: KF	
Calcium	28.8	1.00	L	mg/L		1	12/2/2021 3:06:01 PM
Iron	ND	0.100		mg/L	0.60	1	12/2/2021 3:06:01 PM
Magnesium	91.6	3.00	L	mg/L	150	3	12/2/2021 4:33:47 PM
Sodium	114	1.00	L	mg/L		1	12/2/2021 3:06:01 PM
DOMESTIC WATER PANEL							
METALS-SDWA 200.8				EPA 200.8		Analyst: KF	
Arsenic	14.8	1.00	*	µg/L	10.0	1	12/7/2021 10:25:12 AM
Copper	32.4	1.00		µg/L	1000	1	12/1/2021 4:03:19 PM
Lead	ND	1.00		µg/L	15.0	1	12/1/2021 4:03:19 PM

Qualifiers: * Value exceeds Maximum Contaminant Level.
(Qual) DF Dilution Factor.
MCL Maximum Contaminant Level.
PQL Practical Quantitation Limit.

B Analyte detected in the associated Method Blank
H Holding times for preparation or analysis exceeded.
ND Not Detected at the PQL.

Original

Attachment F: Well Water Analysis (Page 2 of 2)



Silver State Labs-Las Vegas
3626 E. Sunset Road, Suite 100
Las Vegas, NV 89120
(702) 873-4478 FAX: (702) 873-7967
www.ssalabs.com

Analytical Report

WO#: 21111337
Date Reported: 12/7/2021

CLIENT: Erik Trejo **Collection Date:** 11/29/2021 7:52:00 PM
Project:
Lab ID: 21111337-01 **Matrix:** DRINKING WATER
Client Sample ID: Kitchen Sink

Analyses	Result	RL	Qual	Units	MCL	DF	Date Analyzed
DOMESTIC WATER PANEL				EPA 200.8		Analyst: KF	
METALS-SDWA 200.8							
Manganese	2.70	1.00		µg/L	100	1	12/1/2021 4:03:19 PM
Zinc	69.9	1.00		µg/L	5000	1	12/1/2021 4:03:19 PM
DOMESTIC WATER PANEL				COLILERT-18		Analyst: AS	
COLIFORMS - P/A (DRINKING WATER)							
Coliform, Total	Absent			P/A	1		11/30/2021 4:40:00 PM
Escherichia Coli	Absent			P/A	1		11/30/2021 4:40:00 PM

Qualifiers: (Qual)	*	Value exceeds Maximum Contaminant Level.	B	Analyte detected in the associated Method Blank.
	DF	Dilution Factor.	H	Holding times for preparation or analysis exceeded.
	MCL	Maximum Contaminant Level.	ND	Not Detected at the PQL.
	PQL	Practical Quantitation Limit.		

Original

Attachment G: Public Notice



PUBLIC NOTICE

The Southern Nevada District Board of Health will conduct a PUBLIC HEARING on Thursday, June 26, 2025 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 Erik Cardosa ("Petitioner"), to permit and install a new individual sewage disposal system on the property located at 565 Straight St., Las Vegas, NV 89110, APN 140-34-201-027.

The variance request is made to allow the Petitioner to permit the installation of a conventional septic 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 Petitioner to install a septic 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 June 25, 2025 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 Daniel Isler 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
Director of Environmental Health

June 3, 2025
Date



TO: SOUTHERN NEVADA DISTRICT BOARD OF HEALTH **DATE:** June 26, 2025

RE: Approval of the budget augmentation for Southern Nevada Health District for the fiscal year ending June 30, 2025.

PETITION #33-25

That the Southern Nevada District Board of Health *approve the budget augmentation for the fiscal year ending June 30, 2025 to meet the financial requirements of NRS 354.598005.*

PETITIONERS:

Cassius Lockett, PhD, District Health Officer *CL*
Kim K. Saner, Deputy District Health Officer – Administration *KKS*
Donnie Whitaker, CPA, Chief Financial Officer *DW*

DISCUSSION:

The augmentation procedure as prescribed by NRS 354.598005 defines when to perform an augmentation for a fund.

The increase in total revenue sources (FY2025) in the General Fund budget of \$3,718,370 will provide additional resources to the FY2024-2025 SNHD General Fund Budget. FY2024-2025 appropriations also increased by \$1,312,900 from \$110,559,770 to \$111,872,670.

The projected total FY2025 Grant Fund budget revenue was \$78,880,017 and has decreased to \$55,374,890, a decrease of \$23,505,127 to align with year-to-date actual amounts. FY2024-2025 appropriations decrease from \$85,231,149 to \$62,500,803 to align with year-to-date actual amounts.

To complete the augmentation process, the attached Resolutions to Augment #03-25 for Southern Nevada Health District General Fund Budget and #04-25 for Southern Nevada Health District Grant (Special Revenue). Fund Budget for Fiscal Year Ending June 30, 2025 must be adopted. The Resolutions will be forwarded to the Nevada Department of Taxation after the adoption of the Resolutions to Augment is completed.



FUNDING:

Please see attached Resolutions #03-25 for Southern Nevada Health District General Fund Budget and #04-25 for Southern Nevada Health District Grant (Special Revenue).

**RESOLUTION #03-25**

RESOLUTION TO AUGMENT THE 2024-2025 BUDGET OF Southern Nevada Health District

WHEREAS, total resources of the Southern Nevada Health District (General) Fund, Southern Nevada Health District were budgeted to be \$169,110,608 on July 1, 2024; and

WHERE AS, the total available resources are now determined to be \$172,828,978.

WHEREAS, said additional unanticipated resources are as follows:

Southern Nevada Health District (General) Fund

Ending Fund as of 6/30/2024	\$0
Total Revenues Sources (Increased)	\$3,718,370
Total	<u>\$3,718,370</u>

WHEREAS, there is a need to apply these excess proceeds in the Southern Nevada Health District (General) Fund.

Now, therefore, it is hereby RESOLVED, that Southern Nevada Health District shall augment its 2024-2025 budget by appropriating \$1,312,900 for use in the Southern Nevada Health District (General) Fund, thereby increasing its appropriations from \$110,559,770 to \$111,872,670. A detailed schedule is attached to this Resolution and by reference is made a part thereof.

IT IS FURTHER RESOLVED that the Southern Nevada Health District shall forward the necessary documents to the Department of Taxation, State of Nevada.

PASSED, ADOPTED, AND APPROVED the 26th of June 2025.

AYES:

Scott Black, Bobbette Bond, Nancy Brune,

Pattie Gallo, Monica Larson,

Marilyn Kirkpatrick, Frank Nemec

Scott Nielson, Shondra Summers-Armstrong

Absent:

April Becker, Joe Hardy

NAYS:

By: Marilyn Kirkpatrick, Chair

Southern Nevada District Board of Health

ATTEST:

Marilyn Kirkpatrick

REVENUES	FINAL BUDGET	REVISIONS	REVISED REVENUE RESOURCES
Licenses & Permits			
Business Licenses & Permits			
Business Licenses	29,016,623	607,165	29,623,788
Intergovernmental Revenues			
State Shared Revenues			
Other	37,651,176	-	37,651,176
Charges for Services			
Health			
Other	44,523,621	1,412,292	45,935,913
Miscellaneous			
Interest Earnings	669,772	1,303,128	1,972,900
Other	2,376,588	395,785	2,772,373
SUBTOTAL REVENUE ALL SOURCES	114,237,780	3,718,370	117,956,150
OTHER FINANCING SOURCES			
Operating Transfers in (Sch T)			
SUBTOTAL OTHER FINANCING SOURCES			
BEGINNING FUND BALANCE	54,872,828	-	54,872,828
TOTAL BEGINNING FUND BALANCE	54,872,828	-	54,872,828
Prior Period Adjustments			
Residual Equity Transfers			
TOTAL AVAILABLE RESOURCES	169,110,608	3,718,370	172,828,978
EXPENDITURE BY FUNCTION AND ACTIVITY	FINAL BUDGET	REVISIONS	REVISED EXPENDITURES
Health			
Health District			
Salaries & Wages	48,356,317	1,589,301	49,945,618
Employee Benefits	23,897,602	(1,229,267)	22,668,335
Services & Supplies	37,592,452	917,520	38,509,972
Capital Outlay	713,400	35,345	748,745
SUBTOTAL EXPENDITURES	110,559,770	1,312,900	111,872,670
OTHER USES			
Contingency (not to exceed 3% of total expenditures)	3,000,000	-	3,000,000
Operating Transfers			
To Fund 7060	2,000,000	-	2,000,000
To Fund 7090	6,351,132	774,781	7,125,913
SUBTOTAL OTHER USES	11,351,132	774,781	12,125,913
ENDING FUND BALANCE			
TOTAL ENDING FUND BALANCE	47,199,706	1,630,689	48,830,395
Prior Period Adjustments			
Residual Equity Transfers			
TOTAL FUND COMMITMENTS AND FUND BALANCE	169,110,608	3,718,370	172,828,978

(Local Government)
Schedule B - 7050 Fund

**RESOLUTION #04-25**

RESOLUTION TO AUGMENT THE 2024-2025 BUDGET OF Southern Nevada Health District

WHEREAS, total resources of the Southern Nevada Health District Grant (Special Revenue) Fund, Southern Nevada Health District were budgeted to be \$85,313,230 on July 1, 2024; and

WHERE AS, the total available resources are now determined to be \$62,582,884.

WHEREAS, said net of unanticipated resources are as follows:
Southern Nevada Health District Grant (Special Revenue) Fund

Total Revenues Sources (decreased) \$(22,730,346)

Total \$(22,730,346)

WHEREAS, there is a need to apply these decreases in the Southern Nevada Health District Grant (Special Revenue) Fund.

Now, therefore, it is hereby RESOLVED, that Southern Nevada Health District shall augment its 2024-2025 budget by appropriating (\$22,730,346) for use in the Southern Nevada Health District Grant (Special Revenue) Fund, thereby decreasing its appropriations from \$85,231,149 to \$62,500,803. A detailed schedule is attached to this Resolution and by reference is made a part thereof.

IT IS FURTHER RESOLVED that the Southern Nevada Health District shall forward the necessary documents to the Department of Taxation, State of Nevada.

PASSED, ADOPTED, AND APPROVED the 26th of June 2025.

AYES:

Scott Black, Bobbette Bond, Nancy Brune,

Pattie Gallo, Monica Larson,

Marilyn Kirkpatrick, Frank Nemec

Scott Nielson, Shondra Summers-Armstrong

Absent:

April Becker, Joe Hardy

NAYS:

By: Marilyn Kirkpatrick, Chair

Southern Nevada District Board of Health

ATTEST:

A handwritten signature in blue ink, appearing to read "Marilyn Kirkpatrick", is written over the "ATTEST:" line.

REVENUES	FINAL BUDGET	REVISIONS	REVISED REVENUE RESOURCES
Intergovernmental Revenues			
Federal Grants			
Department of Health & Human Services	62,846,952	(14,845,527)	48,001,425
Department of Homeland Security	129,394	12,839	142,233
Department of Justice	736,995	(7,377)	729,618
Department of Treasury	-	69,957	69,957
Environmental Protection Agency	264,722	(125,162)	139,560
State Grants			
Departement of Health & Human Services	7,107,200	(3,055,649)	4,051,551
Other Grants			
Clark County	4,578,683	(4,264,657)	314,026
City of Las Vegas	800,000	-	800,000
Other	2,416,070	(1,289,550)	1,126,520
SUBTOTAL REVENUE ALL SOURCES	78,880,017	(23,505,127)	55,374,890
OTHER FINANCING SOURCES			
Operating Transfers in (Sch T)			
From Fund 7050	6,351,132	774,781	7,125,913
SUBTOTAL OTHER FINANCING SOURCES	6,351,132	774,781	7,125,913
BEGINNING FUND BALANCE	82,081	-	82,081
TOTAL BEGINNING FUND BALANCE	82,081	-	82,081
Prior Period Adjustments			
Residual Equity Transfers			
TOTAL AVAILABLE RESOURCES	85,313,230	(22,730,346)	62,582,884
EXPENDITURE BY FUNCTION AND ACTIVITY	FINAL BUDGET	REVISIONS	REVISED EXPENDITURES
Health			
Health District			
Salaries & Wages	20,979,555	(1,016,002)	19,963,553
Employee Benefits	10,116,633	(1,107,906)	9,008,727
Services & Supplies	43,614,752	(12,843,966)	30,770,786
Capital Outlay	10,520,209	(7,762,472)	2,757,737
SUBTOTAL EXPENDITURES	85,231,149	(22,730,346)	62,500,803
OTHER USES			
Contingency (not to exceed 3% of total expenditures)			
Operating Transfers			
SUBTOTAL OTHER USES			
ENDING FUND BALANCE	82,081	0	82,081
TOTAL ENDING FUND BALANCE	82,081	-	82,081
Prior Period Adjustments			
Residual Equity Transfers			
TOTAL FUND COMMITMENTS AND FUND BALANCE	85,313,230	(22,730,346)	62,582,884

(Local Government)
Schedule B - 7090 Fund



FY 2024-2025 June Budget Augmentation

Board of Health Meeting

June 26, 2025



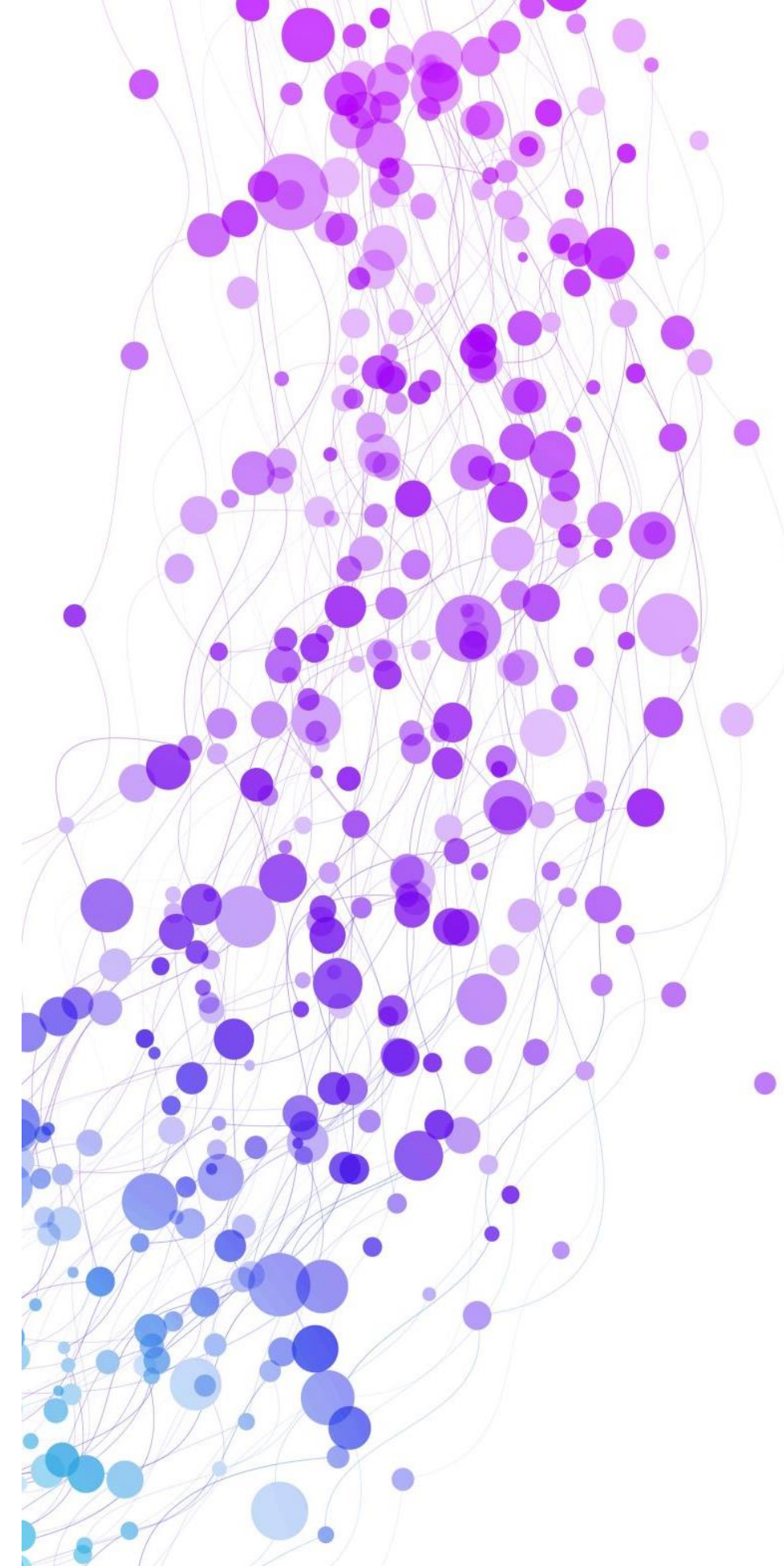
Definition

A “**Budget augmentation**” is a procedure for increasing appropriations of a fund with the express intent of employing previously unbudgeted resources of the fund for carrying out the increased appropriations.

Nevada Revised Statute (NRS)

354.626

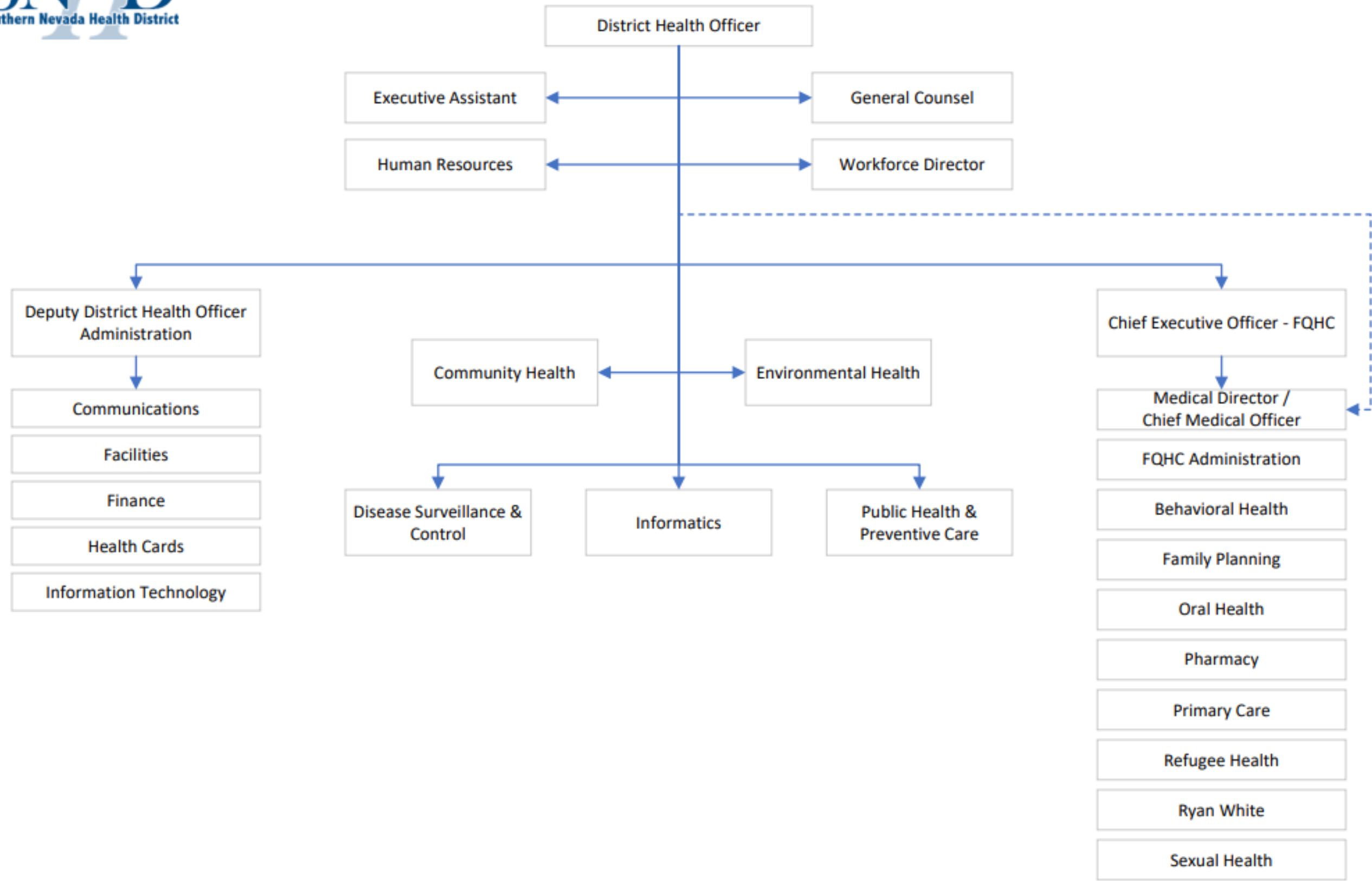
Unlawful expenditure of money in excess of amount appropriated; penalties; exceptions, states that “No governing body or member thereof, officer, office, department, or agency may, during any fiscal year, expend or contract to expend any money or incur any liability, or enter into any contract which by its terms involves the expenditure of money, in excess of the amounts appropriated for that function, other than bond repayments, medium-term obligation of repayments and any other long-term contract expressly authorized by law.”



SNHD ORGANIZATION CHART



SNHD Organizational Chart
Effective: 02/24/2025

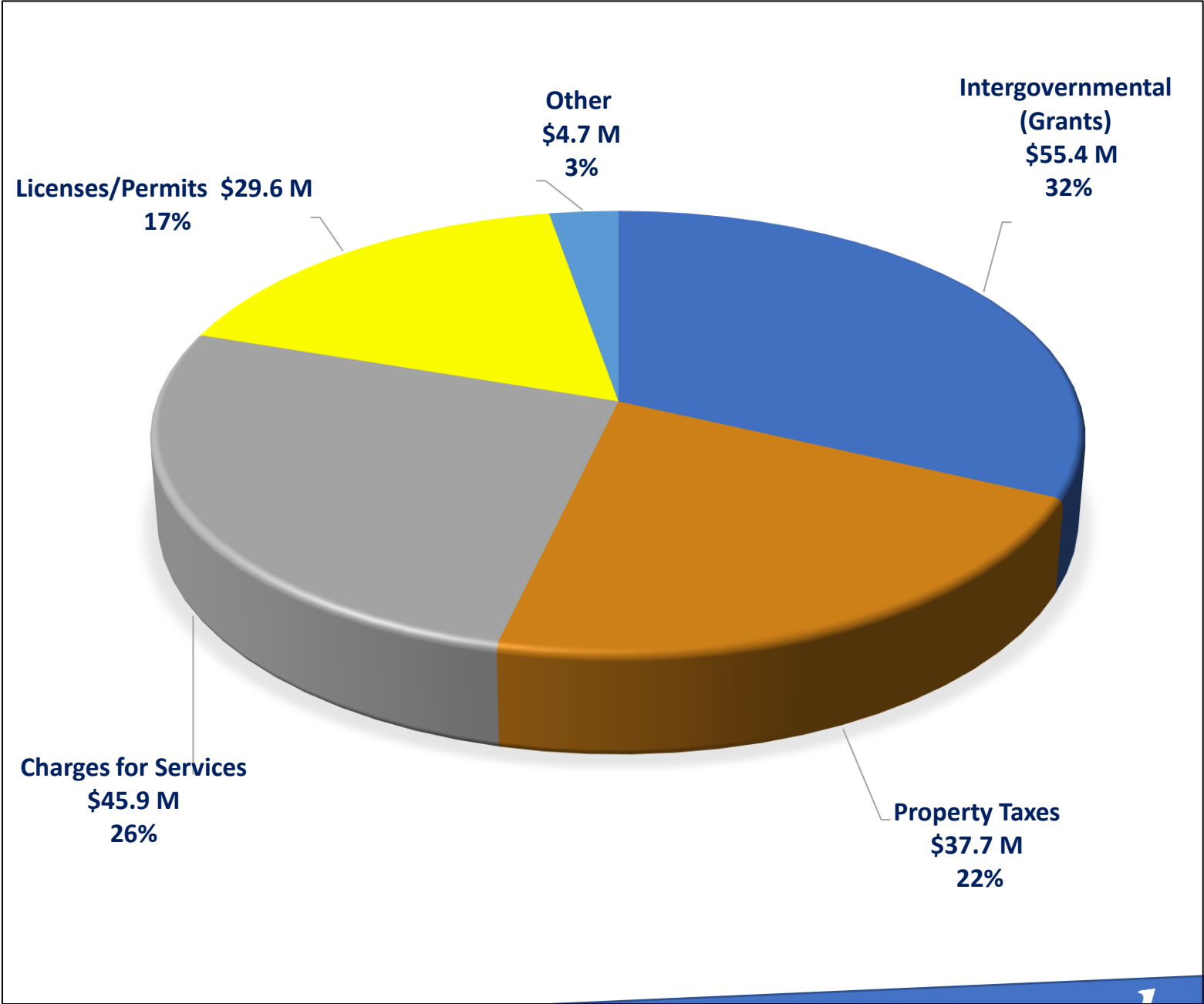
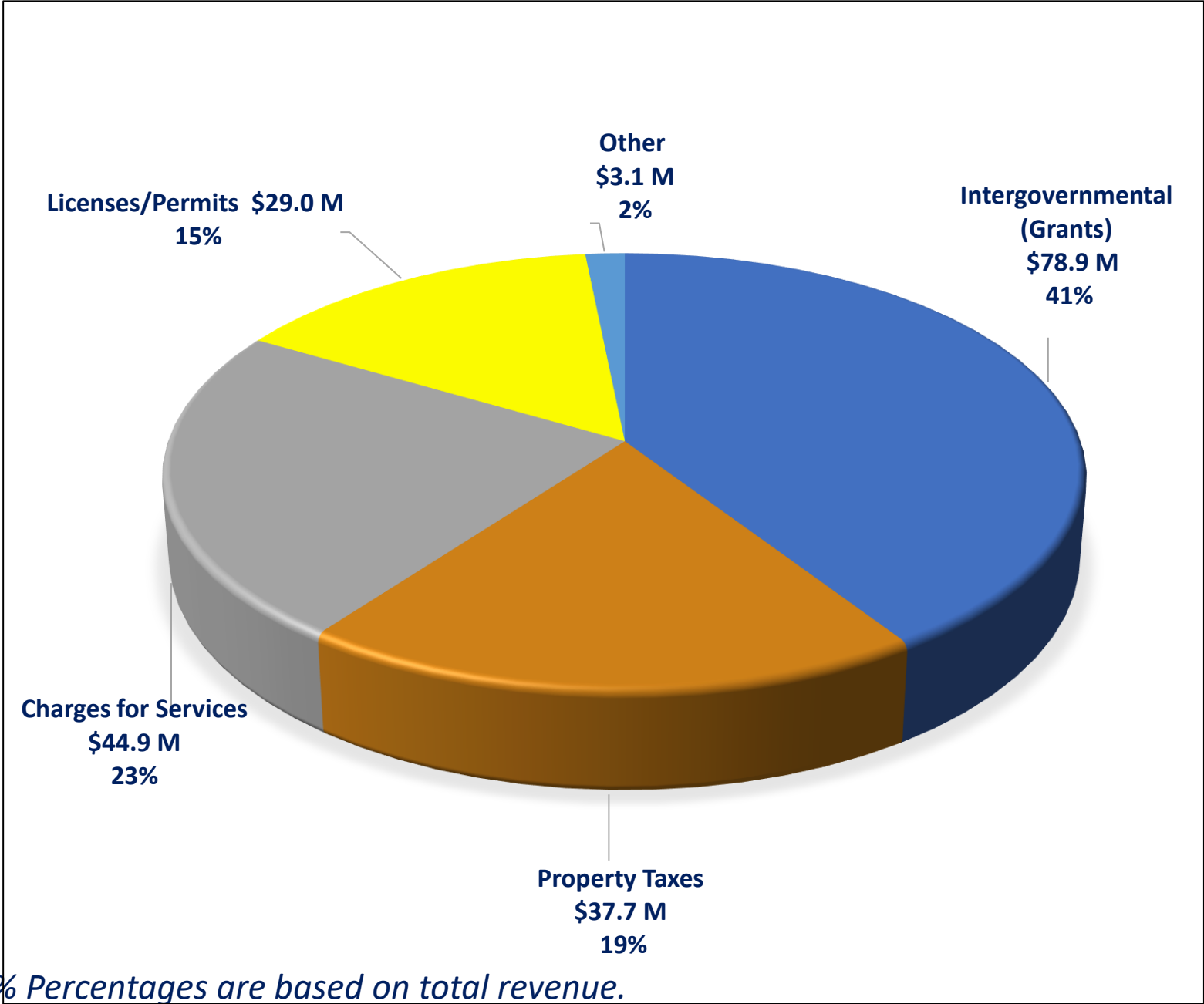


REVENUES

COMBINED GF & SRF REVENUES BY SOURCE – comparison

FY2025 January Budget
Augmentation Revenue
\$193.1M

FY2025 June Augmentation
Budget Revenue
\$173.3M



% Percentages are based on total revenue.

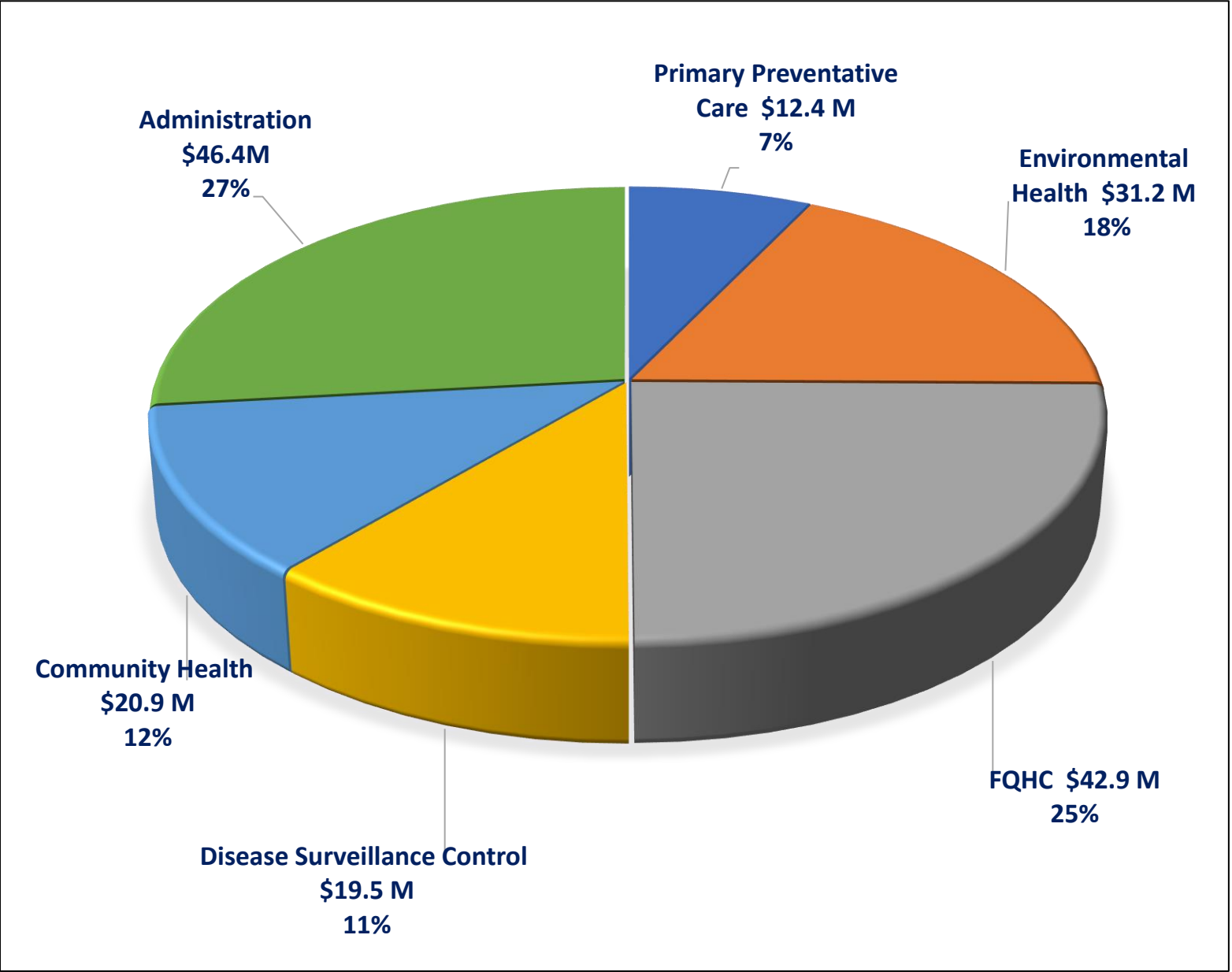
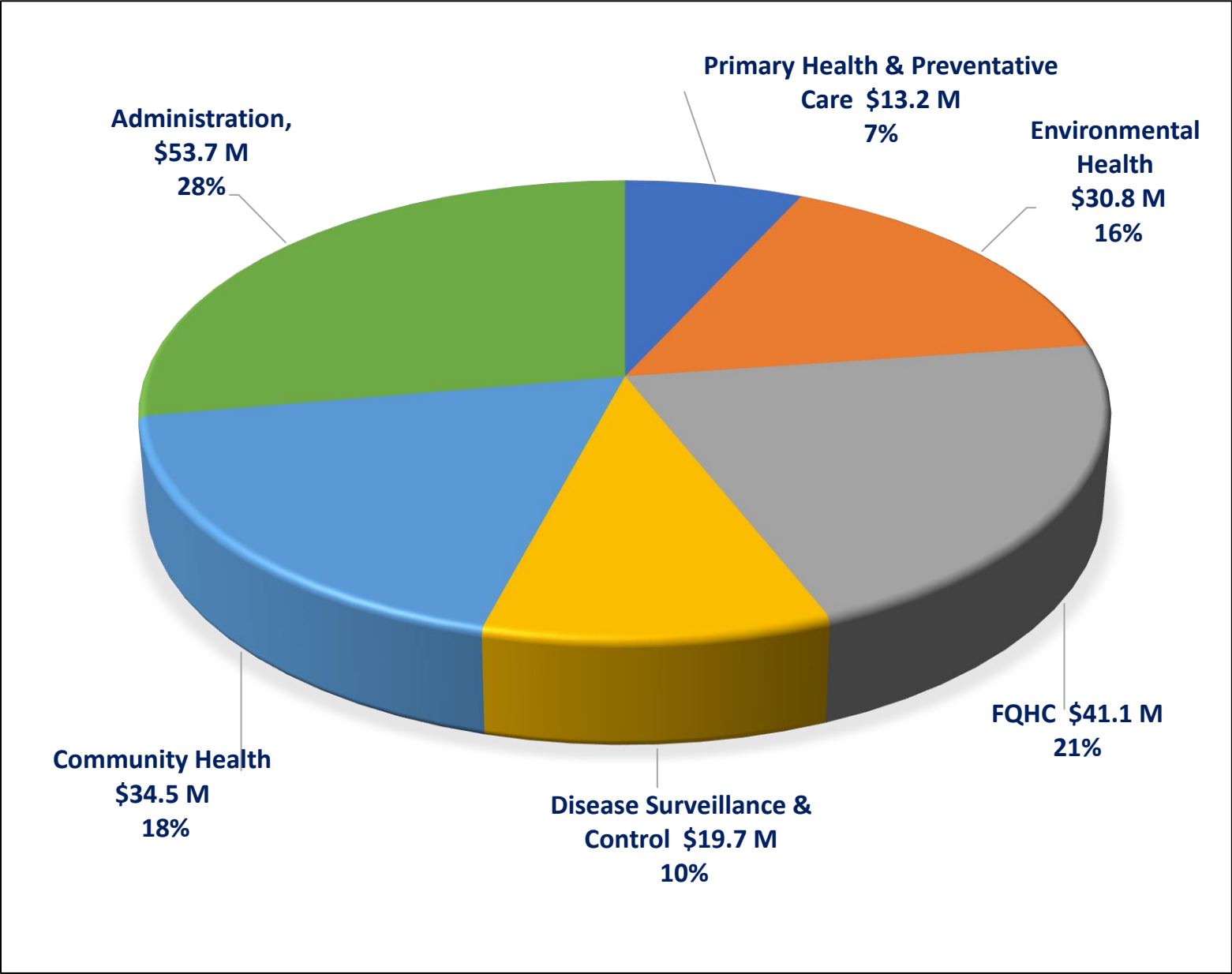
**Does not include Transfers In

REVENUES

COMBINED REVENUES BY DIVISION – comparison

FY2025 January Budget
Augmentation Revenue
\$193.1 M

FY2025 June Augmentation
Budget Revenues
\$173.3M



% Percentages are based on total revenue.

**Does not include Transfers In

REVENUES

GENERAL & GRANTS FUND HIGHLIGHTS



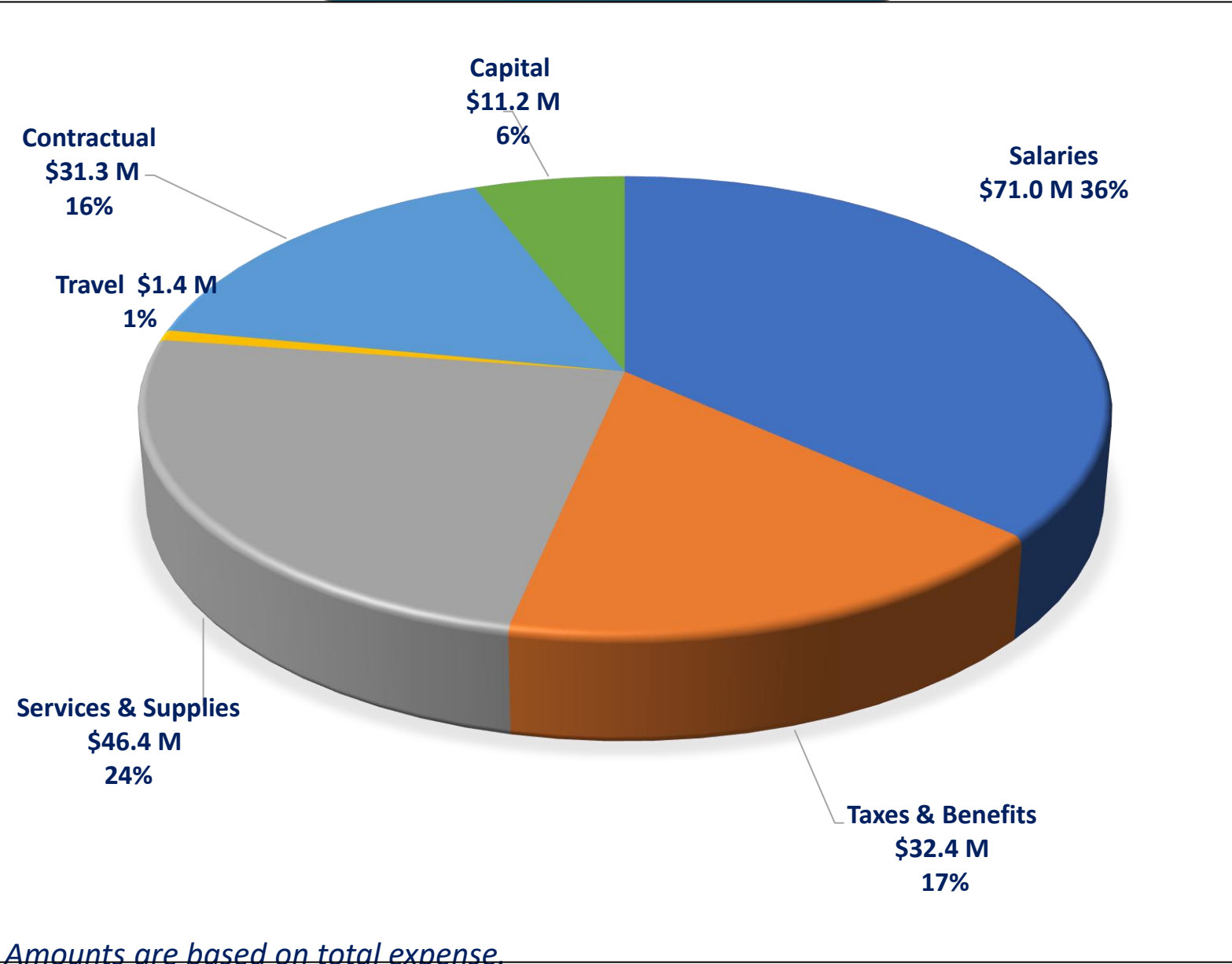
Special Revenue (Grants) decreased by \$23.5M primarily due to changes resulting from the impact of the Covid Health Disparity (CVDIS) Grant ending (\$3.9M), the Enhancing Detection and Expansion grants being reduced (\$12.3M), and the lab expansion grants and SB118 funding being moved to FY2026 (\$8.1M), as well as reductions in Ryan White funding, offsetting by an increase in new Nevada State Opioid Response (SOR) grant (\$1.5M).

Pharmacy revenue (FQHC Gen Fund), a major component of charges for services, is augmented at **\$31.3M**, an increase of \$2.2M, compared to Jan 2025 augmented budget of \$29.1M.

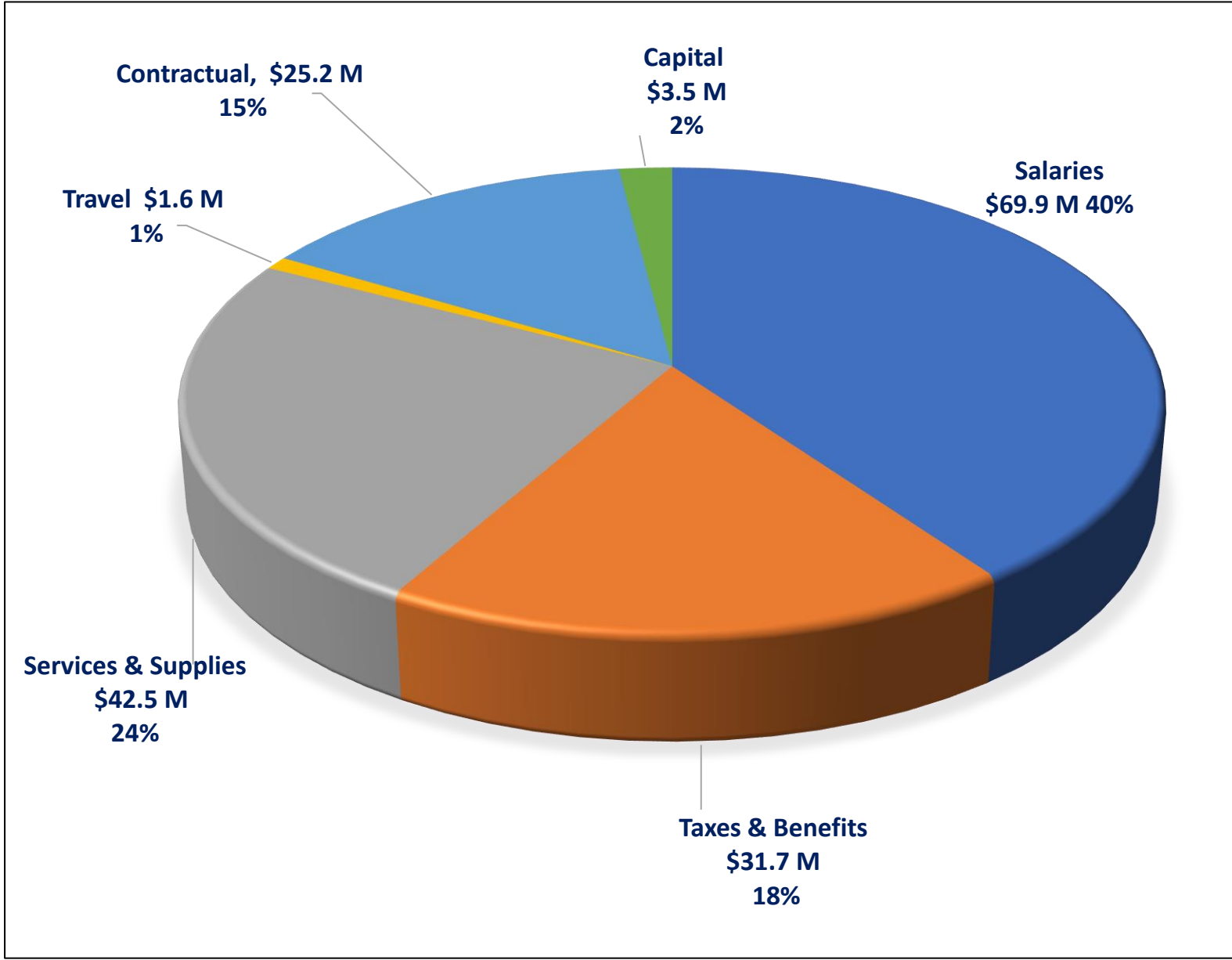
EXPENDITURES

COMBINED EXPENSES BY SOURCE – comparison

FY2025 January Budget
Augmentation Expense
\$193.7 M



FY2025 June Augmentation
Budget Expense
\$174.4M



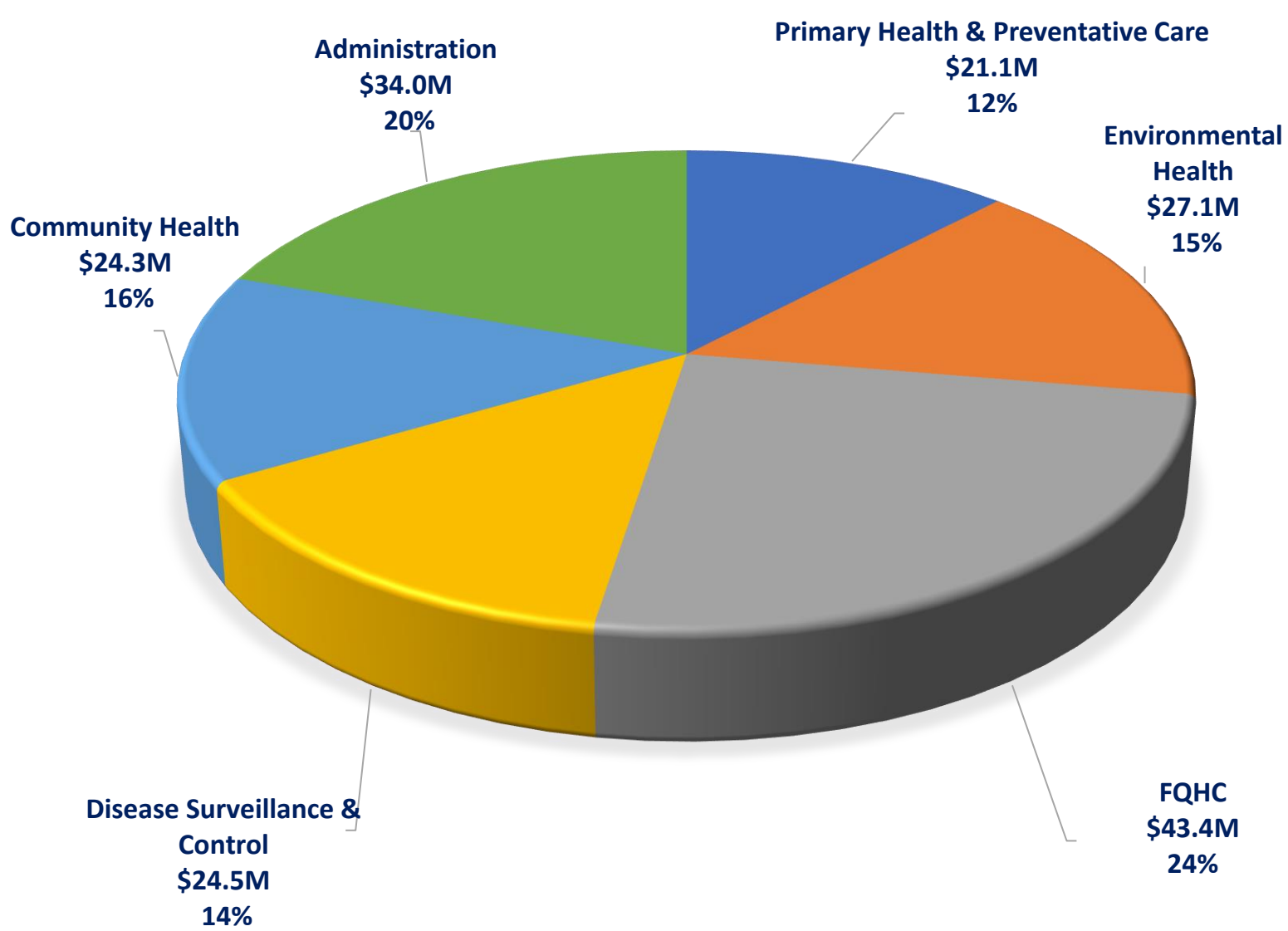
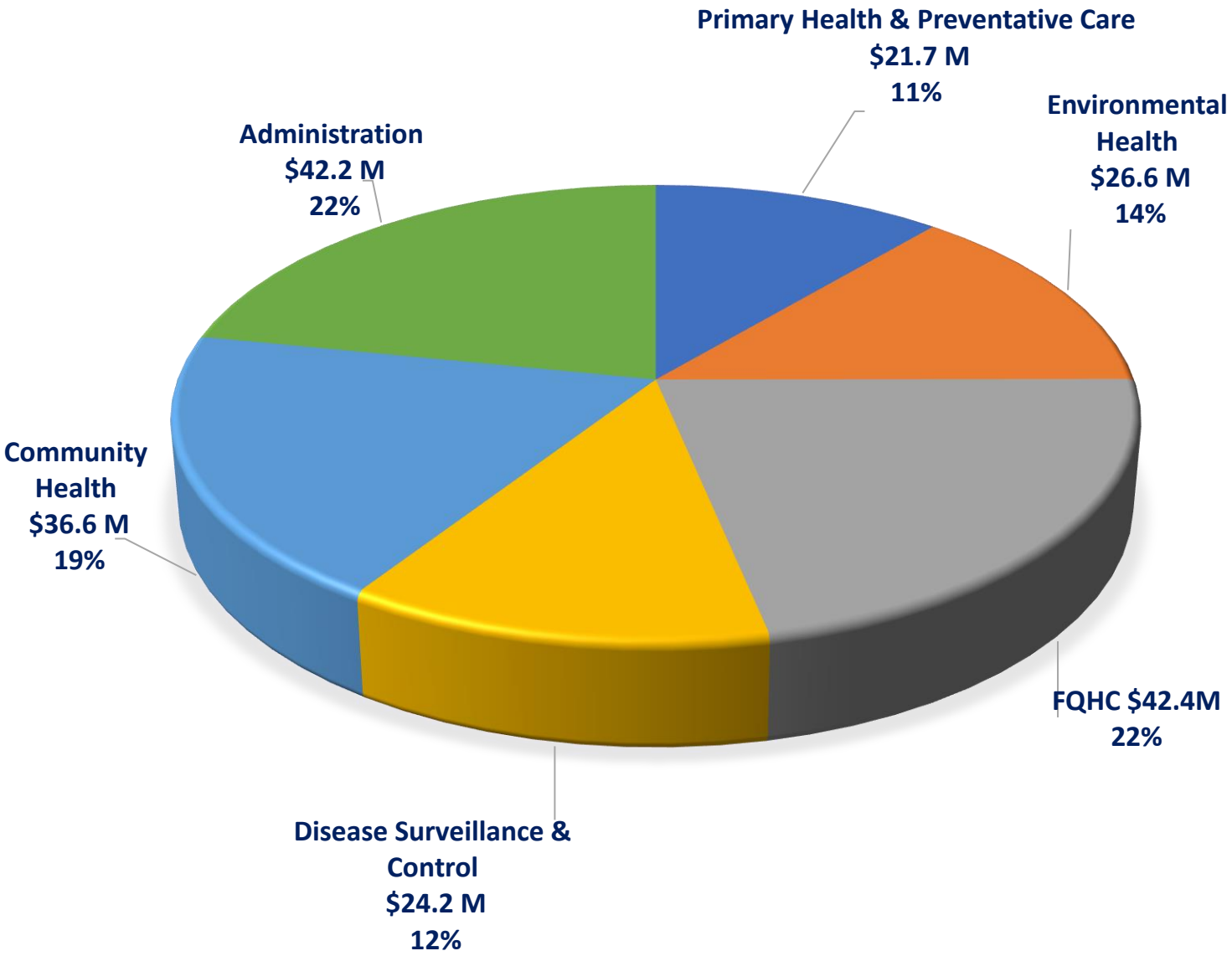
\$ Amounts are based on total expense.
**Does not include Transfers Out and Cost Allocations
**Does not include Transfers Out to Capital of \$2M

EXPENDITURES

COMBINED EXPENSES BY DIVISION – comparison

FY2025 January Budget
Augmentation Expense
\$193.7 M

FY2025 June Augmentation
Budget Expense
\$174.4M



\$ Amounts are based on total expense.
**Does not include Transfers Out and Cost Allocations
**Does not include Transfers Out to Capital of \$2M

EXPENDITURES

General & Grants Fund HIGHLIGHTS



General Fund and Special Revenue expenditures total augmented budget is at **\$174.4M** compared to \$193.7M in the Jan 2025 augmented budget, a decrease of \$19.3M. Special Revenue (Grants) decreases primarily due to the changes resulting from the impact of the Covid Health Disparity (CVDIS) Grant ending (\$3.9M), the Enhancing Detection and Expansion grants being reduced (\$11.2M), the lab expansion and SB118 expenditures moving to FY2026 (\$6.8M), offset by increases in new Nevada State Opioid Response (SOR) grant expenditures (\$1.5M) and other miscellaneous grant expenditures.



Pharmacy medication expenses increased from \$23.9M to \$25.1M, a **\$1.3M** increase to align with actuals which is trending higher than the Jan 2025 augmented budget.



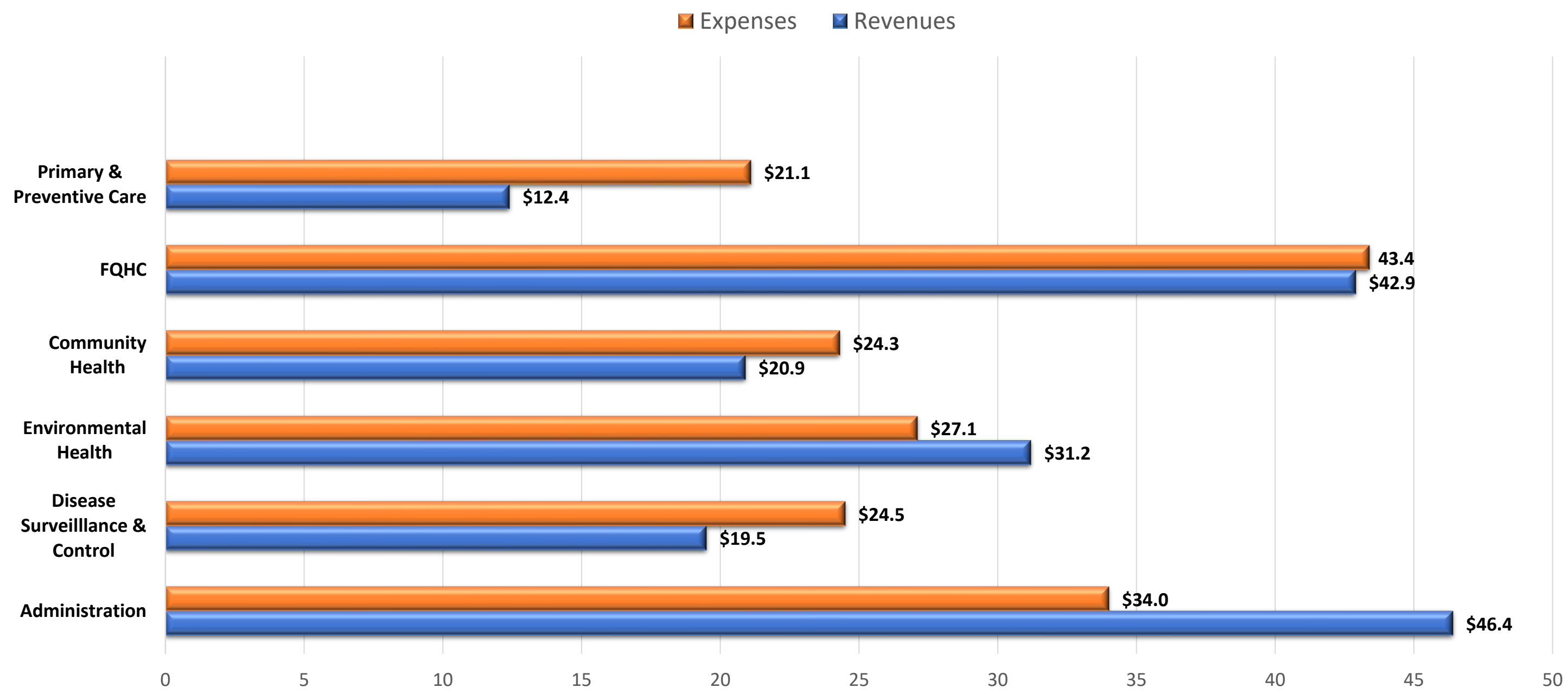
Vaccines expenses decreased from \$6.4M to \$5.8M, a **\$0.6M** decrease to align with actuals which is partially offset by changes in revenue.



Total salaries and benefits for General & Grants Fund is **\$101.6M**, a decrease of **\$1.8M** from the Jan 2025 augmented budget of \$103.4M. This decrease is primarily due to vacant positions not being filled.

REVENUES VS. EXPENDITURES

COMBINED FUNDS BY DIVISION EXCLUDING COST ALLOCATION



PERSONNEL

Southern Nevada Health District FY25 FTE Count					
Division	2024/2025 ADOPTED	2024/2025 AMENDED (JAN)	2024/2025 AMENDED (JUN)	FTE Change	% FTE CHANGE Amended (Jan) vs Amended (June)
Public Health & Preventive Care	123.5	115.7	110.0	-5.7	-4.9%
Environmental Health	203.0	205.0	200.0	-5.0	-2.4%
FQHC	121.0	121.7	111.5	-10.2 ²	-8.4%
Disease Surveillance & Control	125.0	126.0	124.0	-2.0	-1.6%
Community Health	104.0	103.0	98.0	-5.0	-4.9%
Administration	190.0	192.0	185.5	-6.5	-3.4%
Total:	866.5³	863.3³	829.0³	-34.3¹	-4.0%
1 - Vacant positions not filled or placed on hold 2 - Dental program placed on hold; Vacant positions not filled or placed on hold 3 - Represents FTE with Adopted, Amended (January), Amended (June) headcount of 876, 877, and 874, respectively					

Southern Nevada Health District FY25 Head Count					
Division	2024/2025 ADOPTED HEADCOUNT	2024/2025 AMENDED (JAN)	2024/2025 AMENDED (JUN)	Headcount Change	% FTE CHANGE Amended (Jan) vs Amended (June)
Public Health & Preventive Care	116	116.0	115.0	-1.0	0
Environmental Health	205	205.0	204.0	-1.0	0
FQHC	134	134.0	134.0	0.0	0
Disease Surveillance & Control	126	127.0	126.0	-1.0	0
Community Health	103	103.0	103.0	0.0	0
Administration	192	192.0	192.0	0.0	0
Total:	876	877	874	-3	0

GENERAL FUND

General Fund	FY24 Actual	FY25 Amended - Jan	FY25 Amended - June
Beginning Fund Balance	47,091,967	54,872,828	54,872,828
Revenues	104,502,746	114,237,780	117,956,150
Expenditures	96,721,885	121,910,903	123,998,584
Change in Fund Balance	7,780,861	(7,673,123)	(6,042,434)
Ending Fund Balance	54,872,828	47,199,705	48,830,394

Change in Fund Balance includes \$3M contingency, cost allocation and transfer out to Special Revenue and Capital Project funds for FY 2025.

SPECIAL REVENUE FUND

Special Revenue	FY24 Actual	FY25 Amended - Jan	FY25 Amended - June
Beginning Fund Balance	105,306	82,081	82,081
Revenues	64,278,737	85,231,149	62,500,803
Expenditures	64,301,962	85,231,149	62,500,803
Change in Fund Balance	(23,225)	-	-
Ending Fund Balance	82,081	82,081	82,081

Change in Fund Balance includes cost allocation and transfers in from General Fund.

CAPITAL PROJECTS FUND

Capital Projects Fund	FY24 Actual	FY25 Amended - Jan	FY25 Amended - June
Beginning Fund Balance	1,405,046	2,730,175	2,730,175
Revenues	2,148,872	2,070,000	2,070,000
Expenditures	823,743	1,800,575	1,800,575
Change in Fund Balance	1,325,129	269,425	269,425
Ending Fund Balance	2,730,175	2,999,600	2,999,600

BOND RESERVE FUND

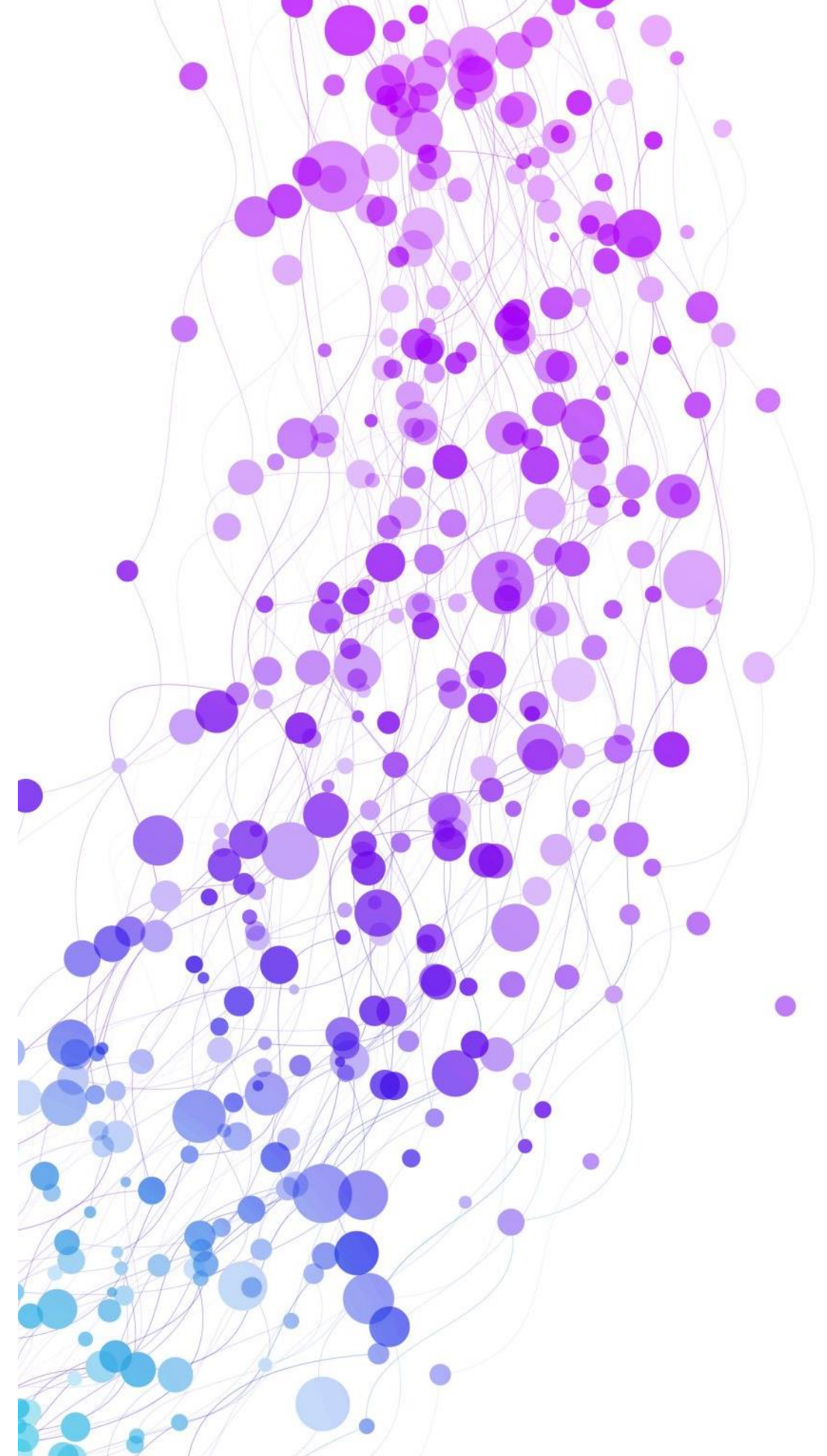
Bond Reserve Fund	FY24 Actual	FY25 Amended - Jan	FY25 Amended - June
Beginning Fund Balance	3,024,523	3,042,808	3,042,808
Revenues	18,285	30,000	30,000
Expenditures	-	-	-
Change in Fund Balance	18,285	30,000	30,000
Ending Fund Balance	3,042,808	3,072,808	3,072,808

INTERNAL SERVICE FUND

Internal Service Fund	FY24 Actual	FY25 Amended - Jan	FY25 Amended - June
Beginning Fund Balance	86,550	91,295	91,295
Revenues	4,745	1,500	1,500
Expenditures	-	500	500
Change in Fund Balance	4,745	1,000	1,000
Ending Fund Balance	91,295	92,295	92,295

RECOMMENDATION

- Approval of the FY 2025 June budget augmentation as presented.
 - ❖ Petition #33-25
 - 1. Resolution #03-25 – General Fund
 - 2. Resolution #04-25 – Special Revenue Fund
- Copies to be submitted to Clark County and State of Nevada, pending further instructions.





memorandum

To: D.J. Whitaker, Southern Nevada Health District
From: Jennifer Green, Director of Budget and Financial Planning
Subject: Fiscal Year 2026 Budget Pages
Date: May 6, 2025

To assure that the budget information forwarded to the Budget Office is accurately presented in the Final Budget document, the **Health District's Schedules B for Funds 7050, 7060, 7070, 7090, and Schedules F-1 & F-2 for fund 7620** are attached for your review and approval.

If you agree with the information presented on the attached, please sign and date below and return a pdf of this signed memo and the attached budget page to me by **Noon, Tuesday, May 13, 2025**.

If you do not agree with the information presented on the attached, please mark your changes on the attached pages and PDF the information to me. The changes will be made to the schedules and resent back to you for final review.

Note, there is a property tax revision that is different from the Final Budget currently approved by the governing board that will be presented to the Board of Health at a future meeting.

Signature

05/13/2025

Date

Donnie Whitaker, CFO

Print Name and Title

<u>REVENUES</u>	(1)	(2)	(3) (4) BUDGET YEAR ENDING 06/30/2026	
	ACTUAL PRIOR YEAR ENDING 06/30/2024	ESTIMATED CURRENT YEAR ENDING 06/30/2025	TENTATIVE APPROVED	FINAL APPROVED
Licenses & Permits				
Business Licenses & Permits				
Business Licenses	27,422,167	29,016,623	29,908,723	29,908,723
Intergovernmental Revenues				
State Shared Revenues				
Other	34,088,562	37,651,176	41,508,419	41,508,419
Charges for Services				
Health				
Other	35,119,778	44,523,621	45,259,641	48,356,635
Miscellaneous				
Interest Earnings	1,971,853	669,772		
Other	5,900,386	2,376,588	3,979,166	4,484,991
Subtotal	7,872,239	3,046,360	3,979,166	4,484,991
Subtotal Revenues	104,502,746	114,237,780	120,655,949	124,258,768
OTHER FINANCING SOURCES (specify)				
Operating Transfers In (Schedule T)				
Leases Issued	1,328,621			
Subscriptions	583,535			
BEGINNING FUND BALANCE	47,091,967	54,872,828	47,199,705	47,199,705
Prior Period Adjustments				
Residual Equity Transfers				
TOTAL BEGINNING FUND BALANCE	47,091,967	54,872,828	47,199,705	47,199,705
TOTAL AVAILABLE RESOURCES	153,506,869	169,110,608	167,855,654	171,458,473

Clark County
(Local Government)

SCHEDULE B

Fund 7050
Southern Nevada Health District

<u>EXPENDITURES</u>	(1)	(2)	(3) (4) BUDGET YEAR ENDING 06/30/2026	
	ACTUAL PRIOR YEAR ENDING 06/30/2024	ESTIMATED CURRENT YEAR ENDING 06/30/2025	TENTATIVE APPROVED	FINAL APPROVED
Health				
Health District				
Salaries & Wages	43,476,981	48,356,317	55,159,015	52,682,295
Employee Benefits	19,182,507	23,897,602	26,074,679	26,149,735
Services & Supplies	26,489,610	37,592,452	37,174,613	37,772,813
Capital Outlay	2,470,015	713,400	685,000	704,580
Subtotal Expenditures	91,619,113	110,559,771	119,093,307	117,309,423
OTHER USES				
Contingency (not to exceed 3% of Total Expenditures)				
Reserves		3,000,000	3,000,000	
Operating Transfers Out (Schedule T)				
To Fund 7060 (SNHD Capital Improvement)	2,000,000	2,000,000	3,000,000	3,000,000
To Fund 7090 (SNHD Grant)	5,014,928	6,351,132	9,434,711	8,779,649
Subtotal	7,014,928	8,351,132	12,434,711	11,779,649
ENDING FUND BALANCE	54,872,828	47,199,705	33,327,636	42,369,401
TOTAL FUND COMMITMENTS AND FUND BALANCE	153,506,869	169,110,608	167,855,654	171,458,473

Clark County
(Local Government)

SCHEDULE B

Fund 7050
Southern Nevada Health District

<u>REVENUES</u>	(1)	(2)	(3) (4) BUDGET YEAR ENDING 06/30/2026	
	ACTUAL PRIOR YEAR ENDING 06/30/2024	ESTIMATED CURRENT YEAR ENDING 06/30/2025	TENTATIVE APPROVED	FINAL APPROVED
Miscellaneous				
Interest Earnings	148,872	70,000	70,000	109,559
Subtotal Revenues	148,872	70,000	70,000	109,559
OTHER FINANCING SOURCES (specify)				
Operating Transfers In (Schedule T)				
From Fund 7050 (Southern Nevada Health District)	2,000,000	2,000,000	3,000,000	3,000,000
BEGINNING FUND BALANCE	1,405,046	2,730,175	2,999,600	2,999,600
Prior Period Adjustments				
Residual Equity Transfer				
TOTAL BEGINNING FUND BALANCE	1,405,046	2,730,175	2,999,600	2,999,600
TOTAL AVAILABLE RESOURCES	3,553,918	4,800,175	6,069,600	6,109,159
<u>EXPENDITURES</u>				
Health				
Health District				
Services and Supplies	303,956	493,000	1,495,000	219,000
Capital Outlay	519,787	1,307,575	1,451,000	2,592,000
Subtotal Expenditures	823,743	1,800,575	2,946,000	2,811,000
OTHER USES				
Contingency (not to exceed 3% of Total Expenditures)				
Operating Transfers Out (Schedule T)				
ENDING FUND BALANCE	2,730,175	2,999,600	3,123,600	3,298,159
TOTAL FUND COMMITMENTS AND FUND BALANCE	3,553,918	4,800,175	6,069,600	6,109,159

Clark County
(Local Government)

SCHEDULE B

Fund 7060
Southern Nevada Health District Capital Improvement

<u>REVENUES</u>	(1)	(2)	(3)	(4)
	ACTUAL PRIOR YEAR ENDING 06/30/2024	ESTIMATED CURRENT YEAR ENDING 06/30/2025	BUDGET YEAR ENDING 06/30/2026	
			TENTATIVE APPROVED	FINAL APPROVED
Miscellaneous				
Interest Earnings	18,285	30,000	212,551	96,620
Subtotal Revenues	18,285	30,000	212,551	96,620
OTHER FINANCING SOURCES (specify)				
Operating Transfers In (Schedule T)				
BEGINNING FUND BALANCE	3,024,523	3,042,808	3,072,808	3,072,808
Prior Period Adjustments				
Residual Equity Transfer				
TOTAL BEGINNING FUND BALANCE	3,024,523	3,042,808	3,072,808	3,072,808
TOTAL AVAILABLE RESOURCES	3,042,808	3,072,808	3,285,359	3,169,428
<u>EXPENDITURES</u>				
Subtotal Expenditures	0	0	0	0
OTHER USES				
Contingency (not to exceed 3% of Total Expenditures)				
Operating Transfers Out (Schedule T)				
ENDING FUND BALANCE	3,042,808	3,072,808	3,285,359	3,169,428
TOTAL FUND COMMITMENTS AND FUND BALANCE	3,042,808	3,072,808	3,285,359	3,169,428

Clark County
(Local Government)

SCHEDULE B

Fund 7070
Southern Nevada Health District Bond Reserve

<u>REVENUES</u>	(1)	(2)	(3)	(4)
	ACTUAL PRIOR YEAR ENDING 06/30/2024	ESTIMATED CURRENT YEAR ENDING 06/30/2025	BUDGET YEAR ENDING 06/30/2026	
			TENTATIVE APPROVED	FINAL APPROVED
Intergovernmental Revenues				
Federal Grants				
Department of Agriculture	27,301			
Department of Health & Human Services	54,535,479	62,846,952	44,636,657	46,624,478
Department of Homeland Security	115,532	129,394	142,333	556,947
Department of Justice	238,835	736,995	507,254	508,045
Department of Treasury	1,654,801		1,383,324	1,148,554
Environmental Protection Agency	139,403	264,722	150,000	160,832
State Grants				
Department of Health & Human Services	1,071,403	7,107,200	8,747,156	7,180,937
Other Grants				
Clark County	252,557	4,578,683	5,030,066	4,427,760
City of Las Vegas		800,000	139,985	146,726
Other	1,228,498	2,416,070	1,019,140	1,127,288
Subtotal Revenues	59,263,809	78,880,016	61,755,915	61,881,567
OTHER FINANCING SOURCES (specify)				
Operating Transfers In (Schedule T)				
From Fund 7050 (Southern Nevada Health District)	5,014,928	6,351,132	9,434,711	8,779,649
BEGINNING FUND BALANCE	105,306	82,081	82,081	82,081
Prior Period Adjustments				
Residual Equity Transfer				
TOTAL BEGINNING FUND BALANCE	105,306	82,081	82,081	82,081
TOTAL AVAILABLE RESOURCES	64,384,043	85,313,229	71,272,707	70,743,297
<u>EXPENDITURES</u>				
Health				
Health District				
Salaries & Wages	21,311,922	20,979,555	19,713,920	21,764,330
Employee Benefits	9,578,819	10,116,633	11,101,663	10,894,846
Services & Supplies	31,400,769	43,614,751	30,718,908	28,332,977
Capital Outlay	2,010,452	10,520,209	9,656,135	9,669,063
Subtotal Expenditures	64,301,962	85,231,148	71,190,626	70,661,216
OTHER USES				
Contingency (not to exceed 3% of Total Expenditures)				
Operating Transfers Out (Schedule T)				
ENDING FUND BALANCE	82,081	82,081	82,081	82,081
TOTAL FUND COMMITMENTS AND FUND BALANCE	64,384,043	85,313,229	71,272,707	70,743,297

Clark County
(Local Government)

SCHEDULE B

Fund 7090
Southern Nevada Health District Grant

<u>PROPRIETARY FUND</u>	(1)	(2)	(3)	(4)
	ACTUAL PRIOR YEAR ENDING 06/30/2024	ESTIMATED CURRENT YEAR ENDING 06/30/2025	BUDGET YEAR ENDING 06/30/2026	
			TENTATIVE APPROVED	FINAL APPROVED
Total Operating Revenue	0	0	0	0
OPERATING EXPENSE				
Health				
Services & Supplies		500		
Depreciation/Amortization				
Total Operating Expense	0	500	0	0
Operating Income or (Loss)	0	(500)	0	0
NONOPERATING REVENUES				
Interest Earnings	4,745	1,500		794
Total Nonoperating Revenues	4,745	1,500	0	794
NONOPERATING EXPENSES				
Total Nonoperating Expenses	0	0	0	0
Net Income (Loss) before				
Operating Transfers	4,745	1,000	0	794
Operating Transfers (Schedule T)				
In				
Out				
Net Operating Transfers	0	0	0	0
NET INCOME (LOSS)	4,745	1,000	0	794

Clark County
(Local Government)

SCHEDULE F-1 REVENUES, EXPENSES AND NET INCOME

Fund 7620
Southern Nevada Health District - Proprietary Fund

<u>PROPRIETARY FUND</u>	(1)	(2)	(3) (4) BUDGET YEAR ENDING 06/30/2026	
	ACTUAL PRIOR YEAR ENDING 06/30/2024	ESTIMATED CURRENT YEAR ENDING 06/30/2025	TENTATIVE APPROVED	FINAL APPROVED
A. CASH FLOWS FROM OPERATING ACTIVITIES: Cash paid for services & supplies		(500)		
a. Net cash provided by (or used for) operating activities	0	(500)	0	0
B. CASH FLOWS FROM NONCAPITAL FINANCING ACTIVITIES: Transfers from other funds				
b. Net cash provided by (or used for) noncapital financing activities	0	0	0	0
C. CASH FLOWS FROM CAPITAL AND RELATED FINANCING ACTIVITIES:				
c. Net cash provided by (or used for) capital and related financing activities	0	0	0	0
D. CASH FLOWS FROM INVESTING ACTIVITIES: Interest earnings	4,745	1,500	0	794
d. Net cash provided by (or used in) investing activities	4,745	1,500	0	794
NET INCREASE (DECREASE) in cash and cash equivalents (a+b+c+d)	4,745	1,000	0	794
CASH AND CASH EQUIVALENTS AT JULY 1, 20xx	86,550	91,295	92,295	92,295
CASH AND CASH EQUIVALENTS AT JUNE 30, 20xx	91,295	92,295	92,295	93,089

Clark County
(Local Government)

SCHEDULE F-2 STATEMENT OF CASH FLOWS

Fund 7620
Southern Nevada Health District - Proprietary Fund






TO: SOUTHERN NEVADA DISTRICT BOARD OF HEALTH **DATE:** June 26, 2025

RE: *Fee Increase for Food Handler Safety Training Cards and Certified Food Safety Manager Cards*

PETITION # 34-25

That the Southern Nevada District Board of Health *approve a graduated increase in the fees payable to receive a Food Handler Safety Training Card or a Certified Food Safety Card from the current \$20 price to \$25 in calendar year 2026 and then to \$30 in calendar year 2027.*

PETITIONERS:

Cassius Lockett, PhD, *District Health Officer* 
Kim Saner, *Deputy District Health Officer, Administration* 
Cory Burgess, *Health Cards Supervisor* 

DISCUSSION:

People working in a food handling capacity in Clark County are required by Southern Nevada Health District's Food Regulations to possess either a Food Handler Safety Training Card or have food protection manager certification (for which we offer a Certified Food Safety Manager Card). Both cards currently have a fee of \$20 payable upon passing the required food safety testing. More than 100,000 cards are issued annually.

To cover increasing personnel and materials costs to issue these cards, we are proposing a total increase from the current \$20 fee to \$30 through \$5 annual increases. Beginning January 1, 2026, the card fee would increase to \$25. Beginning January 1, 2027, the card fee would increase to \$30. Fees for retests and replacement cards would not increase.

If approved, this would be the first fee increase since October 1999. At that time, a hepatitis A vaccine became a requirement to obtain a food handler card, and the card fee increased from \$10 to \$50. The fee was reduced to \$40 in July 2012 and further reduced to \$20 in July 2018 as the testing process evolved.

FUNDING:

None.



▶ Food Handler Safety Training Card

FEE INCREASE PROPOSAL

Clark County Health District launched its food handler safety program in November 1963.

At that time, Clark County Ordinance 186 established a requirement for a food handler program. A traveling “medicine show” moved from hotel to hotel providing a two-hour program of film, lectures and demonstrations to educate food handlers on the importance of food safety.

Ordinance 186 was later revised to subject food handlers to an examination by the Health District.

After September 1, 1977, no person may be employed as a food handler in Clark County unless that person within the previous two years has submitted to an examination and such other health instructions as may be prescribed by the Clark County district board of health.

The food handler card process has evolved with prices decreasing in the last 25 years.

▶ Pre-1999 \$5–10	▶ 1999–2012 \$50	▶ 2012–2018 \$40	▶ 2018–2025 \$20
<p>Clients watched a one-hour food safety film at an SNHD location.</p> <p>In the 1990s, the card cost \$10.</p> <p>Cards were valid for two years.</p>	<p>Clients watched a one-hour food safety film and received a hepatitis A vaccine at an SNHD location.</p> <p>The fee increased to \$50, and cards became valid for three years.</p>	<p>Clients paid \$20 to Vegas PBS for online training and unproctored testing.</p> <p>After passing, clients paid \$20 to SNHD for the card.</p> <p>A vaccine was no longer required.</p>	<p>Clients take and pass a proctored, multiple-choice test at an SNHD location or renew online.</p> <p>Clients pay \$20 for the card.</p>

The time is right for a price increase.

- **No increase in 25 years** — The client's total cost for a Food Handler Safety Training Card or Certified Food Safety Manager Card has remained at an affordable \$20 for seven years. Each change in price between October 1999 and July 2018 was a decrease.
- **Business costs are rising** — Between FY2019 and FY2024, total Health Cards department expenses increased by 28 percent. These expenses include card printing supplies and equipment, cashiering software fees, payment processing fees, general office supplies, cost allocations and payroll.

We are proposing a graduated fee increase across calendar years 2026 and 2027.

► 2025 Estimates

\$20	New Cards
\$20	Renewed Cards
\$20	Duplicate Cards
\$15	Late Fee
\$5	Retest Fee

Projected Revenue	\$2,726,375
Projected Expenses	\$2,842,711

PROJECTED LOSS \$111,336

► 2026 Projection

\$25	New Cards
\$25	Renewed Cards
\$20	Duplicate Cards
\$15	Late Fee
\$5	Retest Fee

Projected Revenue	\$3,283,875
Projected Expenses	\$3,137,608

PROJECTED PROFIT \$146,267

► 2027 Projection

\$30	New Cards
\$30	Renewed Cards
\$20	Duplicate Cards
\$15	Late Fee
\$5	Retest Fee

Projected Revenue	\$3,841,375
Projected Expenses	\$3,238,023

PROJECTED PROFIT \$603,352

Revenue changes calculated on 111,500 new and renewed Food Handler Safety Training Cards and Certified Food Safety Manager Cards at the proposed rates.

As compared to other work cards...

▶ **Food Handler**
\$20

Valid for 3 years
Issued by SNHD

▶ **Body Art Card**
\$25

Valid for 2 years
Issued by SNHD

▶ **Sheriff's Card**
\$64 + \$39 background check

Valid for 5 years
Issued by LVMPD

▶ **Alcohol Card**
\$15–35

Valid for 4 years
Issued by TAM Nevada, et al

▶ **Gaming Card**
\$45 + fingerprinting fees

Valid for 5 years
Issued by Gaming Control Board

How can we implement the changes?

1. Once approved by the Board of Health, we will spend the coming months sending notification to the following:
 - SNHD Environmental Health Food Operations leadership and inspectors
 - Food industry workers by email, web, social media, a news release, quarterly Food Safety Partnership Meetings, through our inspectors and more
 - The 90+ agencies and organizations that issue payment vouchers
 - Other stakeholders
2. On launch date, update all systems and materials with new fees.



- ▶ **Cory Burgess**
Health Cards Supervisor
702-759-1065
burgess@snhd.org



DATE: June 26, 2025

TO: Southern Nevada District Board of Health Members

FROM: Cassius Lockett, PhD, District Health Officer 

SUBJECT: District Health Officer Report

Back-to-School Immunizations

With the new school year starting on Monday, August 11, the Southern Nevada Health District is urging parents and guardians to make sure their children are up to date on required immunizations. To avoid the last-minute rush, the Health District recommends scheduling appointments now for kindergartners, 7th graders and 12th graders at one of its immunization clinics. Alternatively, parents may choose to make vaccination appointments with their pediatrician or local pharmacy.

A limited number of backpacks and school supplies will be available at Health District immunization clinic locations for students who receive their required school vaccination early, while supplies last.

The Clark County School District (CCSD) requires the following vaccinations for students enrolling in school: chickenpox (varicella), hepatitis A, hepatitis B, polio, tetanus-diphtheria-pertussis (DTaP and Tdap), quadrivalent meningitis, and measles-mumps-rubella (MMR). Parents who recently moved to Nevada should note hepatitis A vaccination is required in the state. Immunizations that were up to date in other states, that do not require hepatitis A vaccination, might not be current in Nevada.

Students enrolled in the 12th grade in Nevada public, private or charter schools must receive the meningococcal vaccine (MenACWY) prior to the start of the 2025-2026 school year. MenACWY is also required for students entering 7th grade and for students entering the 8th through 12th grades who are new to Nevada schools, including private or charter schools, and CCSD. In addition, 7-graders must receive their tetanus-diphtheria-pertussis (Tdap) vaccine. For more information on required vaccinations, visit CCSD's [Student Enrollment Process](#).

Mandatory back-to-school vaccinations, as well as recommended vaccinations, are available at the following Health District locations by appointment only:

- **Main Public Health Center, 280 S. Decatur Blvd., Las Vegas, NV 89107**
Monday–Thursday, 7 a.m.–5 p.m. (closed noon–1 p.m.)
Special back-to-school dates and times at Decatur location:
Friday, August 1 and August 8, 8 a.m.–4:30 p.m.
Saturday, August 9, 9 a.m.–2 p.m.
- **East Las Vegas Public Health Center, 2950 E. Bonanza Rd., Las Vegas, NV 89101**
Tuesday – Friday, 7 a.m.–5 p.m. (closed noon–1 p.m.)

Special back-to-school dates and times at Bonanza location:

Monday, July 28; August 4 and August 11, 8 a.m.–4:30 p.m.

- **Henderson Public Health Center, 220 E. Horizon Dr., Ste. A, Henderson, NV 89015**
Monday–Thursday, 7 a.m.–5 p.m.

Special back-to-school dates and times at Henderson location:

Monday, August 1; August 8, 8 a.m.–4:30 p.m.

- **Mesquite Public Health Center, 150 N. Yucca St., Mesquite, NV 89027**
Tuesday and Thursday, 8 a.m.–4:30 p.m. (closed noon–1 p.m.)

To make an appointment, call (702) 759-0850 or visit www.snhd.info/bts. Back-to-school immunizations for students 11-18 years of age (Tdap, MenACWY and HPV) will also be available at the Health District's Fremont Public Health Center in the two weeks leading up to the new school year. Parents and guardians of children younger than 11, can make appointments by calling (702) 759-0850 or visiting www.snhd.info/bts.

Fremont Public Health Center, 2830 E. Fremont St., Las Vegas, NV 89104

- Tuesday–Friday, July 29–August 1 and August 5–August 8, 8 a.m.–4 p.m.
- Open to students ages 11–18
- Appointments are required; call (702) 759-0850 or visit www.snhd.info/bts.

The Health District also offers vaccinations that are recommended for children but not required to enter school in Nevada. These include Meningitis B (MenB), human papillomavirus (HPV) and COVID-19.

- MenB is a rare type of bacterial meningitis, which causes swelling in the membranes and fluid surrounding the brain and spinal cord. All teens may get the MenB vaccine, preferably at 16–18 years old, in order to prevent this uncommon but serious illness for teens and young adults. Parents should discuss the risk and benefits with their vaccine provider.
- HPV is a common virus that infects children, adolescents and adults, and can cause cancers later in life. Approximately 13 million people—including teens—become infected with HPV each year.
- The virus that causes COVID-19 is always changing, and protection from COVID-19 vaccines declines over time. The COVID-19 vaccination continues to protect children against severe disease and hospitalization.

For more information about MenB, HPV or COVID-19, or to schedule a vaccination, visit [Immunization Clinic – Southern Nevada Health District](#) or call (702) 759-0850. Back to school appointments are for children and teens under 19 years of age. Immunizations are by appointment only with limited same day availability.

A parent or guardian must be present for those under 18. Parents bringing their child to a Health District clinic for vaccinations should bring the child's immunization records. If records are unavailable, parents are encouraged to contact their health care provider. For children immunized in Nevada, records can also be accessed through Nevada WebIZ, the state's immunization registry, at <https://izrecord.nv.gov/public/Application/PublicPortal> or by calling (775) 684-5954. Non-custodial adults may bring a child to the clinic, but written consent from the parent or legal guardian must be provided at the time of service. The Health District accepts most insurance plans. Not all immunizations are covered by insurance. Vaccine costs vary based on the type of immunization required. There may be an administrative fee in addition to the vaccine costs. For more information, visit www.snhd.info/bts.

Salmonella Outbreak

On June 11, the Health District announced it had identified four cases of *Salmonella* infection in Clark County associated with a multistate outbreak linked to brown cage free and brown certified organic eggs. The Centers for Disease Control and Prevention (CDC) is leading a coordinated investigation into the outbreak, which currently involves cases reported in several states.

The Health District continues to work closely with the CDC and state partners to collect additional information and monitor the situation as the investigation progresses.

At the time of the Health District's announcement, the CDC was reporting at least 50 *Salmonella*-related illnesses nationwide that were linked to the outbreak. *Salmonella* can cause serious illness. Symptoms typically begin six hours to six days after exposure and include diarrhea, fever and stomach cramps. Most people recover without medical treatment, but some individuals, especially young children, older adults and people with weakened immune systems, are at greater risk of developing severe illness or complications that may require hospitalization.

The CDC is advising the following:

- **Do not eat any recalled eggs.** Throw them away or return them to where you bought them.
- **Wash items and surfaces** that may have touched the recalled eggs using hot soapy water or a dishwasher.
- **Call your health care provider** if you have any of these severe *Salmonella* symptoms:
 - Diarrhea or vomiting lasting more than two days
 - A fever higher than 102°F
 - Bloody diarrhea or bloody urine
 - So much vomiting that you cannot keep liquids down
 - Signs of dehydration, such as not peeing much, dry mouth and throat, and feeling dizzy when standing up

More information about the outbreak, including safety tips and product recall details, is available on the CDC's website at www.cdc.gov/salmonella/outbreaks/eggs-06-25/index.html or on the U.S. Food & Drug Administration website at www.fda.gov/food/outbreaks-foodborne-illness/outbreak-investigation-salmonella-eggs-june-2025.

Adult Immunization and Outreach Event

On May 29, the Health District hosted a free Adult Immunization Outreach Event at its Fremont Public Health Center, 2830 E. Fremont St., Las Vegas, NV 89104. The event was open to the public and offered adults a chance to get vaccinations, blood pressure checks, STI screenings, harm reduction resources and other essential health services—all in one convenient location.

Every year, around 50,000 adults in the U.S. die from diseases that vaccines can prevent. Many adults aren't aware that they may still be at risk, or that immunity from earlier vaccinations can wear off over time. Staying up to date on recommended vaccines is not only safe but often required for travel, work, school and more.

Recommended adult vaccines include chickenpox (varicella), hepatitis A, hepatitis B, human papillomavirus (HPV), influenza (Flu), measles-mumps-rubella (MMR), meningococcal, pneumonia, shingles, and tetanus-diphtheria-pertussis (Tdap). Some vaccines may need boosters or have different recommended vaccination schedules. For additional information on adult vaccines, visit <https://www.southernnevadahealthdistrict.org/community-health-center/adult-vaccines/>.

Most insurance plans cover the costs, and vaccines for adults may be reduced or free of cost depending on availability. For a list of Health District locations, visit www.SouthernNevadaHealthDistrict.org/about-us/maps/. Vaccines are also available from health providers and at local pharmacies.

Twenty-eight patients were served at the event. Eighty-three adult vaccines were administered as well as seven tests completed for sexually transmitted infections.

Men's Health Month

June marks Men's Health Month, a time when the Health District urges all men to make their health a priority. Throughout the month, the Health District is reminding men to take charge of their well-being through informed decisions and proactive steps.

Nearly 15% of men in the United States report being in fair or poor health, and on average, women live more than five years longer than men. Conditions like heart disease, cancer and diabetes disproportionately affect men. While many of these health issues are preventable with regular check-ups and healthy lifestyle choices, men are often less likely than women to visit a doctor or discuss symptoms with a health care provider.

During June, the Health District's Barbershop Health Outreach Project hosted a "Pressure Point" Challenge," during which men could get free blood pressure screenings. The screenings were offered at barbershop locations throughout the Valley.

Also, in conjunction with Men's Health Month, the City of Las Vegas and Health Wellness Integrated Care are sponsoring the 4th Annual Men's Health & Wellness Conference on Friday and Saturday, June 27 and 28 at Las Vegas City Hall, 495 S. Main St., Las Vegas, NV 89101. With the theme of Generational Health, the conference aims to empower men of all ages to explore the deep connections among family history, lifestyle choices and long-term well-being. Topics including physical and mental health, blood pressure and health risk factors will be addressed. The event begins with an evening social from 6–9 p.m. on June 27, followed by the conference from 9 a.m.–3 p.m. on June 28. To register, visit www.bit.ly/3FG4xp8.

Early detection through regular screenings for cancer and other health conditions is vital for improving survival rates and maintaining good health. The Health District's Southern Nevada Community Health Center offers a range of services to support men's health, including annual physicals, chronic disease management and sick visits for minor illnesses. These services are available at the following locations:

- 280 S. Decatur Blvd., Las Vegas, NV 89107: Open Monday–Thursday, 7 a.m.–6 p.m.
- 2830 E. Fremont St., Las Vegas, NV 89104: Open Tuesday–Friday, 7:30 a.m.–6 p.m.

The Health District also urges men to check out the myriad prevention and self-management resources on the [Get Healthy Clark County website](#). The site addresses many important health

issues affecting men, including heart disease, cancer, diabetes, obesity, smoking cessation and nutrition.

Smoking continues to be the leading cause of preventable disease, disability and death in the United States—and men are disproportionately affected. Both in Nevada and across the country, men are more likely than women to smoke cigarettes or use electronic vapor products. Nationally, 13.1% of men smoke, compared to 11.4% of all adults. Each year, smoking claims more than 480,000 lives in the United States, with over 250,000 of those deaths occurring among men. In Clark County, 16.7% of men reported smoking cigarettes in 2023. For those ready to quit, free support and resources are available through [Get Healthy Clark County](#) and the [Nevada Tobacco Quitline](#) at 1-800-QUIT-NOW.

Cancer is another major concern in men's health, with approximately 4 in 10 American men expected to be diagnosed with cancer during their lifetime. The Centers for Disease Control and Prevention offers a helpful men's health [cancer screening guide](#) that outlines when to begin screenings for colon and lung cancer. It also encourages men to speak with their primary care provider about screening options for prostate and skin cancers.

Heart disease remains the leading cause of death for men in the United States, encompassing conditions such as coronary artery disease and heart attacks. As of 2019, approximately 7% of adult men in the United States were diagnosed with heart disease. In Clark County, 3.5% of adults reported experiencing angina or coronary heart disease in 2023, up from 3.2% in 2021. 5.2% of adults reported experiencing angina, coronary heart disease or heart attack in 2023. White non-Hispanic adults had the highest prevalence of these conditions:

- White non-Hispanic: 6%
- Black non-Hispanic: 4.2%
- Hispanic: 2.7%
- Asian non-Hispanic: 1.5%

Hypertension, also known as high blood pressure, is a major preventable factor for heart disease and stroke risk. In Clark County in 2023, non-Hispanic Black/African American adults had the highest percentage of hypertension (41.1%). More information is available in the 2025 Community Health Assessment, a comprehensive evaluation of Clark County's health needs, strengths and available resources. The assessment is available at the [Healthy Southern Nevada website](#). To manage risk factors for heart disease, such as high blood pressure, visit the [Manage Your Risk](#) section of the Get Healthy website. In addition, the [Community Calendar](#) provides a schedule of free blood pressure checks at participating barbershops

For people diagnosed with diabetes or prediabetes, the Health District offers free diabetes classes virtually or in-person. Visit [GetHealthyClarkCounty.org](#) for classes in [English](#) and [www.VivaSaludable.org](#) for classes in [Spanish](#). Those who register will be invited to the next class when scheduled. A downloadable resource of [low-cost clinics](#) is also available on the Get Healthy Clark County website.

The [Get Healthy Clark County](#) and [Viva Saludable](#) websites also offer free, online programs that can help increase physical activity. Online programs include Walk Around Nevada and Neon to Nature. Additional programs include tools and resources about healthy eating, nutritional information tips, smoking cessation and resources to help maintain a healthier lifestyle.

To learn more about diabetes resources in Southern Nevada, go to [Get Healthy Clark County | Local Diabetes Resources](#) or [Viva Saludable | Recursos locales para la diabetes](#). For information about additional classes, events and programs offered by the Health District, visit the [Get Healthy Clark County Community Calendar](#).

Move Your Way®

Clark County residents are invited to ready their swimsuits and sunscreen for the Health District's annual Move Your Way® campaign. The Health District's Office of Chronic Disease Prevention and Health Promotion is turning up the fun this summer with a splashy series of free events to get people moving and feeling great.

The excitement kicked off Friday, May 23, with "Slide into Summer," a family-friendly pool party at the Henderson Multi-Gen Activity Pool, 250 S. Green Valley Parkway, Henderson, NV 89012. But that was just the beginning. Seven more aquatic adventures are planned at public pools across the Valley through September 13—perfect for cooling off, getting active and having fun with friends and family. The full schedule is available at [GetHealthyClarkCounty.org](#) or [VivaSaludable.org](#).

According to the Centers for Disease Control and Prevention, 27% of adults and 16% of high school students in Clark County are considered sedentary, which can lead to serious health problems down the line. That's why the Health District is teaming up with community partners to make it easier to get active.

[Move Your Way®](#) is a physical activity campaign from the U.S. Department of Health and Human Services to promote the recommendations from the [Physical Activity Guidelines for Americans](#) and encourage people to incorporate them into everyday life. The campaign provides resources to help people stay on track in improving their fitness.

Community Meetings

Week ending 06/01:

Weekly:

- Participated in a Legislative Update meeting

Biweekly:

- Facilitated the Health Executive Council meeting
- Facilitated one-on-one meetings with Direct Reports (Anderson-Fintak, Saxton, Yapjoco, Zhang)
- Attended the CDC National Measles Response call
- Facilitated the EIS check-in meeting
- Participated in the Legislative Working Group Update

Monthly:

- Participated in the Nevada Association of Local Health Officials (NALHO) meeting

Ad-hoc Meetings:

- Participated in an internal meeting regarding Accreditation, Strategic Planning and Quality Improvement
- Participated in an internal meeting regarding grants and contracts
- Participated in a meeting with Dr. David Hess, Research Associated Professor, and Adam Vazquez, Molecular Epidemiologist, from the Nevada State Public Health Laboratory
- Participated in a meeting with representatives from Clark County regarding Ryan White funding and services

- Attended a meeting with Rosemary Brock and Paul Banfer, from EISC Lab Data Automation, and Tom Zumtobel, from Teachers Health Trust, regarding electronic health records
- Participated in an internal meeting regarding the Organizational Vital Signs (OVS) Survey Focus Groups

Week ending 05/25:

Weekly:

- Participated in a Legislative Update meeting

Biweekly:

- Attended the CDC Response All-STLT Update call
- Facilitated one-on-one meetings with Direct Reports (Gonzales, Mangla, Saner Smith)
- Facilitated one-on-one meeting with EIS Officer

Monthly:

- Participated in the individual Southern Nevada District Board of Health Agenda Review meeting with Councilwoman Brune, Mayor Pro Tem Gallo, Councilwoman Summers-Armstrong, Mayor Pro Tem Black, Bobbette Bond, Scott Nielson, Councilwoman Larson, and Mayor Hardy
- Participated in the Nevada Public Health Association (NPHA) Coordination Call
- Participated in the Southern Nevada Community Health Center Governing Board meeting
- Participated in the Clark County Medical Society (CCMS) Board of Trustees meeting
- Participated in the Southern Nevada District Board of Health meeting
- Participated in the Local Health Official Monthly Engagement meeting facilitated by National Association of County and City Health Officials (NACCHO)

Media/Interviews/Panelist/Presenter/Events:

- Participated in the Data Governance & Legal Workshop (Virtual Session #4) webinar facilitated by the Big Cities Health Coalition (BCHC)

Ad-hoc Meetings:

- Participated in a meeting regarding the SNPHL expansion

Week ending 05/18:

Biweekly:

- Facilitated the Health Executive Council meeting
- Facilitated one-on-one meetings with Direct Reports (Anderson-Fintak, Nicolson, Trujillo, Yapjoco, Zhang)
- Facilitated the EIS check-in meeting
- Participated in the Legislative Working Group Update

Monthly:

- Participated in the NV Pathogen Science Team meeting
- Participated in the eCR Data Quality Workgroup meeting
- Participated in the May Virtual Grand Rounds Session facilitated by the California Medical Association
- Participated in the individual Southern Nevada District Board of Health Agenda Review meeting with Commissioner Kirkpatrick

Quarterly:

- Participated in the Quarterly Medical Event Review meeting

Ad-hoc Meetings:

- Participated in a meeting regarding SB295
- Participated in a meeting with NORC at the University of Chicago regarding the social return on investment (SROI) of Accreditation

- Attended the Regional Trauma Advisory Board Nominating Committee meeting
- Attended the Regional Trauma Advisory Board meeting
- Participated in a meeting regarding Street & Field Medicine
- Participated in a meeting with DPBH, NACO and local health authorities regarding Public Health Funding
- Participated in a meeting regarding the NEOGOV contract
- Attended the Walk Around Nevada participants' lunch

Week ending 05/11:

Weekly:

- Participated in a Legislative Update meeting

Biweekly:

- Facilitated one-on-one meetings with Directors (Gonzales, Mangla, Saner, Saxton, Smith, Trujillo)
- Facilitated one-on-one meeting with EIS Officer

Monthly:

- Participated in the Monthly Leadership Finance meeting
- Participated in the BCHC Monthly Member meeting
- Participated in the BCHC FHIR Forum meeting

Bimonthly:

- Presented at the Manager/Supervisors meeting

Quarterly:

- Participated in the EIS Supervisory Team meeting

Media/Interviews/Panelist/Presenter/Events:

- Speaker at the Extreme Heat Press Event at the Clark County Government Center Amphitheater

Professional Development/Conferences:

- Attended the FutureSync Training & Development Session for SNHD Leadership and Senior Managers

Ad-hoc Meetings:

- Participated in a meeting regarding ongoing litigation
- Participated in a meeting regarding Health Cards program
- Attended a meeting with SEIU representatives regarding the All-Hands meeting
- Participated in the Nevada Applied Epidemiology Fellowship Site Visit at SNHD
- Presented at the SNHD All Hands & Organizational Vital Signs (OVS) Survey Debrief meeting
- Attended the Assembly Committee on Health and Human Services meeting
- Attended the Assembly Committee on Natural Resources meeting



Oyster-associated norovirus outbreak: April–May 2025

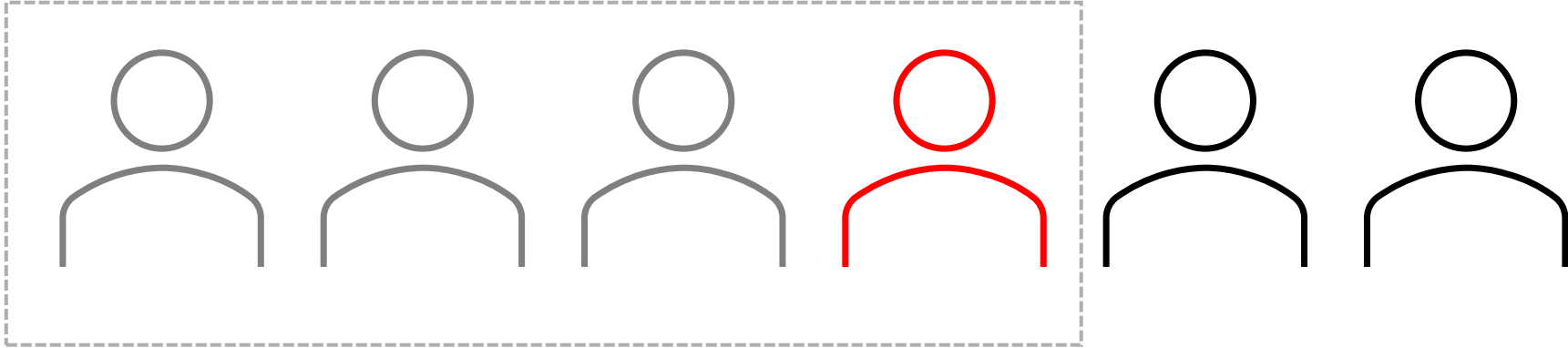
SNHD Board of Health Meeting

June 26, 2025

Geoff Melly, PhD – CDC EISO assigned to Southern Nevada Health District

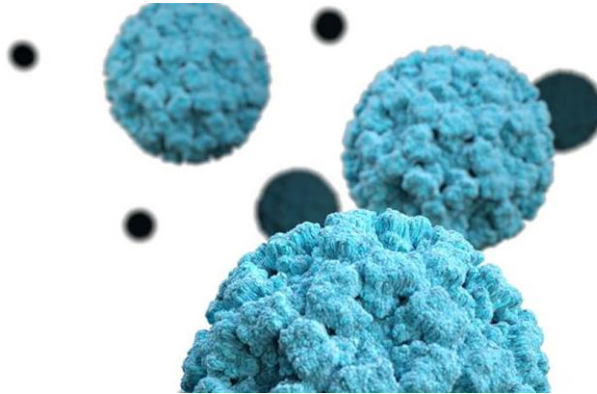


On April 19, 2025, six people went out for a sushi dinner.
Four of the diners reportedly became ill.

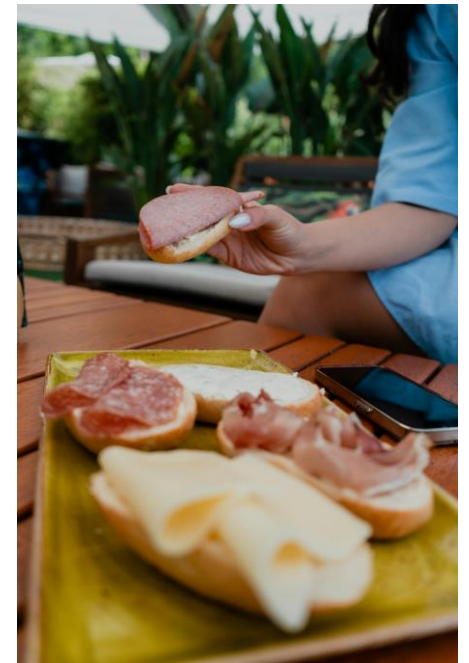


One ill diner tested positive for **norovirus**.

Norovirus is the most common cause of foodborne illness.



Contaminated **food**,
water, and **surfaces** drive
norovirus spread.



Norovirus is frequently associated with consuming raw oysters.



Notes from the Field

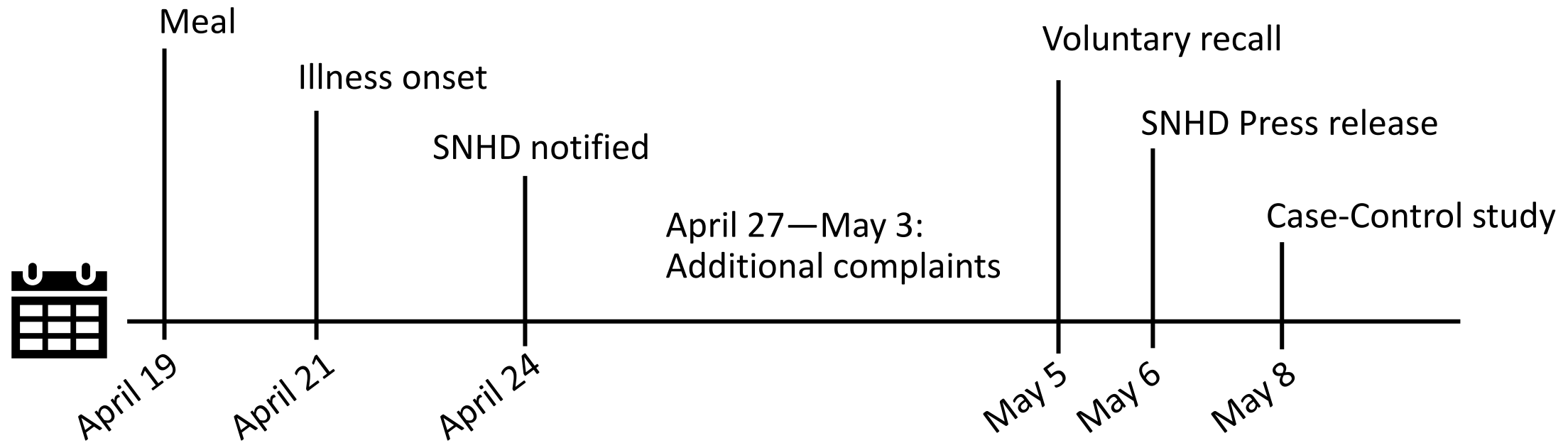
Outbreak of Norovirus Illness Caused by Consumption of Oysters Harvested from Galveston Bay, Texas — November–December 2022

Morgan Jibowu, MPH¹; Kaitlin Driesse, PhD¹; Sarah May, MPH¹; Amanda Wright, MPH¹; Tyler Swate, MPH¹; Caitlin Cotter, DVM¹

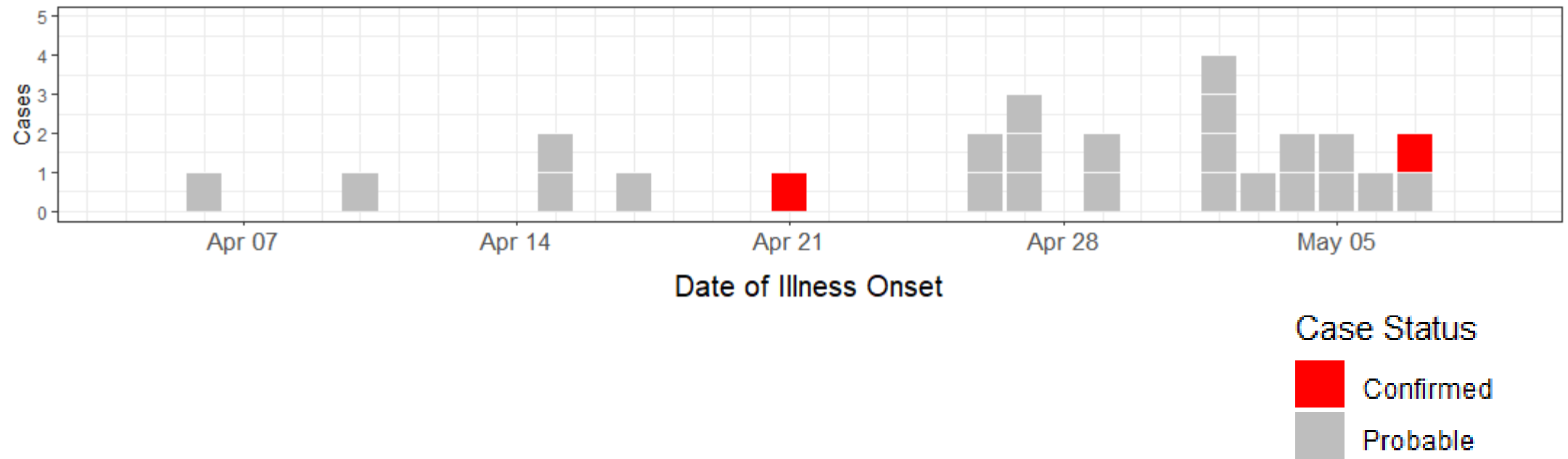
Concurrent Norovirus Outbreaks Associated with Consumption of Oysters Harvested in Mexico — California, December 2023–January 2024

Weekly / April 17, 2025 / 74(13):222–226

Investigation timeline



SNHD received additional reports of foodborne illness after the May 6 news release.



Food Item	Exposed		Unexposed		M-H Odds Ratio	Lower 95% CI	Upper 95% CI	p-value
	N	% Ill	N	% Ill				
Oyster	23	82.6	48	16.6	20.3	5.0	81.8	<0.001
Any raw food	56	46.4	19	15.8	4.7	1.2	18.6	0.0
Tuna	35	51.4	36	25.0	3.3	1.1	9.3	0.0
Salmon	38	43.4	31	30.6	2.7	0.8	8.6	0.1
Yellowtail	31	43.5	38	32.9	2.2	0.7	7.2	0.1
Tuna roll	23	52.2	44	29.5	1.9	0.6	5.6	0.1
Yakisoba noodles	6	50.0	69	37.7	1.4	0.3	7.7	0.3

FDA Advises Restaurants and Retailers Not to Serve or Sell and Consumers Not to Eat Certain Frozen, Raw, Half-shell Oysters from Republic of Korea Potentially Contaminated with Norovirus

May 22, 2025

Key Points

- Consuming raw foods, especially shellfish, can carry risks.
- **Wash** your hands well and often. **Cook** or wash your food thoroughly. **Clean** and **disinfect** contaminated surfaces. **Stay home** when sick.
- Foodborne illness surveillance is essential for public safety.
- A motivated and engaged public is a crucial partner.

Acknowledgments

- District Health Officer
 - SNHD Environmental Health – Outbreak Response Team
 - SNHD Division of Disease Surveillance and Control
 - Southern Nevada Public Health Laboratory
 - FDA / CDC
-



280 S Decatur Blvd, Las Vegas, NV 89107



[Facebook.com/SouthernNevadaHealthDistrict](https://www.facebook.com/SouthernNevadaHealthDistrict)



[@SNHDInfo](https://twitter.com/SNHDInfo)



[YouTube.com/SNHealthDistrict](https://www.youtube.com/SNHealthDistrict)



[@southernnevadahealthdistrict](https://www.instagram.com/southernnevadahealthdistrict)

Legislative Update

June 26, 2025

Bills Signed Into Law

State Public Health Funding

- [AB591](#) – Makes various changes regarding state financial administration and makes appropriations for the support of the civil government of the State.
 - \$15 million in non-categorical, per capita public health funding was approved for statewide distribution.
 - SNHD to receive \$10,786,480 for the biennium, equally split between SFY26 & 27

Bills Signed Into Law

Disease Surveillance and Control

- [AB360](#) - Revises provisions relating to testing for sexually transmitted diseases. (Syphilis Testing)

Public Health Preparedness

- [AB50](#) - Revises provisions relating to victims of a mass casualty incident. (Mass Casualty Database)
- [AB325](#) - Revises provisions relating to artificial intelligence. (AI in Emergencies)

Bills Signed Into Law

Chronic Disease Prevention & Health Promotion

- [AB76](#) - Revises provisions relating to cannabis. (Cannabis Consumption Lounges)

Emergency Medical Services & Trauma System

- [AB326](#) - Revises provisions relating to the designation of hospitals as centers for the treatment of trauma. (Rural Access Hospital Trauma Designation)
- [SB24](#) - Provides for the certification and regulation of emergency medical responders. (Emergency Medical Responders)

Bills Signed Into Law

Environmental Health

- [AB104](#) - Revises provisions relating to water. (Water Rights)
- [AB352](#) - Revises provisions relating to businesses. (Cottage Food & Cosmetics)
- [SB466](#) - Revises provisions governing the authority of the State Department of Agriculture relating to food and water. (Dept of Ag Transfer)
- [AB211](#) - Revises provisions relating to substandard properties. (Substandard Properties)

Bills Signed Into Law

Health Services and System Reform

- [SB9](#) - Revises provisions relating to Medicaid. (Medicaid Claims)
- [SB348](#) - Makes revisions relating to laboratory testing. (Newborn Screening Fees)
- [SB494](#) - Makes revisions relating to health and human services. (Nevada Health Authority)

Bills Signed Into Law

Behavioral Health

- [AB394](#) - Authorizes the Board of Regents of the University of Nevada to require certain institutions to adopt emergency response plans related to opioid overdoses. (Opioid Emergency Response Plans in Higher Education)

Public Health Data

- [AB331](#) - Makes an appropriation to the Division of Public and Behavioral Health of the Department of Health and Human Services for a grant program to expand the biennial survey administered pursuant to the Youth Risk Behavior Surveillance System developed by the Centers for Disease Control and Prevention of the United States Department of Health and Human Services. (YRBS)

Bills Signed Into Law

Government Operations and Regulatory Reform

- [AB444](#) - Revises provisions relating to governmental administration. (Regulation Notifications)

Workforce Development and Recruitment

- [AB269](#) - Revises provisions relating to education. (Student Loan Repayment)

Vetoed Bills

- [SB295](#) - Revises provisions related to food establishments. (Mobile Food Vendors)
- [AB244](#) - Enacts prohibitions relating to the use of disposable foodware containers containing polystyrene foam by certain food establishments. (Styrofoam Ban)
- [AB205](#) - Revises provisions governing sexual education. (Sex Education Opt-Out)

Legislation That Did Not Advance

- [SB423](#) - Revises provisions governing public health. (Base Public Health Funding)
- [SB435](#) - Revises provisions relating to nicotine products. (Vape Registry)
- [AB536](#) - Revises provisions relating to tobacco. (Heated Tobacco Products)
- [SB78](#) - Revises provisions relating to boards, commissions, councils and similar bodies. (State Licensing Board Overhaul)

Legislation That Did Not Advance

- [AB186](#) - Revises provisions governing pharmacists. (Expanded Authority for Pharmacists)
- [SB118](#) - Revises requirements relating to coverage under Medicaid for certain services provided by pharmacists. (Medicaid Reimbursement for Pharmacists)
- [AB297](#) - Revises provisions relating to Medicaid. (Postnatal Support)
- [SB244](#) - Requires Medicaid to provide coverage of certain treatments for obesity. (Medicaid Obesity Treatment Coverage)



SNHD INTERIM FINANCIAL REPORT

(UNAUDITED)

As of March 2025

(Includes Augmented Budget Approved January 2025)

Summary of Revenues, Expenses, and Net Position (as of March 31, 2025 – Unaudited)

Revenues

- General Fund revenue (Property Taxes, Charges for Services, Licenses/Permits & Other) is \$92.66M compared to a budget of \$85.68M, a favorable variance of \$6.98M.
- Special Revenue Funds (Grants) is \$38.76M compared to a budget of \$59.16M, an unfavorable variance of \$20.40M.
- Total Revenue is \$131.42M compared to a budget of \$144.84M, an unfavorable variance of \$13.41M.

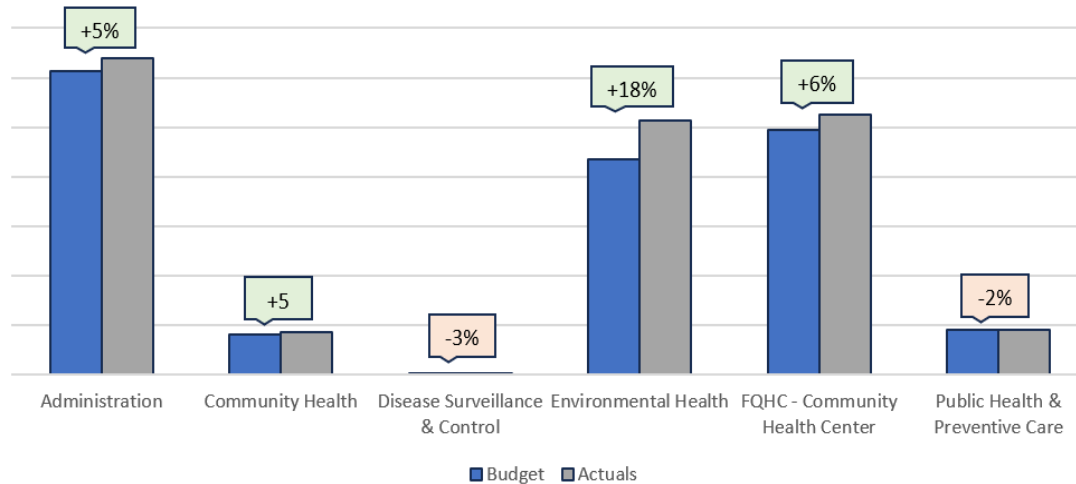
Expenses

- Salary, Tax, and Benefits is \$75.95M compared to a budget of \$77.51M, a favorable variance of \$1.56M.
- Other Operating Expense is \$47.52M compared to a budget of \$67.43M, a favorable variance of \$19.91M.
- Transfers/Allocations is \$2.00M compared to a budget of \$1.57M, an unfavorable variance of \$0.43M.
- Total Expense is \$125.47M compared to a budget of \$146.51M, a favorable variance of \$21.04M.

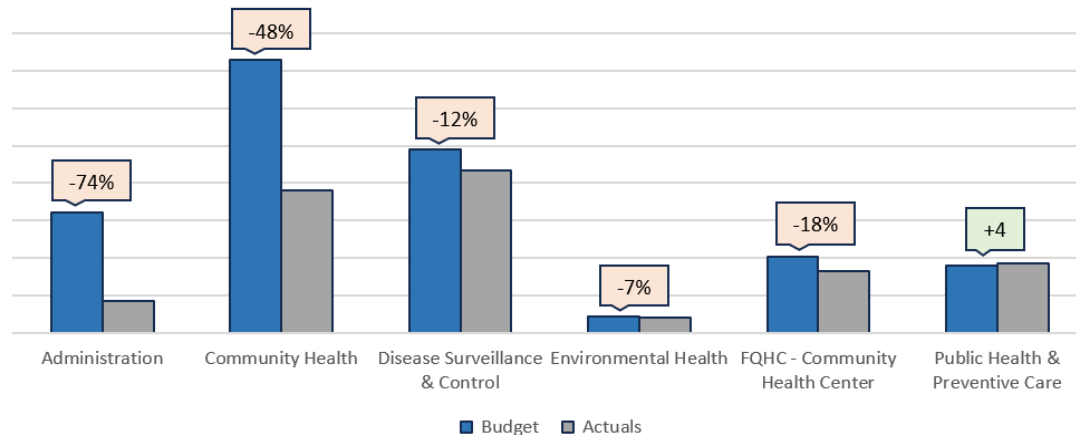
Net Position: is \$5.95M compared to a budget of (\$1.67M), a favorable variance of \$4.28M. (See Notes for Revenues and Expenses).

REVENUES

Operating Revenue



Special Revenue (Grants)



Division	Budget as of March 2025	Actual as of March 2025	Variance Favorable (Unfavorable)	% +/-
Operating Revenue (Charges, Fees, Taxes, etc.)				
Administration	\$ 30,607,925	\$ 31,997,198	\$ 1,389,273	5%
Community Health	4,036,337	4,244,846	208,509	5%
Disease Surveillance & Control	22,500	21,751	(749)	-3%
Environmental Health	21,744,954	25,668,397	3,923,443	18%
FQHC - Community Health Center	24,722,936	26,259,072	1,536,136	6%
Public Health & Preventive Care	4,543,683	4,470,288	(73,395)	-2%
SUBTOTAL	\$ 85,678,335	\$ 92,661,553	\$ 6,983,218	8%
Special Revenue (Grants)				
Administration	\$ 9,682,629	\$ 2,527,149	\$ (7,155,480)	-74%
Community Health	21,919,812	11,440,514	(10,479,298)	-48%
Disease Surveillance & Control	14,740,944	12,977,706	(1,763,238)	-12%
Environmental Health	1,324,687	1,226,270	(98,416)	-7%
FQHC - Community Health Center	6,101,169	4,988,211	(1,112,957)	-18%
Public Health & Preventive Care	5,390,773	5,602,854	212,082	4%
SUBTOTAL	\$ 59,160,013	\$ 38,762,705	\$ (20,397,308)	-34%
TOTAL REVENUE	\$ 144,838,348	\$ 131,424,258	\$ (13,414,090)	-9%

NOTES:

- 1) DUE TO TIMING. ANNUAL FOOD PERMIT REVENUES BILLED ON JULY 1ST (~70% OF ANNUAL REVENUE FOR ENVIRONMENTAL HEALTH). OTHER MAJOR REVENUE BILLING RECORDED IN JANUARY 2025 AND WILL NORMALIZE DURING FOURTH QUARTER.
- 2) GROUND BROKEN ON LAB EXPANSION AND WORK HAS BEGUN BUT MAJORITY OF SPENDING TRANSFERRED TO FISCAL YEAR 2026.
- 3) DECREASED NEED FOR GRANT RELATED LAB SUPPLIES AND EQUIPMENT IN FISCAL YEAR 2025 IMPACTING GRANT REIMBURSEMENTS .

Revenues by Category

REVENUE BY CATEGORY	Administration	Community Health	Disease Surveillance & Control	Environmental Health	FQHC	Public Health & Preventive Care	TOTALS BY CATEGORY
<i>Licenses & Permits</i>	\$ -	\$ 272,256	\$ -	\$ 25,406,942	\$ -	\$ -	\$ 25,679,198
<i>Property Taxes</i>	28,238,382	-	-	-	-	-	28,238,382
<i>Charges for Services</i>	2,060,140	3,968,747	20,000	-	25,022,068	3,621,349	34,692,303
<i>Intergovernmental</i>	2,527,149	11,440,514	12,977,706	1,226,270	4,988,211	5,602,854	38,762,705
<i>Investment Earnings</i>	1,578,320	-	-	-	-	-	1,578,320
<i>Other</i>	120,357	3,844	1,751	261,455	1,236,979	848,939	2,473,324
<i>Contributions</i>	-	-	-	-	25	-	25
TOTALS BY DEPT	\$ 34,524,348	\$ 15,685,360	\$ 12,999,457	\$ 26,894,667	\$ 31,247,283	\$ 10,073,142	\$ 131,424,257

Revenue Categorization

General Fund

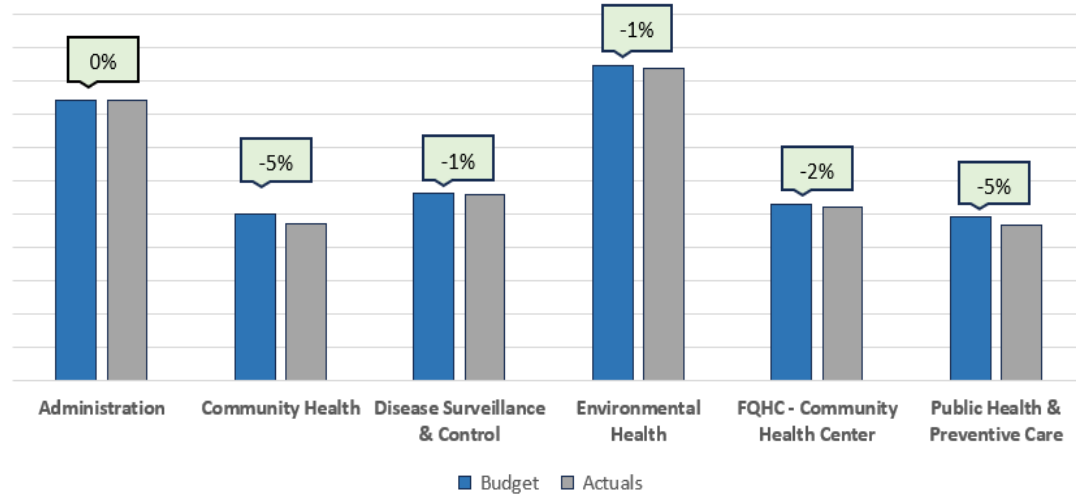
- *Property tax* – includes revenue from Clark County for property tax received.
- *Licenses/Permits* – includes revenue from Annual Fees, Plan Reviews, other regulatory fees.
- *Charges for Services* – includes revenue from Insurance billing, Medicaid, Birth & Death Certificates, etc.
- *Other Revenue* – includes revenues from Admin Fees, Investment Interest, Misc. Income, etc.

Special Revenue Fund

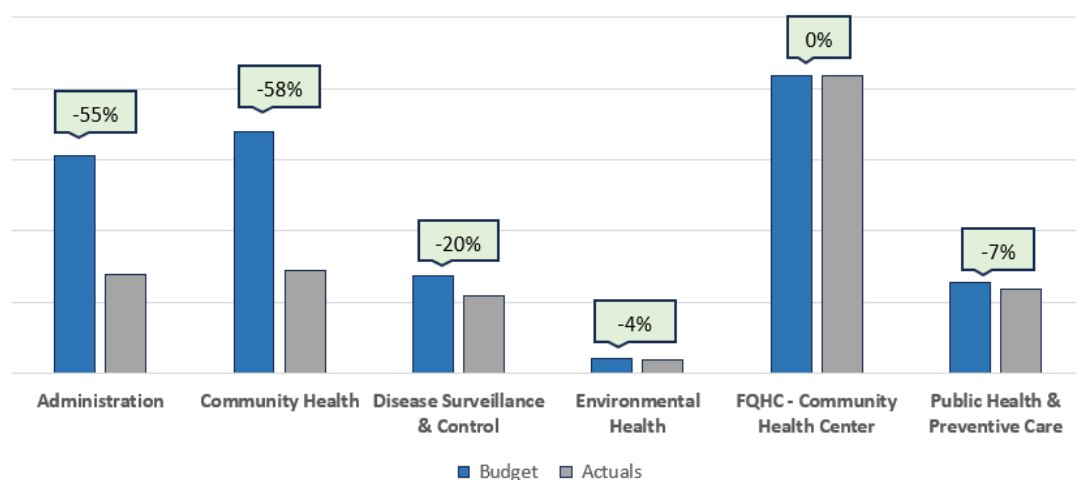
- *Federal Revenue* – includes direct federal grant revenue from U.S. Dept. of Health and Human Services, U.S. Dept. of Agriculture, and U.S. Dept. of Homeland Security
- *Pass-Thru Revenue* – includes revenue passed thru from NV Dept. of Health and Human Services, UNLV, and Clark County
- *State-Revenue* – includes state revenue for FQHC-related grants
- *Other Revenue* – includes revenue from Clark County grants

EXPENSES

Personnel Expenses



Other Operating Expenses



Division	Budget as of March 2025	Actual as of March 2025	Variance Favorable (Unfavorable)	% +/-
Employment (Salaries, Taxes & Benefits)				
Administration	\$ 16,854,832	\$ 16,883,945	\$ (29,113)	0%
Community Health	9,967,946	9,431,813	536,133	-5%
Disease Surveillance & Control	11,300,913	11,148,627	152,286	-1%
Environmental Health	18,907,438	18,753,431	154,006	-1%
FQHC - Community Health Center	10,612,129	10,395,740	216,390	-2%
Public Health & Preventive Care	9,869,322	9,337,051	532,270	-5%
SUBTOTAL	\$ 77,512,580	\$ 75,950,607	\$ 1,561,972	-2%
Other (Supplies, Contractual, Capital)				
Administration	\$ 15,282,239	\$ 6,943,075	\$ 8,339,164	-55%
Community Health	16,994,791	7,215,675	9,779,115	-58%
Disease Surveillance & Control	6,823,064	5,480,404	1,342,660	-20%
Environmental Health	1,025,260	987,157	38,103	-4%
FQHC - Community Health Center	20,931,508	20,946,132	(14,623)	0%
Public Health & Preventive Care	6,371,498	5,947,435	424,063	-7%
SUBTOTAL	\$ 67,428,360	\$ 47,519,878	\$ 19,908,482	-30%
Total Operating Expenses	\$ 144,940,940	\$ 123,470,485	\$ 21,470,455	-15%
Indirect Costs/Cost Allocations	\$ 1,566,624	\$ 0	\$ 1,566,624	-100%
Transfers IN	(4,763,349)	(3,807,751)	(955,597)	-20%
Transfers OUT	4,763,349	5,807,751	(1,044,403)	22%
Total Transfers & Allocations	\$ 1,566,624	\$ 2,000,000	\$ (433,376)	28%
TOTAL EXPENSES	\$ 146,507,564	\$ 125,470,485	\$ 21,037,079	-14%

NOTES:

- 1) LAB EXPANSION PROJECT CAPITAL EXPENSES ANTICIPATED TO OCCUR IN FISCAL YEAR 2026.
- 2) DECREASED NEED FOR GRANT RELATED LAB SUPPLIES AND EQUIPMENT IN FISCAL YEAR 2025 IMPACTING GRANT REIMBURSEMENTS .
- 3) TRANSFER OF \$2M TO CAPITAL PROJECTS FUND FROM THE GENERAL FUND.

Expenses by Category

EXPENSE BY CATEGORY	Administration	Community Health	Disease Surveillance & Control	Environmental Health	FQHC	Public Health & Preventive Care	TOTALS BY CATEGORY
<i>Salaries</i>	\$ 11,456,442	\$ 6,472,313	\$ 7,668,173	\$ 12,935,888	\$ 7,170,923	\$ 6,453,181	\$ 52,156,920
<i>Taxes & Benefits</i>	5,427,503	2,959,501	3,480,454	5,817,543	3,224,816	2,883,870	23,793,687
<i>Contractual</i>	5,718,193	3,689,423	3,172,344	634,224	981,418	1,605,756	15,801,358
<i>Indirect/Cost Allocation</i>	(18,281,858)	2,797,540	3,039,911	3,627,217	5,968,339	2,848,852	0
<i>Supplies</i>	505,331	2,828,915	2,128,440	110,407	19,331,434	4,224,302	29,128,828
<i>Property</i>	661,305	626,017	62,036	-	608,318	7,515	1,965,191
<i>Travel & Training</i>	58,246	71,320	117,584	242,526	24,962	109,863	624,501
TOTALS BY DEPT	\$ 5,545,162	\$ 19,445,029	\$ 19,668,942	\$ 23,367,805	\$ 37,310,210	\$ 18,133,339	\$ 123,470,485

Expense Categorization

Expenses (All Funds)



- *Salaries* – includes expenses associated with employee compensation such as salaries, overtime, longevity, etc.
- *Taxes & Fringe Benefits* – includes expenses associated with the employer-paid portion of FICA/Medicare, Health Insurance, Life Insurance, 100% employer-paid retirement (NVPERS), etc.
- *Capital Outlay* – includes expenses associated with capital purchases such as equipment, computer software/hardware, furniture, etc.
- *Contractual* – includes expenses associated with contractual agreements such as professional services, subscriptions, computer software, maintenance, etc.
- *Supplies* – includes expenses associated with Medical Supplies, Vaccines, Lab Supplies, office supplies, etc.
- *Indirect Costs/Cost Allocations* – SNHD Overhead rate is 19.57%. Indirect costs associated with special revenue funds are recovered generally at the allowed 10% de minimis rate. Cost Allocations make up the remaining 9.57%. NOTE: The de minimis rate for federal grants increased from 10% to 15% effective October 1, 2024.
- *Transfers In* – funds transferred into special revenue fund from the general fund.
- *Transfers Out* – funds transferred out of the general fund into other funds.

MEMORANDUM



Date: June 26, 2025

To: Southern Nevada District Board of Health

From: Kim Saner, J.D., M.A., SPHR, *Deputy District Health Officer-Administration* 
Cassius Lockett, PhD, *District Health Officer* 

Subject: **Administration Division Monthly Report – May 2025**

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Executive Summary

The Office of Communications issued nine News Releases and promoted the Stay healthy – stay informed adult immunization Outreach event. Legislative Affairs contributed in depth to the very last moments of the 2025 Legislative session. Facilities has completed the Environmental Health remodel at Decatur, resulting in the addition of eight new office spaces as well as completed the installation of a new boiler at Martin Luther King. During the month of May, Health Cards served 11,564 total clients, including 2,842 clients renewing online. As of May 23, 2025, the Health District had 824 active employees. Human Resources extended four job offers. There was one retirement and three promotions.

Office of Communications

News Releases Disseminated:

- Reminder – Health District offers free diabetes classes
- Southern Nevada Health District releases Community Health Assessment
- Health District investigating illnesses associated with frozen oysters
- Soda Free Summer Challenge underway

- Southern Nevada Health District hosts Community Baby Shower
- Make a splash with Move Your Way – Summer fun is on!
- Southern Nevada Health District conducting Legionnaires' disease investigation at the South Point Hotel
- Southern Nevada Health District conducting Legionnaires' disease investigation at The Grandview
- Stay healthy – stay informed – Free adult vaccines and health services available at May 29 event

Press:

- Measles
- Investigation of frozen oysters
- Free diabetes management classes
- Beat the Heat campaign
- Community Baby Shower
- Drug overdose deaths
- Mosquitoes
- Legionnaires' Disease outbreak at two resort hotels
- Adult immunization outreach event

Seven hundred and six news clips related to the Health District, local news coverage and national coverage of public health topics were compiled in May. Coverage includes traditional print, broadcast, digital and online media outlets. A list is available at

<https://media.southernnevadahealthdistrict.org/download/oc/202505-PI-Report.pdf>.

Advertisements, Projects Completed and Social Media Summary:

In May, the Office of Communications ran multiple public health campaigns, including Beat the Heat, Fight the Bite, Sexual Health, Back-to-School Vaccination Clinics and Your Shot for a Healthier Tomorrow. Staff also provided product support for the Office of Chronic Disease Prevention and Health Promotion, Environmental Health, and Administration. Throughout the month, staff responded to 197 public information email inquiries and completed 65 internal project requests. These include support for graphic design, website content, photography, advertising, marketing, outreach materials and translation services. Staff updated the Health District websites, including SNHD.info, SNHD.info/covid and GetHealthyClarkCounty.org.

On social media, staff focused on promoting Mental Health Awareness Month, Move Your Way, Pop-Up Produce Stands, Health District Free Diabetes Classes, Health Equity Chats, Soda Free Summer Challenge, National Nurses Week, Beat the Heat, Hepatitis Awareness Month, Healthy Start Community Baby Shower, National Women's Health Week, Adult Immunization Outreach Event, Mental Health Awareness Month, HIV Vaccine Awareness Day, National Asian And Pacific Islander Day, National HIV/AIDS Awareness Day, Memorial Day, Southern Nevada Substance Misuse Overdose Prevention Summit, Fight the Bite and Board of Health recognitions.

Community Outreach:

- Three Square Food Bank/Supplemental Nutrition Assistance Program, Low Income Energy Assistance Program and Temporary Assistance for Needy Families program clients processed: 11
- Department of Welfare & Supportive Services Medicaid/Supplemental Nutrition Assistance Program applications: 225

Legislative Affairs Update:

- Monitored bill progress through key legislative deadlines, committee hearings and floor sessions
- Engaged with staff to gather input on operational and policy impacts
- Coordinated with key stakeholders to address legislative concerns and opportunities
- Drafted and finalized testimony for bill hearings

- Monitored and attended committee hearings on legislation affecting the Health District
- Prepared and distributed weekly legislative updates to staff to keep internal teams informed on bill status, impacts, and key deadlines

Meetings and Events of Note:

- May 1: Nevada Health Link and SNHD Partnership Meeting
- May 1: Nevada Primary Care Association Policy Committee Meeting
- May 2: Adult Immunization Outreach Event Meeting
- May 6: Accreditation meeting with Rich Hazeltine
- May 8: Extreme Heat Press Event with Clark County
- May 9: Big Cities Health Coalition Communications Meeting
- May 13: 2025 Big Cities Health Coalition Data Platform Meeting
- May 13: Building Capacity Accreditation Conference Call
- May 14: Back to School Meeting
- May 15: Accreditation Meeting with Dave Sheehan
- May 15: Big Cities Health Coalition Policy Meeting
- May 15: Walk Around Nevada Winners Luncheon
- May 19: Nevada Public Health Association Coordination Meeting
- May 29: Adult Immunization Outreach Event
- May 29: Meeting with R.E.A.C.H.
- May 30: Briefing on BCHC's Harm Reduction Messaging Research
- Recurring Legislative Update Meetings
- Recurring Nevada Public Health Association Policy Meetings
- Recurring "One Voice" Public Health Legislative Meetings
- Recurring Nevada Tobacco Control and Smoke-Free Coalition Policy Meetings

Facilities

Monthly Work Orders	May 2024	May 2025		YTD FY24	YTD FY25	
Maintenance Responses	212	603	↑	2,127	5,036	↑
Electrical Work Orders	20	57	↑	72	415	↑
HVAC Work Orders	28	42	↑	82	531	↑
Plumbing Work Orders	7	20	↑	61	191	↑
Preventive Maintenance	39	159	↑	195	585	↑
Security Responses	2,252	2,548	↑	27,466	27,844	↑

Current Projects

Decatur Location

- Completed Environmental Health remodel adding 8 additional offices
- Replaced two reverse osmosis drinking water stations
- Created a designated and secure parking area for ODS mobile clinic at the Decatur building

Martin Luther King Location

- Completed new boiler installation
- Began Phoenix Controls upgrade
- Began autoclave replacement project

Finance

Total Monthly Work Orders by Department	MAY 2024	MAY 2025		YTD FY24	YTD FY25	
Grants Pending – Pre-Award*	7	3	↓	50	48	↓
Grants in Progress – Post-Award**	14	8	↓	132	98	↓
Purchase Orders Issued	317	637	↓	5337	6154	↓

* Grant application was created and submitted to agency

** Grant application was approved – is being routed for signature

Grants Expired						
KEY: P=Pass-through, F=Federal, S=State, O=Other						
Project Name	Grantor	End Date	Amount	Reason	FTE	Comments
SNHD COVID-19 Health Disparities, Amendment #8 (cvdis_21)	F-CDC	5/31/2025	\$ 22,606,672	end of project period	8.35	Project not expected to renew
State of Nevada, HIV Prevention and Surveillance Program, Year 1 of 5 (hivprv25)	P-CDC	5/31/2025	\$ 1,611,588	end of budget period	13.10	The renewal for FY2026 is in progress
State of Nevada, HIV Prevention and Surveillance Program, Year 1 of 5 (hivsv25)	P-CDC	5/31/2025	\$ 206,339	end of budget period	1.65	The renewal for FY2026 is in progress
State of Nevada, Office of HIV, Ending the HIV Epidemic Program, Year 1 of 5 (nvehe_25)	P-CDC	5/31/2025	\$ 1,780,413	end of budget period	8.22	The renewal for FY2026 is in progress

Grants Awarded – May 2025							
KEY: P=Pass-through, F=Federal, S=State, O=Other							
Project Name	Grantor	Received	Start Date	End Date	Amount	Reason	FTE
The National Environmental Health Association-FDA Retail Flex Fund, Year 1 of 2 (rfmain25)	P-FDA	3/31/2025	4/1/2025	3/31/2026	\$ 26,500	FY2025 renewal	0.05
Health Center Service Area, Amendment 2 (hcsac_25)	F-HRSA	5/7/2025	2/1/2025	1/31/2026	\$ -	Change in scope, remove service	0.00
, Health Center Service Area, Amendment 3 (hcsac_25)	F-HRSA	5/7/2025	2/1/2025	1/31/2026	\$ -	Change in scope, adding services	0.00
Health Center Service Area, Amendment 4 (hcsac_25)	F-HRSA	5/8/2025	2/1/2025	1/31/2026	\$ -	Change in scope, add service confirmed	0.00
Health Center Service Area, Amendment 5 (hcsac_25)	F-HRSA	5/8/2025	2/1/2025	1/31/2026	\$ -	Change in scope, add service confirmed	0.00

Grants Awarded – May 2025							
KEY: P=Pass-through, F=Federal, S=State, O=Other							
Project Name	Grantor	Received	Start Date	End Date	Amount	Reason	FTE
Health Care Bridge Acces Program, Amendment 2 (hcbirdg24)	F-HRSA	5/22/2025	9/1/2023	12/31/2024	\$ (1,540)	De-obligation in unused funds	0.00
State of Nevada, STD Prevention & Control Program, Year 3 of 3 (std_25)	P-CDC	5/30/2025	3/1/2025	2/28/2026	\$ 277,707	FY2025 renewal	3.25
State of Nevada, DPBH Tuberculosis Program, Year 1 of 4, Amendment #1 (tb_25)	P-CDC	5/30/2025	1/1/2025	12/31/2025	\$ (6,132)	De-obligation of funds due to reduction in federal award	0.00

Project Name	Grantor	Received	Start Date	End Date	Amount	Reason	FTE
Ryan White HIV/AIDS Part A, Ending HIV Epidemic Rapid Start (eherpd26)	P-HRSA	2/4/2025	3/1/2025	2/28/2026	\$ 90,000	FY2025 renewal	3.15

Health Cards

HEALTH CARDS

- Appointments continue to be required for food handler card testing and open 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 a.m.
- For the month of May, we averaged 92 “passing and paying” online renewal clients per day, with a total of 2,842 clients renewing online.

CLIENTS SERVED	May 2025	Apr 2025	Mar 2025	Feb 2025	Jan 2025	Dec 2024
FH Cards – New	5,508	5,877	5,368	5,365	6,026	4,368
FH Cards – Renewals	1,180	1,172	1,042	988	970	757
FH Cards – Online Renewals	2,842	2,525	2,361	2,024	2,468	1,709
Duplicates	552	589	517	514	671	447
CFSM (Manager) Cards	199	215	231	233	237	183
Re-Tests	1,171	1,280	1,195	1,210	1,402	1,030
Body Art Cards	112	126	98	99	117	83
TOTALS	11,564	11,784	10,812	10,433	11,891	8,577

Human Resources (HR)

Employment/Recruitment

- 0 New job titles for May
- 824 active employees as of May 23, 2025

- 0 New Hires, including 0 rehires and 0 reinstatements
- 8 Terminations, including 1 retirement
- 3 Promotions, 0 Flex-reclasses
- 0 Transfers, 0 Lateral Transfers
- 0 Demotions
- 65 Annual Increases
- 15 Interviews
- 4 Offers extended
- 6 Recruitments posted
- Turn Over Rates
 - District Administration: 0.543%
 - Community Health: 0.000%
 - Disease Surveillance & Control: 1.66%
 - Environmental Health: 0.504%
 - Primary & Preventive Care: 0.922%
 - FQHC: 3.509%

Temporary Employees

- 7 Total Temporary Staff – including:
- 4 temporary staff from Amergis with 0 pending positions
- 0 temporary staff from Manpower with 0 pending positions
- 2 temporary staff from Express with 0 pending positions
- 0 temporary staff from Tryfacta with 0 pending positions
- 1 temporary staff from RPHontheGO with 0 pending positions

Safety

To be included on next month's report.

Employee/Labor Relations

- 3 Coaching & Counseling, 0 Verbal Warning, 0 Written Warnings, 0 Suspension, 0 Final Written Warning, 0 Termination, 0 Probationary Release
- 2 Grievances
- 0 Arbitrations
- 50 hours of Labor Meetings (with Union)
- 70 hour Investigatory Meetings
- 5 Investigations
- 17 Complaints & Concerns
- 100 hour ER/LR Meetings with managers or employees
- Number of EEOC/NERC and EMRB cases: 3

Interns

Interns and Clinical Rotations	May 2025	YTD
Total Number of Interns ¹	15	131
Internship Hours ²	444	3,822

¹Total number of students, residents, and fellows

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

Narrative:

There was a total of 15 interns and 444 applied public health practice hours in May 2025.

Training (In-Person and Online)

May 5, 2025 – New Hire Quarterly Check-In (6 attendees)

May 13, 2025 – Toolbox Training: Empowering Through Feedback and Coaching (16 Attendees)

May 20, 2025 – Toolbox Training: Mastering Time and Project Execution (12 Attendees)
May 20, 2025 – Public Speaking Workshop (11 Attendees)
May 21, 2025 – Toolbox Training: Understanding What Guides SNHD (13 Attendees)
OVS Climate Debrief: All Staff (500+ attendees)

OVS Focus Groups:

May 12, 2025: 13 attendees
May 13, 2025: 21 attendees
May 14, 2025: 10 attendees
May 15, 2025: 20 attendees

New Hire Orientation

No new hires in May 2025.

Informatics

A. EpiTrax

1. Work with the Epidemiology and Surveillance teams to monitor systems and applications, investigate and troubleshoot issues, and resolve them as they arise. Provide ongoing user account support.
 - i. Developed the Legionellosis Alchemer's survey import process into EpiTrax.
 - ii. Norovirus outbreak case Alchemer survey import process initiated and processed 84 cases into EpiTrax's Tuscany outbreak (2025-00072), with case status logic and case automatically approved update.
 - iii. TB Contact Import was done with 102 cases from ESL Class and 357 cases from NLVCCC for TB Contact Import.
 - iv. Resolved issues with the WebIZ integration with EpiTrax.
 - v. Resolve issues for some events when staff click to print the RVCT PDF report in EpiTrax.
 - vi. Update STI/HIV risk assessment form for additional fields.
 - vii. Show user who created an outbreak.
 - viii. Add "Jail/Prison" as a new option value in STD interview record.
 - ix. Added Acute HIV Section to STD Core Elements Form.
 - x. Added repeat section data to EpiTrax Data Export Portal.
 - xi. Updated form import/export process for TB and Acute HIV Fields.
 - xii. Added core field follow-up capability for treatment given field.
 - xiii. Created new LTBI questions for TB condition for NMI data submission.
2. Continue working with OpenEMPI integration with EpiTrax system:
 - i. Upgraded OpenEMPI to the latest version.
 - ii. Prepare more ELR test cases to test against EMSA2 person matching logic and verified against OpenEMPI workflow to ensure the process of person matching is valid and match with current EMSA2 logic.
 - iii. Developed an automation process to crosscheck with OpenEMPI to get the latest updated.

EpiTrax Requests	March 2025	April 2025	May 2025
EpiTrax Requests Completed	474	489	507
EpiTrax Requests Opened	74	77	71

B. Electronic Message Staging Area (EMSA)

1. Continue to work on EMSA2, including mapping new codes, integrating incoming labs, data processing, and reviewing logic for exceptions and errors.
2. Conduct regular sessions to review message exceptions.

3. Continue validating and on-boarding UHS eCR in EMSA.

ELRs	April 2025	May 2025
Total Received	111,563	133,101
Total Processed	110,858	132,258
Under Review	699	868
Event Updated	19,158	24,114
Event Created	5,912	17,288

eCRs	April 2025	May 2025
Total Received	308,283	729,905
Total Processed	110,234	35,395
Under Review	350,019	1,316,998
Event Updated	2,661	775
Event Created	472	68

C. Data Warehouse

1. Updated logic for facilities tables to allow showing of all facilities.
2. Reworked ETL script for form question tables to filter out deleted forms from user views - incorporate form_reference table.
3. Updated and re-labeled STD/HIV disposition and contact disposition on warehouse tables.

D. Pentaho Report

Pentaho Reports	March 2025	April 2025	May 2025
Updated	2	5	5
Created	1	1	0

E. Dashboard

1. Respiratory disease ArcGIS dashboard: COVID-19, Flu and RSV dashboards updated custom date ranges for each graph and names. Data pipeline process to update dashboard established.
2. Power BI finance billing dashboard: Prepare and continue developing additional reports from staff feedback; summary, claim, and CPT.

F. Southern Nevada Public Health Laboratory (SNPHL)

1. Continue National Respiratory and Enteric Virus Surveillance System (NREVSS) support.
2. Ongoing Laboratory Information System (LIS) Support and Maintenance.
3. Ongoing SNPHL data warehouse cleanup and maintenance.
4. Continue expanding the Outreach system to enhance efficient and timely specimen ordering and result delivery for partners.
5. Add location, clinical questions, orderables for the Outreach system.
6. Moving clients from faxing to the Outreach system for order/result delivery.
7. Continue to build reports/data extracts for various data requests and Quality Assurance (QA).
8. Setting up Decatur lab interface with Outreach and eCW.
9. Candida susceptibility testing has gone into production.
10. New GI and Resp panels for new Diasorin Torch machine.

G. Electronic Health Record (EHR) System

1. Maintain the system to support patient care and documentation, with configuration adjustments to enhance charting, reporting efficiency, and to accommodate new locations and services.
2. Continue data extraction and processing using Fast Healthcare Interoperability Resources (FHIR); collaborate with NV HIE and eCW on eCR and FHIR implementation.
3. Continue adopting Azara, the data warehouse and analytics platform. Ongoing review of Clinical Quality Measures (CQM) and calculations to ensure accuracy and quality improvement.
4. Build new SNPHL lab orders in the EHR.
5. Implement Obstetrics Flowsheet in the EHR.
6. Modify Obstetrics History Walk-in template to capture Obstetric History of patients.
7. Continue working with Finance to optimize claims monitoring and reporting by utilizing the Datawarehouse and Data Visualization tools (Power BI).
8. Generate and review monthly reports for FQHC and Primary Care Center (8 reports).
9. Implement Chronic Care Management/Principal Care Management (CCM/PCM) module.
10. Resolved an issue with TB Reports from NSPHL with missing reported Date/Time.
11. Implementing an interface and workflow for automated urinalysis testing using Clinitek (instrument) and Orchard/EHR.

eCW Reports	April 2025	May 2025
FQHC	4	6
PPC	4	2

EHR Requests	May 2025
Requests Completed	24
Requests Opened	26

H. Clark County Coroner's Office (CCCO)

1. Continue to provide support to CCCO on new Coroner and Medical Examiner Case Management System (CME) implementation, testing, data requests, and reports. Providing post go-live support.
2. Fulfill internal and external data requests using aggregated death data.
3. Assist Public Information Officer with location and release of high-profile deaths.
4. Continue to work with the vendor to implement end user requests/enhancements, including user requirements and end user testing.
5. Continue to work with CME vendor to correct data inconsistencies due to past bugs for reporting purposes.

I. Data Modernization Initiative (DMI)

1. eCR project: Continue UMC/HCA/Intermountain Healthcare Inc/UHS error except handling and mapping new codes.
2. Continue working with AWS with a pilot project using AI with eCR messages to extract important information.
3. Completed setting up DIBBS query connector service in our test environment with all test FHIR endpoints.
4. MMG TB/LTBI implementation spreadsheet approved by CDC.
5. Prepare Test scenario case worksheet for TB/LTBI cases.
6. Continue the implementation spreadsheet for MMG; Mump, Pertussis, and Varicella.
7. Continue adding PHIN VADS for Mump, Pertussis, and Varicella in NMI.

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

1. Continue to maintain and enhance syndromic surveillance system for new providers and future support.
2. Continue onboarding four new Intermountain Healthcare clinics. Expected completion Fall 2025.

K. Other Projects

1. Maintain and enhance the iCircle web application, including user account support, site maintenance, data corrections, and updates.
2. Testing new database upload process for Rocky Mountain Poison Control feed.
3. Exploring an automated reconciliation process for pharmacy Explanation of Benefit files (EOB).
4. Completed ticketing system to efficiently log and track Informatics requests.
5. Continue supporting the PILLARS team member for access to HIE standardized data.
6. Continue developing an ODTA harm reduction display and CSV data export.
7. Deployed iCircle CHEMBIO rapid test feature in production for ODS staff to test before we go live in mid of June 2025.
8. Addressed the issue that was preventing users from submitting online morbidity reports.
9. Update FBI Access file issue that user cannot produce a report.

L. National and State Meetings/Workshops

1. Prepare CSTE posters and presentation for 2025 CSTE annual conference.
2. CSTE EHI Access Workgroup Meeting.
3. CSTE eCR Consensus Criteria Workgroup.
4. CSTE Electronic Laboratory and Disease Reporting Subcommittee Call.
5. CSTE - CDC Frontline Tools workgroup.
6. DMI LC Monthly Call.
7. BCHC Data Modernization Work Group.
8. Sync with EpiTrax NV Team.
9. Statewide Syndromic Surveillance Monthly Workgroup.
10. ECR Summit in Atlanta, GA (5/6/2025 - 5/7/2025).

Information Technology (IT)

Service Requests	May 2024	May 2025		YTD FY24	YTD FY25	
Service Requests Completed	931	920	↓	11,534	11,474	↓
Service Requests Opened	1050	1035	↓	12,911	12,881	↓
Information Services System Availability 24/7	May 2024	May 2025		YTD FY24	YTD FY25	
Total System	98.62	88.82	↓	97.79	85.67	↓
*Total Monthly Work Orders by Department	May 2024	May 2025		YTD FY24	YTD FY25	
Administration	245	279	↑	3139	3109	↓
Community Health	128	98	↓	1274	1123	↓
Environmental Health	121	146	↑	1975	1816	↓
Primary & Preventive Care	180	162	↓	2384	2296	↓
Disease Surveillance & Control	142	129	↓	1733	1502	↓
FQHC	212	182	↓	1832	2391	↑
Other	12	5	↓	147	172	↑

First Call Resolution & Lock-Out Calls	May 2024	May 2025		YTD FY24	YTD FY25	
Total number of calls received	1050	1035	↓	12,911	12,881	↓

Workforce Team – Public Health Infrastructure Grant (PHIG)

Workforce Team:

- Workforce engagements:
- Monthly Position Review Committee cancelled due to Hiring Freeze, May 14, 2025
- Prepared the May 2025 Hiring Plan for submission to CDC
- Prepared and met with DHO for monthly 1:1 meeting – providing updates and concerns regarding PHIG
- Met with DHO and HR re: end of NEOGOV contract in 2025
- Participated in a webinars re: Supporting Decision Makers using Opioid Settlement Funds; APHA re: Your Public Health Job Search: Transitioning Across Sectors; ASTHO webinar re: Texas DSHS Team share about their recent pilot of a leadership development program for new managers; PHIG Workforce Directors Peer Network meeting with Big Cities Healthcare Coalition; Hurricane season 2025 preparedness
- Participated and updated the HEC on ongoing and upcoming requirements for the PHIG
- Participated in the SNHD Finance meeting receiving updates on PHIG status, expenditures, and concerns
- Participated in the SNHD HR Employee Handbook Review
- Participated in the May's Board of Health Meeting

CDC Requirements:

- Monthly CDC Project Officer meeting was convened on May 14, 2025 – No decision on PHIG Strategy A2 funding for Year 4
- Finalized, reviewed, and approved monthly hiring plan for submission to the CDC
- Received notification of speaking engagement for the Region 9 HUB meeting in Sacramento, CA

Performance Management:

- 7 hours to complete the 16-week cohort of Public Health Leadership Pipeline certificate facilitated by Western Region of Public Health Training Center at University of Arizona School of Public Health
- 3.5 hours spent on Strategic Plan reporting and activity refreshing.
 - Preparing launch of then new and sixth strategic priority for the 5-year District Strategic Plan. Substance Use has been recommended by District leadership as a priority in our community worthy of resources.

Quality Improvement:

- Obtained 5 topic areas for observation by PHIG funded QI consultant visit over 3 days.
- Held 5 hours of office hours for QI drop-in questions and project coaching
 - Yielded 4 ideas for upgrading the way we catalog projects
 - Originated a new QI project with the Healthy Start (HS) group. QI Manager will work with the group on their objective of driving utilization of CWS by converting client leads to joining the HS program at SNHD
 - Spent 2 hours with program leadership and another two hours with staff discussing the process of converting leads to program participants including building personal emotional connection and messaging. Future steps include collaboration on a scorecard to use for successful calls to grow the program closer to capacity.
- Spent 9 hours observing workflows followed by discussion with managers and staff around potential areas for improvement.

- QI Manager knowledge and understanding of clinical operations was greatly increased through this exposure and interaction with the consultant who served as an RN at Johns Hopkins earlier in their career.

PHAB Reaccreditation:

- 2 hours of consultation with documentation contributors
- 2.5 hours of consultation with Safety Officer and project team on 2 distinct Safety QI projects
- 1.7 hours with the new Accreditation Coordinator at Carson City HHS to establish a partnership in getting the most out of the PHAB process in our environments.
- 4 virtual hours with ASTHO staff in the first cohort of the Building Capacity for Accreditation Sustainability Learning Community. Communication strategies from this group have been valuable in communicating to contributors and the public for awareness of the value of this work.
- Participated in ChangeLab webinar re. Use of law and policy to advance social determinants of health. SNHD will be accountable to PHAB for improving select determinants beginning in 2027 as a Reaccredited Agency.

PHIG:

- Continued to maintain and monitor impacts to the grant budget and constantly managed expenses.
- Met with Budget Analysts and both PHIG Accountants during this period to discuss budget, impacts, and work on budget alignment

Appendix A – Office of Communications

Media, Collateral and Community Outreach Services	May 2024	May 2025		YTD FY24	YTD FY25	
Media – Digital/Print Articles	40	43	↑	404	353	↓
Media – Broadcast stories	191	135	↓	1,276	1,056	↓
Collateral – Advertising/Marketing Products	27	27	=	249	287	↑
Community Outreach – Total Volunteers ¹	9	8				
Community Outreach – Volunteer Hours	676	498	↓	6,752	7,108	↑

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

Social Media Services		May 2024	May 2025		YTD FY24	YTD FY25
Facebook SNHD	Followers	13,439	13,627	↑	13,439	13,627
Facebook GHCC	Followers	6,128	6,114	↓	6,128	6,114
Facebook SHC	Followers	1,646	1,625	↓	1,646	1,625
Facebook THNK/UseCondomSense	Followers	5,322	5,193	↓	5,322	5,193
Facebook Food Safety	Followers	137	177	↑	137	177
Instagram SNHD	Followers	4,591	5,215	↑	4,591	5,215
Instagram Food Safety	Followers	529	535	↑	529	535
Instagram GetHealthCC	Followers	196	296	↑	196	296
Instagram @Ez2stop	Followers	941	151	↓	941	151
X (Twitter) EZ2Stop	Followers	429	417	↓	429	417
X (Twitter) SNHDflu	Followers	1,838	1,746	↓	1,838	1,746
X (Twitter) Food Safety	Followers	104	99	↓	104	99
X (Twitter) SNHDinfo	Followers	10,331	9,954	↓	10,331	9,954
X (Twitter) TuSNHD	Followers	343	341	↓	343	341
X (Twitter) THNK/UseCondomSense	Followers	684	654	↓	684	654

X (Twitter) SoNVTraumaSyst	Followers	127	121	↓	127	121
Threads SNHD	Views	749	948	↑	749	948
TikTok @Ez2stop	Views	14	47	↑	14	47
*TikTok SNHD	View	0	225	↑	0	225
YouTube SNHD	Views	229,944	167,954	↓	2,292,147	2,046,819
YouTube THNK/UseCondomSense	Views	711	126	↑	4,413	4,633

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

*SNHD added to TikTok September 2024.

Appendix B – Finance – Payroll Earnings Summary – May 10, 2025 to May 23, 2025

PAYROLL EARNINGS SUMMARY May 10, 2025 to May 23 2025

	Pay Period	Calendar YTD	Fiscal YTD	Budget 2025	Actual to Budget	Incurred Pay Dates to Annual
PUBLIC HEALTH & PREVENTATIVE CARE	\$ 310,118.30	\$ 3,542,719.50	\$ 7,892,888.95	\$ 9,058,929.17	87%	
ENVIRONMENTAL HEALTH	\$ 644,894.25	\$ 7,255,856.90	\$ 15,736,256.09	\$ 17,395,932.56	90%	
COMMUNITY HEALTH	\$ 312,415.23	\$ 3,468,330.12	\$ 7,465,645.15	\$ 9,106,716.49	82%	
DISEASE SURVEILLANCE & CONTROL	\$ 379,706.92	\$ 4,272,563.41	\$ 9,218,625.35	\$ 10,380,887.13	89%	
FQHC	\$ 341,735.45	\$ 4,048,137.82	\$ 8,622,258.01	\$ 9,701,463.62	89%	
ADMINISTRATION W/O ICS-COVID	\$ 596,901.52	\$ 6,828,686.25	\$ 14,698,306.40	\$ 15,310,550.82	96%	
ICS-COVID General Fund	\$ -	\$ -	\$ -	\$ -	0%	
ICS-COVID Grant Fund	\$ -	\$ -	\$ -	\$ -		
TOTAL	\$ 2,585,771.67	\$ 29,416,294.00	\$ 63,633,979.95	\$ 70,954,479.79	90%	92%
FTE	824					
Regular Pay	\$ 2,255,315.07	\$ 23,804,501.95	\$ 51,667,077.47			
Training	\$ 2,208.62	\$ 36,169.55	\$ 111,046.39			
Final Payouts	\$ -	\$ 257,542.51	\$ 415,123.38			
OT Pay	\$ 20,766.64	\$ 137,014.65	\$ 421,645.47			
Leave Pay	\$ 288,192.54	\$ 4,389,574.75	\$ 9,004,339.33			
Other Earnings	\$ 19,288.80	\$ 791,490.59	\$ 2,014,747.91			
TOTAL	\$ 2,585,771.67	\$ 29,416,294.00	\$ 63,633,979.95			

BI-WEEKLY OT/CTE BY DIVISION/DEPARTMENT May 10, 2025 to May 23 2025

Overtime Hours and Amounts

Comp Time Hours Earned and Value

ADMINISTRATION						
<u>Employee</u>	<u>Project/Grant Charged to</u>	<u>Hours</u>	<u>Amount</u>	<u>Employee</u>	<u>Hours</u>	<u>Value</u>
Munford, Elizabeth		1.00	51.54	Chacon, Yury	7.50	158.15
Ubando, Marjorie		6.50	335.03			
Plair, Tonia		11.50	672.75			
Masters, Christopher		4.75	158.41			
Ines, Heinrich		4.00	130.02			
Gonzales, Fabiana		0.50	23.85			
Murphy, Melissa		3.50	136.00			
To, Helen		2.00	108.44			
Herrera Ortiz, Maria		8.00	266.80			
De Lisle, Ricky		0.75	27.70			
Total Administration		42.50	1910.54		7.50	158.15
COMMUNITY HEALTH SERVICES						
<u>Employee</u>	<u>Project/Grant Charged to</u>	<u>Hours</u>	<u>Amount</u>	<u>Employee</u>	<u>Hours</u>	<u>Value</u>
Total Community Health Services		0.00	0.00		0.00	0.00
FQHC-COMMUNITY HEALTH CLINIC						
<u>Employee</u>	<u>Project/Grant Charged to</u>	<u>Hours</u>	<u>Amount</u>	<u>Employee</u>	<u>Hours</u>	<u>Value</u>
Orea-Valencia, Mirelly		0.50	21.00	Bingham, Julie	0.38	17.50
Romero, Esther		0.50	22.69			
Total FQHC-Community Health Clinic		1.00	43.69		0.38	17.50
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>
Robles, Cynthia		1.50	75.29			
Sprance-Grogan, Carolyn		20.00	1140.38			
Arquette, Jocelyn		6.00	453.39			
Garcia, Ruby		9.50	293.68			
Landini, Karleena		1.00	74.14			
Total Public Health & Preventative Care		38.00	2036.88		0.00	0.00

BI-WEEKLY OT/CTE BY DIVISION/DEPARTMENT

May 10, 2025 to May, 23 2025

Overtime Hours and Amounts

Comp Time Hours Earned and Value

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>
Hall, Nancy		10.00	736.71	Cavin, Erin	3.75	166.31
Franchino, Dominick		5.00	358.80	DeHaan, Christian	25.13	1201.98
Diaz, Nathan		1.50	99.78	Whiting-Green, Willandra	7.13	300.33
Santiago, Anthony		3.00	199.57	Sharif, Rabea	9.38	395.17
Sheffer, Thanh		9.00	583.09	Ramakrishnan, Veena	3.75	150.23
Piar, Diane		1.50	97.18	Hemberger, Adriana	9.75	318.27
Lett, Kendra		4.25	290.10	Moreno, Kristina	9.75	380.25
Pontius, Kevin		0.50	32.39	Blackard, Brittanie	6.00	211.27
Sumera, Erik		9.00	554.58	Kuehn, Jennifer	8.63	296.38
Lucas, Brianna		3.00	184.86	Diaz-Ontiveros, Luz	3.75	125.48
Holloway, Summer		9.50	570.87	Jones, Mallory	4.50	150.57
Thompson, William B		2.50	150.23	Sripramong, Jacqueline	9.38	306.03
Walton, Shaunte		4.50	243.98	Ross, Alyssa	4.13	127.91
Rakita, Daniel		19.25	966.17	Ballard, Jessica	3.50	111.32
McCann, Alexandra		2.50	125.48	Vinh, Jonathan	8.63	260.95
Griggs, Zachary		3.50	175.67	Erickson, Sarah	3.75	113.46
Calzado, Neil		11.50	577.19	Hernandez, Abel	3.75	110.51
Jones, Mallory		8.00	401.53			
Sabandith, Vetahya		8.50	426.62			
Thein, Kelsey		1.25	62.74			
Wells, Jordan		19.50	978.73			
Brown, Tevin		4.25	213.31			
Goldstein, Daniel		16.25	815.60			
Craig, Jill		3.00	146.89			
Wade, Cynthia		7.50	367.24			
Harris, Raine		6.00	293.79			
Ahmed, Maryam		6.50	318.26			
Santos-Perez, Itchel		9.50	431.14			
Bidinger, Joy		3.75	183.62			
Galvez, Alexis		8.00	391.71			
Hall, Alyssa		1.25	56.73			
Gonzalez, Kimberly		7.00	317.68			
Dunne, Rebecca		9.50	431.14			
Vinh, Jonathan		8.50	385.76			
Weber, Lauren		14.00	635.36			
Choi, Andrew		11.25	497.31			
Concepcion, Derrell Glen		3.50	154.72			
Hernandez, Ullian		7.00	309.44			
Herrera, Carlos		10.00	442.05			
Roberts, Jamie		1.25	55.26			
Nwaonumah, Nosa		9.50	419.94			
Hernandez, Abel		11.25	497.32			
Thompson, Deshawn		2.50	110.51			
Ramos, Anabel		0.50	21.53			
Gonzalez, Jorge		4.75	204.53			
Total Environmental Health		303.75	15517.11		124.63	4726.41

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>
Shingu, Michele		8.00	532.18	Raman, Devin	0.38	18.42
Flournoy, Tiffany	HIVPRV25	7.50	462.15			
Pulver, Katarina	ODTAA_25	5.00	264.09			
Total Disease Surveillance & Control		20.50	1258.42		0.38	18.42
Combined Total		405.75	20766.64		132.88	4920.47

Appendix C – Finance – Payroll Earnings Summary – May 24, 2025 to June 6, 2025

PAYROLL EARNINGS SUMMARY May 24 2025 to June 6, 2025

	Pay Period	Calendar YTD	Fiscal YTD	Budget 2025	Actual to Budget	Incurred Pay Dates to Annual
PUBLIC HEALTH & PREVENTATIVE CARE	\$ 308,923.80	\$ 3,851,643.30	\$ 8,201,812.75	\$ 9,058,929.17	91%	
ENVIRONMENTAL HEALTH	\$ 638,201.17	\$ 7,894,058.07	\$ 16,374,457.26	\$ 17,395,932.56	94%	
COMMUNITY HEALTH	\$ 316,526.47	\$ 3,784,856.59	\$ 7,782,171.62	\$ 9,106,716.49	85%	
DISEASE SURVEILLANCE & CONTROL	\$ 374,678.43	\$ 4,677,922.76	\$ 9,623,984.70	\$ 10,380,887.13	93%	
FQHC	\$ 341,956.01	\$ 4,390,093.83	\$ 8,964,214.02	\$ 9,701,463.62	92%	
ADMINISTRATION W/O ICS-COVID	\$ 605,114.10	\$ 7,434,793.79	\$ 15,304,413.94	\$ 15,310,550.82	100%	
ICS-COVID General Fund	\$ -	\$ -	\$ -	\$ -	0%	
ICS-COVID Grant Fund	\$ -	\$ -	\$ -	\$ -		
TOTAL	\$ 2,585,399.98	\$ 32,033,368.34	\$ 66,251,054.29	\$ 70,954,479.79	93%	96%
FTE	822					
Regular Pay	\$ 1,958,083.79	\$ 25,764,103.52	\$ 53,626,679.04			
Training	\$ 1,906.97	\$ 38,076.52	\$ 112,953.36			
Final Payouts	\$ -	\$ 286,030.00	\$ 443,610.87			
OT Pay	\$ 10,479.44	\$ 147,494.09	\$ 432,124.91			
Leave Pay	\$ 579,537.67	\$ 4,970,647.49	\$ 9,585,412.07			
Other Earnings	\$ 35,392.11	\$ 827,016.72	\$ 2,050,274.04			
TOTAL	\$ 2,585,399.98	\$ 32,033,368.34	\$ 66,251,054.29			

BI-WEEKLY OT/CTE BY DIVISION/DEPARTMENT May 24 2025 to June 6, 2025

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	465.13			
Keegan, Dahlia		5.00	257.72			
Ubando, Marjorie		3.00	154.63			
Thede, Stacy		5.50	183.42			
Urena, Malte		4.25	138.15			
Ines, Heinrich		9.00	292.55			
Gonzales, Fabiana		6.00	286.24			
Murphy, Melissa		13.25	514.85			
Sanabria, Luis		11.00	340.05			
Sterling, Nathan		13.80	426.61			
To, Helen		6.00	325.31			
Herrera Ortiz, Maria		12.50	416.87			
Total Administration		99.30	3801.53		0.00	0.00

COMMUNITY HEALTH SERVICES						
Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	Value
Young, Angela	PHEPLB25	0.75	58.18	Barry, Nancy	0.38	12.89
Archile, Lisa	HD504_24	5.00	204.55			
Figueredo-Perello, Alessandro	PHEPLB25	4.00	216.87			
Montgomery, Stephanie	PH2HP_25	5.00	215.30			
Total Community Health Services		14.75	694.90		0.38	12.89

FQHC-COMMUNITY HEALTH CLINIC						
Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	Value
Orea-Valencia, Mireilly		0.75	31.51	Avalos, Mayra	1.88	83.15
Valdes-Ayala, Beatriz		0.20	8.18			
Delarmente, Joannah	FP_25 NO MILEA	0.15	10.50			
Romero, Esther		0.75	34.04			
Total FQHC-Community Health Clinic		1.85	84.23		1.88	83.15

PUBLIC HEALTH & PREVENTIVE CARE						
Employee	Project/Grant Charged to	Hours	Amount	Employee	Hours	Value
Robles, Cynthia		6.50	326.24	Johnson, Jessica L	-2.25	-104.99
Arquette, Jocelyn		0.25	18.89	Contreras, Alondra	0.75	37.78
McTier, Chika		0.25	17.50			
Landini, Karleena		0.25	18.53			
Total Public Health & Preventative Care		7.25	381.16		-1.50	-67.21

BI-WEEKLY OT/CTE BY DIVISION/DEPARTMENT
May. 24 2025 to June 6, 2025

Overtime Hours and Amounts

Comp Time Hours Earned and Value

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>
Hall, Nancy		10.00	736.70	Sharif, Rabea	1.13	47.42
Garcia, Jason		1.00	66.52	Ortiz-Rivera, Vanessa	3.38	145.77
Taylor, George		5.00	332.62	Nguyen, Linda	3.75	161.97
Daspltt, Theresa		0.25	16.63	Jones, Mallory	1.13	37.64
Franchino, Dominick		3.00	221.01	Ross, Alyssa	2.25	69.77
Diaz, Nathan		1.50	99.78	Galvez, Alexus	10.50	342.75
Santiago, Anthony		3.25	216.20	Vinh, Jonathan	2.25	68.07
Sheffer, Thanh		10.50	680.28	Erickson, Sarah	2.63	79.42
Moreno, Kristina		0.25	14.62			
Nguyen, Linda		-3.75	-242.95			
Nguyen, Linda	PH1EH_23 NO M	6.25	404.92			
Cummins, Veronica		1.50	85.53			
McCann, Alexandra		3.25	163.12			
Michel, Guillermo		6.75	338.79			
Thein, Kelsey		1.75	87.83			
Wells, Jordan		1.50	75.29			
Brown, Tevin		3.50	175.67			
Ahmed, Maryam		8.00	391.72			
Bidinger, Joy		1.50	73.45			
Hall, Alyssa		3.00	136.15			
Vinh, Jonathan		3.50	158.84			
Weber, Lauren		3.50	158.84			
Erickson, Sarah		-1.00	-45.38			
Hernandez, Lillian		6.00	265.23			
Herrera, Carlos		4.75	209.97			
Roberts, Jamie		1.50	66.31			
Hernandez, Abel		13.25	585.72			
Flors, Ryan		1.00	44.21			
Total Environmental Health		100.50	5517.62		27.00	952.82

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>
				DiGoregorio, Amanda	3.00	108.44
Total Disease Surveillance & Control		0.00	0.00		3.00	108.44
Combined Total		223.65	10479.44		30.75	1090.09



Memorandum

Date: June 26, 2025

To: Southern Nevada District Board of Health

From: **Xavier Gonzales, PhD, Community Health Director**
Cassius Lockett, PhD, District Health Officer

Subject: Community Health Division Monthly Activity Report – May 2025

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

A. Chronic Disease Prevention Program (CDPP)

Our CDPP worked with our contractor, Together We Can (TWC), to expand the **Double Up Food Bucks (DUFb) program**, a fruit and vegetable nutrition incentive program for people with SNAP benefits, to **two (2) new locations, which increases the total number of DUFb program locations to five (5)**. Obodo Greengrocer and The Just One Project Mobile Market were trained and onboarded in April. CDPP and TWC are also working together to implement strategies to increase the uptake and utilization of the DUFb program at the three (3) other DUFb implementation sites. A **transportation assessment** in partnership with the RTC is being conducted at **the three (3) other sites** to identify barriers to accessing these locations by bus, bicycle, or walking.

During April, CDPP staff **provided two (2) Diabetes Self-Management, Education & Support classes**. One (1) of the classes was provided virtually in English and one (1) in person class was provided in Spanish. A total of 20 people participated in one of the classes.

CDPP staff participated in **two (2) outreach events to promote the 5210 Healthy Habits Every Day initiative** in April. Over 550 people participated in the First 5 and Healthy Kids Day events. Also in April, CDPP added **one (1) new healthcare provider** to our list of 5210 champions. Additionally, CDPP staff developed new 5210 promotional materials including a coloring book and healthcare provider flyer.

The CDPP conducted **two (2) community blood pressure and prediabetes screenings** in April at a senior apartment complex and a place of faith. A total of 66 people were screened, and eleven (11) people were referred to local resources. In total this fiscal year, our community screening efforts have reached over 144 people at eleven (11) community and faith-based locations. Over 100 people have been referred to local resources including primary care, diabetes classes, and tobacco cessation resources.

B. Tobacco Control Program (TCP) Update

Work is ongoing to provide technical assistance and support tobacco-free policy adoption at **Nevada State University (NSU)** and **College of Southern Nevada (CSN)**. This month, TCP staff were notified that the NSU policy was signed and approved by leadership.

This month, the TCP and Clark County Medical Society (CCMS) began their annual partnership consisting of educational outreach to all CCMS members on the importance of evidence-based cessation treatments, best practices for tobacco use brief intervention and tobacco use prevention.

Staff **collaborated with Mater Academy East Las Vegas** to promote the Por Mi Por Ti Por Nosotros initiative during the school's annual Eggstravaganza and resource fair. Mater Academy ELV, serves students K-12 who are predominantly low-income and come from Spanish-speaking households. Staff were provided with various platforms to deliver the smoke-free living messages during the event. Staff distributed tobacco cessation resources in Spanish and English. There was an estimated attendance of over 1,000 people.

Staff collaborated with Fiesta Radio station 98.1 on the **Dia del Niño event held at the Craig Ranch Park Amphitheater in North Las Vegas.** This outdoor smoke and vape-free event gathered local and national musical talent to promote culture, diversity, and tobacco-free lifestyles among the Hispanic and Latino community. The event had over 8,500 people in attendance with a majority being Spanish speakers.

In April, **eight (8) local businesses** implemented voluntary smoke-free policy expansion such as limiting smoking outside entrances and exits to buildings.

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

A. OEMSTS – May 2024 / 2025 Data

May EMS Statistics	May 2024	May 2025		Mo. Fiscal Average 2024-2025
Total certificates issued	75	107	↑	319
New licenses issued	63	90	↑	85
Renewal licenses issued (recert only)	0	6	↑	228
Driver Only	41	58	↑	52
Active Certifications: EMT	908	952	↑	897
Active Certifications: Advanced EMT	1854	1880	↑	2048
Active Certifications: Paramedic	1944	2187	↑	2122
Active Certifications: RN	63	83	↑	72

III. OFFICE OF PUBLIC HEALTH PREPAREDNESS (OPHP)

A. Planning and Preparedness

1. Staff continued collaborating with Clark County an Impacted Persons Database. Currently working with community partners such as Las Vegas Resiliency Center for extension of services and other limited uses of the minimal necessary patient information for response and recovery operations. SNHD and community partners from Clark County Office of Emergency Management will be answering questions at a booth for Emergency Management Day at Legislature in Carson City, NV at end of month.
2. OPHP continued to review and revise emergency operation plans, threat response guides, and test these plans through internal and external training and exercises.
3. The Planners continue to review and revise the CHEMPACK, Nuclear and Radiation, Administrative Preparedness, Mass Care Support, and Highly Infectious Disease plans.
4. Planners continue to update the Nevada Continuity tool to streamline the process of generating a usable Continuity of Operations Plan (COOP). Planner has created a working group to complete the COOP process.
5. Our Planners have compiled departmental COOPs to create agency COOP and have submitted them to the program Supervisor.
6. Seventeen SNHD employees were FIT tested for personal protective equipment during the month of May.
7. Planners perpetuated revision of SNHD Basic EOP and Direction and Control Annexes.

8. Senior Planner met with representatives from the Closed POD Working group to discuss the direction of the working group and a revamp of the working group materials. Material review is underway.
9. The 2026 preparedness calendars were ordered and delivered. Distribution will begin in October 2025.
10. Staff continue to participate in NACCHO's Virtual Learning Collaborative for the Inclusion of MCH Populations in Emergency Preparedness and Response.
11. Senior Planner participated in Resources & Supply Chain Work Group and the Health Equity Work Group. Staff also participated in several other working groups that resulted from the State of Nevada Division of Public and Behavioral Health Public Health Preparedness Strategic Plan.
12. Planning staff continue to work on the biological tabletop exercise that will be held June 23rd.
13. OPHP planners are developing a Recovery Annex based on lessons learned from real world events and exercises.
14. The Clinical Advisor and OPHP management attended the monthly Local Emergency Planning Committee (LEPC) at Station 18.

B. Training, Exercises and Public Health Workforce Development:

1. OPHP Trainers continue to provide ICS Position Specific training to pre-assigned SNHD Emergency Personnel. The next offering is scheduled for June 25th.
2. OPHP continues to support the City of Las Vegas ICS 300/400 training schedule.
3. CPR training was provided to twelve (12) SNHD staff & MRC Volunteers May 7th - 8th.
4. The New Hire Orientation was provided to five (5) staff on May 21st.
5. Planners are developing the After-Action Report for the **Excessive Heat Seminar**.
6. Our Trainers continue planning for Introduction to Radiological/Nuclear WMP Operations (AWR-140) course at SNHD on June 16th.
7. An OPHP completed Instructor Re-certification for "Response to Bombing Incidents (RBI)" at New Mexico Tech/Energetic Materials Research and Testing Center. This course is planned to be offered to SNHD staff this Fall/Winter 2025.
8. Senior Planners participate in SNHD's Website Committee.
9. Our staff attended the NACCHO Preparedness Summit in San Antonio, TX April 28th – May 2nd.
10. Senior Planner participated in the LAS In-Person & Virtual Tabletop Exercise (TTX) – LAS Aircraft Emergency Response.
11. Our staff presented at the Resort Emergency Management Working group.
12. The Senior Planner attended the HSEEP course.
13. Senior Planners and Clinical Advisor attend AAST Disaster Committee – Hospital Disaster Preparedness: Pediatric Perspectives and 25NV-0574 HCV13 (Non-Resident) Healthcare Facility Mass Fatality Management seminars.

14. A collaboration between Community Health - OPHP and Disease Surveillance and Control participated in a measles exercise with Clark County School District to evaluate processes and plans should we get a measles case in Southern Nevada schools.

C. Southern Nevada Healthcare Preparedness Coalition (SNHPC)

1. Trainers and Clinical Advisor provided First Receiver Decontamination Training to ten (10) hospital staff at UMC on May 19th.
2. Trainers and Clinical Advisor are reviewing updates to the First Receiver Decontamination Training Program and plan for relaunch in Fall/Winter 2025.
3. Ongoing planning for Pediatric Disaster Response and Emergency Management and Medical Management of Chemical, Biological, Nuclear and Explosive (CBRNE) Events courses in 2026.
4. There is ongoing planning for PER 320 – Personal Protective Measures for Biological Events in Fall 2025, date/location TBD.
5. We are planning for Cybersecurity education by Cybersecurity & Infrastructure Security Agency (CISA), TBD.
6. Planners attended the UMC Emergency Preparedness Meetings.
7. Program manager and senior planner continue to leverage HPP award to support equipment and PPE needs of coalition members. Current requests for reimbursement include purchase of AEDs and CPR devices for local and rural fire department EMS to be used following mass casualty incidents and medical surge emergencies.
8. Planners continue efforts for the SNHPC August workshop.
9. Our Senior Planner and Clinical Advisor participate as advisors in Mountain View Hospital's Emergency Management Full Scale Community Wide MCI-Decontamination Drill with an influx of patients.
10. A Senior Planner and Clinical Advisor conducted initial coordination for Hospital Area Command Full Scale Exercises to be held in October.
11. Senior Planner and Clinical Advisor met with Nellis AFB to discuss the establishment of an RMOC (Regional Medical Operations Center).
12. Our Clinical Advisor supported City of Henderson's Ammonia Awareness Exercise.

C. Fusion Center Public Health Analyst:

1. Disseminating public health information between SNHD and the Southern Nevada Counter Terrorism Center (SNCTC), such as assessing the risks to human life and environmental concerns of a lithium-ion battery fire and updating the Emergency Counter Measures Coordinating Plan between LVMPD and SNHD.
2. Providing public health input for threat assessments on special event assessment rating (SEAR) 2, 3, and 4 events, such as Electric Daisy Carnival.
3. Participating in weekly counter terrorism analytic group (CTAG) meetings.
4. Attended Department of Homeland Security training for Analysts.
5. Developing appropriate connections to increase communication between SNHD, SNCTC and its partner organizations.

6. Collaborating with five (5) surrounding fusion centers on areas of public health concern. Produce and distribute monthly joint public health bulletins.
7. Distributing information on major recalls.
8. Monitored and advised select Fusion Center contacts of potential medical event of concern.

D. Grants and Administration:

1. OPHP continues to monitor and review grant spending for year end closeout.
2. Our manager continues to participate in SNHD 's second budget augmentation as well as monitor budgets for next fiscal year.
3. OPHP staff continue to complete budget and scope of work plan activities for SNHD finance and coordination of quarterly progress reports for state.
4. The OPHP Manager continues to represent Community Health Division management on various SNHD working group committees.
5. The OPHP team is revising scopes of work and budgets for FY2026 fiscal grant year. Current Budget assumptions are that we will be receiving level funding as a basis for estimating special revenue activities.
6. Our staff updated State on Preparedness Planning, Operations, Exercises, Training and Evaluation (POETE) working group.

E. Medical Reserve Corps (MRC) of Southern Nevada:

1. The MRC Coordinator attended the NACCHO Preparedness Summit in San Antonio, TX.
2. MRC Coordinator attended NACCHO PPAG meeting, MRC national program meetings, SNHPC meeting, planned training and activities for upcoming months, sent out newsletters, and continued to recruit and deactivate volunteers.
3. MRC Coordinator and one MRC Volunteer attended the United Way Volunteer Fair on May 10th to recruit new volunteers and distribute preparedness calendars.
4. MRC nurses provided blood pressure checks and distributed health information at health information at a Community Health Fair hosted by SNHD Fremont Clinic on May 29th. Some high readings were found and advised to seek care.
5. MRC and SNHD EMS office hosted Stop the Bleed training for 13 CERT volunteers.

MRC Volunteer Hours FY2025 Q4

(Economic impact rates updated April 2025):

Activity	April	May	June
Training	11		
Community Event	22	15	
SNHD Clinic			
Total Hours	33	15	
Economic impact	\$1,361.91	\$628.77	

IV. VITAL RECORDS

- A. May is currently showing **25% increase in birth certificate** sales in comparison to May 2024. **Death certificate** sales currently showing a **7% increase** in comparison to May 2024. SNHD received revenues of \$37,674 for birth registrations, \$22,555 for death registrations; and an additional \$9,188 in miscellaneous fees.

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

Vital Statistics Services	May 2024	May 2025		FY 23-24 (May)	FY 24-25 (May)	
Births Registered	1,692	2,005	↑	21,704	22,772	↑
Deaths Registered	1,794	1,747	↓	19,520	20,107	↑
Fetal Deaths Registered	11	16	↑	184	179	↓

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

Vital Statistics Services	May 2024	May 2025		FY 23-24 (May)	FY 24-25 (May)	
Birth Certificates Sold (walk-in)	16	1	↓	540	66	↓
Birth Certificates Mail	139	144	↑	1,405	1,342	↓
Birth Certificates Online Orders	3,261	4,160	↑	38,982	42,196	↑
Birth Certificates Billed	97	102	↑	1,242	1,229	↓
Birth Certificates Number of Total Sales	3,513	4,407	↑	42,169	44,833	↑
Death Certificates Sold (walk-in)	21	3	↓	367	231	↓
Death Certificates Mail	176	192	↑	1,692	1,811	↑
Death Certificates Online Orders	7,286	7,831	↑	84,270	87,473	↑
Death Certificates Billed	47	38	↓	417	463	↑
Death Certificates Number of Total Sales	7,530	8,064	↑	86,746	89,978	↑

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

Vital Statistics Sales by Source	May 2024	May 2025		FY 23-24 (May)	FY 24-25 (May)	
Birth Certificates Sold Valley View (walk-in)	.5%	0%	↓	1.3%	.1%	↓
Birth Certificates Mail	4%	3.3%	↓	3.3%	3%	↓
Birth Certificates Online Orders	92.8%	94.4%	↑	92.4%	94.1%	↑
Birth Certificates Billed	2.8%	2.3%	↓	2.9%	2.7%	↓
Death Certificates Sold Valley View (walk-in)	.3%	0%	↓	.4%	.3%	↓
Death Certificates Mail	2.3%	2.4%	↑	2%	2%	
Death Certificates Online Orders	96.8%	97.1%	↑	97.1%	97.2%	↑
Death Certificates Billed	.6%	.5%	↓	.5%	.5%	

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

Revenue	May 2024	May 2025		FY 23-24 (May)	FY 24-25 (May)	
Birth Certificates (\$25)	\$87,825	\$110,175	↑	\$1,054,225	\$1,120,825	↑
Death Certificates (\$25)	\$188,250	\$201,600	↑	\$2,168,650	\$2,249,450	↑
Births Registrations (\$13)	\$29,588	\$37,674	↑	\$366,223	\$381,186	↑
Deaths Registrations (\$13)	\$21,619	\$22,555	↑	\$250,770	\$258,684	↑
Convenience Fee (\$2)	\$6,802	\$8,578	↑	\$80,720	\$85,730	↑
Miscellaneous Admin	\$708	\$610	↓	\$7,226	\$7,548	↑
Total Vital Records Revenue	\$334,792	\$381,192	↑	\$3,927,814	\$4,103,423	↑

COMMUNITY HEALTH Passport Program – Fiscal Year Data

B. PASSPORT SERVICES – Passport Services is appointment only.

Applications	May 2024	May 2025		FY 23-24 (May)	FY 24-25 (May)	
Passport Applications	721	781	↑	7,310	7,975	↑
Revenue	May 2024	May 2025		FY 23-24 (May)	FY 24-25 (May)	
Passport Execution/Acceptance fee (\$35)	\$25,235	\$27,335	↑	\$255,850	\$279,125	↑

V. HEALTH EQUITY

- A. The Health Equity program works towards establishing community partnerships and collaborations to increase the capacity of communities to address health disparities.
1. May 5th, the Health Equity team distributed their quarterly newsletter covering and providing information on heart health, brain health, and health disparities among seniors. The newsletter is distributed to SNHD staff, partners and the general public.
 2. May 13th, the Health Equity program provided Molina Healthcare case management department staff with a presentation on programs and services provided by the Southern Nevada Health District. As a result of this presentation Molina Healthcare (MH) reached out to SNHD to discuss future collaboration, where clients could access vital records paid by MH.
 3. May 14th & May 21st, the Health Equity program facilitated the Diabetes Conversational Maps training with clients from the YMCA.

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	30	38
NAAT NG/CT	1658	1535
Syphilis	817	859
RPR/RPR Titers	135/41	140/52
Hepatitis Total	2926	2510

HIV/differentiated	726/25	774/23
HIV RNA	122	121

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 May, the average daily testing was seven (7) and the average turnaround time was 62 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.
- Since the script problem of Tecan instrument cannot be resulted by manufacture, we asked SNHD Contracts and SNHD Purchasing to discuss with manufacture to return this instrument if it is feasible.

Monthly summary of COVID PCR/NAAT testing:

Month	# PCR & NAAT/#POS	Month	# PCR & NAAT/#POS
January	471/74	July	-----
February	656/55	August	-----
March	630/22	September	-----
April	195/22	October	-----
May	141/9	November	-----
June	-----	December	-----

5. Reportable disease reports:

- SNPHL continues to perform routine testing of reportable disease specimens submitted by community stakeholders. Isolates tested are reported to OEDS on a weekly basis to aid in disease investigation, and SNPHL and OEDS coordinate with CDC PulseNet if required.

- A monthly summary of reportable diseases tests is listed as follows:

		Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec	Total
Campylobacter	Campy ID	9	4	3	2	2								20
	Campy Screen	12	8	4	3	6								33
Neisseria species	Gonorrhoeae Culture	33	32	47	48	30								190
	Gram Stain/WBC	0	5	0	0	0								5
	Neisseria ID	2	0	0	0	0								2
	Haemophilus ID	0	0	0	0	1								1
Unknown ID	Bacterial ID	0	0	0	0	2								16
	WGS (PulseNet)	14	12	20	8	26								86
Salmonella	Salmonella Screen	3	6	14	13	11								47
	Salmonella Serotype	3	7	13	13	9								45
Shigella	Shigella Screen	2	5	3	6	4								20
	Shigella Serotype	2	4	3	0	1								10
STEC	STEC Screen	0	3	3	1	5								12
	STEC Serotype	0	0	1	0	1								2
Unknown	Stool Culture	1	5	1	4	5								16
Vibrio	Vibrio ID	0	0	0	1	0								1
	Vibrio Screen	1	0	0	3	0								4

Yersinia	Yersinia Culture/ID	1	0	0	2	2								5
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B. Epidemiological Testing and Consultation:

1. SNPHL participates in the SNHD Outbreak Investigation Committee and Foodborne Illness Taskforce. There were three (3) samples for GI outbreak investigation in May.
2. SNPHL continues to report results of influenza testing to the CDC National Respiratory and Enteric Virus Surveillance System (NREVSS). In May, SNPHL performed one (1) 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.

2025	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec
Select Agent Rule out (total PCR)	0	2	0	1	3							

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 26 Whole Genome Sequencing tests (WGS) as part of PulseNet Foodborne Outbreak Surveillance in May 2025.
5. SNPHL uses Bruker MALDI-TOF instrument for streamlined screening of bacterial isolates. A total # of 162 bacterial organisms have been identified in May.
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 96 SARS-CoV-2-positive RNA extracts per week with expectations of increasing this capacity with appropriate staffing, instrumentation, and method development. As of May 2025, SNPHL has sequenced three (3) SARS-CoV-2-positive RNA extracts.
8. SNPHL coordinates and participates with Environmental Health and Veritas Labs for Legionella surveillance.

2025	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Legionella	3	22	0	26	62							

9. 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 May, we tested a total of 288 mosquito pool samples. There were zero (0) positive WNV mosquito pool samples identified in May. Environmental Health released the test result to the public after we informed the test result to them.
10. As part of the Gonococcal Isolation Surveillance Program (GISP) and enhanced GISP (eGISP), in May, a total of 30 clinical isolates, *Neisseria gonorrhoeae* thirteen (13) isolates and *Neisseria meningitidis* one (1) isolate, were collected and will be sent to either the regional laboratory for antimicrobial susceptibility testing (AST) or the CDC, respectively. Remnant NAATs or *N. gonorrhoeae* samples will be sent to the CDC for molecular-based AST testing as part of eGISP Part B.
11. SNPHL performs *C. auris* PCR screening using Real-Time PCR platform. We performed a total of 1195 samples in May.

D. All-Hazards Preparedness:

1. The SNPHL provides/assists testing for SNHD COVID 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 COVID Biosafety Training/Guidelines to Non-Traditional testing sites.
3. Our 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.
9. The laboratory received double door autoclave and awaiting the local contractor to extend the dry wall and power connection before installation.

E. May 2025 SNPHL Activity Highlights:

1. SNPHL maintains a consistent supply of Viral Transport Medium (VTM) for COVID collection kits, even after the cessation of ELC COVID funding. The reagents for PCR and WGS are expected to be depleted by August 2025.

2. Proficiency tests of WSLH Bordetella, WSLH Legionella, CAP IDR-Infectious Disease, Respiratory BIOFIRE, ID3-NAA Respiratory Limited, CAP AHIV Anti-HIV 1/2nad GI panel, BIOFIRE are 100% grade.
3. The SNPHL received the renewed CMS CLIA certificate for SNPHL. The expiration date of the renewed Certificate of Compliance is April 11, 2027. Also, we received the new state CLIA certificate with clinical chemistry, hematology and urinalysis. Dr. Lockett has signed the certificate.
4. Phoenix controls started the process of upgrades on the second floor May 14th (BSL3 is the last area upgraded. This will take place this week. It will require BSL3 to be completely shut down).
5. According to the WGS and genomic data analysis, the Omicron variant LP.B.1.1 lineages are domain lineages in May, from the samples received in the laboratory. The new hybrid lineage XEC also detected in the late of August till present. Our laboratory will keep sequencing the closed contact samples to help ODS to follow up on the investigation.
6. New influenza surveillance season showed that A/H3 and A/H1, and B/Victoria are major subtypes of influenza.
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 to rule out avian influenza. There was no suspect avian flu sample received in the lab in May.
8. The new design may focus on building BSL-3 and Micro lab in the 2nd floor and leaving semi shell for the 1st floor in the Phase I project.
9. May 27th, to June 9th, a local contractor will be installing a new double door autoclave for the BSL-3 laboratory. Throughout this timeframe, NSPHL will help us to perform our LRN-B testing if the FBI or Biowatch provides us with screening samples of potential select agent specimens.

F. COMMUNITY HEALTH – SNPHL – Calendar Year Data

May SNPHL Services	2024	2025	
Clinical Testing Services ¹	5,303	7,179	↑
Epidemiology Services ²	386	290	↓
State Branch Public Health Laboratory Services ³	0	0	
All-Hazards Preparedness Services ⁴	6	5	↓
Environmental Health Services ⁵	409	351	↓

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.

MEMORANDUM

Date: June 17, 2025

To: Southern Nevada Community Health Center Governing Board

From: Randy Smith, Chief Executive Officer, FQHC *RS*

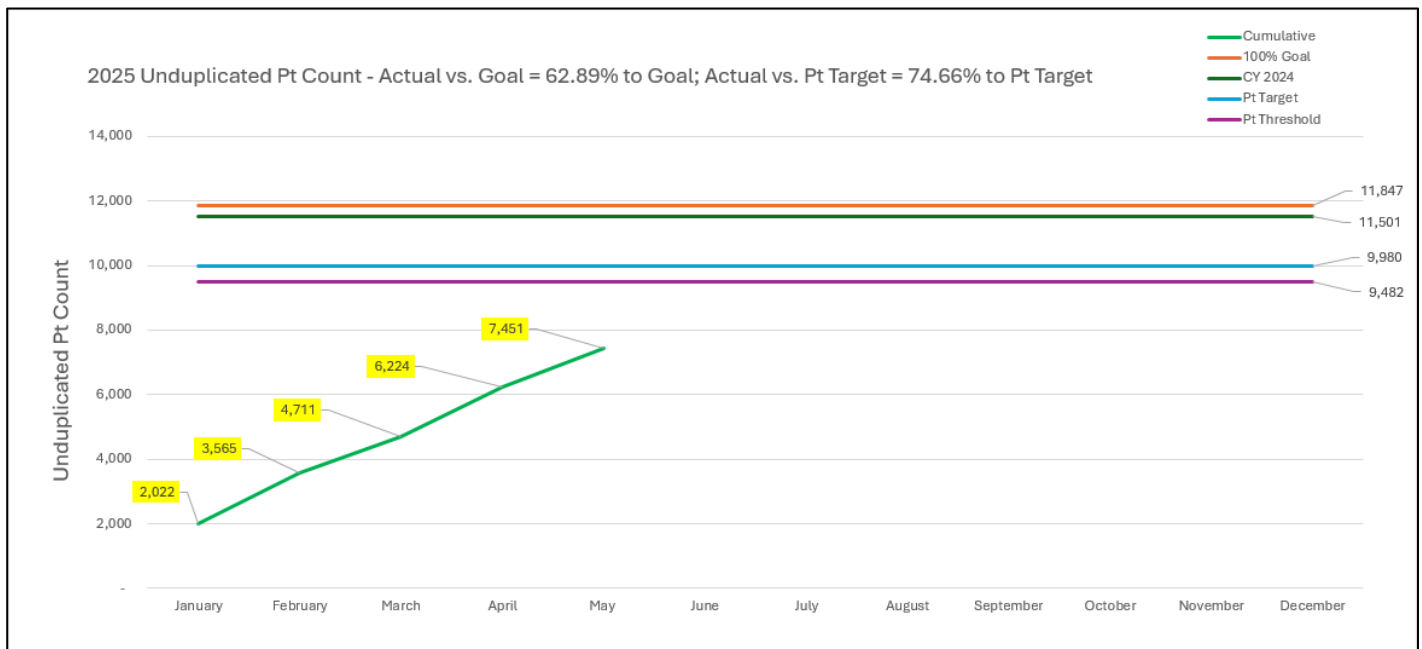
Cassius Lockett, PhD, District Health Officer *CL*

Subject: Community Health Center FQHC Chief Executive Officer Report – May 2025

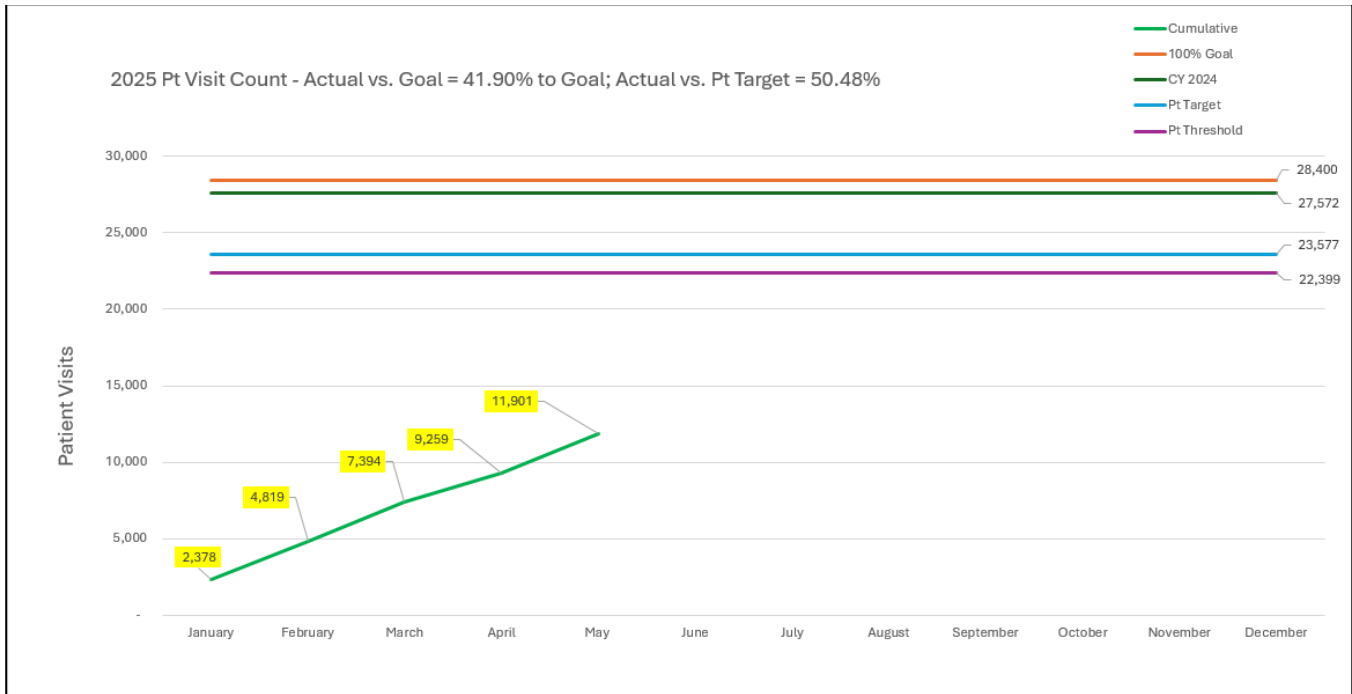
Division Information/Highlights: The Southern Nevada Community Health Center, a division of the Southern Nevada Health District, mission is to serve residents of Clark County from underserved communities with appropriate and comprehensive outpatient health and wellness services, emphasizing prevention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

Access

Unduplicated Patients – May 2025



Patient Visits Count – May 2025



Provider Visits by Program and Site – May 2025

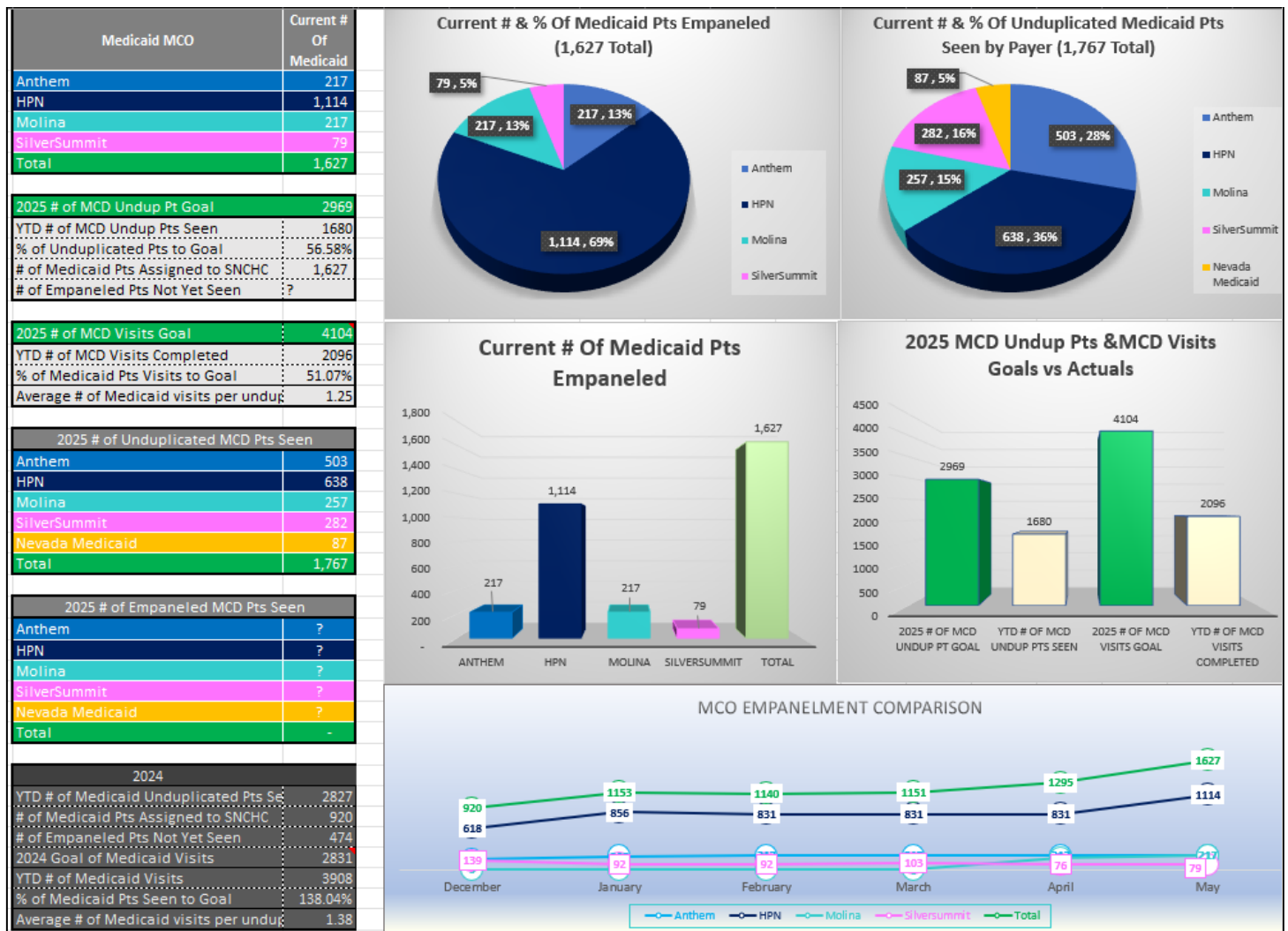
Facility	Program	MAY '25	MAY '24	MAY YoY %	FY25 YTD	FY24 YTD	FY YTD YoY%
Decatur	Family Health	756	553	27%	6,739	4,830	28%
Fremont	Family Health	443	375	15%	3,897	2,407	38%
Total	Family Health	1,199	928	23%	10,636	7,237	32%
Decatur	Family Planning	165	162	2%	1,744	1,641	6%
Fremont	Family Planning	132	83	37%	1,561	923	41%
Total	Family Planning	297	245	18%	3,305	2,564	22%
Decatur	Sexual Health	530	486	8%	5,165	6,161	-19%
Fremont	Sexual Health	159	81	49%	1,355	208	
ASEC	Sexual Health		139		113	1,349	
Total	Sexual Health	689	706	-2%	6,633	7,718	-16%
Decatur	Behavioral Health	121	153	-26%	1,331	1,419	-7%
Fremont	Behavioral Health	129	116	10%	1,183	236	
Total	Behavioral Health	250	269	-8%	2,514	1,655	34%
Decatur	Ryan White	222	200	10%	2,412	2,395	1%
Fremont	Ryan White	35	16		238	68	
Total	Ryan White	257	216	16%	2,650	2,463	7%
FQHC Total		2692	2364	12%	25738	21637	16%

Pharmacy Services

	May-25	May-24		FY25 YTD	FY24 YTD		% Change YOY
Client Encounters (Pharmacy)	1,645	1,303	↑	16,216	14,741	↑	10.0%
Prescriptions Filled	2,838	2,137	↑	27,494	21,524	↑	27.7%
Client Clinic Encounters (Pharmacist)	75	71	↑	720	408	↑	76.5%
Financial Assistance Provided	16	19	↓	360	199	↑	80.9%
Insurance Assistance Provided	6	2	↑	113	64	↑	76.6%

- A. Dispensed 2,838 prescriptions for 1,645 clients.
- B. Pharmacist completed 75 client clinic encounters.
- C. Assisted 16 clients to obtain medication financial assistance.
- D. Assisted 6 clients with insurance approvals.

Medicaid Managed Care Organization (MCO)



Behavioral Health Services

- A. During the month of May, two doctoral students from UNLV's School of Public Health: Department of Social & Behavioral Health, began volunteering. They are creating a tool to measure the effectiveness of integrated care currently taking place in the clinic between medical and behavioral health.
- B. Planning is underway to provide a support group to newly diagnosed HIV patients in the Ryan White program. The group will meet bimonthly and will be held in English and Spanish. The group aims to provide education on various topics in addition to providing therapeutic support. The facilitating team has been surveying patients to assist with understanding what topics are most pertinent to them. The group officially launches on June 3, 2025.
- C. For Mental Health Awareness Month, the Behavioral Health Manager was asked to speak on a panel, Salon Talk, and bring awareness to the topic of perimenopause, menopause, heart health, and how it impacts one's health and mental health.

Family Planning Services

- A. Family Planning program access was up 18% in May and is up 22% year-over-year. Program team administrators and clinical staff are currently engaged in a quality improvement project to increase access to care with the aim of simplifying the scheduling process and reducing waste in the appointment schedules. New appointment templates have been implemented in response to this work. A new lunch break schedule was implemented to increase access to care during the middle of the day. New metrics are being tracked focused on the percentage of appointments scheduled per provider per day as well tracking the third next available appointment by new and established appointments. The data will be used to make additional fine tuning to the appointment schedules.
- B. The program is going through a rebranding process to increase access to care to those most in need and provide more comprehensive sexual health services. This rebranding includes redefining the program as a provider of sexual and reproductive health services. Health center providers are receiving Family Planning specific training to support this transition.
- C. The program is scheduled for a comprehensive Title X site visit in September 2025. Work to prepare for the audit is under way.

HIV / Ryan White Care Program Services

- A. The Ryan White program received 58 referrals between May 1 through May 31. There were four (4) pediatric clients referred to the Medical Case management in May and the program received one (1) referral for pregnant women living with HIV during this time.
- B. There were 740 service encounters provided by the Ryan White Linkage Coordinator, Eligibility Worker, Care Coordinators, Nurse Case Managers, Community Health Workers, and Health Educator. There were 357 unique clients served under these programs in May.
- C. The Ryan White ambulatory clinic provided a total of 480 visits in the month of May, including 26 initial provider visits, 219 established provider visits including 4 tele-visits (established clients). There were 32 nurse visits and 203 lab visits. There were 45 Ryan White services provided under Behavioral Health by the licensed mental health practitioners and the Psychiatric APRN during the month of May.
- D. The Ryan White clinic continues to provide the Rapid StART services, with 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 May.

FQHC-Sexual Health Clinic (SHC)

- A. The FQHC Sexual Health Clinic (SHC) clinic provided 1,378 unique services to 822 unduplicated patients for the month of May. There are currently more than 100 patients receiving injectable treatment for HIV prevention (PrEP).
- B. 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. The FQHC SHC refers pregnant patients with syphilis and patients needing complex STI evaluation and treatment to PPC SHOPP for nurse case management services. The FQHC SHC Community Health Nurse team began providing services following the “Nurse Visit for Follow up (HIV) PrEP Therapy” standard operating procedure.
- C. One FQHC SHC provider and the CHN supervisor attended the Pacific AIDS Education and Training Centers Spring 2025 STI update, “A Syndemic Approach to HIV Care and Prevention Symposium”. The CHN supervisor participated as a panelist in the HIV Preexposure Prophylaxis (PrEP) panel discussion. The panel discussed processes, obstacles, strategies for patient retention in care, and lessons learned in establishing successful HIV PrEP services.
- D. There is one CHN vacancy in FQHC SHC due to a resignation.

Refugee Health Program (RHP)

Services provided in the Refugee Health Program for the month of May 2025.

Client required medical follow- up for Communicable Diseases	
Refugee Health Screening for Ova and Parasites (positive tests)	2
Referrals for TB issues	3
Referrals for Chronic Hep B	2
Referrals for STD	0
Pediatric Refugee Exams	3
Clients encounter by program (adults)	23
Refugee Health Screening for April 2025	26
Total for FY24-25	630

Outreach/In Reach Activity

Number of events	3 - outreach 0 - in reach
Number of people linked to the clinic	8
Number of people reached	124
Number of hours dedicated to outreach	11

Eligibility and Insurance Enrollment Assistance

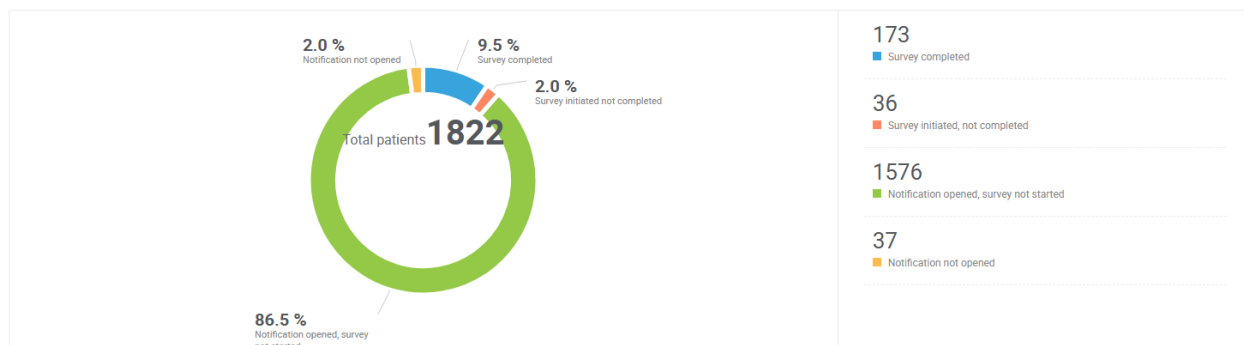
Patients in need of assistance continue to be identified and referred to community partners for help with determining eligibility for insurance and assistance with completing applications. Partner agencies are collocated at both health center sites to facilitate warm handoffs for patients in need of support.

Patient Satisfaction: See attached survey results.

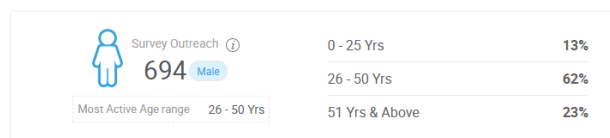
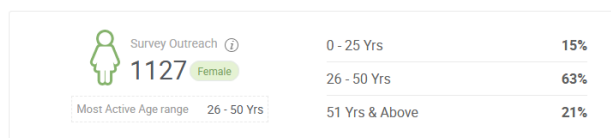
SNCHC continues to receive generally favorable responses from survey participants when asked about ease of scheduling an appointment, waiting time to see their provider, care received from providers and staff, understanding of health care instructions following their visit, hours of operation, and recommendation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

Southern Nevada Community Health Center Patient Satisfaction Survey – May 2025

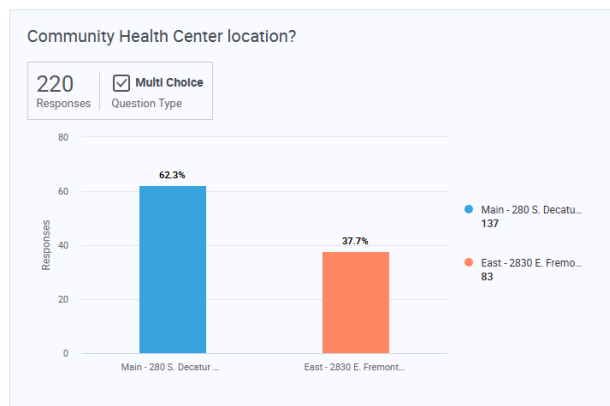
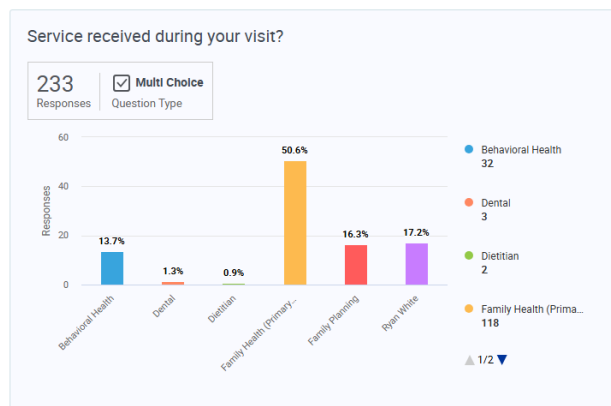
Overview



Gender



Service and Location

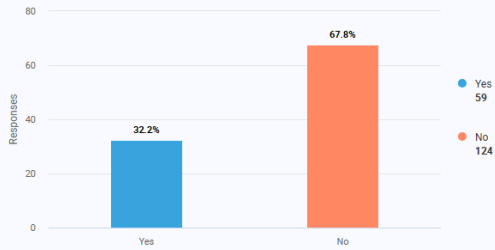


Provider, Staff, and Facility

Was your most recent visit for an illness, injury or condition that needed care right away?

183
Responses

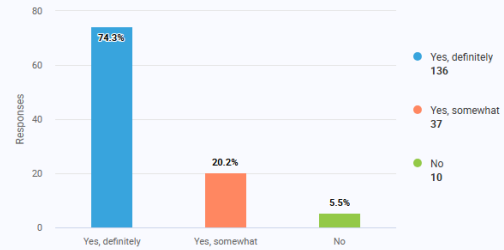
☒ Multi Choice
Question Type



Was the recent visit as soon as you needed?

183
Responses

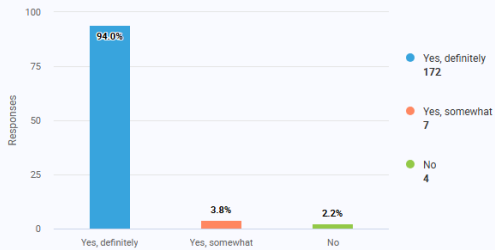
☒ Multi Choice
Question Type



During your most recent visit, did this provider explain things in a way that was easy to understand?

183
Responses

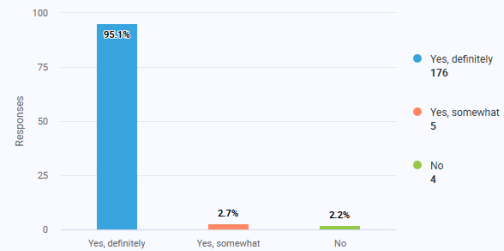
☒ Multi Choice
Question Type



During your most recent visit, did this provider listen carefully to you?

185
Responses

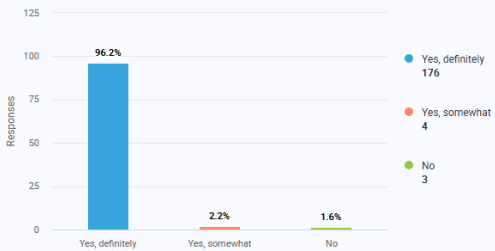
☒ Multi Choice
Question Type



During your most recent visit, did this provider show respect for what you had to say?

183
Responses

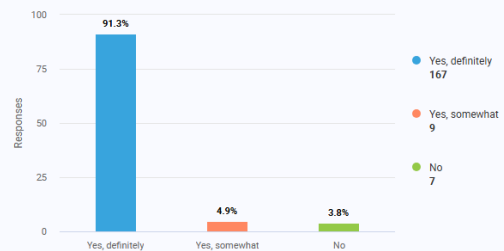
☒ Multi Choice
Question Type



During your most recent visit, did this provider spend enough time with you?

183
Responses

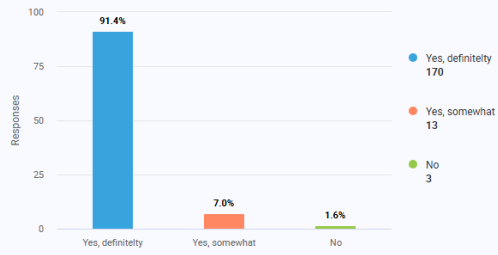
☒ Multi Choice
Question Type



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

186
Responses

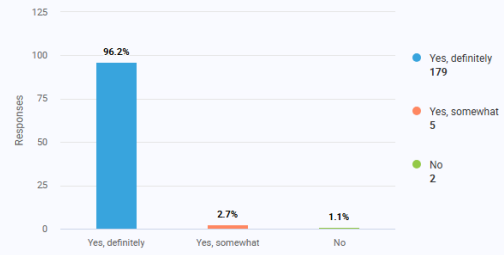
☒ Multi Choice
Question Type



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

186
Responses

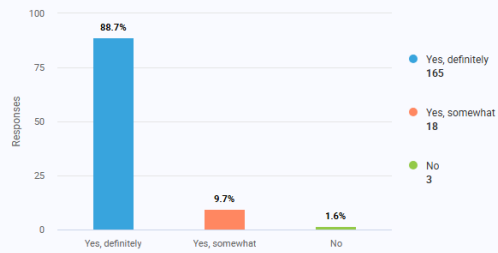
☒ Multi Choice
Question Type



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

186
Responses

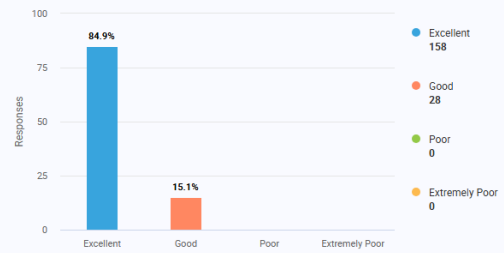
☒ Multi Choice
Question Type



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

186
Responses

☒ Multi Choice
Question Type



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

186

Responses

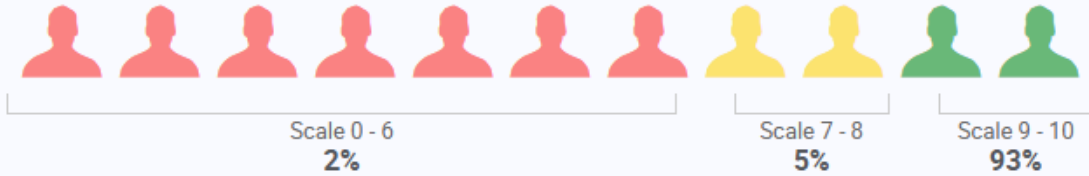
123

Numbers

Question Type

91

Net Promoter Score (NPS)



4

Scale 0 - 6

9

Scale 7 - 8

173

Scale 9 - 10

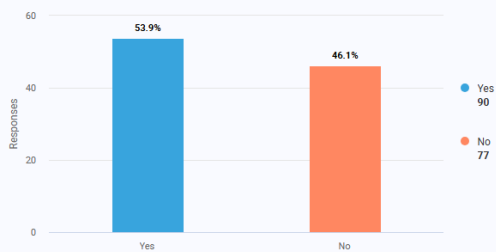
General Information

Do you have health insurance?

167

Responses

☒ Multi Choice
Question Type

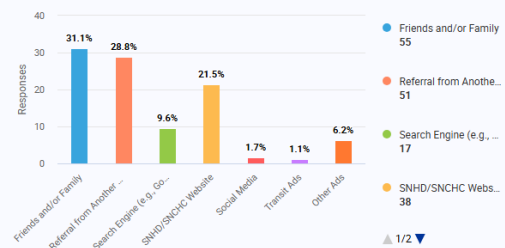


How did you hear about us?

177

Responses

☒ Multi Choice
Question Type



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

3 Counts under this section represent investigations conducted by ODS concerning pregnant persons with HIV or
syphilis and do not reflect actual counts of cases diagnosed in the specified period. These investigations are
aimed at monitoring and preventing adverse health outcomes, such as perinatal HIV transmission and
congenital syphilis.

4 The count reflects ODS efforts around pregnant persons with HIV and is not a reflection of the total number of
pregnant persons with HIV in our community. Persons living with HIV who become pregnant is not a
reportable condition in Clark County.

	May 2024	May 2025		YTD 24	YTD 25	
Vaccine Preventable						
Haemophilus influenzae, invasive disease	7	3	↓	24	18	↓
Hepatitis A	0	0	→	3	0	↓
Hepatitis B, acute	8	0	↓	18	12	↓
Influenza	62	28	↓	626	1099	↑
Pertussis	4	0	↓	33	20	↓
RSV	41	32	↓	1912	2197	↑
Enteric Illness						
Amebiasis	3	1	↓	4	4	→
Campylobacteriosis	23	16	↓	101	82	↓
Cryptosporidiosis	5	5	→	16	12	↓
Giardiasis	5	2	↓	26	21	↓
Rotavirus	25	36	↑	80	147	↑
Salmonellosis	12	11	↓	59	65	↑
Shiga toxin-producing Escherichia coli (STEC)	11	7	↓	39	26	↓
Shigellosis	15	1	↓	64	29	↓
Yersiniosis	2	3	↑	15	22	↑
Other						
Carbapenem-resistant Enterobacterales (CRE)	61	37	↓	288	224	↓
Candida auris	157	124	↓	816	517	↓
Coccidioidomycosis	19	9	↓	103	106	↑
Hepatitis C, acute	2	0	↓	5	6	↑
Invasive Pneumococcal Disease	18	12	↓	141	120	↓
Lead Poisoning	24	6	↓	84	64	↓
Legionellosis	3	5	↑	10	15	↑
Lyme Disease	1	0	↓	3	1	↓
Meningitis, aseptic	0	2	↑	11	9	↓
Meningitis, Bacterial Other	0	0	→	1	4	↑
Streptococcal Toxic Shock Syndrome (STSS)	1	4	↑	16	17	↑
New Active TB Cases Counted (<15 yo)	0	0	→	2	0	↓
New Active TB Cases Counted (>= 15 yo)	7	9	↑	28	33	↑

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	10	0	28	1
Gonorrhea	5	0	9	0
Syphilis	17	2	147	0
HIV/AIDS (New to Care/Returning to Care)	22	4	109	0
Tuberculosis	493	0	13	0
TOTAL	547	6	306	1
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

- a. 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 May 31, 2025, Clark County had 322 cases of Mpox.
- b. **Norovirus in oysters at local restaurants:** On 4/25/25, ACDC was notified of a foodborne illness complaint and coordinated with EH and OIE. DSC is investigating multiple restaurants and has found a possible association with oysters. Two people were confirmed Norovirus. A case control study is being conducted for people who ate at affected restaurants. This investigation is ongoing.
- c. **Legionella at two hotels:**
 - a. DSC is investigating 2 travel associated cases of Legionnaires' disease in individuals who stayed at the Southpoint Hotel in August 2024 and February 2025. DSC is working closely with EH to conduct environmental sampling and remediation efforts. The property is cooperating with EH and DSC staff in the investigation. Case finding is being conducted. The investigation is ongoing.
 - b. DSC is separately investigating 3 travel associated cases of Legionnaires' disease in individuals who stayed at the Grandview in February and April 2025. DSC is working closely with EH to conduct environmental sampling and remediation efforts. The property is cooperating with EH and DSC staff in the investigation. Case finding is being conducted. The investigation is ongoing.

- d. **Influenza:** SNHD started the influenza surveillance for the 2024-2025 season on September 29, 2024. Influenza surveillance for Clark County, Nevada includes data collected from local acute care hospitals and other healthcare providers. Nationwide, seasonal influenza activity is low. Statewide, outpatient respiratory illness activity in Nevada is minimal. Locally, as of 05/17/2025, for the 2024 - 2025 influenza season, 1873 influenza-associated hospitalizations and 102 deaths associated with influenza were reported and processed, with 72% of those mortalities occurring in individuals aged 65 and older. The total number of cases presented in this report is subject to change due to possible delays in reporting and processing. Influenza A has been the dominant type circulating. As of 06/2/2025, there have been 70 confirmed reported human cases of H5 bird flu, and 1 death associated with H5N1 bird flu infection in the United States. In Clark County, although H5 influenza was detected in wastewater surveillance in January 2025, there have not been any confirmed H5 influenza cases locally. The current public health risk of H5 influenza is low. There is no known person-to-person spread at this time. The influenza surveillance ended as of 5/17/2025.

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. Funding from SAMHSA's First Responders-Comprehensive Addiction and Recovery Act (FR-CARA), SAMHSA's State Opioid Response (SOR) via sub-awards from the University of Nevada Reno's Center for the Application of Substance Abuse Technologies, BJA's Comprehensive Opioid, Stimulant, and Substance Use Program (COSSUP), and the CDC's Overdose Data to Action (OD2A) program has been instrumental. 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 distributions took place in the month of May:

Naloxone Distribution	Agency	# of Naloxone doses distributed
5/1/2025	SNHD - Health Education	36
5/1/2025	SNHD - Pharmacy Decatur	60
5/1/2025	Clark County Library District	312
5/6/2025	SNHD - DIIS	100
5/7/2025	Clark County Dept of Juvenile Justice	144
5/8/2025	SNHD - L2A	27
5/8/2025	Desert Hope Treatment Center	240
5/8/2025	Sunrise Hospital Bar Study	240
5/8/2025	Catholic Charities	240
5/8/2025	SNHD - ACDC	432
5/15/2025	SNHD - FQHC Decatur	240
5/15/2025	Sunrise Hospital Bar Study	282
5/21/2025	SNHD - L2A	96
5/22/2025	SNHD - L2A	108
5/22/2025	Fusion Community Inc	240
05/27/2025	Vendnovation	52

Total		2849
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- 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 May:

FTS Distribution		
05/08/2025	SNHD L2A Team	100
05/08/2025	Catholic Charities	200
05/08/2025	Trac-B/Impact Exchange	200
05/14/2025	The Promise	200
05/14/2025	Foundation for Recovery	200
05/27/2025	Vendnovation	8
Total FTS:		908 Strips

XTS Distribution		
05/08/2025	Catholic Charities	200
05/08/2025	Trac-B/Impact Exchange	200
05/14/2025	The Promise	300
05/14/2025	Foundation for Recovery	1000
05/15/2025	SNHD L2A Team	200
05/21/2025	SNHD ODS Health Education	100
05/27/2025	Vendnovation	5
Total XTS:		2,005 Strips

6. Prevention - Community Outreach/Provider Outreach/Education

- b. 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, Sagebrush Health, 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.

- c. ODS continues to collaborate with community partners to participate at various outreach events. This month we were able to again partner with The City of North Las Vegas for their Festive May POP-UP at Tonopah Park located at 204 E Tonopah Ave on May 14th to provide services for those experiencing homelessness. Our team was onsite with condoms, education materials, PrEP navigation services, syphilis, and HCV testing, as well as harm reduction supplies. We continue our partnership with the Just Seen Project and LVMPD to provide rapid HIV, syphilis, and HCV testing, prevention, educational, and harm reduction services. This collaboration took place on May 22nd at the Orleans Arena Parking lot. 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.
- d. 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

1. 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	May-24	May-25		YTD 24	YTD 25	
Outreach/Targeted Testing	1144	1161	↑	5552	5980	↑
Clinic Screening (SHC/FPC/TB)	811	469	↓	4331	2818	↓
Outreach Screening (Jails)	211	146	↓	1236	1154	↓
Collect2 Protect	8	4	↓	55	30	↓
TOTAL	2174	1780	↓	11174	9982	↓
Outreach/Targeted Testing POSITIVE	5	0	↓	23	24	↑
Clinic Screening (SHC/FPC/TB) POSITIVE	1	0	↓	8	2	↓
Outreach Screening (Jails, SAPTA) POSITIVE	1	1	→	2	5	↑
Collect2 Protect POSITIVE	0	0	→	0	0	→
TOTAL POSITIVES	7	1	↓	33	31	↓

2. Targeted outreach in unhoused communities are ongoing. These cases are included in the total high impact HIV/STD/Hepatitis screening sites above. Efforts for this cohort started in March 2025. To date, 67 individuals have been screened. Treatment and linkage to care efforts continue.

Office of Disease Surveillance - Field Testing (January 2025 to May 2025)*			
	Number Tested	Number Positive	Percent Positivity
Chlamydia	2	1	50%
Gonorrhea	2	0	0%
Syphilis	59	7	12%
HIV	64	1	2%
Hepatitis B	2	2	100%
Hepatitis C	52	6	12%

**Provisional data is subject to change; does not include all negative clinical testing by PPC.*

C. Staff Facilitated/Attended the following Trainings/Presentations

1. 05/01/2025: Attended National Latinos Conference on HIV, HCV, and Substance Use; 2 ODS staff attended.
2. 05/01/2025: Attended Nevada SHSP Vulnerable Road Users Task Force meeting as SNHD Representative; 50 people attended; 1 ODS Health Educator attended.
3. 05/02/2025: Attended Big Cities Health Coalition (BCHC) Substance Use Working Groups as SNHD representative; 25 people attended; 1 ODS staff member attended.
4. 05/05/2025: Presented on CredibleMind at the Ending the HIV Epidemic Monthly workgroup meeting; 24 people attended; 4 SNHD ODS staff attended.
5. 05/05/2025: Presented on CredibleMind at the Public Health Preparedness Behavioral Health Resources Workgroup meeting; 8 people attended; 2 SNHD ODS staff attended.
6. 05/07/2025: Facilitated Harm Reduction Test Strip Train the Trainer for PACT Coalition Staff; 3 people attended; 1 ODS staff attended.
7. 05/07/2025: Published the 2025 Community Health Assessment Report. Accessible from: <https://www.healthysouthernnevada.org/tiles/index/display?id=356966798698245621>
8. 05/08/2025: Facilitated Congenital Syphilis clinical education training session at Dignity Health Siena; 8 people attended; 3 SNHD staff attended.
9. 05/08/2025: Presented on CredibleMind to Soleras Senior Living; 2 people attended; 2 SNHD ODS staff attended.
10. 05/10/2025: Trained community members at Raveduction event hosted by Trac-B; ~40 people attended; 1 ODS staff attended.
11. 05/12/2025: Facilitated meeting with library leadership at Clark County Windmill Library to discuss naloxone access project; 5 attendees, 3 ODS staff attended.
12. 05/12/2025: Facilitated SNHD SPORT program review with UMC Emergency Department and Crisis Response Center; 4 people attended; 3 ODS staff attended.
13. 05/13/2025: Facilitated Congenital Syphilis clinical education training session at Sunrise Emergency departments; 35 people attended; 3 SNHD staff attended.
14. 05/14/2025: Facilitated Making Every Door the Right Door Training; 9 people attended; 1 ODS staff attended.
15. 05/14/2025: Presented on CredibleMind at the Nevada 211 staff training meeting; 14 people attended; 1 SNHD ODS staff attended.
16. 05/15/2025: Presented to SNHD finance team on the importance of taking naloxone training and how to access the training via NeoGov; 30 people attended; 3 ODS Staff attended.
17. 05/15/2025: Facilitated Motivational Interviewing training; 9 people attended; 1 SNHD ODS staff attended.
18. 05/19/2025: Office of Epidemiology - Sr. Epidemiologist presented at The Center's National Asian and Pacific Islander HIV Awareness Day event.

19. 05/20/2025: Media interview with KNPR on community health assessment; 3 people attended, 1 ODS attendee.
20. 05/20/2025: Facilitated National Public Health Vending Machine (PHVM) Round Table; ~20 people attended; 1 ODS Staff attended.
21. 05/21/2025 – 5/22/2025: Facilitated Empower Change training; 13 people attended; 4 ODS staff attended.
22. 05/21/2025: Facilitated Overdose Response with Naloxone Training - College of Southern Nevada Sahara West Campus 2 people attended; 1 SNHD staff attended.
23. 05/22/2025: Presented to SNHD Board of Health with SNHD EPI on substance use data and SNHD efforts; 30 people attended; 1 ODS Staff attended.
24. 05/27/2025: Presentation of TB Cohort Review by Epi, ODS, and TB Clinic staff; 30 people in attendance.
25. 05/28/2025: Presented on CredibleMind to Nevada Department of Veteran Services; 2 people attended; 1 SNHD ODS staff attended.
26. 05/28/2025: Facilitated Overdose Response with Naloxone - Boyd Gaming; 19 people attended; 1 SNHD staff attended.
27. 05/29/2025: Facilitated Youth Mental Health First Aid training; 14 people attended; 2 SNHD ODS staff attended.

D. Office of Epidemiology

1. Epidemiology Reports

- a. Data quality reports to support the Office of Disease Surveillance's activities and STD/HIV grant deliverables.
- b. Monthly - Drug Overdose Report – External
- c. Monthly and quarterly disease statistics
- d. Weekly Mpox case and vaccination report
- e. Ongoing monthly and quarterly reports for FOCUS HIV grant project
- f. Monthly NVDRS, SUDORS and NCLPP reports
- g. Outreach site HIV testing stats-weekly
- h. EPT report- weekly
- i. Weekly Arbovirus Update (seasonal)

2. Other Project Updates

- a. Continue working on the Healthy Southern Nevada, Chronic Disease Dashboard
- b. CSTE EHI Access Workgroup Meeting
- c. 2025 SNHD Health Equity Report in progress

Disease Statistics

1. Communicable Disease Statistics: April 2025 disease statistics are below. Please note that these data are retrieved as of June 5, 2025. (see Table 1)

Table 1 Monthly Communicable Disease Statistics (April 2025)

Disease	2023		2024		2025	
	April	YTD	April	YTD	April	YTD
VACCINE PREVENTABLE						
COVID-19	2,431	14,293	468	5,493	644	2,776
Haemophilus influenzae, invasive	3	15	2	17	5	15
Hepatitis A	0	0	1	3	0	0
Hepatitis B, acute	3	7	2	10	2	12
Hepatitis B, chronic	135	365	91	422	111	439
Influenza	12	104	61	564	73	1,071
Meningococcal disease (<i>N. meningitidis</i>)	0	0	0	1	0	0
MPOX	0	2	2	3	0	0
Mumps	0	0	1	3	0	0
Pertussis	0	6	6	29	8	21
RSV	39	621	64	1,871	86	2,165
SEXUALLY TRANSMITTED						
Chlamydia	944	4,204	1,012	4,204	1,003	3,859
Gonorrhea	426	1,866	396	1,824	384	1,527
HIV	42	170	45	201	25	138
Stage 3 HIV (AIDS)	11	52	16	61	10	52
Syphilis (Early non-primary, non-secondary)	48	207	68	229	25	117
Syphilis (Primary & Secondary)	39	194	40	152	13	71
CONGENITAL CONDITIONS						
Hepatitis C, Perinatal Infection	0	0	1	2	0	0
Congenital Syphilis	3	25	9	23	4	22
ENTERICS						
Amebiasis	0	1	0	1	0	3
Campylobacteriosis	17	62	25	78	13	66
Cryptosporidiosis	1	3	2	11	5	7
Giardiasis	7	26	7	21	5	19
Rotavirus	10	18	26	55	56	111
Salmonellosis	17	59	17	47	11	54
Shiga toxin-producing <i>E. coli</i> (STEC)	3	11	8	28	8	19
Shigellosis	5	21	11	49	8	28
Vibriosis (Non-cholera <i>Vibrio</i> species infection)	0	1	2	5	0	4
Yersiniosis	1	3	1	13	7	19
OTHER						
Coccidioidomycosis	26	103	19	84	22	99
Exposure, Chemical or Biological	0	1	0	1	1	2
Hepatitis C, acute	0	1	2	3	3	6
Hepatitis C, chronic	439	1,053	153	548	199	669
Invasive Pneumococcal Disease	24	108	26	123	17	108
Lead Poisoning	14	56	17	60	6	58
Legionellosis	5	14	4	7	3	11
Listeriosis	0	0	0	1	0	0
Lyme Disease	0	0	0	2	0	1
Malaria	0	2	0	0	0	1
Meningitis, Aseptic	1	4	4	11	3	7
Meningitis, Bacterial Other	0	1	0	1	0	4
Meningitis, Fungal	0	0	1	3	0	0
Q Fever, acute	0	0	0	0	0	1
Rabies, exposure to a rabies susceptible animal	28	111	32	109	36	157
Streptococcal Toxic Shock Syndrome (STSS)	1	11	3	15	2	13
Tuberculosis (Active)	13	27	2	22	9	24

*The total number of cases presented in this report is subject to change due to possible delays in reporting and processing. Cases are counted based on CDC case definitions.

~Diseases not reported in the past two years or during the current reporting period are not included in this report.

~~Monthly rates & monthly rate comparisons were removed from the Clark County Disease Statistics monthly report after July 2018 due to new data suppression rules adopted by the Office of Epidemiology & Disease Surveillance. Please see the Clark County Disease Statistics quarterly report for quarterly rates & quarterly rate comparisons.



Memorandum

Date: June 26, 2025

To: Southern Nevada District Board of Health

From: Christopher D. Saxton, MPH-EH, REHS, *Director of Environmental Health* 
Cassius Lockett, PhD, *District Health Officer* 

Subject: Environmental Health Division Monthly Report

I. FOOD OPERATIONS PROGRAM

ENVIRONMENTAL HEALTH Food Operations Program – Fiscal Year Data

Food Operation Services	May 2024	May 2025		FY 23-24	FY 24-25	
Routine Inspections	2,178	2,537	↑	23,817	24,729	↑
Reinspections	202	210	↑	1,764	1,929	↑
Downgrades	149	192	↑	1,651	1,811	↑
Closures	19	22	↑	149	155	↑
Special Events	90	91	↑	816	802	↓
Temporary Food Establishments & Tasting Event Booths	1,186	1,167	↓	8,827	8,744	↓
TOTALS	3,824	4,219	↑	37,024	38,170	↑

↑ (Up Arrow) - Indicates an increase compared to the previous period.

↓ (Down Arrow) - Indicates a decrease compared to the previous period.

→ (Right Arrow) - Indicates no significant change compared to the previous period.

1. Enforcement Actions and Investigations:

A. Public Works Coffee, 222 S. Water St.: On May 1, the facility was closed for an IHH, no water. The plumbing issue was fixed, and water was restored. The facility was reinspected and reopened with three demerits on May 2.

B. Al Culichi Portable Unit for the Service of Food (PUSF), 2025 E. Sahara Ave.: On May 2, the unit was closed for multiple IHHs: pest infestation, lack of adequate refrigeration, and other conditions or circumstances that may endanger public health. The inspector documented 41 demerits. The unit remains closed at this time.

- C. Antojitos Mexicanos, 5560 E. Lake Mead Blvd.:** On May 9, the facility was closed for multiple IHHs: no water, pest infestation, lack of adequate employee toilets and handwashing facilities, and other conditions or circumstances that may endanger public health. The inspector documented 42 demerits. The facility was reinspected and reopened with zero demerits on May 22.
- D. Jack in the Box #7202, 800 N. Decatur Blvd.:** On May 12, the facility was closed for an IHH, no water. The inspector documented 10 demerits. The facility was reinspected and reopened with zero demerits on May 13.
- E. Kona Ice of Centennial Hills #4, 2121 E. Sahara Ave.:** On May 15, the facility was closed for an IHH, other conditions or circumstances that may endanger public health. The inspector documented five demerits. The facility was reinspected and reopened with zero demerits on May 16.
- F. Shunfat Supermarket, 5115 Spring Mountain Rd.:** On May 15, the facility was closed for an IHH, pest infestation. Within five permitted areas, the inspectors documented 46 demerits. Extensive structural repairs, cleaning, and service from a pest control operator were completed. The facility was reinspected and reopened with three demerits on May 19.
- G. Southern Express Soul Food, 2810 S. Maryland Pkwy.:** On May 15, the facility was closed for excessive demerits on an unpermitted change of permit holder (CPH) inspection. The inspector documented 42 demerits. The owner applied for a health permit and the facility was reinspected and reopened with 12 demerits on May 27.
- H. Maui Seafood, 1741 S. Mojave Rd.:** On May 16, the facility was closed for an IHH, other conditions or circumstances that may endanger public health. *Listeria Monocytogenes* was found in swab sampling done by the Food and Drug Administration. The inspectors documented 12 demerits for the processing permit and 17 demerits for the storage permit. The facility was reinspected and reopened with zero demerits for both permits on May 22.
- I. Mary's Catering, 827 N. Main St.:** On May 19, the facility was closed for an IHH, lack of adequate refrigeration. The inspector documented 11 demerits. The facility was reinspected and reopened with zero demerits on May 22.
- J. Taqueria La Casa Del Pastor PUSF, 5893 W. Tropicana Ave.:** On May 20, the unit was closed for an IHH, other conditions or circumstances that may endanger public health. The inspector documented 10 demerits. The unit was reinspected and reopened with zero demerits on May 21.
- K. House of Soul LV, 63 N. 30th St.:** On May 21, the facility was closed for multiple IHHs: interruption of electrical service, sewage or liquid waste not disposed of in an approved manner, and excessive demerits. The inspector documented 41 demerits. The facility remains closed at this time.
- L. Arevik Bakery, 3544 Wynn Rd.:** On May 22, the facility was closed for an IHH, pest infestation. The inspector documented eight demerits. The facility was reinspected and reopened with zero demerits on June 2.
- M. Walmart Supercenter Bakery #2838, 540 Marks St.:** On May 22, the permitted area was closed for an IHH, no hot water. The permitted area was reinspected and reopened with zero demerits on May 23.
- N. Antojitos Los Guayabitos 702, 2987 N. Las Vegas Blvd.:** On May 23, the facility was closed for multiple IHHs: pest infestation and other conditions or circumstances that may endanger public health. The inspector documented 49 demerits. The facility remains closed at this time.
- O. Cascata, 949 Empire Mesa Way:** On May 23, the facility was closed for multiple IHHs: no water and sewage or liquid waste not disposed of in an approved manner. The inspector documented 24 demerits. The facility remains closed at this time.

- P. **The Java Tree Pastries Café and Bakery, 4850 W. Flamingo Rd.:** On May 27, the facility was closed for excessive demerits on an unpermitted CPH inspection. The inspector documented 26 demerits. The owner was referred to Plan Review for proper permitting and remains closed at this time.
- Q. **Rally's, 4855 S. Jones Blvd.:** On May 28, the facility was closed for an IHH, lack of adequate refrigeration. The inspector documented 20 demerits. The facility was reinspected and reopened with six demerits on May 30.
- R. **Café Peru, 6010 W. Craig Rd.:** On May 29, the facility was closed for an IHH, pest infestation. The inspector documented 33 demerits. The facility remains closed at this time.
- S. **Green Leafs and Bananas, 755 S. Grand Central Pkwy.:** On May 29, the facility was closed for an IHH, liquid waste not disposed of in an approved manner. The inspector documented 31 demerits. The facility was reinspected and reopened with eight demerits on May 30.
- T. **The Noypitz Bar and Grill, 6605 S. Las Vegas Blvd.:** On May 29, the facility was closed for excessive demerits. The inspector documented 58 demerits. The facility remains closed at this time.
- U. Staff closed 46 unpermitted food vending complaint investigations.
- 2. **Food Safety Assessment Meetings (FSAMs):**
An FSAM was held with the following facility: De Pura Cepa, 2121 E. Sahara Ave.
- 3. **Supervisory/Managerial Conferences:**
A. Conferences were held with the following facilities: Gourmet China, 7785 N. Durango Dr.; Sijie Special Noodle, 4821 Spring Mountain Rd.; Nabe, 4545 Spring Mountain Rd.; and Vive Cancun, 3513 E. Charleston Blvd.

ENVIRONMENTAL HEALTH Outbreak Response – Fiscal Year Data

Outbreak Response	May 2024	May 2025		FY 23-24	FY 24-25	
Legionella Travel Associated Investigations	4	2	↓	22	16	↓
Legionella Residential Investigations	3	1	↓	8	13	↑

- 4. **Legionella Response:**
 - A. Residential Legionella investigations began in January 2020 as part of a Centers for Disease Control and Prevention (CDC) grant-funded project. A residential investigation is prompted by a resident becoming ill and the investigation is conducted in their home.
 - B. The increase in residential investigations could be attributed to the increased local population size, increased age of homes, and increased Legionella testing ordered by medical professionals.
 - C. Travel-associated investigations are prompted by a visitor who became ill after staying at a permitted public accommodation. An investigation is conducted at the hotel(s) they stayed at while in town.
- 5. **Foodborne Illness Response:**
 - A. **China Mama, 2411 W. Sahara Ave.:** On May 2, staff responded to multiple reports of illness. Staff observed risk factors that could lead to illness including improper handwashing practices, unsanitary food contact surfaces, and improper storage of raw foods. The inspection resulted in a B downgrade. The facility was reinspected and passed with an A grade.
 - B. **Raising Canes, 1915 Rock Springs Dr.:** On May 2, staff responded to multiple reports of illness. Staff observed multiple risk factors that could lead to foodborne

illness including improper handwashing practices and disinfection of food contact surfaces. The investigation resulted in a B downgrade. The facility was reinspected and passed with an A grade.

C. Ark America, 3790 S. Las Vegas Blvd.: On May 13, staff responded to multiple reports of illness. Staff did not observe any risk factors that could lead to illness. The inspection resulted in an A grade.

D. Red Lobster, 200 S. Decatur Blvd.: On May 15, staff responded to multiple reports of illness. Staff observed risk factors that could lead to illness including improper thawing practices and cooling of foods and potential chemical contamination. The inspection resulted in an A grade.

E. Yard House, 1301 W. Sunset Rd.: On May 19, staff responded to multiple reports of illness. Staff observed risk factors that could lead to illness including improper handwashing and cleaning of food contact surfaces, contamination of foods, and foods held at improper temperatures. The inspection resulted in a B downgrade. The facility was reinspected and passed with an A grade.

F. Chile Poblano Grille, 2300 Glendale Blvd.: On May 21, staff responded to a confirmed case of campylobacter. Staff observed risk factors that could lead to illness including improper washing and cleaning of food contact surfaces between raw and ready-to-eat foods. The inspection resulted in a B downgrade. A reinspection is still pending.

G. Mariscos Las Islitas, 2437 N. Las Vegas Blvd.: On May 23, staff responded to a confirmed case of vibrio. Staff gathered information on suspected foods to aid in a possible traceback investigation.

H. Mo' Bettah's, 1020 E. Craig Rd.: On May 23, staff responded to a confirmed case of Shiga toxin-producing E. coli (STEC). Staff did not observe any risk factors that could lead to illness. The inspection resulted in an A grade.

6. Ongoing Investigations:

A. SNHD staff continues to investigate a Norovirus outbreak associated with oysters that was initiated in April. On May 5, SNHD issued a public notification regarding illnesses associated with specific frozen half-shell oysters from South Korea. Staff worked with state and federal partners to coordinate traceback efforts to help identify sources of the oysters. Multiple food distributors have issued a voluntary recall of the oysters in response to the investigation.

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	May 2024	May 2025		FY 23-24	FY 24-25	
Notices of Violations (New & Remails)	6	6	→	58	47	↓
Adjudicated Hearing Cases	4	7	↑	56	37	↓
Total Cases Received	78	65	↓	870	863	↓
Total Cases Referred to Other Agencies	31	10	↓	254	150	↓
Hearing Penalties Assessed	\$4,000	\$6,603	↑	\$117,000	\$49,603	↓

Remails - Notices of Violations that are returned by the postal service and then mailed to a newly found address.

ENVIRONMENTAL HEALTH Restricted Waste Management – Fiscal Year Data

Restricted Waste Management	May 2024	May 2025		FY 23-24	FY 24-25	
Inspections	384	315	↓	3,155	2,954	↓

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

Underground Storage Tanks	May 2024	May 2025		FY 23-24	FY 24-25	
Compliance Inspections	83	50	↓	659	758	↑
Final Installation/Upgrade/Repair Inspections	3	2	↓	36	32	↓
Closure Inspections	1	2	↑	11	10	↓
Spill Report Investigations	0	2	↑	14	20	↑

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

Permitted Disposal Facilities	May 2024	May 2025		FY 23-24	FY 24-25	
Inspections	37	21	↓	233	227	↓
Reinspections	1	1	→	21	8	↓

III. VECTOR SURVEILLANCE

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

Vector Surveillance and Other EH Services	May 2024	May 2025		FY 23-24	FY 24-25	
West Nile Virus Surveillance Traps Set	500	399	↓	2,728	2,919	↑
West Nile Virus Surveillance Mosquitoes Tested	691	288	↓	3,980	2,160	↓
West Nile Virus Surveillance Submission Pools Tested	12,718	6,746	↓	73,693	29,741	↓
West Nile Virus Surveillance Positive Mosquitoes	93	0	↓	117	42	↓
West Nile Virus Surveillance Positive Submission Pools	3,152	0	↓	4,159	1,237	↓
St. Louis Encephalitis Surveillance Positive Mosquitoes	2	0	↓	2	0	↓
St. Louis Encephalitis Surveillance Positive Submission Pools	46	0	↓	46	0	↓
Mosquito Activity Complaints	136	24	↓	864	181	↓
Public Accommodations Inspections	20	24	↑	464	279	↓
Public Accommodations Complaints	19	19	→	272	187	↓
Mobile Home/Recreational Vehicle Park Inspections	2	2	→	217	187	↓
Mobile Home/Recreational Vehicle Park Complaints	2	3	↑	22	20	↓

A sample pool is a collection of 50 or less female mosquitoes, from the same species and location, combined into a vial for testing. It is used to determine the prevalence and distribution of arboviruses and can be used to trigger mosquito breeding and disease prevention messages.

IV. EH ENGINEERING

1. Solid Waste Plan Review Program (SWPR):

- A. **Permits Issued** – None
- 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 (3); and Materials Recovery (1)
- D. **Facilities Planned for Approval at DBOH Meetings/SNHD Workshops in June:**
None

ENVIRONMENTAL HEALTH Asbestos Permitting Services – Fiscal Year Data

Asbestos Permitting Services	May 2024	May 2025		FY 23-24	FY 24-25	
Asbestos Permits Issued	94	72	↓	907	756	↓
Revised Asbestos Permits Issued	18	5	↓	87	83	↓

ENVIRONMENTAL HEALTH Subdivision Program – Fiscal Year Data

Subdivision Plan Review	May 2024	May 2025		FY 23-24	FY 24-25	
Tentative Maps-Received	5	11	↑	107	158	↑
Tentative Maps-Lot Count	465	1,142	↑	4,880	11,361	↑
Final Maps-Received	24	16	↓	213	198	↓
Final Maps-Lot Count	1,430	598	↓	8,417	7,935	↓
Final Maps-Signed	26	7	↓	231	171	↓
Final Maps (Signed)-Lot Count	695	454	↓	9,732	7,973	↓
Improvement Plans-Received	27	18	↓	200	186	↓
Improvement Plans-Lot Count	1,428	598	↓	7,715	7,597	↓
Expedited Improvement Plans-Received	0	1	↑	0	2	↑
Expedited Improvement Plans-Lot Count	0	1	↑	0	225	↑

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

Individual Sewage Disposal Systems	May 2024	May 2025		FY 23-24	FY 24-25	
Residential ISDS Permits	6	13	↑	63	63	→
Commercial ISDS Permits	0	0	→	3	3	→
Commercial Holding Tank Permits	9	10	↑	33	34	↑
Residential Tenant Improvements	24	25	↑	243	205	↓
Residential Certifications	0	0	→	3	0	↓
Compliance Issues	4	7	↑	79	81	↑

ENVIRONMENTAL HEALTH Safe Drinking Water Program – Fiscal Year Data

Safe Drinking Water Program	May 2024	May 2025		FY 23-24	FY 24-25	
Public Water System Sanitary Surveys	1	0	↓	49	52	↑
Public Water System Violations Issued	32	0	↓	166	136	↓

2. Safe Drinking Water Activity:

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

- **Las Vegas Valley Water District:** One routine sample was *coliform* positive. The repeat samples were *coliform* absent.
 - **M Resort Spa and Casino:** One routine sample was *coliform* positive. The repeat samples were *coliform* absent.
 - **Resorts World Las Vegas:** One routine sample was *coliform* positive. The repeat samples were *coliform* absent.
 - **North Las Vegas Utilities:** Two routine samples were *coliform* positive. The repeat samples were *coliform* absent.
 - **City of Henderson:** One routine sample was *coliform* positive. The repeat samples were *coliform* absent.
 - **Lhoist North America:** One routine sample was *coliform* positive. The repeat samples were *coliform* absent.
- 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; and the Coyote Springs Golf Course.
- C.** Staff reviewed, inspected, and provided comments regarding the Electric Daisy Carnival. Comments implemented this year involved improved cross-connection control and backflow preventer testing, discontinuance of non-potable water at handwashing stations, and exclusive provision of potable water at all handwashing stations throughout the event (per NAC 444.549 and NAC 444.5494(2)). Conditional comments left for next year's event include operator supplying SNHD with a potable water plan at least 30 calendar days before the event (per NAC 444.548) and operation of each water station with a temporary food establishment (TFE) booth permit (per NAC 444.5488).
- D.** Staff completed a complaint investigation against Harrah's Las Vegas public water system. The complaint alleged aesthetic water quality issues from multiple patron rooms. Sampled water quality and maintenance from the rooms was within Nevada standards.
- E.** Staff completed a cross-connection control emergency response for the Venetian Palazzo public water system. The emergency involved an HVAC contractor cross connecting a hazardous chemical refrigeration system with the onsite potable water system. Emergency corrective actions involved severing the cross-connection, issuing public notification, supplying approved potable water for handwashing stations in all restrooms and at staff hand sinks, and flushing the potable water system. Water quality post-flushing was within Nevada standards. Although the emergency objectives have been accomplished, corrective actions regarding improved managerial policies are still pending.
- F.** Staff are investigating a complaint about the Treasure Island public accommodation's water system. The complaint alleges water quality issues from a patron's room. Sampled water quality and maintenance from the room are in progress.

V. SPECIAL PROGRAMS

ENVIRONMENTAL HEALTH Special Programs - Fiscal Year Data

Special Programs	May 2024	May 2025		FY 23-24	FY 24-25	
School Facility Kitchen Inspections	61	59	↓	882	898	↑
School Facility Kitchen Complaints	4	2	↓	11	7	↓
School Facility Inspections	60	58	↓	1,035	1,032	↓
School Facility Complaints	0	1	↑	34	39	↑
Summer Food Service Surveys	12	22	↑	24	61	↑
Child Care Facility Inspections	27	40	↑	288	337	↑
Child Care Facility Complaints	3	2	↓	29	21	↓
Body Art Facility Inspections	35	45	↑	464	517	↑
Body Art Facility Complaints	7	7	→	51	56	↑
Body Art Artist Special Event Inspections	1	6	↑	45	329	↑
Total Program Services Completed	210	242	↑	2,863	3,297	↑

1. Schools:

- A. **Brown, Mahlon B. Jr. High School, 307 Cannes St.:** Staff responded to a complaint alleging that an area of the cafeteria was being used to store school supplies and equipment. Staff found general supplies and equipment stored on wrapped wood pallets that included paper, air filters, tv monitors, and a floor cleaning machine. There was no evidence of vermin harborage, and the surrounding area was kept clean. SNHD staff discussed the need to remove unnecessary equipment and supplies along with the importance of keeping areas clean and maintained to prevent the harboring or feeding of pests. The complaint was substantiated.
- B. **Legacy Traditional School Cadence, 325 Inflection St.:** Staff responded to an epidemiological investigation request regarding students suffering from gastrointestinal illnesses. The school nurse reported a recent increase in diarrheal incidents. School administration stated that the number of students absent was normal for the end of the school year. Custodial staff explained the cleaning and disinfecting procedures used after emetic events and reported no increase of emetic events. The school is cleaned and disinfected every day after school hours. SNHD staff observed clean restrooms, handwashing facilities, and drinking fountains. SNHD staff discussed deep cleaning throughout the school during times of increased illnesses.
- C. **Lake Mead Christian Academy Kitchen, 540 E. Lake Mead Pkwy.:** Staff responded to a complaint alleging that employees without valid food handler cards were working in the kitchen during lunches. The kitchen employees had valid food handlers' cards with one being a Certified Food Protection Manager. The complaint was not substantiated at the time of the inspection.

2. Child Care:

- A. **Source Academy, 7511 N. Cimarron Rd.:** During a routine inspection, staff observed numerous violations that resulted in a noncompliant inspection. Violations included physical hazards accessible to children, maximum hot water temperature at hand sinks exceeding 120°F and a food handler without a valid food handler card. A reinspection is still pending.

B. Yudi Family Home Daycare, 4031 Hazelcrest Cir.: Staff investigated a complaint alleging that an above-ground pool was accessible to children with no security gates. An above-ground pool was installed and separated from the outdoor play area designated for the children with an adequate lock. Children were not able to access the pool from inside the house either. The complaint was not substantiated at the time of the inspection.

C. Northshore Learning Center, 7901 W. Gowan Rd.: Staff responded to a complaint alleging that the childcare center was in operation after water flooded the rooms and collapsed the ceiling. The building had significant water damage from a broken fire sprinkler system over the weekend. Staff observed repairs being made to the damaged area. The complaint was substantiated. Children were either relocated to rooms that were not affected or relocated to another facility until repairs were completed. A follow-up survey found that adequate repairs had been completed, and the affected areas were approved for operation.

3. Body Art:

A. Crown Electric Tattoo Company - Piercing, 4632 S. Maryland Pkwy.: Staff responded to a complaint alleging that a piercing became infected and required antibiotics to be treated. The PIC reported that they had not received any reports of infection from any patrons. The piercing room, workstation, and handwashing sink were stocked, clean, and maintained in good condition. The sterilizer had a current spore test, and the artists had valid body art cards. The complaint was not substantiated at the time of the inspection.

B. Las Love Tattoo, 3555 S. Fort Apache Rd.: Staff responded to a complaint alleging that there was no hot water available in the restroom. Staff verified that the facility was operating without hot water in the restroom. Staff educated the owner that all handwashing sinks including the restroom must provide cold and hot water. The complaint was substantiated.

VI. PLAN REVIEW PROGRAM

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

Food Pre-Permitting Services	May 2024	May 2025		FY 23-24	FY 24-25	
Food Safety Assessment Meetings	0	0	→	3	2	↓
Total Pre-Permitting Services	1,144	1,134	↓	14,852	13,838	↓
New Project Submissions	227	218	↓	2,953	2,762	↓
Completed Projects	219	308	↑	3,382	2,862	↓
Total Service Requests Currently in Pre-Permitting	1,296	1,266	↓			

1. Enforcement Actions and Investigations:

A. Shun Japanese Yakitori Izakaya, 4550 S. Maryland Pkwy.: During a final permitting inspection, staff observed a household-use-only vacuum sealer. The permit holder intended to use the equipment to reduce oxygen package (ROP) raw proteins and store them for longer than 48 hours. Household equipment is not permitted and storing raw proteins in ROP for longer than 48 hours requires an SNHD approved Hazard Analysis and Critical Control Point plan (HACCP). The permit

holder agreed to remove the equipment and contact the SNHD Special Processes team for more information on HACCP. The permit was approved with stipulations.

- B. Starbread Bakery, 7875 W. Sahara Ave.:** A final permitting inspection was not approved. Staff observed the three-compartment sink with only one integral drainboard. SNHD Regulations require a three-compartment sink with integral drainboards on each end for proper warewashing. The three-compartment sink was replaced, and the permit was approved at the reinspection.
- C. The Noyptz Bar and Grill, 6605 S. Las Vegas Blvd.:** Staff found a new buffet station installed in the dining room without prior approval and directed the owner to obtain a health permit prior to operating the buffet. The owner applied for the permit and during the final permitting inspection, staff found the food shield inadequate for food protection. An approved food shield meeting American National Standards Institute (ANSI)/National Sanitation Foundation (NSF) standard is required to prevent contamination by consumers. A reinspection was conducted, and the buffet was approved for use.
- D. Electric Mushroom, 518 Fremont St.:** A CPH inspection was not approved due to a warewashing machine not being available in the bar and no handwashing available in food preparation and warewashing areas. SNHD Regulations require a glass washing machine in satellite bars without three-compartments sinks. An operable hand sink is required in all food handling and warewashing areas. The owner will have a warewashing machine installed in the bar and make repairs to the hand sink before scheduling a reinspection. A reinspection is still pending.
- E. Buddha Bar at Showcase Mall, 3785 S. Las Vegas Blvd.:** During a final permitting inspection, active construction was still taking place. There was a heavy leak beneath the three-compartment sink, missing equipment, and no person-in-charge (PIC) present. All construction must be complete, all food equipment installed, and the facility must be clean to receive health permit approval. A reinspection is still pending.
- F. Lunakin Cafe, 4300 W. Tropicana Ave.:** A final permitting inspection resulted in failure because active construction was still taking place. At the reinspection, staff found the facility in substantial compliance; however, health permit approval is pending the receipt of all Building Department approvals.
- G. The Essential Element, 1815 W. Charleston Blvd.:** A final permitting inspection was conducted for a new business specializing in wellness teas which include essential oil supplements. Most essential oils are not made for human consumption, and SNHD Regulations require that food ingredients come from an approved source. After thorough research, the essential oils are from a company that receives inspection from the Utah Department of Agriculture and Food and are approved for consumption. The health permit was approved.
- H. Venetian Food Hall, 3355 S. Las Vegas Blvd.:** A new food hall on the casino level is under construction. During a final inspection, staff observed missing flashing between the walk-in coolers and ceilings, incorrect ceiling tiles in a portion of the kitchen and storage, ice build-up in a walk-in freezer, uncapped chase lines, gaps at backsplash to wall material, and a food shield and beer tap had not been installed. All seams and gaps must be sealed for cleaning and to prevent pest harborage. Ceiling tiles must be non-absorbent in all food areas. Ice buildup in a walk-in freezer can be indicative of a leak or improper installation. The contractor is working on all corrections. Eight health permits were approved, and the next phase of final inspections has been scheduled. Follow-up surveys will be conducted on all previously noted violations.

- I. **Port of Subs, 1405 W. Sunset Rd.:** During a CPH inspection, staff were unable to locate a grease interceptor. The PIC was not aware of any grease interceptor onsite. The City of Henderson Pretreatment team was notified, and the owner was instructed to contact the sewer agency to inquire about adequate grease capture requirements. Depending on the findings, an SNHD remodel application may be required. The CPH was approved.

VII. AQUATIC HEALTH PROGRAM

ENVIRONMENTAL HEALTH Aquatic Health Operations Program - Fiscal Year Data

Aquatic Health Operations	May 2024	May 2025		FY 23-24	FY 24-25	
Total Operation Inspections	841	560	↓	8,632	7,033	↓
Complaint Investigations	30	29	↓	273	252	↓
Inactive Body of Water Surveys	8	4	↓	90	78	↓
Drowning/Near Drowning/Accident Investigations at Permitted Facilities	5	10	↑	24	49	↑
Total Program Services Completed	884	603	↓	9,019	7,412	↓

1. Aquatic Health Operations

- A. **Las Vegas Embassy Suites, 4315 University Center Dr.:** A complaint alleging a broken main drain cover was verified and resulted in an IHH closure of the pool. A damaged drain cover poses an entrapment hazard and increases the risk of drowning. A reinspection is still pending.
- B. **Dragonridge Country Club, 1400 Foothills Village Dr.:** A routine inspection at the spa resulted in an IHH closure for high chlorine. High chlorine concentrations can cause skin, eye, and lung irritation. Following corrections, a reinspection was conducted the same day, and the spa was approved to reopen.
- C. **Cordero Pines Apartments, 499 N. Lamb Blvd.:** A routine inspection at the pool resulted in an IHH closure due to multiple violations. The pool had high cyanuric acid and high chlorine. High cyanuric acid reduces the effectiveness of chlorine. Following corrections, a reinspection was conducted the same day, and the pool was approved to reopen.
- D. **Grandview at Las Vegas, 9940 S. Las Vegas Blvd.:** A routine inspection conducted at the pool resulted in an IHH closure due to a non-functional ground fault circuit interrupter (GFCI) for the underwater lights. A non-functional GFCI is an electrocution risk to bathers. Following corrections, a reinspection was conducted the same day, and the pool was approved to reopen.
- E. **Ceasar's Palace, 3570 S. Las Vegas Blvd.:** A lifeguard survey conducted at the pool resulted in an IHH closure for inattentive lifeguards and lifeguards not roving in accordance with the lifeguard plan. Inadequate lifeguard surveillance presents an increased drowning risk to bathers. Following corrections, a reinspection was conducted the next day, and the pool was approved to reopen.
- F. **Bay View Condos, 600 Sandy Beach Way:** A routine inspection at the pool resulted in an IHH closure due to a gate that did not self-latch. An improperly functioning gate poses a drowning risk by allowing unattended children access to the pool area.

Following corrections, a reinspection was conducted the same day, and the pool was approved to reopen.

- G. Fifty 101 Apartments, 5101 O'Bannon Dr.:** Routine inspections at the pool and spa resulted in IHH closures due to multiple violations. The pool and spa had no detectable chlorine, broken glass was found near the pool and spa area, and a gate did not self-latch and was left propped open. Inadequate disinfection exposes bathers to pathogens that can make them sick and broken glass in the pool area can result in lacerations to bathers walking barefoot. A reinspection is still pending.
- H. Vantage Lofts, 201 S. Gibson Rd.:** A routine inspection at the pool resulted in a compliance schedule to correct high pH before reopening. High pH reduces the effectiveness of chlorine. The qualified operator was instructed to confirm proper water chemistry before reopening the pool for use.
- I. Toscana Apartments, 4450 Karen Ave.:** A routine inspection conducted at the pool resulted in an IHH closure due to a damaged drain cover. A reinspection is still pending.
- J. Mar-A-Lago Condos, 3150 Soft Breeze Dr.:** A routine inspection conducted at the pool resulted in an IHH closure due to multiple violations. The pool had a damaged drain cover and high chlorine. Following corrections, a reinspection was conducted the same day, and the pool was approved to reopen.
- K. Madison Palms Apartments, 3150 W. Ann Rd.:** Routine inspections at the pool and spa resulted in IHH closures due to multiple violations. The pool had high chlorine and high cyanuric acid. The spa had low chlorine. A reinspection is still pending.

ENVIRONMENTAL HEALTH Aquatic Health Plan Review Program - Fiscal Year Data

Aquatic Health Plan Review	May 2024	May 2025		FY 23-24	FY 24-25	
Total Pre-Permitting Services	764	570	↓	5,930	6,217	↑
New Project Submissions	150	90	↓	1,054	1,163	↑
Completed Projects	150	191	↑	976	1,208	↑
Total Projects Currently in Plan Review	509	544	↑			

2. Aquatic Health Plan Review:

- A. Juneau Point Homeowner's Association, 7885 Aurora Sky St.:** A final permitting inspection at the pool resulted in failure because the calculated flow was too low. Insufficient flow can result in inadequate water filtration. Following corrections, the pool was reinspected and approved to operate.
- B. Maycliff Mobile Home Park (MHP), 3601 E. Wyoming Ave.:** During a plumbing inspection, staff found that the maximum flow rate of the proposed suction outlet fitting assembly (SOFA) could be exceeded by the maximum flow of the pump. A mismatched pump and SOFA can result in suction entrapment. Following corrections and a final inspection, the pool was approved to operate.
- C. Hilton Grand Vacation, 455 Karen Ave.:** A pool pre-plaster inspection resulted in failure due to inoperable lighting and enclosure violations. Sections of the aquatic venue enclosure were not installed over a continuous, solid surface and did not meet the minimum height requirement of six feet. A reinspection is still pending.

- D. The Meadows MHP, 2900 S. Valley View Blvd.:** A final remodel inspection of a pool pump resulted in failure because the calculated system flow was inadequate. Low system flow can result in inadequate water filtration. Following corrections, the remodel was approved.
- E. King's Row Trailer Park, 3660 Boulder Hwy:** A final remodel inspection resulted in failure because the installed SOFA was damaged and was not the same model that had been approved during the initial plan review. Additional violations included incorrect gate latch height, a gap of greater than four inches under the enclosure, and enclosure not installed over a fixed, permanently installed surface. All violations were corrected, and the pool was approved to operate.
- F. Sam's Town, 5111 Boulder Hwy.:** A final remodel inspection for chemical feed equipment resulted in failure because the bleach and acid containers were located in bather accessible spaces. Allowing the general public to have access to chemical feed equipment, including bleach and acid containers, can result in serious injury. The permit holder installed a temporary fence that meets regulatory requirements for equipment enclosures, and the venues have resumed operations.

VIII. TRAINING OFFICE

- 1. Training Office staff provided onsite intervention training to: L & L Hawaiian Barbeque, 2520 E. Craig Rd.; China Mama, 2411 W. Sahara Ave.; Fuddruckers at the Orleans Casino; and China One, 2447 E. Tropicana Blvd.
- 2. Training Office staff facilitated and presented at the Food Safety Partnership meeting on May 28.

IX. REGULATORY SUPPORT



- 1. Staff participated in or performed the following activities and participated in the following external meetings: Regulatory and Laboratory Training System Steering Committee meetings; National Environmental Health Association Food Safety Program Committee monthly meeting; Association of Food and Drug Officials (AFDO) Food Protection Education Resource Collection Committee; monitor legislation (AB352, SB295, and SB466) relating to cottage food, cottage cosmetics, and other vendors and agency changes; and Retail Flexible Funding Model mentorship meetings.
- 2. Special Processes staff attended the AFDO HACCP Plan Review meetings on May 22 and 30.
- 3. Special Processes and Label Review staff met with various operators in-person and in a virtual setting, via phone calls and virtual platform meetings, regarding submission of labels for review, waivers, operational plans, and HACCP plans.
- 4. Special Processes staff received three new submissions and released nine special process files affecting 20 facilities. There are currently 19 files in review.
- 5. Label Review staff received 13 new submissions and released 16 label files consisting of 231 labels. There are currently 23 active files in review.
- 6. Cottage Food Operations staff completed 28 new and updated registrations and 61 new inquiries, frequently with multiple follow-up inquiries per individual.

Memorandum



Date: June 26, 2025

To: Southern Nevada District Board of Health

From: Lourdes Yapjoco, MSN-PH, RN, CCM, Director of Public Health & Preventive Care 
-on behalf of Lourdes Yapjoco
Cassius Lockett, PhD, District Health Officer 

RE: PUBLIC HEALTH & PREVENTIVE CARE BOARD OF HEALTH REPORT – May 2025

I. Immunization Program

A. Immunization Program Activities

1. The public health centers continue to administer the trivalent Flu 2024-2025 formulation for the season which ends at the end of June 2025. A total 426 flu vaccines were administered between all four Immunization Public Health Centers.
2. For the month of May, there were 2,223 clients seen with 5,451 vaccines administered in all four Immunization PHCs.
3. There were 301 immunization records reviewed.
4. The collaboration with the American Cancer Association and the HPV Learning Collaborative has ended. SNHD is continuing to finalize data for the American Cancer Association with the last survey under review by epidemiology.
5. Back-to-School (BTS) planning has continued review ways to improve shorter wait times and processing. The Henderson Public Health Center will increase services and will open 2 Fridays in August. The Fremont Public Health Center will be offering BTS vaccines for adolescents for 3 weeks – Tuesday to Friday.

B. Immunization Outreach Activities

1. Total outreach clinics in May - 12 clinics, 532 vaccines were administered to 239 clients. The clinics were held at CCSD schools, Family Support Center, and in partnership with Help of Southern Nevada, Nevada Homeless Alliance, Las Vegas Convention Center, and REACH.
2. With the addition of 2 State subgrants, School Located Vaccinations and Immunization Education, staff conduct clinics to increase immunization compliance and educate the community on vaccines. SNHD resources, referrals, and CDC vaccine information are provided during outreach events.
3. Perinatal Hepatitis B Prevention program provided education to FQHC staff in Fremont clinic.

II. Community Health Nursing

A. Nursing Education

There were no Nursing CEUs offered for the month of May.

B. Maternal Child Health

The Maternal Child Health (MCH) Nurse had no newborn screening referrals in the month of May. She provided case management services to 7 active lead clients this month. The MCH nurse continues to support the Healthy Start team and assists with outreach events promoting programs.

C. Nurse Family Partnership (NFP)

The Southern Nevada Health District-Nurse-Family Partnership (NFP) has 158 active families. Sixty-six are currently participating in the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program. Twenty-six families are participating through the Temporary Assistance for Needy Families (TANF) funding. Both grants are from the Nevada Division of Public and Behavioral Health. Forty-two referrals were received this month from various community partners. Many of the nurses are at capacity in their caseloads, so some of the referrals were sent to the Healthy Start Program to ensure

the families are getting the education, community resources, and support that they need as soon as possible.

D. Healthy Start Initiative- Enhanced

The Southern Nevada Health District's Healthy Start Initiative Program is supported by the Health Resources and Service Administration (HRSA) of the U.S. Department of Health and Human Services (HHS). There were 71 active families served in May 2025.

Outreach was conducted at the Las Vegas Convention Center Job Fair, Sunrise Children's Foundation WIC Fair at Trinity Church Life, Sunrise Library, Nevada Charter Preparatory School Wellness Fair and Open House, Cambridge Recreation Center, Nevada Health Centers Cambridge location, Parenting Project, Family2Family Connection, Nevada Health Centers Decatur location, SNHD Bonanza Location, Head Start Bonanza location, East Las Vegas Library, Neighborhood Recreation Center, Dolores Huerta Resource Center, West Lake Mead Library, Doolittle Community Center, First Choice Pregnancy Services, WIC Sunrise location, YMCA (Skyview location), Project 150, Lighthouse Charities, Street Heat Ministries, Leid Memorial Boys and Girls Club, WHASN Sunrise location, Las Vegas Reach Community Help Center, Family Promise of Las Vegas, Nevada Health Centers WIC Boulder Highway location, Walnut Community Center, Acelero Learning, Robert E. Price Recreation Center, Sunrise Library, and Hollywood Recreation Center. Additionally, all community health workers (CHWs) completed outreach at different DWSS locations.

The Healthy Start Program hosted a Community Baby Shower at the East Las Vegas Community Center on 05/19/2025 in collaboration with UHC Health Plan of Nevada Medicaid and 11 additional community partners. During the event, members of the community had access to various vendors who provided education on topics related to maternal and infant health and valuable community resources. Participants at this event also had access to a diaper bank provided by Baby's Bounty. They also had the opportunity to win raffle and game prizes donated by the community partners throughout the event, and each participant left with information connecting them to many community resources.

E. Embracing Fatherhood

Embracing Fatherhood of Southern Nevada continues to enroll clients and complete outreach throughout the community. There were 9 active clients served in May. Referrals were received from online interest forms through SNHD-Embracing Fatherhood website and one referral was sent by the Department of Family Services. Two clients were referred to Dads Inc. with one of them successfully completing the 8-week course.

III. Sexual Health Outreach and Prevention Program (SHOPP)

- A. Express Testing (ET) is a program that conducts testing for sexually transmitted infections (STI's) without a provider exam for asymptomatic patients. ET provided 237 screening encounters for the month of May. This included 18 clients who were tested at Homeless Outreach events, and 22 at Fremont Friday clinics. The SHOPP team has expanded to doing once weekly testing at the UNLV student center, testing 19 clients in May. The SHOPP team has also expanded testing to include the Mesquite and Henderson SNHD locations. For the month of May the Mesquite location saw 3 clients and although Henderson did not test any clients, advertising and outreach continues.
- B. The Congenital Syphilis Case Management Program (CSCMP) is a program to address the high rate of congenital syphilis in the community. The CSCMP nurses, 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 continues to serve 61 active clients and completed 6 educational community events.
- C. Members of the SHOPP team attended the Spring 2025 STI Update Program as well as Motivational interviewing. The SHOPP team also participated in UNLV transition to practice event and the Stay healthy, stay informed outreach providing STI/HIV testing, education and resources as well as assisting with vaccinations.
- D. SHOPP houses a Neurosyphilis Emergent Onsite Navigation (NEON) program which aims to provide

critical linkage services to patients suspected of neurosyphilis. Three NEON referrals were received, and 3 clients were navigated. The SHOPP nurses, in coordination with the Sexual Health Clinic and the University Medical Center's Wellness Center staff navigated all 3 patients to UMC ER for the appropriate medical evaluation, diagnostic tests, and treatment.

- E. SHOPP employs the Home Administered Treatment for Sexually Transmitted Infections (HATS) intervention, an innovative public health solution aimed at increasing access to care. This program is specific to those who have barriers to getting into a clinic for treatment, such as experiencing homelessness or no transportation. With this intervention, SHOPP and the SNHD DIIS team partner to get those facing barriers treated for STIs in their home or on the streets. In the month of May, the team was able to start treatment, as well as do follow up treatments on 28 patients for STI's in the field.
- F. The SHOPP *Rapid PREVENT* program has recently started its implementation phase and enrolled two additional clients this month, with a total of seven active clients. The three CHW's for this initiative work collaboratively with Express Testing to assess and provide linkage to care services. In May the team took part in an in-person conference in Chicago regarding Rapid PREVENT where they received additional education and support on the program.
- G. SHOPP's Pathways to Better Health (PBH) program serves pregnant/postpartum mothers and follows until the infant turns one year of age. The Community Health Workers support, educate and provide linkages and referrals with the goal of improving health outcomes during and after pregnancy for both moms and babies. During the month of May, the CHWs were able to enroll 2 new clients in the program, with a total of 6 active clients.

IV. Tuberculosis (TB) Clinic

TB clinic has eight (8) new adult TB active cases and zero (0) pediatric cases for the month of May 2025.

V. Employee Health Nursing – May 2025

- A. There were two (2) SNHD employees who tested for COVID-19. Zero (0) PCR tests were conducted. Zero (0) tests from outside entities. Two (2) employees tested positive for COVID.
- B. Employee New Hire and Annual Tuberculosis (TB) testing continues, and annual catch-up TB testing is ongoing. Twenty-eight (28) Tuberculosis tests were completed.
- C. Employee New Hire and Annual FIT Testing Medical Evaluations continue. Seven (7) medical clearances were completed.
- D. There was one (1) employee Blood Borne Pathogens exposure case.
- E. There were no new employee TB exposure cases.
- F. Vaccine Clinics
 - 1. May 1 – May 31, 2025
 - 2. Employees Total: 3 employees
 - a) 0 COVID-19 Updated booster.
 - b) 0 Influenza Vaccine
 - c) 0 Monkeypox Vaccine
 - d) 3 other vaccines
 - 3. Total Vaccines Given: 3
- G. New Hire/Onboarding: Zero (0) new hires were onboarded.

H. Employee Health Nurse Accomplishments:

1. Skills Fair Held
2. Exposure Control Plan completed and signed

I. Policies and procedures continue to be reviewed and updated.

PUBLIC HEALTH AND PREVENTIVE CARE

MONTHLY REPORT

May 2025

Client Encounters by Locations

Location	DECATUR PHC	ELV PHC	Hend PHC	Mesquite PHC	Laughlin	Mobile Clinic	Homeless Outreach	Targeted Populations	*Other BTS Clinic	TOTAL
Immunization	1,041	683	241	34	0	0	3	42	179	2,223
Immunization Records Issued	190	85	25	1						301
Newborn Metabolic Screening	0	0	0	0						0
SHOPP	216		0	3			18			237
TB Treatment & Control	1,684									1,684
TOTAL	3,131	768	266	38	0	0	21	42	179	4,445

Client Encounters by Program

Program	May 2024	May 2025		FY 23-24	FY 24-25	
Immunizations**	2,338	2,223	↓	32,891	30,966	↓
Immunizations Records Issued	325	301	↓	3,240	3,813	↑
COVID-19 Vaccine Given*	307	183	↓	5,029	4,273	↓
Newborn Met. Screening	1	0	↓	1	3	↑
SHOPP	219	237	↑	12,936	2,786	↓
TB Treatment & Control	1,299	1,456	↑	15,766	17,321	↑
SAPTA Services	23	^^	↑	281	^^	↑
TOTAL	4,512	4,400	↓	70,144	59,162	↓

^^ SAPTA grant ended 09/30/2024

Total Client Immunizations Administered by Locations

Location	DECATUR PHC	ELV PHC	Hend PHC	Mesquite PHC	Laughlin	Mobile Clinic	Homeless Outreach	Targeted Populations	*Other BTS Clinic	TOTAL
Total Immunizations Administered ***	2,598	1734	459	50	0	0	6	142	462	5,451

*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

Total Client Immunizations Administered by Locations

Program	May 2024	May 2025		FY 23-24	FY 24-25	
Total Immunizations Administered ***	5,805	5,451	↓	80,291	90,167	↑

Immunization Program

	May 2024	May 2025		FY 23-24	FY 24-25	
Immunizations						
Flu Vaccine Given	460	426	↓	6,923	9,465	↑
Gratis	42	0	↓	1,388	908	↓
COVID Vaccine*	316	198	↓	4,076	4,273	↑

*Given by Immunization Clinics

	May 2024	May 2025		FY 23-24	FY 24-25	
Vaccines for Children (VFC)						
Number of VFC Compliance Visits	17	3	↓	81	45	↓
Number of IQIP Visits	16	0	↓	74	33	↓
Number of Follow Up Contacts	80	37	↓	451	403	↓
Number of Annual Provider Training	56	3	↓	123	49	↓
Number of State Requested Visits	41	14	↓	398	173	↓

	May 2024	May 2025		FY 23-24	FY 24-25	
Perinatal Hepatitis B						
# of Expectant Women	29	20	↓	19	14	↓
# of Infants	73	56	↓	70	63	↓
Total # of Infants Delivered	5	1	↓	30	31	↑
New Cases	8	3	↓	55	42	↓
Closed Cases	5	5	→	42	72	↑

	May 2024	May 2025		FY 23-24	FY 24-25	
Childcare Program						
Childcare Audits	8	7	↓	98	82	↓
Baseline Immunization Rate	66%	78%	↑	77%	79%	↑
# of Final Audits	8	7	↓	98	82	↓
Final Immunization Rate	95%	98%	↑	95%	94%	↓
# of Records Reviewed	1054	421	↓	9088	6776	↓

Covid-19 Vaccine Campaign **

	May 2024	May 2025		FY 23-24	FY 24-25	
COVID-19 Vaccine Campaign						
# of COVID-19 Vaccines administered	307	n/a	↑	5,029	n/a	↑
# of Monkeypox Vaccine administered	13	n/a	↑	353	n/a	↑
# of Influenza Vaccine administered	131	n/a	↑	3089	n/a	↑
# of Healthcare Provider Compliance Visits	0	n/a	↑	4	n/a	↑
# of Newly Enrolled Healthcare Provider Education Sessions	0	n/a	↑	16	n/a	↑
# of Potential Healthcare Provider Recruitment Sessions	0	n/a	↑	48	n/a	↑
# of Healthcare Provider Contacts	61	n/a	↑	910	n/a	↑

**Program ended 12/31/2024

Community Health Program						
	May 2024	May 2025		FY 23-24	FY 24-25	
Nursing Field Services						
MCH Team Home Visit Encounters	9	10	↑	117	153	↑
	May 2024	May 2025		FY 23-24	FY 24-25	
NFP (Team 1)						
Referrals	16	42	↑	156	221	↑
Enrolled	12	11	↓	89	94	↑
Active	121	132	↑			
	May 2024	May 2025		FY 23-24	FY 24-25	
NFP (Expansion Team)						
Referrals	10	2	↓	72	45	↓
Enrolled	6	0	↓	46	17	↓
Active	65	26	↓			
	May 2024	May 2025		FY 23-24	FY 24-25	
MCH						
# of Referrals Received	1	4	↑	38	49	↑
# from CPS	1	3	↑	27	38	↑
# of Lead Referrals	0	1	↑	8	9	↑
# of Total Admissions	2	3	↑	21	39	↑
	May 2024	May 2025		FY 23-24	FY 24-25	
EHB *						
Referrals	n/a	n/a	→	15	n/a	↑
Enrolled	n/a	n/a	→	16	n/a	↑
Active	13	n/a	↑			
*Phasing to Healthy Start						
	May 2024	May 2025		FY 23-24	FY 24-25	
Thrive by 0 - 3						
Referrals	43	46	↑	597	390	↓
One-Time Home Visits	4	3	→	89	32	↓
Enrolled	3	7	↑	27	33	↑
Active	12	25	↑			
	May 2024	May 2025		FY 23-24	FY 24-25	
Healthy Start**						
Referrals	8	44	↑	35	280	↑
Enrolled	7	6	↓	19	72	↑
Active	18	71	↑			
**New program as of 01/01/2024						
	May 2024	May 2025		FY 23-24	FY 24-25	
Embracing Fatherhood***						
Referrals ***	n/a	8	↓	n/a	14	↓
Enrolled ***	n/a	7	↓	n/a	9	↓
Active	n/a	9	↓			
***New program as of 01/01/2025						

Tuberculosis Program

Tuberculosis	May 2024	May 2025		FY 23-24	FY 24-25	
Number of Case Management Activities*	224	360	↑	2,337	3,015	↑
Number of Monthly Pulmonary Specialist Clinic Clients Seen	29	30	↑	359	304	↓
Number of Monthly Electronic Disease Notifications Clinic Clients (Class B)	51	68	↑	413	824	↑
Outreach Activities during the Month - Presentations, Physician Visits, Correctional Visits, etc.	6	8	↑	213	68	↓
Directly Observed Therapy (DOT) Field, clinic and televideo encounters	1,199	1,684	↑	13,735	14,354	↑
*New EMR system- Counting only successful activities						

Sexual Health Outreach and Prevention Program (SHOPP)

SHOPP - Express Testing	May 2024	May 2025		FY 23-24	FY 24-25	
# of Screening encounters	190	237	↑	1,923	2,786	↑
# of Clients Screened	190	237	↑	1,914	2,786	↑
# of Clients with positive STI identified	15	22	↑	168	270	↑
STI Positivity Rate	^	9%	↓	^		↓
SHOPP- Linkage	May 2024	May 2025		FY 23-24	FY 24-25	
# of clients referred to Linkage	24	12	↓	173	187	↑
# of clients linked to care	23	12	↓	141	182	↑
SHOPP- Congenital Syphilis Case Management Program (CSCMP)	May 2024	May 2025		FY 23-24	FY 24-25	
# of Referrals (pregnant, post-partum, infants)	6	7	↑	127	86	↓
# of Clients enrolled in CM	5	7	↑	89	61	↓
# of Active pregnant/ postpartum clients	37	40	↑			
# of Infants being followed	23	21	↓			
# of Provider/ Community trainings	1	6	↑	13	35	↑
SHOPP -Services for Unhoused Patients with Resources and Engagement in core (SURE)	May 2024	May 2025		FY 23-24	FY 24-25	
# of Outreach events	n/a	7	^	n/a	63	^
SHOPP- Complex STI Navigation	May 2024	May 2025		FY 23-24	FY 24-25	
# of Clients referred	n/a	3	^^	n/a	47	^^
# of Clients navigated	n/a	3	^^	n/a	43	^^
# of Home administrered treatment of STI (HATS)	n/a	28	^	n/a	77	^
*Outreach started 03/01/2024						
^ No data available						
^^ No data available - data collecting began 12/01/2023						
Non- cumulative						