



## MINUTES

### SOUTHERN NEVADA HEALTH DISTRICT FACILITIES ADVISORY BOARD MEETING May 2, 2023, 3:00 P.M.

#### MEMBERS PRESENT

**Chair** Alexis Mussi, *CEO, (Southern Hills) HCA* Sam Kaufman, *CEO, (Henderson) UHS VHS*  
**Vice-Chair** Todd Sklamberg, *CEO, (Sunrise) HCA* Mason Van Houweling, *CEO, UMC*  
William Caron, *CEO, VA Southern Nevada* Vince Variale, *CEO, North Vista*  
Leo Gallofin, *Director, Rawson-Neal* Robert Freymuller, *CEO, (Summerlin) UHS VHS*  
Thomas Burns, *CEO, (Rose de Lima) Dignity Health* Hiral Patel, *CEO, (Mountainview) HCA*  
Christopher Loftus, *CEO, (Desert Springs) UHS VHS* Vince Variale, *CEO, North Vista*

#### MEMBERS ABSENT

Pat Kelly, *CEO, Nevada Hospital Association* Claude Wise, *CEO, (Valley) UHS VHS*  
Thomas Maher, *CEO, Boulder City Hospital* Purcell Dye, *CEO, Spring Mountain Treatment Center*  
Collin McLaughlin, *CEO, Valley Hospital* Sajit Pullarkat, *CEO, (Centennial Hills) UHS VHS*  
Jon Van Boening, *CEO, (Dominican) Dignity Health*

#### SNHD STAFF PRESENT

Fermin Leguen, *District Health Officer* Cortland Lohff, *Chief Medical Officer*  
Edward Wynder, *Associate General Counsel* Christopher Saxton, *Director of Environmental Health*  
Michael Johnson, *Director of Community Health* Christian Young, *Medical Director EMS*  
John Hammond, *EMS Manager* Joseph Yumul, *IT System Administrator*  
Jacques Graham, *Administrative Secretary*

#### GUESTS

Josederic Scott, *COO, (Dominican) Dignity Health* Deb Moran, *SNHD Medical Reserve Corps of Southern Nevada Coordinator*  
Sarah Lugo, *SNHD RN* Carmen Hua, *SNHD Health Educator*

**I. CALL TO ORDER/ROLL CALL**

Chair Mussi called the Southern Nevada Health District Facilities Advisory Board to order at 3:06 p.m. Jacques Graham, Community Health Administrative Secretary conducted a roll call and determined that a quorum was present.

**II. FIRST PUBLIC COMMENT**

Public comment is a period devoted to comments by the general public on items appearing on the Agenda. All comments are limited to five (5) minutes.

Chair Mussi asked if anyone wished to address the Board pertaining to items appearing on the agenda. Hearing no one, the Public comment portion of the meeting was closed.

**III. ADOPTION OF THE OCTOBER 25, 2022 AGENDA (for possible action)**

*A motion was made by Member Van Houweling seconded by Member Variale and carried unanimously to adopt the October 25, 2022 agenda as presented.*

**IV. CONSENT AGENDA**

Items for action to be considered by the Southern Nevada Health District Facilities Advisory Board which may be enacted by one motion. Any item may be discussed separately per board member request before action. Any exceptions to the Consent Agenda must be stated prior to approval.

1. Approve Minutes/Facilities Advisory Board Meeting: May 2, 2023 (for possible action)

*A motion was made by Member Van Houweling seconded by Member Variale and carried unanimously to approve the Consent Agenda as presented.*

**V. REPORT/DISCUSSION/POSSIBLE ACTION**

The Facilities Advisory Board may take any necessary action for any item under this section. Members of the public are allowed to speak on action items after the Board's discussion and prior to their vote. Once the action item is closed, no additional public comment will be accepted.

1. Receive, Discuss initiatives to identify areas that need to be improved or topics hospitals would like to discuss further such as logistical barriers – Sarah Lugo, SNHD RN; direct staff accordingly or take other action as deemed appropriate (for possible action)

Dr. Lohff gave an introduction of Sarah Lugo and the topic that she would cover. Sarah supplemented her PowerPoint presentation by giving an oral narrative and explanation for each slide. This presentation was an overview of COVID vaccination facilitation & administration. The attempt was to get COVID vaccines into provider offices, hospitals, urgent care centers and the like, as a sustainable plan to be able to continue to provide the vaccine, especially once SNHD COVID vaccination funding ends in 2024. Sarah offered to provide training to nurses/staff at the convenience of the requesting facility. Questions & comments were posed by Chair Mussi, Members Freymuller, Variale & Dr. Young. All responses were provided by Sarah Lugo.

2. Receive and Discuss presentation regarding SNHD's Medical Reserve Corps and possible utilization of volunteers by hospitals – Deborah Moran, SNHD Medical Reserve Corps of Southern Nevada Coordinator; (for possible action)

Deb Moran discusses a volunteer program, the Medical Reserve Corps, which has over 754 units across the US and offers a wide range of volunteers. She described the process for signing up volunteers and verifying their credentials. Her presentation included the benefits &

features of the SNHD Medical Reserve Corps, also explaining who the volunteers were and how they can service medical facilities during major events (i.e. crisis, emergencies). Deb recited some of the confusion that transpired in the Las Vegas “October 1” tragedy and when COVID was recognized as a Pandemic here in Las Vegas. The goal was to have a plan of preparedness and offer services to work with community partners in the Southern Nevada medical arena.

3. Receive and Discuss Annual Community Health Needs Assessment – Carmen Hua, SNHD Health Educator; direct staff accordingly or take other action as deemed appropriate (***for possible action***)

Carmen presented a Community Health Needs Assessment proposal, outlining the partnership process and benefits to hospitals/medical facilities. The proposal focuses on identifying needs, assets, resources, and strategies for Southern Nevada residents' health equity by working collaboratively with hospitals in completing surveys and collecting data during the trial process. Hospitals will be involved in prioritizing target populations while eliminating duplication of efforts in the community through joint efforts that build stronger relationships between organizations to create an effective sustainable Community Health Needs Assessment.

## VI. SNHD REPORT/STAFF REPORT

There were no reports at this time.

## VII. FACILITIES ADVISORY BOARD REPORTS

1. Receive and Discuss the impact of Desert Springs Hospital – Chris Loftus, CEO of Desert Springs Hospital (***for possible action***)

Chris Loftus explained that Desert Springs has collaborated with the State of Nevada since about the middle of 2022, in transitioning the facility from an acute care license to a freestanding emergency department that will operate under the license of Valley Hospital. The goal is to build a brand new freestanding emergency department right across the street from our main entrance at the facility in our employee parking lot.

2. Discuss the Sexual Assessment Nurse Exam (SANE) – Mason Van Houweling, CEO of University Medical Center

Mason Van Houweling explained the statistics of sexual assaults and requested community engagement from other hospitals & facilities. He advised that UMC is the only hospital in Southern Nevada that is certified in servicing Sexual Assaults. Patients are transported to UMC for Sexual Assault Exams (averaging 200 transfers monthly). Mason also advised that this population of patients/victims exhibits exponential growth. This subject will carryover coupled with speakers at the following FAB Meeting to support and/or explain this process. Other CEOs demonstrated support of obtaining certified SANE staff for their facilities.

## VIII. SECOND PUBLIC COMMENT

Chair Mussi asked if anyone wished to address the Board. Hearing no one, the Public comment portion of the meeting was closed.

## IX. ADJOURNMENT

Before adjourning, Chair Mussi inquired of the next meeting date. "At Call of Chair" was the response given. Chair Mussi, commented that meetings were moved from quarterly to semiannually and to send agenda topics to Chair, Vice-Chair or SNHD Community Health Admin Secretary. Mason Van Houweling requested to go back to quarterly meetings. Vice-Chair Skalmberg commented that he supported as well. Chair Mussi asked if one wanted to make a motion. Legal Counsel Wynder advised that it hadn't been agendized but would be at the next meeting for motion & vote. Chair Mussi agreed and adjourned the meeting at 4:21 p.m.



# HOSPITALS, EMERGENCY DEPARTMENTS, AND URGENT CARES- A Call for Help

SARAH LUGO, MSN, RN  
COMMUNITY HEALTH NURSE SUPERVISOR  
MASS COVID-19 VACCINE PROGRAM  
SOUTHERN NEVADA HEALTH DISTRICT

# Introduction

Sarah Lugo, MSN, RN  
Community Health Nurse Supervisor  
Mass COVID-19 Vaccine Program  
Southern Nevada Health District

- 10 years experience in overseeing CDC's public health immunization programs at SNHD: Immunization Outreach, Perinatal Hepatitis B, Childcare Immunizations, and Vaccines for Children
- Med/Surg Nurse
- School nurse for low income and high-acuity schools
- Education:
  - Masters of Science in Nursing-Family Nurse Practitioner from UNLV, 2022
  - Masters of Science in Nursing-Leadership and Management from Western Governors, 2013
  - Bachelors of Science in Nursing from UNLV, 2007

# Objectives

Discuss the current status of COVID-19 vaccinations in Clark County

Discuss hospital involvement in COVID-19 vaccine administration

Inform hospitals of simplified schedule, easier ordering, and changes in storage and handling

# Where are we now?

## COVID-19 vaccinations where we currently stand

- On March 29, 2022 a total of 3,367,238 doses of COVID-19 vaccinations were administered in Clark County, NV

Racial or Ethnic Identity Group	Percent Population vaccinated	
	Completed	Follow-up Dose
American Indian or Alaska Native	33.48%	9.64%
Asian or Pacific Islander	57.31%	24.62%
Black or African American	38.18%	12.48%
Hispanic	53.1%	14.79%
White	39.78%	16.58%

Select Age Group	Percent Population Vaccinated	
	Completed	Follow-up Dose
0-19 years of age	28.87%	3.94%
50 years and older	81.08%	45.54%
Entire estimated population	60.97%	23.87%

- As of March 24<sup>th</sup>, 2023 a total of 4,003,062 COVID-19 vaccinations were administered in Clark County, NV

Racial or Ethnic Identity Group	Percent Population Vaccinated		
	Dose 2	Follow-up Dose	Bivalent Dose
American Indian or Alaska Native	35.06%	11.75%	4.82%
Asian or Pacific Islander	59.26%	29.67%	11.44%
Black or African American	39.93%	15.02%	5.6%
Hispanic	54.93%	17.8%	6.78%
White	40.71%	19.0%	7.72%

Select Age Group	Percent Population Vaccinated		
	Dose 2	Follow-up Dose	Bivalent Dose
0-19 years of age	31.09%	6.86%	2.46%
50 years and older	83.41%	53.82%	26.30%
Entire estimated population	62.88%	28.66%	12.22%

\*Data within both tables are provisional estimates and subject to change. Current as of 03/24/2023. Data Source: Nevada [WebIZ](#) (2022 and 2023) . Please note that the categories "Other" and "Unknown" were excluded from racial and ethnic identity groups



# Background



Emergency departments act as an access point for healthcare to 1/5 of US population. (CDC, 2022a)



Urgent cares handle 29% of all primary care visits in the country. (CDC, 2022a)



CDC recommends offering vaccine to all patients at hospital discharge who are not moderately or severely ill. (CDC, 2022a)



Many skilled nursing facilities and long-term care facilities require COVID-19 vaccine for admission.



Hospitals may currently offer other vaccines as standard protocol at discharge

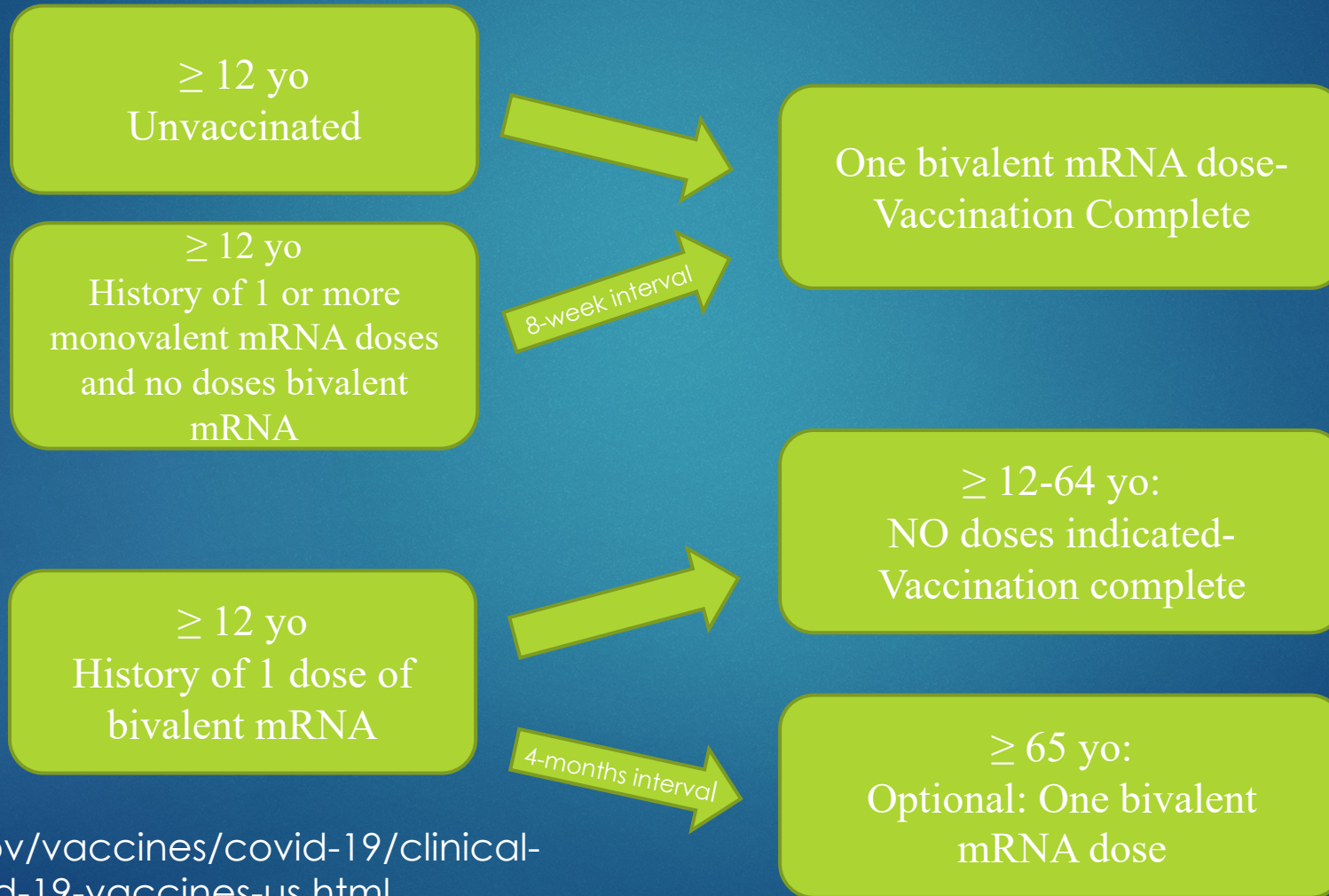
# The Ask

- Carry small amount of COVID-19 vaccine in the hospital pharmacy to be available for patients being transferred to long-term care facilities or other alternative facilities that may require COVID-19 vaccine.
- If hospital currently administers other vaccines as standard protocol, such as flu and pneumonia, consider adding the COVID-19 vaccine.

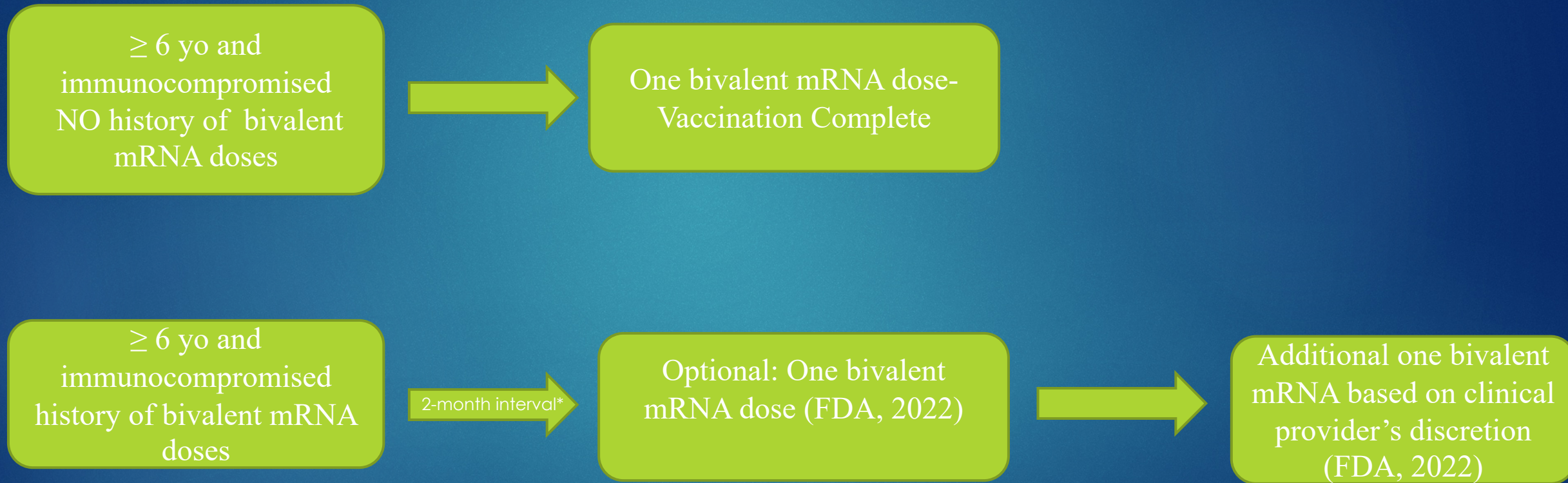


# New Simplified Schedule

## ≥ 12 Years and Older Without Immunocompromise



# New Simplified Schedule ≥ 6 Years and Older With Immunocompromise



# Easier Storage and Handling

- Ultra-cold no longer necessary
- Same refrigerator as other vaccines (2°C - 8°C)
  - Pfizer stores for 10 weeks (CDC, 2022b)
  - Moderna stores for 30 days (CDC, 2022c)



# Enrollment and Ordering

Order from the State for direct shipment

- Decreased minimum order

SNHD is a redistribution center

- Transfer small amounts to your hospital
- Single dose syringes

Avoiding missed opportunities

- Don't let multi-dose vials deter you

## Avoiding Missed Opportunities

While continuing to follow best practices to use every dose possible, providers should not miss an opportunity to vaccinate every eligible person when they are ready to get vaccinated, even if it means puncturing a multidose vial to administer vaccine without having enough people available to receive each dose.



# Tools to Make Billing Easier:

# American Medical Association Access Tool

<https://www.ama-assn.org/practice-management/cpt/covid-19-cpt-vaccine-and-immunization-codes>

The screenshot shows the AMA website page for COVID-19 CPT vaccine and immunization codes. The page is updated as of March 23, 2023, and is 5 minutes read. It features a search bar, navigation links for 'Join', 'Renew', and 'Member Benefits', and a 'Sign In' button. The main content area is titled 'COVID-19 CPT vaccine and immunization codes' and includes a 'Bookmark' button and a 'PRINT PAGE' button. A 'COVID-19 CPT codes' section provides links for 'CODING AND GUIDANCE', 'VACCINE AND IMMUNIZATION CODES', and 'FIND COVID-19 VACCINE CPT® CODES'. A 'CONTENTS' section lists links for 'Unique CPT codes approved for COVID-19 immunizations', 'Category I vaccine descriptors', 'Vaccine resources', and 'CPT® Assistant provides guidance for new codes'. A paragraph explains that new Current Procedural Terminology (CPT®) codes have been created to streamline the reporting of immunizations for the novel coronavirus (SARS-CoV-2, also known as COVID-19). A 'Find COVID-19 vaccine CPT® codes' section includes a description of the tool and an 'Access Tool' button. A 'Unique CPT codes approved for COVID-19 immunizations' section is also present. A sidebar on the right contains a 'COVID-19 CPT coding and guidance' section with a 'Learn More' button and a 'Sign up for CPT News' section with a 'Get the latest news on CPT' link.

Vaccine Code	Vaccine Administration Code(s) ⓘ	Manufacturer	Vaccine Name(s)	NDC 10/NDC11 ⓘ
<b>91300</b>	<b>0004A (Booster)</b>	Pfizer, Inc	Pfizer-BioNTech COVID-19 Vaccine	59267-1000-1 59267-1000-01



# Healthcare Provider Team

- One-on-one training with staff or group training
- Identify and assist in overcoming potential barriers
- Developing individualized processes
- Smaller dose distribution
- Assistance with enrollment if needed

## GET IT. GIVE IT. FOR OUR HEALTH CARE LEADERS!

Take the lead and administer COVID-19 vaccine on-site

### DO YOU KNOW?

- COVID-19 vaccines are on the 2023 ACIP recommended immunization schedule.
- Many health care providers, hospitals and long-term care facilities across Clark County are enrolled to administer COVID-19 vaccine. However, only a few carry and administer COVID-19 vaccines on-site.
- If you carry influenza or other vaccines, you can carry the COVID-19 vaccines as well.
- If you do not have COVID-19 vaccines, the SNHD Health Care Provider Team can help set it up.



### REASON TO CARRY:



- Health care providers are the most trusted source for COVID-19 vaccine information.
- Increase availability and convenience for your patients.
- Billable administration fee.
- Easier storage and handling methods.

### WHAT'S THE CATCH?

There is no catch. Our goal is to help health care providers vaccinate patients at their site. The SNHD Health Care Provider Team will provide you with the following support:

- One-on-one training with office staff for vaccine schedules, reconciliation, inventory, data entry, etc.
- Identify and assist in overcoming potential barriers
- Storage and handling
- Developing easy individualize processes
- Smaller dose distribution
- Assistance with enrollment, if needed



### TO GET STARTED CONTACT:

Markia Jefferson,  
Program Coordinator  
(725) 277-1677  
Jeffersonm@snhd.org

Michelle Wong,  
Community Health RN  
(725) 272-8563  
wongm@snhd.org



# Discussion and Questions

# References

- Centers for Disease Control and Prevention. (2022a). *Increasing access to vaccination opportunities: COVID-19 vaccination upon discharge from hospitals, emergency departments, and urgent care facilities*. Retrieved from <https://www.cdc.gov/vaccines/covid-19/downloads/discharge-hospital-ED-UC-jurisdiction-508.pdf>
- Centers for Disease Control and Prevention Prevention, (2022b). *Pfizer-BioNTech COVID-19 Vaccine: Storage and handling summary*. Retrieved from <https://www.cdc.gov/vaccines/covid-19/info-by-product/pfizer/downloads/storage-summary.pdf>
- Centers for Disease Control and Prevention, (2022c). *Moderna COVID-19 Vaccine: Storage and handling summary*. Retrieved from <https://www.cdc.gov/vaccines/covid-19/info-by-product/moderna/downloads/storage-summary.pdf>
- U.S. Food and Drug Administration. (2022, April 18). *Coronavirus (COVID-19) update: FDA authorizes changes to simplify use of bivalent mRNA COVID-19 vaccines*. Retrieved from <https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-authorizes-changes-simplify-use-bivalent-mrna-covid-19-vaccines>

# Medical Reserve Corps of Southern Nevada

Office of Public Health Preparedness

Deborah Moran, Program Coordinator



# Agenda

- About Volunteers
- Medical Reserve Corps
- How Can We Help You
- Implementation



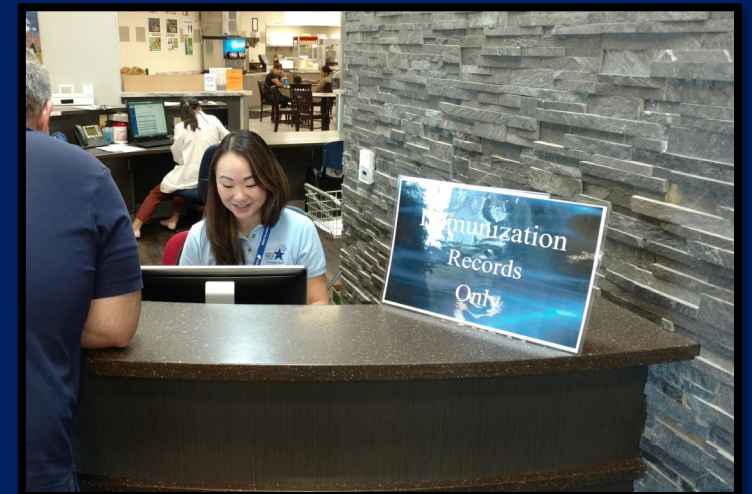
# Why Do People Volunteer

- Make a difference
- For a cause
- Meet people
- Practice their skills/training
- Learn new skills
- Stay active in retirement
- School projects/summer credits
- Get out of the house
- Bored!



# Who Volunteers

- Medical Professionals
  - Physicians
  - Nurses/Practitioners
  - EMTs/Paramedics
  - Lab/Other Technologists, Technicians
- Students
- Working adults
- Retirees (with lots of experience!)
- All are 18+



# Medical Reserve Corps Overview



*A national network of local groups of volunteers engaging local communities to strengthen public health, reduce vulnerability, build resilience, and improve preparedness, response and recovery capabilities.*

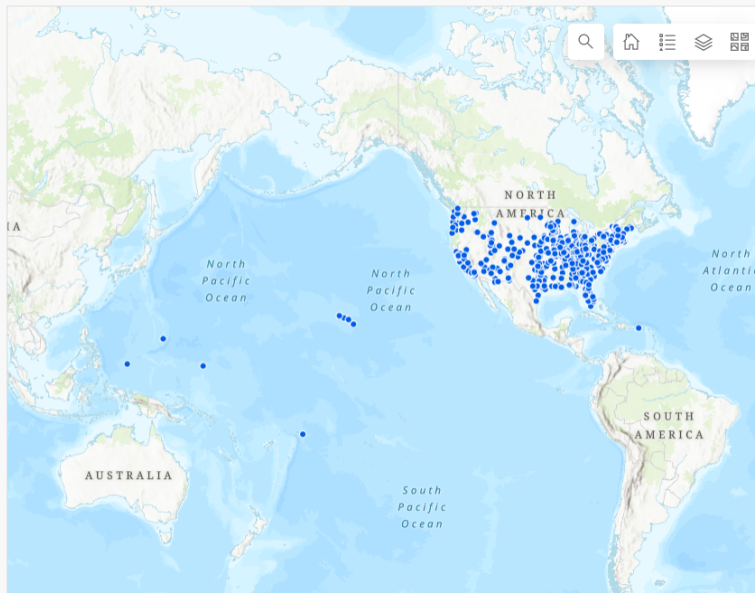
## Number of MRC Units (in current view)

754  
754

### Data Disclaimer

All data displayed are self reported by leadership at each MRC Unit.

To find a local MRC unit near you, utilize the two drop-down menus on the left side of your screen or zoom in on a specific location on the map. Once you locate a unit in your area, click on the blue dot to view detailed unit information, including the MRC unit leader's contact information. If you have selected



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## MRC Unit List

- PROJECT H.E.L.P. USA MRC  
MRC 290, Birmingham, AL
- Twenty First Century Youth MRC  
MRC 1893, Birmingham, AL
- North Alabama Medical Reserve Corps  
MRC 1346, Huntsville, AL
- Calhoun-Cleburne MRC  
MRC 1466, Jacksonville, AL
- Baldwin County Medical Reserve Corps  
MRC 2551, Robertsdale, AL
- Dallas Co. Medical Reserve Unit  
MRC 532, Selma, AL
- Black Belt MRC  
MRC 2727, Tuskegee, AL
- Benton County Medical Reserve Corps  
MRC 2378, Bentonville, AR
- Washington County  
MRC 970, Fayetteville, AR
- Marion County Medical Reserve Corps  
MRC 2406, Flippin, AR
- North Little Rock High School Medpro MRC  
MRC 2340, North Little Rock, AR
- River City Ministry of Pulaski County MRC



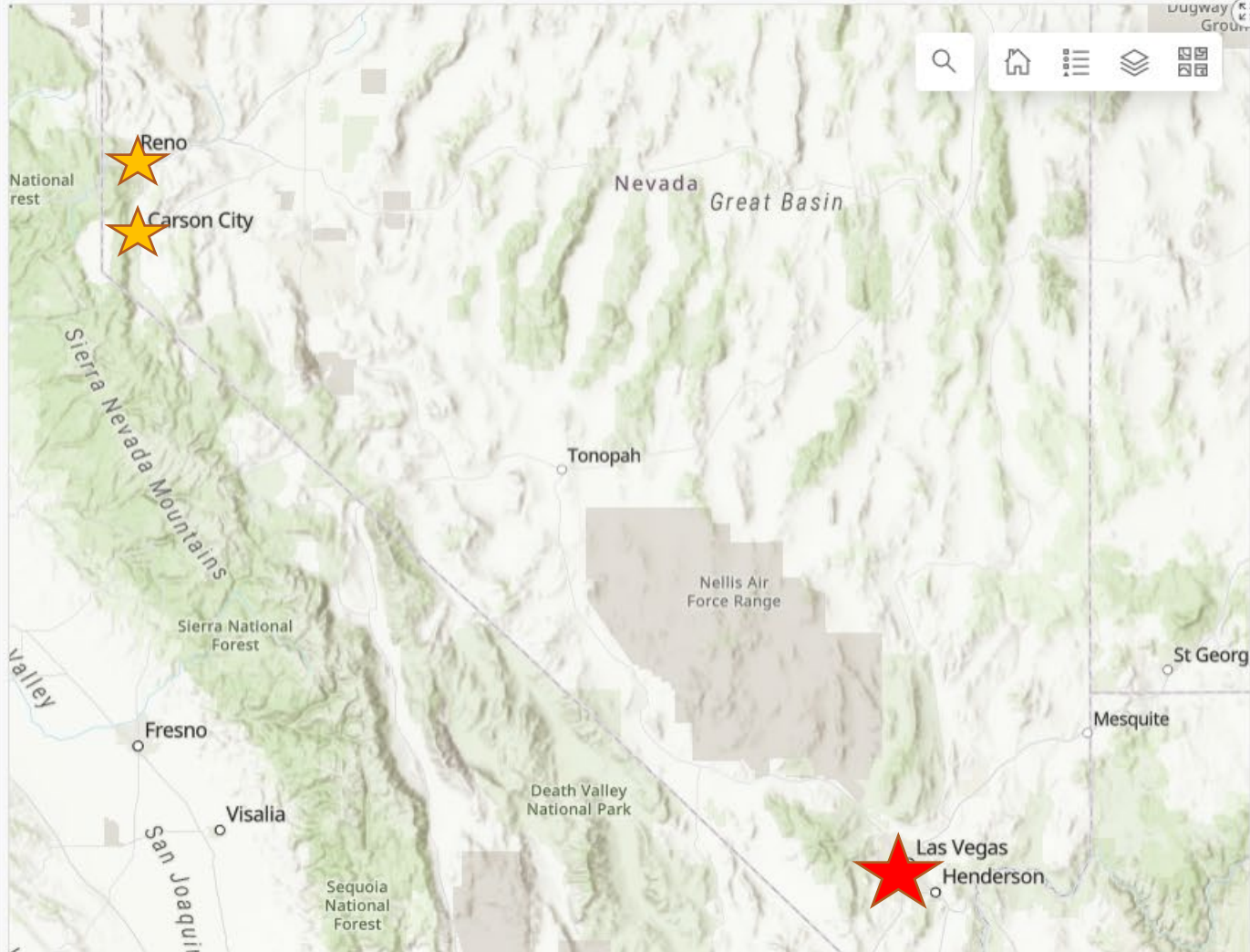
**Number of MRC Units**  
(in current view)

**3**  
**750**

**Data Disclaimer**

All data displayed are self reported by leadership at each MRC Unit.

To find a local MRC unit near you, utilize the two drop-down menus on the left side of your screen or zoom in on a specific location on the map. Once you locate a unit in your area, click on the blue dot to view detailed unit information, including the MRC unit leader's contact information. If you have selected



**MRC Unit List**

**Western Nevada Medical Reserve**

- **Corps**  
MRC 488, Carson City, NV

**Medical Reserve Corps of Southern**

- **Nevada**  
MRC 15, Las Vegas, NV

**MRC Washoe County**

- **MRC 443, Reno, NV**

# SERV-NV System

- SERV-NV umbrella
  - Battle Born Medical Corps
  - Medical Reserve Corps
    - Southern Nevada
    - Western Nevada
    - Washoe County
  - Other Orgs (Mental Health, CERT, etc.)



# Our MRC Unit Composition

- 395 volunteers
- Medical and support volunteers
  - Medical Professionals
  - Mental health Professionals
  - Health Educators
  - EMTs and Paramedics
  - Public Health Professionals
  - Dentists
  - Respiratory Therapists
  - Phlebotomists
  - Veterinarians
  - Support Volunteers
  - Bilingual



# Initial Enrollment

## Volunteers:

- Complete profile at SERV-NV
- Read Standard Operating Guidelines
- Sign and return releases
- Complete ICS 100 and 700 courses at FEMA.gov
- Complete SNHD online training (HIPAA, safety)
- Badge photo

## MRC Coordinator:

- Reviews info
- Verifies credentials
- State background check
- Setup SNHD training
- Adds to email and Emergency Notification System (ENS)
- Accepted in SERV-NV
- Print badge

# Suggested Optional Training

- Psychological First Aid
  - Online <https://learn.nctsn.org/>
  - In-person
- Cultural Competency
  - Multiple formats and course titles
- First Aid
- CPR/BLS
- Stop the Bleed/Until Help Arrives
- Mental Health First Aid
- Suicide Prevention—Safe Talk
- MRC-TRAIN <https://www.train.org/mrc/home>
- Personal preparedness



# Past Emergency Deployments

- I & Q patient care
- Vaccinators (COVID, Flu, Tdap, Hepatitis)
- COVID testing
- Monoclonal Antibody IVs
- Lab assistance (data entry, kit assembly)
- Record auditing (COVID vax)
- ER Tech
- Door screeners
- Call centers (October 1, Hep C outbreak)
- Exercise players/evaluators
- Office help
- Shelter staff
- Veterinary shelter



# Let's Make a Plan

- January 2022 COVID surge
  - Requests for hundreds of volunteers
  - No relationship
  - No process
  - Limited deployment to three hospitals
- Moving forward
- Let's start planning!



# Good Places for Volunteer Service

- Emergency/unexpected/unfunded positions
- Duties that you can describe easily/JIT training
- Techs, patient care
- Lab and other assistants
- Wellness checks/Vitals
- Office help, sorting, filing
- Call centers/patient notification
- Volunteers are NOT a replacement for paid staff





# Plan Ahead

- Plan now for the next surge
- Please include MRC in your surge planning
- What are your requirements?
  - Badging/access
  - Licenses/certifications
  - Training requirements
  - Release forms
- How will we handle each volunteer coming in?
- Who will supervise? Who do they report to?
- Some will recur, but some may be one-off.



# Implementation of Volunteers

- Request through MACC
- Request directly when MACC not open
- Include specifics
  - Licensure
  - Dates, times
  - Contact onsite/report to whom?
  - How many people are needed at once? Pairs ok?
  - Is training required?
  - PPE (yours or ours)
  - Risks we should be aware of
- Best to give as much notice as possible
- Who is the contact at the facility for each shift?
- Where do they sign in and out?

**WWW&H**



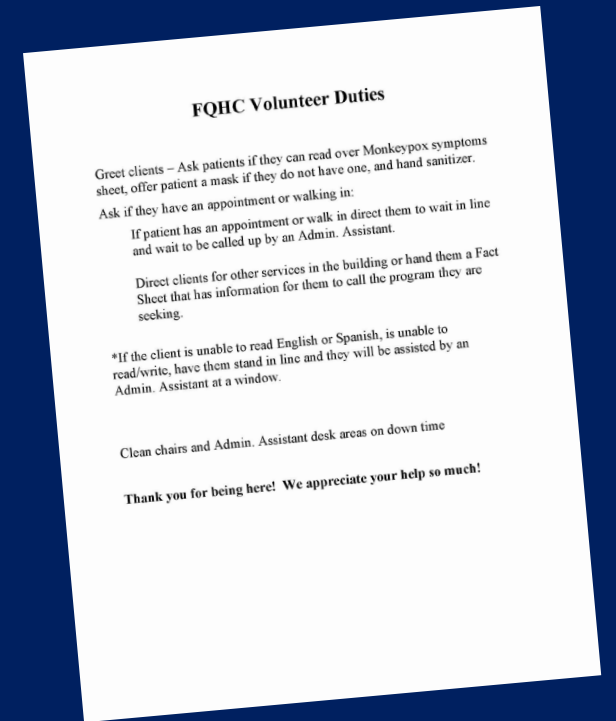
# MRC Coordinator Actions

- Coordinator Contacts Volunteers through:
  - SERV-NV system
  - Email
  - Urgent request - Call-Down system
- Ensures volunteer is qualified
- Sends volunteers location and reporting info
- Notifies requestor of volunteer scheduling
- Follow up with time reporting
- Collect feedback from volunteers and you



# What We Need

- Position description
- Required training
- When and where are they needed?
- Who do they report to?
- Track time/sign-in sheet
- Is there a **mission** (higher purpose, selling points) ?
- Perks (lunch, coffee)?
- Smile!
- Thank You!



# Documentation

- Sign in sheets
- Send email if no sign in sheet
- Hours reported to:
  - Board of Health
  - National MRC program
  - Congress
  - The County and FEMA in an emergency

The image shows three overlapping 'SIGN IN SHEET' forms. Each form is titled 'SIGN IN SHEET' and includes the following information:

- Event: SN/D Immunization Clinic
- Location: SN/D Main
- Address: 200 S. Desatur Blvd
- City: Denver, CO

Each form features a table with the following columns: NAME, SIGNATURE, Date, Time In, and Time Out. The rows are numbered 1 through 10. The forms are slightly offset and overlapping, showing different parts of the table and header information.

# A Few Points

- They are not being paid
- They are here to make a difference
- Time is their gift to us, don't waste it
- A genuine "Thank You" and a smile goes a long way
- Feedback is appreciated, from supervisors and volunteers

Thank you!

Thanks!

*Thank you!*

*Thanks!*

*Thank you!*

*Thanks!*

*Thank you!*

*Thank you!*

# Contact Info

Deborah Moran  
MRC Program Coordinator

702-759-1342 office

702-931-5844 cell

[moran@snhd.org](mailto:moran@snhd.org)

[www.servnv.org](http://www.servnv.org)





# COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA) ROADSHOW

Carmen Hua, MPH, CHES  
Health Educator | CHA/CHIP Coordinator  
Office of Disease Surveillance and Control





# AGENDA

- What is the CHNA
- Purpose, Vision and Goals
- Partnership Process
- Benefits
- 2025 Roadmap
- Hospital Partners
- Become a CHNA Champion





“

**ALONE, WE CAN DO SO  
LITTLE; TOGETHER, WE  
CAN DO SO MUCH**

**- HELEN KELLER**

”

# COMMUNITY HEALTH NEEDS ASSESSMENT

## WHAT IS IT?

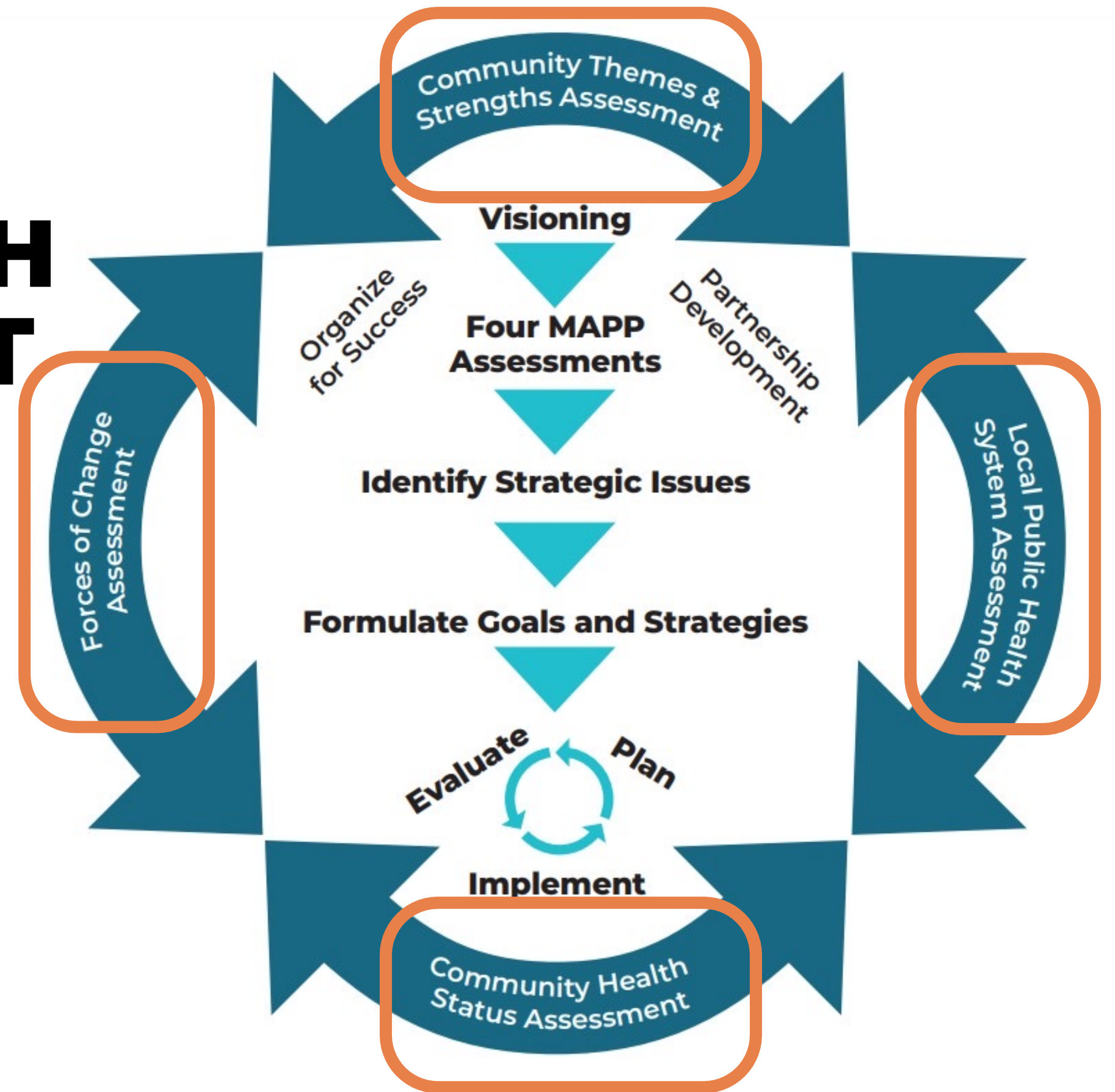
A systematic process involving the community to identify and analyze community health needs.

## WHY IS IT IMPORTANT?

CHNAs will allow hospitals to support patient health and the social determinants of health.

## HOW IS IT USED?

By local hospitals as a process for determining the needs, or "gaps," between a current and desired outcome.





**HEALTHY  
SOUTHERN  
NEVADA**



# **PURPOSE, MISSION, AND VISION**

## **PURPOSE**

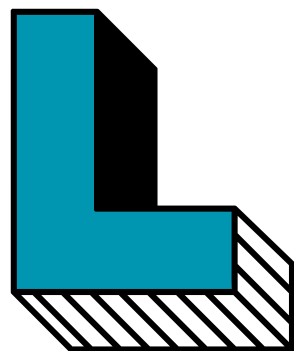
Conjoin community efforts and increase collaboration in projects, programs, and activities occurring in Southern Nevada.

## **MISSION**

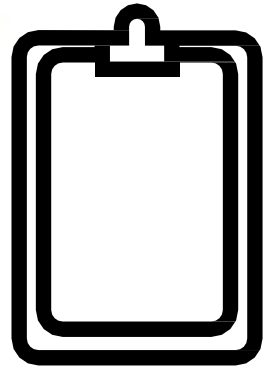
Impact real-time, critical health issues where we live, work, learn, and seek care in Southern Nevada. Empowering communities working together to reach optimal health and quality of life for all.

## **VISION**

Participate in a collaborative approach that identifies community needs, assets, resources, and strategies towards assuring better health and health equity for all Southern Nevada residents.



# CHNA CHAMPION PROCESS



Develop CHNA Survey and Focus Group Questions



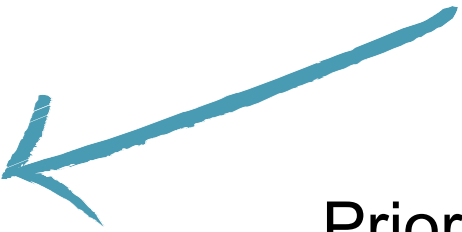
Conduct CHNA Survey and Focus Groups



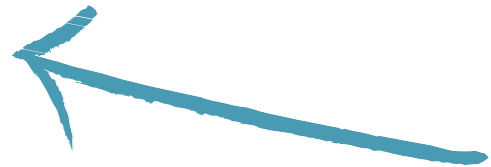
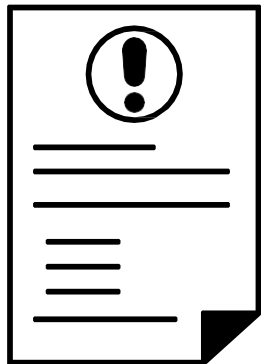
Analyze Data Indicators (Data Report)



Prioritize Health Needs



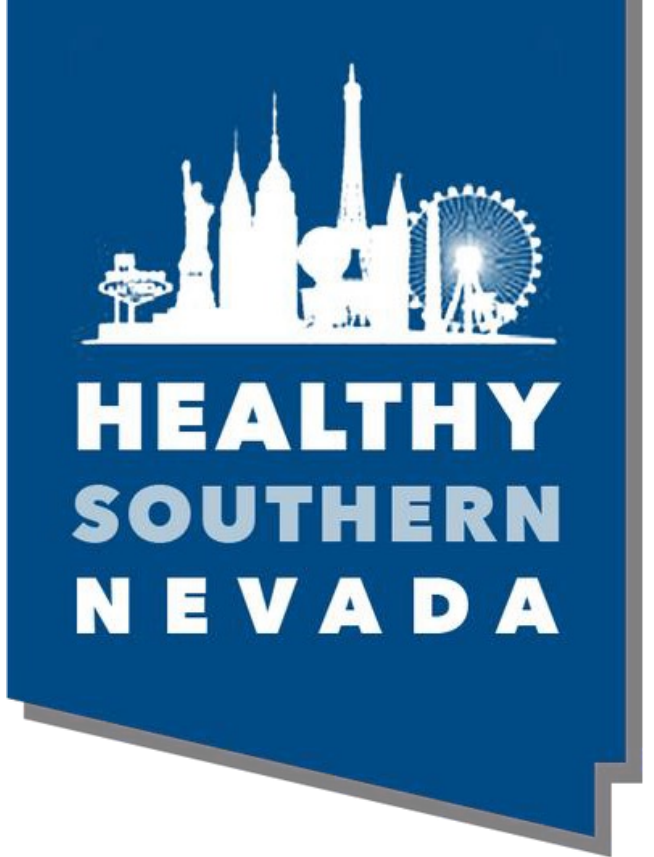
Develop CHNA Report



Create Strategic Plan



# Working Agreement Details

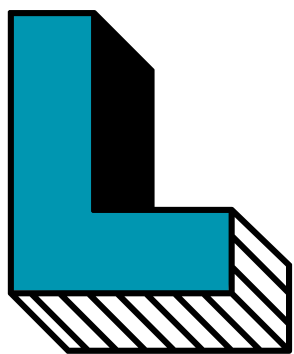


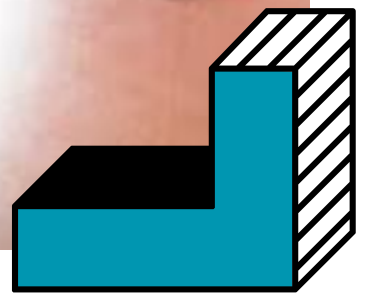
## Memorandum of Agreement (MOA)

- Annual financial contribution to support data collection of the CHNA
- Utilization of the HealthySouthernNevada website population health data
- Access to reports, connection to the network of community partners throughout Southern Nevada, tools, and services

## Engagement

- Time Commitment: 1-hour a week
- Monthly meetings – minimum 1 representative per hospital agency
- Data engagement with populations served (surveys, focus groups, etc.)





# BENEFITS



Help health care systems, public health, and community partners focus available resources to **address the communities' most critical health needs**



**Create** an effective and sustainable CHNA process



**Build stronger relationships** between health care systems and public health



**Identify opportunities** for joint efforts to improve the health and well-being of Clark County



**Eliminate** duplicative efforts

# LEVERAGING COMPREHENSIVE DATA SOURCES



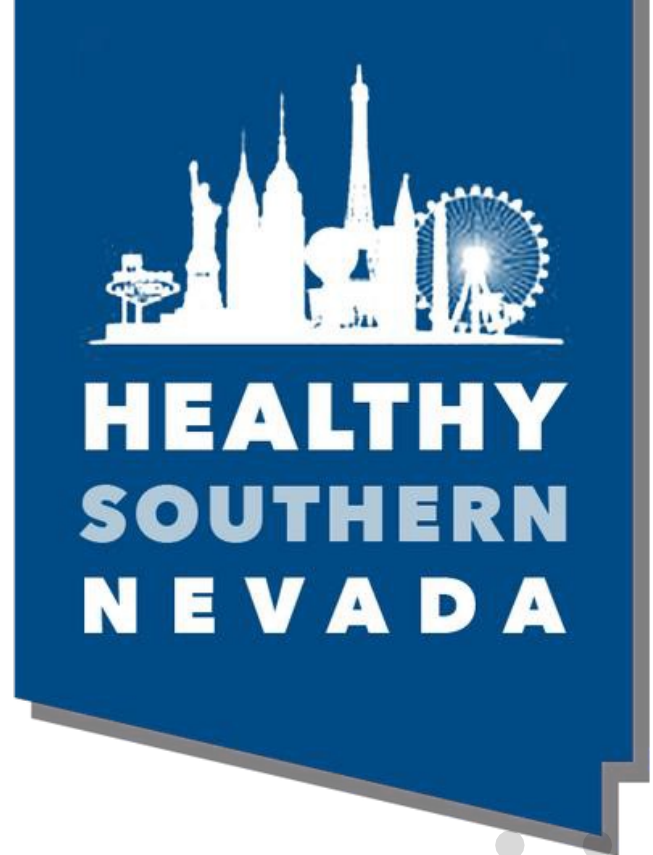
- Community Surveys
- Community Focus Groups
- Health Indicators
- Death Records
- Hospital Discharge
- Emergency Department Visits
- U.S. Census Bureau
- Racial Equity Index
- **And much more!**







# GOALS



## AVAILABILITY

Addressing health needs via reports ensuring it is widely available to the public



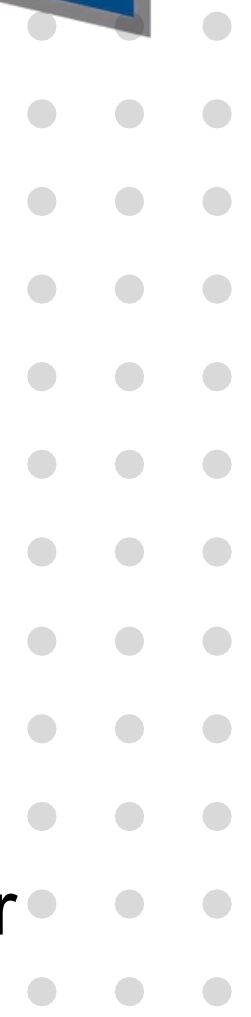
## COMMUNITY

Increase city/town participation for engagement & data collection



## COLLABORATION

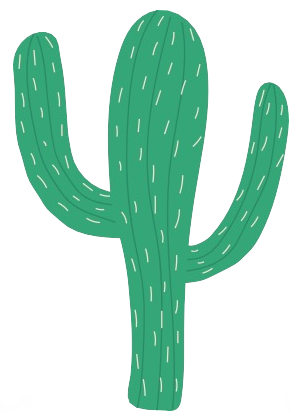
Increase partnerships and build relationships for engagement and outreach



# 2025 CHNA ROADMAP

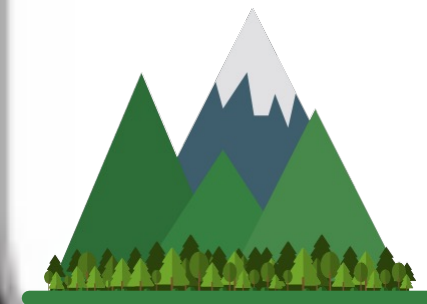
**1 NOVEMBER 2023**  
Official CHNA Cycle Begins

- Establish Steering Committee



**3 APRIL 2023**  
Local Public Health System Assessment

- Focus Groups



**5 OCTOBER 2024**  
Data Analysis and Edits



**2 JANUARY 2024**  
Forces of Change Assessment

- Pilot A Survey

Community Themes & Strengths Assessment

**4 JULY 2023**  
Community Health Status Assessment

- Identify secondary data

**6 MARCH 2025**  
Publish CHNA data reports, profiles, and update data dashboards



# 2022 COMMUNITY HEALTH NEEDS ASSESSMENT



## Dignity Health - St. Rose Dominican Community Health Needs Assessment

Rose de Lima, San Martín, Siena, Blue Diamond,  
North Las Vegas, Sahara, West Flamingo, & Rehab Hospital

May 2022





Southern Nevada  
Community Health Assessment Report  
2020/2021



2022–2025 Southern Nevada  
**Community Health  
Improvement Plan**

HEALTHY  
SOUTHERN  
NEVADA

[www.HealthySouthernNevada.org](http://www.HealthySouthernNevada.org)

# Summary



Increase the amount of hospital facilities as contributing partners



Expand engagement and collaboration in assessing community health needs

# THANK YOU



## BECOME A CHNA CHAMPION TODAY!

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