

ANNUAL BUDGET

FY 2025 - 2026

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# General Information

## History

The Southern Nevada Health District (“SNHD” or the “Health District”) was established in 1962, following statutory authorization from the Nevada State Legislature to merge the county health department with the health departments of several surrounding cities. According to Nevada Revised Statute (NRS) Chapter 439, the Health District's powers and jurisdictions include:

- Prevent and control nuisances.
- Regulate sanitation and sanitary practices in the interests of the public health.
- Provide for the sanitary protection of water and food supplies.
- Protect and promote the public health in the geographical area subject to the jurisdiction of the health district.
- Improve the quality of health care services for members of minority groups and medically underserved populations.

At its inception, the Health District employed about 30 people, including four sanitarians responsible for inspecting 800 eating and drinking establishments. Today, the Health District has grown to employ over 800 staff members and inspects more than 22,000 active food and beverage establishments.

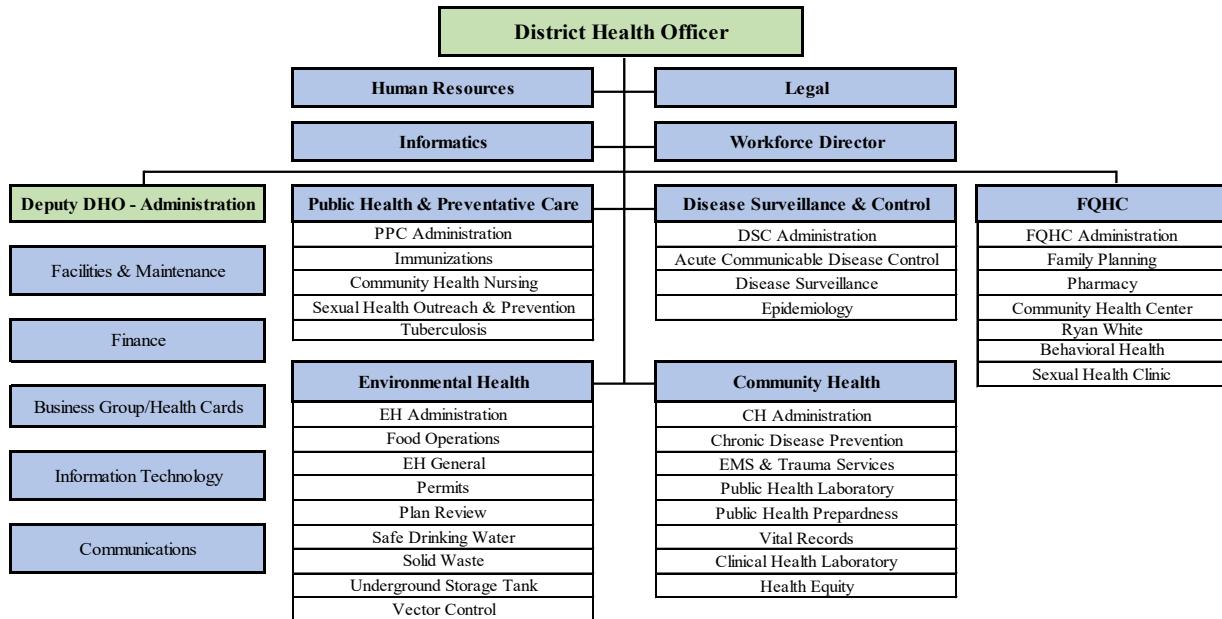
Now, the Southern Nevada Health District stands as one of the largest local public health organizations in the United States. It serves more than 2.3 million residents, accounting for greater than 70 percent of Nevada's total population, and is also tasked with safeguarding the health of over 40 million visitors to Las Vegas annually.

## Mission

*The mission of the health district is, “To assess, protect, and promote the health, the environment, and the well-being of Southern Nevada communities, residents, and visitors.”*

In line with this mission, the Health District provides services and regulatory supervision that impact the public daily—from the food they eat and the water they drink to the public establishments they visit, the businesses they operate, and the requirements they must meet to work in certain industries such as food service and childcare.

# Organization



# Budget Process

## Budget Formation

The budget is developed annually to meet the needs and goals of the Health District and the community it serves. It also functions as a management tool, measuring actual performance against budget standards. The budget cycle involves all divisions and departments analyzing their fiscal year-to-date revenue and expenses and making necessary recommendations or adjustments. As part of Clark County's budget, SNHD's deadlines for tentative and adopted budgets are typically completed before April 1st each year.

Below are the summarized highlights in preparing the annual fiscal budget:

- **Mid-Fiscal Year Analysis:** Divisions, departments, and programs begin the General Ledger (GL) budget worksheet analysis with assistance from financial analysts and accountants. This involves analyzing fiscal year-to-date expenditures and adjusting accounts as needed.
- **Salary and Benefits Reconciliation:** Salaries and benefits for full-time and part-time employees are reconciled and projected for the current year and the following fiscal year. This process is conducted by the budget analyst and verified by the respective departments.
- **Revenue Projections:** Projections for revenues such as property tax are received from Clark County, and SNHD's charges for services (e.g., permits, licenses) are projected for

the following fiscal year. Grants are also reviewed and projected for any expected renewals or new awards.

- **Capital Projects Review:** Capital project requests are reviewed, and significant projects are considered and approved by upper management.
- **Proposed Fiscal Budget Compilation:** The financial analyst compiles a proposed fiscal budget, summarizing all funds. All revenues and expenditures, including capital outlay, are outlined, and presented in a standard format for review by the Controller and Chief Financial Officer (CFO).
- **Tentative Budget Presentation:** The CFO, Controller, and financial analyst present a tentative budget to Southern Nevada Health District executives. Changes can still be made at this stage.
- **Final Budget Adoption:** By the end of March, the final budget is presented to the Board of Health for adoption. Any subsequent changes will be captured in budget augmentation. The final budget report is then submitted to Clark County.
- **State Submission:** Clark County submits SNHD's adopted budget to the State Department of Taxation.
- **Budget Book Compilation:** The budget book is developed and compiled by the financial analysts.

This structured process ensures that the SNHD budget is comprehensive, accurate, and aligned with the organization's strategic goals and community needs.

### **Budget Augmentation**

The budget augmentation process is essential for addressing unforeseen changes and needs that arise during the fiscal year. This process allows the Health District to adjust its budget to accommodate new funding sources, unforeseen expenses, and other financial adjustments. This process is conducted biannually.

Below are the key steps involved in the budget augmentation process:

- **Identification of Need:** Divisions and departments identify the need for budget adjustments based on actual performance, new funding sources, unexpected expenses, or changes in project scope. This step involves collaboration with the financial analysts and accountants.
- **Analysis and Justification:** The identified needs are analyzed to determine their impact on the current budget. Departments must provide a detailed justification for the requested adjustments, outlining the reasons and expected outcomes.
- **Preparation of Augmentation Request:** The financial analysts compile the augmentation request, which includes a summary of the adjustments, detailed explanations, and supporting documentation. This request is prepared in a standard format for review.
- **Review by Controller and Chief Financial Officer (CFO):** The Controller and CFO review the augmentation request to ensure it aligns with SNHD's financial policies and

strategic goals. The Controller and CFO may request additional information or revisions before approval.

- **Presentation to Executive Team:** The financial analysts, Controller, and CFO present adjustments and a proposed augmented budget to the District Health Officer and Deputy District Health Officer - Administration. The executive team may request additional information or revisions before presenting to the Board of Health.
- **Presentation to Board of Health:** The CFO presents the augmentation request to the Board of Health. This presentation includes a detailed explanation of the adjustments, their impact on the overall budget, and the justification provided by the departments.
- **Board Approval:** The Board of Health reviews the augmentation request and approves or denies the adjustments. If approved, the adjustments are incorporated into the budget. If denied, departments may need to revise their request or explore alternative solutions.
- **Reporting:** The augmented budget is reported to the Nevada Department of Taxation. This ensures compliance with statutory requirements and maintains transparency in financial management.
- **Monitoring and Evaluation:** The augmented budget is monitored throughout the fiscal year to ensure that the adjustments are effectively addressing the identified needs. Regular evaluations are conducted to assess the impact of the augmentations on SNHD's financial performance and strategic goals.

This structured budget augmentation process allows SNHD to remain flexible and responsive to changing financial circumstances, ensuring that resources are allocated effectively to meet the organization's needs and the community it serves.

# Summary of All Funds

## FY 2026 Adopted Budget

SNHD All Funds Combined						
FY 2025 - 2026 ADOPTED BUDGET						
	General Fund	Capital Projects Fund	Bond Reserve Fund	Special Revenue Fund	Proprietary Fund	Total All Funds
Revenues:						
Licenses/Permits	29,908,723	-	-	-	-	29,908,723
Property Tax	41,508,419	-	-	-	-	41,508,419
Charges for Services	48,356,635	-	-	-	-	48,356,635
Grant Revenues	-	-	-	60,754,279	-	60,754,279
Interest Earnings	-	109,559	96,620	-	794	206,973
Other	4,484,991	-	-	1,127,288	-	5,612,279
<b>Total Revenue</b>	<b>124,258,768</b>	<b>109,559</b>	<b>96,620</b>	<b>61,881,567</b>	<b>794</b>	<b>186,347,308</b>
Expenditures:						
Salaries	52,682,295	-	-	21,764,330	-	74,446,625
Employee Benefits	26,149,735	-	-	10,894,846	-	37,044,581
Services & Supplies	37,772,813	219,000	-	28,332,977	-	66,324,790
Capital Outlay	704,580	2,592,000	-	9,669,063	-	12,965,643
<b>Total Expenditures</b>	<b>117,309,423</b>	<b>2,811,000</b>	<b>-</b>	<b>70,661,216</b>	<b>-</b>	<b>190,781,639</b>
Excess (Deficiency) of Revenues	6,949,345	(2,701,441)	96,620	(8,779,649)	794	(4,434,331)
Other Financing Sources(Uses)						
Contingency	-	-	-	-	-	-
Transfers In	-	3,000,000	-	8,779,649	-	11,779,649
Transfers Out (to Grant Fund)	(8,779,649)	-	-	-	-	(8,779,649)
Transfers Out (to Capital Fund)	(3,000,000)	-	-	-	-	(3,000,000)
<b>Beginning Fund Balance</b>	<b>47,199,705</b>	<b>2,999,600</b>	<b>3,072,808</b>	<b>82,081</b>	<b>92,295</b>	<b>53,446,489</b>
<b>Ending Fund Balance</b>	<b>42,369,401</b>	<b>3,298,159</b>	<b>3,169,428</b>	<b>82,081</b>	<b>93,089</b>	<b>49,012,158</b>

The Fiscal Year 2025-2026 adopted is comprised of four major components: the General Fund, Capital Projects Fund, Bond Reserve Fund, and Special Revenue (Grant) Fund. Additionally, SNHD has one proprietary fund known as the Insurance Liability Fund.

According to Nevada Revised Statutes 354.533, Fund Balance is defined as the excess of assets over liabilities in a governmental fund. In other words, the fund balance represents the net difference between total financial resources and total appropriated uses. Maintaining proper fund balances over the long term is crucial for sound financial management, as it provides a financial guard against predicted and unpredicted changes.

### General Fund

The General Fund is the main operating account of SNHD, covering financial resources except those required to be accounted for in another fund. For FY 2026, the beginning fund balance is projected to be \$47.2 million. This unencumbered cash ensures that services can be provided temporarily if commitments exceed revenues. The General Fund has a total revenue budget of \$124.3 million, which includes:

- \$41.5 million from property (ad valorem) tax

- \$48.4 million from charges for services
- \$29.9 million from licenses and permits.
- \$4.5 million from interest earnings and other revenues

Expenditures in the General Fund include:

- \$78.8 million for salaries and employee benefits
- \$38.5 million for supplies and capital outlay

### **Capital Projects Fund**

The beginning fund balance for the Capital Projects Fund in FY 2026 is \$3.0 million. This fund accounts for resources committed or assigned to the acquisition of capital assets, excluding a new administration building. There are no specific requirements to maintain an excess of assets over liabilities in the Capital Projects Fund.

### **Bond Reserve Fund**

The beginning fund balance for the Bond Reserve Fund in FY 2026 is \$3.1 million. This fund is dedicated to resources committed.

### **Special Revenue (Grant) Fund**

Also known as the Grant Fund, the Special Revenue Fund tracks all awards received by SNHD. Grants are accounted for in this fund as they are approved at the federal, state, and county levels, or received from awarding agencies. Projected grants for FY 2026 total \$61.9 million.

### **Insurance Liability Fund**

The Insurance Liability Fund accounts for SNHD employees' worker's compensation liabilities. As a proprietary fund, it functions similarly to the private sector and involves interactions with Clark County regarding investment transactions.

### **Budget Monitoring and Adjustments**

Revenues and operating expenditures are closely monitored during the fiscal year to ensure expenditures align with actual revenue collections. Adjustments to the adopted budget are accomplished through an augmentation process, which requires formal approval from the Board of Health. Once approved, the general ledger budget amounts are updated in the accounting system to reflect these changes accurately.

This comprehensive approach ensures that the SNHD budget remains balanced, responsive to changes, and aligned with the organization's financial and operational goals.

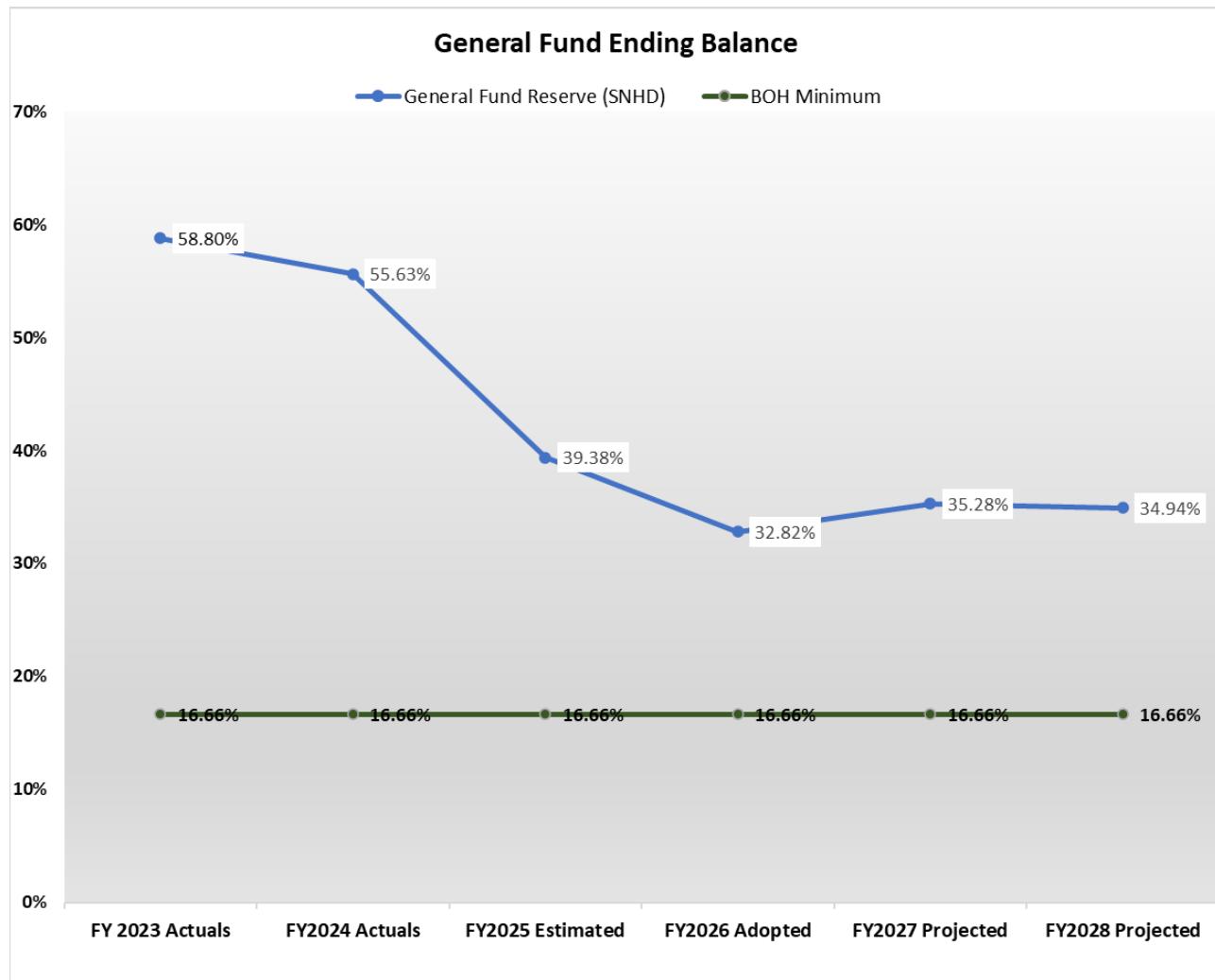
## Employee Count by Division

FY 2025-2026 employee count total 872.5, an increase from estimated prior fiscal year total of 866.5. SNHD currently has six major divisions: Administration, Community Health, Disease Surveillance and Control, Environmental Health, Federally Qualified Health Centers (FQHC), and Public Health & Preventive Care.

<b>FY26 FTE Counts Division</b>	<b>2023/ 2024</b>	<b>2024/ 2025</b>	<b>2024/ 2025</b>	<b>2025/ 2026</b>	<b>FTE Change</b>
	<b>Actuals</b>	<b>Adopted</b>	<b>Amended</b>	<b>Adopted</b>	<b>FY25 AM vs FY26</b>
Public Health & Preventive Care	107.1	123.5	115.7	114.0	-1.7
Environmental Health	200.0	203.0	205.0	205.0	0.0
FQHC	115.8	121.0	121.7	126.5	4.8
Disease Surveillance & Control	119.0	125.0	127.0	132.0	5.0
Community Health	97.0	104.0	103.0	103.0	0.0
Administration	183.5	190.0	192.0	192.0	0.0
<b>Total:</b>	<b>822.4</b>	<b>866.5</b>	<b>864.3</b>	<b>872.5</b>	<b>8.2</b>

## General Fund Balance

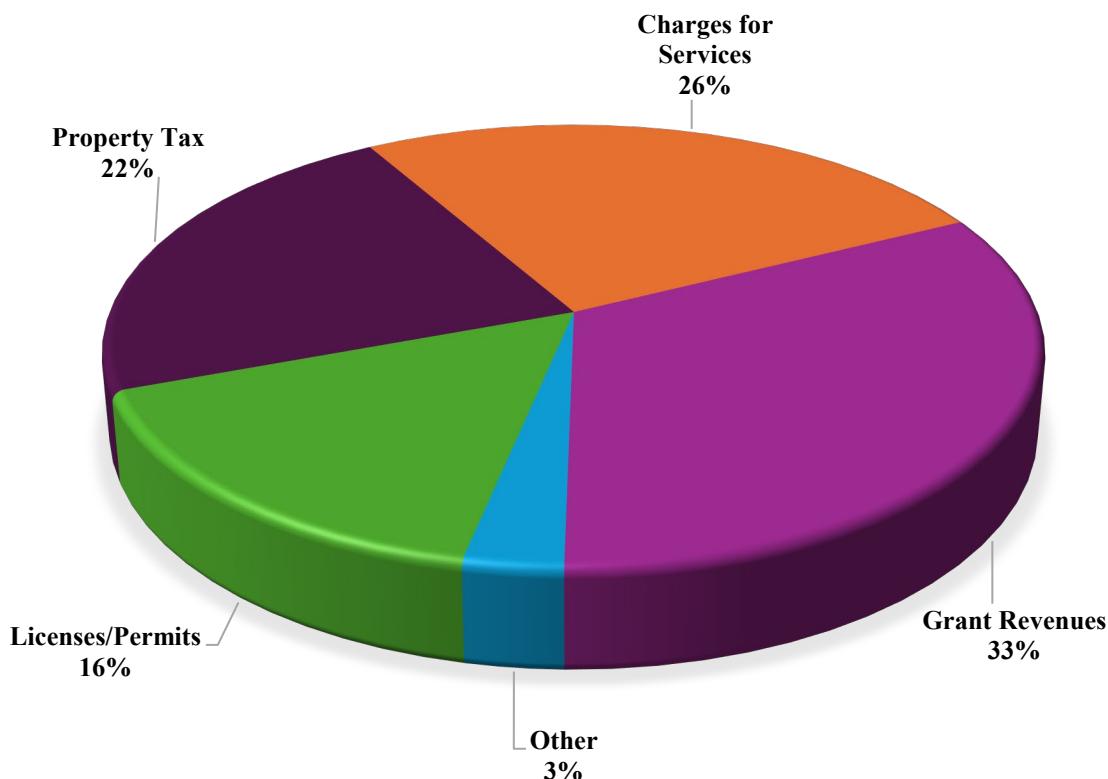
The General Fund anticipated ending fund balance for FY 2025-2026 totals \$42.4 million. State and Board of Health mandates a minimum requirement of 16.67%. Revenues and operating expenditures are closely monitored throughout the fiscal year to ensure that expenditures align with actual revenue collections. Adjustments are made as necessary to maintain this balance.



## Combined General Fund & Special Revenue

### Revenues by Source

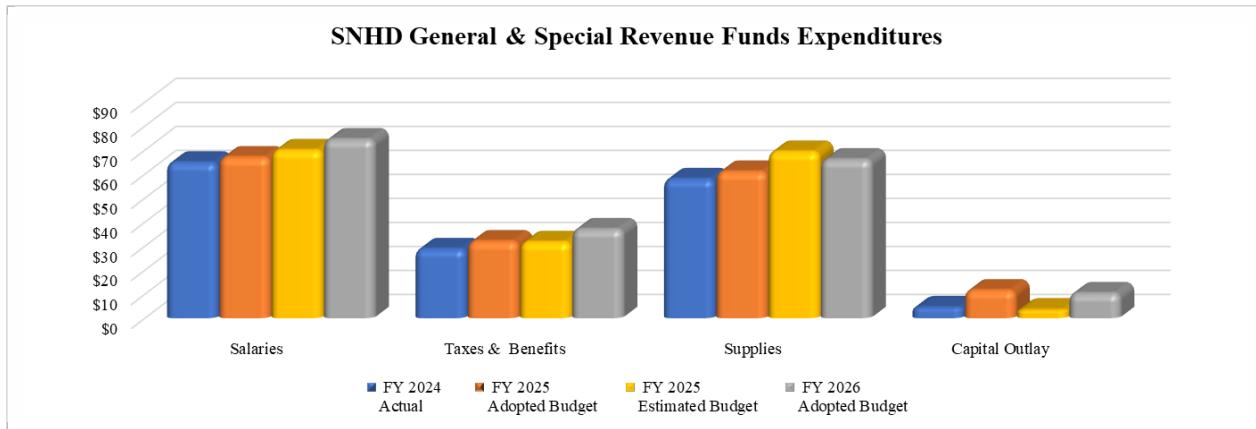
**SNHD TOTAL REVENUES  
FY2026  
\$186.1M**



The projected revenue for all major funds in FY 2025-2026 amounts to \$186.1 million. This includes an anticipated increase in property tax revenue to \$41.5 million. The Health District's property tax revenue is based on the assessed valuation of real and personal property as determined by the Clark County Assessor's Office and the Nevada Department of Taxation. Revenue from licenses and permits is expected to total \$29.9 million. Revenue from charges for services is expected to total \$48.4 million. Revenue from other sources is estimated at \$5.6 million. Additionally, expected grant revenues total \$60.8 million.

Revenues from these various sources are vital to supporting the operations and initiatives of the Health District, ensuring continued service to the community and adherence to public health standards.

### **Expenditures by Category**



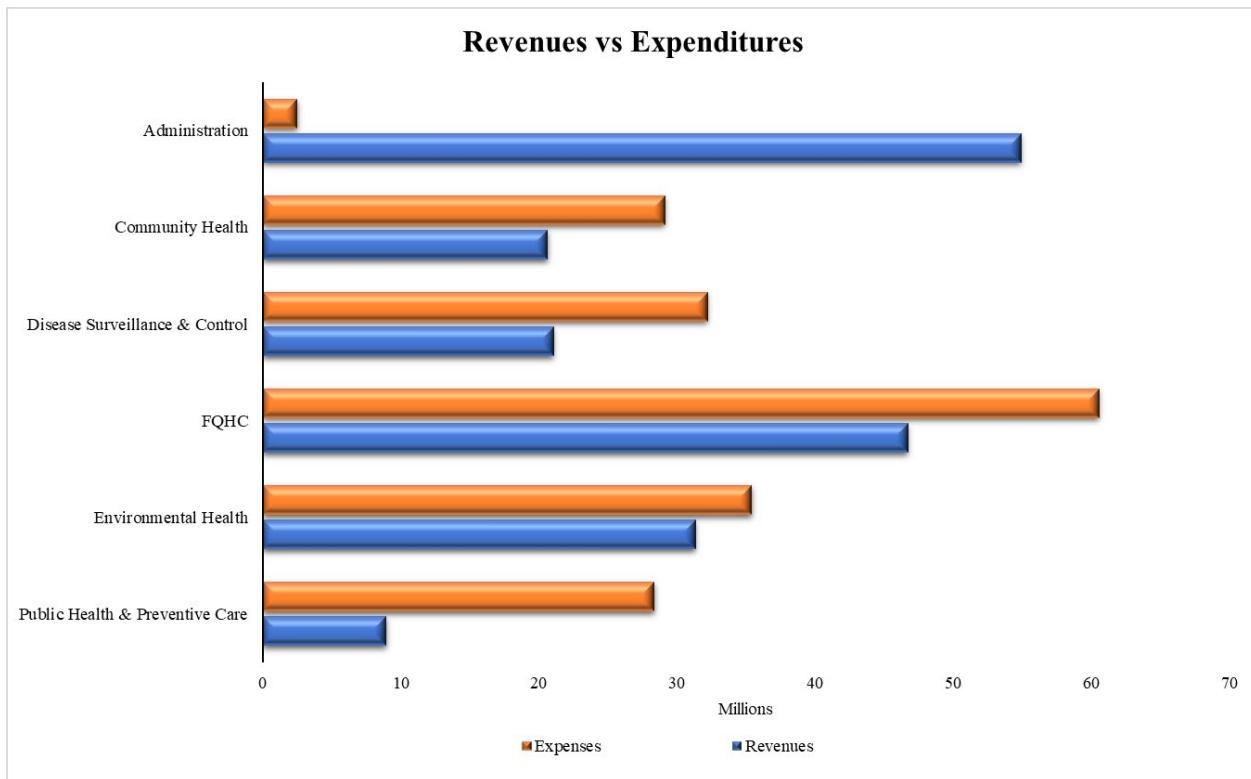
The Health District's projected expenditures for FY 2025-2026 for general and special revenue funds amount to \$188.0 million. Breakdown of these expenditures includes:

- **Salaries, Taxes, and Benefits:** \$111.5 million
- **Supplies and Services:** \$76.5 million

Please note that transfers in and out are not included in this illustration. These expenditures support the Health District's various programs and services, ensuring the effective delivery of public health initiatives across Southern Nevada.

## **Revenues vs Expenditures**

SNHD operates with six main divisions. Public Health & Preventive Care, Federally Qualified Health Centers (FQHC), Community Health, Environmental Health, Disease Surveillance & Control, and Administration. FQHC consists of community-based health care providers that received funds from the HRSA (Health Resources and Services Administration) Health Center Program to provide primary care services in underserved areas.

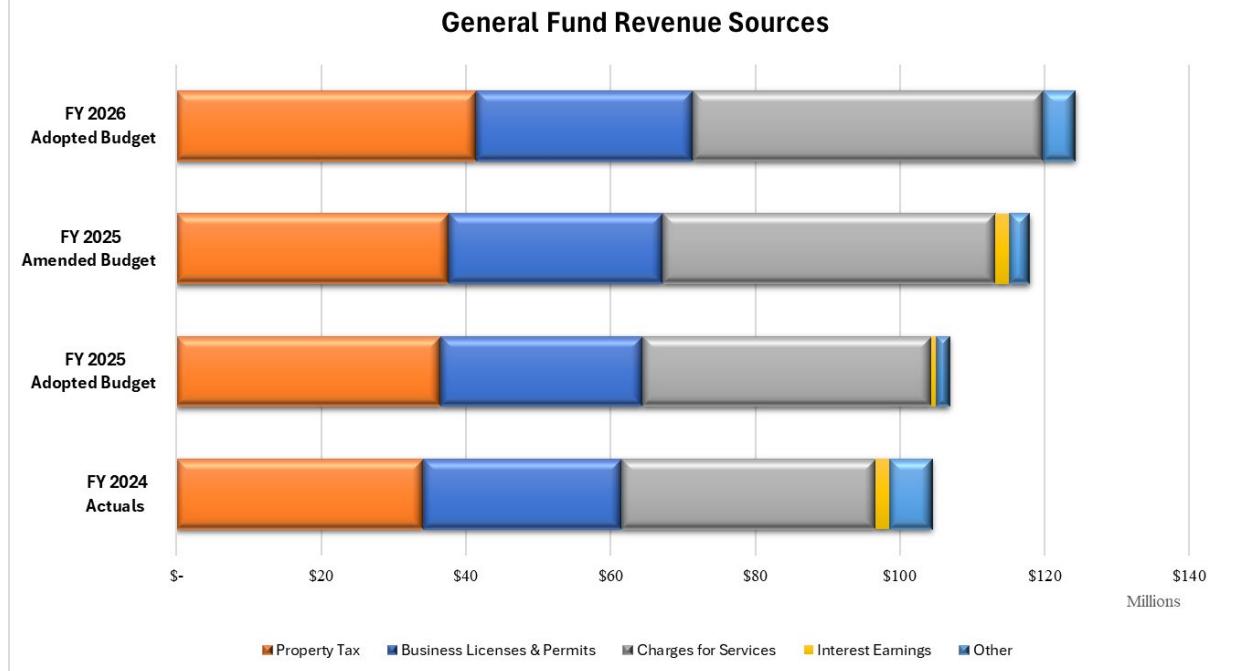


# General Fund Revenues & Expenditures

## General Fund Revenues

Revenues	FY 2024 Actuals	FY 2025 Adopted Budget	FY 2025 Amended Budget	FY 2026 Adopted Budget	% Change FY25 Amended vs. FY26 Adopted
Business Licenses & Permits	27,422,167	27,802,255	29,623,788	29,908,723	1.0%
Property Tax	34,088,562	36,594,904	37,651,176	41,508,419	10.2%
Charges for Services	35,119,778	39,943,686	45,935,913	48,356,635	5.3%
Interest Earnings	1,971,853	669,772	1,972,900	-	0.0%
Other	5,900,386	1,889,388	2,772,373	4,484,991	61.8%
	104,502,746	106,900,005	117,956,150	124,258,768	5.3%
Other Financing Sources					
<i>Transfer In</i>					0.0%
<b>Total General Fund Revenues</b>	<b>104,502,746</b>	<b>106,900,005</b>	<b>117,956,150</b>	<b>124,258,768</b>	<b>5.3%</b>

## General Fund Revenue Sources



## General Fund Expenditures

Expenditures by Division (General Fund)	FY 2024 Actuals	FY 2025 Adopted Budget	FY 2025 Amended Budget	FY 2026 Adopted Budget	% Change FY25 Amended vs. FY26 Adopted
<b>Public Health &amp; Preventive Care</b>					
Salaries	4,555,867	5,064,452	5,396,810	6,437,077	16.2%
Tax & Benefits	1,983,676	2,423,233	2,374,188	3,151,868	24.7%
Supplies	4,692,646	5,974,967	6,178,368	7,695,010	19.7%
Travel	53,067	60,410	57,772	71,000	18.6%
Contractual	845,024	223,380	267,650	374,020	28.4%
Capital	11,996	-	-	14,000	100.0%
Cost Allocation	1,852,554	2,749,288	2,793,576	4,790,603	41.7%
Transfers Out	482,069	660,662	858,080	546,529	-57.0%
<b>Total</b>	<b>14,476,899</b>	<b>17,156,392</b>	<b>17,926,443</b>	<b>23,080,107</b>	<b>22.3%</b>
<b>Environmental Health</b>					
Salaries	14,115,010	14,642,035	16,695,381	17,146,443	2.6%
Tax & Benefits	6,204,259	7,155,457	7,379,622	8,464,324	12.8%
Supplies	132,907	180,870	161,134	78,186	-106.1%
Travel	332,020	411,005	404,935	354,408	-14.3%
Contractual	174,590	1,060,650	971,164	608,473	-59.6%
Capital	1,482	2,000	2,000	-	0.0%
Cost Allocation	3,269,438	4,630,403	4,973,957	7,195,995	30.9%
Transfers Out	194,865	183,855	193,803	144,652	-34.0%
<b>Total</b>	<b>24,424,571</b>	<b>28,266,276</b>	<b>30,781,997</b>	<b>33,992,481</b>	<b>9.4%</b>
<b>FQHC</b>					
Salaries	4,608,009	5,844,014	6,063,022	6,761,570	10.3%
Tax & Benefits	1,979,592	2,777,955	2,745,655	3,376,007	18.7%
Supplies	18,018,521	20,908,130	25,963,929	29,323,641	11.5%
Travel	8,380	13,273	10,317	17,626	41.5%
Contractual	1,182,983	1,475,689	1,580,139	1,528,728	-3.4%
Capital	35,287	63,000	16,000	19,580	18.3%
Cost Allocation	4,022,378	6,162,689	7,060,672	11,077,331	36.3%
Transfers Out	723,482	707,038	943,684	796,699	-18.4%
<b>Total</b>	<b>30,578,632</b>	<b>37,951,787</b>	<b>44,383,417</b>	<b>52,901,182</b>	<b>16.1%</b>
<b>Disease Surveillance &amp; Control</b>					
Salaries	3,103,220	4,083,004	3,950,147	4,180,381	5.5%
Tax & Benefits	1,365,246	1,929,241	1,773,350	2,086,937	15.0%
Supplies	51,170	101,270	115,022	89,507	-28.5%
Travel	47,220	47,526	52,462	54,038	2.9%
Contractual	100,729	160,978	115,226	110,166	-4.6%
Capital	-	800	-	-	0.0%
Cost Allocation	727,555	1,264,564	1,175,415	1,760,678	33.2%
Transfers Out	2,289,550	1,033,230	2,577,456	2,880,925	10.5%
<b>Total</b>	<b>7,684,690</b>	<b>8,620,613</b>	<b>9,759,078</b>	<b>11,162,632</b>	<b>12.6%</b>

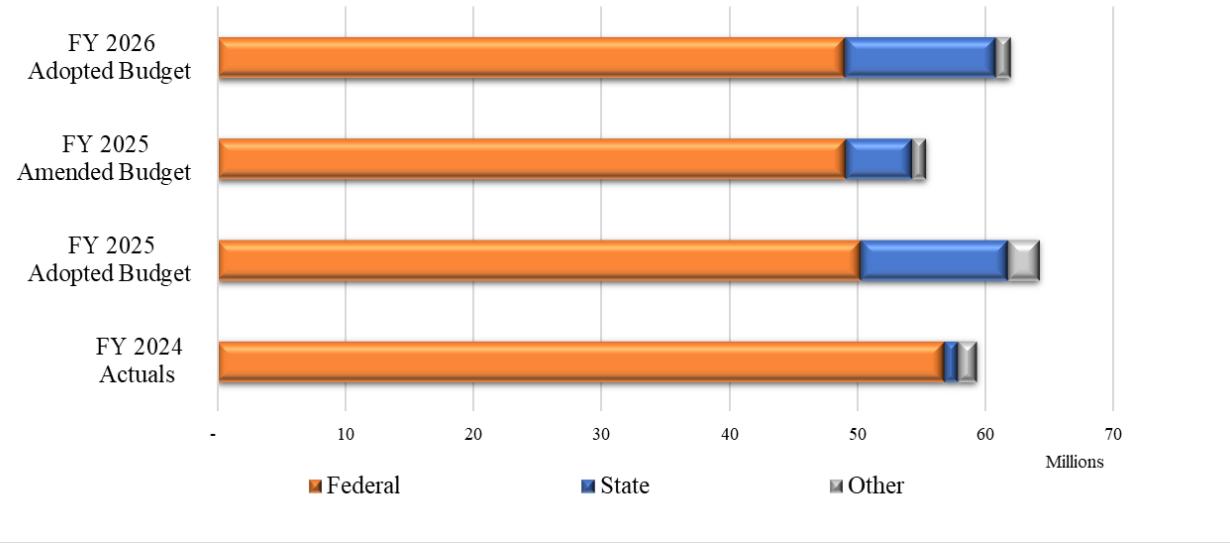
Expenditures by Division (General Fund)	FY 2024 Actuals	FY 2025 Adopted Budget	FY 2025 Amended Budget	FY 2026 Adopted Budget	% Change FY25 Amended vs. FY26 Adopted
<b><i>Community Health</i></b>					
Salaries	4,650,384	4,650,522	3,984,737	3,879,473	-2.7%
Tax & Benefits	2,112,188	2,259,749	1,833,668	1,929,792	5.0%
Supplies	2,055,427	2,484,607	2,344,383	2,600,677	9.9%
Travel	6,124	24,389	35,397	36,724	3.6%
Contractual	1,016,040	1,291,812	1,055,389	904,992	-16.6%
Capital	42,544	410,000	435,000	268,000	-62.3%
Cost Allocation	1,538,484	2,215,333	1,896,054	2,597,308	27.0%
Transfers Out	1,098,558	2,014,757	1,973,382	1,751,984	-12.6%
<b>Total</b>	<b>12,519,749</b>	<b>15,351,169</b>	<b>13,558,009</b>	<b>13,968,949</b>	<b>2.9%</b>
<b><i>Administration</i></b>					
Salaries	12,444,490	12,128,003	13,855,522	14,277,352	3.0%
Tax & Benefits	5,537,547	5,975,635	6,561,853	7,140,806	8.1%
Supplies	543,170	917,096	998,564	852,778	-17.1%
Travel	44,266	103,163	110,941	108,115	-2.6%
Contractual	6,139,739	8,312,395	8,316,675	7,987,189	-4.1%
Capital	231,542	213,000	295,745	403,000	26.6%
Cost Allocation	(20,129,071)	(28,610,035)	(28,129,169)	(42,444,378)	33.7%
Transfers Out	225,639	2,931,193	5,579,508	5,658,860	1.4%
<b>Total</b>	<b>5,037,322</b>	<b>1,970,449</b>	<b>7,589,640</b>	<b>(6,016,278)</b>	<b>226.2%</b>
<b><i>All Divisions</i></b>					
Salaries	43,476,980	46,412,030	49,945,618	52,682,295	5.2%
Tax & Benefits	19,182,508	22,521,269	22,668,335	26,149,735	13.3%
Supplies	25,493,841	30,566,939	35,761,400	40,639,798	12.0%
Travel	491,077	659,766	671,823	641,911	-4.7%
Contractual	9,459,105	12,524,904	12,306,243	11,513,567	-6.9%
Capital	322,851	688,800	748,745	704,580	-6.3%
Cost Allocation	(8,718,662)	(11,587,758)	(10,229,495)	(15,022,463)	31.9%
Transfers Out	5,014,163	7,530,735	9,125,913	11,779,649	22.5%
Contingency	-	3,000,000	3,000,000	-	0.0%
<b>Total All Divisions</b>	<b>94,721,863</b>	<b>112,316,686</b>	<b>123,998,584</b>	<b>129,089,073</b>	<b>3.9%</b>

# Special Revenue Fund Revenues & Expenditures

## Special Revenue Fund Revenues

Revenues	FY 2024 Actuals	FY 2025 Adopted Budget	FY 2025 Amended Budget	FY 2026 Adopted Budget	% Change FY25 Amended vs. FY26 Adopted
<b>Intergovernmental Revenues</b>					
Federal	56,711,351	50,214,575	49,082,793	48,998,856	-0.2%
State	1,071,403	11,467,084	5,165,577	11,755,423	127.6%
Other	1,481,055	2,468,706	1,126,520	1,127,288	0.1%
<b>Subtotal Revenues</b>	<b>59,263,809</b>	<b>64,150,365</b>	<b>55,374,890</b>	<b>61,881,567</b>	<b>11.8%</b>
<b>Other Financing Sources</b>					
Transfer In	5,014,928	5,530,735	7,125,913	8,779,649	23.2%
<b>Total Special Revenue Fund Revenues</b>	<b>64,278,737</b>	<b>69,681,100</b>	<b>62,500,803</b>	<b>70,661,216</b>	<b>13.1%</b>

## Special Revenue Sources



## Special Revenue Fund Expenditures

Expenditures by Division (Special Revenue/Grants Fund)	FY 2024 Actuals	FY 2025 Adopted Budget	FY 2025 Amended Budget	FY 2026 Adopted Budget	% Change FY25 Amended vs. FY26 Adopted
<b>Public Health &amp; Preventive Care</b>					
Salaries	3,502,813	3,596,918	3,294,232	2,758,160	19.4%
Tax & Benefits	1,528,937	1,684,133	1,491,430	1,374,073	8.5%
Supplies	116,156	148,677	233,857	114,664	103.9%
Travel	66,667	249,619	188,931	106,058	78.1%
Contractual	1,469,398	1,501,428	1,606,260	201,451	697.3%
Capital	12,887	86,505	7,515	-	0.0%
Cost Allocation	1,108,861	660,662	1,335,109	1,229,690	8.6%
<b>Total</b>	<b>7,805,719</b>	<b>7,927,941</b>	<b>8,157,334</b>	<b>5,784,096</b>	<b>41.0%</b>
<b>Environmental Health</b>					
Salaries	1,455,197	1,152,448	897,768	804,852	11.5%
Tax & Benefits	646,131	557,990	409,733	400,580	2.3%
Supplies	64,780	500	55,791	-	0.0%
Travel	45,722	49,115	59,247	-	0.0%
Contractual	340,795	262,355	106,826	-	0.0%
Capital	277,029	-	-	-	0.0%
Cost Allocation	415,803	183,855	299,297	325,467	-8.0%
<b>Total</b>	<b>3,245,457</b>	<b>2,206,263</b>	<b>1,828,661</b>	<b>1,530,899</b>	<b>19.5%</b>
<b>FQHC</b>					
Salaries	3,551,104	3,465,144	3,481,862	4,299,231	-19.0%
Tax & Benefits	1,660,842	1,633,986	1,577,993	2,157,812	-26.9%
Supplies	625,952	814,179	571,006	128,500	344.4%
Travel	54,778	52,870	82,634	48,215	71.4%
Contractual	404,472	1,053,627	298,596	5,400	5429.6%
Capital	26,599	849,102	960,474	-	0.0%
Cost Allocation	993,788	707,038	1,364,531	1,792,573	-23.9%
<b>Total</b>	<b>7,317,535</b>	<b>8,575,947</b>	<b>8,337,094</b>	<b>8,431,730</b>	<b>-1.1%</b>
<b>Disease Surveillance &amp; Control</b>					
Salaries	7,278,617	5,490,387	6,345,075	6,491,259	-2.3%
Tax & Benefits	3,295,494	2,592,525	2,847,737	3,250,024	-12.4%
Supplies	2,950,440	277,153	3,540,231	1,067,020	231.8%
Travel	193,112	129,499	301,585	245,741	22.7%
Contractual	9,566,782	3,309,606	5,367,611	7,487,437	-28.3%
Capital	713,913	-	81,087	270,920	-70.1%
Cost Allocation	3,736,601	1,033,230	3,617,187	5,079,348	-28.8%
<b>Total</b>	<b>27,734,959</b>	<b>12,832,401</b>	<b>22,100,513</b>	<b>23,891,748</b>	<b>-7.5%</b>

Expenditures by Division (Special Revenue/Grants Fund)	FY 2024 Actuals	FY 2025 Adopted Budget	FY 2025 Amended Budget	FY 2026 Adopted Budget	% Change FY25 Amended vs. FY26 Adopted
<b>Community Health</b>					
Salaries	4,795,606	5,334,429	4,661,392	6,031,056	-22.7%
Tax & Benefits	2,134,799	2,510,965	2,124,375	3,021,217	-29.7%
Supplies	1,784,288	6,572,963	2,251,634	1,214,027	85.5%
Travel	142,647	156,913	233,280	130,437	78.8%
Contractual	4,208,452	6,381,225	4,952,676	2,316,740	113.8%
Capital	499,726	1,191,996	373,662	579,728	-35.5%
Cost Allocation	2,106,069	2,014,757	2,856,637	3,589,165	-20.4%
<b>Total</b>	<b>15,671,587</b>	<b>24,163,247</b>	<b>17,453,656</b>	<b>16,882,371</b>	<b>3.4%</b>
<b>Administration</b>					
Salaries	728,582	1,358,517	1,283,224	1,379,772	-7.0%
Tax & Benefits	312,617	635,791	557,460	691,140	-19.3%
Supplies	19,603	-	57,675	22,800	153.0%
Travel	90,724	20,000	38,469	55,624	-30.8%
Contractual	348,305	1,922,997	594,983	166,400	257.6%
Capital	668,222	8,751,805	1,335,000	8,818,415	-84.9%
Cost Allocation	357,883	1,286,193	756,735	3,006,221	-74.8%
<b>Total</b>	<b>2,525,936</b>	<b>13,975,302</b>	<b>4,623,545</b>	<b>14,140,372</b>	<b>-67.3%</b>
<b>All Divisions</b>					
Salaries	21,311,919	20,397,843	19,963,552	21,764,330	-8.3%
Tax & Benefits	9,578,820	9,615,389	9,008,727	10,894,846	-17.3%
Supplies	5,561,219	7,813,472	6,710,194	2,547,011	163.5%
Travel	593,650	658,015	904,145	586,075	54.3%
Contractual	16,338,204	14,431,238	12,926,952	10,177,428	27.0%
Capital	2,198,376	10,879,408	2,757,737	9,669,063	-71.5%
Cost Allocation	8,719,005	5,885,735	10,229,495	15,022,463	-31.9%
<b>Total All Divisions</b>	<b>64,301,193</b>	<b>69,681,100</b>	<b>62,500,802</b>	<b>70,661,216</b>	<b>-11.5%</b>

## Other Funds Revenues & Expenditures

### Capital Projects Fund

Capital Fund Revenues & Expenditures					
	FY 2024 Actuals	FY 2025 Adopted Budget	FY 2025 Amended Budget	FY 2026 Adopted Budget	% Change FY25 Amended vs. FY26 Adopted
<b>Revenues</b>					
<i>Interest Earnings</i>	148,872	70,000	70,000	109,559	56.5%
<b>Expenditures</b>					
<i>Supplies</i>	303,956	-	493,000	219,000	
<i>Capital Outlay</i>	519,787	1,800,575	1,307,575	2,592,000	98.2%
Excess (Deficiency) of Revenues	<b>(674,871)</b>	<b>(1,730,575)</b>	<b>(1,730,575)</b>	<b>(2,701,441)</b>	<b>56.1%</b>
<b>Other Financing Sources/Uses</b>					
<i>Transfer In</i>	2,000,000	2,000,000	2,000,000	3,000,000	50.0%
<i>Transfer Out</i>	-	-	-	-	-
<b>Beginning Balance</b>	<b>1,405,046</b>	<b>2,730,175</b>	<b>2,730,175</b>	<b>2,999,600</b>	<b>9.9%</b>
<b>Ending Fund Balance</b>	<b>2,730,175</b>	<b>2,999,600</b>	<b>2,999,600</b>	<b>3,298,159</b>	<b>10.0%</b>

The Capital Projects Fund is designated for the acquisition of capital assets other than buildings. This includes fixed assets such as furniture, equipment, vehicles, and building improvements. The current capitalization threshold is \$5,000. For FY 2025-2026, the anticipated ending fund balance is \$3.3 million, which includes a planned transfer of \$3 million from the General Fund to support these capital acquisitions.

### Bond Reserve Fund

Bond Reserve Fund Revenues & Expenditures					
	FY 2024 Actuals	FY 2025 Adopted Budget	FY 2025 Amended Budget	FY 2026 Adopted Budget	% Change FY25 Amended vs. FY26 Adopted
<b>Revenues</b>					
<i>Interest Earnings</i>	18,285	30,000	30,000	96,620	222.1%
<b>Expenditures</b>					
<i>Capital Outlay</i>	-	-	-	-	0.0%
Excess (Deficiency) of Revenues	<b>18,285</b>	<b>30,000</b>	<b>30,000</b>	<b>96,620</b>	<b>222.1%</b>
<b>Other Financing Sources/Uses</b>					
<i>Transfer In</i>	-	-	-	-	0.0%
<i>Transfer Out</i>	-	-	-	-	0.0%
<b>Beginning Balance</b>	<b>3,024,523</b>	<b>3,042,808</b>	<b>3,042,808</b>	<b>3,072,808</b>	<b>1.0%</b>
<b>Ending Fund Balance</b>	<b>3,042,808</b>	<b>3,072,808</b>	<b>3,072,808</b>	<b>3,169,428</b>	<b>3.1%</b>

The Bond Reserve Fund accounts for resources that have been assigned or committed to the future acquisition of a new administration building. There are no planned building acquisitions in the near future. FY 2025-2026 anticipated ending fund balance is \$3.2 million. There are no planned transfers in/out during the fiscal year to general fund or other funds.

### Proprietary Fund

Proprietary Fund Cash Flow Activities					
	FY 2024 Actuals	FY 2025 Adopted Budget	FY 2025 Amended Budget	FY 2026 Adopted Budget	% Change FY25 Amended vs. FY26 Adopted
<b>Cash Flows From Operating Activities</b>					
<i>Other Receipts</i>	-	(500)	(500)	-	-100.0%
<b>Cash Flows From Investing Activities</b>					
<i>Interest Earnings</i>	4,745	1,500	1,500	794	-47.1%
Net Increase (Decrease) in cash and cash equivalents	4,745	1,000	1,000	794	-20.6%
<b>Cash &amp; Cash Equivalents @ July 1</b>	<b>86,550</b>	<b>91,295</b>	<b>91,295</b>	<b>92,295</b>	<b>1.1%</b>
<b>Cash &amp; Cash Equivalents @ June 30</b>	<b>91,295</b>	<b>92,295</b>	<b>92,295</b>	<b>93,089</b>	<b>0.9%</b>

The Proprietary Fund is an internal service fund and accounts for SNHD employees' workers compensation liability. The table above depicts projected operating and investing cash flow activities.

# Divisions & Departments Information

## Public Health & Preventive Care

The Public Health and Preventive Care (PPC) Division provides the following services: Adult and Childhood immunizations; Community Health Nursing Program, which includes Maternal and Child Health Nursing, Nurse Family Partnership, Healthy Start, Embracing Fatherhood, Thrive by 0 -3, Child Protective Services Nurse Liaison, and nurse case management services for children with elevated lead levels; Express STI Testing and Referrals, Congenital Syphilis Case Management, Street and Field Medicine, Complex STI Navigation, Serving Unhoused persons through Resources and Engagement in care (SURE), Rapid Prevent, Pathways to Better Health and Tuberculosis Control. All services incorporate health promotion and disease prevention education. SNHD Primary and Preventive Care services are delivered at the 280 S. Decatur Blvd Public Health Center, Henderson Public Health Center, Bonanza Public Health Center, and Mesquite Public Health Center. Additional services are provided regularly through field visits and at various sites throughout the urban and rural Clark County.

Program Name	Adopted FY 25/26 FTE
PUBLIC HEALTH & PREVENTIVE CARE ADMINISTRATION	10.0
COMMUNITY HEALTH NURSING	28.0
IMMUNIZATION	40.0
SEXUAL HEALTH OUTREACH & PREVENTION	17.0
Street Medicine Program	3.0
TUBERCULOSIS	16.0
<b>Total FTE</b>	<b>114.0</b>

	General Fund	Special Revenue Fund	Total
<b>Revenues</b>			
<i>Transfer In</i>	3,679,350	5,237,567	8,916,917
		546,529	546,529
<b>Expenditures</b>			
<i>Transfers Out</i>	22,533,578	5,784,096	28,317,674
	546,529	-	546,529
<b>Revenue/Over (Under) Expenditures</b>	<b>(19,400,757)</b>	-	<b>(19,400,757)</b>

## Public Health & Preventive Care Administration

The Public Health and Preventive Care Division's mission is to improve and protect the health of residents and visitors through the practice of community health nursing, preventive health services, education, and emergency preparedness and response. Departments under PPC Administration include Immunization Clinics, Immunization Projects, Community Health Nursing, Tuberculosis Treatment and Control, Sexual Health Outreach and Prevention Programs, and the Office of the Employee Health Nurse. PPC's services are delivered to the 280 S. Decatur Blvd Public Health Center, Bonanza Las Vegas Public Health Center, Henderson Public Health Center, and Mesquite Public Health Center. Additional services are provided regularly through field visits and at various sites throughout the urban and rural Clark County.

The goal of PPC Administration is to provide leadership and support to all its departments. Internal Division resources include an Administrative Analyst, Project/Program Coordinator, and the newly implemented Vaccine Management Program.

### **Department Objectives**

- Provide leadership and support to all its departments.
- Integrate quality assurance into operations, including planning, implementation, and evaluation of projects and activities, by standing up a Quality Management Plan and quality improvement team.
- Improve inventory management of all District vaccines to increase accountability and prevent revenue loss.

### **Office of Employee Health Nurse**

- Update policies and procedures to match the most current recommendations and best practices for employee health services.
- Develop relevant District-wide trainings, including, but not limited to:
  - First Aid Training.
  - Skills Fair for clinical team members.
- Work with the Safety Officer to assess and monitor workplace safety issues and participate in the development of safety plans.

## Immunization Program

The Immunization Program is dedicated to ensuring infants, children, and adults are protected against Vaccine Preventable Diseases in Southern Nevada by evidence-based practices through vaccination. Immunization services are provided throughout the community in four designated locations and are augmented with the Immunization Outreach Program, and community partners. The Immunization Program is funded by general funds, collected fees, insurance billing, and federal and state grants.

## **Department Objectives**

- To provide immunization services and increase access to infants, children, and adults in Southern Nevada and focus on underserved populations including individuals who experience health inequities, homelessness, overcrowded living conditions, and lack of insurance.
- To collaborate with Southern Nevada Health District Informatics and community partners to assess and analyze vaccination rates in population groups to increase vaccination rates and decrease Vaccine Preventable Diseases.
- To increase knowledge of and confidence in routinely recommended vaccines in the community.

## **Program Objectives**

- To provide safe and effective vaccines to all individuals per CDC guidelines and recommendations, Nevada State Immunization Program requirements, and Southern Nevada Health District protocols.
- Maintain adequate vaccine supply for all Health District operations in a safe and financially sound manner.
- Provide updated education and maintain competence for all Health District workforce members providing immunizations.
- Provide client-centered care and culturally sensitive appropriate approaches to all individuals receiving services at all identified Southern Nevada Health District locations and collaborative services.

## **Additional 2025/2026 Goals**

- Increase the vaccination completion rate for the 2nd (booster) dose of MenACWY in eligible clients by 5%.
- Increase routine Men B vaccination for eligible clients by 5%.
- Increase the initiation and completion of the HPV9 vaccination for eligible clients by 5%.
- Increase flu vaccination for all ages by 5%.

### Immunization Outreach Program

The Health District's Immunization Outreach Program is dedicated to ensuring that infants, children, and adults are protected against vaccine preventable diseases, by providing vaccines at four clinics and outreach immunization events in Clark County.

The Immunization Outreach Program is dedicated to ensuring that infants, children, and adults are protected against vaccine preventable diseases in Clark County through community partnerships and evidence-based practices. Funding is supported by the Nevada State Immunization Program (NSIP). These subgrants include the Vaccine for Children Program, Perinatal Hepatitis B Program, Childcare immunization assessments, and providing immunization clinics in the community.

Outreach clinics are conducted in various settings for uninsured, underinsured, and underserved populations.

### **Department Objectives**

- Administer Centers for Disease Control (CDC) recommended childhood, adolescent, and adult immunizations to prevent illness and death from vaccine preventable diseases.
- Manage NSIP subgrant deliverables for Vaccine for Children (VFC), Perinatal Hepatitis B, and Special Projects in Clark County.
- Collaborate with community partners to promote vaccine education and provide health resources.

### **Program Objectives**

#### Immunization Outreach Clinics:

- Partner with community agencies to administer immunizations in “pockets of needs” areas.
- Provide VFC and federally supplied adult (317) vaccines to uninsured and underinsured children and adults in outreach clinics.

#### Vaccine for Children Program:

- Ensures that federally supplied vaccines are stored, managed, and administered appropriately.
- Provides vaccines at no cost to eligible children zero through eighteen years of age.
- Assesses and educates providers on strategies to increase immunization rates among children and adolescents.

#### Childcare Program:

- In partnership with the Environmental Health department, immunization assessments are conducted at select childcare and adolescent facilities to ensure enrolled children 0-6 years of age and 11-13 years of age are up to date on all age-appropriate vaccinations.

### Community Health Nursing

The Community Health Nursing (CHN) Program is part of the Public Health and Preventive Care Division. All sections of the Community Health Nursing Program are committed to advancing the vision, mission, and goals of the Southern Nevada Health District. CHN staff work to promote health and prevent disability, injury, and disease in the Southern Nevada population through screenings, health education, monitoring, anticipatory guidance, and referrals to needed community resources. The CHN sections are Maternal Child Health Nursing (MCH), Thrive by 0-3, Embracing Fatherhood, Nurse Family Partnership (NFP) and Healthy Start (HS). Included in

the MCH section is the Child Protective Services (CPS) Nurse Liaison and the nurse case management of children with elevated blood lead levels.

## **Department Objectives**

- Promote health and prevent disability, injury, and disease in the Southern Nevada population through screenings, health education, monitoring, anticipatory guidance, and referrals to community resources.
- Promote the health of the overall MCH population of Nevada through the implementation of an evidence-based home visiting model and programs using evidence-based tools.
- Maintain partnerships with the Nevada Department of Public and Behavioral Health and community resources to promote departmental and program goals and objectives.
- Reduce infant mortality, reduce health disparities, and improve perinatal outcomes.

## **Program Objectives**

Maternal Child Health Nursing:

- Promote maternal and child health through screening, teaching, counseling, and referrals. Assist with finding a medical home. Work with high-risk families referred to the program by community agencies. Assure that all children identified with lead poisoning receive proper medical, environmental, and case management services.
- Educate all families served regarding childhood safety issues (back to sleep, car seats, etc.). Families have medical homes/able to verbalize when seeking medical assistance.
- Provide nursing case management/follow-up to 99% of the children up to 6 years of age with reported venous blood lead levels of 8 micrograms per deciliter or greater. (Acceptance of services is voluntary for families.)

CPS Nurse Liaison:

- CPS Liaison will make 100% of requested visits with CPS workers to provide nursing assessments and nursing case management for children ages birth to 4 years old in Clark County.
- CPS Liaison will consult with CPS for children needing CHN and CPS intervention.
- The CPS Liaison will achieve and maintain an average monthly caseload of 20 through which she will provide her services.

Embracing Fatherhood:

- A home visiting program that supports fathers to strengthen their families and improve child health outcomes.
- Community Health Worker provides education, support and community resources to fathers or anyone stepping into a father role.

## Healthy Start

- Healthy Start's overall program goals are to improve health outcomes in women during and after pregnancy and to reduce racial/ethnic differences in rates of infant death and adverse maternal health outcomes. Participants can enroll during pregnancy or if they have a child under the age of 12 months old. Community Health Workers provide home visiting services to provide education, support and linkage to available community resources. In addition, a nurse will complete joint visits with the Community Health Worker at different intervals during their enrollment to complete nursing assessments and offer support.

## Nurse Family Partnership

- A voluntary program where specially trained nurses visit vulnerable women in their homes during their first pregnancy and throughout the first two years of the child's lives to accomplish three goals: Improve pregnancy outcomes, improve child health and development, and improve the families' economic self-sufficiency. The specially trained nurses provide assessments, education support and community resources to families enrolled.

## Thrive by 0-3

- The Thrive by 0-3 sub-program receives referrals directly from Clark County Department of Family Services. The sub-program provides intervention services to prevent and/or mitigate the effects of child abuse and neglect to families with children ages 0-3 years who have been brought to the attention of the Department of Family Services (DFS), but do not meet the requirement of an investigation. The sub-program offers voluntary home visiting services to families referred using the same parenting/educational curriculum and providing the same screenings as Embracing Healthy Baby. The program serves all of Clark County, NV.

## Sexual Health and Outreach Prevention Program

The Health District's Sexual Health and Prevention Program (SHOPP) is part of the Public Health and Preventive Care Division. SHOPP is committed to advancing the vision, mission, and goals of SNHD through providing high quality, accessible services focusing on screening for sexually transmitted infections (STI), prevention, counseling, and linkage to care in a confidential, non-judgmental setting. The whole-person focus includes an assessment of Social Determinants of Health (SDOH) to identify and help remove barriers to care for our most vulnerable community members.

## **Department Objectives**

- Reduce sexually transmitted infections and their complications.
- Increase access to quality care for high-risk population groups, particularly the underserved community, through innovative and non-traditional partnerships with the community.

- Expand Express Testing clinic by the end of FY 2025-26.
- Expand Outreach events targeting unhoused and other vulnerable persons to 6 or more each month and provide whole person care.

## Program Objectives

- Collaborate with internal and external partners to enhance client access to high-quality and whole person-centered sexual health services in all program areas.
- Express HIV/STI Testing
  - Expand Express Testing clinic to two new sites by the end of FY 2025-26.
  - Reduce the number of new HIV infections through counseling, testing, linkage, and preventive services through the ending of the HIV Epidemic Rapid PREVENT program.
  - Reframe how traditional HIV services are delivered with the aim of retaining people in care, regardless of HIV status.
  - Create “one door” for both HIV prevention and treatment services. This starts with STI/HIV testing.
  - Address institutionalized HIV stigma by integrating HIV prevention and care rather than supporting separate systems.
  - Enable people to know their status by making HIV testing, linkage to medical care, and testing for other medical conditions such as sexually transmitted infections (STIs) and Hepatitis C virus (HCV) more accessible and routine.
- Congenital Syphilis Case Management and Nurse Navigation Program (NEW)
  - Expand community partnerships to increase referral for follow-up evaluation and treatment of neurosyphilis and complex STI's through nurse navigators.
  - Educate patients and their exposed partners, hospitals, and providers on testing, treatment, and prevention of STI's.
  - Ensure treatment completion for all pregnant persons diagnosed with syphilis, their partners, and newborn, if appropriate.
- Serving Unhoused persons through Resources and Engagement to care (SURE)
  - Partner with Nevada Homeless Alliance to serve unhoused persons.
  - Adopt process for assessing SDOH to ensure whole person approach to care.
  - Refer patients to available resources, including SNHD's Family Health Center or patient's preferred provider.
- Pathways to Better Health Collaboration with Southern Nevada Pathways Community Hub as a Care Coordination Agency receiving referrals and providing non-medical case management services for high-risk maternal clients.
- Through the support of the Hub, SNHD, and other community partners, the team's two Community Health Workers address health-related social needs of clients with the highest risk of poor health outcomes.

## Rapid PREVENT

- Partner with Clark County Social Services to enhance HIV prevention and health outcomes among racial and ethnic minorities by providing non-medical case management services.

- Utilize a whole-person, status neutral approach for individuals to know their HIV status and to provide linkage to both medical and non-medical resources based on assessment of Social Determinants of Health in a non-stigmatizing manner.

### **Additional 2025/2026 Goals**

- Continue a systemic approach to prevention and care by integrating the concept into all program planning and implementation for all activities.
- Increase the number of people assessed for STI's by 5% compared to the previous fiscal year.
- Pathways to Better Health will continue to enroll and service clients, increasing average monthly caseloads in second year of program to 20-25 clients.

### Tuberculosis Clinic

The Health District's Tuberculosis (TB) Program is dedicated to suppressing the transmission of tuberculosis disease for all Clark County residents and visitors in Clark County. The program is the designated provider for active TB treatment in the county.

#### **Department Objectives**

- Treat active TB disease.
- Treat contacts of active TB to prevent further spread of the disease.
- Screen individuals/immigrants referred by community partners for active TB disease.

#### **Program Objectives**

- Receive all active TB cases in the county and treat them in conjunction with the latest CDC recommendations.
- Conduct extensive fieldwork to ensure continued compliance for all clients.
- Provide education, training and consultation with area hospitals and providers.

### **Additional 2025/2026 Goals**

- Maintain collaboration with Refugee resettlement groups and agencies to maximize the number of clients screened for TB.
- Maintain TB program protocols to ensure alignment with the latest CDC recommendations.
- Maintain collaboration with the State TB Program and Controller to suppress the transmission of tuberculosis.
- Work to maintain a 95% rate for completion of treatment within 12 months for patients with TB disease diagnosis, as case appropriate.
- Work to maintain at least 92% initiation of Latent Tuberculosis Infection (LTBI) treatment and 92% completion of LTBI treatment in contacts diagnosed with LTBI.

## Street and Field Medicine

The Health District's Street and Field Medicine is part of the Public Health and Preventive Care Division.

### **Department Objectives**

- Initiate a field-based medical team to meet the needs of unhoused or unstably housed individuals who have barriers to accessing healthcare.
- Improve health outcomes among unhoused or unstably housed individuals.
- Partner and engage with community partners currently assisting the unhoused community.

### **Program Objectives**

- Deliver medical services and provide linkage to resources to behavioral health and social services to individuals experiencing homelessness or living in unstable housing conditions.
- Increase access to healthcare and reduce preventable ER visits.
- Minimize barriers to care.
- Build trusting relationships with individuals to foster engagement in care.

### **Additional 2025/2026 Goals**

- The team will develop and maintain a service model that actively seeks out and engages unhoused individuals to provide care in their living environments.
- Team will provide medical services, including treatment for acute and chronic conditions, wound care, medication management, harm reduction strategies, and vaccinations.
- Team will collaborate with internal and external partners to link individuals to resources including behavioral health services, substance use treatment, housing, food, and medical insurance.

## **Environmental Health**

The Environmental Health (EH) Division safeguards the environment in Clark County through a combination of education and enforcement of state and Health District regulations. These regulations govern various establishments and facilities, including food service establishments, swimming pools and spas, hotels and motels, mobile home parks, childcare facilities, schools, correctional facilities, tattoo and body piercing, and permanent makeup artistry, subdivisions, recycling plants, underground storage tanks, and hazardous waste management. Each year, the Division permits approximately 42,000 facilities and conducts over 60,000 inspections. It is also responsible for updating Clark County's Solid Waste Management Plan. In addition to regulatory duties, staff specialists are actively involved in disease outbreak investigation and control. They monitor various diseases, including West Nile Virus, plague, rabies, and hantavirus, to ensure public health and safety.

<b>Program Name</b>	<b>Adopted FY 25/26 FTE</b>
ENVIRONMENTAL HEALTH ADMIN	4.0
FOOD OPERATIONS	86.0
GENERAL	13.0
PERMITS	28.0
PLAN REVIEW	29.0
SAFE DRINKING WATER	1.0
SOLID WASTE	29.0
UNDERGROUND STORAGE TANK	7.0
VECTOR CONTROL	8.0
<b>Total FTE</b>	<b>205.0</b>

	<b>General Fund</b>	<b>Special Revenue Fund</b>	<b>Total</b>
<b>Revenues</b>			
<i>Transfer In</i>	29,919,521	1,386,247	31,305,769
		144,652	144,652
<b>Expenditures</b>			
<i>Transfers Out</i>	33,847,829	1,530,899	35,378,728
	144,652	-	144,652
<b>Revenue/Over (Under) Expenditures</b>	<b>(4,072,960)</b>	-	<b>(4,072,960)</b>

## Food Operations

The Food Operations Program provides inspections of all food establishments throughout Clark County, which include traditional restaurants, temporary events, farmer's markets, mobile food establishments, and seasonal permits. In addition to State mandated annual evaluation, environmental health specialists (EHS) staff provide an increased inspection frequency at noncompliant facilities to assure behavioral change and long-term food safety practice. Food Operations also has a training program which coordinates all activities associated with the United States Food and Drug Administration (FDA) voluntary retail standards. These activities include staff training, Foodborne Illness investigation, industry outreach, and special process review.

### **Department Objectives**

- Increase Food Safety in our jurisdiction by reducing the risk factors for Foodborne Illness in permitted facilities.
- Meet inspection frequency criteria.
- Maintain or increase Food Operations EHS staff to meet the growing demands of the regulated community.
- Develop marketing plans for the Food Operation Program that inform consumers, the regulated industry and stakeholders of measures taken to assure food safety in the community.
- Adopt, train, and implement use of SNHD's new Accela inspection software, if this software becomes available during this fiscal year.
- Continually assess and improve the Food Operations Program's communication and partnerships with the food industry, sister agencies, and the general public.

The ultimate goal of the inspection and intervention processes outlined in the department and activity objectives is the proper evaluation of food facilities to ensure safe food is provided to the residents and visitors of Clark County.

### **Additional 2025/2026 Goals**

- Complete the FDA's Voluntary Retail Standard 4 verification audit and update quality assurance policies and documents that will help identify program gaps and further staff development.
- Analyze the risk of emerging food service trends and, with coordination with our sister agencies, resolve the regulatory challenges.
- Implement the consumer price index (CPI) fee adjustment of 2.4% on July 1, 2025, and prepare for a mandated review of EH CPI adjustment in this fiscal year.
- Continue to analyze Food Operation's staffing levels and, when applicable, present a proposal to increase or decrease staffing size to SNHD executive management.
- Maintain community relations and outreach.
- Analyze the current work performance standards and make changes to current metrics, as needed.

- Continue developing protocols for Foodborne Illness investigations with the Outbreak Response office
- Update sidewalk vendor website to include information for the permitting process, such as example carts and menus, cart builders, and applications in English and Spanish.

### General Programs

The Environmental Health (EH) General Programs department includes Epidemiological Support, Legionella case & outbreak investigation, Foodborne Illness Surveillance grant, Vector Surveillance, Elevated Blood Level Investigations (EBL) and Staff Training initiatives such as initial on-boarding and Standardization training.

#### **Department Objectives**

- Provide timely, efficient, and effective investigation of foodborne illness outbreaks and Legionellosis cases and outbreaks.
- Provide timely, efficient, and effective, and community-balanced vector surveillance and control regular activities, complaint response, per policy.
- Provide accurate and timely EBL investigations within guidelines & timelines provided by regulation and policy.
- Provide clear, concise, and usable public information regarding vector-borne disease, Lead issues, and program services.
- Provide timely and efficient customer service to complainants, cases, and the general public.
- Standardize all existing Food Inspection Staff and work to maintain compliance with the FDA Voluntary National Retail Food Regulatory Program Standards.
- Lead regulation development and adoption process for various Environmental Health Programs and provide outreach training for industry partners.
- Implement and adopt Accela inspection software, contingent on the availability of the product.

#### **Program Objectives**

EPI/COMM:

- Complete all grant deliverables for the CDC-SNHD collaborative Foodborne Illness Surveillance Grant and contact the CDC for possible additional collaboration.
- Assist, when necessary, the Office of Epidemiology with conducting environmental investigations of outbreaks of disease.
- Conduct environmental investigations of legionellosis with an exposure at a permitted facility or other public venue in a timely manner.
- Conduct environmental investigations into complaints of foodborne illness referred to Environmental Health within three business days of receipt.

Healthy Homes:

- Conduct a thorough environmental assessment of the home for every child  $\leq 72$  months of age having been found to have a blood lead level  $\geq 8\mu\text{g}/\text{dL}$  per new policy guidelines.

Internship:

- Train new and existing EHS staff.
- Build industry relations.
- Program development for Food Operations following recommendations of the FDA Voluntary National Retail Food Regulatory Program Standards.
- Conduct an internal audit of Food Operation's Violations Standards Document, revise and update to reflect current EH practices.

Vector:

- Identify diseases in vectors and provide public health intervention prior to, and after, reports of human cases and disease.
- Refer any emergent mosquito breeding sources to governmental partners for environmental management and mitigation.

## **Additional 2025/2026 Goals**

Foodborne Illness Surveillance grant:

- Analyze results and adjust the program based on findings.
- Disseminate information gained via published articles, conference presentations, and networking with other agencies.
- Train and fund staff on environmental assessments for a more thorough and scientifically backed method of foodborne illness investigations.

General Epidemiological Support/Legionellosis:

- Strengthen foodborne illness surveillance, investigation, and response protocol within SNHD.

Internship:

- Develop communication with the regulated food industry regarding information of concern such as outbreaks and recall information that involves the community and SNHD updates on administrative changes.
- Update violation canned comments that are available in Food Operation's Inspection Software.
- Complete Standardization of Food Inspection Staff in Accordance with Standard 2 of the FDA Voluntary National Retail Food Regulatory Program Standards.

- Update internal training manuals to reflect the Council of Food Protections and FDA's training guidelines.
- Conduct self-assessment of Voluntary National Retail Food Regulatory Program Standards 1-9.
- Meet obligations outlined in awarded FDA Rental Flexible grants.
- Update educational and outreach material used as a resource for SNHD Food Industry stakeholders.
- Continue to provide Intervention Training to operators demonstrating challenges in meeting compliance requirements as the first step in the Administrative Process.

Vector Surveillance Program:

- Monitor mosquito populations and associated disease prevalence within Clark County.
- Identify, report, and assist jurisdictions with targeted vector control measures utilizing Integrated Pest Management principles.
- Seek additional grant funding resources.
- Develop effective and timely public education messages regarding vector borne disease prevention.
- Conduct environmental investigations related to cases of vector borne diseases reported by the Office of Epidemiology or the Department of Agriculture.
- Maintain communication with state and federal agencies to ensure West Nile Virus (WNV), Western Equine Encephalitis (WEE), St. Louis Encephalitis (SLE), and Dengue surveillance activities are included on nationwide monitoring systems.
- Ensure all applicable arboviral grant funding opportunities, including Epidemiology Laboratory Capacity and Public Health Preparedness grants, are identified, applied for, and utilized according to established objectives.
- Identify sustainable funding sources and create initial regulation drafts for Vector Surveillance programs.
- Provide staff with educational training to remain current on industry developments and to earn Continuing Education Units for Nevada Restricted Use Pesticide and Nevada Environmental Health Specialist certifications.

Elevated Blood Level Investigations (EBL) Program:

- Maintain EBL certification.

Legionella Program:

- Increase surveillance on water management programs for all public accommodation permitted facilities.

Permits

The Environmental Health (EH) Permits department encompasses operational activities for permitted Aquatic Facilities, Body Art Facilities, Childcare Facilities, Public Accommodations, Schools, Institutions and Children's Camps.

## **Department Objectives**

- The EH Permits department is responsible for ensuring regulatory compliance during initial inspections, routine inspections, special event inspections, surveys and complaint investigations as required by regulations and state and federal laws. Additional services provided by staff include educational outreach and collaboration with other agencies. The goal of the inspection and intervention processes outlined in the program objectives is the proper evaluation of facilities to ensure that it is safe for the residents and visitors of Clark County.

## **Program Objectives**

Aquatic Facilities:

- Conduct routine annual inspections for all permitted facilities.
- Conduct inspections at special events.
- Respond to complaints regarding permitted facilities within three business days.
- Investigate accidents, near drowning and drowning incidents within two business days.
- Conduct review of required lifeguard staffing plans.
- Assist with initial permitting inspections for new facilities, change of permit holder, and remodels upon request from plan review inspector.
- Provide training to industry professionals as needed to communicate program news and updates.

Body Art Facilities, Child Care Facilities, Schools, Institutions, and Children's Camps:

- Conduct routine inspections twice per calendar year for schools and school kitchens that participate in the USDA National School Lunch Program.
- Conduct routine inspections for all other body art establishments and childcare facilities once per calendar year.
- Conduct inspections at special events.
- Respond to complaints within three business days.
- Assist with initial permitting inspections for new facilities, change of permit holder, and remodels upon request from plan review inspectors.
- Provide training to industry professionals as needed to communicate program news and updates.

#### Hotel/Motel Facilities & Mobile Home / RV Parks:

- Assist with initial permitting inspections for new facilities, change of permit holder, and remodels upon request from plan review inspectors.
- Conduct routine inspections for all permitted establishments once per calendar year.
- Respond to complaints regarding permitted facilities within three business days.
- Provide training to industry professionals as needed to communicate program news and updates.

#### **Additional 2025/2026 Goals**

##### Special Programs (Body Art Facilities, Childcare Facilities, Schools, Institutions and Children's Camps):

- Obtain Certified Playground Inspector certification for all staff members.
- Utilize Administrative Process to address operators with ongoing compliance issues.
- Conduct business impact surveys and public workshops to move revised childcare regulations through the approval process.
- Conduct at least one outreach event for body art professionals.

##### Aquatic Health Program Operations:

- Evaluate Risk Factor Survey effectiveness at improving routine inspection outcomes.
- Provide at least two industry outreach meetings to educate on regulatory requirements.
- Develop and implement a standardized risk-based inspection process to improve compliance.

##### Public Accommodations / Mobile Home / RV Parks:

- All public accommodations facilities will have at minimum one annual sanitation inspection each calendar year.
- Improve relationships with Business License, Gaming Control and State Public Health Authorities.
- Facilities demonstrating ongoing non-compliance with SNHD regulations will be brought into compliance through compliance schedules, supervisor conferences and management conferences.
- Determine the most frequent violations observed during regulatory inspections; develop Standard Operating Procedures for field staff and provide informational materials for operators that deliver guidance on preventing these frequently violated items.
- Present and get Board of Health approval for the updated Public Accommodation Regulations.

#### Plan Review

The EH Plan Review (PR) Department is responsible for ensuring regulatory requirements for permitting are met through application intake, review of plans & specifications, Food Safety Assessment Meetings, pre-permitting site inspections, and final permitting inspections for Aquatic Facilities, Body Art Facilities, Childcare Facilities, Food Establishments, Cosmetic and Drug Manufactures, Public Accommodations, Schools, Institutions and Children's Camps.

## **Department Objectives**

The EH Plan Review Department applies the most current regulations, state, and federal laws to analyze and ensure permitted facility plans adhere to sanitary design and construction principles. Once construction is complete, staff ensure built environments are consistent with approved plans and that facility operators are knowledgeable about sanitation and safety regulations. The EH Plan Review Department conducts plan review activities for aquatic facilities, body art establishments, childcare facilities, food establishments, cosmetic and drug manufactures, public accommodations, schools, institutions and children's camps.

- Provide efficient and courteous customer service to permit applicants, permit holders, and the general public.
- Provide timely and accurate review of plans for new construction or remodels to ensure compliance with the Regulations.
- Perform required construction and final permitting inspections to ensure regulatory compliance for all projects.
- Provide training to industry professionals as needed to ensure that any program news and updates are effectively communicated to the regulated community.

## **Additional 2025/2026 Goals**

### **Plan Review (Food):**

- Identify top three reasons for application rejection and failed final permitting inspections and develop relevant interventions to improve applicant success.
- Participate in at least two Food Safety Partnership meetings to address new technologies, barriers to compliance, and needed regulation updates.
- Implement Quality Assurance Program specific to the Plan Review group

### **Aquatic Health Plan Review:**

- Identify top three reasons for application rejection and failed final permitting inspections and develop relevant interventions to improve applicant success
- Reduce review times
- Complete draft revisions for Aquatic Facility Regulations

## **Safe Drinking Water**

Established by an interlocal contract with the Nevada Division of Environmental Protection (NDEP), the Environmental Health (EH) Safe Drinking Water Program (SDWP) is focused upon overseeing regulatory compliance of NDEP permitted public water systems (PWS) in Clark County, apart from systems which withdraw water from the Colorado River (e.g., permits regulated by the Long-Term Treatment Stage II Rule). EH SDWP's regulatory role involves on-going review of water quality analytes submitted by permits; routine sanitary surveys; and complaints regarding water infrastructure issues.

## **Department Objectives**

- Provide timely, efficient, and accurate review of various laboratory results from the various PWS assigned to SNHD.
- Provide accurate, efficient routine inspections per regulatory requirements within timelines provided by regulation and policy.
- Provide excellent, timely and efficient customer service to PWS, NDEP, and the general public.
- Conduct routine triennial sanitary surveys of every assigned PWS.
- Review and enter, as necessary, all water quality data for assigned PWS that were submitted by NDEP certified laboratories.
- Issue violations and take other enforcement actions as determined by NDEP.
- Work closely with NDEP in ensuring that the US Safe Drinking Water Act is adequate.

## **Additional 2025/2026 Goals**

- Negotiate increased funding for the next budget cycle.
- Set up policy and procedures for Found Water Systems.
- Establish training objectives with NDEP for engineering review of small PWS.

## **Solid Waste & Compliance**

Solid Waste and Compliance is committed to advancing environmental and public health goals by collaborating with community partners to conduct culturally sensitive community engagement, education and enforcement to ensure a healthy and sustainable environment.

## **Department Objectives**

- Solid Waste and Compliance is committed to protecting and promoting the well-being of the residents and visitors of Southern Nevada and their environment by regulating the management and disposal of solid waste and restricted waste and the regulation of facilities that accept solid waste.

## **Program Objectives**

Restricted Waste Management:

- To investigate improper management, use and disposal of hazardous waste which adversely affect the navigable waters and soils of Southern Nevada and provide educational resources to the regulated public in the application of best management practices and methods for the reduction of restricted waste through waste minimization strategies.

Illegal Dumping:

- To investigate and take appropriate action on the improper disposal of solid waste which may adversely affect public health and the environment in Clark County and to provide avenues available to the regulated public for education in the proper storage, handling, and disposal of solid waste.

Plan Review:

- Communicate, meet, guide, and inform potential and current permit holders regarding issuance of permits and permit modifications to solid waste management facilities and disposal sites that ensures that the facility complies with the latest revision of the solid waste management authority regulations governing the facility type and all other applicable federal, state and local laws, statutes and regulations.

Solid Waste Mgmt./ Permitted Disposal Facility:

- To improve PDF compliance when managing solid waste by investigating improper management, use and disposal of solid waste which adversely affects the soil, surface waters and the environment and to provide educational resources to the regulated public in the application of best management practices for managing solid waste.

Liquid Waste:

- To regulate the permitting and field inspection for new individual sewage disposal system (ISDS) permits, Tenant Improvements (Tenant Improvements are not inspected - the plan review is based on a file search and aerial to determine compliance issues and capacity of the existing septic system with any proposed fixture units), septic system review of residential pools.
- Respond to complaints within three business days.
- To regulate the sanitation of used mattress sanitizers and refurbishes by registration via an application and site approval inspection process.
- The ISDS program reviews parcel maps and use permits based on existing ISDS permits.

ISDS:

- To regulate the permitting and field inspection for new ISDS permits, tenant improvements (Tenant Improvements are not inspected - the plan review is based on a file search and aerial to determine compliance issues and capacity of the existing septic system with any proposed fixture units), septic system review of residential pools.
- Respond to complaints within three business days.

- To regulate the sanitation of used mattress sanitizers and refurbishment by registration via an application and site approval inspection process.
- The ISDS program reviews parcel maps and use permits based on existing ISDS permits.

#### Subdivision Review:

- Reviewing the civil improvement plans in accordance with SNHD online guidelines and UDACS (Uniform Design and Construction Standards for Water Distribution Systems), DCSWCS (Design and Construction Standards for Wastewater Collection Systems for Southern Nevada) or other applicable design criteria utilized by water and sewer agencies within Clark County Nevada.

The Solid Waste and Compliance works to promote a safe and healthy environment for all residents and visitors to Southern Nevada” Environmental Health Strives to regulate thoroughly while providing training, technical expertise and routine mandated inspections and evaluations.

#### **Additional 2025/2026 Goals**

- Conduct quarterly working group meetings.
- Maintain and strengthen relations with other community stakeholders through collaborations (i.e., CMART (County Multi-Agency Response Team) and SNETF (Southern Nevada Environmental Task Force) which continually educates them on the proper regulatory handling and disposal of solid waste.
- Issue tenant improvement vouchers based on compliance with the SNHD ISDS Regulations.
- Update the current ISDS and Liquid Waste Management regulations.
- Develop interlocal agreements with Southern Nevada Water Authority (SNWA), Water of Reclamation and the Las Vegas Valley Water District (LVVWD) on reducing septic systems and improving Clark County’s water recycle credits.
- Continue to improve commercial parcel map review processes and pursue enforcement through regulatory and jurisdictional communication.

#### Underground Storage Tanks

The Underground Storage Tanks (UST) program performs routine inspections of UST facilities, notes any compliance violations at the time of the inspection, formally notifies the facility of all violations noted at the time of the inspection in writing, follow up with the facility to determine if violations have been corrected.

The UST program oversees installations, repairs and removals and verifies compliance with regulatory requirements per 40 CFR 280.

## **Department Objectives**

- To improve the compliance rate of UST facilities where inspection documentation shows compliance violations.
- Identify UST facilities that remain non-compliant and refer the facilities to Nevada Division of Environmental Protection (NDEP) for potential enforcement actions.
- Promote compliance with UST regulations through communication and education of the regulated public.
- The UST will protect human health and the environment by preventing future petroleum UST releases through the annual monitoring of existing petroleum UST and the over-site of the removal and installation of old and new.

## **Additional 2025/2026 Goals**

- Train new employees quickly and efficiently to be able to maintain inspection schedule.
- Maintain regulatory enforcement through inspections, plan reviews and outreach training.
- Identify UST facilities that remain non-compliant and gain enforcement action authority from NDEP.
- Assist NDEP with identifying facilities with leaking underground storage tanks and provide organized and relevant information on facilities appearing in front of the Nevada Petroleum Fund Board.

## **FQHC**

The Federally Qualified Health Centers Division also known as Southern Nevada Community Health Center (SNCHC) provides the following services: Family Planning, Pharmacy, Primary Care, Ryan White Program, Refugee Health, Behavioral Health, and Sexual Health.

<b>Program Name</b>	<b>Adopted FY 25/26 FTE</b>
FQHC Administration	12.0
FAMILY PLANNING	18.5
PHARMACY	4.0
PRIMARY CARE CLINIC	37.0
RYAN WHITE	32.0
BEHAVIORAL HEALTH	3.0
SEXUAL HEALTH CLINIC	20.0
<b>Total FTE</b>	<b>126.5</b>

	<b>General Fund</b>	<b>Special Revenue Fund</b>	<b>Total</b>
<b>Revenues</b>	39,064,751	7,635,031	46,699,783
<i>Transfer In</i>		796,699	796,699
<b>Expenditures</b>	52,104,483	8,431,730	60,536,214
<i>Transfers Out</i>	796,699	-	796,699
<b>Revenue/Over (Under) Expenditures</b>	<b>(13,836,431)</b>	-	<b>(13,836,431)</b>

## Family Planning

The Family Planning Clinic at the SNCHC provides comprehensive sexual health, family planning, and preventative health services to residents of Southern Nevada.

### **Department Objectives**

- The SNCHC Family Planning Program will maintain compliance with all Title X statutory language; local state and federal laws and legislative mandates and align policies, procedures, and practices to provide high quality sexual health and family planning services and activities to increase engagement and active participation of families, parents and legal guardians in health care decision making.

- Advance access to care through the delivery of Title X services, including providing safe, client-centered, and inclusive Title X services, as well as improving access to “medical home” care through linking clients to primary care services, full pediatric and adult ambulatory care for the management of acute and chronic conditions, including behavioral health and dental care services.
- Establish and maintain a robust Quality Improvement and Quality Assurance (QI/QA) plan and activities with established feedback loops to inform and improve practices and procedures.
- Provide preventative testing and treatment services for medically underserved patients.
- Provide pre-exposure and post-exposure prophylaxis medications and medication management to prevent HIV transmission.

### **Program Objectives**

- Family Planning clinics will see at least 4,500 patients, including at least 500 adolescents (<20 years old) and will encourage patients to include their families in their decision-making regarding family planning services.
- At least 75% of Family Planning patients will receive screening related to social determinants of health during initial visit and annually.
- Identify at least two performance measures for quality improvement, using a “Plan, Do, Study, Act” improvement model, measuring impact of the applied improvement strategies.

### **Additional 2025/2026 Goals**

- Leverage health technology tools to improve the delivery of health care services and close care gaps.
- Expand access to care and health information to individuals with transportation, literacy, and language barriers, increasing mobile unit services and educational programming/access.
- Expand access to primary care and preventive health services, particularly for patients dealing with chronic disease conditions, such as diabetes and hypertension.
- Provide training regarding applicable policies, procedures, and laws regarding mandated reporting of child abuse and neglect, elder abuse and neglect, and intimate partner violence.
- Provide training regarding applicable policies, procedures, and restrictions on approved methods of family planning.

## Pharmacy

The Pharmacy department provides access to medications and medication management to patients receiving care at the SNCHC and other SNHD programs to improve therapeutic outcomes.

### **Department Objectives**

- Grow patient/prescription volume by 5% above FY2025.
- Provide financial/insurance assistance to > 180 patients.

### **Program Objectives**

- HIV Treatment: Provide pharmacy services to increase clients that receive same-day ART (Antiretroviral therapy) on initiation of treatment to >90%.
- HIV Prevention: Provide pre-exposure and post-exposure prophylaxis medications and medication management to prevent HIV transmission.
- Community Health Center: Provide medication and medication management services to primary care patients to treat acute care needs and prevent complications of chronic diseases.

### **Additional 2025/2026 Goals**

- Modernize legacy pharmacy technology systems to meet future SNCHC needs and service levels.
- Expand pharmacist provider services to include HIV PrEP, PEP, and hepatitis management.
- Support 340B audit tasks to ensure appropriate compliance. Expand provider contracts with payers, including Medicaid, Medicaid MCOs, Express Scripts, and Cigna. Utilize newly formed workgroup to improve financial sustainability and mitigate current events that may impact discounted pharmaceutical prices and improve overall quality.

## Primary Health Care

The primary care clinic at SNCHC is a low-cost medical clinic for adults and children residing in Southern Nevada. Primary care services are necessary to achieve optimal health and wellness as well as for acute illness treatment and the management of chronic diseases.

### **Department Objectives**

- Provide high-quality, low-cost primary care services for underserved residents of Southern Nevada.
- Assess patients' general health to determine the need for ongoing healthcare management.
- Ensure that all clients receive appropriate screenings, examinations, and other services in an integrated patient-centered manner.

## **Program Objectives**

- Delivery of comprehensive primary care services for adults and children, including preventive health services and the evaluation, management, and treatment of acute and chronic disease conditions.
- Provide access to a broad range of effective interventions related to preventive primary healthcare management.
- Provide medical management for individuals with chronic healthcare conditions with the aim of improving their overall health and quality of life.
- Identify individuals, families, and communities in need that are not currently receiving primary care services and expand access to these services via community outreach events and collaborative partnerships.
- Increase the number of individuals with medical insurance who will have better access to medical and behavioral health services.

## **Additional 2025/2026 Goals**

- Leverage health information technology tools to improve the delivery of health care services and close patient care gaps.
- Improve clinic throughput to increase the number of patients served.
- Increase the use of telehealth services to reach our clients who cannot come to the brick-and-mortar facility.

### Ryan White

The Ryan White (RW) program at the SNCHC is dedicated to suppressing the transmission of HIV and other communicable diseases, such as hepatitis B and C, in our community. Services offered through Ryan White, Parts A & B, include providing clinical exams, initiation of treatment, stabilization, and long-term management for program eligible individuals. Eligibility workers, community health workers and nurse case managers make needed referrals to assist with addressing the social determinants of health (SDOH) that may be impacting the patient's ability to remain in care.

Additionally, Ryan White Program offers services to anyone living with HIV who are either newly diagnosed, out-of-care, out-of-jurisdiction or newly discharged from detention facilities in Clark County. Patients may continue their RW care through SNCHC's RW program or can be referred to another resource for care if the patient desires.

Enrolling new patients into care or returning former patients after a lapse in treatment will reduce the burden of disease across Southern Nevada. The RW services at SNCHC are a critical resource for HIV + individuals in Southern Nevada, particularly those in medically underserved communities.

## **Department Objectives**

- Increase access to care and improve HIV-related health outcomes for people living with HIV/AIDS (PWH).
- Reduce community transmission of HIV by achieving and maintaining viral load suppression through adherence to Antiretroviral Therapy (ART).
- Provide wrap around services for PWH and work collaboratively with internal and external partners.

## **Program Objectives**

- Medical Nutrition Therapy - Improve HIV-related health outcomes of people with HIV by providing nutritional support. Provide low-cost treatment options for those in need; no client is turned away solely for inability to pay.
- Mental Health Services - Reduce HIV-related health disparities and health inequities by providing mental health services to PWH.
- Medical Case Management - Provides Intensive case management to medically fragile individuals living with HIV/AIDS with the goal of improving health outcomes.
- Outpatient Ambulatory Health Services - Provides core medical services directly to RW patients in an outpatient medical setting.
- Non-medical Case Management Services - Increase access to care and reduce HIV-related disparities and health inequities among people living with HIV. Provide client-centered education to mitigate further transmission of the disease.

## **Additional 2025/2026 Goals**

- Increase collaboration with billing services and improve the revenue cycle.
- Leverage health information technology tools to improve the delivery of health care services and close care gaps.
- Improve clinic throughput to increase access to services.
- Increase integration of Ryan White patients with behavioral health services.
- Reduce HIV-related health gaps.
- Achieve integrated, coordinated efforts that address the HIV epidemic among community partners.

## Behavioral Health

The integrated Behavioral Health (BH) Center at the SNCHC is dedicated to identifying and addressing mental and behavioral health conditions that may impact one's overall wellness. The health center utilizes standardized screening tools to identify depression, anxiety, suicide risk,

drug and alcohol use/abuse, exposure to violence in the home to help identify issues that may impact a patients' well-being.

The Behavioral Health program is comprised of a psychiatric Advanced Practice Registered Nurse (APRN) who provides medication treatment and management, licensed clinical social workers (LCSWs) and license marriage and family therapist (LMFTs) who offers solution focused counseling services. The Behavioral Health Center conducts mental health screenings and exams, initiation of a treatment plan which may include medication and/or counseling, stabilization, and long-term medication management. Therapists identify and treat the client's personal and interpersonal problems, including depression, drug and alcohol abuse, anxiety, and other concerns. Psychotherapeutic techniques are utilized to counsel and offer options for mentally gaining control of one's life and choices. Behavioral health providers collaborate with SNCHC medical providers to respond to patient needs and provide a holistic and comprehensive care plan that addresses mental and behavioral health needs as well as physical health needs.

### **Department Objectives**

- Provide low-cost, high quality behavioral health services for clients with mental health problems, including substance use disorders, psychiatric disorders, and psycho-social impediments to health.
- Assess the mental health and well-being of patients upon initial intake and annually.
- Ensure that all clients receive appropriate mental health screenings and treatment services in an integrated patient-centered manner.

### **Program Objectives**

- Offering low-cost, high-quality behavioral health service options for those in need; no client is turned away solely for inability to pay.
- Provide client-centered, and when necessary or desired, family-centered education, to improve the mental and behavioral well-being of the clients.
- Identifying individuals, families, and communities in need of, but not currently receiving, behavioral health services.
- Increase the use of telehealth services to maximize access to patients in need of care.

### **Additional 2025/2026 Goals**

- Leverage health care technology tools to improve the delivery of health care services.
- Increase collaboration with the billing department and improve the revenue cycle.
- Enhance integration with the medical providers and improve clinic throughput to increase access to services.
- Introduce and expand Behavioral Health services through group sessions and activities available at newly opened Behavioral Health Center.

## Sexual Health Clinic

The Sexual Health Clinic at the SNCHC provides urgent sexual health testing and treatment services to residents of Southern Nevada.

### **Department Objectives**

- Urgent high quality Sexually Transmitted Infection (STI) testing and treatment services provided to symptomatic members of the community with a focus on service provision to the medically underserved, regardless of ability to pay.
- Confidentiality of service provision.
- On-site STI lab testing/diagnostics, as well as immediate on-site medication prescription and distribution treatments.
- Public Health STI intervention and prevention through education, clinical treatment, disease surveillance, and SDOH care coordination services.
- Participate in Quality Improvement and Quality Assurance (QI/QA) plan and activities with established feedback loops to inform and improve practices and procedures.
- Provide pre-exposure and post-exposure prophylaxis medications and medication management to prevent HIV transmission.

### **Program Objectives**

- The Sexual Health Clinic is an open-access clinic that operates similarly to an urgent care clinic.
- Early intervention for STIs.
- Mitigation of STI transmissions.
- Integrate Primary Care, Behavioral Health, and/or Family Planning services for comprehensive ongoing chronic care.

### **Additional 2025/2026 Goals**

- Expand access to care and health information to individuals with transportation, literacy, education, and language barriers.
- Enhance integration of primary care, behavioral health, and other SNCHC health and SDOH services.
- Provide training regarding applicable policies, procedures, and laws regarding mandated reporting of child abuse and neglect, elder abuse and neglect, and intimate partner violence.
- Provide training regarding applicable policies, procedures, and restrictions on provision of STI services.

## Refugee Health Clinic

The refugee health clinic at the SNCHC provides primary care services for refugee adults and children that have been placed in Southern Nevada. Primary care services are necessary to identify, diagnose, and treat chronic and acute medical needs of refugees being placed for optimal health and wellness.

### **Department Objectives**

- Provide high-quality, low-cost primary care services for refugees placed in Southern Nevada.
- Assess patients' general health to determine the need for ongoing healthcare management.
- Ensure that all clients receive appropriate screenings, examinations, and other services in an integrated patient-centered manner.

### **Program Objectives**

- Delivery of comprehensive primary care services for adults and children, including preventive health services and the evaluation, management, and treatment of acute and chronic disease conditions.
- Provide access to a broad range of effective interventions related to preventive primary healthcare management.
- Provide medical management for individuals with chronic healthcare conditions with the aim of improving their overall health and quality of life.
- Integrate access to other SNCHC medical, behavioral health, and SDOH services.

### **Additional 2025/2026 Goals**

- Leverage health information technology tools to improve the delivery of health care services and close patient care gaps.
- Improve clinic throughput to increase clinic operational efficiency.

### **Disease Surveillance & Control**

The objective of the Disease Surveillance & Control Division is to collaborate in partnership with the community to promote health and quality of life for residents and visitors and to protect the public from the spread of acute and chronic communicable diseases and other reportable conditions. To accomplish these objectives the Division conducts routine disease surveillance, monitors health status, uses statistics to come to inferences about disease causation, manages system information, delivers indirect and direct services, provides training, educational materials, program planning and technical assistance. Further, the Division provides both stationary and mobile screening and prevention services that engage substance users and responds to public health emergencies. Offices and programs in the Division include but may not be limited to the Office of Disease Surveillance, the Acute Communicable Disease Control program, and the Office of Informatics and Epidemiology.

Program Name	Adopted FY 25/26 FTE
DISEASE SURVEILLANCE & CONTROL ADMINISTRATION	2.0
ACUTE COMMUNICABLE DISEASE CONTROL	33.0
DISEASE SURVEILLANCE	62.0
EPIDEMIOLOGY	21.0
INFORMATICS	14.0
<b>Total FTE</b>	<b>132.0</b>

	General Fund	Special Revenue Fund	Total
<b>Revenues</b>			
<i>Transfer In</i>	30,000	21,010,823	21,040,823
		2,880,925	2,880,925
<b>Expenditures</b>			
<i>Transfers Out</i>	8,281,706	23,891,748	32,173,454
	2,880,925	-	2,880,925
<b>Revenue/Over (Under) Expenditures</b>	<b>(11,132,632)</b>	<b>-</b>	<b>(11,132,632)</b>

### **Office of Disease Surveillance**

The Office of Disease Surveillance (ODS) incorporates the guiding principles of surveillance, prevention, and education. The office serves to ensure the collection and dissemination of high-quality and comprehensive health data within Clark County and Southern Nevada. Analysis of health data facilitates its use for public health assessment, policy development, program planning and evaluation. ODS has experience working on community planning groups, engaging high risk

populations, and ensuring we are meeting our community where they are at. ODS incorporates mobile testing efforts to offer testing and referral services in non-traditional settings and during non-traditional times to meet the needs of the community. Staff strive to improve and streamline processes and services and implement new prevention and treatment strategies that help to identify and address behaviors that contribute to disease transmission. ODS health educators focus on prevention strategies related to areas addressed by the department, including prevention of congenital syphilis, STIs, HIV, substance use, harm reduction, injury, and suicide. This engagement also extends to community and stakeholder collaboration in community health assessments and improvement plans. Lastly, ODS has experience working in correctional facilities and has established office space for staff who offer testing, care navigation, and linkage to services.

## **Department Objectives**

- Detect and communicate early warning signs for communicable disease providing intervention and linkage to treatment (as appropriate)
- Develop and enhance strategies and policies that aid in the prevention, control and suppression of communicable diseases and other reportable conditions.
- Strengthen data driven activities.
- Strengthen client and community disease awareness.
- Monitor community health status through conducting community health assessments and implementing health improvement plans.
- Enhance access to care services.
- Engage stakeholders and community members to address priority prevention areas for the department including syphilis, HIV, STIs, drug overdose, suicide, and behavioral health.

## **Program Objectives**

### **Adult Hepatitis:**

- Upscale HCV testing.
- Patient and Provider Education- identification of HEP, vaccination, linkage to care.

### **HIV Surveillance:**

- Active HIV Surveillance- meeting all required timelines in grant objectives and within national standards.
- Case Completeness/Timeliness- >90% of expected cases are reported w/in 6 months of diagnosis.
- Death Ascertainment- >85% of deaths occurring in 2016 have an underlying cause by 12/31.
- Ensure laboratory /provider reporting- >50% of cases with a previous negative test have a valid date of documented negative test result.
- Collaborate with HIV Prevention- participate in data to care activities, provide data to inform prevention/intervention activities.

- Conduct perinatal HIV Surveillance- >85% of HIV exposed infants for a birth year have HIV infections status determined by 18 months.
- Plan and respond to HIV transmission clusters and outbreaks- identify, investigate, and respond to HIV transmission clusters and outbreaks.

#### HIV Prevention:

- Testing- Conduct 18,000 HIV tests targeted to high-risk individuals defined by NV Integrated HIV Prevention and Care plan.
- HIV Partner Services- utilize STD and HIV Prevention data to identify cases, contacts, and clusters.
- Rapid response to and intervene in HIV transmission clusters and outbreaks- develop and maintain outbreak and detection plan for rural counties.
- Provide Linkage, re-engagement, and retention in HIV medical care- perform data to care activities to ID HIV positive individuals.
- Promote early ART initiation and support adherence- educate primary care MDs on importance of early ART initiation.
- Conduct risk reduction interventions for People Living with HIV (PLWH)- ensure client centered counseling, provide education and risk reduction strategies to all positives.
- Prevention services for HIV-negative persons at risk- increased awareness of and expand pre-exposure prophylaxis (PrEP) and medication adherence to PrEP.
- Conduct perinatal HIV Prevention and Surveillance- re-educate providers on NRS re: pregnant and postpartum women/persons and HIV testing and follow up.
- Conduct community level HIV prevention activities- continue efforts with expanding syringe services program.
- Conduct community level HIV prevention activities including condom distribution
- HIV Prevention and care planning- maintain HIV Prevention Group (HPG) meeting at least quarterly and annual plan development.
- Conduct data driven planning monitoring/evaluation- participate in statewide group to monitor and evaluate Integrated HIV Prevention and Care Plan.
- Conduct data driven planning monitoring/evaluation- use epidemiologic data to assist with monitoring HIV trends, ID priority populations and resource allocation.

#### Ending the HIV Epidemic:

- Enhance testing availability, universal screening, rapid testing (POC) discreet and low-cost testing in various access points that include Express Testing and online ordering through Collect2Protect, and through increased access to self-test kits from non-traditional venues.
- Increase treating people newly diagnosed with HIV rapidly and effectively so that they reach sustained viral suppression.
- Increase awareness for PrEP/PEP services within the community and local syringe services program (SSP).
- Enhance messaging to community regarding HIV, Hep C, STI testing, PrEP/PEP, Rapid Start and Linkage to Care via the “ReThinkHIV NV” campaign.

- Conduct outreach and education to high-risk populations through non-clinical settings via Mobile Testing.
- Increase Data to Care activities by enhancing retention in care support services for providers.

#### STD Prevention and Control:

- Identify and report people with STDs- ensure complete reporting on all required reportable conditions.
- Conduct partner services and any additional testing as needed for reported cases of Syphilis.
- Develop and maintain an outbreak response plan.
- Monitor implementation of expedited partner therapy (EPT) evaluation within SNHD and expand recommendations to high morbidity clinic in Clark County.
- Outreach and education to community providers on congenital syphilis, changes to guidelines on testing and treatment for pregnant women/persons and babies.
- Ensure Assessment, Assurance, Policy, and Prevention Strategies (AAPPS) Objectives are met.

#### TB Surveillance:

- Provide TB disease investigation for all active TB cases, suspected cases and high-risk contacts including LTBI cases in children under 2 years of age.
- Monitor epidemiological trends.
- Monitor electronic disease notification (EDN) system.
- Ensure national TB indicator project (NTIP) Objectives are met.

#### Substance use and overdose prevention:

- Conduct overdose surveillance and prevention activities throughout Clark County.
- Engage in linkage and retention to care activities using linkage navigators across multiple high impact communities.
- Use harm reduction activities including distribution of naloxone and fentanyl test strips, and xylazine test strips to community members for overdose prevention.
- Conduct provider education on CDC Opioid Prescribing Guidelines and medications for opioid use disorder (MOUD).
- Reduce stigma associated with substance use for the public, medical providers, and first responders through training and education, media campaigns, policy interventions, etc.
- Utilize a coalition model to synergize community efforts across the pillars of prevention, rescue, treatment, and recovery.
- Develop the Clark County post overdose response team to connect individuals who recently experienced an overdose to prevention services.
- Initiate State opioid response (SOR) activities to include enhancement of linkage activities for clients who are justice involved, naloxone distribution at libraries via kiosks, canvassing project for harm reduction activities, and youth education on substance use prevention.

Sudden and Unexpected Infant Death prevention:

- Develop community-led efforts to address sudden and unexpected infant death (SUID), particularly safe sleep practices, in collaboration with community stakeholders and those affected by SUID.
- Collaborate with Office of Epidemiology (OOE) team to assess the data, identify local risk and protective factors to best tailor community solutions.
- Partner with a community-based organization that can support a culturally salient approach to engaging with impacted communities; understand barriers to full implementation of American Academy of Pediatrics (AAP) safe sleep recommendations.

**Additional 2025/2026 Goals**

- Enhance capacity to identify outbreaks, investigate disease trends, and to report on grant deliverables.
- Implement and sustain violence prevention training for SNHD staff and community providers.
- Implement or ensure the availability of Medication-Assisted Treatment (MAT).
- Identify and incorporate interventions that promote education, strengthen social services connections, and linkage to mental health services countywide.
- Expand community providers' ability to provide rapid HIV, Syphilis and Hepatitis testing serving high risk communities.
- Increase community capacity to assist with cluster and outbreak response through tabletop exercises.
- Expand social media reach to promote testing and STI/HIV awareness through routine messaging and sharing SNHD and/or CDC developed/approved campaigns.
- Increase community providing education on the importance of TB screening, evaluation, and treatment for LTBI.
- Enhance HIV testing and counseling training through a cultural translation of the presentation and materials in Spanish to increase reach across Clark County.
- Develop strategies to address syndemics work across HIV, STI, and overdose prevention activities to better serve clients and reach community goals.

Acute Communicable Disease Control Program

The Acute Communicable Disease Control (ACDC) program incorporates the guiding principles of outbreak response, surveillance, disease investigation, prevention, and education. The program aims to implement responses and strategies to reduce disease incidence, prevalence, and control communicable disease transmission in Clark County. The program ensures the collection, analysis, and dissemination of high-quality and comprehensive health data within Clark County and Southern Nevada. Analysis of health data facilitates its use for public health assessment, policy development, program planning and evaluation. The ACDC program was established in late 2021 and included the COVID-19 response and relief effort in addition to communicable disease

outbreak and control activities for more than 70 diseases. The program includes two primary staff positions including a skilled workforce of Disease Data Collection Specialists focusing their efforts on receiving, processing reports and obtaining data for mandated reportable conditions, and Disease Investigation and Intervention Specialists conducting active surveillance through investigations, and implementing mitigation efforts to prevent and reduce transmission of diseases. Staff have experience in timely response and implementing CDC recommended guidance to implement control measures and mitigation strategies informed by local, state and national data.

### **Department Objectives**

- Prevent and Control Communicable diseases in Clark County.
- Receive, respond, and report communicable diseases.
- Respond to suspected and/or potential outbreaks and clusters of communicable disease.
- Enhance and implement control measures with both primary and secondary interventions.
- Respond to suspected and/or potential outbreaks and clusters of communicable disease.
  - To detect and communicate early warning signs for communicable disease increases and develop strategies and policies that aid in the control, prevention, and suppression of communicable diseases.
  - Strengthen data driven activities.
  - Strengthen client and community disease awareness.
  - Participate in Bioterrorism and Response and Bio surveillance activities.

### **Program Objectives**

#### Public Health Emergency Preparedness (PHEP) Activities:

- Build and strengthen abilities to effectively respond to public health threats, including infectious diseases, natural and biological threats.
- Information management-develop and maintain systems and procedures that facilitate the communication of timely, accurate, accessible information, alerts, and warnings using a whole community approach, and to exchange health information and situational awareness with federal, state, local, territorial, and tribal levels of governments and partners.
- Provide Healthcare partners with timely and accurate public health information to provide community awareness and assist with their response to increases or trends of disease throughout the budget period.
- Update the Health Alert Network Database by contacting rejected recipients and make updates and perform maintenance on distribution lists.
- Enroll and add new medical providers and new contacts to the Health Alert Network Database from HAN Enrollment Forms and email requests.

- Facilitate laboratory testing to identify, discover, locate, and monitor - through active and passive surveillance - threats, disease agents, incidents, outbreaks, and adverse events, and provide relevant information in a timely manner to stakeholders and the public.
- Maintain existing surveillance activities and systems to monitor trends and/or increases in communicable disease surveillance, and foodborne illnesses complaint surveillance.
- Monitor Disease report Timeliness by determining the proportion of reports of selected reportable disease that are received within the required time frame.
- Monitor Timeliness of public health control measure for six select agents.
- Identify facilities and providers that are not reporting in compliance with Nevada Administrative Code (NAC) 441A and provide education regarding Reportable Diseases and Conditions and facilitate timely and accurate reporting.
- Provide training for Disease Data Collection Specialists related to communicable diseases and select agents that require immediate or timely response.
- Conduct hot washes for large scale outbreaks and complex/unusual occurrences.
- Identify new/current training opportunities for Disease Investigation and Intervention Specialists to improve their investigation/outbreak skills and response.
- Review and make updates to disease investigation protocols that include new reportable diseases per Nevada Statutes and Nationally Reportable Diseases.
- Improve disease surveillance and outbreak response by implementing and enhancing the EpiTrax Outbreak module for outbreak investigation and management.

#### Public Health Crisis Response for Influenza /H5N1 Preparedness and Response:

- Improve the detection and reporting of H5N1 cases by strengthening surveillance in Clark County. Develop and deploy a survey for healthcare providers to identify barriers to participation in sentinel surveillance, testing patients, and challenges they face during respiratory illness season.
- Partner with local healthcare facilities and/or veterinary clinics to collect and analyze specimens from patients with flu-like symptoms.
- Design and distribute multilingual educational materials (flyers, posters, social media graphics) explaining symptoms, transmission risks, and the importance of early testing.
- Provide Healthcare providers with incentives for their facility and for patients to participate in sentinel surveillance testing.

#### Public Health Infrastructure:

- Continue to develop a team of 1 Senior DDCS and 7 DDCS II as an Outbreak Response/Strike Team for responding to clusters, outbreaks, and surges of disease.

- Address gaps in data collection regarding Hepatitis, foodborne illness, and respiratory illnesses to better understand trends in Clark County and identify increases early.
- Continue to improve on the timely receipt and entry of reports, provide education on reporting requirements, obtaining medical records and abstracting critical medical record information for disease surveillance purposes.
- Conduct more field work for community outreach activities and conduct sample collection for testing for a variety of diseases as part of a disease investigation or prevention/intervention activity.
- Deploy surveys, use data collection tools and drive interventions based on expertise and data collection.
- Support wastewater surveillance activities and public health response to wastewater data on COVID-19 and other diseases for which wastewater is being monitored.
- Participate and support ODS with large scale exposure investigations
- Seek Community Health Worker training and/certification for Disease Data Collection Specialists II's to expand their skills.
- Conduct initial training reviews and assessments for new and ongoing enhanced workforce.
- Participate in care coordination and linkage to care for communicable diseases by establishing at least 5 NEW informal or formal relationships with referral agencies and medical care agencies that provide services for communicable disease and related health needs.
- Identify providers that are non-compliant with disease reporting requirements for provider education outreach by DDCS I/II's.
- Develop and implement new quality assurance and quality improvement processes and protocols for data quality and accuracy to complement the new EpiTrax Surveillance System.

### **Additional 2025/2026 Goals**

- Create, develop and train a new Healthcare Acquired Infection (HAI) Team to address reports of HAI causing organisms, respond to outbreak at healthcare facilities and collaborate with EH on environmental control measures.
- Update Existing and implement new guidance and surveillance monitoring processes for communicable disease surveillance and investigation activities in alignment with CDC, Council of State and Territorial Epidemiologists (CSTE) and state guidance.
- Ensure safety practices and training are conducted regularly for field safety, donning and doffing procedures and emergency operations for communicable disease response and field testing.
- Establish or enhance ability to aggressively identify cases of emerging disease or clusters to implement recommended containment measures, conduct investigations, provide post exposure prophylaxis when warranted and ensure adequate treatment as needed.

- Control disease transmission in high-risk settings and protect vulnerable or high-risk populations.
- Sustain existing vending machine project to provide to provide at home test kits to area of high vulnerability and less access to testing and expand the vending project to include material and supplies that contribute to improvements in public health such as wound kits, hygiene kits, and first aid kits
- Continue to EpiTrax Surveillance System outbreak module to reflect the reporting requirements of NORS and improve interoperability and reduce duplication in reporting methods.
- Create additional electronic lab reporting (ELR) workflows and protocol changes for disease that cause Healthcare Acquired Infections and diseases with susceptibilities reported.
- Continue to work with informatics and Epi teams to enhance/update our foodborne illness complaint database to go live in FY26.
- In collaboration with informatics, update our reporting system to receive electronic case reporting (ECR) to improve our overall disease investigation and outbreak response, as well as data collection quality.
- Utilize surveillance data to drive interventions and make updates to existing protocols, practices, and responses.
- Ensure that our surveillance system is able to capture all CDC message mapping guide (MMG) required data variables.

## Community Health

The Community Health Division monitors, promotes, protects, and improves health status and reduces health disparities by using evidence-based practices, assuring readiness and response for public health emergencies, detecting disease, and promoting healthy behaviors to preserve wellness. The following programs comprise this division: Office of Chronic Disease Prevention and Health Promotion, Office of Public Health Preparedness, Emergency Medical Services and Trauma Systems, Southern Nevada Public Health Laboratory, Office of Health Equity, Vital Records Department, and Passport Services.

Program Name	Adopted FY 25/26 FTE
COMMUNITY HEALTH ADMINISTRATION	3.0
CHRONIC DISEASE PREVENTION	19.0
CLINICAL HEALTH LABORATORY	8.0
EMS & TRAUMA	8.0
HEALTH EQUITY	4.0
PUBLIC HEALTH LABORATORY	36.0
PUBLIC HEALTH PREPAREDNESS	13.0
VITAL RECORDS	12.0
<b>Total FTE</b>	<b>103.0</b>

	General Fund	Special Revenue Fund	Total
<b>Revenues</b>			
<i>Transfer In</i>	5,482,727	15,130,387	20,613,114
		1,751,984	1,751,984
<b>Expenditures</b>			
<i>Transfers Out</i>	12,216,965	16,882,371	29,099,336
	1,751,984	-	1,751,984
<b>Revenue/Over (Under) Expenditures</b>	<b>(8,486,222)</b>	-	<b>(8,486,222)</b>

## Office of Chronic Disease Prevention and Health Promotion

The Southern Nevada Health District's Office of Chronic Disease Prevention and Health Promotion (OCDPHP) addresses prevalent and costly chronic diseases like cardiovascular disease, obesity, and diabetes as well as three modifiable risk factors - tobacco use, insufficient physical activity, and poor diet—which are major contributors to these diseases.

The OCDPHP collaborates with various organizations and community members to offer innovative, culturally sensitive, and evidence-based health promotion programs to prevent and

self-manage chronic disease. The OCDPHP team strives to enhance community health by encouraging residents to address health issues, educating and motivating people to adopt healthy lifestyles, and modifying policies, systems, and the physical environment to promote healthy behaviors. Together with community partners, the OCDPHP works to transform the community by promoting physical activity, improving access to nutritious food and drinks, and minimizing exposure to second-hand smoke.

## **Department Goals**

- Reduce tobacco use and exposure to secondhand smoke.
- Increase access to, and opportunities for, physical activity.
- Increase access to healthier foods.
- Improve health outcomes and self-management efficacy for people with chronic diseases.
- Leverage community partnerships, stakeholder collaboration, and resources to achieve health equity.

## **Program Objectives**

### Chronic Disease Prevention Program:

- Increase the number of people meeting physical activity guidelines.
- Increased number of policies or plans incorporating community design strategies that make physical activity safe and accessible for all.
- Increase fruit and vegetable consumption.
- Increase quantity, reach, and scope of fruit and vegetable nutrition incentive programs.
- Increase the number policies and activities that establish and promote food service and nutrition standards guidelines.
- Increase the number of people who are at a healthy weight.
- Increase the number of priority population members screened for hypertension and prediabetes and who receive referrals to clinical and/or community programs, social determinants of health resources, and education.
- Increase the number of people participating in evidence-based chronic disease self-management programs.
- Reduce and eliminate chronic disease-related health disparities.

### Tobacco Control Program:

- Prevent youth and young adult initiation of tobacco products, including e-cigarettes.
- Promote tobacco cessation resources and increase utilization of the State Tobacco Quitline.
- Reduce and eliminate exposure to secondhand smoke by increasing the number of worksites and other locations with expanded smoke-free policy.
- Work toward eliminating tobacco-related disparities among priority populations disproportionately affected by tobacco use.

## **Additional 2025/2026 Goals**

- Maintain and expand partnerships with Community Health Workers, Health Equity Team, and others to increase outreach, communication, and programming among priority populations.

### **The Office of Emergency Medical Services and Trauma System**

The Office of Emergency Medical Services and Trauma System (OEMSTS) is responsible for establishing and enforcing regulations related to the structure and operation of the Emergency Medical Services (EMS) and Trauma System, including planning, developing, monitoring, and improving the system. OEMSTS also oversees all initial and continuing education for EMS providers and is responsible for ensuring providers meet established standards for certification and licensure.

### **Department Objectives**

- Assure competent public health care workforce in Clark County EMS.
- Enforce laws and regulations that protect health and ensure public safety.
- Monitor health status to identify and solve community health problems through the tracking of trauma patterns.

### **Program Objectives**

- We have two programs in OEMSTS, the EMS Program and the Trauma System Program. The EMS program sets minimum standards for permitting the operation of ambulances, fire-fighting agency vehicles, and air ambulances. We certify and license emergency medical personnel, and define the educational requirements used to instruct them, as well as the approval, regulation, and evaluation of the EMS training institutions. We establish treatment protocols for individuals in need of emergency care.
- The Trauma System Program monitors acuity, number, and distribution of trauma patients in Clark County. We assess trauma system need for the presence of more trauma centers to treat the injured. We collect and analyze trauma data and track injury patterns in order to aid in injury prevention efforts. In both the Trauma and EMS programs, OEMSTS establishes and participates in peer review committees to review, monitor, and evaluate system performance.

## **Additional 2025/2026 Goals**

- Development of reporting from incident data through the use of emergency management software (ESO) software.

- Continued training with EMS agencies on the use of ImageTrend software for the submission of education and tracking of provider applications and continuing education hours.
- Develop a unified schematron for all county EMS agencies for data reporting.
- Begin examining EMS response data to develop data-driven protocols for EMS providers.
- Assist in strengthening relationships between local hospital systems and EMS agencies, allowing for the expansion of data linkages between stakeholders to create an environment of data-driven system oversight.
- Continued development of the Southern Nevada Trauma System including system-wide outreach and education, as well as data-driven oversight.

### Passport Services

A U.S passport is a single document that serves as both identification and proof of U.S citizenship. As a passport acceptance facility, we will assist residents and nonresidents planning to travel abroad with the passport application process.

#### **Department Objectives**

- Review, approve and prepare passport application documents.
- Offer passport photo services.
- Mail transmits final applications to the Department of State passport office.
- Generate additional revenue for SNHD by collecting a \$35 fee for each passport application.

#### **Program Objectives**

- Assist our community by accepting and executing passport applications on behalf of the U.S. Department of State. Customers who apply for a passport do so in-person at a passport acceptance facility near where they live or work. SNHD is centrally located for both Las Vegas and North Las Vegas customers and provides complementary services. Those born in Clark County can obtain their birth certificate, receive travel immunizations, and submit their passport application in one location. Customers born outside of Clark County are required to bring proof of citizenship but can still use the same complementary services of travel immunizations and passport services.

#### **Additional 2025/2026 Goals**

- Ensure Passport Services program sustainability.
- Ensure security and confidentiality of systems and procedures.
- Ensure staff competency.

## Vital Records

In the United States, vital statistics play a central role in the health and welfare of its citizens from birth to death. Capturing accurate vital statistics provides the building blocks for the human rights of identity, nationality, inheritance, education, health and other social services.

### **Department Objectives**

- Examine each birth/death certificate and ensure that it has been completed in accordance with NRS 440, NAC 440, and CDC instruction.
- Work closely with hospitals, funeral homes, and Coroner's office to improve upon and gather accurate data.
- Issue birth and death certificates through a careful and secure process to protect and prevent identity theft and other fraudulent acts.
- Ensure we demonstrate excellence in customer service through communication, respect, empathy, and integrity.

### **Program Objectives**

- For more than 50 years the Southern Nevada Health District Vital Records Program has provided services as the local registrar (NRS 440.190). The local health authorities (SNHD Vital Records) in Nevada counties have authority to act on the state's behalf as registrars of vital records. In addition to the activities that the Nevada State Office of Vital Statistics conducts, Southern Nevada Health District Vital Records also submit payments from the fees collected from clients to the state and to the Clark County Office of the Coroner/Medical Examiner. These fees are outlined in NRS 440.175, 440.700, 440.715 and NAC 440.400.

### **Additional 2025/2026 Goals**

- Collect and disperse fees as prescribed in NRS, NAC and local SNHD fee schedule.
- Ensure Vital Records program sustainability.
- Develop systems to support SNHD mortality and maternal/child health surveillance.
- Ensure security and confidentiality of systems and procedures.
- Ensure staff competency.
- Provide training to local hospitals and funeral homes to improve the quality of data and timeliness of reporting.
- Build reports to show statistical information that will benefit the program as well as the health and wellness of our community.

## Health Equity

The Health Equity Program is responsible for the establishment, support and development of health strategies and collaborations between SNHD programs and community-based organizations to reduce disparities in healthcare access and service delivery to underserved populations.

### **Program Objectives**

- Maintain organizational capacity and infrastructure to address public health disparities experienced by high-risk and underserved populations.
- Develop new and support existing community partnerships to implement health equity strategies to provide or expand services and assistance to individuals and communities affected by social determinants.
- Build and expand community capacity to assess and address the needs of communities disproportionately affected by health inequities.

### **Additional 2025/2026 Goals**

- Partner with community organizations to increase the community's capacity to assess and address the needs of priority groups.
- Participate in workgroups and task forces addressing health disparities.
- Provide health equity training to SNHD staff and community partners.
- Conduct community outreach.

## Public Health Laboratory

The Southern Nevada Public Health Laboratory (SNPHL) is a Clinical Laboratory Improvement Amendments (CLIA) certified laboratory and is licensed by the State of Nevada to perform high complexity testing. It was established in 2002 primarily to analyze suspect bioterrorism agents but has since expanded to include testing on a whole array of public health matters such as sexually transmitted diseases, foodborne outbreaks investigations, vector disease surveillance, Vaccine preventable disease surveillance, and most COVID-19 pandemic testing.

### **Department Objectives**

- The provision of rapid, thorough, and quality analyses of specimens related to an actual or suspected bioterrorism event.
- The provision of the laboratory supports surveillance, investigation, prompt diagnosis, and control of communicable disease outbreaks.
- The collection and analysis of data to rapidly identify emerging diseases.
- The provision of timely, quality testing results in support of other core public health functions such as food-borne and vector-borne disease investigations.

## **Program Objectives**

### **Immunology/Serology Department:**

The Immunology/Serology section of SNPHL performs a full range of testing for a wide variety of infectious diseases. Works with the Southern Nevada Health District (SNHD) Clinical Services Division, the Office of Epidemiology and Disease Surveillance (OEDS), and other community partners. By analyzing clinical samples, this department assists in activities pertaining to Southern Nevada's surveillance, disease management, and delivery of clinical testing services. The following services are offered routinely:

- Syphilis testing.
- Hepatitis testing, including Hepatitis A, B and C.
- QuantiFERON testing for latent TB.
- HIV antigen/antibody, confirmation, and viral load.
- NAAT testing for Chlamydia trachomatis, Neisseria gonorrhea.
- Clinical diagnostic testing includes Complete Blood Counts, Urine Analysis and Blood Chemistry analysis.

### **Microbiology Department:**

The Microbiology section of SNPHL uses the latest methods to isolate, identify and characterize pathogens. Works with the SNHD OEDS, SNHD Environmental Health (EH) Division, government agencies, and hospital sentinel laboratories. They analyze clinical and environmental samples and participate in the core activities of Southern Nevada surveillance, quality assessment, assurance, and safety. The services offered in the Microbiology Department are:

- Culture of specimens' uncommon pathogens, stools for fecal pathogens and confirmation of STEC broth.
- Identification of difficult to identify isolates by whole-genome sequencing.
- Confirmation of vancomycin-resistant or intermediate *Staphylococcus aureus* (VRSA/VISA).
- Participating in the testing for vaccine preventable disease surveillance.
- Outbreak investigation of gastrointestinal incident caused by bacterial and other pathogens.
- Gonococcal Isolate Surveillance Project participation through incubation, confirmation of identification, storage, data collection, and shipping to ARLN Laboratory.

### **Molecular Department:**

The Molecular Department has a range of Whole genome Sequencing (WGS) tests for a variety of infectious pathogens. These tests use state-of-art WGS instruments including robotic liquid handling machine to generate a high quality of sequence data for molecular epidemiologic data

analysis. This department also includes the NAAT instrument to identify respiratory and gastrointestinal organisms for identifying the infectious pathogens from outbreak samples.

Molecular department includes:

- Outbreak investigation of respiratory pathogens.
- Outbreak investigation of gastrointestinal pathogens identification.
- Whole genome sequencing for PulseNet organisms, Legionella, and other pathogens.

Virology Department:

The Virology Department uses state-of-the-art technology to identify *C. auris* using PCR instruments, the high throughput liquid handler system, and the nucleic acids extractors. The real-time PCR assays target the DNA or RNA of a variety of viruses such as influenza and RSV etc. This department also evaluates the vector borne pathogens such as EEE, West Nile virus, STE during the early summer to fall season annually for the concern of community health.

- Surveillance of vaccine-preventable diseases and vector-borne diseases.
- Disease surveillance for influenza and genotyping.
- Disease surveillance for screening *C. auris*
- Enhance screening testing for other respiratory viruses' detection.

Emergency Response Department:

This department will handle clinical select agent suspicious samples from sentinel laboratories in Clark County and law enforcement samples submitted by the FBI. The Laboratory Network Response (LRN-B) protocol is used by this department to conduct and report test results in a BSL-3 laboratory that has been certified by the Department of Select Agent and Toxin (DSAT) at CDC. This division is to train the sentinel laboratory's lab staff on how to identify the select agents and submit samples.

The Emergency Response department includes:

- Perform Select agents testing using LRN-B SOP.
- Perform the confirmation testing for BioWatch and sentinel laboratories.
- Coordinate the sample submission with law enforcement.
- Confirmation of suspect agents of bioterrorism.
- Provide the training in ID.
- Conduct cross training to increase the number of competent staff.

## **Additional 2025/2026 Goals**

- Create and verify a screening test methodology for pathogens including norovirus, influenzas, RSV, and MPOX utilizing wastewater samples.

- Engage in the SNHD Continuity of Operations Plan (COOP) exercise to refine the SNPHL COOP plan and implement the enhancement strategy.
- Submitting an application for an APHL mentorship to attract a QA fellow to support the laboratory's QA management.
- To enhance the test ordering capacity and capabilities of our current Laboratory Information Management System (LIMS) and prepare for the implications of any potential forthcoming pandemic, it is essential to implement the Outreach electronic ordering system.
- Furthermore, we must persist in the development, evaluation, and implementation of new technologies and methodologies, with a particular emphasis on the expansion of our Healthcare Associated Infections (HAI) and antibiotic-resistant (AR) program.
- Communicate directly with the Centers for Disease Control and Prevention (CDC) to guarantee awareness and action regarding the most pressing public health issues.
- Improve community health services by incorporating high-throughput clinical chemistry, hematology, and urine analysis equipment into the clinical health laboratory. The expanded test menu will offer additional clinical testing for patients utilizing the Health District clinical services.
- Collaborate with the facility team, finance department, and grant team to ensure the successful implementation of the SNPHL BSL3 lab expansion project and timely submission of progress reports to the County, the City of Las Vegas, and other grant providers.
- Continuously assess and modify the PHL service while developing a new program to fulfill community service requirements following the loss of funding from ELC ED and EDX.
- Develop partnerships or contracts with other entities such as UNLV and APHL to provide additional training and skills to our staff and leverage our existing resources for state or national surveillance testing activities.

#### Office of Public Health Preparedness

The Office of Public Health Preparedness (OPHP) works with other Health District programs and community partners to prepare for and respond to the consequences of human-caused and naturally occurring emergencies including infectious disease outbreaks, bioterrorism events, mass casualty incidents, and other public health threats. The Centers for Disease Control and Prevention (CDC) has identified 15 core capabilities through the state cooperative agreement which are aligned with the 10 Essential Public Health Services, SNHD and the Community Health Strategic Plan, and the Urban Area Threat and Hazard Identification and Risk Assessment (THIRA).

- Program supported through several federal and state cooperative agreement funding sources.

- Essential Public Health Services goals that also align with FEMA's National Response Framework Objectives and support National Incident Command System.
- Building workforce preparedness to respond to Public Health Emergencies and Threats with other community response partners.

## Department Objectives

- CHS Programs will strive to improve SNHD financial stability through increased grant writing, improved operational efficiencies and through enhanced reimbursements for services rendered. OPHP will continue to manage federal cooperative agreements ensuring grant deliverables are being met and grant funding accurately leveraged where possible to save Health District's and community's need to use property tax revenue dollars.
- CHS Programs will maintain Quality Improvement (QI) and Public Health Accreditation Board (PHAB) activities to support workforce development and will make recommendations and suggestions for improvements in SNHD workforce strategies and Public Health Accreditation standards. OPHP will link agency and CHS quality improvement activities with existing QI practice using Homeland Security Exercise and Evaluation Program (HSEEP) and grant guidance and activities to continue meeting grant deliverables while also supporting workforce development objectives and strategies.
- CHS Programs will recommend improvements in information management and implement new technology whenever possible. OPHP will crosswalk data from community needs assessments and improvement plans and CH goals with preparedness planning that include community partners and align with grant work plan activities.

## Program Objectives

Personnel in several Divisions and offices at SNHD are funded from several federal grant sources from the Department of Health & Human Services (HHS), which includes the CDC. Funds are intended to build community resilience, strengthen the core capabilities necessary for preparedness according to Presidential Policy Directive/PPD 8 and build local public health jurisdictions' preparedness and response capabilities and capacity to respond to public health threats. Continue to lead Health District and community partners in response to emerging threats, improving seasonal influenza rates with mitigation measures, and supporting other public health services to the population to slow/eliminate the spread of disease and mitigate negative outcomes.

- **Public Health and Emergency Preparedness (PHEP)** A CDC sponsored grant, PHEP funding is aligned with the national response framework target capabilities. The grant provides for the planning and training of Health District personnel to increase response capability to real incidents. The grant also provides for the development of incident management, internal communication, crisis and emergency risk communication, exercise

design, performance and improvement of Health District plans, epidemiology surveillance, and laboratory capabilities. OPHP will continue providing Health District staff with opportunities to be trained in Incident Command System (ICS) for National Incident Management System (NIMS) compliance and participation in Point of Dispensing drills. This includes training personnel for real events including measles, pandemic influenza, COVID, Formula One, TB and legionella responses in 2025/2026. Improvement Plan activities are currently being completed following the COVID response with community Emergency Management, Healthcare System, EMS and law enforcement partners. This includes funding challenges and eliminations to BioWatch Program which support activities and planning for future local, special events to include large venue events such as Formula 1 and future professional sporting events.

- **Hospital Preparedness Program (HPP)** An administration for strategic preparedness and response (ASPR) sponsored grant assists health care systems, e.g., hospitals, Emergency Medical Services, healthcare providers and others to develop and exercise plans, and respond to public health emergencies. Program priorities include maintaining 24/7/365 interoperable communication systems, hospital bed availability/tracking, MRC volunteer management, agency responder safety and health, and others such as fatality management planning in conjunction with the Clark County Office of the Coroner and Medical Examiner. All of these objectives have been tested and exercised during the 2024/25 fiscal year and will be completed for future response events. The Health District continues to develop and build, with local public and private partners, a functional Healthcare Coalition that assists the health care system during medical surge, public health and natural disasters that may occur in Southern Nevada. The office also supports the Medical Reserve Corps of Southern Nevada which is a community-based civilian volunteer program that recruits, trains and utilizes healthcare and other volunteers to strengthen public health, emergency response and community resiliency in the community. Funded staff performs planning, training, and responder safety and health of Health District and healthcare workforce. Goals and objectives will include preparedness After Action Report and corrective action activities following identified gaps in medical surge response to public health emergencies and large venue special events. SNHD will also be working through the Southern Nevada Healthcare Preparedness Coalition for improving Medical Surge Area Command/Medical Surge Support Team coordination through the Clark County Office of Emergency Management's Multi Agency Coordination Center (MACC). These plan improvements will be evaluated through planned exercises and real events or during real incidents. This grant funds 1.0 FTE as contractor, the Emergency Response and Readiness Coordinator which is funded from both HPP and CRI grants. The Clinical Advisor is required by this funding source to support the needs of the Health District and the Southern Nevada Healthcare Preparedness Coalition. We are currently working with local fire departments, healthcare systems, and free-standing emergency departments to train and prepare for future mass casualty incidents through a Hospital Area Command.
- **Cities Readiness Initiative (CRI)** A CDC-sponsored grant that enables cities to provide, in part, preventive medications to their populations within 48 hours of a public health

emergency, as well as prepare large cities for all hazards. The Health District continues to work with local and federal law enforcement, the Clark County Office of Emergency Management, the Clark County School District, and other community partners to enhance CRI planning activities. The Health District continues to maintain partnerships with the resort properties, health care systems, and other local businesses to continue development of the [southernnevadapod.com](http://southernnevadapod.com) project to better provide information and medications to the public, Closed POD Partner staff, families, and visitors during a medical countermeasure dispensing emergency. These partnerships plans are tested in annual agency exercises, community exercises, and real events. For the 2024/2025 fiscal year, OPHP will complete several All-Hazard exercises, ongoing training of SNHD workforce to be able to respond in lead and supporting roles. The goal is to continue to have every Health District employee participate in one drill or real event by the end of the 5-year cooperative agreement.

- **Southern Nevada Counter-Terrorism Center (SNCTC)** This grant, sponsored by Homeland Security and Urban Area Security Initiative (UASI), funds 1.0 FTE to work in the Southern Nevada Counter Terrorism Center (SNCTC, aka LVMPD Fusion Center) with law enforcement and community partner analysts to review information, data, and support bidirectional information sharing and exchange. The Public Health Preparedness Analyst also serves as a public health liaison between Health District public health programs and Division Directors, local law enforcement and other agencies at the Southern Nevada Fusion Center. Public Health Analyst uses public health data and performs analyses of public health and Fusion Center data sources using appropriate analytical methods to identify potential public health threats and hazards that may also have a nexus to terrorism. Supervision: from natural causes or related to bioterrorism incidents; to identify and present data sources in a confidential environment to be used for information sharing applications; to manage data sets and insure the data are of high quality; to interpret the analysis and prepare comprehensive reports under general supervision; participates in site visits and inspections as deemed necessary and appropriate to fulfill duties; performs a variety of duties involved in data analysis, implementation, coordination and maintenance; and performs related duties as assigned. This funding is competitive and must be applied each year. OPHP was awarded a fourth year of funding to continue to support this position. The period to expend these funds is 18 months from Notice of Award.

### **Additional 2025/2026 Goals**

- Continue to increase the public health capacities of our community to prepare, plan for, prevent and recover from public health emergencies and disasters through a minimum of two exercises testing emergency response plans. Movement away from traditional tabletop exercises to game-based approaches that foster greater participation in learning.
- Continue to build and maintain partnerships necessary to ensure a trained and competent workforce that is available to respond through a minimum of 2 training opportunities using Health District, contracted and community partner personnel.

- To provide improved communication and information sharing with the public, visitors and community partners through public information messaging, information sharing tools and best practices prior to, during and following a public health emergency or disaster.
- Leveraging federal and state preparedness funding to continue to support Nevada, local, Health District, division and program missions and objectives. OPHP will recommend improvements in Information management and implement new disaster recovery technology whenever possible leveraging grant dollars to support infrastructure personnel working on grant required activities. Program will leverage a greater cost share method to ensuring that capabilities are maintained with declining federal funding sources.
- Continue active search for public health preparedness funding and opportunities to partner with federal and local educational institutions to augment program staff with professional public health placement programs. OPHP will support Health District objective to develop future public health preparedness professionals.
- Continue to ensure that Emergency Operation Planning includes considerations for vulnerable populations and Divisional goals to improve community health as it relates to Public Health emergency and disaster planning.
- Support activities for PHAB accreditation renewal.

## **Administration**

Health District management is provided by the District Health Officer. The Administration Division provides general administrative functions to include human resources; financial services; grant management; contract administration; public information; communications; information technology; records management; general supply; shipping/receiving; mailroom; informatics; food handler safety training; accreditation; quality improvement; performance management and strategic planning. Maintenance of the 166,583 square feet of Health District facilities include janitorial services, security, and grounds maintenance.

<b>Program Name</b>	<b>Adopted FY 25/26 FTE</b>
ADMINISTRATION	8.0
FACILITIES	48.0
FINANCE	38.0
FOOD HANDLERS (HEALTH CARDS)	23.0
HUMAN RESOURCES	22.0
INFORMATION TECHNOLOGY	35.0
LEGAL	9.0
OFFICE OF COMMUNICATION	9.0
<b>Total FTE</b>	<b>192.0</b>

	<b>General Fund</b>	<b>Special Revenue Fund</b>	<b>Total</b>
<b>Revenues</b>	43,397,976	11,481,511	54,879,487
<i>Transfer In</i>	-	2,658,860	2,658,860
<b>Expenditures</b>	(11,675,138)	14,140,372	2,465,233
<i>Transfers Out</i>	5,658,860	-	5,658,860
<b>Revenue/Over (Under) Expenditures</b>	<b>49,414,254</b>	-	<b>49,414,254</b>

## **Facilities**

The facilities department is comprised of four departments: Maintenance, Janitorial, Security and Warehouse.

### **Department Objectives**

- Provide facilities support to all SNHD departments.
- Maintain safe, clean, and comfortable buildings for all staff and visitors.
- Support the overall goals and objectives of the Southern Nevada Health District.

### **Program Objectives**

Maintenance:

- Repair and maintenance of all mechanical, electrical, plumbing, and structural items.
- Operate extensive preventative maintenance program to decrease breakdowns of building components.

Security:

- Ensure the safety and security of all staff, visitors and SNHD facilities by providing uniformed staff to patrol and oversee all areas of SNHD facilities. Serve as direct contact with local law enforcement. Oversight of all fleet vehicle purchase, upkeep, and disposal.

Janitorial:

- Daily cleaning and disinfection of all SNHD facilities. Upkeep clean and neat appearance of the interior and exterior of all buildings.

Warehouse:

- Serve as shipping and receiving for all SNHD mail, trucking, and packages. Storage and distribution of supplies for all SNHD departments.

**Additional 2025/2026 Goals**

- Continue to support all departments in the daily operation of the Health District.
- Assist with the expansion of Behavioral Health.
- Oversee construction of SNPHL expansion.

Finance

The Finance department is responsible for planning, controlling, and managing all financial aspects of the Southern Nevada Health District's programs and services.

**Department Objectives**

- Ensure a high level of accuracy in all areas.
- Provide excellent customer service to both internal and external customers.
- Continue to look for grant opportunities to supplement general fund appropriations.
- Assurance of fiscal viability and sustainability of SNHD.
- Efficient and effective delivery of all financial related services.
- Efficient and effective use of Finance Enterprise and Timekeeping systems.
- Efficient, accurate, and effective billing practices for clinical services.

**Program Objectives**

SNHD financial philosophies will reflect:

- Southern Nevada health needs and priorities.
- Efficient and effective delivery services.
- Use of fund balances accumulated through prior year savings are thoroughly planned.
- Use of fund balances/net assets will be prioritized based on:
  - Community priorities for emergencies.
  - Major capital purchases or investments in infrastructure or projects necessary to sustain improvements in the delivery of public health services and/or positive community health outcomes.

### **Additional 2025/2026 Goals**

- Issuance of SNHD-wide financial reports; responsible for SNHD-wide internal controls to ensure that financial transactions are properly reported; responsible for cash management for SNHD-wide reconciliation of cash, ensuring that departments are following internal policies and procedures.
- Preparation and submission of SNHD Budgets; preparation of documents required for annual external audit; preparation of annual financial statements.
- Provide accurate monthly leadership reports to executive team and monitor budget versus actual transactions.
- Receipt and documentation of goods and services received; timely and accurate payment processing of vendor invoices; submission of request for grant expense reimbursement; timely and accurate billing for services rendered; collection of accounts receivable; update grant processing procedures; user-friendly accounting system for better financial reporting and/or providing more useful information both to programs that closely monitor budgets and the public as a whole.

### Health Cards

The Health Cards department helps to protect Clark County's residents and tourists from foodborne illness by testing food and beverage workers on food handler safety principles and issuing a Food Handler Safety Training Card to those who have exhibited adequate knowledge. Likewise, the department helps to protect our residents and tourists from bloodborne illness by testing body art and microblading artists on sanitation principles and issuing Body Art Cards and Microblading Cards to those who pass. Additionally, Health Cards staff operate the Health District's main switchboard as well as the reception desk at the 280 S. Decatur Blvd. public health center.

### **Department Objectives**

- Provide excellent customer service to Food Handler Safety Training Card clients at all stages of the process, from check-in to testing to accepting payment and printing the card.
- Provide excellent customer service to Body Art Card and Microblading Card clients at all stages of the process, from check-in to testing to accepting payment and printing the card.
- Provide excellent over-the-phone customer service to clients who call the main switchboard for information or to connect with one of the Health District's many departments.
- Provide excellent face-to-face customer service to clients who visit our main public health center for services and resources as well as to staff who may be expecting visitors.
- Constantly look for improvement opportunities to serve our clients better and more efficiently.

## **Program Objectives**

Food Handler Safety Training Cards:

- Provide a high level of customer service to guests when greeting, checking in and taking their photo.
- Proctor testing for first-time and renewing Food Handler Safety Training Card holders.
- Process card requests from clients who provide an accepted external training certificate.
- Respond to public inquiries regarding training, testing, fees, and accepted forms of identification.
- Support Environmental Health inspectors who seek to verify the validity of a card.

Body Art and Microblading Cards:

- Provide a high level of customer service to guests when greeting, checking in and taking their photo.
- Verify clients provide valid card applications and experience verification forms as required.
- Proctor testing for first-time and expired Body Art Card and Microblading Card holders.
- Support Environmental Health inspectors who seek to verify the validity of a card.

Switchboard:

- Answer each call in a timely manner with a friendly and supportive demeanor.
- Provide relevant information when a brief answer is sufficient for the inquiry.
- Direct calls to the appropriate department when a more detailed answer or client-specific assistance is necessary, such as when obtaining test results or setting an appointment.

Reception:

- Welcome each guest to the Health District with a friendly and supportive demeanor.
- Provide relevant information when a brief answer is sufficient for the inquiry.

- Direct clients to the appropriate clinic or department when they have an appointment or when more detailed or client-specific assistance is necessary.
- Greet special guests and notify appropriate staff that the visitors have arrived.

## **Additional 2025/2026 Goals**

- Continue to streamline our processes so client wait times are further reduced.
- Increase accessibility and accommodation for people who speak other languages or have special needs.
- Ensure program staff are trained on office-specific differences for when coverage at a different office is needed.
- Explore ways to further advance our program technologically, such as by issuing a card for mobile wallets.
- Cross-train additional program staff to assist with the switchboard and reception desk.
- Grow a computerized resource database to assist switchboard operators and receptionists more quickly find information needed for assisting visitors and callers.
- Continue developing the ambassadorial qualities of reception desk staff to improve the client experience.
- Make customer service training available to all staff to ensure we are serving with respect and a smile.

## Human Resources

The Human Resources Department, which includes Safety, works collaboratively to recruit, onboard, support, and retain employees while prioritizing their safety and well-being. Together, these efforts help fulfill the Southern Nevada Health District's mission and vision. Human Resources provides a comprehensive range of services including recruitment, safety, benefits administration, workers' compensation, HRIS, labor and employee relations, employee recognition, training and development, engagement initiatives, and other essential HR support functions.

## **Department Objectives**

- Partners collaboratively with employees at all levels to build trust and serve as a reliable resource for employment-related guidance.
- Increase satisfaction scores in onboarding and employee relations, in alignment with the Strategic Plan.
- Deliver exceptional customer service to both internal and external stakeholders.
- Ensure organizational compliance with local, state, and federal employment laws and regulations.

- Strengthen recruitment and retention efforts to attract top talent and retain high-performing employees.
- Expand and enhance course offerings that support leadership development as well as personal and professional growth for all employees.
- Foster a culture of safety across the organization.

## **Program Objectives**

- Recruitment & Selection: Develop and implement updated interview training to improve the effectiveness and consistency of candidate selection.
- HRIS: Position NEOGOV as the central system of record for managing the full employee lifecycle.
- Labor & Employee Relations: Collaborate with management, staff, and union representatives to build productive relationships and resolve concerns with transparency and fairness.
- Benefits Administration: Manage and continuously evaluate employee benefits to ensure market competitiveness and employee satisfaction.
- Training & Development: Offer both in-person and online training to equip employees with the knowledge and skills needed to achieve professional goals. Continue enhancing the onboarding process to support employee retention and foster a culture of value and belonging.
- Employee Engagement: Recognize and reward employee contributions through initiatives aligned with SNHD's C.A.R.E.S. values.
- Employee Relations: Promote a positive workplace culture by proactively addressing concerns, conducting investigations, recommending solutions, and strengthening communication between staff and leadership. Conduct department-level outreach to support engagement and alignment.
- Strategic Alignment: Ensure HR initiatives directly support SNHD's overall strategic goals and contribute to public health advancement.
- Safety: Promote a strong safety culture across all SNHD locations through proactive training, consistent communication, and continuous reinforcement.

## **Additional 2025/2026 Goals**

### **Employee Benefits & Wellness**

- Expand the employee benefits package to include pet bereavement leave, pet insurance, and onsite chair yoga.
- Introduction of CredibleMind as a new mental health and wellness resource for employees.
- Create a wellness certificate program to support employee health and well-being.

## Workplace Culture & Engagement

- Launch an anonymous safety hotline to support a culture of safety and open communication.
- Incorporate Collective Bargaining Agreement (CBA) and Employee Handbook trivia into monthly department meetings to increase knowledge retention.
- Launch Gemba Walks as part of department outreach efforts to increase visibility, communication, and leadership presence.
- Enhance Organizational Vital Signs (OVS) survey by implementing pulse surveys, a suggestion box, and adapting elements of the Toyota Production Model to improve operational efficiency.

## Training & Workforce Development

- Add targeted training sessions focused on leadership development as part of the Toolbox training series.
- Integrate empowerment training into Toolbox offerings to promote leadership at all levels.
- Implement a Workforce Development Plan, with an emphasis on responding to PHAB (Public Health Accreditation Board) requirements and supporting related strategic initiatives.
- Continuation with supervisor/manager conference – with a focus on leadership development and engagement.

## HR Operations & Compliance

- Establish a dedicated Employee Relations and Labor Relations inbox ([employeerelations@snhd.org](mailto:employeerelations@snhd.org)) for more efficient communication and issue tracking.
- Provide standardized coaching, counseling, and discipline templates for managers via SharePoint.
- Implement an attendance policy to clarify expectations and improve accountability.
- Conduct benefits open enrollment using NEOGOV to streamline the process.
- Implement a hybrid work policy to support organizational flexibility and work-life balance.
- Launch a standardized process for annual DMV checks for applicable employees.
- Transition to a new background check provider for improved processing.
- Update the credentialing process and SOPs to include new positions under HRSA funding.
- Ratify the labor contract with S.E.I.U.
- Reduce workers' compensation costs through improved case management and prevention strategies.

## Talent Development & Recruitment

- Launch the YAC (Young Adult Council) program with an initial cohort of 10 participants.
- Enhance the recruitment and candidate selection process by developing and implementing updated interview training

## Information Technology

The Information Technology (IT) department ensures that the Health District's systems, networks, data, and applications are all connected and function properly. The IT team handles three major areas:

- Deploys and maintains business applications, services, and infrastructure (servers, networks, storage).
- Monitors, optimizes, and troubleshoots the performance of applications, services, and infrastructure.
- Oversees the security and governance of applications, services, and infrastructure.

## **Department Objectives**

- Most IT staff have different responsibilities within the team that break into several key areas including:
- Administration. Administrators manage the day-to-day deployment, operation, and monitoring of an IT environment, including systems, networks, and applications. Admins often perform a range of other duties such as software upgrades, user training, software license management, procurement, security, data management and observing adherence to business process and compliance requirements.
- Support. Help desk staff specialize in answering questions, gathering information, and directing troubleshooting efforts for hardware and software. IT support often includes IT asset and change management, helping admins with procurement, handling backup and recovery of data and applications, monitoring and analyzing logs and other performance monitoring tools and following established support workflows and processes.
- Applications. All District programs rely on software to perform work. Some applications are procured and deployed from third parties, while many applications and interfaces -- such as APIs -- needed to deliver critical business capabilities and services are developed in-house. Developers are also tasked with creating interactive websites and building mobile applications. The trend toward agile or continuous development paradigms requires the developers to be increasingly involved with IT operations, such as deploying and monitoring applications.

- Security and Compliance. SNHD is obligated to observe varied government- and industry-driven regulatory requirements including HIPAA and PCI. IT staff play a major role in securing and monitoring access to business data and applications to ensure that such resources are used according to established business governance policy that meets regulatory requirements. Such staff are deeply involved with security tasks and routinely interact with legal and business teams to prevent, detect, investigate, and report breaches.

## **Program Objectives**

- Update infrastructure to improve performance and reliability.
- Ensure SNHD business units are properly equipped to perform their duties efficiently and securely.
- Increase cybersecurity posture and establish IT and Data Governance programs.
- Improve customer satisfaction through application and infrastructure improvements.

## Legal Services

The Legal Department provides support to all divisions and programs at SNHD.

## **Department Objectives**

- Provide counsel to the Board of Health, Southern Nevada Community Health Center, and Advisory Board, as well as the respective committees of these Boards.
- Provide legal advice to leadership, managers, and staff to ensure compliance governance and legal requirements.
- Prosecute Environmental Health administrative cases.
- Manage public record requests as well as subpoenas duces tecum.
- Manage contracts, compliance, District-Wide policies, records management, and risk management programs effectively.

## Office of Communications

The Southern Nevada Health District Office of Communications (OOC) is responsible for the overarching communications activities of SNHD and the SNCTC, including crisis and emergency risk communication planning and response, media relations, government/legislative affairs, brand development and management, marketing activities, website development and maintenance, product development, digital media planning and content management, community and stakeholder outreach/relations and special event planning.

## **Department Objectives**

- Implement communication campaigns and activities that serve to enhance the overall brand of the Health District and Community Health Center and raise awareness of public health services, programs and initiatives.
- Hold an annual event to provide a record of accomplishments, ongoing public health challenges, lessons learned and action plans with the community, stakeholders and partners.
- Expand public e-newsletter subscriptions through a regular distribution schedule and cross promotions on social media platforms to boost brand awareness, educate the public about timely public health issues, emerging topics, and to highlight Health District and Community Health Center staff as subject matter experts.

## **Program Objectives**

- Increase community engagement through outreach activities.
- Increase social media presence and engagement by posting staff content contributions, provide guidelines for submissions.

## **Additional 2025/2026 Goals**

- Increase brand and agency awareness to promote the Health District as a trusted public health and health care resource in the community.
- Improve internal agency-wide communications to raise employee awareness of public health issues, cross-divisional programs, services, activities and events.

## **The Office of Informatics**

The Office of Informatics is responsible for leading the modernization, integration, and management of public health information systems within the Southern Nevada Health District. The office develops and maintains innovative infrastructure and applications that enable real-time data collection, secure data exchange, and efficient reporting to support public health operations and emergency response. By aligning with national Data Modernization Initiative (DMI) goals and leveraging emerging technologies, the office ensures timely, accurate, and actionable data is available to support the District's core functions. These efforts transform complex data into meaningful insights that inform policy development, guide program planning and evaluation, and drive system improvements. Through its data, analytics, and technology solutions, the Office of Informatics supports efforts to reduce health disparities, optimize public health operations, and protect and promote the well-being of Southern Nevada communities and visitors.

## **Department Objectives**

- To maintain and enhance EpiTrax and expand reporting capabilities to support timely and complete data sharing with the State and CDC.
- To advance CDC's DMI by implementing new technologies, including Master Patient Index (MPI) to support a connected public health data ecosystem.
- To develop and maintain public health informatics systems to create actionable data so that our clients may provide timely intervention and prevention.
- To enhance and maintain workforce capabilities, data and health information systems and processes.
- To strengthen data driven activities across the Health District.
- To facilitate public health data system modernization by conducting surveillance system evaluations.

## **Program Objectives**

### **Disease Surveillance Systems (EpiTrax):**

- Maintain and enhance EpiTrax system and continue to advance DMI projects.
- Enhance Electronic Message Standardization and Automation (EMSA) to support processing and integration of Continuity of Care Documents (CCD) into EpiTrax
- Maintain and enhance SNHD online morbidity reporting portal and import data into EpiTrax.
- Continue collaborating with Nevada State and CDC to onboard new Message Mapping Guide (MMG) conditions
- Maintain and onboard Electronic Lab Reporting (ELR) and Electronic Case Reporting (eCR).
- Integrate OpenEMPI with EpiTrax and EMSA to reduce the time staff spend manually reviewing and matching person records.
- Migrate EpiTrax to the new form refactor framework and enable the GraphQL API service.
- Configure EMSA to consume antimicrobial susceptibility testing results and treatment data extracted from eCR.

### **SNPHL Laboratory Information Management System (LIMS):**

- Maintain and upgrade LIMS regularly to accommodate new instruments and testing.
- Develop bidirectional orders/results interface with Nevada State Public Health Laboratory (NSPHL), CDC, SNHD EHR, and other systems.
- Optimize Orchard Outreach use for external partners.
- Interoperate with FQHC Lab instruments.

### **Clinic Services and Electronic Health Record (EHR) System:**

- Work with IT to implement and maintain EHR system for optimizing patient care and documentation.
- Produce various reports for FQHC and Public Health & Preventive Care Services, including Uniform Data System (UDS) reports, Family Planning Annual Report (FPAR), Health Resources and Services Administration (HRSA) Ryan White HIV/AIDS Program Services Reports (RSR), and Screening, Brief Intervention, and Referral to Treatment (SBIRT) Quarterly Report, and Chronic Disease Prevention and Promotion Reports.
- Continue to work with IT and FQHC to implement and optimize Azara, a population health management system.
- Work with IT to implement Patient Engagement Resources (e.g. Healow Open Access).
- Work with IT to implement Patient Remote Monitoring.
- Monitor/Maintain vaccine uploads into Immunization Registry via EHR system.
- Work with IT to implement Ambient listening technologies for charting.
- Explore integration between Scene (TB Direct Observed Therapy Platform) and the EHR.

#### **Data Reporting:**

- Maintain and update EpiTrax Data warehouse for data analysis and reporting.
- Develop Pentaho and Power BI reports for Epi reporting, program management and data QA.
- Maintain and update Respiratory Disease Dashboard.
- Assist Division of Disease Surveillance and Control (DSC), Office of Chronic Disease Prevention & Health Promotion, Office of Public Health Preparedness, Office of EMS/Trauma System, Environmental Health, FQHC and Clinic Services with various data requests, data exports, and report generation.

#### **System Integration and Interoperability:**

- Continue to enhance the iCircle web application for ODS, and continue to transmit STD, HIV and Hepatitis testing data to CDC, and enhance a quality assurance process between iCircle with eCW data.
- Develop an eCW data warehouse to exchange clinic data with EpiTrax.
- Migrate and modernized the foodborne illness complaint process.
- Migrate Secure File Transfer Protocol (SFTP) data partners to new SFTP server to enhance security.
- Set up the Query Connector to connect with the Qualified Health Information Network (QHIN) and integrate the retrieved data into the EpiTrax system
- Implement AWS Bedrock AI to help standardize data for seamless integration into the EpiTrax system

#### **Additional 2025/2026 Goals**

- Pursue new funding opportunities as well as renewing existing grants to enhance SNHD informatics infrastructure and workforce.
- Maintain and enhance Trac-B online sign-up system for syringe/medical vending machine project.
- Maintain and enhance Syndromic Surveillance System (ESSENCE) for all jurisdictions in Nevada.
- Maintain and manage CME system for Clark County Coroner's Office (CCCO), provide informatics support for NVDRS, SUDORS, SUID/SDY grants, and data requests and reports.
- Work with HealthHIE Nevada (NV HIE) for improving data collection and reporting using eCR and Fast Healthcare Interoperability Resources (FHIR) and implementing Trusted Exchange Framework and Common Agreement (TEFCA).
- Implement and maintain Enterprise Master Patient Index system (EMPI).
- Develop dashboards using ArcGIS and Power BI platforms.
- Explore Pharmacy Information System replacement.

# Public Notice

## PUBLIC NOTICE

Pursuant to Nevada Administrative Code (NAC) 354.561, Clark County, the Clark County Stadium Authority, and the Clark County Redevelopment Agency are required to publish a summary fiscal report of their General and Proprietary funds. The information contained in the summary has been prepared as adopted by the Committee on Local Government Finance.

### Southern Nevada Health District General Fund

	ACTUAL PRIOR YEAR ENDING 6/30/2024	ESTIMATED CURRENT YEAR ENDING 6/30/2025	BUDGET YEAR ENDING 06/30/26 FINAL APPROVED
Beginning Fund Balance	47,091,967	54,872,828	47,199,705
Total Available Revenues*	106,414,902	114,237,780	124,258,768
Total Expenditures**	98,634,041	121,910,903	129,089,072
Ending Fund Balance	54,872,828	47,199,705	42,369,401

\* Includes Transfers In

\*\* Includes Transfers Out