

**Community and Clinical Health Services  
Division Director Staff Report  
Board Meeting Date: February 27, 2025**

**DATE:** February 7, 2025

**TO:** District Board of Health

**FROM:** Lisa Lottritz, RN, MPH  
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**SUBJECT:** Community and Clinical Health Services – Divisional Update – WIC Program Update, 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

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**1. Divisional Update**

**a. WIC Program Update**

**What is WIC?** WIC is considered the nation’s most successful public health nutrition program, providing nutritious foods, nutrition education, breastfeeding support, and referrals to health and other social services to eligible participants. For a family to participate, it must have a gross income of no more than 185% of the federal poverty level and be at nutritional risk. Eligible populations include pregnant and post-partum individuals, those that are breastfeeding infants up to 12 months old, and infants and children up to 5 years old. An applicant who already receives SNAP, Medicaid, or Temporary Assistance for Needy Families (TANF) cash assistance is automatically considered income-eligible for WIC.

**WIC Works!** Research has found WIC to be a cost-effective investment that improves the nutrition and health of low-income families, leading to healthier infants, more nutritious diets and better health care for children. As a result of WIC’s effectiveness, since 1997 congresses and administrations of both parties have provided sufficient funding to ensure that WIC can serve all eligible low-income pregnant women, infants, and young children who apply for it.

### Snapshot of NNPH WIC Participation

KEY METRICS

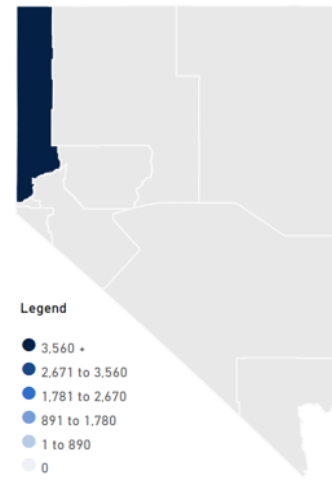
**3,088**  
 TOTAL RECIPIENTS  
 December 2024

**1,658**  
 CHILDREN

**749**  
 INFANTS

**681**  
 WOMEN

WIC Participation at NNPH



| WIC Participation Numbers 2024 |             |                           |
|--------------------------------|-------------|---------------------------|
| Month                          | Enrollment  | Participation w/ Benefits |
| Jan 2024                       | 3357        | 3076                      |
| Feb 2024                       | 3328        | 3103                      |
| March 2024                     | 3342        | 3114                      |
| April 2024                     | 3342        | 3114                      |
| May 2024                       | 3395        | 3152                      |
| June 2024                      | 3335        | 3091                      |
| July 2024                      | 3342        | 3117                      |
| Aug 2024                       | 3395        | 3179                      |
| Sept 2024                      | 3399        | 3139                      |
| Oct 2024                       | 3389        | 3124                      |
| Nov 2024                       | 3373        | 3061                      |
| Dec 2024                       | 3380        | 3088                      |
| <b>Monthly avg</b>             | <b>3365</b> | <b>3113</b>               |

\* Most recent month that data is available

\* Enrollment numbers are higher because they count all participants, including those that do not receive food benefits: Infants that are exclusively breastfed and breastfeeding mothers whose infants receive more than 4 cans of formula per month

### Highlights from the NNPH WIC program in 2024

- Two long-term full-time employees retired (29.5 years and 17 years) as well as an intermittent hourly employee (7 years)
- The team weathered the budget being awarded in pieces through continuing resolutions, and held a vacant position open until full funding was awarded
- Three new full-time staff were hired, including the previous vacancy that had been held open. With only 10 FT staff, 30% of the WIC team is new as of the end of 2024
- The program began a partnership with the NNPH Immunization (IZ) program to implement a review of immunization records of WIC clients prior to their WIC appointments. If children or infants are due or behind on childhood vaccinations, they are notified by WIC staff and referred to their provider or the NNPH IZ program
- The WIC clinics hosted dietetic interns, which gives interns a deeper understanding of pediatric dietetics and the WIC program. A success of this effort is that a previous dietetic intern applied for and is now working for the NNPH WIC program
- The program re-introduced night clinic appointments in July and now provides evening appointments at least twice a month

- The WIC program participated in a fiscal audit with the State WIC office. The closing letter with the outcome of the audit pointed out three areas of excellence and no findings or additional action required

**Excellence of Services** NNPH WIC focuses on providing quality services and maintaining caseload through recruitment and retention of participants. The nature of WIC is that children and families become ineligible for the program (i.e. a child turns 5 years old, an adult participant is over 6 months post-partum, etc.). Also, the data tells us that about 50% of eligible families do not receive WIC services and benefits. In 2024, the following new efforts were developed and implemented to improve services and recruit and retain participants.

**Grocery store tours** are led by NNPH Community Health Workers and are visits to WIC approved grocery stores. During the tours, participants learn to redeem their WIC food benefits and navigate common challenges encountered in the grocery store. Grocery store tours are an effort to increase redemption of benefits and increase satisfaction with the WIC shopping experience.

- Information gathering, planning and organization and individual tours took place early in the year, with the first group tour taking place in October 2024
- Monthly tours are planned in English and Spanish, and locations change for geographical convenience of clients
- Each scheduled tour has been a learning experience and there is a regular process of quality improvement to tour implementation

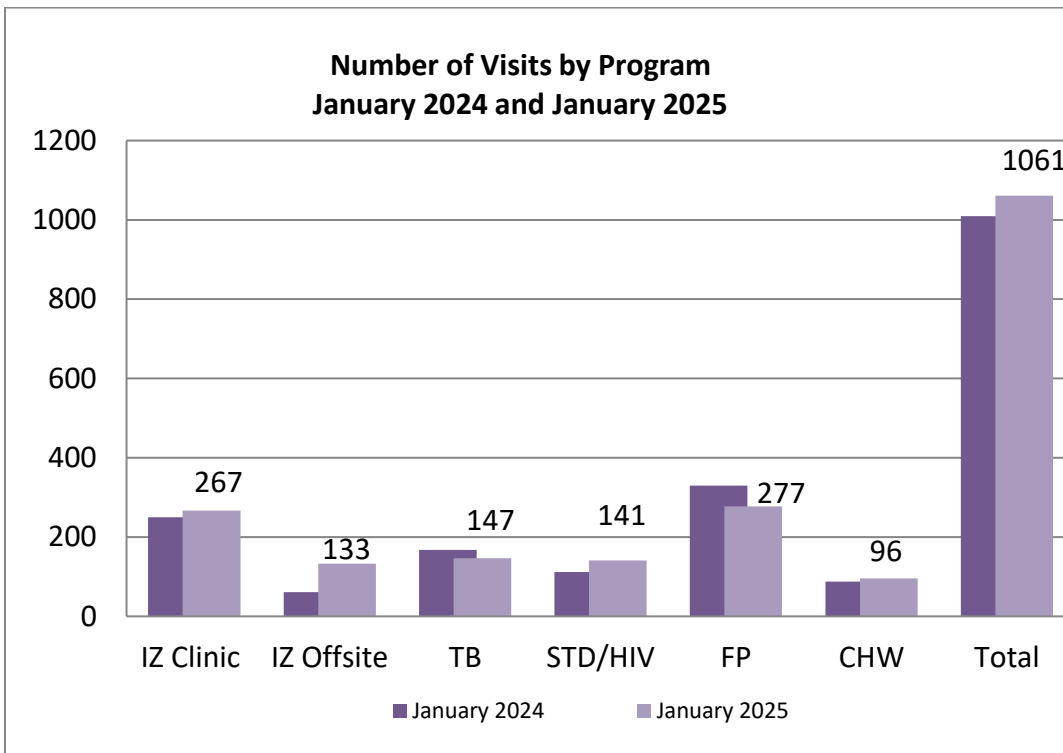
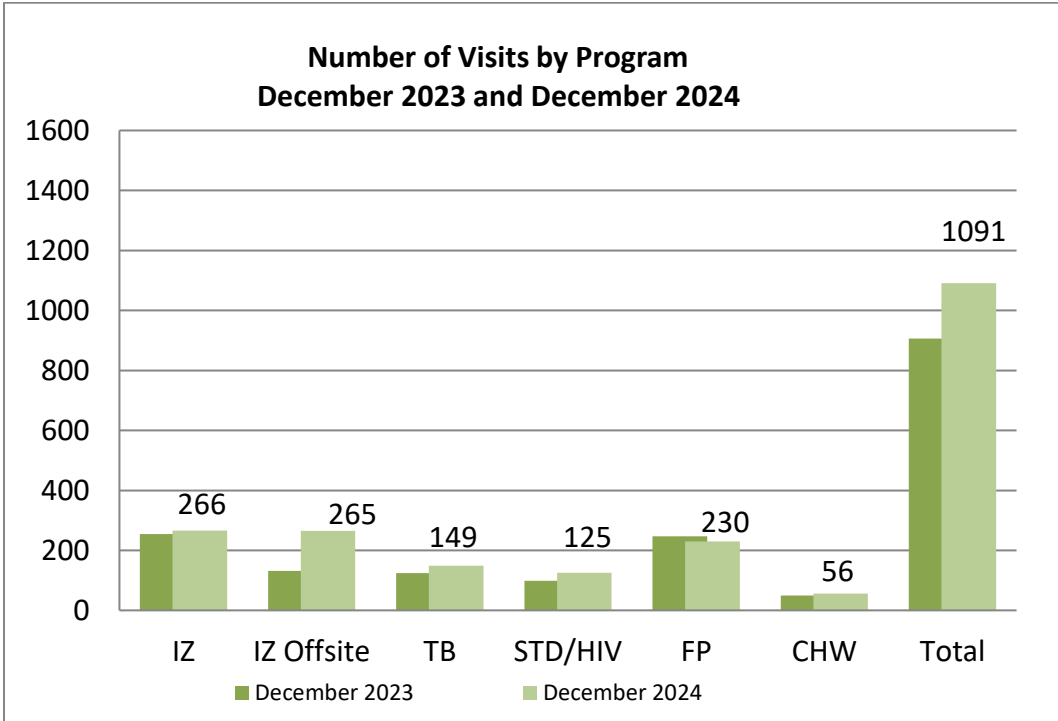
### **Presentations and Partnerships**

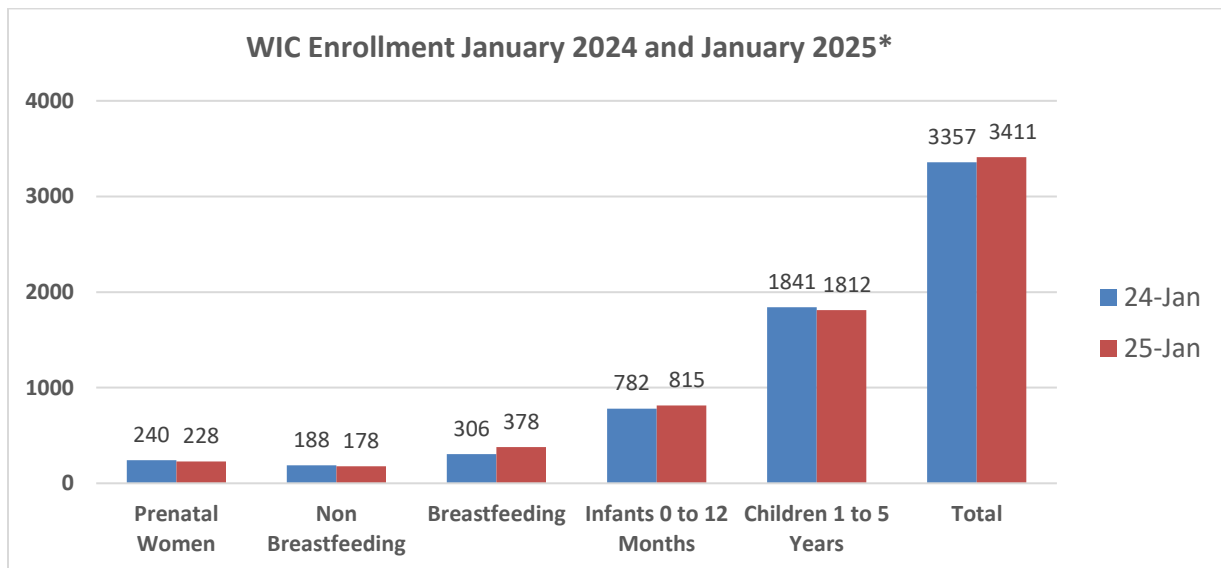
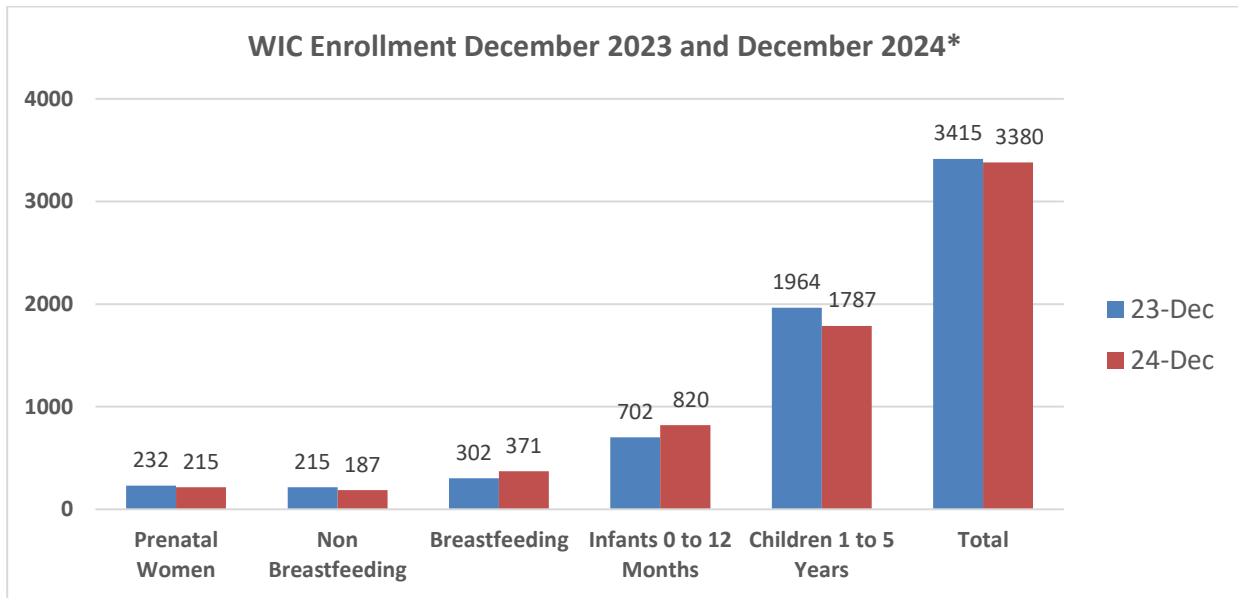
Presentations were provided to new and growing families and health and service providers that work with those families, including:

- Renown Centering Families Program is a new connection made in 2024. WIC presents information about services and helps families enroll in WIC during their Centering Families classes, which include pregnant individuals and families with newborn and infant children. The first presentation was in October 2024
- Northern Nevada Internation Center (NNIC) serves the Washoe County refugee and asylee populations, some of whom are eligible for WIC and have unique needs and situations. A presentation and Q&A session was held to share information and strengthen working relationships with NNIC
- Connections made to share WIC information with health care providers included a presentation at a Pediatric Ground Round event in August and attendance at a HOPES staff meeting in November. Both events allowed staff to provide information, answer questions and promote ways to encourage WIC participation and redemption of benefits
- A partnership was formed with Molina Health Plan on a diaper give away event in conjunction with the on-site Mobile Harvest event in May 2024. The event reached about 100 families, and staff was on-site to provide information and answer questions about WIC. An additional diaper

give-away event was held in December 2024, and plans are being made to continue events quarterly in 2025

**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 Past 12 months |            |                           |
|--|------------|---------------------------|
| Month                                    | Enrollment | Participation w/ Benefits |
| Jan 2024                                 | 3357       | 3076                      |
| Feb 2024                                 | 3328       | 3103                      |
| March 2024                               | 3342       | 3114                      |
| April 2024                               | 3342       | 3114                      |
| May 2024                                 | 3395       | 3152                      |
| June 2024                                | 3335       | 3091                      |
| July 2024                                | 3342       | 3117                      |
| Aug 2024                                 | 3395       | 3179                      |
| Sept 2024                                | 3399       | 3139                      |
| Oct 2024                                 | 3389       | 3124                      |
| Nov 2024                                 | 3373       | 3061                      |
| Dec 2024                                 | 3380       | 3088                      |
| January 2025                             | 3411       | 3114                      |
| Monthly avg                              | 3369       | 3116                      |
| % change Jan 2024 / Jan 2025             | 0.36%      | 1.31%                     |

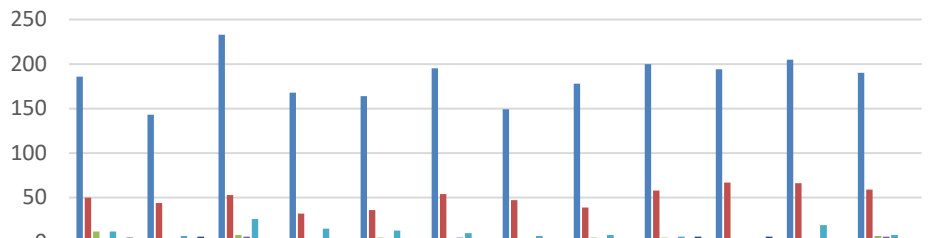
**WIC participation numbers**  
Enrollment: All those enrolled in WIC: (women who are pregnant, breastfeeding, or post-partum; infants; and children up through age 5)  
Participation with Benefits: All enrolled WIC participants receive food benefits except  
 - Infants that are exclusively breastfed  
 - 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)** – Sexual Health staff are conducting current case investigations as well as conducting end-of-calendar year reporting and data management. Cases reported in 2024 are being closed out and approved to then be reported to appropriate state and federal agencies. Preliminary data of monthly case counts are provided below for 2024 and January 2025. Please note, these are preliminary data, and case counts for syphilis will adjust based on case investigation outcomes.

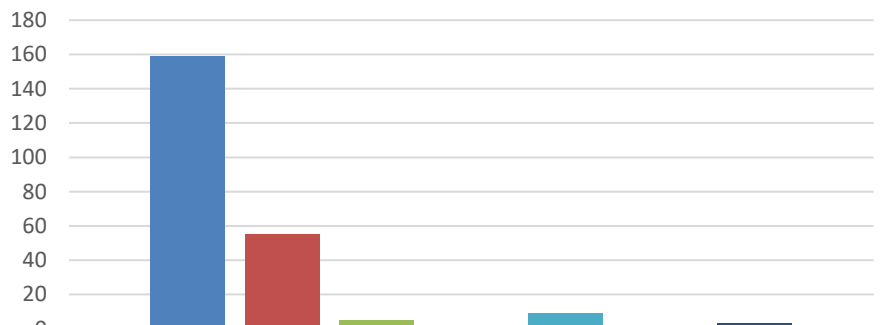
Planning for the next Syphilis Taskforce meeting is being conducted, with an expected meeting in March. In addition, the state STD program has continued the statewide Congenital Syphilis Review Board to review the trends of congenital syphilis cases, the maternal case, and identify the systemic failures that contributed to the case.

### Reported Sexually Transmitted Infections & HIV in Washoe County, 2024 (Preliminary Data)



|                                       | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec |
|---------------------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Chlamydia                             | 186 | 143 | 233 | 168 | 164 | 195 | 149 | 178 | 200 | 194 | 205 | 190 |
| Gonorrhea                             | 50  | 44  | 53  | 32  | 36  | 54  | 47  | 39  | 58  | 67  | 66  | 59  |
| Primary & Secondary Syphilis          | 12  | 4   | 8   | 4   | 5   | 4   | 3   | 5   | 5   | 2   | 2   | 7   |
| Early Latent Syphilis                 | 2   | 1   | 6   | 4   | 1   | 5   | 4   | 3   | 3   | 4   | 4   | 6   |
| Late Latent Syphilis/Duration Unknown | 12  | 7   | 26  | 15  | 13  | 10  | 7   | 8   | 6   | 4   | 19  | 8   |
| Congenital Syphilis                   | 0   | 1   | 2   | 3   | 4   | 1   | 0   | 1   | 3   | 2   | 1   | 1   |
| HIV                                   | 5   | 6   | 4   | 3   | 4   | 4   | 3   | 3   | 6   | 6   | 2   | 1   |

### Reported Sexually Transmitted Infections & HIV in Washoe County, 2025 (Preliminary Data)



|                                       | Jan |
|---------------------------------------|-----|
| Chlamydia                             | 159 |
| Gonorrhea                             | 55  |
| Primary & Secondary Syphilis          | 5   |
| Early Latent Syphilis                 | 0   |
| Late Latent Syphilis/Duration Unknown | 9   |
| Congenital Syphilis                   | 1   |
| HIV                                   | 3   |

- b. **Immunizations** – The immunization team focuses on providing vaccines to individuals who are uninsured or underinsured and unable to receive vaccines elsewhere. Walk-ins are accepted daily in addition to established appointments. In December, clinic staff vaccinated a total of 251 clients with 719 vaccination doses; and January, staff vaccinated 260 clients with 853 vaccination doses. The program continues to provide seasonal 24-25 influenza, COVID-19 vaccines and the RSV product for infants; December clinic staff provided 129 influenza, 80 COVID, and three RSV doses, with January 103 influenza, 59 COVID-19, and three RSV doses administered.

Staff serve as community vaccine experts for provider education regarding vaccine storage and handling, vaccine inventory, and address special medical and employee vaccine cases. In December and January, the program continued to immunize NNPH employees to meet routine job requirements and to accommodate seasonal influenza and COVID workforce protections, with eight doses given to six staff.

In addition to clinic vaccine administration, staff continue to participate in outreach events. In December, there were five outreach vaccine events in which staff provided 380 vaccines to 261 clients. Of note, 141 COVID and 219 Influenza vaccines were provided during these outreach events. In January, there were five outreach vaccine events in which staff provided 186 vaccines to 135 clients which breaks down to 65 COVID-19 vaccines and 121 influenza vaccines.

NNPH partnered with Mobile Harvest, Our Lady of Guadalupe (formerly St Peters Church) in Sun Valley), Northern Nevada Muslim Center, Cares Campus, Washoe County Sheriff's Office and Washoe County School District. The one school event in December provided a great opportunity for families to not only receive COVID and influenza vaccinations, but to receive missed or needed vaccines in what staff call a catch-up event.

During January, outreach event planning commenced for spring School Located Vaccine Clinics (SLVCs) to take place at a variety of schools over a period of a few months.

Advertising and social media reels were developed to emphasize the importance of annual COVID and influenza vaccinations and planning commenced for continuance in the spring.

The team is actively involved with Nevada State Immunization Program (NSIP) required activities for 2024-2025 VFC (Vaccines for Children) and 317 Provider Compliance, as well as IQIP (Immunization Quality Improvement for Providers). The team underwent an annual site visit with NSIP grantors in November and received a final evaluation notice of no findings in December. Program staff continue the development, case management, and reporting activities for the Perinatal Hepatitis B Prevention Program (PHBPP) with 10 cases currently under management.



- c. **Tuberculosis Prevention and Control Program** – The TB program is currently managing five active disease cases. Two are pulmonary, one extra pulmonary, and two disseminated (1 adult, 1 pediatric) that recently relocated to Washoe County. The program is also following one suspect case of bone TB. In addition to the active disease cases, the program is also managing/evaluating 38 clients for Latent Tuberculosis Infection (LTBI).

The TB program has been having issues with procuring key medications that treat active disease and latent TB. As a result of these shortages, the price of medications has increased. The NNPH TB program staff will be participating in a Nevada TB All Programs meeting to discuss developing a Drug Shortage Plan, a new CDC grant deliverable for 2025.

December 2024 – January 2025, the program completed 25 evaluations for LTBI, conducted 43 case reviews with the consulting physician, performed 182 instances of directly observed therapy, and started 11 clients on LTBI treatment.

- d. **Reproductive and Sexual Health Services** – The walk-in appointment rate for the Family Planning Sexual Health Clinic continues to hover around 50%. Program staff recently received a second machine capable of doing point-of care testing for chlamydia and gonorrhea. The addition of a second point-of-care machine will increase the number of clients able to receive same day testing results. Program staff also completed training on rapid syphilis testing. Rapid syphilis testing is another point-of-care test that provides syphilis results in 10-15 minutes. The ability to obtain syphilis testing results in 10-15 minutes will expedite the treatment process for many clients including pregnant people and people who are a contact to a syphilis infection. Program staff are awaiting approval from the State before they can begin to offer rapid syphilis testing to clients.

Program staff have been working with our EMR vendor, Patagonia, and Quest Diagnostics to implement a bidirectional connection for lab ordering and results. With a bidirectional connection, providers and clients will receive lab orders more quickly and eliminate the need for paper requisitions and printing lab results. Program staff also have been working with two vendors on public service campaigns to increase awareness of the sexual and reproductive health services offered at NNPH. The first public service campaign targeted the LGBTQ+ community with media buys on dating apps. The second public service campaign will target the Hispanic community with culturally relevant messaging.

Program staff submitted the non-compete continuation application for the Title X grant in early January. Program staff are now working on submitting the Family Planning Annual Reporting (FPAR) data for 2024. Staff are closely monitoring all updates related to potential federal funding freezes and receive frequent communications regarding Title X and federal funding from the National Family Planning and Reproductive Health Association.

- e. **Chronic Disease and Injury Prevention (CDIP) Program** – Staff kicked off Enhance Fitness on January 6<sup>th</sup> at the Sparks and Sun Valley Senior Centers; over 30 seniors attended, and all were enthusiastic about the program. Enhance Fitness is an evidenced-based group exercise and falls prevention program that helps older adults at all levels of fitness become more active, energized and empowered. The program is free for seniors and will be held 2-3 times a week at each location running through April.

CDIP team member, Lisa Sheretz, began her term serving as the elected Nevada Tobacco Control and Smokefree Coalition Secretary (NTCSC). As an executive board member, Lisa will be providing collaborative leadership on the topic of tobacco control to statewide partners and chairing the Communications committee.

Staff helped coordinate and deliver an Applied Suicide Intervention Skills Training (ASIST) for Washoe County HSA employees, with a goal of continuing to build community capacity for suicide prevention. This free 2-day training was hosted at the Nevada Office of Suicide Prevention on January 23-24th for 20 participants.

Staff coordinated a media training and a pilot of the Community and Parent Firearm course for Washoe Suicide Prevention Alliance team members. These trainings will be held in early February 2025.

Staff coordinated attendance of local community partners for the Quest Counseling “Evening on the Green” fundraiser, on January 25<sup>th</sup> to raise money for increased local mental health care support services. The NNPH – ODHO sponsorship included attendance by staff from the Washoe County School District – School Counseling Dept., Washoe County DAS - STAR program, Renown Alert Behavioral Health Team, Northern Nevada HOPES, the Washoe County Sherriff's Office, Reno Police Department - MOST Team, and Join Together Northern Nevada.

- 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 is currently following 41 open cases on children under six years of age. Currently funded by a grant through University Nevada Las Vegas.

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

NNPH Community Health Workers (CHW) assisted five individuals in Cribs for Kids classes in December and January. Two classes were held at the Anthem Wellness Center, one in English and one in Spanish. CHWs are Baby and Me Tobacco Free facilitators and promote PRAMS (Pregnancy Risk Assessment Monitoring System), and Nevada 211.

The Fetal Infant Mortality Review Board (FIMR) meets monthly, except for June and December. Eight cases were received in November. The FIMR Board met on January 16, 2025, and reviewed four cases.

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 October 4, 2024. Child Death Review meetings are held every other month. The February meeting has been cancelled the next meeting is scheduled for April 4, 2025.

The Northern Nevada Maternal Child Health Coalition (NNMCHC), which is the community action team for recommendations made by the FIMR team continues to assemble New Mama Care Kits. This round of kits includes diaper bags, breastfeeding kits, and electric breast pumps in addition to postpartum hygiene supplies. Due to the high demand of these kits, another assembly event was held on January 8, 2025, and 208 kits were made. The NNMCHC met on January 9, 2025, and held an open forum for members to discuss how to expand and improve coalition membership and engagement. NNMCH is currently co-chaired by two NNPH employees and a third employee acts as treasurer.

The FIMR team is working to notify local provider offices of the upcoming Count the Kicks webinar on February 27<sup>th</sup>. The webinar will offer strategies to implement the evidence-based stillbirth prevention campaign in provider offices in Washoe County as a standardized way to respond to clients with a lack of fetal movement. Count the Kicks is an easy, free and reliable way for healthcare providers and expectant parents to monitor the well-being of the baby. This effort is funded by a grant from United Healthcare Health Plan of Nevada and supported by the Association of Women's Health Obstetric and Neonatal Nurses, (AWHONN).

- g. **Women, Infants and Children (WIC)** – The WIC program was issued an amendment to fund the program through March based on the continuing resolution passed by the federal government.

In January, NNPH WIC received the closing letter from the fiscal review done in August of 2024. Three areas of excellence were noted, including 1) Requests for Reimbursements with supporting documents are well organized 2) Policies and procedures are being upheld and working well, including separation of duties, and 3) WIC funds are being tracked successfully with a separate account general ledger. No findings or additional action is required from NNPH related to the audit.

Staff attended an in-person training course given by the NV State WIC office. The topic was on the Value Enhanced Nutrition Assessment (VENA) participant-centered, health outcome-based approach to a WIC nutrition assessment. VENA is a required and essential part of the WIC program and is used to identify nutrition risks and personalize WIC services. VENA puts the participant's needs and the nutrition goal as the focus. A WIC nutrition assessment using the VENA approach systematically collects and evaluates information elicited from the participant, while allowing staff to engage the participant in dialogue about the needs and goals of healthy behavior.

Sunita (Soni) Monga, a WIC RD supervisor was recognized as a Health Hero in January for compassion and trustworthiness after a client wrote and delivered a note expressing how impactful Soni's guidance was during their WIC interactions. Words used by the client in her short note included support, kindness, insight, genuine concern, thoughtfulness, guidance, brilliant advice, encouragement, understanding, and outstanding. The note was signed "one grateful mama".

- h. **Community Health Workers (CHWs)** – The Community Health Workers (CHWs) provided services to 96 clients in January. On January 13<sup>th</sup>, CHW Jasmine Olvera transferred to Environmental Health Services. Jasmine's position will not be filled so the three remaining CHWs have been working hard to assume her duties while ensuring all programs continue to receive the full scope of CHW services. The CHWs attended two outreach events in January including Mobile Harvest which served 78 families experiencing food insecurity.

The CHW program would like to congratulate Marisol Martinez-Avila for obtaining her Community Health Worker II certificate from the Nevada Certification Board. To obtain her certification as a Community Health Worker II, Marisol had to complete additional training on a variety of topics including the Nevada CHW competencies, community organizing, and cultural competence/cultural humility. While Community Health Worker II is not required for her position, Marisol completed these additional training courses to ensure she is providing high-quality services to clients at NNPH and understanding the needs of the community NNPH serves.