





Memorandum

Date: July 26, 2018

To: Southern Nevada District Board of Health

From: **Michael Johnson, PhD**, *Director of Community Health* 
Joseph P Iser, MD, DrPH, MSc, *Chief Health Officer* 

Subject: Community Health Division Monthly Report

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

1. Tobacco Control Program (TCP):

Staff is providing ongoing technical assistance and developing materials to support implementation of a tobacco-free higher education campus at UNLV. On May 1, 2018 staff participated in a meeting at the request of the UNLV Student Senate Health Committee Chair to discuss the availability of Nicotine Replacement Therapy (NRT) with the UNLV Student Wellness Center staff. The Wellness Center agreed to provide free nicotine replacement therapy. The UNLV Student Senate Health and Safety committee would not take a vote on the policy unless free, onsite cessation services were offered on the UNLV campus. On May 23rd staff met with the committee and they voted to move the policy forward to the full Senate in June.

The SNHD Get Healthy website contains a page dedicated to the Nevada Tobacco Quitline that is monitored and updated as needed. The Quitline is regularly featured on the website's main page sliders. In May, staff developed two Mother's Day/cessation blog posts for the program's English and Spanish-language websites. Since May 1, the attached a Mother's Day themed cessation slider scrolls across the website. Staff also translated a cessation-related press release on behalf of the State Tobacco Program into Spanish this month.

Staff provided an online presentation to several statewide rural youth tobacco prevention coalitions at the request of Carson City Health and Human Services. The presentation included information on the strategies and theories that serve as the foundation of our successful youth tobacco prevention programs.

2. Chronic Disease Prevention Program (CDPP):

Our annual Soda Free Summer (SFS) Initiative kicked off in May. Our educational efforts are focused on the Hispanic community which typically has higher rates of sugar-sweetened beverage consumption than other population groups. As part of the kick off, staff participated in a live network program on KCTV to talk about SFS. The interview was conducted in Spanish and was viewed by approximately 6,000 people. Educational efforts in May also included a blog and website spotlight. An educational presentation in Spanish is planned for June at the Alliance Against Diabetes Clinic.

A media campaign to promote the Get Healthy website ran in May. The campaign specifically promoted the Half My Plate mobile app and Hypertension awareness. The multi-component campaign consisted of online, Facebook and Las Vegas Review Journal homepage takeover ads.

The Barbershop Health Outreach Program (BSHOP) was highlighted in May with a media campaign that included bus stop shelter, print, radio and Facebook ads. Staff also participated in a live interview on the Black Image radio program on KCEP. In addition, an earned media article in the Las Vegas Sun newspaper ran in May. During the month, 32 people were screened for hypertension and provided education, information and referral as appropriate as part of the program.

During late April and throughout May, staff developed 5 workplans, budgets and accompanying narrative for inclusion into 5 federal grants the State Division of Public and Behavioral Health submitted including an Arthritis grant, CDC 1807, 1815, and 1817 grants and a continuation workplan and budget for the PHHS block grant. In total, the budget request in these proposals equaled \$647,000. Most applications were 5-year grants. If funded, we will be notified in September and work would begin in October 2018.

3. Injury Prevention Program (IPP):

In May, staff trained 21 parents in the Family to Family Connection program on lead poisoning prevention and a lead article was included in the Family to Family e-newsletter (circulation of approximately 2,000 people). Staff also participated in a Cinco de May event organized by Metro's North-East Command at Sunrise Community Center. Over 325 people participated in the event and educational materials in English and Spanish were distributed. Staff also participated in a live interview on the KCTV network program to talk about lead. Approximately 6,000 people watched the program over the internet.

The drowning prevention media campaign continued in May. SNHD coordinates the campaign for the Southern Nevada Child Drowning Prevention Coalition and solicits sponsorships from community partners to support the campaign. Over \$24,000 in sponsorship money has been received to date to support the campaign. The campaign includes television, radio and online ads. In May, a water safety blog was posted in Spanish on our Viva Saludable blog and over 2,000 educational materials have been distributed in the community.

II. OFFICE OF EPIDEMIOLOGY AND DISEASE SURVEILLANCE (OEDS)

1. Surveillance and Investigations:

Community Health -- OEDS -- Fiscal Year Data

Morbidity Surveillance	June 2017	June 2018		FY16-17 (Jul- June)	FY17-18 (Jul- June)	
Chlamydia	959	1,115	↑	12,321	13,183	↑
Gonorrhea	380	418	↑	4,189	4,975	↑
Primary Syphilis	12	14	↑	140	191	↑
Secondary Syphilis	20	16	↓	305	358	↑
Early Non-Primary, Non-Secondary¹	39	25	↓	392	437	↑
Syphilis Unknown Duration or Late²	37	31	↓	425	575	↑

Congenital Syphilis (presumptive)

New Active TB Cases Counted - Pediatric
Number of TB Active Cases Counted - Adult

1	4	↑	15	20	↑
1	0	↓	4	1	↓
3	4	↑	45	69	↑

1 Early Non-Primary, Non-primary, Non-Secondary=CDC changed the case definition from early Latent Syphilis to Early Non-Primary, Non-Secondary

2 Syphilis Unknown Duration or Late=CDC changed the case definition from Late Latent Syphilis to Syphilis Unknown Duration or Late

Community Health -- OEDS -- Fiscal Year Data

	June 2017	June 2018		FY16-17 (Jul-June)	FY17-18 (Jul-June)	
Moms and Babies Surveillance						
HIV Pregnant Cases	3	4	↑	37	44	↑
Syphilis Pregnant Cases	8	7	↓	83	105	↑
Perinatally Exposed to HIV	0	3	↑	32	36	↑

Community Health -- OEDS -- Monthly Data

Monthly DIIS Investigations CT/GC/Syphilis/HIV	Contacts	Clusters ¹	Reactors/ Symptomatic/ X-ray ²	OOJ /FUP ³
Chlamydia	55	0	36	0
Gonorrhea	31	2	18	0
Syphilis	97	4	82	8
HIV/AIDS (New to Care/Returning to Care)	23	0	52	23
Tuberculosis	21	0	39	1
TOTAL	227	6	227	32

2. Prevention-Community Outreach/Provider Outreach and Education:

National HIV Testing Day, June 27

Doing it My Way – getting tested for HIV

National HIV Testing Day was launched in 1995 by the National Association of People with AIDS in response to increasing numbers of people with HIV in communities of color and other heavily impacted communities. This year's theme, part of the Act Against AIDS initiative, is *Doing it. Testing for HIV*. The CDC campaign is designed to encourage all adults to get tested and to learn their HIV status. *Doing it. Testing for HIV* is also encouraging people to post their stories on social media using the hashtag #DoingIt to share the reasons why they are getting tested.

1 Clusters= Investigations initiated on named clusters (clusters= named contacts who are not sex or needle sharing partners to the index patient)

2 Reactors/Symptomatic/X-Ray= Investigations initiated from positive labs, reported symptoms or chest X-Ray referrals

3 OOJ= Investigations initiated Out of Jurisdiction reactors/partners/clusters; FUP= Investigations initiated to follow up on previous reactors, partners, or clusters

OEDS participated in -

A. High Impact Screening Sites (HIV, STD, Hepatitis):

- a. Mondays – Thursdays: The Center - LGBTQ Community of Nevada – Rapid HIV and Syphilis testing - Target population - MSM, transgender.
- b. Wednesdays - Trac-B Exchange - Rapid HIV and Hepatitis C testing-target population IDU.
- c. 6/25 - SNHD, HELP of Southern Nevada, AIDS Healthcare Foundation, Trac-B Exchange Collaborative outreach was offered in the Tunnels - Rapid HIV, HEP C - Target population – homeless, IDU.
- d. 6/27 – Testing at SNHD in the SNHD Mobile Unit for National HIV Testing Day.

B. Staff Facilitated/Attended Training/Presentations

- a. 6/5 - QFT Training by SNPHL personnel. Approximately 20 SNHD staff were present.
- b. 6/6 - Presentation for New Leadership Nevada. Approximately 25 participants in attendance and 1 SNHD staff.
- c. 6/7 - CDC Site Visit to Discuss history and community efforts in harm reduction. 3 SNHD personnel were present.
- d. 6/7-6/8 - Annual Convening for AIDS United's "Dissemination of Evidence-Informed Intervention" grant funded sites in Washington DC. This was an opportunity for the SNHD jail team to receive training for the Transitional Care Coordination Intervention being conducted at Clark County Detention Center. Four SNHD staff attended.
- e. 6/10-6/14 – 2018 Council of State and Territorial Epidemiologists (CSTE) Annual Conference in West Palm Beach, Florida. Three SNHD Epidemiologists received full external sponsorships to attend and gave the following oral presentations: "Using Syndromic Surveillance to Monitor Injury and Alcohol-Related Emergency Department Visits among Visitors to Las Vegas, NV," "Age or Experience Matters? Effectiveness of a CrossFit Based Functional Fitness Program in School Settings," and "*Francisella Tularensis* Transmitted through Solid Organ Transplantation- Environmental Investigation and Follow-up Preventive Measures."
- f. 6/12 - Harm Reduction Train the Trainer. 4 participants from Center from Behavioral Health and SNHD and 2 SNHD trainers were present.
- g. 6/13-6/15 – APIC Annual Conference 2018: Hosted by the Association for Professionals in Infection Control and Epidemiology (APIC). One SNHD staff attended.
- h. 6/15 – OEDS and SNPHL received notification from CDC that we successfully passed the CDC's Poxvirus LRN proficiency testing. We correctly identified the risk groups for 3 scenarios and suggested the correct tests and notifications.
- i. 6/19 – SNHD co-hosted a CDC site visit with UNLV for the Nevada Childhood Lead Poisoning Prevention Program (NvCLPPP). In attendance, were staff from MCM, EH, OEDS, and OCDPHP. From OEDS, Matthew Kappel and Arturo

Mehretu reviewed SNHD's part in the NvCLPPP regarding surveillance. The CDC site visit was a success.

- j. 6/21 – SNHD hosted its 4th community roundtable event for the Transitional Care Coordination jail project- Updated community partners on lessons learned, challenges, and successes, and initiated new MOUs. About 35 people attended, including 4 OEDS staff and 5 Clinical Services staff.
- k. 6/25 - Presentation for Harm Reduction and Overdose Prevention for LVMPD, Las Vegas. Approximately 16 and 2 SNHD staff were present.
- l. 6/26 - Presentation HIV/STI 101 for Rape Crisis Center Las Vegas. Approximately 15 advocates in training and 1 staff were in attendance.
- m. 6/26 - 1 Staff traveled with Nevada Division of Public and Behavioral Health to Northern Nevada to speak with community gatekeepers regarding Syringe Access Vending Machines in rural Nevada communities.

Community Health -- OEDS -- Fiscal Year Data

	June 2017	June 2018		FY16-17 (Jul- June)	FY17-18 (Jul- June)	
Prevention - SNHD HIV Testing						
Outreach/Targeted Testing	733	326	↓	8,116	8,952	↑
Clinic Screening (SHC/FPC/TB)	798	467	↓	9,463	8,002	↓
Outreach Screening (Jails, SAPTA)	149	37	↓	1,793	1,512	↓
TOTAL	1,680	830	↓	19,372	18,466	↓
Outreach/Targeted Testing POSITIVE				86	92	↑
Clinic Screening (SHC/FPC/TB) POSITIVE				98	71	↓
Outreach Screening (Jails, SAPTA) POSITIVE				30	24	↓
TOTAL POSITIVES				214	187	↓

3. Disease and Outbreak Investigations

A. Disease reports and updates:

- a. **Global Zika Virus Outbreak:** Vector borne transmission is occurring in 84 countries and territories. Current travel information about Zika virus spread is at <http://wwwnc.cdc.gov/travel/page/zika-travel-information>. There have been 20 Zika virus disease cases reported with illness onset in 2018 in the U.S; all were travelers returning from affected areas. There have been 62 cases of Zika virus disease reported in U.S. territories. The CDC has updated their guidance for healthcare providers and the public regarding sexual transmission as well as screening and testing for exposed pregnant females. The OEDS has posted the CDC's algorithms to the SNHD website and sent out a HAN notice to providers informing them of the changes to testing recommendations. To date in 2018, the OEDS has arranged testing for 6 individuals with possible exposure to Zika virus. We continue to develop Zika virus investigation protocols and procedures for identification and testing individuals for Zika virus infection. We have developed a one-hour presentation for health care providers about Zika virus as updates come from the CDC. The presentation has been approved for one hour of AMA Category 1CME and is offered online through our website located at

<https://www.southernnevadahealthdistrict.org/health-care-providers/training.php>.

- b. **Arbovirus Update:** Mosquito surveillance has just begun in Clark County. To date, no positive mosquitoes or humans have been identified.
- c. **Influenza:** Influenza surveillance for the 2017-2018 influenza season officially began on October 1, 2017 and ended on May 19, 2018. Throughout the flu season, based on a variety of data sources, the Southern Nevada Health District (SNHD) provided weekly influenza snapshots to give the community the most complete and up to date view of influenza activity in Clark County, Nevada. In summary, Influenza activity increased in mid-December 2017 and peaked in the period of December 24, 2017 - January 13, 2018. Season totals include 1,348 confirmed cases, 980 hospitalizations and 62 deaths including 3 deaths of children under age 18 attributed to influenza. SNHD will continue to monitor the influenza activity in Clark County and encourage influenza vaccination for all persons 6 months of age and older when the vaccine for 2018 – 2019 season is available.
- d. **Salmonella Investigation:** OEDS is investigating 8 salmonella cases that have been identified as matching either local or national clusters. Interviews are being conducted, place of exposure, and sources for infection have not been identified, but these investigations are ongoing.
- e. **Norovirus Investigation:** OEDS investigated a gastrointestinal illness outbreak associated with a daycare. OEDS worked in collaboration with EH and a site visit was conducted. A total of 21 people was reported to be ill and two laboratory specimens were preliminary positive for norovirus. Additional laboratory samples are still pending test results, but no further illness has been reported. This investigation is ongoing.

B. Other:

- a. OEDS welcomes three new DIIS: Rafael DeSantos, Brandon Carmon, and Tabby Eddleman.
- b. Kathryn Barker, Epidemiologist, is the Chair-Elect of the Statewide Epidemiology Workgroup, through the Nevada DPBH Substance Use and Prevention Agency.

- C. Communicable Disease Statistics:** May and Quarter 12018 disease statistics are attached. (see table 1 & 2)

III. OFFICE OF PUBLIC HEALTH INFORMATICS (OPHI)

- 1. Work continues on the new Southern Nevada Public Health Laboratory (SNPHL) Laboratory Information Management System (LIMS) system to interoperate with other internal and external systems. Informatics is also assisting with the changes that need to be made to the LIMS to accommodate new instruments and testing offered by the Clinical Laboratory.
- 2. Assisting SNPHL with data extraction and reporting needed for the laboratory.
- 3. Migrations to the new SFTP server continue.
- 4. Assisting with the implementation of the Electronic Health Record (EHR) system.
- 5. Assisting the Office of Epidemiology and Disease Surveillance (OEDS), Office of EMS/Trauma System, and Clinical Services with various data requests, data exports, and report generation.
- 6. Assisting the Office of Emergency Medical Services and Trauma Systems with EMS data acquisition.

7. Work continues on the iCircle web application for OEDS, and transmission of HIV testing data to CDC.
8. Worked with the State to migrate Mirth channels to a new State SFTP server for ELR exchange and data submission.
9. Signed a data use agreement (DUA) with the CDC to access Healthcare-associated infections (HAIs) Data.
10. Continue to enhance Trisano and Electronic Message Staging Area (EMSA) Systems.
11. We are working with the State to migrate STD data into the State NEDSS Base System (NBS).
12. Continue to enhance Trisano disease surveillance system.
13. Working on a new grant for HAI/CP-CRE surveillance.
14. Developed software application and worked with the CDC for Syringe Exchange Vending Machine project.
15. Received a grant from the State CMS to implement electronic case reporting (eCR).
16. Attended the 2018 CSTE annual conference and presented opioid overdose dashboard project at the conference.
17. Hired a new public health Informatics scientist and the new member will be on board on 7/9/2018.

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

1. June Meetings:

A. Drug/Device/Protocol Committee (DPP)

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

The Committee continued its annual review of the Emergency Medical Care Protocols.

B. Medical Advisory Board (MAB)

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

The Committee discussed facility destination criteria as well as a new pilot program for alternate destinations for mental health patients.

C. Regional Trauma Advisory Board (RTAB)

The RTAB is an advisory board with the primary purpose of supporting the Health Officer's role to ensure a high-quality system of patient care for the victims of trauma within Clark County and the surrounding areas by making recommendations and assisting in the ongoing design, operation, an evaluation of the system from initial patient access to definitive patient care.

The Board discussed and voted on new members to fill the following expiring seats on 7/1/18: 1) General Public; 2) Health Education and Prevention Services; 3)

Legislative/Advocacy; 4) Payers of Medical Benefits for Victims of Trauma; and 5) Public Relations/Media.

The Board approved the applications submitted by UMC for reauthorization as a Level I Trauma Center and Level II Pediatric Trauma Center; and St. Rose Siena for reauthorization as a Level III Trauma Center.

The Board approved the Data Dictionary developed by the Trauma Needs Assessment Taskforce related to the development of standardized measures for assessing the needs of the Trauma System.

COMMUNITY HEALTH – OEMSTS - Fiscal Year Data

				FY16- 17 (July- June)	FY17- 18 (July- June)	
EMS Statistics	June 2017	June 2018				
Total certificates issued	21	32	↑	2,100	1,695	↓
New licenses issued	29	33	↑	385	424	↑
Renewal licenses issued (recert only)	0	0	→	1,715	1,085	↓
Active Certifications: EMT	539	601	↑			
Active Certifications: Advanced EMT	1295	1417	↑			
Active Certifications: Paramedic	1260	1293	↑			
Active Certifications: RN	35	38	↑			

V. OFFICE OF PUBLIC HEALTH PREPAREDNESS (OPHP)

1. Planning and Preparedness:

- A. SNHD and Southern Nevada Counter Terrorism Center was awarded the NACCHO National Health Security Award for our unique partnership in sharing intelligence information to keep Clark County safe.
- B. OPHP attended the Las Vegas Corporate Security Symposium providing a networking opportunity for public health emergency planning in the region.
- C. OPHP Sr. Planner was invited to the 2018 Public Health and Healthcare Coalition Preparedness Summit in Illinois as Keynote Speaker for the conference. The subject was the mass shooting in Las Vegas on 01 OCT 2017. Members of the CDC, public health, healthcare, EMS, State and Local governmental officials were in attendance.
- D. OPHP was invited to speak at the MESH Coalition Grand Rounds in Indianapolis, Indiana along with members from Eskenazi Health and community partners on the mass shooting in Las Vegas on 01 OCT 2017. Presentations were provided at Eskenazi Health in Indianapolis, Columbus Regional Health in Columbus, Indiana, and Community Howard Regional Health in Kokomo, Indiana providing information to over 250 healthcare and community partners of the MESH team.
- E. OPHP initiated, executed, and completed the Healthcare Coalition Surge Test mandated by the Assistant Secretary for Preparedness and Response (ASPR). Participant hospitals were Desert Springs, Henderson, and Mountain's Edge Hospitals.

- F. OPHP staff met with Thomas and Mack representatives to discuss public Point of Dispensing planning.
- G. OPHP continues to conduct the monthly Incident Command Team, Directors, Managers and Supervisors call-down notifications. Call-down drills are deliverables required by CRI grant to ensure public health staff readiness to respond to a disaster. This monthly test of the system ensures that District staff contact information is current in the event a notification to all SNHD staff is needed to be able to respond to public health threat.
- H. OPHP was invited to meet with Advanced Healthcare Home Health and Sage Creek Rehab to discuss Center for Medicare & Medicaid Services Emergency Preparedness Conditions of Participation, the Emergency Operations Plan and policies to support the plan.
- I. OPHP staff continues to participate in the monthly Southern Nevada Healthcare Preparedness Coalition, Homeland Security Urban Area Security Initiative, Local Emergency Preparedness Committee, Southern Nevada Adult Mental Health Coalition and individual hospital emergency management committee meetings. The Ebola and Zika preparedness planning and grant deliverable activities remain a priority.
- J. OPHP staff continues to participate in Accreditation activities and Domain working groups to support SNHD.

2. PHP Training and PH Workforce Development:

- A. OPHP Education and Training: OPHP Training Officers continue to conduct new employee Emergency Preparedness Training, Intro to OPHP departmental presentations, co-instruct Regional Decon Training for SNHPC partners, conduct CPR and First Aid courses at the Health District; conduct Dr. Bluebird training as well as monitor SNHD staff compliance with completion of required ICS courses.

3. **Employee Health Nurse:** 25 staff received respirator fit testing; 21 received annual TB testing; 14 staff received vaccinations and performed three Bloodborne Pathogens classroom trainings.

4. Grants and Administration:

- A. OPHP continues to manage cooperative agreements including BP5 No Cost Extension deliverables needing to be completed by June 2018. SNHD has received the new cooperative agreements for BP1 that began July 1st. OPHP continues to meet with State of Nevada Division of Public Health on collaborative, statewide activities, including opportunities for future collaboration and solutions to funding needs.

5. Medical Reserve Corps of Southern Nevada (MRC of So NV):

- A. Three volunteers worked at the SNHD Main and East immunization clinics and SNHD Main Foodhandler Safety office. Three volunteers assisted SNHD with antibiotic packaging for the first-responder emergency stockpile and one volunteer performed blood pressure screening and referrals. Volunteer hours total 105 with a monetary value of \$2,689.68. The MRC Coordinator contacted CERT and Las Vegas Metropolitan Police Department Volunteer programs and Roseman University students to invite them to collaborate on the antibiotic packaging for the first-responder emergency stockpile. Those non-MRC volunteers totaled 141.75 hours (\$3,499.81) for June.

- B. The MRC Coordinator evaluated the State's Volunteer Reception Center exercise in Carson City, attended VA flu exercise planning meeting, the Southern Nevada Healthcare Coalition meeting, recruited and processed new volunteers, planned volunteer activities for the coming months, and sent the monthly newsletter and bulletins.

6. OPHP CDC ASSOCIATE:

- A. Compiled a directory of organizations that serve at-risk populations.
- B. Preparing a Community Assessment for Public Health Emergency Response (CASPER) relating to extreme heat. To be completed September 2018.

VI. SOUTHERN NEVADA PUBLIC HEALTH LABORATORY (SNPHL)

- 1. **Clinical Testing:** SNPHL continues to support the SNHD Nursing Division with Sexually Transmitted Disease (STD) testing. SNHD STD department and SNPHL cooperatively participate in the CDC Gonococcal Isolate Surveillance Project (GISP). SNPHL performs *N. gonorrhoeae* culture and submits isolates to CDC and Nursing provides the client information required by the project. In October 2015, SNPHL began performing *C. trachomatis/N. gonorrhoeae* (CT/GC) molecular testing to support SNHD clinical programs.
- 2. **Epidemiological Testing and Consultation:**
 - A. SNPHL continues to support the disease investigation activities of the SNHD OEDS and Nursing Division.
 - B. SNPHL continues to participate in the SNHD Outbreak Investigation Committee and Foodborne Illness Taskforce (FIT).
 - C. SNPHL continues to report results of influenza testing to the CDC National Respiratory and Enteric Virus Surveillance System (NREVSS).
- 3. **State Branch Public Health Laboratory Testing:**
 - A. SNPHL continues to perform reportable disease isolate testing and confirmation. Isolates submitted by local laboratories are serotyped or confirmed; stored on-site; and results reported and/or samples submitted to CDC through various national programs including Public Health Laboratory Information System (PHLIS), National Antimicrobial Resistance Monitoring System (NARMS) and Influenza Surveillance.
 - B. SNPHL continues to perform CDC Laboratory Response Network (LRN) testing for biological agents on clinical and unknown environmental samples.
 - C. SNPHL continues to perform Pulsed Field Gel Electrophoresis (PFGE) testing of *Salmonella*, *Shigella*, *Listeria*, and Shiga toxin producing *E. coli* (STEC) isolates submitted by local clinical laboratories. SNPHL reports the PFGE data to the CDC PulseNet program and to the SNHD OEDS.
 - D. SNPHL provides courier services to SNHD public health centers and Southern Nevada hospital or commercial laboratories.
- 4. **All-Hazards Preparedness:**
 - A. SNPHL continues to participate with SNHD OPHP, local First Responders and sentinel laboratories to ensure support for response to possible biological or chemical agents.
 - B. SNPHL staff continues to receive training on Laboratory Response Network (LRN) protocols for biological agent confirmation.

- C. SNPHL maintains sufficient technical laboratory staff competent to perform LRN testing 24 hours per day/7 days per week.
- D. SNPHL continues to coordinate with First Responders including local Civil Support Team (CST), HazMat, Federal Bureau of Investigation (FBI), and Las Vegas Metropolitan Police Department (LVMPD).
- E. SNPHL continues to provide information to local laboratorians on packaging and shipping infectious substances and chain of custody procedures.

5. June 2018 SNPHLS Activity Highlights:

- A. The Public Health Laboratory continues rearrangement and reorganization to prepare work areas to accommodate sequencing and forensic culture services.
- B. Organization of the first floor warehouse area is near completion. An arrangement for access and storage by OPHP and Health Education has been developed.
- C. Laboratory staff have received 22 hours of training this month.
- D. Clinical Lab has begun new testing services for TB with an advanced test QFT that is more sensitive for children and immunocompromised patients.
- E. The SNPHL continues services for mosquito arboviruses for the Environmental Health Division.
- F. Plans have begun for renovation and remodeling of the Clinical Laboratory area in the Decatur building. Laboratory services have been discussed with the Clinical Services Division and an implementation plan has been developed. Lab assistant starts work on July 9.
- G. BioRad Bio-Plex instrument System was received and installed in the Clinical Laboratory. Staff received 40 hours of training provided by BioRad in-house. RPR and Syphilis tests have been validated and have been inspected and approved by the State.
- H. SNPHL continues to provide testing services to the Clark County Coroner's office in a fee-for- service arrangement. A fee schedule has been developed.
- I. Hazmat staff from Las Vegas Fire and Rescue was given training and a tour of the SNPHL. Forty staff from Las Vegas Fire and Rescue participated.
- J. SNPHL staff has received training from Illumina on the performance of sequencing.
- K. CSN Students were given a presentation on the SNHD Laboratory System.
- L. The CDC Select Agent Inspection of the BSL3 Lab was completed successfully.

COMMUNITY HEALTH - SNPHL – Fiscal Year Data

SNPHL Services	June 2017	June 2018		FY 17-18 (July-June)	FY18-19(July-June)	
Clinical Testing Services ¹	4,504	4,090	↓	65,718	50,553	↓
Epidemiology Services ²	1,371	331	↓	8,429	3,474	↓
State Branch Public Health Laboratory Services ³	61	20	↓	1,920	503	↓
All-Hazards Preparedness Services ⁴	13	99	↑	189	966	↑
Environmental Health Services ⁵	N/A	566	↑	N/A	1,012	↑

VII. VITAL STATISTICS

June 2018 showed a 3% decrease in birth certificate sales in comparison to June 2017. Death certificate sales showed a 1.6% increase for the same time frame. SNHD received revenues of \$46,527 for birth registrations, \$22,883 for death registrations; and an additional \$3,687 in miscellaneous fees for the month of June.

COMMUNITY HEALTH Vital Statistics Program – Fiscal Year Data

Vital Statistics Services	June 2017	June 2018		FY16-17 (July-June)	FY17-18 (July-June)	
Births Registered	2,355	2150	↓	27918	26928	↓
Deaths Registered	1538	1475	↑	17425	18173	↑

Vital Statistics Services	June 2017	June 2018		FY15-16 (July-June)	FY16-17 (July-June)	
Birth Certificates Sold (walk-in)	3,565	3,321	↓	39,687	39,374	↓
Birth Certificates Mail	145	142	↓	1,664	1,737	↑
Birth Certificates Online Orders	1,062	1,128	↑	12,883	12,429	↓
Birth Certificates Billed	93	117	↑	1,328	1,254	↓
Birth Certificates Number of Total Sales	4,865	4,708	↓	55,562	54,794	↓
Death Certificates Sold (walk-in)	1,513	1,258	↓	17,973	14,267	↓
Death Certificates Mail	92	66	↓	1,190	978	↓
Death Certificates Online Orders	5,833	6,208	↑	65,868	73,428	↑
Death Certificates Billed	6	31	↑	204	307	↑
Death Certificates Number of Total Sales	7,444	7,563	↑	85,235	88,980	↑

1 Includes N. Gonorrhoeae culture, GISP isolates, Syphilis, HIV, Gram stain testing.

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

3 Includes PFGE and LRN testing, proficiency samples, reporting to CDC, courier services, infectious substance shipments, teleconferences, trainings, presentations and inspections, samples submitted to CDC or other laboratories.

4 Includes Preparedness training, BSL-3 maintenance and repair, teleconferences, Inspections.

5 Includes mosquito sample testing for arboviruses.

Vital Statistics Sales by Source	June 2017	June 2018		FY16- 17 (July- June)	FY17-18 (July- June)	
Birth Certificates Sold Decatur (walk-in)	73.3%	70.5%	↓	71.4%	71.9%	↑
Birth Certificates Mail	3%	3%	→	3%	3.2%	↓
Birth Certificates Online Orders	21.8%	24%	↑	23.2%	22.7%	↓
Birth Certificates Billed	1.9%	2.5%	↑	2.4%	2.3%	↓
Death Certificates Sold Decatur (walk-in)	20.3%	16.6%	↓	21.1%	16%	↓
Death Certificates Mail	1.1%	.9%	↓	1.4%	1.1%	↓
Death Certificates Online Orders	78.4%	82.1%	↑	77.3%	82.5%	↑
Death Certificates Billed	.1%	.4%	↑	.2%	.3%	↑

Revenue	June 2017	June 2018		FY16-17 (Jul-June)	FY17-18 (Jul-June)	
Birth Certificates (\$20)	\$97,300	\$94,160	↓	\$1,111,240	\$1,095,880	↓
Death Certificates (\$20)	\$148,880	\$151,260	↑	\$1,704,700	\$1,779,600	↑
Births Registrations (\$13)	\$50,414	\$46,527	↓	\$584,509	\$562,675	↓
Deaths Registrations (\$13)	\$22,321	\$22,883	↑	\$259,500	\$272,184	↑
Miscellaneous	\$4,077	\$3,687	↓	\$44,506	\$44,925	↑
Total Vital Records Revenue	\$322,992	\$318,517	↓	\$3,704,455	\$3,755,264	↑

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