

**Community and Clinical Health Services
Division Director Staff Report
Board Meeting Date: April 25, 2024**

DATE: April 5, 2024

TO: District Board of Health

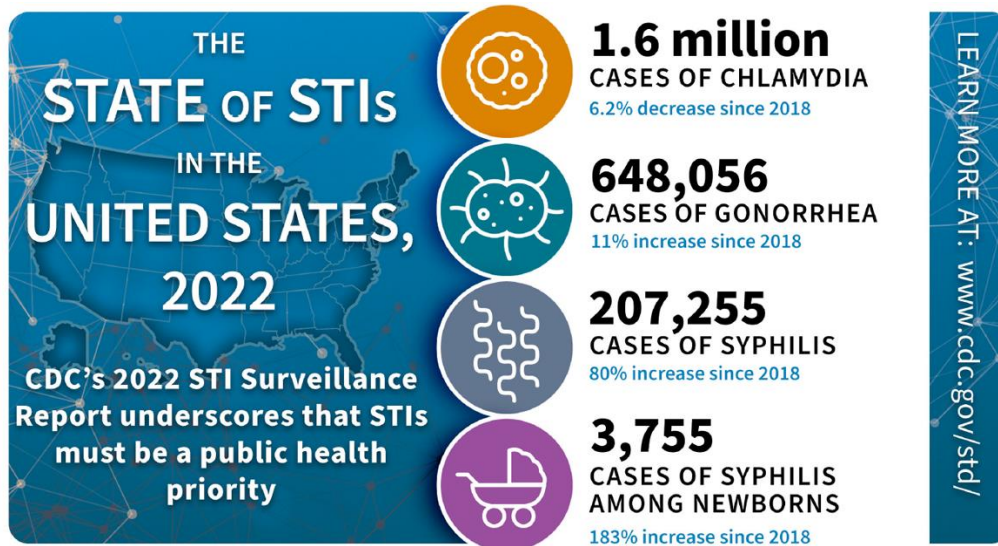
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SUBJECT: Community and Clinical Health Services – Divisional Update – National Sexually Transmitted Infection Awareness; Data & Metrics; Sexual Health (Outreach and Disease Investigation), Immunizations, Tuberculosis Prevention and Control Program, 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 Sexually Transmitted Infection Awareness** - April 14-20, 2024, is the nationally recognized Sexually Transmitted Infection (STI) Awareness Week. This week provides an opportunity to raise awareness about STIs and how they impact our community’s health and lives. Reducing STI-related stigma, fear, and discrimination, as well as offering the tools and knowledge for prevention, testing, and treatment are foundational to NNPH’s strategy in addressing STIs in Washoe County. With the increase of STIs nationally, the Centers for Disease Control and Prevention (CDC), note that STIs must be a public health priority. Sexual health should also be considered as an essential piece of overall health.

HIV and STIs are considered syndemic with substance use and Viral Hepatitis. CDC is approaching the syndemic with “a holistic, whole-of-society approach, including addressing social and economic barriers to improve this syndemic and America’s health,” (<https://www.cdc.gov/std/statistics/2019/syndemic-infographic.pdf>). Similar populations are impacted by the named health issues and each of the concerns directly affect the others (CDC, 2019). For example, 6% of sexually acquired HIV infections in 2019 were attributed to chlamydia, gonorrhea, and syphilis. If a person has an STI and is exposed to HIV, they have a 3-to-5 times higher risk of acquiring HIV (CDC, 2019).

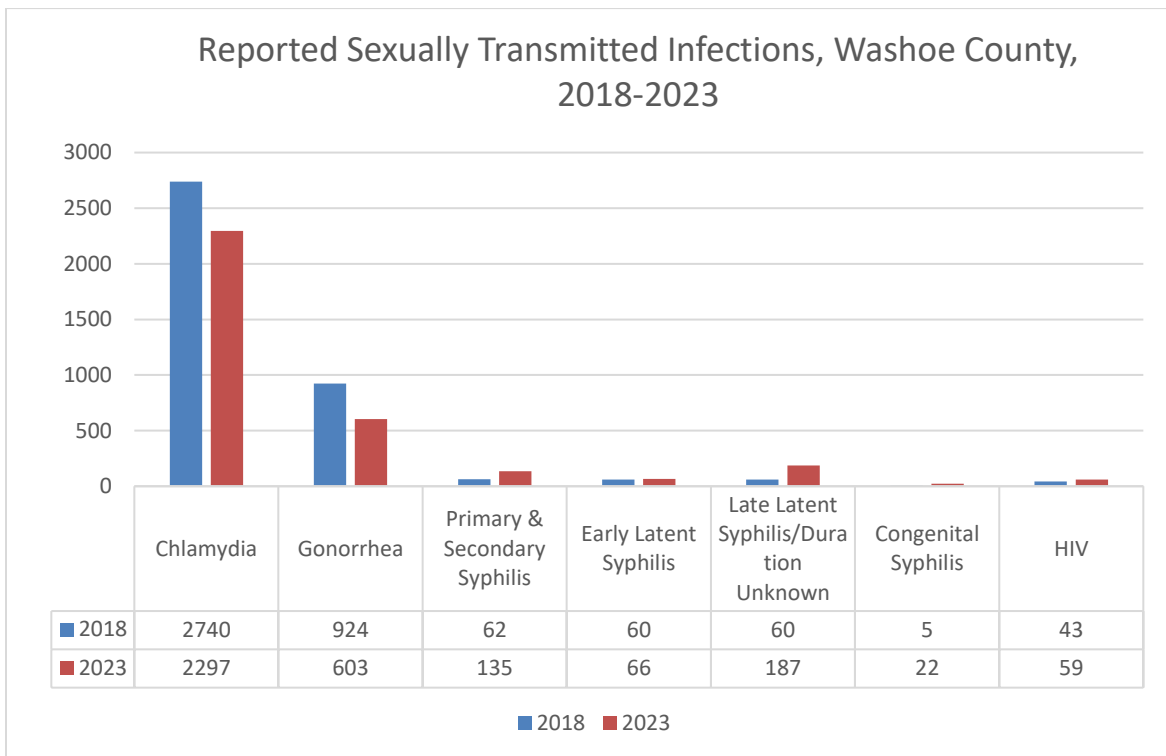


Washoe County is experiencing many of the same trends as the United States. From 2018 to 2023, there have been decreases in chlamydia (16.2% decrease) and gonorrhea (34.7% decrease). Increases over the same period were observed for syphilis: primary & secondary stages 177.7%, early latent 10%, late latent/duration unknown 211.7%, and congenital syphilis 340%. HIV cases from 2018- 2023 demonstrate a 37.2% increase in cases reported.

The decrease in chlamydia cases locally and nationally may be attributed to a decrease in conducting chlamydia investigations throughout jurisdictions. This is a national trend due to the volume of chlamydia cases and distributing resources to investigate infections that have a higher morbidity and/or mortality risk. Many STI intervention programs do not have the capacity to investigate the higher number of cases. NNPH investigates chlamydia cases of people who test positive through the NNPH Sexual Health Clinic, and has prioritized cases that are pregnant, 18 years of age and younger or cases that the investigator deems important to provide intervention. These prioritized case investigations are from select provider reports in the community. In September 2023, NNPH resumed investigating all gonorrhea cases. Prior to that, cases were prioritized as well, due to decreased capacity of the program and the need to focus on syphilis cases. As the program became fully staffed and new staff were trained, the decision was made to investigate all reported cases of gonorrhea.

Syphilis cases continue to increase. Of significant concern is the increase in congenital syphilis cases from 2018-2023 of 340%. Any cases of congenital syphilis are considered sentinel health events, or failures of the healthcare system. This is because touchpoints of intervention with the healthcare system were missed at some points. Throughout a review of congenital syphilis cases the following gaps have been identified as themes among cases. The following have been identified through a statewide Congenital Syphilis Review Board (CSRB). These include lack of or inconsistent prenatal care, polysubstance use, providers not offering testing in Emergency Departments or through prenatal providers or other touchpoints in different systems. A group of community, provider, health system,

and insurance stakeholders were convened to review the trends from the case reviews. Strategies were identified to address access to care, provider education on testing and treatment, insurance involvement to promote testing, and education on the issue. To date, those strategies have been scored in terms of cost, feasibility, and other resources by the CSRB. These conversations are continuing throughout monthly core group meetings and quarterly case review team meetings. In addition, the program has been working with one hospital emergency and infection control department to increase testing of pregnant people for syphilis. This project is in the early stages of planning and development. Additional plans include engagement of other hospital emergency and infection control departments to increase efforts through the project champions and continued collaboration.

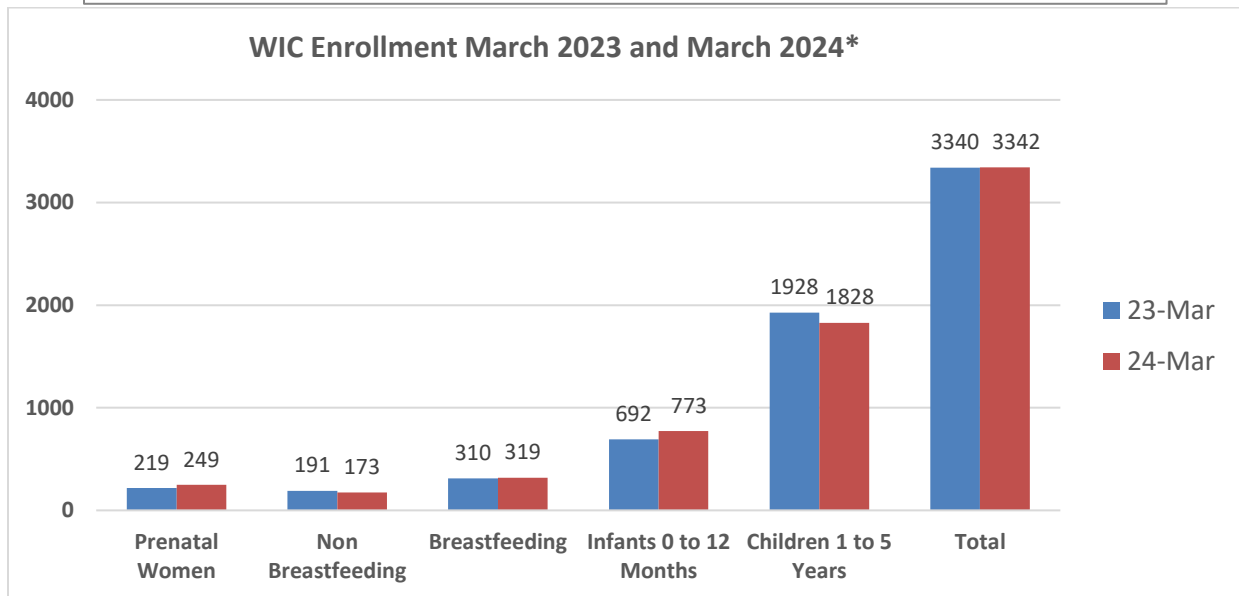
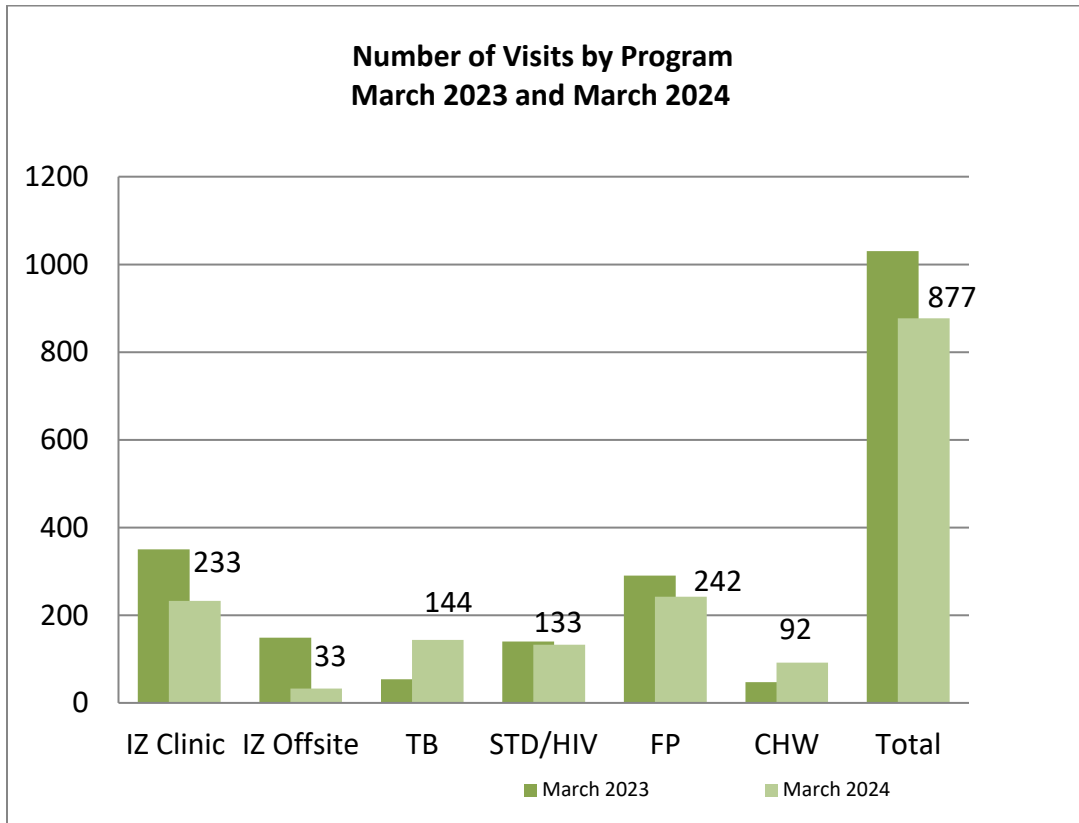


Additional STI interventions in Washoe County include the following:

- Robust contact tracing for priority cases (also known as Partner Services)
- Provider education on appropriate testing and treatment of STIs, including HIV
- Social media and other social marketing campaigns to heighten awareness of testing, treatment of STIs, including HIV
- Increasing awareness to community members and providers of the importance of talking about STIs with providers and partners
- Staff development to become subject matter experts
- Continued assessment of staff and client needs to provide the best level of support for clients

NNPH's Sexual Health Program staff are diverse and responsive to the community's needs. They carry high caseloads and are innovative in their approaches to their work.

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

WIC Participation Numbers in the Past Year		
Month	Enrollment	Participation w/ Benefits
March 2023	3340	2923
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
Monthly avg	3399	3026
% change Mar 2023 / Mar 2024	0.06%	6.53%

WIC participation numbers
Enrollment: All those enrolled in WIC: (women who are pregnant, breastfeeding, or post-partum; 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)** – Please refer to the report above on STI Awareness Week. The monthly report of STIs for January – March will be available for the May 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 230 clients while providing a total of 692 routine vaccinations in March. The clinic is still providing both flu and COVID-19 vaccines, with a total of 64 flu vaccines and 44 COVID-19 vaccines in March. Walk-ins continue to be accepted daily. The clinic continues to provide a Respiratory Syncytial Virus (RSV) preventive antibody injectable for RSV disease to target populations during respiratory season which ends March 31st. Staff offer community provider education regarding vaccine storage and handling and inventory, in addition to addressing special medical and employee vaccine cases.

In March, offsite staff provided a total of 27 COVID vaccines and 21 flu vaccines. In addition, there were five community COVID and flu events held. 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 participated with the Boys & Girls Clubs Annual Easter Egg hunt.

VFC (Vaccines for Children) Compliance and IQIP (Immunization Quality Improvement for Providers) visits continue, to include COVID-19 and RSV products. Site reviewer staff anticipate the addition of BRIDGE/317- funded compliance activities for the coming year, to address the federally funded adult populations. Three compliance visits, one follow-up visit, and multiple rescheduled site visits occurred in March. VFC site visit reviewers coordinated the transfer of short-dated VFC vaccines on multiple occasions to ensure proper vaccine stewardship. The state conducted a compliance visit for NNPH in March which resulted in no findings.

The program is progressing with a quality improvement project, which focuses on increasing vaccine communication and completion rates for adolescent immunizations. 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.

Staff continue to plan new outreach events with community partners for back-to-school clinics during April and May and are already pre-planning summer events.

- c. **Tuberculosis Prevention and Control Program** – Washoe County currently has four reported cases of TB disease for 2024. Two of the 2024 newly diagnosed cases relocated to another area which leaves the TB program medically managing four active disease cases which includes two from 2023. Medical management of TB is very labor intensive. Nursing staff provide the clients with the necessary medications, they also assess for side effects; sometimes daily. They monitor labs for any abnormal readings and adjust treatment as necessary per doctor's orders. Another part of TB treatment is daily observed therapy. Nursing staff are required to observe and document clients taking their medications daily to ensure treatment meets CDC requirements. This can either be in person, through facetime or videos. For the month of March, staff performed over 200 daily observed therapy encounters.

In addition to active disease cases, the program is also responsible for evaluating any B1 or B2 immigrants that come into Washoe County and provide treatment if they are diagnosed with Latent Tuberculosis. The program is currently managing over 20 Latent Tuberculosis cases.

The TB program participated in a CDC site visit where staff presented three of their most challenging cases. CDC staff were very impressed with the presentations and how staff demonstrated very

innovative approaches to managing these cases. Staff also participated in a radio interview for World TB Day where they explained what TB is, who's at risk, and how to go about getting tested.

- d. **Reproductive and Sexual Health Services** – The Family Planning Sexual Health Program (FPSHP) added a new service in March. On March 13th, the FPSHP was approved to begin offering on-site chlamydia and gonorrhea testing. On-site chlamydia and gonorrhea testing provides clients results in 30 minutes, eliminates the needs for clients to return for treatment, and allows the providers to be better stewards of antibiotic usage. Feedback from clinic staff and clients has been positive, with clients reporting satisfaction knowing their status when leaving their appointment.

On March 20th, the FPSHP received a partial Notice of Award for Title X services. The partial Notice of Award was due to the federal appropriations bill that funds HHS not yet passing Congress. On March 22nd, Congress passed the federal appropriations bill to fund HHS. In the appropriations bill, Title X was flat-funded. The FPSHP is anticipating flat funding from Title X for April 1, 2024, through March 31, 2025. The FPSHP expects to receive the final Notice of Award in mid-April. FPSHP staff are currently working on a budget plan for the remaining funding from the American Rescue Plan Act (ARPA) funds received from the State to sustain Family Planning services through December 2026.

Planning continues to progress for the addition of colposcopy services. One APRN completed the Comprehensive Colposcopy Class in March and another APRN is scheduled to complete the class in May. One APRN has been approved to begin a preceptorship in Douglas County for hands on learning. She will begin her preceptorship in April. Colposcopy services have been identified as a service that is difficult to access in Washoe County due to no providers performing colposcopy services for uninsured or under insured people.

- e. **Chronic Disease and Injury Prevention (CDIP) Program** - On March 28th and March 29th staff served as a co-trainer for a two-day Applied Suicide Intervention Skills Training (ASIST) for the community, including Washoe County staff members. Staff have one (1) more co-training instance this spring, then will become a certified ASIST Trainer.

Staff met with Rebuilding Together Northern Nevada to discuss future senior falls prevention efforts in the community and drafted two Letters of Support for their upcoming home safety modification grant funding applications.

Staff attended the SNAP-Ed Statewide Federal Nutrition Training in Las Vegas from March 5th – March 7th and discussed ways to improve program implementation of improving access to healthy eating and physical activity.

Staff are preparing the coordination of Biketopia, a kickoff event to celebrate Bike Month, focused

on education, safety, and community partnerships.

Staff recruited an additional store for the Healthy Corner Store Program, JG Town Liquor and Smoke, for a total of five participating stores. This is the first store located in the Sparks area. Staff are working on the conversion process to bring in healthier food options.

Staff attended the Influential Leadership Training. Four key tools and strategies were provided: build efficacy in influencing to achieve program goals, get buy-in from stakeholders, increase engagement from team members, and bolster support and resources for current and future initiatives.

- 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 twelve open cases. Staff attended the Nevada Childhood Lead Poisoning Prevention Program (NVCLPPP) Advisory Board Meeting on March 4, 2024.

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 three Cribs for Kids classes in March. Cribs were purchased through a donation from Anthem which helped bridge the gap until Dignity Health was selected to be the Cribs for Kids program administrator. 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 March 21, 2024, and reviewed three cases. One maternal interview was conducted this month. Staff submitted the 2020-2021 Multi-Year Summary Report for review and permission to share to the State. Data cleaning is progressing for 2022-2023 information. FIMR staff were notified that they did not receive the grant award from the National Center for Fetal Infant Mortality Review and Prevention. Maricruz Schaefer gave a presentation on Congenital Syphilis to the Health Plan of Nevada nursing staff on March 20, 2024. Staff attended the virtual Maternal Mental Health forum on March 19-20, 2024.

Dr. Faith Whitter will be joining the FIMR team in April. Dr. Whitter is Northern Nevada Hopes new Chief Medical Officer. Dr. Whittier comes to HOPES after serving as the O.B. Medical Director at

Avenue 360 Health and Wellness in Houston, Texas. Dr. Whittier is board-certified in obstetrics and gynecology. She completed her undergraduate studies at UC San Diego and later received her medical degree from Case Western Reserve University in Cleveland, Ohio. Dr. Whittier completed her residency training in obstetrics and gynecology at St. Joseph Hospital in Houston, Texas.

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 February 2, 2024. Child Death Review Meetings are held every other month.

The Northern Nevada Maternal Child Health Coalition (NNMCHC) met on March 14, 2024. The Coalition is currently co-chaired by NNPH FIMR staff members Rebecca Gonzalez & Kelcie Atkin and Maricruz Schaefer as treasurer. The NNMCHC team put together 125 New Mama Care Kits on March 12, 2024, bringing the total to 250 kits so far. On March 21, 2024, a press release was distributed announcing the release of kits to community organizations that serve women in need which include NNPH Family Planning and WIC clinics, WCSD Family Resource Centers and the Children's Cabinet. Maricruz and Kelcie have done media interviews promoting the New Mama Care Kits. Interest in the Mama Care Kits has been greater than expected. Health Plan of Nevada has given NNMCHC \$5,000 to help fund the items for the kits.

<https://washoelife.washoecounty.gov/nnph/new-mama-care-kits-free-resource-for-low-income-post-partum-women-in-northern-nevada/>.

- g. **Women, Infants and Children (WIC)** – In early March, the fiscal year 2024 appropriations law was enacted, which included full funding for the WIC program. The amount provided was about \$1 billion more than the 2023 enacted level, with the additional funds going towards the food benefit portion of the WIC program. The funding increase will be sufficient to serve all eligible new and expecting parents, infants, and young children who seek benefits and will allow participants to receive the full, science-based food benefit, including maintaining the increased Cash Value Benefit that provides dollars for WIC participants to purchase fruits and vegetables. NNPH and other statewide WIC providers are expected to receive the full funding requested for the 23/24 federal fiscal year.

On March 25th, a WIC staff person did a media interview about New Mama Care Kits with KRNV. The kits are part of a project with Northern Nevada Maternal and Child Health Coalition (MCH) and are intended to help low-income families access supplies needed for post-partum comfort and care. Supplies that are provided in the kits include maxi pads, nipple cream, bra pads and more. The NNPH 9th St WIC office and the Family Planning Program are both distributing kits, along with other community partners.

WIC leadership met with the UNR School of Medicine Student Outreach Clinic about how to refer clients more efficiently to WIC from the UNR clinic. Initial ideas will be pursued with the hope of connecting with families that could benefit from WIC services.

- h. **Community Health Workers (CHWs)** - The Community Health Workers (CHWs) provided individual services to 91 clients in March. The continued increase in clients served by the CHWs is attributed to changes in process that have made referrals to the CHW easier as well as the complete onboarding of four CHWs. The need for health care access and resources continues to be most of the referrals to the CHW. Clients seek assistance with primary care provider resources, enrolling in health insurance, and assistance with referrals to specialty providers. Other services and resources provided by the CHWs included PrEP navigation, resources for food and housing, and transportation resources including direct transportation resources as well as other resources such as bus passes.

During March, the CHWs participated in eight outreach activities. The Mobile Harvest event at NNPH provided healthy foods to 77 families in March. Other outreach activities included International Women's Day and the Holland Project Block Party. Outreach activities also continue monthly at TMCC and Eddy House.

The CHWs were able to purchase 40 safe sleep kits with the donation from Anthem for the Cribs For Kids Program. Cribs For Kids classes will resume at the Anthem Resource Center with these safe sleep kits. The CHWs recently learned that Dignity Health will be the new administering agency for Cribs For Kids and are working to set up a partnership with Dignity Health to begin receiving safe sleep kits from them.

On Saturday, April 20th the CHWs will collaborate with Planned Parenthood to host LiFT – Linking Families & Teens. LiFT is an interactive workshop for teens and their supportive adults to give families the tools they need to have difficult conversations with one another about topics such as healthy relationships, sexual health, and mental health. Since this is a pilot program the first session has been offered to NNPH staff, friends, and families for participation. Once the CHW staff has been trained, the CHWs are eager to open this valuable program to the community.