



CARSON CITY, NEVADA
CONSOLIDATED MUNICIPALITY AND STATE CAPITAL

DATE: March 8, 2019

TO: State Board of Health Chair and Board Members

FROM: Nicki Aaker, MSN, MPH, RN
Director, Carson City Health and Human Services

SUBJECT: Carson City Health and Human Services Report

National Public Health Week is April 1-7, 2019. Please watch for activities that various organizations will be conducting and I encourage all of you to participate.

Chronic Disease Prevention and Health Promotion

Sexual Risk Avoidance Education (SRAE) formerly Adolescent Health Education Program (AHEP) (This program is in CCHHS Chronic Disease Prevention and Health Program Division) –

CCHHS SRAE Abstinence program has had 448 youth participants as of February 2019 surpassing the goal of 130 participants within the grant cycle (October 2018 – September 2019). These numbers increased significantly due to the new partnership with Carson High School.

The Families Talking Together (FTT) program (under SRAE grant) is gaining momentum. A partnership has been developed with Lyon County's Healthy Communities Coalition to conduct classes. Classes have been conducted for the CCHHS Workforce Development Program, Dayton Community Center, Douglas Community Center, Lyon County Juvenile Probation Officers, and Yerington Boys and Girls Club. Other partnerships developed are with Douglas County Social Services and Douglas County's Juvenile Probation Officers to provide the program within their Parent Programs. As of February 2019, parents of approximately 40 youth have completed the program surpassing the goal of parents to 30 youth within the same grant cycle stated above.

Carson City Health & Human Services

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Clinical Services (775) 887-2195 Fax: (775) 887-2192	Public Health Preparedness (775) 887-2190 Fax: (775) 887-2248	Human Services (775) 887-2110 Fax: (775) 887-2539	Disease Control & Prevention (775) 887-2190 Fax: (775) 887-2248	Chronic Disease Prevention & Health Promotion (775) 887-2190 Fax: (775) 887-2248
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PREP-Comprehensive Sex Education Grant

CCHHS PREP program has had 140 youth participants complete the program as of February 2019 surpassing the goal of 115 youth participants within the grant cycle of October 2018 – September 2019. The program has stable partnerships with the Juvenile programs in Carson City, Douglas, Lyon, and Storey Counties.

SRAE Positive Youth Development and our SRAE Quality Improvement Project for CCHHS

The SRAE Program Coordinator has started a youth group at Carson High School with volunteer participants from the already existing Carson High School HOSA Club. The SRAE Program Coordinator will rely on this groups input concerning different projects that pertain to making the CCHHS Clinic more Teen Friendly and help to aid the SRAE Program Coordinator in decision making when it comes to advertising and curriculum for the SRAE Program.

Recently, we completed an Art Contest that was facilitated by the volunteer group to promote at Carson High School. The 3 art contest winners received prizes and their art will be displayed in our Clinic Lobby, which is in the process of being remodeled. Our Next Project with Carson High will be to help facilitate the High School Freshman Health Class Tours of CCHHS in April.

Tobacco Control and Prevention

- Smoke-free Carson City efforts continue in collaboration with the Carson City Parks and Recreation Department to create smoke-free parks and discuss possible ordinance in Carson City. The presentation scheduled for February 2019 to the Carson City Planning Commission has been postponed due at the request of the Commission due to the length of their agenda. It has been requested to be on the next Commission's agenda.
- The Success Stories on CCHHS Multi-Unit Housing project and the collaboration with Western Nevada College to go Smoke-Free which were submitted to CDC are being published as full page ads in the Nevada Appeal.
- Anti-vaping campaigns are being shown before the movies at Carson City's Fandango Galaxy Theater and Minden's Ironwood Theater.
- Toni Orr, Public Health Nurse and the Tobacco Control and Prevention Coordinator, is a member of the Nevada Tobacco Prevention Coalition, which is working on 2019 legislation.

Ryan White Retention in Care Project

The Retention in Care Treatment Adherence Counselor has provided service(s) to 356 individuals. These clients are mainly from the rural and frontier Nevada counties; however, occasionally there are clients from Washoe and Clark counties.

Clinical Services

- Since the Immunization Billing grant, we have had an in-house Biller. Our biller went part-time so I decided to do a cost analysis of the program instead of just hiring another biller. We have decided to contract with STAT Medical to provide billing, contracting and credentialing services. This contract was approved by the Carson City Board of Supervisors on February 21, 2019.
- The clinic is receiving very small shipments of Shingrix (the new Shingles vaccine) and administers all of them quickly. We continue to get telephone calls asking about the availability of the vaccine daily.

Community Health Improvement Plan (CHIP)

Subcommittees are working to accomplish the objectives and activities decided upon in the CHIP. Subcommittees and some of the activities are highlighted below.

- Access to Healthcare
 - Working on a proposal for a transportation project with the local hospital
- Behavioral Health
 - Case Management & Discharge Planning
 - New chair
 - Community Coalition
 - Criminal Justice Collaboration
 - Formal procedures being developed
 - Incorporating a Community Health Worker into the FASTT program
 - Public Awareness
 - A resource guide has been developed
 - Resources from this guide are posted on Partnership Carson City's website
 - Transitional Housing
 - Project in initial stages
 - Triage
 - Algorithm in draft for adults
 - Columbia Suicide Screening has been adopted; adopted at the Northern Nevada Regional Behavioral Health Policy Board also
 - Workforce Housing
 - Carson City's Planning Commission is working on an ordinance change to allow accessory units to be rented
 - Subcommittee is monitoring legislative bills
 - Youth
 - Working on a chronic absenteeism prevention program for children within the Carson City School District

- Food Security & Food Access
 - Collaborating with Parks and Recreation Department and Carson City School District (Senior Project) on a Community Garden to increase fresh fruits and vegetables going to our food programs within the city
- Workforce Development

Epidemiology

- CCHHS' jurisdiction is Carson City, Douglas and Lyon Counties.
- For Week 8, ending February 23, 2019, the number of flu cases has surpassed last year within the same week. Within our jurisdiction, the number of weekly cases has been lower in comparison to last year until Week 7.
- Currently within our jurisdiction,
 - 3,287 influenza-like-illness (ILI) have been reported from emergency departments visits which is a decrease from last year, and
 - 47 reported hospitalizations which is also a decrease from last year.

Environmental Health

- We have a new Health Inspector starting on March 15, 2019. He will be assigned to Douglas County.
- We are currently negotiating a new contract with Douglas County to continue providing Environmental Health services.

Immunization Efforts – Department-wide

- Within the clinic and the 52 community outreach events, we immunized over 4,800 individuals against the flu.
- The outreach events included the Carson City and Douglas County schools. We have been approached by Lyon County School District to provide influenza vaccinations in their schools next year.

Public Health Preparedness

- Jeanne Freeman (CCHHS) and Dave Fogerson (East Fork Fire Protection District) were accepted into the National Preparedness Leadership Initiative (NPLI) through Harvard. They began the program in December 2018.
- Jeanne Freeman has been appointed to the State Resilience Commission as a public health representative. This commission is overseen by the Nevada Division of Emergency Management.
- Preparedness was involved in the emergency planning for the Inauguration on January 7th.
- Preparedness staff have delivered several trainings included the NV Access and Functional Needs class in Las Vegas and Carson City, as well as the Basic Public Information Officer class in Carson City.

Public Health Preparedness, Cont.

- Preparedness staff has assisted Douglas, Lyon, and Storey county emergency managers with revisions to the epidemic sections of their respective county Hazard Mitigation plans.
- Preparedness staff has collaborated with emergency managers, EMS, and local law enforcement to roll out bleed control training and community wall-mounted kits throughout the quad-county region.
- The Preparedness Manager moderated one plenary and delivered a presentation at the Nevada Emergency Preparedness Association conference in early February 2019.

Human Services

- The Point in Time Count took place on January 24, 2019 to count the homeless in our community. CCHHS had a resource fair for the homeless on the same day at the Carson City Community Center from 9:00 am – 12:00 (noon).
 - Homeless Count statistics are:
 - Youth – the definitions of homeless are different for youth compared to adults
 - ✓ 263 Doubled Up
 - ✓ 34 Hotel/Motel
 - ✓ 21 Shelters/transit/waiting for foster care
 - ✓ 7 Unsheltered
 - Adult street count – 61
 - Motels – 143 (This is not required but we ask motels to self-report. Due to the City's Long Term Stay Task Force Initiative, motels are reluctant to provide statistics to Human Services.)
- On March 29, 2019, CCHHS will be collaborating with Western Nevada College to conduct a Job Fair at the Carson City Community Center.

Respectively submitted,



Nicki Aaker, MSN, MPH, RN

Director, Carson City Health and Human Services

February 27, 2019

To: State Board of Health Members
From: Kevin Dick
Washoe County District Health Officer
Subject: March 2019 Washoe County District Health Officer Report

Influenza

Influenza-like illness (ILI) is defined as fever ($\geq 100^{\circ}\text{F}$ [37.8°C]) and cough and/or sore throat in the absence of a known cause other than influenza. Twelve of the twelve participating providers in Washoe County reported a total of 312 patients with influenza-like-illness (ILI) for the week ending February 23, 2019 (week 8). The percentage of persons seen with ILI by the twelve providers was 4.2% (312/7357) which is above the regional baseline of 2.3%. By age group, ILI activity was highest among 0-4 years (20.0%) and lowest among 50-64 years (1.7%). Week 8 was the fifth week in a row that Washoe County experienced an increase in ILI activity locally and it represents a second peak to our flu season following a peak of 4.2% ILI in Week 52 (week ending December 29, 2018).

During week 7, the percentage of patient visits to Nevada sentinel providers due to ILI was 2.3%. Nationwide during week 7 the percentage of visits to sentinel providers due to ILI was 5.1% which is above the national baseline of 2.2%. On a regional level, the percentage of outpatient visits for ILI ranged from 2.5% to 10.1%. All ten regions reported a proportion of outpatient visits for ILI at or above their region-specific baseline level. Nevada is in Region 9.

A total of 20 SLVCs were completed this flu season and 1,427 doses of flu vaccine were administered. Staff also administered 73 doses of vaccine to 26 participants at the Salvation Army and administered 132 doses of flu vaccine at the Project Homeless Connect Point of Dispensing (POD) exercise, in partnership with EPHP.

Tuberculosis (TB) Prevention and Control Program

Staff are experiencing an increased volume of calls from primary care providers in response to a recent Technical Bulletin sent out by the State of Nevada Division of Public and Behavioral Health that endorses the CDC's updated recommendations for treatment of latent TB infection. There has also been a significant increase in referrals from Civil Surgeons for treatment of latent TB infection for immigrants with seven new referrals in January 2019.

The Fetal Infant Mortality Review (FIMR)

The program continues to abstract data from local hospitals for fetal and infant deaths. Fifty-four cases of fetal and infant deaths were reported between July 1, 2018 and December 31, 2018. Of those cases, forty-two were Washoe County residents and twelve were out of jurisdiction but received medical care in Washoe County.

Family Planning

Staff continues to provide services at the Washoe County Sheriff's Office twice a month. An average of 8-10 female inmates are being served every month.

Invasive Pneumococcal Diseases (IPD)

The Communicable Disease Program has noticed that the incidence of IPD in 2018 exceeded the baseline. In 2019, a continued increase of IPD is ongoing. During the first five weeks of 2019, a total of 14 cases with three fatal outcomes were reported. The three fatal cases had many underlying chronic conditions. No epidemiological links among cases have been identified. To explore the serotypes of the diseases, the CD Program is working with the Nevada State Public Health Laboratory and local hospitals to do additional laboratory analysis using Whole Genome Sequencing technology. Testing is pending. This special analysis will assess the circulating strain and the vaccination status of the cases.

Outbreak Response Volunteers Training

Two improvement items from the measles After Action Report (AAR) in April 2018 are to increase surge capacity and to provide HIPAA training for Medical Reserve Corps (MRC) volunteers. In order to complete these two items, the CD Program developed a training package for WCHD internal staff and MRC volunteers who are willing to join an outbreak response team in the event of an emergency. Two 1.5 hour training sessions were provided on January 17, 2019. Training contained three lectures and two group exercises. The contents covered basic CD and outbreak terminology, basic information on measles and hepatitis A, expected duties as an outbreak response volunteer, and HIPAA. A total of 35 internal staff members and MRC volunteers attended the trainings.

Communicable Disease (CD)

In 2013, the CDC recommended that all hospitals implement a screening question for patients being admitted regarding any history of foreign hospitalization in the past six months due to emerging superbug infection. Unfortunately, it has been a challenging task for hospitals. Since 2018, the CD Program has been encouraging local hospitals to implement this screening question due to our regional enhanced carbapenem-resistant organism (CRO) surveillance system. Between June 2018 and January 2019, four of five local hospitals have implemented this screening question. One remaining hospital is pending. CDC also communicated with the CD Program to inquire about lessons learned here.

Public Health Preparedness (PHP)

On January 8, the Healthcare Public Health Emergency Response Coordinator (PHERC) facilitated a No-Notice Centers for Medicare and Medicaid Services (CMS) Data Collection exercise. Seventeen of nineteen dialysis, home health, and hospice agencies participated in the exercise, demonstrating an increased preparedness level among these healthcare providers in Washoe County.

On January 24 the Health District participated in an information sharing exercise with the Nevada Division of Public and Behavioral Health. During this exercise CMS data was requested from the State. This data was used to identify individuals in the simulated disaster exercise area who may need additional help based on their medical needs. In a real event this information would be used to support shelter operations and EMS response.

On February 21, the PHP program participated in a Division of the Strategic National Stockpile (DSNS) Urban Areas Security Initiatives tabletop exercise. This exercise is to provide updates on the DSNS delivery procedures, inventory and inventory management processes to state and local partners.

Inter-Hospital Coordinating Council (IHCC)

IHCC is currently working on preparations for two upcoming exercises. The No-Notice Surge exercise will test the community's ability to evacuate 20% of acute care beds within 90 minutes and the Alternate Care Site exercise will test the ability to run healthcare services from an Alternate Care location, if a facility becomes unavailable.

Emergency Medical Services (EMS)

PHP and EMS staff conducted WebEOC training on January 23 on the various boards created by Health District staff. Staff facilitated a hands-on training for approximately 20 people on the capabilities of WebEOC and the different boards healthcare personnel may need to use for patient tracking during incidents.

The REMSA Emergency Manager and the EMS Coordinator held Mutual Aid Evacuation Annex (MAEA) trainings on February 4 and February 6 for more than 40 personnel from 11 different facilities. The training is designed for leadership and nursing personnel that would take the lead in a healthcare evacuation during a disaster. It is approximately 2.5 hours and includes a review of the plan, explains the Healthcare Patient Technical Specialist (HPTS) position and runs through a hands-on exercise.

Food (EHS)

North Carolina State University provided their Retail Hazards Analysis Critical Control Points (HACCP) Validation and Verification course to regulatory staff from the WCHD, State of Nevada, Carson City, and Southern Nevada Health District as well as foodservice industry representatives. The course included a train the trainer session in which WCHD staff will be approved to deliver future training classes in Washoe County. The program also included two consecutive two-day sessions on February 26th-27th and February 28th-March 1st for regulatory and industry participants. This program will enhance staff's knowledge of specialized food processes and help bridge the gap between regulators and the foodservice industry. Funding for this project was provided by an FDA and Association of Food and Drug Officials (AFDO) grant.

Air Quality

Air quality has been extremely good in the Truckee Meadows this winter with only moderate inversion impacts. The 2018-19 winter is the first since the burn code was established in 1987 that no yellow or red burn code notices needed to be issued to curtail wood burning. The next cleanest season was the winter of 1994-95 when only one yellow burn code was issued.

Public Health Accreditation (PHAB)

The site visit by the Public Health Accreditation Board Team has been scheduled for June 25 and 26.

Community Health Improvement Plan

The 2018 CHIP report, which covers the progress made in the first six months of implementation, is scheduled for presentation to the District Board of Health on February 28. A great amount of progress has been made early in the three year plan and the impact of the community wide collaboration on the three focus areas has been substantial.

Housing/Homeless: The Enterprise Community Partners Affordable Housing Strategy is scheduled for release in March and community partner conversations have been underway to determine the entity best suited to implement the strategies of the plan. The objectives included in the CHIP to identify and support alternative funding models for housing have been largely accomplished; several items have been picked up by the state legislature and are either current bills or have been submitted as bill draft

requests. A “Youth Homeless Roadmap” was developed in conjunction with community partners and approved by the Reno Area Alliance for the Homeless at the December 4th, 2018 meeting. The objectives of the roadmap are being pursued by the RAAH Youth Committee and efforts are currently focused on supporting the development of a youth homeless shelter and establishing data collection and sharing strategies.

Behavioral Health: The Signs of Suicide program continues to be implemented across Washoe County Middle Schools. At the end of December, the program had been offered in four middle schools with suicide prevention education provided to 1,450 students and screening to 305 students. Strategies to increase the number of parent permission slips returned for children to be screened and potential future funding opportunities are discussed at monthly meetings with the Washoe County School District and the Children’s Cabinet. In an effort to improve data sharing and case management effectiveness, we have been working in collaboration with Washoe County Human Services to explore technology solutions to these challenges and look forward to working with community partners to implement low cost tools.

Nutrition and Physical Activity: The workgroup continues to make progress in defining the work going forward and implementation plans have been developed for both the business and youth aspects of the Healthy Washoe Program. A survey was launched in January in partnership with the Reno-Sparks Chamber of Commerce to better understand the worksite wellness needs of our local business community. In an effort to provide consistency across the community for standards of healthy vending, the workgroup is determining nutrition criteria for healthy offerings in this focus area of the CHIP.

Truckee Meadows Healthy Communities (TMHC)

TMHC Co-sponsored a Northern Nevada Behavioral Health Strategic Forum with the Stacie Mathewson Behavioral Health and Addiction Institute at Renown Health on March 1 to explore and discuss what the best opportunities are for collective action in the short term.

Legislative Session

The Health District is engaged in the legislative session. Staff are reviewing and commenting on bills. Presentations and testimony are being provided to committees. The Health District’s new Government Affairs Liaison, Joelle Gutman, is at the legislature at most times in support of our legislative priorities, meeting with legislators, organizing support for bills, and monitoring activity. The legislative priorities approved by the District Board of Health are attached.

Washoe County Health District 2019 Legislative Priorities

Public Health Funding

- Establish a Public Health Improvement Fund to be administered by Department of Public and Behavioral Health
- Appropriate \$5 per capita to the Fund to build public health infrastructure and capacity that supports foundational public health services in Nevada
- Allocate funds based on population to public health authorities established under NRS 439
- Utilize funds to conduct Community Health Needs Assessments and to address priorities that are identified from the Assessments

E-Cigarettes

- License e-cigarette retailers
- Prohibit e-cigarette vaping wherever smoking is prohibited
- Include E-cigarette and other vaping products as “other tobacco products” for purposes of taxation
- Utilize E-cigarette and other vaping products “other tobacco products” tax proceeds to fund the Public Health Improvement Fund and tobacco prevention
- Establish the age for purchase of tobacco products as 21

Behavioral Health

- Establish Crisis Stabilization Center and Services as proposed by the Washoe Behavioral Health Policy Board
- DHHS to provide funding for:
 - An 8-bed center to provide crisis stabilization 24 hours per day, 7 days per week
 - Services that de-escalate or stabilize a person in a behavioral health crisis with acute symptoms of mental illness or abuse of alcohol or drugs
 - Comprehensive services to intervene effectively to address the behavioral health crisis and the underlying issues that lead to repeated crises
 - Possible avoidance of admission to a hospital emergency department, an inpatient mental health facility or hospital, or incarceration in the jail
 - Transition to a continuum of continuing care

Housing

- Create a four-year pilot program that authorizes up to \$10 million of transferrable tax credits per fiscal year for affordable housing

Homelessness

- Direct the Department of Health and Human Services to expand the Home and Community-Based Services benefit under the State Plan for Medicaid to include supportive housing services that facilitate housing as healthcare and help severely mentally ill individuals retain tenancy
- Expand the 1915(i) State Plan Option



DATE: March 9, 2019

TO: State Board of Health Members

FROM: Joseph Iser, MD, DrPH, MSc, Chief Health Officer

SUBJECT: Chief Health Officer Report

Influenza Update

Influenza surveillance for Clark County, Nevada includes data collected from local acute care hospitals and other health care providers. During week 7 (Feb. 10-Feb. 16), influenza activity continued to increase nationally and remained elevated at the local level. In Nevada, the geographic spread of influenza was widespread, but influenza-like illness activity (ILI) was low. In Clark County, 499 influenza-associated hospitalizations have been reported, with 60 percent being people 50 years of age or older. There have been 15 influenza-associated deaths reported, including three deaths in children under the age of 18. The proportion of emergency room and urgent care clinic visits for ILI was 7.4 percent in week 7 which was slightly higher than week 6 (6.6 percent). Approximately 66 percent of area emergency room and urgent care clinic visits for ILI were made by children under 18 years of age. Influenza A was the dominant type circulating. The Southern Nevada Health District will continue to update the public on the flu season and encourage people to get vaccinated.

Health District influenza surveillance updates are available at <http://www.southernnevadahealthdistrict.org/stats-reports/influenza-surveillance.php>.

Medical Countermeasure Distribution Tabletop Exercise

The Division of Strategic National Stockpile (U.S. Department of Health and Human Services, Assistant Secretary for Preparedness and Response (ASPR) conducted a tabletop exercise with the Health District and Nevada Department of Public and Behavioral Health on Feb. 21, 2019. Key stakeholders in the Las Vegas Urban Areas participated in the exercise that covered issues related to delivery, distribution of medical material, and dispensing medical countermeasures related to a biological incident.

2019 Legislative Session

The Health District is monitoring proposed legislation, including bills that would have a direct impact on the agency, would serve to promote public health in the community, or would impact services, programs, or funding. Bills of interest include:

Assembly Bill 97

Summary: Revises provisions relating to certain expenditures of money for public health. (BDR 40-529)

AB97 was presented by Assemblyman Sprinkle and Kevin Dick of Washoe County. The bill would create the Account for Public Health Improvement in the State General Fund. Funds would be administered by the Division of Public and Behavioral Health to the Health Districts each year. An amendment has been introduced to change the wording from "Health Districts" to "Health Authorities" to include Carson City Health and Human Services in the funding allocation.

Assembly Bill 123

Summary: Revises provisions governing the requirements concerning immunizations of pupils for purposes of enrollment in school. (BDR 34-593)

AB123 strengthens the system for tracking exemptions by enhancing reporting to the Division of Public and Behavioral Health. It would increase the Health District's ability to respond and mitigate outbreaks, better identify unimmunized students and protect them and their classmates from disease. It also includes additional measures that create a more standardized process for reporting exemptions.

Senate Bill 159

Summary: Requires each public school and private school to adopt a policy concerning safe exposure to the sun. (BDR 34-583)

SB159 allows students to possess and use sunscreen and wear protective clothing to reduce their risk of skin cancer and excessive exposure to ultraviolet radiation. The measure is in keeping with the Centers for Disease Control and Prevention's (CDC) Guidelines for School Programs to Prevent Skin Cancer.

Senate Bill 171

Summary: Provides for the collection of information from certain providers of health care. (BDR 54-73)

The Southern Nevada Health District supports this mandate as chronic disease markers provide vital information about a population's risk for developing chronic diseases as well as increased cancer deaths. Currently, the Division of Public and Behavioral Health relies solely on self-reported data for this information or on medical claims data collected through Medicaid or hospital discharge billing.

Move Your Way

The Health District's Office of Chronic Disease Prevention and Health Promotion and the U.S. Department of Health and Human Services (DHHS) hosted a free 5k Run/Walk and 1-Mile Family Fun Walk on Saturday, Feb 9 to promote the department's updated physical activity guidelines for children and adults and to launch its new [Move Your Way](#) campaign and website. The event was held in North Las Vegas at Craig Ranch Regional Park. More than 250 people participated in the event including North Las Vegas Mayor John Lee, Councilman and Southern Nevada District Board of Health Vice Chair Scott Black, representatives from the WNBA's Las Vegas Aces, and many more community partners.

The 2nd edition of the DHHS [Physical Activity Guidelines for Americans](https://www.hhs.gov/physical-activity/guidelines-for-americans/) includes physical activity recommendations as well as new information about additional benefits related to brain health and fall-related injuries; immediate and longer-term health benefits for how people feel, function, and sleep; risks of sedentary behavior; guidance for preschool children between the ages of 3 and 5; and tested strategies that can be used to get people to be more active. In 2019, the Health District continues to challenge everyone to become more physically active. The Move Your Way program has planners to help people stay on track to attain better fitness, and the Health District offers additional programs and resources on its website: www.GetHealthyClarkCounty.org.

Slam Dunk Health Challenge

The Health District, the Clark County School District (CCSD), and the WNBA's Las Vegas Aces are launching a new program called the Slam Dunk Health Challenge to encourage students to eat healthy and participate in physical activity. The Challenge is open to all CCSD first- through fifth-grade classrooms. Students in participating classrooms will earn points each day for eating fruits and vegetables and being physically active. The program includes resources for teachers including lesson plans, activities, and weekly video segments featuring Las Vegas Aces players and Coach Bill Laimbeer urging students to eat healthy, stay active, and track their progress. Winning classrooms will receive tickets to attend a Las Vegas Aces home game.

The Southern Nevada Health District and the Las Vegas Aces are excited to partner on a program that can help to establish healthy habits in young people's lives.

STEVE SISOLAK
Governor



JULIE KOTCHEVAR, Ph.D.
Administrator

RICHARD WHITLEY, MS
Director

IHSAN AZZAM, PhD, M.D.
Chief Medical Officer

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Date: February 28, 2019

To: Nevada State Board of Health

Through: Richard Whitley, Director DHHS
Julie Kotchevar, PhD, Administrator, DPBH

From: Ihsan Azzam, PhD, MD, MPH, Chief Medical Officer

Re: Report to the Board of Health for March 08, 2019 Meeting

Nevada Department of Corrections (NDOC)

In compliance with the Nevada Supreme Court order to set specific standards for dietary sodium at the Nevada Department of Corrections (NDOC) State Correctional Facilities, the Division of Public and Behavioral Health (DPBH) recommended that the NDOC follows the standards of the (2015-2020) Dietary Guidelines for Americans released by the USDA. Key recommendations of the (2015-2020) Dietary Guidelines for Americans on healthy eating pattern limit the consumption of sodium to less than 2,300 milligrams of per day. For further details, please check the following website <https://www.cnpp.usda.gov/2015-2020-dietary-guidelines-americans>.

Nevada Revised Statutes (NRS) 209.382, NRS 444.330 and NRS 446.885 requires the DPBH to conduct regular inspections of State Correctional Facilities. These inspections focus on medical and dental services; nutritional adequacy of inmates' diet; taking in consideration religious and/or medical dietary needs of individual inmates and adjusting of dietary allowances for age, gender, and level of activity. Additionally, inspectors from the DPBH regularly evaluate sanitation, healthfulness, cleanliness and safety of facilities at various NDOC institutions with a major focus on food safety practices within the food service operations. Future inspections by the DPBH for nutritional adequacy at the prison will take in consideration that the Dietary Guidelines for Americans (2015-2020) are adopted and implemented by the NDOC.

Almost all correctable critical violations identified during inspections conducted by the DPBH are usually addressed and corrected by the end of each inspection. Critical violations which could not be

corrected by the end of each inspection are usually addressed by NDOC Compliance Enforcement Officers who make sure that proper corrective and timely actions are taken by the facility.

National Measles Outbreak

Currently, the states of Washington, New York, Texas and Illinois are experiencing the worst measles outbreaks in decades. Failure to vaccinate is responsible for the resurgence of this serious infectious disease, which was regarded as “eradicated” in the United States in 2000.

Most of measles cases in this outbreak were unvaccinated, which provided additional evidence about the importance of maintaining a minimum level of “herd” immunity to develop the collective community resilience against dangerous, preventable diseases such as measles. A 95 percent rate of immunization is required to provide sufficient “herd” immunity and protection in any given population.

The DPBH recommends that children get a dose of measles vaccine at 12-15 months of age and again (a 2nd dose) at 4-6 years. Measles vaccine is very effective, and more than 97 percent of those who receive two doses of the vaccine will be immune against the infection. Children too young to be vaccinated or those who have only had one single dose of the vaccine are more likely to contract the infection.

As of February 19, 2019, there were 65 measles cases in Washington State; 234 in New York state; 8 cases in Texas and 4 in the State of Illinois.

Measles is a highly contagious respiratory illness that rapidly spreads by direct or indirect contact with an infected person through coughing and sneezing. More than 90 percent of the unvaccinated individuals around a case of measles will contract the infection. A hallmark of measles is a rash that begins as flat, red spots on the face and spreads down the neck and trunk to the rest of the body. Other symptoms include high fever (> 101 degrees), cough, runny nose and red, watery eyes.

Despite this large ongoing national outbreak, no measles confirmed cases were identified in Nevada so far. The DPBH already enhanced surveillance activities at the state and is closely coordinating with the Local Health Authorities (LHAs), the media and community partners to improve vaccination rates for measles and other vaccine-preventable diseases in Nevada and is specifically targeting rural and frontier areas to increase herd immunity rates. Additionally, the DPBH advised healthcare providers in the state to consider measles in the differential diagnosis of their patient/s, as early identification, of cases along with proper immunization of community members, are key to preventing measles outbreaks from spreading.

Congenital Syphilis Outbreak

Between 2016 and 2017, the number of reported Congenital Syphilis (CS) cases more than doubled and continues to increase in Nevada and nationwide. 10 cases were reported to the DPBH in 2016, and 22 in 2017. Despite of major efforts to reduce the occurrence, there were 30 CS cases reported from three counties in Nevada in 2018 (24 in Clark; 4 in Washoe and 2 in Elko).

Among all states in the nation, in 2017, Nevada ranked number one in the rate of reported Primary and Secondary Syphilis cases, and number two in the rate of reported CS cases. CS incidence rate in Nevada was 57.9 cases per 100,000 live births in 2017; just behind Louisiana (93.4/100,000) and slightly worse than California (57.7/100,000).

While most syphilis cases occur among men, especially gay, bisexual and men who have sex with men (MSM); nationally and in Nevada, there has also been an increase among women.

The DPBH is thoroughly analyzing congenital syphilis data; and together with LHAs is conducting extensive public and provider education campaign to enforce Nevada Laws that require providers of prenatal care to screen pregnant mothers for syphilis in the first and early in the 3rd trimester to timely identify and properly treat infected mothers; prevent CS and reverse the alarming trends of this dangerous re-emerging infection.

Update on the 2018-2019 Seasonal Influenza

Although this current influenza season seems, so far, to be slightly milder than previous seasons, influenza viral activity continues to be “widespread” in Nevada and nationwide - for more than six consecutive weeks, since its peak during the 2018 holiday season.

According recent reports from CDC, the overall effectiveness of the influenza vaccine in this current season in the United States has been 47%, including 46% effectiveness against the predominant circulating virus [Influenza A(H1N1)]. The interim estimates published on February 14, 2019 in the Morbidity and Mortality Weekly Report (*MMWR*), showed that the effectiveness of this season’s vaccine was limited in older adults. The estimated overall effectiveness of the current vaccine seems to compare well with past seasons and could be slightly higher than the previous four years. Researchers also reported that the vaccine has been 68% effective in Canada, including 72% effectiveness against the dominant Influenza A H1N1 circulating strain. Additionally, interim estimates from Hong Kong showed that the vaccine has been 90% effective overall in children, including 92% effectiveness against H1N1.

So far, four out of five patients hospitalized in Nevada due to influenza-related complications were not vaccinated. And about two thirds of all hospitalized 668 patients in Nevada due to influenza-related complications were 50 years of age and older. As of Week, 6; the date of preparing this report, 17 hospitalized patients died due to influenza-related complications.

Nevada Oral Health Program – AB 223

The State Oral Health Program (SOHP) goals include overseeing the implementation of new legislations that are specific to chronic diseases comorbidity associated with poor oral health - and providing pertinent education to legislators to improve dental public health services in Nevada. Additionally, the program promotes the use of preventive dentistry practices into the dental care delivery system, to increase utilization of Early and Periodic Screening, Diagnosis, and Treatment, and provide clinical expertise to the Division of Health Care Financing and Policy (DHCFP).

Assembly Bill (AB) 223 recommends expanding Medicaid dental benefits for adults diagnosed with diabetes, revises the provider billing guide, establishes community linkages for referrals between medical and dental providers, creates educational interventions for participating Medicaid dentists, develops focused presentations for internal and external stakeholders, and develops an evaluation plan and metrics to track the health outcomes for patients with increased access to dental services. AB 223 supports the collaborative partnership between the DPBH, Oral Health Program and the DHCFP to ensure that Medicaid dental benefits are clinically appropriate and provide maximum services for Medicaid enrolled children and adults.

The SOHP is closely collaborating with UMC to launch a pilot project to reduce the number of patients with non-traumatic dental conditions that are admitted to emergency departments. The vision of the program is to improve patient outcomes and reduce medical expenditures associated with non-traumatic dental conditions within hospital emergency departments. The purpose of this pilot project is to provide dental consultation and case management for emergency room patients at UMC that present with a non-traumatic dental condition - and prevent repeat visits to the emergency department for the same condition. Program goals for this pilot include decreasing admission rates for patients presented to the emergency room for non-traumatic dental conditions and reducing the number and types of opioids prescribed to patients for non-traumatic dental conditions in an emergency room setting.

Division of Health Care Financing and Policy

The DPBH continues to participate in the Medical Care Advisory Committee (MCAC) for the DHCFP and the Ambulatory Surgery Centers Dental Work Group. I also assisted the Compliance and Fair Hearings Unit in the review and evaluation of complex cases where services requested for authorization seem to be inadequate, excessive or improper. The DPBH provides timely and thorough analysis of such requests to determine if they meet the criteria for an expedited fair hearing especially where a recipient's life or major bodily function could be affected if the normal timeframe for a hearing was followed and care was not provided in a timely manner. Also, I assist in the Surveillance and Utilization Review Unit to identify unusual/inadequate services and aberrant billing practices, so providers can be properly identified and educated. Additionally, I regularly reviewed and edited several proposed draft regulations for the DHCFP and developed definitions and processes for expanded services.

Academic Health Department

The DPBH continues the collaboration with the University of Nevada and LHAs to define and establish optimal conditions to develop academic health departments (AHDs), or teaching health department that represent a formal affiliation between the university and our public health (state and local) authorities. The AHD arrangements would be the public health equivalent of the "teaching hospital" affiliation that formalizes the relationship between medical schools and hospitals. It would strengthen the linkage between public health practices and its broad academic base and would enhance public health education and training, research, and services. AHDs will serve as public health training sites for students of public health and the clinical health sciences, as well as a site for research and practice involving both the academic and practice communities. AHDs will include shared personnel, often in the form of faculty or staff who are jointly appointed and funded; collaborative efforts to provide education and training for students and public health professionals grounded in public health theory and practice and will help in preparing joint proposals and implementation of research projects.

The 8th (2019) Session of the Nevada Legislature

The 80th (2019) Session of the Nevada Legislature began on February 4, 2019. So far, more than 50 bills have been analyzed, and there are plenty more to come in the coming days of the session.