

Community and Clinical Health Services Division Director Staff Report Board Meeting Date: May 23, 2024

DATE: May 3, 2024

TO: District Board of Health

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SUBJECT: Community and Clinical Health Services – Divisional Update – National Adolescent

Health Month; Data & Metrics; Sexual Health (Outreach and Disease Investigation), Immunizations, Tuberculosis Prevention and Control Program, Reproductive and Sexual Health Services, Chronic Disease Injury Prevention Program, Maternal Child and

Adolescent Health, Women Infants and Children, and Community Health Workers

1. Divisional Update

a. National Adolescent Health Month -



May is National Adolescent Health MonthTM (NAHM). NAHMTM is an annual observation by the Office of Population Affairs (OPA) that aims to emphasize the importance of building on young people's strengths and potential as well as encouraging meaningful youth engagement in adolescent health activities. Throughout the month, OPA has a weekly theme that highlights how individuals and communities can work to create change that benefits adolescent health.

This year, NAHM™ is focusing on Take Action for Adolescents – A Call to Action for Adolescent Health and Well-Being. Take Action for Adolescents is a call to action for adults including policy makers, health care and human service providers, youth-serving professionals and organizations, and caregivers to work collaboratively

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to ensure adolescents can obtain the health care and services they need to thrive, be healthy, and realize their full potential. There are eight goals within Take Action for Adolescents:

- Eliminate disparities to advance health equity
- Increase youth agency and youth engagement
- Ensure access to safe and supportive environments
- Increase coordination and collaboration within and across systems
- Expand access to health care and human services
- Strengthen training and support for caring adults
- Improve health information and health literacy
- Support, translate, and disseminate research

Where adolescents live and the resources available to them can affect how easy it is for them to obtain health care or have access to other services. For example, prior to 2023 an adolescent could not consent to contraceptive services without parent permission unless they were receiving care in a Title X clinic in the state of Nevada. For an adolescent who lives someplace rural such as Gerlach, or even someplace closer such as Incline Village, that would mean having the resources to travel over 30 miles to access contraceptive care in Reno or Carson City. In 2023, the Nevada State Legislature enacted legislation that will have a lasting impact on eliminating health disparities and expanding access to health care for adolescents. Senate Bill 172 allows minors to consent to contraceptive services and testing, treatment, and prevention of sexually transmitted infections without parental permission. The passage of this legislation increases much needed access to reproductive and sexual health care for adolescents in Washoe County and Nevada.

Access to factual reproductive and sexual health information and care is fundamental to the decreasing adolescent pregnancy rate in Nevada and nationwide. The United States and Nevada continue to see a decrease in the teen birth rate. In 2021, the teen birth rate in Nevada fell to 15.1 births per 1,000 females aged 15–19. This is compared to 16.8 births per 1,000 females aged 15-19 in 2020. Factors that contributed to the decrease in the teen birth rate include the number of adolescents delaying sexual intercourse and the increased use of contraception. The increased use of contraception is attributable to publicly funded family planning programs. Consistent use of contraception such as hormonal methods coupled with the correct and consistent use of condoms decreases the risk of both pregnancy and sexually transmitted infections.

Having a positive connection with at least one caring adult is a large protective factor for adolescents. Caring adults include a wide variety of adults but, more importantly, a caring adult is someone who makes sure an adolescent is healthy and safe, equips them with the skills and resources to succeed as an adult, and instills cultural values. Research shows that a strong caring adult-teen connection helps adolescents:

- Wait longer to start having sex
- Use birth control if they are sexually active
- Use condoms consistently and confidently if they are sexually active

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- Improve school achievement
- Lower the chance of unwanted pregnancy
- Lower the risk of HIV and sexually transmitted infections
- Lower the chance that teens will use drugs
- Help teens stay away from violence

Adolescents go through many physical, mental, and social changes. Having a caring adult that can provide accurate information and context to these changes will help adolescents understand how their bodies work and how specific behaviors can impact their health now and in the future.

Access to the internet and social media has changed how people access health information and this is certainly true for adolescents. The COVID-19 pandemic demonstrated the effects of health misinformation found on many social media platforms. Although there is no data available yet, a similar trend appears to be happening with health misinformation related to contraception that is targeted to adolescents. The algorithms developed by social media platforms provide a stream of videos or messaging that reinforce health misinformation about contraception. It is vital that in addition to providing accurate and clear health information, adolescents are also taught how to build their health literacy skills by a caring adult.

At Northern Nevada Public Health (NNPH), we are continually implementing measures to Take Action for Adolescents. The Family Planning Sexual Health Clinic provides confidential reproductive and sexual health care to adolescents. The Family Planning Sexual Health Clinic provides contraception counseling and provision and testing, treatment, and prevention measures for sexually transmitted infections. Adolescents are counseled to resist sexual coercion, encouraged to seek the support of their caring adult, and are screened for depression and substance use. Access to other health care and human service resources are available via referral to a Community Health Worker. Additionally, the Family Planning Sexual Health Clinic offers walk-in appointments daily to accommodate adolescents who may not be able to access services by making and keeping an appointment.

Research suggests that implementing evidence-based teen pregnancy prevention programs is one strategy to prevent teen pregnancy. At NNPH, the Community Health Worker team has partnered with Planned Parenthood Mar Monte to deliver two evidence-based teen pregnancy prevention interventions.

Plan A is an engaging, brief, entertainment-education video intervention designed to reduce unplanned pregnancies and sexually transmitted infections (STIs) among young women. Plan A was developed after OPA identified a need for an evidence-based intervention for Black and Latina people assigned female at birth. A randomized control trial found Plan A was effective at reducing behavioral risk factors underlying teen pregnancy and increased HIV/STI risk perception and increased contraceptive knowledge among viewers. Plan A is offered by the Community Health Workers to people ages 16-24 with a uterus. The intervention is also available in Spanish.

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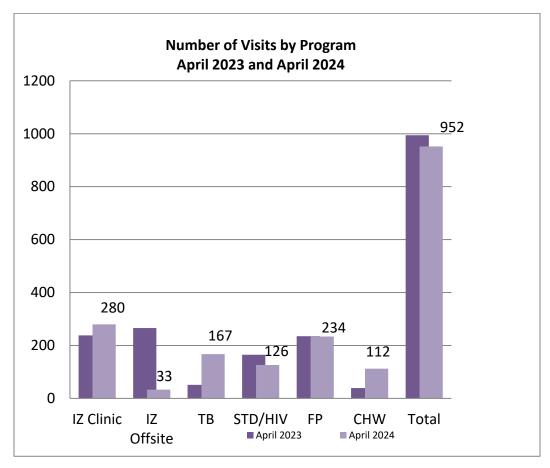
The second evidence-based teen pregnancy prevention intervention offered at NNPH is LiFT – Linking Families and Teens. LiFT is a 6-hour program that brings teens 13-19 and their caring adult together to learn to share family values, strengthen bonds, and talk about tough-stuff topics like sexual health and healthy relationships. The goal of LiFT is to encourage teens to open up to their caring adult, help caring adults support teens in making healthy choices and achieving their goals and connect caring adults to other adults in the community. Data collected after the LiFT program shows that these goals are being met with more tough conversations being had and both adults and teens having the skills and confidence to have these tough conversations.

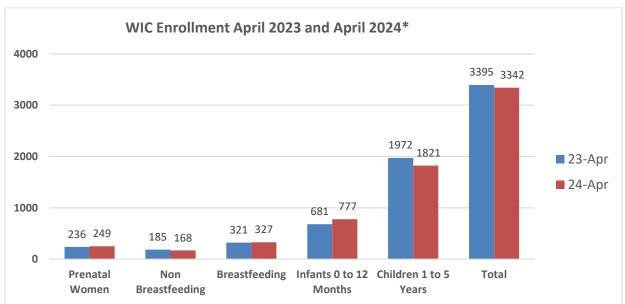
Adolescence can be tumultuous and wonderful all at the same time. Between the ages of 10-24 an adolescent's role in society changes as they are expected to go from childhood to managing their own health, finances, and general life. Answering the call to action in Take Action for Adolescents can generate a "triple dividend" – health for adolescents now, a healthy adult life, and better health for the next generation.

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b. Data/Metrics





*Changes in data can be attributed to several factors including fluctuations in community demand, changes in staffing and changes in scope of work/grant deliverables

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WIC Participation Numbers in the Past Year		
Month	Enrollment	Participation w/ Benefits
April 2023	3395	2913
May 2023	3415	3003
June 2023	3388	3042
July 2023	3446	3075
Aug 2023	3493	3095
Sept 2023	3449	3040
Oct 2023	3406	3020
Nov 2023	3408	3031
Dec 2023	3415	2908
Jan 2024	3357	3076
Feb 2024	3328	3103
March 2024	3342	3114
April 2024	3342	3114
Monthly avg % change Apr	3399	3041
2023 / Apr 2024	-1.56%	6.90%

WIC participation numbers

Enrollment: All those enrolled in WIC: (women who are pregnant, breastfeeding, or postpartum; infants; and children up through age 5) Participation with Benefits: All enrolled WIC participants receive food benefits except

- Infants that are exclusively breastfed
- Breastfeeding mothers whose infants receive more than 4 cans of formula per month

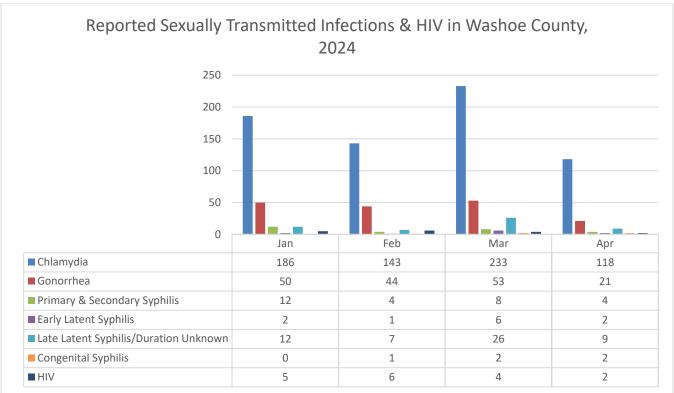
2. Program Reports – Outcomes and Activities

a. **Sexual Health (Outreach and Disease Investigation)** – Gonorrhea has progressively developed resistance to the antibiotic drugs prescribed to treat it. Following the spread of gonococcal fluoroquinolone resistance, the cephalosporin antibiotics have been the foundation of recommended treatment for gonorrhea. The emergence of cephalosporin-resistant gonorrhea would significantly complicate the ability of providers to treat gonorrhea successfully, since we have few antibiotic options left that are simple, well-studied, well-tolerated and highly effective. It is critical to continuously monitor resistance and encourage research and development of new treatment regimens. The Sexual Health team is working with CDC and the Nevada State Public Health Laboratory on a possible case of drug resistant gonorrhea.

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Preliminary data for year to date and April case counts are available below. This data is subject to change and will be updated for next month's report.



b. **Immunizations** – The immunization team continues to focus on providing vaccines to individuals who are uninsured or underinsured that may not be able to receive vaccines elsewhere. Clinic staff vaccinated 275 clients while providing a total of 791 routine vaccinations in April. The clinic is still providing both flu and COVID-19 vaccines, with a total of 59 flu vaccines and 28 COVID-19 vaccines administered in April. Walk-ins continue to be accepted daily. Staff offer community provider education regarding vaccine storage and handling and inventory, in addition to addressing special medical and employee vaccine cases.

In April, offsite staff provided a total of 24 COVID vaccines and 24 flu vaccines. In addition, there were five community COVID and flu events. Staff continue to participate in the Mobile Harvest – Food Bank, held the first Tuesday of every month to offer COVID and flu vaccines and vaccine information to the community. In addition, staff joined two other Mobile Harvest locations and the ACDC Thai New Year event. The final community event was the kick-off for Back-To-School vaccination efforts at Dillworth Middle School orientation. Staff vaccinated 10 students with 37 doses of vaccines provided. There are three events planned for May; to include an additional middle school, a high school, and the Family Health Festival. Planning activities have also commenced for June, July, and August Back-To-School events.

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VFC (Vaccines for Children) Compliance and IQIP (Immunization Quality Improvement for Providers) visits continue. Site reviewer staff recognize the recent addition of BRIDGE/317-funded compliance activities for the remainder of the year, to address the federally funded adult populations, with state-led directives pending. One compliance visit and seven follow-up visits were completed in April, with several scheduled through the remainder of the fiscal year. The team is on target to meet NSIP required activities and plan to conduct visits and/or trainings with five new provider sites in Washoe County. The team attended the NSIP Statewide Meeting on April 29, 2024, to obtain updates and plans for the coming year, network with other jurisdictions, and collaborate on activities and funding.

The program plans to conclude a quality improvement project in May, which has focused on increasing vaccine communication and completion rates for adolescent immunizations, namely Meningococcal B and HPV vaccines. In addition, program staff continue the development, case management, and reporting activities for the Perinatal Hepatitis B Prevention Program (PHBPP) with twelve cases currently under management.

- c. **Tuberculosis Prevention and Control Program** The TB program currently has five cases of active TB. Two cases of extra-pulmonary TB and three cases of pulmonary TB. In the month of April, the clinic assumed care for one newly diagnosed case of pulmonary TB. This case is medically complex and will require a large amount of work to get them stable and fully recovered from TB. The clinic is working to get the patient established with primary care. Establishing a newly diagnosed TB patient with primary care is a critical piece to managing TB disease effectively. In addition to the five active cases, the clinic is also managing medication and care for thirty-four cases of LTBI.
- d. **Reproductive and Sexual Health Services** The Family Planning Sexual Health Program is excited to announce the addition of Doxy-PEP to the sexual health prevention services offered in the clinic. Doxy-PEP or, doxycycline as post-exposure prophylaxis, has been shown to significantly reduce acquisition of chlamydia, gonorrhea, and syphilis in men who have sex with men and transgender women. Clients using Doxy-PEP take 200mg of doxycycline within 72 hours of condomless sex to reduce their risk of chlamydia, gonorrhea, and syphilis. Clinic APRNs have had multiple clients asking about Doxy-PEP who have been unable to obtain it from other providers, so we are pleased to fill this need in the community. Unfortunately, Doxy-PEP has not been shown to be effective in cisgender women so this intervention will not be used to reduce the risk of congenital syphilis.

In order to increase communication, clinic staff have implemented weekly huddles to communicate new changes or updates. Staff have also made changes to how information is communicated via Teams to ensure intermittent hourly staff stay up to date.

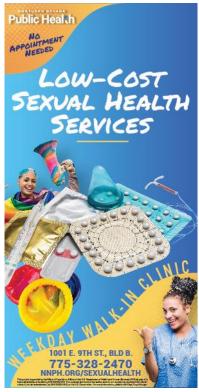
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Nancy Ramirez-Partida, Clinic Assistant, accepted a position in the County Manager's office and her last day was April 19, 2024. At this time, the Clinic Assistant position vacated by Nancy will not be filled. Clinic staff have also changed the clinic schedule to ensure appointments are available on Wednesday mornings and during the lunch hour.

Due to staffing and a lack of utilization of services, the decision has been made to discontinue offering birth control services at the Washoe County Detention Center.

During the month of March, a public service announcement campaign ran to promote the low-cost sexual health services and availability of daily walk-in appointments at NNPH. The campaign consisted of radio spots, digital billboards/posters, and online/digital media spots. During the campaign there were a total of 3.2 million impressions (the number of times the ad is displayed) and 7,361 clicks (measurable interaction with an advertisement or key word that links to the advertiser's intended website) on multiple digital/online platforms. Radio spots ran on a wide variety of stations and formats. In total there were 378 radio spots and 328 bonus spots.



e. Chronic Disease and Injury Prevention (CDIP) Program – Staff attended the Society for Advancement of Violence and Injury Research (SAVIR) conference, held April 15-17th, 2024. The conference highlighted ways in which researchers are engaging communities in a meaningful way to advance injury and violence prevention. This included exploring methods, strategies, and the role of working with community partners, community leaders and others to conduct research,

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outreach, and training activities.

Staff coordinated the Washoe Suicide Prevention Alliance (WSPA) Advisory Group meeting, where Advisory members were informed of the project progress and helped make decisions on next steps for the project.

Staff helped coordinate, promote, and staff the bi-annual Washoe County Rx Drug Take Back event on April 27th. This included helping expand an additional site, community-based, online, and local media promotion, and managing one collection site.

Staff organized the Biketopia event on April 28th in partnership with Reno Public Market and Truckee Meadows Bicycle Alliance. The event kicked off Bike Month which is celebrated during the entire month of May. Fifteen community organizations participated to share information and resources for residents to safely take part in Bike Month, the event attracted about 100 attendees.

Implementation of Power Up Kids launched in 11 classrooms at Peavine, Elmcrest, Loder and Juniper elementary schools. Staff are providing weekly nutrition education and physical activity programming from April until the end of the school year.

f. **Maternal, Child and Adolescent Health** (MCAH) – Maternal, Child and Adolescent Health activities include Lead Screening, Newborn Screening, Cribs for Kids, and Fetal Infant Mortality Review (FIMR).

The NNPH Lead team works with the Nevada Department of Health and Human Services Lead Program Specialist. The NNPH Lead team is currently following fourteen open cases.

Public Health Nurses and Community Health Workers (CHWs) continue to follow-up and provide coordination education and resources on referrals from the Nevada Newborn Screening Program to ensure all infants receive the second newborn screening.

NNPH CHW's held one Cribs for Kids classes in April. CHWs are Baby and Me Tobacco Free facilitators and promote PRAMS (Pregnancy Risk Assessment Monitoring System), Nevada 211 and Nevada Medical Home Portal.

The Fetal Infant Mortality Review Board (FIMR) meets monthly, except for June and December. The FIMR Board met on April 18, 2024, and reviewed three cases. One interview was scheduled. Data cleaning is progressing for 2022-2023 information. Staff attended the webinar "At a Crossroads: The Syndemic of Syphilis, Substance Use and Child Welfare During Pregnancy" on April 16, 2024, "Our Future Belongs to Us: Amplifying Innovations in Black Maternal Health" on April 11, 2024, "Gender Inclusion in the Fatality Review" on April 11,2024 and "Perinatal Loss: Improving Care for Families"

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on April 17, 2024. Staff promoted Black Maternal Health Week working with the communications team for social media posts on LinkedIn, and the NNPH Facebook page. Staff submitted a donation application to United Health Care Health Plan of Nevada. Maricruz Schaefer presented to UNR and Unitek Nursing Students.

Staff continue to provide updates on fetal and infant deaths at the Washoe County Community Child Death Review as requested. The last Child Death Review meeting was held on March 31, 2024. Child Death Review Meetings are held every other month.

The Northern Nevada Maternal Child Health Coalition (NNMCHC) met on April 11, 2024. The Coalition is currently co-chaired by NNPH FIMR staff members Rebecca Gonzalez and Kelcie Atkin and Maricruz Schaefer as treasurer. The NNMCHC hosted a speaker from Silver Summitt Health Plan on benefits available to members.

g. Women, Infants and Children (WIC) – WIC leadership and a Community Health Worker met with a team from the University of Nevada, School of Medicine Family Medicine Center, operated by Renown. Collaboration and partnership ideas were discussed related to their Centering Program for pregnant women and infants and could provide opportunities to enroll clients into WIC during pregnancy or at their initial 2-month checkups.

The first round of interviews took place for the vacant Human Services Support Specialist position. A second round and hiring for that position is expected in May.

h. Community Health Workers (CHWs) – The CHWs assisted 112 clients in April with access to health care and social service resources. The number of clients continues to increase each month due to more streamlined processes for referrals and cross training of CHWs to assist in all CCHS programs. CHWs also conducted 8 outreach activities. The CHWs continue to partner with the Immunizations Program to attend Mobile Harvest events. At these events, the Immunizations Program provides vaccines and the CHW connects with people waiting in line for food to provide resources and information offered at NNPH. In addition to the Mobile Harvest events the CHWs conducted outreach at TMCC's Take Back the Night event, the North Valleys Family Resource Center, and the Silver Summit Community Baby Shower.

The CHWs are currently in the process of developing a billing protocol to bill Medicaid for CHW services provided in the Family Planning Sexual Health Clinic. The CHW team is evaluating services currently provided and ensuring they are billable under Medicaid rules. The CHWs have a goal to begin billing Medicaid for CHW services by June 1st. Additionally, the CHWs are also evaluating current responsibilities within CCHS programs to ensure they fall within the role of the CHW.

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On Saturday, April 20th the CHWs partnered with Planned Parenthood Mar Monte to provide LiFT – Linking Families and Teens. There were nine teen participants along with their seven supportive adults. Feedback from the program has been positive with adults enjoying time to connect with other adults and teens learning strategies for having difficult conversations as well as their rights around sexual health. The CHWs are hoping to continue this collaboration with Planned Parenthood and offer the next LiFT program for bilingual participants in the fall or winter.