

**Community and Clinical Health Services**  
**Division Director Staff Report**  
**Board Meeting Date: January 22, 2026**

**DATE:** January 6, 2026

**TO:** District Board of Health

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**SUBJECT:** Community and Clinical Health Services – Divisional Update – 2025 Year in Review; Data & Metrics; Immunizations, Tuberculosis Prevention and Control Program, Reproductive and Sexual Health Services, Maternal Child and Adolescent Health, Women Infants and Children, and Community Health Workers

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**1. Divisional Update**

**a. 2025 Year in Review**

**CCHS Year-End Review: Challenges and Successes**

In 2025, CCHS navigated significant organizational and operational changes, including the reorganization of two programs into the Population Health Division (PHD), staff attrition, and multiple periods of funding uncertainty. Despite these challenges, CCHS staff demonstrated unwavering commitment to serving our community with kindness, compassion, and dedication.

**Key Highlights**

Program Transitions: Successfully supported the transition of the Chronic Disease and Injury Prevention Program (CDIP) and the Sexual Health Program from CCHS to Population Health. This process involved revising the organizational chart and determining which activities and staff remained within CCHS.

- CCHS retained coordination of community STI testing.
- A Public Health Nurse transitioned from disease investigation to the Family Planning Sexual Health Clinic, ensuring continuity of care.

Workforce Status: As of December 31, 2025, CCHS has ten vacant positions. These vacancies are being held open strategically in anticipation of potential funding reductions or expirations, as many grants are projected to remain flat or decrease.

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**Technology Advancement:** Established a bidirectional electronic connection with the Nevada State Public Health Laboratory. This innovation enables seamless transmission of lab orders and results, reduces errors, and eliminates paper requisitions—improving efficiency and accuracy.

**Educational Partnerships:** Provided hands-on learning opportunities for students across multiple disciplines, including dietetic interns, medical residents, and nursing students (APRN and RN), reinforcing CCHS's role as a teaching and training partner in public health.

**Operational Analysis:** Completed a comprehensive Time and Effort study to evaluate workload distribution across teams and roles. This analysis identified areas of overburden and underutilization, informing future staffing and resource allocation decisions.

### **Immunization Program Highlights**

**Expanded Community Access:** Delivered vaccinations directly to where community members live, learn, and gather through multiple outreach events, including seven school-based vaccine clinics.

**Enhanced Support for Uninsured Adults:** Secured vaccines through the State Opioid Response Fund, enabling CCHS to provide free vaccinations to uninsured adults and strengthen access for those without coverage.

**Back-to-School Success:** Administered over 650 vaccine doses at three major Back-to-School events, helping families prepare for a healthy academic year.

### **Family Planning Program Highlights**

**Expanded Point-of-Care Testing:** Introduced syphilis point-of-care (POC) testing and added a second machine for chlamydia and gonorrhea POC testing, increasing efficiency and reducing waiting times for results.

**Targeted Public Awareness Campaigns:** Partnered with the Communications team to launch two public service campaigns designed to reach and engage diverse populations, promoting access to family planning and sexual health services.

**Enhanced Nursing Scope of Practice:** Expanded the RN scope of practice, enabling nurses to provide a broader range of services and improving community access to timely, comprehensive care.

### **WIC Program Highlights**

**Maintained Service Continuity:** Successfully sustained WIC services during the federal government shutdown, ensuring uninterrupted support for participants during a critical period.

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**Outstanding Audit Performance:** The State WIC program audit recognized CCHS for exceptional customer service and noted that services were efficient, well-organized, and client focused.

**Breastfeeding Achievement:** Honored by the State WIC Office for achieving the highest increase in exclusively breastfed participants at six months of age, reflecting strong commitment to maternal and child health.

### **Maternal Child Program Highlights**

**Expanded Safe Sleep Education:** Community Health Workers (CHWs) delivered biweekly Cribs for Kids classes at the Anthem Wellness Center and provided individualized one-on-one sessions as needed, promoting safe sleep practices for infants.

**Support for New Mothers:** The Community Action Team for Fetal Infant Mortality Review (FIMR) assembled and distributed Mama Care Kits to community organizations, ensuring essential resources reached families in need.

**Compassionate Outreach:** A Community Health Worker began direct outreach to grieving families, offering resources and support during difficult times.

**Strengthened Diversity and Representation:** Increased representation on the FIMR Case Review Team (CRT) to include community organizations invested in maternal and child health.

### **Community Health Worker Program Highlights**

**Integrated Social Determinants Screening:** Implemented social determinants of health (SDOH) screening for all clients referred to services. This proactive approach helps identify additional needs beyond the initial referral, ensuring more comprehensive support for individuals and families.

**Community Engagement Through Signature Events:** Successfully hosted and coordinated two major community events, the Community Baby Shower and the Harvest of Health Festival. These events featured multiple vendors providing direct services to underserved populations, fostering connections and improving access to essential resources.

### **Tuberculosis Program Highlights**

**Comprehensive Treatment Delivery:** Provided treatment for 11 clients with active TB disease and 88 clients with latent TB infection, ensuring timely care and reducing the risk of transmission.

**Professional Education and Collaboration:** Hosted a TB Cohort Review for community providers, featuring Dr. Krasner. The session included two complex case reviews that highlighted the challenges and implications of treating TB in individuals with comorbid conditions.

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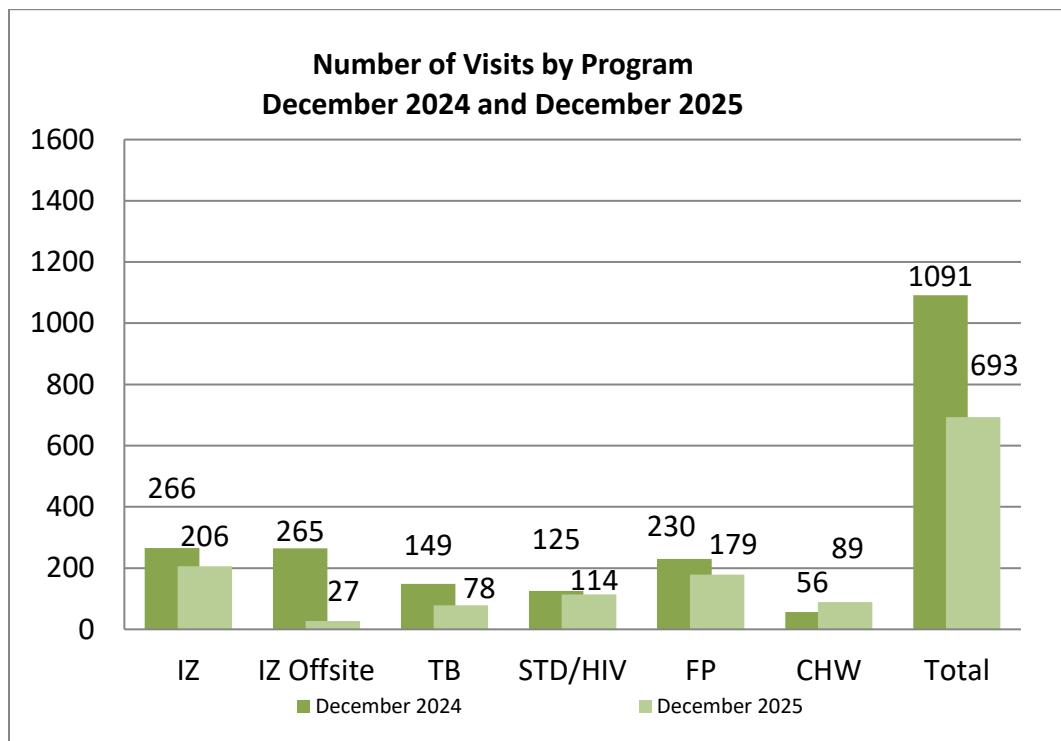
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**Facility Design for Quality Care:** Actively contributed to the design and planning of the new TB clinic, ensuring features that promote safe, efficient, and compassionate care for clients.

**Holistic Client Support:** Assisted clients undergoing treatment for active TB with medication adherence and connected them to health and social services, supporting treatment success and overall well-being.

Despite significant organizational changes and funding uncertainties in 2025, CCHS remained steadfast in its mission to protect and promote community health. Through innovation, collaboration, and a strong commitment to equity, CCHS continued to deliver essential services, strengthen partnerships, and improve access to care. These efforts underscore CCHS's resilience and readiness to meet evolving public health needs in the year ahead.

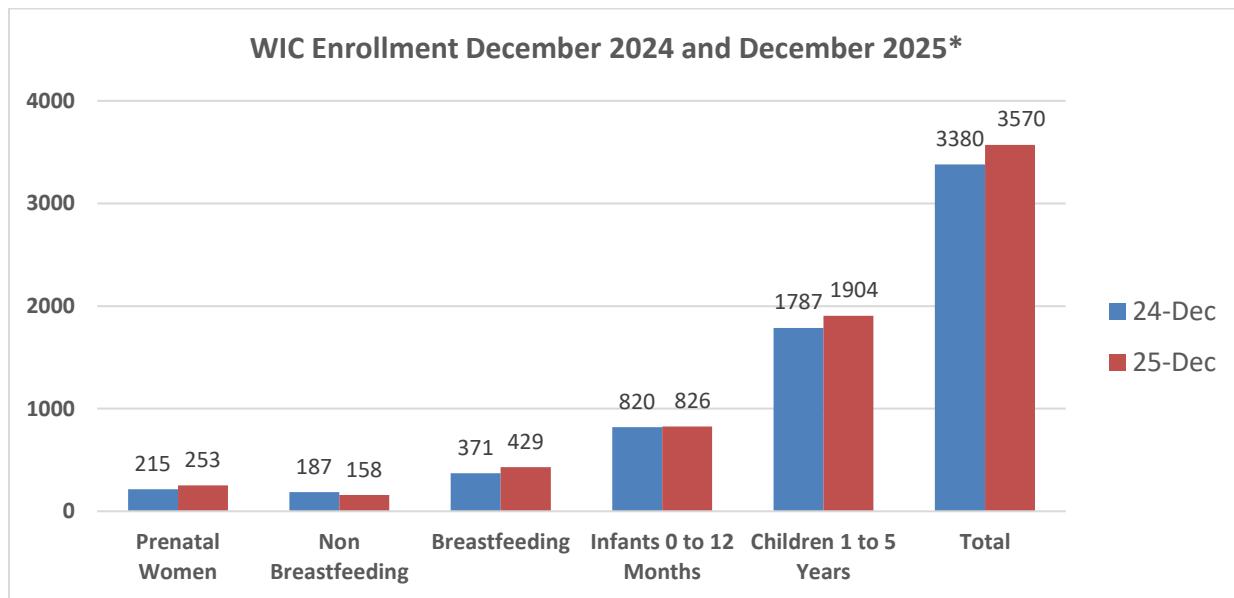
b. **Data/Metrics**



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\*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

<b>WIC Participation Numbers Past 12 months</b>		
<b>Month</b>	<b>Enrollment</b>	<b>Participation w/ Benefits</b>
Dec 2024	3380	3088
January 2025	3411	3114
Feb 2025	3428	3107
March 2025	3454	3101
April 2025	3461	3144
May 2025	3461	3150
June 2025	3466	3125
July 2025	3543	3172
Aug 2025	3546	3181
Sept 2025	3580	3218
Oct 2025	3606	3265
Nov 2025	3551	3172
Dec 2025	3570	3170
Monthly avg	3497	3154
% change Dec 2024 / Dec 2025	5.62%	2.66%

#### **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. **Immunizations** - The NNPH Immunization (IZ) Program provides services to individuals of all ages throughout the community. In both clinic and outreach settings, the IZ Program primarily serves children who are eligible for the Vaccines for Children (VFC) program, as well as adults who are uninsured or underinsured. The program also serves a significant number of insured individuals, both adults and children.

Walk-ins are accepted daily in the onsite clinic in addition to scheduled appointments. In December, clinical staff vaccinated a total of 200 clients with 502 vaccination doses.

NNPH continues to provide RSV to infants who are in their first RSV season and Flu Vaccinations for all ages 6 months and older. There is a continued need to provide COVID-19 vaccine as fewer providers in the area are offering COVID-19 vaccines—particularly for individuals without access through a primary care provider or those below pharmacy age limits—the program anticipates an increase in people seeking vaccination who have no other options. The program continues to provide Moderna's Spikevax product for ages 6 months through 11 years old in VFC and Private Pay funding sources as well as Pfizer's Comirnaty for individuals 12 years and older. The State was provided with an extremely limited number of 317 COVID vaccines, and NNPH was able to attain a small allotment. In December, NNPH provided 100 flu, 7 RSV for infants, and 51 COVID doses to the clinic clients.

In addition to clinic vaccine administration, staff continue to headline limited community outreach events. In December, staff participated in events with Eddy House and Mobile Harvests, providing influenza vaccines and some COVID vaccines for adults. The team has a Flu/ COVID POD Event scheduled for January 7 at NNPH.

NNPH Immunization team continues to provide State Opioid Response (SOR) vaccines. This funding source is a supplement to existing the 317 vaccine resources, enhancing the availability of vaccines for uninsured and underinsured adults. Staff anticipates this additional funding source will continue to help adults in the community by providing an expanded number of free vaccines for those who do not have insurance or pay out of pocket costs for vaccines.

Program staff continue the development, case management, and reporting of activities for the Perinatal Hepatitis B Prevention Program (PHBPP). Staff continue to uphold the NSIP required VFC Compliance, Annual Training, and follow-up visits with area practices. Staff are also actively implementing the 2025-2026 VFC program plan for Washoe County which includes 11 compliance visits, 13 IQIP (quality improvement) with prominent multi-site providers, and numerous follow-up visits to date. The team has facilitated VFC vaccine transfers of over 3,000

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vaccine doses to accommodate provider orders and to supplement delays in receipt of VFC influenza in the community.

- b. **Tuberculosis Prevention and Control Program** – The Tuberculosis Prevention and Control Program (TBPCP) continues to operate in alignment with state and federal requirements, with a mission to prevent and control tuberculosis (TB) in Washoe County by reducing morbidity, disability, and premature death due to TB.

Active TB Disease Activities - The TBPCP is managing 3 active TB cases, two pulmonary and one pulmonary/miliary. All active cases are managed in close consultation with the program's designated medical consultant to ensure adherence to evidence-based treatment protocols and to support clinical decision-making for complex cases. Directly Observed Therapy (DOT) is provided for all active TB cases. In December 2025, 32 DOT sessions were conducted.

Latent TB Infection (LTBI) Activities - The TB program prioritizes high-risk populations for LTBI screening and treatment, including recent contacts of active TB cases, individuals with immunosuppression, and those from high TB-endemic countries. The TBPCP is currently managing and/or evaluating approximately 21 clients for latent TB infection (LTBI). In December of 2025, four LTBI evaluations were completed, and three clients initiated LTBI treatment.

Program Coordinator Activities – The program maintains a robust system for documentation and reporting, utilizing the CDC's Report of Verified Case of Tuberculosis (RVCT) and the state's EPITRAX system, with all new cases reported within two weeks of notification. And, over the last year, the TB Program Coordinator role has expanded to include a greater focus on LTBI data collection and analysis. One hundred and twelve positive lab reports were reported in the month of December.

- c. **Reproductive and Sexual Health Services** — The Family Planning Sexual Health Program (FPSHP) continues to provide high-quality, accessible reproductive and sexual health services to the community. The program released its updated 2026 fee schedule in early January.

The FPSHP currently has three candidates scheduled for interviews for the Advanced Practice Registered Nurse (APRN) position in early January. The clinic remains hopeful that the position will be filled by February 1, 2026. The prolonged recruitment process has limited the program's ability to fully expend Title X grant funds. To address this, the program submitted a budget amendment in November and received a Notice of Award in December, approving the use of an intermittent hourly Office Specialist to perform Title X specific duties to support fund spend-down.

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Clinic staff received education on counseling clients regarding the newly approved FDA label change for Depo-Provera, which now includes a warning for meningioma as a “less common” side effect.

Community Health Workers (CHWs) were added to the patient call tracker worksheet to support patient PrEP follow-up and refill requests, enhancing customer service. Additionally, the Disease Investigation Specialist referral tracker spreadsheet was developed to improve communication between the Disease Investigation Team, Public Health Nurse and CHWs. This tool helps address barriers to patient access to the Family Planning Sexual Health Clinic, including transportation assistance provided by CHWs and offsite treatment for sexually transmitted infections by a Public Health Nurse.

One FPSHC Public Health Nurse has been approved to dispense medications, allowing the Public Health Nurse to dispense medications directly during clinic visits. This change has improved clinic flow and increased efficiency.

- d. **Maternal, Child and Adolescent Health (MCAH)** – The Maternal, Child, and Adolescent Health (MCAH) activities encompass several key initiatives, including Lead Screening, Newborn Screening, Cribs for Kids, and the Fetal and Infant Mortality Review (FIMR).

The NNPH Childhood Lead Poisoning team is currently managing 44 open cases involving children under the age of six. These activities are funded through a grant from the CDC, administered by the University of Nevada, Las Vegas.

Public Health Nurses, with the assistance of Community Health Workers (CHWs), continue to follow up and provide coordination, education, and resources to those referred from the Nevada Newborn Screening Program to ensure all infants receive the second newborn screening as required.

In December, NNPH CHWs assisted three individuals through the Cribs for Kids program. CHWs continue to promote initiatives such as the Pregnancy Risk Assessment Monitoring System (PRAMS) and Nevada 211 in their interactions with clients at the classes and other outreach events.

The Fetal and Infant Mortality Review (FIMR) team convenes monthly, excluding the months of June and December. Each meeting typically includes the review of an average of four cases. Additionally, NNPH staff continue to support the Washoe County Community Child Death Review process by providing updates on fetal and infant deaths when requested. The next meeting is scheduled for Wednesday, February 4.

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The Northern Nevada Maternal Child Health Coalition continues to be the Community Action Team supporting implementation of recommendations from the CRT. The Coalition met on December 11th and is currently accepting nominations for board member positions.

- e. **Women, Infants and Children (WIC)** – In order to balance the WIC budget, NNPH administration has determined that it will close the WIC location at 601 W Moana Ln. The savings will be redirected to staff salaries and other expenditures. The current lease for the Moana WIC location expires at the end of June and the WIC program is currently exploring various scenarios and potential opportunities, including providing WIC services at non-NNPH locations which could include sharing space with community partners, or placing more NNPH staff at the 9<sup>th</sup> St WIC location.

Staff is developing a transition and communication plan so that regardless of the final location, all clients will be supported through the location change. This is vital to support clients and to ensure that client numbers do not decrease. WIC is collaborating with Community Health Workers to provide transportation options for Moana clients who need assistance traveling to the new location. Staff are optimistic that this strategy will help prevent a potential decline in client participation. Additionally, WIC leadership is partnering other NNPH programs to expand outreach efforts in neighborhoods with children and families who may be eligible for WIC services.

- f. **Community Health Workers (CHWs)**

**Client Navigation Services** - In December, CHWs assisted 89 clients with navigation services, including support for health insurance, primary care, PrEP (pre-exposure prophylaxis for HIV prevention), housing, transportation, and food.

#### **Key Outreach Events - December 2025**

In December 2025, the CHWs conducted two key outreach activities. On December 2, they participated in the Mobile Harvest event at NNPH, serving 58 low-income families by providing access to nutritious foods, including fresh produce. Later, on December 15, they supported the Centering Families program, engaging six pregnant individuals to share information about WIC services and enrollment through presentations and flyers. These efforts focused on improving food security and promoting maternal health resources within the community.