



**CARSON CITY, NEVADA**  
**CONSOLIDATED MUNICIPALITY AND STATE CAPITAL**

**DATE:** September 6, 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

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CCHHS has completed the 2018 Annual Report which was accepted by the Carson City Board of Health in May. The Strategic Plan is in process.

**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) –**

The calendar for sexual risk avoidance education is filling up. Staff is preparing to provide the education to a number of schools within the region this school year.

CCHHS SRAE Abstinence program had 487 youth participants as of April 2019 surpassing the goal of 130 participants within the grant cycle (October 2018 – September 2019). Within the PREP program, 149 participants have completed the program.

Within the 2<sup>nd</sup> quarter of the calendar year, the Families Talking Together (FTT) classes were conducted for Hugh Gallagher Elementary and the Washoe Tribe parents. The Hugh Gallagher classes were organized in response to parent's questions about the Abstinence classes that were going to be conducted. As of May 29, 2019, parents of approximately 49 youth 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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## **PREP-Comprehensive Sex Education Grant**

CCHHS PREP program had 149 youth participants complete the program as of April 2019 surpassing the goal of 115 youth participants within the grant cycle of October 2018 – September 2019.

## **Tobacco Control and Prevention**

- A presentation about vaping was conducted to Carson City's School District School Nurses on June 6, 2019.
- A smoke-free workplace and smoke-free multi-unit housing social media campaign was initiated.
- Staff presented to Carson City's Parks Commission and Open Space about smoke-free parks. Both were interested and the item was tabled for discussions at future meetings.
- Staff presented at many different events that involve parents and children in order to show them the current vaping devices used and the dangers of using these products.
- Anti-vaping campaigns were shown before the movies at Carson City's Fandango Galaxy Theater and Minden's Ironwood Theater until June 28, 2019.
- Toni Orr, Public Health Nurse and the Tobacco Control and Prevention Coordinator, is a member of the Nevada Tobacco Prevention Coalition, which worked on 2019 legislation through education to policymakers.
- The Funds for Health Nevada grant was approved for CCHHS with a reduction in funds to the existing program.

## **Clinical Services**

- CCHHS conducted a Back to School event during the week of August 12 – 19. This year, there was a 164% increase over last year. Sixty six percent were Carson City residents and the remaining were Douglas, Lyon, and Washoe County residents.
- CCHHS received approximately a 7% decrease in Title X funding. Strategic planning is being done to determine the level of service that can be continued in the future.
- The clinic is receiving 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
  - A pilot project has been approved for the transportation pilot project in collaboration with Carson Tahoe Hospital.
- Behavioral Health - Two Certified Community Behavioral Health Clinics have been opened within our community – Community Counseling Center and Vitality Unlimited
  - Case Management & Discharge Planning
    - Community Coalition
  - Criminal Justice Collaboration
    - Formal procedures being developed
    - Incorporated a CCHHS Community Health Worker into the FASTT program
  - Public Awareness
    - A pocket resource guide has been developed and has been distributed within the community
    - Resources from this guide are posted on Partnership Carson City’s website
  - Transitional Housing
    - Project in initial stages per Jim Peckham, FISH
  - Triage
    - Algorithm for treatment options completed for adults; gap is algorithm for children
    - Columbia Suicide Screening has been adopted and training was conducted for the Behavioral Health Task Force; 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
    - A Request for Proposal being drafted for land that Carson City owns; idea is for a project that will bring some affordable housing to Carson City
    - Subcommittee monitored legislation and will decipher laws passed
  - Youth
    - Working on a chronic absenteeism prevention program for children within the Carson City School District
- Food Security & Food Access
  - Project is stalled; need to find another partner to head up the community garden project
- Workforce Development

## **Environmental Health**

- The contract for Carson City to provide Environmental Health Services in Douglas County was approved for another 3 years. Partnership is going well.

## **Quad-County Public Health Preparedness (Carson City; Douglas, Lyon and Storey Counties)**

- Community Assessment for Public Health Emergency Response (CASPER) surveys have been conducted in Carson City and Douglas County
- The CASPER survey will be conducted in Storey County the week of September 4-13
- PulsePoint has been implemented in Carson City and Douglas County. This is an application that the public can install onto their smart phones. This application alerts individuals of the need for CPR-trained citizens to go to a cardiac arrest situation and perform CPR until the paramedics arrive on scene, which could improve cardiac arrest outcomes.
- Bleed control kits have been purchased and are being distributed in the community. These are also being distributed in Douglas and Lyon Counties. Trainings for individuals are being conducted for the use of these kits. These kits can be used by trained individuals to improve the outcomes of victims.

## **Human Services**

- On March 29, 2019, CCHHS collaborated with Western Nevada College to conduct a Job Fair at the Carson City Community Center. There were 61 employers and 160 job seekers.

Respectively submitted,



Nicki Aaker, MSN, MPH, RN

Director, Carson City Health and Human Services

August 28, 2019

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

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### Public Health Accreditation

The Washoe County Health District (WCDH) received a national accreditation from the Public Health Accreditation Board (PHAB) on August 20th, 2019. PHAB is a nonprofit organization that has overseen and implemented national public health department accreditation for state, tribal and local health departments since 2011. PHAB's evaluation of the WCHD included a thorough review of the delivery of services, administration, governing board, and community engagement. PHAB interviewed WCHD staff and community partners, and conducted a review of organizational documents to measure the WCHD's performance against a set of nationally recognized, practice-focused and evidenced-based standards. With support from the Centers for Disease Control and Prevention and the Robert Wood Johnson Foundation, PHAB's accreditation program is the national standard for public health in the United States.

### National Health Security Award

At the 25th Anniversary Awards Gala held during the National Association of County and City Health Officials Conference, the Health District received the National Health Security Award for "Building Regional Disaster Health Response Capabilities" on behalf of our Public Health Preparedness and Emergency Medical Services Division. The award was presented by Ed Gabriel, Deputy Assistant Secretary of the Assistant Secretary for Preparedness and Response (ASPR) at Department of Health and Human Services, who flew in to have dinner with the awardees and present the awards. The award was in recognition of the work of the Health District with regional partners over many years through the Inter-Hospital Coordinating Council (IHCC) and EMS providers to prepare for mass casualty events and provision of medical services during disasters.

### Hantavirus

Two confirmed cases of Hantavirus Pulmonary Syndrome (HPS) were reported to the Washoe County Health District (WCHD) in August of 2019. These are the first cases of hantavirus reported in Washoe County since 2017. Prior to 2017, hantavirus was rarely reported in Washoe County, with four confirmed cases of HPS reported between 1995 and 2006. During this time there was never more than one case reported in a given year and only one fatality. However, between 2017 and 2019 four confirmed cases of HPS were reported; two cases in 2017 and two cases in 2019. Two of the four cases (50%) were fatal. Altogether the mortality rate for HPS in Washoe County is 38%, which is similar to the national disease mortality rate (36%) reported by the Centers for Disease Control and Prevention (CDC).

Mumps

A single case, probable for mumps, was reported and the CD Program initiated a mumps contact investigation. Exclusions from work, school and social gatherings are in place for a household contact (the mother of the probable case) and three siblings of the case. All contacts have been assessed for immunization status. No additional cases have been identified at this point.

Measles

The CD Program has investigated a total of 18 suspect measles cases so far this year. All have been ruled out for measles after testing was completed. At this time there have not been any confirmed cases of measles in Washoe County for 2019.

Immunizations

An assessment of vaccination coverage for 2018 showed that 75.8% of children aged 19-35 months had received age-appropriate vaccinations at the time of their visits to clinics or healthcare providers located in Washoe County. The Healthy People 2020 objective is 80% for children aged 19 to 35 months to have received the recommended doses of the childhood vaccines DTaP, polio, MMR, Hib, hepatitis B, varicella and pneumococcal conjugate.

Year	2018	2017	2016	2015	2014	2013	2012	2011
Rate (%)	75.8	77.4	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: NV WebIZ replica database, State of Nevada, 3/28/2019

Human Papillomavirus (HPV) vaccination rates for 2018 are steadily rising but continue to be well below the Healthy People 2020 objective of 80%. Nevada WebIZ statewide data shows only 24.3 percent of adolescents age 13-17 years old received the complete series of HPV, with a 29.2 percent 3 dose completion rate in Washoe County.

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

**HPV Rates**

	2018 Washoe County			2018 Nevada			2017 Washoe County			2017 Nevada			2016 Washoe County			2016 Nevada		
	F	M	Both	F	M	Both	F	M	Both	F	M	Both	F	M	Both	F	M	Both
1 Dose	61.2	58.9	60	58.1	53.9	55.9	58.1	54.1	56.0	50.7	45.2	47.8	54	47.8	50.9	51.8	43	47.4
2 Doses	48.1	44.2	46.1	43.9	38.8	41.3	45.7	40.6	43.1	37.4	31.5	34.4	42.5	35.6	39	39	30.2	34.6
3 Doses	31.2	27.3	29.2	26.6	22.1	24.3	34.1	29.3	31.6	26.1	20.7	23.3	32.5	26.3	29.4	28.4	20.7	24.6

Numerator: Number of children in NV WebIZ in the selected age range who are up to date with the selected vaccinations and doses during the selected time frame  
 Denominator: Number of children in NV WebIZ in the selected age range during the selected time frame.  
 Data source: NV WebIZ replica database using SQL Studio on 6/10/2019

The Immunization Program continues to provide on-site clinic services five days a week. A total of 3,090 people (2,299 children & 791 adults) were served and 9,920 vaccine doses were administered during FY19.

Additionally, offsite clinics have provided immunizations through partnership with multiple community agencies to ensure vulnerable populations have access to immunizations.

The School Located Vaccination Clinic (SLVC) program continued to focus on providing flu shots for children attending Title I schools. This program was held in partnership with Immunize Nevada and the Washoe County School District.

**School Located Vaccination Clinics 2015-2016 through 2018-2019 Flu Seasons**

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
2017-18	17	1,089	0	1,089	963	126	1,089
2018-19	20	1,427	0	1,427	1,170	257	1,427

Sexual Health

The bi-directional connection with Nevada State Public Health Laboratory (NSPHL) went live August 5, 2019. Lab orders are now electronically transmitted to NSPHL and continue to be received electronically into Patagonia Health, improving efficiency in lab reporting.

Mid-year reporting for the HIV prevention activities has been submitted. For the first half of 2019, 970 HIV tests were provided. Of those, 569 were provided through offsite events in the community. Rapid HIV tests, the standard for HIV testing that provides results in 20 minutes, were provided to 715 people. Of those tests, five people tested positive for HIV and were linked to HIV care. A total of 18 new HIV diagnoses were reported from community providers and an additional 41 cases of people living with HIV that moved to Washoe County were reported to WCHD.

Tuberculosis (TB) Prevention and Control

The TB program is currently busy with two new pulmonary TB cases and the associated investigations. One active case completed treatment on 8/4/2019. Staff currently has 5 patients receiving direct observation therapy (DOT). Civil surgeon referrals for immigration continue to flow in daily.

Family Planning/Teen Health Mall

Staff received education regarding the Title X Final Rule. The rule prohibits abortion referrals, requires additional adolescent counseling, and requires that pregnancy options counseling be performed by a physician or an advanced practice provider. Staff prepared an action plan which includes policy changes, required documentation, and a letter of assurance for the Office of Population Affairs.

Women, Infants and Children (WIC)

WIC Clinic staff have been working to increase the breastfeeding rate among our WIC clients and staff have been successful. Rates have increased 2% in the past 6 months and staff is hoping to increase rates by another 1%. Currently 46% of Washoe County clients are exclusively or partially breastfeeding at 2 months compared to the State average of 37% for WIC clients.

Chronic Disease Prevention Program (CDPP)

On August 16, CDPP hosted an educational training for the second annual meeting of the Washoe County Chronic Disease Coalition, focusing on health equity. The national group, Human Impact Partners, provided the training and related health inequities to chronic disease and the smoke free work place efforts in Washoe County.

### Public Health Preparedness

FY19 grant funds were utilized to purchase radiological detection and protection equipment to be loaned to the City of Reno PD and the CLEAR team. In January, Reno RPD took possession of four lead shielding blankets, and in July, they picked up 1,200 pairs of safety goggles, one Ludlum Radiation Monitor, one MultiRAE Gas Monitor, one MetRad hand-held Metal and Gamma Detector, and one AM-801 Radiation Detection Portal with Vehicle Kit.

### Emergency Medical Services

The EMS Coordinator and REMSA Emergency Manager conducted a tabletop exercise for the Cascades of the Sierra on August 6. The facility had reached out after the Jasper fire, because they did not have a complete evacuation plan. The tabletop was designed to get the leadership staff thinking about disaster preparedness. They signed on to the Mutual Aid Evacuation Agreement (MAEA) and will be more active in County preparedness activities.

### Food Safety

The proposed amendments to the Washoe County District Board of Health Regulations Governing Food Establishments (food establishment regulations) were approved during the July District Board of Health meeting. The proposed amendments are being presented to the State Board of Health for approval during the September meeting. Adoption of the food establishment regulations will ensure consistency with the most recent version of the 2017 FDA Food Code. Revisions were one of the intervention strategies identified in the 2017 Risk Factor Study to decrease the occurrence of foodborne illness risk factors in Washoe County food establishments.

The Food Safety Program implemented a food inspection quality assurance program. The program will include three field evaluations of each staff member over an 18 month period to ensure uniformity and inspection quality among regulatory staff. The program also includes a post inspection survey that will be sent to each food establishment operator after routine food establishment inspections are conducted. Information gathered from the field evaluations and post inspection survey will be analyzed every 18 months and results will be used to identify and address Food Safety Program issues with the intent of improving the overall level of services provided.

Special Events – July began with multiple large events around the 4th of July holiday in Star Spangled Sparks and The Biggest Little City Wingfest, closing with the Barracuda Championship at the end of the month. Staff continues to handle the large events in addition to the many farmer's markets, food truck events and smaller scale happenings throughout Washoe County. August included two of Washoe County's largest special events in Hot August Nights and the Nugget Best in the West Rib Cook-off.

CBD – The Washoe County Health District has taken action with several businesses to cease the production and/or distribution of cannabidiols (CBD) in food products. WCHD has coordinated with the other Nevada local health authorities and NDPBH for consistent application of food safety regulations regarding CBD. CBD has not been approved by the FDA as a food product and is not included in the generally recognized as safe (GRAS) list of food additives. SB209, adopted during the 2019 session, establishes the authority for the Department of Health and Human Services to develop regulations for testing and labeling of any hemp commodity or product intended for human consumption, however no state regulations for CBD in food products have been promulgated. The USDA and FDA have approved the use of CBD in oils, lotions, creams, and lip balms sold for topical application. Nevada also had regulations through the Department of Taxation that allow CBD to be manufactured and sold through medicinal and recreational cannabis regulations under Taxation.



### Vector-Borne Diseases (VBD)

West Nile virus-positive mosquito pools have been identified in samples taken in the Hidden Valley, Rosewood Lake, South Damonte and Longley Lane area. No human cases have been reported this year in Washoe County.

The program conducted the fifth aerial larviciding application on August 7, 2019 from the Stead airport. The product used was Altosid P35, a biological larvicide that exists naturally in the environment which specifically targets mosquito larvae with no effects to humans, fish, water fowl, or other non-targeted insects such as bees. Program staff has conducted early morning pesticide fogging applications in the areas in which WNV positive mosquito pools were identified.

The program responded to a recent high volume of bat and potential rabies exposures for both humans and pets (dogs and cats). VBD and Washoe County Regional Animal Control Services (WCRAS) have been working jointly to transport rabies susceptible bats and wild mammals involved with possible human exposure to the Nevada State Department of Agriculture Animal Diseases Laboratory for rabies testing.

### Air Quality

There have been no exceedances of any National Ambient Air Quality Standard (NAAQS) so far this year.

The Reno3 air quality monitoring station in Downtown Reno off of Mill Street will need to be replaced due to sale of the property by the City of Reno. Construction of the Reno4 monitoring station at Libby Booth Elementary School has begun after many months of searching, planning, and designing for a site to replace the existing Downtown Reno station. Trenching for the new electrical power service and installation of most of the six foot high security fencing were completed before students returned from summer break on August 12, 2019. The next big milestone will be construction and delivery of an 8' x 20' converted shipping container that will house the ambient air monitoring equipment. This is expected to occur within the next few months.

During their August meeting, the District Board of Health (DBOH) accepted a Business Impact Statement for revisions to Air Quality regulations addressing open burning. The proposed regulations will allow for open-burning to occur in Washoe County year-round, subject to fire department approval, when atmospheric and air quality conditions are suitable for such burning. Some special provisions that limit open burning within the Truckee Meadows hydrographic basin (HA87) will continue to be incorporated in the proposed rule. The proposed rule provides additional opportunities for burning that are prohibited under current regulations from November through February in recognition of the expanded duration of the wildfire season that is now occurring. The regulations will be proposed to the DBOH for adoption during the September meeting.



**DATE:** September 6, 2019

**TO:** State Board of Health Members

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

**SUBJECT:** Chief Health Officer Report

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### Hepatitis A Outbreak

In June, the Health District declared an outbreak of acute hepatitis A in Clark County. Since November 2018 through Aug. 27, 2019, the Health District has reported 86 outbreak-associated cases of hepatitis A. In the past few years total cases reported have been significantly lower: 39 cases reported in 2018; 13 cases in 2017; and six reported cases in 2016. Of the reported cases, more than 93 percent were among those who used drugs (injection or non-injection), and 81 percent were among those experiencing homelessness. Weekly hepatitis A outbreak reports are now available on the Health District's website at [www.SNHD.info/hep-a-control](http://www.SNHD.info/hep-a-control).

Other risk factors for infection include:

- Men who have sex with men.
- People with chronic liver disease, including cirrhosis, hepatitis B, or hepatitis C.
- People who have an occupational risk for infection.
- People traveling to or working in countries where hepatitis A is common.
- People with direct contact with people who have hepatitis A.
- People with clotting-factor disorders.
- People working with nonhuman primates.
- People who are currently or were recently incarcerated.

Hepatitis A vaccination is the best prevention against the virus. Since the outbreak announcement, the Health District has administered 1,336 hepatitis A vaccinations to adults ages 18 and older. A total of 2,047 hepatitis A vaccinations have been administered to adults by all providers in Clark County.

The Health District continues to recommend that health care workers review their immunization history to ensure staff who may be caring for ill patients are up to date with their hepatitis A vaccinations. Pre-vaccination serologic testing is not required for the vaccine to be administered.

### Hepatitis A Exposure

On Aug. 28, the Health District notified the public of a potential hepatitis A exposure. Office of Epidemiology and Disease Surveillance staff identified a person with hepatitis A that worked

at a 7-Eleven convenience store located at 2910 S. Maryland Parkway, Las Vegas, NV 89109 (Maryland Parkway and Vegas Valley Drive) while they were potentially infectious to others. Although transmission of hepatitis A from food handlers to patrons is rare, the Health District informed customers who purchased non-prepackaged foods such as hot dogs or hot deli items between Friday, July 26 and Friday, August 7, 2019, at this 7-Eleven location that they may have been exposed to the virus.

Customers who purchased food at this location were advised to contact their health care providers about getting a hepatitis A immunization or receiving post-exposure treatment. Packaged items, including bottled beverages and microwaved foods, were not implicated in this potential exposure. Customers who have been fully vaccinated (two doses) against hepatitis A or who consumed only packaged or bottled items were not considered at increased risk.

This person is considered linked to the ongoing outbreak in Clark County. For up to date information on the nationwide Hepatitis A outbreak visit the [CDC website](#).

### **Arbovirus Surveillance**

The Health District declared an outbreak of West Nile virus in Clark County on Aug. 22, 2019, after receiving reports of 28 cases of the disease in humans – the highest case count in a season since the virus was first detected in the state in 2004. In addition to the high number of cases, 17 of the 28 reported cases have had the more serious neuroinvasive form of the illness. As of Aug. 27, the Health District has received reports of 33 cases of West Nile virus, with 23 cases having had the more serious neuroinvasive form of the illness. The Health District’s Mosquito Surveillance Program has submitted more than 39,200 mosquitoes to the Southern Nevada Public Health Laboratory for testing. Mosquitoes have tested positive for West Nile virus in 40 unique ZIP codes and St. Louis encephalitis in 15 ZIP codes. Currently, more than 19 percent of mosquitoes submitted have tested positive this season, compared to last year when 0.1 percent tested positive, and 2017 when 2.8 percent tested positive.

The CDC reports as of Aug. 20, a total of 41 states have reported West Nile virus infection in people, birds, or mosquitoes. There have been 206 cases of West Nile virus disease reported to the CDC as of this date. Of those cases, 143 (69 percent) were classified as neuroinvasive disease.

The Health District continues to remind the public that illnesses caused by West Nile virus and St. Louis encephalitis can be prevented. The most effective way to prevent disease is to avoid getting bitten by mosquitoes. Use an Environmental Protection Agency (EPA)-registered repellent, wear long-sleeved shirts, pants, and treat clothing and gear to control mosquitoes. The Health District also urges the public to eliminate breeding sources around their homes.

Health care providers should be vigilant for symptoms of these viruses and order appropriate testing when suspected. West Nile virus and St. Louis encephalitis are closely related, and both cause acute febrile illness and neurologic disease. There are commercially available laboratory tests for acute West Nile virus infection. All St. Louis encephalitis virus testing must be performed by a public health laboratory. More information and testing options are available on the Health District [Public Health Advisories website](#).

More information on the Health District's Mosquito Surveillance activities is available on its website at [www.southernnevadahealthdistrict.org/programs/mosquito-surveillance/](http://www.southernnevadahealthdistrict.org/programs/mosquito-surveillance/). For additional information and prevention tips visit the Centers for Disease Control and Prevention's website at [www.cdc.gov/features/stopmosquitoes/index.html](http://www.cdc.gov/features/stopmosquitoes/index.html).

### **Measles Notification**

On Aug. 15, 2019, the Southern Nevada Health District notified individuals and the public that they may have been exposed to a person who was confirmed to have a case of measles. Because measles can be highly contagious, the Health District advised people who may have been exposed to review their immunization status and contact their health care provider if they are not fully immunized against measles or have not already had the disease. This measles case was reported in a visitor.

Clinicians were advised to consider measles in patients of any age who have fever AND a rash regardless of their travel histories. A Public Health Advisory with additional guidance is available on the Health District's [website](#).

From Jan. 1 to Aug. 8, 2019, the Centers for Disease Control and Prevention (CDC) is reporting 1,182 confirmed cases of measles in 30 states. This is the greatest number of cases reported in the United States since 1992. More information on outbreaks occurring in the U.S. is available on the CDC [website](#).

### **State of the Health District**

More than 90 community partners joined the Health District for its first [State of the Health District](#) on Thursday, July 18. The agency provided the public and stakeholders with highlights of its accomplishments, an overview of the [Community Health Needs Assessment](#) developed in partnership with Dignity Health - St. Rose Dominican, and a preview of Healthy Aging and Putting Green on the Menu initiatives planned for the upcoming fiscal year.

One public health issue facing Southern Nevada is an aging population. Adults aged 65 and older in Clark County are the only age group that is projected to increase its proportion among the total population. From 2013 to 2017, the top 10 leading causes of death among Clark County residents 65 years and older were: heart disease; cancer; chronic lower respiratory disease; stroke; Alzheimer's disease; influenza and pneumonia; unintentional injury; diabetes; kidney disease; and Parkinson's disease. Older adults have unique health concerns and to ensure this fast-growing segment of the population has the support needed to continue leading healthy, productive, and active lives, the Health District reviewed healthy aging models and frameworks from across the country in its efforts to design a comprehensive initiative that meets the unique local conditions of Southern Nevadans.

In developing its healthy aging framework, the Health District identified four goals and related priorities:

1. Reduce health disparities for older adults in Clark County.
2. Empower Clark County older adults to engage in health-related education and activities.
3. Provide clinical and community-based preventive services to Clark County older adults.
4. Create healthy and safe community environments for older adults in Clark County.

More information on the Health District's healthy aging initiative is available on the Health District [website](#).

The second initiative, Putting Green on the Menu, is a voluntary program for food facilities. This green restaurant initiative will be rolled out in two phases. The first phase is designed to encourage restaurants to adopt environmentally-friendly practices and to recognize those that do. Eight criteria have been developed for the first phase of Putting Green on the Menu. A restaurant meeting five of the eight standards can complete an electronic form that will be made available by the Health District. The Health District will maintain a list of self-reported food facilities that meet the criteria on a special section of its website for the public to access. This program will not be affiliated with the Health District's regulatory programs.

In addition to these initiatives, Health District division directors provided highlights of their programs, and the Community Health Needs Assessment was presented. The full presentations and a copy of the Community Health Needs Assessment are available on the Health District's State of the Health District [webpage](#).

STEVE SISOLAK  
Governor



LISA SHERYCH  
Administrator

RICHARD WHITLEY, MS  
Director

IHSAN AZZAM, Ph.D., M.D.  
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**Date:** August 27, 2019  
**To:** Nevada State Board of Health  
**From:** Ihsan Azzam, PhD, MD, MPH, Chief Medical Officer  
**Re:** Report to the Board of Health for September 06, 2019 Meeting

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### Update on the Multistate Measles Outbreak

The nation continues to experience a multi-state outbreak of measles, which continues to spread from one state to another. However, due to extensive public health efforts, active vaccination campaign and aggressive prevention measures, the rate of disease transmission seems to have started to slow down in recent weeks.

From January 1<sup>st</sup> to August 22<sup>nd</sup>, 2019, more than 1,215 individual cases of measles have been confirmed in 31 states. This is the greatest number of cases reported in the U.S. since 1992 and after measles was declared eliminated in 2000. However, the case-frequency started to decrease significantly, as this week the case-load increased only by 12.

Despite the public perception that it is a very mild disease, measles can cause serious complications. As of the date of preparing this report, 125 of outbreak-related measles cases were hospitalized this year, and 65 reported having had serious complications, including pneumonia and encephalitis.

- Most measles cases in this outbreak were among individuals who were not vaccinated
- More than 75% of the cases linked to this outbreak were from New York State, especially New York City.
- Measles is more likely to spread and cause outbreaks in U.S. communities where groups of people are unvaccinated.
- All measles cases this year have been caused by the measles wild-type D8 or B3 viruses

The Nevada Division of Public and Behavioral Health (DPBH) has confirmed with the Southern Nevada Health District (SNHD) that there has been only one case of measles in Clark County. That case was linked to the national outbreak and occurred in a visitor from another country.

The DPBH urges healthcare professionals to consider measles when evaluating patients with febrile rash especially those with history of international travel and travel history to states that are currently experiencing



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ongoing outbreaks. Early diagnosis; close observation of those who could have been exposed, and prompt case isolation are essential infection control measures to stop the ongoing transmission.

In addition to technical bulletins issued to healthcare providers, the DPBH and Local County Health Authorities (LHAs) are regularly issuing updates urging community providers to increase rates of vaccination among school age children. Additionally, the DPBH issued a reminder in July 2019 to all local health officers in rural and frontier Nevada urging them to enforce Nevada Vaccination Laws in schools and daycare centers,

The DPBH already enhanced epidemiology and surveillance activities at the state and is closely coordinating with the LHAs, healthcare providers, the media and community partners to improve vaccination rates for measles and other vaccine-preventable diseases in Nevada. Additionally, the DPBH advised healthcare providers in the state to consider measles in the differential diagnosis, as early identification of cases along with proper immunization of community members, as well as vaccinating healthcare providers and their staff, are key measures to completely stop this prolonged and lingering measles national outbreak.

### **Nevada Supreme Court Order to the State Chief Medical Officer (CMO) to Improve Inmates' Diet**

To demonstrate compliance with the order of the First Judicial District Court to the CMO to improve inmates' diet, the CMO advised the administration of the Nevada Department of Corrections (NDOC) to adopt the National Dietary Guidelines for Americans 2015-2020 (NDGA). The statement of the CMO to the Nevada Board for Prison Commissioners was as follows "The scientific consensus from expert bodies, such as the Institute of Medicine, the American Heart Association, and the Dietary Guidelines Advisory Committee (made up of prestigious researchers and scientists in the fields of nutrition, health, and medicine), is that the average sodium intake among Americans is relatively high and can be reduced. Most healthy eating patterns limit sodium to less than 2300 mg/day. Going forward, the CMO advised the NDOC to follow the NDGA 2015-2020 released by the US Departments of Health and Human Services (DHHS) and Agriculture (USDA) to determine nutritional values of food components. Recent studies have shown that diets that align closely with these Dietary Guidelines are associated with a significant reduction in avoidable negative health outcomes."

The CMO further advised the NDOC to combine healthy food choices from across all diet categories, while paying attention to calorie limits. He emphasized that inmates' nutritional needs can be met primarily from healthy foods, including fresh, canned, dried, and frozen. And, inmates' food should contain no more than 10% of daily calories from added sugar; less than 10% percent of daily calories from saturated fats, around 350 mg of daily cholesterol, and no more than 2,300 milligrams (mg) per day of dietary sodium. In tandem with these diet recommendations, he also advised that inmates of all ages should be encouraged to meet the Physical Activity Guidelines for Americans in order to maintain an adequate body weight and reduce their risk of developing chronic illnesses.

The State CMO explained that when it comes to adequate diet there are no well-defined or strict standards, and no "one-size fits all." Individuals may differ in their nutritional needs based on many factors including weigh, height, physical activity and other characteristics. Additionally, it is essential to know that dietary guidelines are just suggestions that are intended to be aspirational; providing wide margins of flexibility rather than a rigid set of standards such as normal values of blood pressure that are strictly defined as 120/80mmHg with no wiggle room.

Consistent with the NDGA 2015-2020, the State CMO reviewed newly revised food menus at the NDOC and found the sodium levels (around 2,300 mg/day) and saturated fats (less than 10% of the daily calories) were on target with the NDGA 2015-2020. However, daily cholesterol levels seem to have exceeded the 300-350 mg/day and some adjustments are maybe needed.



Once NDOC starts implementing these newly proposed menus, changes to some food items would probably be necessary, depending on the availability and accessibility of products and food sources. The NDOC seems to be moving forward and steadily with plans to improve inmates' food quality by significantly reducing daily dietary sodium, fat and cholesterol contents. Together with a team of inspectors, the CMO will continue to regularly evaluate inmates' diets for adequacy and healthfulness and will assess adherence to the NDGA 2015-2020, especially for dietary sodium, fat and cholesterol.

### **Ebola Outbreak in the Democratic Republic of Congo (DRC)**

Almost a year ago, the Ministry of Health of the Democratic Republic of Congo (DRC) reported an outbreak of Ebola virus disease in the Northern part of the Country. This large outbreak is also spreading with moderate intensity to the eastern part of the DRC. Confirmed and probable cases have been so far reported in twenty-seven health zones of the DRC. Additionally, as of June 11, 2019, the Ugandan Ministry of Health confirmed their first imported case of Ebola from the DRC, and confirmed two additional related cases in the following day. Fortunately, no more Ebola cases have been reported in Uganda since June 12, 2019. These three confirmed cases in Uganda represent the very first cases of Zaire Ebolavirus in that country, and the first cases of Ebola virus disease in Uganda since 2013.

This current Ebola Outbreak is the largest of the ten Ebola Outbreaks that already occurred in the DRC, and the second largest outbreak of Ebola ever recorded since the virus was first discovered in 1976 in the DRC.

The Centers for Disease Control and Prevention (CDC) are assisting the DRC; the Uganda government, and authorities in countries bordering the outbreak area. Additionally, CDC is partnering with local and international partners such as the World Health Organization (WHO) to coordinate activities and provide technical guidance related to early detection, surveillance, laboratory testing, treatment, contact tracing, infection control/prevention practices, border health screening, data management, risk communication; health education, vaccination, and other logistical areas.

As a precautionary measures surveillance activity were heightened in Nevada for any possible imported cases of Ebola or other hemorrhagic fevers. LHA and community healthcare providers and facilities are regularly updated on the current situation of the outbreak in Africa and are urged to be very vigilant; implement Ebola Screening Questionnaire/s to international travelers, and immediately report any suspected, probable or confirmed cases of Ebola to the local and state health departments.

### **National Hepatitis A Outbreak**

Hepatitis A infection seems to be reemerging and on the rise in Nevada and nationwide. In the past few years hepatitis A outbreaks started again to occur nationally with the first significant national rate increase identified in 2016. As of June 28, 2019, 25 states have publicly reported outbreaks-related 21,230 cases with 12,476 (59%) of those requiring hospitalizations, and 203 deaths due to Hepatitis A infection.

In our state; Clark County is now experiencing an outbreak of hepatitis A. Between the 1<sup>st</sup> of January and June 30<sup>th</sup> this year, the Southern Nevada Health District (SNHD) has confirmed 54 cases. Compared to 22 during 2018; one case in 2017 and seven in 2016 for the same time period.

Among the 54 hepatitis A cases diagnosed so far in Clark County, 49 were determined to be part of the ongoing national outbreak, 46 were diagnosed in hospitals, and 40 required hospitalization. It is essential to emphasize that ninety-four percent of Nevada/Clark County Hepatitis A cases were drug users, and 78% were homeless.



Hepatitis A is a vaccine preventable viral disease of the liver. It is usually communicated from one person to another through fecal-oral transmission. It is a self-limiting disease that does not result in chronic infection.

Symptoms of Hepatitis A typically include:

- Fatigue
- Poor appetite
- Abdominal pain
- Nausea
- Jaundice

Vaccination is the best way to prevent hepatitis A infection. It is strongly recommended for all healthcare providers in Nevada to offer Hepatitis A vaccination to individuals at high risk for contracting the infection such as

- Drug users especially injection drug users
- Homeless individuals
- Men who have sex with men (MSM)
- Individuals who are currently or were recently incarcerated
- Patients with chronic liver disease, including cirrhosis, hepatitis B, or C
- Exposed individuals and those who had direct contact with persons who have hepatitis A
- Travelers to countries with high or intermediate endemicity of hepatitis A virus infection
- Persons with blood coagulation disorders
- Caregivers of nonhuman primates
- Household members and other close contacts of adopted children newly arriving from countries with high or intermediate hepatitis A endemicity

### West Nile Virus (WNV) Infections

WNV Season this year seems to be more severe than recent previous seasons, especially in Southern Nevada and Clark County. To date, mosquitoes have tested positive for WNV in almost every zip code in Clark County. As of August 26, 2019, there were more than 28 newly diagnosed patients with WNV; 17 of those had the more aggressive neuro invasive form of infection. This season seems to be the 2<sup>nd</sup> most severe WNV season in Nevada/Clark County since 2006.