



# Memorandum

**Date:** March 23, 2023

**To:** Southern Nevada District Board of Health

**From:** Michael Johnson, PhD, Director of Community Health  
Fermin Leguen, MD, MPH, District Health Officer *FL*

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**Subject:** Community Health Division Monthly Activity Report – February 2023

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

### **A. Chronic Disease Prevention Program (CDPP)**

The Slam Dunk Health Program launched in January. The NACCHO-recognized program is a partnership with the Las Vegas Aces and the Clark County School District to increase physical activity and fruit and vegetable consumption among youth. The program will run through April. Participation in the program includes:

- 438 classrooms signed up to participate
- 11,448 students signed up to participate
- 100 CCSD elementary schools with at least one classroom participating

CDPP is working with the After Market & Pantry (a soon to be open food retail store and pantry) to provide bus passes for clients who do not have transportation. The pantry is on the valley's east side in a "food desert". This program will allow clients without individual transportation to access fresh, frozen, and refrigerated foods more easily. Many clients are traveling miles to get to the pantry on foot and include older adults and families. Currently, the pantry is only open for bulk food distribution weekly. The program will be overseen by After Market & Pantry staff. Passes will be provided on an, as needed basis as part of their efforts to provide expanded services and community resources, once the pantry opens for business in April.

The CDPP partnered with the CCSD Safe Routes to School program, which kicked off its Walk and Roll program in January to encourage students and families to leave the car at home and walk and/or roll to school. Thirteen schools are participating in the program. The program will conclude in March 2023.

### **B. Tobacco Control Program (TCP)**

Staff trained Communities in Schools employees to help address the use of e-cigarettes among youth. Participants were also trained on Alternative to Suspension Policies for youth who are caught using tobacco on school campuses.

New tobacco cessation resources and e-referral materials for placement in waiting areas of healthcare facilities are available on the SNHD Tobacco Control Program's, new free online storefront. Orders are continuously processed and mailed out to local healthcare providers.

For January, our staff partnered with two (2) local African American-focused faith-based organizations for the launch of a three-month program. Staff will partner with ten (10) African American faith-based organizations to educate youth and adults about flavored tobacco products, tobacco policy expansion, and to raise awareness of associated harm to the health of the Black community.

In January, we also partnered with the Student Council conference to promote vape-free lifestyles in schools. Staff reached 1,200 high school students in attendance to promote messages about the dangers of tobacco products, including e-cigarettes.

Also, within the month of January, we collaborated with statewide partners to inform NV Petroleum Marketers, Convenience Store Association, and the Retailer Association of Nevada of the State's tobacco retail violation rates. Infographics were created and shared with retail associations. Technical assistance provided and ongoing feedback and support offered.

This January, our staff kicked off an 8-week collaboration with five (5) local Latino owned restaurants. The initiative uses culturally competent educational material to raise awareness about tobacco-related health disparities and promotes cessation services through the 1-855-DEJELLO-YA number. Each restaurant has implemented a smoke and vape-free minimum distance policy. For January, six (6) businesses implemented and/or expanded their smoke and vape free policy. Staff provided technical assistance.

### **C. Other Efforts**

OCDPHP has received additional funding from the CDC to support COVID and flu vaccine education and delivery among our REACH grant priority populations (African Americans and Hispanics). OCDPHP staff are working with community partners to train influential messengers in the community, promote vaccine update and increase accessibility to vaccines among these populations. During January:

- SNHD staff trained 12 community-level spokespersons. To date, 265 community-level spokespersons have been trained.
- Two (2) community events to distribute information and promote vaccination occurred in reaching 200 individuals.
- Two (2) pop up vaccine clinics were offered vaccinating 38 people for COVID and 24 for flu. A total of 6,000 vaccines have been provided to date through these efforts.

- The multi-component, English/Spanish language Flu media campaign to reach priority populations continued to air. This campaign consists of paid print, radio, social media (Instagram/Facebook), e-blasts and online banners. This year, a new campaign element focusing on pregnant people was incorporated. Healthcare providers are also being targeted through print publications. In January, 1,474,861 people were reached through the campaign.

## **II. OFFICE OF EMERGENCY MEDICAL SERVICES & TRAUMA SYSTEM (OEMSTS)**

### **A. Education Committee**

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

The Committee distributed nomination forms to fill seats for two (2) At-Large representatives from local EMS agencies and EMS training programs.

### **B. Drug/Device/Protocol Committee (DDP)**

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

The DDP continued working on proposed revisions to the Clark County EMS Emergency Medical Care Protocols.

### **C. Medical Advisory Board (MAB)**

The primary mission of the MAB is to support the Health Officer's role to ensure quality patient care within the EMS system by making recommendations and assisting in the ongoing design, operation, and evaluation of the EMS system from initial patient access to definitive patient care. The Board heard reports from the Education and Drug/Device/Protocol sub-committees. The Board Members include:

1. One medical director of each firefighting/franchised agency.
2. One operational director of each firefighting/franchised agency.
3. Chairman of the Regional Trauma Advisory Board.
4. An employee of the SNHD, whose duties relate to the administration and enforcement of EMS Regulations as an ex-officio member.

**D. OEMSTS – February 2022 / 2023 Data**

<b>February EMS Statistics</b>	<b>February 2022</b>	<b>February 2023</b>	
<b>Total certificates issued</b>	71	65	↓
<b>New licenses issued</b>	42	61	↑
<b>Renewal licenses issued (recert only)</b>	3	5	↑
<b>Driver Only</b>	16	32	↑
<b>Active Certifications: EMT</b>	839	859	↑
<b>Active Certifications: Advanced EMT</b>	1641	1653	↑
<b>Active Certifications: Paramedic</b>	1904	1930	↑
<b>Active Certifications: RN</b>	58	70	↑

**III. OFFICE OF PUBLIC HEALTH PREPAREDNESS (OPHP)**

**A. Planning and Preparedness**

1. OPHP staff began planning for a full-scale exercise to be conducted in October 2023.
2. This trained team corroborates with community and hospital partners, by hosting and attending community meetings virtually.
3. Personnel are avidly working with internal staff who have been responding to the COVID response along with external partners to develop an interim action report for SNHD and the region.
4. The OPHP Team is constantly working with the County and the SNHD contractor to develop the regional and SNHD COVID After Action Report.

**B. PHP Training and PH Workforce Development:**

1. Keeping in line with the direction of SNHD’s leadership, all non-essential training has been postponed focusing on the COVID response and training needs
2. Internally, we provide Employee Fit Testing: Essential SNHD staff continue to receive respirator fit testing. 22 fit tests completed.
3. February 7<sup>th</sup>– 9<sup>th</sup>, our SNHD Planner, PHP Supervisor, and Readiness and Response Coordinator attended the TEEX Infrastructure Awareness and THIRA Development classes held at the CCFD Station 18.

4. February 8<sup>th</sup>, we extended the ability of our community to respond to an act of terrorism, intentional use of biological agents, or other naturally occurring event. This was hinged on the joint planning and preparedness efforts of the Southern Nevada Business Community. From this, our Senior Planner held a Closed POD seminar to collaborated on community preparedness to assist in preparing their organization, employees, and those that they serve. This program was introduced to hospitals, resorts, infrastructure, home health agencies and others to this program.
5. The City of North Las Vegas, Cox communication and UMC, updated their Closed POD & MOU agreements.
6. February 16<sup>th</sup>, OPHP Planners & trainers met with OPHP Supervisor for an assessment of the B95 scope of work, February 8<sup>th</sup> – 10<sup>th</sup>.
7. February 28<sup>th</sup> – March 2<sup>nd</sup> OPHP Planner, Supervisor and the Readiness & Response Coordinator attended Critical Asset Risk Management and Resilience trainings at CCFD Station 18.
8. The continuity of our planning continues to move forward towards the Full-Scale Anthrax Exercise to be held October 12<sup>th</sup> – 14<sup>th</sup>. This exercise is a full-scale exercise comprising a bioterrorism scenario. With one (1) exposure event pre-Super Bowl, and one (1) release of aerosolized anthrax (*Bacillus anthracis*) during the Super Bowl. This POD exercise, is to take place at the Thomas & Mack Event Center
9. In addition, SNHD will be supporting other jurisdictions and hospitals with patient tracking and resource management at the Clark County Multi-Agency Coordination Center (MACC).

**C. Hospital Preparedness Program (HPP):** OPHP dispensed a Hospital Preparedness Program Liaison

1. February 2<sup>nd</sup> – The Healthcare Coordinator participated in the monthly Southern Nevada Healthcare Preparedness Coalition providing updates on training, exercises, and requirements to complete the After-action Report and Improvement Plan for the January 2023 Chemical Response Functional Exercise. The monthly updates included information sharing on the National Disaster Medical System and Federal Coordinating Center Full-Scale Exercise (FSE) in May 2023, upcoming TEEEX's training opportunities, and a presentation from the Southern Nevada Water Authority/Las Vegas Valley Water District Public Outreach Liaison. Next Healthcare Coalition Meeting is March 2, 2023.
2. February 7<sup>th</sup> – Our HPP Liaison participated in the State of Nevada Micro-Planning Session for COVID-19 Vaccination distribution. This meeting included updates from the

state on status of vaccines, deliveries, and partnerships. This also included an update from the Southern Nevada Health District Team.

3. February 9<sup>th</sup> – The HPP Liaison participated in the University Medical Center of Southern Nevada’s Emergency Management Committee meeting. Our HPP Liaison provided updates on the upcoming SNHPC meeting in March, training sessions in May, June, July, and September along with an announcement on the Full-Scale Exercise in October 2023.
4. February 13<sup>th</sup> – Our HPP liaison met with the Director of Nursing/Administrator for the Alta Rose Surgery Center, an eye surgical center, to discuss the emergency management requirements, hazard vulnerability analysis, upcoming training and exercises, and the healthcare coalition and how these items could impact the Alta Rose Surgery Center in the preparedness and emergency management arena.
5. February 21<sup>st</sup> – The HPP Liaison participated in the State of Nevada Micro-Planning Session for COVID-19 Vaccination distribution. This meeting included updates from the state on status of vaccines, deliveries, and partnerships. This also included an update from the Southern Nevada Health District Team.
6. February 27<sup>th</sup> & 28<sup>th</sup> – The HPP Senior Public Preparedness Planner provided instructional lead duties to the health district while providing Incident Command System (ICS) 300, Intermediate Incident Command System for Expanding Incidents for members of the health district and the community.

**D. Grants and Administration:**

1. OPHP staff are supporting COVID response and logistical needs.
2. OPHP staff are supporting monkeypox planning needs.

**E. Medical Reserve Corps (MRC) of Southern Nevada:** MRC coordinator works in conjunction with SNHD and community partners for volunteers needed for the COVID response.

MRC Volunteers had no volunteer opportunities in February. MRC Coordinator planned training activities for upcoming months, sent out newsletters, and continues to recruit and deactivate volunteers. MRC Coordinator attended monthly NACCHO MRC and PPAG Workgroup meetings, as well as SNHPC.

**IV. VITAL RECORDS**

A. February 2023 is currently showing 4.6% decrease in birth certificate sales in comparison to February 2022. Death certificate sales are currently showing a 26% decrease in comparison to February 2022. SNHD received revenues of \$35,581 for birth registrations, \$22,997 for death registrations; and an additional \$8,601 in miscellaneous fees.

**COMMUNITY HEALTH Vital Statistics Program Birth/Deaths Registered – Fiscal Year Data**

Vital Statistics Services	Feb 2022	Feb 2023		FY 21-22 (Feb)	FY 22-23 (Feb)	
<b>Births Registered</b>	2,048	1,806	↓	17,613	16,646	↓
<b>Deaths Registered</b>	2,376	1,757	↓	17,001	14,180	↓
<b>Fetal Deaths Registered</b>	11	14	↑	132	130	↓

**COMMUNITY HEALTH Vital Statistics Program Birth/Deaths Certificates – Fiscal Year Data**

Vital Statistics Services	Feb 2022	Feb 2023		FY 21-22 (Feb)	FY 22-23 (Feb)	
Birth Certificates Sold (walk-in)	1	2	↑	241	318	↑
Birth Certificates Mail	125	93	↓	823	914	↑
Birth Certificates Online Orders	3,718	3,549	↓	30,128	28,743	↓
Birth Certificates Billed	88	112	↑	759	884	↑
<b>Birth Certificates Number of Total Sales</b>	3,932	3,756	↓	31,951	30,859	↓
Death Certificates Sold (walk-in)	28	5	↓	220	126	↓
Death Certificates Mail	187	180	↓	1,018	1,247	↑
Death Certificates Online Orders	11,269	8,352	↓	79,580	65,155	↓
Death Certificates Billed	59	26	↓	446	264	↓
<b>Death Certificates Number of Total Sales</b>	11,543	8,563	↓	81,264	66,792	↓

**COMMUNITY HEALTH Vital Statistics Program Birth/Deaths Cert. Sales by Source – Fiscal Year Data**

Vital Statistics Sales by Source	Feb 2022	Feb 2023		FY 21-22 (Feb)	FY 22-23 (Feb)	
Birth Certificates Sold Valley View (walk-in)		.1%	↑	.8%	1%	↑
Birth Certificates Mail	3.2%	2.5%	↓	2.6%	3%	↑
Birth Certificates Online Orders	94.6%	95.5%	↑	94.3%	93.1%	↓
Birth Certificates Billed	2.2%	3%	↑	2.4%	2.9%	↑
Death Certificates Sold Valley View (walk-in)	.2%	.1%	↓	.3%	.2%	↓
Death Certificates Mail	1.6%	2.1%	↑	1.3%	1.9%	↑
Death Certificates Online Orders	97.6%	97.5%	↓	97.9%	97.5%	↓
Death Certificates Billed	.5%	.3%	↓	.5%	.4%	↓

**COMMUNITY HEALTH Vital Statistics Program Birth/Deaths Certificates Sales – Fiscal Year Data**

Revenue	Feb 2022	Feb 2023		FY 21-22 (Feb)	FY 22-23 (Feb)	
Birth Certificates (\$25)	\$98,300	\$93,900	↓	\$798,775	\$771,475	↓
Death Certificates (\$25)	\$288,575	\$214,075	↓	\$2,031,600	\$1,669,800	↓
Births Registrations (\$13)	\$38,155	\$35,581	↓	\$303,628	\$287,196	↓
Deaths Registrations (\$13)	\$32,058	\$22,997	↓	\$229,385	\$185,497	↓
Convenience Fee (\$2)	\$8,198	\$7,840	↓	\$64,698	\$61,874	↓
Miscellaneous Admin	\$1,097	\$761	↓	\$7,902	\$5,008	↓
<b>Total Vital Records Revenue</b>	<b>\$466,383</b>	<b>\$375,154</b>	<b>↓</b>	<b>\$3,435,988</b>	<b>\$2,980,850</b>	<b>↓</b>

\*Numbers will change once stable

**COMMUNITY HEALTH Passport Program – Fiscal Year Data**

**B. PASSPORT SERVICES** – Passport Services is appointment only. Passport photos remain suspended.

Applications	Feb 2022	Feb 2023		FY 21-22 (Feb)	FY 22-23 (Feb)	
Passport Applications	\$24,045	\$25,410	↑	\$168,630	\$207,130	↑
Revenue	Feb 2022	Feb 2023		FY 21-22 (Feb)	FY 22-23 (Feb)	
Passport Execution/Acceptance fee (\$35)	687	726	↑	4,818	5,918	↑



**V. HEALTH CARDS**

**A. COVID Activities:**

1. Perpetual oversight of door screener at the SNHD Decatur Building, with plans to perpetuate until instructed to cease screening and triage at front door.

**B. Food Handling / Health Cards:**

1. For most of the month of February, Health Cards made available, two weeks of appointments at a time, with hundreds of appointments being added Thursdays at 5 p.m. for the week after next. Additional same-day or next-day appointments were also opened at the individual offices as capacity allowed. Beginning February 27, we switched to appointments opening on weekday mornings for each day of the following week. In early March, Wednesdays will become a same-day appointment day at our three primary locations in an effort to assist those who need a card prior to starting new employment.
2. For the month of February, we averaged 127 “passing and paying” online renewal clients per day, with a total of 3,563 clients renewing online.

**C. Body Art Cards**

1. Appointments for Body Art Cards expanded from being available at just our Decatur location to also our Fremont and Henderson offices, increasing capacity by 35%.

**D. Other**

1. The Sexual Health Clinic, Immunization Clinic and Environmental Health successfully took over their own cashiering duties. Previously these duties were performed by a centralized cashier operated by Health Cards.

<b><u>CLIENTS SERVED</u></b>	<b>Feb 2023</b>	<b>Jan 2023</b>	<b>Dec 2022</b>	<b>Nov 2022</b>	<b>Oct 2022</b>	<b>Sep 2022</b>
Food Handler Cards – New	3,953	3,698	3,175	3,016	2,573	2,107
FH Cards – Renewals	3,312	4,143	3,924	3,440	3,126	3,266
FH Cards – Online Renewals	3,563	4,513	3,021	2,794	2,965	3,181
Duplicates	362	406	244	232	239	228
CFSM (Manager) Cards	264	315	162	155	132	154
Re-Tests	1,238	1,513	1,254	906	810	876
Body Art Cards	80	77	69	67	108	107
<b>TOTALS</b>	<b>12,772</b>	<b>14,665</b>	<b>11,849</b>	<b>10,610</b>	<b>9,953</b>	<b>9,919</b>

**VI. HEALTH EQUITY**

- A. The Health Equity program received funding from the Center for Disease Control (CDC) to build, leverage, and expand infrastructure support for COVID prevention and control among populations that are at higher risk and underserved.
  - 1. The program continues to collaborate with SNHD programs and grant subrecipients to plan and coordinate COVID community strategies and events.
- B. The Health Equity Program works towards reducing health disparities through increasing organizational capacity and implementing community strategies.
  - 1. The program is currently in the process of selecting up to three (3) community-based organizations to implement health equity strategies in the community. Selection of these community parents will be concluded by March 15, 2023.

**VII. SOUTHERN NEVADA PUBLIC HEALTH LABORATORY (SNPHL)**

**A. Clinical Testing:**

- 1. The SNHD Nursing Division: molecular and microbiology culture, Sexually Transmitted Disease (STD) testing.
- 2. SNHD STD department: the CDC Gonococcal Isolate Surveillance Project (GISP) as well as enhanced Gonococcal Isolate Surveillance Project (eGISP). SNPHL performs NAAT and culture testing of *N. gonorrhoeae* isolates and submits isolates to a reference laboratory for the determination of antibiotic susceptibility patterns. SNPHL has also joined eGISP Part B to expand culture-independent testing for antimicrobial resistance genes of gonococcal isolates.
- 3. A total monthly samples tested is listed in the following table:

Test Name	Monthly Count	Avg Year to Date
GC Cultures	66	68
NAAT NG/CT	1083	1115
Syphilis	852	815
RPR/RPR Titers	216/77	190/75
Hepatitis Total	804	857
HIV/differentiated	394/9	430/8
HIV RNA	50	64

- 4. COVID testing:



Neisseria species	Gonorrhoeae Culture	70	66											
	Gram Stain/WBC	0	0											
	Neisseria ID	0	0											
	Haemophilus ID	0	0											
Unknown ID	Bacterial ID	0	0											
	WGS (PulseNet)	24	21											
Salmonella	Salmonella Screen	16	14											
	Salmonella Serotype	15	10											
Shigella	Shigella Screen	4	7											
	Shigella Serotype	4	5											
STEC	STEC Screen	4	0											
	STEC Serotype	4	0											
Unknown	Stool Culture	3	14											
Vibrio	Vibrio ID	0	1											
	Vibrio Screen	0	0											
Yersinia	Yersinia Culture/ID	0	0											

**B. Epidemiological Testing and Consultation:**

1. SNPHL participates in the SNHD Outbreak Investigation Committee and Foodborne Illness Taskforce. There were 3 cases for outbreak investigation in February.

- SNPHL continues to report results of influenza testing to the CDC National Respiratory and Enteric Virus Surveillance System (NREVSS). In February, SNPHL performed 42 respiratory panels on the BioFire.

**C. Emergency response and reportable disease isolate testing report:**

- SNPHL performs reportable disease isolate testing and confirmation. Isolates submitted by local laboratories are serotyped and/or confirmed by Whole Genome Sequencing; stored on-site; and results reported and/or samples submitted to CDC through various national programs; Public Health Laboratory Information System (PHLIS), National Antimicrobial Resistance Monitoring System (NARMS), and Influenza Surveillance, and PulseNet Bacterial Outbreak Surveillance
- SNPHL’s additional mission is as a member of the CDC Laboratory Response Network (LRN) testing for the identification of potential biological weapons/agents on environmental daily samples within its unique BSL3 environment.

2023	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec
Select Agent Rule out (total PCR)	0	0										

- SNPHL is clinically validated for using Whole Genome Sequencing (WGS) for the identification of Campylobacter species (select species), pathogenic Escherichia coli, and Salmonella species. SNPHL is also validated for the determination of Salmonella serotypes and STEC (Shiga toxin-producing E. coli) serotypes and Shiga toxin genes.
- SNPHL performed 24 Whole Genome Sequencing tests (WGS) as part of PulseNet Foodborne Outbreak Surveillance in February 2023.
- SNPHL has completed validation for all bacterial groups on the Bruker MALDI-TOF instrument for streamlined screening of bacterial isolates, to decrease turnaround time and modernize microbiological identification methods.
- SNPHL is validated for sequencing of SARS-CoV-2 and variants of concern through the identification of lineages and clades.
- SNPHL has sustained capacity of sequencing many 192 SARS-CoV-2-positive RNA extracts per week with expectations of increasing this capacity with appropriate staffing, instrumentation, and method development. As of February 2023, SNPHL has sequenced

48 SARS-CoV-2-positive RNA extracts. The new Laboratory Technologist and Laboratory Assistant have completed their training and have been aiding in SARS-CoV-2 sequencing.

8. SNPHL is clinically validated for the identification of Campylobacter species (select species), pathogenic Escherichia coli, and Salmonella species. SNPHL is also validated for the determination of Salmonella serotypes and STEC (Shiga toxin-producing E. coli) serotypes and Shiga toxin genes.
9. SNPHL coordinates and participates with Environmental Health and Veritas Labs for Legionella surveillance.

2023	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Legionella	7	1										

10. SNPHL provides vector testing for Environmental Services, testing for Zika, West Nile, Western / Eastern Equine Encephalitis. Our facility hosted a CDC demonstration for the Vector team. In February, we tested a total 0 mosquito pools samples.
11. As part of the Gonococcal Isolation Surveillance Program (GISP) and enhanced GISP (eGISP), in February, a total of 66 clinical isolates, Neisseria gonorrhoeae 66 isolates) and Neisseria meningitidis (0 isolates), were collected and will be sent to either the regional laboratory for antimicrobial susceptibility testing (AST) or the CDC, respectively. Remnant NAATs or N. gonorrhoeae samples will be sent to the CDC for molecular-based AST testing as part of eGISP Part B.

**D. All-Hazards Preparedness:**

1. SNPHL provides / assists testing for SNHD COVID Emergency Incident Response, local community outreach, CCDC jail-detention centers, institutions of higher education, and long-term nursing facilities Rapid-Antigen POC (CDC-EUA: Abbott IDNow; Qiagen Sofia; BD Vector) with outbreak confirmation RT-PCR testing supported by SNPHL.
2. SNPHL provides COVID Biosafety Training/Guidelines to Non-Traditional testing sites.
3. SNPHL coordinates with training/exercises for First Responders including local Civil Support Team, HazMat, Federal Bureau of Investigation, and Las Vegas Metropolitan Police Department.
4. SNPHL provides information to local laboratorians on CDC packaging and shipping infectious substances and the chain of custody procedures.
5. Provided onsite training for COVID online ordering applications for long-term care facilities.

6. Supplied Biosafety Guidance to Sentinel Sites regarding Monkeypox.
7. Furnished Monkeypox and Bivalent COVID Booster vaccination to laboratory staff.
8. Perpetuated Biosafety Training and guidance to SNPHL personnel.

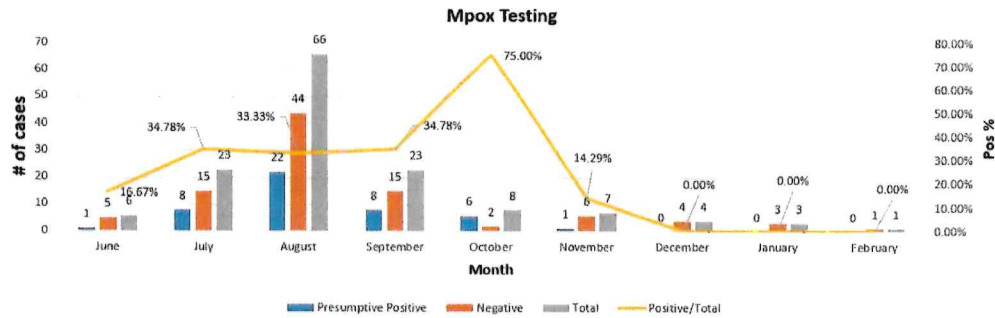
**E. February 2023 SNPHL Activity Highlights:**

1. SNPHL has a stable CDC supply of Viral Transport Medium (VTM) used in COVID collection kits.
2. The renovation of the clinical laboratory is almost completed now. Laboratory plan to move the clinical laboratory to the new lab in the second week of February 2023. This new 14,000 sf of the laboratory will be added to the urine analysis, clinical chemistry, and TB testing for uninsured patients in the future.
3. The staff from molecular laboratory has been trained for the new liquid handler, Tecan, in February 2023.
4. The relocation of WGS instruments including three MiSeq and one NextSeq has completed in the late of February. The validation of those instruments has been completed.
5. SNPHL is working with CDC to develop an Electronic Laboratory Reporting (ELR) system for Monkeypox testing. This system allows us to report the MONKEYPOX testing report to CDC promptly. Currently, we are using a laboratory Network System to report the result which is time-consuming and labor insensitive.
6. Emergency Response laboratory started to validate the warrior panel and verification process with CDC. CDC is also under development and validating the new PCR methods for the identification of the Ebola Sudan strain.
7. According to the WGS and genomic data analysis, the Omicron variant XBB.1.5, lineages is domain lineage, 85%, in February, from the samples received in the laboratory. Our laboratory will keep sequencing the closed contact samples to help ODS to follow up on the investigation.
8. SNPHL still remain the service for the Monkeypox testing for the residents of Clark County even the ICS for Monkeypox has been demobilized .
9. According to the data of influenza surveillance in this flu season, the A/H3 and A/H1 are major subtype of influenza and the percentage of ratio between two subtypes are 80% and 20%, respectively. Two cases of the Victory strain of influenza B also was identified in the February.
10. Safety concerns is for the SNPHL facility security camera upgrade which currently under process by Facilities.
11. Currently our BSL-3 laboratory has detected a total of 46 possible Monkeypox cases. Those presumptive samples have been sent to CDC this week to CDC for a confirmation test. The current Monkeypox testing status is summarized as follows:

**Mpox testing from SNPHL\***

	June	July	August	September	October	November	December	January	February	Total
Presumptive Positive	1	8	22	8	6	1	0	0	0	46
Negative	5	15	44	15	2	6	4	3	1	95
Total	6	23	66	23	8	7	4	3	1	141
Positive/Total	16.67%	34.78%	33.33%	34.78%	75.00%	14.29%	0.00%	0.00%	0.00%	32.62%

\* Per patient



**F. COMMUNITY HEALTH – SNPHL – Calendar Year Data**

February Services	2022	2023	
Clinical Testing Services <sup>1</sup>	3,602	4,300	↑
Epidemiology Services <sup>2</sup>	548	1,764	↑
State Branch Public Health Laboratory Services <sup>3</sup>	11,296	4,795	↓
All-Hazards Preparedness Services <sup>4</sup>	9	6	↓
Environmental Health Services <sup>5</sup>	0	0	

<sup>1</sup> Includes N. Gonorrhoeae culture, GISP isolates, Syphilis, HIV, CT/GC molecular, Gram stain testing, and COVID Ab immunologic tests.

<sup>2</sup> Includes Stool culture, EIA, Norovirus PCR, Respiratory Pathogen PCR, Epidemiological investigations, or consultations.

<sup>3</sup> Includes COVID PCR, WGS, and LRN testing, proficiency samples, reporting to CDC, courier services, infectious substance shipments, teleconferences, training, presentations and inspections, samples submitted to CDC or other laboratories' submissions.

<sup>4</sup> Includes Preparedness training, teleconferences, and inspections.

<sup>5</sup> Includes vector testing