

**Epidemiology and Public Health Preparedness  
Division Director Staff Report  
Board Meeting Date: October 24, 2024**

**DATE:** October 17, 2024

**TO:** District Board of Health

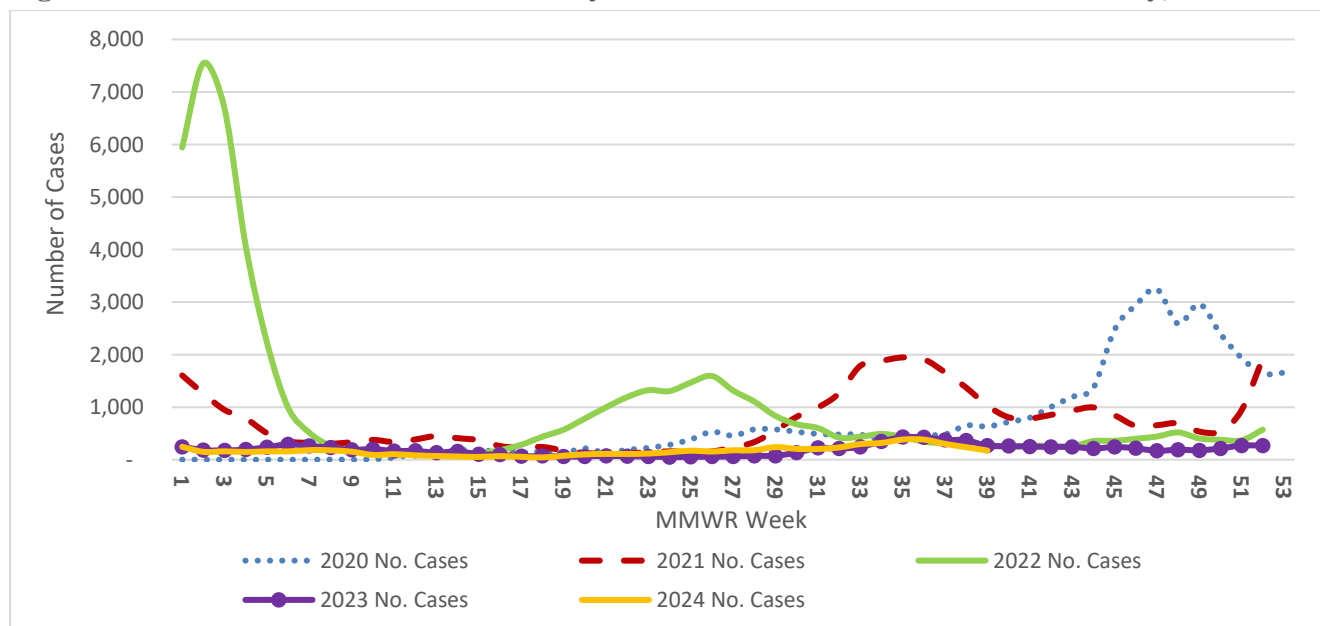
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**SUBJECT:** **Epidemiology and Public Health Preparedness** – Epidemiology and Public Health Preparedness – Epidemiology, Public Health Preparedness, Emergency Medical Services, Vital Statistics

**Epidemiology Program**

**SARS-CoV-2 (COVID-19)** – During the month of September, 1127 new COVID-19 cases were reported among Washoe County residents. Fig 1 provides an overview of the total number of confirmed COVID-19 cases reported to Washoe County to date by MMWR week from 2020 through the end of September 2024. Cases of COVID-19 have been decreasing since the beginning of September following a peak in summer cases during week 35.

**Fig 1. Total Number of COVID-19 Cases by Week of Onset Date\* in Washoe County, 2020-2024**

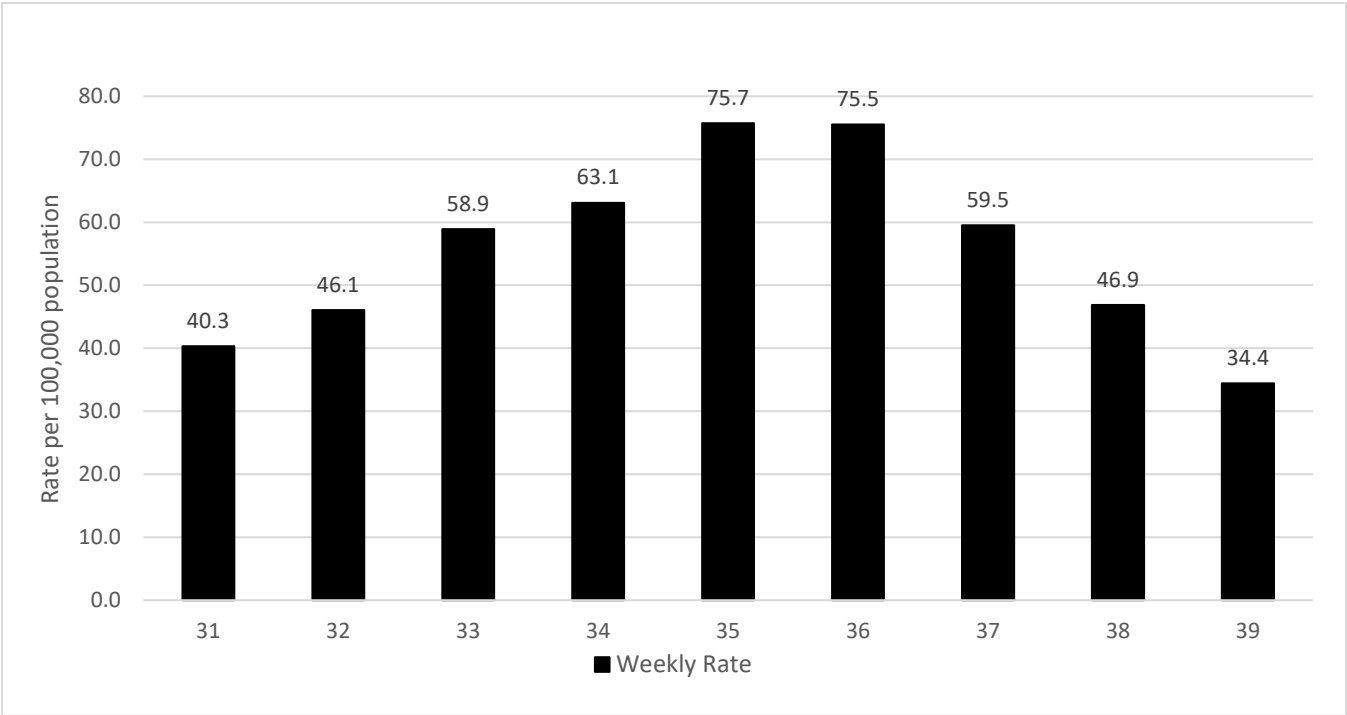


Note: there is no MMWR week 53 in 2021, 2022, or 2023

\*If illness onset date is missing or unknown, specimen collection date is used

Fig 2 illustrates the number of new cases by either illness onset or specimen collection date (if onset date is unknown or case was asymptomatic) per 100,000 population over the course of a nine-week period, from July 28 through September 28, 2024. As of MMWR week 39, Washoe County received reports of 34.4 new cases per 100,000 population.

**Fig 2. Newly Reported COVID-19 Cases Per 100,000 population by MMWR Week, July 28 – September 28, 2024, Washoe County**



Outbreaks – There were 9 newly declared outbreaks in September. Four (4) Gastrointestinal Illness, two (2) Respiratory Illness, and three (3) COVID-19 Confirmed outbreaks.

| Table 1: Number of Outbreaks Declared by Type and Month, 2024 |     |     |       |       |     |      |      |     |      |     |     |     |
|---|-----|-----|-------|-------|-----|------|------|-----|------|-----|-----|-----|
| Type  | Jan | Feb | March | April | May | June | July | Aug | Sept | Oct | Nov | Dec |
| Gastrointestinal Illness                                      | 3   | 6   | 1     | 1     | 3   | 2    | 1    | 0   | 4    |     |     |     |
| Respiratory Illness   | 3   | 5   | 2     | 2     | 1   | 0    | 0    | 2   | 2    |     |     |     |
| Influenza Confirmed   | 6   | 0   | 3     | 0     | 0   | 0    | 0    | 1   | 0    |     |     |     |
| COVID-19 Confirmed  | 1   | 3   | 1     | 1     | 1   | 1    | 5    | 0   | 3    |     |     |     |
| Rash Illness  | 0   | 0   | 2     | 1     | 1   | 1    | 5    | 0   | 0    |     |     |     |
| Other   | 7   | 1   | 0     | 0     | 1   | 0    | 1    | 0   | 0    |     |     |     |
| Total   | 20  | 15  | 9     | 5     | 7   | 4    | 12   | 3   | 9    | 0   | 0   | 0   |

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

In July, there were two (2) Epi News newsletters published:

- **Prevention Strategies for Mpox (CDC HAN):** This Health Alert Network (HAN) Health Advisory was issued to provide information about the ongoing outbreak of clade I mpox virus (MPXV) in Central and Eastern Africa. During 2024, the Democratic Republic of the Congo (DRC) has reported >21,000 suspected clade I mpox cases, its largest annual number on record. This HAN brings awareness to clinicians and alerts travelers to DRC or other countries with sustained spread of clade I mpox, regardless of sexual orientation or gender identity, should be made aware of activities associated with cases and should be vaccinated with two doses of JYNNEOS if they anticipate certain sexual exposures while traveling. Active monitoring for mpox continues to occur in the United States. Although the United States continues to be affected by an ongoing global outbreak of clade II mpox that began in 2022, no domestic cases of clade I mpox have been identified in the United States at this time.
- **2024-25 Influenza Season:** The 2024-25 Influenza (“Flu”) Season starts Sunday, September 29, 2024. On August 29, 2024, the Centers for Disease Control and Prevention (CDC) officially published the Advisory Committee for Immunization Practices (ACIP) recommendations on annual influenza vaccination.<sup>1</sup> There were two changes to the annual recommendations around influenza vaccination for the 2024-25 season: 1) the composition of 2024–25 U.S. seasonal influenza vaccines, with a trivalent vaccine composition this season, and 2) updated recommendations for vaccination of adult solid organ transplant recipients. Highlights of the report are provided in this Epi-News issue.

Other Reports –

- The 2023 COVID-19 Annual Report was published in September 2024. The report summarizes data for COVID cases reported over the course of 2023, including case counts by demographic variables, hospitalizations, and deaths among Washoe County residents. The report can be accessed on NNPH website <https://www.nnph.org/programs-and-services/ephp/communicable-diseases-and-epidemiology/educational-materials/COVID-19.php>. Moving forward, select COVID statistics will be merged with the Influenza Surveillance Report sent out weekly during flu season to start a new Respiratory Virus Surveillance Report starting in October 2024. COVID counts will also continue to be summarized in our communicable disease portal online and in the annual communicable disease reports along with other diseases.
- The 2023 Annual Communicable Disease Summary Report was completed and published in September 2024. The full report is located at <https://www.nnph.org/programs-and-services/ephp/statistics-surveillance-reports/annual-communicable-disease-summary-reports.php>

General Communicable Diseases – EpiTrax reporting system is continuously receiving feedback and updates. Several validation processes are in place to verify reporting is accurate. During September, there were 119 positive labs reported, with 41% resulting in a confirmed, probable, or suspect case.

Epidemiology Program Cross Divisional Projects

- **Extensively Drug Resistant Organisms (XDRO) database** – The Epidemiology Program is working with Tech Services to build a database for storing and tracking cases reported with carbapenem producing organisms (CPO) and *Candida auris* infections, both of which are now recognized as chronic infectious diseases and have the potential to spread from patients to clinicians as well as surfaces and are highly resistant to antimicrobial treatments. These types of infections are being closely monitored from CDC as emergent infections and NNPH has built a strong Healthcare Associated Infection (HAI) prevention program to coordinate, detect, and mitigate spread once these cases are identified. Tech Services has built the front end, secure login portal, and are in the testing phase prior to migrating existing data that NNPH'S Epidemiology Program has tracked since 2018. Technology Services finalized Phase I of the XDRO database and the NNPH Healthcare Associated Infection Coordinator epidemiologist has started to enter data received into the new database. Area hospitals are being contacted to explore the logistics required on electronic feeds of admissions data, and contracts and user agreements are being drafted and reviewed.
- **Foodborne Disease Detection Database (FD3)** – The Epidemiology Program is going through an extensive process in building a database to detect and track foodborne, waterborne, and other enteric illnesses. This database will house both lab-confirmed cases received and interviewed by epidemiologists as well as food-establishment complaints received by the Environmental Health Services Division staff. The multiple data inputs into a single database that should assist in earlier detection of potential outbreaks and trends in enteric conditions and illness. Due to complex coding requirements, Epidemiology Program staff have been working with the CDC to help design and implement the database. Additional edits to the database were provided to the CDC team for review in August and September, and updates and changes are being incorporated.

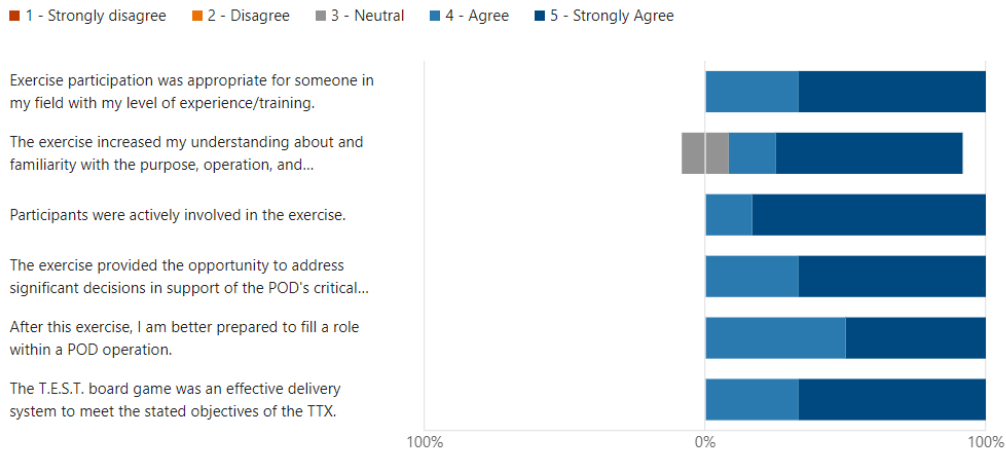
**Public Health Preparedness (PHP) Program**

Public Health Emergency Preparedness (PHEP) -

PHP staff attended the annual Nevada Division of Emergency Management 2024 Regional Integrated Preparedness Planning Workshop (IPPW) for Western Nevada from September 3-5, 2024. The purpose of the IPPW is to identify and prioritize preparedness activities for the coming year.

A tabletop exercise (TTX) using the T.E.S.T. Point of Dispensing (POD) tabletop board game was conducted on September 10, 2024, at the Truckee Meadows Fire Protection District offices. The exercise had 20 attendees representing Washoe County School District, Central Nevada Health District, Quad Counties Public Health, Community Emergency Response Team (CERT), Reno-Sparks Indian

Colony, NNPH, Medical Reserve Corps (MRC), and Revive Health Senior Care Management. The purpose of the TTX was to introduce and train emergency and response partners on the various roles and responsibilities they may assume in a POD setting. Feedback from the hotwash and survey showed participants responded positively to the following questions:



Stop the Bleed (STB) training was hosted by the PHP MRC Program on September 17, 2024. The training was conducted by members of the Washoe County School District Emergency Management team. STB is a national campaign aimed at empowering bystanders to assist in a bleeding emergency before professional help arrives. Seventeen individuals from NNPH, CERT, and MRC attended the training and received individual mini STB kits at the end of the class.

Through funding from the MRC Operational Readiness Award through National Association of County and City Health Officials (NACCHO), a local MRC social media campaign was launched the fall. The goal of the campaign is to provide the community with information about the volunteer program and encourage people to visit the NNPH MRC webpage at [nnph.org/mrc](https://nnph.org/mrc).

Alert Media is now the primary emergency communications tool used by Washoe County to provide staff with urgent and emergent information. Previously, CodeRed was in use, with NNPH granted user access for health district-specific communications and healthcare organizations across the county. PHP staff are coordinating with the County Security Administrator to obtain access to Alert Media and necessary training.

The PHEP program is continuing to plan for a cross-border CHEMPACK exercise, scheduled for October 22, 2024. The CHEMPACK program positions medical countermeasure supplies in communities across the United States for immediate use in cases of organophosphate and/or carbamate poisoning events. This exercise will be conducted in coordination with state and local partners in both Nevada and California, simulating an emergency transport across state lines to support the response to a hazardous materials incident involving substantial casualties.

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The PHEP program is continuing to plan for the Fall Flu Point of Dispensing (POD) exercises in coordination with Community and Clinical Health Services (CCHS) and our community partners. POD

events began in late September and will continue into November, which partners will activate their internal POD plans and practice administering influenza vaccines to their staff. The NNPH flu/COVID POD is scheduled for Saturday, October 19, 2024.

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

The coalition demonstrated remarkable unity and collaboration during the Davis Fire. In response to the incident, the Mutual-Aid Evacuation Agreement (MAEA) was activated. HPP staff and coalition members, including REMSA Health, Technical Medical, and the VA Sierra Nevada Health Care System, assisted in evacuating a skilled nursing facility on September 7, 2024. The evacuation was completed safely, and the facility was successfully re-populated. Given the projected weather for September 11, 2024, HPP staff and coalition members prepared to evacuate up to 400 patients and residents from long-term care facilities within the evacuation and warning zones. Many coalition members were affected by the Davis Fire, whether their facility was evacuated, they were preparing to evacuate, or they were involved in activating the Regional Emergency Operations Center (REOC). Information and resource sharing were critical factors that contributed to the community's resilience. NNPH PHP staff continue to work on lessons learned from the Davis Fire.

The coalition continues to work on activities to address the FY25 goals and objectives. Workgroups focused on high-consequence infectious diseases and business continuity met in September to ensure that plans are consistent across the region and to share best practices. These workgroups will continue to meet regularly. The response rate for the HPP Capability Assessments increased to 35%, up from 32% last year. The results are currently being analyzed and will be shared with the coalition upon completion. These findings will help guide priorities and activities for FY26.

The hazard vulnerability assessment (HVA) template has been revised to better suit our region and reduce confusion. The updated HVA template is expected to be distributed to partners in October for completion. The coalition's HVA results will also guide activities for FY26.

Partner meet-and-greets have been reintroduced to the coalition to reconnect with healthcare partners, engage new staff, and build relationships. In September, HPP and EMS staff visited NeuroRestorative to enhance response capabilities in the region. HPP staff continue to promote the importance of connecting with community partners to foster these relationships.

HPP staff continue to participate in the weekly Hospital Net, a Ham Radio communications drill among hospitals in Northern Nevada and Eastern California. The purpose of the Net is to enhance redundant communications during a disaster.

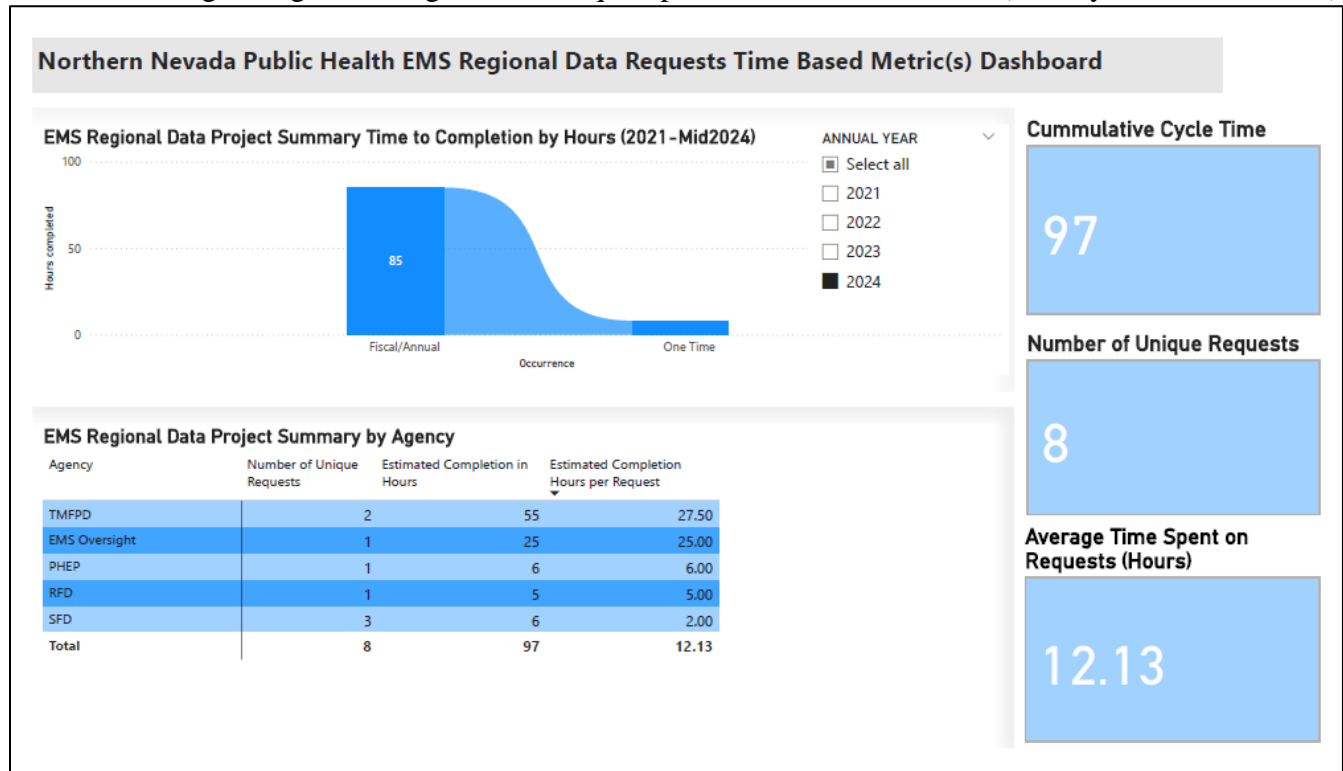
#### Emergency Medical Services (EMS) Oversight Program

EMS Joint Advisory Committee (JAC) – The JAC has been focused on advancing the goals outlined in the Washoe County EMS Strategic Plan for 2023-2028. Partners are utilizing a Teams Dashboard tool to track objectives, many of which are already in progress. Discussions within the JAC regarding revisions to the Franchise Agreement have been on hold and will continue as directed by the DBOH.

EMS Data Standardization – As of September 2024, all three regional fire EMS agencies have transitioned to an online data collection platform that processes and reports standardized information on medical emergency

calls in Washoe County. This uniform approach to data collection and reporting across all fire EMS agencies will enhance the consistency and transparency of medical response within the community.

EMS Data Request Dashboard – Data support is essential for quality improvement and for our various annual reports. The program implemented a dashboard to track the number of data requests from agencies received by the EMS Oversight Program through the data request protocol on an annual basis (January 1 to December 31).



### REMSA Health Exemption Requests -

| Table 1: REMSA Health Exemption Requests FY 2025 |                 |           |         |       |          |
|--|-----------------|-----------|---------|-------|----------|
| Exemption  | System Overload | Status 99 | Weather | Other | Approved |
| July 2024  | 14              | -         | -       | -     | 14       |
| August 2024                                      | 42              | -         | -       | -     | 42       |
| September 2024                                   | 21              | -         | -       | 86    | 107      |

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

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

| <b>Table 2. REMSA Health Percentage of Compliant Priority 1 Responses by Zones FY 2025</b> |               |                         |
|--|---------------|-------------------------|
| <b>Month*</b>  | <b>Zone A</b> | <b>Zone B, C, and D</b> |
| July 2024  | 90            | 96                      |
| August 2024  | 92            | 91                      |
| September 2024   | 91            | 95                      |
| <b>Monthly Average</b>   | <b>91</b>     | <b>94</b>               |
| <b>Year-To-Date**</b>  | <b>91</b>     | <b>94</b>               |

\*Compliance percentage per month is the percentage calculated using the monthly “Chargeable Late Responses” divided by “Compliance Calculate Responses”.

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

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

Mass Gatherings/Special Events – The EMS Oversight Program received and reviewed one (1) application for Mass Gatherings/Special Events in September. It was recently discovered that there was a broken line of communication between another county department that issues permits for mass gatherings/special events and NNPH. EMS and Environmental Health Services (EHS) staff are working closely to remediate this process to ensure NNPH is notified of all potential mass gatherings/special events approved by any county department.

### **Vital Statistics**

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

**Table 1: Number of Transactions for Birth and Death Records- September 2024**

| <b>September</b> | <b>In Person</b> | <b>Mail</b> | <b>Online</b> | <b>Total</b> |
|------------------|------------------|-------------|---------------|--------------|
| Birth            | 676              | 37          | 411           | <b>1124</b>  |
| Death            | 1715             | 24          | 447           | <b>2186</b>  |
| <b>Total</b>     | <b>2391</b>      | <b>61</b>   | <b>858</b>    | <b>3310</b>  |



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

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