

**WASHOE COUNTY
HEALTH DISTRICT**
ENHANCING QUALITY OF LIFE

August 21, 2017

To: State Board of Health Members
From: Kevin Dick
Washoe County District Health Officer
Subject: September 2017 Washoe County District Health Officer Report

West Nile Virus/Mosquito Abatement

As of August 17, 2017, through the ongoing surveillance activities of the Washoe County Health District Vector Borne Disease Program, over 60 mosquito collections have tested positive for West Nile Virus WNV in a geographical area that ranges from Gerlach to Washoe Lake. In addition to human cases avian and equine WNV have also been identified in the County. Although only three cases of WNV have been reported as of August 17, ten (10) cases of viral meningitis have been reported this year. This represents a 100% increase in comparison to cases reported in the same time period during the past five years. These cases are male, young, and generally healthy. The CD Program highly suspects that some previously diagnosed viral meningitis cases might have WNV disease. The CD Program continues using the Epi-News to provide education for healthcare providers and to encourage that they consider WNV in their differential diagnoses.

The Board of County Commissioners approved transfer of over \$745,000 of FY 17 and FY 18 contingency funds to the Health District to provide mosquito abatement to the extensive acreage with standing water due to our record-breaking precipitation. Helicopter applications of larvicide were applied on June 14/15, July 12/13, and August 17/18. Fogging with adulticide was conducted in localized areas in response to positive mosquito pools and cases.

Water System Regulation

The Health District continues to work with our local jurisdictions, TMWA, and NDEP to address Water System Plan review requirements in an effort to facilitate submittal of plans that meet Nevada Administrative Code requirements and interagency coordination in plan review to enable plans to be approved for construction in a timely manner.

Immunizations

Washoe County met the Healthy People 2020 objective of 80% of children aged 19 to 35 months have received the recommended doses of the childhood vaccines DTaP, polio, MMR, Hib, hepatitis B, varicella and pneumococcal conjugate.

Year	2016	2015	2014	2013	2012	2011
Rate (%)	80.2	79.0	75.6	74.2	73.6	71.2

Table 1: Washoe County 19-35 month old Immunization Rate (4 DTaP, 3 polio, 1 MMR, 3 Hib, 3 Hep B, 1 varicella, 4 PCV) Data source: WebIZ, State of Nevada, 1/2017

Human Papillomavirus (HPV) vaccination rates for 2016 continued to fall well below the Healthy People 2020 objective of 80%. Nevada WebIZ statewide data shows only 24.55 percent of adolescents age 13-17 years old received the complete series of HPV, with a 29.4 percent 3 dose completion rate in Washoe County.

NV State Immunization Program, percent appropriately vaccinated, 13-17 years old

Rates

	2015 Washoe County			2015 Nevada			2016 Washoe County			2016 Nevada		
	F	M	Both	F	M	Both	F	M	Both	F	M	Both
1 Dose	50.2	41.5	45.7	47.4	35.3	41.2	54	47.8	50.9	51.8	43	47.4
2 Doses	38.5	29.6	33.9	34.7	23.9	29.1	42.5	35.6	39	39	30.2	34.6
3 Doses	28.9	20.4	24.5	24.6	15.5	19.9	32.5	26.3	29.4	28.4	20.7	24.55

The Immunization Program continues to provide on-site clinic services five days per week. Additionally, off-site vaccinations have been provided through partnerships such as Immunize Nevada, Washoe County School District, Boys and Girls Club, and the Nevada State Immunization Program and Catholic Charities of Northern Nevada’s Kids to Seniors Program. Flu and pneumonia vaccines, as well as other vaccines, were also provided for high-risk clients at a homeless shelter, Homeless Connect event, and a residential drug rehabilitation center. Additionally, immunizations and education were provided at Family Health Festivals, a Mexican Consulate Binational Health Event, and a baby fair.

Immunization Program staff are also responsible for carrying out a variety of grant related activities such as conducting provider visits to enhance stewardship and accountability for Vaccine for Children and 317 publicly purchased vaccines, provider education for improved immunization rates and program improvement. Perinatal hepatitis B surveillance and follow-up is another grant component that is carried out by the Epidemiology program.

Vaccine effectiveness concerns led to the CDC’s Advisory Committee on Immunization Practices (ACIP) not to recommend the use of the “nasal spray” live attenuated influenza vaccine (LAIV) known as FluMist for the 2016-17 flu season. Fortunately, the loss of the option to use an intranasal flu vaccine had little impact on the School Located Vaccination Clinic (SLVC) program.

School Located Vaccination Clinics 2015-2016 and 2016-2017 Flu Season

Flu Season	# of School Located Vaccination Clinics	IIV4 (Injectable)	LAIV Nasal Spray	Total Doses	Children	Adults	Total Served
2015-16	14	152	759	911	833	78	911
2016-17	15	1,047	0	1,047	869	178	1,047

Unusual Occurrence of Disease:

Since the last District Board of Health meeting, the CD Program has investigated an additional case infected with a carbapenemase producing organism (CPO). The investigation has involved working with a local hospital, the Nevada State Public Health Laboratory, and the Centers for Disease Control and Prevention (CDC). This most recent case had a Verona Integron-encoded Metallo-Beta-Lactamase (VIM)-producing *Pseudomonas aeruginosa* wound infection. The case patient was hospitalized. According to CDC, this type of case is still rare in the United States. As of August 9, 2017, the investigation is ongoing. This is the third CPO case in 2017. CPO poses a public health risk in healthcare settings. Contact tracing and screening is a big undertaking and is resources intensive for hospitals, public health, and the state lab.

Coccidioidomycosis

The CD program has continued to see increased Coccidioidomycosis. As of August 9, eleven (11) cases have been reported and investigated in 2017. This is the highest incidence ever reported in Washoe County. The second highest year was 2015 when nine (9) cases were reported.

A workshop took place on July 25 during which subject matter experts from the CDC provided onsite training. A total of 29 individuals from 16 agencies participated in this workshop. The workshop was well received by participants. The CD Program staff and environmentalists also received training on the collection of soil samples. Fifteen soil samples were collected at two high-risk areas. Test results on these samples are currently pending at both the state lab and CDC. The CD Program continues to provide education to healthcare providers via Epi-News and Physician Alerts.

Tuberculosis:

Washoe County has had eleven cases of active Tuberculosis since January 1, 2017. There are currently nine patients on daily direct observed therapy (DOT).

Preparedness and Emergency Medical Services

The EMS Advisory Board meeting was held on August 3. The board heard presentations from regional partners, information on the Nevada Trauma Registry, a report developed by the EMS Program Statistician, and an update on the 5-year EMS Strategic Plan.

During the April 6, 2017 EMS Advisory Board meeting the Regional Response Heat Map was approved for public dissemination. On May 22, 2017, the EMS Statistician sent patient perspective response time call data from the first three quarters of FY 16-17 to GIS in order to update the Regional Response Heat Map. The map can be found at https://www.washoecounty.us/health/programs-and-services/emergency-medical-services-oversight-program/ems_response.php.

During the August 3, 2017 EMS Advisory Board meeting the Washoe County Trauma Data report was approved for distribution. The report contains data from 2015 and 2016 traumatic injuries reported by Washoe County hospital facilities. The full report can be found on the EMS Oversight Program webpage at <https://www.washoecounty.us/health/programs-and-services/emergency-medical-services-oversight-program/2017.php>.

The EMS Oversight Program has completed a draft of the regional protocols with a task force comprised of regional partners. The draft will be sent to the task force on August 14 to be reviewed with their Medical Directors for possible signature. It will also be sent to the Pre-hospital Medical Advisory Committee (PMAC) on August 15. The task force will review any suggestions or recommendations when they convene on September 20. The draft will also be submitted to the EMS Advisory Board during the meeting scheduled for October 5. This will satisfy an objective within the Regional EMS Oversight 5-year Strategic Plan.

The Health District is facilitating a large-scale Point of Dispensing (POD) exercise, which will span from September to November and will include a variety of closed POD partners activating their plans to dispense flu vaccine. The exercise scenario is roughly based on the 2009 H1N1 flu event and tests the ability of our partners to open and execute a POD.

The Health District staff participated in a radiological/nuclear training course sponsored by the State of Nevada and the Department of Energy. This was followed by a full-scale radiological exercise at the Regional Public Safety Training facility. The training and exercise are part of a wider effort to increase radiological awareness and prevention efforts in Nevada. They link to PHEP planning efforts in developing community reception centers (CRC's) in response to radiological incidents.

The Health District participated in the potable water tank exercise on August 9 with a regional hospital and private construction company. The exercise enabled the region to demonstrate its ability to bring potable water to a hospital and hook it into their system allowing for greater resilience.

The Health District participated in two Federal Medical Station Site visits on August 10 and 11. The site visits were conducted at the Reno Sparks Convention Center and the North Valleys High School. The site visits were the final stage in becoming Federal Medical Stations and part of the state plan.

The Health District will participate in the National Disaster Medical System (NDMS) tabletop exercise on August 26. There are three hospitals in Washoe County that have signed up to participate in NDMS. These hospitals could potentially receive patients from around the county if a disaster were to occur outside of our region.

Truckee Meadows Healthy Communities (TMHC)

A Family Health Festival was held on June 24 at the Evelyn Mount Community Center.

The Regional Governing Board of the Truckee Meadows Regional Planning Agency agreed to partner with TMHC and Enterprise Community Partners to develop an Affordable Housing Roadmap for the Truckee Meadows. TMHC is raising funds to support Phase I of this initiative.

TMHC has partnered with Remote Area Medical (RAM) for a RAM event to provide free dental, vision, and other medical services at the Boys and Girls location on E. Ninth St. in Reno Sept. 29 – Oct. 1.

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Community Health Needs Assessment

Work on the Community Health Needs Assessment update for 2018-2020 continues. We received almost 1,500 responses to a web-based community survey conducted in English and Spanish. A community partners meeting is scheduled for the morning of September 8 to gather input on the assessment results. I will not be able to attend the State Board of Health Meeting due to this conflict.

Additional Information

Detailed monthly reports from each of the WCHD Divisions are available in the District Board of Health monthly meeting packets at:

https://www.washoecounty.us/health/board_committees/dboh/index.php.



DATE: September 8, 2017
TO: State Board of Health Members
FROM: Joseph Iser, MD, DrPH, MSc, Chief Health Officer
SUBJECT: Chief Health Officer Report

Arbovirus Update

The Southern Nevada Health District continues to conduct routine surveillance for arboviruses in mosquitoes and arboviral disease in humans. As of August 11, the Health District has tested 85 people for the Zika virus. Two travel-related infections have been reported this year. In 2016, the Health District tested 156 people for the virus, reported 21 travel-related infections, and one non-travel related infection. None of the cases were the result of local mosquito-borne transmission. The Health District has reported one case of West Nile virus this season.

The Health District's Vector Surveillance Program continues to conduct surveillance for the invasive *Aedes* mosquito species. To date, none of the *Aedes aegypti* mosquitoes that have been tested for Zika virus have been positive. The program has completed four fogging operations in the 89032 ZIP code area.

West Nile virus-positive mosquitoes have been identified in eight ZIP codes, St. Louis Encephalitis-positive mosquitoes identified in one ZIP code, and Western Equine Encephalitis-positive mosquitoes in one ZIP code in Clark County. The Health District continues to urge residents to protect themselves from mosquito bites, eliminate standing water and breeding sources, and report all mosquito activity to the Vector Surveillance Program at (702) 759-1633.

Suicide Prevention

In preparation of National Suicide Prevention Week (September 10-16, 2017) and World Suicide Prevention Day, September 10, the Health District reminds health care providers of the important role they play in identifying patients who may be having suicidal thoughts or planning to harm themselves. While mental health care professionals play key roles in screening patients, primary care physicians and their staff are often the only points of contact for a patient within the health care system. Ensuring that primary care physicians and their staff receive training and are aware of available resources should be a priority for all health professionals. It is important to emphasize a primary prevention approach that addresses factors that put people at risk for engaging in suicidal behavior.

In 2016, the Nevada Division of Public and Behavioral Health (DPBH) reported that 615 residents committed suicide. Of those, 395 were Clark County residents. These are too many lives lost and too many families and communities impacted. While there are no easy answers and not one prescribed approach, as health care providers and public health practitioners we must ensure we have the resources in place to meet our patients' needs. More information and additional resources are available on the DPBH Office of Suicide Prevention website at <http://suicideprevention.nv.gov/>.

Accreditation Update

Accreditation Update - The Southern Nevada Health District continues to work to gain accreditation through the Public Health Accreditation Board. The first steps toward accreditation have been completed with the development of the Community Health Assessment (CHA) and the Community Health Improvement Plan (CHIP) to address key issues and develop initiatives to improve the health and well-being of the community. The CHIP's three priority areas are access to care, chronic disease, and policy and funding. Since the introduction of both the CHA and the CHIP, there have been several new projects and initiatives, some of which were announced publicly once they were put into place.

Priority Group Updates:

Access to Health Care: This workgroup addresses the limited access to care that members of the community might be experiencing and has developed tools to address the issue.

- The Nurse Call Line has been activated and now connects non-emergency 9-1-1 callers with a nurse who can offer assessments. This frees up time that can be spent on emergency responses and assists individuals who have no medical home to access care.
- Mobile Health Collaborative is an initiative that links clients with a cross section of public services. The Collaborative held its first event in April and assisted 156 families. The next event is scheduled for October 20 at Whitney Recreation Center. The Collaborative includes 50 community partners.

Chronic Disease: The Chronic Disease workgroup has identified the need to increase physical activity and reduce tobacco use as key pieces of this portion of the CHIP. The activities include initiatives introduced by the Office of Chronic Disease and Prevention as well as its stakeholders and partners.

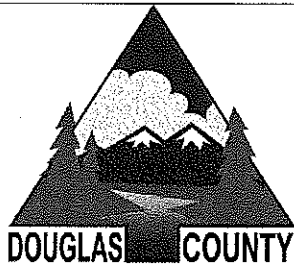
- The Regional Transportation Commission adopted its Bicycle and Pedestrian Plan. The plan was developed over an 18-month period with significant public input. The plan includes recommendations to expand bike networks and supports programs and policies to support biking and walking in Southern Nevada.
- The City of North Las Vegas adopted a comprehensive Complete Streets Policy that includes 10 elements recommended by the National Complete Streets Coalition. Complete Streets are roadways that are designed to be safe for all users including pedestrians, cyclists, motorists, and transit riders of all ages and abilities.
- The Healthy Vending initiative is a program to increase access to healthy foods and beverages in vending locations. Program staff worked to develop and adopt a Nutrition Standards Policy for the Nevada Department of Employment, Training & Rehabilitation (DETR) Business Enterprise Program (BEN), including the Health District's own Aroma Café. DETR is adopting the policy in the 28 cafes and snack bars, and the more than 900 vending machines statewide operated as part of the BEN program. Implementation will begin later this year.

- To reduce tobacco use in the community, a brief tobacco use intervention was developed to offer health care providers a tool to identify current tobacco users and refer them to cessation resources. To date, more than 15,000 health care providers in Clark County have been trained on how to deliver a brief tobacco use intervention to their patients.

Road to Diabetes Prevention

The Health District now has a Spanish-language version of its Road to Diabetes Prevention program on its [Viva Saludable](#) website. The free, six-session online program is designed for users to reduce the risk of developing Type 2 diabetes. The Road to Diabetes Prevention is self-paced and includes optional activities and available community resources. While it is open to anyone, the Road to Diabetes Prevention program is recommended for people who could have pre-diabetes or are at risk for developing Type 2 diabetes. The program was launched in English in 2015. For information or to sign up, participants can visit the [Get Health Clark County](#) website. The program is based on the Centers for Disease Control and Prevention's (CDC) Road to Health toolkit and includes healthy eating, physical activity, and educational information to help individuals reduce their risk of developing Type 2 diabetes. Participants can learn about their own risk factors and how to make simple lifestyle changes to reduce their risks.

The American Diabetes Association and the CDC estimate that 84.1 million Americans - more than one in three adults age 20 and older - are considered to have pre-diabetes, a condition in which blood glucose levels are elevated but not high enough for a diabetes diagnosis. Of those, the CDC estimates that nine out of 10 are not aware they have it. Without intervention, many people with pre-diabetes will develop Type 2 diabetes within five years. In addition to developing Type 2 diabetes, people with pre-diabetes are at an increased risk of developing heart disease and stroke. For some people with pre-diabetes, early treatment can return blood glucose levels to the normal range. There are no clear symptoms of pre-diabetes so many people are unaware of their status. In Nevada, approximately 8.4 percent of Hispanic adults have been told by a health care provider that they have pre-diabetes. In Nevada overall, the prevalence of pre-diabetes among adults in 2014 was 8.8 percent (BRFSS).



Community Health

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TO: Nevada State Board of Health
FROM: Karen Beckerbauer, Manager
DATE: September 8, 2017
RE: Douglas County Updates

- In June, Douglas County Board of Health welcomed Dr. John Packham from UNR to provide an overview of the county health rankings. It sparked much discussion and raised several questions to be addressed at future meetings.
- In August, our second Committee on Health meeting was held and the team developed a process for approving policies and procedures for our clinic, an outline agenda for our next Board of Health meeting, and a list of discussion topics from Dr. Packham's presentation for review with the board.
- Board meetings will include standing items for updates on topics including Health Inspections, Epidemiology highlights, Animal Control issues, and Coroner's Reports. The next Douglas County Board of Health meeting is scheduled for Wednesday September 20, 2017 at 2:00 p.m.
- The Douglas County Community Health Clinic held its first back-to-school immunization day and saw 43 students, each of whom received between 1 and 6 vaccines apiece. Over the summer months, including this event, clinic staff has assisted 128 young people in our community in getting current on all recommended vaccinations. This was a joint venture with Douglas County School District.
- Staff is working with Carson City Health and Human Services to provide a flu clinic at the Douglas County Community and Senior Center on Friday October 13, 2017. We are also providing immunizations and general health information at the Tahoe Regional Planning District employee health fair in October and will add flu shots to the monthly blood pressure checks at both Topaz Ranch Estates and Indian Hills congregate dining sites in October.
- Lastly, we are enjoying a growing relationship with Carson Valley Medical Center and their affiliate clinics to broaden the scope of medical services available in our community. Patients are able to easily access services at all of our locations and will benefit from the cooperation among the providers.