

**Population Health Division
Division Director Staff Report
Board Meeting Date: July 24, 2025**

DATE: July 16, 2025

TO: District Board of Health

FROM: Nancy Diao, ScD, PHD Director
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SUBJECT: **Population Health** – Epidemiology, Public Health Preparedness, Emergency Medical Services Oversight, Vital Statistics, Chronic Disease and Injury Prevention, Sexual Health Investigations and Outreach, Statistics and Informatics

Division Update

July 1, 2025, marks the official launch of the newly named Population Health Division (PHD), and the integration of the Sexual Health Investigations and Outreach Program and the Chronic Disease and Injury Prevention Program into the division. In addition, we were pleased to welcome our new Statistics and Informatics Supervisor in June, who will lead efforts in data design, governance and analytics.

The Population Health Division is dedicated to advancing preparedness, prevention, surveillance, and data-driven strategies to promote overall community well-being through strong collaboration with our partners.

In this report, updates for the Sexual Health Investigations and Outreach team as well as Chronic Disease and Injury Prevention team are in the Community and Clinical Health Services (CCHS) Division report, as they reflect activities in June. Beginning with the August DBOH report, updates for these programs will appear under the Population Health Division.

Epidemiology Program

Respiratory Virus Surveillance

Respiratory season began in MMWR week 40, September 29, 2024, and has officially closed in MMWR week 20, May 17, 2025. Through the months of June-September, weekly updates on the respiratory dashboard will only continue for the COVID data, including number of weekly new cases, average new cases per day, cases/100K per week, weekly cases/100K, and weekly hospitalizations.

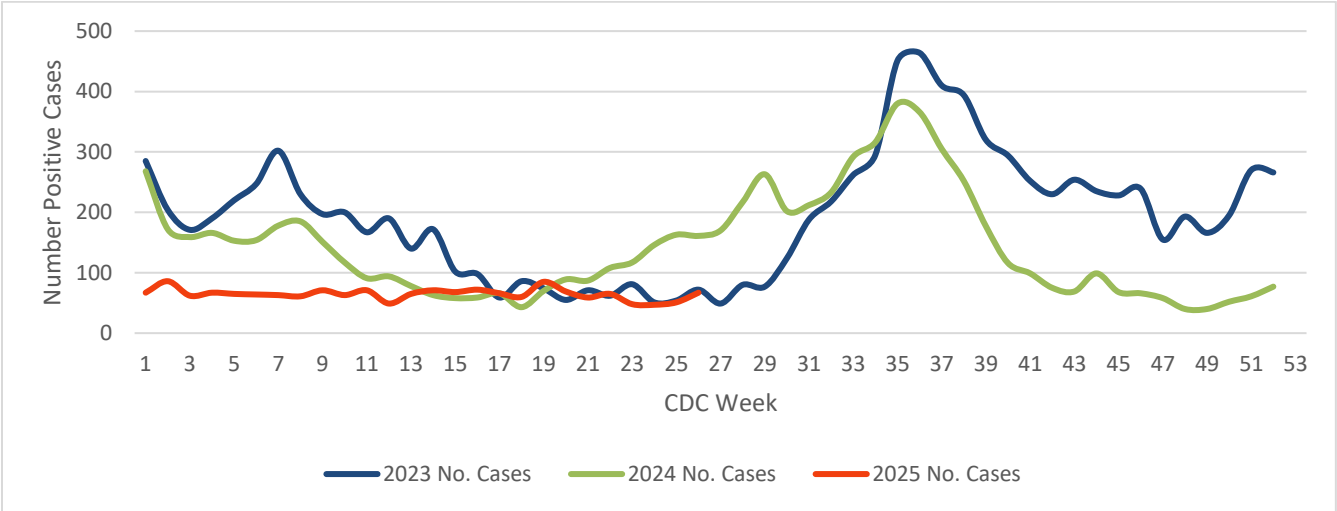
The respiratory dashboard can be found here, with tabulations for COVID-19 available in the navigation pane to track the specified indicators.

<https://www.arcgis.com/apps/dashboards/5856e5af35274420960675bfb2b65c94>

SARS-CoV-2 (COVID-19) – During the month of June, 222 new COVID-19 cases were reported among Washoe County residents (data as of 07/02/2025). Figure 3 provides an overview of the total number of confirmed COVID-19 cases in Washoe County by MMWR week following calendar years starting in 2023.

Cases of COVID-19 are currently low and stable in the month of March and have been averaging less than 20 cases by 100k residents per week since MMWR week 49.

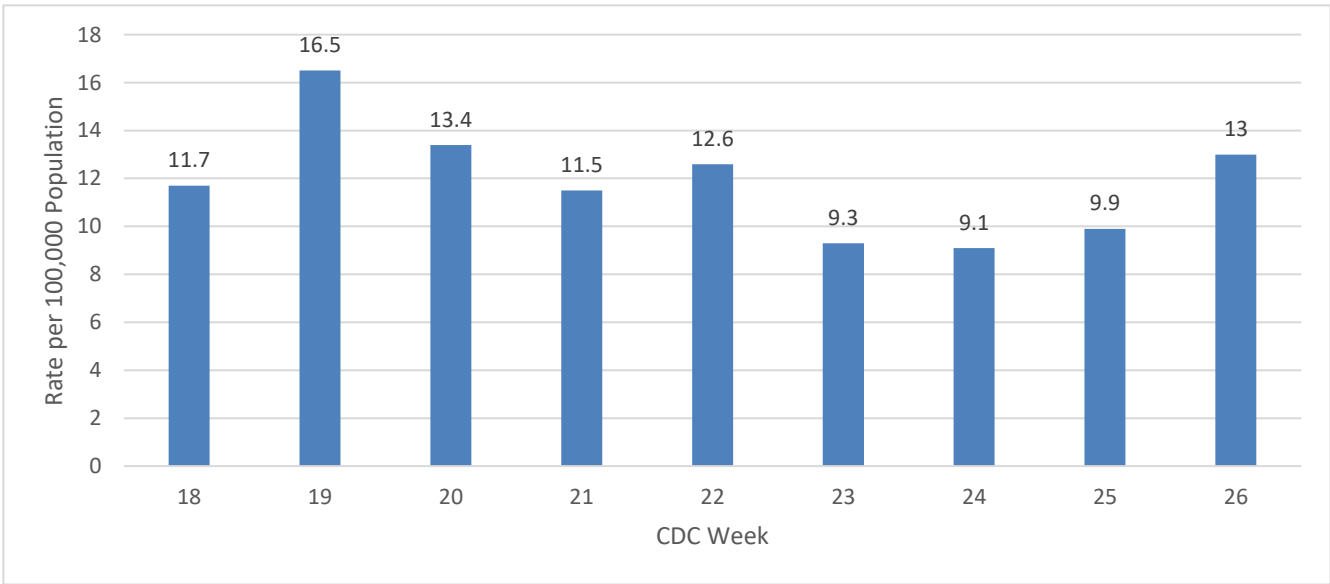
Fig 1. Total Number of COVID-19 Cases by Week of Report Date in Washoe County from 2023 through 2025†



† There is no MMWR week 53 in 2023 or 2024. Note: Data are displayed by calendar year.

Figure 4 illustrates the number of new cases by report date per 100,000 population over a nine-week period spanning April 27, 2025, through June 28, 2025. As of MMWR week 26, Washoe County received reports of 13 new cases per 100,000 population.

**Fig 2. Newly Reported COVID-19 Cases Per 100,000 population by MMWR Week
April 27, 2025 – June 28, 2025, Washoe County**

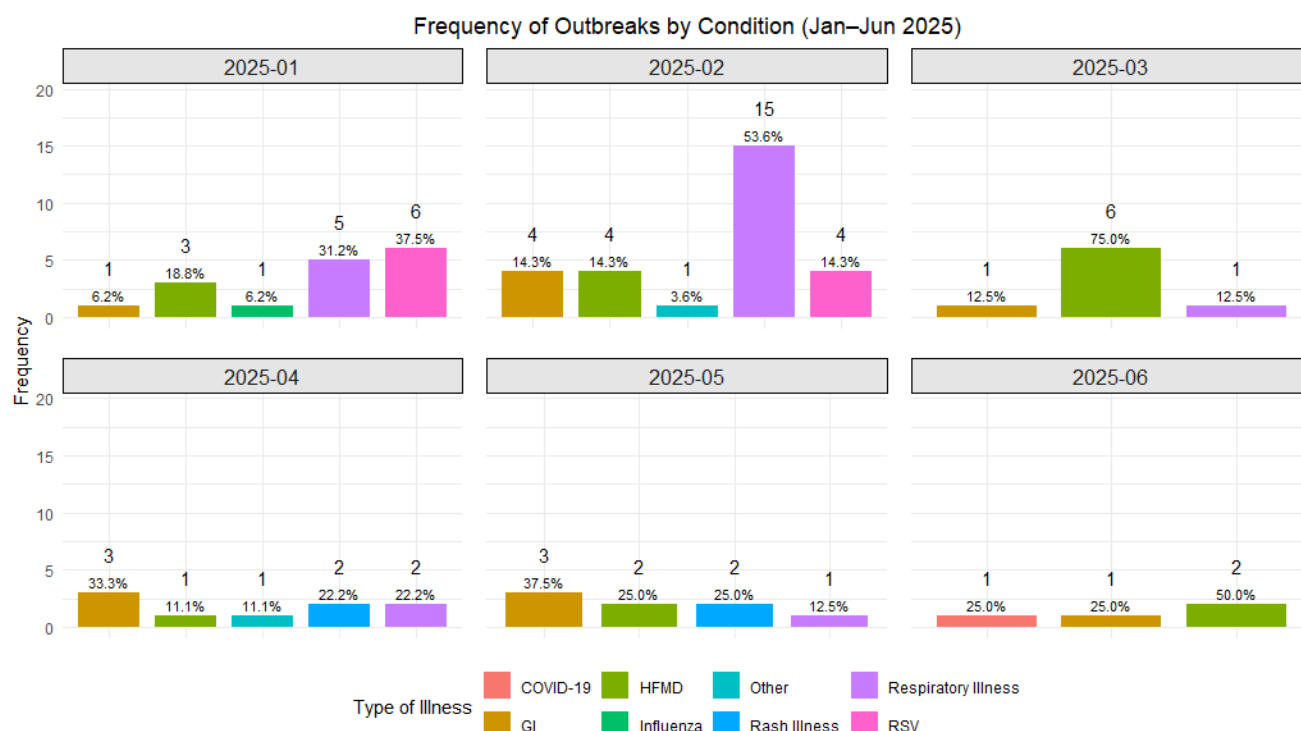


Outbreaks – There have been 4 newly declared outbreaks in May 2025; zero (0) influenza confirmed, zero (0) respiratory illness of unconfirmed etiology, zero (0) RSV, one (1) gastrointestinal, three (3) hand, foot, and mouth disease, zero (0) rash illness of unconfirmed etiology, and zero (0) other.

Table 1: Number of Outbreaks Declared by Type and Month, 2025												
Type	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec
Gastrointestinal Illness	1	4	1	3	3	1						
Respiratory Illness	11	19	1	2	1	0						
Influenza Confirmed	1	0	0	0	0	0						
COVID-19 Confirmed	0	0	0	0	0	0						
Rash Illness	3	4	6	3	4	3						
Other	0	1	0	1	0	0						
Total	16	28	8	9	8	4						

Note1: Data obtained as of July 2, 2025, at the time of this report, and will be revised in the next report if there are updates.
Note2: Respiratory illnesses include RSV outbreaks. Note3: 'Other' in February 2025 and April 2025 includes outbreaks with multiple etiologies.

Fig 3. Monthly Outbreaks by Condition from January 1st, 2025, to June 30th, 2025, in Washoe County



Epi News – Epi News is a brief (1-3 page) newsletter that has been produced and disseminated by the Epidemiology Program since 1997. Epi News publications are emailed and faxed to 700-800 subscribers, are topic dependent, and are available at <https://www.nnph.org/programs-and-services/ephp/communicable-diseases-and-epidemiology/epi-news/index.php>.

In June, there were three (3) Epi News newsletters published:

- **Vector-borne Diseases: Mosquito Season 2025:** This Epi News was released in preparation for the summer seasons when certain vector activity increases, particularly mosquito season when the weather is warmer but pools of freshwater are more accessible to mosquitoes. It provides a general overview of mosquito-borne diseases, mosquito life cycles, and general data. To promote prevention of mosquito bites and reduce breeding grounds, there is a section detailing general barriers to protect oneself as well as information prior to traveling to areas known for increased mosquito activity or more prevalent disease exposures. It provides information to encourage reporting of vector-borne diseases to Washoe County as well as the list of reportable conditions, including mosquito-borne conditions.
- **Hepatitis A Virus:** This Epi News proceeds Hepatitis Awareness Month and specifically focuses on the hepatitis A virus (HAV). Los Angeles, California, is experiencing a HAV outbreak, and NNPH used the Epi News to spread awareness about this virus. It details the clinical manifestations of HAV, particularly its impact on the liver and typical forms of transmission. There are data comparing recent trends in the United States and Washoe County as well as the most common risk factors experienced among these populations. To encourage prevention activities to disrupt potential spread, information about the vaccination and general recommendations for vaccination are listed as well as general facts regarding diagnosis, testing, and reporting.
- **Toxin and Non-Toxin Producing *C. diphtheriae*: Recognition, Risks, and Reporting:** This Epi News provides background the classification of respiratory diphtheria versus cutaneous diphtheria, an emerging issue in the United States and worldwide. To encourage more awareness about this lesser-known condition, information is provided about toxin and non-toxin producing strains of *C. diphtheriae*, the impact of the vaccine of prevention. This Epi News is a first release focusing on non-toxigenic *C. diphtheriae*, providing overviews of the difference in reporting, general trends, and the clinical presentation of respiratory diphtheria and cutaneous diphtheria. Following these distinctions, there is information about treatment lanes for each manifestation as well as risk factors and prevention approaches to reduce those risk factors.

General Communicable Diseases – The EpiTrax reporting system is continuously receiving feedback and updates. Several validation processes are in place to verify reporting is accurate. During May 2025, there were 242 positive labs reported, with 57% resulting in a confirmed, probable, or suspect case. During June 2025, there were 206 positive labs reported, with 42% resulting in a confirmed, probable, or suspect case.

Epidemiology Program Cross Divisional Projects -

Extensively Drug-Resistant Organisms (XDRO) database – The Epidemiology Program was working with Tech Services to build a database for storing and tracking cases reported with carbapenem producing organisms (CPO) and *Candida auris* infections, both of which are now recognized as chronic infectious diseases and have the potential to spread from patients to clinicians as well as surfaces and are highly resistant to antimicrobial treatments. These types of infections are being closely monitored from CDC as emergent infections and NNPH has built a strong Healthcare Associated Infection (HAI) prevention program to coordinate, detect, and mitigate spread once these cases are identified. TS has built the front end, secure login portal, and migrated existing data

that NNPH'S Epidemiology Program has tracked since 2018. The NNPH HAI Coordinator epidemiologist has started to enter data received into the new database. Area hospitals were contacted to explore the logistics required on electronic feeds of admissions data. Current drafted user agreements are approved for use and have been distributed to hospital partners. Business Associate Agreements are also created with each hospital prior to onboarding. The HAI Coordinator and TS are currently working with three hospitals to officially integrate and one hospital has onboarded successfully.

Foodborne Disease Detection Database (FD3) – The Epidemiology Program is going through an extensive process in building a database to detect and track foodborne, waterborne, and other enteric illnesses. This database will house both lab-confirmed cases received and interviewed by epidemiologists as well as food-establishment complaints received by the Environmental Health Services Division staff. The multiple data inputs into a single database that should assist in earlier detection of potential outbreaks and trends in enteric conditions and illness. Due to complex coding requirements, Epidemiology Program staff have worked with the CDC to help design and implement the database. The current data system building process is temporarily on halt because the Epidemiology team was notified by CDC's support team that the database platform hosted by CDC will be phasing out by September 2025. Alternative platforms and data structure migrations were explored, with REDCap selected as the new database system to house FD3. REDCap, known as "Research Electronic Data Capture," is a secure, web-based application used by researchers to build and manage online surveys and databases. The Nevada Department of Health and Human services are members of the national consortium and administer its usage as an open-source tool for robust data collection. Migration of the database is underway. The Epidemiology Program has met with several local and state health departments around the country for live demonstrations of supplemental data collection instruments to better understand their application and use. This cross-jurisdiction collaborative provided an overview of the migration of electronic survey software, such as REDCap. and discussed the challenges and successes in integrating these data into existing surveillance systems. Epidemiology has also explored the REDCap Shared Library and received metadata from state and various local health departments to retrofit existing surveys for exploratory use in Washoe County, leading to enhanced disease surveillance and epidemiologic investigation.

Public Health Preparedness (PHP) Program

The June DBOH report highlighted the *No Fault of Our Own* earthquake exercise, which was the result of eight months of planning. This initiative included one workshop, two full-scale exercise days, and an internal tabletop exercise focused on COOP planning for the Health District. Additionally, the University of Nevada, Reno used the same scenario for its *Interprofessional Care 2025* exercise on May 22. These exercises were well attended and provided a significant training opportunity for staff across multiple jurisdictions. The After-Action Meeting for the No Fault of Our Own Earthquake Exercise was held on June 16, 2025. During this meeting, community partners reviewed exercise outcomes, identified strengths and areas for improvement, and began developing corrective actions. These lessons learned will be integrated into relevant emergency operations plans and procedures to enhance future response capabilities.

PHEP staff coordinated a Pet Emergency Preparedness training on June 3, 2025, in collaboration with Washoe County Animal Services. The course covered steps pet owners can take to keep pets safe during emergencies. A total of 23 participants attended the training sessions.

The PHP program also facilitated the training course MGT-348: Medical Preparedness and Response to Bombing Incidents, taught by the Texas A&M Engineering Extension Service at the Regional Emergency Operations Center. The course was designed for personnel who may be involved in community responses to bombing incidents and focused on enhancing medical readiness for blast-related emergencies. Twenty-nine students from the community attended, including staff from hospitals, emergency management, law enforcement, fire agencies, NNPH, Medical Reserve Corps (MRC), and Community Emergency Response Team (CERT).

PHP staff participated in two Statewide Strategic Planning workgroup meetings in June. These workgroups support ongoing alignment with the Statewide Public Health Preparedness Strategic Plan and will contribute the updated information to guide future planning.

Community partners requested assistance from the PHEP team to support an exercise centered on a Washoe County Radiation Responder Guide. This guide is based on the *Homeland Security Radiological Dispersal Device Response Guidance: Planning for the First 100 Minutes* and has been a recent focus for CBRNE responders in Washoe County. Planning began on June 3rd for a new radiation-focused exercise, with weekly planning meetings commencing on June 10. This upcoming "Beta Burn" exercise will be delivered in two parts: a morning tabletop/functional exercise that provides hands-on training and education on Radiological Dispersal Device (RDD) response, followed by an afternoon practical functional exercise using radiation sources at the Regional Public Safety Training Center (RPSTC). The exercise will involve law enforcement, fire services, EMS, the National Guard, and the FBI to strengthen multi-agency coordination during a Weapons of Mass Destruction (WMD) event.

The PHEP program continues to support local public, private, and charter schools by reviewing and providing feedback on their Emergency Operations Plans (EOPs). Nevada schools are required to collaborate with emergency management and public health during their EOP development. On June 2, 2025, PHEP staff met with Our Lady of Snows to assist with their planning efforts.

In June 2025, the following emergency response plans were reviewed, updated, and approved by the District Health Officer:

- Emergency Operations Plan
- Pandemic Influenza Preparedness and Response Plan (PIPRP)
- Point of Dispensing Operations Manual
- Medical Countermeasures Distribution and Dispensing Plan
- Chemical, Biological, Radiological, Nuclear, and Explosives (CBRNE) Plan

These plans outline NNPH's approach to emergency response and will support the district's application for Project Public Health Ready, a NACCHO program that recognizes public health agencies that meet national standards for emergency preparedness.

Finally, PHP staff participated in the National Emergency Management Basic Academy training, a foundational training for professionals entering the emergency management field. This program combines essential knowledge and practical skills. PHP staff completed the following courses:

- L0102: Science of Disaster (June 2–4, 2025)
- L0103: Planning – Emergency Operations (June 5–6, 2025)
- L0105: Public Information Basics (June 25–27, 2025)

These training courses build a strong foundation to support future emergency planning and response.

Healthcare Preparedness Program (HPP)/Inter-Hospital Coordinating Council (IHCC) –

The Multi-Casualty Incident Plan (MCIP) and Alpha MCIP have undergone substantial revisions, incorporating lessons learned from recent incidents and regional exercises. These updates align with current state and federal guidance and are intended to strengthen operational coordination among healthcare facilities, EMS, and public health agencies. Final drafts of both plans were approved by the coalition in June.

In addition, the coalition approved the newly developed High-Consequence Infectious Disease (HCID) Community Response Plan, which outlines local strategies for managing and containing outbreaks of emerging or re-emerging infectious diseases. The plan emphasizes coordinated communication, infection control measures, resource sharing, and public health support during infectious disease events.

The After-Action Meeting for the *No Fault of Our Own Earthquake Exercise* was held on June 16. During this meeting, community partners reviewed exercise outcomes, identified strengths and areas for improvement, and began developing corrective actions. These lessons learned will be integrated into relevant emergency operations plans and procedures to enhance future response capabilities.

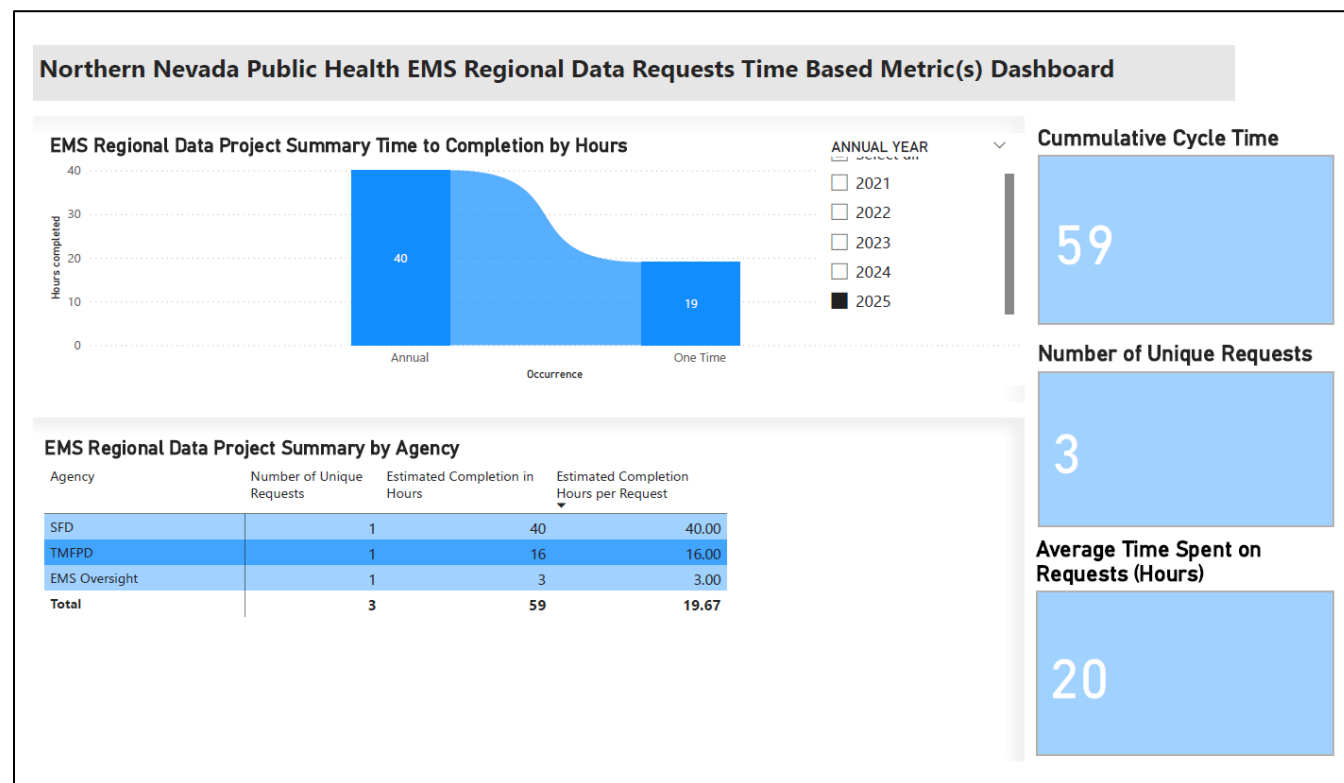
Looking ahead, HPP staff have partnered with the Texas A&M Engineering Extension Service (TEEX) to sponsor a series of FY26 trainings focused on weapons of mass destruction (WMD) and biological incident response. These sessions will support ongoing efforts to strengthen specialized capabilities within the healthcare and public health sectors.

Throughout June, HPP staff also participated in the FEMA Emergency Manager Basic Academy, gaining valuable knowledge in key areas such as public information officer responsibilities, risk communication, response coordination, exercise design, and weather-related impacts on emergency operations. This training enhances the team's capacity to support planning and response efforts during complex, multi-hazard events.

HPP staff continue to participate in the weekly Hospital Net ham radio communications drill, which includes hospitals across Northern Nevada and Eastern California. This ongoing activity supports redundant communication capabilities essential for effective coordination during disasters.

Emergency Medical Services (EMS) Oversight Program

EMS Data Request Dashboard – For June 2025, the program did not receive data request.



REMSA Health Exemption Requests -

Exemption	System Overload	Status 99	Weather	Other	Approved
July 2024	14	-	-	-	14
August 2024	42	-	-	-	42
September 2024	21	-	-	86*	107
October 2024	13	-	-	-	13
November 2024	10	-	-	-	10
December 2024	32	-	-	-	32
January 2025	35	-	13	-	47
February 2025	-	-	-	-	-
March 2025	-	-	-	-	-
April 2025	4	-	-	-	4
May 2025	4	1	-	-	5
June 2025	19				19
Fiscal Year-To-Date	194	1	13	86	294

*The “Other” exemptions were approved under the Exemptions Guidelines of declared emergency for the Davis Fire.

REMSA Health Call Compliance – The franchise area is divided into response zones. The response zones will have response time compliance standards for all Priority 1 calls indicated below. Due to low call volumes in the separately defined response zones B, C and D, REMSA Health compliance response will be calculated in accordance with the Amended and Restated Franchise Agreement for Ambulance Service dated February 23, 2023, as combined Zones B, C, and D for all Priority 1 calls. Table 2 shows REMSA Health's compliance rate for FY 2024.

- Zone A – REMSA Health shall ensure that **90%** of all presumptively defined life-threatening calls (Priority 1 Calls) have a response time of eight (8) minutes and 59 seconds or less within the combined Zone A areas.
- Zones B, C, and D – REMSA Health shall ensure that **90%** of all presumptively defined life-threatening calls (Priority 1 Calls) collectively have a response time of; 15minutes and 59 seconds or less for the combined Zone B areas, 20 minutes and 59 seconds or less for the combined Zone C areas, and 30 minutes and 59 seconds or less for the combined Zone D areas.

Table 2. REMSA Health Percentage of Compliant Priority 1 Responses by Zones FY 2025		
Month*	Zone A	Zone B, C, and D
July 2024	90	96
August 2024	92	91
September 2024	91	95
October 2024	91	90
November 2024	89	89
December 2024	91	97
January 2025	91	95
February 2025	86	90
March 2025	90	90
April 2025	91	91
May 2025	91	93
June 2025	90	95
Fiscal Year-To-Date*	90	93

*Fiscal Year-to-date is the percentage calculated using the sum of all to-date "Chargeable Late Responses" divided by "Compliance Calculate Responses".

Community Services Department (CSD) – Memo Review: The EMS Oversight Program staff reviews and analyzes project applications received from the City of Reno Housing and Neighborhood Development and the Planning and Building Division of the Washoe County Community Services Department, providing feedback as needed. During June, the program staff received zero (0) and reviewed three (3) applications received in May and did not have any concerns that would affect EMS response.

Mass Gatherings/Special Events: The EMS Oversight Program received and reviewed zero (0) applications for Mass Gatherings/Special Events in June.

Vital Statistics

Vital Statistics has continued to serve the public through the mail, online, and in person. Program staff also submit weekly records on decedent information for HIV/AIDS and a monthly update to senior services.

Table 1: Number of Transactions for Birth and Death Records- June 2025

June	In Person	Mail	Online	Total
Birth	849	16	557	1422
Death	1736	13	433	2182
Total	2585	29	990	3604

Table 2: Number of Records Processed by Vital Statistics Office- FY 2025

		2024						2025						Total
		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	
Birth														
	Registrations	450	532	473	502	411	504	453	424	476	441	506	470	5642
	Corrections	93	71	75	55	37	76	71	73	94	55	75	43	818
Death														
	Registrations	478	437	478	481	447	523	530	523	533	552	461	490	5933
	Corrections	7	6	13	8	10	10	17	21	12	17	8	24	153