



DATE: September 6, 2020

TO: State Board of Health Members

FROM: Fermin Leguen, MD, MPH, Acting Chief Health Officer

SUBJECT: Chief Health Officer Report

Coronavirus Disease 2019 (COVID-19)

Southern Nevada Health District continues its collaborative efforts to provide testing resources for seniors, minorities, and those most at risk for COVID-19. In addition to its Community Health Center collection sites at 280 S. Decatur Blvd., Las Vegas, NV 89107, and All Saints Episcopal Church, 4201 W. Washington Ave., Las Vegas, NV 89107, the Health District and community partners also offer sites located in higher-risk communities. These sites can be found on the Health District's COVID-19 Testing Site Calendar at www.snhd.info/covid-19-testing-sites.

Based on increasing demand for COVID-19 testing services at collection sites at its main location at 280 S. Decatur Blvd and All Saints Episcopal Church, the Health District has implemented an online registration-based system for people requesting testing services. The new registration service is available in English and Spanish at www.snhd.info/get-tested.

The Health District follows Centers for Disease Control and Prevention (CDC) guidance and has advised the public and industry partners It is no longer recommended that people who tested positive for COVID-19 be tested again. This recommendation includes employers who may have required employees be retested before returning to work. Under the updated guidance, people who had symptoms of COVID-19 can discontinue self-isolation after at least 10 days have passed since the symptoms began, at least 24 hours since a fever has resolved without taking fever-reducing medications such as ibuprofen or acetaminophen, and as long as there has been improvement in other symptoms. For those who were asymptomatic, release from isolation is 10 days from the test collection date.

The Health District and the CDC recommend that employers not require a health care provider's note for employees to return to work. Most people with COVID-19 have mild illness and can recover at home without medical care. They are advised to follow CDC recommendations to determine when to discontinue home isolation and return to work. Many health care providers and medical facilities are extremely busy, and requiring return-to-work documentation may cause unnecessary delays for employees who are healthy and able to return to the workforce. The Health District does not provide return-to-work documentation. CDC business guidance is available [here](#).

Additional COVID-19 resources, including a COVID-19 dashboard, are available on the Health District website. In addition to demographic information, ZIP code and city maps, case counts per ZIP code, and a trend report are posted at www.SNHD.info/covid.

Senate Bill 4

During the 32nd Special Session of the Nevada Legislature, Senate Bill 4, related to business liability was introduced and ultimately passed. The local public health authorities were not consulted on the language of the bill, even though it expands the duties of local health districts. The Health District concerns included:

- While the bill provides time-limited funding of \$2 million for the Health District, there are severe constraints on how this money can be spent by December 30, 2020, since this limited time funding will not support the additional environmental health inspectors needed to address the requirements of this bill since their field work will extend beyond December 30, 2020. Hiring and training the number of inspectors needed to conduct inspections every two months and respond to complaints is not feasible within the 5-month limited funding period of this bill.
- In addition to the services our environmental health inspectors are providing to the Health District and community response to the COVID-19 pandemic, they must also maintain other critical activities, restaurant and food safety inspections, institutions, housing complaints, mosquito surveillance programs during peak season, and multiple other duties.
- Pulling environmental health inspectors from their current assignments will weaken public health programs that are already stretched thin. Staff is also inspecting child care facilities, food facilities, public pools, and other regulated facilities that would potentially be impacted by a shift in personnel from these programs.
- Sections 12 and 13 of this bill address employee issues that should be addressed and regulated by OSHA, the Department of Labor, and Business Licensing. The Health District's regulatory role related to facilities is sanitation and infection prevention.
- Section 13 authorizes the Nevada Gaming Control Board and the health authority to require public accommodation facilities to submit their written SARS-CoV-2 response plans. The language does not allow for the public health agencies to provide direction or requirements to these plans.
- Public health authorities should be granted the ability to implement regulatory fees associated with the mandates included in this bill to ensure the program can be supported.
- Inspection timeframes and regulatory responsibilities should be adjusted in consultation with the health authorities to ensure they are achievable and delineated to the appropriate regulatory agency.

Fentanyl Deaths

In July, the Health District released data indicating deaths involving fentanyl or fentanyl analogs are increasing in Clark County. At the time of release, there had been 63 deaths involving fentanyl among Clark County residents this year. In 2019, there were 28 deaths during the same time, an increase of 125%. There were 64 fentanyl deaths in 2019 and 46 deaths in 2018.

Nationally, deaths involving prescription opioids, like oxycodone and hydrocodone, have been declining. Deaths involving synthetic opioids, like fentanyl, have been increasing. This trend has also been observed in Clark County. During January-May of this year, there have been 53 deaths involving prescription opioids compared to 63 deaths involving fentanyl or fentanyl analogs. This is the first time Clark County has had more deaths involving fentanyl than prescription opioids. Some of these fentanyl-related deaths also involved prescription opioids, and the Health District will continue to monitor the trend to better understand how fentanyl is impacting opioid overdoses in the community.

One-hundred and seventy-three Clark County residents have died from fentanyl since 2018. Of these, 68% were male, 75% were among non-Hispanic, and 25% were Hispanic. Racial breakdowns were as follows: 76% White; 16% Black; 3% Asian; and 2% Native American. Deaths primarily occurred among individuals aged 15-54 years old (86%), with 25% among those aged 25-34. Other drugs are often involved, with the most common being prescription opioids (29%), benzodiazepines (27%), psychostimulants such as methamphetamine (23%), cocaine (20%), and heroin (9%). These proportions are not mutually exclusive as more than one drug can contribute to a death.

The Health District and the Centers for Disease Control and Prevention recommend carrying naloxone, also known as Narcan®, an opioid-antagonist that can be administered to help reverse opioid overdoses. The Health District offers free naloxone at its pharmacy located at 280 S. Decatur Blvd. Additional overdose prevention measures and training are available to the community through local harm reduction organizations, including Health District partner organization [Trac-B Exchange](#).

Back-to-School

The Southern Nevada Health District urged parents and guardians to ensure their pre-schoolers, kindergartners, and 7th graders were appropriately immunized and ready to start school. Due to the COVID-19 response, the Health District is limiting the number of patients allowed in its clinics and immunization services are available by appointment only. Only one parent or guardian is allowed in the clinic with the child for services. Call (702) 759-0850 to schedule an appointment. Visit www.snhd.info/back-to-school for clinic locations.

The Clark County School District requires the following vaccinations for students enrolling in school: chickenpox (varicella), hepatitis A, hepatitis B, polio, tetanus-diphtheria-pertussis (DTaP and Tdap), quadrivalent meningitis, and measles-mumps-rubella (MMR). Parents who recently moved to Nevada should note hepatitis A vaccination is required in the state. Immunizations that were up-to-date in other states that do not require hepatitis A vaccination might not be current in Nevada. For a list of immunization requirements for school, visit Immunize Nevada's [Nevada School Requirements](#) page.

Children entering 7th grade must be immunized against tetanus-diphtheria-pertussis (Tdap) as well as *Neisseria meningitidis* (meningitis) in the form of a quadrivalent meningococcal conjugate vaccine (MenACWY). The meningitis vaccine is also required for 8th through 12th grade students who are new to the Clark County School District. A booster dose of quadrivalent meningococcal conjugate and the meningococcal B vaccines are recommended for teens who are 16 to 18 years old.

Parents vaccinating a child at a Health District clinic should bring immunization records. Parents who cannot locate immunization records should contact their health care provider. If their children were immunized in Nevada, parents can also visit Nevada WebIZ, a statewide immunization registry, at <https://izrecord.nv.gov/public/Application/PublicPortal> or call Nevada WebIZ at 1 (877) 689-3249.

Arbovirus Update

The Health District announced the first West Nile virus-positive mosquitoes on June 18. The mosquitoes were trapped in the 89120 ZIP code. The detection of West Nile virus-positive mosquitoes serves as a reminder to the public to protect themselves from mosquitoes that can transmit diseases such as St. Louis Encephalitis, Western Equine Encephalitis, and Zika. The Health District urges the community to “Fight the Bite” through its prevention campaign.

The Health District conducts routine surveillance for arboviruses in mosquitoes and arboviral disease in humans. The Health District’s Mosquito Surveillance program monitors the local mosquito population for West Nile virus, St. Louis Encephalitis, and Western Equine Encephalitis, Zika, and other arboviruses.

No human cases of West Nile virus have been reported this season. As of August 14, environmental health staff has set 3,770 traps throughout Clark County and submitted 3,045 sample pools, representing 53,572 mosquitoes, to the Southern Nevada Public Health Laboratory for arboviral analysis. Of these sample pools submitted, 13 tested positive for West Nile virus.

The Health District continues to urge the public to eliminate standing water around their homes, prevent mosquito bites by using an EPA-registered repellent, and report mosquito activity to (702) 759-1633.

A weekly Arbovirus Update is available at www.southernnevadahealthdistrict.org/programs/mosquito-surveillance/weekly-arbovirus-update/mosquito-monitoring-report/.